

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Scientific Tracks & Abstracts

Day 1



Neurology Congress 2016

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Pleural 'drop' metastasis 21 years after resection of a thymoma: A case report and review of the literature

Chia-Chun Chiang, Angela M Parsons, J Scott Kriegshauser, Harshita R Paripati, Matthew A Zarka and A Arturo Leis
Mayo Clinic, USA

We present an unusual case of multiple pleural drop metastasis 21 years after complete resection of an encapsulated thymoma in a Southeast Asian man with myasthenia gravis (MG). To the best of our knowledge, this is the longest reported disease-free-interval of thymoma recurrence. A 43 year-old man with history of MG presented with a 9-month history of generalized weakness, fatigue and shortness of breath. After the initial diagnosis of MG 21 years ago, the patient underwent a complete resection of an encapsulated thymoma. His MG has reportedly been stable with cyclosporine, mycophenolate mofetil, and pyridostigmine. Due to his new symptoms, CT scan of the chest with contrast was done and revealed numerous pleural nodules surrounding the left lung with basilar predominance and pleural thickening. The findings were concerning for "drop metastases". CT-guided biopsy of a pleural nodule was done and the pathologic diagnosis was WHO type B1 thymoma. In the literature review, the average disease-free-interval for thymoma ranged from 68 to 86 months. Pleural and mediastinal recurrence are more common than distant hematogenous recurrence, although various presentations of thymoma recurrence have been reported. Adverse prognostic factors include an initial higher Masaoka stage, incomplete resection, elderly age, and pleural or pericardial involvement. In patients with apparent complete resection of a thymoma, clinicians should remain vigilant for the possibility of thymoma recurrence for up to 20 years after initial management. Greater awareness of the long disease-free-intervals and long-term follow-up with radiologic surveillance is recommended in these cases.

Biography

Chia-Chun Chiang is currently a neurology resident at Mayo Clinic in Arizona, USA. She received her MD degree from National Yang Ming University, Taipei, Taiwan in 2011, and completed a transitional year residency at Taipei Veterans General Hospital. She then worked as a Post-doctoral scholar at the Department of Neurosciences at University of California, San Diego, USA. She started her residency training at Mayo Clinic Arizona in 2014. He has published seven papers in reputed journals for her research in bio-photonics, neurosciences, clinical neurology and headache medicine. She has also presented at several international conferences in which she won Best Presentation Award and Best Paper Award.

jjain516@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Stroke is the second leading cause of mortality worldwide and is the most common cause of long term disability

Amal Al-Hashmi

Royal Hospital Muscat, Oman

Introduction: Stroke is the second leading cause of mortality worldwide and is the most common cause of long term disability. Stroke in the young is particularly tragic because of long term disablement. More than 10% of patients with stroke are aged 55 years or younger. While specific definition of young stroke is lacking, the vast majority of authors stroke to pertain to individuals less than 45 years of age. However other extended it to 50.

Etiologies and risk factors: Etiologies and risk factors for stroke in the young adults resemble those seen in elderly; however the etiology is much more diverse in the young compared to old patients. Vasculopathies, cardiac, metabolic and hematological disorders are more commonly seen in ischemic stroke in the young; whereas vascular malformation and drug abuse more commonly encountered in hemorrhagic stroke. This has therapeutic consequences and may affect outcome both in short and long term. This also may indicate separate approaches as to secondary preventive treatment.

Differential diagnosis and managements: The differential diagnosis of stroke is broad and further extended in the young because stroke may present with non specific symptoms and sings such as seizures and headache. In addition to standardized stroke management used in elderly, additional investigations, supportive and specific therapies should be considered based on the underlying etiologies.

Conclusion: Given the increasing incidence of stroke in the young. Stroke in the young adults are major public health and further researches are needed in order to reduce the burden and provide us with more precise epidemiologic data.

Biography

Amal Al-Hashmi graduated from Sultan Qaboos University (SQU) Oman and has completed her Post-graduate specialty in Neurology at McGill University, Montreal Neurological Institute and Hospital Montreal Canada. She currently works as Sr. Consultant Neurologist and Head of Acute Stroke Unit at the Royal Hospital Muscat. She is also Deputy Department of Neurology at the same hospital. She is a teacher for both under & post-grad students and final MD examiner at SQU, in addition she is teacher and examiner at the Oman medical specialty board (OMSB). She is also the Vice-President and the Chair Person Scientific Committee of Oman Medical Association from 2013 up to date. He is currently involved in multiple stroke researchers.

amal.m.alhashmi@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Oxidative stress response and longevity: Learning from yeast lessons

Elis Eleutherio

Federal University of Rio de Janeiro, Brazil

Although aging is likely to be a multifactorial process, several evidences show that oxidative stress is connected to life span. Many questions remain unanswered: oxidative stress does indeed contribute to ageing; do ROS act purely as random, destructive agents or as regulators of pathways of stress response and ageing; is it the absolute level of oxidative stress or the response to oxidative stress, or a combination of both, that determines life span? Interest in the factors that determine longevity has increased since the life expectancy has increased and the world leading causes of death are age-related diseases, such as cancer and neurodegenerative diseases. The use of the yeast *Saccharomyces cerevisiae* as an experimental model in biochemical studies has enabled the understanding of basic cellular and molecular processes. Even taken into consideration the vast differences in complexity between yeast and humans, the study of ageing and oxidative stress response in yeast has provided key insights into pathways that modulate human longevity. The entire genome sequence of yeast has been elucidated and it is amenable to genetic modifications, which facilitates the identification of drug targeting genes or stress response pathways. A substantial portion of human protein-coding genes can actually substitute for that of the yeast. In addition, *S. cerevisiae* has similar antioxidant responses to mammals and 30% of known genes involved in human diseases have yeast functional homologues. So, we have been using the yeast model to investigate the role of antioxidant defenses in cellular longevity and the molecular basis of neurodegeneration.

Biography

Elis Eleutherio has completed his PhD from UFRJ. She is the Head of Laboratory of Investigation of Stress Factors (Laboratório de Investigação de Fatores de Estresse – LIFE) at Institute of Chemistry, UFRJ. She has published more than 60 papers in reputed journals and has supervised 10 PhD and 15 MSc theses.

eliscael@iq.ufrj.br

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Correlation between Dysphagia and nutritional indicators in ischemic stroke patients at the time of hospital admission

Frid Hajibonabi

Tabriz University of Medical sciences, Iran

Dysphagia and poor nutritional status are common complications of stroke; however, possible associations between them are not well understood. Furthermore, it is necessary to perform a nutritional assessment of the patient in the early hours of admission, to determine both the nutritional status and the presence of dysphagia. So in this study, potential associations between dysphagia and nutritional indicators in patients with acute ischemic stroke at the time of hospital admission were evaluated. In this observational cross-sectional study, patients with ischemic stroke admitted to academic medical centers were enrolled. We studied 30 patients with stroke at the time of admission. The frequency of dysphagia and dysphasia grading score was evaluated. Nutritional indicators were assessed by knee height, mid arm circumference, triceps skin fold thickness, and calf circumference of all the admitted patients. The possible correlation between dysphagia and each parameter was evaluated. On clinical assessments 73.33% of patients demonstrated dysphagia. Dysphagia, was significantly associated with lower calf circumference ($P < 0.05$), but not with other nutritional indicators (knee height, mid arm circumference, triceps skin fold thickness). To be concluded, Dysphasia is a prevalent problem in patients with acute ischemic stroke; however, it's not associated with major nutritional failure at the time of hospital admission.

Biography

Farid Hajibonabi is a medical student at Tabriz University of Medical Sciences. He has started working on research projects since the first year of education and is still working on the projects related to neurological diseases. He is a member of student neuroscience committee of neuroscience research center in Tabriz University of medical sciences.

f.seifar@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Short-term and long-term effects of treadmill training on the balance, functional capacity and quality of life in patients with Parkinson disease- A randomized clinical trial

Paria Arfa-Fatollahkhani

Iran University of Medical Sciences, Iran

Objectives: To evaluate the short-term and long-term effectiveness of treadmill training in improving functional capacity, balance and quality of life (QOL) for Parkinson disease (PD) patients.

Design: A prospective, randomized, single-blind clinical trial.

Methods: A total of 20 mild to moderate PD patients were randomly split in case (11) and control (9) groups. Both the groups were evaluated for 3 times; at the time of inclusion, 2 months and 4 months later. We assigned Time Up and Go test (TUG) and 6 minutes-walk test (6MW) for assessment of balance and functional capacity. Additionally, the SF-8 healthy survey was filled out in an interview conducted by the expert.

Intervention: Treadmill exercises were performed in 10 weeks (2sessions/week). The program have been applied at moderate intensity with 60% of heart rate reserved (HRR) in 30 minutes. Wilcoxon Signed Ranks test and Freidman test were applied for short-term and long-term follow up analysis, respectively.

Results: Balance and functional capacity were significantly improved in case group after the intervention (TUG *P* value: 0.003, 6MW *P* value: 0.003). Moreover, long-term analysis revealed significant results as well (TUG *P* value: 0.001, 6MW *P* value: 0.004). Mental condition scores of SF-8 in cases were not statistically different in short-term follow up. However, analysis illustrated *P* value: 0.016 for long-term assessment. The intervention induced significant changes in physical condition scores in both follow ups (PC *P* value: 0.013).

Conclusion: This study provides considerable benefits of treadmill training in balance, functional capacity and QOL for PD patients.

Biography

Paria Arfa-Fatollahkhani is a medical intern of Iran University of Medical Sciences. Her enthusiasm to progress was intensified in the fields of neurology and neuroscience. Currently, he has an accepted paper, two submitted and another in progress.

Arfa.Paria.1571991@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

The IASP's nick-"diagnosis" of complex regional pain syndrome (CRPS-I), together with its attempted divination in Budapest, must be interred

José L Ochoa

Oregon Nerve Center, USA

Our current IASP President led a distinguished group, who based on science and courage, redefined "neuropathic pain" in 2008, but were reminded that such transparency excluded CRPS-I. Current authorities who agreed on this are Past President; rejuvenated IASP taxonomists; (the AMA always agreed) and now, the E.N.S. CRPS-I hypothesis (former "RSD" and "SMP") features include that there is no structural pathology; no diagnostic test; the "objective signs" are non-specific, often reflect disuse or self-infliction; and some are willful behaviors. Pain experts admit that "for diagnosis we don't use Evidence, we use our default criterion #4" because such perversion of the falsifiability principle (the one that allows scientific diagnosis (Popper)) is unfalsifiable (alternative diagnoses are not eliminated) i.e., it cannot be proven false and this is termed as Pseudoscience. The default position, one that cannot be proven false, also fits the null hypothesis which can never be proven correct (the data can only reject or fail to reject it (Fisher)). Topics that will be presented are: Symptoms, signs and laboratory in RSD/CRPS; S.W. Mitchell excludes the great sympathetic" from "Causalgia; The invention of "RSD" by Evans; R.Verdugo exposes placebo in faulty "diagnostic sympathetic blocks": SMP and RSD die; M.Campero rules out sympathetic activation of C nociceptors in CRPS (microneurography); Science of abnormal human nerves as impulse generators; Neurologists sort true versus Pseudoneurological display which are Psychogenic; The nick-"diagnosis" of "CRPS-I", as applied by non-neurologists to pseudoneurological patients: iatrogenic harm; Hysterical versus malingered CRPS; and what is wrong with the Budapests? This lecture outline will survey sensation, receptor to brain, where psyche lives.

Biography

José L Ochoa is a Specialized Academic Neurologist. He has written hundreds of peer reviewed articles, book chapters, and two books. He has successfully identified two syndromes of Neuropathic Pain. He has done his MD from Catholic University in 1961. He has done his PhD and DSc from University of London.

josechoamoreno@yahoo.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

***Helicobacter pylori* infection in Egyptian Parkinson's disease patients: Incidence and the effect on motor fluctuation and response to LEVODOPA**

Mohamed ELSherif

Mansoura University, Egypt

Background: The GIT infection with *Helicobacter pylori* (HP) can inhibit levodopa (LD) in Parkinson's disease (PD) patients leading to motor fluctuation.

Objectives: To identify the incidence of HP in PD patients compared to healthy controls and its effect on motor fluctuation, response to treatment and quality of life.

Patients & Methods: Serum IgG Abs against HP urease were detected using ELISA, we monitored and compared incidence of HP infection in PD patients and controls. We compared the PD with positive HP (PD positive) and PD with negative HP infection (PD negative) regarding clinical features, the Unified PD Rating Scale (UPDRS) scores, Hoehn and Yahr Stages (H and Y) stages, PD Questionnaire for the quality of life (PD NMSQuest), and PD non-motor symptoms Questionnaire (PD-Q39).

Results: Fifty Egyptian PD patients were included. Forty-six percent were HP positive with a significant difference to control group (46% and 20% respectively, $P=0.043$). In PD positive, the total UPDRS and PD-Q39 scores, were significantly higher in comparison to PD negative ($p<0.005$ and $p<0.001$ respectively). The differences were not significant in the total PD NMSQuest score, and H and Y stages in both groups. The LD onset period was significantly greater in PD positive by nearly 14 minutes in comparison to PD negative. There was significantly prolonged on-duration time in PD positive in comparison to PD negative.

Conclusion: There is a high incidence of HP infection in PD and HP affects the response to LD that can deteriorate motor manifestations and the quality of life.

Biography

Mohamed ELSherif has completed his MD and PhD from Mansoura University School of Medicine, Egypt. He is the coordinator of Post-graduate and undergraduate medical students. He has published more than 17 papers in reputed journals and has been serving as a reviewer member of many neurology journals. He has received the first Best Master Thesis Mansoura University 2007, second junior travelling fellowships from the World Federation of Neurology 22/4/2009 to attend the 13th EFNS in Florence-Italy to present the poster of MD thesis.

elsherifmohammed@yahoo.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Palmitoylethanolamide trial on Charcot-Marie-Tooth (CMT) neuropathy

Giovanni Antioco Putzu

Casa di Cura Polispecialistica Sant'Elena, Italy

CMT is one of the most commonly inherited neuromuscular diseases, with prevalence of approximately 1 in 2,500 persons. Clinical complains are mainly represented by muscle pain, sensation of fatigue and painful muscle cramps. No treatment of clinical symptoms is available yet. Previous treatment with high dosage of vitamin C failed to confirm a benefit in humans. A clinical open trial has been performed in order to evaluate the efficacy of ultramicronized palmitoylethanolamide (PEA-um[®]). Twenty-two patients (7 male and 15 females) from four different CMT families were treated with PEA-um[®] at dosage of 1200 mg/day for 80 days (Normast[®], Epitech Group srl, Saccolongo, Italy). None of the patients had an add-on treatment for the clinical symptoms. Muscle pain, fatigue and muscle cramps were assessed at T0 (baseline), T1 (20th day) and T2 (80th day) using Visual Analogic Scale (VAS). Muscle strength, vibratory sensation and Motor/Sensory nerve Conduction velocities were also assessed with the same schedule. Mean values of VAS for muscle pain at T1 decreased from 5.9±2.1 to 3.9±1.7 (p<0.0001), whereas VAS for fatigue decreased from 6.3±2.4 to 3.4±1.6 (p<0.0001). VAS score for painful cramps at T1 diminished from 5.4±1.2 to 3.8±1.3 (p<0.0001). A further improvement of VAS scores for muscle pain, fatigue and painful cramps was observed at T2 evaluation. These data strongly suggest that PEA-um[®] is effective in improving clinical symptoms of CMT neuropathy, albeit the obvious limitation of an open study.

Biography

Giovanni Antioco Putzu is working as professor in Neurology and Clinical Neurophysiology in Casa di Cura Sant'Elena, Italy. He has published more than 40 papers in reputed journals and has been serving as an editorial board member of reputed scientific journals.

puzzu@tiscali.it

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

To assess the effectiveness of acupuncture in acute ischemic stroke patients using three neurologic function test and heart rate variability: A pilot cohort study

Chaonan Yang

China Medical University, China

Stroke cause impairment, and also cause care burden and social cost. Patient seeking other therapy for regain their limbs weakness or spasticity, like acupuncture. Although acupuncture in post-stroke patient can relieve some function, but there is still controversial in conclusion. In acupuncture group, patients received three times a week, 2 weeks with total 6 times body acupuncture (7 sets acupoints) treatment. Data was collected by evaluation 3 neurologic deficit score or activity functional score (NIHSS, BI, mRS) before and 4, 8, 12 weeks after the intervention. HRV data were collected before and after each acupuncture interventions in acupuncture group. We enrolled 56 subjects. The results (1) In the measurement of 3 neurologic score (NIHSS, BI, mRS), there were no significant in NIHSS score in baseline, and has significant improvement in NIHSS score in control group since the 2nd day, and keep significant in the 3rd day, 7th day, 14th day and the 21th day, than back to no significant improvement in NIHSS score comparing acupuncture and control groups in the 28th day, the 56th day and the 84th day. There were no significant improvements in BI and mRS scores comparing acupuncture and control group in all comparing days. We noted the worsening of NIHSS score within 3 days in acupuncture group, and returned to no difference with control group in 4 weeks later, it is a indirect evidence that a trend of improving neurologic deficit (NIHSS score) after acupuncture treatment compare to control group.

Biography

Chaonan Yang has completed his Master's degree from Graduate Institute of Integrated Medicine, China Medical University, Taiwan, ROC. He is currently the attending physician of neurology, in China medical University Hospital, Taipei branch.

retsnom2004@yahoo.com.tw

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Bilateral polyradiculitis following epidural analgesia with bupivacain

Sarah Hasan Siddiqui

Aga Khan University Hospital, Pakistan

A 42 year old male developed rapid onset bilateral leg weakness following epidural analgesia which he was receiving for post-operative pain control. He had undergone partial Gastrectomy for locally advanced gastric carcinoma. On examination he had bilateral flaccid paralysis of legs, areflexia in lower limbs and variable sensory impairment up to T 9 dermatome. MRI spine did not reveal any compression initially. Nerve conduction study demonstrated abnormal motor NCS with either no response or very low amplitudes in lower limbs. Repeat MRI spine after 4 weeks demonstrated thickening and enhancement of cauda equina nerve roots representing radiculitis. Patient is currently bedbound with no significant improvement in his neurological status.

Biography

Sarah Hasan Siddiqui completed MBBS in 2010 from Dow University of Health Sciences, one of the renowned Universities of Karachi, the largest city of Pakistan. She has joined the Aga Khan University Hospital residency program in 2012 and currently working as Chief Resident Neurology in this institution.

s_hasan_s@yahoo.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Prehospital management of head injury patients in emergency air medical transport (EAMT)

Shin-Han Tsai

Taipei Medical University, Taiwan

Emergency air medical transport (EAMT) has become a major part of the modern trauma care system and is frequently used to transport patients from remote islands to a tertiary center. Data of all patients with traumatic brain injury and underwent EAMT were retrospectively retrieved from National Aeromedical Approval Center (NAAC). Patient data were analyzed by using the following parameters: age, gender, injury of severity score, and outcome within three days after air transport. Between Oct 01, 2002 to Dec 31, 2015, there were 4057 EAMS requests from the four major remote islands to Taiwan Main Island. Among them, 3520 were approved (approval rate: 86.8%). Among the 3520 patients, 458 sustained head injury. Male predominates in the head injury patient populations (M:F=2.7:1). Patients between 21 and 30 years old comprised the majority (23%). There was higher percentage of moderate to severe head injury patients compared with ground transport. Moderately injured patients comprised 25% (115 patients) and severe head injury patients comprised 27% (124 patients). Of these moderate and severe injury patients, 28% were intubated. Mannitol (or Glycerol) was routinely used. Thirty patients expired within seven days after air medical transport. These findings demonstrated that airway maintenance is a key factor for traumatic brain injury patient transport both in air and ground.

Biography

Shin-Han Tsai has completed his PhD from School of Medicine of University of Cincinnati, USA. He is the Director of Department of Emergency and Critical Care Medicine in Taipei Medical University Shuang Ho Hospital. He is also the Executive Medical Director in National Aeromedical Approval Center of Taiwan Executive Yuan, a government-funded program. He has published more than 100 papers in reputed journals and has been serving as an editorial board member of reputed.

shtsai@tmu.edu.tw

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Improving the control on post-stroke complications in Georgia

Tamar Janelidze^{1,2}

¹Evex Medical Corporation, Georgia

²Akaki Tsereteli State University, Georgia

In Georgia, there is an observed growth trend in cerebrovascular diseases. For last years, at the National Health Sector level, special attention is paid to acute strokes. In general, stroke is one of the main causes of incapacitation of the population of Georgia. In particular, most of patients that survived stroke are disabled, and 30-40% of them needed permanent care. Because of a deficiency in rehabilitation services in Georgia, no correction of neurologic impairment can be made completely for stroke patients that reduce the quality of life. In response to the urgency of this disease, it is very important to study the methods for fighting this disease and for the management of its complications, as well as for its prior diagnosis. In this context, for the first time in Georgia, at the Kutaisi Referral Hospital, at the premises of the neurology department, there have been established the stroke management units, the so called stroke units, which allow not only for effective treatment of stroke patients, but also for assessing the complications and possible risks associated with stroke. During the 2015-2016, 1249 stroke patients passed through the mentioned Hospital, and 65% of them had dysphagia, which evolves as a result of infringement of brain blood circulation, and appears as inhibition of swallowing reflex, or as its complete elimination. Of course, in this case, there is the risk of an aspiration of foods in the airway that consequently may lead to aspiration pneumonia. The analysis of the mentioned complications among stroke patients during the 2015-2016 has shown that the studies in this area should be enhanced and improved. Since 2016, the studies were actively started for the detection of dysphagia. First, swallowing reflex is checked and lingual condition is assessed in all patients, as well as there is differentiated whether dysphagia is a neurological complication or not. Then the studies are carried out through video-photofluorography roentgenoscopy. Patient swallows the contrast substances of different consistencies, and radiologist assesses radioscopically the swallowing process. Also, in some cases, of high importance is to assess the pharynx condition, for which we apply to an endoscopy. After the mentioned examination, an attending physician and radiologist make decision on how the dietary regime of patient should be carried out. Of all 120 examined patients, dysphagia was detected in 85, and an appropriate examination regime and treatment were chosen for them, and in some of them the need of gastrostomy was identified. Analysis of latest data has shown that the problem of proper diagnosis of dysphagia allows for reducing the complications, even such as aspiration pneumonia that in turn is the most dangerous complication in terms of mortality. Thus, proper diagnosis is a guarantee of preventing possible incapacitation and anticipated mortality.

Biography

Tamar Janelidze is a Doctor-Neurologist and Neuroradiologist, a graduate of the Akaki Tsereteli State University Medical Faculty, and a Certified General Medical Practitioner (2000-2006). She has worked as a Doctor-Neurologist; participated in Clinical Studies and has worked as a Researcher. She is an author of 7 scientific publications, an Organizer of scientific conferences in the Medical field. She is the Head of Department of Therapy at the Kutaisi Referral Hospital since 2010 and a Member of European Stroke Organization (ESO).

tamuna-janelidze@mail.ru

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Scientific Tracks & Abstracts

Day 2



Neurology Congress 2016

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Influence of the immunological effector IFN γ in the biology of neuroblastoma cells

Anastasia Xagara^{1,2}, Joseph Papamatheakis^{1,3} and Theologos M Michaelidis^{1,2}¹Foundation for Research and Technology-Hellas, Greece²University of Ioannina, Greece³University of Crete, Greece

The immune and nervous systems interact both at the cellular and molecular level, and share significant similarities in essential mechanisms and signaling pathways. IFN- γ , a cytokine that belongs to type II interferons, plays crucial role in innate and adaptive immunity whereas its aberrant expression/activity has been associated with a number of autoimmune diseases. IFN γ can enhance neurogenesis in the hippocampus of adult mice, by unknown mechanisms, possibly involving coordination between brain inflammation and repair, and can also modulate neurotransmitter release at synapses and affect memory, thereby revealing an important role of this immunological effector for the function of the adult nervous system. Using neuroblastoma cells, we are currently analyzing the influence of neuroinflammatory components in the process of aberrant activation of key signaling pathways involved in cellular proliferation and neuronal differentiation as well as in cellular heterogeneity, a hallmark of neuroblastoma which is observed in both tumors and tumor-derived cell lines. We found that IFN γ reduces neuroblastoma cell proliferation by delaying progression through the S phase of the cell cycle. Concomitantly, it promotes molecular and morphological features of early neuronal differentiation as revealed by the extended neurite outgrowth, increased formation of varicosities, and induction of specific neuronal differentiation markers. Our data also showed that chronic treatment with IFN γ alters the program of retinoic acid-induced differentiation, leading to an induction of large, nestin+, Schwann-like (S-type) cells, known to influence the biology of the adjacent neuroblastic (N-type) cells, suggesting that immune components may contribute to the phenotypic heterogeneity and tumorigenicity of neuroblastoma.

Biography

Xagara Anastasia completed her degree in Biology at the University of Ioannina (Greece), Department of Biological Applications and Technologies (5-years, 300 ECTS). She is currently a PhD candidate in the Department of Biomedical Research, Institute of Molecular Biology and Biotechnology- Foundation for Research and Technology (FORTH/BRI), under the supervision of Assoc. Prof. Theologos Michaelidis. Her research is focused on the analysis of neuro-immune interactions that take place in human CNS and PNS and their significance for the development of neurological disorders.

xagaraa@hotmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

The method of Nervous system regeneration

Aliaksandr Haretski

The Body Regeneration Center of EAFM, Poland

The method of nervous system regeneration is a universal integrated method based on the use of more than 40 of our developments know-how. It is able to mobilize human abilities and make the human body restore itself. The unique advantage of the method is the absence of contraindications and adverse side effects. This method helps us not only halt the disease progression but restore lost body functions. Many patients with various chronic incurable and even genetic diseases, such as cancer, Parkinson's disease, MS, ALS, ICP, fibromyalgia, CFS, all types of myopathy, atrophy and muscle dystrophy, undergo their treatment successfully in our center. The use of this method allow us to have an integrated impact on the whole body at once rather than on its separate damaged parts, cleanse the body of toxins, eliminate the main causes of a disease, boost immunity, provide the body with nutrients to fight against diseases, launch the mechanisms of body regeneration and self-healing in patients with various diseases practically at any age. When stimulating the immune system, the body starts to produce a large number of its own stem cells. Old damaged cells will be completely replaced with new ones in organs in a very short time. Scar tissue cells will be transformed into new healthy cells in damaged organs. As a result all organs will be completely revived again without any surgery. The unique results of treatment achieved by our patients many times are the best proof of the efficiency of this method.

Biography

Aliaksandr Haretski is the director of the European Academy of Folk Medicine, Professor of the department of neurology of the International University of Science in Hannover, Germany, Doctor of naturopathy /complementary medicine of the Institute for Interdisciplinary Studies in Hannover, Germany. He is the director of the Body Regeneration Center of EAFM, Poland. He published more than 20 articles in reputed journals. He is the author of the book "A practical guide to rejuvenation and complete healing of diseases and cancer".

info@folkmedicine.eu

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

From discovering calcium paradox to Ca²⁺/cAMP interaction: Impact in human health and disease

Leandro Bueno Bergantin and Afonso Caricati-Neto
UNIFESP-Escola Paulista de Medicina (EPM), Brazil

The hypothesis of the so-called calcium paradox phenomenon in the sympathetic neurotransmission has its origin in experiments done in models of neurotransmission since 1970's. Historically, calcium paradox originated several clinical studies reporting that acute and chronic administration of L-type Ca²⁺ channel blockers (CCBs), drugs largely used for antihypertensive therapy such as verapamil and nifedipine, produces reduction in peripheral vascular resistance and arterial pressure, associated with a paradoxical sympathetic hyperactivity. Despite this sympathetic hyperactivity has been initially attributed to adjust reflex of arterial pressure, the cellular and molecular mechanisms involved in this paradoxical effect of the L-type CCBs remained unclear for four decades. Also, experimental studies using isolated tissues richly innervated by sympathetic nerves showed that neurogenic responses were completely inhibited by L-type CCBs in high concentrations, but paradoxically potentiated in low concentrations, characterized as a calcium paradox phenomenon. We discovered in 2013 that this paradoxical increase in sympathetic activity produced by L-type CCBs is due to Ca²⁺/cAMP interaction. Then, the pharmacological manipulation of this interaction could represent a potential cardiovascular risk for hypertensive patients due to increase of sympathetic hyperactivity. In contrast, this pharmacological manipulation could be a new therapeutic strategy for increasing neurotransmission in psychiatric disorders such as depression, and producing neuroprotection in the neurodegenerative diseases such as Alzheimer's and Parkinson's diseases.

Biography

Leandro Bueno Bergantin has received his academic education from UNIFESP-EPM (Brazil) and did his MSc (2010) and PhD (2014) degrees in Biomedicine. His research involves cell signaling mediated by Ca²⁺ and cAMP, skeletal and smooth muscles, peripheral and central nervous systems. His research work solved the enigma of the paradoxical effects produced by L-type Ca²⁺ channel blockers. He is currently a Post-doctoral fellow (FAPESP) at UNIFESP-EPM.

leanbio39@yahoo.com.br

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Iatrogenic hypercalcemic encephalopathy due to hypervitaminosis D – A case series

Sushil Razdan

Acharya Shri Chander College of Medical Sciences, India

Vitamin D is increasingly recognized to have beneficial effects in several inflammatory conditions and there is some evidence to suggest that it is associated with a reduced risk of various internal malignancies, aside from its classic physiologic effects on calcium metabolism and bone homeostasis. Although vitamin D toxicity is thought to be extremely rare, and an extremely rare cause of hypercalcemia, food and nutrition board guidelines specify 2000IU as highest vitamin D intake that healthy adults can consume daily without risking hypercalcemia. For many people the word “vitamin” implies something that is beneficial, essential and not potentially poisonous. But, Vitamin D is toxic in large doses and sporadic reports of vitamin D toxicity exist in literature. We report a case series of fifteen patients with symptomatic hypercalcemia in whom toxicity occurred due to excessive administration of vitamin D by oral and parenteral route. The most frequently noted clinical manifestations in these patients were altered sensorium. In the present study we report a case series of 15 patients, nine women and six men, aged between 42–85 years who presented to the Department of Medicine, Acharya Shri Chander College of Medical Sciences and Hospital, Jammu, Jammu and Kashmir between December 2009 and September 2011. All patients were residents of Jammu and Kashmir. All the 15 patients had symptoms attributable to hypercalcemia with elevated serum calcium and serum 25-hydroxy vitamin D3 levels. All the 15 patients were suffering from hyper-vitaminosis D.

Biography

Sushil Razdan has done his MBBS, MD and DM in Neurology. He is currently Honorary Professor at Acharya Shri Chander College of Medical Sciences, India.

razdansushil@yahoo.co.in

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Novel aspects on the role of potential environmental risk factors in multiple sclerosis and schizophrenia: neuroimmunology meets psychoneuroimmunology

Ute-Christiane Meier

Blizard Institute London, Barts and The London School of Medicine and Dentistry, UK

The exact mechanisms underlying neuroinflammation and neuropathology in multiple sclerosis (MS) are still unknown, but susceptibility depends on a combination of genetic and environmental risk factors and their interactions. With little influence on genetic predisposition, the importance of modulating environmental risk factors is becoming an area of great interest. There is mounting evidence implicating both late Epstein-Barr virus (EBV) infection and hypovitaminosis-D as key environmental risk factors in MS. We have previously shown that active white matter lesions in the MS brain show signs of innate immune activation, and that latently EBV-infected cells can be found in these areas. We hypothesized that EBV-RNAs (EBERs) may promote an inflammatory milieu within the lesion. We propose that dysregulated EBV infection may be a potential risk factor and contribute to MS disease activity via the stimulation of innate immune responses by EBERs, and/or antigenic mimicry, cross-reactivity of cellular immune responses with “self” brain antigens or via the transactivation of endogenous retroviruses. Another potential environmental risk factor in MS is hypovitaminosis-D. Vitamin-D plays an important role not only in bone homeostasis but also in immunity and control of persistent infections. Hypovitaminosis-D, which is a hallmark of MS cohorts, has been associated with disease activity in MS. I will discuss data, which highlights interdependence between EBV- and vitamin-D status in MS. Several vitamin-D supplementation trials are currently underway to test the effect of vitamin-D supplementation on disability progression in MS. In the final part of my presentation I will focus on psychoneuroimmunology, which studies the interactions between immunity/inflammation and mood, cognition and behaviour. I will discuss novel findings on the role of inflammation and potential environmental risk factors in schizophrenia e.g. hypovitaminosis-D. We propose that an MS-like inflammatory signature may be present in schizophrenia. This area warrants further study as it may highlight novel prevention or treatment strategies.

Biography

Ute-Christiane Meier completed her PhD at the University of Oxford, where she worked on the cytotoxic T-cell control of HIV infection. She continued her studies on persistent virus infections and immunotherapeutic cancer vaccine-strategies within Oxford University, the Edward Jenner Institute and British Biotech in Oxford. She started working in Neuroimmunology in 2007 at the Blizard Institute London. In 2012 she was appointed as lecturer in Neuroimmunology. Her main research interest focusses on the role of environmental risk factors in multiple sclerosis, the topic of her Habilitation at the Ludwig-Maximilian-University Munich and more recently on dysregulated immune responses and the role of inflammation in psychiatric disease.

u.meier@qmul.ac.uk

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Anti- β_2 -glycoprotein I autoantibody expression as a potential biomarker for strokes in patients with anti-phospholipid syndrome

Husham Bayazed and Zainalabideen A Abdullah
University of Zakho, Iraq

Anti-phospholipid syndrome (APS) is an autoimmune disease. Cerebral ischemia associated with APS occurs at a younger age than typical atherothrombotic cerebrovascular disease, is often recurrent, and is associated with high positive IgG anti-phospholipid (GPL) unit levels. This study sought to determine the frequency rates of anti-cardiolipin (aCL) dependent on the presence of β_2 -GPI, anti- β_2 -glycoprotein I ($\text{a}\beta_2$ -GPI) and anti-phosphatidyl serine (aPS) IgG autoantibodies among stroke patients, and thus demonstrate the importance of testing for $\text{a}\beta_2$ -GPI autoantibodies. For this study, stroke patients and control subjects recruited from Mosul, Erbil and Dohuk provinces in Northern Iraq between March 2004 and March 2005 were evaluated. All cases were under 50 years-of-age and had no recognizable risk factors. Using ELISA to evaluate the presence of IgG isotype of aCL, $\text{a}\beta_2$ -GPI and aPS autoantibodies in their blood, the results indicated that the frequency of $\text{a}\beta_2$ -GPI was 14/50 (28%), aCL was 11/50 (22%), and aPS was 9/50 (18%) among stroke patients. In contrast, aCL was detected in 2/30 (6.7%) of control subjects; each of the other anti-phospholipid antibodies (APLA) was never observed. Of all the $\text{a}\beta_2$ -GPI+ cases, the incidence of stroke patients having the combined profile of $\text{a}\beta_2$ -GPI + aCL was 11/14 (78.6%) and of $\text{a}\beta_2$ -GPI + aPS was 9/14 (64.3%). Only 2/14 (14.3%) of these $\text{a}\beta_2$ -GPI+ patients, also expressed aCL in the absence of aPS. The frequency of patients expressing all three markers was only 9/14 (64.3%). In none of the APS/stroke patients were aCL or aPS expressed in the absence of the $\text{a}\beta_2$ -GPI. Conversely, IgG $\text{a}\beta_2$ -GPI as a sole marker was seen in 3/14 (21.4%) of these patients (i.e. in absence of either other marker). It can be concluded from these studies that among the three major forms of APLA examined, the presence of IgG $\text{a}\beta_2$ -GPI autoantibodies appeared to correlate best with stroke in patients who were concurrently suffering APS.

Biography

Husham Bayazed has completed his PhD from University of Mosul, College of Medicine. He is now Consultant at the Scientific Research Center, University of Zakho / Kurdistan Region, Iraq. He is specialist in Immunology and has published more than 25 papers in reputed journals and has been serving as scientific reviewers of many local and international medical journals. In addition of being Fellowship of ISC, Infection, Cancer, Immunology Advisory Board Member (EUROMDnet) (Belgium), Membership of World Stroke Organization, Membership of Metabolomics (USA) and Membership of American Association of Science & Technology.

halsinde@yahoo.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Involvement of the fronto-temporal network in the pathogenesis of auditory hallucinations: Insights from Neuroimaging and Neuromodulation

Frederic Haesebaert

University of Lyon, France

Auditory hallucinations (AH) are common and disabling symptoms of schizophrenia. Despite prescriptions including adequate pharmacological treatments, about 25% of patients still experience refractory AH symptoms. This epidemiological fact supports the urge need of understanding AH and developing new treatment strategies. Indeed, the patho-physiology of AH is complex and still partially unelucidated. In clinical terms AH correspond to "true" auditory perception in the absence of an auditive stimulus. In a neuropsychological perspective, they are commonly related to a lack of cognitive control over the hearing function. This lack of control leads to perception of self generated events misattributed to someone else. We present here key findings on brain networks supporting hearing and speech perception involved in the pathogenesis of AH symptoms, drawing perspectives for new treatments. Indeed, our team's research includes studies at the clinical, neuropsychological and neurophysiological level highlighting the role of fronto-temporal networks in AH generation. First we will briefly review data of the literature assessing the involvement of temporal and frontal lobes in AH and their pathological interactions with other brain structures in schizophrenic patients with AH. Then we will show how trans-cranial current brain stimulations (tCS) of fronto temporal network can induce a clinical reduction of AH. Finally we will focus on the mechanisms of action of AH improvement with tCS, investigating biological markers of response.

Biography

Frederic Haesebaert has completed his MD in 2010, and his PhD in 2013 at the age of 33 years from Lyon University. He is now the head of a department of neuromodulation in psychiatry dedicated to treatment resistant pathologies, in Lyon, and also a researcher investigating the mechanisms of action of Non Invasive Brain Stimulations (NIBS) in psychiatric populations. He has published more than 10 papers in reputed journals and is the author of book chapters and conferences in this field of psychiatry and neuromodulation.

frederic.haesebaert@ch-le-vinatier.fr

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Prenatal stress potentiates febrile seizure in human offspring

Sedra Mohammadi¹, EhsanSaboory¹, Peyman Gholipoor², Ahad Ghazavi¹, Arezoo Kiyani¹ and Shiva Roshan-milani¹

¹Urmia University of Medical Science, Iran

²Tabriz University of Medical Sciences, Iran

Introduction & Aim: A febrile seizure is a neurological disorder that occurs following an infection that results in a rapid rise in body temperature. It commonly affects 3–5% of children between the ages of 3 months and 5 years. There is evidence suggesting that neurological disorders can be exacerbated in an offspring that was exposed to stress prenatally. This study aimed to investigate severity of febrile seizures in prenatally stressed offspring.

Method: In the current study, 158 children under 2 years old with febrile seizure were selected. Information about convulsion including seizure lasting, recurrence of seizure, age of first seizure and type of febrile seizure (simple or complex) were obtained. Questionnaire to evaluate the perceived stress and exposure to major stress during pregnancy was completed.

Results: This finding showed that both high score of perceived stress and exposure to major stress during pregnancy significantly increased seizure lasting and seizure intensity. Exposure to prenatal stress did not have any significant effects on recurrences of febrile seizure and on age of onset of first febrile seizure. Also, appearance of complex febrile seizure was significantly higher in children born from mothers with major-stress exposure compared to unexposed one.

Conclusion: This study indicated that there is a significant positive relationship between both higher perceived stress score and exposure to major stresses during pregnancy with seizure parameters in offspring.

Biography

Sedra Mohammadi is pursuing her Medicine from the Urmia University of Medical Science. She is a Member of Student Research Committee of Urmia University of Medical Science since 2014. She has published 2 papers in journals and has been serving as a Redactor of Scientific Journal of Student Research Committee.

d.3dra.sm@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Scientific Tracks & Abstracts

Day 3



Neurology Congress 2016

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Diagnosis and management of neurogenetic disorders: A practical approach

William S Baek

Parkside Medical Group, USA

Since the beginning of the 21st century the field of Neurogenetics has exploded, generating novel concepts, unveiling mechanisms, and creating the basis for innovative molecule-targeted specific therapies for neurological disorders. Establishing a genetic diagnosis for any neurological condition is critical for understanding the natural course of the disease and managing accordingly; it shall no longer be viewed as medically unnecessary. This has created a paradigm shift towards reclassifying diseases based on the molecular features rather than signs and symptoms. Down syndrome, 22q11.2 deletion syndrome, Angelman syndrome, Prader Willi syndrome, Klinefelter syndrome, Turner syndrome, cri-du-chat (5p deletion), phenyl ketonuria, neurocutaneous disorders, Duchenne's muscular dystrophy, Friedreich's ataxia (1/50,000), myotonic dystrophy, Huntington's disease (1/10,000), and Charcot-Marie-Tooth disease (1/3000) are among the most common hereditary neurological disorders. I would like to present several genetically confirmed cases seen in our outpatient clinic, including practical management of these conditions. This consists of a myriad of cases I have personally diagnosed and treated in an omnibus fashion, such as Fragile X syndrome, horizontal gaze palsy with progressive sclerosis (HGPPS), Smith-Magenis syndrome (SMS), Huntington's disease, spinocerebellar ataxia (SCA), oculopharyngeal muscular dystrophy (OPMD) and fascioscapulohumeral muscular dystrophy (FSHMD) with review of the literature.

Biography

William S Baek is a triple board-certified neurologist. He graduated from Seoul National University College of Medicine in 1999 and completed his Neurology residency at the University of Chicago and a fellowship in Clinical Neurophysiology at UC San Diego in 2006. He completed an NIH Post-doctorate research fellowship at the Children's Hospital of Philadelphia. He is on the Editorial Board for the *Journal of Neurology and Neuroscience* and *JSM Alzheimer's Disease and Related Dementia*. He has over 25 publications, almost all as sole author. He is a certified medical interpreter for Korean and Spanish. He provides Clinical Neurophysiology services (EEG, EMG, EP) as well as Botox injections. His research interests are Alzheimer's disease, Parkinson's disease, stroke, epilepsy, multiple sclerosis, ALS, Neuromuscular disorders, hereditary ataxias, migraine, autism, ADHD, Clinical Neurophysiology, Neurogenetics, language-concordance, ethics and professionalism.

william_s_baek@hotmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Minimally invasive surgery for evacuating the intracerebral hematoma in early stages decreased secondary damages to the internal capsule in dog model of ICH-Observed by diffusion tensor imaging

Guofeng Wu

Guizhou Medical University, China

Diffusion tensor imaging was used to observe the effects of performing early minimally invasive surgery (MIS) on internal capsule in dog model of intracerebral hemorrhage (ICH). Twenty-five male dogs were selected to prepare an ICH model, and then they were randomly distributed into a model control group (MC group, 5 dogs) or a minimally invasive surgery group (MIS group, 20 dogs). In the MIS group, the intracerebral hematoma was evacuated by stereotactic minimally invasive procedures over 6 hours (5 dogs), 12 hours (5 dogs), 18 hours (5 dogs), or 24 hours (5 dogs) following successful induction of intracerebral hemorrhage. All the animals were sacrificed within two weeks after the hematoma was surgically evacuated. The neurological deficit score and diffusion tensor imaging (DTI) were observed before and after the MIS. The perihematomal blood-brain-barrier (BBB) permeability and the brain water content (BWC) were measured two weeks after the hematoma was surgically evacuated. The DTI demonstrated that integrity of the internal capsule restored largely after surgery and the fractional anisotropy (FA) values of the internal capsule on the hematoma side increased significantly as compared with those in the MC group or those before surgery in the same group. The postoperative ratios of FA values of each MIS subgroup increased compared with the MC group and those before surgery in the same subgroup preoperative. The neurological deficit score, the perihematomal BBB permeability and the BWC of each MIS subgroup decreased significantly compared to the MC group. The 6-12 hour group displayed a more favorable result.

Biography

Guofeng Wu has completed his PhD in 2010 from Fudan University. He is the Director of the Emergency Department of the Affiliated Hospital, Guizhou Medical University, the Vice-chairman of the Guizhou Stroke Association. He has published more than 20 papers in related journals.

wuguofeng3013@sina.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

PC-ONE- Primary cilia is not developed in olfactory neuronal precursors obtained from schizophrenia and bipolar disease patients

Gloria Benítez-King, Jesús Muñoz-Estrada, Salvador Alarcón Elizalde and Alejandra Lora-Castellanos
Instituto Nacional de Psiquiatría Ramón de la Fuente Muñiz, México

Schizophrenia (SZ) and Bipolar Disorder (BD) are diseases that can be originated during the fetal life by altered migration of neuronal precursors and a deficient formation of synaptic contacts. Microtubules play a key role in both processes and constitute primary cilia (PC) which is a rod like structures that senses extracellular signals in the fetal and adult brain. Recently, we described an aberrant microtubule organization in olfactory neuronal precursors (ONE) of SZ and BD patients. In this work we explored whether PC is present in ONE of SZ and BD patients and in healthy control subjects (HCS). Olfactory neuronal precursors were obtained by nasal cavity exfoliation of the middle turbinate, the nasal septum and the olfactory cleft of patients recruited in the Schizophrenia and Bipolar Disorder Clinics of the National Institute of Psychiatry and from healthy control subjects (HCS) paired by age and gender. PC was identified by immunofluorescence staining using an anti-acetylated-tubulin antibody. The results showed that 60% of ONE obtained from HCS (n=5) had rod-like structures with acetylated-tubulin protruding from the cell surface. By contrast, 5% of ONE of SZ patients (n=5), and 0% of the BD (n=5) cells showed these structures. The results indicate that ciliogenesis is abated in ONE of SZ and BD. Because PC plays a key role in neurodevelopment and ONE are mesenchymal cells, our data support the possibility that lack of PCs in ONE may be involved in brain alterations originated at prenatal life of SZ and BD.

Biography

Gloria Benítez-King has completed his PhD from Center of Research and Advanced Studies at the National Polytechnic Institute in México City and a research study stay from Rudolf Magnus Institute in Utrecht, Netherlands. She is the Head of the Neuropharmacology Laboratory at the National Institute of Psychiatry in México City. She has published more than 50 papers in reputed journals and has been serving as an Editorial Board Member of the *Journal of Pineal Research*.

bekin@imp.edu.mx

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Novel aspects on the role of potential environmental risk factors in Multiple Sclerosis

Ute-Christiane Meier

Queen Mary University of London, UK

The exact mechanisms underlying neuroinflammation and neuropathology in multiple sclerosis (MS) are still unknown, but susceptibility depends on a combination of genetic and environmental risk factors and their interactions. With little influence on genetic predisposition, the importance of modulating environmental risk factors is becoming an area of great interest. There is mounting evidence implicating both late Epstein-Barr virus (EBV) infection and hypovitaminosis-D as key environmental risk factors in MS. We have previously shown that active white matter lesions in the MS brain show signs of innate immune activation and that latently EBV-infected cells can be found in these areas. We hypothesized that EBV-RNAs (EBERs) may get secreted from EBV-infected cells and promote an inflammatory milieu within the lesion. We then tested whether EBV infection was under the control of vitamin-D and found that hypovitaminosis-D, which is a characteristic feature of MS cohorts, was not able to impact on EBV infection. More recently, we compared EBV-status and innate immune signatures in serum and cerebrospinal fluid of untreated relapsing-remitting MS patients and found antibody production against latent EBV antigens mainly in the periphery and innate immune IL-8 responses preferentially in the CNS. Dysregulated EBV infection may be a potential risk factor and contribute to MS disease activity via the stimulation of innate immune responses by EBERs, antigenic mimicry and/or crossreactivity of cellular immune responses with “self” brain antigens or via the transactivation of endogenous retroviruses. The identification of environmental risk factors in MS may offer novel targets for intervention and prevention.

Biography

Ute-Christiane Meier has completed her PhD at the University of Oxford, where she worked on the cytotoxic T-cell control of HIV infection. Through the support of several post-doctoral fellowships, she continued her studies on persistent virus infections and immunotherapeutic vaccine-strategies within Oxford University, British Biotech and the Edward Jenner Institute. She started working in neuro-immunology in 2007 at the Blizard Institute London. In 2012 she was appointed as non-clinical lecturer in Neuro-immunology, where she and her team study the role of environmental risk factors in multiple sclerosis, the topic of her external habilitation at the Ludwig-Maximilian- University Munich in 2014.

u.meier@qmul.ac.uk

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

Thinking, proceeding and transmission: Suggestions for research program

Fagogenis Gerasimos

Athens University School of Medicine, Greece

Over preliminary avocation to (virtual) experimentation upon the feasibility of regional or overall transmission of human brain's electromagnetic waves work as an EEG signal configuration to another Person's cerebral cortex, but remotely like a modulated signal of compatible frequency magnitude, without implement mediation e.g. microchip, cerebral implants or skull electrodes in open air and on any GPS parameter. Emission interaction from brain-to-brain (B-B Interface) means radio antennas sensors and satellite mediated procedures. Primary schedule runs as: EEG graphic waves properly detected, through specific sensitive appliances gathered to be transmitted to other participant's brain. It follows a detectable phase difference elaboration of those EEG graphic signals because these are compatible with human brain's electrophysiology. Here not a PC but cortex is the decoding matter. Effects are impressive and constitute cognitive communication of other's cerebral functions thoughts included resulting in comprehension of the masa copied speech analog on parallel, coinciding technically to the long spoken concept of telepathy. That goes back even to the very early origination of mental constructions' that is to thought and intangible (sensed) images making. Furthermore, this brain-to-brain transmission comprises not only cognitive but also sensory interpretations. The quality of perception and interaction from person to person coincides with reality in some fields while simultaneously and at any moment intangible sensory and cognitive images noetic forms Gestalt are realized bilaterally: Psychesthetism is the essence in perception and comprehension. Always, speech and interaction simulate open space conversation.

Biography

Fagogenis Gerasimos has done his Post-graduation from the Athens University. He did his Doctorate in Medicine. He has done his practiced in Pediatrics from the University Clinics of: Evangelismos Hospital, Athens. In the year 1979, he got License for Medical Practice in Pediatrics.

jefulysses@gmail.com

Notes:

8th European Neurology Congress

September 21-23, 2016 Amsterdam, Netherlands

The discriminating role of clinical manifestations in Hemorrhagic and Ischemic Strokes

Shahin Rouhani

Tabriz University of Medical Sciences, Iran

Introduction: Cerebrovascular accident (CVA) has been the third leading cause of death and disability, in developed countries. Individuals suspected of having stroke should be taken immediately to a medical facility for diagnosis and treatment. The symptoms following a stroke are not significant however these manifestations depend on the area of the brain that has been affected and its function. Parameters for predicting long-term outcome in such patients have not been delineated clearly. Therefore, the aim of this study was to investigate this possibility and to test a system that might practically be used routinely to aid management and predict outcomes of individual stroke patients.

Methods & Materials: A cross-sectional hospital-based study of the symptoms and signs including severe headache, seizure, vomiting, eye movement disorder, pupil size, pupil reflex to light, GCS, confusion, blood pressure, heart rate, respiratory rate, and body temperature of 503 patients with ischemic stroke was performed.

Results: In a Logistic model, we could predict the type of CVA by using respiratory rate, severe headache, vomiting, and dilated pupils with high accuracy (accuracy: 97.4%). Elevation in respiratory rate, can lead to 1.258 fold raise in hemorrhagic than ischemic stroke. While it is about 110.224 fold with headache, 4.59 fold with vomiting and 6.645 fold with dilated pupils.

Conclusion: Although this model provides a well-tested tool for stratification in Trials, imaging modalities are the discriminating instruments for diagnosis because of the improvement in these methods. Validity of this model should be evaluated in future studies.

Biography

Shahin Rouhani is currently pursuing her Post-doctoral studies in Medicine faculty and Students research committee, Tabriz University of Medical Sciences, Tabriz, Iran. He has published more than 4 papers in reputed journals.

shahin_roohani@yahoo.com

Notes: