

**ELECTRONIC GUIDE TO THESES APPROVED BY PHYSICAL
THERAPY DEPARTMENT FOR NEUROMUSCULAR AND
NEUROSURGICAL DISORDER AND ITS SURGERY
PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

**Physical Therapy Department for Neuromuscular and
Neurosurgical Disorder and Its Surgery**

**Master Degree
2017**

Author	:	Ahmed Abd-elhafezShehab-eldein
Title	:	Relation Between Findings Of Nerve Conduction Study And Hand Function In Carpal Tunnel Syndrome
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	NawalAbd El-RaoufAbou-Shady
	2.	Mye Ali Basheer
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Functional problems occurring in carpal tunnel syndrome patients affecting their activities of daily living. Purpose: The purpose of this study was to insure if there is a relation between nerve conduction studies and hand function findings in carpal tunnel syndrome. Methodology: 40 female patients their age ranged from 30 to 50 years. They have been diagnosed with unilateral or bilateral carpal tunnel syndrome by nerve conduction studies. They were assessed by pinch dynamometer for pinch strength and Boston questionnaire for assessing the symptoms severity and functional status. Results: This study revealed that there is no significant statistical relation between motor or sensory nerve conduction studies and measurements of hand function in carpal tunnel syndrome patients. Conclusion: There is no significant relation between nerve conduction studies and hand function findings in carpal tunnel syndrome patients. Hand function assessment should be done separately from nerve conduction study when assessing carpal tunnel syndrome patients.</p>		
Key words	1.	Carpal tunnel syndrome.
	2.	Nerve conduction study.
	3.	Hand function findings.
Classification number	:	000.000.
Pagination	:	75 p.
Arabic Title Page	:	العلاقة بين نتائج دراسة سرعة توصيل العصب ووظيفة اليد في متلازمة ضيق نفق الرسغ.
Library register number	:	5671-5672.

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Author	:	Ahmed Mohamed Naguib Abd El Fatah
Title	:	Combined Effect of Functional Electrical Stimulation with Treadmill Training on Gait Parameter on Multiple Sclerosis Paraparesis
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nahed Ahmed Salem
	2.	Ebtesam Mohamed Fahmey
	3.	Waleed Talaat Mansour
Degree	:	Master.
Year	:	2017.
Abstract	:	<p>Background: Multiple Sclerosis is one the leading causes of functional disability and gait problems. Objective: The aim of this study is to compare the effect of functional electrical stimulation combined with treadmill training versus treadmill training alone on certain gait Parameters in paraparetic patients due to Multiple sclerosis. Subjects and Methods: Thirty patients of both sexes participated in this study. The patients were assigned randomly into two equal groups, (study and control). Patients in the study group received functional electrical stimulation with treadmill training in addition to selected physical therapy program. Patients in the control group received treadmill training and the same physical therapy program. Biodex gait trainer 2 TM was used to assess selected gait kinematics (step length, walking speed) before and after six weeks training period (end of treatment) for both groups. Results: There was a significant increase in walking speed and step length bilaterally in both groups post treatment. The improvement in gait kinematics was significantly higher in the study group compared to the control group. Conclusion: Functional electrical stimulation with treadmill training is effective in improving gait in paraparesis due to Multiple sclerosis when added to the selected physical therapy program.</p>
Key words	1.	Multiple sclerosis
	2.	functional electrical stimulation
	3.	Treadmill Training on Gait Parameter
	4.	Gait Parameter on Multiple Sclerosis
Classification number	:	000.000.
Pagination	:	92 p.
Arabic Title Page	:	التأثير المزدوج للتنبيه الكهربى بالوظيفة والمران على المشايها الكهربانية على قياسات المشفى مرضى التصلب المتعدد ذى الشلل النصفى العرضى.
Library register number	:	5679-5680.

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Author	:	Amr Abdel Fattah El-Shamandy
Title	:	Montreal Cognitive Assessment Capability after Cognitive Rehabilitation in Stroke Patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Gehan Mousa Ahmed
	2.	Wael Salah Shandy
	3.	Osama Rafaat Ibrahim Elsayed
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Screening tests are necessary tools in detecting post-stroke cognitive dysfunction. Montreal Cognitive Assessment is a sensitive scale for cognitive impairment. However, assessing its capability for detecting patient improvement after cognitive training is still unknown. Purpose: The study was conducted to examine Montreal Cognitive Assessment capability for detecting patient improvement after cognitive rehabilitation in stroke patients. Methods: Forty right sided Egyptian male stroke patients participated in the study. They were evaluated through using Montreal Cognitive Assessment (MoCA) and Computer-based Cognitive Assessment device (RehaCom) before, after cognitive training and after three months as a follow up. Cognitive training was performed by RehaCom system for six weeks, three sessions every other day. Data were collected using the RehaCom system and MoCA scale. Results: It was revealed that RehaCom training significantly improved patient executive functions and working memory. The result revealed also that the mean values of RehaCom percentage of improvements are significantly higher than mean values of MoCA percentage of improvements. Conclusion: Montreal Cognitive Assessment has a lower capability than RehaCom device for evaluating patient progression after Cognitive Rehabilitation in stroke patients.</p>		
Key words	1.	Montreal Cognitive Assessment
	2.	RehaCom.
	3.	Based Cognitive Rehabilitation
	4.	Computer
	5.	Stroke.
	6.	Rehabilitation in Stroke Patients
Classification number	:	000.000.
Pagination	:	100 p.
Arabic Title Page	:	امكانية تقييم مونتريال للإدراك بعد التأهيل الإدراكي في مرضى السكتة الدماغية.
Library register number	:	5437-5438.

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Author	:	Angham Mohamed Adel Ahmed
Title	:	Effect of Monochromatic Infrared Energy On Chronic Sciatic Pain
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Gehan Moussa Ahmed
	2.	Manal Mahmoud Elkattan
	3.	Hayam Mohamed Amin
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Chronic sciatica due to lumbar disc lesion is an important medical and socioeconomic problem that affects the quality of life. The most important symptom is radiating leg pain. Objective: This study was conducted to determine the effect of adding monochromatic infrared energy to selected physical therapy program in the treatment of chronic sciatic pain. Methods: Thirty patients with chronic sciatica due to posterior lumbar disc prolapse L4-5/L5-S1 participated in this study. The patients were assigned into two equal groups (fifteen patients each): Group A (study group) received monochromatic infrared energy along the distribution of sciatic pain, ultrasound therapy on lower back area and Exercise program in the form of (static abdominal, bridging, pelvic rocking and stretching exercise). Group B (control group) received ultrasound therapy on lower back area and the same Exercise program. The treatment sessions were conducted three times per week (every other day) for four successive weeks. Assessment of pain, functional level and back range of motion were done using visual analogue scale, Arabic translated form Oswestry disability index and back range of motion device (BROM) respectively before and after four weeks of treatment. Results: post treatment results revealed that there was a significant improvement in pain intensity in favor to group (A), It was also observed that there was significant improvement in functional abilities in group (A) Back range of motion showed significant improvement of extension and rotation in both groups with no significant improvement in flexion, side bending and rotation to non affected side. Conclusion: Adding monochromatic infrared energy to selected physical therapy program is effective in improving pain, functional abilities and lumbar range of motion (extension and rotation to affected side).</p>		
Key words	1.	Sciatica
	2.	Ultrasound
	3.	Exercise
	4.	Monochromatic infrared
Classification number	:	000.000.
Pagination	:	89 p.
Arabic Title Page	:	تأثير الطاقة الضوئية تحت الحمراء احاديه اللون على الام عرق النساء المزمن.
Library register number	:	5355-5356.

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Author	:	Fatma Mohamed Abdel Azim
Title	:	Effect of low level laser therapy on complex regional pain syndrome After stroke
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nahed Ahmed Salem.
	2.	Islam Mahmoud Abd Allah Al-Azab
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background and Purpose: The common complication after stroke is pain and dysfunction of shoulder of paralyzed arm, as well as the swelling of the hand. Different noninvasive modalities of treatment were used to reduce pain of shoulder and swelling of hand. The aim of this study was to determine the effects of LASER therapy on complex regional pain syndrome in stroke patients. Subjects: 30 stroke patients with pain and dysfunction of shoulder of paralyzed arm, as well as the swelling of the hand participated in this study. Methods: The patients were divided into two equal groups. The study group received 15 successive session three times per week for 5 weeks of low level LASER therapy over stellate ganglia and sympathetic chain. The control group received placebo treatment sessions of low level LASER therapy. Both groups received a selected physical therapy program for complex regional pain syndrome patients for total six weeks. Visual analogue scale, DASH index, barthel index, volumeter measurement were performed for all patients before and after treatment sessions. Results: The results revealed that, patients of the study group (A) showed greater improvement in shoulder pain compared with placebo stimulation group. Volumeter measurement shows a significant decrease of hand edema in all patients receiving active treatment than the control group regarding to visual analogue scale results revealed that there was no statistical significance between before and after treatment in group (B). ADL function of paralyzed arm using bartel index and DASH index showed more improvement in the study group compared to the control group. Conclusions: Low level LASER therapy reduces pain in shoulder and edema of hand in complex regional pain syndrome patients with stroke.</p>		
Key words	1.	Low Level Laser Therapy
	2.	Complex Regional Pain Syndrome
	3.	Stroke
	4.	laser on pain after stroke
Classification number	:	000.000.
Pagination	:	91 p.
Arabic Title Page	:	تأثير العلاج بالليزر منخفض الشدة على أعراض الألم الجزئي المركب بعد السكتة الدماغية.
Library register number	:	5513-5514.

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Author	:	Hend Mohammad Elsayed Ismail El-Sharkawy
Title	:	Efficacy of transcranial magnetic therapy in patients with chronic low back pain
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Hussein Ahmed Shaker
	2.	Ebtesam Mohamad Fahmy
	3.	Alshimaa Sobhey Khalil
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Chronic Low Back Pain (CLBP) is one of the most leading causes of disability, which interfere with work performance and quality of life. The main problem of (CLBP) is not only pain but also impaired postural stability. Objective: This study aimed to investigate the efficacy of transcranial magnetic stimulation on pain relief, balance, functional disability and lumbar mobility in patients with chronic mechanical low back pain. Subjects and Methods: Thirty patients with CLBP (of both sexes) participated in the study. Patients were randomly assigned into two equal groups; study group: received active repetitive transcranial magnetic stimulation (rTMS) and control group: received sham (rTMS). Pain intensity was measured using visual analogue scale, overall stability index was evaluated using Biodex Balance System, functional disability was evaluated using Oswestry Disability Index and lumbar mobility was evaluated using finger to floor test. Both groups were evaluated before and after 10 sessions of reparative transcranial magnetic stimulation over five successive weeks. Results: There was significant decrease of pain, and significant improvement of balance, functional ability and lumbar mobility in both groups after treatment ($p < 0.05$). The improvement was more significant in the study group compared to the control group ($p < 0.001$) Conclusion: Repetitive transcranial magnetic stimulation is a non-invasive effective technique that can be used in the management of patients with chronic low back pain.</p>		
Key words	1.	chronic low back pain
	2.	transcranial magnetic stimulation
Classification number	:	000.000.
Pagination	:	87 p.
Arabic Title Page	:	تأثير التدرج من العلاج المائي الى التمارين الارضية على الاتزان فى اطفال الشلل الدماغى.
Library register number	:	5491-5492.

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Author	:	Kholoud Moussa Soliman
Title	:	Relation between postural stability and vertigo in cervicogenic vertebrobasilar insufficiency patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nawal Abd El Raouf Abu Shad
	2.	Ayman Ismaiel Kamel
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Vertigo is the sensation of spinning; it is the most recognizable and quite often the sole symptom of decrease blood flow in the vertebrobasilar distribution. The purpose of this study was to determine if there is a relation between postural stability and vertigo in patients with cervicogenicvertebrobasilar insufficiency(VBI). Methodology: A referred diagnosed thirty vertebro basilar insufficiency patients from both sexes, with age ranged from (45-60) years old, were assessed as one group using Biodex Stability System (BSS) including dynamic limit of stability test and dynamic balance test, Doppler ultrasound including flow volume of vertebral artery, and clinical tests using (Vertigo Symptom Scale–short form, Falls Efficacy Scale and and Headache Disability Scale). The study was done in out clinics of Kasr Al- AinyHospital , faculty of physical therapy- Cairo University , and physical therapy outpatient clinic of Ahmed Maher Teaching Hospital. Results: this study revealed that there is a significant correlation between postural stability and vertigo in cervicogenic VBI patients. Conclusion: from the clinical tests and BSS tests for assessment of vertigo and postural instability in patients with cervicogenic VBI, the statistical results revealed that there is a significant relation between vertigo and postural instability.</p>		
Key words	1.	Vertigo
	2.	postural stability
	3.	cervicogenicVBI
	4.	vertigo in cervicogenic VBI
Classification number	:	000.000.
Pagination	:	100 p.
Arabic Title Page	:	علاقه ثبات القوام والدوار فى مرضى قصور الشريان الفقارى القاعدى الناتج عن خلل فقرات العنق.
Library register number	:	5453-5454.

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Author	:	Manar El-sayed Ismail Hassan
Title	:	Influence of Pelvic Inclination on Sit to Stand Task in Stroke Patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Moshera Hassan Darwish
	2.	Sandra Mohamed Ahmed
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: A stroke results in an impaired sit to stand (STS) task. Few studies addressed the effect of spine and pelvis separately on functional activities in stroke patients. The purpose of this study was to assess the angles of pelvic inclination (anterior and posterior pelvic tilt angles) during sitting position and to analyze the influence of sagittal pelvic tilt angles on ability to perform STS task during rising from a chair in stroke patients. Methods: 30 male hemi-paretic stroke patients (GI) and 15 male age-matched healthy volunteer subjects (GII) participated in this study. Stroke patients were assigned into two equal groups (Ia and Ib). Group Ia included the stroke patients with right side affection. Group Ib included the stroke patients with left side affection. Sagittal pelvic tilt angles were measured by using the palpation meter inclinometer during sitting position. Sagittal pelvic tilt angles were assessed during initiation, mid and end of STS task using two dimensional video based motion analysis system. Time of five repetitions sit to stand test was used to assess the ability to perform sit to stand task. Results showed a significant increase of posterior pelvic tilt during static sitting and a significant decrease of maximum induced anterior pelvic tilt in both stroke patients groups. A significant decrease showed in anterior pelvic tilt angle during initiation and mid of STS task in both stroke patients groups. A significant increase in time taken for five repetitions sit to stand task test in both stroke patients groups ($P<0.05$). Conclusion: Abnormal pelvic alignment and motion affects the functional performance of stroke patients during sitting and sit to stand task. Assessment of pelvis may provide further insight into treatment planning in stroke patients.</p>		
Key words	1.	Stroke
	2.	Pelvic inclination
	3.	Posterior pelvic tilt angle.
	4.	Anterior pelvic tilt angle
	5.	Sit to stand task
	6.	Sitting position
Classification number	:	000.000.
Pagination	:	124 p.
Arabic Title Page	:	تأثير ميل الحوض على القيام من وضع الجلوس في مرضى السكتة الدماغية.
Library register number	:	5503-5504.

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Author	:	Mostafa Abdallah Soliman
Title	:	Effect of Forward Head Posture Correction on Cervicogenic Headache Patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nawal Abou Shady
	2.	Ayman Esmail
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>The purpose of this study was to investigate the influence of specific forward head posture correction & selected physical therapy program in cervicogenic headache patients with forward head posture attitude. Methods: Thirty patients were assigned into two equal groups, a study group (I) and a control group (II). The (G I) received selected physical therapy program (US, TENS, Laser & Therapeutic Exercise) in addition to specific forward head posture correction, while, (G II) received the same selected physical therapy program. The patients were assessed before & after treatment with X-ray to determine degree of forward head through cervical angle, visual analogue scale to measure pain (headache) intensity (pre & post) and migraine disability assessment questionnaire, treatment session had been done to the patient in both groups for 45 minutes, 3 times per week for 4 weeks day after day. Results: There was a significant difference between both groups in cervical angle by x-ray, visual analogue scale, migraine disability assessment questionnaire before and after one month of treatment. Conclusion: specific forward head posture correction combined with selected physical therapy program is effective in improving of cervicogenic headache.</p>		
Key words	1.	specific forward head posture
	2.	visual analogue scale
	3.	cervicogenic headache
Classification number	:	000.000.
Pagination	:	104 p.
Arabic Title Page	:	تأثير تصحيح وضع الرأس الامامي على مرضى الصداع العنقي.
Library register number	:	5341-5342.

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

Author	:	Omar Mohamed Bassiouny
Title	:	Neural gliding versus neural tension in chronic discogenic sciatica
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nawal Abd El-Raouf Abou Shady
	2.	Halaa Rashad Al Habashy
	3.	Wael Salah Shendy
Degree	:	Master.
Year	:	2017.
Abstract	:	
<p>Background: Sciatica is a painful condition and can be a major cause of disability, work loss and presentation to health-care. Purpose: this study was to compare between the effect of gliding and tension techniques of neurodynamic mobilization on pain intensity, latency and amplitude of H-reflex in patients with chronic discogenic sciatica. Subjects: Forty five male patients suffer from unilateral sciatica from disc lesion at L5-S1 for six months duration were selected from outpatient clinic of Kaser El Aini, Hospital and Faculty of Physical Therapy, Cairo University with age from 40 to 55 years. They were divided into three equal groups; (A), (B) and (C). Procedure: Group A received selected physical therapy program (TENS and ultrasonic). Group B received selected Physical Therapy program, straight leg raising (SLR) and SLUMP neural glide exercises. Group C received selected Physical Therapy program and SLR and SLUMP neural tension exercises. For all groups treatment conducted for (4) weeks, (3) times per week, day after day, 45 min. per session. Measurement were taken before and after (4) weeks of the treatment. Measurement of pain carried out by Numeric Pain Rating Scale and assessment of the H-reflex amplitude and latency was done by Computerized Electromyography device. The results: Revealed that, there was a significant reduction of pain intensity in all groups (A, B and C) and significant reduction of H-reflex latency in both groups (B and C) ($P < 0.05$). Comparison between post treatment values of pain, H-reflex amplitude and latency showed no significant difference between the three groups ($p\text{-value} > 0.05$). Conclusion: Both Neural gliding and Neural tension techniques of neurodynamic mobilization are effective in reducing pain intensity and H-reflex latency in patients with chronic discogenic sciatica.</p>		
Key words	1.	Neural gliding
	2.	neurodynamic mobilization
	3.	tension
	4.	Numeric Pain Rating Scale
	5.	H-reflex amplitude
	6.	latency
	7.	SLUMP
	8.	Sciatica
	9.	strait leg raising
Classification number	:	000.000.
Pagination	:	120p.
Arabic Title Page	:	تحريك العصب مقابل الشد العصب في الالم عصب النسا الغضروفي المزمّن.
Library register number	:	5615-5616.

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Author	:	Shimaa Ahmed Abd El-Baset El-Kashif
Title	:	Prevalence of lumbosacral radiculopathy among dentists
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Eman Samir Fayez
	2.	Neven AbdEl-Lateef
Degree	:	Master.
Year	:	2017.
Abstract	:	Master.
<p>Background The dentists are at high risk of lower backache problems. Aim of the study was to detect point prevalence of work related the lumbosacral radiculopathy (low back pain and sciatica) among dentists who are currently working in ministry of health in Cairo – Egypt. Methods specific questionnaire based on Roland Morris questionnaire and Modified Roland Morris questionnaire (RMQ, RMQ-L) were given to dentists who are currently working in ministry of health in Cairo – Egypt. Five hundred volunteer dentists participated in this study. The results of this study showed that the point prevalence of Work Related Low Back Pain (WRLBP) was 60.8%, point prevalence work related leg pain was 35.2%. There was no statistical significant difference between female and male subjects in the median values of Visual Analogue Scale (VAS), Roland Morris questionnaire (RMQ) back pain. On the other hand, the median value of Modified Roland Morris questionnaire (RMQ_L) was significantly higher in female group than in male. The median value of VAS was significantly higher in full time than in part time. On the other hand, there was no statistical significant difference between full time and part time in the median values of Roland Morris questionnaire (RMQ) back pain and Modified Roland Morris questionnaire (RMQ_L). The median value of VAS was significantly higher in training group than in non-training group. On the other hand, there was no statistical significant difference between training and non-training in the median values of Roland Morris questionnaire (RMQ) back pain and Modified Roland Morris questionnaire (RMQ_L). The median value of VAS was significantly higher in pediatric dentists (PEDO) than both general practitioner dentists (GP) and other specialties dentists. There was a positive correlation between Roland Morris questionnaire (RMQ) back pain and years of experience, VAS and RMQ leg. On the other hand, there was no statistical significant correlation between Roland Morris questionnaire (RMQ) back pain and age and Body Mass Index (BMI). There was a positive correlation between Modified Roland Morris questionnaire RMQ leg and VAS. On conclusion Work-related low back pain is common among Egyptian DENTISTS at the POINT prevalence, Making Cairo’s dentists at a high-risk group, which necessitate appropriate intervention to manage such squal.</p>		
Key words	1.	prevalence
	2.	low back pain.
	3.	sciatica
	4.	dentists
	5.	Egyptian
	6.	lumbosacral radiculopathy
Classification number	:	000.000.
Pagination	:	68 p.
Arabic Title Page	:	انتشار اعتلال جذور الفقرات القطنية العجزية بين أطباء الأسنان.
Library register number	:	5709-5710.

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Author	:	Tamer Mohamed Mohamed Bahnasy
Title	:	Efficacy of McKenzie Extension Approach On Derangement Syndrome For Lumbar Radiculopathic Patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Abd El-Aleem Abd El-Fatah Attia
	2.	Shereen Fathi Sheir
	3.	Islam Mahmoud Abd Allah Al-Azab
Degree	:	Master.
Year	:	2017.
Abstract	:	<p>Background: The aim of this work was to investigate the efficacy of McKenzie extension approach on derangement syndrome for discogenic lumbar radiculopathic patients. Subjects and Methods: Thirty lumbar radiculopathic patients from both sexes represent the sample of this study. The patients' ages ranged from 35 to 45 years. They were assigned randomly into two equal groups; the study group (Group A) and the control group (Group B), control group treated with selected physical therapy program without Mckenzie program. Study group treated with Mckenzie extension program on L4-L5 as the directional preference determine. The duration of treatment was four weeks, three times weekly, and day after day. The radicular manifestations and centralization phenomenon in both groups were assessed pre and post treatment objectively by The Hoffman reflex (H-reflex latency was evaluated by electromyography unit) and clinically by Short form of Visual analogue scale (VAS), Oswestry Disability Index (ODI) and Algorithm of MDT assessment in both groups. Results: Spinal extension exercises produced a significant reduction of low back pain, leg pain severity and a significant decrease of H-reflex latency. Conclusion: Spinal extension exercises is an effective treatment program for patients with unilateral discogenic lumbar radiculopathy as a result of disc herniation at the level of L4-L5. and effective in centralization of low back pain.</p>
Key words	1.	Lumbar radiculopathy
	2.	H-reflex.
	3.	Derangement syndrome
	4.	McKenzie extension approach
Classification number	:	000.000.
Pagination	:	99 p.
Arabic Title Page	:	فاعلية منهج الفرد لماكينزى فى متلازمة الاضطراب فى مرضى اعتلال الجذور القطنية.
Library register number	:	5385-5386.

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

Author	:	Tarek Mohamed Youssef
Title	:	Effect of transcranial direct current stimulation on gait of stroke patients
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Gehan Mousa Ahmed
	2.	Amira Mohamed ElGohary
	3.	Islam Mahmoud Abdallah ELazab
Degree	:	Master.
Year	:	2017.
Abstract	:	<p>Background: Stroke is the most leading cause to functional disability and gait problems Purpose: to evaluate the effect of transcranial direct current stimulation (tDCS) on selected gait kinematics (walking speed, gait cycle, step length, time on each foot and ambulation index) in stroke patients. Subjects: thirty male ischaemic stroke patient were participated in this study(their ages ranged from 50-65 years).Methods: The patients were assigned into two equal group; Group A received anodal tDCS in addition to selected physical therapy program (strengthening exercises, stretching exercises, weight shifting exercises, and balance exercises) Group B received the same selected physical therapy program only . Results: There is a significant increase in selected kinematic gait parameters and there is significant decrease in Time up and GO test scores post treatment within both groups. The improvement in gait parameter post treatment was significantly higher in the Group A compared to control group B. Conclusion: In view of the results of this study, it can be concluded that tDCS has a beneficial effect on selected gait kinematics in stroke patients.</p>
Key words	1.	Stroke
	2.	Time up and Go test.
	3.	Gait parameters
	4.	Transcranial direct current stimulation
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