

SCIENTIFIC PROGRAM

ORGANIZED BY



8TH WORLD CONGRESS ON PUBLIC HEALTH AND GLOBAL WELLNESS



NOVEMBER 14-15, 2025
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Public Health-2025

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8TH WORLD CONGRESS ON PUBLIC HEALTH AND GLOBAL WELLNESS

DAY-1 (NOVEMBER 14)**REGISTRATIONS & OPENING REMARKS (09:00 - 10:00)****KEYNOTE FORUM (10:00-11:00)**

10:00 - 10:30 **The Kalymnos Consultation method**
Prof. Jan-Helge Larsen, Kalymnos consultation, Denmark

10:30 - 11:00 **Exploring the Perspectives of Older Adults Living with HIV on Virtual Care: Qualitative Study**
Prof. Dean Valentine, Division of Geriatric Medicine Sinai Health System, Canada

GROUP PHOTO & REFRESHMENT BREAK (11:00-11:30)**TECHNICAL SESSION-I (11:30-13:10)**

11:30 - 11:55 **Treatment of COVID-19 Epidemic with EGCG and Humic/fulvic acid: future applications**
Prof. Richard Williams, Via College of Osteopathic Medicine, United States

11:55 - 12:20 **Tracking the Battle: Immune Cells vs HIV in Humanized Mice**
Prof. Roberto Speck, Niversity Hospital of Zurich, Switzerland

12:20 - 12:45 **Co-developing a holistic infant feeding system**
Ms. Kiana Bowden, London Borough of Newham, UK

12:45 - 13:10 **The Effects of Korean Adolescents' Sleep Duration on Life Satisfaction: Utilizing the Autoregressive Cross-Lagged (ARCL) Model**
Dr. Eun Jin Jung, Korea Research Institute for Vocational Education and Training (KRIVET), South Korea

LUNCH @ RESTAURANT (13:10 - 14:00)**TECHNICAL SESSION-I (14:00 - 17:20)**

14:00 - 14:25 **Latrogenic transmission of Trypanosoma evansi infection in camels**
Dr. David Hyunduk Kim, Fujairah Genetics, United Arab Emirates

14:25 - 14:50 **Physical Activity As A Tool for Mental Health Preparedness and Recovery**
Dr. Robinson Modum, University of Aberdeen, UK

14:50 - 15:15 **Dengue Virus Infection and Guillain-Barré Syndrome: A Systematic Review of Clinical Characteristics, Outcomes, and Predictors of Severity**
Dr. Moses Gregory Effiong, NHS Tayside, UK

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REFRESHMENT BREAK (15:15 - 15:40)

15:40 - 16:05	Comprehensive Genetic Screening of 465 Disease Genes in 33,894 Newborns in China and An Improved Strategy for Newborn Hearing Screening Prof. Wei Li, Beijing Children's Hospital, Capital Medical University, China
16:05 - 16:30	An Economic Evaluation of An Electrochemical Portable Innovative Biosensor Dr. Nilay Ünsal Karaman, Ankara University, Turkey
16:30 - 16:55	The consultation under the microscope Prof. Jan-Helge Larsen, Kalymnos consultation, Denmark
16:55 - 17:20	Missed opportunities for preventing mother to child HIV transmission in the Dolutegravir era; a matched case control study from a tertiary hospital in Uganda Dr. Namusisi prossy, Kawempe National Referral Hospital, Uganda
17:20 - 17:45	Decentralizing HIV Viral Load Monitoring: Feasibility and Market Insights from the HIVQuant® Prototype Evaluation Dr. Catherine Kibirige, Intellectual Property Strategy Officer, UK
17:45 - 18:10	Socio-demographic correlates of COVID-19 Vaccine hesitancy among Men in Nigeria: findings from the National population-based survey Dr. Olatunde Aremu, Birmingham City University, UK

PANNEL DISCUSSIONS

DAY-1 CONCLUDES

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09:35 - 10:00	Disrupted Muscle–Brain Crosstalk through Apelin–APJ Signaling in Post-ICU Syndrome Dr. Yumiko Imai, Nozaki Tokushukai Hospital, Japan
10:00 - 10:25	Pyruvate–GPR31 axis induces LysoDC dendrite protrusion to M-cell pockets for effective immune responses in Peyer’s patches Dr. Eiji Umemoto, University of Shizuoka, Japan
10:25 - 10:50	Affinity-independent memory B cell origin of the early antibody-secreting cell response in naive individuals upon SARS-CoV-2 vaccination Prof. Zhe Li, Shanghaitech University, China
10:50 - 11:15	BACH2 drives the development and function of group 2 innate lymphoid cells Prof. Jun Wang, Shanghai Jiao Tong University, School of Medicine, China
11:15 - 11:40	Landscape of the Epstein-Barr virus-host chromatin interactome and gene regulation Dr. Meizhen Zheng, Southern University of Science and Technology, China
11:40 - 12:05	Etiology of diarrheal hospitalizations following rotavirus vaccine implementation and association of enteric pathogens with malnutrition among under-five children in India Dr. Tintu Varghese, Christian Medical College, India
12:05 - 12:35	Global Mapping of evidence on vaccination related education delivery through school based curriculum: A scoping review Dr. Bhupender Singh Khanuja, ITSU, JSIPL, India
12:35 - 13:00	Role of satellite-based and climate projection exposures on future temperature-related respiratory diseases Dr. Omid Aboubakri, Kurdistan University of Medical Sciences, Iran
13:00 - 13:25	Preventing the spread of germs when emptying urine drainage bags in home care Dr. Uwe Ernsberger, Max Planck Institute for Brain Research, Germany
13:25 - 13:50	Self-Powered Radio Frequency Biosensor for Proactive Viral infection Symptoms Monitoring Dr. Sunday Ekpo, Metropolitan University, UK
13:50 - 14:15	Comparative Analysis of COVID-19 Outcomes in Type 1 and 2 Type 2 Diabetes: A Three-Year Retrospective Study Prof. Flavius Cioca, Victor Babeş University of Medicine and Pharmacy, Romania
14:15 - 14:40	The severe acute respiratory syndrome coronavirus-2 (SARS CoV-2) omicron sub-variants in Bangladesh cause mild COVID-19 and associate with similar antibody responses irrespective of natural infection or vaccination history Dr. Simon D. Lytton, SeraDiaLogistics, Germany

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14:40 - 15:05	Monosaccharide Profiling of Lipopolysaccharide: A Novel Approach for Identification of Antigenically Similar Leptospira and Its One Health Implications Dr. Aleksandra Lewicka, University of Agriculture in Krakow, Poland
15:05 - 15:30	Prevalence of protective levels of anti-HBs antibodies among 15-17 year old adolescents at Kawempe division Kampala-Uganda. Ms. Joan Nambafu, Makerere university, Uganda
15:30 - 15:55	Endogenous L-glutathione rapidly degrades the vaccine additive thimerosal at pH 7.4. Prof. Juergen Gailer, University of Calgary, Canada
15:55 - 16:20	Restructuring of the COVID-19 Vaccine Safety Committee 2020-2023 in Mexico Dr. Ana Maria Santibanez, SECRETARIA DE SALUD, Mexico
16:20 - 16:45	Assessing the Impact of COVID-19 Vaccines on Sickle Cell Anaemia Patients Dr. Jehad A. Aldali, Imam Mohammad Ibn Saud Islamic University (IMSIU), Saudi Arabia
16:45 - 17:10	The use of angiotensin-converting enzyme inhibitors in hospitalised patients with COVID-19 is associated with a lower risk of mortality Dr. Mykola Khalangot, Infectious Diseases Hospital, Kostiantynivka, Ukraine

PANNEL DISCUSSIONS

DAY-2 CONCLUDES

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Richard Williams, M.D.

College of Osteopathic Medicine, Blacksburg, Virginia,
United States

Treatment of COVID-19 Epidemic with EGCG and Humic/fulvic acid: future applications

According to the COVID Tracking Project (CTP) data, the initial mortality infection rate within long-term care facilities was approximately 47%. Concurrent publications suggested that epigallocatechin gallate (EGCG) and humic/fulvic acid had the potential to interfere with the SARS-CoV-2 virus, inhibiting COVID-19 infections, attachment, and replication, while also exhibiting significant anti-inflammatory activity. They also exhibited a good safety profile and ease of utilization. With the high mortality rate and significant published data on the inhibitory aspects of EGCG, Humic fulvic acid, and vitamin C, and no approved medications available during the early pandemic. Our facility utilized EGCG, Humic/fulvic acid, and vitamin C for treatment in COVID-19-positive patients. Among 22 patients receiving treatment with the integrative combination, there were no mortalities. Among 37 patients treated without this integrative support, there were 21 deaths resulting in an improvement from a mortality of 56% in our facility to 0 %. Current worldwide COVID-19 death rates recorded by the World Health Organization are slightly less than 1000 weekly in an annual cost between \$130 billion \$1 trillion. There are presently no approved treatments for the prevention or prophylaxis of COVID-19. The EGCG has been shown to prevent the binding of the viral spike protein 1 adapter protein to the ACE cellular receptor sites. There are also multiple mediators in COVID-19 transmission. EGCG blocks all the major constituents needed for COVID attachment and transmission. These interactions occur at very low obtainable serum levels. Humic and fulvic acids have also demonstrated the ability to inhibit the attachment and infectivity of COVID-19. COVID-19 has shown a significant ability to mutate into variants every 11 to 15 days. EGCG has the ability to inhibit multiple pathways of both attachment and viral replication, including Mpro, which blocks viral replication. Molecular docking studies have shown that EGCG binds to RNA-dependent RNA polymerase and other proteins of the replicase complex (NSP6 and NSP15), which may block viral replication. Furthermore, EGCG binds to and inhibits the association of the N protein with the RNA genome, thereby blocking viral assembly and interfering with multiple reproductive mechanisms of COVID-19. In conclusion, a retrospective review of treatment data revealed that the nursing home setting, incorporating EGCG, humic/fulvic acid, and vitamin C, in the treatment of COVID-19 resulted in a significant reduction in overall mortality. With the continued presence of COVID-19, this combination could offer a potential avenue for both the prevention and treatment of COVID-19 infections.

Keywords

COVID-19, EGCG, Humic fulvic acid, Vitamin C, Integrative medicine

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Biography

Associate Professor in Internal Medicine, Osteopathic Manipulation, and Primary Care Departments of the Via College of Osteopathic Medicine(VCOM), Blacksburg, Virginia, 24060, United States.

He received his Medical degree from Brody School of Medicine. In Greenville, NC. May of 1986. He completed a residency in Internal medicine and Pediatrics from the Brody School of Medicine in Greenville, NC, in 1990. He holds a Master's degree in Biology and a B.S. degree in Biochemistry from East Carolina University. In Greenville, NC. Doctor Williams is presently board-certified in Internal Medicine, Anti-aging, and regenerative medicine. His research interest is in integrative functional medicine. With a special interest in Gemmotherapy/Phytembryotherapy.

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Jan-Helge Larsen

Kalymnos Consultation, Denmark

The Kalymnos Consultation method

The Kalymnos consultation method is based on laboratory experiments where doctors are impersonating one of their own patients and another doctor is training to meet this patient. The play is videorecorded and reviewed twice. In this way we have compiled results of effective doctor patient communication perceived by "the doctor-patient", him or her becoming a golden standard for what is effective. The results are fed back to the following consultations and courses in a circular process. This is inspired from action research methods in education. The result from role plays and real consultations has JHL collected from his supervisions. The laboratory work has been supplemented with theories from psychology, philosophy and neurophysiology. The feedback from participants say that they work much more effectively and prevents burnout. More than 5,000 Danish and Swedish doctors have participated in one-week courses.

The aim of the Kalymnos method is to help the doctor focusing on:

1. Building a working relation to the patient (the importance of giving receipts and acknowledgements is explained),
2. Providing relevant information in a short time (the three parts of the consultation and the use of the Five card method),
3. Sharing existential concerns (behind strong feeling are existential concerns),
4. Taking care of the doctor (about housekeeping).

Keywords

The consultation, methods, supervision, video, primary care, housekeeping

Biography

Jan-Helge Larsen GP and former Associate Professor (1986-2006), University of Copenhagen. Supervisor for GPs, Danish and Swedish. Since 1992 running the Kalymnos consultation courses; developed models and methods for consultation and supervision. MRCGPH 2018. Halfdan Mahler price 2022.

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Ph.D.^{1, 2} Zhan Qi, Ph.D.¹ Feng Jin, Ph.D.³ Xiaofen Zhang,
M.S.N.³ Limin Xie, M.D.³ Yuanhu Liu, Ph.D., M.D.^{3, 4} Xin Ni,
Ph.D., M.D.^{4, *} **Wei Li, Ph.D., M.D.^{1, 2, *}**

¹ Beijing Children's Hospital, Capital Medical University; Laboratory for Genetics of Birth Defects, Beijing Pediatric Research Institute; MOE Key Laboratory of Major Diseases in Children; Center of Genetics and Birth Defects Control, National Center for Children's Health; Beijing 100045, China

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These authors contributed equally to this work

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Comprehensive Genetic Screening of 465 Disease Genes in 33,894 Newborns in China and An Improved Strategy for Newborn Hearing Screening

Background

Expanded newborn genetic screening has the potential to identify a wide range of inherited conditions early in life. However, the prevalence and distribution of pathogenic variants in large-scale cohorts remain underexplored in the Chinese population. Hearing loss is a prevalent congenital condition. In China, concurrent newborn hearing and limited genetic screening has been implemented during the last decade. However, the role of gene sequencing in this context remains unexplored.

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Methods

We conducted genetic screening on 33,894 newborns using targeted sequencing of 465 genes associated with monogenic disorders. Variants were classified based on locally optimized American College of Medical Genetics and Genomics (ACMG) guidelines, focusing on pathogenic (P) and likely pathogenic (LP) variants. Key metrics including cumulative carrier rate (CCR), disease-specific prevalence, and regional differences were analyzed. In addition, comprehensive screening for 90 common hearing loss genes was performed on 7501 newborns. Universal newborn hearing screening and limited loci of genetic screening were also compared.

Conclusions

This large-scale study highlights the utility of targeted genetic screening for identifying carrier status and early-onset disease risks in newborns. The findings provide a critical foundation for integrating genetic screening into routine newborn care and for optimizing public health strategies. Combining targeted sequencing with universal newborn hearing screening is technically feasible and clinically useful in identifying newborns with hearing loss, particularly when integrated with genetic counseling and closed-loop management.

Biography

Wei Li, Ph.D., Professor of Beijing Children's Hospital, Capital Medical University. Director of Genetics and Birth Defects Control Center, National Center for Children's Health. Research Interests: Biogenesis of lysosome-related organelles and related diseases; Genetics and pathogenesis of birth defects and rare diseases. He has co-authored 150 SCI-indexed journals with about 10,000 citations. He initiated the first genomic newborn screening program in China in 2015. He has been awarded the Outstanding Achievement Award of China Birth Defects Salvage Foundation (2022).

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Eun Jin Jung

Korea Research Institute for Vocational Education and
Training (KRIVET), South Korea

The Effects of Korean Adolescents' Sleep Duration on Life Satisfaction: Utilizing the Autoregressive Cross-Lagged (ARCL) Model

This study examines the impact of adolescents' sleep duration on their overall life satisfaction, a topic that has received limited empirical attention despite its recognized importance for youth mental health. Data were drawn from the Korean Children and Youth Panel Survey (KCYPs), conducted by the National Youth Policy Institute, with a focus on the 4th-grade panel ($N = 2,378$; 52.4% male, 47.6% female). Analysis revealed a sharp decline in sleep duration as students transitioned into junior high school. Accordingly, the dataset was divided into two periods: Year I (4th grade) to Year IV (7th grade), and Year IV (7th grade) to Year VII (10th grade). Employing the autoregressive cross-lagged (ARCL) model, the results demonstrated that sleep duration significantly predicted life satisfaction over time. Specifically, longer sleep duration in 7th grade significantly influenced life satisfaction in 8th grade ($\beta = 0.025$, $p < 0.03$), while sleep duration in 8th grade predicted life satisfaction in 9th grade ($\beta = 0.026$, $p < 0.03$). Likewise, 9th-grade sleep duration was found to significantly affect life satisfaction in 10th grade ($\beta = 0.027$, $p < 0.03$). These findings underscore the cumulative role of sleep in shaping adolescent well-being and suggest the need to create environments that support adequate sleep duration even after the transition to junior high school. Implications for policy and directions for future research are discussed.

Keywords

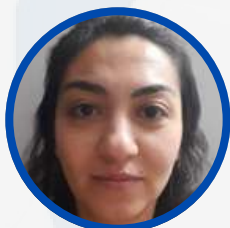
adolescents, sleep duration, life satisfaction, autoregressive cross-lagged (ARCL) model, Korean Children and Youth Panel Survey (KCYPs)

Biography

Eun Jin Jung is currently a research fellow at the Korea Research Institute for Vocational Education and Training (KRIVET), a national research institute located in Sejong. She earned her Ph.D. in Technology Management, specializing in Organizational Behavior, from KAIST in 2015. Afterward, she conducted research on youth policy and youth well-being at the National Youth Policy Institute (NYPI) for about two years. Since 2018, she has been researching vocational training policies at KRIVET. While working at NYPI, she conducted research on the positive effects of sleep duration on adolescents. Based on this, she published the paper titled "The Effects of Korean Adolescents' Sleep Duration on Life Satisfaction: Utilizing the Autoregressive Cross-Lagged (ARCL) Model" in *Frontiers in Sleep*. Recently, she published another paper titled "Academic control ability as a predictor of life satisfaction in adolescents (forthcoming)" in the *EducacionXXI Journal*.

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An Economic Evaluation of An Electrochemical Portable Innovative Biosensor

Biosensors have emerged as indispensable diagnostic tools in contemporary biomedical applications. It is necessary to develop low-cost biosensor devices and well-established production standards. Within this context, Türkiye has demonstrated substantial commitment to health technology innovation, as evidenced by increasing R&D investments in this sector. Exemplifying this national strategy, TÜBİTAK's 1004 Program funded the "Regenerative and Restorative Medicine Research and Practices" project (Project No: 20AG003). The project was executed by ASELSAN, a Turkish defense cooperation and focused on developing a biosensor capable of detecting anti-SOX2 protein and CD133 antibody—both recognized biomarkers for small cell lung cancer. Our study is an economic evaluation of this biosensor which aims to contribute to the scientific and technological research. We compare the operational unit cost of the diagnostic kit with the costs of standard processes such as tomography, PET, and biopsy used in the diagnosis of small cell lung cancer patients in the current health system. The operational unit costs are provided by the research team. The data for the current standard diagnostic procedures are provided by Ankara University Faculty of Medicine. The findings show that the project prototype has a lower cost compared to its international equivalents but higher cost compared to public university hospital standard diagnostic process. Producing more effective personalized diagnostic methods can contribute to patient health at the micro level and the economy as a whole. This new technology is crucial for producing a low-cost device using national resources, early detection of a common noncommunicable disease, and activating the potential to produce new projects by developing a biosensor using national resources.

Keywords

biosensors, innovation economics, public health, personalized medicine

Biography

My research focus is on Health economics, program evaluation/impact analysis, and innovation economics. I conduct research on workplace wellness programs, economic evaluation of health technologies, and innovation economics.

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Jan-Helge Larsen

Kalymnos Consultation, Denmark

The consultation under the microscope

During the last 33 years we have developed methods of video supervision in the consultation lab on Kalymnos, Greece with more than 5,000 Danish and Swedish GPs attending. We supervise video of role-plays and real-life consultations. Too we have developed a method for supervision of supervision of e.g. video or case supervision. This work is significant because nobody – to our knowledge – has done this both in depth and extensively.

The methods can be used for the continuous professional development in general practice on all levels. To raise the quality of communication in primary care we need simple methods to supervise what is done and how it can be improved.

Five topics will be explained:

1. Development of methods of video-based feedback and supervision on Kalymnos (Windows method, Macro-Micro method and Micro only)
2. Examining the conversation as if it were 'under the microscope' (review several times what is said)
3. First level: Training consultation skills using video-recorded patient roleplays (the "Doctor-patient" as a golden standard)
4. Second level: Supervision of 'real life' consultations on video (how do doctors apply the Kalymnos method in real life?)
5. Third step: Recording the supervision process and reviewing it afterwards (in one-to-one supervisions it gives a learning opportunity for both doctor and supervisor)

Keywords

Supervision, consultation, video, primary care, feedback

Biography

Jan-Helge Larsen GP and former Associate Professor (1986-2006), University of Copenhagen. Supervisor for GPs, Danish and Swedish. Since 1992 running the Kalymnos consultation courses; developed models and methods for consultation and supervision. MRCGPH 2018. Halfdan Mahler price 2022.

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Omid Aboubakri¹ , Hamid Reza Shoraka², Marzieh Mahmoodi Manesh³

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Role of satellite-based and climate projection exposures on future temperature-related respiratory diseases

Background

To explore how climate change will affect the future burden of respiratory diseases is worth understanding for public health, particularly in regions experiencing rapid environmental change. In this study, we combined hospital-based respiratory admissions with satellite and climate model data to understand how cold and heat affect respiratory diseases across future decades by the end of 21st century.

Methods

Daily hospital admissions for ICD-10 codes of J00–J99 from 2015–2022 were analyzed alongside observed meteorological data and remotely sensed land surface temperature (MOD11A1) and vegetation index (MOD13C1). Bias correction of predicted air temperature was performed using the ISIMIP statistical approach to preserve long-term climate trends. Distributed lag non-linear models were applied to establish temperature–diseases association, which were then used to project future disease burdens under three emission scenarios (RCP2.6, RCP4.5, and RCP8.5) and two population change variants. Adaptation was also represented by a 30% increase in minimum risk temperature.

Results

Cold exposure was the dominant driver of respiratory hospitalizations, in the baseline period, though its impact is projected to decrease through the century. The Attributable Fraction(AF) was statistically significant for cold in 2020-2029 with AF of 48.93 (CI 95%: 1.33, 62.83) under RCP4.5 and low variant of population growth. Conversely, heat-related burdens are expected to increase, especially under RCP8.5. However, overall uncertainty declines when green space was adjusted in the models. It should be noted that the impact of demographic change on the effect sizes was surprisingly low in our study.

Conclusion: The findings highlight decreasing impact of cold and increasing impact of heat with the potential protective role of green cover emphasizing its positive role on future public health adaptation strategies.

Keywords

Heat, Cold, Respiratory diseases, Climate change

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Biography

Dr. Omid Aboubakri is a faculty member at the Kurdistan University of Medical Sciences, Iran. His research focuses on the health impacts of climate change, environmental epidemiology, and spatial modeling using remote sensing and statistical approaches. He has conducted several studies on epidemiology, especially environmental epidemiology including temperature-related mortality and morbidity, and climate-health projections. His current work explores how environmental and demographic change will affect future health outcomes under different climate scenarios.

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Kiana Bowden

London Borough of Newham, London, United Kingdom

Co-developing a holistic infant feeding system

In Newham, significant disparities in breastfeeding rates persist across maternal age, ethnicity, and deprivation levels. Data shows a marked decline in exclusive breastfeeding from initiation to hospital discharge, and further between the 10–14 day and 6–8 week health visits. To address these inequities, Newham Council has co-developed a holistic infant feeding system through consultation and coproduction with parents, health professionals, and community partners. This initiative mapped existing services, identified gaps, and gathered insights to inform a culturally sensitive, systems-wide approach. Outcomes include improved breastfeeding support across hospital and community settings, recruitment of dedicated infant feeding professionals, and the commissioning of a peer support service. Feedback highlights high satisfaction rates and positive parental experiences. To bridge health research, policy, and practice, Newham is also collaborating with Masters students from Queen Mary University of London through the provision of dissertation supervision. This partnership strengthens the evidence base and supports the development of sustainable, community-informed interventions based on the policy recommendations from this work. Recently, the excellent standard of infant feeding support across Health Visiting, Children's Centres and Family Hubs has been recognized by UNICEF as the community based services progress towards UNICEF's Baby Friendly Initiative Stage 3 Accreditation. Next steps include developing Newham's Infant Feeding Strategy, launching a borough-wide Breastfeeding Welcome scheme, and continuing leadership through the Infant Feeding Steering Group—contributing to Newham's ambition to give children the best start in life.

Keywords

maternity, breastfeeding, infant feeding, Family Hubs, commissioning, policy

Biography

Kiana Bowden is a Public Health Strategist at Newham Council, working on the Child Death Overview Panel (CDOP) and Early Years portfolio. Through her studies of medicine, global health and social medicine, she developed a strong foundation in interdisciplinary approaches to health systems and policy. Kiana brings a wealth of experience from roles at the General Medical Council (GMC), Civil Service, and Southwark Council, where she contributed to public health and regulatory initiatives. Her work is driven by a commitment to reducing health inequalities and improving outcomes for children and families across London.

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Ezenwa Robinson Modum, MPH

University of Aberdeen, United Kingdom

Physical Activity As A Tool for Mental Health Preparedness and Recovery

Mental health conditions such as depression, anxiety, and stress-related disorders continue to rise globally, particularly during and after public health emergencies, natural disasters, and socio-economic crises. Enhancing mental health preparedness and recovery is therefore an urgent public health need. Physical activity (PA), widely recognised for its physical health benefits, is also a proven and cost-effective tool for improving mental well-being and building psychological resilience. This paper examines the role of physical activity in mental health preparedness and recovery using global secondary data and recent meta-analyses. Evidence shows that individuals who meet the World Health Organization's recommended levels of physical activity have approximately a 25% lower risk of developing depression than inactive individuals. Even moderate levels of activity are linked with reduced anxiety, improved mood, and stronger coping capacity during crises. The paper introduces the Movement for Resilience Framework, which integrates PA into national mental health preparedness and recovery systems through policy reform, community-based programs, and intersectoral collaboration.

Findings suggest that embedding physical activity into public health and crisis recovery strategies can enhance resilience, accelerate psychological healing, and reduce long-term mental health burdens. The paper concludes with actionable recommendations for governments, workplaces, and communities to recognise and promote PA as a key component of mental health preparedness and recovery.

Keywords

mental health, physical activity, preparedness, recovery, resilience, public health, policy.

Biography

Robinson Modum is a practicing physiotherapist and public health advocate currently completing his Master's degree in Public Health (MPH) at the University of Aberdeen, United Kingdom. He is the Founder of the Robinson Modum Foundation, an NGO promoting health and wellness as well as basic education and literacy. His research interests focus on mental health, preventive health, and physical activity as a tool for well-being. Robinson has organized several community medical outreaches and continues to advance research and advocacy aimed at improving population health and achieving SDG 3 - Good Health and Well-being.

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Sebastien Antoni³, Heidi M Soeters³, Tondo Opute
Emmanuel Njambe⁴, Eric R Hout², Jacqueline E Tate⁵,
Umesh D Parashar⁵, Gagandeep Kang¹

¹The Wellcome Trust Research Laboratory, Division of Gastrointestinal Sciences, Christian Medical College, Vellore, India.

²Division of Infectious Diseases and International Health, University of Virginia, Charlottesville, Virginia, USA.

³World Health Organization, Geneva, Switzerland.

⁴World Health Organization Regional Office for South-East Asia, New Delhi, India.

⁵Division of Viral Diseases, Centers for Disease Control and Prevention, Atlanta, Georgia, USA.

Etiology of diarrheal hospitalizations following rotavirus vaccine implementation and association of enteric pathogens with malnutrition among under-five children in India

Malnourished children are at higher risk of mortality and morbidity following diarrheal illness and certain enteropathogens have been associated with malnutrition in children. Very few studies have comprehensively looked at the etiology of diarrhea in malnourished children and most have used conventional diagnostic methods with suboptimal sensitivity. We used a highly sensitive molecular approach against a broad range of pathogens causing diarrhea and examined their association with malnutrition. In addition, we looked at the pathogen diversity of pediatric diarrhea, three years after the nationwide rotavirus vaccine introduction to understand the evolving landscape of pathogens, which is crucial for planning strategies to further reduce the diarrhea burden. Clinical details and diarrheal stool samples were collected from hospitalized children aged < 5 years from three sentinel sites in India for a period of one year. The samples were tested by qPCR for 16 established causes of diarrhea using TaqMan Array Cards. A total of 772 children were enrolled, from whom 482 (62.4%) stool specimens were tested. No specific pathogen was associated with diarrhea among children with acute or chronic malnutrition compared to those with better nutritional status. Overall, adenovirus was the leading pathogen (attributable fraction (AF) 16.9%; 95% CI 14.1 to 19.2) followed by rotavirus (AF 12.6%; 95% CI 11.8 to 13.1) and Shigella (AF 10.9%; 95% CI 8.4 to 16.4). The majority of diarrhea requiring hospitalization in children aged < 2 years could be attributed to viruses, while Shigella was the most common pathogen among children aged > 2 years. These data on the prevalence and epidemiology of enteropathogens identified potential pathogens for public health interventions.

Keywords

Children; Diarrhea; Enteropathogens; Low resource settings; Malnutrition; Molecular testing; qPCR.

8TH WORLD CONGRESS ON PUBLIC HEALTH AND GLOBAL WELLNESS

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Marburg virus disease outbreak in Rwanda, 2024: Current efforts and calls to action to mitigate the outbreak in Rwanda

The recent outbreak of Marburg virus disease (MVD) in Rwanda, first reported in September 2024, marks the country's initial encounter with this highly lethal hemorrhagic fever caused by the Marburg virus. With primary transmission from fruit bats and subsequent human-to-human spread through direct contact, MVD presents significant public health challenges due to its rapid progression from flu-like symptoms to severe hemorrhagic fever and high mortality rates. Rwanda's Ministry of Health responded swiftly, implementing critical containment measures, such as intensive contact tracing, targeted vaccination for suspected cases and healthcare providers, restricting caregiver access, limiting traditional gatherings, and enforcing strict hygiene and infection control protocols. In the last three and a half years, Rwanda has been dealing with COVID-19, Mpox (formerly monkeypox), and now the Marburg outbreak. Drawing on lessons from past public health crises, Rwanda's Ministry of Health is implementing swift action to manage the situation. Here we discussed Rwanda's strategies in managing the MVD outbreak, emphasizing the importance of a One Health approach that integrates human, animal, and environmental health to mitigate zoonotic threats. Vaccination efforts targeting healthcare providers and high-risk contacts have become a vital component of Rwanda's response, aiming to protect those on the front lines and prevent further spread. The response is further strengthened by partnerships with global health organizations, including the World Health Organization (WHO), underscoring the need for coordinated international support and cross-border containment measures. This MVD outbreak highlights the urgency of ongoing research into effective treatments and licensed vaccines to bolster Rwanda's preparedness and resilience against future outbreaks.

Keywords

Marburg Virus Disease (MVD), Vaccination, Rwanda, public health, outbreaks

Biography

Louange Bienvenu BYIRINGIRO is a Rwandan pharmacist with professional experience in pharmaceutical regulation, medical product assessment, and community health promotion. He currently serves as a Marketing Authorization Assessor at Rwanda FDA, where he contributed to a significant rise in the National Register of human medicines and supported WHO maturity level 3 certification. Louange holds a Bachelor of Pharmacy from the University of Rwanda and is pursuing advanced studies in Biomedical Expertise. Passionate about medicine safety and public health, he has published multiple research papers and actively participates in outreach programs through Healthcare Professionals in Global Transformation.

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Neurological impairment in hemoglobin disorders: first cases in Tunisia

Hemoglobin disorders are among the most common inherited diseases worldwide. Their clinical manifestations range from anemia to more severe forms associated with neurological impairments. These complications can result as secondary consequences of the disease's clinical manifestations, or be directly linked to genetic mutations. In this study, we present two families with neurological impairments who were referred to us for complementary hematological and biochemical analyses. Complete blood count, methemoglobin level, and methemoglobin reductase activity were assessed. Molecular analyses were performed using whole-exome sequencing, and segregation of the identified mutations was confirmed with direct sequencing. Their pathogenicity and conservation were evaluated using various bioinformatics tools. Clinical and hematological findings suggested X-linked alpha thalassemia/mental retardation syndrome in the first family and recessive congenital methemoglobinemia type II in the second. This was confirmed by the identification of pathogenic mutations ATRX: p.Arg2131Gln and CYB5R3: p.Ala179Thr, respectively. Although these variants have been previously reported worldwide, they were identified for the first time in our population. Our results contribute to the understanding of the pathogenesis of these rare disorders and provide a basis for diagnosis, treatment, and genetic counseling. The mechanisms by which these mutations contribute to neurological symptoms are discussed.

Keywords

ATR-X Syndrome; Recessive Congenital Methemoglobinemia Type II; neurological disease; mutation; WES; diagnosis

Biography

University, where her master's and PhD work focused on molecular investigation of epidermolysis bullosa, a rare genodermatosis. She is currently Associate Professor at the Laboratory of Molecular and Cellular Hematology, Pasteur Institute of Tunis. Her research interests include epigenetic regulation of HbF expression, a key modulator of disease severity in hemoglobinopathies (SCD, and β -thalassemia), and the phenotypic/molecular characterization of rare erythroenzymopathies. She has published in peer-reviewed journals, presented at international conferences, and is actively involved in teaching and supervising postgraduated students.

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Ms. Quratulain Akbar, Mr. Muhesh Taheem, Mr. Hugh Crawford-Smith

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Service delays between insertion of nephrostomy and subsequent stent insertion by Interventional Radiology- burden on patients and the NHS: A Quality Improvement Project in the Department of Urology at Queen's Hospital BHRUT

Aim

The project was conducted to highlight the delay in patient care once they have an acute or elective nephrostomy insertion and they have to wait for the subsequent insertion of an antegrade stent by the Interventional-Radiology team. This project highlights the duration of in-hospital stay, burden on the patients and on the NHS funds and services due to unnecessary bed blocking.

Method

The first cycle of this audit included patients from September 2020 to October 2020, during the COVID-19 period, who were admitted under Urology for the insertion of nephrostomy. The second cycle included patients from April 2024 to December 2024. A service evaluation was conducted, calculating the number of days from the initial admission to the insertion of a nephrostomy, the insertion of an antegrade stent, the subsequent nephrostogram, and the removal of the nephrostomy, until the time of patient discharge. An Excel sheet was generated to collect the relevant data.

Results

During the COVID-19 period in 2020, an average of 15 days of in-hospital stay was calculated per patient. The total cost of this admission per patient averaged to £3660. During 2024, no significant change was noted, and the delay averaged to 16 days in total, with the cost rising to £6300 per patient.

Conclusion

Long in-hospital stays, meaning large costs to the hospital & patients. Patients are at a higher risk of developing hospital-acquired infections. Unnecessary bed blocking after patients have been stabilised with nephrostomy insertion. Relevant SOPs to mitigate delays by expediting procedures have been generated after discussion with Interventional-Radiology.

Keywords

Urology, interventional radiology, patient care, NHS burden, cost reduction

Biography

I am currently working in Barking Havering Redbridge University Hospital NHS Trust since September 2023. I have rotated in Trauma and Orthopaedics and Urology as part of my core training. I have completed my MRCS from the Royal College of Surgeons England. I have completed my MSC in Neurosurgery from the University of Buckingham. I am applying for higher speciality training in Trauma & Orthopaedics this year. I am interested in doing spine surgery and aim to specialise in it.

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Royal Cornwall Hospital, UK

Role of microbiota in colorectal cancer: From pathogenesis to treatment

A balance between the gut bacteria is crucial for the development and management of cancer. An unhealthy gut microbial community leads to cancer growth by causing inflammation and DNA damage, and affecting the immune system response. Certain bacteria, such as *Fusobacterium nucleatum*, increase the risk of colorectal cancer (CRC), whereas microbial by-products influence inflammation and the spread of cancer cells. Recognizing these processes is vital in developing approaches to prevent and treat cancer. This review aims to comprehensively examine the role of gut microbiota in CRC pathogenesis, diagnosis, and treatment, with a focus on microbial-based interventions such as probiotics, prebiotics, and fecal microbiota transplantation (FMT). Recent studies have shown that microbial patterns could serve as indicators for detecting and predicting the stages of CRC without the need for invasive procedures, such as traditional screening. Specifically, *Fusobacterium nucleatum* levels have been found to increase in cancer cases, suggesting a direct connection between microbial presence and disease advancement. Treatments that focus on adjusting the gut microbiota through methods such as probiotics and FMT have the potential to improve treatment outcomes and minimize adverse reactions. Studies have shown that FMT can enhance the results of chemotherapy in cancer treatment programs for patients with colon cancer by incorporating microbiota-based strategies into the treatment protocols. Despite these possibilities, in this field of study and research on microbiota composition and environmental factors, there are still some hurdles owing to variations among individuals and diverse surroundings that require attention. Standardizing the investigative methods used to study microbiota is essential to achieve results that can be effectively replicated and applied in clinical settings. Moving forward, it would be beneficial for researchers to concentrate on conducting extensive validation studies and creating customized treatments based on microbiota analysis to seamlessly incorporate this aspect into regular CRC care routines. In conclusion, the study of gut bacteria is promising in the field of cancer research and therapy. Ongoing collaboration and research are crucial for maximizing the effectiveness of microbiota-focused treatments to enhance cancer prevention, detection, and treatment outcomes. This study offers an examination of the existing knowledge and future pathways for utilizing gut bacteria to manage cancer.

Biography

Dr. Yahia El-Tanani is a medical doctor who completed his studies at St George's University of London and currently works at the Royal Cornwall Hospital UK. He has 20 publications in national and international journals in the fields of pharmaceutical chemistry and oncology.

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Association between physical activity, nutritional status and cognitive performance among school children in southern Tanzania

Background

Physical activity (PA) is essential for promoting good health, preventing non-communicable diseases (NCDs), and supporting cognitive development in children. However, in low- and middle-income countries (LMICs) like Tanzania, there is limited evidence on how PA relates to children's health and well-being. This study examined the relationship between PA, nutritional status, and cognitive performance.

Methods

A total of 678 children aged 6–13 years were assessed. Physical activity was measured using a 7-day actigraphy device to capture average daily activity. Cognitive performance was evaluated using the Flanker task, which focuses on executive function domains such as information processing and inhibitory control. Nutritional status was assessed through the Tanita scale and height measuring board. Logistic regression and gamma generalized linear models were used to explore associations.

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Results

Among 678 children who participated in the baseline assessment, 77.9% had normal weight, 14.3% were underweight, 5.5% overweight, and 2.4% obese. Most (92.6%) of the children met the WHO recommendation of at least 60 minutes of moderate-to-vigorous physical activity (MVPA) per day. Children who did not meet MVPA recommendations were nearly three times more likely to be obese than those who did. No significant associations were found between physical activity and cognitive performance, as well as between nutritional status and cognitive ability.

Conclusion

While most children in this rural Tanzanian setting met physical activity recommendations and had normal weight, insufficient activity was associated with a higher risk of obesity. The lack of association with cognitive outcomes suggests that other contextual factors may influence cognitive development. Further research is needed to understand these dynamics in rural LMIC contexts.

Keywords

Cognitive performance, health, nutritional status, physical activity, school children, Tanzania, wellbeing

Biography

Fahad S. Mwakalebela is a Public Health Researcher and District Nutrition Officer in Tanzania's Ministry of Health. He holds a Master's in Public Health Research from Nelson Mandela African Institution of Science and Technology (NM-AIST) and Ifakara Health Institute of Research (IHI), and a Bachelor's in Human Nutrition from Sokoine University of Agriculture (SUA). His research on physical activity, nutrition, and cognitive performance among school children in Tanzania has gained national recognition and contributed to health policy dialogue. He is the Founder of FM Nutricare Clinic and Co-founder of Afya Bora Organization, both focused on community health and disease prevention through education and grassroots initiatives.

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Dr. Joshua Ampofo

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Investigating The Impact Of Sleep Quality On Cognitive Functions Among Students In Tokyo, Japan, And London, UK

Background

This study focuses on cultural influences and investigates sleep quality's impact on cognitive functions among university students in Tokyo and London. Recognizing sleep as vital for wellbeing and academic success, it explores factors affecting sleep quality and its cognitive impact in diverse educational settings.

Methods

A cross-sectional study was conducted with 400 students (200 per city). The Pittsburgh Sleep Quality Index (PSQI) assesses sleep quality. At the same time, cognitive tests, including the Rey Auditory Verbal Learning Test and the Stroop Test, evaluated memory, attention, problem-solving, and executive functions.

Results

Significant negative correlations emerged between PSQI scores and cognitive performance, indicating that poorer sleep quality correlated with diminished cognitive abilities across domains. Regression analyses confirmed sleep quality's predictive role in mental performance, controlling for demographics. These findings highlight sleep's critical role in cognitive functions within different cultural contexts.

Conclusion

This study underscores sleep quality's importance for academic success and reveals cultural variations influencing sleep patterns among Tokyo and London students. The findings suggest targeted interventions to enhance sleep quality and cognitive functioning in diverse educational settings, considering cultural nuances and lifestyle factors. Further research should explore longitudinal effects and intervention strategies to improve sleep and mental outcomes.

Keywords

Sleep Quality, Cognitive Functions, University Students, Cross-Sectional Study, Cultural Differences

Biography

Joshua Ampofo is a lecturer at the School of Foreign Studies, China Three Gorges University. With a PhD in Comparative Education from Zhejiang Normal University, he has a robust background in educational management, research, and academic mentorship. Joshua has authored several peer-reviewed publications and actively participates in international research collaborations. He is recognized for his expertise in educational innovation, student well-being, and technology integration in learning. As a journal reviewer and recipient of multiple academic scholarships, Joshua remains committed to advancing educational excellence and cross-cultural understanding.

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Beyond viral load: unraveling non-communicable disease patterns in Manicaland Province, Zimbabwe-a secondary data analysis (2013-2023)

Background

Non-communicable diseases (NCDs) among people living with human immunodeficient virus (HIV) are emerging and a leading cause of death in this population.

Aim

To identify disease trends, prevalence and outcomes of NCDs among PLHIV.

Setting

Manicaland province.

Methods

We reviewed secondary data from October 2013 to September 2023. Data on five priority NCDs were analysed: hypertension (HPT), diabetes mellitus (DM), chronic kidney injury (CKD), cancers and chronic respiratory conditions (CRC). Kaplan-Meier analysis and Cox proportional hazard analysis were performed, risk and hazard ratios reported at the 95% confidence level.

Results

A total of 974 patient files were reviewed. The median age was 43 (Q1 = 35; Q3 = 51) years. A total of 409 (42.0%) were males and 565 (58.0%) were females. A total of 94 (9.7%) patients had HPT, 76 (7.8%) had DM, 6 (0.6%) had CKD, 9 (0.9%) had cancer and 3 (0.3%) had CRC. Controlling for age, gender and medication use, being on ART for more than 5 years and ageing were hazards to DM and HPT. Protease inhibitor-based regimen was a hazard to DM (hazard ratio [HR] = 4.66, 95% CI: 2.54–8.54, $p < 0.001$). Efavirenz-based regimen was protective in development of HPT (HR = 0.47, 95% CI: 0.26–0.83), $p = 0.01$.

Conclusion

Hypertension and DM are the most common NCDs among people living with HIV. Prevalence of HPT and DM increased with age and duration on ART. To minimise complications related to NCD and HIV comorbidities, we recommend regular screening of NCDs at least monthly, and personalising treatment for hypertensive patients to efavirenz based regimens. We educated people living with HIV about the risks of NCDs and importance of healthy eating and regular exercise.

Keywords

Sleep Quality, Cognitive Functions, University Students, Cross-Sectional Study, Cultural Differences

Contribution

Integrated NCD and HIV care models.

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Keywords

non-communicable disease, human immunodeficiency virus, ART, Manicaland province, hypertension, diabetes mellitus

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Lessons Learned from Observing Dentistry in a Different Cultural Context in Egypt, Cario

This article explores the insights gained during a dental elective placement in Cairo, Egypt, with a focus on understanding how cultural and environmental factors influence clinical practice. The research question guiding this reflection was: How do systemic, cultural, and environmental challenges shape the delivery of dental care in a densely populated urban setting? Set against the backdrop of Cairo's complex healthcare landscape, the paper aims to examine how global dental standards are interpreted and adapted in different cultural contexts. The methodology involved direct clinical observation, informal discussions with local practitioners, and contextual analysis of dental care delivery in both private and public sectors. Key observations included differences in patient-practitioner interactions, resource allocation, and approaches to treatment planning under constraints such as limited infrastructure or public awareness. The findings suggest that cultural competence, adaptability, and context-specific decision-making are integral to effective care in such settings. This article concludes that electives in contrasting cultural environments can significantly enhance a student's understanding of global oral health challenges and encourage more empathetic, adaptable, and culturally aware practice in the future.

Biography

Dr Maya Abdulrazak is a newly qualified dentist who recently graduated from University of Leeds. She has a strong interest in global oral health, cultural competence, and equitable healthcare delivery. During her dental elective in Cairo, Egypt, she explored how cultural and environmental factors shape clinical practice, deepening her appreciation for adaptable and patient-centered care. Dr Abdulrazak is passionate about reflective practice and aspires to work in diverse healthcare settings, both in the UK and internationally.

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Factors Contributing To Unintended Pregnancies Among Teenage Girls In The Informal Settlement Of Mukuru Kwa Njenga, Nairobi, Kenya

Introduction

Unintended teenage pregnancy remains a critical public health concern, particularly in Africa, where 93% of adolescent pregnancies occur. In Nairobi, 18% of teenage girls are affected, with higher prevalence in informal settlements such as Mukuru Kwa Njenga. This study aimed to explore and analyze the key factors contributing to unintended pregnancies among teenage girls in this setting, focusing on socio-economic conditions, contraceptive knowledge, access to reproductive health services and substance abuse.

Methods

A cross-sectional mixed methods design was employed, combining both quantitative and qualitative approaches. Using Fisher's formula and accounting for a 10% non-response rate, a sample size of 424 adolescent girls was determined. Structured questionnaires were administered to 311 participants, yielding a response rate of 73.3%. In-depth interviews were also conducted with girls who had experienced pregnancy. Quantitative data were analyzed using Statistical Package for the Social Sciences (SPSS) Version 24.0, while qualitative data were coded and analyzed with NVivo 9 software.

Results

The study revealed that 62.7% of respondents had experienced unintended teenage pregnancies. Significant predictors identified through logistic regression included lack of discussions about protection (OR=0.044), limited knowledge of contraceptives (OR=51.731), restricted access to contraceptives (OR=0.106), low household income (OR=31.022), low parental education, and substance abuse particularly alcohol use (OR=17.333).

Conclusion

Unintended teenage pregnancy in Mukuru Kwa Njenga is driven by a complex interplay of limited contraceptive knowledge, poor access to services socio-economic challenges, and substance abuse. Addressing these factors requires targeted interventions. Despite some limitations, the study highlights the need for further research on gender norms, partner influence, and health system responsiveness

Keywords

Teenagers, Pregnancy, Contraception, Reproduction, Informal settlement

Biography

I am a dedicated population health professional with expertise in designing, implementing, and supporting health research projects. I hold a BSc in Population Health (Machakos University) and an MPH in Applied Epidemiology (Amref International University). My interests focus on evidence-based interventions to improve health outcomes in resource-limited settings. I have gained experience in protocol development, data collection, ethical review processes, and academic writing. At Amref Health Africa and the ESRC, I have advanced my skills in research ethics, scientific communication, and collaborative project execution across the full research lifecycle, strengthening my ability to contribute to public health research and policy.

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The prevalence, outcomes, and factors associated with caesarian sections among women who delivered in health facilities in the Njombe region Tanzania from March to May 2024

Background

Caesarean sections (CS) significantly reduce maternal and fetal morbidity and mortality when performed appropriately. In Njombe Tanzania CS rate increased from 15-29% from 2020-2022, exceeding the World Health Organization's recommended threshold of 15%. This study examines the prevalence, outcomes, and factors associated with CS among post-delivery women, highlighting the need for improved health outcomes.

Methodology

We conducted a cross-sectional study using a quantitative approach on post-delivery women in six health facilities found in Njombe region. Data was collected using closed-ended questions and analyzed using Stata. The modified Poisson regression analysis examined the relationship between CS delivery and independent variables, with p-values < 0.2 in bivariable taken to multivariable analysis, and variables with p-values ≤ 0.05 in multivariable analysis were considered statistically significant.

Results

The 567 post-delivery women aged 15-44, with a mean age of 25.77 years. The Njombe region has a 45.5% prevalence of CS, with a 1.6% newborn death rate and 12.8% maternal and fetal complications post-CS. Single women are 1.25 times more likely to deliver by cesarean section (CS) than married women, and 1.52 times more likely to deliver by CS than those with early booking. Maternal height of 150 cm was associated with a higher likelihood of CS. Women with babies weighing more than 4.1 kg are 1.67 times more likely to deliver by CS. Gestation age of 43 weeks was 1.49 times greater than gestation age below 42 weeks. Health center referrals were 2.10 times higher than referrals from home. Private health facilities have a 1.13 increased likelihood of CS. The women who used the NHIF-financing method were found to be more 1.12 likely to result in CS compared to cash payments.

Conclusion

The study found high prevalence of CS in the Njombe region, with higher maternal and neonatal complications and the lowest newborn death rate, highlighting the need for targeted measures.

Keywords

Caesarian section, post-delivery women, maternity, and newborns.

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and Family Welfare, Government of India, India

Mpox outbreak response: Regulatory and public health perspectives from India and the world

Monkeypox is a zoonotic viral disease caused by the monkeypox virus. India reported its first confirmed mpox case on July 15, 2022, necessitating an immediate response. The World Health Organisation has declared a global health emergency due to the increase in the number of cases worldwide. The perspective discusses the challenges and strategies to be implemented by Indian and global healthcare systems in dealing with the monkeypox outbreak.

This correspondence focuses on the national and international outbreak of the monkeypox virus. It also discusses the recommendations put forward by WHO. It also elaborates strategy and steps to be put into action by the government and the citizens of the nation.

The recent mpox outbreak has posed challenges to healthcare systems. Therefore, a coordinated approach involving healthcare providers, government organisations, and the public is required to control the mpox outbreak. Further research is needed to understand the virus and develop effective interventions for future outbreaks.

Biography

Dr. Ritu Tiwari possesses over 28 years of extensive experience in the field of drug analysis, with particular emphasis on pharmacovigilance, phytochemistry, and herbal medicines. She is currently appointed to the Scientific Officer, Pharmacovigilance Division at the Indian Pharmacopoeia Commission, under the Ministry of Health and Family Welfare, Government of India. Throughout her tenure, she has made significant contributions across various divisions, having been affiliated with the Indian Pharmacopoeia since 1998. Dr. Tiwari has authored numerous distinguished research publications focusing on herbal medicines, quality control, and phytopharmaceuticals. Additionally, she serves as a National Accreditation Board for Testing and Calibration Laboratories (NABL) assessor at the national level.

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Ibrahim, R.K., Khaled, M., Almansoori, M., et al.
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Screen Time and Stress: Understanding How Digital Burnout Influences Health Among Nursing Students in the UAE

Background

Digital technologies are central to nursing education, but excessive screen use may result in digital burnout—a phenomenon linked to stress, fatigue, and impaired well-being. Evidence from the Middle East, especially among healthcare students, remains limited.

Objective

This study explored the association between digital burnout and general psychological health among undergraduate nursing students in the UAE and examined demographic and academic predictors.

Methods

A cross-sectional correlational design was employed. 140 nursing students completed the Digital Burnout Scale (DBS-24) and the General Health Questionnaire (GHQ-28). Data analysis included descriptive statistics, Pearson correlation, and multiple regression.

Results

- The mean digital burnout score was 73.41 ± 20.88 , with digital aging the highest subscale.
- GHQ scores indicated moderate psychological distress (38.55 ± 12.71).
- A strong positive correlation was found between digital burnout and psychological distress ($r = 0.71, p < 0.001$).
- Key predictors of higher burnout were: being younger, enrolled in more than five courses, and belonging to the nursing department.
- Digital burnout accounted for 50.9% of the variance in psychological health outcomes.

Conclusions

Digital burnout significantly undermines the mental health of nursing students. Institutions should integrate digital wellness policies, promote balanced academic loads, and enhance student support services to mitigate risks.

Implications for Public Health & Global Wellness

Given the global reliance on digital education, addressing digital burnout is crucial for safeguarding student well-being and ensuring a resilient future healthcare workforce. This research highlights the urgent need for policy interventions and wellness strategies that align with sustainable public health goals worldwide.

Bibliography

Dr. Rasha Ibrahim, an assistant professor of pediatric nursing, is passionate about teaching, innovation, and digital technology. Dr. Rasha Ibrahim, with a background in clinical pediatrics, is committed to creating the future generation of nurses through student-centered learning, curriculum creation, and digital tool innovation to improve teaching and learning. Her research focuses on pedagogy and technology to engage and educate nursing students.

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