

PS-1

METASTATIC PULMONARY LIPOSARCOMA: COMPLETE RESECTION GIVES BETTER RESULTS?

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Introduction: Primary liposarcoma of the lung is extremely rare with only 11 cases reported worldwide. However, metastatic pulmonary liposarcoma was reported around 15% out of all metastatic pulmonary soft tissue sarcoma.

Case report: A case of 53 year-old man who presented with mass at left scapular region was referred to our unit in June 2006. He had history of thigh liposarcoma 14 years back which was operated and received a course of radiotherapy. However, he denied of having chest pain, shortness of breath or any other respiratory symptom. Biopsy of the mass came back as liposarcoma (round cell type). CT scan showed presence of left pleural base mass. He underwent left posterolateral thoracotomy and excision of infrascapular as well as intrathoracic mass 3 months later. Post operatively was complicated by hypovolemic shock and anemia. He was put under intensive care monitoring and discharged well at day 52 post-operatively. He was supposed to come for oncology appointment in December 2006 for radiotherapy.

Discussion & Conclusions: Pulmonary liposarcoma can be divided into 4 main subtypes; myxoid, round cell, well differentiated and pleomorphic, which have different post operative survival rate. Five years survival rate of metastatic liposarcoma varies from as high as 77% in myxoid type as low as 18 % in round cell type. Even though metastatic pulmonary liposarcoma has the worst prognosis compared to other soft tissue sarcomas, some studies and centres believe that complete resection will give better prognostic value in term of survival rate and recurrences.

PS-2

CHARLES BONNET SYNDROME IN ADVANCED GLAUCOMA

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Introduction: To report a case of an elderly patient with Charles Bonnet Syndrome. Charles Bonnet Syndrome is characterized by visual hallucinations alongside deteriorating vision and is usually seen in elderly patient.

Case Report: A 92 year-old Malay man presented with visual hallucination for 2 years with worsening of his symptoms for the past 2 months. He claimed of seeing people as well as hundreds of children on separate occasion vividly and even saw a rabbit running across his room on one occasion. However, he had insight that this was an abnormal experience. His cognitive function was normal for his age. Psychiatry evaluation was normal.

He was previously diagnosed with open-angle glaucoma with history of uneventful cataract surgery and trabeculectomy over his left eye. His vision was HM OD and 6/7.5 OS with tunnel vision. Funduscopy showed advanced glaucomatous optic disc. He had right bullous keratopathy with absolute pseudoexfoliative glaucoma and left advanced pseudoexfoliative glaucoma with a functioning bleb.

Discussion & Conclusions: Elderly patients who present with visual hallucination often posed a diagnostic dilemma especially when the criteria for diagnosis of dementia and psychoses were not conclusive. In such group of patients that possesses the insight into the unreality of what they are seeing with a deteriorating vision should therefore raise the suspicion of possible Charles Bonnet Syndrome.

PS-3

OPTIC PERINEURITIS IN ORBITAL PSEUDOTUMOUR

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Introduction: Optic perineuritis is an uncommon form of idiopathic orbital inflammatory disease involving the optic nerve sheath. The description of clinical and radiological features of idiopathic optic perineuritis will be emphasized in order to distinguish it from optic neuritis.

Case Report: A 54 year-old Malay lady presented with sudden onset of diplopia for 3 days duration and followed with poor vision in the right eye. It was associated with pain on eye movement. Her right eye vision was 6/90 corrected with pin hole to 6/18 OD. There was restriction of abduction in the right eye with RAPD on the same eye. Red desaturation and colour vision impairment were documented in the right eye. Fundoscopy showed swollen right optic disc. Visual field test showed inferior field loss. Magnetic resonance imaging demonstrated circumferential enhancement around the right optic nerve. All serological tests for autoimmune diseases and Venereal Disease Laboratory Test were negative. She responded well to treatment of corticosteroids and was maintained for long term oral steroid for 4 months.

Discussion & Conclusions: In contrast to those with optic neuritis, patients with optic perineuritis usually present in older age group. Magnetic resonance imaging demonstrates enhancement around, rather than within, the optic nerve. Most of the patients require prolonged treatment of corticosteroids.

PS-4

THE STUDY OF OROFACIAL PAIN AT DENTAL CLINIC, HUSM: A PRELIMINARY STUDY

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Objective: This study was conducted to determine the most common type of orofacial pain with age and sex distribution and to evaluate the patients' accuracy in identifying the source of pain.

Patients & Method : A cross-sectional study was carried out among 644 patients attended Dental Clinic, Hospital Universiti Sains Malaysia in three weeks duration, with age range 5-76 years from 2003 – 2004. The clinical examination and interviews were carried out and the data registered in dental examination form and analyzed by using SPSS version 11.0.

Result: It was found that 11.2% of patients were complaining of orofacial pain and the most common type of orofacial pain complaint was dental pain followed by pain associated with swelling (88.9%). Facial pain of non-dental origin comprised of 4.2%; burning mouth was reported in 6.9%. It was found that there is no gender difference in each group of patients.

Discussion & Conclusion: Dental pain is the most frequent orofacial pain and an accurate diagnosis for orofacial pain is important before commencement of any treatment.

PS-5

A STAGED PROCEDURE IN RESTORING OCULAR SURFACE DAMAGE AND REHABILITATION OF VISION

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Introduction: Severe chemical injury destroy and deplete the limbal stem cells. It will leads to scarring, opacification and corneal neovascularization. Restoration of the corneal clarity and improving vision can be achieved by a two-stage procedure of limbal stem cell transplantation followed penetrating keratoplasty (PK).

Case Report: A 62 year-old man presented with severe bilateral stem cell deficiency due to chemical injury. The visual acuity was hand movement OD and light perception OS. He underwent right PK several months after allograft limbal stem cells transplantation. This procedure shows a successful outcome with a stable ocular surface and good rehabilitation of vision. By two months, the cornea was clear and the best-corrected visual acuity improved from HM to 6/36 OD.

Discussion & Conclusion: Allograft limbal stem cells transplant is useful in stabilizing ocular surface and renders PK with high success rate. The ocular surface reconstruction prior to PK and the timing of the surgical procedures has a significant role in graft success, minimizing rejection reaction and the eventual visual outcome.

PS-6

OCULAR TOXOPLASMOSIS - ACUTE PRESENTATION

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Introduction: Toxoplasmosis is caused by an obligate intracellular organism *Toxoplasma gondii*. Typically it causes retinochoroiditis with primary involvement of the retina and secondary inflammation of the choroids. However, a variety of less common, “atypical” presentations may be unfamiliar to clinicians, which can delay in both diagnosis and treatment. It includes “serous exudative retinal detachments”, punctate outer retinal toxoplasmosis, retinal vascular occlusions, a unilateral pigmentary retinopathy mimicking retinitis pigmentosa and other forms of optic neuropathy and scleritis. We presented a case of acute ocular toxoplasmosis with atypical exudative retinal detachment.

Case Report: A 24 years old Chinese male presented with right eye sudden onset loss of vision for 1 week duration. There was no history of direct contact with pets especially cat. Visual acuity was counting finger in the right eye and left eye was 6/6. Anterior chamber was deep and cells ++ with sluggish pupillary reaction. Fundoscopy of the right eye showed localized exudative retinal detachment (5 disc diameter) noted around the hyperpigmented lesion (1/2 disc diameter) which was surrounded by subretinal hypopigmented lesion (1 disc diameter) with ill defined margin at inferomedial to fovea. Antibodies IgG and IgM for toxoplasma were present. Other autoimmune diseases and Venereal Diseases screening were negative. He was also screen for other immunoincompetent causes. Clinically the fundus lesion improved with Co-trimoxazole 960mg twice daily. The treatment was continued for 6 weeks. However the visual acuity only improved to counting finger.

Discussion & Conclusion: Exudative retinal detachment is one of the atypical features of acute stage of ocular toxoplasmosis. Good respond was documented with Co-trimoxazole as an early treatment for an acute stage of ocular toxoplasmosis with spontaneously resolved exudative retinal detachment.

PS-7

A REVIEW ON EPIDEMIOLOGICAL FINDINGS OF EYE CANCER IN IRAN

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Objective: To determine epidemiological characterizations of biopsy proven eye cancers seen in Iran according published data through Iranian Annual Cancer Registration Report.

Patients & Methods: Data of all newly diagnosed cancers were collected by Center for Disease Control and Prevention from all pathologic resources in governmental and private laboratories from March 2003 to December 2004. Epidemiological data was also retrieved.

Results: In the year 2003 of 38468 of biopsy proven cancer case, 152 (0.39%) eye cancers were reported of which 96 (63.15%) were male and 56 (36.84%) were female. In the year 2004 of 47217 new cancerous cases, there were 187 (0.39%) newly diagnosed eye cancers of which 116 (62%) were male and 71 (38%) were female. Squamous Cell Carcinoma was the most common eye malignancy whereas, retinoblastoma was found as the second most common eye malignancy in all groups. However, it was the most common eye malignancy in children below 10 years. There was a clear bi-peak incidence of cancers in both sexes, which the first peak was at childhood and the second peak was between 60–80 years old.

Discussion & Conclusion: Eye cancers are not uncommon malignancies in Iran. The annual incidence and pattern of eye cancers in Iran is almost similar to other Middle East counties. Squamous Cell Carcinoma was the most eye malignancy and retinoblastoma remained as the most common cancer in children below 10 years old.

PS-8

THE RELATIONSHIP BETWEEN NUMBERS OF REMAINING TEETH WITH ORAL HEALTH RELATED QUALITY OF LIFE AMONG THE ELDERLY IN KOTA BHARU, KELANTAN.

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Objective: To determine the relationship between numbers of remaining teeth with oral health related quality of life among elderly aged 60 years and older in Kota Bharu.

Subjects & Methods: A cross-sectional study was conducted in Badang district Kota Bharu, Kelantan. A total of 223 randomly selected dentate elderly community-dwelling were included. Consented participants were interviewed at their homes using the Malay translated version of the Short Oral Health Impact Profile [S-OHIP (M)] which is a 14-item scaled index of social impacts. Oral examination was carried out to record dentate status.

Results: Mean age of elderly was 68.8 (SD7.38) years. Mean number of remaining teeth was 12.0 (SD=8.37) with 76.3% having less than 20 remaining teeth. Overall there was a significant ($p=0.010$) negative association ($b=-0.173$) between number of remaining teeth and total S-OHIP (M) score. Linear regression analysis identified four main factors that were difficulty in chewing ($p<0.001$), uncomfortable to eat ($p<0.001$), food stuck in mouth ($p<0.001$) and avoidance of food ($p<0.001$)

Discussion & Conclusion: Our findings suggested that the number of remaining teeth influenced oral health related quality of life (OHRQoL) of elderly people. For every one tooth present, the OHRQoL was improved by 0.17 units. Efforts are therefore needed to improve the OHRQoL of our future elderly people by educating and promoting oral health among the current cohort of adults so that they retain as many natural teeth into old age. Further research is required to probe into factors influencing OHRQoL among adults.

PS-9

SEPTIC ARTHRITIS COMPLICATED BY BILATERAL ENDOGENOUS ENDOPHTHALMITIS

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Introduction: Endogenous endophthalmitis is a relatively rare but carries severe and potentially blinding ocular infection. Meningitis, endocarditis, urinary tract infection and wound infection were among the commonest reported causes of endogenous endophthalmitis. We reported a rare cause, septic arthritis that complicated by bilateral endogenous endophthalmitis in an immunocompetent patient.

Case Report: A 20-year old lady, previously healthy presented for swelling in the right knee for two weeks and high grade fever for one week. A clinical diagnosis of septic arthritis of the right knee was made. A week later, she complained of blurring of vision in both eyes. Ophthalmic examination revealed anterior chamber inflammation, vitritis and foci of chorioretinitis in both eyes. Synovial fluid aspiration of the right knee yielded numerous pus cells but failed to grow any organism. Blood culture was negative. She improved with intravenous antibiotics treatment for two weeks. However, the oral antibiotic was continued for six weeks owing to her septic arthritis condition. Her final visual outcome was amazing.

Discussion & Conclusions: Identification and prompt diagnosis of primary source is essential in endogenous endophthalmitis. Eradication of the infection with aggressive antibiotics regime could preserve a good visual acuity.

PS-10

RESTORATIVE DENTISTRY AND SIMPLE ORTHODONTIC COMBINED IN TREATING PATHLOGIC TOOTH MIGRATION: A CASE REPORT

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Introduction: Pathologic tooth migration related to periodontal disease is a common chief complaint of periodontal patients. The inflammation destruction of the periodontium in periodontal disease creates an imbalance between the forces maintaining the tooth in position and the occlusal and muscular forces it is ordinarily called on to bear.

Case Report: This case report describes the treatment of severe periodontal disease with disfiguring pathologic tooth migration of the right maxillary central incisor, which required multidisciplinary approach. After a conventional periodontal treatment was performed, the incisor was realigned back into aesthetically satisfactory position. The tooth was secured in place using a permanent palatal splint. Follow-up examination after six months revealed stability of the tooth and aesthetically satisfactory.

Discussion & Conclusions: In consistent with the previous reports, pathologic tooth migration could be prevented through early diagnosis and treatment of periodontal disease. Once the periodontal tissues are reduced, their ability to hold the teeth in position is also decreased. Hence, in some cases, extra measure such as permanently splinting the teeth is necessary in order to hold the teeth in place to avoid further migration after treatment.

PS-11

SOCIO-DEMOGRAPHIC CHARACTERISTICS AMONG LATE AND EARLY BOOKING ANTENATAL MOTHERS AT KUBANG KERIAN HEALTH CLINIC, KOTA BHARU, KELANTAN

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Objective: Antenatal care is a branch of preventive medicine dealing with prevention and early detection of pregnancy disorders. First antenatal visit before completed 12 weeks period of amenorrhea is defined as late booking. Our aim is to describe the socio-demographic characteristics among late and early booking antenatal mothers at Kubang Kerian Health Clinic, Kota Bharu, Kelantan.

Subjects & Methods: A cross-sectional study was conducted using interview guided questionnaire involving 30 antenatal mothers.

Results: Seventeen of the antenatal mothers were late booker and 13 were early booker. All antenatal mothers were Malays. Among late bookers, 12(40.0 %) of them were between age 21 to 40 years old, while among early bookers, 9(30.0%) were between age 21 to 30 years old. All antenatal mothers were married and practiced monogamy except one of early bookers practicing polygamy. Thirteen (43.3%) from late bookers and 7(23.3%) from early bookers had educational level till secondary school. Eleven (36.7%) of late bookers were employed, while 8(26.7%) of early bookers were un-employed. Among antenatal mothers' husband, 14(46.7%) of late bookers and 10(33.3%) of early booking antenatal mothers' husbands had educational level till secondary school. Family income for late booking antenatal mothers were between RM1001 to RM3000, while in the other group, 5(16.7%) had income between RM2001-3000. Fourteen (46.7%) from late bookers and 8(26.7%) from early bookers stayed near the clinic (located between 1 to 4 km radius).

Discussion & Conclusion: The late bookers were from the age 21 to 40 years old, husband and wife had educational level till secondary school, employed and family income between RM1001 to 3000. While early bookers were from the age 21 to 30 years old, husband and wife had educational level up to secondary school, un-employed and family income between RM 2001 to RM 3000.

PS-12

***FLUID THERAPY IN THE TREATMENT OF HYPEREMESIS GRAVIDARUM:
NORMAL SALINE OR RINGER'S LACTATE, DOES IT REALLY MATTER?***

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Objective: To determine the effectiveness between normal saline and ringer's lactate solution in correcting complications of hyperemesis gravidarum (hypokalaemia and ketosis). Should one solution is superior than the other, it should be used as the first line treatment to shorten the hospital stay.

Patients & Method: A prospective randomized study was conducted to compare the use of ringer lactate and normal saline in patients with hyperemesis gravidarum. Levels of blood urea and serum electrolytes, serum lactate and urine ketones were monitored until normalization achieved. Either ringer's lactate or normal saline was infused until dehydration, electrolytes imbalance and ketonuria disappeared. Amount of fluids required, duration taken to achieve normalization and difference in serum lactate levels were compared.

Results: 100 patients were recruited in which 50 patients were in the normal saline group and the other 50 in ringer lactate group. There was no difference in the amount of fluid required to correct dehydration. Even though ringer's lactate corrected hypokalaemia faster than normal saline, it was not statistically significant (36 hours and 48 hours respectively, $p>0.05$). There was no significant increase in the level of serum lactate among patients receiving ringer's lactate.

Discussion & Conclusion: Ringer lactate is as effective as normal saline in treating hyperemesis gravidarum and lactate component in it did not worsen ketosis state of patients.

PS-13

**TRANCUTANEOUS POSTERIOR TIBIAL NERVE STIMULATION (TPTNS):
A PROMISING METHOD OF MANAGEMENT OF NEUROGENIC
OVERACTIVE BLADDER**

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Objective: To determine TPTNS is effective as less invasive form of neuromodulatory method either as a direct therapy for certain overactive bladder or as a preliminary evaluation for sacral root neuromodulation as a permanent method subsequently.

Patients & Method: A comparative study was conducted involving patients with symptoms of certain overactive bladder. A written consent was obtained. The posterior tibial nerve is stimulated transcutaneously between medial malleolus and calcaneum with current strength of: 18-20mA, duration of 20 min/day over three weeks. Patients are provided with voiding diary and assessed after three weeks, both objectively and subjectively.

Result: Patients with overactive bladder due to neurological lesions such as multiple sclerosis as a expression of central origin-detrusor hyperreflexia is more benefited than patients with Lower Urinary Tract Symptoms (LUTS) expressing as incontinence, urgency (bladder overactivity). Neuromodulation corrects imbalance between the excitatory and inhibitory input of impulses at the spinal micturation center and restores the balance.

Discussion & Conclusion: TPTNS can be utilized as a simple non invasive method to offer therapy for patients with certain overactive bladder and subsequently patients who are willing, may be offered sacral root neuromodulation as a permanent method.

PS-14

CRITICAL RETROSPECTIVE ANALYSIS OF VARIOUS TYPES OF NEUROGENIC LOWER URINARY TRACT (NLUTD) DYSFUNCTION AT HUSM (2006-2007)

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Objective: To find the true incidence of various types of Bladder dysfunction (NLUTD) among neurological, neuro surgical lesions and post OBG status during 2006-2007 at HUSM.

Patients & Method: Patients' case notes were reviewed and analyzed retrospectively. The records include patients' case record and Urodynamic reports for the year 2006-2007.

Result: There were 359 patients with neurological lesions of various types such as CVA(315), Multiple Sclerosis (10) and Parkinsons (34). There were total of 128 patients with spine fractures, mostly due to motor vehicle accidents. Out of these, 44% .suffers thoracic spine fracture, 42% with Lumbosacral and Coccygeal fracture, cervical fracture - 12% and 2% have acute cauda equina syndrome.

Discussion & Conclusions: Patients who are non compliant to Clean Intermittent Catheterization (CIC) with significant bladder emptying problems and refractive incontinence may be managed with neurostimulation and neuromodulation respectively.

PS-15

A COMPARATIVE PILOT STUDY USING TUALANG HONEY WITH AQUACEL AND AQUACEL DRESSING ON SUPERFICIAL BURN WOUNDS

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Objective: To compare the using of Tualang Honey with Aquacel and Aquacel Dressing on superficial burn wound

Patients & Method: This study was conducted in our Burns Unit, HUSM on all superficial and partial thickness burn injuries using Tualang honey with Aquacel and compared with Aquacel plain dressings. Patients were randomly assigned into each group. Depth of burn injury was assessed both by clinical and Laser doppler imaging techniques. In the honey group, the Aquacel plain was soaked with Tualang honey and placed on the wound. The dressing was changed every third day and the burn wound was re-evaluated. The same protocol was used for the group which used Aquacel plain dressing. The time taken for complete healing and any adverse effects were documented in each group

Result: Six patients had Tualang Honey with Aquacel dressings and ten patients had Aquacel plain dressings. In the Aquacel with Tualang honey group, the mean age was 9 years (range 0.75 – 31 years). The mean TBSA was 4.16% (range 0.5%-6%). The time taken for complete healing was 15.1 days (range 6 – 27 days). In the Aquacel plain group, the mean age was 11.32 years (range 0.75 – 37 years). The mean TBSA was 5% (range 1.5% – 10.5%). The time taken for complete healing was 17.1 days (range 6 – 46 days). Overall in these 16 cases, eight had scald injuries, seven flame burns and one had contact burns. All these cases healed well without surgical intervention.

Discussion & Conclusions: Tualang Honey with Aquacel shows a faster healing rate of burn wounds in comparison with Aquacel plain. The healing properties of honey in combination with modern hydrofibre dressings (Aquacel plain) can expedite the healing of burn wounds. The combination of locally produced wild honey with Aquacel dressing has synergistic effect on the healing.

PS-16

USES OF AMNIOTIC GRAFTS IN OPHTHALMOLOGY

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Introduction : Human amniotic membrane is the innermost layer of the placenta. It is transparent, elastic and has structural integrity. It is a widely accepted tissue as a replacement for ocular surface reconstruction. It facilitates epithelial cell migration, encourages epithelial differentiation and has anti-inflammatory effects. We present 3 cases illustrating its indications in ophthalmology.

Case Report: First case: A 23-year old Malay lady, with bilateral juvenile glaucoma underwent augmented trabeculectomy for both eyes. She had a leaking bleb in the left eye, 2 years post surgery. Unfortunately, attempts to resuture the bleb failed twice. However amniotic membrane patch transplantation secured the bleb. Second case: 21-year old Malay man presented with left perforated peripheral corneal wound with iris prolapse. Urgent patching with multilayered wet amnion was done and bandage contact lens was applied as a temporary measure while waiting for the tectonic corneal graft. Third case: 48-year old Malay man presented with right eye advanced pterygium. Pterygium excision with amniotic graft was done. Amniotic graft was preferred in view that the patient had an extensive pterygium.

Discussion & Conclusions: Amniotic membrane is an effective method of reconstructing the ocular surface. The relative ease of the procedure and freedom from intraocular intervention makes it a preferred surgical option.

PS-17

A STUDY TO INVESTIGATE THE PREVALENCE OF REPORTED GINGIVAL BLEEDING IN CARDIOVASCULAR AND HEMATOLOGICAL DISEASE: A RETROSPECTIVE RECORD REVIEW

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Objective: To determine the prevalence of reported gingival bleeding (RGB) in cardiovascular (CVD) and hematological diseases (HD) in Hospital Universiti Sains Malaysia (HUSM) from January 2000 to December 2006.

Patients & Method: A retrospective record review involving 291 patients with known CVD and HD who attended HUSM clinics from January 2000 to December 2006 was done. Cases selected for review included myocardial infarction, coronary artery disease (CAD), unstable angina, stroke and hypertension for CVD group and hemophilia, thrombocytopenia, leukaemia, myelofibrosis and purpura for HD group. Selection of the cases was done using systematic random sampling technique and data was recorded in a case report form. Data obtained was analyzed using SPSS version 12.0.

Results: A total of 291 cases were recorded during the study period. Out of the 291, 74.57% (217) had CVD and 24.43% (74) had HD. In CVD group, 116(53.7%) were hypertension, 75(34.72%) unstable angina, 17(7.87%) stroke, 7(3.24%) myocardial infarction and 1(0.46%) were CAD cases. In HD group, 47(62.67%) were thrombocytopenia, 14(18.67) hemophilia, 2(2.67%) purpura while myelofibrosis and leukaemia cases were 6(8%) each. Among CVD patients, 6(2.76%) had RGB while 12(16.21%) had RGB in HD group. In CVD group, prevalence of RGB was highest in hypertension 4(66.7%) while in HD group, it was highest in patients with thrombocytopenia 6(54.5%).

Discussion & Conclusions: Gingival bleeding is more common in haematological diseases compared to cardiovascular diseases in this patient population. 16.21% of diagnosed haematological patients had reported gingival bleeding.

PS-18

A PRELIMINARY STUDY TO DETERMINE ARTERIAL STIFFNESS IN SUBJECTS WITH CHRONIC PERIODONTITIS

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Objective: Cardiovascular disease (CVD) is the leading cause of death worldwide. Recent reports implicated that periodontal disease (PD) is a risk factor for CVD and is associated with higher arterial stiffness (AS). This study aims to compare pulse wave velocity (PWV), an indicator of AS between subjects with Chronic Periodontitis (CP) and their controls subjects.

Patients & Methods: A cross-sectional study was carried out to determine AS between subjects with CP and the control subjects. Twenty age and sex-matched subjects (10 CP & 10 controls) were recruited. Subjects were excluded if they were smokers or had any systemic illness. All subjects gave informed and written consent. The CP patients were taken from the Specialist Dental Clinic (KPP) while the controls were recruited from USM staffs and out patients. Periodontal examination was done & PWV measurements were performed within one week of periodontal examination.

Results: The PWV median and inter-quartile range for the CP and Controls were 9.5(1.23) and 8.7(0.98) respectively. Although not statistically significant however there was a trend of higher PWV among subjects with severe CP as compared to the controls.

Discussion & Conclusions: Subjects with CP may have higher arterial stiffness. Owing to the proposed causative relationship between CVD and PD through the AS further study is required. This may help to risk stratify PD patients in the presence of other risk factors before CVD is apparent.

PS-19

FISH HOOK EYE INJURY..... AN UNFORGETTABLE EXPERIENCE

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Introduction: A fish hook in the eye is an unlikely forgettable experience faced by any ophthalmic surgeon. Ocular fish hook injuries are potentially blinding form of ocular trauma resulting from cornea scarring, retinal detachment and endophthalmitis.

Case Report: A 34-year old man presented with history of ocular trauma during fishing. On examination his right eye vision was 'hand movement'. A barbeb fish hook was seen embedded at the limbus and peripheral cornea at 7 o'clock position and lay in the posterior part of the lens. The cornea was hazy with hyphema in anterior chamber. RAPD was positive. CT Scan revealed presence of highly dense foreign body within the right globe with some part of the foreign body is embedded at the posterior part of the sclera. Emergency exploration, fish hook removal and cornea T&S were performed. Post operative ocular ultrasound showed dense vitreous haemorrhage with retinal detachment. He was treated with topical antibiotics, steroid eye drops, intravenous antibiotics and methylprednisolone. Two weeks post-operatively his right vision remains poor with only perception to light with secondary raised intra ocular pressure.

Discussion & Conclusions: Ocular trauma due to fish hooks are uncommon but it carries a devastating outcome of vision loss. Prevention of fishing related eye injuries need to be stressed by increasing the public awareness of the dangers posed by fishing. Protective eyewear have been shown to reduce risks of significant eye injury in other sports activities therefore it should also be considered in fishing activities.

PS-20

DIFFERENT PRESENTATIONS AND OUTCOMES OF ENDOPHTHALMITIS

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Introduction : Endophthalmitis is a severe ocular inflammation caused by introduction of contaminating microorganisms. Exogenous endophthalmitis results from direct inoculation as a complication of ocular surgery and ocular trauma. Endogenous endophthalmitis occurs as a result of hematogenous spread of organisms from a distant foci.. We report 3 cases of endophthalmitis presenting in different features and outcomes.

Case Report: Case 1: A 70- year old lady, presented 10 days following cataract surgery with painful increasing blurring of vision, hypopyon and severe anterior chamber reaction. She grew *Serratia sp* from vitreous specimen. She responded well to intravitreal antibiotics.

Case2: An 8-year old girl, alleged history of penetrating eye injury and was diagnosed as post traumatic endophthalmitis with retained intra ocular foreign body. She sustained multiple ocular injuries and complications and regained poor post-operative vision.

Case 3: A 44-year old man with background history of diabetes mellitus, was admitted to ICU for sepsis secondary to bronchopneumonia and micro liver abscess. He was referred for anisocoria and diagnosed as endogenous endophthalmitis with exudative retinal detachment. Despite medical treatment and surgery his vision remains poor..

Discussion & Conclusions: A high index of clinical suspicion is crucial for early diagnosis and treatment of endophthalmitis. However, despite appropriate intervention, the visual outcome still remains to be poor and vision loss is common.

PS-21

A COMPARATIVE STUDY OF HONEY HYDROGEL WITH SAFECARE HYDROGEL DRESSING IN THE TREATMENT OF SPLIT SKIN GRAFT DONOR SITES

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Objective: To assess the rate of healing using Honey Hydrogel (HH) and Safecare Hydrogel (SH) in the treatment of split skin graft donor sites

Patients & Method : This study was conducted from Mac 2007 to Mac 2008 on patients with skin graft donor site using HH compared with SH. Patients were randomly assigned into the two groups. All donor sites were inspected on the 10th, 15th and 20th post-operative day. The wounds are defined as healed when an intact epithelium is detected clinically.

Result: Seventeen patients had SH dressing and fourteen patients had HH dressings. In the HH group, the mean age was 34.21 years (range 15 – 56 years). In the SH group, the mean age was 36.88 years (range 14 – 63 years). The number of patients treated with HH healed on D10 were (4, 28.6%), D15 (10, 71.4%), D20 (14, 100%). The patients treated with SH healed on D10 (8, 47.0%), D15 (11, 64.7%), D20 (15, 88.2%) and >D20 (17, 100%) respectively

Discussion & Conclusions: HH showed a faster healing rate of split skin graft donor sites wounds in comparison with SH. The healing properties of honey in combination with Hydrogel dressings can expedite the healing of split skin graft donor sites.

PS-22

AUTONOMIC DYSREFLEXIA – NEUROVEGETATIVE SYNDROME

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Introduction: Autonomic dysreflexia is an exaggerated uninhibited sympathetic response to afferent stimulation following spinal cord injury above T6 level.

Case Report: We report a case of a post spinal cord injury patient with neurogenic bladder with bladder calculi. This patient who had to undergo vesicolithotomy, exhibited full blown picture of autonomic dysreflexia during induction of anesthesia. Due to development of acute hypertension, bradycardia, and sweating, the operation was deferred. Patient was further stabilized and later optimized to undergo the surgery at a later date.

Discussion & Conclusions: Autonomic dysreflexia should be anticipated and precautions should be taken to combat the situation in dealing with patients with high level spinal cord injury status.

PS-23

CLEAR CELL ADENOCARCINOMA WITH TERATOMA AND ISLET CARCINOID: A CASE REPORT

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Introduction: Clear cell adenocarcinoma also known as mesonephroid tumor of the ovary is a rare distinct lesion occurring commonly in the older age group. It is an aggressive tumor with a poor prognosis. This tumor was originally thought to have derived from mesonephric rest derivation but now it has been convincingly proven that it's a type of surface epithelial tumor related to endometrioid carcinoma. These tumors are commonly associated with endometriotic cysts. They are rarely associated with teratomas of the ovary and more rarely with teratomas containing carcinoid tumor as a component. Teratomas are more commonly associated with mucinous cystadenoma, brenner tumor and fibrothecoma.

Case Report: We report a case of 36 years old nulliparous lady presented to the gynecology clinic with Abdomen-pelvic mass and pain abdomen. A working diagnosis of ovarian tumor was made and she was subjected to laprotomy. Intra-operatively, a large ovarian tumor was identified with adhesions to the surrounding structures. This tumor ruptured during manipulation and was removed piece meal. It was a multi-loculated cystic tumor. Microscopic examination of the removed fragments revealed clear cell adenocarcinoma as the main tumor and in the solid areas, ovarian tissue with features of teratoma were seen. Within the teratoma, carcinoid tumor was present.

Discussion & Conclusion: Clear cell adenocarcinoma associated with teratoma and islet carcinoid is a rare entity. But it is important as one of the possible differential diagnosis. More research is needed regarding its clinical presentation, behavior and prognosis.

PS-24

PRELIMINARY STUDY OF LYMPHATIC CHANNEL DENSITY IN COLORECTAL ADENOCARCINOMA

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Objective: To determine the number of lymphatic channels present in colorectal adenocarcinoma and to correlate it with the site, size, stage of tumor and also with lymph node metastasis.

Material & Method: A total of 29 cases were retrieved from the archives of the Pathology Department, School of Medical Sciences, Universiti Sains Malaysia, Health Campus. One paraffin block containing tumor was selected from each case. New sections of 3-5 microns thickness were cut from this paraffin block and this section was stained using the monoclonal antibody used specifically to stain lymphatic channel endothelium in normal and neoplastic tissue – D2-40[DAKO]. The highest number of lymphatic channels in an area of 0.196mm² [High power field] was counted in each tumor using NIKON microscope. These findings were then correlated with the size, site, stage of tumor and also with lymph node metastasis.

Result: The highest density of lymphatic channels in colorectal carcinoma was counted after identifying the appropriate area. The lymphatic channel density was in the range of 15 – 50/0.916 mm² [High power field]. There was poor association of this lymphatic channel density with site, size, and the stage of tumor including lymph node metastasis. This result is in concordance with results of studies done elsewhere.

Discussion & Conclusion: There is no significant association between lymphatic channel density and site, size as well as the stage and lymph node metastasis of colorectal carcinoma. This indicates that lymphatic channel proliferation does not influence the tumor aggressiveness. A larger sample size is needed to validate our findings.

PS-25

ADVANCED LAPAROSCOPY: MOBILIZATION OF INTRA ABDOMINAL TRANSVERSE TESTICULAR ECTOPIA, CASE REPORT

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Introduction: Crossed testicular ectopia/transverse testicular ectopia is an extremely rare anomaly, in which both gonads migrate toward the same hemiscrotum. Transseptal orchiopexy via contralateral inguinal incision is the treatment of choice if adequate length of spermatic cord is present. We report a case, where laparoscopic-assisted transabdominal orchiopexy offered an alternative to orchiectomy in a patient lacking adequate spermatic cord length for transseptal orchiopexy via contralateral inguinal incision.

Case report: We recently encountered a 12 years old boy who had crossed testicular ectopia, he was a healthy pubertal boy with a normally descended right testis, impalpable left testis, and undeveloped left empty scrotum. Laparoscopic examination revealed absence of the left deep inguinal ring, with the vas Deferens and testicular vessels of the left testicle crossing the midline, then exiting the right deep inguinal ring. However the left testis found to be intraabdominal nears the right deep inguinal ring. The ectopic vas deference and vessels were dissected; however there was not enough length to achieve transseptal orchiopexy via this contralateral inguinal incision. The ectopic testicle mobilized, left inguinal incision employed, an internal inguinal opening created and left orchiopexy achieved.

Discussion & Conclusion: Transverse testicular ectopia is a rare anomaly for which the routine use of diagnostic laparoscopy in the setting of an impalpable testis should aid in proper diagnosis and management.

PS-26

DEEP HYPOTHERMIC CIRCULATORY ARREST FOR RENAL CELL CARCINOMA WITH INFERIOR VENA CAVA TUMOR THROMBUS, CASE SERIES

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Introduction: Historically, RCC (renal cell carcinoma) with level III and IV thrombus (above the level of the liver) was deemed incurable. Considerable advances in the identification and management of thrombus have permitted surgical resection of these complex thromboses possible. Here we report our case series of two patients successfully treated for level III and IV RCC vena caval tumor thrombus in the setting of small urology and cardiothoracic units.

Case report: The first patient is a 65 years old Malay gentleman, who presented with history of intermittent hematuria and abdominal discomfort. He was diagnosed to have left RCC with vena caval tumor thrombus extending up to the right atrium (level IV thrombus). The second patient is a 61 years old patient presented with unusual weakness in addition to night fever. He was diagnosed to have left RCC with vena caval tumor thrombus extending up to the level of crus of right hemidiaphragm. Both patients' were operated successfully using deep hypothermic circulatory arrest (DHCA) with minimal morbidity.

Discussion & Conclusion: The presence of venous involvement in RCC patient should not be dismissed as having advanced disease with poor prognosis, the dissection of vena caval tumor thrombus by using deep hypothermic circulatory arrest in the setting of small unit, appears not to result in a significant increased in preoperative or postoperative mortality.

PS-27

STUDY ON PRODUCTION OF HYDROGEN PEROXIDE IN PURE HONEY SAMPLES COMPARED TO MALAYSIAN COMMERCIAL HONEY

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Introduction: The oxidation of glucose in honey with presence of water and oxygen results in production of hydrogen peroxide (H₂O₂) and gluconic acid. This oxidation process is catalysed by presence of enzyme Glucose Oxidase. H₂O₂ is, arguably, the main reason behind the anti-bacterial properties of most honeys. Levels of H₂O₂ may serve as a good indicator for honey quality.

Objective: To study the production of hydrogen peroxide in pure honey samples compared to Malaysian commercial honey

Material & Method: H₂O₂ levels is measured and calculated by using the iodometry method, by detection of presence of iodine with starch and the production of H₂O₂ may vary between the conditions of where honey is placed

Result: Manuka honey would serve as the best anti-bacterial agent with exhibiting the highest peroxide concentration of 0.000437 moldm⁻³±2.50E-6 under the conditions 30% honey concentration and temperature of 30°C. Tualang honey produces peroxide concentration of 0.000536 moldm⁻³±2.50E-6 under similar conditions, though it is possible for Tualang honey to produce a much higher concentration if the temperature is increased to 40°C. The commercialize Malma's Honey produces only 0.000363 moldm⁻³±2.50E-6 of peroxide concentration under conditions of 30°C and 35% honey concentration whereas Daru' Syifa produces far by the lowest honey concentration, only 0.000188 moldm⁻³±2.50E-6 under 40% concentration and 30°C.

Discussion & Conclusion: It is possible to exploit the effectiveness of H₂O₂ production of various honeys under different conditions, and make it commercial. Nevertheless, decomposition of H₂O₂ should be considered when calculating its amount.

PS-28

PRELIMINARY STUDY OF CULTURED EPIDERMAL AUTOGRAFT (CEA) IN BURN UNIT, HOSPITAL UNIVERSITI SAINS MALAYSIA (HUSM)

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Objective: To culture primary human skin epidermal keratinocytes in vitro used as Cultured Epidermal Autograft (CEA) for massively burn patients.

Patients & Method: A retrospective review of seven patients admitted to this unit from 2005 until 2007 treated with CEA. All skin samples were obtained from consented patient with age ranging from 8 to 50 years old that underwent surgery in this unit. These samples were cultured in standard skin culture medium and incubated at 37°C, 5% CO₂ for 2 weeks with medium refreshed every 3 days. When cultured keratinocytes achieved confluence at second to fourth passages, monolayer cells were then trypsinized and suspended in appropriate carrier medium. The resulted CEA was sprayed and grafted on the skin wound area. Then, the grafted sites on the patients were monitored for the reepithelialization until complete healing.

Result: Primary human skin epidermal keratinocytes cultures were successfully established in laboratory as CEA after processed in carrier medium. The clinical assessment revealed that burn patients treated with CEA healed expediently with good reepithelization rate.

Discussion & Conclusions: This preliminary study suggests that CEA applied on burn patients will offer a potential solution to assist skin wound closure.

PS-29

DIFFERENCES IN RISK FACTORS OF BREAST CANCER BETWEEN PRE AND POST MENOPAUSAL WOMEN

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Objective: To identify differences in risk factors of breast cancer between pre and post menopausal women.

Patients & Method: A face to face interview was conducted on women with primary breast cancer in Hospital Raja Perempuan Zainab II Kota Bharu, Hospital Universiti Sains Malaysia, Hospital Sultanah Nur Zahirah Kuala Terengganu, Hospital Kuala Lumpur and Hospital Universiti Kebangsaan Malaysia. Data regarding known risk factors for breast cancer were collected. Post menopausal state is defined as absence of menses of 6 months prior to the diagnosis of breast cancer.

Result: We included 512 women in the final analyses, with 71.3% in pre and 28.7% in post-menopause. The mean (SD) age was 47.9 (9.4) years and 90.4% were invasive ductal carcinoma. According to the breast cancer staging: stage I - 5.1%, stage II - 41.6%, stage III - 40.0% and stage IV - 13.3%. Poor education (OR: 4.4, 95%CI: 2.8, 6.9) and unemployment (OR: 2.8, 95%CI: 1.7, 4.6) were significant risk factors for post menopausal women. There was no significant difference in body mass index between groups, which is a well known risk factor for post-menopausal women.

Discussion & Conclusion: The risk factors identified in this study were explained by the older cohort of post-menopausal women.

PS-30

DELAY IN CONSULTATION AND DIAGNOSIS OF BREAST CANCER IN EAST COAST MALAYSIA

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Objective: Delayed consultation and diagnosis among patients with breast cancer is a common and serious problem encountered by clinicians. The aims of this study are to determine time taken by patients before they consult the first doctor and diagnosis is made; and identify factors influencing the delay.

Patients & Method: A prospective study was conducted at Hospital Raja Perempuan Zainab II, Kota Bharu, Hospital Universiti Sains Malaysia and Hospital Sultanah Nur Zahirah, Kuala Terengganu between June 2007 and March 2008 involving patients with primary invasive breast carcinoma and diagnosed from year 2005 onwards. Delay in consultation was defined as one month delay from the first recognition of symptoms to the first doctor consultation. Delay in diagnosis was defined as 3 months delay from the first recognition of symptoms to the diagnosis of breast cancer. Multiple logistic regressions was used to determine factors associated with delay.

Result: A total of 203 patients were included with the mean (sd) age was 48.8 (9.9) years, 88.2% were Malays and majority (98%) presented with lump. The mean (sd) time to first confide to someone was 1.6 (5.7) months, first doctor consultation was 5.3 (12.8) months and diagnosis of breast cancer was 9.5 (14.9) months. The prevalence of delay of consultation and diagnosis were 47.3% and 59.1% respectively. The first FNAC failed to get cells was in 10.3%, the initial FNAC results were benign in 7.9% and 1.5% had negative mammogram. Factors significantly associated with diagnosis delay were age 41-55 years (OR: 2.3, 95%CI: 1.1, 5.0), education less than SPM (OR: 2.3, 95%CI: 1.2, 4.7) and breastfeeding (OR: 3.7, 95%CI: 1.4, 9.7).

Discussion & Conclusion: There was significant delay in consultation and diagnosis of breast cancer. The delays are preventable by giving effective counseling and education to the women suspected of breast cancer.

PS-31

INTRAVESICAL ELECTRICAL STIMULATION OF THE BLADDER – ANIMAL MODEL STUDY IN HUSM

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Objective: To study the effects of intravesical electrical stimulation of rabbit's bladder and to apply the principle in human hypocontractile bladder as a method of bladder-biofeedback training.

Material & Method : Intravesical electrical stimulation activates the mechanoreceptors within the bladder wall, thus increasing the efferent input from the bladder and consequently the efferent output of the bladder. Anaesthetized rabbit's bladder is stimulated by weak current in normal saline as a medium and the bladder contraction is perceived as elevated hydrostatic pressure of the saline column in the manometer.

Result: Intravesical stimulation by weak current activates the mechanoreceptor within the bladder wall and the response is perceived as active bladder contraction. Intravesical stimulation of the bladder may possibly induce/ improve bladder sensation and enhance the micturation reflex of hypocontractile – areflexic bladder .

Discussion & Conclusion: As a bladder training programme, this methodology combined with biofeedback training is a useful technique to gain bladder sensation and latter on effective voiding among patients with areflexic bladder due to peripheral nerve damage.

PS-32

INTRAVASCULAR PAPILLARY ENDOTHELIAL HYPERPLASIA IN HAND : A CASE SERIES AND LITERATURE REVIEW

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Introduction: Intravascular papillary endothelial hyperplasia (IPEH) is an exuberant, usually intravascular, endothelial proliferation that in many respects mimics an angiosarcoma. This is a rare benign vascular tumor that is mostly located in veins at the head, neck, and trunk regions. Occasionally, this tumour occurs in the palmar and dorsal aspect of the hand.

Case Report: We report a case series of IPEH arising at the palmar and dorsal aspects of the hand over a 12 year period (January 1996 – Mac 2008). Three cases were identified and the clinical and pathological features were reviewed. All of them were female patients. They presented with painless, right hand bluish nodules. There is no history of trauma. Average size was 2.2 cm.

Histopathological examination show superficial lesion in the dermis and subcutaneous tissue but did not involved underlying muscles. They exhibit irregular papillary structures occupying dilated vascular spaces. Evidence of thrombus was seen within the vessels.

Immunohistochemical analysis for estrogen receptor and progesterone receptor in all tumours were negative. These findings suggested that the tumours were not influenced by female hormones though all the cases were female.

Discussion & Conclusion: IPEH is a benign vascular lesion, most probably reactive in relation to thrombus formation. Identification is important to distinguish this lesion from other aggressive vascular lesions.

PS-33

PANSINUSITIS PRESENTING AS BILATERAL OPTIC NEURITIS IN A CHILD

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Introduction: Optic neuritis is a disorder that results from inflammation of the optic nerve. Childhood optic neuritis is rare and it tends to affect both eyes. Most cases are due to an immune mediated process which differs from the demyelinating event implicated in adults optic neuritis. We present a case of optic neuritis in a child, secondary to pansinusitis.

Case Report: A 9-year old Malay boy with no known medical illness, presented with history of bilateral sudden vision loss of one day duration. He has preceding history of upper respiratory tract infection. His vision was counting finger(CF) bilaterally. Relative afferent pupillary defect was present in the right eye with blurred disc margin and hyperaemic disc. Chest X-ray revealed mild pneumonia. CT scan of the orbit and brain showed optic neuritis with inflammation in the ethmoids, maxillary and frontal sinuses. The ESR and total white cell counts were raised. Patient responded to intravenous antibiotics and his vision improved to 6/12 pH 6/9 in both eyes.

Discussion & Conclusion: Acute inflammatory optic neuritis is a described complication of acute sinusitis. Sinus disease is an infrequent, but treatable cause of optic neuritis.

PS-34

HIGH FLOW PRIAPISM IN A 12 YEAR-OLD BOY: ROLE OF SUPERSELECTIVE EMBOLIZATION

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Introduction: Priapism is caused by an imbalance between penile blood inflow and outflow. There are two types, low flow priapism due to venous occlusion and high flow priapism due to uncontrolled arterial flow to the veins. High flow priapism most frequently occurs as a result of penile trauma where the intercavernosal artery disraption causes an arteriocavernosal fistula. It is rarely encountered in the pediatric and pre-pubertal population. Clinically it manifests as a painless, prolonged erection after perineal trauma. Treatment has ranged from expectant management to open surgical exploration with vessel ligation. We report the successful treatment of high flow priapism in a 12 year old pre-pubertal boy with superselective embolisation.

Case Report: A 12 year old boy was referred to HUSM from a district hospital one week post trauma with painless priapism for 5 days. On examination, his corpus cavernosa was rigid and his glans and corpus spongiosum was soft and compressible. He was voiding normally and any medical conditions were ruled out. Bright red blood was withdrawn from the cavernosum and blood gas analysis confirmed arterial blood, suggesting the diagnosis of high flow priapism. Doppler ultrasonography confirmed the diagnosis and showed an arteriovenous fistula on the left side at the base of penis. He was treated with selective left Internal Iliac artery and left penile artery angiography and superselective cannulation and embolisation of left penile artery. Total occlusion of the arteriovenous fistula and normal flow of blood was seen thereafter. Clinically, complete detumescence of the penis occurred. He was observed in ward for 24 hours and discharged home the next day.

Discussion & Conclusion: In conclusion, we report the successful treatment of high flow priapism in a 12 year old pre-pubertal boy where interventional radiology has established a role in its management. In our set up, the recent development in this subspecialized area facilitates combine management of various diseases.

PS-35

PCNL IN HORSESHOE KIDNEY- THE FIRST EXPERIENCE AT HUSM

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Introduction: Horseshoe kidney is one of the commonest congenital renal fusion anomalies with an incidence of 0.25% in general population. Disturbances in urine flow, drainage and concomitant infections promote stone formation is common. Percutaneous nephrolithotripsy (PCNL) in horseshoe kidney is a challenge due to its anatomical difference and thus a modified technique is needed. Hereby, we report our first experience with PCNL in this anomaly, a 55 year old with left staghorn renal calculi in a horseshoe kidney.

Case Report: A 55 year old man with no previous medical illness was referred to Urology Unit HUSM for further management. He presented with a 10 month history of intermittent episodes of left loin pain and hematuria. His clinical examination was unremarkable and his renal function was normal .Kidney, ureter and bladder (KUB) ultrasonogram and intravenous urogram (IVU) identified a horseshoe kidney with left staghorn renal calculi with no signs of obstruction.

Left percutaneous nephrolithotripsy (PCNL) was done using the Lingeman's method with an upper pole approach. The surgery was uneventful and near complete stone clearance was achieved. Evaluation on clinic follow up, he still remains stone free.

Discussion & Conclusion: Percutaneous nephrolithotripsy (PCNL) is proven effective treatment for staghorn renal calculi in a horseshoe kidney to achieve the best stone free rate. However, it has to be done in a specialized centre. Since this procedure was started at HUSM, this case has been the first and only experience.

PS-36

MULTIPLE UROLOGICAL PROBLEMS IN YOUNG AGE: A CASE REPORT

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Introduction: Renal stone disease has been regarded as an uncommon problem in children as compared to adult population. The incidence varies in different parts of continent. Posterior urethral valve is also regarded as uncommon urological problem in pediatric population. The incidence is about 1 per 8,000 to 25,000 life births. A combination of renal calculi, posterior urethral valve and vesicoureteric reflux in any given case is extremely rare especially in pediatric.

Case Report : We present a case of unfortunate two and a half old boy with multiple urological problems. He presented initially with recurrent urinary tract infection which further investigated with kidney, ureter and bladder (KUB) ultrasonography which noted a large right renal calculus at lower pole measuring 1.4 centimeter in diameter with mild hydronephrosis. An intravenous uroterogram was performed and found 2 renal calculi with right ureterocoele at distal ureter, urinary bladder diverticulum and a bladder calculus. Patient represented to our centre with hematuria and recurrent urinary infection which resolved with a course of intravenous antibiotic. Micturating cystoureterogram was performed for further evaluation and showed Grade 5 right vesicoureteric reflux.

Discussion & Conclusion: Paediatric urological problems such as posterior urethral valve, vesicoureteric reflux and renal calculi are not uncommon and surgical treatment is usually straight forward. However, a combination of multiple paediatric urological problems is a rare entity and would challenge the aptitude and capability of any urologists.

PS-37

YOUNG UPPER TRACT UROTHELIAL CARCINOMA: A CASE REPORT

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Introduction: Upper urinary tract transitional cell carcinomas are rare tumors. They account for 5 to 7% of the urothelial tumors with renal pelvic lesions representing the majority. The disease is rarely seen under the age of 50. Smoking, occupational carcinogens, analgesic abuse, Balkan nephropathy are the risk factors. Approximately 20 to 50% of patients with upper urinary tract transitional cell carcinomas have bladder cancer at some point on their course. We report a rare case of 20 year old man with transitional cell carcinoma of renal pelvis.

Case Report: A twenty year old patient presented with recurrent episode of hematuria and abdominal discomfort at left lumbar region associated with loss of appetite, lethargy, mild shortness of breath. Left kidney ballotable in physical examination. Left retrograde pyelography showed filling defect within the renal pelvis. Ureteropyloscopy represent renal pelvis mass extending to mid and lower pole. Histopathology and CT scan confirm the diagnosis of transitional cell carcinoma of renal pelvis stage T3N0M0, and no evidence of synchronous lesion elsewhere.

Discussion & Conclusions: There were increasing reported malignant disease present in young age lately. Thus, the age prevalence of certain malignant disease may change in the future. Therefore, we have to bear in mind that the painless hematuria presented in younger age group need to be thoroughly assess to prevent miss diagnosis of upper tract malignancy.

PS-38

FRONTONASAL ENCEPHALOCOELE COMBINED WITH SEMILOBAR HOLOPROSENCEPHALY AND DEXTROCARDIA

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Introduction: This is a report of a rare case of frontonasal encephalocoele combined with semilobar holoprosencephaly and dextrocardia. A thorough literature search did not reveal any previous reports of this combination of abnormalities.

Case Report: A baby boy was diagnosed antenatally to have hydrocephalus. He was born at term via emergency LSCS with a birth weight of 2.7 kg. He was intubated at birth because of respiratory distress secondary to a large swelling over his nasal bridge causing upper airway obstruction. His head circumference was at the 90th centile. He had a large mass (8cm x 5cm) over his nasal bridge, which covered 1/3 of his face, dextrocardia was noted during examination. Ultrasound brain and CT brain confirmed semilobar holoprosencephaly with frontonasal encephalocoele.

He was the 2nd child from a non-consanguineous family. The first child was healthy and normal. No family history of abnormally infants. Chromosome study showed normal karyotyping: 46 XY. After discussion with the parents the decision was made to give the patient only palliative care.

Discussion & Conclusion: Even though frontonasal encephalocoele is not rare, this is among the first reports of the combination of frontonasal encephalocoele, semilobar holoprosencephaly and dextrocardia in patient with normal chromosomal study.

PS-39

TOTAL HIP ARTHROPLASTY FOR THE YOUNG

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Introduction: Total Hip Arthroplasty (THA) remains one of the most successful reconstructive procedures in orthopaedic surgery. Pain relief and restoration of function can be obtained in majority of cases which is satisfactory to both patients and surgeons. The long term results from conventional THA have been good. However, with time there is an increase risk of osteolysis hence loosening of the implants. This is particularly a problem in the young. There have been new developments in the evolution of design in THA in order to prolong the life of the implant.

Case Report: We present a case report of a 49 year old lady who presented to us with severe degenerative changes in her left hip following septic arthritis of the hip. She underwent a THA using an uncemented metal on metal implant. We describe the conventional THA and the reasons it fail. We also describe the uncemented metal on metal THA and discuss the rationale of its use which includes preservation of bone stock, better wear characteristic and better stability.

Discussion & Conclusion: Uncemented metal on metal THA is a good option for hip replacement for the young. Early and intermediate term results have been promising. However, long term follow up is necessary to determine any possible deleterious effect associated with metal on metal articulation.

PS-40

RIGHT DISTAL FEMUR FRACTURE FIXED MEDIALY WITH LEFT CONDYLAR LOCKED PLATE

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Introduction: Current fixation devices for the distal femoral fracture are the classic condylar plate, the dynamic condylar screw, the condylar buttress plate, and the retrograde supracondylar femoral nail and the most recently developed LISS and the condylar locked compression plate. This condylar locked plate is design for fixation on the lateral aspect of distal femoral fracture. We report our experience of fixing this plate medially in a medial femoral condyle fracture. The reason is because we want the plate to exert its buttressing effect on the fractured femoral condyle.

Case Report: Twenty five year old gentleman had fractured his right femur five years ago and was fixed with lock intramedullary nail. Currently following a motor vehicle accident he presented with fracture of the right tibia and fracture of the right medial femoral condylar which begin just distal to the lock intramedullary nail and extend to femoral intercondylar notch. We proceed with surgery where the femoral nail was removed and the right medial femoral condylar fracture was fixed with left condylar locked plate. The plate was placed on the medial side of the distal right femur. The right tibial fracture was fixed with intramedullary nail. There was no post surgical complication except for superficial skin infection which responded well with antibiotic treatment. Follow up at six month showed that the bone has united and the range of motion was 0 – 100 degrees.

Discussion & Conclusion: Medial femoral condylar fracture can be fixed medially using the contra lateral side condylar locked plate.

PS-41

SPOROTRICHOSIS IN ORTHOPAEDIC PRACTICE

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Introduction: Chronic skin and soft tissue infection usually occurs in immunocompromise patients. We review case series of lymphocutaneous disease due to sporotrichosis presented to orthopaedic clinic with the aim at looking into type of presentation and treatment of the disease.

Case Report: We retrospectively reviewed 4 patients treated in orthopaedic clinic. They were between age 27 to 67 yrs old. All patients had multiple chronic skin ulcer of more than 2 months and did not have evidence of immunocompromise disease, however had prior skin injury while working outside the house (gardening, repairing bird cage). Site of injury underwent incomplete healing later indurated and ulcerate. It was later followed by development of multiple nodules (red or pink in colour) along lymphatic drainage with some of rupture producing pus and form chronic ulcers. The progressions occurred despite multiple episode of antibiotics treatment by general practitioner. There was no fever. White cell counts were at normal range. Immediate microscopic examination of the tissue did not find any organism however tissue culture for fungus resulted in the growth of *Sporothrix schenckii* Lesions in all patients healed with oral Iatrimonazole 100mg daily for 2 to 3 months.

Discussion & Conclusions: This study indicates the present of this organism in our community. All patients presented late due to misdiagnosis. Recognition of its clinical presentation is vital as microscopic examination is rarely conclusive and special fungal culture which may take up to 28 days before result is available.

PS-42

SPLENIC INFARCT AS A DIAGNOSTIC PITFALL IN CARCINOMA COLON

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Introduction: Follow up of colorectal carcinoma after therapy is based on symptoms, tumor markers and imaging studies. Clinicians are some times presented with diagnostic dilemmas because of unusual presentation on the imaging modalities coupled with rising serum markers.

Case Report: We report a case of colorectal carcinoma that presented with gastrointestinal symptoms after 14 months of treatment completion. Investigations showed rise in carcinoembryonic antigen (CEA). Suspecting disease recurrence complete radio-imaging workup was performed which was negative except for a smooth, hypo-dense area in posterior third of spleen on CECT abdomen. In view of previous diagnosis of carcinoma colon, symptoms, elevated CEA and atypical CECT appearance a diagnosis of splenic metastasis was made. The patient was subjected to splenectomy as a curative treatment. However, the histo-pathological report revealed it as a splenic infarct.

Discussion & Conclusion: The present case re emphasizes diagnostic pitfalls of radiological studies in follow up of carcinoma colon.

PS-43

ENUCLEATION OF EXTRACONAL FRONTOMUCOCELE : A TRIPLE-WINDOW APPROACH

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Introduction: Mucocoeles are expansile masses originating in the sinuses. They are relatively unusual, occurring most frequently at fronto-ethmoidal and frontonasal regions. They are locally destructive and the erosion and expansion of the bony wall will encroach upon and displace the adjacent structures.

Case Report: We report a case of a patient who presented to our clinic with bulging of his left eye and worsening of the left vision, with prior history of sport injury to his left supraorbital ridge. CT scan revealed that there was an extraconal lesion at the superolateral part of the left orbital cavity which pushed the orbit inferomedially. This finding is in consistent with left frontomucocele. The patient subsequently underwent enucleation of the lesion via 3 windows created namely at the left supraorbatal ridge, anterior table of left frontal sinus and through the septum separating the frontal sinuses.

Discussion & Conclusion: In conclusion, we demonstrate a successful approach in order to achieve a total enucleation of the mass.

PS-44

OCULAR COMPLICATION FOLLOWING BEE STING INJURY

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Introduction: Corneal bee stings rank among the rarest injuries to the eye, but when they do occur; their complications are extremely sight-threatening. Ophthalmologic findings after such stings are various, also unpredictable from mild tissue oedema and hyperemia to permanent visual loss. A corneal bee sting is composed of mechanical, immunologic and toxic injuries. We reported a case of corneal bee stings with retained stinger (ovipositor) complicated by toxic keratopathy,

Case Report: A 29 years old gentleman, previously healthy, experienced severe pain and diminution of vision after having been stung by a bee in his right eye while he was working in the fields. He consulted the ophthalmologist four hours after the incident. On presentation, his visual acuity was 6/24 in his right eye and 6/6 in his left eye. There was generalized conjunctival injection and presence of bee stinger at the center of the cornea. A dense corneal oedema was noted surrounding it which hindering further details of the eye examination. The left eye was normal. The stinger was removed immediately under local anesthesia and he was treated with intensive topical steroid and topical antibiotic. He showed a dramatic clinical response to the treatment. Unfortunately, another stinger was noted in the cornea five days later. It was removed successfully under local anesthesia and initial treatment was continued. His corneal oedema was gradually improved but he was noted to have developed heterochromia iridis at the end of the battle.

Discussion & Conclusion: Early recognition of the complications and appropriate treatment may help to prevent permanent loss of vision. Removal of retained corneal bee stinger is difficult and often a segment remains within the cornea.

PS-45

LIP CANCER

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Introduction: Carcinoma of the lip is one of the most common malignancies in the head and neck. The most frequent location of lip cancer is the lower lip where it is reported being found between 85-95%. Several factors have been implicated in the etiology of lip cancer. Sunlight has been implicated as a major contributor to the development of lip cancer. Moderate to heavy cigarette and pipe smoking also play a causative role. Majority of lip cancers are squamous cell carcinoma. We report here such extremely rare case of lip cancer reported as mucin secreting adenocarcinoma.

Case Study: A 64 years ex-chronic smoker known hypertensive and ischaemic heart disease presented in Nov 2005 with history of progressive painless right lower labial swelling for 2 years. On examination well lobulated sub labial swelling (3 x 4 cm) with multiple nodules, soft to firm in consistency, non-tender. Incisional biopsy showed mucin secreting adenocarcinoma well differentiated. CT brain & neck showed pressure erosion to the right body of mandible (stage T2 N1 Mo). Patient was planned for surgery however, patient defaulted. He attended the clinic again in Nov 2007 with Lip tumor increasing in size to (12 x 15 cm) with bloody mucus discharge. In view of extensive surgery and underlying cardiac problems surgery differed and tumor was radiated with external irradiation. At the end of radiotherapy tumor reduced by 90%.

Discussion & Conclusion: Radical radiotherapy is used in conditions where surgical treatment is not preferred due to the mutilating surgery or co-morbid medical illness. Adenocarcinoma are treated with surgery and radiation plays a role as adjuvant treatment. However, in the present case due to the co-morbid medical illness made radiotherapy as the main treatment.

PS-46

TESTICULAR CANCER - A CASE STUDY IN HUSM

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Introduction: Testicular cancer accounts for one percent of all tumours in males. It is the commonest malignancy in males between 15 and 34 years of age. Various aetiological factors are associated with testicular tumour development like cryptorchidism, testicular atrophy or dysgenesis and family history. Here we present 2 cases of Non seminomatous testicular tumour in siblings from the same family and their management.

Case report : Case 1: A 25 years old man, ex-smoker presented to Hospital Sultanah Nur Zahirah with one year history of right scrotal swelling and Right abdominal mass. Tumor markers BHCG was 19 144(<3.0) and AFP was 18 402(<0.58) prior to treatment. CECT Thorax, abdomen and pelvic showed huge well-defined rounded mass in right Lumbar region with para-aortic and mediastinal lymphadenopathies. Patient underwent right orchidectomy followed by chemotherapy. Post-operative histopathological report confirmed right malignant testicular tumour, consistent with yolk sac tumour of testis. Patient responded well to chemotherapy, with no evidence of disease and normal tumour markers. **Case 2 :** His younger brother, a 20 year-old young man presented to Hospital Tengku Ampuan Afzan, Kuantan complaining of 2 months history of progressive right testicular swelling without other associated symptoms. Pre-operative AFP and BHCG were 311 and 2566. Post-operative AFP, BHG and CECT thorax/abdomen were within normal limits. Biopsy revealed Non-Seminomatous Germ Cell tumour of possible yolk sac tumour and teratoma. Patient is under close follow-up for tumor markers assessment.

Discussion & Conclusion: Testicular tumour in the family is very rare. No predispose aetiological factors were noted. A screening of all males in their family done at HUSM did not reveal any abnormality. However, tumour markers like AFP, BHCG estimation play a major role in the management of testicular tumour.

PS-47

BILATERAL PRIMARY SQUAMOUS CELL CARCINOMA OF THE BREAST IN A PRE-MENOPAUSAL WOMAN (A CASE REPORT)

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Introduction: Primary squamous cell carcinoma (PSCC) of the breast is an extremely rare histological variant and constitutes less than 1% of breast cancers. All the cases published in the literature are unilateral breast cancer. This is a case of bilateral PSCC of breast in pre menopausal woman presenting as fungating breast mass.

Case report: 44 years old pre-menopausal, unmarried woman presented with bilateral breast lumps for 6 months duration. The mass ulcerated fungated and rapidly increased in size in the last 3 months. On examination, a large ulcerated fungating growth was seen on each breast. The floor was covered with necrotic tissue with foul smelling discharge. Both breast masses were fixed to skin and the chest wall. Patient received chemotherapy with Cisplatin, Adriamycin and 5-fluorouracil for the first cycle. Chemotherapy was changed to 5-fluorouracil, epirubicin and cyclophosphamide due to their side effects. The patient showed improvement but died of septicemia following the 2nd cycle chemotherapy.

Discussion & Conclusion: PSCC of the breast is rare and of unknown origin. The tumors in this case are locally advanced stage, appeared within a short period and absence of nodule on the skin supports two independent tumors arising from both breasts. PSCC of breast had an incidence of lymph node metastasis in 30% of the cases. In the present case, the right axillary lymph node involvement was proven on FNAC. FNAC of both tumors revealed only squamous elements without adenocarcinoma. Due to absence of precancerous etiology, we believe the cancer in both breasts originated de novo. Treatments included simple mastectomy with axillary clearance or segmental resection, chemotherapy and post-op radiotherapy to minimize recurrences.

PS-48

RUPTURED AMOEBIC LIVER ABSCESS IN A 37 YEAR-OLD MALAY PATIENT

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Introduction: Amoebiasis is caused by the parasitic organism, *Entamoeba histolytica*. Infection with this organism may present as intestinal amoebiasis, eg amoebic colitis or may be manifested extra-intestinally as hepatic amoebiasis, amoebic liver or brain abscess. Of these, amoebic liver abscesses is the most common extraintestinal manifestation of *Entamoeba histolytica* infection, and is associated with significant morbidity and mortality. About 75% of thoracic amoebiasis occur due to rupture of a liver amoebic abscess through the diaphragm.

Case report: We report a 37 year-old housewife with a past history of menorrhagia, who presented with the complaint of having low-grade fever and vague upper right abdominal pain for six months. There was loss of appetite and weight loss of 8kg. Her symptoms did not resolve despite multiple courses of treatment from the local clinic and district hospital. Physical examination showed a pale, jaundiced, non-cachexic patient. A right-sided pleural effusion up to the midzone and tender hepatomegaly three finger-breadths below the costal margin was noted. The left liver lobe was also palpable. A chest tube was inserted and drained large amount of brownish, viscous fluid. Subsequent liver ultrasound and computed tomography showed massive hepatomegaly with a cranio-caudal length of 23cm. There were multiple cystic lesions, the largest measuring 10.0x14.2x9.1cm. Amoebic serology was strongly positive. She underwent liver abscess drainage and was discharged after nearly a month of intravenous metronidazole.

Discussion & Conclusion: A patient may present with minimal symptoms despite having liver abscesses and intra-thoracic infection due to amoebiasis. The diagnosis may be missed unless there is a high degree of suspicion. As such, a diagnosis of a ruptured amoebic liver abscess should be thought of when similar patients are seen in the future.

PS-49

COLORECTAL CARCINOMA PRESENTING AS VULVAL MASS

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Introduction: Colorectal cancer is a common cancer in Malaysia. Colorectal cancer is one of the leading cancers and account for 13% of all cancers. Colorectal cancer represented 11-12 % of all cancer deaths. It is the most common cancer in developed countries and Malaysia. They usually occur in men and women over 50 years of age. Colorectal cancer presented with a change in the normal bowel habit , unexplained weight loss, blood in the stools, obstructive symptoms and malaena. Here, we presented an unusual presentation of Colorectal cancer as a vulval mass in an elderly lady.

Case report: 71 years old Malay lady, Para 3 presented to gynaecological team with vulval growth of 5 months durations. It was progressively enlarging within 2 months. She denied history of altered bowel habit , unexplained weight loss, blood in the stools and obstructive symptoms such as pain. Examinations revealed ulcerative proliferative growth of 5 x 4 cm involving the left lateral vaginal wall and posterior vaginal wall. Patient had bilateral inguinal lymph nodes. Biopsy revealed adenocarcinoma but colorectal cancer could not be ruled out. Patient was investigated to rule out colorectal cancer by colonoscopy and CEA measurement. Colonoscopy revealed a fungating growth of 2.5 cm from the anal verge. Biopsy taken showed well differentiated adenocarcinoma. Patient was planned for local radiotherapy to shrink down the mass at both sides and planned for surgery later.

Discussion & Conclusion: Our patient presented with a vulval mass rather than altered bowel habit HPE played a major role in highlighting this case of colorectal cancer.

PS-50

THE USE OF NON EXPANDED EPIDERMAL SKIN GRAFTS OVER INTEGRA (ARTIFICIAL DERMAL REGENERATION TEMPLATE) IN RECONSTRUCTION OF SEVERE WRIST CONTRACTURE POST BURN INJURY: A CASE REPORT

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Introduction: Artificial skin substitutes play an important role in burn reconstruction post major burn injuries. These groups of patients frequently develop multiple joint contractures which are often challenging. A variety of artificial skin substitutes is available for burn reconstruction. The dermal regeneration template (Integra) consisting of bovine collagen matrix is frequently used for burn reconstruction. Ideally expanded skin grafts are used to cover the artificial dermis.

Case Report: A 42-year old lady who sustained 36% TBSA flame burns presented with multiple contractures over both upper limbs. Severe wrist contractures were noted over both wrist joints and also over the right elbow joint. Release of the left wrist joint contracture with tendon lengthening and grafting was performed. The release resulted in a sizable soft tissue defect (12 x 7 cm). Palmaris longus tendon was used for tendon grafting of the flexor carpi ulnaris tendon and the flexor carpi radialis was lengthened. The skin defect was resurfaced using Integra (Artificial Dermal Replacement Template). After two weeks the take of Integra was 100% and the silicone layer was removed and replaced with an ultra thin layer of unexpanded split thickness skin graft. The skin graft take was 100%. One year post surgery the reconstructed joint had full range of movement with no residual recontracture and excellent cosmesis

Discussion & Conclusions: Non expanded epidermal skin grafts are preferably used over Integra in major joint contracture reconstruction. The functional and aesthetic result is encouraging and the rate of recontracture is also reduced in the non expanded group.

PS-51

**ROLE OF HYDROFIBRE SILVER IMPREGNATED DRESSING
IN THE TREATMENT OF 75% BURN**

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Introduction: Aquacel Ag®, a silver-impregnated moisture-retentive hydrofibre dressing has been reported to be beneficial in treatment of partial burn. We report our experience in managing a case of 75% superficial to deep partial-thickness burn conservatively with Aquacel Ag® dressing.

Case Report: A 29-year-old man presented with 75% superficial to deep partial-thickness burn associated with inhalational injury, following a gas explosion in the kitchen. Both gluteals and thighs were spared as he was wearing knee-length pants. On arrival, he was alert and talking in full sentences. His face was swollen, with evidence of hair, eyebrows and nasal hair singeing. Following immediate intubation, his facial burns were treated with dried amnion and the rest of his wounds were covered with Bactigras and Exudry. Aquacel Ag® dressing was commenced on Day 7 post injury. In spite of *Pseudomonas Aureginosa* infection at his trunk and both legs, the Aquacel Aq® dressing was continued. By Day 22, his wound was reduced to 23% and a week later, to 13%. At Day 30, 4% patches of non-epithelialized area were noted on the anterior aspect of both legs. After 6 sessions of progressively less painful change of dressings, his wounds were completely healed at on the 40th day post injury. On follow up there was hypopigmented scar, without any evidence of hypertrophic or keloid scar formation, and he had full range of movements at all his joints.

Discussion & Conclusion: Aquacel Ag® is an effective and versatile dressing for partial-thickness burns. It provides the ideal environment for re-epithelialisation, retains its antimicrobial properties for up to fourteen days and allows adequate exudate drainage. Hence, frequent painful dressings can be avoided. In addition, it is easy to apply and conforms intimately to the wound bed.

PS-52

ANALYSIS MORTALITY OF PERFORATED PEPTIC ULCER DISEASE FOLLOWING OPERATION IN HUSM

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Objective: Perforated peptic ulcer disease continues to inflict high morbidity and mortality. Patients frequently require emergency surgery for this complication of ulcer disease. Many have coexisting medical problems which not only predispose to perforated ulcer disease, but also influence the clinical outcome. This case review was carried out to assess the demographic profile of patients who underwent operation for the perforated peptic ulcer disease and to evaluate the pre-operative concurrent medical illnesses and intra-operative findings contributing to the outcome.

Patients & Methods: A retrospective record review study was conducted on all cases of perforated peptic ulcer that underwent surgery over the period of 6 months from August 2007 to March 2008.

Results: A total of 14 patients were included with predominantly male and the majority of them were 65-75 years old. Perforated gastric ulcer (PGU) was higher than duodenal ulcer (PDU). The mortality rate was around 50% mainly elderly patient aged 65 years old with PGU cases more than PDU. Four cases out of 7 cases associated with mortality had co-morbidities i.e cardiac problems and the others as complications following septic shock. The delay in seeking medical treatment may also contribute to the mortality with most of them presented more than 2 days post initial symptom. However, the intra-operative findings, size of ulcer and degree of soiling did not show significant association.

Discussion & Conclusions: Perforation is the second most common complication of peptic ulcer. Surgery is always indicated although occasionally non-operative therapy can be employed in stable patients without peritonitis and radiological evidence of sealed perforation. Perforated gastric ulcer carries a higher mortality rate than perforated duodenal ulcer. Age, medical co-morbidities, delay in seeking medical treatment and size of ulcer are highly predictive of increased mortality.

PS-53

SKELETAL MATURATION OF MALAY PATIENTS ATTENDING ORTHODONTIC CLINIC IN HOSPITAL UNIVERSITI SAINS MALAYSIA

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Objective: To determine the chronological age of skeletal maturation using the cervical vertebral maturation stages among Malay males and females.

Patients & Methods: This is a cross sectional study consisted of 215 Malay subjects, 92 subjects were males age ranged 10-17, and 123 subjects were females age ranged 8-15 years. The stages of cervical vertebral maturation (CVMS) were assessed from lateral cephalogram according to Baccetti et al., (2002) method. The peak in mandibular growth occurs between CVMS II and CVMS III. Descriptive statistics were obtained by calculating the means and standard deviations of the chronological ages for each stages.

Results: The mean and standard deviations of the chronological age in years for cervical vertebral maturation stages from CVMS1 to CVMSV were, for males 10.92 (0.55), 13.11 (1.41), 15.32 (1.08), 16.38 (0.51), and 16.52(0.42), for females 9.77(1.27), 11.14(1.67), 13.17(1.01), 14.30(.65), and 14.53(0.23).

Discussion & Conclusion: There is a wide variation of chronological age in males and females of cervical vertebral maturation stages, especially CVMS II. These data clearly demonstrate that chronological age is not a valid predictor of skeletal maturity among Malay subjects.

PS-54

MERKEL CELL CARCINOMA: A CASE REPORT.

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Introduction: Merkel cell carcinoma (MCC) is a rare, aggressive cutaneous malignancy of neuroendocrine origin in the elderly with generally poor prognosis. The incidence of MCC in Caucasians is about 2 per 1,000,000 population. It typically presents as a rapidly growing nodule and diagnosis is confirmed through histological examination. Wide local excision is advocated as the treatment of choice, while the role of adjuvant radiotherapy and chemotherapy remain controversial. We report a case of an elderly gentleman diagnosed with MCC and local recurrence.

Case Report: We report a 72 year old Siamese male presented with a 2-month history of left anterior chest wall nodule. Excision biopsy confirmed Merkel cell carcinoma with subcutaneous fat and vascular invasion. Routine follow up visits revealed tumor recurrence with multiple pedunculated lesions over the left anterior chest wall. CT thorax and abdomen showed extension of the tumor into the pectoralis major with multiple axillary and paratracheal lymph nodes. He was managed as aggressive Merkel cell carcinoma with local recurrence and subsequently referred to the Oncology unit for adjuvant radiotherapy with satisfactory initial outcome. He is currently undergoing adjuvant chemotherapy.

Discussion & Conclusion: Our experience with Merkel Cell Carcinoma is very limited and such clinical presentation provides a unique management challenge to the team. Excision of the mass was done followed by adjuvant radiotherapy and chemotherapy. Initial outcome has been encouraging. However, no consensus is currently available on the optimal treatment of MCC and the reported survival rate remains dismal from 31% at three years to 74% at five years.

PS-55

MASSIVE BLEEDING, SIMPLE SOLUTION

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Introduction: The term acute hemorrhagic rectal ulcer (AHRU) described as a bleeding lesion that “frequently occurs in elderly patients who have severe underlying ulcer disorders, and characterized by the presence of either irregular or nearly round ulcer formation at the lower part of the rectum near the dentate line”. AHRU is seen in 2.8% of patients with massive lower gastrointestinal bleeding.

Case report: We report a case of a 69 year-old female with sudden onset painless massive bleeding per rectum after passing hard stool. It was associated with lethargy but no nausea, vomiting and abdominal pain. Her co-morbidity includes hypertension and stroke on aspirin therapy. She also has history of chronic constipation. Investigation revealed severe anemia with low haemoglobin level of 5.5gm/dl. Clinically, she looked pale and per rectum examination showed fresh blood with clots. No rectal mass was felt. Proctoscopy showed clots and no source of bleeding could be identified. Urgent orogastroduodenoscopy (OGDS) was non-contributory. Colonoscopy showed anterior solitary bleeding rectal ulcer, 6cm from anal verge. Simple suturing was done and haemostasis was secured.

Discussion & Conclusion: Solitary rectal ulcer presenting with acute hemorrhagic rectal ulcer is a rare cause of massive lower GI bleeding. It accounts for only 2-3% of all patients presenting with significant lower GI bleeding. AHRU diagnosis is based on clinical characteristics, endoscopic findings, and exclusion of other causes. Surgical haemostasis such as transanal ligation or rectal resection has been described in the past. Endoscopic haemostasis is the preferred therapeutic modality.

PS-56

THE POSSIBLE ASSOCIATION OF THE OBSTRUCTIVE SLEEP APNEA SYNDROME (OSAS) WITH EPILEPSY

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Objective: To study obstructive sleep apnea syndrome (OSAS) in epilepsy patients using Epworth questionnaire and overnight polysomnography test.

Patients & Method: All epilepsy patients, both male and female who attended the neurology clinic in Universiti Sains Malaysia Hospital (HUSM) and who agree to participate in this study were included. This protocol involved the assessment of sleepiness in epilepsy patients by using the Epworth questionnaire. All of the subjects underwent an overnight polysomnography test in HUSM sleep laboratory.

Result: Our preliminary survey of epilepsy patients showed the majority of them were sleepy as compared to the general population. Further data will correlate the sleepiness with the obstructive sleep apnea syndrome.

Discussion & Conclusion: The effect of antiepileptic medication in epileptic patients may be associated with OSAS. The mechanism of the association is still unknown. Perhaps treating OSAS may reduce the frequency of epileptic attack and improve compliance of epileptic patients.

PS-57

ANALYSIS OF THE SOFT TISSUE PROFILE OF MALAY CHILDREN USING A THREE-DIMENSIONAL MORPHOMETRY

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Objective: To determine the soft tissue profile of Malay children in three dimensions in order to generate a database in Malaysia.

Patients and Method: This is a descriptive prospective study involving twenty - six Malay subjects (12 males and 14 females), between 4-10 years of age with good soft tissue profile. They were randomly selected from plastic clinic and paediatric surgical ward at the University Sains Malaysia. The soft tissue facial profiles were digitally analyzed with the DPS800 system, which consist of four camera pods, using standardize(Farkas) linear measurements (11 vertical and 8 horizontal). Photos taken in natural head position, to determine average soft tissue facial profile for males and females. Statistical evaluation was performed with repeated-measures analysis of variance.

Results: Compare to the North American Caucasians, the Malay children had significantly larger intercanthal distance, nasal width, width of the philtrum and width of mandible. However, they had less height of the nose, nasal tip projection, mouth width, lip height, face height and short nasal bridge. Compare to Chinese, the Malay children had more width of mandible, less height of the nose and less height of the face.

Discussion and Conclusion: Our study provides valuable database on major facial characteristics of the Malay children. And this data could be useful for the soft tissue profile evaluation in patients with dentofacial deformities and possible surgical treatment. Surgeons often require access to craniofacial databases with accurate measurements. The accent is given to the fact that this is the first study performed on the Malay children using three-dimensional morphometry.

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FRAGILITY FRACTURE: WHAT IS IT AND WHAT CAN WE DO?

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Introduction : Osteoporosis is defined as a systemic skeletal disease characterized by low bone mass and micro-architectural deterioration of bone tissue, which consequent increase in bone fragility and susceptibility to fracture. Osteoporosis related fracture or fragility fracture has been recognized as major global health problem, particularly in elderly. It is a 'silent' disease. Sufferers do not have any symptom until they present with a fracture. The key is not only to diagnose the condition, but also to predict fracture risk. This depends on clinical risk factors (particularly age, weight and past history of fractures) and measurement of bone density.

Case Report: We present a case report of a post menopausal lady who presented to us with an intra-capsular fracture of the neck of femur after a trivial injury. She underwent an operation in the management of her fracture, bipolar hemiarthroplasty. We discuss the patho-physiology of osteoporosis, the problem and the health impact on our population, means of diagnosis and the treatment available. We wish to increase awareness of the extent of the disease and health impact on patients. It is hope that this will improve assessment and treatment for patients with osteoporosis.

Discussion & Conclusion: Osteoporosis is an important health problem in our community. It deserves special emphasis and we need to be aware of the at-risk patients. Only be appropriate assessment and treatment will we be able to reduce the incidence of fragility fracture.

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OCULAR INFILTRATION IN ANAPLASTIC LARGE B CELL LYMPHOMA

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Introduction: Lymphomas represent abnormal proliferations of different parts of lymphoid system. Ophthalmic manifestations are rarely seen unless the disease is clinically and haematologically active. Lymphomas tend to involve the vitreous and retina and frequently represent a diagnostic challenge to the clinicians. We report a case of metastatic ocular infiltration in a patient with anaplastic large B-cell lymphoma in remission.

Case Report: A 32-year old lady, diagnosed with anaplastic large B-cell lymphoma of the lungs and received six cycles of chemotherapy (CHOP). Unfortunately, she developed multiple lymphadenopathy during the course of chemotherapy. CT-scan showed evidence of disease progression with lymphoma stage IV. She was started on salvage chemotherapy (HyperCVAD-HDMTX) for two cycles. Three months after completing the regime, she presented with blurring of vision and floaters in both of her eyes. Ophthalmic examination showed severe vitreous inflammation with multiple deep seated choroidal lesions in her eyes. Evidence of ocular infiltration was supported by CT-scan orbit. She was treated with involved field radiation therapy (IFRT) of the orbit. Her final visual outcome was excellent.

Discussion and Conclusion: Identification and prompt diagnosis are essential in the treatment of metastatic ocular infiltrations. Radiotherapy and chemotherapy will result in a good visual outcome.