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Gestational diabetes: Should getting regular dose of sunshine from 1st trimester be part of antenatal package

Susan Okafor
Destiny University School of medicine & health studies, USA

Abstract

The pregnant state conveys a degree of immuno-protection as well as tolerance. However there is a hypothesis to suggest that Thematernal cellular immune system is dampened in women with gestational diabetes. A number of clinical studies have helped support the notion that women with gestational diabetes are those women who display an inappropriate response to the physiological changes brought on by pregnancy through restricted antibody responses that is measureable.

It is established that vitamin D - the sunshine vitamin, specifically the active metabolite 1,25 (oH)(2)D is involved in homeostasis of bone structure-its mineralization and formation and also the metabolism of calcium and phosphorus. However it is emerging that this metabolite also has effect on other important physiological processes in the body at a cellular level including autoimmune, as well appearing to play a role on the sensitivity of insulin.

This report is an attempt to evaluate the above assumption. It is also an attempt to explore the notion or possibility of incorporating as part of routine antenatal care in pregnant women, in particular those at risk of gestational diabetes. The report will discuss current practices, prognosis and screening pathway as well as recent research in relation to its physiological, biochemical epidemiological. Hopefully this will inform practice or highlight areas for which further research is required.

Biography

Susan is an aspiring pioneer in green fertility technology. She has a master's degree in this area under the banner of health promotion and education. Following a career in Nursing has been practicing as a midwife for over 10 years in a London Hospital. Currently she is a mature medical student at Destiny College St Lucia where she has taken time off to complete PHD in green fertility technology in London.