FOURTH WONCA EAST MEDITERRANEAN FAMILY MEDICINE CONGRESS

Abstract Book

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Health problems after a recent flood among the people of Alo'r Chor: extremely rural community of Bangladesh

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Natural disasters are catastrophic events with atmospheric, geologic, and hydrologic origins.¹ Floods are the most common natural disaster in both developed and developing countries, and they are occasionally of devastating impact.¹ Bangladesh is a flood-prone country where rising waters and displacement affects many people every year. Diseases in rural community after natural disaster reflects preparedness and current health status of a country and suggests way to improvement.

Cross-sectional type of descriptive study done with the peoples of 'Alo'r Chor' island under Kurigram district from August to September 2016 having 277 sample size. Non-probable purposive sampling was done. Data were collected by face to face interview, saved and analyzed with Microsoft-Excel-2010.

The study shows majority of the subjects were female (54%) and male were 46%. Patients mostly belong to age group 21 to 40 years (29.2%) and almost equal in group 5 to 10 years (28.8 %). The most common complaint was multiple symptoms (26%). Among which Abdominal pain with fever and cough suggesting gastrointestinal with URTI has found mostly (22.72%). Majority of 0-5 years children came with fever with cough indicating URTI (23.80%) . For age group 6-20 years the frequent complaining was earache (23%) followed by earache leading to deafness (21%) both was associated with minimum or no URTI symptoms. Adult age group (20years+) had frequent complain of multiple symptoms (27.10%) which includes limb injuries, mechanical pains, eye infections, gastrointestinal symptoms and for the women genitourinary symptoms suggesting acute infections.

The study shows variation of disease with age groups. Occurrence of diarrheal disease indicates the awareness for waterborne disease whether a considerable portion of children had ear infection leading to deafness. This reflects betterment of the health-education and limitation of single system related awareness. Extended health facilities with door step services and expanded health education is required.

Poster No. 2

Cohesion and Family Adaptability of Patients with Diabetes Type 2 Controlled and Uncontrolled

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Objective: to determine the difference in cohesion and family adaptability of patients with diabetes mellitus type 2 controlled and uncontrolled. Design: Observational, transversal, descriptive and
comparative. Material and methods: we included 147 patients with diabetes mellitus 2, who attended consultation in 33 family medicine unit, applied a metabolic control, and FACES III survey for family adaptability and cohesion. Results: 71 out of control patients (48.29%) and 76 patients controlled (51.71%). Patients with metabolic control was found for family Cohesion: not related: 72.36%, Semi related: 15.78%, related: 6.66% and Aglutinada: 5.26%. For family adaptability: Rigid: 1.31%, structured: 9.21%, Flexible: 3.94% and chaotic 85.54%. For patients with metabolic disorder, was found: family Cohesion: not related: 85.93%, Semi related: 7.04%, related: 1.40% and Aglutinada: 5.63%. Family adaptability: rigid: 12.67%, structured: 1.40%, Flexible: 9.85% and chaotic 76.08%. For family Cohesion, was a chi square 5.39; 0.020 p. For family adaptability: Chi square 0.12; 0.726 p. Conclusions: Families with diabetic patients tend to extreme cohesion, which is emphasized in the uncontrolled patients. Uncontrolled patients have rigid structures compared with the controlled. So the lack of cohesion and the rigidity of the family influence the lack of control of diabetes mellitus.

Poster No. 3

Family Medicine Capability in Medical Disaster Response

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Every disaster holds a potential for significant impacts on human health and life. Every new threat presents new challenges to health risk management. However, Family Medicine faces an uncertainty on the specific roles it can assume to support urgent efforts at surge disaster response. Its preparedness level remains unknown. This Capstone Project, designed to explore issues of Family Medicine competency in this changed disaster response environment, conducted a disaster preparedness and response workshop among 28 Family Medicine physicians, testing their learning rate using a pretest-posttest data collection method. Pretest results (38.11%, x = 10.67) indicate that Family Medicine practitioners as a group were not ready by competency to respond to a disaster event and may instead increase the life risks of disaster victims. Posttest results (x = 21.67, 77.39%) showed an average doubling of their learning levels, indicating the booklet manual education effectiveness in improving their disaster preparedness and response competency. For Family medicine practice to move forward into the disaster response plan, family physicians must participate in more comprehensive disaster training programs for professional development reasons, but preferably towards a certificate in disaster response under the NIMS program.

Poster No. 4

Knowledge, Attitudes and Practices of Primary Care Physicians in Colorectal Cancer Screening, Jeddah, Saudi Arabia 2012

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Background: Colorectal cancer (CRC) is the second leading cause of cancer death, and accounts for approximately 9 % of cancer deaths overall. In Saudi Arabia, CRC accounting for 9.9 % of all newly diagnosed cases in year 2007. It ranked first among male population and third among female population. Although CRC is lethal diseases, but it is also one of the most preventable forms of cancer. PHC physicians are the gateway to CRC screening
Objectives: To assess knowledge, attitudes, and practices of PHC physicians regarding CRC screening in MOH, Jeddah, Saudi Arabia, 2012.

Methods: cross-sectional

Results: The study included 106 PHC physicians out of 127 invited to participate in the study, giving a response rate of 83.5%. Almost one-third of the (34%) were in the age group 25-29 years while 6.6% of them aged 50 years or more. Female physicians represent 63.2% of them. The majority of the physicians (91; 86.7%) recommended Fecal occult blood test (FOBT) for CRC screening while Flexible sigmoidoscopy, colonoscopy and double contrast barium enema were recommended by (56; 53.3%), (73; 68.9%) and only 23 physicians (21.7%), respectively. Slightly more than half of the physicians (55; 52.9%) reported that they have ordered or performed FOBT to screen for CRC. Shortage of trained providers to conduct follow-up with invasive endoscopic procedures and shortage of trained providers to conduct screening other than FOBT were cited by 73.3% and 64.8% of the physicians.

Conclusion: knowledge and a positive attitude toward FOBT is high and consistent with increasing support for population based FOBT screening in asymptomatic patients over 50 years of age. The majority of our sample indicated that they would recommend such screening tool. However, the practice is suboptimal.

Poster No. 5

Diabetic foot care in Family Practice

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Diabetes Mellitus is a syndrome of chronic hyperglycemia due to relative insulin deficiency, resistance or both. About10-15% of diabetic patients develops foot ulcers at some stage in their lives. Diabetic foot problems are responsible for nearly 50% of all diabetes related hospital admission. Diabetes currently affects about 200 million people worldwide and is expected to reach 333 million by 2025, with most of the massive burden falling in developing countries.

Foot ulcers are common complications of diabetes with prevalence of 4-10%. They become infected frequently; can be expensive to treat increasing the morbidity. Literature reports that 49-85% of all diabetic foot related problems are preventable. This can be achieved through a combination of good foot care provided by a multidisciplinary diabetes care team including primary care physician and appropriate education for patient and health care professionals.

The World Health Organization estimates a 190% increase in the number of people living with diabetes in Oman over the next 20 years. Omanis have high rates of diabetes-related complications and more than 50% of amputations are attributed to diabetes mellitus. In Arab world, peripheral arterial disease is commonly found in diabetics with 4% -10% prevalence of foot ulcer.

There is a need creating awareness about the importance of appropriate self-care in patients and motivate health care professionals as well as educating them proper foot examination.

Poster No. 6
Knowledge and Awareness about Cervical Cancer Vaccine (HPV) Among Parents in Sharjah

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Human Papilloma Virus (HPV) infection is the most leading cause of cervical cancer (CC) and other diseases worldwide. Despite several measures taken to reduce the risk of infection with HPV, the most effective method is the HPV vaccine. The aim in this study was to assess the knowledge and attitudes of parents in Sharjah towards HPV and whether they would vaccinate their daughters.

A cross-sectional study of 400 subjects was conducted in public venues in Sharjah. Convenient sampling method was used for selection of the sample. A self-administered questionnaire was distributed. Results were compared to those found in similar researches. Participants’ responses were analysed using SPSS 21.

78.3% of the population had heard of CC, 41.3 % of HPV, and 36.5% of the HPV vaccine. Among them, the percentages of the correctly answered knowledge-related questions were found to be 66.2%, 50.9% & 52.1% for CC, HPV & HPV vaccine, respectively. 76.6% of parents were willing to vaccinate their daughters. The percentage increased to 92.9%, had the ministry of health (MOH) recommended the vaccine. Spouse’s level of education was found to be significant.

Despite the public’s lack of knowledge, the study showed a noticeable increase in parent’s willingness to vaccinate their daughters if the government approves the HPV vaccine. Therefore, MOH should work towards approving the HPV vaccine as soon as possible. Moreover, the media should provide more information about HPV and the vaccine so as to increase awareness and willingness of the public to vaccinate their daughters.

Poster No. 7

Medical Students Knowledge and Perception regarding Complementary and Alternative Medicine used in Dyslipidemia and Diabetes treatment

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Objective: The aims of this study are to estimate the self-perceived competence knowledge, attitude and practice (KAP) regarding complementary and alternative medicine to control of dyslipidemia and diabetes in medical student, to determine the influence demographic and socioeconomic factors on the level of KAP.

Background: Complementary and alternative medicine (CAM) is used in health care and is rapidly evolving. CAM are not presently considered to be part of conventional medicine but frequently used by patients as self-medication and prescribed by health care provider in diabetes and dyslipidemia. Medical student’s knowledge regarding CAM used in diabetes and dyslipidemia is imperative to handle this in patient care.
Method: A cross-sectional survey based study conducted at Oman Medical College. Data was collected with self-filled questionnaire asked about their attitudes and beliefs regarding use of CAM used in dyslipidemia and diabetes. Data was analyzed using Statistical Package for Social Sciences (SPSS) version 20.

Results: A total of 101 medical students participated; 18 (17.8%) were male and 83 (82.2%) were female. 101 participants, 74 (73.3%) were Omani and 27 (26.7%) were non-Omani. The most frequent responses were agree (49.5%) for the usage of herb/supplement is very common and 48.5% were agree that for practice of CAM should be asked during a regular history taking of patients. More than a half of the participants were agreed or strongly believe that high cholesterol is a risk for heart attack, HDL is a protector for heart disease, walking increases HDL, reduction in LDL will reduce the risk of heart attack and high fiber diet is effective to reduce cholesterol.

Conclusion: Majority participants have good knowledge regarding CAM, however specific knowledge treating diabetes and dyslipidemia. This can be achieved by providing education and training to the by organizing continuing medical education programs.

Poster No. 8

Teaching Physicians and Paramedics to Work Together to Interpret an Effective History in a Multicultural State

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BACKGROUND AND PURPOSE: A multi-disciplinary Mobile Healthcare Service was introduced in Qatar in 2014. The model a Family Physician / Nurse, and Ambulance Paramedic (AP) doing home visits in a multicultural population. The history is essential for Healthcare Practioners to reach their diagnoses. Misinterpretation is a risk to patient welfare, and language differences a barrier to accessing effective care. Healthcare Practioners are not used to communicating via interpreters; APs have neither trained as interpreters nor worked alongside other professionals.

To develop a workshop whereby APs and Healthcare Practioners are trained together to conduct effective history taking through interpretation.

METHOD: A literature review was done to ascertain existing standards for the medical model of interpretation.
1- Candidates received a pre course booklet and questionnaire
2- A one-day workshop using a mixture of lectures and simulated patient interactions was developed. The role play activities engaged the Healthcare practioners and the AP’s in scenarios with an Arabic speaking simulated patient.
3- Evaluations were conducted by the three course facilitators, two bilingual in Arabic and English. Candidates are assessed on their technique, accuracy (including non-bias), and language proficiency.
4- Facilitator and Peer debriefing was conducted after each role play with the candidate by the participants in the role play, the other course participants, facilitated by one of the course facilitators.
5- Course feedback by the candidates to the facilitators was collected at the end of the course for improvement purposes.
RESULTS: All candidates to date have passed their assessment and feedback from participants indicated they valued the skills acquired through the various didactic and experimental learning approaches used.

CONCLUSIONS: The principles, standards, modes, and technique of interpretation could be successfully taught using this method. Teaching the Healthcare Practitioners, and APs simultaneously helped both to appreciate the other, team build, and develop a level of cultural awareness.

Poster No. 9

Experience of Moroccan Peer-Group of Salé: a Methodology for Self-Study and Evaluation of Practice.

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Context and Objectives: Continued medical education and evaluation of practice has increasingly become mandatory. While the “peer groups” methodology has witnessed significant decline in Europe, a group of GP in Salé has applied since April 2008. This study aims to investigate the commitment of the group to that methodology and its impact on self-training and evaluation practices among the group under scrutiny.

Methodology:
Each meeting includes 3 phases:
1. Explanation of a selected clinical situation randomly chosen by each GP.
2. Analysis of the local care network.
3. Free time.

We analyzed the reporting forms for meetings of the study group of 8 years (April 2008-April 2016).

Results:
All doctors members of this group are all GPs geographically close to each other.
The group has held 90 meetings, with an average of 11 meetings per year and 6 participants per session; and has fully complied with the 3 times of each session.
Each session had a moderator and a secretary.
The minutes of each meeting were always done during the meeting.
The group presented 577 clinical cases during the first sessions.
The clinical case presentations were varied, reflecting the real practice of GP.
The resolution of issues raised by clinical cases was reached either during the meetings or scheduled at the following meeting and resolved during the 3rd time. The study also identified the problems of local care network.

Conclusion: The study showed that our group has adhered perfectly to this methodology “peer group”, which has had a positive impact on the evaluation of its practice through an objective analysis of this practice.

Poster No. 10
Issues of Informed Consent in Research in Children

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Background and purpose: Protection of children is a universal principle derived from respect for persons and beneficence. By law, the parents/guardians are in the best position to give consent for their children, who are presumed to be incompetent until a certain age (18 years old in Nigeria). The issues of adequate comprehension of the informed consent process for the best interest of the child, at that time and in the future was investigated.

Method: The study utilized qualitative research methods such as in-depth interviews, small group discussions and content analysis.

Results: In general, the mothers who gave consent did not have an accurate understanding of the main issues involved in research, and most often gave their consent because they believed the authorities would not allow their children to be harmed. The study describes the communal influence on individual autonomy in this setting, which serves as a protective measure. Signing of the consent form appears to be more for the benefit of the investigator for accounting and reporting purposes than for the participant. It should not be interpreted as showing a full understanding of its contents. Even though they appeared to understand the process of randomisation, they were not content with it. Our communities have distinct social relationships and processes that support the development of social values in every man, woman and child in the community. In the mothers' views, the whole concept of assent by a child was not a strange idea and conformed to their traditional practices and should be encouraged to ensure compliance by the child and development of the child's autonomy over time.

Conclusion: Ethics review boards require close review and monitoring of research in children due to the limited comprehension of informed consent by their parents/guardians.

Poster No. 11

The Prevalence of Hypothyroidism among Females Age 35 - 49 Years in Haoutat PHC in (KSA)

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Background and purpose: Hypothyroidism is a common and treatable disorder. It affects mainly females more than males. This study was conduct to assess the prevalence of hypothyroidism among Saudi females age 35 - 49 years in Haoutat PHC in (KSA) and to find main symptoms and signs among group of these females with hypothyroidism

Methods: The study was a descriptive cross sectional study carried out in primary health care center in Haoutat in (KSA). Three hundred ninety seven females aging 35 to 49 years were included in this study, using simple systematic random technique. Demographic and clinical data, complete blood picture, total cholesterol, triglyceride, serum TSH and as well as serum free T4 were recorded for every females.
Result: The mean age of the studied population was 37.87±3.14 years. 6.3% were found to be hypothyroid. There were statistically significant differences between hypothyroid group compared with the normal group regarding menstrual irregularity (p value= 0.001), history of presence of congenital anomalies and cretinism (p value= 0.001). Also there were statistically significant differences regarding dry skin (p value= 0.001), per orbital edema (p value= 0.001), weight gain (p value= 0.001), diastolic hypertension (p value= 0.001), bradycardia (p value= 0.001), slow speech (p value= 0.001), slow movement and delayed relaxation (p value= 0.001) fatigue (p value= 0.001), galactorea (p value= 0.001) in hypothyroid cases compared to the normal group. Hypothyroid cases compared to the normal group also showed statistically significant difference of serum TSH (p value= 0.001).

Conclusion: A significant percentage of Saudi females aging 35 to 49 years suffer from hypothyroidism, and this highlights the importance of increase in the awareness of family physicians regarding main symptoms and signs of hypothyroidism in Saudi females.

Poster No. 12

Eating habits Among Health Care Providers During Working Hours At National Guard Health Affairs - Riyadh

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Background: Poor dietary habits can impact negatively the well-being of healthcare workers (HCWs). Although some studies have demonstrated the deleterious effects of unhealthy eating habits of HCWs, they are limited and their results may not be generalized to other professions.

Aim of the study: This study aims to explore the dietary habits among different health care workers at King Abdulaziz Medical City (KAMC) in Riyadh, Saudi Arabia.

Subjects and methods: A cross sectional survey conducted between June 2015 and August 2015. A validated questionnaire was distributed to HCWs and 388 HCWs completed it. Chi square and Fisher exact test were used to analyze categorical variables and independent sample t test was used for quantitative variables. P value <0.05 indicates statistical significance.

Main results: Saudis HCWs comprised (69.1%) and (57%) of the participants were females. Majority (46.7%) are residents and nurses (23%). Half of HCWs work more than 8 hours daily. The most frequently consumed foods and drinks are sweets (46.6%) and coffee (66.2%). Females eat more fruits and vegetables than males (47.1% vs. 18.6%, p=0.000). Saudis are less likely to eat fruits and vegetables than non-Saudis (49.7% vs. 66.1%, p=0.001) and they binge eat at home more than non-Saudis (61.9% vs. 22.5%). The prevalence of overweight and obesity is 35% and 16% respectively. The most important barriers for adopting healthy dietary habits are work load (69.6%) and unavailability of healthy food (55.4%).

Conclusion and Recommendations: HCWs adopt unhealthy dietary habits due to work load, inadequate break time and unavailability of healthy food in the hospital and it has affected their work performance and well-being negatively. Therefore, Health care organization like KAMC-RD should introduce healthier foods with reasonable price in the hospital catering, and oversee organization of work load in a way to ensure adequate break time for the HCWs.
**Poster No. 13**

**Exercise Knowledge, Attitude and Practice among Pregnant Female at Al-Wazarat Health Center, Riyadh 2015**

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Background: pregnant physical inactivity and its consequences are one of the biggest problems among Saudi pregnant women. The need to explore the pattern of women exercise, beliefs and reasons for not doing exercise are not clear which emphasize the need of conducting this study.

Aim: To improve the level of exercise knowledge and practice among women during pregnancy.

Methods: Cross sectional study using simple random sample to recruit mothers from al-Wazarat health center (N=442). Data were collected by self-administered questionnaires.

Results: 41.62% of pregnant women had high level of physical activity awareness and practice and 58.37% had a low level of awareness. Statistical difference was found between the two groups in parity, education level, work status and family income. Pregnant women preferred walking as exercise. Although pregnant women are aware of PA benefits during pregnancy but feeling tired was the most reported barrier for physical inactivity.

Conclusion: This study shows that there is no correlation between awareness of PA during pregnancy and the practice. Forthat, establishing well designated strategies about physical activity intervention sessions to promote for PA among pregnant women are important.

**Poster No. 14**

**Prevalence of Cognitive Impairment in Senior Patients Attending the Family Medicine Clinics, Kasr Alaini Faculty of Medicine: A Cross-Sectional Descriptive Study**

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Background and Purpose: Neurocognitive disorders are increasing globally and are predicted to increase in developing regions. General practitioners have an essential role in the early detection and provision of continuous medical care for these patients.

The objective of this study was to determine the prevalence of cognitive impairment (CI), and the socio-demographic and medical correlates among 150 senior patients aged ≥ 60 years attending the Family Medicine outpatient clinics, in Kasr Alainy Faculty of Medicine, Cairo University.

Methods: A cross-sectional descriptive study conducted on 150 subjects, aged 60 years or more. Each participant was subjected to a comprehensive medical assessment, El-Gilany socioeconomic status scale,
the Arabic version of the Montreal Cognitive Assessment (MoCA), the Arabic version of the Standardized Mini Mental Status Examination (SMMSE) and the Arabic version of the 15-Item Geriatric Depression Scale (GDS-15).

Results: Based on the MoCA (original cut-off), the prevalence of mild cognitive impairment (MCI) was (52.7%). Based on the MoCA (level of education cut-off), the prevalence rates of MCI and dementia were (3.3%) and (2%) respectively.

Based on the SMMSE (original cut-off), the prevalence of dementia was (6.7%). Based on the SMMSE (level of education cut-off), the prevalence of dementia was (2%).

There was a statistically significant difference between the prevalence rates of cognitive impairment (CI) when the 2 cut-offs were used for both tests.

Conclusions: Our results indicate that the prevalence rates of dementia and MCI are influenced by the instruments used. Therefore, appropriate cut-offs adjusted to our patients' educational level are required.

Poster No. 15

Patients’ Knowledge, Perception and Attitude regarding Complementary and alternative medicine to control Dyslipidemia and Diabetes in Primary care

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Objective: To estimate the knowledge, attitude and practice (KAP) regarding complementary and alternative medicine to control of dyslipidemia and diabetes in the adult population.

Background/Introduction: Complementary and alternative medicine (CAM) is the group of medical and health care practices and products that are not generally considered to be part of conventional medicine. CAM remedies can be an important component of health self-management in diabetes and dyslipidemia.

Methodology: A cross sectional survey based study was carried out at a public health awareness program organized by Oman Medical College. All adult >18 years consent to participate in the study were included. Statistical analysis was performed using SPSS (IBM SPSS Statistics 20.0). Data was expressed in frequencies and percentages and independent sample t-test was used.

Result: A total of 95 participants have filled the questionnaire, 71.6% were below 50 years and 58.9% were male. Self-reported problems 55.8% were type 2 diabetes, 24.2% were hypertensive, 12.6% had known dyslipidemia and smoker. 45.3% were taking medications only 31.6% were having physical activity. Most commonly used herb was garlic 32.6%, black seed and cinnamon 24.2% 26.3% were using it to control diabetes. Nearly half of survey respondents believed CAM can help them achieve better control high cholesterol and diabetes (48.4%) and has fewer side effects (50.5%). An independent samples t-test revealed no statistical significant difference regarding knowledge of CAM between males and females.
Conclusion: Lack of knowledge in heart disease in the public can appear in the form of unhealthy behaviors. Furthermore its insight may help to transform the gaps in public knowledge which can be filled by increasing health educational programs on Heart disease and Life style modification strategies.

Poster No. 16

An Accredited Continuing Professional Development (CPD) Peer Review Group for Encouraging Family Physicians' Clinical Learning, Reflective Practice and Collegiate Support.

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Background and Purpose: Small group learning shared by peers has been shown to have positive impacts on professional development as well as providing a collegial, supportive environment that promotes reflective practice. A formal peer review group that meets monthly, and has formal CPD accreditation, was developed for family physicians in the Hamad Medical Corporation Ambulance Service.

Methods: A needs analysis conducted in 2015 showed family physicians indicated a preference for attending small group workshops, and also Balint style reflective groups. A combination format, based on physicians’ experiences in Ireland and in Australia, led to the formation of this regular CPD activity. Some of the challenges included coming to a shared understanding of the group's functions; developing learning objectives; and variable attendance given 24 hour service needs and frequent leave periods. The current format is a meeting held “after hours” i.e. in the evenings, once a month, for 2 hours. 1 - 2 doctors will present a case or clinical challenge they have experienced, and the group then has a further analytic and reflective conversation. An emphasis is placed on respecting confidentiality, professionalism and a concern for the validity of others' experience and knowledge. The collegiate support can come in the form of validating, normalizing and sharing of similar challenges. The evaluation is positive and members regard this activity positively. This workshop is an opportunity to consider how and why you may develop this in your workplace, how to achieve accreditation for CPD. Participants will also spend half the workshop experiencing a peer review group by participating in a structured case discussion.

Results: The workshop will assist educators, team leaders and clinicians in developing their educational and leadership skills. Hopefully it will encourage them to develop similar programs in their own workplaces to support the professional development of their colleagues.

Poster No. 17

Awareness, Knowledge, and Perception of Ischemic Heart Disease among General Population

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Objective: The purpose of this study was to assess the knowledge and perception of general population regarding ischemic heart disease (IHD).

Background: Assessment of the awareness of ischemic heart disease as a cause of morbidity and mortality is mandatory to improve knowledge of risk factors and degree of adoption of lifestyle modification strategies.

Methods: A cross sectional study was carried out at a public health awareness program in Muscat, Oman. More than 200 participants have attended the event. Data was collected using a structured self-filled questionnaire including demographic, risk factors and statements regarding IHD by choosing appropriate responses yes, no or don’t know. Data was analyzed using Statistical Package for Social Sciences (SPSS) version 20

Results: A total of 101 participants have filled a questionnaire. The age ranged from 18 to 63 years of age, with an average age of 37.95 ±12.2 years. An independent samples t-test revealed no statistical significant difference (p: 0.69, 95% CI: 0.73-1.1) regarding knowledge of IHD risks between males (8.86±2.48) and females scores (9.05±2.03). No statistical significant difference (p: 0.24, 95% CI: -1.64-0.45) was observed between participant’s with age less than 40 (8.72 ±1.99) and participant’s with age more than 40 scores (9.33±2.7).

Conclusion: In this study we found significant gaps about the awareness of heart disease and its Risk factors among the General population. Lack of knowledge in heart disease in the public can appear in the form unhealthy behaviors. Furthermore its insight may help to transform the gaps in public knowledge which can be filled by increasing health educational programs on Heart disease and Life style modification strategies.

Poster No. 18

Occupational health and wellbeing for healthcare workers - looking after our own.

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Background: There is heightened awareness in Qatar of the need to promote workplace health and well-being, and develop systems for the reporting of work related ill health. The Hamad Medical Corporation Ambulance Service (HMCAS) recognized this need and is developing a multi-faceted strategic plan to “look after its own”. A healthy and engaged workforce is known to lead to higher productivity, better teamwork and improved patient outcomes with lower rates of error. An ambulance service faces the usual healthcare risks (infectious agent exposure; musculoskeletal injuries, traumatic stress and burnout) as well as risks of road and air traffic accidents. The need to build capacity and educate front line staff and managers was recognized, as well developing a staff clinic as a spoke of the corporate staff clinic, to provide occupational health and well-being services targeted to HMCAS needs. The multidisciplinary approach sees family physicians with skills in occupational health; paramedics; nurses; managers and mental health consultants working together to build systems to support staff.
Aim: This workshop aims to introduce clinicians, supervisors and managers to basic concepts of occupational health and safety, and how to support workers in safe return to work. Mental health “first aid” is an essential part of this training.

Methods: A structured, multi-professional QCHP CPD accredited workshop was developed following a needs assessment. The workshop will engage participants in a 2 hour interactive, multi modal small group format using didactic presentations; case studies; small group discussions and videos. It will encourage the sharing of past experiences, useful tools, barriers, and what could be done better.

Results/Conclusions: Enabling better recognition and management of staff health and well-being, and encouraging peer supports in health services, should assist participants in leading service development in their own workplaces.

Poster No. 19

The Undergraduate Family Medicine Course: A Promising Step in Kasr Alainy Faculty of Medicine, Cairo University

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Background and Purpose: Family Medicine is concerned with the provision of comprehensive medical services to all members of the family, regardless of their age or gender. It is the cornerstone in an effective health care system. With the growing emphasis on Family Medicine, it was essential to start incorporating Family Medicine in the undergraduate medical curriculum in Kasr Alainy Faculty of Medicine. The aim of this study was to evaluate the first undergraduate Family Medicine program provided by the Family Medicine department in Kasr Alainy Faculty of Medicine.

Methods: Two elective undergraduate courses were conducted in the Family Medicine department, July 17 to August 4/2016, and August 7 to August 25/2016. Each course lasted a 15-day period. Topics were presented in a symptom-based, interactive approach, covering the commonest health problems seen in the primary care level. A concurrent embedded mixed-methods design was employed for the program evaluation. Quantitative data (pre- and post-test results) and qualitative data (lecture evaluation forms and end-of-course questionnaires) were collected.

Results: Twenty-one candidates were enrolled in the first course. Only 14 of them were eligible to sit for the post-test. Eighteen candidates were enrolled in the second course. Only 4 of them were eligible to sit for the post-test. The pre- and post-tests contained 32 single best answer clinical case scenarios (applied knowledge test). For the first course, the pretest score average was (45.6%), but the post-test score average was (65.3%). For the second course, the pretest score average was (44.1%), but the post-test score average was (63.3%).

Conclusions: Family medicine is a cornerstone specialty in the health care system. Undergraduate training programs should be implemented to face the rising demand of family physicians. We suggest implementing Family Medicine training in the undergraduate medical education, in Kasr Alainy Faculty of Medicine.
Poster No. 20

Primary Care Physicians Knowledge and Attitude about Human Papillomavirus Vaccine in Prince Sultan Military Medical City, Riyadh

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Background and Purpose: Cervical cancer is one of the most common cancers worldwide. It is considered the 8th most common cancer in Saudi women. The relation between human papillomavirus (HPV) and cervical cancer has been established. However, due to the lack of national studies, the actual prevalence and incidence of HPV infection and cervical cancer cannot be estimated. Additionally, the primary care physicians can play a great role in health promotion and education. Therefore, this study is aimed to assess the primary care (PC) physicians' knowledge and attitude regarding HPV, its vaccine, its relation to cervical cancer, and to determine their opinion regarding possible barriers against offering HPV vaccines to the patients.

Methodology: A cross-sectional study among primary care physicians at Al-Wazarat Center in Riyadh, using a self-administered questionnaire. A simple randomized sampling was done to include 82 male and female physicians, who are working in the general clinics. Two-independent samples t-test and one-way Analysis of Variance (ANOVA) were used in the data analysis.

Results: The study showed that 96.3% of the participants would like the vaccine to be available in their institution. Additionally, it showed that the mean level of knowledge regarding HPV, HPV vaccine, and cervical cancer among the participants was very good. Female gender and more than 20 years of medical practice were associated with increased level of knowledge regarding HPV and its vaccination. Finally, the participants reported that the most important barriers against offering the HPV vaccine were the patient's compliance on the 3-dose schedule and their cultural background.

Conclusion: Despite the good results seen in the current study, the physicians’ level of awareness about HPV related diseases and prevention should regularly be assessed. However, this study serves as a baseline for future studies, and an evaluation tool for measuring physicians’ awareness progress.

Poster No. 21

Patient Recovery Centre, an Innovative and Cost Effective Way of Reducing Burden on Acute Beds at Hamad Medical Corporation

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Background and Purpose: Hamad Medical Corporation has been facing a major challenge of high demand for acute beds and reduction of beds due to critical infrastructure maintenance. Patient Recovery Centre (PRC) (also called Bayt Al Dhiyafa or Medi-hostel) opened on 1st, March 2015.
Successful Medi-hotel model in Australia (1,2) has shown reduced length of stay and readmission rates for focused populations.

PRC provides short stay accommodation for patients who no longer need acute medical/surgical care. Patients who meet the admission criteria are transferred to PRC after assessment and provided with bed, meals and nurse oversight.

PRC has 55 beds which includes 15 female beds. All the treatment provided during the stay is free of cost.

Methods: Retrospect analysis of medical notes and nursing records from March, 2015 till August, 2015. Data was analysed based on age, gender, primary speciality referring the patient, nationality, length of stay at PRC and number of patients readmitted to hospital.

Results: Patients transferred to PRC 302, mean age 35.50 (range 19-77), all were male patients.

134(44%) patients transferred from General Surgery, 72(24%) Trauma and Orthopaedics, 46(15%) Mobile Healthcare, 21(7%) Medicine, 16(5%) Haem/ Oncology, 10(3%) Urology and one patient each from Neurology, Neurosurgery and Maxillofacial Surgery.

Based on nationality, 68(22%) Nepalese, 58(19%) Indian, 47(15%) Bangladeshi, 36(12%) Egyptians, 19 (6%) Sri-Lankans, 19(6%) Filipinos, 15(5%) Pakistanis and 40(13%) patients from other nationalities.

Total number of days of stay for 302 patients at PRC was 922 days (number of acute hospital bed days saved).

Only 10 (3%) patients were readmitted to acute hospital due to different reasons.

Conclusions: PRC provide a safe, high quality and cost effective alternative to acute beds in medically stable patients in a multi-ethnic community in Qatar. We plan to review data at two years to study further effectiveness of this service.
Objectives: This study aimed to assess risk factors for ED and socio-demographic characteristics of patients with ED from Shebin El – Kom District attended The Andrology Clinic in Menofiya University Hospital during the period from 1st December 2015 to 31st May 2016.

Patients and methods: This was a cross-sectional study that was conducted on 169 patients with ED from Shebin El – Kom District attended The Andrology Clinic in Menofiya University Hospital during the period from 1st December 2015 to 31st May 2016. Information on sociodemographic data, risk factors for ED and effect of ED on QoL was collected using a self-administered questionnaire "sociodemographic questionnaire, (IIEF) questionnaire, risk factors questionnaire and WHOQOL-Bref.

Results: The main sociodemographic characteristics affecting ED are age of the patient (P=0.001) and age of patient's wife (P<0.001). The main risk factors for ED are lifestyle risk factors "smoking (P=0.000) and obesity (P=0.005)", medical conditions "DM (P<0.0001), HTN (P=0.0002), heart disease (P=0.019), dyslipideamia (P=0.013), LUTS (P=0.005), hypogonadism (P=0.004) ", drugs "BB (P=0.000) , insulin (P=0.016), psychiatric drugs (P=0.006) and silymarin (P=0.001)" and penile and pelvis injury (P=0.032). Psychogenic factor is present in most cases of ED. In patients with ED other domains of (IIEF) including "orgasmic function, sexual desire, intercourse satisfaction and overall satisfaction (89.7%)" are reduced. Also ED negatively affects all domains of QoL.

Conclusion: According to our results, the main risk factors are aging, CVD, diabetes, dyslipidemia, lifestyle issues (such as smoking and obesity), penile or pelvic injury and side effects from medication. ED has a significant negative impact on other domains of IIEF and quality of life.

Poster No. 23

Formative OSCE to Enhance Confidence of Undergraduate Medical Students in Communication skills

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Background and purpose: Effective communication is essential for a doctor-patient relationship. Medical graduates need core communication skills that are relevant for clinical practice. Experiential learning activities where students receive feedback improve their communication skills. The aim of this study was to enhance students’ communication skills during Family medicine clerkship using formative OSCE (Observed Structured Clinical Examination).

Method: A pilot formative OSCE was introduced for undergraduate fifth year Medical students at the University of Sharjah in UAE on December 2014. Twenty-five students participated in the pilot formative OSCE as part of formative assessment during their Family Medicine rotation. Students performed clinical tasks that required application of communication skills including breaking bad news, counselling for smoking cessation, explaining insulin therapy, explaining investigation results, writing and explaining a prescription and gathering information from a patient. Students rotated around 10 stations in groups of two or three. Each student performed a clinical task in seven minutes while being observed by a clinical faculty and two peers. A five-minute structured feedback from faculty and peers followed. Data was collected through written surveys and semi-structured interviews with participants. Wilcoxon signed-rank
Test was used to compare the confidence level of the students before and after the formative OSCE. Data from focused group interviews was analysed through an iterative process of thematic content analysis.

Results: Results obtained from the surveys and the focus groups were consistent. The formative OSCE was acceptable for both students and clinical faculty. A pre-OSCE and post-OSCE perceived confidence survey showed a significant increase in students’ confidence in all performed communication skills.

Conclusion: This formative OSCE provided a practical opportunity for students to perform various communication skills thus become more confident in the performed tasks. Students experienced giving and receiving feedback in a safe learning environment within a limited period of time.

Poster No. 24

Early Detection of Chronic Obstructive Pulmonary Disease (COPD) in Family Practice

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Background: In real practice Chronic Obstructive Pulmonary Diseases (COPD) is often diagnosed at a late stage as its clinical manifestations pass unnoticed and spirometry is almost not utilized. Objectives: To clarify the possibility of early detection of COPD by family physicians at the primary care level.

Methods: The study was conducted during the winter season 2015 in Al-Shohadaa family health center, Al-Shohadaa city, Menoufia governorate, Egypt. All patients ≥ 40 years, smoking ≥ 10 pack-years attending the center with respiratory symptoms were subjected after their consent to a spirometry to check for early COPD diagnosis.

Results: Although based on spirometry 33 out of 192 had COPD (18 (9.4%) had GOLD I and 15 (7.8%) had ≥ GOLD II, respectively), there were no significant difference in the type and number of respiratory symptoms between non-COPD and COPD patients. Conclusion. It was demonstrated that symptoms’ presentation especially in early stages could not discriminate patients with COPD so training of family physicians and availability of spirometry which is the gold diagnostic test in primary health care level is a mandatory challenge.

Poster No. 25

Vaginitis among Married Women Attending Primary Heath Care in Tanta District, Al-Gharbia Governorate Egypt

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Vaginitis is an inflammation of the vagina. It affects all age groups from adolescents to postmenopausal women and is the most common gynecological problem facing the provider of primary care as it affects women daily activities. It may complicated with cervicitis, salpingitis, endometritis, urinary tract infections and pelvic inflammatory disease.

Objectives: to determine prevalence and risk factors of vaginitis among women attending the primary health care sites.

Subjects and Methods: The study was done in a randomly selected two family health care centers representing both urban and rural sectors of Tanta District, El-Gharbia Governorate, conducted during the period from May 2014 to April 2015. A cross-sectional analytical study involving all women attending the selected sites during the period of the study. It was found that, 160 women were suffering from vaginal who compared with 240 healthy women as a matched control group. Questionnaire was designed to obtain full history, analysis of vaginal complaint and speculum vaginal examination & laboratory examination of discharge.

Results: Out of all studied women 38.8% had fungal infection, 31.3% had bacterial vaginosis and 8% were diagnosed as trichomoniasis. The study showed statistical significant difference between cases of different types of vaginitis regards age of patients, IUD use, previous attacks, vaginal douche, menstrual hygienic pads, drying after vaginal wash and using of public toilets.

Conclusion & Recommendation: the study showed a significant relation between vaginitis and using of IUDs, and hormonal contraception and bad menstrual hygiene. The women are in need for continues health education program.

Poster No. 26

Life satisfaction patterns among elderly persons attending a daycare center (UCO) compared with those who do not: a cross-sectional study, Bahrain 2015.

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Life satisfaction and overall mental well-being of elderly people has become an important aspect in geriatric care, especially with the continuous rise in percentage of elderly population worldwide and in Bahrain specifically. Hence, it is important to identify the factors and social facilities – like elderly daycare centers – that are associated with better life satisfaction among elderly people. The proposed study provides a baseline guide for policy makers on whether or not there is a need for elderly daycare centers in Bahrain for improving elderly’s psychological health and well-being. This study compared the prevalence of life satisfaction and depression between 2 populations, each was comprised of 69 elderly subjects (56 females and 13 males) aged 60 years and above. One population attended regularly an elderly daycare center “Dar UCO Day Care Center” located in Muharraq, Kingdom of Bahrain, while the other did not attend any daycare center and was obtained conveniently from primary health care centers in the same geographic area (Muharraq). Life satisfaction was measured by the “Life Satisfaction Scale by Dr. Majdi Moh’d Aldassooqi”, on the other hand, depression was measured by the “Geriatric Depression Scale (GDS) by Sherry A. Greenberg”. Both scales were in Arabic and were previously implemented in the
Kingdom of Bahrain. Data was collected from the 23rd August to 10th September, 2015 and was analyzed using the SPSS program. The study concluded that 69.6% of those attending UCO are satisfied with life compared to 49.3% of those from the health care centers. In addition, 47.8% of the individuals in UCO population are depressed compared to 52.2% of those in the health care centers population. Such results imply that those attending daycare centers, being surrounded by others of the same age group, have higher life satisfaction and are less likely to suffer from depression.

Poster No. 27

The Impact of Ramadan Fasting on Glycated Haemoglobin and Lipid Profile among Type 2 Saudi Diabetic Patients in Najran city, Kingdom of Saudi Arabia

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Aim: This study aimed at assessing the effects of Ramadan fasting on HbA1c and lipid profile among Type 2 Saudi diabetic patients in Najran city, Saudi Arabia.

Subjects and method: This is a prospective cohort clinical study which enrolled 289 patients with Type 2 diabetes who opted to fast during the month of Ramadan and was attending the outpatient clinics of Najran University Hospital. Fasting blood samples were taken one month before and one month after Ramadan, to assess fasting blood glucose (FBG), glycated haemoglobin (HbA1c), and fasting lipid profile. I evaluated some anthropometric parameters such as body weight (Kg), systolic (SBP) and diastolic blood (DBP) pressures (mm Hg).

Results: There were significant improvements in some metabolic parameters, HbA1c percentage showed a significant decrease in the period after Ramadan (P< 0.000), reflecting better glycaemic control; the study is particularly focused on HbA1c as it is important marker for glycaemic control. Body weight showed no significant change, as well as systolic blood pressure (SBP) and diastolic blood pressure (DBP).

Conclusion: Ramadan fasting had significantly lowered HbA1c, fasting blood glucose and improved the overall lipid profile, but had small positive effects on body weight, BMI as well as SBP and DBP in Type 2 diabetic patients. The present decrease in the level of HbA1c during Ramadan fasting is significant and may provide an alternative approach to a better glycaemic control without having to use certain drugs.

Keywords: Type 2 Diabetes mellitus, Ramadan, Glycaemic Control, Lipid Profile, Najran, KSA.

Poster No. 28

Evidence Based Medicine Practical Steps for Family Physicians

Dr. Noha Dashash¹, Dr. Hanouf BinHimd
Evidence Based medicine should be practiced by all health providers, yet mastering its skills can be a challenge. Family physicians need to practice evidence-based clinical practice (EBCP). However, they are faced with many challenges. The workshop will focus on the most important skills in practicing EBCP along with hands-on practical examples. This will include:
- Formulating questions, using the PICO educational prescription.
- searching for pre-appraised evidence.
- using handy evidence-based applications
- clarifying common types of Bias in the literature.
- introduction to critical appraisal

Poster No. 29

An association between vitamin D status and Body Mass Index in a group of Saudi Arabian population.

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Background: Levels of vitamin D in the population have come under increasing examination; however there are only a few studies in Saudi Arabia which measure levels in the general population. The aim of this study was to measure the levels of vitamin D in Saudi population and examine the association with BMI and life style.

Material and Methods: A cross sectional study of 94 participants with age range 16-75 years in a group of Saudi Arabian people was conducted. Duration of study was six months (June 2014- November 2014). Both male and female were comprised into four groups. Group A of with an age range 15-30 Years. Group B with age range of 31-45 years, group C with age range of 46-61 years and group D with age range of 62-75 years. Individuals visited with complained of musculo skeletal pain, backache and easy fatigability included in the study. Their body weight and height were measured for BMI. Serum levels of 25-hydroxy vitamin D (25(OH)D) in relation to demographic characteristics (age, sex) and selected health risk factors (physical activity, body mass index) were examined.

Results: Overall, the mean level of serum 25(OH) D was < 20 IU in 70% female and 30% male which is recognized as vitamin D deficiency. Obesity (as classified by body mass index) and sedentary life style were associated with the prevalence of vitamin D deficiency.

Conclusion: It is concluded that low serum levels of 25(OH)D were associated with younger age, increased BMI and sedentary life style. As vitamin D deficiency may be asymptomatic, predisposing to a greater loss of bone and consequent increased risk of fractures. The study findings suggest the need for vigilance in vitamin D deficiency screening and treatment of obese in all age groups.

Key Words: Vitamin D, Obesity, Saudi Arabian people

Poster No. 30
Prevalence of Hypothyroid Disease in Saudi Primary Care

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Background: Thyroid dysfunction is a major public health problem. However, its burden in Saudi primary care was not studied.

Objectives: To find out the prevalence of hypothyroid among the patients who attended the Qatif-3 primary health care (PHC) center, Qatif, Saudi Arabia.

Materials and Methods: A primary-care based study was undertaken by using the data which was retrieved from the thyroid function tests, which included T4 and TSH, of individuals ≥ 15 years old from the laboratory registers maintained in Qatif-3 PHC Center, from 1st Sep, 2014 to 30th Aug, 2016. Descriptive statistics and analysis were done using the the SPSS version 20 software.

Results: The total number of adult cases was 75, which included 13 males (17.3%). The prevalence of hypothyroid (TSH ≥ 5.5 μU/ml) was 0.7%. A higher prevalence of 2.5% and 1.5% was observed in the subjects who ages were 45-60 years and above 60 years, respectively with no significant difference (p .076). The incidence was 18 (17 per thousand of adult population) per year. The mean age of first presentation was 44.9 (SD 13.6) years. The median TSH level at presentation was 7.3 μU/ml.

Conclusion: Females and people of mid ages were more vulnerable to hypothyroid in this population. Hypothyroidism and subclinical hypothyroidism were common in Saudi primary care. PHC provider must be aware about its early detection and management.

Poster No. 31

Level of physical activity among resident physicians in Saudi Arabia

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Background: physical activity improves quality of life, helps to improve daily activities and have a good impact on health. Physician’s health matter and studies showed that doctors’ own physical activity practices may influence their clinical attitudes towards physical activity.

Aim of the study: is to assess the level of physical activity of resident physicians in Saudi Arabia.

Methods: A Cross-sectional study was conducted among resident physicians in Saudi Arabia from October 2015 to January 2016. We used an online survey, which includes residency program and counseling their patients, and the short form of international physical activity questionnaire (IPAQ).

Results: Two hundred and ninety six responses were received. Most of the residents (65.5%) have sedentary life and only 14.9 % have high physical activity. The most active were ER residents followed by internal medicine residents (28.6%, 24.4%) respectively ,while pediatric residents and family medicine residents were the most sedentary groups (73.7%, 70%) respectively. Residents who perceived their residency program as being stressful were found to be the least active. The opposite was true for residents
with low levels of perceived stress. Majority of residents (43%), frequently give advice of physical activity to their patients. At the same time, (52%) think that their physical activity level is affecting their counseling of physical activity to patients.

Conclusion: most of residents are not physically active. There should be more attention from health institutions and government to provide supportive exercise environment for the population including residents

Poster No. 32

The Art and Science of Achieving Compliance in Doctors – Our experience at KFSH&RC (Gen. Org.)

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It is quite amazing that medicine seems to be the only “industry” that has not taken to Information Technology. Given that by definition and in the recent era of evidence based medicine, health care prides itself in being “up-to-date” and seeks to reach new horizons in terms of finding new modalities of treatment, the question is even more pertinent. So why it is that medicine is lagging behind? This paper attempts to unfold the reasons for, on the surface, such an unexpected phenomenon. To answer the question one needs to have a two pronged approach. Firstly, we have to analyse the mentality of Physicians themselves and understand their resistance to change. Secondly, we have to look at the problems associated with the acceptance of IT. We will also look at the evidence for the benefits of CPOE.

So how do we reduce change resistance when trying to introduce CPOE?

Physicians by their nature and training are not easy to deal with when introducing new technology. The fears of seeming to be incompetent and the new “thing” causing delays to already time strapped professionals go beyond irrational resistance. This rational resistance is to be appreciated by the organisation as many lessons can be learned. Focusing on patient safety rather than the bottom line is a useful strategy. Effective communication and introduction of Physician Champions can improve buy-in. Providing sufficient support in time and resources as well as making sure that the system is built with the physicians in mind (i.e. physician friendly) are important considerations to ensure success of the project. As was the experience at King Faisal Specialist Hospital mentioned above, it is not just a case of building something, but building it right!

Poster No. 33

Fatty acids supplementation increase the abundance of mitochondrial protein in adipose tissue of postnatal sheep

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Background and Purpose: Traditional methods of body weight control commonly do not lead to long term benefits. One new strategy is fighting the accumulation of white adipose tissue (WAT) which occurs in
obesity with another type of fat that exists naturally in the body called 'brown adipose tissue' (BAT). Unlike WAT, BAT function is characterised by expending, rather than storing, energy. This study examined mitochondrial protein abundance in adipose tissue over the first month of life in the suckling sheep and the extent to which this may be modulated by maternal fatty acid supplementation.

Methods: The abundance of mitochondrial related proteins, uncoupling protein 1 (UCP1), voltage-dependent anion channel (VDAC) and cytochrome c in the main fat depots in young sheep was determined by immunoblotting. Perirenal and sternal adipose tissue depots, were sampled from sheep aged 1, 7 and 28 days born to ewes receiving either a control diet or nutritional supplementation with 3% canola or sunflower oils during lactation. Representative immunohistochemistry images were photographed for analysis. Statistical analysis with respect to significant differences (P<0.05) was carried out using t. test.

Results: There was a marked transition in the histological appearance of adipose tissue between each sampling age with clear transition from brown to white. The abundance of the brown adipose tissue-specific UCP1 peaked at 1 day of age and then decreased by 28 days of age, at which stage it was no longer detectable. VDAC and cytochrome c both followed the same pattern in sternal adipose but not in perirenal fat, as they peaked at 7 days of age before decreasing by day 28. Maternal fatty acid supplementation was associated with increased abundance of UCP1, VDAC and cytochrome c within sternal adipose tissue.

Conclusions: Nutritional intervention strategies that increase BAT activity and/or delay BAT loss in infants and/or children could be effective in combating obesity and its consequence.

Poster No. 34

Attendance of patients at multiple healthcare facilities in Oman (doctors’ shopping)- a cross section study

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Background and Purpose: Seeking multiple consultations (doctors’ shopping) for the same health problem has been associated with waste of health care resources, increased costs and puts patients at risk of over-medication and drug interactions. The aim of this study is to investigate the prevalence of doctor shopping in Oman and reasons for this behavior.

Methods: A cross-sectional study was conducted with adult Omani patients attending six Local Health Centres (LHCs) in the governorate of Muscat, the capital city of Oman and in Sohar city in the Al-Batinah North Governorate. A questionnaire were designed from literature and administered to patients while they were waiting to consult a primary care physician.

Results: A total of 849 participants completed the questionnaire from 1000 invited (response rate=85%). There were 246 (29.0%) male and 603 (71.0) female. The participants’ age ranged from 18 to 80 years (mean = 30 year, SD=9.1). Most of participants (60.2%) reported to have chronic diseases (diabetes, hypertension and hyperlipidemia). 32.1% of participants had attended other healthcare facilities for the same medical condition in the last two months. The reasons for this were reported as following: the symptoms did not improved (42%), repeat investigations (19.4%), obtain better treatment (14.5%), have
another opinion (13.6%), not satisfied with the assessment received previously (11.0%) and did not understand the previous doctor’s explanation (4.4%).

Conclusions: Large number of patients in Oman are attending multiple health facilities for the same health problem. This leads to increase healthcare cost, duplication of services, and waste of doctor’s time and put patients at risk of over-medication and drug interactions. Policy makers should consider restriction of patient’s movement between health care facilities. Patient education on the risks of this behavior, the importance of continuity of care, and strict registration of patients with their LHC would all help to reduce this behavior.

Poster No. 35

Fear of Missing Out: The Big Problem with Social Media in Medicine

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Background: Use of social media is a complex topic built by its characteristics, how people use it, and the feelings it can elicit in others. The Fear of Missing Out (FoMO) in social media is the fear that others have things that you don’t or are experiencing things that you wish you were and is characterized by being connected to what others are doing on social media. This study aimed to describe FoMO in social media between family physicians (FPs).

Methods: A descriptive sectional design was utilized for this study, as it included quantitative data from a five point Likert type scale between 10.10.2016-10.11.2016. The survey answers are every time to never. The convenience sample consisted FPs who is working as a resident, practitioner or specialist in Turkey. Participants were also asked totally 68 questions including “Do you have fear of missing out when you cannot access to social media?”

Results: In total, 323 FPs completed the online survey. Of the 323 FPs, 168 were female and 155 male. The average age of the participants was 32.4 years old, with a range of 23 to 56. The FPs answered 39,93% (n=129, f:80, m:49) never; 34,67% (n=112, f:72, m:40) rarely; 16,71% (n=54, f:29, m:25) sometimes; 6,5% (n=21, f:10, m:11) frequently; 2,16% (n=7, f:3, m:4) everytime.

Conclusion: According to the studies; FoMO mostly seen in men who is between 15-35 years old and at least 3-13 percent of the population are diagnosed with a condition called social anxiety. FoMO is very damaging to someone suffering from this anxiety disorder because it fuels a lack of self-confidence and social avoidance. The mental exercise of re-framing is extremely helpful to combat FoMO and there are many common negative thought patterns you may not notice. Building awareness of FPs arsenal against these patterns is key to prevent FoMO.

Poster No. 36

Disruptive Behavior Disorders among Basic-Learning School Children at Qwiesna District, Menoufia Governorate, Egypt (2014/2015)
Disruptive Behavior Disorders (DBDs) are psychiatric disorders of children and adolescence including Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD). DBDs are associated with increased risk for negative developmental outcomes including substance abuse, school problems and antisocial or criminal violence. The objective of the study was to assess Disruptive Behavior Disorders among basic–learning school children in Qwiesna district, Menoufia governorate. A cross-sectional study was conducted on 348 basic learning school children and their parents in addition to their Classrooms' teachers'. Children were subjected to Mini-Kids Interview for diagnosis of DBDs then "Parenting Manner Scale" for detection of parenting style. Parents and teachers rated child's behavior at their home and school respectively during past six months. Parents were subjected to "socioeconomic status scale. The results of the study showed that prevalence of DBDs was 14.9%. ODD and CD were 8% and 6.9 % of cases respectively. Mean age was significantly younger among patients (11.69±1.6) with male sex predominance (69.2%). Low Socioeconomic level (67.3%), inter-parental conflicts (36.5%), single parent (51.9%) and family history of neuropsychiatric disorders (65.4%) were significantly higher among cases. Overprotection (28.8% and 28.8%), discrimination between siblings (28.8% and 28.8%) and authoritarian fathers and mothers parenting styles (17.3% &19.2%) respectively were significantly higher among cases. The study concluded that prevalence of DBDs among basic–learning school children in Qwiesna district, Menoufia governorate was 14.9%. ODD and CD represented 8% and 6.9% of cases respectively. Risk factors were; low socioeconomic status (OR 3.4), low parental educations (OR 1.07 &2.9 for fathers and mothers respectively), father smoking (OR 1.4), parental conflicts (OR 1.3), family history of psychiatric disorders (OR 1.6) and bad parental styles among fathers and mothers respectively [overprotection (OR 49.4 & 22.2), discrimination (OR 12.9 &32.8), authoritarian (OR 11.2 & 20.9) and hesitancy (OR 8.8 & 28.7)].

Poster No. 37

Early detection of diabetic retinopathy among type one diabetic patients

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Background: Diabetic retinopathy (DR) is one of the leading causes of blindness in the world. It develops in nearly all individuals with type one diabetes and in more than 75% of individuals with type two who survive for over twenty years with the disease. Objective: To clarify the importance of early detection of DR, and specifically to determine its prevalence among type one diabetic patients.

Methods: A cross-sectional comparative study was conducted on all registered type one diabetic patients attending Al-Shohada family health center (FHC); during the period from June to August 2015. The study included 105 patients with type one diabetes mellitus. They were subjected to a predesigned questionnaire, and their data were retrieved by checking their files. They were referred for fundus examination by an ophthalmologist.
Results: The prevalence of DR among type one diabetic patients was 51.3%, and it was 62.8% among the patients who had never undergone fundus examination before. In 57% of the patients, the barrier for DR screening was negligence and lack of awareness about its importance. Prevalence of DR depends on the duration in addition to the degree diabetes control.

Conclusion: Most of type one diabetic patients are aware of its complications; however, there is little awareness about the importance of screening for DR, which together with negligence constitutes the main barriers to its screening. Therefore, the family physician plays an important role in dealing with these problems for early detection and management of diabetic retinopathy

Poster No. 38

The prevalence of antimicrobial resistance in the most common bacteria, causing upper respiratory tract bacterial infections (URTBI) in GCC and MENAP countries, a systematic review.

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Objective: To systematically review the antimicrobial resistance (AMR) in four common bacteria causing upper respiratory tract bacterial infections to help develop regional empirical antibiotic prescribing guidelines for ambulatory settings.

Methods: Three databases (Medline, Embase and Global Health) were searched (January 2005 until August 2016), without restrictions on language, setting or study design. Grey literature and unpublished hospital antibiogram data were also sought. The antibiotic sensitivity data on four bacteria for commonly used oral antibiotics was collected as weighted means. Data was also collected for condition studied.

Results: In 34 included publications (32 surveys, 1 case-control, 1 conference abstract) from 13 countries, 6906 isolates were reported. 98% of 2862 S Pyogenes isolates were sensitive to Penicillin and 88% to Clarithromycin. Of 2444 Pneumococci isolates 58%, 77% and 83% were susceptible to Penicillin, Clarithromycin and Amoxicillin respectively. 96% of 1600 H Influenzae isolates were sensitive to Co-Amoxiclav and Clarithromycin. Of 60 Moraxella Catarrhalis isolates 83%, were susceptible to Erythromycin, 94% Clarithromycin/Azithromycin and 98% to Tetracycline. 5 year (2010 to 2014) unpublished annual antibiogram data from Qatar originating from ambulatory settings revealed 71%, and 69% Pneumococci were susceptible to Penicillin and Erythromycin and 99% to Co-Amoxiclav. 100% of Strep Pyogenes isolates were sensitive to Penicillin and 91% to Erythromycin. 97% of H Influenzae isolates were susceptible to Co-Amoxiclav, 84% to Ampicillin and 88% to Clarithromycin, and 100% of 67 Moraxella Catarrhalis specimen isolated in 2010 were susceptible to Co-Amoxiclav, 86% to Tetracycline, and 95% to Clarithromycin

Conclusions: Published and Qatar's antibiogram data provided similar results. For Strep throat first line antibiotics are Penicillin and Clarithromycin, for Sinusitis and Otitis Media first line antibiotics would be Co-Amoxiclav or Clarithromycin/Azithromycin if allergic to Penicillin. The review suggests the selected data from hospital antibiograms can inform empirical antibiotic prescribing guidelines for ambulatory care.

Poster No. 39
Prevalence of Geriatric Depression among Attendants of the Family Medicine Outpatient Clinics, in Kasr Alainy, Faculty of Medicine: A Cross-Sectional Descriptive Study

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Background and Purpose: Geriatric depression is an important public health problem causing profound morbidity and disability worldwide. Family physicians, as the ‘gate-way keepers’, are in an excellent position to intervene in geriatric depression. However, geriatric depression is still under-recognized and is often left untreated, even when diagnosed in the primary care level.

This study aimed to determine the prevalence and risk factors associated with depression among senior attendants of the Family Medicine clinics in Kasr Alainy Faculty of Medicine, Cairo University.

Methods: The study was a cross-sectional descriptive survey conducted on 140 subjects. The target population was primary care users, aged 60 years and above, who utilized the Kasr Alainy Family Medicine outpatient clinics between January and June, 2016. Each participant was subjected to a comprehensive medical assessment, El-Gilany Socioeconomic Status (SES) scale, the Arabic version of the Standardized Mini Mental Status Examination (SMMSE) and the Arabic version of the short form of the Geriatric Depression Scale (GDS-SF).

Results: More than half of the participants (n = 76; 54.3%) screened positive for depressive symptoms. Fifty-eight participants (41.4%) had probable depression (GDS-15 score: 5 - 10) and 18 participants (12.9%) had definite depression (GDS-15 score > 10). The main risk factors for geriatric depression were female gender (OR 3.2) and economic status below the 25th percentile (OR 3.4).

Conclusions: Geriatric depression is a common health concern in the primary care level, and is especially prevalent in females and those who are economically disadvantaged.

Poster No. 40

The Prevalence of Hypertension among Adult Patients Attending Alhay Alsades Primary Care Health Unit in Nasr city in Egypt

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Background and purpose: Hypertension is one of the major risk factors for stroke, coronary heart disease and kidney failure. This study was conduct to assess prevalence and risk factors of hypertension in adult Egyptian.

Methods: The study was a descriptive cross sectional study carried out in Alhay Alsades primary health care center in Nasr city, Cairo, Egypt. Three hundred eighty two adults were included in this study.
Patient’s socio-economic data, demographic data and clinical data were recorded. Measurement of blood pressure and calculating body mass index for all participants were also recorded.

Results: The mean age of the studied population was 40.4 years. 30.1% were hypertensive stage 1 and 4.2% were hypertensive stage 2. Prevalence of hypertension was 34.3% and incidence of hypertension was 13.1%. There were statistically significant relationship between hypertension and educational level (P value= 0.002), family history of hypertension (P value= 0.002), personal history of chronic disease as diabetes and cardiovascular disease (P value= 0.00), physical inactivity (P value= 0.003), obesity (P value= 0.007), smoking (P value= 0.019), use of oral contraceptive pills (P value= 0.00), antiflu drugs (P value= 0.00), and drinking caffeine (P value= 0.00), salt intake (P value= 0.00) and lipids consumption (P value= 0.00).

Conclusion: Hypertension is a major health problem in Egypt. Prevalence of hypertension was (34.3%) in Alhay Alsades area. There was statistically significant relationship between hypertension and educational level, family history of hypertension, personal history of chronic disease as diabetes and cardiovascular disease, physical inactivity, obesity, smoking, use of oral contraceptive pills, antiflu drugs and drinking caffeine, salt intake and lipids consumption.

Poster No. 41

Overview about Anemia among Elderly in Family Health Center, Menoufia University, Egypt.

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Objectives: To assess the prevalence of anemia and assess the associated cognitive and nutritional status among elderly attending Munshat Sultan Family Health Center.

Background: Anemia is a common health problem with serious consequences in elderly. Multiple studies demonstrate that anemia is an independent risk factor for increased morbidity and mortality in elderly.

Methodology: A case-control nested in cross-sectional study was done. The calculated sample size was 163 that was increased to 200 elderly, both males and females recruited from Munshat Sultan, Menouf, Menoufia, Egypt. All subjects underwent a comprehensive medical history and clinical evaluation then complete blood count was measured, and anemia was defined according to the World Health Organization (hemoglobin level less than 13 g/dL in men and less than 12 g/dL in women).

Results: The study revealed that the prevalence of anemia was 17.5% among the participants (19.3% among males and 16.7% among females), 16% had mild anemia and 1.5% had moderate anemia, which significantly increased with age in the anemic group than non-anemic. Anemia increased significantly among participants with the history of blood loss and intake of nonsteroidal anti-inflammatory drugs with (p-value = 0.01) and (p-value = 0.003) respectively. The impact of anemia on functional status showed significant difference between anemic and non anemic as regards instrumental activity of daily living, also there is significant correlation between anemia and mini mental state examination (p-value <0.001) with worse performance among the anemic ones.
Conclusion: anemia represents a significant health problem among the elderly with bad drawback on their functional level and cognitive function.

Poster No. 42

Assessment of Cardiovascular Risk Factors Pre- and Post- Bariatric Surgery

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Background: Obesity poses serious health consequences, and bariatric surgery remains the most effective and durable treatment.

Objectives: to evaluate the effects of bariatric surgery, specifically sleeve gastrectomy on body weight parameters as well as blood pressure, blood glucose level & lipid profile and to correlate these changes with the degree of weight loss.

Methods: A prospective cohort study was conducted in General Surgery Department, Kasr El Aini Hospital during the period from January 2014 to the End of June 2015 including 30 obese patients (Body Mass Index (BMI) ≥ 40 or ≥ 35 with comorbidities). Demographic, clinical data, fasting and postprandial blood glucose as well as lipid profile were recorded pre-operatively as well as 2 weeks and 3 months post-operatively.

Results: A mean of the baseline BMI was 47.9±7.7 kg/m² and the mean excess weight in the studied group was 61.4±18.3 kg. A statistically significant reduction of body weight parameters occurred at two weeks (P<0.01) and three months (P<0.001) after surgery. Three months after surgery absolute weight loss positively correlated with percent change in fasting blood sugar level (P=0.030, r=0.397), but not with postprandial levels. The total cholesterol/HDL ratio decreased significantly two weeks (P = 0.001) and three months after surgery (P< 0.001). There was a positive correlation between actual total body weight loss and percent change in cholesterol 2 weeks after surgery (p=0.028, r=0.401), triglycerides and HDL level (p=0.030, r=0.397).

Conclusions: bariatric surgery can induce a significant improvement in cardiovascular risk factors including hypertension, hyperglycemia and dyslipidemia. Bariatric surgery has thus added, from a family medicine point of view to our prophylactic and curative tools against the threat of metabolic syndrome, diabetes, and cardiovascular diseases in morbidly obese patients.

Poster No. 43

Vascular Dementia, A Hidden Tsunami With Scarce Resources for Prevention in Greater Middle East Region

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Dementia is a progressive neuro-degenerative disease, in its early stages, memory function is mildly disturbed, but with late-stage, individuals lose the ability to carry on a conversation and respond to their environment.

Dementia is the sixth leading cause of death in the United States. Those with demented illness live an average of eight years but survival can range from 4 to 20 years, depending on age and other health conditions.

Although there is no cure for certain dementia related illnesses but there are many evidence-based practices, which can delay onset and progression of this disease and hence permanent disability and enormous economic and emotional burden on caregivers. The current worldwide estimated cost of dementia is $604 billion, which exceeds the gross domestic product of all except 17 countries of the world.

Unfortunately, chronic disease burden is on rise in greater Middle East Area and most importantly in Saudi Arabia. Even though great strides have been made against infectious and communicable diseases but efforts are way behind on grass root levels for management of chronic diseases like diabetes, obesity, hypertension, hyperlipidemia, smoking, sedentary lifestyle and unhealthy eating habits.

Vascular dementia is one of the fastest growing problems in the greater Middle East region and there is much effort needed to educate public at large about vascular risk factors, much needed changes in dietary pattern, need to get rid of sedentary lifestyle, healthy lives education starting from primary school level so that this hidden tsunami can be contained.

Also general public is focusing on tertiary care centers for all healthcare needs, this phenomenon is hindering the continuity of care and to effectively manage chronic disease burden including vascular dementia and its associated risk factors.

**Poster No. 44**

**Telemedicine- a missing effective tool for optimal control of cancer pain in a geographically diverse country, Saudi Arabia**

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Oncology department at King Fahad Medical City and King Abdullah Specialized Children Hospitals have thousands of miles catchment area for cancer related services to patients suffering from cancer and pain management is an integral part of comprehensive strategy of care.

It had been a common and frequent observation at both palliative care clinic and Palliative Ward that most cancer patients who are being admitted were in moderately severe pain before admission to palliative care services, this observation had broad implications for need of system improvement, enhanced quality of care, need to utilize modern technology for improved communication and hence optimal pain control for our cancer patients.

This also raises questions about system’s reliability of pain management in cancer patients while catering a wide geographical area and if the current system is cost affective and provides optimal services?
It is also not a wise and cost effective approach to bring patient to pain clinic while client lives hundreds and thousands of miles away and at the same time affective communication tools are available where patient and family/ caregivers can be approached via telemedicine.

Also in current financial crisis, effective telemedicine approach can cut tremendous costs to healthcare system and improve the trust of patients and families that pain management physician can be reached even at distance via telemedicine. Since cancer patients are already in feeble health status and travel demand of hundreds of miles can put an enormous physical strain on patient and emotional burden on patient and family/ caregivers, hence this require a second look into current practice of pain management services to our cancer patients

Poster No. 45

Diagnosis of Cancer in a Demented Patient is traditional approach, a right thing to do in cancer patients suffering from demented illness?

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Demented patients with cancer diagnosis have significantly higher morbidity and mortality rates from non-cancer and cancer causes. Dementia prevalence increases with advancing age and so cancers. Estimates have shown that by 2030, up to 70% of all cancers will be diagnosed in elderly population.

A cancer diagnosis in a demented patient brings many ethical, psychological and social challenges for physicians and enormous emotional burden on patient and family members alike. Patients with dementia often are unable to comprehend the complex decision of informed consent, have significant impairment in mental capacity to give approval or disapproval for cancer treatment, which raises many ethical issues for physicians and families. However, we must differentiate in timely manner between acute delirium, chemo brain and progressive neuro-degenerative disease (dementia).

Dementia is a progressive neuro-degenerative disease with significant morbidity and mortality of its own. Dementia is the sixth leading cause of death in the United States. The current worldwide estimated cost of dementia care alone is $604 billion. Since demented patients have far less ability to fight off infections, less tolerance to side effects of medications, they often develop acute confusion (delirium), numerous behavioral and psychological symptoms of dementia and hence more prolonged hospital stay.

Oncology- hematology cancer treatment at KASCH must have comprehensive geriatric assessment for all elderly patients with dementia and cancer diagnosis. This comprehensive geriatric assessment had become a standard tool in Western countries before a decision is made to pursue cancer therapy in patients suffering from dementia.

A cancer data analysis at KASCH can give more details about current cancer practices and outcomes for patients and a chance to have best care practices possible in future for NGHA patients.

Poster No. 46
Prevalence and associated factors of Pityriasis Alba among primary school children of Kotor district, Egypt.

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Background and Purpose: Pityriasis alba, is a skin condition commonly occurring in children and young adults. Most lesions occur on the face, especially on cheeks and chin which usually seen as ill-defined, dry, fine-scaled, pale patches. The exact cause of pityriasis alba is unknown.

Aim of this study to determine the prevalence of pityriasis alba and related factors in primary school children.

Methods: A cross-sectional study was conducted in two randomly selected primary schools of Kotor district, Gharbya Governorate, Egypt. The study was carried out on 720 primary school students. A questionnaire including socio-demographic data and risk factors history were filled in by students’ parents or guardians after consent was obtained. All of the participants were clinically examined to diagnose pityriasis alba and pallor.

Results: The study included 290 (40.3%) girls and 430 (59.7%) boys with a mean age of 8.96 +/- 1.73. Pityriasis alba was observed in 60 children (8.3%). Of these 60 children with pityriasis alba, 30 (50%) were males. 50 (83.3) showed frequent sun exposure while personal history of atopy was found in 12 (20%). 16.7% of the affected students reported personal history of intestinal parasitic infestation. On clinical examination the majority of patients had more than one lesion (66.7%) while one third (33.3%) showed pallor. The lesions were frequent in patients with dark skin (66.7%).

Conclusions: Pityriasis alba was observed in 8.3% of primary school children in this study. Screening and health education programs are recommended accordingly.

Poster No. 47

The prevalence and influencing factors of folic acid use among pregnant women attending antenatal care clinics in Al Wazzarat Health Center at Prince Sultan Medical Military City

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Background: Many health authorities in several countries recommend that women planning to become pregnant should receive folic acid prior to conception for preventing the first and second occurrence of Neural tube defects (NTDs), this is based upon strong high level evidence like for example; De-Regil LM et all, Effects and safety of periconceptional folate supplementation for preventing birth defects. Cochrane database of systematic reviews. 2010. There is inadequate information about the prevalence of folic acid use and the factors influencing folic acid use during preconception in Kingdom of Saudi Arabia.
Purpose: To determine the prevalence of folic acid use during preconception period in the current pregnancy according to NICE guideline and factors affecting this use.

Methodology: From November 2013 to March 2014, a total of 304 pregnant women attending antenatal care clinics in Al Wazzarat Health Center at Prince Sultan Medical Military City were interviewed to assess the use of folic acid. The included data were folic acid use according to NICE and other variables, such as maternal age, the level of education, occupational status, family income, residence, parity, planned pregnancy, previous child with congenital anomalies, and family history of congenital anomalies.

Results: The prevalence of folic acid use according to NICE guideline was (29.9%). The factors influencing folic acid use according to NICE guideline were pregnant women with secondary school certificate, pregnant women with two children, and pregnant women that planned their pregnancy were statistically significant.

Conclusion: Despite the prevalence of folic acid use was evident; the using of folic acid according to NICE guideline was low. These findings emphasize the necessity for public health programs to inform women to take folic acid on a daily base and at least four weeks before pregnancy to decrease the incidence of NTDs.

Poster No. 48

Mortality rate of ICU patients with the Middle East Respiratory Syndrome – Coronavirus (MERS-CoV) Infection at King Fahad Hospital-Jeddah, Kingdom of Saudi Arabia

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Background and Purpose: The Middle East Respiratory Syndrome (MERS-CoV) virus is a novel coronavirus which has been circulating in the Arabian Peninsula since September 2012. It leads to a significant respiratory disease and in the setting of co-morbidities is associated with high mortality. The purpose is studying the mortality rate of MERS-CoV among ICU patients and the correlation of mortality with different co-morbidities.

Methods: This was a retrospective observational study conducted at the Intensive Care Unit of King Fahad Hospital, Jeddah, Saudi Arabia. Data was obtained through patient chart review.

Results: The total sample consisted of 52 laboratory-confirmed MERS-CoV infection patients. 39 patients died, with a 75% case-fatality rate. Many patients had underlying co-morbid medical conditions, including diabetes mellitus (51.9%), hypertension (46.2%), and chronic renal disease (21.2%). Case fatality rate was highest with middle-aged patients, males, patients who received antiviral therapy and statistically significant with chronic renal failure.
Conclusions: MERS-CoV ICU mortality remains markedly high due to a combination of factors. Currently available antiviral therapies have shown a lack of response. The disease process of MERS-CoV leads to multiple organ failure, particularly respiratory and renal failure, leading to poorer outcome.

Poster No. 49

Improvement of Chronic Diseases: Is it innovative enough to tackle the challenges?

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Introduction and Objective: Health systems are searching for new models to better respond to chronic care challenges. The Chronic Care Model (CCM) proposes a population-based daily care for all with a structured and planned team care interventions and it aims to convert the life of patients with chronic disease from reactive to proactive. In the emirate of Abu Dhabi, United Arab Emirates, the major 3 chronic diseases are diabetes, cardiovascular diseases and cancer. The aim of this study is to understand how the CCM is applied in daily care of patients in the emirate of Abu Dhabi.

Method: The Assessment of Chronic Illness Care (ACIC) v3.5 was used as a tool to assess how care has been delivered to patients with diabetes, cardiovascular disease and cancer. The ACIC addresses the six elements of the CCM: health systems organization, community, decision support, delivery systems design, clinical information systems and self-management. It is based on a Lickert scale with interpretation guidelines: 0-2=limited support for chronic illness care; 3-5=basic support for chronic illness care; 6-8=reasonable good support for chronic illness care and 9-11=fully developed chronic illness care.

Results: Several private and public institutions were observed that, from the 6 elements of the CCM, the organization of health system, the community and the delivery system design are fully developed in the emirate according to the ACIC. The other 3 elements were considered to be reasonably good. The average program score was 8.81. The Community linkages is the element that shows the largest range of answers (M=10.6, m=3) and the self-management is the most consistent one (M=10.5, m=7).

Conclusions: There is a commitment and a strategy in place to address the growing problem of chronic diseases in the emirate of Abu Dhabi. The findings of this study are similar to the previous systematic review.

Poster No. 50

Antipsychotic Drugs in Pregnancy

Dr. Sharifa Al-Dakheel¹

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Background: There has been significant increase in prescription of antipsychotic medication in the community for females in child bearing age the problem we don't have clear guide lines because we don't have control group.
Objective: To evaluate maternal psychiatric, medical and perinatal outcomes associated with antipsychotic drugs in pregnancy.

Aim: To use wisdom when the risk is minimal for both mother and child.

Method: We study 3 pregnant, one with 6 years old, one with 2 years old child and one still pregnant. We measure their blood sugar, blood pressure, fetal heart, movement, ultrasound with using antipsychotic FGAs.

Results: Patient became less psychotic then back to normal and fetal development normal till now, no diabetes mellitus or hypertension, no malformation or abortion.

Conclusion: It is still too early to reach a clear and absolute use of safe antipsychotic drugs in pregnancy. A large sample is needed for a study and a control should be needed.

Poster No. 51

Concussion in Sport – A Public Health Concern

Prof. Mohamud Verjee¹, Dr Louis Holtzhausen¹

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INTRODUCTION: Concussion as a result of sport has created intense debate in medical and legal circles, sparked by a lawsuit where former National Football League (NFL) players won compensation for long-term sequelae of a concussion. Many sporting bodies have since increased concussion awareness and management.

AIM: The aim of the study was to determine the magnitude of the public health risk of a concussion sustained in sport.

METHODS: The literature on diagnostic criteria, epidemiology and clinical presentation of sports concussion from 2000 to 2016 were reviewed, using Medline and Pubmed searches of the peer-reviewed literature.

RESULTS: No uniform definition or diagnostic criteria for concussion was apparent. The suspected diagnosis of concussion includes one or more of 1. Symptoms: cognitive (e.g. feeling in a fog), and/or emotional symptoms (e.g. lability); 2. Physical signs: (e.g. loss of consciousness, amnesia); 3. Behavioral changes: (e.g. irritability); 4. Cognitive impairment: (e.g. slowed reaction times); 5. Sleep disturbance: (e.g. insomnia). Any single component constitutes a suspected concussion. A majority of adult cases resolve within ten days but often takes longer in children and adolescents. Persistent symptom patterns occur in 10-15% of cases, including second impact, and post-concussive syndromes. Subsequent concussions, prolonged symptoms, and other injuries significantly increase after a concussion. Chronic Traumatic Encephalopathy (CTE) causes progressive neurocognitive dysfunction following repetitive head injury. The real incidence of sports concussion is unknown but is between 1.6 - 3.8 million cases per year in the USA. Underreporting of 6 to 10 times may occur.

CONCLUSIONS: Sports concussion is a common injury with significant short and long term consequences. It affects youth and adolescent athletes more severely. There is a paucity of uniform and comparative
data in the literature. Consensus on research methodology and increased vigilance in recognition and management of this public health risk is recommended.

Poster No. 52

Prevalence and associate factors of anaemia among Moroccan pregnant women: experience of a general practitioner’s office

Dr. Rokia Cherkaoui Dekkaki

1Mg Maroc, Salé, Morocco

Background: Anemia is a public hearth problem in Morocco: the prevalence of anemia is 20 to 40 % (WHO). The anemia has considerable consequences on the pregnant woman and also her future child. The aim, of the study is to determine the prevalence of anemia among pregnant women and the associate factors.

Methods: This is a retrospective and descriptive study in the pregnant women coming for antenatal consultation. 460 medical records of pregnant women were analyzed. Anemia was defined according to WHO criteria. We performed a descriptive statistical analysis, using SPSS 20 for data analysis.

Results: The mean age is 28, 5 ± 8 [17, 43], and 55% of pregnancy women was in the first trimester. 71.2% of pregnant women have the dosage of hemoglobin and serum iron concentration vs 28.8%. 55.4% have made the dosage in the first quarter of pregnancies; 37.8% in the second and 6.8% in the third. The blood mean hemoglobin concentration was 10.4. 19% of pregnant women have anemia, 69% of anemia was iron deficiency, 8.7% have anterior gravid anemia 17% have an associated pathology

Conclusions: The prevalence of anemia in pregnant women was low compared with WHO statistics of Morocco. More than half was deficiency iron anemia.

Poster No. 53

Social media and physicians: A time to start but within limit?

Dr. Nagwa Hegazy1, Dr. Mohamed Mahmoud, Dr. Suzy Ismael, Dr. Suha Hamshary

1Menoufia University, Menoufia, Egypt

Social media is a useful yet underutilized tool for communication and education in healthcare. It is growing daily and provides physicians with nearly instantaneous access to large populations for both marketing and patient education. It has made health care more transparent and it can enhance professional networking efforts. The benefits are myriad, but so are the inherent risks.
The aim of this workshop is to discuss Why Social Media Matters for Family Physicians and familiarize the participants with such international initiatives.

The workshop will have five parts: Firstly, a 5 minutes presentation to address the workshop objectives and show statistics toward the subject. Then participants will assemble in small groups with a facilitator to discuss Why Social Media Matters for Family Physicians. The groups will spend approximately fifteen minutes generating this discussion. After that, the groups will be invited to spend another 15 minutes brainstorming together about different types and its goals based on the international experiences shared. Then one participant of each group will present the group ideas for the rest of the participants. Finally, a 10 minutes presentation about approach to Getting started in social media, professionalism in using social media and tips for it.

Audience: All interested – medical students, residents/vocational trainees, junior and more experienced doctors, as well as researchers with an interest and/or expertise in this area.

Poster No. 54

Electronic cigarettes: Does it have a role in smoking cessation?

Dr. Marwa Ahmed1
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Background and purpose: About 100,000 people in the UK die each year due to smoking-related deaths mainly due to cancers, chronic obstructive pulmonary disease (COPD) and heart disease. Cigarette smoking is the greatest single cause of illness and premature death in the UK. By stopping smoking, the smoker may be able to reduce their risk of illness and death, making a big difference to the individual as well as those around them who may be harmed by passive smoking such as children and pregnant women. There have been many forms of treatment to help individuals to stop smoking including nicotine patches and oral medications such as champix. However, there has been a huge surge in the use of electronic cigarettes. In the UK users have increased from 700,000 in 2012 to 2.6 million in 2015. It is a handheld electronic device that vaporizes a flavoured liquid. The fluid used is usually made of nicotine, propylene glycol, glycerine, and flavourings.

Methods: Literature review of available studies specifically analysing the benefits on smoking cessation using electronic cigarettes against other traditional methods such as nicotine patches, for example. The author will also discuss reported harms in literature from using this device as well cost on the healthcare system.

Results: Meta-analysis, cross sectional and cohort studies failed to show a superiority of the use of this device against other traditional methods. The long term health benefits and risks of e-cigarettes were uncertain as limited research has been carried out around this subject. Therefore, there needs to be more research in this area before it can be recommended as a treatment.

Conclusion: There is not enough research evidence to support the use of electronic cigarettes in clinical care to help individuals to stop smoking. Therefore, more research is required.

Poster No. 55
Quality of Life in Patients on Renal Dialysis in Urban Area, Dakahlia Governorate, Egypt

Ms. Waad Al Majnoni1, Dr. Mohammad Alkot1, Prof. Mahmoud Qura2, Dr. Aml Salama3, Dr. Zeinab Kasem4, physician Walaa Refat5

1Menoufia University, shebien Alkoum, Egypt, 2Menoufia university, shebien Alkoum, Egypt, 3Menoufia university, shebien Alkoum, Egypt, 4Menoufia university, shebien Alkoum, Egypt, 5Ministry of health and population, shebien Alkoum, Egypt

Background: Chronic kidney disease (CKD) is a major health problem worldwide with increase morbidity and mortality and significant impact on patient quality of life (QoL) that is a main component of health outcome. In most of developing countries, the health related QoL gains less attention of health care providers. This needs more assessment to frame the rehabilitation and treatment programs and polices of chronic renal failure patients.

General objective: to promote QoL of hemodialysis (HD) patients, and specific objectives to determine QoL among these patients. Methodology: The study is a cross section study conducted on patients with ESRD on regular HD at Talkha central hospital, Dakahlia governorate, Egypt. Health related QoL (HRQoL) was assessed using the validated Kidney Disease QoL-Short Form (KDQOL-SF) tool. It includes one multi-item scale.

Results: The patients’ QOL scores were very low (below 50) for all subscales. The highest score was on, physical function (33.87±13.76/4.55 -68.18), social function (38.86±21Range 25.0 - 87.5), and Overall Health Rating (35.61±10.03 Range14.31 - 61.15) were directing very weakly to the best and the lowest was on role of physical function (8.59 ± 21.46 Range 0 - 100), and Pain (17.18 ± 8.07Range 25.0 -66.67). Diabetes mellitus was the major cause of KD with poorer results. Conclusion: Patients with ESRD on HD generally have a diminution of their quality of life scores. The results of the study showed that there are no differences on QoL among male and female patients while age, occupation and presence of diabetes affect the total QoL score.

Post No. 56

Caesarean Section: 16-years' trend, risk factors and attitudes of females delivered at King Abdul-Aziz University Hospital

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The rates of Caesarean Sections (CS) continue to increase worldwide. However, inadequate studies were done on this issue in Jeddah. The study was done to determine the 16-years’ trend of CS from 2001 to 2015, to identify risk factors and attitudes towards CS among females delivered in King Abdul-Aziz University Hospital (KAUH).

Two study designs were conducted. A retrospective cohort study was done through reviewing of delivery’s records in King Abdul-Aziz University Hospital (KAUH) during 16 years’ period (2001-2015). The case-control part was done among 300 females delivered in KAUH (150 cases CS matched by age 150 control
females delivered by vaginal delivery). Data collection sheet was used and contained a validated interviewing questionnaire and a transcription sheet. Descriptive and inferential statistics were done.

The 16-years trend showed increased CS from 13.86% to 31.81% from 2001 -2015 (129.5 % increase). CS was significantly associated with increased BMI, Gestational Diabetes Mellitus (GDM), non-cephalic presentation, multiple pregnancies, fetal distress, low Bishop Score. Regarding attitudes, females in CS group had better attitudes towards CS compared to others. The most frequent CS indications were previous CS (26%), fetal distress and maternal emergencies. Opinion of mothers accounted for 3.7%.

Current retrospective part of the study showed an increasing trend of CS over time, this correlates with other studies done globally. Previous all CS deliveries increased risk of CS which agrees with the case control study from England. Increasing rates of CS deliveries was prevailed among females delivered at KAUH, from 2001 to 2016. The commonest cause of CS was previous CS 26%. Preventing the escalating rates of CS prevailed from the current study is needed. This can be achieved by good antenatal care of all pregnant females. Females with high BMI, GDM, multiple pregnancies, previous CS require adequate follow up. Providing sound, detailed educational messages is needed for all females in childbearing women to improve their level of awareness about CS.

Poster No. 57

Current situation of the referral system in family practice in Shebein El-Koum District, Menoufia Governorate, Egypt

Ms. Waad Al Majnoni, Prof Taghreed Farahat, Dr. Mohammad Alkot, Physician Marwa Aldemerdash

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Main Objectives ware to improve the referral system. The specific aims were to determine the referral rate, to study its current status as well as to identify its obstacles at family health level.

Background: The referral system is a process that ensures accessibility to higher levels of medical.

Methods: A cross-sectional study was carried out from 1st of March 2011 to the end of April 2013 in all rural and urban family health units/centers (No. 23 and 4, respectively) of Shebein El-Koum District, which were selected randomly to represent Menoufia Governorate, Egypt. All the managers (No. 25), family physicians (No. 125), and nurses (No. 186) at the site of the study were subjected to a predesigned questionnaire for complete assessment of the current status of the referral system.

Results: The referral rate was significantly higher in urban versus rural areas (16.2 and 11.2%, respectively). The usage of referral letter is the main means of referral; the highest referral rate was among adults and the lowest was among adolescents. There was no significant difference in the referral rate in terms of sex in either urban or rural facilities. Training of the physicians is considered an important factor for quality assurance of the referral system.

Conclusion: The highest referral rate was found among adults; however, the lowest referral rate was found among adolescents. The rate was high for ENT and Ophthalmology Clinics. Lack of training and
Poster No. 58

Survey of 210 women between the age of 18 et 75 in general practice on cervical pap smear

Dr. Fatima-Zohra Mchich Almi¹, FZ, MCHICH ALAMI²
¹MG Maroc, , Morocco, ²Private General Practitioner, , Morocco

OBJECTIVE: The cervical Pap smear is a simple task that every doctor should explain, advise and practice to detect and help avoid cervix cancer. Prevention is first conveyed by sensitization. The objective of this study is to estimate the patient’s knowledge regarding cervical pap smear and it’s utility.

METHOD: A survey form with 10 items administered to 210 female patients visiting for various pathologies at the doctor’s practice permitted assessing the knowledge of the patients on cervical pap smear. The survey only included married women.

RESULTS: 36,7% of the surveyed do not know what cervical pap smear is. 63,3% have already heard about it ; 59,4% of them from their doctor, 36,09% from other women and 4,51% from the media, 49% of the surveyed do not know the utility of cervical pap smear of which 45% think of it as a prevention mechanism and 55% think of it as a detection device.

Among the women who have heard about it 42,1% think that it should be operated after the age of 40

Concerning their education level: 20% are illiterate, 16,7% have a primary school level, 15,2% have a high school level and et 7,6% have some higher education ;

CONCLUSION: The majority of women who have not submitted to a cervical pap smear don’t know that they should do it. Sensitization around cervical pap smear still requires an important effort from the part of general practitioners (first link in the medical chain). The creation of informative documents for the patients in parallel with small group training sessions on the importance of cervical pap smear are to be considered for development in general practice.

Poster No. 59

Perception of Family Medicine Master students on Team based Learning as a method of teaching at the Faculty of Medicine University of Gezira (FMUG) , Gezira State, Sudan 2016

Dr. Salwa Elsanousi¹
¹University of Gezira, , United Arab Emirates

Background: Team based learning is learner centered which requires the learner to prepare in advance about assigned topic, then they will be exposed to Individual Readiness Assurance Test (iRATs) on the subject matter which will be included in the final exam result. The students are divided to small groups of
8-10. Each group will solve the prepared test, and present their result to the whole group when the tutor revises the answers to the test. (team Readiness Assurance Test (tTRATs). finally application group readiness assurance test (gRATs)

Specific objectives:
1. To highlight the experience of FMUG as a role model in application of team based learning at the school.
2. Scale the perception of the family Medicine Master students about the team based learning.

Methods:
Design: this is a descriptive cross section study among family Medicine Master students
1. Review of the curriculum to determine in which modules team based learning has been applied.
2. A designed pretested questionnaire was used. Data was collected from all students (120) of the Family Medicine Master.
3. Likert scale has been used addressing : the satisfaction regarding team based learning, compared to other methods of teaching such as: lectures, Seminars, etc

Results: The team based learning as a method of teaching has been applied in 4 courses: Ophthalmology, Accidents and emergency, Medicine and Psychiatry. Most of students were oriented about this method of teaching they agree that it is more useful and better than other methods of teaching.

Conclusion: Team based learning is well applied at FMUG and the family medicine doctors were satisfied with it.
ORAL ABSTRACTS
Day 1 – 2 March 2017, Thursday
Oral Presentation 1
14:00 – 15:30 – Hall C

- Awareness of stomach and colorectal cancer symptoms and barriers of seeking medical help among adult public attending primary care settings in Muscat City, Oman; Dr. Jamila Al-kindii, Oman Medical Specialty Board, Oman.

- Pattern and predictors of glycemic control among type 2 diabetics in Armed Forces Hospital of Jizan, southwestern Saudi Arabia; Dr. Hassan Abdelwahed, Armed Forces Hospital Of Jizan (afhj), Jizan, Saudi Arabia.

- Awareness of cancer risk factors, signs and symptoms among students of the Sultan Qaboos University, Oman: A cross section survey; Dr. Mohammed Hilal Al-Azri, Sultan Qaboos University, College of Medicine and Health Sciences, Department of Family Medicine and Public Health, Oman.

- Foot care Knowledge, Practice and the prevalence of peripheral neuropathy among type II diabetic patients attending three Family Medicine centers in Cairo; Prof. Diaa Marzouk, Faculty Of Medicine Ain Shams University, Egypt.

- Non-specific Chronic Low Back Pain and Quality of Life; Dr. Hana Abu-Hassan, The University of Jordan, Jordan.

- Hypertensive patients’ adherence to medications and lifestyle changes in Kotor, Egypt; Dr. Heba Bargawi, Umm Al Qura University, Saudi Arabia.

- Case Studies In Antibiotic Resistant Infection " Super Bugs" at Sturgeon Hospital , Alberta Canada; Nabil Al-Kayssi, Canada

- Syphilis sero-positivity among pregnant women attending public antenatal clinics: A five year analysis from 15 public clinics in Gaborone, Botswana; Dr. Adewale Bisiriyu Ganiyu, Department Of Family Medicine & Public Health, Faculty Of Medicine. University Of Botswana, Botswana.

- Diagnosis, management and follow-up of COPD patients - the role of Family Physician; Prof. Ersin Akpinar, Turkey

Oral Presentation 2
16:00 – 17:30
Impact of Compliance to Therapy of Congenital Hypothyroidism on The Neurodevelopmental outcome in Sharkia Governorate; Dr. Nagwa Hegazy, Menoufia University, Egypt.

Depression among Overweight and Obese Egyptian Females Attending National Nutritional Institute; Dr. Inas El Sayed, Cairo University, Egypt.

Prevalence of Common Mental Disorders in Adult Patients Attending the Family Medicine Clinics, in Kasr Alainy Faculty of Medicine: A Cross-Sectional Descriptive Study; Dr. Rasha Alkholy, Faculty Of Medicine, Cairo University, Egypt.

Depression and Anxiety among Hypertensive and Diabetic PHC Patients: Could patients’ perception of their disease control used as a screening tool?; Dr. Abdullah Al-khathami, Ministry of Health, Saudi Arabia.

Assessment of Cognitive Status for Dementia by Using The Six-Item Cognitive Impairment Test (6-Cit) as a Screening Tool at Primary Care Setting in Military Hospital, Tabuk, KSA; Prof. Tariq Shaqran, Armed Forces Hospitals, Tabuk, Saudi Arabia, Saudi Arabia.

Obesity in Women: An Epidemic in Arab World; Dr. Firdous Jahan, Oman Medical College, Oman.

Severity of Menopausal Symptoms in Relation to Obesity, Smoking, and Exercise in Middle-aged Jordanian Women; Dr. Ruba Jaber, University Of Jordan, Jordan.

Management of heart failure in primary care: Is there a role for the use of B-type natriuretic peptide (BNP) test?; Dr. Marwa Ahmed, Southwark Ccg, United Kingdom.

Day 2 – 3 March 2017, Thursday
Oral Presentation 3
14:00 – 15:00 – Hall B

Decision-Making in Family Medicine; are we involving our patients?; Dr. Noha Dashash, Ministry of Health, Saudi Arabia.

An inter-professional learning experience - medical students engaging with ambulance services during their Community medicine term; Dr. Ameeta Patel, Hamad Medical Corporation, Qatar.

Community Based Education (CBE) In Hadramout University College Of Medicine (HUCOM), Yemen; Prof. Abdulla Bin Ghouth, Hadramout University College Of Medicine, Yemen.

Prevalence of Stress among Medical Students; Ms. Waad Al Majnoni, Umm Al-qura University, Saudi Arabia.
• Pattern of Morbidity among Elders attending General Practice: Health and Need Assessment of Geriatric patients in Oman; Dr. Shaikh Muhammad Naeem, Oman Medical College, Oman.

• A Cross-sectional Study of Sleep Disorders and Insomnia Among Night Shift Health Workers in Eastern Province hospitals, Kingdom of Saudi Arabia, 2016; Ms. Zainab Almumen, Arabian Gulf University, Bahrain.

• Key findings from a scoping review of interprofessional online learning for primary healthcare teams; Dr Kunal Patel, iheed, UK

Oral Presentation 4
17:00 – 18:00 – Hall A

• Current Situation, challenges & future of Family Medicine teaching & training as specialty (Egyptian Experience); Taghreed Farahat, Egypt

• Frequency, Reasons and Perceived Benefit of Energy Drinks Consumption Among University Students at King Saud bin Abdulaziz University for Health Science; Dr. Fadyaih Alajlan, national guard hospital, Saudi Arabia.

• A community study examining the health needs of the elderly population in Qatar; Dr. Sajedah Shaltoni, University Hospital Sharjah, United Arab Emirates.

• Lifestyle Prescription: How to Overcome the Barriers; Dr. Bader Almustafa, Qatif Primary Health Care, Saudi Arabia.

• EBM at the tips of your fingers; Dr. Hanouf Binhimd, MOH, Saudi Arabia.

• Give Or Not To Give. Choosing Wisely Evidence-Based Use of Antibiotics in Family Medicine; Dr. Nabil Al-Kayssi, Non, Canada.

• Do we dare unmask atrial fibrillation; Dr. Michaela Machacova, The Slovak Society Of General Practice Of The Slovak Medical Association, Slovakia.
Day 1 – 2 March 2017, Thursday
Oral Presentation 1
14:00 – 15:30 – Hall C

Awareness of stomach and colorectal cancer symptoms and barriers of seeking medical help among adult public attending primary care settings in Muscat City, Oman.

Dr. Jamila Al-kind1, Dr Manal Al-Dhahri1, Dr Thuraiya Al-Harthi1, Dr Mohammed Al-Azri1
1Oman Medical Specialty Board, Muscat, Oman

Stomach and colorectal cancer are among the common types of cancer in GCC including Oman.

Aim: explore public’s awareness, knowledge of stomach and colorectal cancer, and barriers to seek medical help among Omani adults attending primary care settings in Muscat.

Method: The Cancer Awareness Measure questionnaire is a validated set of questions used to assess awareness of cancer risk factors, warning signs, symptoms and barriers of seeking medical help among the general population. All 28 Local Health Centers in Muscat, were involved in the study. Omani adults 18 years and above attending LHCs were invited to participate in the study. SPSS version 22 was used to analyze the data.

Results: A total of 405 participants completed CAM questionnaire from 581 invitations (response rate=70%). There were 169 male and 236 female. The most recognized risk factor for stomach and colorectal cancer were drinking alcohol (73%), smoking (71%), eating preservative products (62%), family history of stomach and colorectal cancers (33%). The most recognized signs and symptoms of stomach and colorectal cancer were pallor and fatigability (55%) followed by blood in the stool (53%), blood in the vomit (50%). The younger age group recognized more risk factors than the other groups. Most of the risk factors were well recognized by the higher educated group. The most common barrier to seek medical help for possible early signs and symptoms of cancer were “busy and no time to go to doctor” (57%), “worried what doctor might find” (56%) and “have too many other things to worry about” (51%). Women have more barriers than men in “scared” (OR=0.40; 95% CI: 0.26-0.63), “difficult arranging transport” (OR=0.36; 95% CI:0.20-0.64) and “worried what doctor might find” (OR=0.53; 95% CI: 0.34-0.83).

Conclusion: Levels of awareness of stomach and colorectal cancer symptoms among public attending primary care were low in Oman.

Pattern and predictors of glycemic control among type 2 diabetics in Armed Forces Hospital of Jizan, southwestern Saudi Arabia

Dr. Hassan Abdelwahed1, Dr. Saud Erwi3, Dr Firas Alahmari1, Dr. Amany koteb1, Dr. Hesham Dahlan1
1Armed Forces Hospital Of Jizan, Jizan, Saudi Arabia, 2Family medicine department, Faculty of Medicine, Suez Canal University, Ismailia, Egypt
Background and purpose: Glycemic control is one of the primary goals of diabetes management because. Despite available health services, the glycemic control is poor in Saudi Arabia. The purpose of the present study was to assess pattern and predictors of glycemic control among type 2 diabetics based on glycosylated hemoglobin (HbA1c) and fasting plasma glucose (FPG).

Methods: This cross-sectional study was conducted during the period of July 2016 to August 2016. A sample size of 78 type 2 diabetics was calculated and selected randomly from the study population. The Socio-demographic and clinical data were collected using structured questionnaires. Also, FPG, HbA1c, total Cholesterol, Low Density Lipoprotein (LDL), High Density Lipoprotein (HDL), serum Triglycerides (TG) and renal function tests (serum urea and creatinine) were assessed using the appropriate kits.

HbA1c and FPG were compared between different categories of important baseline socioeconomic and clinical variables, using the group t-test. Pearson’s bivariate correlation analysis was used to assess linear associations between HbA1c and other continuous variables. One way analysis of variance was conducted to test the significance of differences in HbA1c and FPG levels in different categories of medical treatment and body mass index. Multiple linear regression analysis was computed to identify the predictors of glycemic control.

Results: The mean of HbA1c was 8.79±2.17 gm % and that FPG was 180.64±42.27mg/dL. More than two thirds of the patients in the present study were poorly controlled. HbA1c target, <7 gm%, was detected only in 24.4 % (19/78). FPG, HDL and duration of diabetes were the only significant independent predictors of HbA1c in the present study.

Conclusion: Poor glycemic control and atherogenic lipid profile are highly prevalent among the study group necessitating aggressive screening and treatment for dyslipidemia, and appropriate management of diabetes.

Awareness of cancer risk factors, signs and symptoms among students of the Sultan Qaboos University, Oman: A cross section survey

Dr. Mohammed Hilal Al-Azri1, Dr Huda Al-Awisi, Prof. Anil Mathew

Sultan Qaboos University, College of Medicine and Health Sciences, Department of Family Medicine and Public Health, Muscat, Oman

Background and Purpose: The majority of deaths due to cancer occur in low and middle income countries, partly due to poor public awareness of risk factors and symptoms. The aim of this study was to identify the level of awareness of cancer risk factors and symptoms among students at Sultan Qaboos University (SQU), Oman.

Methods: The Cancer Awareness Measure (CAM) questionnaire was used to collect data. The questionnaire was made available online for 3 months.

Results: A total of 619 students participated. There were 221 (35.7%) male and 398 (64.3%) female. Their age ranged from 18 to 45 years, with mean of 21.64 ± 4.3 years. The mean number of recognized cancer warning signs was 4.72(SD=2.48, Range=0-9). Nursing students identify the most warning sign, followed by medical students (F= 2.840; P <0.01). An “unexplained lump or swelling” was the most commonly recognized symptom (87.1%), followed by “change in appearance of a mole” (70.6%) and “unexplained bleeding” (56.9%). Nearly half of students (54.8%) recognized “sore throat that does not heal” as a sign of cancer and the least recognized was a “persistent cough or hoarseness” (35.4%). Female were more aware of cancer signs than males (t=4.73; P <0.001). Students with a family history of
cancer recognized more symptoms compared to those without (t=2.38; \( P < 0.05 \)). Smoking was the most commonly agreed risk (98.9%), followed by drinking alcohol (92.2%) and exposure to another person smoke (84.8%). However, few students agreed that eating more red meat (22.8%) and a low fruit and vegetable intake (18.9%) increased risk of cancer.

Conclusions: Levels of cancer symptom awareness are low among students at SQU. More national cancer awareness measures are needed. Integrating such measures into the students’ curriculum could help to increase awareness of cancer risk factors and symptoms which reduce the incidence of cancer in Oman

**Foot care Knowledge, Practice and the prevalence of peripheral neuropathy among type II diabetic patients attending three Family Medicine centers in Cairo**

Prof. Diaa Marzouk\(^1\), Lecturer Dalia Gaber\(^1\), Assistant Lecturer Rana El-Hilaly\(^1\), Resident Nouran Fakkar\(^1\)

\(^1\)Faculty of Medicine Ain Shams University, Egypt

Background: Diabetic complications are strongly attributed to poor foot care knowledge and practice. Proper daily foot care is an effective part of diabetic foot ulcer (DFU) prevention and enables diabetic patients to detect foot abnormalities and injuries earlier, thus reduce or even prevent the risk of foot ulceration effectively. Diabetic foot complications occur due to two basic etiological factors which are neuropathy and peripheral arterial disease (PAD). Diabetic peripheral neuropathy (DPN) affects up to 50% of people with diabetes. Objectives were to measure foot care knowledge and practice and to determine the prevalence of peripheral neuropathy among type 2 diabetic patients attending three Family Medicine Centers in Cairo. Methods: A cross-sectional study was carried out in three Family Medicine centers on 140 diabetic who met the inclusion criteria. Data on foot care knowledge and practice was collected using a structured interview questionnaire. In addition to Michigan Neuropathy Screening Instrument (MNSI) that was used to identify peripheral neuropathy Results: More than half (62.1%) of the participants had poor foot care knowledge, 24.3% had satisfactory level and only 16.3% have good knowledge. Foot care practice was significantly related to knowledge. In addition, strong and significant relation was found between income and knowledge grade. Also Longer disease duration and history of foot ulcer were associated with good foot care knowledge. The prevalence of peripheral neuropathy among the studied population was 55%. It was associated with longer disease duration. Conclusion: Poor foot care knowledge and practice was evident among the study participants in the three Family Medicine Centers and more than half of them had peripheral neuropathy. So, interactive health educational programs targeting type 2 diabetic patients are strongly recommended to reduce the risk of foot ulceration.

**Non-specific Chronic Low Back Pain and Quality of Life**

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Chronic non-specific low back pain (LBP) is a major and increasing health problem, most of it is non-life threatening. The major downside of such an ailment is the fact that it is a burden on the affected individuals’ quality of life socially as well as productivity, through impairing function, and being a risk...
factor for anxiety and depression. It can also be a financial drain through generating sick leaves and disability insurance. In fact, recent research shows that LBP causes more years lived with disability than any other health condition.

This is a cross-sectional study of 177 affected adults, conducted at Jordan University Hospital. Patients enrolled in the study were verbally consented by the research assistants to complete validated Arabic versions of the Visual Analog Scale (VAS), Euroqol Questionnaire (EQq) and Oswetry Disability Index (ODI); which were compiled into one questionnaire. 58.4% of the studied sample were females suffering from LBP. The mean age was 43.25 years for both males and females. The mean BMI for males was 26.67, and 28.12 for females; where adults with higher BMI showed a higher prevalence of LBP (p-value of 0.013), also taller individuals had a higher prevalence of LBP (p-value 0.006). Furthermore, we found out that LBP was more prevalent in unemployed populations (p-value 0.000). The ODI was lowest in people who were employed and highest (worst) in the unemployed (p-value 0.003). ODI was worst amongst those who were severely affected, showing anxiety and depression on their screening and patients who found themselves as unhealthy on the health status scale (p-value 0.00) LBP is highly prevalent, yet not well addressed and studied in developing countries such as Jordan. Doctors in general and primary healthcare physicians in particular should always ask about the quality of life and disability of patients with LBP.

Hypertensive patients' adherence to medications and lifestyle changes in Kotor, Egypt

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Background and Purpose: Worldwide, hypertension is the greatest significant preventable risk factor for premature death. Stricter adherence to hypertension medication and therapeutic lifestyle changes lead to greater reductions in blood pressure and other cardiovascular risk factors. Aim of this study was to assess medications adherence, dietary salt use, and physical activity levels among hypertensive patients in Kotor, Egypt.

Methods: This was a cross-sectional study conducted in Kotor district, Egypt. 440 patients were randomly recruited for the study after consent was obtained. Pre-tested interviewed questionnaire was structured with four sections: sociodemographic, physical activity, adherence to medications and restriction of dietary salt.

Results: Of 440 patients, 200 (45.5%) were illiterate, 264 (60%) were male, and 56.4% were older than 60 years of life. Good medication adherence was reported from 23.6% of the patients; 16.4% reported complying with salt restriction. 41.3% were physically inactive and 43.6% had controlled blood pressure. There was significant difference in medication adherence scores between males and females ($\chi^2 = 4.835; P = 0.028$), and additionally in the number of drugs taken ($\chi^2 = 49.427; P = 0.000$). On logistic regression analysis, female patients were found to be four and a half times more likely to be non-adherent with medications than the male patients (OR 4.364,95% CI: 1.692 –11.257; $P = 0.002$).

Conclusions: the majority of the patients in this study were non adherent to medications and in limiting their dietary salt use, as well as physically inactive. Special care and improved health education among these patients is highly recommended, especially as most of them are illiterate.
Case Studies In Antibiotic Resistant Infection "Super Bugs" at Sturgeon Hospital, Alberta Canada

Dr. Nabil Al-kayssi

Antibiotics are one of the most common medications that have been used and abused in the last 60 years.

In this presentation "which is part II on antibiotic used" I will present a case study of few infectious disease cases which was diagnosed at Intravenous Clinic and inpatient setting at Sturgeon Hospital, Alberta Canada.

Those cases are diagnosed with different infections with common bacteria that supposed to respond to commonly used Antibiotics though in those patients those bacteria resists all commonly used Antibiotics i.e they mutated to Super Bugs.

I will discuss the causes and management for each individual case

Syphilis sero-positivity among pregnant women attending public antenatal clinics: A five year analysis from 15 public clinics in Gaborone, Botswana

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Background: The prevalence of syphilis in pregnancy varies across the globe and among different age groups within the same country. In sub-Saharan Africa, syphilis prevalence among pregnant women has been found to range from 2.5 to 18% among antenatal clinic attendees, with the highest prevalence in the age group 35-49 years. It is higher in the rural than urban clinics.

Purpose: To determine trends in syphilis prevalence using the VDRL/RPR test among pregnant women attending the public antenatal clinics in Gaborone, Botswana (2004-2008).

Methods: Cross-sectional study using routinely collected antenatal data. Overall trends in syphilis prevalence, prevalence by age group and prevalence by clinic were determined. The chi-square (χ²) test was used and significance level for trend in syphilis prevalence by age group per year calculated.

Statistical significance was set at a p-value of ≤0.05.

Results: The overall syphilis prevalence amongst pregnant women in Gaborone, Botswana decreased from 2.96% (95% CI, 2.55-3.37) in 2004 to 1.15% (95% CI, 0.89-1.41) in 2008 (p < 0.001). The age specific prevalence per total number of reactive VDRL/RPR was highest amongst pregnant women aged 26 to 30 years (p < 0.001) and lowest for those aged 16 to 20 years (p < 0.025) during the period 2004-2008. However, there were variations in syphilis prevalence rates within and between the clinics.

Conclusion: Syphilis sero-positivity in pregnancy in Gaborone, Botswana has been declining for the last five years, but was more prevalent amongst pregnant women aged 26 to 30 years with the lowest prevalence among those aged 16 to 20 years during the period 2004 to 2008. This decline may be
attributed to a number of factors and in particular, the adoption of the syndromic approach for management of sexually transmitted infections in the country.

Diagnosis, management and follow-up of COPD patients - the role of Family Physician

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Background and Purpose:
Chronic obstructive pulmonary disease (COPD) is a progressive, debilitating disease that represents a major worldwide health problem. Recognition of COPD is often missed or delayed in primary care. The diagnosis, management and follow up of COPD in primary care settings have had variable success and have not been broadly implemented. Patients often reduce activity to avoid experiencing symptoms, postpone medical consultation for respiratory concerns, or neglect to discuss symptoms with family physicians. We aimed to assess the role of family physicians in the diagnosis, management and follow-up of COPD patients.

Methods:
The study population was derived from patients known to have an established diagnosis of COPD, aged 40 years and older registered in primary care. The questionnaire was administered by family physicians utilizing face-to-face interviews at participants in outpatient family medicine clinics. The study approved by the Medical Ethical Committee of the University Cukurova. All participants gave written informed consent.

Results:
Of 55 COPD patients, mean age was 63,84±9,50 years and 70,9 % were males. None of them were diagnosed in the primary care clinics, 72,7 % were diagnosed, 16,4 % were diagnosed at the university hospital and 10,9 % were diagnosed in private hospitals. Rutin health controls and examinations is mostly done done in the governental hospitals (47,3%), only 10,9 % were admited to the family physicians. 14,5 % had no rutin health controls and examinations in neither clinics. 92,7% of the patients had their prescription of pulmonary drugs in primary care settings by their family physicians.

Conclusions:
Enhancing primary care delivery, health literacy, and physician–patient collaboration will help primary care physicians to diagnose and manage COPD with regular planned care in addition to acute episodic care. Primary care physicians’ attention to patients’ experience, subtle signs, and activity levels will allow identification of unacknowledged symptomatic COPD.
Impact of Compliance to Therapy of Congenital Hypothyroidism on The Neurodevelopmental outcome in Sharkia Governorate

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Background: Congenital hypothyroidism (CH) is the most common preventable causes of mental retardation in children. Early treatment and high compliance to treatment is an important prognostic factor for normal mental and physical development in children with CH.  

Aim of the work: The aim of this work is to evaluate the compliance of the target families of patients with CH to therapy and the effect of non-compliance on the physical and mental development.  

Subjects and Methods: The study was descriptive cross-sectional design, which was conducted in Endocrinology and Pediatric Outpatient Clinics in Sharkia Governorate health insurance center. The study participants were 120 newborn and infant with CH and their mothers (patients group), and 120 age matched volunteers of healthy infants and children and their mothers (control group). Data were collected using multi-structured questionnaires for determining socioeconomic state, clinical picture at presentation, personal, family and obstetric history and Morisky Medication Adherence Scale (MMAS 8) to assess patient compliance. Assessment of physical growth through the anthropometric measurements, and assessment of mental development by using Vineland-II scale for infant < 2 years, and Stanford-Binet 5 Intelligence scales, for individuals aged 2 years and more. The results of investigations at diagnosis (initial TSH and T4) and during the follow up visits were reviewed.  

Results: About two third of patient families were highly compliant to therapy. There was highly significant difference between different compliance grades and between patients and control groups as regard the parameters of the metal and physical development. But no significant difference was found between the highly compliant cases and control.  

Conclusion: Compliance to L thyroxin therapy in our patients and/or their family was found to be reasonable. High compliance to treatment was an important prognostic factor for normal mental and physical development in infant and children with CH.

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Depression among Overweight and Obese Egyptian Females Attending National Nutritional Institute

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Background and purpose  
Depression is a major public health problem globally and will rank the second of the disease burden by 2030. Obesity, on the other hand, has become a leading global public health problem. This study was conduct to assess depression in overweight and obese Egyptian females.

Methods
The study was a case control study which included three hundred Egyptian females aged 18-40 years old who were attending obesity clinic in National Nutritional Institute (NNI) either for treatment or for any other reason. The studied groups were divided into two groups with one hundred and fifty females for each according to the BMI as a case group (BMI ≥ 25.00) and a control group (BMI 18.50 - 24.99). Both groups were matching in age and socio-economic status. All participants were under evaluation of body weight (kg), height (m) and waist circumference and were assessed for the psychopathology especially depression by using Beck Depression Inventory (BDI-II).

Results
28% of the case group was overweight, 30% were obese class I, 22% were obese class II and 20% were obese class III. 65.3% of the one hundred and fifty overweight and obese females were classified according to Beck Depression Inventory (BDI-II) as low depression and 26.7% as moderate depression and 8% as significant depression while in the control group 56.7% were classified as low depression and 38.7% as moderate depression and 4.7% as significant depression with (p value=0.062).

Conclusions
Although large percentage of Egyptian overweight and obese females suffer from depression, there was no statistically significant relation between obesity and depression in the studied groups, and this highlights the challenging need for providing individualized bio-psychosocial care for all obese Egyptian females.

Prevalence of Common Mental Disorders in Adult Patients Attending the Family Medicine Clinics, in Kasr Alainy Faculty of Medicine: A Cross-Sectional Descriptive Study

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Background and Purpose:
Mental disorders are a major contributor to the global burden of disease. Most of the individuals with psychiatric disorders present in the primary care. General practitioners play an essential role in the early detection, diagnosis, and proper management of the common mental disorders (CMDs). The objective of this study was to determine the prevalence, sociodemographic and medical correlates of CMDs among patients aged (18-60) years attending the Family Medicine outpatient clinics, in Kasr Alainy Faculty of Medicine.

Methods:
A cross-sectional descriptive study including 360 participants. Participants who scored above the cut-off value (11) in the GHQ-12, were subjected to the Arabic version of the Mental Health Checklists of the International Classification of Diseases-10 Primary Care (ICD-10 PC) version to determine the prevalence of psychiatric disorders.

Results:
Of all the respondents, (25.6%) scored positive on the GHQ-12, among which (13.1%) had severe psychiatric morbidity (GHQ >20). The overall prevalence of psychiatric disorders was estimated at (16.1%) of the studied participants. The commonest mental disorders were anxiety disorders (16.7%), followed by major depressive disorder (9.7%), sleep disorders (8.9%), chronic tiredness disorder (7.2%), and substance use disorder (3.6%). The least common mental disorders were unexplained somatic
complains (1.7%), psychosis (1.4%) and dissociative disorders (0.28%). Education and living in urban areas were protective factors against psychiatric morbidity. The presence of any ICD-10 mental disorder was associated with about 3 folds increased risk of psychiatric morbidity. Marriage was a protective factor against psychiatric disorders.

Conclusions:
Mental disorders are common in the primary care level. These findings are a useful guide to the probable prevalence of psychiatric morbidity and psychiatric disorders in the primary care level in Egypt. They also highlight that it is appropriate to use the ICD-10 PC version Mental Health checklists as screening tools for mental disorders in the primary care.

Depression and Anxiety among Hypertensive and Diabetic PHC Patients: Could patients’ perception of their disease control used as a screening tool?

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Objectives:
To measure the frequency and identify the risk factors of depression and anxiety among Diabetes Mellitus (DM) and Hypertensive (HTN) PHC patients. Also to assess whether the patients’ perception of the chronic diseases control and sleep disturbance status could serve as a simple screening tool for depression and anxiety.

Method:
Cross-sectional study of 368 PHC patients from the chronic disease clinics in AlKhobar city, 2016. Patient Health Questionnaire-9 (PHQ-9) and Generalized Anxiety Disorder-7 (GAD-7) were used as diagnostic tools for depression and anxiety.

Results:
Frequencies, cross-tabulations and logistic regression tests were performed. The overall prevalence rate of depression and/or anxiety was 57.3%, only 23% of them were known cases. Co-existence of both disorders found in 29.5% of patients. Depression formed 48.7%, out of them 39.8% mild; 7.1% moderate; 1.8% major type. Anxiety formed 38.4%, out of them 25.1% mild; 8.8% moderate; 4.4% severe type. Only sleep disturbance, weight change and low income had independent significant effect on depression and anxiety when controlling other factors. Patient's perception of chronic diseases control was found to be associated significantly with the presence of depression and anxiety. While the tested disease control (HbA1c > 7% and BP> 140/90 mm Hg) was not. Sleep disturbance have high specificity (98.7%) in diagnosing depression and anxiety.

Conclusion:
Depression and/or anxiety among PHC diabetic and hypertensive patients have a high morbidity. The patient's feeling is important to be further studied and considered in chronic diseases health care plan. Having no sleep disturbance can rule-out up to 98.7% of depression and anxiety.
ASSESSMENT OF COGNITIVE STATUS FOR DEMENTIA BY USING THE SIX-ITEM COGNITIVE IMPAIRMENT TEST (6-CIT) AS A SCREENING TOOL AT PRIMARY CARE SETTING IN MILITARY HOSPITAL, TABUK, KSA

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BACKGROUND
The 6-CIT is an internationally used and well-validated screening tool for use in primary care. Some evidence suggests that it outperforms the MMSE as a screening tool for dementia, especially in its mildest stage. Since a typical UK primary care consultation stands at only 7.5 minutes, the brevity and simplicity of the scale are its greatest advantages.

OBJECTIVES
- To evaluate cognitive function for dementia in primary care setting
- To propose the 6-CIT as integral screening tool in geriatric care

METHODOLOGY:
We have prized the translation of the 6-CIT into Arabic language. Validation was done by piloting on 40 volunteers included later in in the study participants. 250 participants has been screened for dementia using the Arabic version of 6-CIT over a period of 2 months. Scoring was done to categorize the participants into 3 groups.

RESULTS
The total number of participants were 212 (121 males and 91 females); all above 60 years old. In our study, 101 males (83.8%) and 64 females (70.3%) got a score of 0-7 which means normal cognitive function and no need for referral. A score of 8-9 was given to 8 males (6.6%) and 5 females (5.4%) referring to mild cognitive impairment which probably need referral whereas a score of 10-28 went to 12 males (9.9%) and 22 females (24.1%) which means significant cognitive impairment and referral is recommended according to the 6-CIT scoring system. The worst score in males and females was 16 and 20 respectively. It was evident that incidence of dementia increases by aging.

CONCLUSIONS
- The 6-CIT is a simple quickly accomplished tool for screening of dementia.
- Dementia is a significant geriatric problem in Saudi Arabia
- More elaborative studies are needed in this respect.

Obesity in Women: An Epidemic in Arab World

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The WHO (World Health Organization) defines obesity as a BMI (body mass index) of 30 kg/m2 or more. WHO report discovered that 30% of the population in the Arab World is overweight or obese, including adolescents and adults.

Development, urbanization, and improved living conditions in the Arab countries have led to greater consumption of unhealthy/fast food intake; accompanied by decreased physical activity, this has caused an increase in prevalence of obesity. This increases the risk of cardiovascular diseases, diabetes, musculoskeletal disorders, affects fertility throughout a woman’s life, cancer (endometrial, ovarian, breast, cervical), and premature death. Obesity is an independent risk factor for the development of
coronary artery disease (CAD) in women and is an important modifiable risk factor for prevention of CAD. Pre pregnancy obesity contributes to the development of many pregnancy related complications including pregnancy-induced hypertension, preeclampsia, gestational diabetes, cesarean-section, and neonatal death. Maternal obesity is associated with a decreased intention to breastfeed, decreased initiation of breastfeeding, and decreased duration of breastfeeding countries and Arab world. In Oman the prevalence of obesity reached 16.7% in men and 23.8% in women in year 2000 and it is gradually increasing. There are significant cultural barriers that appear to affect women more; managing their diet in pregnancy and postpartum and lack of communal exercise facilities for women. Traditional/cultural restrictions in lifestyle choices available to women in Arabic countries are one source for increased rates of obesity and females have limited access to sporting/exercise activities.

Severity of Menopausal Symptoms in Relation to Obesity, Smoking, and Exercise in Middle-aged Jordanian Women

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Natural menopause is defined as the occurrence of amenorrhea for 12 months that is not related to any pathologic cause; it plays an important role in women’s reproductive life, and interacts with other psychological, social and behavioral factors to influence women’s quality of life.

Aim: we aimed at finding at the effect of menopausal transition as well as exercise, smoking and obesity on menopausal transition and severity of menopausal symptoms and on women’s quality of life.

Methods: Cross sectional study conducted at family medicine walk in clinics at Jordan University Hospital. A sample of 359 women, aged 45 to 65 years old were included, Sociodemographic, smoking exercise and obesity, menopause status and symptoms, and quality of life were assessed by self-administered validated questionnaire. Data were analyzed using SPSS version 16

Results: mean age of participant at menopause was 49.4 years. More than 38% of the participants practiced no or irregular exercise, and slightly more than 92% have abnormal BMI of ≥25kg/m2 Women who practiced no or irregular exercise were significantly more likely to experience irritability, physical and mental exhaustion, sexual problems, and muscles and joint discomfort ( p-value of < 0.05). Women with abnormal waist to hip ratio were statistically at increased risk of experiencing sexual problems.

Conclusion: effective and regular exercise, and healthy body weight are key factors in the alleviation of menopausal symptoms during menopausal transition, specially the psychological/mental symptoms, muscle and joint discomfort, in addition to it is well known importance in the improvement of quality of life and reduction of cardiovascular risks and cancer prevention. Women in Midlife stage should be concealed about menopausal transition and its effect of mental and physical health, and encouraged to maintain effective level of exercise. And to optimize body weight were possible

Management of heart failure in primary care: Is there a role for the use of B-type natriuretic peptide (BNP) test?

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Background: 37% of deaths under the age of 70 were caused by cardiovascular disease. The number of patients with heart failure appear to be increasing, especially with the global rise in the ageing
population. Although echocardiography is the gold standard investigation for the diagnosis of heart failure, the cost of this procedure limits its use as a routine screening tool. Therefore, Brain natriuretic peptide (BNP) was found to have a role in the diagnosis, as it reflects ventricular pressure, therefore, useful in diagnosing heart failure in an acute situations such as emergency department, and it may have a role in primary care too.

Methods: Discussion of a poorly managed case in a GP surgery with review of how it was managed and key learning points.

The author would review the new guidance issued by the National Institute for Health and Care Excellence (NICE) on the management of heart failure compared to American College of Cardiology/American Heart Association guidelines 2016. Also, review available literature regarding the usefulness of using BNP as a diagnostic test and its role in primary care.

Results: Unfortunately due to lack of follow of an abnormally raised BNP the patient continued to deteriorate and died although she had a very raised BNP which should have prompted the doctors to refer urgently for echo and review by a cardiologist. Both NICE and ACC/AHA recommends their use and it is also supported from the reviewed literature.

Conclusion: People in low- and middle-income countries often do not have the benefit of integrated primary health care programmes for early detection and treatment of patients with heart failure. Therefore, testing for BNP has been shown from literature and guidelines to save cost by assessing the severity of LV dysfunction and the need for further follow up and assessments.
Family Physicians have practiced medical paternalism along with their fellow physicians in other specialties. Doing so, they interfere and overrule patient's preferences. This has been justified by noble reasons, such as ensuring patient benefit or preventing harm. The intention is always good as they follow Hippocrates “First Do No Harm” rule. Doing so patient autonomy is jeopardized. Autonomy is “the quality or state of being self-governing and the right of self-government”. It implies that as long physicians are not fathers and unless their patients are children, they should not treat them like children. Some might argue that despite our concern for patient autonomy, “there is still a place for old-fashioned paternalism in medicine.” Current family medicine training curricula emphasize the importance of making informed shared decisions about interventions and management plans. However, some family physicians still believe that patients' must depend on the wisdom of the all-knowing physician (father) who is somehow infallible. In the Arab world and Middle East region, this is seen as an acceptable practice. Recent research has demonstrated that practising shared care, and actively involving patients, had favorable outcomes on health care indicators. Institutions where leadership was dedicated to this strategy showed best results. The presentation will highlight updated research evidence evaluating the current practice and its consequences, and will share local experiences.

An inter-professional learning experience - medical students engaging with ambulance services during their Community medicine term

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Background and Purpose
Medical students at Weill Cornell Medical College - Qatar spend some months of their third year training in Community medicine. Given that the Ambulance Service is often the first point of contact a patient has with health services, paramedics truly provide primary health care in an acute setting. When practising as doctors these students will often need to interact with ambulance service staff. It was proposed that providing students with an opportunity to spend some time with the Hamad Medical Corporation Ambulance Service (HMCAS) would enhance their understanding of the services provided and respect for the skills of paramedics, as well appreciate the patient's journey.

Method
A one day program was developed for small groups of students. A variety of speakers from different departments of HMCASwere recruited to speak to their particular practice (road ambulance, air ambulance, mobile doctors, communications). A walk through of a standard ambulance, with demonstration of equipment, was led by a critical care paramedic. They were taught basic radio communications including the NATO phonetic alphabet; as well as introduced to the ISBAR tool for
patient handovers. Due to insurance constraints students were not able to "ride along" to ambulance calls.

Results
Over 60 students participated in the program over 4 individual days in a 4 month period. Written feedback was collected and was highly positive, meeting the learning objectives. Students uniformly expressed their frustration at not being able to ride out to calls. There was considerable demand on ambulance staff to coordinate and host students for this experience.

Conclusion
A short placement in the HMCAS proved a highly rated and popular experience for medical students. Their understanding of the skills of paramedics and their respect increased, and built on the value of interprofessional teamwork.

Community Based Education (CBE) In Hadramout University College Of Medicine (HUCOM), Yemen

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Background and purpose: Hadramout University College Of medicine (HUCOM) in Yemen was establishing in 1997. The purpose of this paper is to describe the different forms of community based education in undergraduate (community medicine courses) and postgraduate programs in HUCOM.

Methods: review the curriculum documents and observation

Results: Community based education in undergraduate program was conducting in two forms: training in PHC setting and community research projects. In community projects; students in groups collected data from the community about certain health problem by using scientific methods of data collection, analysis and presentation and at the end of each year every student's group present their findings in an annual scientific session. A total of 18 scientific sessions were held during the past 20 years including more than 260 community projects.

The postgraduate master program of family medicine in HUCOM started in October 2010, it is the only training program of family medicine in Yemen; it is absolutely community based. Till now 38 students enrolled in four batches. Consultation skills, evidence based practice and training in community clinics are the main hallmarks of the curriculum. Examples of student’s community tasks: video consultation sessions, portfolio, health education session and research projects. another postgraduate program was launched in 2012 is the master program of public health, till now only one batches was graduated and the second one is under training.

Conclusion: Many constrains faced implementing the community based education programs in HUCOM especially these challenges were not limited to armed conflicts and security problems but extended to technical and logistic problems that threatened the sustainability of programs; lessons were learned how to overcome challenges with the local resources.

Prevalence of Stress among Medical Students

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Background: Stress represents a normal, necessary and unavoidable life phenomenon which can generate temporary discomfort as well as long-term consequences. Objectives: The study was conducted to estimate prevalence, risk factors and coping methods of stress among medical students. Methodology: A Questionnaire based survey was conducted on medical students of Benha university at May 2013 for assessment of socioeconomic status, stress kind and level and the adjustment to college scale. Results: It was found that, the majority of students have stress (87.4%), which varies from mild to moderate (63.8% versus 23.6%). The most common sources of stress were, psychological (32.3%), social (8.5%), financial (4.9%) and medical (3.6%) problems. The academic, social and emotional adjustment levels among students varies between moderate to high (78.6% versus 21.4%) ,(26.8% versus 73.2%) and (77.8% versus 22.2%) respectively. Conclusion: Medical students face, social, emotional, and physical problems which may affect their learning ability and academic performance. Some find it hard to cope with the stress and lag behind, while others see the pressure as challenge to work harder.

Key words: Stress, academic, social and emotional adjustment, goal commitments.

Pattern of Morbidity among Elders attending General Practice: Health and Need Assessment of Geriatric patients in Oman

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Objectives
The purpose of this study was to identify problems and pattern of morbidities that is common in the elderly.

Background
Aging individuals tend to develop a more severe and more chronic disease, have co-morbidity, and develop frailty, dependency and reduced quality of life. The unique needs of the geriatric population necessitate a special kind of care approach, which has to be comprehensive and multidisciplinary.

Methods
A cross sectional study conducted in Rustaq, primary care in Oman. All consenting individuals aged 60 years were interviewed based on a structured, pre-tested questionnaire. Study data was analysed using Statistical Package for Social Sciences (SPSS) version 20.

Results
A total of 185 people were evaluated in this study. About 75% of participants were age 60-70 years, 74.1% males. Nearly two third (77%) had BMI 26.47 Kg/m2 and mean waist circumference was 90.16 cm. The prevalence of diabetes 37.8%, hypertension 49.7% dyslipidaemia 27.6% . Geriatric morbidity was gait impairment, impaired vision and walking difficulty. In daily living activity 22.7% were using walking aid. Most of the patients managing their daily activity without help, however nearly one third required help in housekeeping and laundry.

Conclusion
These findings provide important information on high prevalence of obesity, hypertension, diabetes and dyslipidaemia among elders. The activity of daily living is preserved in most of older people. The common morbidities need further assessment.
A Cross-sectional Study of Sleep Disorders and Insomnia Among Night Shift Health Workers in Eastern Province hospitals, Kingdom of Saudi Arabia, 2016

Ms. Zainab Almumen, Ms. Darin Alkhars, Ms. Fatima Alsalman, Ms. Fadail Alsayed, Ms. Layla Alramadhan, Ms. Mariam Alayesh, Ms. Mariam almomen, Mr. Mohammed Alibrahim, Mr. Mohammed Alomran, Mr Mohammed Algareeb

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Shift workers, people who work outside workday hours, are known to be at risk of decreased alertness and productivity; hence increasing the possibility of occupational errors occurring. Hospital environment requires health professions to be available at all times, which forces the health workers to take on night shift. Thus, healthcare workers are susceptible to occupational related sleep disorders. The aim of this study was to evaluate and assess the quality and duration of sleep among night shift health workers at the Eastern Province hospitals. A cross-sectional study was carried out among health workers working in 8-10 hour shifts at Eastern Province hospitals. A pre-tested, structured online questionnaire was distributed amongst the hospitals, with a total of 252 responses. The online questionnaire assessed and compared the difference between the sleep quality of the workers while working during the night shift and while taking days off. While working through night shifts, the respondents replied that they had problems falling and staying asleep (76% and 72.2%, respectively). Also, they suffered from an overall poor quality of sleep (59.8%) and decreased mental function (64.9%) while awake. Interestingly, the same respondents reported that during their days off, their occupational-related sleep disorders improved. However, more than half of the respondents noted that they faced difficulties falling asleep, which demonstrates the potent effect of night shift working on health professionals. This study concluded that sleep disorders are prominent within night shift health workers which affected their overall performance at work. We thereby recommend that such health workers follow up with sleep specialists to improve their overall quality of sleep.

Key findings from a scoping review of interprofessional online learning for primary healthcare teams

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Background: While there has been growth in both professional and interprofessional e-learning in health professions education, to date, there has been no effort undertaken to explore the use of interprofessional e-learning for primary care teams. This oral presentation presents key results from a scoping review of interprofessional online learning for primary healthcare teams. This study was guided by two research questions: what is the nature of evidence on team-based online learning for interprofessional primary health care teams? What methods of online team based learning improve learning outcomes?

Methods: The review searched the following electronic databases MEDLINE, the Cumulative Index of Nursing and Allied Health literature (CINAHL), Pubmed, Scopus, Web of Science and the British Education Index (BEI). In addition, journal hand searches and searches of grey literature were undertaken to generate insight from a diverse range of both published and unpublished sources. All materials generated from the searches were independently screened to ascertain their relevance.
Included papers were abstracted using a descriptive and numerical system alongside predetermined qualitative criteria.

Results: The review found that the 23 included studies employed a range of different e-learning methods with contrasting course durations, use of theory, participant mix, approaches to accreditation and assessment of learning. Eight key educational themes were identified from the included studies.

Conclusions: This presentation will outline the key results from the scoping review, provoking a discussion which surrounds the development and trajectory of the field. The presentation will further offer implications for interprofessional online education. It is anticipated that this review will allow research communities to understand the evidence in this field in regards to its depth and breadth, identify important gaps in knowledge and disseminate the findings to provide a framework for the practical application of a team based approach.
Current Situation, challenges & future of Family Medicine teaching & training as specialty (Egyptian Experience)

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Clinical specialties and sub-specialties are very appealing in the medical community on the expense of generalist and Family practice. The presentation will elaborate on; Family Medicine Teaching and Training in Egyptian Universities; A success model for introduction of Family Medicine (FM) Curriculum in under graduate Medical Education will be mentioned, Challenges and vehicles of overcoming as well as management of logistics / technical barriers & constraints will be illustrated. The story ends with production of a quality Family medicine curriculum, approved by the supreme council of Egyptian universities and an appeal to repeat such experiment in all Egyptian school of medicine. Family medicine curriculum is now implemented all through the clinical stage of medical education in the University of Menoufia. A separate scientific department fully staffed and equipped with sufficient teaching and training sites is now functioning in the medical school and is capable of production of physicians able to provide health care

Frequency, Reasons and Perceived Benefit of Energy Drinks Consumption Among University Students at King Saud bin Abdulaziz University for Health Science

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Background: An Energy drink is type of beverages that is the caffeine is the main ingredient. It is a popular practice among college students to use energy drinks, especially if the students had insufficient sleep or they need extra energy.

Aim of the study: to recognize the pattern of energy drinks among university students in King Saud Bin Abdulaziz University for Health and science (KSAU-HS) in Riyadh especially after Saudi Government banned the sale of Energy drinks in the events on 2014.

Methodology: The cross-sectional observation study conduct on students of king Saud bin Abdulaziz University for health and science, Riyadh, including seven different colleges. A 350 students were selected by convenience sampling method. SPSS used for analysis

Result: Response rate was 353 out of 360 (98.1%). Mean age of the responders were (20.20) with Std. deviation (1.76) and student GPA (3.8) with Std. deviation (0.78). 34.3% (121) reported using energy drinks. First time inspiration was their friends by 43% other inspired by curiosity and promotions. Students report most benefit of energy drinks were ability to stay awake longer 23.2 % and improves
mood 17.9% while they report the most side effect were sleeplessness 16.7%, increase urination 15.9% and palpitation 10.9%. There is no relation between using energy drinks and academic performance.

Conclusion: University students at KSAU-HS reported to use energy drink. Prevalence of use energy drinks is less than local and international studies, students think it can help them to stay awake for long time and have good mood during their stressors. On the other hands it did not affect their GPA. Media can play a role in students’ education about side effects of energy drinks.

A community study examining the health needs of the elderly population in Qatar

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1) Background and Purpose: The percentage of elderly in the Middle East is expected to increase as the youthful masses work their way up the population pyramid due to the improvements in health care. According to the WHO Department of Aging 2000 report, most Middle Eastern countries will be entering the window of opportunity during this decade, and the window is expected to last until midcentury. It is during this lucrative period that the groundwork for future geriatric services should be firmly established and nurtured. Therefore, this cross sectional study aims to assess the health needs of the elderly in order to deliver solid data for providing future geriatric services that can improve the quality of life of the elderly in the region.

2) Methods: Information was gathered from elderly attending many health care and elderly facilities in Qatar. People who lived in Qatar and were 65 years old or above were included whilst those who were only visiting Qatar were not included. The sample size included in the study consisted of 600 individuals. The interRAI organization’s community health assessment instrument (interRAI CHA) was used as a tool for gathering information. After filling in all the questionnaires, the data was entered into the SPSS Statistics program for analysis.

3) Results: The domains of the interRAI CHA include behavior, cognition, functional state, communication and vision, health conditions, social relations, and diagnostic information. The results delineated which diseases need to be tackled.

4) Conclusions: A similar study has been conducted in Dubai, UAE. Comparing the results will give us a better picture of the health situation of the elderly in the Middle East enabling us to fill the gaps and to target the needs of the elderly ensuring a better quality of life.

Lifestyle Prescription: How to Overcome the Barriers

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Lifestyle change is a cornerstone intervention in the management and prevention of hypertension and cardiometabolic risk. Yet, many care providers fail to address this, successfully. Virtually, all of the top 10 leading causes of death in adults, worldwide, are strongly influenced by lifestyle patterns and behavioral factors.

Lifestyle behavior like physical activity, overweight, obesity and Tobacco use are among the top global leading health indicators by 2020. It is claimed that more than 85% of health care cost is due to an individual’s lifestyle.
Multiple doubts were raised about the effectiveness of physician’s counseling. However, multiple reports have shown that patients who were counseled to lose weight were more likely to understand risks of obesity and benefits of weight loss and more likely to go for weight loss. Many barriers may hinder physician to counsel effectively, including lack of time and insufficient knowledge, skills and confidence. However, there are multiple guidelines and successful tools and options to choose from, including the 5 A’s Change Model, AMA Healthier Life Steps and SBRT model. In all options, behavioral change models must be understood and trained for to achieve optimum results.

In conclusion, lifestyle prescription is often missed by Physicians and usually not prescribed well, though once prescribed well, is effective in behavioral change and decreasing morbidity and cost.

Do we dare unmask atrial fibrillation

Michaela Machacova

Atrial fibrillation (AF) is considered to be one of the epidemics of the 21st century, the prevalence increases with age. Serious risk that comes with the atrial fibrillation is the thromboembolic event. Over the past 10 years, the death rate from AF complications more than doubled, which contrasts sharply with the decline in mortality in other cardiovascular diseases. Patients with AF have a 5-fold risk of a stroke. Asymptomatic patient is a time bomb for occurrence of the stroke. Thus these patients are the most important for targeted searches.

Key role for general practitioners to play here are
1. Identification of asymptomatic patients with the risk factors for AF
2. Appropriately timed initiation and correct management of anticoagulant therapy.

Nowadays, when medical diagnostics equipment (instruments) reaches the technological peak, we can unmask AF quite simply... with the check of the palpation pulse.