CONFERENCE PROCEEDINGS

Healthcare & Biological Sciences Research Association

ICHLSR Mauritius - International Conference on Healthcare & Life-Science Research, 05 July - 06 July, 2018

05 - 06 July, 2018

Conference Venue

Middlesex University Mauritius, Cascavelle, Coastal Road, Flic en Flac, Mauritius

KEYNOTE SPEAKER

J.R.Lino FINETTE
Né Le 23 Aout 1959 Republique De Maurice, 17 Avenue Brown Sequard, Quatre-Bornes, Republique De Maurice, Mauritius

J.R.Lino FINETTE was born in 1959. After my secondary education at the John Kennedy Colledge and the Royal Colledge he started to work as Junior Auditor at De Chazal DuMee & Co/ Coopers & Lee Brand. He started studying Accounting and was registered for the ICMA. Being more interested in Medicine, He had the opportunity to join a Medical Institute in 1986. He was also qualified as M.D from Piragove Medical Institute Odessa – Ukraine in 1994. He had his Internship in Orthopaedic surgery at Piragove Medical Institute, from 1994 – 1997.

From 1998 – 1999 also he was associated with Mauritius at the Ministry of Health & Quality of Life.

He joined the Ministry of Health & Quality of Life as Medical Officer in 1999.

He left the service in year 2000 to join the Rogers Group as Ship Surgeon from 2000 to 2004.

In 2004, He also joined Clinic Darné, a Private Clinic in Curepipe as House Doctor up to 2005.

In 2006, He was posted in Rodrigues Island as Senior Medical Officer for a period of two years.

In 2008, he returned to Mauritius and was posted at Brown Sequard Psychiatric Hospital. During his stay at BSH, He was affected to the Harm Reduction Unit. He was also posted in Beau-Bassin Prison where Mr J.R.Lino FINETTE started the Methadone Induction Program for in -mates. He was also involved in counseling in prisons.

In January 2016, He was posted at Mahebourg Hospital where we started the Suboxone/Naltrexone program.

He had attended many conferences given by UNODC on treatment of Drug Addiction and counseling in Prisons.

He is working since 2017 in Private Practice.

| Maheshvari Naidu GICICHLSR1809053 | **Changing Reproductive Health Practice: Listening to the Voices of Traditional Birth Attendants** |

Professor M Naidu
School Of Social Sciences, University Of Kwazulu-Natal, South Africa

Dr. Y Scina
University of KwaZulu-Natal, South Africa

Abstract

The study sought to explore the life histories and health care practices of African Traditional Birth Attendants (TBAs) in uMzimkhulu, Kwazulu-Natal, South Africa. TBAs fall into the realm of traditional medicine and offer traditional medicine and rituals to the pregnant women seeking their help. uMzimkhulu is small town in a rural area where the use of traditional medicine is popular, regardless of free access to western health care facilities.

The study adopted a qualitative research design and included in-depth interviews and participant observation techniques with a small sample group of TBAs. African feminist theory, social identity theory and social capital theory were adopted in analysis. Findings from the study demonstrated the critical role 'culture' played in the lives of the participants or pregnant women. Cultural background influenced multiple healthcare decisions made by the women with regard to their reproductive health seeking behaviour. The study found that traditional medicine played a 'silent role' in the health care system as many pregnant women from the African community continued to seek traditional sources of health care. Despite the perceived hegemony of western health care system/s and practitioners' attempts to discourage women from using alternative traditional medicines, many continued to use these with the view that western medicine failed to fully protect their pregnancies.

The study was motivated by belief that traditional birth attendants, in the context of rapidly changing reproductive health practices, make a valuable contribution to medical anthropology from an African feminist perspective.

Keywords: traditional, health care, pregnancy, birth attendants, hegemony

| | **Weight loss and associated factors among head and neck cancer patients undergoing particle therapy** |

Hongwei Wan GICICHLSR1809054

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Abstract

Aim: This study aims to evaluate the impact of particle therapy on weight loss, and examine the factors associated with weight loss among head and neck patients undergoing particle therapy.

Methods: Patients with head and neck cancer who received particle therapy were enrolled from May 2015 to June 2016. Multiple linear regression analysis was performed to investigate the association between percentages of weight loss during particle therapy and patients' demographic, clinical characteristic, pre-therapeutic nutrition risk, BMI and total score of toxicities.

	Results : Overall, 126 adult patients undergoing particle therapy were included. Critical weight loss (weight loss >5%) occurred in 20% of the patients, and the mean weight loss was 1.4kg (2%) during particle therapy. None of acute toxicities were greater than Grade 2, except for Grade 3 oral mucositis in 7.1% of the patients. Results of multiple linear regression indicated that only radiotherapy modality (95% CI:-7.934--2.917, P<0.001) and total toxicity score (95% CI: -1.348--0.449, P<0.001) were significantly related to weight loss during particle therapy among head and neck cancer patients. **Conclusions:** Weight loss and toxicities were less severe during particle therapy compared with conventional radiotherapy. However, it is still crucial that early nutrition intervention should be implemented for patients with combined particle and photon therapy or severe toxicities, who were at high risk of weight loss. Keywords: Head and neck cancer; Particle therapy; Radiotherapy; Weight loss; Toxicity
Li Luo **GICICHLSR1809056**	**The application of epidemic dynamics on the prediction and prevention of hand-foot-and-mouth disease（HFMD） induced by EV71 virus** **Li Luo** **School of public health, Southeast University, Nanjing, China** **Pei Liu** **School of public health, Southeast University, Nanjing, China** **Abstract** **OBJECTIVE** The study aimed to develop an epidemic dynamics model for the transmission and prevention of hand-foot-and-mouth disease （HFMD） induced by EV71 virus. **METHODS** A SEIR model for susceptible, exposed, infected and recovered HFMD patients was created based on research results and actual incidences of HFMD in China using mathematical and epidemic dynamical methods. Time-fitted curves determined by the relevant parameters were adopted to simulate the epidemic process, and the effectiveness of the model with and without an intervention was evaluated. **RESULTS** Comparison of the results of data fitting to the model for HFMD cases occurred in China from 2009 to 2015 with the actual incidence showed that the model fitted well to the maximum number of infected HFMD patients and that the simulated trend of epidemic process was identical to that of the actual situation. Implementation of intervention measures was demonstrated to effectively delay the onset of HFMD epidemic peaks and reduce the number of incidence during peak seasons. Finally, we make use of the parameter values of the year 2013 and 2014 to simulate and forecast the number of patients of 2015, and the predictive results inosculate well with the real-world situations. **CONCLUSION** The model created in this study is suitable for simulating the spread of HFMD in China and may be used to evaluate the effectiveness of relevant intervention and preventive measures. Keywords： Hand-foot-and-mouth disease（HFMD）； Epidemic dynamics model； Prediction and prevention
Leia Erica Serrano **GICICHLSR1809057**	**Teenage Mothers: Ensuring Health and Well-being Through Equal Access to Services Through Online Platform** **Amira Zoe T. De La Cuesta** **Student Researchers, Lorma Colleges Senior High School** **Leia Erica R. Serrano** **Student Researchers, Lorma Colleges Senior High School**

Katrina Zen Alviar
Student Researchers, Lorma Colleges Senior High School

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Abstract
The third Sustainable Development Goal (SDG) which is to " Ensure healthy lives and promote well-being for all at all ages. " states that by the year 2030 every human on the planet has an access to healthy lives not only in good mental and physical health but also maternal health for it also proposes to end preventable maternal mortality. The target for universal maternal health access has been elevated. Although suggested targets may change as a result of the consultation process, they give us a good sense of the specific areas in which public and private investment will need to be channeled. According to Philippine Statistics Authority, while under-five mortality has declined slightly in recent years from 54 deaths per 1,000 births in 1988-92 to 48 deaths for the period 1993-1997, infant mortality rates have remained unchanged at about 35 deaths per 1,000 births. This study aimed to solve the problems: a) What are the existing programs and services that caters the health and well-being of teenage moms?, b) How do teenage moms acquire information and services from their locale?, and c)How can an online platform help teenage moms in ensuring good health and well-being? This action research made use of interview to the teenage moms of San Juan, La Union. As a result, the researchers came up with an action plan on addressing the third SDG that focuses on the health and well-being of teenage moms. With the said program, the teenage moms will be able acquire the necessary information and support with the aid of technology. Teenage moms requires a huge amount of support from the society in order to stay away from the stigma and allow them to explore further opportunities and raise their own children.

Bongs Lainjo **GICICHLSR1809051**	**Dynamics of Electronic Health Record Systems (EHRSs)**

Bongs Lainjo
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Abstract
Objectives: The aim of this study is to review the transformation process in converting current manual medical records (MMRs) into electronic health record systems (EHRSs). The study also illustrates a case study conducted by the author as stage one of the implementation of the Center for Medicare and Medicaid Services (CMS) electronic health record (EHR) incentive program (Cohen et al., 2015). The third objective is to thematically highlight the prevalence, achievements, challenges and prognosis of implementing (EHRSs).
Setting: The study is focused on global, regional and national geopolitical systems. A select group of industrial and Mid Income countries (MICs) used to illustrate the dynamics and the digitization of manual health records (HRs).
Methodology: The methodology includes the analysis of the global, regional and national implementation rates of the electronic health records systems; the challenges, achievements and prognosis (EHRSs) and the global EHR ecosystems.
Findings: The findings in the study are that the implemented EHR systems are faced with many challenges, despite some subsequent benefits

(Delbanco, 2008; Phillips et al., 2009). The systems are prone to transcribing errors, which are difficult to address (Phillips et al., 2009). There is also the likelihood that people using the system may not fully embrace it (Davis & Stoots, 2013). Based on available data reviewed, Denmark New Zealand, Australia and the UK remains are trailblazers with transformations above 90%.

Conclusion: As expected, the implementation of (EHRSs) has reduced the bulkiness of paperwork, the safe storage of patient records, and significantly improved access to patient records. The preceding remarks notwithstanding, the likelihood of compromising patient records still remains a major concern despite a lower rate in occurences (Phillips et al., 2009). A compelling complementary and invaluable safeguard is the introduction of strict standardized quality control guidelines. In general, given the currently evolving dynamics, the benefits significantly outweigh the risks, especially in circumstances where all the bugs in the systems have been corrected. While successful implementation is plausible, stakeholders need to be reminded that the provision of operating parallel systems (manual and electronic simultaneously) for a substantial amount of time remains unavoidable. Adapting such a process will guarantee continuity and sustainability.

Keywords: EHRSs, Prevalence, Achievements, Prognosis, Challenges, Dynamics, Global, Regional, National, and Quality of Service

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