



Scholars International Conference on

Gynecology, Obstetrics & Women's Health

14-15 November 2022
TIME Asma Hotel, Dubai, UAE



Hosted By:

Elena John | Program Manager
Gynecology Conference 2022
Scholars Conferences
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Scholars Conferences is currently bringing International Conferences, Meetings, Workshops, Symposia and Webinars with a main theme of "Accelerating the Cutting-Edge Scientific Research into Success by Bringing People Together". We have a stable and growing client base that ranges from small and medium-sized organizations worldwide. Our production and management teams are located in the US, UK, Japan and India access to deep pools of subject matter experts.

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Scholars International Organizes International Conferences in Asia Pacific, Europe, Middle East, Canada and USA in the fields of Medical, Clinical, Life Sciences, Pharmaceutical Sciences, Healthcare and Engineering which covers all the subjects like Medical, Clinical, Nursing, Oncology, Neuroscience, Pediatrics, Microbiology, Chemistry, Environmental Sciences, Materials Sciences, Nanotechnology etc., We aim at bringing together world-renowned scientists, researchers, specialists, practitioners along with senior executives, industry experts, societies & associations members to share and exchange the advancements, approaches, and challenges in their expertise. Our conferences include Workshops, Symposiums, Special Sessions, Panel Discussions, B2B Meetings and Exhibitions.

We welcome all the interested members to participate at our conferences as Keynote Speakers, Plenary Speakers, Poster Presentations, Delegates, Sponsors and Exhibitors.

WHO WE ARE

We focus on bringing a much-needed level of efficiency and quality standards in the way we service our clients, thus building lasting partnerships-based quality, innovation, and commitment to abide by our deeply rooted core values.

WHAT WE DO

- Professional Scientific Event Organizing
- Event Management and Planning Services
- Conference Management Services
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- Website Development and Management
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- Publication Services



OUR VISION

We are a truly professional group of individuals, striving hard to maintain and improve the quality of execution of our services. Our people constituting our team are our key assets.

Our fleet consists of young, dynamic, and quality conscious scientific professionals. A Promising Future In Store For You. Our motive is to create a chain of distinguished scholars, young researchers and industry experts to collaborate and harness the benefit of the scholars networking through our strong chain of academicians and market experts, we always strive to bring advancements to our scientific events.



OUR MISSION

As a Medical and Scientific Conference Organizer, Scholars Conferences oversees every detail of the conference program, from conference title selection, gathering speakers, participants and venue finalization to post-activity assessment and attendance certificates. We believe that a successful conference program requires focus, creativity, clear communication, and attention to detail. Our medical and scientific conferences are designed to meet the various needs of medical practitioners and clinicians, scientific researchers and developers, and industry partners.

Scientific Program

Day 1 | November 14, 2022 | Shaikha 2

JOIN ZOOM MEETING

[https://us06web.zoom.us/meeting/register/tZYqcu6trj0iGNHA7iGTQcFSjoHCSovK59_W](https://us06web.zoom.us/join/https://us06web.zoom.us/meeting/register/tZYqcu6trj0iGNHA7iGTQcFSjoHCSovK59_W)

MEETING ID: 827 5750 6825

PASSCODE: 891234

08:30-09:15 Registrations

09:15-09:30 Opening Ceremony

Keynote Forum

09:30-10:05 Title: Kinetics of DNA damage repair response associated with initial virus DNA integration into hepatocyte genome in model hepatitis B virus (HBV) infection

Thomas Michalak, Memorial University, Canada

10:05-10:40 Title: Fermentative Glycolysis controls cancers, pathogens growth and immunity - Genetic deconstruction

Jacques Pouyssegur, University Cote d'AZUR-CNRS-Inserm (IRCAN) and Centre A. Lacassagne, France

10:40-11:15 Title: Cancer epigenomics and epitranscriptomics: From knowledge to applications

Manel Esteller, Josep Carreras Leukaemia Research Institute, Spain

Group Photo

Networking and Refreshments Break: 11:15-11:35 @ Foyer

11:35-12:10 Title: « Simplified » technique of trans-abdominal cerclage(TAC) by laparoscopy: A 44 cases serie

Antoine Watrelot, Hospital Natecia, France

Speaker Session

Session Introduction

12:10-12:35 Title: The Management of bone health in breast cancer patients on aromatase inhibitors

Sabahat Ahmed, St George's University of London, United Kingdom

12:35-13:00 Title: Embracing lean and agile healthcare to mitigate threat rigidity and enhance patient care

Julie Morgan, ARGC International, United Kingdom

Lunch Break: 13:00-13:40 @ Zaytuna Restaurant

13:40-14:05 Title: Australian Medical System – Entry for Junior Doctors & Consultants

Bharat (Sandeep) Gavankar, The Northern Hospital, Australia

14:05-14:30 Title: The Values of colposcopy in patients with the diagnosis of the HSIL

Maryam Kalatehjari, Esfahan University of Medical Science, Iran

14:30-14:55 Title: Craniorachischisis totalis: A case report and review of the literature

Hazal Kutlucan, Gaziantep Abdulkadir Yuksel State Hospital, Turkey

- 14:55-15:20 Title: Four-Patient case series and literature review for Progressive Transformation Of Germinal Centers (PTGC), single-center experience
Sray Aldeen Salman, Shiekh Khalifa Speciality Hospital, Oncology Center
- 15:20-15:45 Title: Utilization of a mixture cure rate model based on the generalized modified Weibull distribution for the analysis of leukemia patients
Mohamed Elamin Omer, University of Science and Technology, Sudan

Video Presentations

- 15:45-16:05 Title: A pyocolpos, pyometra and acute renal impairment in a young adolescent with an imperforate hymen, a rare case report
Yasmine El-Masry, Tanta University, Egypt
- 16:05-16:30 Title: Personalized and Precision Medicine (PPM) as The Unique Healthcare Model to Secure the National Health and Wellness: From Family Planning and Gestation Period through Human Biosafety
Sergey Suchkov, MGUPP, Russia

Networking and Refreshments Break: 16:30-16:50 @ Foyer

Poster Presentations

- SIP0101 Title: Re-Irradiation for Recurrent brain tumors: A Retrospective Study from a Tertiary Hospital in Saudi Arabia
Hafiz Asif Iqbal and Hane Muamenah, King Faisal Specialist Hospital and Research Centre, Qatar
- SIP0102 Title: The Emerging Role of E3 Ubiquitin Ligase SMURF2 in the Regulation of Transcriptional Co-Repressor KAP1 in Untransformed and Cancer Cells and Tissues
Sandy Boutros-Suleiman, BAR ILAN University, Israel
- SIP0103 Title: The Outcome of Radical Hysterectomy in Patients with Cervical Cancer in RSUP Prof. Dr. R. D. Kandou from January 2019 – December 2021
Jennifer Uriah, University of Sam Ratulangi Manado, Indonesia
- SIP0104 Title: The association between dietary intake and hypertension in pregnancy at Prof DR. R. D. Kandou Manado
Victor Moniaga, University of Sam Ratulangi Manado, Indonesia
- SIP0105 Title: Prevalence And Relation Between Premature Rupture Of Membranes With COVID-19 Infection In PROF. DR. R.D KANDOU, Manado Indonesia From January-December 2021
Shintya Habibie, Sam Ratulangi University, Indonesia

Panel Discussions

Day 01 Ends

Day 2 | November 15, 2022 | Virtual | GMT

JOIN ZOOM MEETING

[https://us06web.zoom.us/meeting/register/tZwtdu6trT0pE9Tpl5TsJX-FuXPdDdYtke6a](https://us06web.zoom.us/join/https://us06web.zoom.us/meeting/register/tZwtdu6trT0pE9Tpl5TsJX-FuXPdDdYtke6a)

MEETING ID: 880 1753 6390

PASSCODE: 893279

Keynote Forum

- 09:30-10:00 Title: Fetal Hemodynamics in IUGR Fetuses
Graziano Clerici, European Medical & Research Center, Italy
- 10:00-10:30 Title: Long-Term Benefits & Risks of Menopausal Hormone Therapy
Aboubakr Elnashar, Benha University, Egypt
- 10:30-11:00 Title: Endometrial abnormalities in perimenopause associated with HOMA IR
Aneta Sima, University Clinic of Obstetrics and Gynecology, Macedonia

Speaker Session

Session Chair: **Sima Baghbanian**, Mideast Polyclinic, United Kingdom

- 11:00-11:20 Title: Pregnancy After Infertility: Increasing Connections and a Brighter Future for Gynecologists and Obstetricians.
Natasha Hogan, Pregnancy After Infertility, Australia
- 11:20-11:40 Title: Women's Health
Sima Baghbanian, Mideast Polyclinic, United Kingdom

Refreshments Break @ 11:40-11:50

- 11:50-12:10 Title: Are we following the standard in shoulder dystocia management? A retrospective audit of shoulder dystocia for women delivering at Princess Alexandra Hospital
Amira Hassan, NHS, United Kingdom
- 12:10-12:30 Title: Screening for cytomegalovirus infection in pregnant women and their fetuses
Wioletta Wujcicka, Polish Mother's Memorial Hospital - Research Institute, Poland
- 12:30-12:50 Title: Relevance of the use of dietary supplements in male and female infertility
Wassym Senhaji Rhazi, Nurilia/IRIFIV, Morocco
- 12:50-13:10 Title: Are Novel Methods of Cancer Cervix Screening Prudential? A Narrative literature review
Sufia Athar, Hamad Medical Corporation, Qatar

Break @ 13:10-13:25

Keynote Forum

- 13:25-13:55 Title: Does NACT reduce the overall burden in advanced Epithelial Ovarian Cancer, despite of increasing CRS rate?
Mukurdipi Ray, AIIMS, India
- 13:55-14:25 Title: Occurrence of Hypopituitarism in Tunisian Turner Syndrome patients: Familial versus Sporadic cases.
Mouna Mnif, Hedi Chaker Hospital, Tunisia

Speaker Session

Session Chair: **Sima Baghbanian**, Mideast Polyclinic, United Kingdom

14:25-14:45 Title: Pregnancy Outcomes of Wives of Chemical and Non-Chemical Weapons Exposed Veterans in Ahvaz, Iran: A Retrospective Cohort Study

Leila Karimi, Baqiyatallah University of Medical Sciences, Iran

14:45-15:05 Title: A Brief Overview on Environmental Factors in Relation to Infertility

Ajay Jain, India

15:05-15:25 Title: IVF in the era of personalized medicine

Spyridon Chouliaras, Sidra Medicine, Qatar

15:25-15:45 Title: Physical Activity Milestone Improvement Opportunities Vision 2030

Lujain Osabi, Health Sector Transformation Program 2030, KSA

Break @ 15:45-15:55

15:55-16:15 Title: Meatal - sparing dorsal onlay vaginal graft urethroplasty for female urethral strictures
Gunjan Bahuguna, Grant Medical College and Sir J.J. Group of Hospitals Mumbai, India

16:15-16:35 Title: Maternal risk factors for low birthweight and macrosomia: A cross-sectional study in Northern Region, Ghana

Silas Adjei-Gyamfi, Ghana Health Service, Ghana

16:35-17:05 Title: An economic evaluation of vaginoscopy versus traditional hysteroscopy for uterine examination

Siddhant Patki, Arunima Basu and **Morohunfoluwa**, Bajomo Imperial College London, United Kingdom

E-Poster

SIP0106 Title: Impact of the COVID-19 Pandemic on Contraceptive Access in the US

Simone Crespi, Organon, United States

Panel Discussions & Closing Ceremony



Scholars World Congress on
Nursing and Advanced Healthcare

Nursing World 2023 | 3rd Edition

21-22 Jun 2023 | Paris, France

THEME: "Frontiers in Nursing Research and Advanced Healthcare"

<https://nursingworldcongress.com/>

WELCOME MESSAGE:

On behalf of the Organizing Committee we invites all the Key Professional in field of Nursing and Healthcare to **"3rd Edition Scholars World Congress on Nursing and Advanced Healthcare"** which will be held **during 21-22 June 2023 at Paris, France**. Main theme of the conference is **"Frontiers in Nursing Research and Advanced Healthcare"**.

Nursing World 2023 aims to foster and conduct collaborative interdisciplinary research in state-of-the-art methodologies and technologies within Nursing & Advanced Healthcare. It provide invaluable opportunities to extend and strengthen the Nursing and Healthcare community, and our collective body of knowledge.

Program Objectives:

- Highlight programs of research with strong relevance to practice.
- Explore ways in which practice informs clinical nursing research.
- Describe examples of nursing research findings that have been meaningfully and successfully translated into practice.
- To provide opportunities to develop knowledge in nursing field
- To foster and enhance collaborations and partnerships with educational, research and clinical institutes.

Concept:

The purpose of the Nursing World 2023 Congress is to present and discuss the most recent innovations, trends, and concerns, practical challenges encountered and the solutions adopted in the field of Nursing and Healthcare. Unique networking opportunity across worldwide where the world's leading renewable CEOs, business heads, decision, and policy makers, choose to present their latest innovations.

Agenda:

The conference is a unique opportunity to present your latest research, hear to valuable intelligence and information. This is place where world leaders come to talk and listen. The panel sessions will include senior nurse researchers and a response panel of advanced practice nurses and nurse clinicians.

Networking:

Unique networking opportunity across worldwide where the world's leading renewable CEOs, business heads, decision, and policy makers, choose to present their latest innovations.

For more information and enquiries
contact undersigned:

Elena John

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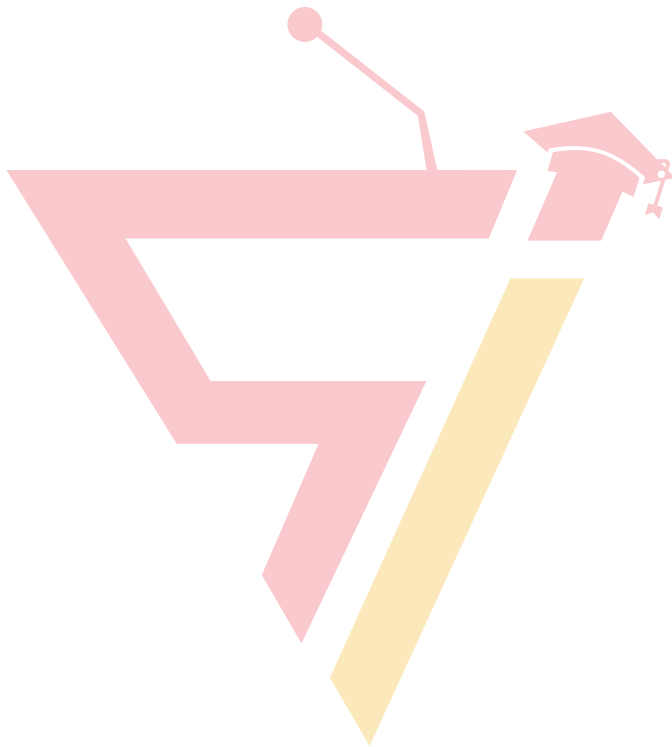
21 Clifton Road, Newcastle Upon Tyne, England | United Kingdom, NE4 6XH

Scholars International Conference on

GYNECOLOGY, OBSTETRICS & WOMEN'S HEALTH

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**KEYNOTE
SPEAKERS
Day 1**





Thomas I Michalak
Memorial University, Canada

Biography

Thomas I. Michalak is an Honorary and University Research Professor at Faculty of Medicine, Memorial University, St. John's, NL Canada. He is former Senior (Tier 1) Canada Research Chair in Viral Hepatitis/Immunology and Professor of Molecular Virology and Medicine (Hepatology). He served as the coordinator of Graduate Programme in Immunology and Infectious Diseases at Memorial University. Professor Michalak is an internationally recognized expert in molecular and immunological mechanisms of viral persistence, virus-induced cellular injury and carcinogenesis, and in animal and in vitro models of hepatitis viral infections. He graduated medicine at the Warsaw Medical University and received PhD in immunopathology in 1976. He became the Senior Research Fellow at the Institute of Liver Studies, King's College of London, UK and the Visiting Investigator in Molecular and Experimental Medicine at the Scripps Research Institute, La Jolla, CA, USA. He is elected fellow of the Canadian Academy of Health Sciences and the American Association for the Study of Liver Diseases, recipient of the Queen Elizabeth II Diamond Jubilee Medal for contributions to the fight against liver diseases and received the Gold Medal from the Canadian Association for Study of the Liver and the Canadian Liver Foundation for achievements in re-

search and science in hepatology. He severed on several research granting agencies in Canada, USA and other countries, editorial boards, and as a reviewer of numerous scientific papers.

Kinetics of DNA damage repair response associated with initial virus DNA integration into hepatocyte genome in model hepatitis B virus (HBV) infection

Hepatitis B virus (HBV) is a highly oncogenic DNA virus which integration to human hepatocyte genome drives development of hepatocellular carcinoma (HCC). Mechanism of initial HBV DNA integration remained essentially unknown. Hepatocytes susceptible to HBV-closely related woodchuck hepatitis virus (WHV) were examined from 15 min to 72 h post-infection (p.i.). Virus-host genomic junctions were detected by inverse-PCR and clonal sequencing of amplicons. First WHV-host fusions occurred within 15 min p.i. All were of head-to-tail type implying formation by non-homologous end joining (NHEJ). Reactive oxygen species (ROS) and inducible nitric oxide (iNOS) were used to measure virus-induced oxidative stress, while comet assay cellular DNA damage. DNA repair-related and heme oxygenase-1 (HO1) genes were quantified by real-time PCR. Activities of NAD⁺ and poly(ADP-ribose) polymerase 1 (PARP1) cleavage were evaluated. The results showed that WHV upregulated ROS and transiently iNOS immediately after exposure to virus. Expression of PARP1 and XRCC1, the binding partner of PARP1, were induced in 30 min p.i. PARP1 expression culminated at 1 h and XRCC1 at 12 h p.i. together with 8-oxyguanine DNA glycosylase (OGG1). NAD⁺, a marker of PARP1 activation, and HO1, an indicator of cell pro-oxidative stress response, were significantly upregulated from 15 or 30 min p.i. Kinetics of PARP1 cleavage implied inactivation of PARP1 from 30 min p.i. onward. Conclusions: The study showed that initial WHV integration into hepatocellular genome was result of virus-induced oxidative DNA damage and suggested that repair of this damage by NHEJ PARP1-dependent pathway determined format of the first virus-host DNA fusions.



Jacques Pouyssegur

Centre A. Lacassagne, France

Biography

Jacques Pouyssegur is a CNRS Research Director Emeritus, graduated from an Engineering School in Biochemistry of the University of Lyon, where he obtained his PhD in 1972. He spent two years as a post-doctoral scientist at the National Cancer Institute of NIH (USA) and established his own research group in 1978 at the CNRS Biochemistry Centre of the University of Nice.

Jacques Pouyssegur has previous experience in bacterial and somatic cell genetics, metabolism, Na-H exchanger, pH regulation, G protein-coupled receptors and MAP kinase signalling in the context of growth control in mammalian cells. In the last 25 years his group developed a strong interest in hypoxia signalling, oxygen and nutrient sensing, angiogenesis, autophagy, amino-acid transporters, oxidative stress, cancer metabolism, Warburg effect and immune-suppression. He is member of AACR, EMBO, the French and European Academy of Sciences and the past President of the International Advisory board of the National Cancer Institute.

Fermentative Glycolysis controls cancers, pathogens growth and immunity - Genetic deconstruction

The evolution of life from extreme hypoxic environments to an oxygen-rich atmosphere has progressively selected for successful metabolic, enzymatic and bioenergetic networks through which a myriad of organisms survives. First we will discuss how fermentative glycolysis, an ancient evolved metabolic pathway, is exploited by rapidly growing tissues, tumours, immune cells, but also viruses and bacteria during infection. The 'Warburg effect' activated via Myc and HIF-1 in response to growth factors and hypoxia is an essential metabolic and energetic pathway which satisfies nutritional and energetic demands required for rapid genome replication. Second, we will present the key role of lactic acid, the end-product of fermentative glycolysis able to move across cell membranes in both directions via monocarboxylate transporting proteins (i.e., MCT1/4) contributing to cell-pH homeostasis but also to the complex immune response via acidosis of the tumour microenvironment. Importantly lactate is recycled in multiple organs as a major metabolic precursor of gluconeogenesis and energy source protecting cells and animals from harsh nutritional or oxygen restrictions. Third, we revisit the Warburg effect via CRISPR-Cas9 disruption of glucose-6-phosphate isomerase (GPI-KO) or lactate dehydrogenases (LDHA/B-DKO) in two aggressive tumors (melanoma B16-F10, human adenocarcinoma LS174T). Full suppression of lactic acid production reduces but does not suppress tumour growth due to reactivation of OXPHOS. In contrast, disruption of the lactic acid transporters MCT1/4 suppressed glycolysis, mTORC1, and tumour growth as a result of intracellular acidosis. Finally, we will briefly discuss the current clinical developments of an MCT1 specific drug AZ3965, and the recent progress for a specific in vivo MCT4 inhibitor, two drugs of very high potential for future cancer clinical applications.



Manel Esteller

Josep Carreras Leukaemia Research Institute, Spain

Biography

Manel Esteller is an M.D., Ph.D from the Universitat de Barcelona. He was a researcher at Johns Hopkins where his work was decisive in establishing promoter hypermethylation of tumor suppressor genes. Dr. Esteller was the Leader of the CNIO Cancer Epigenetics Laboratory and the Director of the Cancer Epigenetics and Biology Program (PEBC) in Barcelona. He is the Director of the Josep Carreras Leukaemia Research Institute (IJC), Chairman of Genetics in the University of Barcelona and ICREA Research Professor. His research is devoted to the establishment of the cancer epigenome. He is a highly cited researcher and has received prestigious recognitions.

Cancer Epigenomics and Epitranscriptomics: From Knowledge to Applications

For the last twenty-five years an increasing amount of evidence has shown the relevance of epigenetics in cell biology and tissue physiology, being DNA meth-

ylation aberrations in cancer the flag-ship for the recognition of its disturbance in human diseases. From the candidate gene approaches, new powerful technologies such as comprehensive DNA methylation microarrays and whole genome bisulfite sequencing has recently emerged that have reinforced the notion of epigenetic disruption in the crossroad of many sickness. From the poster-boy cases of MGMT and GSTP1 hypermethylation in the prediction of alkylating drug response and prostate cancer detection, respectively, to the personalized treatment of leukemia with small molecules targeted to fusion proteins involving histone modifiers, the field has walked a long path. The current talk will focus in the epigenetic profiling, basically at the level of DNA methylation and histone modifications that is starting to provide clinical value in the diagnosis, prognosis and prediction of response to drug therapies. For cancer, we have already a wide view of the undergoing DNA methylation events that expand beyond classical promoter CpG islands of tumor suppressor genes and we have a growing list of mutated chromatin remodeler genes that contributes to the tumorigenesis process. It is time to apply this knowledge in practical clinical situations like the diagnosis of cancers of unknown primary, the screening of malignancies in high-risk populations or a biomarker selection of the patients that should receive treatment with anticancer drugs. Beyond our comfort zone, we should be aware that chemical modifications not only affect the DNA molecule, but also RNA. The epigenetics of RNA or the analysis of the epitranscriptome represents another relevant step to understand the complex relationship between genotypes and phenotypes in human tumors.



Antoine Watrelot

Hopital Natecia, France

Biography

Antoine Watrelot currently works at Hospital-Natecia(Lyon). He is honorary Consultant of St Bartholomew and Royal London Hospital (London-UK). He has extensively published in the field of Reproductive Surgery. His current practice involves Reproductive and Endoscopic surgery. He has described the technique of Fertiloscopy (1997). He is member of numerous international scientific societies, and he is past Chairman of the MSRM (Mediterranean Society for Reproductive Medicine)(2009-2011) and past President of ISFT-RS (International Society on fallopian Tube and Reproductive Surgery)(2010), he has been appointed coordinator of the SIG "Reproductive surgery" at ESHRE. And coordinator of the SIG "safety and medicolegal aspects" at ESGE. He is full member of the Academie Nationale de Chirurgie -France (2016). He has been awarded the title of Chevalier de la Légion d'Honneur by the French Republic President(2016). He is vice president of ENDAURA (ENDometriose Rhone Alpes Auvergne)network(2019).

« Simplified » technique of trans-abdominal cerclage(TAC) by laparoscopy: a 44 cases serie

Objective: It is usually admitted that Benson cerclage may be proposed in patients with repeated history of late miscarriages. The use of laparoscopy in a simplified technique associated with the good results of this approach allow us to propose this technique for prevention of late miscarriage to patients having had only one late miscarriage. This paper describes the simplified laparoscopic technique which doesn't require lateral dissection of the uterine isthmus leading to a very atraumatic and not hemorrhagic approach.

Method of procedure: We performed a laparoscopic approach using a percutaneous needle (Endoclose™) allowing to easily do TAC. A mesh was knotted anteriorly and the procedure was performed prior to pregnancy in 41 patients and during the first trimester of pregnancy in 3 patients. So in all 44 patients underwent a TAC after having had at least 2 late miscarriages. We had 1 failure at 18 weeks of pregnancy after a cerclage performed during a twin pregnancy. Fortunately we repeat the procedure 6 months after and the patient delivered a normal baby.

Out of 44 cases, 40 patients became pregnant and have delivery (by caesarian section)at no less than 36 weeks of gestation.

Conclusion: This series demonstrates that laparoscopic Benson cerclage is an effective way to prevent late miscarriage and may be proposed more widely than before. Indeed information is critical since a C section is then required, but it appears that patients having had the distressful history of late miscarriage are usually very keen to have a procedure which may prevent recurrence of such drama.



Sergey Suchkov
MGUPP, Russia

Biography

Sergey Suchkov was born in the City of Astrakhan, Russia, in a family of dynasty medical doctors. In 1980, graduated from Astrakhan State Med University and was awarded with MD. In 1985, maintained his PhD as a PhD student of the I.M. Sechenov Moscow Medical Academy and Inst of Med Enzymology. In 2001, maintained his Doctor Degree at the Nat Inst of Immunology, Russia.

From 1989 through 1995, was being a Head of the Lab of Clin Immunology, Helmholtz Eye Research Inst in Moscow. From 1995 through 2004 - a Chair of the Dept for Clin Immunology, Moscow Clinical Research Institute (MONIKI). In 1993-1996, was a Secretary-in-Chief of the Edit Board, Biomedical Science, an int journal published jointly by the USSR Academy of Sciences and the Royal Society of Chemistry, UK.

Personalized and Precision Medicine (PPM) as The Unique Healthcare Model to Secure the National Health and Wellness: from Family Planning and Gestation Period through Human Biosafety

A new systems approach to diseased states and wellness result in a new branch in the healthcare services, namely, personalized & precision medicine (PPM). To

achieve the implementation of PPM concept, it is necessary to create a fundamentally new strategy based upon the subclinical and predictive recognition of biopredictors of hidden abnormalities long before the disease clinically manifests itself.

Each decision-maker values the impact of their decision to use PPM on their own budget and well-being, which may not necessarily be optimal for society as a whole. It would be extremely useful to integrate data harvesting from different databanks for applications such as prediction and personalization of further treatment to thus provide more tailored measures for the patients resulting in improved patient outcomes, reduced adverse events, and more cost effective use of health care resources. A lack of medical guidelines has been identified by the majority of responders as the predominant barrier for adoption, indicating a need for the development of best practices and guidelines to support the implementation of PPM!

PPM as being the Grand Challenge to forecast, to predict and to prevent is rooted in a big and a new science generated by the achievements of systems biology and translational Medicine (TM). NIH, Bethesda, MD, USA whilst being a strategic center of International Medical Research and Practice has included PPMT into a List of The Greatest Priorities in XXI Century. Who is expected to be responsible for getting PPM Model armed? TM and its applications! to be focused on "bench to bedside and back" research!!!

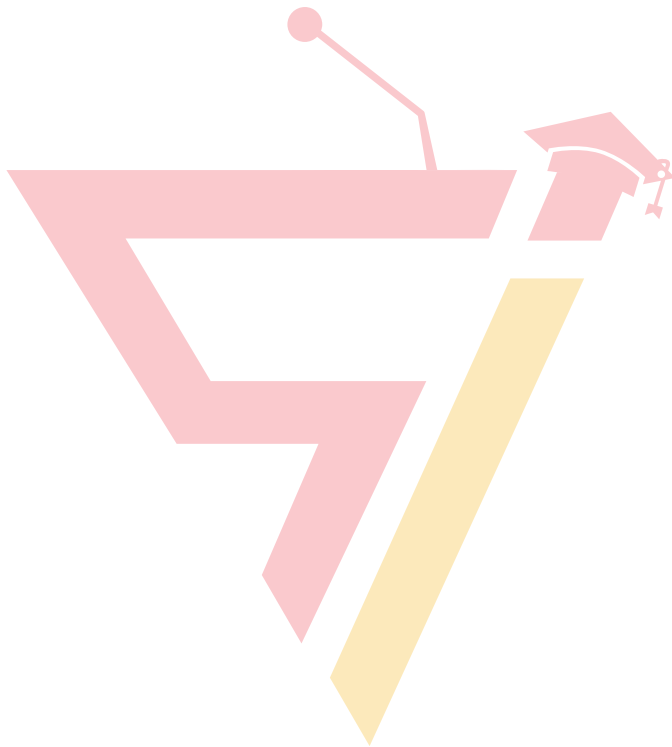
Implementation of PPM requires a lot before the current model "physician-patient" could be gradually displaced by a new model "medical advisor-healthy person-at-risk". This is the reason for developing global scientific, clinical, social, and educational projects in the area of PPM to elicit the content of the new branch.

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**SPEAKERS
Day 1**





Sabahat Ahmed

St George's University of London, UK

Biography

Sabahat Ahmed completed her MBBS at St George's University of London, and is currently completing her foundation training at the Royal Surrey County Hospital. She has a special interest in Medical Education and Quality Improvement, and hopes to specialize in Oncology or Rheumatology.

The Management of Bone Health in Breast Cancer Patients on Aromatase Inhibitors

Aromatase inhibitors form a key part of adjuvant endocrine treatment for post-menopausal women with hormone receptor positive breast cancer. They are

known to reduce the risk of disease recurrence, distant metastases and contralateral breast cancers. However, they are also known to cause an accelerated reduction in bone mineral density and increase fracture risk over time. Current guidelines suggest to identify at-risk patients with a baseline DEXA scan within 3-6 months of commencing treatment, and to treat appropriately according to results. In this audit, 59 breast cancer patients started on aromatase inhibitors in our trust, Royal Surrey County Hospital, were selected, and compliance to these guidelines was assessed. Results showed 66.1% of patients had their baseline DEXA scan within 3-6 months of commencing treatment, 16.95% had a delayed baseline DEXA scan after 6 months commencing treatment, and 16.95% did not have a baseline DEXA scan at all. Of those who had their DEXA scan, over half were found to have osteoporosis, and there was a large variation in treatment following receipt of results. Given these findings, we suggested strategies to improve knowledge and awareness of the guidelines available amongst clinicians - to do this, we presented these findings at a local trust educational meeting. Re-audit has shown improvement in the percentage of patients who have had a DEXA scan completed within good time. Following this, we further suggest standardisation of the location a patient's DEXA scan is carried out, and standardisation of the team that requests it.



Julie Morgan

ARGC International, UK

Biography

Julie Morgan MSc, RGN, APM (PFQ), is a consultant nurse and experienced assisted reproduction technology (ART) practitioner from the United Kingdom (UK). She has extensive experience of the Clinical, Operational, Human Resources of fertility clinics and is on the scientific and certification committees of the European Fertility Society (EFS), which monitors and advises clinics around the world regarding best practice.

She currently consults in research & development in IVF/Infertility technology and has recently created 'The IVF Program', which is a unique 3 step fertility program for patients undergoing IVF, Egg Freezing and Frozen Embryo Transfer. The program provides bespoke care for patients in the Middle East, allowing access to the UK's highest success rates, without leaving their own country. She is also the founder of 'All about Infertility', an online social media company

that provides evidence-based information for patients at all stages of their fertility journey.

Embracing lean and agile healthcare to mitigate threat rigidity and enhance patient care

Since 2020, the world has been impacted by significant global crises beyond our ability to predict or control: most predominately, the ongoing COVID-19 pandemic. Research shows that agile companies outperformed others in their ability to survive and thrive throughout this challenging period, by using a framework and working mind-set that helps respond to changing requirements.

The Assisted Reproduction and Gynaecology Centre (ARGC) has been the UK's most successful fertility clinic since 1995. In 2020, it began expanding their unique 'IVF Program' into the UAE. ARGC's bespoke three step approach for IVF, Egg Freezing and Frozen

Embryo Transfer is complimented by a 'Doctors' Club' that provides free, specialised infertility-based education resources and support to UAE doctors.

When COVID-19 struck, ARGC had to quickly adapt: it adopted a Kanban approach. This lean management method was applied through mapping out the patient journey and visualizing daily work flow. Using agile principles, ARGC also developed a medication algorithm and electronic folliculogram, thus enabling doctors to monitor patients worldwide from London, UK. Online scheduling and telemedicine boosted efficiency and improved patient experience. Regular virtual meetings and the creation of a cross-functional team built shared understanding and purpose. Free webinars provided continuing professional education.



Bharat (Sandeep) Gavankar
The Northern Hospital, Australia

Biography

Bharat [Sandeep] Laxman Gavankar completed his Undergraduate and post graduate education from Grant Medical College, Mumbai, India. And, he prac-

ticed in India [Vsai] for more than 20 years Migrated to Australia in 2011 and got Fellowship in Obstetrics and Gynaecology from The Royal Australia and New Zealand College of Obstetricians and Gynaecologists. He is a working as a consultant at The Northern Hospital, Epping, and Melbourne, AUSTRALIA. He trained more than 20 consultants from India to get into the Australian system and now all of them are working as consultants in Australia. He is also an examiner for DRANZCOG and FRANZCOG for the last 6 years.

Australian Medical System – Entry for Junior Doctors & Consultants

Australia is a country full of opportunities. Every professional or student in any field wants to explore possibilities to learn and earn in Australia. We have tried to cover ways and means to prepare and finally to land in Australia as a DOCTOR and have respectful life in this GOD GIFTED country.



Maryam Kalatehjari

Isfahan University of Medical Sciences, Iran

Biography

Maryam Kalatehjari has studied Obstetrics & Gynecology at Isfahan University of Medical Science, Iran. She is a dedicated medicine and researcher who always tries to link the scientific research and the practice in her work. As a result of her dedication to the research she was published some papers in scientific journals during her six years of work experience in obstetrics and gynecology. She really enjoys contributing to the scientific advances in the field.

The Values of Colposcopy in Patients with the Diagnosis of the HSIL

Background & Objective: Cervical cancer is one of the most preventable malignancies that can also be diagnosed in the early stages through screening tests. Papanicolaou test (Pap smear) is the most conventional

means for screening, while studies represent acceptable and more accurate outcomes of colposcopy in contrast to Pap smear. The current study aims to assess the values of colposcopy for cervical cancer diagnosis.

Materials & Methods: This is a cross-sectional study conducted on 94 patients diagnosed with high-grade squamous intraepithelial lesion (HSIL). After that, colposcopy was performed for all patients, and findings were presented as normal, chronic cervicitis, the thin acetowhite lesion (AWL), dense/thick AWL, AVP, pilling, and cauliflower-like mass. The biopsies were taken and pathological studies, as the gold standard was interpreted as normal, cervicitis, atypical squamous cells of undetermined significance (ASCUS), cervical intraepithelial neoplasia 1, 2 or 3 (CIN1, 2 or 3), carcinoma-in-situ (CIS), adenocarcinoma and invasive squamous cell carcinoma (SCC).

Results: The pap-smear results were significantly associated with the biopsy reports ($P < 0.001$; kappa = 0.225). Besides, significant concordance was found between colposcopy and biopsy ($P < 0.001$; kappa = 0.247). The total sensitivity and specificity of colposcopy were based on the biopsy findings as the gold standard was 97% and 41%, respectively ($P < 0.001$).

Conclusion: Colposcopy was significantly sensitive and specific for diagnosing both non-malignant CIN1 and malignant cervical lesions, but not for CIN2, 3, and CIS lesions.



Hazal Kutlucan

Gaziantep Abdulkadir Yuksel State Hospital, Turkey

Biography

Hazal Kutlucan is born in 1991 in Ankara, Turkey. She graduated from my secondary and high school as valedictorian in Ankara and then from Uludag University Medicine Faculty, Bursa, Turkey as honor degree student (2015). Following medicine faculty, she started obstetrics and gynecology residency in Gazi University Medicine Faculty and finished in 2021. She has worked as obstetrics and gynecology specialist in Gaziantep, Turkey since 2021. During her medicine faculty and residency, she visited several clinics and worked as an intern, observer doctor and guest doctor in USA, Montenegro, Italy, Germany, Poland and Belgium. She has worked on public health projects as volunteer medicine student in villages without health opportunities and her interests are on general women health including minimally invasive endoscopic surgeries, ultrasound in gynecology and obstetrics, fetal medicine and contraception. She made several researches, national and international presentations on intrapartum contraception, minimally invasive endoscopic surgeries, fetal medicine and ultrasonographic procedures including three-dimensional modalities.

Craniorachischistotalis: A case report and review of the literature

Instructions: Neural tube defects are heterogenous group of abnormalities in central nervous system with multifactorial origin, mostly caused by a failure of the neural tube closure mechanism. It can vary only spina bifida to severe craniorachischistotalis. Craniorachischistotalis is a variant of rachischistotalis which is a developmental neural tube birth defect. It is rare, lethal and refers to the presence of both anencephaly and spina bifida. The objective of the case report is to discuss a fetus with craniorachischistotalis and to review the literature.

Clinical Case: A 25 year old woman with four first trimester abortus history came with estimated gestational age of 26 weeks and had been diagnosed as anencephaly in the second trimester ultrasound. Termination of pregnancy had recommended but due to patient's request, the pregnancy reached to 26th weeks. She came with fully dilated cervix and active contractions. In this pregnancy, she did not use any folic acid supplement. The female fetus was born alive with 2/2 Apgar scores, had an open neural tube defect until sacrum and anencephaly. Neck was shortened and retroflexed. Eyes were normally bulged which is a result of absence of the frontal portion of cranial vault. Liver was palpable and abdomen looked like a ridge. Craniorachischistotalis was diagnosed as postnatally. Fetal heart beat was under 60 bpm and became exitus in 10 minutes.

Conclusions: The craniorachischistotalis is a rare, severe defect of the neural tube and a pathology incompatible with life. Folic acid deficiency is important risk factor and supplements should be advised.



Sray Aldeen Salman Wahib

Sheikh Khalifa Specialty Hospital, UAE

Biography

Salman Wahib Sray Aldeen, At the age of 25, he graduated from Damascus University in Syria with an M.D. He also earned a master's degree in hematology/medical oncology there in 2013. He is currently a specialist in medical oncology and hematology at Sheikh Khalifa Specialty Hospital in the UAE. He has served as a Senior specialist hematology medical oncology center and has more than 10 publications published in reputable journals. He is a member of Emirates Oncology Society (EOS) Emirates Hematology society (EHSA), Syrian oncology society (SOA), the European Society of Medical Oncology (ESMO), European Hematology society (EHA) and the American Society of Clinical Oncology (ASCO).

Four-Patient Case Series And Literature Review For Progressive Transformation Of Germinal Centers (PTGC), Single-Center Experience

Introduction: Progressive transformation of germinal centers (PTGCs) is a benign lymph node illness that is only infrequently linked to Hodgkin's disease. The ma-

jority of patients are young adults with unexplained, asymptomatic, localized or widespread lymphadenopathy that is frequently persistent or reoccure over a long period of time, makes patient victim of misdiagnosis or mismanagement. This patients case series aims to focus on the (PTGCs) and lymphoma relationship, helping in illuminating the challenges faced by physicans and providing some suggestiones on how to improve our follow ups to patients with (PTGCs).

During the initial visit, three of four patients were diagnosed and undergoing regular follow-up in our center, while only one patient was diagnosed outside and received rituximab for an unknown reason. All of the patients are young adult's male, two patients have isolated neck lymph node involvement while the other two have a widespread pattern. Only one patient had symptomatic generalized body ache, fatigability, and night sweat.their Follow-ups were ongoing since 2017 by PET CT with neither interval changes nor progression.there was one case that was associated with malignancy who had relapsed Non-Hodgkin Lymphoma and underwent Bone Marrow Transplantation ,PET CT showed decreased intensity of the involved lymph nodes, and other patient who had widespread lymphadenopathy had massive spontaneous elimination

Conclusion: PTGC and lymphoma sharing the same manifestations appearance, and catachrestic features that leading to a confusion during the diagnosis and the management. In spite its considered as non pre-malignant condition,there is a small risk for developing Nodular lymphocyte-predominant Hodgkin lymphoma (NLPHL) or another lymphoma, therefore the best part in the management is early appropriate diagnosis and close long follow-up.



Mohamed Elamin Omer

Universiti Putra Malaysia, Malaysia

Biography

Mohamed Elamin Abdallah is a statistics lecturer at the Sudan University of Science and Technology. He has been in the education sector for twenty-two years now and a researcher for the last four years. He is currently a Ph.D. candidate at Universiti Putra Malaysia. He wrote and published a few articles about the application of cure models in the survival analysis of cancer patients

Utilization of a Mixture Cure Rate Model based on the Generalized Modified Weibull Distribution for the Analysis of Leukemia Patients

Objective: Cure rate models are survival models, commonly applied to model survival data with a cured fraction. In the existence of a cure rate, if the

distribution of survival times for susceptible patients is specified, researchers usually prefer cure models to parametric models. Different distributions can be assumed for the survival times, for instance, generalized modified Weibull (GMW), exponentiated Weibull (EW), and log-beta Weibull. The purpose of this study is to select the best distribution for uncured patients' survival times by comparing the mixture cure models based on the GMW distribution and its particular cases.

Materials and Methods: A data set of 91 patients with high-risk acutelymphoblastic leukemia (ALL) followed for five years from 1982 to 1987 was chosen for fitting the mixture cure model. We used the maximum likelihood estimation technique via R software 3.6.2 to obtain the estimates for parameters of the proposed model in the existence of cure rate, censored data, and covariates. For the best model choice, the Akaike information criterion (AIC) was implemented.

Results: After comparing different parametric models fitted to the data, including or excluding cure fraction, without covariates, the smallest AIC values were obtained by the EW and the GMW distributions, (953.31/969.35) and (955.84/975.99), respectively. Besides, assuming a mixture cure model based on GMW with covariates, an estimated ratio between cure fractions for allogeneic and autologous bone marrow transplant groups (and its 95% confidence intervals) were 1.42972 (95% CI: 1.18614-1.72955).

Conclusion: The results of this study reveal that the EW and the GMW distributions are the best choices for the survival times of Leukemia patients.



Yasmine El-Masry

Faculty of Medicine, Tanta University, Egypt

Biography

Yasmine El-Masry has completed the MD in obstetrics and gynecology at the age of 35 years old from Tanta University, Egypt. She is a lecturer in obstetrics and gynecology department, faculty of medicine, Tanta University. She has 4 international publications and others are ongoing to be published in the near future.

A pyocolpos, pyometra and acute renal impairment in a young adolescent with an imperforate hymen, a rare case report

Background: Imperforate hymen (IH) is considered the most common obstructive anomaly of the female reproductive tract. Infections, endometriosis, subfertility or obstructive urinary symptoms could complicate if went undetected. Treatment of uncomplicated IH is simple through hymenotomy (cruciate incision or excision of hymen). In case of patients desiring virginity hymen-preserving surgeries is an alternative choice, such as simple vertical incision and annular hymenotomy. Sepsis is not common to occur secondary to imperforate hymen, but this case highlights it as a possible and evitable cause of sepsis in pediatrics' and adolescence. Pyometra is rarely seen in children and clinical experience in managing this condition is limited. Severe sepsis or septic shock in children is associated with high mortality, especially in developing countries, and accounts for about 8% pediatric intensive care unit (PICU) with estimated mortalities of about 25%, more over about 17% of survivors may show moderate disabilities. This review reported a rare case scenario with uncommon sev-

er presentations seen in adolescent gynecology, and it is a serious case and fortunately the pediatricians, emergency room physicians and gynecologists are rarely facing such issue. We provided our valuable experiences in the approaches of diagnosis and treatment for imperforate hymen that complicated with pyocolpus & pyometra and extremely rare & sever sepsis caused by virulent Klebsiella strains in children which is extremely rare to infect them.

Case presentation: we described diagnosis and management of such rare complicated case in a 14-year-old adolescent girl with an undetected imperforate hymen that was complicated by pyocolpus, pyometra, sepsis and the first presented as acute urine retention, acute renal failure and septic shock in an adolescent girl. Condition was managed by urgent resuscitation then under general anesthesia, partial, central & cruciate hymenotomy was done and the patient was underwent peritoneal dialysis continued her treatment in ICU.

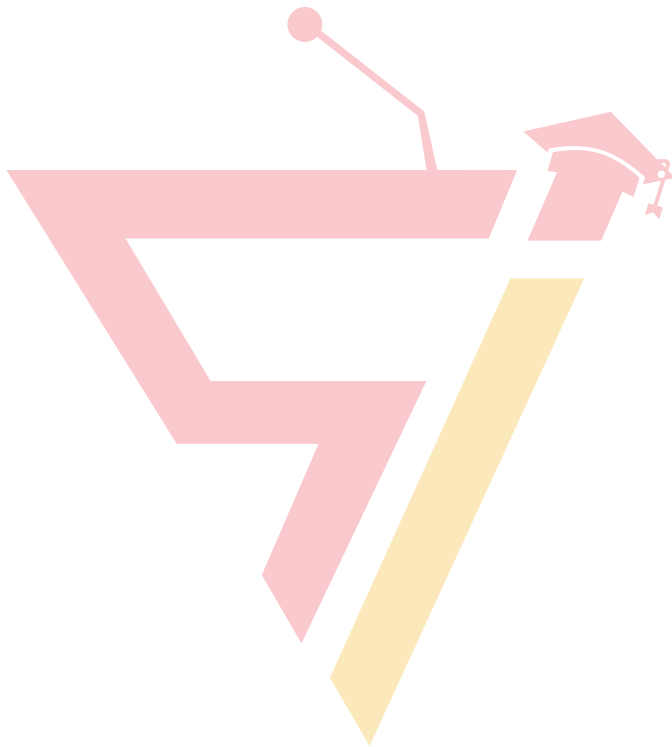
Conclusion and importance of the research: beside the easiness of detecting and managing Imperforate hymen, it represents an evitable cause to more serious side effects such as acute urine retention, sepsis and subfertility. Suspicion should be raised for IH in adolescent girls presented with acute abdomen, urinary manifestations, and urinary emergencies for example acute retention, renal colic & acute renal failure. There is much to be learnt about how Klebsiella disseminates from the primary infection site, either the lung or the gut, to other sites. One troubling aspect of *K. pneumoniae* infections is the emergence of strains causing disseminated pyogenic infections. Although these strains are not generally associated with UTIs, they are clearly genetically related bacteria and present the potential to transfer, either directly or indirectly, genetic information into urinary isolates. Challenges that face the future management of these infections include the development of non-antibiotic based therapies since the ability of *K. pneumoniae* to rapidly evolve to antibiotic-resistant strains is alarming. The increased quality of healthcare has resulted in a greater population of susceptible hosts for *K. pneumoniae* infection. The prevention of infection and management of patients with infections will provide enormous challenges in the future.

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**POSTERS
Day 1**





Hafiz Asif Iqbal and Hane Mohammad Muamenah,
Faisal Specialist Hospital and Research Center, KSA

Biography

Hani Mohammad Muamenah, MBBS from Umm Alqura Medical School- Saudi Arabia, completed Residency Training in Radiation Oncology at McMaster University- Canada 2014. He is a Fellow of The Royal College of Physicians & Surgeons of Canada since 2014. He has done Fellowship Training on CNS, Lung Malignancies and Stereotactic Radiation therapy at McMaster University in 2016 and CNS Oncology at university of Toronto, 2017. He is currently working as Consultant Radiation Oncologist & Section Head for the Radiation Oncology Section at King Faisal Specialist Hospital & Research Center - Jeddah, Saudi Arabia.

Hafiz Asif Iqbal's Biography: Hafiz Asif Iqbal, MBBS (2009) from University of Karachi-Karachi Medical and Dental College- Pakistan. He completed his residency training in Radiation Oncology at Aga Khan Uni-

versity Hospital- Pakistan 2016. He is a Fellow of College of Physician and Surgeon Pakistan since 2016 and currently working as Radiation Oncologist at King Faisal Specialist Hospital & Research Center- Jeddah, Saudi Arabia

Re-Irradiation for Recurrent Brain Tumors: A Retrospective Study from a Tertiary Hospital in Saudi Arabia

Objective: To analyze the post-re-RT progression-free survival (PFS) and incidence of radio-necrosis (BRN) in patients with recurrent primary brain tumors and to explore the associated factors.

Method: A retrospective cohort study that included 15 pediatric and adult patients with primary brain tumors who were treated with re-RT between 2011 and 2020. The study endpoints included the post-re-RT PFS, which were analyzed using Kaplan-Meier survival analysis, and the incidence of radio-necrosis. Baseline demographic and clinical data, primary radiation therapy (RT1) parameters and outcomes, and re-RT parameters and outcomes, were analyzed as factors for the two outcomes.

Result: Of the 15 participants, 7 had glioblastoma and 5 had anaplastic ependymoma. The mean interval from first RT to re-RT was 24 months (range=2-60 months). The mean total cumulative dose after re-RT as per EQD2 (equivalent dose in 2 Gy) fractions was 101.97 Gy (max 135.6 Gy). The total mean (max) cumulative doses for organs at risk as per EQD2 after re-RT were 54.05 (92.93) Gy for brain stem, 41.19 (87.94) Gy for optic chiasma, and 28.79 (77.18) Gy and 28.6 (88.71) Gy for left and right optic nerves respectively. Disease progression occurred in 10/15 patients, and the median PFS was 4 months (95%CI=0-9.1). Although not statistically significant, PFS was likely to be prolonged in case of low-grade tumors, longer RT1-re-RT time. Radiation necrosis occurred in 2 patients.

Conclusion: The expected clinical benefits against the adverse effects should be contemplated for re-irradiation in primary brain tumors.



Sandy Boutros-Suleiman
Bar-Ilan University, Israel

Biography

Sandy Boutros-Suleiman has completed her BSc in medical lab sciences at the age of 24, then completed M.Sc degree at the age of 26 years from Bar-Ilan University Azrieli Faculty of Medicine (Israel). Today she is a Ph.D student in the lab of molecular and cellular biology of cancer in Bar-Ilan University Azrieli Faculty of Medicine.

The Emerging Role of E3 Ubiquitin Ligase SMURF2 in the Regulation of Transcriptional Co-Repressor KAP1 in Untransformed and Cancer Cells and Tissues

KAP1 is a transcriptional co-repressor which interacts with the KRAB domain present in many transcription factors. KAP1 acts as scaffold for protein complexes repressing transcription and plays fundamental role in normal and cancer cell biology, affecting cell prolifer-

ation, DNA damage response, genome integrity maintenance, invasion, as well as anti-viral and immune response. The cellular functions of KAP1 are mainly controlled by its post-translational modifications including phosphorylation and SUMOylation. Recent studies have demonstrated significantly altered KAP1 protein levels in many human cancers. Despite its significance, the molecular mechanisms operating in and regulating KAP1 stability and activity are obscure. In this study, we identified SMURF2 as an important regulator of KAP1. We show that SMURF2 directly interacts with KAP1 and ubiquitinates it in vitro and in the cellular environment.

Interestingly, examination of untransformed cells showed that SMURF2 mostly exerted a negative impact on KAP1 expression, a phenomenon that was also monitored in certain Smurf2-ablated mouse tissues.

However, in tumor cells SMURF2 stabilized KAP1. Further investigations showed that SMURF2 regulates KAP1 post-translationally, interfering with its proteasomal degradation. The IHC analysis of breast TMA showed the expression levels SMURF2 and KAP1 in tumors were considerably higher as compared to their normal matching counterparts. These findings, showing that in certain types of cancer cells, including breast cancer, KAP1 is stabilized by SMURF2, may imply that elevated expression of KAP1 emanates from the heightened expression of SMURF2. All together, these findings uncover SMURF2 as a novel regulator of KAP1, governing its protein expression, interactions, and functions.



Jennifer Uriah

University of Sam Ratulangi Manado, Indonesia

Biography

Jennifer is the eldest child in the family. She completed her Medical degree from University of North Sumatera in Indonesia. She is currently completing her residency in University of Sam Ratulangi Manado Indonesia. She is in her 5th semester. In her free time, Jennifer enjoys travelling and listening to the music.

The Outcome of Radical Hysterectomy in Patients with Cervical Cancer in RSUP Prof. Dr. R. D. Kandou from January 2019 – December 2021

Introduction: Cervical cancer is the second most common cancer in women and the third most common cause of mortality due to cancer in women worldwide. The main treatment of early cervical cancer is radical hysterectomy; however, recurrence rate is still considered high even after a definitive treatment. This study aimed to evaluate the outcome of radical hysterectomy in cervical cancer patients in RSUP Prof. Dr. R. D. Kandou Manado.

Method: This descriptive study analyzed data from medical records of all cervical cancer patients who underwent radical hysterectomy in RSUP Prof. Dr. R. D. Kandou Manado from January 2019 – December 2021.

Result: A total of 23 subjects were included. Most cases occurred in 2019 (52.5%). Most subjects were 40-49 years (52.2%), married at the age of >20 years (82.6%), had a parity status of 2-4 (69.6%), and had one husband (91.3%). Most subjects were diagnosed with stage IIA (52.2%), squamous cell carcinoma (65.2%), had a tumor size of >4 cm (69.6%), with lymph node involvement (60.9%), disease-free interval of >12 months (86.9%), and did not have a recurrence (73.9%).



Victor Moniaga

University of Sam Ratulangi Manado, Indonesia

Biography

Victor is the second of three children in the family. He completed his Medical Degree from University of Sam Ratulangi, Manado, in Indonesia. He is currently undergoing his Obstetrics and Gynecology residency in University of Sam Ratulangi Manado Indonesia. He is now in his 5th semester. In his freetime, Victor enjoys playing football.

The association between dietary intake and hypertension in pregnancy at Prof DR. R. D. Kandou Manado

Hypertension is one of the greatest causes of maternal and fetal mortality in Indonesia, and it shows an increasing trend between 2010 and 2013. The high inci-

dence of hypertension in pregnancy in Indonesia may be related by the dietary intake of the pregnant women. This cross-sectional study was conducted on 108 female diagnosed with Hypertension in Pregnancy at the Obstetrics and Gynecology Department of Prof. Dr. RD Kandou Manado. The population was the pregnant woman in third trimester of pregnancy. The outcomes were analyzed using linear regression methods. A researcher-made questionnaire was used to collect data about diet intake. The result of this study shows that there were 62 cases (57%) age between 20-35; 63 cases (58.3%) with BMI between 25-29.9 kg/m²; 71 cases (65.7%) were secondary/high school; 63 (58.3%) cases on Primigravida; 63 cases (58.3%) no never pregnant before; 53 cases (49%) have 1-3 times of ANC; 102 cases (94.4%) have no history of Hypertension; 75 cases (69.4%) were smoking. There were 70 cases (64.8%) mostly eat Carbohydrate than Fat (18 cases; 16.7%), and Protein was less common: 12 cases (11.1%) eat meat and 8 cases (7.4%) eat fruits and vegetables. Hypertension in pregnancy are common to those who mostly take carbohydrate than other macronutrient even the patient had no history of hypertension. We believe this is happen because of the lack intake of Calcium and Magnesium that are common in vegetables, fruits and protein. Therefore, further study is needed to be done.



Shintya Habibie

Sam Ratulangi University, Indonesia

Biography

Shintya Habibie completed her medical degree from Sam Ratulangi University, Manado, Indonesia and she is currently completing Obstetrics and Gynecology residency in Sam Ratulangi University, Manado, Indonesia. During COVID-19 Pandemic in Indonesia, she was participating in the management of COVID-19 especially Obstetrics & Gynecology patients in General Hospital Prof. Dr. R. D. Kandou, Manado. She was married and had beautiful twin daughters. She enjoys singing and diving in her free time.

Prevalence and Relation between Premature Rupture of Membranes with COVID-19 Infection in PROF. DR. R.D KANDOU, Manado Indonesia from January-December 2021

Introduction: PROM is a complication in 3% of preterm pregnancies and 8% of term pregnancies. PROM is associated with maternal and perinatal morbidity and

mortality. The rupture of the membrane is the result of various factors that ultimately lead to accelerated membrane weakening. Inflammatory mediators associated with SARS-CoV-2 infection have been associated with poor perinatal outcomes. SARS-CoV-2 infection in pregnancy will increase infection-related obstetric morbidity including preterm delivery and premature rupture of membranes. The purpose of this study was to determine the prevalence and relation between premature rupture of membranes with COVID-19 infection at Prof. RSUP. Dr. RD Kandou, Manado, Indonesia.

Method: This study is a descriptive study. Anamnesis was carried out on a number of 243 research samples consisting of pregnant patients who gave birth at Prof. RSUP. Dr. R.D Kandou in a period of one year, namely January 2021 to December 2021. An evaluation of the number of pregnancies with premature rupture of membranes and COVID-19 infection in the study sample was carried out. Data were collected and then analyzed using Microsoft Excel and SPSS 26.0 software.

Results: Based on the data obtained from 243 pregnant patients who gave birth, 193 patients were aged between 20-35 years, 98 patients were nulliparous, and 32 patients were PROM patients, with 157 patients undergoing caesarean section.

Conclusion: The prevalence of PROM in RSUP Prof. Dr. R.D Kandou in the period of January 2021 – December 2021 was 13.2%. Most of the subjects were housewives, high school education background, and nulliparas. The most common method of delivery is by caesarean section. And there is no relationship between PROM and COVID-19 infection..

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**KEYNOTE
Day 2**





Graziano Clerici

European Medical & Research Center, Italy

Biography

Graziano Clerici Professor in Obstetrics and Gynecology, University of Perugia (from 1998). National General Secretary of the SIEOG (National Society of Ultrasound in Obstetrics and Gynecology and Biophysical Technologies) (2003-2005). He has worked in various university centers including the Centre of Fetal Diagnosis and Therapy of Vienne (Austria - 1995), Barcelona (Spain - 1997), Detroit (USA, Wayne State University - 1998), London (UK, King's College Hospital - 2000), Miami (USA, Jackson Memorial Hospital, University of Miami - 2010), Hamburg (Germany, University Medical Center Hamburg-Eppendorf (UKE), University of Hamburg - 2016-2017). National General Secretary of the SIMP (Italian Society of Perinatal Medicine) (2010-2014). Currently, Director of the "European Medical and Research Center" - (CEMER) and Director of the "Permanent School of Ultrasound in Ob/Gyn" - (PSUOG). His scientific production includes 100 original works and 22 textbooks. He participated on 7 international and 7 national research programs. He took part, as a teacher, on 76 international courses and, as a speaker, 130 (national/international) congress.

Fetal Hemodynamics in IUGR Fetuses

Fetal hemodynamic is widely used for the evaluation of fetal conditions during different maternal and fetal pathophysiological processes commonly related to hypoxemia and intrauterine growth restriction (IUGR). The evaluation of fetal oxygen deficiency is one of the major challenges of contemporary fetal medicine and its fundamental aim is: "the prevention of fetal compromise and particularly the prevention of fetal injury and fetal death". The causes of fetal oxygen deficiency and IUGR can be different: placental insufficiency, umbilical cord anomalies, fetal pathologies and maternal pathologies. It is well known that fetal oxygen deficiency is mostly due to placental vascular insufficiency. This pathophysiological process is characterized by different clinical and instrumental signs in relation to the etiology and the severity of the pathology that can show several hemodynamic patterns with different onset timing of the fetal hemodynamic changes. Indeed, the so called "early-onset" IUGR (<34 wks) is characterized by a typical cascade of hemodynamic events starting from placental functional and structural alterations, through uterine arteries and fetal arterial hemodynamic alterations followed by an alteration of the fetal venous districts, leading to intrauterine growth restriction and possible fetal injury or finally even to fetal intrauterine death. The so called "late-onset" IUGR (>34 wks) may have the same complications, but it is characterized essentially by the presence of "brain sparing" and by the absence of the typical progression of the fetal hemodynamic events, leading to fetal heart failure. We found a minority of IUGR cases due to umbilical cord anomalies are characterized by hemodynamic patterns that we called "atypical", with alterations in the fetal venous districts and normal flow in the fetal arterial districts and in the uterine arteries. These cases are at hypoxic risk and, therefore, when IUGR is suspected and the hemodynamic evaluation shows an "atypical" pattern, it is mandatory to study the umbilical cord and its possible defects, like true knots and anomalous coiling.



Aboubakr Elnashar

Benha University, Egypt

Biography

Aboubakr Elnashar Prof Obs Gyn. Benha university Hospital, Egypt. President of Clinical Society of Obs & Gyn. Editor of Middle East Fertility Society Journal, Egyptian Fertility Sterility Journal, Benha Medical Journal. Member of Egyptian fertility sterility society board. 37 international publications in: Lancet, Human Reproduction, British J Obs Gyn, Fertility Sterility, J Assist Reprod Genet, International J Gyn Obs, Acta Obstet Gynecol Scand, J Obstet Gynaecol. Speaker in international conferences: ESHRE (5 times), RCOG, European Congress of Obs Gyn, MEFS. 480 lectures on Slide share. International reviewer of ESHRE Guidelines: 1. PCOS 2. COS3. Female fertility preservation 4. Terminology of ectopic pregnancy.

LONG-TERM BENEFITS & RISKS OF MENOPAUSAL HORMONE THERAPY

There is a controversy about the long-term benefits & risks of menopausal hormone therapy (MHT).

1. Venous thromboembolism: The risk associated with transdermal MHT given at standard therapeutic doses is no greater than baseline population risk.
2. CVD: MHT Does not increase CVD risk when started in women aged ≤ 60 . Oral (but not transdermal) estrogen is associated with a small increase in the risk of stroke.
3. Cancer: a. Breast cancer: MHT with estrogen (E) alone is associated with little or no change in the risk of breast cancer. MHT with E & progestogen (P) can be associated with an increase in the risk of breast cancer. B. Ovarian cancer: Slight increase in the risk of serous & endometrioid ovarian cancer associated with MHT use. C. Endometrial cancer: Unopposed E increases the incidence of endometrial cancer & this risk is largely avoided by the use of combined E & P therapy.
4. Osteoporosis HRT is the 1st line therapeutic intervention for the prevention & treatment of osteoporosis in women with premature ovarian insufficiency & menopausal women below 60 ys, particularly those with menopausal symptoms.
5. Dementia: MHT is unlikely to increase the risk of dementia or to have a detrimental effect on cognitive function in women initiating MHT before the age of 60.
6. Loss of muscle mass & strength There is limited evidence suggesting that MHT improve muscle mass & strength muscle mass
7. Type 2 diabetes mellitus (DM): MHT (either orally or trans dermally) is not associated with an increased risk of developing T2D. long term benefits of MHT is much more the risks if we started within 10 years of menopause, selected the appropriate



Aneta Sima

University Clinic of Obstetrics and Gynecology,
Macedonia

Biography

Aneta Sima obtained her medical degree in 1998 from the University of Skopje, Macedonia and she is a specialist in Obstetrics and Gynecology from 2009. She received her PhD degree in 2019. Her research interests cover various themes of gynecology with specific interest in the field of gynecologic endocrinology, surgical management, minimally invasive procedures and prevention, diagnosis and treatment of female infertility. She works as consultant of Obstetrics and Gynecology at University Clinic of Ob/Gyn, a tertiary teaching hospital in Macedonia. She is author of many articles published in international peer-review journals and usually serves as referee and as editor for indexed peer-review journals.

Endometrial abnormalities in perimenopause associated with HOMA IR

Introduction: Perimenopause as a clinical entity is characterized by a series of symptoms that occur due to estrogen deficiency in multiple organs and systems. Obesity is a risk factor that favors endometrial abnormalities, especially hyperplasia. Glucose homeostasis is often impaired in these patients, insulin

levels are increased, and HOMA IR is increased.

Goals: to detect hyperplasia in obese perimenopausal patients with abnormal uterine bleeding to determine insulin levels, HOMA IR, to determine the association between hyperplasia and HOMA IR.

Material and methods: This was a prospective cohort study, performed at the Ob/Gyn Clinic, over a period of 1 year. 100 patients with abnormal uterine bleeding during the perimenopause were involved, aged 45–50, divided into two groups based on BMI. The control group consisted of 40 asymptomatic patients 1-patients with BMI above 30, 2-patients with BMI under 30.

Results: The average value of glycemia in the first group was higher and is 5.7 mmol/l, cut off value was 5.5. The average value of the HOMA-IR insulin resistance index in the first group was highest - 2.8 (the cut-off value was 1.8). Endometrial hyperplasia was registered in the first group at 40.9%. The first group registered a significant association between HOMA IR and hyperplasia, the risk of endometrial hyperplasia occurring was eight times higher. The first group registered a significant association between glycemia and endometrial hyperplasia. High levels of glycemia increase the risk of endometrial hyperplasia occurring by three times.

Conclusion: In menopausal transition patients with abnormal uterine bleeding there is an increased incidence of endometrial hyperplasia, hyperglycemia, and increased HOMA IR. There is a strong association between these changes and the risk of cardiovascular disease increases. Menopause is a period in a woman's life that requires a multidisciplinary approach to diagnostics and treatment.



Mukurdipi Ray
AIIMS, India

Biography

Mukurdipi Ray MS., FRCS (UK), PhD (Onco, AIIMS) FACS (USA) Professor Surgical Oncology, AIIMS, Delhi. MCh, DNB SurgOnco & PhD Teacher, Guide, Examine and International Speaker. He is Author of 6 renowned Onco surgical books including "Multidisciplinary approach to Surgical Oncology patients" and 21 books on literature. He is Author of 5 self-designed techniques in Onco Surgical procedures along with >120 national and International publications. He is a HIPEC Surgeon for peritoneal surface malignancies and translational researcher in the field of molecular oncology. He served Indian Army over a decade, participated in Kargil War and achieved five Govt Medals and Rastriya Gaurav Award.

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

Background: Nerve Sparing Radical Hysterectomy (NSRH) is desirable in all cases of hysterectomy to avoid bowel, bladder and sexual dysfunction which are as high as 40% in literature. Meticulous anatomical knowledge of pelvic nerves, course of ureters, vessels, vessels plexus, various pelvic spaces and over all the skill of the surgeon are pivotal for this technically challenging surgery.

Method: We performed NSRH in our 105 cases of carcinoma cervix (up to stage IIA), endometrial carcinoma and carcinoma ovary (both upfront and interval setting). We adopted our technique in all cases and

observed perioperative outcomes in terms of bowel bladder and sexual dysfunctions and quality of life issues by asking questioners on follow-up. Standard operative steps are followed till the ligation of uterine artery and superficial uterine vein. The next zone of dissection is crucial, and we termed it as 'Red Alert Zone' of pelvis. We were careful in the following area to safeguard the Hypogastric and pelvic Splanchnic nerves during the division of uterosacral and rectovaginal ligament, during the division of deep uterine vein in cardinal ligament, division of Vessels plexus in vesicouterine ligament, vaginal blood vessels in paracolpos area and during bladder mobilization from the anterior wall of the vagina.

Results: We performed 105 cases of NSRH. This includes 45 ca cervix (up to stage IIA), 28 cases of ca endometrium and 32 cases of carcinoma ovary. The mean operative time for NSRH alone was 120 minutes (90 min to 150 minutes). The mean blood loss was 200±50 ml as compared to 450±50 ml with our previous conventional technique. In a multivariate analysis, we found that obese patients (BMI >30), and post chemotherapy desmoplastic changes were associated with longer operative time. We followed ERAS protocol for all patients, underwent NSRH. We removed Ryle's tube in the evening of the day of surgery. In the following day, we removed Foley's catheter. Urinary retention was noted in 4.76% (N=5). We observed obese and diabetic patients having the tendency for urinary retention more. We used EORTC Ov28 questionnaire to assess sexual dysfunction at around 8 weeks. 28.5% (n=30) patients were sexually inactive and 5.7% (n=6) reported vaginal dryness during sexual activity. There was no post-operative mortality. Intraoperative complications included bladder injury 2.9% (n=3), ureteric injury 3.8% (n=4) which occurred in post NACT ovarian cancer patients.

Conclusion: We considered NSRH is the standard of care for any hysterectomy for various cancers. Surgeon should take moral responsibility to adopt this technique in all cases. It maintains quality of life in terms of bowel, bladder and sexual dysfunction of the patient. Surgeon's satisfaction would also definitely be high adapting the skill of performing NSRH.



Mouna Mnif

Hedi Chaker Hospital, Tunisia

Biography

Mouna Mnif Feki was graduated from the Faculty of Medicine of Sfax; She completed her training in France and She was graduated of the Faculty of Medicine of Montpellier in molecular biology, medical dietetics and in gynecology of childhood and adolescence.

She is a member of Tunisian endocrine society, a founding member of the endocrinology association of Sfax (AEDS) and of the research unit "Metabolic Syndrome Obesity," vice president of the medical research development association (ADREMED), the head of research group of endocrine diseases, in human molecular genetics laboratory (LGMH), and she was general Secretary of the Tunisian Association of Gynecology childhood and adolescence (ATGEA). She focused her activity on the genetic aspects of endocrine and metabolic disorders and ensures the transition consultations for pediatric endocrinology. She has published over two hundred scientific papers focusing on clinical and genetic aspects of obesity, and metabolic disorders in Tunisia; autoimmune thyroid diseases, congenital hypothyroidism, disorder of sexual development, and congenital pituitary deficiency. Currently, she is leading several theses in biological science focusing on epidemiological and genetic aspects of obesity and monogenic diabetes, biomolecular aspects of congenital pituitary deficiency and the disorder of sexual development, also co-supervising a thesis in science about microbiota and hypercholesterolemia as part of a European project "H 2020 MILK AFRICA". Actually, she coordinates the certifi-

cate of complementary studies in medical dietetics and bimolecular endocrinology in the Faculty of Medicine.

Occurrence of Hypopituitarism in Tunisian Turner Syndrome patients: Familial versus Sporadic cases

Turner syndrome (TS), is a disease caused by a partial or complete absence of the second X chromosome in women. The association of Turner's syndrome and hypopituitarism is an uncommon finding mainly in its familial form.

In this context, we describe for the first time the co-existence of Turner syndrome in 6 patients with TS (Turner Syndrome) associated to hypopituitarism, including three familial cases except the fourth sister who showed only a TS phenotype.

The average age of our patients was 17.2 years (11-31 years). They were all referred for short stature and pubertal delay, except for the fourth sister who presented spontaneous puberty with integrity of the pituitary axis and the presence of an X ring chromosome. The karyotype showed a monosomy in 3 cases and a mosaic TS in the 3 remaining cases, including one patient with abnormal X chromosome structure.

Somatotropic and corticotropic deficiencies were confirmed in 2 sporadic cases while the gonadotropic and thyrotropic axes were spared. In contrast; familial cases were consistently affected with integrity of the corticotropic axis. MRI showed pituitary hypoplasia in all familial cases and a pituitary stalk interruption syndrome in only one sporadic case. No correlation was found between the chromosome formula and the anterior pituitary involvement.

Co-segregation of congenital hypopituitarism with pituitary hypoplasia and X chromosome aberrations could imply a molecular anomaly of transcription factors responsible for the differentiation and development of pituitary cells such as: PROP1, POUF1, Hesx1, Lhx3, Lhx4.

The etiopathogenic link between X chromosome abnormalities and the occurrence of hypopituitarism remains unclear; however, the progress of molecular biology may clarify the interrelation between transcription factors and sex chromosome segregation abnormalities.

Scholars International Conference on

GYNECOLOGY, OBSTETRICS & WOMEN'S HEALTH

A large purple circle with a dark blue border, containing the text 'SPEAKERS Day 2' in white. A thin purple line connects the top of the circle to a thick purple horizontal bar above it.

**SPEAKERS
Day 2**





Natasha Hogan

Pregnancy After Infertility, Australia

Biography

Natasha Hogan grew up in a small country town, experienced infertility firstly through her parents suffering an ectopic pregnancy and conducting IVF. She has a brother 13 years her junior, she has 20 years plus in the health care industry originally, as a dental nurse, and then as a podiatrist, she has always joked with her clients that she wasn't going to stop in the middle, but life had other plans. After trying to fall pregnant after 3 years naturally, diagnosed with PCOS, failed IUIs, full ART was utilized to attain two amazing daughters. Natasha became very passionate about supporting women with fertility, trained as a post-partum doula, researched further the specific challenges that becoming pregnant after infertility can bring forward, to create a supportive guide for newly pregnant mum's, couples, and families. Her guide follows on from her participation in Perinatal Anxiety and Depression Australia events and other organizations. Currently studying a Master of Healthcare Leadership, Southern Cross University. She is passionate about highlighting all the working parts to the puzzle of infertility, including increasing the knowledge, roles and professional recognition of gynecologists and obstetricians play in creating happy and healthy families and resilience in their clients.

Pregnancy After Infertility: Increasing Connections and a Brighter Future for Gynecologists and Obstetricians.

Infertile couples that experience a positive pregnan-

cy test, have all the initial endorphins and elations of having achieved their dream result traditionally with their infertility specialist. However, once they meet the obstetrician though, they are more likely to be more reserved than their non assisted counterparts, and inclined to be more aware of the risks, anxious about complications, feel strongly about maintaining the pregnancy (especially to full term) and having a safe birth. Consequently, they most often require extra confirmation, education, support and encouragement. What isn't well acknowledged and considered is that Gynecologists and Obstetricians are the backbone of making their baby arrive and become a true reality. The connection, and overall relationship with the client can have a huge impact on the end results and for the overall happiness and wellbeing of mother and baby. Trust and connection can manifest into resilience, and it essentially needs to start from the beginning even before infertility care planning has begun.

Being an academic healthcare professional Natasha found this to be true in her own lived IVF journey (PCOS with male fertility concerns also). Natasha conducted her own significant research to assess her personal challenges PBCS, breech position, c-section, low birth weight, Raynaud's phenomenon affecting her breasts, and many more (as a scholar looking for scholarly knowledge). The dynamics of previously being infertile, its impact and secondary considerations was all to encompassing and thus she found herself writing a book 'Pregnancy After Infertility: A Guide to What's Different & What's Next to help assist previously infertile mothers have something they could turn to for knowledge, reassurance, and inspiration.

However, Natasha didn't want to wait for her publication to reach mothers slowly sifting down through the population. She also wants to create a movement that has the most significant professionals in the birthing process as the leaders. For those leaders to have the opportunity to build truly proficient relationships, that are conducive to positive results especially considering the projected 'most craved for connection era of all time post COVID 19'. For Gynecologist and Obstetricians to build resilience in their clients create happy, healthy mothers, babies and families while honoring their own professional reputational significance in the field of infertility and pregnancy after infertility. Her workshop/talk is designed to address potential ways both individuals and the professional body could make the future brighter through connection.



Sima Baghbanian

Mideast Polyclinic, United Kingdom

Biography

Sima Baghbanian has her expertise in the field of Gynecology and Obstetrics for 25 years. She has performed a plenty service to educate and upgrade women's information about the triangle of their bodies, emotions and minds and how to enhance their health and their happiness.

Women's Health

Statement of the problem: Women's mental, psychological and body health are crucial factors in their lives. The different status of hormonal changes in their bodies expose them to the significant changes in their emotions, mental and body status. To recognize and be aware of these physiological fluctuations could guide them to cope and adjust to these variations in a satisfactory way. For instance, monthly they expose to the menstruation, or during pregnancy loads of changes happening in their system, during breast feeding and also during postmenopausal.

Conclusion: By improving women self-awareness and encouraging them to have a healthy life style will help them tremendously in their health.



Amira Hassan

National Health Service, United Kingdom

Biography

Hassan currently works as trust grade doctor in princess Alexandra Hospital Department of obstetrics and Gynecology, NHS, Essex, United Kingdom. She graduated from faculty of medicine Cairo University, owned MSc in obstetrics and Gynecology from faculty of medicine Ain Shams University, Egypt. She is member of Egyptian Medical Syndicate. She has over 10 years of experience in Egypt, UAE, UK. Hassan has owned membership of Royal College of obstetrics and gynecology, London, UK. She is interested in audit and clinical research she presented her audits outcomes locally. Keen in teaching juniors and medical student. she participated in Mrcog preparation courses. Hassan endeavors to share and present the outcome of shoulder dystocia Audit. As, it is crucial to evaluate our practice in this Topic as it is one of most litigated complications in obstetrics. In this presentation we will highlight and discuss a good practice point that should not be missed.

Are we following the standard in shoulder dystocia management? A retrospective audit of shoulder dystocia for women delivering at Princess Alexandra Hospital

1. Incidence

- Incidence of shoulder dystocia in PAH is 0.79% (31 case out of 3881 in period time from May /2021 to April/ 2022)
- As per RCOG, national rate of SD incidences is between 0.58% and 0.70%.

2. the risk factors

- Clinicians should be aware of existing risk factors in labouring women and must always be alert to the possibility of shoulder dystocia
- Risk assessments for the prediction of shoulder dystocia are insufficiently predictive to allow prevention of the large majority of cases.

Objective:

- to know where we are in incidence rate of shoulder dystocia and its associated morbidity and mortality as per standard national rates.
- To detect any area, we need to improve our practice.

Method: It was a retrospective study. Total of 31 patients had had shoulder dystocia from May/2021 to April/2022) were included in this audit. Data was collected from hospital database.

Results:

--Manoeuvres
McRoberts's 63%
Suprapubic pressure 9%
posterior Arm 26%
internal rotation 3%
---the incidence of postpartum haemorrhage (41%) as well as third and fourth-degree perineal tears (6.4%) .
Birth Weight 48% of births complicated by shoulder dystocia occur with infants who weigh less than 4000g. RCOG ours is 58% of births below 4000 g

Conclusion: To add maternal morbidities to our chart

1. vaginal examination and perineal exam

2. PPH

- B) Debrief the patient and document
Duty of candour
- C) take blood gases in all SD patient
- D) Document foetal shoulder relation to maternal pelvis (which shoulder is anterior)
postmenopausal.



Wassym Senhaji Rhazi
Nurilia/IRIFIV, Morocco

Biography

Wassym Senhaji Rhazi is a MD,PHD, gynecology and obstetrics, Endoscopy and infertility treatments Vice-président of Moroccan Society for Endometriosis and Reproductive Medicine (MSERM) Founder Member of Moroccan College of Fertility (CMF) Medical Director of IVF center in Casablanca, Morocco (IRIFIV).

Relevance of the use of dietary supplements in male and female infertility

To avoid false evidence and bad recipes in the use of dietary supplements in fertility, it is necessary to establish a strategy targeting the pathology cause of infertility, in particular, by highlighting the accumulation of homocysteine, neutralization of excessive ORS (oxygenated radicals) production, instability of DNA methylation and routine use of 5 MTHFR (methyl tetrahydrofolate reductase) for folic acid. Indeed, DNA methylation is at the heart of the problem of reproduction, negatively affected by ORS and the rise in homocysteinemia; this methylation stability must be ensured by the neutralization of oxygenated radicals by endogenous glutathione via amino acids (l cysteine, l cystine....) and the recycling of homocysteine in the methionine cycle by the methylated folic acid, generated through the intervention of MTHFR in the folate cycle.

The production of CH₃ radicals improves the stability of methylation and reduces the risks of gamete apoptosis, genetic instability, arrest of embryogenesis, and malformations; especially as there is a transgenerational risk of methylation errors affecting gametes and early embryos.

Conclusion: The treatment strategy of infertility should include supplements that insure a stability of DNA methylation.



Wioletta Wujcicka

Polish Mother's Memorial Hospital - Research Institute, Poland

Biography

Wioletta Wujcicka became a master of biology, M.Sc., at the age of 23 years from University of Lodz, in Poland, winning 'Medal for Glorious Studies'. She has completed her Ph.D. in medical sciences at the age of 28 years from Medical University of Lodz, in Poland. She performed her dissertation at the Department of Molecular Cancerogenesis, at the Medical University of Lodz. Then she was a scientific assistant at the Laboratory of Molecular Virology and Biological Chemistry, at the Polish Academy of Sciences in Lodz, and next - an assistant professor at the Department of Feto-Maternal Medicine and Gynecology, and Department of Perinatology and Gynecology, at the Polish Mother's Memorial Hospital - Research Institute in Lodz, Poland. Nowadays, she is an assistant professor at the Scientific Laboratory of the Center of Medical Laboratory Diagnostics and Screening, at the Polish Mother's Memorial Hospital - Research Institute in Lodz, Poland.

Screening for cytomegalovirus infection in pregnant women and their fetuses

Introduction: Cytomegalovirus (CMV) causes the most common congenital infections in the world, diagnosed in approximately 0.5-1.0% of all liveborn neonates. Most congenital CMV infections are asymptomatic, but 10-15% of cases have varying clinical signs that can result in perinatal mortality and severe neurological disturbance in most infected infants.

Objective: The aim of the study was to present the currently available and recommended methods of serological and molecular screening for CMV infection in pregnant women and their fetuses.

Methods: The latest publications available in PubMed were searched to understand the clinical relevance of the methods used to diagnose of CMV infection in pregnancy.

Results: Primary CMV infections during pregnancy are initially identified by serological tests. CMV-IgG seroconversion is still the most reliable evidence of primary CMV infection. Assessment of CMV IgG, IgM, and IgG avidity is difficult due to abnormal responses and heterogenous results obtained with different assays.

Conclusion: Diagnosis of congenital infections with CMV should be based on ultrasound findings of clinical symptoms of cytomegaly and the presence of viral DNA in the amniotic fluid or urine of new-borns.



Sufia Athar

Hamad Medical Corporation, Qatar

Biography

Sufia Athar is MBBS, DNB, Fellow in Minimal Invasive Surgery, Fellow Indian College of Obstetrician and Gynecologists. Specialized in high-risk Obstetrics, minimally Invasive Gynecology Surgery and infertility. Specialized in patients' safety from the John Hopkins University, USA. Certified in Global Health, Harvard T.H. Chan School of Public Health, USA. Specialized in digital health from Imperial College London. Presented and published many clinical papers and posters. Received prizes for the best papers and posters in several conferences.

Are Novel Methods of Cancer Cervix Screening Prudential? A Narrative literature review

Objective: To do a comparative analysis of diagnostic accuracy and cost-effectiveness of conventional and novel methods of cancer cervix screening.

Design: A literature review.

Method: An internet-based literature search was performed for all the available methods of cancer cervix screening in the PubMed/MEDLINE, Scopus, Cochrane, and EMBASE databases. The studies published between 1990-2020 on the specified topic were evaluated. 52 studies were included in the review. Relevance screening, data extraction, risk of bias analysis, and quality assessments were conducted. The sensitivity and specificity of different screening methods and their cost-effectiveness were evaluated.

Results: In comparison to conventional methods, Care HPV assays and Hybrid Capture 2 test has higher sensitivity of 91.1% and specificity of 83.7%. They provide logistical and economic advantages but lack sensitivity as compared to HPV DNA. Detection of TERC predicted progression of CIN1/2 to CIN3 after a follow-up of two months to three years with 100% sensitivity and 70% specificity. Cost and need for technical skills are the limitations of this method. The sensitivity and specificity of p16/Ki-67 dual-staining for CIN2+ were 74.9%-90.9% and 72.1%-95.2%, respectively. This method is useful in the unnecessary follow-up of HPV positive and is cost-effective for HSIL. Optical methods of screening are emerging as non-invasive tests with high sensitivity 90-98% but low specificity for HSIL lesions. Multiple methods are under trials. They may be considered as the first-line screening and triage during the same medical visit, thus, significantly reducing the cost.

Conclusion: As compared to the conventional methods of screening, the novel methods are cost-effective in women with HSIL and those who are HPV positive with better sensitivity as compared to the conventional methods.



Leila Karimi

Baqiyatallah University of Medical Sciences, Iran

Biography

Leila Karimi, she has done a PhD in Reproductive Health. She has worked in Midwife, Moslemin Hospital, Shiraz, Iran. She is Educational expert in Najmieh Hospital, Tehran, Iran and also supervisor of obstetric ward Moslemin Hospital, Shiraz, Iran. She is Assistant Professor in Baqiyatallah University of Medical Sciences, Tehran, Iran.

Pregnancy Outcomes of Wives of Chemical and Non-Chemical Weapons Exposed Veterans in Ahvaz, Iran: A Retrospective Cohort Study

Objective: Due to the increase in the middle-aged population of the country, improving the quality of life of women and measuring their health during menopause is a significant issue. The quality of life of menopausal women, in addition to physical and psychological changes, is affected by worries, feelings and attitudes, and the degree of adjustment. The present study evaluates the rate of adaptation in postmenopausal women and some influential factors in order to be a guide for better planning of educational programs and counseling related to improving the adaptation of postmenopausal women to menopausal changes.

Method: The method of this study was a descriptive-analytical intervention. The study population of postmenopausal women referred to the gynecology clinic of Baqiyatallah Hospital in Tehran in 2020. The sampling method was voluntary and the sample size was 400 people. The tools used to collect the data were a researcher-made questionnaire consisting of 35 questions in 7 components, which included attitudes toward menopause (4 questions), relationship with family (4 questions), sexual relationship (5 questions), family and social relationships (respectively). 2 questions) were psychosocial disorders (4 questions), menopausal physical symptoms (11 questions) and self-concept (5 questions).

Results: The results showed that the majority of samples had moderate adaptation to menopausal changes and the highest adaptation was related to the self-concept component and the lowest adaptation was related to the psychosocial disorders component. Adaptation to menopause was significantly different from the components of attitude, relationship with family, family and social relations,

Discussion and Conclusion: Policies and programs to improve the quality of life of menopausal women should take steps to eliminate physical complications, correct negative attitudes and feelings, worries, as well as psychological complications and help to adapt to menopause. The results indicate that perceived social support has a positive effect on menopausal experiences and the support of important people such as spouse is the best predictor of menopausal experiences. Access to information resources, holding training classes, having a proper diet during menopause, the necessary skills to perform the necessary exercises to control the effects of this effective period are considered.



Ajay Jain
India

Biography

Ajay Jain Obtained his Ph.D. degree in Genetics in 1981 and since then he is constantly associated with academic, research & developmental activities on wide biomedical disciplines.

A Brief Overview on Environmental Factors in Relation to Infertility

The incidences of infertility in human population groups have significantly increased all over world. The magnitude of incidences and responsible patho - physiological causes are highly variable from place to place. During the last few decades, the root causal factors responsible for infertility have drastically changed with the modified / altered life style & scientific - technological – climatic developments. This has prompted us to briefly summarize the enormous scientific literature available on the exogenous environmental factors which are affecting human fertility in various ways. This will be helpful to also work out the scientific strategies to check the infertility at the point of genesis before the irreversible phase.



Spyridon Chouliaras
Sidra Medicine, Qatar

Biography

Spyridon Chouliaras is an Obstetrician and Gynaecologist specialized in Reproductive Medicine and Surgery. He is an Assistant Professor of Clinical O&G at Weill Cornell Medicine-Q and an Attending Physician in Sidra Medicine. He underwent postgraduate training in O&G in Manchester, UK where he received the Certificate of Completion of Training. Subsequently after completing a fellowship in the Centre for Reproductive Medicine of the historic St Bartholomew's Hospital in London, he joined Create Fertility one of the largest private IVF clinics in central London.

Spyridon Chouliaras has received a certification in leadership by Harvard Business School and in embryology by the ASRM. He is a Fellow of the Royal College of O&G of the UK and of the American College of O&G and a member of many other learned societies including ESHRE, ASRM and the International Society for Mild Approaches in Assisted Reproduction (ISMAAR). He has authored several chapters in O&G textbooks and articles in peer-reviewed journals and he is an associate editor in the O&G International Journal (OGIJ).

IVF in the era of Personalized Medicine

Our growing understanding of the function of genes, proteins, metabolites, as well as the effect that lifestyle and environmental factors have on these func-

tions have paved the path to personalized medicine.

The focus of personalized medicine is the quest for a tailored approach to disease prevention and treatment that takes into consideration interindividual differences between patients. Precision medicine, which is a perhaps more appropriate terminology already established in some specialties but in reproductive medicine it is only just starting to emerge. This is probably because in this field, treatment is not 'personalized' to one individual only but in three; the mother, father and offspring. Many baseline and treatment related factors, such as surgical or endocrinological, are influencing success and at the same time, different biological systems (gametes, uterus, embryo) are involved.

Throughout the patient's reproductive journey there are opportunities for individualization of their care.

Ovarian stimulation can be tailored according to biomarkers such as AMH and even application of pharmacogenomics and pharmacoepigenomics.

The potential for targeted diagnostic and therapeutic advances in male infertility is also significant. Tests used to assess oxidative stress and sperm DNA integrity are becoming widely available. Advanced sperm selection tools offer new possibilities for tailor made treatment of male patients.

The development of precision treatments in ART can be advanced by AI and machine learning which are increasingly being utilised. AI has been used to improve Embryo selection but noninvasive PGT is rapidly developing as well. Personalized embryo transfer strategies using molecular objective tools such as ERA focus on evaluating endometrial receptivity and help to determine the optimal implantation window. Finally, individualization of the luteal phase support is another area which attracts interest.

In summary personalized medicine appears capable of leading to improved outcomes in ART, namely: higher cumulative live birth rate, shorter interval to pregnancy, elimination of OHSS cases and eventually healthier mothers and offspring.



Lujain Osabi

Health Sector Transformation Program 2030, KSA

Biography

Lujain Abdullah Osabi she is completed PhD on Health Policy and Management, Worked on Vision Realization office of Ministry of Health, Member of foundation team that established the New Model of Care of Chronic disease, Mental Health, Palliative care, E-health systems, director of GIS Unit and successfully leading different National level as well as high impact projects during Covid-19 pandemic. Currently working at the Health Sector Transformation Program of Saudi Arabia, Focusing on Public Health and Health Security National Strategy.

The inventor (patent) of IHEAR AI application as a communication for deaf and blind, and a speaking rehab after cochlear operation, had many winning rewards, e.g. Winner of Mohammed Bin Rashid Al Maktom as the best community initiative to support entrepreneurship, Winner of Hamdan Bin Rashid as the best applied project. Participated on vary Health conferences / sermonizes of Health and Technology (AI). Passionate about volunteering member at different non- profit organization.

Physical Activity Milestone Improvement Opportunities Vision 2030

A healthy population is a pre-requisite for the wider success of the Saudi Vision 2030 and the mobilization of the Saudi population in the creation of a new, more broadly-based economy for the Kingdom over the coming decade.

For a population to become healthy, physical activity plays a major role in achieving a healthy lifestyle. In the past 30 years in Saudi Arabia the Saudi lifestyle has changed due to a raise in the living standards as well as modernization.

This has led to major negative changes in the people's lifestyle behaviors, with increased prevalence of physical inactivity and sedentary behaviors among Saudi society. Such negative lifestyle behaviors contributed greatly to a rise in lifestyle related NCD's in the country including obesity, diabetes mellitus, coronary artery diseases, and hypertension. Although the benefits of physical activity are well acknowledged, a high percentage of Saudi population, especially females, remain essentially physically inactive. Getting inactive people to start participating in physical activity and to keep exercising remains a great challenge.

Some initial efforts have been made to advance evidence and understanding of the factors explaining low physical activity among women in the GCC. So far, however, these efforts have made limited use of shared theoretical frameworks, thus limiting the robustness of the developed evidence and understanding of low physical activity among women in the GCC This lack of evidence and understanding may in turn impede the effectiveness of policy interventions to promote physical activity and reduce the morbidity and mortality it causes. Physical activity initiatives in the country have not been previously documented.

Therefore, the aim of this speech is to provide a narrative review of the physical activity initiatives and discusses influencing factors.



Gunjan Bahuguna

Grant Medical College and Sir J.J. Group of Hospitals, India

Biography

Gunjan Bahuguna is currently working as an Assistant Professor in the Department of Obstetrics and Gynaecology at Grant Medical College Mumbai. She has done a post-doctoral certificate course in Female Pelvic Medicine and Reconstruction from AIIMS Rishikesh. She is passionate about uplifting the health of women, particularly in the rural areas plagued with a low resource health system and has played leading roles in setting up the department of Obstetrics and Gynaecology in the hills.

For her remarkable social work in the rural hills of Uttarakhand, she has been nominated for the Rashtriya Gaurav Award 2022 in India

Meatal - sparing dorsal onlay vaginal graft urethroplasty for female urethral strictures

Introduction: Urethral stricture in females is a rare entity presenting with voiding lower urinary tract symptoms caused by urethral trauma or infection. It is diagnosed by urethral calibration as less than 14 F along with features of bladder outlet obstruction on urodynamics and a narrowed urethra is seen on urethroscopy or VCUG. Conservative options include urethral dilation whereas urethral reconstructive approaches can be by the dorsal or the ventral route with the use of various grafts (buccal/ lingual/ vaginal).

Objectives: A case of meatal- sparing dorsal onlay vaginal graft urethroplasty as a variation of the conventional dorsal onlay urethroplasty is described as a definitive treatment of female urethral stricture with favourable results.

Methods: A surgical video presents a step-wise procedure of meatal- sparing dorsal onlay vaginal graft urethroplasty.

Results: The urethra is dissected in the dorsal plane by a suprameatal inverted-U shaped incision and a dorsal urethrotomy made over the strictured segment, sparing the meatus. Not including the meatus here avoids a widened neo-meatus and possible spraying of urinary stream. Meticulous dissection and staying close to the strictured fibrous urethra preserves sexual function, and limits blood loss from the clitoral neurovascular bundle which is in close proximity; adding to the advantages associated with dorsal conventional approach.

Conclusion: Meatal - sparing dorsal onlay vaginal graft urethroplasty can be performed as a slight variation of the standard dorsal urethroplasty in mid and proximal urethral strictures with excellent results.



Silas Adjei-Gyamfi

Ghana Health Service, Ghana

Biography

Silas Adjei-Gyamfi graduated from the University of Ghana and worked as a general nurse for the past six years. Adjei-Gyamfi developed love for public health and its research when he started questioning the genesis of neonatal and maternal mortalities and morbidities at the maternal and child health unit. This motivated him to further his education to attain Master of Public Health with specialty in International Health Development at Nagasaki University, Japan.

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

Maternal risk factors for low birthweight and macrosomia: A cross-sectional study in Northern Region, Ghana

Background: Abnormal birthweights are critical public health challenges accountable for most non-communicable diseases and perinatal mortalities. Regardless of the myriad of mixed evidence on maternal factors responsible for abnormal birthweight globally, most of these findings are attained from urban and rural settings. This study serves as one of key pieces of evidence in view of the increasing prevalence of abnormal birthweight particularly in some parts of semi-rural Ghana.

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

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

Findings: Prevalence rates of low birthweight and macrosomia were 22.2% and 8.7% respectively. Maternal anaemia in the first and third trimesters of gestation were strong predictors for low birthweight. Mothers belonging to minority ethnic groups; mothers who had ≥ 8 antenatal care; and mothers having neonates whose birth length was > 47.5 cm had reduced odds for low birthweight. Alternatively, mothers with gestational weeks ≥ 42 had higher risk of giving birth to macrosomic neonates (95%CI: 2.127-44.34). Maternal socioeconomic status (wealth quintile) increased the risk of macrosomic births.

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



Siddhant Patki, Arunima Basu and Morohunfoluwa-Bajomo

Imperial College London, United Kingdom

Biography

Siddhant Patki Biography: Siddhant Patki is a 5th year medical student at Imperial College London and has recently completed an iBSc in Management (First Class Honours) at the Imperial Business School.

Arunima Basu Biography: Arunima is a 5th year medical student at Imperial College London and has recently completed an iBSc in Management (First Class Honours) at the Imperial Business School. She has a passion for global health and healthcare management, both which have been reinforced through undertaking several research projects.

Morohunfoluwa Bajomo Biography: He is a 5th year medical student at the University of Liverpool and has recently completed an iBSc in Management (First Class Honours) at the Imperial Business School.

An economic evaluation of vaginotomy versus traditional hysteroscopy for uterine examination

Objective: This study aimed to compare the cost effectiveness between vaginotomy and traditional hysteroscopy as investigative procedures for uterine examination.

Scope: Data for this cost effectiveness analysis (CEA) was obtained from the Vaginotomy against Standard Treatment (VAST) trial, carried out in the United Kingdom with 1597 women at two UK hospitals, in 2019. This CEA examined the effectiveness of each procedure based on procedural 'success', defined as a complete procedure (allowing for full insertion of the scope) with no infection, no complications and an acceptable level of pain as described by the VAST trial.

Methods: Costs associated with both procedures as well as post procedural complications and follow-ups were accounted for. An incremental analysis was carried out to compare the effectiveness of vaginotomy with traditional hysteroscopy, leading to the development of a decision tree. The decision tree was utilised to calculate an Incremental Cost-Effectiveness Ratio (ICER) and sensitivity analysis was also conducted.

Results: The ICER calculated demonstrated that an additional £3346.90 was saved per successful procedure with vaginotomy compared to traditional hysteroscopy. Our model showed that vaginotomy incurs less procedural cost than traditional hysteroscopy. The traditional hysteroscopy technique was shown to have a higher initial upfront cost alongside a lower proportion of procedures achieving 'success'. The overall number of complications and the severity of those complications was greater with traditional hysteroscopy.

Conclusion: The 2019 VAST trial provides strong evidence of the efficacy and tolerability of vaginotomy over traditional hysteroscopy for uterine examination. This study finds that vaginotomy leads to more successful procedures than traditional hysteroscopy, in addition to lower direct and indirect costs. This study is the first to support the use of vaginotomy based on cost-effectiveness thus we recommend that further initiatives are implemented to ensure that physicians feel more comfortable with the technique and adopt vaginotomy in practice.

Scholars International Conference on

GYNECOLOGY, OBSTETRICS & WOMEN'S HEALTH

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**POSTER
Day 2**





Simone Crespi

Organon, USA

Biography

Simone Crespi is a Director of Outcomes Research at Organon & Co., in Women's Health.

Impact of the COVID-19 Pandemic on Contraceptive Access in the US

Background: Changes in access to healthcare services experienced during the COVID-19 pandemic may have impacted women's access to contraceptive care, including long-acting reversible contraceptives (LARCs).

Methods: Cross-sectional survey of women ages 18-49 in the US. Respondents were asked about in-per-

son and telehealth services and ease of filling contraceptive prescriptions.

Results: Of the 1,878 respondents, pre-pandemic, 72.0% of patients used in-person HCP visits for contraceptive prescriptions and 10.1% used telehealth; during the pandemic 55.8% of patients used in person and 21.0% used telehealth. Of the 22.5% of women who switched source of services, 61.5% switched from in-person prescribing only to telehealth only and 19.3% switched from in-person only to a mix of in-person and telehealth services. Overall, 20.3% and 19.9% of respondents indicated that they agreed or strongly agreed that the COVID-19 pandemic impacted their ability to renew or refill, or to start a new or preferred method of contraceptive, respectively. Of all the respondents, 23.7% indicated they had wanted to use a LARC during the pandemic, of whom, 38.3% indicated their insertion was affected by the pandemic and resulted in delayed initiation in 32.2%, 16.4% used a short-acting method before receiving their LARC, and 11.7% were advised to use a different contraceptive method.

Conclusions: The COVID-19 pandemic affected the way in which women received contraceptive healthcare services, including access to the most effective forms of contraception. Special care should be paid to women's contraception care as we move out of the pandemic.

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