2083rd Conference

Medical Sociology & Epidemic Diseases 2018

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September 21-22, 2018 | Dallas, USA

Scientific Tracks & Abstracts

Day 1

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Analysis of hospital surgical treatment of lung cancer

Riddhi Vyas
Rutgers The State University, USA

Lung cancer is a condition of abnormal growth of cells starts in the lung(s), which has the ability to multiply and travel to the entire human body in short period of time. Lung cancer is the second most deadly cancer in the world after prostate cancer in the male and breast cancer in the female. Every year approximately more than a million and a half death would have occurred by lung cancer. In the year of 2017, there are approximately 222,500 new cases and 155,870 death cases are reported in the US. Advanced technology has created a number of treatments and medical options to treat lung cancer but those procedures have intolerable side effects, as a result, the survival rate of the lung cancer has not improved much. The goal of current study is to review the national trends of available procedures for in-hospital treatment of lung cancer. We are using the national inpatient sample(NIS) database from the year 2003 to 2011, which has information about patients hospitalized with a principal diagnosis with the principal procedure. We have extracted data from NIS using principle diagnosis ICD 9 code for lung cancer. We have classified lung cancer procedures into three categories (based on principal diagnosis ICD 9 code) "Surgical","Non-Surgical" and "Others". We found 15,774 lung cancer patients, where admitted to the hospital. The percentage of "Non- Surgical" procedures and "Other" categories remains consistently lower(1.2%), whereas Surgical procedure increased by (6-8%) over a period of time. We have also included other demographic factors like Age, Race, Gender, Length of stay in the hospital, Total charges, Type of admission to the hospital and Payers. We have included these factors in reviewing national trends to see their significant association in the selection of treatment options for lung cancer.

Biography

Riddhi Vyas moved to the United States in the year of 2004. She completed her Masters in Bioinformatics from Stevens Institute of Technology in 2004 and completed Ph.D. in Biomedical informatics at the Rutgers University of New Jersey in the year 2016. She has earned best academic student award during her Ph.D. She also has four years of working experience in the pharmaceutical industries as Clinical and Statistical Data Analyst. She is currently an instructor in the Department of Health Informatics at Rutgers University School of Health Professions (describe what you are teaching). Her research interests are mainly in health outcome research. She has published and reviewed papers in the international journal.

riddhi12@hotmail.com

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Transport and prehospital care prior to arrival in tertiary care emergency department of Eastern Nepal: A cross-sectional study

Sonai Chaudhuri Giri, Malla G, Bhandari R, Poudel M and **Giri S**
BPKIHS, Nepal

Introduction: BP Koirala Institute of Health Science, Dharan provides a tertiary level of care to a population covering the eastern part of Nepal and also to adjoining states of India. The total number of Emergency admission is around 37800. Thus, providing the definitive surgical and medical care to the population of this region. Nepal is unique in its mountainous terrain and the length of time taken by the patients to get medical help is often too long, with added woes of inadequate road linkages which are rough and impassable during most of the year. Transport may not exist or are unreliable and irregular.

Materials and Methods: This is a prospective observational study done on 2211 patients by convenient sampling arriving in the emergency ward of BP Koirala Institute of health science over a period of one month. A pre-tested validated questionnaire was distributed among the patient or their relatives and their responses were collected. The questionnaire consisted of their demographic profile, their preferred mode of transport, reasons for choosing the same, equipment and presence of trained person present in them. It is also explored their approximate cost, distance and time taken by the ambulance to reach the hospital. These data were analyzed in SPSS software version 11.2.

Result: Out of the 2211 patients presented in emergency ward 43.2% (955) arrived ambulance. Other means of transport used by them were 2.2% (Taxi), 4.3% (Auto rickshaw) and 49.3% (Private vehicles). Patients with triage score of 2 arriving in the ambulance were 27.6 % only. The median time taken by ambulance is 2 hours and the Interquartile range of 1 to 3hours. The median distance covered is 55km with an Interquartile range of 38 to80 km. The median cost born by the patient was 3500 Nepalese rupees with an Interquartile range of 2000 to 6000 Nepalese rupee. Their reason for not choosing ambulance for transport was 26% (Can't afford), 13.8% (Easily available), 14.7% (Private vehicle at home) and 2.4% (Near to hospital). Only 29.4 % of all the patients arrived in the emergency have received pre hospital care.

Conclusion: Our study concluded the preference of private vehicles by patients arriving in the emergency ward of this hospital having high acuity triage score (ATS 2). Although patients using the ambulance as one of their means of transport were expensive with not much of the required facility in them or any trained paramedics in them. Thus the idea of using an ambulance for patient's transport needs further education among our Nepalese population.

Biography

Sonai Chaudhuri Giri, has been working as a full time consultant in the Department of General Practice and Emergency Medicine in BP Koirala Institute of Health Sciences since 2013. She had completed her medical education in the same institute. She is motivated to develop Emergency Medicine in Eastern Nepal and further enrich herself with recent advances in this field. She has been teaching undergraduate medical students and post graduate residents in this institute.

sonaichaudhuri10@gmail.com

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International accreditation, linguistic proximity and trade in health services

Chung-Ping A Loh and **Russell Triplett**
University of North Florida, USA

Trade in health services grew rapidly after the inception of General Agreement on Trade in Services (GATS) in 1995. However, still little is known about the determinants of health service trade from an empirical standpoint. This study attempts to better understand whether trade in health services has been hampered by uncertainty in care quality and language barrier. Specifically, we employed an augmented gravity model on data from UN Service Trade Statistics, World Development Indicators, CEPII database, OECD Health Statistics and other sources to examine whether international accreditation (as a way to signal care quality) and linguistic proximity affect two modes of trade in health services. We found that international accreditation and linguistic have a small but significant marginal effect on the cross-border delivery of health services. However, these factors seem to have little or no effect on the consumption of health services abroad.

Biography

Chung-Ping (Albert) Loh is a Professor in Economics in the Coggin College of Business. He holds a Ph.D. in Economics from the University of North Carolina at Chapel Hill. His research interests include the economic modeling of health behaviors, health care utilization, cost-benefit analysis, program evaluation, medical tourism and other applied microeconomics topics. Trade in health services is one of his recent research area.

cloh@unf.edu

Notes:

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Trends of antimicrobial resistance in gram-negative isolates from an ICU over 3 year

Sachin H Jain
Hinduja Healthcare Hospital, India

To study the changing patterns of antimicrobial resistance in gram-negative *Bacilli esp. Escherichia coli, Klebsiella pneumoniae, Pseudomonas aeruginosa and Acinetobacter* species from a 37 bedded ICU of a private hospital. The antibiotic susceptibilities were determined by using the Vitek-2 system. A total of 13410 clinical samples were screened over a period of 3 years, among which 16.77 percent (2250 isolates) were culture positive. In recent years there has been an increased incidence of extended-spectrum β- lactamase (ESBL). The ESBL producing *Escherichia coli* and *Klebsiella pneumonia* has shown an increase in resistance to the tune of 80-90% in three years. The prevalence of resistant strains of *Acinetobacter* species and *Pseudomonas aerugnosa* has shown an increase in Imipenem and Meropenem resistance at the rate of 75-80%. Antibiotic resistance has shown an increase in gram-negative pathogens and thereby has created a significant problem in choosing the right antibiotic for empirical usage. The rise in resistance has left little choice for the clinicians to select antibiotics. *Klebsiella pneumonia* ESBL and *Escherichia coli* ESBL have become dominant organisms in ICU. Piperacillin + Tazobactam, Imipenem and Amikacin have decreased sensitivity against Enterobacteriaceae. Old antibiotic compounds such as Polymyxins, Fosfomycin and Aminoglycosides are re-emerging as valuable alternatives for the treatment of ESBL producing bacteria. Cases of MDR. *Escherichia coli* and *Klebsiella pneumonia* have increased in recent years as the most frequent cause of hospital-acquired infections.

Biography

Sachin H Jain has completed his Masters in Microbiology at 25 years from Seth G.S. Medical College and KEM Hospital, Mumbai India. He worked in Sydney, Australia before moving back to Mumbai and worked as Head Microbiologist and Infection Control Officer at Saifee Hospital, Mumbai for 9.5 years and now as Head Microbiology and Infection Control Officer at Reputed Hinduja Hospital, Mumbai India. He has delivered many lectures in India and China, Sydney and Vitebsk.

drjainsachin@gmail.com

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Assessment of cardiovascular risk factors among fresh undergraduate students of Obafemi Awolowo University, Ile-Ife

Okunola Oluseye A[1], **Irinoye Adedayo** and **Ogunlade Oluwadare**[2]
[1]Obafemi Awolowo University Health Center, Nigeria
[2]Obafemi Awolowo University, Nigeria

Introduction: The study assessed cardiovascular risk factors among fresh undergraduate students of Obafemi Awolowo University, Ile-Ife, State. The objectives of the study are to determine the prevalence of these risk factors among the respondents, to identify risk factors that influence their cardiovascular status and to assess socio-demographic determinants of high cardiovascular diseases among the respondents. A cross-sectional descriptive study was employed using a structured questionnaire, a collection of fasting blood for lipid profiles analysis and blood sugar. Their height and weight were measured using calibrated stadiometer and standardized weighing scale. Also, blood pressures were measured with the aid of stethoscope and mercury sphygmomanometer. Three hundred and ninety-three respondents were selected using a simple random technique sampling. The data were analyzed using SPSS software version 12.

Result: The study showed a prevalence of 9.9% for overweight with female students having much predominance. From the study it was revealed that the prevalence of consumption of fast foods was 66.7 % among the fresh undergraduate students culminating from rigorous academic activities which prevent them from time to prepare their diet of choice, hence predisposing them to fast food consumption. A prevalence rate of 1% was adduced to smoking among the freshmen while alcohol consumption prevalence was 6%. Engagement in physical activity was 81.7% with more than 66.6% engaging in one form of activity at least six times in a week. Also, elevation of systolic blood pressure was found among 6.8% while the elevation of diastolic blood pressure was found among 5.2%. No case of diabetes mellitus among the participants. In the study, there was a low risk for CVD considering the obesity among the freshmen which constitutes only 0.5%.

Conclusion: Fresh male undergraduates were at risk of CVD than their female counterparts concerning the LDL, smoking habit, blood pressure and alcohol consumption prevalence. The study recommended the establishment of health enlightenment campaigns in higher institutions to educate first-year students on strategies for disease prevention and to ensure early detection of risk factors through improved health screening at the university health center.

Biography

Okunola Oluseye is a public health physician and a medical scholar working with the Medical and Health Services of Obafemi Awolowo University, Ile-Ife, Nigeria. He has MPH degree and MSc in medical sociology. He is a PhD student in medical sociology and a CARTA fellow in Obafemi Awolowo University, Nigeria.

spancho2001@yahoo.com

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Dietary habit and nutritional status of ethnic children in Bangladesh

Md Monoarul Haque
Bangladesh University of Professionals, Bangladesh

Nutritional status is a sensitive indicator of community health and nutrition among preschool children, especially the prevalence of undernutrition that affects all dimensions of human development and leads to growth faltering in early life. This study is an attempt to assess the nutritional status and food intake pattern of children of preschool Chakma tribe. It was a cross-sectional community-based study. The subjects were selected purposively. This study was conducted at Sadar Thana of Rangamati. Rangamati is located in the Chittagong Division. Anthropometric data on height and weight of the study subjects were collected by standard techniques. Nutritional status was measured using Z score according to WHO classification. Statistical analyses were performed by appropriate univariate and multivariate techniques using SPSS windows 11.5. Moderate to severe underweight was 23.8% and 76.2% study subjects had normal weight for their age. Moderate to severely stunted children were only 25.6% and 74.4% children were normal and moderate to severe wasting were 14.7% whereas normal child was 85.3%. The significant association had been found between child nutritional status and monthly family income, maternal education and occupation of father & mother. Age, sex of children and incomes of the family, education of mother and occupation of the father were significantly associated with WAZ and HAZ of the study subjects. Majority of study subjects took local small fish and some traditional tribal food like bamboo root, jhijhi insects and pork were very much popular food among tribal children. Energy, carbohydrate & fat intake was significantly associated with HAZ, WAZ, BAZ (BMI for age Z-score) and MUACZ. Most of the study subjects took local small fish and some traditional tribal food. A significant association was also found between child nutritional status and dietary intake of energy, carbohydrate and fat.

Biography

Md Monoarul Haque was born in Dhaka, Bangladesh and passed MPhil in Public Health under Faculty of Preventive and Social Medicine, Bangabandhu Sheikh Mujib Medical University collaboration with the University of Oslo. Presently he is doing his PhD under Faculty of Medical Studies in Bangladesh University of Professionals (BUP). He got NOMA Grant from the University of Oslo, Norway for research. Besides he got one-year teaching & research fellowship Funded by USAID Developing Next Generation of Public Health Experts Project. Recently he has got Prime Minister Research Grant. He has a number of publications in International Open Access peer-reviewed index journals.

monoarmunna@yahoo.com

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Day 2

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Rickettsial diseases: An overview

Sachin H Jain
Hinduja Healthcare Hospital, India

Rickettsial infections are an important cause of undifferentiated febrile illness in tropics. Rickettsiae are a rather diverse collection of organisms with several variations; this prohibits their description as a single homogenous group. Rickettsia is maintained in nature through a cycle involving reservoir in mammals and arthropod vectors. The public health impact of these on lives or productivity lost is largely unmeasured but suspected to be quiet high worldwide. The rickettsial diseases were believed to have disappeared from India are reemerging and recently their presence has been documented in at least 11 states of India. Many cases of rickettsial diseases go unnoticed due to the lack of diagnostic tools. Greater clinical awareness, a higher index of suspicion and better use of available diagnostic tools will increase the frequency with which rickettsial diseases are diagnosed. Specified IgM ELISA or DNA PCR are preferred tests. New or emerging rickettsial diseases, tickborne lymphadenopathy (TIBOLA) and Dermacentor have borne necrosis eschar lymphadenopathy (DEBONEL) related to *Rickettsia slovaca* infection have been described. Rickettsial diseases are one of the many causes of PUO cases (Pyrexia of Unknown origin). Even if advanced diagnostic facilities are not available, simple and easy to perform Weil Felix test can aid in the diagnosis of rickettsial infections.

Biography

Sachin H Jain has completed his Masters in Microbiology at age 25 years from Seth GS Medical College and KEM Hospital, Mumbai India. He worked in Sydney, Australia before moving back to Mumbai and worked as Head Microbiologist and Infection Control Officer at Saifee Hospital, Mumbai for 9.5 years and now Currently as Head Microbiology and Infection Control Officer at Reputed Hinduja Healthcare Surgical Hospital, Mumbai India. He has delivered many lectures in India and China, Sydney and Vitebsk.

drjainsachin@gmail.com

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The Vietnam-Australia Primary Health Care Project for Women and Children (VAPHC)

James Cameron Mielke
VAPHC, Thailand

The VAPHC was a six-year primary health care project implemented through the Government of Viet Nam (GOV) Ministry of Health (MOH) and four provincial Departments of Health (DOH); two in the south and two in the central region. Planning started in 1993 with implementation from March 1998 to September 2003. The overall budget was A$ 22.6 million. The Project provided support to health services delivery for women and children through improved facilities and capacity for essential obstetric, gynecological and pediatric care, strengthening of systems for skills-based training, supervision, monitoring and referral and to the users of the public health system through health promotion and community development activities. VAPHC aligned with GOV health policy objectives and priorities by focusing on primary care and community health improvement, safe motherhood, reducing infant and child mortality and improving preventive measures and anticipated many of the GOV strategies to meet Millennium Development Goals (MDGs) and health development strategies. The project's aims and operating modalities also matched the AusAID health development framework, for example: strengthening health system fundamentals; addressing priority health needs of women and children and supporting country-specific priorities to address high-burden health problems. Project management units within the provincial DOHs managed implementation, guided and supported by the Australian Advisory Team. An ex-post evaluation (2007) found a sustained impact from improving trends in provincial and individual health center MCH data. The generally positive impact indicators and outcomes cannot be totally attributed to VAPHC (although key informant interviews in many districts and communes referred specifically to the role of the Project in improved processes, outcomes and results). Rather, VAPHC contributed to overall health improvements in Viet Nam achieved through GOV and international partner activities. VAPHC initiatives have been incorporated into other GOV and donor interventions such as MOH projects supported by the Netherlands and the Asian Development Bank.

Biography

James Cameron Mielke, over the past 35 years, he has a doctorate in Public Health, has had the distinct privilege of living and working in some of the poorest, most remote and under-served countries (23 so far) in the Asia-Pacific region, where he has assisted governments, international aid agencies and communities to strengthen local and national health systems for improved community-based primary health care, women and child health and communicable diseases control, including HIV/AIDS prevention, care and support. In recent years, a big part of his mission has been to mentor students, members of voluntary organizations and other interested groups on international travel, study and overseas volunteer and professional opportunities. He also enjoys teaching yoga and mindfulness meditation in schools, YMCA conference and family retreat centers and health and fitness centers in the USA and abroad.

jim_mielke@hotmail.com

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Whole genome analysis of *Mycobacterium tuberculosis* DR, MDR, XDR and XXDR isolates to find signature mutation pattern in drug resistance

Vidya Niranjan and **Akshatha Prasanna**
RV College of Engineering, India

The emergence of resistance to various antibiotics has become a major threat for combating infectious diseases resulting in persistent infection and increased mortality. Whole genome sequencing is a promising tool for finding mutations causing resistance and to distinguish the resistant strains. *Mycobacterium tuberculosis*, a global threat and the recent breakout in Multi-drug resistance strain (MDR-TB) and Extensively Drug resistance (XDR-TB) has challenged researchers in the diagnosis and to provide effective treatment. The study focuses on the analysis of whole genome high-throughput data of *Mycobacterium tuberculosis* over a time period of 1999-2017 including drug-resistant strain, multi-drug resistant strain and the extensively drug-resistant strain from different geographical locations collected from NCBI-SRA. An effective pipeline is developed to analyze and interpret mutations causing antibiotic resistance using bioinformatics and NGS approach. The analysis provides discovery of genetic changes, drug-resistant genes, mutated amino acid and its position in the chromosome. We have characterized 10 DR-TB, 30 MDR-TB, 10 XDR-TB, 5 Pre-XDR-TB and 15 XXDR-TB based on the mutation pattern of resistance. Results provide a determination of anti-tuberculosis drug resistance and identification of resistance strain based on the identified SNP biomarkers.

Biography

Vidya Niranjan received her BSc degree in Chemistry and MSc degree in Biophysics from the University of Madras, Chennai. She obtained her PhD in bioinformatics from Kuvempu University, Shivamogga in the year 2009. She was associated with Indian Institute of Science (IISC), Bengaluru, India from 2010-2011 where she received her Post-Doctoral Fellowship for her work in Computational Biology. She has 10 years of industry experience and 15 years of core teaching experience. She is currently employed at R.V College of Engineering, Bengaluru, India as a Professor and Associate Dean in the Department of Biotechnology.

vidya.n@rvce.edu.in

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Public Health Data and Analytics EcoSystem from intervention to prevention of epidemics: A journey to future of Public Health

Arun Sundararaman
Accenture, India

The functioning of Public Health Data Repositories is poised for major transformation, emerging from post-event data collection to pre-event insight generation and dissemination i.e. from post-epidemic cure to prediction and prevention of epidemics. Public Health domain is set to scale up data capabilities, analytics capabilities, technology capabilities, process capabilities and functional capabilities to be ready for such transformation. On one side, this transformation necessitates the need for shift to the NEW world such as "from traditional data repositories to future state Data & Analytics Platforms" that encompass not merely structured data, but, vast streams and variety of unstructured data (e.g. clinical notes, physician notes, patient notes, images, patient experience pulses through audio and video forms of data). And on the other side, data infrastructure for epidemics management requires extensive collaboration between Hospitals, Pharmacies, citizen services departments (not just healthcare), Health Data Exchanges and connected health eco-systems. These complexities necessitate next generation big data technologies led Healthcare Data Management practices to revolutionize Healthcare Information Management in addressing today's key challenge that healthcare information is scattered in 4 different islands of data sets i.e. Health Administration, Clinical/Hospital in EHRs, individual data in PHRs and environmental data in Public domain. This paper covers specific recommendations around transformation to big data platforms for epidemic data sets, what to leverage from existing data sets to gaps and data opportunities to tap and proposes an innovative Public Health Epidemics Big Data Infrastructure Maturity Model to chart the course of this transformation.

Biography

Arun Sundararaman, in his current role, Heads Data and Analytics Technology Practice for Health and Public Service at Accenture, India. Having secured his PhD in Information Quality Strategy from BITS, Pilani, India, he has been specializing in providing Data Management, Big Data and Analytics Solutions to leading Healthcare Payers/Providers and Public Health organizations. He has helped in Indian Government to architect, design and build large scale public health data repository enabling the Government in use of data for evidence based policy decisions in critical healthcare functions e.g. IMR/MMR, ambulance etc. A recipient of the prestigious Ballou-Pazer Information Quality Dissertation Award from MIT-IQ Program for contribution to Information Quality research, he has many International publications to his credit and serves on Editorial and Review Board of several international technology publications.

arun.sundararaman@accenture.com

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Statistical modeling maternal-infant HIV transmission with variable hazard rate

Subhash Shende[1], **Mohan Kale**[2] and **Nikhil Gupte**[3]
[1]Fergusson College, India
[2]Savitribai Phule Pune University, India
[3]B.J. Medical College and Sassoon General Hospital, India

An important public health issue is to determine the risk of transmission of perinatal HIV and when it occurs. Mother to infant transmission of HIV can occur in utero, intrapartum or postpartum. Postnatal HIV transmission through contaminated breast milk is of particular concern. Anti-retroviral drugs (ARVs) are highly effective for the prevention of mother to child HIV transmission (PMTCT). Without ARV prophylaxis, the risk of transmission by eighteen months of age ranges from 25-40\% in breastfeeding populations. A knowledge of the timing of perinatal transmission of Human Immunodeficiency Virus (HIV) would be valuable for the determination and evaluation of preventive treatments. Effective strategies are urgently needed to reduce mother to infant perinatal HIV transmission. Perinatal transmission refers to mother to infant HIV transmission occurring before or at the time of the birth. It results from fetal exposure to the maternal fluids or infected maternal secretions. The present article proposes the statistical models that simultaneously estimates the risks of perinatal transmission together with the sensitivity of the screening tests for HIV infection with variable hazard rates. The article aims at exponential, geometric distributions as lag time distributions as the sensitivity of the screening tests with variable hazard rates. The methods are illustrated with the data from a randomized control study, conducted in South Africa.

Biography

Subhash Shende has completed his MSc in Statistics at the age of 23 years from Pune University, India. He is head of the Department of Statistics, Fergusson College, Pune, India. He has authored 3 books in Statistics.

Subhashhsende@gmail.com

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Food practice and anthropometry of senior citizen dwelling in old home

Mohammad Abu Naser
Bangladesh University of Professionals, Bangladesh

Aging is a normal phenomenon in life. Geriatric population is increasing in every corner of the world due to an increase in life expectancy and it is applicable for Bangladesh also. Research on older people particularly food habit as well as anthropometry is scarce in Bangladesh though it is a demand of time now. This study was conducted to assess food practice and anthropometry of senior citizen dwelling in an old home in Bangladesh. This was a cross-sectional analytic study. The study was conducted among 200 senior citizens attending old home. Anthropometry was determined by WHO cut off the value of BMI for the Asian population. Food practice was calculated by food frequency questionnaire. Descriptive as well as inferential statistics were used to show the result. The average age of respondents was 68.29±6.18 years. Underweight, normal and overweight were 37%, 56% and 7% respectively. Most respondents took rice 2-3times/day. Meat and egg usually took weekly. Vegetables and soybean were taken randomly. Arthritis, diabetes and hypertension, anxiety as well as depression were common. Education has a significant role in the area of anthropometry. Underweight was seen more among lower educated respondents and it was strongly statistically significant ($p<0.05$). Nutritional status of aged people in this study was not satisfactory.

Biography

Mohammad Abu Naser was born in Dhaka, Bangladesh and passed Master of Public Health under State University Bangladesh. Presently he is doing his PhD under Faculty of Medical Studies in Bangladesh University of Professionals (BUP). He has number of publications in International Open Access peer reviewed index journals.

abunaser1973@gmail.com

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Additional (4th) option for malaria elimination activities

Dessalegn Temesgen Leye
Addis Ababa Science & Technology University, Ethiopia

Zika, Ebola, Bird Flu, HIV, etc. are today's murderers. However, malaria is the ancient, current's and futures' slaughterer. The main measures that are in action to minimize malaria's distractions can be grouped into 3 options: prompting diagnoses and treatment with anti-malaria drugs; eliminating the vector by different measures and prophylaxis-vaccination. By such measures, the burden of malaria infection decreases, but couldn't eradicate. Instead, may appear some genetically modified Plasmodium and even the mosquito itself! For postulating our new idea on minimizing such dangerous tendencies, since June 2016, through social media and seminar, we deal with stakeholders on the following: if Anopheles couldn't suck infected blood during its lifespan (maximum a month), it will die without transmitting the disease to a healthy person. Hence, temporary (for ≤100 days) dislocate the patient from the area, where the mosquito population is high, not only more effective than using only bed nets or killing the Anopheles, but also gives extra dozens of advantages. A quarter of them:

- Controllable treatment;
- Minimize plasmodium's adaptation (modification) inside its host!;
- Considering the right of non-infected people: "they have also a right not to be infected!"
- During dislocation, skilling-training the patient for his futurity.

Thus along with the 3 options, we should try the mentioned new option. During the presentation, except for the detailed plan of realizing our option, we can show:

- lack of sufficient awareness not only in developing countries but also of developed
- revealing the drawbacks of the above mentioned 3 options that the world is using to eradicate malaria
- propose 2-3 chemical agents, which may distract the life cycle of the vector

Biography

Dessalegn has completed his PhD at the age of 27 years from Institute of Biochemistry (Moscow, Russia). Now he is an Assistant Professor at Addis Ababa Science & Technology University (Addis Ababa, Ethiopia). He has published more than 7 papers in reputed journals.

amaranthusl@yahoo.com

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Awareness on hospital delivery and risk of pregnancy among women attending in a selected district hospital

Pradip Kumar Saha
University of Dhaka, Bangladesh

This cross-sectional study was conducted among 100 pregnant women in Manikgonj district hospital, Bangladesh. Aim of this study was to assess awareness on hospital delivery and risk of pregnancy. Nonprobability convenient sampling technique was used to identify the respondents. One third of the study women did not know any health risks of a pregnant mother. Forty six percent of the respondents mentioned prolonged labor as a major health risk followed by risk to life of mother (26%), eclampsia (19%), obstructed labor (13%) and risk to life of baby (8%). About 45% of the respondents went public hospitals and 37% health and family welfare centers for pregnancy care, 46% qualified doctors and 9% of the respondents mentioned abut NGO clinic or hospital. One fourth of the respondents said they heard from qualified service providers and 28% mentioned about relatives. Ninety eight percent of the women thought women should go for ANC and 54% think it should be in case of complications. Only 17% said women should go at one to three months of pregnancy duration. Among them 60% visited two or three times. Sixty six percent of the respondents said they visited when they were less than six months of pregnant. Those who did not take ANC they mentioned not perceived as necessary (16.7%), too far (33%), religious bindings (16.7%) and don't know about the service (33.3%). Respondents were asked from whom they took the ANC. Sixty percent of the respondents sought treatment from Family Welfare Visitor (FWV) and 28% from a qualified doctor. A wider study should be undertaken to generalize the findings. Zika, Ebola, Bird Flu, HIV, etc. are today's murderers. However, malaria is the ancient, current's and futures' slaughterer. The main measures that are in action to minimize malaria's distractions can be grouped into 3 options: prompting diagnoses and treatment with anti-malaria drugs; eliminating the vector by different measures and prophylaxis-vaccination. By such measures, the burden of malaria infection decreases, but couldn't eradicate. Instead, may appear some genetically modified Plasmodium and even the mosquito itself! For postulating our new idea on minimizing such dangerous tendencies, since June 2016, through social media and seminar, we deal with stakeholders on the following: if Anopheles couldn't suck infected blood during its lifespan (maximum a month), it will die without transmitting the disease to a healthy person. Hence, temporary (for ≤100 days) dislocate the patient from the area, where the mosquito population is high, not only more effective than using only bed nets or killing the Anopheles, but also gives extra dozens of advantages. A quarter of them:

Biography

Pradip Kumar Saha is working as Consultant Physiotherapist in Amola Healthcare and Research. He is also doing Masters of Disaster Management in University of Dhaka. He has number of publications in International Open Access peer reviewed index journals.

drpradip_kumar@yahoo.com

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