

2nd International Conference on Physicians & Surgeons

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Accepted Abstracts



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Oral Health Status of Children with Attention Deficit Hyperactivity Disorder: A Systematic Review

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Background: Attention-deficit hyperactivity disorder is one of the most common neurobiological disturbances that develop in children. Its characteristics can directly affect the individual's ability to maintain good oral hygiene; however, there is no clear evidence whether it is a risk factor for poor oral health.

Objectives: To assess the oral health status of children with attention deficit hyperactivity disorder and to determine if this condition influences the oral health status of the affected children.

Methods: A systematic search was conducted using multiple search engines. Only English publications between the years 2000 and 2014 that assess the oral health status including the caries experience and/or oral hygiene and/or gingival health and that included healthy controls were included. The target population was children with Attention-deficit hyperactivity disorder that are free from any other medical condition, with ages ranging from 0-18 years.

Results: Database search retrieved a total of 207 records using the keywords. According to title screening and after removing the duplicates 38 records were found to be relevant to our specifications and their abstracts were reviewed. Finally, 10 articles were found to be suitable for inclusion in the systematic review. Children with attention-deficit hyperactivity disorder tend to have significantly higher caries in the primary dentition compared to controls. Enamel caries were also found more significantly among this group of children. They also have higher plaque index scores when compared to healthy children. Gingival enlargement and gingival bleeding were significantly higher in children with attention-deficit hyperactivity disorder who were taking Amphetamine. Registration number: CDR42015015661 with the International Prospective Register of Systematic Reviews.

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Prevention of post-operative complications of esophageal atresia in newborns

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Statement of the Problem: Esophageal atresia (EA) is one of the most common congenital anomalies of esophagus, the surgical correction of which is one of the most important problems of neonatal surgery and anesthesiology. Gastroesophageal reflux (GER) is one of the most common complications during post-operation period, which is one of the factors leading to other surgical complications as anastomotic leakage or stricture. The purpose of this study is to improve the results of esophageal atresia treatment in newborns by way of improvement of the technique of surgical correction and reduction of post-operation complications.

Methodology & Theoretical Orientation: We used an advanced method of application of esophageal anastomosis and stomach probing in newborns with EA. The purpose of this method is to create sufficient security of esophageal anastomosis, prevent gastroesophageal reflux during early post-operation period, thus improving the results of operative treatment of esophageal atresia in newborns. It is known that in EA, gastroesophageal reflux is often observed due to the disruption of angle of Hiss. This may contribute to the penetration of gastric juice in the zone of anastomosis during early post-operation period and can lead to anastomotic leakage and/or other early post-operation complications. Hence, to prevent the penetration of gastric content in the zone of anastomosis, catheter Foley-6 Fr/Ch was used as gastric probing, which is placed into stomach during operation, blown up and tightened.

Findings: As a result, gastric cardia is sealed with a blown-up part of the catheter thus protecting the zone of anastomosis from the penetration of gastric content during early post-operation period. Consequently, it prevents the development of anastomotic leakage.

Conclusion & Significance: The results of our observations allow concluding that the improved method of surgical correction significantly reduces the risk of post-operation anastomotic leakage and improves the results of operative treatment of esophageal atresia.

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Nurse physician work-related relationship as perceived by both of them

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Nursing and Medicine are among the few disciplines that work closely and complement each other. They share a common commitment to patient well-being. However, a common type of conflict in health agencies is the physician–nurse conflict that is caused by a lack of daily interaction between nurse and physician and a lack of understanding of each other’s role. Hence, the basic to a good relationship between doctors and nurses is the clear understanding of the nurse’s role, which is ambiguous, compared with the physician’s role. The aim of this study was to explore the nurse-physician relation, as perceived by both of them. Methodology: A descriptive correlational research design was utilized. Sample: A convenience sample of the study included all nurses and physicians who had a minimum of 1 year of experience. Setting: The study was conducted in Damanhur National Medical Institute. Tool: Data were collected by a questionnaire developed by the researcher on the basis of relevant literature. Results: The main results of the study showed that physicians are more satisfied than nurses with their relationship. The nurse–doctor relationship was characterized by cooperation. However, nurses had a feeling of inequity with physicians, especially in the disciplinary actions. Recommendation: Improve the relationship between doctors and nurses through sharing in journals, seminars, and conferences. It is also recommended that the hospital administrator should empower nurse staff with adequate authority to implement the hospital policies.

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Determinants of leave against medical advice in neurosurgery versus other hospital departments and factors predictive of such discharges from neurosurgical service

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Statement of the Problem: Leave against medical advice (LAMA) is a common and vexing healthcare problem, especially in low income countries. There is paucity of studies exploring this aspect of patient care, especially in neurosurgical practice. Our study aims to find out the prevalence of LAMA, its reasons and any differences that exist among patients in neurosurgery versus other specialties.

Methodology & Theoretical Orientation: A prospective, cross-sectional study was carried out among patients discharged against medical advice for six consecutive months at Gandaki Medical College Teaching Hospital and Research Center, Pokhara, Nepal.

Findings: Among a total of 150 patients enrolled, 29.3% (n=44) were from neurosurgery and 70.7% (n=106) from other departments. The overall rate of LAMA was 5.68%; 16.73% from neurosurgical service. In the neurosurgical cohort, mean age was 61.41±18.72 years and majority of patients were males (65.9%). Most patients were Hindu by religion (97.7%), illiterate (59.1%), married (93.2%), with history of substance abuse (63.6%), admitted directly to the ICU (88.6%) and lacked insurance (79.5%). Financial insufficiency (40.9%) followed by expected poor prognosis of the disease (25%) were reported as major reasons for LAMA. Statistically significant differences (p<0.05) were observed in neurosurgical patients when compared to patients from other departments in terms of age, gender, educational status, history of substance abuse, place of in-patient admission, treatment modality recommended, status of mechanical ventilation and insurance status. In-patient admission to the ICU and proposal of surgical intervention were predictive of LAMA among neurosurgical patients.

Conclusion & Significance: The rate of LAMA was high in neurosurgery. Educating general public about neurosurgical care and widespread implementation of health insurance seem important policy-implications.