

نشرة الاتحاد العالمي للجمعيات الطبية الاسلامية

e-newsletter of Federation of Islamic Medical Associations





FIMA Relief launches "Mobile Mother & Child Clinic " for flood affected areas in Pakistan

Volume 1, Issue 14, Feb-March 2011

Message From the President



We just lived through a most amazing history of a human plight against the dictatorships and repressive regimes in North Africa and Middle East. The most recent events in Tunisia and Egypt were unthinkable only few weeks ago. Sweeping movements of the people are still in progress in Libya, Bahrain and other neighboring countries. Libyans are still getting killed and injured by the hired mercenaries and few left over loyal armed forces of current regime.

Although the Egyptian revolution is considered peaceful, it was not without a toll of hundreds of human lives and hundreds if not thousands are dying or suffering from their injuries. One cannot forget the highly unruly vans and motors, speeding through the streets of Cairo, crushing live human beings

The 2010 Pakistan floods began in late July 2010 following heavy monsoon rains in the Khyber Pakhtunkhwa, Sindh, Punjab and Balochistan regions of Pakistan and affected the Indus River basin. At one point, approximately one-fifth of Pakistan's total land area was underwater.

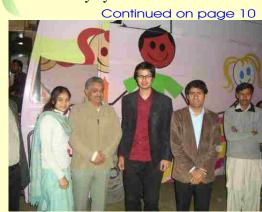
The floods directly affected about 20 million people, mostly by destruction of property, livelihood and infrastructure, with a death toll of close to 2,000. The number of individuals affected by the flooding exceeds the combined total of individuals affected by the 2004 Indian Ocean tsunami, the 2005 Kashmir earthquake and the 2010 Haiti earthquake.

Only 20% of the relief funds promised had been received so far, althought the emergency rescue phase is over, yet the delayed onset onslaught is full blown at the moment. The WHO reported that ten million people were forced to drink unsafe water. The Pakistani economy has been harmed by extensive damage to infrastructure and crops. Structural damages have been estimated to exceed 4 billion USD, and wheat crop damages have been estimated to be over 500 million USD. Officials have estimated the

total economic impact to be as much as 43 billion USD. The power infrastructure of Pakistan also took a severe blow from the floods, which damaged 10,000 transmission lines and transformers, feeders and power houses in different flood-hit areas.

Aid agencies have warned that outbreaks of diseases (e.g. gastroenteritis, diarrhea, and skin diseases) due to lack of clean drinking water and sanitation can pose a serious new risk to flood victims even after six months of the initial insult. Pakistan has also faced a malaria outbreak and of the Dengue fever taking a huge death toll recently.

Pakistan Islamic Medical Association(PIMA) was amongst the first responders to be joined immediately by other FIMA members



Prof Dr. Javaid Akram, Principal Allama Iqbal Medical College visiting the "Mobile Mother & Child Clinic" in Layyah

Continued on Page 5

Egyptian doctors cope with relief on the unprecedented mass demonstrations

When telephones and e-mails became functional in Egypt, we contacted our colleagues in the IMA of Egypt and the Arab Medical Union, remembering their significant past record in collaborating with FIMA in many humanitarian-medical relief activities in disasters in many regions of the world.

We, specifically, inquired about medicalhumanitarian needs in the events that practically changed history in the region.

Our Egyptian colleagues assured us their medical professionals had pioneering roles in providing medical-surgical care on the streets and in hospitals. The list of volunteers has been extensive and was never exhausted.

They provided medical consumables, and large amounts of plates and screws to the hospitals that took care of an extensive number of bone fractures.



Initially, they had no deficiency of any medical, surgical or other relief needs, and they only asked for our Duas.

Two weeks from eruption of this major event, our Egyptian colleagues informed us of their needs for help, to continue their extensive medical relief work, and to assist in supporting families of those killed. They provided the following bank account specifics:

1. Account name: Arab Medical Union - Prevention of Blindness

2- Name of bank: Suez Canal Bank

Bank address 122, Tahrir Street, Dokki

P.O.Box:371

Account no: 1/1/21090 Swift code: SUCAEGCXDOK

3- CORRESPONDENT BANK: BANK OF NEW

YORK

Donations could be transferred directly to their account, or through FIMA Relief account:

Jordan Islamic Bank

For Finance and Investment

Shmeisani Branch-Amman-Jordan

Beneficiary: Jordan Society for Islamic Medical

Sciences

Account no. (USD): 21501 SWIFT code: JIBAJOAM

In all instances, donors are kindly requested to inform Dr. Ashraf Jedaar, FIMA Relief coordinator (ajedaar@iafrica.com) and Dr. Tanveer Zubairi, FIMA general secretary (tanveer.zubairi@gmail.com)







Picture Gallery of protest in Cairo & the injured Egyptians on the street

Urgent Appeal for Libya, Tunisia & Egypt Medical Relief

In the wake of recent protests to bring an end to oppression and dictatorial rules in the middle east, a widespread wave of agitation started from Egypt and quickly shifted to the neighboring countries. The number of civilians injured and dead is in thousands and being an emergency medical service provider in such situations, our member IMA's have responded instantly.

The following is recent update:

Arab medical Union is playing the key role in providing life saving services and is organizing medical help in collaboration with various bodies like IMANA relief, GOG, South Africa, DWW(Turkey), WAMY & IMAKSA who has already launched a relief mission providing mainly surgical needs. These vehicles moved from Cairo to Al Salloum at the Egyptian/Libyan border on Monday 28th Feb, 2011. WAMY/IMAKSA is planning to send a second mission, in collaboration with Islamic Releif. Preparation is made through WAMY office in Cairo. Dr. Labib Syed of IMANA relief will head to Tunis via Istanbul and will reach there on March, 5th.

May Allah (SWT) grant all these brothers and teams a safe passage and guide their mission successfully. FIMA relief has extended its full support to all the IMAs and sister bodies who are actively engaged in providing relief services.

All the IMA's are requested to send donations and volunteers to help rescue thousands of endangered lives. Dr. Ashraf Jedaar (FIMA Relief coordinator)

Please contact:

Dr. Ashraf Jedaar, FIMA relief coordinator E-mail: ajedaar@iafrica.com

Dr. Khalid Hanafy

Cellular: 002 010 16 76 464

E-mail: drkhaled_hanafy@yahoo.com

Dr. Omar Ayyat

Cellular: 002 010 66 11 570

E-mail: omarpilot1955@hotmail.com

Dr. Abdul Qader Hijazi (Past FIMA President)

Cellular: 002 010 167 63 77 E-mail: hegazi37@hotmail.com

Dr. Ibrahim Al Zaafarany Secretary General Emergency & Relief Agency Arab Medical Union



Cellular: 002 010 142 13 32 E-mail: dr_zafarany@yahoo.com

Dr. Labib Syed

E-mail: labibsyed@gmail.com

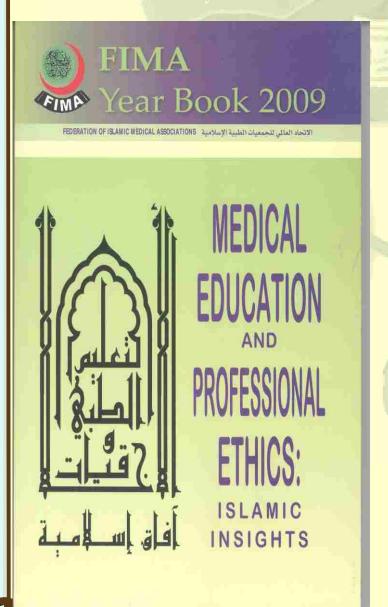
Mr. Yakub Essac Moosa(South Africa)

E-mail: yessack@global.co.za

FIMA yearbook 2009

(Medical Education and Professional Ethics: Islamic Insights)

The term Islamic medicine was introduced few decades ago. Several conferences have been held to address it, the first of which was The first International Islamic Medical Conference held in Kuwait in 1980. Now it is generally agreed to use the term Islamic medicine to identify medicine that incorporates the Islamic philosophy of medicine and that it is distinct from the term Prophetic medicine. Islamic medicine can only materialize from provision of Islamic medical education. Because of the growing interest in this important topic, the Consortium of Islamic Medical Colleges (CIMCO) proposed Islamic Medical education to be the theme this yearbook. The Executive Committee of FIMA approved this proposal and decided to specifically outline



CIMCO activities. Hence the theme of this issue is Medical Education and Professional Ethics: Islamic Insights.

FIMA members, some of whom are also members of (CIMCO) have written on the different aspects of this topic in this Yearbook. The result is a comprehensive collection of articles that I hope you will enjoy and motivate all of us to pursue the development of Islamic medicine, a worthwhile goal.

Dr Omar Kasule believes that there is a dichotomy in the current medical schools' curriculum. There are two systems; traditional Islamic and imported European systems that is the cause of the intellectual weakness of the students / physicians. The solution as he sees it is the integration of the two systems in medical education.

Drs Tayyab Hassan and Hamdan Noor, in their article stress the importance of the educational attitude of the students in the pre-clinical years. They argue that to gain the maximum benefit from education and the proper attitude, divine guidance is essential.

Dr Afshan Khan advocates the use of the Problem Based learning (PBL) and Self

Directed Learning (SDL) model of education that not only binds the sciences together but will bring relevant Islamic medical ethics and references from the history of medicine during the early Islamic period into play. While it seems that professionalism is part of ethics, Dr Shaharom opines that it should be treated as a distinct entity. It defines the practice of medicine as a moral endeavor that requires a rigorous application of behavioral and ethical standards in addition to the scientific training.

Drs Hassan, Khan, and Abdul Rahman discuss "Muslim Contribution to Research, Past, Present, and Future". They describe how Islamic teachings and the environment in which they lived sparked the pursuit of learning and research by scientists of the early Islamic period, how the Muslim physicians and scientists established centers of learning all over the Muslim World, and how the Arabic language became the language of learning. As mentioned by Dr Hassan et al it is important to inculcate research culture in the medical curriculum. This should not stop there. Residents in training should be asked to participate in research either basic or clinical. Faculty members should be required to initiate meaningful research.

Dr. Hossam Fadel in his article in this issue "Ethics of Clinical Research: An Islamic Perspective" reiterates the glorious history of research in the early Islamic period and that Islam exhorts us to pursue learning and research.

Dr Aly Misha'l in his article chose another term for the Islamic input in medical education i.e. Tarbiyah (moral upbringing). He believes the term derives its origin from Islamic values which harmonize man's relationship with his Creator, fellow humans, and the environment.

Islamic medical ethics in addition has to depend on legal codes derived from al-Shariah. Drs Iqbal Khan, Rehan Khan, and Masood Anwar elaborate on this point. They opine that "Islamic ethics is far

more superior than Western medical ethics as it protects both the doctor and the patient not only from the sins of worldly standards but also of divine standards too." In another article Dr Iqbal Khan along with Dr Anis Ahmed stress the importance of quality control in higher education. Measures have to be in place to assess the quality of the infrastructure, the services, human resources, curricula, instructional strategies, and research quality.

It behooves all of us to keep these lofty goals in mind and to work hard to implement them everyone in his or her sphere of responsibility. FIMA has proudly taken a leading role and has continued its efforts in this regards. The FIMA yearbook 2009 is a treatise and worth reading for every Muslim healthcare professional, doctors, medical educationists and medical students and all the other interested. The e-book may be downloaded from the FIMA website. Please paste this link for your free copy.

Http://fimaweb.net/cms/index.php?option=com_content&view=category&id=49&Itemid=205





Continued from Page 1

with no mercy. The medical related events are very significant and media has not highlighted this in their day to day reporting. Dr. Khaled Hanafy of Arab Medical Union asked for our 'duas' only in the beginning.

Now the picture has changed as the complexity of the injuries has become obvious. The doctors are desperately trying their best to deal with the horrific injuries but it has gotten beyond their scope of resources and expertise. A large number of injured people are being sent from Libya to the Egyptian border for medical help. Egyptian doctors are requesting for help in the way of donations and also asking for doctor in various specialties. Arab Medical Union and other Egyptian medical organizations always extended their help whenever and wherever needed. Now it is time for us to stand up to the task and help them. I had a very important meeting with the leadership of Islamic Relief USA in their Washington, DC headquarter to put our hands to work together to respond to disasters at home and abroad. IMANA and FIMA will partner together with Islamic Relief and our first project together may take place at the Egyptian/Libyan border where a temporary hospital is being set up. IMANA/FIMA/Islamic Relief have been consulted by the Government of Ghana for help to establish their medical infrastructure.

Dr Parvaiz Malik, President FIMA



DIARY OF A MALAYSIAN DOCTOR

Complied by Dr. Aly Mishal & Dr. Musa Mohd. Nordin



Diary of a Malaysian Doctor

A collection of Dr. Musa's (electronic) diary entries written during his involvement with Viva Palestina's 5th Gaza Land convoy to provide humanitarian & medical relief. Documenting the trials and sufferings of being involved with this human rights-championing adventure, this publication was compiled by Dr. Musa Nordin himself and Dr. Aly Mishal.

To read this interesting account please follow the link:

Http://fimaweb.net/cms/index.php?option=com_content&view=article&id=223:diary-of-a-malaysian-doctor&catid=38:general-news&Itemid=212

Picture Gallery of FIMA Relief "Mobile Mother & Child Clinic " for flood affected areas in Pakistan



Dr. Ahmad Khan & Dr. Athar Siddiqi (UK) inaugurating the mobile hospital.



The mobile clinic is ready to leave for flood hit areas



A view of interior of Mobile Clinic



A view of interior of Mobile Clinic



Dr. Tanveer Zubairi, Secretary FIMA addressing & making dua along-with doctors & guests who gathered to bid a farewell to relief team



Demography of flood hit zone which spans for 1600 KM



Sr Anne Marie visiting the mobile clinic (she will join this clinic in Layyah for a few days.)

Seminar on Islamic Medical Education conducted by Islamic Medical Association of Malaysia (PPIM)

A seminar was conducted jointly by Islamic Medical Association of Malaysia (PPIM), Serdang Hospital Medical Education Association (PPPHS) and the management of hospital Serdang with the title of Laporan Seminar Hospital Mesra Ibadah 2010. A total of 135 participants attended this seminar, comprising staff from the Serdang Hospital and other hospitals like Hospital Kajang, Hospital Tanjung Karang, Hospital Tengku Ampuan Rahimah, Klang and other educational institutions.

The purpose of this seminar was to give exposure to all the participants which included doctors, medical students and paramedics to appraise the special needs of people who are not able to carry out worship (Ibadah) like normal and healthy people. The speakers included Prof Abdul Rashid Abdul Rahman, President of the Islamic Medical Association of Malaysia (PPIM). Prof Abdul Latiff Mohamad, lecturer CUCMS former Chairman PPIM, Prof. Rashid Zainor Specialist Obstetrics and gynecology, Lecturer IMU Seremban. Demonstration of Medical Students' Prayer Worship CUCMS was carried out by Ahmad Bin Mohd Zaini Faidhi, Muhd Niza Bin Zakaria, Abdul Halim Bin Mat Daud, Ahmad Ilyas Bin Dzulkamal, Ahmad Ibrahim Bin Ahmad Zainuddin.



Prof. Dr. Abdul Rashid Abdul Rehman addressing the seminar



Prof. Abdul Latiff Muhammad delivering his key note address



Prof. Rashid Zainor addressing the seminar



Live demonstration of a patient with special need



The participants of seminar showed their keen interest



Ahmad bin Mohd Zaini receiving his souvenir



ISLAMIC BEHAVIOUR FOR THE PREVENTION OF CANCER

By Dr. Majid Katme, IMA-UK

THE FACTS IN THE UK ARE:

- -1/3 will die from cancers.
- -20 millions have got cancers
- -45 000 new cases of breast cancers every vear:12 000 women die from the cancer
- -35 000 new cases of prostate cancers every year
- -in 2005 there were 290 000 cases of cancers reulting in 153 000 deaths
- -43% of cancers can be prevented by changing one's behaviour and life style.

There are 280 organisations in 90 countries who are fighting cancers today.



MANY OF THESE CANCERS TODAY CAN BE AVOIDED BY SIMPLY PRACTICING ISLAM:

- Abstinence from drinking alcohol will help to prevent many cancers in the mouth, stomach and the colon.

Alcohol causes 6% of all cancer deaths.

It also increases the risk of cancers in:

The oesophagus, Larynx, breast, liver, ovaries, head and neck... Drinking alcohol during pregnancy increases the risk of cancers in young children.

(Drinking alcohol is prohibited in Islam)

- Avoiding smoking completely will reduce the number of cancers affecting the lungs, kidneys ,mouth,throat,oesophagus,bladder,breast,cervix, pancreas,stomach,liver.... (Smoking has been prohibited by more than 500 Legal Islamic Rulings/Fatawas in the Muslim world.)

- Cancer of the breast is caused mainly by bottle rather than breastfeeding, alcohol, smoking, saturated fat, abortion, lack of exercises.
- (Islam prohibits and discourages all these risk factors)
- * Skin cancer(malignant melanoma), resulting from too much exposure of one's skin to the sun while, for example (but not exclusively) on the beach. Unsurprisingly, women are the most common victims.

Within a decade, Melanoma has increased by 43%, according to Cancer Research UK. In 2004 there were 8939 new cases compared with 5783 cases in 1995. Skin cancer causes largely preventable 1800 deaths a year, and it takes from 8 to 30 years for the cancer to develop. Henbe, "Those who behaved badly on holiday in their teens BY NOT COVERING UP(naked) or applying suncream are now seeing the effect in their forties"

Islam opposes any nakedness in public or on the seaside, especially women and do not support the "burning" of one's skin by the sun

- Male circumcision helps in the prevention of most cancers in the penis and some cervical cancer. The latter is also caused by sexual promiscuity, which is forbidden in Islam

Cancer of the womb is common when marriage/pregnancy have been avoided. as in celibacy(among the nuns)

-Islam prescribed a healthy halal natural (Tayyib) diet and a lot of exercises which will avoid us too many cancers.

.The Superior Islamic HYGIENIC daily practices





Be physically active every day in any way for 30 minutes or more

as in ablution/wudu,hand washings ... and the strict moral code will avoid us a lot of infections and partner organsitions. There was an excellent diseases.

alcohol, smoking and sexual immorality.

Breastfeeding which is prescribed in Islam, will avoid our children a lot of diseases!

No doubt, Islam is a great asset for the HEALTH OF OUR NATION and EVERY NATION on our launched its first "Mobile Mother and Child Clinic" in planet, and is very much cost effective and collaboration with PIMA. DWW(Turkey) IMANI, economic and will save million of lives and Muslim Aid (UK). The fleet equipped with most billions of pounds!

WHICH IS HEALING AND A MERCY TO THE and is providing medical services to those who can't BELIEVERS..." (AL QUR'AN:Chapter 17-Verse

Dr A.Majid Katme(MBBCh, DPM)



Smoking invites lung cancer in large number of smokers



Healthy diet, specially fruits & vegetables prevents cancer

Continued from page 1

which might lead to cancers and to many other harmony and joint collaborations amongst these medical releif providers. PIMA's flood relief efforts Islamic behaviour does avoid us also a lot of other were strongly substantiated by IMANA, IMAM, diseases especially those coming from MERCY Malaysia, IMANI, MER-C Indonesia, Jordan Islamic Medical Society, Arab Medical Union, IMA Egypt, DWW(Turkey), IMA Sri Lanka and many others.

In reponse to ever increasing number of women and children in need of health care facility, FIMA modern gadgetry and medical supplies is presently "WE SENT DOWN IN THE QUR'AN THAT moving in the worst flood hit areas of South Punjab afford to move to cities and towns for medical help. Around 100 pateints are examined daily and lab tests, ultrasound exams and minor OB/GYN and surgical proedures are carried out. The project has been given a wide appreciation and acknowledgment BY general public and the elctronic media.

FIMA intends to send another mobile team to Sarhad Pakhtunkha province as the need for medical services is likely to enhance in the coming months. We request the IMAs to contibute and extend their support to set another FIMA Mobile Mother and Child Clinic. Please contact Dr. Tanveer Zubairi, Secretary FIMA for further details.

FIMA Newsletter April-2011 issue:-In next issue articles on FIMA semi annual EXCO meeting in KSA, FIMA Save Vision & FIMA Students activities.