

بسم الله الرحمن الرحيم

الآية

قال الله تعالى :

(وَقُلْ رَبِّ ادْخِلْنِي مُدْخَلَ صِدْقٍ
وَأَخْرِجْنِي مُخْرَجَ صِدْقٍ وَاجْعَلْ لِي
مِنْ لَدُنْكَ سُلْطَانًا نَّصِيرًا)

"صدق الله العظيم"

سورة الإسراء

الايه 80

Dedication

.This work is dedicated to my beloved parents

To my faithful brothers and sisters

To all people who helped me

Acknowledgement

Thanks and blessing to ALLAH, for his guidance towards
.conclusion of this thesis

My deep appreciation extends to my supervisor Dr. Asma
Ibrahim Ahmed Elamin who dedicated me a lot of his precious
time and gave me valuable assistance and encouragement all
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.improvement of this thesis

Abstract

This is cross sectional descriptive study done to evaluate normal caudate lobe of the liver by ultrasound in adult Sudanese population

The normal anatomy of the caudate lobe can create several pitfalls that may lead mistakenly to be diagnosed as a disease. Such as, the caudal margin of the caudate lobe often ends in papillary process that attaches to the caudate lobe by narrow connection. On transverse ultrasound scans the connection of the papillary process may be missed and the process thereby judged to be an enlarged lymph node or a pancreatic mass

The study was carried out in four month during the period from May to September 2016 in Abu Jubaiyha Education Hospital and Alrayan Medical Center, south kurdufan state, Sudan

The aim of this study was to characterize the normal caudate lobe shape, location, texture and size in adult Sudanese population using ultrasonography imaging

This study carried out in a sample of 50 patients (20males and 30 females) who underwent abdominal ultrasound examination for other reason without liver diseases. The data were first summarized into master sheet, and then analyzed by using statistical package SPSS version 15.0

The main results of this study were that the caudate lobe measurements (right to left Diameter, anteroposterior Diameter, caudate to right lobe ratio) and the right lobe diameter greater in male than female and increased with age and this indicate that the size of liver and caudate lobe increased as the age increased. And the most common shape of the % caudate lobe was rectangular 90

المستخلص

هذه راسة وصفية مقطعية عملت لتقييم الفص المذنب الطبيعي للكبد بواسطة الموجات فوق الصوتية للسكان السودانيين الراشدين.

التشريح الطبيعي للفص المذنب يمكن ان يشخص تشخيصا خاطي كمرض ما،مثال لذلك:الفص المذنب ينهى بنتؤ حلمى يرتبط به بواسطة غشاء رفيع هذا الغشاء لا يظهر عادة فى الصورة العرضية للموجات الصوتية لذا يشخص تشخيصا خاطى كورم فى غدة البنكرياس او تضخم للغدة اللفاوية.

هذه الدراسة أجريت لمدة اربع اشهر في الفترة من مايو الى سبتمبر 2016 بمستشفى ابوجبيه التعليمي ومركز الريان الطبي الحديث (ولاية جنوب كردفان)

الهدف من هذه الدراسة توصيف شكل ومكان وطبيعة وحجم الفص المذنب الطبيعي لدي السودانيين باستخدام الموجات فوق الصوتية.

أجريت هذه الدراسة في عينة تتكون من 50 مريض (20 ذكر و 30 اناث) خضوا لفحص الموجات الصوتية للبطن لاسباب اخرى غيرامراض الكبد ، البيانات جمعت في شكل جداول اولية ومن ثم حلت احصائياً بواسطة برنامج SPSS.

النتائج الرئيسية لهذه الدراسة قياسات (من الشمال لليمين ومن الامام للخلف للفص المذنب والفص الايمن) ونسبة الفص المذنب للايمن اكبر عند الذكور وتزيد بزيادة العمر والشكل الاكثر شيوعاً لفص المذنب هو الشكل المستطيل بنسبة 90% .

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List of abbreviations

Antroposterior	AP
anterior	An
Caudate Lobe	CL
Caudate To Right Lobe Ratio	CRL-R
Computed Tomography	CT
craniocaudal	CC
Two Dimension	2D
Inferior Vena Cava	IVC
Left Portal Vein	LPV

Left	LT
Standard Division	STD
Non Alcoholic Fatty Liver Disease	NAFLD
Non By Os	NPO
Portal vein	PV
Right	Rt
Right Lobe	RL
Right Upper Quadrate	RUQ

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