



IBNOSINA NEWSLETTER

WELCOME

Volume 2, Number 2 June 2008

It is our pleasure to welcome you to the June 2008 edition of the to the IMA newsletter. The association is getting bigger slowly with wider participation from Libyan physicians. We are also noticing the larger number of young doctors traveling abroad for their residency and postgraduate training. It certainly adds to our obligation to extend our hands to the new generation and encourage them to pursue their studies and training with a lot of hope and enthusiasm. We hope that the association will play a role in helping the young doctors with achieving their goals and pursuing their dreams.

We welcome new members to IMA and invite non members to apply and be part of our big family.

Please submit your articles, comments and suggestions to:

Ibnosinaneews@gmail.com

-The Newsletter Editors

MEDICAL NEWS . . UPDATE

HPV VACCINE

Human Papilloma virus (HPV): related disease & HPV vaccine.

HPV is the most common sexually transmitted infection; Persistent HPV infection is strongly associated with the risk of cervical cancer and genital warts. Cervical cancer is the second most common cancer in women worldwide. The recently approved quadrivalent HPV vaccine (Gardasil) targets the HPV strains that are responsible for 70% of cervical cancer & 90% of genital warts. It is also effective in reducing the incidence of HPV – related condition if given prior to exposure to HPV; it does not clear HPV infection that is present at the time of vaccination. In June 2006 The US Food and Drug Administration (FDA) approved the first vaccine against HPV for girls and women ages 9-26, it is a prophylactic quadrivalent vaccine against HPV type 6, 11, 16, and 18 made from noninfectious virus particles, and is given intramuscularly as a series of three injections over a 6 month period, the efficacy of Gardasil was demonstrated in 4 large randomized trail. The Advisory Committee on Immunization Practices (ACIP) have

Newsletter Editors

Dr. Elhadi Aburawi

Elhadi.Aburawi@med.lu.se

Dr. Amna Salhin

asalhin@hotmail.com

Dr. Nezar Jrebi

drnezar@gmail.com

Dr. Ragiab Ayad

Ragiab@hotmail.com

Dr. Elmahdi Elkhammas

ibnosina@gmail.com

For membership information

Contact Ibnosina Medical

Association at:

Ibnosina@gmail.com

submit your articles to the
Libyan Journal of Medicine
visit



recommended that quadrivalent HPV 6/11/16/18/L1VLP vaccine should be given to girls aged 11 to 12 as part of routine vaccination.

-karima Shmila, MD

www.ljm.org.ly

HELP NEEDED

We are seeking candidates to translate medical news, articles and leaflets to the Arabic language for the purpose of continuing patient education. All Ibtnosina members are invited to participate. If any Arabic speaking doctors want to contribute, we will be delighted to hear from them.

Please contact us at:

Ibtnosina@gmail.com

-Nagah Doghri Elarossi, MD

HEALTH TIPS

NOISE POLLUTION

Nowadays we live in a noisy environment; we may also be more borne to noise induced hearing damage, but unfortunately our level of concern and awareness remains low. Pathologically the noise leads to the formation of oxidants, which are highly toxic to the outer hair cells of the organ of corti in the cochlea. Excessive stimulation by noise produces reactive oxygen species (ROS), which damage phospholipids in the cell and the nuclear membranes and the DNA; they increase intracellular Ca^{++} and up-regulate cell death genes(1). Rules and regulations to control the level of and noises in different sittings do exist, but in our Libyan society working places it is hardly an important issue. One of the best rules are those issued by the EC, which looks at the level of the noise, the exposure duration, the individual otological and audiological background, and the protections the individual uses. The Health and Safety Framework Directive (89/391/EEC) issued by the European Council, states that ear protection devices should be available to people who work in noisy environments at 80 decibels, and should be mandatory to wear at 87 decibels. In Europe and North America noise exposure deafness is a major litigation issue, in 2006 it cost business firms around 2 billion US dollars. About 65 million Americans are victims of noise exposure and may end up with impaired hearing that interferes with their jobs and daily lives. Though we all know the direct effect of noise on our hearing, noises may affect our sleep, mental and social well-being, it can cause ulcers and heartburn due to the accompanied stress, and there are few reports of indirect relations to heart and cardiovascular diseases(2).

We measure noise loudness in the logarithmic decibel unit; every 10 decibels increase is equal to tenfold increase in noise loudness. Our ears also use this logarithmic scale, and every 10 decibels increase in noise intensity is perceived as doubling the loudness. How far we are from the source of the noise is also significant factor, so average car traffic may cause 50 decibels if you are 30 meters away, and 70 decibels if you are driving your car with the window open, which is 4 times louder. An aircraft taking off half a kilometre away may be as loud as a car horn 1 metre away, with both reaching 120 decibels. Noise may become painful to our ears if it reaches 120 decibels. We may start suffering from lack of sleep if the average noise in the

our ears if it reaches 120 decibels. We may start suffering from lack of sleep if the average noise in the bedroom reaches 45 decibels. The only group of people who I remember wearing noise protection equipment in Libya were the ground engineers in the international airports. We should raise the public awareness of noise pollution, and start taking effective measures to control it.

References

1. exposure treatment attenuates noise-induced hearing loss. Yamashita D, Jiang HY, Le Prell CG, Schacht J, Miller JM. Neuroscience. 2005;134(2):633-42.
2. The association between noise exposure and blood pressure and ischemic heart disease: A meta-analysis. Elise E M M van Kempen, Hanneke Kruize, Hendriek C Boshuizen, Caroline B Ameling, Brigit A M S taatsen, and Augustinus E M de Hollander. Environ Health Perspect. 2002 March; 110(3): 307-317.

-Mohamed Benamer, FRCS (ORL-HNS)

STUDENTS AND RESIDENTS CORNER

MEDICAL ETHICS :

ETHICS OF HUMAN RESEARCH

Human experimentation/research can be defined as conducting research on human being under certain regulations and conditions. It involves two persons; the investigator that is the qualified person who conducts the research and the subject or the patient who is undergoing the experiment. The responsibility for the human subject must always rest with a medically qualified person, and never rest on the subject of the research, even though the subject has given his or her consent. Medical progress is based on research, which ultimately must rest in part on experimentation involving human subjects. No doubt that clinical research has made a lot of significant improvement and contribution to the medical field and results in a lot of benefits for mankind. The human studies should always conform the principles outlined in the declaration of Helsinki.

Over the last many years, several regulatory bodies all over the world e.g. Declaration of Helsinki I and II, National Health and Medical Research Council, American Psychological Association and Transplantation and Anatomy Act have refined existing regulations and expanded the scope for the enforcement of ethical conduct in various aspects of human research:

1. The uniqueness of human experimentation.
2. The relationship of the individual to society.
3. Health as a public good.
4. Information to the patients or their parents by laymen language.
5. Informed consent: every effort should be made by the investigator to inform the potential subject about all aspects of the experiment, and an individual can be used as an experimental subject only upon his or her willingness and after the receipt of the informed consent.
6. Nondisclosure.
7. The definition of death.
8. The design of experiments.
9. The distinctions between research and practice and the therapeutic versus non-therapeutic research.

These guidelines lie the values of human freedom and the inviolability of the human person, regardless of the therapeutic or non-therapeutic nature of human experimentation.

References

World Medical Association, Declaration of Helsinki. Adopted by the 18th World Medical Assembly, Helsinki, Finland, June 1964. Amended by the 29th World Medical, Assembly, Tokyo, Japan, October 1975; 35th World Medical Assembly, Venice, Italy, October 1983; and the 41st World Medical Assembly, Hong Kong, September 1989.

-Elhadi Aburawi, MD PhD

TIPS TO THE NEW INTERNS

We would like to extend our congratulation to all Ibnosina members as well as non-members who matched this year for the American and Canadian Residency Programs. It is a dream come true and we wish them the best in their training and career. There are few tips I'd like to share with them and hope they will serve the new batch of interns:

1. Be thoughtful and polite and do not jump to answers very quickly but wait until the question is directed to you even if you know the answer and no one else knows.
2. Be on time. This has a different translation for the intern. It means you come ½ to 1 hour before rounds. You check on all patients and learn every thing about them before your senior resident or attending comes to make rounds. That way there will be no surprises on rounds.
3. Work as hard as you can. Most of the programs are trying to be compliant with 80 hours a week but you can stay longer, This way you will not miss the interesting and difficult cases which are your main source for wider practical knowledge.
4. Do not miss on any chance to present. When you present you learn to read, analyze and answer questions on the spot. Do not worry about your accent and the level of presentation. Time is on your side and every one knows English is not your primary language.
5. Look for chances to participate in research. Do that even if it is a simple case report. I understand that not every one is interested in research but participation can help you with residency and fellowships.
6. Keep your white coat clean all the time. The minute you are labeled the doctor with a dirty coat, it will be difficult to come out of the description.
7. ASK, ask and ask. It is expected that you ask and you call your senior about all major and minor things in the beginning. If you do not call early on during the internship, your senior may become concerned that you are not a very good intern. You may be overconfident and doing dangerous things. Watch this tip carefully in the first 6 months then it becomes common sense.
8. If you are concerned about a patient or family problem make sure you communicate that to your immediate senior. It may mean a trip to the operating room to ask a question. Communication is one of the best skills that you learn early on.
9. Show your enthusiasm and interest in your patients and take the first move when you become more comfortable with patient care.
10. Make sure that you organize your day and be organized during rounds.

-Elmahdi Elkhammas , MD

TEST YOUR KNOWLEDGE

1. 24 year old man arrives in the ED with a GCS of 15. pulse of 110. BP of 120/60.

O B I T U A R Y

It is with great sadness we received the news of the death of Dr. Rauf benamer. Dr. Benamer is credited for the creation and the administration of the first medical school in Libya. He was charged to establish a faculty of medicine within Garyounis University in 1969. He was fluent in several languages. He left the medical school in 1973 to become the provost of Garyounis University, then he retired from government jobs following that post. He died after a long period of private life and we will remember him for what he did for the medical education in Libya.

Upcoming Events:

Libyan Association for
Diabetes and Endocrinology
summer program 2008

www.endodiablibya.org

Frontiers in Immunology
Research 2008 International
Conference July 22-26, 2008
Florence, Italy

and two stab wounds above the level of the mandible. What is the next step in management?

- A. tracheotomy
- B. neck exploration in OR
- C. angiography and panendoscopy
- D. rapid sequence intubation

2. Which tumor, found in a 68 year old male, is most likely malignant?

- A. one found in a small, minor salivary gland
- B. one located in a submandibular gland
- C. one found in the parotid gland
- D. 2 cm adrenal incidentaloma

-Nezar Jrebi,MD

Libyan society of
Gastroenterology and
Hepatology meeting
October 9-11, 2008
Tripoli, Libya

Libyan Surgeons Society
15th Conference
November 21-23
Sebha, Libya

IBNOSINA MEMBERS . . NEWS AND UPDATE

The members of Ibnosina Medical Association are pleased to extend their warm congratulations to Dr. Huda Elshershari for her new post. Dr. Elshershari is completing her fellowship in pediatric Cardiology and has accepted a full-time faculty position of assistant professor of clinical pediatrics in the Division of Pediatric Cardiology, Department of Pediatrics, at the University Of Illinois Medical Center, Chicago effective July 1, 2008. She obtained her M.B.B.Ch. degree from Al-Fateh University, Tripoli, Libya.

We welcome IMA members for 2008:

Abdulwahab Albarasha, Benghazi, Libya
Ahmed Elakkari, Tripoli, Libya
Serag eddin Abdulaziz, Tripoli, Libya
Khaled Khalifa, Tripoli, Libya
Aiman Smer, Columbus, USA
Faesal Elbakoush, Tripoli, Libya
Wesam Frandah, Columbus, USA

Test Your Knowledge Answers:

1. C

2. A

New ideas and projects ?

Any news about activities of Ibnosina Medical Association members as well as the enterprises of Libyan physicians and medical professionals are welcomed.

Ibnosina Medical Association www.Ibnosina.org

Libyan Journal of Medicine www.ljm.org.ly

? Have a question or need information..... Contact us at

ibnosinanews@gmail.com