



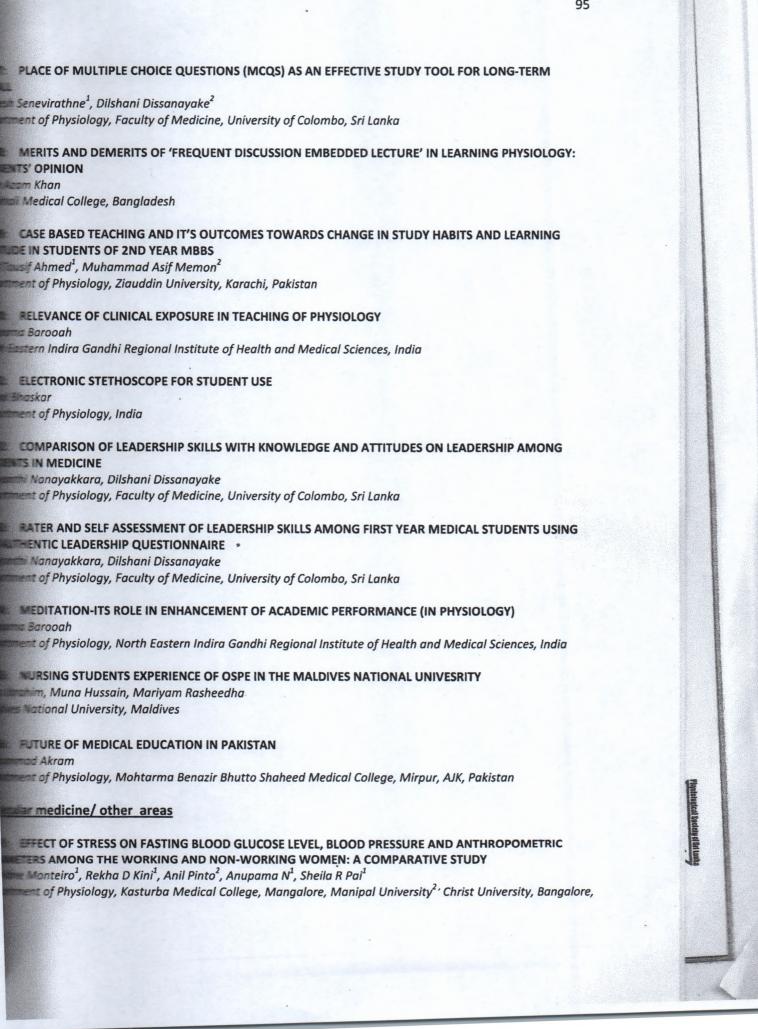
3rd Biennial Conference of the South Asian Association of Physiologists (SAAP-3)

in conjunction with the

25th Anniversary of the Physiological Society of Sri Lanka (PSSL)

Abstract Book

07th - 10th November 2012 Sri Lanka



OF LIPID PROFILE & HAEMODYNAMIC VARIATIONS DURING STRESS IN MEDICAL STUDENTS Chan, Ghulam Mujadid, Sikander ADIL

Pakistan

cund and objectives: Increased cholesterol in blood plays the role in atherosclerosis formation. It is that stress increases cholesterol level. Most of previous studies were conducted on biological risk factors include lipids under stress in middle aged persons who remained under investigation for heart problems. The sconducted to evaluate the changes in blood lipids and blood cortisol along with sympatho-adnergic set determined by selected haemodynamic parameters during psychological stress.

dec Medical students (n= 200) were randomly selected. They were examined two times, for stress task of dece (degree examination) and during non-stress period. Final selection of participants was depending on assessment and their well being.

Cortisol, systolic and diastolic blood pressure (SBP and DBP) and heart rate (HR) were significantly during stress period with p<0.001 for each parameter. But different blood lipids levels (TC, LDL-C, HDL-C were detected with different significant levels. The correlations of changed lipids with raised findings of commics and cortisol were also evaluated.

ECCONS: Further studies in our population are needed to evaluate the relation of changes in various biological **ECCONS** including IL-9 and sympatho-adernergic activates with stress factors related to our social or **ECCONS** including IL-9 and sympatho-adernergic activates with stress factors related to our social or **ECCONS** including IL-9 and sympatho-adernergic activates with stress factors related to our social or **ECCONS** including IL-9 and sympatho-adernergic activates with stress factors.

LATIONSHIP OF TNF-A WITH MOTOR DYSFUNCTION IN HYPERTENSIVE PATIENTS Derwin, Darwin Amir

of Medicine, Andalas University, Indonesia

and objectives: The brain is one of the organs frequently affected in hypertension. High blood e stimulates endothelial inflammation and plays a role in atherosclerosis formation that leads to executar disorders. Brain hypoxia and ischaemia in hypertension decrease autonomic regulation of blood are cause motor function disorder. This study was designed to determine the relationship between TNF- α ever dysfunction in hypertension.

The subjects were hypertensive outpatients (198) with movement disorder symptoms. Examination of section was performed using the Purdue pegboard test and TNF- α was examined by ELISA.

First group consisted of 132 subjects (66,66%) with hypertension and the second group was 66 (34%) metension. Motor dysfunction was found in 88 patients (66,70%) of the first group and 11 (16.7) of the group. There was statistically significant difference (p<0.005) between motor dysfunction in the first and group, and correlated with hypertension. Low concentration TNF- α was found in 122 (61.60%) and high subjects. Motor dysfunction was found in 61 (50%) subjects from the low concentration TNF- α , and subjects from the high concentration TNF- α . There was no statistically significant relationship found econcentration of TNF- α with motor dysfunction (p>0.005).

cers: No relationship was found between levels of TNF- α with motor dysfunction in hypertension. Motor was significantly correlated with hypertension.



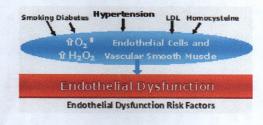
The Relationship of TNF- α With Motor Function Disorder in Hypertensive Patients

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Aims and Objectives



Hypertensionand cardiovascular disease occurrence tend to increasedue to the epidemiological transitioninIndonesia. The brain is one of the organs frequently affected in hypertension. High blood pressure stimulates endothelial inflammatory process and play a role in the formation of atherosclerosis which leads to cerebral vascular disorders. Brain hypoxia and ischemia in hypertension reduce the autonomy and regulation of blood flow, and result in motor function disorder. To determine motor dysfunction in hypertensive patients due to endothelial dysfunction, we studied the relationship between tumor necrosis factor (TNF) α and motor function disorder in hypertension

Methods

The subjects were outpatients at health centres in the city of Padang that fulfilled the inclusion criteria. They were divided into groups with and without motor dysfunction. Motor dysfunction was examined using Purdue Pegboard Test, and TNF- α level was assessed using the blood serum by ELISA methods.

This study designhas been approved by the ResearchEthics Committeeof the Faculty of Medicine, Andalas University



PurduePegboard Test

Results

 Table 1: Relationship of blood pressure with motor dysfunction of outpatient at health centres in Padang City

Blood Pressure	Motor Function		Total
	Dysfunction (n=99)	Normal (n=99)	-
High	88 (66,70%0	44 (33,30%)	132 (100%)
Normal	11 (16,70%)	55 (83,30%)	66 (100%)

Table 2 : Relationship of TNF- α withmotor dysfunction of outpatientat health centres in Padang City

TNF-α (pg/ml)	Motor Function		Total
	Dysfunction (n=99)	Normal (n=99)	1
High	61 (50%)	51 (50%)	122 (100%)
Low	38 (50%)	38 (50%)	76 (100%)

Motordysfunctionwas more prevalentin the hypertensive group compared with the normotensive (p<0.05) (Table 1) withOddsRatio of 10.00, which meant thatthechance of suffering motor dysfunction was ten timesmore likelyin peoplewith hypertension compared tonormotensive. Table 2shows that TNF- α level in the group with impaired motor function was not significantly different from the group without motor dysfunction (p>0.05)

Conclusions

This studyshows that there were significant relationship betweenhypertension and impaired motor function. However, no significant relationship was found betweenTNFalphawith impaired motor function







CERTIFICATE OF PARTICIPATION



This is to certify that Prof./ Dr./ Mr./Ms. Eryati Darwin

attended the

3rd Biennial Conference of South Asian Association of Physiologists & the 25th Anniversary Celebrations of the Physiological Society of Sri Lanka

> 7th-9th November 2012 Colombo, Sri Lanka

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