

9th Global Public Health, Occupational Safety and Health Policy

March 23-24, 2023 | Webinar



Global Public Health 2023

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Volume : 13

The arrival of Edibles in Quebec cannabis market: what can be done to minimize the health impact?

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Background: The Vigilance Committee of the Cannabis Regulation Act in Quebec started his work in fall of 2018. The setting up of this committee is mandatory by the Cannabis Act in Quebec and its mandate is to advise the Minister on any question relating to cannabis, in particular to give opinions, to evaluate the application of the measures provided for by the Law.

Methods:

As part of its duties, the Committee has chosen to examine the issue of edible cannabis products in anticipation of their market entry in Quebec. Indeed, edibles have a different risk profile from other cannabis products and allow the industry to offer an attractive image of these products via social media that escape the control and measure in force provided for by the Act.

Results:

Following a non-exhaustive analysis of the American experience, calls to the Center antipoison du Québec and the differentiated appeal of this type of product according to age and gender, the Committee issued five recommendations to the Minister and made public these in order to make the various stakeholders aware of this specific issue in order to act upstream of the possible problems associated with them.

Conclusion:

Quebec is the only Canadian province to have set up, by law, a vigilance committee. The Committee has the possibility to refer emerging issues to the Minister in order to act upstream of public health issues, which gives it a privileged status. However, in order for its recommendations to be applied, it is important to take into account the political reality of the moment and to maintain good communication channels with the various actors involved.

Biography

Dre Julie Loslier, M.D., M. Sc., FRCPC, Director of public health for Montérégie, Full professor at the faculty of medicine at the University of Sherbrooke and president of the Quebec governmental Cannabis Vigilance Committee 2

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Abstract received : October 20, 2022 | Abstract accepted : October 21, 2022 | Abstract published : 03-04-2023

9th Global Public Health, Occupational Safety and Health Policy March 23-24, 2023 | Webinar

Volume : 13

Charactrization Of Bioactive Compounds Isolated From Endophytic Streptomyces Sp. SUK 25 Against Methicillin Resistant Staphylococcus aureus

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The needs for new antibiotics continue to grow due to the widespread of antibiotic-resistant pathogens causing lifethreatening infections. The bacterium methicillin resistant Staphylococcus aureus expresses a widespread virulence factors and antimicrobial resistance determinants that lead to increasing mortality, morbidity, and health care costs. The endophytic Streptomyces species that resides in the living tissues of plants are generally considered a source that has huge potential for the novel bioactive molecules, with medicinal and pharmaceutical properties. This study is aimed to determine the anti-MRSA activity of the bioactive compounds derived from endophytic Streptomyces sp., SUK 25 which was isolated from the root tissues of Zingiber spectabile. The production of secondary metabolites by this strain was optimized through Thornton's broth media. Isolation, purification, and identification of the bioactive compounds were carried out using TLC, column chromatography, HPLC, and FT-IR, HR-LCESIMS and NMR. During primary and secondary screening, SUK 25 showed potential activity against several strains of MRSA ATCC. Bioactivity test was carried out using disk diffusion method for thirteen fractions isolated using column chromatography methods to determine the bioactivity of each fraction against MRSA ATCC 43300. Seven bioactive compounds were isolated and identify. Determination of the gene transcriptional profile of MRSA ATCC 43300 treated with subinbibitory concentration of CAP and cyclo (L-prolyl-L-valine) revealed significant modulation of gene expression with up regulation of 90 genes and down regulation of 131 genes. In conclusion, this study demonstrates that endophytic Streptomyces SUK 25 has the ability to produce several natural compound derivatives with potential bioactivity against MRSA with low cytotoxicity against HepaRG cells.

Biography

Dr. Muhanna is a postdoctoral fellowship at Faculty of Civil Engineering and Built Environment (FKAAB). Universiti Tun Hussein Onn Malaysia. BSc. Medical Microbiology, diploma in Medical Microbiology. MSc. Medical Research at Universiti Sains Malaysia (USM), Penang, Malaysia. PhD in Biomedical science from Faculty of Health Sciences, Universiti Kebangsaan Malaysia (UKM).

Abstract received : November 24, 2022 | Abstract accepted : November 25, 2022 | Abstract published : 03-04-2023

9th Global Public Health, Occupational Safety and Health Policy March 23-24, 2023 | Webinar

Volume : 13

Conceptual Framework for Strengthening Nurse-Initiated Management of ART Training and Implementation in North West Province, South Africa

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Background: The implementation of nurse-initiated management of antiretroviral therapy (NIMART) or HIV management training is a challenge in the primary health care (PHC) setting, after the adoption of task shifting. It is evident from the literature reviewed and the data obtained from the North West (NW) Province in South Africa in the HIV/AIDS/STI & TB report that gaps still exist. There is no conceptual framework that provides guidance and strengthens the implementation of NIMART. Therefore, the researcher identified a need to develop such a conceptual framework. Aim: This study seeks to conceptualize the study findings to develop and describe a conceptual framework that provides guidance and strengthens NIMART training and implementation to improve patient and HIV program outcomes in the NW province. This was achieved through three study phases Method: An explanatory sequential mixed method research strategy (QUAN-qual) was followed. A descriptive and explorative program evaluation design was used and data collected from two sources District Health Information System, Tier.net of n=10 PHC facilities to determine the impact of NIMART on the HIV program, and five FGDs n=28 conducted from NIMART nurses and program managers directly involved in the management of HIV and TB program until data saturation.

Results: The study revealed that there is low ART initiation as compared to the number of clients who tested HIV positive, especially amongst children and ANC pregnant women. There is poor monitoring of patients on ART, evident in the low viral load collection and suppression, fluctuating total patients remaining on ART, high loss to follow up, and deaths related to HIV. Challenges exist and this was confirmed by the qualitative findings, including health care organization, patient, human resource ratios, training and mentoring, and the absence of a conceptual framework that guides NIMART training and implementation. Conclusion: The study findings were conceptualized to develop and describe a framework needed to facilitate and influence NIMART training and implementation in order to improve the HIV program and patient outcomes. Dickoff, James, and Wiedenbach's practice-orientated theory (POT) and Donabedian's Structure, Process, and Outcome (SPO) model provided a starting point in the ultimate development of the framework. The conceptual framework was developed to strengthen NIMART training and implementation in the North West Province and South as there was no such framework in the country. KEYWORDS: nurse-initiated management of antiretroviral therapy training, HIV program, NIMART trained Professional nurse, Antiretroviral therapy, Primary health care .

Biography

Dr. Sheillah Hlamalani Mboweni is currently a senior lecturer and researcher at the University of South Africa at South Africa. She received her Ph.D. degree in 2018 at the North West. She has published various manuscripts in various Journals and presented at international conferences and webinars. She completed her Diploma in Nursing (General nursing, Community, Psychiatry, and Midwifery) in 1997 at Limpopo College of Nursing, South Africa. She worked in various provinces in positions of education, training, and practice then joined the Centers for Disease Control and Prevention (CDC) in South Africa as public health Specialist for HIV prevention and coordinated HIV index testing and recency testing research project.

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Abstract received : December 24, 2022 | Abstract accepted : December 25, 2022 | Abstract published : 03-04-2023

9th Global Public Health, Occupational Safety and Health Policy March 23-24, 2023 | Webinar

Volume : 13

Mapping and associated factors of child death and mothers who suffer from child death in Sub-Saharan Africa

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Child death and mothers who suffer from child death are a public health concern in Sub-Saharan Africa. The location and associated factors of child death and mothers who suffer child death were not identified. To monitor and prioritize effective interventions, it is important to identify hotspots areas and associated factors. Data from nationally representative demographic and health survey and Multiple Indicator Cluster administrated in 42 Sub-Sahara Africa countries, which comprised a total of 398,574 mothers with 1,521,312 children. Spatial heterogeneity conducted hotspot regions identified. A mixed-effect regression model was run, and the adjusted ratio with corresponding 95% confidence intervals was estimated. The prevalence of mothers who suffer child death 27% and 45-49 year of age mother 48%. In Niger, 47% of mothers were suffering child death. Women being without HIV knowledge, stunted, wasted, uneducated, not household head, poor, from rural, and from subtropical significantly increased the odds of the case ($P<0.05$). The spatial analysis can support the design and prioritization of interventions. Multispectral interventions for mothers who suffer from child death are urgently needed, improve maternal health and it will reduce the future risk of cases.

Biography

Bayuh Asmamaw Hailu is an Epidemiologist and Biostatistician at Woll University. He has expertise in evaluation and passion in improving the health and wellbeing. His open and contextual evaluation of geographical and non-geographical models based on responsive constructivists creates new pathways for improving health care. He has ample knowledge of different open sources GIS and other statistical soft wear. He used to link his soft wear ability with health and statistics background and experiences, and he can easily show health problems for planners and decision makers as well as any concerned body.

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Abstract received : January 15, 2022 | Abstract accepted : January 16, 2022 | Abstract published : 03-04-2023

9th Global Public Health, Occupational Safety and Health Policy March 23-24, 2023 | Webinar

Volume : 13

Why Is Oral “Vaccine” for COVID-19 The Best Choice in This Pandemic?

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Introduction: Since the end of 2019, the world begins to fight against the new SARS-CoV-2 infection, that caused until today 305 million infected people and 5,48 million deaths. There are increasing studies in how to prevent this infection using Pfizer, Moderna, Astra-Zeneca vaccines, etc but after months using these kinds of products worldwide, we still facing increasing cases of infections also in people who had received the vaccines and also the necessity of admitting them in the hospital. It was reported by CDC since 1900 until today (January 11th 2022), 14.317 deaths after receiving any kinds of vaccines and from these total, 10.688 deaths were following after these RNA-m of SARS-CoV-2 vaccines (0,0022%) and they are responsible for 74% of global deaths (of the total of deaths after receiving vaccine) . Purpose; the purpose of this study is to show that injecting RNA-m vaccines for COVID-19 is not the only solution to control this pandemic and other forms of oral “vaccines” for COVID-19 can be used in this kind of situation without having so many side effects presented by the actual vaccines applied nowadays. Methods: this study will be based on the type of population that we have presently (that 90% is considered immunocompromised due to energy deficient state, in a research made by the author, caused by the influences of the electromagnetic waves that is affecting the whole world). In this case, we should use highly diluted “vaccines” to produce the result desired and not highly concentrated vaccines that the whole world is using nowadays. These thoughts were based on Arndt-Schultz Law, created in 1888 by two German researchers and they say that the use of highly concentrated medications can harm the vital energy, for this reason, this could be the fact of so many cases of thrombosis, myocardial infarction, strokes, auto-immune diseases or deaths after the COVID-19 vaccines injections applied in this new type of population. This study is based on the theory of Hahnemann (1755-1843), that said that you can treat the patient using the same substance that caused the disease but using it in an infinitesimal mode and for this reason, in Brazil, we are using secretions of patients that have SARS-CoV-2 infections and diluting them in an infinitesimal mode until PCR exam is negative to that sample. This type of oral “vaccine” can be used in any type of person with or without co-morbidities and can prevent or be used in the treatment of patient with acute infection of SARS-CoV-2 infection and it is the product of choice in prevention or treatment of patients with SARS-CoV-2 infection, due to the new pattern of energy presented by the majority of patients nowadays. Results: in our results, patients using these kinds of oral “vaccine” do not have SARS-CoV-2 infection that necessitate to be admitted in the hospital or die due to the use of this medication during this pandemic. When they have this infection using this kind of oral “vaccine”, they have only mild symptoms and only stayed at home without the necessity to be hospitalized.

Biography

Huang Wei Ling, born in Taiwan, raised and graduated in medicine in Brazil, specialist in infectious and parasitic diseases, a General Practitioner and Parenteral and Enteral Medical Nutrition Therapist. Once in charge of the Hospital Infection Control Service of the City of Franca's General Hospital, she was responsible for the control of all prescribed antimicrobial medication and received an award for the best paper presented at the Brazilian Hospital Infection Control Congress in 1998. Since 1997, she works with the approach and treatment of all chronic diseases in a holistic way, with treatment guided through the teachings of Traditional Chinese Medicine and Hippocrates.

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Abstract received : Feb 24, 2022 | Abstract accepted : Feb 25, 2022 | Abstract published : March 3, 2022