



5<sup>th</sup> World Congress on

# **Public Health, Nutrition & Epidemiology**

July 23-24, 2018 Melbourne, Australia

## **e-Poster**

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**The standing long jump as a function of developmental movement pattern in children****Ching-Er Lin**

National Taichung University of Education, Taiwan

**Purpose:** The purpose of this study was to investigate the relationships between the movement pattern and movement performance of standing long jump in children.

**Methods:** There were 63, 5-year-old and 57, 7-year-old males, 120 in total, participating in this study. All of participants were naive as to the purpose of the experiment. Informed consent was obtained from the school, as well as from the parents/guardians and in addition, assent was obtained from the children. A camcorder was used to record the movement pattern and the performance of standing long jump. The kinematic parameters were acquired by Kistler force platform. The movement pattern was classified into parts of developmental sequence by the checklist of arm action, leg action and whole body. Independent two-way ANOVAS with Scheffe post-hoc were used to analyze the effects of ages and movement patterns on the distance of standing long jump, kinematic parameters and dynamic parameters. The alpha levels were set at 0.05.

**Findings:** The results showed that: (1) 5-year-old and 7-year-old children's motor development was not yet totally mature; (2) The jumping distance was affected by age and motor development. The jumping distance of 7-year-old children were better than 5-year-old children. The jumping distance was caused by whole body mature movement pattern; (3) 7-year-old children had better jump distance due to the take-off angle of 7-year-old children were less than 5-year-old children and the horizontal speed were larger than 5-year-old children.

**Conclusion:** Therefore, this study provides as the base for empirical researches that the developmental sequences of standing long jump could validly predict the age of performer but not only age dependent.

**Biography**

Ching-Er Lin has obtained her PhD degree from National Taiwan Normal University with an emphasis in Motor Behavior (i.e., motor development, motor control and motor learning). Currently, she is an Associate Professor in the Department of Physical Education at the National Taichung University of Education, Taiwan. She is also a Member of the North American Society for the Psychology of Sport and Physical Activity (NASPSA). Her research interests are in motor skill performance, including individual, task and environmental factors.

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**Notes:**



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## Accepted Abstracts

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**Multidimensional intervention for improving health care waste management in Nepal****Deepak Timsina and Thapa T**

Worldwide Intellectual Property Solutions, Nepal

**Statement of the Problem:** The Nepal health sector strategy (2015-2020) has outlined quality of care through improved infection prevention and Healthcare Waste Management (HCWM) practices. The health facility survey (2015) depicts 92% of district hospitals segregate health care waste, but only 77% adhered to the ministry of health HCWM guidelines. This study was conducted between mid-2016 and December 2017 to investigate the gaps and feasibility of a quality improvement process through HCWM at Trishuli District Hospital.

**Methodology & Theoretical Orientation:** The study included a mixed-method baseline assessment to evaluate the quantity of waste (hazardous/non-hazardous) generated, equipment/infrastructure, readiness of the hospital and existing HCWM practices. Based on the findings, awareness raising and capacity building, interventions were instrumented for 15 months, along with a HCWM plan with specific interventions on infrastructure, capacity building and localized actions. Final assessment was held in December 2017.

**Findings:** Trishuli Hospital generated 36.05 kg of health care waste daily gets composed of hazardous infectious waste 65%, hazardous sharps 16%, pathological waste 15% and other 4%. Challenges include lack of HCWM plan, lack of technical skills, aggravated by poor hospital infrastructure. Like NHFS findings, the non-segregated wastes were burnt in an open pit near the hospital. Health care risk waste reduced from 33% to 20% of the total waste. While wards practiced proper segregation into color-coded bins, the hospital constructed a treatment plant and institutionalized HCWM through mentoring/coaching and regular monitoring. Hospital had adherence to HCWM standards and increased staff readiness followed by municipal sponsorship on exposure visit to health workers to good practices in two other hospitals and commitment to remove treated HCW from the hospital.

**Conclusion & Significance:** Multidimensional intervention covering infrastructure, awareness and capacity development improves HCWM practices to reduce hazardous waste to 20% and adherence to national standards in Nepal.

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**The role of vitamin D/VDR signaling within key mechanisms of ulcerative colitis**

James Andrew Matthews

Middlesex University London, UK

**Statement of the Problem:** Epidemiological evidence has shown an associative relationship between low serum vitamin D levels (<35 ng/mL) and disease activity in ulcerative colitis patients. The biological activity of vitamin D is observed to occur through ligand bonding with the VDR, which is highly expression within intestinal epithelial cells. Due to the observed immune modulatory effect of vitamin D/VDR signaling and the high expression of the VDR within the intestinal track, this review aims to elucidate what role vitamin D/VDR signaling may play in key mechanisms of colitis is to include intestinal barrier dysfunction, IEC apoptosis, macrophage inflammation, reduced and penetrable mucus layer. Furthermore, due to the associative link between low serum vitamin D and disease, this review aims to critically appraise the efficacy and safety of vitamin D supplementation in UC patients.

**Methodology:** A systematic and replicable search strategy was employed within this review. PubMed was systematically search from 2005 to 2016 using the terms ulcerative colitis or colitis or inflammatory bowel disease or IBD, followed by key search terms pertinent to the mechanism under investigation. Of the 1140 papers returned, 80 papers were accepted within this review.

**Results:** Within this review, TNF-a was observed to promote intestinal permeability, macrophage inflammation and apoptosis in a NF-kB dependent mechanism. TNF-a signaling was observed to up regulate the expression of the NF-kB protein p65, which was observed to promote intestinal permeability through the up regulation and phosphorylation of myosin light chain kinase, to promote intestinal epithelial cell apoptosis through the up regulation of p<sup>53</sup> Up regulated Modulator of Apoptosis (PUMA) and to promote excessive and prolonged macrophage inflammation through the inhibition of Suppressor of Cytokine Signaling 1 (SOCS1). Conversely, vitamin D/VDR signaling emerged as a key inhibitor of P<sup>65</sup> associated transcriptions, being observed to physically bind with the p65 protein and attenuate its transcriptional activity. The VDR was observed to be significantly down regulated in the active lesions of ulcerative colitis patients and significantly associated with an exacerbation of colitis symptoms in murine models. TNF-a was observed to actively down regulate the expression of the VDR in a microRNA-346 dependent mechanism, whereas, 1, 25(OH) 2D3 supplementation was observed to promote VDR expression. An associative relationship was proposed within this review between vitamin D/VDR signaling, cathelicidin expression and the promotion of mucus production. However, there was paucity in studies investigating this relationship explicitly and so the association remains speculative at this time. 1, 25(OH) 2D3 supplementation emerged as a safe and effective way to increase serum vitamin D levels in ulcerative colitis patient, with 2000 IU/day being observed as an efficacious, safe dose associated with increased serum vitamin D levels.

**Conclusion & Significance:** Increasing mechanistic evidence suggests a role for vitamin D/VDR signaling within key mechanisms of colitis. Further investigation is required to ascertain whether VDR down regulation in the active lesions of UC patients is an associative factor in colitis severity and progression. The therapeutic potential of vitamin D supplementation in ulcerative colitis patients' warrants further investigation in long term randomized controlled trials.

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**Attitudes of French general practitioners towards people with alcohol use disorders: A mixed-method study****Marie Costa**

Economic and Social Sciences of Health and Medical Information Processing, France

**Statement of the Problem:** Alcohol Use Disorder (AUD) is a major public health concern in France, especially because a large proportion of people concerned do not receive medical care for this disorder. While AUD care is available in specialized center, General Practitioners (GP) are in the first line to screen and manage AUD and/or to refer People with Alcohol Use Disorder (PWAUD) to specialized care providers. Alongside that, the most recent French guidelines on alcohol misuse focused on reduced alcohol drinking as a new therapeutic goal and the related availability of two new pharmacological treatments. We conducted a mixed-method study to explore French physicians' perceptions and practices regarding PWAUD in the context of new national guidelines and treatment options in France.

**Methodology & Theoretical Orientation:** We performed both semi-structured interviews (n=14) and a survey among 101 French GP. We used a thematic analysis to explore qualitative data. Concerning quantitative data, a descriptive analysis was performed and we searched factors associated with AUD management.

**Result:** We identified four main themes as pillars of GP practices regarding PWAUD- Baclofen as a driver of renewed interest in AUD care, PWAUD profile diversity, strategies to get around patient denial when screening for AUD and opportunistic screening for AUD. On the 101 respondents, 69.3% (n=70) managed AUD by themselves or helped by AUD specialist, 31.7% (n=32) reported to perform systematically AUD screening and almost half of the participants (47.5%, n=48) thought that abstinence was the only appropriate therapeutic goal for PWAUD. GP who screened AUD systematically were more likely to be favorable to controlled drinking.

**Conclusion & Significance:** GP in France do not perform the brief AUD interventions currently suggested by recommendations. Instead they develop their own tools to screen for and manage AUD. Taking GP experiences and practices into account could be useful to enhance existing guidelines and recommendations. However, providing AUD information and training to GP remains important as our study highlights that AUD screening is not performed systematically in general practice.

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**The pancharatna model of child nutrition, growth and development****Mickey Mehta**

Mickey Mehta beyond Fitness Pvt Ltd, India

A child is an opportunity, soft clay waiting for taking shape. The earlier days certainly require, caring palms, soothing balms, as every child grows and blossoms better with deep sense of security. Nurturing them with love is primary and a 24x7 connect becomes fundamental for it to bloom. Remember every child is born with a unique genetic signature and before it becomes a conscious human being it is a natural creature. Letting the child remain uninhibited in terms of rolling on the ground, crawling around and constantly chuckling around is paramount. Everything that they ingest is what they will be made up of and that is exactly what they grow to become. A child ought to be fed environmentally well; with loads of sunshine, spending time in open spaces, places to run and jump from trees, listening to chirping of birds and humming of bees. This is primary nourishment that every child needs. And mind you, humans cultivate taste unlike animals that eat instinctively; thus the child must only know the taste of nature that of natural wholesome food, fruits and vegetables to start with, dry fruits, nuts and whole grains to follow. Children need to be active and playful throughout, challenging the body and mind shapes them into the high achievers of tomorrow. The balance of mind and the heart, thinking and feeling should be well inculcated with lessons for reasoning and on sharing as well. The children have mirror neurons; their learning ability without reasoning and analysis till the age of 7 is phenomenally high. Moral science and community living through anecdotes and legendary stories should be a part of the personality development, seeding character forming inspiration thereby. Since each child is born with a distinct genetic signature, its unfolding also happens equally unique; but the science says though the predetermined disposition can be altered with intelligent and conscious intervention of lifestyle inputs and choices. A child's growth and development can far exceed the gene program it is born with, if and when it is nurtured and groomed with the pancharatna model of nutrition and development for children designed from the knowledge and wisdom of the ancient Indian Vedas.

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**Using the see and treat approach to cervical cancer screening and prevention: A community led program in rural Haiti****Mikal Finkelstein**

CapraCare Inc. Haiti, USA

Cervical cancer has become a disease of the poor. In low resource settings such as Haiti, most women do not have access to preventive screenings such as Pap smears. Haiti, therefore, has among the highest incidence and death due to cervical cancer in the world. The see and treat approach using Visual Inspection with Acetic acid (VIA) has been successfully utilized in many developing countries to improve cervical cancer prevention. It is simple and cost effective and can be performed by nurses. Women can be treated the same day for precancerous lesions with cryotherapy or thermocoagulation. The CapraCare clinic in Fonfrede is a community run facility in southern Haiti. The Greater Fonfrede area encompasses 160,000 people with little access to healthcare. This initiative included the training of local physicians and community health workers. Local staff conducted community outreach and cervical cancer education of the Greater Fonfrede community. The see and treat protocol led to the diagnosis, treatment and referral for precancerous and cancerous lesions in a population previously which would not have had such access to care. Significant results include the education of community health workers, training local clinicians and strengthening community partnerships. In addition, we created cervical cancer educational materials and a clinical training program. We performed community outreach in (n=1529) and monthly cervical cancer education sessions (n=295). Approximately, half of those educated came in for the screening test. Clinical outcomes reflected those in the literature. Lessons were learned about community engagement, outreach and how implementation may influence screening utilization. Approaches such as see and treat can have great impact on improving social disparities in health, however too few community based programs that have been studied. Learning from this experience can help to expand such programs and lead to future implementation in other settings.

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**Strategic government for syndrome of congenital Zika virus infection in Brazil: Three years after****Monica Guimaraes Macau Lopes**  
Ministry of Health, Brazil

**Statement of the Problem:** The increase in the number of reports of suspected cases of microcephaly from October 2015 in Brazil, mobilized managers and health professionals from all over the country to deal with this problem as well as technicians in the areas of health surveillance and care.

**Methodology & Theoretical Orientation:** It is worth emphasizing that much fundamental knowledge to face this situation are being produced in an unprecedented way in our country, with the support of national and international organizations. Likewise, several strategies are under construction in an interministerial way, such as the first to be adopted, the rapid action strategy (EAR). Two years later, the strategy for strengthening care management for children with congenital Zika virus syndrome and their families in six states with more cases for municipalities, all in northeastern Brazil was implemented.

**Findings:** Both, the EAR and the new strategy adopted brought the comfort with the definitive diagnosis, qualified care and a humanized and continuous attention of health care and social assistance were adapted to the needs of each child and his family. The investment in assistance and financial investment since 2015 has been increasing care, qualifying the early stimulation and social inclusion in schools and kindergartens. It is the involvement and interpersonal responsibility for the public health, public education and social assistance for the care of children with disabilities, in a general way since it involves their psycho-cognitive-motor development.

**Conclusion & Significance:** This panel brings up the analysis of the care of these children and their families, after the impact of the microcephaly outbreak and demonstrated the advances in the process of notification of cases and the definition of suspicion, confirmation and dismissal cases, as well as the investments made available.

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**Distribution and patterns of common mental health disorders in Uganda, 2017**Alitubeera Phoebe Hilda<sup>1</sup>, Daniel Kadobera<sup>1</sup>, Benon Kwesiga<sup>1</sup>, Alex Rioplexus Ario<sup>1</sup>, Hafsa Lukwata<sup>2</sup> and Ndyabangi Sheila<sup>2</sup><sup>1</sup>Uganda Public Health Fellowship Program, Uganda<sup>2</sup>Ministry of Health, Uganda

**Background & Aim:** Mental, Neurological and Substance abuse (MNS) disorders affect 25% of the global population. In Sub-Saharan Africa MNS disorders account for 19% of years lived with disability. Empirical evidence shows MNS disorders disproportionately affect the poor and undermine efforts to achieve sustainable development goals. Surveillance of MNS disorders is invaluable for adequate and appropriate service delivery targeting persons with the disorder. We sought to determine trends and distribution of common mental, neurological and substance abuse disorders in Uganda using national health surveillance data.

**Method:** We conducted secondary data analysis on Common Mental and Neurological Disorders (CMNDs) from the Health Management Information System between 2012 and 2016. Disorders assessed included anxiety disorders, bipolar, childhood disorders, epilepsy, depression, schizophrenia, HIV psychosis, dementia and other mental disorders. Descriptive statistics are presented using proportions of CMNDs by sex, region, age and case type. Proportions of CMNDs were calculated by dividing the number of cases by the total population of the region. Population data was obtained from the 2014 census. We analyzed trends of CMNDs from 2012 to 2016.

**Result:** Prevalence of all CMNDs was similar between males (15/1000) and females (16/1000). Epilepsy was the commonest disorder (7.6/1000), followed by Bipolar affective disorder (2.4/1000). Northern Uganda accounted for the largest prevalence of epilepsy (10/1000) while central Uganda had the highest prevalence of bipolar affective disorder (6.2/1000), schizophrenia (2.6/1000), depression (1.8/1000) and HIV-related psychosis (1.1/1000). On average, CMNS increased 9% annually from 2012-2016.

**Conclusion:** CMNDs are highly prevalent. Epilepsy accounts for the largest burden with Northern Uganda being most affected region. CMNDs increased over the period evaluated. We recommend enhancement of mental health services based on this evidence.

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**Trend of caesarean deliveries in Egypt and its associated factors: Evidence from national surveys, 2005-2014****Rami H Al-Rifai**

United Arab Emirates University, UAE

**Statement of the Problem:** The continued rise in Caesarean section (C-section) deliveries raises a major public health concern worldwide.

**Methodology & Theoretical Orientation:** The trend of C-section deliveries was tracked from 2005 to 2014 and the factors associated with a rise in C-section deliveries among the Egyptian mothers, from 2005 to 2014 were examined by place of delivery. Total samples of over 29,000 Egyptian mothers were surveyed in 2005, 2008 and 2014.

**Finding:** Institutional-based C-sections increased by 40.7 points from EDHS-2005 to EDHS-2014 (aOR, 3.46, 95% CI: 3.15-3.80, P-trend<0.001). Compared to mothers with low Socioeconomic Status (SES), mothers with high SES had higher odds (aOR, 1.78, 95% CI: 1.25-2.54, P=0.001) for C-section, but only in EDHS-2005. The adjusted trend of C-sections was found to be 4.19-time (95% CI: 3.73-4.70, P<0.001) higher in private sector while that in public sector it was 2.67-time (95% CI: 2.27-3.13, P=0.001) higher, in EDHS-2014 relative to EDHS-2005. This increase in the private sector is explained by significant increases among mothers who are potentially at low risk for C-sections; mothers aged 19-24 years vs. ≥35 years (aOR: 0.31; 95% CI: 0.21-0.45; in EDHS-2005 vs. 0.43, 95% CI: 0.33-0.56, in EDHS-2014, P<0.001); primigravida mothers vs. mothers with ≥4 children (aOR: 1.62; 95% CI: 1.12-2.34, in EDHS-2005 vs. 3.76, 95% CI: 2.94-4.80 in EDHS-2014) and among normal compared to high risk birth weight babies (aOR: 0.79, 95% CI: 0.62-0.99 in EDHS-2005 P<0.05 vs. 0.83; 95% CI: 0.65-1.04 in EDHS-2014, P>0.05).

**Conclusion:** The steady rise in C-sections in Egypt has reached an alarming level in recent years. This increase appears to be associated with a shift towards delivery in private health care facilities. More vigilance of C-section deliveries, particularly in the private sector, is warranted.

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## PUBLIC HEALTH, NUTRITION &amp; EPIDEMIOLOGY

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**An assessment of the relationship between m-health and health literacy typologies on foodborne diseases in James town, Accra, Ghana****Sangeeta Gupta, Raymond Tutu, John Boateng, Janice Busingye and Sathya Elavarthi**  
Delaware State University, USA

**Statement of the Problem:** In this exploratory study, we examined the relationship between receipt of health information on one's mobile phone and their health literacy on foodborne diseases. In the developing world, diarrheal diseases are still the leading cause of death among children under five years of age. Ghana experiences high incidence of foodborne illnesses annually.

**Methodology & Theoretical Orientation:** A survey questionnaire was administered to a random sample of 401 individuals in James Town, Accra. ANOVA tests were undertaken to assess bivariate association between health literacy and m-health. Multiple adjusted linear regression models were used to examine the relative effects of receipt of health information on mobile phone on health literacy.

**Result:** The instrument was internally consistent (Cronbach alpha=0.754) and valid. At the bivariate stage of analyses, receipt of health information on mobile phone, age of respondents and educational level of participants were statistically significant with health literacy. The multiple regression models showed that receipt of health information on mobile phone and educational level are predictors of health literacy. After controlling for age, we found that a unit increase in the extent of receipt of health information is associated with 0.478 increases in health literacy score. Although, receipt of health information on mobile phone loses its predictive power after controlling for both education and age, we found that a unit increase in one's education was associated with 0.644 increases in health literacy score.

**Conclusion & Significance:** The study demonstrated a direct positive relationship between receiving health information on mobile phone and health literacy controlling for covariates in the urban poor context. That means m-health programs that use the mobile phone as health messaging outlet may, in fact, enhance health literacy among the poor. Future studies may have to design examine specific health information and messages received and their association with different health literacy typologies.

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**Nutritional management cirrhosis of the liver disease: A case report****Verona Mulgrave, Oyonomo Ntekim and Chimene Castor**  
Howard University, USA

**Statement of the Problem:** According to the nation center for health statistics, cirrhosis of the liver is the 12th leading cause of death in the US and it is primarily caused by alcoholic liver disease. National center for health statistics indicated cirrhosis is higher in blacks than in whites and the highest mortality rate is among Hispanics. Results from NHANES suggested that the frequency of steatohepatitis and cirrhosis varies significantly by ethnicity of 45% Hispanics, 33% whites and 24% among blacks, Mexican Americans and Blacks have a greater risk of developing liver diseases than their white counterparts.

**Methodology & Theoretical Orientation:** The objective of this study is to investigate the importance of specific nutrients in the nutrition management of cirrhosis of the liver. This study was a single-subject case report of a 49-year-old African American male that was diagnosed with several comorbidities including idiopathic cirrhosis of the liver. This subject was chosen at random from the Howard University Hospital. Data was gathered from both primary and secondary sources including medical records, interview of nurses and patient's interview. Patient underwent paracentesis and thoracentesis (thoracentesis) to remove excess fluids. Dietary recall and food charts were used to gather dietary information and to monitor intake over a two-week period. Dietary intervention was completed over a 3-weeks period. Post examinations were completed including physical and medical examinations, dietary evaluation as well as biochemical data collection. All data were analyzed against standards.

**Findings:** 49-year-old African American male with social history of smoking tobacco was admitted due to abdominal pain and distention for 2-weeks. Patient was diagnosed with cirrhosis of the liver, dyslipidemia, hypertension, fluid overload, diabetes mellitus and chronic renal insufficiency. Physical examination reveals the presence of ascites, jaundice and scratch marks, skin rashes and skin discoloration. Nutrition focus finding reveals that patient was emaciated, had temporal wasting, bilateral edema as well as several incidences of vomiting and constipation. Patient underwent paracentesis and thoracentesis to remove excess fluids. Prior to being hospitalized patient was consuming a high sodium, high fat diet and was noncompliant with previous diet regiment. The patient was discharged after eight days of hospitalization.

**Summary of Investigation:** Patient had several nutrition diagnoses including malnutrition, inadequate oral intake and impaired nutrient utilization and increase energy and nutrient requirements. Goals for treatment included providing adequate energy, protein vitamin and minerals as well as improvement in nutritional by promoting weight maintenance. Patients' weight was stabilized on a 1000 ml-1500 ml fluid restriction, 1800 kcal and 75 g of protein diet. Patient had a fair appetite (consumed 60% of 3 meals per day). Patient's liver condition was stabilized with a diet prescription of 2 g Na diet, CHO controlled, medium chain fat supplementation and multivitamin supplementation as evidenced by stabilized lab values for AST, ALT, ALP, PT and PTT. Lab values of LDL, TAG was normalizing after the reduction in fat and cholesterol diet, which was administered along with Simvastatin over a 10-day period.

**Conclusion & Significance:** Nutrition plays a key role in the management of cirrhosis of the liver specifically restricting fluid and sodium, providing adequate carbohydrate, protein and medium chain fatty acid as well as micronutrients such as B vitamins and the fat-soluble vitamins.

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