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35 Years in Assessing the Impact of Healthcare Research

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Volume 06







6th INTERNATIONAL CONFERENCE ON

NURSING SCIENCE AND GYNECOLOGY-GENETICS

JUNE 20-21, 2022 | PARIS, FRANCE

Hosting Organization: PULSUS 40 Bloomsbury Way, Lower Ground Floor, London, UK, WC1A 2SE

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UPCOMING CONFERENCES

7th International Conference on
Human Genetics and Genetic Disorders
November 21-22, 2022 | London, UK

7th International Conference on
Nursing Science & Technology
November 16-17, 2022 | Paris, France

7th World Congress on
Gynecology and Obstetrics
December 05-06, 2022 | Dubai, UAE

ICNG 2022

Scientific Program

Registrations
08:30-08:45

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Opening Ceremony
08:45-09:00

Monday | June 20, 2022 | Day 1

Hall: Bleriot

Keynote Forum

09:00-10:10

Title: Bettering nursing healthcare: Teaching nurses how to identify, address and mitigate racial bias in practice

Dionne Wright Poulton, Care New England Health System, USA

10:10-10:40

Title: Improving beside care quality through strong healthcare leadership

Lakel Ebb, Founder/CEO of The Wealthy Nurse, Well Managed Care and host of "The Wealthy Nurse Hour" Podcast on Voice America Radio, USA

Group Photo Session | Networking & Refreshment Break 10:40-11:00 @ Foyer

11:00-11:30

Title: "Family Midwives" - Emotional and social-psychological support and care for all kinds of families

Jennifer Jaque-Rodney, University of Lubeck, Germany

11:30-12:00

Title: An exploration of family caregiver experiences of burden and coping while caring for people with Mental Disorders in Saudi Arabia—A qualitative study

Loujain Sharif, King Abdulaziz University, Saudi Arabia

Plenary Sessions

Session: Gynecology & Obstetrics | Nursing Education | Evidence-Based Nursing | Critical Care Nursing

Session Chair: Loujain Sharif, King Abdulaziz University, Saudi Arabia

12:00-12:25

Title: New promise in correction of Vulvovaginal Laxity Syndromes

Ing Eva Hamplova, COMPEX, spol. s r.o, Czech Republic

12:25-12:50	**Title: Individual dynamic Endometrial Maturation: A new fact that leads to reconsider strategies for timing of Embryo transfers** **Joachim Alfer,** Friedrich-Alexander University of Erlangen–Nürnberg, Germany
12:50-13:15	**Title: Older adult with Transtrochanteric Fracture-Nursing process based on Virginia Henderson** **Z.L. Rodríguez-Hernández,** University of Coahuila, Mexico

Lunch Break 13:15-14:15 @ Belle Epoque

Session on: Nurse Practitioner | Gynecology | Women's Health | Genetics-Cytogenetics

Session Chair: Lakel Ebb, Founder/CEO of The Wealthy Nurse, Well Managed Care and host of "The Wealthy Nurse Hour" Podcast on Voice America Radio, USA

14:15-14:40	**Title: Clinical reflection and leadership in efficient management of patients in the Intensive Care Unit** **Nawaf Alharthi,** King Abdulaziz Specialist Hospital, Saudi Arabia
14:40-15:05	**Title: Attitudes and barriers to breastfeeding among Mothers in Princess Nourah Bint Abdulrahman University, Riyadh, Kingdom of Saudi Arabia** **Hayat Saleh Alzahrani,** Princess Nourah Bint Abdulrahman University, Saudi Arabia
15:05-15:30	**Title: DNR order: What are my boundaries? Nurses role and attitude** **Samah Abdullah Al Araimi,** National Heart Centre – Royal Hospital, Oman
15:30-15:55	**Title: Relationship of the type of breastfeeding in the sexual function of women** **Juliana Bento de Lima Holanda,** Universidade de São Paulo, Brazil
15:55-16:20	**Title: Human Metagenomes' hidden association with chronic diseases (overview)** **Elmira DAVASAZ tabrizi,** Istanbul University, Turkey

Networking & Refreshment Break 16:20-16:40 @ Foyer

16:40-17:05	**Title: Copy number variation in Autism Spectrum Disorders in Egyptian patients** **Amal M. Mohamed,** National Research Centre, Egypt

Exhibitor-Hosted Sessions

17:05-17:25	**Title: Macrogen commitments in Genetics and research support** **Habib Bouazzi,** Macrogen, France
17:25-17:45	**Title: Macrogen sequencing institute 25 year of life science support** **Damien Fonteneau,** Macrogen, France
17:45-18:05	**Title: Jett plasma for her a plasma generator for gynecology** **Francois CARMONA,** SURGILAB, France

Thanks Giving and Closing Ceremony

Tuesday | June 21, 2022 | Day 2

Virtual Sessions

09:00-09:30

Title: Early hospice intervention

Kristen L. Marcheski, Executive Director at Geisinger Hospice, USA

09:30-10:00

Title: Effective antimicrobial stewardship education to licensed nurses in a long term care facility

Gloria Escalona, San Jose State University, USA

10:00-10:30

Title: The conversation about end-of-life. A form of early intervention addressing psycho-spiritual needs/problems

Octavio Areas, Le Bonheur Health Level Trauma Center, USA

10:30-11:00

Title: Breast tumor of papillary lesion in woman's health: New insight differently

Shinya Tajima, National Hospital Organization Shizuoka Medical Centre, Japan

11:00-11:30

Title: The principles of Palliative Care

Annette van Ginkel, King Abdullah Bin Abdulaziz University, Saudi Arabia

Sessions: Palliative Care Nursing | Neuroscience Nursing | Cytogenetic | Women's Healthcare | Gynecology | Nursing Education | Cancer Nursing

Session Chair: Kristen L. Marcheski , Geisinger Hospice, USA

11:30-12:00 **To ensure mental well-being of the patient and family at the end of life**

Deblina Roy, T S Misra College of Nursing, India

12:00-12:30 **Early integration of palliative care in management of chronic illness**

Vidya N, Radiant Hospital, India

Lunch Break 12:30 -13:30

13:30-14:00 **Title: Factors influencing management effectiveness in patients with a minor brain haemorrhage**

Sofica Bistriceanu, Academic Medical Unit – CMI, Romania

14:00-14:30	**Title: Impact of the integration of artificial intelligence in the university hospital clinical environment. Study in the Quebec public health network** **Laurent Fellonneau,** University of Strasbourg, France
14:30-15:00	**Title: Nursing Education - Transforming the future of the healthcare vertical globally** **Bindhu Varghese,** NMC Healthcare, Sultanate of Oman
15:00-15:30	**Title: Psycho-social aspect encountered by health professionals in work environment at primary health care centers in Dammam city** **Abrar Y Banibakhsh,** Inaya Medical Colleges, Saudi Arabia
15:30-16:00	**Title: Whole transcriptome analysis revealed a stress response to deep underground environment conditions in Chinese Hamster V79 lung Fibroblast Cells** **Jifeng Liu,** Sichuan University, China
16:00-16:30	**Title: Evaluation of fetal cardiac morphology and functions in pregnant women with familial Mediterranean fever** **Deniz OLUKLU,** Ankara City Hospital, Turkey
16:30-17:00	**Title: Executive functions and memory in Parkinson's disease patients with and without Deep Brain Stimulation** **Thayná Laís de Souza Arten,** Federal University of Parana (UFPR), Brazil
17:00-17:30	**Title: Knowledge and attitude related to cervical cancer prevention and screening among female students in the college of nursing, Kuwait** **Nabil A Badawy,** Public Authority for Applied Education and Training, Kuwait
17:30-18:00	**Title: The effect of progressive muscle relaxation training on chemotherapy -induced nausea, vomiting and anxiety in Egyptian breast cancer women: A randomized controlled trial** **Rania El-Kurdy,** Mansoura University, Egypt
18:00-18:30	**Title: Cultural clash of Somali female adolescents regarding sexual and reproductive health services in Oslo, Norway** **Tamanna Afroz,** International Centre for Diarrhoeal Disease Research, Bangladesh

Award and Closing Ceremony

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- Sonography Canada
- Thalassaemia International Federation
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Supporting Journals

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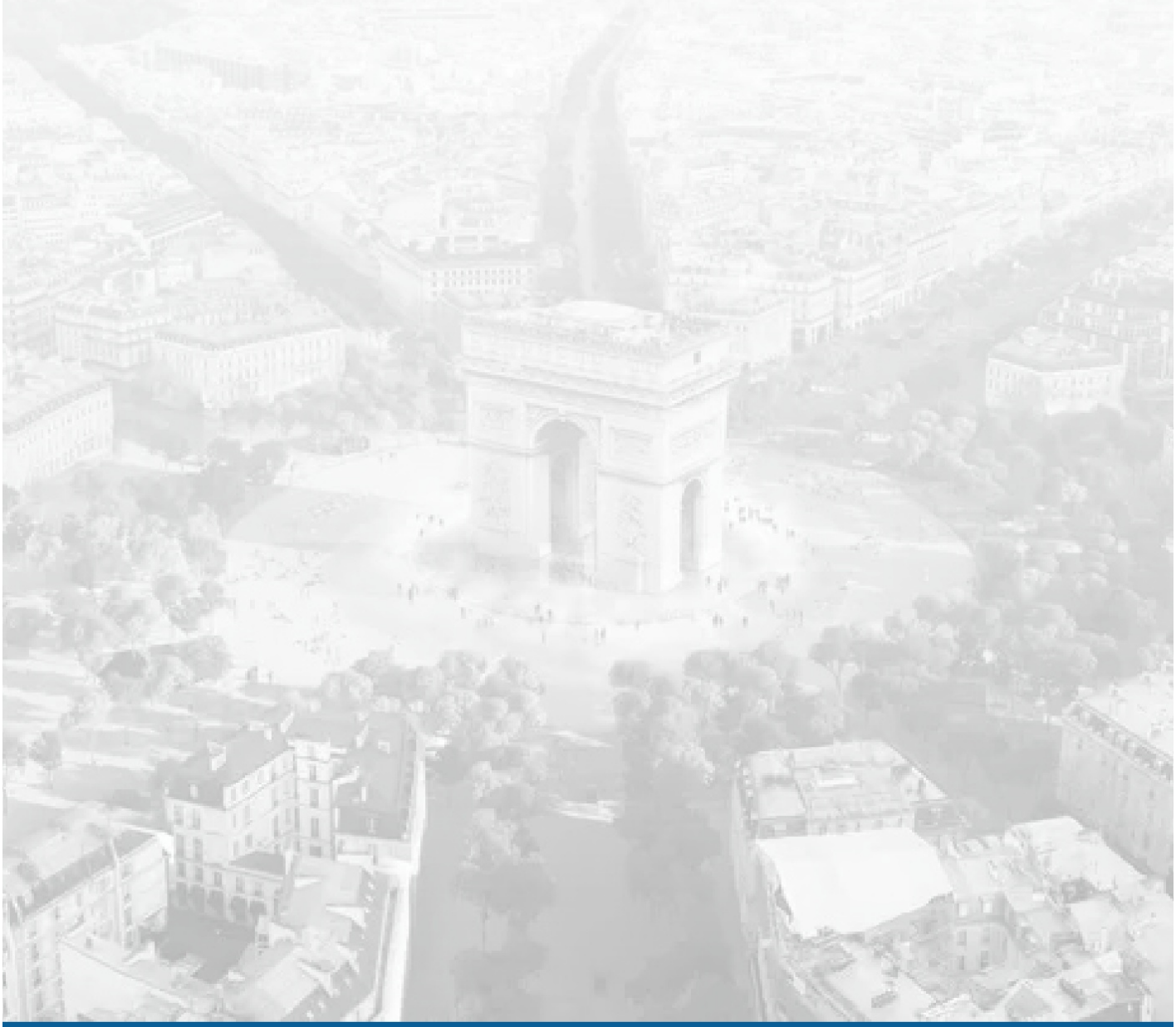
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Supporting Journals

Journal of Archives of Nursing and Care

Journal of Reproductive Biology and Endocrinology

Journal of Genetic Disorders and Genetic Medicine



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Humanizing Genomics
macrogen
EUROPE

About us

Macrogen Europe was founded in 2008 and provides fast and reliable Sanger sequencing, next generation sequencing (NGS) and bioinformatics services to scientists in Europe and Africa. Using the latest equipment from industry-leading providers such as Illumina, Thermo Fisher Scientific and Pacific Biosciences, we help scientists accelerate their genomics discoveries.

Since its foundation, Macrogen Europe's headquarters have been located on the grounds of the Amsterdam Medical Center in the Netherlands, where – in 2021 – it moved to a new, state-of-the-art laboratory. It also has sequencing facilities in Maastricht (NL) and local representatives across the region.

A Global Network

Excellence in sequencing thanks to a worldwide team of experts

Macrogen Europe started out as a branch office of South Korea-based Macrogen Inc: a company that has been innovating genomics since 1997. To this day we maintain a close collaboration with their global network of sequencing experts – to make sure we get the most comprehensive data from every sample.

Our Mission

Helping everyone live a healthy, happy life using genome information

Whether you work in drug development, food safety, environmental monitoring or fundamental research, your work contributes to people's health and wellbeing. It is our mission to help you accelerate your discoveries with our genomics services.

Whole genome sequencing



Get the most complete genomic information of any organism with whole genome sequencing (WGS). Macrogen Europe's fast, high-quality WGS services provide the most comprehensive tool for detecting genetic abnormalities such as single nucleotide polymorphisms (SNPs), indels, copy number variation (CNV) and structural variants (SVs).

Whole exome sequencing



Choose efficient, cost-effective sequencing focused on protein-coding regions. Our whole exome sequencing (WES) service lets you choose from a range of industry-leading library prep kits for hybridization enrichment – including those from Agilent and Twist – to make sure you get the reliable libraries you need.

Targeted panel sequencing



Targeted panel sequencing combines cost-effective sequencing with high coverage of your genes of interest. Learn more about our targeted panel services for tissue samples, FFPE, blood, cell cultures and many other sample types.

RNA sequencing



Transcriptome sequencing, or RNA sequencing, offers a detailed picture of cell function and behavior by looking at RNA transcription. Our RNA sequencing service provides a range of possibilities to study total RNA, mRNA or other RNA fractions with high precision and reliability.

Single cell sequencing



Go beyond averages and get the most accurate picture of your cells' transcriptomes with single cell sequencing. Using state-of-the-art 10x Genomics Chromium technology, we offer accurate, reliable data – including immune cell profiling – at various throughput levels to suit your requirements.

Epigenome sequencing



Discover the epigenetic factors influencing gene expression and function. Our versatile epigenomics services, such as whole genome bisulfite sequencing, targeted methylation-capture sequencing and ChIP sequencing can help you analyze DNA methylation and study the interactions between DNA and histone proteins.

Metagenome sequencing



Discover the microbial communities in your samples, even the ones that are hard to culture in the laboratory, in great detail with metagenomic sequencing. Our sequencing services for amplicon and shotgun sequencing can help you identify microbes and find functional information quickly and easily.

Contact: Macrogen Europe: B.V. Meibergdreef 57 1105 BA, Amsterdam, he Netherlands
Tel: +31 20 333 7563 | **Email:** info@macrogen-europe.com

Novogene

Novogene is a leading provider of genomic services and solutions with cutting edge NGS and bioinformatics expertise and the largest sequencing capacity in the world. Novogene delivers unsurpassed data quality to support our customers'research goals. We are a world-leader in NGS services, with thousands of employees and multiple locations across the globe. Novogene has strong scientific expertise and experience with 40 NGS-related patents, as well as over 790 research papers with total impact factor at more than 6120, including publications in first tiers journals such as Cell, Nature and Science.

As the largest NGS service provider headquartered in Beijing with branches in Hong Kong China, US, UK, Singapore, Netherlands, Japan and Thailand, Novogene was founded in 2011 and has been growing rapidly over the past few years. Novogene has genomic sequencing labs in the US (at The University of California at Davis campus), China, Singapore, and the UK (Cambridge).

Novogene is an Illumina Genome Network partner that has done work for many of the largest and most prestigious institutions around the world. Novogene has a track record of performance and reliability and more advanced NGS capacity in the world. We've proudly served over 5,900 customers globally, collaborating with scientists in 70 countries and regions. We offer a range of NGS-based services for human, plant, animal and microbial DNA and RNA analysis at highly competitive prices.

QUALITY

Our informatics expertise and strict adherence to quality control enable us to offer an industry-leading Q30 guarantee that exceeds even Illumina's own official Q30 guidelines. This results in the highest quality data, unsurpassed by any other NGS service provider.

ANALYSIS

With Dr. Li's expertise, bioinformatics scientists and standard sample automatic bioinformatics analysis system, we give our customers "publication-ready data".

TECHNOLOGY

Using our array of state-of-the-art Illumina systems (NovaSeq 6000, HiSeq X Ten, HiSeq 4000, and HiSeq 2500), PacBio Sequel system, Oxford Nanopore PromethION and Thermo Fisher Ion proton, we select the most effective system for our customers' needs.

CAPACITY

Our large assembly of NGS systems enables us to run projects of any size, including those that require massive amounts of sequencing and analysis.

TURNAROUND

We complete projects faster than local cores and the vast majority of service providers due to our scientific acumen (65% of our employees have advanced degrees) and NGS capacity.

Novogene uses leading technology from Illumina, Pacific Biosciences, Oxford Nanopore and Life Technologies, in our state-of-the-art sequencing centers in California (USA), Cambridge (UK), Singapore and China.

Reliable and high quality NGS data is a key component in genomics research. At Novogene, we use the most effective technology available from world leading providers including Illumina NovaSeq 6000, HiSeq, Oxford Nanopore, Ion Torrent and PacBio Sequel platforms. Over the years our NGS labs have developed optimized NGS processes and protocols to ensure the best possible scientific outcome for your research.

Not only do we offer state of the art NGS technology, we also have the largest sequencing capacity in the world with an annual throughput of over 280,000 human WGS samples.

We are one of the Illumina certified provider and one of the main partner of Illumina Genome Network in China. Besides, we are one of the largest PacBio Sequencing service provider in the world with > 10 units of Sequel Sequencers. Our experience and access in a diverse range of systems and protocols allow us to deliver the best possible results to support our customers' research.

Novogene UC Davis Sequencing Center was founded in early 2016, equipped with the NovaSeq 6000, HiSeq X Ten, and HiSeq 4000 sequencing platforms to serve customers in North and South America. Next generation sequencing services and analysis of human, plant, and animal samples are offered for both research and clinical purposes.

Novogene Cambridge Genomic Sequencing Centre, the first European sequencing centre of Novogene Europe, was established at Babraham Research Campus in May 2018, and relocated to Cambridge Science Park in August 2019 due to rapid business expansion. The Centre is now equipped with automatic workstations, multiple NovaSeq 6000s, and High-Performance Computing Clusters.

Novogene has successfully established a CAP-accredited medical lab in Tianjin, China. This world class facility enables us to provide high-quality clinical sequencing services globally. The Tianjin lab also provides solutions to test liquid biopsy samples using Novogene's digital PCR platform. In partnership with AITbiotech, Novogene has also launched a genomics center in Singapore to deliver NGS services in Asia Pacific, Middle East and Africa






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About us

Distribution of medical devices in various specialties. Ophthalmology, Dermatology, Gynecology, Aesthetic Surgery for Equipment, Instruments, Consumables, conventional and innovative. Specialist in the export of medical devices and equipments.

Exhibiting instruments or devices

Jett Plasma For Her II – Gynecology device for vaginal rejuvenation –

JETT PLASMA For Her II provides a solution for issues connected to vulvovaginal laxity, such as insufficient vaginal moisture, burning and itching, incontinence and sexual discomfort due to vaginal dryness, reduced tightness, elasticity and sensitivity. Developed mainly for women after childbirth and menopause.

The device based on the physical principle of direct current performs membrane depolarization, reversible electroporation and generates heat, which activates the formation of a new collagenous connective tissue that breaks down and replaces the old tissue. A stronger and more elastic fibrous structure is formed and tissue rejuvenation occurs.

Basic information

- Certified Medical device (CE1023 - Institute for testing and certification)
- Patented DC technology
- Simple handling and control
- 8 intensities available
- 3 types of applicators in the standard pack
- Safe, comfortable, painless treatment
- No hormones, no scars, no anaesthesia
- Certified for gynaecology

Mechanism

Positive effect of JETT PLASMA For Her II is caused by combination of heat, membrane depolarization and low threshold reversible electroporation. The passage of direct current generates heat, which activates the formation of new collagen connective tissue, leading to a rejuvenation and stronger and more flexible tissue structure. Membrane depolarization and reversible electroporation reduces the barrier and enable easier passage of ions and molecules through cell membranes.

Issues connected to vulvovaginal laxity, such as:

- Insufficient vaginal moisture
- Stress incontinence and sexual discomfort due to vaginal dryness, reduced tightness, elasticity and sensitivity
- Burning and itching

Contradictions

When using the JETT PLASMA For Her II device, electrical current flows through the patient, and therefore it is necessary to make sure that the following contraindications do not apply to the patient:

- Pacemaker, Holter ECG monitoring system
- Another implanted electrical device
- Pregnancy
- Metal implants in the treated area
- Any untreated/badly treated disease in vulvovaginal region
- Menstruation



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DAY-1
Keynote Forum

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Dionne Wright Poulton, J Nurs Res Pract 2022, Volume 06

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Dionne Wright Poulton
Care New England Health System, USA

Bettering nursing healthcare: Teaching Nurses how to identify, address and mitigate racial bias in practice

Ironically, the year 2020 afforded us an opportunity to 'clearly see' the deep impact of racism and racial bias on black and brown people around the world. From Covid-19 disproportionately effecting and infecting many thousands—to the shockingly heinous murder of George Floyd, for many witnesses it was a unique, eye-opening experience. However, for others it was an "It's about time" moment that finally and unequivocally elucidated the tragic lived experiences of black and brown people in our society. These events should not have been a surprise to nurses or any other healthcare workers either— especially those in the United States. According to the Center for Disease Control, black women are three to four times more likely to die from pregnancy-related causes than white women, and the US has the worst pregnancy-related death rates than in any industrialized country—including behind Mexico and Uzbekistan. Researchers posit the root cause of these tragic statistics is racism, which is succinctly defined as "Racism=Prejudice + Power" (Bidol, 1972). This equation is especially helpful for Chief Diversity Officers leading diversity endeavors in healthcare systems to reference when educating nurses about the adverse impact of racism and racial bias on the lived experiences of black and brown people. It is also an equation, by definition, that signals to all healthcare professionals, their potential to practice racism and racial bias without full awareness or intent. Research suggests there is a normal and involuntary component to how the brain makes snap judgments, associations, and categorizations to make sense of the world, so this must likely happen at work too. Thus, teaching nurses and other healthcare professionals to consider racial bias as a possible influence on their practice is not an indictment on these professionals. It is education. This presentation provides specific strategies re how to address resistance from nurses in healthcare systems who might reject the notion that as members of a "helping profession," that they could ever harbor or potentially exhibit racial biases that can potentially lead to adverse outcomes and experiences for black and brown patients.

Recent Publications

1. Bidol, Pat A. (1972) Developing New Perspectives on Race: An Innovative Multi-media Social StudiesCurriculum in Racism Awareness for the Secondary Level. New Perspectives on Race.
2. Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths, Black, American Indian/Alaska Native women most affected, September 5, 2019

Biography

Dionne Wright Poulton is Vice President and Chief Diversity Officer at Care New England Health System in the State of Rhode Island where she oversees all diversity, equity and inclusion endeavors involving almost 8,000 employees and many thousands of patients served each year at three hospitals, four healthcare facilities, and at 80+ ambulatory sites across the State. She is a leading expert on DEI, unconscious bias, and transformational adult learning and behavior, and is a certified K-12 teacher with degrees from Rice University, University of Toronto, San Francisco State University, and a Ph.D. from the University of Georgia. Dr Poulton also sits on several Boards, including the American Heart Association, and has been featured in Forbes. She is also author of the acclaimed book, It's Not Always Racist...but Sometimes It Is: Reshaping How We Think About Racism (2014, Archway Publishing); and is host of the popular podcast, "The Dr. Dionne Show," which focuses on DEI in the workplace and beyond. Dr. is a proud mom of two teenaged young women.

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Lakel Ebb

Founder/CEO of The Wealthy Nurse Institute, USA

Improving beside care quality through strong healthcare leadership

The healthcare industry is one of the most demanding, with thousands of nurses tasked with providing exemplary care to patients each day. Unfortunately, the truth is that while nurses play an integral role in improving healthcare experiences for patients, they're often overworked, underpaid, and under appreciated. In addition, most nurses struggle to find the ideal balance between their work and personal lives because their jobs are so emotionally, mentally, and physically taxing. Poor leadership in the nursing field creates growing problems for healthcare professionals and makes it difficult to improve the level of care provided to patients at the bedside due to a lack of support and guidance. The key to resolving this problem is to focus on providing quality leadership within various healthcare organizations. Nurse leaders are paving the way for patients to receive a much greater level of care. They're working every day to open doors for communities, including those in underserved and disadvantaged areas, to receive the high-quality care they need and deserve. By changing the way in which healthcare leadership operates, more advantages to the public who depend on the services provided by nurses will be seen. Individuals with a nursing background and mindset bring a brand new and much needed perspective to leadership boards at hospitals and healthcare facilities. It is essential that these nursing leaders step up to advocate for nurses. Ensuring nurses are happy and healthy in their day-to-day job will ensure top-quality care for deserving patients. When nurses are able to implement change at the leadership level, increasing their influence, and use their expertise to change the way in which nurses work on a daily basis, bedside care for those that need it the most drastically improves. Leveraging your expertise can help you get significantly further in your nursing career. Although you'll face a series of challenges in making the shift from the bedside to businesses, you can expect to see the fruits of your labor blossom into something incredible with effort and determination. You can take what you've learned throughout the years and use it as the stepping stone in a new leadership position. The Wealthy Nurse Business System will guide you on your path to success, encouraging you to utilize your skills to become a nurse leader who excels in running a healthcare business. Discover how you can increase your influence while doing what you're passionate about and enjoy most. Along with the business system, The Wealthy Nurse offers a high-quality luxury scrub line designed with Nurse Managers, Chief Nursing Officers, Supervisors, and other healthcare leaders in mind. Designed by a Registered Nurse with more than 15 years of experience in the nursing field, these sophisticated pieces provide nursing professionals with professional yet comfortable clothing to wear when completing daily tasks. When you look good and feel your best, you can maintain a healthy mindset and remain productive throughout the day. Wealthy Nurse Scrub is not just a brand; it's a lifestyle!

Biography

Lakel Ebb is a nurse entrepreneur, founder/CEO of The Wealthy Nurse, Well Managed Care and host of "The Wealthy Nurse Hour" Podcast on Voice America Radio. Having worked in the nursing profession for over 15 years, she understands deeply the enormous role nurses, aides, and caregivers play in providing quality healthcare to patients in hospital and at home. Recognizing how undervalued and underpaid these dedicated professionals often are, she established The Wealthy Nurse Institute to offer consulting services, education, business strategies, and coaching for nurses and aides looking to succeed and advance. Whether she's providing one-on-one guidance or teaching a lecture at one of the local colleges, Ms. Ebb boosts morale and offers invaluable insight on leadership and business strategy, reimbursement methods, regulations, management principles, delegation, conflict resolution, persuasion, and more. She promotes creativity and flexibility,

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encouraging others to welcome challenges while maintaining the highest levels of trust, patience and exceptional care. Lakel Ebb's journey from bedside to business began when she entered healthcare as a nurse's aide. She earned her Bachelor of science degree in Nursing and is currently continuing her education to earn her MSN and MBA at the University of Maryland School of Business. Throughout her nursing career, she has worked as an ER nurse, case manager, and nurse instructor. Lakel has gained most of her experience from world renowned facilities such as Johns Hopkins Hospital and George Washington University Hospital. Lakel Ebb believes in working hard and staying humble. To stay centered, she writes and listens to daily affirmations on peace, purpose and wisdom. When she's not working, Ms. Ebb enjoys quality time with her husband and four children.

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Jennifer Jaque-Rodney,, J Nurs Res Pract 2022, Volume 06

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Jennifer Jaque-Rodney
University of Lubeck, Germany

"Family Midwives" - Emotional and Social-Psychological support and care for all kinds of families

The true meaning behind Early Childhood Support allows us to identify and provide effective early support to parents and their new-borns and children before problems occur.

Effective Early Childhood Support works to prevent problems occurring, or to tackle them directly before problems get worse.

The Early Childhood Support goals in Germany derive from the UN Convention on the Rights of the Child (CRC), according to which all children have the right to protection, support, and participation, 'irrespective of the child's or his or her parents' or legal guardians' race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status' (Art. 2, Section 1, CRC).

The work of the "Family Midwives" within the Early Child Support schemes is available in all federal states in Germany.

The Family Midwives are employed in Mother Child Support Projects taking care of single parent women, or men, pregnant women and mothers and fathers, who live in communal institutions with an absence of social support within their family.

Early Childhood support through Family Midwives offers a variety of support for families with children up to the age of three.

Family Midwifery acts on behalf of health promotion and health prevention. The psychosocial, emotional, and medical counselling and support of families in need is of upmost importance. The work involves regular home visits and home care with the interdisciplinary cooperation with other professionals.

Family Midwives work with Doctors, Social workers, Welfare services, Teachers, Educators, Government run-facilities, public facilities, and other such social services.

Continuity of care with a trusted professional who has the competence to set up and maintain a medical and social network with support during and after pregnancy, by taking care of parents with their new-borns and small children of up to three years of age is of utter importance to fulfil the goals an idea of a targeted Early Childhood Support.

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Biography

Jaque-Rodney in 2000 has been the Co-founder of the network Family Midwives. In 2001, she has been Provision of the Internet presence www.familienhebamme.de - the first online portal for family midwives. In 2004 – 2005, Contribution towards the German Midwifery Association (DHV) curriculum "From the Midwife to the Family Midwife" and to the professional profile "The Family Midwife". 2007 First Family Midwives' representative of the state association of Family Midwives in North Rhine-Westphalia. 2008 Development and implementation of the "Bochum Prenatal Prevention Project" as a Family Midwife and project coordinator at the public health department of the city Bochum. 2009 Member of the expert commission “Child Protection”' of the Ministry “Children and Youth” of the state of North Rhine-Westphalia. 2010 Member of the German Midwifery Associations (DHV) commission “Family Midwifery”. Since 2010 Organiser the advanced training courses "From the Midwife to the Family Midwife" in the state of North Rhine-Westphalia. 2011 Completion of studies (BSc) of Midwifery Sciences at Caledonian University of GlasgowUNICEF New Year reception. Since 2012 Development and implementation of Mülheim's Early Prevention project "For a Good Start into Life" as a project manager and coordinator of Mülheim's Social Urban Development Company ltd. (Mülheimer Gesellschaft für soziale Stadtentwicklung mbH). 2012 Contribution towards the guideline for municipalities "The Deployment of Family Midwives in Early Prevention Networks" of the National Center for Early Prevention (Nationales Zentrum Frühe Hilfen – NZFH). 2012 Contribution towards the "Competence Profile Family Midwives" of the National Center for Early Prevention (NZFH).

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Loujain Sharif, J Nurs Res Pract 2022, Volume 06

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Loujain Sharif
King Abdulaziz University, Saudi Arabia

An exploration of family caregiver experiences of burden and coping while caring for people with Mental Disorders in Saudi Arabia—A qualitative study

Family caregivers of people with mental disorders face a number of burdens and stressors, such as associative stigma and burnout. These burdens are often a result of their caring role coupled with insufficient support or ineffective coping strategies, which can affect their quality of life and biopsychosocial integrity that, in turn, may affect the care they provide. This study aimed to explore the experiences of family caregivers of people with mental disorders, through examining the burdens that they face and the coping strategies that they use. Using a descriptive qualitative approach, 13 semi-structured interviews were conducted with members of the Saudi public, recruited through popular social media platforms and analysed using thematic analysis. Five main themes were constructed from the data: Type of care, Challenges, Coping and support, Perceptions of public awareness, and Messages to others. The findings emphasize the different types of burdens that caregivers experience, and their needs that require a range of responses such as educational training on effective coping strategies, and psychological support in the form of counselling or group therapy. This study highlights the voice of caregivers and their message to the public, in order to correct the misconceptions surrounding mental disorders and those associated with them.

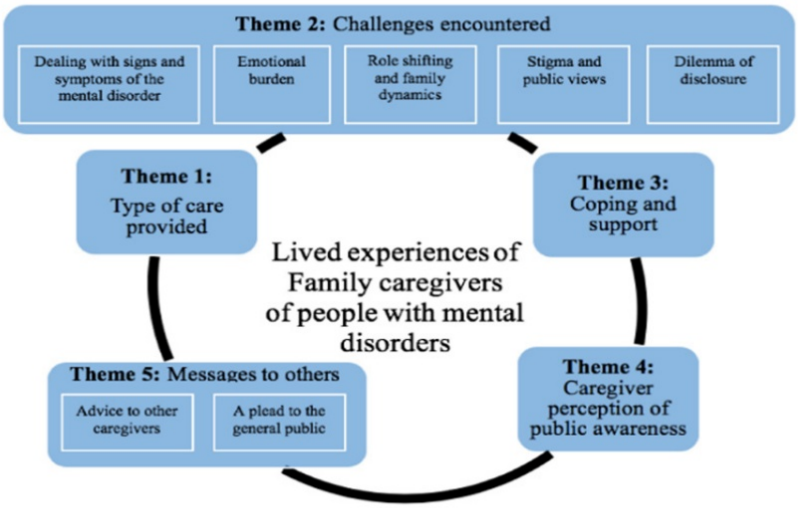


Figure 1. Diagrammatic representation of the main and sub-themes found in this study.

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Biography

Loujain Sharif completed her doctoral degree in Nursing Research at King's College London which entailed devising and testing an educational intervention to reduce mental health-related stigma in a sample of nurses in Saudi Arabia. She also has a Master of Science in Mental Health Studies from the Institute of Psychiatry and Psychology and Neuroscience (IoPPN), King's College London. She is currently an assistant professor and the head of the Psychiatric and Mental health nursing department at the Faculty of Nursing at King Abdulaziz University , Jeddah, Saudi Arabia.

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King Abdulaziz University, Saudi Arabia

Co-Chair
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Care New England Health System, USA

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Founder/CEO of The Wealthy Nurse, Well Managed Care and host of
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Title: Clinical reflection and leadership in efficient management of patients in the Intensive Care Unit
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Title: Attitudes and barriers to breastfeeding among Mothers in Princess Nourah Bint Abdulrahman University, Riyadh, Kingdom of Saudi Arabia
Hayat Saleh Alzahrani, Princess Nourah Bint Abdulrahman University, Saudi Arabia

Title: DNR order: What are my boundaries? Nurses role and attitude
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Title: Human Metagenomes' hidden association with chronic diseases (overview)
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Title: Copy number variation in Autism Spectrum Disorders in Egyptian patients
Amal M. Mohamed, National Research Centre, Egypt

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Ing Eva Hamplova, J Nurs Res Pract 2022, Volume 06

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New promise in correction of Vulvovaginal Laxity Syndromes

Ing Eva Hamplova
COMPEX, spol. s r.o, Czech Republic

Vulvovaginal Laxity (VL) is caused particularly by vaginal delivery, excessive physical strain, ageing or due to hormonal changes. It is influenced by insufficient vaginal wetness, burning and itching in vaginal orifice, yeast infections and inflammations. The consequences are collagen changes, incontinence and worsening of sexual life, often followed by mental issues as well. The use of Jett Plasma For Her II (JPH II) device is a new promise in correction of weakened pelvic muscles and vaginal walls and improvement of the VL symptoms. Therapeutic effects are achieved through membrane depolarization, reversible electroporation and thermal stimulation. Collagen activation is started and tissue structure is strengthened. The procedure is painless, well tolerated, without anaesthetic, it solves rejuvenation of atrophied vaginal mucosa and symptoms cease significantly.

The effect of the treatment with JPH II device is currently being verified by a prospective Post-Market Clinical Follow-up study (PMCF study) via questionnaires aimed at assessment of patient's VL symptoms and sexual satisfaction. Each patient's satisfaction recorded in questionnaire was monitored at the beginning of study and then gradually over the course of study, showing excellent results with substantial improvement during the treatment. Overall increase in patient's sexual satisfaction and improvement of VL symptoms was higher than 30 %. Furthermore, a collection of biopsy samples before first and after last treatment was gathered and compared with each other. As a result, comparison of all biopsy samples before and after treatment even showed 222 % average increase in epithelial thickness of vaginal wall.

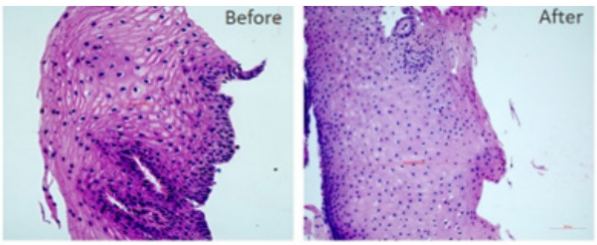


Figure 1: Comparison of epithelial thickness of patient's no. 1 biopsy samples (patient - 45 years, 4 pregnancies, 4 vaginal births, 48 months after last birth) **before and after treatment** with JPH II.
The pre-treatment epithelial thickness of the patient was 226.86 µm. After the third treatment, the biopsy was taken again and epithelial thickness increased to 528.90 µm. Thus, there was 233 % increase in the epithelial layer.

In conclusion, these outstanding results indicating significant improvement in patient's state show a great potential in JPH II treatment of vaginal laxity, stress incontinence and improvement of sexual function and often related mental issues. Altogether, Jett Plasma For Her II represents an elegant solution for women dealing with the sensitive issue of vaginal laxity.

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Biography

Ing Eva Hamplova working as Clinical Expert at COMPEX, SPOL. S R.O. Preparing clinical evaluation, clinical investigation, implementation and maintenance of quality management system documentation according to ISO 9001 and 13485, providing internal and suppliers audits, preparation and management of technical, documentation of medical devices, communication with a notified bodies TÜV SÜD. Product Service GmbH and Institute for testing and certification, foreign certification and registration medical devices

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Joachim Alfer, J Nurs Res Pract 2022, Volume 06

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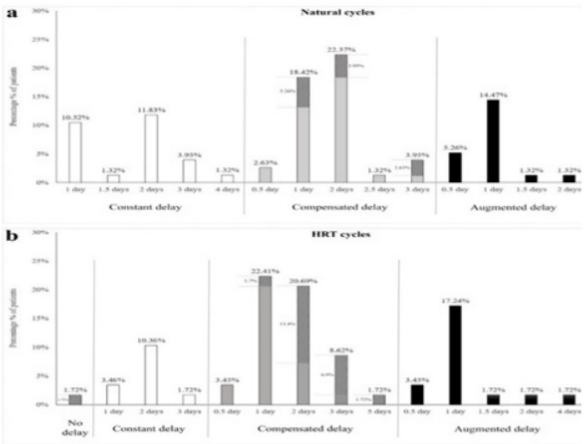
Individual dynamic Endometrial Maturation: A new fact that leads to reconsider strategies for timing of Embryo transfers

Joachim Alfer
Friedrich-Alexander University of Erlangen–Nürnberg, Germany

Statement of the Problem: The knowledge about the endometrial receptive stage for embryo transfer in IVF treatment is very important but unknown as well. Measuring the endometrial thickness and trilaminar pattern by ultrasound provides only a hind of a sucessful start of the menstrual cycle at the end of the follicular phase. Aim of this study was to monitor the endometrial transformation process applying our Personal Endometrial Maturation Analysis (PEMA®). We wanted to get information about the transformation process and to exclude an arrest of that organ, which cannot be done by one biopsy.

Methodology & Theoretical Orientation: Two biopsies were taken mainly at days +5 and +10 after ovulation (OV, n = 76)/ hormone replacement therapy (HRT, n = 58) within one cycle. Endometrial dating is done with our new modified endometrial dating method, a combination of histomorphological analysis, based on the Noyes criteria, with a typical pattern of hormone receptors and the proliferation marker Ki-67 for each cycle day between OV/P +2 and +11.

Findings: The results were correlated with the clinically expected day of the cycle and showed temporal delays or hypercompensations, diverging from the expected cycle days by 0.5–5 days. In comparison with the first biopsies, the transformation rate in the second biopsies showed constant transformation, compensation or augmented delay in 28.94, 48.69 and 22.37 % of cases for ovulation in natural cycles and 17.26, 56.89 and 25.85 % for HRT cycles respectively.



Conclusion & Significance: The study revealed an individually dynamic transformation process of the endometrium using PEMA®, with the ability to compensate or enlarge an initial "delay", which is now identified as a normal individual transformation process during the secretory phase. This information will lead to a new consideration of IVF procedures and will influence timing of embryo transfers.

Recent Publications

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Biography

Joachim Alfer graduated with a dissertation on marker molecules for human endometrial functions at the Institute of Anatomy and Reproductive Biology (Director: Prof. H.M. Beier) in the Medical Faculty of RWTH Aachen University in Germany. With colleagues, he is owner and CEO of the Institutes for Pathology Kaufbeuren-Ravensburg and the Molekularpathologie Südbayern in Munich. Since 2017 he is Visiting Professor at the Mongolian National University of Medical Sciences (MNUMS) of Ulan Bator, Mongolia and lecturer at Friedrich-Alexander University of Erlangen–Nürnberg, Germany as well.

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Z L Rodríguez-Hernández, J Nurs Res Pract 2022, Volume 06

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Older adult with Transtrochanteric Fracture-Nursing process based on Virginia Henderson

Z L Rodríguez-Hernández
University of Coahuila, Mexico

Statement of the Problem: The increase in the elderly population is imminent and with it the increase in hip fractures, making it essential to use the nursing process to provide specialized and comprehensive care. Objective: To provide comprehensive care based on the nursing process to an older adulto with a diagnosis of left hip transtro-chanteric fracture by the Traumatology service. Methodology & Theoretical Orientation: The nursing process was carried out, applying an assessment based on the basic needs of Virginia Henderson and extracting data from the electronic clinical record. The nursing process was applied to the 4 priority diagnoses using the North American Nursing Diagnosis Association (NANDA), Nursing Interventions Classification (NIC) and Nursing Outcome Classification (NOC) nursing taxonomies. The evolution of the older adult after 5 days of applying the interventions was evaluated. Findings: Virginia Hernderson's basic needs, food and drink, movement, resto and sleep, body cleansing and security of the environmental were altered; identifying nursing diagnoses, impairment mobility, risk of falls, acute pain and risk of infection. Subsequently, four care plans were developed with nursing interventions aimed at controlling immobility, activity and exercise, pain management, prevention of falls and infection. Conclusion & Significance: Through the nursing process visible improvements were achieved in the elderly.

Nursing diagnoses and interventions in patient with a transtochanteric fracture of the left hip.

Need 4 Movement	Need 4 Movement	Need 9 Safety of the environment	Need 8 Body cleansing
Nursing diagnosis (NANDA): Acute pain (00132) r/c Injurious agents physical m/p expressive behavior, facial expression, observation of evidence and verbal report of pain.	**Nursing diagnosis (NANDA):** Impairment of physical mobility (00085) r/c loss of integrity of bon structures, pain, intolerance to activity, physical deterioration, reluctance o initiate movement and discomfort. M/p difficulty turning, limited range of motion, postural instability and changes in gait.	**Nursing diagnosis (NANDA):** Risk of falls (00155) r/c use of assistive device, antihypertensive agents, difficulty in walking, impaired balance, impaired physical mobility, and postoperative status.	**Nursing diagnosis (NANDA):** Risk of infection (00004) r/c chronic disease, inadequate primary defenses, invasive procedure and trauma.
Outcome (NOC): Pain control (1605).	**Result (NOC):** Mobility (0208).	**Outcome (NOC):** Fall prevention behavior (1909).	**Outcome (NOC):** Risk control: infectious process (1924).
Interventions/activities (NIC): Pain management (1400) Administration of analgesics (2210)	**Interventions/activities (NIC)** Help with self-care: transfer (1806) Exercise therapy: Ambulation (0221)	**Interventions/activities (NIC)** Fall prevention (6490) Exercise therapy balance (0222)	**Interventions/activities (NIC)** Infection control (6540) Protection against infection (6550)

Figure 1: Needs of Virginia Henderson, diagnoses and nursing interventions applied in a patient with transtochanteric fracture of the left hip.

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Biography

Z L Rodríguez-Hernández graduated in nursing and master's degree in nursing from the Universidad Autónoma de Coahuila, obtaining the first place in achievement in the master's degree. She has benn the author and collaborator of various research articles, as well as book chapters and participations in multiple national and international research conferences. It has the distinction of the Presea Lobo 2020 in the category of Academic Activities by the Universidad Autónoma de Coahuila and the medal "Juan Antonio de la Fuente" as an outstanding student of the University. Active member of Sigma Theta Tau Internatinal, Honor Society of Nursing; Chapter Tau Alpha and the Red de Enfermería en Salud del Adulto Mayor.

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Nawaf Alharthi, J Nurs Res Pract 2022, Volume 06

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Clinical reflection and leadership in efficient management of patients in the Intensive Care Unit

Nawaf Alharthi
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Reflection is made on the strengths and limitations of a transformational leadership style in the context of providing care to patients in critical care units, collaborating with other healthcare practitioners and the patient's family. This involves a case study of a 49-year old patient admitted to an intensive care unit (ICU) due to severe chest pain; later transferred to cardiac catheter laboratory is presented. As part of reflective practice, the author's role in the team is explored using Belbin's 9 team roles as a guide. ICU is seen to be a complex, dynamic setting with healthcare practitioners fulfilling highly specialized roles. Conflicts in the team were avoided since all team members respected the roles of each team member. A discussion on how hierarchies in the team could possibly result in poor teamwork was also explored against what the author was experiencing in the ICU. A discussion follows how transformational leadership developed the author's emotional intelligence and improved team members' satisfaction with the quality teamwork. A critique is put forward on the importance of effective communication. Both verbal and nonverbal messages are critical in conveying and receiving important information in an ICU team. Although positive communication skills are defined, there are still some gaps in practice such as a need to develop therapeutic communication skills for positive health outcomes in patients. An evaluation of power in the team and an imbalance in power was observed. Power in a team is seen as critical in determining if resources in ICU were sufficiently used and that patients received quality, timely care and the dynamic nature of an ICU environment is examined. Patient's needs, interventions can change quickly in an ICU environment which leads to complexities especially if a patient is clinically deteriorating. Recommendations are made on the importance of developing inter professional collaborations, effective leadership and communication among team members.

Keywords: Intensive Care Unit (ICU); Nursing practice; Teamwork; Midwifery

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Biography

Nawaf is an Experienced Registered Nurse with a demonstrated history of working in the medical practice industry. Skilled in Public Speaking, Healthcare Information Technology (HIT), Health Promotion, Critical Care Nursing, and Healthcare Management. Strong healthcare services professional with a Master's degree focused in Clinical Nurse Specialist from Queen's University Belfast.

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Hayat Saleh Alzahrani, J Nurs Res Pract 2022, Volume 06

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Attitudes and barriers to Breastfeeding among Mothers in Princess Nourah Bint Abdulrahman University, Riyadh, Kingdom of Saudi Arabia

Hayat Saleh Alzahrani
Princess Nourah Bint Abdulrahman University, Saudi Arabia

Background: Breastfeeding provides unsurpassed natural nutrition to newborns and infants. It has an excellent mix of food elements and vitamins that infants need to grow. Nonetheless, the tendency for breastfeeding remains below the expected levels.

Objectives: To explore the attitudes and barriers to breastfeeding among mothers in Princess Nourah bint Abdulrahman University (PNU), Riyadh, Saudi Arabia. Methods. A cross-sectional study was conducted, from January to April 2019; 399 PNU students, employees, and faculty mothers aged 18 years and above with experience of childbirth and breastfeeding were included in and using a predesigned validated questionnaire. The questionnaire consisted of four scales: sociodemographic, attitude toward breastfeeding, barriers to breastfeeding, and induced lactation knowledge.

Results: The participants' mean age was 34.1 ± 10.4 years; most (87.8%) were Saudi; 92.8% were married; 62% had a bachelor's degree; and 43% had "enough income." 40% of mothers reported >6 months "exclusive breastfeeding" for the first baby. An overall score of breastfeeding attitude averaged 59.6 ± 7.3. The tendency for scoring a negative attitude to breastfeeding was significantly reported ($p < 0.5$) among 127 (31.8%) 31- to 40-year-old mothers; 153 (38.3%) bachelor's degree holders; and 157 (39.3%) employees ($\chi 2$ (4) 14.6, p 0.006; $\chi 2$ (4) 10.4, p 0.034; and $\chi 2$ (4) 20.4, $p < 0.001$, respectively). "Mother's illness" was the most commonly (63%) reported barrier to "not to breastfeed," followed by "work" (45.5%) and "father not supporting breastfeeding" (14.8%).

Conclusions: An overall negative attitude toward breastfeeding among PNU mothers was noted. Barriers included mother's sickness and work. Efforts to minimize negative attitudes and barriers among susceptible mothers are warranted.

Recommendations: (a) providing health education programs in student curricula, (b) support the creation of a breastfeeding-friendly work environment, and (c) conducting awareness campaigns about induction of lactation.

Keywords: Intensive Care Unit (ICU); Nursing practice; Teamwork; Midwifery

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Biography

Alzahrani has her expertise in management the diseases and common conditions in primary health care setting and education process for student, residents and patients. She has a passion in improving the health and wellbeing. She has breast-feeding training during her residency program and has participated in breast-feeding awareness campaigns. She has built this model after years of experience in evidence based practice, research, teaching and administration positions in different institutions. She obtained her higher degree of education in Family Medicine and Medical Education in Saudi Arabia and Canada.

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Samah Abdullah Al Araimi, J Nurs Res Pract 2022, Volume 06

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DNR Order: What are my boundaries? Nurses Role and Attitude

Samah Abdullah Al Araimi
National Heart Centre – Royal Hospital, Oman

Critical Care nurses are faced with multiple ethical and moral issues on daily basis. They deal with delicate, weak and terminally ill patients. They frequently need to take decisions which may sound harsh, tough and even nonhuman , such as explaining the Do-Not-Resuscitate (DNR) order to the patient, family member or the guardian. In addition, these decisions might have an undesirable impact on their care in End of Life (EOL) situations

Despite the huge role they play, they are not usually involved in the desicion making of a DNR order. Their intimate knowledge of the patients and the longer time they spend with their patients (compared to other health care providers) is usually neglected, while it should be taken in consideration while thinking of initiation the DNR Order. In addition, many people think that the DNR orders mean less care to their beloved ones, which puts another burden on the nurses to prove otherwise.

Although most of the health care institutions, globally, have a clear DNR policy, the role of the nurses is not well discussed, their attitude is not well studied and their role is not well defined. Many physicians have stated that the nurses could be of a great help when involved in such order. Also, studies should a positive attitude of nurses toward the initiation of DNR order for certain patients.

Nurses are the first line providers and their role in DNR initiation need to be formed, regulated and well established.

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2. Do Not Resuscitate (DNR) Argumentative Essay, 2017
3. The Perspective of the Palestinian Physicians and Nurses about the Do-Not-Resuscitate Order for Terminally Ill Patients, 2016
4. Do not attempt cardiopulmonary resuscitation (DNACPR) orders: A systematic review of the barriers and facilitators of decision-making and implementation, 2015

Biography

Samah Abdullah Al Araimi is a senior Nurse who has been working for the last 15 years in a critical care area in both UAE and Oman. She holds a Diploma in General Nursing Sciences from UAE, 2004. She has finished my Post Graduation in Adult Critical Care Nursing Program from The Higher Institute of Health Specializations 2016 and currently a BSN Studentin at University of Nizwa. In addition, she is a training center faculty (TCF) for basic life support (BLS) and have a strong interest in the Ethics of the medical field, particularly the nursing role and Ethical dilemma they encounter.

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Juliana Bento de Lima Holanda, J Nurs Res Pract 2022, Volume 06

6th International Conference on
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June 20-21, 2022 | Paris, France

Relationship of the type of breastfeeding in the sexual function of women

Juliana Bento de Lima Holanda
University of São Paulo, Brazil

Objective: to relate the type of breastfeeding with the women's sexual function. Method: cross-sectional study with 150 women in the postpartum period registered in the Strategy Family Health in a large Brazilian city. Two instruments were used: one for characterization of sociodemographic, obstetric and breastfeeding variables maternal, and the Female Sexual Function Index for the sexual. A descriptive analysis of the data was carried out, comparing the variables of interest through the Analysis tests of Variance, Brown-Forsythe and Tukey. Results: there was statistical significance between the groups that practiced different types of breastfeeding in the lubrication domain vaginal (p=0.015), and the breastfeeding mothers mixed or partial maternal presented higher scores for this domain (3.8). Conclusion: there is a difference in sexual function between the different types of breastfeeding. Women who had better vaginal lubrication belonged to the mixed breastfeeding group.

Biography

Juliana Bento de Lima Holanda is working at Universidade de São Paulo at Brazil.

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Elmira DAVASAZ tabrizi, J Nurs Res Pract 2022, Volume 06

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Human Metagenomes' hidden association with chronic diseases (overview)

Elmira DAVASAZ tabrizi
Istanbul university, Turkey

The prevalence of numerous irrelevant chronic diseases has risen dramatically in recent decades. Long-term antibiotic use for chronic disease is on the rise, just till today, nothing is clear about the importance of the resistance and its link to host microbiomes.

The immune system is made up of a complicated but well-organized network of cell types that constantly monitor and maintain their surroundings. The microbial flora is shaped by the immune system's cells and their surrounding environment's regulated homeostatic interaction.

The properties of the identifying antibodies have been the focus of chronic diseases research, such as chronic prostatitis or autoimmune disease. However, as our understanding of the genes linked to disease states grows, we realize that humans must be seen as superorganisms in which a slew of bacterial genomes – the metagenome – coexist with our own. According to the National Institutes of Health, 90 percent of the cells in Homo sapiens are microbial, not human. Some of these bacteria produce compounds that disrupt the expression of genes linked to chronic illness.

Moreover, During the initial years of life, complex connections between the microbiome and the immune system appear to be crucial to later life health outcomes, but they have not been studied at the community level.

On the other hand, in follow up previous studies, some researchers theorize that the loss of specific bacterial species from our ancestral microbiota, has changed the setting in which immunological and metabolic development occurs in early life, leading to an increase in disease. This worrying trend shows that we need to emphasize our efforts on understanding and reverse the underlying causes that are causing our microbiota to vanish or change.

Recent Publications

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2. Arican E, Ekimler S, Tosato V, Bruschi C.V. (2016) Characterization of bridge induced translocation (BT) driven By Z- DNA formation in saccharmyces cervisiae via NON-B DB and SID D/Z-DNA web-based servers: Fresenius environmental bulletin, shock.25,sa.5,ss.1372

3. Cander-Cakir B, Arican E, Zhang B, (2016) Small RNA degradome deep sequencing reveals drought-and tissue-specific micrornas and their important role in drought-sensitive and drought-tolerant tomato genotypes: Plant Biotechnology Journal, shock. 14, sa.8, ss.1727-1746

Biography

Elmira DAVASAZ tabrizi, candidate in molecular biology and genetic, Istanbul university, Turkey.

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Amal M Mohamed, J Nurs Res Pract 2022, Volume 06

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Copy number variation in Autism Spectrum Disorders in Egyptian patients

Amal M Mohamed
National Research Centre, Egypt

Autism Spectrum Disorder (ASD) are neurodegenerative disorders with a prevalence rate of 1%. ASD are extremely heritable (90%), genetic factors are the major cause of ASD. The aim of this study is to detect CNV at the level of the whole genome using the array CGH (Affymetrix) and evaluate if it is a pathological or benign, and according to the findings we selected and designed some genetic markers that can be used in diagnosis. Forty families who have one or two affected sibs with ASD were the subject of this study. This is the 1st time in Egypt to study the CNV at the level of the whole genome in ASD patients. We could report CNV in 40% of our ASD patients. The most recurrent CNV was found to involved chromosome 15q11q13 and 16p11.2. We reported one patient with deletion in 15q11, two patients with both del 15q11/dup15q13, one patient with duplication 15q13 and one patient with 4 copies of the entire 15q11q13. The del/dup 16p11.2 regions were reported in 12 of our patients, both 15q13 and 16p11.2 CNV were present in 2 patients. We have an identical twin, and both had deletion in 6p25.3, in another dizygotic twin both had 16p11.2 duplication. We reported one patient with deletion of both copies in 4q13.3. The study of the parental inheritance of these copy number variances are under investigation we selected the corresponding STS markers to diagnose if these variants are inherited or de novo, we designed some FISH probes to be used as screening for the most common variants. Conclusion: CNV by array CGH is the 1st Tier in ASD. The origin of parental inheritance is important for genetic counseling.

Recent publications

1. El-Kamah, Ghada; Mohamed, Amal; Gad, Yehia; Abdelhak, Sonia; Hennig, Branwen; Ramesar, Raj; Landoure, Guida; Gaye, Amadou; Newport, Melanie; Williams, Scott; Ramsay, Michèle. Developing a roadmap to spread genomic knowledge in Africa. Meeting Report: 10th Conference of the African Society of Human Genetics, Cairo, Egypt. American Journal of Tropical Medicine and Hygiene Volume 102, Issue 4, April 2020.

2. Maha Eid, Ola Eid, Ibrahim Hegazy, Marian Girgis, Amal Mohamed, Ghada M.H. Abdel-Salam. Further Insights into Developmental Brain Malformations and Leukoencephalopathy Associated with 6p25.3 Deletion. Neuropediartics 2020.

3. Mohamed AM, Eid MM, Eid OM, Hussein SH, Mossaad AM, Abdelfattah U, Sharafuddin MA, El Halafawy YM, Elbanoby TM, Abdel-Salam GMH. Two Abnormal Cell Lines of Trisomy 14 and t(X;14) with Skewed X-Inactivation. Cytogenet Genome ,2020.

Biography

Amal M. Mohamed, Professor of Human genetics, Human genetics & Genome Research Institute, National Research Centre (NRC). Graduated at the Faculty of Medicine, with distinction 1977. MSc. In clinical pathology, PhD in Human Genetics. Major research interests are diagnosis and research for genetic causes of intellectual disability/multiple congenital anomalies, autism(ASD), retinoblastoma. Participated in establishment of Human Genetics and Genome Research division (now institute). Head of the division from 2003 to 2009, head of Cytogenetics Department 2009 to 2012. Currently the Head of Cytogenetic Team in STDF project for Centre of Scientific Excellence of Human Genetics. Director of the microarray laboratory. Deputy Editor of the Middle East Journal of Medical Genetics (MEJMG). Head of the conference board of the 10th Conference of African Society of Human Genetics,16-18 November 2017, Cairo, Egypt. President of the National Society of Human Genetics, Egypt. Member in the Scientific Board of the Egyptian Genome Project.

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UPCOMING CONFERENCES

7th International Conference on
Human Genetics and Genetic Disorders
November 21-22, 2022 | London, UK

7th International Conference on
Nursing Science & Technology
November 16-17, 2022 | Paris, France

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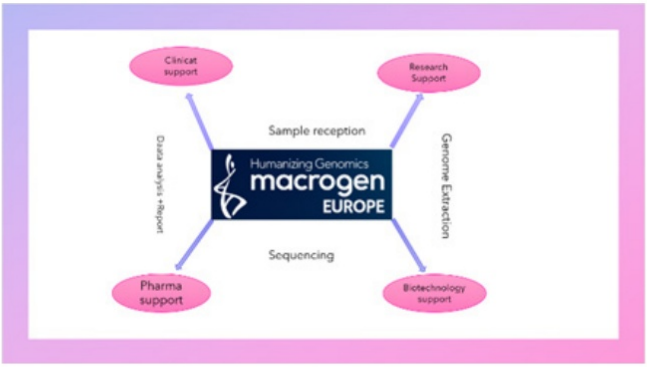
Habib Bouazzi, J Nurs Res Pract 2022, Volume 06

6th International Conference on
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Macrogen commitments in Genetics and research support

Habib Bouazzi
Macrogen Europe, France

Macrogen goal is to apply innovative technologies to the analysis of genetic variation and function, making studies possible that were not even imaginable just a few years ago. It is mission critical for us to deliver innovative, flexible, and scalable solutions to meet the needs of clinicians, scientists and geneticists. As a global company that places high value on collaborative interactions, rapid delivery of reports, and providing the highest level of data quality, we strive to meet this challenge. Macrogen innovative sequencing applications are fuelling ground-breaking advancements in life science research, translational and consumer genomics, and molecular diagnostics. Emerging sequencing technologies as single cell sequencing, long read and HIFI modes are the robust tool of Macrogen sequencing strategies. Macrogen sequencing platforms provide a deep insight into the DNA sequence of humans, animals, plants, and microbes. The data analysis at the individual or population level based on SNP/INDEL/CNV/SV and other variants of the genome provide to the geneticist the expected result and the diagnosis tool. It promotes new research topics. The identification of somatic and germline mutations as well as customized patterns of cancers and immunological diseases are currently a powerful pipeline of therapeutics.



Multiomics has revolutionized genetics. Genomics, transcriptomics, epigenetics, and proteomics, are different domains that currently can be studies and analysed in only one single cell and subsequently we can measure gene expression, gene activation, and protein levels in only one step. Multiomics provides biological context to disease-causing variants, enabling discovery of novel pathways and biomarkers. It is an approach for maximizing insights for diseases where samples are difficult to obtain. The genome, transcriptome epigenome and proteome of individualised cells is now being analizedin the early stage of the disease and theirfore facilitates therapeutic follow-up.

Macrogen Europe was founded in 2008 and provides fast and reliable Sanger sequencing, next generation sequencing (NGS) and bioinformatics services to scientists in Europe and Africa. Using the latest equipment from industry-leading providers such as Illumina, Thermo Fisher Scientific, and Pacific Biosciences, we help scientists accelerate their genomics discoveries.

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Recent Publications

1. Ding S, Chen X, Shen K. Single-cell RNA sequencing in breast cancer: Understanding tumor heterogeneity and paving roads to individualized therapy. Cancer Commun (Lond). 2020 Aug;40(8):329-344.

2. Bo Wang , Xiaofei Yang , Yanyan Jia , Yu Xu , Peng Jia et al., High-quality Arabidopsis thaliana Genome Assembly wif Nanopore and HiFi Long Reads. Genomics Proteomics Bioinformatics. 2021 Sep 3;S1672-0229(21)00174-1.

3. Beverly McCabe-Sellers, Dalia Lovera, Henry Nuss, Carolyn Wise et al. Personalizing nutrigenomics research through community based participatory research and omics technologies. OMICS. 2008 Dec;12(4):263-72.

Biography

Habib Bouazzi graduated from La Sorbonne University (France) in Genetics. Innovative Scientist specialized in NGS with a broad skillset in preclinical regulatory study and management.

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Damien Fonteneau, J Nurs Res Pract 2022, Volume 06

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Macrogen sequencing institute 25 year of life science support

Damien Fonteneau
Macrogen Europe, France

Macrogen Europe was founded in 2008 and provides fast and reliable Sanger sequencing, next generation sequencing (NGS) and bioinformatics services to scientists in Europe and Africa. Using the latest equipment from industry-leading providers such as Illumina, Thermo Fisher Scientific and Pacific Biosciences, we help scientists accelerate their genomics discoveries.

Since its foundation, Macrogen Europe's headquarters have been located on the grounds of the Amsterdam Medical Center in the Netherlands, where – in 2021 – it moved to a new, state-of-the-art laboratory. It also has sequencing facilities in Maastricht (NL) and local representatives across the region.

A Global Network: Excellence in sequencing thanks to a worldwide team of experts

Macrogen Europe started out as a branch office of South Korea-based Macrogen Inc: a company that has been innovating genomics since 1997. To this day we maintain a close collaboration with their global network of sequencing experts – to make sure we get the most comprehensive data from every sample.

Our Mission: Helping everyone live a healthy, happy life using genome information. Whether you work in drug development, food safety, environmental monitoring or fundamental research, your work contributes to people's health and wellbeing. It is our mission to help you accelerate your discoveries with our genomics services.

Biography

M. Fonteneau Damien, Macrogen Europe B.V. Switzerland, France, Junior Account Manager | NGS specialist.

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Francois CARMONA, J Nurs Res Pract 2022, Volume 06

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June 20-21, 2022 | Paris, France

JETT PLASMA for her a plasma generator for Gynecology

Francois CARMONA
SURGILAB, France

JETT PLASMA for her II is patented direct current plasma device indicated for non- ablative treatment of vulvovaginal laxity causing tissue tightening and strengthening.

JETT PLASMA for her II provides a solution for issues connected to vulvar vaginal laxity, such as insufficient vaginal moisture, burning and itching, incontinence, and sexual discomfort due to vaginal dryness, reduced tightness, elasticity and sensitivity. Developed mainly for safe painless non-surgical treatment for women after childbirth and menopause.

Biography

Francois CARMONA is working as a General manager at SURGILAB

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UPCOMING CONFERENCES

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Human Genetics and Genetic Disorders
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Kristen L Marcheski, J Nurs Res Pract 2022, Volume 06

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June 20-21, 2022 | Paris, France



Kristen L Marcheski

Geisinger Hospice, USA

Early hospice intervention

Statement of the Problem: Advocacy is a powerful tool that can be provided to patients ensuring they are able to make decisions about their care competently. Understanding the benefit of hospice care is significant and based on evidence early intervention to hospice care needs a voice. Education surrounding hospice care through physicians would allow for ethical decisions to be a choice. Unfortunately, these conversations do not occur until later in prognosis, leaving patients without a choice. Many times, patients endure unnecessary treatment, re-hospitalizations, and complete exhaustion before hospice is an option. Hospice care is not a barrier to hope; rather it is standard of care to ensuring quality and comfort care with a terminal prognosis.

Hospice care is accessed inconsistently and late, decreasing assistance with distress for comfort at end-of-life, barriers of access need to be studied to allow for earlier access and address goals of care.

Early referral to hospice care is underutilized and not considered a resource until late in disease trajectory. It is important to raise concern and awareness to this poorly utilized resource, as with evidence it is proven to increase quality of comfort and provide realistic end-of-life goals. Education to physicians surrounding hospice and philosophy of care will develop implementation of timely intervention impacting overall comfort and quality of life.

Through education to physicians increasing communication surrounding advanced care planning will improve hospice advocacy. Advanced care planning is essential to ensure early conversation about goals of care and engagement into end-of-life.



Recent Publications

1. Philip, J., Collins, A., Le, B., Sundararajan, V., Brand, C., Hanson, S., Emery, J., Hudson, P., Mileshkin, L., & Ganiatsas, S. (2019). A randomized phase II trial to Examine feasibility of standardized, early palliative (STEP) care for patients with advanced cancer and their families [ACTRN12617000534381]: a research protocol 5 (1): 44-44.
2. Lin, C. P., Evans, C. J., Koffman, J., Chen, P. J. Hou, M. F. & Harding, R. (2020). Feasibility and acceptability of a culturally adapted advance care planning intervention for people living with advanced cancer and their families: A mixed methods study. 34(5):651-666.
3. Kaasa, S., & Loge, J. H. (2018). Early integration of palliative care-new evidence and old Questions. 19(3):280-281.

Biography

Kristen has her expertise in hospice care and advocating for change in late hospice interventions. Her passion and background have led to many collaborative efforts within her community improving community based palliative care programs. She is driving change after years of advocating for end-of-life care, improving collaborative efforts throughout the healthcare system. Her method of change was influenced by John Katter's change approach executing behavior and culture changes in end-of-life care. Her approach has gained stakeholder appreciation and recognition developing advanced care planning initiatives

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Gloria Escalona, J Nurs Res Pract 2022, Volume 06

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Gloria Escalona
San Jose State University, USA

Effective antimicrobial stewardship education to licensed nurses in a long term care facility

This study examines the impact of an educational intervention on antimicrobial stewardship (AS) to licensed SNF nurses and is among the first, if not the first AS research, to differentiate the various types of licensed nurses. Advantage was taken of a large urban facility wanting to establish an AS program under the auspices of the nursing department and their Infection Preventions. This study received IRB approval.

A mandatory educational program on AS was given over a 1-month period by the same person to all licensed nurses on all shifts, all new nurse hires, and all nurse practitioners in a large urban nursing home. The program consisted of a new clinical decision algorithm, a sheet summarizing the McGeer-Stone Infection Criteria, and true case studies.

The effectiveness of the program was determined by a post-education questionnaire and a medical records review of antimicrobial orders the month prior to and the month after the education. Comparisons were made between units staffed by RNs and those by LVNs, and between units where nurse practitioners (NPs) were allowed to order medications and those where NPs were not allowed to order medications.

Prior to the educational intervention participating nurses were not aware of their role in AS. After the educational intervention, all understood what AS was, the importance of their role in stewardship, and antibiotic orders significantly decreased in those units staffed by LVNs and where NPs were authorized to order medications.

Stewardship efforts in SNFs: should involve all licensed nurses, should enforce the McGeer-Stone Infection Criteria, and can be effective when applied at point of care, i.e., in the SNF nursing department, implemented by the bedside nurse with oversight by the facility Infection Preventions. The various categories of nurses in long term care facilities should be differentiated in both research practices.

Recent Publications

1. Corazzini, K.N., McCollall, E.S., Day, L., Anderson, R.A., Mueller, C., Vogelsmeier, A., Kennerly, S., Walker, B., Flanagan, J.T., Haske-Palomine, M. (2015). Differentiating scopes of practice in nursing homes: Collaborating for care. Journal of Nursing Regulation, 6(1), 43-49
2. McGilton, K.S., Bowers, B.J., Heath, H., Shannon, K., Dellefield, M.E., Prentice, D., …Mueller, D.A. (2016, February 1). Recommendations from the international consortium on professional nursing practice in long-term care homes. Journal of the American Medical Directors Association, 17(2), 99-103. http://dx.doi.org/10.1016/j.jamda.2015.11.001
3. Olson, B., Stone, N.D., & Chinn, R. (2017, May 3). Antimicrobial stewardship in long term care facilities. PowerPoint presentation at the Infectious Disease Association of California (IDAC) and California Department of Public Health (CDPH) annual conference on practical antimicrobial stewardship: Implementation and Expansion in Healthcare Facilities, at the Doubletree Hotel SFO in Burlingame, CA
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perspectives on antibiotic stewardship in nursing homes. Journal of the American Geriatrics Society, 65(), 165–171. DOI: 10.1111/jgs.14504

5. Stone, N.D., Ashraf, M.S., Calder, J., Crnich, C.J., Crossley, K., Drinka, P.J., …Bradley, S.F. (2012). Surveillance definitions of infections in long-term care facilities: Revisiting the McGeer criteria. Infection Control and Hospital Epidemiology, 33(10), 965-977.

Biography

Escalona has had over 45 years nursing experience and spent the past 20 years working with long term care facilities as an educator and infection control consultant. For the past 7 years she has been in private practice as a consultant, teacher, and mobile foot care nurse serving the elderly in their home or facility, and teaching foot care nursing. She volunteers at several shelters and community centers providing foot and wound care to low income and unhoused populations. A popular speaker she continues to strongly advocate appropriate and evidence-based use of antimicrobials as well as appropriate health care for the unhoused and geriatric populations.

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Octavio Areas, J Nurs Res Pract 2022, Volume 06

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Octavio Areas
Le Bonheur Health Level Trauma Centre, USA

The conversation about end-of-life. A form of early intervention addressing psycho-spiritual needs/problems

Palliative care is based on meeting immediate needs (the here and now), not prognosis, therefore it is best to bring the team and patient/family early to talk about palliative care services. I know, you might say, -what if they are not ready to talk? - I say, how you would know if you do not engage in conversation?

An effective helping relationship between parents and the medical team is crucial. This is why is important to establish a quick rapport in the next seventy two hours. In a recent study, done mostly on Hispanic parents who were coping with children why had chronic disease identified spirituality and life satisfaction. Sometimes, language barriers can lead to misunderstanding in the communication between patients and physicians. Fear and uncertainty can interfere and affect the attitudes family members toward the medical team. For instance, withdrawing and stopping machines from the patient's body. Discussions over stopping continue life prolonging measures, DNR, and DNI.

In order to obtain the information to design a care plan for heart patients I propose a format base on the assessment of needs and resources (3 levels). This conversation can happen via video call, present or hybrid format.

Recent Publications

1. Doolittle B, Courtney M, Jasmine J (2015). Satisfaction with life, coping, and spirituality among urban families. Journal of Primary Care & Community Health 6(4):256-259
2. Deciding for a child: a comprehensive analysis of the best interest standard Erica K. Salter Published online: 17 April 2012. Springer Science Business Media B.V. 2012
3. Lewis, James. (2002). Pastoral Assessment in Hospital Ministry: A Conversational Approach. Chaplaincy Today. 18. 5-13. 10.1080/10999183.2002.10767203.

Biography

Octavio Areas is working in Methodist Le Bonheur Health Level Trauma Centre, USA

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Shinya Tajima, J Nurs Res Pract 2022, Volume 06

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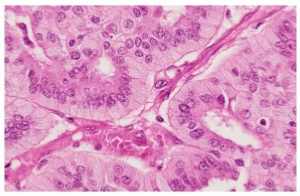
Shinya Tajima
National Hospital Organization Shizuoka Medical Centre, Japan

Breast tumor of papillary lesion in woman's health: New insight differently

In woman's health and palliative care, breast cancer is world-threatening disease so important for treatment. In breast tumour especially papillary lesions reveal broad range from benign to malignant. If pathologists can accurately diagnose benign, reduce unnecessary operation. However pathologists tend to over diagnosis in papillary lesions.

Here, we would like to present new concept of two papillary lesions at a glance benign. In the past, lacking my epithelial cells is thought to be invasion and means malignancy. Two cases of 68- (Case1) and 44-year-old (Case2) female are presented. They have abnormality in the breast. And they came to the hospital for further examination and treatment.

Radiologically, malignancy could not completely exclude. Then, breast excision was performed. Histologically, both cases revealed papillary neoplastic lesions lined by fibrovascular core and nuclear inverse-polarity without atypia. Loss of myoepithelial cells was observed by HE, p63, and calponin. Previous report indicate CK5/6, ER, p63 and MUC3 are important for distinguishing between papillary lesions according to the differential index (based on Allred score) of ([ER total score] + [MUC3 total score])/([CK5/6 total score] + [p63 total score] + 1). Based on this analysis, our 2 cases had benign lesions. Additionally, the Ki-67 index was <1% in both cases, and no evidence of disease was observed minimum 62 months of follow-up for both cases, despite lack of additional treatment.



Thus, we propose these lesions accurately benign and contributing Woman's health and palliative care for reducing operation. Then these lesions are reported and named "Nuclear inverse polarity papillary lesion lacking myoepithelial cells". However, the name is too long and its distinctiveness and rareness, someone think this tumor as "Tajima tumor" as for the advocator. Thus we can contribute to woman's health by the viewpoint of pathological knowledge.

Recent Publications

1. Shinya Tajima, Ichiro Maeda, Yoshihide Kanemaki, Yasuo Nakajima, Shinobu Tatsunami, Mamoru Fukuda and Masayuki Takagi. Evaluation of CD56 and CD57 Immunostainings for Discrimination between Endocrine Ductal Carcinoma In Situ and Intraductal Papilloma. Pathology International 2010; 60: 459-465.
2. Shinya Tajima, Yoshihide Kanemaki, Yasuyuki Kurihara, Kyoko Okamoto, Hiroshi Shimamoto, Hiroko Okazaki, Itsuko Okuda, Futoshi Kawahara, Yasuo Nakajima, Mamoru Fukuda and Ichiro Maeda. A Case of a Fibroadenoma Coexisting with an Invasive Lobular Carcinoma in the Breast. Breast Cancer 2011; 18: 319-323
3. Shinya Tajima, Ichiro Maeda, Yasuyuki Kurihara, Miyuki Fukushima, Yoshihide Kanemaki, Hiroshi Shimamoto, Keiko Kishimoto, Tomoko Uejima, Koichiro Tsugawa and Yasuo Nakajima. A Case of a Secretory Carcinoma of the Breast: Radio-Pathological Correlation. Edited by Nachiko Uchiyama and Marcelo Zanchetta Do Nascimento. Mammography Recent Advances by INTECH 2012: 389-398

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Biography

Shinya Tajima graduated from Keio University School of Medicine, and was employed as a staff to Department of Pathology at Keio University School of Medicine. There he learned pathological anatomy and diagnostic pathology. After two years, he belong to Department of Radiology at St. Marianna University School of Medicine to study breast imaging. And he have presented some scientific exhibitions about radio-pathological correlation of the breast in domestic and international congress. Furthermore, he learned at St. Marianna University Graduate School of Medicine for four years. And after PhD of radiolo-pathology was acquired, now he is doing some research about the comparison of pathologic features and radiologic imaging findings and also using pathological knowledge as a staff of St. Marianna University School of Medicine Department of Pathology and Radiology. Now, he is interested in breast diagnostic pathology, breast radiologic pathology and working as a staff in National Hospital Organization Shizuoka Medical Center.

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Annette Van Ginkel, J Nurs Res Pract 2022, Volume 06

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Annette Van Ginkel
King Abdullah Bin Abdul-Aziz University, Saudi Arabia

The principles of Palliative Care

Palliative care is a very painful experience for family, friends and also Healthcare workers. Dying is a normal process but there are circumstances that death is known due to illnesses like cancer

There is a few principles that needs to be taken accounted to

- Death is a normal process
- Hasten /slow death
- Pain and symptom relief
- Psychological and spiritual aspects of care.
- Support systems

Part of Palliative care is that all these Principles needs to be addressed to ensure the safety and support for the patient and their family

Biography

Annette van Ginkel is a nurse in paediatric intensive care. Has intensive expertise in Palliative and end of life care .She is a be reavement counsellor and educator, life and transformational coach. Annette has her expertise in and passion in improving the health and wellbeing of staff and patients including their families' .Due to her own journey of her child dying she is able to address the needs of staff and the family

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DAY-2

Scientific Tracks & Abstracts

38 YEARS OF EXCELLENCE IN MEDICAL PUBLISHING

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Day 2: June 21, 2022

Sessions

Neuroscience Nursing | Cytogenetic | Nursing Education | Women's Healthcare

Session Chair
Lakel Ebb
Founder/CEO of The Wealthy Nurse, Well Managed Care and host of "The Wealthy Nurse Hour" Podcast on Voice America Radio, USA

Session Introduction

Title: To ensure mental well-being of the patient and family at the end of life
Deblina Roy, Assistant Professor, T.S. Misra College of Nursing, India

Title: Early integration of palliative care in management of chronic illness
Vidya N, Palliative care Physician, Radiant Hospital, India

Title: Impact of the integration of artificial intelligence in the university hospital clinical environment. Study in the Quebec public health network
Laurent Fellonneau, University of Strasbourg France

Title: Nursing Education - Transforming the future of the healthcare vertical globally
Bindhu Varghese, NMC Healthcare, Sultanate of Oman

Title: Psycho-social aspect encountered by health professionals in work environment at primary health care centers in Dammam city
Abrar.Y.Banibakhsh, Inaya Medical Colleges, Saudi Arabia

Title: Whole transcriptome analysis revealed a stress response to deep underground environment conditions in Chinese Hamster V79 lung Fibroblast Cells
Jifeng Liu, Sichuan University, China

Title: Executive functions and memory in Parkinson's disease patients with and without Deep Brain Stimulation
Thayná Laís de Souza Arten, Federal University of Parana (UFPR), Brazil

Title: Knowledge and Attitude Related to Cervical Cancer Prevention and Screening among Female Students in the College of Nursing, Kuwait
Nabil A Badawy, Public Authority for Applied Education and Training, Kuwait

Title: The effect of Progressive Muscle Relaxation Training on Chemotherapy -Induced Nausea, Vomiting and Anxiety in Egyptian Breast Cancer Women: A Randomized Controlled Trial
Rania El-Kurdy, Mansoura University, Egypt

Title: Cultural clash of Somali female adolescents regarding sexual and reproductive health services in Oslo, Norway
Tamanna Afroz, International Centre for Diarrhoeal Disease Research, Bangladesh

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Deblina Roy, J Nurs Res Pract 2022, Volume 06

6th International Conference on
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Nursing skills that are essential in palliative nursing theories and evidence based concepts in quality of nursing

Deblina Roy
T S Misra College of Nursing, India

Introduction: Palliative care is the most sought-after nursing care in the modern times, with the increasing number of life style diseases, increased life expectancy and life lengthening mechanisms, the need for palliative care has become incredibly important. Therefore, the nurses working with the patients and families, in palliative care settings need to have a specific skillset. The Increasing global demand and lack of competent nurses in palliative care has opened up avenues for the training and skill development of nurses specific to palliative care. The nursing care need requirements of palliative nursing are different from the skillset required in acute settings.

Materials and Methods: I surveyed literature and I found that there is a need to develop a theoretical framework for the nursing care for palliative nursing. Therefore, we surveyed recent literature to develop a theoretical framework and the main issues and challenges faced by nurses and the health team members in the care of patients in palliative settings which could provide them with care along with the care of families that were grieving in such situations.

Results: The results of this theoretical exploration led the development of a framework that identifies the skills that are essential to care for the patients and the family members of the people in palliative care. The most important skills identified were expressing compassion, for the patient and family members, other necessary skills among the nurses apart from the general clinical competencies, are validation of emotions, offering choices, compassionate communication and involvement of family and friends in the care of the dying, also the nurses require the skill of managing grief and hope generation and compassion among the care givers of the patients. Therefore it becomes the responsibility of nursing managers to engage in sensitization and training of nurses in communication, expression and expressing compassion in palliative care settings.

Recent Publications

1. Dalal, P.K., Roy, D., Choudhary, P., Kar, S.K., Tripathi, A., 2020. Emerging mental health issues during the COVID-19 pandemic: An Indian perspective. Indian J Psychiatry 62, S354–S364. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_372_20
2. Kar, S.K., Shukla, S., Rai, S., Sharma, N., Roy, D., Menon, V., Arafat, S.M.Y., 2022. Assessing the quality of suicide reporting in online newspapers in Uttar Pradesh, India, according to World Health Organization guidelines. Crisis: The Journal of Crisis Intervention and Suicide Prevention 43, 142–148. https://doi.org/10.1027/0227-5910/a000768
3. Roy, D., 2021. Premarital Sexual Permissiveness, in: Shackelford, T.K., Weekes-Shackelford, V.A. (Eds.), Encyclopedia of Evolutionary Psychological Science. Springer International Publishing, Cham, pp. 6148–6153. https://doi.org/10.1007/978-3-319-19650-3_1731
4. Roy, D., Sinha, K., 2020. Cognitive biases operating behind the rejection of government safety advisories during COVID19 Pandemic. Asian J Psychiatr 51, 102048. https://doi.org/10.1016/j.ajp.2020.102048
5. Roy, D., Tripathy, S., Kar, S.K., Sharma, N., Verma, S.K., Kaushal, V., 2020. Study of knowledge, attitude, anxiety & perceived mental healthcare need in Indian population during COVID-19 pandemic.

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Biography

Deblina Roy, has been a motivated and interested nurse with experience in diverse areas, she has done her bachelors in nursing from B.M. Birla College of Nursing, Kolkata and had done her Masters in nursing from King George's Medical University, in Mental Health Psychiatric Nursing, after that she has been Involved in teaching and training of Nursing students in the University and Also worked in All India Institute of Medical Sciences, New Delhi. She has multiple scholarly publications in various pubmed indexed journals. She has also served as a section editor, for Springer Nature's Encyclopedia of Evolutionary psychological Sciences, also is assistant Editor of Indian Journal of Health Sexuality and Culture also is a part of editorial board of various national nursing journals. She serves as reviewer for Core clinical as well as various nursing and medical Journals. She is pursuing PhD in nursing from Nims University Rajasthan

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Vidya N, J Nurs Res Pract 2022, Volume 06

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Early integration of palliative care in management of chronic illness

Vidya N
Radiant Hospital, India

Introduction: Palliative care is vital service for people living with chronic life-threatening conditions like cancer, HIV, stroke, Kidney failure, etc. it is not just "care of terminally ill patient". It is a holistic approach that meets the physical, psychosocial, economic, social and spiritual needs. Various Models of Palliative care have been adapted around the world depending on the culture, geographical locations, Human Resource etc. One such model is Integrated Palliative care. palliative care in the continuum of care linking it to prevention, early detection, and treatment programs. Palliative care services should also be provided alongside potential curative treatments and adapted to the needs of patient and families as the disease progresses. Integrating palliative care within regular treatment offered to patients with life-threatening disease is supported by a growing amount of evidence that demonstrates the effectiveness of palliative care on the improvement of the quality of life of patients.

Below listed are the advantages.

Advantages of Early integration:

1. Better Compliance to treatment
2. Better treatment related outcomes
3. Higher patient Satisfaction
4. Better Quality of life
5. Unburdening of symptoms, pain, psychosocial issues, so the primary physician can focus on curative aspects
6. Less aggressive care at the end of life
7. Dignity in death

Challenges for early referral

1. Unfortunately palliative care is mis constructed as end-of-life care
2. Patient acceptance
3. Sense of abandonment/ giving up
4. Limitations in expertise of palliative care physicians
5. Misalignment in communication

How do we overcome the challenges?

1. Patients with advanced cancer, should receive dedicated palliative care services early in the disease course and concurrent

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with active treatment.

2. Sensitization about palliative care benefits among health care faculties engaged in the various level of care
3. Advocacy of national policies for early integration of palliative care at various levels of health system
4. Media visibility and awareness in the community about palliative care.

Conclusion: Palliative care services need to be provided in accordance with the principles of universal health coverage wherein all people should have access to palliative care services at various levels of health systems that are essential, safe, affordable, and effective.

Recent Publications

1. Payne, S., Hughes, S., Wilkinson, J. et al. Recommendations on priorities for integrated palliative care: transparent expert consultation with international leaders for the InSuP-C project. BMC Palliat Care 18, 32 (2019). https://doi.org/10.1186/s12904-019-0418-5.
2. Den Herder-van der Eerden M, van Wijngaarden J, Payne S, Preston N, Linge-Dahl L, Radbruch L, Van Beek K, Menten J, Busa C, Csikos A, Vissers K, van Gurp J, Hasselaar J. Integrated palliative care is about professional networking rather than standardisation of care: A qualitative study with healthcare professionals in 19 integrated palliative care initiatives in five European countries. Palliat Med. 2018 Jun;32(6):1091-1102. doi: 10.1177/0269216318758194. Epub 2018 Feb 13. PMID: 29436279; PMCID: PMC5967037.
3. Nottelmann L, Jensen LH, Vejlgaard TB, Groenvold M. A new model of early, integrated palliative care: palliative rehabilitation for newly diagnosed patients with non-resectable cancer. Support Care Cancer. 2019 Sep;27(9):3291-3300. doi: 10.1007/s00520-018-4629-8. Epub 2019 Jan 5. PMID: 30612238.

Biography

Vidya N, is keen on working closely with various fraternity of Medicine, to advocate palliative care practice at various levels of health care systems. Presently working in an Integrated Palliative care in super specialty hospital. ClearMedi Radiant Hospital, Mysore, Karnataka, India as Consultant Palliative Care Physician. She has around 3 years of experience in working with palliative care patients.

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Laurent Fellonneau, J Nurs Res Pract 2022, Volume 06

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Impact of the integration of artificial intelligence in the university hospital clinical environment. Study in the Quebec public health network

Laurent Fellonneau
University of Strasbourg, France

Today, the next expected innovation in the field of health is intelligent computers. These should be able to revolutionise diagnosis and medical prognosis and produce scientific results that could not be achieved with existing means.This study aims to raise the question of the obstacles to the use of AI in clinical practice, but also to measure the first impacts of the impact of AI in clinical practice and on the organisation of work in hospitals. It aims to raise the question of interprofessional collaboration, taking into account ethical and regulatory performance issues.This mixed-methods study is based on a literature review, a meeting with experts, a residency at the School of Artificial Intelligence in Health in 2019, and interviews with nine care teams: intensive care, oncology, medical imaging, nephrology, rheumatology, gynaecology, pharmacy and nursing management. By asking the central question: what are the clinical changes brought about by the integration of artificial intelligence in healthcare for healthcare professionals?The results show that the motivation to use technology is strongly correlated with the support of the structure with a need for simplification of the bureaucracy. Finally, it is strongly correlated with a culture of scientific proof and evidence-based medicine. Nevertheless, there are obstacles in terms of the time spent compiling data to the detriment of the patient-caregiver relationship, professional responsibility and ethics.The challenge for the years to come is to maintain clinical expertise in the face of competition from private companies that are less concerned about ethical issues, the reliability of data and questions of societal responsibility.

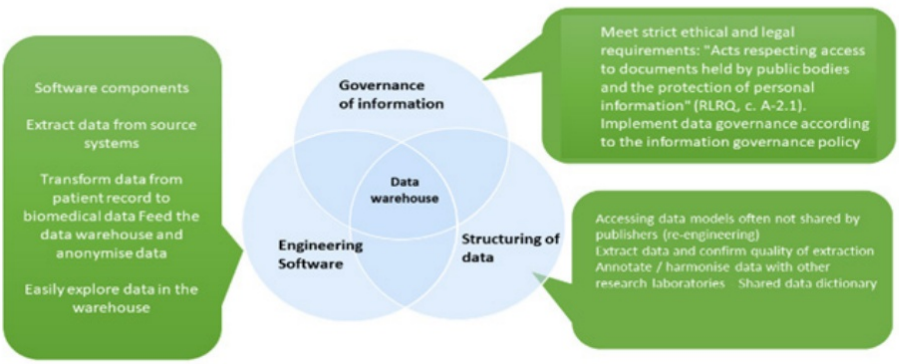


Fig 1: Need to manage complexity with a large number of actors

Recent Publications

1. Quality of care and hospitality.Fondation st vincent de paul -2021
2. A common management base in a primary care centre.Toulouse Business School -2019
3. The burden of mental health among young people aged 15-25 in France, a proposal for the delivery of field care » -Harvard University-2018

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4. Impact of Regional Hospital Groups on the reorganization of pharmaceutical purchases in the Midi Pyrénées" - University of Toulouse-2017

5. "Sport and disability sociological study of health case study handisport and stigma, Toulouse" - University of Toulouse . -2017

Biography

Laurent Fellonneau is a Nurse clinician and researcher Consulting for health and social organization. His Research interest includes, Management and performance of health structures, Clinical research and primary care, Innovation and business development.

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Bindhu Varghese, J Nurs Res Pract 2022, Volume 06

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Nursing Education - Transforming the future of the healthcare vertical globally

Bindhu Varghese
NMC Healthcare, Oman

The immensely challenging times of today, mandate constant Innovation so that healthcare delivery continues to save lives uninterrupted. A constantly evolving scenario though demanding (on nursing personnel tasked to learn, adapt, and implement innovative ideas) can also positively impact their careers and create more opportunities to touch lives, and gain greater job satisfaction.

Purpose: Education is the key to providing exceptional quality care to patients. Nursing education prepares Nurses to anticipate and meet diverse needs of patients, at the same time enabling a deeper understanding of healthcare reforms.

Methodology: Adaptation Programmes; In-service Education, On-job Training, Incidental Teaching, Talk-of-the-Week Preceptor/Preceptee Concept, etc. are key. Online Training / Digital Education has played an indispensable role right during Covid-19 Pandemic.

Changes in Nursing Education/Findings: The transformation of the healthcare industry, supported by nursing education, has also impacted the nursing domain, enhancing patient care substantially. Adopting current trends and technology in education and practice as recommended by WHO, is making Nurses more efficient and keeping them better informed. Smart phones and wearables, software-enabled command centers, and various apps/devices offer critical insights easily shared with other clinicians.

Big Data is radically transforming healthcare and nursing education. The abundance of data, will redefine core competencies of future students, mandating exposure to Data Science, Data Analytics, and new technology platforms and solutions.

COVID-19 pandemic has restricted movement of Nurses from practicing to teaching, making it imperative to update learning delivery and lower nursing shortage. Pay revisions, specialisations, online teaching / learning, are some paradigm shifts already gaining momentum.

Conclusion: Change is challenging. Trusting the new, letting go of the old, investing in emerging technologies can be both disruptive and stressful, but would yield positive outcomes in healthcare.

Reach us to explore newer technologies and brighter prospects for your hospital and track your institutional assets better.

Recent Publications

1. Frenk J, Chen L, Bhutta ZA, et al. Health Professionals for a new century: Transforming education to strengthen health systems in an interdependent world. Lancet. 2011; 376(9756): 1923– 1958.
2. Cronenwett L, Dzau V. In: B Culliton, S Russell, editors. Who Will Provide Primary Care and How Will They Be Trained?, Proceedings of a Conference Sponsored by the Josiah Macy, Jr. Foundation; 2010; Durham, N.C. Josiah Macy, Jr. Foundation; 2010.
3. Bodenheimer T, Mason D. Registered Nurses: Partners in Transforming Primary Care. Proceedings of a Conference Sponsored by the Josiah Macy Jr. Foundation in June 2016; New York: Josiah Macy Jr. Foundation; 2017.

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4. Institute of Medicine. Educating for the Health Team: Report of a Conference on Interrelationships of Education Programs for Health Professions. Washington, DC: National Academy of Sciences; 1972.

Biography

With over 19 years of expertise in the field of nursing Bindhu Varghese currently is Group Nursing Director at NMC Healthcare, Sultanate of Oman. A graduate nursing student from Apollo Hospitals, India. Specialized in Management - MHA in Hospital Operations, Quality Control Management (including Six Sigma Green Belt), Infection Control & Prevention Management, and Hospital Administration Management from NHCA Singapore. She has richly diverse career having donned the hats of Nurse Manager, Clinical Coordinator, Associate Professor and Nursing Director and a Certified Internal Assessor for NABH, has extensive experience at handling teams of nurses, developing policies and procedures, and enabling training and development programs. Conducted conferences and also lectured on various national and international platforms; and authored various articles in newspapers. Chaired several nursing development committees and frequently lectures on the evaluation of outcomes and implementation of evidence-based practice and mentored many students on research and evidence-based practice projects.

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Abrar Y Banibakhsh, J Nurs Res Pract 2022, Volume 06

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Psycho-social aspect encountered by health professionals in work environment at primary health care centers in Dammam city

Abrar Y Banibakhsh
Inaya Medical Colleges, Saudi Arabia

Background and objective: Psychosocial aspects may affect workers and the quality of care given. It has a negative impact in psychological state of the healthcare providers, such effects causes lack of healthcare quality and enforcing healthcare workers to leave work in primary centers. This study aims to explore the psychosocial aspect encountered by the health professionals as related to their work environment at primary healthcare centers in Dammam City.

Methods: This study adopts a descriptive quantities research methodology cross-sectional and correlative design used. convenient subjects among 300 participants of health professionals.

Results: A group of 300 health professionals were participated in this study. They included doctors, nurses, pharmacist, allied health personal, above half of them were females (54.3%), married (77%), diploma degree (50.7%). Nurses were the highest rate of health professionals (34%). In psychological aspect, the highest mean of employees were affected by their passion with client at work (Highest Mean: 3.78). The work for them was valuable and important (Highest Mean: 4.36). In social aspect, the researcher found that colleagues tend to hear each other and sharing problems concerning their work or life issues with each other more than with managers or supervisors (Highest Mean: 4.11). In relation to the work environmental aspect, the researcher found that the nature of their work situation needs them to complete their work quickly with extra speed (Highest Mean: 4.06). They work more than 8 hours per day (Highest Mean: 3.49), there is no variation in the work performed. The same task repeated daily (Highest Mean: 4.16). They were influenced by the state of their families and friends. They work a lot of time (Highest Mean: 3.91).

Conclusions: The participants of this study mainly female, nurses and married staff members, participants mostly complain work environment which put them in emotional disturbed situation. The Psychosocial aspects sometimes potentiate healthcare providers experiences. They tend to overcome bad situation in their work places. The researcher found that most of the participant seek social support and help which is importance aspects for them to perform their jobs accurately as required. It is obvious that stress experience, pressure and exhaustion in work environment for period of time, will lead to bad services provided by healthcare staff members. The result of the study led us to consider the practice of healthcare professionals in their work environment in Dammam City in KSA. In fact, the adoption process and procedures followed to reach the significant results which enhanced the role of the healthcare staff members.

Key Words: Psychosocial, Aspects, Work environment, Challenges, Emotion, stress, Health professional, Primary health care

Recent Publications

1. The relationship between workplace psychosocial environment and retirement intentions and actual retirement: a systematic review, 2017, EUR J AGEING
2. .Effect of personal and work stress on burnout, job satisfaction and general health of hospital nurses in South Africa, Dec 2017
3. The Consequence of work environment on Employees Productivity, Jan 2017

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4. Demographic Factors and their Relation to Fatigue and Mental Disorders in 12-Hour Petrochemical Shift Workers, Dec 2014

Biography

Abrar had First Honor graduated 2018 Master degree in community nursing at KSU. Worked as lecturer and clinical instructor in Inaya Medical college. Completed Scientific research during the work of the master thesis published in 2021 August. Attended as speaker in the 9th world congress on nursing and health care in Oct 8 2021. Attended as Speaker in Journal club to discuss current women sexual harassment issue in 10 November.2021

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Jifeng Liu, J Nurs Res Pract 2022, Volume 06

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Whole transcriptome analysis revealed a stress response to deep underground environment conditions in Chinese Hamster V79 lung Fibroblast Cells

Jifeng Liu
Sichuan University, China

Background: Prior studies have shown that the proliferation of V79 lung fibroblast cells could be inhibited by low background radiation (LBR) in deep underground laboratory (DUGL). In the current study, we revealed further molecular changes by performing whole transcriptome analysis on the expression profiles of long non-coding RNA (lncRNA), messenger RNA (mRNA), circular RNA (circRNA) and microRNA (miRNA) in V79 cells cultured for two days in a DUGL

Methods: Whole transcriptome analysis including lncRNA, mRNAs, circ RNA and miRNA was performed in V79 cells cultured for two days in DUGL and above ground laboratory (AGL), respectively.The differentially expressed (DE) lncRNA, mRNA, circRNA and miRNA in V79 cells were identified by the comparison between DUGL and AGL groups. Quantitative real-time polymerase chain reaction(qRT-PCR)was conducted to verify the selected RNA sequencings. Then, Gene Ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) pathway was analysed for the DE mRNAs which enabled to predict target genes of lncRNA and host genes of circRNA.

Results: With $|\log2(\text{Fold-change})| \geq 1.0$ and $p < 0.05$, a total of 1257 mRNAs (353 mRNAs up-regulated, 904 mRNAs down-regulated), 866 lncRNAs (145 lncRNAs up-regulated, 721 lncRNAs down-regulated), and 474 circRNAs (247 circRNAs up-regulated, 227 circRNAs down-regulated) were significantly altered between the two groups. There was no significant difference in miRNA between the two groups. The altered RNA profiles were mainly discovered in lncRNAs, mRNAs and circRNAs. DE RNAs were involved in many pathways including ECM-RI, PI3K-Akt signaling, RNA transport and the cell cycle under the LBR stress of the deep underground environment.

Conclusion: Taken together, these results suggest that the LBR in the DUGL could induce transcriptional repression, thus reducing metabolic process and reprograming the overall gene expression profile in V79 cells.

Key words: Deep underground environment, V79 cells, mRNA, lncRNA, circRNA

Recent Publications

1. Proteomics provides insights into the inhibition of Chinese hamster V79 cell proliferation in the deep underground environment
2. Should Contralateral Nodules Be an Indication of Total or Completion Thyroidectomy for Patients with Unilateral Papillary Thyroid Carcinoma? Front. Endocrinol., 09 August 2021 | https://doi.org/10.3389/fendo.2021.723631.
3. Intraoperative dexmedetomidine-related polyuria: A case report and review of the literature2022 Apr;60(4):188-191. doi: 10.5414/CP204129.

Biography

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Thayná Laís de Souza Arten, J Nurs Res Pract 2022, Volume 06

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Executive functions and memory in Parkinson's disease patients with and without Deep Brain Stimulation

Thayná Laís de Souza Arten
Federal University of Parana (UFPR), Brazil

The cognitive effects of Deep Brain Stimulation (DBS) in patients with Parkinson's Disease (PD) have been investigated in several researches. Studies on the influence of individual variables on cognitive performance in DBS, however, are scarce. This study aimed to identify the association between demographic characteristics, executive functions, and memory performance in a group of PD patients with and without DBS before COVID-19 pandemic.

Methods: 76 participants were subdivided into three groups: 30 healthy people (control group), 30 diagnosed with PD treated only with drugs (drug group), and 16 with PD treated with DBS (DBS group). Executive functions and memory were assessed using the following instruments: Montreal Cognitive Assessment, Rey Auditory Verbal Learning Test, Trail Making Test A and B, Digits Span, and Stroop Test. Analysis of Variance (ANOVA) and exploratory linear regression were used for data analysis.

Results: ANOVA showed significant differences between the control, drug, and DBS groups. However, the exploratory regression analysis identified a significant association of the variables including age, schooling, and activity of daily living with the performance of executive functions and memory only in the DBS group. This study showed significant associations of some demographic variables (age, schooling, and activities of daily living) in the performance of various measures of executive functions and memory in patients with DBS, but not in patients with drug treatment. The demo- graphic characteristics of the patients were identified as being associated with behavioral changes, such as impulsivity, and as risk factors for post-surgical complications. The result of this study, on the association between demographic characteristics and cognitive performance, can be explained by the pre-clinical characteristics of patients subjected to surgical treatment.

Conclusion: The results showed that the performance of memory and executive functions was associated with demographic characteristics only in patients treated with DBS.

Memory and Executive Functions performance

Assessments	Control (n=26)	Drug (n=21)	DBS (n=16)	P-Value
MoCA score, mean (SD)	27.3 (1.81)	24.2 (4.37)	23.9 (2.02)	<0.001
Memory, mean (SD)				
Total score	38.6 (8.67)	27 (9.63)	24.6 (5.35)	<0.001
Recognition, mean (SD)	12.4 (1.96)	8.6 (4.36)	8.6 (2.66)	<0.001
Trial B1	4.6 (1.6)	3.1 (1.8)	3.2 (1.3)	0.002
Trial A6	7.3 (2.4)	4.4 (2.9)	4.1 (1.9)	<0.001
Trial A7	7.2 (2.9)	4.3 (3.0)	3.1 (1.6)	<0.001

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Memory and Executive Functions performance

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Trial A7	7.2 (2.9)	4.3 (3.0)	3.1 (1.6)	<0.001

Recent Publications

1. Merola A, Romagnolo A, Rizzi L, et al. Impulse control behaviors and subtha- lamic deep brain stimulation in Parkinson disease. J Neurol 2017;264(1):40–8. doi: 10.1007/s00415-016-8314-x

2. Farrokhi F, Buchlak QD, Sikora M, et al. Investigating Risk Factors and Predict- ing Complications in Deep Brain Stimulation Surgery with. Machine Learning Algo- rithms.World Neurosurg 2020;134:325–38. doi: 10.1016/j.wneu.2019.10.063

3. Mills KA, Donohue K, Swaminathan A, Leoutsakos JM, Smith G, Brandt J. Neu- ropsychological predictors of patient-reported cognitive decline after deep brain stimulation in Parkinson's disease. J Clin Exp Neuropsychol 2019;41(3):219–28. doi: 10.1080/13803395.2018.1526889.

4. Mulders AEP, Temel Y, Tonge M, et al. The association between surgical char- acteristics and cognitive decline following deep brain stimulation of the subtha- lamic nucleus in Parkinson's disease. Clin Neurol Neurosurg 2021;134:98–103. doi: 10.1016/j.clineuro.2020.106341

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Biography

Currently part of the postgraduate program – Doctorate (PhD) at the Universidade Federal do Paraná (UFPR). Doctoral project in personality, executive functions, and post covid cognitive sequelae in Parkinson's Disease. Master in Psychology, focused in the research line of Neuropsychological Assessment and Rehabilitation. Psychologist specialist in Psychological Assessment and in Cognitive Behavioral Therapy. Research interest in Neuropsychology, Bilingualism, Behavior/Cognition, Parkinson's Disease, Neurosurgery, Cognitive Behavioral Therapy.

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Nabil A Badawy et al., J Nurs Res Pract 2022, Volume 06

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Knowledge and attitude related to cervical cancer prevention and screening among female students in the College of Nursing, Kuwait

Nabil A Badawy, Mona A Al Shammari, Marziyeh S Hosseini , Seham M Mustafa
Public Authority for Applied Education and Training, Kuwait

Objectives: To assess knowledge and attitude related to cervical cancer prevention, and screening among female students in the college of nursing in Kuwait.

Subjects and Methods: This was a descriptive cross-sectional questionnaire-based survey in which 250 female students were recruited to answer the questionnaire.

Results: Mean age of the students was 20.91 ±4.28 years. Ninety percent (n = 227) of them have heard of cervical cancer, but only 25.72 % (n = 65) recognized infection with the human papilloma virus as a risk factor. Only 23.33% (n=58) of the students studied are aware of the human papilloma virus (HPV) vaccination. Seventy-nine percent (n=198) of the students studied were aware of the Papanicolaou cervix smear (Pap smear), and 42% of them gave a positive response when asked about the test's necessity. When students with a history of marriage were compared to those without a history of marriage, they demonstrated a statistically significant increase in their intention to undergo cytological examination (61.5 % vs 38.5 %, p=0.036). Comparing students in years 3 and 4 of a bachelor's program to those in years 1 and 2 revealed that student in years 3 and 4 were more knowledgeable about the relationship between HPV infection and cancer cervix (23.7% Vs 16 %, p=0.003).

Conclusion: Nursing students have a limited understanding of cervical cancer, HPV vaccination, and Pap smear screening as an early detection practice. Cervical cancer prevention and screening issues must be immediately integrated into nurses' existing teaching and training curricula

Recent Publications

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Biography

Nabil A Badawy, studied at the faculty of medicine, Alexanderia university in Egypt got his Doctorate degree in 2000 at the same institution. His current position is an associate professor in the college of nursing in Kuwait. Most of carrier was in intensive care units but in the last 12 years and joined college of nursing , and went the carrier of nursing education

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Hanan Mohamed Soliman et al., J Nurs Res Pract 2022, Volume 06

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The effect of progressive muscle relaxation training on chemotherapy -induced nausea, vomiting and anxiety in Egyptian breast cancer women: A randomized controlled trial

Hanan Mohamed Soliman, Ahmed Eltantawy, Rania El-Kurdy
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Background and objective: This study was conducted to examine the effect of Progressive muscle relaxation training in combination with antiemetic drugs on chemotherapy -associated nausea, vomiting and anxiety in breast cancer women receiving chemotherapy.

Methods: A randomized controlled trial design was conducted on 74 patients divided into control (n = 37) and PMRT group (n = 37). The study was conducted at Oncology Center affiliated to Mansoura University, Egypt. The intervention included daily PMRT practice for seven days two hours before chemotherapy. The patients exercised in the oncology unit with the researcher, and individually applied the exercises at home. The data was collected using Rhodes index of nausea- vomiting and retching used daily after chemotherapy for seven days and Zung self-rating anxiety scale used before chemotherapy and at the seventh and 14th days after chemotherapy.

Results: A significant decrease in the frequency, severity, and duration of vomiting, nausea, retching and anxiety in PMRT group than in the control group ($p < 0.0001$).

Conclusion: Progressive muscle relaxation combined with antiemetics was effective in reducing vomiting, nausea, and retching, as well as improving anxiety level induced by chemotherapy.

Keywords: Anxiety, Breast Cancer, Chemotherapy, Nausea-vomiting, Progressive muscle relaxation

Recent Publications

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4. Biography

Rania El-Kurdy is the Lecturer of Woman's Health and Midwifery Nursing, Faculty of Nursing at Mansoura University, Egypt.

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Tamanna Afroz, J Nurs Res Pract 2022, Volume 06

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Culture clash of female Somali adolescents and sexual and reproductive health services in Oslo, Norway

Tamanna Afroz
University of Oslo, Norway

Culture clash of female Somali adolescents and sexual and reproductive health services in Oslo, Norway. Fourteen young women aged 16–20 years were recruited using the snowball technique with purposive sampling. In-depth interviews using a semi-structured interview guide were used to collect data, and thematic analysis was applied. Participants perceived sexual and reproductive health as a very private matter and open discussion of SRH was extremely limited owing to certain Somali cultural beliefs and values. As the participants intend to practise chastity before marriage, they believed that existing SRH services were largely irrelevant and inappropriate. Where they felt the need to access SRH services, participants wished to do so in a way they considered culturally appropriate. In conclusion, Somali culture markedly influences individuals' perceptions of SRH services. It is recommended to modify existing SRH services by increasing confidentiality and anonymity in order to take into account the cultural requirements of female Somali adolescents.

Recent Publications

1. Testicular Tumour of Adolescent and Adult: An observational study of risk factors, clinical presentation and treatment options in tertiary medical facility in Dhaka. (as co-author)
2. Case Studies- "Crush Programme" as part of combined control programme for culex mosquitoes in both North and South Dhaka city Corporation. (As second and corresponding author, BMA Journal, September, 2021)
3. Communication in Immigrant Communities Dec 2015 The International Encyclopedia of Interpersonal Communication

Biography

Tamanna Afroz is a Project Research Physician (PRP) at ICDDR,b, Mohakhali, Dhaka. Her research interests include Sexual and reproductive health and rights, Health communication, Epidemiology.

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Sofica Bistriceanu, J Nurs Res Pract 2022, Volume 06

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Factors Influencing management effectiveness in patients with a minor Brain Haemorrhage

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Background: brain haemorrhage usually appears under more pressure on vulnerable blood vessels in the head; time action, procedures' selection for restoring the health, and individuals' interaction style orchestrate the clinical picture of suffering in remission or extension.

The aim: reveal the management effectiveness composite in the patient diagnosed with a minor brain haemorrhage in an outpatient setting.

Material& Method: qualitative study performed by the author in the community, 2021 - June 2022, relating to the management efficiency in suffering from a minor brain haemorrhage in individuals.

Findings: comparative data

-In winter, 2021, a patient, 57, experienced a forceful discussion with her partner; headache, HTA noticed shortly. A few hours later, in the upper and lower left, right eyelid, nasal base appeared skin problems: red-purple colour, oedema; headache maintained.

Patient's health history: herniated lumbar disc L4-L5, 2017; HTA, 2017; overweight, 2017-2022.

Patient's family health history: parents: HTA

Actions were taken: the scared patient called her family doctor. The physician's home visit established the diagnosis of minor brain haemorrhage, and hypertension. She recommended the treatment to the hospital, but the patient did not agree with that. The family physician dealt with the situation using drugs, and behaviour change information; the follow-up doctor's visits were scheduled for the first 12 hours at 4 hours each, then at 6 – 8 to 12 hours. The doctor advised the patient's family members to be more attentive in interaction with the patient; kind words, generosity, and peaceful dealings were required. Bed rest, stable air energy, and light therapy improved the disease's evolution.

Results: After three days the skin lesions were well recuperated, and the headache disappeared.

-In winter 2022, a patient, 52, after a violent discussion with her business partners presented a headache. The next day, in the morning she observed in the upper and lower right eyelid skin problems: red-purple colour, oedema; headache was maintained.

Patient health history: hysterectomy: 2017; hypertension, 2018; divorced patient, 2019.

Patient family health history: mother, brothers: type 2 diabetes, hypertension; father: hypertension.

Actions were taken: the patient called her family physician; a minor brain haemorrhage was registered by the doctor, and she recommended the treatment in the hospital. The patient did not agree with that; in addition, she did not consider the bed rest benefit for the disease evolution, as she was advised by the physician; the patient decided to continue to work daily, taking

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only the drugs. The doctor managed the situation using IT technology, drugs, communication skills, and behaviour change information.

Results: After 17 days the patient's skin lesions were reduced in the upper and lower right eyelid. The follow-up doctor's visits continued as e-visits twice monthly. In May 2022, the doctor's home visit brought to light minimally modified skin colour in the upper and lower right and left eyelids. The patient mentioned that in those areas, the modified skin colour reappears in trouble time with fatigue return.

Conclusion: patient's acceptance of a health improvement plan is essential for successful therapy. Physician communication skills may improve, making easy-going on the route for collaboration; kind words, friendly attitude, empathy, compassion, and quiet flowing of information facilitate the patient's adherence to the therapy.

Discussion/Implications: Job responsibility is not a top priority in times of altered health. A minor brain haemorrhage without proper control can progress to a moderate or severe disorder, altering life quality, implying palliative care with additional cost.

The best management of a minor brain haemorrhage means paying attention to all factors composing it, including drugs, behaviour change, and communication skills; words, air energy, light therapy, bed rest, and emotional support have to be counted. Each therapeutic plan constructed upon the medical history and adjusted to the patient's particular environment leads to the desired outcomes.

People interact with individuals from many industries, and their unsafe communication can be the point start of disorders in vulnerable people. Interest in improving professionalism in all industries is required; educational programs are necessary.

Biography

Sofica Bistriceanu studied in Romania at the 'Gr. T. Popa' Iasi University, and graduated as MD in 1984, research in family medicine, Maastricht University, 2000, Ph.D. in 2009, Iasi, at the same institution. She joined the European, American, Asian Primary Care Research Group, American Academy on Communication in Healthcare, APTR, IHI, NICHQ, EPCCS, EURACT, WONCA Meetings. She is a member of Academy for Professionalism in Health Care. Dr Sofica Bistriceanu is the author of more than 70 research studies shared abroad and received awards for some of them. She is a member of The Journal of Patient Experience (JPX) Editorial Review Board. Dr. Sofica Bistriceanu is the representative of the Academic Medical Unit located in NT, ROU. She is the author of seven volumes of poems published by Chronica Iasi Publishing House, and Time, Iasi Publishing House

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Is abdominal circumference accurate for diagnosing fetal growth restriction and its neonatal complications?

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Fetal Growth Restriction (FGR) is associated with adverse neonatal, post-natal and paediatric outcomes. Early detection via FGR screening allows adequate risk management with emphasis placed on early prenatal care. This review aims to evaluate the usefulness of Abdominal Circumference (AC) in FGR diagnosis and in prediction of associated adverse outcomes. Pubmed, Cochrane and Scopus were systematically searched to find 8 appropriate articles for review. Evidence determined AC to be a useful technique to elucidate fetal growth independently but to be even more accurate in combination with other parameters. This data will inform the practice of obstetricians; selecting those fetuses at risk is necessary for allocation of antenatal testing, appropriate treatment and timely delivery. Limitations of this review included varying population selection, use of retrospective data and the inclusion of both twin and singleton studies. A combined approach of AC and estimated fetal weight (EFW) in FGR diagnosis appears to be the most sensitive and specific criteria. Future research into individualisation of fetal growth study and inclusion of biochemical markers appears promising.

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Mutations in SCN3A gene cause early infantile Epilepsy

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Neurons allow the brain and body to communicate through electrical signals. Voltage-gated ion channels like sodium, calcium, potassium, and chloride channels are critical in electrical signaling. Sodium channels play an important role in the generation and propagation of the signals. Under normal conditions, these signals allow neurons to communicate, however, abnormal, and excessive excitation of neurons may lead to epileptic encephalopathies. The SCN3A gene, encoding the type 3 sodium channel, Nav1.3, is highly expressed in the brain starting from 16 weeks of fetal life. We have discovered that the mutations in SCN3A result in the gain of function by altering gating properties of the channel, leaving the ion channel stuck open that in turn causes current flood leading to electric sparking, a signature of epilepsy. Magnetic resonance imaging (MRIs) and neurological evaluations further revealed that the epileptic patients carrying mutations in SCN3A also exhibit malformation of cortical folding indicating its possible role in brain development. This study reinforces the role of variants in SCN3A as a cause of neurodevelopmental disorders along a spectrum of severity that includes epilepsy and polymicrogyria and suggests that gain of channel function is an important mechanism of disease pathogenesis. Manipulating epileptic genes in utero could be used to analyze roles of genes in embryonic development and intellectual disability. These are still early days, but with precision medicine, early prenatal diagnosis, SCN3A gene manipulation during the critical window, may help prevent brain malformations in babies.

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A nursing-led quality improvement project to reduce the rate of CLABSI in adult ICUs at PSMMC using multidisciplinary team approach

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Intensive Care Unit (ICU) patients are at high risk for infections associated with the use of invasive devices. Bloodstream infections greatly prolong hospitalizations and increase resource utilization. Infections are also one of the leading causes of death in the United States (NDNQI, 2021), while in the Kingdom of Saudi Arabia, CLABSI constitutes 14.2%-38.5% of HAIs in the Kingdom, with rates varying from 2.2 to 29.7/1000 central line days and crude device-associated mortality of 16.8%-41.9% (Khan et al., 2019). The rate of Central Line Associated Blood Stream Infections (CLABSI) in Adult Intensive Care Units (ICUs) at Prince Sultan Military Medical City (PSMMC) at the start of the project was 7.6/1000 central line days in January 2020. The Central Line Bundle initiated by the Institute of Healthcare Improvement (IHI) was implemented in line with the monitoring of staff compliance to the Central Line (CL) Bundle. The compliance to CL Bundle was very low at 43% in 4Q 2020. As such, a multidisciplinary team was created to improve the compliance to the CL bundle which was expected to have an impact on the rate of CLABSI to reduce incidence rate and subsequently achieve zero CLABSI events. The significant reduction in the rate of CLABSI was achieved in March 2021 with 2.1/1000 device days. Subsequently, with the long term aim of the project to target zero CLABSI event in all adult ICUs, the project has been implemented continuously and the rate continued to drop and the ultimate target of zero CLABSI was achieved in the succeeding months of 2021 (May 2021 until present). This target of zero CLABSI event was realized in conjunction with an increasing percent of compliance to CL bundle, currently at 90%. In summary, establishing a multidisciplinary team intensified by a successful implementation of CL Bundle can help in reducing the rates of CLABSI and achieving zero CLABSI events for a sustained period.

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Obstetric outcomes of assisted reproduction in advanced maternal age

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Statement of the Problem: In recent years, the number of women who give birth for the first time in advanced maternal age (AMA) after assisted reproduction (ART) has increased significantly. Pregnancy and childbirth in this population usually proceed with a large number of complications and require special tactics of follow-up and delivery. The purpose of this study is to investigate the impact of AMA and ART on obstetric outcomes of nulliparous singleton cephalic pregnancies and determine possible measures for the prevention of obstetric complications in AMA women after ART

Methodology & Theoretical Orientation: A retrospective statistical analysis of medical recorders of live-born singletons, cephalic, non-anomalous nulliparous pregnancies was done. The ART conception and spontaneous conception groups were compared and contrasted.

Findings: Intrauterine growth restriction, nonreassuring fetal state, induction of labor, operative vaginal delivery, C-section and massive obstetric hemorrhage (MOH) are authentically more common for the nulliparous ART-conception AMA patients, especially in the subgroup aged of 40-45 years.

Conclusion & Significance: Nulliparous AMA women after ART have significantly higher risks of the adverse obstetric complications, and therefore require dynamic monitoring of the mother`s and fetal conditions, timely prevention and correction of disorders during pregnancy and delivery.

Recommendation: These made to the maternity hospitals to consider this population as highly threatening for C-section and MOH and use uterotonics and hemostatics for prevention of the complications. Taking into account that the risk of complications significantly increases in patients aged 40 years and older, the option of the elective term C-section also should be considered for this subgroup of patients.

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Utility of circulating cell-free DNA in assessing microsatellite instability and loss of heterozygosity in breast cancer using human identification approach

Norah Alsharhan
Saudi Food and Drug Authority, Saudi Arabia

The diagnostic and prognostic utility of circulating cell-free DNA (cfDNA) in breast cancer (BC) patients was recently reported. Here, we investigated the use of cfDNA to examine microsatellite instability (MSI) and loss of heterozygosity (LOH) for early BC diagnosis. cfDNA and genomic DNA from 41 female BC patients and 40 healthy controls were quantified using NanoDrop spectrophotometry and real-time PCR. The stability of genomic and cfDNA was assessed using a high-resolution AmpFlSTR MiniFiler human identification kit. Significant increases in cfDNA plasma concentrations were observed in BC patients compared to controls. The genotype distribution of the eight autosomal short tandem repeat (STR) loci D7S820, D13S317, D21S11, D2S1338, D18S51, D16S539, FGA, and CSF1PO were in Hardy–Weinberg equilibrium. Significant differences in the allele frequencies of D7S820 allele-8, D21S11 allele-29, allele-30.2, allele-32.2, and CSF1PO allele-11 were seen between BC patients and controls. LOH and MSI were detected in 36.6% of the cfDNA of patients compared to genomic DNA. This study highlights the utility of plasma-derived cfDNA for earlier, less invasive, and cost-effective cancer diagnosis and molecular stratification. It also highlights the potential value of cfDNA in molecular profiling and biomarkers discovery in precision and forensic medicine.

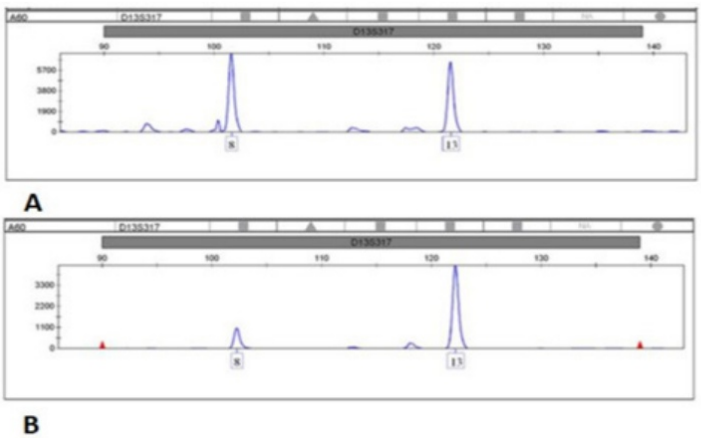


Figure 1. Loss of Heterozygosity observed at locus D13S317. Panels (**A**) represents normal genotypes in genomic DNA, while Panel (**B**) is a representative of MSI in cfDNA.

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How to use escape rooms to promote active, engaged student nurse learning that promotes decision-making skills

Sandie Nadelson, Louis Nadelson
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With students' attention spans decreasing while distractions such as social media are increasing, keeping students engaged in learning is becoming more difficult for nursing faculty members. Active learning strategies have been shown to enhance engagement in the learning process and improve students' problem-solving abilities.

Recently, an active learning strategy growing in popularity is using "escape rooms." Escape rooms (ER's) are considered games that enhance teamwork, decision-making skills, and learning. ER's can be either virtual or based in physical spaces. Both undergraduate and graduate students can benefit from participating in this active learning activity.

In the ER's students are asked to complete various sequential challenges to "escape" the room. The students get out by determining what to do to open the locks. For example, students may need to find physical keys or determine the numbers required to open combination locks.

There are commercial sites that do lock participants in rooms. However, for educational purposes, the locks are more symbolic than literal. The puzzles also have a different purpose in education. ER scenario questions reinforce nursing concepts and learning rather than answering the challenges for the pure pleasure of solving problems.

This presentation will focus on how ER's are used in nursing education. Participants will be given information on why ER's are used in nursing education, how they can be used to enhance learning, and how to develop ER's.

Attendees will also learn about the presenters' experience using ER's with undergraduate and graduate students. We will offer a list of the many subjects covered in escape room scenarios. Topics we have used in escape rooms range from mobility in skills labs to evidence-based practice in clinical nursing.

In addition, site links will be given to developed escape room scenarios available for use in nursing education.

With students' attention spans decreasing while distractions such as social media are increasing, keeping students engaged in learning is becoming more difficult for nursing faculty members. Active learning strategies have been shown to enhance engagement in the learning process and improve students' problem-solving abilities.

Recently, an active learning strategy growing in popularity is using "escape rooms." Escape rooms (ER's) are considered games that enhance teamwork, decision-making skills, and learning. ER's can be either virtual or based in physical spaces. Both undergraduate and graduate students can benefit from participating in this active learning activity.

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In the ER's students are asked to complete various sequential challenges to "escape" the room. The students get out by determining what to do to open the locks. For example, students may need to find physical keys or determine the numbers required to open combination locks.

There are commercial sites that do lock participants in rooms. However, for educational purposes, the locks are more symbolic than literal. The puzzles also have a different purpose in education. ER scenario questions reinforce nursing concepts and learning rather than answering the challenges for the pure pleasure of solving problems.

This presentation will focus on how ER's are used in nursing education. Participants will be given information on why ER's are used in nursing education, how they can be used to enhance learning, and how to develop ER's.

Attendees will also learn about the presenters' experience using ER's with undergraduate and graduate students. We will offer a list of the many subjects covered in escape room scenarios. Topics we have used in escape rooms range from mobility in skills labs to evidence-based practice in clinical nursing.

In addition, site links will be given to developed escape room scenarios available for use in nursing education.

Recent Publications

1. Nadelson, S., Nadelson, L., & Connor, K. (2021). Asynchronous Online Simulation in Nursing Education: Creating Learning Opportunities to Meet Current Challenges. Journal of Comprehensive Research and Practice. Under review.

2. Nadelson, S. & Collins, C. (2021). Using critical appraisal tools to evaluate research and determine applicability to clinical practice. Journal of Nursing Research and Practice. Under review.

3. Nadelson, S., Anderson, D. L., Massey, M. D., Lowder, T. W., Yarberry, & F. M. Faculty Perceptions of Teaching Curiosity to Nursing and Health Science Students. Journal of Modern Practice and Research. Accepted for publication.

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6th International Conference on
NURSING SCIENCE AND GYNECOLOGY-GENETICS
June 20-21, 2022 | Paris, France

Maternal mortality and morbidity: Trends and challenges for the upcoming years

Ana Patrícia Vicente
Hospital de Cascais – Dr. José de Almeida, Portugal

Maternal mortality has decreased significantly in the last decades, especially in developed countries. This was mainly driven by improved health care access and management. Still, maternal health faces many challenges, that must be addressed in the upcoming years. Global efforts are being made to reduce the dissimilarity between developed and developing countries, concerning maternal care and mortality. The World Health Organization (WHO) and partners intend to reduce global maternal mortality ratio by specifically ending preventable causes. At the same time, it is vital to address the growing complexity of healthcare provision, given the recent changes in the paradigm of the maternal profile. As so, in the last years, many developed countries have shifted the focus of maternal health analysis to severe maternal morbidity. Several factors contribute to this, including advanced age and comorbidities epidemics, as well as migration trends and globalization. Intensive Care Unit (ICU) maternal admissions have started to be considered an objective marker of severe maternal morbidity. In conclusion, besides mortality, maternal morbidity has become a main topic of research. Given the current trends in maternal health, proper evaluation in needed so that further maternal health improvement can be achieved.

Recent Publications

1. World Health Organization (2019) Trends in maternal mortality: 2000 to 2017: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division. Geneva.
2. Say L, Chou D, Gemmill A, Tunçalp Ö, Moller AB, Daniels JD et al. (2014) Global Causes of Maternal Death: A WHO Systematic Analysis. Lancet Global Health 2(6):e323-e333.
3. Roosmalen J, Zwart J (2009) Severe acute maternal morbidity in high income countries. Best Practice & Research Clinical Obstetricts and Gynaecology 23:297-304.
4. Vasques DN, Estenssoro E, Canales HS, Reina R, Saenz MG, Das Neves AV et al. (2007) Clinical characteristics and outcomes of obstetric patients requiring ICU admission. Chest 131:718-24.
5. Say L, Souza JP, Pattinson RC (2009) WHO Working Group on Maternal Mortality and Morbidity Classifications: Maternal near miss – towards a standard tool for monitoring quality of maternal health care. Best Pract Res Clin Obstet Gynaecol 23:287–296.

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Upcoming Conferences

7th International Conference on
Human Genetics and Genetic Disorders
November 21-22, 2022 | London, UK

7th International Conference on
Nursing Science & Technology
November 16-17, 2022 | Paris, France

7th World Congress on
Gynecology and Obstetrics
December 05-06, 2022 | Dubai, UAE





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