



# Preventive Medicine & Public Health

July16-17, 2018 | London, UK

# July 16, 2018

## Sessions

Preventive Medicine and Public Health, Preventive Medicine and Community Health, Preventive Medicine and Geriatrics, Preventive Medicine and Chronic Disease, Preventive Medicine and Primary Care, Preventive Medicine and Diabetes, Preventive Medicine and Internal Medicine, Preventive Medicine and Occupational Health

Session Chair Jorgen Lous University of Southern Denmark, Odense, Denmark Session Chair Hikmet J Jamil Michigan State University, USA

## **Session Introduction**

Title:	Increase SF-12 mental score, reduce overweight and number of problems! How we performed a patient-focused primary prevention to younger vulnerable patients in General Practice, Denmark.
	Jorgen Lous, University of Southern Denmark, Odense, Denmark
Title:	Assessing the prevalence rate of overweight and obesity with the use of body mass index in some areas of Ghana: basis of lifestyle medicine intervention
	Paul Amo Kyeremeh, Adventist University of Africa, Kenya
Title:	Assessing the risk of diabetes in northern part of brong-ahafo region, Ghana
	Patsy Ago Adams, Tamale Teaching Hospital, Ghana
Title:	Emerging heat-related climate change influences; a public health challenge to health care practitioners and policy makers: Insight from Bulawayo, Zimbabwe
	Bigboy (BB) Ngwenya, Edith Cowan University, Australia
Title:	Measles Virus: a focus on a selected northen Italy population. Between emergency unit access and immune status of hospital staff where is the balance during 2017 epidemia?
	Marta Noemi Monari, Humanitas Research Hospital, Italy
Title:	The impact of knowledge, Attitude of health college students towards lifestyle modifications during clinical Training in Saudi Arabia.
	Wafa Alsalem, Princess Nourah Bint Abdul Rahman University, Saudi Arabia
Title:	Assessing the prevalence of hepatitis B surface antigen in the Northern Brong-Ahafo Region of Ghana: Locus of intervention model
	Paul Amo Kyeremeh, Adventist University of Africa, Kenya
Title:	Use and management of mining chemicals by illegal gold miners in the Great Dyke, Zimbabwe
	Viola Matunhu, Midlands State University, Zimbabwe



Jorgen Lous et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# INCREASE SF-12 MENTAL SCORE, REDUCE OVERWEIGHT AND NUMBER OF PROBLEMS! HOW WE PERFORMED A PATIENT-FOCUSED PRIMARY PREVENTION TO YOUNGER VULNERABLE PATIENTS IN GENERAL PRACTICE, DENMARK.

## Jorgen Lous<sup>1</sup> and Kirsten S Freund<sup>2</sup>

<sup>1</sup>University of Southern Denmark, Odense, Denmark <sup>2</sup>General Practice, Aalborg University and secondary Copenhagen University

**Motivated GPs got education:** 15% of invited GPs from the Region participated in the training program, and 8.6% (28) recruited patient into the study, which offered a 40 hours training program. Patient-focused preventive consultation was an important part.

**Fee for extra time:** The GPs got fee for courses and preventive health consultations.

**Find patients who need some "intervention":** A screening Questionnaire (Q33) on own resources, network, lifestyle and social conditions was completed by 2,056 patients 20-45 years old when coming to the clinic for any reason. The 30% with most psycho-social problems ( >7) were invited to participate and randomized to control or intervention with two consultations with their GP. One- year postal follow-up.

Motivate patients who feel they need some changes in thier daily life: A baseline-Questionnaire (Q0) with 84 questions on life conditions, health, life style and social problems was "priming" the participants to the patient-focused consultation. Patients might choose one or two goals for a better life.

**Discuss resources, barriers and time schedule for chosen changes:** Important to explore the patient's agenda and resources and support self-efficacy.

A 20 minutes follow-up within three months: What has succeeded and what is difficult and why? Support self-efficacy again.

A one-year questionnaire (Q1) like Q0. What has changed during the year?

**Results:** After one year the intervention group had significant better SF-12 mental score 4,3 (1,6-6,9), fewer problems (10,0-8,2= 1,8 problems) and the overweight who had prioritized weight-loss had mean weight loss of 4,73 kg (95% CI: 1,8-7,7).

#### Biography

Jorgen Lous had six year training at hospital and in 1976 he started as a General Practitioner (GP). Since 1992 he was part time academic and part time GP. From 2001 to 2009, he was a Professor in General Practice at University of Southern Denmark, Odense, and after that part time GP. He wrote his thesis on secretory otitis media in children in 1994.

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Paul Amo Kyeremeh et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# ASSESSING THE PREVALENCE RATE OF OVERWEIGHT AND OBESITY WITH The use of body mass index in some areas of ghana: basis of Lifestyle medicine intervention

Paul Amo Kyeremeh<sup>1</sup>, Esther Amo Kyeremeh, Patsy Adams and Seth Agyeman

<sup>1</sup>Adventist University of Africa, Kenya

**Background:** Overweight and obesity are cherished in most parts of Africa, it is seemingly considered as a sign of good living to most of the people without counting its health hazards, yet, there are scarcity of data on the prevalence or factors facilitating the risk of high body mass index (BMI) in some parts of Brong-Ahafo Region of Ghana. This study was conducted from six traditional areas to ascertain whether the residence are at high risk of overweight and obesity to encourage researchers to figure out specific lifestyle medicinal intervention models to mediate the problem.

**Method:** This data was obtained from the Department of Preventive Healthcare and Lifestyle Medicine at Valley View University, Techiman Campus. The BMI of 500 respondents were obtained, both were males and females between 18 and 59 years old. The respondents were from Techiman, Nkoranza, Atebubu, Kwamedanso, Yeji and Kajiji traditional areas. BMI calculator was used for the assessment.

**Study Design & Delimitations:** The study is basically cross sessional. This paper is to assess the prevalence of overweight and obesity in order to introduce lifestyle medicinal measure to prevent arrest and reverse overweight and obesity. It is limited to its causes among the respondents. Also, the respondents were not based on random sampling. The data for this research was obtained from community health screening, and those who were willing were all included in the study.

**Results:** High BMI was detected among the respondents. 235 (47%) of the sample respondents had normal BMI of  $18.5 \le 24.9$  while 265 (53%) had BMI of  $\ge 25$  to  $\ge 30$  representing overweight and obesity.

**Conclusion:** Policies to control and prevent overweight and obesity should be taken into account respectively. Overweight and obesity is gaining deeper grounds in the selected areas for the study. Without standard and proven lifestyle medicinal intervention models, complications due to overweight and obesity may seriously affect both individual and the national economic indicators in the context of health.

#### **Biography**

Dr. Paul Amo Kyeremeh is a Ghanaian, and the President of Mid-North Ghana Conference of Seventh Day Adventist Church. He holds degrees in BA Religions, MPH in Health Ministries, and DrPH in Preventive Health Care. Currently he is pursuing PhD in Development Administration at Philippines Christian University to blend Public Health and Development as a tool towards a Nation building and Life Extension. Dr. Amo is a Pastor of Seventh Day Adventist Church, Public Health Expert in Preventive Health Care (Metabolic Syndrome Risk) who has given several motivational talks on contemporary issues in Public Health, and development to groups, individuals, and institutions in countries like Ghana, Nigeria, Philippines, and China. Again he has served as Administrator of SDA Hospital Sunyani - Ghana. On Development, he is known for capacity building and infrastructural developments. Dr. Amo advocates for equity, and social justices. Again he has served on several boards such as ADRA Ghana. Advent Press. Pisgah Advanced Medical Center, as Health Director of Mid-West Ghana Conference of SDA, etc. Interestingly he is a co-founder of Pisgah Advanced Medical Center, & the founder of Center For Life Transforming, all in Ghana. Last but not the least he is adjunct Public Health lecture for the school of graduate studies of Adventist University of Africa, Kenya. Dr. Amo is with the view that African is capable to develop itself with selfless leadership to prolong its life expectancy.

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Patsy Ago Adams et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

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# ASSESSING THE RISK OF DIABETES IN NORTHERN PART OF BRONG-AHAFO Region, Ghana

## Patsy Ago Adams<sup>1</sup>, Esther Amo Kyeremeh and Paul Amo Kyeremeh

<sup>1</sup>Tamale Teaching Hospital, Ghana

**Background:** Moralities due to high blood glucose is gaining grounds globally which Ghana is not out of this statistics. This study was to ascertain whether high blood glucose was significant among the sample population. The respondents were taken from six municipalities in Brong-Ahafo-Region of Ghana to ascertain whether they were at high risk of type 2 diabetes.

**Purpose:** The researchers were to ascertain whether mortality rate in Brong-Ahafo Region could be associated to increased blood glucose to generate measures of preventive healthcare for further investigative research to come out with mediating measures.

**Method:** This data was obtained from the Department of Preventive Healthcare and Lifestyle Medicine at Valley View University, Techiman Campus. The blood glucose of 528 respondents was taken. They were both males and females between 18 and 59 years old. The respondents are from Techiman, Nkoranza, Atebubu, Kwamedanso, Yeji and Kajiji traditional areas, all in the Brong-Ahafo Region, Ghana. Glucometer with strips were used. The tip of the ring finger of the left hand was pricked for the blood sample.

**Study Design & Limitations:** The study is basically cross sessional. This paper is to investigate for only the prevalence rate of blood glucose among the given population. It will address its risk factors, preventive measures and treatment; they are available in the scientific journals.

**Results:** 470 (89%) of the respondence had normal blood glucose. Among those with high blood glucose, the males' prevalence rate was 29 (5.4%) while the females chocked 37 (7%). The cumulative record of 12.4% of the prevalent rate was alarming among the respondents.

**Conclusion:** High blood glucose was recorded among the despondence which calls for intervention models by the municipal and the district health directorates.

#### **Biography**

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Bigboy Ngwenya, J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

9<sup>th</sup> Edition of International Conference on

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# EMERGING HEAT-RELATED CLIMATE CHANGE INFLUENCES; A PUBLIC HEALTH CHALLENGE TO HEALTH CARE PRACTITIONERS AND POLICY Makers: Insight from Bulawayo, Zimbabwe

## **Bigboy Ngwenya**

Edith Cowan University, Australia

Current climate trends of extreme temperature and humidity during summer present a public health dilemma in Zimbabwe and other developing countries. National and local governments have defined roles to protect the health of populations under their jurisdictions as stipulated in relevant policies. The involvement of public health practitioners in policy development and management of heat-related illnesses is vital for the protection of the public, particularly vulnerable groups. The current role of health providers in developing countries regarding climate change impacts on health is considered suboptimal. Focus group interviews with public health practitioners and policy makers in the city of Bulawayo in Zimbabwe showed that officials lacked knowledge and awareness regarding heat-related impacts on health, particularly in relation to differences in individual susceptibility and currently employed heat adaptation and coping mechanisms.

#### Biography

Bigboy Ngwenya a PhD candidate completing this June 2018 from Edith Cowan University. My background spans the field of public health, environmental health, occupational health and safety and health promotion. I have done programs and projects in tertiary institutions, Government Departments, local authorities and Non-Governmental Organisations in developing countries and Australia. Current research interests are on climate change impacts - on human health in developing countries.

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M Monari et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

9<sup>th</sup> Edition of International Conference on

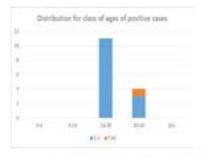
# Preventive Medicine & Public Health

# MEASLES VIRUS: A FOCUS ON A SELECTED NORTHEN ITALY POPULATION. Between Emergency Unit Access and Immune Status of Hospital Staff, Where is the Balance During 2017 Epidemia?

**M Monari<sup>1</sup>, P Bianchi, M Motta, F Maura, B Barbieri, E Azzolini, M Pedretti** and **L Ferretti** <sup>1</sup>Istituto Clinico Humanitas - IRCCS, Italy

easles is targeted for elimination in Italy as in Word Health Organization (WHO), but our country remains one of the 14 endemic countries in WHO European Region. In 2017, Italy showed an unexpected increase of measles cases in comparison of previous years. Two circulars were promptly issued by national authorities to warn all regions: the first was intended to recall recommendations on control measures, the second one gave more specific guidelines regarding the immunoglobulin administration. The aim of this work is to investigate the seroprevalence and the immunity status in health workers (PM) of our hospital in order to prevent new possible infections during the work in the emergency units (EU). We focused our attention on the first ten months of 2017. We determined the immunity or susceptibility of our medical and nurse staff through preventive medicine tests and we recorded all the suspected and confirmed cases of positive measles IgM admitted to the emergency unit. In EU we observed 73 suspected cases. Among them 36.98% (27 cases) were immune (both women and men), while 10% of women (8) and 15.1% of men (11) were not immune. Among these cases 13 had positive IgM at the access: 3 women (4.1%) with a median age of 31.33 yrs and 11 men (15%) with a median age of 32.54 yrs. None of the 40 workers who came into contact with these 13 cases contracted measles. Strengthening surveillance and immunization coverage was the key to this successful result.

Figure 1: Confirmed cases of EU and PM divided in class of ages.



	Median age	Immune IgG >>16.5 AU/mL	IgG <13.5 AU/mL		
women	40.75yrs	430	21 19		
men	41.63 yrs	368			

Diasorin Measles IgG

#### Biography

M Monari is the Director of Clinical Laboratory Analysis of Humanitas Research Hospital and she is a contract Professor of two Italian University: Humanitas University and Insubria University in Nurse degrees. She develops, in according with the hospital direction, different investigation studies around topics of health and security of blood collections and datas communications. She has more than 45 poster published and 23 articles. She was Editorial Board member for the *Journal of Women's Health and Reproductive Medicine*. She was also Cheif Director or several courses and congress and speaker to them.

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Wafa Alsalem, J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

9<sup>th</sup> Edition of International Conference on

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# THE IMPACT OF KNOWLEDGE, ATTITUDE OF HEALTH COLLEGE STUDENTS Towards lifestyle modifications during clinical training in Saudi Arabia

## Wafa Alsalem

Princess Nourah Bint Abdul Rahman University, Saudi Arabia

**Background:** Unhealthy lifestyle lead to several comorbidities, harm to health and increase risk of many diseases. Although it is well known that the health colleges students have greater awareness about the healthy life style compared to non-health science students. However, the awareness doesn't mean that they are practicing the healthy habits and diet in their life. Because the health college students experience more stress and lack of time, thus they have unhealthy diet and less physical activity, therefore they are going to fail in promoting the health care practitioners

**Objective:** To evaluate the impact of knowledge, Attitude of health college students towards lifestyle modifications during clinical Training.

Design: A cross-sectional study

Setting: Health sciences colleges in different universities in Saudi Arabia

**Subjects:** All students in health sciences colleges in their clinical training years including interns

**Results:** Overall response rate was 100%(1005/500). 21% were males and 79% were females. The smoking rate among the preclinical students (23.0%) was higher than the clinical

students(18.7%)(p=0.159). While, the smoking rate among the colleges, the nursing ranked as the highest (26.4%) and it was the least among college of dentistry (7.8%)(p < 0.0004). among males and females, and it was 31.2% and 16.5%, respectively(p < 0.0004). The healthy diet habits rates in preclinical it was (66.7%) and clinical students (65.5%)(p=0.756). We measured the physically active students prevalence and It was 43.2% in preclinical and 48.2% in clinical students(p=0.04). Whereas the prevalence of physically active students among the colleges was 63.5% in college of medicine, 76.4% in the college of nursing (p=0.025). The improvement of lifestyle after joining the college in terms of taking multivitamins without prescription among the preclinical students (29.1%) and clinical students(35.1%) (p=0.042). also in terms of performing routine checkup among the preclinical students (29.1%) and clinical students (38.4%)(p=0.019).

**Conclusion:** The main finding of our study was that Clinical students generally improved their behavior more than preclinical.

#### Biography

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Paul Amo Kyeremeh et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

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# ASSESSING THE PREVALENCE OF HEPATITIS B SURFACE ANTIGEN IN THE Northern Brong-Ahafo Region of Ghana: Locus of Intervention Model

## Paul Amo Kyeremeh<sup>1</sup>, Esther Amo Kyeremeh and Patsy Adams

<sup>1</sup>Adventist University of Africa, Kenya

**Background:** Not much has been documented about the prevalence of hepatitis B surface antigen in the Brong-Ahafo region of Ghana. This study was conducted in six traditional areas in the Northern Part of Brong-Ahafo Region to ascertain the prevalence of hepatitis B surface antigen among the respondents to recommend intervention strategies for control and prevention.

**Methods:** The data was obtained from the Department of Preventive Healthcare and Lifestyle Medicine at Valley View University Hospital, Techiman. Sample Population: They were 444 respondents, 198 (44.6%) males and 246 (55.4%) females. The sample population was between 18 and 59 years old adults. Data gathering procedure: The blood sample was collected by a finger prick.

**Study Design & Delimitation:** The study is basically cross sessional. This paper is to assess the prevalence of hepatitis B surface antigen among the respondents. The serum blood sample was not taken but the whole blood from a finger pricks. This study is again limited to the causes and spread of hepatitis B surface antigen since such data could be obtained from the peer review journals, textbooks, and qualitative or clinical research.

**Results:** Out of 444 respondents, 415 (93.5%) had negative hepatitis B surface antigen, 29 (6.5%) respondents tested positive 15 (3.3%) males and 14 (3.2%) females. Cumulatively, 4.3% of the sample population was positive.

**Conclusion:** Health education on the awareness, mode of transmission, effects and the prevention of hepatitis B surface antigen are timely needed to save several thousand from poorer health outcome and mortalities in the Brong-Ahafo Region of Ghana which is likely due to hepatitis B virus antigen.

#### Biography

Dr. Paul Amo Kyeremeh is a Ghanaian, and the President of Mid-North Ghana Conference of Seventh Day Adventist Church. He holds degrees in BA Religions, MPH in Health Ministries, and DrPH in Preventive Health Care. Currently he is pursuing PhD in Development Administration at Philippines Christian University to blend Public Health and Development as a tool towards a Nation building and Life Extension. Dr. Amo is a Pastor of Seventh Day Adventist Church, Public Health Expert in Preventive Health Care (Metabolic Syndrome Risk) who has given several motivational talks on contemporary issues in Public Health, and development to groups, individuals, and institutions in countries like Ghana, Nigeria, Philippines, and China. Again he has served as Administrator of SDA Hospital Sunyani - Ghana. On Development, he is known for capacity building and infrastructural developments. Dr. Amo advocates for equity, and social justices. Again he has served on several boards such as ADRA Ghana, Advent Press, Pisgah Advanced Medical Center, as Health Director of Mid-West Ghana Conference of SDA, etc. Interestingly he is a co-founder of Pisgah Advanced Medical Center, & the founder of Center For Life Transforming, all in Ghana. Last but not the least he is adjunct Public Health lecture for the school of graduate studies of Adventist University of Africa, Kenya. Dr. Amo is with the view that African is capable to develop itself with selfless leadership to prolong its life expectancy.

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Matunhu V, J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

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# USE AND MANAGEMENT OF MINING CHEMICALS BY ILLEGAL GOLD MINERS In the great dyke, zimbabwe

## Matunhu V

Midlands State University, Zimbabwe

n Zimbabwe, illegal gold mining is an attraction to most poor men, women and children. In the country, poverty is associated with economic meltdown. Weak enforcement of mining laws has seen a rise in illegal gold mining activities: some of the miners are foreign nationals from neighboring Malawi, Mozambigue, and Zambia etc. This livelihood activity is linked to public health concerns such as liberal use of chemicals, extensive environmental degradation, HIV/AIDS, violence, child labor and women abuse. This study focused on use and storage of chemicals by illegal gold miners along the gold-rich Great Dyke region. Qualitative data were collected from women, men and children involved in illegal gold mining and processing, Zimbabwe Republic Police, Health Centers, and Faculty of Mining Sciences at a University in Zimbabwe. The miners used chemicals such as mercury, carbon and cyanide to extract gold from its ore. The miners especially women and children have little knowledge about the effects of the chemicals on humans and the environment. Poisoned miners rarely seek specialized medical attention; if they do,

they neither disclose their correct residential addresses nor proper medical history for fear of being arrested. Worrisomely, most of these miners are undocumented migrants. These chemicals are stored in food containers and there are no lockable storerooms. Chemicals residues and used containers are recklessly disposed into rivers and anthills. The chemicals do not affect the miners only; they have a life threating effect to animals, plants, fish and people who are not involved in the mining activity. The study recommends sensitization of communities about the far reaching effects of the chemicals contamination. Community leaders and public health workers should be involved in controlling the use and disposal of chemicals by illegal miners.

#### Biography

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# Preventive Medicine & Public Health

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## Sessions

Preventive Medicine and Geriatrics, Preventive Medicine and Primary Care, Preventive Medicine and Chronic disease, Preventive Medicine and Internal Medicine, Preventive Medicine and Public Health, Preventive Medicine and Nutrition, Preventive Medicine and Diabetes, Preventive Medicine and Nursing

Session Chair Jorgen Lous University of Southern Denmark, Odense, Denmark Session Co-Chair Hikmet J Jamil Michigan State University, USA

## **Session Introduction**

Title:	Seasonal variation in the number of patients with profound hyponatremia (<125 mEq/L) at the admission to Matsumoto Medical Center in Japan
	Nobukazu Sasaki, National Hospital Organization Matsumoto Medical Center, Japan
Title:	Functionality armed antibodies as new translational tools to monitor progression of chronic disorders at clinical and subclinical stages
	Sergey Suchkov, I.M.Sechenov First Moscow State Medical University, Russia
Title:	Almost one-third elderly persons affected with anaemia – a cross-sectional community-based study from rural India
	Manisha Mandal, All India Institute of Medical Sciences, India
Title:	Re-evaluation of nutritional risk by Malnutrition Universal Screening Tool (MUST) in elderly patients on admission to the Ward E3 of Matsumoto Medical Center
	Ayako Saito, National Hospital Organization Matsumoto Medical Center, Japan
Title:	Absolute eosinopenia as a surrogate marker for enteric fever
	Swati Kapoor, Max Superspeciality Hospital, India
Title:	Ethnic Discrimination and Self-esteem of Santal Adolescents
	Borsha Soren, NIPSOM, BSMMU, Bangladesh

# EuroSciCon



Nobukazu Sasaki et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

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# SEASONAL VARIATION IN THE NUMBER OF PATIENTS WITH PROFOUND Hyponatremia (<125 meq/l) at the admission to matsumoto Medical Center in Japan

## Nobukazu Sasaki<sup>1</sup>, Shoko Kimura and Yuji Aoki

<sup>1</sup>National Hospital Organaization Matsumoto Medical Center, Japan

We experienced a case of severe hyponatremia (serum Na level, 104 mEq/L) while treating with a thiazide diuretic for hypertension. Then, we surveyed the frequency of patients with profound hyponatremia (<125 mEq/L) at the admission to Matsumoto Medical Center Matsumoto Hospital from May 2016 to April 2017 during one year prior to the hospital admission of the index patient. The patients with profound hyponatremia were 127 in 4,223 newly admitted patients. Out of 127 patients, 118 patients were aged 65 years or older. Ten patients with severe hyponatremia (<115 mEg/L) were all older than 65 years, in which two patients including the index patient were prescribed a thiazide diuretic. Table 1 shows the frequency of patients with profound hyponatremia each month during the surveillance period. It is of interest that seasonal variation was found in the number of the patients with profound hyponatremia. The frequency was significantly (p=0.013, unpaired t-test) low during the relatively cold period around Matsumoto City in Japan from November to March compared

to the other period in the year. Such seasonal variation suggests that the occurrence of profound hyponatremia is to no small extent attibutable to elderly patients' living environment. This finding is also expected to help healthcare providers in Preventive Medicine and Public Health.

Table 1. The number of patients with profound hyponatremia admitted each month

	2016					2017							
	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Ape.	Total
No.	12	10	21	13	7	16	6	7	9	4	7	15	127
%*	3.6	2.7	6.4	3.5	2.1	4.9	1.6	2.0	2.5	1.1	2.0	4.0	3.0

\*Percentage of the hyponatremic patients in newly hospitalized patients each month and in total

#### **Biography**

Nobukazu Sasaki is a Resident Physician of National Hospital Organization Matsumoto Medical Center, Matsumoto, Japan. He got his Medical Doctor in 2017 at Shinshu University School of Medicine, Matsumoto, Japan.

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# **Preventive Medicine & Public Health**

July 16-17, 2018 London, UK

Sergey Suchkov et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

# FUNCTIONALITY ARMED ANTIBODIES AS NEW TRANSLATIONAL TOOLS TO MONITOR **PROGRESSION OF CHRONIC DISORDERS AT CLINICAL AND SUBCLINICAL STAGES**

## Sergey Suchkov<sup>1, 2</sup>, Noel Rose<sup>3, 4</sup>, Aleks Gabibov<sup>5</sup>, Harry Schroede<sup>6</sup>, Abner Not-

## kins<sup>2</sup> and Trevor Marshall<sup>7</sup>

<sup>1</sup>Sechenov University, A I Evdokimov Moscow State Medical & Dental University and Moscow Engineering Physical Institute (MEPhI), Moscow, Russia

<sup>2</sup>National Institutes of Health, Bethesda, USA

<sup>3</sup>Center for Autoimmune Disease Research - Johns Hopkins Medicine, USA <sup>4</sup>Harvard Medical School, USA

<sup>5</sup>Institute for Bioorganic Chemistry - Russian Academy of Sciences, Russia

<sup>6</sup>University of Alabama at Birmingham, USA

<sup>7</sup>Autoimmunity Research Foundation, California, USA

Cubclinical multiple sclerosis (S-MS) can be usually defined as the Odiscovery of characteristic lesions at magnetic resonance (MR) or at autopsy, in the absence of clinical evidence consistent with MS. The methodological bricks of subclinical diagnostic and predictive protocols should include basic algorithms to differ essentially from those employed in canonical clinical practice, i.e., (i) to confirm a diagnosis of subclinical stage of the disease course and (ii) to select a mode for preventive treatment to quench the autoimmune inflammation. In this sense, among the best-validated proteome-related translational biomarkers, antibodyproteases were proven to be the best known ones. Abs against myelin basic protein/MBP endowing with proteolytic activity (Ab-proteases with functionality) is of great value to monitor demyelination to illustrate the evolution of MS. The activity of the MBP-targeted Ab-proteases discovered in MS patients markedly differs between: (i) MS patients and healthy controls; (ii) different clinical MS courses; (iii) EDSS scales of demyelination to correlate with the disability of MS patients to predict the transformation prior to changes of the clinical course. The activity of Ab-proteases was first registered at the subclinical stages 1-2 years prior to the clinical illness. About 24% of the direct MS-related relatives (probands) were seropositive for low-active Ab-proteases from which 38% of the seropositive relatives established were being monitored for 2 years whilst demonstrating a stable growth of the Ab-associated proteolytic activity. Three patients were initially evaluated because of accidental MRI findings suggestive of MS that fulfilled the Barkhof criteria. At the moment of MR examination, patients were asymptomatic. The objective examinations as well as the clinical history were negative. After having those patients tested for Ab-proteases, all three have demonstrated

elevated levels of the specific activity to target MBP. We have been monitoring along with the patients mentioned all direct members (13 healthy persons) of their families for 2 years and found that 3 relatives tested had elevated levels of the specific activity which was having a trend to grow whilst correlating with clinical symptoms of MS including the chronic fatigue, muscle weakness, dizziness, etc. All family members were studied with MRI, evoked potentials, and human leukocyte antigen (HLA) typing. The activity of Ab-proteases and its dynamics tested would confirm a high subclinical and predictive (translational) value of the tools as applicable for personalized monitoring protocols. Further studies on targeted Ab-mediated proteolysis may provide a translational tool for predicting demyelination and thus the disability of the MS patients in a variety of clinical and subclinical cases.

## **Biography**

Sergey Suchkov was born in the City of Astrakhan, Russia, in a family of dynasty medical doctors. In 1980, graduated from Astrakhan State Medical University and was awarded with MD. In 1985, Suchkov maintained his PhD as a PhD student of the I.M. Sechenov Moscow Medical Academy and Institute of Medical Enzymology. At present, Dr Sergey Suchkov, MD, PhD, is: Professor, Director, Center for Personalized Medicine, I.M.Sechenov First Moscow State Medical University and Dept of Clinical Immunology, A.I. Evdokimov Moscow State Medical and Dental University: Professor. Chair, Dept for Translational Medicine, Moscow Engineering Physical Institute (ME-Phl), Russia Dr Suchkov is a member of the: American Heart Association (AHA), USA; European Association for Medical Education (AMEE), Dundee, UK; EPMA (European Association for Predictive, Preventive and Personalized Medicine), Brussels, EU;.

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Ayako Saito et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

9<sup>th</sup> Edition of International Conference on

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# RE-EVALUATION OF NUTRITIONAL RISK BY MALNUTRITION UNIVERSAL Screening tool (must) in elderly patients on admission to the Ward E3 of Matsumoto Medical Center

## Ayako Saito<sup>1</sup>, Yumiko Aruga and Yuji Aoki

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**Background & Aim:** Malnutrition is said to be an underrecognized and under-treated problem. Malnutrition universal screening tool (MUST) has been used to rapidly and simply identify subjects at risk of malnutrition. We re-evaluated nutritional risk by using MUST in elderly patients on admission differentially in winter and in summer.

**Subjects & Methods:** Patients at age of 65 or older who were admitted to the Ward E3 of Matsumoto Medical Center in February and August, 2017 were studied. The patients were categorized by MUST score, and their serum albumin levels were assessed.

**Results:** As shown in table 1, the frequency of patients at malnutrition risk on admission (medium and high risk according to MUST) was significantly (p<0.05,  $x^2$  test) higher in Aug (43.2%) than in Feb (26.5%). They were older than those at low risk (p=0.018 in Feb and p=0.055 in Aug, unpaired t test), and mostly not referred to dietitians. Considerable hypoalbuminemia was seen in more than a few patients at low risk. The frequency of patients at low risk with serum albumin levels of 3 g/dl or less was significantly (p<0.05) higher in Feb (19.7%) than in Aug (4.0%).

**Conclusion:** Malnutrition in elderly patients, which occurred more likely in summer, was suggested to be under-estimated also in our hospital. Dietitians should be more proactively involved in identifying and treating such elderly patients at risk of malnutrition.

in 2017		February		August				
MUST Category	Low Risk	Medium Risk	High Risk	Low Risk	Medium Risk	High Risk		
MUS? Score	¢	1	2.6 ± 1.2	0	1	2.7:81.2		
Number (%)	61 (73.5%)	8 (9.6%)	14 (16.9%)	50 (56.8%)	15(17.0%)	23 (26.1%)		
Male/Female	45/16	4/4	5/9	32/38	5/30	11/12		
Ape (years)	78.1±7.3	80.8±8.3	83.9±9.4	77.9±8.0	78.9±5.8	82.4±7.5		
Body Mann Index	24.3±2.7	19.8±1.6	20.8±4.9	25.1±4.3	19.7±1.1	19.0±2.8		
Serum Albumin	3.8±0.7	32±07	3.1±0.7	3.8±0.6	3.7±0.8	32±08		
>3/3-2.5/2.5> (g/d)	49/11/1	5/2/1	30/3/2	48/1/1	13/2/1	12/5/5		
Referred to Dietitian	2	1	2	0	0	1		

#### Biography

Ayako Saito, RD is a Chief Dietician of Department of Nutrition Management, National Hospital Organization, Matsumoto Medical Center, Matsumoto, Japan. She got a BS in Department of Food Science, Otsuma Women's University in 2008. She is working for the nutrition management of patients with malnutrition.

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Borsha Soren et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# **ETHNIC DISCRIMINATION AND SELF-ESTEEM OF SANTAL ADOLESCENTS**

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Different ethnic groups comprise around 1.6 million of the national population. Santals, the second largest ethnic community are mostly found in the northern part of Bangladesh. With their own distinct language and culture, these ethnic groups have significantly enriched the entire culture of the country. However, lower socio-economic conditions along with a different language and culture hinders free intermingling of these people with mainstream population and leads ethnic discrimination. Perception of discrimination lowers the psychological wellbeing, and in the long run undermines selfesteem, of the individual. Mental wellbeing is recognized as a part of health, according to the definition of health accepted by World Health Organization. In 2017, a cross sectional study was undertaken to find out the relationship between perceived ethnic discrimination and self-esteem of Santal adolescents. A total of 159 Santal adolescents, boys and girls of age 11-17 years from 3 secondary schools of Dinajpur district were interviewed using a semi-structured questionnaire containing questions on perceived ethnic discrimination and self-esteem by using Perceived Ethnic Discrimination Questionnaire (PEDQ) and Rosenberg Self-Esteem Scale (RSS). Female were higher in number (66%) than male. Half of them were below age 14 years (49.7%) and 40% studied in boarding school. Large proportion of respondents' parents were illiterate (father 49.7%, mother 59.7%). Nearly half of the fathers (47.8%) earned through agricultural work and mothers were found to be housewives (65.4%). Result indicated all most all respondents

stated that, they experienced ethnic discrimination. Among them older adolescents perceived higher ethnic discrimination than younger (p=0.070). Again it was higher among the respondents studying in boarding school (p=0.000) than those who lived with their parents. Self-esteem is higher in younger adolescents (p=0.037) and females (p=0.000). Other variables like parents' and respondents' academic attainment, monthly expenditure of the respondents were found associated with level of respondents self-esteem (p=0.006, p=0.007, p=0.020 respectively). Multiple linear regressions indicated sex and monthly personal expenditure of respondent can predict the levels of self-esteem. Correlation analysis showed that self-esteem was positively associated with higher perceived discrimination. Besides influence of perception of ethnic discrimination on self-esteem, further studies need to be conducted to discover factors related to psychological health among the members of ethnic groups.

#### **Biography**

Borsha Soren, MBBS, is a graduate of Dinajpur Medical College under Rajshahi University, Bangladesh. She has been working as a Government Physician for Peoples Republic of Bangladesh for last four years. She has served the community people in different rural hospitals in Bangladesh for two years. She has completed MPH in Bangabandhu Sheikh Mujib Medical University on 2017.

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# Preventive Medicine & Public Health

July16-17, 2018 | London, UK



Manisha Mandal et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# ALMOST ONE-THIRD ELDERLY PERSONS AFFECTED WITH ANAEMIA — A CROSS-SECTIONAL COMMUNITY BASED STUDY FROM RURAL INDIA

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**Introduction:** A rise in elderly population is noted in India not just in absolute numbers buts also in proportion. Anaemia in elderly is associated with increased morbidity and mortality and aggravating the comorbidities. Lack of quality information in community-based elderly exists, hence, our study aimed to estimate the prevalence of anaemia among community-dwelling elderly persons and qualify the same morphologically.

**Methodology:** Rural community-based, cross-sectional study among elderly person's 60 years was conducted in December 2016 and May 2017 in Haryana, India. A sample size of 396 was calculated and participants were selected randomly from the health and demographic surveillance system. The pre-tested self-developed semi-structured questionnaire was administered and a capillary blood specimen was used to estimate hemoglobin using HemoCue method. WHO cutoff's for anaemia was used and morphology of anaemia was ascertained by examination of peripheral blood smears. **Results:** Prevalence of anaemia among community-dwelling elderly persons was 28.3(95% C.I. 24-32.9). Anaemia was more prevalent in elderly males (28.6, 95% CI 22.8- 35.1) than in elderly females (27.9, 95% CI 22.1-34.6). Prevalence increased with each passing decade (24.4, 31.1, and 37.2). Normocytic anaemia was most commonly found the type of anaemia morphologically (49.5%).

**Conclusions:** Prevalence of anaemia among community-dwelling elderly is high and is of public health concern. Routine screening for anaemia as part of geriatric health care services should be incorporated.

#### Biography

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Swati Kapoor et al., J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002

## 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# ABSOLUTE EOSINOPENIA AS A EARLY DIAGNOSTIC MARKER FOR Enteric fever

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Enteric fever is caused by gram negative bacilli Salmonella typhi and paratyphi. It is associated with high morbidity and mortality worldwide. Timely initiation of treatment is a crucial step for prevention of any complications. Cultures of body fluids are diagnostic, but not always conclusive or practically feasible in most centers. Moreover, the results of cultures delay the treatment initiation. Serological tests lack diagnostic value. The blood counts can offer a promising option in diagnosis. A retrospective study to find out the relevance of leucopenia and eosinopenia was conducted on 203 culture proven enteric fever patients and 159 culture proven non-enteric fever patients in a tertiary care hospital in New Delhi. The patient details were retrieved from the electronic medical records section of the hospital. Absolute eosinopenia was considered as absolute eosinophil count (AEC) of less than 40 /mm3 (normal level: 40-400/mm3) using LH-750 Beckman Coulter Automated machine. Leucopoenia was defined as total leucocyte count (TLC) of less than 4x10<sup>9</sup> /l. Blood cultures were done using BacT/ALERT FA plus automated blood culture system before first antibiotic dose was given. Case and control groups were compared using Pearson Chi square test.

It was observed that absolute eosinophil count (AEC) of 0-19 /  $mm^3$  was a significant finding (p<0.001) in enteric fever patients, whereas leucopenia was not a significant finding (p=0.096). Using receiving operating characteristic (ROC) curves, it was observed that patients with both AEC<14/mm<sup>3</sup> and TCL <8x10<sup>9</sup> /I had 95.6% chance of being diagnosed as enteric fever and only 4.4% had chance of being diagnosed as non-enteric fever. This result was highly significant with p<0.001. This is a very useful association of AEC and TLC found in enteric fever patients of this study which can be used for the early initiation of treatment in clinically suspected enteric fever patients.

#### Biography

Swati Kapoor is a second year postgraduate student in internal medicine in New Delhi, India. She did her mbbs from lady hardinge medical college, New Delhi. She have keen interest in research and have participated in many competitions including ACP India chapter (won 2nd prize in poster competition).

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# Preventive Medicine & Public Health

July16-17, 2018 | London, UK



Aizman Roman, J Prev Med 2018, Volume 3 DOI: 10.21767/2572-5483-C1-002 9<sup>th</sup> Edition of International Conference on

# Preventive Medicine & Public Health

# THE HOLISTIC MODEL OF HEALTH AND METHODS OF ITS EVALUATION

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We set up the modern system of health evaluation found on following principles: A holistic model of health is based on the view of the unity of physical, mental and spiritual essences of a person. The organism and its environment are whole having mutual influences on each other. The level of health can be estimated quantitatively determining the reserve possibilities of the organism during adaptation to the physical and mental loads. The child's organism goes through stages of growth and development, therefore the parameters characterizing his health change in ontogeny. We developed the computer programs for monitoring the health of students, which consist of five interconnected autonomous units allowing to assess: the physical development and functional reserves of the organism; the state of the mental sphere (emotionalvolitional, cognitive, intellectual); personal potential and professional route; propensity to various psycho-social dependencies; and the state of the study environment. Electronic passports of health are characterized by the following advantages: integrative approach to health as a systemic state; computerization of all data; quantitative expression of parameters,

providing the possibility of dynamic observation and comparison of the health level of various groups; relative simplicity of examination, which does not require expensive equipment; possibility to transmit survey results via the internet; involvement of the subject in the survey process, which increases his personal interest; and the ability to predict the risk of behavior associated with a propensity for psychosocial dependencies.

#### Biography

Aizman Roman has been graduated from Novosibirsk Medical University as Medical Doctor, with the speciality including Physiology. He defended Candidate and Doctor Disserttions on Renal and Developmental Physiology in Moscow, Institute of Developmental Physiology, Russian Academy of Education. Later on he started working at the Novosibirsk State Pedagogical University as Assistant Professor, then as Professor, Head of the Deptartment of Human Anatomy, Physiology and Life Safety, where presently he has been working. His reseach interests now are related to the problem of public health and safety.

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