

13th International Conference on
Arthritis and Rheumatology

&

3rd International Conference on
Anatomy and Physiology

December 9-10, 2019 | Barcelona, Spain

Keynote Forum



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Hala El-Hadary

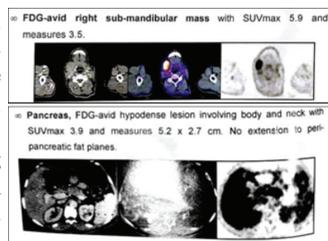
Cairo University, Egypt

IgG4-related disease misdiagnosed as cholangiocarcinoma

Immunoglobulin G4-related disease (IgG4-RD) is an immune-mediated fibro-inflammatory disease that consists of a collection of disorders that share particular pathologic, serologic, and clinical features. These disorders were previously thought to be unrelated. The most characteristic features include tumor-like swelling of involved organs, a lymphoplasmacytic infiltrate enriched in IgG4-positive plasma cells, and a variable degree of fibrosis that has a characteristic “storiform” pattern. In addition, elevated serum concentrations of IgG4 are found in 60 to 70 percent of patients with IgG4-RD.

IgG4-related sclerosing cholangitis (IgG4-SC) is a characteristic type of sclerosing cholangitis, with an unknown pathogenic mechanism. Patients with IgG4-SC display increased serum IgG4 levels and dense infiltration of IgG4-positive plasma cells with extensive fibrosis in the bile duct wall. Circular and symmetrical thickening of the bile duct wall is observed in the areas without stenosis that appear to be normal on cholangiography, as well as in the stenotic areas. IgG4-SC has been recently recognized as an IgG4-related disease. IgG4-SC is frequently associated with autoimmune pancreatitis (AIP). IgG4-related dacryoadenitis/sialadenitis and IgG4-related retroperitoneal fibrosis are also occasionally present with IgG4-SC. However, some IgG4-SC cases do not involve other organs. IgG4-SC is most common in elderly men. Obstructive jaundice is frequently observed in IgG4-SC.

A number of diseases, such as, Cystic fibrosis, Chronic obstructive Cholelithiasis, Biliary strictures (secondary to surgical trauma, chronic pancreatitis), Anastomotic strictures in liver graft, Neoplasms (benign, malignant, metastatic), Infections, hypertonic saline instillation in the bile ducts, Post-traumatic sclerosing cholangitis, Systemic vasculitis, Amyloidosis, Radiation injury, Sarcoidosis, Systemic mastocytosis, Hypereosinophilic syndrome, Hodgkin’s disease, may easily be confused with IgG4-related sclerosing cholangitis, or coexist in a patient. In this case, report a 57 years male patient presented with jaundice, fatigue, weight loss, oral moniliasis and right sided neck swelling. He was misdiagnosed as Cholangiocarcinoma.



Biography

Hala El-Hadary is a Rheumatology & Immunology consultant at faculty of medicine, Cairo University. She obtained her M.D. from faculty of medicine, Cairo University in 2012. She is the head of Rheumatology department in Dar El- Fouad hospital and El-katib hospital. She creates new pathways for improving healthcare. She has built this model after years of experience in research, evaluation, teaching and administration both in hospital and education institutions.

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Davit Tophuria

Tbilisi State Medical University, Georgia

Effect of methyltrienolone on the metabolic disorders in rat model of Alloxan-induced diabetes

Aim: The aim of the study was to investigate the restoration of metabolic imbalance related with deficiency of insulin by the exogenous androgen supplementation in the experimental model of alloxan-induced diabetes in Wistar male rats.

Methods: The experimental diabetes was induced by a single intraperitoneal administration of alloxan. The concentrations of glucose, immunoreactive insulin, corticosterone, testosterone and estradiol were examined in blood, the intensity of DNA and RNA synthesis and androgen receptor expression were studied in the liver tissue – at 15th, 30th and 45th days of alloxan-induced diabetes. The synthetic androgen methyltrienolone was administered to rats with 30-days diabetes during 15 days. All data were compared to control group received solvent.

Results: The induction of diabetes increased the concentrations of glucose, corticosterone and estradiol while decreases insulin and testosterone concentration in blood as well as DNA/RNA synthesis and androgen receptors expression in hepatocytes. The administration of exogenous androgen significantly restored the metabolic imbalance and the expression of androgen receptors and increased DNA/RNA synthesis in liver cells maintained close to control level.

Conclusion: The administration of methyltrienolone reduced the effect of “diabetic stress” and restored the hormonal dysfunction induced by alloxan.

Biography

Davit Tophuria is the Dean of International Faculty of Medicine of Tbilisi State Medical University, Senior Specialist of University Strategy Development in DAUG University and Vice-Principal in Education and Science in Dimitry Kipiani School from 2004-2007. Assoc. Professor of Human Normal Anatomy Head of International Students Academic Department from 2007-till now, He has done 85 International Publications and attended 25 International Conferences.

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Jan H T Smit

University of Namibia, Namibia

Cadaveric case reports on intussusception: From the DR to application in the ER

Statement: The use of anatomical dissections in medical training, remain a highly debated and controversial topic. Observational and diagnostic skills are extremely important to medical students from day one. Pathology (cause of death, variants or secondary's) are often seen in the Dissection Room (DR) of Anatomy Departments.

Methodology: Two male cadavers of mixed race, originating from the Western Cape area in South Africa, were dissected in Windhoek and are discussed in this study. Both of them died of "natural causes" according to their death certificates. Both were embalmed through the right common carotid artery, before dissection commenced. Cadaver one (45/14) was certified as 61 years old and cadaver two (10/17) 43 years. During routine abdominal dissection with medical students, I noticed an abnormal invagination at lower end of the ileum.

Findings/Discussion: On further investigation, a case of Intussusception (with a lead point), was identified in cadaver one. Students were allowed to observe and discuss the case before a section of the gut was removed for histology. This was their first clinical case experience which they could discuss in detail. With cadaver two, Intussusception of the lower ileum was diagnosed, but without a "lead point". Intussusception is when part of the gut loses its ability for peristalsis and the gut (with peristaltic movement) envelops the stationary section. Lead points are not always present. A variety of diseases causes altered motility of the gut wall, which can lead to intussusception. In our first case the "lead point" and cause of the intussusception, was an adenocarcinoma.

Conclusion: Intussusception of the ileum are very rarely seen. If however left untreated, it could lead to obstruction, necrosis of the gut and eventually reconstructive surgery will follow in order to save the patient.

Biography

Jan H T Smit has more than forty years' experience in training at Tertiary Institutions. He started his career in South Africa where he worked at three different Universities. He moved to Northern Ireland in 2002 where he taught at Queens University in Belfast. He has been in Namibia for the past six years as Head of the Department of Anatomy. He has a passion for teaching Anatomy and has published widely on the subject.

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Dalia S Saif

Menoufia University, Egypt

Combined (physical and medical treatment) therapy versus physical treatment alone and medical treatment alone in the management of chronic pelvic inflammatory disease

Pelvic inflammatory disease (PID) is the inflammation of the upper genital tract involving the fallopian tubes as well as the ovaries. Symptoms of PID are fever, cervical motion tenderness, lower abdominal pain, new or different discharge, painful intercourse, uterine and adnexal tenderness, and irregular menstruation. We aim to determine the therapeutic efficacy of combined shortwave diathermy and medical treatment in the management of chronic PID in comparison to either therapy alone.

Materials and methods: Sixty participants were recruited and diagnosed as chronic PID for more than 6 months by history, clinical examination, cervical swab, and ultrasonography. They were divided into three groups: Statistical analysis regarding descriptive and analytic study by SPSS version 16 on IBM compatible computer was done.

Results and findings: There was a statistically highly significant clinical improvement regarding itching, discharge and pain relief, laboratory improvement regarding the number of pus cells in cervical swab and radiological improvement regarding US parameters in the first group of patients with PID compared with the baseline and compared with other groups.

Conclusion: The greatest therapeutic efficacy can be obtained from combined physical and medical treatment compared with each line alone in the treatment of chronic PID.

Biography

Dalia S. Saif has her expertise in evaluation and passion in improving the health and wellbeing. Her open and contextual evaluation model based on responsive constructivists creates new pathways for improving healthcare. She has built this model after years of experience in research, evaluation, teaching and administration both in hospital and education institutions. The foundation is based on fourth generation evaluation (Guba& Lincoln, 1989) which is a methodology that utilizes the previous generations of evaluation: measurement, description and judgment. It allows for value-pluralism. This approach is responsive to all stakeholders and has a different way of focusing.

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