



Nursing Care, Neurology and Neuromuscular Diseases

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Improved parental self-care during the NICU and beyond

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When babies are born and admitted in the NICU for a prolonged period of time, evidence-based research has revealed increased level of anxiety, stress and post-partum depression affecting NICU parents. These psychological conditions interfere with their ability to bond, breastfeed and care for their child while in the NICU and upon transitioning to home. As they go through their NICU journey, the uncertainty of not knowing whether their baby will live or die can cause their inability to do self-care to meet their own basic needs. They also have high tendencies to feel isolated and alone that can cause major psychological issues common to NICU parents. The main objective is to decrease the incidence in psychological problems that are related to the NICU. Improved self-care will also improve breast feeding rates, parent bonding and parental emotional states throughout the child's life span. Exercise releases a natural hormone, serotonin that regulates one's psychological status or mood. By improving one's mood, they have the ability to deal with stressful situations better. Self-confidence and self-efficacy are also positively affected giving parents increased belief in caring for themselves and a medically fragile child. Program development based on self-care for these families is starting in antepartum and immediately after arriving in the NICU. There would be varying different levels of self-care from basic human needs, medication, yoga, meditation, walking or more intense workouts. This program would also come with a virtual NICU community where there would be nothing but positivity to help one another understand they are not alone and the importance of learning to take care of yourself so you can then take care of you, NICU graduate and your family.

Biography

Jennifer Miller has 19 years of Neonatal ICU experience in both the capacity of a Registered Nurse and Neonatal Nurse Practitioner. Jennifer has a passion for the overall well-being of NICU families. Her strong commitment and motivation ignited her into developing and creating a NICU Parent Advisory Council (Phoenix AZ 2013) to support families who are faced with the physiological and psychological challenges inside and outside of the NICU walls. Her purpose of connecting current and veteran NICU families together has earned an excellence award in the Neonatal Practitioner Innovator category from MEDNAX Health Solutions Partner. She is also a personal health coach who enjoys being physically active through travelling around the world while consuming the magnificent outdoor activities of her home state of Colorado. She is an outstanding advocate who has a vision of making each NICU parent healthier through fitness and adopt an early self-care pattern improving the entire physical and psychological well-being to raise healthier Neonatal ICU baby graduates.

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Role of innate immunity in glioma growth and progression

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Although the last WHO classification of brain tumors (2016) has given greater importance to genetic alterations of gliomas, there is an increasing amount of data about the immunological aspects related to this type of neoplasms that solicit us to focus our attention on the interactions between the immune system and glial tumors. All types of cells of innate immunity may affect the gliomas biology. Macrophage polarization plays a pivotal role in the growth and progression of glial neoplasms where number and type of macrophages varies with the histopathological grade. Moreover, the state of macrophages polarization can be seen as a continuum and possibly reversible through pharmacological interventions. Mast cells are active in various malignant tumors, but their role is not always clear. They may infiltrate mouse and human gliomas in such an extent that depends on glioma grade. Tumor educated, mast cells decrease glioma cell proliferation and migration but promote glioma cell differentiation. Natural Killer cells (NK) can induce the cytolysis of tumor cells and can secrete cytokines. In gliomas, generally, the presence of infiltrating immune cells with immunosuppressive roles such as macrophages and NK correlates with poorer patient prognosis even if exosomes derived from NK have antitumor effects on glioblastoma cells both in vitro and in vivo. As frequently happens in other cancer patients, glioma patients usually have a strong neutrophilia, the Neutrophils-to-Lymphocytes Ratio (NLR) higher than 4 has been associated with poor prognosis when measured before treatments. Moreover, there is a correlation between NLR value, the extent of neutrophil infiltration, the glioma grade and the acquired resistance to anti-VEGF therapy. In conclusion, data arising from innate immunity interactions have practical implications and require an urgent inclusion in WHO classification and in histopathological reporting.

Biography

Giuseppe Donato is an Associate Professor of Pathological Anatomy at the Magna Græcia University of Catanzaro, Italy. He has developed skills in all areas of human pathology and especially neuropathology, working in Italy and other European countries. His research focuses on the aspects of immune response associated to neoplasia, especially concerning the role of mast cells and macrophage polarization.

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Perceptions of the violence in the workplace among nursing staff: Preliminary results

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Statement of the Problem: Several studies have established the prevalence of workplace violence in the health sector being the nursing staff more likely to experience physical violence and bullying than other health workers. In spite of this, in Ecuador only a few researches have directly investigated the issues on nurses' in association to type of violence, perpetrators, well-being affectation and protecting measures available in the health institutions.

Methodology & Theoretical Orientation: A qualitative study with phenomenological method was carried out in a major hospital in Quito, Ecuador. Participants were selected from a convenience sample and before starting the discussion, were given information consent forms to sign. Participants were n=41/210 professional nurses and the considered selection criteria were being professional, over age 18 and being employers at the hospital as minimum 2 years. The technique selected in data collection was Focus Group Discussion (FGD). Data were collected from June 2018 to July 2018. Discussions were recorded and stored in voice files using a digital recorder. The Mayring's approach was used for the interpretative process. The feminist epistemological framework was utilized to analyze the power imbalances in the work relationship and the context in which it occurs.

Findings: Nursing staff in this study expressed during discussion lack of clarity about what constitutes violence in the workplace, lack of understanding about the magnitude of the problem, nurses affected mostly try to ignore the situation because they considered this to be a typical incident in the workplace, they did not report the situation and it has caused under-registration. The aggressors were mostly staff members, supervisor and general public. When nurses narrated their experiences with violence the researchers identified verbal abuse, bulling/mobbing, sexual harassed and physical violence.

Conclusion & Significance: The evidence allowed us to admit that the situation is a significance problem in magnitude and severity. Our recommendations will be oriented toward the implementation of a preventative and minimizing aggression program in the hospital.

Biography

Venus Medina-Maldonado is currently working as the Nursing Faculty, Catholic Pontifical University of Ecuador as a Lecturer and Researcher. She teaches subjects such as historical context and development in nursing, family nursing, evidence based nursing. Her research interest is focused on preventing and responding to gender based violence.

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Exploration of the perceived barriers to collaborative clinical facilitation among nurse educators, preceptors, clinical nurses/midwives and nursing and midwifery students in Northern Ghana

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Background: The hindrances to collaborative clinical facilitation for effective practical learning of nursing students are worrying.

Aim: The aim of this study was to explore the perceived barriers to collaborative clinical facilitation among nurse educators, preceptors, clinical nurses/midwives and nursing and midwifery students at two selected nursing and midwifery colleges and a hospital in Northern Ghana.

Methods: This study adopted a constructivist paradigm using a qualitative exploratory-descriptive approach. Purposive and systematic sampling methods were used to select participants for the study. Data were gathered through focus groups discussions and individual in-depth interviews and transcribed verbatim. The data were analyzed using framework analysis method.

Findings: The study findings showed a sharp increase in student population at the colleges causing overcrowding and congestion at the clinical learning environments. Preceptors and other clinical staff who are trained and mandated to facilitate clinical teaching were insufficient, and therefore not available at all health care facilities or wards every time for students' guidance and support. Participants further reported role confusion among staff due to lack of working agreements between staff of colleges and health facilities over that had the prime responsibility for clinical teaching of nursing students. This resulted in an adversarial relationship among key players of the collaborative network. Lack of time, heavy workload and busy ward schedules equally impacted negatively on the practice of collaborative clinical facilitation.

Conclusion: Based on these findings, nursing and midwifery colleges, in collaboration with healthcare facilities, need to create clinical placement calendars to coordinate students' clinical schedules in the wards in order to avert the challenge of overcrowding. This would provide students the opportunity to be effectively supervised and guided during clinical practice in the ward.

Biography

Francis Kyerepagr Kobekyaa is a Nurse Educator at the St. Joseph's Midwifery Training College, Jirapa in the Upper West Region of Ghana. Francis started his nursing career as a Community Health Nurse after graduating from the Jirapa Community Health Nursing Training School in 2004. Thereafter, he worked at Ketuo Health Centre as the Community Nurse in-charge of the facility in the Puffien Sub-District. He also doubled up as the CHOs' Supervisor responsible for two CHPS Zones in the Sub-District. During his time, the Sub-District recorded an increased in skilled delivery with improved maternal and child health service performance and Registered General Nursing Licensing Certificates. In 2014, he obtained a scholarship from the Netherlands Initiative for Higher Education to pursue an Honors Degree in Nursing Education at the University of KwaZulu-Natal, Durban. He graduated in 2016 and continued with a Full Research Masters (MPhil) in Nursing Research at the same university with funding from the Vice Chancellor of the university. He is currently working on two articles for publication.

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Effect of a multidisciplinary education program on women with pregnancy induced hypertension in rural Malaysia

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Pregnancy-Induced Hypertension (PIH) is among the top four most common causes of maternal death in Malaysia. The purpose of this study was to examine the effect of a multidisciplinary education program on knowledge, attitude and perceived behavior control of PIH management among antenatal women diagnosed with PIH in rural Malaysia. A quasi-experimental study with pre and post design was conducted to measure the effect of a multidisciplinary education program on study variables guided by the theory of planned behavior. 63 antenatal mothers with PIH from six maternal and child health clinics in Lahad Datu, Sabah participated in this study and participants were assigned to intervention (n=32) and control group (n=31). Participants in experimental group attended a multidisciplinary education program (8 hour workshop) regarding PIH management and blood pressure control, nutrition and exercise, whereas, the control group, did not receive any. Data were collected using a set of questionnaire which measures sociodemographic characteristics of the participants, blood pressure level, knowledge and attitude of PIH management and perceived behavior control. Data were collected from both intervention and control group pre-test and 14 days post-test. A t-test of mean differences was used to examine the effect of the multidisciplinary education program on knowledge, attitude and perceived behavior control of PIH management. Findings showed that there were significant differences in mean score pre and post-test for knowledge (t=4.97, p<0.001) and attitude of PIH management (t=2.76, p<0.001). However, there was no significant difference in perceived behavioral control between intervention and control group. Findings of this study indicated that the multidisciplinary education program might be utilized as an effective management program for antenatal mother diagnosed with PIH residing in rural areas.

Biography

Zamzaliza Abdul Mulud is an Academician in Centre for Nursing Studies, Universiti Teknologi MARA, Malaysia. Her specialization is in the nursing field specifically in medical surgical, mental health and gerontological nursing. Her research interest includes the effect of the educational program, resilience among caregivers of individuals with illness, qualitative research and caregiver burden.

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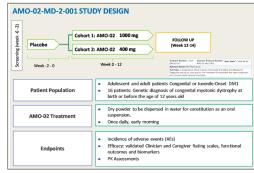
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The utility of concordant trend analyses in a phase 2 study in congenital and childhood onset myotonic dystrophy type 1: A case example

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Statement of the Problem: Proof-of-concept clinical trials in rare diseases such as congenital and childhood onset myotonic dystrophy type 1 are often hampered by a lack of knowledge concerning optimal outcome measures to detect efficacy. The concordant trends analysis offers a solution in which efficacy is assessed by evaluating the trends on several within-study assessments, provided the assessments are quasi- or wholly-independent. Positive findings using this analytical technique are unlikely to arise due to chance alone.

Methodology & Theoretical Orientation: AMO-02/tideglusib is a novel, orally administered GSK-3 β enzyme inhibitor. Overactivity of GSK3 β has been identified as a key pathophysiological feature of congenital and childhood onset myotonic dystrophy. Accordingly, this Phase 2a clinical trial explored the utility



of AMO-02 in 16 adolescents and adult subjects with this form of myotonic dystrophy across a 12-week treatment period. Outcome measures included disease-specific rating scales, functional/performance-based assessments, and biomarkers.

Findings: AMO-02 rendered clinical benefit to the majority of subjects after 12 weeks of treatment. The concordant trend analysis revealed a clear dose-response relationship that favored the 1000 mg over 400 mg dose. Four of the 10 efficacy variables (i.e. grip strength, Clinician VAS rating scale, Caregiver Top 3 Concerns rating scale, and OSU CGI-I rating scale) differed in favor of 1000 mg over 400 mg dose and there was no worsening in the remaining six variables.

Conclusion & Significance: The concordant trend analysis provides reiterative confidence about the study findings. This is important since this novel therapeutic area lacks gold standard outcome measures and this study was the first clinical trial conducted in this specific population. Accordingly, AMO-02 merits further progression in clinical development in this population of individuals affected by early-onset myotonic dystrophy, and the 1000 mg dose may have the best prospect of establishing a consistent efficacy signal.

Biography

Michael Snape, also known as Mike, Ph.D. is the Co-founder and Chief Executive Officer of AMO Pharma Limited. Dr. Snape is Founding Partner of Autism Therapeutics Ltd. Dr. Snape has been involved in clinical studies in autism since 1997, and has been responsible for conceiving and executing multiple clinical studies in autism and related neurodevelopmental disorders. Dr. Snape served as the Chief Scientific Officer of Neuropharm Group Plc from 2005 to April 9, 2010. Dr. Snape Co-founded Neuropharm Limited. He served as Principal Scientist of Cerebrus and also served as an Associate Director of Vernalis Group plc. He has published numerous articles in international scientific and medical journals and is named on five pharmaceutical patents.

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NURSING CARE, NEUROLOGY AND NEUROMUSCULAR DISEASES

October 22-23, 2018 Madrid, Spain

Psychological distress (stress, anxiety and depression) and quality of life among chronic kidney diseases patients on dialysis at the Cape Coast Teaching Hospital

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Hemodialysis has proven to be the most effective treatment modality due to its efficiency in sustaining patients for a very long period. Despite this, there is evidence to suggest that factors such as stress, depression and anxiety moderates the quality of life of CKD patients on dialysis. Nephrology clinicians primarily should not only treat the physical symptoms of kidney disease but explore and proactively recognize the emotional and psychosocial realities of patients with this disease. The purpose of the study was to investigate the psychological distress and quality of life among chronic kidney disease patients on dialysis at the Cape Coast Teaching Hospital. The study adopted a descriptive survey design. The purposive sampling technique was used to sample 38 patients. Depression, Anxiety and Stress Scales (DASS 42) was adapted to measure psychological distress and quality of life was measured using the World Health Organization Quality of Life Instruments (WHOQOL-BREF). Data was analyzed using Pearson product moment correlation coefficient and independent t-test. The result of the study majority of patients with CKD experience varying levels of psychological distress. Further the study found a negative correlation between psychological distress (stress r=-0.488, anxiety r=-0.537 and depression r=-0.467, n=40, p=0.001) and CKD patients' quality of life. Finally, no significant differences was observed in the psychological distress of males (M=72.64, SD=9.61) and females M=68.93, SD=4.33; t (35.95)=1.67, p=0.104 (2 tailed). It was recommended that renal care practitioners should be educated on the need to refer patient to clinical psychologist for proper management of psychological related cases. Also, a robust multidisciplinary team approach for the management of renal cases.

Biography

Dorothy Mensah-Aggrey was born and raised in Ghana and has over 30 years of varied administrative and teaching experiences in music, theology and education. After graduating with a B. Mus. (Music) and Dip. Ed. (Education) simultaneously from the University of Cape Coast in Ghana in 1985. While working with the Archdiocese of Washington, Aggrey instituted a Catechist Peer Ministry and Mandatory Catechist Formation series; worked on the Archdiocesan textbook review board and helped establish an African choir at a prominent parish in Maryland (MD). At the same time, she pursued her doctorate in Education (Professional Studies) from Capella University, MN. She is also a certified online programmer having studied for the certificate from The Learning Resources Network (LERN), KS. Aggrey currently works at the University of Dayton's Institute for Pastoral Initiatives (IPI) as a Curriculum Design Specialist and Adult Faith Formation Coordinator.

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NURSING CARE, NEUROLOGY AND NEUROMUSCULAR DISEASES

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The role of social support environment in medication adherence among individuals with type-2 diabetes mellitus

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The National Health Morbidity Survey (NHMS) reported that the prevalence of Malaysian with Diabetes Mellitus (DM) is 11.6% 📕 and 14.6% for individuals age 18 and above and 30 and above, respectively. Adherence to medications is an important aspect in patients' management as many studies reported that non-adherence to medication could lead to hospitalization and higher mortality rates among this population. Thus, this study aimed to determine the prevalence of non-compliance of medication and to examine the association between medication adherences with social support among patients with type-2 DM in Malaysia (n=173). A cross sectional study was conducted using a self-administered questionnaire which consists of three parts; socio-demographic data, the Morisky scale to measure medication adherence and the Medical Outcome Study Modified Social Support Survey (MOS MSSS). Results showed that 2.4% of the total number of patients demonstrating a low level of compliance towards the medication. The most common types of social support received by patients were affectionate support which has been proved throughout previous studies to have effect on DM patients' quality of life. Surprisingly, the lowest type of social support reported by the patients was emotional support. There was a significant positive correlation between medication adherence and social support (rho=0.154, p=0.043). Finding of this study was in agreement with previous studies that social support was the main determinant of compliance to medication. Among all the sources of social support, doctors (physician) were selected by patient as the main source of support followed by spouse, children and nurses. Findings from the present research contribute to the growing evidence on the role of social support environment towards medication adherence among individuals with type-2 DM. Thus, future research regarding the development of interventions on importance of social support and medication adherence is suggested among this population.

Biography

Norfidah Mohamad is a Senior Lecturer in Centre for Nursing Studies, UiTM, Selangor, Malaysia. Her specialization is in critical care nursing. Her research work and interest are in the area of critical care nursing which focuses in intensive care nursing and cardiology nursing.

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