

4th World Congress on

Pediatrics & Neonatology



30-31 JULY, 2024

Venue:
Hyatt Place London Heathrow Airport, UK

08:30–08:45: Registrations

08:45–09:00: Opening Ceremony

DAY 1

JULY, 30 2024

Keynote Presentation

09:00–09:40

Gulsen Meral

Epigenetic Coaching Company, UK

Title : The Importance of Nutrigenetics and Microbiota in Early Life

Oral Presentations

Session Introduction

Session Chair: Gulsen Meral, Epigenetic Coaching, UK

Tracks

Importance of Nutrigenetic Epigenetics in Childhood | Pediatric Surgery | Neonatology & Perinatology | Pediatric Nutrition and Obesity | Pediatricians | Neonatal Neurology | Clinical Pediatrics | Pediatric Neurology | Neonatal Intensive Care | Pediatric Critical & Emergency Medicine | Oncology and Hematology | Developmental–Behavioral Pediatrics

09:40–10:05

Reda El Bayoumy

Basildon University NHS Hospital, UK

Title: Live birth after Perimortem Cesarean Delivery (PMCD) in a 27–year–old Community Cardiac Arrest Nulliparous Woman Retrieved by Prehospital Extracorporeal Membrane Oxygenation (ECMO)

10:05–10:30

Deepa Awasthi

SS.Splint–O–Tist, India

Title: Neurocognitive Functioning in Paediatric Cancer: A Scoping Review

10:30–10:55

Leonora Ndoti Mbithi

Amref Health, Africa

Title: Leveraging Digital Technology for Strategic Health Purchasing

Group Photo | Coffee Break 10:55–11:15 @ Foyer

11:15-11:40

Kuldeep Dhariwal
NMC Specialty Hospital, UAE

Title: NONO– Associated X– Linked Intellectual Disability Syndrome

11:40-12:05

Cynthia Waliaula
AMREF, Kenya

Title: Enhancing Policy Reforms through Country Pairing and Cross–Country Learning: A Framework for Universal Health Coverage and Primary Healthcare in Africa

12:05-12:30

Essie Menson
Medical Mediation Foundation, London, UK

Title: Preventing and managing conflict between families and healthcare providers: a powerful skillset that's needed now more than ever

12:30-12:55

Nihaya Al–sheyab
Jordan University of Science and Technology,
Jordan

Title: Rates and Relationship of Cigarette and Waterpipe Smoking with Asthma and Wheezing among Jordanian Adolescents

12:55-13:20

Mohammad Alyahya
Jordan University of Science and Technology,
Jordan

Title: Feasibility and Effectiveness of using Smartphone Application on self–reported Asthma–related Quality of Life And Asthma Control Level among Adolescents with Asthma in high schools

Lunch Break 13:20–14:20 @ Foyer

14:20-14:45

Reda El Bayoumy
Basildon University NHS Hospital, UK

Title: Case Report: Difficult Endotracheal Intubation in a Neonate: A Clinical Challenge

14:45-15:10

Gulsen Meral
Epigenetic Coaching Company, UK

Title: Vitamin D Deficiency and Epigenetics

Poster Presentations

15:10-15:30

Firuz Damirkhanli
Baskent University, Turkey

Title: Anticoagulant Treatments and Retrospective Evaluation of Results in Pediatric Chronic Renal Failure Cases Developing with Venous Thromboembolism

15:30-15:50

Sophie Thorrold
Nottingham University Hospitals, UK

Title: Management of Septic Infants under 3 months in a Tertiary Center Paediatrics Emergency Department

Coffe Break 15:50–16:00 @ Foyer

16:00-16:20

Faitima Ramarez–Montiel
University of Guanajuato, Mexico

Title: Secreted Acid Sphingomyelinase Promotes Repairs of Damage to the Plasma Membrane in *E. histolytica*

16:20-16:40

Peter Averkiou
Florida Atlantic University, USA

Title: Understanding COVID–19's Impact on Child Development Compared to Age–matched Standards

16:40-17:00

Syril James
Hospital Necker Enfants Malades, France

Title: CHIARI 1 Malformation is it Really a Malformation or Induced Illness

17:00-17:20

Omayma Al Jabiry
University of Western Ontario– Schulich School of Medicine and Dentistry London, Canada

Title: Early Clinical Exposure in Medical Education: The Newborn Nursery Clinical Experience

Panel Discussion & Certificate Falcitation
Day –1 Ends

DAY 2

JULY, 31 2024

Zoom Meeting (GMT+1) Time in United Kingdom

09:00-09:20

Zhenhuan Liu
Guangzhou University, China

Title: Quality of Life Children with Autism Spectrum Disorder

09:20-09:40

Neha Anilkumar Khadke
Dr. VVPFs Medical College and Hospital, India

Title: Awareness of Pre–Hypertension and Hypertension in Adolescent Population among Paediatricians

09:40-10:00

Sindhu
Gurugobind Indraprasta University, India

Title: Presepsin Scd–14 can be Used to Predict Positive Blood Culture in Children with Clinical Sepsis

10:00-10:20

Dipali Shirsath
Guru Mishri Homoeopathic Medical College, India

Title: Homoeopathic Medicines are Effective in Cases of Nocturnal Enuresis in 6 to 14 yrs Children

10:20-10:40

Grace Lalana Christopher
New Gen Parenting, India

Title: The effect of Biological factors on Birth weight, Gestation and Centile Intrauterine Growth Curves in South Indian Newborns

10:40-11:00

Mary Anbarasi Johnson
CMC Vellore ,India

Title: Smart Pediatric Monitoring Devices

11:00-11:20

Tatyana Itova
University Ruse Angel Kanchev, Bulgaria

Title: In support of breastfeeding

11:20-11:40

Sara Al Khayat
University of Warmia and Mazury in Olsztyn,
Poland

Title: Prevalence of Eosinophilic Esophagitis and Celiac Disease Among Children Undergoing Endoscopic Examination

11:40-12:00

Seyed Reza Khatibi
Torbat Heydariyeh University of Medical
Sciences, Iran

Title: Gestational diabetes mellitus in association with macrosomia

12:00-12:20

Viktorija Arnite
Childrens Clinical University, Latvia

Manifestation of Interstitial Lung Disease and Dermatitis in Patient with Severe Combined Immunodeficiency – A Case Report

12:20-12:40

Gokcen Alper Acar
Epigenetic Coaching Company, UK

Title: The importance of using nutrigenetic–based supplements in childhood

12:40-13:00

Neval Burkay
Epigenetic Coaching Company, UK

Title: Methylation Cycle and Genetic Variants in Pregnancy

13:00-13:20

Dulce Maria Pereira Garcia Galvaeo
Coimbra Higher Nursing School, Portugal

Title: Parents' Perception of Physical Activity Importance in Children's Health

Panel Discussion



4th World Congress on

PEDIATRICS & NEONATOLOGY

July 30-31, 2024 | London, UK

HYBRID EVENT

KEYNOTE PRESENTATIONS
DAY 1



Gulsen Meral

Epigenetic Coaching Company UK Biruni University, UK

The Importance of Nutrigenetics and Microbiota in Early Life

The Human Genome Project, completed in 2003, helped us better understand the effects of genetic diversity on human health. This project contributed greatly to the development of medicine based on genetic information and laid the foundations of precision medicine, known as "4P medicine" (Predictive, Preventive, Personalized, Participatory). Precision medicine aims to prevent, diagnose and treat chronic diseases by analyzing individuals' phenotypic, genotypic and environmental factors. Translating nutrigenetics and nutrigenomics research into multidisciplinary clinical practice is a challenging process. However, by integrating data on genotype and phenotype, it is now clearly seen that nutrition, lifestyle and supplement use appropriate to the genetic structure of individuals will increase clinical success. Taking an epigenomic approach allows us to better understand the health risks that arise from the combination of genetic and environmental factors. In this context, nutritional and supplement recommendations based on personalized risk analyzes obtained from nutrigenetics, microbiota and test results are of great importance. It is especially necessary to emphasize how variants of genes encoding enzymes involved in 1C metabolism, VDR (Vitamin D Receptor) genetic variants and microbiota analysis results affect the phenotype. We believe that precision medicine will provide a tool for preventing diseases and reducing their symptoms, based on analyzes of disease-causing genetic predispositions and microbiota. Ensuring a harmonious interaction between genetic makeup and microbiota at early ages may improve long- term health outcomes. Therefore, it is of great importance that parents and healthcare professionals take these factors into account in the nutrition and care of children.

Biography:

Associate Professor Gülsen Meral graduated from Istanbul University Cerrahpaşa Faculty of Medicine in 1994. She became a pediatrics assistant in 1997 – 2001 at the Şişli Etfal Training and Research Hospital. In 2006 Hamidiye Şişli Etfal Training and Research Hospital she became chief physician assistant. Between 2007 -2008 in Sarıyer İsmail Akgün State Hospital she became the chief physician and she became chief physician between 2008- 2012 Kağıthane State Hospital. Between 2012-2017 she was the Kağıthane State Hospital Manager. She continued her career between 2017-2019 at the Acıbadem Taksim Hospital as Pediatrics Specialist. She received Acupuncture training from Yeditepe University and still works as an Acupuncture instructor at Yeditepe University. She worked as a Nutrigenetics graduate course and lecturer at Gelişim University in 2019-2020. She gave undergraduate and graduate courses on child development at Biruni University. She was the Rector's advisor between 2019-2021 at the Northern Cyprus ITU. She has national and international publications, as well as foreign editorships and numerous referees. She completed his Master's Degree in Hospital Management at Bilkent University. She has a Turkish language literature undergraduate education. She attended Acıbadem University Medical Biotechnology doctorate program for 2 years. She continues her PhD program in Molecular Biology and Medical Genetics at Biruni University. In addition to her scientific achievements, she has five published books on poetry. She is the Founder of the Nutrigenetics and Epigenetics Association, a Member of the Green Crescent and Rumelia Association, a Member of Istanbul Acupuncture Association, a member of International Society of Nutrigenetics & Nutrigenomics. the president of the First ,Second International Epigenetic Congress, the organizer and educator of the Epigenetic Coaching Program and She is also actively giving Nutrigenetic & Epigenetic Counseling Trainings to health professionals from all over the World as a certified CPD program. She continues research and training as the founder and manager of epigenetic coaching



4th World Congress on

PEDIATRICS & NEONATOLOGY

July 30-31, 2024 | London, UK

HYBRID EVENT

SPEAKER PRESENTATIONS
DAY 1



Reda El Bayoumy
Basildon University NHS Hospital, UK

Live Birth After Perimortem Cesarean Delivery (PMCD) In A 27-Year-Old Community Cardiac Arrest Nulliparous Woman Retrieved By Prehospital Extracorporeal Membrane Oxygenation (ECMO)

Objective: The aim of this study is to share a valuable experience of perimortem cesarean delivery (PMCD) when no signs of spontaneous circulation were detected after 4 min of resuscitation. Being retrieved by prehospital extracorporeal membrane oxygenation (ECMO). The time interval between maternal cardiac arrest and neonatal delivery was evaluated and reviewed.

Case report: We present the case of an out-of-hospital cardiac arrest (OHCA) in a nulliparous holiday-maker woman on the beach. 27-year-old lady with no significant medical history, pregnancy was rolling fine with no complication, most probably due to "heat stroke" on the beach. Cardiac arrest was managed immediately by fire-fighters, they were on site; 20 seconds non-flow cardiac arrest on ventricular fibrillation. The term infant was delivered by PMCD at our emergency department at least 119 min after maternal cardiac arrest. Prehospital ambulatory extracorporeal membrane oxygenation (ECMO) is used by the city's EPCR response unit as a second line of treatment for refractory ventricular fibrillation cardiac arrest. The infant survived with no neurological deficit after 12 months follow-up.

Conclusion: Contrary to previous studies and case reports, maternal and neonatal outcomes seem to be better when performing prehospital ambulatory extracorporeal membrane oxygenation (ECMO) as a supportive treatment for cardiac arrest. Highly-skilled multidisciplinary teamwork is the key for optimal outcomes in such situations.

Keywords: Cardiac arrest; Perimortem cesarean section; Pregnancy; Resuscitation; prehospital extracorporeal membrane oxygenation.

Biography:

Reda El Bayoumy, Medical Degree Thesis (M.D.) Consultant anaesthetist in the Mid and South Essex NHS University Hospitals, UK, Department of Anaesthesiology Anglia Ruskin University, Honorary lecturer in Anaesthetics and Physiology in Faculty of Medicine, Anglia Ruskin University, UK



Deepa Awasthi
SS.Splint-O-Tist, India

Neurocognitive Functioning in Paediatric Cancer: A Scoping Review

Paediatric cancer not only affects physical health but also influences various aspects of neurocognitive functioning, which are pivotal for a child's overall development. This scoping review aims to provide an overview of existing research in this domain, highlighting key themes and gaps in the literature.

The review systematically surveyed a wide range of sources, including peer-reviewed articles, conference proceedings to comprehensively capture the breadth of knowledge on neurocognitive functioning in paediatric cancer. By utilizing a scoping review methodology (based on the Prisma Guidelines for Scoping Reviews), a search strategy was formulated, where all search terms were transformed into a free term formulation. The study sought to map the existing evidence from their time of inception until July 2023 and elucidate potential avenues for future research and intervention.

Key findings reveal that neurocognitive functions, including attention, memory, executive functioning, and processing speed, are significantly impacted in paediatric cancer survivors. The etiology of these impairments is complex and multifaceted, stemming from a combination of disease-related factors, treatment modalities (such as chemotherapy, radiation, and surgery), and psychosocial variables.

In conclusion, the review identifies a notable gap in consistent assessment protocols and a lack of standardized tools for evaluating neurocognitive functioning in paediatric cancer patients. It underscores the critical importance of addressing neurocognitive functioning in the context of paediatric cancer and recommends further research that delve into the mechanisms underlying these impairments, long-term trajectories of cognitive functioning, and development of evidence-based interventions aimed at enhancing cognitive outcomes for this vulnerable population.

Biography:

Dr. Deepa Awasthi is a Founder and Consultant OT at SS Splint-O-Tist, a Custom Splinting Consultancy in India. In 2023, she secured University Rank-1 position at her Postgraduation Examination in Developmental Disabilities. Her Scientific achievements include winning the Best Scientific Paper Presentation at the Annual Conference of Association of Neonatal therapist for two consecutive years of 2020 and 2021 as well as the Award for Best Paper Presentation in Pediatrics at Virtual OTICON 2021. She has consecutively served as a Speaker and Moderator at the 3rd and 4th Euro-Global Conference on Pediatrics & Neonatology along with the Pediatrics Conference 2022, held in Paris.



Leonora Ndoti Mbithi
Amref Health Africa in Kenya

Leveraging Digital Technology for Strategic Health Purchasing

The integration of digital technology into healthcare systems presents transformative opportunities for strategic health purchasing. This perspective paper explores how digital advancements can enhance the efficiency, equity, and effectiveness of health purchasing decisions. Digital health technologies, such as electronic health records (EHRs), telemedicine, and health information systems (HIS), offer unprecedented access to comprehensive data, enabling more informed and evidence-based purchasing choices. By leveraging these technologies, healthcare purchasers can optimize resource allocation, improve patient outcomes, and reduce costs. Key benefits of digital technology in strategic health purchasing include enhanced data analytics capabilities, which facilitate better understanding of population health needs and trends. This data-driven approach allows for more precise targeting of resources towards high-impact interventions. Additionally, digital platforms enable streamlined communication and coordination among stakeholders, fostering a more integrated and responsive healthcare system.

However, the implementation of digital health technologies is not without challenges. Issues such as data privacy, interoperability, and the digital divide must be addressed to ensure equitable access and effective utilization. Policymakers and healthcare leaders must prioritize the development of robust regulatory frameworks and invest in the necessary infrastructure to support digital integration.

In conclusion, while digital technology offers significant potential for advancing strategic health purchasing, careful consideration and proactive management of associated challenges are essential. This paper advocates for a concerted effort to harness digital innovations, ultimately aiming to create a more efficient, equitable, and effective healthcare system.

Biography:

Leonora is a seasoned health system strengthening specialist with 13 years of experience. She currently serves as the Country Engagement Specialist for the Health System Strengthening Directorate at Amref Health Africa. She has a robust background in data analytics, stakeholder and partner engagement, program coordination, and health financing. Leonora holds a master's degree in public health and a bachelor's degree in statistics. She is passionate about fostering strategic collaborations, promoting knowledge sharing and advocating for policies that bolster health system strengthening. Additionally, Leonora co-chairs the Health Financing Working Group for the Global Civil Society Coordinating Group at the Global Financing Facility, hosted by Population Action International.



Kuldeep Dhariwal
NMC Specialty Hospital, UAE

NONO- Associated X- Linked Intellectual Disability Syndrome

Aim: Introduction: NONO is a TORC-interacting protein that is necessary for cAMP-dependent activation of CREB target genes in vivo. This protein is located on chromosome Xq13.1 and encodes RNA-binding and DNA-binding proteins that involved in RNA synthesis. Hemizygous loss of function NONO variants have been associated with syndromic intellectual disability with left ventricular noncompaction(LVNC), congenital cardiac defects and cardiomyopathy. X-linked recessive syndromic intellectual developmental disorder-34(MRXS34) is characterized by delayed psychomotor development, intellectual disability with poor speech, dysmorphic facial feature, thickening of corpus callosum.

Material and Method: we reviewed 17 cases related to NONO-associated X-linked intellectual disability syndrome.

Results: A 11 year old male child admitted in our hospital with no signs of life. Child was revived after resuscitation. Child had developmental delay, intellectual disability, dysmorphic facial features, microcephaly, slender build. Facial feature include long face with up slanting palpebral fissures, malar hypoplasia, small open mouth. ECHO showed severe systolic and diastolic dysfunction with ejection fraction of 20-25%. Child exhibited low muscle tone, Neurologic examination showed hypotonia, increased patellar and Achilles reflexes without clonus. CT scan of Brain was normal. Whole exome sequencing showed a hemizygous pathogenic variant in c.1093>t(p.Arg365Ter) variant in NONO gene. A heterozygous variant of uncertain significance in 935G>A (p.Gly312Glu) variant in TNNI3K gene was also observed in this child.

Conclusions: We conclude that It is a rare disease with features of developmental delay, cardiomyopathy, dysmorphic facial features. Microcephaly was found in this case as compared to previous 17 cases where macrocephaly was observed. **KEYWORDS** syndromic intellectual disability, microcephaly, left ventricular noncompaction, NONO gene, TNNI3K gene.

Keywords: left ventricular noncompaction, microcephaly, NONO, syndromic intellectual disability, TNNI3K gene.



Cynthia Waliaula
Amref Health Africa in Kenya

Enhancing policy reforms through country pairing and cross-country learning: a framework for universal health coverage and primary healthcare in Africa

Effective primary healthcare is crucial for achieving Universal Health Coverage (UHC) and bridging healthcare disparities in Africa. This paper advocates for country pairing and cross-country learning as potent strategies to foster knowledge exchange and policy enhancements. Drawing from existing literature and insights from Amref initiatives, the paper proposes a framework to guide policymakers and technical teams in implementing impactful reforms and fostering regional healthcare collaboration.

Methodology: The paper adopts a qualitative approach, synthesizing literature on country pairing, cross-country learning, and health systems research. It also incorporates insights from previous Amref Health Africa projects. The research underscores the significance of context, clear approach, policy understanding, and collaborative spirit among participating countries for effective country pairing and cross-country learning. It elucidates the distinctions between cross-country comparisons, learning, and country pairing, providing operational definitions and insights.

Discussion: This section explores implications for policymakers, technical teams, and implementers involved in UHC and primary healthcare reforms in Africa. It examines how the framework can facilitate practical knowledge exchange, support policy reforms, and enrich the health systems strengthening evidence base.

Conclusion: The paper offers a comprehensive framework tailored to the African context, stressing context sensitivity, clarity, policy understanding, and collaboration. It suggests further utilization and adaptation of the framework to drive impactful policy reform and enhance healthcare systems across Africa.

Biography:

Dr. Cynthia Waliaula is a Policy Analyst at Amref Health Africa's UHC Delivery Lab, dedicated to advancing equitable healthcare access across Africa. With a Master's in Public Health and nearly 10 years of experience in healthcare, she plays a vital role in shaping strategic initiatives within the Lab. Her responsibilities include providing technical assistance in designing health policy strategies, analyzing potential policy implications, and documenting outcomes from country support efforts. Cynthia's expertise lies in maintaining a holistic view of program activities across multiple countries, ensuring alignment with Amref's vision of lasting health change in Africa.



Esse Menson

Medical Mediation Foundation, London, UK

Preventing and managing conflict between families and healthcare providers: a powerful skillset that's needed now more than ever

Conflict between families and staff in children's health and social care is increasingly recognised. It is time-consuming, distressing, and impacts the care and treatment children experience. The effects ripple out, affecting other patients, families, staff, and entire organisations. Social media and financial constraints have likely intensified these conflicts, amid rising healthcare costs, complexity, and expectations.

Healthcare providers need effective tools to prevent, recognise, and manage these conflicts, now more than ever.

The Medical Mediation Foundation (MMF) was founded in 2010 by award-winning health journalist and a children's cancer specialist to create better conflict management strategies that support both families and staff. In addition to providing mediation services for seemingly-intractable conflict cases, MMF undertook quantitative and qualitative research in order to better understand the incidence and causes of conflict in children's healthcare. In 2013, MMF launched the UK's first Conflict Management Programme (CMP) for children's healthcare. With peer-reviewed research backing, the CMP is used throughout the NHS and is increasingly commissioned by healthcare services overseas.

The programme, built on proven mediation and communication skills, offers a suite of interactive workshops. It is ideally delivered to multiprofessional groups to include the benefits of peer-to-peer learning. Realistic scenarios are used in a supportive learning environment, led by experienced mediators. Senior staff who complete higher levels of the programme champion and model the approach across their clinical areas, promoting culture change and sustainability within their organisation. Feedback from over 10,000 trained professionals worldwide highlights the programme's benefits for both staff and families.

Biography:

Esse Menson was a consultant in paediatric infectious diseases and immunology at Evelina London Children's Hospital, UK (2006-2018). She accredited as a medical mediator (2014) and subsequently left her clinical caseload to specialise in mediating disagreements between parents and health professionals, often at the severe end of conflict where court proceedings would be the next option. Esse is a senior facilitator for the Medical Mediation Foundation's Conflict Management Programme and also trains senior healthcare specialists to become accredited paediatric medical mediators. Esse is also a co-director of Thrive Leadership (Oxford University, UK), delivering highly-evaluated healthcare leadership programmes.



Nihaya A Al-sheyab

Jordan University of Science and Technology, Jordan

Rates and relationship of cigarette and waterpipe smoking with asthma and wheezing among Jordanian adolescents

The current data were derived from the "Irbid Tobacco Risk in Youth (Irbid-TRY)"; a longitudinal study designed to examine the resulting health risks of tobacco smoking. The current study is of a descriptive, cross-sectional design aiming to assess the relationship of asthma and tobacco (cigarettes, waterpipe, and dual) smoking among adolescents participating in the Irbid-TRY study. Overall, our findings show a positive relationship between different types and frequency of tobacco smoking and the rate of asthma and wheezing among adolescents. In specific, current (past month) tobacco smoking more than doubled the odds of recent (past 12 months) wheezing. This occurred for all sub-groups of tobacco smokers, including those who smoked only cigarettes (i.e, no waterpipe) in the past month, those who smoked only waterpipe (i.e, no cigarettes) in the past month, those who smoked both cigarettes and waterpipe (dual) in the past month, and those who had ever smoked either cigarettes or waterpipe but did not smoke in the past month. The current study also examined the "dose" effects through calculating the odds of wheezing as a function of frequency of use of cigarettes, waterpipe, and dual tobacco smoking. Our findings generally showed increased odds ratios for students who smoked most frequently.

Our findings add to a growing body of research indicating that waterpipe smoking, alone and in combination with cigarette smoking (dual smoking), is associated with the risk of pulmonary disease. Future longitudinal research need to examine the causal relationship between waterpipe smoking and asthma onset and severity in this population. Also, our findings warrant for interventions to improve awareness and management of asthma and symptoms as well as establishing and enforcing policies to control tobacco smoking, particularly waterpipe, among adolescents and youth.

Biography:

Professor Al-sheyab has completed her PhD at the age of 33 years from University of Technology, Sydney. She is currently the Dean of the Faculty of Applied Medical Sciences at JUST. She has published more than 90 papers in reputed journals and has received several national and international research funds.



Mohammad Alyahya

Jordan University of Science and Technology, Jordan

Feasibility and effectiveness of using smartphone application on self-reported asthma-related quality of life AND asthma control level among adolescents with asthma in high schools

We assessed the feasibility and effectiveness of using a smartphone application called the asthmaMD on self-reported asthma-related quality of life, asthma control and level of satisfaction among adolescents with asthma in high schools in Jordan. A cluster randomized controlled trial in four private and two public high schools which were randomly selected. A total of 153 participants (48 students from Aqaba, 63 students from Irbid, and 42 students from Amman) in grades 10 and 11 with moderate to severe asthma were recruited as per international study for asthma and allergy committee questionnaire screening results and confirmation of asthma diagnosis by parents. Using a closed envelope technique, the participants were randomized to either intervention group; asthmaMD application guides the participants through a personalized asthma action plan or paper-based monitoring group (control group). There was a statistically significant difference in the asthma control level and quality of life between the two study groups. This study found that, compared to the control group, the use of asthmaMD smartphone application resulted in higher asthma-related quality of life scores at two months of follow up (MD of mean scores 0.48, 95% CI - 0.05 to 0.92 $p < 0.002$), significant improvement in asthma control (MD of mean scores 1.26, 95% CI - 0.06 to 2.46 $p < 0.02$), and more than 90% of student reported that they were satisfied using this application. The smartphone application provides a convenient and practical tool for better asthma control and improved quality of life compared with paper based monitoring.

Biography:

Professor Alyahya has completed his PhD at the age of 32 years from York University and he currently the Secretary General of Jordan CDC. He has published more than 80 papers in reputed journals and has received several international grants.



Reda El Bayoumy
Basildon University NHS Hospital, UK

Difficult endotracheal intubation in a neonate: a clinical challenge

Difficult intubation in neonates has many etiologies. It especially poses a technical challenge to save a newborn baby immediately following birth especially in isolated island with limited neonatal facilities, resources and expertise. A "difficult airway situation" arises whenever face mask ventilation, laryngoscopy, endotracheal intubation, or use of supraglottic device fails to secure ventilation. As bradycardia and cardiac arrest in the neonate are usually of respiratory origin, neonatal airway management remains a critical factor. A late preterm neonate was born limp and apneic; several attempts to secure his airway were unsuccessful. Upper airway obstruction by voluminous supraglottic cyst with possible subglottic obstruction was considered.

Keywords: neonatal intensive care; congenital disorders; neonatal health; difficult endotracheal intubation; hospital transfer

Biography:

Reda El Bayoumy, Medical Degree Thesis (M.D.) Consultant anaesthetist in the Mid and South Essex NHS University Hospitals, UK, Department of Anesthesiology Anglia Ruskin University, Honorary lecturer in Anaesthetics and Physiology in Faculty of Medicine, Anglia Ruskin University, UK



Gulsen Meral

Epigenetic Coaching Company UK Biruni University, Turkey

Vitamin D deficiency and epigenetics

Vitamin D deficiency continues to be a very important problem in the world. One of the most important functions of vitamin D is to make 3% epigenetic changes in the body. It has been shown that there is a relationship between epigenetic diseases such as autoimmune diseases, diabetes, cardiovascular diseases, allergies and depression and vitamin D deficiency. Considering the mechanisms involved in immune modulation by vitamin D, the role of coactivators including histone acetyltransferases (HATs), which express acetylation of histones in ligand binding to the 1,25-D VDR/RXR complex, is important. It has shown that the variability of vitamin D status depends on a number of environmental and genetic factors. However, investigation of the genetic background of vitamin D metabolism has highlighted the importance of many genes such as CG, DHCR1, CYP2R1, CYP24A1 and VDR. When the effect of nutrition on vitamin D metabolism is examined, CYP2R1 and CYP27A1 (25-27A1) are seen to play a role in vitamin D metabolism in high-fat diet and glutathione deficiency. hydroxylase) CYP27B1 Gene-specific hypermethylation of 1- α -hydroxylase VDR Hypomethylation of CYP24A1 has been observed. Looking at the relationship between vitamin D and microbiota, vitamin D and VDR interactions protect the intestinal microbiota by regulating the expression of antimicrobial peptides (AMPs) and maintaining the barrier functions of the intestinal mucosa. Considering whether the microbiota has an effect on the blood level of vitamin D, studies have shown that the microbiota can regulate both commensal and pathogenic intestinal microbiota, VDR expression and localization. Probiotic treatment can increase VDR expression and activity in the host, thereby inhibiting intestinal inflammation. An increase in VDR expression was observed in human epithelial colonic cells treated with probiotics lactobacillus rhamnosus strain gg and lactobacillus plantarum. l. reuteri ncimb 30242 may increase serum 25(oh)d by expanding intraluminal lactic acid production or increasing 7-dehydrocholesterol (7-dhc) synthesis. In a study we conducted, we showed that the use of vitamin D and probiotics increases vitamin D levels more than the use of single vitamin D or single probiotics. Both nutrigenetic and epigenetic mechanisms play a role in vitamin D mechanisms. I think that pobiotic and nutrigenetic-based nutrition are important in the treatment of vitamin D deficiency.

Biography:

Associate Professor Gülsen Meral graduated from Istanbul University Cerrahpaşa Faculty of Medicine in 1994. She became a pediatrics assistant in 1997 – 2001 at the Şişli Etfal Training and Research Hospital. In 2006 Hamidiye Şişli Etfal Training and Research Hospital she became chief physician assistant. Between 2007 -2008 in Sarıyer İsmail Akgün State Hospital she became the chief physician and she became chief physician between 2008- 2012 Kağıthane State Hospital. Between 2012-2017 she was the Kağıthane State Hospital Manager. She continued her career between 2017-2019 at the Acıbadem Taksim Hospital as Pediatrics Specialist. She received Acupuncture training from Yeditepe University and still works as an Acupuncture instructor at Yeditepe University. She worked as a Nutrigenetics graduate course and lecturer at Gelişim University in 2019-2020. She gave undergraduate and graduate courses on child development at Biruni University. She was the Rector's advisor between 2019-2021 at the Northern Cyprus ITU. She has national and international publications, as well as foreign editorships and numerous referees. She completed his Master's Degree in Hospital Management at Bilkent University. She has a Turkish language literature undergraduate education. She attended Acıbadem University Medical Biotechnology doctorate program for 2 years. She continues her PhD program in Molecular Biology and Medical Genetics at Biruni University. In addition to her scientific achievements, she has five published books on poetry

She is the Founder of the Nutrigenetics and Epigenetics Association, a Member of the Green Crescent and Rumelia Association, a Member of Istanbul Acupuncture Association, a member of International Society of Nutrigenetics & Nutrigenomics. the president of the First ,Second International Epigenetic Congress, the organizer and educator of the Epigenetic Coaching Program and

She is also actively giving Nutrigenetic & Epigenetic Counseling Trainings to health professionals from all over the World as a certified CPD program. She continues research and training as the founder and manager of epigenetic coaching



Firuza Damirkhanli
Baskent University, Turkey

Anticoagulant Treatments And Retrospective Evaluation Of Results In Pediatric Chronic Renal Failure Cases Developing With Venous Thromboembolism

Introduction: Chronic renal failure (CRF) is associated with increased risk of bleeding and thromboembolism in pediatric patients. Hemostatic imbalance and impaired renal metabolism of low molecular weight heparins (enoxoparin) in pediatric CRF patients with venous thromboembolism, hinder appropriate dose determination and follow up of due to the increased risk of bleeding. Despite differences in management protocols among institutions, guidelines regarding optimal thrombosis management are still unavailable.

Aim: In this study, we retrospectively evaluated treatment modalities and outcomes in pediatric patients with chronic kidney failure and venous thromboembolism.

Method: Patients aged 0-18 years with chronic renal failure (estimated glomerular filtration rate < 30 ml/min/1.73m²), who underwent hemodialysis or peritoneal dialysis, and had venous thromboembolism while being followed up at our hospital between 2000 and 2020 were included. Thrombosis localization, thrombosis risk factors, antifactor Xa levels, treatment outcomes and side-effects were retrospectively evaluated. The data were analyzed using Microsoft Excel 2013 program.

Results: Of the 12 subjects (6 males, 6 females), the mean age at diagnosis was 11.8 years. All the patients had creatinine clearance < 30 ml/min/1.73m² and underwent hemodialysis. Thrombosis localizations were variable with external iliac vein (26%) and jugular vein (21%) being the most common sites. Thrombophilia risk factors was present in 9 patients (75%). The most common thrombophilia risk factor was increased factor VIII levels. All of the patients received enoxoparin treatment. Enoxoparin 50 U/kg/day was initiated in 8 of 12 patients (66.6 %). Other 4 patients received enoxoparin at 100 U/kg/day, 66 U/kg/day, 62.5U /kg/day, and 30U/kg/day doses. Anti-factor Xa level were checked 4.6 days after the initiation of the treatment. Antifactor Xa follow-up results were unavailable in 3 patients. Mean antifactor Xa level was 0.58 U/ml. The mean duration of treatment with enoxaparin was 2.6 (1-6) months. Thrombosis resolution was recorded in all patients. Mild mucosal bleeding was detected in one case as a side effect of treatment. 4 patients (33%) died due to underlying primary disease while there was no mortality associated with thrombosis in our patients.

Conclusion: The most important drawback of enoxaparin treatment for thrombosis in pediatric patients with chronic renal failure is increased risk of bleeding. There are no studies regarding neither optimal enoxaparin dose nor enoxaparin-associated bleeding frequency in pediatric hemodialysis patients with thromboembolism. While adult studies suggest 50% dose reduction in cases with low creatine clearance,

the only pharmacokinetic study in children recommends 30% dose reduction. In our study, 66,6% of the cases received 50 U/kg/day enoxaparin and the dose was reduced by 75%. Administration of 50 U/kg/day enoxaparin subcutaneously on non-dialysis days and 50 U/kg/day during dialysis session seems to be safe and effective for treating thromboembolism in pediatric patients with creatinine clearance ≤ 30 ml/min/1.73 m² while on hemodialysis. Future randomized controlled trials in this issue are warranted.

Keywords: Thromboembolism, Bleeding, Chronic renal failure, Anticoagulation, Anti- factor Xa, Low molecular weight heparin (LMWH)

Biography:

I received my specialist training in child health and diseases at Baskent University in Turkey. I have been working as a pediatrician in a private hospital in Turkey for 2 years.



Sophie Thorrold

Children and Young People's Emergency Department, Queens Medical Centre,
Nottingham, UK

Management of septic infants under 3 months in a tertiary center paediatric emergency department

Background: Current NICE guidelines recommend that febrile infants under three months of age, exhibiting a temperature or suspicion of sepsis, require prompt assessment by a senior clinician, initiation of antibiotic therapy and necessary investigations conducted within the initial hour. A previous audit completed three years prior assessed similar outcomes unveiling inadequacies across various domains and proposed recommendations for improvement.

Aim: The aim of this audit was to retrospectively analyze the timeliness of senior clinician assessment, completion of investigations, and antibiotic administration over a 6-month period in a tertiary center, paediatric emergency department and to evaluate the effectiveness of previous interventions.

Method: Hospital databases were searched for cases of children aged 12 months or less with a coded diagnosis of sepsis between September 2022 and March 2023. Data regarding timing of assessment including investigations, senior review and antibiotic administration alongside what investigations were completed, was extrapolated.

Results: 61 cases under the age of three months were included in the audit (38 male, 23 female). Whilst there was a significant improvement in lumbar puncture rates (43.2%, 26%, $P < 0.05$), a significant decrease in urine culture collection was observed (48%, 19.7%, $P < 0.01$). There was no significant change in timings, except for time for senior review (167, 78.6 minutes, $P < 0.01$).

Conclusion: This study highlights the need for ongoing improvement in the adherence to NICE guidelines for the management of suspected sepsis in infants.

Biography:

After graduating from the University of Birmingham, Sophie completed her foundation years working in Nottingham and Chesterfield. She has since been working as a trust grade doctor in paediatric emergency medicine in a tertiary trauma center. She has one publication in the BMJ.



Fatima Ramirez-Montiel
University of Guanajuato, Mexico

Secreted acid sphingomyelinase promotes repairs of damage to the plasma membrane in *E. histolytica*

Entamoeba histolytica is a pathogen that during its infective process confronts the host defenses, which damages the amoebic plasma membrane (PM), resulting in the loss of viability. Acid sphingomyelinases (aSMases) have been reported in mammalian cells to promote endocytosis and removal of PM lesions. In this work, six predicted amoebic genes encoding for aSMases were found to be transcribed in the HM1:IMSS strain, finding that the *EhaSM6* gene is the most transcribed in basal growth conditions and rendered a functional protein. The secreted aSMase activity detected was stimulated by Mg^{+2} and inhibited by Co^{+2} . Trophozoites that overexpress the *EhaSM6* gene (HM1-SM6HA) exhibit an increase of 2-fold in the secreted aSMase activity. This transfectant trophozoites exposed to pore-forming molecules (SLO, Magainin, β -Defensin 2 and human complement) exhibited an increase in the secreted aSMase activity which correlated with higher amoebic viability in a Ca^{+2} dependent process. However, other agents that affect the PM such as hydrogen peroxide also induced an increase of secreted aSMase, but to a lesser extent. Confocal and transmission electron microscopy showed that trophozoites treated with SLO presented a migration of lysosomes containing the aSMase towards the PM, inducing the formation of membrane patches and endosomes in the control strain. These cellular structures were increased in the overexpressing strain, indicating the involvement of the aSMase6 in the PM injury repair. The pore-forming molecules induced an increase in the expression of *EhaSM1*, 2, 5 and 6 genes, meanwhile, hydrogen peroxide induced an increase in all of them. Overall, these novel findings show that the aSMase6 enzyme from *E. histolytica* promotes the repair of the PM damaged with pore-forming molecules to prevent losing cell integrity. This novel system could act when encountered with the lytic defense systems of the host.

Key words: *Entamoeba histolytica*, acid sphingomyelinase, plasma membrane repair, streptolysin, endocytosis.

Biography:

Fatima received her B.S. degree in Pharmaceutical Chemistry and her M.S. and Ph.D. degrees in science (biology) from the Natural and Exact Sciences Division of the Universidad de Guanajuato. She did a postdoctoral stay at the Centro de Investigación y Desarrollo Tecnológico en Electroquímica en Querétaro (CIDETEQ). She is a member of the National System of Researchers level I. She is a professor at the DCNE of the Universidad de Guanajuato in the Laboratory of Structure of Biomolecules, Laboratory of Molecular Biology and Clinical Biochemistry of Special Tests. She is currently collaborating in two research projects:

1. Sphingomyelinases of *E. histolytica* as virulence factors and determinants.
2. Study of the mechanism of antibacterial resistance to metal nanoparticles.



Peter Averkiou
Florida Atlantic University, USA

Early Clinical Exposure in Medical Education: The Newborn Nursery Clinical Experience

The Newborn Nursery Clinical Experience is an innovative, early exposure for medical students to the hospital setting and family medicine. Early in their second year, our medical students are immersed into the Newborn Nursery, while also experiencing the neonatal intensive care unit (NICU) and attending obstetrical deliveries. They witness, first hand, the interprofessional and interdisciplinary workings of pediatricians, obstetricians, neonatologists, anesthesiologists, nurses and other professionals. The medical students are also instructed on how to read a medical chart and on proper medical documentation and its importance. They also interact with the mother of the patient, as well as other family members that are in attendance, and long-term continuity of integrated care and the focus on the personal patient/patient's guardian(s) - physician relationship is stressed. This experience is always well-received and highly evaluated by our medical students. It also helps to prepare them for their third year clinical rotations in family medicine, pediatrics and Ob/Gyn.

Biography:

Dr. Peter Averkiou is a pediatrician and an Associate Professor of Pediatrics at the Charles E. Schmidt College of Medicine at Florida Atlantic University. He is the Co-Director of the four Foundations of Medicine Courses, the Director of the Service Learning Projects, the Director of the Newborn Nursery Clinical Rotation and the Director of the Synthesis and Transition Course at the medical school.



Syrl JAMES
Hospital Necker Enfants Malades, Paris, France

CHIARI 1 Malformation is it really a malformation or induced illness

Context: We would like to prove the existence of different types of Chiari malformation, in this case those which appear early. In our experience and the literature there are no antenatal Chiari I malformation. Having worked on obstetric trauma during childbirth, there is bleeding especially from the posterior fossa which can be either from very eloquent to non-existent. During surgeries in younger people, there is synechia and arachnoiditis that is particularly significant in certain patients. Reason why the postulate of this project would be to see and recognize these induced Chiari by obstetric trauma.

Objectives: To show the impact of childbirth on the creation of the malformation, to follow the evolution of these children and to know the best time to treat them surgically.

Methodology: We looked on our 5 years Chiari I malformation (93 patients) and selected the early diagnostic ones, before 6 years of age. We looked for different criteria: types of birth, MRI, age at first signs, age of diagnosis, symptoms, etc. As part of this initially retrospective then prospective study. All children aged under 6 years at the time of diagnosis is included, children seen in consultation or hospitalization in the C-MAVEM neurosurgery/CRMR department + C-Mavem network.

This study will allow us to identify the induced anomalies and thus try to prevent these traumatic births with long-term repercussions. We would like to do a international study for it and involve all centers interested. Ultimately carry out an awareness campaign for obstetricians, midwives and the public on the risks of perinatal trauma if we find a link.

Biography:

Mr JAMES Since 2014, Consultant at Necker Enfants Malades Hospital (Paris, France), 2014 Professor at the medical college, 2012 Head of the unit for « spine and spinal cord surgery» and head of the reference center C-MAVEM (Chiari, Malformation vertébrales et médullaires) and Head of the neurosurgical ante-natal surgery unit 2011 Head of the Unit for Children abnormal movement unit and Associated head of the Cranio-Facial surgery



Omayma Al Jabiry

University of Western Ontario- Schulich School of Medicine and Dentistry
London, Canada

Understanding COVID-19's Impact on Child Development Compared to Age-matched Standards

Introduction: COVID-19 caused a significant reduction in social interactions. There is concern over how this has impacted childhood development, particularly for children of lower socioeconomic status (SES). Prior research suggests that without adequate social exposure, children will have increased difficulty in meeting developmental milestones.

Methods: We will assess children's milestones at 18, 24, and 30 months using parent/guardian surveys. Recruitment will involve postcards and social media. Parents/guardians will complete three surveys covering cognitive, social, emotional, speech, language, fine motor, and gross motor development. A retrospective chart review will obtain data on milestones at 6, 9, 12, and 15 months. The developmental score of participants will be compared to accepted average developmental scores obtained from the literature.

Results: Preliminary results show that the developmental milestones of children at 15, 18, and 24 months have not been affected by the reduction in social interactions. This could be due to a variety of cases including that the children were able to catch up to their peers in terms of developmental milestones. Retrospective chart review is still being conducted to confirm the findings.

Discussion: This study will shed light on the possible impacts that COVID-induced isolation has had on development. The ubiquitous nature of the pandemic's isolation makes uncovering its effects on childhood development essential to devising and planning for the educational needs of youth. Through early identification, our research may provide insights into where to focus educational efforts to ensure newborns born during the COVID-19 pandemic avoid long-term developmental deficiencies.

Biography:

Omayma Al Jabiry is a dedicated student health researcher and project management professional with a Master's degree in Translational Health Science and a BSc in Biological Sciences 22' from the University of Windsor. With a background in biological sciences and extensive research experience, Omayma has actively contributed to studies examining the impacts of social isolation on child development and enhancing assessment structures within medical education. Skilled in data analysis, event coordination, and communication, Omayma excels in translating research outcomes to the general public. With a proven track record of working both independently and collaboratively, Omayma is committed to advancing health-related research and making a positive impact in the field.



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VIRTUAL PRESENTATIONS

DAY 2



Zhen-huan LIU

Affiliated Nanhai Maternity Children's Hospital of Guangzhou University of Chinese Medicine, China

Quality of Life children with autism spectrum disorder

Objective: To investigate quality of life in children with autism spectrum disorder. This study aimed to evaluate the validity of existing QoL questionnaires for use with children with ASD aged 8–12 years. Method 200 children with autism spectrum disorder (male: 118, female: 82; 2~4 years old: 80, 5~7 year old: 87, 8~12 years old: 33) and 120 normal children (control group) are brought into this study. Separate path analyses were performed to evaluate models of QOL and Intelligent evaluation. the PedsQL (Pediatric Quality of Life Inventory) as robust measures used with children with neurodevelopmental disorders. Results In the study, The test group had lower scores on the PedsQL4.0 universality Core scale, in comparison with the control group. Behaviour problems had a negative indirect effect on Community adaptation, mental health and school performance. And a lower intelligence-related quality of life for children with autism spectrum disorder and clinically significant autistic symptoms in comparison with children and fewer symptoms. The quality of life children with autism spectrum disorder group was lower than normal group in the scores of physical functioning were (62.30 ± 25.05) , emotional functioning were (53.57 ± 26.69) , social functioning were (44.63 ± 27.91) , and school functioning (38.69 ± 30.60) . The totals cores of PedsQL were (49.86 ± 23.32) , with the difference being significant $(90.16 \pm 13.32, 79.09 \pm 19.56, 86.39 \pm 15.45, 82.75 \pm 16.03, 85.23 \pm 14.2, P < 0.01)$. Conclusions Results suggest greater impairment in adaptive functioning and emotional disorders. For high-functioning children with autism spectrum disorder, potential positive development played significant roles in rehabilitation, to achieve and maintain the best level of intervention. the severity of the disorder and social support coping strategies were related with Life self-care ability and adaptation, coping with Intelligent obstacle seriously. Physicians are encouraged to evaluate for early treatment in the overall care plan.

Key words: children with autism spectrum disorder ; quality of life ; PedsQL4.0; evaluation

Biography:

Zhenhuan LIU professor of pediatrics, Pediatric acupuncturist Ph.D. tutor. He has been engaged in pediatric clinical and child rehabilitation for 40 years. Led the rehabilitation team to treat more than 40,000 cases of children with intellectual disability, cerebral palsy and autism from China and more than 20 countries, More than 26800 childrens deformity returned to school and society and became self-sufficient. The rehabilitation effect ranks the international advanced level. Vice-chairman of Rehabilitation professional committee children with cerebral palsy, World Federation of Chinese Medicine Societies. Visiting Professor of Chinese University of Hong Kong in recent 10 years. He is most famous pediatric neurological and rehabilitation specialists in integrated traditional Chinese and Western medicine in China. He has edited 10 books. He has published 268 papers in international and Chinese medical journals.



Neha Anilkumar Khadke

Dr. VVPF's medical college and hospital, India

Awareness of Pre-Hypertension and Hypertension in Adolescent Population among Paediatricians

Blood pressure elevation is a vital sign among children and adolescents than previously thought. The prevalence of hypertension in adolescents far exceeds the numbers who are diagnosed; studies done so far, have found that 75% or more goes undiagnosed. Documentation of elevated Blood Pressure readings at three or more well child visits has been found to greatly improve the chances of a correct diagnosis. Paediatrics hypertension may be a risk factor for adult cardiovascular disease making early detection important. The prevalence of Paediatrics essential hypertension is rising due to the increased prevalence of obesity. Guidelines for the screening for and diagnosis, evaluation, and management of hypertension in children have been available for 40 years. Unfortunately, clinicians repeatedly fail to acknowledge the problem and therefore majority of hypertensive children remain undiagnosed. Several reasons for this are documented: including lack of knowledge of the problem and the complexity of blood pressure standard readings among children. This study provides key insights into the barriers to diagnosis and management of Paediatrics hypertension in specifically knowledge gaps through medical education and training on essential hypertension in children.

Biography:

Dr. Neha Anilkumar Khadke, born in 1997, is an emerging figure in pediatrics and research. A Junior Resident in Pediatrics at DVVPF, Ahmednagar, she has published six case reports in Scopus and PubMed indexed journals. Neha has received numerous distinctions, including the Dr. Arvikar's Excellence Award. She is a life member of several medical associations and has completed various certification courses. Outside her professional life, Neha enjoys reading, traveling, yoga, and meditation. Fluent in three languages, she excels in extracurricular activities and community services, embodying scientific rigor and compassionate patient care.



Sindhu

Gurugobind Indraprasta University, India

Presepsin Scd-14 Can Be Used To Predict Positive Blood Culture In Children With Clinical Sepsis

INTRODUCTION: SEPSIS and Septic shock accounts for major cause of mortality and morbidity in children. Blood culture is the gold standard investigation for diagnosis of sepsis. As blood culture reports are time consuming, initiation of antibiotics cannot be withheld waiting for the report, and initiation of antibiotics without proper diagnosis based on laboratory report can be inappropriate. Several studies have shown that presepsin sCD-14 can be used as a biomarker in detection of sepsis, but studies on presepsin as a predictor of blood culture has not been established.

OBJECTIVE: To compare the level of presepsin(scd14) of blood culture positive with that of negative patients.

METHODS: The Cross-sectional observational study was conducted in the Paediatric Intensive Care Unit, Department of Paediatrics, Atal Bihari Vajpayee Institute of Medical Sciences & Dr. Ram

Manohar Lohia Hospital, New Delhi from January 2021 to 2022. Eighty children between 1 month to 18 years with clinical sepsis were included, and those with renal impairment were excluded. Within 24 hours of PICU admission 5ml blood sample for Presepsin(sCD14) collected and stored and 5ml for blood culture was collected in culture bottles. Blood culture reports were followed up.

RESULTS: Serum Presepsin(sCD14) (ng/mL) was the significant predictor of positive blood culture at cut off point of >1650 with area under curve of 0.782 for correctly predicting positive blood culture. that the patients who had positive blood culture, 80.95% of patients had Serum Presepsin(sCD14)(ng/mL) >1650. If Serum Presepsin(sCD14)(ng/mL) >1650, then there was 77.30% probability of positive blood culture and if Serum Presepsin(sCD14)(ng/mL) ≤1650, then 77.80% chances of negative blood culture. Among patients who had negative blood culture, 73.68% of patients had Serum Presepsin(sCD14)(ng/mL) ≤1650.

CONCLUSION: Presepsin(sCD14) levels were higher in blood culture positive children as compared to blood culture negative children. Presepsin(sCD14) levels can be used as a predictor of positive blood culture with a cut off of 1650ng/dl, with good sensitivity and specificity.

Biography:

Dr. Sindhushree Srinivas MBBS, MD, DNB pediatrics. Pursued her MD in Dr ram Manohar Lohia hospital, New Delhi. Clinical accolades - She is a University topper in MD pediatrics. She is Currently a senior resident in Sagar hospital, Bangalore. She has done her research work in critical care pediatrics for a period of one year. Her research paper is on a novel biomarker called presepsin in predicting positive blood culture in children admitted with clinical sepsis.



Dipali Annasaheb Shirsath

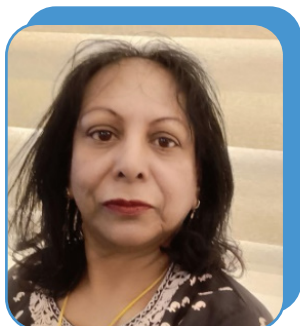
Maharashtra University Of Health Sciences, Nashik, India

Homoeopathic medicines are effective in cases of nocturnal enuresis in 6 to 14 yrs children

Nocturnal enuresis is a widespread and distressing condition that can have a deep impact on the child's behavior and on their emotional and social life. It also becomes stressful for the parents. The subjects for this study were taken from college and hospital OPD/IPD and camps. Subjects of 6-14 yrs age groups of uncomplicated NE, irrespective of their sex were included in the study. Approximately 30 cases were selected by simple random sampling technique which are divided in two equal groups i.e. Group A and Group B. Both the groups comprised 15 cases each. Group A cases was match with the Group B cases. Group A was receiving Homoeopathic remedies. Group B was receiving Placebo. The drugs were selected on the basis of mental and physical general symptoms, considering the underlying miasm and also constitution of the subject. Routine blood and urine examination and specially prepared questionnaires were the main parameters to confirm the diagnosis and to assess the response to treatment. Results: In the present out of 30 patients taken up for study, 14 cases recovered totally, 13 did not improve and 3 improved. The most commonly indicated constitutional drugs were Arsenic album, Belladonna, Calcarea carb., Calcarea phos., China, Cina, Kreosote, and Natrum Mur. The miasmatic basis of nocturnal enuresis in this study was as follows: Psoric – 09 cases, Sycotic - 04 cases, Syphilitic-05 and Tubercular-12 cases. The results of the study were highly satisfying and the Role of Homoeopathic medicines in the treatment of Nocturnal Enuresis have been very effective.

Biography:

Dr. Dipali Shirsath has completed her MD at the age of 27 years from Maharashtra University of Health Sciences, Nashik, India. She is pursuing PhD at Guru Mishri Homoeopathic Medical College, Jalna, India.



Grace Lalana Christopher
New Gen Parenting, India

Lalana Newborn Resuscitation

Newborn resuscitation is unique in that fetal fluid in the lungs needs to be cleared before gaseous exchange. The best and only safe resuscitation of hypoxic/asphyxiated newborns transiting from fetal fluid filled lungs to well aerated neonatal lungs is by sustained nasal oxygen inflation as opposed to Intermittent Positive Pressure Ventilation with onset of rhythmic respiration, increase heart rate, as a low heart rate indicates vagal induced bradycardia in response to perinatal asphyxia, triggering large reduction in Pulmonary Vascular Resistance (PVR), facilitating a series of cardiovascular changes essential for survival after birth. All newborns soon after birth are classified by Pulse oximetry score zero to +5 and further graded I-V based on SpO₂ pattern of respiration, rate/min and heart rate (bpm). Lalana Newborn Resuscitation (LNR) according to Protocol I and II by sustained nasal oxygen inflation in term and preterm <32 weeks gestation <1250g birthweight is proven both scientifically and physiologically to initiate rhythmic respiration with smooth transition from fetal to neonatal cardio-respiratory adaptations

Incidence of birth asphyxia was 21.4%, all 178 hypoxic/asphyxiated newly borns Graded I – V within 20 – 60 seconds of birth were successfully resuscitated by sustained nasal inflatory, oxygen flow at rate of 4 -15 Litres/minute directed to baby's nostrils through a wide bore tube for up to 1 to 3 minutes, initiating rhythmic breathing, and respiratory rate 30 – 60/min, heart rate 120 – 160 beats per minute (bpm) and, SpO₂ >96% monitored continuously by Pulse Oximeter. The peak gestation Asian South Indian newborn is 38.2 weeks gestation. New perinatal strategy for ethnic Asians with peak delivery at 38 weeks gestation requires implementation of ethnic Asian Due Date (ADD) for delivery being 36 +6 weeks gestation for wellbeing of Asian foetuses and newborns

Keywords: Lalana Newborn Resuscitation (LNR); Continuous Positive Pressure Ventilation (CPPV); Sustained Nasal Oxygen Inflation; Pulse Oximetry Score; Grade I to V; Perinatal strategy Asian Due Date (ADD).



Mary Anbarasi Johnson

Professor and Head, Pediatric Nursing Department, College of Nursing, CMC
Vellore, India

Smart Pediatric Monitoring Devices

Smart pediatric monitoring devices play a crucial role in healthcare by providing real-time data and insights to parents, caregivers, and healthcare professionals. These devices are designed to monitor various aspects of a child's health and well-being, offering convenience, accuracy, and early detection of potential issues. Here are some types of smart pediatric monitoring devices:

Smart Thermometers: Features: These thermometers connect to smartphones or tablets via Bluetooth or Wi-Fi, allowing parents to track their child's temperature over time. Benefits: Real-time temperature monitoring, automatic fever alerts, and historical data for better diagnosis.

Smart Baby Monitors: Features: High-tech baby monitors offer features like video streaming, temperature monitoring, sound detection, and even breathing monitoring. Benefits: Parents can keep an eye on their baby remotely, receive alerts for changes in temperature or unusual sounds, and track sleep patterns.

Smart Wearables for Babies: Features: These devices, such as smart socks or onesies, can monitor a baby's vital signs, including heart rate, oxygen levels, and sleep patterns. Benefits: Early detection of potential health issues, peace of mind for parents, and continuous monitoring without disturbing the baby.

Smart Baby Scale: Features: Connected scales can track a baby's weight gain over time, providing valuable data for pediatricians and parents. Benefits: Early detection of growth issues, easy tracking of feeding and growth patterns, and automatic recording of weight data.

Smart Inhalers: Features: Designed for children with respiratory conditions like asthma, smart inhalers track medication usage and provide reminders for doses. Benefits: Improved medication adherence, tracking of asthma triggers, and data sharing with healthcare providers for better management.

Smart Health Apps: Features: Mobile applications that allow parents to track various aspects of their child's health, including feeding schedules, diaper changes, and vaccination records. Benefits: Centralized health information, timely reminders for vaccinations, and the ability to share data with healthcare professionals.

Smart Toothbrushes: Features: These devices encourage good oral hygiene habits by monitoring brushing duration, frequency, and technique. Benefits: Promotes oral health from an early age, educates children on proper brushing habits, and provides parents with insights into their child's dental care.

Smart Medication Dispensers: Features: Automated dispensers that ensure the correct dosage of medication is administered at the right time. Benefits: Helps parents manage medication schedules, reduces the risk of dosage errors, and provides alerts for missed doses.

Smart Pacifiers: Features: Pacifiers with built-in temperature sensors or other monitoring capabilities. Benefits: Monitors a baby's temperature while soothing them, providing parents with an additional tool for fever detection.

Smart Nutrition Trackers: Features: Devices that track a child's nutritional intake and provide insights into their dietary habits. Benefits: Helps parents ensure their child is getting adequate nutrition, tracks eating patterns, and provides suggestions for a balanced diet.

While these devices offer valuable information, it's important for parents and caregivers to use them as supplements to professional medical care. Regular check-ups with healthcare providers remain essential for a child's overall well-being. Additionally, ensuring the security and privacy of the data collected by these devices is crucial. Always consult with healthcare professionals before making any medical decisions based on the information provided by smart pediatric monitoring devices.



Tatyana Itova

University Hospital Medica Ruse Ltd., Ruse, Bulgaria, University of Ruse "Angel Kanchev", Ruse, Bulgaria

In support of breastfeeding

Introduction: The World Health Organization recommends encouraging exclusive breastfeeding that starts at birth and lasts at least until the age of 6th months. The health benefits of babies and mothers have been proven in many studies. The support of health professionals improves the duration of breastfeeding.

Objective: To evaluate the effect of including a breastfeeding consultant in the team serving the newborn and its mother.

Material and methods: Retrospective study in 286 full-term newborns (NB) and their mothers who were patients of the Department of Neonatology at the University Hospital Medica Ruse Ltd. and were followed during the neonatal period. The children were targeted in two groups: Group A – 135 NBs, for whom routine care was cared for and Group B – 151 NBs, who were also assisted by a breastfeeding consultant during the first month.

Results: The two groups of children were comparable in birth weight, gestational age at birth, birth mechanism and sex distribution. We found a reliable difference in weight gain for the first postnatal month in the two groups. In Group B at the end of the first month 57% of children are exclusively breastfed. In Group A, this share is 40%. 74% of group B NB born vaginally were exclusively breastfed at one month of age. In contrast to group A, where this percentage is 43%.

Conclusion: The inclusion of a breastfeeding consultant in the team that cares for NBs and their mothers contributes to an increase in the share of exclusively breastfed children.

Biography:

Dr. Tatyana Itova is a specialist in Pediatrics and Neonatology, has a PhD in Medicine in the field of Pediatrics at the Medical University of Pleven, Bulgaria. She heads the Department of Neonatology at University Hospital Medica Ruse in Ruse, Bulgaria and is an assistant at University of Ruse "Angel Kanchev", Ruse Bulgaria.



Sara Al Khayat

University of Warmia and Mazury in Olsztyn Specialized Children Hospital in Olsztyn, Poland

The coexistence of Eosinophilic esophagitis and celiac disease in children. One center retrospective study

Objectives: Eosinophilic esophagitis (EoE) and celiac disease (CD) have increased in recent years. Both conditions impact the upper gastrointestinal system differently. EoE is a chronic immune-mediated and associated with allergic triggers, while CD involves autoimmunity and hypersensitivity to gluten. Despite these differences, initial diagnosis for both typically involves endoscopic examination. In recent years, diagnostic approaches for CD have advanced more than for EoE. Before introducing new guidelines from the European Society of Paediatric Gastroenterology, Hepatology, and Nutrition (ESPGHAN) in 2020, the diagnosis of CD relied on histopathology. While diagnosing CD now primarily relies on serological testing for immunoglobulin A antibody to tissue transglutaminase (tTG-IgA), the diagnostic approach of EoE remains the same.

Aim: To investigate the prevalence of the coexistence of EoE and CD in children.

Methods: This is a retrospective analysis of the histopathological examination of biopsies obtained during endoscopy of the upper gastrointestinal tract in pediatric patients treated in the Department of Pediatrics Gastroenterology and Nutrition between January 2019 and December 2022.

Results: A total of 1050 upper GI tract endoscopies were performed. EoE was diagnosed in 26 patients (20 males), CD in 96 patients (41 males), and CD and EoE coexisted in two patients.

In one case, EoE was first diagnosed, and then CD was proven. The second patient was initially diagnosed with CD based on symptoms and positive tTG-IgA. Subsequently, EoE features were found upon biopsy.

Discussion: Our study presented EoE in 2% of CD patients, which agrees with previous reports. The study emphasizes the significant role of endoscopic examination in diagnosing co-occurring CD and EoE.



Seyed Reza Khatibi

Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran

Gestational diabetes mellitus in association with macrosomia

Gestational diabetes mellitus in association with macrosomia: There are several controversies on relation between gestational diabetes mellitus (GDM) and occurrence of macrosomia. We aimed to estimate the relation between GDM and occurrence of macrosomia. We made a systematic review of national and international databases. Lists of relevant articles were checked to increase sensitivity of the search reference. Also, access to unpublished documents were accessed by negotiation with related individuals and research centers. These published epidemiological studies (cross-sectional, case-control and cohort studies) were used for comparisons to determine whether GDM was associated with macrosomia. Finally, the Mantel-Haenszel method and the fixed and random-effect models based on heterogeneity of the primary studies were used according to pool results and estimate the odds ratio of macrosomia in women with GDM. Of 1870 articles, thirty relevant articles were eligible for the current meta-analysis. Our findings showed that 335 of 2524 women with GDM had macrosomia while only 775 of 26592 women without GDM had macrosomia. Using random-effect model, the pooled odds ratio relation between GDM and occurrence of macrosomia was estimated as of 5.49 (95% CI: 4.27-7.04). Subgroup analysis showed no difference regarding different study designs and definitions of macrosomia. There was no evidence of publication bias based on the result of Egger's test ($\beta=0.1$, $P=0.70$). This meta-analysis shows that GDM is directly associated with the risk of macrosomia in the Iranian population. This confirms the findings of previous studies in the wider scientific literature.

Biography:

Seyed Reza Khatibi has completed his MD at the age of 25 from Iran University of Medical Sciences and then, MPH from Tehran University of Medical Sciences. He was graduated with a PhD in Epidemiology from Iran University of Medical Sciences a year ago. He is an assistant professor of epidemiology in Torbat Heydariyeh University of Medical Sciences, now. He has published more than 15 papers in reputed journals and is serving as an editorial board member of the Journal of Torbat Heydariyeh University of Medical and also, peer-reviews articles for that Journal.



Viktorija Arnite

Children's Clinical University Hospital, Riga, Latvia

Manifestation of interstitial lung disease and dermatitis in patient with severe combined immunodeficiency. A case report

Background: DCLRE1C gene mutation leads to Artemis deficiency, a severe form of combined immunodeficiency (SCID). Impaired DNA repair and block in early adaptive immunity maturation results in T-B-NK+ immunodeficiency associated with radiosensitivity. Recurrent infections early in life are the main characteristic of Artemis patients.

Case presentation: Born to a mother without a family history of genetic disorders, the boy was initially healthy and was released from the hospital on his third day of life. At two months, the patient received the required BCG (bacillus Calmette-Guerin) vaccination. The patient was taken to the hospital two weeks following vaccination with tachypnea, desaturation, pneumonia, dermatitis and diarrhea. Interstitial lung disease was discovered on a CT scan after the patient was admitted to the hospital. Considering the child's age and medical history, immunological and genetic testing performed: a genetic study has found the DCLRE1C gene associated with severe combined immunodeficiency. Soon after was diagnosed BCG associated generalized tuberculosis infection. The only life-saving and quality-of-life-improving therapy is hematopoietic stem cell (bone marrow) transplantation, which was performed at the age of 10 months. The patient's condition is stable during the post-transplantation phase, the child receives therapy with immunosuppressive medication, bacterial and fungal infection episodes persist.

Conclusion: The clinical case illustrates the importance of providing the patient with multidisciplinary treatment and discusses possible symptoms of severe combined immunodeficiency during the first-year of life. The patient receives a wide variety of targeted and preventive therapy, which is important for medical personnel in order to provide and prevent its problems.

Biography:

Viktorija Arnite is pediatric allergist / pulmonologist, works in Children's Clinical University Hospital, Riga, Latvia, specializes in diagnosing and treating allergies and respiratory conditions in children, especially rare lung diseases, also rare genetic syndromes associated with skin and lung diseases.



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Epigenetic Coaching Company, UK

The importance of using nutrigenetic-based supplements in childhood

Environmental conditions and nutritional preferences are an invitation to many diseases. The nutrition style and environmental conditions of the parents before becoming parents affect the baby's early life and later ages phenotypically through epigenetic effects such as DNA methylation and histone modifications. The vital framework influences gene expression and is defined by epigenetic regulations. Genetic polymorphisms are important in the nutrigenetic approach, as well as personalized nutrition and nutritional supplement preferences. Supplements needed in childhood can be determined according to genetic background and polymorphisms. Genes involved in the mechanisms have variable expression and metabolism with vitamin and mineral effects. For example, a polymorphism in the GPX1 gene (T allele) is associated with low selenium levels, which are associated with many diseases, so if a child has this allele a diet rich in selenium and the addition of supplements are therapeutic. There will be an approach. Vitamin A must be metabolized from β -carotene to the active form retinol. If the child has a polymorphism in the BCMO1 gene, which encodes the enzyme that provides this conversion, the conversion efficiency will decrease and the approach to the child will be to recommend that the child receive adequate levels of retinol. Similarly, it can be predicted how much vitamins and minerals should be taken according to the child's genetic background. Nutrigenetic tests and approaches are predictive and preventive.

Biography:

2012-2016 I studied Molecular Biology and Genetics. Afterwards, I did my master's degree in Medical Biology. 2019-2022 I studied Nutrition and Dietetics. I work as a biologist. Molecular genetics, Epigenetics and Nutrigenetics are my scientific interests. I am involved in the research and development processes of personalised reports. I carried out the 'Tübitak 2209A Project 'Production of Deoxynucleoside triphosphates (dNTP) using Deoxynucleoside monophosphates in the laboratory (environmentally friendly, economical and bioprocess)' and 'Investigation of the Relationship Between Idiopathic Male Infertility and Seminal Plasma HSP90-ALFA Protein Level' projects. 8th Hippocrates Congress 'The Relationship of Nutrition with Immune System and Some Diseases, 2nd International Epigenetic Congress -Creating panels for the personalised clinical utilisation of nutrigenetics tests (epigenetic nutrition and supplement use based on nutrigenetic testing) -Effect of quercetin on some detoxification genes -Evaluation of the effect of resveratrol's role in epigenetic mechanisms on health -Effects of sulforaphane on epigenetic mechanisms -Effects of coffee and coffee components on gut microbiota modulation. Reviews in Medical and Health Science Methodology, Research and Practice. Chapter XIV, The Relationship of Nutrition With the Immune System and some Diseases(195-214). My book chapter in Livre De Lyon 2022. The Importance of Nutrigenetics and Microbiota in Personalized Medicine: From Phenotype to Genotype. Cureus. 2024 May 28;16(5):e61256.



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Methylation Cycle and Genetic Variants in Pregnancy

The health and continuation of life starting in the womb greatly depend on the mother's nutrition and environmental factors. Unfavorable environmental conditions and inadequate nutrition during this period can impact the child's health later on. The Barker hypothesis, or Developmental Origins of Health and Disease (DOHaD), explains the relationship between maternal nutrition during pregnancy and the child's growth, development, and future chronic diseases. According to this hypothesis, inadequate nutrition of the fetus can lead to permanent physiological and structural changes, increasing the risk of disease later in life. This process is explained through epigenetic mechanisms, with DNA methylation being particularly important. Folate is an important vitamin during pregnancy because it plays a role in DNA methylation and can help reduce the occurrence of neural tube defects. Nutrients such as methionine, folate, choline, betaine, vitamin B12, B2, and B6 are important as methyl donors or cofactors for epigenetic modifications. Adequate intake of these nutrients is critical for fetal programming and healthy development. Genetic variants in the methylation cycle can alter the need for these nutrients.

In conclusion, understanding how our experiences starting in the womb affect our epigenome emphasizes the importance of nutrition and environmental factors for a healthy life. Therefore, adopting a healthy diet and lifestyle during pregnancy is of critical importance for the health of future generations.

Biography:

I graduated from the Nutrition and Dietetics department in June of 2023 with a High Honors. When I was studying on my education at university, I joined a certificate programme called Epigenetic Coaching. Then I started to study with Epigenetic Coaching team. I really interested in Epigenetics and Nutrigenetics so as a future plan, I plan on getting my Master's Degree in in the field of this area. I am one of the trainers in Epigenetic Coaching team. I participate in training to explain "methylation cycles" and "nutrigenetics" topics. I participate in the research and development processes of personalized reports. I also work as a dietitian to provide counseling as an epigenetic coaches in the team. I am one of the members of Epigenetics and Nutrigenetics Organization. We organized 2nd International Congress of Epigenetics on September, 2023. I had oral presentation about "Evaluation of the effect of resveratrol's role in epigenetic mechanisms on health".



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Parents' perception of physical activity importance in children's Health

Background: Childhood is a critical time for developing regular physical activity habits that can persist throughout life. The question was: "What is the parents' perception of the importance of physical activity for the child's health?"

Objectives: To analyze in scientific production parents' perception of the importance of physical activity for children's health; identify parents' knowledge about the importance of physical activity for children's health, times and types of physical activity they provide to children and training programs for parents on children's physical activity.

Methodology: Integrative Literature Review carried out in March-June/2023, with research for articles on EBSCOhost and Google Scholar, which included parents of healthy children aged 0-18, regardless of the research methodology they followed, published from 2018-2023, in Portuguese, English, Spanish, open access, free, full text and with answer to the question and objectives. Articles from parents of children with chronic illness were excluded.

Results: Five articles were included. Parents are unaware of recommendations on physical activity, although they attribute importance to it. Barriers and lack of knowledge about promoting strategies are reasons for not providing moments of physical activity to their children. Conclusion: It is necessary to create parental training programs to promote physical activity that nurses can implement.

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