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Abstracts



8th Edition of International Conference & Exhibition on
**PAIN MANAGEMENT, PHYSIOTHERAPY &
SPORTS MEDICINE**

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9th Edition of International Conference on
INTERNAL MEDICINE & PATIENT CARE

March 18-19, 2020 | London, UK

The risk of new-onset atrial fibrillation associated with sedative hypnotics

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Background: Recently, there are increasing mortality of cardiovascular diseases (CVD) in Taiwan. Atrial fibrillation (AF) is a major risk factor of ischemic stroke. Previous studies focused on the abuse of hypnotics and its use in the elderly. No cohort studies were conducted to investigate the relationship between hypnotic use and CVD risk, especially for AF in Taiwan.

Aim: We aimed to examine the association between hypnotics use and new atrial fibrillation (NAF) in Taiwan.

Methods: A retrospective cohort study was performed based on the National Health Insurance Research Database in Taiwan between January 2004 and December 2013. Patients who had used 20 hypnotics (users) were screened from January 2004 to December 2013. They were excluded if the users with AF in January 2002 to December 2003. Age and gender are matched between user and non-user cohorts at baseline. The follow-up duration is from 2004 to 2013. The endpoint is NAF based on the diagnosis of ICD-9 CM (code 427.31) records. The differences in age, gender, demographic and clinical factors between user cohort and non-user cohort are

compared using the Independent t-test or Chi-squared test. Cox proportional hazard regression models were used by SAS version 9.4 to explore the relationship between use of hypnotics and NAF. The pre-specified covariates include age, gender, comorbidities, and other unbalanced variables at baseline.

Results: The preliminary results showed that majority use of hypnotics greater than 180 days is 44,139 in Taiwan. After propensity score matching by sex and age, the study groups were 42,817 independently. The use of hypnotics greater than 180 days may then cause increasing incident of atrial fibrillation. (HR=1.22; 95% CI, 1.09-1.37).

Biography

Che-Wei Lin is a postgraduate student in Master Program of Pharmaceutical Manufacture in China Medical University, Taiwan. Recent research topics mainly focusing on the risk of new-onset atrial fibrillation associated with sedative hypnotics.

The association of hypnotics use and the risk of new-onset stroke in Taiwan: A population-based cohort study

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Background: The prevalence of insomnia in Taiwan is 11.3%, and the number of people using sedative hypnotics in 2018 has exceeded 4 million. Therefore, it is important whether hypnotics are associated with other diseases.

Aim: Cerebrovascular disease has been ranked among the top 10 causes of death in Taiwan for many years, but the association of hypnotics use and the risk of new-onset stroke is still unclear now. The aim of this study is to evaluate it.

Methods: The retrospective cohort study based on data from the National Health Insurance Research Database (NHIRD), and we included all patients aged 40 to 90 in 2004. After a series of exclusions, the remaining 122,488 people as the study group and followed up to December 31, 2013. The 1:1 propensity score method was used to match by age, sex and we measure the effect of hypnotics by Cox proportional hazards regression and Kaplan-Meier survival curves to compare with different kinds of hypnotics and strokes.

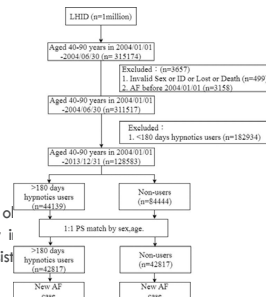
Results: Patients in the hypnotics group would significantly increase the risk of stroke (HR=1.64; 95% CI, 1.56-1.72). If classified by drug types, both BZD (HR=1.60; 95% CI, 1.50-1.71) and Z-Drug (HR =1.45; 95% CI, 1.29-1.63) were also increase risk; In addition, long-term use of hypnotic increase the risk of ischemic stroke (HR=1.63; 95% CI, 1.54-

1.73). However, we did not found a significantly increase risk between hypnotics and hemorrhagic stroke (HR=1.07; 95% CI, 0.80-1.45).

Conclusion: We found that long-term use of hypnotics increases the risk of stroke, especially ischemic stroke.

Biography

Chen-Feng Ho has of Medical University in pharmacy and assist students.



Pharmacy at China analysis of clinical knowledge of college

The effectiveness of deep dry needling treatment of active myofascial trigger point 2 in the upper trapezius muscle: A pilot study

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¹University of Salamanca, Spain

²FREMAP, Spain

Introduction: Myofascial pain syndrome is a painful pathology which affects muscles and which has relation with myofascial trigger points. This kind of points often produces muscle pain.

Objective: To prove the effectiveness of deep dry needling in myofascial trigger points at myofascial trigger point 2 in the upper trapezius muscle.

Methodology: This study was designed as one group trial with 17 students (males and females) belonging to the University of Alcala. All the participants received 2 sessions of deep dry needling treatment in active myofascial trigger point 2 in the upper trapezius muscle. The outcome measures before and after the treatment were: pain intensity felt by the patient and range of motion measured with the analogue visual scale and a goniometer respectively. Friedman and Wilcoxon test have been used to see differences between initial and final outcomes.

Results: We have obtained a reduction of subjective pain and an increase of range of motion in all the cervical spine movements.

Conclusion: Although the results were positive, more randomized and clinical trials are needed, with a control group to be able to reproduce this result and to prove the effectiveness of deep dry needling.

Biography

Inés Llamas-Ramos completed her PhD at the age of 26 from The University of Salamanca, Salamanca, Spain. Currently she is working in the University of Salamanca as a professor in the Department of Nursing and Physiotherapy and in Primary Care Research Unit of Salamanca (APISAL). She has published several articles about cancer and dry needling in reputed international journals and has been serving as an editorial board member of various medical journals.

E coli meningitis, An unusual initial presentation of colorectal carcinoma

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Singhealth, Singapore

A 74 years old Chinese elderly male, presented to Emergency department for acute confusion associated with fever and neck stiffness following a fall at home. He is an otherwise well community dwelling elderly, except his hyperlipidaemia on diet control, he has no other significant medical history. On examination, his temperature was 38.1 °C, Glasgow coma scale was E4V4M5, he was hypertonic bilaterally, no unilateral weakness or numbness noted. Also noted fresh blood bleeding per rectal, presumably from piles initially. Otherwise systemic review was unremarkable. MRI brain showed edema of the right temporal lobe with associated adjacent dural enhancement suggestive of right temporal lobe cerebritis with meningitis. Peripheral blood culture was negative. Lumbar puncture was performed and cerebrospinal fluid (CSF) confirmed meningitis with raised white cells. CSF culture grew *Escherichia coli* sensitive to ceftriaxone. Also molecular testing was done via Biofire Film Array and it was positive for *Escherichia coli* K1 strain. Subsequent Computed tomography of thorax, abdomen and pelvis showed rectal wall thickening with extraluminal pocket of gas with low density fluid at left

pararectal region. Flexible sigmoidoscopy was performed later and confirmed near circumferential rectal tumour. Biopsy confirmed invasive adenocarcinoma. He was diagnosed with *Escherichia coli* K1 strain meningoencephalitis due to proctitis from perforated rectal adenocarcinoma. He responded to intravenous ceftriaxone well and underwent surgery for his rectal adenocarcinoma at later date. This case illustrates rare presentation of *E coli* meningitis in adult and also unusual presentation of colorectal carcinoma.

Biography

Choong Tatt Ng has completed his Graduation at the University of Malaya, Malaysia in 2010 and MRCP (UK) in 2016. He is currently a Senior Resident of the Advanced Internal Medicine programme in Singapore (Singhealth).

Risk of diabetes mellitus in patients in using different types of hypnotics: A population-based cohort study

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One tenth of Taiwanese suffer from chronic insomnia according to the research from Taiwan Society of Sleep Medicine in 2019. Research shows that the prevalence of Benzodiazepines drug use increased from 3.0% in 1997 to 3.3% in 2004. In Taiwan, the mortality rate of diabetes mellitus is among the top five causes of death. A study shows that the use of hypnotics is associated with abnormal blood glucose other research indicated sleep quality and quantity are the risk of new onset diabetes mellitus. Therefore, the study aims to investigate the relationship between hypnotics and new-onset diabetes mellitus. The retrospective population-based cohort study was conducted to investigate the relationship between the hypnotic use and new-onset diabetes mellitus from National Health Insurance Research Database (NHIRD). The study used statistical methods Cox proportional hazard model and Kaplan-Meier survival curve. A total of 263,484 people were tracked from 2004 to 2013 between the ages

from 40 to 90 after screening data by exclude criteria. The results of the study found that there were statistically significant difference between the cumulative medication duration ≥ 180 days (HR=1.780; 95% CI, 1.725-1.827), the use of benzodiazepines (HR=1.739; 95% CI, 1.680-1.800) and Z-drug (HR=1.706; 95% CI, 1.585-1.838), related to the new-onset diabetes.

Biography

Jin-Lin Chiu has completed her Master's Program of Pharmaceutical Manufacture from China Medical University in Taiwan. She has expertise in statistical analysis of epidemiology and clinical pharmacology. She is also a teaching assistant and research assistant in Pharmacy department.

Pigtail drained pleural effusion among Omani patients:A preliminary report.

Masoud Kashoub², Jayakrishnan B¹, Saif Al Mubaihsi¹, Rashid Al Sukaiti¹, Usama Al Amri¹, Yasir Al Lawati³, Alkhatib Al Saqri³

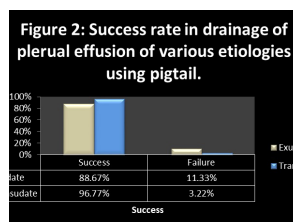
¹Sultan Qaboos University Hospital, Oman

²Oman Medical Speciality Board, Oman

³Medical College and Health Science, Oman

Background: Pleural effusion drainage via a small-bore pigtail catheter is a less invasive method for draining pleural effusions in comparison with chest tube thoracostomy. Therefore, this study aims to evaluate the efficiency, complications and success rate of pleural effusion drainage using pigtail catheter under ultrasound guidance. **Methods:** Retrospectively, we evaluated 141 cases of pleural effusion that underwent ultrasound guided pigtail catheter (8.5–14 French) insertion. Demographic background, clinical background and peri-drainage events were reviewed. SPSS was used for data analysis.

Results: The average pleural fluid draining duration was 4-5 days. Complications included pain (51 cases), catheter blockage (one patient), and pneumothorax (4 cases). Overall success rate was 90.1%. **Conclusion:** Pigtail catheter insertion is an efficient and safe method of draining pleural fluid especially under ultrasound guidance.



Biography Figure 2: Success rate of pigtail drainage in cases of pleural effusion of various etiologies.

Masoud Kashoub has completed MD from College of Medicine and Health Science in Sultan Qaboos University in Sultanate of Oman. Currently first year internal medicine resident in Oman Medical Speciality Board..

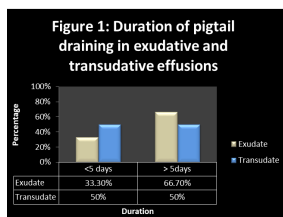


Figure 1: Duration of pigtail drainage in patients with both exudative and transudative effusion.

Risk of new-onset fracture in patients using different types of sedative hypnotics: A population-based cohort study

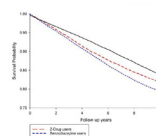
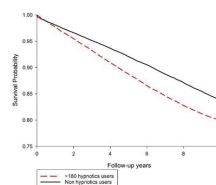
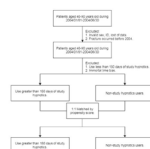
Tsang-Hsiang Chang¹, Hung-Yi Chen^{2, 5}, Gwo-Ping Jong³, Bo Yang⁴ and Ching-Yi Hsu⁵

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Fracture is a burden for elders it causes inconvenience and also people around them. In terms of public interests, fractures often need considerable amount of time to recover, so, it's a burden when it comes to health insurance. In 1993, Taiwan has turned into aging society, and in 2018, aged society. So this burden is only going to add-on. Taking hypnotics is one of the potential hazard for all kinds of fracture. Hypnotics' relationship towards fractures has been discussed in some previous researches, but most of those have limited condition or dedicated theme and most of those were talking about hypnotic's abuse, instead of drug epidemiology. Our study uses National Health Insurance Research Database to perform retrospective cohort study to investigate the incidence rate of Taiwanese aged 40-90 years old and analyze the cause-effect relationship between using hypnotics and the occurrence of new onset fractures. This study aims to screen out insured citizen of Taiwan, aged 40-90 on 2004, who were using 20 types of sedative hypnotics we defined and cumulative hypnotics use before fracture were greater than 180 days, exclude people that have fractures already occurred during 2002-2003 until new onset occurred or end of follow-up time. Also, descriptive statistics were used to discover clinical effects on hypnotics, and methods like Cox proportional hazard regression model, and Kaplan-Meier for analyzing hypnotics and fractures' relationship. Due to high usage hypnotics in Taiwan among elderly, the use of hypnotics greater than 180 days may then cause increasing incident of fracture occurrence.



Biography

Tsang-Hsiang Chang is currently studying Master Program of Pharmaceutical Manufacture at China Medical University, Taiwan. His research topics mainly focus on database mining (e.g. National Health Insurance Database).

The biopsychosocial approach to chronic alcoholic liver disease

Sanjana Phlananthachai

University of Central Lancashire, UK

Objective: This report applies the biopsychosocial model into understanding chronic ALD, the impact it has on health and patient experience.

Biology: Encompassing three stages; hepatic steatosis, alcoholic hepatitis and cirrhosis, chronic ALD is caused by heavy alcohol ingestion for 10-12 years. Gender, obesity, smoking and the PNPLA3 gene are risk factors associated with ALD. Due to its relatively asymptomatic manner, it is unclear as to how many people in England and the Northwest are currently living with this condition. However, hospitalised admissions numbers and mortality rates from 1979-2005 then again in 2014 increased for both Wales and England, measuring incidence.

Psychology: Chronic ALD is linked to depression and anxiety. Due to the scope, stress and repercussions chronic illnesses bring, Quality of life (QoL) diminishes as the duration of illness, is undetermined, limiting functionality and capacity to live well. This report analyses the efficacy of integrative outpatient treatment for chronic ALD.

Sociology: Socioeconomic indicators which include education, income, occupations reveal patterns for alcohol dependency and negative health outcomes as causes behind ALD. Functional impairment, family or financial burden and social stigma are

examples of major disruptive experiences associated with chronic ALD. Depending on the sociological factor, some individuals consider their condition to be a disruption while others, adapt to viewing their illness as a normal aspect of life, coping with it.

Conclusion: For future medical practice and personal growth, this report exemplifies the importance of integrating the biopsychosocial model when assessing patients, as additional or supporting psychosocial interventions may be required.

Biography

Sanjana Phlananthachai is currently completing her third year of medical school at the University of Central Lancashire, UK. Prior to university, she attended and completed her International Baccalaureate program at NIST International School of Thailand. Alongside attending a Biology Honors summer course at Northwestern University, USA, she has spent several summers shadowing and gaining experience from well known ophthalmologists, cardiologists, neurologists and gynecologists in Chicago. Upon graduation, she aims to move back to her home country, Bangkok, Thailand to complete her foundation studies, establish herself within the Thai medical community and contribute to society.

The importance of physiotherapy treatment in a quadricipital tendon after a reconstruction surgery

Ines Llamas-Ramos¹ and Rocio Llamas-Ramos²

¹University of Salamanca, Spain

²FREMAP, Spain

Introduction: Quadricipital tendon lesions are rare and very severe; the importance of this tendon lays in its participation in the knee extensor complex, being essential its continuity in the contraction of the quadriceps for knee extension.

Case: 58-year-old man who suffered a slip and shown impotence flexo-extension function towards the knee. He presented a 3.5 cm quadricipital tendon tear diagnosed by magnetic resonance. A month later he was surgically intervened and after three weeks of immobilization with knee in extension he was referred to the rehabilitation service to start the treatment.

Methodology: Patient who came with a knee splint locked in 30° of flexion and a deficit of 10° of extension. He presented great inflammation of the knee and thigh deformity above the kneecap. No pain was referred and correct gait pattern with the help of two crutches without compensation was observed. We started anti-inflammatory and toning treatment.

Results: In seven sessions, large decrease in knee inflammation, complete extension, 70-80° of free flexion were achieved. After 15 sessions, he had free kneecap movement, active knee flexion of 90° and passive flexion movement of 110°. Scar presented no adhesions and was perfectly hydrated. Isometric

and isotonic muscle work was performed without difficulty. In 20 sessions, the inflammation decreased; he achieved 120° of flexion (130° in the healthy one) and increased his muscle tone, reducing the deformity of the thigh.

Conclusion: Physiotherapy after quadricipital tendon surgery is essential for a correct and quick recovery of knee functionality.

Biography

Ines Llamas-Ramos has completed her PhD at The University of Salamanca, Salamanca, Spain. Currently, she is working in the University of Salamanca as a Professor in the Department of Nursing and Physiotherapy and in Primary Care Research Unit of Salamanca (APISAL). She has published several articles about cancer and dry needling in reputed international journals and has been serving as an Editorial Board Member of various medical journals.

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HIV related progressive multifocal leukoencephalopathy immune reconstitution inflammatory syndrome

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Peterborough City Hospital, UK

Progressive multifocal leukoencephalopathy (PML) is an opportunistic infection affecting immunocompromised patients. It is a rare devastating disease of the CNS caused by the reactivation of JCV in immunocompromised patients. Patients can develop PML during antiretroviral therapy. HIV infection currently accounts for approximately 80% of new PML cases. No drug is effective against JCV. Since the restoration of CD4 and CD8 JCV-specific T cell immune responses, allowing the control of JCV replication, the initiation of combined antiretroviral therapy (cART) in HIV-infected patients remain the only available therapeutic alternative for PML. cART-induced immune recovery improved PML survival in HIV-infected patients. However, immune restoration is not always beneficial. 20% of HIV-infected patients with PML

worsen after cART initiation, due to severe neuroinflammation within settings of immune reconstitution inflammatory syndrome (PML-IRIS). The contribution of IRIS toward the clinical worsening of PML is difficult to distinguish from natural evolution of classical AIDS associated PML. Therapeutic management of PML-IRIS usually relies on steroids. However this may blunt the anti-JCV immune responses that are instrumental in the long-term control of JCV replication. We describe a case with PML in relation to immune reconstitution inflammatory syndrome (PML-IRIS).

D-Asparagine Improves of Lipofilling Efficacy In Treatment of Experimental Dermal Scars

Artem Ivanovich Trofimenko, Sergeeva Yu.A, Kade A.Kh

Kuban State Medical University, Russia

Design of experiment: group 1 (n=20, control) — rats with a dermal scar model, lipofilling was performed on the 42nd day; group 2 (n=20, comparison) — rats with a dermal scar model, 2 injections of 0.9% sodium chloride solution were performed on the 5th and 12th day of the experiment, lipofilling was performed on the 42nd day; group 3 (n=20, experimental) — rats with a dermal scar model, 2 injections of 0.5% aqueous solution of D-asparagine were performed on the 5th and 12th day of the experiment, lipofilling was performed on the 42nd day. When analyzing the results of morphometry of the dermal scar zone on the 105th day, it was revealed that the thickness of the epidermis in group 1 (lipofilling) is 7.8 ± 2.1 μm . In group 2 (0.9% solution NaCl + lipofilling), the epidermis thickness is 9.6 ± 3.2 μm , which is 28.57% more than in group 1 ($p=0.042$). In group 3 (D-asparagine + lipofilling) the epidermis thickness is 5.4 ± 1.6 μm , which is 44.4% less than in group 2 ($p=0.000017$) and 28.57% less than in group 1 ($p=0.0032$). It was revealed

that the thickness of the dermis in group 1 is 143.9 ± 34 μm . In group 2, the thickness of the dermis is 152.4 ± 29.6 μm , which is 6.3% more than in group 1 ($p=0.4$). In group 3 the dermis thickness is 117.1 ± 17.1 μm , which is 23% less than in group 2 ($p=0.000067$) and 5.9% less than in group 1 ($p=0.0038$). The study shows that using of D-asparagine is a promising way to increase the effectiveness of lipofilling for curing of dermal scars.

Biography

Artem Trofimenko has completed his PhD from Kuban State Medical University (Russia). He is the Main Researcher of the department of Common and Clinical Pathophysiology the same organization. He has published more than 10 papers in reputed journals

Failure of partial splenectomy to treat splenic ectopic pregnancy

Ka Geen Cheung

Greenslopes Private Hospital, Australia

Primarily splenic ectopic pregnancies are extremely rare and difficult to diagnose. To our knowledge only 24 published cases exist since 1970. The majority required a total splenectomy for treatment. Two cases were managed conservatively with methotrexate injections, and one was successfully treated with a partial splenectomy only. We present a case of a 31 year old female in which an initial partial splenectomy was unsuccessful in removing the ectopic pregnancy. Due to rising postoperative b-HCG levels, a CT and USS confirmed that the ectopic pregnancy had been left in the remaining spleen. She was taken to theatre again where a total laparoscopic splenectomy was performed. Her

recovery was uneventful. Due to the rarity of splenic ectopic pregnancies, and the difficulty in visualising ectopic tissue on a spleen, particularly in the presence of haemoperitoneum, we recommend that surgeons performing a partial splenectomy should confirm the presence of fetal tissue with a pathology service during the intraoperative period.

Biography

Ka Geen Cheung is a general surgical registrar in Australia. She is currently employed at Greenslopes Private Hospital, and presented on multiple topics in general surgery

The harp; The perception/sensation ratio

Apostol Vaso

University of Medicine Tirana, Albania

The harp. The perception/sensation ratio. The healthy model of biological being is the theoretical perfect status of the matter, with the attribution to create a certain proportion ratio with health, thus creating/forming the eternal being. This ideal proportional ratio is the memory of the model. Consequently as Health is common in all biological beings therefore is virtue, so results constant, unaffected and eternal movement which cannot be changed by any stimulus or factor. Sensation is the attribute of the biological being model to notice the smallest possible theoretical stimulus, within the smallest theoretical unit of time and in the absence of space.

Perception in a model of biological being is the attribution which consists in to the ability of the theoretical tissue mater to reflect health, in the smallest unit of time and in the absence of space. One unit of the proportional ration sensation/perception represents the space time point. The uninterrupted change in continuity of this ratio due to matter movement in time space, is the individual experiencing (amputation of the virtuous).

Relationship between pelvic inclination angle and navicular drop in chronic low back pain patients

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¹Cairo University, ²South Valley University, ³Ain Shams University, ⁴Cairo University.

Background: Chronic low back pain CLBP is a big challenge for all health care team. It was found that patients with LBP had greater anterior pelvic tilt than normal subjects. As well as, there was a strong evidence that altered foot position would affect the pelvic position and might be the cause of LBP, therefore it is needed to know the relation between the pelvic inclination angle and navicular drop in chronic low back pain patients.

Methods: This cross-sectional study included seventy-Five patients with chronic low back pain (LBP more than 3 months) with their mean age, weight, height and BMI were 36.32 ± 10.61 years, 76.4 ± 14.63 kg, 164.94 ± 8.92 cm and 28.11 ± 5.23 kg/m². No previous surgery at spine or lower limb. Pelvic inclination angle was assessed bilaterally from standing position using digital pelvic inclinometer; normal values were said to be from 9-12 degrees of anterior pelvic tilt. The navicular drop difference was measured while the patient was sitting (unloaded) with his feet on the floor in mid position. The navicular tuberosity was marked and the distance from it to the floor was measured using a ruler, then the same distance was measured from standing position (loaded). Then the difference between the two positions was calculated to determine the navicular drop.

Results: The relation between right pelvic inclination and right navicular drop was weak positive non-significant correlations ($r = 0.14$, $p = 0.2$). The relation between left pelvic inclination and left navicular drop was very weak positive non-significant correlations ($r = 0.03$, $p = 0.76$).

Conclusion: There was no relation between chronic low back pain and navicular drop. Key Words: Chronic Low Back Pain, Navicular Drop, Pelvic inclination angle.

Tuberculous Meningitis in immunocompromised patients with Rituximab

Zahid Khan

Southend University Hospital, United Kingdom

Introduction: Tb meningitis is common in developing world and immunocompromised patients. Case Summary. 66 years old patient of Asian background from US admitted with confusion and behavioural changes for the last 10 days. Past medical history included rheumatoid arthritis, diabetes, hypertension and patient was on rituximab for RA. Patient had normal CT head and bloods showed hyponatraemia Na 118, AKI and CRP 7. Results from lumbar puncture showed raised protein and very high lymphocyte count. Patient also had MRI head which showed small vessels disease but no tuberculoma. Patient also had CT thorax, showing tree bud appearance in lungs consistent with bronchiolitis or TB and Ct venogram was normal. Echocardiogram showed good LV function and normal size left ventricle. Mycobacteria tuberculosis were isolated from her sputum culture and patient was initially treated for tuberculous meningitis. During admission patient had worsening of GCS and patient was admitted to ITU where patient developed acute infarct. Patient was treated for acute infarct and Tb and was discharged on anti-tuberculous medications. It was a unique presentation in an immunocompromised patient on Rituximab with sudden deterioration, confusion but no neck stiffness or

typical meningitic features. Patient developed ischaemic, a known complication of tuberculous meningitis secondary to vasculitis. Patient stayed in hospital for about 03 weeks and showed improvement after commencement of anti-tuberculous therapy and was discharged from hospital. Conclusion. This patient was probably not screened for TB prior to commencement of Rituximab and it is important to screen patients for TB prior to commencing immunosuppression.

Biography

Dr Zahid Khan has completed his MRCP from RCP London and has also completed MSc Epidemiology & Biostatistics and MSc Cardiology. He is RCP Associate tutor in Southend Hospital. He is also currently teaching on MSc Diploma course with University of South Wales and is also Advanced life support Instructor with Resus Council UK. He has also been appointed as PLAB 2 examiner recently by the GMC. He has 3 publications and has presented posters in few conferences. He is currently working as Gastroenterology trainee in Southend Hospital and is currently studying MSc in Health and Medical education from University of Hertfordshire

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Exploring the psychosocial impact of living with advanced chronic obstructive pulmonary disease on those attending two different models of palliative care services

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¹University of the West of Scotland, U K

²Scottish Partnership for Palliative Care, U K

The daily life of patients with advanced COPD may incorporate living with a high symptom burden, facing a life which is compromised by reduced physical and social activities and hence reduced QoL. Anxiety and depression are common in COPD but often not recognised or left untreated. To date, there is little evidence about which model is the most suited to reduce anxiety and depression and improve quality of life. Different models of palliative care are available for patients with advanced COPD. This mixed-method study will explore the narratives of patients' experience and investigate the factors influencing patient experience and satisfaction in palliative care that affect patients' quality of life and the psychological burden. The quantitative part is a cross-sectional study, in which the focus is on an objective rate of quality of life and anxiety and depression. The qualitative part uses semi-structured interviews being conducted to explore the

views of patients about their experiences in palliative care from a psychosocial perspective. Patients with advanced COPD, in Scotland, are being recruited from two different models of care; secondary care and hospices. Currently, data collection is in process, and the study will recruit participants until the end of November 2019. This study aims to provide a range of factors that aid patients' access to palliative care services, and on how to manage the system in order to overcome anxieties. In the future, these findings may be implemented in opportunities and good practices in palliative care for patients with advanced COPD.

Motor neuron disease in an 80-year-old male patient

Efstathios Konstantinou Koutsostathis

Kerameikos Health Center, Greece

Introduction: A case of an 80-year-old male patient hospitalized in Intensive Care Unit due to type II respiratory failure is presented. A brief report is made of the disease.

Purpose: The purpose of this report is to present a case with a rare motor neuron disease, to summarize the disease and to refer to its clinical manifestations, complications and treatment.

Materials & Methods: An 80-year-old male patient was treated in an emergency department at a comatose state, labor breathing, ancillary muscle use, and a five day fibrile situation. From his personal report there is a motor neuron disease, for which he was administered riluzole. The diagnosis was made by electromyography four years ago. The patient was intubated due to type II respiratory failure, hypoxemia, hypercapnia, and underwent empirical antimicrobial treatment, followed by an antibiogram, as a pneumonia emerged at the hospital. (Isolation of *Pseudomonas Aeruginosa* in bronchial secretions and microhaemia from *Acinetobacter baumannii*). Gradually, fever stopped, gas exchange and hemodynamic stability improved, and he was given a parenteral nutrition via a nasogastric tube. During his hospitalization, a tracheostomy was performed. Despite his clinical improvement, the patient needed mechanical respiratory support. He left ICU with non-

invasive ventilation (BIPAP).

Results & Conclusions: Motor neuron disease is a condition of unknown etiology. It is a rare disease (Impact: 1/100000 per year). 5% of cases are genetically based (inherited in an autosomal dominant way). The average time from the day of diagnosis till death is 2.5 years. The most common symptom is the discomfort and the weakness of one or more extremities. Other clinical symptoms include symmetrical weakness, extreme weight loss, loss of reflexes, spastic paraplegia, and tongue fasciculation. The diagnosis is made electromyographically, showing a denervation image of the four extremities. The riluzole glutamate antagonist delays the respiratory support and tracheostomy for several months, which eventually become mandatory. The main goal is to maintain a good nutrition and provide supportive care.

Clinical and para-clinical findings vs. PSA-levels of lower urinary tract infections in patients with benign prostate disease

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Introduction: To present one of the complications that patient with prostate diseases suffer from and that is urinary tract infections.

Materials & Methods: Various para-clinical and microbiological tests were used, after performing all the clinical and physical examinations. In the end the findings were compared in a way more qualitatively than quantitatively.

Results: Of 991 men with at least 1 PSA measurement and digital rectal examination (DRE) in the same year, 476 (48.03%) had at least 1 positive result (PSA>4.0ng/mL); of these, 204 (42.85%) were diagnosed with BPH, 33 (6.93%) with prostate cancer and 47 (9.87%) with prostatitis, the rest received therapy for BPH without further examination. Of 237 cases with measured PSA, 112 (47.25%) had LUTS (Lower Urinary Tract Symptoms) i.e. prostatism symptoms including: pain during and after micturition, change of urine color, "not fully able to empty his bladder", which indicated a microscopic urinalysis. 97 patients had positive finding and were forward examine a sample for urine culture. The urine was sterile in 64

patients (65.98%), and 33 (34.02%) patients were positive on the urine sample. After approximately 2-3 weeks (10-17 days) of antibiotic treatment a second urine culture was done, and 29 patients were cured of the infection. 4 patients received one more round of antibiotics and after the third "control" UC, all 4 of them had no trace of bacteria, but 2 patients still had LUTS and had palliative therapy prescribed.

Conclusion: Obstruction of the bladder by itself its situation that contributes to retention of urine and leads to a cystitis. The longer the wait the worse the infection gets and it can spread to the prostate (prostatocystitis), which can be presented with discomfort, pain, and raised PSA levels and eventually if not treated on time leads to chronic prostate inflammation.

Incidence of hyperuricemia among Filipino patients diagnosed with myocardial infarction in a level II private hospital in Davao city

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Background: Cardiovascular disease is a global health problem in that it contributes to 17.9 million deaths per year, resulting to 31% of deaths worldwide. This makes cardiovascular disease a priority medical dilemma. Hyperuricemia is known to increase the risk of having coronary artery disease which can lead to myocardial infarction. Its incidence among such patients have not been extensively studied in the local setting.

Objective: To determine the incidence of hyperuricemia among patients diagnosed with myocardial infarction along with determining their demographic and clinical profile.

Design: A retrospective cohort study was used.

Setting: A level II private hospital in Davao City, Philippines was the setting.

Participants: Adult Filipino patients diagnosed with myocardial infarction based on the Philippine Heart Association guidelines were included.

Results: There is a 47.54% incidence of hyperuricemia among patients diagnosed with myocardial infarction. There was a prevalence of male overweight patients who were >70 years old. The most common risk factors were hypertension and diabetes mellitus.

Conclusion: Hyperuricemia is in fact not uncommon among patients diagnosed with myocardial infarction. Its early detection and control might be essential in preventing the latter, which can be fatal, if not debilitating.

Liver dynamics of HCV infection amongst patients aged 50 years or older visiting a larger tertiary care centre of Hyderabad, Pakistan

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Background & Aims: Usually chronic infection of hepatitis C virus (HCV) is asymptomatic until present as acute hepatitis, acute liver failure or development of cirrhosis with decompensation. New era of Direct-acting antiviral (DAAs) for HCV has evolved the treatment with good result and tolerability. Early diagnosis and treatment can halt the further disease progression.

Method: In this cross sectional study, all the patients with HCV positive either acute or chronic hepatitis infection, cirrhosis with or without decompensation, aged 50 year or above, of either gender, presenting in the outpatient department (OPD) were included.

Results: A total of 281 patients were enrolled during the study period. Mean age of the study population was 56.91 ± 7.21

years (range: 50-90 years) and majority were male (51.6%) and with Child class A 136 (48.4%) followed by child class B 96(34.2%). Majority of patients presented as decompensated cirrhosis and raised transamines 160 (56.9%). Most common complication was variceal bleed 95 (33.8%) followed by ascities 88 (31.3%), pedal edema 24 (8.5%). More than half of the patients were not eligible for treatment. Correlation between age and gender with liver stage and comorbidities was statically significant ($p=0.001$).

Conclusion: Late diagnosis present with complication with least options of treatment. Chronic hepatitis C is curable disease and should be diagnosed as early as possible. There should be screening at younger age.

A case of pyrexia of unknown origin: the rare and underdiagnosed still's disease

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Still's disease is a rare systemic inflammatory disorder that has a bimodal age distribution mostly with those under age 50. It is underdiagnosed and may even lead to life-threatening multiple organ failure. We herein present a Still's disease case that is rarer due to the age of the patient, presence of nasal septum perforation and differential diagnosis of Rheumatoid Arthritis. A fit 62-year-old Caucasian female previously diagnosed with Rheumatoid Arthritis presented with wrist swelling and tenderness, salmon-colored whole-body rash, and fever that started the evening after a crown tooth insertion. She was hospitalized for 28 days with daily-fluctuating fevers that did not respond to broad-spectrum antibiotics. Blood tests revealed leukocytosis, hyperferritinemia, abnormal liver function tests, elevated inflammatory markers, and raised rheumatoid factor. A bone marrow and trephine

biopsy revealed hemophagocytic lymphohistiocytosis. High uptake widespread lymphadenopathy and splenomegaly was found in her PET scan. She was also found to have nasal septum perforation. Prednisolone therapy resolved her fever within hours and also her lymphadenopathy. A diagnosis of Still's disease was made based on exclusion and also using the Yamaguchi criteria. The patient has since had one more flare up with shortness of breath, rash and fever that again resolved with prednisolone. Presently, she is well, not on any medication and is being followed up closely for monitoring.

The investigation of device related Staphylococcus aureus bacteraemia

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Staphylococcus aureus is an opportunistic pathogen which colonises the microbiota and causes a wide range of clinical infections. The reporting of the numbers of patients with Staphylococcus bacteraemias is a mandatory requirement from NHS England. Annually the Heartlands, Good Hope and Solihull sites in Birmingham, UK record 150 cases per year that are deemed to be hospital acquired. The response of the organisation's Infection Prevention and Control team is to investigate each case in order to ascertain the involvement of any medical devices in the development of these bacteraemias. This audit assessed the total number of cases due to medical devices from April 2016 to March 2019 by reviewing the investigation process as benchmarked against the local standard operating procedure. This audit has used the data collected to identify whether the standard

operating procedure was followed and for trend analysis of device type and learning points that can be made. 38 incidences of Device Related Staphylococcus Aureus Bacteraemia were identified over these three years. This audit has yielded valuable learning points for the prevention of device related Staphylococcus Bacteraemias which have been grouped into the five themes of: audit, education, documentation, investigation and Intervention. These themes identify important aspects of patient care which should be promoted to individuals within the medical workforce in order to improve infection prevention and control within hospitals.

Mumps orchitis in an 18-Year-Old male admitted for severe sepsis secondary to community acquired pneumonia

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Mumps is a re-emerging and vaccine-preventable viral illness that classically presents during childhood with fever and parotid gland swelling. However, only 60-70% of mumps infections have been shown to present with the classic parotitis. Other potential manifestations are orchitis, pancreatitis, hearing loss and meningitis. This re-emergence has been attributed to factors such as lower than anticipated vaccine efficacy, vaccine strains not sufficiently covering wild strains, waning neutralizing antibodies and an underestimate of the herd immunity threshold. This report describes a patient who initially presented to his primary

care provider complaining of a cough and low-grade fever but was eventually admitted to the hospital for severe sepsis secondary to community acquired pneumonia. On day three of hospital admission, the patient developed acute left testicle pain and mumps serology was drawn and later confirmed as positive. This case serves to bring increased awareness to this re-emerging viral infection and to how such infections may present.

Neurogenic pulmonary edema following a seizure: a case report and literature review

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Acute pulmonary edema is one of the frequent causes of dyspnea encountered in everyday practice. It is broadly attributed to be either cardiogenic or non-cardiogenic. It is usually treated with diuretics in addition to other medications depending on the underlying pathology. Here, we report a case of a female patient who presented with shortness of breath after developing a seizure. Further investigations excluded cardiogenic etiology and showed critically low

phenytoin level. It improved within 48 hours of supportive care without giving diuretics favoring the diagnosis of neurogenic pulmonary edema as the primary pathology. The goal of our case report is to keep neurogenic pulmonary edema in mind, and hence provide the appropriate management, when dealing with similar cases.

The crucial role of MHC molecules to produce the accomplished viral vaccines

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ATo create protective immunity against viral infections, the body requires a compatible protective antibody to prevent the viral attachment to a target cell. To produce the antibody, the key factor is not just about a viral antigen but also the requirement of the associated molecules so-called major histocompatibility complex (MHC). Each molecule of MHC alleles plays a key role in the immune response by forming a specific complex with its appropriate epitope of an antigen to induce specific T cell clone thru their specific receptor. MHC class I is required for inducing cytotoxic T cell while MHC class II is for helper T cell. Helper T cell plays a

key role to monitor and induce an associated cognate B cell to produce the antibody. Since the MHC gene alleles are highly polymorphic so the possibility that the individuals have the same gene alleles might be one in a million which mostly can be found in those who are an identical twin. This presentation will cover up the crucial role of MHC molecules to produce viral vaccines in the accomplished direction.