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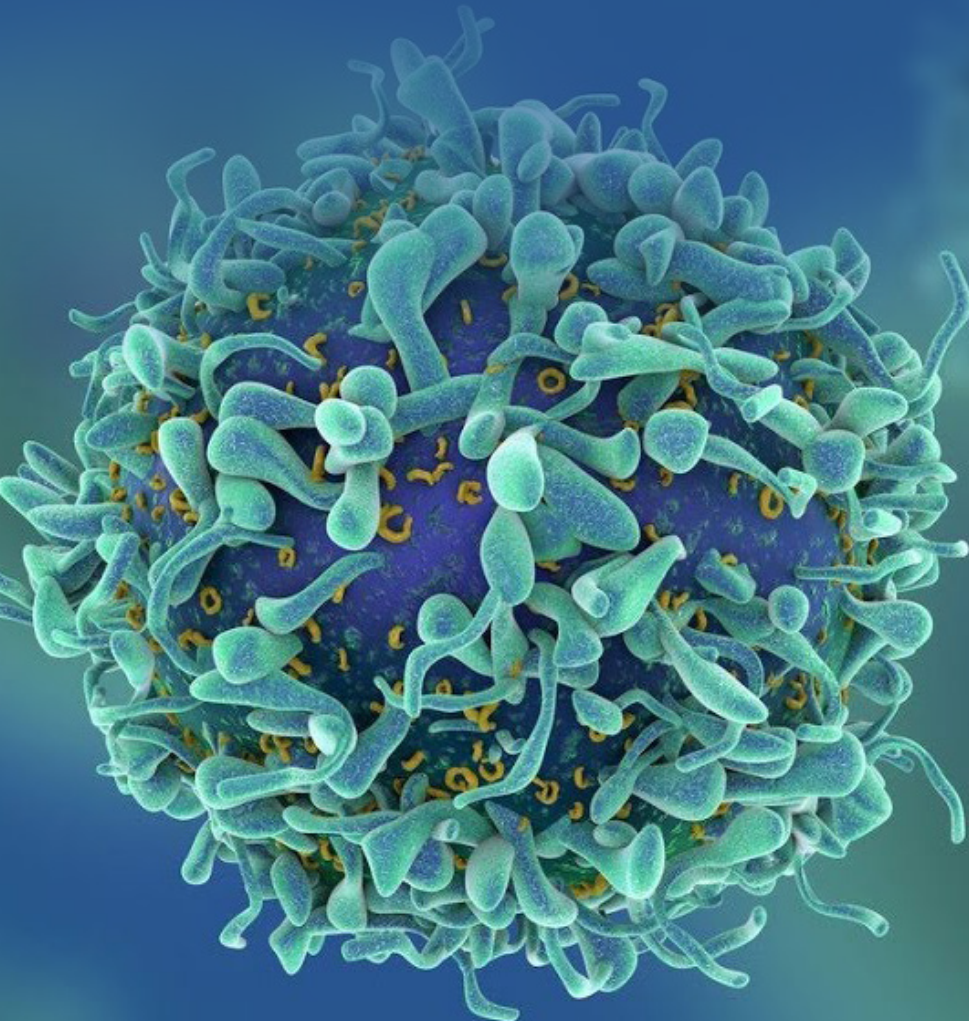
Joint Meeting on
Annual Conference on

**BACTERIAL, VIRAL & INFECTIOUS
DISEASES**

&

**NEGLECTED TROPICAL DISEASES
CONGRESS: THE FUTURE CHALLENGES**

December 05-06, 2018 Dubai, UAE



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Keynote Forum (Day 1)

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Robert O Young

PH Miracle Centre, USA

The dismantling of the viral theory

There is now over 100 years of documented history and research on the Polio virus and whether or not its treatment by inoculation has been successful in eradicating Polio. I am suggesting in this article and in my lecture that there are significant findings based on historical and past and current research, including my own that the viral theory of polio and possibly other modern-day diseases, such as post-polio syndrome, polio vaccine-induced paralysis, legionnaires, CNS disease, cancer, HIV/AIDS and now Zika may be caused by acidic chemical poisoning from DDT (dichloro-diphenyl-trichloroethane) and other related DDT pesticides, acidic vaccinations, and other factors including lifestyle and dietary factors rather than from a lone infectious virus. I will present ten historical graphs outlining the history of Polio, the production of DDT, BHC, Lead, Arsenic, Polio vaccinations and the author's theory that chemical poisoning, vaccination, and lifestyle and dietary choices are a more likely cause for the symptoms of Polio, neurological diseases, Cancer, HIV/AIDS and now Zika.

Biography

In the 80's, following his schooling at the University of Utah, Dr. Young was trained in medical microbiology by Dr. Robert Bradford at the Bradford Research Institute in California. In 1991 through 1993, Dr. Young received a BSc and MSc in nutrition from the American College in Birmingham, Alabama. In 1995, he received his D.Sc. with emphasis in chemistry and biology. In 1997, Dr. Young received a Ph.D. in nutrition from Clayton College of Natural Health and later received an additional doctorate degree in naturopathy (ND) from Clayton College of Natural Health, (1999). He is currently the CEO and director of PH Miracle centre, U.S.A. Dr. Young's research has been published in several reputed journals. He is also the author of over 75 books and 3000 articles translated in 29 languages.

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Crystal M James

Tuskegee University, USA

Defining health security: Neglected diseases in rural Alabama

The development of the concept of health security is traced to the World Health Organization's (WHO) 1946 preamble to its constitution and WHO's current definition of global health security and as a starting place for defining health security in the United States. It is argued that in ratifying the constitution the initial twenty counties accepted the intent and meaning of terms therein. The United States as one of the twenty initial ratifying nations and as a world leader in the detection and control of diseases has provided leadership and guidance to many lesser developed countries on how to address the environmental conditions and infectious agents that have marked a decrease in many illnesses that were prevalent in 1946. The United States Constitution has been interpreted to give the right to regulate for the general welfare of the people to the individual states in which citizens reside. Therefore, while there are many national agencies that have health policy authority the primary responsibility for the health status of individuals is determined by the state in which they reside.

Highlighted are three ways that diseases are neglected and allowed to re-emerge in rural and other marginalized populations in the State of Alabama: 1) lack of surveillance; 2) lack of adequate environmental policies; 3) inadequate housing and other socio-economic indicators.

Methods: Data from the Centers for Disease Control & Prevention, United State Census Bureau American Community Survey 2011-2015, and the United States Department of Labor, Bureau of Labor Statistics as compiled in the Community Commons database were used to develop a community health assessment for three counties in rural Alabama (Macon, Lowndes, and Tallapoosa Counties). Review of local and state policies regarding surveillance, sanitation, and environmental health were assessed for impact on the health status of the community as demonstrated in the community health assessment.

Results: The health indicators reviewed demonstrated that individuals living in the rural communities selected suffer from many health disparities and have adverse health effects from infections that are deemed to be endemic in lesser developed countries and not found in the United States.

Discussion & Conclusions: The local and state policies regarding surveillance, sanitation, and environmental health are not adequately enforced to provide the necessary data to determine prevalence for some illnesses and environmental contamination. Data gaps, inadequate housing and enforcement delays are issues that many marginalized populations in Alabama and other rural communities confront that have led to health disparities and inhibit a culture of health for these Americans.

Biography

James received her Bachelor of Science degree from Clark Atlanta University, her Master of Public Health from Rollin's School of Public Health at Emory University, her Juris Doctorate from University of Houston, and her license to practice law from the State of Georgia, all by the age of twenty-six. she served as the Program Manager for the Public Health Sciences Institute at Morehouse College. James has also worked with the Council of State and Territorial Epidemiologists National Office as Program Director for Infectious Diseases and Environmental Health programs. she also founded Chrysalis International Consulting, LLC a consulting firm. James has over twenty years of public health experience and extensive background in program planning and evaluation that she utilizes to enhance her new role as Department Head and Associate Professor in the Department of Graduate Public Health in the College of Veterinary Medicine at Tuskegee University.

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Stef Stienstra

Dutch Armed Forces, Netherlands

Drug delivery by tattooing to treat cutaneous leishmaniasis

Background: Leishmaniasis is a vector-borne disease that is caused by obligate intra-macrophage protozoa of the *Leishmania* species. Leishmaniasis can cause different clinical syndromes, including Cutaneous Leishmaniasis (CL), in which the patient generally presents with one or several ulcer(s) or nodule(s) on the skin, resulting from the infection of phagocytic cells located in the dermis. It often results into severe scar tissue in the skin. Most of the twelve million people infected with leishmania worldwide are CL cases, a 1.5 million new cases occur annually.

Objective: WHO has a program to develop new treatments for CL. This study establishes a proof-of-concept that a tattoo device can target intra-dermal drug delivery against CL.

Methods: The selected drug is Oleylphosphocholine (OIPC) formulated as liposomes, particles known to be prone to macrophage ingestion. First is shown that treatment of cultured leishmania-infected macrophages with OIPC-liposomes results in a direct dose-dependent killing of intracellular parasites. Based on this, *in vivo* efficacy is demonstrated using a 10 day tattooing-mediated treatment in mice infected with *L. major* and *L. mexicana*. In both models this regimen results in rapid clinical recovery with complete regression of skin lesions by day 28. Parasite counts and histopathology examination confirm high treatment efficacy at the parasitic level. Low amount of drug required for tattooing combined with fast clinical recovery may have a positive impact on CL patient management.

Results & Conclusion: This first example of tattoo-mediated drug delivery could open to new therapeutic interventions in the treatment of skin diseases. This study demonstrates that the use of a tattoo instrument for drug delivery is possible in the treatment of cutaneous leishmaniasis and that this method can successfully eliminate intracellular parasites at the site of infection. After showing that the selected drug oleylphosphocholine (OIPC) formulated as liposomes could efficiently reach intracellular parasites when in contact with infected macrophages, the activity of the drug was compared *in vivo* in mouse models of old (*L. major*) and new world (*L. mexicana*) leishmaniasis. Three routes of administrations of the same drug formulation were investigated: Systemic (IP) administration, topical administration as a drop and administration via the tattoo instrument. Evaluation parameters included clinical (lesion sizes) and parasitological parameters (burdens) using quantitative and qualitative methods. In all experiments, the tattooing delivery procedure was the most efficacious at both the clinical and parasitological levels.

Biography

Strategic and creative consultant in biomedical science, with a parallel career in the Dutch Civil-Military Interaction Command in which he has responsibility for the counter measures in CBRNe threats and (medical) consequence management both in a military and a civilian (terrorism) setting. He was the director of the 2014 & 2016 World Congress of CBRNe Science & Consequence Management in Tbilisi, Georgia. He works internationally as consultant or scientific supervisory board member for several medical and biotech companies, merely involved in biodefense, clinical diagnostics and therapies. He is also visiting professor for Punjab University in Pakistan and Rhein-Waal University in Germany and visiting professor at the University of Rome Tor Vergata. He has finished both his studies in Medicine and in Biochemistry at the University of Groningen in The Netherlands and has extensive practical experience in cell biology, immuno-haematology, biodefense and transfusion medicine. His natural business acumen and negotiation competence helps to initiate new successful businesses, often created out of unexpected combinations of technologies. His thorough understanding of abstract science combined with excellent skills in the communication of scientific matters to non-specialists, helps him with strategic consulting at top level management.

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Galina Migalko

Universal Medical Imaging Group, USA

The importance of interstitial fluid evaluation in relationship to any health condition

Due to the many ineffective and incomplete diagnostic and treatment results of conventional medical protocols (e.g. Comprehensive Blood and Chemistry tests, mammograms, antibiotics, antivirals, chemotherapy and radiation), more efficient alternative methods are needed. The potential of Non-invasive Medical Diagnostics (NMD) coupled with an Alkaline Lifestyle and Diet (ALD) as a legitimate alternative to radioactive diagnostic and chemical treatments are examined. While largely ignored in conventional Medicine, the pH and electrolytes of the interstitial fluids of the Interstitium is suggested as an important part in identifying any viral, bacterial, fungal and/or cancerous condition. It is further suggested that all of these conditions may be the result of an over-acidic chemistry of the interstitial fluids of the body that can be prevented or reversed with an alkalizing lifestyle and diet (ALT). Non-invasive Blood Testing (NBT) and Full Body Bio-Electro Interstitial Fluid Scan (FBBIES) are presented as a noninvasive and non-radioactive diagnostic tests to examine the body fluids pH, chemistry, metabolic data and functionality of the organs and organ systems in the presence of any acidic disease causing condition. In addition, non-invasive Full-Body Thermography (FBT) and Full-Body Ultrasound (FBU) combined with the interstitial fluid testing (FBBIES) are presented as noninvasive methods to examine the physiology, the anatomy and the functionality of the organs, organ systems, glands and tissues in relationship to acute or chronic health conditions in the prevention, diagnosis, prognosis, treatment and monitoring the progress of any therapy progress. Finally, qualitative and quantitative non-invasive Blood Evaluation (NBE) is used as an important part of determining hematological data to compare with the interstitial fluid analysis (FBBIES). In contrast, to the potential chemical acidosis caused by conventional medical treatments, ALT methods such as Intravenous Nutritional Infusion (INI), Rectal Nutritional Infusion (RNI), alkaline foods and drinks, alkaline nutritional supplements, detoxification, exercise and stress reduction provide an alkalizing approach in preventing and reversing any serious health condition.

Biography

Galina Migalko graduated with her M.D. from Uzghorod Medical University (Ukraine) in 1988, After finishing the California School of Medical Sciences and earning an additional ARDMS license in Diagnostic Medical Sonography, she founded the Universal Medical Imaging Group an alternative and complementary practice that uses the Comprehensive Full Body Screening. In 2011, She received her NMD from the University of Science Arts and Technology (Montserrat, British West Indies and London, England) with a degree in Naturopathic Medicine.

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