

Iraqi Medical Journal

# IMJ



A periodic peer reviewed scientific journal  
published by the **Iraqi Medical Association**  
First published in 1953

ISSN 0304-4564

Volume 63, Number 2, July 2017

**Editorial Director**

*Prof. Abdul Ameer Mohsin Hussein* FICMS

**Editor-in-chief**

*Prof. Haider Abdul Hussein Ahmed* FICMS CABS

**Executive Editorial Board**

*Usama S Al-Nasiri*, DS, FRCS

*Farqad B Hamdan*, MSc PhD

*Bassam H Al-Jarrah*, DL, FICMS

*Sabah M Fadhil*, MD FICMS

*Mohammed H Al-Musawi* FICMS

*Najib S Jabbo*, FRCS

*Jamal R Al-Rawi*, MSc, FICMS (D&V)

*Yasir M H Hamandi*, FIBMS

*Ali Al Sultany*, DM CABM. FRCP

*Ahmed S Alnuaimi* PhD

**Secretary;**

*Lina Rafia Mohamed Ali Al-Mukhtar*

*Iraqi Medical Journal (IMJ)*

*Mobile No.:00964(0)7903201903*

*Fax +96415372193*

*PO Box 6297*

*Al-Mansour, Al-Ma'ari Street*

*Baghdad-Iraq*

*Website: www.ima-iq.com*

*E-mail: imj\_ima@yahoo.com*

## Scientific Advisory Board

- Abdul-Baki R Al-Khateeb, PhD*  
*Abdulghani Alrawi, MRCP*  
*Abdul-Monaf Al-Jadiry, FRCPsych*  
*Abdul-Mutalib Abdul-Kareem, FRCP*  
*Abdul-Muneim Al-Dabbagh FICMS*  
*Adnan Al-Araji, FRCP*  
*Ali Abdul-Hasan, FRCS*  
*Ali Muhammed Jawad, CABM, FRCP*  
*Amjed Niyazi, PhD*  
*Amira Shubbar, FRCP*  
*Anam R Al-Salihi, PhD*  
*Asim M Al-Chalabi, FRCP*  
*Ayad Ali Al-Ber, FRCS*  
*Ayad Al-Ramadhani, FRCS*  
*Hameed R Al-Ani, PhD*  
*Haytham T Makki, FRCS*  
*Hikmat Jamil, PhD*  
*Husam Hassoon Ali FICMS*  
*Issam S Al-Janabi, FRCS*  
*Khalid Abdulla, FRCP*  
*Khalifa E Sharqaie, PhD*  
*Mahjoob N Al-Nadawi, MRCPed, FRCP.*  
*Majid Sulaiman, FRCS*  
*Misaied Al-Bedri, FRCS*  
*Mohammed Rashid Al-Eboodi, FICMS*  
*Mudafar Z Al-Kasim, MRCPsych.*  
*Muhammed H Al-Eshaiker, FRCR*  
*Mukram M Al-Waid, PhD*  
*Muzahim K Al-Khiat, FRCS*  
*Nabil Salman Murad, MRCP, FRCP*  
*Nada Al-Alwan, PhD*  
*Nada S Ameen FRCS (OBGYN)*  
*Najim Aldin Al-Ruznamaji MRCP*  
*Najla I Ayoub, MRCP*
- Nazar B Al-Hasani, FRCS, FACS.*  
*Neda Al-Ward, MFPHM.*  
*Omar N Al-Yaqubi, FRCOph., FRCS*  
*Omran S Habeb, PhD*  
*Qahtan J Shebeeb, FRCS*  
*Qasim M Sultan, MRCP, FRCP*  
*Rafi M Al-Rawi, FRCP*  
*Raji A Al-Hadithi, ABPath.*  
*Riyad M Salih, FRCOG*  
*Saad H Al-Witry, FRCS*  
*Sabah Sadiq, FRCPsych*  
*Sabah M Yacoub, FRCP*  
*Safa' Al-Obeidi, FRCS*  
*Saieb S Algailani, CABS*  
*Sameer H Abood, FRCS*  
*Sami Matloob, FRCS*  
*Saramad A Al-Fahad, FRCP*  
*Sarmad Khunda, FRCS(OBGYN), FRCOG*  
*Seddiq H Alkhashab FRCS*  
*Suad Al-Wendawi, MRCP, FRCP*  
*Taher K Al-Dabbagh, FRCP*  
*Talib Khair Allah, MRCP, FACC*  
*Tarik H Al-Ani, DDV*  
*Thamer A Hamdan, FRCS*  
*Uddi Abdul-Munim, FRCS.*  
*Usama N Rifa'at, FRCS*  
*Wail Al-Shihabi, DMR, MSc*  
*Waleed Jassim Al-Sa'adi, FFARCS*  
*Walid Al-Hadithi, MSc Path*  
*Zeidan Al-Hergani, MRCP,FRCP*  
*Zekeria Yahya Araji, FRCS*  
*Ziad Sh Al-Rawi, DMR*  
*Ziad A J Zaidan, FRCPsych*  
*Zuhair R Al-Bahrani, FRCS*

Publication of the *Iraqi Medical Journal* does not imply agreement with the statements or opinions expressed therein.

The advertisements, which are published in the journal, are not endorsed by the *Iraqi Medical Journal*.

© 2017

---

## Instructions to Authors

The Iraqi Medical Journal is a periodic peer-reviewed journal published biannually by the Iraqi Medical Association. The journal welcomes original articles, case reports and letters to editor in all fields relevant to medicine. Review articles are usually by invitation only. However, review articles of high standards will be considered. Arabic or English languages could be used.

Papers are accepted on the understanding that the subject matter has not and will not be submitted simultaneously to another journal. The following notes are expected to be considered carefully in writing manuscripts.

- 1- Manuscripts preparation: the format of the Iraqi Medical Journal complies with the "Uniform Requirement for Manuscripts Submitted to Biomedical Journals" published by the International Committee of Medical Journal Editors (ICMJE) in Vancouver, British Columbia, in 1979 and its last update in February 2006, available on the website [www.icmje.org](http://www.icmje.org).
- 2- Four clear and complete copies (including figures and tables) should be submitted. Manuscripts and figures will not be returned to the authors irrespective of the editorial decision to accept, revise or reject them.
- 3- Manuscripts must be accompanied by a covering letter signed by all authors that the paper has not been published and will not be submitted to another journal if accepted in the Iraqi Medical Journal.
- 4- The title page should include:
  - Title of the paper in Arabic and English.
  - Correct first name, middle name and family name of all authors in Arabic and English as well as a maximum of two highest academic degrees for each author.
  - Name (s) and address (es) of the institution (s) where the work was carried out.
  - The name and address of the author responsible for correspondence together with telephone number, fax number and e-mail address (if any).
- 5- Abstracts for original articles should contain a structured abstract of not more than 250 words in Arabic and English. Abstract headings include: Background (تمهيد) , Objectives (الأهداف) , Methods (الطرائق) , Results (النتائج) and Conclusions (الاستنتاجات) . Abstracts in Arabic and English of review articles and case reports should be unstructured and of not more than 150 words.
- 6- Three to ten keywords should be provided on the same page as the abstract in English and Arabic. As far as possible, the keywords should be selected from the National Library of Medicine, Medical Subject Headings.
- 7- The main text of the original article should be divided into sections, each section should be started on a new page after the title page:
  - A. Introduction: should state clearly the purpose and rationale of the study.
  - B. Methods: should include selection of subjects, identifications of the methods, apparatus and chemicals used and include statistical analysis.
  - C. Results: presented in a logical sequence preferably with tables and illustrations emphasizing in the text only the important observations.
  - D. Discussion: emphasizes new findings of the study, implications and reference to other relevant studies.

- E. Acknowledgements: only to persons who have made substantive contribution to the study.
- F. References: should be in the Vancouver style. They should appear in the text by numbers in the order. List all authors when six or less; when seven or more, list only first six and add et al. journal titles should be abbreviated in accordance with Index Medicus. Examples of correct reference forms are given as follows:  
Journal: Al-Salihi AR, Hasson EH, Al-Azzawi HT. A short review of snakes in Iraq with special reference to venomous snake bite and their treatment. Iraqi Med J 1987; 36: 57-60.  
Book chapter: Pen AS. Immunological features of myasthenia gravis. In: Aguayo AJ, Karapti G, editors. Topics in Nerves and Muscle Research. 31<sup>st</sup> ed. Amsterdam: Experta Medica; 1975. p.123-32.
- 8- Illustrations: photographs unmounted on glossy paper should be provided with magnification scale if appropriate. Lettering should be in either letraset or stencil of comparable size. Illustrations should be marked on the back with the figure number, title of the paper and name(s) of the author(s) with soft pencil. All photographs, graphs and diagrams should be referred to as figures and should be numbered consecutively in the text in Arabic numerals. The legends to illustrations should be typed on a separate sheet. Tables should be numbered consecutively in the text in Arabic numerals and each typed on a separate sheet. Vertical lines normally will not be printed.
- 9- Measurements are preferably expressed in SI units.
- 10- Authors are advised to follow the Webster's Collegiate Dictionary in spelling.
- 11- Articles and abstracts written in Arabic should follow the Unified Medical Dictionary (Council of Arab Ministers of Health/WHO/Arab Medical Union/ALESCO, 3<sup>rd</sup> edition).
- 12- Use only standard abbreviations in the title and abstract. The full term for which the abbreviations stand should precede its first use in the text.
- 13- After the manuscript has been accepted for publication, authors are required to supply the final version of the manuscript on CD in MS Office Word 2007 and more.
- 14- Page proof will be sent to the corresponding author for proof correction. Major alterations from the text cannot be accepted.
- 15- When sending manuscripts, authors from outside Iraq are requested to send the equivalent of 50\$ to cover the cost of processing. Upon acceptance of the paper, a publishing charge of 100\$ is required. For authors from Iraq, the total charge is 50000 ID, 25000 ID on sending the article (not refundable). In case of more than five pages' article, the Iraqi author pays 10000 ID for any extra page.
- 16- All correspondence should be sent to:

*The Editor*

*Iraqi Medical Journal (IMJ)*

*Mobile No.:00964(0)7903201903*

*Fax +96415372193*

*PO Box 6297*

*Al-Mansour, Al-Ma'ari Street*

*Baghdad-Iraq*

*Website: [www.ima-iq.com](http://www.ima-iq.com)*

*E-mail: [imj\\_ima@yahoo.com](mailto:imj_ima@yahoo.com)*

## *Preface*

*B*y now, the **Iraqi Medical Journal (IMJ)** is celebrating its 63<sup>rd</sup> anniversary, and in the same time a new Editorial Board has been nominated to take over.

The **IMJ** is one of the oldest Iraqi Medical Journals and has served to enforce the medical knowledge among Iraqi and regional doctors for more than of half century. During this period, there were difficult years because of the unstable circumstances of the country, and in spite of this, the **IMJ** continued to appear and remained till the time being as one of the recognized medical journal in Iraq.

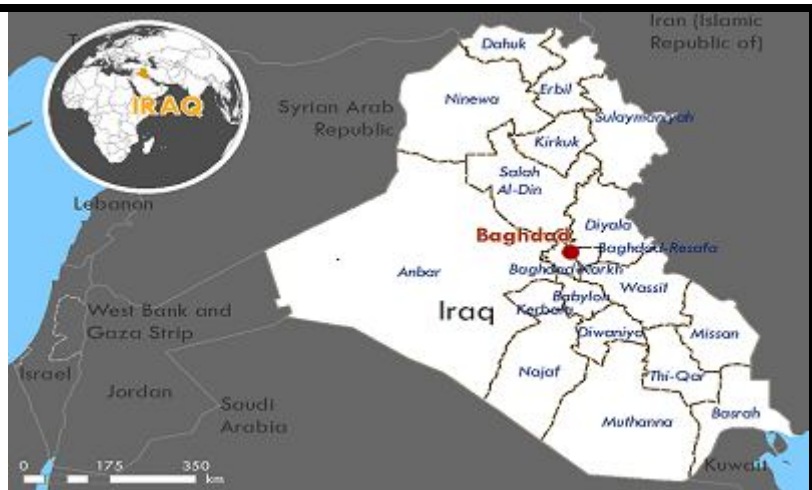
We, the new Editorial Board, feel the responsibility and have the will to improve the quality of this journal. We are planning to launch a new organized website with an electronic submission system. Also, we aim to improve the standard of the papers submitted to the journal looking forward for our journal to be internationally indexed.

As we are looking for the future, we should remember with proud all previous editorial boards and we should thank especially the last one for their hard working during the last difficult years.

We trust in God and we hope for better future and new looking **Iraqi Medical Journal**.

*On behalf of the Editorial Board*  
**Dr. Abdul Ameer Mohsen**  
*Editorial Director*

## Iraq Humanitarian Response Plan 2017



### Funding requirements

**Health sector funding requirements for 2017:** US\$ 110 million for 2017 (health partners including WHO).

**WHO funding requirements for 2017:** US\$ 59 million.

**Beneficiaries targeted by health partners in 2017:** There are 10.3 million people in need of health humanitarian assistance in 2017, of these 6.2 million are being targeted by the health sector including Iraq wide.

### Background

The humanitarian crisis in Iraq remains one of the largest and most volatile in the world. The pace of displacement over the past three years is nearly without precedent. Over 4 million Iraqis are currently displaced, living in 3700 locations across the country including 1.1 million displaced to camps and emergency sites and 3.1 million outside the camps. During the past year, more than 750 000 people in areas impacted by the conflict have been newly displaced. In 2017, this number is expected to increase to as many as 1.2 to 1.5 million additional civilians.

The ongoing conflict has impacted nearly every aspect of Iraqi society. Iraqi civilians in conflict areas are in extreme danger. Civilians risk being caught in cross-fire and are subjected to targeted attacks; they face execution, abduction, rape, looting, detention and expulsion.

The operation in Mosul has the potential to be the single largest humanitarian operation in the world in 2017. Sources confirm that as many as 500,000 civilians in the central and eastern parts of the city are now accessible with huge humanitarian health needs and that 400,000 are in the western sections with no access and with even much greater needs. Without emergency support (food, water, health care and specialized protection assistance) will be unable to survive. Displaced families require comprehensive emergency assistance including shelter, food, water, sanitation, household items, health care, education and specialized protection.

### Health sector situation

The number of health consultations performed in health clinics has increased eightfold and more than half of the secondary and tertiary hospitals in Mosul have been damaged or destroyed.

Security challenges mean that there is limited access to health services in partially liberated areas and inside of Mosul along with limited movement for humanitarian partners in newly accessible areas.

The shortage of safe water for populations trapped inside Mosul remains a concern as this increases the risk of outbreaks of water borne diseases.

### Health sector objectives

Objective 1: Provide critical emergency health care and psychosocial support to highly vulnerable people as soon as they are accessible.

Objective 2: Provide a comprehensive package of essential health care services to people in priority locations.

Objective 3: Help to strengthen national health care systems and upgrade health facilities in crisis-affected areas.