

RESULTS

The results of the present work can be described as follows:

The age distribution in the study group was between 40-70 years with a mean of 54.7 ± 9.9 years. The study and control group were well matched for age. Further details are supplied in table (1).

Table (1) : The age distribution among total population.

Age / year	Study group No.=30		Control group No.=10	
	No.	%	No.	%
40 - 49 years	8	26.7	2	20
50 - 59 years	10	33.3	3	30
60 - 69 years	9	30	4	40
70 - years	3	10	1	10

	Mean	S.D	t	p-value
Study group	54.7	9.9	-1.0	>0.05
Control group	58.1	9.5		

P >0.05 (Non-significant)

The sex distribution in the study group was 14 male patients (46%) and 16 female patients (54%). Nearly there is no difference in distribution of male and female for each group. Other details are available in table (2).

Table (2) : The sex distribution of total population.

	Male		Female		X^2	p-value
	No.	%	No.	%		
Study group No. = 30	14	46%	16	54%	0.03	>0.05
Control group No. = 10	5	50%	5	50%		

P > 0.05 (Non-significant)

Table (3) : The difference between study group and control group in risk factors of ischemic cerebrovascular stroke.

	Study group (n=30)		Control group (n=10)		X^2	p-value
	No.	%	No.	%		
Smoking	10	33.3	3	30	0.04	>0.05
Hypertension	18	60	-	-	10.9	<0.01
Diabetes Mellitus	11	36.7	-	-	5.1	<0.05
Previous history of TIAs	15	50	-	-	8.0	<0.05
Family history	6	20	-	-	2.4	>0.05

P <0.05 (significant)

The difference between the study group and their age matched control group for risk factors, showed that the most prevalent risk factors predisposing to ischemic cerebrovascular stroke is hypertension (60%) followed by previous history of TIAs (50%), then D.M. (36.7%) and smoking (33.3%). Other details are available in table (3).

Table (4) : The difference between the female patients and control group for the use of oral contraceptive pills as a risk factor for ischemic cerebrovascular stroke.

	Study group (n=16)		Control group (n=5)		χ^2	p-value
	No.	%	No.	%		
Pills user	13	81.6	1	20	6.4	<0.01
Other methods	2	12.5	2	40	1.9	>0.05
None	1	6.2	2	40	3.5	>0.05

P <0.05 (significant)

In the study group, the pills user were (81.6%), while in the control group were (20%) with a significant difference. Other details are available in table (4).

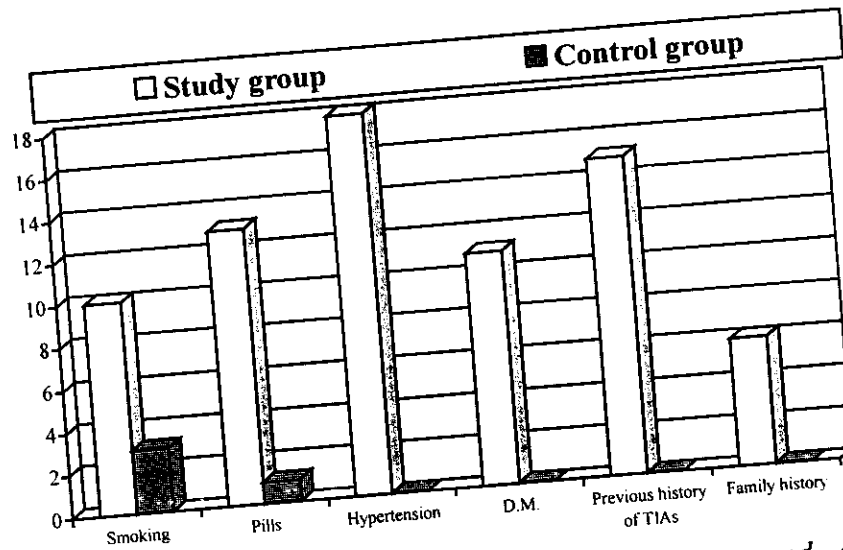


Figure (6) : *Difference between the study group and control group in risk factors.*

Table (5) : *H. pylori* seropositivity in study and control groups.

	Study group No.=30		Control group No.=10		χ^2	p-value
	No.	%	No.	%		
Seropositive to <i>H. pylori</i>	21	70	4	40	3.3	<0.05

$P < 0.05$ (significant)

The *H. pylori* seropositivity is more common in the study group than control (70% Vs. 40%) with a statistically significant difference ($p < 0.05$).

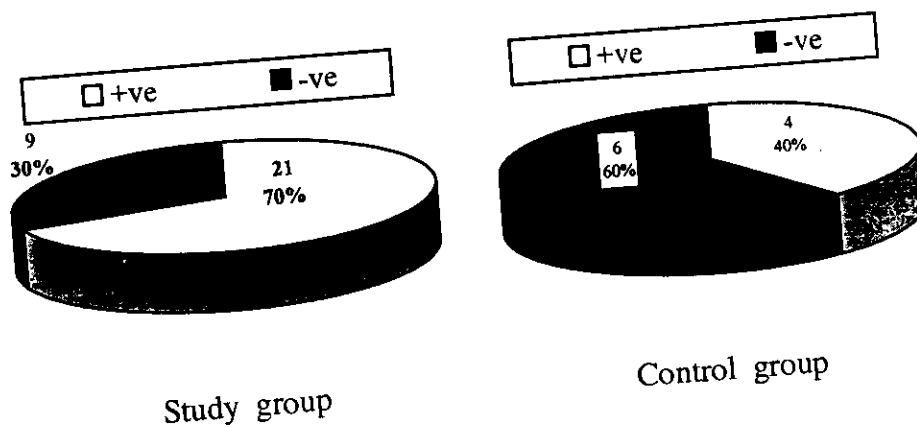


Figure (7) : *HP* +ve in total population.

Table (6) : Complete blood picture in total population.

	Study group No.=30		Control group No.=10		t	p-value
	Mean	S.D.	Mean	S.D.		
Hb g/dl	12.3	1.5	13.0	1.6	-1.1	>0.05
RBCs x 10^6 /cmm	4.5	1.1	4.4	0.4	0.4	>0.05
WBCs x 10^3 /cmm	10.4	2.6	5.8	1.2	7.6	<0.01
Platelet x 10^3 /cmm	299.2	91.6	296.1	80.9	0.1	>0.05

Hb concentration showed a non-significant lower level in stroke group (12.3 ± 1.5 g/dl) as compared to control group (13.0 ± 1.6 g/dl), $p > 0.05$.

RBCs count expressed a non-significant higher count in stroke group ($4.5 \pm 1.1 \times 10^6$ /cmm) as compared to control group ($4.4 \pm 0.4 \times 10^6$ /cmm), $p > 0.05$.

WBCs count showed a highly significant difference between stroke group ($10.4 \pm 2.6/10^3$ /cmm) and control group ($5.8 \pm 1.2 \times 10^3$ /cmm), $p < 0.01$.

Platelet count expressed a non-significant higher count in stroke group ($299.2 \pm 91.6 \times 10^3$ /cmm) as compared to control group ($296.1 \pm 80.9 \times 10^3$ /cmm), $p > 0.05$.

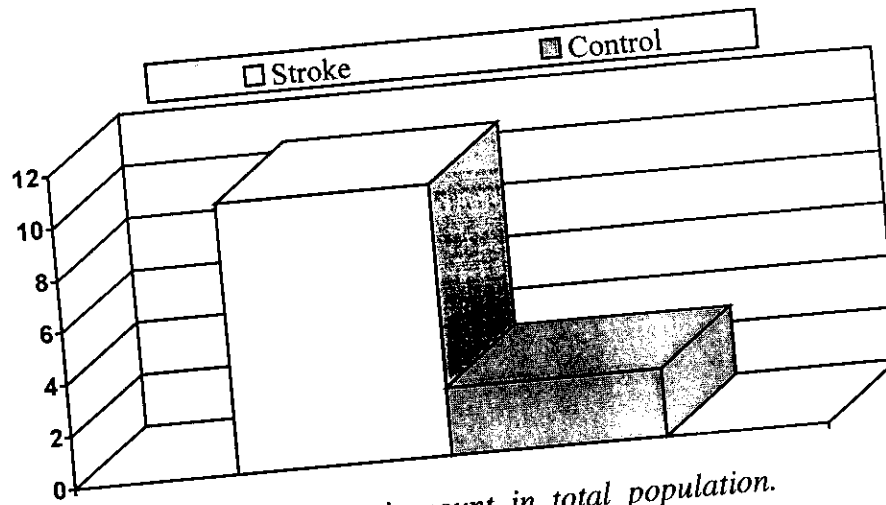


Figure (8) : Total leucocytic count in total population.

Table (7) : Complete blood picture in stroke group.

	Seropositive No.=21		Seronegative No.=9		t	p-value
	Mean	S.D.	Mean	S.D.		
Hb g/dl	12.1	1.5	12.8	1.4	-2.0	>0.05
RBCs x 10^6 /cmm	4.6	1.3	4.4	0.4	0.6	>0.05
WBCs x 10^3 /cmm	10.8	2.5	9.3	2.5	1.5	>0.05
Platelet x 10^3 /cmm	310.9	93.2	272.0	68.6	1.3	>0.05

Haemoglobin concentration showed a lower concentration of HP+ve group (12.1 ± 1.5 g/dl) than in HP-ve group (12.8 ± 1.4 g/dl). The difference is non-significant.

RBCs count showed a non-significant higher count in HP+ve group ($4.6 \pm 1.3 \times 10^6$ /cmm) than HP-ve ($4.4 \pm 0.4 \times 10^6$ /cmm).

WBCs count expressed a non-significant high count in HP+ve ($10.8 \pm 2.5 \times 10^3$ /cmm) as compared to HP-ve ($9.3 \pm 2.5 \times 10^3$ /cmm).

Platelet count showed a non-significant high count in HP+ve group ($310.9 \pm 93.2 \times 10^3$ /cmm) as compared to HP-ve group ($272.0 \pm 68.6 \times 10^3$ /cmm).

Table (8) : *The difference between study and control group in prothrombin activity and APTT.*

	Study group No.=30		Control group No.=10		t	p-value
	Mean	S.D.	Mean	S.D.		
Prothrombin activity (%)	84.1	10.6	82.3	13.3	0.4	>0.05
APTT (seconds)	34.5	2.1	32.0	1.7	3.4	<0.05

P<0.05 (significant)

The mean of prothrombin activity is much higher in study group than in control group but this difference is statistically non-significant while that of APTT is significant.

Table (9) : *The difference between H. pylori seropositive and seronegative subjects of the study group in prothrombin activity and APTT.*

	Seropositive No.=21		Seronegative No.=9		t	p-value
	Mean	S.D.	Mean	S.D.		
Prothrombin activity (%)	83.4	10.9	85.7	10.4	0.05	>0.05
APTT (seconds)	34.7	1.5	34.1	3.22	0.5	>0.05

$P > 0.05$ (non-significant)

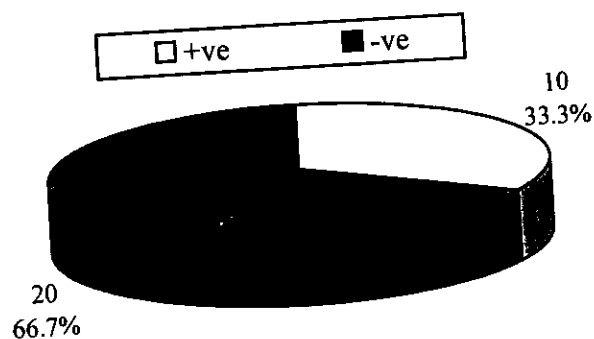
The mean of prothrombin activity and APTT is higher in H. pylori seropositive subjects than in H. pylori seronegative with a non-significant difference between them.

Table (10) : *The difference between study and control group in APC resistance.*

	Study group No.=30		Control group No.=10		X^2	p-value
	No	%	No	%		
APC resistance	10	33.3	0	0	4.4	<0.05

$P < 0.05$ (significant)

The percentage of APC resistance in study group is 33.3%.
There is a significant difference between study and control group according to this parameter.



stroke group

Figure (9): *APC resistance*

Table (11) : The difference between *H. pylori* seropositive and seronegative subjects of the study group in APC resistance.

	Seropositive No.=21		Seronegative No.=9		X^2	p-value
	No	%	No	%		
APC resistance	10	47.6	0	0	6.4	<0.05

P<0.05 (significant)

Twenty one patients of the study group were seropositive to *H. pylori*. The prevalence of APC resistance in the seropositive subjects of study group is (47.6%) and the difference between seropositive and seronegative subjects is statistically significant ($p<0.05$).

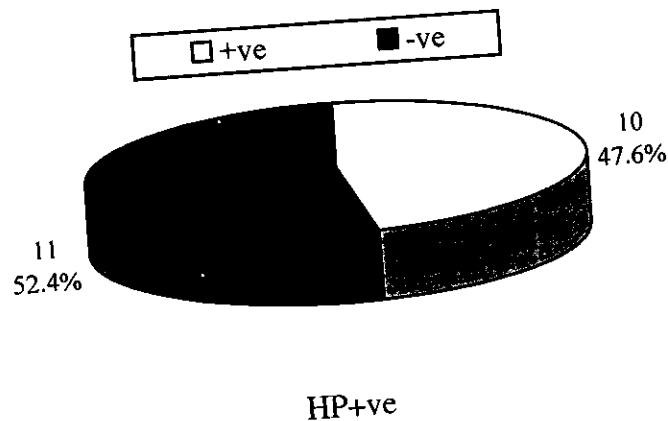


Figure (10): APC resistance in stroke group

Table (12) : *The difference between study and control group in fibrinogen concentration.*

	Study group No.=30		Control group No.=10		t	p-value
	Mean	S.D.	Mean	S.D.		
Fibrinogen (mg%)	409.6	102.3	303.6	47.4	4.4	<0.01

$P < 0.05$ (significant)

The mean of fibrinogen concentration of the study group is higher than that of the control group, this difference is statistically significant.

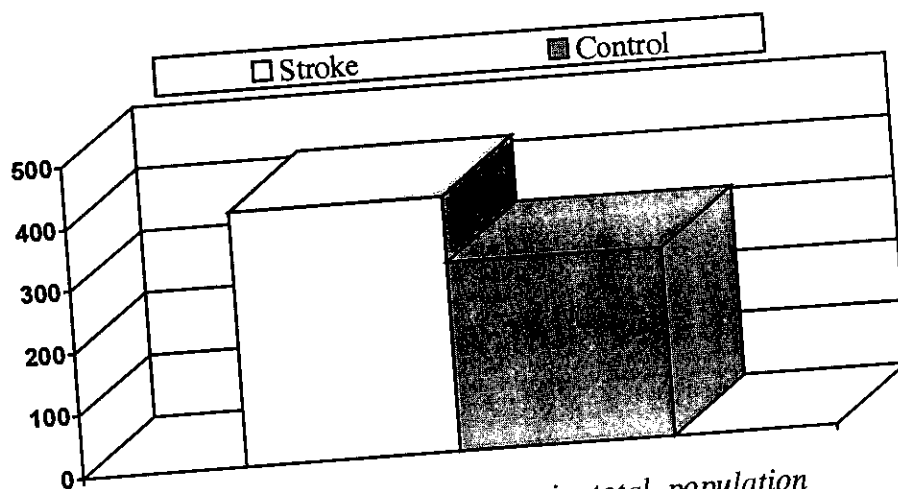


Figure (11): *Fibrinogen concentration in total population*

Table (13) : The difference between *H. pylori* seropositive and seronegative subjects of the study group in fibrinogen concentration.

	Seropositive No.=21		Seronegative No.=9		<i>t</i>	p-value
	Mean	S.D.	Mean	S.D.		
Fibrinogen (mg%)	450.3	89.6	314.0	57.9	5	<0.05

$P < 0.05$ (significant)

In the study group, the mean of fibrinogen concentration in seropositive subjects is $(450.3 \pm 89.6 \text{ mg\%})$ while that of seronegative subjects in the same group is $(314.0 \pm 57.9 \text{ mg\%})$, the difference between them is statistically significant.

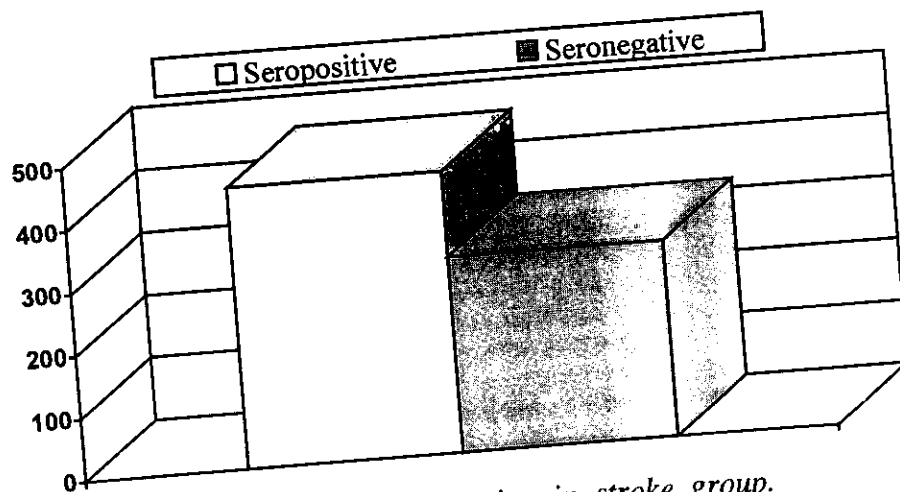


Figure (12): Fibrinogen concentration in stroke group.