SunKrist Publishing
Accelerate Scientific Knowledge in Open Access

SunKrist Journal of Neonatology and Pediatrics

Research Article *Volume: 1, Issue: 1* *Scientific Knowledge*

Scientific Publication Productivity and Research Activities of Iraqi Pediatricians in the Field of Pediatric Nephrology: A Bibliometric Analysis

Al-Mosawi AJ[1,2*]

[1]Department of Pediatrics and Pediatric Psychiatry, Children Teaching Hospital of Baghdad Medical City, Iraq

[2]Head, Iraq Headquarter of Copernicus Scientists International Panel, Iraq

1. Abstract

Background: Bibliometrics is increasingly used to assess the quantity and quality of scientific research output in many research fields throughout the world. This study aims to update Iraqi pediatricians' research productivity in the field of nephrology using bibliometric methods and analysis of the contribution of Iraqi pediatricians to the field of pediatric nephrology literature.

Methods: Papers published by Iraqi pediatricians' in the field of pediatric nephrology were retrieved from "Web of Science" and "PubMed". The number and types of papers and author's h-index (Hirsch index) were analyzed. Papers published by researchers other than pediatricians such urologic surgeons and basic sciences researchers were not included in this study.

Results: A total of 53 papers were found published in a total of 11 journals including Pediatric Nephrology, Therapy (Clinical practice), Journal of Tropical Pediatrics, Journal of Nephrology and Renal Transplantation, Urology, Clin Exp Nephrol, American Journal of Medical Genetics A, The Open Urology and Nephrology Journal and Acta Paediatrica, Archives of Disease in Childhood and Saudi Journal of Kidney Disease and Transplantation. The vast majority of papers, 49 (92.4 %) were published by Aamir Jalal Al-Mosawi. Only four our papers [Etiological and clinical patterns of childhood urolithiasis in Iraq (2005). Profile of renal diseases in Iraqi children: A single-center report (2015), Hypertension in hemodialyzed children (2016), The predictive factors for relapses in children with steroid-sensitive nephrotic syndrome (2016)] were published by authors other than Aamir Jalal Al-Mosawi and was carefully examined and found to include unreliable, non-authentic and largely misleading information.

The work of Aamir Jalal Al-Mosawi represented the authentic reliable source about childhood renal disorders in Iraq.

The work of Aamir Jalal Al-Mosawi provided a comprehensive knowledge about childhood renal disorders in Iraqi children. The papers of Aamir Jalal Al-Mosawi included 12 research papers, 2 case report, one case series, three review articles and at least 31 conferences' abstracts.

Conclusion: Aamir Jalal Al-Mosawi is perfectly regarded as the undisputable pioneer of pediatric

***Corresponding author:** Al-Mosawi AJ, Department of Pediatrics and Pediatric Psychiatry, Children Teaching Hospital of Baghdad Medical City, Iraq, E-mail: almosawiAJ@yahoo.com

Received Date: August 28, 2019; **Accepted Date:** September 25, 2019; **Published Date:** September 27, 2019

nephrology in Iraq.

2. Introduction

The papers of Aamir Jalal Al-Mosawi included descriptions of the patterns of various childhood disorders including acute glomerulonephritis [1], chronic renal failure [2-6], renal tubular disorders including nephropathic cystinosis [7-14], oculo-cerebro-renal syndrome [15-17], Hinman syndrome [18,19].

He described the challenges in the treatment of chronic renal failure in Iraq and in the developing world [20-22].

Aamir Al-Mosawi described a new model for the management of chronic renal failure [21-34] and reported six-year dialysis freedom in a girl with end-stage renal disease [25,29,35]. This new model has become increasingly known as dietary on intestinal dialysis [36-38].

Aamir Al-Mosawi also described a new conservative management for childhood urolithiasis [39,40] and also a new therapeutic approach for the treatment of refractory vitamin D-resistant rickets [7].

He also described ocular abnormalities in childhood chronic renal failure [41,42] and reported the association of renal agenesis with Coffin Siris syndrome [43-46].

Aamir Al-Mosawi described the new association of idiopathic hyperuricosuria, hypercalciuria and infantile renal stone disease and suggested a therapeutic approach for its treatment [8].

Aamir Al-Mosawi currently is the Iraqi pediatrician and hospital-based clinician with the highest H-index in Scopus and Publons [47,48].

3. Discussion

In Iraq, the highest professional certificate in pediatrics is received after four years of training as a pediatric resident with increasing responsibility. By the end of the first year of training, there is a written exam (Part I Exam). During the third and fourth years of training, a clinical research should be made and submitted as thesis to complete the fulfillment of the highest professional certificate and make the candidate eligible to take the final clinical and written exams [49,50].

Although the highest professional certificate is like the board certificates in North America, the inclusion of a mandatory thesis requirement, make the highest certificate, a doctoral certificate that is associated with a Ph.D. degree or it is equivalent to the Ph.D. degree for the academic purposes [49].

During the third and fourth years of his pediatric training, Aamir Al-Mosawi made a research entitled "The pattern of acute glomerulonephritis in Iraqi children". The thesis has been awarded an Excellent evaluation by the examining committee and after the final and written and clinical exams, he ranked the first among all the physicians who received the highest professional certificate in pediatrics in my country that year. When he received the highest professional certificate in pediatrics, the body granting the certificates was called "The Iraqi Council of Medical Specialization", but it is later called "The Iraqi Board of Medical Specialization" [49,50].

The thesis was published in Pediatric Nephrology, Journal of the International Pediatric Nephrology Association [1].

Because Aamir Al-Mosawi ranked the first among all the physicians who received the highest professional certificate in pediatrics in my country, he had the opportunity to keep working in the same training center "The University Hospital in Al-Kadhimiyia" as a consultant pediatrician (a specialist pediatrician with the highest professional certificate). As the doctoral thesis of Aamir Al-Mosawi was about childhood renal disorders, he established the first pediatric nephrology clinic in the country which was opened once weekly and shortly he established a ward for childhood renal disorders in the department of pediatrics in the hospital [49].

As consultant pediatrician in the consultation clinics of general pediatric and pediatric nephrology, Aamir Al-Mosawi adopted the practices of evidence-based

medicine to deal with the therapeutic challenges and improve the patients care. He tried to share his early experiences in the practice of evidence-based medicine with world scientific leaders in the fields of pediatrics [49].

Therefore, he wrote to Ira Greifer (Figure 1), a pioneer of pediatric nephrology who was the secretary general of the International Association of Pediatric Nephrology during that time.

Figure 1: A sketch of Ira Greifer, a pioneer of pediatric nephrology.

It was not long time when Aamir Al-Mosawi received a reply from Ira Griefer. He wrote "I was very pleased to receive your letter and know that you are working very hard to bring the benefit of modern knowledge, techniques and treatment to children in your country with Kidney and Urologic problems." Figures 2A and B show the 2-page letter of Ira Greifer.

INTERNATIONAL PEDIATRIC NEPHROLOGY ASSOCIATION

August 15, 2000

Dr. Aamir Jalal
Univ. Hosp. of Saddams
College of Medicine
(Al-Kadhimiyia Teaching Hosp.)
Dept. of Pediatrics - 5th Fl.
Al-Kadhimiyia - Baghdad
Iraq

Dear Dr.

I was very pleased to receive your letter and know that you are working very hard to bring the benefit of modern knowledge, techniques and treatment to children in your country with Kidney and Urologic problems.

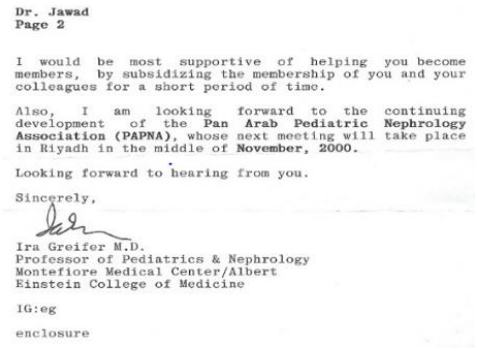
As you stated, it is most difficult to treat children exactly the way one wishes in many countries of the world because of lack of national resources, and I was glad to learn how hard you work at bringing this possibility to all the children.

I was most fascinated by your use of gum Arabic in children with chronic renal failure, in an attempt to promote a low protein diet. With this experience and your general experience with acute glomerular nephritis in Iraqi children, should be considered for publication in our Journal **"Pediatric Nephrology"**, if it was presented for review to our editors.

Attached is an application for membership in the **Internationasl Pediatric Nephrology Association**, and also for a subscription to the Journal **"Pediatric Nephrology"**, which is published 12 times a year.

I would be interested to know if there is a Pediatric Nephrology Club or working group in your country, and could you possibly be in touch with those colleagues who are considered Pediatric Nephrologists in your country, so as to make them members of this International Society, receive the Journal and be up-to-date on the latest approaches to the problems in Kidney and Urologic Disease of children and adolescents.

Figure 2A: The 2-page letter of Ira Greifer.



Dr. Jawad
Page 2

I would be most supportive of helping you become members, by subsidizing the membership of you and your colleagues for a short period of time.

Also, I am looking forward to the continuing development of the **Pan Arab Pediatric Nephrology Association (PAPNA)**, whose next meeting will take place in Riyadh in the middle of **November, 2000.**

Looking forward to hearing from you.

Sincerely,

Ira Greifer M.D.
Professor of Pediatrics & Nephrology
Montefiore Medical Center/Albert
Einstein College of Medicine

IG:eg

enclosure

Figure 2B: The 2-page letter of Ira Greifer.

Ira Greifer also wrote "I was most fascinated by your use of gum Arabic in children with chronic renal failure, in attempt to promote low protein diet. With this experience and your general experience with acute glomerular nephritis in Iraqi children, should be considered for publication in our journal "Pediatric Nephrology", if it was presented for review to our editors."

Ira Griefer also sent an application for membership in the International Pediatric Nephrology Association and Aamir Al-Mosawi soon became a member of the international association [49].

Thereafter, Aamir Al-Mosawi published four researches, including his thesis in Pediatric Nephrology, Journal of the International Pediatric Nephrology Association [1,2,20,23].

The letter of Ira Griefer inspired Aamir Al-Mosawi to document his comprehensive knowledge and experiences in the field of pediatric nephrology and in addition to publishing a paper about the etiology of chronic renal failure in Iraqi children in Pediatric Nephrology, he published a paper about the spectrum of renal tubular disorders in Iraqi children in other journals [7-14,51-54].

References

1. Al-Mosawi AJ. The pattern of acute glomerulonephritis in 47 Iraqi children. Pediatr Nephrol. 2002; 17: 74-75.
2. Al-Mosawi AJ. The etiology of chronic renal failure in 54 Iraqi children. Pediatr Nephrol. 2002; 17: 463-464.

3. Al-Mosawi AJ. Chronic renal failure in Iraqi children: 14-year experience of a single center. J Nephrol Renal Transplant. 2008; 1: 32-40.

4. Al-Mosawi AJ. Renal Failure (CRF): An extra-ordinary experience. Pediatr Nephrol. 2007; 22: 2151-2175.

5. Al-Mosawi AJ. Renal Failure (CRF): An extra-ordinary experience. Pediatr Nephrol. 2008; 20: 1607,1016,1017.

6. AJ Al-Mosawi. Childhood chronic renal failure (CRF): An extraordinary experience. Arch Dis Child. 2008; 93: 384.

7. Al-Mosawi AJ. Experience with refractory vitamin D-resistant rickets and non-17α alkyl testosterone derivative anabolic agent. Therapy. 2005; 2: 91-94.

8. Al-Mosawi AJ. Idiopathic hyperuricosuria, hypercalciuria and infantile renal stone disease: new association and therapeutic approach. Therapy. 2006: 3: 755-757.

9. AJ Al-Mosawi. The incidence of urolithiasis in childhood renal tubular disorders and hyperoxaluria. Pediatr Nephrol. 2006; 21: 1557.

10. Al-Mosawi AJ. The Spectrum of renal tubular disorders in Iraqi children. Pediatr Nephrol. 2007; 22: 1401-1650.

11. Al-Mosawi AJ. A Beneficial effect of acacia gum in a patient with nephropathic cystinosis and chronic renal failure. Pediatr Nephrol. 2007; 22: 1401-1650.

12. Al-Mosawi AJ. Urolithiasis in renal tubular disorders. Pediatr Nephrol. 2008; 2: 1616.

13. AJ Al-Mosawi. A beneficial effect of acacia gum in a patient with nephropathic cystinosis and chronic renal failure. Arch Dis Child. 2008; 93: 410.

14. AJ Al-Mosawi. Urolithiasis in renal tubular disorders. Arch Dis Child. 2008; 93: 464.

15. Al-Mosawi AJ. Oculo-cerebro-renal syndrome phenotype in four Iraqi children. J Pediatr Neurol. 2007; 5: 75-78.

16. AJ Al-Mosawi. Early onset end-stage renal failure in Oculo-cerebro-renal syndrome phenotype: novel occurrence. Pediatr Nephrol 2006; 21: 1570.

17. AJ Al-Mosawi. Early onset end-stage renal failure in Oculo-cerebro-renal phenotype: novel occurrence. Europ J Pediatr. 2006; 165: 1-389.

18. Al-Mosawi AJ. Identification of nonneurogenic neurogenic bladder in infants. Urol. 2007; 70: 356-357.

19. AJ Al-Mosawi. Vesico-cutaneous fistula complicating non-neurogenic neuropathic bladder dysfunction. Acta Paediatr. 2008; 97: 219.

20. Al-Mosawi AJ. The challenge of chronic renal failure in the developing world: possible use of acacia gum. Pediatr Nephrol. 2002; 17: 390-391.

21. Al-Mosawi AJ. Continuous renal replacement in the developing world: Is there any alternative. Therapy. 2006: 3: 265-272.

22. AJ Al-Mosawi. Continuous renal replacement (CRRT) in the developing world: Is there any alternative? Pediatr Nephrol. 2006; 21: 452.

23. Al-Mosawi AJ. Acacia gum supplementation of a low-protein diet in children with end-stage renal disease. Pediatr Nephrol. 2004; 19: 1156-1159.

24. Al-Mosawi AJ. The use of acacia gum in end stage renal failure. J Trop Pediatr. 2007; 53: 362-365.

25. Al-Mosawi AJ. Six-year dialysis freedom in end-stage renal disease. Clin Exp Nephrol. 2009; 13: 494-500.

26. AJ Al-Mosawi. Comprehensive conservative management of ESRF: three-year dialysis freedom. Pediatr Nephrol. 2006; 21: 1600-1601.

27. Al Mosawi AJ. A comprehensive conservative management for end-stage renal failure. Europ J Pediatr. 2006; 165: 1-389.

28. Al-Mosawi AJ. Urea lowering effect of acacia gum supplementation of low protein diet in patients with symptomatic uremia. J Renal Nutrition. 2008; 18: S48.

29. Al Mosawi AJ. A new dietary therapy: Six year-dialysis freedom in End-stage renal disease. J Renal Nutrition. 2008; 18: 3.

30. Al-Mosawi AJ. The current situation of Pediatric Nephrology in Iraq. Pediatr Nephrol. 2010; 25: 1861.

31. Al-Mosawi AJ. A new model for the management of end-stage renal disease. Pediatr Nephrol. 2010; 25: 1862.

32. Al-Mosawi AJ. Urea lowering effect of acacia gum supplementation of low protein diet in patients with symptomatic uremia.

33. Al-Mosawi AJ. Session Speaker New Therapy for End–Stage Renal Disease.

34. Al-Mosawi AJ. The use of safe urea lowering agent in patients with symptomatic uremia.

35. Al Mosawi AJ. Six year-dialysis freedom in end-stage renal disease. Arch Dis Child. 2008; 93: 465.

36. Only medical talks website.

37. Al-Mosawi AJ. Intestinal dialysis: A new therapy for chronic renal failure. 1st ed. Saarbrücken; LAP Lambert Academic Publishing: 2011.

38. Al-Mosawi AJ. Advances of peritoneal dialysis in the developing world: Combined intermittent peritoneal dialysis and intestinal dialysis, In 1st ed, Peritoneal Dialysis: Practices, Complications and Outcomes, 2017.

39. Al-Mosawi AJ. A possible role of essential oil terpenes in the management of childhood urolithiasis. Therapy. 2005; 2: 243-247.

40. Al-Mosawi AJ. Essential Oil Terpenes: Adjunctive role in the management of childhood urolithiasis. J Med Food. 2010; 13: 247-250.

41. Al-Mosawi AJ. The pattern of ocular abnormalities in childhood chronic renal failure. The Open Urol Nephrol J. 2010; 3: 1-3.

42. Al-Mosawi AJ. The Incidence of ocular abnormalities in childhood chronic renal failure. Pediatr Nephrol. 2007; 22: 1401-1650.

43. Al-Mosawi AJ. Genetic drift. Letter from Baghdad: Coffin-Siris syndrome in a girl with absent kidney. Am J Med Genet A. 2006; 140: 1789-1790.

44. Al-Mosawi AJ. Unilateral renal agenesis associated with 76th case of coffin-Siris syndrome in the world. Europ J Pediatr. 2006; 165: 1-389.

45. Al-Mosawi AJ. The incidence of ocular abnormalities in childhood chronic renal failure. Arch Dis Child. 2008; 93: 465.

46. Al-Mosawi AJ. Ocular abnormalities in childhood chronic renal failure. Pediatr Nephrol. 2010; 25: 1861.

47. Scopus preview. Aamir Jalal Al-Mosawi.

48. Publons. Profile of 'Aamir Jalal Al-Mosawi".

49. Pubfacts. Profile of 'Aamir Jalal Al-Mosawi", Biography PDF.

50. Web Site of the Iraqi Board of Medical Specialization. Pediatrics graduate list.

51. Al-Mosawi AJ. The conservative management of non-terminal chronic renal failure (Clinical practice). Therapy. 2006; 3: 305-306.

52. Al-Mosawi AJ. Principles: clinical pathophysiology of uremia and relevant urea metabolism. Therapy. 2006; 3: 303-304.

53. AJ Al-Mosawi. Unilateral renal agenesis associated with the 76th case of Coffin Siris syndrome in the world. Pediatr Nephrol. 2006; 21: 1564.

54. Al-Mosawi AJ. Pediatric nephrology in Iraq: report of the Iraqi society of pediatric nephrology. Pediatr Nephrol. 2008; 20: 1607,1016,1017.

Citation: Al-Mosawi AJ. Scientific Publication Productivity and Research Activities of Iraqi Pediatricians in the Field of Pediatric Nephrology: A Bibliometric Analysis. SunKrist J Neonat Pediatr. 2019; 1: 1004.