

# DAY 2

Scientific Tracks & Abstracts



European Congress on

# Vaccines & Vaccination and Gynecologic Oncology

October 26-27, 2018 | Budapest, Hungary

# DAY 2

October 27, 2018

## Sessions

Gynecologic Oncology | Maternal Fetal Medicine  
| Gynecologic Surgery | Infertility | Gynecologic  
Cancer Prevention and Control | HIV/AIDS Vaccines  
| Vaccines Safety and Efficacy | Veterinary Vaccines

### Session Chair

**Wassil Nowicky**

Nowicky Pharma/ Ukrainian Anti-Cancer Institute, Austria

### *Session Introduction*

- Title: The selective effect of NSC-631570 on women reproductive cancers**  
**Wassil Nowicky**, Nowicky Pharma/ Ukrainian Anti-Cancer Institute, Austria
- Title: Screening for morbid adherent placenta (MAP) in early pregnancy**  
**Jeni Panaiotova**, Harris Birthright Research Centre, UK
- Title: Autologous fat grafting to the post mastectomy irradiated chest wall a way for minimal invasive breast reconstruction: A series of 54 patients**  
**K Razzouk**, Institut du Sein Nice Santa Maria, France
- Title: To evaluate the relation of delayed channel dissolution in oocytes after ICSI with embryo quality and pregnancy rates**  
**Charulata Chatterjee**, Yashoda Fertility and Research Institute, India
- Title: Double homologous IUI with combination of two sperm preparation method to improve pregnancy outcome**  
**Charulata Chatterjee**, Yashoda Fertility and Research Institute, India
- Title: What do Lebanese women know about cervical cancer and Human papillomavirus? A report on awareness levels in urban communities**  
**Jacques Choucair**, Saint Joseph University-Hotel Dieu de France, Lebanon
- Title: Outcome of HIC and ICSI on sibling oocytes for male sub fertility**  
**Charulata Chatterjee**, Yashoda Fertility and Research Institute, India
- Title: HBV infection and ant-HBV vaccination status in the Georgia cohort of HCV-infected patients**  
**George Kamkamidze**, University of Georgia, Georgia

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## THE SELECTIVE EFFECT OF NSC-631570 ON WOMEN REPRODUCTIVE CANCERS

### Wassil Nowicky

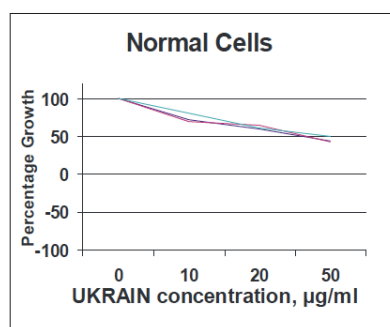
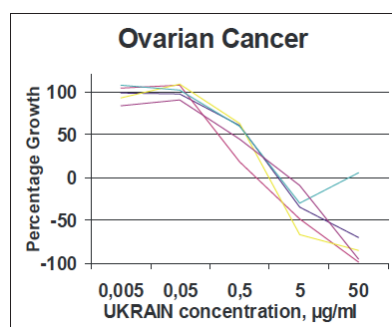
Nowicky Pharma/ Ukrainian Anti-Cancer Institute, Austria

First indications on the selective effect of NSC 631570 on the cancer cells were provided in an early study when different oxygen consumption by normal liver cells and Ehrlich's tumor ascitic cells after the incubation with NSC 631570 was re-vealed. In the tests on the Jurkat lymphoma model, NSC 631570 has been proven to be a strong apoptosis inducer. Profound research showed NSC 631570 brought about the depolarization of mitochondrial membranes and consequently the activation of caspases. NSC 631570 induced apoptosis in a panel of cancer cell lines (ovarial and cervical cancer HeLa, HeKB, HeKS32, HeBcl3, HeNFR and HeIKK, human colon cancer SW480, human renal carcinoma HEK293, human osteosarcoma MG 63) by activating the caspases of the intrinsic cell death pathway. Interestingly, non transformed fibroblasts (hTERT) cell line was insensitive to the drug. In the tests on human ovarian and cervix carcinoma cells HeLa, squamous carcinoma cells WHCO5, normal kidney cell line Graham 293, and transformed kidney cell line Vero from African green monkey, NSC 631570 inhibited the tubulin polymerisation and caused a metaphase block in cancer cells which is characterized by abnormal chromosomal distribution, and results in the formation of micronuclei and in apoptosis.

### Biography

Wassil Nowicky (Dipl Ing, Dr techn, DDD rh c) is the Director of Nowicky Pharma and President of the Ukrainian Anti-Cancer Institute (Vienna, Austria). He has finished his study at the Radiotechnical Faculty of the Technical University of Lviv (Ukraine) with the end of 1955, with graduation to "Diplomingenieur" in 1960 which title was nostrificated in Austria in 1975. He became the very first Scientist in the development of the anticancer protonic therapy and is the Inventor of NSC-631570, the anticancer preparation on basis of celandine alkaloids. He used the factor that cancer cells are more negatively charged than normal cells and invented the celandine alkaloid with a positive charge, thanks to which it accumulates in cancer cells very fast. He is the Author of over 300 scientific articles dedicated to cancer research. He is a real Member of the New York Academy of Sciences, Member of the European Union for applied immunology and of the American Association for scientific progress, honorary Doctor of the Yanka Kupala State University of Grodno, Doctor Honoris Causa of the Open International University for Complementary Medicine in Colombo, Honorary Member of the Austrian Society on the Name of Albert Schweizer. He has received merits of National Guild of the award of Austrian Society of sanitary, hygiene and public health services and others.

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## SCREENING FOR MORBID ADHERENT PLACENTA (MAP) IN EARLY PREGNANCY

**Jeni Panaiotova, Mayumi Tokunaka, Karolina Krajewska, Nurit Zosmer and Kypros H Nicolaides**

Harris Birthright Research Centre, UK

**Objective:** To estimate the diagnostic accuracy of a two-stage strategy for early prediction of morbid adherent placenta (MAP). In the first stage, at 11-13 weeks' gestation women with history of previous uterine surgery and low lying placenta are classified as being at high-risk for MAP and in the second stage, at 12-16 weeks, these high-risk pregnancies are assessed at a specialist MAP clinic.

**Methods:** This was a prospective study in women having an ultrasound scan at 11-13 weeks' gestation as a part of routine pregnancy care. Women with a history of previous uterine surgery and low lying placenta were followed up in a specialist MAP clinic, at 12-16 weeks' gestation, 20-24 weeks and 28-34 weeks. In each visit to the MAP clinic an ultrasound scan was carried out and the following features suggestive of MAP were recorded: non-visible cesarean section scar, bladder wall interruption, thin retroplacental myometrial thickness, presence of intraplacental lacunar spaces, presence of retroplacental arterial-trophoblastic blood flow and irregular placental vascularization demonstrated by 3D Power Doppler.

**Results:** Screening at 11-13 weeks was carried in 22,604 singleton pregnancies and 1,298 (6%) were considered to be at high-risk of MAP because they had previous uterine surgery and low lying placenta. In the MAP clinic at 12-16 weeks, the diagnosis of MAP was suspected in 14 cases and this was confirmed at delivery in 13. In the rest of the population there were no cases of MAP.

**Conclusion:** Accurate prediction of MAP can be achieved by ultrasound examination at 12-16 weeks gestation.

### Biography

Jeni Panaiotova has graduated in medicine and took speciality in Obstetrics and Gynecology in Medical University, Sofia, Bulgaria. During the years, the passion in Fetal medicine, that was rising in her, made her to apply and finish training in Fetal Medicine at Fetal Medicine Foundation, London, United Kingdom. Being part of the FMF team for nearly 4 years and observing how most of the diseases could be predicted as early as first trimester of pregnancy, she and her team decided to start a research of predicting placenta accreta in the first trimester. The aim of their research was to improve the work of obstetricians, dealing with this serious and life threatening obstetric condition, which incidence is rising due to the rising incidence of delivery by Cesarean section worldwide. After four years of hard work, they completed their research and according to the results, they were able to predict placenta accreta. At the present moment, she is working in Nadezhda Women's Health Hospital, Sofia, Bulgaria, as a Consultant in Fetal medicine and Obstetrics.

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# AUTOLOGOUS FAT GRAFTING TO THE POST MASTECTOMY IRRADIATED CHEST WALL A WAY FOR MINIMAL INVASIVE BREAST RECONSTRUCTION: A SÉRIES OF 54 PATIENTS

**K Razzouk**

Institut du Sein Nice Santa Maria, France

**Introduction:** Breast reconstruction after total mastectomy and irradiation is a real challenge for the surgical teams. And is a crucial step for the patient in the life after breast cancer. The effect of radiotherapy on the skin often leads to preferring the reconstructions by flaps. However, a reconstruction by prosthesis carries a high risk of complications and unsatisfactory cosmetic results. The optimization of skin trophicity by lipofilling and its positive impact on the results of secondary prosthetic breast reconstruction led us to perform an autologous fat grafting prior to secondary implant breast reconstruction after mastectomy and radiotherapy.

**Patients & Methods:** All patients were treated at the Nord Artois Breast Institute-France between 2012 and 2015. They all had a total mastectomy and irradiation. They all had one or more sessions of lipofilling prior to breast implant reconstruction. Patients were followed to collect this data: postoperative complications, prosthesis removal, cosmetic result, and tumor recurrences.

**Results:** 54 patients were included. The mean pre-pectoral lipofilling session was 1.1 (1-2). The average volume of fat injected is 150 cc (80-250). The average time between the end of treatment and the first session of lipofilling is 20.4 months (3-60). The mean volume of the prosthesis is 400 cc (290-620). The mean follow-up time is 22 months. No local tumor recurrence was reported. One patient had a cutaneous necrosis after lipofilling. Implant explantation was performed in three cases (5.5%). The mean cosmetic result is 4.7 (3.5-5).

**Conclusions:** Pre-pectoral lipofilling prior to implant breast reconstruction improves the chances of success by optimizing the trophicity of the skin. It significantly reduces the risk of prosthesis explanation.

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# TO EVALUATE THE RELATION OF DELAYED CHANNEL DISSOLUTION IN OOCYTES AFTER ICSI WITH EMBRYO QUALITY AND PREGNANCY RATES

**Charulata Chatterjee and Papolu Rama Devi**Yashoda Fertility and Research Institute, India  
Dr. Rama's Institute for Fertility, India**Objective:** To evaluate the relation of delayed channel dissolution in oocytes after intracytoplasmic sperm injection (ICSI) with embryo quality and pregnancy rates**Design:** Randomized study**Patient(s):** Total of 62 embryo transfers for couples undergoing IVF-ICSI procedure**Main outcome measure(s):** Channel formation and timing of oocyte restoration after ICSI procedure, pronuclear, cleavage stage and pregnancy rate observation.**Methods:** Out of 208 oocytes, 196 metaphase II oocytes were ICS injected. According to oocyte responses like channel shape and timing of restoration after ICSI, division was made in two groups. Group 1 is positive channel formation and normal restoration immediately after ICSI. Group 2 is delayed channel dissolution after ICSI ( $\pm 2$ mins).**Results:** Out of 196 injected oocytes in 127 oocytes channel dissolved immediately whereas in 69 oocytes it was delayed restoration of channel. Fertilization rate between Group 1 and 2 were 84.92%, 68.25% respectively.  $\geq 40\%$  fragmentation is observed in group 2 (20.45%). 9 transfers on day 3 were with the embryos formed by constant channel. Out of 2 pregnancies (22.2%), one resulted in miscarriage. Remaining 53 embryo transfers were from the embryos derived from ICSI procedure where oocytes gained spherical shape immediately after ICSI. 20 (37.73%) resulted positive for pregnancy ( $p=0.3718$ ).**Conclusion:** This small group study suggests oocytes with viscous cytoplasm may result in aneuploid embryos, which may be a reason for miscarriage. Careful observation can help to select good quality embryo.**Biography**

Charulata has completed her PhD and she is senior consultant embryologist at Yashoda Fertility and Research Institute, Hyderabad, India. She has a 18 long years' experience in field of ART. She keeps herself updated with recent advances in ART and regular in writing Abstracts, Posters, Oral paper presentations in national and international forum.

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## DOUBLE HOMOLOGOUS IUI WITH COMBINATION OF TWO SPERM PREPARATION METHOD TO IMPROVE PREGNANCY OUTCOME

**Charulata Chatterjee and Laksmi Krishna Leela**

Yashoda Fertility and Research Institute, India

**Background:** Intra uterine insemination (IUI) is preferred fertility treatment for unexplained and moderate male factor sub fertility. Incorporation of double insemination and two sperm preparation method (double density gradient and swim up) might help to improve outcome.

**Purpose:** This study aims to investigate the single vs. doubles IUI in controlled ovarian hyperstimulation cycle (COH) and to evaluate the effects of combining two methods on improving the efficacy of sperm preparation.

**Design:** Retrospective study

**Setting:** A newly opened private fertility institute

**Patients:** 41 couples undergoing COH for an IUI cycle within three months of institute inauguration.

**Main outcome measure:** The primary outcome measure was clinical pregnancy.

**Methods:** Inclusion criteria for women were age below 35 years with functional fallopian tube/s and no other noted uterine or ovarian abnormalities. Men with post-wash total motile sperm count of at least 10 million were included in the study. All women underwent COH and ovulation tracking was done with ultra sound scan. Inseminations were performed either once or twice depending upon ovulation status or as decided earlier with couples. In case of double IUI density gradient processed sperm were inseminated in pre ovulatory phase and sperms were processed through swim up technique and then inseminated after ovulation.

**Results:** Out of 41, one couple dropped the treatment in between due to personal reason and 22 couple underwent double IUI whereas 18 couple single IUI was done. The overall clinical pregnancy rate was 22.72% and 11.11% ( $p=0.3424$ ) for double vs. single IUI respectively.

**Conclusion:** A combination of two sperm preparation methods resulted in higher recovery rates of mature motile spermatozoa and helped to improve success rate. A large group study is recommended to support this observation.

### Biography

Charulata has completed her PhD and she is senior consultant embryologist at Yashoda Fertility and Research Institute, Hyderabad, India. She has a 18 long years experience in field of ART. She keeps herself updated with recent advances in ART and regular in writing Abstracts, Posters, Oral paper presentations in national and international forum.

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# WHAT DO LEBANESE WOMEN KNOW ABOUT CERVICAL CANCER AND HUMAN PAPILLOMAVIRUS? A REPORT ON AWARENESS LEVELS IN URBAN COMMUNITIES

**J Choucair and S Abboud**

Saint Joseph University-Hotel Dieu de France, Lebanon

**Objectives:** To evaluate the knowledge of adult urban Lebanese women regarding cervical cancer (CC), its symptoms and risk factors and *Human Papillomavirus* (HPV) infection, its diagnostic tests and vaccination. To measure the uptake of the CC screening test (Pap smear) and the uptake of HPV vaccination and to determine the influencing factors.

**Methods:** 444 women aged  $\geq 18$  years previously healthy fill out a 32 item questionnaire about CC and HPV. Data was analyzed in SPSS® v. 21.0.

**Results:** 45.7% aged 18 to 25, were Christian (50.7%), single (49.3%), with high education (73.9%) and currently employed (49.1%) in a field not related to health (84.9%). They did not visit a general physician (64%) or a gynecologist (64.6%) regularly. 85.6% were aware of CC. HPV involvement in the pathogenesis of CC was correctly identified in 53.9%. 35.6% were aware of HPV infection but 80.4% believed they lack information. 37.6% had a Pap smear at least once whereas 9% did not know what a Pap smear was. Screening and regular visits to a physician were significantly associated with CC awareness. Only 11.7% aged 18 to 35 were vaccinated against HPV. Vaccination uptake was significantly associated with CC awareness, religion, field of work and studies, and regular visits to gynecologists.

**Conclusion:** Urban Lebanese women are not well informed in regards to CC and HPV. Screening by Pap smear and HPV vaccination uptakes are non-satisfactory. Further interventions are required in order to improve these numbers.

## Biography

Jacques Choucair is an Infectious Diseases Specialist in Hotel Dieu de France in Beyrouth. He did 2 years Fellowship at Bichat Claude Bernard hospital, University of Paris VII faculty of Medicine and Bacteriology at Broussais Hospital affiliated to University of Paris V, Faculty of Pharmacy. He has a Medical Teaching Diploma from the University of Montreal and published more than 30 articles and is a Reviewer in national and international journals. He is a Member the Lebanese Society of Infectious Diseases, a Member of the Arab association for the proper use of antibiotics, Member of ECMID and the ICID.

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## OUTCOME OF HIC AND ICSI ON SIBLING OOCYTES FOR MALE SUB FERTILITY

### Charulata Chatterjee and Papolu Rama Devi

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Dr. Rama's Institute for Fertility, India

**Objective:** To follow up the outcome of sibling oocytes subjected to high insemination concentration (HIC) and intracytoplasmic sperm injection (ICSI) in the first cycles of male sub fertility with normal sperm morphology  $\leq 4\%$

**Design:** Randomized study

**Patient(s):** 26 couples undergoing first cycle of IVF-ICSI

**Intervention(s):** Performing IVF with HIC and ICSI on sibling oocytes

**Main outcome measure(s):** Fertilization and pregnancy rate

**Result(s):** A controlled comparison between IVF-HIC and ICSI was made for 26 patients with  $\leq 4\%$  normal sperm morphology and  $\geq 10 \times 10^6$  motile spermatozoa per semen preparation. Female partner's age was  $31 \pm 3.1$  and day 3 FSH was  $7.9 \pm 1.1$ . HIC procedure involved insemination under micro droplets with sperm concentration 2-5 fold higher than standard IVF. ICSI was done as per available standard procedure. A total of 316 oocytes were retrieved from 26 pickups. 182 were subjected to ICSI and 143 MII oocytes were micro manipulated and 134 were subjected to HIC. Fertilization rate between ICSI and HIC was 88.8% (127/143) and 80.5% (108/134). The pregnancy rate in the two groups was 44% (6/14) and 41.6% (5/12).

**Conclusion:** The present study offered HIC as an initial form of treatment for male sub fertility, as long as ICSI remains more expensive and required skillful embryologist. However, the use of sibling oocytes for ICSI is recommended, especially in cases with  $< 4\%$  normal sperm morphology.

#### Biography

Charulata has completed her PhD and she is senior consultant embryologist at Yashoda Fertility and Research Institute, Hyderabad, India. She has a 18 long years' experience in field of ART. She keeps herself updated with recent advances in ART and regular in writing Abstracts, Posters, Oral paper presentations in national and international forum.

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