SCOPING REVIEW

Outcomes of COVID-19 in the Eastern Mediterranean Region in the first 4 months of the pandemic

BaHammam et al summarize the outcomes of the coronavirus disease 2019 infections in the Eastern Mediterranean Region (EMR) in the first 4 months of the pandemic. Eastern Mediterranean Region-based observational and interventional studies published between January 2020 and May 2020 related to COVID-19 outcomes were searched. Data were pooled using a fixed-effects model consistent with the Der Simonian-Laird method. The results report the pooled outcomes (recovery rate and death rate) and conform using 95% confidence intervals (95% CI). Besides, Forest plots were used to present data graphically. An assessment of countries’ heterogeneity employing the I2 statistic was carried out; the value of 75 to 100% was used to signify high heterogeneity. Meta-analytic pooling of the point estimates of death rate per country in the GCC was 0.60%, with statistically significant evidence of between-countries heterogeneity (Q =209.9, \( \tau^2 = 0.54, I^2 = 97.60\% \), \( p<0.001 \)).

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ORIGINAL ARTICLES

Surgical site infections in a tertiary hospital over 10 years. The effect of hospital accreditation strategy implementation

Alshammari et al analyze the rate of surgical site infections (SSIs), the type, and the frequency of the commonly-associated microorganisms. The rate of SSI was calculated as the number of SSIs per 1000 operations per year. Because the data were not completely available for the years 2008 and 2018, the rates of SSI for these years were estimated based on the average total number of operations annually for the years 2009-2017. A total of 289 samples of culture-confirmed SSIs were included in the study. The rate of SSIs among females (55.6%) was higher than that of males (44.4%), but it was statistically insignificant (\( p=0.06 \)). There was a statistically significant difference in frequency of SSIs among males and females in different age groups (Chi-squared for linear trend [extended Hans-Mantel] = 4.6; \( p=0.03 \)).

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Impact of inpatient rehabilitation services on the functional levels of cancer patients at King Fahad Medical City, Riyadh, Saudi Arabia

AlJohi et al conclude that in-patient cancer rehabilitation service demonstrated statistically significant functional gains during rehabilitation at King Fahad Medical City. The functional independence measure (FIM) tool was used to assess functional changes from admission to discharge to determine the impact of inpatient rehabilitation. The study used a retrospective chart review of related data gathered between January 2012 and December 2018. A total of 86 medical records of cancer patients admitted for inpatient rehabilitation at King Fahad Medical City were included. There was a significant difference in their FIM scores from admission to discharge, and 86.7% of patients were discharged home, 3.3% were readmitted, and 10% were transferred to long-term care facilities.

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CASE REPORT

Primary infertility secondary to a hidden posterior urethral valve representing a diagnostic challenge in the fifth decade

Rajih et al presents a 45-year-old African man with primary infertility for 8 years. He was complaining of weak stream, frequency and nocturia, along with a small ejaculatory semen volume. He had no history suggestive of urogenital infections. He underwent left varicocelectomy and had multiple visits to different medical centres along with his 27-year-old wife seeking conception. He was well androgenised with no gynecomastia. His vital signs were normal, and his abdominal examination revealed an abdominal scar of high venous ligation. He had intact vas bilaterally without epididymal induration, and both testes measured approximately 18 ml. The digital rectal examination showed a firm, small, non-tender prostate.

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