

JOINT EVENT



18th International Conference on
Pediatrics Health

&

2nd Edition of International Conference on
Adolescent Health & Medicine

August 06-07, 2018 Madrid, Spain

Scientific Tracks & Abstracts Day 1

Pediatrics Health 2018 and Adolescent Health 2018

Neonatology and Perinatology | Child Abuse | Pediatric Psychiatry Pediatric Hematology | Pediatric Case Reports

Session Chair

Dmytro Dmytriiev

Vinnitsa National Medical University, Ukraine

Session Co-Chair

Dorit Olenik Shemesh

Open University of Israel, Israel

Session Introduction

Title: Neonatal pain: Assessment and treatment

Dmytro Dmytriiev, Vinnitsa National Medical University, Ukraine

Title: Youth online aggressive behaviors and cyber-victimization as correlated with psycho-social aspects and sense of well-being

Dorit Olenik Shemesh, Open University of Israel, Israel

Title: Obstetric outcomes and antenatal access among adolescent pregnancies in Kwazulu-Natal, South Africa

Poovendhree Reddy, Durban University of Technology, South Africa

Title: An infant with a unilateral facial paralysis caused by infectious mononucleosis

Lama Alghuneim, Ministry of National Guard Health Affairs, Saudi Arabia

Title: Aetiology and clinical features associated with blood culture positivity among neonates with clinical sepsis admitted at Dodoma Regional Referral Hospital, Tanzania

Evaline Maziku, University of Dodoma, Tanzania

Title: The integral role of neurosurgery in managing rare craniofacial anomalies

Hazem A Mostafa, Ain Shams University, Egypt

Title: Alcohol's effect on pregnant mothers: A study

Luckenson Chery, Centro Medico Dominicano Cubano, Dominican Republic

Title: Bacteremia among febrile under five children: Prevalence, etiology, antibiotics susceptibility and factors associated with antibiotic prescriptions in Dodoma, Tanzania

Cecilia Lucas Msafiri, University of Dodoma, Tanzania

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Neonatal pain: Assessment and treatment

Dmytro Dmytriiev

Vinnitsa National Medical University, Ukraine

Effective management of procedural and postoperative pain in neonates is required to minimize acute physiological and behavioral distress and may also improve acute and long-term outcomes. Pain management in the neonatal ICU remains challenging for many clinicians and in many complex care circumstances. Neonates frequently experience pain as a result of diagnostic or therapeutic interventions or as a result of a disease process. Neonates cannot verbalise their pain experience and depend on others to recognise, assess and manage their pain. Neonates may suffer immediate or long-term consequences of unrelieved pain. Accurate assessment of pain is essential to provide adequate management. Observation scales, which include physiological and behavioural responses to pain, are available to aid consistent pain management. Painful stimuli activate nociceptive pathways, from the periphery to the cortex, in neonates and behavioral responses form the basis for validated pain assessment tools. However, there is an increasing awareness of the need to not only reduce acute behavioral responses to pain in neonates, but also to protect the developing nervous system from persistent sensitization of pain pathways and potential damaging effects of altered neural activity on central nervous system development. Analgesic requirements are influenced by age-related changes in both pharmacokinetic and pharmacodynamic response, and increasing data are available to guide safe and effective dosing with opioids and paracetamol. Regional analgesic techniques provide effective perioperative analgesia, but higher complication rates in neonates emphasize the importance of monitoring and choice of the most appropriate drug and dose. There have been significant improvements in the understanding and management of neonatal pain, but additional research evidence will further reduce the need to extrapolate data from older age groups.

Recent Publications

1. Postoperative pain management in children: Guidance from the pain committee of the European Society for Paediatric Anaesthesiology (ESPA Pain Management Ladder Initiative) Paediatric Anaesthesia 2018 | journal-article DOI: 10.1111/pan.13373.

Biography

Dr. Dmytro has completed his PhD at the age of 24 years from Vinnitsa national medical University and postdoctoral studies from Odessa National medical university. Now I am a chief PICU Vinnitsa national medical university and Vinnitsa regional children hospital, a chief – editor Pain Medicine Journal (<http://painmedicine.org.ua>). I have published more than 200 papers (Ukrainian journal) in more 15 reputed journals. ESPA ACORN Member (representative ESPA member –Ukraine). Reviewer US-Medical Science Journal.

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Notes:

18th International Conference on **Pediatrics Health**
&
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Youth online aggressive behaviors and cyber-victimization as correlated with psycho-social aspects and sense of well-being

Dorit Olenik Shemesh
Open University of Israel, Israel

During the last decade, internet and social networks have become an inseparable part of youth lives, providing them with new forms of social space that enables new opportunities for social connections, but at the same time expose youth to aggressive and cyberbullying behaviors and injuries. The current presentation is based on a series of studies conducted during 2010-2017, explored the nature of online harassment and vulnerability among youth, its' expressions, relationships with psycho-social aspects and typical emotional and behavioral reactions, focusing on cyber-victimization. Online harassment and vulnerability, named also cyberbullying, refers to a deliberate aggressive activity that takes place using electronic technology, aimed at harassing others through digital communication means. The unique features offered by the electronic technology communication, such as: anonymity, rapid communication, wide accessibility, online disinhibition effect make cyberbullying have a particularly strong effect on youth' well-being. 1680 adolescents completed questionnaires examining their involvement in online harassment in relation to key socio-psychological variables. One third of the participants reported being cyber-victims (with a significant increase over the years). Significant correlations were found between cyber-victimization and high levels of depressive mood, loneliness, low levels of self-efficacy and self- image and low well-being among youth. Cyber-victims tended to share the harm with close friends, but not with parents. Possibilities for prevention intervention programs will be discussed, focusing on the role of youth bystanders and social support in the social networks environment.

Biography

Dorit Olenik Shemesh completed her PhD at the University of Haifa, Israel. She is a Researcher, Lecturer and Course Coordinator in the Department of Education and Psychology (2006) at the Open University of Israel, Israel. Her main research interests focuses on: the psychology of adolescents (different sectors), especially in the context of emotional abilities, stress encounters and coping, youth at risk, affective and emotional intelligence. In recent years she has been intensively engaged in research and national as well as international projects related to violence and bullying on the internet (Cyberbullying) and youth sense of well being and satisfaction with life indicators.

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Obstetric outcomes and antenatal access among adolescent pregnancies in Kwazulu-Natal, South Africa

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Durban University of Technology, South Africa

South Africa, like many other developed countries, is challenged by the under attendance and delay in initiation of antenatal care (ANC) services among pregnant adolescents. Adolescents are more vulnerable to pregnancy related complications, which may contribute to maternal and child mortality and morbidity. This study aimed at evaluating the under attendance and/or delay in initiation of ANC services among young pregnant adolescents (13-16 years old) as a risk for adverse maternal and birth outcomes. The research was based at a district hospital on the North Coast of Kwazulu-Natal. A retrospective review of all young adolescent (13-16 years old) maternity case records for the period from 2011-2013 was conducted. Data collected included ANC trends in attendance, obstetric and perinatal outcomes. A total of 314 pregnancies were recorded among young adolescents at this single hospital over a period of 3 years. Adolescent pregnancy was associated with a risk of late ANC booking and reduced ANC visits. The prevalence of anaemia (32%) was relatively high among the girls. Fifty percent of all adolescents received episiotomies while, 45 (14%) experienced perineal tears. Logistic regression models found that the condition of perineum was significantly associated with HIV status (OR=0.36; 95% CI=0.16; 0.84; p<0.05). HIV positive mothers were more likely to have an intact perineum post-delivery. However, HIV positive adolescents were twice as likely to be diagnosed with anaemia compared HIV negative mothers (results not significant). Underutilization of ANC (i.e. less than 4 visits) was significantly associated with lower gestational age (<37 weeks) (OR=2.64; 95% CI=1.04; 6.74; p<0.05). Fifteen percent of young mothers delivered early (<37 weeks), 10% delivered babies with a low birth weight (<2500g) and 15% of the neonates suffered fetal distress. Low birth weight, low Apgar scores as well as the incidence of maternal anaemia and pregnancy induced hypertension (PIH) were found to be related to late ANC booking. Qualitative findings highlighted the perceived barriers of ANC by pregnant adolescents. Interviews identified the following as factors that hindered access of care; financial barriers, attitudes of health care workers (HCW), system barriers and fear of HIV testing. Urgent population based strategies are required to encourage timeous initiation of ANC among adolescents. Strengthening of health education programs on the benefits of ANC attendance among adolescents can be utilized as part of an approach to address the current public health concern.

Biography

Prof Poovendhree (Poovie) Reddy (PhD) is a strong advocate for creating a critical and responsible citizenry through education and empowerment. Her achievements in academic management and leadership, teaching and postgraduate supervision bear testimony to her philosophy. She currently holds the position of Senior Lecturer: Programme Environmental Health in the Department of Community Health Studies. Dr Reddy, who is also a HELM LEAD fellow (Higher Education Leadership and Management, HESA), is experienced in curriculum development and coordinates the Postgraduate programme in Environmental Health. She actively mentors and promotes research development within her department and Faculty. Her main areas of interest include public health; genetic epidemiology; epigenetics; maternal and child health; and water management and quality related to health risk assessment. She is a co-leader on the Medical Research Council Flagship project (Maternal Health) and a team member of the Water Research Niche area at DUT. In addition, she is a co-investigator on a collaborative project with UKZN and the University of Michigan which involves genetic epidemiology and epigenetics related to respiratory related outcomes and environmental exposures in the MACE study (Mother and Child Environmental Study). Dr Reddy has 11 peer-reviewed publications in international and national journals, 11 peer-reviewed international conference abstracts and 15 national conference presentations. She serves on the Editorial Board for a national and an international journal and is a solicited reviewer for 5 international journals. She also serves as a member of various professional bodies and committees both externally and within the DUT.

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An infant with a unilateral facial paralysis caused by infectious mononucleosis

Lama Alghuneim

Ministry of National Guard Health Affairs, Saudi Arabia

Introduction: Infectious mononucleosis (IMN) is a disease caused by a viral infection of Epstein-Barr virus (EBV). The disease is known to have various neurological complications such as; seizures, meningoencephalitis, Guillain Barre syndrome and transverse myelitis. One of the rare reported complications is Facial nerve paralysis.

Methods: We report a case of a 28 months old boy who presented with high-grade fever, bilateral asymmetrical neck swelling more on the right side, tonsillar enlargement with exudation and splenomegaly. There were laboratory findings that suggested IMN: leucocytosis ($20.76 \times 10^9/L$), atypical lymphocytes ($2.70 \times 10^9/L$), high AST (184 U/L) and ALT (144 U/L). He was treated supportively pending the results. On Day 3 of his hospital course, the patient developed right facial asymmetry manifested as droopiness of the right side of his mouth and inability to close his right eye. A temporal bone CT revealed the presence of complete fluid opacification of the mastoid air cells and middle ear cavities bilaterally, most likely suggesting acute otitis media.

Results: The lab results showed evidence of Infectious mononucleosis in the form of the following: Epstein-Barr virus (EBV) PCR was positive and the EBV IgM was suggestive of an acute infection (>16). There was also, a House Brackmann grade 5 facial paralysis. The Facial nerve paralysis symptoms improved after he received a five day course of oral prednisolone (2mg/kg/day) that was later tapered off over the next 10 days. After a four week follow up, the patient had significant improvement. There was only a minimal residual of his facial droopiness but he almost regained the ability to close his eye. In the literature, facial paralysis related to IMN is quite rare, with only few reported cases. Therefore, the use of corticosteroids in these cases remains a controversy. However, in our case we found a good outcome after using it.

Conclusion: Facial nerve paralysis is a rare complication of EBV infection, which is rarely seen in infancy but tends to resolve spontaneously in 3-6 month.

Biography

Dr. Lama Alghuneim has completed her medical degree studies at Alfaisal University in Saudi Arabia, Riyadh. She is currently a pediatric resident at National Guard Health Affairs Medical city.

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Aetiology and clinical features associated with blood culture positivity among neonates with clinical sepsis admitted at Dodoma Regional Referral Hospital, Tanzania

Evaline Maziku

University of Dodoma, Tanzania

Background & Objectives: Effective management of neonatal sepsis is essential in reducing mortality and complications due to septicaemia, for which an accurate diagnosis remains challenging in developing countries, due to lack of well-equipped laboratories and resources. This study intended to determine the aetiology and clinical features associated with blood culture positivity, among neonates with clinical sepsis admitted at Dodoma Regional Referral Hospital.

Methods: A cross-sectional study was carried out on 194 neonates admitted with clinical sepsis at Dodoma Regional Referral Hospital, from March to June, 2017. A total of 194 blood samples for culture and sensitivity were taken according to standard aseptic procedures. Clinical and other laboratory data were analysed. Logistic regressions model was used to identify possible clinical features associated with positive blood culture.

Results: Among the 194 study new-borns with clinical neonatal sepsis, 55 (28.40%) had blood culture positive, the most isolates were Coagulase negative Staphylococci n (45.50%). Most isolates were resistant to Ampicillin, whereas most of the isolates had highest sensitivity to Amikacin and Clindamycin. After adjusting for potential confounders, the abdominal distension (AOR 0.263, 95% CI [0.088- 0.787], p <0.001), signs of skin infections (AOR 0.179, 95% CI [0.029-1.124], p < 0.01), umbilical pus discharges (AOR 5.745, 95% CI [1.654-19.957] P<0.001) were independently associated with positive blood culture.

Conclusions: Usage of WHO clinical criteria only for the diagnosis of neonatal sepsis may overestimate the prevalence of neonatal sepsis leading unwarranted use of antibiotics. The study has shown majority of the bacteria isolates in new-born with sepsis are resistant to first line antibiotic. Frequently research will guide the empiric treatment for neonatal sepsis.

Recent Publications

1. Clinical features associated with blood culture positivity among neonates admitted with clinical neonatal sepsis at Dodoma Regional Referral Hospital.

Biography

Evaline Maziku completed her Master of Science in Pediatric Nursing at the age of 42 years from University of Dodoma and Bachelors from St. John's University School of Nursing. She is the coordinator Assistant of Reproductive and Child Health in Dodoma Region and works under ministry of Health. She is expecting to publish her paper in Pediatric infectious disease journals and has been serving as a clinical instructor of University of Dodoma and a board member of Foundation of Childbirth Educators.

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18th International Conference on **Pediatrics Health**
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The integral role of neurosurgery in managing rare craniofacial anomalies

Hazem A Mostafa

Ain Shams University, Egypt

Craniofacial anomalies are rare complex pathologies which needs a craniofacial team composed of neurosurgeon, a craniofacial plastic surgeon, and an ophthalmologist. Anomalies at craniofacial region either due to developmental malformation of the brain (neural tube defects) or the premature closure of cranial or skull base sutures resulting in skull deformities and problems in normal physiological neurological development. Each of pathologies needs special neurological surgery management, sometimes the management is multi-staged. Neurosurgical management varied from diagnosis, the surgical procedures and long-term follow up. Hence, we describe the pathology of craniofacial anomalies and its associated syndromes in addition to the proper investigation needed for diagnoses and predict possible short and long-term complication. Also, what craniofacial anomalies care giver should be focusing on regarding neurological issues such as intra-cranial pressure early detection and treatment if high and optic nerve problems. Also, dural repair, dealing with brain parenchyma and its vasculature, and better cosmetic outcome according to craniofacial metrics.

Biography

Dr. Hazem Ahmed Mostafa, MD., PhD, is an internationally recognized neurosurgeon with over two decades of clinical and research experience. He's affectionately known as Dr Brain and Spine. Dr. Hazem Ahmed Mostafa MD., Ph.D, is a professor in the Department of Neurosurgery at Ain Shams University Cairo, Egypt since 2014, where he joined the faculty as an Assistant Lecturer of Neurosurgery in 1997. He is a Consultant of Neurosurgery at his own private clinics Neuro Clinic Cairo and Hurghada-Red Sea, Egypt since 2001. Prior to his current position, he was a lecturer of Neurosurgery at Ain Shams University Hospital, Cairo, Egypt and a Consultant of Neurosurgery at El-Gouna Hospital, Hurghada-Red Sea, Egypt. Hazem is a native of Egypt. He graduated from the Faculty of Medicine Ain Shams University in1992, attaining magna cum laude honors with dual degree M.B.and B.Ch., and completed a combined residency in Neurosurgery and Cerebrovascular Stroke Unit at Ain Shams University Specialized Hospital, Cairo, Egypt in1995. He later went on to complete his Master's Degree of General Surgery (MS) in1997 andM.D. Degree of Neurosurgery (Doctoral Degree of Neurosurgery) in 2001. Dr. Hazem's has dedicated a significant part of his career to developing innovative educational research withover 33 published research papers in the Egyptian Society journal. Dr. Hazem is an active member of the Egyptian Society of Neurological Surgeons since 1997. He is an international Faculty at A O Trauma Foundation. He is also an international fellow member of the Institute of Brain Chemistry and Human Nutrition (IBCHN-UK). Hazem joined the North American Spine Society in 1999. He trained as a fellow at the Spine Center Munich 2005–2006. He is participating in the education programs of the junior Neurosurgeons in Egypt and member of examiners' board of the Ph.D, M.D and Masters' Degree of Neurosurgery.

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Notes:

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Alcohol's effect on pregnant mothers: A study

Luckenson Chery

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Epidemiology: According to WHO estimates 3.3 million deaths every year result from harmful use of alcohol, this represents 5.9 % of all deaths. Alcohol consumption causes death and disability relatively early in life. In the age group 20 – 39 years approximately 25 % of the total deaths are alcohol attributable fetal alcohol syndrome (FAS), alcohol use is also associated with an increased risk of acute such as injuries, including from traffic accidents However, it's also known that alcohol consumption especially in excess is linked to a number of negative outcomes: as a risk factor for diseases and health impacts; crime; road incidents; and for some, alcohol dependence. The Frequency of fetal alcohol syndrome is 2–5% (US, EU). The five countries with the highest prevalence of alcohol use during pregnancy were Ireland (about 60%), Belarus (47%), Denmark (46%), the United Kingdom of Great Britain and Northern Ireland (41%) and the Russian Federation (37%) The alcohol

- High consumption around the world
- Decreases vital functions
- Depressor of the central nervous system (CNS)
- Legal Drug

There is no known safe amount of alcohol use during pregnancy or while trying to get pregnant. These disabilities are known as fetal alcohol spectrum disorders (FASDs).

Children with FASDs might have the following characteristics and behaviors:

- Abnormal facial features, such as a smooth ridge between the nose and upper lip (this ridge is called the philtrum)
- Small head size (Microcephaly)
- Low body weight
- Poor coordination
- Hyperactive behavior
- Difficulty with attention
- Poor memory

Alcohol Metabolism in Pregnancy: Alcohol is metabolized in:

- Liver 90%
- Lungs 5%
- Stomach 2.5%
- Intestine 2.5%

Mechanisms of action:

- Depressor of the central nervous system (CNS)
- Facilitates GABAergic neurotransmission ((gamma aminobutyric acid)) by increasing the entry of chlorine through the GABAA receptor.
- By increasing the action of GABA, alcohol diminishes functioning of neurons, which is why it is classed as a depressant drug because it depresses activity
- Acute alcohol consumption increases the release of endogenous opioids such as endorphins, enkephalins and dynorphins

The region's most susceptible to the effect of alcohol

- Prefrontal Cortex
- Cerebellum

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Diagnosing Fetal Alcohol Syndrome: There is no lab test that can prove a child has FAS. Many of its symptoms can seem like ADHD. To diagnose FAS, doctors look for unusual facial features, lower-than-average height and/or weight, small head size, problems with attention and hyperactivity, and poor coordination.

Treating Fetal Alcohol Syndrome: Therapy can help with behavior and educational problems. Parents can also get training to help their child. Medicines can help manage symptoms like hyperactivity, inability to focus, or anxiety. A child with fetal alcohol syndrome needs to be watched closely to see if their treatment needs to be adjusted.

Conclusion: The epidemiology of alcohol use appears to be changing and the gap between male and female patterns of alcohol use is closing, especially at younger ages. Women's alcohol consumption has been increasing in line with economic development and changing gender roles, but other factors include marketing directed towards women, increased availability and accessibility of alcoholic beverages and increased social acceptability of women drinking alcohol. Most important, prevention strategies should be addressed not only to women of childbearing age, but also to public health officials, policymakers, health care providers, and communities. Given the high rate of teenage pregnancies in the world, school children are particularly important targets in any effort to halt alcohol abuse by pregnant women.

Recent Publications

1. The truth about alcohol in Dominican Republic
1. Plaisir de Boire d' alcohol
1. Intoxicacion de los jóvenes del siglo XXI
1. Como perder peso en seis meses
1. Los Jóvenes de Hoy

Biography

Luckenson Chery graduated in nutrition with academic honors in 2014 age of 23 years from Universidad Complutense de Madrid, he is a Medical Student in his last semester at Universidad Autonoma de Santo Domingo, He is Vice President of the Asociacion de Jovenes para el desarrollo global Humano. He worked as wound care at Haiti Family ministries, he Studied modern Languages at Universidad Autonoma de Santo Domingo, he has publishes more than 15 Papers in Listin Diario Journal and Republica Dominicana Digital, He Works as Nutritionist at Centro Medico Dominico Cubano, he is The supervisor of Emergency room specialized in Toxicology at Cento Medico Dominico Cubano. He is the leader of Buena Salud club Medical since 2013; he leaded different researches about oncology and Heart sickness with drug abuse at Universidad Concordia de Mexico. He has participated in different training on childhood intoxication at the Universidad de Autonoma de Mexico. He has given lectures on different topics related to nutrition and infantile poisoning.

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Bacteremia among febrile under five children: Prevalence, etiology, antibiotics susceptibility and factors associated with antibiotic prescriptions in Dodoma, Tanzania

Cecilia Lucas Msafiri
University of Dodoma, Tanzania

Background: In developing countries, febrile illnesses are the major cause of morbidity and mortality among children and is the most common reason for hospitalization. Viral infections, bacteremia, and malaria are among the commonest causes of fever in the developing countries. Bacteremia has a high mortality among of non-malarial febrile illnesses in African children. There is a lack of diagnostic tests to diagnose causes of fever therefore, children are started on empiric treatment, and also there is high-level antimicrobial resistance to commonly prescribed drugs. Understanding epidemiology of bacteremia in Dodoma Municipality will help to prepare local treatment guidelines for management of bacteremia.

Methods: The study was analytical cross-sectional conducted at Makole Health Centre, 130 under-five children with the body temperature above 37.5°C were enrolled. Thorough history taking, physical examinations, and blood for culture and sensitivity were done. Factors associated with associated with antibiotics prescription were assessed using logistic regression model.

The Results: Prevalence of bacteremia was 10.8%, *S. aureus* was mostly isolated. Study found that MRDT results and medicine use before hospital visits were associated with antibiotics prescription. Most of bacteria isolated showed high sensitivity Chloramphenicol and Ceftriaxone. Bacteria isolated showed high resistance rate to commonly prescribed drugs (Ampicillin and Penicillin).

Conclusion: There is a low prevalence of bacteremia among febrile under-five children in Dodoma Municipality, commonly isolated bacteria among febrile children was *S. aureus*. Majority of children with fever are prescribed antibiotics without confirmatory investigation and there was an alarming sign of increasing drug resistance to the commonly used drugs.

Biography

Cecilia Msafiri completed Master of Science in Pediatric Nursing at University of Dodoma Tanzania and Bachelor of Science in Nursing from Muhimbili University of Health and Allied Sciences, has been working with the University of Dodoma as a graduate nurse office since 2012, and she is Nurse Office in charge in Maternity department . Previously she worked at Dodoma Region Referral Hospital. She is has certificate of Hospital management for health professionals. She is nearly to publish paper from the research she did.

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Scientific Tracks & Abstracts Day 2

Pediatrics Health 2018 and Adolescent Health 2018

Sessions

Day 2 May 08, 2018

**Adolescent Health | Pediatric Neurology | Pediatric Infectious Diseases | Pediatric Hematology
Pediatric Case Reports Adolescent Health | Pediatric Neurology | Pediatric Infectious Diseases
Pediatric Hematology | Pediatric Case Reports**

Session Chair
Dawn M Ireland
CDH International, USA

Session Co-Chair
Johanna Maria Kotze
University of the Free State, South Africa

Session Introduction

Title: 20 years demographics and preliminary survey results from CDH International

Dawn M Ireland, CDH International, USA

Title: The lack of confirmatory clinical signs in child sexual abuse evaluation

Johanna Maria Kotze, University of the Free State, South Africa

Title: Specific triggers of migraine headache in adolescents

Knezevic Pogancev Marija, University of Novi Sad, Serbia

Title: Predictors of blood pressure control among hypertensive Type 2 diabetic patients in Dodoma Region, Central Tanzania: A cross sectional study

Ezekiel Noah Moirana, University of Dodoma, Tanzania

Title: Clinical case reports: Multiple pediatric case presentations

Asma Awadalla, Ministry of National Guard Health Affairs, Saudi Arabia

Title: Predictors of early onset neonatal sepsis among neonates in Dodoma, Tanzania: A case control study

Pendo Paschal Masanja, University of Dodoma, Tanzania

Title: An update on Henoch-Schonlein Purpura in children

Omer A Ahmed, American Hospital Dubai, UAE

Title: Extremely rare multiple malformations: Split vertebral column and spinal cord

Slobodan Marinkovic, University of Belgrade, Serbia

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20 years demographics and preliminary survey results from CDH International

Dawn M Ireland
CDH International, USA

Purpose: Our objective was to assess the amount of medical information retained by parents of children born with Congenital Diaphragmatic Hernia. Our goal is to review the difference in our study with the population studies of other CDH research groups such as the CDH Study Group and DHREAMS in the amount of information given and correctly retained by CDH parents.

Methods: We reviewed the answers provided to a questionnaire between 1995 and 2014. Members included 2547 survivors, 1294 non-survivors and 740 expectant or who did not follow up. Parents were asked basic medical questions as well as a detailed medical and familial history.

Results: Our questionnaire was answered by 4548 families. A higher percentage of families of non-surviving infants than surviving infants did not know if their child's CDH occurred on the left versus right side (46.8% vs 57.8%). When families were asked to further characterize the type of defect their child had, the percentage of those who did not know jumped to approximately 87%, showing that even fewer parents remembered the finer details of their child's diagnosis. Familial CDH is reported in the literature to be known in approximately 2% of all cases. Our membership reports 1.6%, which is similar to what has been reported.

Conclusion: Until this study is compared to the studies of DHREAMS and the CDH Study Group and exact patient matching occurs, it will be difficult to measure the true medical knowledge that CDH parents grasp and remember.

Biography

Dawn M. (Torrence) Ireland is the founder of CHERUBS – The Association of Congenital Diaphragmatic Hernia Research, Awareness and Support. Created in 1995, after the birth of Ms. Ireland's son, who was born with Congenital Diaphragmatic Hernia (CDH), she wished to create a supportive, collaborative community of families of researchers. It was built upon a foundation of research, awareness and support – providing as many services and as much information as the budget and volunteer system could withstand. With the encouragement of several prominent pediatric surgeons, CHERUBS began to have a presence at medical conferences in 1996. By 2000, the CDH Research Survey Database was created. In 2017, the charity was restructured. Ms. Ireland stepped away as President of CHERUBS and into the role of President of CDH International to further the research projects that the organization is involved in. CHERUBS still exists as the family support division of CDH International. Currently, Ms. Ireland oversees CDH International which now runs the world's largest natural history database of CDH, has 3 boards, employees, many volunteers, assists over 6300 patient families in 70 countries, presents research abstracts, and works with both the NIH and the EU. Ms. Ireland also is a founding member of the Rare Advocacy Movement and senior level patient advocate, mentors several other non-profit organizations, is a founding member of the Alliance of Congenital Diaphragmatic Hernia Organizations, has written/edited 4 books and spends her time between the United States and Europe to continue the organization's growth and outreach.

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The lack of confirmatory clinical signs in child sexual abuse evaluation

Johanna Maria Kotze
University of the Free State, South Africa

Perpetrators of child sexual abuse are commonly acquitted based on wrong facts. Expert medical witnesses play a major role in the explanation of medical findings. Health care providers may experience a perceived responsibility to prove that child sexual abuse has taken place. In truth, the function of an expert medical witness is to educate the courts and to introduce reliable medical knowledge to other professionals in court and thus complement the search for the truth. From the side of the courts, there still exists an expectation that child sexual abuse can be confirmed or ruled out by means of a medical evaluation. Experience shows that the question most frequently asked to an expert medical witness is to explain why the absence of confirmatory clinical signs does not exclude child sexual abuse. The aim of the presentation is to provide the basic knowledge and understanding expert medical witnesses need to step into the witness box with confidence and explain medical principles scientifically in a language understandable to people outside the medical field. The explanation of normal findings in child sexual abuse cases range over a basic knowledge of evaluation protocol; understanding of relevant aspects of acknowledged definitions, criminology, the way children express themselves, physiology and insight into the part a clinician plays in the complete investigation of child sexual abuse. The presentation introduces the examination protocol and moves on to explain why a normal or non-specific clinical evaluation does not negate child sexual abuse. The focus is on the sexual abuse of prepubertal children but touches on the sexual abuse and rape of adolescents. A brief summary of the interpretation of normal and abnormal clinical findings conclude the presentation. The presentation aims to equip health care providers to support the courts efficiently in child sexual abuse cases.

Biography

Marianne has completed MB ChB at the University of the Free State, Bloemfontein, South Africa and Dip For Med (SA) Clin at the Colleges of Medicine of South Africa. She is affiliated with the Departments of Forensic Medicine and Family Medicine, Free State University. She is also involved with training in Clinical Forensic Medicine for the Free State Department of Health. She is running a service for the clinical forensic assessment of children who have possibly been sexually abused. She has vast experience as expert medical witness in child sexual abuse cases. Her publications focus around practical aspects of evaluation in rape cases, child sexual abuse cases and clinical forensic documentation.

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2nd Edition of International Conference on **Adolescent Health & Medicine**

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Specific triggers of migraine headache in adolescents**Knezevic Pogancev Marija**
University of Novi Sad, Serbia

Abstract: Migraine triggers are exclusive occurrences inducing headache. Certain triggers do not induce headaches in everyone. Even in a certain migraine sufferer, a specific trigger may not cause head pain for each headache. This research was carried out in North Serbian Province, Vojvodina with total population of 2,031,992. from 1988 to 2012.

Method: Participants were selected by multi-study random sampling procedure. The inclusion criteria were: age 10–18, attending school, and informed consent signed by parents and adolescents. The exclusion criterion was a prior diagnosis of a disease that has headache as a symptom. The mean age of the participants was 15 years 2.5 months (range 10–18 years, SD 3.02). Study was approved by Ethical Committees of the Institute and the University of Novi Sad. Participants filled in a semi structured screening questionnaire developed for this study (socio-demographic data, development, and headaches including triggers and therapy). The accuracy of the questionnaire was based on the International Headache Society criteria. Classification code 3 was used. The study was conducted in 3 phases. 1st - questionnaire which narrowed down the number of patients to those who had at least two headaches per month during the past year. 2nd - face-to-face interview, as well as physical and neurological examination.

Results: After diagnosing migraine (MH) or recurrent non migraine (RNMH), adolescents keep headache diary over period of 6 months, and then strictly avoid potential triggers, and continue keeping the headache dairy next 6 months. The third phase was reinterviewing them one year after. Out of 20,917 adolescents, 4,376 (20,9%) reported RNMH, and 2,008 (9,4%) reported MH. Lack of sleep as a trigger was equally reported, MH (90.6%) and RNMH (94.5%). Particular food was indicated more often as a MH trigger (72.4% vs 32%) ($p<0.05$). The most common dietary triggers implicated in migraine attacks were: meat (32.9%), eggs (30.5%) and aged cheese (27.7%). Odours were reported in 80.9% of MH, and in 10% of RNMH ($p<0.05$). Usual daily routine disturbance was reported in 50.0% of MH and in 75.2% of RNMH ($p<0.05$). Physical activity tends more often to trigger RNMH (85.3%) than MH. (45,3%) ($p<0.05$). Tobacco smoking triggers similar MH in 65% and RNMH in 75%. Passive tobacco smoking triggers MH more often than RNMH (81,6% vs. 23.9%). The same is with alcohol drinking as a trigger (80,2% vs. 68%) ($p<0.05$). Psychical stress triggers equally RNMH (99.6%) and MH (96,9%). "Not eaten in time" was the trigger for 65% MH attacks, whereas 32% of RNMH. RNMH were in general more susceptible to weather changes than MH (78.8% vs. 21.28%) ($p<0.05$). Using canonical discriminate analysis (coefficient over 0.3) MH were distinguished from RNMH according to the headache triggers. We discussed only triggers that could be avoided (sleep disturbance, food, odours, tobacco smoke, alcohol drinks). During six months after MH reported 2.8 headaches per month, and 5.7 medications used during the month. Six months after strictly avoiding potential triggers, adolescents reported 1.6 headaches per month and 2.4 medication used during the month. Our results are similar to European population studies with encountered prevalence of migraine 3-17,6% in adolescents, as well as with recognized trigger factors. General dietary restrictions have not been proven to be useful. Fatigue, mental stress, and lack of sleep are the main MH triggers in most reports. By avoiding recognized triggers, in 68% of adolescents 75% reduction of drugs used in headache therapy was achieved.

Biography

Marija Knezevic Pogancev is a Pediatrician, Neuro-pediatrician, Clinical Neurophysiologist and Epileptologist. She is a full time Professor at University of Novi Sad, School of Medicine and Chief of Department for Developmental Neurology and Epileptology, Child and youth health care Institute of Vojvodina, Novi Sad, Serbia. She is graduated from the Faculty of Medicine, University of Belgrade and Trained in Social Pediatrics, Institute for Mother and Child Health Care, Belgrade, Trained in Mental Hygiene, Institute of Mental Health, Belgrade. She did her Master's degree in Neuro-pediatrics, Faculty of Medicine, University of Novi Sad and Specialization in Pediatrics, Institute for Mother and Child Health Care, Belgrade. She was trained in Electroencephalography and Neurophysiology, Institute of Mental Health, Belgrade and completed her Sub-specialization in Neurology of Developmental Period, Faculty of Medicine, University of Novi Sad, and Scientist Doctor Degree.

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18th International Conference on **Pediatrics Health**
&
2nd Edition of International Conference on **Adolescent Health & Medicine**
August 06-07, 2018 Madrid, Spain

Predictors of blood pressure control among hypertensive Type-2 diabetic patients in Dodoma Region, Central Tanzania: A cross sectional study

Ezekiel Noah Moirana
University of Dodoma, Tanzania

Background: Hypertension is one of the most common conditions in patients with type 2 diabetes. It increases morbidity and mortality if remains uncontrolled. Very few studies have been done in sub-Saharan Africa to determine degree of blood pressure control among patients with type 2 diabetes. This study aimed at determining the degree of blood pressure control and associated factors among type 2 diabetics.

Methods: A cross sectional study was conducted among type 2 diabetic patients on hypertension treatment for at least 6 months attending diabetic clinic at Dodoma regional referral hospital. A structured questionnaire was used to collect socio-demographic and clinical data. Blood pressure was taken for all participants and classified based on JNC 7. Adequate control was defined as a blood pressure of <130/80mmHg. Data was analyzed using SPSS version 16; continuous variables were reported as mean/median with respective standard deviation/interquartile range and categorical variables were reported as frequency with their respective percentages. Logistic regression was used to determine association between blood pressure control and other variables. Analysis was done at a 95% level of confidence, a p value of ≤ 0.05 was considered significant.

Results: A total of 498 participants were enrolled for the study. Out of the participants, 60.8% were male, 60.2% were living in urban setting, and 68.9% were married, 93% were using oral hypoglycemic, while 42.8% are known diabetic for 6-10 years. Only 30.9% of the participants had their blood pressure controlled at the time of study. After adjustment for other variables, living in urban setting (AOR=5.85, 95% CI 3.88-6.98), being a peasant (AOR=2.01, 95% CI 1.27-3.64), and using a beta blocker (AOR=1.66 95% CI 1.23-2.08), were significantly associated with blood pressure control.

Conclusion: Very few type 2 diabetic patients with hypertension attain the recommended blood pressure target despite being on treatment. Living in an urban setting, being a peasant and the use of a beta blocker were significantly associated with good blood pressure control. Results highlight the need to scale up interventions geared at assisting diabetic patients control their blood pressure to prevent severe complication.

Biography

Ezekiel Noah Moirana is a 38 years old, Tanzanian and a General Physician. He did his MBBS at International Medical and Technological University (IMTU) on March 2011. He graduated his MMED-Internal Medicine at University of Dodoma (UDOM) on September 2016. Currently he is working as a Physician at Benjamin Mkapa Hospital in Dodoma, Tanzania. He has done research on Microvascular complication in Type 2 diabetes and hopefully will be published in an American Journal on October. He has done research on the association of Bush meat with high blood pressure which is also waiting to be published. Also he has done research on Hepatitis B prevalence among the health workers, awareness and prevalence.

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18th International Conference on **Pediatrics Health**
&
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August 06-07, 2018 Madrid, Spain

Clinical case reports: Multiple pediatric case presentations

Asma Awadalla

Ministry of National Guard Health Affairs, Saudi Arabia

From King Abdullah Specialized Children's Hospital, Riyadh, Saudi Arabia, I would like to share with other paediatricians 5 cases from the middle east:

Arthrogryposis-Renal dysfunction-Cholestasis (ARC) Syndrome: Four cases from different ethnic groups but all from middle east with ARC syndrome a multisystem disorder which was reported as a rare autosomal recessive disorders. Clinical presentations, physical examination and investigations including genetic tests were described. In three patients we also highlighted the course of the disease and age at death for this life limiting condition.

A rare presentation of a complicated case of hypercalcemia: A previously healthy 11 years old boy, who presented with right flank pain for one week. Associated with vomiting. Apart from right renal angle tenderness system exam was normal. Investigations revealed increased serum and urinary calcium with elevated parathyroid hormone level. Rt ureteric stone was evident on plain film and renal USS. The patient had laser fragmentation of right ureteric stone then partial parathyroidectomy. Histopathology confirmed parathyroid adenoma which was suspected on the parathyroid scan. Outpatient follow up reassuring.

A case of Agammaglobulinemia: Nearly 4 years old boy presented with sudden onset of Rt sided weakness and left-sided facial asymmetry. He had 2 previous admission for recurrent infections. Neuroimaging consistent with occlusion of left MCA and sub-acute infarction involving fronto-parietal lobes. Echo showed depressed cardiac function and immune work up showed Zero B cells consistent with Agammaglobulinemia. Stroke was likely thrombo-embolic secondary to cardiomyopathy/LV dysfunction as he had dilated left atrium and left ventricle with mild to moderate mitral insufficiency and moderately depressed left ventricular systolic function. Patient was started on regular IVIG.

Two cases of disseminated BCGitis secondary to interleukin 12 deficiency and BCG-osis: The first case is an 18 month old boy presented with disseminated BCG infection (left axillary lymph node and splenic abscesses) secondary to IL-12 deficiency on anti-TB medication. The second case is a six month male infant with BCG related axillary lymphadenitis.

Biography

Dr Asma Awadalla is a Consultant Paediatrician in the King Abdullah Specialized Children's Hospital under Ministry of National Guard Health Affairs in Riyadh, Saudi Arabia. She is also jointly appointed as Assistant Professor in King Saud bin Abdulaziz University for Health Science present in Riyadh, Saudi Arabia.

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&
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Predictors of early onset neonatal sepsis among neonates in Dodoma, Tanzania: A case control study

Pendo Paschal Masanja
University of Dodoma, Tanzania

Background: Early onset neonatal sepsis contributes significantly to the burden of neonatal morbidity and mortality in the first week of life. In Tanzania, neonatal sepsis accounts for 32% neonatal illness and leads to 29% of newborn deaths yearly. The objective of the study was to assess predictors of early-onset neonatal sepsis among neonates.

Methods: A hospital based case-control study of randomly selected 105 cases and 217 controls in 3 hospitals in Dodoma region. Cases were neonates diagnosed with neonatal sepsis and controls were neonates without neonatal sepsis. Controls were matched to the cases by mother's age and parity at a ratio of 1 case to 2 controls. A semi-structured questionnaire was used to collect information about the potential predictors; including maternal and neonatal factors as well as intrapartum emergency interventions. Descriptive and inferential statistical analyses were employed to measure the independent association between independent variables and the outcome of interest.

Results: Most (92.5%) of neonates were born at term and 7.5% were premature. Average birth weight was 3 kilograms and 16% neonates had low birth weight (<2500 grams). Up to 33% of the newborns had early-onset neonatal sepsis. After adjusting for confounders, the maternal factors which showed significant association with early-onset neonatal sepsis were maternal history of chorioamnionitis [AOR=1.910, p=0.042, 95%CI: 1.022-3.56], HIV status [AOR=2.909, p=0.012, 95% CI: 1.020-8.296], prolonged rupture of membrane [AOR=2.857, p=0.014, 95%CI: 1.233-6.619] and multiple digital vaginal examinations during labor [AOR=5.178, p=0.026, 95%CI: 1.220-21.986]. Neonatal factors; perinatal asphyxia [AOR=6.781, p=0.006, 95%CI: 1.725-26.652].

Conclusion: Maternal infection(s), obstetric complications and substandard procedures during labor and delivery have significant effects on the occurrence of early-onset neonatal sepsis. Prevention of early-onset neonatal sepsis could be achieved by addressing maternal obstetric and neonatal related conditions.

Biography

Pendo Masanja, RN, MSPN, a pediatric nurse practitioner and Assistant Lecturer at the University of Dodoma (UDOM), Tanzania. She has over 9 years of experience as a clinician, mentor and tutor on maternal and child health; 6 years in clinical field as a midwife and general nurse currently working as Assistant at School of Nursing and Public Health. She had a bachelor's degree in nursing at St. Johns University of and master degree in science of Pediatric nursing at UDOM Tanzania, presented her study on "Predictors of neonatal sepsis" on the 2017 Tanzania Public Health Association Scientific Conference, on final steps to publish her two studies papers on pediatric infectious disease journals.

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18th International Conference on **Pediatrics Health**
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An update on Henoch-Schonlein Purpura in children

Omer A Ahmed
American Hospital Dubai, UAE

HSP (Immunoglobulin A Vasculitis- IgAV) is the most common form of systemic vasculitis in children. Although in the great majority of cases HSP is self-limited, the symptoms and signs it bears are very scary for parents and families. The lecture would start by presenting general classification/Incidence of Vasculitis in children to be followed by the clinical manifestations, pathogenesis, diagnosis, and differential diagnosis of HSP. General careful evaluation of Purpuras in children is extremely important for early diagnosis and treatment. The Differential diagnoses are presented. Complications of HSP are outlined in the lecture. HSP management outline guidance including renal involvement are briefly presented including some controversies along this line.

Biography

Omer Ahmed has joined The American Hospital, Dubai (in 2009), after 15 years as a Consultant Paediatrician in UK. He is a Fellow of the Royal College of Physicians of Ireland and the Royal College of Paediatrics and Child Health UK. His Paediatrics training was in Sabah Hospital- Kuwait, Alder Hay Hospital- Liverpool, Great Ormond Street and The Royal Free Hospital in London before taking a Consultant post in Stevenage, Hertfordshire UK. Earlier in his career, Dr Ahmed has worked in Sudan, Libya and Kuwait. His experience covers wide areas in Child Health as a General Paediatrician. Dr Ahmed has several publications and presented/attended in several Paediatrics meetings and conferences.

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Notes:

18th International Conference on **Pediatrics Health**
&
2nd Edition of International Conference on **Adolescent Health & Medicine**

August 06-07, 2018 Madrid, Spain

Extremely rare multiple malformations: Split vertebral column and spinal cord

Slobodan Marinkovic
University of Belgrade, Serbia

A 5-year-old girl was presented with multiple malformations of her vertebral column and spinal cord. The following vertebral abnormalities were observed: C7 – agenesis of the left part of the body; T1 and T2 – an incomplete vertical cleft of the left pedicle; T3 – agenesis of the right arch; T4 – absence of the right pedicle, and a cleft of its arch; T5, T7 and T12 – agenesis of the right half of the body, hypoplasia of the right half, and defect of the left arch; T6 – a vertical cleft of the body, agenesis of its arch, and enlarged vertebral foramen; T8 – a defect of the left arch, and enlarged vertebral foramen; T10 and T11 – absence of the arches, a cleft of the right half of the body (T11), and duplication of the vertebral foramen; T12 – duplication of the vertebral foramen; L1 – small defect of the right half of the body, arch agenesis, and duplication of the vertebral foramen; L3 – a mediosagittal cleft of its arch; L4 – agenesis of the left arch; S3 – a mediosagittal cleft of the body; from L5 to S3 – a complete absence of their arches. A partial or complete agenesis of the ribs 5-7 and 12 was seen. The spinal cord was duplicated at the level between the T6 and T10. The embryologic basis of these extremely rare malformations was considered.

Biography

Slobodan Marinković has completed his PhD at the age of 31 years from Belgrade University and postdoctoral studies from Laboratory of Neurophysiology, Panum Institute in Copenhagen (Denmark). He spent 3 months at George Town University, Washington D.C., USA. He has published 2 international books, four chapters in 2 other books, 8 national books, more than 60 papers in reputed journals and has been serving as an editorial board member of repute. He has about 1200 citations in the international publications. He has been a chairman person on three occasions. He is a Full Professor of Anatomy at University of Belgrade, and a Visiting Professor at Shinshu University, Matsumoto, Japan.

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JOINT EVENT



18th International Conference on
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18th International Conference on **Pediatrics Health**
&
2nd Edition of International Conference on **Adolescent Health & Medicine**
August 06-07, 2018 Madrid, Spain

Effect of the anti-cancer preparation NSC-631570 (UKRAIN) on Xeroderma pigmentosum (case report)

Wassil Nowicky

Nowicky Pharma/Ukrainian Anti-Cancer Institute, Austria

Xeroderma pigmentosum (XP) is a genetic disorder of DNA repair in which the ability to re-pair damage caused by ultraviolet (UV) light is deficient. Multiple basal cell carcinomas (basaliomas) and other skin malignancies frequently occur at a young age in those with XP. In fact, metastatic malignant melanoma and squamous cell carcinoma are the two most common causes of death in XP victims. This is a very rare disease. The incidence differs regionally and is between 1:40000 (Japan) and 1:250000 (USA). About 250 XP patients live in the USA, about 50 in Germany, mostly children. The life expectancy is low; usually they die in the first decade. If left unchecked, damage caused by UV light can cause mutations in individual cells DNA. XP patients are at a high risk (more than 2000 times over the general population) for developing skin cancers, such as basal cell carcinoma, for this reason. A report on the successful using NSC-631570 in a XP patient suggests this drug can be very useful also in this hereditary disease. Patient S.S., an eight year old boy, was presented with an ulcerating lesion of the nose. As he was 10 month old, xeroderma pigmentosum was diagnosed. Until the age of three years the number of skin lesions increased considerably. In May 2002 skin cancer (squamous cell carcinoma) at the nose was diagnosed, T4NXM0, histologically verified. From May till June 2002 three cycles of chemotherapy were administered (cyclophosphamide, vincristine, and vinblastine). The therapy failed and the tumors grew up. Clinical investigation in April 2004 revealed deforming malignant melanoma of the nose with invasion into the cartilage of nasal septum, measuring 3x3 cm. On 20 May 2004 the therapy with UKRAIN was started, 5 mg intravenously twice a week, up to a total dose of 85 mg. One month after the last administration of UKRAIN a complete regression of the tumor was revealed. The skin defect was partially replaced with connective tissue. Xeroderma skin lesions improved throughout the body.

Biography

Dr. Wassil Nowicky is Dipl. Ing., Dr. techn., DDDr. h. c., Director of "Nowicky Pharma" and President of the Ukrainian Anti-Cancer Institute (Vienna, Austria). 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. Inventor of the anticancer preparation on basis of celandine alkaloids "NSC-631570". Author of over 300 scientific articles dedicated to cancer research. Dr. Wassil Nowicky 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 Janka Kupala University in Hrodno, doctor "honoris causa" of the Open international university on complex medicine in Colombo, honorary member of the Austrian Society of a name of Albert Schweizer. He has received the award for merits of National guild of pharmacists of America. the award of Austrian Society of sanitary, hygiene and public health services and others.

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