



Chromosome 1P36 Deletion Syndrome: An Adult Requiring Primary Care Physician-centered Multidisciplinary Care.

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Abstract

1p36 deletion syndrome is a rare chromosomal disorder. Primary care-based treatment has been proposed for long-term management. A 24-year-old adolescent was diagnosed with a case of 1p36 deletion syndrome. Constipation and GERD are frequent complaints of PCP visits. There is no proven curative treatment for Chromosome 1p36 deletion syndrome. Early collaboration with specialists as a team where PCP is the leader has proven to better care for this rare disease in all ages. Life expectancy and overall prognosis in 1p36 deletion syndrome are not yet well defined. Long-term supportive management is the only treatment available.



A Case of Symptomatic Carotid Artery Stenosis Mimicking Acute Stroke Requiring Early Intervention

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Abstract

Stroke is one of the leading causes of adult death and morbidity. Early investigations of the underlying cause are important for the timely decision of intervention. A 75-year-old male presented with a focal neurologic deficit and was diagnosed with acute ischemic stroke. Early investigation revealed symptomatic right internal carotid artery atherosclerosis. A right carotid endarterectomy was planned to prevent further stroke. Rapid evaluation of patients with suspected stroke is critical because there is a very narrow time window in which stroke patients are eligible for treatment. Early intervention for symptomatic carotid atherosclerosis is recommended. Early investigations are recommended for every symptomatic stroke to identify underlying etiology.



Ig G4 Related Disease in Absence of Characteristics Histopathological findings; a case report

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Abstract

Introduction

IgG4-related disease is a chronic inflammatory disorder characterized by tissue infiltration with lymphocytes and IgG4-secreting plasma cells, varying degrees of fibrosis, and typically quick response to oral steroids. The acute phase of this condition is characterized by high blood IgG4 values.

Case Presentation:

A 72-year-old male presented with complaints of low-grade fever for 3 months & cough for 2.5 months, bodyache for 2 months, reduced appetite & unintentional weight loss of about 3 kg for the last 3 months. With these complaints, he visited a physician 2 months back, who drew about 500 ml of fluid from the left side of his chest and diagnosed him as a case of parapneumonic effusion. According to the patient, the fluid was straw in color which was sent for analysis, He received broad-spectrum antibiotics comprising of co-amoxiclav & clarithromycin for 14 days, without any significant improvement. CT Scan of the chest showed ground glass opacification in the upper lobe of right lung. VATS-associated pleural biopsy showed strips of tissue & fibrinous exudate undergoing organization. IG G4 level was 7.32 GM/dl. Though Ig G4 level was high,

there was still some dilemma because, in IG G4 disease, there are typical histopathological findings of storiform fibrosis & lymphoplasmacytic infiltration, which was not present. Oral Prednisolone was given as treatment, later Tablet of Mycophenolate Mofetil was added.

Discussion

Ig4-related disease diagnosis typically requires a tissue biopsy of an affected organ with characteristic histological findings, comprehensive medical history, and physical examination. But in this case, characteristic histopathological findings are absent. The goal of treatment is the induction and maintenance of remission to prevent the progression of fibrosis and destruction in the affected organ.



Smoking Abstinence Self-Efficacy Among Bangladeshi Smokers

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Abstract

Introduction

Smoking continues to be the major cause of many preventable diseases including lung cancer. It is anticipated that 10 million fatalities will be directly related to smoking by the year 2030. In contrast to the global reduction in smoking rates, the prevalence of smoking in Bangladesh is still high. While the significance of self-efficacy has frequently been discussed in terms of smoking cessation success, less is known about the variables that may be associated with self-efficacy, particularly among Bangladeshi smokers. Given this gap, in the present study, we sought to determine the factors that may be associated with smoking abstinence self-efficacy, among residents of Bangladesh who intend to quit smoking.

Method

A cross-sectional sample of 90 Bangladeshi smokers was surveyed. Demographic information and smoking abstinence self-efficacy variables were collected from March to mid-June 2023 using a Google form. Data were analyzed by SPSS version 20.

Result

The mean age of the participants was $23 \pm (SD)1.8$. The number of cigarette consumptions ranged from < 5 (35.8%) to > 20 (24.7%) sticks per day. A total of 82.9% of respondents were smokers for more than 1 year. The mean score of self-efficacies had a significant relationship with the number of cigarette consumption per day ($p<.001$) and duration of smoking in a lifetime ($p <.05$).

Conclusion

This study provides the first evidence of self-efficacy results in smoking abstinence among Bangladeshi smokers which could be a baseline platform for the future public health experts to consider 'self-efficacy' as a targeted mediator variable in interventions designed to increase smoking cessation in Bangladesh.

Keywords: Abstinence, Bangladesh, Self-efficacy, Smoker, Smoking



Acute Monoarthritis – Common Symptom with an Uncommon Cause

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Abstract

Introduction

The cause of arthritis is unknown in about 20% of patients. 90% of those patients ought to have resolved joint pain in 3 years. So about 2% of patients have a destructive course of arthritis, whose cause could not be determined.

Case Presentation

We present a case of a 30-year-old South Asian male with right knee pain for 3 years. Knee pain and swelling progressively worsened over the course of 10 months, not responding to courses of NSAIDs or glucocorticoids. MRI of the knee showed large knee joint effusion and synovitis. Synovial fluid aspiration ruled out septic arthritis and Lyme disease. Synovectomy revealed non-caseating granuloma. He was treated for *Mycobacterium marinum* arthritis with anti-tubercular drugs for 9 months. Persistent right knee pain resulted in further workup, showing negative fungal culture.

The unusual response to treatment has led to a diagnostic challenge. This case underpins the presence of significant diagnostic dilemmas.



Peritoneal Dialysis as Treatment for End-Stage Renal Disease

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Abstract

Dialysis modalities include hemodialysis (HD), either in a dialysis center or at home, or peritoneal dialysis (PD), including chronic ambulatory PD (CAPD) or automated PD (APD). CAPD involves multiple daily exchanges (usually three), followed by an overnight dwell. APD uses a cycler to perform multiple overnight exchanges, resulting in short dwells. Variations of APD include continuous cycler peritoneal dialysis (CCPD) and nightly intermittent peritoneal dialysis (NIPD). There is no daytime dwell in NIPD, but daytime dwell is present in CCPD.

The selection of dialysis modality is influenced by patient preference, comorbid conditions, dialysis-center factors, the patient's home situation, and the ability to tolerate volume shifts. Factors such as availability of resources, reasons for starting dialysis, the timing of dialysis initiation, patient education and preparedness, dialysis modality, and access significantly affect patient experiences and outcomes. Adjusting to the effects of kidney failure and the time patients spend on dialysis can be challenging for the patient and their families. Reasons for limited utilization are context-dependent, informed by local resources, dialysis costs, access to healthcare, health system policies, provider bias or preferences, cultural beliefs, individual lifestyle concerns, and possible care partner time.



Clinical Characteristics and Treatment Outcomes of Patients with Macrolide-sensitive Mycobacterium Abscessus Lung Disease

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Abstract

Mycobacterium Abscessus is a ubiquitous, rapidly growing non-tuberculous mycobacterium which can contribute to many pulmonary and non-pulmonary infections in humans. The incidence of infections caused by this bacterium is increasing globally. Due to the increase of both drug allergies and drug resistance, the treatment of this infection becomes challenging now-a-days. In this article, we describe a rare case of Mycobacterium Abscessus in a 24-year-old female with a previous history of asthma and allergic rhinitis. Her chief complaint was persistent cough for 6 years. After thorough investigations it was diagnosed as multi drug resistant Mycobacterium Abscessus. The patient was prescribed clarithromycin 500 mg twice daily for 8 months, with complete resolution of her symptoms. We hereby documented the clinical features, disease course and successful resolution of Mycobacterium Abscessus infection.



Blood-Based Biomarkers for Alzheimer's Disease Diagnosis: A Cost Effective and Less Invasive Key to Early Detection

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Abstract

The current number of patients living with Alzheimer's Disease (AD) is at a staggering 55 million globally, among which 6.5 million are Americans. Alzheimer's and similar diseases cost the American healthcare system a whopping \$290 billion in 2018 with a monthly cost of \$4,500 more for AD alone.¹ The key to bringing down the morbidity, mortality, and healthcare spending associated with AD is early detection via accessible and affordable screening tools. Traditionally, AD has been screened and diagnosed via CSF biomarkers (A β 42, T-tau, and P-tau)², followed by confirmation via brain Positron Emission Tomography (PET) scans. CSF biomarkers and brain PET scans have been the gold standard for AD screening and diagnosis for years, however, CSF studies involve invasive procedures and PET scans are expensive, both requiring patients to be in specialized settings.^{3,4} Delayed appearances of symptoms coupled with lack patient friendly screening options often discourage high risk patients to seek screening, enabling the disease to progress and leaving patients with reduced opportunities to have a better quality of life.⁵

Recently, use of blood-based biomarkers (Plasma β -amyloid ratio (A β)42/A β 40, Tau proteins, Neurofilaments, Glial fibrillary acidic protein ETC.) for detection of AD and other dementia have generated some excitement and hope in the AD research community, particularly

because it is less invasive, cost effective and having the potential to be easily accessible.⁶ We have reviewed 27 articles from various platforms such as PubMed, Google Scholar, ETC., published between January 2014 and March 2023, to analyze the usefulness of blood-based biomarkers and compare them to traditionally used CSF and PET scan biomarkers for AD diagnosis. This article aims to shed light onto the importance of early detection of AD and other dementia along with the validity and reliability of the novel blood-based biomarkers, which might have considerable clinical, and public health implications.



Monkeypox: Practical Information on Diagnosis, Prevention, and Treatment

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Abstract

This review aims to raise awareness about the dangers of monkeypox, an infectious zoonotic viral disease, as well as ways to prevent its spread in our communities. This review discusses the signs and symptoms (e.g., flu-like illness and rashes), transmission (e.g., direct contact), treatment (e.g., tecovirimat), and prevention (e.g., washing hands, avoiding physical contact) of the disease. This review also discusses infection control and prevention in healthcare settings (e.g., using PPE), and additional precautions needed for children, immunocompromised, and pregnant people.

Different diagnostic tests (e.g., polymerase chain reaction) are available for confirmation of monkeypox.



Recurrent Disseminated Blastomycosis during Pregnancy: A Challenging Clinical Scenario

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Abstract

Blastomycosis is a systemic fungal infection caused by *Blastomyces dermatitidis*. It is mainly prevalent in midwestern, south-central, and south-eastern states of the United States. This primarily affects the lungs but can disseminate to various organs, most commonly the skin. We present a unique case of a 33-year-old female who developed a recurrence of disseminated blastomycosis during pregnancy. Itraconazole was initiated and her baby is being evaluated for evidence of transmission. This case emphasizes the ability of blastomycosis to persist or reactivate during pregnancy, warranting strict adherence to appropriate management and close follow-up. In addition, having a high index of suspicion for systemic mycosis may enable early intervention and prevent complications.