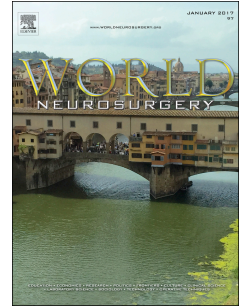


Accepted Manuscript

Movement Disorders and Deep Brain Stimulation in the Middle East

Junaid H. Siddiqui, MD, MRCP, Danish Bhatti, MD, Fahd Alsubaie, MBBS, Jawad A. Bajwa, MD



PII: S1878-8750(18)30293-6

DOI: [10.1016/j.wneu.2018.02.023](https://doi.org/10.1016/j.wneu.2018.02.023)

Reference: WNEU 7438

To appear in: *World Neurosurgery*

Received Date: 20 May 2017

Revised Date: 2 February 2018

Accepted Date: 5 February 2018

Please cite this article as: Siddiqui JH, Bhatti D, Alsubaie F, Bajwa JA, Movement Disorders and Deep Brain Stimulation in the Middle East, *World Neurosurgery* (2018), doi: 10.1016/j.wneu.2018.02.023.

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Movement Disorders and Deep Brain Stimulation in the Middle East

Introduction:

Brain disorders account for more than a quarter of all health loss due to disability, which is more than 8-fold greater than coronary artery disease and 20-fold greater than cancer¹. Movement disorders are an increasing source of disability and restrictions in mobility with their proportionate rise with age and disproportionate increase of the aging population, especially in the developing countries² like those in Asia, where more than half the population is above 60 and over 44.5 % are above 80 years³. Movement disorders are prevalent, under recognized and under treated globally. Parkinsonism alone is associated with a 2-fold increase in the risk of death^{4,5} with a significant impact on mobility and balance. Deep brain stimulation (DBS) surgery is a well-established modality of management for advanced Parkinson's disease (PD), essential tremor (ET) and Dystonia.

With ongoing attempts at establishment of tertiary care neuroscience medical centers and plans to develop DBS as a therapeutic option for movement disorders in the Middle East, it has become essential to review the incidence and prevalence of different movement disorders in the region to give better insight into understanding the challenges and opportunities to advance DBS.

The Middle East lies at the crossroads of Africa, Asia and Europe, comprising mainly of 22 Arab speaking countries that are members of the Arab league: Algeria, Bahrain, Comoros, Djibouti, Egypt, Iraq, Israel, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, United Arab Emirates, Yemen and the occupied Palestinian Territory groups^{6,7}. Iran and Israel, though not Arab countries, are included in the Middle East because of their geographic location. The other neighboring countries in the region include Bangladesh, India and Pakistan.

Material and methods:

We did a literature search on the available data for DBS amenable movement disorders in the Middle East and into the current efforts to introduce DBS in the region. This was followed by an analysis of the challenges that should be anticipated in its implementation with possible solutions and ideas.

Results:

Available data on incidence and prevalence of movement disorders in the Middle East is old, inconclusive and conflicting. We identify key areas such as cultural background, availability of accessible information, training, infrastructure and public support groups in the region that may pose challenges.

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