Table (1):

Comparison between the three studied groups according to age n=80

Age St.group	X± SD	t	p
G Ⅰ - Rh.fever N=35	12.4±2.1	t1=1.58	>0.05
G Ⅱ -Rh.chorea N=5	13.6±1.5	t2=3.58	<0.001
G Ⅲ- control N=40	10.5±2.5	t3=3.98	<0.001

T1= G Ⅰ versus G Ⅱ   T2= GI versus G Ⅲ   T3= G Ⅱ versus G Ⅲ

X= means   SD= Standard deviation

Chart (1) means of ages
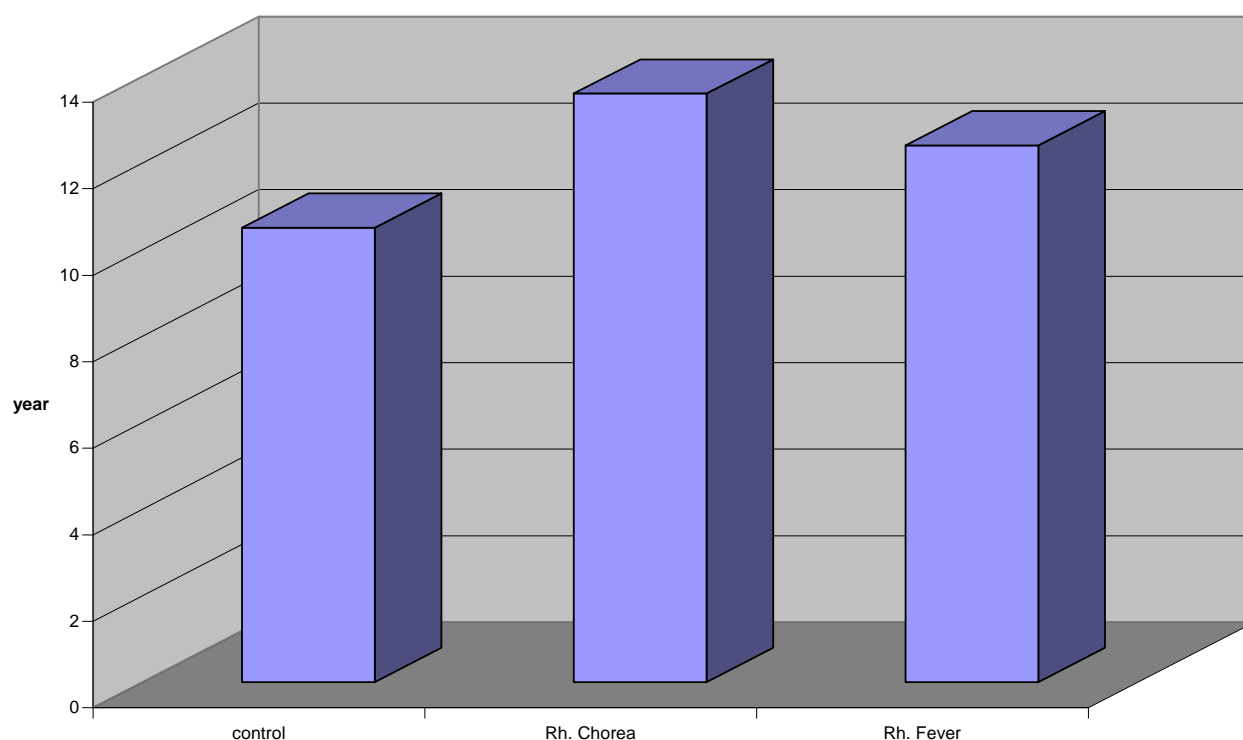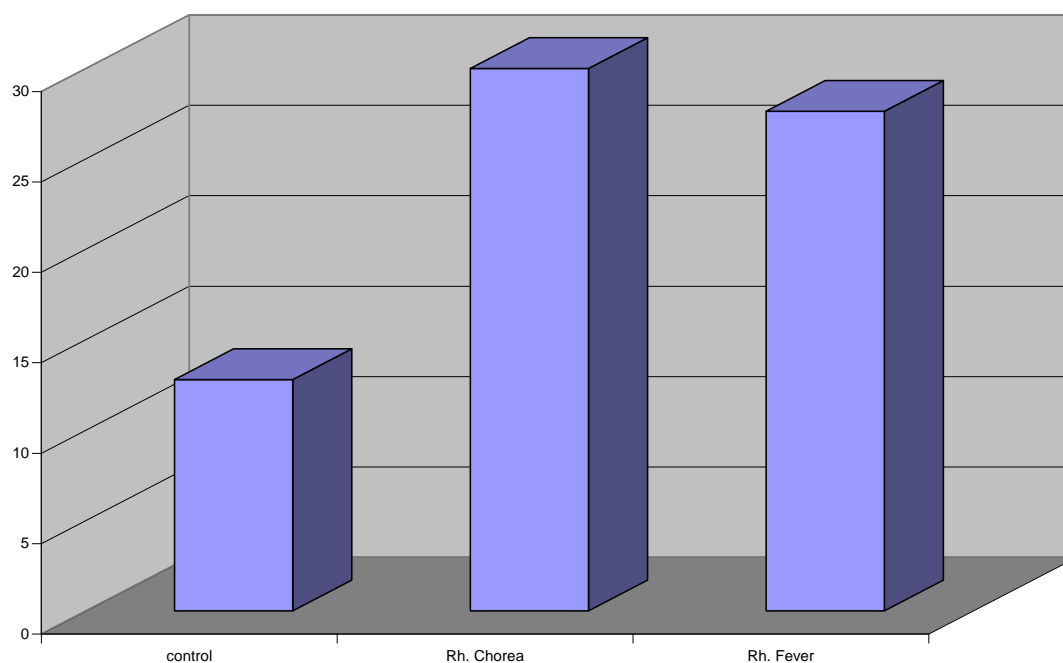

Table(1) and chart(1) show that:

- The means and standard deviation of age among rheumatic fever group was less than that for rheumatic chorea group, but both more than the mean and standard deviation of age among the control group.
- There was no statistical difference between rhematic fever and rheumatic chorea as regard the distribution of age P>0.05 the difference are statistically significant between rheumatic chorea and control.

Table (**2**):

Comparison between the three studied groups according to mean ESR level n=80

ESR / St.group	X± SD	t	p
1. Rh.fever N=35	27.63±8.9	t1=0.86	>0.05
2.Rh.chorea N=5	30±5.2	t2=8.87	<0.001
3. control N=40	12.8 ±4.6	t3=7.06	<0.001

Chart (2) means of ESR
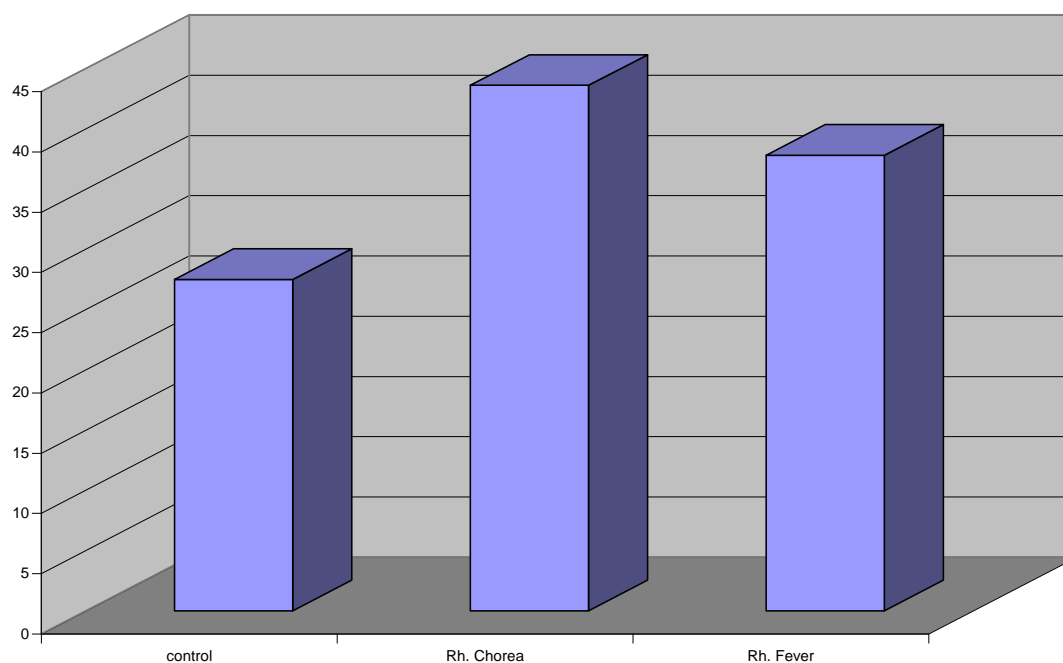

Table(2) and Chart(2) show that:

- The means and standard deviation of ESR among rheumatic fever group was less than that for rheumatic chorea and there is of no statistical difference also the means and standard deviation of ESR among control was less than that for rheumatic chorea and this highly significant.

Table (3):

Comparison between the three studied groups according to conner's score N=80

Conner's score St.group	X ± SD	t	p
1. Rh.fever N=35	37.8±12	t1=0.98	>0.05
2.Rh.chorea N=5	43.6±12.5	t2=4.38	<0.001
3. control N=40	27.5±7.5	t3=2.82	<0.01

# Chart (3) means of Conner's score

Table(3) and Chart(3) show that:

- There was no statistical difference beween rheumatic fever and rheumatic chorea as regard the conner's score. $P > 0.05$ and there was highly statistical difference between rheumatic chorea and control and also between rheumatic fever and control as regard conner's score $P < 0.001$ and $p < 0.01$ respectively.

Table (4):

Comparison between the three studied groups according to ADHD n=80

ADHD St.group	+ve		-ve		total		z	p
	no	%	no	%	no	%		
1. Rh.fever N=35	6	17.1	29	82.9	35	100.0	3.89	<0.001
2.Rh.chorea N=5	1	20.0	4	80.0	5	100.0	1.34	>0.05
3. control N=40	2	5.0	38	95.0	40	100.0	5.69	<0.001
total	9		71		80		-	-

Chart (4) ADHD among the study
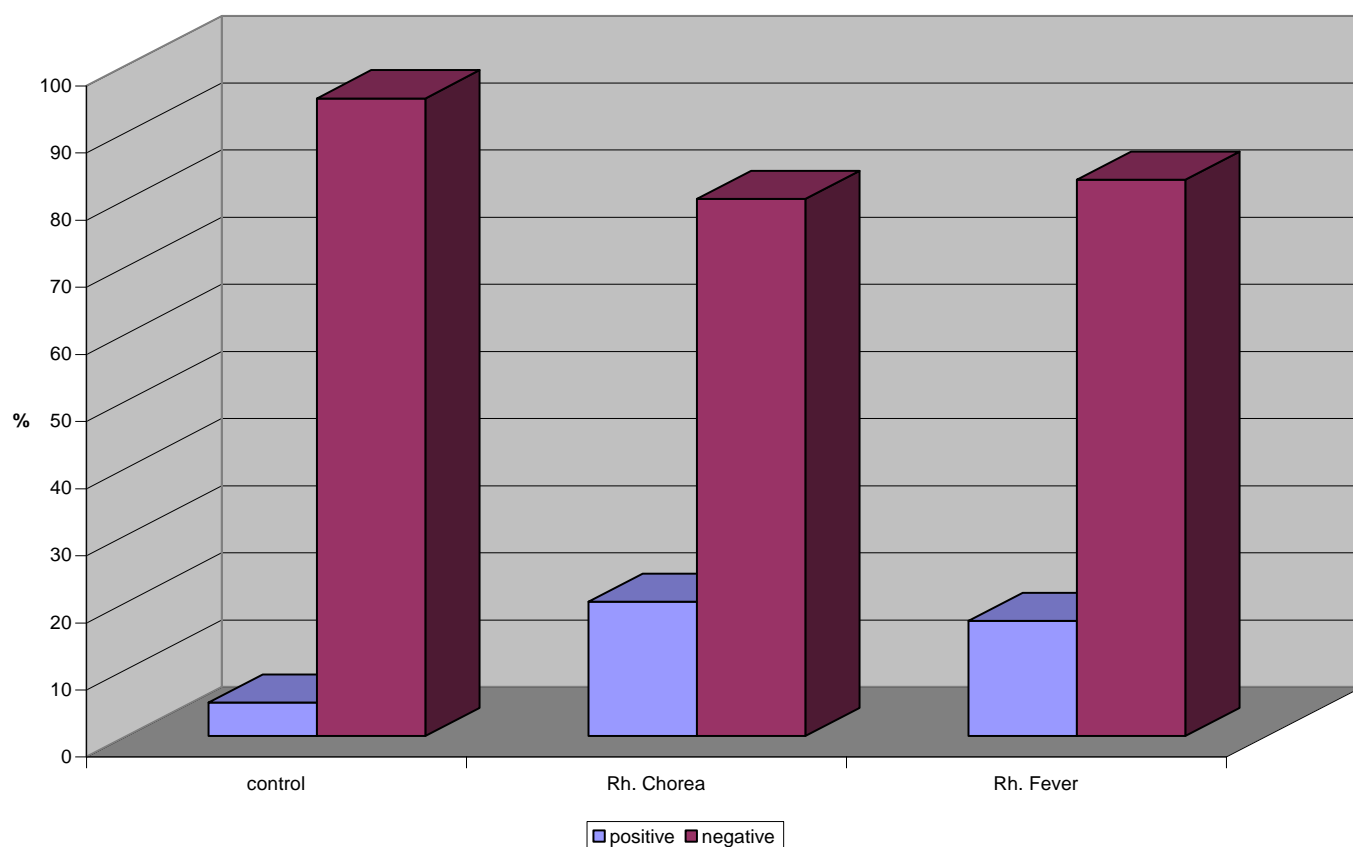
Table(4) and chart(4) show that:

- There was highly statistical difference between rheumatic fever and rheumatic chorea and also between rheumatic fever and control as regard ADHD P<0.001 and there was no statistical difference between rheumatic chorea and control as regard ADHD P>0.05
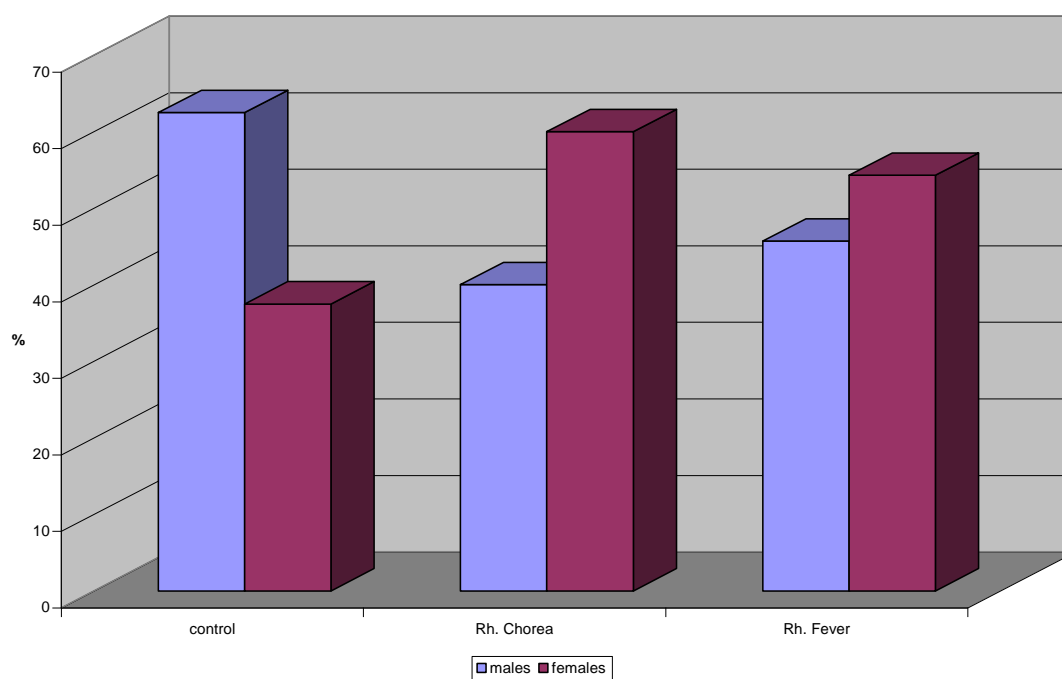
Table (**5**):

Comparison between the three studied groups as regard sex distribution n=80

| sex / St.group	Males		females		Total		Test of significance	
	no	%	no	%	no	%	z	p
1. Rh.fever	16	45.7	19	54.3	35	100.0	0.51	>0.05
2.Rh.chorea	2	400	3	60.0	5	100.0	0.45	>0.05
3. control	25	62.5	15	37.5	40	100.0	1.58	>0.05
total	43		37		80		-	-

Chart (5) sex distribution among the study

Table(5) and chart(5) show that:

- There was no statistical difference as regard distribution of sex between rheumatic fever, rheumatic chorea and control P>0.05

Table (6):

Comparison between the three studied groups as regard DSM IV combined type n=80

DSMIV combined St.group	+ve		-ve		Total		Test of significance	
	no	%	no	%	no	%	z	p
1. Rh.fever	2	5.7	33	94.3	35	100.0	5.24	<0.001
2.Rh.chorea	0	0	5	100	5	100.0	-	-
3. control	1	2.5	39	97.5	40	100.0	6.01	<0.001
total	3		77		80		-	-

# Chart (6) DSMIV combind types among the study
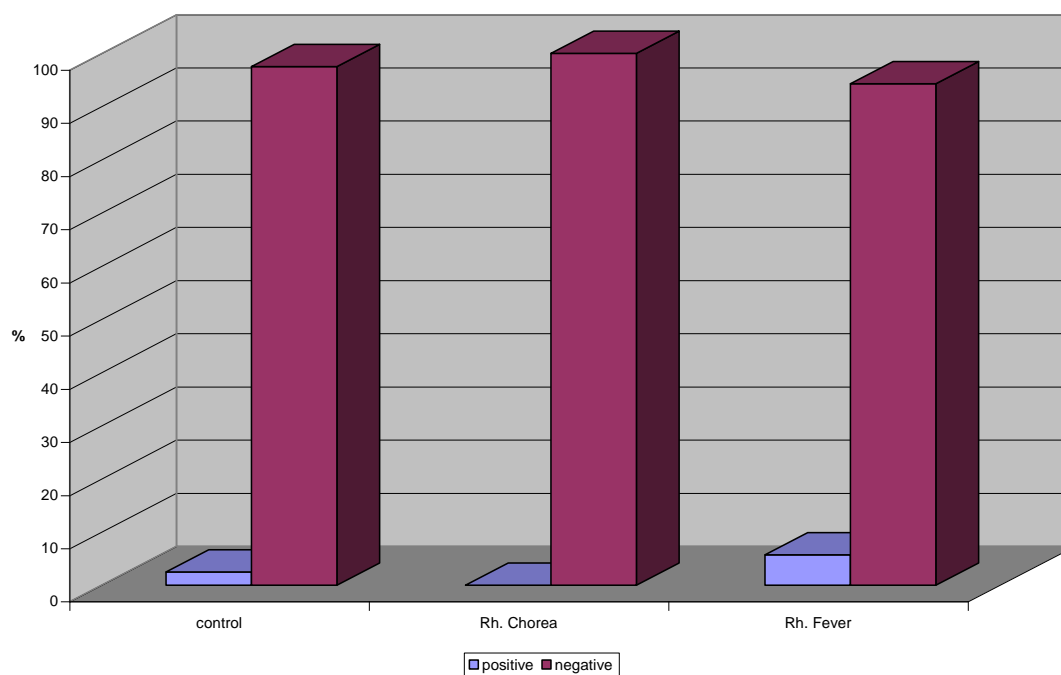
Table(6) and chart(6) show that:

- There was a significant difference between rheumatic fever , rheumatic chorea and control as regard DSMIV combined type P<0.001.

- This table show that the number and percentage of +ve cases for DSM IV combined type was higher in rheumatic fever cases than rheumatic chorea cases and control.

Table (7):

Comparison between the three studied groups according to DSM IV hyperactive impulsive type n=80

DSMIV HI type St.group	+ve		-ve		Total		Test of significance	
	no	%	no	%	no	%	z	p
1. Rh.fever	1	2.9	34	97.1	35	100.0	1.58	<0.001
2.Rh.chorea	0	0	5	100	5	100.0	-	-
3. control	0	0	40	100	40	100.0	-	-
total	1	1.3	79	98.8	80	100.0	-	-

Chart (7) DSMIV hyperactive impulsive types among the study groups
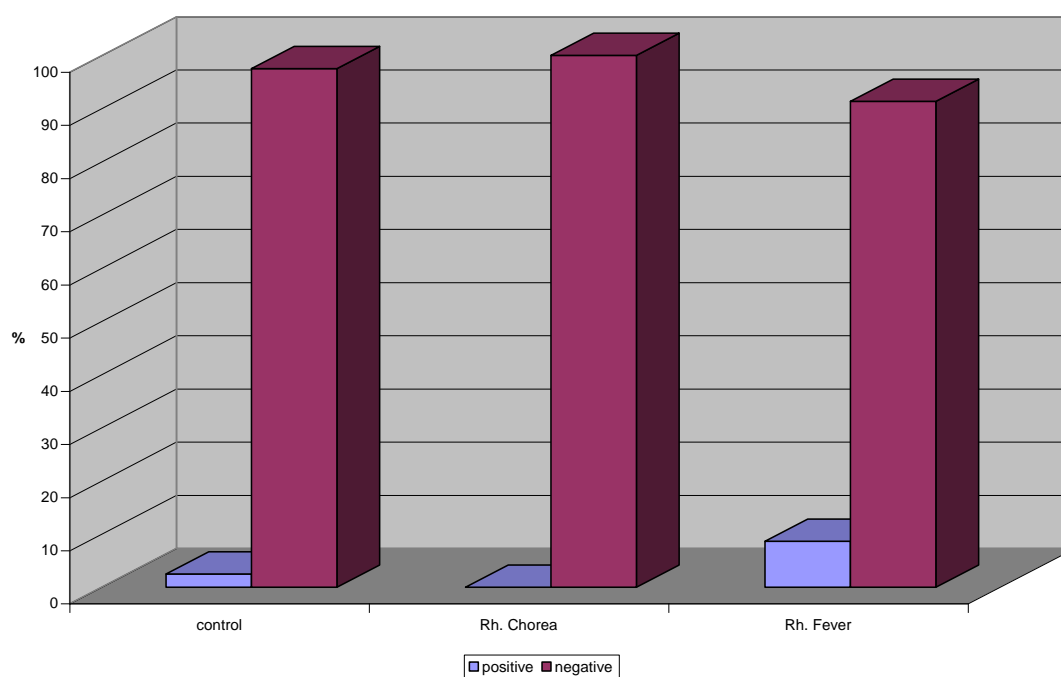
Table(7) and chart(7) show that:

- This table show that the number and percentage of +ve cases for DSM IV hyperactive impulsive type was higher in rheumatic fever cases than rheumatic chorea and control and there was a highly significant difference P<0.001

Table (8):

Comparison between the three studied groups according to DSM IV Inattention type n=80

DSMIV INATTENTION / St.group	+ve		-ve		Total		Test of significance	
	no	%	no	%	no	%	z	p
1. Rh.fever	3	8.6	32	91.4	35	100.0	5.82	<0.001
2.Rh.chorea	1	20.0	4	80.0	5	100.0	1.43	>0.05
3. control	1	2.5	39	97.5	40	100.0	6.01	<0.001
total	5	6.2	75	93.8	80	100.0	-	-

Chart (8) DSMIV inattention type among the study groups
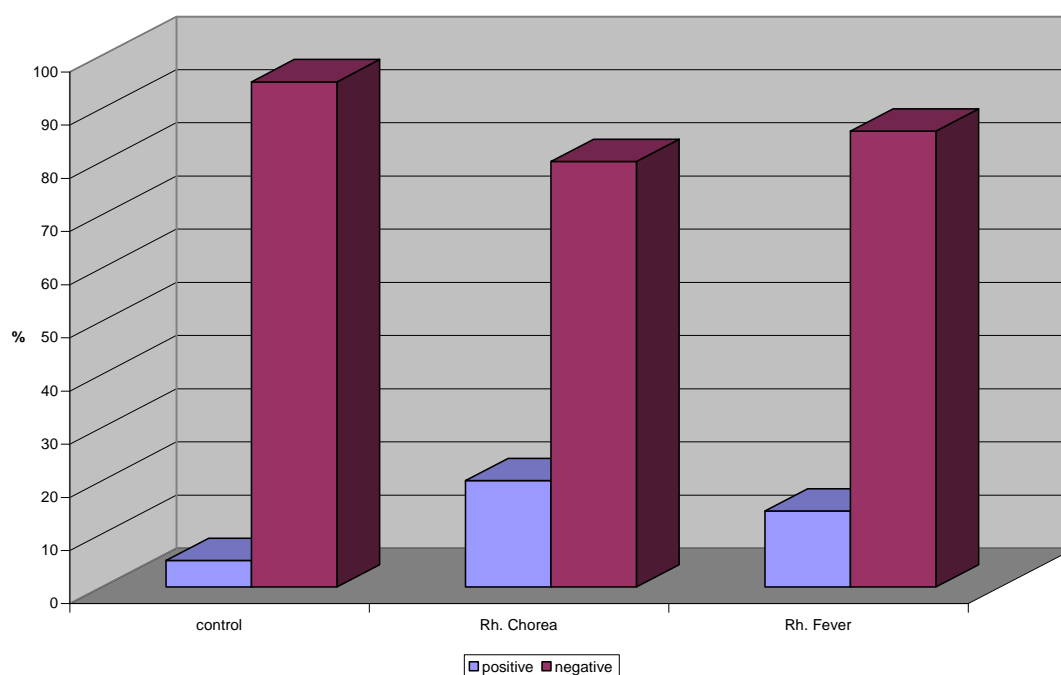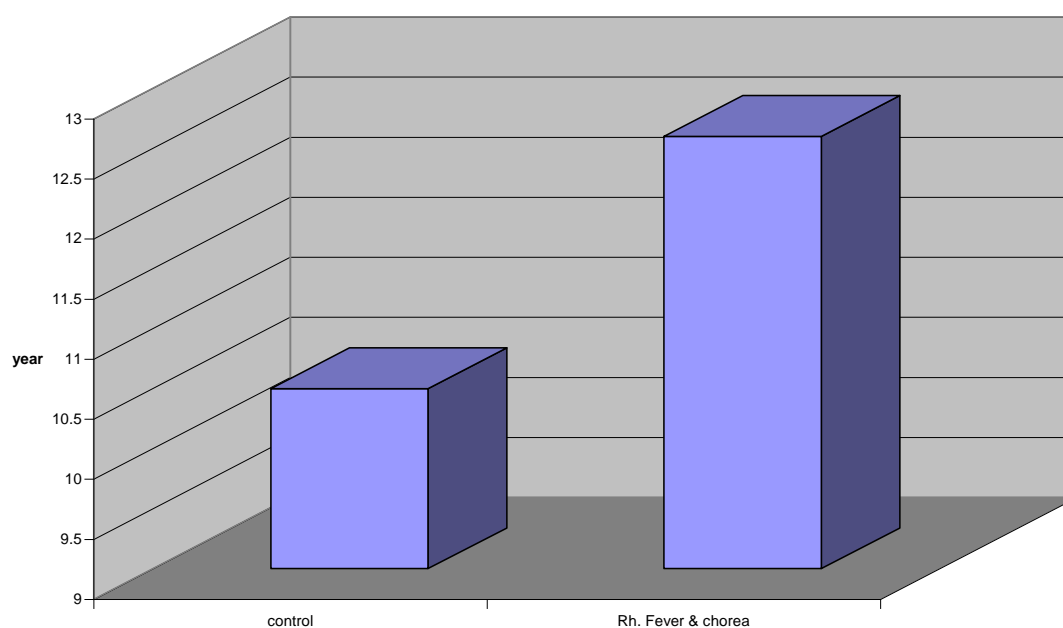
Table(8) and chart(8) show that:

- The percentage of +ve cases for DSM IV inattention type was higher in rheumatic chorea than rheumatic fever and control.

Table (9):

Comparison between cases(Rheumatic fever plus rheumatic chorea) and control according to age n=80

AGE / St.group	X ± SD	t	p
G I +G II cases N=40	12.6±2		
GIII control N=40	10.5±2.5	4.15	<0.001

Chart (9) means of ages among Rh. cases & control
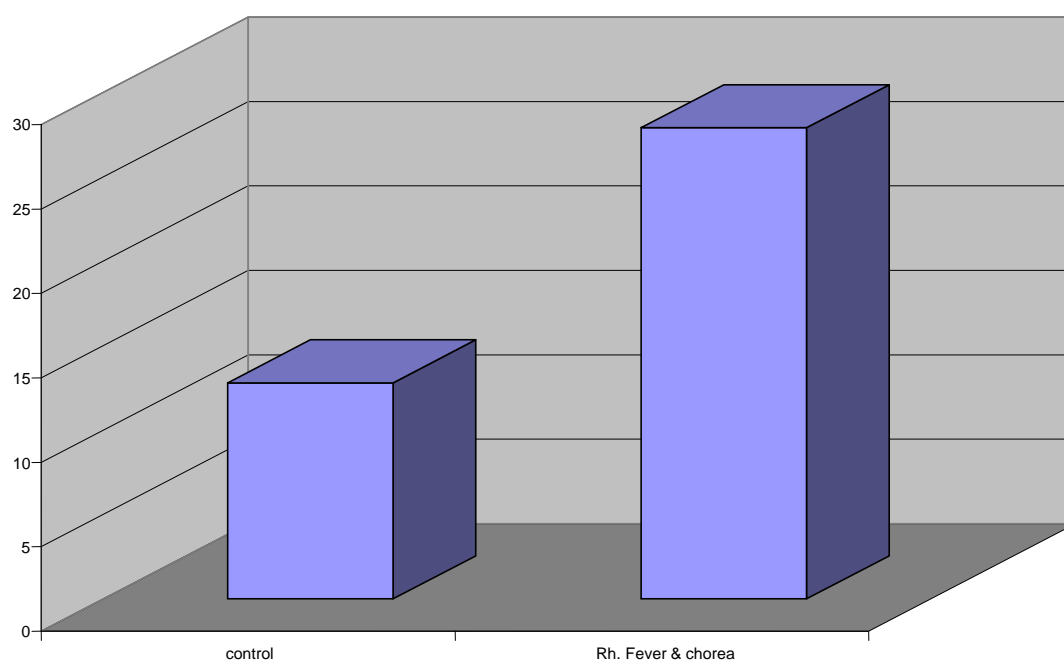
Table(9) and chart(9) show that:

- The mean and standerd deviation of age among cases was higher than that among control and this difference was highly significant P<0.001

Table (10):

Comparison between cases(Rheumatic fever plus rheumatic chorea) and control according to ESR n=80

ESR St.group	X ± SD	t	p
GⅠ+GⅡ cases N=40	27.9±8.5	9.88	<0.001
GⅢ control N=40	12.8±4.6		

Chart (10) means of ESR among Rh. cases and control

Table(10) and chart(10) show that:

- The mean and standerd deviation of ESR among cases was higher than that among control and this difference was statistical significance P <0.001

Table (11):

Comparison between cases and control as regard conner's scores n=80

conner's scores / St.group	X ± SD	t	p
G Ⅰ +G Ⅱ cases N=40	38.5±12.1	4.89	<0.001
GⅢ control N=40	27.5±7.5		

Chart (11) means of conner's scores among Rh. cases and control
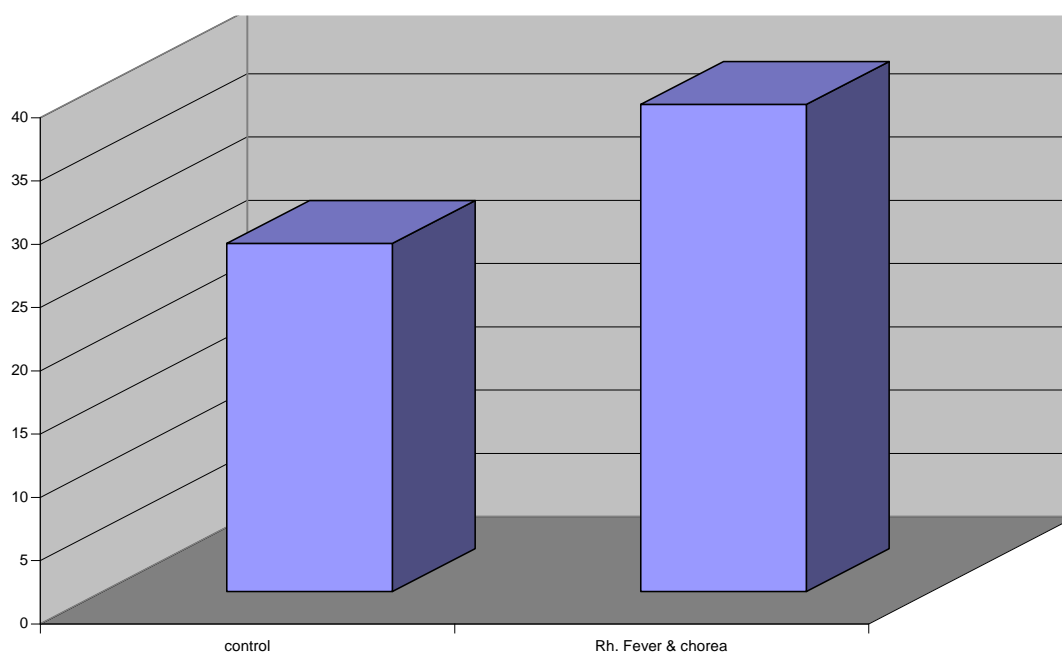
Table(11) and chart(11) show that:

- The mean and standerd deviation of conner's scores among cases was higher than that among control and this difference was statistical significance P <0.001

Table (12):

Comparison between cases and control according to ADHD n=80

ADHD St.group	+ve		-ve		z	p
	No	%	No	%		
G I +G II cases N=40	7	17.5	33	82.5	4.11	<0.001
GIII control N=40	2	5.0	38	95.0	5.69	<0.001
z	1.67		0.59			
p	<0.05		>0.05			

Chart (12) ADHD among Rh. cases and control
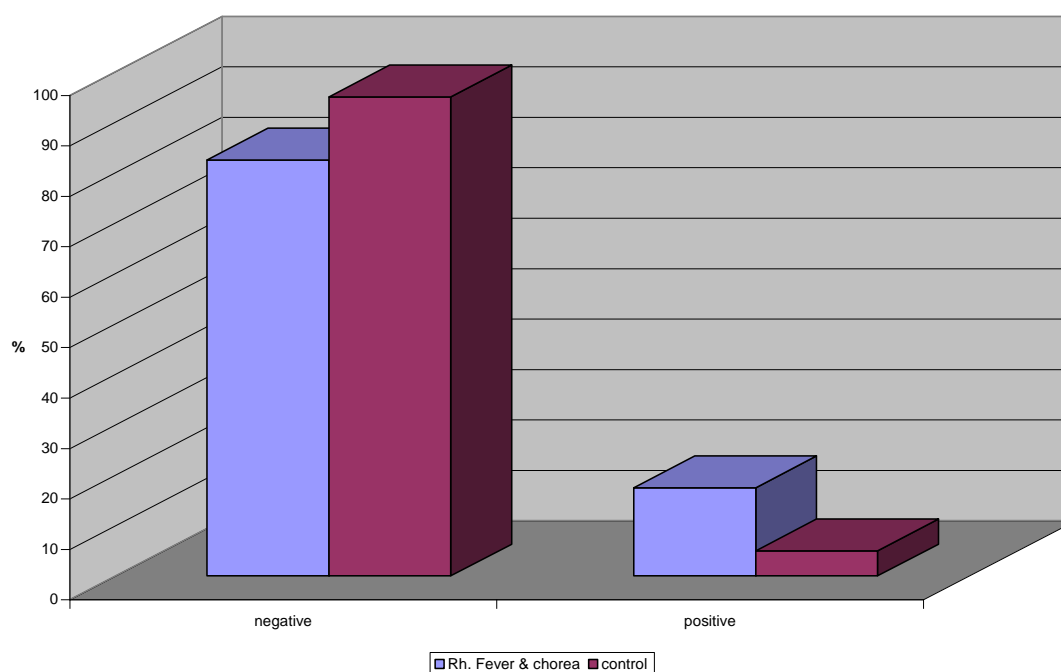
Table(12) and chart(12) show that:

The number and percentage of the ADHD among cases was higher than that among control and this of highly statistical difference

Table (13):

Comparison between cases and control as regard sex distribution n=80

sex / St.group	Males		females		z	p
	No	%	No	%		
G Ⅰ +G Ⅱ cases N=40	18	45.0	22	55.0	0.63	>0.05
GⅢ control N=40	25	62.5	15	37.5	1.58	>0.05
z	1.07		1.15			
p	>0.05		>0.05			

Chart (13) sex distribution among Rh. cases and control
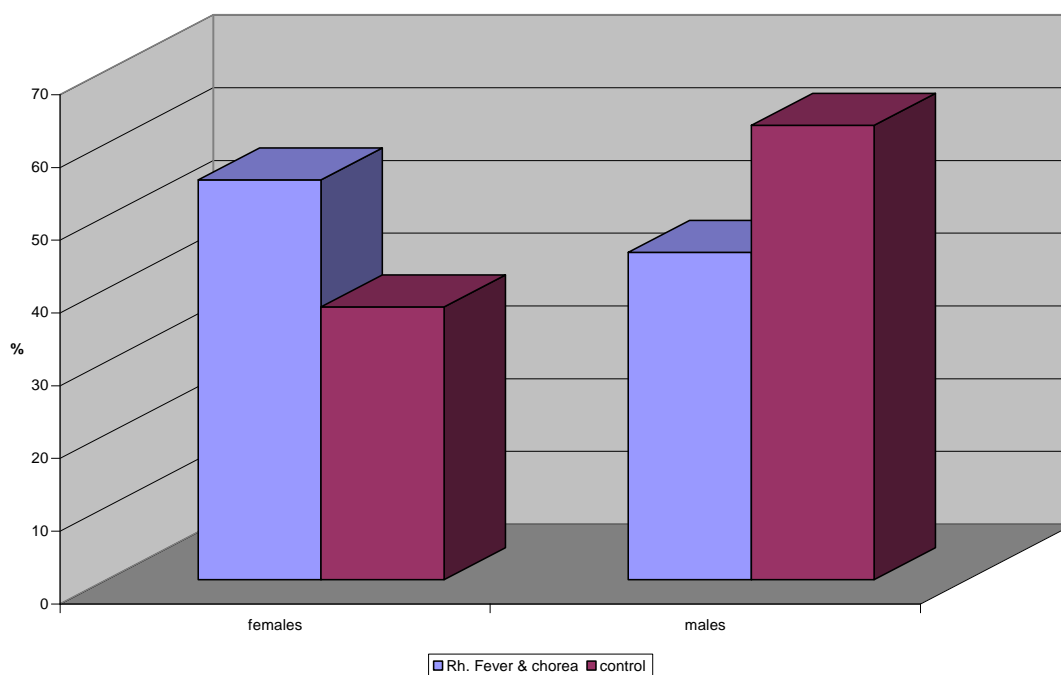
Table(13) and chart(13) show that:

- The number of females among cases(Rheumatic fever and rheumatic chorea) were more than males and the number of males were higher than the number of females among control and there was of no significant differences.

Table (14):

Comparison between cases and control according to DSMIV combined type n=80

DSMⅣ combined / St.group	+ve		-ve		z	p
	No	**%**	**No**	**%**		
GⅠ+GⅡ cases N=40	2	5.0	38	95.0	5.69	<0.001
GⅢ control N=40	1	2.5	39	97.5	6.01	<0.001
z	0.58		0.11			
p	>0.05		>0.05			

Chart (14) DSMIV combined types among Rh. cases and control
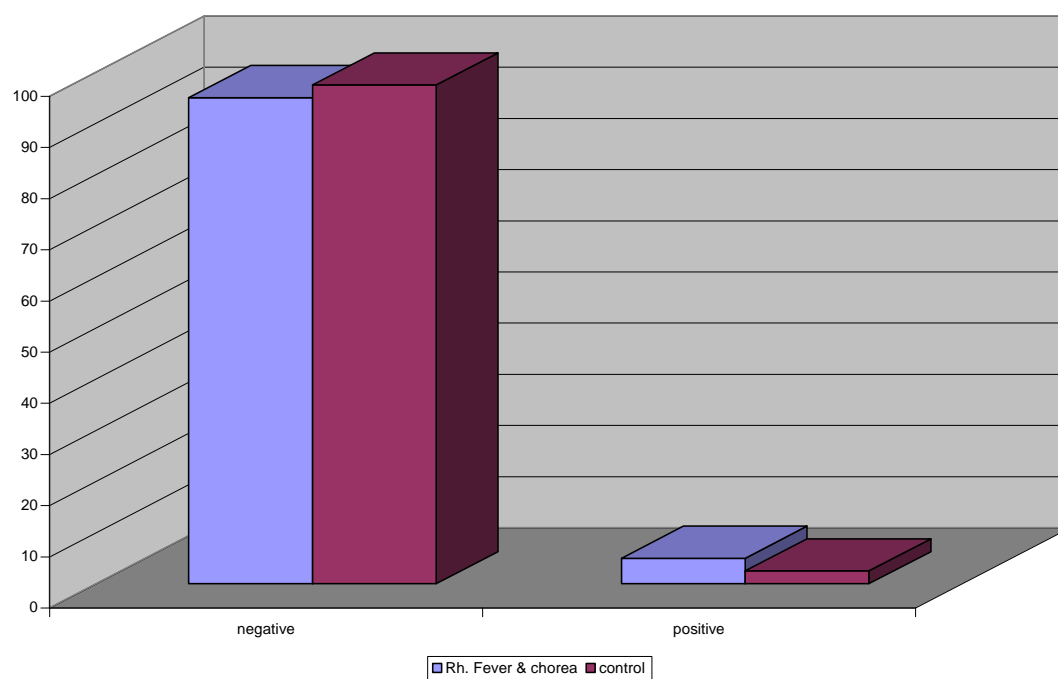
Table(14) and chart(14) show that:

- The number and percentage of +ve DSM IV combined type was higher among cases than control and this of highly significant difference.

Table (15):

Comparison between cases and control according to DSMIV hyperactive impulsive type n=80

DSMIV HI type / St.group	+ve		-ve		z	p
	No	**%**	**No**	**%**		
G I +G II cases N=40	1	2.5	39	97.5	6.01	<0.001
GIII control N=40	0	0	40	100	5.92	<0.001
z	1		0.23			
p	>0.05		>0.05			

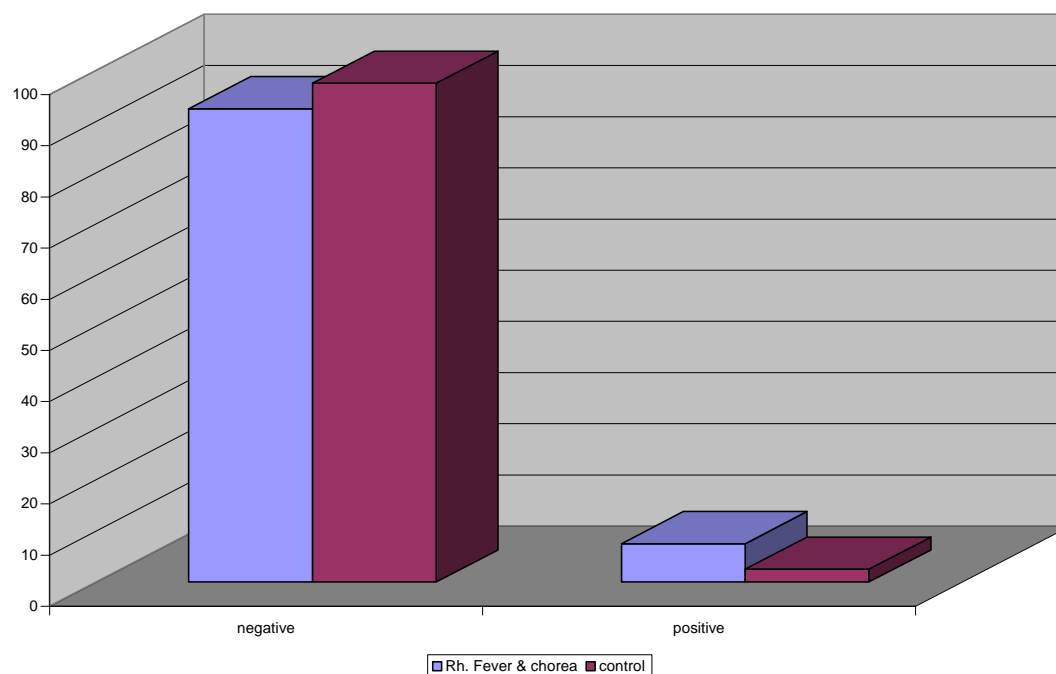Chart (15) DSMIV hyeractive impulsive type among Rh. cases and control

***T**able(15) and chart(15) show that:*

- The number and percentage of +ve DSMIV hyperactive impulsive type was higher among cases than control and of highly significant difference.

Table (16):

Comparison between cases and control as regard DSMIV Inattention type n=80

DSMIV INATTENTION / St.group	+ve		-ve		z	p
	No	%	No	%		
G I +G II cases N=40	4	10	36	90	5.06	<0.001
GIII control N=40	1	2.5	39	97.5	6.01	<0.001
Z	1.34		0.35			
P	>0.05		>0.05			

Chart (16) DSMIV inattention type among Rh. cases and control
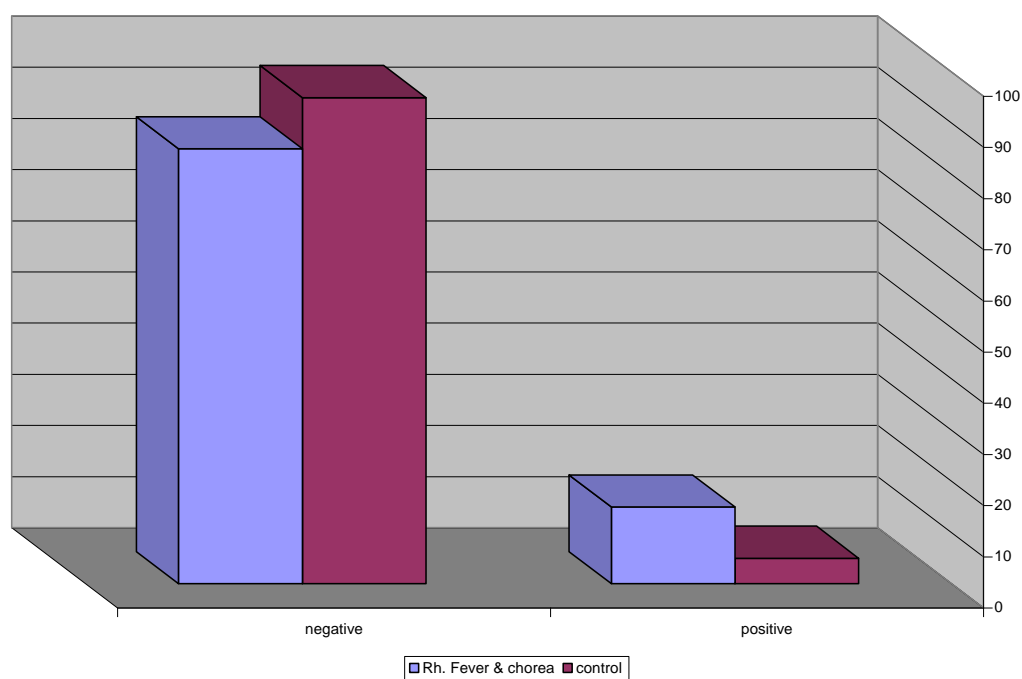

Table(16) and chart(16) show that:

- The number and percentage of +ve DSMIV inattention type was higher among cases than control and this highly significant difference.

Table (17):

Comparison between age, ESR, Conner's score according to ADHD among group I (Rheumatic fever) n=35

ADHD / variable	+ve N=6 X±SD	-ve N=29 X±SD	Test of significance	
			t	p
Age	12.8±2.5	12.3±2	0.45	>0.05
ESR	30.2±9.1	27.1±8.9	1.49	>0.05
Conner's score	58.5±8.2	33.5±7.2	6.51	<0.001

Table(17) show that:

- The mean and standerd deviation for age is higher in cases with ADHD than cases with out ADHD in group I and of no statistical difference and the mean and standard deviation for ESR is higher in cases with ADHD than cases with out ADHD in group I of no statistical difference and the mean and standered deviation for conner's score is higher in cases with ADHD than cases with out ADHD in group I and of highly statistical difference.

Table (18) :

Comparison between age, ESR, conner's score according to ADHD among groupII (Rheumatic chorea) n=5

ADHD \ variable	+ve N=1 X±SD	-ve N=4 X±SD	Test of significance	
			t	p
Age	12±0	14±1.4	2.86	<0.01
ESR	39±0	27.8±1.7	13.18	<0.001
Conner's score	65±0	38.2±4	13.4	<0.001

Table(18) show that:

The mean and standered deviation for age is higher in cases without ADHD than cases with ADHD cases among groupII and of highly significant difference.

The mean and standered deviation for ESR is higher in cases with ADHDcases than cases with out ADHD in groupIIand of highly significant difference.

The mean and standered deviation for conners score is higher in cases with ADHD thancases without ADHD in groupIIand of highly significant difference.

Table (19):

Comparison between age, ESR, conner's score according to ADHD among group III (control) n=40

ADHD ⟍ variable	+ve N=2 X±SD	-ve N=38 X±SD	Test of significance	
			t	p
Age	11.5±2.1	10.5±2.5	0.65	>0.05
ESR	12±9.9	12.8±4.4	0.11	>0.05
Conner's score	48±16.9	26.4±5.3	1.8	>0.05

Table(19) show that:

- The mean and standered deviation for age is higher in cases with ADHD cases than cases without ADHD cases among group III and no significance .The mean and standered deviation for ESR is higher in cases without ADHD than cases with ADHD among group III and this of no significant difference .The mean and standered deviation for conner's score is higher in cases with ADHD than cases without ADHD among group III and no significant differences.

Table (20):

Comparison between the three studied group according to ADHD in relation to sex n=80.

sex	ADHD	+ve		-ve		Total		Test of significance	
		No	%	No	%	No	%	x²	p
G Ⅰ	Males	0	0.0	16	55.2	16	45.7	4.08	<0.05
	Females	6	100.0	13	44.8	19	54.3		
G Ⅱ	Males	0	0.0	2	50.0	2	33.3	0.05	>0.05
	Females	1	100.0	2	50.0	3	66.7		
G Ⅲ	Males	0	0.0	25	65.8	25	62.5	1.26	>0.05
	Females	2	100.0	13	34.2	15	37.5		

In this table In group I

- The number of female with ADHD was more than the number of males with ADHD on the other hand the number of males –ve for ADHD was more than the number of females and no statistical differene .

In group II

- The number of female with ADHD was more than the number of males with ADHD, but the number of males without ADHD equal that for female without ADHD and there is no statistical difference .

In group III

- Also the number of females +ve for ADHD was more than the number of +ve males , on the other hand the number of females –ve for ADHD was less than the number of –ve males and there is not statistical difference .

- **Table (21)**:

Comparison between the three studied groups according to ADHD in relation DSMIV combined type n=80

ADHD DSMIV combined		+ve		-ve		Total		Test of significance	
		No	%	No	%	No	%	z	p
G I N=35	+ve	2	100	0	0.0	2	100.0	5.92	<0.001
	-ve	0	0.0	33	100.0	33	100.0	5.92	<0.001
G II N=5	+ve	0	0.0	0	0.0	0	0	-	-
	-ve	0	0.0	5	100.0	5	100.0	-	-
G III N=40	+ve	1	100	0	0.0	1	100	6.32	<0.001
	-ve	0	0.0	39	100	39	100	6.32	<0.001

In this table

- There was two +ve cases for DSMIV combined type among group I (Rheumatic fever cases) and also there was one +ve case for DSMIV combined type among group III (Control) and no +ve cases for DSMIV combined type in group II(Rheumatic chorea cases). This was of highly significant difference.

Table (22):

Comparison between the three studied groups according to ADHD in relation to DSM IV hyperactive impulsive type n=80:-

HI type	ADHD DSMIV	+ve		-ve		Total		Test of significance	
		No	%	No	%	No	%	z	p
G I N=35	+ve	1	100	0	0	1	100	6.32	<0.001
	-ve	0	0	34	100	34	100	8.25	<0.001
GII N=5	+ve	0	0	0	0	0	0	-	-
	-ve	0	0	5	100	5	100	3.16	<0.001
G III N=40	+ve	0	0	0	0	0	0	-	-
	-ve	0	0	40	100	40	100	8.94	<0.001

In this table

- There was only one +ve case for DSMIV hyperactive impulsive type in group I and no +ve case in both group II and group III this was of highly significant difference.

Table (23):

Comparison between the three studied groups according to ADHD in relation to DSMIV inattention type

	ADHD DSMⅣ INATTENTION	+ve		-ve		Total		Test of significance	
		No	%	No	%	No	%	z	p
G Ⅰ N=35	+ve	3	100.0	0	0.0	3	-	2.45	<0.01
	-ve	0	0.0	32	100.0	32	-	8.01	<0.001
G Ⅱ N=5	+ve	1	100.0	0	0.0	1	-	6.4	<0.001
	-ve	0	0.0	4	100.0	4	-	3.16	<0. 01
G Ⅲ N=40	+ve	1	100.0	0	0.0	1	-	6.32	<0.001
	-ve	0	0.0	39	100.0	39	-	8.83	<0.001

In this table

- There was three +ve cases for DSM IV inattention type in group I, and there was one +ve case for DSM IV Inattention type in group II.
- And also there was one +ve case in group III this was of highly significance.