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Accepted or Poster Abstracts

Title: Factors related to ICU transfer among COVID infectious patients admitted to adults intermediated ICU: The study in phase 3 pandemic

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Due to the coronavirus disease 2019 (COVID - 19) outbreak, there are several causes that COVID -19 infected patients need to be transferred to intensive care unit (ICU). This retrospective study was examined factors that relate for transfer the COVID-19 patient to ICU. Among 439 COVID - 19 infected patients who admitted to the intermediate ICU (5 A) ward in Ramathibodi Chakri Naruebodindra Hospital during the phase 3 pandemic were included in this study. The inclusion criteria were the patients admitted and diagnosed COVID- 19 infection and 15 patients were excluded because they died before transferring to ICU. The data was collected between May 1 and September 30, 2021. The descriptive statistics were analyzed using frequency, percentage, standard deviation. The chi-square was used to analyze the related factors.

The result from this study found that the patients were classified as 207 males (48.82%) and 117 females (51.18%) with a mean age between 59.86 ± 16.05 years old. Only 75 patients (17.69%) were evaluated and transferred to ICU. The mean length of stay at the 5 A ward was 5.41 days ($SD \pm 5.22$). The factors associated with transferring criteria to ICU were age ≥ 60 years old ($p=0.021$), Charlsson's disease index (score) ≥ 4 points ($p=0.005$), awake prone position ($p<0.001$) and oxygen concentration ($FiO_2 > 0.6$ ($p=0.001$)).

In summary, the factors related to transferring the COVID- 19 infection patients into the ICU ward compose several causes. One of the most important factors including age and past medical condition which found to be the most common factor of transferring rate to ICU. This result suggested that this study could be useful to determine and early detect high risk factor patient for improving the quality and efficiency of nursing care.

Biography

I am a head of nurse in Critical Care unit in Chakri Naruebodindra Hospital, Mahidol University

Title: Association between SpO² / FiO² ratio and mortality with COVID-19 patients in intermediate care unit

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COVID-19 is an infectious disease that is spreading around the world. They range from no symptoms to severe symptoms which needs to be treated in the ICU ward and found a high mortality rate. This research aimed to Association between SpO₂ / FiO₂ Ratio (S/F ratio) and Mortality with COVID-19 patients. Sample group was Covid-19 patients were 489 cases during 17 April 2021 through 30 September 2021. This research is to descriptive statistics and The fisher's exact test and chi-square test were used for Association between SpO₂ / FiO₂ Ratio and Mortality with COVID-19 patients in Intermediate care unit

The result showed that Sample groups were > 75 years (p<0.01) has Charlson comorbidity index ≥4 point (p<0.01) has Hypertensive (p=0.045) has Respiratory disease (p=0.007) oxygen concentration (FiO₂) > 0.6 (p=0.003) S/F ratio<150 (p=0.014) and has CKD (p=0.030) were associated between SpO₂ / FiO₂ Ratio and Mortality with COVID-19. The results of this research can be used as supporting information , Nursing planning and continue to care for the patient while nursing.

Biography

I work as a faculty of public health in Chakri Naruebodindra Hospital, Mahidol University

Title: Outcome of critical care stroke patients in Ramadhibodi Chakri Naruebodindra Hospital

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This research was a retrospective descriptive study, aimed to study the outcomes of critical care stroke patients. The purposive sampling was used to select samples, 163 stroke patients. Retrospective data were studied from medical records of stroke patients admitted in intensive care stroke unit Ramadhibodi Chakri Naruebodindra Hospital during October 2020 to September 2021. The data were analyzed by using frequency, percentage, mean, standard deviation.

The results showed that the first process outcomes were as follows: The mean pre-hospital time from the onset of stroke to hospital was 1349.12 minutes (SD = 1738.359), the mean time from hospital arrival to received CT scan was 32.78 minutes (SD=32.425). The mean time from hospital arrival to CT Scan report was 57.44 minutes (SD=43.378). The mean time from hospital arrival to receive the blood test was 64.90 minutes (SD=42.889). The mean time from hospital arrival to received rtPA was 53.50 minutes (SD=11.352) and the second outcomes of care were as follows: Comparing the NIHSS score before rt-PA and before discharge, showed that increased, decreased, and the same, was 15.34%, 55.83%, and 28.83%, respectively. Comparing the Barthel ADL Index when first received and before discharge showed that increased, decreased and the same, was 33.74%, 6.75% and 59.51%, respectively. Percentage of patients received anti- coagulant drugs and self-care information were 90.80 and 96.93. The top three complications were AF, UTI and Electrolyte imbalance. The LOS was 6.34 days.

Biography

I am a nurse in Critical Care unit in Chakri Naruebodindra Hospital, Mahidol University, Thailand

Title: Giant frontal lobe tuberculoma of brain: A rare neoplastic mimic

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Tuberculosis continues to plague the developing parts of the world. In spite of implementing multiple Tuberculosis control programs, Tuberculosis persists as a leading public health menace in India. Central Nervous System (CNS) Tuberculosis predominantly manifests as meningitis, tuberculomas and brain abscesses. Giant tuberculoma, classified as a large neoplastic mass is a rare entity, accounting for <2 % of all CNS tuberculosis cases. Majority of the tuberculomas in the pediatric population are reported in the infratentorial region therefore a frontal lobe presentation is extremely rare. Patients with tuberculoma often present with features mimicking neoplasm lasting months to years. Based on imaging studies, such cases are often misdiagnosed as neoplasms; however, when an imaging study is combined with MSR spectroscopy reading, an accurate diagnosis can be made. We herein report a rare presentation of Frontal lobe Giant Tuberculoma in an adolescent Indian female who suffered from headache, deviation of face to the right, diplopia of left lateral gaze and loss of sensation in upper part of face with 7th nerve upper motor neuron type palsy. On fundus examination, bilateral papilloedema was present. MRI Brain revealed a ring enhancing lesion (>2.5cm) of deep frontal lobe with a 9.5mm midline shift and effacement of lateral ventricle. On MR spectroscopy, lipid laden peaks which was suggestive of Tuberculoma. Treatment was started with anti tubercular medications with steroids and anti edema measures. Patient is in Recovery with symptomatic resolution of headache, diplopia and paresthesia. Post initiation phase MRI shows a decrease in lesion size and complete resolution of peripheral edema.

Biography

Neetipriya Pandey is a Third Year Pediatric Resident at Farooq Hussain Medical College in Agra, Uttar Pradesh India. The hospital serves the residents of District Firozabad and surrounding rural regions. Dr. Neetipriya Pandey is passionate about health care initiatives at the grassroot level and looks forward to further study public health policy to improve outcomes amongst underprivileged pediatric populations.

Title: Reconstructing susceptibility against chickenpox: A mathematical modelling study

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Kyoto University, Japan

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In Japan, routine two-dose immunization against varicella has been conducted among children at ages of 12 and 36 months since 2014, and the vaccination coverage has reached around 90%. To understand the impact of routine varicella vaccination, we reconstructed the epidemiological dynamics of varicella in Japan. Moreover, public health and social measures (PHSMs) targeting the coronavirus disease 2019 (COVID-19) pandemic have potentially affected the epidemiological dynamics of endemic infectious diseases. In this study, we investigated the impact of PHSMs for COVID-19, with a particular focus on varicella dynamics in Japan. Epidemiological and demographic datasets over the past three decades were analyzed to reconstruct the number of susceptible individuals by age and year. To estimate the annual risk of varicella infection, we fitted a balance equation model to the annual number of cases from 1990 to 2019. Using parameter estimates, we reconstructed varicella dynamics starting from 1990 and modeled future dynamics until 2033. Moreover, we adopted the susceptible-infectious-recovered type of mathematical model to reconstruct the epidemiological dynamics of varicella from Jan. 2010 to Sep. 2021. We analyzed epidemiological and demographic data and estimated the within-year and multi-year component of the force of infection and the biases associated with reporting and ascertainment in three periods: pre-vaccination (Jan. 2010-Dec. 2014), pre-pandemic vaccination (Jan. 2015-Mar. 2020) and during the COVID-19 pandemic (Apr. 2020-Sep. 2021).

Overall varicella incidence declined over time and the annual risk of infection among children younger than 10 years old decreased monotonically starting in 2014. Conversely, varicella incidence among teenagers (age 10 to 14 years) has increased each year since 2014. A substantial number of unvaccinated individuals born before the routine immunization era remained susceptible and aged without contracting varicella, while the annual risk of infection among teenagers aged 10 to 14 years increased starting in 2011 despite gradual expansion of varicella vaccine coverage. The number of susceptible individuals decreased over time in all age groups. Modeling indicated that susceptibility rates among pre-school children aged 1 to 4 years will remain low.

In the COVID-19 related analysis, by using the estimated parameter values, we reconstructed and predicted the varicella dynamics from 2010 to 2027. Although the varicella incidence dropped drastically during the COVID-19 pandemic, the change in susceptible dynamics was minimal; the number of susceptible individuals was almost stable.

Routine varicella vaccination has successfully reduced infections in pre-school and early primary school age children, but has also resulted in increased infection rates among adolescents. This temporary increase was caused both by the increased age of susceptible individuals and increased transmission risk among adolescents resulting from the dynamic nature of varicella transmission. Monitoring susceptibility among adolescents will be important to prevent outbreaks over the next decade. In addition, our prediction showed that the risk of a major outbreak in the post-pandemic era may be relatively small. However, uncertainties, including age-related susceptibility and travel-related cases, exist and careful monitoring would be required to prepare for future varicella outbreaks.

Biography

Hiroshi Nishiura is a professor at Kyoto University School of Public Health, Yoshidakonocho, Japan

Title: Eliminating dengue fever should be easy compared to malaria – In a Malaysian perspective

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Introduction: In 1993, the International Task Force for Disease Eradication thought over and concluded that only six diseases are eradicable – but, malaria, dengue fever (and dengue hemorrhagic fever) were not included. In 2010, 99 countries reported 219 million cases of malaria, and 660,000 deaths. In Malaysia in 2011, 5152 cases had been reported causing not more than 30 deaths. Over 2.5 billion are at risk to dengue fever given the endemicity in addition of 100 countries, compared to nine countries in 1970. The WHO estimate 50-100 million cases annually, with approximately 500,000 dengue haemorrhagic-fever, and an estimated 22,000 death each year. In Malaysia in 2017, there is found 83,849 reported cases of dengue fever with 177 deaths. There is a compelling need to give thought here to a elimination/eradication programme on dengue fever in Malaysia, realizing there is presently a malaria-elimination programme already.

Aim: The Aim of this Review is to contemplate on the priority of possible public-health intervention of infectious-diseases, the International Task Force on Disease Eradication, and the three principle/indicators toward successful eradication/elimination programme, and the cost, beside describing the epidemiology and eradication/elimination of malaria in Malaysia, including the human and economic cost of malaria, in a comparison with dengue fever, including the dengue control & prevention programme and the potential in the innovative-methods, and why a dengue fever elimination programme is timely and imperative.

Methodology: This article is a Narrative Review, and the authors focus the article around three articles published by the authors in recent times on dengue fever, and one on malaria. Additionally, the authors contemplate around relevant newer articles by various authors retrieved through PubMed and Google Search.

Results: Based on priority of possible public-health intervention of infectious-diseases by the International Task Force on Disease Eradication, and the principle/indicators identified by the Task Force, and the Dahlem Conference, toward successful eradication/elimination programme, and the World Health Assembly on dengue fever, it is felt that a dengue fever elimination programme is timely and imperative, beside found very cost-beneficial.

Conclusion: Mankind can eliminate dengue fever, even if not actually eradicating the disease, in a very much feasible and cost-beneficial programme, beginning in nations and regions of the world, prior to grouping to become a global-programme. consistent.

Biography

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