

THESES

PERIPHERAL NEUROPATHY INVESTIGATION IN THE EARLY STAGE OF BONE MARROW TRANSPLANTATION (Abstract)*. **THESIS. CURITIBA, 1997.**

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Over the last decade, bone marrow transplantation (BMT) has developed into an important treatment method for aplastic anemia and a variety of hematologic and lympho-reticular diseases, solid malignancies, inborn errors of metabolism and deficiency diseases. Unfortunately, the procedure carries a significant risk for neurological complications (59-79%). The peripheral nerve complications, however, are rare and may be secondary to the therapy to avoid rejection. At any rate, it has been postulated that early diagnosis of such complications may lead to drug adjustments or a complete change in the therapeutic scheme. This particular scenario was analysed in patients who were submitted to BMT in order to verify whether the drugs used in the early stage of BMT could induce peripheral neuropathy.

Forty-three patients with several hematological diseases in the early stage of BMT were prospectively studied. All patients underwent a complete neurological examination, vibratory sense perception test, and nerve conduction study both before and after BMT (admission time: approximately 90 days). The following nerves were studied: median, peroneal, posterior tibial (motor), median and sural (sensitive). The nerve conduction study included latency, amplitude and duration, as well as both compound muscle action and sensory nerve action potential, plus nerve conduction velocity. Most patients were in busulphan, cyclophosphamide, cyclosporine A and methotrexate. Serum levels of creatine kinase, creatinine, albumin and glucose were analysed.

Ages varied from 12 to 52 (mean 28.58 years old); 34.9% were female and 65.1% male patients. The mean disease duration time was 1.33 years. Although the results showed statistical differences between glucose and albumin serum levels, plus non-specific abnormalities in the nerve conduction study, all of these differences were not sufficient to induce or diagnose peripheral nerve injury. Therefore, it was concluded that peripheral neuropathy does not occur in the early stage of BMT in our hospital.

KEY WORDS: peripheral neuropathy, nerve conduction study, bone marrow transplantation.

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ENZYME LINKED IMMUNOSORBENT ASSAY (ELISA) FOR DETECTION OF IgG, IgM, IgE AND IgA AGAINST *CYSTICERCUS CELLULOSAE* IN CEREBROSPINAL FLUID IN NEUROCYSTICERCOSIS (Abstract)*. **DISSERTATION. RIBEIRÃO PRETO, 1997.**

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Neurocysticercosis (NCC) is a severe problem of public health in the developing countries acquiring special concern in our region where it is an endemic disease. It causes several disturbances in humans, resulting in elevated morbidity and mortality, clinically manifesting in a proteiform way. The criterious use of subsidiary methods become imperative since these symptomatological multiplicity, standing out in this context the neuroimaging and immunological methods.

The present study had as objective the analysis of different classes of immunoglobulins, IgG, IgM, IgE and IgA, specific against cysticerci, in the cerebrospinal fluid (CSF), through the immunoenzymatic assay (ELISA), searching for correlations between these findings and clinical and tomographic elements.