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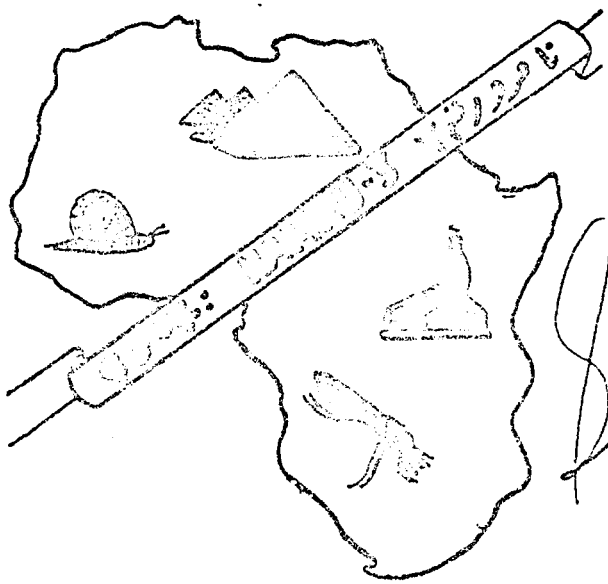

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URINARY SCHISTOSOMIASIS IN EGYPT: FURTHER RADIOLOGICAL CORRELATIONS

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By

S.W. Young, Z. Farid, B. Bassily, N.A. El Masry

U. S. NAVAL MEDICAL RESEARCH UNIT No.3
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FPO NEW YORK 09527

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URINARY SCHISTOSOMIASIS IN EGYPT: FURTHER RADIOLOGICAL CORRELATIONS

SIR,—Data which formed the basis for the communication in this issue of the *Transactions* by LEHMAN et al., summarizing our experience in Egypt with 200 cases of *S. haematobium* were collected over approximately an 8-year period beginning in 1962. Since this study we have been able to extend our radiological survey of Egyptian male patients to include an additional 153 patients aged 6 to 60 years (mean age 19·5 years), which brings the total number of cases reported from our hospital to 353.

Of these 153 additional patients studied during the last two years, 93 had obstructive uropathy (mean age 19·3 years) and 60 (mean age 19·6 years) had no sign of urinary tract obstruction. The frequency distribution of other radiologically demonstrable lesions in patients with obstruction was as follows: calcified bladder, 55; calcified ureter, 13; ureteral stenosis, 12; ureterolithiasis, 7; bladder filling defects, 8; ureteral filling defects, 10; post-voiding bladder retention (77 examinations), 69; bladder diverticulum, 3; and bladder stone, 2.

Of the 60 patients with no obstruction the frequency distribution was: calcified bladder, 20; calcified ureter, 3; ureteral stenosis, 1; ureterolithiasis, 0; bladder filling defects, 4; ureteral filling defects, 3; post-voiding bladder retention (51 examinations), 47; bladder diverticulum, 6; and bladder stones, 0.

The total findings in the combined study of 353 urograms, therefore, are: obstructive uropathy, 214; calcified bladder, 162; calcified ureter, 47; ureteral stenosis, 94; ureterolithiasis, 19; bladder filling defects, 69; ureteral filling defects, 80; and post-voiding bladder retention, 143.

The frequency of obstructive uropathy in the two series is similar. A significant association of obstructive uropathy with ureteral stenosis and lithiasis was observed in both studies; however, bladder retention was not significantly more frequently observed in the group of patients with obstruction in the second series as it was in the first 200 cases. The number of patients with evidence of ureteral stenosis, and ureteral and bladder filling defects was decreased in the last 2 years, while the occurrence of bladder retention has become 3 times more common.

Other than supposition regarding the effects of the improved rural public health efforts, and more effective oral treatment programmes, we have no suggestions to explain these changes in frequency distribution.

We are, etc.,

S. W. YOUNG
Z. FARID
S. BASSILY
N. A. EL MASRY
Department of Tropical Medicine,
NAMRU-3,
Fleet Post Office, New York 09527, U.S.A.

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