بسم الله الرحمن الرحيم

قال تعالى:

(وَالْعَصْر (1) إِنَّ الإِنسَانَ لَفِي خُسْرٍ (2) إِلاَّ الَّذِينَ آمَنُوا وَعَمِلُوا الصَّالِحَاتِ وَتَوَاصَوْا بِالْحَقِّ وَتَوَاصَوْا بِالصَّبْرِ (3))

صدق الله العظيم

سورة العصر

Dedication

To my parents

My wife

My children

My

teachers

And

friends

Acknowledgment

I would like to thank everyone who assists by one way or another to bring this study to the light.

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List of abbreviations:

ACTH Adreno-cortical trophic hormones

AMP Adenosine mono phosphate

BMI Body mass index

CT Computed tomography

DEG Diffuse enlarged goiter

FNA Fine needle aspiration

FSH Follicle stimulating hormone

GH Growth hormone

IDA Iodine deficiency areas

LH Luteinizing hormone

MEN Multi endocrine neoplasia

MHz Mega hertz

MNG Multi nodular goiter

MRI Magnetic resonance imaging

MTC Medullary carcinoma of thyroid

NG Nodular goiter

PRL Prolactine

RICK Radio isotope center Khartoum

SN Solitary nodule

SPECT Single-photon emission computed tomography

THI Tissue harmonic imaging

TRH Thyroid releasing hormone

TSH Thyroid stimulating hormone

T3 Tri iodo thyronine (thyroxin)

T4 Tetra iodo thyronine

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Abstract

This study is conducted at RICK, nuclear medicine department, and ultra sound department.

Random sample of fifty patients, males and females with different ages, who were found to have abnormal thyroid scintigraphy findings, then thyroid ultrasound was done for all.

In this study, female to male ratio is (4:1), and the majority of patients either from western Sudan 40% or from the north 38%.

The age group of most patient 76% falls in the range between 25-55 years.

Both imaging modalities revealed 96% of patient has an enlarged thyroid.

Ultrasound revealed 31patient 62% have MNG, 13 patient 26% with DEG, 5 patient 10% with SN, and 2% only one patient with thyroid cyst, while scintigraphy revealed 18 patients (36%) with MNG, 21patients (42%) with NG and 11 patient (22%) with DEG, also scintigraphy revealed that 60% of patient have a normal iodine uptake, 34% with high uptake and only 6% with low iodine uptake.

The study concluded that the two imaging modalities when performed together will lead to obtain accurate and demonstrate any structural changes and pathological changes.

الخلاصة

أجريت هذة الدراسة في قسم الطب النووي بمركز العلاج بالأشعة والطب النووي – الخرطوم , وقسم الموجات فوق الصوتية بمركز العلاج بالأشعه والطب النووي .

أخذت عينة عشوائية من المرضي (نساء ورجال) تتكون من خمسين مريضا من مختلف الأعمار والذين وجد أن نتائج فحصهم النووي للغده الدرقيه غير طبيعي, بعد ذلك خضع كل المرضي لإجراء فحص الموجات الصوتيه للغدة الدرقية .

في هذه الدراسه وجد أن معدل تردد النساء للرجال هو 4:1 وأن أغلبية المرضى إما من غرب السودان 40% أو من شمال السودان 38%. معظم المرضى 76% يقعون في المجموعه العمريه ما بين 40-55 سنه.

كلتا التقنيتين للتصوير أظهرت أن 96% من المرضى لديهم تضخم في الغده الدرقيه.

الموجات الصوتيه أظهرت أن 31 مريض 62% لديهم تضخم في الغده الدرقيه متعدد العقد, 13 مريض 26% لديهم تضخم متجانس في الغده الدرقيه, 5 مرضى 10% لديهم غده درقيه ذات عقبده وحيده و 2% فقط مريض واحد له كيس في الغده الدرقيه, أما التصوير بالنظائر المشعه فأظهر أن 18 مريض 36% لديهم غده درقيه متعددة العقيدات,21 مريض 42% لديهم غده درقيه عقديه, وأن 11 مريض 22% لديهم تضخم متجانس في الغده الدرقيه, أيضاً التصوير بالنظائر المشعه أظهر 60% من المرضى لهم إمتصاص طبيعي لليود 34% من المرضى لهم إمتصاص أقل من الطبيعي.

الدراسه إنتهت إلي أنه عند إستخدام الفحصين معاً, هذا يقود للحصول على تشخيص دقيق لأي تغيرات تركيبيه و مرضيه.