Joint Event on



GLOBAL PHARMA SUMMIT

&

2nd International Conference on GASTROENTEROLOGY AND HEPATOLOGY

November 23-24, 2018 | Bangkok, Thailand

DAY 1 Keynote Forum

Pharma Summit 2018 & Gastro Summit 2018



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David H Van Thiel, Asian J Biomed Pharmaceut Sci 2018, Volume 8 | DOI: 10.4066/2249-622X-C5-013



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Biography

David H Van Thiel graduated from the University of California at Los Angeles in medicine. He completed 2 years of postgraduate education at Cornell University Hospitals in New York City followed by 2 years at the NIH in Bethesda Maryland an additional 2 years at Boston University in medicine in gastroenterology. He completed a second year of gastroenterology/hepatology fellowship and joined the faculty at the University of Pittsburgh where he spent the next 20 years as director of Gastroenterology and Hepatology, Medical director of the Liver Transplant Program, and achieved the rank of professor of medicine and surgery. He served as the President of the AASLD. RSA and Midwest Federation of Clinical Research. He was critical to the development of 6 distinguished liver transplant programs in US serving as the Medical director at each. He has published over 1100 peer reviewed manuscripts in gastroenterology, hepatology, endocrinology, as well as others. He was awarded the Albert Nelson Marquis Lifetime Achievement Award in 2017.

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THE NAFLD CONUNDRUM: HOW TO DISTINGUISH NAFLD FROM NASH UTILIZING A NOVEL BIOMARKER WITHOUT A LIVER BIOPSY

NAFLD is a liver disease characterized by increased hepatic fat with a global prevalence of 25.24%. NASH is characterized as having varying degrees of fat and inflammation within the liver. Both can progress to cirrhosis and hepatocellular carcinoma. This progression is faster and occurs more frequently with NASH than NAFLD. The healthcare burden of NAFLD in terms of health care costs because of the number of hospital admissions per patient, the severity of the liver disease, liver disease mortality, and non-liver disease mortality with the progression of NAFLD to NASH with or without cirrhosis. Thus, it is important to distinguish between NAFLD and NASH. A host of combined hematologic and serologic measures using various algorithms have been used for this purpose with variable and only modest success. Bore recently, ultrasound assessments using transient or shear wave (SWE) have been used for this purpose with the latter having the advantage of estimating the hepatic fat content determined by the hepato-renal ratio (HRR). SWE is more available, cheaper, and less demanding in terms of time commitment and experience as compared to MRE which is only available at a few research centers.

Aim: To identify a serologic marker that identifies those with NASH from those with NAFLD.

Methods: A total of 105 patients were investigated using SWE utilizing an Aixplorer Ultimate Supersonic Image Shear Wave unit. 30 "normal" controls without fatty liver disease, 15 with NAFLD and 3 with NASH with all 3 groups being matched for the following factors, BMI, type 2 diabetes mellitus, hypertension, hyperlipidemia presence of clinical sleep apnea.

Results: The only laboratory parameter that identified those with NASH as distinct from those with NAFLD was at the plasma level of leptin.

Conclusion: The plasma level of leptin distinguish is individuals with NASH from those with or without NAFLD





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Biography

Fatma Abdelaziz Amer graduated from the Faculty of Medicine, Zagazig University, Egypt and got her MSc and PhD degrees from the same university. She is the past head of Medical Microbiology and Immunology in Zagazig University, Egypt and the past president of the Arab Alliance for the Prudent Use of Antimicrobials. Currently she is an emeritus professor in the same university, the president of Hepatitis Working Group/International Society of Chemotherapy and Infection and is a board member of the International Society for Infectious Diseases. She supervised and evaluated many MSc and PhD theses, and is a reviewer of manuscripts submitted for journals, conferences and international awards. She published numerous articles. She has been given many national, regional and international awards. Through fund raising and provision of technical assistance she was the first to introduce automated Microbiology Service in her university and participated in the establishment of the Molecular Biology Unit in the Medical Microbiology and Immunology Department. She introduced an MSc degree in Infection Control at her faculty. She developed two volumes of Infection Control books; the first of their kind in Egypt. She participated in conferences all over the world as organizer, chairperson and speaker.

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SURVEILLANCE AND IMPACT OF OCCULT HEPATITIS B VIRUS, SEN VIRUS AND TT VIRUS AMONG HEMODIALYSIS PATIENTS WITH CHRONIC HEPATITIS C VIRUS INFECTION IN THE EASTERN PROVINCE OF EGYPT

gypt ranks the first as regards prevalence of hepatitis C virus infection. Many patients have concomitant diseases like kidney disorders which necessitate hemodialysis, a procedure posing risk of transmitting other hepatitis viral infections. Occult hepatitis B Infection (OBI) is blood- borne and Torque teno virus (TTV) and SEN virus (mainly D and H genotypes) are tentatively linked to non-A-E hepatitis. The purpose of this study is the surveillance of OBI, SEN virus and TTV in chronic HCV (CHC) infected patients on maintenance hemodialysis in Sharkya Governorate, Egypt and to identify their impact. Three hundred and twenty- five patients were enrolled. They were divided into two groups. Group 1 (case patients; 130 HCV RNA positive) and Group 2 (controls; 195 HCV RNA negative patients). All patients' data were recorded. Blood samples were collected before hemodialysis. Sera were tested for antibodies to hepatitis B core (HBc) and surface antigens (HBs) using ELISA. HBV, SEN virus-D and SEN virus-H and TTV DNAs were detected by polymerase chain reaction. The serum activity of alanine and aspartate aminotransferase were measured. Results were statistically analyzed. Positive anti-HBc antibodies and HBV DNA were identified in 73.1% and 50.8% of group 1, versus 36.4% and 22.6% of group 2 patients respectively (statistically significant). Significant elevation of aminotransferases was identified among group 1 than group 2 patients. SEN virus was identified in 15 (11.5) of group 1; 6 SEN-D and 9 SEN-H versus 16 (8.2%) of group 2 patients; all were SEN-D. TTV was identified in 38 (29%) of group 1 versus 53 (27%) of group 2 patients. The existence of neither SEN nor TTV had significant implications. Due to high occurrence of OBI in our locality, diagnosis is recommended before hemodialysis for CHC patients. No importance of SEN virus and TT viruses is identified.



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Biography

Gopal Natesan has completed his Doctoral degree (PhD) in Pharmaceutical Chemistry from Hamdard University (Jamia Hamdard) New Delhi, India in 2000 and currently serving as Professor in Medicinal Chemistry, in MAHSA University, Malaysia. and Director (Academic & Operation) MAHSA Prima International College, MAHSA Group, Malaysia. He has published >40 articles in indexed journals and presented >80 papers in conferences and received number of honors, recently received "Young Scientist Award" in 2013 and "Edward Kennedy Memorial Award" in 2017 for his high standards of research excellence in Science and Technology. He was invited speaker at international scientific meetings and conferences and serves as reviewer for several scientific international journals and also as Editorial/Advisory board of various journals.

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STUDIES ON 2-(4-METHOXY/METHYL)-PHENYL – 3- SUBSTITUTED QUINAZOLIN-4(3H)-ONE ANALOGS AS POTENTIAL ANTIBACTERIAL AGENTS

he development of antibiotic resistance in pathogenic microorganism is a global health concern due to the emergence of multidrug resistant organism (MDRO). It is essential to synthesize novel antimicrobial agents to deal with increased number of multidrug resistance organisms (MDRO) and limited antimicrobial agent. Literature survey showed that guinazolin-4(3H)-one possess varied biological activities and 2nd and 3rd positions are the target for substitution with other moieties. On the other hand, isatin and sulphanilamide pharmacophore also exhibits wide range of pharmacological activities especially significant antibacterial activity though competitive inhibition of dihydropteroate synthetase enzyme. Hence, it has thought worthwhile to study the effects of these pharmacophoric moieties in one molecule with the base of quinazolin-4(3H)-one nucleus for better the antibacterial activity. A series of mannich bases, 2-(substituted phenyl)-3-[1-(substituted amino methyl)-2-oxoindolin-3-ylideneamino] quinazolin-4-(3H)-one derivatives and 2-(4'-substitutedphenyl)-3-[(N-2-oxoindolin-3-ylidene)-4"-sulphonamidophenyl]quinazolin-(3H)-one has synthesised. The title compound has synthesised from the intermediate schiff bases which is prepared by reacting 2-(substituted phenyl)-4H-benzo[d][1,3]-oxazin-4-one with hydrazine hydrate/sulphanilamide followed by isatin and the required benzoxazinone derivate has been prepared by reacting anthranilic acid with substituted benzoyl chloride. All the synthesised compounds structures were characterised by using H1 Nuclear Magnetic Resonance Spectroscopy. The intermediate schiff base and final mannich base compounds were evaluated for their antibacterial activity against Staphylococcus aureus, Bacillus cereus, Escherichia coli and Pseudomonas aeruginosa at a concentration of 50 µg/mL and 100 µg/mL by agar well diffusion method using Norfloxacin (50 µg/mL) as standard drug. From the study, it has been observed that the sulphanilamide substituted derivatives did not showed any inhibition against all the organism whereas amino substituted shciff and mannich base showed significant degree of inhibition. Finally, it has been concluded that mannich base derivatives of amino substitution at 3rd position in guinazolinone nucleus exhibited a higher degree of inhibition and also superior in its antibacterial activity against gram positive bacteria S. aureus and B. cereus.

Keywords: Quinazolin-4(3H)-one, Sulphanilamide, Isatin, Mannich, Schiff base, Antibacterial activity

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Biography

Dinesh Kansal working as an professor and HOD in the Department of Pharmacology at Dr Rajendra prasad Government Medical College Kangra. He has completed his graduation MBBS in the year 1983 at Himachal Pradesh University, Shimla, HP. He has done his masters degree in the year 1998 at Himachal Pradesh University, Shimla, HP. He has teaching experience from past 28 years. His area of interest is Neuro pharmacology, Experimental and Analytical Pharmacology, Clinical Pharmacology and Pharmacovigilance. He has published 28 Research Papers in International / National Journals.He got Bharat Vidya Rattan award by International Business Council, New Delhi. He has Organized CME on Pharmacovigilance at Dr RPGMC Kangra at Tanda in October 2013. Organized CME on Haemovigilance at Dr RPGMC Kangra at Tanda in April 2014.

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PATTERN OF ADVERSE DRUG REACTIONS IN A TERTIARY CARE MEDICAL COLLEGE AND HOSPITAL

Background: Adverse drug events can lead to admission in hospital, prolongation of hospitalisation, increase in investigation and treatment costs, deformities, danger to life and even death.

Methods: A retrospective analytical study was conducted of adverse drug reaction (ADR) reports collected in our ADR Monitoring Centre established in pharmacology department under the Aegis of Indian Pharmacopoeia Commission (IPC) Ghaziabad (MINISTRY OF Health & Family Welfare, Govt of India). Data pertained to the period from March 2015 to March 2018.

Results: A total of 1059 reports were analysed. 568(54%) patients were females and 491(46%) were males. The majority of ADRs were due to Cancer Chemotherapy agents in 493(46.5%) patients, followed by 182(17%) in HIV patients, and 162(15%) in TB patients. 726(68.5%) patients recovered completely at the time filling up of form, 328(31%) were recovering and 5 patients died. 3 deaths were of snake bite cases and 2 deaths were of MDR TB cases.

Conclusion: Awareness and timely intervention in case of ADR can save many precious lives.