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LEGALLY MINE

MARCH
04-06
2024

Day 1
March 04, 2024 (Monday)

8:00 – 8:15	Registrations
8:15 – 8:30	Opening Ceremony
8:30 – 09:15	Title: Practical, Applied, and Researched-Based Strategies for Physicians Stephanie M Williams , Department at Pennsylvania Western University, USA and John F Ziegler, Department at Pennsylvania Western University, USA
09:15– 09:45	Title: Complicated Granulomatous Mastitis Secondary to Corynebacterium Requiring Surgical Intervention: An Unusual Case Vincent Marcucci , Department of Surgery, Jersey Shore University Medical Center, USA
09:45 – 10:15	Title: Prognostic Factors of Chemonucleolysis with Condoliase for Lumbar Disc Herniation Fuyuki Tominaga , Fukuoka Orthopaedic Hospital, Japan
10:15– 10:45	Title: Indocyanine Green Angiography Overpredicts Postoperative Necrosis Compared to Multispectral Reflectance Imaging Glyn Jones , Division of Plastic and Reconstructive Surgery, University of Illinois College of Medicine at Peoria, USA
Coffee Break 10:45 – 11:00	
11:00 – 11:30	Title: Free-living physical activity pattern during weekdays and weekends among post-acute myocardial infarction patients Abedalmajeed Shajrawi , Assistant Professor - Health Science Faculty of Health Sciences, UAE
11:30 – 12:00	Title: Longitudinal Study Evaluating Post-ICU Syndrome Differences in Acute Care Surgery and Trauma SICU Survivors Eric J Mahoney , Tufts Medical Center, USA
12:00– 12:30	Title: The Use of Three Iliac Crest Muscles for Head and Neck Soft Tissue Reconstruction Hervé Crèvecoeur , Department of CHU-UCL Namur, Belgium
12:30– 13:15	Presentation by Legally Mine
Lunch Break 13:15 – 14:00	
14:00 – 14:30	Title: Advancements in Ultrasound Bone Knife Osteotomy for Spinal Surgery: Exploring Benefits and Ensuring Safety in Current Practices Alessandro Rustia , Head of Spinal Surgery Pyramide clinic in Zurich, Switzerland
14:30 – 15:00	Title: Steinmann Wire Migration to the Descending Aorta Jesús Jacinto Custodio López , Hospital Nacional Almanzor Aguinaga Asenjo, ESSALUD, Chiclayo, Peru
15:00 – 15:30	Title: Preoperative inflammatory markers as prognostic predictors after hepatocellular carcinoma resection: data from a western referral center João Paulo Maciel Silva , Gastroenterological sciences and liver surgery division for the Medicine School of the University of São Paulo, Brazil
15:30 – 16:00	Title: T cell responses to SARS-CoV-2 Laiqha Khadri , Founder of Immunelnspired Health Consulting in Diabetes, Cancer & Covid, India
16:00 – 16:30	Title: Does Halftime Score Predict Outcome? Imaging Predictors of Immunotherapy (IT) Effect in Recurrent Melanoma Milos Janicek , Clinical Professor of Radiology, Boston University Medical Center, USA

Coffee Break 16:30 – 16:45

16:45 – 17:15	Title: Analysis of the Effectiveness of Complex Rehabilitation of Patients with Skin Melanoma after Combined Treatment Anastasia Mochalova , Clinic of “MEDSI”, Russia and Igor Semeniakin , Clinic of “MEDSI”, Russia
17:15 – 17:45	Title: Pediatric Patients and Medical Cannabis: New Trends Sandra Caires Serrano , Teaching Assistant in the Pediatric Emergency Department, São Paulo, SP, Brazil
17:45 – 18:15	Title: Management of the Open Abdomen: A Systematic Review with Meta-Analysis and Practice Management Guidelines from the Eastern Association for the Surgery of Trauma Eric J Mahoney , Tufts Medical Center, USA

Day 2
March 05, 2024 (Tuesday)

08:00 – 08:30	Title: Embracing Family Engagement in the Neonatal ICU through an Environmental Design Perspective: The role of Single-Family Rooms Herminia Machry , Trauma Medical Director, Lahey Hospital and Medical Center, USA
08:30 – 09:00	Title: An Invisible Reality of Internet/AI Learning: Neurophysiological Effects to Memory and the Impact on the Graduate Education of Nurse Administrators Cynthia Plonien , University of Texas at Arlington, USA
09:00 – 09:30	Title: Success Strategies for the HESI Exit Exam Faye A Fairchild , Nightingale College/Nightingale Education Group, USA
09:30 – 10:00	Title: Oral Health Status and Quality of Life for the Elderly in Veteran’s Home Tang YICHIN , Taipei City Hospital, Taiwan
10:00 – 10:30	Title: Determination of the Nutritional Status and Its Relationship with Albumin in the Older Adults of Tlaxcala Alexis Hernandez Pozos , Center for Higher Studies of Tepeaca (CEST), Puebla, Mexico Elia Carmen Zayas Serrano , Center for Higher Studies of Tepeaca (CEST), Puebla, Mexico

Coffee Break 10:30 – 10:45

10:45 – 11:15	Title: The Role of a Clinical Skills Co-ordinator in a Pre-Registration Program Jo [Joanne] Agnew , University of Auckland, New Zealand
11:15 – 11:45	Title: Directed Cutaneous Neurectomy for Cutaneous Neuralgia Charles E Lucas , Detroit Receiving Hospital, USA
11:45 – 12:15	Title: Innovations in Nursing at Hospital Israelita Albert Einstein Reflect the Challenges, Achievements, and Results Achieved with the Magnet Designation Claudia Regina Laselva , CNO, Operations and Care Practices Director at Hospital Israelita Albert Einstein, São Paulo, Brasil
12:15 – 12:45	Title: Noise-Induced Hearing Loss in Workers in the Southern of Brazil Yasmim Brustolin Lobo Rodrigues , University of the Itajai Valley, Brazil

Lunch Break 12:45 – 13:30

13:30 – 14:00	Title: Senior Health, Better Analysis, Better Intervention, Better Outcomes Michael Johnson , Aspire Clinical Intelligence LLC, United States
14:00 – 14:30	Title: Giant Liver Cyst in a Newborn with Pseudoprune-Belly Syndrome - A Case Report Michelle Patrocínio , Faculty of Medicine of Valença, Rio de Janeiro, Brazil
14:30 – 15:00	Title: Evaluation of the presence of drugs in sewage treatment station sludge before and after the bioremediation process by composting Suzet Maria Lenzi Caminada , Faculdade de Saúde Pública, Universidade de São Paulo, Brasil
15:00 – 15:30	Title: Occupational Tuberculosis among Healthcare Workers (HCWs) Janeffer Muthoni Wangari , Kenyatta University, Nairobi, Kenya
15:30 – 16:00	Title: SUS in the midia in a pandemic context Maria Ligia Rangel Santos , Federal University of Bahia, Brazil
	Coffee Break 16:00 – 16:30
16:30 – 17:00	Title: Impact of multidisciplinary management of diabetic foot Valeska Marianchy Guzmán González , Faculty of Medicine of the Universidad Católica del Norte, Chile
17:00 – 17:30	Title: Pedagogical Content Knowledge: a professor's practice in a nursing program Leonardo Arias Cardona , University of Antioquia, Colombia
17:30 – 18:00	Title: Empowerment: A Tool for the Nursing Professional's Performance in Health Promotion and Prevention Yamila La O Jiménez , Practical Care Program in Intensive Nursing, Cuba

Day 3
March 06, 2024 (Wednesday)

08:00 – 08:30	Title: Use of Real World Evidence in Pediatric Clinical Trials: Application with Neonates & Other Rare Disease Populations Thomas F Miller , Bayer Healthcare, LLC, USA
08:30 – 09:00	Title: Creating a Competency Based Curriculum in a BSN Program: A Case Study of Leadership Justin Wagner , Commonwealth University of Pennsylvania, USA
09:00 – 09:30	Title: High Rates of Aggressive Features in Young Vietnamese Females with Papillary Thyroid Carcinoma: Associations with Preoperative Risk Factors Nguyen Van De , Vice Head of the Pathology Department, 108 Military Central Hospital, Vietnam
09:30 – 10:00	Title: Undifferentiated Pleomorphic Sarcoma of the Tongue: Unfrequent Malignant Neoplasm of the Tongue Pedro Sarmiento , Head and Neck Surgery Consultation. Anticancer Society of Lara State, Barquisimeto – Lara State, Venezuela
10:00 – 10:30	Title: Chylothorax and Chyloperitoneum in the Setting of Neck Lymph Node Dissection Paula Tridone , Sanatorio Ipenza, La Plata, Buenos Aires, Argentina
	Coffee Break 10:30 – 10:45
10:45 – 11:15	Title: A Case Report of Non-Cardiac Platypnea-Orthodeoxia Syndrome presenting to the Pediatric Emergency Department Barbara Ximenes Braz , Nicklaus Children's Hospital, USA

11:15 – 11:45	Title: Classic Hodgkin Lymphoma- mixed cellularity- case report and review of literature Mihaela Lebedenco , Clinical Hospital “St John”- Hematology, Romania
11:45 – 12:15	Title: Difficult endotracheal intubation in a neonate: a clinical challenge Reda El Bayoumy , Basildon university hospital/ Mid & South Essex NHS university hospitals, United Kingdom
12:15 – 12:45	Title: Urachal Sinus in an Infant: A Case Report Julia Souza Vescovi , Joana de Gusmão Children's Hospital in Florianopolis / Santa Catarina, Brazil
	Lunch Break 12:45 – 13:30
13:30 – 14:00	Title: Analysis of the epidemiological profile of congenital hip deformities, 2011–2021 Bianca Gabriella de Oliveira , Universidade Salvador, Brazil
14:00 – 14:30	Title: Early Childhood Care and Education under Uncertainty: The Case of Israel Yaara Shilo , Bar-Ilan University, Israel
14:30 – 15:00	Title: Acute Viral Myositis Associated with Guillain-Barré Syndrome Magaly Milagros Luque Salazar , Catholic University of Santa María Arequipa, Peru
15:00 – 15:30	Title: Clinical and Radiological Characteristics of Congenital Lung Malformations. Report of Four Cases in a Third-Level Center in Mexico City Sharyam Margarita Caicedo Cabrera , Universidad Nacional Autónoma de México, México
15:30 – 16:00	Title: One stage emergency surgical release of the Amniotic constriction band in Streeter’s dysplasia with clubfoot- A case report Baldish Singh Oberoi , Oberoi Hospital, Jalandhar City, India
	Coffee Break 16:00 – 16:30
16:30 – 17:00	Title: Prognostic Factors of Neonatal Sepsis Mortality in Developing Country Iffa Ahsanur Rasyida , Department of Pediatrics, Dr. R. Sosodoro Djatikoesoemo General Hospital, Indonesia
17:00 – 17:30	Title: POCUS in the Pediatric Emergency Department: Current Scenario in the United States and Perspectives in Resource-limited Settings Barbara Ximenes Braz , Nicklaus Children’s Hospital, USA
17:30 – 18:00	Title: Fetus in Fetus: A Case Report Abdalla Elabbar , Surgical Department, Children Hospital, Benghazi, Libya
18:00 – 18:30	Awards & Networking



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Practical, Applied, and Researched-Based Strategies for Physicians

Stephanie Williams and John Ziegler

Educational Leadership & School Psychology Department at Pennsylvania Western University, USA

Abstract

Background: A prominent ENT doctor approached us to serve as editors of an anthology to review successful teaching strategies to assist the teaching physician. This began a journey of attending lectures, researching, meeting with physicians and residents, resulting in a collection of articles.

Methodology: This article is a practical approach to teaching medical doctors, based on a literature review, including practical, scientific, and applied research and strategies ways in which teaching can be optimized that result in depth of learning in the resident.

Assumptions and Findings: Aspiring physicians face a large amount of information that must be learned and retrieved in real time. The skills that helped medical students reach residency may not be enough to succeed as a physician. For example, like many students, cramming the night before an exam may help achieve a satisfactory score. Unfortunately, cramming does not require that the information be retained and applied over time. The content acquired in medical school is cumulative; that is, the information learned remains relevant months and even years later. Not only does content need to be remembered, but the knowledge must also be constantly updated as new research makes select information more relevant and other information less important. Finally, the stakes as a physician are high. While forgetting a critical piece of information may not result in a lower test score, it can seriously harm patients.

Conclusion: This paper began by searching for a practical approach to teaching aspiring medical physicians that increase both the quantity and depth of learning. We uncovered that this goal depends on the delivery of content through evidence-based teaching strategies, brain-based research, and best practices in teaching and learning while acknowledging growth through the transference of knowledge to long-term memory. The literature review captures part of this cycle. With each period of educational research new topics emerge and continues the pedagogical discourse while re-energizing the desire to make a difference through a renewed focus on the instruction and the learner. At the same time, certain barriers exist across the entire continuum, pushing and pulling the conversation in new as well as familiar directions. Notable topics covered in this article noticeably shaped the field, while others reach out to focus on new learner centered audiences. Teaching and learning are an important aspect of the medical profession. Recognizing readiness, relevant research, existing barriers, and learning styles help the profession be successful in achieving doctors capable of learning and applying what they have learned. Through it all, however, continuous learning does not stop; there will always be learners in need of greater retention and instructors willing to explore pedagogical strategies that increase the effectiveness of the teaching and learning process.

Keywords: ENT; Medical doctors; Physicians

Biography

Stephanie M. Williams, Ph.D., is an Associate Professor in the Educational Leadership & School Psychology Department at Pennsylvania Western University. Dr. Williams is the author of many articles on student success and has dedicated her career to education with experience as a teacher, department chair, principal, office administration, and university professor. Throughout her career, Dr. Williams earned numerous grants and awards, including the 2012 Pennsylvania Secondary Principal of the Year. Dr. Williams prides herself on her servant leadership approach to learning and educating.

John F. Ziegler, D.Ed., is a Professor in the Educational Leadership & School Psychology Department at Pennsylvania Western University. Dr. Ziegler has held numerous positions from teacher to counselor to building and district level school administrator and now teaches graduate courses specifically designed for candidates seeking educational leadership certification. Dr. Ziegler's progressive years of experience in public education define a professional career that serves students and colleagues with distinction. His educational role characterizes a facilitator, a motivator, and a resource who can move individuals from their comfort zones to higher levels of academic and personal growth.

Complicated Granulomatous Mastitis Secondary to Corynebacterium Requiring Surgical Intervention: An Unusual Case

Charles Lu, Vincent Marcucci and Roshani Patel

Department of Surgery, Jersey Shore University Medical Center, USA

Abstract

Introduction: Granulomatous mastitis is an uncommon inflammatory breast condition that has a controversial etiology and is typically observed in parous women of childbearing age. *Corynebacterium* is a known skin flora, it can be misinterpreted as a contaminant instead of a pathogenic etiology. The presence of positive cultures on a sterile aspirate culture lends to exposing *Corynebacterium* as a novel pathogen.

Case Presentation: A 40-year-old female initially presented due to concern for a breast lump after a traumatic event. She subsequently underwent screening mammography and a core needle biopsy which revealed granulomatous mastitis. She was initially treated with a 2-week course of Keflex and a prednisone taper with transient symptomatic improvement. A sonogram was performed identifying multiple abscess cavities with confirmation of a fistulous tract. The patient required multiple aspirations/OR debridements before an organism was isolated with cultures growing *Corynebacterium kroppenstedtii*. Her infection was managed with prolonged antibiotics and multiple aspiration/drainage procedures until there was no recurrence(s).

Discussion: Since first described in 1972, Idiopathic granulomatous mastitis (IGM) does not have a definitive approach to identify and treat the disease. The pathogenesis of IGM remains largely unknown although a progression from subclinical mastitis to mastitis and finally abscess development with granuloma formation has been suggested. There are many competing theories on the etiology of granulomatous mastitis. Instrumentation or aspiration may predispose individuals to develop new collections due to a possible inflammatory response to epithelial damage. Optimal treatment is controversial and may consist of a trial of antibiotics, steroids or immunomodulators such as methotrexate in combination with possible surgery.

Keywords: *Corynebacterium kroppenstedtii*; Idiopathic granulomatous mastitis; Skin flora

Biography

I am a PGY3 general surgical resident at Jersey Shore University Medical Center. Native of southern New Jersey where I graduated from The College of New Jersey in 2012 and St. George's University Medical School in 2021. Pursuing a fellowship and further training in Abdominal Transplant and Hepatopancreatobiliary surgery.

Prognostic Factors of Chemonucleolysis with Condoliase for Lumbar Disc Herniation

Fuyuki Tominaga

Fukuoka Orthopaedic Hospital, Japan

Abstract

Introduction: Intradiscal injection therapy using condoliase is a new minimally invasive treatment for lumbar disc herniation. This study aimed to examine the short-term outcomes of intradiscal condoliase injection for lumbar disc herniation and reveal the factors influencing the effectiveness of this therapy.

Methods: Sixty-nine patients (48 men and 21 women), who were treated with condoliase injections and followed-up for >3 months, were enrolled in this prospective study. Their mean age was 45.0 years (range, 17–89 years). We investigated the Visual Analog Scale scores for low back and leg pain as clinical assessments, and the herniation size on magnetic resonance imaging as radiological assessments, preinjection, and 1 month and 3 months postinjection. An improvement of $\geq 50\%$ in the Visual Analog Scale (VAS) score for leg pain was considered to indicate effectiveness.

Results: The mean VAS score for low back pain notably improved from 5.1 preinjection to 2.8 postinjection, and that of leg pain notably improved from 6.9 to 2.4. The herniation size decreased from 53.2 mm^2 preinjection to 24.4 mm^2 postinjection. Fifty-two patients (75%) at 3 months.

Keywords: Intradiscal injection therapy; Preinjection; Postinjection

Biography

Fuyuki Tominaga, Fukuoka Orthopaedic Hospital, Japan

Professional Life

Education

2002-2008 Kyushu University School of Medicine, Fukuoka

Medical Training

2008-2010 Junior resident, Fukuoka Red Cross Hospital, Fukuoka

2010-2011 Resident, National Kyushu Medical Center, Fukuoka

2011-2012 Doctor, Fukuoka Orthopaedic Hospital, Fukuoka, Orthopaedic Surgery

2012-2013 Doctor, Kyushu university Hospital, Fukuoka, Orthopaedic Surgery

2013-2014 Doctor, Shimonoseki City Hospital, Yamaguchi, Orthopaedic Surgery

2014-2015 Doctor, Fukuoka Higashi Medical Center, Fukuoka, Orthopaedic Surgery

2015-2016 Doctor, Karatsu Red Cross Hospital, Saga, Orthopaedic Surgery

2016-present Doctor, Fukuoka Orthopaedic Hospital, Fukuoka, Orthopaedic Surgery

Speciality

2022- Educator of Japanese Society for Spine Surgery and Related Research.



Indocyanine Green Angiography Overpredicts Postoperative Necrosis Compared to Multispectral Reflectance Imaging

Glyn E Jones

Division of Plastic and Reconstructive Surgery, University of Illinois College of Medicine at Peoria, USA

Abstract

Background: Sufficient perfusion is foundational to successful reconstructive surgery. Various technologies have been developed to help determine if tissue is adequately perfused, or if it will be prone to necrosis postoperatively. Indocyanine green (ICG) angiography is one such method which utilizes fluorescence. Near infrared multispectral reflectance imaging (MSRI) is an alternative non-invasive technology which analyzes spectral properties of oxygenated and deoxygenated hemoglobin. Preliminary work inspired the authors to hypothesize that compared to MSRI, ICG angiography overpredicts necrosis, potentially resulting in unnecessary resection of viable tissue.

Methods: This was a prospective study of patients undergoing either a flap, breast reduction, breast tissue expansion, expander-implant exchange, or pre-pectoral direct implant breast reconstruction. Each patient was examined intraoperatively with both ICG angiography and MSRI. Decisions to resect tissue were made in conjunction with MSRI. Patients were followed postoperatively for at least two months for signs of necrosis.

Results: A 64 cases were included. ICG angiography predicted necrosis in 17 patients, 15 (88.2%) of which did not develop any signs of postoperative necrosis. Simultaneously, MSRI accurately predicted viability in 96.9% (62/64) of patients. There was no statistically significant difference in demographic data among patients predicted to experience necrosis via ICG angiography vs those predicted to have entirely viable tissue.

Conclusion: This study suggests that ICG angiography is prone to overpredicting postoperative necrosis in comparison to MSRI. Moreover, MSRI is a non-invasive, less expensive technology that appears to have significant utility in supporting the reconstructive surgeon's intraoperative decision making.

Keywords: Indocyanine green (ICG) angiography; Postoperative Necrosis; Multispectral Reflectance Imaging

Biography

Dr. Glyn Jones was born and raised in Bulawayo, Rhodesia, now known as Zimbabwe. He received his doctorate in medicine from the University of Rhodesia. Dr. Jones received postgraduate training in General and Plastic Surgery in Rhodesia and Cape Town and completed a residency in Plastic Surgery at Emory University in Atlanta, Georgia. He received fellowship training in Cosmetic and Cranio-maxillofacial Surgery and in Hand Surgery. Dr. Jones is board certified in both General Surgery and Plastic Surgery.

Dr. Jones is Professor of Surgery. He joined our faculty in May of 2007. He came to us from Emory University where he was a full-time faculty member for over ten years, serving as Interim Chair, Department of Plastic Surgery and recipient of the 'Teacher of the Year' award. In addition to writing and lecturing extensively about Breast Reconstruction and Plastic Surgery, Dr. Jones has also edited several books and authored numerous book chapters on these topics. He is the author/editor of the recently published 'Bostwick's Plastic & Reconstructive Breast Surgery, 3rd Edition', which is widely recognized as the definitive breast surgery reference for surgeons around the world.

Dr. Jones lives in Peoria with his wife, Hilarie. They have three grown children

Free-Living Physical Activity Pattern during Weekdays and Weekends among Post-Acute Myocardial Infarction Patients

Abedalmajeed Shajrawi

Assistant Professor - Health Science Faculty of Health Sciences, UAE

Abstract

Background: Few studies have objectively measured daily averages and patterns of PA level in post-acute myocardial infarction patients.

Purpose: To identify the changes in free-living PA level across the day and between weekdays and weekends at week 2 (T1) and week 6 (T2) following discharge from hospital among post-AMI patients in the early recovery period.

Methods: A descriptive study with repeated measures was used. A purposive sample of 100 patients after their first AMI, were participated in the study.

Results: There were significant decreases in daily PA indicators between weekdays and weekends at T1 and T2. However, looking into weekdays at T1 and T2, there was no significant difference in PA volume.

Conclusions: Interventions should target improving PA during weekends as lower PA was observed. Healthcare policymakers should develop serious actions and establish cardiac rehabilitation program for post-AMI patients in XXXX.

Keywords: Acute Myocardial Infarction; Physical activity; activPAL; Accelerometer

Biography

Abedalmajeed Shajrawi holds a bachelor's degree in nursing from the Jordan University of Science and Technology in Jordan in 2002. Then, he got a Master's degree in acute care nursing from Jordan University of Science and Technology in 2007. After that, Abedalmajeed Shajrawi got PhD in Nursing from the University of Salford / UK in 2017. Abedalmajeed Shajrawi worked in Applied Science Private University as an Associate professor in the Faculty of Nursing. Dr. Abedalmajeed is working now in faculty of Health science at Higher Colleges of Technologies at Sharjah campus / UAE. His research use quantitative method with using different research deigns such as cross section, longitudinal, repeated measures, experimental designs. My researches focus on cardiovascular risk factors, self-efficacy, physical activity. The main research areas are cardiovascular risk factors, self-efficacy, physical activity behaviour and preventive measures to improve health care of cardiac patients.

My background is focused on cardiovascular diseases, self-efficacy, physical activity and improving nursing care for critically ill patients. I have engaged in many researches with varied study designs and with international research cooperation from different countries.

My PhD thesis is measurement of physical activity and self-efficacy levels among patient's post-acute myocardial infarction during early recovery phase. The thesis findings showed that although the increased level of self-efficacy level. However, patients' post-acute myocardial infarction needs to improve physical activity level and reduce sedentary time.

Longitudinal Study Evaluating Post-ICU Syndrome Differences in Acute Care Surgery and Trauma SICU Survivors

Eric J Mahoney

Trauma Medical Director, Lahey Hospital and Medical Center, USA

Abstract

A cohort of patients who suffer critical illness may go on to develop long-term sequelae related to their hospitalization. These ICU survivors can suffer profound psychiatric, physical, and cognitive impairments that are not directly related to their initial cause of admission and are uniquely related to their ICU experience. This debilitating constellation of symptoms has been labeled Post-Intensive Care Syndrome (PICS). Recently, a high prevalence of PICS among Surgical ICU (SICU) survivors was identified. This SICU cohort was composed of both Trauma and Acute Care Surgery (ACS) patients. We sought to determine if differing patient admission criteria among SICU patients would be associated with differences in the development of PICS. We found that PICS was high in both trauma and ACS patients; however, ACS patients were found to have higher rates of PICS during the initial follow-up visit compared to Trauma patients. We will present our research and discuss possible causes for this discrepancy.

Keywords: Post-ICU Syndrome; Acute Care Surgery; Trauma

Biography

Eric J. Mahoney, MD, FACS is the Trauma Medical Director, interim, at Lahey Hospital and Medical Center. Originally from Boston, MA, he attended Boston College and Temple University School of Medicine. He completed his residency in Surgery and fellowships in both Surgical Research and Surgical Critical Care at Rhode Island Hospital/Brown University in Providence, Rhode Island, USA. Dr. Mahoney is Board-Certified in both General Surgery and Surgical Critical Care.

The majority of Dr. Mahoney's career has been working in high-acuity Trauma Centers, including Boston Medical Center, Tufts Medical Center, and Lahey Hospital and Medical Center. This work has given him extensive experience in caring for traumatic injured patients, mass casualty and disaster management, and critical care. His clinical research interests include improving trauma systems, complex abdominal reconstruction, and improving the long-term care of ICU survivors.

The Use of Three Iliac Crest Muscles for Head and Neck Soft Tissue Reconstruction

Hervé Crèvecoeur

Department of CHU-UCL Namur, Belgium

Abstract

Several types of flaps used for head and neck reconstruction after oncologic surgery have been described. The radial forearm flap is commonly used for soft tissue reconstruction in head and neck. If the cubital artery is unable to supply adequate blood to the hand, harvesting a radial forearm free flap can be challenging.

An alternative approach was to harvest a muscle-only flap from the iliac crest region to provide oral lining. A muscular free flap was raised with reduced donor site morbidity that effectively reconstructed the tongue. The deep circumflex iliac artery muscular free flap appears to be a reliable alternative for reconstructing large defects of the oral cavity as well as the face.

Keywords: Iliac Crest Muscles; Head and Neck Reconstruction; Oncology

Biography

Hervé Crèvecoeur Department of CHU-UCL Namur, Belgium

Professional Life

1999: Graduate from Catholic University of Louvain, Belgium (MD); 2001: Dental Médical School; 2005: specialist in Oral and Maxillo-Facial Surgery; 2014: D.U. Micro-Surgery, and reconstructive Surgery University of Lille France; Specialist at the Department of Oral and Maxillo-Facial Surgery, CHU-UCL Namur, I have a keen interest in oncology and head and neck reconstruction.

Steinmann Wire Migration to Descending Aorta

Jesús J. Custodio López and Carlos Ledesma Martins

Department of Thoracic and Cardiovascular Surgery, National Hospital Almanzor Aguinaga Asenjo, Chiclayo-Peru

Abstract

Many traumatic injuries to the shoulder girdle have to be fixed and stabilized with Steinmann and Kirschner fixation nails. The migration of this osteosynthesis nails have disastrous consequences when large vessels and mediastinum are compromised. Until 2015, 102 cases of nail migrations to various structures of the mediastinum had been reported. 11 died of severe cardiovascular complications. Of all the cases, 15 patients presented aortic perforation, some with cardiac tamponade that caused the death of 4 of them. The cases with a good outcome were resolved by removing the nail from the aorta and suturing the area of the perforation with U-stitches reinforced with felt.

We present a case of a 66 years old man with intra-aortic migration of a Steinmann wire for the treatment of a right shoulder dislocation that, due to the impossibility of placing a suture, was only resolved with digital compression after nail removal.

We approached the patient by right lateral thoracotomy and we observed the nail in the thoracic cavity, without lung lesions, with the distal end perforating the descending aorta in front of the vertebra, behind the esophagus and at the level of the carina. In view of the inaccessibility of the perforation site for a purse-type suture or U-suture with patch support prior to nail extraction, the nail was removed and digital pressure was immediately applied. We pressed for 20 minutes with the fingers bleeding only 200 cc. The patient presented a favorable evolution with minimal postoperative bleeding. After a year, the CT scan revealed a normal aortic silhouette.

Keywords: Steinmann wire; CT scan; Traumatic injuries

Biography

Jesus J. Custodio López, Surgeon of the Department of Thoracic and Cardiovascular Surgery of National Hospital Almanzor Aguinaga Asenjo/ESSALUD, Chiclayo, Peru

Graduated in Medicine from Universidad Nacional de Trujillo (1982), Postgraduate in Thoracic and Cardiovascular Surgery from Universidad Nacional Mayor de San Marcos (1989).

Training in Cardiac Surgery in Wayne State University (Harper Hospital, Detroit USA 1993) and in Yokohama's City University School of Medicine, Japan (2000).

Professor of School of Medicine at Catholic University Santo Toribio de Mogrovejo, Chiclayo-Peru.

Member of Peruvian Society of Cardiothoracic and Vascular Surgery and Peruvian Society of Cardiology.

Advancing Minimally Invasive Spinal Surgery: A Decade of Optimizing Approaches with Ultrasonic Bone Milling

Alessandro Rustia

Head of Spinal Surgery Pyramide clinic in Zurich, Switzerland

Abstract

The author discusses the optimization of minimally invasive microsurgical techniques using an ultrasonic bone drill in spinal surgery. This technique has been successfully used to create a bone window in various approaches, including simple lumbar disc herniation and more complex surgeries such as anterior vertebral body resection and posterior spinal laminotomies. The use of the ultrasonic bone drill reduces surgical time by approximately 50% compared to traditional electric or pneumatic drills. The author emphasizes the importance of optimizing this technique to reduce complications such as cerebrospinal fluid fistulas and sensory-motor damage. The ultrasound bone drill has been used in surgery for over two decades, with an increasing utilization in the past ten years.

The technique offers several advantages, including reduced surgical time, minimally invasive approaches, reduced blood loss, smaller surgical incisions, and a lower risk of complications such as nerve damage. Additionally, the technology allows for the preservation of autologous bone, which can be used for bone fusion between vertebral segments using the patient's own bone instead of being dispersed in the cooling and washing liquid of the traditional bone drill.

However, it is important to note that the manual technique of using this instrument is quite different from the traditional bone drill used in neurosurgery and spinal surgery. Therefore, an adequate learning curve must be acquired before utilizing it in clinical practice in specialized centers dedicated to this technique.

Overall, the use of the ultrasonic bone drill in spinal surgery presents numerous advantages, but proper training and education are crucial for achieving optimal results.

Keywords: Spinal Surgery; Ultrasonic Bone Milling

Biography

I am honored to serve as the Head of Spinal Surgery at the Pyramide clinic in Zurich, Switzerland. In this role, I lead a highly skilled team and provide specialized care to patients with spinal conditions. My focus on spinal pathologies allows me to combine my expertise in neurosurgery with a dedication to advancing spinal surgical techniques and improving patient outcomes.

My journey in medicine began at the Military Academy for Physicians (Neasmi) while concurrently pursuing my studies at the University of Florence from 1987 to 1993. This dual commitment laid the foundation for my future as a Medical Captain in the Italian Army.

To specialize further in my field, I pursued a Neurosurgery specialization at the University of Verona under the esteemed guidance of Prof. Albino Bricolo from 1993 to 1998. During this period, I honed my skills in neurosurgical techniques and gained invaluable experience in complex surgical procedures.

Throughout my career, I have held various key positions. I have served as an Executive Doctor at Azienda Ospedaliera S. Giovanni-Addolorata, a high-specialization hospital in Rome. I have also been the Chief of the Neurosurgical Section at Klinikum Altmühelfranken Gunzenhausen in Gunzenhausen, Germany, and later the Chief of the Neurosurgery Department at Klinikum Ansbach in Ansbach, Germany. These leadership roles have allowed me to enhance patient care, collaborate with esteemed colleagues, and contribute to the advancement of neurosurgical practices.

Education has always been a priority for me, and I have had the privilege of serving as a Professor of Neurosurgery at the University "La Sapienza" in Rome. This role has given me the opportunity to share my knowledge and shape the minds of future healthcare professionals.

In recognition of my contributions and achievements, I have been appointed Cavaliere of the Order of Merit of the Italian Republic. I am also a member of the Order of Physicians and Surgeons of Rome, Italy, and the Order of Physicians and Surgeons of München, Germany, where I actively contribute to the medical community.

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Additionally, I have received accreditation from the Swiss Federal Commission, allowing me to make valuable contributions to medical practices and patient care in Switzerland.

Throughout my journey, I have strived for excellence in the field of neurosurgery, continually seeking opportunities for growth, learning, and collaboration. I am dedicated to delivering optimal outcomes for my patients and advancing the field through research, education, and professional affiliations.

In summary, my diverse experiences, leadership roles, and ongoing commitment to professional development have shaped me into the well-rounded and compassionate neurosurgeon I am today.

Noise-Induced Hearing Loss in Workers in the Southern of Brazil

Yasmim Brustolin Lobo Rodrigues

University of the Itajai Valley, Brazil

Abstract

Many traumatic injuries to the shoulder girdle have to be fixed and stabilized with Steinmann and Kirschner fixation nails. The migration of this osteosynthesis nails have disastrous consequences when large vessels and mediastinum are compromised. Until 2015, 102 cases of nail migrations to various structures of the mediastinum had been reported. 11 died of severe cardiovascular complications. Of all the cases, 15 patients presented aortic perforation, some with cardiac tamponade that caused the death of 4 of them. The cases with a good outcome were resolved by removing the nail from the aorta and suturing the area of the perforation with U-stitches reinforced with felt.

We present a case of a 66 years old man with intra-aortic migration of a Steinmann wire for the treatment of a right shoulder dislocation that, due to the impossibility of placing a suture, was only resolved with digital compression after nail removal.

We approached the patient by right lateral thoracotomy and we observed the nail in the thoracic cavity, without lung lesions, with the distal end perforating the descending aorta in front of the vertebra, behind the esophagus and at the level of the carina. In view of the inaccessibility of the perforation site for a purse-type suture or U-suture with patch support prior to nail extraction, the nail was removed and digital pressure was immediately applied. We pressed for 20 minutes with the fingers bleeding only 200 cc. The patient presented a favorable evolution with minimal postoperative bleeding. After a year, the CT scan revealed a normal aortic silhouette.

Keywords: Steinmann wire; CT scan; Traumatic injuries

Biography

Yasmim Brustolin Lobo Rodrigues, Graduated in Medicine from UNIVALI – University of the Itajai Valley, Brazil.

Preoperative Inflammatory Markers as Prognostic Predictors after Hepatocellular Carcinoma Resection: Data from a Western Referral Center

João Paulo Maciel Silva

Gastroenterological sciences and liver surgery division for the Medicine School of the University of São Paulo, Brazil

Abstract

Background: Recent studies from eastern centers have demonstrate an association between inflammatory response and long-term outcomes after hepatocellular carcinoma (HCC) resection. However, the prognostic impact of inflammatory markers in western patients, with distinct tumor and epidemiologic features, is still unknown.

Aim: To evaluate the prognostic impact of preoperative neutrophil-to-lymphocyte ratio (NLR), platelet-to-lymphocyte ratio (PLR), and monocyte-to-lymphocyte ratio (MLR), as well as their impact according to tumor size (< 5 cm, 5–10 cm, > 10 cm) in patients undergoing HCC resection with curative intent.

Methods: Optimal cut-off values for NLR, PLR, and MLR were determined by plotting the receiver operator curves. Overall survival (OS) and disease-free survival (DFS) curves were calculated using the Kaplan–Meier method and compared using the log-rank test. The Cox method was used to identify independent predictors of OS and DFS.

Results: In total, 161 consecutive adult patients were included. A high NLR (> 1.715) was associated with worse OS ($P = 0.018$). High NLR (> 2.475 ; $P = 0.047$) and PLR (> 100.25 ; $P = 0.028$) were predictors of short DFS. In HCC < 5 cm, MLR (> 1.715) was associated with worse OS ($P = 0.047$). In the multivariate analysis, high PLR was an independent predictor of worse DFS [hazard ratio (HR) 3.029; 95%CI 1.499–6.121; $P = 0.002$].

Conclusion: Inflammatory markers are useful tools to predict long-term outcomes after liver resection in western patients, high NLR was able to stratify subgroups of patients with short OS and DFS, an increased PLR was an independent predictor of short DFS, while high MLR was associated with short OS in patients with early HCC.

Keywords: Hepatocellular Carcinoma Resection; Tumor and epidemiologic features

Biography

João Paulo Maciel Silva, PhD in gastroenterological sciences for the Medicine School of the University of Sao Paulo – Sao Paulo, Brazil.

Digestive Surgeon at Hospital das Clinicas Liver Surgery and Portal Hypertension Unity – Sao Paulo, Brazil.

Medicine Doctor for the Medicine School of the Federal University of Bahia – Bahia, Brazil.

T cell responses to SARS-CoV-2

Laiqha Khadri

Department of Biotechnology, Immune Inspired, Bangalore, India

Abstract

This chapter provides a comprehensive analysis of T cell responses in COVID-19, focusing on T cell differentiation, specificity, and functional characteristics during SARS-CoV-2 infection. The differentiation of T cells in COVID-19 is explored, highlighting the key factors that influence T cell fate and effector functions. The immunology of the spike protein, a critical component of SARS-CoV-2, is discussed in detail, emphasizing its role in driving T-cell responses. The cellular immune responses against SARS-CoV-2 during acute infection are examined, including the specificity, phenotype, and functional attributes of SARS-CoV-2-specific T-cell responses. Furthermore, the chapter explores T-cell cross-recognition against other human coronaviruses (HCoVs) and the mechanisms of immune regulation mediated by spike proteins. This includes the induction of regulation through the innate immune system, the activation of self-spike protein-cross-reactive regulatory T cells, and the impact of self-tolerance on the regulation of spike proteins. The chapter investigates T cell responses to self-spike proteins and their implications in disease. The role of spike proteins as immunological targets in the context of COVID-19 is examined, shedding light on potential therapeutic interventions and clinical trials in autoimmune diseases. In conclusion, this chapter provides a comprehensive understanding of T cell responses in COVID-19, highlighting their differentiation, immune regulation, and clinical implications. This knowledge contributes to the development of targeted immunotherapies, vaccine strategies, and diagnostic approaches for COVID-19 and other related diseases.

Keywords: Cell mediated immunity; Cellular immune responses; Cross reactive T cells; T cell immunity; T cell responses

Biography

Laiqha has been in biotechnology for almost two decades. She studied at Periyar University, Bangalore University and received her PhD in Biotechnology from Indira Gandhi University. Both in her studies, and in her teaching role as an assistant professor in India there has been a tremendous focus on every aspect of the cell. She has a strong background in cell and molecular biology, Immunology, Microbiology, Genetic Engineering Medical, Animal and plant biotechnology, Developmental and evolutionary biology, and very relevant for current realities, she has also studied bioethics. After 8 years as an assistant professor, she began a career as a Senior Research scientist and was involved in clinical trials related to diabetes and cancer. In 2019, she shifted her focus as she found her clinical practice "Immune Inspired". Her tele consults with diabetes, hypertension and cancer patients to help them pre and post chemotherapy, and with related side effects primarily through diet and natural interventions including supplements.

Does Halftime Score Predict Outcome? Imaging Predictors of Immunotherapy (IT) Effect in Recurrent Melanoma

Milos Janicek

Clinical Professor of Radiology, Boston University Medical Center, USA

Abstract

Object or Purpose of Study: Splitting our cohort of patients at Median Survival into “SHORT” and “LONG” highlights some shared features that define our RISK GROUPS. These may predict effectiveness and duration of response to IT measured by OS after initiation of Immunotherapy (OSpT) in recurrent Melanoma failing original curative attempt (OCA) utilizing New Baseline Imaging Characteristics and iRECIST-derived score (iRs) change on 2 sequential Early Restaging Scans (eSRS) and concordance/discordance of response.

Materials, Methods, and Procedures: A 38 patients (23 male, 15 female, age 36-95) with stage 4 Melanoma at IT start. Up to 5 lesions evaluated using iRECIST criteria for interval change. Score assigned based on favorable survival predictors at new baseline for Male, Oligometastatic, No Liver mets, Long FFF from OCA (median FFF = 341d) 1 point for each or -1 point for absence of such feature. It was compared with added value of eSRS at 4 and 7.6 month after IT start. Baseline iRs was compared to TWO eSRS for change at +/-10% categorized as P-P, S-x, R-x, P-R (P=progression, R=regression, S=stable, x=any) with point values -2, -1, 1, 2 respectively. Observation of discordant response was recorded, scored -1 point, concordant response 1 point. Cumulative scores were recorded at baseline and at 2nd restaging (with additional benefit of eSRS) and compared for BAD= \leq -2, MEDIUM -1to1, GOOD= \geq 2. Kaplan-Meier, K-statistics for the groups were utilized at $P < 0.05$ for SIGNIFICANT (SIGN).

Results: Using MEDIAN OSpT of 464 days, "Long OSpT" (>464 days) was associated with above listed "favorable characteristic" at the New Baseline, yet, cumulative score did NOT separate prognostic groups significantly. Adding sequential imaging derived score at 2nd restaging scans, we observed a good separation of 3 prognostic groups: Using cumulative score of \leq -2, -1to1, \geq 2, MEAN OSpT was 264d, 546d, 1206d, with SIGN separation at $P=.026$, $P=.0004$ and $P=.09$ respectively). Evaluating eSRS response curves separately, "pseudo progression" was associated with the best OSpT, lack of response (S-x) was unfavorable and similar to P-P on two sequential scans. Discordant response on eSRS was also associated with significantly shorter OSpT, all these SIGN at $P < 0.05$.

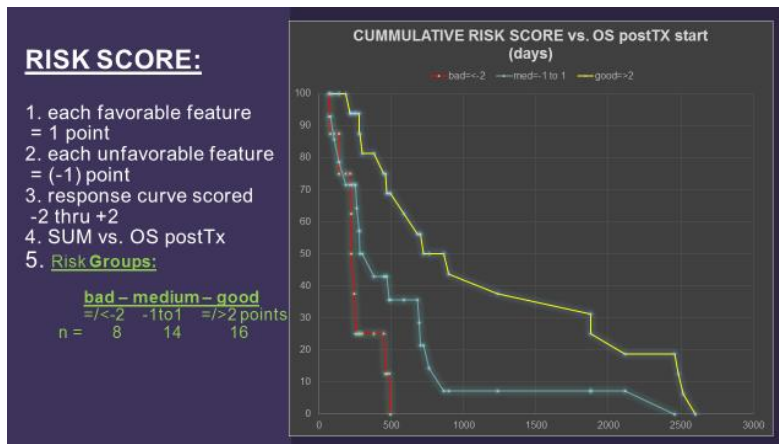
Significance: New challenges of IT are reshaping traditional staging concepts. Each disease entity may have very specific imaging needs and presentations in spite of unifying features of IT dynamics. Significant benefit of IT in responders group is weighted against significant toxicity and separation of these groups is essential. There is equal proportion of patients who could benefit from shorter course of therapy and some may need maintenance IT. Therefore, separation of these subgroups is of utmost clinical importance and imaging plays an essential role. Our study Validated role of sequential imaging in addition to base line staging at the time of OCA failure which alone did NOT separate favorable and unfavorable prognostic groups with respect to OSpT. There was a Significant value of eSRS categorizing response curves separating poor prognostic group from medium and favorable ones at $P < 0.01$, independent from all other baseline characteristics and demography.

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Biography

Milos Janicek, Department of Radiology, Boston University Medical Center 820 Harrison Avenue, USA

1999 MD Palacky University Medical School, Olomouc, Czech Republic

2002 PhD Purkinje University, Brno, Czech Republic (Radiology)

2005 MHCM Harvard School of Public Health, Boston, MA

1988-1990 Chief Resident and Clinical Fellow, Joint Program in Nuclear Medicine, Harvard Medical School, Boston, MA

1990-1992 Clinical Fellow, Onco-diagnostic Radiology, Brigham and Women's Hospital & Dana Farber Cancer Institute, Harvard Medical School, Boston, MA – (combined with Resident in diagnostic radiology in 1992-95)

1992-1995 Resident, Diagnostic Radiology, Brigham & Women's Hospital, Harvard Medical School, Boston, MA

1991-1996 Clinical Instructor in Radiology, Harvard Medical School, Boston, MA

1996-2005 Assistant Professor of Radiology, Harvard Medical School, Boston, MA

2005-present Associate Professor of Radiology, Boston University Medical School, Boston, MA

1990-2003 Radiologist, Department of Radiology, Division of Onco-Radiology & Oncologic Nuclear Medicine Service, Brigham and Women's Hospital & Dana Farber Cancer Institute, Boston, MA

2005-present Radiologist, Chief of Onco-Radiology, Department of Radiology, Boston Medical Center, Boston, MA

2013-present Radiologist, staff, VAHS, West Roxbury, MA.

Analysis of the Effectiveness of Complex Rehabilitation of Patients with Skin Melanoma after Combined Treatment

Anastasia Mochalova and Igor Semeniakin

Clinic of "MEDSI", Russia

Abstract

Introduction: Despite the wide range of complications associated with the use of antitumor therapy, patients often do not receive preventive treatment necessary to correct the consequences for the body.

The purpose of the study: Analysis of the effectiveness of complex rehabilitation programs in patients with skin melanoma after combined treatment.

Materials and methods: The study included 90 patients with metastatic melanoma of the skin with a history of surgical treatment for the underlying disease; who received immunotherapy with nivolumab or pembrolizumab during the study period. The main group (n=48) included patients who underwent a comprehensive rehabilitation program. Patients who did not complete the rehabilitation program formed a control group (n=42). The effectiveness of immunotherapy was evaluated in accordance with the iRECIST 1.1 criteria.

Results: Stabilization was registered in 17 (35.4%) patients of the main group and in 16 (38.1%) patients of the control group; the incidence of disease progression in both groups was comparable: 9 (18.8%) cases in the main group and 10 (23.8%) cases in the control group.

Conclusion: The use of complex rehabilitation programs in the treatment of patients with melanoma demonstrates its clinical effectiveness, however, there are a number of important issues that require further resolution.

Keywords: Steinmann wire; CT scan; Traumatic injuries

Biography

Dr. Anastasia Mochalova, PhD, Head of Department of antitumor drug therapy at Group of companies "MEDSI", oncologist and chemotherapist, member of Russian Society of Clinical Oncology (RUSSCO), Russian Association of Oncology Mammalogy (RAOM), European Society of Medical Oncology (ESMO). Doctor Mochalova is specialized in chemotherapy, hormone treatment, targeted therapy, bio- and immunotherapy of all kinds of malignancies of any location.

She has extensive experience in conducting international (more than 40) and local clinical trials as Lead investigator and has more than 100 scientific publications in various Russian and international periodicals.

Dr. Mochalova is always helping people with bringing new opportunities to patients and helps them to improve the quality of their lives.

She is a team player and leads by example with taking responsibility and dedication. She empowers people to work as one, to take ownership and always motivates her team to hit their highest.

Outside her work and career, Anastasia is a beloved mother of the young ice skater and has a personal interest in fitness as a lifestyle.

Dr. Mochalova is a great example of a person who is constantly learning and developing herself throughout life. She believes if you are not doing so you are not living.

Prof. Igor Semeniakin, MD, PhD, MBA, professor of surgical sciences, member of the Executive Board and Medical Director at Group of companies "MEDSI", urologist and surgeon, member of Russian Society of Urology (RSU), Russian Society of Surgeons, European Association of Urology (EAU).

Professor Semeniakin was the 1st surgeon in Russia who performed robot-assisted renal transplantation and cardiac tumor resection.

In 2019 Professor Semeniakin won the Moscow state science award in medicine.

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In 2022 he was awarded a letter of appreciation from the Minister of Health for his contribution in robotic surgery development in Russia.

He specializes in endourology, abdominal surgery, robot-assisted surgical operations, surgical treatment of urological emergencies, and reconstructive surgery of the urinary tract.

Professor Semeniakin has more than 130 scientific publications in various Russian and international periodicals, 6 patents of invention, co-author of 2 textbooks and 3 monographies.

He is a charismatic leader and inspires his team by example. He is very energetic and has a strong commitment to continuous improvement personally and to the development of his team. Professor Semeniakin is a great example of the leader who adapts his leadership style as he sees fit. He always encourages his team members to take initiative and outperform wherever possible to achieve the goals.

Outside his work and career, he leads a healthy life and is nuts about motor-cycles.

Pediatric Patients and Medical Cannabis: New Trends

Sandra Caires Serrano¹, Fabiana Gomes de Campos², Valesca Oliveira Paes Tanaka³

¹Albert Einstein Israelite Hospital, Professor of the Postgraduate Course in Pain and Palliative Care in Pediatrics; Santa Marcelina Health Center, Teaching Assistant in the Pediatric Emergency Department, São Paulo, SP, Brazil

²AC Camargo Cancer Center, Senior Physician in the Department of Palliative Care, São Paulo, SP, Brazil

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Abstract

Background and Objectives: Despite the ancestral use of cannabinoids in adults, safety and efficacy in children is unclear. The impact of cannabis on the developing brain is unknown. While studies conducted in adults can provide insight into the efficacy/toxicity profile of cannabis, there is a need for specific studies in children and adolescents to understand the impact of cannabis on the developing brain, as well as the potential long-term effects of cannabis use. The objective of this study was to bring a comprehensive view and critical discussion on the subject.

Contents: A narrative review based on research in the Pubmed, Medline and Scielo databases was prepared, with an open theme and a selective literature review in the context of the pediatric population.

The discussion on the use of cannabinoids in the pediatric population is faced with the need for robust studies on safety and efficacy. As cannabis is increasingly legalized around the world, there is growing and urgent demand for its use by parents of children and adolescents with serious illnesses. Recent preclinical evidence supports their efficacy and safety in adult brain tumors, with some indications that cannabinoids may interact synergistically with selected chemotherapies – although this has not yet been demonstrated clinically. Despite promising reports, data showing the potential benefit of cannabinoids for pediatric cancer patients are preliminary.

Highlights

- The impact of cannabis on the developing brain is unknown.
- The role of the endocannabinoid system in mediating neural and cognitive function is not restricted to gestation or early childhood.
- There is a need for robust studies on safety and efficacy in the pediatric population.

Conclusion: Current research on the impact of medical cannabis use in children and adolescents remains limited, which reinforces the need for robust studies in this population.

Keywords: Cancer, Medical cannabis, Pediatrics

Biography

Sandra Caires Serrano, Graduated in Medicine at the Pontifical Catholic University of Campinas (1994 - Brazil), with a Medical Residency in Pediatrics at Casa de Saúde Santa Marcelina (1997), and later in Child Neurology (Faculty of Medicine at the University of São Paulo – FMUSP, 2000), Specialization in Pain and Stereotactics (ACCamargo Cancer Center – São Paulo, 2001); training in Palliative Care – Pallium América Latina, Universidade Del Salvador (2008) and Oxford International Center for Palliative Care (2008).

Founding Member of the National Academy of Palliative Care (ANCP-Brazil).

Working at Hospital AC Camargo from 2001 to 2022, in the Department of Pain and Functional Neurosurgery, she founded and headed the Palliative Care Service (Adult and Child); also serving on the Ethics and Research Committee on Human Beings.

Master in Oncology Sciences from the Antônio Prudente Foundation – ACCamargo, Brazil.

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Areas of Activity in Palliative Care and Pain by the Brazilian Medical Association (AMB).

Training in Endocannabinoid Medicine (2022) – WECANN, Brazil.

Active in the Brazilian Society for the Study of Pain (SBED), member of the Supervisory Board, member of the Pediatric Pain and Cannabis Committees, and Coordinator of the SBED Palliative Care Committee (2024-2026). Reviewer of the Brazilian Journal of Pain.

Co-Editor of the Pain Treatise of the Brazilian Society for the Study of Pain (SBED).

Member of the Scientific Department of Neuropalliative Care in Childhood and Adolescence of the Brazilian Society of Child Neurology (SBNI).

Professor of the Postgraduate Course in Pain and Palliative Care in Pediatrics, Instituto Israelita de Ensino e Pesquisa Albert Einstein (IIEPAE).

Pediatric Emergency Teaching Assistant at the Children's Emergency Room at Casa de Saúde Santa Marcelina, since 1997.

Professor at Hospice Lo Thedal, involved in Assistance, Teaching and Research in Pain and Palliative Care.

Topics of interest: Pain Clinic, Symptom Control, Palliative Care, Child Neurology, Oncology, Pediatrics, Rare Diseases, Opioids, Analgesia, Clinical Research, Bioethics, and Research Ethics..

Management of the Open Abdomen: A Systematic Review with Meta-Analysis and Practice Management Guidelines from the Eastern Association for the Surgery of Trauma

Eric J Mahoney

Trauma Medical Director, Lahey Hospital and Medical Center, USA

Abstract

Advances in trauma care have led to improved patient survival after catastrophic injury or abdominal sepsis. These procedure may leave the patient with a recalcitrant abdomen that is difficult to close primarily multiple techniques that have been described to manage an open abdomen after the damage control laparotomy. Unfortunately, it is unclear which technique provides the best method of providing primary myofascial closure and abdominal wall integrity at the index hospitalization. The Eastern Association for the Surgery of Trauma commissioned a working group to review the literature and identify techniques that may be superior. Utilizing GRADE criteria, critically relevant outcomes, an extensive review of the literature and metaanalyses, the working group was able to recommend fascial-traction systems as the best technique available for primary myofascial closure after damage control laparotomy. We will present our research and discuss how our findings may impact patient care.

Keywords: Open Abdomen; GRADE criteria; Trauma

Biography

Eric J. Mahoney, MD, FACS is the Trauma Medical Director, interim, at Lahey Hospital and Medical Center. Originally from Boston, MA, he attended Boston College and Temple University School of Medicine. He completed his residency in Surgery and fellowships in both Surgical Research and Surgical Critical Care at Rhode Island Hospital/Brown University in Providence, Rhode Island, USA. Dr. Mahoney is Board-Certified in both General Surgery and Surgical Critical Care.

The majority of Dr. Mahoney's career has been working in high-acuity Trauma Centers, including Boston Medical Center, Tufts Medical Center, and Lahey Hospital and Medical Center. This work has given him extensive experience in caring for traumatic injured patients, mass casualty and disaster management, and critical care. His clinical research interests include improving trauma systems, complex abdominal reconstruction, and improving the long-term care of ICU survivors.

The Hidden Influence of Internet/AI Learning: Exploring Neurophysiological Effects on Memory and Its Impact on Graduate Education for Nurse Administrators

Cynthia Plonien

Trauma Medical Director, Lahey Hospital and Medical Center, USA

Abstract

In an age of Quantum Learning, education has become a virtual learning experience for graduate students. The internet has brought an explosion of available information, literally at the fingertips of users. It has allowed students to shift from on-campus classrooms into on-line accelerated learning formats. Artificial Intelligence (AI) is now on the scene, revolutionizing health care as well as education for nurse leaders and nurse administrators. AI-powered tools can analyze medical images detecting subtle abnormalities missed by human eyes. AI can personalize and tailor patient treatment plans through the evaluation of multi-source data. Wearable, ingestible, and implantable medical devices can monitor a patient's health metrics, track conditions, triage, and recommend interventions. AI can perform remote surgery through robotics. In addition, machine learning provides an opportunity for AI to generate thought and mimic human cognitive processing.

The purpose of this presentation is to examine the neurophysiological effects on the brain, that occur learning via the Internet and AI related to memory. Of specific interest is the threat to critical thought, foundational to nursing leadership and administration. Critical thinking plays a crucial role in decision-making, problem-solving, communication, innovation, and creativity. Discussed are adaptive learning strategies utilized in an MSN Nursing Administration program supporting a biologic balance in retaining and retrieving information while learning via the Internet, as well as new challenges arising in teaching graduate students amid the academic presence of AI.

Biography

Dr. Cynthia Plonien is an Associate Professor and the Director of the Doctor of Nursing Practice Program at the University of Texas at Arlington. Previously, she served as the Director of the MSN Nursing Administration Program. Prior to her role in academia she served nursing as a nurse executive in Texas Hospitals and Accountable Care Organizations. Dr. Plonien received her doctoral degree from Texas Christian University and holds a master's in nursing administration and nursing Education from UTA. Presentations and publications address topics related to Leadership, Management, Quality, Health Information Technology, Teaching and Learning.

Embracing Family Engagement in the Neonatal ICU through an Environmental Design Perspective: The role of Single-Family Rooms

Herminia Machry

Trauma Medical Director, Lahey Hospital and Medical Center, USA

Abstract

Family engagement has become an important goal in the design of neonatal intensive care units (NICUs), given parents' critical contributions to infant development. This session will provide an in-depth look at the single-family room (SFR) design model as the current trend in NICU design, looking at how it is impacting family engagement behaviors, especially during cluster care. An architect and researcher experienced in evidence-based design in healthcare settings will share results from case studies investigating the impact of SFR design on behaviors related to family presence, care, information exchanges, and caregiving. Research findings from interviews and field observations will show how design features such as private bathrooms, family storage, family zone partitions, positive distractions and information boards can support the family engagement experience in the NICU, impacting home-like, educational, collaborative, and infant care behaviors in these settings. This session ultimately informs future NICU design by providing more evidence to support and refine the SFR design model while it is incorporated into new projects and renovations of outdated units.

Biography

Herminia Machry, PhD, is an internationally-licensed architect with a Master's in Architecture from USP (Brazil) and a PhD in Planning, Design and the Built Environment from Clemson University. She also completed Postdoctoral training at the Georgia Institute of Technology (SimTigrate Design Lab) and was awarded the 2018-2019 AIA-AAH Tuttle fellowship in Health Facility Planning and Design. Her experience spans work in architecture firms, universities, and research centers. In the past 18 years, she worked as a design practitioner on several healthcare facility projects; as an adjunct professor at three universities; and as a researcher specialized on healthcare and evidence-based design studies. Her research mainly focuses on improving design for safety, engagement, and cognition outcomes within healthcare environments. More specifically, her studies are aimed at understanding how the layout and interior design of settings such as ICUs and operating rooms can impact flow disruptions, risky behaviors, social interactions, environmental mastery, and ergonomics. Herminia's most valuable contributions to evidence-based design and healthcare design have been related to the design of operating rooms, Neonatal ICUs (NICUs), and, more recently, the design of doffing spaces at ICUs treating COVID-19 patients. Since Fall 2022, Herminia has been working as a tenure-track Assistant Professor at the University of Kansas, in the Interior Architecture program, where she continues her research and educational practices on human-centered and evidence-based design.



Success Strategies for the HESI Exit Exam

Faye Fairchild

Nightingale College/Nightingale Education Group, Salt Lake City, USA

Abstract

Introduction: Success strategies involving one-on-one coaching for the Exit HESI exam can reduce nurse learner attrition, anxiety, improve NCLEX pass rates, and ultimately decrease the nursing shortage. This retroactive data review aims to isolate the specific strategies that assisted at-risk nursing learners at Nightingale College to score an 800 or above on the HESI Exit Exam.

Methods: Successful participation in this program of HESI coaching was defined as meeting three times (30 minutes each) with a coach and completing related assignments. During the first meeting the following was achieved: how to use previous HESI reports to focus on learner weak areas, review of all available resources and how to access these resources. The second meeting the learner was taught a 4-step approach to question analysis and was then provided time to practice this 4-step question approach with the coach assisting. The third meeting the learner continued practicing this 4-step question approach, with the coach offering suggestions after each question was completed.

Results: Of the learners ($n = 21$) who completed all requirements of this program of coaching, 81% (21/26) successfully passed the HESI. In addition, these same learners ($n = 21$) increased their average score on the Exit HESI by 187 points from their lowest of the last two scores of any recent HESI taken.

Conclusions/Discussion: Results from this retroactive data review point to improved scores on the Exit HESI exam for those learners who follow-through and complete the HESI Success Coaching as prescribed in its entirety.

Biography

Faye Fairchild, Nightingale College/Nightingale Education Group, Salt Lake City, USA

Education:

DNP – Leadership & Healthcare Innovations, University of Missouri – Columbia, 2019.

MSN - Nursing Administration and Education, University of Missouri-Columbia, 1989.

BSN - University of Missouri-Columbia, 1985.

Professional Experience:

RN for 38 years. 20 years worked in acute/critical care. The last 18 years in academia. Currently an NCLEX Coach at Nightingale College, Salt Lake City, UT.

Training or Expertise Related to Educational Activity:

2019: Researched how remediation and other student success strategies affected the at-risk student enrolled in Pharmacology.
2023: Currently researching at-risk learners preparing to take the Exit HESI and the strategies employed to assist them in preparation.



Oral Health Status and Quality of Life for the Elderly in Veteran's Home

Yi-Chin Tang

Taipei City Hospital, Taipei City, Taiwan

Abstract

Purpose: This study was to explore the relationship among oral care, health status and quality of life in institutionalized elderly people under veteran's home.

Methods: In Taichung area, we randomly selected two veteran's home. The information was collected by systematic questionnaire and oral health examination. There were a total of 250 subjects examined.

Result: (1) From those subjects screened for oral health (250), the DMFT index was 21.19 ± 6.15 . The decayed index (D index) was 3.45 ± 2.55 . The missing index (M index) was 13.71 ± 11.29 . The filling index (F index) was 4.15 ± 5.12 . The filling rate was 15.87 ± 26.46 %. The prevalence rate of periodontal disease was 95.5% , caries rate was 93.6%. The subjects with more than 20 teeth was 30.5%. (2) The oral health was significantly worse in the less educated and the elder subjects. (3) Residents losing the activities of daily life had higher percentage of periodontal disease and vice versa. (4) Those residents who could take care their oral hygiene independently had significantly better oral health than those residents who took care their oral hygiene dependently. (5) The mouth care were significantly positively correlated with oral function, general health status, and quality of life.

Conclusion: In order to promote oral health for the institutionalized residents, the care givers and dental professionals' cooperation are necessary.

Biography

I majored in elderly and community nursing with a master's degree. I serve as the team leader of the nurse practitioner team in the Department of Internal Medicine.

Determination of the Nutritional Status and Its Relationship with Albumin in the Older Adults of Tlaxcala

Alexis Hernandez Pozos and Elia Carmen Zayas Serrano

Center for Higher Studies of Tepeaca (CEST), Puebla, Mexico

Abstract

Introduction: Nutritional status is related to aging.

Objective: To determine the relationship between albumin levels and nutritional status in older adults from Tlaxcala.

Material and method: Cross-sectional study, in 31 people aged 60 to 65 years; 22.5% men and 77.5% women, albumin and BMI were determined, using the Mini Nutritional Assessment (MNA) instrument.

Results: A 74.20% had low albumin levels, 58.1% were overweight/obese, 9.7% were malnourished, and 67.7% were at risk of malnutrition due to MNA.

Conclusions: At a general level, malnutrition prevailed, albumin values correlate with the different methods of anthropometric measurement of nutritional status.

Biography

Elia Carmen Zayas Serrano

My name is Elia Carmen Zayas Serrano, I'm from San Simon Coatepec Mixtla Puebla Mexico. I have a degree in Clinical Nutrition and a Master in Educational Management and Professional Skills. I am constantly updated on topics of health and education. I am currently teaching in university in the Degrees of medicine and Dentistry at the Center for Higher Studies of Tepeaca Puebla Mexico.

I am also part of the Bioethics committee and thesis advisor and I give courses, workshops and presentations on health and education, which has led me like co-author of research articles.

In my free times like extracurricular activities are: host on Kinsachata Peru radio, creator and editor of digital content and general director of the `regalodelcielo_mx_pe` project.

Alexis Hernandez Pozos

My name is Alexis Hernandez Pozos I'm a medical student, I'm from Cordoba Veracruz, I am currently in my second year at CEST in Puebla, I am a Histology laboratory instructor, we won second place in the Histology photography contest in November 2022 in the city of Coahuila at the XLI Mexican Congress and IX Iberoamerican Histology

The Role of a Clinical Skills Co-ordinator in a Pre-Registration Program

Jo Agnew

University of Auckland, New Zealand

Abstract

This presentation will discuss being appointed to the role of Clinical Skills Co-ordinator across the Undergraduate or Pre-registration program in the School of Nursing at the University of Auckland, New Zealand.

Jo is a Professional Teaching Fellow who had previously been the Director of the First-year nursing program. An on-line set of modules was developed to support and enhance the clinical skills program for Undergraduate / Pre-registration student nurses in their first year.

This three-pronged presentation will explain what the role involves, investigate the benefits and challenges of such a role.

Biography

Jo Agnew is a Registered nurse with a Master of Nursing [Hon] and Post Grad Dip Clinical Ed [Dist.] who is married with grown daughters and a beautiful granddaughter. Jo completed her RN training in Southland [bottom of the South Island of New Zealand]. Jo currently lives in Auckland, New Zealand and works at the University of Auckland as a Professional Teaching Fellow. Jo has worked in multiple areas of Nursing from Surgical/ Child health/perioperative care and in various positions from Staff nurse, Nurse Educator/ Charge Nurse/ Nurse Director over the last four decades. Jo is passionate about nursing and couldn't think of a better profession to be a part of!

Pedagogical Content Knowledge: A Professor's Practice in a Nursing Program

Leonardo Arias Cardona and Margarita María Gómez Gómez

University of Antioquia, Colombia

Abstract

Pedagogical Content Knowledge (PCK) is the disciplinary, didactic, and contextual knowledge which professors use to teach and make said knowledge understandable. Shulman described PCK as a special blend of subject matter and pedagogy; in other words, the knowledge professors use to transform content into representations that can be assimilated by students. Main objective: to understand the relationship between professor action and reflection in the construction of Pedagogical Content Knowledge (PCK). Methods: qualitative research from symbolic interactionism; simple case study, based on a semi-structured biographical-professional interview, observation and recording of a class and think-aloud interview. After reading the project and accepting the objectives, the participant signed the Informed Consent approved by the Bioethics Committee at the Universidad de Antioquia. Main results: the inductive analysis of the data generated the categories action and teaching reasoning. Main conclusion: professors associate PCK with the mechanisms through which they can interact with students and make the class sufficiently fun and meaningful for them to internalize it; the context in which it is taught -university, students, educational system- is central to PCK; PCK, guided by the professor's emotions, reflections and reconstructions, is characterized by its pedagogical reasoning around professional practice, and not only by having a large number of examples, analogies or representations of the subject matter. This knowledge is also affected by the professor's personality, thoughts, and actions; PCK is a particular construction of each professor to improve and strengthen his or her pedagogical practice.

Biography

I am from Manizales, Colombia. I studied nursing in Universidad de Caldas, where I got my degree: Bachelor of Science in Nursing (BSN). I worked as a bedside nurse in cardiovascular ICU for 6 years and then studied a specialization in cardiovascular nursing in Universidad Pontificia Bolivariana. I worked in Cath Lab for 5 years and finished a master's degree in higher education in health (Medical education) in Universidad de Antioquia, and master's degree of nursing in hemodynamics and interventional cardiology in Universidad Francisco de Victoria in Madrid. Currently I am a teacher in Universidad Pontificia Bolivariana in specialization in cardiovascular nursing and work as a Senior Clinical Specialist in Terumo Colombia Andina. I also homologated my degree in USA and got the license as a Registered Nurse by Montana Board of nursing. I am passionate by education and I try to motivate people on my field to move forward and share their knowledge and experience; that's why I belong to some scientific societies like SOLACI (Latin American Society of Interventional Cardiology) as a Director of the chapter of nurses, technicians, and medical technologists; AEEC (Spanish Association of Nurses in Cardiology), active member since 2018 Chapter of Hemodynamics and Cardiovascular Interventionism; and CCHICV (Colombian College of Cardiovascular Hemodynamics and Interventional Cardiology), Active member since 2020.

Innovations in Nursing at Hospital Israelita Albert Einstein Reflect the Challenges, Achievements, and Results Achieved with the Magnet Designation

Claudia Regina Laselva

CNO, Operations and Care Practices Director at Hospital Israelita Albert Einstein, São Paulo, Brasil

Abstract

In July 2022, Einstein Hospital was designated a Magnet institution by the American Nurses Credentialing Center (a first institution in Latin America), known as the best recognition for excellence in Nursing practices and strategies in the world. Part of this process occurred during the COVID19 pandemic, in which the excellence and the patient care were never left out. The objective of this session is to relate the experience during the whole Journey that took Hospital Israelita Albert Einstein (HIAE) to get the Magnet designation, the implementation report of the main actions in HIAE to achieve the required nursing excellence patterns, the process allowed the staff engagement, the standardization of best practices, the use of resources and the periodic evaluation to necessary changes.

Biography

Claudia Regina Laselva is a registered nurse and holds a master's degree in Nephrology - basic sciences from the Federal University of São Paulo, Brazil. She has an Executive MBA in Health Management from INSPER-, São Paulo, Brazil, with an international extension at TUFTS University, Boston-MA. Today, she is director of the Morumbi Hospital Unit, CNO and director of Care Practices at Sociedade Beneficente Israelita Brasileira Albert Einstein, in São Paulo - Brazil.

Senior Health, Better Analysis, Better Intervention, Better Outcomes

Michael Johnson

Aspire Clinical Intelligence LLC, United States

Biography

Michael Johnson, RN, is the Chief Operating Officer of Aspire Clinical Intelligence. Johnson is responsible for developing the Effective Health Record for the company and future commercialization in the healthcare industry. Before joining the Aspire team, Johnson was the Executive Vice President and Chief Nursing Officer for the Health Services division of Edgewood Healthcare. He has also served as the Regional Vice President/COO for the company and as Director of Nursing for Edgewood Vista in Brainerd, MN. Professionally, Johnson has dedicated much of his career to the senior living industry and acute care, logging over 30 years of clinical experience. Johnson was raised in Cando, ND, with his six siblings. He received his degree in nursing from the University of the State of New York and is currently obtaining his Master of Science degree from Maryville University. In his spare time, Johnson likes to relax at the lake, travel, and enjoy time with his three adult children and two grandchildren.

About Aspire Clinical Intelligence, LLC: Aspire Clinical Intelligence, LLC is a source code for improving senior population health. Aspire supports and drives actionable multidisciplinary healthcare decisions using substantiated clinical facts and standardized protocols. This platform combines historical and real-time health information obtained from direct clinical observation and robust application programming interfaces (API) with existing electronic health records, health-related application software, and wearable devices. The platform is a critical tool for managing the quality and cost of healthcare services and supports access to the right healthcare services at the right place and at the right time. The practical application of the DHR results in improved outcomes and reduced hospital visits and readmissions. A broader application provides valuable information for big data applications and predictive medicine.

Giant Liver Cyst in a Newborn with Pseudoprune-Belly Syndrome - A Case Report

Michelle Patrocínio

Faculty of Medicine of Valença, Rio de Janeiro, Brazil

Abstract

Introduction: Pseudoprune-belly syndrome is a rare anomaly, an incomplete form of Prune-belly syndrome. The etiology is not clear, and though this syndrome may present associated with other malformations, the association with a liver cyst is extremely rare.

Case presentation: We report the case of a male newborn who was referred to our hospital with an antenatal ultrasound that suggested a gastric duplication. Clinical examination revealed lax abdominal wall, unilateral undescended testis and a palpable mass on the right upper quadrant with fuzzy boundaries. On laparotomy we found a giant hepatic cyst displacing the bowel to the left. The baby underwent a partial resection and marsupialization of the cyst as total resection was infeasible. The patient's recovery was uneventful.

Conclusion: Although rarely, the Pseudoprune-belly syndrome can present with a liver cyst. Large liver cysts should be partially or totally resected as soon as possible.

Biography

Michelle dos Santos Patrocínio received her medical degree from the Faculdade de Medicina de Valença, Rio de Janeiro. She completed a residency in General Surgical at Hospital Municipal Lourenço Jorge, and completed a specialization in Pediatric Surgery at the Hospital Federal Servidores do Estado, also in Rio de Janeiro. She spent the last 19 years as Pediatric Surgery with an interest in area of digestive tract, coloproctology and newborn surgery at the Hospital Estadual da Criança, Copa D'or Hospital, Jutta Batista Hospital, Quinta D'or Hospital. She is part of a medical group called Kelly's Together, specialist of bladder exstrophy surgery, a rare pathology.

Evaluation of the Presence of Drugs in Sewage Treatment Station Sludge Before and After the Bioremediation Process by Composting

Suzet Maria Lenzi Caminada

Faculdade de Saúde Pública, Universidade de São Paulo, Brasil

Abstract

The presence of residual drugs in the environment is a growing global issue, with many studies seeking to quantify it. However, its behavior and effects, both on the environment and on humans are still mostly unknown. In this study, seven drugs were evaluated: Atenolol, Carbamazepine, Clonazepam, Ibuprofen, Paracetamol, Simvastatin, and Fluoxetine, from samples of sludge from a sewage treatment plant of the public system. The extraction of the compounds from the matrix was based on the leaching of the compounds in water and the analytical quantification was determined by an ultra-performance liquid chromatograph system, coupled to the mass spectrometer. The data indicate the possible movement of some drugs from aqueous to solid phase. We observed that the composting of the sludge could favor the biodegradation or mobilization of the compounds since there was a significant reduction in the concentrations, when comparing the values obtained before and after the composting process. The non-detection of a compound does not necessarily mean that it has been fully degraded by microorganisms; however, past studies reached similar results, which corroborates the adequacy of the methodological proposal and the adopted procedures, contributing to the production of reliable results.

Biography

Graduated in Pharmacy and Biochemistry from Universidade São Francisco (1993), specialization in Business Administration from Fundação Escola e Comércio Álvares Penteado (1995), degree in chemistry from Faculdade Maria Imaculada, Master's degree in Civil Engineering from Universidade Estadual de Campinas (2008), Department of Sanitation and Environment and PhD (2021) from the Faculty of Public Health, University of São Paulo-USP, Public Health concentration area. Currently teaching in high school Chemistry and Faculty of Pharmacy, teaching activity teaching Chemistry and Physical-Chemical Quality Control subjects. He has experience in Sanitary Engineering, with an emphasis on Environmental Sanitation, working mainly on the following topics: pharmaceuticals, bioremediation, and environmental contamination.



Occupational Tuberculosis among Healthcare Workers (HCWs)

Janeffer Muthoni Wangari

Kenyatta University, Nairobi, Kenya

Abstract

Tuberculosis is one of the major occupational hazards recorded among healthcare workers, not just in Kenya but globally due to their consistent and routine exposure. This is especially true among the nurses and laboratory workers who are regarded as high-risk groups for both Latent Tuberculosis Infection (LTBI) as well as active TB, among the profession cadre. From the studies done within Kenya and globally, it has been proved that the risk of infection among Health Care Workers (HCWs) compared to the general population is three times more with poor implementation administrative control cited as the major cause according to World Health Organization (WHO). The study was aimed at producing baseline data that would be used to create awareness on existing morbidity within the community hence lead to prevention and control measure being put in place. This too shall contribute significantly to the Sustainable Development Goal (SDG) indicator of 'End TB 2050'. The study sought to assess the compliance to TB IPC among HCWs in Kenyatta National Hospital and Mbagathi District Hospital. The study sample was 406 participants from KNH and Mbagathi hospitals. Out of the 406 questionnaires distributed, 98.0% (n=398) were completed, accurately filled and returned. A total of 36 nurses, 4 laboratory staff participated from Mbagathi with 328 nurses and 30 laboratory staff from KNH. Statistical Package for Social Sciences version 22.0 was used to analyze the descriptive statistics. Thematic analysis was employed to analyze qualitative data and triangulated with quantitative data either as narrations or direct quotes. The Chi-Square tests were done at 95% confidence interval and results with p-values of less than 0.05 ($p < 0.05$) were considered significant. This helped identify the relationship between various variables. Moreover, Pearson's correlation too was done to show the strength of the association. The study findings revealed that the socio-demographic factors that significantly influenced respondents' compliance to the laid down TB IPC guidelines included the number of years worked ($P=0.043$) and salary received per month ($P=0.003$). Further, the HCWs generally had a high level of knowledge on TB with low score observed on TB prevention aspect. On compliance, the administrative aspect of control measure was noted as inadequate contrary to what was filled in the questionnaires. The study further revealed that those with a fair attitude were more likely to comply with TB IPC guidelines than their counterparts. Thus, knowledge and attitude levels were significantly associated with compliance to TB IPC guidelines ($P=0.000$). In conclusion, there is a dire need to offer continuous medical education to HCWs despite their tight schedules with an emphasis on TB prevention. Moreover, the hospitals managements should ensure that appropriate policies such as compensation policy, incentive program, TB screening and HIV/AIDS testing and treatment that is staff-friendly are formulated and implemented to boost the attitude of the HCWs.

Biography

She is an accomplished and highly skilled professional specialized in Risk Assessments & Management, Occupational Safety and Health (OSH) Consultancy, and statutory audits, including Risk Assessments, OSH, and Fire Safety Audits. With a strong passion for creating safe workplaces, she excels in identifying hazards, analyzing risks, and implementing mitigations across various private and corporate-owned settings. Her primary motivation lies in contributing significantly to Sustainable Development Goal 3, aiming to eradicate occupational diseases and uphold the workers' well-being as outlined in the ILO Constitution.

Certified as an Occupational Safety and Health trainer by the National Industrial Training Institute (NITA), she also dedicates her time to mentoring emerging professionals pro bono.

Her illustrious career spans over a decade, during which she has showcased unwavering commitment and expertise across diverse industries, including healthcare, agriculture, hospitality, and insurance. Her consistent delivery of exceptional results has established her as a respected leader and risk management expert.

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She commenced her professional journey with a Bachelor of Science in Medical Laboratory Sciences and Clinical Chemistry from the University of Eastern Africa, Baraton, graduating with cum laude. Subsequently, she ventured into the insurance industry, serving as a Care Manager, and pursued further studies, a Master of Science in Occupational Safety and Health from Kenyatta University's School of Public Health. Additionally, she has completed various insurance-related short courses. She holds accreditation as a member of the Workplace Safety Professional Association of Kenya (WSPAK) and the Institute of Loss Adjusters and Risk Surveyors (ILARS).

Currently, she actively engages in groundbreaking research focused on Occupational Tuberculosis among Healthcare Workers- mainly Nurses and Laboratory Workers- in Referral Hospitals. Simultaneously, she plays a pivotal role in shaping risk management strategies and practices through comprehensive training and risk surveys, both within Kenya and on the international stage.



SUS in the Midia in a Pandemic Context

Maria Ligia Rangel Santos

Federal University of Bahia, Brazil

Abstract

The COVID-19 pandemic has produced new demands for services in healthcare systems around the world. In Brazil, the SUS became the object of interest of the media, which made efforts to cover government actions and the system's capacity to control the pandemic. This study aims to analyze articles from the newspaper Folha de São Paulo (FSP), regarding the meanings produced about the Unified Health System (SUS) in the COVID-19 pandemic. 231 articles were analyzed, among the 524 published in the period from January to May 2020, following the established inclusion criteria. The corpus was categorized in four senses: constitutional SUS, problem SUS, disputed SUS and active SUS. The reflection on the diversity of meanings attributed to the SUS points to the need to expand the capture of the dimensions of the SUS.

Biography

Maria Ligia Rangel Santos, Full Professor (retired) of the permanent staff of the Postgraduate Program in Public Health at the Institute of Public Health of the Federal University of Bahia (UFBA), with a degree in Medicine from this University (1976), Master's degree in Public Health (UFBA, 1993), PhD in Public Health (UFBA, 2001), Senior Internship (Post-Doctorate) at the Open University of Lisbon (2015 to 2016), with support from CAPES (BEX 2476/15-0). I develop teaching, research, extension and technical cooperation activities in the areas of Health Education and Communication and Permanent Health Education. I coordinate the Media and Health Research line, with which I collaborate at the Health Policy Analysis Observatory at ISC/UFBA, and Health Education and Communication Technologies line, both from the Health Education and Communication research group, coordinated by me. I worked as a Deputy coordinator of the UNA-SUS UFBA Network, and of several Specialization courses in Public Health (PMM and others) in the EAD modality. I have experience in the area of Public Health, with an emphasis on the following topics: health risk, communication and health, worker health, distance education, health surveillance and tuberculosis.

Impact of Multidisciplinary Management of Diabetic Foot

Valeska Marianchy Guzmán González

Faculty of Medicine of the Universidad Católica del Norte, Chile

Abstract

Objective: To study the effect of multidisciplinary management (MMD) of PD ulcer (DPU) in a Hospital in Chile during the period 2017-2020.

Materials and Methods: Comparative, observational and retrospective study, a dissociated database composed of 111 patients treated in the 2017-2020 period was analyzed and compared with the data of 121 patients with DFU treated in the same Hospital without MMD period 1998- 2005. For the analytical analyses, the Chi square test, Fisher's exact test, U of Mann Whitney and Kruskal Wallis were used.

Results: The rate of major reamputations with MMD was 2.7%, 91.2% of patients treated with MMD managed to improve the clinical condition of the wound, however, in the SARCOV-2 pandemic, the improvement was reduced to 78.2%. The complete wound healing rate with MMD was 77.8% v/s 31.4% without MMD ($p < 0.0001$) and the overall re-amputation rate without MMD was 47.1% v/s 12.6%. With MMD (<0.0001). Recurrence was 11.7% with MMD v/s 100% at four years without MMD ($p < 0.0001$).

Discussion and Conclusion: We observed that the MMD of the UPD achieves better intervention effectiveness rates than patients without MMD, showing better rates of wound healing, higher reamputation rate, and recurrence rate. Therefore, an MMD could contribute significantly to the rescue of the affected limb.

Biography

1. Name: Valeska Marianchy Guzmán González

2. Titles:

a. Nutritionist

b. Graduate in Nutrition and Dietetics

c. Master in Health Strategic Management and Direction

d. Bachelor in Health Sciences and. Diploma in Geriatrics and Gerontology INTA-U. From Chile

f. Diploma in Biostatistics. U of Concepción

g. Diploma in Strategic Management

h. Diploma in Management of Health Institutions

i. Specialization courses in Diabetes, pre-hospital and emergency treatment in inadequate decompression syndrome and carbon monoxide poisoning and bariatric surgery.

3. Current Job: Nutrition and Dietetics Academic at the Clinical Department of the Faculty of Medicine of the Universidad Católica del Norte, Coquimbo, Chile.

4. Work Experience:

a. Nutritionist and Deputy Director UCN of the Polyclinic for Comprehensive Management of Diabetic Foot, HSP Coquimbo

b. Academic of the Nutrition career at the Universidad Católica del Norte

c. Representative of Liaison with the environment FAMED Clinics Department

d. Research assistant in Project Fic-R 2019, FAMED UCN. and. Principal Investigator in research projects (Analysis of clinical, nutritional and smoking factors associated with the healing of Diabetic Foot Ulcers in patients treated at the Polyclinic for Comprehensive Management of Diabetic Foot and Effect of multidisciplinary intervention on Diabetic Foot)

F. Clinical Nutritionist and Management in Food Service, (Long Stay Establishment for the Elderly (ELEAM) Fundación Las Rosas, La Serena (2018-2019).

g. Nutritionist at the Polyclinic and Head of Health Promotion, Minera Los Pelambres, Salamanca (2013-2016), Chile.



Empowerment: A Tool for the Nursing Professional's Performance in Health Promotion and Prevention

Yamila La O Jiménez

Practical Care Program in Intensive Nursing, Cuba

Abstract

Addressing empowerment from health promotion and disease prevention currently constitutes a challenge for nursing professionals. .It means the execution of organizational strategies and leadership based on care functions aimed at caring for the person, administrative functions aimed at managing processes and teaching functions oriented at Training of human resources, to professional and investigative improvement, which are integrated into the search and need for knowledge.

Biography

Yamila La O Jiménez, Assistant Professor at the General Hospital "Dr. Juan Bruno Zayas Alfonso". Faculty of Nursing/Health Technology "Dr. Juan Manuel Páez Inchausti". PhD student in Nursing Sciences.



Directed Cutaneous Neurectomy for Cutaneous Neuralgia

Charles E Lucas and Anna M Ledgerwood

Detroit Receiving Hospital, USA

Abstract

Background: Cutaneous neuralgia (CN) is a common challenge for surgical consultation. This report describes directed cutaneous neurectomy (DCN) for persistent CN.

Methods: From 2010 through 2022, DCN was performed 112 times in 100 patients. All had complete temporary relief of CN by outpatient percutaneous proximal blockade. DCN involved a successful proximal blockade with blue dye added to the injectate, and all blue stained tissue was excised. The site of DCN included groin (49 patients), abdomen (38 patients), chest (7 patients), extremity (4 patients), or skull (2 patients). Relief was judged continuous (C), none (N), or temporary (T).

Results: Pain relief was C in 82 patients (27 ± 20 mo), N in 6 patients, and T in 12 patients (22 ± 2 mo). The presence of microscopic nerve fibers (46 patients) or mesh (42 patients) did not affect outcome. A second DCN was done in two N patients, followed by C relief. A second DCN was done in seven T patients, and a third DCN was done in three T patients after recurrent CN.

Conclusions: Refractory CN can usually be successfully treated by DCN.



Use of Real World Evidence in Pediatric Clinical Trials: Application with Neonates & Other Rare Disease Populations

Thomas F Miller

Bayer Healthcare, LLC, United States

Abstract

Today, many medications used to treat disease in children do not have sufficient well controlled clinical trials to assess risk/benefit. Neonates are especially disadvantaged and are considered high risk "therapeutic orphans". Few medications are specifically indicated for use in neonates, despite the US having the highest rates of prematurity (about 10%) of any affluent country in the world, with substantial annual cost. Despite FDA (and EMA) legislation mandating that drug studies be conducted in neonates [3], and although children represent ~20% of the US population, less than ten percent of registered clinical studies include children and only a modest fraction include neonates. The 21st Century Cures Act, signed into law in the US in 2016, was intended to accelerate medical product development and bring innovations more efficiently to patients who need them. The FDA subsequently created a program framework to evaluate the potential use of real-world evidence (RWE) in regulatory decision-making. In parallel, the European Medicines Agency (EMA) has provided perspective regarding the use of RWD and RWE in clinical trial frameworks. Independent of intended use, a prerequisite for utilization of RWE for regulatory decision-making purposes involves using a reliable and relevant dataset that is fit for purpose. The objectives of this presentation will be to 1) introduce potential RWD sources and options for use in clinical trials and 2) share perspective on RWE use cases for potential applications in neonatal and other rare pediatric disease population focused clinical trials.

Biography

Dr. Thomas F. Miller is Vice President & Global Head, Acute, Chronic and Pediatric Disease Nucleus in Bayer's Pharmaceutical Division, a role he assumed earlier this year. He joined Bayer in 2017 to create and effectuate their Pediatric Clinical Development function. In total, Dr. Miller's career in the life science industry spans more than 27 years, with a primary focus on the development of therapeutics, medical devices and combination products for pediatric and rare disease patients. Earlier, Dr. Miller served in the capacity of Chief Executive Officer of Therabron Therapeutics, Inc. While at Therabron, he oversaw their clinical program through Phase 2 completion for their lead molecule and secured both the Rare Pediatric Disease and Fast Track FDA designations. Prior to Therabron, Dr. Miller served in the capacity of Chief Operating Officer of Discovery Laboratories, Inc. During his tenure, the company successfully secured marketing authorization for their first approved therapeutic, successfully registered their first medical device and advanced multiple rare disease pipeline programs into the clinic. Earlier, Dr. Miller served in operational roles of increasing responsibility at Pfizer, Novartis, BASF Pharma, and Johnson & Johnson. He holds a both a PhD and a MBA. Dr. Miller has authored several peer-reviewed publications, given numerous presentations at scientific symposia and is an inventor with an issued and licensed patent in the field of pediatric drug delivery.

Creating a Competency Based Curriculum in a BSN Program: A Case Study of Leadership

Justin D Wagner

Commonwealth University of Pennsylvania, USA

Abstract

A single case study was performed on an expert nurse educator in a leadership position developing a competency-based curriculum in undergraduate nursing education from a leadership perspective. The American Association of Colleges of Nursing has developed ten new essentials for nursing education with the goal of bridging the gap between education and practice. Competency-based education focuses on higher levels of learning and assessment, and has been recommended to meet the ten new essentials and better prepare nursing students to enter practice following graduation. The case study revealed multiple themes from a leadership perspective in developing a competency-based curriculum. Buy-in was identified as a theme due to the significant undertaking of not only creating a new curriculum, but also combining three universities and nursing programs into one cohesive program. Additionally, buy-in was evidenced by a need for faculty members to feel valued, respected, and be excited about creating a new curriculum. Secondly, being knowledgeable about competency-based curriculum was identified. The leader identified the need to be thoroughly educated in competency-based curriculum, in order to be a resource for faculty and provide guidance as the faculty worked through the process of developing the competency-based curriculum. The final theme identified was communication. Communication was necessary to understand the individual faculty member's expertise and vision for the program and courses, and too address differences in opinions among the faculty to come to an agreeable solution.

Biography

My name is Justin Wagner, I am an Assistant Professor at Commonwealth University of Pennsylvania in a tenure-track position. I am currently enrolled at Indiana University of Pennsylvania in the PhD in Nursing Education program. I still work per-diem for Geisinger Medical Center as a critical care charge/bedside RN. I predominately teach at the sophomore level in Nursing Health Assessment and Foundations of Nursing Practice courses. I am actively working to improve my scholarship through both my scholarly projects through Indiana University of Pennsylvania's PhD program, and independently to advance nursing education.

High Rates of Aggressive Features in Young Vietnamese Females with Papillary Thyroid Carcinoma: Associations with Preoperative Risk Factors

Nguyen Van De

Vice head of Pathology Department 108 Military Central Hospital, Ha Noi, Vietnam

Abstract

Background: Thyroid carcinoma represents a major global health burden, with rising incidence worldwide. Papillary thyroid carcinoma (PTC) accounts for most cases but aggressive variants with capsular invasion and nodal metastases require more intensive treatment. Reported rates of these aggressive features vary widely. This study aimed to elucidate associations between clinical/tumor characteristics, capsular invasion and nodal metastasis in Vietnamese PTC patients.

Methods: This retrospective cohort study examined 1,626 patients with cytologically/histologically confirmed thyroid carcinoma at a referral center in Vietnam during 2018-2020. Data collected included demographics, ultrasound imaging, cytology, tumor features, capsular invasion and nodal metastasis. Associations were analyzed using chi-squared tests and binary logistic regression.

Results: Most patients were young (≤ 45 years) females with small papillary carcinomas. High rates of capsular invasion (58.7%) and nodal metastasis (28.5%) were observed. Capsular invasion was associated with higher TIRADS categories, Bethesda grading, larger tumors and papillary histology. Nodal metastasis was linked to younger age, male sex, higher TIRADS categories, larger tumors, papillary histology, and capsular invasion. Binary logistic regression identified TIRADS categories, Bethesda grading, larger tumor size, younger age, male sex and capsular invasion as independent predictors.

Conclusion: Unexpectedly high rates of aggressive features were found. TIRADS, Bethesda system, tumor size, age, sex and capsular invasion were significant preoperative risk factors for aggressive PTC behaviors.

Biography

Nguyen Van De, Vice head of Pathology Department 108 Military Central Hospital, Ha Noi, Vietnam

Current and Past Positions

- Pathologist, the Department of Pathology, 108 Military Central Hospital, Hanoi, Vietnam
- PhD student, the Department of Pathology, University of Toyama, Japan
- Vice Head of Pathology Department, 108 Military Central Hospital, Hanoi. Vietnam.

Undifferentiated Pleomorphic Sarcoma of the Tongue: Unfrequent Malignant Neoplasm of the Tongue

Pedro Sarmiento

Head and Neck Surgery Consultation. Anticancer Society of Lara State, Barquisimeto – Lara State, Venezuela

Abstract

Undifferentiated pleomorphic sarcoma (UPS) is a high-grade soft tissue sarcoma (STS). Localization in the head and neck is relatively rare (3-10% of all cases) and only 10% in the oral cavity and oropharynx. The average age of reported cases is 50 to 70 years. Men showed considerably higher incidence rates than women. Little is known about UPS due to its low incidence and heterogeneous diagnosis. The clinical case that we present is a rare location of UPS. The first symptom that I presented was the non-painful progressive increase in volume in the right lateral border of the free tongue. I have no swallowing disorders or dyspnea. The definitive diagnosis by immunohistochemistry was Undifferentiated Pleomorphic Sarcoma obtained after a first surgical intervention in another healthcare center. Upon being evaluated in our consultation, surgery with intraoperative biopsy was decided as the main option and adjuvant radiotherapy, obtaining a favorable result. Sarcoma of the tongue is an extremely rare tumor without a precise standardization of the therapeutic protocol. Given the rarity of UPS, the data on the surgical treatment of this malignant neoplasm are limited and contradictory. However, surgery remains the first therapeutic option in most sarcomas, given their radioresistant nature. Prognostic factors include tumor grade, histologic subtype, size, depth, and distant metastases at first presentation. Most sarcomas are high-grade lesions and are associated with a high risk of recurrence.

Biography

Pedro Sarmiento was born in Barquisimeto, the capital city of Lara, a state of Venezuela, on February 12th, 1971. He lived a great part of his life there, where he finished his medium studies and started the medical surgeon career at UCLA (Universidad Centroccidental Lisandro Alvarado), where he ended up graduating as the second best in a class of 88 students in 2001. After, he got a specialization in general surgery in 2007, and got a specialization in oncologic surgery in 2011 at the UC (Universidad de Carabobo).

Before, during and after his specializations he has taken many courses like "Laparoscopy surgery training", "Surgery and dissection of thyroid gland", among others. In the same way, he has been present in many conferences and seminars about medicals, he was a speaker in some of them.

Also, the Dr. Sarmiento's career is full of works published by himself and his partners, there are a lot of investigations based on the long experience of more than 20 years of studies of Dr. Sarmiento, and many of them were presented in conferences, and some were published in oncology journals of Venezuela.

Currently, Dr. Sarmiento exercises his profession, attending people from the whole country, at the University and central hospital "Antonio Maria Pineda" in Barquisimeto, and at the Anticancerous society of Lara, where he runs an office specialized in head and neck surgery. In conclusion, the long career of Dr. Sarmiento is full of achievements and activities that makes him a great professional.



Chylothorax and Chyloperitoneum in the Setting of Neck Lymph Node Dissection

Paula Tridone

Sanatorio Ipenza, La Plata, Buenos Aires, Argentina

Abstract

Chylothorax and chyloperitoneum after left lymph node dissection are rare complications. We report the case of a 24-year-old woman with a history of total thyroidectomy with bilateral lymph node dissection for metastases of papillary thyroid carcinoma. On postoperative day 2 the patient presented generalized abdominal pain. The complementary tests allowed for the diagnosis of chylothorax and chyloperitoneum. Medical treatment was started and percutaneous drainage of both cavities. The patient had favorable outcome and was discharged with the abdominal drain and indication of follow-up in the outpatient clinic. Supervised medical treatment for thoracic duct injuries constitute the first treatment option. Surgery should not be delayed in case of poor outcome.

Biography

I graduated from Universidad Nacional del Centro de la Provincia de Buenos Aires (UNICEN), Argentina in 2017. That same year, I started surgery residency in Hospital San Martin de La Plata, which I completed in 2021. After that, I became chief resident in 2022. Since 2022, I have been taking part in a fellowship program regarding minimally invasive and laparoscopic surgery in Sanatorio Ipenza, La Plata. I am a teaching assistant in the area of surgery of the Department of Medical Sciences, National University of La Plata. It was during my residency that I discovered my passion for Head and Neck surgery, prompted by my mentor throughout these years as a resident, Dr. Juan Halligan, who also was of a great help this year, when I started taking part in a Head and Neck fellowship program in Hospital Guemes in Haedo, Buenos Aires, Argentina.

A Case Report of Non-Cardiac Platypnea-Orthodeoxia Syndrome presenting to the Pediatric Emergency Department

Barbara Ximenes Braz

Nicklaus Children's Hospital, USA

Abstract

Introduction: Platypnea-Orthodeoxia syndrome (POS) is a rare condition characterized by upright positional dyspnea and hypoxia. It requires a high index of suspicion to be diagnosed, given the low prevalence and the need to evaluate the patient in multiple positions.

Case Report: We present the case of a 13-year-old female with history of developmental delay and biliary atresia, status post Kasai portoenterostomy, who presented with a chief complaint of "feeling funny." Initial assessment showed an asymptomatic patient with normal vital signs.

During evaluation, the patient developed reproducible dyspnea and hypoxia while standing that resolved when supine. Workup, including EKG, cardiac troponin levels, d-dimer, and chest X-ray, was unremarkable. Echocardiogram revealed left ventricular dilatation with otherwise normal cardiac function and structure. The agitated saline study was positive without atrial shunts.

Computed Tomography Angiography (CTA) was negative for arteriovenous shunting and pulmonary embolism but revealed cirrhosis and portal hypertension. Given suspected hepatopulmonary syndrome, the patient was referred for liver transplant evaluation.

Discussion: POS is characterized by positional dyspnea and arterial desaturation ($P_{aO_2} > 4$ mmHg or $SaO_2 > 5\%$) from supine to upright position. Most cases (87%) are associated with intracardiac shunting and the initial test is an echocardiogram with agitated saline study to differentiate intracardiac from extracardiac shunt. Extracardiac shunts are mostly found in the pulmonary vasculature (9.2%) and should undergo CTA of the chest to evaluate for pulmonary arteriovenous malformations, which are most common, versus hepatopulmonary syndrome (HPS). HPS is defined as a triad of liver disease, hypoxemia, and intrapulmonary vascular dilation. In patients with HPS leading to POS, liver transplantation is the only definitive therapy.

Biography

Dr. Barbara Ximenes Braz is a board-certified pediatrician and Pediatric Emergency Medicine Fellow at Nicklaus Children's Hospital in Miami, FL. Barbara was born and raised in Fortaleza, Brazil and graduated from the Universidade Federal do Ceara School of Medicine. Prior to pursuing training in the US, she worked as a physician in extremely underserved areas of Brazil. Barbara completed Pediatrics Residency at AdventHealth Orlando and is currently a PGY-5 Pediatric Emergency Medicine Fellow. Her main topics of interest and research include POCUS, medical education through audiovisual media, and the applicability of technologies to underserved areas.

Classic Hodgkin Lymphoma- Mixed Cellularity- Case Report and Review of Literature

Mihaela Lebedenco

Clinical Hospital "St John"- Hematology, Romania

Abstract

Objectives: Follow-up of the clinical evolution and response to treatment of a 27-year-old patient with Hodgkin's Lymphoma- histological subtype mixed cellularity- chemorefractory.

Material and Method: Retrospective study in which was analysed the response of a refractory patient to different lines of chemotherapy.

Outcomes: The results showed the evolution of the patient's disease with an initial complete response, with a relapse 18 months after the first line of chemotherapy, refractory to multiple subsequent treatments, but with a favorable response to the new type of treatment.

Conclusions: Diagnosis and evaluation of treatment response in one patient with Hodgkin's Lymphoma refractory to multiple chemotherapy lines, with good evolution after FEAM-ASCT.

Biography

Mihaela Lebedenco (age 38), from Bucharest, Romania. I graduated in 2009 from the University of Medicine and Pharmacy "Carol Davila" (Bucharest, Romania). Resident in Hematology at Coltea Clinical Hospital- Bucharest from 2010. I graduated as a Specialist in Hematology in 2015.

At the present moment, I am active in both- public and private clinics. I am in my last year as a PhD student, under the guidance of the Professor Anca-Roxana Lupu, chairman of Hematology in Romania. I attended multiple National and international participation Congresses, as a participant. Subinvestigator in several clinical trials. Hobbies and passions- Car tuning and sound- I am certified racing pilot.

Difficult Endotracheal Intubation in a Neonate: A Clinical Challenge

Reda El Bayoumy

Basildon university hospital/ Mid & South Essex NHS university hospitals, United Kingdom

Abstract

Difficult intubation in neonates has many etiologies. It especially poses a technical challenge to save a newborn baby immediately following birth especially in isolated island with limited neonatal facilities, resources and expertise. A “difficult airway situation” arises whenever face mask ventilation, laryngoscopy, endotracheal intubation, or use of supraglottic device fails to secure ventilation. As bradycardia and cardiac arrest in the neonate are usually of respiratory origin, neonatal airway management remains a critical factor. A late preterm neonate was born limp and apneic; several attempts to secure his airway were unsuccessful. Upper airway obstruction by voluminous supraglottic cyst with possible subglottic obstruction was considered.

Biography

Dr. Reda El Bayoumy has been Consultant Anaesthetist in anaesthetics & intensive care medicine. Lead regional anaesthetics, acute pain management, enhanced recovery programmes (ERP), day-case surgery unit. Lead clinician in pediatrics, obstetrics, thoracic & vascular surgery. Certificate of Eligibility for Specialist Registration in Anaesthetics (CESR) issued by Postgraduate Medical Education and Training Board (PMETB) & Royal College of anaesthetists (RCA) London, the United Kingdom April 2010. European Diploma of Regional Anaesthetics & Pain Management (EDRA) in September 2009. French Diplomas of Specialised Training in Anaesthetics and Intensive Care Medicine. Interuniversity Diploma (French Board) in Paediatric Anaesthetics and Intensive Care in October 2006 Faculty of Medicine, Lille University, France. Specialized Diploma in Anaesthetics & Intensive Care Medicine in November 2005, Faculty of Medicine, Strasbourg University, France. Medical Degree Thesis (M.D.) in Cardiothoracic Anaesthetics Faculty of Medicine, Leiden University, Netherlands Faculty of Medicine, Cairo University, Egypt, December 2000. He completed his Master of Science Degree (M.Sc.) in Anaesthetics, May 1993, Faculty of Medicine, Cairo University, Egypt. Medical Bachelor and Bachelor of Chirurgie (M.B.B.Ch.) in December 1993, Faculty of Medicine, Cairo University, Egypt. Currently working as Consultant Anaesthetist in the Mid and South Essex NHS University Hospitals, UK; Honorary lecturer in Anaesthetics and Physiology in Faculty of Medicine, Anglia Ruskin University, UK.



Urachal Sinus in an Infant: A Case Report

Julia Souza Vescovi

Joana de Gusmão Children's Hospital in Florianópolis / Santa Catarina, Brazil

Abstract

The persistence of the urachus is an anomaly that consists in its permanence after birth. It can have four different forms and one of the rarest is the urachal sinus. Urachus persistence can cause local infection, sepsis and malignancy of the remaining structures. The earlier the diagnosis and surgical correction, the lower the chance of future complications. It was reported a 41-day-old female patient with an umbilical scar secretion in large quantities, with a foul odor. The mother denied fever, pruritus, edema and local erythema, and any other complaints. Initially, omphalitis was suspected; however, after 36 hours of hospitalization, the patient remained without drainage of secretions and afebrile, so the diagnostic hypothesis of persistent urachus was considered. Subsequently, a full abdominal ultrasound was performed and it was evidenced a persistent urachus. In most cases, the persistence of urachus is an incidental diagnosis, as patients tend to be asymptomatic. However, when there are local symptoms, there must be a high suspicion, thus avoiding underdiagnosis of the disease.

Biography

Júlia Souza Vescovi is a pediatrician. She is 27 years old and is performing a medical residency in pediatric intensive care at the Joana de Gusmão Children's Hospital in Florianópolis / Santa Catarina (Brazil). She graduated in Medicine at the age of 24 from the University of Southern Santa Catarina (UNISUL) in 2019. Graduated in Pediatrics at the Polydoro Ernani de São Thiago University Hospital of the Federal University of Santa Catarina (HU-UFSC) - Florianópolis/SC in 2023. She has 4 publications in scientific journals and 8 paper presentations at conferences.

Analysis of the Epidemiological Profile of Congenital Hip Deformities, 2011–2021

Bianca Gabriella de Oliveira

Universidade Salvador, Brazil

Abstract

Objective: To identify the relevance of hospitalizations for congenital hip deformities in Bahia.

Methods: This is a retrospective epidemiological study, in public databases. Descriptors in health sciences: “congenital hip dysplasia”, “Congenital Hip Dislocation” and “Congenital hip dislocation”. This is qualitative-quantitative research with the analysis of secondary data and transversal typology in the databases of the Ministry of Health – Health Information (TABNET), made available by the Department of Informatics of the Unified Health System (DATASUS).

Results: Bahia was the third Brazilian state with the highest number of hospitalizations, registering 1,481 cases. The municipalities in Bahia with the highest prevalence were Itanhém, Salvador, and Barreiras, with 912, 445, and 20 cases, respectively.

Conclusion: The elevated number of congenital hip deformities reflects a public health problem, requiring investments in public policies.

Biography

Bianca Gabriella de Oliveira, 24 years, medicine student, Athlete (jiu-jitsu, muay thai and bodybuilding) - Graduated in English from the Richard Hugh Fisk Foundation (FISK) in 2015. - Graduated in Medicine in progress at Universidade Salvador (UNIFACS). - Participant in voluntary monitoring of biochemistry in medical graduation (biological processes 1) - Experience in the area of emergency/urgency and orthopedics and traumatology based on an extracurricular internship at Hospital Geral Cleriston Andrade (HGCA) from the 2nd to the 6th year of graduation under supervision of professionals - Worked as an intern at the orthopedics and traumatology service of the Holy House of Mercy in Feira de Santana - Hospital Dão Pedro de Alcântara (HDPA) from June 2020 to July 2021 - Former content producer for the company Jaleko Academic as a producer of medical content - Former President of the Academic League of Orthopedics and Traumatology at UNIFACS - Research Coordinator of the Academic League of Orthopedics and Traumatology at UNIFACS - Participated in a volunteer program at the Orthopedics Service - Spine Surgery - at Hospital do Trabalhador - Curitiba, Paraná.

Early Childhood Care and Education under Uncertainty: The Case of Israel

Yaara Shilo

Bar-Ilan University, Israel

Abstract

Israel's early childhood education and care (ECEC) policy for ages 0-3 has evolved significantly, with the Ministry of Education now overseeing it. However, the policy still emphasizes settings over comprehensive child development, excluding centers with fewer than seven children, and many still need to be registered. This study examines Israel's ECEC policy evolution from 1948 to 2021, involving critical influencers like women's organizations, practitioners, academics, activists, and politicians. Recent reforms prioritize children's developmental needs over merely supporting working mothers. The challenge lies in integrating a private, unregistered 0-2 care sector with a centralized public 3-5 care system, leading to a unique organizational structure. It reflects a persisting practice divide, but municipalities increasingly recognize the importance of early childhood education and care. These trends align with global patterns in ECEC for ages 0-3, positioning Israel's experiences within an international context.

Biography

Yaara Shilo is founder and director of the undergraduate training program for daycare directors at Efrata College of Education in Jerusalem, where she serves as full-time faculty member in the Early Childhood Department at the college. She holds a MA in policy and community in early childhood education from the Schwartz Program in the school of social work at Hebrew University. Her doctoral studies at Bar Ilan University in the Department of Education and Educational Policy focus on preschool education policy in Israel in the last decade. Her social activism covers a variety of interests. She is a founder of the Social Coalition for Education from Birth, an advocacy initiative whose purpose is to influence government policy decisions related to infant and toddler care. She serves as a member on two parliamentary committees: The Committee on the Rights of the Child and the Education Committee. In addition, she is on the list of the Hitorerut Party which won seats on the Jerusalem Community Council. Yaara will serve on the council beginning in May, 2021. In 2017 she received the Lobner Prize for outstanding community service from Ben Gurion University.

Together with Early Starters International, Yaara established educational spaces in hotels across Israel for young children who were evacuated from their homes. These educational spaces promote the children resilience and Social-Emotional (SEL) skills, safe child-centered routine, diverse ways of coping with stress, as well as expert support for the staff.

Yaara Shilo is founder and director of the undergraduate training program for daycare directors at Efrata College of Education in Jerusalem, where she serves as full-time faculty member in the Early Childhood Department. Her doctoral studies at Bar Ilan University focus on preschool education policy in Israel in the last decade. She holds a key position in an advocacy initiative to influence government policy on infant and toddler care, and serves as a member in two parliamentary committees: the Rights of the Child and the Education Committee.



Acute Viral Myositis Associated with Guillain-Barré Syndrome

Magaly Milagros Luque Salazar

Catholic University of Santa María Arequipa, Peru

Abstract

Introduction: The clinical manifestations of Guillain Barré syndrome and acute viral myositis are different. Both conditions are usually self-limiting and can manifest after an infectious process.

Objective: To report an unusual presentation of two conditions in the same patient.

Case presentation: A 4-year-old girl presented with symptoms of acute viral myositis, which, with improvement, made more evident the characteristic symptoms of Guillain Barré syndrome. The case was confirmed through hematological studies, cerebrospinal fluid cytology and neurophysiological studies. The patient was treated with intravenous human immunoglobulin G for 5 days, after which she showed improvement of the neurological symptoms.

Conclusions: The involvement of the muscle and the peripheral nervous system may coexist in the pediatric population, but it is not a usual condition, so more research is needed to better describe this entity and its prognosis.

Biography

- Physician with a degree granted by the Catholic University of Santa María Arequipa.
- Physician specializing in Pediatrics with a degree awarded by the National University of San Agustín Arequipa.
- Diploma in Neonatal and Pediatric Intensive Care Unit by the Latin American Network of Pediatrics and Neonatology.
- Resident Physician of the Subspecialty of Neonatology by the National University of San Agustín Arequipa at Hospital III Goyeneche.

Clinical and Radiological Characteristics of Congenital Lung Malformations. Report of Four Cases in a Third-Level Center in Mexico City

Sharyam Margarita Caicedo Cabrera

Universidad Nacional Autónoma de México, México

Abstract

Congenital pulmonary malformations (CPM) make up a group of entities caused by alterations in the embryogenesis of the lung and the respiratory tract that occur according to the level of the tracheobronchial tree where the insult occurs or the moment of gestational age. The annual incidence is 56 per 100.000 live births, which corresponds to one case per 10.000 to 35.000 pregnancies.

The classification of congenital pulmonary malformations is controversial. However, the most used is the one that categorizes malformations from the point of view pathophysiological in five types: bronchial atresia, congenital pulmonary airway malformation (previously known as adenomatoid cystic malformation), pulmonary sequestration, congenital lobar hyperinflation and bronchogenic cyst. However, some authors use embryology as the main factor for grouping these alterations according to the stage of development in which they occur: embryonic, pseudoglandular, canalicular, saccular and alveolar stage

Although the etiology is largely unknown, there are some factors that can act alone or combined and alter the embryogenesis of the tracheobronchial tree. Its diagnosis can be made from the prenatal stage, at birth or in pediatric or adult age due to the appearance of symptoms or incidentally in radiological tests.

The management of these injuries depends on the type of malformation and the severity of the symptoms, so the conduct to be followed in each case must be individualized. Although most authors recommend resection of the lesion, there is currently no consensus on the indication for surgery, especially in asymptomatic patients. Our objective was to describe the clinical, radiological and in some cases histopathological findings, as well as the treatment used in four clinical cases, treated in a tertiary level hospital that exemplify the most frequent presentations of congenital pulmonary malformations.

Biography

Sharyam Caicedo is graduated from Universidad San Francisco de Quito in 2017 as Medical Doctor in Quito-Ecuador. She worked as a Pediatrics resident at Centro Médico Nacional 20 de Noviembre in Universidad Nacional Autónoma de México, graduating as a Specialist in Pediatrics in 2023. She worked as a Neonatology resident at Hospital de la Mujer in Universidad Nacional Autónoma de México. She is now in her last year of subspecialty in Neonatology. She is member of the Mexican Society of Pediatrics.



One Stage Emergency Surgical Release of the Amniotic Constriction Band in Streeter's Dysplasia with Clubfoot- A Case Report

Baldish Singh Oberoi

Oberoi Hospital, Jalandhar City, India

Abstract

Streeter's dysplasia is a rare condition that occurs in 1 in 2000 to 1 in 15000 live births. Timely intervention is the key in preventing autoamputation and saving the limb in vascular compromised cases. A 7 day old neonate presented with Streeter's Dysplasia with a grossly swollen, deformed and cyanosed foot. The deformity was a rigid Clubfoot deformity. There was a circumferential Amniotic constriction band in the lower third left leg causing a vascular compromise leading to bluish discoloration and gross swelling of the foot and toes. There was another semicircular band in the mid-foot region. One stage urgent circumferential band excision and multiple Z plasties for skin cover was done. The foot and the toes turned pink immediately. The swollen foot was treated by debulking of the foot and clubfoot by ponseti technique in a staged manner.

Biography

I am a medical school graduate from India and have completed master's in public health from Wayne state university Detroit Michigan. I did my MS Orthopedics from Christian Medical College and Hospital, Ludhiana. After completing my MS Orthopedics, I joined with my father at Oberoi Hospital Jalandhar City. Oberoi Hospital, 8 Gujral nagar Jalandhar City is in service of Orthopedically handicapped children since 1988. We specialize in management of Children with Clubfoot, Spastic Cerebral palsy and other congenital and acquired defects and deformities.

Prognostic Factors of Neonatal Sepsis Mortality in Developing Country

Iffa Ahsanur Rasyida

Department of Pediatrics, Dr. R. Sosodoro Djatikoesoemo General Hospital, Indonesia

Abstract

Purpose: Sepsis is the most common cause of neonatal death accounting for 30–50% of mortality annually in developing countries. This study was to determine the prognostic factors of neonatal sepsis mortality.

Methods: A retrospective cohort was conducted in Dr. R. Sosodoro Djatikoesoemo Governor Hospital from April 2021 to September 2021 on 121 neonates in the neonatal intensive care unit (NICU) diagnosed with sepsis. The inclusion criteria were neonates aged 0–28 days, admitted to the NICU, and diagnosed with sepsis. The exclusion criteria were incomplete data and the presence of congenital abnormalities. A χ^2 test was performed on the sex, gestational age, mode of delivery, birth weight, APGAR score, birthplace, and blood culture. A normality test was performed on leukocytes, lymphocytes, neutrophils, platelets, C-reactive protein (CRP), and length of stay. Then performed a Mann-Whitney test.

Results: Birth weight ($P=0.038$), gestational age ($P=0.009$), and blood culture ($P=0.014$) showed a significant relationship on the neonatal sepsis outcome while Mann-Whitney test showed significant differences in the platelets ($P=0.018$), CRP ($P=0.002$), and length of stay ($P<0.001$). Multivariate analysis showed that 3 prognostic factors associated with neonatal sepsis mortality were prematurity (odds ratio [OR], 3.906; 95% confidence interval [CI], 1.344–11.356; $P=0.012$), low birth weight (LBW, OR, 2.833; 95% CI, 1.030–7.790; $P=0.044$), and gram-negative bacteria (OR, 4.821; 95% CI, 1.018–22.842; $P=0.047$).

Conclusions: Prematurity, LBW, and gram-negative bacteria were associated with the prognostic factors of neonatal sepsis.

Biography

Dr. Iffa Ahsanur Rasyida, I believe that children are beautiful gift. I fully dedicated to providing preventive and treatment for diseases in infants, children and adolescents. I have been working in the medical field for 15 years. I actively participates in training that supports my career as a pediatrician. I enjoy doing exercise, culinary, and traveling in my spare time. I also works as a lactation counselor, baby massage instructor, lactation acupuncturist, Fatloss & Anti-Aging Consultant, and Hypnotherapist.

Fetus in Fetu: A Case Report

Abdalla Elabbar

Surgical Department, Children Hospital, Benghazi, Libya

Abstract

Introduction: FIF is a rare benign condition defined as the presence of a parasitic monozygotic, diamniotic fetus inside another fetus. In 80% of cases, the anomalous occurs in the retroperitoneal region of the normal fetus (Thorax, Pelvis). There is a male predominance in most reported cases before the age of two. Treatment is always surgical removal of the fetus with the capsule.

Case presentation: We present a new-born male patient, one day after delivery (36 weeks). He was dyspnic and tachypnic, with huge abdominal distension and a palpable mass occupying the left abdomen crossing the midline and extending to the left iliac fossa. Ultrasound scan showed that the left kidney was poorly detected with evidence of a large ill-defined cystic and heterogenous soft tissue lesion occupying the left side of the abdominal cavity. Echo showed a normal heart. CT scan of the abdomen and pelvis with contrast defined a mixed density lesion formed of fluid, soft tissue, calcifications, and fat densities. Measurements of the lesions were 14cmx8cm extending from the sub diaphragmatic region to the left iliac fossa. This finding raised the concern of a retroperitoneal teratoma. The case was diagnosed and surgically treated during August 2023.

Discussion: FIF malformation was first presented by Willis in 1935. In 1954 Lord demanded the presence of a vertebral column, extremities and an organ located at appropriate place as the basic diagnostics for FIF. These criteria's are still used to a wide extent today. However, there are also claims that this pathology is a well differentiated and highly organized teratoma. FIF is considered as a benign condition while the potentially malignant characteristics of a teratoma constitutes the basis of discussion. This argument may lead to differences in the follow up and treatment of such cases considering the report of malignant recurrence.

Biography

I am a Pediatric Surgery Specialist and Head of Unit A at the Surgical Department, Children Hospital of Benghazi. I have more than 20 years' experience in pediatric surgery, and I am also currently a Teaching Collaborator and Clinical Examiner at the Libyan International Medical University (LIMU) in Benghazi, Libya.

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