



Volume 1, Issue II, Nov 2009

Message from the President



Assalamu Alaikum, I want to convey my gratitude and profound regards to all those who expressed their sentiments and liked the first issue of newsletter of FIMA. We need your articles and reports to be published in the next issues.

During these weeks, we were busy in preparing reports for the UN ECOSOC; as FIMA is a standing member of this body and we plan to be more pro active and endeavor to join hands with other like minded groups in its fold especially in the areas of students camps, bioethics, humanitarian and medical relief.

The Padang (Sumatra) earthquake relief was also on our priority and an appeal was sent to all the IMA's by our relief coordinator Dr. Ashraf Jedaar. IMAM, IMANA, IIMA, MRA and MER-C Indonesia responded promptly. The magnitude and scale of devastation is huge and rehabilitation will take very long time. I appeal to all IMAs to extend their help to our Indonesian brothers at this time of need. Please contact Dr. Ashraf Jedaar at ajedaar@iafrica.com, Jazakallah.

Dr Parvaiz Malik

HUMANITARIAN WORK FOR SUMATRA EARTHQUAKE BY MER-C & MRA



An earthquake of 7.6 on the Richter scale rocked Pariaman, West Sumatra, Indonesia, on 30 September at 5.16 pm local time. MER-C (Medical Emergency Rescue Committee) as one of Indonesian NGO's focused on medical emergency relief. The next day after disaster medical team was dispatched to earthquake area. This work was supervised by Dr. Henry Hidayatullah, Deputy Secretary General of Indonesian IMA and Rima Manzanaris, Secretary, MER-C (Medical Emergency Rescue Committee). Until now humanity mission is going on there. Here are some activities by MER-C(www.mer-c.org)

1. 18 teams consisting of: orthopedic surgeon, general surgeon, physicians, nurse, psychologist, non medical volunteers, engineer were sent. We plan to send medical teams until the next 2 months or more depending on the situation.

2. Padang Pariaman Regency and surrounding area was chosen as center of activities as Pariaman is also one of the most damaged area besides Padang.

3. MER-C worked in Pariaman General Hospital (RSUD = Rumah Sakit Umum Daerah), and our surgeons have done 77 operations to 41 earthquake victims. MER-C medical team also took care of all the patients in emergency ward in RSUD Pariaman;

4. Wheel chairs and crutches were distributed to the patients before they were sent home. We also give donation in the form of medical equipments to the hospital (RSUD Pariaman);

5. MER-C also carried out mobile clinic program in order to reach the victims in some areas.

6. Visiting post operative patient to their homes/villages to follow up/check up their injury;

7. Some construction program was also started on emergency basis



such as building public bathing/toilet facilities, clean water facilities and two schools.

8. IMANA (IMA of North America) sent an initial amount of 12,500.00 USD for the help of destitute and earthquake victims.

MRA and Mercy Malaysia in collaboration with IMAM/IHC also performed remarkable services in response to a message by Dr Ashraf Jedaar, Relief coordinator of FIMA, Dr Ishak Masud and his team of five doctors and paramedics went to the affected area on 24th October and offered their services in collaboration with ALISLAM Hospital. For donations please refer to our FIMA relief coordinator Dr Ashraf Jedaar, ajedaar@iafrica.com or visit MRA website: www.MRA.my Dr Ishak Masud; IHC-Chairman/Deputy President Malaysian Relief Agency (MRA)



SUCCESSFUL FIMA STUDENT CAMP IN MALAYSIA

The 11th FIMA (Federation of Islamic Medical Association) Student Camp was successfully carried out from the 24th to 31st July 2009 in Langkawi, Malaysia. A total of 149 participants, including speakers, from 16 countries participated in the camp. The participating countries were Cambodia, Egypt, Indonesian, Iraq, Jordan, Lebanon, Malaysia, Morocco, Pakistan, Palestine, Saudi Arabia, South Africa, Sudan, Turkey, Uganda and Yemen. The camp was officially inaugurated by the FIMA President, Prof. Musa Mohd. Nordin.

The theme for this year's camp was '**Medical Students and Volunteerism**'. The first session, was mainly about introducing the participants to the



concept of volunteerism and the different channels where medical students could volunteer. These topics were covered by Dr. Azhar (Emergency Physician, Qatar) and Prof. Salih Al-Ansari (Community Physician, Saudi Arabia) and Dr. Emad Bukhari (Cardio-Thoracic Surgeon, Saudi Arabia)

During the second session, Prof. Hafeez ur-Rahman (Ophthalmologist, Pakistan) discussed his groundbreaking 'FIMA Save Vision project'. Prof. Ikram (Anaesthesiologist, Malaysia) presented many projects carried out by MERCY Malaysia and shared experiences in starting an organization like MERCY and the challenges faced. A talk on Volunteerism in the West by Prof. Atallah Ruhaily (Endocrinologist, Saudi Arabia) touched on the numerous relief organizations overseas.

During the third session, 'Volunteerism in Student Curricula of Western Universities' was given by Prof. Salih Al-Ansari. Prof Dr. Ikram talked about Volunteerism: Art, Science & Ethics'. Dr. Emad Bukhari, spoke about 'The Sought-after Medical Professionals: Islamic Perspective'.

The first talk of last session, 'Students & Volunteerism: Why & How' given by Prof. Amaluddin (Paediatrician), the second 'Art of Planning in Voluntary Projects' by Dr. Essam Al-Ghamdi (Director of Community Health, Saudi Arabia) and lastly 'IT Application in Voluntary Activities' by Dr. Riyadh Abu Sulaiman (Paediatric Cardiologist). During the workshop, students were given a task to plan a project based on a real scenario. Side activities such as community services and recreational outings were held. The recreational activities consist of a morning Jungle walk, Mountain Hiking, and team building activities at



Tanjung Rhu Beach.

The special feature for this camp was the presence of Dr Jamal Badi, Dr Baschir and Dr Belghit from International Islamic University, Malaysia.

The program helped in fostering brotherhood amongst participants as well as providing a platform for leadership training and networking.

RELIEF WORK IN SOMALIA BY SOYDA

Somalia is a Muslim country, destroyed by prolonged wars. The civilian population of Mogadishu has paid a heavy toll in recent fighting in residential neighborhoods. All public sectors health facilities are practically non-existent, and half of the community became internally displaced with no health facilities in terms of public hospitals. Private sector is costly and most of the people can not afford or even can not access this type of service. That is why most of IDPs do not benefit from private hospitals. UN/International aid agencies are also not present on the ground due to security reasons.



Somali Young Doctors Association (SOYDA) is a federation of health professionals representing hundreds of Somali physicians worldwide. SOYDA's mobile team continues working throughout the country, particularly in the Mogadishu-Afgoi corridor, to provide life-saving medical care.

In Mogadishu's main hospitals, including Medina and Keysaney, the medical teams of SOYDA treated 162 people suffering from trauma injuries caused by shelling and gunshots for the last 3 weeks, coming from Hodan, Wardhiglay districts and Bakara Market

which is most mortar shell affected. Of these, 87 were women and children under the age of 12.

SOYDA has doubled its routine medical activities for IDPs living in the out-reach areas. SOYDA has carried out 2 days of free visitation and treatment activities on 18th and 19th October 2009 at Garasbaley IDP cluster in the corridor. Total treated cases were 611. Most of the under-five children were suffering from acute respiratory infections, diarrhea, and malnutrition, and some cases of measles were seen during screening. SOYDA is working to improve water and hygiene conditions, providing mosquito bed nets, community participation to prevent infectious diseases including STD's. Dr. Abdiqani Sheikh Omar, Executive Director of SOYDA, can be contacted at Mob. +252 15 577 282

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ACTIVITIES BY IMA LEBANON

Free Eye camp for Palestinian Refugees

IMA Lebanon, in collaboration with Arab doctors' Union, is preparing to perform 500 cataract surgeries free of charge for Palestinian refugees.

Help for people with a disability

IMA Lebanon has received from "Al Amal for Development & Social Care" in coordination with "NORDISK HJALP Swedish Association" 30 reading tools for people who have very weak eyesight, and we also received 10 walkers. We have distributed these tools to persons who are in need, especially students. We have also distributed chairs and walkers to hospitals.



Swine Flu Awareness campaign

IMA Lebanon in cooperation with "Takaful Association", "Arab Doctors' Union" and "International Humanitarian Clinics of the World Natural Health Organization emanating from the International Parliament of Peace and Security" organized lectures entitled: "Swine flu" which were presented in several areas in Lebanon. These lectures were presented by Dr. Fatma Shaaban, specialist in pediatrics; member of the Committee on School Health - Medical Association and member of the Pediatric Society

HEALTH GUIDELINES FOR HAJJ & UMRAH

These are some guidelines to make the performance of Hajj & Umrah easier. You should consult your doctor if you have any specific medical illness.

1. Swine Flu: The number of patients being affected by the Swine Flu is increasing in number, so far 6000 deaths have been reported globally. This fact is raising apprehension amongst those planning to travel to the Holy land. Saudi government has generously arranged for immunization shots to be given to the pilgrims on their arrival at Jeddah air port.

2. Physical fitness: Improve physical fitness 8 weeks before Hajj & Umrah by taking brisk walk in Ihram shoes.

3. Drinking water: Water must be consumed in abundance. Take Zam Zam or bottled water. Tap water is not for drinking. Ensure that you pass clear urine twice daily.

3. Food: Eat a healthy and well balanced diet.



Prepare your own food or purchase from an outlet which is closed from front.

4. Constipation: It is a common problem. Maintain a high fiber diet (vegetables, fruit and dates) and drink plenty of water.

5. Diarrhea and vomiting: Make sure your source of food is clean and wash all vegetables and fruits. If you develop diarrhea, drink extra fluids preferably oral rehydrating salts (ORS). Try not to stop the diarrhea with Lomotil or Imodium, unless you are passing 6 stools in a day or night time.

6. General Instructions:

i). Take your regular medications for one to two weeks with you.

ii). Take a prescription of medication from a doctor with you. Most medicines are easily available in Saudi Arabia.

iii). Keep Antiseptic (Dettol, Betadine, Cotton, Bandages), pain killers without codeine (Panadol, Brufen) Anti allergic (Loratidine, Phenergan), Anti vomiting (Motilium, Maxolon) with you.

iv). Face masks can be used (except when in Ihram).

v). Vaccination against Swine Flu can also be used. Yellow fever vaccine is recommended and is valid for ten years.

vi). Keep honey with you and take 2 teaspoons every morning and night. It helps to prevent common cold and sore throat. Diabetics should not eat honey.

vii). Be careful of other people trampling your feet (especially for diabetics)

viii). Take an extra pair of reading glasses if you are using glasses.

7. Diabetes: Optimal diabetic control is important and should be attained before departure and during your stay. Fruit juices and many drinks have extra sugar. Ensure that you have a proper diabetic diet



during journey and stay. Take particular care of you feet from any injury.

8. High Blood Pressure: Ensure that your blood pressure is well controlled before departure and during your stay. Have a good sleep and rest. Consult a doctor if you develop severe headache, blurred vision or dizziness.

9. Heart patients: Can change for once or twice daily medications in consultation with their physician. Make sure to take your medications in time. Avoid exertion as much as possible.

10. Asthmatics: Take medications with you. Avoid places of crowd and dusty areas. You can use face mask (After taking out Ihram). In case of emergency, use inhalers and consult doctor.

11. Skin Care: Dry condition can cause cracking of skin. Use creams and ointments as needed. Dry your feet and area between the toes to avoid fungal infections.

12. Care of the back: Travel with light bags with wheels. When lifting heavy objects, lift with a straight back by bending your knees.

13. Arthritis: Loose weight if you are overweight. Start treatment on the advice of doctors or physiotherapist.

14. Gout: Use your medications regularly and avoid red meat.

15. Developing Periods: It is possible to delay periods by taking appropriate hormones. It is preferable to slowly adjust your periods over a few months to make five days of Hajj period free. Consult your doctor before journey.

5 Days of Hajj:

i). Start preparing for 5 days of Hajj from the first of ZulHaj.

ii). Ensure that you are physically and spiritually fit.

iii). Take adequate rest. Avoid over exertion.

iv). Sort out your ailments before days of Hajj.

v). Take adequate clothing according to weather.

vi). Take small meals.

vii). Do not deliberately avoid fluids to prevent you from using the toilet.

viii). Keep out of sun or use umbrella (after taking out Ihram)

ix). Avoid peak hours for stoning the Shaitan at Jamarat.

x). These are precious days for Ibadah and by taking good care of your health, you can use this time for maximum benefit.



FIMA EXCO Members & Delegates in front of Freedom Hall, Khartoum, Sudan



Delegation of IMA of Afghanistan calls on FIMA Secretary Dr. Tanveer Zubairi in Lahore Pakistan.

FIMA Year Book 2009
Medical Education, its ethics: an Islamic perspective.

Please send your articles to Dr. Aly Mishal
(info@islamic-hospital.org).

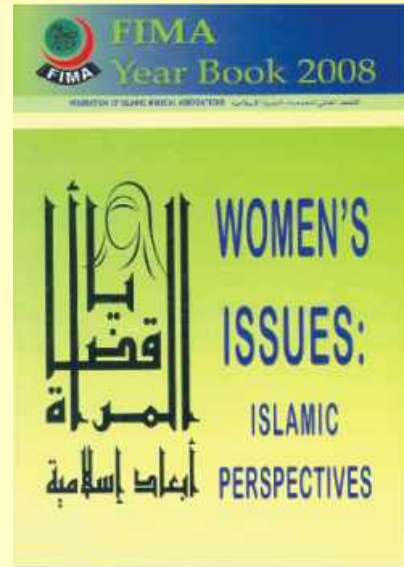


WOMEN'S ISSUES: ISLAMIC PERSPECTIVES

This was the title of FIMA year Book 2008, which was published by Jordan Society for Islamic Medical Sciences in collaboration with FIMA. Previous year books have covered such diverse topics as Biomedical Issues (2002), Communicable Diseases: Medical Dilemma (2003) Lifestyle Metabolic and Stress Related Medical Disorders: Scientific & Religious perspectives (2004), Geriatrics and End of Life Issues: Biomedical and Islamic Horizons (2005-2006) and HIV / AIDS: Scientific, Ethical and Islamic Dimensions.

It was a breeze of fresh air to see WOMEN'S ISSUES at the title of an Islamic magazine. Prof. Hussam E Fadel, Chief Editor, described it as a **very special issue** of FIMA Year Book. He rightly pointed out that there is no denial that in many Muslim societies at present, women are neglected in many spheres of life, however, this is not the result of following Islamic teachings or guidelines. Contrary to Islamophobes, this is due to the abandonment of Islamic teachings.

Dr Haitham Al Khayyat (USA) presented the equality of men and women as described in the Quran. He attributes the gradual deterioration of women's status to the influx of new Muslim communities from the east and west with their social traditions and cultures. Dr Omer Kasule (South Africa) stresses that males and females get equal reward for their deeds. Dr Kamel Ajlouni and Dr Mishal (Both from Jordan) presented a comparison of the status of women in Jewish, Christian and Islamic religious texts. According to Judeo Christian theology, Eve is the origin of sin. The Quran states clearly that both Adam and Eve were equally responsible for eating from prohibited tree and both were forgiven after their repentance. Professor Abul Fadl Ibrahim (South Africa) draws attention to the problems of pregnancy resulting from rape. Pregnancy can usually be prevented by using emergency contraception, if the victim seeks immediate medical care. The author believes that termination of pregnancy is permissible before 120 days of conception under these circumstances as allowed by Dr Yusuf Al Qardawi. Dr Tariq Tahboob (UK) presented facts and figures about violence against women in UK, where one in 4 women have experienced rape or attempted rape. The data published by US Justice Department in 2000 shows that 51 % surveyed women said they were



physically assaulted. Dr Suhaima Hoosen from South Africa believes that communities have a fundamental responsibility of providing short and long term protection for abandoned, destitute and ill women, especially those who have the victim of violence. Dr Mazeni Alvi (Malaysia) describes the concept of secularism and compares the interpretation in France and Britain. In France secularism has assumed a distinctly anti religious stance. Dr Heba Ezzat from Egypt has written under the Title “Muslim Women at the Crossroads”. She believes that social custom, poverty and illiteracy often eroded or subverted Quranic wisdom. The Muslim Brotherhood in Egypt issued declaration supporting women presence in the social and political sphere. (Same is the position in Pakistan, where Muslim women practicing Islam can participate in social and political activities) . Ms Susan Carland (Australia) has written about the problems faced by converts in general and women in particular. The main problems are unreasonable pressures from Muslim community, lack of adequate support (especially for women embracing Islam) and perception of converts. Special attributed have been paid in memoriam of Dr Ahmad El Kadi (IMANA and FIMA founder) and Dr Hassan Hatout (Key founder of Islamic Organization of Medical Sciences (IOMS) and Pioneer in Islamic Medical Ethics). Both of them passed away in April 2009. Members of editorial board, Prof Ali Mishal (Jordan) and Prof. Abul fadl Mohsin Ebrahim (South Africa) deserve a bundle of thanks for this valuable issue.

