

# نشرة الاتحاد العالمي للجمعيات الطبية الاسلامية

#### e-newsletter of Federation of Islamic Medical Associations

Volume 35, Issue March 2017







### **MESSAGE FROM THE** PRESIDENT



Africa, the second largest continent in the world, has a population of more than one billion with about 430 million (42 percent) below age 15.Due to poverty, illiteracy and bad governance the healthcare situation is acutely deplorable. In addition to other preventable and treatable diseases the incidence and prevalence of oro-facial clefts in Africa is quite alarming, although low as compared to Europe, America, and Asia. However due to want of

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## **IMR & FIMA SAVESMILE BRINGS BACK SMILE** TO THE FACES OF ANOTHER 161 SUDANESE KIDS, **MAKING THE TOTAL TO** 1250 ORO-FACIAL CLEFT REPAIRS

Children suffering from cleft lips and palates are a major medical issue in Sudan. They have difficulty in eating and speaking, they are often teased by their peers forcing them into isolation and shame. Most of them drop out of school making it extremely difficult to find gainful employment as they get older. These children and their families are left in a lifetime of social and economic poverty.

IMANA Medical Relief supported by FIMA SaveSmile/Relief has built an effective SaveSmile surgical team of volunteer plastic surgeons, anesthesiologists, pediatricians, family practitioners, emergency medicine



Parvaiz Malik, Isamail Mehr, Khalique Zahir, Wasif Hussain, Saquib Lakhani & Hassaan Sabit



Abulhakim Mohamed, Saqiba Khan, Azhar Ali, Saud Farooqi, Tahanie Aboushi & Sarah Moore



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Save

staff and medical students. It travels to Sudan for a week every year since 2010 and has performed 1049 free cleft lip reconstructions with great success so far. IMR SaveSmile Mission reached Khartoum on 23rd February 2017 and the camp was formally started on Sunday 26th February, 40 children were registered. That's 40 lives changed forever: availing these children the opportunity to be normal, IMANA Medical Relief's 20 member SaveSmile surgical team in just two days, has performed 80 cleft lip reconstructions with great success. Our team treated another 41 children and in three days, the number has gone up to 121 successful cleft lip reconstructions. The fourth day was another busy day with 40 children treated. In four days the number has gone up to 161 successful cleft lip reconstructions. Since 8 years IMANA medical relief has made a significant change in the lives of

many and we pledge to continue this journey.

Hopefully the pictures and stories shared here will allow you to see that what we are programmed to believe is not necessarily true; the same holds true over here as well.

It's humanity which helps break barriers. The first pic is of Roqaya, she's 40 years old. She's spent her entire life with a Cleft lip, unable to go to school and seek an education as she was embarrassed and ashamed. She did eventually get married and works as a maid.

She came in today for the surgery not telling her family she wanted to surprise them. It was amazing to see how excited she was; and how thankful that we came all the way from America willing to help, she prayed for us all and all the donors.















IMANA Medical Relief team reached Sudan on February 23rd to help hundreds of children receive free cleft surgery. Our goal was to provide 200 free cleft surgeries during our 8th Annual SaveSmile Mission in Sudan starting on February 23, 2017.

The team of 20 volunteers worked diligently to provide the care to the needy children and brought back smile to the faces of scores of young kids and their families.

# Welcoming YOUTH ranging from the ages of 12-18yrs

This year's Youth will be treated to a

# CAMP WITH A DIFFERENCE!!

ALL youth will be hosted at the newly acquired Berkeley Bed & Breakfast in close proximity of the Coastlands Hotel.

Consider this an

"UPMARKET" camp experience.

Fully supervised by an IMA Team, occupied with interesting and exciting activities, games, team building programmes and outings.

Youth to bring along modest swim wear.

Parents can have peace of mind that strict supervision of males & females at ALL times.

Youth will also play hosts to our local guest;

MI Junaid Kajee

37TH ANNUALIMASA
CONVENTION 2017

Slamic Medical Association
SST 19

YOUTH PROGRAMME
Reflect Care Heal

# 37TH ANNUAL IMASA





# **PROGRAMME**

AGES RANGING FROM 4-12YRS

An exciting programme to keep the little ones occupied while their parents are attending the conference.

To be hosted at the Coastlands Hotel

Supervised and taken care of by a qualified Montessori Educator / Islamic Educator.

> Fun activities incl: Innovative Arts, Crafts Skills Exercises, Fun Games, Team Exercises, **Resting Time &** complimented special catered, delicious kiddies meals.











#### **NEWS IN BRIEF**

Prevention of blindness trust, Alkhidmat and PIMA Pakistan Islamic Medical Association) arranged a free eye camp of #PIMA #Jacobabad which started on March 1st 2017. four eye surgeons including Dr Hashim Qureshi, Dr Ejaz Ahmad Memon, Dr Niaz Ahmad Memon and Dr Muhammad Zaheem Umer rendered their services. A total of 315 patients were examined on first day. total 200 surgeries are planned during this 3-day camp.

Central #PIMA President Dr



Abdul Malik visited different cities of Sindh on 24-26 Feb. Central GS Prof Khubaib Shahid, President PIMA Sindh Dr Abdullah Khilji also accompanied him

He addressed doctors' gatherings at Shikarpur, Jacobabad, Sukkur and Khairpur.

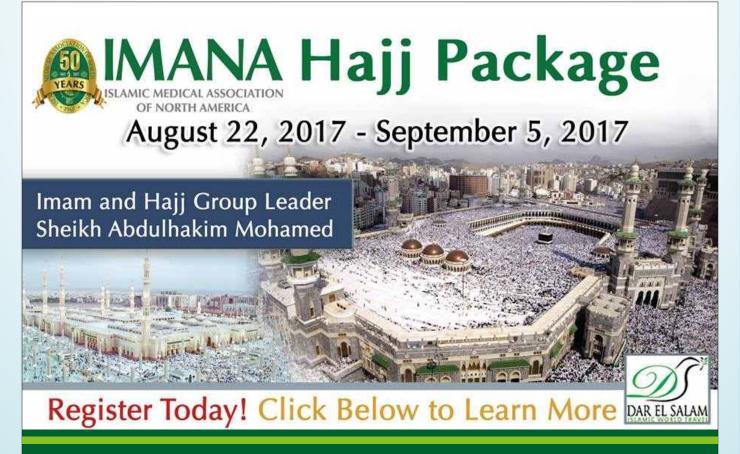
He also visited Dera Murad Jamali and addressed to a doctors meeting held at DHQ on 25th Feb attended by 16 doctors including 6 female doctors.











# IMANA RELIEF SAVE SYRIA MISSION EXTENDS MEDICAL RELIEF TO THOUSANDS IN WAR ZONE

A travelogue written by one of the members of Save Syria Mission Dr. Mohammed Zubairi.

# Day 1 - Settling in and the initial challenges

"Most of February 4th went by travelling, so I didn't get a chance to put up a post. After settling into our hotel in the heart of Amman (and after a night of rest), I had the chance to meet the full team this morning at breakfast. The majority of the group is from the United States, with

4 of us from Canada (including my wife, a friend who I travelled to Pakistan with during the 2010 floods and his wife). Everyone is committed to helping, and so there is no surprise in the types of people who make up relief teams like this one.

"By the end of Day 5 came around, the total number of patients seen over the week was just over 2600 (a first for an IMANA Mission). This would not have been possible without the support of all those involved locally as well as all those who financially and logistically supported the project in North America (a big Thank You to everyone").

#### Day 2, 3 and into Day 4

Today was the second day of our SaveSyria Medical Mission in Jordan, and thanks to IMR's volunteer team 1,151 Syrian refugees have received free medical care during the mission so far .Day 3 was not as busy, but definitely tiring due to the travel time. We drove out about 2 hours from Amman close to the Syrian







# 2,603 Syrian Refugees Treated

border and visited to refugee camps. Initially this had not been part of the plan, but the team's leaders decided to charter into a location with higher needs. Between the two camps, we saw about 75 or so families, each with 3-4 members at minimum. It was windy and there was a lot of sand blowing, so that definitely interfered with providing care in make-shift tents where these families are currently living. They hope to go back to their homes in Syria. The tents were covered up by old billboard sheets with logos from different companies such as LG. It seemed like a creative way to recycle those ads we see when we are driving around downtown or other places where they may be.

One older man told me that this is the 6th year he has been living at this camp, and although different aid agencies are providing care at different points (and they have access to a hot stove, as well as satellite), it is not the same. Many of them on one particular camp were farmers in Syria so they have continued with that on the other side of the border.



I was amazed at how the children in this community were looking after their younger siblings but also helping with the hospitality that was being extended to us (yes, they did prepare a meal for us once all the patients had been seen). This once again speaks to the resilience of humanity despite difficult times and conditions.

I am writing this post just before Day 3 gets started at a site about 1.5-2 hours away

from Amman. Yesterday, the team finished up at the same city (Zarqa) just outside of Amman, and saw a total of just over 600 patients. The day just flew by given we had a system in place from the day before and had sorted out the kinks in moving patients through.

The really nice part of the trip to date has been the fact that the team is so large, so it allows individual physicians to spend time with families (and often it is families of 3 or 4 being seen at the same time).

Many of these families are headed by widowed mothers as a result of the war, and they bring up genuine concerns of trauma in their children. Working through translators, sometimes it is difficult to get the specifics exactly right, but what definitely comes through is the resilience of the families we are meeting.

At dinner last night, we talked a fair bit with a coordinator for the local



effort who came to Jordan himself as a Syrian refugee under the UN, and who shared that given he was educated and able-bodied, it was not difficult for him to find work, but that is not the case for everyone. Many Syrian refugees in Jordan are not registered either with the UN or the government, and do not have access to any care, and so efforts like these help contribute towards their health. Families will often ask when the next mission trip will be so they can plan accordingly.

The hospitality we have received here has been great, and everyone is very grateful. A larger team has also meant a larger amount of service to those who need it. To be continued:)

Following breakfast, we drove out about 40 minutes to a peripheral town housed mainly by refugees from Syria and the Palestinian territories, along with some local Jordanians. We were told that many Syrians, often middle-class, came to this town thinking they would escape the Syrian civil war temporarily for a year or so, but it has gone on much longer. We were greeted at the clinic site by a number of volunteers from UMR, including current and former students from the health professions (i.e. pharmacy) and translation studies (i.e. as a bachelor degree). The team was split up into different rooms, seeing a combination of patients, both adult and children with access to a

make-shift pharmacy on site.

The challenge with international relief work is prioritizing between hearing their stories, addressing their medical concerns and managing time. I know we can't do it all, even in my regular context in Toronto, but many of these children and their families haven't seen a health professional in a long time due to their status in Jordan. I keep reminding myself that for some Syrian refugees, their story has brought them to Canada, but they are few and far between than most who are still quite close to their challenges.

Less than 24 hours away before heading to Amman, Jordan with colleagues from Canada and the United States (healthcare colleagues). During this time I will be providing general pediatric care to children of Syrian refugees who need such resources the most.

In my previous international relief work I had wondered what impact a short 4 or 5 day mission has on the lives of people, but "impact" is a relative word. I am looking forward to engaging with children and their families in a context that pushes me out of my daily routine and allows me to make a meaningful contribution.

Since my last work internationally I have trained as a Developmental Pediatrician working with children who have special needs and am

fortunate to be working in Toronto alongside a great group of colleagues. This work has humbled me in so many ways through all the children and families that I meet and interact with.

My interaction with children of Syrian refugees living in Jordan will only be an extension of the great welcome that Canada and my current context has extended albeit at a much a smaller level. I am grateful to IMANA for the opportunity as well as those whom I will soon meet and have the opportunity to provide healthcare to. I hope to make some posts along the way if time permits.

Today was the fifth day of the mission in Jordan and our team of volunteers treated an additional 752 patients. That brings the total number patients treated to 2603 - much more than anticipated!

This number is also the highest of any SaveSyria mission we've conducted in the past.

We thank you all for your support. Our missions will continue and we will continue to depend on you. This year alone IMR has more than 10 medical missions scheduled around the world.

Donate today and let's help save lives together!













#### Day 4 and into Day 5 - SaveSyria **Medical Mission**

Day 4 was perhaps the busiest of all the days to date. Maybe because this far into the trip the team has a system going in terms of triage, distribution of patients and general efficiency with the translators and interpreters. That being said, given the large number of team members, we were still able to hear the stories of people living in one of the refugee camps (along with treating their illnesses).

We certainly saw over 500 patients on Day 4 (final number to be confirmed), and it definitely felt like a lot was going on. One of the local mosques had made an announcement that free medical care was being provided by American doctors (there are only 4 Canadians on the trip) and there was free medications as well. I am fairly confident that access (without having to pay) contributed to the large number of individuals we saw. Many of the parents are stressed and worried, not just about their day to day conditions, but the well-being of their children, both mental and physical. There is not much follow-up for these children once we leave, and that is certainly of the challenges in providing relief medical care.

A small portion of my day was spent trying to bring smiles to the families



we saw (keeping in mind the large amount of patients needing to be seen). I asked a teammate who speaks Arabic and was helping with translation to share a joke or funny anecdote, and I immediately sensed a relaxation and easiness in the clinic room. Hopefully that can continue today:)

#### Day 5 and Journeying Home: SaveSyria Completed

It was not a coincidence I think, but we completed our five day trip with a celebration at centre in Amman called Sourivat Across Borders, a centre for rehabilitation for those injured in the war. I briefly chatted with the lady who runs the centre along four other women, and all their funding is through friends and family. They are able to accommodate almost 20 men/boys and 10 women/girls at any given moment in time and have access to different therapy services. I told her that I worked at a centre in Toronto focused on children's rehabilitation and was amazed at how successful Souriyat has been. I gained perspective how despite all the movement of refugees beyond the Middle East, there is a lot of great work that is happening to help support refugees very close to Syria.

By the end of Day 5 came around, the total number of patients seen over the



week was just over 2600 (a first for an IMANA Mission). This would not have been possible without the support of all those involved locally as well as all those who financially and logistically supported the project in North America (a big Thank You to everyone!). There will be another mission in May and donations continue to be welcome to support logistics and medication costs. I really enjoyed the company of the team I travelled with and the laughter and tears that came along.

One week, in the greater scheme of things isn't a very long time, and of course, there is the whole discussion about sustainability of relief work such as the one I have participated in. As we celebrated the success of the trip at Souriyat, I was reminded that a lot more still has to be done as we support basic human survival and dignity and respect, and as a society, we need to continue to work towards iustice and direct ourselves towards good. Easier said than done I suppose. I hope you will share some of this with your own contacts in raising awareness and support for initiatives that help us reach such a goal around the world. SaveSyria by IMANA is one such initiative, but there is a lot of great work going on around the world for a lot of different causes. Please continue to take action:)





#### **BIMA NATIONAL CONFERENCE 2017**



Dr Shaykh Asim Yusuf will be speaking on Mental Health at the BIMA National Conference 2017.

Dr Yusuf is a Consultant Psychiatrist with a special interest in Spirituality and Mental Health. He has received twenty years of rigorous theological training and has been granted an ijaza to instruct students in the art and science of Islamic thought by scholars from four continents.

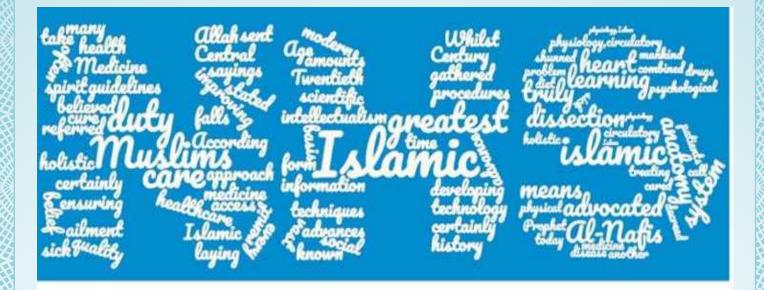
He is the founder and Director of the Path to Salvation Diploma in Classical Islamic Studies, one of the largest Muslim grass-roots teaching organisations in the UK, and of the Islamic Ethics and Global Citizenship Initiative. He serves on the advisory panel of the Islamic Medical Ethics Council, as well as being an advisory capacity to various community initiatives and charities.



Professor Salim al Hassani will be speaking on Islamic Medical History at the BIMA National Conference 2017. Professor Salim Al-Hassani is an Emeritus Professor of Mechanical Engineering and an Honorary Professorial Fellow at the School of languages, Linguistics and Cultures, Faculty of Humanities, University of Manchester. He is Chairman of the Board of Trustees of FSTC, Editor in Chief of MuslimHeritage.com, and founder of 1001 inventions.com.

Of special interest is his pioneering work in the history of science, where he has made his mark in the application of applied modern engineering analysis to recreate, in 3D virtual space, ancient machines, especially those invented by Muslims during the 'Golden Age', and which later became the foundation of modern science and industry. In addition to his academic work, Professor Salim Al-Hassani is leading a campaign for promoting the "Cultural Roots of Science" as a platform for community cohesion, world peace and prevention of extremism.





# The History of Islamic Medicine -A Light In The Dark Ages

# Dr. Sharif Kaf Al-Ghazal



Consultant Plastic Surgeon Honorary Senior Lecturer

Founder of International Society for the History of Islamic Medicine

Founding Member of BIMA

Thursday 2<sup>nd</sup> March 6pm Garrod Building 3.06

Health Structure | Islamic Influence | Modern Relevance | Q&A













# The Islamic Medical Association Of South Africa [IMASA] invites you to our

SUPPORTED BY:





37<sup>TH</sup> Annual Medical
Convention

IMASA has brought the healthcare fraternity an Annual Convention over the last 36 years, hosting 1000s of National and International delegates at the event and world-renowned guest speakers from both medical and Islamic background.

This event provides medical professionals a platform to earn CPD points as well as programmes specifically hosted to keep their family members entertained and occupied [Spouse Programmes, Student programmes, Youth Camps & Kiddies Programmes]

This years Theme is: Transformation in Healthcare – Harnessing Partnerships". The theme relates to Islam, health and the cost of Healthcare in the current economic environment.

DATES: 29th & 30th April 2017

We invite you and your family to join us at this memorable event hosted at the breathe taking venue of

## **VENUE: Coastlands Umhlanga Durban**

NOTE: Accommodation bookings to be made directly with the hotel -+27 31 514 6500 / reservations@coastlands.co.za - REF CODE: IMA

Visit our website to REGISTER ONLINE - www.ima-sa.co.za

FOR MORE INFORMATION CONTACT IMASA DURBAN OFFICE:

+27 31 207 2250 / imakzn@eastcoast.co.za / Kzn@ima-sa.co.za

#### بسم الله الرحمن الرحيم









الاتحاد العالمي للجمعيات الطبية الاسلامية (الفيما)
Federation of Islamic Medical Associations (FIMA)

الجمعية الطبية الاسلامية السودانية (سيما)
Sudanese Islamic Medical Association (SIMA)

الجمعية الطبية الاسلامية لشمال امريكا (ايمانا) Islamic Medical Association of North America (IMANA)

> جمعية اطباء حول العالم التركية Doctors Worldwide - Turkey



es defeally In Cooperation with



مستشفي الاسنان الخرطوم Khartoum Dental Hospital

جمعية نجود الخير لرعاية مرضي الشفة الارنبية NigoudElkhair Association for the suppot of Cleft Lip Patients

مخيم الشفة الارنبية وشق سقف الحلق العجاني الثامن The **8**<sup>th</sup> Free Cleft lip and Palat Camp

في القبرة من 19 فبراير الي 3 مارس 2017م

Between 19<sup>th</sup> of February to the 3<sup>th</sup> of March 2017 برعاية وتشريف نائب رئيس الجعهورية

أ.حسبو محمد عبدالرحمن

Sponsored by : Mr.Hassabo Mohamed Abdelrahman Vice President

## REMAINING MESSAGE OF THE PRESIDENT

healthcare facilities and poor socioeconomic situation, early management of these cases is rather low in sub Saharan and central Africa and one can find adolescent with oro-facial clefs in the streets of Sudan quite frequently.

Limited access to reconstructive surgery in developing countries has led to the involvement of international organizations that provide surgical correction for patients with oro-facial clefts. But inspite of efforts made by Governments and NGO's the backlog remains high as the population is increasing tremendously.

In 2008 Dr Parvaiz Malik, past President of FIMA was approached by Sudanese IMA and he was appraised of the gravity of problem faced by Sudanese children and youth. The first mission of IMANA medical relief led by Dr Parviaz Malik, Dr Khaliq Zahir and Dr Ismail Mehr conducted a free SaveSmile camp in 2008, this was later endorsed and patronized by FIMA. In 9 years of operation, the IMR SaveSmile enabled repair of over 1,250 clefts in Sudan alone, PIMA and Hayat Foundation (under DWW) also conducted many identical repair camps in other under-privileged communities.

The oro-facial clefting is associated with elevated infant mortality and significant morbidity in many developing nations where barriers to ensuring multidisciplinary treatment still remain. A cleft of the palate is associated with feeding difficulties in infancy, chronic otitis media due to eustachian tube dysfunction, midface hypoplasia, hypernasality of speech and difficulties with articulation and language development. The possible sequelae of undetected hearing loss can be socially isolating and compound challenges with communication. Another problem of clefts of the lip is the physical deformity and the associated social and psychiatric morbidity. The

stigma of an unrepaired oro-facial cleft greatly alters a child's ability to integrate into the social and cultural environment. Beyond the aesthetic deformity, orofacial clefts are given a wide variety of meanings and consequences in different cultures. In regards to etiology, some groups view clefts to be due to divine will, evil spirits, handling sharp objects during an eclipse, or curse from the God as a divine punishment for parental sins, and the children are therefore kept away from the public. Many of these misconceptions affix blame to parents and families, further isolating the child within their own family and community, and complicating access to complete medical and surgical care. These children hardly ever grow up as confident adults as they consider themselves incomplete, ugly and outcasts.

The IMR SaveSmile team is growing every year in number and enthusiasm, the volunteers help in documentation, counselling and supporting the surgical team. The real happiness and reward is the satisfaction in seeking the pleasure of Allah SWT after bringing smiles back to the faces of those kids who have been waiting for a messiah to cure their infirmity and bringing them back a happy face and to lead a normal and blissful life.

FIMA encourage all the IMAs and individuals to gear up the charity efforts in whatever way they can, be it a free medical camp, circumcision camp, free eye surgery camp, VVF repair camp or any other which they can afford to do. FIMA pledge to provide any technical and manpower assistance as demanded. All of our efforts shall be focused to please our creator through service to mankind, this is our ultimate objective and motto.

**Dr. Tanveer H. Zubairi**President FIMA

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