

5th World Congress on

DIABETES & CANCER SCIENCE

July 12-13, 2023 | Paris, France



Hosting Organization:

Inovine Meetings LLC, 2C Pecan Hill Drive Clinton Mississippi, 39056
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Day 1

Scientific Program

July 12, 2023 | Meeting Room : London

08:30-09:00 @ **Registration**

09:00-09:30 @ **Opening Ceremony**

Keynote Forum



09:30-10:10

Title : The Enigma of Pediatric Cancer Clusters: New Insights from Cancer Modeling

Ugo Rovigatti, University of Florence Medical School, Florence, Italy



10:10-10:50

Title: The approach of liquid biopsy in diabetes diagnosis

Ekaterini Alexiou Chatzaki, Democritus University of Thrace, Greece

Group Photo & Networking & Refreshment Break 10:50-11:10



11:10-11:40

Title: Stem cell therapy in radiotherapy from bench to Clinical Trial Evaluating the Efficacy of Mesenchymal Stromal Cell Injections for the Treatment of Chronic Pelvic Complications Induced by Radiation Therapy

Alain Chapel, Institute of Radiological Protection and Nuclear Safety, France

Sessions : Diabetes | Prevention and Treatment of Diabetes | Endocrinology | Biomarkers | Diabetologist and Endocrinologist | Diabetes in Healthcare | Advanced Technologies & Treatments for Diabetes | Cancers Biomarkers | Cancer Cell Biology & Genetics | Cancer Pharmacology | Cancers Prevention & Research | Breast Cancer | Cancer Cell Biology & Genetics

Session Chair: Ugo Rovigatti, University of Florence Medical School, Italy

Session Co-chair: Ekaterini Alexiou Chatzaki, Democritus University of Thrace, Greece



11:40-12:10

Title: Drug Discovery: Synthesis of Some Substituted Phthalimide Derivatives as Potent Anti-Diabetic Agents

Shankhapani Mahapatra, Shyam Shah Medical College, India



12:10-13:00

Title: T2DM Patient Experience and Satisfaction in Diabetes Care in Qatar: Patients And Health Care Providers Perspectives

Kholoud Ateeq K M Al-Motawaa, Senior consultant public health, Ministry of Public Health, Qatar

Aiman Hussein Farghaly Ibrahim, Executive director of international administrative consulting office, UAE

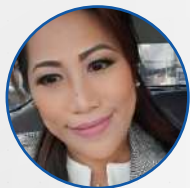
Lunch Break @ Oslo 13:00-14:00



14: 00-14-30

Title: Clinical effectiveness of Empagliflozin+Linagliptin FDC in Indian patients with T2DM - Real world clinical experience

R Santosh, Consultant Endocrinologist, Magna Centres for Obesity, Diabetes and Endocrinology, India



14:30-15:00

Title: STEM Cell therapy on Cancer

Karen Cabiloque, Klinika Karena Aesthetics and Regenerative Clinic, University of San Agustin Philippines



15:00-15:30

Title: Therapeutic Potential of 6-Gingerol in Prevention of Colon Cancer Induced by Azoxymethane through the Modulation of Antioxidant Potential and Inflammation

Abdulaziz Aloliqi, Qassim University, Collage of applied medical sciences, Saudi Arabia



15:30-16:00

Title: What is the effectiveness and risks of using antidiabetic drugs for weight loss in Brazil? A systematic review

Eduarda Telles Diogenes Vasques, Universidade de Fortaleza (UNIFOR), Brazil



16:00-16:30

Title: Sunscreens – Do they protect us?

Felix Pavlotsky, Department of Dermatology, Sheba Medical Center, Israel

Panel Discussion

Awards & Closing Ceremony

Day 2

July 13, 2023

Virtual mode meeting | Time zone in France (GMT+2)



10:00-10:20

Title: Formulation of a Drug using the combination of Cur cumin and Capecitabine against Colon Cancer- A Pilot study

S.Yamini Sudha Lakhmi, University of Madras, Taramani Campus, India



10:20-10:40

Title: p90RSK regulates p53 pathway by MDM2 phosphorylation in thyroid tumors

Valentina De Falco, Institute of Endocrinology and Experimental Oncology (IEOS), National Research Council (CNR) c/o, University of Naples Federico II, Italy



10:40-11:00

Title: A case series study of patients requiring hospitalization secondary to severe hypertriglyceridemia and managed effectively with insulin infusion

Rawan Abukhater, Sheikh Shakhbout Medical City, United Arab Emirates



11:00-11:20

Title: Advancing the Care of Heart Failure and T2DM

Osama Elmaraghi, Consultant of Diabetes, Ministry of Health Kuwait, Kuwait



11:20-11:40

Title: Prevalence of anemia and its associated factors among patients with type 2 diabetes mellitus in a referral diabetic clinic in the north of Iran

Maryam Zahedi, Golestan University of Medical Sciences, Iran



11:40-12:00

Title: Pan-cancer landscape of DLAT and DLST and its association with the efficacy of immunotherapy

Kang Lin, Tongji University, Tongji University School of Medicine, China



12:00-12:20

Title: Identification of EEPD1 as a potential prognostic marker and its association with immune infiltrates in colorectal cancer

Yun Pan, Yangpu Hospital Affiliated to Tongji University, Tongji University School of Medicine, China



12:20-12:40

Title: Endocrinology & Immunology – where do they meet?

Husham Bayazed, Zakho University College of Medicine, Kurdistan Region

Panel Discussion

Awards, Thanks giving & Closing Ceremony



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HYBRID EVENT

KEYNOTE PRESENTATION
DAY 1



Ugo Rovigatti

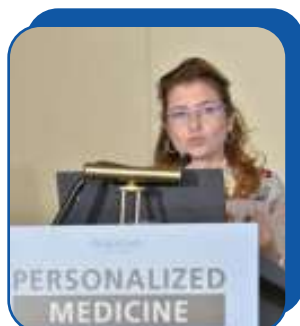
University of Florence Medical School, Florence, Italy

The Enigma of Pediatric Cancer Clusters: New Insights from Cancer Modeling

Although rarer, cancer clusters of paediatric tumors have stimulated research efforts for several decades and still appear enigmatic. Many examples coincided with acute pollution events (i.e. Cancer Alley in Louisiana etc.) or proximity to Nuclear Power Plant Facilities (NPP, i.e. Sellafield/Seascale and Dounreay in UK, Kruemmel in Germany, several other sites in Europe) or sudden/isolated events in smaller communities (i.e., Niles, ILL, Fallon, NE etc.). Great efforts undertaken to elucidate their causality provide at least 3 possible explanations: 1. presence of radiation or chemical contamination, as exemplified by Gardner hypothesis in the case of Sellafield NPP: however, many of these hypotheses assumptions have been falsified; 2. the delayed infection (DI) hypothesis by M. Greaves and 3. the population mixing (PM) hypothesis by L. Kinlen. Both 2-3 hypothesize the presence of an infectious agent as triggering factor for leukemogenesis or pediatric cancer onset, but while DI suggests that any infectious agent (either viral or bacterial or even fungal) could be responsible, PM provides stronger evidence for one specific and persistent agent. Consistent with PM, we have initially isolated a novel RNA virus (Micro-Foci inducing Virus, MFV) from a Cancer Cluster (CC) of pediatric Neuroblastoma. Several features of MFV such as its infection, persistence, stem-cell targeting, carcinogenesis and clastogenic induction of specific genomic aberrations render this cancer model especially suitable for explaining the onset and prolonged time-course of some CC (i.e., Seascale, Kruemmel etc.). In the final discussion, this MFV model will be presented vis-à-vis the current and most debated cancer modeling.

Biography:

Dr. Ugo Rovigatti obtained his Ph.D. in Molecular Biology cum Laude in 1973 and in 1999 the Tenured Professorship. From 1979 to 1990 he worked at ICRF in London, UK; the Fox Chase Institute in Philadelphia; St. Jude Children's Hospital in Memphis, TN; the Ochsner Foundation- Clinic in New Orleans, LA; etc. Between 1997 and 1999 he was a sabbatical professor in Switzerland. His interests in cancer research spanned from work on oncogenic viruses to oncogenes/TSGs, Immunoglobulin Rearrangements in Leukemia and pediatric Neuroblastoma. His PI research work has been funded by grants from UICC, ICRTT, SCL, MIUR, MURST etc.



Ekaterini Alexiou Chatzaki

Democritus University of Thrace, Greece

The approach of liquid biopsy in diabetes diagnosis

The need for minimally invasive biomarkers for the early diagnosis of type 2 diabetes (T2DM) prior to the clinical onset and monitoring of β -pancreatic cell loss is emerging. We exploit the liquid biopsy approach, studying circulating cell-free DNA (ccfDNA) as biomaterial for accurate diagnosis/monitoring of T2DM.

Methods: ccfDNA levels were directly quantified in sera from 96 T2DM patients and 71 healthy individuals via fluorometry, and then fragment DNA size profiling was performed by capillary electrophoresis. Following this, ccfDNA methylation levels of five β -cell-related genes were measured via qPCR. Data were analyzed by automated machine learning to build classifying predictive models.

Results: ccfDNA levels were found to be similar between groups but indicative of apoptosis in T2DM. INS (Insulin), IAPP (Islet Amyloid Polypeptide-Amylin), GCK (Glucokinase), and KCNJ11 (Potassium Inwardly Rectifying Channel Subfamily J member 11) levels differed significantly between groups. AutoML analysis delivered biosignatures including GCK, IAPP and KCNJ11 methylation, with the highest ever reported discriminating performance of T2DM from healthy individuals (AUC 0.927). Lifestyle parameters were also included.

Conclusions: Our data unravel the value of ccfDNA as a minimally invasive biomaterial carrying important clinical information for T2DM. Upon prospective clinical evaluation, the built biosignature can be disruptive for T2DM clinical management and the early detection of the diabetic meso-phenotype.

Biography:

Ekaterini Alexiou Chatzaki is Professor of Pharmacology in the Democritus University of Thrace and Director of the Institute Agri-Health of the Hellenic Mediterranean University Research Centre, Greece. Following academic and industrial post-docs, she leads the team of Molecular Pharmacology since 2002, where she developed her interests in Epigenetic/Pharmacoeigenetic biomarkers. Recently, an important effort has been put into precision pharmacotherapy, using liquid biopsies and epigenetic biomarkers. She has a >30year experience in pharmacology research and a long and recognised publication record. Her research has received funding primarily by the EEC and the Greek Government and the industry.



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HYBRID EVENT

SPEAKER PRESENTATION
DAY 1



Stem cell therapy in radiotherapy from bench to Clinical Trial Evaluating the Efficacy of Mesenchymal Stromal Cell Injections for the Treatment of Chronic Pelvic Complications Induced by Radiation Therapy

A Chapel¹, A Semont¹, C. Linard¹, N. Mathieu¹, C Demarquay¹, C Squiban¹, J Voswinkel², H Rouard³, JJ Lataillade⁵, C. Martinaud⁵, M Benderitter¹, NC Gorin², JM Simon⁴ and M Mothy²

¹Radiological Protection and Human Health Division, Institute of Radiological Protection and Nuclear Safety, Fontenay-aux-Roses, France, ²Department of Hematology, Saint Antoine Hospital APHP and UPMC University, UMRS 938, Paris, France; ³Assistance Publique-Hôpitaux de Paris, EFS Ile de France, Banque des Tissus, Creteil, France. ⁴Department of Radiation Oncology, Pitie-Salpetriere University Hospital, Paris, France; ⁵Blood Transfusion Center of Army, Percy Military Hospital, Clamart, France

Statement of the problem: The late adverse effects of pelvic radiotherapy concern 5 to 10% of patients, which could be life threatening. However, a clear medical consensus concerning the clinical management of such healthy tissue sequelae does not exist. Our group has demonstrated in preclinical animal models that systemic mesenchymal stromal stem cells (MSCs) injection is a promising approach for the medical management of gastrointestinal disorder after irradiation.

Methodology & theoretical orientation: In a phase 1 clinical trial, we have shown that the clinical status of four first patients suffering from severe pelvic side effects (Epinal accident) was improved following MSC injection (figure). Two patients revealed a substantiated clinical response for pain and hemorrhage after MSC therapy. The frequency of painful diarrhea diminished from 6/d to 3/d after the first and 2/d after the 2nd MSC injection in one patient.

Findings: A beginning fistulization process could be stopped in one patient resulting in a stable remission for more than 3 years of follow-up. A modulation of the lymphocyte subsets towards a regulatory pattern and diminution of activated T cells accompanies the clinical response. MSC therapy was effective on pain, diarrhea, hemorrhage, inflammation, fibrosis and limited fistulization. No toxicity was observed. We are now starting a clinical research protocol for patients with post-radiation abdominal and pelvic complications who have not seen their symptoms improve after conventional treatments (NCT02814864, Trial evaluating the efficacy of systemic MSC injections for the treatment of severe and chronic radiotherapy-induced abdomino-pelvic complications refractory to standard therapy (PRISME). It involves the participation of 6 radiotherapy services for the recruitment of 12 patients. They will all be treated and followed up in the hematology department of Saint Antoine Hospital. The cells will be prepared in two production centers (EFS Mondor and CTSA). Treatment is a suspension of allogeneic MSCs. Eligible patients must have a grade greater than 2 for rectoragy or hematuria at inclusion and absence of active cancer. Each patient receives 3 injections of MSCs at 7-day intervals. Patients will be followed up over a 12-month period. The main objective is a decrease of one grade on the LENT SOMA scale for rectorrhagia or hematuria. The secondary objective is to reduce the frequency of diarrhea, analgesic consumption, pain and improved quality of life.

Conclusion: At the end of this period, if the efficacy of the treatment is proven, a phase III trial including a larger number of patients over a longer period will be used to confirm the therapeutic properties of this treatment.

Biography:

For 25 years, he has been developing gene and cell therapy using non-human primates, immune-tolerant mice and rats to protect against the side effects of radiation. He collaborates with clinicians to develop strategies for treatment of patients after radiotherapy overexposures. He has participated in the first establishment of proof of concept of the therapeutic efficacy of Mesenchymal stem cells (MSCs) for the treatment of hematopoietic deficit, radiodermatitis and over dosages of radiotherapy. He has contributed to the first reported correction of deficient hematopoiesis in patients (graft failure and aplastic anemia) thanks to intravenous injection of MSCs restoring the bone marrow microenvironment, mandatory to sustain hematopoiesis after totl body irradiation. He is scientific investigator of Clinical phase II trial evaluating the efficacy of systemic MSC injections for the treatment of severe and chronic radiotherapy-induced abdomino-pelvic complications refractory to standard therapy (NCT02814864Hirsch Index 29)



Drug Discovery: Synthesis of Some Substituted Phthalimide Derivatives as Potent Anti-Diabetic Agents

Shankhapani Mahapatra^{1,2}, Prabhakar Singh¹, Adesh Patidar¹, Balvir Singh¹ & Sanjay Kumar Pandey²

¹Department of Pharmacology, Shyam Shah Medical College, Rewa, Madhya Pradesh, India-486001

²Multi-Disciplinary Research Unit, Shyam Shah Medical College, Rewa, Madhya Pradesh, India-486001

Diabetes is one of the greatest challenges confronting the human beings. In view of the biological importance of phthalimide derivatives though which are reported to have various other pharmacological activities like anti-bacterial, anti-HIV, anti-viral, anti-inflammatory, anti-neoplastic, anti-asthma, anti-arthritis, anti-shock, anti-convulsions, anti-emetic & anti-diabetic activities. This has given an impetus for the research in discovery the actual drug for curing this disease. It can be applicable as more potent anti-diabetic agent compare to present drugs. Looking at the importance of phthalimide derivatives having hypoglycemic activities the research has been undertaken. The present investigation that substituted Phthalimide possesses anti-diabetic principle and can be useful for treatment of diabetes. If the synthesized compounds further evaluated in the terms of clinical trials, and toxicity study in human volunteers these may be produced good Anti-Diabetic agent in human subject. One of the important groups of heterocyclic compound is Phthalimide and its derivatives having diverse biological activities, so our aim is to synthesize various isoindolin-1, 3-dione (Phthalimide) derivatives by four different synthetic procedures to make notable contributions to this class of heterocyclic compounds. Out of 35 synthesized compounds 5 compounds are significant anti-diabetic properties. The area of the synthesis of Phthalimide rings continues to grow, and these will provide more and better methods for the synthesis of this interesting heterocyclic, allowing the discovery of new drug candidates more active, more specific and safer as anti-diabetic agent.

Key words: Phthalimide derivatives, anti-diabetic agents, heterocyclic compounds

Biography:

As per my educational qualification I have completed Bachelor of Science Hons. in Chemistry, B.Pharm & M.Pharm (Pharmaceutical Chemistry) and then PhD in the year 2012 from Jadavpur University, Kolkata, India. I have guided 5 PhD Research Scholars & more than 25 dissertations work of M.Pharm students. I am working as a reviewer for 6 journals. I have more than 20 Research Publications in different National & International journals. I have 22 years of teaching experiences in my academic carrier. Presently I am working as an Associate Professor in the Department of Pharmacology, Shyam Shah Medical College, Rewa, M.P. India.



T2DM Patient Experience and Satisfaction in Diabetes Care in Qatar: Patients And Health Care Providers Perspectives

Dr.Kholoud Ateeq K M Al-Motawaa, Dr.Aiman Hussein Farghaly Ibrahim

Senior consultant public health, Ministry of Public Health, Doha, Qata

Consultant public health, Executive director of international administrative consulting office, Ajman, UAE

Diabetes and its complications are a major cause of morbidity and mortality in Qatar. Management of diabetes can only be effectively done through delivering high-quality multidisciplinary care and effective support system. Assessment of patients' experience with diabetes care helps improve quality of care. This study explored patient experiences of Type 2 diabetes mellitus care delivered by the diabetes care multidisciplinary team in the State of Qatar.

A dynamic mixed method (qualitative-quantitative) study was conducted through face-to-face interviews using an English/Arabic pre-tested semi-structured questionnaire among 53 T2DM patients and 21 healthcare practitioners from different healthcare facilities in Qatar from August 2018 to March 2019.

Informed consent and permission of relevant institutions were obtained. Descriptive statistics and thematic analysis were used in analyzing data. Satisfaction rating was based on 1-5-point scale.

Eighty-one percent of T2DM patients did not suspect that they had diabetes prior to diagnosis; 62% see same physician for their diabetes care; and 42% received diabetes educational materials. T2DM patients had moderate to high satisfaction on most areas of diabetes care received from the healthcare providers in Qatar, however one in six patients expressed dissatisfaction with some aspects of diabetes care including difficulty in making appointments, seeing same physician, information provided regarding diabetes medication's side effects, and amount/type of exercise needed to control diabetes. Future strategies study should target quality improvements for diabetic patients along better access to appointments, enabling continuity of care through Family Physician Model, and committing a periodic patient satisfaction survey for continuous quality improvement.

Biography:

Dr Kholoud Ateeq K M Al-Motawaa is the head of Non-Communicable Diseases in the Ministry of Public Health, Qatar since 2012. She is the official national focal point for communication on statutory and procedural matters (WHO FCTC) and GCC NCD and tobacco cessation committee member. She is highly involved in implementation of health promotion programs including diabetes projects, tobacco cessation, mental and addiction, accidents and trauma, and many public health-related researches in Qatar

Consultant public health, Executive director of international administrative consulting office, Ajman, UAE



Clinical effectiveness of Empagliflozin+Linagliptin FDC in Indian patients with T2DM - Real world clinical experiences

R Santosh

Consultant Endocrinologist, Magna Centres for Obesity, Diabetes and Endocrinology, India

Background: Type 2 diabetes mellitus (T2D) is an expanding global health problem. Individuals with T2D are at high risk for both microvascular and macrovascular complications owing to hyperglycaemia and individual components of the insulin resistance (metabolic) syndrome. There is a need for medications with multitargeted action, where fixed dose combination (FDC) plays a major role in T2D management. Empagliflozin/Linagliptin FDC is one such combination, which has demonstrated its efficacy and safety in adults with T2DM in the phase 3 clinical trials^{1,2}. This study was aimed to assess the clinical effectiveness and safety of Empagliflozin/Linagliptin FDC in a real-world setting

Methods: A multi center, retrospective observational study where we retrieved electronic medical records of T2DM patients who were on Empagliflozin+Linagliptin FDC (25/5mg or 10/5mg) from the year 2019-2022 with lab assessments done for HbA1c, serum Triglycerides, serum HDL at baseline and 6 months. Atherogenic index of plasma and BMI were calculated using standard formulas Log (TG/HDL-C) and body weight (Kg)/height(m²) respectively. Paired t-test was used to determine the mean difference at 6 months from baseline and any p-value <0.05 was considered statistically significant.

Results: Data of 114 patients were scanned and 58 T2D patients were included for analysis. All values are expressed as Mean±SD. Patients mean age was 60 ± 9.88 years. Patients treated with Empagliflozin/Linagliptin FDC for a period of 6 months showed significant reduction in HbA1c (7.8 ± 1.3mg/dL from 10.2± 1.9 mg/dL) with p-value <0.0001, PPBS (176 ± 58mg/dL from 285.4 ± 85.2 mg/dL) with p-value <0.0001, atherogenic index of plasma (0.44 ±0.2 from 0.75 ±0.2) with p-value <0.0001, Triglycerides (135.8 ± 64.6 mg/dl from 264 ± 114.5 mg/dL), HDL (43.2± 12.7 mg/dL from 51.3 ± 14.3 mg/dL), BMI (28.49 ± 3.9 Kg/M² from 26.89 ± 3.66 Kg/M²) with p-value <0.0001. No major adverse events were reported and patients tolerated the drug well.

Conclusion: Treatment with Empagliflozin/Linagliptin FDC was found to be effective and well tolerated in T2D patients in a real-world setting.

References:

1. DeFronzo RA et al. Diabetes Care 2015; 38:384-393.
2. Lewin A et al. Diabetes Care 2015;38:394-402.

Biography:

Dr R Santosh has done his MD in Internal Medicine at JIPMER, Pondicherry and DM Endocrinology in PGI Chandigarh, India. He is presently a consultant Endocrinologist at the Filmnagar Hyderabad Centre of the Magna Centres of Obesity, Diabetes and Endocrinology, and a visiting consultant at Fernandez Hospitals, Hyderabad. He has 46 publications in peer reviewed journals and has presented in more than 900 scientific forums. He has won the Abdul Kalam Award for Excellence in the Field of Endocrinology.



STEM Cell therapy on Cancer

Karen Cabiloque

Klinika Karena Aesthetics and Regenerative Clinic, University of San Agustin Philippines

Cancer—a leading cause of death in all countries and an increasing medical burden worldwide due to aging and population growth. It is mainly treated using invasive treatment such as surgical resection, fractionated radiotherapy and chemotherapy. However, treatment related side effects, off target effects and drug resistance limit the efficacy of such therapeutic options; hence recurrence is extremely likely.

On the other hand, therapies employing stem cells are showing increasing promise in the treatment of cancer. Stem cell can function as novel delivery platforms by homing and targeting both primary and metastatic tumor.

Moreover, stem cells can be applied in regenerative medicine, immunotherapy and drug screening applications. Therefore, this presentation focuses on recent progress toward stem cell-based cancer treatments and aims to summarize treatment advantages and opportunities, and shortcomings and looking forward to potentially refine future trials and facilitate the shift from experimental to clinical studies.

KEYWORDS: Stem Cell, Targeted Cancer Therapy, Regenerative Medicine, Chemotherapy, Surgical Resection, Fractionated Radiotherapy



Therapeutic Potential of 6-Gingerol in Prevention of Colon Cancer Induced by Azoxymethane through the Modulation of Antioxidant Potential and Inflammation

Abdulaziz Aloliqi

Qassim University, Collage of applied medical sciences, Saudi Arabia

A polyphenolic component of ginger, 6-gingerol, is widely reported to possess antioxidant, anti-inflammatory and anticancer activities. In the current study, it was aimed to investigate the anticancer effects of 6-gingerol (6-Gin) on azoxymethane (AOM)-induced colon cancer in rats. The results reveal that 6-Gin treatment significantly improves the antioxidant status disturbed by AOM intoxication. The 6-Gin treatment animal group showed enhanced activity of catalase (CAT) (46.6 ± 6.4 vs. 23.3 ± 4.3 U/mg protein), superoxide dismutase (SOD) (81.3 ± 7.6 vs. 60.4 ± 3.5 U/mg protein) and glutathione-S-transferase (GST) (90.3 ± 9.4 vs. 53.8 ± 10 mU/mg protein) ($p < 0.05$) as compared to the disease control group. Furthermore, the results reveal that AOM significantly enhances the inflammatory response and 6-gingerol potentially attenuates this response, estimated by markers, such as tumor necrosis factor- α (TNF- α) (1346 ± 67 vs. 1023 ± 58 pg/g), C-reactive protein (CRP) (1.12 ± 0.08 vs. 0.92 ± 0.7 ng/mL) and interleukin-6 (IL-6) (945 ± 67 vs. 653 ± 33 pg/g). In addition, the lipid peroxidation estimated in terms of malondialdehyde (MDA) provoked by AOM exposure is significantly reduced by 6-gingerol treatment (167 ± 7.5 vs. 128.3 nmol/g). Furthermore, 6-gingerol significantly maintains the colon tissue architecture disturbed by the AOM treatment. Loss of tumor suppressor protein, phosphatase and tensin homolog (PTEN) expression was noticed in the AOM treated group, whereas in the animals treated with 6-gingerol, the positivity of PTEN expression was high. In conclusion, the current findings advocate the health-promoting effects of 6-gingerol on colon cancer, which might be due to its antioxidant and anti-inflammatory potential.

Biography:

Abdulaziz A Aloliqi is an associate professor at Department of medical biotechnology, collage of applied medical sciences, Qassim university. Dr. Aloliqi has completed his PhD from Kent State University in 2019. He is the vice-dean for development and quality. Dr. Aloliqi has published more than 13 papers in reputed journals in cancer biology and contributed to many conferences. Dr Aloliqi is a member of the American association of cancer research and a member of the Middle East Molecular Biology Sources.



Sunscreens – Do they protect us?

Pavlotsky Felix

Head of the Israeli Dermatology Board Committee, Dermatology Advisor of the Israeli Anti-cancer Society, Sheba Medical Center, Tel Hashomer, Israel

Ultraviolet radiation from the solar origin is the main non genetically based factor related to the development of premalignant and malignant skin tumors. Thus, sun protection in general and sunscreen, in particular are recommended as the principal role of prevention. Most of the modern sunscreens offer an excellent ultraviolet B and at least partial ultraviolet A filtration. Sunscreens definitely prevent an acute damage following sun exposure, but do they fulfill their main role to prevent skin cancer in general and melanoma, in particular?

Biography:

Felix Pavlotsky is a Graduate of Faculty of Medicine, the Hebrew University of Jerusalem, Israel. He completed his residence in oncology and dermatology at Chaim Sheba Medical Center, Tel- Hashomer, Israel. For the last 35 years he is the senior member of the melanoma clinic and the head of Psoriasis and Phototherapy Center. A member of European Organization of Treatment and Research of Cancer (EORTC) - Melanoma and Cutaneous Lymphoma Subgroups alongside being the chief dermatological advisor of the Israel Cancer Association (ICA). During the last ten years Felix Pavlotsky serves as the head of the Israeli dermatology board committee.



What is the effectiveness and risks of using antidiabetic drugs for weight loss in Brazil? A systematic review.

Marco Antonio Martins Barbosa and Eduarda Telles Diogenes Vasques

Universidade de Fortaleza (UNIFOR), Brazil

Introduction: Obesity is a global epidemic and is associated with an increased risk of type 2 diabetes. The use of antidiabetic drugs for weight loss is of interest in the healthcare field, but their benefits and risks are still debated.

Objectives: Evaluate the effectiveness and risks of using antidiabetic drugs for weight loss.

Methodology: We conducted a systematic review using the PICO method. Studies that evaluated the use of antidiabetic drugs in Brazil, considering weight loss as the primary outcome, were selected. A total of 207 articles were obtained from the MedLine and LILACS databases. After applying exclusion criteria, 8 articles were included in the review.

Results and Discussion: The studies demonstrated that antidiabetic drugs, such as GLP-1 receptor agonists, were effective in reducing weight in patients with type 2 diabetes in Brazil. Combinations of antidiabetic drugs, such as metformin with DPP-4 inhibitors or GLP-1 receptor agonists, also showed positive results. However, sulfonylureas, thiazides, or insulin may lead to weight gain or adverse events such as hypoglycemia. The combination of Liraglutide with endoscopic gastroplasty procedures or intragastric balloon may enhance weight loss.

Conclusion: This review highlights the effectiveness of antidiabetic drugs, such as GLP-1 receptor agonists, in reducing weight in patients with type 2 diabetes in Brazil. However, it is necessary to consider the risks associated with the use of sulfonylureas, thiazides, or insulin. This information can contribute to clinical decision-making and the formulation of health policies related to weight loss in Brazil.

Biography:

Medical students currently in the fifth semester of Medicine at the Universidade de Fortaleza (UNIFOR), with several research studies in the field of endocrinology.



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SPEAKER PRESENTATION
DAY 2



Formulation of a Drug using the combination of Curcumin and Capecitabine against Colon Cancer- A Pilot study

S. Yamini Sudha Lakhmi

Dept of Medical Biochemistry, University of Madras, India

Colorectal (also known as bowel) cancer (CRC) is the 3rd most common cancer worldwide. It is the 3rd most common cancer in men and the 2nd most common cancer in women. Risk factors of CRC can be split into two categories: modifiable risk and non-modifiable risk. The modifiable risks includes smoking, westernized food, physical inactivity, chronic diseases, and pharmaceuticals. Smoking is responsible for 8.4% of colorectal cancer diagnoses and deaths in males. Colorectal cancer has been associated to a number of chronic conditions, comprising diabetes, hypertension, and coronary artery disease. Apart from controlling the body mass index (BMI) and other common variables, the risk of developing colorectal cancer is linked to the development of type 2 diabetes, race and ethnicity, sex, inherited mutations, gender, and body height are the non-modifiable risk variables. Differences in race and ethnicity are a major risk factor for CRC. It focuses on the disparities in accessing good health care, balanced diets, and education rather than the hereditary component.

Curcumin: *Curcumin* was found as the most unique polyphenolic rhizome isolated from turmeric. Curcumin is an efficient radical scavenger and its antioxidant activity has previously been proven by blocking the controlled beginning of styrene oxidation. Curcumin's antioxidant activity, which controls DNA damage as well as lipid peroxidation caused by free radicals, is linked to its anticancer properties.

Capecitabine: The oral fluoropyrimidine capecitabine generates fluorouracil preferentially in tumor tissue, by way of a three-step enzymatic cascade. The final stage of conversion to fluorouracil is catalyzed by thymidine phosphorylase, which is appreciably more active in tumor than in healthy tissue. As first-line treatment for metastatic colorectal cancer, capecitabine is an established alternative to the combination of fluorouracil and leucovorin. The Primary objective of the current study is to formulate a drug by the combination of curcumin and Capecitabine for effective treatment of colon cancer, thereby the slow release of Capecitabine blended with curcumin would enhance the dosage efficacy in the treatment of colon cancer. The parameters like stability, PH, Moisture content, BCS Studies, dosage were standardized for the formulation. The insilico comparative study was also performed by docking curcumin against the marker for colon cancer, Capecitabine against the marker for colon cancer and the formulated curcumin+ Capecitabine against the marker for colon cancer. The Formulated drug proved to be more effective in docking compared to that of curcumin and Capecitabine, docked individually.

Key Words: Colon Cancer, Curcumin, Capecitabine, Formulation.

Biography:

Academician with Ph.D, PGDBI, FBSS, FABMS, CRA and 34 years of rich experience in the academic world (Teaching & Research). Working in the department of medical Biochemistry as Assistant Professor, University of Madras from 2014 onwards till date. Current Research is in Food Formulations, Compound Isolation from plant / microbial sources and their applications in anti Cancerous activity. Served as HOD in Department of Biochemistry in colleges affiliated to University of Madras from 2002 onwards as well as established Department of Bioinformatics in Vinayaka Mission University. Published about 25 papers. Served as Head of Basic Medical Sciences in Asmara College of Medical Sciences, Eritrea, North east Africa for three years. Visited various countries like Sri Lanka, Dubai, Abu Dhabi, France, Germany, Australia, Hong Kong and Singapore to deliver key note talks in International Conferences. In India, served as keynote speaker, plenary speaker and Chaired various sessions in national and International conferences in various universities in Kerala, Kolkatta, Goa, Chandigarh, Bangalore, Trichy, and other places. Completed two projects and currently having two projects. Organized First ever International Conference in the department of Medical Biochemistry in 2028. One amongst the whole body donor for the usage of students fraternity. I have been Honoured as the Vice Chancellor of World Tamil University, USA from July 2022 onwards.



p90RSK regulates p53 pathway by MDM2 phosphorylation in thyroid tumors

Valentina De Falco

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p90RSK is a downstream effector protein of the MAPK pathway. In many human cancers, the MAPK pathway is constitutively activated due to oncogenic mutations of its components, so p90RSK is hyperactive and capable of hyper phosphorylating substrates involved in tumorigenesis. p90RSK belongs to the AGC-kinase family, that phosphorylates substrates with RXRXXS/T consensus motif. MDM2 protein presents this consensus in its sequence, at serine 166. We demonstrated that p90RSK binds and phosphorylates MDM2 on serine 166 both in vitro and in vivo; this phosphorylation increases the stability of MDM2 which in turn binds p53, ubiquitinating it and promoting its degradation by proteasome. Pharmacological and genetic inhibition of p90RSK decreases MDM2 phosphorylation and restores p53 function which in turn transcriptionally increase the expression of cell cycle inhibitor p21 and of pro-apoptotic protein Bax and down-regulate the anti-apoptotic protein Bcl-2, causing a block of cell proliferation and promoting apoptosis. Finally, an immuno-histochemistry evaluation of primary thyroid tumors, in which p90RSK is active, confirms MDM2 stabilization mediated by p90RSK phosphorylation. The involvement of p90RSK in regulating the p53 pathway is very important in thyroid tumors in which the MAPK pathway is constitutively active. Thus, although in this study we focused on the regulation of p53 by MDM2, a mechanism already known and described for some time, we introduce a new fundamental node represented by the kinase p90RSK, which makes this mechanism the basis of a possible new therapeutic target for thyroid tumors and many other types of cancer.

Biography:

Valentina De Falco is Researcher at the Institute of Endocrinology and Experimental Oncology of the National Research Council of Italy and Adjunct Professor at the University of Naples "Federico II". She graduated in Chemistry in 2002 and obtained the Specialization in Clinical Pathology in 2007 at the University of Naples "Federico II".

Since 2017 she has been a member of the European Thyroid Association and the European Association for Cancer Research. In 2017 she was awarded the International Prize for studies on the Pathophysiology of the Thyroid from the Accademia Nazionale dei Lincei. She has published more than 30 papers in reputed journals and has been serving IJMS (MDPI) as a topical advisory panel member.



A CASE SERIES STUDY OF PATIENTS REQUIRING HOSPITALIZATION SECONDARY TO SEVERE HYPERTRIGLYCERIDEMIA AND MANAGED EFFECTIVELY WITH INSULIN INFUSION

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Untreated hypertriglyceridemia can lead to complications, including acute pancreatitis of which hypertriglyceridemia is the third most common cause worldwide. Acute pancreatitis is mainly observed with severely elevated triglyceride to a level above 11.3 mmol/L. For management of acute pancreatitis related to hypertriglyceridemia, the literature describes different treatment modalities, including insulin therapy and plasmapheresis. We report a case series of 9 patients confirmed to have severe hypertriglyceridemia requiring hospitalization. The aim of this study was to report the outcome of patients having severe hypertriglyceridemia treated with insulin infusion. Our standard regimen was intravenous insulin at a rate of 0.1U/Kg/hr, adequate hydration, measurement of triglyceride twice daily, hourly check of blood glucose levels as to avoid hypoglycemia and stopping insulin infusion once triglyceride level was below 5.6 mmol/L. The target triglyceride level was achieved between 2-6 days of hospitalization except for 1 patient who required 12 days of insulin therapy. All patients had successful recovery without any complications. Rapid initiation of treatment is vital in these patients to prevent complications, especially in those who are presenting with acute pancreatitis. Insulin infusion is a cost-effective approach and the target triglyceride level below 5.6 mmol/L can be achieved with an average of 5 days duration of therapy. Our case series will help to characterize patients treated for hypertriglyceridemia and hypertriglyceridemia-induced acute pancreatitis with insulin in the Middle East, as many guidelines recommended more aggressive treatment modalities and insulin represent a cost-effective and valid treatment modality.

Biography:

Dr. Mahmoud Ahmed Kiblawi, MD, is an Internal Medicine Specialist at Sheikh Shakhbout Medical City (SSMC) in Abu Dhabi, UAE. He has 9 years of experience since he started training in the field of general internal medicine. His areas of focus include prevention, diagnosis, and the management of acute and chronic complex multisystem diseases. Dr. Kiblawi has published several articles and is continuously involved in new research work. He has an interest in education and is a faculty member for the residency program. Moreover, his focus remains on quality improvement in healthcare, and he is enrolled in several SSMC sub-committees.



Advancing the Care of Heart Failure and T2DM

Osama Elmaraghi

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Heat failure is a clinical syndrome caused by a structural and/or functional cardiac abnormality, resulting in a reduced cardiac output and/or elevated intracardiac pressures at rest or during stress.¹

Heart failure poses a significant global disease burden, more than 60 million patients worldwide have heart failure. Approximately 50% of patients diagnosed with heart failure will die within 5 years²⁻³.

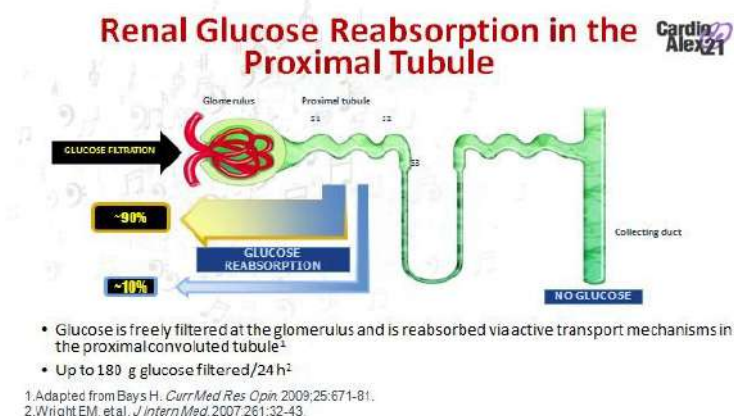
There are 537 million patient with diabetes mellitus all over the world.⁴ People with diabetes have a 2- to 5-fold higher risk of developing HF⁵, On the other hand more than 30% of patients with heart failure also have diabetes.⁶

Patients with heart failure and diabetes have a worse prognosis than those without diabetes⁶.

Accord and advance trials showed that Intensive glycaemic control has not been shown to significantly impact the risk of HF.⁷ Specific glucose- lowering medications have not been shown to improve heart failure outcomes, and some may actually have deleterious effects.⁸⁻¹⁰

Glucose in the blood is freely filtered by the glomerulus and reabsorbed again through proximal convoluted tube., The transport of glucose from the tubule into the tubular epithelial cells is accomplished by sodium-

glucose cotransporters (SGLTs) family, SGLT2 in the proximal segment of the renal proximal tubule is responsible for 90% of glucose reabsorption and SGLT1 in the distal segment of the renal proximal tubule responsible for reabsorption the rest 10% of glucose.¹¹⁻¹³



SGLT2 inhibitor is a new class of drugs to treat diabetes by inhibiting SGT2 decreases glucose reabsorption and increases urinary glucose excretion, improving glucose control in the diabetic patient.

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At 2015 EMPA-REG OUTCOME trial showed that Empagliflozin in addition to reduction of HbA1c,

reduced the 3MAC by 14% , CV death by 38% and HHF by 35%,¹⁵ Then DECLARE-TIMI58 trial showed that Dapagliflozin in addition to reduction of HbA1c, reduce HHF by 17%.¹⁶ So there are three questions to be answered :

1-Are the benefits of SGLT2i similar in patients With and without HF ? (prevention and management of HF)

2-Are the benefits of SGLT2i similar in patients with and without Diabetes?

3-Are the benefits of SGLT2i similar in patients with HFrEF and HFpEF

DAPA-HF assessing Dapagliflozin and EMPEROR-Reduced assessing Empagliflozin in Patients with Chronic HFrEF With or Without T2D showed that both Dapagliflozin and Empagliflozin reduced

hospitalizationHF or death from cardiovascular causes regardless of the presence or absence of diabetes with improvement of the quality

of life .^{17,18} The results of these trials change the guidelines and FDA approved Dapagliflozin and Empagliflozin to be used in patients with HFrEF in diabetic and non-diabetic patients . In 2022 ADA recommended add SGLT2i to metformin irrespective to Hba1c target in patient with HFrEF.²¹

EMPEROR-Preserved results showed that Empagliflozin demonstrated a clinically reduction in the composite primary endpoints of CV death or HHF in diabetic and non-diabetic patients with Heart failure with preserved Ejection Fraction.²⁰ and DELEVER trial showed the same result for Dapagliflozin ,That is why the ADA guidelines in 2023 changed by recommended to start SGLT2i as the first line if patient has Heart failure either reduced or preserved ²²

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Prevalence of anemia and its associated factors among patients with type 2 diabetes mellitus in a referral diabetic clinic in the north of Iran

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Purpose This study intended to investigate the prevalence of anemia and its associated factors among patients with type 2 diabetes mellitus (T2DM) in Gorgan, Iran. This cross-sectional study was conducted on 415 (109 men) patients with T2DM referred to the referral diabetes clinic of Sayad Shirazi Hospital in Gorgan in 2021. Demographic information, anthropometric indices, past medical history, and some laboratory data on cell counts, serum blood glucose, HbA1c, creatinine, lipid/iron profiles, and urinary albumin were collected. The univariable and multivariable logistic regression analysis was applied to compute odds ratios (ORs) and 95% confidence intervals (CI) for potential associated factors, using SPSS version 21. The multivariable Model was adjusted for obesity, Hb A1c, T2DM duration, using glucose lowering drugs (GLDs), chronic kidney disease (CKD), albuminuria, hypertriglyceridemia, and hypercholesterolemia.

Results The prevalence of anemia was 21.5% [95%CI: 17.6-25.7] among our total participants. The corresponding values for men and women were 20.2 (13.1-29.0) and 21.9 (17.4-27.0), respectively. The adjusted model revealed that obesity (OR, 1.94 [95% CI, 1.17–3.23]), T2DM duration for more than five years (OR, 3.12 [1.78–5.47]), albuminuria (OR, 6.37 [3.13–10.91]), chronic kidney disease (OR, 4.30 [2.83–7.29]) and hypertriglyceridemia (OR, 1.72 [1.21–2.77]) were significantly associated with prevalent anemia among patients with T2DM. Moreover, using insulin separately or in combination with oral GLDs associated positively with the prevalence of anemia with ORs of 2.60 [1.42-6.42] and 1.87 [1.30-4.37], respectively.

Conclusion Anemia had a high prevalence among patients with T2DM in the north of Iran (about 22%), which is associated with obesity, hypertriglyceridemia, duration of T2DM, and diabetic kidney disease

Biography:

At the age of 26, I graduated with a doctorate in general medicine from Golestan Medical University. After practicing medicine for a while, I started studying internal medicine and graduated from Mazandaran Medical University at the age of 35. I had several years of therapeutic activity along with academic activity as a university professor. At the age of 43, I graduated as a specialist in endocrinology and metabolism from Shahid Beheshti University of Medicine in Tehran. I still have therapeutic and academic activities. So far, I have done several research projects, from which I have published about 19 articles, a book and a guideline.



Identification of EEPD1 as a potential prognostic marker and its association with immune infiltrates in colorectal cancer

Yun Pan

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Endonuclease-exonuclease-phosphatase family domain-containing 1 (EEPD1) is a protein that plays a critical role in repairing stalled replication forks during DNA synthesis. Dysregulation of EEPD1 has been linked to the development of several cancers, including colon adenocarcinoma (COAD), a leading cause of cancer-related deaths worldwide. To investigate the potential involvement of EEPD1 in COAD, we conducted a comprehensive bioinformatics analysis and validated our findings using clinical samples. Our results indicate that EEPD1 is significantly overexpressed in COAD and is associated with poor prognosis. Furthermore, we observed a negative correlation between EEPD1 expression and microsatellite instability (MSI) and tumor mutational burden (TMB), suggesting a potential association with immune therapy response.

Genes associated with EEPD1 were mainly involved in the negative regulation of the immune response, suggesting a potential role of EEPD1 in modulating immune cell infiltration, chemokines, immune-inhibitors, and immune-stimulators in COAD. Our findings provide a novel candidate gene to further explore the potential mechanisms underlying COAD and improve treatment strategies. Although our study has several limitations, including the relatively small sample size and potential biases in the bioinformatics analysis, our results suggest that EEPD1 may serve as a promising prognostic biomarker and therapeutic target in COAD. Further research is needed to validate our findings and elucidate the molecular mechanisms underlying the observed associations.

Biography:

Yun Pan is currently pursuing her PhD degree in Tongji University School of Medicine. She is a licensed surgeon and has been dedicated to clinical and mechanism researches on colorectal cancer. Her work has been published in in reputed journals, highlighting her expertise and contributions to the field.



Pan-cancer landscape of DLAT and DLST and its association with the efficacy of immunotherapy

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Copper is a vital mineral involved in numerous physiological metabolic processes. DLAT and DLST are key genes that play a role in copper-induced cell death. However, the prognostic significance and immunological role of DLAT and DLST in pan-cancer remain unclear. This study aims to investigate the association of DLAT and DLST with tumor prognosis, TMB, MSI, and immune cell infiltration in pan-cancer. We evaluated DLAT and DLST expression levels across different cancer using the Sangerbox and TCGA databases. Subsequently, we assessed the potential of DLAT and DLST as prognostic biomarkers in pan-cancer. Mutations were analyzed using the cBioPortal database, and their functional implications were explored using the CancerSEA databases. The impact of DLAT and DLST on immune infiltration was investigated using the TIMER2, and TISIDB websites. In most cancers, DLAT was upregulated, indicating a poorer prognosis, while DLST was downregulated, also associated with a poorer prognosis. There was a significant positive correlation between mRNA expression and protein levels of DLAT and DLST. In most tumors, DLAT and DLST demonstrated a significant positive correlation with CD4 memory resting T cells, as well as various immune cell types. DLAT and DLST also exhibited significant associations with MSI or TMB in multiple tumors. Single-cell sequencing analysis revealed the involvement of DLAT and DLST in functions such as angiogenesis, differentiation, DNA damage, and DNA repair. DLAT and DLST may serve as potential biomarkers and oncogenes in pan-cancer. Furthermore, their involvement in immune cell infiltration suggests their potential as targets for immunotherapy in tumor treatment.

Biography:

Kang Lin obtained his Master's degree in Medicine from Nanchang University Medical College at the age of 27. He subsequently pursued a doctoral degree in Medicine at Tongji University Medical College. To date, he has published 17 papers in renowned journals and serves as a reviewer for multiple journals. He has conducted in-depth research in areas such as the diagnosis and treatment of colorectal cancer.



Endocrinology & Immunology – where do they meet?

Husham Bayazed

Zakho University College of Medicine, Kurdistan Region

The relationship between endocrine glands and the immune system seems to be intertwined and most endocrine glands are prone to autoimmune disease. Of note, they comprise a group of disorders and pathologies where substitution of the missing hormones is still standard practice and the development of new targeted treatment strategies remains stagnant. This review will discuss the origin of the autoimmune process in such endocrine disorders, investigate the mechanism behind the breakdown in the immune system's ability, and determine the pathways against which therapeutics can be targeted. Recent studies reveal that the importance of endocrine hormones, which regulate all human biological processes during longevity, necessitate their continual secretions and stream in conjugate with spoiling mutant proteins. However, the existence of an immune surveillance mechanism wherein auto-reactive T cells act to remove these spoiling mutants and leaking tissue fragments (auto-antigens) to prevent disruption of normal homeostasis. Detection of autoantibodies is the surrogate markers of endocrine autoimmune disorders and screening for such autoantibodies can identify individuals at early risk. The disruption and delicacy of this immune surveillance mechanisms predispose to endocrine autoimmune disorders. In summary, autoimmune endocrine disorders are with increasing awareness and are the cost of the fragility and exhaustion of the immune surveillance mechanism acting continually to remove the aberrant spoiling mutants in conjugate with the released hormones. Disclosure of this autoimmune mechanism would be the goal to initiate a new targeted therapy instead of the replacement treatment and to identify individuals early at risk.

Biography:

Prof Dr. Husham Bayazed is now consultant of immunology, college of Medicine / University of Zakho/ Kurdistan Region-Iraq. He is specialist in clinical Immunology and Autoimmunity and has published more than 25 papers in reputed journals and has been serving as scientific reviewers of many local and international medical journals. In addition of being Fellowship of ISC, Infection, Cancer and Immunology Advisory Board Member (EUROMDnet) (Belgium), Membership of World Stroke Organization, Membership of Metabolomics (USA), and Membership of American Association of Science & Technology.

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