

# International Conference on Gynecology, Women's Health

23-24, October 2023 (25th Virtual)

Tokyo, Japan



Hosted By:

**Elena John | Program Manager**

Gynecology Conference 2023

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# Scientific Program

Day 01 | October 23, 2023 | Hall: Matsu | Tokyo, Japan

08:30-09:30 Registrations

09:30-09:45 Opening Ceremony

## Keynote Forum

09:45-10:20 **Title: Novel holistic approach to conception- It might truly be all in your head!**  
Jennifer Coady Murphy, A Healing Guide To Having A Baby, Ireland

10:20-10:55 **Title: UAE Women's knowledge and attitudes towards physical activity during pregnancy**  
Sharifa Alblooshi, Zayed University, United Arab Emirates

## Refreshments Break @ 10:55-11:10 | Foyer

11:10-11:45 **Title: The role of histone mutations in human disease**  
Kui Ming Chan, City University of Hong Kong, Hong Kong

11:45-12:25 **Title: p38 $\gamma$  MAPK inflammatory and metabolic signaling in GI cancers**  
Guan Chen, Medical College of Wisconsin, USA

## Speaker Session

**Session Chair: Jennifer Coady Murphy, A Healing Guide To Having A Baby, Ireland**

12:25-12:50 **Title: Primary Abdominal ectopic pregnancy: Diagnosis and management**  
Fehmida Qur, Princess Royal Maternity Hospital, UK

## Lunch and Networking Break @ 12:50-13:30 | Terrace Restaurant

13:30-13:55 **Title: The impact of exercise relate miRNAs regulation change for cancer prevention between exercise and non-exercise in Rheumatoid Arthritis condition**  
Vimolmas Tansathitaya, Mahidol University, Thailand

13:55-14:20 **Title: Outcomes of Patients with Metastatic Non-Small Cell Lung Cancer and No Disease Progression Who Continue Immunotherapy**  
Blake McKinley, Mayo Clinic, USA

14:20-14:45 **Title: Stromal CLIC4 in colorectal cancer: A digital and spatial observational study in primaries and metastases**  
Declan Sculthorpe, University of Nottingham, UK

14:45-15:10 **Title: The Association between Longitudinal Changes in Depressive Symptoms and Cognitive Decline among Middle-Aged and Older Chinese Adults**  
Na Zhang, Southeast University, China

15:10-15:35 **Title: TMEM200A is a potential prognostic biomarker and correlated with immune infiltrates in gastric cancer**  
Fujin Fang, Southeast University, China

15:35-16:00 **Title: Molecular profiling of follicular fluid miRNAs in young women affected by Hodgkin Lymphoma**  
Angela Caponnetto, University of Catania, Italy

16:00-16:25 **Title: Management of Infertility in Low AMH Females with Ayurvedic Medicine – A Clinical Study**  
Truptibahen Barot, Shachyartham, India

## Refreshments Break @ 16:25-16:45 @ Foyer

Poster Presentations @ 16:45-17:15

- P0101** **Title: Transcriptomic analysis of esophageal tissues and potential biomarkers for differential diagnostics of Barrett's mucosa and esophageal adenocarcinoma**  
**Petra Borilova Linhartova**, Recetox, Masaryk University, Czech Republic
- P0102** **Title: Induction of Labour- An Audit Evaluating Outcomes Following Second Round of Prostin Gel**  
**Fehmida Qur**, Princess Royal Maternity Hospital, UK

Panel Discussions | Day 01 End

Day 02 | October 24, 2023 | Hall: Matsu | Tokyo, Japan

09:30-09:45 Introduction

Keynote Forum

- 09:45-10:20** **Title: Apolipoprotein(a)/Lipoprotein(a)-Induced Oxidative-Inflammatory  $\alpha$ 7-nAChR/p38 MAPK/IL-6/RhoA-GTP signaling axis and M1 Macrophage Polarization modulate inflammation-associated development of coronary artery spasm**  
**Ming-Yow Hung**, Shuang Ho Hospital, Taipei Medical University, Taiwan
- 10:20-10:55** **Title: The effect of educational intervention based on PRECEDE Model to reduce the anxiety of nurses in the hospitals of Tehran University of Medical Sciences**  
**Davoud Shojaeizadeh**, Islamic Azad University/Sciences and Research Branch, Iran

Refreshments Break @ 10:55-11:15 | Foyer

Speaker Session

**Session Chair: Ming-Yow Hung**, Shuang Ho Hospital, Taipei Medical University, Taiwan

- 11:15-11:40** **Title: Longitudinal Association between Muscle Strength and Depression in Middle-Aged and Older Adults: A 7-Year Prospective Cohort Study in China**  
**Min Bao**, Southeast University, China
- 11:40-12:05** **Title: A Comprehensive Pilot Study on the User Experience of Professional Caregivers Utilizing a Screen-Based Social Robot in Dementia Care**  
**Dorothy Bai**, Taipei Medical University, Taiwan
- 12:05-12:30** **Title: Clinical Case of Complex Treatment of Deep Sternal Wound Infection after Coronary Bypass Surgery In A Patient With Diabetes Mellitus**  
**Giurikhan Magomedova**, Federal State Budgetary Scientific Institution "Petrovsky National Research Centre Of Surgery", Russia
- 12:30-12:55** **Title: Transformative Learning Theory and Digitalization (Tltd) To Improve Nurse Competence in Hospital**  
**Domingos Soares**, Instituto Nacional de Saude Publica Timor-Leste (INSP-TL) · Research and Training Department, East Timer

Lunch and Networking Break @ 12:55-13:35 | Terrace Restaurant

- 13:35-13:55** **Title: Randomized, Double-Blind, Controlled Trial of Monolaurin Ointment versus Mupirocin Ointment of Bacterial Skin Infections among Pediatric Patients Ages 5 to 18 in a Community-Based Setting.**  
**Wenzyl Jean Etor**, Victoriano Luna Medical Center, Philippines
- 13:55-14:15** **Title: Association Between C-reactive Protein-To-Albumin Ratio And 6-month Neurological Outcome In In-Hospital Cardiac Arrest Patients Who Underwent targeted temperature management**  
**Donghun Lee**, Chonnam National University Medical School, South Korea
- 14:15-14:35** **Title: The Association between Troponin-I Clearance after the Return of Spontaneous Circulation and outcomes in Out-Of-Hospital Cardiac Arrest Patients**  
**Wan Young Heo**, Chonnam National University Hospital, South Korea

Panel Discussions | Day 02 End | Closing Ceremony

09:00-09:30 Registrations

Keynote Forum

- 09:30-09:55 **Title: Conservative management endometrioma in the context of fertility**  
Alev Ozer, Sutcu Imam University, Turkey
- 09:55-10:20 **Title: Does NACT reduce the overall burden in advanced Epithelial Ovarian Cancer, despite of increasing CRS rate?**  
M D Ray, AllMS, India
- 10:20-10:45 **Title: The Methodological Approach to Fetal Heart Evaluation**  
Graziano Clerici, PSUOG, Italy

Refreshments Break @ 10:45-11:00

Speaker Session

Session Chair:

- 11:00-11:20 **Title: Cervical cancer and pregnancy: management tactics based on retrospective analysis, literature data, own experience**  
Anastasia Shumeykina, Meshalkin National Medical Research Center, Russia
- 11:20-11:30 **Title: Strangulated Caecum, Appendix, and Terminal Ileum in Paraumbilical Hernia: An Unusual Presentation in the Elderly**  
Reda Harby Marzouk Mithany, Kingston Hospital, UK
- 11:30-11:40 **Title: Complex Oncological Operations Performed at a Surgical Ward in a Public Sector Hospital in Pakistan**  
Reda Harby Marzouk Mithany, Kingston Hospital, UK
- 11:40-11:50 **Title: Strangulated Caecum, Appendix, and Terminal Ileum in Paraumbilical Hernia: An Unusual Presentation in the Elderly**  
Muhammad Hasaan Shahid, Kingston Hospital, UK
- 11:50-12:00 **Title: Complex Oncological Operations Performed at a Surgical Ward in a Public Sector Hospital in Pakistan**  
Muhammad Hasaan Shahid, Kingston Hospital, UK
- 12:00-12:20 **Title: Overexpression of miR-4286 in extracellular vesicles of bronchoalveolar lavage fluid is a potential diagnostic marker for malignant pulmonary nodules**  
Jing Huang, Southeast University, China
- 12:20-12:40 **Title: Maternal risk factors for low birthweight and macrosomia: A cross-sectional study in Northern Region, Ghana**  
Silas Adjei-Gyamfi, Ghana Health Service, Ghana

Lunch and Networking Break @ 12:40-12:50

- 12:50-13:10 **Title: Risk factors for selected pregnancy complications**  
Wioletta Wujcicka, Polish Mother's Memorial Hospital-Research Institute, Lodz, Poland
- 13:10-13:30 **Title: Inflammasome Regarding Newer Strategies for Treatment of Reproductive Conditions Possessing Greater Risk: A Systematic Review**  
Kulvinder Kaur, Dr KulvinderKaur Centre For Human Reproduction, India
- 13:30-13:50 **Title: Intersectional Inequalities and Maternal Anemia in India: Evidence from National Family Health Survey -5**  
Jayalakshmi Rajeev, Central University of Kerala, India
- 13:50-14:10 **Title: Blueprint to Success: Quality Assurance Vs. Congenital Heart Disease Lashell Jones, RDMS RDCS**  
Lashell Jones, MFAMA, USA
- 14:10-14:30 **Title: CAR-T cell therapy**  
Ziad Alosaimi, UmmAl-Qura, KSA
- 14:30-14:50 **Title: Experience on prevention of cervical cancer in Uruguay, USA**  
Marisa Fazzino, Ministry of Public Health (MSP), Uruguay

## Keynote Forum

- 14:50-15:15** **Title: Triple-negative Breast Cancer: Nutritional Herbs as Therapeutic Alternatives**  
**Nitin Telang**, Palindrome Liaisons Consultants, USA
- 15:15-15:40** **Title: Revisiting the treatment of anemia in the setting of chronic kidney disease, hematologic malignancies, and cancer**  
**Franco Musio**, Medical Consultation Group, USA

## Poster Session

- EP0101** **Title: Audit on Surveillance of Women at Risk of Preterm Labor**  
**Leyla Mahmudova**, Queen Alexandra Hospital Portsmouth NHS Trust, UK
- EP0102** **Title: Oncological journey in a navigation program: The patient's vision**  
**Sheron Tannara Vargas**, UFCSPA, Brazil

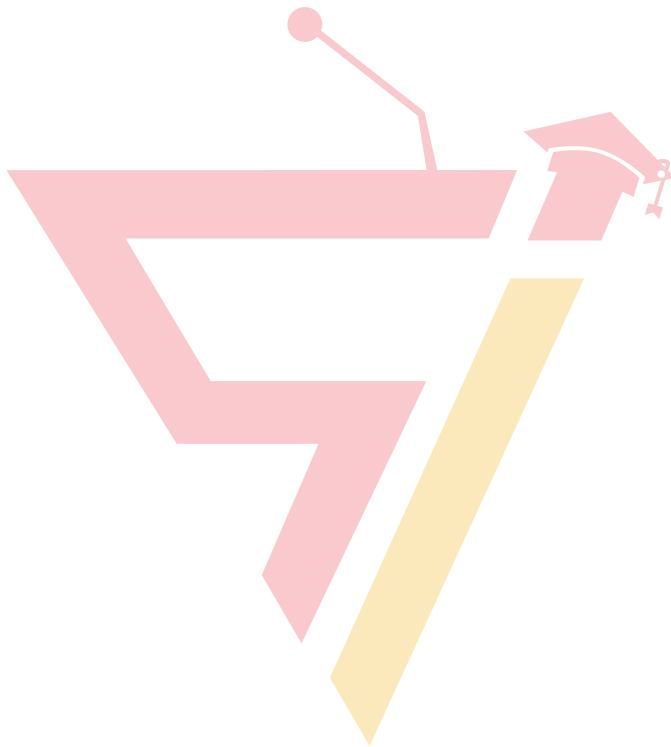
Panel Discussions | Day 03 End | Closing Ceremony

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**KEYNOTE  
SPEAKERS**  
Day 1



2nd Edition

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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## Jennifer Coady Murphy

A Healing Guide To Having A Baby, Ireland

### Biography

Jennifer Coady Murphy has helped thousands of women conceive and overcome an array of diagnosed conditions. She has guided them through safe, healthy, happy pregnancies and deliveries for the last 13 years with her proprietary, holistic approach to healing women and helping them conceive. She is the award-winning author of *A Healing Guide to Having a Baby: Infertility, Emotional Wounds and Taking Back Your Power*. Jennifer is based in Ireland.

### Novel Holistic Approach to Conception – It might truly be all in your head!

**Introduction:** Infertility is common, affecting approximately one in eight couples (Cox et al, 2022), and associated with high rates of stress, anxiety and de-

pression. It is unclear if pre-morbid mental health issues increase infertility risk, although recent evidence suggests that psychological intervention improves conception rates (Dube et al, 2023). Complementary therapies (CT) may reduce anxiety in sub fertile women (Nayak et al, 2022), it is showing great promise that CT leads to increased conception rates.

**Methods:** This is a description of a CT intervention for infertility. The proprietary intervention is a combination of reflex therapy, profound visualization techniques, meditation, and psychological discovery. A short case series will be presented to illustrate the interventional process involved.

**Results:** Of 1301 clients attending the clinic over a 13-year period, there have been 1226 conceptions and 1212 healthy live births (93.2%), including five sets of natural twins. Fourteen clients are currently pregnant. All births to date have been normal vaginal deliveries. Three cases will be discussed, each of whom had unsuccessfully been trying to conceive for 6 to 12 years with multiple rounds of invitro fertilization. Each of these clients had successful deliveries of healthy babies after less than a year of utilising this CT approach, including imagery use, visualization techniques, post graduate level reflexology and mental rehearsal.

**Conclusion:** This description of a reflex therapy-based CT approach to infertility has thusfar had a high live birth rate and shows promise as a novel approach to infertility. This technique is increasingly proving reliable.

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**Sharifa Alblooshi**

Zayed University, United Arab Emirates

**Biography**

Sharifa Alblooshi is an Assistant Professor of Public Health and Nutrition at Zayed University, UAE. She received her Ph.D. in Public Health from the UAE University- College of Medicine and Health Sciences in the UAE in 2017. She has around 20 years of leadership and 5 years of academic experience in Public Health and Nutrition in the UAE. Her research areas are mainly in Public Health and Nutrition: Vitamin D, Physical Activity, Diabetes Mellitus, and Obesity.

**UAE Women's Knowledge and Attitudes Towards Physical Activity during Pregnancy**

The benefits of being physically active during preg-

nancy are widely acknowledged. It is important for the prevention of chronic diseases and the promotion of good health for mothers and children. However, physical activity by women in the UAE is notoriously low and reduced further during pregnancy. The same can be said regarding research about the knowledge and understanding of the benefits and risks associated with exercise as a predictor of behavior. We aimed to assess knowledge and attitudes towards physical activity during pregnancy amongst Emirati women. A cross-sectional digital survey was designed to assess knowledge and attitudes and distributed to women, aged 18–40 years, using non-randomized, purposeful snowball sampling. A total of 1538 women were recruited. Most participants were aged 20–29 years (53.5%), were Emiratis (88.9%), and had no history of chronic disease (68.6%). The participants self-reported very low levels of PA (75.5%) and had a below-average level of knowledge overall ( $40.6 \pm 20$ ). Younger ages ( $p < 0.001$ ), lower educational levels ( $p = 0.004$ ), being employed ( $p = 0.014$ ), and having a history of chronic disease ( $p = 0.016$ ) were significantly associated with lower mean knowledge scores, while being married ( $p = 0.003$ ) was significantly associated with higher scores. The participants also exhibited a positive attitude towards physical activity during pregnancy by selecting answers that they supported it. To encourage physical activity, women living in the UAE could benefit from clear advice about safe physical activity during pregnancy.



**2nd Edition**

# **2nd Edition International Conference on Gynecology, Obstetrics & Women's Health**

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**Kui Ming Chan**

City University of Hong Kong, Hong Kong

**Biography**

K. M. CHAN graduated with BSc and received his PhD at the department of Biochemistry, the University of Hong Kong (HKU). He then moved to Mayo Clinic (Rochester MN, USA) for postdoctoral training and obtained the Edward C. Kendall Research Fellowship in Biochemistry before rejoining HKU as Research Assistant Professor in June 2013. In February 2015 he joined the Department of Biomedical Sciences (BMS), City University of Hong Kong as a tenure-track Assistant Professor and was promoted to Associate Professor in 2021. Chan is interested in understanding the role of epigenetics in regulating gene expression under physiological and pathological conditions. His group is currently focusing on 1) identifying new cancer driving histone mutations and developing therapeutics for these diseases using different animal models [1,2,3] and 2) the role of novel protein factors and RNA binding proteins in X Chromosome inactivation.

**The role of histone mutations in human disease**

Histones are small nuclear proteins essential for DNA packaging and epigenetic gene regulation. Recent

studies on the various cancer associated-histone mutations have revealed the significance of oncohistones in driving different types of cancers. Others and work done by us have previously revealed the identification and characterization of the first oncogenic mutations in genes encode histone H3 (H3K27-to-M and H3G34-to-V/R in diffuse intrinsic pontine gliomas "DIPG" and pediatric glioblastomas "GBM"). The H3K27M mutation occurs in the N-terminal tail domain and affect gene expression via inhibiting PRC2/EZH2 activity and modulating histone post-translational modifications.

In addition to the onco-mutations found in histone H3, we have recently identified three oncogenic mutations in genes encode histone H2B in pancreatic ductal adenocarcinoma "PDAC" and breast cancer. The H2B-G53D mutation weakens the interaction between the histone octamer and the nucleosomal DNA. Through analyzing the ATAC-seq, PRO-seq, CUT&RUN and RNA-seq on the CRISPR-Cas9 generated H2BG53D knockin PDAC cells, our data demonstrated that the G53D mutant H2B elevated the transcription of genes involved in cancer properties including cell migration and the PI3K-Akt signaling pathway. Depletion of one of the target genes ANXA3 reduced the oncogenic properties in H2BG53D mutant cells, revealing the significance of the H2BG53D mutation in PDAC development. The H2BE76K mutation alters the interaction between Histone H2B and H4, destabilizes the nucleosomes and affects the expression of genes in multiple cancer pathways. The knockdown of one of the H2BE76K target genes, ADAM19, reduced the colony formation ability of the H2BE76K mutant breast cancer cells, indicating the importance of the H2BE76K mutation in breast cancer progression. In this meeting, I will present our ongoing work of the above two mutations and the current findings of the third H2B onco-mutation (H2BE113K) in breast and lung cancer development.

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## **Guan Chen**

Medical College of Wisconsin, USA

### **Biography**

Guan Chen, MD, PhD, Professor of Pharmacology, Medical College of Wisconsin, studies cancer signaling and targeted therapies. Specifically, Dr. Chen has focused on study p38 MAPK signaling and Ras oncogenesis as well as p38γ phosphatase PTPH1 and nuclear receptors. Dr. Chen's work has been funded by NIH, VA, and DOD for 22 years and has yielded more than 60 peer-reviewed publications.

### **p38 γ MAPK inflammatory and metabolic signaling in GI cancers**

p38γ MAPK (also called ERK6 or SAPK3) is a family member of stress-activated kinases and has common and specific roles as compared to other p38 proteins in signal transduction. Recent studies showed that in addition to inflammation, p38γ metabolic signaling is involved in pathogenesis of GI cancer, indicating its potential as a therapeutic target. This effect may derive from epithelial p38γ which is activated by inflammation and oncogenic KRAS. Activated p38γ then increases expression of pro-inflammatory cytokines and phosphorylates key proliferative proteins involved in metabolism and proliferative response. Conditional knockout of p38γ from epithelial cells reduces inflammation-induced colon cancer and KRAS-induced pancreatic cancer. These results can be reproduced by systemic application of p38γ inhibitor pirfenidone (PFD). Thus, targeting p38γ may be a novel approach against GI cancer.

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**SPEAKERS**  
Day 1

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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## Fehmida Qur

Princess Royal Maternity Hospital, UK

### Biography

Fehmida Qur, Obstetrics and Gynaecology specialist. Fehmida Qur is a renowned Obstetrics and Gynaecology specialist dedicated to providing exceptional care to women. With a commitment to up-to-date specialist services in Obstetrics and Gynaecology to excel in the care of patients, Qur aims to contribute to medical care for society.

Qur completed her Bachelor of Medicine and Bachelor of Surgery (MBBS) degree from Mumbai University. She completed her residency in Obstetrics and Gynaecology at Almana General Hospital in Saudi Arabia, gaining clinical expertise and mastering the intricacies of women's health.

Inspired by her fascination with the complexity of women's health and disease, she pursued a master's in Research degree from the prestigious University of Manchester in the UK. Qur is an active member of the Royal College of Obstetricians and Gynaecologists, UK (MRCOG) and the Royal College of Obstetricians and Gynaecologists, Ireland (MRCP I).

### Primary Abdominal Ectopic Pregnancy: Diagnosis and Management

**Introduction:** Abdominal pregnancy is an extremely rare type of ectopic pregnancy, representing 1% of all

ectopic pregnancies. It is potentially life-threatening, and the mortality risk is higher than for uncomplicated ectopic pregnancies. Symptoms are non-specific and usually resemble the other types of ectopic pregnancies. A high index of suspicion is essential for diagnosing and its timely management.

**Presentation of case:** We report a primary abdominal ectopic pregnancy in a 36-year-old primigravidae at seven weeks gestation. This patient presented with a sudden onset of severe lower abdominal pain with shooting shoulder tip pain and haemorrhagic shock due to the spontaneous separation of the gestational sac from the implantation site. She had persistent hypotension despite fluid resuscitation and significant free fluid seen on ultrasound.

Laparoscopic exploration revealed a haemoperitoneum of 1.5 L with evident clots. Bilateral fallopian tubes and ovaries were healthy. An ensac fetus of 6-7 weeks was seen adherent to the utero vesical fold, separate from fallopian tubes, with active bleeding through extrusion of placental tissues. The procedure was converted to Laparotomy. Ectopic and placental tissues were removed digitally with ease. The oozing uterovesical fold at the implantation site was repaired. Further bladder inspection by a urologist found an intact bladder. The patient was transfused with blood and discharged satisfactorily on 3rd postoperative day.

**Discussion:** The most common treatment option for abdominal ectopic pregnancy is surgery. Laparotomy is preferred to laparoscopic surgery in cases of intractable haemorrhage.

**Conclusion:** An early diagnosis provides a better prognosis. In most cases of abdominal ectopic pregnancy, management recommendations focus on timely intervention and sound surgical examination to determine the extent of placental attachment to the surrounding tissues. By creating an excellent clinical judgment regarding whether to leave the placenta in situ or remove it, the goal is to avoid massive haemorrhage and organ damage.

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**Vimolmas Tansathitaya**

Mahidol University, Thailand

**Biography**

His current role, he serve as a lecturer at Thailand's Mahidol University's College of Sports Science and Technology. His primary research interests concern miRNA and chronic illnesses, as well as fitness. He is also interested in studies on the microbiome in chronic illnesses and exercise, which was presented in an article in 2022. One of his significant study topics concentrated on illnesses and their effects on birth abnormalities acquired by the second and third generations of descendants. MiRNAs and target genes were employed as biomarkers in the research. Tinarathpatra Co Ltd., Thai Health Promotion Foundation, and Mahidol University have all provided his with financial support to study the BDNF gene expressions in amphetamine drug users as part of my ongoing research. This research focused on BDNF gene expression, single nucleotide polymorphism(SNP), mRNAs, miRNAs, and the microbiota to modify miRNAs and target gene expression. After He received his Ph.D. in Health Promotion and Human Services from the University of Cincinnati in the United States, He was inspired to act on another idea. One of his initial thoughts was to look at how genotypes could potentially evolve as lifestyles shifted and how exercise could help mitigate diseases. Since then, He have been motivated to begin examining genetic causes by performing in-depth studies in epigenetics, with a focus on miRNAs and target genes as major indicators.

**The impact of exercise relate miRNAs regulation change for cancer prevention between exercise and non-exercise in Rheumatoid Arthritis condition**

Rheumatoid arthritis (RA) is classified as an autoimmune inflammatory condition characterized by pain, swelling, and inflammation of the joints, along with stiffness which can reduce function and impair the overall quality of life. Rheumatoid arthritis initiated from chronic inflammatory disorder that can affect not only just the joints but it also damages a wide variety of body systems, including the skin, eyes, lungs, heart and blood vessels. Some patient cases in post-rheumatoid arthritis diagnosis develop cancer later. Moreover, a total of 138 cases of lung and prostate solid tumors were recorded within 12 months of RA diagnosis. Furthermore, those patients diagnosed with RA experienced cancer of greater severity than was the case for patients who did not have RA. Exercise may represent a novel means of mitigating the suffering of RA and cancer patients. A number of studies have sought to examine the application of exercise as a means of inhibiting tumorigenesis. Methods: The effects of exercise interventions on serum microRNAs were investigated in pristane-induced arthritis (PIA) rat models. Twelve Sprague-Dawley male rats were divided into 4 groups including non-exercise without PIA (N-EX), non-exercise with PIA (N-EX + PIA), exercise without PIA (EX) and exercise with PIA (EX + PIA). Blood samples were collected at the end of the study period to analyze miRNA biomarkers and target cancer gene predictions. Results: Four significant *Rattus norvegicus* (rno-microRNAs) may purpose as tumor suppressors were identified as potential target cancer gene candidate expressions within the 4 comparative interventional exercise groups. One rno-microRNA and target cancer gene candidate was up-regulated and 3 rno-microRNAs and their target cancer genes were down-regulated. Conclusions: Exercise interventions affected rno-miRNAs regulated target cancer gene candidates ITPR3, SOCS6, ITGA6, and NKX2-1 as biomarkers for cancer prognosis in rheumatoid arthritis diagnosis.

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**Blake McKinley**  
Mayo Clinic, USA

## Biography

Blake McKinley, D.O. is a 2nd year internal medicine resident at Mayo Clinic, Florida. He plans to apply for fellowship in hematology/oncology. This project was supervised by Yanyan Lou, M.D., Ph.D.

## Outcomes of Patients with Metastatic Non-Small Cell Lung Cancer and No Disease Progression Who Continue Immunotherapy

**Background:** For patients who stop IO (immunotherapy) for reasons other than progression of disease (POD), such as immune-related adverse event (irAE), there is limited data that compare PFS and OS when IO is continued vs. stopped.

**Body:** We conducted a retrospective study of patients with mNSCLC (stage IV) who discontinued IO for reasons other than POD (including irAE) prior to 12 months (m) vs. those that continued IO > 12m. Among these patients, 23 discontinued IO before 12m, and 40 patients continued IO beyond 12m. irAE, of any grade, occurred in 37.5% of IO continued group vs 42.9% of IO stopped group with 60.0% and 16.7%, respectively, that continued IO despite irAE. Patients who continued treatment beyond 12m had a longer duration of PFS (27.9m vs 14.8m,  $p= 5.77E-05$ ) with a significant increase in OS (39.7m vs 18.0m,  $p= 1.99E-07$ ).

**Conclusion:** Patients with no POD who continued IO beyond 12m, including those with irAE, experienced a significant increase in PFS and OS compared to those who discontinued IO. This is clinically meaningful as the data supports physicians helping patients continue IO in circumstances other than POD. These findings need to be verified in a larger cohort.

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## Declan Sculthorpe

University of Nottingham, UK

### Biography

Sculthorpe is a final year PhD Oncology student funded by Bowel Research UK and is based in the Pathology Research Group at the Biodiscovery Institute, University of Nottingham. Before undertaking his PhD, he spent several years as a research associate funded by both UK Research and Innovation (UKRI) and the Medical Research Council (MRC) at the University of Nottingham. Prior to his research roles he obtained both an MSc in Molecular Cell Biology and a BSc (Hons) in Biomedical Sciences at Nottingham Trent University. He holds several peer-reviewed publications and has presented his research at National and International Conferences.

### Stromal CLIC4 in colorectal cancer: A digital and spatial observational study in primaries and metastases

Chloride Intracellular Channel 4 (CLIC4), has been shown to play a critical role in regulating cellular pro-

liferation, differentiation, and angiogenesis. The role of the protein in the growth and development of colorectal cancer (CRC) including metastases to distant organs have not been well defined. This study aimed to explore CLIC4 expression in primary and metastatic CRCs and explore whether stromal CLIC4 and its spatial distribution could provide insight into clinico-pathological correlations.

Initially CRC tissue microarrays (n= 1000) were stained with CLIC4; later a small cohort (n=20) of whole slide sections from paired primary and metastatic CRC were stained. Digitised images were annotated, and algorithms constructed to assess CLIC4 staining.

CLIC4 staining was observed predominantly in the stroma. Loss of CLIC4 expression being associated with later stage (p=0.002), vascular invasion (VI) (p=0.005), high grade (p<0.001), right sided tumours (p=0.003), and MMR deficiency (p=0.003). CLIC4 stromal staining pattern in the intratumoural and peritumoural compartments of the primary matched those of the respective compartments in the metastases. The intratumoural staining appeared higher than the peripheral (primary, p=0.057; mets, p=0.035). Portal tracts immediately adjacent to metastases showed higher CLIC4 staining compared to distant portal tracts (p=0.002).

CLIC4, seems to be associated with stromal remodelling not only in CRC primaries but also in distant metastases. Positive CLIC4 in portal tract stroma only adjacent to metastases indicates a tumorigenic milieu created by CLIC4 at the metastatic site. Further studies are required to understand whether this serves to potentiate vascular and bile duct invasion within the liver..

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**Na Zhang**

Southeast University, China

**Biography**

Na Zhang studied at Southeast University in China in 2020 and she did medicine in Tianjin University of Chinese Medicine up to 2014. She also Received National Inspirational Scholarship, University-level Scholarship, Henan University Outstanding Graduate Student Scholarship and 14th Chinese Society of Critical Care Medicine Anti-epidemic Academic Pioneer.

**The Association between Longitudinal Changes in Depressive Symptoms and Cognitive Decline among Middle-Aged and Older Chinese Adults**

**Objective:** Depression is associated with cognitive impairment and dementia, but few studies have been done on Chinese adults. This study evaluates the relationship between depressive symptoms status and cognitive function in middle-aged and elderly Chinese adults.

**Methods:** We included 7,968 participants from the

Chinese Health and Retirement Longitudinal Survey (CHRALs) with a follow-up of 4 years. Using the Center for Epidemiological Studies Depression Scale to measure depressive symptoms, with a score of 12 or more indicating elevated depressive symptoms. Adjust covariance analysis and generalized linear analysis were used to investigate the relationship between depressive symptoms status (never, new-onset, remission and persistence) and cognitive decline. Restricted cubic spline regression was used to performed the potential nonlinear associations between depressive symptoms and the change scores of cognitive functions.

**Results:** During the 4-year follow-up, 1148 participants (14.41%) reported persistent depressive symptoms. The participants who have persistent depressive symptoms with more declines in total cognitive scores (least-square mean = -1.99, 95% CI: -3.70 to -0.27). Compared with never depressive symptoms, participants with persistent depressive symptoms experienced a faster decline in cognitive scores ( $\beta = -0.68$ , 95%CI: -0.98 to -0.38), and small difference ( $d=0.29$ ) at follow-up. But females with new-onset depression had more cognitive decline than those with persistent depression (least-square mean new-onset - least-square mean persistent=-0.10), its differences in males (least-square mean new-onset - least-square mean persistent=0.03).

**Conclusions:** Participants with persistent depressive symptoms experienced a faster decline in cognitive function, but differently in men and women.



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## Fujin Fang

Southeast University, China

### Biography

Fujin Fang is a Doctoral candidate in Prevent Medicine at Southeast University in 2021, He did Master's degree in Basic Medicine at Nanjing Medical University also Bachelor of Science in Life Sciences and Technology at Yunnan University in 2011, He has published more than 10 research articles in SCI (E) journals.

### TMEM200A is a potential prognostic biomarker and correlated with immune infiltrates in gastric cancer

**Background:** Gastric Cancer (GC) is one of the most common malignant tumors in the digestive system. Several trans membrane (TMEM) proteins are defined as tumor suppressors or oncogenes. However, the role and underlying mechanism of TMEM200A in GC remain unclear.

**Methods:** We analyzed the expression of TMEM200A in GC. Furthermore, the influence of TMEM200A on

survival of GC patients was evaluated. The correlations between the clinical information and TMEM200A expression were analyzed using chi-square test and logistic regression. Relevant prognostic factors were identified performing univariate and multivariate analysis. Gene set enrichment analysis (GSEA) was performed based on the TCGA dataset. Finally, we explore the relationship between TMEM200A expression and cancer immune infiltrates using CIBERSORT.

**Results:** TMEM200A was up-regulated in GC tissues than that in adjacent non-tumor tissues based on TCGA database. Meta-analysis and RT-qPCR validated the difference in TMEM200A expression.

Kaplan-Meier curves suggested the increased TMEM200A had a poor prognosis in GC patients. The chi-square test and logistic regression analyses showed that the TMEM200A expression correlates significantly with T stage. Multivariate analysis showed that TMEM200A expression might be an important independent predictor of poor overall survival in GC patients. GSEA identified 5 immune-related signaling pathways and 5 tumor-related signaling pathways significantly enriched in the high TMEM200A expression phenotype pathway. Finally, we found CD8+ T cells are apparently decreased in high TMEM200A expression group. Conversely, eosinophils are increased in high expression group compared with low expression group.

**Conclusion:** TMEM200A is a potential prognostic biomarker and correlated with immune infiltrates in GC.

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**Angela Caponnetto**

University of Catania, Italy

## Biography

Angela Caponnetto is a PhD at the Department of Biomedical and Biotechnological Sciences of University of Catania. She works in the research group of Prof. Cinzia Di Pietro where she studies the expression patterns of non-coding RNAs in ovarian follicles, in cumulus cells and in blastocoel fluid, their association with oocyte and embryo quality and their correlation with reproductive aging, in order to understand their biological role in female gametogenesis and preimplantation embryo.

## Down-regulation of long non-coding RNAs in reproductive aging and analysis of the lncRNA-miR-

## NA-mRNA networks in human cumulus cells

Therapies for Hodgkin Lymphoma (HL) have improved in the last few years but one of their common effects is gonadal toxicity that contributes to fertility damage of patients inducing temporary or irreversible loss of fertility. In this study, we investigated by NanoString technology miRNA expression profile in follicular fluid (FF) samples from young women affected by HL and found 13 miRNAs dysregulated in HL samples with respect to controls. These miRNAs are involved in molecular signaling pathways related to cancer, gametogenesis and embryogenesis, as shown by functional enrichment analysis. In addition, gene ontology data revealed that let-7b-5p, miR-423-5p, miR-503-5p, miR-574-5p and miR-1303 are involved in biological processes related to follicle development and oocyte maturation. Let-7b-5p holds the central position in the regulatory network of miRNA-mRNA interactions, has the highest number of mRNA target genes shared with the other DE miRNAs and is significantly down-regulated in HL FF samples. These data represent the first molecular analysis on FF of young women with HL and led us to wonder about the potential influence of miRNA deregulation on oocyte quality. Further studies are needed to verify the reproductive potential of young patients with HL before starting chemotherapy protocols and provide them a guarantee of an adequate protocol of fertility preservation.

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**Truptibahen Barot**  
Shachyartham, India

## Biography

Trupti Barot (B.A.M.S) (M.D – Infertility TM) Managing director of Shachyartham Ayurvedic Infertility Research Centre, Surat, India. Founder of Shachyartham Pitamah Foundation Trust - NGO (Surat, India). International Ayurveda Physician and expert in infertility (Female & Male Infertility) practicing over last 23 years.

## Management of Infertility in Low AMH Females with Ayurvedic Medicine – A Clinical Study

**Objective:** The objective of this study on infertility is to improve vitality, develop good quality ovum, purify ovum, naturally balance hormones, prepare reproductive system for fertilization, conceive naturally, delay

menopause, bless healthy child to infertile couple and to make our society healthy.

**Causes:** Low AMH suggests low fertility, poor quality of ovum, fetus abortion, unhealthy child with low birth weight or with abnormalities. Factors leading to infertility includes age, pathology, improper diet, unhealthy lifestyle, stress, and pollution.

**Method:** According to ayurveda, 5000 years old ancient science. Imbalance of three dosha - vatta, pita and kapha make deformities in reproductive tissues (ovum and sperm) which is responsible for infertility.

Treatments-

- Tab. Gynostromg
- Shachyartham (herbal powder)
- Cap. Sperman

a & b are useful to increase AMH level and develop good quality of ovum naturally. Whereas b & c are useful to increase sperm count, improve in sperm motility and sperm morphology responsible to treat oligospermia, asthanospermia, even some azoospermia cases along with proper food habits, yoga, meditation, proper lifestyle, garbhadhan sanskar (preconceive counselling), garbhasanskar (post pregnancy counselling - medicine, lifestyle, food habits)

**Result:** Achieved positive results by conceiving naturally to several hundreds of couples including IVF failure cases. Success rate of over 50% in cases with AMH <1..

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A large pink circle with a drop shadow, containing the text 'Posters Day 1'. A thin pink line connects the top of the circle to a thick pink horizontal bar above it. To the left of the circle is a large, stylized graphic in shades of pink and yellow, resembling a graduation cap and a diploma.

Posters  
Day 1

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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**Petra Borilova Linhartova**

Recetox, Masaryk University, Czech Republic

**Biography**

Petra Borilova Linhartova is associate professor at the Faculty of Science and the Faculty of Medicine, Masaryk University working as a Head of the Environmental Genomics Research Group as well as a Head of the Microbiome Analytical Laboratories, RECETOX Research Infrastructure. She is molecular geneticist and her research focuses on the study of the etio-pathogenesis of complex diseases. Her publication portfolio includes 45 WoS articles and her h-index is currently 13. She is the principal investigator several projects and leader of task in the ongoing HORIZON EUROPE project „Discovering the causes of three poorly understood cancers in Europe.

**Transcriptomic analysis of esophageal tissues and potential biomarkers for differential diagnostics of Barrett's mucosa and esophageal adenocarcinoma**

Barrett's esophagus (BE) is considered a precancerous condition increasing the risk of esophageal adenocarcinoma (EAC) development. This study aimed to find biomarkers with the potential for differential diagnostics of BE and EAC.

This pilot study comprised 24 endoscopically examined subjects, namely 12 patients with BE and 12 with EAC. Paired esophageal tissue samples (with the main pathology and adjacent tissue, paraffin-embedded) were histopathologically examined and the presence of CDX2, a diagnostic biomarker for BE//EAC, was immunohistochemically determined using a specific antibody. RNA was isolated from the paired fresh-frozen esophageal tissues, RNAseq library was prepared, and a single-read RNAseq (1x75) was conducted using an Illumina NovaSeq 6000 System.

After rRNA removal and mapping to human reference, we obtained 2x 27.5-184 mil. reads per sample. Compared to EAC tissues, we observed a downregulation of the hallmark pathway for angiogenesis and an up-regulated hallmark pathway for bile acid metabolism in BE ( $p < 0.01$ ). CDX2 protein and CDX2 gene were highly expressed in tissues with the main pathology in comparison to the adjacent tissue from both BE and EAC patients ( $p < 0.001$ ). On the other hand, the expression of MUC2 (mucin 2) as well as ACER2 (alkaline ceramidase 2) were upregulated in the BE tissue, and among others, TFPI2 (tissue factor pathway inhibitor 2) was downregulated in BE vs EAC tissues ( $p < 0.001$ ).

In line with the literature, we confirmed that MUC2 is expressed in BE but not in EAC tissues. It has, therefore, the potential to serve as a biomarker of both differential diagnosis and/or prognosis.

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## Fehmida Qur

Princess Royal Maternity Hospital, UK

### Biography

Fehmida Qur, Obstetrics and Gynaecology specialist. Fehmida Qur is a renowned Obstetrics and Gynaecology specialist dedicated to providing exceptional care to women. With a commitment to up-to-date specialist services in Obstetrics and Gynaecology to excel in the care of patients, Dr Qur aims to contribute to medical care for society.

Qur completed her Bachelor of Medicine and Bachelor of Surgery (MBBS) degree from Mumbai University. She completed her residency in Obstetrics and Gynaecology at Almana General Hospital in Saudi Arabia, gaining clinical expertise and mastering the intricacies of women's health.

Inspired by her fascination with the complexity of women's health and disease, she pursued a master's in Research degree from the prestigious University of Manchester in the UK. Qur is an active member of the Royal College of Obstetricians and Gynaecologists, UK (MRCOG) and the Royal College of Obstetricians and Gynaecologists, Ireland (MRCP I).

### Induction of Labour- An Audit Evaluating Outcomes Following Second Round of Prostin Gel

**Objectives:** To assess the effectiveness and safety of second round of intravaginal Prostin gel for induction of labour.

**Patients and methods:** This is a retrospective study conducted in the maternity ward at Princess Royal Maternity Hospital in singleton pregnancies who underwent induction of labour (IOL) with Prostin gel between July and September 2022. The selected population concerned patients to benefit from cervical ripening by second round of Prostin gel. The outcomes studied were the progress of labour, success rate, mode of delivery and maternal and neonatal morbidity.

**Results:** A total of 502 patients underwent IOL using Prostin gel. Thirty-four patients underwent IOL with second round of Prostin gel. The main indications for IOL were post-term pregnancy, reduced fetal movements and large for gestational age. Planned Caesarean births who declined to continue second round of IOL were 6/34 (18%). Twenty-eight patients completed the second round of IOL. The vaginal birth rate was 19/28 (68%). The emergency Caesarean birth rate was 9/28 (32%). The indication for Caesarean birth was 5/34 (14%) foetal heart rate abnormalities on CTG, failure to progress in first stage 2/34 (6%) and second stage of labour 2/34 (6%). 1/28 (3.5%) patients had Caesarean birth for fetal distress without labour. The remaining 27/28 patients progressed successfully into labour.

**Discussion and conclusion:** In over half of the cases (68%), the use of second round of Prostin gel for IOL resulted in a vaginal birth without a significant increase in emergency Caesarean birth (32%) compared to first round of IOL (27%). This practice does not appear to increase maternal or neonatal morbidity. The use of second round of Prostin gel could be considered a safe and effective method of IOL.

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Keynote  
Day 2



## Ming-Yow Hung

Shuang Ho Hospital, Taipei Medical University, Taiwan

### Biography

Ming-Yow Hung is a professor of medicine at Shuang Ho Hospital, Taipei Medical University. He has studied CAS for more than 15 years, during which time he has authored more than 50 peer-reviewed articles. Ming-Yow Hung is a Fellow of the American College of Cardiology and the American Heart Association, and has served on review committees for 27 prestigious journals, including *Oxidative Medicine and Cellular Longevity*, *JACC: Cardiovascular Interventions*, and *International Journal of Molecular Sciences*. He is now guest leading Special Issues for 2 journals, *Oxidative Medicine and Cellular Longevity* and *Frontiers in Cardiovascular Medicine*.

### Apolipoprotein(a)/Lipoprotein(a)-Induced Oxidative-Inflammatory $\alpha 7$ -nAChR/p38 MAPK/IL-6/RhoA-GTP Signaling Axis And M1 Macrophage Polarization Modulate Inflammation-Associated Development Of Coronary Artery Spasm

**Objective:** Apolipoprotein(a)/Lipoprotein(a) [Lp(a)], a major carrier of oxidized phospholipids, and  $\alpha 7$ -nicotinic acetylcholine receptor ( $\alpha 7$ -nAChR) may play an important role in the development of coronary artery spasm (CAS). In CAS, the association between Lp(a) and the  $\alpha 7$ -nAChR-modulated inflammatory macro-

phage polarization and activation, and smooth muscle cell dysfunction remain unknown.

**Methods:** We investigated the relevance of Lp(a)/ $\alpha 7$ -nAChR signaling in patient monocyte-derived macrophages and human coronary artery smooth muscle cells (HCASMCs) using expression profile correlation analyses, fluorescence-assisted cell sorting flow cytometry, immunoblotting, quantitative real-time polymerase chain reaction, and clinicopathological analyses.

**Results:** There are increased serum Lp(a) levels (3.98-fold,  $p = 0.011$ ) and macrophage population (3.30-fold,  $p = 0.013$ ) in patients with CAS compared with patients without CAS. Serum Lp(a) level was positively correlated with high-sensitivity C-reactive protein ( $r_2 = 0.48$ ,  $p < 0.01$ ), IL-6 ( $r_2 = 0.38$ ,  $p = 0.03$ ), and  $\alpha 7$ -nAChR ( $r_2 = 0.45$ ,  $p < 0.01$ ) in patients with CAS, but not in patients without CAS. Compared with untreated or low-density lipoprotein (LDL)-treated macrophages, Lp(a)-treated macrophages exhibited markedly enhanced  $\alpha 7$ -nAChR mRNA expression ( $p < 0.01$ ) and activity ( $p < 0.01$ ), in vitro and ex vivo. Lp(a) but not LDL preferentially induced CD80+ macrophage (M1) polarization, and reduced the inducible nitric oxide synthase expression and the subsequent NO production. While shRNA-mediated loss of  $\alpha 7$ -nAChR function reduced the Lp(a)-induced CD80+ macrophage pool, both shRNA and anti-IL-6 receptor Tocilizumab suppressed Lp(a)-upregulated  $\alpha 7$ -nAChR, p-p38 MAPK, IL-6 and RhoA-GTP protein expression levels in cultures of patient monocyte-derived macrophages and HCASMCs.

**Conclusions:** Elevated Lp(a) levels upregulate  $\alpha 7$ -nAChR/IL-6/p38 MAPK signaling in macrophages of CAS patients and HCASMC, suggesting that Lp(a)-triggered inflammation mediates CAS through  $\alpha 7$ -nAChR/p38 MAPK/IL-6/RhoA-GTP signaling induction, macrophage M1 polarization and HCASMC activation.



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## Davoud Shojaeizadeh

Tehran University of Medical Sciences, School of Public Health, Iran

### Biography

Davoud Shojaeizadeh has completed his PhD at the age of 35 years from Liverpool University, School of Tropical Medicine in UK. He is a faculty member of Tehran University of Medical Sciences and full professor in health education and health promotion. He published more than 55 papers in reputed journals and has been serving as an editorial board member of repute. He also published 37 books.

### The effect of educational intervention based on PRECEDE Model to reduce the anxiety of nurses in the hospitals of Tehran University of Medical Sciences

People who work in hospitals such as nurses have many stress and they are exposed to anxiety disorders. The aim of this study is to determine the effect of applied relaxation based of PRECEDE Model to reduce anxiety of nurses.

In this interventional study, 40 nurses as control group and 40 nurses as experimental group were randomly selected. To measure the rate of anxiety the questioner of Eshpiel Bergerand for intervention a questioner based on PRECEDE Model were used. For intervention there was 7 sessions and each session took between 60 to 90 minutes. Date collected before and after the intervention. Data analyzed by statistical techniques such as SPSS version 20.

The findings of the study indicated that there is no difference between the mean of anxiety before the intervention in the control and experimental groups ( $P=0/3$ ). The results of the study showed that there is significant difference between the mean of the anxiety in experimental group and control group after intervention ( $P<0/001$ ). The findings of the study also indicated that six months after the intervention there is significant difference between predisposing factors, enabling factors, reinforcing factors and behavior to reduce anxiety in control group and experimental group ( $P<0/001$ ).

The PRECEDE Model had an effect on reducing the anxiety of nurses. It is concluded that using educational intervention based on PRECEDE Model is applicable on specific population to promote health.

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**SPEAKERS**  
Day 2

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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**Min Bao**

Southeast University, China

## Biography

She is from Nanjing, China. She is a PhD candidate in Southeast University. She is 27 years old. Her current research direction is the health management of the elderly, and she has published two SCI papers and won the advanced individual of academic innovation at the university level.

## Longitudinal Association between Muscle Strength and Depression in Middle-Aged and Older Adults: A 7-Year Prospective Cohort Study in China

**Background:** Evidence regarding the associations between muscle strength in different parts of the body and depression is lacking. This study examined whether poor muscle strength is associated with a higher incidence of depression in a large cohort of

middle-aged and older adults.

**Methods:** In total, 5,228 middle-aged and older adults from the China Health and Retirement Longitudinal Study without depression at baseline were followed for 7 years. Their demographic characteristics, chronic diseases and lifestyle behaviors were assessed. After adjusting for relevant variables, a Cox regression was used to determine the relationship between muscle strength and incident depression.

**Results:** Over 32,544 person-years of follow-up, 1,490 participants developed depression. Low muscle strength at baseline was associated with a higher 7-year incident of depression, even after excluding those who developed depression within 2 years. After adjusting for confounding factors, it was found that a higher baseline relative handgrip strength was a protective factor against depression (HR [95% CI]=0.575 [0.430-0.768] for the lowest quartile vs. the highest quartile;  $p<0.001$ ). Longer times on the 5TSTS test were a risk factor for depression (HR [95% CI]=1.321 [1.077-1.621] for the lowest quartile vs. the highest quartile;  $p=0.007$ ). When the strengths of the upper and lower limbs were considered together, the hazard ratio for depression in people with relatively greater muscle strength was 0.463 (95% CI=0.307–0.699;  $p<0.001$ ).

**Conclusions:** Muscle strength could be predictive of depression, and the combined measurement of upper and lower limb muscle strength can improve the predictive ability.

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**Dorothy Bai**

Taipei Medical University, Taiwan

**A Comprehensive Pilot Study on the User Experience of Professional Caregivers Utilizing a Screen-Based Social Robot in Dementia Care**

Dementia represents a paramount public health challenge. While the incorporation of social robots into dementia care has gained traction globally, the comprehensive understanding of their acceptance and the ensuing experience among care providers remains under-researched. This study probes the user experience of professional dementia caregivers interacting with a screen-based social robot.

**Methods:** Utilizing a cross-sectional design, a select group of professional caregivers from a specialized care institution in Northern Taiwan were recruited. The study's focal instrument, a screen-based social robot, emulated a humanoid child with a screen-face. It stood at approximately thirty centimeters in both height and width and weighed around 2.5 kilograms. Key functionalities intended for dementia care included telecommunication, singing and dancing, and programmed activities. Participants underwent a two-hour activity segment, commencing with a researcher-led demonstration followed by an unguided interaction with the robot. The collected data encom-

passed demographic details, a User Experience Questionnaire (UEQ), and a System Usability Scale (SUS). Primarily descriptive analysis was employed to delineate the receptivity and experience associated with this technological integration into dementia care.

**Results:** Among the 23 participants (average age: 45.4; 87% female), the mean tenure as a professional caregiver stood at 18 years, with an average of 4.4 years dedicated to dementia care. While 87% were previously aware of social robots, a mere 13% had prior hands-on experience. The UEQ, ranging from -3 (highly unfavorable) to +3 (exceptionally favorable), revealed notably positive scores across its six dimensions. The scores spanned from 1.185 (efficiency) to 1.935 (attractiveness). However, the converted SUS score registered at 68, indicating that the robot's usability only met the basic acceptance threshold, thus signaling the need for enhancement.

**Discussion:** Professional caregivers exhibited significant enthusiasm towards the incorporation of screen-based social robots in dementia care, predominantly driven by the allure of the technology. Nevertheless, system usability concerns emerged. Future endeavors should delve deeper into both formal and informal caregivers' experiences with such robots and endeavor to refine the systems for optimal alignment with dementia care needs.

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## Giurikhan Magomedova

Federal State Budgetary Scientific Institution "Petrovsky National Research Centre Of Surgery", Russia

### Biography

Magomedova Giurikhan a cardiovascular surgeon. Education: Federal State Autonomous Educational Institution of Higher Education I.M. Sechenov First Moscow State Medical University of the Ministry of Health of the Russian Federation (Sechenov University) graduated in 2017. Cardiovascular residency: Petrovsky National Research Centre of Surgery (The Federal Agency for Scientific Organizations) from 2017 to 2019, had an active surgical experience. Post-graduate: Petrovsky National Research Centre of Surgery (The Federal Agency for Scientific Organizations) from 2019 to 2022, in June 2022 was awarded the degree of Candidate of Medical Sciences. From 2020 to nowadays working in Petrovsky National Research Centre of Surgery (The Federal Agency for Scientific Organizations), as cardiovascular surgeon.

### Clinical Case Of Complex Treatment of Deep Sternal Wound Infection After Coronary Bypass Surgery In A Patient With Diabetes Mellitus

**Background:** A deep sternal wound infection is a life-threatening complication accompanied by high mortality rates in cases of late diagnosis and inadequate treatment. following case report shows how a plastic surgical approach associated to the adoption of specific therapy has integrated and optimized treatment of a very complex clinical case.

**Aim:** How to treat a complication in a patient with diabetes

**Case Report:** A 64-year-old man was diagnosed with a four-vessel coronary artery disease. The patient had a clinical background hypertension, a body mass index of 29.78 kg/ m, chronic obstructive pulmonary disease and diabetes mellitus 2 types. Clinical mediastinitis manifestation presented on 6th pod. On the 9th pod, a sternum restabilization, secondary sutures and an irrigation-aspiration system was performed with no clinical improvements. The wound started left open to allow time an infection to clear with daily dressings with antiseptics and levomekol ointment on the 27th pod. After microbiological examination of wound discharge was treated with a range of antibiotics and antifungal therapy was started. On the 87th pod the wound was cleaned and granulation tissue was formed, a first step to close the sternum defect-necrectomy and sequestrectomy of dead tissue, fragmented areas of the left half of the sternum, cartilaginous processes of the ribs, tissue between the body and the manubrium of the sternum were removed. The second reconstructive surgery-necrosequestrectomy, resection of cartilaginous processes of 3-10 left ribs, reconstruction with pectoral major myocutaneous flap was performed on 168th postoperative day. He had clinical improvement and, after several exams, was released from the hospital.



These pictures are for the jury, as they truly show our experience

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## Domingos Soares

National Institute of Public Health Timor-Leste (IN-SP-TL), Research and Training Department, East Timor

## Biography

Domingos Soares has a nurse background with years of experience in teaching, training, and managing health services. He holds a double Master Degree in management (MM) and Nursing (M.Enf) and a Doctoral degree by Research at University Airlangga, Indonesia. He was the Head of department Quality Control of National Hospital Guido Valadares since 2006 to February 2007. He was the Academic Director of Instituto Ciencias de Saúde (ICS) MoH Timor-Leste from 2008 to September 2012 and Training Director of Instituto Nacional de Saúde MoH Timor-Leste since 2013 to February 2016. He was acting as part-time lectures at private universities in Dili since 2005 until now.

## Development of Interpersonal Soft Skills Learning Model (SSIP) Based on Transformative Learning Theory and Digitalization (TLTD) To Improve Nurse Competence In Hospital

**Background:** The actual condition of nursing shows that the nurse's ability to conduct assessments, for-

mulate diagnoses, plan, implementation, evaluation and communication still lacking. The purpose of the research was to develop a TLTD-based SSIP learning model to improve nurse's competencies.

**Method:** The research was conducted through 3 stages. Stage 1: Design: cross sectional; Subject: 190 nurse. Variables: individual characteristics, facilities, social environment support, TLTD, SSIP and nurse competence, data collection using instruments start on 6 June-10 August 2022 at HNGV Dili, HoREX Baucau and HR Maliana Timor-Leste. Analysis descriptive and inferential using SEM-PLS. Stage 2: module development based on phase 1, FGD and expert consultation. Stage 3: Design: quasi experiment with SSIP module training, Subject: 60 nurses (30 interventions group HoREX Baucau and 30 control group HR Maliana). Analysis: Wilcoxon and Mann Withney was used.

**Results:** stage 1 research shows that individual characteristic, facility factors, social environment support, TLTD, SSIP and nurse competence with a T-Statistic value of  $> 1.96$  formed a new learning model. Stage 2 of the development of TLTD-based SSIP learning modules based on new findings, FGDs and expert consultations then formed a new module containing SSIP material. Stage 3: module implementation affects nurse competence with p value of ethical and legal practice: 0,000, professional nursing practice: 0,000, leadership and management: 0,000, education and research: 0,001 and professional, personal and quality development: 0,000. All five indicators were significantly smaller than  $\alpha$  (0,05) in the intervention group.

**Conclusion:** This study found that in the form of a learning model by 5 variables including facility factors, social environment support, TLTD, SSIP learning and nurse competence has positive implication for improving the competence of hospital nurses.

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## Wenzyl Jean Etor

Victoriano Luna Medical Center, Armed Forces of the Philippines Health Service Command, Philippines

### Biography

Wenzyl Jean Etor Born in the province of Southern Philippines and She graduated with her Bachelor of Science in Nursing at the University of Southern Philippines Foundation in 2010. her graduation with her Doctor in Medicine from Southwestern University School of Medicine, Cebu City, Philippines. She had her post-graduate internship at Victoriano Luna Medical Center (previously Armed Forces of the Philippines Medical Center). Being in a military institution since post graduate internship, influenced her to a part of the armed forces. She graduated from her Military Training Course last 2020.

### Randomized, Double-Blind, Controlled Trial of Monolaurin Ointment versus Mupirocin Ointment of Bacterial Skin Infections among Pediatric Patients Ages 5 to 18 in a Community-Based Setting

**Objective:** The objective of the study is to determine the clinical efficacy of monolaurin ointment versus mupirocin ointment in the treatment of skin infections of children in the community-based setting

Study Design: Double-Blind, Randomized Clinical Trial

Setting: Community-Based Setting

**Subjects:** A total of 57 children with skin infections were screened for eligibility. 17 subjects were not eligible, and 40 satisfied the eligibility criteria. A total of 40 subjects underwent randomization for the treatment groups

**Interventions:** Subjects were randomly assigned to monolaurin ointment (twice daily) for 7 days and mupirocin ointment (twice daily) for 7 days

**Statistical Analysis:** Mann-Whitney U Test was used for non-parametric analysis (SIRS). T-test was used for parametric analysis (Wound size) and Chi-Square was used to compare two frequencies of non-parametric analysis (Gram Stain). All statistics tests are two-sided and performed using a 5% significance level and 95% confidence intervals (CI). p-values of less than 0.05 were considered statistically significant.

**Main Outcome Measures:** The primary outcome measures of clinical efficacy were the responses of subjects to the treatment by assessment of the post-treatment using the Skin Infection Rating Scale (SIRS). The secondary outcome measures were the wound size, microbiologic post-treatment gram stain, and culture.

**Results:** Monolaurin ointment was as effective as mupirocin ointment in terms of Skin Infection Rating Scale (SIRS): Blistering ( $p=0.49601$ ), Exudate ( $p=0.49601$ ), Crust ( $p=0.14231$ ), Erythema ( $p=0.29806$ ), Pain/Itch ( $p=0.39743$ ). In terms of wound size ( $p=0.42945$ ) and terms of microbiologic results ( $p=0.882553$ ). No adverse drug reactions were noted for both monolaurin and mupirocin ointment.

**Conclusion:** The use of monolaurin ointment in the treatment of skin infections in children is equivalent to mupirocin based on the post-treatment assessment of the Skin Infection Rating Scale (SIRS), wound size, and gram stain and culture. Keywords: Monolaurin ointment, Mupirocin ointment, Bacterial Skin Infection

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**Donghun Lee**

Chonnam National University Medical School, South Korea

**Association between C-reactive Protein-To-Albumin Ratio And 6-month Neurological Outcome in In-Hospital Cardiac Arrest Patients Who Underwent targeted temperature management**

**Background:** The inflammatory response that occurs following cardiac arrest can determine the long-term prognosis in in-hospital cardiac arrest (IHCA) patients who underwent targeted temperature management (TTM). We investigated the C-reactive protein to albumin ratio (CAR) after cardiac arrest to determine long-term outcome in IHCA patients treated with TTM.

**Methods:** The current retrospective observational study examined IHCA patients treated with TTM at a single tertiary care hospital between January 2017

and December 2021. We measured CAR immediately after return of spontaneous circulation (ROSC). We performed area under the receiver operating characteristic curve (AUC) analyses to investigate the relationship between CAR and neurological outcome. Primary outcome was neurological outcome at 6 months.

**Results:** Among the 95 patients, 71 (74.7%) had a poor neurological outcome at 6 months. The CARs of poor outcomes group had significantly higher than those of good outcomes group (0.47 [0.10–2.86] vs. 0.03 [0.01–0.15], P-value < 0.001). The AUCs of CAR for predicting 6-month neurological outcome was 0.783 (95 confidence interval, 0.687–0.861).

**Conclusion:** CAR immediately after ROSC can help predict the long-term prognosis of IHCA patients treated with TTM.



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**Wan Young Heo**

Chonnam National University Hospital, South Korea

**The Association between Troponin-I Clearance after the Return of Spontaneous Circulation and outcomes in Out-Of-Hospital Cardiac Arrest Patients**

**Background:** Elevated levels of troponin-I (TnI) are common in out-of-hospital cardiac arrest (OHCA) patients. However, studies evaluating the prognostic value of troponin clearance in OHCA patients are lacking. We aimed to examine how TnI clearance differed according to neurological outcome group and mortality group at 6 months.

**Methods:** This retrospective observational study included adults (age  $\geq 18$  years) who were treated for an OHCA between February 2019 and December 2022. Peak TnI levels were expressed based on the time from ROSC: less than 24 h, TnI1st; 24 h to 48 h, TnI2nd; and 48 h to 72 h, TnI3rd. TnI clearances (TnI-C) were calculated as  $([TnI1st - TnI2nd]/TnI1st) \times 100$ , and

they were expressed as TnI-C1st and TnI-C2nd. The primary outcome was a poor neurological outcome at 6 months, defined by cerebral performance categories 3, 4, and 5. The secondary outcome was 6-month mortality.

**Results:** A total of 227 patients were included. A poor neurological outcome at 6 months and 6-month mortality were reported in 150 (66.1%) and 118 (52.0%) patients, respectively. TnI-C1st was significantly lower in poor outcome groups than in good outcome groups (neurological outcome at 6 months, 54.4% vs 42.3%; 6-month mortality, 52.1% vs 42.7%). In multivariable analyses, TnI-C1st  $< 50\%$  was independently associated with a poor neurological outcome (odds ratio [OR] 2.078, 95% confidence interval [CI] 1.080–3.995,  $P = 0.028$ ) and mortality (OR 2.131, 95% CI 1.114–4.078,  $P = 0.022$ ) at 6 months.

**Conclusions:** After ROSC, TnI-C1st  $< 50\%$  was associated with a poor neurological outcome and mortality at 6 months in OHCA patients.

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Keynote  
Day 3

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**Alev Ozer**

Sutcu Imam University, Turkey

**Biography**

Alev Ozer is a Professor of Obstetrics and Gynecology at Kahramanmaraş Sutcu Imam University. She obtained her medical degree in 2002 from Hacettepe University Faculty of Medicine, one of the most selective universities in Turkey, graduating with honours. She completed her PhD thesis in 2008 and worked as a specialist doctor at several hospitals. In 2016, she

was honoured with Yusuf Peker Best Article Award and TJOD Rising Star Award. Having 71 articles published and 16 papers presented at scientific meetings, she is the head of the Gynecology and Obstetrics Department and the supervisor of the In Vitro Fertilization Unit.

**Conservative management endometrioma in the context of fertility**

How does endometrioma affect the ovary/does its presence decrease the reserve?

Does endometrioma cause infertility?

What is the spontaneous pregnancy rate in endometrioma?

In case of endometrioma: IUI/IVF?

Does the presence of endometrioma affect IVF success?

Do IVF treatments pose a risk to the patient with endometrioma?

Does removing the endometrioma before IVF increase success?

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**M D Ray**  
AIIMS, India

## Biography

M D Ray, Surgical Oncology, AIIMS, Delhi, MCh, DNB Surg Onco & PhD Teacher, Guide, Examiner, National and International Orator. Author of 14 renowned Surgery and Onco surgical books including "Multidisciplinary approach to Surgical Oncology patients" and 21 books on literature. Author of 5 self-designed techniques in Onco Surgical procedures along with >150 national and International publications. Editor-in-Chief in European Journal of Clinical Oncology, editor in 4 other surgical oncology journals and reviewer of 10 peer review journals. He is a HIPEC Surgeon for peritoneal surface malignancies and translational researcher in the field of molecular oncology. He served Indian Army over a decade, participated in Kargil War and achieved 5 Govt Medals and Rashtriya Gaurav Award. Cancer Awareness and basic research on cancer is his own drive. He is the President of Universal Unity Trust.

## Does NACT reduce the overall burden in advanced Epithelial Ovarian Cancer, despite of increasing CRS rate?

**Hypothesis:** Neoadjuvant chemotherapy is used in the patients of advanced ovarian cancer, not amenable for upfront surgery. Desmoplastic response to chemotherapy poses difficulty to complete surgical resection apart from anesthetic implications secondary to chemotherapy. Interval cytoreductive surgery requires expertise and intensive perioperative care to minimize the complications and better surgical

outcomes. Present study describes the technique, as practiced by the author emphasizing the importance of surgical skill and technique in interval setting and the author raised the question 'Does NACT really ease the burden?'. Author explained it with his experiences in a tertiary oncological referral center.

**Study design, materials and methods:** An audit of a prospectively maintained computerized ovarian cancer database in the department of surgical oncology was done. Intraoperative and immediate post-operative outcomes were analyzed along with surgical technique performed in 106 CRS after NACT and 95 upfront cases. We also compared between upfront and interval groups in terms of both perioperative and survival outcomes.

**Interpretation of Results:** In 516 cases of ovarian cancer operated from January 2014 to November 2020, but in this study, we included 201 patients who fulfilled the inclusion criteria. Post NACT cytoreduction was performed in 106 patients and upfront cytoreduction was performed in 95 cases. Nerve-sparing Hysterectomy and Nerve-sparing Retroperitoneal lymph node dissection were performed in 29.24% (31/106) cases. Nerve sparing surgery is less in interval group compare to upfront group 69.47% (66/95). Perioperative outcomes, in terms of less extensive surgical procedure, bowel resection rates, blood transfusions, readmission rate within 30 days of surgery, are better in post NACT group compared to upfront cytoreduction. However, it is not statistically significant. Because the completeness of surgery is an issue and development of resistant clone to chemotherapy causing more relapse thereby compromised survival which is reflected in our study in the interval group. (median DFS 44 months versus 36 months). 5-year OS in the upfront CRS group was 53.7% and OS in the NACT-CRS group was 42.2%; there were statistically significant differences between the groups.

**Concluding message:** Interval cytoreductive surgery seems easy but it is truly a surgical challenge with almost always an issue for optimal CRS. In true sense, it does not ease the burden as our results reflected it in terms of DFS and OS. Thereby, NACT should not be used as an armamentarium to compensate for poor or inexperienced surgical skill.

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**Graziano Clerici**  
PSUOG, Italy

## **Biography**

Graduated "cum laude", as Medical Doctor, at the Medical School, University of Perugia, Italy (1992), discussing the Dissertation Thesis: "Early Prenatal Diagnosis of Genetic Diseases: Comparing Methods and Prospective". Graduated "cum laude", from Post-graduate School of Obstetrics and Gynecology, University of Perugia (1996), discussing the Dissertation Thesis: "Fetal Cerebral Hemodynamics". Winner of two fellowships (1995 and 1997) from the Italian National Council of Research (CNR) on topics related to prenatal diagnosis. Professor of "Prenatal Diagnosis" at the School of Specialization in Obstetrics and Gynecology, University of Perugia (from 1998). Winner of the "Bruno Salvatori Award" – SIGO (Italian Society of Gynecology and Obstetrics) – for the "Prevention of Neonatal Brain Injury". Graduated in Fetal Medicine (2001) at the Fetal Medicine Foundation - King's College Hospital, London, UK. Researcher (2000 – 2002) at the Centre of Perinatal and Reproductive Medicine, University of Perugia, Italy, for the project: "In Utero Hematopoietic Stem Cells Transplant. New Perspectives in Fetal Diagnosis and Therapy". Graduated "cum laude" as Ph.D. in Perinatology at the University of Rome (2002), with the Dissertation Thesis: "The Intrauterine Fetal Transfusion on the Treatment of Fetal Hemolytic Diseases".

National General Secretary of the SIEOG (National Society of Ultrasound in Obstetrics and Gynecology and Biophysical Technologies) (2003-2005). As student, researcher and visiting professor he has worked in various university centers including the Centre of Fetal Diagnosis and Therapy of Vienne (Austria - 1995), Barcelona (Spain, Institute Dexeus – 1997), Detroit (Michigan, USA, Wayne State University, Hutzel Hospital – 1998), London (UK, Fetal Medicine Foundation – King's College Hospital – 2000), Miami (Florida, USA, Center for Fetal Therapy, Jackson Memorial Hospital, University of Miami - 2010), Hamburg (Germany, Department of Obstetrics and Fetal Medicine, University Medical Center Hamburg-Eppendorf (UKE), University of Hamburg – 2016-2017). National General Secretary of the SIMP (Italian Society of Perinatal Medicine) (2010-2014). Currently, Director of the "European Medical and Research Center" - (CEMER) and Director of the "Permanent School of Ultrasound in Ob/Gyn" - (PSUOG). One of the main performers of invasive procedures for fetal diagnosis and therapy in Italy (CVS, amniocentesis, cordocentesis, intrauterine fetal transfusion, etc.). Professor of Prenatal Diagnosis and Therapy at School of Specialization Ob./Gyn. at the University of Perugia (Italy). Professor of Perinatology and Obstetrics at the College of Obstetricians at the University of Perugia (Italy). Professor of Obstetrics and Gynecology, Department of Obstetrics and Gynecology No.1 of the Institute of Clinical Medicine, I.M. Sechenov First Moscow State Medical University, Sechenov University, Moscow (Russia). His scientific production includes 100 original works and 22 textbooks on prenatal diagnosis, fetal therapy and perinatology fields. He participated, as a member, on 7 international and 7 national research programs. He took part, as a teacher, on 76 international courses and, as a speaker, 130 (national/international) congress.

## **The Methodological Approach to Fetal Heart Evaluation.**

The evaluation of the fetal heart is one of the major challenging issue in prenatal diagnosis. There are many

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suggested scanning planes for the fetal heart. The four chambers' view is certainly the most important. A very good examination of this view will let you to recognize the majority of heart anomalies but it isn't enough and we must be able to obtain other scanning planes: the left and right outflow tracts, the three vessels and trachea view, the aortic and ductal arch and the venae cavae view.

What should be considered in the 4-chamber view ? The heart is to the left of the chest with the apex pointing at about 45° forward and to the left; The heart is above the diaphragm and there are no other abnormal structures in the chest (e.g., stomach); The area occupied by the heart is about a third of that of the thorax; Both the ventricles and the atria are present and have approximately equal size; The left ventricle occupies the apex of the heart; The moderator band is visible toward the apex of the right ventricle; The I-V and I-A septa are present and they appear intact; The A-V valves are present and appear normal with a slight displacement of the medial edge of the tricuspid toward the apex; The presence and disposition of the pulmonary veins; There is no pericardial/pleural effusion.

As it is known, the fetal heart is horizontal and the four chambers' view is on the transverse plane. In order to obtain some other and very important cardiac views, from the four chambers' view, we have to tilt the probe toward the fetal head. With this very simple movement

we can obtain the left outflow tract, the right outflow tract, the three vessels' view and finally the three vessels and trachea's view.

To get the ductal arch we have to start from the three vessel view and to align the view with the pulmonary artery. When your view is parallel to the pulmonary artery and it is aligned with the ductus arteriosus you have to turn the transducer of 90° and you will see the ductal arch.

The methodology to get the aortic arch is similar but in this case, going towards the right side of the fetus, at the level of the three vessel view, we have to align the transducer with the aorta and finally we have to turn of 90° so you will see the aortic arch.

When we are examining the fetal heart and particularly when we are visualizing the aortic arch moving a little bit more to the right shoulder of the fetus, we have to evaluate the right venous return with the visualization of the two venae cavae going into the right atrium: the so called venae cavae view.

Evaluating the fetal heart, it is always important to use the color-Doppler because it will increase the information that we can get from the exam, helping us in the evaluation of the structure and the function of the heart, increasing our possibility to evaluate the physiology or pathophysiology in case of fetal heart anomalies.

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## Nitin T Telang

Palindrome Liaisons Consultants, United States

### Biography

Telang is the Research Director at Palindrome Liaisons Consultants. He earned Ph.D. degree in 1974, and obtained post-doctoral training at University of Nebraska, American Health Foundation, New York and Memorial Sloan-Kettering Cancer Center, New York during 1976-1985. Faculty Appointments (1986-2007): Memorial Sloan-Kettering Cancer Center, New York, Weill-Cornell Medical College of Cornell University, New York and Strang Cancer Prevention Center, New York. Grant Review Study Sections: US National Cancer Institute and US Department of Defense. Editorial Boards: Oncology Reports, International Journal of Oncology, World Academy of Sciences Journal and International Journal of Molecular Sciences. Awards: National Cancer Institute FIRST Award, Department of Defense IDEA Award and A.N. Marquis Lifetime Achievement Award. Peer-reviewed Publications: carcinogenesis, cancer prevention, and cancer stem cell biology. Past Funding (1986-2007): Extra-mural grants and contracts from US National Cancer Institute and US Department of Defense Breast Cancer Research Program

### Triple-negative Breast Cancer: Nutritional Herbs as Therapeutic Alternatives

**Rationale:** Triple-negative breast cancer (TNBC) lacks the expression of hormone and growth factor receptors and represents an aggressive breast cancer sub-

type. The mainstream treatment options for TNBC are restricted to multi-drug combination of cytotoxic chemotherapeutics. The therapeutic efficacy of these options is limited due to systemic toxicity, intrinsic or acquired therapy resistance and emergence of chemo-resistant, cancer-initiating stem cell population. The limitations of conventional chemo-therapy emphasize an unmet need to identify less toxic and efficacious therapeutic alternatives. Traditional Chinese medicine uses combinations of nutritional herbs for general health purposes, as well as for alternative therapy and palliative care of the cancer patient. Documented human consumption and low systemic toxicity may qualify nutritional herbs as therapeutic alternatives for therapy-resistant breast cancer.

**Published Evidence:** Human breast carcinoma-derived triple-negative MDA-MB-231 cells represent a preclinical model for TNBC. These hyper-proliferative cells exhibit decreased population doubling time, increased saturation density, accelerated cell cycle progression and downregulated cellular apoptosis. Chinese nutritional herbs exhibit anti-proliferative and pro-apoptotic effects. Mechanistically, the nutritional herbs involve RB, RAS, PI3K and AKT signaling pathways for their growth inhibitory efficacy. Long-term treatment of parental TNBC cells with the chemotherapeutic agent doxorubicin (DOX) eliminates drug-sensitive cells, and leads to survival and selective growth advantage of putative drug-resistant stem cells. Doxorubicin-resistant (DOX-R) cells exhibit increased stem cell specific tumor spheroid formation, and upregulated expression of stem cell specific cell surface marker CD44 and nuclear transcription factors NANOG and OCT-4.

**Conclusion:** Collectively, growth inhibitory effects of nutritional herbs on parental TNBC cells, and drug-resistant stem cell model derived from these parental cells validate a mechanism-based experimental approach to identify and prioritize efficacious nutritional herbs for their stem cell targeting efficacy. Preclinical data provide evidence for their clinical relevance and translatability.

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**Franco Musio**

Medical Consultation Group, USA

**Biography**

Franco Musio earned his undergraduate and medical degrees from Georgetown University (Washington, D.C.) with subsequent training in General Surgery, Internal Medicine, and Nephrology at Brooke Army (San Antonio, Texas) and Walter Reed Army Medical Centers (Washington, D.C.). Dr. Musio has subsequently been in the academic and clinical practice of nephrology for close to 30 years at Walter Reed and Inova Fairfax Hospital (Falls Church, VA) where he has collaborated with many hematology-oncology colleagues and has developed a specialty in caring for complex patients with microangiopathic hemolytic anemia as well multiple other types of anemia. Dr. Musio enjoys lecturing, writing, and discussing medical and human-interest topics on local and international radio stations and podcasts.

**Revisiting the treatment of anemia in the setting of chronic kidney disease, hematologic malignancies, and cancer.**

Anemia has and will continue to be a central theme in medicine particularly as clinicians are treating a burgeoning population of complex multiorgan processes. As a result of multiple randomized controlled trials (RCT), meta-analyses, and medical societal recommendations overly restrictive paradigms and under-administration of erythropoiesis stimulating agents (ESA) have likely been followed by clinicians among all specialties. A review of anemia in the con-

text of basic and molecular science, chronic kidney disease (CKD), hematologic malignancies, and cancer is presented with focus on the establishment of ESAs as integral in the treatment of anemia. Randomized Controlled Trials and Meta-Analyses studying the use of ESAs are presented with focus upon their application to clinical practice. In addition, the establishment of the next-generation Hypoxia Inducible Factor Prolyl Hydroxylase Inhibitors in the evolving treatment of anemia and their role among hematology-oncology patients will be discussed.

A compendium will be presented describing the evolution, establishment, and implications of ESA administration initially among those with CKD with rapid subsequent application to the hematology-oncology population of patients. Upon evaluation of the risks and benefits of ESAs focused critique is made supporting more liberal use of these agents strongly suggesting that the current underlying 'pendulum' in the management of anemia has perhaps shifted too far to the 'under-treatment' side in many cases.

**Objectives:**

- A focused appreciation of the history and evolution of erythropoiesis stimulating agents in clinical medicine
- A deeper understanding of the molecular science and risks and benefits of ESA administration among patients with chronic kidney disease (CKD), hematologic malignancies, and cancer with a greater critique of the literature and practice guidelines in this field
- An understanding of the molecular science of next-generation Hypoxia Inducible Factor Prolyl Hydroxylase Inhibitors in the evolving treatment of anemia and their role among CKD and hematology-oncology patients
- A greater discernment of the position that the current underlying treatment 'paradigm' of anemia in renal and oncologic disease has perhaps shifted too far to the 'under-treatment' side in many cases
- An appreciation that the treatment of anemia is predicated upon the art of medicine which is the synthesis of scientific data and the unique nature of each individual patient to include their comorbidities and emotional health



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Speakers  
Day 3

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**Anastasia Shumeykina**

Meshalkin National Medical Research Center, Russia

## Biography

Anastasia Shumeikina has her expertise in evaluation and passion in improving the health and wellbeing. Her open and contextual evaluation model based on responsive constructivists creates new pathways for improving healthcare. She has built this model after years of experience in research, evaluation, teaching both in hospital and education institutions.

## Cervical Cancer And Pregnancy: Management Tactics Based On Retrospective Analysis, Literature Data, Own Experience

**A** retrospective analysis of 56 cases of concomitant cervical cancer with pregnancy. 61% were patients with stage I disease. The most frequently used combined methods of treatment (surgical treatment in combination with subsequent radiation therapy) - 89.3%. This long-term analysis allowed us to formulate practical recommendations for obstetricians and gynecologists.

1) Before planning pregnancy, the patient must under-

go treatment for background and precancerous diseases of the cervix.

2) When registering with a antenatal clinic, it is imperative to take smears for oncocytology.

3) When cervical cancer is diagnosed, treatment should be prescribed immediately after a consultation with the participation of: an oncologist, a radiotherapist, a chemotherapist, an obstetrician-gynecologist, a neonatologist, a psychologist.

4) For the diagnosis of cervical cancer in pregnant women, it is advisable to use liquid cytology and cervical biopsy.

5) For patients with stage 0, stage 1a, pregnancy can be prolonged, childbirth - by caesarean section.

6) At stage Ia1 - radio wave conization of the cervix is a sufficient amount of treatment, in the absence of lymphovascular invasion, the absence of a tumor along the resection margin and the absence of a tumor in the remaining cervical canal after conization.

7) If microinvasive cervical cancer is suspected in pregnant women, a "flat" conization of the cervix without curettage of the cervical canal is performed at 12-20 weeks of gestation.

8) In order to prevent bleeding during conization, it is recommended to apply ligatures at 15 and 21 hours. The bed of the cone is coagulated by bipolar coagulation. In the first 12 hours after the operation, preventive tocolysis is applied.

9) To exclude metastases in I / nodes, not only laparoscopic access (gold standard) is possible, but also laparotomy in the period from 12 to 24 weeks of pregnancy.

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**Reda Harby Marzouk Mithany**

Kingston Hospital, UK

**Biography**

Reda Harby Mithany, MRCS England, MSc General & Laparoscopic Surgery Registrar Kingston Hospital NHS Foundation Trust

**Strangulated Caecum, Appendix, and Terminal Ileum in Paraumbilical Hernia: An Unusual Presentation in the Elderly**

A paraumbilical hernia is a common surgical condition

caused by inadequate closure of the embryonic umbilical defect is an umbilical hernia. Paraumbilical hernia represents 10% of abdominal wall hernias; the occurrence being 90% in Africans and 10% in Caucasians. Although strangulation is not common, the majority of paraumbilical hernias are reducible and manifest as a lump. The paraumbilical hernia sac usually contains the omentum and bowel loop, although the caecum is infrequently present. The rare incidence of the caecum being present in the paraumbilical hernial sac is described in a very few case reports in the literature. Here we are discussing a case of a 71-year-old woman who presented with a paraumbilical hernia with strangulated caecum, appendix, and terminal ileum. After resuscitation, the patient underwent an emergency laparotomy that revealed gangrenous caecum, appendix, and terminal ileum in the hernial sac with an offensive smell. Right hemicolectomy, end ileostomy, and transverse colon mucus fistula was performed with uneventful recovery. In conclusion, the condition is not necessarily fatal; high index of suspicion, proper clinical evaluation, and urgent management are crucial. Hence, it is essential to be aware of this condition and its misleading clinical presentation.

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**Reda Harby Marzouk Mithany**

Kingston Hospital, UK

## Biography

Reda Harby Mithany, MRCS England, MSc General & Laparoscopic Surgery Registrar Kingston Hospital NHS Foundation Trust

## Complex Oncological Operations Performed at a Surgical Ward in a Public Sector Hospital in Pakistan

Recent advancement of operative techniques have transformed clinical practice and made it possible to perform increasingly complex oncologic procedures in the public Sector Hospitals in Pakistan.

A substantial proportion of patients seeking surgery suffer from malignant tumors, leading to big challenges for surgeons. The diversity of oncological disease

patterns has become more complex in recent years. As a result, a simple and universally valid treatment concept is not possible, a therapy which includes surgical intervention must be planned within the framework of an interdisciplinary tumor conference. Surgical therapy is still an indispensable part of modern oncological treatment - despite rapid progress in conservative oncology.

**Case 1:** 55y/F presented with CA Sigmoid presented with Pelvis mass excision + B/L salpingoophorectomy + appendectomy with en bloc distal ileal resection, + end to end ileal anastomosis and sigmoid colon and superior rectum resection + end colostomy (Hartman procedure) was done.

**Case 2:** 47Yr/F Wt:127kg presented with CA Cervix H/O C-section 4 year back & 3 Sessions of chemotherapy done. Procedure: Laparoscopic radical Hysterectomy + B/L salpingectomy + Left Oophorectomy + Pelvic lymph nodes dissection. Per op Finding: CA Cervix about 5x4 cm extending into the endometrium. There was enlarged pelvic node along both ileac vessels. Multiple cysts in left ovary. No ascites, No peritoneal or liver mets.

The COVID-19 pandemic has reshaped many facets of life but the need for oncological surgical care has remained. This study details the experience of a complex oncological surgical procedures performed at Surgical Unit I, Lahore General Hospital, Lahore

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**Muhammad Hasaan Shahid**  
Kingston Hospital, UK

## Biography

Muhammad Hasaan Shahid is a dedicated healthcare professional currently serving as a Registrar at NHS Wales. With a solid foundation in medicine, he completed four years of rigorous training in General Surgery at Lahore General Hospital, Lahore, Pakistan. This experience equipped him with invaluable skills and insights, nurturing his passion for enhancing patient care and surgical practices.

Shahid's journey in the field of healthcare showcases a commitment to continuous learning and development. He has demonstrated a keen aptitude for understanding complex medical procedures and a compassionate approach to patient well-being. His time at Lahore General Hospital honed his surgical expertise, fostering a drive to contribute positively to the medical community.

Driven by a desire to make a meaningful difference in the lives of patients, Shahid actively engages in professional growth, staying updated with the latest advancements in the healthcare domain. Through his role at NHS Wales, he remains dedicated to providing optimal healthcare solutions and improving healthcare delivery for the benefit of all.

## Strangulated Caecum, Appendix, and Terminal Ileum in Paraumbilical Hernia: An Unusual Presentation in the Elderly

A paraumbilical hernia is a common surgical condition caused by inadequate closure of the embryonic umbilical defect is an umbilical hernia. Paraumbilical hernia represents 10% of abdominal wall hernias; the occurrence being 90% in Africans and 10% in Caucasians. Although strangulation is not common, the majority of paraumbilical hernias are reducible and manifest as a lump. The paraumbilical hernia sac usually contains the omentum and bowel loop, although the caecum is infrequently present. The rare incidence of the caecum being present in the paraumbilical hernial sac is described in a very few case reports in the literature. Here we are discussing a case of a 71-year-old woman who presented with a paraumbilical hernia with strangulated caecum, appendix, and terminal ileum. After resuscitation, the patient underwent an emergency laparotomy that revealed gangrenous caecum, appendix, and terminal ileum in the hernial sac with an offensive smell. Right hemicolectomy, end ileostomy, and transverse colon mucus fistula was performed with uneventful recovery. In conclusion, the condition is not necessarily fatal; high index of suspicion, proper clinical evaluation, and urgent management are crucial. Hence, it is essential to be aware of this condition and its misleading clinical presentation.

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**Jing Huang**

Southeast University, China

## Biography

Huang Jing, Ph.D. student, studying at the School of Medicine, and a physician in Respiratory and Critical Care Medicine at Southeast University, with a research focus on interventional pulmonology.

## Overexpression of miR-4286 in extracellular vesicles of bronchoalveolar lavage fluid is a potential diagnostic marker for malignant pulmonary nodules.

**Background:** The judgment of benign or malignant pulmonary nodules is a difficult point in clinical diagnosis. Bronchoalveolar lavage fluid (BALF) can be obtained directly from the diseased site by bronchoscopy, which is an ideal liquid biopsy specimen. As a potential diagnostic tool, miRNAs are expected to be a good choice for disease diagnosis through the vector of bronchoalveolar lavage fluid extracellular vesicles (BALF-EVs). In our previous study, the BALF of

patients with benign and malignant pulmonary nodules was obtained by radial endobronchial ultrasound (R-EBUS), and EVs were successfully isolated.

**Methods:** Small RNA sequencing was performed on the isolated BALF-EVs, and bioinformatics analysis was used to identify differential miRNAs in BALF-EVs of patients with benign and malignant pulmonary nodules. We will further verify the diagnostic performance of some of these sequences.

**Results:** Small RNA sequencing results showed that there are multiple known and novel differential miRNA sequences in BALF-EVs of patients with pulmonary nodules. According to the results of bioinformatics analysis, we selected 4 differential miRNA sequences up-regulated in BALF-EVs of patients with malignant pulmonary nodules and validated them in BALF-EVs of 20 pairs of patients with benign and malignant pulmonary nodules. The expression of known sequence miR-4286 in BALF-EVs of patients with malignant pulmonary nodules was significantly higher than that of benign pulmonary nodules. The AUC for the diagnosis of malignant pulmonary nodules was 0.778. However, the combined diagnostic efficacy of miR-4286 and miR-1246b, the previously validated a novel miRNA sequence, has significantly decreased.

**Conclusion:** Our study suggests that the detection of miR-4286 in BALF-EVs may serve as a liquid biopsy method to assist in the diagnosis of benign and malignant pulmonary nodules. Combined detection of miR-4286 and miR-1246b expression in BALF-EVs cannot improve the diagnostic efficiency of benign and malignant pulmonary nodules.

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

23-24 (25th Virtual) October 2023 | Tokyo, Japan



## Silas Adjei-Gyamfi

Ghana Health Service, Ghana

### Biography

Silas Adjei-Gyamfi is a young Global (Public) Health specialist and researcher whose interests are limited to population health, community health, maternal and child health, epidemiology, statistics, health systems, and health policy. He believes that providing solutions to public health challenges is vital to contributing to Sustainable Development Goals.

Adjei-Gyamfi graduated from the University of Ghana and worked as a registered nurse for more than seven years. He developed love for public health and its research when he started questioning the reasons behind neonatal and maternal mortalities and morbidities during his clinical period. This motivated him to further his education to attain Master of Public Health with specialty in International Health Development at Nagasaki University, Japan.

### Maternal risk factors for low birthweight and macrosomia: A crosssectional study in Northern Region, Ghana

**Background:** Abnormal birthweights are critical public health challenges accountable for most non-com-

municable diseases and perinatal mortalities. Regardless of the myriad of mixed evidence on maternal factors responsible for abnormal birthweight globally, most of these findings are attained from urban and rural settings. This study serves as one of key pieces of evidence in view of the increasing prevalence of abnormal birthweight particularly in some parts of semi-rural Ghana.

**Purpose:** To estimate the prevalence of abnormal birthweight and identify some possible maternal risk factors for abnormal birthweight in Northern Ghana.

**Methods:** Retrospective cross-sectional study was conducted in Savelugu municipality from February-March 2022. A total of 356 mothers aged 16-46 years and having a child born during the last four weeks, were recruited. Data were collected from maternal and child health record books and through structured interviews. Bivariate (Chi-square and Wilcoxon rank-sum tests) and multivariate (logistic regression) analyses were employed to identify maternal factors for abnormal birthweight at 95% significance level.

**Findings:** Prevalence rates of low birthweight and macrosomia were 22.2% and 8.7% respectively. Maternal anaemia in the first and third trimesters of gestation were strong predictors for low birthweight. Mothers belonging to minority ethnic groups; mothers who had  $\geq 8$  antenatal care; and mothers having neonates whose birth length was  $> 47.5$ cm had reduced odds for low birthweight. Alternatively, mothers with gestational weeks  $\geq 42$  had higher risk of giving birth to macrosomic neonates. Maternal socioeconomic status (wealth quintile) increased the risk of macrosomic births.

**Conclusion:** Recommends health policies to improve nutrition counseling, community health education, and promotion of lifestyle improvement coupled with strengthening of health service deliver.



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## Wioletta Wujcicka

Polish Mother's Memorial Hospital-Research Institute, Lodz, Poland

### Biography

Wioletta Wujcicka has completed her Ph.D. in medical sciences at the age of 28 years from Medical University of Lodz, in Poland. She performed her dissertation at the Department of Molecular Cancerogenesis, at the Medical University of Lodz, Poland. Then she was a scientific assistant at the Laboratory of Molecular Virology and Biological Chemistry, at the Polish Academy of Sciences in Lodz, Poland. Nowadays, she is an assistant professor at the Scientific Laboratory of the Center of Medical Laboratory Diagnostics and Screening, at the Polish Mother's Memorial Hospital - Research Institute in Lodz, Poland.

### Risk factors for selected pregnancy complications

Serious complications of a singleton pregnancy include fetal growth restriction (FGR) and spontaneous preterm labor (PTL). In approximately 40% of preterm births (PTBs), prelabor rupture of membranes (PROM) is also observed. The aim of the presented study was

to identify risk factors for selected pregnancy complications, in particular FGR, PTL, PTB and PROM. The work reviews the latest literature on the research topic, available in the PubMed database. The association of maternal anemia with an increased risk of PTB, PROM, preeclampsia (PE), postpartum hemorrhage, low birth weight (LBW) of newborns and perinatal mortality was indicated. Gestational iron deficiency anemia was much more common in women with FGR and PTB. In pregnant women with asthma, a higher incidence of spontaneous abortions, structural fetal defects, PTB, PTL, PE, FGR, oligohydramnios, gestational diabetes mellitus (GDM) and intrauterine fetal death was confirmed. A positive association of asthma with the occurrence of PROM was also observed both before and from the 37th week of gestation. Decidual bleeding observed in the first trimester of pregnancy was associated with fetal loss, PE, placental abruption, FGR, and PTB. In the second half of pregnancy, risk factors for vaginal bleeding included oligohydramnios and polyhydramnios, FGR, previous miscarriages and older woman's age. In the case of diabetes, an association with symmetric FGR, PTB, and preterm PROM (pPROM) was indicated. Hypothyroidism during pregnancy correlated with FGR, pregnancy-induced hypertension (PIH), PE, miscarriage, intrauterine fetal death, increased risk of PTB, PROM, and the development of GDM. In the case of threatened miscarriage, an association with an increased incidence of late pregnancy and perinatal complications was confirmed, including PTB, pPROM, placenta previa, PIH/PE, as well as LBW and hospitalization of newborns in intensive care units. In summary, anemia, asthma, vaginal bleeding, diabetes, hypothyroidism and threatened miscarriage are important risk factors for abnormal pregnancy.

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## Kulvinder Kaur

Dr Kulvinder Kaur Centre For Human Reproduction,  
India

## Biography

Kulvinder Kaur is the scientific director of DR Kulvinder Kaur Centre For Human Reproduction, Jalandhar, Punjab, India, where she manages the complicated cases of infertility. She graduated from LHMC Delhi in 1980, topping in medicine in all 3 medical colleges thereby getting the DR Devi Chand Gold medal from the late PM Smt Indira Gandhi & also topped in all the MBBS subjects prior to that, e.g. anatomy, pathology, biochemistry etc, making her basics sound & later she managed the endocrine clinic in PGI Chandigarh during her MD days. Following that she reported the 40th world case of hydrometrocolpos working in Saudi Arabia & has been working in the field of neuroendocrinology of obesity. GnRH control along with role of kisspeptins, prokinetins in human reproduction, AIDS & Cancer – during this period she managed to successfully treat the first case of nongestational choriocarcinoma of uterine body in a young girl medically thereby preserving her fertility – the first case in world literature of its kind. Further she has over 450 publications mostly international in her name.

**An update on the Innovative part of NLRP3 Inflammasome Regarding Newer Strategies for Treatment of Reproductive Conditions Possessing Greater**

## Risk: A Systematic Review

Thus here we conducted a systematic review utilizing search engine PubMed, Google Scholar; Web of Science; Embase; Cochrane review library utilizing the MeSH terms like NLRP3 inflammasomes; mode of action; recurrent spontaneous abortions (RSA); Gestational Diabetes mellitus (GDM); endometriosis; preterm birth; Polycystic ovary syndrome (PCOS); preeclampsia; leaky gut; IL-1 $\beta$ ; IL-18; caspase 1. We found a total of 150 articles out of which we selected 100 articles for this review. No meta-analysis was done. Here we have detailed the mechanism of action of NLRP3 inflammasomes, their part in Polycystic ovary syndrome (PCOS), recurrent spontaneous abortions (RSA), preterm birth, Gestational Diabetes mellitus (GDM), preeclampsia (PE), preterm birth, ovarian aging and newer non-hormonal therapy for ovarian endometriomas with non-hormonal medication like MC 950, the pathophysiological aspect of PE generation along with treatment in prior-existent hypertension, how ovarian aging is associated with NLRP3 inflammasomes and their practical applications regarding oocyte development prior to ovulation regarding implications of the inflammatory pathways & other practical applications. Greater research is warranted for this budding topic to get unanswered questions for therapy of recalcitrant endometriosis that recurs despite all therapies at present, further get an insight on avoidance of the severe complications associated with PE, avoidance of depletion of ovarian follicle cohorts in PCOS patients besides other practical applications.

**Background/ Objectives and Goals:** Not much has been known with regards to NOD-like receptor protein (NLRP3) inflammasomes in reproduction. Earlier we reviewed the role of NOD-like receptor protein (NLRP3) inflammasomes in different patients presenting with various metabolic disorders i.e. type 2 Diabetes mellitus (T2DM), obesity, Metabolic Syndrome (MetS), non-alcoholic fatty liver disease (subjects NAFLD), non-alcoholic steatohepatitis (NASH).

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**Methods:** Here we attempted to review the role of NLRP3 ECV's potentially in reproduction. Thus we utilized Pubmed, MEDLINE, Google Scholar, Scopus, Embase, Web of Sciences, Cochrane library search engines where we utilized the MeSH terms like, like NLRP3 inflammasomes ;mode of action; recurrent spontaneous abortions(RSA); Gestational Diabetes mellitus(GDM); endometriosis;preterm birth ; Polycystic ovary syndrome(PCOS); preeclampsia ;leaky gut;IL-1 $\beta$ ;IL-18;caspase 1. We found a total of 150 articles out of which we selected 100 articles for this review. No meta-analysis was done. .

**Expected Results/ Conclusion/ Contribution:** Here we have detailed the mechanism of action of NLRP3 inflammasomes ,their part in Polycystic ovary syndrome (PCOS),recurrent spontaneous abortions(RSA), preterm birth, Gestational Diabetes mellitus(GDM) preeclampsia(PE) , preterm birth , ovarian

aging and newer non hormonal therapy for ovarian endometriomas with non hormonal medication like MC 950,the pathophysiological aspect of PE generation along with treatment in prior existent hypertension,how ovarian aging is associated with NLRP3 inflammasomes and their practical applications regarding oocyte development prior to ovulation regarding implications of the inflammatory pathways & other practical applications. Greater research is warranted for this budding topic to get unanswered questions for therapy of recalcitrant endometriosis that recurs despite all therapies at present,further get an insight on avoidance of the severe complications associated with PE,avoidance of depletion of ovarian follicle cohorts in PCOS patients besides other practical applications.

# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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**Jayalakshmi Rajeev**

Central University of Kerala, India

## Biography

Jayalakshmi Rajeev, working as an Assistant Professor at the Department of Public Health and Community Medicine, Central University of Kerala, Kasaragod since 2016. She has completed the Master of Public Health and PhD from Sree Chitra Tirunal Institute for Medical Sciences and Technology (SCTIMST), Trivandrum, following the Bachelor of Science in Nursing from Government College of Nursing, Thrissur, and Kerala. Her areas of work are women and child health and nutrition, health policy, and health inequities. She has more than seven years of experience and 14 publications in various national and international journals and successfully completed three research projects including one funded by the National Commission for Women, New Delhi. She was a member of the Executive Committee of the Centre for Women's Studies, Central University of Kerala, and convened seminars and workshops on topics such as women and the environment, sexual and reproductive health, intersectionality, human trafficking, and financial literacy for women.

## Intersectional Inequalities and Maternal Anemia in India: Evidence from National Family Health Survey -5

**Background and scope:** Anemia is a major public health issue globally. More than half of the women in India are anemic. Anemia during pregnancy poses a serious threat to both mother and child. Though most pregnant mothers from various socio-economic groups in India are anemic, an intersectionality

approach is often overlooked in understanding this problem. This paper investigates the intersecting inequalities in the distribution of anemia among pregnant mothers in India.

**Methods:** A secondary analysis of India's fifth National Family Health Survey is conducted. Wealth index, caste, and place of residence are the variables used to create intersecting categories. I recoded the wealth index and caste and there are 18 categories representing different social positions. The most disadvantaged category is Rural-Poor-Scheduled Caste/Scheduled Tribe and the most advantaged category is Urban-Rich-General Caste. I combined mild, moderate, and severe anemia to form a binary variable anemia (Yes, No), which is the dependent variable. The distribution of outcome variables across 18 intersecting categories is assessed.

**Results:** The overall prevalence of anemia among pregnant mothers in the study is 52%. The highest prevalence is reported among pregnant mothers from the most disadvantaged category (Rural-Poor- SC/ST - 62%). However, the lowest prevalence is reported among Urban-Rich-Other backward class women (39%), followed by the most advantaged category, i.e., Urban-Rich-General (41%). I observed wide fluctuations among the middle groups given that the prevalence of anemia is 61% among the Urban-Middle-General category and 59% among Urban-Poor-General (Figure 1). Wealth status is a major deprivation element, compared to caste and place of residence.

**Conclusion:** The intersection of the place of residence, wealth, caste, and the resulting social position has a strong influence on maternal anemia in India. It is high time to address this in its policies and interventions to ensure equitable distribution of resources so that the neediest get more.

**2nd Edition**

# **2nd Edition International Conference on Gynecology, Obstetrics & Women's Health**

**23-24 (25th Virtual) October 2023 | Tokyo, Japan**



**Lashell Jones**  
MFAMA, USA

## **Biography**

Lashell Jones has over 20 years experience in Women's Health and Fetal Medicine sonography.

Her journey started after attending Mountain State University. Maternal Fetal Medicine was presented to Lashell by a Perinatologist willing to train her, an opportunity rarely offered to new graduates. It was through this rare chance the passion of Women's health, fetal development and echocardiography first peaked her interests. Over the years, ARDMS and other Ultrasound organizations will allow for assistance in volunteering through registry item writing to tutoring recent graduates for registrant exam review. Coming soon to the one and only Ultrasound and CCI Registry review mobile web base, Lashell is the author for the entire Fetal Echocardiography content-over 125 questions with pictures and explanations on the iOS app. This is only the beginning of all the plans and ideas of Lashell, for contributing to the education and medical awareness of the Ultrasound community.

## **Blueprint to Success: Quality Assurance Vs. Congenital Heart Disease Lashell Jones, RDMS RDCS**

"Quality Assurance;Fetal Heart;Routine;Ultrasound; Congenital Heart Disease"

According to the CDC, every 15 minutes a baby is born with congenital heart disease. Even amidst the advanced ultrasound technology, roughly six in every ten serious heart defects in fetuses go undetected.

This mishap results in emergency cardiac surgeries, costly medical care and unfortunate

neonatal-pediatric-adolescent and occasionally adult mortalities. The necessary tools for educational awareness are pivotal for the absolute diagnosis of congenital heart disease prenatally. For example, abnormal vessel looping can result in a major developmental heart error: Transposition of the Great Arteries (TGA). When TGA is undetected prenatally, babies are born blue due to lack of oxygen. By the execution of the Blueprint to Success in every Radiology facility, we hope to prevent this unfortunate event from happening.

Quality assurance is mandatory in radiology facilities for all ultrasound equipment. It should also be a QA program that pertains towards the preparedness and maintenance of ultrasound operators, in order to decrease heart defects from going undetected. The goal of the QA protocol is to thoroughly and routinely train individuals in interpreting heart images, discuss new ultrasound technologies, analyze heart development, the potential errors involved and what that entails in detecting congenital heart disease by ultrasound. The first step is simply to start from the beginning, introducing fetal embryology and its concurrence to congenital heart disease. From there break down the heart as a puzzle, by dissecting components of the fetal heart piece by piece.

At our Practice, we implemented quarterly educational lectures focusing on a particular topic concerning heart development and its correlation to existing clinical case studies. Since applying this practical approach, our diagnosing detection rate of CHD has improved significantly. We've diagnosed a rare case of a rhabdomyoma, countless amounts of isolated aberrant right subclavian arteries cases (1 missed by another local MFM practice), HLHS, TGA, Tetralogy of Fallot and numerous others in the past 3 years alone (Fig.1). From normal to the most complex cases, our sonographers are now confident in both their clinical knowledge and scanning abilities. Knowledge is power and collectively will improve precise diagnostic ultrasound findings. This now newfound expertise will allow for higher CHD detection rates prenatally, patient awareness, proper medical treatment, and uneventful deliveries.

**2nd Edition**

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## **Ziad Alosaimi**

UmmAl-Qura, Saudi Arabia

### **Biography**

Ziad from Makkah in Saudi Arabia is a pharmacy intern student, passionate about immunotherapy and immuno-oncology. He and his team made graduate research in the immune-oncology field about a new class of drugs called immune checkpoint inhibitors. To be honest, it was difficult to make a research in this specific field due to lack of knowledge but he did it because he is so interested in this field.

### **CAR-T cell therapy**

Concept: T cells are changed in the lab so that they make a type of protein known as CAR before they are grown and given back to you. CAR stands for chimeric antigen receptor. CARs are designed to allow the T cells to attach to specific proteins on the surface of the cancer cells, improving their ability to attack the cancer cells.

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**Marisa Fazzino**

Palindrome Liaisons Consultants, Uruguay

**Biography**

She served as the Honorary Commission for the Fight Against Cancer's Advisory Oncologist until 2012 in addition to serving as the Ministry of Public Health's Director of the National Cancer Control Program. For the years 2009 to 2011, she served as president of the Uruguayan Society of Medical and Pediatric Oncology (SOMPU). She participates in numerous congresses, symposia, and other oncological events at the level of Latin America, the United States, and Europe. She is a member of the board of directors of the Latin American Federation of Mastology (FLAM).

**Experience on prevention of cervical cancer in Uruguay, South America.**

Cervical cancer (CC) is the fourth leading cause in incidence and fifth in cancer mortality in women in Uruguay(1). Most deaths occur in public health system, where screening coverage rate is 40%1.

According to the WHO global strategy for the elimination of CC, MSP's National Cancer Control Program (PRONACCAN) aims to improve primary and secondary prevention actions(2).

In Uruguay since 2013 HPV vaccination has been offered free of charge to girls and since 2018 to boys from 11 years. The current coverage in women and men is 69% and 53% in the first dose and 52% and 22% in the second dose respectively. In 2022 coverage was extended from 11-26 years, with two doses in the general population, regardless of the

start of sexual activity. Quadrivalent vaccine is administered. The guidelines of the MSP recommend Oncological colpocytology (PAP) for women between 21-69 years, the first two studies being annually and with normal results, continuing every 3 years. In order to encourage CC prevention a day of paid leave was established for doing PAP and fee exoneration. Education and population awareness campaigns and health workers training have been carried out, including HPV vaccination days in educational centers. To improve population adherence that does not attend health centers, a mobile PAP facility was parked in surrounding neighborhoods. A pilot study about HPV test as screening vulnerable population women (30-69 years) under self-sample or taken by health workers was carried out (2020-2021), with good adherence (70%) and positivity rates according to the literature (12.6%)(3). New CC prevention guidelines developed by the PRONACCAN will be promoted, with support from IARC and PAHO, including HPV test as screening strategy.

It will be a great challenge for our country to achieve this objective due to the cost of HPV test.

(1) National Cancer Registry: Incidence and Mortality 2015-2019. Distribution by age range.

<https://www.comisioncancer.org.uy/Ocultas/Incidencia-y-Mortalidad-2015-2019-Distribucion-por-rango-etario--uc280>

(2) World Health Organization: A Global Strategy for elimination of cervical cancer.

<https://www.paho.org/en/towards-healthier-generations-free-diseases/global-strategy-elimination-cervical-cancer>

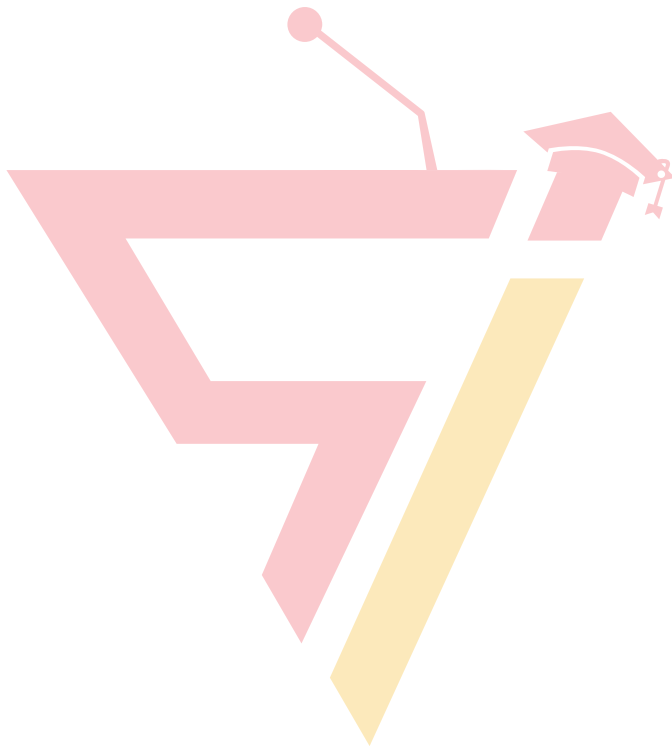
(3) Pilot program: improvement of screening coverage for cervical cancer in vulnerable populations (Abstract). Gabriela Moreira, Lucia Delgado, Marisa Fazzino, Virginia Suaya, Virginia Rodriguez Sande, Andrea Brocco, Leonardo Pereyra, Veronica Sanchez, Marisa Dinardi. Revista Uruguaya de Patología Clínica, 2022, vol 69, pag 131.

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A large pink circle with a drop shadow, containing the text 'E-Poster Day 3'. A thin pink line connects the top of the circle to a thick pink horizontal bar above it.

E-Poster  
Day 3





# 2nd Edition International Conference on Gynecology, Obstetrics & Women's Health

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## Leyla Mahmudova

Queen Alexandra Hospital Portsmouth NHS Trust, UK

### Biography

Leyla Mahmudova Ramiz had studied in Azerbaijan Medical University, Baku in 1994-1999 which she had been graduated with Honor Diploma and after completion of 1 year internship in general surgery in 2000, she worked in ob-gyne department at Almana General Hospital Khobar, Saudi Arabia from 2004 till 2022. In 2019, she completed MRCOG exams and after GMC registration as a medical practitioner, She is currently working as a middle grade registrar in ob-gyne department at Queen Alexandra Hospital Portsmouth NHS Trust, Hampshire UK since November 2022. During her relatively short period of work, She have been awarded with Junior Doctor Awards 2023/ runner up : Extra Mile Award.

Her main aim is to participate in improvement of ob-gyne services and providing approachable, safe and friendly counselling and treatment of women with ob-gyne diseases along with ongoing self and group teaching of other medical team members, taking part in research projects in obstetric and gynecology.

### Audit on Surveillance of Women at Risk of Preterm Labor

**Objectives:** To assess the workload, preventive measures and screening outcome in the preterm preventive clinic in Queen Alexandra Hospital Portsmouth NHS Trust, UK.

**Methods:** A retrospective study was conducted in the preterm preventive clinic from 1 January 2021 till 31 December 2021.

The selected population concerned are the patients

with high and moderate risk factors for preterm delivery less than 34 weeks gestation.

High risk factors include previous h/o spontaneous preterm birth, uterine anomaly and mid-trimester miscarriage due to cervical weakness.

Moderate risk factors are previous cervical surgery (LLETZ more than 1 cm), previous LSCS in the second stage, smoking, UTI and vaginal infection (BV, etc).

The elements studied were age group, risk factors, attendance, eligibility for referral, screening, proposed intervention and outcome.

**Results:** A total of 258 women were referred in the indicated time period. Two hundred thirty-two women underwent screening with cervical measurement by TV USS.

6/258 women did not attend (2.3%), 31/258 women did not have records (12%), 5/258 women were late bookers (1.9%), surveillance was not indicated for 16/258 (6.2%), 5/258 women were not keen for TVS (2.3%).

The intervention was offered for 40/232 patients on account of previous history along with short cervix less than 25 mm, and 33/232 women accepted it. The measures included Cyclogest (60%), cervical cerclage (7.5%), Cyclogest then cerclage (15%).

Two-hundred seventeen women (90.4%) delivered at more than 34 weeks gestation while 7 women (2.9%) had spontaneous onset preterm delivery at less than 34 weeks gestation.

**Discussion and Conclusion:** The relatively low rate of severe premature deliveries in given time period correlates with UK national rate mentioned in NICE guideline Preterm Birth updated 2022.

The aim of the preterm clinics is to reduce the rate further, as preterm delivery is the major risk factor of neonatal morbidity and mortality.

Proper counselling of patients regarding the importance of attending the preterm preventive clinic at booking time is of paramount importance. Tracing records from other trusts upon transfer of care and differentiation between h/o iatrogenic and spontaneous preterm delivery to eliminate unnecessary referrals is to be arranged on routine basis.

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**Sheron Tannara Vargas**

UFCSPA, Brazil

### Biography

Sheron Tannara Vargas, oncologist nurse, active in-patient navigation and master's student at PPG Information Technologies and Health Management – UFCSPA.

### Oncological journey in a navigation program: the patient's vision.

Coping with the oncological diagnosis requires systematic and comprehensive care. Care strategies are implemented in health organizations in order to qualify services from the perspective of the patient's

experience, therefore, knowledge about the trajectory experienced is important. A qualitative study with a phenomenological approach with cancer patients under the monitoring of a navigation program was carried out and aimed to understand the oncological journey. 17 patients were selected to participate in the research with diagnoses of breast and bowel cancer in different stages of staging/treatment. Patients reported knowledge of the navigation program through the nurse and were previously unaware of this type of service. Patients refer to the importance of prior guidance provided by navigator nurses, enabling the planning and organization of coping with each stage, as well as monitoring during treatment. For patients with a curative therapeutic proposal and who had already completed their treatments, they describe the feeling of care, and consider the professionals to be reliable references in this matter. Patients who followed oral therapy and disease control, identified in the program a resource to remove doubts related to health and administrative issues. Final considerations: From the above, it is noted that the patient navigation service is structured to meet the specificities of each patient, being a communication link between the patient and the outpatient clinic, as well as with the other health teams. Necessary: the presence of specialist and empathetic professionals to carry out the navigator's tasks.

## UPCOMING CONFERENCES

<p>3rd Edition International Conference on <b>Optics, Photonics and Lasers</b> March 25-26, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/optics-photonics-lasers/">https://scholarsconferences.com/optics-photonics-lasers/</a> david@scholarevents.org</p>
<p>3rd Edition International Conference on <b>Physics and Quantum Physics</b> March 25-26, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/physics/">https://scholarsconferences.com/physics/</a> david@scmeetings.org</p>
<p>3rd Edition World Congress on <b>Nanoscience and Nanotechnology</b> March 25-26, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/nanoscience-nanotechnology/">https://scholarsconferences.com/nanoscience-nanotechnology/</a> nanotek@scmeet.org</p>
<p>6th Edition World Congress on <b>Advanced Chemistry</b> March 25-26, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/chemistry-frontiers/">https://scholarsconferences.com/chemistry-frontiers/</a> dileep@scholarsconferences.com</p>
<p>5th Edition International Conference on <b>Catalysis and Chemical Engineering</b> March 25-26, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/catalysis-frontiers/">https://scholarsconferences.com/catalysis-frontiers/</a> catalysis@scmeetings.org</p>
<p>Global Summit on <b>Oil, Gas, Petroleum Science and Engineering</b> March 25-26, 2024   Barcelona, Spain <a href="https://petroleumscienceconference.com/">https://petroleumscienceconference.com/</a> organizer@petroleumscienceconference.com</p>
<p>5th Edition International <b>Neuroscience and Brain Disorders Forum</b> March 27-28, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/neuroscience/">https://scholarsconferences.com/neuroscience/</a> neuroscience@scholarcongress.org</p>
<p>World Congress on <b>Advances in Mental Health and Psychiatry</b> March 27-28, 2024   Barcelona, Spain <a href="https://mentalhealth.scholarsconferences.com/">https://mentalhealth.scholarsconferences.com/</a> mentalhealth@scholarconferences.org</p>
<p><b>International Women's Forum</b> March 27-28, 2024   Barcelona, Spain <a href="https://scholarsconferences.com/womens-forum/">https://scholarsconferences.com/womens-forum/</a> womensforum@scholarevents.org</p>
<p>World Congress on <b>Otology, Rhinology &amp; Laryngology</b> June 24-25, 2024   Rome, Italy <a href="https://otorhinolaryngology.scholarsconferences.com/">https://otorhinolaryngology.scholarsconferences.com/</a> otorhino@scholarconferences.org</p>
<p>World Congress on <b>Nursing and Advanced Healthcare</b> June 24-25, 2024   Rome, Italy <a href="https://nursingworld.scholarsconferences.com/">https://nursingworld.scholarsconferences.com/</a> nursing@scholarconferences.org</p>
<p>Global Summit on <b>Breast and Women's Cancer</b> June 24-25, 2024   Rome, Italy <a href="https://breast-womens-cancer.scholarsconferences.com/">https://breast-womens-cancer.scholarsconferences.com/</a> breastcancer@scmeetings.org</p>