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Immune modulation in children in South Africa, a practical approach

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Immune deficiencies in South Africa can be divided into two categories, primary and secondary immune deficiencies. In the private Paediatric clinic, children often present with a number of problems that can be traced to selective primary immune deficiencies. Not all children are eligible for intravenous immunoglobulin therapy, either due to costs or non-IgG immune deficiencies such as selective IgA or T-cell deficiencies. Intramuscular and sub dermal options are equally expensive and more uncomfortable. The use of oral immune modulators, such as the erythromycin derivatives, has raised some concern, mainly because of the potential risk of bacterial resistance. Other so called immune boosters, e.g. echinaceas, are being advertised as potential solutions but have yet to prove to be effective. A practical approach to immune modulation will be presented that has a direct beneficial effect on the health outcome of the children.

Biography

Pieter Rousseau Fourie has completed his BSc in Electrical Engineering, MB ChB and PhD in Medical Physiology and Pediatric Specialty (MMed), all from the Stellenbosch University, South Africa. He holds an Associate Professorship in the Department of Critical Care and Anesthesiology, Faculty of Health Sciences, Stellenbosch University and runs a pediatric practice at Cape Gate Medi clinic, Bracken fell, South Africa. He has published more than 35 papers in reputed journals.

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