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2nd World Congress on

CARDIOLOGY

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39th Annual Congress on

MICROBIOLOGY AND MICROBIAL INFECTION

July 23-24, 2018 | Rome, Italy

DAY 1

Keynote Forum

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RESYNCHRONIZATION PACING FOR EARLY HEART FAILURE AMONG YOUNG ADULTS WITH REPAIRED CONGENITAL HEART DISEASE BASED ON CONTRACTILITY (DP/DT) NOT EF OR QRS

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Biography

Peter P Karpawich has underwent medical training at Hahnemann/Drexel University (Philadelphia), followed by Pediatric Residency at the University of Texas (Dallas) and Cardiology fellowship at Baylor University (Houston). He holds the academic rank of Professor at Wayne State University School of Medicine and is the Director of Cardiac Electrophysiology Services at the Children's Hospital of Michigan, Detroit, USA. He has authored/coauthored over 250 scientific publications, as well as two textbooks and 11 textbook chapters on cardiac electrophysiology, adult congenital heart diseases and cardiac device therapies. He currently serves as Editor and is on the Editorial Boards of several internationally-recognized cardiac journals and is routinely asked to review scientific manuscripts for publication. He is a fellow of the American College of Cardiology, American Heart Association, Heart Rhythm Society and the American Academy of Pediatrics.

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Introduction: Repaired congenital heart disease (CHD) patients (pts) often develop early heart failure (HF) simply based on anatomy. Although cardiac resynchronization pacing therapy (CRT) may be an effective alternative to heart transplant (HT), published implant guidelines, based on ejection fraction (EF) and QRS morphology, do not include pts with CHD or pacemakers. The purpose of this study was to pre-evaluate CHD pts with HF based on contractility response (dP/dt) to temporary CRT pacing to determine CRT efficacy prior to implant. Acute CRT benefit was defined as a >15% increase in indices over baseline.

Methods: From 1998-2017, 105 CHD pts including repaired Tetralogy of Fallot, transposition of the great arteries, single ventricle, and septal defects, were considered for HT (NYHA 3-4). Of these, 40 (mean age 22y, 27/40 with preexisting pacemakers) agreed to temporary CRT pacing with contractility measurements. Based on dP/dt response, pts either did or did not receive CRT. All pts was followed from 0.3-12 years (mean 4.5).

Results: Of 40 pts, 26 (62%) had a positive response (mean dP/dt 597 improved to 848 mmHg-sec, $p<0.006$) and received CRT implant. During follow-up (mean 5.3 years), all initially improved in NYHA class and HF symptoms. Of these pts, four underwent eventual HT (mean 4.7 years later), four died (two noncompliance (NC), one gunshot) and 18 remain clinically stable (NHYA class 1-3), off the HT list (repeat dP/dt mean 843 mmHg-sec). Of the 14 pts with a negative acute CRT response (mean dP/dt 635 vs. 662 mmHg-sec, p=NS), during follow up (mean 3.5 years), two underwent HT (mean one year later), six died awaiting HT (3 NC), and six remain on the HT list (NYHA 3-4).

Conclusions: CRT implant guidelines lack criteria for CHD pts including preexisting pacemakers. Pre-selecting pts by acute contractility response assures greater CRT efficacy and can delay need for HT.

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Biography

Ebtesam Al-Ali has obtained her BSC in 1993, from Kuwait University and worked for Kuwait University as Research Assistant, then joined KISR and led eight projects. She has published more than 30 papers in reputed journals and international conferences. Her field of experiences is in plant virus detection, primer design, cloning and sequencing, ELISA, DNA extraction, PCR amplification, RCA rolling circle amplification, TYLCV detection on tomatoes, also trained twice in the University of Wisconsin Madison under the supervision of Prof. Amy Charkowski as well as University of Washington state under supervision of Prof. Hanu Pappu.

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DETECTION OF TYLCV ON CUCUMBER CROPS IN KUWAITI FARM

High scores of vegetable crop losses were recorded in Kuwait agricultural farms, viral diseases were the main causal agent of these economic losses in many crops, mainly in tomato and recently recorded in cucumber. Tomato yellow leaf curl virus (TYLCV) was reported as a major pest of tomato and cucumber but it was not characterized at the molecular level. The whitefly was the main transmitter of TYLCV. Common symptoms on cucumber plants infected with TYLCV were: Leaf and fruit deformation, mosaicing, yellowing, upward leaf cupping, and stunting. Two hundred samples of cucumber leaves were collected, and the symptoms resulting from viral diseases were recorded and documented. DNA was extracted from 300 infected cucumber leaf samples, and PCR detection was performed on 150 samples using two different primer pairs (TY1 and TY2 and TYC1R and TYC1F). PCR tests revealed that 80 samples out of 150 tested samples were positive. Best results were performed by TY1 and TY2 primer pair. Positive samples were stored for further analysis.

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WHAT DO LEBANESE WOMEN KNOW ABOUT CERVICAL CANCER AND HUMAN PAPILLOMAVIRUS? A REPORT ON AWARENESS LEVELS IN URBAN COMMUNITIES

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Biography

Jacques Choucair is an Infectious Diseases Specialist in Hotel Dieu de France teaching hospital in Beyrouth. He has obtained his MD degree in 1994 from the Saint-Joseph University, Faculty of Medicine in Beyrouth. He has completed a two years fellowship from 1998-2000 at Bichat Claude Bernard Hospital and Bacteriology at Broussais Hospital affiliated to University of Paris V. He has received his diploma in Infectious Diseases (1999), Saint-Joseph University, Beyrouth. Since 2001, he is a Practitioner and ID Consultant in the Infectious Diseases Department at Hotel Dieu de France de Beyrouth Teaching Hospital. He also has completed Medical Teaching Diploma from the University of Montreal in Canada in 2003. He has published more than 30 articles and is a Reviewer in national and international journals. His main topics of interest are bacterial resistance and the proper use of antibiotics.

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To evaluate the knowledge of Lebanese women about cervical cancer's symptoms and risk factors and human papillomavirus (HPV) infection. To measure the uptake of the cervical cancer screening test (Pap smear) and that of HPV vaccination.

Methods: 444 women residing in Beirut and Mount-Lebanon, with no medical background, filled out a 32 item questionnaire about cervical cancer and HPV. Collected data was exported to and analyzed in SPSS® v. 21.0.

Results: Most participants were young (45.7% aged 18 to 25), residing in Mount-Lebanon (51.8%), Christian (50.7%), single (49.3%), with high education qualifications (73.9%) and currently employed (49.1%) in a field not related to health (84.9%). 64.6% did not visit a general physician nor a gynecologist regularly. 85.6% were aware of cervical cancer. 53.9% correctly identified HPV infection involvement in the pathogenesis of cervical cancer. 35.6% were aware of HPV infection but 80.4% believed their information was lacking. 37.6% of participants had been screened by Pap smear for cervical cancer at least once in their lives whereas 9% did not know what a Pap smear was. Screening was significantly associated with cervical cancer awareness and regular visits to general health physicians and gynecologists. 11.7% of participants aged 18 to 35 were vaccinated against HPV. Vaccination uptake was significantly associated with cervical cancer awareness, religion, field of work and studies, and regular visits to gynecologists.

Conclusion: Urban Lebanese women are not well informed about cervical cancer and HPV. Screening by Pap smear and HPV vaccination uptakes are non-satisfactory.

Note: