

2014

# Health & Medical Sciences Abstracts

Second Annual International  
Conference on

Health & Medical Sciences

5-8 May 2014, Athens, Greece

Edited by Gregory T. Papanikos

THE ATHENS INSTITUTE FOR EDUCATION AND RESEARCH





Health & Medical Sciences  
Abstracts

2<sup>nd</sup> Annual International  
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## Preface

This abstract book includes all the summaries of the papers presented at the *2<sup>nd</sup> Annual International Conference on Health & Medical Sciences, 5-8 May 2014*, organized by the Health Research Unit of the Athens Institute for Education and Research. In total there were 58 papers, coming from 27 different countries (Albania, Australia, Brazil, Canada, China, Czech Republic, Denmark, Egypt, Estonia, India, Japan, Kazakhstan, Kingdom of Bahrain, Kosovo, Libya, Malaysia, Palestine, Saudi Arabia, Singapore, Slovak Republic, South Africa, Sudan, Sweden, The Netherlands, Turkey, UK and USA). The conference was organized into 12 sessions that included areas of Health & Medical Sciences and other related fields. As it is the publication policy of the Institute, the papers presented in this conference will be considered for publication in one of the books of ATINER.

The Institute was established in 1995 as an independent academic organization with the mission to become a forum where academics and researchers from all over the world could meet in Athens and exchange ideas on their research and consider the future developments of their fields of study. Our mission is to make ATHENS a place where academics and researchers from all over the world meet to discuss the developments of their discipline and present their work. To serve this purpose, conferences are organized along the lines of well established and well defined scientific disciplines. In addition, interdisciplinary conferences are also organized because they serve the mission statement of the Institute. Since 1995, ATINER has organized more than 150 international conferences and has published over 100 books. Academically, the Institute is organized into four research divisions and nineteen research units. Each research unit organizes at least one annual conference and undertakes various small and large research projects.

I would like to thank all the participants, the members of the organizing and academic committee and most importantly the administration staff of ATINER for putting this conference together.

**Gregory T. Papanikos**  
**President**



**Athens Institute for Education and Research**  
**Human Development Research Division**  
**Research Unit of Health**



**C O N F E R E N C E P R O G R A M**  
**(The time for each session includes at least 10 minutes coffee break)**

**Organization and Scientific Committee**

1. Dr. Gregory T. Papanikos, President, ATINER.
2. Dr. George Poulos, Vice-President of Research, ATINER & Emeritus Professor, University of South Africa, South Africa.
3. Dr. Zoi Boutsioli, Deputy Head, Health Research Unit, ATINER & Instructor, Open University of Greece.
4. Dr. David M. Wood, Academic Member, [Health Research Unit](#) and [Chemistry Research Unit](#), ATINER & Research Fellow, Institute of Pharmaceutical Sciences, King's College London, U.K.
5. Dr. Nicolas Abatzoglou, Head, [Environment Research Unit](#), ATINER & Professor, Department of Chemical & Biotechnological Engineering, Université de Sherbrooke, Canada, Chair Pfizer, PAT in Pharmaceutical Engineering, Director GREEN-TPV and GRTP-C & P.
6. Dr. Paul Contoyannis, Head, Health Research Unit, ATINER & Associate Professor, McMaster University, Canada.
7. Dr. Panagiotis Petratos, Vice President of ICT, ATINER & Associate Professor, Department of Computer Information Systems, California State University, Stanislaus, USA.
8. Dr. Nicholas Pappas, Vice-President of Academic Affairs, ATINER & Professor, Sam Houston University, USA.
9. Dr. Chris Sakellariou, Vice-President of Finance, ATINER & Associate Professor, Nanyang Technological University, Singapore.
10. Dr. Andy Stergachis, Professor, University of Washington, USA.
11. Dr. Daphne Halkias, Fellow, Institute of Coaching at McLean Hospital, Harvard Medical School, USA.
12. Dr. Melina Dritsaki, Research Fellow, Brunel University, U.K.
13. Mr. Apostolos Tsiachristas, Junior Research Fellow, Institute for Medical Technology Assessment, Erasmus University Rotterdam, the Netherlands.
14. Mr. Vasilis Charalampopoulos, Researcher, ATINER & PhD Student, University of Stirling, U.K.
15. Ms. Effie Stamoulara, Researcher, ATINER.
16. Ms. Olga Gkounta, Researcher, ATINER.

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## C O N F E R E N C E P R O G R A M

*(The time for each session includes at least 10 minutes coffee break)*

### **Monday 5 May 2014**

#### **08:00-08:30 Registration**

#### **08:30-08:45 Welcome and Opening Remarks**

- Dr. George Poulos, Vice-President of Research, ATINER & Emeritus Professor, University of South Africa, South Africa.
- Dr. Gregory T. Papanikos, President, ATINER.
- Dr. Zoi Boutsoli, Deputy Head, Health Research Unit, ATINER & Instructor, Open University of Greece.
- Dr. David M. Wood, Academic Member, Health Research Unit and Chemistry Research Unit, ATINER & Research Fellow, Institute of Pharmaceutical Sciences, King's College London, U.K.

<p><b>08:45-10:30 Session I (Room A): Health &amp; Medical Education I</b> <b>Chair:</b> Zoi Boutsoli, Deputy Head, Health Research Unit, ATINER &amp; Instructor, Open University of Greece.</p>	<p><b>08:45-10:30 Session II (Room B): Pharmacology/Biochemistry</b> <b>Chair:</b> David M. Wood, Academic Member, Health Research Unit and Chemistry Research Unit, ATINER &amp; Research Fellow, Institute of Pharmaceutical Sciences, King's College London, U.K.</p>
<ol style="list-style-type: none"> <li>1. Linda Dayer-Berenson, Professor, Drexel University, USA. The Impacts of a Culturally Competent Educational Intervention with African American Patients with Chronic Low-Back Pain.</li> <li>2. Charles Anyinam, Professor, George Brown College, Canada &amp; Sue Coffey, Associate Professor, University of Ontario, Canada. Using Critique of Popular Nursing Literature to Teach Nursing Students about Disability.</li> <li>3. Sue Coffey, Director, University of Ontario, Canada, Charles Anyinam, Professor, George Brown College, Canada &amp; Leslie Graham, Professor, Durham College and Adjunct Professor, University of Ontario Institute of Technology, Canada. Mixed-Method, Multi-Partner Exploration of Nursing Bridging Education in Ontario.</li> <li>4. Gomez Elizabeth, Senior Lecturer, University of Central Lancashire, UK &amp; Mercedes Perez-Botella, Lecturer, University of Central Lancashire, UK. Enhancing the Learning Experience of Students: The Use of Case Based Learning in a Midwifery Undergraduate Course.</li> <li>5. Esra Uslu, Lecturer, Selcuk University, Turkey, Alev Yildirim, Lecturer, Selcuk University, Turkey &amp; Menekse Ulusoy,</li> </ol>	<ol style="list-style-type: none"> <li>1. *Jun-Rong Du, Professor and Head of Department of Pharmacology, Sichuan University, China. Immunomodulation Through TLR/Peroxiredoxin Signaling Contributes to the Neuroprotective Effect of Ligustilide Against Cerebral Ischemia.</li> <li>2. *Khairia Youssef, Professor, Future University, Egypt, Iten Mamdouh, Assistant Lecturer, Future University, Egypt, Nasser Saad, Associate Professor, Ain Shams University, Egypt, Joachim Gullbo, Professor, Uppsala University, Sweden &amp; Khaled Abouzid, Vice Dean &amp; Professor, Ain Shams University, Egypt. Novel Curcumin Analogs Modeling, Synthesis, Tubulin Polymerization and Cytotoxic Assays.</li> <li>3. Gangadharappa Hosahalli Veerabhadrappe, Assistant Professor, JSS College of Pharmacy, India. Formulation and Evaluation of Celecoxib Nanospoie Hydrogels for Topical Application.</li> <li>4. *Krishna Klamsagar Linganna, Assistant Professor, College of Pharmacy, India. Cardioprotective Activity of Fruit Extract of Momordica Dioca Roxb. on Isoproterenol Induced Toxicity on Rats.</li> <li>5. Sonia Al-Qadi, Postdoc Fellow, University of Copenhagen, Denmark. Grasshopper Brain Barrier for CNS Drug Discovery: Transcriptomic and Functional Analysis of Efflux Transporters.</li> <li>6. Caroline Magnani, PhD Student, Pharmaceutical Sciences University, Brazil. In Vitro Safety Evaluation of Caffeic Acid.</li> </ol>

Lecturer, Selcuk University, Turkey. Web Based Training Programs in Nursing Education.

**10:30-12:00 Session III (Room A):  
Efficiency & Quality in Health Care  
Services**

**Chair:** Charles Anyinam, Professor,  
George Brown College, Canada

1. Abdel Hakim Saad El Sadig, Head of Medical Technology Faculty, Sirte University, Libya. The Role of Evaluation on the Improvement of Medical Services Quality in the Teaching Hospitals: The Example of Ibin Sina Teaching Hospital in Sirte.
2. Feleta Louise Wilson, Chair Public Health Nursing, Wayne State University, USA & Cynthia Ann Archer-Gift, Assistant Professor, Wayne State University, USA. Is There a Relationship Among Urban Obese African-American Women and Psychosocial Factors of Literacy Knowledge about Obesity, Health Beliefs and Self-Efficacy?
3. Carol Chamley, Lecturer, Coventry University, UK, Jason Pritchard, Paediatric Advanced Nurse Practitioner, Children's Emergency Department (Ced) University Hospitals Coventry & Warwickshire, UK. Paediatric Emergency Care: Improving Service Provision in the United Kingdom.
4. Shelley Berezon, Faculty, Simulation Coordinator, Camosun College Nursing Program, Canada. Simulation in Nursing Education: One Canadian Nursing Program's Integration of Low to High-fidelity Simulation into Curricula.

**10:30-12:00 Session IV (Room B):  
Medical Issues and New Developments**

**Chair:** \*Jun-Rong Du, Professor and  
Head of Department of Pharmacology,  
Sichuan University, China.

1. Carolyn Henry, Professor, University of Missouri, USA. One Health and It's Relevance to Biomedical Research and Drug Discovery.
2. Munirah Ismail, PhD Student, National University of Singapore, Singapore. Development of Transcatheter Heterotopic Valves to Treat Tricuspid Regurgitation.
3. \*Hale Ergin, PhD Student, Selcuk University, Turkey & Seyfullah Haliloglu, Professor Doctor, Selcuk University, Turkey. Is Irisin A Miracle to Weight Loss?
4. Buthaina Al Asfoor, Nursing Supervisor, Ministry of Health, Kingdom of Bahrain. The Correlation between Type A Personality and the Risk for Coronary Heart Disease.
5. Nadiah Wan-Arfah, PhD Student, Universiti Sains Malaysia, Malaysia. Short-Term and Long-Term Survival Probabilities in First-Ever Stroke Patients.

<p><b>12:00-13:30 Session V (Room A): Clinical Outcomes &amp; Quality of Life</b>  <b>Chair:</b> Carol Chamley, Lecturer, Coventry University, UK</p>	<p><b>12:00-13:30 Session VI (Room B): General Health Care Issues I</b>  <b>Chair:</b> *<u>Khairia Youssef</u>, Professor, Future University, Egypt</p>
<ol style="list-style-type: none"> <li>1. Elaine McNichol, Director, University of Leeds, UK. Developing a Patient Led Innovation Framework.</li> <li>2. Abdulateef Elbadawi, Assistant Professor, University of Tabuk, Saudi Arabia. Outcomes of Sclerotherapy among Oesophageal Varices Patients in Gezira Centre for GIT Endoscopy and Laparoscopic Surgery 2002 - 2012 Gezira, Sudan.</li> <li>3. Vjollca Ndreu, Teaching Assistant, Public University of Medical Sciences of Tirana, Albania. Living with Dialysis. Elements to Improve the Quality of Life.</li> <li>4. Fatjona Kamberi, General Nurse, Albania. Eating and Lifestyle Behaviors among 14-18 Years Old School-Age Children Vlore, May 2013.</li> </ol>	<ol style="list-style-type: none"> <li>1. <u>Susan Parish</u>, Director, Brandeis University, USA, Kathleen Thomas, Researcher, University of North Carolina at Chapel Hill, USA, M Mitra, E Son, A Bonardi &amp; P Swoboda. A National Profile of Deliveries by Women with Intellectual Disabilities in the US: Maternal Characteristics and Pregnancy Outcomes.</li> <li>2. Kathleen Sternas, Associate Professor, Seton Hall University, USA. Teenage Pregnancy Prevention: Interventions and Best Practices- A Global Perspective.</li> <li>3. Leslie Graham, Adjunct Professor, University of Ontario, Canada. All through the Night: An Interprofessional Simulation.</li> </ol>

**13:30-14:30 Lunch (Details during registration)**

<p><b>14:30-16:00 Session VII (Room A): Nursing Practice and Other Issues</b>  <b>Chair:</b> Steven Oberhelman, Professor and Associate Dean of the College of Liberal Arts, Texas A&amp;M University, USA.</p>
<ol style="list-style-type: none"> <li>1. <u>Vanda Repiska</u>, Professor, Comenius University, Slovak Republic, Iveta Zmetakova, Postdoctoral Researcher, Cancer Research Institute of SAS, Slovak Republic, Viera Kajabova, Postdoctoral Researcher, Cancer Research Institute of SAS, Slovak Republic, Bozena Smolkova, Postdoctoral Researcher, Cancer Research Institute of SAS, Slovak Republic, Tomas Krivulcik, Postdoctoral Researcher, Cancer Research Institute of SAS, Slovak Republic, Ludovit Danihel, Head of Institute, Comenius University, Slovak Republic, Helena Gbelcova, Postdoctoral Researcher, Institute of Chemical Technology, Slovak Republic, Daniel Bohmer, Head of Institute, Comenius University, Slovak Republic &amp; Ivana Fridrichova, Head of Department, Cancer Research Institute of SAS, Slovak Republic. DNA Hypermethylation Detected in Invasive Breast Cancer.</li> <li>2. Gisela Schmidt, Assistant Professor, Andrews University, USA. Enhancing Leadership Skills in Clinical Practicum: A Medical Surgical Nursing Class Experience.</li> <li>3. Alastair Gray, Lecturer, Coventry University, UK. What Happened to the Nursing in Advanced Nursing Practice in the United Kingdom?</li> <li>4. Alev Yildirim, Lecturer, Selcuk University, Turkey, Menekse Ulusoy, Lecturer, Selcuk University, Turkey &amp; Esra Uslu, Lecturer, Selcuk University, Turkey. Evidence-Based Nursing Practices.</li> <li>5. Cem Kocak, Assistant Professor, Hitit University School of Health / Corum, Turkey, <u>Saniye Ayla Albayrak</u>, Assistant Professor, Hitit University School of Health Corum, Turkey &amp; Nuriye Buyukkayaci Dumanb, Assistant Professor, Hitit University School of Health / Corum, Turkey. Developing Attitude Scale for Caregiver Role of the Nurses: Validity and Reliability Tests.</li> <li>6. *Violeta Lokaj-Berisha, Physiology and Immunology, University of Prishtina, Kosovo, Besa Gacaferri-Lumezi, Physiology and Immunology, University of Prishtina, Kosovo, Hatixhe Latifi-Pupovci, Physiology and Immunology, University of Prishtina, Kosovo &amp; Naser</li> </ol>

Berisha, University Clinical Centre, Kosovo. Different Serum Concentrations of Total Testosterone and Dehydroepiandrosterone Sulfate in Albanian Female Patients with Allergic Diseases.

**16:00-17:30 Session VIII (Room A): General Medical Issues I**

**Chair:** Gisela Schmidt, Assistant Professor, Andrews University, USA.

1. Steven Oberhelman, Professor and Associate Dean of the College of Liberal Arts, Texas A&M University, USA. Toward a Typology of Byzantine and Post-Byzantine Healing Texts.
2. Belal Rahhal, Head of Physiology Department, An-Najah National University, Palestine. The Influence of Working in Charcoal Factories on Selected Respiratory Parameters in West Bank- Palestine.
3. Helena Gbelcova, Postdoctoral Researcher, Institute of Chemical Technology, Czech Republic, Walter Cosimo D'Acunto, Zdenek Knejzlik, Michal Kolar, Hynek Strnad, Vanda Repiska, Daniel Bohmer, Libor Vitek, Tomas Ruml. Effect of Farnesylpyrophosphate on Various Statins Action.
4. \*Siddharth Gupta, Reader, ITS Dental College, India. HIV Disease In India & Oral Manifestations Associated With HIV Infections & AIDS.

**21:00-23:00 Greek Night and Dinner (Details during registration)**

**Tuesday 6 May 2014**

**08:00-10:00 Session IX (Room A): Health & Medical Education II**

**Chair:** \*Siddharth Gupta, Reader, ITS Dental College, India.

1. Karen Ullyott, Program Head, Practical Nursing Program-Saskatchewan Institute of Applied Sciences and Technologies (SIAST), Canada & Brenda Green, Assistant Professor, First Nations University of Canada, Canada. Decolonization of the Nursing Academy: Engaging Aboriginal Students in Education: Two Case Studies.
2. Rick Fothergill, Principal Lecturer, University of Central Lancashire, UK. Training Psychological Wellbeing Practitioners: Reflections & Lessons Learned.
3. Peter Roberts, Lecturer, University of Huddersfield, UK. An Investigation into Perceived Value of Peer Assessment as a Summative Assessment Method for Final Year Occupational Therapy, Physiotherapy and Podiatry Students during their Group Dissertation Projects: a Students Perspective.
4. Menekse Ulusoy, Lecturer, Selcuk University, Turkey, Esra Uslu, Lecturer, Selcuk University, Turkey & Alev Yildirim, Lecturer, Selcuk University, Turkey. Nursing Informatics in Nursing Education.
5. Mary Brown, Teacher, University of Nottingham, UK, Catherine Swain, Group Member, University of Nottingham, UK & Yvonne Clarke, Teacher, University of Nottingham, UK. Impact? Of Public Involvement in Informing Professional Health Care Education: From Selection and Recruitment to Curriculum Development and Implementation.
6. Nurcan Ertug, Assistant Professor, Turgut Ozal University, Turkey & Handan Boztepe, Lecturer, Hacettepe University, Turkey. Nursing Students' Critical Thinking Levels, Attitudes towards Evidence-Based Nursing, Attitudes to and Awareness of Research and Development.

**10:00-12:00 Session X (Room A): General Medical Issues II**

**Chair:** Peter Roberts, Lecturer, University of Huddersfield, UK.

1. Anna Tsaroucha, Research Development Officer, Staffordshire University, UK. Is There a Link Between Dental Pain and Behavioural and Psychological Symptoms of Dementia (BPSD) in Older Nursing Home Patients?
2. Ergeta Ktona, Rheumatologic Doctor, University Hospital "Mother Teresa", Albania, Myftar Barbullushi, Professor, University Hospital "Mother Teresa", Albania, Teuta Backa, Ass. Professor, University Hospital "Mother Teresa", Albania, Alma Idrizi, Ass. Professor, University Hospital "Mother Teresa", Albania, Elizana Petrela, Ass. Professor, University Hospital "Mother Teresa", Albania, Enkelejda Sina, Nurse, University Hospital "Mother Teresa", Albania & Vjollca Ndreu, Nurse, University Hospital "Mother Teresa", Albania. Kidney Involvement as the most Important Predictor in Lupus Erythematosus.
3. Enkeleda Sinaj, Teaching Assistant, Public University of Medical Sciences of Tirana, Albania. The Effects of Neuromuscular Taping as Integrative Therapy in Patients with Frozen Shoulder.
4. Toivo Aavik, Researcher, University of Tartu, Estonia. Are Self-Reported Symptoms in Chronic Pelvic Pain Syndrome Contaminated with Socially Desirable Responding?
5. Mariam Tarada, Psychiatric Head Nurse, Ministry of Health, Kingdom of Bahrain, Hameed Hussain, Psychiatric Consultant, Ministry of Health, Kingdom of Bahrain & Huda Al-Marhoon, Psychiatric Consultant, Ministry of Health, Kingdom of Bahrain. Cognitive Behavioral Therapy with Hypnotherapy is Effective for Vaginismus: An Open Label Study in Bahrain Psychiatric Hospital.

**12:00-14:00 Session XI (Room A): General Health Care Issues II**

**Chair:** \*Nyi Nyi Naing, Professor, Universiti Sains Malaysia, Malaysia

1. Mark Speechley, Professor, Western University, Canada & Andrew Wister, Professor & Chairman, Simon Fraser University, Canada. Inherent Tensions Between Population Aging and Health Care Systems: What Will a Modern Health Care System Look Like in Twenty Years?
2. Suchitra Wagle, Student, Indian Institute of Technology, India, Sarmistha Pattanail, Professor, Indian Institute of Technology, India & Mrinmoyi Kulkarni, Professor, Indian Institute of Technology, India. Patients in Disguise: Revealing the Typology of Medical Tourists in India.
3. Leonid Karp, Head of Public Health Department, Astana Medical University, Kazakhstan, Galiya Orazova, PhD Student, Astana Medical University, Kazakhstan, Alikhan Dosakhanov, Deputy of Director, National Research Medical Center, Kazakhstan & Alma Zhilkaidarova, Head of Department, Kazakh Research Institute of Oncology/Radiology, Kazakhstan. Incidence and Mortality from the Cancer of Oesophagus and Stomach in Kazakhstan: Results of 40-Year Surveillance.
4. Helmut Walerius, Project Officer, European Commission, EU. Interacting EU Public Health and Research & Innovation for Improved Healthcare.



**14:00-15:00 Lunch (Details during registration)**

**15:00-17:00 Session XII (Room A): Health & Medicine in Developing Countries**

**Chair:** Anna Tsaroucha, Research Development Officer, Staffordshire University, UK.

1. Robin J. Jacobs, Professor, Nova Southeastern University, USA & Elaine Wallace, Executive Associate Dean, Nova Southeastern University, USA. Identification of Musculoskeletal Disorders in Medically Underserved Regions of Rural Vietnam.
2. Donald Stewart, Professor, Griffith University, Australia, Budi Laksono, Professor, Griffith University, Australia, Darren Gray, Professor, Griffith University, Australia, MJ Park, Professor, Griffith University, Australia, Ross Sadler, Professor, Griffith University, Australia, Hadisaputro Suharyo, Professor, Griffith University, Australia & Archie Clements, Professor, Griffith University, Australia. Preventing Parasitic and Gastrointestinal Infections in Central Java: The Balatrine Intervention.
3. \*Nyi Nyi Naing, Professor, Universiti Sains Malaysia, Malaysia, Moe Thwe Aung Myat, Lecturer, Universiti Sultan Zainal Abidin, Malaysia, Abdullah Mohamed Rusli, Associate Professor, Universiti Sains Malaysia, Malaysia, Mat Jaeb Mat Zuki, Chest Physician, Hospital Raja Perempuan Zainab II, Malaysia & Nadiah Wan-Arfah, PhD Student, Universiti Sains Malaysia, Malaysia. The Median Time to Develop Recurrent Tuberculosis in Malaysia.
4. Omar Elgarhy, Lecturer, Minia University, Egypt & Reham Ibrahim, Lecturer, Minia University, Egypt. Multicomponent Systems as Potential Economic Approach for Enhancing the Therapeutic Characteristics of an Antimycotic Drug

**17:30-20:30 Urban Walk (Details during registration)**

**21:00-22:00 Dinner (Details during registration)**

**Wednesday 7 May 2014**

Cruise: (Details during registration)

**Thursday 8 May 2014**

Delphi Visit: (Details during registration)

**Toivo Aavik**

Researcher, University of Tartu, Estonia

## **Are Self-Reported Symptoms in Chronic Pelvic Pain Syndrome Contaminated with Socially Desirable Responding?**

**Objective:** To assess the proposed relationship between chronic prostatitis/chronic pelvic pain syndrome (CP/CPPS) and socially desirable (SD) responding measures in men. One of the most widely used measures of CP/CPPS is the National Institutes of Health Chronic Prostatitis Symptoms Index (NIH-CPSI), which uses patients' self-reports. There has been no investigation that explored the accuracy of self-reported NIH-CPSI scales.

**Methods:** We compared two groups of men - a study group (n=58) with NIH-III prostatitis and randomly selected controls (n=54). The study group received their questionnaires directly from a clinician, and the controls by mail from the researcher. Both groups filled out the NIH-CPSI and the measurement of SD with three subscales: deliberate manipulation of symptoms (impression management, IM), and two unconscious self-deception scales. For controlling the effect of symptom severity, scores on the NIH-CPSI symptom scale score were split at 9, creating moderate and mild symptom groups.

**Results:** The total score of NIH-CPSI was not correlated with SD. High IM was associated negatively with Urinary Symptoms ( $r=-.35$ ;  $P=.006$ ). An unexpected result was that the Pain subscale was positively correlated with IM ( $r=.38$ ;  $P=.003$ ). QOL had no statistically significant correlations with SD.

**Conclusion:** Subjects underreported Urinary Symptoms and increased their Pain scores. The underreporting of urinary symptoms may appear due to masculine roles and increased Pain scores due to the fact that men want the clinician to take their complaints seriously. In general, the results of the primary dimensions of the NIH-CPSI should be used and interpreted with caution.

**Buthaina Al Asfoor**

Nursing Supervisor, Ministry of Health, Kingdom of Bahrain

## **The Correlation between Type A Personality and the Risk for Coronary Heart Disease**

The diseases of cardiac system remain for the past ten years as the first cause of death in Bahrain. Cardiovascular disorder such as coronary heart disease had been indicated as major subsequent for stressful life. It is assumed that a non-physical factor such as type of personality and life style, stand behind the cardiac diseases susceptibility. Type A personality are those who response more quickly and strongly to stressors both in their overt behaviours and in their physiological reactivity. According to literature reviewed, the type A pattern, particularly the anger/ hostility component, is associated with the development of coronary heart disease and hypertension. This study aimed to investigate correlation between coronary heart diseases and type A personality. It is assumed to help nurses focusing on patients' lifestyle and behavior that is negatively affecting health, and providing necessary health education and guidance. The study design is qualitative correlation. The sample was non-probable convenience 60 participants selected from cardiac care unit and cardiac out-patient clinic in one of the governmental hospitals in Bahrain. Inclusion criteria were both gender Bahraini with history of cardiac disease that aged of 20 years and above. Informed consent was obtained from participants. Data was collected by using formulated demographic date sheet and Glazer Stress Control Life Style Questionnaire through face to face interview. SPSS program was used to analyze data. The result showed strong positive relationship between type A behavior and the occurrence of cardiac diseases (88% shown to be type A personality). Recommendations include development of behavioral testing tools, establishment of screening program, and development of educational and type A behavior modification programs, and incorporation of medical and psychotherapy interventions.

**Charles Anyinam**

Professor, George Brown College, Canada

&

**Sue Coffey**

Associate Professor, University of Ontario Institute of Technology,  
Canada

## **Using Critique of Popular Nursing Literature Critique Teach Nursing Students about Disability**

Disabled people have a history of disadvantage, discrimination, and disempowerment that continues to present day. Despite strong critique and activism by disabled people, popular understandings of disability as necessarily tragic, medically based, and individualistic requiring 'fixing' still persist among health professionals and appear in health professions literature. Recent research demonstrates that health professional students and including nursing harbour negative attitudes and perceptions that may directly affect their relationships with and care provided to disabled clients (e.g., Sabin & Akyol, 2010). Further, personal accounts and research evidence suggests that the relationship between healthcare providers and disabled people is unsatisfactory (e.g., Sabin & Akyol, 2010; Seccombe, 2007).

Undergraduate nursing education has a responsibility to ensure that nursing practice with disabled people is enabling rather than disabling (Scullion, 2000; Sabin & Akyol, 2010). A key strategy is to imbed within curricula opportunities for students to engage in the processes of critical thinking towards and analysis of disability and the experiences of disabled people. This presentation will discuss how educators can support students to develop nursing practice that is enabling. Using an example of an assignment where undergraduate baccalaureate nursing students critique popular culture nursing literature about disability, ways that educators can inculcate a greater understand of disability will be shared.

**Cem Kocak**

Assistant Professor, Hitit University School of Health / Corum, Turkey

**Saniye Ayla Albayrak**

Assistant Professor, Hitit University School of Health Corum, Turkey

&

**Nuriye Buyukkayaci Dumanb**

Assistant Professor, Hitit University School of Health / Corum, Turkey

## **Developing Attitude Scale for Caregiver Role of the Nurses: Validity and Reliability Tests**

*Purpose:* The aim of the current study was to develop Attitude Scale for Caregiver Role of The Nurses and to perform its validity and reliability tests.

*Methods:* The first administration of the scale was done with 47 fourth year nursing students. The second administration of the scale was done with 162 nurses who were selected using random sampling method out of 400 nurses. Validity and reliability tests of the scale were performed through item analysis, correlation analysis, Cronbach's Alpha validity coefficient, Kendall W test, Kaiser Meyer Olkin and Barlett's Test, principal components analysis and factor analysis methods.

*Results:* Cronbach's Alpha value of all items of the scale was 0.961 in the first administration of the scale while it was 0.906 in the second administration. That all of Cronbach's Alpha values which were again calculated after one item was deleted from the scale were lower than reliability (0.906) of the research-group demonstrated that each of the 16 items contributed positively to the reliability. It was decided that all of the 16 items were statistically valid items.

*Conclusions:* It was concluded that the scale was very reliable, each item made positive contributions to the reliability and average correlations of inter-items were satisfactory or good.

**Shelley Berezon**

Faculty, Simulation Coordinator, Camosun College Nursing Program,  
Canada

## **Simulation in Nursing Education: One Canadian Nursing Program's Integration of Low to High-Fidelity Simulation into Curricula**

The ever changing health care demands of North American society require our nursing students to be prepared to function within environments of great uncertainty and complexity. Often times health authorities are unable to provide clinical placements that support essential learning experiences.

Simulation has been a part of nursing education for many decades. As world technology advances, so too does this pedagogy for teaching and learning. High-fidelity simulation has made its way into many nursing schools as a means to provide particular educational experiences for their students. It has been suggested that it is the future of nursing education.

This paper will discuss simulation in nursing education with a particular look at high-fidelity simulation; rationale for promoting this pedagogy; some of the barriers identified; the effects and outcomes that have been observed.

To conclude there will be an exploration how one Canadian nursing program has integrated simulation into their curricula. Camosun College Nursing Students are given the opportunity to practice and apply what they have learned in their theory and lab classes, praxis, in every semester with advancing complexity accordingly.

**Mary Y Brown**

Teacher, University of Nottingham, UK

**Catherine Swain**

Group member, University of Nottingham, UK

&

**Yvonne Clarke**

Teacher, University of Nottingham, UK

## **Impact? Of Public Involvement in Informing Professional Health Care Education: from Selection and Recruitment to Curriculum Development and Implementation**

Public consultation and involvement in decisions has been central to the development of the UK's current National Health Service and in informing health care professional education provision (Department of Health 2012a, b; Crawford 2002).

Current literature supports the value of service user and carer engagement in the education of healthcare and social work practitioners and the challenges presented in 'getting it right.' Whilst the rhetoric of 'partnership' and involvement' is firmly embedded within UK government policy and HEI strategies, there is genuine concern on the part of both academic providers and those wishing to engage with them to make those genuine alliances that empower everyone and contribute positively to students learning experience and health and wellbeing.

A variety of papers support the benefits of members of the public being 'present' in the classroom to learn from the 'patient or carer experiences' (Repper and Breeze 2007). They also highlight, however, some ethical and practical issues which need consideration around public involvement e.g. Who has a say in enabling student learning, what transferability of this experience is there to that of other patient and or carers experiences in their validity and reliability to inform future professional practice. Individuals with lived experience, and community self-help groups have worked creatively with statutory healthcare providers and educators to inform and collaborate on curriculum development, delivery and assessment of learner achievements. This involvement has been at pre- and post-registration levels across the UK, both as mandatorily required by section 5 of the Health and Social Care Act and also as a good practice response to growing demands by the general public.

The School of Health Sciences (Nursing, Midwifery and Physiotherapy) at the University of Nottingham, working collaboratively with members of its Service User and Carer Advisory Group, has put together a proposal for a jointly presented symposium which reflects strong and vibrant alliance with local communities and education providers. We would like to offer the conference a series of scenarios that showcase examples of engagement in developing educational initiatives, and the learning from them. The processes of our co-presentation themselves model good partnership practice. Our proposed symposium illustrates collaborative initiatives in:

- Clarifying and enriching curriculum concepts and developing required resources,
- Implementation of collaborative teaching, learning and assessment strategies.
- Mapping out the road ahead.

The presentation will open up dialogue to discuss the challenges and opportunities of collaboration. We intend to invite audience participants to share their own best practice and partnership experiences and celebrate the learning we produce together through this dynamic and mutual partnership.



**Carol Chamley**

Lecturer, Coventry University, UK

&

**Jason Pritchard**

Paediatric Advanced Nurse Practitioner, Children's Emergency  
Department (Ced) University Hospitals Coventry & Warwickshire, UK

## **Paediatric Emergency Care: Improving Service Provision in the United Kingdom**

**Introduction:** General Practitioners and Accident and Emergency services are the two most common routes, through which children and young people are referred to specialist NHS services in the United Kingdom. In a typical year, approximately 3.6 to 4 million children attend accident and emergency departments in England, with almost half of all infants under 12 months of age, and a quarter of older children requiring this service (Kennedy 2010, Hemmingway 2011, Jones et al 2011). Situated in the West Midlands, Coventry and Warwickshire is no exception, with an estimated 30,000 children necessitating emergency care from one local NHS Trust. Despite the many challenges confronting paediatric and child health services, the inertia for change provided the opportunity to improve outcomes for children who require urgent or unscheduled care locally. Thereby ensuring that children and young people receive age specific care from highly qualified and skilled practitioners competent in their field of paediatric emergency care.

**Purpose:** Currently there exists a paucity of paediatric emergency nurse practitioners (PENPs) available to assess, diagnose and treat children within local emergency departments. The purpose of this service improvement is to improve quality and ensure patient safety, with a resident, skilled and knowledgeable body of paediatric emergency nurse practitioners (PENPs) across the locality.

**Methods:** This service improvement project was supported by the Coventry and Warwickshire Workforce Locality Board, who commissioned professional bespoke education from the local University, to facilitate this ongoing service improvement, coupled with inter-collegial, collaborative support and mentorship from senior nurses, clinicians and academics.

**Results:** Practitioners follow a dedicated educational pathway including theory and practice outcomes. First PENP cohort has now completed the programme.

**Conclusions:** Impact study to evaluate the quality and outcomes of the service improvement, coupled with ongoing strategic planning to ensure that the compliment of PENP's remain sustainable (299 words excluding references).

**Sue Coffey**

Director, University of Ontario Institute of Technology, Canada

**Charles Anyinam**

Professor, George Brown College, Canada

&

**Leslie Graham**

Professor, Durham College and Adjunct Professor, University of  
Ontario Institute of Technology

## **Mixed- Method, Multi-Partner Exploration of Nursing Bridging Education in Ontario**

Bridging programs are one of the most rapidly growing areas of post-secondary curricular development in North America. In Ontario, Canada, Registered Practical Nurses (RPN) can continue their professional development through bridging education between their college diploma programs and a university degree, leading to eligibility to write the national registration exam for Registered Nurses. In this presentation, we will provide an overview of findings from an externally funded, multi-partner study examining post-secondary nursing education RPN-to-BScN programs. In this research we examine nursing bridging education in 50% of the programs in our province. Program delivery formats range from completely face to face to completely online, with both part-time and full-time options. Using mixed method analysis of qualitative and quantitative data (focus groups, registrarial data, and student and alumni surveys), this study highlights the strengths and challenges involved in this type of educational offering. Specifically, we will focus on student perceptions of: a) preparedness for the program, b) transition into the program, c) barriers and facilitators, and d) impact of entering the program on multiple dimensions of their lives. Additionally, quantitative data will be presented, providing a “snapshot” of student tracking data that gives us insight into typical student progression through the program, including elements such as: a) admission GPA and any association with continued success indicators in the program, b) range of transfer credit granted, and c) student performance in this bridging program compared to traditional 4-year BScN and general Health Science student performance. In our discussion, we will identify areas for educational development related to RPN-to-BScN programs across our jurisdiction, with international application. Discussion about bridging education, innovation in curriculum development, and educational research will be invited.

**Linda Dayer-Berenson**  
Professor, Drexel University, USA

## **The Impacts of a Culturally Competent Educational Intervention with African American Patients with Chronic Low-Back Pain**

Healthcare providers are called upon to increasingly care for and communicate with patients of varying backgrounds, preferences, and cultures that are often different from their own. Culturally competent interventions are recognized as effective strategies for healthcare professionals to utilize during these cross-cultural encounters. The ability to utilize culturally appropriate strategies is already necessary and will continue to grow in importance as the population of the United States continues to diversify, especially given that healthcare encounters can dramatically impact and influence patient outcomes (Giger & Davidhizar, 2007; IOM, 2003). The purpose of this study was to evaluate the impacts of a culturally competent educational intervention with African American patients with chronic low-back pain.

A quantitative, quasi-experimental research design was utilized. African American chronic-pain patients (patients of a University based pain-management center for chronic low-back pain severe enough to have been referred to the pain-management center) were randomly assigned to either the control group (standard patient education) or to the experimental group (culturally competent patient education). The convenience sample consisted of 26 subjects (13 in the control group and 13 in the experimental group). The intervention was a culturally competent patient education session that informed the experimental-group subjects of the cultural differences that can be associated with chronic pain in the African American patient. The patient education session that was provided to the experimental group was based on the standard-care guidelines for low-back pain with the addition of evidence-based cultural information pertinent to African Americans. Content validity was determined by an extensive literature review and from three experts in the areas of chronic pain management and cultural competency of the African American population. The educational intervention was provided to the experimental-group sessions during 20-minute, one-on-one sessions. Evaluation of the study outcomes was focused on pain scale (Visual Analog Scale), functional status (Roland-Morris Questionnaire), and quality-of-life indicators (World Health Organization Quality Of Life -100). These results were compared to the outcomes of subjects who received only the

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standardized patient education. Results were analyzed utilizing SPSS-18. Descriptive statistics (means, standard deviations, and ranges) were conducted to compare sociodemographic characteristics and outcome measures at the pretest and posttest stages. Inferential statistics were conducted to test the three study hypotheses.

The first hypothesis, that the culturally competent educational intervention would decrease patients' self-reported pain levels (as evidenced by a lower score on VAS), was not supported to a statistically significant level. Clinical significance, however, was achieved for this relationship. The second hypothesis, that functional status would be improved (as evidenced by the Roland-Morris disability questionnaire) was supported ( $p = .005$ ). The third hypothesis, that quality of life would be improved (as evidenced by the WHOQOL-100) was supported for one of the quality-of-life domains (spirituality  $p = .05$ ). There are several limitations to the study, such as low statistical power, potential Type II errors, reliance on a convenience sample, and the use of a quasi-experimental research design. These limitations constrain the generalizability of the study findings. Replication of this study is recommended.

**Jun-Rong Du**

Professor and Head of Department of Pharmacology, Sichuan  
University, China

## **Immunomodulation through TLR/Peroxiredoxin Signaling Contributes to the Neuroprotective Effect of Ligustilide against Cerebral Ischemia**

Emerging evidence suggests that blocking TLR4/Prx6 signaling has been proposed to be a novel therapeutic strategy for ischemic stroke. Our previous studies showed that ligustilide (LIG) strongly inhibited the inflammatory response in lipopolysaccharide-stimulated microglia and exerted antineuroinflammatory and neuroprotective effects against ischemic insult, but the underlying mechanisms have largely remained unclear. The present study investigated whether the TLR4/Prx6 pathway is involved in the protective effect of LIG against post-ischemic neuroinflammation and brain injury induced by transient middle cerebral artery occlusion (MCAO) in rats. Intraperitoneal LIG administration (20 and 40 mg/kg/day) at reperfusion onset after MCAO resulted in a reduction of brain infarct size and improved neurological outcome over 72 h. Ligustilide-induced neuroprotection was accompanied by an attenuation of neuropathological alterations, including neuron loss, astrocyte and microglia/macrophage activation, neutrophil and T-lymphocyte invasion, and the inflammatory response, reflected by lower mRNA levels of the proinflammatory mediators tumor necrosis factor  $\alpha$ , interleukin-1 $\beta$  (IL-1 $\beta$ ), intracellular cell adhesion molecule-1, matrix metalloproteinase-9, interferon  $\gamma$ , and IL-17 and higher mRNA levels of the antiinflammatory cytokine IL-10. Moreover, LIG significantly inhibited the expression and extracellular release of Prx6 and activation of TLR4 signaling, reflected by decreased TLR4 expression, extracellular signal-regulated kinase 1/2 phosphorylation, and the activation of transcription factor NF- $\kappa$ B and signal transducer and activator of transcription 3 in the ischemic brain. The present results indicate that LIG exerts an early and direct protective effect on ischemic brain cells. In addition, ligustilide prevented the activation of TLR4 signaling and subsequent immunity and neuroinflammation after cerebral ischemia/reperfusion by inhibiting TLR4 and its ligand Prx6, thereby exerting beneficial effects on ischemic stroke outcome. These findings support the translational potential of blocking TLR4/Prx6 signaling for the treatment of ischemic stroke.

**Abdulateef Elbadawi**

Assistant professor, University of Tabuk of Community Medicine,  
Saudi Arabia

**Outcomes of Sclerotherapy among Oesophageal  
Varices Patients in Gezira Centre for GIT  
Endoscopy and Laparoscopic Surgery 2002 - 2012  
Gezira, Sudan**

Background: Endoscopic variceal sclerotherapy is a procedure used to treat esophageal bleeding. Varices are enlarged veins on the esophagus that bleed and have fatal effects in up to 50 percent of patients. The sclerosing agent destroys varices and slows thrombosis, which stops esophageal bleeding (1).

Methods: Study was facility based retrospective cohort design aimed to evaluate the outcome of sclerotherapy in patients with bleeding esophageal varices during 2002 - 2012 in Gezira center for GIT endoscopy and laparoscopic surgery. Data of 1140 patients - representing all esophageal varices patients attended to the center since 2002 were carefully reviewed. Post Sclerotherapy complications were followed.

Results: Most of study subjects were male (72.8%). Total of 393 (34.5%) of sclerotherapy treated patients were received only one session and 387 (33.9%) of them were received from 2 - 3 sclerotherapy sessions. About one in each seven (15.2 %) of sclerotherapy treated patients developed bleeding after completing their sessions of sclerotherapy while the remaining patients had no future complications.

Discussion: Most of sclerotherapy treated patients reported no complication while one in each seven of them complained of rebleeding. These results are compatible with the literature which show that significant complications will develop in 10% to 15% of patients treated with sclerotherapy. These results are also considered to have low rate when it was compared with another study carried out in Britain (2) which showed that recurrent variceal bleeding developed in 31% of sclerotherapy treated patients.

Conclusion: The conclusion of this study is that rebleeding after treatment with Sclerotherapy was the commonest complication.

**Omar Elgarhy**

Lecturer, Minia University, Egypt

&

**Reham Ibrahim**

Lecturer, Minia University, Egypt

## **Multicomponent Systems as Potential Economic Approach for Enhancing the Therapeutic Characteristics of an Antimycotic Drug**

**Purpose:** The poor aqueous solubility of miconazole nitrate (MN), a broad spectrum antimycotic drug of interest, not only restricted its pharmaceutical application but also limited its dissolution leading to some therapeutic defects. The current work aimed to widen pharmaceutical applications of MN and to force its therapeutic characteristics through the concept of multicomponent systems. Further, the work aimed to enhance the solubilizing and complexing power of  $\beta$ -cyclodextrin ( $\beta$ -CD) to reduce its amount required for MN solubilization for lowering the production costs.

**Methods:** Different multicomponent systems of MN with  $\beta$ -CD in association with polyvinyl pyrrolidone (PVP-k90), (MN/ $\beta$ -CD/PVP-k90), prepared by physical mixing, kneading and grinding method were characterized for their physicochemical, dissolution and the antimycotic characteristics and comparatively evaluated by their corresponding binary systems (MN/ $\beta$ -CD). Phase solubility studies of MN/ $\beta$ -CD and MN/ $\beta$ -CD/PVP-k90 systems were carried out.

**Results:** The marked enhancement in MN solubilization and stability constants values for MN/ $\beta$ -CD/PVP-k90 systems clearly proved the benefit of PVP-k90 addition to increase the solubilization and complexation efficiency of  $\beta$ -CD toward MN. The results also displayed a progress reduction in MN crystallinity and a highly degree of amorphousity offered by MN/ $\beta$ -CD/PVP-k90 and MN/ $\beta$ -CD systems prepared by grinding method rather than kneading one. The extent of enhancement in the dissolution and antimycotic characteristics of MN displayed by its MN/ $\beta$ -CD/PVP-k90 systems was found to be higher than that of its corresponding MN/ $\beta$ -CD systems and increased by increasing PVP-k90 concentration to 5% w/w.

**Conclusion:** The use of multicomponent systems of  $\beta$ -CD in association with PVP-k90 for solubilization of MN not only offer synergistic solubilization effects, but also, it reduced the required amount of  $\beta$ -CD, which is good from the production economic strategy. The current work reflected the potential efficiency of multicomponent systems as an effectively economic approach for enhancing the therapeutic characteristics of MN.

**Abdel Hakim Saad El Sadig**

Head of Medical Technology Faculty, Sirte University, Libya

## **The Role of Evaluation on the Improvement of Medical Services Quality in the Teaching Hospitals: The Example of Ibin Sina Teaching Hospital in Sirte**

The goal of the research is to assess the scientific principles on which evaluation operation depends in teaching hospitals, where medical staffs are trained. It also shows the extent to which the quality of evaluation is evident in the medical services. Besides, the search aims at explaining the total quality management concept and the possibility of its use in teaching hospitals. For this purpose, Ibin Sina Hospital in Sirte is chosen as a model for teaching ones.

The research includes:

- A theoretical study of the evaluation concept and its elements, principles, quality and total quality in evaluation.
- A public study of the evaluation in the hospital from which data are collected and analyzed.

The search gives a number of recommendations:

- Interesting in the evaluation needs scientifically.
- Preparing the evaluation programs about quality and total quality concepts.

Making changes that enable the hospital to have comprehensive quality management.



**Hale Ergin**  
PhD Student, Turkey  
&  
**Seyfullah Haliloglu**  
Professor Doctor, Turkey

## **Is Irisin A Miracle to Weight Loss?**

Obesity is a worldwide health problem which is commonly associated with insulin resistance and is a main risk factor for the development of type 2 diabetes (T2D) and cardiovascular disease. It is described that obesity is a result of a chronic imbalance between energy intake and energy expenditure. The adipose tissue contains two functionally different types of fat: white and brown. On the contrary, white adipose tissue, which only stores fat, brown adipose produce heat as a defense against hypothermia and obesity. Brown adipose tissue affects whole-body metabolism and may alter insulin sensitivity and contribute to weight gain. Therefore, in general antiobesity and antimetabolic disease therapy aims to enhance brown fat thermogenesis. Recent studies introduce that white adipose tissue can be converted to thermogenically active beige adipose tissue via a novel hormone, irisin. It is thought that Irisin basically acts on the cells of white adipose tissue. After exercise training concentration of the irisin increase in mice, thus increasing total energy expenditure and alleviating diet induced insulin resistance in animal models. Irisin takes role on stimulating uncoupling protein 1 (UCP1) expression in white adipose cells. Several transcriptional factors such as coactivator-1  $\alpha$  (PGC-1 $\alpha$ ), peroxisome proliferator-activated receptor gamma (PPAR- $\gamma$ ) regulate the expression of UCP1. These transcriptional factors can be induced by exposure to cold temperatures. The precursor of irisin, is cleaved and secreted from muscle during exercise, is named the fibronectin type III domain-containing protein 5 (FNDC5). Irisin is a PGC-1 $\alpha$ -dependent myokine. A recent study by Boström and colleagues reported that expression of the exercise- and PGC-1 $\alpha$ -induced myokine, irisin, promotes the conversion of white fat to brown fat in humans. These data indicate that exercise regulates the expression of irisin in muscle. Thus exercise gives the benefits on metabolic disorders and energy homeostasis.

**Nurcan Ertug**

Assistant Professor, Turgut Ozal University, Turkey  
&

**Handan Boztepe**

Lecturer, Hacettepe University, Turkey

## **Nursing Students' Critical Thinking Levels, Attitudes towards Evidence-Based Nursing, Attitudes to and Awareness of Research and Development**

**Aim:** The aim of this study was to determine nursing students' attitudes towards evidence-based nursing, critical thinking levels, and attitudes to and awareness of research and development.

**Methods:** The population of this descriptive study consists of 177 undergraduate nursing students engaged in clinical practice. The research was conducted between October-December 2013 in Ankara, Turkey. The data was collected by socio-demographic questionnaire, Attitudes towards Evidence-Based Nursing Questionnaire, California Critical Thinking Disposition Inventory, Nursing Students' Attitudes to and Awareness of Research and Development within Nursing Scale. The Percentage, One-Way Anova, and Student-t tests were used to evaluate the data. The research was approved by an ethical committee.

**Results:** Mean age of the students was  $21.71 \pm 2.38$ , more than half of them (78.5%) participated to a scientific meeting, and 16.9% of the students attended a research activity. Item mean score of the attitudes to and awareness of research and development within nursing scale was  $4.27 \pm 0.32$ . The mean score of the scale was  $124.05 \pm 14.94$ . The mean score of the critical thinking disposition was  $220.88 \pm 26.68$ . The mean score of attitudes towards evidence-based nursing of nursing students was  $62.97 \pm 9.35$ . The students' cumulative grade point average (GPA) was  $2.78 \pm 0.50$ . Attitudes towards evidence-based nursing and research-development of students with high GPA or presented a paper at any conference were higher than others. Critical thinking levels, attitudes towards evidence-based nursing and research-development of students who wanted to attend a research activity or read scientific articles were higher than others.

**Conclusions:** The attitudes and awareness of research and attitudes towards evidence-based nursing of nursing students were positive. However, nursing students' critical thinking disposition score was found low level. It is recommended that students should be encouraged and supported to attend research activities and follow the scientific publications by their lecturers.

**Rick Fothergill**

Principal Lecturer, University of Central Lancashire, UK

## **Training Psychological Wellbeing Practitioners: Reflections & Lessons Learned**

In the UK in 2008 the Department of Health introduced a radical new approach to the treatment of Depression and Anxiety entitled Improving Access to Psychological Therapies (IAPT). This was an ambitious plan to modernise access to evidence based talking treatments and reduce morbidity. Mental Health Services and Universities worked in collaboration to provide a workforce capable of delivering this new approach to mental health.

Over the last five years, the University of Central Lancashire has trained over 200 Psychological Wellbeing Practitioners at Post Graduate level to contribute to this new form of treatment and worked in collaboration with our partners in the Mental Health Services to ensure that the new practitioners make a real difference to people's lives in clinical practice.

The Psychological Wellbeing Practitioners are trained in a range of short term evidence based interventions based upon Cognitive Behavioural principles, and receive close clinical supervision during their year long training program, which is accredited by the British Psychological Society.

This paper will give an insight into the training program, outline the progress made over the last five years, and evaluate the impact of these practitioners on modernising mental health services. This will include:

- Reflections on the training program
- Best practice identified
- Results from Outcome Data
- Feedback from Clinical Services
- The Future

**Munirah Ismail**

PhD Student, National University of Singapore, Singapore

## **Development of Transcatheter Heterotopic Valves to Treat Tricuspid Regurgitation**

Tricuspid regurgitation (TR) occurs in many individuals and is usually considered mild but severe TR is life-threatening. Even so, many patients with severe TR are denied of the replacement valve surgery because their old age or co-morbidities put them at high risk for conventional open heart surgery. With the advent of transcatheter technology, it is now possible to deliver the valve to the desired location without the need for open heart surgery. However, so far, there has been no commercially available transcatheter tricuspid valve. This may be because of the complex tricuspid valve anatomy and lack of an anchorage zone. Thus, the next best anchorage zone is the vena cava. Placing the valves in the superior and inferior vena cava will prevent the back flow of blood into the venous structures and possible reverse peripheral edema and ascites which are caused by the elevated venous pressure. The hemodynamic characteristics of these valves are tested in a mock circulatory system (MCS) which emulates the physiological pressure and flow conditions in the cardiovascular system. Particle image velocimetry is used to study the flow characteristics in the MCS.

**Helena Gbelcova**

Postdoc, Institute of Chemical Technology, Czech Republic

**Walter Cosimo D'Acunto**

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**Silvie Rimpelova**

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&

**Tomas Ruml**

Professor, Institute of Chemical Technology, Czech Republic

## **Effect of Farnesylpyrophosphate on Various Statins Action**

Ras proteins are small membrane bound GTPases. They are essential in transducing the extracellular signals that regulate cell growth, survival and differentiation. They are synthesized as cytosolic precursors and to become fully functional, they must undergo posttranslational modification catalyzed by farnesyl transferase. Farnesylation of Ras proteins is prerequisite for their attachment to the cell membrane where they initiate a cascade of enzymatic reactions. Activating mutations in the K-ras protooncogene (occurring in more than 90% of human pancreatic cancers) that block the release of bound GTP from Ras proteins deregulate cell division. These discoveries led to an intense search for inhibitors of Ras translocation to the cytoplasmic membrane or inhibitors of Ras activation. Promising candidates may be statins, which are drugs inhibiting the rate-limiting enzyme in the mevalonate pathway and consequently membrane localization of non-farnesylated Ras proteins. We evaluated the effect of farnesylpyrophosphate, one of the mevalonate pathway intermediates, on various statin-mediated effects on K-Ras protein localization and changes in gene expression in the pancreatic cancer cell line MiaPaCa-2.

The inhibitory effect of statins on both gene expression and GFP-K-Ras protein trafficking were partially prevented by addition of mevalonate pathway intermediate.

Our results support currently accepted biological mechanisms of inhibition of cancer cells proliferation mediated by statins. However, for the final evaluation of the relation between the use of statins and treatment of cancer, further studies are required.

**Gomez Elizabeth**

Senior Lecturer, University of Central Lancashire, UK  
&

**Mercedes Perez-Botella**

Midwifery Lecturer, University of Central Lancashire, UK

## **Enhancing the Learning Experience of Students: the Use of Case Based Learning in a Midwifery Undergraduate Course**

Background: Important changes in the last few years in UK's Higher Education (HE) along with changes in the midwifery profession and health care delivery have meant that midwifery curriculums must be able to produce midwives of the highest quality.

Within this backdrop and bearing in mind previous students' feedback, the midwifery team set to create a dynamic, engaging, fun and effective for learning curriculum underpinned by "Case Based Learning" (CBL).

The curriculum: CBL is a variant from the more commonly known Problem Based Learning which has been successfully implemented in medicine and some allied health disciplines. However, to our knowledge, no midwifery curriculum utilises either method.

Due to the fact that the childbearing continuum tends to be fundamentally normal, a focus away from solving problems and more towards the maintenance of health (salutogenesis) was adopted. Salutogenesis is a theory developed by Antonovsky in the seventies which essentially looks for those elements which allow people to stay healthy despite adversity (i.e. what makes people stay well), rather than the traditional pathological approach which looks for what makes people fall ill.

Through the use of cases as the basis for the curriculum content (rather than problems), it is envisioned that students will achieve a salutogenic approach to learning and caring. In addition, the need for students to direct their learning will enhance their learning experience and the effectiveness of the curriculum.

The curriculum journey to date: The curriculum has been running for 4 months and the feedback received from students and staff is overwhelmingly positive: students feel they are more engaged and in control of their learning. Other benefits include the emphasis on team working, which will form an essential part of their working lives.

Lecturers feel generally more positive towards teaching and work much more as a cohesive unit rather than as individuals.

Evaluation: An evaluative research project is underway which will answer questions related to the experience of the students, midwife mentors and lecturers, attainment and retention.

**Leslie Graham**

Adjunct Professor, University of Ontario, Canada

## **All Through the Night: An Interprofessional Simulation**

Night shift workers are exposed to multiple health risks, as well as challenges in cognitive and psychomotor performance which impacts patient safety (Geiger-Brown, et al., 2012). As nurse educators, we have a mandate and responsibility to educate nursing students on mitigating the effect of fatigue when providing patient care as well as on healthy lifestyle practices when working the nightshift (CNA, 2010). The purpose of this study was to provide nursing students and members of the interprofessional team the opportunity to experience the nightshift prior to graduation from their respective programs. The intent of this simulation experience was to assist students to develop strategies to provide safe patient care while working the nightshift. Students also had the opportunity to reflect upon healthy lifestyle modifications to support working the nightshift.

In this presentation, results from a 12 hour night shift simulation will be presented. Students from undergraduate nursing (Bachelor of Science in Nursing, BScN), practical nursing (PN), unregulated health care worker, and paramedic programs (n=32) were voluntarily recruited to participate in an all night simulated experience. Program specific faculty were invited to facilitate the simulations. Two experienced registered nurses assisted with the simulations in the role of a confederate or embedded participant. Using mixed methods design, quantitative data were collected using a 10 question pretest-posttest survey. Qualitative data were obtained through open ended questions via online survey and focus group participation. Themes were identified using NVivo research software. The results indicated that fatigue was a limiting factor in performance during the night shift. Students also reported after engaging in the simulation, they felt more confident if dealing with a similar situation in clinical settings. The students reported “feeling united, feeling vulnerable as tiredness sets in”. This study demonstrates the importance of self care and patient safety considerations when working the night shift.



**Alastair Gray**  
Lecturer, Coventry University, UK

## **What Happened to the Nursing in Advanced Nursing Practice in the United Kingdom?**

This presentation will postulate that advanced nursing practice roles as they exist in the United Kingdom are often misnamed and should rather be described as advancing clinical practice roles. This paper argues that the difference lies in the focus and outworking of these roles. The concern that will be addressed is that roles have been hijacked by economic and practical demands such that roles have been highly medicalised. Where this happens, the unique value and impact of advanced nursing is lost or at least sidelined and downgraded in favour of responding to the 'cure' paradigm.

In 1997 I was a firm antagonist of advanced nursing practice believing it to be a betrayal of the essence of nursing, having embraced the medical model and jettisoned 'nursing'. Subsequent experiences of observing advanced practitioners in action in both America and in Britain transformed my thinking and challenged my prejudices. Undertaking a masters' programme in advancing practice, working with advanced practitioners and now leading a masters' programme has continued to shape my thinking and caused me to be an active protagonist of advancing nursing practice. At a time when the quality of 'nursing' itself is under fire, if the issue of advanced nursing practice is not clarified, its huge potential will be lost. Now is the time to debate this issue!

Outcomes: participants will be enabled to:

- Critically evaluate whether current advanced nursing practice roles really reflect advanced nursing;
- Critically evaluate elements of a model that may truly reflect advancing nursing practice in the UK and beyond.

**Siddharth Gupta**  
Reader, ITS Dental College, India

## **HIV Disease in India & Oral Manifestations Associated With HIV Infections & AIDS**

Acquired Immuno Deficiency Syndrome (AIDS) associated with HIV infection is undoubtedly the most rapidly advancing epidemics in recent times. It is a multisystem disease with numerous manifestations. The prominent features are cachexia, unexplained fever, unexplained diarrhoea and malnutrition - all of which are found in abundance as a result of poverty prevalent in India as well as majority of South east Asian countries. Hence it becomes difficult to rule out or rule in HIV as a cause of any disease syndrome. The fear of stigmatizing the patient by a wrong diagnosis being as great as the fear of missing a diagnosis.

Hippocrates has rightly said, *"The wise should consider that health is the greatest of human blessings"* and Oro-dental Diagnosticians, Oral Medicine experts work on this similar principle as they are concerned not only with the diseases involving the oral and perioral structures but also the systemic diseases having oral manifestations. By adapting a systematic approach to medical history taking and with appropriate clinical investigations; oral medicine experts have a role in providing oral health for overall health even for patients living with HIV / AIDS.

Sir William Osler statement stands to be aptly correct, *"Mouth is the mirror of the body that reflects the systemic diseases"*

This paper highlights the Global estimates of HIV/AIDS epidemic with emphasis on HIV/AIDS in India along with Oral lesions and their varied manifestations in Patients with HIV & AIDS and their management along with Guidelines for counseling and prevention from HIV & AIDS.

**Carolyn Henry**

Professor, University of Missouri, USA

## **One Health and Its Relevance to Biomedical Research and Drug Discovery**

The frustratingly slow pace at which medical discoveries have traditionally been translated into new therapy options for patients suggests that there is a need for improved efficiency in the process of clinical research and development. What if the solution to this problem lay [literally] at your feet? Perhaps it does. There is growing awareness that companion animals with naturally-occurring disease can serve as excellent models of human disease and offer significant advantages over more traditional in vivo models of induced disease. A cancer that develops naturally in a dog is more likely to have similarities to human cancer in terms of etiology, tumor heterogeneity, metastatic behavior, and response to therapy than does a cancer induced in a laboratory animal with an incompetent immune system. Many infections, neurological abnormalities, orthopaedic diseases, endocrinopathies, toxicities, and immune-mediated diseases also share causes and clinical signs across species. And by genetically mapping disease susceptibility by species and by breed, we can gain valuable clues regarding underlying genetic causes. For example, if one dog breed is uniquely susceptible to Disease X and another breed is rarely affected, comparing the genomics of the two breeds to the rest of the population may help define the underlying etiology for Disease X, as well as provide insight as to how to manage or mitigate it. The goal of this session is to reach audiences involved in medical research and health care who may be unaware of the relevant spontaneously-occurring companion animal models of human disease and how they can be used to speed progress and improve efficiency of biomedical research and clinical application of innovations.

**Fatjona Kamberi**  
General Nurse, Albania

## **Eating and Lifestyle Behaviors among 14-18 Years Old School-Age Children Vlore, May 2013**

**Introduction.** Prevalence of overweight in childhood and adolescence, food behaviors and incorrect lifestyles have increased drastically over the years. Their major impact on public health is social and economic. **Purpose.** The study aims to highlight the influence of nutrition and lifestyle behaviours have on BMI (Body Mass Index) in the context of globalization of life. **Objectives.** To determine the prevalence of overweight and obesity and to identify risk factors (socioeconomic characteristics, eating habits, physical activity and lifestyle) associated with overweight and obesity in school pupils aged 14-18 years old. **Methods.** This is a cross-sectional study of 199 school pupils aged 14-18 vjec, class X, XI, XII, High School Ali Demi, Vlora's city, May 2013. Selected variables were assessed via self-administered questionnaire. Participants were classified as either normal weight or overweight according to international sex and age -specific Body Mass Index cut-off points. The mass index data were analysed separately for boys and girls. BMI was calculated on the basis of reference that were made respectively participants for weight and height.

**Results.** Study's population composition 63% girls (G) and 37% boys (B). By analyzing the data, prevalence of overweight and obesity is higher in B than G, Overweight 18% B and 2% G, obese 11% B and 1% G. Overweight's and obesity prevalence in all study participants 8% and 5%. It is noticed that boys have higher tendency for unhealthy nutritional and lifestyle's behaviors. **Conclusions:** As a result we can say that food behavior and lifestyle in the age of 14-18 years under study highlighted not clear touch from life's globalization. Although the higher prevalence of overweight and obesity in boys, studied other variables should be considered within normal. This can be explained by the fact that in general girls are more careful about their physical aspect. **Recommendations.** The socioeconomic characteristics, nutritional behaviors, physical activity, lifestyle are essential to the health and quality of life. Education and health food is not only the nurse role. But a social intervention which aims to promote behavior broad, sustained and coherent with psycho-physical health of the individual linked with personal life, tastes, emotions, society and culture.

**Krishna Kamsagar Linganna**  
Assistant Professor, College of Pharmacy, India

## **Cardioprotective Activity of Fruit Extract of Momordica Dioca Roxb. on Isoproterenol Induced Toxicity on Rats**

Cardiovascular diseases are the major death causing disease worldwide and identification of herb based therapeutics is the thrust area of current plant research. Present study was undertaken to evaluate the cardioprotective activity of *Momordica dioca* Roxb. (MDR) fruit extract on isoproterenol (ISP) induced cardiotoxicity on rats. The crude methanolic extract of MDR fruit (MEMD) was prepared by soxhlet extraction and fractionated into flavonoid (FFMD) and non-flavonoid (NFFMD). The aqueous extract (AEMD) was prepared from marc. All the extracts were standardized by preliminary phytochemical tests, in vitro antioxidant & free radical scavenging potential. MEMD was evaluated for in-vivo cardioprotective activity against ISP induced cardiotoxicity at three dose levels. The cardioprotective activity was evaluated by serum (CK-MB, LDH and AST) and non serum parameters like endogenous antioxidants (SOD, Catalase, GSH and Lipid peroxidation) and histopathological studies. The rats treated with ISP alone have shown elevated level of serum biomarkers, decreased anti-oxidant system and changes in histology of myocardium. The rats pretreated with MEMD have reversed the toxicity produced by ISP dose dependently. The level of biomarker enzymes were restored to normal by MEMD whereas maximum protection was seen at 400 m/kg. The activity was found to be significant when compared to the standard Vitamin E. The same was observed in endogenous anti-oxidant system as well as histopathological examination. The results reveal the protective effect of MDR fruit on cardiotoxicity induced by ISP. However, further research can be undertaken to reveal the mechanism and phytochemical(s) responsible for the said activity.

**Caroline Magnani**

PhD Student, Pharmaceutical Sciences University, Brazil

## **In Vitro Safety Evaluation of Caffeic Acid**

Phenolic compounds are abundant in the Brazilian plant kingdom and they are part of a large and complex group of organic substances. Cinnamic acids are part of this group of organic compounds, and caffeic acid is one of the representatives. Besides powerful antioxidant activity, increasing collagen production and prevent premature aging, caffeic acid has demonstrated antimicrobial activity and may be promising in the treatment of dermal diseases. One of the applications of caffeic acid is in emulsions, which are widely used by consumers for pleasant and refreshing sensory, but few studies have related the efficacy and safety of these products on the skin. The relevance of this study is based on evidence and to clarify the cytotoxic potential of this substance by preliminary studies in vitro. The cytotoxicity evaluation was done using the MTT method (3-(4,5-dimethyl-2-thiazolyl)-2,5-diphenyl-2H-tetrazolium bromide), colorimetric assay which determines the amount of insoluble crystal violet staining formed by reaction of reduction of MTT in living cells. A dose versus response curve was constructed, and it was possible to use the equation to determine the IC<sub>50</sub> of caffeic acid or the product concentration needed to cause 50% lethality of the cells. The results are promising since caffeic acid concentration that inhibited the growth of 50% of HepG2 cells (IC<sub>50</sub>=781,8µg/mL) is approximately 330 to 400 times greater than the concentration required to inhibit 50% DPPH radical scavenging (IC<sub>50</sub> DPPH= 2,39 µg/mL) and ABTS (IC<sub>50</sub> ABTS= 1,96 µg/mL) respectively. The maximum concentration of caffeic acid tested (1140 mg / mL) did not reach 50% cell death in HaCat cells. For the cytotoxicity assay, it was concluded that the caffeic acid does not have toxicity in HepG2 and HaCat cells on the concentration required to have antioxidant activity in vitro, and it can be applied in topical products.

**Elaine McNichol**

Director, University of Leeds, England

## **Developing a Patient Led Innovation Framework**

**Introduction:** Securing greater patient and public involvement (PPI) is a central theme of health policy in many countries (Coulter 2011) and is a growing healthcare phenomenon (Staniszewska et al 2011, WHO 2006). The challenge is how to ensure their voice is heard amongst the plethora of 'professional' voices representing the different stakeholders of provider organisations, healthcare industries and governments. We have addressed this by putting the patient voice first so that it sets the direction and leads the process.

**Method:** Drawing on the outcomes and learning from four different research studies undertaken with patients with experience of living with: leg ulcers, pain, reflux and persistent cough we have developed a framework of Patient Led Innovation. The Framework has been developed in partnership with both healthcare providers and health technology industries to provide a robust approach to PPI in both service delivery and product innovation

**Results:** The Framework provides an easy to use structure to facilitate robust PPI. It is also under-pinned by a number of core principles that are key to its successful implementation (McNichol 2012):

- Mutual respect between the patients, the differing healthcare clinicians and researchers and technology organisations
- A recognition that patients are experts in living with their condition and their experience of healthcare services and products
- It is a different but equally valid expertise to that of the 'professionals'

**Discussion:** Using the framework that has been developed and drawing on the four study areas, this paper will discuss the theory and practice of how actively involving patients in healthcare development at the beginning and at key stage points throughout the innovation process increases the likelihood that it will be responsive to their needs (Elberse et al 2012) and fit for purpose.

**Nyi Nyi Naing**

Professor, Universiti Sains Malaysia, Malaysia

**Moe Thwe Aung Myat**

Lecturer, Universiti Sultan Zainal Abidin (UniSZA), Malaysia

**Abdullah Mohamed Rusli**

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**Mat Jaeb Mat Zuki**

Chest Physician, Hospital Raja Perempuan Zainab II, Malaysia

&

**Nadiah Wan-Arfah**

PhD student (Trainee Lecturer), Universiti Sains Malaysia, Malaysia

## **The Median Time to Develop Recurrent Tuberculosis in Malaysia**

**Introduction:** Recurrence of disease in TB patients is an important indicator to evaluate the current TB control program. TB clinicians should be aware of time to get recurrent TB in patients. The results of this study will hopefully contribute a scarcity of knowledge about risks of recurrent TB.

**Objective:** To determine the median time to develop recurrent TB in tuberculosis patients attending the Chest Clinic at Hospital Raja Perempuan Zainab II (HRPZ II)

**Methodology:** The study was conducted by retrospective record review of 114 recurrent TB patients registered from 1st January 2003 to 31st December 2009 at Chest Clinic of HRPZ II. Kaplan Meier statistical method was applied to address the median time to get recurrence of tuberculosis.

**Results:** The overall median time to develop TB recurrence in registered TB recurrent patients was 6 months (95% CI: 4.58, 7.42) after the end of previous episode. By Kaplan Meier analysis, it was found the recipients of S2H2R2 drug regimen ( $P = 0.026$ ) or daily HR drug regimen ( $P = 0.049$ ) during the continuation phase took longer duration to catch recurrent TB than non-recipients of these drugs. Moreover, there also existed the statistical significant time difference between the defaulters and non-defaulters of treatment to get recurrent TB ( $P = 0.006$ ).

**Conclusion:** To reduce catching another episode of TB infection, patients should take complete course of therapy as well as should be treated with drug regimens containing the two most potent first line drugs isoniazid (H) and rifampicin (R) during the continuation phase.



**Vjollca Ndreu**

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## **Living with Dialysis. Elements to Improve the Quality of Life**

**Introduction:** Prevalence of chronic kidney disease is very high in the general population. The performance of these diseases goes towards the terminal stage and this is a moment when it 's needed renal replacement therapy-Dialysys.This treatment extends patients' lives for many years, but how this treatment affects quality of life in patients with chronic kidney disease?

**Purpose:** Aim of this study is to identify the effects of hemodialysis in patients' life quality. How does dialysis patient in physical activity, social activity and the social , mental health and family releations? What are the elements to improve the quality of life of dialysis patients.

**Methods:** To collect information a questionnaire was used with dialysis patients. The type of the study is called "quantum - quality". Part of the questionare were 48 dialysis patients treated at "Tirana University Hospital Center" (QSUT, Qendrea Spitalore Universitare Tirane).

**Criteria for inclusion in this study:** Patients who are treated with hemodialysis dialysis center in TUHC . Were excluded from the study patients treated with peritoneal dialysis and patients who are treated in other dialysis centers.

**The results:** By the answers given from the patients was noticed that renal replacement therapy it is demanding and has a strong affect on patients' quality of life , it affects their professional activity and many of them are not in working relation and have received disability status. A therapy repeated 3 times a week prevents the patient and his family, on having a normal social life and a stable economic situation. These patients show the presence of an anxiety syndrome due to depression. Because of this therapy the patients show a great sense of limitation on activities outside the family . Information about dialysis is poor and the only soruce of information is from the medical personnel of the dialysis center.

**Conclusions:** This study shows that dialysis therapy, affects the quality of life of the patients. It is becoming necessary and clear that treating the deases it is not enough. It is an imporatant part of the treatment to understand the effect on the patient's life that this therapy has.

**Steven Oberhelman**

Professor and Associate Dean of the College of Liberal Arts, Texas  
A&M University, USA

## **Toward a Typology of Byzantine and Post- Byzantine Healing Texts**

The subject of my paper is the late Byzantine and post-Byzantine iatrosophion. An iatrosophion is a collection of medical recipes taken from classical and Byzantine medical treatises and pharmacological works, as well as from folk medicine and non-traditional medical praxis. The first iatrosophia developed in the environment of the hospitals of the Byzantine Empire where they served as handbooks for the daily medical practice containing recipes and therapeutic advice. The writers of the hospital and medical craft texts distilled what they found useful from the available sources and supplemented it with new information. Later iatrosophia texts originating from the times of the Ottoman Empire, hence from post-Byzantine times, were mainly written in Greek Orthodox monasteries. This development is a consequence of the fact that in Ottoman times, hospitals rooted in the Byzantine tradition were restricted to monasteries. Most of the manuscripts were written by a variety of individuals in an effort to provide practical therapeutic guidance to a community frequently deprived of easy access to academic physicians and lacking the financial means for professional medical treatment. The copyists were interested laymen, professional healers, or clerics with access to existing manuscripts and occasional social contact with practitioners of the healing arts. Gradually iatrosophia became detached from the hospital environment and were more widely disseminated among the general population. Copied and recopied, these handbooks were now used in the community predominately by practical healers and midwives, by priests and monks. The ancient and early Byzantine medical knowledge remained but was increasingly supplemented by popular medicine.

I will discuss three texts that exemplify the above types of iatrosophia. One, ascribed to the monk Meletios, is the sort of reference text of later Byzantium which appeared in hospitals and was consulted by physicians and healing professionals working there. Doctors in private practice would have used it as well. A Cretan iatrosophion (dated to c. 1800) typifies the healing manual that practical healers of the post-Byzantium used. The manual contains medical recipes based on a classical and Byzantine pharmacology, but the recipes are supplemented by treatments based in religion, magic and exorcisms, and local healing traditions. The manual also contains nonmedical matters that were of concern and interest to villagers, farmers, herdsman, and individuals seeking help on everyday life. The recipes of the monk Gimnasios (died 1937), which were recorded by Greek journalists of the 1930s, show a botanist whose knowledge of thousands of plants allowed him to heal people who had no access to professional care. The medicines are composed of local flora and fauna, supplemented by simple ingredients that could be bought in

any apothecary of the time. In addition to describing these texts, I will make reference to the types of diseases each text treated and to the pharmacology that each text uses

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## **Incidence and Mortality from the Cancer of Oesophagus and Stomach in Kazakhstan: Results of 40-Year Surveillance**

**Background:** Despite a decrease in the frequency of occurrence of the cancer of oesophagus and stomach in the last decade in Kazakhstan, the cancer at these localizations continues to occupy one of the leading places in the structure of incidence of malignant tumors. The goal of our study was to analyze the incidence and mortality of oesophageal and stomach cancer in Kazakhstan from 1970 to 2010 while taking into account regional features.

**Material and methods:** The data sources were the Registry of the Ministry of Health and the Agency of Statistics. Incidence, prevalence, and mortality rates of the cancer of oesophagus and stomach in Kazakhstan were computed for the 40-year period. Cartograms were drawn based on estimates of standard deviations.

**Results:** From 1970 to 2010, there were declines in the incidence of stomach cancer (from 32.8 to 16.3 per 100,000 population) and in the incidence of the cancer of oesophagus (from 25.7 to 8.1 per 100,000 population). Mortality due to stomach cancer during the 40-year period also declined considerably, from 31.0 to 13.3 per 100,000 population. The decline in the mortality due to the cancer of oesophagus was even more dramatic: from 19.1 to 6.5 per 100,000 population.

The prevalence of stomach cancer was 36.1 per 100,000 population in 2003 and 41.8 per 100,000 population in 2011.

Based on the cartograms, in 1969, the incidence of cancer of the stomach was low (< 25.8 per 100,000 population) in 4 areas, average (25.8-35.2) in 6 areas, and high (>35.2) in 4 areas. In 2011, the rates changed considerably: low-incidence areas had the rate of <14.5 per 100,000 population. Low incidence was noted in 5 areas, average incidence (14.5-18.1) – in 2 areas. However, high incidence (>18.1) was observed in 7 areas.

**Conclusions:** The rates of incidence of cancer of the oesophagus and stomach in Kazakhstan remain rather high although intensive indicators of incidence and mortality, as well as the coefficients characterizing a share of these localizations in the general structure, tended to decrease.

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## **Kidney Involvement the Most Important Predictor in Lupus Erythematosus**

Systemic Lupus Erythematosus is an autoimmune disease characterized by the production of unusual antibodies in the blood whichs mistakenly attacks healthy tissue every. It can affects the skin, kidneys joints, brains and other organs. Kidney involvement is an important predictor of and contributor of mortality adnd morbidity from lupus. The treatment of lupus nephritis is composed from inuction phase of therapy (cyclophosphamide vs mycophenolate mofetil vs rituximab) followed by maintenance therapy. A retrospective cohort study of 420 SLE patients without renal damages . 89% of these (nr= 374) were woman and others were mans. We measure the glomerul filtration rate, presence of proteinuria (>0.5 g/day) Anti DNA, AAN, C3 and C4, hematuria , urinary cellular casts, azotemia and creatinemia , ect. Conclusion: During 10 years of the disease 41% (nr=172) of all patients develop lupus nephritis .C3 , proteinuria and Anti DNA were predictor of kidney damages. 41 patients developed cardiovascular damages, 32 patients developed pulmonary complication and 12 patients developed nervous system complications. We found that renal damages are the most important predictor of life quality and death.

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## **Different Serum Concentrations of Total Testosterone and Dehydroepiandrosterone Sulfate in Albanian Female Patients with Allergic Diseases**

**Background:** Several animal models and human studies have reported the immune - modulating effects of testosterone and dehydroepiandrosterone (DHEA) in allergic diseases.

**Objective:** Evaluation of serum concentrations of total testosterone and dehydroepi-androsterone sulfate in female patients diagnosed with allergies to air born allergens.

**Material and Method:** Serum concentrations of total testosterone and DHEA-S were measured in 82 females. 58 were untreated patients with allergic diseases and 24 were healthy volunteers as control group. The average age of women included in the survey was 33.1 years (SD  $\pm$  11.3 years), range 14-59 years. Patients were divided in four groups according to doctor diagnosed diseases: allergic rhinitis 32, allergic asthma 4, asthma/rhinitis 10 and allergic eczema/urticaria 12. All participants were subjects to skin prick test (SPT) with series of common allergenic extracts; patients were sensitized to at least one aeroallergen and 37,5% of healthy subjects were positive to skin prick test too.

**Results:** We found significant differences in serum concentrations of total testosterone and DHEA-s among five groups ( $p=0.046$  and  $p=0.04$  respectively).

**Conclusion:** Circulating levels of total testosterone and DHEAS-s are lower in our female allergic patients than in healthy subjects, except for asthma group in whom testosterone levels are higher than those in control group.

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&

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## **A National Profile of Deliveries by Women with Intellectual Disabilities in the US: Maternal Characteristics and Pregnancy Outcomes**

We used the 2010 Nationwide Inpatient Sample to examine pregnancy outcomes. Compared to other women, those with IDD were younger, more likely to be Black and have Medicaid and less likely to be Latina. They had longer hospital stays, were more likely to have a range of adverse pregnancy outcomes and were less likely to have Caesarean deliveries compared to other women. Further research should explore the determinants and develop interventions to improve these outcomes.

### *Summary*

**Background & objectives:** Ongoing deinstitutionalization has led the overwhelming number of US women with intellectual and developmental disabilities (ID) to live in the community today. As eugenic sterilization and segregation practices have eroded, births among women with IDD have increased. Researchers have investigated the parenting experiences and quality of these women, but there are no population-based studies in the US about their pregnancy outcomes. Four smaller studies from Australia, the UK and Sweden found elevated risk of adverse outcomes for mothers with IDD and their newborns. Women with IDD likely require additional support to have healthy pregnancies and deliveries, but there is no empirical evidence to begin to guide interventions. The two aims of this study were therefore (1) to characterize the population of US women with IDD who had hospital-based deliveries and (2) to determine their pregnancy and childbirth outcomes.

**Methods:** We identified women with IDD using ICD-9 codes in the 2010 Nationwide Inpatient Sample of the Healthcare Cost and Utilization Project. These data are sponsored by the Agency for Healthcare Research and Quality and cover 97% of the US population. The NIS is the largest publicly-available, all-payer inpatient care database in the United States. It contains data from

approximately 8 million hospital stays each year. We compared the prevalence of deliveries among these women to the general obstetric population including length of hospital stay and mode of delivery (vaginal versus Caesarean). Finally, we also contrasted the weighted prevalence of adverse pregnancy outcomes including pre-eclampsia, early labor, preterm birth, and late fetal death.

**Results:** The sample included 340 women with IDD, which represented a weighted total of 1,705 US deliveries in 2010 to women with IDD (fewer than one percent of the 3.9 million total US births that year). Compared to other women, those with IDD were younger, more likely to be Black, less likely to be Latina and more likely to have Medicaid insurance pay for their hospitalization. Ninety-nine percent of women with IDD had complicating conditions, compared to 94% of other women. Women with IDD had longer hospital stays and were less likely to have Caesarean section deliveries in contrast to women without these conditions. Rates of adverse pregnancy outcomes were elevated among the women with IDD, across a range of measures. Women with IDD were more likely to have early labor, preterm birth, pre-eclampsia and other hypertensive conditions, and late fetal death or stillbirth. There were no differences between the two groups of women in maternal death rates, which is relatively rarer in the US.

**Implications:** Women with IDD comprise fewer than 1% of deliveries in the United States, but they and their infants are at significantly elevated risk of adverse outcomes. The public health costs of these outcomes are likely to be substantial. Further research is needed to understand the determinants of these adverse pregnancy outcomes. However, pending further evidence, health care providers are advised that their patients with IDD are at elevated risk of serious pregnancy complications. Intervention to improve these outcomes are needed.



**Sonia Al-Qadi**

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## **Grasshopper Brain Barrier for CNS Drug Discovery: Transcriptomic and Functional Analysis of Efflux Transporters**

Drug efflux activity of ABC transporters, namely the p-glycoprotein (p-gp, *mdr1*), at the human blood brain barrier (BBB), constitutes a crucial challenge for CNS drug development. Accordingly, early screening of drug candidates is pivotal to sort out those whose brain uptake and, hence brain disposition is affected by efflux activity, in addition to measuring drug interactions with cell surface transporters. In this context, affordable, simple, high-throughput and predictive approaches are required. It has been recently proposed that grasshopper (locust) could be exploited, as an ex-vivo BBB model, for drug permeability assessment, as it has provided drug uptake trends similar to those observed in vertebrates. To have an in-depth description for this model and demonstrate its prediction power, as well as validity for drug development, identification of the expression profiles for efflux transporters, was performed in parallel with functional characterization. Gene expression profiling of ABC transporters, in locust brain, was achieved, by transcriptome analysis, followed by phylogenetic sequence analysis. At functional level, efflux activity, was examined, using a selective substrate of the p-gp which is deemed the most prominent efflux pump at the BBB. Lastly, the gene and functional data obtained were matched with those obtained from other conventional drug screening models. Overall, transcriptome analysis revealed the existence of ABC subfamilies, which is indicative of the existence of efflux mechanisms, at the locust BBB. Besides, the phylogenetic sequence analysis further confirms a conserved biology with respect to efflux pump machinery. Functionally, the developed locust ex-vivo model evidenced a saturable transport process for the p-gp substrate, with kinetic parameters, being comparable to those obtained from in vitro systems. Taken together, the locust ex-vivo BBB model might hold promise, as a cheap model with a high-throughput screening potential in the early discovery phase of CNS drugs.

**Belal Rahhal**

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## **The Influence of Working in Charcoal Factories on Selected Respiratory Parameters in West Bank Palestine**

Workers in charcoal factories are reported to develop respiratory problems in Palestine. However, to date, no formal studies have been conducted on the effects this profession may have on respiratory health. This study aims to determine the effects of working in charcoal factories on selected respiratory parameters. Test subjects were first divided into two groups, one of charcoal workers and the other of healthy non-workers, and the working durations of members of the first group were noted. Forced spirometry was used to measure the forced expiratory volume in 1 second (FEV1) and forced vital capacity (FVC). These values, alongside the FEV1/FVC ratios and prevalence of restrictive lung disease of the two groups were compared. The results show that there is a significant decrease in the FEV1 ( $p=0.015$ ) and FVC ( $p=0.017$ ) values in charcoal workers in comparison to non-workers. While the FEV1/FVC ratio is not significantly affected ( $p=0.088$ ). The prevalence of restrictive lung pattern is 64.4% among charcoal workers, which is significantly higher than the non-workers group ( $p=0.017$ ). The severity of restricted lung disease increased with the increase in working duration. We conclude that working in charcoal factories resulted in significant negative changes in the spirometrical readings, and increasing prevalence of restrictive lung disease.

**Vanda Repiska**

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&

**Ivana Fridrichova**

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## **DNA Hypermethylation Detected in Invasive Breast Cancer**

**Objective:** DNA methylation as an early event in breast carcinogenesis has been frequently studied in tumour samples. The aim of this study was to compare the relationship between DNA methylation levels of genes associated with invasivity and metastasising and aberrant protein expression (breast cancer progression).

**Methods:** A total 55 healthy controls and 185 patients with primary breast cancer, as well as plasma and peripheral blood cells has been analysed by using pyrosequencing method. The expression of 11 proteins in paraffin-embedded biopsy was evaluated by immunohistochemistry. Genes containing CpG islands in promotor region were suggested for screening because they could be epigenetic upregulated with high probability. DNA methylation of APC, ADAM23, CXCL12, ESR1, PGR B, CDH1, RASSF1A, SYK, TIMP3, BRMS1 and SOCS1 genes has been detected.

**Results:** DNA hypermethylation of tumor suppressor genes is tumor-specific and could be used for recognition of tumor cells. We observed higher methylation status for 4 genes (RASSF1A, APC, CXCL12 and ADAM23) from 11 genes evaluated in tumors. The highest promoter methylation level was 88%, detected in RASSF1A and APC genes. Variable expression profiles were identified in analyzed genes ranging from negative expression to high expression. Our present results indicate the variability in expression of the proteins studied in tumor tissue of patients with breast cancer.

Conclusion: We can conclude that the quantitative analyses of tumor DNA methylation in any of RASSF1A, ADAM23, CXCL12 and APC genes could have prognostic potential. Supported by the grant APVV-0076-10 - the Slovak Research and Development Agency and Research and Development Operational Programme (ERDF)-26240220058.

**Peter Roberts**

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## **An Investigation into Perceived Value of Peer Assessment as a Summative Assessment Method for Final Year Occupational Therapy, Physiotherapy and Podiatry Students during their Group Dissertation Projects: A Students Perspective**

Peer assessment for group work has been introduced into higher education for many years now (Conway et al, 1993); its usages have been to either allow students to assess the quality and content of each other's work (Topping, 2009) or to assess the contributions of each other in a group piece of work (Xiao\_Hua Jin, 2011; Maiden and Perry, 2010; Bushell, 2007). Both have benefits to the student; the former allows students to develop their critical skills by examining the work of others against set criteria and the latter inculcates confidence in judging others' work contributions and the ability to legitimately voice concerns about poor work or inequalities of work. This confidence to judge and voice concerns is particularly significant for student healthcare professionals (Hall and Weaver, 2001). Work in this arena invariably consists of teams working together for a common goal but often with differing responsibilities and tasks. It has already been noted that failure to speak out against poor team working has resulted in 'patients' lives being put at risk (Francis, 2013) and therefore preparation for this during undergraduate training is essential.

As an established form of summative assessment within this final year interdisciplinary module; this qualitative research study via the use of focus groups, aims to explore students' confidence in their ability to assess each other, to explore whether the current method is a meaningful way of assessing contributions and to identify the benefits and limitations of the process. Currently this module and peer assessment element of assessment applies to occupational therapy, physiotherapy and podiatry students working in interdisciplinary groups; however this will be expanded to include nursing and midwifery students from 2014. In preparation for this, it is anticipated that the findings from this data will assist in developing this assessment process further.

Data collection is almost complete and data analysis will then commence. Ethical approval was granted by the University of Huddersfield's School of Human and Health Sciences School Research Ethics Panel.

**Gisela Schmidt**

Assistant Professor, Andrews University, USA

## **Enhancing Leadership Skills in Clinical Practicum: A Medical Surgical Nursing Class Experience**

The present healthcare system with its complex environment and extremely fast-paced changes is in need of well-prepared professional nurses, with exceptionally and outstanding leadership skills to be able to address such a demanding challenge. Nursing schools are participants in that challenge preparing nursing students for that role. To fulfill this commitment, a Medical Surgical Nursing class from a Baccalaureate Nursing Program incorporated in the clinical experience the role of a team leader, represented by a student nurse. Leadership skills are not learned and put into practice from one day to the next. We cannot expect that nursing student surge through leadership theory, graduate, be exposed to real world situations; and presume they can assume leadership positions without a hands-on exposure throughout nursing school. Consequently, preparing nursing students during their school years with theory and practice will prepare them for an increasingly demanding health care system.

Each student in the class, during the clinical rotation, is assigned to be a team leader; performing a leadership role with specific responsibilities, which are described in the syllabus and a check list that guides the specific activities to be completed. The evaluation of the experience was positive for the student team leader and the students in the clinical rotation. The student team leader gained confidence, improved their critical thinking skills, learn the importance of prioritization and was able to communicate positively with other students despite their leading roll. The students who were part of the team sought advice from the student team leader; which helped to develop a trusting relationship, influencing positively the outcome in the patient's care. This article describes the importance of preparing nursing students for leadership accountabilities; responsibilities of the student team leader, the different activities they had to accomplish, and the positive impact the leadership role gave the students.

**Enkeleda Sinaj**

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## **The Effects of Neuromuscular Taping as Integrative Therapy in Patients with Frozen Shoulder**

**Introduction:** Frozen shoulder affects in general all people , more woman than man. It causes pain and stiffness in the shoulder compromising shoulder`s motion. As a physiotherapist I am expected to evaluate the best therapy for patients with frozen shoulder to develop a recommendation for treatment. **Purpose:** This experimental design study investigates the effect of combination of taping neuromuscular and traditional rehabilitation program compared with traditional rehabilitation alone in patients with frozen shoulder. The taping neuromuscular is a technique that involves the application of an adhesive elastic tape on the skin, with local and distance effects. Acting on the skin, the muscles, the venous system and the lymphatic system, the taping aims to achieve six main objectives: relieve pain, normalizes muscle tension, remove the lymphatic and venous congestion, improves blood vascularization , correct joint alignment, improves the posture. **Methods:** A total of 40 patients aged between 40 and 60 years were involved in the study. Patients were divided in two groups,: first group subjected of 12 sessions of combined therapy (experimental group 20 patients) and a second group subjected of 12 sessions of traditional rehabilitation (control group 20 patients) .They were evaluated before the treatment and after 4 weeks using visual analogue scale (VAS), range of motion (ROM) . **The results:** Analysis the data showed statistically significant improvement in both the experimental and control groups. In addition, the mean improvement in VAS and ROM was significantly greater in the experimental group than in the control group. **Conclusions:** The study showed that the combination of taping with traditional treatment leads to better outcomes in rehabilitation of patients with frozen shoulder.

**Mark Speechley**

Professor, Western University, Canada

&

**Andrew Wister**

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University, Canada

## **Inherent Tensions Between Population Aging and Health Care Systems: What Will a Modern Health Care System Look Like in Twenty Years?**

Health care policy forecasts for aging populations in countries with modernized health care systems are being influenced by apocalyptic demographic prophesies of rapid growth in older cohorts who have high health care utilization rates, especially after age 80. These predictions create crises via exaggerated linear, unidirectional demographic patterns by arguing that health care systems will crumble under the sheer weight of population aging. Some researchers have tried to debunk this 'myth' by pointing to carefully done studies showing that population aging per se has only contributed to a modest amount -- less than 1% per year in public sector health care spending each year. On the supply side, the principal drivers of health system costs include: expensive new pharmaceuticals that are protected by patents but offer modest therapeutic gains, the relentless expansion of the uses of technologies into new areas, essential hospital costs such as hotelling, salaries, benefits and fees of physicians and other workers, and, last and not least, home and community services. However, few studies have examined the complex and often reciprocal associations among population aging, health status changes, and modern health care systems. Additionally, debates have tended to focus on absolute numbers of older people with little attention devoted to aging baby boomers as a unique cohort. This presentation attempts to elucidate the dynamics and inherent tensions of population aging as it relates to age-period-cohort changes in health status and health care utilization, and attainable system-level transformations. We specifically address three interlocking problems: 1) the paradox of increasing life expectancy with compression of morbidity concurrent with the surprising rise in the prevalence of chronic illnesses and comorbidities; 2) the interactive relationship between age-period-cohort health status change and temporal improvements in health care efficiency; and 3) the disconnect between health care system efficiency, increasing demands, and the potential re-division of labour among health professions made possible by the technological de-skilling of the core functions of diagnosis and treatment. These problems are investigated using interdisciplinary evidence, and applying a set of assumptions to scientific forecasting of modern health care system transformations over the next twenty years, a period in which population aging will peak. We also address cohort changes in health care expectations



and preferences, such as health knowledge/literacy, patient-driven requests for treatment, and end-of-life decision-making (i.e., euthanasia, home deaths, etc.), given that the highest intensity of health care occurs in the last month of life. Three potential scenarios are advanced that differ on the timing and extensiveness of policy reform versus system-level inertia.

**Kathleen Sternas**

Associate Professor, Seton Hall University, USA

## **Teenage Pregnancy Prevention: Interventions and Best Practices- A Global Perspective**

**Background:** Global trends indicate high rates of teenage pregnancy in the United States. Teenage birth rates are higher in USA than Canada and Greece. Teenage pregnancy rates are increasing in the Philippines. High rates of risky behaviors exist among teenagers including drug/alcohol use, sexual activity leading to STD's/HIV and pregnancy. This presentation describes: global perspectives on teenage pregnancy prevention and interventions to reduce risky behaviors/teenage pregnancy in USA/other countries; outcomes of teenagers in an evidenced-based intervention that aims to reduce risky behaviors/promote abstinence; and compares intervention and comparison participant outcomes. Bandura's Social Learning theory guided the intervention on sexuality discussions, mentoring, health/fitness classes, cultural events, community service, and recognition.

**Methods:** Pretest post-test design. Sample: high-risk, primarily African-American 6th to 8th graders in four intervention(n=388;223 girls/165 boys) and five comparison(n=309;151girls/158 boys) schools. Intervention participants were randomly selected. Comparison participants were convenience sample. Intervention/comparison schools were matched on demographic variables. Measures:AFL Core Baseline/Follow-up and Demographic Questionnaires. Analyses:Pearson Chi Square and Mann Whitney U Tests. Level of significance was .05. Results:Abstinence education, comprehensive sex education, health promotion are used to prevent teen pregnancy in USA/other countries. Post-test II

**Results:**Significantly more intervention than comparison participants said:no to wrong activities(p=.003); stayed away from trouble(p=.007); important to remain abstinent(p<.001)and future spouse remain abstinent (p<.001); abstinence avoids pregnancy/STD's/health problems (p=.047);

Significantly more intervention girls than boys reported: asking parents dating/alcohol/drug questions(p=.001);saying no drinking drugs/sex(p=.01); remaining abstinent until marriage(p<.001); problem with sex even when no pregnancy results(p=.001). More comparison than intervention participants reported:drinking (p<.001); friends drink (p<.001); used marijuana/drugs (p=.001); sex okay if dating long time(p=.045).

**Conclusion:** Intervention participants have more significant outcomes related to abstinence behaviors/attitudes than comparison participants. Findings suggest the intervention promotes abstinence, reduces risky behaviors, helps prevent teenage pregnancy/health problems. Findings have implications for practice, education, research on effective interventions for preventing pregnancy and promoting sexual health in teenagers.

**Donald Stewart**

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**Budi Laksono**

Professor, Griffith University, Australia

**Darren Gray**

Professor, Griffith University, Australia

**MJ Park**

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**Ross Sadler**

Professor, Griffith University, Australia

**Hadisaputro Suharyo**

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**Archie Clements**

Professor, Griffith University, Australia

## **Preventing Parasitic and Gastrointestinal Infections in Central Java: The Balatrine Intervention**

This project aims to reduce infection in rural Indonesian village environments by soil-transmitted helminths (STH), one of the most prevalent sources of human infection globally. Indonesia has some of the world's highest concentrations of this neglected tropical disease and this affects not only child development and the health of girls and women but also growth in infrastructure and productivity. The objective is to provide conclusive systematic and scientific evidence regarding the effectiveness and acceptability of a household latrine (the 'BALatrine') in reducing STH. This low cost, locally constructed latrine works in both wet and dry conditions and is designed for local people and materials in resource poor settings. Recent funded trials (UBS-Optimus Foundation) show the latrine, under development since the 1990's, produces key health benefits.

A cluster randomised control trial across 16 villages in Central Java is underway, with the primary outcome of proving the effectiveness and acceptability of the BALatrine in reducing STH infection, water pollution and improved hygiene behaviour. This paper will provide evidence from baseline data of overall infection rates and compare populations in villages that have access to a latrine with those that do not. Data from stool samples, water from household wells and a questionnaire will be presented, indicating contamination rates, sanitary behavior, personal hygiene and school/absenteeism across 8 control and 8 intervention villages.

To date, our research has confirmed earlier findings that as a latrine model the 'BALatrine is flexible, easy to make and install, and appropriate to the village environment. In particular, because it's household rather than communally based it can be 'owned' by family members and thus kept clean and operational. The BALatrine could offer an important, culturally appropriate intervention in the fight against gastroenteritis, helminthiasis and other neglected tropical diseases. Our research using a cluster randomized trial should confirm this.

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**Hameed Hussain**

Psychiatric Consultant, Ministry of Health, Kingdom of Bahrain

**Huda Al-Marhoon**

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## **Cognitive Behavioral Therapy with Hypnotherapy is Effective for Vaginismus: an Open Label Study in Bahrain Psychiatric Hospital**

**Background:** Many couples are unable to consummate their relationship due to vaginismus. A program that combines education, behavioral modification and hypnotherapy for treating vaginismus has been evaluated.

**Methods:** This is an open - label descriptive study on Bahraini patients with primary vaginismus referred to the Psychiatric Hospital, who were cooperative and willing to go through the six-session program. The couple were encouraged foreplay without attempting penetration during the program. The sessions consisted of using cognitive behavioral approach alone in the first two sessions for the couples and hypnosis in the third to sixth sessions for the patients with a female therapist. The sessions comprised (1) educating both partners about the structure and function of the female genitalia (2) psycho-education about the cognitive model of anxiety (3) hypnotic session concentrating on enhanced patient self esteem, desire to change and overcome the problem (4) hypnotic session concentrating on intercourse without penetration in imagination focusing on all senses and pleasure (5) hypnotic session using imagination on the partner in full sexual intercourse using all senses, focusing on the pleasure of the process and penetration, and suggestion of enjoying it in the future (6) and hypnotic session using the imagination of the partner in full sexual intercourse with suggestion of doing that on the appointed day.

**Results:** The patients aged between 19 and 30 years suffered vaginismus for long period. Among 11 patients who completed the program 10 succeeded; after the first two sessions all of them reached orgasm with imagination and reported intense pleasure.

**Discussion:** Psycho-education and self-esteem enhancement are effective to encourage the desire to be like other women, to seek motherhood and to save the marriage. The association of bleeding with virginity and other sociocultural beliefs due to a lack of sex education play a role in vaginismus. Women with sexual dysfunction rarely seek professional help due to the stigma and sociocultural barriers. The presence of a female therapist during all sessions, and to conduct the hypnosis session alone are important to encourage the patients to continue with the program.

**Conclusion:** A program which combines CBT and hypnotherapy is very effective in treating vaginismus and is widely accepted by patients.

**Anna Tsaroucha**

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## **Is There a Link Between Dental Pain and Behavioural and Psychological Symptoms of Dementia (BPSD) in Older Nursing Home Patients?**

**Objective:** Oral care has been traditionally considered poor in nursing homes and increased dental problems have been particularly associated in people with dementia. Whilst behavioural and psychological symptoms of dementia (BPSD) have been associated with pain in general, a link with dental pain has so far not yet been established. This study investigated the potential link between treatable dental problems (that might cause pain) and BPSD.

**Method:** Sixty five patients exhibiting BPSD were recruited in the study from three nursing homes in West Midlands. Patient cognitive and behavioural status was assessed using the Mini Mental State Examination (MMSE) and the Cohen-Mansfield Inventory (CMAI), and then subjected to dental screening using the Oral Health Assessment Tool (OHAT).

**Results:** The dental examination by a qualified dentist revealed no dental problems that required treatment or likely to cause pain in any of the patients. The results suggest that in this exploratory sample BPSD was not caused by dental problems or dental pain.

**Conclusion:** More trials are necessary to establish whether dental or other types of pain are linked with BPSD and whether analgesic treatment versus antipsychotics will aid behavioural management.

**Karen Ulyott**

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&

**Brenda Green**

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## **Decolonization of the Nursing Academy: Engaging Aboriginal Students in Education: Two Case Studies**

A goal in nursing education is to remind the educator and the academy what is unsettling about decolonization...that colonization continues to exist and flourish within the academy. Given the history of colonialism, assimilation, and quality of life, many Canadian Aboriginal students may not successfully conform to conventional institutional norms within nursing education. Most solutions developed by institutions to address the lack of Aboriginal student success are based on the presumption that something is lacking within the student. This perspective is inherently one imbedded in colonialistic assumptions as most attempts to provide programs that bridge, upgrade and integrate students into a postsecondary systems are founded on a victim blaming mentality.

This paper suggest that “respect,” “relevance,” “reciprocity” and “responsibility,” are more humanistic and culturally sensitive terms that reflect the deeper purpose envisioned by Aboriginal people. Understanding these experiences through holistic and complex interrelationships expands the notion of intersectionality which places the student nurse within their lived, social, racial, pre-professional and academic environment. This life-world perspective brings together an increased emphasis on experiences that will further shape the Aboriginal student nurse’s perspectives. As a result sources of knowledge are concepts grounded in time, place and within a social context and is an ongoing process.

Two case studies are presented to illuminate how respect, relevance, reciprocity and responsibility are useful perspectives to construct a base from which to gain a better understanding of the experience of being an Aboriginal student nurse learning and working within a post-colonial world.

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&

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## **Nursing Informatics in Nursing Education**

**Objective:** In this study, it is intended to provide a conceptual framework on the nursing informatics methods used in nursing education.

**Method:** Abstracts of articles published in the last five years with the key words "nursing informatics" and "nursing education" in Pub-Med database were screened. Conforming to article 46 of the 213 study abstracts were examined.

**Results:** Nursing informatics methods used in nursing education can be the methods used in the nursing profession but they may also be used only for training. This issue can take advantage of various hardware and software tools. Nursing informatics methods used in nursing education;

- E-learning/ distance learning/ online education for use in; course management systems, virtual classrooms, online tutorials,
- For formal and distance education usage; podcasts, database using, social software, social media, Second Life (SL), Web quest, problem-based learning integrated nursing informatics, Cloud computing, e-health, information technology (IT) applications/ health informatics/ clinical information systems, road-map guided Excel VBA,
- Usage for Clinical/Laboratory Practices; PDA-assisted simulated clinical experiences, human patient simulation, simulation scenario, electronic health records (EHR)/ electronic health records for nursing education (EHRNE) software program, tele-health applications, personal phones /smart phones, personal digital assistants / personal response systems, incident event reporting system.

**Conclusion:** Active usage of nursing informatics methods in nursing education for aligning is required. There are many tools which can be used for this purpose.

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**Alev Yildirim**

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&

**Menekse Ulusoy**

Lecturer, Selcuk University, Turkey

## **Web Based Training Programs in Nursing Education**

Web based training programs are one of the most important developments of 20th century. Thanks to these developments, the people in different geographies, different ages and different learning capacity have the right to education. However, the individuals who failure to receive education or leave education progress because of age, disease, war, familial, economic and geographic reasons are given the chance to complete their education.

Expansion of levels of competence in a professional manner and changing the traditional roles reveal the necessity of continuing education in the level of individual and organizational. At the same time today, cases such as health care advances in technology, an increase in knowledge, need of evidence-based health care applications, strengthening new staff, the use of information technology has affected health care services and staff working in these services. In this context of web-based educational practices constitute an important part of the health care system can be said.

Web-based learning programs which become common methods in health care education have contributed significantly to the nurses' development in professional who are an indispensable part of the health care system. It is reported that web-based educational practices which provides an interactive educational model, contribute to the development of nurses' clinical knowledge and skills.

Nurses in Turkey due to the nature of the health care system too many times to give care to patients and is responsible for performing routine clinical procedures. So, they need to educational which improve their clinical knowledge and skills. In this context, web-based training programs can be considered as a viable option.



**Gangadharappa Hosahalli Veerabhadrapa**  
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## **Formulation and Evaluation of Celecoxib Nanosponge Hydrogels for Topical Application**

Celecoxib is a selective cyclo-oxygenase-2 inhibitor has been recommended orally for the treatment of arthritis and osteoarthritis. Long term oral administration of celecoxib produces serious gastrointestinal side effects. It is a highly lipophilic, poorly water soluble drug with oral bioavailability of around 40% (Capsule). This belongs to BCS (Biopharmaceutical classification of system) class II system. This is having least solubility 7.6 µg/ml in water. Therefore the aim of the present investigation was to improve the Solubility and Bioavailability of Celecoxib using Beta-cyclodextrin and NN-Methylene Bisacrylamide Nanosponge Hydrogels. The solubility of the prepared nanosponge freeze dried particles were in the range of 230.49 ± 0.16 to 490.48 ± 0.88 µg/ml which indicates that the solubility of the Celecoxib increases by 20 to 40 folds. From these results confirm that celecoxib was suitable preparation of nanosponge formulation. The prepared Nanosponges were characterized using differential scanning calorimetry, scanning electron microscopy, Transmission electron microscopy, x-ray diffractometry, FT-IR analysis, Zeta-potential and Polydispersity index.

**Suchitra Wagle**

Student, Indian Institute of Technology, India

**Sarmistha Pattanail**

Professor, Indian Institute of Technology, India

&

**Mrinmoyi Kulkarni**

Professor, Indian Institute of Technology, India

## **Patients in Disguise: Revealing the Typology of Medical Tourists in India**

**Background:** When an international patient arrives at the hospital, different categories emerge pertaining to the type of visa, ailment condition, and insurance coverage. Medical visa rules allow only three entries a year, with a mandatory two-month gap between two entries. Patients lay different strategies in order to avail treatment which eventually results in hospital admitting international patients irrespective of the type of visa.

**Purpose:** It is interesting to observe and understand how a hospital lays its own way outs to register the patient with different types of visa and insurance coverage in the absence of any written rules.

**Methodology:** Ethnography was carried out in one of the multispecialty hospitals in Mumbai, India. In depth interviews were conducted with the registration staff, billing staff and the international patient co-coordinator in order to understand the categorization of patients and the process of registration of the patients.

**Results:** Patients coming for medical treatment get camouflaged as tourists coming for vacation. It was seen that 50% of the total inpatients came on a tourist visa while all the out patients were on a tourist visa. The patient without a medical visa gets admitted as an emergency patient.

**Conclusions:** This research tries to categorize diverse categories of medical tourists that visit hospital. The study brings forward the lacunae in the visa registration process and the necessity to take essential steps regarding the registration of the medical tourists. It also comments on the tactics applied by the hospital in the absence of any written rules.

**Robin J. Jacobs**

Professor, Nova Southeastern University, USA

&

**Elaine Wallace**

Executive Associate Dean, Nova Southeastern University, USA

## **Identification of Musculoskeletal Disorders in Medically Underserved Regions of Rural Vietnam**

**Introduction:** Understanding and elucidation of musculoskeletal somatic dysfunction in medically underserved areas of Vietnam has yet to be achieved and remains a priority for the World Health Organization. Poor and underserved Vietnamese may be experiencing increases in work-related musculoskeletal disorders. There is an expanding need for interventions that target management of musculoskeletal dysfunctions.

**Method:** To evaluate musculoskeletal dysfunctions in persons receiving medical care during a 2012 medical mission trip to the Ben Tre province of Vietnam, 295 participants aged 18-88 years ( $M=59$  years;  $SD=14.65$ ) completed an anonymous questionnaire on musculoskeletal acute (past 7 days) and chronic (past year) pain. Survey items also included demographic information, general health, and number of physician visits in the past year. The survey was offered in Vietnamese and took approximately 15 minutes to complete. Data were analyzed using SPSS v.20 statistical software.

**Results:** The sample ( $N=295$ ) consisted of 69% women. One-fourth of all participants had not seen a physician in the past year; 33% saw a physician once, 16% saw a physician twice, and 13% saw a physician 3 times. Twenty-five percent reported their health status to be "not too bad." Associations were found between gender and chronic pain in the shoulder, upper back, wrist/hand, and knees and acute pain in the wrist/hand and knees. Women reported more chronic neck pain than men (56% vs. 44%), shoulder pain (53% vs. 47%), upper back pain (79% vs. 21%), hand/wrist pain (85% vs. 15%), and knee pain (80% vs. 21%). Chronic pain in the lower back and knees was statistically significantly associated with older age.

**Conclusion:** Data from this study can help determine which treatment modalities will be most beneficial when considering the development of targeted health care services and in generating guidance protocols specific to age and gender for future medical providers practicing in this region.

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## **Interacting EU Public Health and Research & Innovation for Improved Healthcare**

Close cooperation between health professionals and the research community is a crucial issue to help steadily improving healthcare and targeting health research on most relevant questions of human health. The European Union undertakes initiative since long to improve inter-linking of these two sectors with the aim of continuously raising healthcare to higher levels and stimulating ideas for research. These efforts are underpinned by approaches included in the new EU Health Programme and the new EU Research Framework Programme, Horizon 2020, both for the period 2014-2020. Pragmatic aspects of these approaches are reinforced actions for setting up new research infrastructure, joint programming of actions, interdisciplinary consultations for priority setting.

The new EU Health Programme comprises enlarged thematic areas for taking action in this sense. The programme is built around the following four general objectives:

1. Promoting health, preventing diseases and fostering supportive environments for healthy lifestyles;
2. Protecting citizens from serious cross-border health threats;
3. Contributing to innovative, efficient and sustainable health systems, and
4. Facilitating access to better and safer healthcare for Union citizens.

The new EU Research Framework Programme Horizon 2020, in its chapter on Health, demographic change and wellbeing, is targeted on personalising health and care. Research & Innovation supported by Horizon 2020 in this area will:

- improve the understanding of the causes and mechanisms underlying health and disease;
- increase ability to monitor health and to prevent, detect, treat and manage disease;
- test and demonstrate new models and tools for health and care delivery.

The 'Investing in health' European Commission Staff Working Document links these policy frameworks more closely to the broader Europe 2020 strategy. More specifically, it stresses the necessity to invest in sustainable health systems, invest in people's health and invest in reducing health inequalities. Taken together, these three strands demonstrate that a healthy population and sustainable health systems are decisive for a smart, sustainable and inclusive growth and wealth in Europe.

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## **Short-Term and Long-Term Survival Probabilities in First-Ever Stroke Patients**

**Introduction:** Stroke has become a burden and an important public health problem to the health care providers and to the society. It is projected that in 2020, stroke will be the second leading cause of death and disability worldwide. Few studies are known to identify the survival probabilities in different periods of time.

**Objective:** This study was aimed to determine the 31-day, 1-year and 5-year survival probabilities in first-ever stroke patients.

**Methods:** A retrospective record review study was conducted among 613 first-ever stroke patients admitted to the Hospital Universiti Sains Malaysia, Kelantan, Malaysia. Data was extracted from medical records from 1st January 2005 until 31st December 2011. The Kaplan-Meier product limit survival curve was applied to determine the 31-day, 1-year and 5-year survival probabilities. Log-rank test was used to test the equality of survival time between different groups.

**Results:** A total of 149 patients died during the study period. The 31-day, 1-year and 5-year survival probabilities were 76.2%, 72.9% and 70.4% respectively. There were significant differences of survival time based on types of stroke, Glasgow Coma Scale, level of consciousness, atrial fibrillation, fasting blood glucose, systolic blood pressure and diastolic blood pressure. There were no significant differences of survival time based on smoking status, age at the time of diagnosis and gender.

**Conclusions:** This study provides added information on effect of various clinical and socio-demographic characteristics on survival time of first-ever stroke patients. Further study should be considered to implement in addressing the prognostic factors of first-ever stroke patients.

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## **Is There a Relationship Among Urban Obese African-American Women and Psychosocial Factors of Literacy Knowledge about Obesity, Health Beliefs and Self-Efficacy?**

**Aims & objectives of the Study:** This study examined the relationships among the psycho-social factors of literacy, knowledge about obesity, health beliefs about obesity, and self-efficacy among urban low-income obese African-American women.

**Methods:** A total of 89 urban low-income African American women participated. Instruments: 1) Rapid Estimate of Adult Literacy in Medicine (REALM), 2) Knowledge about Obesity and Exercise scale, 3) Health Beliefs about Obesity questionnaire, 4) A Self-efficacy scale for coping with difficulties in life and 5) a Demographic profile questionnaire which was developed by the investigators

**Results:** Literacy was significantly correlated with knowledge about exercise ( $r=.28$ ,  $p=.01$ ) and health beliefs, but was unrelated to was unrelated to knowledge about obesity ( $r=.14$ ,  $p=.20$ ) Women with higher self-efficacy had greater knowledge about obesity and stronger health beliefs than women with lower self-efficacy. Results from multivariate regression showed that combined knowledge about obesity and exercise was associated with higher total score on the health belief questionnaire ( $p<.0001$ ) and increased education ( $p<.0001$ ). When the Health Belief about Obesity Questionnaire subscales were simultaneously analyzed in relation to knowledge about obesity and exercise (adjusted for age and education), higher belief scores about benefits and susceptibility were each significantly associated with knowledge (both  $p<.0001$ ), as was education ( $p=.0002$ ).

**Conclusion:** In conclusion, we suggest further investigations expanding the focus on psycho-social variables and obesity in women.

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## **Evidence-Based Nursing Practices**

As a result of increasing the aging of society and chronic diseases, expensive technological and pharmacological methods are used. However, using resources in the most appropriate way to provide quality care to more people has increased the need for an appropriate approach. The most appropriate approach is evidence-based practices. The primary goal is maintain quality of care physical, mental, social aspects. Appropriate resources to provide the best care are patient preference, clinical expert opinion and scientific research should be obtained from the clinical evidence. Evidence-based nursing is a decision-making the process of using the best available evidence care environments, nurses' clinical expertise, and patient preferences. The gold standard for evidence-term is randomized controlled trials. As the classification of levels of evidence in nursing Joanna Briggs Institute classification level of evidence are used. EBP1 process is evaluation of the clinical problem determination, problem either to respond can be used systematic research evidence, validity, reliability and applicability in terms of ratings, changes in decision-making, evidence, experience and patients exceptions to integrate and clinical success. EBP1 supply cost-effective, team collaboration, requiring the quality of care, outcomes, satisfaction and professionalism, which increases maintenance standardizing the research findings facilitate the implementation of the clinical skills and research combining the best evidence allows you to reach up. In the implementation of EBP1, nurses as a critical evaluation of research, developing skills and practices creating a culture grounded in scientific knowledge are required. EBN2 in undergraduate and graduate nursing education programs and teaching practices to provide opportunities to develop projects in the arrangements should be made.

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## **Novel Curcumin Analogs Modeling, Synthesis, Tubulin Polymerization and Cytotoxic Assays**

Background: Curcumin [1,7-bis(4-hydroxy-3-methoxyphenyl)-1,6-heptadien-3,5-dione] is the major constituent of turmeric powder extracted from the rhizome of the plant *curcuma longa*. Extensive research conducted within the past years has revealed that curcumin is a highly pleiotropic molecule that modulates and interacts with a diverse range of molecular targets and hence it possess anti-proliferative activities against tumor cells in vitro, anti-inflammatory, antibacterial, antiviral, anti-hepatotoxic, hypotensive and anti-cholesterolemic activities. Since cancer is a result of the dysregulation of multiple cell signaling pathways so curcumin's multi-targeting ability may be the key to its therapeutic potential against cancer. Also the great similarity in structure between curcumin analogs and chalcones inspired their testing against tubulin enzyme activity. Recent research revealed that chalcones possess cytotoxic activity associated with tubulin inhibition and interference with microtubule formation, which is essential in cellular processes such as mitosis and cell replication. Aims: Novel Curcumin analogs were designed, synthesized and tested for their antitumor activities. Also in silico and in vitro studies has been performed to predict the binding affinity of the target compounds and to test their ability to inhibit tubulin assembly and act as microtubule destabilizing agents. Methods: Analogs Ia-g, IIa-d, IIIa-d and IVa-e represent four different series of compounds designed and synthesized with 3,5-dibenzylidenepiperidin-4-one core moiety. Results: Compounds showed interaction energy comparable to or within the range of podophyllotoxin itself when docked into the colchicine binding site of tubulin using the podophyllotoxin-tubulin complex (PDB 1SA1). Conclusion: Acylation of N-piperidone ring and the use of medium sized ester or ether



groups at position 4 and the presence of halogen atom at position 5 of both benzylidene rings, greatly enhanced the binding affinity of such analogs. Results of these compounds could be used for further future development to obtain more potent analogs.