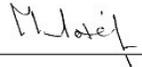


**Informed consent statement: All study participants or their legal guardian provided informed written consent about personal and medical data collection prior to study enrolment.**

**corresponding author:**

Name: Mohamed E Abd Ellatif

Signature:  Date: 15/10/2015

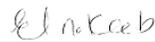
Name: Haitham Alfalah

Signature:  Date: 15/10/2015

Name: waleed asker

Signature:  Date: 15/10/2015

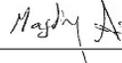
Name: ayman elnaakeeb

Signature:  Date: 15/10/2015

Name: ashraf shoma

Signature:  Date: 15/10/2015

Name: alaa magdy

Signature:  Date: 15/10/2015

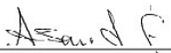
Name: ibraheim dawoud

Signature:  Date: 15/10/2015

Name: rania shahin

Signature:  Date: 15/10/2015

Name: asaad salama

Signature:  Date: 15/10/2015

Name: emad abdallah

Signature:  Date: 15/10/2015

Name: Mohamed A. Gieth

Signature:  Date: 15/10/2015

Name: Waleed Thabet

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Name: Maged Gamal Ali

Signature:  Date: 15/10/2015