

The Utilization of Accelerators to Analyze Some Human Hard Tissues from Sudan

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ABSTRACT

This study deals with an overview of the bio-medical projects performed at iThemba LABS, particularly in relation to the spatial distribution of trace metals in hard human tissues from disadvantaged Sudanese communities, such as kidney stone concretions, teeth and hair, undertaken at the iThemba LABS Nuclear Microprobe (NMP) facility. Relevant information about the ion beam techniques used for material characterization was discussed. The Particle Induced X-ray Emission (PIXE) technique was used to investigate the elemental composition of human hard tissues on a microscopic scale with the elemental mapping; complementary ion beam techniques are used to provide information on the major and minor components. Analysis of teeth sections by μ -PIXE showed that the levels of trace elements were enriched and/or depleted, this may associated with leaching and/or erosive processes. On the other hand the characterization of kidney stone concretions by μ -PIXE showed a marked difference of individuals from different region within Sudan.

Keywords: Nuclear Microprobe; Hard Tissues; PIXE

1. Introduction

Sudan lies within the tropics, the climate ranges from arid in the north to tropical wet-and-dry in the far south-west. Temperatures do not vary greatly with the season at any location; the most significant climatic variables are rainfall and the length of the dry season. Temperatures are highest at the end of the dry season when cloudless skies and dry air allow them to soar. In Khartoum the average is 21°C in January [1,2]. This study is a screening result of these differences in tropical climate environments, food availability, regional food habits and traditions of selected communities.

The present study concentrates on the determination of trace elements (TE) in human kidney stones, teeth and hair by nuclear microprobe (NMP) [3-5]. Interest was focused on determining levels of variability in elemental concentration of Ca and TE throughout selected micro-regions of two sets of kidney stones and another two set

of teeth as well as a set of hair samples from different geographical disadvantaged communities in Sudan where the nutritional value of the daily diet is poor. The emphasis was on a comparison of regions in terms of their elemental profile content by region and to establish if a general trend in terms of elemental variability could be established based on data obtained from microanalysis by PIXE. The objective of this study to assess the concentration profiles of light elements and metals in the tooth enamel surface, kidney stones and hair by nuclear microprobe due to differences in food availability, climate, as well as regional food habits and traditions result in considerable regional variation in food consumption patterns in Sudan and similar tropical climate environments. However this work is one of the applications of the Ion beam analysis (IBA) is the most sophisticated and complete of material analysis techniques. It is based on the use of beams of particles obtained by accelerators to bombard the objects to be analysed. Particular technique used here was the Particle Induced X-ray Emission

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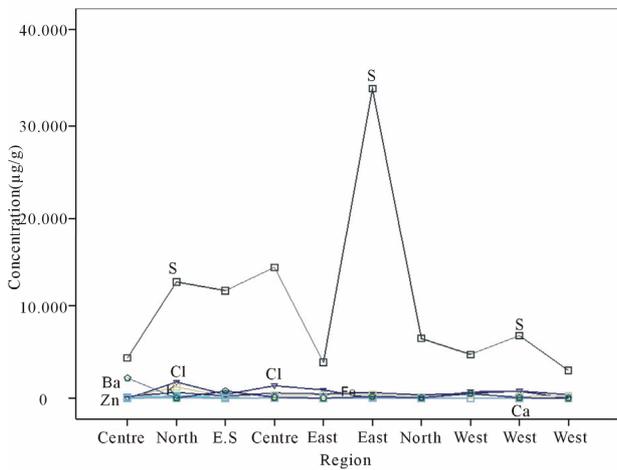


Figure 3. SPSS hair analysis plot of elemental concentrations for all over Sudanese regions.

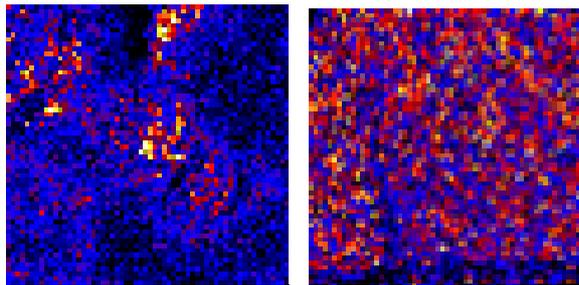


Figure 4. Maps of S concentration for kidneys samples related to two different regions (East region left and centre region right).

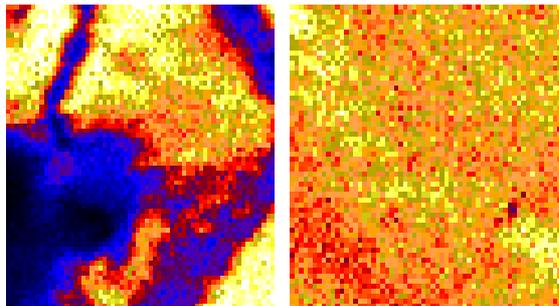


Figure 5. Maps of Ca concentration for teeth related to two different regions (East region left and centre region right).

in case of renal concretions. Their concentration levels are shown in Table 1. In general, the spatial distribution of Ca in most stones was non-uniform. μ -PIXE results were aimed at the spatial distribution of TE, particularly, Fe, Zn and Sr for both regions. In (Tables 1,2) there are variations of elemental concentrations, depletion of some of these such as Zn and Ni, but the low concentration of Fe this of course due to the nutritional anemia which is among the ten major causes for hospital admission in Sudan. However, nationally representative data on iron deficiency are limited in the country. In 1995, the pre-

Table 1. Selected trace elemental concentrations of the kidney stones as determined by μ -PIXE in $\mu\text{g.g}^{-1}$. G and S represent two different Sudanese regions; M: Male, F: Female.

Sex	Region		S	Cl	Ca	Mn	Fe	Sr
M	G	Mean	2816.0	1560.3	72193.7	111.7	128.3	285.3
		Std. Dev.	649.9	323.2	113726.6	100.8	114.3	272.6
		Rel. err.	375.2	186.6	65660.1	58.2	66.0	157.4
F	G	Mean	663.0	490.5	18623.8	76.5	25.5	423.8
		Std. Dev.	524.5	310.0	23867.1	96.3	51.0	610.2
		Rel. err.	262.3	155.0	11933.5	48.2	25.5	305.1
M	S	Mean	393.6	567.6	56545.0	191.2	314.0	26430.4
		Std. Dev.	320.2	551.9	84172.5	427.5	627.9	55548.0
		Rel. err.	143.2	246.8	37643.1	191.2	280.8	24841.8
F	S	Mean	614.0	118.0	1755.0	0.0	20.0	0.0
		Std. Dev.	0.0*	0.0	0.0	0.0	0.0	0.0
		Rel. err.	0.0	0.0	0.0	0.0	0.0	0.0

Table 2. Selected trace elemental concentrations of teeth determined by μ -PIXE in $\mu\text{g.g}^{-1}$ representing two different Sudanese regions, K1 (North of Sudan) and K2 (Centre of Sudan). M: Male, F: Female. Elements of zero concentrations means they are under the detection limit of the Nuclear Microprobe system (NMP).

Sex	Region		K	Ca	Mn	Fe	Zn
M	K1	Mean	1048	1E + 05	157.0	177.7	227.7
		Std. Dev.	519.2	92878	235.10	117.1	174.8
		Rel. err.	259.6	46439	117.5	58.5	87.40
F	K2	Mean	2773	2E + 05	444.2	102	107.5
		Std. Dev.	3830	1E + 05	298.7	80.5	88.2
		Rel. err.	1915	53667	149.3	40.2	44.1
M	K1	Mean	685.1	1E + 05	379.4	104.1	171.8
		Std. Dev.	405.8	96335	319.4	44.8	223.3
		Rel. err.	153.4	36411	120.7	16.9	84.4
F	K2	Mean	1537	2E + 05	36.6	205.3	80.6
		Std. Dev.	602	1E + 05	63.5	62.2	139.7
		Rel. err.	347.6	62622	36.6	35.9	80.6

valence of anemia (defined as hemoglobin < 11.0 g/dL) in children under five years was very high. Almost all of the regions surveyed showed more than 80% of children were anemic. In Khartoum the prevalence was the lowest but affected almost one third of children [16]. In 2004, in the crisis-affected population of Darfur, the prevalence of anemia was 55%. Severe anemia affected more than 1% of children. Nationally representative data on iron deficiency is limited in the country. In 1995, the prevalence of anemia (defined as hemoglobin < 11.0 g/dL) in children under five years was very high, and in almost all states surveyed, more than 80% of children were anemic [16]. High concentration levels of Ca in some of

the regions due to the diet way from region to region.

4. Conclusion

Accelerator energy of 3 MeV has been successfully used for the analysis of this disadvantaged communities, it is due to differences in food availability, climate as well as regional food habits in Sudan. The μ -PIXE analysis result showed marked differences between different regions in elemental concentration. **Figure 4** are selected maps from east and centre which showed great differences in elemental mapping between the two regions for the elements S in kidney stones, Ca in teeth and K in hair the difference here due to many factors such as diet, food consumption patterns, water and the environment. Information on the major components showed marked differences due. On the other hand quantitative μ -PIXE results showed a significant depletion and/or increase in some trace elements, particularly Fe, Ni, Cu, Zn and Sr for most of the samples in all regions this including (stones, teeth and hair). In case of depletion of Fe as mentioned by the report of FAO this is due to the deficiency of Fe in most of the Sudanese regions. In relation to the study of teeth, the main conclusion is that in spite of the high variability of the trace elements concentration, the mean values appear to be smaller and different for all (male, female).

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