



IBNOSINA NEWSLETTER

WELCOME

Volume 2, Number 3 September 2008

Welcome to our September 2008 edition of the to the IMA newsletter.

The association as well as the newsletter is a community project. Every Libyan doctor is entitled to participate and be part of the project. During the last quarter we have seen two proposals that surfaced without much propaganda but both deserve major attention from all of us. The first one was the proposal for code of ethics for Libyan physicians. It showed up as a word document on the website of the secretariat of health. This document is historic, extremely vital and it is up to the doctors to be part of or not. So far we do not even know the names of the committee members who are behind it. It seems that it is the production of the Libyan medical syndicate and we should take it seriously. We do need a code of ethics that is well written, well published and implemented, and for our children to be proud of it. We do not want any confusion between the code of ethics and the laws of the country because they are two different things. I would like to encourage all Libyan doctors to read it and critique it. To view it, please follow the link: <http://www.ibnosinahealth.org/modules/AMS/article.php?storyid=193>

Another thing that surfaced in the last month or so is the proposed health law for Libyan citizens. It also showed up as a word document on the same website. It appears to be a comprehensive document. I am currently reading it and it deserve a very important look by all sectors of Libyan citizens. As we know with the exception of very few people all of us complain about the level of our health services. So dear citizen and in particular dear Libyan doctors, this is your chance to have input into the health laws that are going to touch you and your family. To view it, please copy and paste the following link. And you will find a comment and a link to the entire document.

<http://www.ibnosinahealth.org/modules/AMS/article.php?storyid=195>

We hope that the rest of 2008 is very productive and hope to see more contributions among the Libyan doctors into their affairs.

Dr. Elmahdi Elkhammas

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Libyan Journal of Medicine
visit



www.ljm.org.ly

MEDICAL NEWS . . UPDATE

A CALL FOR ORAL CANCER AND PRECANCEROUS LESIONS SCREENING

Oral cancer is ranked as one of the top ten cancers in the world with wide differences in geographic distribution. Squamous cell carcinoma is the most common type of the oral tumours. In Libya, the prevalence and incidence of oral cancer disease is unfortunately unknown. In spite of the efforts that led to publication of the recent report on cancer incidence and mortality in the eastern part of Libya by El Mistiri *et al*, IJC, (2007), there has been no reference to oral cancer per se, although, the head and neck incidence has been estimated to be 9%.

The disease has high mortality and morbidity outcomes in unattended cases. Therefore, early detection and prevention are crucial in reducing its fatal consequences.

It is well known that lack of awareness in the public of the signs, symptoms, and risk factors for oral cancer in addition to a disappointing absence of prevention and early detection by health-care providers in general and oral health-care provider in particular, are the main factors responsible for the delay in diagnosis.

Dental surgeons play major part in oral examination and early identification of aberrant changes. However, If a dental patient is asked whether the dental surgeon had asked him to roll his tongue up or to stick it out for examination of the highly susceptible areas for oral cancer during a routine dental treatment, the answer would have been no!

The disease is largely preventable and early diagnosis greatly increases patient's chances of survival as the mouth is very accessible for a clinical examination.

Visual screening for oral cancer is easy, effective, cheap, and saves lives. The procedure is simple and non-invasive and would take only 5-min of visual inspection of the oral mucosa with lighting, gauze, and gloves, whereas the detection of most solid malignancies in their early stages almost always requires special, costly, and often invasive techniques.

Hopefully, this brief article encourages all health-care providers to take the initiative and participate in screening of oral tissues for any suspicious changes.

Dr. Juma Alkhabuli, BDS, MDentSci, PhD (Oral Path)

QUICK-TEST FOR MRSA CLEARED BY FDA

Methicillin-resistant staphylococcus aureus (MRSA) is causing a lot of problems for health service all over the world. This new test can detect whether a patient is infected with MRSA or other staph strains. To get the result of the usual culture it would take at least 2 days. Now, by the Quick-test the results would be ready in 2 hours. In a multicentre trial the test identified 100% of MRSA infections and more than 98% of other staphylococcus infections. It should not be used "as the sole basis for diagnosis" because it may detect bacteria in patients who've been successfully treated for staph. It can not quantify the treatment response, so it should not be used to monitor the patients' recovery.

Food and Drug Administration release

Summary by Dr. Elhadi Aburawi

HEALTH TIPS

RUNNING ASSOCIATED WITH REDUCED DISABILITY AND IMPROVED SURVIVAL AT OLDER AGES

Coronary heart disease is number one killer in developed countries and also becoming more in developing countries. Exercise has been shown to improve many health outcomes and well-being of people of all ages. Running offers quality-of-life and survival benefits through middle and older age. Researchers enrolled some 540 adults aged 50 or older who were members of a running club and 420 healthy controls from northern California who were 50 years and older beginning in 1984. Questionnaires were sent to participants each year, with about half of the runners and a third of the controls responding at year 21. Disability scores increased with time in both groups, but after adjustment for confounders (including other aerobic exercise), scores remained lower among runners than controls at all points. In addition, runners were significantly less likely than controls to die during follow-up (15% vs. 34 %). The authors concluded that support recommendations to encourage moderate to vigorous physical activity at all ages. Increasing healthy lifestyle behaviours may not only improve length and quality of life but also hopefully lead to reduced health care expenditures associated with disability and chronic diseases.

Eliza F. Chakravarty, MD, MS; et al. Arch Intern Med. 2008;168(15):1638-1646.

Summary by Dr. Elhadi Aburawi

IT IS TIME TO ACKNOWLEDGE AND FIGHT MEDICAL ERRORS IN THE HEALTH SYSTEM IN LIBYA .

This is a title of the article written by our colleague Dr. Elmahdi Elkhammas on 22/03/2008. It does clarify the real need for Acknowledgement of Medical Errors and for the doctors to learn from their mistakes. It also includes advices to the directors of the Hospitals and to the patients in our country.

<http://www.tripolipost.com/articledetail.asp?c=58&i=1760&archive=1>

HEALTH AND DIET

STUDY INDICATES MEDITERRANEAN DIET MAY LOWER RISK OF TYPE 2 DIABETES .

The "Mediterranean diet, which is famously beneficial for the cardiovascular system, also helps protect against diabetes," according to a study published online in the *BMJ*. This diet is comprised mainly of "olive oil, fish, grains, fruit, nuts, and vegetables. Meat and dairy products have only a minor role.

"Miguel Martínez-González, M.D., Ph.D., of the University of Navarra in Spain, and colleagues, "recruited 13,753 people with graduate-level education between December 1999 and November 2007." The participants "had no history of diabetes when they were enrolled."

The researchers divided the subjects "into three groups, depending on the level of their adherence to the diet," People with the highest adherence received "seven or more points, while the bottom group had less than three points." After following the participants for about four years, the authors "found that the average risk for those in the highest adherence group was 83 percent lower than for those in the lowest group. Those in the middle had a 59 percent fall in the risk of diabetes." Notably, "the average age of those taking part was around 40 years old, under the normal age for type 2 diabetes to strike, and the study authors conceded that the relatively low numbers of new cases of the condition over their four-year period made the results harder to rely on." The study also pointed out that participants "with high adherence to the diet (score > six) also had a higher baseline prevalence of most risk factors for diabetes." These subjects "were older, had a higher BMI, a higher total energy intake, were more likely to have high blood pressure or a family history of diabetes, and were more likely to be former smokers." Ordinarily, "these individuals would have been expected to be at greater risk for diabetes, but actually, their risk was lower," possibly due the Mediterranean diet, the authors said.

Summary by Dr. Nezar Jrebi

Upcoming Events:

Libyan society of Gastroenterology and Hepatology meeting

October 9-11, 2008
Tripoli, Libya

Libyan Surgeons Society 15th Conference

November 21-23
Sebha, Libya

Libyan Doctors Society 4th LDS Meeting

November 22
Chorley- UK
www.libyandoctors.co.uk

Sixth Conference for Libyan Physicians

March 19-22
Zawia, Libya

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STUDENTS AND RESIDENTS CORNER

TEST YOUR KNOWLEDGE

1- Which of the following clotting factor is not made in the liver ?

- A- II
B- Protein C
C- VIII
D- IX

2- What is the initial treatment for Thrombotic thrombocytopenic purpura (TTP) ?

- A- Steroids
B- Splenectomy
C- Observation
D- Plasmapheresis

3- Which body fluid has the highest potassium concentration ?

- A- Saliva
B- Pancreatic
C- Duodenal
D- Gastric

IBNOSINA MEMBERS . . NEWS AND UPDATE

- Our Sincere congratulations to Dr. M. Elfortia who was elected as a president of MASU (Mediterranean and African Society of Ultrasound). He extends his hands to active members in this continental body to work together to promote Ultrasound in the region of the Mediterranean and Africa.

- The members of Ibnosina Medical Association are pleased to extend their sincere congratulations to Dr. Elmahdi Elkhammas for his promotion to a full Professor of Surgery at Ohio State University. We wish you all the best.

- Congratulations Dr. Nezar Jrebi on your wedding, may you have a wonderful married life.

We welcome IMA members for 2008:

Rida Mazagri	Adam Maghrabi
Yousef Hadi Darrat	Yousef Ali Al Ahwel
Atef Hassan El Gassier	Hasan Mohamed Zerti
Hazem Ibrahim Eltawell	Abdelkader Almanfi
Akram Shibani	

We wish to congratulate all medical graduates who completed USMLE and started the process of applying for post graduate training in the USA for 2009. IMA will continue to support all Libyan physicians who are interested in post graduate training by offering advice and answering questions by knowledgeable and experienced members.

We wish you all the best and continued success.

Test Your Knowledge Answers:

1. C 2. D 3. A

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

Prepared and organized by Dr. Amna Salhin