



5th INTERNATIONAL CONFERENCE ON THE FUTURE OF NURSING AND NURSING EDUCATION

OCTOBER 25-26, 2022

DUBAI, UAE

Theme

" Advancing Healthcare Transformation:
The New Era of Nursing Education,
Research and Practice "

2

DAYS WITH MORE THAN
45 SESSIONS,
KEYNOTES & TALKS

12+

INNOVATIVE FEATURED
SPEAKERS

20+

HOURS OF
NETWORKING EVENTS

60+

INTERNATIONAL
SPEAKERS

125+

EDUCATIONAL SESSIONS

FUTURE NURSING 2022

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Nurses/students | Nursing Researchers | Nursing Faculty
| Medical Colleges | Nursing & Midwifery Associations and
Societies | Business Entrepreneurs | Training Institutes
| Software developing companies | Manufacturing
Medical Devices Companies | Pharmaceutical Companies
Nurses | Physician assistants | Advanced practice nurses
| Clinical research nurses and social workers with a
focus on Nursing Education | Healthcare Professionals
| Medical Practitioners | Clinicians | World Leading
Doctors | Midwives | Noble Laureates in Healthcare &
Nursing | Nursing Practitioners | Research Institutes
| Staff Development Educators | Research Scholars |
Government Hospitals | Private Hospitals

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Welcome Message

Dear Colleagues,

Hold on to your hats! I am pleased to invite you to the **5th International Conference on the Future of Nursing and Nursing Education** organized in **Dubai, UAE**. Get ready for a conference filled with scientific research, education, leadership and practice topics guaranteed to stimulate lively discussions. The organizing committee has done an exceptional job of bringing together practitioners to share the global perspective of healthcare. This conference is a place to showcase your great achievements in health research, service improvement and patient-centred care. It's also a chance to learn from best practices from around the world. It is a truly global experience, with delegates from all over the world connecting for two intense and immensely enjoyable days of networking and presentations.

A highly recommended event which is not to be missed! You will surely enjoy being a part of this conference. It is an honor to be a keynote speaker and a member of the organizing committee for **Future Nursing 2022**.

Kalliopi Megari

Professor,
Aristotle University of Thessaloniki
Greece



Welcome Message

Dear Colleagues,

On behalf of the Organizing Committee, it is a great honor to welcome you to the **“5th International Conference on the Future of Nursing and Nursing Education”** which is scheduled to be held during **October 25-26, 2022 at Dubai, UAE.**

The conference theme is **Advancing Healthcare Transformation: The New Era of Nursing Education, Research and Practice.**

I am sure this international conference will provide the attendee the opportunity to explore healthcare across the lifespan from multiple perspectives. This congress will also shed new light on various branches of nursing, midwifery, healthcare, public health, patient safety and many more. It will provide ample opportunities for collaboration, networking and partnerships. The organizers welcome the enthusiastic and interested participants to enrich the program by submitting their abstracts for either Distinguished Speaker presentations or Poster presentations.

Dr. Rer. Cur. Simone Ries

*Protestant University of Applied Sciences,
Germany*



KEYNOTE SPEAKERS



Allen Walter Siegel

University of Maryland Upper
Chesapeake Health System, USA

Title: Can You PACE Yourself?
Using PACE in the Clinical Setting



Lorraine M Wright

University of Calgary, USA

Title: Older Adults and Their
Families: An Interactional
Intervention That Brings Forth
Love and Softens Suffering



Marta Sund Levander

Linköping University, Sweden

Title: Assessment of signs, symptoms,
and fever to early on detect suspected
infection: Implications for clinical
practice, especially in frail elderly and
critically ill



Keith Meadows

Health Outcomes
Insights Ltd., Australia

Title: Do Patient-Reported
Outcome Measures Tell Us
the Full Story?

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KEYNOTE SPEAKERS



Kalliopi Megari

Aristotle University of
Thessaloniki, Greece

Title: Neuropsychological impact
on patients with cancer



Susann Porter

Malmö University, Sweden

Title: The paradox of political
accountability and deficits in the
preconditions for service delivery in
elderly care: A qualitative study of
Swedish politicians



Skye Coote

Melbourne Mobile Stroke Unit,
Australia

Title: The Mobile Stroke Unit
Nurse: An International
Exploration of Their Scope of
Practice, Education, and Training



Maria Weurlander

Stockholm University, Sweden

Title: Students in the clinical
environment: Emotionally
challenging situations and how
students manage

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KEYNOTE SPEAKERS



Joyce Simard

Namaste Care International,
USA

Title: Namaste care: Helps people with advanced dementia live not just exist



James Charles

Griffith University, Australia

Title: Yarning about foot care: evaluation of a foot care service for Aboriginal and Torres Strait Islander Peoples



Christine Rhodes

The University of Derby, USA

Title: Using the five pathways to nature to make a spiritual connection in early recovery from SUD: A pilot study



Kirsten Nielsen

VIA University College,
Denmark

Title: Learning the impact of culture mediated by online international collaboration in nursing education

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PRESENTATION FORUM

KEYNOTE FORUM / MINI-PLenary SESSIONS

Presentations under Keynote Forum or Mini-Plenary Sessions includes abstracts with remarkable research value selected by the program committee. These significant speeches are delivered by globally recognized honorable speakers and it is open to all registrants.

DISTINGUISHED SPEAKERS FORUM (ORAL ABSTRACT SESSIONS)

In this forum, speakers and experts of the research field gets an opportunity to showcase their noble research work that involves comprehensive research findings. These formal oral presentations include a wide range of talks covering basic research to advanced research findings in accordance to the theme and scientific sessions of the conference.

STUDENT FORUM

POSTER SESSION

This session is particularly introduced to encourage more number of student participation at international conferences, however it is not restricted only to students since it is also available for the participants with language barrier. There are specific guidelines to be followed to prepare the poster. Poster topic should be selected only from relevant scientific sessions with in-depth technical details.

YOUNG INVESTIGATORS FORUM

An exclusive opportunity for students and young investigators to present their research work through a formal oral presentation. Young Investigators Forum provides a global platform for young researchers and scholars to showcase their valuable contribution to the scientific world and to get acknowledged by the global scientific community of experts. It is an excellent opportunity to recognize young scientific assets with promising research ideas. These oral presentations are of shorter time duration with 10-15 minutes of informative and precise presentations in relevant scientific sessions.

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EDUCATIONAL WORKSHOPS/RESEARCH WORKSHOPS/ CORPORATE WORKSHOPS/MINI- SYMPOSIA

With an aim of transferring knowledge among the participants, workshops are introduced as a part of international conferences. These interactive and occasionally practical sessions gives an opportunity for participants to engage in detail discussion. Workshops are mostly scheduled for 60 to 90-minutes. It may range from learning about a specific topic relevant to international education, products and research which sometimes involves practical demonstration. It helps in enhancing skills, knowledge and understanding of the research field in depth through interactive discussions.

MEET THE PROFESSOR @ NETWORKING SESSIONS

This session involves open discussion between the experts and session attendees, it gives enough time for getting answers to specific questions and doubts. It is an opportunity for attendees to increase their professional networking, sometimes also leads to an excellent collaboration opportunity.

HIGHLIGHTS OF THE DAY SESSIONS

“Highlights of the Day Sessions” is introduced to discuss and focus a ray upon previous day ORAL ABSTRACT presentations by experts to summarise the key findings. It helps in getting better insights into the various dimensions of the topic.

EDUCATIONAL SESSIONS/ TRAINING PROGRAMS

Educational Sessions or training programs are specifically designed for a better understanding of the latest findings and technologies. These are generally 45-minute sessions that gives an exposure to the multidisciplinary field, that provides in-depth learning experiences and address educational needs.

SCIENTIFIC TRACKS/ SESSIONS

Nursing Education | Nursing Informatics | Importance and scope of Nursing Education | Current trends in Nursing Practice | Global standards for initial education of professional nurses | Types of Nursing | Ethical Committee in Nursing | Child Nursing (Pediatrics) | Adult Nursing | Midwifery Nursing | Elderly Care Nursing (Geriatrics) | Women's Health Nursing | Mental Health Nursing | Nursing about Pain Management | Primary Healthcare Nursing | Nursing on Obstetrics | Health Promotion | Healthcare Management | Palliative care | Evidence based Nursing Education and Practice | Clinical Nursing | Perioperative Nursing | Holistic Nursing | Prevention and Control of Communicable diseases | Advances in Nursing | New Technologies in Nursing Education And Practice | New Leadership Developmental model for Nursing Education | Hallmark of Excellence in Nursing Education | Career Prospects and Job Opportunities

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REGISTER & PARTICIPATE

in

FUTURE NURSING 2022

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TYPES OF ACADEMIC REGISTRATIONS

SPEAKER REGISTRATION

COMBO A

(REGISTRATION + 2 NIGHT ACCOMMODATION)

COMBO B

(REGISTRATION + 3 NIGHT ACCOMMODATION)

DELEGATE REGISTRATION

TYPES OF BUSINESS REGISTRATIONS

SPEAKER REGISTRATION

COMBO A

(REGISTRATION + 2 NIGHT ACCOMMODATION)

COMBO B

(REGISTRATION + 3 NIGHT ACCOMMODATION)

DELEGATE REGISTRATION

TYPES OF STUDENT REGISTRATIONS

REGISTRATION

YIF

COMBO A

(REGISTRATION + 2 NIGHT ACCOMMODATION)

COMBO B

(REGISTRATION + 3 NIGHT ACCOMMODATION)

POSTERS

TYPES OF ADDITIONAL REGISTRATIONS

ACCOMPANYING PERSON

E-POSTER

VIRTUAL PRESENTATION

WORKSHOPS

START-UPS

“ TIME TO
CONNECT
WITH YOUR
PEERS ”

CONCURRENT EDUCATIONAL SESSIONS

TUESDAY
OCTOBER 25
2022

NURSING EDUCATION

- Nursing Qualification
- Nursing Degrees in world
- Indian Nursing Council

NURSING INFORMATICS

- Responsibilities and duties of Nurse Informaticist
- Computerized Provider Order Entry
- Electronic Medical Records

IMPORTANCE AND SCOPE OF NURSING EDUCATION

- Social Importance
- Economic Importance
- Future scope

CURRENT TRENDS IN NURSING PRACTICE

- Outpatient Care
- Importance of Cultural Competency
- Preventive Health
- Increasing Consumer Sophistication
- Rise of Nursing Informatics

GROUP PHOTO | COFFEE BREAK

GLOBAL STANDARDS FOR INITIAL EDUCATION OF PROFESSIONAL NURSES

- Goals and Principles of global standards
- Intended use of standards
- Context
- Process and Methodology

TYPES OF NURSING

- Registered Nurse
- Licensed Practical Nurse
- Clinical Nurse Specialist
- Nurse Practitioner
- ICU Registered Nurse
- Travel Registered Nurse
- Staff Nurse
- Operating Room Nurse

ETHICAL COMMITTEE IN NURSING

- EC Members
- Roles & Responsibilities
- EC Guidelines & Principles
- ICH-GCP

CHILD NURSING (PEDIATRICS)

- Vaccination & Autism
- Antibiotic Resistance in Preschool Children
- Eating Disorders & Social Media Impact
- Pediatric Care Ethics
- Adolescent Medicine Practices
- Speech Disorders Therapy

LUNCH BREAK

ADULT NURSING

- Mental Health & Psychiatric Care in Adults
- Bipolar Disorder Non-Chemical Practices
- Exercise & Sports Medicine
- Obesity & Weight Management Programs
- Dental & Oral Health in United States

ADULT NURSING

- Maternal & Neonatal Practices in Rural Areas
- First Antenatal Appointment Analysis
- Mental Illness & Post-natal Period
- Self-Instruction Kits & Natal Safety
- Gestational Weight Gain Challenges
- Obese Pregnant Women Safety Rules

ELDERLY CARE NURSING (GERIATRICS)

- Joint Disorders Study
- Alzheimer's Disease
- Atrial Fibrillation Study
- Bladder Cancer Therapy
- Cardiovascular Risk Reduction
- Geriatrics Ethics

WOMEN'S HEALTH NURSING

- Breast Cancer Treatment & Prognosis
- Infertility Ethical Rules
- Menopause Challenges
- Ovarian Disorder Analysis
- Pregnancy Prevention Measures
- Reproductive Endocrinology

COFFEE BREAK

MENTAL HEALTH NURSING

- Depression
- Alcohol Addiction
- Schizophrenia
- Bipolar Disorder
- PTSD
- Psychiatric Patient Ethics
- Nursing Interventions therapies
- Awareness Programmes

NURSING ABOUT PAIN MANAGEMENT

- Tolerance
- Physical dependence
- Addiction
- Pseudoaddiction
- Alternate ways to treat pain

PRIMARY HEALTHCARE NURSING

- Health promotion
- Illness prevention
- Rehabilitation & Palliation
- Chronic illness management
- Quality control
- Nutrition & Healthcare
- Family Medicine

HALLMARK OF EXCELLENCE IN NURSING EDUCATION

- Students
- Faculty
- Continuous Quality Improvement
- Curriculum
- Teaching/Learning/Evaluation strategies
- Innovative research
- Environment & Leadership

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CONCURRENT EDUCATIONAL SESSIONS

WEDNESDAY
OCTOBER 26
2022

NURSING ON OBSTETRICS

- Historical development of Obstetrics
- Magnitude of Mental health problem in Ethiopia
- Normal pregnancy
- Normal Labour
- Normal Puerperium
- Abnormal pregnancy
- Abnormal Labour
- Abnormal Puerperium
- Induction of Labour
- Congenital Anomalies
- Obstetric Operations

HEALTH PROMOTION

- Individual Perspective
- Empowerment
- Social & Health Policy
- Community Orientation
- Disease Prevention
- Authoritative approach

HEALTHCARE MANAGEMENT

- Medical Terminology
- Human Resources Management
- Health care Finance & Accounting
- Epidemiology
- Healthcare

PALLIATIVE CARE

- Key elements of Palliative care delivery Process
- Program Implementation
- Program Evolution

GROUP PHOTO | COFFEE BREAK

EVIDENCE BASED NURSING EDUCATION AND PRACTICE

- Goal of EBP
- Steps in EBP
- Sources & Hierarchy of Evidences
- Models of EBP
- Barriers of EBP

CLINICAL NURSING

- Roles & Responsibilities
- Steps followed to achieve safety
- Clinical Nursing and Evaluation
- Clinical Nursing Research
- Clinical Treatment
- Disease Management
- Spheres and core competencies

PERI-OPERATIVE NURSING

- Phases of Perioperative nursing
- Types of surgery
- Surgical settings & consent
- Physical Assessment/ Clinical Manifestations (Nursing History)
- Gerontological & Psychological considerations
- Surgical team members & their roles

HOLISTIC NURSING

- History
- Standards & Scope of Practice
- Responsibilities of a Holistic nurse

LUNCH BREAK

PREVENTION AND CONTROL OF COMMUNICABLE DISEASES

- Roles & Responsibilities of nurses
- Guidelines
- Communicable disease Reporting
- Communicable disease Control & Management
- Immunization Resources

ADVANCES IN NURSING

- Telehealth & Telenursing
- Nursing Informatics
- Photovoice
- Patient Identification Technology
- Smart Beds

NEW TECHNOLOGIES IN NURSING EDUCATION AND PRACTICE

- Impact of Emerging Technology on Nursing Care
- Electronic IV Monitors
- Sphygmomanometer
- Information Management
- RFID technology
- Local wireless telephone networks

NEW LEADERSHIP DEVELOPMENTAL MODEL FOR NURSING EDUCATION

- Purpose of Leadership Developmental model
- Phases of Leadership developmental model



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FUTURE NURSING 2022

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Testimonials



Thank you for allowing me to participate in the 3rd GLOBAL NURSING CONGRESS. There was a diversity of speakers and topics that were relevant to the nursing profession. The PDF of the speakers and topics was very comprehensive. The quality of the topics and research presentations were outstanding and often thought provoking. They were a number of presentations that were helpful to my own professional development. The speakers were very professional in both their presentation and appearance. As for me, a presenter, Peers Alley made it very easy to participate and to address the usual IT challenges that can happen in a virtual format. Thank you for the opportunity to participate with many fine researchers and presenters. Congratulations to Peers Alley Media for an excellent Congress.

Allen Walter Siegel University of Maryland Upper Chesapeake Health System, USA



I think the event excelled in the quality of the lectures and was an excellent aggregator of knowledge for different areas of nursing practice. In particular, I am very happy and grateful for the opportunity to contribute with colleagues on the current possibilities of virtual interventions to support caregivers of people with dementia, and to discuss the economic and social impact of this condition. I congratulate the organizers for the careful selection of speakers, who showed with their work the advancement of care and research in nursing practice around the world. My sincere thanks to the organizing committee and all colleagues participants! See you soon!!

Ceres Ferretti University of Sao Paulo, Brazil



The quality of the speakers was excellent, although I was only able to attend for half a day. The number of delegates was low but the quality was high, which is important, and I made some good connections.

Roger Worthington Royal Stoke University Hospital, UK



Thank you for a great congress, I really enjoyed participating.

Susann Porter Malmo University, Sweden



In my view, the congress was very well and comprehensively prepared for participants and speakers. The lectures covered a very broad spectrum of nursing. Very good! For myself I was able to take away a lot of impulses for my everyday professional care. Big thanks to the Peers Alley Media organizers and program head Christine Rose

Simone Ries Protestant University of Applied Sciences, Germany

Testimonials



Thank you for offering the opportunity to give the keynote speech at the congress and your kind words. Looking forward for future collaboration.

Igal Iancu Edocate Ltd. Israel



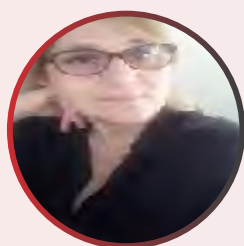
Thank you for this wonderful opportunity. I have attended Future Nursing Conference and Global Nursing Conference organized by Peers Alley Media, Canada. The Organizers are so kind and friendly. The topics selections were really great and excellent. I must attend upcoming conferences as well.

Kalliopi Megari, Aristotle University of Thessaloniki, Greece



It was a pleasure to participate. I think Peers Alley Media did a great job facilitating this wonderful nursing congress. I would love to attend the future nursing conferences organized by Peers Alley Media.

Kirsten Nielsen VIA University College, Denmark



The speakers came from diverse backgrounds from different countries and it was important to hear what is going on in other countries and problems they are researching. Researchers were doing research in diverse areas which can be valuable to preventive care in future. Peers Alley Media did choose thought provoking diverse speakers.

Manana Machitidze University of Georgia, Georgia



I have attended Global Nursing 2022 conference. The quality of the talks was outstanding, and the themes which were covered were wide-ranging. All the talks were of great interest. The conference certainly contributes to professional formation and offers ample opportunity to meet and exchange ideas with others working in related fields. Peers Alley Media organized the event with professionalism and competence. It was a pleasure to be able to attend.

Monica Moura da Silveira Lima Universidade Federal Fluminense, Brazil

Testimonials



Thank you to the Future of Nursing for finding amazing speakers who have published great work to propel out profession forward. I learned so much from all the presenters.

Taline Omran Vanguard University, USA



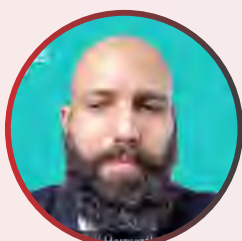
Excellent presentations and well organized program. I don't want to miss the conferences in future organized by Peers Alley Media.

Anahita Divani Tehran University of Medical Sciences, Iran



Dear Peers Alley Media, Thank you for an exceptional conference held August 10 and 11, 2021: The Future of Nursing 2021. The conference was very well organized giving credence to all scientific reports provided by academic researchers worldwide. The time frames provided to each presenter including the question and answer portion was adequate. The moderator did a great job in ensuring that the speakers were very well acknowledged. I have benefitted professionally from a wide range of subject matter presented by each speaker. Nursing education was highly emphasized focusing on transformational methods in teaching and learning to mitigate the challenges faced by nursing and healthcare in 2021 and beyond. Peers Alley Media, Canada, carefully selected international speakers who provided everyone with research findings that added to the body of knowledge in academia and healthcare. It was exciting connecting with colleagues from various countries of the world!

Marie Antoinette Antoinette L. Ortaliz Marie Ortaliz Center, Inc, New York, USA



Many thanks for this conference and for the invitation to participate here. I really enjoyed this activity. High-quality speakers from all over the world, which adds up to the knowledge of nursing. The inclusion of other professionals directly involved in nursing care was also important due to the possibility to learn from other disciplines. This conference helped me boost my professional expertise as well as my understanding of nursing professionals in different contexts of care. Cultural backgrounds of speakers and settings of the studies presented were also an added value to this. I feel like the organizers did a good job by selecting the speakers for such an invaluable event.

Raul Hormazabal Salgado University of Talca, Chile



Hi All, sorry I have to leave now as I have an engagement. It was a pleasure to present at the conference and also to hear such amazing presentations. To the organizers, thank you for this great opportunity.

Ali Raza NHS Foundation, UK

Testimonials



It's was my pleasure to attend this international conference and I think the Global Nursing 2022 is perfect. To be honest, it's good for me, which provided me with knowledge of new advances.

Vilza Aparecida Handan de Deus Universidade Federal Fluminense, Brazil



The quality of the talk was good. I believe such event could really improve the professional development. I would like to thank you once again for all you efforts. I will be looking forward to attend many more conferences like this.

Kourosch Delpasand Guilan University of Medical Sciences, Iran



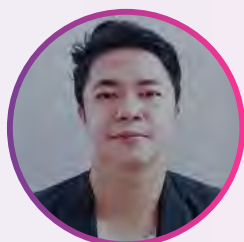
The quality of talks at Future of Nursing 2022 is very good and it is very important to share all the international expertise. Additionally, Peers Alley Media, Canada, do a good job by selecting speakers for thought-provoking sessions for this event.

Jingjing Piao HeBei University of Chinese Medicine, China



My name is Vanessa Braga, I am a nurse and researcher at the University of São Paulo, Brazil. I would like to share my experience in participating in the 2nd International Conference on the Future of Nursing and Nursing Education Organized by Peers Alley Media. The event was very interesting because it allowed researchers from different countries and realities to exchange experiences. It was a great opportunity for me to publicize and share the results of my research. I had all the support I needed to prepare and submit my presentation. The organizers were attentive and answered my questions promptly by email. Furthermore, they were responsible and ensured that my presentation was shown on the day of the congress. Therefore, I would like to thank you very much for the opportunity and hope to participate in other scientific events".

Vanessa Braga University of Sao Paulo, Brazil



It was indeed a great professional and educational experience to listen to the eloquent speakers informing us of their research reports. Conferences like this are worth participating in. I will be looking forward for more conferences that Peers Alley Media host.

Leonard Ivan T. Melana Ifugao State University, Philippines

Testimonials



My fellow researchers had impressive CVs and I was honoured to find myself amongst such esteemed company. They presented research that was relevant and interesting. It was obvious from the published findings that it would make an important contribution to health, health professionals and the society at large. In stating that, overall the quality of talks was of a high standard. This was the first time that I was presenting at a global event and to an international audience.

Udesvari Naidoo KwaZulu-Natal College of Nursing, South Africa



I think the event excelled in the quality of the lectures and was an excellent aggregator of knowledge for different areas of nursing practice. In particular, I am very happy and grateful for the opportunity to contribute with colleagues on the current possibilities of virtual interventions to support caregivers of people with dementia, and to discuss the economic and social impact of this condition. I congratulate the organizers for the careful selection of speakers, who showed with their work the advancement of care and research in nursing practice around the world. My sincere thanks to the organizing committee and all colleagues participants! See you soon!!

Veronica Bessa de Paulo de Moura Universidade Federal Fluminense, Brazil



Thank you very much for the invitation. I have learned a lot and all and all the presentations were excellent and very interesting, congratulations for your great event.

Reyna Isabel Hernandez Pedroza University of Guanajuato, Mexico



I would like to express my pleasure to be given the opportunity to participate in the 3rd global nursing congress. Regarding the quality of the talks, I believe they are of high quality and the diversity of speakers gives new insights into global cooperation. The Peers Alley Media well done and well organized this event

Ahmed Hassan Albelbeisi Tehran University of Medical Sciences, Iran



Thanks for giving me the opportunity to participate in GLOBAL nursing 2022. It is a fruitful and enriching experience to meet the nursing scientific community around the world and to exchange the convincing results of research to promote nursing sciences. I will be very happy to be with you another time in the next conferences concerning nursing sciences.

Khadija Guejdad Higher Institute of Nursing Professions and Health Techniques, Morocco

Testimonials



Indeed I enjoyed this nursing conference sessions.
Hope to attend future conferences as well.

Elizabeth Zakariah Mika Hubert Kairuki Memorial University, Tanzania



Wonderful to hear what others are doing in nursing around the world. It reminds me why I became a nurse. Thank you all for a wonderful conference.

Cathleen Lindauer Johns Hopkins Bayview Medical Center, USA



Peers Alley Media, Canada was able to bring together nurses from different geographical areas. It was a great opportunity to listen to different ground-breaking ideas of excellent speakers on the forefront of nursing and nursing education. It was a valuable conference which I believe will propel me to grow personally and professionally. Congratulations to Peers Alley Media, Canada for a huge success on your 2nd international conference. You did a great job! The registration was efficient, your motivation was exuding, the way you cater the speakers was commendable and you have chosen highly credentialed speakers, yet they remain humble. I would like to express my gratitude to the organizers of this international conference- Ms Jessica Parker, Ms Babita Mahanta and your team. All presentations are remarkable. Thank you so much for making me part of this conference, which I consider milestone in my life. God bless and more power.

Jesusa V. Gutierrez University of Tabuk, KSA



Hello Everyone. My name is Endah Widhi Astuti. I am from Jakarta, Indonesia. I just want to say thanks for giving me this opportunity. This is very good experience for me because I can meet some experts around the world in this nursing alliance. Thank you again.

Endah Widhi Astuti Health Polytechnic of Surakarta, Indonesia



Great Conference, great speakers, with great presentations. I gained a lot from the two day conference.

Gloria Tonye Dikibo Texila American University, India

Testimonials



It's been a pleasure for me to be a part of the conference-future of nursing2021. Thank you so much for your kind cooperation throughout, you have been very patiently working over this and I really appreciate the hard work behind this. Kudos to whole team.

Shobha Tatyaba Jagadale Sadhu Vaswani College of Nursing, India



The quality of all the selected and presented topics was excellent. Certainly a multidimensional aspect of nursing education has been exalted and how much could be done in all different care settings. I realize that not all experiences could be evaluated through data and statistical formulas; therefore the choice to present experiences of one's work was undoubtedly a winning one!

Elsa Vitale Local Health Company Bari, Italy



Thank you for running a great conference, and for the opportunity to present my work.

Marrit Meerdink University Hospitals Bristol and Weston NHS Foundation Trust, UK



Hello Everyone. Thanks for inviting me to participate in the international nursing conference. It has been a new wonderful experience. Congratulations for the Organisation and Peers Alley Media for inviting highly experienced speakers. We learned a lot from their presentations. I loved all the presentations. Well organized conference. This is an excellent opportunity to share our research and learn from other more experienced speakers. Great experience and a highly recommended event. Thank you again. I hope to see you next year as well.

Miryam Gonzalez-Cebrian University Hospital, Salamanca, SpainIndonesia



It was my pleasure to participate in this international conference. I like the presentations given by other participants. It is really good conference. I enjoyed a lot. Thanks for giving this opportunity.

Francois Mbonyinshuti University of Rwanda, Rwanda



Dear Peers Alley Media, I am writing to thank you for giving me this opportunity to participate in this professional conference held on 10-11 of August in 2021. The event was well organized by inviting nursing scholars worldwide with different cultural and scientific backgrounds. The time and duration of the presentations were well planned. The moderators were accessible and answered the questions soon. This conference helped me become familiar with new colleagues and also gave me new ideas for Future research. Well done!

Raheleh Sabetsarvestani Necmettin Erbakan University, Turkey

Testimonials



Thanks everyone for listening. It has been so wonderful to be here and share knowledge. Wonderful conference it was. I gained a lot of knowledge.

Martha Mbewe Mwelwa University of Zambia, Zambia



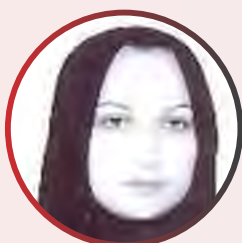
It is great honour for us to attend this great conference. The organizers did good job. They organized the event perfectly. Good communication between us. All presentations are attractive. It is amazing to hear the different ideas on nursing from the people around the world. We really gathered lot of information from this conference. We got inspiration from some of the presentations. Thank you again for the invitation. Hope to attend future conference as well.

Xiangyu Zhu Beijing University of Chinese Medicine, China



It's been a pleasure for me to be a part of this conference. The quality of the talks was excellent and appreciated. It was a valuable conference and I learned a lot from this conference. Peers Alley Media did an excellent job by selecting speakers from around the world with diverse cultural and scientific backgrounds. In my professional development, this event helped me to improve my skills a lot. I feel very flattered and very much grateful this opportunity to meet the other colleagues from throughout the world. This is great conference. All the delegates enjoyed a lot. Hope to see you again in the future. Thank you all.

Enriqueta Tellez Perez Instituto Mexicano del Seguro Social, Mexico



The conference was excellent. Well organized. The quality of all the selected and presented topics was excellent. Organizers are very much supportive and helping. Answering every question smoothly. We were completely satisfied with the process.

Parand Pourghane Guilan University of Medical Sciences, Iran



This is Dr. Suresh from India. I am very happy to join this future of nursing conference. Well organized event and experienced Speakers. A Highly recommended conference.

Suresh Kishanrao State Rural Development and Panchayat Raj University, India



Thank you for giving this opportunity. Excellent Speakers and well organised conference. Congratulations to Peers Alley Media and organizers for making this huge success. I enjoyed a lot. Thank you again.

K. Sesha Kumar Health and Wellness Centre, India

Testimonials



Interesting and valuable conference. Thank you for the organizer. Amazing conference.

Budour Bandar Alotaibi Prince Sultan Military Medical City, KSA



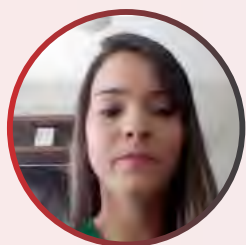
Hi everybody. This is Alex from Hong Kong. This nursing conference is very useful and meaningful. The organization of Peers Alley Media gathered well experienced nursing and healthcare professionals from all around the world. My presentation is about "Impacts of covid-19 pandemic on psychological well-being of older adults". I learned a lot from this conference so therefore I enjoyed very well in this conference. I hope to see you next year conference also.

Chan Siu Wing Alex The Hong Kong Polytechnic University, Hong Kong



The conference was excellent. Well organized. The quality of all the selected and presented topics was excellent. Organizers are very much supportive and helping. Answering every question smoothly. We were completely satisfied with the process.

Fatemeh Mansouri Guilan University of Medical Sciences, Iran



Hello All. It was honour to participate in future of nursing 2021 conference. I learned a lot from other presentations given distinguished speakers from throughout the world that helped to improve my scientific knowledge. This is great conference. I hope to participate in next year alliance and to be able to bring more Brazilian research to the world. Thanks to everyone.

Rayane Alves Moreira Universidade de Brasilia, Brazil



It is great honour for us to attend this great conference. The organizers did good job. They organized the event perfectly. Good communication between us. All presentations are attractive. It is amazing to hear the different ideas on nursing from the people around the world. We really gathered a lot of information from this conference. We got inspiration from some of the presentations. Thank you again for the invitation. Hope to attend future conference as well.

Yu Zhang Beijing University of Chinese Medicine, China



Thank you everyone for listening to my presentation. It was a pleasure to meet with you

Mary Koslap-Petraco Stony Brook University School of Nursing, USA

Testimonials



Thank you Peers Alley Media. It was very well organised event.

Arun Gupta Armed Forces Medical College, India



Thanks so much for the opportunity to present, great work organising the event. This is an excellent opportunity to share best practice and learn from other internationally renowned professors, researchers and healthcare professionals. A highly recommended event which is not to be missed!

Ali Raza NHS Foundation Trust, UK



Thank you everyone for listening to my presentation. It will surely attend many more upcoming conferences in the near future. The conference is simply the best. So educating and inspiring. To the organisers, we salute you for the job well done. I am looking forward to attend future conference as well.

Martha Mbewe Mwelwa University of Zambia, Zambia



Thank you for listening to me and for the great opportunity to participate in this great event. I really appreciate the organizers for inviting eminent and excellent speakers from the entire globe. I would like to immensely thank you for the opportunity to participate in such an enriching event. Thank you very much.

Alba Otoni Federal University of Sao Joao del Rei, Brazil



Congratulations. It was a great congress. Excellent program and speakers are well experienced. Thank you for giving me this opportunity to attend this important conference.

Setyowati Setyowati University of Indonesia, Indonesia



All of us appreciate your great efforts to complete this fruitful conference. I gained more knowledge and experience form this conference. Please invite me in future nursing conference as well. This is really global conference. Thank you one and all.

Khadra Mohammed Atiea Fayoum University, Egypt

Testimonials



I would also like to thank all the congress team for this beautiful congress.

Berna Akcakoca Ege University, Turkey



Thank you all wonderful team for your efforts in the organizing of this congress. It Was Insightful. All the presenters I listened to were very good. Thank you for encouragement and support for research work.

Gloria Tonye Dikibo Texila American University, India



Thank you for all. We are honoured to participate in this great world congress. Congratulations to the all speakers.

Natascha Goncalves Hospital Israelita Albert Einstein, Brazil



Thanks for Peers Alley Media for giving this opportunity to attend this conference. Excellent program was really good. We enjoyed a lot.

Vanessa Pires Hospital Israelita Albert Einstein, Brazil



Thank you everybody. It was my pleasure to attend this great conference. I really enjoyed this conference. I think it's very important to know how is nursing in all over the world and this kind of event allow us to know it. Thank You.

Ana Belen Salamanca University Hospital 12 De Octubre, Spain



Thank you for the opportunity. I have attended the entire conference and learn many things. I also done presentation and was impressed. I would like to attend next year conference as well. Thank you so much.

Michiyo Ando Daiichi University of Pharmacy, Japan

Testimonials



Thank you for the invite. I am really glad.

Lea Normand Nielsen North Zealand Hospital, Denmark



Thank you for the fine and well-organised conference. Thanks again for allowing me to give a presentation.

Brecht Van Vaerenbergh Department Urology OLV-hospital, Belgium



Congratulations!! It was a great congress. Good Speakers and well organized program.

Esra Sabanci Baransel Inonu University, Turkey



Congratulations on the organization and realization of the very valuable Congress of Nursing. I watched the whole congress attentively and in every session. Perfect work by Program Director and Organizers of the Peers Alley Media

Anila Cake Faculty of Technical Medical Sciences, University of Medicine, Albania



It is with pleasure that I participated in your very well organized event. It will be an honour for me to participate in your next events.

BOUZID Jawad Hassan First University, Morocco



It was a great pleasure for us to participate in your congress which was very well organized. Please don't hesitate to invite us again.

MINKA Sally Oceane & MINKA Fadi Hillary Paris University, France

Testimonials



Thank you for offering the possibility to participate in your well organised conference. Looking forward of working together with you in the near future.

Edda Weimann University of Cape Town, South Africa



I also sincerely thank you for the excellent management of the conference and for the opportunity you have given me to present my paper. I will be very happy if you invite me to present my research in the upcoming conferences.

Reza Besharati Islamic Azad University, Iran



Million thanks to the organizers for their great efforts & care. Hope to work more together in the near future surely.

Eman Salman Taie Helwan University, Egypt



I am so thankful for the organizers and Peers Alley Media. All the speakers had innovative and intellectual talks. The event was a wonderful experience and I hope I will be part of the next congress as well.

Isabel Melendez Mogollon Instituto Superior Tecnológico Libertad, Ecuador



Congratulations on the successful hosting of Global Nursing Congress 2021. You've been preparing and working really hard. Once again, congratulations for hosting of Global Nursing Congress 2021 successfully.

Hong Mi Suk Pusan National University, South Korea



I just want to thank Peers Alley Media for having me to present my research work. It's really wonderful host, welcoming, friendly and very professional. I really appreciate the organizers for welcoming good speakers. All speakers presented very positive manner. It's a really good conference. Thank You.

Catherine Jameson St Wilfrid's Hospice, UK

Testimonials



I really thank organizer for giving me this opportunity to share our research experiences at nursing conference. We also have a good chance to learn more about the variety of nursing activities through this conference. A highly recommended event.

Nongnut Boonyoung Prince of Songkla University, Thailand



It was a really very fruitful conference. Many speakers attended this conference from all over the world. They are more informative, knowledge and creative speakers. Well organized conference. I really enjoyed this conference and sharing my paper

Yaldez K. Zein Eldin The British University in Egypt, Egypt



Hello all. I was one of the speakers at Global Nursing Conference. It was a great experience. I could know well experienced researchers from all over the world. It was a great time and I hope to join again. Good event for this year.

Eliane Cristina da Silva Pinto Carneiro Universidade Federal Fluminense, Brazil



Hello everybody. I am very much happy for attending this global nursing conference. I will surely attend future conferences as well. You all need to experience this great conference. Highly recommended event!

Hanan Morsy Salim Metwally Zagazig University, Egypt



I am very happy for attending this nursing conference. The event was a well-organized and looking forward to attend next congress also.

Satomi Tanaka University of Human Environments, Japan



It's really glad to attend global Nursing conference. We enjoyed the program lot. Well organised conference. Organizers are very friendly and cooperative in all aspects. Thanks once again.

Diah Arruum Faculty of Nursing, Universitas Indonesia, Indonesia

Testimonials



Hello everyone. I am very happy to appreciate of Peers Alley Media the back bone of global nursing 2021 because of your continues hard work made this event remarkable. Through this program Peers Alley Media provided a global platform for nurses around the world to speak about emerging ideas of various aspects nursing profession. The two days program was organised in an excellent manner especially time management and selection thought provoking topics for the event. All the speakers were presented very well. Personally I am very happy to part of this Program because though this event I got platform to speak about my research findings. Once again I congratulate all the team members of global nursing for making this program a great Success.

Athul Tintu Carmel College of Nursing, India



I really thank organizer for giving me this opportunity to share our research experiences at nursing conference. We have learned many more nursing topics through this conference. We really enjoyed this program. It was a great experience. Hope in future will get such wonderful chance.

Charuwan Kritpracha Prince of Songkla University, Thailand



Hello Everybody. It was really a great experience to be a part of such a wonderful international conference GLOBAL Nursing 2021. The quality for the program was really good. Excellent Speakers and well organised program. I am also interested and looking forward to attend such conferences by the Peers Alley Media in the upcoming days. Thanking you.

Chandni Rufaida College of Nursing, India



The speakers came from diverse background from different countries and it was important to hear what is going on in other countries and problems they are researching. Peers Alley Media did chose thought provoking diverse speakers

Sampooranam. W Dhanvantri College of Nursing Pallakkapalayam, India



The conference was conducted excellent. I enjoyed and learned too much. We had some discussion with presenters and wish to have bilateral collaboration with them in the future. All the answers of questions is excellent.

Hassan Vatandoost Tehran University of Medical Sciences, Iran

Testimonials



Thanks for your email. I wish to extend my sincerest gratitude to you and your team for the opportunity to participate in the conference. Indeed, you put together a successful conference and the presentations were stimulating. The host did an excellent job and I commend him for his professionalism and patience.

Nana Amma Acheampong University of Maryland Global Campus, USA



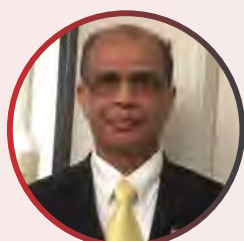
It was very nice to participate in the conference. The quality of the talks was nice and nice to gain the knowledge of research from other international participants. I love to share my knowledge with other researchers and also love to know the research of others that's why I love conferences a lot. Nevertheless, it gives me knowledge about recent progress in infectious disease. It was a good selection of speaker from the international research community. I am happy with this.

Neetu Talreja University of Concepcion, Chile



The conference had a broad range of public health topics that were discussed by speakers from varied settings including clinicians, epidemiologists, economists, etc. Hence it gave exposure to different public health problems from different countries. Thanks for your time and kind consideration.

Rebecca Pratiti McLaren Health Care, USA



The speakers came from diverse background from different countries and it was important to hear what is going on in other countries and problems they are researching. Researchers were doing research in diverse area which can be valuable to preventive care in future. Peers Alley Media did chose thought provoking diverse speakers.

Hemant Thakur V.A. Medical Center, USA



The quality of talks at this conference is very high quality. The presentation are diverse. Peers Alley Media, Canada did an excellent job in selecting speakers.

Ana Claudia Trocoli Torrecilhas Federal University of Sao Paulo (UNIFESP), Brazil



I thought the talks were very good with a great range of topics. The conference staff did a good job. I enjoyed being a part of the conference and appreciate the opportunity to present on my paper.

Kristen M Agena A.T. Still University of Health Sciences, USA

Testimonials



The event was extremely well organized, not only at the event itself but before as well. It was handled professionally on your side and conducted fluently. Regarding the speakers, as these kind of events are the places we can contact new researchers for future collaboration. Many thanks for invited me, I have enjoyed the event.

Dorit Avni MIGAL - Galilee Research Institute, Israel



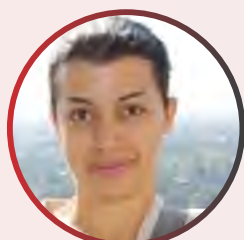
Thanks for your email. The quality of talks are good. I joined twice during the event & saw participants from different countries. Some of the content was really up to mark. The topics selected were well thought and delivered.

Nazia Mumtaz Riphah International University, Pakistan



The presentations were of good quality. Not all presentations dealt with topics close to my interests, however most of them were interesting to me. However this could in establishing contacts for international projects, I hope! The selection work was good even if the sequence of relations was not always consistent, perhaps due to the different time zones.

Patrizia Guidi University of Pisa, Italy



The quality of the talks were good and covered a wide range of topics. I enjoyed the conference because I could learn new approaches presented by other researchers and I could also make new contacts. Participation at this conference allowed me to know complementary research areas, learn about them and plan some future collaborations.

Marta Madalena Marques de Oliveira Instituto Politécnico do Porto, Portugal



I think that there was a high quality congress. The experience was a great. I really enjoyed the conferences and I learn a lot. I think that the congress will help positively for my personal development. I think that Peers Alley Media did a great job.

Adrian Lopez Alba 12 de Octubre University Hospital, Spain



Thank you a lot for this respectable conference. It seems to me that the quality of talks was very good. I enjoyed and loved the meeting. I guess it will be helpful in my work. Also I believe that Peers Alley Media, Canada did great job.

Maher Khader Mustafa Queen Rania Children Hospital, Royal Medical Services, Jordan

Testimonials



The quality of talk was amazing and speaker presented their topic in a great and professional manner. I really enjoyed every minute of it. I am really thankful to you because this presentation will help me a lot in future. This conference help me to learn from highly professional speakers that how to present your work. I really appreciate the job of your organization and indeed the host was very humble. I am looking forward to work with you in near future. Thank you very much.

Muhammad Hanif Hayatabad Medical Complex, Pakistan



It was really a wonderful experience for me and I must say that organizational part was also excellent despite ongoing pandemic.

Rajan Ghimire District Hospital, Nepal



I have to seen that the level of the conference was high scientific and it was very useful for my future researches and teaching. I appreciate so much the work done to conduct such very excellent webinar. I hope to cooperate in future.

Amir Hossein Mahvi Tehran University of Medical Sciences, Iran



This was an awesome conference with a lot of speakers which gave a lot of great research. Peers Alley Media has been very good at managing speakers. Thank you for organizing this conference very well. Thank you.

Diah Indriani Universitas Airlangga, Indonesia



I hereby express gratitude and appraisal to the peers alley media for holding an international conference. All the speakers had innovative and intellectual talks. This conference has been a platform for transformation of academic knowledge for the health care professionals and the public as well. I also appreciate the best services of program director and other concerned personas.

Muhammad Ahmad Alamgir Bahawal Victoria Hospital / QAMC Bahawalpur, Pakistan



It was a great pleasure to attend that conference. Thanks once again.

Ralph Udeh University of Newcastle, Australia

Testimonials



It was a great experience. Hope in future will get such wonderful chance.

Shrabanti Maity Vidyasagar University, India



Peers Alley Media did great job in organizing the meeting, including the design of the conference book and arrange of the speakers.

Huan-Huan Wei Chinese Academy of Sciences, China



It was really a great experience to be a part of such a wonderful international conference. I consider myself very minimal in front of such high impactful & notable jury of people invited as honorable speaker. The vast quality and distributed field of eminent researchers were the main source of inspiration for the spectators or audiences. I think this actually helped everyone to gather huge knowledge unknown & interesting facts during this pandemic situation. I feel this level of conferences should be taken forward for the betterment of mankind as well as society. Moreover, it will actually help all of us to relate our own research with medical or healthcare field. I personally appreciate the huge level of support & coordination from your entire PMPH team management. PMPH service should be applauded in all formats. Really great work done during such tough times. It was a great pleasure to contribute minimum from my end. I am also interested and looking forward to attend such conferences by the Peers Alley Media in the upcoming days. Thanking you.

Subhrajit Mukherjee Indian Institute of Technology Kharagpur, India



The two-day conference has been truly beneficial and a great learning experience for me. Thanks to this conference, I can confidently add public speaking to my list of skills. I learned a lot from listening to the engaging and extremely insightful presentations from seasoned researchers and practitioners in the medical and other related fields. I believe the best practices I learned from the competent line up of speakers would help me a great deal in my professional life. Most importantly, the conference offers remarkable opportunities to network and collaborate with other researchers in the future. Peers Alley Media did not disappoint with an impressive line-up of competent and dynamic speakers whose presentations were not only of high quality but also contributed to the advancement of the research on public health.

Nana Amma Acheampong University of Maryland Global Campus, USA

Testimonials



The program had an excellent speakers from different parts of the world, who are experts in their field. The meeting definitely contributes to the professional development of all presenters. Peers Alley Media, Canada did a great job selecting speakers for the event. Thank you.

Angela N. Buffenn University of Southern California, USA



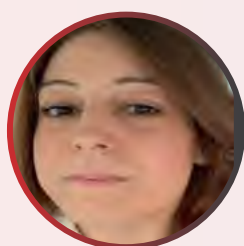
Let me first start off with congratulations to the team for organising this successful event! The quality of talks is reasonably good with a mix of diversities, that in my opinion, benefits participants and audiences who come from various fields. This selection is in-line with current trend of cross discipline exploration and research collaborations. For the reason above, I feel that this conference provided eye-opening experience and raised interesting ideas that may help in my work. Peers Alley Media, Canada did a remarkably good job and I wish to thank you all for your great effort. Thank you for the great job once again, cheers to all!

Steven Loh Nanyang Technological University, Singapore



The conference was good and the quality was great.

Jessie Childs University of South Australia, Australia



Thank you for the wonderful opportunity!! The conference was very interesting and the quality of the talk was very high. I have enjoyed the conference. It was a great experience to listen to the studies and thoughts of researchers all over the world. Thanks to Peers Alley Media Canada for providing this platform to share my research with other researchers with diverse expertise in medicine.

Monica Benvenuto University of Rome "Tor Vergata", Italy



Thank you for the opportunity to share my knowledge with a broad audience. I should note the high level of organization at each stage of the conference: accuracy and perfect coordination at the preparation stage, rapid access to all necessary information, high quality of conference materials (programme, collection of abstracts). Multidisciplinary presentations and a wide range of represented countries has raised interest to the conference, allowed expanding scientific horizons and hoping that scientific collaboration between different countries for the health of humans will remain beyond political differences of the countries.

Marina F. Gubkina Central TB Research Institute, Russia

Testimonials



First of all, my sincere congratulations to the whole team for their organisational efforts, both in Canada and in London. I understand how difficult it is to organise and run such events, especially in difficult times like these. As for the quality of the presentations: all were concise, clear, cohesive and on time. Undoubtedly, the great expertise of the speakers and the diversity of topics covered, allowed us to increase the knowledge for our professional life. I think the best was the diversity in the selection of participants. Normally such conferences end up with a program focused on medical care. This was not the case at Future of PMPH 2022, where the multi-diplinarity of public health was the north of the program. Another good thing that I think should be highlighted was the inclusion of the abstracts in the program information booklet, which allowed us to prepare our questions and doubts well in advance.

Jorge Mandl Stangl Ministerio Popular para la Salud, Venezuela



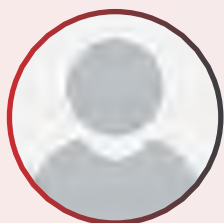
Thank you so much for the acknowledgement and recognition. It was a great conference. The diversity of speakers in every way has been enriching by itself. Great Work! I wish I was able to attend it face to face. It would have been phenomenal!!!

Aissetu Barry Ibrahima Northeastern Illinois University, USA



Personally, it has been very rewarding for me, especially when I am close to my retirement as an academic. Together with my wife we had a wonderful stay in London, at a very special stage of our lives. The organization and team of Peers Alley Media, who assisted us, were very friendly and professional. My congratulations.

Roberto Sanchez University of Concepcion, Chile



I presented a paper at the 2nd International Conference on the Future of Preventive Medicine and Public Health held in London in March 2022. The quality of the talks was outstanding, and the themes which were covered were wide-ranging. All the talks were of great interest. The conference certainly contributes to professional formation and offers ample opportunity to meet and exchange ideas with others working in related fields. Peers Alley Media organised the event with professionalism and competence. It was a pleasure to be able to attend.

Peter Walton Independent Researcher, UK



The quality of talks are very interesting.

Oliva Maria Eugenia National University of Litoral, Argentina

Testimonials



It was a great conference!

Christoph Lutge TUM Institute for Ethics in Artificial Intelligence, Germany



I'm quite satisfied with the quality of talks at PMPH 2022. Despite all the difficulties, full assistance was given by the management and made me feel confident. And I enjoyed the meeting. Although I participated in this conference via virtual meeting, the global connection encouraged me. Also, presenting and sharing opinions with global experts could contribute to my professional development. I really appreciate this opportunity. Yes, I'm quite satisfied with talks and sharing ideas about public health in diverse topics from all over the world. Thank you so much! I'm so honored to be invited to this PMPH, and grateful to be the recipient of this award. I really enjoyed this conference and look forward to the future PMPH also! Thank you so much for all your support!

Jungyoon Choi Vanderbilt University Medical Center, USA



The conference achieved its objectives and was valuable to support healthcare professionals. Overview, the knowledge can guide the idea to contribute to healthcare professionals' jobs. Many topics are related to my field, and I can apply the idea to my job. For example, engagement of care for older adults and the care program for preventing and caring in the institute and community. Peers Alley Media, Canada, did a great conference. The speakers have more experience related to their fields. That is nice to have speakers from any part of the world to share.

Supattra Changsuphan Sukhothai Thammathirat Open University, Thailand



They were excellent however the diversity was extreme considering my domain and the domain of most talks were from medicine and related fields. It is very far from my own topic, however listening to people from outside the domain might give very excellent ideas to go ahead. No comment, all are excellent in their domain. Very good achievement.

Mahmoud Rokaya Taif University, Saudi Arabia



Many thanks for your invitation and ask. It's my first time to attend international conference, and I think the Future of PMPH 2022 is perfect. To be honest, it's good for me, which provided me with knowledge of new advances.

Qinwei Fu Chengdu University of Traditional Chinese Medicine, China

Testimonials



First of all, I would like to address that this conference is a great event and provides a platform for people from public health and prevention medicine to share their research, clinical observations, and cases with people around the world. I did enjoy the participation and learned from other scholars. The talks are good. I appreciate the conference committee arranged diverse topics to present. The facilitator did a great job in connecting the presentations. I like the missions and purposes of the Future of PMPH. I strongly support and agree with them. I also believe the conference committee could create an international platform for people to discuss research and hot issues from the channel that has been created by your institute and develop their professional competence. I suggest hosting professional continuing education workshops, seminars, or webinars may be very particular months. Therefore, more people will be aware of your institute and hope there will be more people to participate in the annual conference. The Peers Alley Media Canada did an excellent job arranging speakers and topics for the sessions. It is very challenging to organize the people worldwide and set their presentations at times suitable for them. I appreciate that my presentation time was arranged at noon in my local time. My energy was great to present. I look forward to participating in future events with your institution. It has been my honor to be invited to present at the conference. Thank you very much for your coordination of the event and for supporting my presentation throughout the whole process. I look forward to participating in the conference again or events with your institute in the near future.

Yu-Ju (Julia) Huang University of Houston, USA



PMPH2022 combined renowned researchers, scientists and students to exchange ideas, to present sophisticated research works and to discuss hot topics and share their experiences on all aspects of Preventive Medicine and Public Health. This conference presented a wide variety program consisting of lectures covering all topics in Preventive Medicine and Public Health. This event aimed to attract global participants promoting the sharing, exchanging and exploring of new developments of Preventive Medicine and Public Health. Moreover, the conference offers a valuable platform to create new contacts in this field, by providing valuable networking time for the participants to exchange contacts. The lectures presented different appealing subjects that motivated the audience for a beneficial discussion with the speaker. Hope to see you next year!

Joana Filipa Barbosa Teixeira REQUIMTE-LAQV-Instituto Superior de Engenharia do Instituto Politecnico do Porto, Portugal



The quality of talks at Future of PMPH 2022 are good. Got some experience in the conference sharing. Peers Alley Media, Canada, did a good job.

Xiaolei Liu West China Hospital, Sichuan University, China

Testimonials



Thank you for coordinating the conference. The logistics arrangements were well managed.

Kathy Shum The University of Hong Kong, China



I only joined two half days of the conference. In my opinion, the virtual conference was organized well, on time, and follow the timetable. The speakers came from different fields and they had shared many interesting topics. The speakers had well prepared their slides and had great speaking. I had opportunities to listen to many hot and interesting topics, especially in economic, health, and social recovery after the Covid-19 pandemic. After the conference, I have some ideas for my future research ideas. The speakers were well selected and they are experts in their fields. They had great presentations. Thank you for your support and hope to see you at the 2023 conference.

Nu Quy Linh Tran Griffith University, Australia



Thank you so much for inviting me as a speaker at the 2nd International Conference on Future of Preventive Medicine and Public Health 2022. The quality of the talks was extremely good, than you for this academic fest. I definitely look forward to it in the future and pass is on to my colleagues as well. Thank you so much and many congratulations for making it a great success.

Gunjan Bahuguna All India Institute of Medical Science, India



The selected talks where excellent.

Avinash Hanbe Rajanna Rajiv Gandhi University of Health and Sciences (RGUHS), India



The quality of talks were very interesting and learned a lot. This kind of conference with sharing platform at international level leads to the professional enhancement at every level. Peers Alley Media done an excellent job.

Sonika Sangra GMC Kathua, India

Testimonials



The quality of the conference is excellent because I learned new knowledge from different aspects of medicine.

Ashraf Mansour University of Al Fashir, Sudan



The quality of talks at Future of PMPH 2022 are very good. Very good.

Deepa Selvi Rani CSIR-Centre for Cellular and Molecular Biology, India



Thank you so much for holding this great event. Almost all presentations were high quality talks. I have learned a lot about different aspects and vast range of health activities and research in preventive medicine and public health.

Mahla Daliri B.O Mashhad University of Medical Sciences, Iran



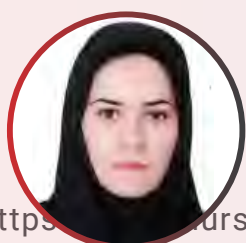
Thank you, the conference gave me an opportunity to present my research and practice and develop skills. This was my first international conference and in my opinion, the quality of the presentations was good and I enjoyed to listening to the presentations.

Anna Seitero Linkoping University, Sweden



Very high. All the papers were very interesting and the topics raised were topical.

Zdzislaw Kieliszek University of Warmia and Mazury in Olsztyn, Poland



Hi Everyone. I have attended whole conference. Topic selection was good. Thank you for the great conference and lectures are very good and useful.

Leila Mardanian Dehkordi Isfahan University of Medical sciences, Iran

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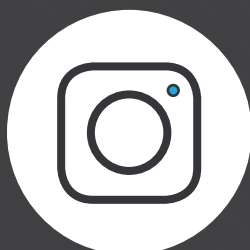
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 WhatsApp No: +1 873-889-8976

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VIRTUAL EVENT

4TH INTERNATIONAL CONFERENCE ON THE FUTURE OF NURSING AND NURSING EDUCATION

JANUARY 18-19

2022

**Theme: Advancing Healthcare Transformation: The
New Era of Nursing Education, Research and Practice**

Scientific Program

FUTURE OF NURSING 2022

<https://worldnursing.peersalleyconferences.com/>

DAY 1

JANUARY 18, 2022

Scientific Program

GMT-Greenwich Mean Time

09:45-10:00

Opening Ceremony

Keynote
10:00-10:30

Title: The integrated resilient student midwife

Jacqui Williams, The Open University, UK

Keynote
10:30-11:00

Title: Neuropsychological impact on patients with cancer

Kalliopi Megari, Aristotle University of Thessaloniki, Greece

Refreshment Break 11:00-11:10

11:10-11:30

Title: Covid-19: What it teaches us about the nature of illness

Keekok Lee, University of Manchester, UK

11:30-11:50

Title: Catastrophizing, resilience and social support affect the depressive symptoms in patients with knee osteoarthritis

Han Lu, Peking University, China

11:50-12:10

Title: Relationship between sleep and hypertension: Findings from the NHANES (2007-2014)

Li Chunnan, Peking University, China

12:10-12:30

Title: From wish to reality: Soteria in a psychiatric intensive care unit

Theresa Wolf, Oberhavel Kliniken Hennigsdorf, Academic Teaching Hospital of the Charite, Germany

12:30-12:50

Title: Surge capacity in the emergency department

Ruben Haesendonck, ZOL Hospital, Belgium

12:50-13:10

Title: The nursing education during the Covid-19 era

Elsa Vitale, Local Health Company Bari, Italy

Lunch Break 13:10-13:40

Keynote
13:40-14:10

Title: Namaste care: Helps people with advanced dementia live not just exist

Joyce Simard, Namaste Care International, USA

Keynote 14:10-14:40	Title: Impact of preceptor training on effectiveness of preceptors in delivery of knowledge and skill to nurse orientees Marie Antoinette L. Ortaliz , New England College, USA
14:40-15:00	Title: Intravenous Cetirizine vs Intravenous Diphenhydramine for the Prevention of Hypersensitivity Infusion Reactions: Results of an Exploratory Phase 2 Study Stacia A. Young , TerSera Therapeutics, USA
15:00-15:20	Title: Culturally responsive approaches to mental health care in Ethiopia Hana Meshesha , University of Montana, USA
15:20-15:40	Title: Factors associated with healthy ageing: A comparative study between China and the United States Lanlan Chu , St. Catherine University, USA
15:40-16:00	Title: Determining the effect of group flower arranging sessions on caregiver self-efficacy and stress levels in an in-patient hospice Joanne Lavin , CUNY School of Professional Studies, USA
Refreshment Break 16:00-16:20	
16:20-16:40	Title: Prevalence and predictors of depression, anxiety, and stress among Jordanian nurses during the coronavirus disease 2019 pandemic Rasmieh Mustafa Al-amer , Isra University, Jordan & Maram Darwish , Cardiff University Hospital, UK
16:40-17:00	Title: Differences in situation awareness after introducing clinical simulation scenarios into curricula and integrating information technology into teaching before and after nursing internships Li-Ping Tseng , Sisters of our Lady of China Catholic Medical Foundation, St. Martin De Porres Hospital, Taiwan
17:00-17:20	Title: Health of the human spirit: A spiritual well-being model for wellness Brian Luke Seaward , The Paramount Wellness Institute, USA
17:20-17:40	Title: Plume control in medical and cosmetic laser clinics: A practical guide Godfrey Town , Aalborg University Hospital, Denmark
17:40-18:00	Title: Acupuncture for Covid-19 patient after ventilator weaning: A protocol for systematic review and meta-analysis Xiangyu Zhu , Beijing University of Chinese Medicine, China
End of Day 1	



DAY 2

JANUARY 19, 2022

Scientific Program

GMT-Greenwich Mean Time

11:00-11:20

Title: How to get rid of visceral fat: A randomised double-blind clinical trial
Xanya Sofra, City University, UK

11:20-11:40

Title: Tandem care: A concept analysis
Leonard Ivan T. Melana, Ifugao State University, Philippines

11:40-12:00

Title: Acceptability and effectiveness of augmented reality-assisted cardiopulmonary resuscitation: A pilot randomized controlled trial
Luoya Hou, Peking University, China

12:00-12:20

Title: Hyperprogressive disease after radiotherapy combined with anti-PD-1 therapy in renal cell carcinoma: A case report and review of the literature
Jingjing Piao, HeBei University of Chinese Medicine, China

12:20-12:40

Title: Comparison of the use of manikins and simulated patients in a multidisciplinary in situ medical simulation program for healthcare professionals in the United Kingdom
Marrit Meerdink, University Hospitals Bristol and Weston NHS Foundation Trust, UK

12:40-13:00

Title: Living with bipolar disorder in Chile: A qualitative study
Raul Andres Hormazabal Salgado, University of Talca, Chile

Lunch Break 13:00-13:30

13:30-13:50

Title: Can you PACE Yourself? Using PACE in the clinical setting
Allen Siegel, University of Maryland Upper Chesapeake Health System, USA

13:50-14:10

Title: Phosphorus management in hemodialysis patients
Gulay Turgay, Baskent University, Turkey

14:10-14:30

Title: Understanding APA format: A course for students
Catherine Schwartz Doyle, Louisiana State University Alexandria, USA

14:30-14:50	Title: Euthanasia: Not an every day experience Charlotte Shaw , Medivet Heswall, UK
14:50-15:10	Title: Advances in nursing education, practice and research K. Sesha Kumar , Health and Wellness Centre, India
15:10-15:30	Title: The effect of covid-19 on chronic diseases Gurcan Arslan , Cumhuriyet University, Turkey
15:30-15:50	Title: Obesity myths and facts Ecler Ercole Jaqua , Loma Linda University Health, USA
Refreshment Break 15:50-16:00	
16:00-16:20	Title: Nightingale? Yes, she is still relevant today! Deva-Marie Beck , Nightingale Initiative for Global Health, Canada
16:20-16:40	Title: Nursing students' attitude toward the importance of patient privacy Kourosh Delpasand , School of Medicine, Guilan University of Medical Sciences, Iran
16:40-17:00	Title: Patient satisfaction with the quality of care provided by student nurses at Ndola Teaching Hospital in Ndola, Zambia Martha Mbewe Mwelwa , University of Zambia, Zambia
17:00-17:20	Title: Nurses' perceptions of the factors contributing to the development of the love of the profession: A qualitative content analysis Shahnaz Bolandianbafghi , Kashan University of Medical Sciences, Iran
17:20-17:40	Title: The role of the nurse administrator in healthcare services and healthcare built environment in Southern Nigeria Gloria Tonye Dikibo , Texila American University, India
End of Day 2	
Closing Remarks	





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MARCH 24-25
2022
London, UK

IN-PERSON CONFERENCE

3RD GLOBAL NURSING CONGRESS

**Theme: Challenges, Innovations and Approaches in
Nursing Education, Research and Practices**

Scientific Program

GLOBAL NURSING 2022

<https://globalnursing.peersalleyconferences.com/>

DAY 1

MARCH 24, 2022

Scientific Program

08:00-08:30 Registrations

08:30-09:00 Opening Ceremony

Keynote Session

09:00-09:30 Title: EBP Skill: Improving outcome measurement through item response theory
Angela Benfield, University of Wisconsin- La Crosse, USA

09:30-10:00 Title: Educating to address healthcare needs for refugees and displaced persons
Roger Worthington, Royal Stoke University Hospital, UK

Refreshment Break 10:00-10:20

Workshops

10:20-11:00 Title: Design thinking for a patient-centered innovation in the nursing industry: How hospitals can use the design thinking tool for processes, services and infrastructure around the patient
Judith Hantl-Merget & Scherm Matthias, RoMed Kliniken, Germany

11:00-11:40 Title: Making decision-making visible- teaching the process of evaluating interventions
Angela Benfield, University of Wisconsin- La Crosse, USA

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11:40-12:00 Title: Building a peer group community
Angela Cole, Mid South Essex NHS Trust/Barts Health NHS Trust, UK

12:00-12:20 Title: Bereavement needs of critical care nurses: A qualitative study
Taline Omran, Vanguard University, USA

12:20-12:40 Title: Direct to consumer genetic and genomic testing with associated implications for advanced nursing practice
Ashley Kate Hughes, Department of Veterans Affairs, USA

12:40-13:00	Title: Impact of waterpipe educational program on university students' who are active waterpipe smokers Mahmoud Ogla Al-Hussami , Univeristy of Jordan, Jordan
Group Photo	
Lunch Break 13:00-13:40	
13:40-14:00	Title: Estimating nickel exposure in respirable dust from nickel in inhalable dust Cornelia Ramona Wippich , Institute for Occupational Safety and Health of the German Social Accident Insurance, Germany
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16:40-17:00

Title: Waterpipe smoking and the coronavirus syndemic

Peter Walton, Independent Researcher, UK & **Khaled Alturki**, Medical Services Department, Saudi Arabia

17:00-17:20

Title: Efficacy and cost-feasibility of the timely chest compression training (T-CCT): A contextualized cardiopulmonary resuscitation training for personal support workers participating during in-hospital cardiac arrests

Catalina Sokoloff, CHUM Academy, Canada

17:20-17:40

Title: Using mobile phones in health behaviour change: Perceptions among adolescents

Anna Seitero, Linkoping University, Sweden

17:40-18:00

Title: Assessing understanding of caregivers on immunization and COVID-19 vaccines using a survey instrument

Gozde Ercan, Sancaktepe Education and Research Hospital, University of Health Sciences, Turkey

End of Day 1



DAY 2

MARCH 25, 2022

Scientific Program

Introduction

Oral Session

09:00-09:20

Title: Privacy-preserving federated clinical analytics

Roel Wuyts, Imec's ExaScience Life Lab, Belgium

09:20-09:40

Title: Integrated management of HIV/NCDs: Knowledge, attitudes, and practices of health care workers in Gaborone, Botswana

Tiny Masupe, University of Botswana, Botswana

09:40-10:00

Title: Comparing knowledge, attitudes and practices regarding COVID-19 amongst Cameroonians living in urban versus rural areas

Atabong Emmanuel Njingu, University of Buea, Cameroon

10:00-10:20

Title: Gender differences in the association between serum uric acid, body mass index, blood pressure and kidney functions in a population with prehypertension history: A cross-sectional study

Mochammad Sja'bani, Universitas Gadjah Mada, Indonesia

Refreshment Break 10:20-10:40

Poster Session 10:40-11:20

Oral Session

11:20-11:40

Title: Exploring Maternal Health in Ethiopia Using Indigenous Approaches: Policy and Practice Implications

Aissetu Barry Ibrahima, Northeastern Illinois University, USA

11:40-12:00

Title: Empowering digital transformation: A Human Biomonitoring (HBM) Global Registry Framework

Maryam Zare Jeddi, National Institute for Public Health and the Environment (RIVM), Netherlands

12:00-12:20	<p>Title: The deployment of k9 detection dogs in screening for COVID-19 virus SARS-COV-2</p> <p>Mohammed Hag-Ali, Higher Colleges of Technology, United Arab Emirates</p>
12:20-12:40	<p>Title: Can CO₂ emissions and energy consumption determine the economic performance of South Korea? A time series analysis?</p> <p>Gbenga Daniel Akinsola, Girne American University, Turkey</p>
12:40-13:00	<p>Title: Making safety training stickier: A richer model of safety training engagement and transfer</p> <p>Tristan William Casey, Griffith University, Australia</p>
Lunch Break 13:00-13:40	
13:40-14:00	<p>Title: Determining the effect of group flower arranging sessions on caregiver self-efficacy and stress levels in an in-patient hospice</p> <p>Joanne Lavin, CUNY School of Professional Studies, USA</p>
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14:40-15:00	<p>Title: Effects of screenings in reducing colorectal cancer incidence and mortality differ by polygenic risk scores</p> <p>Jungyoon Choi, Vanderbilt University Medical Center, USA</p>
15:00-15:20	<p>Title: Sentinel lymph node does not prevent lymphedema</p> <p>Alexandre Pissas, Hospital Center of Bagnols sur Ceze, France</p>
End of Day 2	





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VIRTUAL EVENT

3RD GLOBAL NURSING CONGRESS

MARCH 24-25
2022

**Theme: Challenges, Innovations and Approaches in
Nursing Education, Research and Practices**

Scientific Program

GLOBAL NURSING 2022

<https://globalnursing.peersalleyconferences.com/>

DAY 1

MARCH 24, 2022

Scientific Program

GMT- Greenwich Mean Time

09:45-10:00 Opening Ceremony

Keynote Forum

10:00-10:30

Title: Virtual patient simulation in the training of advanced practice providers: How adding a smart technology boosts learning efficacy and shortens time to competency

Igal lancu, *Edocate Ltd., Israel*

10:30-11:00

Title: Covid-19: What it teaches us about the nature of illness and of society

Keekok Lee, *University of Manchester, UK*

Refreshment Break 11:00-11:10

Distinguished Speaker Talks

11:10-11:30

Title: Peripherally inserted central venous catheter in upper extremities leads to an increase in D-dimer and deep vein thrombosis in lower extremities

Wanli Liu, *Central South University, China*

11:30-11:50

Title: Testing the efficacy of an HIV stigma reduction intervention on nurses in China: The AWWI project

Lianxiang He, *Xiangya Changde Hospital, China*

11:50-12:10

Title: Violence in hospitals and burnout among nursing staff

Keren Grinberg, *Ruppin Academic Center, Israel*

12:10-12:30

Title: Challenges in the use of a computerised training tool at selected nursing campuses: A South African perspective

Udesvari Naidoo, *KwaZulu-Natal College of Nursing, South Africa*

12:30-12:50	Title: Clinical learning environment, supervision and nurse teacher (CLES+T) scale: Translation and validation of the Arabic version Khadija Guejdad , <i>Higher Institute of Nursing Professions and Health Techniques, Morocco</i>
12:50-13:10	Title: The impact of nurses' perceptions of systems thinking on occurrence and reporting of adverse events: A cross-sectional study Ahmed Hassan Albelbeisi , <i>Tehran University of Medical Sciences, Iran</i>
Lunch Break 13:10-13:40	
Keynote Forum	
13:40-14:10	Title: Neuropsychological impact on patients with cancer Kalliopi Megari , <i>Aristotle University of Thessaloniki, Greece</i>
14:10-14:40	Title: The future of nursing homes: Changes in consumer preferences for long-term care facilities after COVID-19 pandemic Jia Yu , <i>Southern Connecticut State University, USA</i>
Distinguished Speaker Talks	
14:40-15:00	Title: Unveiling beauty: Insight into being tattooed post mastectomy Victoria Reid-de Jong , <i>Trent University, Canada</i>
15:00-15:20	Title: Virtual support in dementia: A possible viable strategy for caregivers Ceres Ferretti , <i>University of Sao Paulo, Brazil</i>
15:20-15:40	Title: Nursing practice on post-operative wound care in surgical wards at Muhimbili National Hospital, Dar-es-salaam, Tanzania Elizabeth Z. Mika , <i>Hubert Kairuki Memorial University, Tanzania</i>
15:40-16:00	Title: Reflections of nurses who were hospitalized by COVID-19: Life and profession Janet Mercedes Arevalo Ipanaque , <i>Universidad Peruana Union, Peru</i>
16:00-16:20	Title: Benefits of Zu Chang Fa as a relaxation technique on the holistic health of undergraduate nursing students during COVID-19 Reyna Isabel Hernández Pedroza , <i>University of Guanajuato, Mexico</i>

16:20-16:40	<p>Title: MerleauPontal reflection: The perception of women with breast cancer regarding the impact on their children</p> <p>Eliane Cristina da Silva Pinto Carneiro, <i>Universidade Federal Fluminense, Brazil</i></p>
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16:40-17:00	<p>Title: Abandonment at the transition from hospital to home: Family caregivers' experiences</p> <p>Leila Mardanian Dehkordi, <i>Isfahan University of Medical sciences, Iran</i></p>
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Poster Session

E-Poster	<p>Title: Perception of the preceptor in the training of the health professional: A merleau-pontian perspective</p> <p>Monica Moura da Silveira Lima, <i>Universidade Federal Fluminense, Brazil</i></p>
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E-Poster	<p>Title: The role of nursing in man's health: Challenges in the training of nursing graduates</p> <p>Vilza Aparecida Handan de Deus, <i>Universidade Federal Fluminense, Brazil</i></p>
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E-Poster	<p>Title: Healthcare professionals: Supporting victims of intimate partner violence</p> <p>Stephen Cooper, <i>Excelsior College, USA</i></p>
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E-Poster	<p>Title: Effect of cancer treatment on sleep quality in cancer patients: A systematic review and meta-analysis of Pittsburgh sleep quality index</p> <p>Anahita Divani, <i>Tehran University of Medical Sciences, Iran</i></p>
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E-Poster	<p>Title: Awareness and perceptions of elder abuse among the nurses working in general hospital wards in the Kanto region, Japan</p> <p>Yuki Ohtsuyama, <i>Tokyo Junshin University, Japan</i></p>
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E-Poster	<p>Title: Toe clearance rehabilitative slippers for older adults with fall risk: A randomized controlled trial</p> <p>Atsuko Satoh, <i>Hirosaki Gakuin University, Japan</i></p>
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Panel Discussion

End of Day 1



DAY 2

MARCH 25, 2022

Scientific Program

GMT- Greenwich Mean Time

09:45-10:00 Opening Ceremony

Keynote Forum

10:00-10:30 **Title: The paradox of political accountability and deficits in the preconditions for service delivery in elderly care: A qualitative study of Swedish politicians**
Susann Porter, *Malmö University, Sweden*

10:30-11:00 **Title: A specific Large-Scale-Assessment for practical nursing competency**
Simone Ries, *Protestant University of Applied Sciences, Germany*

Refreshment Break 11:00-11:10

Distinguished Speaker Talks

11:10-11:30 **Title: Hypertension and its related factors among patients with type 2 diabetes mellitus: A multi-hospital study in Bangladesh**
Hiba Alsaadon, *Monash University, Australia*

11:30-11:50 **Title: Learning the impact of culture mediated by online international collaboration in nursing education**
Kirsten Nielsen, *VIA University College, Denmark*

11:50-12:10 **Title: Entrepreneurship is the Future of Nursing**
Eman Salman Taie, *Helwan University, Egypt*

12:10-12:30 **Title: Application of novel psychoactive substances (NPS): Chemsex and HIV/AIDS policies among men who have sex with men (MSM) in Hong Kong**
Alex Siu Wing Chan, *The Hong Kong Polytechnic University, Hong Kong*

12:30-12:50 **Title: The effect of corona quarantine on the self-concept dimensions of medical sciences students**
Parand Pourghane & Fatemeh Mansouri, *Guilan University of Medical Sciences, Iran*

12:50-13:10

Title: Human care by nursing in the face of healthcare judicialization in COVID-19: From the perspective of merleau-ponty
Veronica Bessa de Paulo de Moura, *Universidade Federal Fluminense. Brazil*

Lunch Break 13:10-13:40

Distinguished Speaker Talks

13:40-14:00

Title: Can You PACE Yourself? Using PACE in the Clinical Setting
Allen Walter Siegel, *University of Maryland Upper Chesapeake Health System, USA*

14:00-14:20

Title: A critical race perspective on the mental health characteristics of nursing, psychology and social work students
Val Livingston, *Norfolk State University, USA*

14:20-14:40

Title: An assessment of direct and indirect costs of dementia in Brazil
Ceres Ferretti, *University of Sao Paulo, Brazil*

14:40-15:00

Title: Rehabilitation Nursing
K. Sesha Kumar, *Mid-Level Health Provider (MLHP), Health and Wellness Centre, Primary Health Centre, India*

15:00-15:20

Title: Unsuccessful diabetes management: A qualitative study
Leila Mardanian Dehkordi, *Isfahan University of Medical sciences, Iran*

15:20-15:40

Title: The role of the nurse administrator in healthcare services and healthcare built environment in Southern Nigeria
Gloria Tonye Dikibo, *Texila American University, India*

Panel Discussion

End of Day 2





3rd Global Nursing Congress

MARCH 24-25, 2022
LONDON
UK

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A CONFLUENCE OF ERUDITE AND KNOWLEDGE-SEEKER

PROGRAM-AT-A-GLANCE

GLOBAL NURSING 2022

DAY 1

MARCH 24, 2022

Scientific Program

08:00-08:30 Registrations

08:30-09:00 Opening Ceremony

Keynote Session

09:00-09:30 **Title: EBP Skill: Improving outcome measurement through item response theory**
Angela Benfield, University of Wisconsin- La Crosse, USA

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Group Photo	
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17:40-18:00	Title: Assessing understanding of caregivers on immunization and COVID-19 vaccines using a survey instrument Gozde Ercan , Sancaktepe Education and Research Hospital, University of Health Sciences, Turkey
End of Day 1	



Introduction

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09:00-09:20

Title: Privacy-preserving federated clinical analytics

Roel Wuyts, Imec's ExaScience Life Lab, Belgium

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Refreshment Break 10:20-10:40

Poster Session 10:40-11:20

Oral Session

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15:00-15:20	Title: Sentinel lymph node does not prevent lymphedema Alexandre Pissas , Hospital Center of Bagnols sur Ceze, France
End of Day 2	



KEYNOTE PRESENTATIONS

DAY 1



3rd GLOBAL Nursing Congress

**March 24-25, 2022
London, UK**

GLOBAL NURSING 2022



BIOGRAPHY

Angela Benfield is an occupational therapist who has over 23 years of clinical experience with children. She currently teaches in an entry-level master's degree occupational therapy program. She has spoken on clinical reasoning, measuring outcomes and EBP internationally. Her research interest explores the skills required to be a competent allied health professional and the development

of expertise. She has developed an interprofessional model of evidence-informed professional thinking which identifies activities which support the development of expertise. She has also operationalized the model through the development of the measure of evidence-informed professional thinking using Rasch analysis.

Angela Benfield

University of Wisconsin-La Crosse, USA

EBP Skill: Improving outcome measurement through item response theory

Even though evidence-based healthcare providers have been required to measure the impact of their interventions with consistent and sound outcome measurement, implementation rates continue to be low (Colquhoun et al., 2017), complicating the process of comparing local outcomes to population outcomes (Bozic, 2013). Evidence suggests that healthcare providers continue to rely on informal and unsystematic approaches to outcomes measurement, even when guidelines suggest tools and timelines for collection of data (Colquhoun et al., 2017). One barrier identified is that selecting tools can be especially difficult as it requires the integration of disparate knowledge: understanding of measurement theory and principles, ability to use evidence to identify factors that are remediable to change, ability to appraise the psychometric qualities of tools, and ability to combine different types of tools in a consistent, efficient, and feasible manner in order to gather strong local data to support analysis of effectiveness (Moore et al., 2018).

Therefore, healthcare providers need to systematically and routinely use a combination of tools to support analysis of the change scores in local practice (D Steenbeek, Ketelaar, Galama, & Gorter, 2008). This process is complex-requiring the application of measurement theory, intervention theory and evidence-based process knowledge and skills.

Importantly, effective strategies have been identified which increase the use of standardized outcome measures including: a) evaluating current practice, b) comparing local practice to suggested assessment routines in guidelines, c) developing skills for locating, appraising and selecting potential tools for applicability and utility in the setting; and d) developing a minimum data set to use with all clients who present with the problem/condition in the local setting (Moore et al., 2018). The objectives of this presentation is to increase the capacity of individual healthcare setting to develop a standardized outcome measurement strategy for a local setting by taking them through the process.



BIOGRAPHY

Dr Roger Worthington has a PhD in philosophy from the State University of New York (Buffalo) and an MA in medical ethics from Keele University (UK). Specializing in medical education and global health policy, Roger now works as an independent researcher. He previously held academic positions in the UK as well as honorary positions in Australia and the USA (at Yale University School of

Medicine), plus advisory roles with public bodies in several countries. Based in the UK, he runs professional development workshops within the NHS; in addition, he mentors young scholars from around the world. He is an associate editor for BMC (Springer) *Globalization and Health* and Editor-in-Chief for *Scholarly Review*.

Roger Worthington

Royal Stoke University Hospital, UK University Hospitals of North Staffordshire, UK

Educating to address healthcare needs for refugees and displaced persons

Refugee health is a matter of growing concern, made worse by events in Afghanistan, Yemen, Syria, Myanmar, Libya, Central America and elsewhere. While according to international convention, meeting the healthcare needs of refugees can be asserted as a human right, obligations to satisfy that right are necessary but not sufficient to ensure that those needs are met. In addition to political will and social commitment, a well-trained workforce is also needed. Nurses and other healthcare professionals need the right skills to treat this vulnerable and culturally diverse population. Given the nature and scale of the problem, there is a case for making refugee health a key component in global health education programs, especially in relation to nurses' continuing education and professional development. Displaced persons could find

themselves seeking treatment in cities far removed from the situations that drove people from their homes, and while education may not change political realities on the ground, it could help nurses and other healthcare professionals respond more effectively to local needs for healthcare provision. Refugees and displaced persons eventually become part of the community (outside of camps and settlements), meaning that any healthcare professional could be asked to provide care, for instance, in areas of London with well-established refugee communities. However, these patients are sometimes hard to reach because of language, cultural and other types of barriers, and a broad mix of skills could be needed, not all of which may be included in current curricula. I produced a set of intended learning objectives to help fill this gap.



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GLOBAL NURSING 2022

WORKSHOP

DAY 1



3rd GLOBAL Nursing Congress

**March 24-25, 2022
London, UK**

GLOBAL NURSING 2022



BIOGRAPHY

Judith Hantl-Merget B.B. A., M.A.:
Director of Nursing in the RoMed
clinics

The ideal case of an executive
manager combines leadership and
management.

This principle is a daily reminder for
my operative work as a member of the
management and director of nursing.
In this role, I intensively explore

the culture of New Work and apply
these elements to drive the cultural
change at the RoMed clinics for the
last four years. Especially helpful was
my advanced training in Future and
Digital Leadership at SGMI. With this
background, I enabled frontline staff
to independently solve a multitude
of problems with the innovation
framework Design Thinking.

Judith Hantl-Merget

RoMed Kliniken, Germany



BIOGRAPHY

He works intensively in the innovation
and development of nursing care.
Matthias Scherm is a Surgical
Assistant, Health Manager, Design
Thinking Facilitator, Bachelor of
Science in Public Health and currently
a part-time student enrolled in a
Master of Arts, Business Psychology.
He is fascinated by the challenges in
healthcare and likes to change the

processes around the patient with
new tools. Further, he has successfully
established the first robot support in
the RoMed clinics.

Matthias Scherm

RoMed Kliniken, Germany

Design thinking for a patient-centered innovation in the nursing industry: How hospitals can use the design thinking tool for processes, services and infrastructure around the patient

The market-focused willingness for innovation ensures the success of the clinics. Hospitals need the ability to recognize customer needs, develop solutions and advertise accordingly. The current hospital structures imply only a little willingness for innovation in nursing care, while the demands are changing. The clinics need to adapt to the ever changing needs of patient as the average innovation development process is not efficient enough due to traditional project management. The transformation method

“Design Thinking” offers a holistic identification of customer’s ideas and needs through a user-oriented and systematic approach to complex problems. Creative solutions are sought and tested in the form of a prototype. In addition, ongoing feedback is provided by the end-user in order to develop or improve user-oriented concepts. At the Health Forum, the basics of Design Thinking are being presented. Qualitative and quantitative research results are introduced in regards to the opportunities and risks of Design Thinking in nursing and in addition, the possible uses of Design Thinking in nursing are reported and the projects that have been accomplished are presented. In

the RoMed clinics, various topics have already been established using Design Thinking like the successful implementation of attractive learning areas for trainees, the decrease of patient accidents, the integration of nursing assistants in every nursing department, the work-life-balance, an innovative application tracking system, improved patient care for cognitively impaired patients and optimized discharge management with a rehabilitation clinic. Helpful recommendations for a successful implementation of Design Thinking is given at the end of the presentation and an open discussion around is promoted.



BIOGRAPHY

Angela Benfield is an occupational therapist who has over 23 years of clinical experience with children. She currently teaches in an entry-level master's degree occupational therapy program. She has spoken on clinical reasoning, measuring outcomes and EBP internationally. Her research interest explores the skills required to be a competent allied health professional and the development

of expertise. She has developed an interprofessional model of evidence-informed professional thinking which identifies activities which support the development of expertise. She has also operationalized the model through the development of the measure of evidence-informed professional thinking using Rasch analysis.

Angela Benfield

University of Wisconsin-La Crosse, USA



BIOGRAPHY

Dr. Robert Krueger is the Doctoral Capstone Coordinator and Associate Professor in the Doctoral Occupational Therapy Program at Whitworth University. Robert earned his PhD in Health Promotion Wellness and Post-Professional Doctorate in Occupational Therapy in the Hand Therapy Elective Track at Rocky Mountain University of Health Professions. Dr. Krueger has been an educator in health science graduate-level programs for

11 years. He has both clinical and business management experience in occupational therapy and hand therapy practice as well as board certification in hand therapy. His scholarly activities include national presentations and published articles on evidence-based practice (EBP), self-reflection in clinical decision-making, and curricular redesign in occupational therapy graduate education.

Robert Krueger

Whitworth University, USA

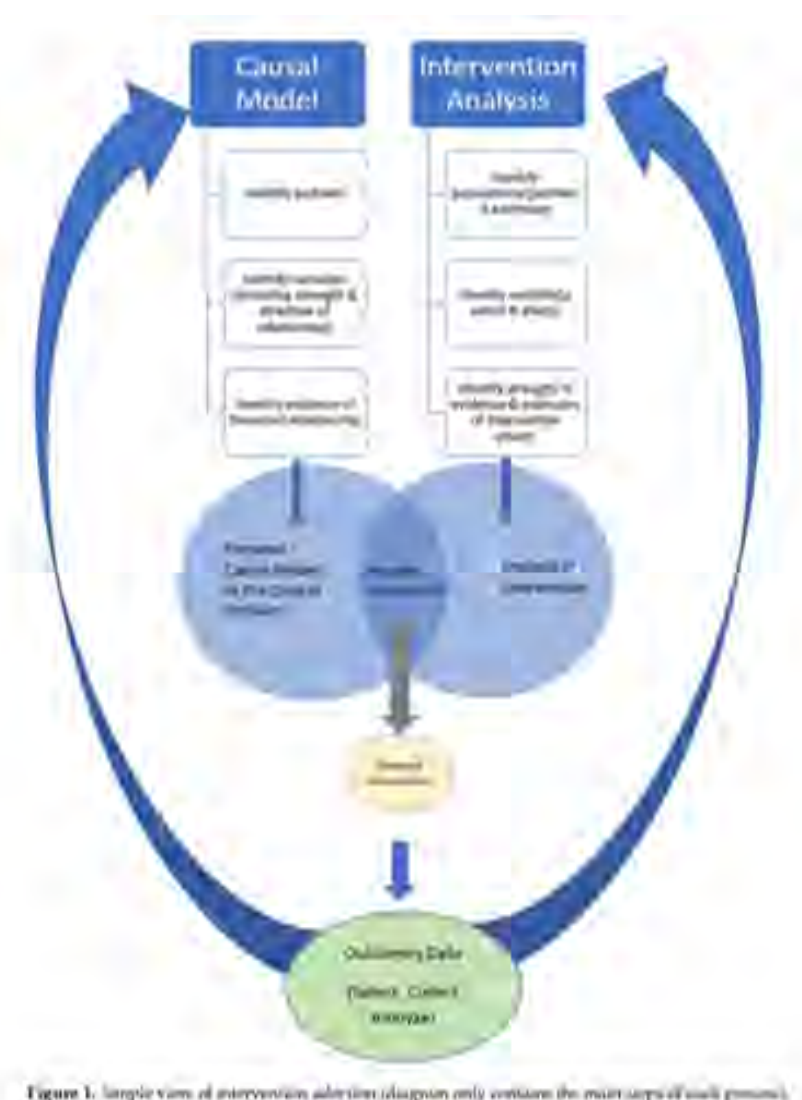
Making decision-making visible- teaching the process of evaluating interventions

Significant educational efforts to increase evidence-based practice have emphasized increasing knowledge, however these efforts have had minimal effect on sustained engagement of working healthcare professionals. Critically, many new interventions with limited evidence of effectiveness continue to be readily adopted-

indicating that openness to change is not the problem. The selection of an intervention is the outcome of an elaborate and complex process, which is shaped by how they represent the problem and their knowledge. This process is mostly invisible to others. An alternative strategy for increasing EBP use is to teach healthcare professionals to make their thinking

visible to themselves, explicitly teaching how to develop an evidence-informed cognitive model, and explicitly teach the thinking process of deciding how to assess and provide a specific intervention with clients (See figure 1: the simple view of intervention selection). This complex thinking process has many places where errors in thinking can lead to adverse decisions. However, it also identifies where specific EBP activities are implemented to be able to make quality decisions and not just when confronted with a clinical dilemma. The

objective of this presentation is to: a) explain why teaching how students develop richer cognitive model increases their implementation of EBP activities; b) explain how developing an evidence-informed cognitive model of client problems improves heuristic reasoning, and c) describe the criteria which can be used to understand and integrate new interventions with previous strategies. Making the process visible to clinicians/students increases the skills required to judiciously select one intervention over others.





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GLOBAL NURSING 2022

SCIENTIFIC ABSTRACTS

DAY 1



3rd GLOBAL Nursing Congress

**March 24-25, 2022
London, UK**

GLOBAL NURSING 2022



Building a peer group community

A. Cole

Mid South Essex NHS Trust / Barts Health NHS Trust, UK

Aim: To build a network of professional communities that engage, participate and facilitate in supporting each other with the key shared principles to promote a safe space for well-being, sharing good clinical practice, identifying quality improvement projects and working together to support each other in order to support compassionate care giving.

Background: Nursing as a profession has for many years struggled with the retention of nurses in the NHS, the period of restoration and recovery following the Covid 19 pandemic is required to ensure that nurses are supported and wellbeing is central to the recovery to promote retention of a compassionate nursing workforce. Nursing by nature undertakes clinically complex work that can stimulate many emotional responses that can be hard to process and understand, leading to the inner critic take over a phenomenon that encourages self-blame, self dis-trust and compassion burnout.

Methodology: Using Clinical Supervision to build resilience and restoration within a work based community, promoting a tool kit that can be used to pro-actively enhance a community of peer support, check in skills, mindfulness and a safe space to reflect, learn and promote self-care as well as compassionate care.

Implementing a clinical supervision cycle as well as building support networks in multiple clinical settings and with multiple peer groups. Clinical supervision has been implemented as group clinical supervision within the preceptorship groups and individual supervision for ward based nurses. Alongside building peer support communities as a tool to support and promote quality and compassionate care. Outcome measured by qualitative feedback and engagement.

Results: Qualitative feedback revealed positive themes and identified engagement in the process to promote well-being and maintaining compassionate care to avoid burnout and promote improvement projects.

Conclusion: The nature of clinical supervision and building peer group communities facilitated with an element of mindfulness and positive reframing gives nurses the time, space and skills to recognise the importance of their own wellbeing and that of their peers, in turn encouraging the identification and development of projects to promote working and caring as a team to build on and demonstrate that clinical supervision can increase peer group support and in turn compassionate care giving as well as leadership.



3rd GLOBAL Nursing Congress

MARCH 24-25, 2022 | London, UK

Biography

Angela Cole is a Clinical Nurse Specialist for Children with Intestinal Failure at The Royal London Hospital. During the Covid 19 Pandemic Angela developed and facilitated a peer support group for paediatric nurses redeployed to adult ITU areas, this experience has developed a passion for Clinical Supervision and the positive outcome this toolkit holds in keeping steady in the midst of chaos. Building peer group communities to really fulfil the term resilience to promote restoration is a forever aim. Well-being and compassionate care at the heart of nursing care.



Bereavement needs of critical care nurses: A qualitative study

Taline Omran

Vanguard University, USA

Background/Introduction: Bereavement and grief in critical care nurses remain an under studied phenomenon. As a way of self-protection, nurses may compartmentalize their own feelings and need assistance and support in processing feelings of bereavement. Nurses spend much of their time caring for patients and their family members, while guiding them through the dying process, however they may not take adequate time to address their own bereavement needs.

Objective/Aims: To explore the bereavement needs of critical care nurses after experiencing the expected or unexpected death of a patient. From their lived experiences, gain insight as to how nurses perceive, process and cope with the death of a patient.

Methodology: A qualitative, phenomenological focus group was conducted with critical care nurses (N = 10) after gaining Internal Review Board (IRB) approval. The group discussion

was audio-recorded and transcribed. Content analysis was performed to identify common themes.

Results: Seven themes emerged a) Emotional Distress, leading to compassion fatigue, burnout, moral distress, b) Empathy, c) Resurfacing Personal Loss leading to secondary traumatic stress in the workplace, d) Unrealistic Expectations placed on the nurse, e) Detachment leading to compartmentalization, f) Lack of Formal Education, and g) Selfcare and Available Resources. (See Table 1 and 2)

Discussion/Conclusion: More education for nurses in undergraduate and continuing education programs is needed to assist nurses in the bereavement process. More interventional studies are needed to explore programs of nurses' selfcare both in the workplace and in nurses' personal lives to more effectively support their emotional needs.

Table 1 : Participant Demographic Information

Demographic Variable	Total (N=10)	Frequency (%)
Age	M = 40	
	SD = 7.62	
Gender	Female	7 (70%)
	Male	3 (30%)
Ethnicity	Asian	3 (30%)
	Caucasian	5 (50%)
	Pacific Islander	1 (10%)
	Asian and Caucasian	1 (10%)
Marital Status	Divorced	2 (20%)
	Life partner	1 (10%)
	Married	5 (50%)
	Single	2 (20%)
	Chinese	1 (10%)
Primary Language	English	8 (80%)
	Other & English	1 (10%)
Grew up in the USA	Yes	9 (90%)
	No/Other	1 (10%)
Religion	Buddhist	1 (10%)
	Catholic	1 (10%)
	Christian	6 (60%)
	Other	2 (20%)
Highest Degree in Nursing	ADN/Diploma	1 (10%)
	BSN	6 (60%)
	MSN	3 (30%)
Years of Experience	M =	10.85
	SD =	7.04
Years of Critical Care Experience	M =	8.65
	SD =	6.12
Work Status	Full Time	9 (90%)
	Part Time	1 (10%)
Shift Worked	Day Shift	8 (80%)
	Night Shift	1 (10%)
	Both Shifts	1 (10%)
Role in the Unit	Charge	1 (10%)
	Rapid & Relief & Staff2	2 (20%)
	Relief & Staff	2 (20%)
	Staff Nurse	5 (50%)
Certifications/Professional Memberships	AACN	2 (20%)
	AACN & CCRN	3 (30%)
	AACN & CCRN & other	1 (10%)
	AACN & other	1 (10%)
	CCRN	1 (10%)
	None	2 (20%)
Type of Unit	CIVCU	1 (10%)
	Neuro ICU	9 (90%)

Table2 : Critical Care Nurse Bereavement Themes

Core Themes	Subthemes	Critical Care Nurse
		Statements/Expressed thoughts
Emotional Distress	Compassion fatigue, burnout, moral distress, anxiety, coping with bereavement	<p>"I don't like it when they have little kids..."</p> <p>"It was extremely draining; I think I cried a couple of times in my car..."</p>
Empathy	<p>Sympathy</p> <p>Sadness</p>	<p>"since the passing away of my mom last year...I now having the empathy, I feel honored caring for people and patients."</p> <p>"you are sad this is happening to them; you hear from the family they are a great person"</p>
Nurse's Personal Loss	<p>Re-surfacing Personal Loss</p> <p>Secondary Traumatic Stress</p>	<p>"the first patient I had was just like my grandma, it was probably one of the hardest patients I have ever taken care of because of the connection."</p> <p>"I almost felt like a family member by the time I was done"</p> <p>"When my brother got cancer some of the physicians were not honest with his poor outcome. Because I know how it feels, I am honest with my patients and families."</p> <p>"My mom passed away of cancer... I had a patient who reminded me exactly of my mom, I couldn't be in the room, I couldn't separate myself from the situation" Because of my personal loss, I am able to understand grief better</p>

Expectations placed on Nurses by Patient's Families/or job requirements	Prognostic Conflict Unrealistic Patient Outcomes Changing the way nurses communicate with the patients and their families	I am relieved when they can pass peacefully Expectations of the job-following protocols when it does not seem appropriate "I no longer say, everything is going to be ok, I now say, we will do our best, or we are doing everything we can"
Disconnecting , Nurse Detachment	Suppressing personal feeling Compartmentalize	"it's easier to be more detached" "I don't get attached to families"
Education on grief/bereavement	No formal education on grief/bereavement	"I had no idea there would be so much poop and so much death, I expected a lot more blood" "we focused more on critical skills"
Selfcare	Available Resources for staff Processing through the day's events	"I use social workers and pastoral care to deal with the more emotional parts" "I don't, I just do it." (and deal with it later, there's always the stairwell) "it's a different culture than in other areas of the hospital, we have to be that close"

Biography

Taline Omran, Vanguard University; MSN, Point Loma Nazarene University; BSN, PHN (Public Health Nursing). Certifications and Competencies include: BLS, ACLS, NIH stroke certification. Relief charge nurse, sepsis nurse, rapid response nurse. She has passionately been working in critical care nursing for 15 years. Her love of nursing has allowed her to travel all over the world participating in humanitarian relief aid. The topic for this article was prompted by witnessing co-workers having a difficult time processing and coping with personal and work- related losses.



Direct to consumer genetic and genomic testing with associated implications for advanced nursing practice

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¹Wellmed, USA

²Thomas Spann Clinic, USA

³National Association of Pediatric Nurse Practitioners, Baylor University, USA

⁴Department of Veterans Affairs, USA

⁵College of Nursing and Health Sciences, Texas A&M University-Corpus Christi, USA

Direct-to-consumer genetic and genomic testing (DTCGT) has paved the way for consumers to gain information about their genetic makeup. Consumers may seek DTCGT to estimate ethnic background, identify genetic relations, or obtain raw DNA information that can be used for other purposes, such as testing for paternity and identifying genetically linked illnesses. Despite robust progress in genetic and genomic testing, most people have a low exposure threshold to DTCGT. Patient consumers may unnecessarily experience anxiety if they do not have a health care provider (HCP) to consult and review their results. Presently, there is a knowledge gap in how accurately HCPs can interpret and communicate genetic test results to patients compared with genetic specialists who may

be inaccessible to underserved populations. Genetic and genomic information is rapidly progressing in health care and can identify patients at increased risk for certain diseases and improve patient care and outcomes. Appropriate use of genetic and genomic testing and knowing the limitations and difficulties of current testing available are integral to the success of HCPs in using these results in health promotion and improving quality of life. Health care providers should be aware of DTCGT recommendations and implications for patients, be prepared to counsel patients who present with testing results in hand, seeking advisement, and be competent in determining the need for further diagnostic testing or referral to a specialist genetic counselor.

Biography

Dr. Ashley Kate Hughes has been an employee of the Department of Veterans Affairs for over 14 years. Additionally, she selflessly serves as a reservist in the United States Air Force, holding the rank of Major. She has a dynamic background in the nursing field. She has held many nursing positions, including medical-surgical nurse, assistant nurse manager, nurse manager, nurse supervisor, nurse practitioner, clinical faculty nurse, academic faculty nurse, and military nurse. Dr. Hughes has experience in inpatient, outpatient, and deployed treatment settings. Her research includes opioids, ethics, genomics, genetics, access to healthcare, employee satisfaction, quality improvements, and program evaluations. Dr. Hughes is an expert Family Nurse Practitioner with outstanding professional organizational involvement at the local, state, and national levels. She drives innovative, visionary leadership, developing nurse practitioner-led inclusive and diverse interprofessional teams to produce impactful quality health care outcomes, particularly for vulnerable and underserved populations.



Impact of waterpipe educational program on university students' who are active waterpipe smokers

Mahmoud Ogla Al-Hussami

Community Health, Univeristy of Jordan, Jordan

Background: Water-pipe smoking (WPS) is considered as one of the most dangerous patterns of tobacco smoking. It is expected by the end of this century to kill a billion people or more unless urgent action is taken. Jordan is ranked as the fourth highest Arab country in regards to smoking rates. It aims to investigate Jordanian university students' knowledge and beliefs towards WPS; explore factors that are associated with being a WPS smoker; and evaluate the effectiveness of a WPS cessation program.

Method: A randomized clinical trial design was used to evaluate the effectiveness of a WPS cessation educational program. The sample included 400 students. Ethical approval was obtained from the target universities before data collection, and each participant was asked to sign a written consent form. Invitations

was posted through internet websites and announcement boards in the universities.

Results: The difference in the educational program posttest total score (dependent variables) were statistically significant: motivation ($F_{\{1, 257\}}=1365, p = 0.000$), attitudes ($F_{\{1,257\}}= 276, p = 0.000$), knowledge of health effects ($F_{\{1, 257\}}= 307, p = 0.000$), health risks ($F_{\{1,257\}}= 329, p = 0.000$), and intention to quit smoking shisha ($F_{\{1,257\}}= 318, p = 0.000$).

Conclusion: It was found to be effective in promoting students' knowledge and attitudes towards WPS and intention to quit WPS. Therefore, health faculties have the obligation to conduct frequent educational sessions using various teaching approaches as part of the campaigns to fight against the epidemic of the WPS within this age group.

Biography

Dr. Mahmoud Al-Hussami, a professor of epidemiology and leadership at the University of Jordan, School of Nursing. His teaching has a wide range of undergraduate and graduate modules in the school of nursing and school of medicine. His research includes leadership in healthcare and infectious disease epidemiology. He published over 52 research articles in distinguished and prestigious journals. Al-Hussami has been awarded his PhD (2007) from Barry University, for his research in leadership. Also, he received his DSc. in Health Science, specialized in Epidemiology, from Nova Southeastern University in 2005 and MPH in Epidemiology from Florida International University. As a faculty member at the university of Jordan Dr. Al-Hussami has some hopes and plans to improve the ultimate goal for his school beside his personal long life learning goals, which represent a more advanced stage of renewal and build the sense of self-esteem by enhancing the store of knowledge, thus promoting on increased level of competence and efficacy in approaching work related problems.



Estimating nickel exposure in respirable dust from nickel in inhalable dust

C. Wippich, D. Koppisch, K. Pitzke and D. Breuer

Institute for Occupational Safety and Health of the German Social Accident Insurance, Germany

At different workplaces, the dust exposure and associated metal constituents, e.g. nickel, can be immense, and can cause occupational diseases. They range from allergic reactions to different forms of cancer. From early years of exposure measurement, only data of nickel in one dust fraction (mainly inhalable instead of respirable and inhalable) were measured. For retrospective evaluations of exposure levels or of occupational diseases, this is problematic. For this purpose, it is desirable to convert nickel concentrations from inhalable to respirable dust. Therefore, a total of 234 202 respirable fraction measurements, 123 118 inhalable fraction measurements and 32 882 nickel measurements in total were extracted from the exposure database MEGA. After several parameters and restrictions (e.g. same industrial sector, working activity and sampling duration or type of sampling) were considered, 551 parallel measurements of nickel concentrations in inhalable ($c_{I(Ni)}$) and respirable dust ($c_{R(Ni)}$) fractions from 2011 to 2020 could be determined and

investigated by linear regression analysis. Inhalable dust is the most important predictor variable, showing an adj. R^2 of 0.767. To refine the conversion of nickel concentrations, the total dataset was divided into working activity groups 'high temperature processing', 'filling/transport/storage', and 'machining/abrasive techniques'. From these groups, more task-specific subgroups were formed: 'welding (grinding time fraction [GTF] < 5 %)', 'welding (GTF > 5 %)', 'high temperature cutting' and 'grinding'. The nickel concentrations were transformed using the natural logarithm. For each group an individual conversion function with its relating confidence interval could be calculated. All conversion functions (except for 'welding GTF < 5 %') are power functions with adj. R^2 between 0.628 and 0.924: $c_{R(Ni)} = c_{I(Ni)}^{k \cdot e^c}$, where k and C_0 are regression coefficients.

Thus, there is no linear correlation between $c_{I(Ni)}$ and $c_{R(Ni)}$, no single conversion factor and the conversion must always refer to the individual workplace.

Biography

Cornelia Wippich graduated in 2016 with a master's degree in analytical chemistry and quality assurance at the University of Applied Sciences Bonn-Rhein-Sieg, Germany. As a part of her doctoral thesis, she conducted research on the conversion of inhalable and respirable dust and metal dust constituents in different industry sectors. Since 2019 Ms. Wippich is working as a scientific employee in the section metal analysis at the Institute for Occupational Safety and Health of the German Social Accident Insurance.



Covered-stent treatment of an extracranial internal carotid artery pseudoaneurysm in a 3 years-old child with 12-years follow-up: A case report

Roberto Sanchez

University of Concepcion Faculty of Medicine, Section of Vascular Surgery, Chile

Introduction: Extracranial internal carotid artery (ICA) pseudoaneurysms in children, although uncommon, are life-threatening. Covered stents are a good alternative treatment, as they avoid the risk of open surgery and preserve the internal carotid artery. Long-term outcomes were unknown until recently.

Report: In August 2008, a 3-years-old child was treated with a covered stent for a pseudoaneurysm in the extracranial ICA. A long-term follow up is presented.

Results: The child was discharged with full

recovery and without neurological sequelae. He has been followed-up and has remained asymptomatic for 12 years, with CTA-confirmed internal carotid artery patency, without deformation or evidence of significant re-stenosis.

Conclusion: This is the first report of the long-term outcome of a covered stent in a child treated at 3 years of age, with a 12-year follow-up. The good performance of the covered stent in this case reinforces its adoption as a first-line option in the treatment of extracranial ICA pseudoaneurysms in children.

Biography

Prof. Roberto Sánchez, MD Professor of Surgery
 Faculty of Medicine- University of Concepción- CHILE Fellow of the American College of Surgeons
 Ancien Resident Etranger des Hopitaux de Paris
 Membre Associee Etranger Société de Chirurgie Vasculaire et Endovasculaire de Langue Francaise (SCVE)
 Non-european Membership European Society of Vascular and Endovascular Surgery (ESVS).



Can you train the neck to help prevent concussion?

Theo Versteegh

Western University, Canada

Over the past 20 years there has been a significant increase in the awareness of the devastating impact concussions can have on athletes, military personnel and our youth. There is a lot of discussion around the problem, but very little progress has been made on prevention. Fortunately, mother nature has already found the solution and provided us with our very own shock-absorption system. This is the role of the neck muscles. In fact, research in high school athletes has shown that every one pound of increased neck strength leads to a 5% decreased risk in concussion. However, best evidence does not recommend traditional neck strengthening as an effective means to lower concussion risk. Why is that? Because muscles respond very specifically to the type of training they are exposed to. Traditional

neck strengthening involves taking a heavy weight and pushing the head against it. This will improve the neck's ability to take a heavy weight and push against it. However, it will not necessarily improve the neck muscles' ability to respond and react quickly to stabilize the head against a potentially concussive blow. This presentation will provide a scoping review of the current evidence around the role the neck muscles play in mitigating concussion risk. It will examine whether these neck muscles can be trained to help decrease an individual's concussion risk. With an understanding of muscle physiology, it will outline the six key training principles that must be incorporated into a training program aimed at providing the best opportunity for the neck muscles to help protect against concussion

Biography

Dr. Theo Versteegh is a physiotherapist with over 20 years' experience in sports medicine. During his undergraduate training in physiotherapy at Western University, he was a member of the National championship Mustang football team. He has worked clinically across Canada and internationally in the United Kingdom and Saudi Arabia. In 2010, he completed his Master of Science in Physiotherapy researching the effects of dynamic warm up in older golfers. In 2016 he completed his PhD in Physiotherapy at Western University exploring the role neck muscles play in protecting the head from concussion. He has been conducting primary research in the field of neck training and injury prevention ever since.



The acceptability and use of mind-body interventions among african american cancer survivors: An integrative review

P. Shani and E. Walter

College of Nursing, University of Houston, USA

Mind-body interventions have been shown to improve physical and mental health outcomes among cancer survivors, and African Americans have one of the highest cancer mortality rates of all racial/ethnic groups, while often facing considerable barriers to quality healthcare. African American cancer survivors report difficulty accessing mind-body practices, and few studies have focused exclusively on African American populations. The purpose of this integrative review is to explore the acceptability and use of mind-body interventions among African American cancer survivors. This review seeks to determine if current research indicates that mind-body interventions may be helpful in improving outcomes for African American cancer survivors. Search terms included: "African American," "intervention," "cancer," "survivor," "mind-body," "focus group," "complimentary medicine," "integrative medicine," "meditation," "yoga," and "mindfulness." The literature search resulted in 118 studies, of which 10 met the inclusion criteria. Inclusion criteria were articles published in or after 2011 and written in the

English language. Other reviews, meta-analyses, or studies without results were excluded. Results indicate that African American cancer survivors have expressed receptiveness to interventions incorporating mindfulness, meditation, yoga, Tai Chi, and other mind-body or complimentary/alternative medicine interventions, but few studies have offered such interventions exclusively to African American breast cancer survivors. This review indicated that African American cancer survivors across demographic backgrounds are interested in and view mind-body practices as an acceptable way to improve quality of life, pain interference, fatigue, anxiety, depression, and physical health; however, the interventions should be culturally appropriate and accessible. In conclusion, despite a growing interest in mind-body interventions, African American communities are often unaware of opportunities to engage in these practices in their communities, and mind-body practices are inaccessible due to cost or geographical location. Additional research that offers such interventions specific to African American cancer survivors is warranted.

Biography

My research and scholarly career focuses on the multi-disciplinary evaluation of integrative medicine with a focus on mind-body exercise interventions, objective and subjective measures of symptom outcomes, and health disparities, all within a bio-behavioral approach to cancer survivorship. I currently serve as an Assistant Professor of Nursing at the University of Houston, College of Nursing, where I conduct research on the effectiveness of mind-body interventions to improve the quality of life of those affected by cancer. I have over 13 years of experience in the development and implementation of interventions focusing on mind-body interventions and symptom outcome assessment. My leadership in the field of health disparities and mind-body exercise research has been recognized internationally, and my commitment to translating my research to educate my peers is reflected through my position as Research Consultant for new research proposals for Houston Methodist West Hospital.



Multithreaded variant calling elPrep 5 and future developments in genomics analysis

R. Wuyts, C. Herzeel and W. Verachtert

Imec's ExaScience Life Lab, Belgium

We present elPrep 5, the latest release of our software framework for analyzing sequencing data. The main new feature of elPrep 5 is the introduction of variant calling. This allows elPrep 5 to execute the full pipeline described by the GATK best practices for variant calling, which consists of PCR and optical duplicate marking, sorting by coordinate order, base quality score recalibration, and variant calling using the haplotype caller algorithm. elPrep 5 produces identical BAM and VCF outputs as GATK 4, while parallelizing and merging the computation of the different pipeline steps to significantly speed up the runtime. Concretely, elPrep speeds up the variant calling pipeline by a factor 8-16x compared to GATK on both whole-exome and whole-genome data without requiring specialized or proprietary accelerator hardware. elPrep 5 is developed as an open-source project on Github and is designed for

use with community-defined standards and file formats for NGS analysis. While computational performance is a main focus of elPrep, we also strive to improve the user experience with the software. elPrep is distributed as a single stand-alone binary, making it easy to install, and has a simple user interface where a full variant calling pipeline can be expressed as a singled command-line invocation. elPrep has an active user community, mainly at hospitals, research facilities, but also companies. This community actively supports elPrep by making it available on platforms such as Bioconda (over 15k downloads) and Seven Bridges genomics who have independently validated elPrep. In this talk, we present an overview of the elPrep software, as well as future developments for our sequencing software. We will in particular address the challenges we see with further optimizations and privacy preservation for supporting population genomics.

Biography

Roel Wuyts leads imec's ExaScience Life Lab, a lab focused on scaling software solutions for data-intensive high-performance computing problems, primarily in the life sciences domain. The lab has extensive experience with high performance computing technologies (distributed computing, parallel computing, concurrent computing, vectorization, NUMA optimizations), programming languages (Go, C++, Python, Lua, Rust, and many more), and usage of hardware accelerators (GPU, TPU, FPGA). By leveraging their high performance computing skills, imec's ExaScience Life Lab frequently helps companies in developing prototype software solutions for complex problems involving multiple disciplines. The lab has successfully done this for large-scale machine learning for pharmaceutical companies, DNA sequencing software for hospitals and pharmaceutical companies, large scale image feature extraction from high throughput screening, or advanced biostatistics and data analytics. With privacy and protection of IP becoming paramount when doing AI on health data, the lab is proposing innovative privacy-preserving amalgamated machine learning techniques to reason across data silos. Roel is also part-time professor at KU Leuven. His academic achievements include publications in PLOS One, IEEE Software, TOPLAS, ECOOP, OOPSLA or AOSD.



Reproductive health counseling in CKD

**Ivie O Okundaye, Margaret R Stedman, Jinnie J Rhee,
Michelle O'Shaughnessy and Richard A Lafayette**

Stanford University Medical Center, USA

Reproductive health issues are an important aspect of caring for patients with chronic kidney disease; however, it is unclear how frequent these conversations take place during a clinic visit. Discussions about pregnancy, fertility, and contraception will shape family planning and impact renal disease management. The goal of this study was to determine the frequency of contraception and pregnancy counseling in nephrology clinic visit using chart review of the electronic medical records. Sixty percent of the 125 female patients (n=74) seen in a general nephrology

clinic received reproductive health counseling. Of the 125 patient charts reviewed, 30 received comprehensive counseling (24%), 44 received intermediate counseling (35.2%), and 51 received no counseling (40.8%). Patient factors including age, race, and severity of renal disease did not impact of counseling in this study. Dialysis patients were disproportionately not counseled. Continued discussions about women's health issues continue to be a pivotal part of caring for patients with chronic kidney disease.

Biography

Dr. Okundaye is a native from Wisconsin, born in Chicago IL to immigrant parents from Nigeria. She attended Wake Forest University in Winston-Salem, NC under the "Joseph G. Gordon" Scholarship, where she studied Biology and Chemistry. She earned her medical degree from University of Wisconsin School of Medicine and Public Health in 2015 and then completed her internal medicine residency training at Loyola University, Chicago, IL where she was appointed a research scholar and developed a curriculum for medical student education. This year Dr. Okundaye finished her nephrology fellowship at Stanford University for advanced clinical and research training in kidney disease. Her area of interest is women's health with focus on fertility, pregnancy, and contraception. She has authored research manuscripts, case reports, book chapter and presented her research at numerous conferences including at the International Society of Nephrology Frontiers Meeting in Tokyo, Japan. Dr. Okundaye has hosted and produced a health radio show and a community health podcast in order to expand her outreach to those seeking answers to health problems. In 2019, she developed the Ivie O. Appiah Medical Arts Institute that produced a short film about the kidney patient experience. The Institute is currently developing future projects in film and media. Dr. Okundaye was also featured on the cover of Women magazine where her story was showcased in the article "Queen for a Day" in the October 2019 issue. For. Ultimately, she hopes to empower people to be their own health advocates



Citizen participation and new practices and meanings for the development of healthy public policies

Jorge Mandl Stangl

Ministerio Popular para la Salud, Venezuela

Background: From 1994 to 1999, the Ministry of Health, together with the Pan American Health Organization and supported by the leadership of the mayors, promoted the project "Municipalities Towards Health" in Venezuela, whose main objectives focused on the implementation of healthy public policies that sought to reduce and mitigate the consequences of social inequalities; through the interaction of governmental and non-governmental sectors such as agriculture, commerce, education, sport, industry, among others; and in this way, establish a local culture of governance for health and wellbeing through community projects, for which a methodology was designed.

This effort, which had been advanced in 75% of the country's federal regions, was interrupted due to a change in government and project management; however, thanks to iteration in inclusive citizen participation, health promotion activities became sustainable over time. Among the facilitating factors that marked these processes, the strengthening and consolidation of social capital stands out.

Methodology: In this qualitative research, we attempt to demonstrate the importance of social capital in this process. The knowledge emerged from the focus groups conducted in the five municipalities with the greatest unsatisfied basic needs at the beginning of the

project and involved a total of 200 actors, who recounted their inter-subjective relationships experienced between 1994 and 2013.

This evidence was systematized into four constructs that characterize social capital as a determinant of health: sense of community, collective efficacy, community capacity and community competence. We also compared the results in relation to its impact on life expectancy and infant mortality.

Results: Psychological sense of community or sense of community. Solidarity and social responsibility were the cardinal principles that facilitated the organization of communities through the union of networks that privileged the promotion of health. From this emerged a group identity to generate their own political culture, promoting social roles, customs and ethical norms such as co-responsibility, freedom with shared social objectives, commitment or the capacity to promise, critical capacity based on trust and the constant will to practice justice; in this framework, they built a participatory agenda through dialogue and agreement with all social, political and economic forces.

Collective efficacy. Through a series of acquired values and behaviours such

as mutual trust, an inclusive higher identity that allows social identities to overlap, and cooperation for the common good, organised

communities gained greater access to decisions, driving negotiated projects that guaranteed their citizenship rights. In this perspective, the government committed itself to facilitating technical and political decision-making through deliberative actions leading to negotiated proposals. To consolidate this process, a number of joint mechanisms for monitoring targets were formalised in different types of collective spaces to inform communities of progress over time.

Community capacity. Participants built and coalesced around networks through which they acquired new competencies and skills, and various advocacy mechanisms and technical procedures were established to assist in the implementation of these initiatives. In this way, communities, local government teams and government agencies consolidated their leadership style.

Community competences. In these initiatives, the community acquired the competencies to articulate with the government and various public and private institutions. This organisation, a product of the balance between solidarity, social justice and the rights of communities, allowed for targeted, planned and constructive behaviour that provided the triggers and political legitimacy for the elaboration of the social contract that privileged the promotion of health and well-being.

Health impact. Life expectancy at birth increased between 0.6 and 4.5 years. The infant mortality rate decreased between 4% and 44%. In this sense, the municipalities with the greatest basic needs satisfied made impressive progress, as evidenced by the fact that the interactions carried out in populations with greater social capital provide greater possibilities of intervening on avoidable and unfair factors that condition differences in life opportunities.

Conclusion: The research highlights the need for early recognition of the role that community networks and other citizen activities can play in promoting positive health and wellbeing outcomes through participation

An active and resilient citizenship was able to build participatory agendas to interact on the social determinants of health, whose fundamental political objectives were the satisfaction of basic needs in vulnerable populations;

The effective development of these agendas was associated with an accelerated process of building social capital to achieve positive health/quality of life outcomes in various sectors through the implementation of healthy public policies;

The empowered and effective citizens who helped bring about these democratic gains and benefits did not automatically achieve their goals. New forms of governance and the mobilization of extraordinary public and private resources were also very important;

Strengthening these citizen participation processes along with political will and supporting mechanisms, such as interactive methodologies and broader legal instruments, created opportunities to improve government responsiveness; and

It is from the sustainability of these events that citizen participation took on a new cultural significance for the governance of health and well-being.

Recommendations: These findings have a number of implications for community associations and policy makers as well as donors and development agencies, which in turn can contribute as a resource for political negotiation in building responsive governments towards health-in-all-policies approaches:

A long-term social pact that consolidates political support from the highest authority at each level of government is needed to develop different legal, social and economic structures that engage organised communities;

The conceptual and methodological capacity of the different actors involved needs to be strengthened in order to systematically preserve the model in the context of conflicts

of interest exacerbated by strictly sectoral judgements in public institutions and the community in general; and

Financial sustainability needs to be ensured to maintain structures and processes in the presence of economic uncertainty and the discretionary will of the government of the moment.

Biography

Venezuelan/German doctor with a PhD in Political Science and a Masters in Public Health Administration; with courses in Local Development and Social Management in Health and in Management Design of Social Policies and Programmes. He has held various positions in the Venezuelan Ministry of Health at local, state and federal level. He has also represented Venezuela as Temporary Advisor to PAHO/WHO in several countries. He is currently Advisor to the National Academy of Medicine of Venezuela and the Venezuelan Society of Public Health. *iedad Venezolana de Salud Pública.*



Ethical aspects of AI in healthcare

Christoph Lütge

TUM Institute for Ethics in Artificial Intelligence, Germany

A recent survey in Germany found that people increasingly would like to see AI deployed in a variety of application fields, and in particular in healthcare-related sectors. This is most probably due to the multiple opportunities AI can offer. However, serious, especially ethical, issues arise with its use. Not least the Covid-19 pandemic has taught us how technologies which could help solve demanding challenges, however need to be carefully reflected on and designed to foster trust and well-being of society. To address and manage the risks arising from such ethical concerns, researchers have

developed recommendations, such as the Ethics Guidelines for Trustworthy Artificial Intelligence by the European Commission, or the Ethical Framework for a Good AI Society by the AI4People Committee. However, these frameworks tend to be rather broad and need to be adapted to the specific application contexts. One of the current challenges for AI ethics research, and even more so for responsible AI use in sensitive areas such as healthcare, is therefore to develop concrete and applicable guidelines that can be used and implemented directly on specific AI systems. Examples will be given.

Biography

Christoph Lütge is Full Professor of Business Ethics at TU Munich and the Director of the Institute for Ethics in Artificial Intelligence (IEAI). He is Distinguished Visiting Professor of Tokyo University and has held further visiting positions at Harvard, Stockholm, Taipei and Kyoto. His most recent book is "Business Ethics: An Economically Informed Perspective" (Oxford University Press, 2021, with Matthias Uhl). He is a member of the European AI Ethics initiative AI4People and of the German Ethics Commission on Automated and Connected Driving.



Waterpipe smoking and the coronavirus syndemic

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This paper aims to provide a background to the phenomenon of waterpipe smoking during the present COVID-19 syndemic. In the context of a syndemic, it seeks to summarise what research findings have revealed to date of the specific dangers of this form of tobacco use in the current situation, in terms of the particular dangers of the use of the apparatus itself, social settings in which waterpipes are smoked, and the perceptions of smokers themselves on the potential harms at this time.

A narrative review, based on a focused search of electronic databases, was conducted, which resulted in a final list of 49 articles which were selected for inclusion in the paper. The results obtained from this review provided strong confirmatory evidence of the specific dangers both of transmitting infection via the waterpipe apparatus, whatever its regional variation, and the social milieu in which transmission of the COVID-19 virus was likely to be increased. The discussion of the results of the research was then widened to include what is known about the beliefs of smokers in general, and waterpipe smokers in particular, on the health risks of waterpipe smoking and the likely transmission and severity of the COVID-19 virus.

Introduction: A number of published studies have investigated diverse aspects of the impact of COVID-19 on various aspects of the behaviour of individuals during lockdowns. These include

a survey conducted in Italy into eating habits and lifestyle changes (Di Renzo et al, 2020), sedentary time and behaviour (Runacres et al, 2021). cannabis use in Spain (Fernandez-Artamendi et al, 2021) and smoking. It is those studies relevant to waterpipe (hookah) smoking behaviour during the present COVID-19 syndemic which form the basis of the discussion in this paper.

First, however, the choice of the term syndemic rather than pandemic should be explained (Horton, 2020; Medenhall, 2020; Courtin and Vineis, 2021). What drives the coronavirus to spread through the population of a specific region or country is an interaction of particular political, social, economic and cultural factors. Patterns of social inequality exacerbate the adverse effects of the disease. Recognising these determinants of health is central to the concept of a syndemic., rather than the narrower perception of the COVID-19 outbreak as a biomedical issue.

Synergistic failures cannot be omitted from the discussion of forms of tobacco use or a wide range of causes of ill-health, including viral diseases, and how to combat them in the future. For example, Gaiha and colleagues (2020) conducted an online national survey of over 4000 adolescents and young adults (aged 13-24) in the USA in May 2020, investigating a possible association between cigarette and e-cigarette use and COVID-19. One finding

was that some ethnic groups, especially among African American, Hispanic and other multi-race youth, were at an increased risk of contracting COVID-19. In their communities, crowded living conditions made social distancing difficult, they experienced greater economic stress, having to work in service-industries rather than self-isolate working from home, and problems of accessing health care were all contributory factors. In addition, numerous studies have found a positive association between tobacco use itself and low-income (e.g. Sreeramareddy and Acharya, 2021; Hosseinpour et al, 2012; Casetta et al, 2017).

Methodology: This study aimed to provide a background of the potential dangers of waterpipe smoking during the COVID-19 syndemic. In order to achieve this objective, a narrative review (Pare and Kitsiou, 2017) of the literature relating to this topic was conducted from October to December 2021. This review aimed to synthesize existing findings not only on the dangers of waterpipe smoking during the syndemic, but also on the behaviour of waterpipe smokers, and official actions to control or influence such behaviour. All articles relating to the practice of waterpipe smoking published since the beginning of the syndemic were included. In addition, literature relating to the prevalence of waterpipe smoking prior to the start of the syndemic was also consulted, to provide a necessary background for the evaluation of recent changes.

A search was made of electronic databases, to include both primary studies and systematic reviews. PubMed, ISI Web of Science, CrossRef and the World Health Organisation (WHO) websites were searched from 1990 to December 2021. AK and PW conducted this search and a cross-referenced short list of 76 articles was compiled, based on the following search terms: waterpipe smoking, hookah, COVID-19, health effects. Not all studies were excluded which

related to cigarette smoking and COVID-19 – in particular, the abstracts of articles which examined smoking and health behaviour during the syndemic were reviewed and, where relevant to the objective of this paper, were included in the final shortlist. Out of 76 screened articles, a final list of 49 was selected for inclusion in this review. In terms of the data extraction, author, year/month of publication, type of study and design, sample size, duration of the study, the setting and principal outcomes were all recorded.

Results: Shekhar and Hannah-Shmouni (2020) argue that waterpipe smoking is associated with an increased risk of transmitting the COVID-19 virus. As circumstantial evidence for this, they cite the study by Alagaili and colleagues (2019) which investigated the link between Middle East Respiratory Syndrome coronavirus (MERS) and waterpipe smoking. This was a surveillance study, testing samples from almost 2,500 waterpipe hoses throughout several regions in Saudi Arabia. Repeated sampling was carried out between winter 2015 and spring 2016 at cafes near sites of MERS-CoV emergence. The screening results for the presence of MERS-CoV were negative. The authors concede that these results may be the result of inadequate sampling. There is thus no firm evidence to date of a direct association between waterpipe smoking and the transmission of COVID-19. However, despite the need for more research, the WHO is urging that strict measures be imposed in member countries to ban the use of waterpipes (2022(i)) as one of the necessary measures to control the transmission of the virus.

There are a number of reasons why the WHO is concerned about changing the behaviour of waterpipe smoking specifically in the context of the present syndemic. Of the direct association which is posited both by Alagaili and colleagues (2019) - in the case of MERS-CoV - and the WHO (2022), the following reasons are given.

Firstly, the smoking of waterpipes in cafes presupposes communal use – the sharing of a single mouthpiece and hose, and the impossibility of physical distancing in this social environment. Secondly, in waterpipe cafes Alagaili and colleagues (2019) noted the lack of routine cleaning of the waterpipes after each smoking session, further increasing the risk of transmission of infectious microbial agents. In addition, these cafes throughout the world tend to be densely occupied and badly ventilated (Kalan et al, 2020). Daniels and Roman (2013) note that sharing a waterpipe contributes to a range of tuberculosis, viral and bacterial infections when an infected user shares a mouthpiece with non-infected individuals through the transmission of oral secretions.

The contention of Daniels and Roman, of course, precedes the COVID-19 syndemic. Corroborative evidence is provided, in the context of COVID-19, in a study by Sinclair and colleagues (2021). This was a convenience sampling study conducted in the Lao People's Democratic Republic in July 2011 where, although the waterpipe has a simple bamboo construction, the parts still perform the same function as the Eastern Mediterranean waterpipe. In this study, samples were taken from the water bowl of the waterpipe, and the field assessment of water quality indicators

showed that the water inside the Lao waterpipes had the potential to be contaminated by various types of micro-organisms. In addition to microbial mechanisms, infectious disease exposure – such as to the COVID-19 virus – was identified as a potential risk. The virus thrives in dark, humid environments and will be spread through communal use in the smoking process.

In Turkey, Altindis and colleagues (2020) analysed culture samples from 182 waterpipes used in public places. The inside and outside of the mouthpiece were sampled, along with water from the waterpipe bowl. The mouthpiece – inside and outside – and the handle were found to be the most affected parts in terms of bacterial contamination. The role played by hand contact is evident in the results found from analysis both of the handle and the outside of the mouthpiece. The significance of the findings – that microbiological growth in the waterpipe samples collected from the public establishments was very high – is that they indicate that waterpipe smoking increases the likelihood of the transmission of respiratory pathogens, including viruses as well as tuberculosis (Sinclair et al, 2021), fungi and a range of other bacteria. The study did not analyse samples from the interior of the hoses, although the authors cite other earlier research which tends to confirm

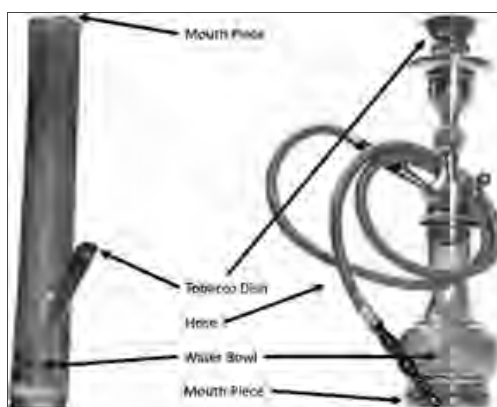


Figure 1: Waterpipe components in the Lao PDR (left) and the Middle East

their findings (Safizadeh et al, 2014; Alaidarous et al, 2017; Shakhathreh et al, 2018).

Although the majority of these studies, therefore, pre-date the outbreak of the COVID-19 syndemic, they clearly underpin the concerns expressed by Shekhar and Hannah-Shmouni and the WHO about the potential risks of waterpipe smoking for increased transmission of the virus. A summary is provided in Table 1 below.

Discussion: Evidence for the many harms resulting from cigarette smoking has been furnished by innumerable studies, to the effect that the best efforts of the tobacco industry have been unable to contest the findings, which are now universally acknowledged. In terms of cigarette smoking and health risk beliefs during the COVID-19 syndemic, Brown (2021) has published a useful review of the findings to date. As he indicates, some studies have concluded that current or former cigarette smokers are at higher risk of contracting more severe symptoms of COVID-19, or even mortality, than never-smokers. The proponents of the opposing case argue that nicotine may have a protective role in those who contract COVID-19 (Simons et al, 2021, Lippi and Henry, 2020; Rossato et al, 2020). Several articles have considered the evidence for both claims, including Cattaruzza et al (2020), Samet (2020) and Shastri et al (2021).

The survey results obtained by Brown (2021) indicate that – in the UK, at least – that the perceived probability of contracting COVID-19 correlated with motivation to quit cigarette smoking. Having reviewed the findings of studies on the dangers of cigarette smoking in relation to COVID-19, it remains to discuss the perceptions of waterpipe smokers on the risks posed by the syndemic.

As in the case of cigarette smoking, the evidence for the harms occasioned by waterpipe smoking is overwhelming. These harms include significant

association with lung cancer, respiratory illness, bladder and oral cancers, and heart disease among its many serious risks (Akl et al, 2011; El-Zaatari et al, 2015; Waziry et al, 2017). A full and recent appraisal of these harms may be found in Darawshy et al (2021). The waterpipe smoke – a mixture of tobacco and molasses known as 'maasel' – is cooled as it passes through the base of the waterpipe, enabling smokers to inhale it deeper into their lungs.

However, despite such evidence, waterpipe smoking is widely considered to be less harmful than cigarette smoking (Jaam et al, 2016). There is a misconception that passing smoke through the water acts as a cleaning process to remove toxins (El-Zaatari et al, 2015) along with the view that the intermittent practice of waterpipe smoking is less harmful compared with the constant use of cigarettes (Qasim et al, 2019; Maziak, 2008). A single waterpipe smoking session typically lasts for 30-90 minutes, during which time a large volume of smoke is produced. This contains the equivalent of 80 times more toxicants than those found in the smoke of a single cigarette (Al Ali et al, 2020). The effect on smokers, and second-hand smokers, in cafes, homes or meeting places has serious health implications. The tobacco industry has played a role in promoting this confusion (Ahmad & Dutra, 2019; Maziak, 2008). In fact, waterpipe users are exposed to many of the same toxic compounds as cigarette users, although at levels which are much higher (Qasim et al, 2019; Rezk-Hanna & Benowitz, 2019).

While there are estimates of 100 million waterpipe smokers globally (Al Ali et al, 2020; Ward et al, 2005), these are less useful than national and regional studies in identifying trends. The WHO Tobacco Atlas (2015) adopts such a national approach to the prevalence of waterpipe use, for example to identify trends in Syria, 1955-2000. Jawad et al (2018) adopt the same approach for the Middle East and Europe.

Maziak (2008) summarises the principal trends. Although prevalence is highest in the Middle East and North Africa, waterpipe use is growing rapidly in Europe and the Americas (Babaie et al, 2021; Akl et al, 2011). The practice declined during most of the 20th century, but waterpipe smoking saw a rapid increase in popularity in the 1990s coinciding with the introduction of sweetened waterpipe tobacco ('maasel'). The tobacco industry commercialised and glamourised the practice on the internet and mass media, especially targeting the youth market. Studies of waterpipe smoking indicate increases since that time in most countries both for daily use and ever-use, with the greatest increases among the youth, both boys and girls (Maziak et al, 2014). A growing number of national studies confirm this trend and Jawad et al (2016) provide confirmatory evidence from the Global Youth Tobacco Surveys.

In their systematic review, Babaie et al (2021) draw attention to the management and prevention of waterpipe tobacco use, noting that waterpipe products are still tax exempt, but although taxation has been effective in controlling cigarette smoking, this may not be the case with waterpipe use (Jaam et al, 2016; Maziak et al, 2014). In the present situation of the presence of COVID-19, the association of waterpipe smoking with the restaurant and cafe culture – an influential factor in its growth and popularity – has induced some authorities to institute bans on these places. The Eastern Mediterranean Regional Office (EMRO) of the WHO has reminded its 19 member states that, as signatories to the Framework Convention on Tobacco Control, they have a legal obligation to ban smoking in all indoor public places. 17 of the member countries have banned waterpipe use temporarily in public places (WHO, 2022 (i)), though full implementation of the legislation is necessary to put this into effect. The WHO EMRO has publicised the measures taken in Iran to ban

waterpipe use in public places to limit the spread of COVID-19 (WHO, 2022 (ii)) as an instance of what can be achieved through determined policy implementation.

The Eastern Mediterranean Region still has the highest prevalence of waterpipe smoking in the world (Shihadeh et al, 2004). Two recent studies from this region investigated the relationship between beliefs and tobacco use behaviours and the risk of COVID-19 infection among samples of smokers and never-smokers. Both studies included waterpipe smoking in their surveys. Firstly, in Iran, Kalan and colleagues (2020) included 89 waterpipe smokers among respondents in their online national survey. From the responses, 38.2% of waterpipe smokers considered that waterpipe smoking was related with spreading infection of COVID-19, compared with 14.6% of cigarette smokers who believed that cigarette smoking was related with spreading infection of COVID-19. Of all the 944 study participants as a whole, 29.1% thought that cigarette smoking was related with spreading COVID-19 infection, compared with 49.4% who believed that waterpipe smoking and spreading COVID-19 were related. The survey also found that waterpipe smokers (approximately 1 in 4) were more likely than cigarette smokers and never-smokers to believe that smoking waterpipe at home was safe during the syndemic, and that smoking waterpipe would have a protective effect and lead to more rapid recovery if they were to be infected with COVID-19. This is all the more concerning, since in Iran waterpipe-home delivery services have become popular with the closure of cafes due to government bans (Kalan et al, 2021). Such perceptions of the safety of waterpipe smoking will increase risk for the smokers themselves and those – such as the family in the home – with whom they interact.

A second study into health beliefs and tobacco use during the syndemic also included waterpipe

TABLE: Waterpipe Use and Risks of Infections. A Literature Summary

Authors	Date conducted	Sample size	Place conducted	Type of study	Aim of study
Alagali et al 2019	2015-2016	2500 hoses	Saudi Arabia – cafes in various regions	surveillance	Test for presence of MERS-CoV
Alaidarous et al 2017	unspecified	264 culture samples	Saudi Arabia – 3 cities (10 cafes)	Random sampling	Identify bacteria contaminating waterpipe bowls, mouthpieces
Altindis et al 2020	2020	728 culture samples (182 waterpipes)	Sakarya province, Turkey (7 public lounges)	surveillance	Identify bacteria colonising waterpipes
Daniel & Roman 2013	unspecified	389 students	Western Cape, South Africa	Cross-sectional, descriptive	Assess behaviours, beliefs re. health risks of waterpipe smoking
Safizadeh et al 2014	unspecified	285 culture samples	Kerman, Iran (15 cafes)	Random sampling	Bacterial contamination of waterpipes
Shakhatreh et al 2018	unspecified	100 participants	Irbid, Jordan (cafes)	Random sampling	Bacterial contamination of waterpipes
Sinclair et al 2021	July 2011	43 participants in 5 rural villages	Lao People's Democratic Republic	Survey type unspecified	Test for microbial survival and growth in waterpipes

smokers among the participants. In Jordan, an online survey conducted in March 2021 by Al-Tammemi and colleagues (2021) included 2424 participants. Among the findings related to waterpipe smoking, respondents recorded their opinions on the relationship between smoking and domains of COVID-19 such as risk and spread of infection, safety concerns of smoking in public places and the home, clinical outcome and the belief in the protective effective of nicotine. Approximately 38.2%, 72.9% and 44.6% of respondents believed that cigarette smoking, waterpipe smoking and e-cigarette smoking respectively were related to the risk of contracting COVID-19. Clearly, participants considered that waterpipe smoking constituted a much higher risk. About 74% also considered that severity of COVID-19 would be worse for waterpipe smokers, and almost 80% believed that waterpipe smoking in public places was unsafe during the syndemic.

Conclusion: All the evidence suggests that waterpipe smoking poses its own unique set of risks and hazards during the COVID-19 syndemic. When combined with the well-

established dangers of tobacco use in causing mortality and morbidity, contributing to a wide range of illnesses, the particular features of waterpipe smoking – the social setting, the apparatus used, the perceptions of waterpipe smokers themselves – all present a cause for concern.

This review has concentrated on the research conducted in the Middle East region, both before and during the COVID-19 syndemic. While this region constitutes the highest use of waterpipe smoking, it is necessary to emphasise again that current research has alerted health authorities on the growing widespread use of waterpipes as a global problem, along with e-cigarettes and even e-hookah innovative products promoted by the tobacco industry. Misinformation disseminated by the industry has aided in influencing perceptions and endangering lives.

More information is now required on motivation specifically to quit waterpipe smoking since the start of the syndemic, along with an appraisal of the effect of bans on waterpipe cafes in those countries where such bans have been applied.

Biography

Khaled Alturki:

M. Phil., University of Huddersfield, 2014: The perceptions of smokers and health care professionals on the smoking cessation program in Saudi Arabia.

M.A. University of Bradford, 2006: Strengthening the relationship between the social worker and drug addicts.

1996-2005: various senior administrative positions in the Northern Area Armed Forces Hospital, Saudi Arabia, relating to logistics and patient affairs.

2007-2012 and 2015-2018: senior administrative roles within the Prince Sultan Military Medical City, Riyadh, Saudi Arabia.

2019- present: attached to the Saudi Arabian Embassy, London.

Peter Walton:

M.A. Honours History, University of Edinburgh, 1969.

M.A. Latin America Studies, University of London, 1970.

1972-present: teacher of English as a Foreign Language (EFL) in schools and colleges in Chile, Portugal and the UK. Online contributor to international EFL websites.



Efficacy and cost-feasibility of the Timely Chest Compression Training (T-CCT): A contextualized cardiopulmonary resuscitation training for personal support workers participating during in-hospital cardiac arrests

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Objectives: The Timely Chest Compression Training (T-CCT) was created to promote more frequent training in chest compressions for personal support workers. This study aims to assess the efficacy of the T-CCT on the chest compression performance and to examine costs related to this intervention.

Methods: A prospective single group, before-after study was conducted at a university-affiliated hospital. The T-CCT is adapted for support workers and lasts 20 min during working hours. Guided by peer trainers, live feedback devices and mannikins, the T-CCT targets chest compression training. Using an algorithm, chest compression performance scores were gathered before and after the intervention.

Results: Of 875 employed support workers, 573 were trained in 5 days. Prior to the intervention, the median performance score

was 72%. Participants significantly improved after the intervention ($p < 0.001$) and the median of the differences was 32% (95% CI 28.5–36.0). Support workers in critical care units and those with an active basic life support (BLS) certification performed better at baseline and were less inclined to have large changes in performance scores after the intervention. When compared to basic life support training, the T-CCT is over three times less expensive.

Conclusions: The T-CCT was an effective and low-cost initiative that allowed to train a large group of support workers in a short amount of time. Since they are actively involved in resuscitation efforts in Quebec (Canada), it may promote the delivery of high-quality compressions during in-hospital cardiac arrests. Our inquiry can incite and guide other organizations in the implementation of similar interventions.

Biography

Catalina Sokoloff is an Emergency and Intensive Care Physician working at the CHUM, a tertiary academic hospital in Montreal, Canada. She has completed a 1-year Fellowship program in Clinical Simulation and Medical Education in Sydney, Australia, and is now in charge of the In Situ Simulation Committees of both services at her institution. She shares her clinical practice between the Emergency Room and the Intensive Care Unit, and she fills the rest of her time developing training programs for healthcare workers to improve patient care and cardio-pulmonary resuscitation performance. Her academic and research interests lie in the fields of Crisis Resource Management, teamwork efficiency, and optimal teaching methods.



Using mobile phones in health behaviour change: Perceptions among adolescents

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Health promotion interventions delivered via mobile phones (mHealth) need to be carefully tailored to end-users to optimize engagement and effects on health outcomes. However, tailoring requires an in-depth understanding of the users' context and under which circumstances end-users are willing to engage. The aim of this study was to identify and describe how high school students perceive health behaviour change and how mobile phones are used in the process of change. Thematic analysis was used to

analyse data collected through 6 focus groups with 21 Swedish high school students (16–19 years). The results showed that behaviour change among adolescents were promoted by having an open approach, being able to be independent, and self-accepting. Mobile phones can provide resilience in long-term behaviour change. These findings may be useful in the development of mHealth interventions, but also for professionals in promoting healthy behaviours among adolescents.

Biography

I am a PhD-student with an interest in health behaviours among adolescents and in promotion of healthy behaviours through interventions delivered via mobile phones (mHealth). My research interest involves qualitative as well as quantitative methods. Before my PhD-studies, I worked as a school nurse and that was why I became interested in the public health area of reaching many individuals at a time, and at any place, and across socio economic strata, by use of digital tools to support healthy behaviours. My first manuscript was accepted and published in June 2021. Orcid: 0000-0002-7780-8417.



Assessing understanding of caregivers on immunization and COVID-19 vaccines using a survey instrument

Gozde Ercan, Meryem Ozdemir and Sirin Guven

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Background: Preventive medicine and immunization are crucial to preserve public health. In this study, it was aimed to determine the perspectives of the caregivers against the immunization services and awareness of the vaccine for the Covid-19 pandemic, which is the most critical challenge in nowadays.

Methods: In this cross-sectional descriptive study, parents who applied to the pediatric outpatient clinic of our hospital for any reason during one-week period were evaluated. A questionnaire was administered to 205 parents about their knowledge and perceived on immunization and Covid-19 vaccines. Demographic characteristics of families, income and education levels, number of children and presence of Covid-19 vaccination of the parents were sought. The questionnaires were filled in by face-to-face interview method after informing the participants about the study and obtaining consent from the participants. SPSS software was used for analysis. Content analysis method was used to evaluate the data at qualitative stage.

Result: In the study, 205 questionnaires were

included. Of the parents who participated, 174 were mothers, 42.4% (n:87) were between the ages of 30-39, 48,8% (n:100) were housewives and 21,0% (n:43) were primary school graduates and 21% were unvaccinated. Majority of the parents (42%) believe that there are other ways to prevent diseases which can be prevented by a vaccine and 37% of them assume to get not enough information on vaccines. Thirty eight percent of parents presume the vaccine causes the diseases. It was found 70% of the parents assume that not be vaccinated is an individual right. It was observed that as the level of education of the parents increased, the rate of being aware of vaccines and getting them increased.

Conclusion: It was concluded that majority of the parents believed that not getting vaccinated is an individual right. A significant number of parents were found to lack information about vaccines. Getting vaccinated is not an individual decision. To increase awareness of caregivers about vaccines can be achieved by providing accurate and appropriate information by health professionals and extended immunization programs to the public.

Biography

I- Personal Information

Name, Surname: Gözde Ercan

II- Educational Information

Speciality in Medicine 2016-2020	University of Health Sciences Ümraniye Training and Research Hospital / Department of Child Health and Diseases / Department of General Pediatrics
Medical Faculty 2009-2015	Kocaeli University Medicine Faculty

III- Work Experiences

Medical Intern 2012	Faculty Hospital Mickiewiczova, Department of Dermatology, Slovakia
Medical Intern 2013	University of Crete, Heraklion, Greece
General Practitioner 2015-2016	Gaziosmanpaşa Community Health Center, İstanbul
Observer Doctor 2017	Mcgill University Health Centre, Department of Pediatric Genetic, Canada
Physician Associate 2016-2020	Ümraniye Training and Research Hospital / Department of Child Health and Diseases
Specialist Doctor 2020-	Sancaktepe Şehit Prof. İlhan Varank Training and Research Hospital / Department of Child Health and Diseases

IV- Scientific Organizations

Turkish Pediatric Institution (Türk Pediatri Kurumu), 2019

SCIENTIFIC ABSTRACTS

DAY 2



3rd GLOBAL Nursing Congress

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GLOBAL NURSING 2022



Privacy-preserving federated clinical analytics

R. Wuyts, C. Herzeel and W. Verachtert

Imec's ExaScience Life Lab, Belgium

Related health data is sometimes dispersed over multiple data silos, each controlled by a different entity (GP, hospital, lab, health insurer, pharma company, ...). While each of these entities can apply their own machine learning on their data, their models could potentially benefit from the data held in other silos. However, for practical, business, IP or legal reasons, directly sharing the data (such as with federated data approaches) or the models (such as with federated learning) is often difficult. This talk explains the concept of federated analytics, that lets each participating entity build their own model using only locally available data whilst indirectly incorporating information from other data silos in a way that doesn't compromise privacy. We illustrate this with two cases in a clinical setting. In the first

we introduce amalgamated machine learning (PAML), a federated analytics approach that only calculates and shares PAML features, that are meant to preserve privacy and IP of the underlying data as well as models. We show how we can apply PAML in application on predicting acute kidney injury (AKI) prediction models where early results using the MIMIC-III data set show that the performance of federated analytics is significantly better than purely local models, and close that of models built by ignoring privacy and pooling all data. Next we also introduce the Athena research project where multiple leading hospitals in Flanders, pharma industry and research partners are developing a federated analytics platform for clinical oncology research.

Biography

Roel Wuyts leads imec's ExaScience Life Lab, a lab focused on scaling software solutions for data-intensive high-performance computing problems, primarily in the life sciences domain. The lab has extensive experience with high performance computing technologies (distributed computing, parallel computing, concurrent computing, vectorization, NUMA optimizations), programming languages (Go, C++, Python, Lua, Rust, and many more), and usage of hardware accelerators (GPU, TPU, FPGA). By leveraging their high performance computing skills, imec's ExaScience Life Lab frequently helps companies in developing prototype software solutions for complex problems involving multiple disciplines. The lab has successfully done this for large-scale machine learning for pharmaceutical companies, DNA sequencing software for hospitals and pharmaceutical companies, large scale image feature extraction from high throughput screening, or advanced biostatistics and data analytics. With privacy and protection of IP becoming paramount when doing AI on health data, the lab is proposing innovative privacy-preserving amalgamated machine learning techniques to reason across data silos. Roel is also part-time professor at KU Leuven. His academic achievements include publications in PLOS One, IEEE Software, TOPLAS, ECOOP, OOPSLA or AOSD.



Integrated management of HIV/NCDs: Knowledge, attitudes, and practices of health care workers in Gaborone, Botswana

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Background: The unprecedented epidemiologic transition and double burden of disease due to chronic infectious and chronic non-communicable diseases (NCDs) worldwide require health systems to rethink their healthcare delivery mechanisms. This will mandate healthcare workers (HCWs) adopting and adapting to new integrated disease management approaches.

Objectives: The study aimed to determine healthcare worker knowledge, attitudes, capacity and skills required for screening and management of chronic NCDs among HIV patients, in order to identify existing gaps on their clinical practice which could affect provision of integrated HIV/NCDs care in Botswana.

Methods: This study employed mixed quantitative and qualitative approaches. This paper reports on the quantitative study, which was a descriptive cross-sectional survey of nurses and doctors caring for HIV patients at randomly selected government facilities in Gaborone, Botswana.

Results: Of the 100 questionnaires analysed, only 6% healthcare workers could fully define NCD. HCWs demonstrated good general awareness of diabetes (98%), hypertension (98%), cancer (96%) and cardiovascular diseases (86%) but inadequate in-depth knowledge on all these four NCDs. Surprisingly HIV (11.8%) and malaria (58%) were classified as NCDs (table 1)

Disease	NCD-Yes		NCD-No	
	Count	%	Count	%
High Blood pressure	90	97.8	2	2.2
diabetes	90	97.8	2	2.2
road Traffic Injuries	60	69.0	27	31.0
Heart Attack	86	93.5	6	6.5
Cancer	87	95.6	4	4.4
Malaria	49	57.6	36	42.4
Depression	80	88.9	10	11.1
tuberculosis	4	4.8	80	95.2
HIV	10	11.8	75	88.2

Table 1: Respondent's ability to identify NCDs from a list of diseases

Most (88%) believed that integrating HIV/ NCD care would be good use of resources and welcomed it while 62% did not believe that HIV patients with NCDs should be managed at different clinics (figure 1)

In practice, over 60% of the HCWs already screened HIV patients for common NCD risk factors including smoking (87.2%), alcohol consumption (90.8%), diet (84.9%), and physical activity (73.5%).

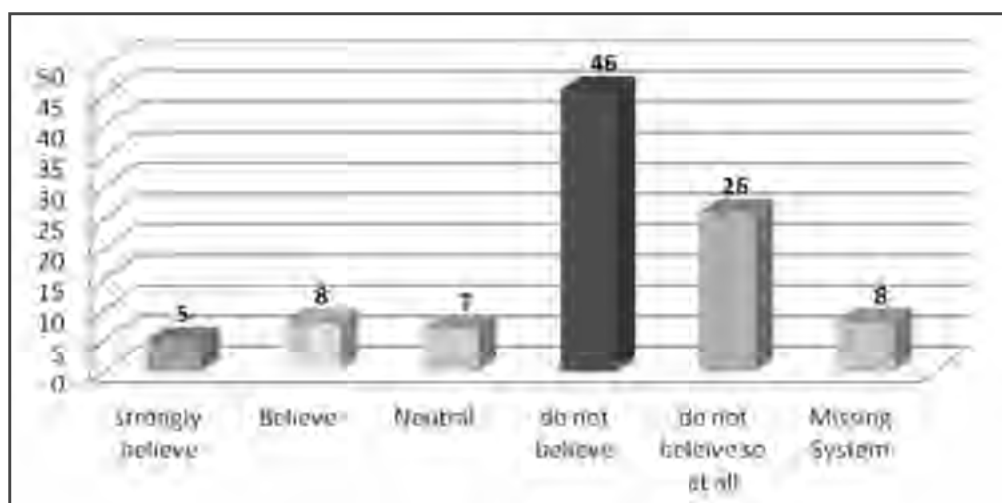


Figure 1: Should HIV patients with co-existent NCDs be treated at separate facilities

Conclusion: There was a gap in detailed knowledge on NCDs among surveyed HCWs in Botswana, but a positive attitude towards integrated HIV/NCD management. HCWs already routinely screen HIV patients for NCD risk factors

but only for purposes of HIV risk management. Integrated HIV/NCD care is likely to be positively implemented by healthcare workers if they are provided with relevant training and support.

Biography

Dr Masupe is a senior lecturer & assistant program director for the Master of medicine (MMed) Public Health at the University of Botswana (UB). Dr Masupe's qualifications include a Bachelor of Medicine & Bachelor of Surgery (MBBCh) from Cardiff UK, Master's in Public Health from South Africa, Master of Science in Occupational Medicine from Manchester UK and currently a PhD fellow in NCDs focusing on type 2 diabetes and hypertension, at the University of the Western Cape, South Africa. She is a fellow alumni of the AFYABORA Global Health Leadership fellowship. She is the first recipient of the Neil Nathanson AfyaBora Global Health leadership award. She has previously worked as a medical doctor and an occupational health physician in UK. Other leadership roles which came about in her capacity as a medical educator include Chair of the national technical working group for Quality And Safety Of Care; Country lead for the May Measurement Month Hypertension project in collaboration with the International Society for Hypertension. She is a fellow of the International Society of Hypertension, Member of the ISH committee for research and education.



Comparing knowledge, attitudes and practices regarding COVID-19 amongst Cameroonians living in urban versus rural areas

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Introduction: adherence to preventive measures to curb the spread of COVID-19 depends on the people's knowledge, attitudes and practices (KAP) towards COVID-19. Living in rural areas may be associated with poor KAP towards COVID-19. This study compares the KAP regarding COVID-19 of people living in rural and urban areas in Cameroon.

Methods: this was a comparative cross-sectional study, using data obtained through an online survey of 1,345 Cameroonians amongst which were 828 urban and 517 rural dwellers. The survey questionnaire consisted of; demographic characteristics, 10 questions on Knowledge, 4 on attitudes and 3 on practices. Data was analyzed using SPSS version 25.

Results: overall, about two-thirds of participants had correct knowledge of COVID-19. The mean knowledge score for urban dwellers was about

twice that of rural dwellers (15.77 ± 5.25 vs 8.86 ± 7.24 respectively, $p < 0.001$). Furthermore, when compared to people who live in urban areas, rural inhabitants are less optimistic about COVID-19 pandemic in Cameroon (OR = 3.43, $P < 0.001$), less likely to accept a trial vaccine for COVID-19 (OR = 1.14, $P < 0.05$), less likely to avoid going to crowded places (OR = 7.42, $P < 0.01$), less likely to wear face mask outdoor (OR = 11.84, $P < 0.001$), and less likely to practice hand hygiene (OR = 1.13, $P < 0.05$).

Conclusion: our findings suggest a big gap in COVID-19 related knowledge, attitudes, and practices between rural and urban inhabitants in Cameroon. This highlights the need for increase sensitization of Cameroonians, especially rural dwellers on COVID-19 related knowledge, attitudes and appropriate practices.

Biography

Atabong Emmanuel Njingu was born on 02/11/1991 in Limbe, Cameroon. He is the last of his parents' five children, amongst which are two brothers and two sisters. Emmanuel attended Catholic Primary School in Newtown, Limbe where he obtained his First School Living Certificate. After primary education, Emmanuel was admitted into Government Bilingual High School, Limbe where he obtained his General Certificate of Education (GCE) Ordinary and Advanced Levels as the best student in the school at each of the examination in 2008 and 2010 respectively. Emmanuel went on to succeed in the competitive entrance examination into University of Buea medical school where he spent the next seven years of his life studying medicine. He graduated from medical school in 2017 and have since then committed his life to scientific research and practice of clinical medicine. He currently works with Doctors Without Borders in Cameroon.



Gender differences in the association between serum uric acid, body mass index, blood pressure and kidney functions in a population with prehypertension history: A cross-sectional study

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Background: Serum uric acid (SUA) levels is related with body mass index (BMI). The increased of SUA levels has been shown to be associated with obesity and hypertension. This study aims to observe the differences of the association between SUA levels, BMI, blood pressure (BP), and kidney functions in men and women.

Methods: This study used "Mlati Study" database in 2007 to select a total of 417 patients with a history of prehypertension by simple random sampling using statistical software. Patients were interviewed and underwent both physical and laboratory examinations for data collection (including body weight, body height, BP, blood samples, and urine samples) in two days. High SUA levels were defined as ≥ 7 mg/dL and normal SUA levels as < 5 mg/dL. Additional analysis's were performed using high SUA cut-off point of ≥ 6 mg/dL for women (n=450).

Results: SUA levels were significantly associated with gender, where men tended to have high SUA

levels compared to women ($p < 0.001$, $RR = 12.39$, $95\%CI = 6.21-24.74$). Patients with overweight and obesity were significantly associated with high SUA levels, both in men and women ($p < 0.001$, $RR = 2.33$, $95\%CI = 1.34-4.05$ and $p = 0.016$, $RR = 1.05$, $95\%CI = 1.00-1.09$, respectively). Regarding kidney functions, neither uric acid excretion nor uric acid concentration had significant association with SUA levels, both in men and women. Moreover, high SUA levels were proven to be significantly related to prehypertension or hypertension, but only in women ($p < 0.05$). Additionally, analysis for different cut-off point of high SUA levels for women also showed the same results for BMI, BP and kidney functions.

Conclusion: We concluded that SUA levels in men tended to be higher than in women. Overweight and obesity were associated with high SUA level, either in men and women. Furthermore, high SUA levels were related to prehypertension and hypertension, but only in women.

Table 1A. Gender differences in the association between SUA levels, BMI, and kidney functions

Variables (n=417)	SUA ^a		P-value	RR	95% CI
	High (%)	Normal (%)			
Gender					
Men	39 (9.3)	69 (16.5)	<0.001	12.39	6.21-24.74
Women	9 (2.1)	300 (71.9)			
Age (Years)					
Men					
30-39*	6 (1.4)	11 (2.6)	-	1	-
40-49	18 (4.3)	22 (5.2)	0.140	0.68	0.41-1.12
50-59	15 (3.6)	36 (8.6)	0.170	1.43	0.84-2.41
Women					
30-39*	2 (0.4)	85 (20.3)	-	1	-
40-49	2 (0.4)	128 (30.7)	0.221	2.54	0.53-12.03
50-59	5 (1.2)	87 (20.8)	0.086	0.33	0.09-1.23
BMI^b					
Men					
Overweight-obese	19 (4.5)	9 (2.1)	<0.001	2.33	1.34-4.05
Underweight-normal	20 (4.8)	60 (14.3)			
Women					
Overweight-obese	8 (1.9)	145 (34.7)	0.016	1.05	1.00-1.09
Underweight-normal	1 (0.2)	155 (37.1)			
Uric acid excretion^c					
Men					
High	16 (3.8)	33 (7.9)	0.495	1.19	0.71-1.99
Normal	23 (5.5)	36 (8.6)			
Women					
High	3 (0.7)	97 (23.2)	0.950	0.95	0.24-3.74
Normal	6 (1.4)	203 (48.6)			
Uric acid concentration^d					
Men					
High	16 (3.8)	40 (9.5)	0.090	1.54	0.92-2.58
Normal	23 (5.5)	29 (6.9)			
Women					
High	3 (0.7)	127 (30.4)	0.590	1.45	0.37-5.70
Normal	6 (1.4)	173 (41.4)			

* reference category
^a SUA in men normal <5 mg/dL and high ≥7 mg/dL, SUA in women normal <5 mg/dL and high ≥7 mg/dL
^b BMI= body mass index, <18.5kg/m² = underweight, 18.5-24.9 kg/m² = normal, 25-29.9 kg/m² = overweight, >30 kg/m² = obese
^c Uric acid excretion, <435.08 mg/day = normal, ≥435.08 mg/day = high
^d Uric acid concentration (mg per 100 ml of urine). <46.63 mg% = normal, ≥46.63 mg% = high

Table 1B. Gender differences in the association between SUA levels, BMI, and kidney functions (with different SUA levels cut-off points for women)

Variables (n=450)	SUA ^a		P-value	RR	95% CI
	High (%)	Normal (%)			
Gender					
Men	39 (8.6)	69 (15.3)	<0.001	2.94	2.01-4.29
Women	42 (9.3)	300 (66.7)			
Age (Years)					
Men					
30-39*	6 (1.3)	11 (2.4)	-	1	-
40-49	18 (4.0)	22 (4.8)	0.140	0.68	0.41-1.12
50-59	15 (3.3)	36 (8.0)	0.170	1.43	0.84-2.41
Women					
30-39*	5 (1.1)	85 (18.9)	-	1	-
40-49	13 (2.9)	125 (27.7)	0.185	1.50	0.81-2.79
50-59	24 (5.3)	90 (20.0)	<0.001	0.37	0.21-0.66
BMI^b					
Men					
Overweight-obese	19 (4.2)	9 (2.0)	<0.001	2.33	1.34-4.05
Underweight-normal	20 (4.4)	60 (13.3)			
Women					
Overweight-obese	32 (7.1)	145 (32.2)	0.001	1.14	1.06-1.24
Underweight-normal	10 (2.2)	155 (34.4)			
Uric acid excretion^c					
Men					
High	16 (3.5)	33 (7.3)	0.495	1.19	0.71-1.99
Normal	23 (5.1)	36 (8.0)			
Women					
High	18 (4.0)	97 (21.5)	0.176	0.67	0.38-1.19
Normal	24 (5.3)	203 (45.1)			
Uric acid concentration^d					
Men					
High	16 (3.5)	40 (8.9)	0.090	1.54	0.92-2.58
Normal	23 (5.1)	29 (6.4)			
Women					
High	19 (4.2)	127 (28.2)	0.722	0.90	0.51-1.59
Normal	23 (5.1)	173 (38.4)			

* reference category
^a SUA in men normal <5 mg/dL and high ≥7 mg/dL, SUA in women normal <5 mg/dL and high ≥6 mg/dL
^b BMI= body mass index, <18.5kg/m² = underweight, 18.5-24.9 kg/m² = normal, 25-29.9 kg/m² = overweight, >30 kg/m² = obese
^c Uric acid excretion, <435.08 mg/day = normal, ≥435.08 mg/day = high
^d Uric acid concentration (mg per 100 ml of urine), <46.63 mg% = normal, ≥46.63 mg% = high

Biography

Mochammad Sja'bani graduated as a Medical Doctor at the Faculty of Medicine Public Health and Nursing, Universitas Gadjah Mada (UGM), Indonesia. He became an Internist Specialist and Nephrologist in the same University. He obtained his Medical Science degree in Clinical Epidemiology and Biostatistics at the University of Newcastle, Australia. He received his doctor of Philosophy degree and Professor in UGM. He became the Head of Internal Medicine Department and Vice Head of Ethical Committee, UGM. He was also accepted as a visiting-professor to Internal Medicine, Juntendo University, Japan. He is currently as a Professor of the Doctoral Program in the Faculty of Medicine Public Health and Nursing in UGM and Faculty of Medicine and Health Sciences in Universitas Muhammadiyah Yogyakarta, Indonesia.



Exploring maternal health in Ethiopia using indigenous approaches: Policy and practice implications

A. Ibrahima

Northeastern Illinois University, USA

The World Health Organization reports reveal that the average risk of dying from pregnancy-related causes in sub-Saharan Africa is about 1 in 45 compared to 1 in 5,400 in high-income countries. In Ethiopia, maternal mortality remains a tremendous problem. Several studies associate the high maternal mortality ratio to the widespread practice of home birth, household income, and lack of transportation. Absent from the findings of these studies is any discussion of the sociocultural contexts that might influence maternal health service utilization. Birthing bears cultural significance accompanied by rituals. Thus, any solution to maternal health problems must consider the sociocultural and grassroots context. To this end, the needs and priorities of mothers should be central.

This study utilized Indigenous approaches to explore gaps in maternal health services in Ethiopia from the grassroots perspective. Indigenous approaches require participant-level engagement and acceptance of autonomy of the grassroots as research collaborators (Denzin & Lincoln, 2000; Smith, 2012). The study occurred in North Wollo Zone, Ethiopia. Gatekeepers were

used to identify potential research collaborators. Data were collected using in-depth, semi-structured individual interviews with 27 research collaborators. The interviews were conducted in Amharic, the native tongue. Visual dialogue was also used during the interview. Research collaborators were asked to express certain concepts through drawings or using natural settings as a metaphor or a symbol. Their representation was photographed and saved along with their interviews. Then, all interview data were de-identified and transcribed verbatim in Amharic. The transcribed data was then imported into computer-based qualitative analysis software, ATLAS.ti (Version 7.5.11), to manage, sort and code the data. This data was analyzed using, Miles, Huberman, and Saldana's (2013) interactive model. Circles were used for member checks. In a nutshell, this study explored the gaps in the implementation of Ethiopian maternal health policies and programs and identified culturally relevant solutions that could bridge these gaps and address the needs of communities based on the recommendations of research collaborators.

Biography

Aissetu Barry Ibrahima, Ph.D, is an Assistant Professor at Northeastern Illinois University, Social Work Department, Graduate Program. In addition, Dr. Aissetu is an interim director for the Center of Genocide and Human Rights Research in Africa and the Diaspora at NEIU. She also coordinates the African Studies Institute. Dr. Aissetu's research is focused on Indigenous knowledge and approaches, community-based grassroots development, international health policies, and maternal health behavior and practices. Dr. Aissetu is actively involved in different programs that engage African immigrants and refugee communities in the greater Chicago area. She is an Executive Board Member at the African Diaspora Sixth Region Association of Illinois. Aissetu earned her PhD at University of Illinois at Chicago (UIC), Masters in Social Work (MSW) and BA in Sociology and Social Administration at Addis Ababa University.



Empowering digital transformation: A human biomonitoring (HBM) global registry framework

Maryam Zare Jeddi

National Institute for Public Health and the Environment (RIVM), The Netherlands

Data generated by the rapidly evolving human biomonitoring (HBM) programmes are providing invaluable opportunities to support and advance regulatory risk assessment and management of chemicals in occupational and environmental health domains as well as supporting One Health policy needs. One Health is an umbrella concept that involves the evaluation and monitoring of the impact of environmental hazards on public health. However, heterogeneity across studies, in terms of design, terminology, biomarker nomenclature, and data formats, limits our capacity to compare and integrate data sets retrospectively (reuse). Registration of HBM studies is common for clinical trials; however, the study designs and resulting data collections cannot be traced easily. We are learning that it is not enough to deepen our knowledge of each individual scientific domain in ever increasing detail, we must also be able to bring these research topics together during public health and life sciences research! We argue that an HBM Global Registry Framework (HBM GRF) could be the solution to several of challenges hampering the (re)use of HBM (meta) data. The aim is to develop a global, host-independent HBM registry framework based on the use of harmonised open-access protocol templates from designing, undertaking of an HBM study, data generation

and collection to information dissemination for decision-making.

This framework should apply FAIR (Findable, Accessible, Interoperable and Reusable) principles as a core data management strategy to enable the (re)use of HBM (meta) data to its full potential through the data value chain. The HBM GRF would encompass internationally harmonised and agreed open access templates for HBM study protocols, structured web-based functionalities to deposit, find, and access harmonised protocols of HBM studies. Registration of HBM studies using the HBM GRF is anticipated to increase FAIRness of the resulting (meta)data. As a consequence, data wrangling activities to make data ready for analysis will be minimised. In addition, this framework would enable the HBM (inter)national community to trace new HBM studies already in the planning phase and their results once finalised. The HBM GRF could also serve as a platform enhancing communication between scientists, risk assessors, and risk managers/policy makers. Moreover, we believe that implementation of FAIR principles is a fundamental enabler for digital transformation within environmental health that support and acknowledge the shift from big data to smart data highlighting the importance of making full use of the potential of data, technology and digitalisation across the coming decade.

Biography

I am supporting science to policy strategies boosting transition towards a climate-neutral economy to enhance public health. As an scientific officer, my scientific research focuses on human health risk assessment and management of chemicals with a strong emphasis on integrating epidemiology and high-quality exposure information.



The deployment of k9 detection dogs in screening for COVID-19 virus SARS-COV-2

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The ancient-time use of dogs for hunting as well as their modern-time use for the tracking, detection of bodies from disaster struck areas, drugs and explosives mark witness to the success and efficacy of their sense of smell. The use of dog olfaction sense for the detection of disease is relatively new and included the dog's ability to detect malignant tumors, many non-infectious and infectious diseases, diabetes, epilepsy, bacteriuria, malaria and viral cell cultures. The Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV2) is a novel virus infecting human globally causing the Coronavirus disease 2019 (COVID-19). On 11 March 2020, World Health Organization declared COVID-19 as pandemic.

Initially, thermal scanners were introduced at the ports of entry to control the spread of the virus. Currently, quantitative reverse-transcription polymerase chain reaction (RT-qPCR) is being widely used. The benefit of widespread testing depends on the accuracy of the test, however, current available evidence suggests that the test has very high specificity, but the specificity is moderate (63%-78%). Moreover, high expense incurred on training of staff, equipment and reagents for continued and long-term mass screening is also problematic. Therefore, search for alternate options was due. Keeping in view the success of canine olfaction in detecting human disease with ample scientific evidence,



Fig. 1. A dog trainer is introducing the covid-19 smell to an explosive detection dog

we evaluated the use of trained explosives detection dogs for the screening of COVID-19 virus asymptomatic individuals visiting a COVID screening center in Abu Dhabi. We showed that the dogs were able to successfully screen out individuals who tested negative for

the SARS-CoV-2, from a cohort of more than 3000 individuals. Additionally, using Bayesian analysis, we demonstrated that the K9 test done on sweat swabs was superior to the RT-PCR test performed on nasal swabs from the same cohort.



Fig. 2. The K9 test is more sensitive than RT-PCR in screening for SARS-CoV-2 in asymptomatic individuals.

Biography

Name: Professor Mohammed Hag-Ali

Current Position: Academic Advisor to the HCT President and CEO

Past Position: Executive Dean, Faculty of Health Sciences, HCT

Education: George Washington University, PhD, Immunopathology of infectious disease and

Research Fellowship in Medicine at Harvard Medical School, USA in Immunology and Molecular biology.

Previous Positions:

- Health Sciences Advisor and Head of Academic Affairs, the Institute of Applied Technology and Fatima College of Health Sciences, UAE.
- Consultant, Preventive Medicine, Public Health and the Pathology and Laboratory Medicine Departments, Medical Services Corps and Zayed Military Hospital, UAE Armed Forces.
- Chair of the Genetics, Molecular Biology and Immunogenetics Division and Organ Transplantation Laboratory in King Fahad National Guard Hospital, Riyadh, Saudi Arabia.
- Director of the Medical Research Council, the Institute for Tropical Medicine Research and the NIH/ Michigan State University Laboratory for Infectious Disease Research.

Research Interests:

- Infectious disease diagnosis and prevention
- Non-communicable disease health promotion and prevention



Can CO₂ emissions and energy consumption determine the economic performance of South Korea? A time series analysis?

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^{4,5}Department of Business Management, Faculty of Economics and Administrative Sciences, Girne American University, Turkey

Following the United Nations Sustainable Development Goals (UN-SDGs), which place emphasis on relevant concerns that encompass access to energy (SDG-7) and sustainable development (SDG-8), this research intends to re-examine the relationship between urbanization, CO₂ emissions, gross capital formation, energy use, and economic growth in South Korea, which has not yet been assessed using recent econometric techniques, based on data covering the period between 1965 and 2019. The present Study utilized the autoregressive distributed lag (ARDL), dynamic ordinary least square (DOLS), and fully modified ordinary least squares (FMOLS) methods, while the gradual shift and wavelet coherence techniques are utilized to determine the direction of the causality. The ARDL bounds test reveals a long-run linkage between the variables of interest. Empirical evidence shows that CO₂ emissions trigger

economic growth. Thus, based on increasing environmental awareness across the globe, it is necessary to change the energy mix in South Korea to renewables to enable the use of sustainable energy sources and establish an environmentally sustainable ecosystem.

Conclusion: The current study adds to the previously existing literature by assessing the linkage between economic growth, CO₂ emissions, energy usage, urbanization, and gross capital formation in South Korea using yearly data stretching between 1965 and 2019. To accomplish the stated objectives, the ARDL bounds test, the gradual shift causality test, and the novel wavelet coherence test are utilized. Furthermore, the outcomes of the ARDL long-run and short run estimations show that energy usage, urbanization and CO₂ emissions enhance the economic performance of South Korea, while gross capital formation

exerts an insignificant impact on the economic performance of South Korea. Furthermore, the wavelet coherence test outcomes provide further support for the ARDL, FMOSL, and DOLS tests. The gradual shift causality test

outcomes provide intuition and credibility to the linkage among economic growth and urbanization, energy usage, gross capital formation, and CO₂ emissions.

Biography

Gbenga Daniel Akinsola was born in the 1980s. He received a BSc in Computer Engineering in 2012 from European University of Lefke in Northern Cyprus. He also received his MBA in Business Administration from Cyprus Science University in 2018, and also MSc in Management Information system from Cyprus International University in 2020. He is currently writing his thesis for his PHD degree in Business management at Grine American University.



Making safety training stickier: A richer model of safety training engagement and transfer

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²Haskayne School of Business, University of Calgary, Canada

³QUT Business School, Queensland University of Technology, Australia

⁴Serco Asia Pacific, Australia

Aim: Compared to other types of occupational training, safety training suffers from several unique challenges that potentially impair the engagement of learners and their subsequent application or “transfer” of knowledge and skills upon returning to the job. However, existing research on safety training tends to focus on specific factors in isolation, such as design features and social support. The aim of this research is to develop an overarching theoretical framework that integrates factors contributing to training engagement and transfer.

Method: We conducted a comprehensive qualitative review of safety training research that was published between 2010 and 2020). We searched Web of Science, Scopus, and Google Scholar, yielding 147 articles, and 38 were included. We content analyzed article summaries to arrive at core themes and combined them with contemporary models of general occupational training to develop a rich model of safety training engagement and transfer.

Results: Organizations should prioritize pre-

training readiness modules to address existing attitudes and beliefs, optimize the safety training transfer climate, and critically reflect on their strategy to design and deliver safety training so that engagement is maximized.

Conclusions: There are practical factors that organizations can use before training (e.g., tailoring training to employees’ characteristics), during training (e.g., ensuring trainer credibility and use of adult learning principles), and after training (e.g., integrating learned concepts into systems).

Practical Applications: For safety training to ‘stick’, workers should be affectively, cognitively, and behaviorally engaged in the learning, which will result in new knowledge and skills, improvements in attitudes, and new safety behaviors in the workplace. To enable engagement, practitioners must apply adult learning principles, make the training relevant, and tailor the training to the job and individual needs. After training, ensure concepts are embedded and aligned with existing systems and routines to promote transfer.



3rd GLOBAL Nursing Congress

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Biography

Dr Tristan Casey is an expert in safety leadership and organisational culture. With a career in workplace health and safety spanning 12 years, he has consulted nationally and internationally across a diverse range of industries such as law enforcement, local government, utilities (water and power, including renewables), offshore oil and gas, construction, and manufacturing (wood and metals). Dr Casey is an endorsed Organisational Psychologist with two doctoral degrees, including his PhD that involved development and validation of the LEAD model under the mentorship of Prof Mark Griffin. His passion is translating abstract/theoretical concepts into practical tools that have measurable impact. Dr Casey is skilled at forming collaborative and mutually beneficial partnerships between government, industry, and academia. He is also a highly regarded international speaker, having keynoted at more than 15 industry events and presented at over 100 conferences, workshops and forums.



Determining the effect of group flower arranging sessions on caregiver self-efficacy and stress levels in an in-patient hospice

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²Collage Of New Rochelle, USA

³York Collage, USA

⁴Family Care Center Calvary Hospital, USA

This study was designed to promote enhanced self-efficacy and decreased stress levels for family caregivers at a hospice care hospital, thus increasing their quality of life. This is achieved through group flower arranging sessions. Flowers evoke many responses including love, caring, and beauty. Human reactions to flowers involve smell, texture and color which provide an aesthetic attraction. Family and friends often become the informal caregivers to terminally ill spouses, siblings, and others. They support and supplant the role of professionals resulting in personal stress and compassion fatigue. The objectives are to 1) Enhance self-efficacy scores for family caregivers of Calvary patients. 2) Decrease stress levels for family caregivers of Calvary patients and 3) Disseminate results to other hospices. 71 caregivers were recruited to the study. Their

family members or friends became terminally ill and were receiving care in the Calvary Hospital. Results show the flower arranging sessions resulted in significant increased self-efficacy and decreased stress and associated problems for the caregiver participants. Implications and suggestions for future research are discussed. Family member feedback consistently supported that the program was relaxing, healing, comforting therapeutic, and educational. Family members reported that they loved to be able to bring the flowers back to their loved ones at times brightening the patients' moods and at other times simply brightening the room itself. This type of program allowed family members the opportunity to actively do something for their loved ones while simultaneously taking time for themselves to engage in a stress-reducing activity

Biography

Joanne Lavin retired as Associate Director of the CUNY SPS Nursing Programs June 2020. Currently she continues as an Adjunct Professor in the RN to BS program. Previously she was the Director of the Nursing Programs at York College CUNY. Dr. Lavin has been involved in research with 3D for health care students as well as a Test Coordinator for the National League for Nursing.



Obesity myths and facts

Jaqua E

Loma Linda University Health, Loma Linda, USA

The goal of this talk is to explain and clarify some misconceptions about obesity.

1. Obesity is a choice, not a disease:

Myth. Obesity is a chronic, relapsing, multifactorial, and neurobehavioral disease. An increase in body fat endorses abnormal fat mass physical forces and dysfunction, resulting in unfavorable metabolic, biomechanical, and psychosocial health consequences.^{1,2,3,4}

2. Obesity can be attributed to genetics:

Fact. In 2007 a genome-wide association study (GWAS) identified the Fat mass and obesity-associated gene (FTO), an established obesity-susceptibility locus located at chromosome 16 q12.2. Specific alleles of the FTO gene may be associated with adiposity.^{5,6,7}

3. Being overweight is never healthy:

Fact. For BMI ≥ 25 , each 5 kg/m² increased in BMI is associated with 30% higher mortality. It is also related to an increased risk of cancer,

diabetes mellitus type 2, hypertension, and thrombosis. To every 1 kilogram in weight gain, the risk of developing diabetes type 2 may increase by 9%.^{8,9} An alternative way to categorize obesity and diseases caused by obesity is between fat mass and sick Fat.

4. Obesity is not associated with sleep.

Myth: "Sleep is the 'most sedentary activity' yet may be the only sedentary one that protects from weight gain".^{10,11} World Health Organization (WHO) and Center for Disease Control and Prevention (CDC) recommend 7-8 hours of sleep a night.⁸

5. There is no relationship between breastfeeding as an infant and obesity.

Myth: Rates of obesity are significantly lower in breastfed infants. There would be a decrease of about 15-30% in obesity rates for teenagers and adults if any breastfeeding happened in infancy compared with no breastfeeding.¹²

Biography

Being in love with medicine her whole life, Ecler Ercole Jaqua began at only age 17 her medical school at The Lutheran University of Brazil. Fascinated with the comprehensive care of all ages, and the continuing care of the individual and family, she naturally embraced and pursued her focus in Family Medicine. After completing a Family Medicine Residency at Loma Linda University Health, as well as being chief resident during her last year of training, she decided to specialize in Geriatric Medicine at UCLA. Soon after completing her fellowship in LA, she returned to Loma Linda to pursue her passion for teaching residents, caring for her family and geriatric patients. Additionally, she had the opportunity to complete the Lifestyle Medicine Board and the Obesity Medicine Board certification while working as an Assistant Professor at Loma Linda University Family Medicine Residency.



Satisfaction with customizable 3D-printed finger orthoses compared to commercial finger orthoses

N. Irani and R. Ozelie

*Department of Occupational Therapy, Rush University Medical Center,
USA*

Introduction: Emerging research in rehabilitation/occupational therapy primarily supports 3D-printing as a low-cost, customizable option for prosthetics and adaptive equipment. However, more research is necessary to inform clinicians of its use for orthoses.

Purpose of the Study: (1) To develop a visually attractive 3D-printed anti-swan neck finger orthosis design that can be adjusted, customized, and manufactured quickly, easily, and cost-effectively (Figure 1), (2) To assess orthotic users' satisfaction with customizable 3D- printed finger orthoses compared to

commercial finger orthoses.

Methods: Forty persons without prior upper extremity conditions were recruited at an academic medical center in the United States. After wearing each orthosis for 8 hours (or as long as tolerated), participants completed post-satisfaction surveys to measure satisfaction with different aspects of both orthoses worn.

Results: Forty participants (21 females, 19 males, mean age = 24.98 years) were enrolled in the study. Satisfaction scores (N=40) were not statistically significant for 3D-printed orthoses compared to SilverRing™ Splints



Figure 1. (A) 12 color palette for customization, (B) Orthotic design via Autodesk Fusion 360, (C) Multicolored orthoses and Adventurer 3 3D-printer used.

across all domains except for Affordability, which was rated significantly higher for 3D-printed orthoses ($M = 10.00$, $SD = 0.000$) compared to SilverRing™ Splints ($M = 5.28$, $SD = 2.35$), $t(39) = 12.70$, $p < .001$. The mean difference in satisfaction scores was 4.72, with a 95% confidence interval ranging from 3.97 to 5.48 and large effect size ($r = .90$).

Conclusions: Findings provide novel evidence supporting the use of this customizable

3D-printed prototype as a cost-effective, alternative option ($\sim \$0.10$) to established commercial finger orthoses. This study has potential to assist clinicians' decision-making as they navigate best orthoses options for individuals with rheumatoid arthritis and swan neck deformities while considering orthotic wear compliance and client satisfaction.

Biography

Natasha Irani recently received her doctorate degree in Occupational Therapy (OTD) from Rush University Medical Center in Chicago, IL, USA. She has clinical experience working in hand therapy, physical disabilities, and mental health. Through her research interest in customizable 3D printed upper limb orthotics and background in business, psychology, and chronic health conditions, she aims to personalize client care to holistically improve clients' orthotic wear compliance, performance in meaningful life activities, and overall physical and mental wellbeing.



Effects of screenings in reducing colorectal cancer incidence and mortality differ by polygenic risk scores

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²Division of Oncology/Hematology, Department of Internal Medicine, Korea University Ansan Hospital, Korea University College of Medicine, Korea

Introduction: Colorectal cancer (CRC) screening reduces CRC incidence and mortality. However, it is unclear whether the reduction in CRC risk may differ by genetic susceptibility.

Methods: We evaluated this question in a cohort of 304,740 participants of European descent aged ≥ 50 years. Genetic susceptibility was measured using a polygenic risk score (PRS) constructed with risk variants identified in genome-wide association studies. Cox models were used to estimate hazard ratios (HRs) and 95% confidence intervals (CI) of CRC risk.

Results: Over a median follow-up of 7.0 years, 2,261 incident CRC cases and 528 CRC deaths were identified. CRC screening was associated with a significantly reduced CRC incidence among individuals with a high (HR, 0.80; 95% CI, 0.71-0.92) and intermediate PRS (0.84, 0.71-0.98) but not among those

with a low PRS (1.03, 0.86-1.25; Pinteraction, 0.005). A similar but more evident difference was observed for mortality (Pinteraction, 0.046), with more than 30% reduced mortality observed in the high PRS group (0.69, 0.52-0.91). Among the younger group (age 50-60 years), CRC screenings were associated with a slightly (but non-significantly) elevated incidence and mortality in the low PRS group but a reduced risk in the high PRS group (Pinteraction, 0.043 [incidence]; 0.092 [mortality]). No significant interaction was observed in the older group (age > 60 years).

Conclusion: Individuals with a higher genetic risk benefited more substantially from CRC screenings than those with a lower risk. Our findings suggest that PRS may be used to develop personalized CRC screening to maximize its effect on CRC prevention.

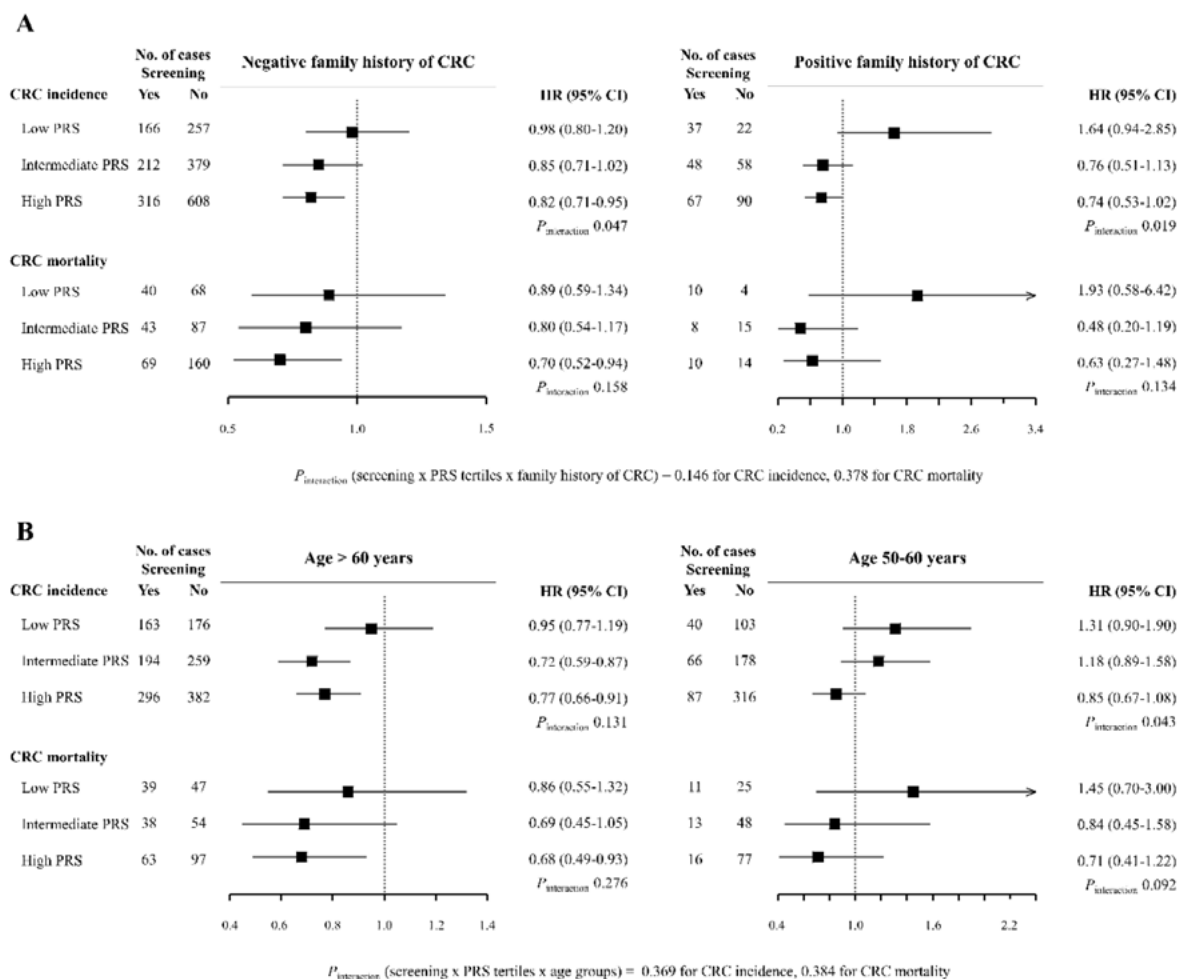


Figure 1. Hazard ratios for the associations of colorectal cancer incidence and mortality with screenings, according to polygenic risk score group and (A) family history of colorectal cancer and (B) age group.

Biography

Dr. Jungyeon Choi (MD, PhD: Korea University) is currently working as a clinical assistant professor at Korea University Hospital. Her doctoral thesis investigated the genomic profiles of colorectal cancer. From 2019-2021, she joined Dr. Wei Zheng's laboratory as a postdoctoral fellow at the Vanderbilt University Medical Center, where her research encompassed big data, bioinformatics, cancer genetics/genomics, and cancer epidemiology. Her research interests include the use of bioinformatics to understand the epidemiology and etiology of cancer, with a focus on the role of genetics and genomics to identify prognostic and predictive biomarkers. A medical oncologist, Dr. Choi also has clinical experience in treating patients with various types of cancer (especially colorectal, stomach, esophageal, hepatobiliary, and pancreatic cancers). She is eager to bridge the gap between genome research and clinical practice.



Sentinel lymph node does not prevent lymphedema

A. Pissas, M.H. Girault and F. Gallon

Hospital Center of Bagnols sur Ceze, France

It is admitted that secondary lymphedema is explained by axillar lymphadenectomy. This idea represents for many authors a justification of sentinel lymph node to prevent lymphedema. But many patients who underwent this technic develop secondary lymphedema. The destruction of vicariant ways

or the constitution of lymphocela are of prime importance in the constitution of lymphedema. Our experience is based upon the study of lymphatic vessels on corpses or fetuses since 1985 and on the treatment of 3150 patients with lymphedema.

Biography

- MD, Phd, Surgeon, Visceral and Oncologic Surgery
- Chief of department of digestive surgery Hospital center of Bagnols sur Cèze
- Associated professor of anatomy Faculty of medicine of Montpellier
- Thesis of medicine and thesis of science on lymphatic system
- Chief of unite of treatment of edema
- Scientific activity 220 publications: 62 anatomy, 98 lymphology, 60 surgery
- Founder secretary of European society of lymphology 1979
- President of European Society of lymphology 1987 - 2001
- President of ISL international society of lymphology 2001-2003
- Treasurer ISL till 2005, Member of Executive Committee or Nominating Committee of ISL
- Civic activity: Major till 2001, President of region GARD; President of nuclear committee of information, President of fire-men of GARD

POSTER



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Assessment of the rationality of gender studies from the perspective of Bocheński's concept of philosophical superstition

Zdzislaw Kieliszek

University of Warmia and Mazury in Olsztyn, Poland

In recent years, the issue of the determinants of human gender identity has been lively discussed. In such discussions, there are numerous supporters of the belief that a person's gender identity does not depend directly on a given individual's biological endowment with sex, but is the result of various socio-cultural circumstances in which a given person lives. This view began to gain popularity in the scientific community in the late 1960s and early 1970s. It is now considered paradigmatic in the rapidly evolving interdisciplinary study of cultural gender development, which is commonly referred to as gender studies. Representatives of gender studies often present the findings obtained in the course of their research as brilliant and modern. However, when viewed through the concept of philosophical superstition, authored by the Polish logician Józef Maria Bocheński (1902–1995), it can be concluded that the proponents of gender studies significantly exaggerate the intellectual momentum of their conclusions and postulates. Furthermore, one can even say that according to Bocheński's concept of philosophical superstition,

gender studies is a discipline which only creates a semblance of rationality (truth). This is because gender studies fail all six criteria which, as Bocheński maintains, distinguish beliefs, views, and theories which are manifestly irrational from those which are not philosophical superstitions. The article consists of three parts. In the first part, Bocheński's concept of philosophical superstition is discussed and, in particular, the criteria are outlined which, in Bocheński's opinion, allow one to identify philosophically superstitious thinking. This section also provides examples of philosophically superstitious beliefs, views and theories that fall under each of the criteria. In the second part, gender studies are characterized in terms of the basic assumptions adopted within this trend, as well as its theses and postulates. The third part of the article is devoted to the assessment of gender studies with the use of criteria which, according to Bocheński, make it possible to distinguish theories, beliefs and views without the hallmarks of rationality from those that are not philosophically superstitious.

Biography

Zdzislaw Kieliszek - was born on November 11, 1973 in Kętrzyn and is a Catholic priest. He was ordained a priest in 1999 in Olsztyn. In the years 1993-1999 he studied at the Higher Theological Seminary of the Warmia Metropolis "Hosianum" in Olsztyn, obtaining a master's degree in theology. In the years 2001-2009 he studied at the John Paul II Catholic University of Lublin, obtaining a doctorate in humanities in the field of philosophy, on the basis of the dissertation entitled "Anthropology and nationalism in the thought of Johann Gottlieb Fichte". He is the author of one monograph and several dozen scientific articles, and since 2011 the editor-in-chief of the scientific journal "Studia Warmińskie". He has been a member of the Kant-Gesellschaft since 2019. The subject of his interests are: political and social thought, philosophy of man and the history of philosophy - in particular in relation to the achievements of Immanuel Kant. In the years 2012-2016 he was the vice-dean for student affairs at the Faculty of Theology of the UWM in Olsztyn. Currently, he is an assistant professor at the Department of Philosophy and Canon Law, and since 2016, he is also vice-dean for education and students at the Faculty of Theology at UWM in Olsztyn.



Reproductive medicine: Advanced sperm separation

L. Barad and R. Barad

Technion – Israel Institute of Technology, Israel

Introduction: Infertility has been recognized as a public health issue worldwide by the World Health Organization (WHO). Intrauterine insemination (IUI) is the first therapeutic step in assisted reproductive techniques and is especially appropriate for cases with mild male factor infertility. Among the assisted reproductive techniques, IUI is considered a first-line procedure due to its simplicity, easy management, low cost, and absence of potentially serious complications.

As part of the IUI process, a sperm sample is required. The male partner provides a sperm sample, which then processed by the laboratory. Sperm separation procedure is used for separation of motile sperm cells from debris and non-motile sperm cells from the semen sample. The sperm preparation process is used in various assisted reproductive procedures such as IVF (in vitro fertilization), IUI and intra-cervical insemination (ICI).

The problem: Sperm preparation must be right after ejaculation (max 1 hr)

Sperm preparation requires certified lab and qualified technician. Far from patient's home 3 different stations (ejaculation place, lab, doctor)

These causes: Inaccessibility, Inconvenience, Embarrassment, Anxiety

The solution: To overcome the unmet need for a simple convenient and accessible way for sperm preparation, prior to fertility treatments, we have developed the ASPS (Automated Sperm Preparation System) device. The ASPS is an automated and controlled device for sperm preparation, that could be available at the doctor's clinic, or even at local laboratories, near the patients' home. With the ASPS, no training is required, the sperm preparation procedure is fully automated and controlled, simple to operate, and results in a high quality pure and clean sperm, ready for use for fertility treatments. ASPS facilitates the preparation and separation of the best performing elite sperm.



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A large indoor event space with a high ceiling and complex lighting rig. A large, illuminated pyramid structure is the centerpiece, surrounded by a crowd of people. The scene is bathed in green light.

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