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In silico study on Liv-Pro-08 an oral ayurvedic formulation on NAFLD

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In an attempt to identify suitable ligands for NAFLD, bioactive compounds from indigenous plant species were used. The biological markers namely CYTP450E1 and ACC1 were chosen for the study. A class of novel compounds targeting liver protection, Liv-Pro-08 was characterized. Interaction analyses of these compounds were performed by molecular docking and energy optimization methods. Out of the library of ligands prepared including eight compounds, which successfully docked with the chosen targets; two were found to provide an optimal interaction. Intermolecular interactions reveal participation of charged residues as Lys and Arg at specific positions. Target preferences were exhibited among the interacting molecules based on binding energy and H-bond interaction. The interacting distances were determined for the compounds that exhibited optimal binding with the NAFLD targets. These compounds are found to provide promising lead for development of novel drugs for liver diseases.

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The efficacy and effectiveness of substitution of hospital ward care from physicians to PAs

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Because of an expected shrinking supply of medical doctors for hospitalist posts, increased emphasis on efficiency and continuity of care and the standardization of medical procedures, the role of hospitalist is increasingly allocated to physician assistants (PAs). PAs are non-physician clinicians with medical tasks. This study aims to evaluate the effects of substitution of hospital ward care to PAs. In a multicenter matched controlled study, the traditional model in which the role of hospitalist is taken solely by Medical Doctors (MD model) is compared with a mixed model in which PAs function as a hospitalist, contingent with MDs (PA/MD model). Thirty-four intervention and control wards were included from a range of medical specialties. Primary outcome measure is patients' length of hospital stay. Secondary outcomes include quality of hospital ward care and patients' experiences with medical ward care. An economic evaluation is conducted to assess the cost implications and potential efficiency of the PA/MD model. Data is collected from medical records and questionnaires in samples of 100 patients per hospital ward. No differences in quality of care were found. General satisfaction with the medical ward care was significantly higher on the intervention wards than on the control wards (8.4 ± 1.3 vs. 8.0 ± 1.5 , $p=0.00$). This study indicates that it is safe to substitute hospital ward care to PAs and that patient experiences with the received medical ward care are better on wards where PAs work as hospitalist compared with wards where only MDs fulfill the role of hospitalist.

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