CONCLUSION
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At the end it is being concluded that:

1. Amongst the finger print patterns, the whorl figured predominantly in cases of bronchial asthma.
2. The predominance of whorl pattern on thumb in patients of bronchial asthma is significant as it observed in 80% of the cases.
3. Significantly low incidence of loop pattern on thumb and index finger of right hand in bronchial asthma patients.
4. In cases of bronchial asthma the std angle was significant.
5. The total finger ridge count and absolute finger ridge count was significantly higher in bronchial asthma.
6. In the asthmatic bronchitis patients, the incidence of loop pattern was highest.
7. The total finger ridge count was significantly higher in cases of bronchiolitis.
8. The absolute finger ridge count was significantly higher in patients of bronchiolitis.
9. The std angle was appreciably wide in cases of bronchial asthma and asthmatic bronchitis.