

**Date: 23 October 2018**

**To whom my concern**

The head of the Obstetrics and Gynecology departments of Ahmadi hospital and West Kazakhstan State Medical University (WKSMU) approved the conduction of the prospective study entitled; **Protein/Creatinine ratio versus 24-Hour urine protein in preeclampsia** under supervision of *Professor Ibrahim A. Abdelazim* in Ahmadi hospital and *Professor Svetlana Shikanova* in WKSMU hospital.

The study will be conducted during the period from December 2018 till December 2019 after informed consent from the studied women.

The study will include women between 20-40 years old, diagnosed as preeclampsia and admitted for control of blood pressure and investigations after 20 weeks' gestation after informed consent.

Exclusion criteria includes; women > 40 years, women with chronic hypertension, gestational hypertension (without proteinuria), diabetes, pre-existing chronic renal disease or urinary tract infections, refused to participate and/or refused to give consent.

In addition; women with bacteria on urine microscopy or premature rupture of membranes and women with more than 24 hours' bed rest (due to the effect of postural proteinuria on spot urine-protein excretion) will be excluded from the study.

A complete obstetrical history, clinical examination and laboratory investigations will be done to the studied women to exclude the conditions affecting urinary protein/creatinine (P/C) ratio (as chronic renal disease). The studied women will be admitted for moderate 24 hours bed rest, control of blood pressure and for the 24-hour urine collection for assessment of proteinuria, which started on the morning following the hospitalization. Spot mid-stream urine specimens (first morning urine sample) for measuring P/C ratio will be obtained shortly before the 24-hour urine collection.

Collected data at the end of the study will be statistically analyzed to evaluate the accuracy of protein to creatinine ratio (P/C) versus 24-hour urine collection in detection of remarkable proteinuria in preeclampsia.

**Ibrahim A. Abdelazim**

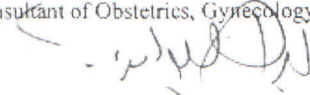
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