Diseases Mentioned in Inflammation Lectures

- 1. Acute Appendicitis
- 2. Acute Tonsillitis: Viral condition; cytokines act locally.
- 3. Acute Bronchial Asthma
- 4. Acute Encephalitis
- 5. Antihistamines: Taken to reduce congestion.
- 6. **Acute Glomerulonephritis**: A possible example of misdirected inflammation (autoimmune); involves antibodies, complement, and monocytes, which also cause tissue injury in kidneys and neurons.
- 7. **Alveolar Membrane Inflammation**: Misdirected inflammation.
- 8. Chronic Hepatitis: Leads to chronic liver disease.
- 9. Chronic Glomerulitis: Causes end-stage renal disease.
- 10. Chronic Lung Inflammation: Leads to pulmonary fibrosis.
- 11. Acute Respiratory Distress Syndrome (ARDS):

 Characterized by neutrophils and diffuse alveolar damage;
 typically seen in terminally ill patients with multiple organ
 failure in the ICU.
- 12. Bronchial Asthma: Mediated by eosinophils and IgE.
 Patients often have atopy, allergies, nasal congestion, bronchospasm, wheezing, and difficulty swallowing.
 Treatments aim to prevent the chronic condition rather than address each acute attack.
- 13. **Septic Shock**: Severe bacterial overgrowth in the blood ("blood poisoning"), mediated by cytokines. Gram-negative infections are especially lethal, impacting vital functions.

- 14. **Arthritis**: Involves lymphocytes, macrophages, antibodies, and platelets.
- 15. **Atherosclerosis**: Chronic inflammation caused by prolonged cholesterol exposure, mediated by macrophages and lymphocytes. Can lead to chronic ischemia, myocardial infarction, or brain strokes.
- 16. **Pulmonary Fibrosis**: Involves macrophages and fibroblasts, progressing to idiopathic or end-stage fibrosis.
- 17. Gout: Caused by deposition of urate crystals in the joints.
- 18. **Congestive Heart Failure**: High hydrostatic pressure results in transudate formation.
- 19. **Chronic Renal Failure**: Protein leakage causes low osmotic pressure, leading to transudate formation.
- 20. **Chronic Liver Disease**: Reduced protein synthesis results in low osmotic pressure and transudate formation. Commonly caused by hepatitis C, often accompanied by hyponatremia and serous effusion.
- 21. **Severe Bacterial Pneumonia**: Produces exudate in the lungs.
- 22. **Severe Clinical Symptoms**: Often associated with exudate formation.
- 23. Cellulitis: Inflammation of the skin and subcutaneous tissue.
- 24. **Pleural Effusion**: Fluid accumulation in the pleural cavity; classified as serous effusion.
- 25. **Ascites**: Fluid accumulation in the abdominal cavity.
- 26. **Lymphadenitis**: Inflammation of lymph nodes, often due to infections in nearby tissues. If viral, it is typically self-limiting;

- if bacterial (e.g., TB), requires antibiotics and sometimes biopsy.
- 27. **Lymphangitis**: Inflammation of lymphatic vessels, caused by infections or injuries, often involved in draining immune elements and fluids.
- 28. **Alpha-1 Antitrypsin Deficiency**: Affects the GI tract; lack of enzyme inhibition leads to cell injury and chronic disease development.
- 29. **Sepsis**: Neutrophil extracellular traps (NETs) play a role.
- 30. **Systemic Lupus Erythematosus (SLE)**: Autoimmune disease affecting young females. Symptoms include a cheek rash and involvement of the kidneys, heart, skin, and joints. NETs contribute to the pathology.
- 31. **Rheumatoid Arthritis**: Autoimmune, hypersensitivity disease leading to chronic inflammation.
- 32. **Mixed Connective Tissue Disease**: An autoimmune condition.
- 33. Interleukin-17 Deficiency: Results in weakened immunity.
- 34. **Aspirin, Indomethacin, Ibuprofen, Profine**: Antiprostaglandin medications.
- 35. **Myocardial Infarction/Strokes**: Often caused by TXA2-mediated coronary artery blockage.
- 36. **Hereditary Angioedema**: Caused by a deficiency of C1 inhibitor.
- 37. **Paroxysmal Nocturnal Hemoglobinuria (PNH)**: Caused by deficiencies in DAF and CD59.
- 38. **Hemolytic Uremic Syndrome**: Associated with mutations in Factor H.

- 39. Complement System (CS) Protein Deficiencies: Lead to susceptibility to infections.
- 40. Fibrinous Pericarditis:
- 41. **Bronchopneumonia**: Can be acute or chronic; purulent inflammation if bacterial.
- 42. **Delayed Hypersensitivity Reaction**: Persistent infection causing chronic inflammation.
- 43. **Granulomatous Inflammation**: Caused by persistent infection leading to chronic inflammation.
- 44. **Multiple Sclerosis (MS)**: A hypersensitivity disease causing chronic inflammation.
- 45. **Alzheimer's Disease/Diabetes Mellitus**: Diseases associated with chronic inflammation.
- 46. **Silicosis**: Chronic inflammation due to prolonged silica exposure.
- 47. **Cirrhosis**: Chronic inflammation leads to tissue destruction and replacement of normal liver parenchyma with thick fibrotic bands.
- 48. **Eosinophilic Esophagitis**: Characterized by eosinophilic inflammation and red esophageal rings.
- 49. **Chronic Osteomyelitis**: Bone destruction mediated by neutrophils.
- 50. **Chronic Obstructive Pulmonary Disease (COPD)**: Caused by smoking; characterized by emphysema and chronic bronchitis, mediated by neutrophils.
- 51. **Chronic Relapsing Pancreatitis**: Acute episodes superimposed on chronic inflammation, often seen in alcoholic patients and mediated by neutrophils.



لا إله إلا أنت سُبْحَاتك إلى كنث مِن الطَّالِمِين ، اللهمّ إني أسألك بأسمائك الحسنى، وصفاتك العليا، وأسألك باسمك الأعظم الذي إذا دُعيت به أجبت، أن تُيسّر لي أمري، وتُسهّل لي دربي، وتقضي لي حاجتي