DEDICATION

To my parents, brothers, cousin and nephews, to the spirit of all Muslims martyrs, who gave up their souls willingly for the sake of their religion.

To all malarious patients especially those who contributed to this study, wishing them a good health and a happy life.

To all those who offered their kind assistance & support, I dedicate this study.
ACKNOWLEDGEMENT

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Last and not least my acknowledgement and thanks are extended to Dr. Adil and Ustaz Khalid for data analysis.
**ABSTRACT**

Pf infection maybe a cause of acute renal failure, whereas renal failure appears to be a common complication of severe malaria in adults, it seldom occurs in children.

A prospective study conducted during the period of February 2003 to May 2004, in which plasma levels of urea, creatinine, sodium and potassium of 40 malarious patients infected with *Plasmodium falciparum* were compared with and 30 apparently healthy individuals (non-malarious) as a control group their ages matched between 15-55 years. Both controls and patients were selected randomly from Gazira State Wad Medani teaching Hospital emergency, only urea was significantly raised in patients (33.5 ± 9.7 mg/dl versus 28.6 ± 8.5 P<0.05), whereas plasma levels of creatinine, sodium and potassium had showed non significant difference in malarious patients:

(0.9± 0.3 mg/dl versus 0.8±0.1, P>0.05) for plasma creatinine.

(137.3± 7.2 mmol / versus, 138.5±5.6 P>0.05) for plasma sodium.

(3.56 ± 0.6 versus 3.56 ± 0.6 mmol/l, P >0.05) for plasma potassium.

This study concluded that there was no significant relationship between falciparum malaria hyperparasitaemia and acute renal failure.
ملخص الدراسة


كما تم اختيار ثلاثين فردًا آخرين من غير المصابين بـملاريا كعينة ضابطة، كلما العينتين تم اختيارهما عشوائيًا من قسم حوادث البدنانية بمستشفى ود مدني التعليمي - بولاية الجزيرة، ولحظ أن البولينا فقط قد سجلت ارتفاعًا ملحوظًا ذات دلالة معنوية بين المرضى(3.5 ± 0.7 ملجم / دسلتر مقابل 28.6 ± 8.5 ، باحتمال أقل من 0.05)، بينما لم يتم تسجيل الكرياتينين، الصوديوم والبوتاسيوم أي اختلافات خلال المرضى. (الوسط الحسابي ± الانحراف المعياري عند مجموعة الدراسة مقابل المجموعة الضابطة ) (0.9 ± 0.3 ملجم دسلتر مقابل 0.8 ± 0.1 ، باحتمالية أكبر من 0.05). بالنسبة لبلازما الكرياتينين.

(٣.٧٣١ ± ٢.٧ ملمول / لتر مقابل ٥.٨٣١ ± ٦.٥ ملمول / لتر ، باحتمالية أكبر من ٠.٠٥).

بالنسبة لبلازما الصوديوم.

(٣.٥٦ ± ٠.٥٦ مقابل ٣.٥٦ ± ٠.٥ ملمول / لتر ، باحتمالية أكبر من ٠.٠٥).

بالنسبة لبلازما البوتاسيوم ، خلصت هذه الدراسة إلى أنه ليس هناك علاقة واضحة بين الإصابة بـملاريا الفالسبيارم ذات معدل الطفيل المرتفع و الفشل الكلوي الحاد .
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# Abbreviations

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<tr>
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