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Keynote Forum  
November 22, 2018

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***Diabetes Congress 2018***  
***Nutrition 2018***



Joint Event  
26<sup>th</sup> International Conference on  
**Diabetes and Endocrinology**  
&  
16<sup>th</sup> International Conference on  
**Nutrition and Health**  
Nov 22-23, 2018 | Paris, France



## Yuxiang Sun

Texas A&M University, USA

### Macrophage ghrelin receptor - A novel regulator for lipid metabolism and inflammation


Chronic low-grade inflammation is a hallmark of obesity, which is associated with metabolic dysfunction and insulin resistance. Gut hormone ghrelin promotes food intake, adiposity and insulin resistance; and ghrelin is functions through ghrelin receptor, Growth Hormone Secretagogue Receptor (GHS-R). To determine the direct effect of GHS-R in macrophages, we generated myeloid-specific GHS-R knockout mice and studied them under chronic and acute inflammatory conditions of diet-induced obesity (DIO) and endotoxin lipopolysaccharides (LPS) treatment. Suppression of GHS-R in myeloid cells attenuated DIO-associated obesity, DIO-induced insulin resistance, and LPS-induced inflammation. The myeloid-specific GHS-R knockout mice showed significant reductions of pro-inflammatory cytokines in the circulation, and pro-inflammatory gene expression in liver, fat and skeletal muscle. To investigate the underpinning mechanism, we isolated bone-marrow-derived-macrophages (BMDM). GHS-R deficient BMDM showed a polarization profile toward anti-inflammatory M2. These data suggest that GHS-R deficiency promotes macrophage

anti-inflammatory shift by modulating insulin signaling and mitochondrial energetics. Collectively, our findings indicate that suppression of GHS-R in myeloid-cells promotes anti-inflammatory polarization, decreases inflammatory responses of both diet-induced chronic inflammation and LPS-induced acute inflammation, prompting a healthier lean and insulin sensitive state. Thus, macrophage GHS-R has profound effects on lipid metabolism and inflammation, is a critical molecular link that mediates the cross-talks between immunity, lipid metabolism, inflammation and insulin sensitivity.

#### Speaker Biography

Yuxiang Sun is an associate professor at Nutrition and Food Science at Texas A&M University, USA. She obtained her PhD from University of Manitoba, Canada. She is a leader in ghrelin research; ghrelin is an important nutrient sensor and metabolic regulator. She has over 65 peer-reviewed publications, many of which are in premier journals such as Cell Metabolism, PNAS, JCI, Diabetes and Aging Cell. Her publications have been cited over 4413 times, and her publication H-index is 29. She is serving as an editorial board member of a number of nutrition and metabolic journals.

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## *Dian True*

*Community Education & Wellness Partners, USA*

### **Implementing prevention, education and programs in rural communities**

Identify the challenges of implementing Prevention Education in a rural and frontier state. The rapid development of partnerships became essential. Utilizing the Centers for Disease Control and Prevention curriculum the Wyoming Association of Diabetes Educators (A Chapter of the American Association of Diabetes Educators) senior leadership and education team provided the inspiration to seek grants funds for the development and implementation of DPP and garner the support for what soon became a state-wide initiative to bring evidence based best practice prevention education to Wyoming.

Then provide technical support as new educators and their programs sought CDC pending national program recognition.

#### **Speaker Biography**

Dian True has been a registered nurse for more than 40 years, with 10 years of acute cardiovascular care nursing then moved in 1985 to become one of the first groups certified diabetes educators in the Americas. In 2014, she completed her fellowship in Diabetes Education from AADE. She Working as the coordinator of an American Diabetes Association diabetes certified site for last 20 years; adjunct professor of medicine and nursing in Wyoming. She is the currently Chairman for Wyoming Association of Diabetes Educators. She is also a member and lead educator of the technical support team for the implementation of Wyoming's new prevention programs.

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## **Christopher Robin Bryant<sup>1</sup>**

**Antonia D Bousbaine<sup>2</sup>, Zheng Zong<sup>3</sup>**

<sup>1</sup>University of Guelph, Canada, <sup>2</sup>University of Liège, Belgium

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**The rise of sustainable agricultures as food markets evolve and food security becomes a major challenge: The roles and characteristics of sustainable agricultures in food land belts around cities**


After several decades of the development of productivist agriculture and the increasing recognition of the negative environmental consequences of this type of agriculture, food markets have begun to evolve quite rapidly in the last 20 years or so. Increasingly Sustainable Agricultures have become the center of attention. The sustainability dimension not only refer to reasonable incomes generated for farmers who are the basis of much food production, but also the reduction of negative environmental consequences in terms of water pollution and in terms of the quality of the foodstuffs produced for human health. The health issues have also become an important dimension of Food Security. This evolution has been recognized in the development of many small-scale food production projects based on agriculture around cities as well as with the development of Food Land Belts comprised of many small and medium scale food projects around cities such as Liège, Belgium, and Montreal, Canada, and their development in other countries such as China. In this presentation, we discuss the rise of sustainable agricultures and their roles in food markets and

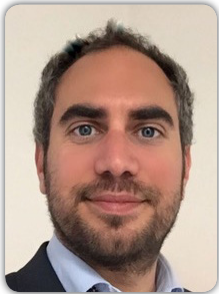
in dealing with food security issues. We also present the characteristics of Food Land Belts that make them successful, recognizing that the conditions for success can vary substantially between the surroundings of different cities, as well as the conditions that can give rise to unsuccessful Food Land Belt projects. The roles of farmers as producers and citizens as consumers, as well as social organizations in achieving success for Food Land Belts are also emphasized.

### **Speaker Biography**

Christopher Robin Bryant has a PhD from the London School of Economics and Political Science (1970) and has been Professor at the Universities of Waterloo (1070-1990) and Montréal (1990 to 2014) and is currently Adjunct Professor, School of Environmental Design and Rural Development, University of Guelph (1912 onwards), and he is also Adjunct Professor, Geography Department, University of Montreal (2014 onwards). His fields of research are: Agriculture in and around cities and metropolitan centers; community development; land use planning; strategic development planning for communities, organizations and agriculture; resilience building for communities exposed to flooding and climate variability; adaptation of agriculture and tourism development to climate change and variability. He is placed in the top 5% of researchers on Research Gate.

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## Massimo Cecaro

*Italian Medical Press, Italy*

### **MASSicare 2.0, application of the augmented reality in nutrition and health**


**S**afe or unsafe Food? Do I need to consider precautions or not? Have the question answered by your phone simply focusing in on the food that you are thinking about eating. An innovative method to easily understand, efficacy and speed can give clear information in regard. With the integration of MASSicare 2.0 A.R. (Method of Acquiring Scientific Specific Information on Care - Augmented Reality) in fact, it is possible to understand if the food that we would like to consume is appropriate or not. Just using the camera of the phone, and with the algorithm present in a new innovative App we can estimate the quantity and quality of the food cross-checked with its safety. This innovation, is the evolution of a MASSI Care a model presented in 2015 in the United States, and the facility of the App gives quick response to the general public. The lay public would have special pictograms in 3D on the camera of the phone, related to the food that is being considered by the user, that can remind them about their limitations cross-checked with the food. Once the owner of the App has entered all details related to their health background, there is a matching with the database developed in relation to new breakthroughs in the field of food poisoning. The approach pursued by the App is in AR (augmented reality), the database is under

construction with all kinds of foods, and the goal is to include all common foods present all around the world. Through attractive graphics many suggestions will be given to the consumer regarding similar food alternatives with less risk for their health and the quantity of specific food components is measured so as not to exceed the recommended intake.

#### **Speaker Biography**

Massimo Cecaro (University of Teramo, Biotechnology Reproduction), Specialist Veterinarian, Master II level "Veterinary Public Health and Food Hygiene" was an External Collaborator at the Italian Ministry of Health, Roma, Office II Directorate General of Collegial Bodies for Health Protection, for a specific project on food safety communication. He is Member of EFSA's (European Food Safety Authority) Expert Database. At the age of 24 he obtained a qualification to practice as a Journalist and in 2007 he was admitted to the National Association of Medical Press (ASMI), where he currently holds the position of General Secretary and Vice President. He is resident member of MJA Medical Journalists' Association (London). He has been an invited speaker, mentor and chairman at international events in the field of public Health and safety in Canada, US, Europe and Asia. He has been author of several scientific works in public health. He is also director in Italy of a prestigious educational centre for work safety and public health. He is actively involved in international projects to improve the role of mass-media in medical sciences, and awarded in Philadelphia, Valencia and Las Vegas. In 2015 he received a Special recognition by the "American Association of Public Health Veterinarians" for his active involvement in international projects specifically promoting the "One Medicine approach".

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## Vera Matta

*Sweet Diet Clinic, Lebanon*

### Differences in dieting practices among young females of different weight

**Background:** Nowadays, young females are seeking optimal fitness most of the time through unhealthy practices. Most females don't follow the health recommendations on dietary guidelines. Normal weight female behaves differently than overweight and obese female and perceive food and diet practices in other ways. Since those dieting practices are not always adapted to promote a healthy body weight, this study aims to determine the dieting practices used among normal, overweight and obese female and identify dieting practices that could be pursued to help these females more appropriately achieve and maintain a healthy body weight.

**Methods:** A total of 120 females aged 18 to 26 years participated in this study. Height, weight, waist and hip circumferences and skinfold thickness were measured to assess body composition. Surveys included food questionnaire and physical activity recall. Participants were classified according to body mass index (BMI) as normal weight (n=80), overweight (n=25), or obese (n=15). Data were analyzed using JMP IN<sup>®</sup> software. Descriptive statistics included means, standard deviations, and frequency.

**Results:** Majority of participants (79%) used dieting for weight loss and believed they would be almost 4% greater than current weight if they did not diet; normal weight,


overweight, and obese groups perceived attractive weight to be 94%, 85%, and 74% respectively, of current weight; 75% of participants reported using physical activity to control weight, although only 21% exercised at a sufficient level to promote weight loss; only two of 15 dieting behaviors assessed differed in terms of prevalence of use among groups, which were consciously eating less than you want (44% normal weight, 57% overweight, 81% obese) and using artificial sweeteners (31% normal weight and overweight, 5% obese); and the most prevalent explicit maladaptive weight loss behavior was smoking cigarettes (used by 9% of participants) and most unhealthy was skipping breakfast (32%).

**Conclusion:** Collectively, results indicate females, regardless of weight status, would benefit from open discussions and education sessions with health educators regarding healthy and effective dieting practices to achieve/maintain a healthy body weight.

#### Speaker Biography

Vera Matta is a registered dietitian, she has a master's degree in nutritional psychotherapy and a PhD in counseling and nutritional psychotherapy. She is a current researcher in many health topics like diabetes, obesity. She is a therapeutic dietitian, treating all kind of nutrition related diseases and a consultant for many food related companies.

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## Ramesh C Gupta<sup>1</sup> Ajay Srivastava<sup>2</sup>, Rajiv Lal<sup>2</sup>

<sup>1</sup>Murray State University, USA

<sup>2</sup>Vets Plus Inc, USA

### Current trends in nutraceuticals with special reference to osteoarthritis

Natural products, especially plant extracts, have been used for thousands of years for maintaining health vigor and for prevention and treatment of diseases. With the current world population at seven and-half billion, rising health care costs, and drug resistance, the use of complementary and alternative medicine is inevitable. Out of the US and Europe, 80% of people rely on dietary supplements. Presently, 150 million Americans consume at least one supplement every day. These complementary and alternative medicines are also referred to as Ayurvedic, Unani, traditional Chinese medicines, etc. In 1989, Dr. Stephen De Felice coined the term “Nutraceutical” from “Nutrition” and “Pharmaceutical” and defined it as “A food (or part of a food) that provides medical or health benefits, including the prevention and/or treatment of a disease”. By the turn of the 21st century, the use of nutraceuticals has exploded to safeguard human and animal health. Currently, revenue of the nutraceutical industry is more than \$250 billion per year. From a “One Health” perspective, nutraceuticals are used for infectious and non-infectious diseases in humans and animals. By having antioxidative, anti-inflammatory, immunomodulatory, cytoprotective, antimicrobial, anti-parasitic, anti-fungal and many other properties, nutraceuticals are used for cardiac, respiratory, hepatic, neurodegenerative (Alzheimer’s and Parkinson’s), diabetes, arthritis, cancer, and other ailments. Additionally, phytochemicals are playing a vital role in controlling vectors and thereby mitigating the spread of diseases such as malaria, West Nile, dengue, and others around the globe. In spite of their worldwide use in human and animal health, nutraceuticals lack mechanistic rationale and quality standards compared to pharmacotherapeutic drugs because of their inadequate efficacy, safety and toxicity evaluation, lack of clinical studies, and inadequate regulatory guidelines. In the US, the only major regulation related to nutraceuticals is the 1994 passage of the Dietary

Supplement Health and Education Act by the US Congress. If Farm Bill 2018 is passed by the US Congress, then cannabis, for pain management, atopic dermatitis, osteoarthritis, and many other health conditions, will be the most popular nutraceutical. In the EU, current regulations require evidence that herbal medicinal products meet acceptable standards of quality, safety, and efficacy before a product can be issued. Currently, the nutraceutical industry is facing too many challenges, including quality control, evidence of therapeutic efficacy, food-nutraceutical-pharmaceutical interaction, and assurance of product safety. By all means, the future of nutraceuticals in human and animal health seems bright as novel nutraceuticals will divulge optimal efficacy with few or no side effects.

#### Speaker Biography

Ramesh C Gupta, earned his DVM, MVSc, and PhD in India, and carried out his postdoctoral training at Michigan State University (1981-1983) and Vanderbilt University (1983-1987) in the US. Currently, he serves as professor and head of the Toxicology Department, Murray State University. For more than 35 years, he has conducted experimental brain research in relation to pesticide and neurodegenerative diseases, and for the last twenty years has been heavily engaged in nutraceuticals research. He has made presentations in the UK, France, Australia, Italy, Japan, Germany, Switzerland, Spain, Czech Republic, Sweden, Finland, South Korea, and China. He has served on the panels of NIH, CDC, NIOSH, and National Academy of Sciences, and has published >425 publications, including eight major books: (1) Toxicology of Organophosphate and Carbamate Compounds, (2) Veterinary Toxicology: Basic and Clinical Principles, (3) Handbook of Toxicology of Chemical Warfare Agents, (4) Anticholinesterase Pesticides: Metabolism, Neurotoxicity and Epidemiology, (5) Reproductive and Developmental Toxicology, (6) Biomarkers in Toxicology, (7) Nutraceuticals: Efficacy, Safety and Toxicity, and (8) Nutraceuticals in Veterinary Medicine (in preparations). In 2006, he received the Murray State University’s Distinguished Researcher Award; and in 2014, Outstanding Research Award. He is a diplomate of the American Board of Toxicology, and Fellow of American College of Toxicology, American College of Nutrition, and Academy of Toxicological Sciences. Currently, he holds active membership in more than a dozen academic societies, including American College of Nutrition, American Veterinary Medical Association, American Society for Pharmacology and Experimental Therapeutics, Society of Toxicology, Eurotox, International Society for the Study of Xenobiotics, and American College of Toxicology.

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## Rekha Annie Prasad

*Sir Charles Gardiner Hospital, Australia*

### **Statistics, risk factors, barriers and intervention to the management of type 2 diabetes mellitus in Australian aboriginal population**


**A** boriginal population in Australia are 4 times more prone to develop diabetes as compared to the non-indigenous population with a hospitalization rate of 4.2 aboriginal versus 1.7 in non-indigenous population. Diabetes deaths increases with remoteness, social isolation, low socio-economic status and low literacy level. The risk factors being difficulty of access to health services, poor socio-economic status, smoking, poor dietary choices. The population is also medically unaware of the consequences of the disease, therefore impacting on the management and its subsequent results. The aspect of daily stress, emotional, environmental, mental aspects along with spiritual outlook have a serious impact on an individual's family and community. I will be discussing about the challenges as a clinician in educating the subset of the population about the food choices, calorie intake, physical activity, importance of checking blood sugars, preventive medicine and early detection of the impact of the disease which play a major impact in the management of this population. We will also be touch upon the mode of empowering the patient in terms of taking charge of their life and their diabetes. The pharmacological and non-pharmacological intervention for this subset will also form a part of my talk. Telemedicine with general physician and specialist

consultation plays a significant role in managing and reducing a barrier towards access to medical care. Finally, a quick update about new insights with regards to Aboriginal Genetics and Disease Association. The genetic association of an absence of APOL1 risk alleles in remote Australian aboriginal group with high risk of diabetes and cardio vascular diseases. Secondly, high base line levels of tumour necrosis factor receptor 1 leading to worsening of kidney disease in Aboriginal Australians. Thirdly, arylsulphatase A pseudodeficiency, type 2 diabetes, hypertension, chronic renal disease. This is associated with pleiotropic effects of sulfatides on metabolic function. This could be an avenue for therapeutic intervention.

#### **Speaker Biography**

Rekha Annie Prasad is a consultant physician at a tertiary hospital and also works at other sites. She has been a clinician in Australia for the past 18 years with varied experience, remote and in urban areas. She has her speciality interests as acute medicine, pre-and peri operative medicine, obstetric medicine. She is passionate about diabetes management and chronic disease management especially in aboriginal population. She is involved in teaching under graduate students for Notre Dame University and University of Western Australia. She is also a mentor for post graduate students taking their fellowship exams. She is on the safety and medication committee of Sir Charles Gardiner Hospital. She is also a panel member of undiagnosed disease panel in WA. She also practices telemedicine for remote communities dealing with chronic diseases especially diabetes.

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## David I Gustafson

*Independent Scientist, USA*

**Food system innovations for sustainable nutrition**


A new paradigm – “sustainable nutrition” – has emerged where distinct streams of scientific discourse are beginning to overlap: in global change, environmental science, agriculture, food security, nutrition, sustainable development, and public health. A broadening of perspective has accompanied this new way of thinking, which holistically considers overall food system performance, as measured by economic, environmental, societal, nutrition, and health outcomes. This systems approach includes analysis of entire food supply chains: beginning with the production of essential agricultural inputs, animal and crop farm operations, fisheries and aquaculture, processing, storage, distribution, preparation, consumption, and ending with waste disposal. Four key actions are needed to achieve sustainable nutrition: (1) carefully define terminology and agree upon quantifiable measures, metrics, and methods of assessing its status; (2) bridge the gap between the ability to characterize national-scale food system performance and the diet and health of individuals, by gender, age, and socio-economic status; (3) better coordinate and resource the efforts now underway at local and regional levels to enhance sustainable nutrition; and (4) facilitate consensus-building across the full spectrum of food system stakeholders on the trans-sectoral, ethically-based innovations that are needed across entire food supply chains in order to attain sustainable

nutrition. With regard to the first of these points, a set of seven comprehensive national food system performance metrics (food nutrient adequacy, ecosystem stability, food affordability and availability, sociocultural wellbeing, food safety, resilience, and waste & loss reduction) has recently been developed and applied globally. These metrics can be used to monitor progress within individual countries, as innovations are pursued that are intended to enhance sustainable nutrition, such as: boost fruit & vegetable consumption in a sustainable manner; invest in novel food production technologies; and explore the use of smart-phone App’s to help optimize diets for both nutrition and sustainability outcomes.

### Speaker Biography

David I Gustafson is an independent scientist who uses modeling to help food systems meet human nutrition needs in more sustainable ways. His academic training was in chemical engineering (Stanford, B.S., 1980; University of Washington, Ph.D., 1983). He worked 30 years in private industry (Shell, Rhône-Poulenc, Monsanto), and then served at the ILSI Research Foundation as Director of the Center for Integrated Modeling of Sustainable Agriculture and Nutrition Security (CIMSANS) through 2016. His early career focused on predicting agricultural impacts on water quality. He subsequently developed new modeling approaches to pollen-mediated gene flow and the population genetics of insect and weed resistance. Beginning in 2007, Dave began leading efforts to understand climate adaptation and mitigation imperatives in the global agri-food system. He has served on various national and international teams looking at this issue, including the Executive Secretariat of the US Government’s National Climate Assessment Development & Advisory Committee (2011-2014).

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## Serge P Bottari

*Alps University Medical School and Hospital, France*

**Serum IRAP, a novel direct biomarker of insulin-resistance as a screening, diagnostic and drug discovery tool**

Insulin resistance (IR) affects more than half of the adult population worldwide. Type 2 diabetes (T2D), which often follows in the absence of treatment, affects more than 400 million people and represents more than 10 % of the health budget in industrialized countries. A preventive public health policy is urgently needed to stop this constantly progressing epidemic. Indeed, early management of IR does not only strongly reduce its evolution towards T2D but also strongly reduces the appearance of cardiovascular comorbidity as well as that of associated cancers. There is however currently no simple and reliable test available for the diagnosis or screening of IR. We therefore developed an ELISA for the quantitative determination of a novel circulating biomarker of IR, IRAP. IRAP is associated with and translocated in a stoichiometric fashion together with GLUT4 to the plasma membrane in response to insulin in skeletal muscle and adipose tissue. Its extracellular domain is subsequently cleaved and secreted in the blood stream. In T2D, IRAP translocation in response to insulin is strongly decreased. Our patented sandwich ELISA is highly sensitive and specific, robust and very cost effective. Results of pilot studies indicate an excellent correlation between serum

IRAP levels and insulin sensitivity. We therefore believe that serum IRAP is a direct marker of insulin sensitivity and that the quantitative determination of its plasma levels should allow large scale screening of populations at risk for IR and T2D, thereby allowing the enforcement of a preventive health policy aiming at reducing this epidemic. Similarly, simple companion tests allowing the assessment of the efficacy of novel drugs aimed at improving insulin sensitivity do not exist yet. As such serum IRAP appears as a useful alternative to the euglycemic hyperinsulinic clamp which is very tedious, expensive and requires experienced teams, to monitor insulin sensitivity in human in clinical trials and therapeutic trials.

### Speaker Biography

Serge P Bottari obtained his MD and PhD at the Free University Brussels, Belgium. He specialized in OB/GYN and Biochemistry and was a post-doctoral fellow and research associate at UC San Francisco. After having been a project leader at Sandoz and CIBA Geigy in Basel (Switzerland), he became professor of cell biology at the Medical School in Grenoble and head of endocrine biology in 1993. His articles in premium journals have been cited over 4000 times and he is a member of several editorial boards. He also holds several patents. His h-index is 31. His current work focuses among others on the molecular mechanisms involved in insulin resistance and on the development of novel diagnostic tools.

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## *Ilona Kasza*

*Tucker Health, Singapore*

**Diabetes: Learning from the past**

The global prevalence of diabetes mellitus has doubled in the past few decades. Today 9% of the adult population is suffering from this disease (approximately 90% of whom have type 2 diabetes mellitus). This number is estimated to increase in the next decades. Moreover, it has been shown that almost 50% of diabetics are undiagnosed, hence the real prevalence of this chronic condition is extremely high. This current global epidemic is mainly driven by environmental factors (unhealthy diet and physical inactivity) and is associated with the spread of obesity worldwide. Lifestyle modifications and health promoting patient education are therefore crucial in the prevention and treatment of diabetes. Dietary interventions should focus on weight loss, consequently enhancing insulin sensitivity, and preventing or reversing micro vascular complications. Historical literature from colonial physicians abounds in reports regarding the appearance of obesity and the increase in the

number of people diagnosed with chronic diseases among isolated populations after they were exposed to the “foods of the West”. Traditional dietary habits were replaced by the excessive consumption “modern” food items. Scientific evidence from decades of nutritional research relates the importance of reducing these new components in our diet to prevent obesity and its complications. Modern dietary factors do not resemble the lifestyle of traditional societies. What kind of traditional dietary habits can we adopt to stop or slow down this global pandemic?.

### **Speaker Biography**

Ilona Kasza has been working for Tucker Health (Singapore) as a nutrition coach since 2014. She has been helping patients understand metabolism, lead a healthy lifestyle, prevent chronic diseases and educate them on ways to lose fat while preserving muscle mass. She has extensive experience working with people suffering from a variety of conditions including heart disease, cancer, diabetes, obesity. She completed a certification program in nutrition from the United Kingdom.

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