

JOINT EVENT

4th International Conference on **Epilepsy & Treatment**
&
4th World Congress on **Parkinsons & Huntington Disease**
August 29-30, 2018 | Zurich, Switzerland

Light microscopical evaluation of acute and chronic hypophyseal endocrinopathy process in kaolin induced hydrocephaly model**R Handan Nurhat**

Lüleburgaz Devlet Hastanesi, Turkey

Introduction: As a consequence of hydrocephalus, affected children and adults may suffer motor, cognitive, and endocrine disturbances. We demonstrated acute and chronic endocrinopathy progress in kaolin-induced hydrocephalus by using a light microscope in rats.

Methods: 48 rats were used. Hydrocephalus was induced by intracisternal injection of 0.1 ml volume of 25%kaolin in acute and kaolin groups in 16 rats. The same volume of saline was injected into 16 rats in acute(AS) and chronic sham(ChS). The acute control(AC), sham(AS) and kaolin(AC) groups were sacrificed after 4 weeks,the others were sacrificed after 8 weeks

Results: When acute(AK) and chronic kaolin(ChK) groups were compared with acute(AC) and chronic controle(ChC) groups, somatotropic cells(SC) were decreased. There was no difference of SC between AK and ChK. Corticotropic cells(CC) were increased in AK and AS which were compared with AC. The rising in CC in AK was significantly different from AS. The number of CC in ChC,ChS and ChK were in normal. When AS and AK were compared with AC, a little raising in tirotropic cells(TC) were determined. Although the number of TC' rising in AK was slightly more found than AS in light microscopic evaluation, the rising of TC in ChK and ChS were not significantly different from ChC in statistical analysis. There was no difference between acute and chronic term control, sham and kaolin groups in mammotrophic and gonadototropic cells' count.

Conclusion: We reached a conclusion that the rising in CC in AS and ChK groups was associated with intracranial pressure fluctuations and stress respectively which was occurred by elevated intracranial pressure.It would seem appropriate that the pituitary hormone levels must be evaluated before surgery and followed after surgery correction.

rhnurhat@hotmail.com