12th International Conference on

Allergy, Asthma & Clinical Immunology

October 01-02, 2018 | Moscow, Russia

Keynote Forum
Day 1

Hikmet J Jamil, J Allergy Ther 2018, Volume 9
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The relationship between ethnicity and asthma among Iraqi immigrants

Background: Literatures indicate that asthma prevalence varies among different ethnic groups. The reason for this is not clear; it could be due to environment pollution or genetic factors. The study objective is to compare prevalence rates of asthma between two Iraqi ethnic groups who emigrated to the US from Iraq and to predict associated risk factors. We hypothesize no difference in prevalence rates between the two groups because they shared the same environment and culture in Iraq.

Methods: From data of published research studies, we selected 2079 Michigan Iraqi residents based on certain variable groups. The Iraqis are Iraqi Arab and Iraqi Chaldean. In each of the three studies, participants responded to an interview in Arabic using a validated structured survey which asked about socioeconomics and the presence of seven physician-diagnosed diseases (e.g. asthma, hypertension, diabetes, heart diseases, obesity, depression and sleep apnea) and self-rated health. The study used chi-square and regression analysis.

Results: Results indicate asthma prevalence of Chaldeans (4.4%) significantly differed from that of Arabs (12.5%). No difference in other diseases except sleep apnea and depression. Significant differences exist when testing asthma prevalence among those who suffer from any of six diseases; however, the prevalence in all were lower for Chaldeans. The Chaldean population reported less daily life stress and environmental exposure. Logistic regression for asthma predict only Iraqi Arab (OR=2.8, C.I 95%=1.0-7.3) and combined diseases, while for excellent to good health it predict several variables (e.g. Chaldean, less expose to environmental exposure).

Conclusion: We reject the study hypothesis because asthma prevalence is about three times higher in Iraqi Arabs as compared to Iraqi Chaldeans. This is true although both groups emigrated from Iraq, share similar geographical area, and lived in similar environments. Therefore, ethnic background was the only significant risk factor associated with asthma. Genetic differences could explain the high susceptibility to asthma in Iraqi Arabs compared to Chaldeans. No other variables were significantly associated with asthma in Arabs, nor in Chaldeans.

Biography

Hikmet J Jamil received his Medical Degree from Baghdad University. He holds several Postgraduate degrees from England. In 1979, he joined Baghdad University and then in 1998, he joined Wayne State University and in 2015 joined Michigan State University. He has published 20 books and 191 field research articles. He is one of the founders of The International Society of Iraqi Scientists in 2000 and The Al Nahrain International Society of Iraqi Scientists in 2017. He was elected in 2002 as President of International Society of Iraqi Scientists until 2015. He received the Best Teacher Award from Wayne State University in 2006, 2010 and in 2013.

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Glady Gilbert

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A sublingual immuno-nanotherapy related to the pathophysiological mechanisms of asthma

For a very long time, it has been customary in medicine to treat diseases by opposing the effects of certain cells or molecules whose disruption is directly involved in the evolutionary course of a disease. The therapeutic results have not always been up to expectations, and the deleterious effects on the other hand often beyond expectations. Besides, these often disappointing results have resulted from very expensive investments. Allergic asthma is one of these diseases, where progress in terms of treatment is not up to the hopes raised by the many basic research works published in recent years and illuminating many physiopathological mechanisms very accurately. The fault probably lies in the absence of a global vision to address the disease at multiple levels of dysfunction at the same time, with the aim to implement a multifocal regulation based on the main pathogenic mechanisms at the origin of asthma. We have developed in recent years a nanotherapy method called Bio Immune(G)ene Medicine (BI(G)MED), allowing a fine regulation of this type of allergic diseases by using first and foremost a biomimetic and holistic approach, devoid of any additional adverse effects.

Biography

Glady Gilbert has graduated Medical School in 1977. Through his work and encounters, he then developed interest and expertise in immunology and immunogenetics that lead him to nanomedicine and nanobiotechnology. He thus became in 2010 the creator of the Bio Immune(G)ene Medicine and Director of EBMA, the European association responsible for communication and trainings in this field. He has participated in numerous international congresses in immuno-allergology, infectiology and oncology and is the author of several publications on nano-biotherapy in different journals.

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Day 2

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Environmental pollution & allergy risk factors – a random sample: American refugees vs. immigrants

Background: Allergy is the sixth leading cause of chronic illness in the US and $18 billion per year is spent treating allergies. In 2015, around 35% of Americans suffer from allergies.

Objective: The objective of the study is to determine the prevalence of allergy among refugees versus immigrants; determine risk factors of allergy and self-rated health (SRH) and determine the triggers that environmental pollution has on allergy. We hypothesize that refugees will have higher prevalence of allergy, that it is a predicting risk factor and that refugees will report worse health than immigrants will.

Methods: 7.5% random sample derived from 5,490 Iraqi residents' addresses in Southeast Michigan, resulting in 350 Iraqis (205 refugees emigrated after 1991, and 145 before 1991). Participants responded to an interview in Arabic, using a validated structured survey, which asked about the presence of physician-diagnosed allergies (pre-asthma symptoms; rhinitis; skin allergy; eye allergy; sore throat). We asked if participants were exposed to 15 different elements which exist in the Iraqi environment (E.g. petrochemicals), due to instability.

Results: There were significant differences between refugees and immigrants in most variables. E.g., refugees exposed to environmental pollution (66.9%) more than immigrants (4.1%) did, and reported worse health (59.5%) compared to immigrants (19.3%). Prevalence of all types of allergies was higher among refugees (49.3%) versus immigrants (38.5%) but only three were significant (rhinitis, eyes allergy and sore throat). Logistic regression predicted risk factors for all allergies (refugees, nerve gas, petrochemical fuel and burning trash). In addition, each allergy type predicts several variables, mainly related to environmental pollution and refugees. For good health, the predictors were immigrant, younger age, employed and have no allergy.

Conclusion: The study hypotheses were accepted. Refugees show a higher prevalence of allergy and predictor risk factors, and reported worse health than immigrants did. Additionally, environmental pollution was a risk factor in all types of allergies.

Biography

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Allergic rhinosinusitis treated by a sublingual nano-immunotherapy

For a very long time the so-called modern medicine has been exerting its therapeutic effects through inhibiting actions. It is, with a closer look, anti-everything! We offer a different model, called the Bio Immune(G)ene Medicine, based on the connectivity and regulation of the pathophysiological processes affecting cells in a given disease. It is thus a biomimetic method aiming at being as close as possible to the molecular processes involved in a pathological state at several levels, with a strong focus on epigenetic regulation by using numerous microRNAs. To this end, a strict approach at the biological level is necessary, in order to highlight as many factors involved in the disease as possible and then be able to introduce a regulatory treatment. To perform this, we have at our disposal a nanotherapy administered sublingually, in order to facilitate the transmission of the ultra-low molecular doses to the immunocompetent cells, which are present in large numbers in the oropharyngeal mucosa. This kind of therapeutic approach is very-well suited for allergic diseases such as rhinosinusitis. We will try to show in this presentation how the identification and validation of some pathophysiological processes can lead to a very effective therapy with no side-effect, relying only on regulation mechanisms at both the molecular and cellular levels, applied in this case to allergic rhinosinusitis.

Biography

Glady Gilbert has graduated Medical School in 1977. Through his work and encounters, he then developed interest and expertise in immunology and immunogenetics that lead him to nanomedicine and nanobiotechnology. He thus became in 2010 the creator of the Bio Immune(G)ene Medicine and Director of EBMA, the European association responsible for communication and trainings in this field. He has participated in numerous international congresses in immuno-allergology, infectiology and oncology and is the author of several publications on nano-biotherapy in different journals.

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