

6th International Conference and Expo on Immunology

October 24-26, 2016 Chicago, USA

Association between TNFSF15 polymorphism and ulcerative colitis in Iranian population

Marzieh Taheri, Pegah Ghandil, Seyyed Jalal Hashemi, Abdol Rahim Masjedizadeh, Mehri Ghafourian and Ata Allah Ghadiri
Ahvaz Jundishapur University of Medical Sciences, Iran

Ulcerative colitis (UC) is the most prevalent form of the inflammatory bowel disease. Several candidate genes have been suggested to be involved in the genetic susceptibility or resistance in development of UC. Tumor necrosis factor ligand super family member 15 (TNFSF15) have been recently reported in association with UC. This is a transmembrane protein that has multiple functions such as: Proliferation, apoptosis and expression of inflammatory genes. The aim of this study was to investigate the association of TNFSF15 single nucleotide polymorphism (SNPs) in the promoter region, including rs6478108 (G/A-9706) in Iranian patients with ulcerative colitis. The SNP were genotyped in 115 cases and 115 healthy controls from the same ethnic and geographical region, located in Khuzestan province, Iran. The DNA of samples was genotyped using TaqMan Real time PCR assays. The results did not confirm the formerly reported association of the studied polymorphisms with UC disease neither with the type of the clinical forms of colitis. Since multiple ethnic groups resides in all around the country, further analyses in different ethnicities are required with larger sample size to clarify the role of this polymorphism in the genetic susceptibility of UC in Iranian populations.

marzieh30leo@yahoo.com

Chest X-ray routinely was done in patients under 40 years with immune deficiency problems

Rogayye Ghaffari
Urmia University of Medical Sciences, Iran

Image modern radiology provides accurate diagnosis of congenital heart disease. The most important and accessible radiologic examination is CXR. CXR in diagnosis of immune deficient disease, in pulmonary edema, in pediatric heart surgery after surgery and before discharge has important value. It is especially in patients with pulmonary complication is recommended in the intensive care unit. CXR cardiac thoracic measurement widely used as a marker of heart size. Cardiac size parameter is important and effective in interpretation of chest radiography. CXR in differential diagnosis of congenital infection, congenital lung disease and pulmonary pain and in some cases with congenital cardiopulmonary diseases are helpful especially some immune deficient patients has cardiopulmonary problem or finds it in course of their disease. However, chest X-ray to check for cardiopulmonary problem has high specificity. Therefore, due to the availability of cheap and easy CXR procedure and take more information, it is recommended that all patients with immune deficient problems, cardiopulmonary disease, chest X-ray routinely was done. However chest radiography, it is easy accessible and high specificity and cheap in the diagnosis of cardiopulmonary problem in immune deficiency patients so the CXR should be screening test in immune deficient patients. X-rays for posterior anterior (PA) in children over 5 years old standing and in inspiration will be taken. All CXR by experienced radiologist report will confirm in all cases for X-ray quality. 20 cases of children between 5 and 15 years who are randomly selected Nikkhah health care and in standard chest X-ray were taken. All patients will be analyzed with SSPS 2015 analysis. Pulmonary vascular congestion both on the criteria Kstvk and his colleagues will be graded from grade 1 to grade 4. The chest radiography in patients with immune deficiency problem to investigate the underlying cardiopulmonary disease and the height of the air from the diaphragm and the liver and the stomach size and direction and evaluation the existence or reject a nutritional and metabolic status with its effects in the ribs and vascular changes are helpful in all patients with immune deficiency patients. Then in all patients with immune deficiency disease at first time and these patients in their follow-up and in all patients with suspected cardiovascular problem, Routin CXR is recommended.

drghaffari_pediatrician@yahoo.com