

Joint Event on



World Congress on
DIABETES,
ENDOCRINOLOGY & NURSING MANAGEMENT

&

International Conference on
NUTRITION,
FOOD SCIENCE & TECHNOLOGY

&

3rd Global Congress on
VACCINES & VACCINATION

November 14-15, 2018 | Rome, Italy

DAY 1

Keynote Forum



Gerald C Hsu

Eclair MD Foundation, USA

Biography

Gerald C Hsu received an honorable PhD in mathematics and majored in engineering at MIT. He attended different universities over 17 years and studied seven academic disciplines. He has spent 20,000 hours in T2D research. First, he studied six metabolic diseases and food nutrition during 2010-2013, then conducted research during 2014-2018. His approach is “math-physics and quantitative medicine” based on mathematics, physics, engineering modeling, signal processing, computer science, big data analytics, statistics, machine learning, and AI. His main focus is on preventive medicine using prediction tools. He believes that the better the prediction, the more control you have.

g.hsu@eclairMD.com



Note:

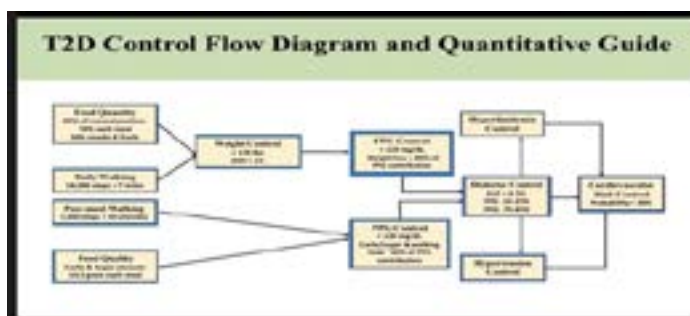
TYPE 2 DIABETES NURSING MANAGEMENT

Introduction: This paper was written in a “cookbook” format based on ~1.5M data containing medical and lifestyle conditions for one patient with type 2 diabetes (2012-2018).

Background: Four main challenges in T2D nursing management:

1. Awareness and Knowledge
2. Glucose Measurement
3. Will Power and Persistence
4. Technology and Tool

Results: Highlights of Figure 1: Flow Diagram:



T2D Control Flow Diagram

1. Weight, BMI, Waistline (food portion control & daily exercise): Weight from 220 lbs to 171 lbs; BMI from 32.1 to 25.0 ;Waistline from 44” to 32”;Controlling factors are meal portion (85% of a normal portion) and daily walk (18,000 steps, 7 miles/day).
2. FPG (~ 20-25% of A1C): FPG from 189 to 117 mg/dL ; Weight contributes 80-85% of FPG ;1.0 lbs. weight = ~1.5 mg/dL FPG.
3. PPG (~ 75-80% of A1C): PPG from 380 to 116 mg/dL ; Carbs/Sugar intake (~14.3 gram/meal) contributes 38% and post-meal walking (~4,300 steps) contribute 41% of PPG; 1.0 gram carbs/sugar = ~1.8 mg/dL PPG. 1,000 steps post-meal walk = ~10 mg/dL PPG.
4. Daily Glucose and A1C: Daily glucose from 280 to 117 mg/dL ; A1C from 10.0% to 6.5%
5. Blood Pressure and Lipids: SBP/DBP from 127/85 to 96/64 ; Hyperlipidemia and hypertension are under control.
6. Risk of heart attack or stroke: Risk from 74% in 2000 to 27.4% in 2017.

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Suffered three cardiac episodes 2000 - 2006.



AI-Based Glucometer

Figure 2 - Artificial Intelligence (AI) tool provides FPG & PPG predictions.



Cartoon Guide

Figure 3 - provides practical guidance on food and exercise.

Conclusion: The paper provides guidance on nursing management for T2D. By using the AI Glucometer, it may help patients overcome some obstacles for this disease.

 Note:



Dalia Adel Abdulhalim Hassan

National Research Centre, Egypt

Biography

Dalia Adel Abdulhalim Hassan is an associate professor of clinical and chemical pathology, medical division, National Research Centre, Cairo, Egypt. She completed M.B., B.Ch., MSc., MD. Clinical & Chemical Pathology, and also Faculty of Medicine in Cairo University. Her subspecialty in fields of diabetes, obesity, hematology, molecular biology and stem cell transplantation. And her clinical activities in 20 years of clinical and laboratory experiences. Worked in peripheral blood stem cell transplantation and B.M.T. unit in Manial specialized hospital, faculty of medicine, Cairo University from 1997-2004. Routine laboratory and molecular work in the clinical and chemical pathology department of medical division, National Research Centre from 2004- till now. Involved in a lot of Research Activities and projects in fields of Diabetes, Obesity, osteoporosis, oncology, stem cells and renal diseases.

oodaliaadel@yahoo.com



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PARAOXONASE-1 GENE Q192R AND L55M POLYMORPHISMS AND RISK OF CARDIOVASCULAR DISEASE IN EGYPTIAN PATIENTS WITH TYPE 2 DIABETES MELLITUS

Background: Diabetes mellitus (DM) is a chronic life-threatening disease; people with type 2 diabetes mellitus (T2DM) are more likely to develop cardiovascular disease (CVD) than people without diabetes. Increased oxidative stress or an impaired antioxidant defense mechanism may play a crucial role in the onset and progression of atherosclerosis. Recently, Paraoxonase-1 (PON1) which accounts for most of the antioxidant effect of high density lipoprotein (HDL) cholesterol has been presented as a potential therapeutic agent against atherosclerosis development. Allele frequencies for PON1 gene that influence enzyme concentration as well as activity differs greatly among ethnic groups and data from several studies showed ethnic variations in the interpretation of CVD associated with PON1 polymorphisms. In this work, we investigated PON1 Q192R and L55M polymorphisms in Egyptian patients with type 2 diabetes mellitus and its association with CVD.

Methods: The study included 184 subjects classified into 3 groups; T2DM, T2DM + CVD, and healthy controls. PON1 polymorphisms were genotyped by real-time PCR and PON1 concentration was assayed in serum by ELISA (enzyme linked immune-sorbent assay).

Results: Genotype and allele frequencies of Q192R were significantly different between controls and diabetic patients. Frequency of QQ genotype was significantly higher in healthy controls, while QR and RR genotypes were significantly higher in diabetic patients ($p=0.02$). Frequency of 55LL and LM genotypes were significantly higher in patients than in controls ($p=0.009$). Q192R polymorphism associated with CVD in our diabetic patients ($p=0.01$) and with low serum PON1 concentration ($p=0.04$). Multiple logistic regression analysis revealed significant correlations between 192R and other independent CVD risk factors.

Conclusion: Our findings support that PON1 192R and 55 L alleles are associated with T2DM. Q192R polymorphism is associated with CVD and lower serum enzyme concentration and might represents a novel risk factor for CVD in Egyptian patients with T2DM.



Harshit Jain

McCann Health, United Kingdom

Biography

Harshit Jain is a healthcare innovator, driving health transformation across the globe, delivering life changing, creative and sustainable ideas. He has proven track record in building & leading businesses, with a key focus on connectedness, improving patient outcomes & driving efficiencies. He is a qualified physician, accomplished speaker and an internationally awarded global professional.

drhjain@gmail.com

MAKING IMMUNIZATION IN A TRADITION

Vaccines have saved millions of lives in the past century and are still the least expensive way of controlling the spread of infectious diseases. However, they are not reaching the populations that need them the most. 1 in 5 children miss out on life-saving vaccines – they are either not reached or drop out before completing the full immunization schedule. It can lead to high infant mortality rates, as high as 115 per 1000 live birth rates in underdeveloped countries like Afghanistan. Doctors have to work without a proper immunization history as parents do not maintain vaccination cards, while remote areas, illiteracy, and traditional biases against vaccines add to the obstacles. This too in an era, where all the information is stored on the cloud. When individuals and communities understand the value of vaccines, they demand immunization as both their right and responsibility.

It was a simple problem which was becoming very difficult to address, especially for the significant lot - dropped-out immunization cases and leading to loss of all investments done on awareness campaigns. Hence, immunity charm was born. A bracelet tied on infants' wrists to protect them from evil spirits, was repurposed to also protect them from lack of immunization. The Immunity Charm comprises of colored beads, with each bead being a code for a specific vaccine. With every immunization, doctors can add a corresponding bead to the bracelet and make it an easy to review vaccination card for the infant.

After the initial pilot project success in Afghanistan, an effectiveness study is now underway in India, Afghanistan, and Africa. It is estimated that the Immunity Charm has a potential to save minimum US\$1 billion that is invested in improving compliance and tracking immunization. The Immunity Charm also became one of the most celebrated communication ideas ever in the history of global advertising industry.



Note:



Mamdouh Abdulrhman

Ain Shams University, Egypt

Biography

Mamdouh Abdulrhman has received his PhD from Ain Shams University, Egypt in 1993. Currently, he is working as a professor in pediatrics in Ain Shams University. His research has been mainly focused on clinical uses of bee honey. Based on his research he has been considered by the German Apitherapy Society as an Expert and Counselor in the clinical use of bee honey. He is serving as an expert Reviewer for journals like Journal of diabetes and its complications, Journal of Clinical Nutrition, European Journal of Clinical Nutrition and Journal of diabetes and metabolic disorders.

mamdouh565@hotmail.com

HONEY IN TYPE 2 DIABETES MELLITUS

Honey, as a natural substance produced by honey bees, has many benefits for health and nutrition. The aim of the present study is to test the effects of honey consumption, as a sole treatment, in patients with type 2 DM. Twenty adult patients with type 2 DM volunteered to stop their medications and to use honey as an alternative and sole treatment of their diabetes and its associated metabolic derangements. Their mean age was 46.5 years and they were of both sexes. The mean duration of their diabetes was 5.1 years. At baseline; the mean HbA1C value was of 9.7%, the mean BMI was 32.5; twelve patients had systemic hypertension, twelve had dyslipidemia, ten had symptoms of peripheral neuritis, one had retinopathy with retinal hemorrhage, and four had coronary heart disease. All patients stopped their medicines and consumed honey in a minimum dose of 2 g/kg/day assuming body weight 75 kg. The duration of honey intervention, without medicines, ranged from 0.42 to 14 years, with a mean of 2.8 years. Ten patients continued the trial for more than one year, 5 completed one year intervention and 5 discontinued the intervention before one year. The only cause of discontinuation of the intervention was persistent hyperglycemia. Long-term honey intervention, without medicines, resulted in persistent hyperglycemia, persistent dyslipidemia, body weight reduction and improvement of macro-vascular complications. No patient developed coma, cerebral strokes or serious infections. The renal functions remained normal during honey intervention. Two patients, who did not receive anti-diabetic medicines after discontinuation of honey, developed DKA one and four months after discontinuation of honey, after periods of interventions of 0.5 and 2.6 years, respectively. This small sampled study showed that honey, as a sole treatment of type 2 DM, is superior to the current medications, and its benefits may outweigh the risks.



Note:



Mingzi Li

Peking University, China

Biography

Mingzi Li is a professor of nursing school, and also department head of medical and surgical nursing, Peking University. Her research area is about the chronic disease management.

limingzi@bjmu.edu.cn

A CULTURALLY-SENSITIVE NURSE-LED STRUCTURED EDUCATION PROGRAM IN PERSONS WITH TYPE 2 DIABETES: A MIXED PILOT STUDY

Aim: To assess the feasibility and acceptability of a culturally sensitive nurse-led structured education program for persons with type 2 diabetes without insulin therapy, and the preliminary outcomes of the program.

Methods: A mixed-method study with a real-world quasi-experimental design and a quality study were employed. Forty-four participants with type 2 diabetes received a tailored 4-module structured education program. Quantitative data were collected at pre-intervention and at the end of a 3-month follow up. Qualitative data were collected post-intervention. Descriptive analysis, two-tailed Student's t tests and Wilcoxon Signed Rank Test were used to analyse the quantitative data. Thematic content analysis was used to analyse the qualitative data.

Results: Forty-four participants completed the program and the attrition rate was 20%. Three basic themes were generated: The program contributed to positive changes for participants; they enjoyed and accepted the program; and they needed ongoing support. Significant improvements in A1C, fasting blood glucose, low-density lipoprotein cholesterol, body weight, waist circumference, body mass index, diabetes related knowledge, self-efficacy and self-management behavior were reported three months after intervention.

Conclusion: Study finding demonstrated that culturally-sensitive nurse-led structured education program tailored for persons with type 2 diabetes without insulin therapy in China is feasible, acceptable, and its preliminary outcomes may be effective. Ongoing support, a control group, and long-term follow up should be included in the future study.



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DAY 2

Keynote Forum



Beth Shaw

YogaFit International, USA

Biography

Beth Shaw is an author, visionary, entrepreneur and founder as well as CEO of YogaFit® Inc., the largest yoga fitness school in the world with over 250,000 students on seven continents. A trained Yoga Therapist since 1994 and EYRT, Beth holds numerous certificates in health and fitness disciplines as well as a bachelor's degree in Business Administration & Nutrition. As an industry pioneer and a leading expert in mind, body, and fitness, Beth has authored three books and has been featured in numerous fitness, business, and consumer publications including: New York Times, Huffington Post, TIME, USA Today, Entrepreneur, SELF, Mind Body Green, and Yoga Journal. Beth Shaw is a frequent speaker at Universities, Hospitals, and Fortune 500 Corporations, educating others on Health & 'Mindfulness' in the workplace, fitness, and conscious business. She sits on the CanFitPro Advisory Panel, the National Museum of Animals and the Long Island University Board of Advisors.

beth@yogafit.com

OPTIMIZING YOUR NUTRITION + LIFESTYLE WITH YOGALEAN™

YogaLean™ is a weight management program designed to work from the inside out, considering every student's unique story, size, and shape, and customizing a program that fits their lifestyle, as opposed to the latest fad diet. In addition to the latest findings on nutrition, exercise, and adherence, YogaLean utilizes the Lean Consciousness and draws heavily from the yogic practices of breathing, meditation, and mindfulness to deliver a transformative experience. Lean Consciousness is a mind/body set, a way of being and living where all of the decisions and choices we make move us to a state of greater health and ideal weight. Often times the body and the mind are at odds with each other. The mind wants something that is not necessarily good for the body. Our bodies do not naturally and organically crave processed and manmade food unless we have had enough of it to get us hooked or addicted. Lean Consciousness enables the body and mind to work together to achieve health goals. Once in a state of Lean Consciousness, we will approach our life in a whole new way. Food choices become based on body need – not want. We begin to eat for energy, immunity and health and not for pleasure, stress or boredom. In YogaLean I teach you how to access Lean Consciousness through meditation and yoga, which calm, center and focus the mind. Meditation gives us coping skills and creates better functioning of our prefrontal cortex, the executive functioning center of the brain. This leads to healthier choices and less reactivity!



Note:



Patricio Roman Santagapita

University of Buenos Aires, Argentina

Biography

Patricio Roman Santagapita has completed his PhD on Industrial Chemistry at 2010 from Universidad de Buenos Aires, Argentina, and his postdoc with Food Science at University of Bologna, Italy. He is a teacher and researcher at University of Buenos Aires, Argentina. He has over 50 publications (35 papers plus books chapter and proceedings) that have been cited over 300 times, and his publication H-index is 10 and has been serving as a reviewer of more than 10 top leading Journals. He is Professor on the Specialization on Industrial Biotechnology. He gave postgraduate courses on Chile and Colombia and Mexico.

prs@di.fcen.uba.ar

ENCAPSULATION ON CA(II)-ALGINATE BEADS: HYDROGEL STRUCTURE RELATED TO STABILITY AND RELEASE OF THE ENCAPSULATED BIOCOMPOUNDS

Encapsulation is being used to improve stability and bioavailability of several bioactive compounds due to the interest in developing more efficient and selective methods for their protection and preservation. The incorporation of bioactive into food products provides many advantages in food preservation and contributes to the development of functional foods promoted by the application of emerging technologies. Thus, in the food industry, encapsulation not only allows adding value to a product food and generating a source of new additives with specific properties, but it is also characterized, in addition to scalability, by the ease of operation, cost effectiveness, and broad regulatory acceptance. The study of Ca(II)-alginate hydrogels has generated many research due to their renewability, biodegradability, biocompatibility, and non-toxicity characteristics. In particular, this talk will be focus on recent published results related to hydrogel structure by SAXS (performed at synchrotron facilities), combination of other biopolymers and sugar, stability of the encapsulated compounds, release and activity under operational conditions.



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