

2<sup>nd</sup> Annual Congress and Medicare Expo on  
**Primary Care & General Pediatrics**

September 19-20, 2016 Phoenix, USA

Scientific Tracks & Abstracts

Day 1



*Primary Care Congress 2016*

2<sup>nd</sup> Annual Congress and Medicare Expo on

# Primary Care & General Pediatrics

September 19-20, 2016 Phoenix, USA

## The challenges for business managers of home care services in meeting regulatory quality requirements in Australia

**Jenny Mee**

Federation University, Australia

The ethical and political challenges facing home care provision is fraught with complexity, none more so than for those who conduct home care businesses. The gaps in the literature reveal that home care for-profit providers have not had a voice in Australia. The purpose of this research is to gather information about home care business in Australia and how owners/managers meet quality accreditation processes. The intent of the research is to provide a forum in which participants can share experiences and challenges with the wider home care governing and research communities about the business of home care. The research has implications for informing policy and practice relating to the recent changes in consumer directed home care that will improve service delivery. This has specific political and economic implications for Australia as the population ages and consumer directed home care packages are implemented. An inclusive analysis of the discursive events is an important starting point to inform consumer directed change and is vital for ensuring quality provision of home care services for the consumers. In addition it will provide insights into how consumer driven care can be provided universally with a focus on equity and inclusion. This presentation will explore the ethical considerations of inclusive practice for the project using a post structural framework.

### Biography

Jenny Mee's passion for caring and life-long learning as a nurse has lead her on a journey as a clinician, clinical educator, nurse manager (neurology), researcher and directing her own home care business. She is currently a PhD candidate and works as an academic in nursing at Federation University (Victoria, Australia). She holds a Master of Applied Science (Research) and has been serving as Faculty of Health Board Member at her university.

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## Hospital food services: Dealing with cultural influences on food consumption patterns

**Maha A AI Turki**

King Saud bin Abdulaziz University for Health Sciences, Saudi Arabia

Diet and nutrition play an important role in promoting recovery from different illnesses. Patient's nutritional status often deteriorate during hospitalization; a study has shown that nutritional status was declined in 29% of well-nourished patients during their hospital stay. Besides health reasons and hospital environment, food habits and preferences are one of the important factors affecting food intake of hospitalized patients. Food habits are the main aspect of many cultures, and cannot therefore be easily changed, or else it will affect food intake and meals pattern. Saudi people from different distinct regions eat different foods and have different food habits. The food ingredients, type, cooking methods and preservation techniques vary among these regions. Hospitalized patients often find it difficult to adjust, from their traditional food, to a standard hospital menu. This may result in reducing intake of food and increasing risk of malnutrition. One major step in promoting good nutritional care in hospitals is to ensure that hospital menus take into consideration patients' needs and preferences. Moreover, patients should be involved in planning their meals and choosing their food items in order to customize their dietary plan to accelerate recovery from illness and reduce the length of hospital stay. In my presentation I will discuss the difficulties that some patients admitted to King Abdulaziz Medical City (KAMC)/Riyadh may face with food presented to them. I will also discuss the methods that are used by the hospital Food Service department to assess patient satisfaction with the food available (e.g. tray assessment method), and how these methods can be used to explore the reasons for low food consumption of some patients. Moreover, I will present the results and examples of tray assessment process for hospitalized patients over two weeks. The process of dealing with patients to fulfill their dietary requirements and preparing meals in accordance with their tradition and preference will also be discussed.

### Biography

Maha AAI Turki obtained a Master of Medical Sciences in Human Nutrition in 2006 and PhD of Human Nutrition in 2014, both from the University of Sheffield/UK. Upon her return to Saudi Arabia, she joined King Saud bin Abdulaziz University for Health Sciences (KSAU-HS) in Riyadh as an Assistant Professor of Clinical Nutrition. In her pursuit of academic excellence she is currently studying for a Master Degree of Medical Education at KSAU-HS. At present, she is holding a position of Assistant Dean at the College of Applied Medical Sciences at KSAU-HS.

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## The past, present and future of the community neonatal nursing

**Tendai Nzirawa**

Queens University Hospital, Essex, UK

Reviewing the data of the current community neonatal service in North East London over the past six years, there is political evidence of moving more hospital based services into community. In 2014, our trust closed level one special care baby unit and moved all neonatal services to the level two hospitals. The recent internal audits has shown the increase in early hospital discharge from the neonatal unit, increased home visits and increase in more complex babies being followed up by the community neonatal nurses. Reviewing all this evidence, the question would be what does the future hold for our pre-term and complex babies? Where our health care resources should be increased in terms of follow up in the community?

### Biography

Tendai Nzirawa completed his Undergraduate Diploma in Nursing Studies (Adult) in 2005 (City University, London) and Bachelor of Science with Honours in Nursing Studies (Neonatal Care) in 2012 (City University, London). Currently, she is pursuing her Master of Science in Nursing Studies (Neonatal Care) from London Southbank University, London. Since 2010, she has been involved in setting up and running a Neonatal Parent Support Group with other health professionals. In July 2016, she won the Tony Fuller Cup- Clinical Audit Competition and in August 2016, she received the best poster award for presenting at the 6th World Nursing and Healthcare Conference, London.

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## Barriers and facilitators of physical activity and unhealthy eating for children diagnosed with kidney disease or diabetes

**Lori Sanderson**

Loma Linda University, USA

Over 89% of children diagnosed with type 2 diabetes are considered as obese or overweight. Childhood obesity is associated with an increased risk of kidney disease and the progression to and mortality of kidney disease. Most hospitals consider patient education as sufficient to helping this population to increase their physical activity and healthy eating. Without identifying the barriers to successful weight loss or successful increase in physical activity and healthy eating, this population will remain stagnant in their efforts to change. The purpose of this article is to identify the barriers of physical activity and healthy eating for patients with kidney disease or diabetes. A systemic literature review was conducted to identify the barriers of weight management for children and adolescents who have been diagnosed with kidney disease or diabetes. Upon identifying the barriers, the facilitators, which aim to improve health, can be established. Studies were found using PubMed, academic search premier, and the global internet. Search criteria included obesity rates for children, obesity rates for children with kidney disease, obesity rates for children with diabetes, physical inactivity rates for children, physical activity rates for children with kidney disease, physical activity rates for children with diabetes, unhealthy eating rates for children, unhealthy eating rates for children with kidney disease, unhealthy eating rates for children with diabetes, risk factors for children to acquire diabetes, risk factors for children to acquire kidney disease, barriers to healthy eating for children with kidney disease, barriers to healthy eating for children with diabetes, barriers to healthy eating, barriers to exercise, barriers to exercise for children with kidney disease, and barriers to exercise for children with diabetes. Although not all of the barriers were from research studies of patients with kidney disease or diabetes, there were multiple barriers which occurred in more than one study. These comprised lack of time, physical or personal appearance, lack of social support, lack of motivation, lack of money, weather, fatigue, and lack of access to exercise facilities for physical activity. Lack of time and cost of healthy food were both identified in at least two articles. Patient education alone is not sufficient to help this population to increase their physical activity and healthy eating. Investigators must first understand what prevents the population from increasing their physical activity and healthy eating, so that they can develop and test potential solutions (facilitators) to the problem. More research is needed to identify barriers among specific populations such as children with diabetes or kidney disease. More research is also needed to identify and test facilitators to healthy eating and physical activity. Without identification of barriers and the facilitators to change, morbidity and mortality statistics of children with diabetes or kidney disease will continue to increase.

### Biography

Lori Sanderson completed her Doctoral degree in Public Health Education and Promotion. She completed her Master's degree of Social Work and currently she is a licensed Clinical Social Worker. She has worked as a Medical Social Worker for over 10 years. She has developed several programs to help the children with whom she works with. She is currently working to develop a non-profit organization in eating disorders.

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## Attitudes of paediatricians and general practitioners in diagnosing hypertension in children

Ayedh A Alhajri

Kuwait University, Kuwait

**Introduction:** Hypertension is a major long-term health condition and it is the leading cause of premature death among adults throughout the world. Based on the use of  $\geq 95^{\text{th}}$  percentile to define hypertension, it would be expected that the prevalence of hypertension in children would be approximately 5%. Paediatric hypertension is considered as an under-diagnosed problem worldwide. This survey study was conducted to explore the extent of this issue in Kuwait.

**Subjects & Methods:** A questionnaire, having a brief case history of a child with increased blood pressure was prepared. The case history was followed by 15 true/false/I do not know questions directed to the attending physician. The questionnaire also solicited information on the physician's current position and the length of his/her experience. The questionnaire was distributed to general practitioners working in 15 primary health care centers; all health districts in Kuwait were included. The same questionnaire was distributed to pediatricians working in the six main hospitals in Kuwait. Only assistant registrars and registrars were included. The questionnaire was collected in person from all participants of both groups.

**Results:** A total of 127 physicians responded to the questionnaire. The responders were 69 (54%) male physicians and 58 (46%) female physicians. 44 (34.6%) of the responders were general practitioners and 13 (10.2%) were family medicine physicians working in polyclinics through-out the country (group A). 70 (55.2%) of the responders were paediatricians working in the six main hospitals in Kuwait. In terms of years of experience, 20 (15.7%) participants have five years or less, 35 (27.6%) have 5 to 10 years and 72 (56.7%) have more than 10 years of experience. No statistical significance were found in the responses of both groups except in two questions (Q2 and Q11, p values were 0.025 and 0.0038 respectively). Q2 and Q11 reflected the knowledge of proper paediatric cuff size and proper method of diagnosing hypertension in children respectively.

**Conclusion:** Our results suggest that paediatric hypertension is likely to be under-diagnosed by general practitioners due to lack of both knowledge and clinical skills in measuring blood pressure. This mandates an extensive education programmes to train general practitioners.

### Biography

Ayedh A Alhajri is a first class honour Medical Student at the Royal College of Surgeons in Ireland. He is a Research Assistant at Kuwait University, Faculty of Medicine, Department of Pediatrics. He is the Founder of Kuwait Medical Students Team in Ireland which is functional since April 2014. He has contributed in two papers about Pediatrics so far.

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## Child care providers' perceptions of children's lifestyles and risk factors for obesity: A focus group study

**Chiyori Haga**

Okayama University, Japan

The lifestyles of insufficient sleep and skipping breakfast have been pointed out as the problems on childhood lifestyle since 2008. If the nurses have not had health guidance for parents in spite of knowing these associations, they would not grasp the recent situation on childhood lifestyles. This suggests that the nurses who will have a health guidance for childhood should interview not only parents, but also child care providers. Therefore, this study attempts to understand child care providers' perceptions of remarkable children's lifestyles and discusses potentially successful strategies of cooperation among child care providers, parents, and health professionals for health promotion and the prevention of obesity in preschool children. We conducted 6 focus group discussions consisting of 34 child care providers employed by private and public child care centers, and a public kindergarten in Japan. Systematic thematic analysis was conducted to generate themes to address the study questions. Our results indicate that what the focus group participants discussed fell mainly into the 3 different kinds of points: "Concerns of Child Care Providers Regarding Parental Attitudes about Nutrition and Nurture", "Tensions Between Parents and Child Care Providers", and "Current Obesity Prevention Activities and the Role of Child Care Professionals." Child care providers needed a system to demand help from public health nurses in guiding parents would be effective in preventing childhood obesity.

### Biography

Chiyori Haga has completed her PhD in 2012 from Yamanashi University and worked there as an Assistant Professor. She is currently Associate Professor at Okayama University Graduate School of Health Sciences. She has conducted some cohort studies about health promotion for both children with and without disabilities. She has been serving as an Editorial Board Member of *International Journal of Nursing & Clinical Practice*.

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## An observational study and targeted preventive care of female sex workers, men who have sex with men, transgender and injecting drug users in India

Harmandeep Kaur, Manoj Kumar, Jasdeep Singh and Dev Sharan  
Panjab University, India

AIDS is a severe immunological disorder caused by the retrovirus HIV, resulting in a defect in cell-mediated immune response that is manifested by increased susceptibility to opportunistic infections and to certain rare cancers. It is transmitted primarily by exposure to contaminated body fluids, especially blood and semen. An observational study was conducted on randomly selected female sex workers (FSW), high risk men who have sex with men (MSM), transgender (TGs), and injecting drug users (IDUs) in the year 2015-16 in Chandigarh, Punjab and Nepal. The activities mainly includes STI services, condom use, behaviour change communication (BCC) through peer and outreach, building enabling environment, ownership building in the community, linking prevention to HIV related care and support services. These activities are provided through ICTC, mobile ICTC, network clinics and dispensaries. These activities are carried out as per the guidelines of National AIDS Control Organisation (NACO). It can be concluded as the TI project focuses on FSWs to provide them preventive, promotive and curative facilities against HIV/AIDS.

### Biography

Harmandeep Kaur has completed her Bachelor of Medicine and Surgery (Anaesthesiology) from Government Medical College and Hospital (GMCH), Chandigarh, India. She is now pursuing her research from Panjab University, Chandigarh. She has published more than 15 papers in reputed journals and has been serving as an Editorial Board Member of repute.

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## Patient enablement in chronic diseases in primary health care, Riyadh city, KSA

**Rabaa K Al Momen**

Prince Sultan Military Medical City, KSA

**Background:** Chronic diseases continue to cause high morbidity and mortality in Saudi Arabia. Patients severing from diabetes mellitus, hypertension and associated complications have recently increased and most of these patients find it extremely difficult to understand or cope with their illness. The objective of this study is to determine the level of patients' enablement in chronic disease and its predictors.

**Methods:** A community based cross-sectional study was conducted between December 2014 and January 2015. Six hundred and four (604) Patients attending the Chronic Disease Clinic in Alwazarat Health center were randomly selected to participate in the study. Patients aged 18 years and above, who willingly agreed to participate, were included in the study. Self-reported questionnaire was used to determine patient level of enablement. Descriptive statistics such as mean and median were calculated and binary logistic regression was employed to determine the predictors of patient's enablement to chronic disease.

**Results:** Our results show that five hundred and sixty five (565) out of (604) patients participated in the study with 86.6% response rate. Type 2 diabetes mellitus affecting 40.65% while hypertension affecting 37.79% of the patients in Al wazarat health center. Patient's enablement to chronic disease was very low and ranged between 2.41 and 1.53 out of 5.0. Binary logistic regression shows that age (male: OR; 0.84, 95% CI, 0.72-1.04, female. OR; 1.04, 95% CI 0.88-1.39), marital status (male: OR; 0.72, 95% CI 0.54 -1.11, female: OR 1.01; 95% CI 0.82-1.29), patient educational level and number of problems discussed with physician and consultation length between male patients and their physician were statistically significant and correlated with patients enablement to chronic disease ( $P < 0.05$ ).

**Conclusion:** This study shows that, patient's enablement in chronic disease is very low but constitutes an important arm in patients care management. It should be considered as a measurable patient outcome from healthcare services. More prospective studies on this important topic are highly recommended.

### Biography

Rabaa K Al Momen is a consultant and trainer family physician. He worked in the training of family physicians and research for many years. He is interested in doctor-patient communication skills teaching, quality improvement and patients safety, evidence based medicine and women health care. He has conducted and published research in the areas of interest.

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## Clinical presentation of ovarian tumor

Qamarunissa Muhabat Khan<sup>1</sup> and Fakharunissa Waheed<sup>2</sup><sup>1</sup>Aga Khan Maternal and Child Care Centre, Pakistan<sup>2</sup>Indus Hospital, Hyderabad Sindh, Pakistan

**Background:** Ovarian tumor is one of the most common gynecological tumor seen in females. In Pakistan, it is the 2<sup>nd</sup> most common cause of death in women malignancies after breast tumor. It is often called the “silent killer” because the disease is not often detected until it reaches an advance stage.

**Aim:** The aim of this study was to determine the frequency of various clinical presentations of ovarian tumors by age and stage that could lead to early diagnosis.

**Method:** A case series study was conducted in the department of Obstetrics & Gynecology at Isra University Hospital, Hyderabad. Data were obtained by history, detailed symptoms, physical examinations and relevant investigations. Then, diagnosis was confirmed by ultrasound or laparotomy and histopathology.

**Results:** In my study, majority of women i.e., 37 (38.1%) belonged to age group >60 years while 17 (17.5%) belonged to <30 years. Regarding the duration of symptoms i.e., 18 (18.6%) women had symptoms of less than six months while 42 (43.3%) women had symptoms for more than one year. Majority of women i.e., 47 (48.5%) were nullipara while 21 (21.6%) were multipara. Abdominal mass was shown i.e., 43 (44.3%) in women while 19 (19.6%) had increased urinary frequency, while 19 (19.6%) were asymptomatic. 77 (79.6%) patients had benign tumor while 20 (20.6%) patients had malignant ovarian tumor.

**Conclusion:** Ovarian malignancy is a serious disease affecting women of all ages. The women having history of malignancy in family should screen regularly specially in old age. So, it is concluded that for prognosis and patient survival, early detection and treatment is mandatory, which may reduce mortality. There is need to increase awareness of population. Detail physical examination and appropriate investigations should be carried out in every patient presenting with gynecological problem.

## Biography

Qamarunissa Muhabat Khan has completed her MBBS from Chandka Medical College, Larkana Pakistan. Later on, she completed her Post-graduation in Obstetrics and Gynecology from Isra University Hospital, Hyderabad and passed FCPS examination from College of Physician and Surgeons Pakistan (CPSP) and then started working as Consultant at The Aga Khan Maternal and Child Care Centre, Hyderabad, Pakistan.

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## Depression in adolescent students, Tabriz, Iran

Mahin Yazdani Zonouz, Hassan Asady, Mohammadali Greyshizade and Abdolrasool Safaian  
Tabriz University of Medical Sciences, Iran

**Introduction:** Depression is the most common mental disorders and a serious health problem in the world. It causes social, educational and biological problems in adolescents. Physiological changes during adolescence cause mental distress and make them more prone to depression. So, early diagnosis and treatment is very important.

**Aim:** Aim of this study was to examine depression in adolescent students and effects of related factors in schools of Tabriz, Iran.

**Materials & Method:** Data was gathered through the center of epidemiological studies depression scale for children from 903 adolescent students, including 455 boys and 448 girls who were selected by multi-stage cluster sampling. Data were analyzed by SPSS software/PC.

**Results:** The results showed that depression is a common event among adolescents. It was more in girls. There was correlation between depression and some factors such as: increased age, school and family problems, life events and self-concept of adolescents ( $p < 0.05$ ).

**Conclusion:** It is necessary that parents, primary healthcare centers and healthcare teams should pay more attention to risk factors of depression in adolescents.

## Biography

Mahin Yazdani Zonouz is a Registered Nurse of Faculty of Nursing & Midwifery at Medical Sciences University of Tabriz. She has completed her MS in Mental Health & Psychiatric Nursing of Medical Sciences. She has presented four articles in international conference. She has more than 25 years of experiences as a Nursing Instructor in Clinical Nursing Education.

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Day 2



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## Does the intervention of a community neonatal service, actually reduce hospital readmission? A case study of nasogastric tube fed infant over a 12 months' period

**Tendai Nzirawa**

Queens University Hospital, UK

Every year our neonatal unit discharges at least 6 infants on nasogastric tube feeding, in order to reduce length of stay and promote parent-infant bonding in a relaxed environment. Although, in 2015 one infant proved that the input of a community neonatal service can reduce length of stay, and also reduce readmission to the children's ward. (According to The Code-Nursing and Midwifery Council, 2015 the infant name has been changed and will be referred as summer). Summer was born in a level 3 hospital at full term and at examination was diagnosed with Laryngomalacia and severe hypotonic, Summer was transferred to a local level 2 hospital for continuity of care, however after a total of 2 weeks in hospital, a discharge planning meeting was done to discuss Summer's discharge including parental teaching for nasogastric tube feeding. Throughout, the 12 months' period that summer received support from the community neonatal nursing team; summer never attended A&E and also never was readmitted in the children ward. Summer's case study has proved that by having a Community Neonatal Service would reduce length of stay and reduce hospital readmission. In conclusion, it is important to recognize that this can only be achievable when there are other health professionals to ensure that the focus of the care is based on the infant's needs and unlimited parental support.

### Biography

Tendai Nzirawa completed undergraduate Diploma in Nursing studies (Adult) in 2005 (City University, London). She completed Bachelor of Science with Honours in Nursing Studies (Neonatal Care) in 2012 (City University, London). Currently, she is studying a Master of Science in Nursing Studies (Neonatal Care) London Southbank University, London. Since 2010, she has been involved in setting up and running a Neonatal Parent Support group with other health professionals. In 2012, she participated at the European academy of Pediatric Societies, Turkey (Poster Presentation) – The experiences of parents of infants on Home Oxygen.

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## Who provides primary care in Arizona?

Joe Tabor and Nick Jennings

University of Arizona College of Public Health, USA

Results from a community-level analysis of health providers show high spatial variability of the workforce data, greater susceptibility to data errors and bias due to incorrect assumptions about the data. Arizona has growing needs for primary care providers but information about the role and distribution is lacking. Primary care physicians, PAs, and NPs compared at zip code and county levels showed geographical maldistribution of professions that could influence the selection of preceptorship and residency training locations. County level comparisons between physician licensing board data and Health Professional Shortage Areas (HPSAs) data show a differential bias in magnitude and direction. State level comparisons underscore how a state such as Alaska can improve primary healthcare rankings by including physician assistants, nurse practitioners and certified nurse midwives. Spatial analysis of healthcare workforce and points of services will better inform policy development by federal and state governments, educational and professional organizations, and the private sector.

### Biography

Joe Tabor PhD, MPH is an Assistant Professor in the Center for Rural Health and has appointments in Community, Environment and Policy Department at the University of Arizona's College of Public Health in Tucson. His current research is in health care workforce and the epidemiology of valley fever (coccidiomycosis). He has 25 years of consulting experience in natural resource management, agriculture, and public health in North America, Caribbean, Africa, and Asia. This includes the disciplines of epidemiology, agronomy, botany, ecology, forestry, and pedology. He teaches environmental health policy.

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## The perceptions and knowledge of boys regarding deaths and complications related to traditional male circumcision

**Mbuyiselo Douglas**

Human Sciences Research Council, South Africa

Every year there are reported deaths of AmaXhosa male circumcision initiates, especially in the region of Pondoland in the Eastern Cape, a province in South Africa. These deaths are in particular due to complications such as dehydration, sepsis and gangrene. The primary purpose of the study was to explore the perceptions and knowledge of boys about the underlying determinants related to circumcision deaths and complications. A qualitative approach with exploratory and interpretive components was followed. A simple random sampling was used to select 3 focus group discussions with 36 circumcised boys. A purposive sampling was used to select 10 key informants for semi-structured interviews. One question was asked from the participants: Why boys are dying in the circumcision initiation schools? The Tesch's eight steps data analysis method was used. The data was organised and prepared for analysis by first transcribing the interviews verbatim and then translating the transcriptions. Four overall themes were developed during data analysis: (1) Unskilful and inexperienced traditional practitioners; (2) Assaults and torture in the initiation schools; (3) Restriction of fluids and food; (4) Action that should be taken to prevent the problem. The inexperienced and unskilful traditional practitioners were identified to be the main cause of the problem. The preventive action was recommended to empower the target groups and thereby protect the children.

### Biography

Mbuyiselo Douglas was awarded an AusAID, Nelson Mandela Scholarship to study Master of Public Health degree at Curtin University in Western Australia which he obtained in 2004. He graduated PhD in Health Sciences at Walter Sisulu University. He has been a senior lecturer and an acting head of department. He has published 5 papers in accredited journals and was also coordinating Ubuntu Bethu Circumcision Project at Nyandeni in the Eastern Cape Province funded by AIDS Foundation South Africa (AFSA). He is now on a three year contract for Post-doctoral research fellowship at Human Sciences Research Council in South Africa.

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## Access to health care in the Democratic Republic of Congo: Major challenge for the poor (case report)

**Innocent Emmanuel Kongo**

University Libre of Kinshasa, DR Congo

General situation of hospitals and health care. Access to health care is a universally human rights established and recognized internationally, regionally and nationally by several legal instruments including the Universal Declaration of Human Rights, the International Covenant on Economic Social and Cultural Rights, the African Charter on Human Rights and peoples and the Constitution of 18 February 2006 in the Democratic Republic of Congo. The best quality of health care depends on several parameters: political, cultural, demographic, security, socio - economic. In order to improve the health sector, the Congolese Government had, in the legislature from 2006 to 2011, placed health in five priorities project of the Democratic Republic of Congo. [ 1 In the context of reaching the completion Point, the Democratic Republic of Congo received from the international financial institutions to reduce its debt by 12.3 billion US dollars.] The CAMPUS of HEALTH -NGO and its allies were compelled to launch the investigation in difference's hospitals. To do this, We've sending investigators to collect lots of data relevant to the preparation of this report with patients, doctors, nurses and the public.

### Biography

Innocent Emmanuel KONGO has completed his graduation at the age of 27 years from University Libre of Kinshasa and is International Master Studies from Sao Paolo Institute of Public Health. He was the director of Medical staff service of CARITAS organization. He has published more than 15 papers in reputed journals and has been serving as an editorial board member of repute. The Libyan Board of Medical Specialties and Jamaharya Medical Revue, DRC Epidemiological Revue, He is actually CEO of CAMPUS of HEALTH DRC NGO working in partnership with the Ministry of Health, The Ministry of Gender, Family & Child and The Christian Church in DRC.

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## The honest hairy truth about PCOS: What your teenage patient wants to know but is afraid to ask?

**Asma Javed**

Mayo Clinic, Rochester MN, USA

The overall purpose of the proposed activity would be to discuss evidence based guidelines for the diagnosis and management of PCOS in light of the most common complaints adolescents with PCOS present with. Current controversies in management of young females with PCOS will be highlighted using a case based discussion format. At the end of the session, participants will be expected to: Understand the concept of morphing PCOS phenotype across stages of life and the role of prenatal (fetal) programming to early childhood obesity and premature puberty in the development of PCOS; work through a number of cases highlighting common complaints the adolescent with PCOS presents with such as hirsutism and acanthosis nigricans and provide best practice advice including new treatment modalities available to address hirsutism and acanthosis nigricans and; discover current controversies in PCOS evaluation such as 'mass screening' for complications such as glucose intolerance and 'pan androgen testing'.

### Biography

Asma Javed, MD has completed her Medical School degree in Pakistan at Aga Khan University. She then completed Residency in Pediatrics at Mayo Clinic, Rochester MN followed by Pediatric Endocrinology Fellowship training at Mayo Clinic, Rochester MN. She is currently on staff at Mayo Clinic and speaks frequently at regional and national meetings on topics related to Women's Health.

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## Perceived prenatal care benefits in late adolescent latinas born in the United States

**Rosamar Torres**

UCLA School of Nursing, USA

In an effort to understand latinas' inadequate use of prenatal care (PNC) services, research has centered on exploring perceived barriers to access/utilization and has focused on latinas overall without accounting for age or birth country. Therefore, little is known about the perceived benefits of PNC utilization in late adolescent latinas. This retrospective study included 54 latinas that were recruited from online blogs, discussion forums, and groups geared towards pregnant teens and/or latinas. Eligibility criteria were: Born in the U.S.; between 18-21 years;  $\leq 12$  months postpartum and; uncomplicated pregnancy and delivery. Perceived PNC benefits were measured by the Better Babies Survey (BBS). A majority (95%) of participants perceived timely (1st trimester) and adequate ( $\geq 12$  visits) PNC as important. However, only 56% of the sample entered PNC in the 1st trimester, and over 90% of the sample obtained inadequate PNC. There were no statistically significant differences in BBS scores between participants with timely or late PNC or with adequate or inadequate PNC. A logistic regression determined that BBS scores predicted timely entry into PNC,  $\chi^2(3)=13.38$ ,  $p=.004$ . A multinomial regression determined that BBS scores did not predicted adequate, intermediate or inadequate PNC utilization ( $p=.51$ ). This study reveals that late adolescent latinas have positive opinions of PNC and they believe that it is important for healthy pregnancy/delivery outcomes, and are aware of the appropriate timing and utilization of care. However, this population likely faces multiple access and utilization barriers beyond their control.

### Biography

Rosamar Torres completed her PhD in Nursing from The University of Texas at Austin. She completed her Post-doctoral training at University of California, San Francisco, School of Nursing. She is currently an Assistant Professor at University of California, Los Angeles, School of Nursing. Her clinical background is in Pediatric and Neonatal ICU nursing.

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### Notes:

2<sup>nd</sup> Annual Congress and Medicare Expo on

# Primary Care & General Pediatrics

September 19-20, 2016 Phoenix, USA

## Confluence of biological inspiration and chemical intuition in search of novel drugs against malaria

**Dinkar Sahal**

International Centre for Genetic Engineering and Biotechnology, India

The parasite that causes malaria has been tormenting mankind for a long time and the image of a child dying of malaria every minute continues to haunt us even today. Our handling of malaria for the last hundred years has taught us that the malaria parasite which relishes riding on the invertebrate mosquito vector to fly from one vertebrate victim to another vertebrate host is not easy to control. Its ancient heritage appears to have taught the parasite to emerge with heightened vengeance whenever we have challenged it with either ill equipped vaccines or misused drugs. Today's malaria parasite is well equipped to conquer almost all anti-malarial drugs through resistance and we have miles to go before we have credible vaccines against malaria. While it is true that our best drugs against several diseases including Malaria have been gifts of nature, it is equally true that synthetic medicinal chemistry has played a commendable role in chiseling and tweaking Nature's pharmacophores to enhance potency, decrease toxicity and making drugs affordable for the poorest of the poor. My talk will illustrate the ethos of my laboratory which is to study marine organisms, medicinal plants, *Cyanobacteria* and endophytic fungi for new drugs against Malaria. Towards this mission, we are using high through put fluorescence based micro-titer plate assays to culture the malaria parasite in human red blood cells and to examine the effects of potential drugs on the growth of the parasite. On finding hits, we subject natural extracts to activity guided high resolution chromatographic separation to isolate highly purified compounds against Malaria. Working in close association with "chemical collaborators" we then determine the chemical structures of Nature's pharmacophores and validate the same through chemical synthesis. While the pursuit of discovering novel anti-malarial is continuing, we are currently engaged in fine tuning of a natural antimalarial for optimum medicinal properties and drug ability.

### Biography

Dinkar Sahal's laboratory epitomizes a vibrant atmosphere for both design and discovery of novel antibiotic peptides and anti-malarial drugs. The foundations for understanding the mechanisms of action and discovery of the origins of potency, synergy among antibiotics and broad spectrum of action of antibiotic peptides has been laid in his laboratory. Likewise discovery of novel drugs against drug resistant malaria is a major passion of his laboratory. He has published more than 75 papers in reputed journals and has been serving as a Reviewer and an Editorial Board Member of different journals.

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## Adjustment of preoperative fasting guidelines for adult patients undergoing elective surgery

Solmaz Fakhari, Samira Yavari, Jafar Rahimi Panahi, Mohammadreza Afhami, Bahman Nagipour, Hojjat Pourfathi, Haleh Farzin and Ladan Javidi  
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**Introduction:** The typical order of nothing per oral (NPO) after midnight has been challenged in recent years, thus, the American Society of Anesthesiology (ASA) revised in practice guidelines for preoperative fasting in healthy patients undergoing elective procedures, but many studies showed that guidelines were not considered in clinical practice.

**Aim:** The aim of this study was to evaluate the adjustment of preoperative NPO time with fasting guidelines in adult elective ophthalmic surgeries in a university educational ophthalmology hospital in Tabriz, Iran.

**Method:** In three months period, this descriptive study was conducted on 250 patients who scheduled for elective eye surgery. The investigator interviewed with patients before beginning of anesthesia and evaluated fasting duration for heavy meal, light meal and clear liquids and his or her satisfaction from NPO time and also investigated which staff recommended NPO time before anesthesia induction.

**Results:** Fasting duration from heavy and light meal and clear liquids was 14.31 hours (8-23 hours), 12.46 hours (6-21 hours) and 11.54 hours (3-18 hours), respectively, that was not consistent with ASA guidelines. The discontent of the patients from prolonged NPO time was 60.8%. The most complaint was thirsty (42%). Ward nurses were the personnel who had the primary role in patients fasting time period (47.6%).

**Conclusion:** Preoperative fasting duration for heavy and light meal and clear liquids for elective ophthalmic surgery in this teaching hospital was very long and not consistent with ASA guidelines

### Biography

Solmaz Fakhari is an Assistant Professor of Anesthesiology and an academic member of Department of Anesthesiology at the Tabriz University of Medical Sciences (TUMS), Iran, since 2011. She qualified in General Medicine (1993-2000) and Specialty in Anesthesiology (2005-2009) at TUMS. She qualified in Palliative Care Medicine in 2011 after participating in 18 months long period fellowship program at TUMS. She has experience in Ophthalmic, Gynecologic and Orthopedic Anesthesia and Pain Medicine fields, and collaborated in many research, nine of them were published in medical journals.

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