

INTRODUCTION TO CLINICAL NEUROLOGY

Professor

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**Best wished
from the
department
of Neurology
for the new
academic
year!**



This September:

14 lectures

*(all with Dr. Robinson from
University of Washington,
Seattle, USA)*

**We expect to have + 72
academic hours during 2
semesters this year off-
line**

Exam



Дата	Время начала	Тема	Со-лекторы
04.09.20	8:45	Введение в клиническую неврологию.	Ахмадеева Л.Р. Робинсон С.
04.09.20	10:30	Двигательная функция и ее расстройства. Синдромы нарушения произвольных движений (параличи, парезы).	Ахмадеева Л.Р. Робинсон С.
05.09.20	8:45	Синдромы двигательных экстрапирамидных расстройств.	Кутлубаев М.А. Робинсон С.
05.09.20	10:30	Синдромы нарушения координации движений и равновесия.	Кутлубаев М.А. Робинсон С.
07.09.20	8:45	Чувствительность и ее расстройства.	Ахмадеева Л.Р. Робинсон С.
07.09.20	10:30	Нарушения сознания, бодрствования и сна.	Мирсаев Т.Р. Робинсон С.
09.09.20	8:45	Сосудистые заболевания мозга.	Кутлубаев М.А. Робинсон С.
09.09.20	10:30	Хронические нейроинфекции и демиелинизирующие заболевания нервной системы	Мирсаев Т.Р. Робинсон С.
10.09.20	8:45	Заболевания периферической нервной системы и вертеброгенные неврологические синдромы.	Сайфуллина Е.В. Робинсон С.
10.09.20	10:30	Профессиональные болезни и интоксикации нервной системы.	Сайфуллина Е.В. Робинсон С.
11.09.20	8:45	Наследственные болезни нервной системы.	Сайфуллина Е.В. Робинсон С.
11.09.20	10:30	Нейродегенеративные заболевания.	Качемаева О.В. Робинсон С.
12.09.20	8:45	Неврозы. Заболевания вегетативной нервной системы. Головные боли.	Мирсаев Т.Р. Робинсон С.
12.09.20	10:30	Наследственные нервно-мышечные заболевания.	Ахмадеева Л.Р. Робинсон С.



Кафедра неврологии с курсами нейрохирургии
и медицинской генетики

Chair of our department – Dr. Mansur Amirovich Kutlubaev





Students' research society (кружок)

Monthly

on the last Thursday of
the month at 6:30pm



Тема	Место проведения	Дата	Ответственные преподаватели
Неврологические проявления COVID-19	<p>Будет объявлено каждый раз дополнительно, в том числе на сайте www.ufaneuro.org</p> <p>По всем вопросам и для записи в качестве выступающего – связь со старостой кружка - Дарьей Исламгареевой (email: volk.dariya@gmail.com) или куратором кружка Лейлой Ринатовной Ахмадеевой (email: la@ufaneuro.org)</p>	24.09.19	Кутлубаев М.А., Ахмадеева Л.Р.
Пограничная психоневрология: вчера, сегодня, завтра		29.10.20	Ахмадеева Л.Р. (БГМУ), Антохина Р.И., Чалая Е.Б. (Оренбургский государственный медицинский университет)
Возраст-зависимые формы эпилепсий		26.11.20	Анисимова Д.В. (БГМУ), Кривоножкина П.С. (Волгоградский государственный медицинский университет)
Хроническая боль как болезнь		17.12.20	Рахматуллин А.Р. (БГМУ), Чурюканов М.В. (Сеченовский медицинский университет, г.Москва)
Высокоактивный рассеянный склероз: диагностика и лечение		25.02.20	Бахтиярова К.З. (БГМУ), Гончарова З.А. (Ростовский ГМУ)
Врожденные пороки развития ЦНС, обусловленные мутациями: частые и редкие формы		25.03.21	Сайфуллина Е.В. (БГМУ), Невмержицкая К.С., Овсова О.В. (Уральская государственная медакадемия, г.Екатеринбург)
Реабилитация при координаторных нарушениях: диагностика, методики, нейрофизиология мозжечка		29.04.21	Качемаева О.В. (БГМУ), Визило Т.Л. (Кемеровский медуниверситет)
Нелинейная динамика в неврологии, медицине и жизни		21.05.21	Мирсаев Т.Р. (БГМУ), Садырин А.В. (Южно-Уральский государственный медуниверситет, г.Челябинск)

Федеральное агентство по здравоохранению и социальному развитию
Башкирский государственный медицинский университет
Совет молодых ученых
Студенческое научное общество

ДИПЛОМ III степени

выдан

Мухутдиновой А. Ф.,
Нигматьяновой И. И.

за участие в работе секции
Наркология, психиатрия, неврология
75-ой Республиканской научной конференции
студентов и молодых ученых
«Вопросы теоретической и практической медицины»

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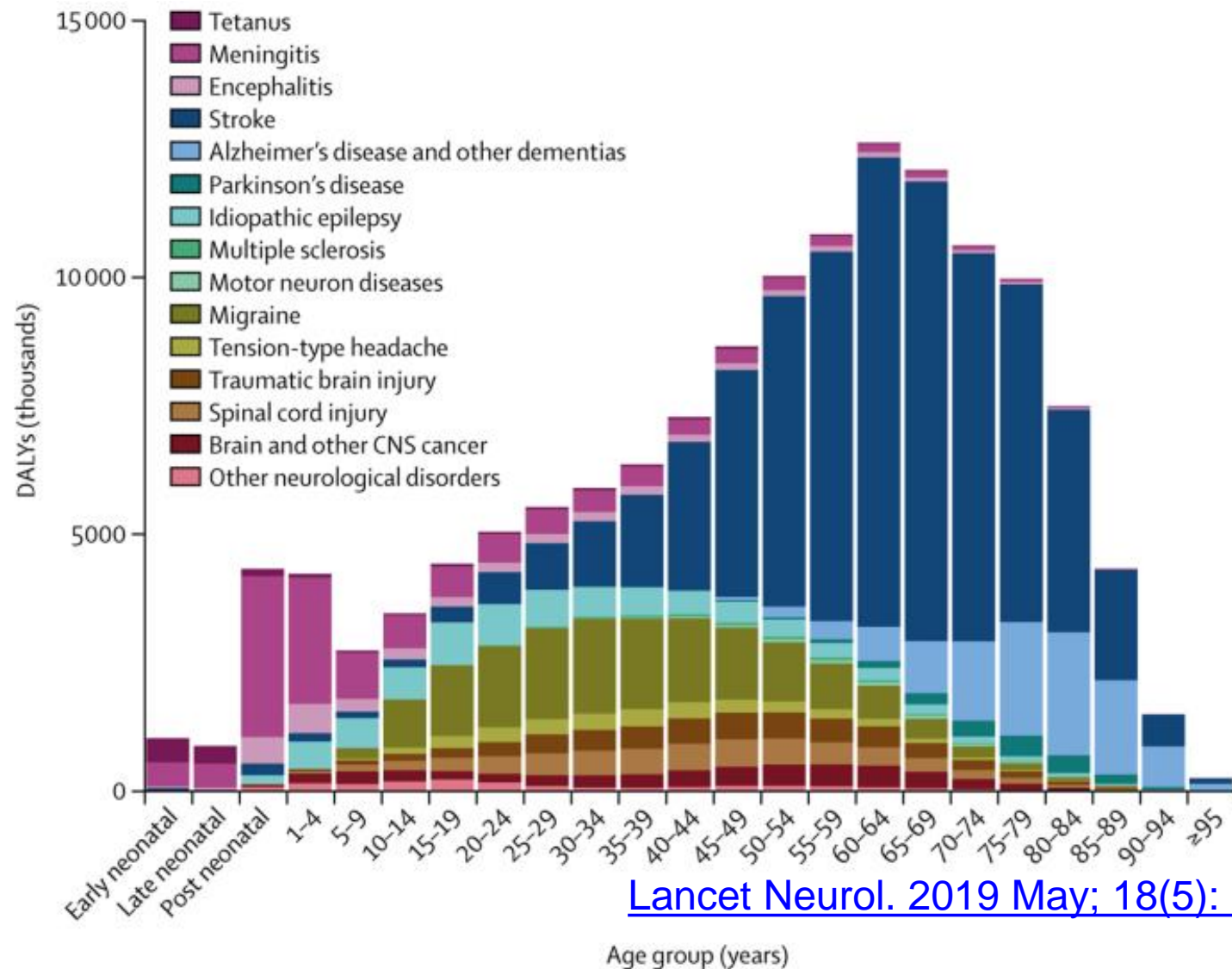
Neurology:

The medical specialty concerned with the diagnosis and treatment of disorders of the nervous system, which includes the brain, the spinal cord, and the nerves.

<https://www.medicinenet.com>



Global DALYs for neurological disorders in men age, 2016



[Lancet Neurol. 2019 May; 18\(5\): 459–480.](#)

What is a neurologist?

A neurologist is a medical doctor who specializes in treating diseases of the [nervous system](#).



The Chronicle / Liz Hafalia

<https://www.healthline.com/health/neurologist>



WHO, 2019

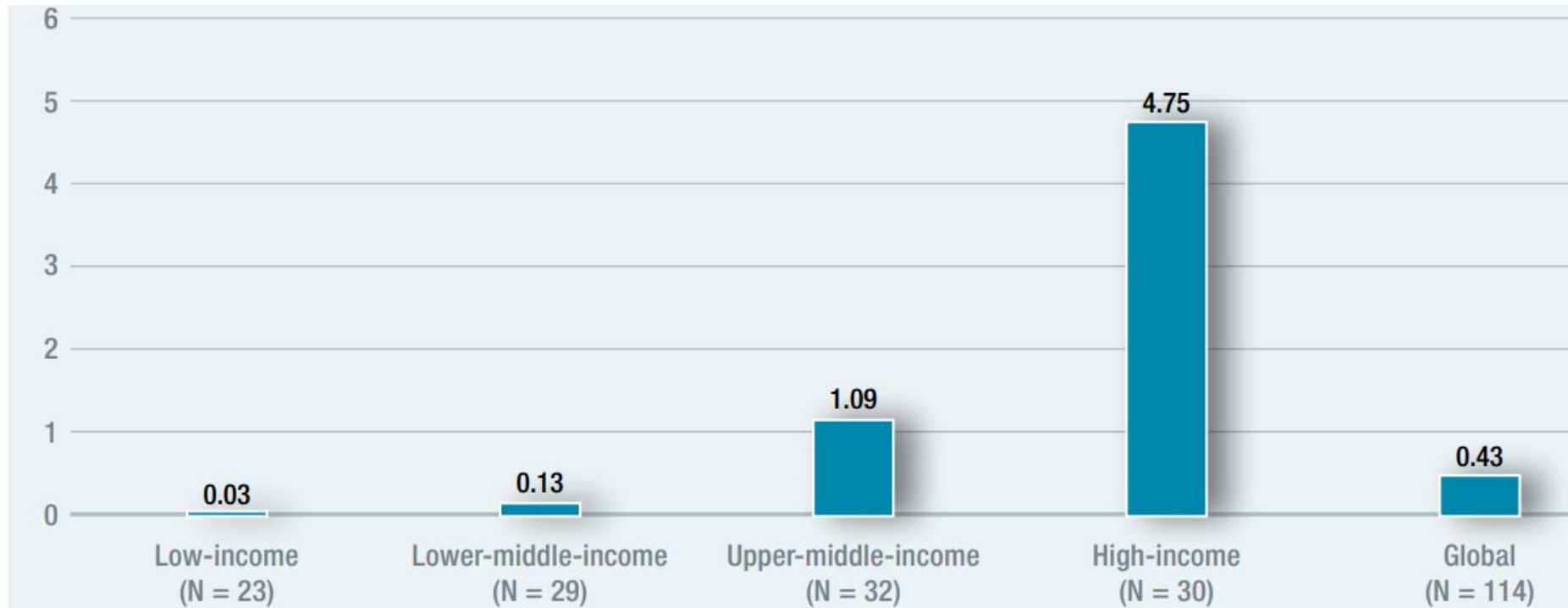


FIG. 14. Median number of adult neurologists per 100 000 population in the responding countries, by World Bank income group

WHO, 2019

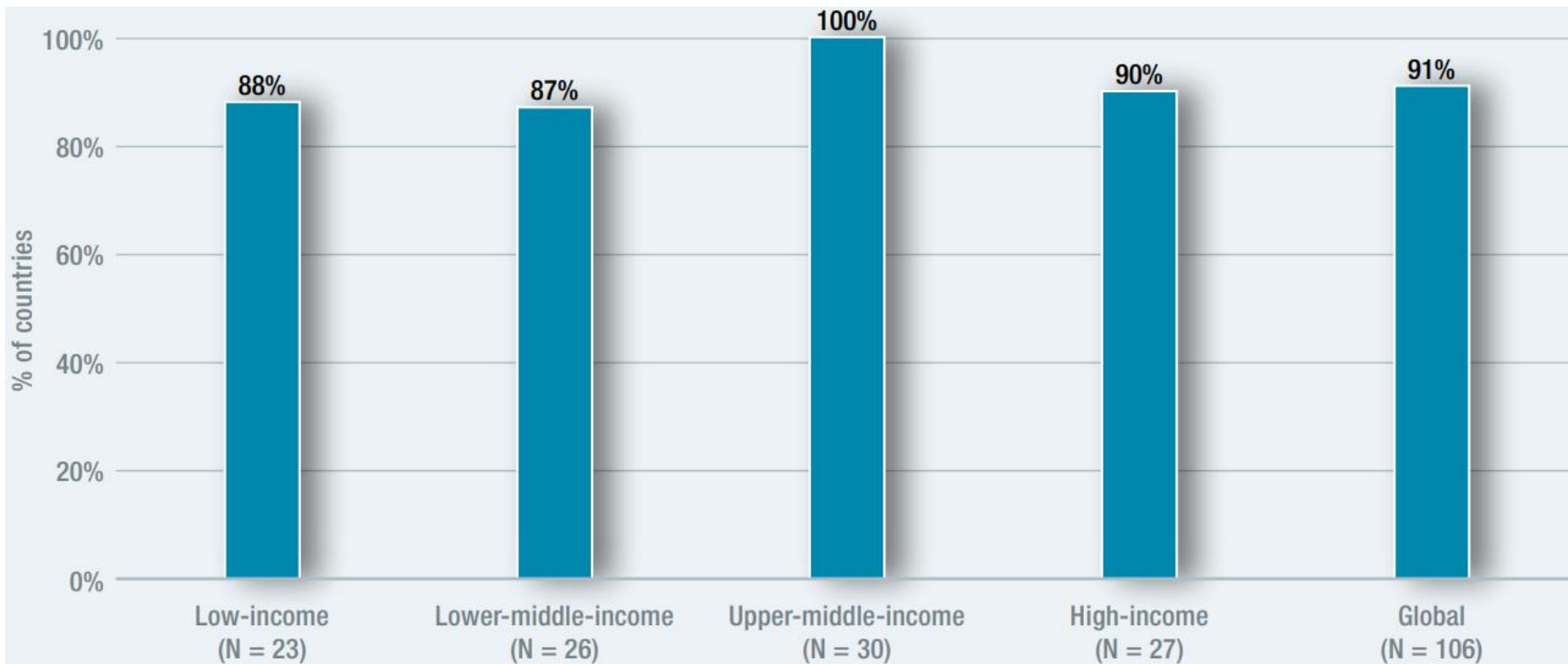


FIG. 19. Countries with primary health care physicians offering neurological care, by World Bank income group

WHO, 2019

It is now recognized that neurological disorders contribute significantly to global disability, often leading to serious physical, cognitive and psychosocial limitations. The Global Burden of Disease (GBD) study identifies mental, neurological and substance use disorders as a significant cause of the world's disease burden (1–3). The most recent estimates show that stroke is the second highest cause of morbidity and mortality worldwide (1). Dementia, meningitis and migraine rank in the top 30 factors in disability-adjusted life years, and epilepsy in the top 50, out of 315 diseases and injuries included (2, 3). There is a growing recognition that the burden of neurological disorders is disproportionately high in low- and middle-income countries, where health-care services and resources are often scarce. Importantly, the neurological burden of disease is expected to grow exponentially in the next decade, with highest burden in low- and middle-income countries. Innovative health-care management approaches are required in these countries because of the lack of specialist care. Though attitudes and knowledge of the burden of neurological disorders are starting to improve, increased financial investment and policy changes are ultimately required to improve neurological care globally.

WHO, 2019

KEY FINDINGS

GLOBAL POLICIES ON NEUROLOGICAL DISORDERS

- A total of 24% of countries report stand-alone neurological health policies, although there is a major deficit in low- and middle-income countries.

LEGISLATION FOR NEUROLOGICAL DISORDERS

- A total of 41% of countries report the existence of legislation on epilepsy, and 30% report the existence of legislation relating to people with dementia; 29% of countries report legislation on “other” neurological disorders.

WHO, 2019

NEUROLOGICAL SERVICES QUALITY

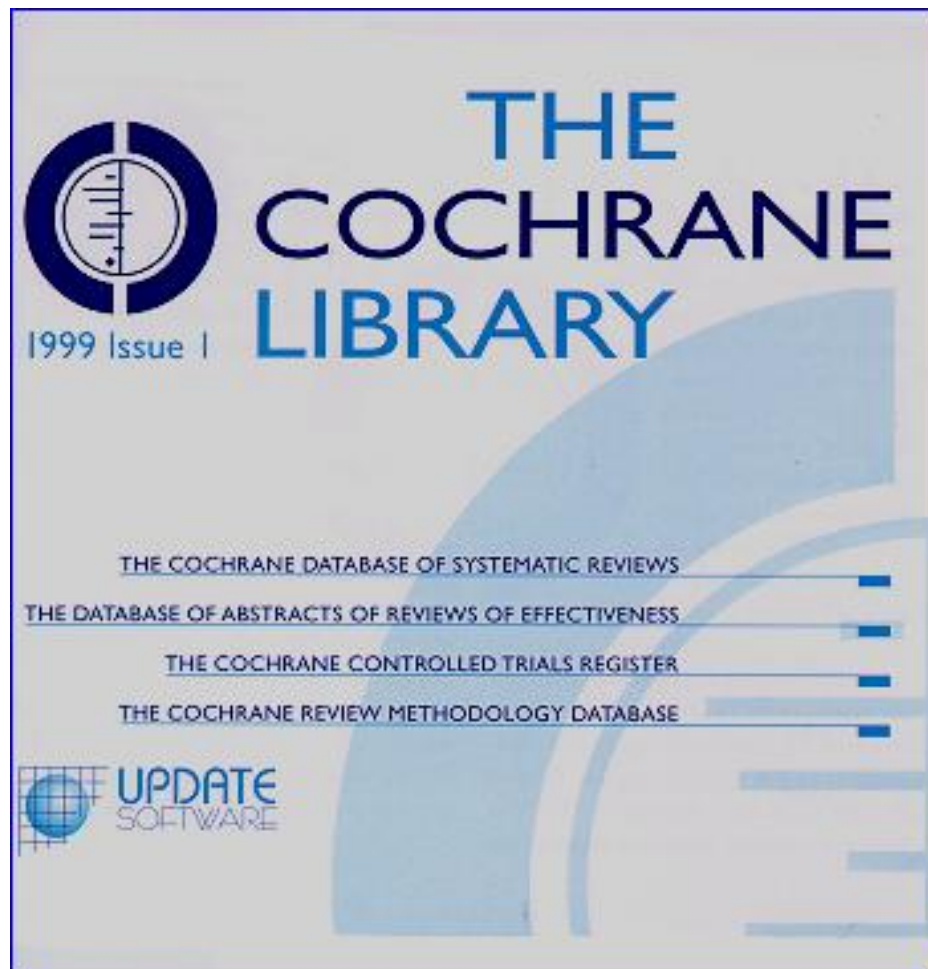
- A total of 55% of countries report having guidelines on neurological disorders, with the lowest number in the African Region (26%) and Eastern Mediterranean Region (47%).

NEUROLOGICAL INFORMATION-GATHERING SYSTEMS

- A total of 42% of countries report no neurological disorder data reporting in the last two years.

EVIDENCE BASED MEDICINE / NEUROLOGY

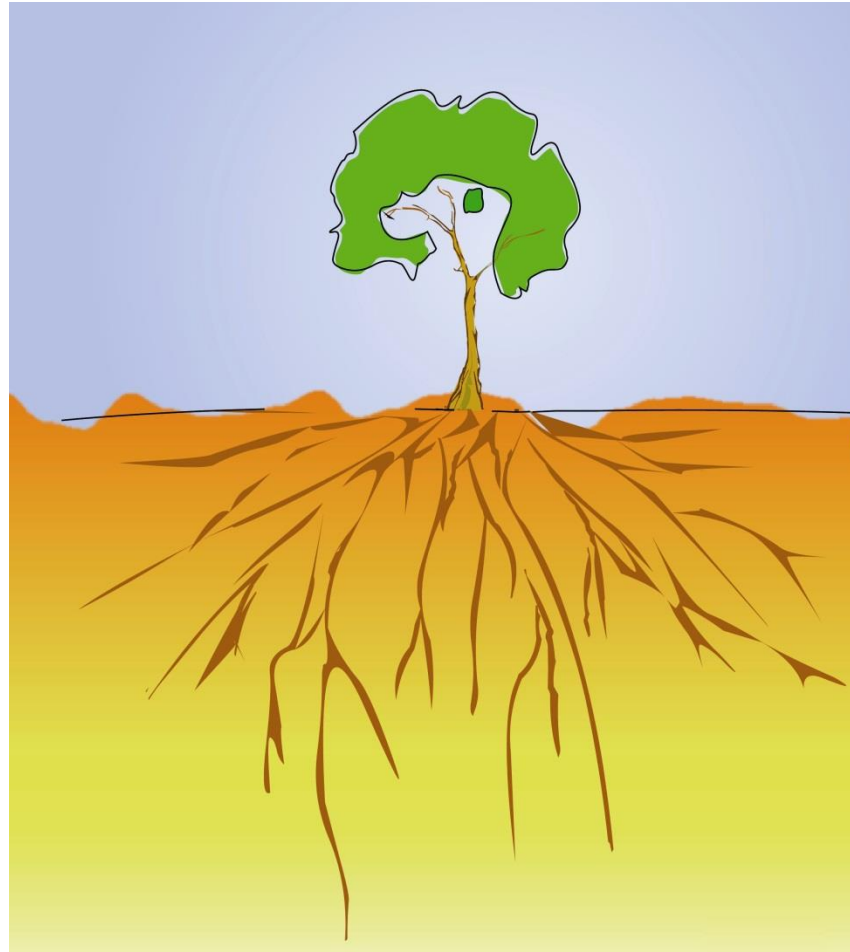
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Medicine

science

art





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[Lancet Neurol.](#) 2019 May; 18(5): 459–480.

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PMCID: PMC6459001

PMID: [30879893](#)

Global, regional, and national burden of neurological disorders, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016

GBD 2016 Neurology Collaborators[†]

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Ranking of age-standardised DALY rates for all neurological disorders by region, 2016

DALY=disability-adjusted life-year.

	Global	East Asia	Southeast Asia	Oceania	Central Asia	Central Europe	Eastern Europe	High-income Asia Pacific	Australasia	Western Europe	Southern Latin America	High-income North America	Caribbean	Andean Latin America	Central Latin America	Tropical Latin America	North Africa and Middle East	South Asia	Central sub-Saharan Africa	Eastern sub-Saharan Africa	Southern sub-Saharan Africa	Western sub-Saharan Africa
Stroke	1	1	1	1	1	1	1	1	2	2	1	1	1	1	1	1	1	1	1	1	1	1
Migraine	2	3	3	3	2	2	2	2	1	1	2	2	2	2	2	3	2	2	4	3	3	3
Alzheimer's disease and other dementias	3	2	2	2	4	3	3	3	3	3	3	3	3	3	3	2	3	4	3	4	4	4
Meningitis	4	11	5	4	9	12	10	14	13	13	11	13	4	9	10	8	5	3	2	2	5	2
Epilepsy	5	5	4	5	3	7	8	6	7	6	5	6	5	4	4	4	4	6	5	5	2	5
Spinal cord injury	6	7	8	9	7	6	5	4	4	4	4	4	9	8	9	9	6	9	6	7	10	9
Traumatic brain injury	7	6	6	7	5	4	4	7	8	8	9	8	7	7	6	7	9	7	7	8	6	7
Brain and other CNS cancer	8	4	9	10	6	5	6	8	5	5	6	5	8	6	7	5	8	10	9	11	9	10
Tension-type headache	9	8	10	8	10	8	7	5	6	7	7	7	6	5	5	6	7	8	8	9	7	6
Encephalitis	10	9	7	6	8	13	11	11	14	14	12	14	11	10	11	12	10	5	10	10	11	8
Parkinson's disease	11	10	11	12	12	9	9	10	9	10	8	9	12	11	12	11	12	13	13	13	12	13
Other neurological disorders	12	12	12	11	11	10	12	9	10	9	10	10	10	12	8	10	11	12	12	12	8	12
Tetanus	13	15	13	14	15	15	15	15	15	15	15	15	13	15	15	15	14	11	11	6	15	11
Multiple sclerosis	14	14	15	15	13	11	13	13	12	11	13	11	15	14	14	14	13	14	14	14	13	15
Motor neuron diseases	15	13	14	13	14	14	14	12	11	12	14	12	14	13	13	13	15	15	15	15	14	14

RESEARCH ARTICLE

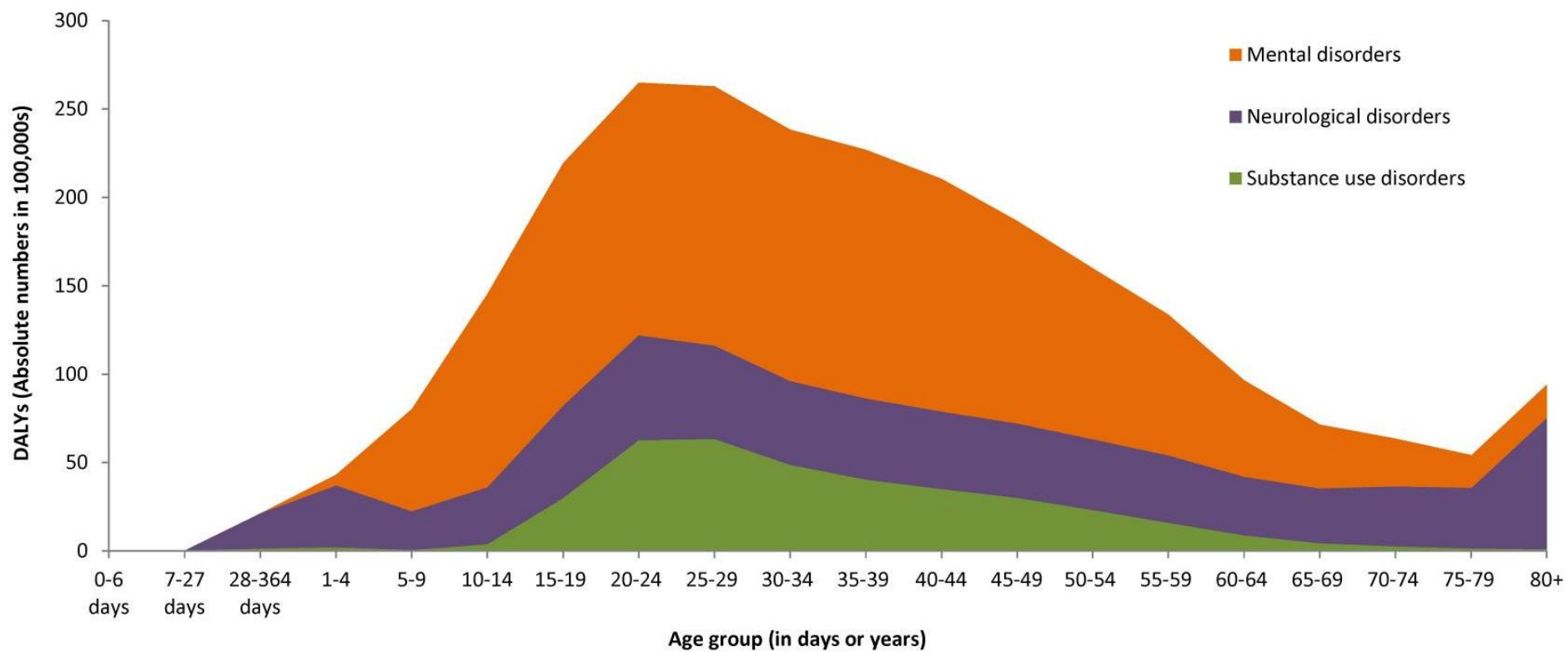
The Global Burden of Mental, Neurological and Substance Use Disorders: An Analysis from the Global Burden of Disease Study 2010

Harvey A. Whiteford^{1,2,3*}, Alize J. Ferrari^{1,2,3}, Louisa Degenhardt^{3,4,5}, Valery Feigin⁶, Theo Vos³



1 University of Queensland, School of Public Health, Herston, Queensland, Australia, **2** Queensland Centre for Mental Health Research, Wacol, Queensland, Australia, **3** University of Washington, Institute for Health Metrics and Evaluation, Seattle, Washington, United States of America, **4** UNSW Australia, National Drug and Alcohol Research Centre, New South Wales, Australia, **5** University of Melbourne, Melbourne School of Population and Global Health, Victoria, Australia, **6** Faculty of Health and Environmental Studies, National Institute for Stroke and Applied Neurosciences, AUT University, Auckland, New Zealand

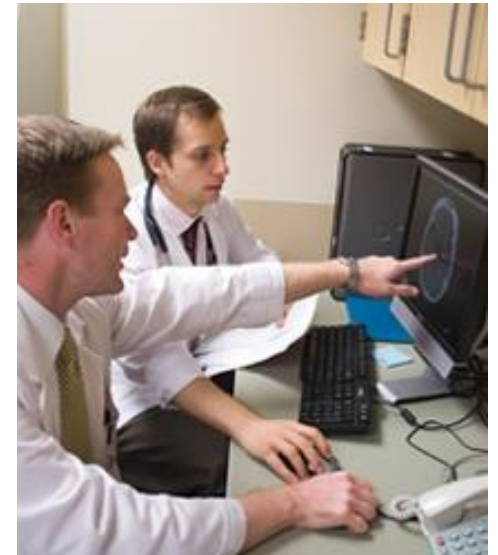
* h.whiteford@uq.edu.au



Note: DALYs = disability-adjusted life years.



To become a neurologist



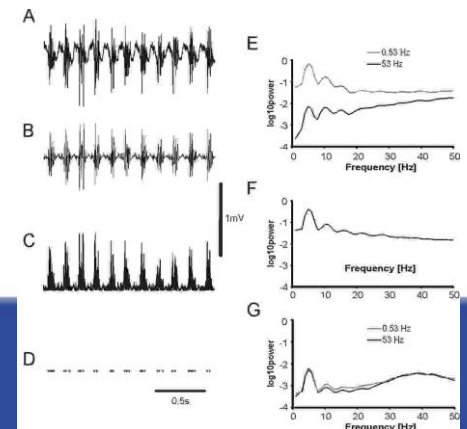
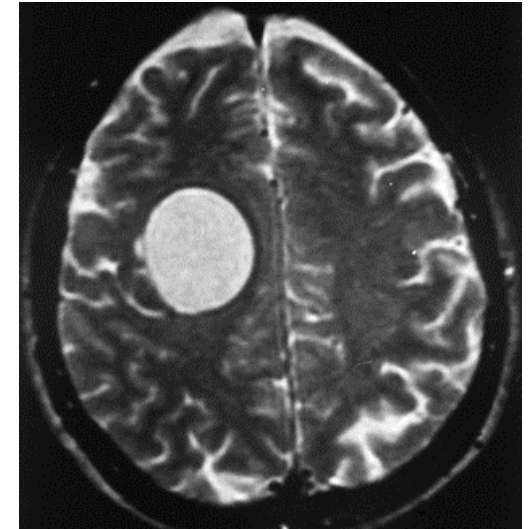
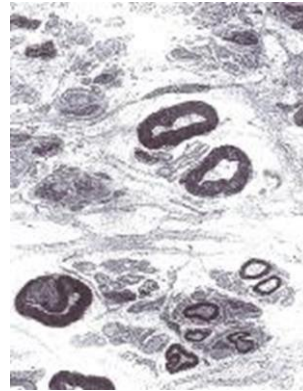
In Russia

- School (11 years)
- Medical university (6 years)
- *Residency (2-5 years)*
- Exam
- Every 5 years – confirmation of being updated (exam)



METHODS WE USE

- Clinical assessment
- X-ray
- Biopsy
- Electroencephalography
- Electroneuromyography + evoked potentials
- MRI
- Polysomnography, etc.



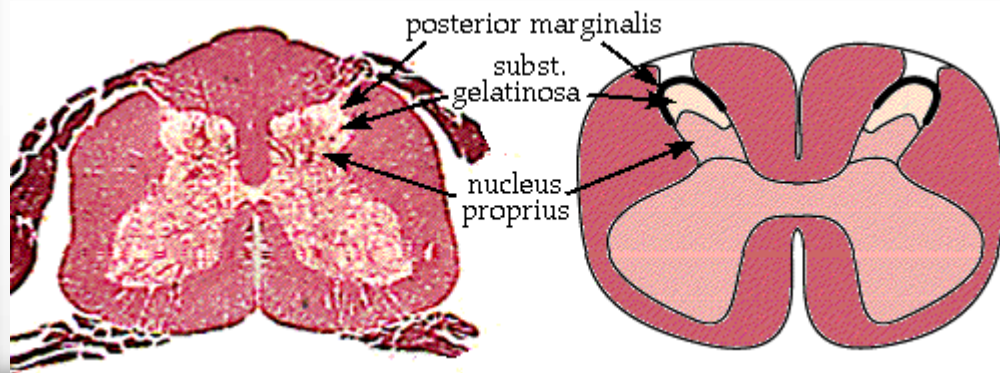
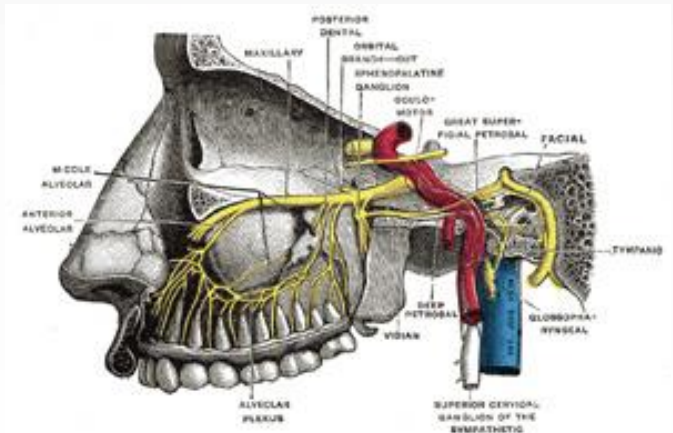
National Institute of
Neurological Disorders and Stroke

National Institutes of Health

Reducing the burden of neurological disease...



TOPICAL DIAGNOSIS



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ORIGINAL ARTICLE

Year : 2019 | Volume : 67 | Issue : 3 | Page : 700-703

Outpatient burden of neurological disorders: A prospective evaluation of 1500 patients

Raghunandan Nadig, Uday S Namapally, Gosala Raja K Sarma, Thomas Mathew

Department of Neurology, St. John's Medical College Hospital, Sarjapur Road, Bengaluru, Karnataka, India

Correspondence Address:
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Department of Neurology, St. John's Medical College Hospital, Sarjapur Road, Bengaluru - 560 034, Karnataka India

 Login to access the email ID

Source of Support: None, Conflict of Interest: None

DOI: 10.4103/0028-3886.263249



Introduction: Neurologists spend a significant amount of time in providing out-patient services. No comprehensive studies are there from India which have looked into the real burden of these common disorders in the out-patient population. This study was done to get a clear data on the burden of these disorders. **Objectives:** The aim of this study was to determine the incidence of various neurological disorders in the out-patient department services. **Methods:** The study was conducted in a tertiary care medical center. Clinical data of 1500 consecutive out-patients who attended the out-patient services were collected over a period of 2 months from December 2014 to January 2015. All patients were evaluated by a resident trainee and a senior consultant. Necessary investigations were done wherever applicable. The most probable clinical diagnosis was made after a detailed history and a thorough neurological evaluation. Age, sex, and the diagnosis were recorded and entered in an Excel sheet. Appropriate statistical methods were used for descriptive analysis. **Results:** Out of the 1500 patients, 766 were male and 734 were female. The most common complaints with which patients came to the outpatient services were headaches (28.6%), muscular and radicular pains (24.7%), seizures (12.7%) and hemiparesis/monoparesis (11.9%). Movement disorders, neuropathies, and nerve palsies were also present in a significant number of patients. **Conclusion:** The most common neurological disorders in the outpatient services are headache, neck pain, backache, fibromyalgia, stroke, epilepsy, and neuropathies. Newly joined residents should be well trained to efficiently manage these common outpatient disorders.

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 - outpatient
 - neurology

Key Message: Neurology residents should receive adequate training during their postgraduate course to efficiently manage disorders such as migraine

 - tension type headaches
 - muscular/radicular pains including fibr
- » Citation Manager
- » Access Statistics

Results: Out of the 1500 patients, 766 were male and 734 were female. ***The most common complaints with which patients came to the outpatient services were headaches (28.6%), muscular and radicular pains (24.7%), seizures (12.7%) and hemiparesis/monoparesis (11.9%)***. Movement disorders, neuropathies, and nerve palsies were also present in a significant number of patients. **Conclusion:** **The most common neurological disorders in the outpatient services are headache, neck pain, backache, fibromyalgia, stroke, epilepsy, and neuropathies.** Newly joined residents should be well trained to efficiently manage these common outpatient disorders.