Scholars International Conference on

ADVANCES IN NEUROLOGY AND NEUROPSYCHIATRY

20-21 Nov 2019 | Radisson Narita, Tokyo, Japan

THEME:
"EMERGING CHALLENGES AND ADVANCES IN NEUROLOGY AND NEUROPSYCHIATRY"

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<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30-09:00</td>
<td>Registrations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>09:00-09:15</td>
<td>Opening Ceremony</td>
<td></td>
<td></td>
</tr>
<tr>
<td>09:30-10:15</td>
<td>Keynote Presentation</td>
<td>Baljit Kaur Gill</td>
<td>The Open University of Hong Kong, Hong Kong</td>
</tr>
<tr>
<td>10:15-11:00</td>
<td>Title: A systematic review of the factors contributing to nursing professionalism</td>
<td>Ruben Bembibre</td>
<td>Miami Regional, USA</td>
</tr>
<tr>
<td>11:20-12:05</td>
<td>Title: Candidate Biomarkers and CSF Profiles for Alzheimer’s disease and CADASIL (Vascular dementia vs. Alzheimer’s disease)</td>
<td>Bowirrat Abdalla</td>
<td>An-Najah National University, Neurosciences and Human Genetics, Israel</td>
</tr>
<tr>
<td>12:05-12:35</td>
<td>Title: An ecological approach to obesity in Mexican American children</td>
<td>Elizabeth Reifsnider</td>
<td>Arizona State University, USA</td>
</tr>
<tr>
<td>12:35-13:05</td>
<td>Title: How community nurses working in Sydney identified food security, and student nurse focus group perceptions</td>
<td>Lynette Saville</td>
<td>Australian Catholic University, Australia</td>
</tr>
<tr>
<td>14:05-14:35</td>
<td>Title: The role of inflammation in Alzheimer's Disease: Lessons learned &amp; future therapeutic prospects</td>
<td>Jessica W. Barnes</td>
<td>20Lighter, USA</td>
</tr>
<tr>
<td>14:35-15:05</td>
<td>Title: Automating brain improvement to treat Alzheimer's Dementia</td>
<td>Shanilka Weerakoon</td>
<td>SLIT, Sri Lanka</td>
</tr>
<tr>
<td>15:05-15:35</td>
<td>Title: Human balance control system using galvanic vestibular</td>
<td>Tahoura Nedaee</td>
<td>Azizollah Pezeshki High School for Talented Students, Iran</td>
</tr>
<tr>
<td>15:35-16:05</td>
<td>Title: “sound of the lost souls” short film screening</td>
<td>Melihat Aggul</td>
<td>Atatürk Education and Research Hospital Community Mental Health Service, Turkey</td>
</tr>
<tr>
<td>16:05-16:25</td>
<td>Networking and Refreshments Break: 16:05-16:25</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
16:25-16:55  Title: Study of the stress coping strategies used by nurses working in the intensive care units in Khartoum governmental hospital 2019
El Shafee Ahmed Abaker Bapker, University of Medical Sciences and Technology, Sudan

16:55-17:25  Title: Babesiosis misdiagnosed as Malaria, Equatorial Guinea, 2014
Enrique Salvador Padial, National University in Madrid, Spain

16:55-17:25  Title: Comparison of foreign care workers in dementia care facilities: A study using text data mining
Miwa Yamamoto, Tottori University, Japan

Panel Discussions

Day 2 | November 21, 2019
Kaede

Session Tracks

Session Chair: TBA

09:30-10:00  Title: Take me home- Allow me to die peacefully?
Dhastagir Sultan Sheriff, Benghazi University, Libya

10:00-10:30  Title: A Novel non-invasive approach for measuring upper airway collapsibility in mice
Yoichi Nishimura, Johns Hopkins University, USA

10:30-11:00  Title: Identification of diagnostic biomarker for mild cognitive impairment in Eastern U.P. and Bihar population
Vineeta Singh, Banaras Hindu University, India

Networking and Refreshments Break: 11:00-11:20

11:20-11:50  Title: Lack of love and iron, the two causes of Alzheimer’s
Joan Manuel Rodriguez Nunez, Dominican Republic

11:50-12:20  Title: Hyperacute Bilateral Thalamic Infarction Undetected on Initial Diffusion Weighted Magnetic Resonance Imaging: A Case Report
Jin Eun, The Catholic University of Korea, South Korea

12:20-12:50  Title: Investigation of Long-term Potentiation- and Depression-Induced Tau Phosphorylation in Rats with Starch Based Sugar
Yeliz Tasci, Kayseri Sugar Factory, Turkey

Lunch Break: 12:50-13:50
Scholars International Conference on

Advanced Nursing Care and Research

and

Scholars International Conference on
Alzheimer's, Dementia Care and
Neuropsychiatry

November 20-21, 2019 | Tokyo, Japan
A systematic review of the factors contributing to nursing professionalism

Baljit Kaur Gill
The Open University of Hong Kong, Hong Kong

Introduction: A paramount of previous studies has examined on the factors contributing to professionalism. However, factors have yet to be coherently recorded. In this study, researchers aimed to redefine the relevant factors using categorization techniques and to prioritize them according to their importance to nursing professionalism with an acceptable standardized framework.

Method: This study was a systematic review of factors contributing to nursing professionalism in English and Chinese databases (2003-2019) according to the PRISMA approach, 2009.

Result: A total of 34,980 abstracts were read and 26 were selected in the last step for this review. Nursing professionalism is a multifactorial competence expected from a professional patient carer. In this study, the factors are categorized with reference to the modified Summary of Attributes of Nursing Professionalism. A 'Pyramid of Factors Contributing to Nursing Professionalism' was also introduced. Accordingly, the factor arranged from the highest to lowest significance is: the knowledge, accountability, autonomy, ethics, collegiality and collaboration and innovation and visionary domain.

Conclusion: The factors of nursing professionalism vary among countries, but this study serves to provide a comprehensive systematic framework as to the types and significance of factors contributing to nursing professionalism.

Biography
Baljit Kaur Gill is an Associate Professor of “The Open University of Hong Kong” from Hong Kong. She had obtained her Bachelor of Science (Nursing) degree from Oxford Brookes University (UK). She had obtained two Master Degrees (Master of Science, Nursing) from Oxford Brookes University (UK) and (Master in Social Science in Gerontology) from The University of Hong Kong. She had also accomplished her Doctor of Philosophy within three and a half years from The University of Hong Kong. She serves as the editorial board and reviewer for multiple international journals. She have presented and published over 50 research studies/articles. Her research interest covers Simulation Education, Nursing Education, Long Term care and Gerontology, Ethical and Legal issues in Nursing and Transcultural Nursing.
Aim/Goal: The objective of this paper was to perform a critical review of the literature regarding evaluation tools and its effectiveness to manage patients with opioid addiction.

Background: The United States is grappling with one of its worst ever drug crisis. Millions of Americans suffers from opioid addiction and more than nine hundred people a week die from opioid related overdose. The Government of US created a billionaire Program to stop the crisis. Multiple opioids are currently used, and many of them are by medical prescriptions. New findings in the development of addictions are published in the last years and new drugs are available in the treatment of opioid dependence. Many screening tools exists and are used, but no evaluation tools are implemented and reported in the bibliography.

Method: A literature review was conducted from 2000 to 2019 using the databases, CINAHL, Cochrane Library, MEDLINE, PubMed, Centre for Disease Control (CDC), American Society of Addiction Medicine (ASAM) and EBSCOhost with search terms that included “opioid epidemic”, “treatments for opioid addiction”, “addiction evaluation tool”, and “addiction crisis in the United Sates”. Inclusion criteria included the relevant articles under the search topic selected published in recognized sources. The search yield 200 articles. To narrow the search, studies were included if peered reviewed. Studies were excluded if they provide similar information (was selected the most recently and with more complete information).

Results: One hundred articles met criteria. The search generated descriptive and quasi-experiment studies. Many tools were found through the studies. Many tools for manage the opioid addiction are used, but they are for screening or stratification, the most used are STORM, PADT, DUDIT, PHQ-9, COMM, ORT, SOAPP, and RODS.

Implication to Practice: Further research is needed in this area of study. Identifying and implementing an effective evaluation tool will allow a better and uniform patient follow up, identifying the causes of relapse and the weights of each component of the tool, then, identify the most important items to plan. Also, indirectly, the study will allow the evaluation of the Addiction Federal Program effectiveness.

Biography
Ruben Bembibre is a foreign physician with a passion for healthcare. He graduated in 1987 as a physician from Instituto Superior de CienciasMedica de Villa Clara, Cuba, in 1990 he graduated as Doctor in Acute Care. In 1990 he graduated with a PhD in Biomedical Science from the Instituto Superior de CienciasMedica de la Havana, Cuba. He became a nurse in the USA in 2011, he became an Advance Practitioner Registered Nurse (APRN) in 2015 in the United States. He is currently pursuing a DNP degree. Ruben is working at Banyan Health System, a leading community-based organization in combatting the opioid overdose epidemic for the last eight years. As part of his DNP project he has undertaken a literature review on the topic of opioid epidemic
Candidate biomarkers and CSF Profiles for Alzheimer’s Disease and CADASIL (Vascular Dementia vs. Alzheimer’s Disease)

Bowirrat Abdalla
An-Najah National University, Neurosciences and Human Genetics, Israel

The differential diagnosis between Alzheimer’s Disease (AD) and Vascular Dementia (VaD) are still roughly problematic in clinical practice, despite the widely used diagnostic criteria to differentiate between the two disorders. There is an increasing evidence that cerebrovascular dysfunction plays a role not only in vascular causes of cognitive alterations but also in AD. Cognitively patients, with AD, show sometimes mixed degrees of associated vascular lesions in 30-60% of AD cases. In opposition, AD pathology may be present in 40%-80% of VaD patients, thus impeding diagnosis accuracy. Therefore, to eliminate this bewilderment and discrepancies in the diagnosis between the AD and VaD, it is worthy to shed light firstly on a disease that is a microangiopathy and represents VaD with clear milestones and features as is the case of cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy (CADASIL). Studying CADASIL CSF biomarkers profile, will help in the differential diagnosis between both diseases sharing the coexisting neurodegeneration, furthermore, CADASIL is a dominantly inherited mid-adult life disorder causing ischemic strokes, which belongs to vasculopathies and symbolizes a genuine prototype of VaD that provides a valuable opportunity for studying its CSF biomarkers. Secondly, examining and evaluating the CSF biomarkers of AD compared to that of CADASIL.

The pathogenesis similarities between CADASIL and early onset AD affecting the small vessels of the brain have suggested plausible molecular mechanisms involved in vascular damage and their impact on brain function and also come from the fact that in both diseases genetic mutations occur. CADASIL mutations in NOTCH3 gene generate toxic protein aggregates (Granular Osmiophilic Material- GOM) in the vicinity of vascular smooth muscle cells (VSMCs) causing degeneration and loss of VSMCs in small arteries and arterioles of white matter regions of the brain that lead to dementia, similar to those attributed to mutant forms of the Amyloid Precursor proteins (APP) and presenilins genes who cause overproduction and accumulations of the toxic Aβ42 protein in the brain and collapse of Aβ42 clearance mechanisms in AD. Despite the presumed pathological similarities, substantial differences between the two phenomena may exist especially in the CSF neurochemical phenotypes. To examine this aspect, which may help in the differential diagnosis, we carried out this review.

Biography
Bowirrat Abdalla has completed his MD from Rome University, his residency in Clinica lNeurology from London University, UK, his PhD from Tel-Aviv University, Israel and post doctoral studies from Boston University, USA. He received his Professorship from Boston University. He has published more than 105 manuscript and 6 books in reputed journals and has been serving as an editorial board member of repute. Further more, he received many international awards including the BruceS. Schoenberg international award in Neuro epidemiology of AD from the American Academy of Neurology
CADASIL gene located at Chromosome 19p13.2.

Figure 1. This figure was made according to data from previous studies and from the literature to illustrate the variations in level of the classical biomarkers (Aß42, t-tau, and P-tau), altered generally in the AD, VaD, Stroke and CADASIL. Levels measured by (pg/ml) for all the biomarkers, showed Aß42 with lowest level in AD followed by stroke and moderately decreased in VaD. Total-tau levels are highly increased in stroke followed by AD. On the contrary in VaD, studies on these CSF biomarkers showed conflicting results: T-tau levels have been reported to be increased, normal or intermediate, but in any case much lower than in AD. Phosphorylated-tau (P-tau) levels are highly increased in AD followed by stroke but levels of (P-tau) have been reported to be either normal or increased in VaD. In CADASIL total-tau levels and P-tau levels are normal, and Aß42 are markedly decreased and considerably overlapped with AD.
Scientific Abstracts
Day 1

Scholars International Conference on
Advanced Nursing Care and Research
and
Scholars International Conference on
Alzheimer's, Dementia Care and Neuropsychiatry

November 20-21, 2019 | Tokyo, Japan
An ecological approach to obesity in Mexican American children

Elizabeth Reifsnider, Mihyun Jeong and Priyanka Chatterjee
Arizona State University, USA

Introduction: The aims of this study were to explore the risk factors that contribute to obesity in obese Mexican American children compared with Mexican American normal weight children, using a cross-sectional design.

Body of Abstract: Childhood obesity is a substantial health disease and the health care burden for obesity has continuously increased. The obesity prevalence rate among Hispanic boys ages 2-19 is 28%, higher than any other ethnic group and higher than Hispanic girls of the same age. Obesity rates of children aged 2 through 5 years has more than doubled over the past three decades. Two groups of children were compared to discern the risk factors for obesity. The research occurred in a county health department in South Texas along the border with Mexico. The sample consisted of 55 Mexican American dyads (mother/child). The following categories, based on the Ecological Model of Growth, were used to collect data: anthropometrics, home environment, and dietary data from the microsystem (child and mother) and data on family activities outside the home (mesosystem).

Conclusion: Obese children played outside less, drank more sugar-sweetened beverages, bottle-fed for a longer time, were in daycare more often, and had more employed mothers than did normal weight children. Hierarchical logistic regression revealed only maternal employment significantly predictive of childhood obesity in this sample. Involvement of other family members in home preparation of healthy meals, childcare, and high quality daycare may mitigate potential negative effects of largely low-income maternal employment on child body size.

Biography
Elizabeth Reifsnider, an endowed professor at Arizona State University, is an experienced public health nurse and researcher who has conducted funded research on children's growth and health for many years. Understanding cultural differences in childrearing is of particular interest. She is a Fellow of the American Association of Nurse Practitioners and a Fellow of the American Academy of Nursing. She has published 56 journal articles and led research teams funded by the National Institute of Nursing Research (NINR) and the National Institute of Diabetes, Digestive, and Kidney Disease (NIDDK) of the National Institutes of Health.
Food insecurity is an important Social Determinant of Health associated with poor health outcome has been identified as a significant Australian public health issue at national and state levels. It has been shown that food insecurity affects physical, mental and emotional health and well-being of families and individuals. Food insecurity, more prevalent in developing countries, has been identified as a growing problem in Australia.

Community health nurses, are at the forefront of providing health care during each stage of the life cycle. They are pivotal in assessing client need and make appropriate referrals across many dimensions. They are in a key position to identify food insecurity with clients, including families with children, those with chronic and complex health care needs, and from other vulnerable groups.

This qualitative, descriptive pilot study aimed to discuss and explore current methods used by community health nurses working in Sydney to identify food security in their clients, and the role of nurses. It aimed to gain insight into how nursing students during work experience on community placements perceive and understand food insecurity as a social determinant. Student nurses are expected to develop skills in critical thinking and evidence based practice, learning within complex policy and education frameworks in order to integrate theory with practice. The presentation will outline the methods used, the results, with discussion about the perceptions of the student nurses, acknowledge current emerging trends in food security as a social determinant, and, in this context, make recommendations regarding education and client assessment.

Biography

Lynette Saville is a Masters degree holder in Applied Science (Environmental Health. She is a registered nurse with extensive past experience working in acute clinical areas (ICU, CCU, ED, general med/surg) in major hospitals in Australia. She worked in community health, health promotion, and food security where she ran the award winning Hawkesbury Food Program over many years. Gained extensive experience as casual academic teaching students in health, nutrition and environmental health. She is employed until recently as university lecturer in health science teaching nursing and paramedic students. Currently she employed as sessional academic teaching nurses in Sydney. She is also a member of Medical Association for Prevention of War, current NSW co-coordinator and Vice President. She elected as Councilor in local government.
The role of inflammation in Alzheimer's Disease: Lessons learned & future therapeutic prospects

Jessica W Barnes
20Lighter, USA

Treatment of Alzheimer's Disease (AD) remains challenging, with several high profile Phase 3 clinical trial failures over the past decade. Significant effort has been spent researching the physiological etiology of the pathogenesis of AD, with neuro inflammatory mechanisms emerging as a major player. This presentation will review the big picture of what is known about the role Neuro- Inflammation in development and progression of AD, current thinking about the role of the gut- brain axis in AD, and highlight the most promising new (and not-so-new) inflammatory targets & anti-inflammatory strategies for future therapeutic intervention. This discussion will include pharmacologic drug targets, and also complimentary anti-inflammatory strategies with potential positive impact on the spectrum of AD.

Biography
Jessica Barnes graduated from Worcester Polytechnic Institute with a B.S. in Biotechnology, and earned her PhD in Molecular Neuroscience from the University of Illinois at Urbana-Champaign. She was a fellow in the department of pediatric neuro-oncology at the Dana-Farber Cancer Institute and Children's Hospital Boston under the mentorship of Dr. Judah Folkman. Her roles have including CEO/Co-founder of the 20Lighter Program, Senior Consultant to Valeritas, Inc., Director of New Ventures at Access BridgeGap Ventures, Senior Science Officer at Summer Street Research Partners, and Vice President in MEDACorp at Leerink Swann. Additionally, she provides Business & Corporate Development consulting services to biotech & med device companies.
Automating brain improvement to treat Alzheimer’s Dementia

Shanilka Weerakoon, Yasith Dissnayake, Malaka Shanthakumara, Prasansani Thilakasiri and Chathurangika Kahandawaarachchi
SLIIT, Sri Lanka

Alzheimer’s Disease is a common cause of Dementia which leads to significant loss of memory and other cognitive abilities that interfere with daily activities. Around 50 million people worldwide suffer from Dementia, more than 60% of patients identified from low and middle-income countries. According to the National Health Statistics Center, Alzheimer’s Disease is one of the causes of death for the elderly which has no cure. Therefore, managing the development of the disease is more important for the well-being of the patient. It is therefore important to develop better tools for assessing the severity and development of diseases and improving treatment, motivation and rehabilitation. This research presents an online game-based software application for Alzheimer’s /dementia pared with a physical tool. According to literature there are number of basic procedures for interactive games used for dementia. It is important to anticipate the importance of early diagnosis to increase treatment and therapeutic benefits. However, in Sri Lanka, there is less attention to the disease due to cultural reasons and the costs associated with the disease management process. With limited resources, most activities are paper based administer by the healthcare providers. This leads to a comparison with the patient’s original results. To solve this problem, researchers have proposed an online solution that is available without going to a specific facility. Moreover, Sri Lanka does not have a computer based online application tool that patients can use to keep track of relevant information and develop their memory/ skills. Under the supervision of psychiatrists, the research/development team provided an online web program with proposed activities for specific areas of Alzheimer’s Disease. At the end of each game, the results are stored on the database and the system generates reports. Health care providers and doctors can monitor the patient’s progress.

Biography
Shanilka Weerakoon is an Information Systems Engineering Undergraduate student at Sri Lanka Institute of Information Technology in Sri Lanka.
Human balance control system using galvanic vestibular

Tahoura Nedaee
Azizollah Pezeshki High School for Talented Students, Iran

One of the diseases that many people are suffering from is ataxia or disability to maintain balance. A lot of elderly and weak people are suffering from disability to maintain balance, due to decreased sensory and motor ability caused by degeneration. It may cause them to fall down, and lead to more serious damages, even death. Moreover, falling down, increases the medical expenses incurred on the health system, due to the serious consequences. So it seems necessary to prevent these consequences.

For this purpose, a system was designed and built that by controlling the middle ear, which plays a special role in balance, helps to prevent falls, and allows the patients to maintain balance. Required feedbacks to control static and motor balance, includes Sense of vision, vestibular system, inner ear and somatosensory system. Different studies and different solutions have been performed to maintain balance. Such as foot arch supporters, Textured or bumpy surfaces, special shoes, etc. But this system’s process, designed to maintain body balance in people with balance control disabilities, is done by affecting the middle ear.

After detecting the patient’s head position by this system, it will send messages to the brain. By detecting the messages by the brain, the patient will be able to control his or her balance. Previously used balance control equipment and methods, can be replaced by this system.

Biography
Tahoura Nedaee is an Iranian Inventor. Her first invention “human balance control system for middle ear disease” earned her Gold medal of ITE international invention show, London, August 2019 and Gold medal of 43rd International invention show, Croatia, November 2018. She is also an earned outstanding innovation award for: human balance control system for middle ear disease, the commission of higher education, Thailand, November 2018. Her further awards are First prize in national spaghetti Bridge, Tehran university, Iran, 2017; First prize in theater student competition, Tehran, Iran, 2017; First prize in theater student competition, Tehran, Iran, 2018; First prize in piano student competition, Tehran, Iran, 2017 and First prize in guitar student competition, Tehran, Iran, 2017.
“sound of the lost souls” short film screening

Melihat Ağgül
Ataturk Education and Research Hospital Community Mental Health Service, Turkey

Sound of the lost souls was made by volunteer young friends outside the health area with three clients. The name of the film was designated by clients. Stigma was also important in term of work. The end of the film they were affected who are the relatives of the family. They stated that the first time they were considered important themselves by another people. In the film they mentioned about what they did when the day was starting. It was a three different life. Their cultural characteristic and gender were different from each other. They were live in the metropolis. They shared to what they lived within community. They were in communication with community mental health center. Their hobbies were different. Mostly they had a mother. The mother of the family members who cared for chronic diseases. Frequently, the clients complained about couldn't find a job and also couldn't work in any job. Even if they find a job, they complain about failing to achieve success. In public they try to say we don't have any problems, meanwhile some clients don't want to show their faces. This situation indicate that how intense the stigma is in the society. They mentioned about they have difficulty at transportation. They spoke of what they do in the their home, how they sped time. they spoke of coupled with their future plan and the general attitude of society. Mentioned about the loss of the disease on their lives. The names of our families and clients were not written because they had their own demands. They shared their own house, private life with us. For this reason big thanks to them. While we were showing the short film to them their reactions were like hole different short films and this is so imagional. If our labours could make awareness it is such a honor for us. We are believe in that this labours can be useful only in case of we shared this subject in public. We are thinking that we will reach more people's awareness with yoursupports.

Biography
Melihat Ağgül was born in 1966 at Izmir. She studied primary school at Kiraz, and health college in Izmir. She had two-years degree at Anatolian University. She took office at 1985. She have been working at Atatürk Education and Research Hospital Community Mental Health Service for 3 years. She had Psychiatric Nursing Certificate of Ministry of Health in 2018. She had 5 different short-films which she created the scenario and production: You are Not Alone (About Community Mental Health Studies), You are not Alone Farewell (About Community Mental Health Studies), Mark of Teos (Teos Short Film Factory), Simulakr (Artlen Fotograph Facory), The Sound of Lost Souls (The topic is about schizophrenia).
Effectiveness of electronic learning module in implementing ventilator-associated pneumonia prevention measures among intensive care unit nurses

Taghreed Hamza Hawsawi
MOH, Kingdom of Saudi Arabia

**Background:** One of the vital principles for preventing Ventilator Associated Pneumonia (VAP) in the hospital is equipping healthcare worker by adequate knowledge regarding VAP prevention measures. In which integration of electronic education into nursing education flowing growing awareness all-over the world help ICU nurses to incorporate evidence based practice into daily care for critical ill patient.

**Aim of study:** To evaluate the effectiveness of electronic learning module in implementation of ventilator-associated pneumonia prevention measures among intensive care unit nurses.

**Design of the study:** Quasi experimental design to test the casual effect of E-learning module on the ICU nurses.

**Setting:** The current study will be conducted in intensive care unit of Al Noor Specialist Hospital at Makkah.

**Sample of the study:** Convenience sample of ICU nurses.

**The tool of this study:** This study will be conducted by using two tools; knowledge assessment tool and VAP bundle checklist.

**Result:** As it is shown in the chapter four, nurses’ knowledge before they were exposed to any educational module was graded as average 72.66%, the scores was improved after training module to be high 96.2% meaning that their knowledge has been noticeably improved. A slight drop in their overall knowledge in post test 1 and 2 to reach 91.32%. However, differences in their knowledge in pre and post test was highly significant (P≤0.005). Performance checklist tool was used to measure nurses’ performance pre-and post the education module. Their poor performance was apparent before exposure to module (61.73%±5.97), while show tremendous improvement to score(>99%±5.97) in the last observation. The difference between pre- and posttest was highly significant (P>0.005).

**Conclusion:** The study revealed that e-learning module in educating nurses about VAP prevention approaches, were considerably effective. This was highlighted by high mean scores for VAP knowledge and practice after exposure to VAP prevention module.

**Recommendation:** Further research about VAP prevention measures, with focuses on KAP model for assessing nurses knowledge, attitude and practice before and after exposure to module.
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**Scientific Abstracts**

**Day 2**
Take me home- Allow me to die peacefully?

Dhastagir Sultan Sheriff
Benghazi University, Libya

End of life decision has personal, social, ethical and legal domains. The patient with very poor prognosis and chronic painful life longs to die in a peaceful environment. The real pain experienced by the patient along with staying in a grim Intensive Care Unit (ICU) adds pressure to the patient and makes him/her long for a peaceful death. Few patients want to die in their native place among known people and relatives. The hospital or ward or ICU cannot provide such an ambience for the patient. The specialist nurse is very familiar with the patients, treats the patient with care and understanding. The staff nurse could give the required physical and psychological support to the patient.

The nurse could be trained further to take care of such a patient by taking into account the following possible factors:

- symptom prevention and relief;
- attention to emotional and spiritual needs and goals;
- care for the patient and family as a unit;
- sensitive communication, goal setting, and advance planning;
- interdisciplinary care; and
- services appropriate to the various settings and ways in which people die.

The ways and means of making a patient to die with dignity without fear could be the social responsibility of the esteemed Nursing personnel.

Biography

Dhastagir Sultan Sheriff received his Masters and Doctoral Degree, in 1971 and 1977 respectively, in Medical Biochemistry, Chennai, India. Devoted to teaching, he taught in medical schools for 35 years, and visited 45 countries while doing so. Dr. Sheriff attended 46 international conferences and organized 2 international conferences in medical ethics in India. He is a life member of European Society for Human Reproduction and Early Human Development, he is also a member of American Association of Clinical Chemistry, Association of physiologists and pharmacologists of India, member of National Academy of Medical Sciences, New Delhi, and resource person for UNESCO for Medical and Bioethics. Dr. Sheriff has authored five books including a text book on Medical Biochemistry with additional interest in Human Sexology. He had editorials written in British Journal of Sexology, Journal of Royal Society of Medicine, Postgraduate Medicine, Scientist, former Rotarian, Citizen Ambassador, and was selected for Ford Foundation Fellowship.
A Novel Non-invasive approach for measuring upper airway collapsibility in mice

Nishimura Y 1, 2, Arias R S 1, Pho H 1, Pham L V 1, Curado, T F 1, Polotsky V Y 1 and Schwartz A R 1

1Johns Hopkins University, USA
2Teikyo University Chiba Medical Center, Japan

Introduction: Invasive procedures were previously developed for measuring pharyngeal collapsibility in rodents during expiration, when declining neuromuscular activity makes the airway unstable. We developed a non-invasive approach for streamlining collapsibility measurements by characterizing responses in physiologic markers of dynamic expiratory airflow obstruction to negative nasal pressure challenges.

Methods: Anesthetized mice were instrumented to monitor upper airway pressure-flow relationships with head-out plethysmography while nasal pressure was ramped down from ~ +5 to −20 cm H2O over several breaths. Inspiratory and expiratory flow, volume, and timing characteristics were assessed breath-wise. Critical pressure (Pcrit) was estimated at transitions in expiratory amplitude and timing parameters, and compared to gold standard Pcrit measurements when nasal and tracheal pressures diverged during expiration. Predictions equations were constructed in a development data set (n = 8) and applied prospectively to a validation data set (n = 16) to estimate gold standard Pcrit.

Results: The development data demonstrated that abrupt reversals in expiratory duration and tidal volume during nasal pressure ramps predicted gold standard Pcrit measurements. After applying regression equations from the development to a validation dataset, we found that a combination of expiratory amplitude and timing parameters proved to be robust predictors of gold standard Pcrit with minimal bias and narrow confidence intervals.

Conclusion: Markers of expiratory airflow obstruction can be used to model upper airway collapsibility, and can provide sensitive measures of changes in airway collapsibility in rodents. This approach streamlines repeated non-invasive Pcrit measurements, and facilitates studies examining the impact of genetic, environmental, and pharmacologic factors on upper airway control.
Identification of diagnostic biomarker for mild cognitive impairmen in Eastern U.P. and Bihar population

Vineeta Singh, Vijaya NathMishra and M K Thakur
Banaras Hindu University, India

Previous study provide ample evidence that pathological changes associated with major cognitive decline begins 10-25 years before the onset of impairment and can be diagnosed at Mild Cognitive Impairment (MCI) stage. It is difficult to treat major cognitive impairment and currently available therapeutics is targeted on suppression rather than prevention of disease. Therefore identification of Major cognitive impairment in its earlier form can help in prevention of progression of the disease. MCI is characterized by multi-factorial etiology not completely understood to date. Metabolite analysis allows monitoring the perturbation in pool of metabolites which reflect the changes downstream of genomic, transcriptomic and proteomic fluctuations. Metabolite analysis represent an accurate biochemical profile of an organism in health and disease aiding to further understanding of the alteration in complex biological network in MCI. In the present study we perform metabolite analysis on MCI individual. We screened elderly MCI individual using neuropsychological screening such as, Hindi Mental Screening Examination (HMSE) and Montreal Cognitive Assessment (MOCA). Metabolite analysis was performed using H1 NMR with CPMG-screening on blood plasma of MCI and healthy age matched control individuals. After H1 NMR analysis some perturbation of metabolites was observed. These perturbation include quantitative alteration of choline, formate, creatine, alanine and histidine. These metabolite alterationare directly or indirectly involved in MCI pathogenesis and used as diagnostic marker for identification of MCI.
Lack of Love and Iron, The Two Causes of Alzheimer's

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Objective: by the lack of initiative by force (Faith) Iron man lives. Iron deficiency causes anemia, anemia causes dementia, Alzheimer dementia and Alzheimer's produces cognitive impairment in memory produces bases. Well hear him. The Iron Will Alkaline, the answer is Yes.

Methodology: on the basis of Love and the use of Iron and its allies, which are the B vitamins, Vitamin C, E and vitamin A. It is necessary to remember that there is to try to fight the greatest sustenance Anemia in all its contrarestantes.

Conclusion: The theory focuses on the oxygenation of the blood, which must be done, where the Warburg Alkaline Diet is demonstrated, among other factors it is necessary to emphasize the oxygenation that consists of the mental and physical, which is reduced in Sleeping correctly, Warburg Alkaline Diet, Drink Enough Water, Make Walks or Moderate Exercises, Comfort and Drink Iron, Vitamin C, Vitamin E, Complex B and Vitamin A. All this consists in Producing New Oxygen.
Hyperacute bilateral thalamic infarction undetected on initial diffusion weighted magnetic resonance imaging: A case report

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In patients with hyperacute infarctions, there are situations in which initial Diffusion-Weighted Magnetic Resonance Imaging (DW MRI) fails to explain the patient's neurological status. In the present case, the patient visited the emergency room approximately 15 minutes after the onset of symptoms, and his initial neurological status was not explained by DW MRI. We injected intravenous tissue Plasminogen Activator (tPA) based on the results of non-enhanced brain computed tomography. However, the degree of neurological improvement was insignificant and follow up DW MRI showed multiple acute infarctions in the pons, midbrain, and bilateral thalamus. This article summarizes initial management and clinical outcome of a rare case of acute bilateral thalamic infarction.
Investigation of long-term potentiation- and depression-induced tau phosphorylation in rats with starch based sugar

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Objective: A lot of evidence supports the hypothesis that the mechanism of memory trace formation at the cellular level is Long-Term Potentiation (LTP) and Long-Term Depression (LTD). LTP and LTD are initiated postsynaptically by the activation of N-methyl-d-Aspartate (NMDA) receptors (NMDARs), resulting in Ca2+ influx and the subsequent activation of several kinases [1]. Studies in which experimental animals were fed with fructose for a long time showed that insulin resistance occurred and this was associated with poor performance in hippocampus dependent learning [2]. We therefore wanted to study that LTP/LTD-related modifications of tau phosphorylation could be, or not be, changed with High-Fructose Corn Syrup consumption (HFCS).

Methods: The study was performed on sixty (100 ± 15 gr; 20 / group) 21-day old male Wistar Albino rats obtained from Erciyes University Experimental Animal Research Center. On the 21st day, the male rats leaving their mothers are fed with unrestricted standard rat chow and tap water, HFCS solution (8%; 0.24 Kcal / mL) or sucrose solution (10%, 0.4 Kcal / mL) for at least 21 days. The field potentials were recorded from the right dentate gyrus with stimulation of the right medial perforant path. Long-Term Potentiation (LTP) and Long-Term Depression (LTD) were induced by high and low frequency stimulation (HFS and LFS), respectively. Total and phosphorylated forms of Tau was measured in the hippocampus at least 60 min after induction of plasticity.

Results: The input / output curves of the study groups did not differ (P> 0.05). After 1 hour of induction, LTD was 92±8% and 90±5% of the pre-LFS value in the control and sucrose groups, while LTP was 121±4% and 119±5%, respectively. There was no statistical significance between these groups (P> 0.05). In the group fed with HFCS, the LFS and HFS did not induce LTP or LTD responses. In control and sucrose groups, it was found that the induced LTD was accompanied by spike potentiation (154 ± 8% and 128 ± 15%, respectively) and this potentiation was not observed in the HFCS group (P <0.01). Western blot experiments indicated that tau protein was hyperphosphorylated at ser416 epitope upon LTP but rather hypophosphorylated at thr231 epitope upon LTP in the whole hippocampus of HFCS-fed rats. These changes concomitantly occurred with a notable alterations in the levels of total Tau.

Conclusion: These findings suggest that high fructose-containing diets may disrupt the balance between two forms of synaptic plasticity and thus adversely affect learning processes [3]. Epitope specific tau phosphorylation had been emphasized for Alzheimer’s Disease-like learning deficit due to feeding with HFSC.

Biography
Yeliz Tasci Completed master degree at the age of 28 in 2018 and now studying for PHD at Erciyes University, Turkey. Yeliz Tasci is currently working as a biologist in Kayseri Sugar Factory, Turkey.
Posters

Scholars International Conference on
Advanced Nursing Care and Research
and
Scholars International Conference on
Alzheimer's, Dementia Care and
Neuropsychiatry

November 20-21, 2019 | Tokyo, Japan
Comparison of foreign care workers in dementia care facilities: A study using text data mining

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Purpose: The present study aimed to explore different studies on elderly dementia care provided by foreign care workers in dementia care facilities through PubMed and Japan Medical Abstract Society searches and text data mining analysis.

Methods: We used PubMed and Japan Medical Abstract Society, a publicly available on-line database.

PubMed: PubMed comprises more than 22 million citations for biomedical literature from MEDLINE, life science journals, and online books. Thesaurus words in PubMed articles were analyzed using commercially available text-mining software “Trend Search” developed by FUJITSU. The analysis provides a concept map of relational words, with the strength of the relation between words reflected in the line size and distance between them. For ethical purposes, articles were anonymized for analysis.

Japan Medical Abstract Society: Japan Medical Abstract Society Service by NPO Japan Medical Abstracts Society is one of the most famous databases that include Japanese medical and nursing articles. This database consists of about 5,000 journals, and posts 6,300,000 articles with thesaurus structure.

Ethical considerations: Only anonymous articles were selected.

Results and Conclusions

Results of PubMed: The publication search yielded 22 articles with terminology hits (1999-2018). Mapping yielded the three wedges of “Factor” “Support” “to patients”.

Results of Japan Medical Abstract Society: The publication search yielded 26 articles with terminology hits (2019-2015). Mapping yielded the two wedges of “Care giver” “Support”. Based on the results of text data

Therefore, based on the results of text data mining, we summarized studies on foreign care workers in dementia care facilities, as follows:

1. To examine factors associated with psychological burden of care for elderly people with Alzheimer in Australia and China activity.

2. To illuminate support for elderly people with dementia.

3. To illuminate preferred treatments for elderly people with Alzheimer in Europe.
Babesia parasites are naturally transmitted by ixodid ticks; the parasites invade erythrocytes, causing babesiosis in animals and humans. The disease can be clinically silent or can progress to a fulminant malaria-like disease. Of the 4 characterized Babesia species involved, B. microti is the one that mostly infects humans and is found worldwide; most cases occur in the United States (1). Babesiosis in humans in Africa has rarely been reported (2–4), but the similarity to malaria, in symptoms and appearance in blood smears, may confuse diagnosis and result in underreporting (5,6).

In March 2014, a 43-year-old woman with fever, chills, fatigue, and general malaise was admitted to the General Hospital of Douala, Douala, Cameroon. Giemsa-stained blood smears showed intraerythrocytic parasites, leading to a diagnosis of malaria. The patient, who had previously had malaria, was given dihydroartemisinin plus primaquine, improved slightly, and was discharged. A few days later, she was admitted to the Hospital La Paz in Bata, Equatorial Guinea, with similar symptoms. Over an 8-month period, she received 6 consecutive diagnoses of malaria; treatment with quinine, artemether, atovaquone/proguanil, or artesunate/lumefantrine led to no clear improvement. Because all antimalarial therapies had failed, the patient's case was reevaluated.

Chest radiographs and abdominal ultrasonograms were unremarkable. The patient had an intact spleen of normal size and had not received any blood products. Laboratory findings were unremarkable except for a high proportion of neutrophils (86%) (Table). New Giemsa-stained thin blood smears were examined and, in addition to ring forms, rare tetrads (Maltese crosses, which do not occur in Plasmodium infections) were observed. A diagnosis of babesiosis with a parasitemia of >0.5% was determined, and the patient then received oral azithromycin (500 mg/d) and atovaquone/proguanil (250mg/100mg every 8hr). Untreated blood was sent to the National Center for Microbiology and Hospital La Paz, both in Spain, where Babesia spp., but not Plasmodium spp., were detected by PCR (online Technical Appendix, https://wwwnc.cdc.gov/EID/article/24/8/18-0280-Techapp1.pdf).

The partial amplified product was cloned by using TOPO TA vector (ThermoFisher Scientific, Inc., Carlsbad, CA, USA) and sequenced. The short nucleotide sequence of a 157-bp fragment of the B. microti 18S RNA gene (online Technical Appendix) showed 100% identity with the B. microti Munich type (GenBank accession nos: AB366158, AY789075, AB071177, KT271759, and KX758442). However, precise identification of the strain of parasite involved would have required larger fragments of the 18S rRNA gene. Attempts to amplify the β-tubulin gene were not successful.

One week after diagnosis and commencement of specific treatment, the patient traveled to Spain and was admitted to the Unit for Tropical Diseases at the tertiary Hospital La Paz in Madrid, where diagnostic tests for Babesia spp., Plasmodium spp., and other pathogens were conducted. An indirect immunofluorescence assay (IFA) (Fuller Laboratories, Fullerton, CA, USA) obtained B. microti titers of 128. Not surprisingly, anti–Plasmodium falciparum antibodies were also detected (titer 640) by IFA by a Falciparum-Spot IF kit (bioMérieux S.A., Lyon, France). Diagnostic test results were negative for Schistosoma spp., Strongyloides stercoralis, Trypanosoma brucei, Leishmania, Borrelia, Anaplasma, filariae, Treponema pallidum, hepatitis viruses (A, B, and C), HIV, and dengue virus. Treatment for babesiosis was continued for another 14 days, after which PCR results were negative and the patient's general condition had clearly improved. One year later, PCRs indicated that she was still free of Babesia parasites. We do not have solid evidence of the source of this patient's babesiosis. Every year since 2001, she spent a week in rural areas in Spain, where at least 1 case of human babesiosis caused by B. microti (also “Munich” type) has been recorded (7). However, initial symptoms occurred while the patient was in Equatorial Guinea, having arrived there several months earlier from Valencia, Spain, where the B. microti vectors in Europe, Ixodes ricinus ticks, are not known to occur. However, no data are available on the presence of Ixodes ticks or of vertebrate reservoirs infected with B. microti in Equatorial Guinea. This lack of information, together with the fact that the patient traveled to different locations inside and outside Africa, makes it difficult to determine whether the infection was acquired in Equatorial Guinea.
In such regions, where infrastructure and resources are limited, molecular and serologic diagnostic methods are usually lacking, and diagnoses of febrile diseases are based on symptoms, physical findings at examination, and microscopy. These limitations, and the similarities between malaria and babesiosis, are sufficient to explain why this patient's babesiosis was initially misdiagnosed as malaria. Because of this misdiagnosis, the patient was treated for malaria 6 times over 8 months. An accurate diagnosis and appropriate treatment for babesiosis was necessary to end this sequence of mistakes. Increased awareness of the possibility of babesiosis, together with appropriate diagnosis, may result in the discovery of more cases of babesiosis in malaria-endemic areas.
Accepted Abstracts

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and

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Neuropsychiatry

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The purpose of this paper is to define Disruptive Innovation (DI), discuss two types of innovations: sustaining and disruptive, describe the characteristics of DI: Convenience, Accessibility, Simplicity, Affordability, and Sustainability (CASAS), compare and contrast the characteristics of disruptive innovation with interdisciplinary diversity research, define challenges and opportunities in DI, and synthesize DI in public health and sociocultural research, education, and practice.

Disruptive innovation is a global phenomenon that can be harnessed for multidisciplinary diversity research to promote health and transform healthcare through new models of delivery systems. Our changing world and the increasing demands for improvements in health care across the globe require dramatic strategies that change how we design and deliver healthcare to achieve quality health outcomes. The emerging issues of diversity within healthcare ranging from issues of care, to diversity in the workforce to changes in leadership all point to the need for rapid change and thus set the stage for disruptive innovation.

Globally, the confluence of an aging population, an increase in chronic disease, and a shortage of healthcare professionals create a need for innovative models and the application of technology to provide health services. Across the globe, the rise of non-communicable chronic diseases, associated mental health problems, and the transmission of new diseases, will require new ways of thinking and responding to address these challenges and providing access to healthcare solutions. Thus, theories, models and frameworks for disruptive innovation can provide a valuable perspective for issues related to diversity and the changing landscape within healthcare.

Healthcare has evolved differently across the globe resulting in opportunities for innovation, collaboration, and practice. Disruptive innovation can be thought of as a product, service performance, or process that enables users to shift a paradigm in the way they think, interact with each other, engage with emerging technology, and adopt a worldview. Innovation has the potential to accelerate change and improve health globally, but the best way to provide innovation is to include and develop members from a variety of healthcare professionals within the innovation process. Including those who are impacted by care as well as those who might use products designed to assist with the delivery of care should be included as partners in innovation development groups.

In matters of global health and literacy, the role of frugal innovation in personalized health and other types of technology is limitless. Examples of this include digital tools for electronic-based surveillance, online training programs, and applications of information and other communication technologies. Challenges arise in disruptive innovation, at the institutional, professional, national, and international levels.

Healthcare leaders need to actively engage in fostering frugal disruptive innovations by harnessing technology in solving real-world problems. Thus, it is the willingness to accommodate change, build bridges, collaborate and foster diversity that has the potential to create innovations that can disrupt existing paradigms in a manner that improves healthcare outcomes across the diverse spectrum of patient populations both locally and globally.
Exosomal biomarkers in Alzheimer’s Disease

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Extracellular Vesicles (EVs) including exosomes are nanosized particles that are secreted by all cell types and are present in all bodily fluids. They contain bioactive molecules including proteins, mRNA, miRNA, and lipids which are used for signaling and transportation between different brain regions and between individuals. Individuals with Down syndrome (DS) exhibit Alzheimer’s Disease (AD) neuropathology and dementia in their 30s-50s, with close to 90% progressing to dementia. Reliable blood biomarkers are lacking and could improve early diagnosis and confirm effects of experimental therapeutics. We have examined the presence of Alzheimer’s Disease (AD)-related biomarkers in the cargo of exosomes from people with DS, and compared to age-matched controls and patients with AD. Similar biomarkers have also been examined in exosomes from athletes with one or several concussions, to determine whether repeated mild traumatic Brain Injuries (mTBIs) lead to elevated brain injury biomarkers long-term or at different intervals post-concussion. Further, we have demonstrated that exosomes derived from patients with DS and AD can develop tangles containing hyperphosphorylated Tau (p-Tau) when injected into the hippocampus of wildtype mice. These findings suggest that neuron-derived exosomes can be developed into a novel and reliable biomarker method for neurodegenerative disease, and that AD pathology can spread from exosomes into the brain between individuals following injection. Thus, the novel exosome methodology can provide new answers as to how AD pathology can spread between adjacent brain regions. This work was funded by the National Institutes on Aging and the Alzheimer Association.
Low-intensity magnetic brain stimulation improves cognitive function and hippocampal structure in PS1M146V Alzheimer's Disease mice

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Drug treatments for neurodegenerative diseases, including Alzheimer's Disease (AD), have limited effectiveness. Thus, the emergence of non-invasive techniques to modify brain function is of critical importance. One such technique employs electromagnetic stimulation, repetitive transcranial Magnetic CStimulation (rTMS) which modulate cortical excitability and induces some short-term benefits to cognition and behaviour. However, there are no agreed stimulation protocols (location for stimulation, timing, frequency) for AD. To explore possible stimulation parameters for treating AD, we applied a range of rTMS protocols at low-intensity (LI-rTMS) to the hippocampal region of transgenic presenilin-1 (PS1) knock-in mice expressing the M146V mutation. These mice are a model of AD: They show reduced hippocampal neurogenesis and mushroom spines, in association with spatial learning and memory deficits and increased anxiety.

Two weeks LI-rTMS (10 min/day) modified mouse behavior and hippocampal pyramidal cell morphology according to the pattern of stimulation. Excitatory patterns of LI-rTMS (Biomimetic High Frequency stimulation, BHFS; and 10Hz) increased neurogenesis and the proportion of mushroom spines, and improved episodic and spatial memory. They also increased BDNF expression and upregulated expression of neuron survival genes. In contrast, inhibitory LI-rTMS (1Hz or cTBS) did not produce these advantageous effects, and cTBS actually reduced neurogenesis and spine density. Taken together, these results indicate that LI-rTMS has great potential for treating human AD, but that identifying the appropriate stimulation parameters is of critical importance.
The impact of air pollution on the vital lung capacity of primary school students aged 10-15 years old in the summer season in Pristina

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The air we breathe has a great impact in our lives. We can live days without water and without bread, but only a few minutes without air. Everyday we breathe in and breathe out about 30,000 times, so the air we put into our lungs is of the utmost importance to be clean. Our lungs make up the largest surface of our body therefore their health should be primary (European Lung Foundation, 2015). Oxygen and air pollutants reach every cell in the body through the lungs: brain, heart, liver, kidney, etc. (Salvi & Barnes, 2009). In this research the results of the vital lung capacity (VC) of children aged 10 to 15 years old were measured with the help of Spirometer. There was also analyzed the indoor air quality in the moment where the experiment was taking place in the school environment by the Particle Scanner <0.3 micron instrument. The results show that the vital lung capacity of 131 primary school students is basically low compared to the reference values. However, the air quality in the school environment was within the reference values by knocking down the first hypothesis. The second hypothesis predicted that males have a higher vital lung capacity than females, affected by their body weight and length since men have a more developed physical body than women. Out of the results, it is found that 69% of the students spend more time in open environments. All respondents were urban residents where they were exposed to power plants, car fumes and other urban polluters. 28% of the total said they had different allergy reactions, of whom 37% stated they were allergic to dust. It is found that 64% of the respondents stay in smoking areas, which has an impact on lung health by making the participants passive smokers. It is strongly recommended to monitor the air quality in indoor spaces where children spend more time.

Biography

Melisa Blakaj has completed her BSc. at the age of 21 years from Heimerer College. She is the organizer of the 1st International Nursing Conference in Pristina, within the Research Office where she worked as a Research Assistant in 2018. Currently she is employed as a Laboratory Technician Intern at the Clinical University Centre of Kosovo.
**Piano as a Possible Intervention for Dementia**

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2Davis Senior High School, USA

**Background:** Dementia is a disorder that is characterized by a decline in cognition involving one or more cognitive domains: learning and memory, language, executive function, complex attention, perceptual-motor and social cognition. Practicing the piano involves dynamic integration of motor, perceptual, cognitive, emotive operations and social interactions.

**Objectives:** The objective of this project was to perform extensive research analysis to determine whether practicing the piano could prevent and/or treat dementia and determine the underlying neurophysiological basis.

**Methods:** We used two key terms, 'Piano' and 'Dementia,' to search Pubmed, PsycINFO and SCOPUS. We excluded articles that had 'Piano' as the name of an author. We then reviewed and identified articles that provided evidence of practicing the piano as a possible intervention for dementia.

**Results:** We identified 32 articles and found 12 controlled studies that relate to the topic of piano practice as an intervention for dementia. For dementia prevention, long term piano practice could improve memory, motor and cognitive capabilities. It could also enhance executive function and offset low education. For dementia treatment, three to six months of piano training was correlated to improvement in multiple neurophysiological aspects of older patients. Compared to control groups with no long-term piano practice, experimental groups in studies demonstrated improvement in memory, planning, concentration, and strategy maintenance compared to the control groups. To determine the underlying neurophysiological basis of the benefits of piano practice, one study discovered that piano practice strongly induced oscillatory gamma band activity, reflecting higher perceptual learning. Another study showed that piano practice can induce brain activity in specific areas as determined by a $^{15}O$-water positron emission tomography.

**Conclusion:** Controlled studies provide strong evidence that practicing the piano can possibly prevent and mitigate the symptoms of dementia, and it is associated with underlying neurophysiological changes.
Distinct response inhibition patterns in Obsessive Compulsive disorder patients and Pathological Gamblers

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Background: Obsessive-compulsive Disorder (OCD) and Pathological Gambling (PG) are common disorders. The cognitive models of OCD and PG focus on abnormalities in response inhibition. Although these functions have been studied in different PG and OCD samples, no study has compared head-to-head the response inhibition in both.

Methods: Medication-naïve OCD (n=61) and PG subjects (n=109) and healthy controls (n=131) performed CPT and Go/NoGo tasks.

Results: Compared to healthy Controls (HC), PG and OCD groups underperformed on speed and exhibited larger response time variability on the CPT and Go/NoGo tasks. Only in OCD patients, a positive correlation between omission errors and response time (RT) was observed in the CPT. In the Go/NoGo task, a negative correlation between false alarms and RT (a fast-errors trade-off) was significant only in the PG group. The HC group had greater sensitivity values (d') than the OCD and PG groups in the Go/NoGo task. The PG group displayed lower d' values and more conservative response criterion in the CPT. In addition, only the OCD group expressed a high switching cost compared to both the PG and HC groups in terms of the RT and d' values.

Conclusions: Both the PG and OCD groups demonstrated impaired response inhibition compared to the HC group. On several measures, the OCD and PG groups showed comparable impairments, while in others these were distinct. This it appears that distinct neurocognitive patterns are involved in CPT and Go/NoGo performance in OCD and PG.

Biography
Pinhas Dannon is a psychiatrist and a professor of psychiatry the Sackler Faculty of Medicine at Tel Aviv University. He is the director of Inpatient Rehabilitation Center and the Research Department at Beer Yaakov Mental Health Center. A graduate of the School of Medicine of Istanbul University, he completed training at Wolfson Medical Center and specialized training at Sheba Medical Center-Tel Hashomer. Prof. Dannon served as the head of anxiety & depression outpatient clinics at Sheba Medical Center and the head of Rehovot's Community Mental Health and Rehabilitation Clinic.

Pinhas Dannon is internationally recognized for his research and publications in the treatment of depression, panic disorder and behavioral addictions, including kleptomania, internet addiction, shopping addiction and pathological gambling. He is currently published his book “We are all addicted” in the field of addictions.
My husband had Alzheimer’s and I was his caregiver for 10 years. During that time I learned many lessons -- both while I cared for him and after his death. These are my survival lessons to share. Alzheimer’s caregiving is a lonely place. How do you come to terms with the disease yourself while trying to help your spouse face an uncertain and awful future? You must try to make the right decisions for your ill spouse -- medical, social, financial decisions. How do you honor the patient’s wishes? Take care of yourself? Help others to help you? The answers aren’t the same for everyone, but there are options that can help.

You must figure out when it’s time to tell others, and when you must become the family decision maker. Key factors for me understood his perceptual changes, visions, hallucinations, and loss of direction. I wrote a blog, met with an elder care lawyer, adopted a dog, tried (but failed) to put my spouse in resident placement. Most important to my survival was my network of supportive friends. Completely exhausted by the eighth year, my unusual solution was finding a caregiver who, with his young family, moved into my house. It was an alternate style of life, but one that worked well for all of us. We created a new support structure and in this way, I survived.
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