

15th International Congress on **American Pathology and Oncology Research**
&
International Conference on **Microbial Genetics and Molecular Microbiology**
December 03-04, 2018 | Chicago, USA



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Probiotics for Familial Mediterranean fever disease

Familial Mediterranean fever (FMF), the disorder caused by mutations in the inflammasome pyrin, usually meet in people of Mediterranean origin, but it may be described for any ethnic group, too. While there is no cure for this disorder, one may be able to relieve signs and symptoms of FMF or even prevent them altogether by adhering to a highly effective treatment: colchicine, 1-2mg/day, for life. While colchicine is effective for FMF, it is not without side effects: many patients taking the colchicine report general gastrointestinal upset. Physicians suggest probiotics but this varies greatly by a doctor. The impact of probiotic formulations Narine and probiotic Colibacteron (Vitamax-E, Yerevan) on blood and gut microbiota of patients with FMF were previously shown by us (Balayan *et al.*, 2015; Pepoian *et al.*, 2015). Our data proposed that M694V/V726A pyrin inflammasome mutations differently act on microbial community structure in male/female FMF patients (Pepoyan *et al.*, 2018). Research questions will be discussed: (i) are structure and function of the fecal microbiota of FMF patients taking or not taking probiotics any different, and (ii) are the observed changes systemic or simply due to individual differences among FMF patients?

Biography

Astghik Z Pepoyan has completed her PhD in 1990 and Doctoral degree in 2002 (Institute of Biochemistry at NAS RA, Armenia). She is the President of the International Association for Human and Animals Health Improvement, and the Head of Food Safety and Biotechnology department at Armenian National Agrarian University. She is the author of 250 scientific publications.

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