



[Abstract:1368]

## BLADDER CATHETERISATION: AN UNFINISHED BUSINESS

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**Objectives:** To assess the prevalence and appropriateness of bladder catheterisation in patients admitted to Internal Medicine Department.

**Materials and Methods:** An observational, descriptive, cross-sectional study of patients admitted to an Internal Medicine Department of a second level hospital was carried out.

**Outcomes:** A total of 54 patients were analysed, with a mean age of 76 years and a median length of stay of 8 days. The percentage of patients with bladder catheterisation at the time of the study was 20.37%. Among those who were not catheterised at the time of screening, 85.1% had bladder catheterisation at some time during their hospital stay.

Among the patients catheterised, 26.3 % had a clear indication for catheterisation. It should be noted that the time of catheterisation was in the Emergency Department in 79.62% of cases.

**Discussion:** Bladder catheterisation is a frequent procedure among patients admitted to our department. Although catheterisation is removed during admission in a large percentage of patients, there are still many patients who remain catheterised without a clear indication, and many catheterisations are inadequately maintained. This is especially relevant, since bladder catheterisation involves potential risks associated with the procedure such as infections, haematuria or contribution to the development of confusional syndromes.

**Conclusions:** Bladder catheterisation is a common invasive procedure in patients admitted to Internal Medicine, with room for improvement in indications and maintenance. Our study highlights the need to implement patient safety strategies that allow the procedure to be adjusted to its indications and maintained in accordance with quality standards.

**Keywords:** bladder catheterisation, risk, prevention

[Abstract:1514]

## THE VACCINATION ACCEPTANCE, CONFIDENCE AND CONVICTION ON INFLUENZA IN THE MIDDLE EAST, EURASIA AND AFRICA AMONG HEALTHCARE PROVIDERS (VACCIMENA-HCP) PROJECT 2023: DETERMINANTS OF VACCINATION BEHAVIOR

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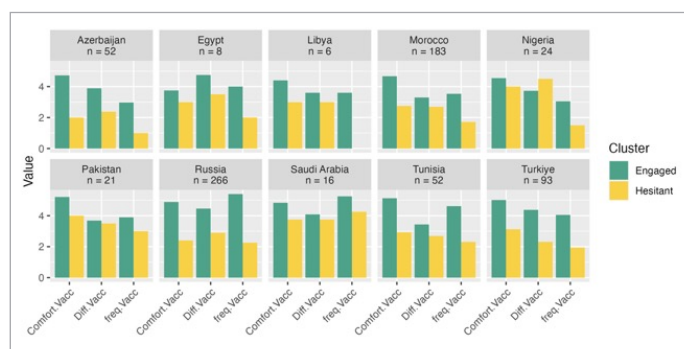
**Purpose:** Annual vaccination is the most effective way to prevent and control the health and economic burden caused by seasonal influenza. Healthcare workers (HCWs) play a crucial role in vaccine acceptance and advocacy for their patients.

**Methods:** HCWs from 10 countries (Azerbaijan, Egypt, Libya, Morocco, Nigeria, Pakistan, Russia, Saudi Arabia, Tunisia, and Turkey) were surveyed with opportunity sampling between 20<sup>th</sup> December 2022 and 1<sup>st</sup> March 2023. Motors of influenza vaccination acceptance (MoVac-Flu) and motors of engagement with vaccination advocacy (MovAd) scales were used.

**Findings:** Among a final sample of 721 responses, Russia was the leading country to enrol 37% of all the respondents. Overall, 28% demonstrated a hesitant and 30.5% demonstrated a diffident self-vaccination behaviour. Hesitant HCWs had extremely rare habitual vaccination and rare seasonal influenza vaccination advocacy behaviours. On the other hand, those who felt engaged with influenza vaccination more likely vaccinated themselves, as well as feeling easier to implement the influenza vaccination in their practice. Those who felt engaged towards influenza vaccination also felt confident to advocate and vice-versa. Evidence suggests that the strength of this relationship between engagement and confidence may vary across countries.

**Conclusions:** Membership to the clusters was a strong predictor of vaccination behaviours and attitudes overall. For those who are hesitant and diffident, education on the vaccines and vaccine preventable diseases are important. The research provided reassurance on the significance, influence, and safety of vaccination, as well as the burden of influenza and the need for education on vaccine communication.

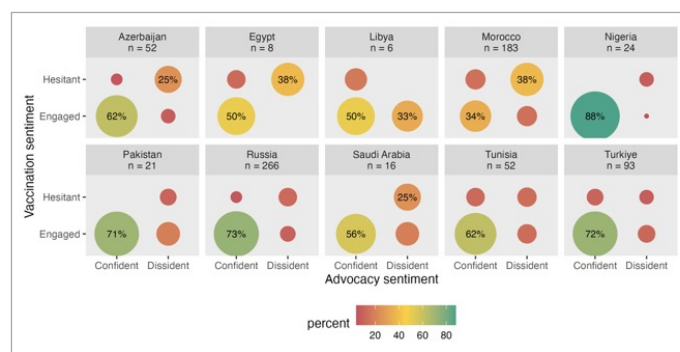
**Keywords:** influenza, vaccination, healthcare workers, hesitancy, ME'NA-ISN



**Figure 1.** Average ratings for comfort with getting vaccinated, difficulty with incorporating vaccination in one's practice, and average frequency of getting the flu vaccine, from 1 to 7 as a function of vaccination sentiment cluster in each country sampled.



**Figure 2.** Average ratings for the frequency of recommending flu vaccination to colleagues as a function of advocacy sentiment cluster in each country sampled.



**Figure 3.** Proportion of observations by vaccination and advocacy cluster membership

[Abstract:1609]

## OUR RATE OF DETECTING PATHOLOGICAL FINDINGS IN INDIVIDUALS WHO APPLIED TO OUR POLYCLINIC FOR GENERAL HEALTH CHECK-UP: AN EXAMPLE OF A UNIVERSITY HOSPITAL

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We aimed to reveal the health problems detected as a result of screening in people over the age of 40 who applied for a general health check. Individuals who did not have any symptoms but applied only for a routine general health check, were included in the study.

The anamnesis, physical examinations, biochemical test results and complete urinalysis results of the individuals who applied to our polyclinic during 2023 are recorded. In addition, posterior anterior lung X-rays and electrocardiography (ECG) results and mammograms of the women were retrospectively evaluated, and the diseases diagnosed for the first time were determined.

The average age of the 200 adults included in the study was 54.17 years old, 116 of them were women and 84 were men. The average of body mass indexes is 26.48. The number of individuals without any pathology detected in blood and urine tests was 34, and various values were within pathological limits

in the examinations of 166 patients. The number of people with dyslipidaemia (LDL >160 mg/dl) was 45. The number of people with impaired fasting glucose was detected was 47; the number of people diagnosed with Diabetes Mellitus was found to be 3. The number of people with pathological findings in their ECG was 49. As a result of the examinations, 6 people were diagnosed with Essential Hypertension and 1 patient, who was referred for Gastroenterological examination, was diagnosed with right colon cancer and 1 patient was diagnosed with breast cancer.

**Keywords:** general health check, pathology, internal medicine

[Abstract:1903]

### EVALUATION OF THE RELATIONSHIP BETWEEN CRP/LYMPHOCYTE RATIO AND BLOOD SUGAR REGULATION AND OTHER METABOLIC PARAMETERS IN PATIENTS WITH TYPE 2 DIABETES MELLITUS

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C-reactive protein to lymphocyte ratio (CLR) has been shown to be associated with diseases characterized by chronic, low-grade inflammation. Since type 2 diabetes (T2DM) is also associated with inflammation, we aimed to study the association between CLR and T2DM. Patients with T2DM who presented to internal medicine outpatient clinics of our institution were divided into 2 groups according to their glycosylated hemoglobin (HbA1c) levels as well-controlled (HbA1c<7%) and poorly controlled (HbA1c≥7%) T2DM groups. Subjects assigned as healthy in routine check-up were included as control group. CLR values of the well and poorly controlled diabetics and control cases were compared. CLR of T2DM group (3.51 (0.03-21.78)) was significantly higher than that of the controls (0.65 (0.02-2.92)) ( $p<0.001$ ). CLR was found to have a sensitivity of 63.2% and a specificity of 97.3% in predicting T2DM. The CLR value of patients with poor diabetic control was 4.76 (0.06-21.78), while the CLR value of patients with well controlled disease was 2.53 (0.03-12.07) ( $p<0.001$ ). The sensitivity and specificity of the CLR in demonstrating poor diabetic control was 41.2% and the 86.1%, respectively. In conclusion, elevated CLR in T2DM patients and even more increased levels in poorly controlled diabetics suggest that CLR could be a useful additional diagnostic tool in treatment follow-up of the T2DM population.

**Keywords:** type 2 diabetes mellitus, c-reactive protein, CRP/lymphocytes, inflammation, biomarker

[Abstract:2214]

### CLINICAL EFFICACY OF IRSAL-I-ALAQ (HIRUDOTHERAPY) IN THE MANAGEMENT OF VENOUS ULCER- A CASE STUDY

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**Background:** Venous ulcers, or stasis ulcers, are common in general practice and can lead to chronic wounds, cellulitis, and septicemia if neglected. They result from chronic venous insufficiency and often require surgical intervention, with associated post-surgical complications in conventional medicine. Unani regimen like Irsal-e-Alaq (Hirudotherapy) offers an effective management approach for venous ulcers, providing an alternative to surgery and improving quality of life.

**Objectives:** This case study explores the impact of Irsal-e-Alaq (Hirudotherapy) on venous ulcers, aiming to reveal its effects and benefits.

**Intervention:** A 37-year-old male presented with a persistent left lower leg ulcer. Symptoms included swelling, pain, non-purulent discharge, and skin hyperpigmentation. Treatment involved applying two leeches over the left medial malleolus for 6 weeks—initially twice weekly for 2 weeks, then once a week for 4 weeks. Weekly evaluations assessed wound parameters, pain via VAS scoring, and wound count.

**Results:** Initially, the wound was 4x3x2 cm with dark granulation tissue, 0% epithelization, and issues like discharge, pain, and smell. After six weeks of treatment, the ulcer completely healed with 100% epithelization.

**Conclusions:** Irsal-e-Alaq shows evident advantages in venous ulcer treatment, enhancing patients' quality of life. However, conclusive studies with robust controls, randomization, blinding, and extensive follow-ups using large sample sizes are crucial to establish its effectiveness in managing venous ulcers.

**Keywords:** venous ulcers, Irsal-e-Alaq, hirudotherapy



Figure 1. After-LEECH THERAPY.



*Figure 2. Leech doing the work.*