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SITE ATTACHMENT INHIBITION THERAPEUTICS: DEALING WITH **ASSOCIATION AND CAUSATION ISSUES**

Simon Raymond

Alumnus Melbourne University, Australia

his talk highlights that site attachment inhibition (therapeutics involving the negation of cellular attachment, or entry/transfer, by the pathogen) is intended to consist of both: Treatment of established infections; and new generation immunization programs (preventative treatment). New generation immunization programs, based on prenatal stem cell therapy in the prenatal period and earlier spanning back to spermatogenesis and oogenesis, is intended to involve gene mutagenesis and knockout. Validation for likely success includes inherited mutations mentioned in the references noted that provide resultant resistance (immunity) to the stated infections including HIV and Malaria. Association and causation issues need to be dealt with given that even the known CCR5 mutation has not been completely confirmed as direct/ causative of the resultant resistance/immunity. A discussion with regards to prenatal and germline stem cell therapy, in addition to CRISPR and CRISPR-Cas9 is presented in the below link to the US NIH library. It is not up to date with "site attachment inhibition" therapeutics, however it does provide a general discussion on the above stated topics broadly. In brief, using technologies including those above would allow comparison between cells in which entry of the pathogen is occurring to those in which entry of the pathogen is not occurring (or, not able to) and through analysis of the genetics of the human cellular biology used by the pathogen to gain cellular attachment (or, transfer and entry), the genes to be targeted in mutagenesis and knockout can be analysed. NB: The pathogen machinery also is to be analysed. In summary, this presentation presents new content with regards to site attachment inhibition therapeutics. Site attachment inhibition therapeutics is intended to be applicable to all infections broadly. The next conference presentations will cover issues surrounding antimicrobial resistance.

BIOGRAPHY

Simon Raymond is a Consultant who specialised in Medical and Scientific Research and an Alumnus of Melbourne University (Rank of Number 1 in Australia and Number 33 in the World). He has worked as a Reviewer for the respected Medical Journal of Australia, has received invitations internationally to review from prestigious medical journals including Journal of American Medical Association network. He has received award in recognition of his research by Royal Australasian College of Surgeons (PSC, 2006) and invited to conferences internationally as an official Delegate and Researcher, including that in USA and China. He has worked as the Principle Researcher in the highest-powered form of medical trial—Randomised Controlled Trial (RCT). He is also a Member of the Golden Key International Society for honoured and outstanding academics and has been cited as a notable global leader.

simonraymondcontact@gmail.com

