



International Conference on NURSING AND HEALTH CARE

Conference Dates & Venue

 December 02-03, 2024

 Brussels, Belgium



FOREWORD

We are delighted to invite scientists, academicians, healthcare professionals, young researchers, business delegates, and students from around the globe to attend the **International Conference on Nursing and Health Care (ICNHC-2024)** to be held at the Gresham Belson Hotel, Brussels, on **December 02-03, 2024**.

ICNHC-2024 offers a platform to explore the latest advancements and cutting-edge innovations in nursing and healthcare, fostering an engaging environment with a vibrant community of researchers, practitioners, and students.

The conference aims to unite a multidisciplinary group of professionals from across the world to share breakthrough ideas, research findings, and best practices in nursing and healthcare. It seeks to promote high-quality research, facilitate global collaborations, and encourage discussions on outstanding achievements and emerging trends in the field.

We eagerly anticipate an enriching meeting with participants from diverse backgrounds and look forward to exchanging innovative insights and inspiring new developments in nursing and healthcare.



COMMITTEE

Organizing Committee Members

Muntaha Khalil Gharaibeh	Dean, Amman Al-Ahliyya University, Jordan
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Jie Yu	Assoc. professor, California State University, USA



Health Disparities and the Environment

Barry S. Lachman, MD, MPH, FAAP

President and CEO, Lachman Community Development and Consulting

Abstract:

Environmental conditions are a major contributing factor to environmental inequity and disparities. Environmental factors beyond global warming drive significant disparities. The environment contributes to disparities in the social determinants of health including food insecurity, unsafe housing conditions, air quality and exposure to environmental toxins. The Six Pillars model provides a framework for collecting data, evaluating, planning and intervention and implementing programs to remediate inequity. This paper shows the role of disparities in food access, housing conditions and air quality in causing health problems with emphasis on Dallas, Texas.

Biography:

Dr. Lachman is a nationally recognized leader in healthcare for the underserved. He has over 50 years' experience in providing care, program development and administration and advocacy for underserved populations.

In 1968 he was the originator for the idea for the National Health Service Corps. He has held faculty appointments at the University of Rochester, University of Washington, Medical College of Wisconsin, Johns Hopkins, UT Southwestern and University of Kentucky.

He has 30 years' experience as a managed care Medical Director, he is nationally recognized for his leadership in the management of asthma and preterm birth prevention. He serves on the City of Dallas Environmental Commission and is Senior Co-Chair of the Texas Pediatric Society Committee on Environmental Health. His present work focuses on social determinants, the environment and equity.



Supporting Harmony and Resilience in the Workplace

Dr. Adele Webb

Executive Dean of Healthcare Initiatives at Strategic Education, Inc. USA

Abstract:

The healthcare industry has been grappling with a persistent challenge of nurse retention, which is closely linked to issues of burnout, stress, and job dissatisfaction. As healthcare systems evolve and patient demands increase, the well-being of nurses has become a critical concern. This presentation examines the impact of self-care and wellness models on nurse retention, shedding light on the potential efficacy of these interventions in addressing the multifaceted factors contributing to nurse turnover. Drawing upon a comprehensive literature review, this presentation explores various self-care and wellness models implemented within healthcare settings. It demonstrates how these models encompass physical, emotional, psychological, and social dimensions of well-being, aiming to create a supportive environment that empowers nurses to prioritize their health. By examining real-world experiences and perceptions, this presentation evaluates the effectiveness of self-care and wellness programs in enhancing nurse retention rates. Factors such as access to resources, managerial support, and cultural acceptance of self-care practices are explored to provide a holistic understanding of the barriers and facilitators influencing the adoption of these models.

Biography:

Dr. Webb is the Executive Dean of Healthcare Initiatives at Strategic Education, Inc. Her foci are capacity building, nursing workforce issues and provider wellness. She has extensive funding for her work and has published in several journals. She has testified to the National Academy of Medicine and the White House. A sought-out speaker on international nursing care, Adele collaborates with WHO and the World NCD Congress and has contributed to nurse



capacity building in 56 countries. Adele received the Nicholas Andrew Cummings award for Excellence in Interprofessional Practice, is an International Council of Nurses Global Health Fellow, and a Fellow in both the National Academies of Practice and the American Academy of Nursing.



Assessment of Starsil® Hemostat Efficacy and Safety for Prevention of Intra-Abdominal Adhesions and Hemorrhage during Repeated Cesarean Section (C/S) Prospective Cohort Study- Intermediate Results

A. Tzabari^{1,2,3}, U. Erlik¹, T. Ayalon¹, I. Olteanu¹, L. Harel¹, B. Kaplan¹

1 Department of Obstet. & Gyn. Mayanei Hayeshua Medical Center Affiliated to Medical Faculty Tel Aviv University.

2 Adelson Medical School Ariel University.

3 NESAs – New European Surgical Academy. Berlin. Germany.

Abstract:

Cesarean Section (C/S) is relatively safe surgery, however, complications such as pelvic adhesions, intraoperative bleeding and postpartum hemorrhage are more common in repeat C/S. These complications are most challenging during the intraoperative setting and requires proper care. Recently several biological tissue adhesives have been tested to decrease intraoperative bleeding. A novel adhesive, Starsil® Hemostat is a plant-derived polysaccharide that can be applied directly to a bleeding wound to achieve hemostasis. The process leads to a local concentration of corpuscular blood particles such as erythrocytes, thrombocytes as well as serum proteins and thrombin, accelerating the natural coagulation cascade.

The aim of our study is to assess the safety and efficacy of Starsil® Hemostat in patients undergoing repeat C/S and prevent Adhesions.

Methods: This prospective single arm study included 37 pregnant women who were admitted for elective repeat C/S. The study was begun in January 2022. Before the operation Ultrasound was performed to assess adhesions. During surgery the surgeon evaluated the adhesions and after closure of the lower segment, Starsil® Hemostat was applied to the sutured hysterotomy. After six weeks, a second ultrasound was performed to evaluate adhesions.



Intermediate Results: 37 parturient women participated in the study. Collecting data show no bleeding during operation no PPH and no adverse events using the Starsil® Hemostat. Data of Adhesions Score will be discussed in the Conference.

Conclusion: In Part one of the study, it seems that Starsil® Hemostat is safe and easy to use without adverse effects. In part two of the study in the next C/S, we evaluate the prevent adhesions effect of Starsil® Hemostat.

Biography:

Avinoam Tzabari currently works at the Department of Obstetrics and Gynecology, MayaneiHayeshua Medical Center. Head of Emergency of Obstetrics and Gynecology. Lecturer in Medical Faculty Ariel University. Member of New European Surgical Academy (NESA). His most recent publication is 'Towards safe and efficient cervical dilatation'.



Companotics: A Study in Companion Pets for people with dementia

Dr Joanne Pike

Associate Dean, Wrexham University, UK

Abstract:

Research has previously demonstrated the positive effects of robotic companion pets, but while this is important from a research perspective, their cost renders their widespread use currently unfeasible. This research explored the potential of an affordable robot, with a view to making a realistic difference in quality of life for people with dementia and their carers. Research results involving participants in the community have proved positive, with some very touching stories from participants and their families.

Biography:

Joanne's role at Wrexham University is Associate Dean within the Faculty of Social and Life Sciences, responsible for the Nursing, Allied Health and Sports Injury Rehabilitation undergraduate and postgraduate programmes. Joanne has been a nurse for nearly 40 years and in education for over 20 years. She says, "I am passionate about teaching people to care not just about the body, but the whole patient, the body, mind and soul". Registered with the professional body, the Nursing and Midwifery Council (NMC), Joanne is nurse, district nurse, nurse prescriber and nurse educator. Joanne is skilled in research design, lecturing (subjects: Advanced Clinical Practice, professional practice, and research methods), and curriculum development. Research is important for the development of professional practice, and the first of Joanne's interests is spirituality and its expression in nursing care, which she has been researching since 2009. More recently she has been partnering with her Computing colleagues in the Faculty of Arts, Science and Technology, investigating the effect of Companotics (robot pets) on wellbeing for people with dementia.



Challenges and Barriers to Implementing the Advance Practice Nursing Roles: Reflecting on Jordan's APN Model and Pathway.

Muntaha Gharaibeh RN. PhD

Professor in Nursing, Faculty of nursing, Al- Ahliyya Amman University, Jordan

Abstract:

Regardless of the growing evidence demonstrating positive impacts of the advanced practice roles of nurses on improving quality of nursing care and population outcomes, the stories from various countries are different. APN roles have not been developed in the same way in various countries regardless of the global initiatives and models defining competencies and scopes of practices. Implementation approaches of such roles stay to be an issue and concern for all countries. This presentation will reflect on Jordan's experience as a leading country in advancing the nursing profession at regional level with high commitment to Universal Health Coverage and Sustainable Development Goals. The presentations will reflect on the APN regulatory and professional framework including titles, competencies and the certification process in comparison to that of other countries. Furthermore, the findings of a current ongoing research study on the "Perception of Jordanian healthcare professionals and health policy makers of barriers and challenges facing institutions, regulatory bodies and healthcare professionals for implementation of the advanced practice roles in Jordan" will be shared to support the argument of implementation issues. Identification of factors hindering implementation of such roles are important and essential to moving forward and empowering the nursing profession in Jordan. The presentation will also present pathways and lessons learned for eliminating barriers including future research and policy changes to maximize the contribution of nurses as key workforce in improving Jordanians health outcomes, for a country witnessing a rapid change in its health system landscape, a regional instability and political conflicts and wars resulting in migrations which stay to be a challenge and a concern for further advancements.



Biography:

Dr. Gharaibeh is currently the dean of Nursing at Amman Alahlyya University and a professor at the faculty of nursing –Jordan University of science and technology. A member of the WHO Academy-quality and standards committee and ISQua expert. Former Secretary General of the Jordanian Nursing Council (JNC) Headed by Her Royal Highness Princess Muna Al Hussein;. Dr. Gharaibeh worked as a Dean of Nursing at Jordan University of Science and Technology and Al alBabt University between the years 2001-2010. In addition to her academic career, she works as a national, regional and international consultant on various issues including health systems development and evaluation of maternal and child health services, for various international organizations such as WHO, USAID, UNFPA and other Arab and Jordanian institutions in addition to evaluation of quality of education programs and accreditation of education programs. Dr. Gharaibeh has published and is publishing in numerous international journals on health and empowerment of Jordanian/Arab women mainly on women's health. She represents the health sector and nursing in prestigious national and regional committees where she influenced and still influencing health and social policies. She is the Winner of Princes Muna Award for Excellence in Leadership, 2012.



Nurses' Challenges, Competency, and Adaptation Towards Digitization in Selected Rehabilitation Hospitals in Abu Dhabi, UAE

Ben Joseph Sabilala

Trinity University of Asia, Specialized Rehabilitation Hospital

Abstract:

The integration of digital technologies into healthcare has transformed nursing practice, particularly in rehabilitation settings. This study aimed to comprehensively assess nurses' challenges, competencies, and adaptation levels towards digitization in selected rehabilitation hospitals in Abu Dhabi, UAE.

A descriptive correlational research design with a quantitative approach was employed. Data was collected from 204 registered nurses across three accredited rehabilitation hospitals using a self-made questionnaire. The questionnaire assessed nurses' challenges in digitization adaptation, competencies in digital professionalism, leadership, data management, information-enabled care, and technology utilization, as well as their adaptation levels to various digital tools. The results revealed that nurses agreed that technological, patient-related, nursing-specific, and environmental factors presented challenges in adapting to digitization. They reported moderately high competency levels across the assessed domains but identified areas for improvement, such as online communication and data governance. While nurses demonstrated high adaptation to electronic health records (EHRs), their adaptation to telehealth, medication systems, and mobile applications was moderate. Significant relationships were found between nurses' adaptation, perceived challenges, and competencies.

The study highlights the need for targeted interventions to address nurses' challenges, develop competencies, and facilitate successful adaptation to digitalization in rehabilitation settings. The proposed "Adaptation Framework to Digitization for Integrating D.I.G.I.T.A.L. Technologies to Nursing Care Delivery in Rehabilitation Hospitals" provides a comprehensive ap-



proach, emphasizing stakeholder involvement, workflow optimization, continuous improvement, training, quality assurance, and sustainability strategies. Implementing this framework can enhance clinical efficiency, improve patient outcomes, and advance nursing practice in the digital age while preserving the humanistic aspects of care delivery.

Biography:

Ben Joseph R. Sabilala is a forward-thinking Clinical Academic Supervisor with 15 years of expertise in renal and rehabilitation nursing. He earned multiple educational qualifications with his current achievement - Doctor in Nursing Management and with ongoing Master of Education in Advance Teaching. Currently serving as a Clinical Academic Supervisor at a Specialized Rehabilitation Hospital in Abu Dhabi, he leads organization-wide education and training initiatives across hospital, clinic, and home care settings. Sabilala has received numerous awards, including the SEHA Ihsan Award and The Filipino Times Top 100 Filipino Healthcare Professionals Award, recognizing his exceptional contributions to the nursing profession.



Enhancing Psychological Safety to increase Patient and-Family Advisors involvement in Quality Assurance Committees.

Cherryll de la Cruz

Alberta Health Services, Canada

Abstract:

Introduction: Alberta Health Services (AHS), Canada's largest and most comprehensive integrated healthcare system, is committed to Patient Safety. This commitment extends to a robust adverse event management and reporting system. Central to this is the policy Recognizing, Responding to, Learning From Hazards, Close Calls & Clinical Adverse Events, which is supported by various procedures. These procedures rely on people, processes, and resources within a safe and just culture. Despite best efforts and well-intentioned people, things can still go wrong. However, when people can collaborate to analyze the situation better, identify contributing factors and implement effective changes, we can turn such events into opportunities for learning and improvement.

Background: A quality assurance review (QAR) is AHS's process of reviewing clinical adverse events. The main focus is identifying system deficiencies and generating recommendations to make care safer. The review is conducted under Section 9 of the Alberta Evidence Act, which protects the work and records of quality assurance committees and cannot be used as evidence in legal proceedings. Patient and family advisors provide a unique perspective that strengthens the quality of reviews and recommendations generated from them. After all, only patients know what matters to them and what makes them feel safe. In addition, involvement in this activity can improve their comprehension of patient safety issues, system trust, and healing and recovery from past experiences.



Problem: There are only 11 Patient and Family Advisors in QACs throughout Alberta. Committees know their involvement is invaluable; however, there is a certain degree of hesitation in engaging patient and family advisors due to the sensitive nature of event reviews and psychological risks such as staff's fear of losing their trust in the healthcare system, amongst others.

We can improve Patient and Family Involvement in QARs by building a culture of Psychological Safety for patients, families, and staff. Research proves there is a general discomfort in involving patients and families in event reviews due to various "fears" (retraumatizing/psychological risks, loss of trust, legal risks, and many others) from the staff perspective. Research indicates that microaggressions and microaggressions, medical invalidation, fear of being labelled a problem patient, fear of prompting disciplinary action for involved providers, communication barriers, undermining providers by asking questions or speaking up, and many other shinder a psychologically safe environment for patients in general. We need to explore if the psychological safety of patients and families is one of the barriers to their engagement in adverse event reviews so we can develop effective interventions to engage them better. There is plenty of research and interventions for psychological safety in the workplace; however, the psychological safety of the patients remain san uncharted territory..

Goal: This proposal aims to increase the number of Patient and Family Advisors participating in QARs within a year by establishing resources that support their psychological safety, thereby enhancing their engagement and contribution to the review process.

Methods: We will systematically review the most current evidence and best practices in psychological safety with in a health care environment, specifically for patients and their families. We will conduct focus groups to collect insights and perspectives of current patient and family advisors and QAC members as empirical data. Then, we will use the themes extracted from our study to clarify the problem, identify opportunities, design solutions and implement changes.



Expected Out comes: We plan to co-design a comprehensive bundle of onboarding strategies incorporating psychological safety for patients and family advisors (for example, literacy workshops, coaching sessions, video vignettes, and dramatization) as members of QACs. From data collected from the literature re- view and focus groups, we will brainstorm with our team and partner Patient and Family Advisors and plug the proposed solutions in an Impact Effort Matrix table. We will implement each strategy through Plan-Do-Study-Act cycles. The process measure will be analyzed using a Quasi-Experimental Study Design, Single Pre and Post. Pre- and post-implementation surveys of the strategy's effectiveness, using a 5-point Likert scale on Agreement vs Disagreement as to whether the strategy increased psychological safety. A Bivariable analysis will be used; the histogram will be generated, and a Fit y by x – chi-square test will be used. The Logistic Fit of the Likert Scale by the number of responses generates a ChiSq or Probability Score to show the statistical significance of our results.

Biography:

Cherryll de la Cruz is a registered nurse with a 30-year career in healthcare, primarily in Continuing Care. Passionate about Gerontology, Patient Safety, and Quality, she pursued a Master's in Healthcare Quality and Safety from Harvard Medical School in 2022. She now serves as the Provincial Patient Safety Specialist for AHS. Cherryll collaborated with the Engagement and Patient Experience Department to update the Patient and Family Advisor Resources.

In 2015, Alberta Health Services recognized the importance of Patient and Family Advisors (PFAs) in healthcare quality initiatives, requiring two PFAs on every Quality Assurance Committee (QAC). Despite this, a survey revealed limited PFA participation due to governance changes and resource constraints. To address this, Twin Guidebooks were released in 2023 to simplify PFA resources and encourage engagement. However, participation remains low, with only 8 PFAs reported. Efforts to improve engagement and incorporate trauma-informed care continue.



Transforming Care: A Leadership Revolution in Rehabilitation Nursing

Jannet Tenebro

Specialized Rehabilitation Hospital, UAE

Abstract:

The study examined the implementation of transformational leadership principles in transitioning over 400 acute care nursing staff to rehabilitation nursing professionals in a rehabilitation hospital. This transition required a fundamental shift in care philosophy, emphasizing patient independence and long-term recovery. Hospital leadership adopted a multifaceted approach based on transformational leadership theory. Key strategies included implementing a comprehensive training program, fostering partnerships with international rehabilitation nursing organizations, and cultivating a supportive organizational culture promoting continuous learning. The study analyzed how transformational leaders motivated staff during this transition, focusing on idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration. Leaders communicated a compelling vision of patient-centered rehabilitation care, encouraged innovative problem-solving, and addressed staff concerns and learning needs. Challenges included resistance to change, varying adaptation levels among staff, and logistical complexities of large-scale training. These were addressed through adaptive leadership strategies, peer support networks, and iterative program improvements based on staff feedback. Outcomes included improved patient satisfaction scores, reduced length of stay, and enhanced staff engagement and job satisfaction. The study considered implications for other healthcare organizations undertaking similar transitions, emphasizing sustained leadership commitment, clear communication, and ongoing staff development support.

This research contributed to the knowledge base on transformational leadership in healthcare settings and provided practical insights for nursing leaders facing rapidly evolving care models in rehabilitation. It highlighted the critical role of nursing leadership and management support in facilitating significant organizational change.



Biography:

Jannet Baldevarona-Tenebro completed her Bachelor of Nursing with the highest honors as Magna Cum Laude. She then pursued Master's Degree in Business Administration in Chiefly Business School at Torrens University Australia.

Started as Clinical Instructor to various Nursing Universities in the Philippines and pursued her UAE career as a neurology nurse in Rashid Hospital Trauma Center Dubai, to a Nurse Manager in Burjeel Hospital Abu Dhabi. Jannet has then progressed up the nursing leadership ladder to her current position as Director of Nursing for Capital Health Specialized Rehabilitation Hospital Abu Dhabi UAE in collaboration with Shirley Ryan Ability Lab USA, formerly known as Rehabilitation Institute of Chicago, the number one Rehabilitation Hospital in the US and Health Shield Medical Centre Abu Dhabi UAE.

As the Chairperson of the organization's Education Committee, she has led the hospital to become an Approved Practice Setting by the Department of Health Abu Dhabi. She is a recipient of the prestigious SEHA IHSAN Award for Nursing Leadership in 2023 awarded by His Highness Sheikh Nahyan Al Nahyan. She also received a national recognition as one of the Top 100 Filipino Healthcare Professionals in the Middle East.



Contraception Impact on Women's Health and Personal Autonomy

Ignacio Segarra, PhD

María Victoria Roqué PhD, Micaela Menárguez, PhD

Faculty of Pharmacy and Nutrition, Catholic University of Murcia, Murcia, SPAIN

Abstract:

Exogenous hormone-based contraception affects women's precise hormonal balance and induces an artificial state of anovulation which may lead to risks of adverse effects through physiology reconfiguration and defined biochemical mechanisms: accelerated ovarian aging, cervix aging, replacement of cervical glands type L and S with type G; emotional disruptions, depression, and suicide attempt mediated by receptors in brain areas which regulate emotions (e.g. amygdala); reduced libido (altered concentrations of sex hormone binding globulin, SHBG); cardiovascular adverse effects (brain stroke, myocardial infarction, hypertension, and thrombosis) due to interference with the coagulation cascade and oncological, estrogen or progesterone sensitive breast cancers, cervical and endometrial cancers, although possible evidence to prevent some cancers but remains highly controversial. Women's personal autonomy has been diminished due to poor communication, information avoidance, silence over adverse effects or arbitrary modification of statistical criteria to avoid of statistically significant differences between users and non-users and poor study designs amongst others. These scenarios affect directly women's health and their ability to take an informed decision on their fertility regulation. Furthermore, leads to a cultural environment of scientific mistrust, deficient physician-patient relationships and poor clinical assessment. It is necessary to overcome these challenges with professional integrity, scientific honesty, a holistic anthropological integration of sexuality-a intimate relational expression beyond a physical bodily union and endorsement of women's femininity and autonomy.



Biography:

Ignacio Segarra PhD (University of Valencia, Spain) was a postdoctoral scientist at UCSF (USA). He has worked in the pharmaceutical industry in the USA and Singapore in the oncology field. Eventually, Dr. Segarra joined the International Medical University (Kuala Lumpur, Malaysia) where he was Head of the Department of Pharmaceutical Technology and conducted research on the pharmacokinetics and tissue distribution of anticancer and anti-infective drugs. He returned to Spain in 2010 and held several teaching positions and a research position at the University of Barcelona. In 2017, he joined the Faculty of Pharmacy and Nutrition at the Catholic University of Murcia, where he teaches undergraduate pharmacokinetics, industrial pharmacy, fundamental ethics and bioethics. He is also a lecturer in the Master of Bioethics, the Master of Family Studies, the postgraduate course “Sexual and Affective Education” and the Health Sciences PhD program of the International Graduate School at UCAM. He is the PI of the “Pharmacokinetics, Patient Care and Translational Bioethics” Research Group with focus on the effects of covariate sex on pharmacokinetics and therapeutic outcomes, drug-drug interactions and translational bioethics.



Dilemmas, Diagnosis and Decision Making in Early Pregnancy

Dr Kuldeep Singh

Dr Kuldeep's Ultrasound and Color Doppler Clinic, New Delhi, India

Abstract:

Routine ultrasound examination is an essential part of antenatal care. With ongoing advancements, especially high-frequency transvaginal scanning, has allowed ultrasound imaging resolution to enhance our recognition of normal and abnormal early pregnancy. This has played an important role in understanding human development and also has opened up unparalleled possibilities to study fetal anatomy.

In first trimester of pregnancy, events occur, which define the most critical and important period of human development

The indications of doing an early pregnancy scan could be to suspect miscarriage or fetal death, in vaginal bleeding, to date the pregnancy, as adjuncts to a procedure, suspecting molar pregnancy or ectopic pregnancy or multiple gestation and to localize IUD with pregnancy or to evaluate maternal pelvic masses.

New nomenclature and newer management protocols can only be successful if the diagnosis is more accurate and specific.



Biography:

Dr. Kuldeep Singh has been practicing ultrasound for over 30 years in Delhi, INDIA. He is known for his ultrasound skills in Anomaly Scanning, Color Doppler Scanning and High risk pregnancy evaluation. He has more than 600 lectures in various national and international conferences. He has more than 100 articles and chapters to his credit and has authored 16 books on Ultrasound in Obstetrics, Gynecology and Infertility. His books have been translated into Spanish, Chinese and Portugese. The IMAGING SCIENCE AWARD was honored to him at the AICOG 2008. He has been appointed as associate director of Ian-Donald Inter University School of Medical ultrasound.



The Role of Sociology and Anthropology in Nursing Education: Contributions to Health Challenges

Beatriz Xavier

Coimbra Nursing School, Portugal

Abstract:

Nursing has an interdisciplinary nature and we are all aware of the complexity of the phenomena of health and illness in our world. Most students tend to think that sociology and anthropology have some relevance to nursing and nursing practice, however, the presence of sociology and anthropology in health courses is generally considered problematic, secondary, or optional.

Teaching these sciences to students in the health professions faces considerable difficulties: medical and nursing students often don't realise the relevance of these subjects to clinical practice. They are vaguely defined and the multiplicity of topics they include creates confusion about teaching priorities. Qualitative studies suggest that students find learning sociology in the nursing curriculum "disturbing". In what ways can sociology and anthropology make theoretical contributions and be meaningful?

The aim of this paper is to reflect on the status and difficulties of sociology and anthropology in medical schools, nursing schools and other health-related courses, emphasising the importance and challenges of interdisciplinarity in the training and practice of health professionals.



Biography:

Beatriz Xavier holds a PhD in Sociology of Education, Culture and Knowledge by the Faculty of Social and Human Sciences (Nova University Lisbon), Adjunct Professor at the Nursing School of Coimbra (Scientific Area – Public Health Family and Community Nursing), responsible for the course Sociology and Anthropology of Health at the same institution. His research interests are focused on Sociology and Anthropology of Health and Medicine, teaching health-care professionals, communication, as well as the environment, collective causes, and values.

Researcher at the Health Sciences Research Unit: Nursing (UICISA:E/ESEnFC) and Centre for Functional Ecology - Science for People & the Planet (CFE-UC). Member of the European Society for Health and Medical Sociology and Portuguese Society for Clinical Communication in Health Care, among others.



TRAINING OF HEALTH CARE PROFESSIONALS

Nishu K Singh

CEO, SONO School, India.

Abstract:

Healthcare professionals need training to help them get better in their skills, knowledge, competencies and so have to be constantly upgraded.

What we are trying to achieve is to make sure the healthcare workers are aware of the latest-medical advancements and technologies, in order to provide high-quality care to patients.

At SONOSCHOOL these are the types of training we do for health care professionals:

- Workshops
- Simulation
- Online learning modules
- Group training
- Educational outreach visits

Training covers many topics, like case discussions, problem solving, discussion of reports and online help.

Biography:

Having a background of administration and management, in medical and non-medical organizations. Started career with Human Resource diploma in hand. Worked in British Telecom and Master card. Switched to own Company SONO school as a CEO of the company. Managing medical professionals for their upgradation & training programs. Have been instrumental in organizing for than 50 programs (Online and Offline) in the form of Workshops, Webinars, Quizzes and Group Discussions. Benefitted more than 4000 medical professionals.



How to decrease risks of burnout and compassion fatigue for health care workers

Dr. Nicole Ruyschaert M.D

Psychiatrist, Private practice, Trainer/Supervisor Communication in medical setting, Clinical hypnosis and Psychotherapy, Belgium.

Abstract:

Health care professionals, medical doctors, nurses, psychotherapists, dentists are particularly at risk of burnout, compassion fatigue, vicarious traumatization. More work needs to be done by less people due to the economic problems hospitals have to deal with. Administrative tasks, organizational problems add on the already stressful life many have to face. Exposure to human suffering in medical and therapeutic interactions affects health care workers on a subtle level, where mirror neurons play an important role.

As you all are very aware now of the importance of vaccination to prevent infections, the good news is that there are some practices to increase your resilience, acting as a kind of “vaccination” that protect you against stress or overwhelming experiences. Gentry and Baranowsky describe five professional resiliency skills or “antibodies”, which contribute to “immunity” useful in stressful live circumstances. You will discover how these skills can be integrated in relaxation and (self) hypnosis practices, to be better prepared to deal with stressful life circumstances in a challenging working environment. (Self) hypnosis is helpful to self-regulate and develop a healthy balance. You can use it as a self-care method for stress- and emotion regulation, recovery and to be prepared for challenging situations. Having a goal, finding meaning helps to remain thrived and deal with adversity in the working environment. Reviewing satisfactory experiences improves your mood and contributes to wellbeing.

**Learning Objectives:**

- To develop awareness of upcoming stress.
- To discover your inner compass or locus of control for stress and emotion management.
- To mobilize efficient recovery methods
- To actively promote wellbeing

Key Words: - Burnout, compassion fatigue, self-regulation, self-hypnosis, resilience, healthcare

Biography:

Dr. Nicole Ruyschaert M.D. is psychiatrist-psychotherapist, working in private practice and providing hypnosis training – basic, intermediate and advanced and supervision in medical and psychotherapeutic settings. She is past – president of the ESH (European Society of Hypnosis) and VHYP, and active committee member of ISH (International Society of Hypnosis). She is particularly interested in mind-body interactions and endeavouring to integrate hypnotic work and positive communication in medical settings. She gave many keynotes, lectures and workshops for constitutional hypnosis societies of ESH and ISH in Europe, Canada, USA, China, Iran and Australia. 2019 she received the Shirley Schneck award from the Society for Clinical and Experimental Hypnosis in recognition of her significant contributions in medical hypnosis. 2023 she received The Roll of Honour Award for being instrumental in building up a Constituent Society and therefore the ESH.

She is author of “Clinical Hypnosis”, “(Self) hypnosis helps. A resilient answer to stress, burnout and ptsd”, and “How caring language helps. Dealing with anxiety, pain and stress of patients”. She published papers on burnout, compassion fatigue and happiness in international journals.



Navigating Academic Nursing Racial Hierarchy: An Autoethnographic Journey of Resilience and Self-Empowerment

Julia Ugorji, DNP, MSN/Ed, RN, Southwest Minnesota State University, USA

Nkechinyere Iheduru-Anderson, DNP, RN, CNE, Central Michigan University

Florence Okoro, Ph.D., MSN, RN, University of North Carolina at Charlotte

Abstract:

Background:

Racial disparities continue to plague the U.S. nursing profession and academia. The lack of diversity, equity, inclusion, and belonging (DEIB) in academia leads to low nursing student enrollment, insufficient nurses in the workforce, nurse faculty shortage and disparate healthcare. Black nurses' experiences and contributions to nursing education are often inadequately reflected in nursing literature; their stories are not shared from their perspectives. This narrative exploration aims to amplify the voices of resilience, shedding light on the Black nursing faculty/leaders' invaluable role in shaping the current and future of nursing practice and education through personal reflections. This will further highlight the experiences and perspectives of Black Nurse Faculty and pinpoint their critical role in fostering DEIB in nursing education.

Method: A qualitative research study using collaborative autoethnography (CAE) design was used for the study. Purposeful sampling was used for the recruitment of Black nursing faculty. Ten Black nursing faculty individually responded to three reflective journaling questions after IRB approval. The individual narratives were thematically analyzed.



Result: The study process resulted in four major themes: mentoring, a culture of oppression, a sense of duty, and breaking the cycle to build a legacy accompanied by thirteen sub-themes reported.

Implication: The contribution to diversity, equity, and inclusivity science is critical to better meet the needs of the diverse patient and student population. Black nursing faculty have unique needs as they adapt to academia. Lack of DEIB in academia can lead to misunderstandings, mistrust, and poorer health outcomes.

Biography:

Dr. Ugorji is a nurse leader with administrative management skills leading programs. She has served as the Associate Dean / Chief Nurse Administrator at Metropolitan State University, Dean of Nursing and Health Professions at North Hennepin Community College, and Associate Dean of Nursing at Rasmussen University, all in Minnesota. Currently, an Assistant Professor at Southwest Minnesota State University teaching in graduate and undergraduate programs. She is serving as an external advisor to the MN Governor's office on Public Engagement and a fellow with the Carnegie African Diaspora Fellowship Program (CADFP). Dr. Ugorji has served in different University committees such as the President's round table, Dean's committee, Academic Affairs, etc. She is active in professional organizations and serves at different levels including; American Nurses Association Commissioners for Addressing Racism in Nursing, Board member of the National Association of Nigerian Nurses in North America (NANNNA), NANNNA past National President 2014-2015, Association of Black Nurse Faculty (ABNF) Education Committee Co-chair, etc. Dr. Ugorji has received several leadership awards, including the United States President's Lifetime Achievement Award for Community Service, International Leadership Award from CAFBLC, & NANNNA Leadership Award.



Women's Health, the Reproductive System, and Cardiovascular Implications

Dr. Latiena Williams

Healthcare Leader, Educator, and Advocate for Equity, USA

Abstract:

The intersection of women's reproductive health and cardiovascular health is an emerging area of critical importance. Hormonal fluctuations throughout the reproductive lifespan including puberty, pregnancy, and menopause have profound effects on cardiovascular function, influencing risk factors and outcomes for conditions such as hypertension, heart disease, and stroke. This abstract examines the unique interplay between the reproductive system and cardiology, focusing on conditions such as preeclampsia, gestational diabetes, and polycystic ovary syndrome (PCOS), which significantly elevate long-term cardiovascular risks. The physiological changes during pregnancy and the impact of menopause, characterized by a decline in estrogen, are explored as pivotal events in women's cardiac health.

Biography:

Dr. Latiena Williams is a visionary nurse educator, healthcare leader, and advocate dedicated to improving health equity and advancing the nursing profession. With a Doctor of Nursing Practice (DNP) degree, Dr. Williams has demonstrated exceptional leadership in nursing education, clinical practice, and community health outreach, with a focus on underserved and marginalized populations.

During her tenure as a faculty member, Dr. Williams excelled in mentoring nursing students and developing innovative curricula that emphasized cultural competence, health equity, and evidence-based care. Her research and advocacy efforts have centered on addressing systemic inequities in healthcare.



Key Achievements:

Advancing Women's Health: Her expertise in women's health and reproductive health has informed her teaching and practice, with particular attention to cardiovascular risks associated with reproductive health conditions.

Community Health Leadership: Dr. Williams has worked extensively with underserved communities, providing health education, increasing access to preventative care, and fostering community partnerships to improve health outcomes.

Resilience and Advocacy for Justice:

Dr. Williams' dedication to ethical leadership and accountability has been reflected in her advocacy for transparency and fairness in professional settings.

With a commitment to empowering the next generation of nurses and advancing health equity, Dr. Latiena Williams continues to lead with integrity, inspiring others to strive for justice, innovation, and compassionate care in healthcare and beyond.



Women with disabilities and access to reproductive health services in Poland

Agnieszka Wołowicz

University of Warsaw, Poland

Abstract:

Access to reproductive health services is currently one of the most discussed political, social, and cultural issues in Poland. Equality in healthcare occurs when everyone has the opportunity to receive an adequate response from the system, and no one is disadvantaged due to disability, gender, other factors, or socially conditioned circumstances. However, this principle does not apply in most societies, where women, representatives of various minorities, including women with disabilities, still face unequal treatment and discrimination in interactions with healthcare institutions. This presentation will discuss the barriers to access to reproductive healthcare and the practical consequences of this situation for women with disabilities. Using the example of gynecological care, I will show how systemic, social, and organizational factors have led to women with disabilities encountering many barriers in accessing the highest possible standard of sexual and reproductive health, making decisions related to sexuality without coercion, discrimination, and violence. The analysis of interviews conducted with women with various types of disabilities revealed, in addition to a lack of respect for the autonomy of this group of patients, other types of barriers: lack of support, inadequate infrastructure and procedures, communication barriers, and awareness barriers.

Biography:

Agnieszka Wołowicz, psychologist, educator, works at the University of Warsaw. Author of publications on women with disabilities, reproductive rights of women with intellectual disabilities, currently conducting research on violence against woman with disabilities. Social activist and ally of people with disabilities in efforts to implement the principles of the UN Convention on the Rights of Persons with Disabilities.



Driving Operational Excellence in Healthcare Through Six Sigma, ISO 7101 Compliance and 3D Immersive AI Innovations

Cornelia Campbell-Swart

Optimal Solve, Meta-Dology Pulse, South Africa

Abstract:

In today's healthcare landscape, operational excellence is critical for delivering high-quality-patient care while managing limited resources and ensuring regulatory compliance. This presentation explores a comprehensive approach to healthcare improvement by integrating Six Sigma methodologies, ISO 7101 standards and 3D immersive AI technology. Six Sigma's data-driven framework is widely recognized for reducing inefficiencies and improving patient outcomes (Antony et al., 2007). When paired with ISO 7101, which provides robust health care quality and safety management guidelines, organizations can ensure compliance while driving continuous improvement in patient care (Moe and Pathania, 2020).

The novel element of this approach lies in the inclusion of 3D immersive AI technology, which is revolutionizing healthcare training and real-time decision-making. Recent studies show that immersive AI training can reduce human errors by up to 30%, while also improving staff preparedness in high-risk clinical situations (Mason, Nicolay, and Darzi, 2015). By simulating real-world medical scenarios in a risk-free environment, health care professionals can practice complex procedures and enhance their decision-making capabilities (De Koning et al., 2006).

This presentation will provide practical insights into the integration of these methodologies, highlighting case studies where healthcare facilities achieved significant improvements in operational efficiency, patient safety, and compliance. The combination of Six Sigma, ISO 7101, and 3D immersive AI not only drives measurable improvements but also fosters a culture of innovation and continuous learning in healthcare organizations. This approach promises to enhance care delivery in both clinical and administrative contexts, providing a roadmap for future healthcare excellence.



Biography:

Cornelia Petronella Campbell-Swart

Six Sigma Operational Excellence Expert (OPEX), ISO Systems Consultant, 3D Immersive-Technology Specialist. Cornelia is a registered nurse (Baccalaureus Curationis) with qualifications in Six Sigma asan Operational Excellence Expert (OPEX), and holds an international NEBOSH diploma. She is also an expert in ISO standards, including ISO 9001, 45001, 14001, and 7101, where she consults on quality, safety, and environmental compliance. Cornelia's passion lies in driving innovation within healthcare, integrating 3D immersive AI technology to improve operational performance, staff training and patient safety. She actively contributes to transforming healthcare organizations by blending traditional operational excellence techniques with cutting-edge technology solutions.



Gender inequality, emotional impact and human dignity: a human look at the complex reality of women living with HIV

Regina De Souza Alves¹, Renata Karina Reis²

1. Affiliated: Municipal Health Department of Maceió/Al (SMS), Society of University Education of the Northeast (SEUNE)

2. Affiliated: Department of General and Specialized Nursing, Ribeirão Preto School of Nursing, University of São Paulo

Abstract:

There are numerous challenges to eradicating the Human Immuno deficiency Virus (HIV) pandemic in the world, including stigma and social discrimination towards people living with the infection. Globally there are 39 million people infected, in 2022 alone around 630 thousand people died from AIDS-related illnesses. Regarding women, there are numerous predictors of vulnerability, such as: gender inequality, intimate partner violence, emotional and financial dependence on the partner, among others. Such issues cause women to become emotionally ill, violate their dignity and strongly interfere with their treatment and their lives. Studies with women living with HIV point to a context of submission to partners, fear of abuse and less autonomy to negotiate safe sexual behaviors, which leads them to risk behaviors for infection and violation of their dignity, since, they have knowledge about safe sexual practices, but they are unable to protect themselves, making themselves vulnerable to numerous sexually transmitted infections (STIs), worsening their health status. Furthermore, strong stigmatization and social discrimination translate into negative beliefs, attitudes and feelings towards themselves, which constitute predictors of treatment abandonment, concealment of HIV status, hopelessness, discouragement, low self-esteem and depression. In this way, the infection can progress to AIDS, which still remains the main cause of death for women aged between 15 and 49 in the world. It is concluded that, in addition to expanding treatment, care and prevention alternatives for For



people living in the context of HIV, it is necessary to focus even more efforts on overcoming concepts, reducing stigma, promoting positive attitudes and providing a more dignified view of women living in the context of the infection.

Biography:

Regina de Sousa Alves. Higher education teacher, researcher, writer, Nurse. PhD in Sciences from the University of São Paulo (USP/2022). Master in Bioethics and Legal Aspects of Health at the Universidade Del Museo Social Argentino (UMSA/2015), Buenos Aires (AR), graduated in Nursing from the Federal University of Sergipe. Extensive experience in the area of Health Education, Ethics and Bioethics with a focus on female issues. Professor of the undergraduate Nursing course at the Northeastern University Teaching Society - SEUNE. Currently, the Assistant Nurse in the Specialized Care Service (SAE) at Pronto Atendimento Médico (PAM) Salgadoinho, Maceió/Alagoas, where she cares for people living with HIV. The content of the lecture refers to an excerpt from my doctoral thesis. Doi access: doi:10.11606/T.22.2022.tde-10112022-153858.



Nursing: The importance of reconstituting academic literature in Artificial Intelligence time.

Etleva RUSTAMI1

Irida PANO1; Ergys RAMOSACO1, Etleva SMAKAJ1, Valbona BEZHANI1, Alma PULA, Kujtime VAKËFLLIU2

1Department of Clinical Subject. University of Medicine Tirana, Albania.

2Universiteti Barleti, Tirane

Abstract:

Introduction: Nursing professionals are constantly seeking to improve the quality of teaching in their field. This requires a preparation which would enable obtaining adequate knowledge to improve their work in health care environments. In technology era, proving teaching and enriching the teaching methodology with which the students will learn will enable their training with the appropriate academic and clinical knowledge. This is an important aspect for the future of the professional nursing. According to UNESCO, artificial Intelligence (AI) has the potential to address some of the biggest challenges in education today, innovate teaching and learning practices, and accelerate progress towards ensuring inclusive and equitable quality education and promote lifelong learning opportunities for all.

Aim: This study examines the main problems that nursing students encounter in the use and understanding of AI, academic texts, with the aim of identifying challenges and providing strategies for their improvement.

Methods: A qualitative study in which 175 nursing students participated was conducted during April-May, 2024, in the premises of the Faculty of Nursing, in Tirana, Albania. The questionnaire was used to collect information about their expectation and attitude toward AI and current teaching methodology. Basic socio-demographic information was also collected. Bi-



nary logistic regression was used to assess factors associated with inadequate/problematic (limited) HL.

Results: Preliminary results indicate that students are optimistic about the use of AI. They acknowledge that the application of theoretical knowledge to clinical practice needs more support from academics. Teaching didactic materials need to be updated. The analytical results will shed more light on the actuality of the institution.

Keywords: student, lecturer, AI, performance.

Biography:

Etleva Rustami is an Associate Professor at Tirana Medical University, Faculty of Technical Medical Science, with over 20 years of experience in healthcare and academia. She holds a PhD focusing on maternal and child healthcare in Albania and has expertise in pediatric nursing, neonatal care, and healthcare management. Etleva has a diverse academic background, including a Master's in Premature Baby Management and a Bachelor's in Social Sciences, with additional training in teaching from Haute Ecole de Santé in Switzerland.

She is a prolific author with publications in English and Albanian, addressing neonatal outcomes, nursing education, and healthcare literacy. Active in curriculum development and healthcare reform initiatives, Etleva is committed to improving patient care and advancing nursing education.



Updates in New Audiology Technologies for ENT Nurses: Digital auditory scanning

Angel Barbero

Audiology Coordinator at AUDIOCENTER, SPAIN

Abstract:

The hospital's ENT nursing team must be up to date with the new techniques that are being incorporated in Audiology. Among them, for example, the new ear scanner systems for measuring the size and shape of hearing aids for hearing impaired

The danger of copying users' ears using the classic system of introducing silicone into the EAC using a syringe has now been overcome/defeated by Oto scan 3D systems: These systems allow the technician who scans to only need to point the scanning camera/probe into the ear canal and the system will scan the shape and folds of the canal using laser light, giving us a 3D image as a copy of the anatomy. This allows the 3D model to be moved and rotated in any direction in space to analyze and view it from any angle.

And all this without injecting any silicone, or endangering the tympanic membrane by contact with the silicone, or perforations due to errors or lack of expertise on the part of the technician. The time is also reduced to a quarter and it is not necessary to use Otto block (the piece of cotton that we placed to retain the silicone and prevent it from entering too deeply into the canal towards the ear drum)

In this presentation at the 2024 International Conference on Nursing and Healthcare, we are going to show this technique in a simple and practical way, to make the ENT nursing teams (and their Heads of Service and Unit Managers) aware of these new techniques, which are already used by audiologists who later treat their patients in Hearing Centers.



Biography:

Ángel Barbero, Audiology coordinator at AUDIOCENTER, SPAIN

Ángel Barbero began his training at the University of Alicante and in Alcaláde Henares (Madrid), complementing it with postgraduate courses at the University of Santiago de Compostela and the Complutense University of Madrid.

He also graduated from the Escuela del Clot (Barcelona) and has participated as a speaker in numerous international conferences (Rio de Janeiro, Dubai, Santo Domingo, etc. in the last year). He is currently Coordinator of Audiology in Seville (Spain) where he has numerous articles on audiology published in national and international health journals.



NURSING: LIFELONG LEARNING

Alma PULA, (PhD candidate)¹, Etleva KIKA, Valbona BEZHANI, Valentina TELHAJ²; Etleva RUSTAMI¹; Anila DINE³,

1- Universiteti i Mjekesise Tirane, Faculty of Technical Medial Sciences

2- Clinical Psychology

3- Qendra Universitare “Nene Teresa”, Department of ACV.

Abstract:

Introduction: Advances in lifelong learning in nursing constitute a major conceptual shift. The concept of lifelong learning has prevailed for several decades, but in nursing it gained importance mainly in the 1990s. not directly, but indirectly and with a general understanding by all nurses. The involvement of nurses in lifelong learning has also been a strong recommendation of WHO.

To this end, organizations and centers related to the nursing service were encouraged to collaborate to enable nurses as well as nursing students to engage in lifelong learning to obtain the qualifications required for the care of different people in society. Capacity building and commitment to lifelong learning is a new approach that has attracted institutes, industries and institutes of higher education that have felt this need. One of the points emphasized by UNESCO on the eve of the 21st century was the one related to continuous learning in the field of health.

Purpose: This study aims to examine nurses’ and nursing students’ perceptions of lifelong learning at two levels: conceptual and pragmatic. At the first conceptual level, the study aims to examine the nature of the perception of the concept of lifelong learning by nursing students and practicing nurses. In the second pragmatic level, the study aims to ascertain the mechanisms and other elements that would be necessary for the realization of lifelong learning as a practical activity in nursing.



Methodology: The qualitative research design includes three methods for data collection: individual interviews, focus groups and documentary analysis. Here will also be presented my long experience and reflections as a nurse for more than 30 years, where approximately half of this time belongs to my role as a nursing educator. This will be supported by a thorough analysis of the data that will be collected during the study from structured interviews and focus group discussions.

Result: The general expectation of the study is that it will contribute to further understanding of lifelong learning at both philosophical and practical levels in nursing students and practicing nurses.

Key word: lifelong learning, nursing, nursing care.

Biography:

Alma Pula currently works at the Medical University of Tirana and European University of Tirana. She is involved in nursing education and has been actively involved in training health care professionals since 1998. She is a national trainer and global trainer. She trains the health care professionals regarding to screening, brief interventions and treatment for people who have substance use problems. She has had an active role in developing the nursing field in Albania. She was born in Tirana, Albania, married and has two boys. She started working in nursing at the Paediatric Hospital, today QSU “Mother Teresa”. She has been working there for 15 years before she started teaching at the nursing school. She has been taken care of children and adults with variety health problems. She is the co-author of the book “Fundamentals of Nursing”. She has been in several positions like vice-director of Higher Nursing School, Vice-president of Albanian Nursing and Midwifery Association, and General Secretary of Health Care Union. Her expertise has been varied and very rewarding. She has been working as a nurse with Kosovo Refugees and in a Cardiovascular Surgery Hospital. She is actively involved in teaching nursing and development of nursing profession in Albania. To support her goal for “Excellence in nursing care”.



Currently, she is working on her PhD thesis. She is certified as global trainer in delivering UTC(2017), and as Addiction Professional with ICAPI. She has finished nursing in Quindamine Community College, USA and she is a Registered Nurse in USA since 2009. She completed her Master in Science of Education at European University of Tirana, 2014. She has been trained on the improvement of quality of nursing care, nursing education, international health and leadership.

She believes that nursing in Albania will achieve the position it deserves in Albanian society.



Outcome of care and factors related with necrotizing enterocolitis of very low birth weight preterm infant in the neonatal intensive care unit

Rattanarutai Na suwan¹, Chayaporn Wongyai¹, Inn-on Chanapan¹, Chitlada Phenglai¹, Wasana Lavin¹

1. Ramathibodi Chakri Naruebodindra Hospital, Samut Prakan, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Thailand

Abstract:

Background : Necrotizing enterocolitis (NEC) is severe and life-threatening emergency in newborns and it is a major cause of neonatal mortality. NEC is the significant cause of infant Death that mean to avoid the severe complications, such as intestinal perforation, necrosis, sepsis and ultimately death in newborns.

Objective : For study the outcomes of care and the relative factor of necrotizing enterocolitis in preterm with very low birth weight infants in the neonatal intensive care unit at Ramathibodi Chakri Naruebodindra Hospital.

Methods : This studying research are compile the data between January 1, 2022, and December 31, 2023. Data were analyzed by using statistics including frequency, percentage, mean, median, standard deviation. The relationship was analyzed by Chi-square, and Fisher's Exact Test statistic.

Results : The sample of 65 patients in neonatal intensive care unit with gestational age less than 34 weeks and body weight less than 1,500 grams are 9 case (13.8%) theirs occurred necrotizing enterocolitis. Factors associated with NEC in preterm with very low birth weight



infants were gestational age less than 29 weeks ($p=0.001$) and birth weight less than 1,000 grams ($p=0.017$).

Conclusion : The results of study is a basic data for preparing a nursing care and caring this infants according to standards and more efficiency and reduce the complications.

Keywords : necrotizing enterocolitis, Very low birth weight, Preterm infant



The Study of G6PD deficiency and Neonatal hyperbilirubinemia in the neonatal intensive care unit, Ramadhibodi ChakriNaruebodindra Hospital

InnonChanapan¹, Chayaporn Wongyai¹, Wasana Lavin¹

1. Ramathibodi Chakri Naruebodindra Hospital, SamutPrakan, Faculty of Medicine

Ramadhibodi Hospital, Mahidol University, Thailand

Abstract:

Background: G6PD deficiency and neonatal jaundice are common in infants and have a chance of causing acute hemolysis. It also causes high bilirubin in some newborns. When bilirubin accumulates in the brain, it causes damage to the nervous system.

Objective: To study G6PD enzyme deficiency and the occurrence of jaundice in neonatal intensive care units. and factors associated with G6PD deficiency in 128 cases in RamadhibodiChakriNaruebodindra Hospital.

Method: A descriptive retrospective study studied G6PD enzyme deficiency and neonatal jaundice from 1 January 2023 to 31 December 2023, using statistics to analyze data including frequency, percentage, mean, and standard deviation. And analyze the relationship between factors that affect the occurrence of G6PD enzyme deficiency using Fisher's exact test and the Chi-square test.

Results: G6PD deficiency was found in 11 infants (8.59%) treated with phototherapy 124 cases (96.88%), single phototherapy 118 cases (95.16%), Double phototherapy 5 cases



(4.03%) and triple phototherapy 1 case (0.81%) Factors associated with G6PD enzyme deficiency in infants with jaundice include twin pregnancies (p-value=0.014), neonatal hypoxia (p-value=0.019) and Infants with intracerebral hemorrhage (p-value =0.032).

Conclusion: Results of this study suggest that infants with G6PD deficiency are at increased risk of complications.

Keywords: G6PD deficiency, jaundice, neonates Preterm infant



Early-onset sepsis and the related factor among refer-in case in the Neonatal Intensive Care Unit

Titiporn Bundasak

Ramathibodi Chakri Naruebodindra Hospital, Samut Prakan, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Thailand

Abstract:

Background: Early-onset sepsis in newborns (EOS) is the cause of death and morbidity in newborns. This was an effect of neonatal cell injury and impaired neurological development.

Objective: This retrospective study aimed to evaluate the factors affecting EOS in the neonatal intensive care unit (NICU). In this study, 95 neonates who had clinical sepsis and blood culture laboratory testing were enrolled. This research was studied at Ramathibodi Chakri Naruebodindra Hospital between January 1, 2022 to December 31, 2023.

Methods: The analysis statistics were used the frequency, percentage, mean, and standard deviation. The relationships between variables were used the Chi-squared tests and Fisher's exact tests.

Results: There were 95 newborns who refer-in and 90 cases were received from private hospitals. There were 5 cases (5.26%) of EOS. The related factor with the EOS was the mother with preeclampsia ($p=0.031$). The other factors such as the premature rupture of membrane, Apgar score 5-minutes, and gestational age were not significantly associated with EOS ($p>0.05$).

Conclusion: Our study shows the incidence of EOS in refer-in case is very low. This result was a suggestion for screening and counseling among maternal during prenatal care attendance to prevent complications in newborns.



Outcomes of care in neonatal hypoglycemia in the neonatal intensive care unit, Ramadhibodi Chakri Naruebodindra Hospital

Chayaporn Wongyai, Saowalak Prasopa¹ , Wasana Lavin¹

1. Ramathibodi Chakri Naruebodindra Hospital, Samut Prakan, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Thailand

Abstract:

Background: Hypoglycemia in newborn is a common problem. It is resulting in brain damage, nervous system function and develops learning abilities, language skills, computational thinking, and age-appropriate skills.

Objective: To study the outcomes of care and maternal-neonatal risk factors associated with neonatal hypoglycemia.

Methods: This research study is a retrospective, descriptive study between January 1, 2019, to December 31, 2023. The analysis statistics was used for analysis including frequency, percentage, mean, median, standard deviation. Relationship was analyzed using Chi-square statistics and Fisher's Exact Test.

Results : The incidence of hypoglycemia in the neonatal in intensive care unit from 2019 to 2023, total 61 cases, average blood sugar level 28.33 (\pm SD 11.16) mg/dL. There were representing 2.20%, 3.50%, 3.70%, 3.30% and 11.10% per year respectively. The trend was increasing. The associated factors with hypoglycemia in newborns founded in the maternal factors were gestational age (p-value <0.001) and antenatal steroid exposure (p-value=0.006). In neonatal factors were twingestation (p-value = 0.037), oxygen requirement (p-value=0.032),



intravenous glucose infusion, and feeding within 24 hours of birth (p-value = 0.037 0.032, respectively).

Conclusion: Screening for neonatal hypoglycemia in high-risk newborns is critical to reduce the incidence and mitigate life-threatening and long-term impacts on the infant's quality of life.

Keywords: Outcome of care, Preterm infant, Very low birth weight



Impact of COVID-19 Pandemic on Changes in Japanese Nursery Teachers' Perceptions of Infection Control

Satoko Yokota

Asahi University, Japan

Abstract:

Objective: Japanese nursery schools regularly face infectious diseases such as influenza and infectious gastroenteritis despite following the infection control manual of the Ministry of Health, Labour, and Welfare. The global COVID-19 outbreak in 2020 has increased demands on infection control in such settings. This study clarified the impact of the COVID-19 pandemic on nursery teachers' perceptions of infection control.

Methods: The author conducted questionnaire surveys with nursery teachers from eight nursery schools in Aichi Prefecture in 2019 and eight in Osaka Prefecture in 2023. We collected 120 valid responses in 2019 and 87 in 2023. The Aichi Prefectural University Research Ethics Committee approved the 2019 survey, and the Osaka Seikei University Ethics Committee approved the 2023 survey. Additionally, facility directors from all participating schools approved the research. The author reports no conflicts of interest with this study's findings.

Results: In 2019, 20% of respondents reported substantial knowledge of infectious diseases, which increased to 35.6% in 2023. Conversely, reports of limited knowledge dropped from 28.3% in 2019 to 10.3% in 2023. The percentage of teachers who felt their routine infection prevention measures were sufficient rose from 9.2% in 2019 to 28.7% in 2023. Feelings of anxiety about infection outbreaks within facilities decreased, with 37.5% expressing anxiety in 2019, compared to 16.1% in 2023. In 2019, 18.3% of teachers felt they could respond appropriately when experiencing poor health, which increased to 42.5% in 2023. The perception that infection prevention in nursery settings is challenging remained similar, at 49.2% in 2019



and 43.7% in 2023. Belief in handwashing effectiveness as a preventive measure was consistently high, with 42.5% in 2019 and 47.1% in 2023.

Discussion and Conclusion: The COVID-19 pandemic has emphasized the need for enhanced infection control in Japanese nursery schools. Increased media coverage and public health information likely heightened nursery teachers' awareness of infectious diseases. Since 2020, Japanese nursery schools have increasingly prioritized infection prevention as teachers have adjusted their practices compared to pre-pandemic measures. The consistently high recognition of the crucial role of hand hygiene in 2023 indicates a need to continue emphasizing handwashing. However, since nursery teachers still experience anxiety about infections among children and staff, future infection control measures should align more with the specific challenges of nursery school environments.



Nursing Wisdom from Indigenous People

Dr. Nina Beaman

Chief Nurse Administrator, School of Nursing and Health Sciences, Aspen University, Arizona, USA

Abstract:

Much can be learned about the art and science of nursing from examining the culture and traditions of Indigenous People. In this keynote, Dr. Beaman will discuss the values, wisdom, art, science, and reasoning of these wise people. She will address issues related to doing research about Indigenous People and the need to acknowledge their contributions in nursing education.

Biography:

Dr. Beaman is the Chief Nurse Administrator of the School of Nursing and Health Sciences at Aspen University. She has taught in academia since 1993. Dr. Beaman is certified as a nurse educator, psychiatric nurse, women's health nurse, and medical assistant. She has earned Ed.D., MSN, M.S. in health psychology, B. A., Diplôme D'Etudes Françaises, ADN, and A. S. in business. She lives in Virginia, U. S. A.

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