



Advanced Stem Cell & Regenerative Medicine

December 03-04, 2018 | Valencia, Spain

Advanced Stem Cell 2018



Sessions

Stem Cell Therapy | Stem Cells in Cancer | Tissue Regeneration | Regenerative Medicine and Nanotechnology | Stem Cell Based Disease Modelling and Drug Discovery | Stem Cell Product Development & Commercialization

Session Chair Reem Alkharji Prince Sultan Military Medical City, Saudi Arabia

Session Introduction

 Title: Mesenchymal Stem Cell Labelling Using Magnetic Particles For In Vetro Applications Reem Alkharji, Prince Sultan Military Medical City, Saudi Arabia
Title: Review On Chemical Generated Pluripotency Of Stem Cells And Its Applications Ila Tewari, University of Malta, Italy
Title: Genetically Modified Stem cell Therapy Reem Alkharji, Prince Sultan Military Medical City, Saudi Arabia

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Reem Alkharji et al., J Stem Cell Biol Transplant 2018, Volume 2 DOI: 10.21767/2575-7725-C1-002

Mesenchymal stem cell labelling using magnetic particles for in vitro applications

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Cell-based therapy is not a new concept; it is considered as one of the most promising approaches for treating diseases and for regenerative medicine. In addition, effective cell therapy can greatly benefit from the ability to monitor transplanted stem cells post-intervention. Mesenchymal stem cells (MSCs) represent one of the leading candidate population for regenerative medicine. Superparamagnetic iron oxide nanoparticles (SPIONs) represent contrast agents offering a possible way to track labelled cells after administration using MRI. Moreover, we have demonstrated that these magnetic particles (MPs) do not affect cell viability, proliferation, differentiation or migration. The aim of the present study is to determine the ability to use these iron particles to label MSCs and test their potential to control cell migration when exposed to a magnet. This aim was achieved by culturing labelled and unlabelled cells in 2D and 3D models in presence or absence of magnet. Significant response to magnet exposure was observed in 2D culture where 76% of labelled cells moved to the magnet side when compared to unlabelled cells. There was

only 45% of unlabelled cells found to have moved to the magnet side. Additionally, 64% of labelled cells moved to the magnet side in a 3D culture model, while the unlabelled cells showed around 50% cells moving to the magnet side. Briefly, we have shown that MSCs can be labelled with MPs in vitro, and this strategy can contribute in improving the spatial tracking of transplanted stem cell and therefore improve their efficiency for therapeutic applications.

Biography

Reem Alkharji is a Senior Medical Laboratory Specialist; has completed her Bachelor's Degree in Clinical Laboratory Sciences. She supported her laboratory work experiences in the hospital with two masters degree; Master's in Health and Hospital Administration and Master's in Stem Cell Technology. Stem cell research is her passion to improve patients' life. She believes that some waste in the medical field (as umbilical cord blood) could be changed to worth products and the quality of people life improve if provided the right service at the right time.

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Review on chemical generated pluripotency of stem cells and its applications

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urrently, stem cells and their applications in the clinic Chas triggered a great interest in the field of regenerative medicine. However, there are still many challenges that are awaiting a definitive solution, like scarcity of stem cell availability on a large scale, difficulty in controlling stem cell fate once reintroduced inside the body and their guided delivery to the site of injury. In this regard, recent technological advancements and scientific achievements in cellular reprogramming to produce induced pluripotent stem cells for more readily accessible and versatile cell types are a potentially very important breakthrough. However, the transgenic approach in such reprogramming has raised serious concerns related to safety, efficacy and feasibility of the applications and hence a complementary approach needs to be identified. In this regard, small molecule based reprogramming involving defined signaling pathways and significant epigenetic processes offers

powerful options for guided cellular trans-differentiation, manipulation of cellular fate and speedy reprogramming. This review is intended to discuss the applications of small molecules (pharmaceutical type chemicals) in promoting pluripotency. We also highlight the recent progress in a variety of applications of iPSCs (induced pluripotent stem cells) such as drug screening, disease modelling, toxicity analysis, etc.

Biography

Ila Tewari pursued her Master's Degree as a Microbiologist at Amity University, India. Later on she worked in a stem cell based industry on Autologuous and Allogenic blood transplant XXXXXX and then started working at University of Malta as PhD student as well as Research Support Officer II where, she has continued her research. Currently, she is working in Department of Anatomy, Faculty of Medicine and Surgery at University of Malta.

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Session Chair Kris See Osel Group, Malaysia

Session Introduction

Title:	Therapeutic Consequence of Allogeneic Mesenchymal Stem Cell for Duchenne Muscular Dystrophy- Case Study Kris See, Osel Group, Malaysia
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Atia Attaky, Mataria Teaching Hospital, Egypt

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Ke Shyang See Kris, J Stem Cell Biol Transplant 2018, Volume 2 DOI: 10.21767/2575-7725-C1-002

Therapeutic consequence of allogeneic mesenchymal stem cell for Duchenne muscular dystrophy: case study

Ke Shyang See Kris

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Duchenne muscular dystrophy (DMD) is an inherited disorder caused by mutation in gene that prevents the translation of dystrophin protein, which leads to massive skeletal muscle wasting. Any form of muscular dystrophy is considered as an incurable disease yet there are occupational treatments assisting patients with locomotion strengthening and to further extend the lifespan. Thus, emerging treatment strategy is warranted to improve patients' conditions from DMD. In the present study, we have evaluated the therapeutic outcome of human umbilical cord derived mesenchymal stem cell (hUC-MSC) in patients with DMD. In light of that, we have produced therapeutically safe (chromosomal stability, stable immunophenotyping and mesodermal lineage differentiation ability) hUC-MSCs in our GMP compliance laboratory. Patients (24 and 27 years old) were administrated- intravenous (50X106) + intramuscular (50X106) one single dose of hUC-MSC and followed up for 12 months. Therapeutic efficacy was measured as based on the level of creatinine phosphokinase (CK) in plasma. Both patients were highly responsive to hUC- MSC and the CK level was significantly dropped from 3rd month of post transplantation. After 12 months of post transplantation the CK level was slightly increased in both patients as compared to 6th month. However, the level of CK level was still significantly lower than basal level. In conclusion, one single dose of hUC-MSCs treatment may not be sufficient to give better clinical outcome and also these results suggested that multi-dose of hUC-MSCs may give long term beneficial effects in patients with DMD.

Biography

Ke Shyang See Kris has a keen interest in the research and therapeutics of neuro-trauma, neurodegenerative diseases and genomic medicine. Kris has worked for various medical institutions both in the public and private sectors in the past. In 2011, he won the "People's Choice Award" in neurosurgery conferred by Hospital Sultanah Bahiyah, Kedah, Malaysia. In 2016, he was

awarded "Most Impactful Entrepreneur Award". In 2017, he was awarded KWYP "Dr. Sun Yat-Sen Best Enterprise Award", Malaysia "Top 100 Most Influential Young Entrepreneur" award and during an international symposium organized by Korean College of Radiology, he was awarded the Grand Prix award for Best Photo in people category. In 2017, as Chief Clinical Scientist of Osel Diagnostics Lab, they were awarded "Best Innovative Screening - Blood Based Approach" for innovative genetic screening by Asian Halal Brands Awards making it the first lab in Asean to be conferred the prestigious award. In 2018, Dr. Kris is the scholarship recipient for the prestigious Harvard Medical School South East Asia Medical Leaders program. In the same year, he was awarded The Excellence Achievement Entrepreneurs Award - International Entrepreneurs Business Conference 2018. He is currently serving as the Medical Director of Osel Group, Chief Clinical Scientist of Osel Diagnostics, Clinical Scientist with Auto Stem Laboratories, Visiting Consultant and Research Associate with Niscell Laboratories, Visiting Research Associate with Hygieia Laboratories. In 2017, Dr. Kris was appointed a faculty member of The Frontier Medicine Institute - advocating healthcare innovations and building bridges between education and healthcare, brought about by the Fourth Industrial Revolution. The same year, He was appointed a co-supervisor research project in University Science Malaysia, Penang, for research interests in the "Biological Activities in Durian". Dr. Kris is also the editor-in-chief for The Frontier Medical Journal, an open access peer reviewed journal. Currently he is the founding member and advisor for Wings of Love - a community based not- for-profit mobile clinic, Penang, the medical adviser for Serdang Badminton Club and Penang Badminton Club. He is also the adviser for Kiddo Science JB, where he shares his insights about early childhood education. He is serving as medical advisor for Kopan Free Clinic in Kathmandu, Nepal. Previously, He was serving as the Medical Adviser for Yayasan Medical Foundation. Dr. Kris is instrumental in advocating and setting up "The Tan Hong Mui Scholarship", where he is appointed as one of the panel of judges for selecting deserving students to pursue creative arts industry. Dr. Kris See is immensely passionate about empowering the youth in education and medicine arena. He is frequently invited to give keynote speeches both domestically and internationally. In his free time, he contributes to various charitable organizations both within Malaysia and overseas.

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Addition of lignocaine to platelet rich plasma enhances symptomatic relief in the osteoarthritis of the knee: results from 50 cases

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Introduction: Osteoarthritis is the fourth leading cause of disability. Knee osteoarthritis (OA) accounts for more than 80% of the disease burden. With the increasing life expectancy and changes in lifestyle, the prevalence of osteoarthritis is increasing with 100% increase in prevalence of knee osteoarthritis since the mid-20th century.

Methods: The prospective interventional study involved 50 cases and their functional outcome of platelet rich plasma (PRP) lignocaine mixture in osteoarthritis of the knee were assessed by VAS (Visual Analogue Score) and WOMAC (Western Ontario and McMaster Universities Osteoarthritis Index) score. Patients were administered three doses of intra-articular PRP-Lignocaine mixture and were followed up till six months. The cases of knee OA were radiologically classified by the Kellegren Lawrence Grade, and the functional outcome was assessed by the VAS and WOMAC score on their follow-up visit.

Results: A significant range of change in pre-treatment WOMAC score at 1 week to 6 months, which was 9.85% to 24.84%. Changes in WOMAC score at all the follow up visits were statistically significant (p<0.001). A subsequent decline in pre-treatment VAS score (Pain) was also observed at follow up visits at 1 week (1.15 \pm 0.69; 18.18%), 3 months (2.07 \pm 1.03; 32.63%) and 6 months (2.29 \pm 1.29; 36.14%) respectively. Changes in pre-treatment pain (VAS score) were found to be highly significant at all periods of observation.

Biography

Varun Kumar Agarwal pursued his graduation as an Orthopaedic Surgeon from Indira Gandhi Medical College and Hospital, Shimla, India. He completed his Fellowship training in Spine Surgery from Fribourg, Switzerland and is a AOSpine Fellow - Bombay Hospital, Mumbai, India. Currently, he is working at the Rohilkhand Medical College and Hospital, Bareilly, India.

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Peter Ott, J Stem Cell Biol Transplant 2018, Volume 2 DOI: 10.21767/2575-7725-C1-002

Subclinical atrial fibrillation: diagnosis and therapeutic challenges

Peter Ott

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While clinical atrial fibrillation (AF), is a well-known risk factor for stroke, the therapeutic implications for device detected subclinical atrial fibrillation (SCAF) remain unknown. A review of 950 patients with the implanted loop recorder revealed an incidence of SCAF (> 6 minutes in duration) ranging from 22-34% at 18 months follows up. Most episodes were asymptomatic and brief (<30 minutes). Several studies in patients with implanted pacemaker or ICD showed an incidence of SCAF between 20-50% at 12-18 months follow up. Patients with SCAF had an increase in rates of thrombo-embolic (TE) complications (HR 2-2.5), resulting in an absolute TE risk of 1.0-2.5%/year. The stroke risk was highest in patients with increased CHADS stroke risk score. A recent large trial showed increased stroke rates only in patients with SCAF > 24 hrs duration. In this trial only 25% of SCAF episodes were > 24 hours in duration. Furthermore, in several trials, only 10-20% had SCAF within 30 days prior to the TE event. The remainder had either no SCAF, SCAF > 30 days prior to, or SCAF only after the TE event. In patients with clinical AF, anticoagulation therapy has been shown to reduce the risk of stroke; the benefit/risk ratio is not clear for patients with SCAF. Two studies are currently underway (ARTESIA NCT01938248 – NOAH NCT02618577) randomizing patients with device detected SCAF (> 6 min) to anticoagulation therapy versus placebo or aspirin. At the present time, in light of unproven benefit, yet real bleeding risk, the use of anticoagulation therapy may best be limited to patients with SCAF > 24 hrs episode duration and increased CHADS/CHADSVAS score. Close monitoring for the development of prolonged AF episodes is warranted.

Biography

Peter Ott obtained his medical degree from the University of Heidelberg, Germany. After Internal Medicine residency (Tucson, Arizona), he pursued specialty training in cardiology (Denver, Colorado) and cardiac electrophysiology (Salt Lake City, Utah). Since 1999 he is a leading member of the cardiac electrophysiology section at the Sarver Heart Center, University of Arizona. He has published in numerous reputed, peer-reviewed journals.

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Eugen Varlan, J Stem Cell Biol Transplant 2018, Volume 2 DOI: 10.21767/2575-7725-C1-002

Is Zero-Balance Ultrafiltration an effective clinical method for SIRS prevention during extracorporeal circulation in adults heart diseases correction?

Eugen Varlan

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Background: Ultrafiltration, which is currently considered as a standard method to remove excess water administered during cardiopulmonary bypass (CPB), aims to minimize the adverse effects of hemodilution, such as tissue edema and blood transfusion. Three ultrafiltration techniques can be used before, during and after CPB procedure, including conventional ultrafiltration (CUF), zero-balance ultrafiltration (Z-BUF), and modified ultrafiltration (MUF) at the end of CPB. The aim of study The present abstract attempts to revise efficiency of Z-BUF ultrafiltration method, laboratory results, and clinical impacts.

Material and methods: 92 adults (51 men and 41 women) with acquired heart diseases were undergoing a single cardiac surgical procedure in condition of cardiopulmonary bypass (clamp aortic 89, 9± 38,8 min. and pump 135,14 ± 45,17 min. were divided into 3 groups. 1st group (no ultrafiltration) - 35 patients with classic cardiac surgery, 2nd with use of zero-balance ultrafiltration (ZBUF) group- 39 patients with classic cardiac surgery, and 3rd group ZBUF with miniinvasive cardiac surgery-18 patients. ZBUF was performed by removing in ratio 3 I/m2 ultrafiltrate using a hemoconcentrator with priming volume 133 ml. For myocardial protection was used "Bretschneider" solution or blood cardioplegia with solution St. Thomas II (15 mL/kg) were performed. Patient data was taken before CPB (T1), immediately following CPB (T2), and 12 hours following the procedure (T3). There were no significant differences in diagnoses, clinical status, pump time, aortic cross-clamp time between groups.

Results: Laboratory data demonstrate presence of SIRS in all groups (high levels of leucocytes or monocytes, C reactive protein positive in 10,5% cases of 1st gr,11,2% cases of 2nd gr. and 10,9% in 3rd gr.). The length of mechanical ventilation was statistically lower more in 3rd ZBUF group and in 2nd ZBUF

group than in 1st group (1,4 \pm 0,3 hour (3rd gr.), 2,5 \pm 1,7 hour (2nd) and 3,8 \pm 1,8 hour(3rd),P 0,01). The length of stay in ICU was statistically lower in 2nd ZBUF group (2,2 \pm 1,5 days) versus (3,5 \pm 1,3 days) control group P = 0,03

Conclusions: This study demonstrates that ZBUF ultrafiltration is an efficient method that can be used during CPB in the adults and help to remove significant amounts of body water what seriously impact clinical results. The use of ultrafiltration in our study had no effect on organ dysfunction during the postoperative period and should be used for volemic control in patients who undergo extracorporeal circulation. This result suggests that Z-BUF improves the pulmonary function in this model of severe lung injury and may be an effective tool in attenuating the CPB derived inflammatory process.

Biography

Eugen Varlan was advised as stager reseacher in scientific laboratory of cardiosurgery of Cardiology Institute In 1995 and in few months (november 1995) successfully performed extracorporeal circulation in cardiac surgery operations. During 23 years she performed above 3600 extracorporal circulations in majority cases of pediatric cardiac surgery (radical correction of Tetralogy Fallot, radical correction of Atrioventricular Canal, mitral and tricuspidal annuloplastic, Glenn and Fontan operations with extracorporeal circulation assistance, switch correction of Transposition of Grand vessels, Mustard operation, Norwood corection) and off course assistance at all types of adult operations and ECMO. By my insistence was introduced in practice in Republic of Moldova the method of modified ultrafiltration (can see my publications in" Art of surgery"- journal of Moldavian surgery society). Currently working at "SANADOR" hospital in Bucharest the capital of Romania Republic.

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Psychiatry reconstructed: A developmental contextual approach to resolving psychiatric symptoms

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Statement of the Problem: Contemporary clinical psychiatry as it is practiced today in the United States is overly focused on fast, efficient identifying, labeling (diagnosing) and medicating psychiatric symptoms. These symptoms and corresponding disorders are treated as reified medical conditions divorced from the multifaceted states of existence of the suffers who bear them. This results in high cost marginally effective medication based treatments with too frequent side effect consequences.

Methodology & Theoretical Orientation: My approach is common sense based: The way an individual perceives and understands his symptoms takes precedence during clinical interactions over fitting them into a medical model. Untangling and examining these symptoms psychotherapeutically from a developmental and trauma informed contextual perspective can heal an individual without having to resort to diagnostic labeling. If, after working in therapy to address and resolve causes and conditions, the symptoms still persist, then and only then do we utilize diagnostic labels and corresponding evidence based medical treatments.

Findings: Resolving or addressing past traumas, spiritual, relational, socioeconomic, environmental, and physical health issues often results in lasting symptom improvement or resolution. It also prevents unnecessary diagnostic labeling with corresponding prescribing of medications and associated potential adverse effects.

Conclusion & Significance: Most people upon hearing about or experiencing this approach wonder why it is not practiced more commonly than it is. Unfortunately there are many contributing

factors that drive psychiatrists towards diagnosing and prescribing and away from common sense problem solving. These include pressure and advertising by pharmaceutical companies and the structure of insurance billing.

Recommendations: Reeducate and emphasize the need for our psychiatrists and residents to resolve causes and conditions underlying psychiatric symptoms prior to diagnosing and prescribing to address those symptoms.

Biography

Si Steinberg, MD, is a Double Board Certified Child and Adolescent and Adult Psychiatrist who obtained his medical degree at the University of Michigan Medical School, his internship and residency training at UCLA Neuropsychiatric Institute and his Child Fellowship at Dartmouth Hitchcock Medical Center. He has been in clinical practice for the past 26 years in Idaho and Oregon, USA respectively. He is the Medical Director at Cherry Gulch a Therapeutic Boarding School in Idaho and has also served as an Adjunct Clinical Assistant Professor of Psychiatry at Pacific Northwest University of Health Sciences. His undergraduate study focused on Medical Anthropology at the University of Michigan. This helped him develop an awareness of the deep impact of psychosomatic phenomena in healing and recovery in all areas of medicine. As a result he developed a clinical practice model that aligned with the Independent Living Model of the Disability Movement: The individual; his perceptions and personal interpretations of his life experiences, takes precedence over their medicalization. He uses this model in both community mental health and private practice settings and has been teaching it to his medical and clinical staff and physician assistant, nurse practioner, and medical students as well.

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The comparison of personality traits, selfesteem, sexual harassment in Arabic women with and without sexual aversion and vaginismus

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Background: Female sexual dysfunction (FSD) is often a common problem with significant effects on women's quality of life and leads to disturbance in a women's ability to respond sexually or to experience sexual pleasure and has profound serious impact on a woman's self-esteem and her relationships And leads to a negative impact on the wellbeing of her spouse.

Purpose: The purpose of this study to determine personality characteristics and self-steam and sexual harassment in female with sexual aversion and vaginismus and comparing with healthy women, little studies and data has focused on this area especially in Arabian countries.

Materials & Methods: A cross-sectional research, method was adopted in the present investigation during the year 2018 between January and April including 30 married women who are 19-50 years old live in Saudi Arabia, the study population was recruited among women attending Mutmaena Medical Psychiatric Center in Riyadh city, and we selected women complaining of sexual aversion and other women vaginismus as diagnosed by DSM-IV-TR. We also compared 15 healthy women, after oral consent, all women were available face to face to complete answer Saudi version of the Eysenck Personality Questionnaire (EPQ-R) and Arabic version of the Rosenberg Self-Esteem and Sexual Harassment Experience Questionnaire (SHEQ) and to compare between three groups. Data were analyzed using IBM-SPSS version 21. Statistical significance was set at p<0.05.

Results: A total of 45 female with mean age mean age (mean±22.78±SD1.87) were studied, the most common personality dimension in female with sexual dysfunction is neuroticism and more common in women with vaginismus than

women complaining from sexual aversion which is significantly higher than healthy female And the study showed that sexual harassment common and highly significant in women with sexual dysfunction than healthy women and more common in women complaining from sexual aversion (significant) and unwanted sexual harassment is common in women with aversion than women suffering from vaginismus but sexual coercion is common in women with vaginismus. Low self-esteem was common and significant in women with sexual dysfunction than healthy women and more common in women with vaginismus.

Conclusions: In this research will provide a basic knowledge especially in this area personality characteristics as neuroticism and unwanted sexual harassment, low self-esteem are significant factors.

Biography

Atia Attaky holds an MBBCh Degree and MSc in Neuropsychiatry from Al Azhar University (Egypt). He is currently a PhD Researcher at Maastricht University (The Netherlands) and has his work focused on dyadic sexual dysfunction in Arabic couples. He is considered one of a few Arabic international experts on psychosexual medicine and neuropsychiatry with over 14 years of clinical and research experience. He has published more-reviewed scientific articles on sexuality in Arabian countries. He is considered the first Arabic Neuropsychiatrist to hold European Fellowship in Sexual Medicine (FECSM) and a Diploma in Psychosexual Therapy and Diploma in Sex Addiction (London, UK). He is an Ambassador of the American Sexual Health Association (ASHA) and a Member of- European Society for Sexual Medicine (ESSM); International Society for Sexual Medicine (ISSM) and Middle East Society for Sexual Medicine(MESSM); African Society for Sexual Medicine(ASSM) respectively.

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