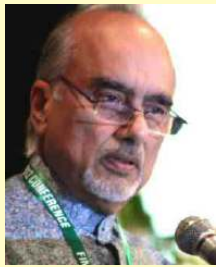




نشرة الاتحاد العالمي للجمعيات الطبية الاسلامية

e-newsletter of Federation of Islamic Medical Associations

Volume 6, Issue , Feb-April 2013



MESSAGE FROM THE PRESIDENT

FIMA semiannual EXCO meeting was held in Cairo, Egypt on February 28, 2013, all committee members in attendance. IMA of Egypt hosted the meeting and Dr. Omar Al-Ayat and his team did a great job in arranging the venue. The FIMA Islamic Hospitals Consortium (IHC) meeting for the regional Islamic Hospitals followed FIMA EXCO meeting. This meeting of FIMA IHC was unique and first of its kind held in the Arabic speaking region and delegates from Middle East and North Africa attended in great numbers. We are grateful to the IMA of Egypt for taking the leadership roll in the endeavor.

One of the highlights of FIMA EXCO meeting in Cairo was participation of EMRO UN WHO regarding problem with the polio vaccination program in three Islamic countries, Pakistan,

IMA-Egypt hosts the FIMA semi-annual EXCO meeting in Cairo

FIMA Semi annual EXCO meeting was held in Cairo, Egypt on February 28th, 2013 and was attended by *Dr Parvaiz Malik, President FIMA, Dr. Musa bin Mohd Nordin, FIMA Ex President, Dr Ihsan Karaman, Vice President, Dr Tanveer Zubairi, Secretary, Dr Aly Misha'l, Executive Director, Dr Ashraf Jedaar, Treasurer, Dr. Abd Rashid Abd Rehman, member EXCO, Dr. Salih el Ansari, Member EXCO, Dr. Omar Al Ayat, Egypt, member EXCO, on special invitation Dr. Muhammad Khan, IMASA, Dr. Ahmad el Towejri, IMAKSA and Dr. Bassem Naim, Palestine attended the meeting. Dr. Muhammad Khan, IMASA, Dr. Ahmad el Towejri, IMAKSA and Dr. Bassem Naim, Palestine (on special invitation).* Minutes of the last post executive committee meeting held in Kuala Lumpur were approved unanimously. Report by President on FIMA EXCO activities from September 2012-Feb 2013 and FIMA Save smile was presented by Dr. Parvaiz Malik followed by reports from Finance Secretary/Treasurer, Dr. Aly Mishal, Executive Director

and by the Regional Directors and membership applications. Report on FIMA Relief (including Gaza and Syria relief; proposal to raise funds for FIMA relief) was presented by Dr. Ashraf Jedaar. Report on Medical Students camps, FIMASAC was presented by Dr. Salih Al-Ansari followed by report on CIMCO by Dr. Abd Rashid Abd Rahman. A delegation of WHO-POL officials headed by Dr. Ala Alwan, Regional director of WHO-EMRO region was held in which he appraised the FIMA EXCO of current challenges faced in eradication of Polio in three Muslim Countries including Pakistan, Afghanistan and Nigeria and its implications. FIMA EXCO and President assured WHO officials of



[Continued to Page 4](#)

Editor in Chief Dr. Parvaiz Malik, President, FIMA - Editor Dr. Tanveer Zubairi, Secretary, FIMA
Managing Editor Dr. Aly Mishal Executive Director, FIMA, Assistant Editor Sajjad Saleem

fullest support of FIMA in fighting the menace of this avoidable disease resulting in disability and a bleak future for our coming generations. Recommendations on FIMA Advisory Council and amendments to the constitution were suggested by Dr. Mohammed Khan and Dr. Musa Nordin, these will be finalized in next FIMA council meeting. Islamic Hospital Consortium and report on IHC-Regional meeting Cairo-1-2nd March 2013 was highlighted by Dr. Aly Mishal and Dr. Omar al Ayat. Dr. Ashraf jedaar gave a brief on 30th FIMA Council and FIMA-IMASA Conference 2013 in Cape Town, South Africa. Dr. Aly told about the details of preparation of FIMA Year Book 2012. Dr. Tanveer Zubairi highlighted the details of FIMA e-newsletter & FIMA website.

Report on FIMA-AIDS Programme Awareness was presented by Dr. Aly. Report on Green Crescent Society Turkey and its recent welfare activities in Gaza was presented jointly Dr. Basem Naim ,the EX Minister of Health, Palestinian Authority and Dr. Ihsan Karaman the newly elected President of Turkish Green Crescent Society. FIMA life achievement award will be presented to Dr.Hossam E. Fadel in the next FIMA council Meeting. Meeting ended with vote of thanks to the chair followed by Dua.

FIMA SAVE VISION RECEPTION IN SAUDI ARABIA AND QATAR



FIMA Save Vision holds Free Eye Camps in Chad

FIMA Save Vision Free Eye Camp was held in Chad where 1374 Cataract patients were operated and intra ocular lens were implanted. In Chad two free eye camps were planned, the first camp was conducted in Abeche city, which is around 1000 kilometers away from the capital Nd Jamina. A team of four eye surgeons & two operation theatre assistants reached Nd Jamina on 21st March 2013. Next morning they travelled to Abeche. The journey to Abeche was very hectic due to the road travel of 18 hours. In 1000 kilometers of road travel, 300 kilometers of road actually did not exist.

The 1st FIMA Save-Vision free eye camp was conducted from 23rd 27th March 2013 in Abeche. It was inaugurated by the Governor of the province and this camp was held in collaboration with IIRO (International Islamic Relief Organization), supported & facilitated by Saudi Ophthalmologists. In this camp 924 cataract surgeries were performed and intra-ocular lens were implanted. The camp had good media coverage on National TV and newspapers.

The team returned back to Nd Jamina on 28th March 2013 & travelled again for the city Kilo in the South of Chad which was about 400 kilometers from Nd Jamina. Due to bad road conditions it took them around 8 hours to reach Kilo. The eye amp was conducted in the local hospital. There was no concept of Electricity Supply in Kilo city, the only source of Power supply was through generators. The working conditions in Kilo were very primitive. Air conditioner in operating room was some time out of order while temperature in Chad during the visit was above 40 °C. Local paramedics were not well trained but Alhamdulillah despite all the difficulties in this camp, which was conducted in the collaboration with WAMY (World Assembly of Muslim Youth) from 30th March 2013 to 1st April 2013, more than 450 patients were operated upon in three days. Almost all the patients were having bilateral, mature and hyper mature cataracts. On the departure site of the FSV team, still hundreds of patients were sitting there and waiting for the turn for surgery. What can they promise to themselves; was their return to these barren lands once again under the banner of FIMA Save vision inshallah, one day.



(FSV doctors visiting the Al Kitab TV channel studios)



(FSV doctors visiting the Al Kitab TV channel studios)



(Dr. Asif and Dr. Riaz with the local hospital staff)

Picture Gallery of FIMA Save Vision Free Eye Camps in Chad



(Dr. Asif performing eye biometry before surgery)



(An eye surgery in progress)



(Patients waiting for their turn for surgery)

Remaining President Message

Afghanistan and Nigeria. Apparently there has been lack of cooperation and in some instances traumatizing or killing of the vaccination health workers and volunteers. Some communities or parents are refusing the vaccination. As a result the disease is not only still exists in these countries, it is being transmitted across the globe due to international travel. These three countries being members of FIMA mandates a task on us to educate the respective populations through the primary care physicians, pediatricians and trusted members of the health care teams with help of the IMA's. Dr. Tanveer Zubairi represented FIMA in the UN EMRO planning session held in Cairo after the EXCO meeting.

FIMA SaveVision held their camp for ophthalmology surgeries in Gaza in February of 2013. This project has completed over ninety thousands cataract and cornea surgeries so far and several camps are in the planning in the coming months across the globe. FIMA SaveSmile held their annual camp in Khartoum, Sudan in the first week of March, led by IMANA and participation of DWW-Turkey. Over 200 surgeries were performed for repair of cleft lip and palate by team of 35. FIMA SaveSmile project has completed over 700 operations after its formal launching four years ago.

The situation in Syria continues to be volatile. The civil war has even spilled over to Lebanon. There are more refugee camps across the border in Turkey. FIMA member IMA of Lebanon, Hayat Foundation and Doctors Worldwide of Turkey are playing an active key role in caring for health of the refugees.

The preparations for the FIMA annual Council meeting and combined IMASA and FIMA are being finalized for September 18-23, 2013 to be held in Cape Town, South Africa. A record number of delegates are expected to attend. Please make your travel plans as soon as possible for this memorable convention.

A Report on FIMA Save Vision Mission to Gaza



A delegation comprising of top and internationally recognized FIMA Save Vision eye surgeons reached Cairo on 19th February 2013, including Dr Imran Akram Sahaf, an oculoplastic Surgeon, working as professor of Ophthalmology at King Edward Medical University, Lahore and President Oculoplastic Association of Pakistan. Dr Imran Ghayoor, a Vitreoretinal Surgeon working as Professor of Ophthalmology at Liaquat National Medical College, Karachi. Dr Intzar Hussain, Associate Professor of Ophthalmology at Services Institute of Medical Sciences Lahore and director of FIMA Save Vision accompanied by Mr. Akhtar Abbas, Journalist of a renowned monthly magazine "Urdu Digest Pakistan". The main objective of their visit to Gaza was training of Ophthalmologists of Gaza and to provide them with accessories and consumables so that they may improve the quality of their ophthalmic Services.

On entering Gaza through Rapha border they were warmly welcomed by the Palestinian authority. In the afternoon they had lunch with Director Health, Dr. Mohammad Al Kashif along with other ophthalmologists. It was their first interaction with ophthalmic community of Gaza.

They stayed at Gaza hotel which is located along the beach of Mediterranean Sea. At the back of hotel there were lot of fishing boats for local people but they were not allowed for fishing more than 3 kilometers. They took rest in the hotel for 2-3 hours after this a small get together of Ophthalmologists was arranged as a plenary meeting. In the evening they visited Gaza eye hospital and met with Director General, Gaza eye hospital Abdul

Salam Saba and other eye surgeons of the hospital; The team visited the hospital & had information about its working. It was a 40 bedded facility and 200 250 patients visit the hospital daily. Hospital needed Argon laser & visual field machine. All other machinery was present there but accessories were not available. They basically needed training & especially super specialty training in various disciplines of Ophthalmology. This hospital is the only eye hospital in Gaza. After visiting the hospital they had a meeting with ophthalmologists to plan the training schedule for following days, which included.

1. Examining patients & discussion with local ophthalmologist
2. Multimedia presentation & interactive session.
3. Hands-on surgical training in OT

Two training workshops were also arranged. One was on oculoplasty and the other on vitreo retinal surgery. These workshops were arranged at Gaza eye hospital, Urva General Hospital in Khan Younis City and Eye specialist Hospital.

Next day they had a meeting with Director General International Co-operation Department Dr. Muhammad Al-Kashif in his office in the Ministry of Health. A memorandum of Understanding was signed between Ministry of Health (MOH) Gaza & FIMA through FIMA Save Vision.

It was decided in this meeting that Gaza eye hospital will be provided with Argon laser machine immediately and FIMA Save Vision will try to arrange funds for visual field machine to upgrade the eye care facilities in Gaza. Dr. Muhammad Al Kashif expressing his views about FSV

Continued

A Report on FIMA Save Vision Mission to Gaza

said that “ I am honored to be a part of FSV inside as well as outside Gaza”

They also had a meeting with health Minister Dr. Mufeed al Mukhalalati who welcomed the delegation & requested FSV for future co-operation for the training of ophthalmologist and transfer of knowledge and skills to them.

They also met with director of Palestine Media Center, Salam Masroof. He briefed about the situation in Gaza and the measures taken by the present Government to improve the overall situation. He informed that due to imparting basic Islamic training to the people resulted in a drastic drop in the crime rate in community. There were four daily newspapers, three weekly newspapers and three T.V channels working in Gaza.

Another meeting was held with G.M of a very popular local Al Kitab Channel. Social aspects, education and cultural issues were mainly focused in the programmes of this channel.

In the evening they visited Shifa Hospital Gaza and had a meeting with doctors at specialist eye hospital Gaza. During their stay they had a meeting with Minister Health along with Dr. Musa Mohd Nordin, chairperson VIVA Palestina Malaysia. In this meeting Health Minister was given briefing about the working of FSV.

After that they met with President Palestinian Legislative Assembly Dr. Ahmed Bahr along with other Parliamentarians in his office. He thanked FSV for the gesture of good will and on helping Gaza patients requiring eye treatment.

They also visited Islamic University Gaza and had a meeting with the President Dr. Kamline Kamil Shaat. Then they visited Urva General hospital at Khan Younas. In Gaza the Prime Minister Ismaeel Hanea inaugurated a newly built mosque after Juma sermon and also welcomed & thanked delegation of FSV.

On 28th February they crossed the border but it took a lot of time to reach Cairo at night and returned back home after staying in Doha for a few days and had very useful meetings with Pakistani community to introduce the FIMA Save Vision and Qatari eye surgeons in Hamad Hospital, Doha for future collaboration in the area of holding free eye camps for the poor and needy.



(Prof. Imran Sahaf playing with one of his young patients, who attended the oculoplasty clinic)



(Dr. Intzar Hussain visiting the “will project” of Islamic University of Gaza.)



(FSV doctors visiting the Al Kitab TV channel studios)

Picture Gallery of FIMA Save Vision Mission to Gaza



FIMA-ELSEVIER PROJECT LAUNCHED.

Caring for Muslim patients with the help of an app

You have joined a medical practice that serves a large number of Muslim patients and realise that Ramadan is about to begin. As you seek out resources to help meet your patients' needs while they fast, you come across the *Care of Muslim Patients: A Practical Guide* app. Developed by Elsevier, in collaboration with the Federation of Islamic Medical Associations, this useful app reviews Islamic teachings about medicine so as to equip clinicians with the knowledge needed to deliver high-quality health care.

Using the app's keyword search option you access entries about ritual dawn-to-dusk abstinence from food and drink. Skimming through the app you learn that the "sick" are exempted from fasting, and are therefore instructed to advise patients with migraines and ulcers to forgo fasting. You also learn that breastfeeding women are prohibited from fasting, and are provided with guidelines for altering medication regimens for fasting patients. With this information in hand you feel better prepared to assist your patients in maintaining their health while fasting.

This app provides a user-friendly interface with easy-to-read content. In addition to the word search feature, the "Topics" and "Top Queries" sections guide users through relevant chapters. Each of the 26 chapters is divided into five sections: Understanding the Islamic Perspective, Dos, Don'ts, Caution, and Case Study/FAQ. Although the app covers a broad range of topics as it provides practical guidance for clinicians, the extensiveness of citations could be improved and the nature of the advice made clearer. For example, when advising physicians to counsel patients with ulcers and migraines to forgo fasting the app does not cite health literature on the harms fasting may cause these individuals. Similarly, when stating that

breastfeeding mothers are prohibited to fast, references to Islamic decrees that substantiate this view are lacking. Such references would be useful to equip physicians with resources that may help them in counselling their patients. Furthermore, some sections do not differentiate whether the patient care guidelines offered come from a clinical or an Islamic perspective. For example, the app suggests that providers do not resuscitate Muslim

"...what is the role of physicians, be they Muslim or non-Muslim, in counselling patients on matters of religion?"

patients who are "physically and/or mentally incapacitated and suffer a terminal illness" or "have suffered severe hypoxic ischemic encephalopathy following a myocardial infarct". The section does not specify, nor are citations provided to assist with clarifying, whether the Islamic ethico-legal tradition considers these specific circumstances sufficient cause for withholding life-support.

The mere fact that the app instructs clinicians to offer "religious" advice raises a larger question: what is the role of physicians, be they Muslim or non-Muslim, in counselling patients on matters of religion? It is one thing to provide physicians with information that helps them to understand the needs and customs of Muslim patients, it is another matter entirely to advise patients on the appropriate course of action from a religious perspective. While some sections recommend non-Muslim physicians refer their patients to Muslim physicians for bioethical advice, this suggestion assumes Muslim physicians are themselves informed of Islamic ethico-legal verdicts, and conflates medical expertise with religious authority.

The app also attempts to point out areas of Islamic bioethics controversy. However, while some areas are highlighted in an instructive way, others are overlooked. For example, although the app notes that Islamic scholars disagree over whether brain death is death proper or an intermediate state between life and death, the rejection of brain death by several Islamic juridical councils is not mentioned. Finally, since the methods used to retrieve, and to assess, the Islamic bioethics literature are not described, some care must be taken in using the app as a primary Islamic bioethics reference.

There are more than 1.5 billion Muslims in the world today who are predominately affiliated with either the Sunni or the Shiite theological sects. Across this divide, there are at least six ethico-legal schools of "thought" each with a particular approach to deriving guidelines from scriptural source-texts (Maliki, Hanafi, Shafi, Hanbali, Jafari, and Zaydi). Furthermore, country, ethnic, and tribal affiliations also influence cultural mores among Muslim communities. Consequently, constructing an ethico-legal and cultural resource for patient care across this diversity is an incredibly daunting task. Despite its shortcomings, *Care of Muslim Patients* is a valuable first-generation resource for those seeking to learn about the intersections of Islam, Muslim patients' behaviours, and medical practice.

Care of Muslim Patients is published by Elsevier of which *The Lancet* is part.

Asim I Padela

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Care of Muslim Patients: A Practical Guide
Elsevier (Singapore) Pte Ltd,
2012. US\$9.99.

Four chapters are available in the free app version. The full app can be downloaded from the Apple iTunes store for US\$9.99
<https://itunes.apple.com/us/app/care-muslim-patients-practical/id557157942?mt=8>

IMA Egypt hosts first IHC (Islamic Hospital Consortium) meeting for Arabic (Middle East-African region; 1-2 March 2013



FIMA office bearers with Dr. Nabila Qadir Hijazi (wife of Dr. A. Qadir Hijazi)



Dr. Aly Mishal delivering his lecture.



Life time achievement award for Dr. Abdul Qadir Hijazi



Dr. Parvaiz Malik giving his presidential address.



Dr. Tanveer Zubairi and Dr. Ihsan Karaman amongst the audience.



Scientific session.

WHO-EMRO holds a high level consultation of Muslim scholars and organizations to fight the challenge of Eradication of Polio in Muslim countries. (March 7-8, 2013 Cairo - Egypt)

The meeting started with the recitation of Holy Quran. Message by Grand Imam of Al Azhar was presented by Dr Abdallah Al Hussein followed by the Address of Regional Director, Dr Ala Alwan, WHO/EMRO region. The house was opened for discussion and very useful suggestions were made to address the burning issue. On Thursday, 7 March 2013, the 2nd Session was held with a theme of Eradicating Polio from Islamic Countries; A Muslim Community Responsibility. Dr. Yagoub Al Mazrou delivered a lecture on Global current status of polio eradication followed by questions and clarifications. A very interactive plenary discussion was conducted on "How can we re-profile the Programme to demonstrate Islamic ownership" the facilitators were Prof. Tawfik Khoga and Dr Yagoub Al Mazrou from Saudi Arabia. The 3rd Session was a group discussion on "How Umma address the violence against health workers" chaired by: Maulana Samiul Haq. He delivered his keynote address on "Supporting Pakistan to counter false propaganda". Way forward and wrap-up. In this session Dr. Tanveer Zubairi, Secretary FIMA pointed out and emphasized the role of Ulema and Muslim Medical bodies like FIMA to enhance awareness and sensitivity on this issue using their expertise and influence. He shared the success story of FIMA Save-Vision which had a very humble start and was now recognised as a role model in extending eye healthcare in under developed Muslim countries. Ulema from Pakistan



including Maulana Samiul Haq, Maulana Hanif Jullandhri and Dr. Tahir Ashrafi also reiterated their firm commitment and support at all levels for saving human lives through preventive measures and judicious use of medication including vaccination by health authorities. They also showed their grief and concern over killing of the Polio workers in Pakistan and Nigeria. The group of Ulema and technical experts formulated recommendations to be sent to the concerning Governments of at risk Muslim countries, their NGOs, medical and ulema bodies to work in a harmony and jointly to fight this challenge and overcome the increasing incidence of mortality and morbidity attached to these deadly diseases. The recommendations are:

For the Islamic religious and technical leaders from across the Ummah to: Brainstorm on the best strategies to demonstrate solidarity across the Islamic countries to ensure the protection of Muslim children against polio.

The scholars had a consensus that the Muslim Ummah faces a serious problem of persistent polio that threatens all Muslim children. They expressed concern about the prevalence of rumours and misinformation regarding polio in the name of Islam and reached a common understanding about the reasons why poliovirus is still circulates in some Muslim communities. They expressed a strong commitment to achieve the objective of a polio-free Islamic world by end 2014. It was generally agreed on the fact that



protection of children against polio is a collective responsibility of the Ummah, especially by its religious and political leaders. It was agreed that vaccination of children to protect them from polio is a religious obligation of the Muslim parents and Islamic religious leadership and institutions have a crucial responsibility to support eradication of polio. Muslim scholars had a consensus on the fact that the polio vaccine is safe and does not contain any haram substance and polio vaccine does not contain any substance that can cause infertility. They emphasized that there is an urgent need to rectify mis-conceptions around the polio eradication programme and polio vaccine. The scholars also appreciated the clarification of the fact that Shakeel Afridi never worked for WHO and UNICEF and WHO and UNICEF had no involvement or any knowledge of his activities in Abbottabad and killing of health workers is completely against the teachings of Islam and is strongly condemned.

The Muslim scholars unanimously condemned the use of health workers in intelligence collection and requested WHO to emphasize that all countries of the World should not use health interventions for any other purpose.

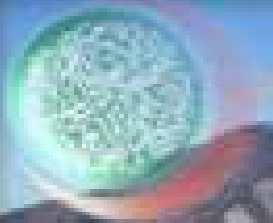
It was recommended that an Islamic advisory group should be constituted to build ownership and solidarity for polio eradication across the Muslim Ummah under the leadership of Al Azhar and in collaboration with Islamic Fiqh Academy; technical and secretarial support will be provided by WHO and UNICEF. A task force should be formed with the representation of key stake holders to formulate the terms of reference and modus operandi for the proposed advisory group by 15 April 2013. Under the guidance of IAG, meetings of national and international scholars should be convened soon in the 3 polio endemic countries in consultation with the national governments. International and national religious institutions should actively participate in the implementation of the polio eradication campaigns in the three endemic countries; joint field missions to be organized in collaboration with key Islamic institutions and organizations Recognizing the concern around the rampant mis-information in the name of Islam, the religious and technical

leadership at all levels should monitor, assess and respond effectively to the rumors about polio vaccination in coordination with IAG

Appropriate information on polio vaccination should be disseminated widely to all Imams and mosques using effective dissemination mechanisms involving religious institutions and relevant media and dissemination of Fatwas to all the stake holders in a very appropriate manner.. The religious leaders and institutions should closely collaborate with the polio eradication programme in planning effective and appropriate strategies to reach children in the 3 endemic countries. The IAG should aim to link with all Muslim humanitarian and professional organizations and bodies for active involvement in immunization.



CAPE TOWN: 19 - 23 SEPTEMBER 2013



First Announcement!



Islamic Medical Association of South Africa (IMASA)



33rd Annual Scientific Convention
Lord Charles Hotel, Somerset West
21 - 23 September 2013

Registration Information

Some Highlights

- Exciting plenary sessions and workshops with leading experts in evidence-based medicine
- Opening Ceremony Sat 21 Sept 2013
- Gala Dinner Sunday 22 Sept 2013
- Combined programmes with FIMA : Islamic Hospital Consortium and Consortium of Islamic Medical Colleges)
- Breathtaking tours of scenic Cape Town
- IMASA Council Meeting Saturday 21 September (after 5pm)
- AGM Sunday 22 September (12-1pm)

Members (doctors & allied health prof)	R:1750 / R1950*
Non-members (doctors & allied health prof)	R:1950 / R2150*
Spouses	R:1500 / R1750*
Nurses and interns	R:1500 / R1750*
Students	R:1350 / R1550*
Children: 0-4	r/c
Children: 4-11	R650
Youth Camp:12-18	R800 (R1000)*
Day delegates	R:1 200

* Denotes fee paid late (after 31 July 2013)

Call for Abstracts

No more than 250 words in Arial font 10
Submission deadline **10 May 2013**

Contact Details

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Accommodation

Lord Charles Hotel - Somerset West

(Please book Book directly with hotel @ 021 855 1040 (Use IMA Conference as reference)

Standard room (Single/Double)	R920/night
Superior (Single)	R1110/night
Superior (Double/Twin)	R1110/night
Student Suites (4 per room)	R1750/night (R440 per person)
Student Suites (3 per room)	R1520/night (R505 per person)

(Breakfasts included). Extra bed R210/child under 12 (only 1 child per room). Extra beds subject to availability. Rates exclude 15%



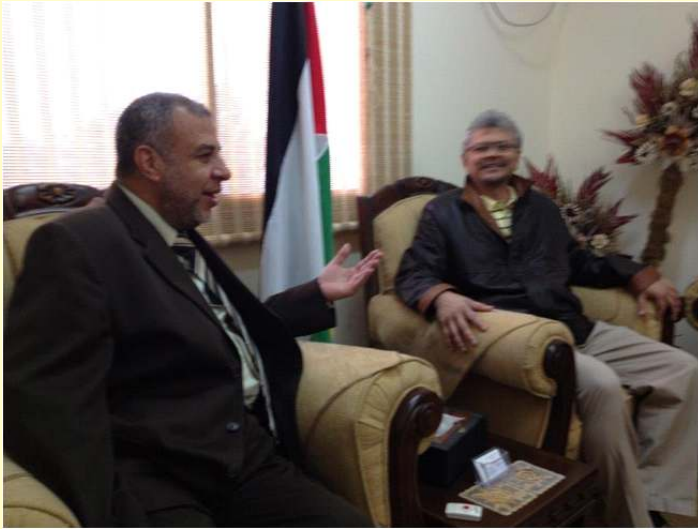
IMASA Convention ... In conjunction with
30th FIMA Annual Council Meeting
Capetonian Hotel, Cape Town
19 - 20 September 2013

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Picture Gallery of FSV to Gaza



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FIMA Newsletter June-July -2013:- In next issue articles on PIMA convention, IMANA Relief & the news from IMA's will be included.