



Global Scientific Guild Conference

Abstract Book

9th Global Webinar on Public Health

April 24-25, 2024

Conference Chairman



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Upcoming Events-2024

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| 7th Global Webinar on 3D Printing and Additive Manufacturing | <i>April 29-30, 2024</i> |
| Global Webinar on Pharmaceutics and Drug Delivery Research | <i>June 05-06, 2024</i> |
| Global Webinar on Renewable and Sustainable Energy | <i>June 12-13, 2024</i> |
| Global Webinar on Vaccines Research and Development | <i>June 19-20, 2024</i> |
| 4th Edition of Global Webinar on Nanotechnology and Nanoscience | <i>June 26-27, 2024</i> |
| 10th Global Webinar on Applied Science, Engineering and Technology | <i>July 03-04, 2024</i> |
| 12th Global Webinar on Traditional and Integrative Medicine | <i>July 10-11, 2024</i> |
| 11th Global Webinar on Forensic Science | <i>July 17-18, 2024</i> |
| 10th Global Webinar on Materials Science and Engineering | <i>August 01-02, 2024</i> |

Upcoming Events- 2024

**3rd Global Webinar on
Neuroscience and Brain Disorders**

***August 13-14,
2024***

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Prof. Rostislav Stefanov Kostadinov

Medical University of Plovdiv, Bulgaria

Disaster Medical Support Planning and the Artificial Intelligence

Artificial Intelligence is becoming a powerful tool for enhancing the effectiveness of almost all human activities. One of the domains, where its implementation could be extremely plausible is the Disaster Medical Support. The efficient, adequate and prompt Disaster Medical Support could be performed only, when it is based on comprehensive and detailed Disaster medical support contingency plan.

The objective of this study is to present the Artificial Intelligence capabilities to speed and sophisticate the disaster medical long-term and crisis planning processes.

Based on the thoroughly performed review of the publications and on the gained personal experience some of the most appropriate implementations are presented and discussed.

As a result of the performed research and analyses, it has to be noted that the Disaster medical support plan basic areas as environmental overview, hazards and related risk factors' identification, vulnerability assessment and general and health risk levels' evaluation are of the most suitable for Artificial Intelligence implementation. The predictive models related to increasing the population, communities and healthcare systems resilience are also noted as preferable for Artificial Intelligence-driven support. While Artificial Intelligence implementation into long-term disaster medical support planning could be a little bit limited, because of the existing already well defined data bases, its implementation into the crisis planning process has not to be questioned and discussed. The speed and accuracy of the developing situation assessment and courses of action proposals are of great and life saving value.

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As a conclusion the growing, comprehensive implementation of the Artificial Intelligence into Disaster Medical Support Planning has to be noted.

Biography:

Prof Colonel Rostislav Stefanov Kostadinov is Organizing and leading the educational process for Medical University of Plovdiv and Medical College of Plovdiv students. Delivering lectures, leading seminars and the students examine. Monitoring, organizing, and facilitating the International relations and Project activities of the Public Health Faculty academic staff. Organizing and leading Ph.D. and resident programs on Disaster Medicine and Disaster Medical Support at the Medical University of Plovdiv Planning, organizing, and managing courses for improvement of the population skills for healthy behavior in case of disasters and catastrophes. Leading and managing courses for disaster medical support (for medical professionals) and advance medical training for search and rescue team members.

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Sharon Fisher Roberts

Attorney and Counselor and Heddy Hill Productions, USA

Louie Who? Lewy Body Dementia is a Public Health and Safety Concern

The Global Burden of Disease, Injuries and Risk Factor Study (GBD) released by The Lancet Neurology on March 14, 2024, with data analysis contributions by the World Health Organization (WHO), reveals “over 1 in 3 people are affected by neurological conditions, now the leading cause of illness and disability worldwide.” Member states at the World Health Assembly in 2022 adopted the Intersectoral Global Action Plan 2022-2031 to help countries improve prevention, early identification, treatment, and rehabilitation of neurological disorders. Matters of equity and access to quality care can be addressed only when countries are willing to invest in research about risks to brain health, provide support to the healthcare workforce, and emphasize public health approaches. The umbrella term “dementia” shows up in the top ten most common neurological conditions across the globe. Lewy Body Dementia (LBD) and its cousin Dementia with Lewy Bodies (DLB) are the second most common dementia type, behind the more widely recognized and better-defined Alzheimer’s Disease (AD). Other dementia examples include frontotemporal dementia (FTLD) and vascular dementia (VaD). Recent studies show certain comorbidities are shared among these dementia subtypes. The most common comorbidities amongst these dementias are high cholesterol, high blood pressure, insomnia, diabetes mellitus, and hearing impairment. Predictably, late onset dementia (>65) patients suffer a higher burden of comorbidities than those with early onset (<65). Public health approaches to teach about the different dementias and to help people know what to look for are key--with special emphasis on safety problems unique to Lewy Body Dementia or Dementia with Lewy Bodies. LBD first presents typically with Parkinsonian type symptoms, like slow walking, which generally precede noticeable cognitive decline. Cognitive decline generally precedes major mobility symptoms in DLB. Other seemingly unrelated symptoms can include REM sleep disorder, falling, apathy, and constipation. What sets LBD/DLB apart from the other dementias is the

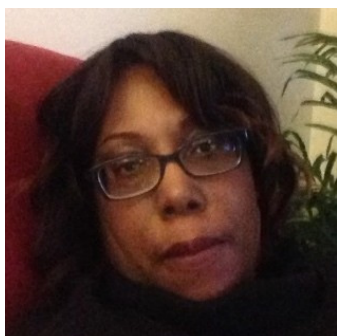
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onset of persistent hallucinations and delusions, often of children or animals. In no other dementia is the problem of hallucinations so prevalent, nor the safety of the patient and the caregivers more at risk of harm. Visual/spatial difficulties are common but can affect more than vision. With LBD/DLB, a person can become disoriented in places familiar or forget how to navigate routes taken many times before. Driving becomes a problem before hallucinations start, but we often don't know any spatial problems exist. We tend to suppose the person is just clumsy or forgetful, not that these issues portend deteriorating cognition. Once hallucinations are reported, often they persist. Daily, even hourly, reporting of the same people, similar figures, scenarios, activities, or completely different characters and activities becomes the norm. Indeed, the onset of reported hallucinations is many times the turning point for a family—a family looking for answers about what is happening to their loved one. Even within the healthcare world, one hears, “Louie who?” Those aware know that these intense and irrational suspicions can lead to dangerous situations for the patient and the very people caring for the patient. In LBD, these hallucinations are not necessarily fleeting or vague, but rather described in rich detail down to others “present,” alive and deceased, clothing, time of day, lighting, time in history, theories about back stories, how different figures help, or lure, or tell the patient to “do something.” In early days of hallucination onset, one may be able and should try to help the patient understand the difference. However, stark and shocking awareness may precede an inability to stop, creating even more distress for the patient and family. Auditory and olfactory hallucinations are possible but not typically as prevalent.

Biography:

Sharon Fisher Roberts, a longtime local government and public health attorney, graduated cum laude with a Bachelor of Arts degree in Organismal and Systems Biology from the University of Tennessee at Knoxville, USA, and with a Juris Doctorate degree from St. Mary's University in San Antonio, Texas, USA. She has been a writer, trainer, and speaker for local, state, and international associations, across sectors, in areas of governance, disability law, civil rights, administration of justice, environmental regulations, housing, nonprofit management, communication, and best business practices. She is currently writing a novel and lawyering for committed local leaders.

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Dr. Priscilla F Oluoha

BeLite Medical Clinic, USA

The Problem of Maternal Health and Child Health

The health of women and children is vital to creating a healthy world. Despite great progress, there are still too many mothers and children dying—mostly from causes that could have been prevented. Every day, approximately 800 women die from preventable causes related to pregnancy and childbirth. 99% of these deaths occur in developing countries. In 2012, 6.6 million children died before age 5—5 million of them in the first year of life.

Improvements in maternal and child (MCH) are a major focus of the health-related Millennium Development Goals (MDGs 4, 5, and 6), which still need substantial work to achieve 2015 targets, particularly in sub-Saharan Africa.

CDC has a decades-long history of engaging in activities to improve MCH globally, building on its domestic expertise, and making important contributions to reducing child mortality and morbidity worldwide. Most notably, CDC has been involved in a wide range of activities that address the major causes of perinatal, maternal, and under-5 morbidity and mortality. These include direct and indirect causes of maternal mortality, preterm birth complications, PMTCT, congenital syphilis, diarrheal diseases, vaccine-preventable diseases, malaria, pneumonia, TB, nutrition, and injury and violence.

CDC's Global MCH work focuses on four goals:

Reduce Under 5 Morbidity and Mortality

Reduce Perinatal and Maternal Morbidity and Mortality

Strengthen Public Health Systems for MCH

Strengthen Partnerships

Maternal health refers to women's health during pregnancy, childbirth, and the postnatal period.

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Each stage should be a positive experience, ensuring women and their babies reach their full potential for health and well-being.

Although significant progress has been made in the last two decades, about 287,000 women died during and following pregnancy and childbirth in 2020. This number is unacceptably high.

The most common direct causes of maternal injury and death are excessive blood loss, infection, high blood pressure, unsafe abortion, and obstructed labor, as well as indirect causes such as anemia, malaria, and heart disease.

Most maternal deaths are preventable with timely management by a skilled health professional working in a supportive environment.

Ending preventable maternal death must remain at the top of the global agenda. At the same time, simply surviving pregnancy and childbirth can never be the marker of successful maternal health care. It is critical to expand efforts to reduce maternal injury and disability to promote health and well-being.

Every pregnancy and birth is unique. Addressing inequalities that affect health outcomes, especially sexual and reproductive health and rights, and gender, is fundamental to ensuring all women have access to respectful and high-quality maternity care..

Biography:

Award-winning and dynamic professional in social services and public health services. I will maintain positive and long-lasting relationships with networking partners, staff, and clients. I will strive each day to carry out the mission of the BeLite Medical Clinic. The BeLite Medical Clinic is a Mental Health Clinic.

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Dr. Minerva Kelada

David Geffen School of Medicine at UCLA, USA

Is bottle water good for our health as proclaimed

Bottled water The controversy started recently But 30 years ago or more researchers tried to prove that it wasn't good for our health But the bottled water companies had strong political influence and these researchers were stopped with their effort Was bigger than them Nowadays many universities are starting to search the situation especially with the uncertainty of cancerous explosions in our generation Just for the listener and the reader If you have a cup of water and leave it for a day for sure it will taste different So what's in the bottled water that makes it very different Let's take a dive into this research and see for ourselves .

Biography:

Minerva kelada MD. A practicing physician and owner of Deanza urgent care clinic Graduated from UCLA pathology then did Family Medicine University of south Alabama. Chief medical officer for imperial county physicians medical group Was an adjunct clinical instructor UCSD Past medical consultant for the state medical board of California Involved in few new research projects recently University of Arkansas.

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Jessica Zamora

Public Health Specialist, USA

Check Yourself: Enhancing Access and Autonomy in STI Testing- A Continued Journey

Introduction: Building upon the success of our previous endeavors, Check Yourself aims to be at the forefront of national HIV/STI prevention efforts. Developed in collaboration with public health departments, our program continues to break down barriers to asymptomatic screening for HIV and STI's. Partnering with a public health technology laboratory, Check Yourself offers variation in testing kits that screens for five of the commonly found STI's (HIV, Syphilis EIA, Chlamydia, Gonorrhea and Trichomoniasis) including Hepatitis C and a screening panel for PrEP.

Methods: Introduced in 2022 by the National Coalition of STD Directors, Check Yourself has evolved to meet the changing landscape of public health programming offering clients the convenience to choose when and where to test. Since its initial launch, the program conducts business in 10 states, has a total of 16 clients and operates in 48 sites. Check Yourself is poised for further growth to underserved communities, supporting policies to sustain and expand the program's reach.

Results: In 2023 year to date, Check Yourself administered over 7,000 test kits and observed a 6% positivity rate among primarily asymptomatic clients.

Discussion/Conclusion: Check Yourself stands as a testament to the effectiveness of tailored non-clinic, self-collect healthcare solutions. Recognizing the evolving needs of patients, the program will introduce multiple site testing for Chlamydia and Gonorrhea. Check Yourself is committed to continued innovation that will support uptake in asymptomatic screening and promote best practices in healthcare delivery.

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Biography:

Jessica manages the Check Yourself At-Home Testing Program at National Coalition of STD Directors (NCSD) providing training and technical assistance to national public health partners. Prior to joining NCSD, Jessica oversaw the daily operations of a walk-in HIV/STI sexual health clinic at Ruth M. Rothstein CORE Center in Chicago, one of the largest HIV treatment facilities in the Midwest. Jessica earned a Master of Public Health from the University of Illinois at Chicago and a Bachelor of Community Health from the University of Illinois at Urbana-Champaign. She currently serves as board member of the Latino Caucus for Public Health, an affiliated organization of the American Public Health Association. In 2020, Jessica became a published contributing author for Today's Inspired Young Latina Vol II book series where she hopes her story will empower and inspire fellow Latinas to pursue a career in public health.

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Prof. Frank Chindamo
Founder @ LaughMD, USA

If Laughter is the Best Medicine, Why Don't We Use It as Medicine? Humor Therapy in Cancer Care: A Multidisciplinary Approach to Enhancing Quality of Life

Based on the familiar idiom that “Laughter is the Best Medicine,” which is supported by 405 studies, LaughMD seeks to address the challenges described in the ARPA-H Proactive Health focus area by developing an innovative approach to improve cancer care by integrating humor therapy, aiming to not only elevate the quality of life for patients but also regulate the autonomic nervous system and promote overall wellbeing. Our invention is particularly designed for cancer patients grappling with post-traumatic stress disorder (PTSD), addressing their complex needs through a comprehensive and parallel treatment strategy. Our innovation is based on scientific evidence 1,2 showing that laughter represents a promising non-invasive and cost-effective intervention to alleviate stress and anxiety, foster post-traumatic growth, and even boost the immune system. While laughter-based therapy has demonstrated broad applications for general wellness 3,4, its impacts could provide particular value for a vulnerable patient demographic at the intersection of chronic disease, mental health challenges related to PTSD, and opioid use disorders, offering care teams an additional tool to break cycles of distress without further medication 5,6. Laughter’s capacity to simultaneously reduce anxieties, inflammation, and promote overall well-being makes humor a promising means to delicately meet the multidimensional needs of this high-risk population.

Biography:

Prof. Frank Chindamo, CEO, LaughMD™, oversees the implementation of the laughter therapy program, bringing his compassion born from personal losses and trailblazing entertainment industry success with SNL, HBO, Showtime, CBS, PBS and Comedy Central. Frank was an Adjunct Professor in Web Video at USC, UCLA, Chapman, Pepperdine University, and Emerson College. Frank has won 30+ awards for producing comedy videos. He launched the world’s first mobile comedy channel, was featured on the front pages of Forbes Magazine, the LA Times, the Wall Street Journal and the NY Times. He is a Certified Humor Professional of the Association for Applied and Therapeutic Humor.

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Ritika Parasrampuria

University of Edinburgh, UK

Education Outcomes of Mental Health Promotion and Prevention Program in Low- and Middle-Income Countries

Adolescents carry the major burden of mental health illnesses as they experience many vulnerabilities and significant changes in their lives. Resilience-based programs can help reduce the impact that negative emotions have on an individual. A narrative review outlining the outcomes achieved by 5 different resilience programs was carried out, with the CorStone program as the main case study. 6 interviews were also conducted with CorStone staff and teachers, which have analysed thematically. Four main topics of outcomes resulted from all programmes. This included a positive attitude towards school and students' own futures, an increase in classroom cohesion and social inclusion, an improvement in teacher wellbeing, and the use of skills learnt. Key themes found during the interviews were: the improvement of student-teacher relationships, the information delivered by the programme was retained, there changed attitudes towards school and peers and there was an increase in confidence. There were many sub themes relating to these main themes. Improving an individual's positive attitude can lead to better relationships and school engagement. The review also found that the outcomes achieved by the CorStone programmes were repeatable in other resilience-based programs.

Biography:

Ritika Parasrampuria has completed her Masters in Global Mental Health and Society from the University of Edinburgh. She is currently working for Central and North West London Mental Health NHS Foundation, supporting the Palliative care team. The team supports and provides symptom control and pain management for Palliative Care patients. Her interest and Master's thesis is in resilience building along with mental health promotion and prevention.

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Dr. Zina T. McGee

Hampton University, USA

Enduring Public Health Crisis: Maternal Incarceration and Child Health Outcomes

This research addresses behavior difficulties and maladaptive coping among African American children and adolescents, and the manner in which these outcomes differ among those with incarcerated mothers. The study also provides an in-depth analysis of the experiences of mothers during and after their incarceration. Earlier investigations suggested that mothers' victimization and offending, including drug use, are related to children's emotional and behavioral outcomes. Hence, this research extends an ongoing project by investigating the nature of this relationship using aggregate data on adolescent health outcomes. Generally, most research addresses parental incarceration, typically followed by negative responses of male youth. Less research has evaluated the outcomes of parents' incarceration on African American children and adolescents specifically. This is particularly true among those with incarcerated mothers. Additionally, examinations have highlighted the role of fathers' incarceration on negative family functioning, yet we know less about the impact of mothers' imprisonment and re-entry on children's behavior. Many of these mothers are single and live in poverty, and their economic situations lead to higher risks of recidivism, deleteriously affecting their children. Moreover, several of them are raising children while experiencing traumatic mental health concerns amid drug usage with minimal support or treatment. For the current project, special attention is also placed on the mothers' experiences with contact with children, prior history of substance abuse, mental illness, treatment for drug and alcohol problems, and coping with separation from children in an attempt to reveal the subsequent, harmful impact on children's behavioral adjustment.

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Biography:

Dr. Zina T. McGee, Endowed University Professor of Sociology, received the B.A. and M.A. in Sociology from the University of New Orleans, and the Ph.D. in Sociology from Tulane University. She engages in community-based participatory research, with specialization in juvenile delinquency and adjustment outcomes, violent victimization among minority youth, and patterns of coping among abused female offenders. She is the recipient of grants from the National Institute of Mental Health (NIMH), which examines patterns of coping, victimization and offending among minority youth and Hampton University to investigate patterns of drug addiction among minority women in prison.

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Dr Anas Malik Radif Alubaidi

Public health medicine practice advocate, Iraq

The Impact of the International Conflicts on the Global Health Security

Health Security includes many aspects of healthcare services in which it is a goal that Public Health would aim to achieve. Health Security might include easy access into the healthcare systems into all the services including preventative, diagnostic, therapeutic, awareness, and health literacy whether nationwide or globally. Aiming for Health Security internationally is Global Health Security. However, Global Health Security could be impacted negatively by any kind of conflicts. Per Professor Christopher J.L. Murray, Institute for Health Metrics and Evaluation “Conflicts is a major contributor to ill health worldwide, both from the direct physical impacts of war and cascading effects on health systems”. Therefore “We must make the avoidance of conflict a top priority for health” to achieve and then to maintain Global Health Security.

Global Health Security is defined by the CDC (Centers for Disease Control and Prevention) as “the existence of strong and resilient public health systems that can prevent, detect, and respond to infectious disease threats, wherever they occur in the world”.

The political and the armed conflicts have been proven to be related to each other and such conflicts have been significantly and negatively impacted on the healthcare system where the conflicts are. Conflicts between countries and civil local wars affected dramatically on the healthcare systems nationally and internationally due to damaging the healthcare infrastructure examples of countries like Iraq, Syria, and other areas of conflicts having declined and reduced quality in healthcare services due to damaged infrastructures including the healthcare systems. Therefore, such topic needs to be addressed and then to be considered seriously by the international community.

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Biography:

A general practitioner licensed in Iraq and registered at the Iraqi medical association. Graduated within MBChB from Baghdad University and obtained more higher medical degrees from British Universities. Pain management board certified from the American academy of Procedural Medicine. A Fellow of the Royal Society for Public Health. Have a variable medical experience and expanded medical knowledge. Worked in different medical fields including patient care setting, healthcare management, and medical research. Passionate and interested in preventive healthcare, in primary healthcare, in public health medicine practice, in healthcare quality improvements, and in medical data management.

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Margaret Beaver

Author at Margaret Beaver Books, USA

Stories of Our Youth: Adolescent Mental Illness and What We Should Be Doing About It

In 1983, the relatively undeveloped town of Plano, Texas earned the title of “Suicide City” after a sudden cluster of sixteen adolescent suicide attempts plagued the north of Dallas. Twenty-two years later, award-winning author and mental health activist Margaret Beaver was born, and today she embarks on a grueling exploration of the burgeoning mental health crisis afflicting American and global adolescents, with a particular emphasis on drawing from a rich tapestry of direct accounts and personal narratives. This presentation encompasses the foundations of empirical research, historical and statistical assessments, and literature reviews, striving to scrutinize the multifaceted nature of mental illness in youth by dissecting the tiers of social misunderstanding that often exacerbate the stigma and isolation experienced by young sufferers. Central to this discourse is the critical examination of parental relationships, delineating their profound impact on the mental health trajectory of adolescents and equipping families with an open dialogue that reverberates across all demographics, catalyzing change and fostering hope for afflicted adolescents and their loved ones. “Stories of Our Youth: Adolescent Mental Illness and What We Should Be Doing About It” ardently argues for a robust preventative agenda, emphasizing the necessity of early detection, empathetic communication, and proactive mental health education.

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Biography:

MARGARET BEAVER is an eighteen-year-old college freshman, mental health and LGBTQ+ equality activist, and award-winning poet and novelist. She has been honored as a two-time consecutive Topical Winner of Live Poets Society of New Jersey publications, a recipient of the Readers' Favorite Five-Star cover seal, and decorated with the Donna Lynn Quille Award for Best Advocacy Prose. She writes nonfiction poetry collections and novels spanning all subgenres of fiction detailing the integral topics of inclusivity and prejudice, abusive authority, estranged parents and children, the detriments of mental illness, and the triumph of family. She is the author of INKWELLS. (Pegasus Publishers, 2022); FLOWERS FOR PAPA (Pegasus Publishers, 2024); and SEASONS: AUGUST'S COLLECTION (Pegasus Publishers, 2024). As a representative and ambassador for Focus on Women Magazine, she harbors close affiliations with local news channels and is the founder of Margaret Beaver Books, a grassroots organization aspiring to collaborate with mental health and literary initiatives in aiding the accessibility of treatment, education, and the arts. Margaret proudly upholds certifications from The Warren Alpert Medical School of Brown University and Stanford Health Care concerning equality in medicine. She can be visited at www.margaretbeaverbooks.com.

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Efstathios Koutsostathis

Medical Consultant at SOTIRIA HOSPITAL, Greece

E-CIGARETTE HEALTH RISKS

The multiple correlations between smoking and diseases that relate to the entire range of internal medicine have been known for decades. Various alternatives have been proposed, including nicotine patches and gum, and bupropion pills. Other alternatives used are acupuncture and sleep therapy.

References to the electronic cigarette or e-cigarette date back to 2004, when Hon Lik first developed it in China. It is atomiser that looks like a conventional cigarette, but differs in that it contains a mixture of glycerol, propylene glycol, fragrances and possibly nicotine in quantities of 1.6-1.9 mg/device. It is generally believed that it is a form of smoking that is safer than the conventional one. Even though there has been a limited number of experimental and epidemiological studies conducted and the results in some cases are contradictory, it seems that this view is not far from the truth given that, to date, the adverse events of e-cigarettes are significantly fewer than those of conventional cigarettes.

However, the potential health risks reported include airway irritation, cardiovascular burden and fatty liver infiltration. In addition, strict specifications are not always followed during the manufacturing of e-cigarettes. As a result, apart from very small quantities of nicotine, they also contain carcinogens and metals that could theoretically impact one's health.

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Biography:

Efstathios Koutsostathis is Medical Consultant at Sotiria hospital for Thoracic diseases ICU. He graduated from the Athens medical school in Greece and he has a Master degree in Public health. He is candidate PhD at the university of West Attica. He has many presentations in medical conferences and he has published medical articles in reputed journals.

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Dr. Rachna Valvani

North Alabama Medical Center, USA

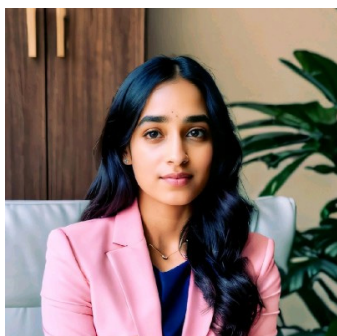
Frailty and Its Impact In Older Adults - A Global Geriatric Health Problem

The Global aging demographic landscape highlights a concomitant rise in chronic conditions and infectious diseases. Older adults face a heightened susceptibility to infections, particularly pneumonia and urinary tract infections and chronic comorbidities such as cancer, cardiovascular disease and dementia. Frailty defined by a set of phenotypic criteria emerges as a crucial predictor of adverse outcomes and infections, affecting hospitalization and post care interventions. Various frailty indices demonstrate their utility in predicting complication, long-term outcomes and mortality. Cardiovascular diseases including acute coronary syndrome and myocardial infarction's exhibit varied associations with frailty influencing both short-term and long-term prognosis. The impact of frailty extends to valvular heart disease and congestive heart failure. Dementia and frailty go hand-in-hand, predict mortality, depression, and reduced activities of daily living emphasizing the need to include frailty in Geriatric assessment and intervention. Future interventions should address the role of frailty and predicting poor prognostic outcomes including readmission rates, overall functional status, and mortality across varied health areas involving Geriatric healthcare.

Biography:

Dr. Valvani is an Internationally known Medical Doctor currently working at North Alabama Medical Center, Florence Alabama as Associate Program Director of their Internal Medicine Residency Program. She completed her medical education from India followed by residency in Internal Medicine and fellowship in Geriatrics from New York. She has additional CMD certification from American Society of Post Acute and Longterm Care Medicine. Her interests are Medical Education, Geriatrics, Cardiovascular Health, Public Health and Quality Improvement. She has received National and International recognition for her work in Medicine particularly Geriatrics.

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Aishwarya Ganapathy

*Delhi Institute of Pharmaceutical Sciences and Research,
India*

Addressing the Emerging Epidemic of Polycystic Ovary Syndrome (PCOS): A Call to Action

Polycystic Ovary Syndrome (PCOS) and Polycystic Ovarian Disease (PCOD) are recognized as significant health concerns, characterized by hormonal disruptions, menstrual irregularities, and ovarian cyst formation. This abstract explores the evolving epidemiological landscape of PCOS, highlighting its emergence as a growing epidemic with an estimated 1.55 million incident cases worldwide. The rising prevalence of PCOS and PCOD poses a considerable challenge, particularly impacting individuals of reproductive age and their overall well-being.

This abstract delves into the multifaceted nature of PCOS, emphasizing its broad-ranging consequences on women's health, with a focus on mental health and associated comorbidities. A recent study conducted in the United States revealed compelling insights, indicating that women diagnosed with PCOS exhibit a 77% higher likelihood of experiencing anxiety, a 53% higher likelihood of developing eating disorders, and more than double the risk of depression compared to their counterparts without PCOS.

As an epidemic, PCOS demands urgent attention from healthcare stakeholders, necessitating comprehensive research, public health initiatives, and innovative interventions to address its multifactorial etiology and mitigate its widespread impact on women's health worldwide.

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Biography:

Aishwarya, a Competitive Intelligence Associate Consultant in healthcare, specializes in clinical research and pharmacovigilance, aiming to empower women through accessible healthcare solutions. Passionate about advancing women's health, she is dedicated to making informed decisions in the dynamic healthcare landscape. Aishwarya's commitment to positive change, particularly in contraception and women's health, is evident in her eagerness to contribute expertise to initiatives. At the conference, she seeks to engage with professionals, share insights, and collectively contribute to the broader advancement of women's health, bringing a wealth of knowledge and fervent dedication.

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Sonia Mairos Ferreira

UNICEF Lesotho Country Office, Lesotho

Strengthening Child Health Initiatives: A Meta-Analysis of UNICEF Lesotho's Evaluations (2019-2023)

This meta-analysis provides a comprehensive examination of UNICEF Lesotho's health-related interventions over the 2019-2023 program cycle, scrutinized through the lens of the OECD Development Assistance Committee (DAC) criteria: relevance, effectiveness, efficiency, impact, and sustainability. It assesses the extent to which health programs have met the evolving needs of children and communities, the effectiveness of health strategies in improving child health outcomes, the efficiency of resource utilization, and the enduring benefits of health initiatives. The analysis dissects the linkages between health objectives and the stakeholders' needs, emphasizing the criticality of health interventions that prioritize children's well-being and, simultaneously, consider and act upon children own voices and priorities. Key findings highlight the significance of community-driven health strategies, the imperative for precise and inclusive health services, and the crucial need to ensure that children's voices are heard, with programs shaped to reflect and incorporate their perspectives. It highlights how partnerships and capacity building are indispensable for sustainable health impacts. Moreover, the adaptability of health programs in response to emergencies, like the COVID-19 pandemic, emerges as a fundamental trait for ongoing relevance and efficacy. This retrospective analysis not only evaluates past performances but also sets the stage for methodological refinements, endorsing a stronger emphasis on child-centered health priorities within the OECD evaluation framework for future cycles.

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Biography:

Currently serving as a PME (Research Specialist) at UNICEF Lesotho, Sonia brings over 20 years of experience as an accomplished Assistant Professor and researcher. Her expertise lies in assisting vulnerable populations affected by crises, disasters, and conflicts. Sonia has a strong background in capacity building, training, and applying anthropology to humanitarian contexts. With a PhD in Permanent Education and Adult Training, complemented by degrees in Educational and Psychological Sciences, Sonia has also pursued postgraduate studies in crucial areas such as Gender Equality, Human Rights, and Crisis Intervention.

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Dror Malka

Holon Institute of Technology - HIT, Israel

A System for Identifying Discrepancies between PET-CT Scans Pre- and Post-Treatment

Oncological imaging has experienced significant and rapid advancements from the 20th century into the 21st century. Over the past few decades, a combination of imaging modalities, including CT and PET, has emerged as pivotal tools in oncology. Currently, 18F-fluorodeoxyglucose (FDG) PET/CT stands out as a cornerstone for evaluating cancer patients. CT primarily serves for anatomical assessment, utilizing X-ray beams, with tissue density evaluation being one of its key functions, quantified in Hounsfield Units (HU). PET, as a diagnostic method in oncology, involves the administration of radioactive material, commonly FDG, which accumulates in metabolically active tissues. This accumulation of FDG aids in distinguishing between cancerous and normal cells, given the typically higher metabolic activity of cancer cells. The degree of this accumulation is measured in Standardized Uptake Value (SUV) units. PET-CT has become a widely used and effective tool for the evaluation, post-therapy monitoring, and follow-up of oncology patients. The resulting images amalgamate CT scans, providing density information (HU), and PET scans, revealing metabolic activity levels (SUVmax) in specific regions of interest (ROI). Our objective is to introduce a fully automated system tailored for radiologists, facilitating instantaneous analysis of size, HU levels, and SUVmax changes, thereby potentially enhancing diagnostic speed and accuracy.

Biography:

Dror Malka received his BSc and MSc degrees in electrical engineering from the Holon Institute of Technology (HIT) in 2008 and 2010, respectively, Israel. He has also completed a BSc degree in Applied Mathematics at HIT in 2008, Israel. Currently, he is a Senior Lecturer in the Faculty of Engineering at HiT. His major fields of research are nanophotonics, super-resolution, AI silicon photonics and fiber optics. He has published around 60 refereed journal papers, and 60 conference proceedings papers.

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Human Tuberculosis which is caused by *Mycobacterium tuberculosis* and Bovine Tuberculosis a Zoonotic Disease caused by *Mycobacterium bovis*: A Dual Challenge of Public Health and a need of Urgent Action of Eradication of these Tuberculosis in Ethiopia-Africa

I Brief Introduction to Human Tuberculosis which is caused by *Mycobacterium tuberculosis*: Human tuberculosis, caused by the bacterium *Mycobacterium tuberculosis*, is a contagious infectious disease primarily affecting the lungs. It spreads through the air when an infected person coughs or sneezes, releasing tiny droplets containing the bacteria. When inhaled by others, these droplets can lead to infection. Tuberculosis can exist in two states: latent infection and active disease. In latent infection, the bacteria remain dormant within the body, causing no symptoms and posing no immediate health threat. However, the bacteria can become active, causing tuberculosis disease, especially if the immune system weakens. Active tuberculosis presents symptoms such as persistent cough, chest pain, fever, fatigue, weight loss, and night sweats. Treatment typically involves a combination of antibiotics taken over several months to ensure complete eradication of the bacteria. Prevention efforts focus on early detection, treatment of active cases, vaccination, and infection control measures to reduce transmission. Transmission way of Human Tuberculosis which is caused by *Mycobacterium tuberculosis*: Human tuberculosis, caused by *Mycobacterium tuberculosis*, is primarily transmitted through the air. When an infected person coughs, sneezes, or talks, they release tiny droplets containing the bacteria into the air. These droplets can be inhaled by others nearby, leading to infection. Close and prolonged contact with an infected individual is usually required for transmission to occur. Factors such as the duration of exposure, the infectiousness of the person with tuberculosis, and the ventilation of the environment can influence the likelihood of transmission. It's important to note that tuberculosis is not as easily transmitted as some other infectious diseases like the common cold or flu. Nonetheless, it is

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still highly contagious, especially in crowded or poorly ventilated environments. Preventive measures such as vaccination, early detection, prompt treatment of active cases, and infection control practices in healthcare settings and communities are crucial for reducing the spread of tuberculosis. Immunology of Human Tuberculosis which is caused by *Mycobacterium tuberculosis*: The immunology of human tuberculosis, caused by *Mycobacterium tuberculosis*, involves a complex interplay between the bacterium and the host immune system. When *M. tuberculosis* enters the body, it encounters various immune cells and mechanisms that attempt to control and eliminate the infection. However, *M. tuberculosis* has evolved strategies to evade host immunity and establish persistent infection in some individuals.

Biography:

Immunologist, Certified Drug Safety Officer for Pharmacovigilance, Clinical Trials Specialist, Monitoring and Medical Writing as well as ICH/GCP. Former Scientific worker and Medical Advisor at Seramun Diagnostica Biotechnology Company in the Department of Research and Development as a Research & Development Scientist as well as Medical Advisor in the field of Immunoassay, Immunodiagnostic, Autoantibody and Autoimmune Diseases. Completed PhD from Charité'-University of Medicine Berlin, Center for Internal Medicine and Dermatology, Internal Medicine Dept. of Rheumatology and Clinical Immunology; German Rheumatology Research Center Berlin; Institute for Immunology, Center for Infection Medicine of Freie University Berlin. Ambassador of Brain City Berlin for Science and Technology. Delegate of Gonder University for international networking with German universities and academic institutions. Ambassador of Tedda Health Science College in Tedda-Gonder Ethiopia. Diaspora Expert for Developing Countries in relation to Health, Education, Research, Capacity Building and Consultation. Co-advisor and lecturer for Master and PhD students & lecturer of undergraduate students in different Ethiopian Universities at Medical Colleges and Faculties. Board Member of Ethiopian Institute of Textile and Fashion Technology EiTEX & Biorefinery Research Center (BRRC of EiTEX) in Bahir Dar University-Ethiopia, Board Member & Founder and General Secretary of Internationale Verein für Gesundheitsförderung in Äthiopien (IVGFÄ) at Germany. Vice-President of Bridge Ethiopia Network for Science and Technology (BE-NeST) in Germany. Auditor of German Society for Lupus Research Society/ Deutsche Gesellschaft für Lupus Forschung (DGLF) e.V. in Berlin-Germany. Currently, actively focusing on Global Public Health, Global One Health, International Health Protection against Infection Diseases and Capacity Building in developing Countries.

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