

2nd Annual Conference on
**ORTHOPEDECS, RHEUMATOLOGY
AND OSTEOPOROSIS**
April 15-16, 2019 | Milan, Italy

ORTHO CONGRESS 2019



ACCEPTED ABSTRACTS

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EPIGENETIC REGULATION IN CARCINOGENESIS AND COMBINATION THERAPY

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All you need for the radical elimination of causes of autoimmune diseases is a non-specific antigen preparation. The last-mentioned preparation could be obtained by killing some microorganisms, no matter whether they are potent of causing infectious diseases or not. The only property that is required towards the preparation is to induce antibody-productions. Antibodies thus produced would naturally be non-specific. All non-specific antibodies are capable of replacing specific antibodies from their own receptors on the surface of responsible cells i.e. catalytic T lymphocytes. His opinion is the reason why no radical cure-method for autoimmune diseases is proposed by contemporary Immunologists is because virtually all of the contemporary Immunologists are stuck to the traditional but irrelevant concept of rigid adhesion of all antibody molecules to their receptors. A relevant concept that all antibody molecules in the vicinity of their receptors are in a state of equilibrium was first proposed by a Biochemist, whose name was Porter as early as in 1967. As you may know, sectionalism exists among medical scholars. A kind of enlightenment of contemporary Immunologists may save all of patients suffering from autoimmune diseases. The number of these patients is said to be around 200,000,000.

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PROOF OF CONCEPT TESTING OF INTELLIGENT FEMORAL HIP STEM

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Periprosthetic infections in hip arthroplasty are a feared complication with poor mortality and morbidity outcomes. Patients often present after the onset of clinical signs, by which time periprosthetic infection is extensive and biofilm formation has occurred. The aim of this study is to enhance earlier recognition of periprosthetic infection so antibiotic therapy is more likely to be effective. A femoral stem with surface pH and temperature sensors with the ability for wireless powering and data transfer was manufactured using micro-electro mechanical circuits and additive manufacturing methods. This stem was tested pre-clinically for proof-of-concept. The Author implanted this stem in cadaveric sheep leg. The sheep leg was warmed to physiological temperature and tissue pH and temperature was altered within biologically relevant ranges (pH 6.0-8.0, temperature 36-45°C) at 0.2 numerical intervals. The sensors reported pH recording with accuracy of 0.001pH and temperature recording accuracy of 0.2°C. The implant was tested in three sheep legs. Between the three trials, there was no statistical difference in pH or temperature recordings (pH, CI-2.44 to 5.11, P = 0.788. Temp, CI-4.23 to 2.90, P=0.233). Safety factors such as electric current leakage and technical uncertainties such as long-term powering reliability are unknown. In this study, the author proves the concept of the first reported dual pH and temperature sensing hip prosthesis.

WHAT AILS OUR HIP REPLACEMENT SURGERY PERI-OPERATIVE CARE SYSTEM? A COMPREHENSIVE EVALUATION OF PERI-OPERATIVE MORTALITY IN HIP ARTHROPLASTIES AT A TERTIARY CARE CENTRE

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Introduction: With improved survivorship more comorbid elderly patients are being operated for hip arthroplasties. Worldwide all-cause 30-day and 1-year mortality in hip arthroplasties ranges 7-9% and 21-30% respectively, the cause of which remains obscure. The scarcity of mortality data in our country led to systematic effort with aim of evaluating perioperative mortalities in hip arthroplasties, determining better fixation method and reducing avoidable mortalities.

Materials & Methods: 252 consecutive patients (133 males and 119 females, mean age 58.68years) operated for hip arthroplasties (cemented and uncemented THR and bipolar) were observed prospectively over two years. Heart-rate, O₂ saturation and BP were recorded at specific surgical steps and post-operatively for 48 hours. Post-operative Trop-T and 2D Echocardiography were done in all patients and D-Dimer and CTPA in indicated ones. Every post-operative death was extensively studied.

Results & Discussion: Majority (63%) were operated for traumatic indications. 48% belonged to ASA grade-1, 46% grade-2 and 4% grade-3. There was statistically significant association of diagnosis ($p=0.00241$) i.e. traumatic etiology, ASA grade 2 ($p=0.00163$), raised Trop-T ($p=0$), chest pain and breathlessness ($p=0$), raised D-Dimer ($p=0.04109$) and pulmonary embolism (0.00119) with mortality. Mortality rate in our study at post-op 48 hours was 5.5%, 30 day- 8% and one year mortality rate was 19%. No intra operative deaths were noted. With regard to death we obtained a 1-year follow-up of 100%. Out of 14 deaths, 10 were traumatic etiology and 4 non traumatic. There were 8 deaths (out of 14 deaths-57.14%) out of 127 cemented (6.29%) and 6 deaths (out of 14 deaths-42.86%) among 125 uncemented arthroplasties (4.80%). There was no statistically significant association (0.07947) of type of surgery (cemented or uncemented) with mortality.

Conclusions: Selection of implant (cemented or uncemented) made no difference in eventual mortality. Cardiovascular complications have overtaken pulmonary emboli as the leading cause of death after hip replacement. Orthopaedicians with anaesthetists must individually evaluate high-risk patients (with cardiovascular and respiratory co-morbidities); intensive monitoring for 48 hours post-operatively and final decision must be made with best interests of the patient paramount.

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AN EASY WAY TO ELIMINATE CAUSES OF AUTOIMMUNE AND ALLERGIC DISEASES

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Our recent analytical study suggests that breast and ovarian cancers possibly have similar epigenetic origin. Interestingly, combination therapy, including epigenetic drugs, was effective against breast and ovarian cancers causing more than additive growth inhibition in various types of breast and ovarian cancer cells. Traditional therapies do not kill cancer progenitor cells and drug-resistant cancer cells, causing cancer relapse. Other studies have shown that combination therapy with epigenetic drugs reduced cancer relapse, sensitized drug resistant cancer cells, and killed cancer stem cells. We rationalize that initiation of cancer progenitor cell formation from predisposed cells requires an epigenetic switch. Further progression-development of cancer involves mutations. This hypothesis differs from current paradigm of carcinogenesis based on mutations. CpG residue methylation in the upstream regions of genes is one of the epigenetic regulations involved in silencing of tumor suppressor genes in cancer cells. In addition, histone modifications, such as H3K4me, and H3K27me3, and other histone modifications regulate gene expression in concert with alterations in DNA methylation. Our system biology analysis revealed that DNA methyl transferase1 (DNMT1), the enzyme which maintains CpG residue methylation is allosterically activated in cancer cells. We hypothesized that the combination of CpG DNA methylation and histone modifications constitutes an epigenetic switch. It is possible that histone modification and CpG methylation work in a concert (alteration in epigenetic switch) to regulate differential gene expression in carcinogenesis.

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ARTHROSCOPIC DISTAL CLAVICLE EXCISION IN AC ARTHRITIS

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AC joint Arthritis cause is occurring with many variations it could be a part of general osteoarthritis or post traumatic post traumatic becomes very popular in professional athletic even after reduction and fixation, The main symptoms is pain and affection of rotator cuff muscles. Arthroscopic distal clavicle excision is one of the best solutions as it is less invasive and disappearing the symptoms dramatically