

## Over 950 Refugees Treated at Clinic Established by the IMA and Ministry of Health

**F**or the past few years penniless refugees from African states such as Nigeria, Somalia and the Ivory Coast, have been entering Israel via the Egyptian border. Two thirds of these refugees live in squalor in Tel Aviv and are not eligible to receive health services, as they are not citizens or residents of Israel.

The IMA has taken steps to enable the refugees to receive adequate medical treatment. Besides the organization's initiative in the Knesset to amend the National Health Insurance Law to include refugees and asylum seekers, the IMA has established, together with the Ministry of Health, a clinic that provides primary health care to these refugees. In addition, the IMA has initiated a major drive to secure medication free of charge and has, in fact, received donations from major pharmaceutical companies.

Since the opening of the clinic, located in the Tel Aviv central bus station, in September 2008, over 950 refugees have been treated. The clinic currently has about 130 doctors volunteering there.

Dr. Blachar, President of the IMA, said that though the clinic currently only provides primary health care, it is possible that in the future its activities will be expanded to provide a solution for more complicated health problems as well. He



■ Refugees at the IMA clinic

stated that pharmaceutical companies offer the refugees free medicines that they may collect, with a prescription, from any Super Pharm branch. Dr. Blachar emphasized that the IMA and the Ministry of Health established the clinic as a temporary measure until there is proper legislation regarding the refugees. It is the state's responsibility to take upon itself treatment of refugees and include them in the National Health Insurance Law.

Dr. Michael Dor, the director of the branch of general medicine at the Ministry of Health, called upon additional doctors and nurses to join the clinic by donating one day a month.

Dr. Shai Pintov, a specialist in pediatrics and a volunteering family doctor at the clinic, said that it is incredible to see the level of need that exists in the people reaching the clinic. He gave the example of a man, jailed for four months, and a fugitive of the immigration authorities for two months, who went without medical treatment despite suffering from diabetes and high blood pressure.

Dr. Boaz Lev, Deputy Secretary General of the Ministry of Health, clarified that the clinic maintains its ethical responsibility and medical confidentiality and that no medical information will be leaked to external sources.

## IMA International Activities

» The Canadian Medical Association (CMA) and the Israeli Medical Association (IMA) signed an unprecedented memorandum of understanding in August 2008 to work with each other on matters such as a shortage of physicians, physician health, emergency preparedness, mutual recognition of specialty certificates and medical professionalism. IMA President Yoram Blachar and his CMA counterpart Dr. Robert Ouellet concluded the agreement in Ottawa on the eve of the CMA's annual meeting, held in Montreal, which Dr. Blachar

**“ This agreement will formalize the relationship between the CMA and IMA and allow us to continue to work together constructively in areas of common interest ”**

also attended.

Robert Ritter, one-time executive director of the Canada-Israel Committee and now executive director of the Newfoundland Labrador Medical Association, was among those involved in the initiative. He credits Bill Tholl, past secretary general of the CMA, for actually cultivating the relationship over a number of years.

“This agreement will formalize the relationship between the CMA and IMA and allow us to continue to work together constructively in areas of common interest,” said Dr. Ouellet.

Regarding the shortage of physicians in both Canada and Israel, Dr. Blachar said that the two countries need to work together to establish common policies to improve recruitment techniques. Dr. Blachar said that with the halt in immigration in Israel and in light of the limited number of physicians qualified

in the Jewish state every year,

“we should not erroneously assume that the infusion of professional personnel, which the medical system in Israel enjoyed in the form of 12,000 physicians that immigrated to Israel from the former USSR between 1989 and 1994, will save the health system in the long term.”

» Dr. Moshe Kostiner, a member of the IMA Executive Committee, participated in the caring physicians leadership course which took place at the INSEAD institute in FONTAINEBLEAU near PARIS FRANCE in December 2008.

The course was organized by the WMA and 30 physicians from many countries participated.

Said Kostiner, “It was an intensive but amazing and wonderful course. The learning program was a unique experience. I met charming new colleagues from all over the world. We started the week as strangers and finished it as good friends.”

» At a joint meeting of the Ministry of Health, IMA World Fellowship, headed by Dr. Tzaki Siev-Ner, Bnai Brith and the French Rambam organization a proposal was formulated to bring volunteer physicians from Bnai Brith and Rambam to Israel in emergency times.

Bnai Brith's idea to join the venture initiated by the Ministry of Health, IMA World Fellowship and the Jewish Agency, came about after the 2nd Lebanon War when Bnai Brith raised funds for the north and many members, who are doctors, asked the president of the organization, Alan Schneider how they



■ Dr. Blachar and Adv. Wapner at the Canadian Medical Association

“ From previous experience we have learned that physicians in clinics, as well as hospitals, will be needed ”

could help Israel, especially in emergency times.

Since the meeting Dr. Hanoun, president of Rambam, has had much interest from members of his organization in participating in a preparation course.



■ (left to right) Vicky Vexler, Alan Shneider, Dr. Athlan Herve, Dr. Michel Chilstein, Dr. Daniel Cohen-Solal, Dr. Danny Laor, Dr. Yves Kamami, Dr. Charly Hanoun, Esti Sherbelis, Dr. Tzaki Siev-Ner

» Adv. Malke Borow, manager of the IMA’s Division of Law and Policy, recently traveled to Hamburg to present the Israeli experience of migrating physicians at a workshop held there. The workshop was attended by representatives from WHO, UNESCO and major international experts who presented findings from all over the

world and pledged to continue the cooperation in order to find solutions to the global problem.

» At a WMA task shifting seminar held in Reykjavik, Iceland Israel headed the task shifting workgroup. Dr. Yoram Blachar chaired a roundtable discussion on the topic as a response

“ It is inspiring to see physicians from 18 different countries gathered together gathered for this unique event ”

to the shortage in health professionals. Adv. Leah Wapner presented Israel’s findings to the workgroup.



■ Dr. Yank Coble, USA with Dr. Moshe Kostiner

» The IMA is gearing up to hold two international conferences in the next two months. The first is the 19<sup>th</sup> IMA World Fellowship International Conference. The scientific program includes three major themes “Advance Technologies in Medicine”, “Medical Ethics” and “Health Policy”. Additionally, there will be a rich social program for the participants from 16 countries, focusing on Tel Aviv which is celebrating 100 years.

The second conference is the World Medical Association Council Meeting, also to be held in Tel Aviv. 120 guests from around the globe are expected to attend.



## Letter to the editor of the Lancet from Israel regarding editorial published on January 10th 2009

The Lancet editorial entitled “Violent conflict: protecting the health of civilians” (January 10th 2009), and subsequent articles that focused on the war in Gaza, cannot remain unanswered by the Israeli medical community in general and the Israeli Medical Association (IMA) in particular. Although war operations are conducted by the army, the values concerning humanity and sacredness of human life and the importance of provision of medical treatment to all, concurrent with the Hippocratic Oath, prevail in all walks of life in Israel.

We would like to remind the editor of The Lancet that civilians dwell on both sides of the border of Gaza Strip and their life and wellbeing are equally important. However this is not clear to the Hamas, a terrorist organization that has taken control of Gaza and is committed to the destruction of the State of Israel. Hamas has, for the last eight years, fired thousands of rockets into Southern Israel, targeting and purposely hitting a peaceful civilian population. Hamas unilaterally declared at the end of December 2008 that the cease fire with Israel was over. This declaration was accompanied by firing 60-80 mortar shells and missiles a day towards Israeli homes, causing destruction, death and physically and mentally wounded people. This development left the Israeli government no choice but to stop this unacceptable violence inflicted upon its civilians. There is no country in the world that would be prepared to accept 8 consecutive years of continued missile and rocket attacks on its citizens. Operation “Cast Lead” is therefore a legitimate act that would have been conducted by any government facing the same situation. Nonetheless, the Prime Minister of Israel declared on the first day of the military operation that the Palestinian residents in Gaza are not enemies, but neighbors, and the goal is to return a peaceful existence to the inhabitants bordering the Gaza Strip.

We as health professionals deeply regret that during the clashes in condensed neighborhoods, as Hamas militia fighters operate within civilian populations, the latter are hurt. We regret that Hamas is using homes, schools, ambulances<sup>1</sup> and children<sup>2</sup> as shields and using mosques as warehouses for ammunitions and as spots from which to launch missiles and rockets at Israeli cities. At the same

time, Israel has continued to allow the supply of humanitarian aid of drugs, equipment and food to the Palestinians through the “humanitarian corridor”, even instituting unilateral cease fire blocks in order to let such aid through unimpeded. Israel also offered to admit wounded civilians into Israeli hospitals; however this offer was rejected and Hamas continues to prohibit Palestinian ill and wounded from being evacuated to Israel.

As Israel is a democracy which allows freedom of speech and action, there are continuous activities to monitor the acts of the army by human right movements and by the Israeli Medical Association. In addition, the IMA initiated the idea of erecting a field facility on the border between Israel and Gaza in order that, if the Hamas allowed, the sick and wounded could receive treatment there or be transferred to Israeli hospitals. Dr. Blachar, president of both the IMA and the World Medical Association (WMA), brought this initiative to the Secretary General of the WMA. The Israeli government has given its consent to allow such a facility if it becomes a realistic prospect. Most recently, the Israeli Magen David Adom decided to open a clinic at one of the Crossings from the Gaza Strip and the IMA offered to assist in any way possible by supplying volunteer doctors, as needed. Here, too, Tony Laurance, acting head of the WHO’s office in Gaza and the West Bank, said he doubted Palestinians would be allowed by their leaders to access the clinic, and in fact, almost none have taken advantage of it<sup>3</sup>.

Health professionals in Israel are sensitive to the suffering of the Palestinian civilians in Gaza Strip but at the same time must be, and are, sensitive also to the life and wellbeing of the Israeli population.

› Prof. Elisha Bartov

Vice-President, Israeli Medical Association

- 1 See, e.g., “Hamas tried to hijack ambulances during Gaza war”, The Sydney Morning Herald, January 26, 2009, <http://www.smh.com.au/news/world/hamas-tried-to-hijack-ambulances-during-gaza-war/2009/01/25/1232818246374.html?page=fullpage#contentSwap1>
- 2 See, e.g., <http://www.mfa.gov.il/MFA/Terrorism-+Obstacle+to+Peace/Hamas+war+against+Israel/Hamas+exploitaton+of+civilians+as+human+shields+-+Photographic+evidence.htm>
- 3 “Gazans stay away from Israel clinic”, Online edition Jerusalem Post, Jan. 20, 2009. <http://www.jpost.com>

# Humanitarian Aid

## A neighbor's child

» On Friday afternoon, the 22<sup>nd</sup> of August, five-year old Hassan Shgadi was playing outside with his ten-year old brother. They live in the Palestinian village of Kfar Adja that is adjacent to Jenin. Both were barefoot when a large yellow scorpion (poisonous and deadly) aggressively attacked their feet. Both boys were stung, little Hassan in the big toe of his left foot and his big brother on his ankle. Their anguished cries were heard by their mother and neighbors and they immediately rushed the two brothers to the Jenin Hospital. Anti-serum was administered to both, but Hassan's condition quickly deteriorated to where his lungs began to fail and the physicians feared that they were losing him. Frantic calls were made to the liaison officer on the Israeli side who is responsible for coordinating medical emergencies and getting a patient to an Israeli hospital. Precious time was ticking by and it was after midnight before the child was transferred from a Palestinian to an Israeli ambulance at the Jenin checkpoint manned by Israeli soldiers.

Five-year old Hassan arrived to Emek's PICU (Pediatric Intensive Care Unit) at 3:00 AM, unconscious and near death. It was the Sabbath in Israel, but a normal night for the physicians and nurses on staff in EMC. Hassan's father, Kassam, arrived shortly thereafter. The boy was connected to an advanced life-support ventilator and the medical team began administering critical medications. Dr. Yossi Merzel, the Head of PICU explained, "The child's lungs were inflamed beyond their capacity to function and he was extremely weak. We monitored his

heart that was strong and we were hopeful that we could save him."

Five days later Hassan was taken off his ventilator and was breathing on his own. The first words out of Hassan's mouth were his asking about his big brother and if he was ok. His brother was released from the Jenin Hospital after two days.

Kassam, the father, could not say enough about the EMC medical staff and treatment that he received. He was given a room next to the PICU. I asked him if he had anything to say to the outside world. He answered in broken



■ Hassan Shgadi being treated at Emek Medical Center

Hebrew, "When I stood next to the bed and saw the Jewish hands working to save my son – I understood in that moment that this is the essence of life. We are neighbors and we can live together. Nothing else matters."

My grandson is also five years old. I couldn't help comparing the two as I looked upon the sleeping Hassan. Two little boys, vulnerable and dependant upon the wisdom of the adults around them.

I'm glad that we were able to save our neighbor's child.

### » Excerpts by Larry Rich

Director of Development & International Public Relations, Emek Medical Center

## Iranian father thanks Israel for treating his sick son

» A 13-year-old cancer-stricken Iranian boy arrived at Sheba Medical Center in Israel, in October 2008, for emergency treatment on his brain tumor.

The boy was identified only as Roy, to protect his privacy and hide his identity so that he would not face danger upon his return home, since Iran and several other Middle East countries oppose any type of normalization with Israel.

He initially had a tumor removed in Iran but when his cancer returned he was brought to Israel after treatments in Iran and Turkey failed. According to his father, he had been advised in Teheran that the only place that could save Roy's life would be in Israel.

Israel granted the child, his father and grandmother, special entrance permits into the country.

Prof. Amos Toren, head of Sheba's Pediatric Hemato-Oncology Department, said that the boy's year-old growth was "the most aggressive tumor that exists among brain tumors."

Dr. Gadi Abebe-Campino, who treated Roy at the department, decided that the best option was chemotherapy treatment. After internal bleeding, he administered supporting drugs as well, which greatly eased Roy's suffering and enabled him to return to Iran in a steady state in January 2009.

"There aren't enough words to thank the Jewish nation for the support and love we are receiving here", the boy's father stated in Israel. "A father's love extends beyond borders and religions. The Iranian people hope that in the future there will be diplomatic relations between the two nations and peace in our region. Most of



the Iranian nation does not hate Israel.”

Upon Roy's return home, Dr. Abebe-Campino overcame overwhelming obstacles and succeeded in contacting Roy's physician in Iran, learning that he continues to thrive with his medication.

Sheba CEO Zeev Rotstein said it wasn't the first time Israeli doctors have treated children from adversarial states.

“As far as we are concerned, we are not involved in politics,” Rotstein said. “He is from a country that doesn't really like our existence here, but I think part of our job is to prove to countries like Iran that we are here to help the regular people.”

### Israeli clinic for Gaza civilians closes for lack of patients

» The well-equipped and staffed medical clinic opened by the Israeli government in late January 2009 and operated by Magen David Adom and volunteer physicians was closed down two weeks later due to the arrival of only a minuscule number of Gaza citizens seeking treatment, said the Health Ministry.

The clinic, which was opened at the Erez crossing into Gaza by Israeli Welfare and Social Services Minister, Isaac Herzog, amid sharp international condemnation of the Israel Defense Forces during Operation Cast Lead, offered not only medical specialists but also x-ray facilities, a lab and a pharmacy.

It was meant to treat about 50 patients simultaneously - both wounded Palestinians and those suffering from emotional ailments. Israeli Medical Association president, Dr. Yoram Blachar, made a personal call to physicians to volunteer their services to treat wounded from Gaza round the clock.

Tony Laurance, acting head of the World Health Organization's office in Gaza and the West Bank, mentioned, just

before the opening, that he doubted that Palestinians would be allowed by their leaders to access the clinic.

This seems to have been proven as true, with the insignificant number of patients who took advantage of the free care and state of art facilities.

### Angola: Children return home after surgery in Israel

» Save a Child's Heart (SACH) medical team was in Luanda, Angola, carrying out the first SACH Cardiology Clinic in Angola in September 2008. The medical team comprised of Dr. Lior Sasson, pediatric cardiologist, Dr. Alona Raucher and Simon Fisher, SACH executive director, worked at the Luanda Children's Hospital together with Angolan pediatric cardiologist Dr. Christina Gamboa. Dr. Gamboa has a waiting list of 600 patients from all over Angola (a country with a population of 11 million people) in need of life saving heart surgery, but there is no surgeon in the country to help these children.

The doctors equipped with the state of the art portable echo machine saw approximately 100 patients during three days of intensive work and the fortunate ones will travel to Israel for open heart surgery. This new initiative has been made possible thanks to the Israeli Corporate group, L.R. that has already enabled five patients to travel to Israel for treatment. Two of the children, three year old Dalton Antonio Domingos and one year old Kadija Josefina Baptista returned with the team to Angola having undergone life saving surgery in Israel.

María Teresa Baptista, Kadija Josefina's mother, said that her daughter left Angola with serious heart problems and is now fully recovered.

» **Excerpts by Angola Press Agency (Luanda), 22 September 2008**

### Israeli doctors save life of Iraqi child

» Eight-year-old Iraqi Alla Hassain was on the verge of death until November 2008. That was until she arrived in Israel.

Alla, whose name means “symbol” in Kurdish, traveled a long way before finally arriving at an Israeli hospital. Her trip originated in northern Iraq, on the Turkish border, via Jordan. Alla suffered from several heart defects – the kinds that cause termination of pregnancy when identified in an Israeli fetus. In cases where the defects go undetected, babies are customarily operated on within the first month of their lives.

“She reached a stage where we say she exhausted her life expectancy,” said Dr. Dudi Mishali, who manages the heart defect surgery wing at Sheba Medical



■ Alla Hassain with her mother at Sheba Medical Center

Center. “In other hospitals in the world, doctors apparently thought her lungs were in such state that they couldn't be saved. I said that we had nothing to lose. She wouldn't have survived a month or even two weeks after reaching the hospital without surgery.”

Alla's mother, Todi, is still concerned about her daughter. “When she was born, they immediately saw that something wasn't in order. Her lips and nails were blue, and she didn't breastfeed normally. Doctors at the hospital said she had many heart problems and that she wouldn't sur-

vive beyond her first birthday.”

Alla’s family traveled to various Iraqi hospitals and also sent the child’s medical documentation to Syria, Germany and Italy, yet because of citizenship and financial problems, they had to give up.

Alla’s childhood was spent at home, in bed. “I would take care of her as if she was a baby, and carry her everywhere,” her mother said. “She couldn’t go to school or play outside. She was in bed most of the time. I was scared to shower her, because she would get tired.

“On one of our visits to hospital, they proposed that I sign her up for treatment in Israel. I didn’t agree because I had no faith in anyone and we suffered many disappointments, but Alla’s uncle insisted,” the mother says, adding she did not fear the trip to what is considered an enemy country.

“When I arrived here I was only concerned about Alla, because they said the surgery is complex and she could die. I knew nothing about the people here or about Israel. The big surprise for me was to see the doctors playing with and warmly treating all the children, regardless of who they are. I am very touched and delighted by this.”

Following her surgery, Alla was kept in the intensive care unit for over two months. Many of the systems in her body were collapsing. Dr. Amir Vardi, a senior doctor at the ward, said: “She looked terrible. As skinny as a skeleton...moreover, her skin was bleeding and peeling off...she ended the surgery so sick that she almost died. We asked the surgeon to do something, or else she would die. It was truly a matter of time.”

However, a second surgery improved Alla’s condition. “We saw results within an hour,” Dr. Vardi said. “It was amazing to see her smiling every morning and communicating with the doctors.”

The Iraqi child, who up until recently ate and breathed with the aid of medical equipment, now eats French fries, fruit

and lemon-flavored candy.

Dr. Vardi said that “this is a special experience mostly because of the encounter with a different culture and language. At times I feel that perhaps we are building a bridge to peace here, and once Alla grows up she and her friends will undertake some kind of process.”

Alla is the third Iraqi child operated on at Sheba. However, the non-profit group that brought her to Israel, Shevet Achim, has assisted about 80 other children from Iraq in recent years.

Meanwhile, hospital director Prof. Zeev Rotstein announced that the hospital will foot the bill for Alla’s hospitalization at the rehabilitation ward for a month.

#### › Excerpts by Meital Yasur Beit-Or

Yediot Ahronot Online/Ynetnews.com  
04.12.08

## Israel sends post-trauma specialists to Mumbai

» Dr. Rony Berger and Dr. Marc Gekkopf, two Israeli post-trauma recovery specialists worked in hospitals and schools around Mumbai for over a week, training doctors in post-traumatic stress treatment techniques.

They also worked directly with victims of the coordinated terror attacks that occurred in November 2008 with nearly 300 wounded and over 180 dead, including six Jews from the Nariman Chabad House.

The effort was coordinated on the ground in Mumbai by IsraAid, the NGO cooperative of some 35 Jewish humanitarian and development organizations.

IsraAid founder and coordinator Shahr Zahavi pointed out that Israel, with its extensive experience in recovery from terrorist violence, was a natural choice for providing technical expertise to India.

Berger has previously worked in a

number of other high-profile disaster areas around the world and is currently a board member of the Psychology without Borders organization.

Berger’s work has taken him to post-9/11 New York, villages damaged by the 2004 tsunami, and post-Katrina New Orleans, among other disaster zones.

Berger estimated that as many as 15% of those affected by the attacks, directly or otherwise, would be in need of post-trauma treatment. He also suggested that counseling might be offered to Indian police and firefighters, many of whom were wounded during rescue operations or suffered the death of colleagues.

Berger and Gekkopf partnered with Jaslok Hospital and Research Center’s Trauma Counseling Unit in Mumbai, to train doctors working with survivors of the attacks and with families of victims, focusing on both treatment for the physiological manifestations of post-traumatic stress disorder, and methods of psychological counseling for the families of PTSD sufferers.

In addition, the doctors were dispatched to a number of schools in Mumbai, where they trained teachers on how to impart resiliency to their students and how to provide direct support for victims and their families.

They of course also worked with those who were involved directly in the recent attacks.

#### › Excerpts by Max Socol

Jpost.com, Dec 8, 2008

## Cameroon boy can see again, thanks to Holon ophthalmologists

» Four-year-old named Salin, found in an abandoned sewage canal in Cameroon, had his sight restored by two doctors at the Wolfson Medical



Center in Holon.

The head of the ophthalmology department at the central hospital in Yaounde, Cameroon's capital, contacted Dr. Itamar Yeshurun and Dr. Hagai Avizemer of the Holon hospital and asked for help with the child since there are no suitable medical facilities for such an operation in Cameroon.

Salin was blind in one eye and had only minimal sight in the other because

his corneas had turned opaque. It was decided that the doctors would operate on the blind eye so as not to risk his remaining vision in the other.

In a new technique, the boy's opaque cornea was removed and a new cornea transplanted in its stead. In addition, healthy tissue from the less-damaged eye was transplanted into the severely damaged eye to improve its surface.

Immediately after the surgery, Salin's

vision greatly improved, and he returned home. When Yeshurun later traveled to Cameroon to perform a cataract operation on a baby, he examined Salin and found that the boy was seeing well and functioning as a happy, normal child.

The Israeli ophthalmologists have plans to transplant a cornea on the other eye as well.

› By JUDY SIEGEL-ITZKOVICH

JPost.com, Dec 8, 2008

## Invited Lecturer at IMA WF International Conference, Dr. Hossam Haick – On List of 35 Leading Young Scientists in the World

**D**r. Hossam Haick of the Technion's Faculty of Chemical Engineering and the Russell Berrie Nanotechnology Institute made the list of the world's 35 leading young scientists for 2008 – TR35 – of the prestigious scientific journal MIT's Technology Review.

Dr. Haick, 33, has been included in the list of the world's 35 leading young scientists for his work on artificial noses that can sniff out cancer. "The person blows into the e-nose, which is based on nanometric sensors, and the device detects the type of cancer" explains Dr. Haick. "The diagnosis has a potential to detect the cancer at early stages of the disease, even before the tumor begins to spread. Thus the treatment will be immediate and will kill the disease in its initial stages. In our research, we have already shown that it is possible to distinguish between a healthy person and one with cancer, using miniature sensors" he adds. "The challenge before us now is to distinguish between the disease's stages."

The e-nose has already been tested on 102 subjects at Rambam Medical Center and was able to accurately distinguish between healthy and sick people as well as identifying in which organ the tumor had developed, with a success rate of 92%.

Dr. Haick researched and developed his expertise in electronic noses at the California Institute of Technology (Caltech). He recently won a grant from the European Union (EU) totaling 1.73 million Euros and employs in his

laboratory today 20 researchers and scientists from Israel, Germany, Singapore, China, India and Russia. He completed his doctorate in chemical engineering at the Technion and, after completing his doctorate at Caltech returned to the faculty as a member of the academic staff. Since joining the Technion, he has won more than 15 national and international prizes and awards including: the Bergmann Award, the Israel-France Prize for Outstanding Scientists, the 2008 Hershel Rich Technion Innovation Award and the Horav Chair for Leaders in Science and Technology. An article written recently by Dr. Haick was named one of the most read articles of 2008 by the American Chemistry Society.

The TR35 list is an elite group of 35 young scientists who epitomize the innovative spirit. They were chosen from among more than 300 finalists by a team of expert judges and the journal's editorial staff. "The TR35 list honors young innovators for achievements which have dramatic ramifications on the world as we know it," said Jason Pontin, editor-in-chief and publisher of MIT's Technology Review. "We are celebrating their success and are anxiously looking forward to their future achievements in technology, each one in his field."

Dr. Haick and the rest of the winners on the TR35 for 2008 were honored in the September issue of MIT's Technology Review and announced at the EMTecho8 Conference, which was held at MIT, Cambridge, MA in September 2008.



■ Dr. Hossam Haick, one of the world's leading young scientists



# Medical Achievements

## New at Schneider Children's: HHT Treatment Center

» A new center, the first of its kind in Israel, for the treatment of HHT (Hereditary Hemorrhagic Telangiectasia) opened in September 2008 at Schneider Children's Medical Center under the directorship of Dr. Meir Mei-Zahav. The Center is part of the Pulmonology Institute headed by Dr. Hannah Blau and is one of only 29 centers in the world treating HHT - a genetic disorder which causes arterial blood to flow directly into the veins, creating weakened ballooned vessels that can rupture.

HHT is manifested by repeated bleeding and nosebleeds (usually familial) which can lead to a stroke, hemorrhage in the lungs or respiratory failure in children and adults. The disorder can be a "ticking time bomb" prevalent in about 0.02% of the population. The majority of sufferers do not know that they have the disease and suspicion is usually aroused when bleeding is excessive and when it appears in several generations in the family.

The disease is characterized by abnormally large blood vessels which are connected directly to arteries and veins of various organs in the body. Since symptoms can appear anywhere in the body which is exacerbated by the lack of awareness about the disease and its symptoms, the disease is not always diagnosed.

One of the objectives in establishing and developing an HHT Treatment Center at Schneider is to raise awareness among the general public with the aim of preventing severe

complications that can result from the disease. Because nosebleeds are common among the healthy population, many patients are not diagnosed with the disease in spite of multiple nosebleeds. Frequently, the disease is only diagnosed after a stroke or lung hemorrhage. In addition, family members are not always examined when an adult has the disease. Therefore, consultation is recommended if there are difficult nosebleeds in more than one family member, or if there is a family history of strokes at a young age or if bleeding occurs in the lungs, which is unconnected to any known disease.

The HHT Treatment Center was established at Schneider Children's by Dr. Meir Mei-Zahav, senior physician in the Pulmonology Institute at the hospital together with Dr. Elchanan Bruckheimer, Director of the Catheterization Unit at Schneider, who will be lecturing at the IMA World Fellowship International Conference, and Dr. Eitan Yaniv, Director of the Nose and Sinuses Clinic at Rabin Medical Center. Dr. Meir Mei-Zahav specialized in the treatment of the disease at the Hospital for Sick Children in Canada, where he had established a special unit for the treatment of children with this disease with the cooperation of the adult treatment center in Toronto and other centers in the world. The center in Israel was established through the assistance of Dr. Robert White of Yale University, renowned specialist in the treatment of HHT, who aspires to establish other specialized centers for treatment of the disease around the world.

» Excerpts from <http://www.schneider.org.il/Eng/Index.asp?CategoryID=119&ArticleID=570>

## Groundbreaking cardiac procedure at Shaare Zedek Medical Center

» Jerusalem's Shaare Zedek Medical Center recently performed a groundbreaking cardiac procedure that makes it the first hospital in Israel to successfully replace heart valves using cardiac catheterization. The procedure performed under the direction of Dr. Yaron Almagor, Director of Interventional Cardiology at Shaare Zedek, involves threading artificial implants through an artery and into the heart. Such a procedure is being lauded across the medical community for allowing patients to avoid open-heart surgeries which can bring heightened risk for complications and are often defined by long recovery periods.

The procedure is being performed at only a few other hospitals around the world. The hospital's cardiology teams studied the technique with Greek and French cardiologists. It is defined as minimally invasive, requiring only small incisions as opposed to open heart surgery which involves sawing open the chest and considerable loss of blood.

The medical teams attach the patient to a heart-lung machine during the procedure and blood is drained from the heart. Through the femoral artery accessed via the patient's groin area, a balloon catheter is threaded to the heart where a stent is placed in the area of the affected valve. At this point an artificial valve is gently maneuvered into place and the balloon inflated to allow the valve to be properly implanted. Post-procedure hospitalization can be as short as two days. The overall recovery period is expected to last a few



days, considerably shorter than is the case with open-chest surgery.

Patients undergoing the procedure are placed under shallow general anesthesia. At present the procedure is carried out on patients who suffer from a condition called aortic stenosis where the aortic valves is narrow and prevent blood from flowing freely.

While experts caution that this technique is not an option for all cardiac patients, the numerous benefits it represents makes it an important development. "The application of this complex procedure is evidence of how Shaare Zedek is able to apply the latest and most innovative techniques to benefit our patient population," said Professor Jonathan Halevy, Director General of Shaare Zedek, who is also a member of the Scientific Committee of the IMA WF International Conference. "This offers a great deal of potential to benefit the local medical scene and further define Israel as a leading medical player."

### Personality affects dementia risk, Sheba researcher finds

Are you the type of guy who sulks in the office after you've had a blowout with your wife, or are you the one who easily sloughs off family troubles and lets the good times roll? According to Israeli researchers, your reaction to conflict in both the work and home environment - with your spouse, peers and superior at work - may determine your risk for dementia.

The Israeli research was recently revealed at the International Conference on Alzheimer's Disease in Chicago, and joined a number of insightful research projects on dementia and Alzheimer's around the world.

Any new studies, like this recent Israeli one, which can provide decades-

long observational studies, help researchers better understand the deterioration of the human mind over time. Symptoms of dementia manifest most regularly in Alzheimer's, the sixth leading cause of death in the US.

Dr. Ramit Ravona - Springer MD, head of the Memory Clinic, Sheba Medical Center, Israel told ISRAEL21c: "The study demonstrates that people who tend to ruminate over problems encountered in work or family settings during midlife are more protected from dementia at old age. This was surprising to us," she notes, "as rumination is a cognitive style characteristic of neurotic individuals."

Neuroticism, Dr. Ravona-Springer points out, has been demonstrated to be a risk factor for dementia. Data from her study included information from a 1963 study on heart disease in Israeli men. The risk for dementia was assessed three decades later in 1,890 men, who were among 2,604 survivors from the original group.

The mean age of the men at the time of the final assessment was 82. Of them, 308 were clinically diagnosed with dementia, 175 were found to have mild cognitive impairment, while 1,407 appeared to suffer no cognitive impairment.

To assess a person's degree of rumination, the researchers asked: "When your wife/peer/superior hurts you, do you forget this or do you tend to keep worrying and thinking about it?"

"Our hypothesis," says Ravona-Springer, "is that there may be several types of rumination, some of which are associated with more effective problem solving. In these cases rumination may be a form of mental activity. Mental activity in midlife has already been demonstrated to be protective from dementia."

She also points out that the study was based on associative data and

does not point to causality. "Further studies should assess the association between types of rumination, resulting stress, depression and efficiency in problem solving and eventually with dementia," she notes.

Partners in the study included Michal Schnaider-Beeri from Mount Sinai School of Medicine in New York, and Prof. Uri Goldbourt from Tel Aviv University.

Excerpts by Karin Kloosterman, Israel21c.com, September 4, 2008

### Raising hope for treating renal cancer in kids

He's 42 and just at the beginning of his career, but with a new prestigious cancer research award under his belt, the world is expecting more than great things from Dr. Benjamin Dekel. A senior physician and scientific researcher at the Department of Pediatrics and the Pediatric Nephrology Unit at Sheba Medical Center, Dekel has also recently founded Israel's Pediatric Stem Cell Research Institute, a first in the world.

Although renal cancer in children and infants is quite rare, about one in every 100,000, learning how to treat it using stem cells from the kidney itself, has broad applications for treating adults as well, stated Dekel, who has made the area a focus for his research.



Global leader in embryonic kidney stem cell manipulation, Dr. Benjamin Dekel

Reaching epidemic proportions, renal diseases in general are affecting “every other adult person” these days, with diabetes and hypertension as the main culprits.

“Children are a small minority of people suffering from chronic renal failure,” he says. “I see children with renal malformation. If both kidneys are dysplastic [growing abnormally] both kidneys could fail. We are trying to find stem cells that can halt this process. If we halt renal failure, it would be the first time in the world.”

Not quite there yet, Dekel says, “Because our emphasis is not on using bone marrow stem cells. We want to use stem cells in the kidney itself. The question is what are the kidney stem cells? The whole scientific community is trying to locate them.”

As a pediatrician he treats children in Israel, as well as Palestinian kids from Gaza who suffer disproportionate rates of renal problems due to inbreeding: “When a renal stem cell doesn’t differentiate well into an adult cell, one gets renal deformation,” says the global leader in both adult and embryonic kidney stem cell manipulation.

Dekel’s current research concentrates on isolation and characterization of cancer stem cells from renal tumors for targeted therapy of these cells and eradication of the tumors.

To recognize the achievements in his work, the Israel Cancer Research Fund (ICRF) -- based in North America -- has just given Dekel its highest award, the Clinical Research Career Development Award, for his devotion to supporting cancer research.

Numerous other bodies have also recognized his contributions to science, including the “Outstanding Scientific Presentation” and “Outstanding Young Scientist” awards from the European Renal Association, the Israel Pediatric Association, the American Pediatric



■ The team leading the genetic engineering study at Carmel Medical Center

Academic Society and more.

When completing doctoral studies, Dekel was one of the first in the world to isolate adult kidney stem cells. His studies have appeared in journals such as *Nature Medicine*, and have paved the way for the “growing kidneys” concept, where functional miniature human and pig kidneys were developed in situ. Some hope such research could lead one day to replacement therapy in patients with end-stage kidney disease.

» Excerpts by Karin Kloosterman

October 15, 2008

### EMC receives prestigious honor of the Joint Commission International

» Emek Medical Center (EMC) became the first and only hospital in Israel to receive the prestigious honor of the Joint Commission International (JCI) accreditation for standards in healthcare quality and safety. This unique accreditation is endorsed by the World Health Organization (WHO) because it demonstrates to the international community that the Emek Medical Center has voluntarily sought an independent review of its commitment to patient safety and quality of care and has met the highest standards that con-

tribute to good patient outcomes.

JCI is part of Joint Commission Resources (JCR), an affiliate of the U.S.-based Joint Commission. The Joint Commission accredits over 90% of the hospitals in the United States.

EMC has successfully met the 300 standards and 1,200 measurable elements as set forth by JCI, whose surveyors closely examined the medical center. The JCI team gauged the quality of care provided by EMC by tracing the journeys of patients as they moved through the institution and examined how various departments worked together to provide the care needed.

Today there are approximately 140 JCI-accredited hospitals in 26 countries.

### Tissue engineering will prevent bypass surgeries

» A new Israeli technology makes use of genetic engineering to allow the body to produce new blood vessels that can bypass obstructed arteries. A study conducted at Carmel Medical Center in Haifa suggests that use of tissue engineering will result in an international breakthrough in the field of blood vessel bypasses - a development that may prevent the perfor-



mance of bypass surgeries in situations of obstructed arteries.

An innovative development, the result of an eight-year study conducted at Carmel, offers an innovative and effective method for preventing bypass surgeries.

Leading the study are Prof. Moshe Fligelman, Head of In-Patient Cardiology and Prof. Basil Lewis, Head of Cardiology both from the medical center and President of the Israeli Cardiology Society.

The innovative development signifies an international breakthrough in the field of artery bypasses and aims to solve and eliminate the need for bypass surgeries through the revolutionary method of tissue engineering.

Instead of performing bypass surgery, healthy blood vessel tissue is taken from the patient and engineered by means of an innovative technology in the laboratory. The engineered tissue is then returned to the body at the site of the problem. Within a few weeks, the body produces new blood vessels which bypass the obstructions and create new, healthy pathways.

At the moment the new development is being applied to blood vessels which supply blood to the legs, while in the future the development will be used to create bypasses in the heart area, which will eliminate the need for catheterization and difficult bypass surgeries. Within a short time, the Carmel Medical Center will become the distribution center for the innovative treatment for the entire Middle East, along with additional distribution centers to be developed all over the world.

The method has successfully received all FDA approvals, and the clinical study has already been implemented in several patients in the US. Treatment as part of this study results in high success rates, and the method will soon move on to advanced stages of development

and production throughout the world.

The Governor of Michigan, Jennifer Granholm, who serves on the senior economic team of President Barack Obama and is considered close to him, visited the Carmel Medical Center in order to convince the Israeli researchers to open a research laboratory for the innovative development in her state.

› **By Karin Kloosterman, 21C**

### Away from the blade and back to the game



While doctors' orders for a spinal disc herniation may include bed rest, physiotherapy, and a general anesthetic to alleviate the pain, up to 20-30 percent of all people who suffer from the condition - which can strike with no warning - have no choice but to take a more dangerous surgical route.

However, an Israeli specialist Dr. Stephan Ben-Shoshan, 41, offers another solution: a novel treatment he pioneered, involving injections of low dose steroids via low radiation CT scans, in precise locations to treat the pain, and cause, of most disc herniations.

Ben-Shoshan believes that by using his method some 80% of patients can be spared the uncomfortable and sometimes dangerous operation. He asserts that his treatment out competes the sloppy epidural injections that deliver high doses of steroids to regions in the back and cause unwanted side effects.

Ben-Shoshan's treatment, widely practiced now in France and at private clinics in Israel, gives new hope to those who can't take chances or afford any time off the job.

Within 30 minutes, under local anesthesia, most patients destined for surgery return to completely normal activity after one procedure. Ben-Shoshan

introduces his needle under a CT scan into the spinal canal and very accurately sees all the anatomical elements around the disc, presenting no risk to the patient.

Already recognized in this area in Israel and France, Ben-Shoshan will be traveling to America later this year to introduce radiologists to the benefits of his CT-guided injection techniques. His procedure, which he hopes to be teaching to specialists in the US, and available as part of the health basket of services around the world, could become standard practice - especially among sports doctors who can't play with time.

The new procedure is not meant to replace the job of surgeons but goes one step before the surgery, after the patient has rested and tried physiotherapy and it doesn't work. If, after one treatment, the problem isn't corrected, Ben-Shoshan will usually diagnose that the problem is mechanical, and may recommend surgery.

Ben-Shoshan a graduate of the University of Paris, worked at the Bichat Hospital in Paris. A specialist in radiology of the skeleton, spinal chord, joints and muscles, Ben-Shoshan has experience performing hundreds of CT-guided pain treatments.

A new immigrant to Israel for four years now, Ben-Shoshan has high hopes that his technique will become standard practice: "Ultimately, I would like to train radiologists, sports medical doctors and orthopedic surgeons in the United States," he says.

› **Excerpts by Karin Kloosterman, 21C**



# A script for Tarantino at Sheba Rehabilitation Hospital

**H**e sits outside the rehab center at the cafeteria. It's almost midnight and a tricolor cat is sitting on the table in front of him. She is not afraid of the smoking cigarette. His hair is covered by a layer of gel. A little curl of hair is dropping on his forehead. This look earned him the nickname Elvis by the other patients at the center.

She must be a female cat, I recall from my first year molecular biology classes. It's now my fifth year in med school. My friends have already started their school year. They visit, not as often as they did two months ago after my bike accident. I am sitting in a wheel chair, waiting for another day to pass at the rehab. Tomorrow is another day of physiotherapy, hydrotherapy and other torturing machines.

There are four of them – Samir, Amer AKA Elvis, Big Taher and Small Taher. Four people. Three legs. Big Taher lost both of them. The others, unless some astonishing breakthrough in the field of stem cells occurs, will have to make it with just one leg. They are here for a month now in a project coordinated between the Palestinian leadership in Ramallah, Israel and the Orthopedic Rehabilitation Department at Sheba Medical Center.

**“ There are four of them – Samir, Amer AKA Elvis, Big Taher and Small Taher. Four people. Three legs ”**

Wait. Let's go back. The four of them were wounded a year and a half ago, during the great clashes between the newly elected Hamas and the old Fatah regime. The Hamas ruthlessly strengthened his control over the Gaza Strip by shooting down the soldiers and the officers of the old police forces. Years of oppression and corruption of the Fatah side ended in a deadly revenge. We all saw it over the news. Palestinians killing Palestinians. “What could be better than that?...”

Big Taher shows me on his cell phone the pictures and videos he downloaded from the internet, showing the Hamas squads barging into hospitals, weddings, restaurants and private houses affiliated with the Fatah, shooting down whoever



■ Samir during Physiotherapy

stood in their way. While he plays it, little Taher keeps cursing in Arabic – “Damn the Hamas, may they be sent to hell”. He promises that once he is able to run with his new Otto Bock prosthetic, he will go back and do the same to the man who shot him. “I will shoot him in both legs, 10 bullets, like he did to me. So he will have to go through the same pain that I've gone through in the past year and a half”. “Another sign of hope for the Middle east...” I think to myself.

This undergoing, unique joint project is meant to rehabilitate the Palestinian Fatah police officers, whose leg (or legs) were cut off by the Hamas militants in Gaza. During their stay at the Sheba Orthopedic Rehabilitation Center their prosthetics will be tailored and they will be taught to walk again. The project is funded by the Palestinian government sitting in Ramallah.

Little Taher is 21 years old. He was only 19 when he was shot. He was looking for some action, so he joined the police. He wasn't even fully trained. That afternoon he was curious to see the outside world after being locked up for days in his house. The Hamas had just declared a cease fire. He thought it would be safe to walk the streets so he joined his older friends from the Fatah police force. When they arrived at

the police station, the Hamas militants were waiting for them inside. They didn't care he was just small fry. They shot all of them. He was rushed to the Sheefa hospital in Gaza. A few days later, under a special agreement, he was moved to the Tel-Aviv Medical Center (Ichilov) in an attempt to save his legs. One of them was saved.

He is a curious boy. He presents himself in a polite way to every visitor I have, and tries to learn Hebrew while he is here. Little Taher already knew what a shot wound feels like. When he was young he heard gun shots on a nearby street. His curiosity then turned against him. He went there and got shot in his leg by IDF soldiers who were aiming at Hamas militants. He lost a testicle. "This sounds like a Tarantino movie", I told him. "Shoo hada Tarantino??.. – who is Tarantino?" he asks smiling.

Two months, three surgeries and sixty shots of Clexane I am still at the rehab center. Drowning in self pity, I sat in my room one Friday night, connected to IV antibiotics. All the other patients went home for the weekend. All but the four Palestinians and one old-new immigrant from Georgia. She and the four of them have one thing in common, none speak Hebrew. The old lady is in love with Elvis. "He reminds her of her son". Aside from that, he is the only one willing to share his cigarettes with her.

That Friday Taher seems absent. "What's wrong?" I ask him. It's a Muslim holiday today, Id El-Adha, and he misses his family. It's been a year and a half since he last saw his mother. What's my suffering compared to his? How can one go through such a painful process without the support of his family?

Don't mistake me to be a "Leftist pseudo liberal". I am not. I've spent almost five years in the army, most of them as

**“ I’ve spent almost five years in the army, most of them as a combat officer. I’ve seen pretty much everything there is to see. Not a Tree Hugger I am. Still, the sight of Small Taher broke my heart that Friday night ”**

a combat officer. I've seen pretty much everything there is to see. Not a Tree Hugger I am. Still, the sight of Small Taher broke my heart that Friday night.

Some of the patients in the ward are not happy with the situation. A microcosm of Israeli society (with a higher rate of diabetes of course) - "Why are we treating them at all???"... "They are not different from the terrorists". My best friend at the rehab center is there after being hurt in a terror attack in Jerusalem. A Palestinian driving a BMW collided into a group



■ IKEA. Small Taher on the left, me next to him.

of IDF soldiers and citizens standing on the sidewalk. A young girl, my age, was wounded the most severely. She doesn't want to be in the same room with them. She leaves every time the four of them roll in into the room.

"Should I hate everyone who drives a Toyota???" I tease her. "Not everyone who speaks Arabic is responsible for your pain". She grew up in a religious right winged environment. I try to avoid arguing with her or with the others who think the same.

A week before I was due to leave the Rehab center, a friend asked me if I care to join him for a few hours to go to IKEA (of all places!). "I sure can use the break from the hospital", I thought. "Let's take Small Taher with us", my friend adds. "No, Dr. Siev-Ner will kill me if he finds out". But I am easily otherwise convinced.

So there we are – A visiting medical student from Brazil, IKEA friend, Small Taher and me. As we drive through the wide highway with the large illuminated signs, I look at fascinated Taher. I am afraid that the security guard at IKEA will ask for his ID, but reassured when thinking that the sight – one guy with a left leg prosthetic, one fighting with his crutches, one from Brazil and another crazy guy leading the strange band – will draw his attention from little Taher suspicious look. The surreal experience proceeds when Taher wanders between the IKEA sofas, which shamefully I can call by their Swedish names. To end this evening we took Taher to watch Tel-Aviv from above from the Tel-Aviv University hill.

On the way back to the hospital I can't but think that the impression that this short trip had left on little Taher is stronger than any tank or attack helicopter. Taher's generation grew up closed within the borders of the Palestinian Authority. From the Gaza Strip you can only see the plain lands of the Western

Negev. Their parents and grandparents worked in Israel and were more familiar with the Israeli society. A strong army can be impressive and even deterring but it is still an army, whose goal it is to wage wars, and may be defeated. Maybe if the young Palestinians will get the chance to see what we have achieved here in Israel – our universities, hospitals, roads, buildings, etc. - they will finally realize that we are here to stay.

Cynics on both sides claim that the hospital and the Israeli government are not treating the amputated Palestinians out of good will, but for financial and publicity reasons. When it comes to medical care, this doesn't matter. In my opinion, the most important thing is that people in need are being treated.

At a time of cynicism and mistrust as we are experiencing today, the "Prosthetics Project" at Sheba Hospital gives back the young Palestinians the chance for a decent life. By doing that it proves once again that medicine could be the only way to bridge differences.

Will Small Taher and his friend serve as "good ambassadors" of Israel once they return to their society? It's difficult to answer that question. He promises that he will.

› **By Sella Brosh**

Head of IMA World Fellowship's Medical Student Network  
Tel Aviv University Medical Student Association

## The World Fellowship Connecting People

### The Importance of the IMA World Fellowship to Me

› Dr. Esther-Lee Marcus

I am a geriatric physician on the staff of Herzog Hospital in Jerusalem. I was invited to attend a geriatric conference in Copenhagen, Denmark. Since I participated in the last conference of the IMA World Fellowship, I was aware of its importance and of its role in helping Israeli physicians make contact with colleagues worldwide.

Before departing for Copenhagen, I was in email contact with Esti Sherbelis. She was very helpful in giving me the name and email address of Professor Henri Goldstein of Copenhagen. I then emailed him, and he extended a very warm invitation to contact him when I arrived at the conference.

He and his wife, Dr. Vivian Goldstein, invited my colleague and me for a Shabbat meal and we spent close to three hours discussing a wide range of issues from a comparison of our mutual health systems with an emphasis on medical ethics to Denmark's Jewish community and its connection with Israel.

I learned a great deal at the conference, but the warm reception by the Goldstein family made my stay in Copenhagen special and memorable. I strongly recommend that any Israeli physician planning to go abroad, whether for a professional conference or for a holiday be in touch with the IMAWF.

### Warm Welcome in Berlin for The Israeli Society for Forensic Psychiatry

› Dr. Jacob Margolin  
and Dr. Moshe Klian

In September 2008, 30 Israeli psychiatrists participated in a conference of the Israeli Society for Forensic Psychiatry in Berlin. The conference consisted of lectures given by both Israeli and German experts in the field, lively discussions as well as tours of psychiatric institutions.

The social aspect of the conference was dedicated to Jewish heritage in Berlin. The participants were hosted for a lovely Shabbat meal, prepared especially for us, by the Jewish community of Berlin. This touching event, attended by Jewish German doctors as well, was organized and presided over so beautifully by Ms. Sahawa Yarom, the IMA World Fellowship representative in Berlin. The ceremony included a Shabbat service, by the community's Rabbi and guest lectures.

# Jewish Renaissance Foundation & IMA World Fellowship Join Forces for Humanitarian Missions

A Memorandum of Understanding was entered into by the Jewish Renaissance Foundation (JRF), located in, NJ, USA and the IMA World Fellowship (WF), to achieve access to healthcare and bridge the health divide, with a special focus on underdeveloped countries throughout the world. The IMA WF will work with the JRF by providing physicians from all the IMA WF chapters for humanitarian missions.

This is an extension of the JRF program, Operation Lifeline International (OLI) that provides health care for underdeveloped nations abroad, working in tandem with international organizations and stakeholders indigenous to targeted nations. It is a collaborative approach targeting comprehensive care, treatment and education to our world's most hunger, diseased and poverty stricken nations.

As positive proof of the working relationship and need for these missions, volunteer physicians will bear their own expenses. In some missions the local governments may help defray living expenses and rescue missions may be funded by the UN.

Dr. Alan Goldsmith, President of the JRF, was named Goodwill Ambassador to IIMSAM, a permanent observer mission to the United Nations, Economic and Social Counsel. He has also been named Senior

Advisor to the Intergovernmental Institution for the Use of Micro-Algae Spirulina against Nutrition. The OLI Program International Spirulina Field Program, a comprehensive program of education, preventative and primary care for persons with infectious diseases, particularly with HIV/AIDS, will target undeveloped nations in the Middle East, Eastern Europe, Africa and Central and South America.

In the past OLI has established medical clinics in the Ukraine and Israel, has completed missions to provide training and technical support for indigenous medical providers in Hungary, Jamaica, Cuba, Dominican Republic, Israel and Puerto Rico.

The Israeli Medical Association, led by Dr. Yoram Blachar, President of the IMA and the World Medical Association, has also initiated and participated in several humanitarian missions in desperate or disaster situations, such as after the Tsunami in Sri Lanka or earthquakes in Turkey and has provided medical aid in Nauru, Kampala and Vanuatu. The IMA has also sent medications, equipment and physicians to help those in need time and again. Dr. Tzaki Siev-Ner, chairman of the IMA WF, has himself participated in numerous humanitarian missions to the Palestinian Territories.



# Chapter Tidbits

» Dr. Claudio Cosman was elected by the Honorable Senate of Argentina to receive the decoration of “Gobernador Enrique Tomás Cresto” of the Argentinean Senate and the Federation of Municipalities of Argentina, the Latin-American Federation of Cities and Counties and the Shalom Club. A ceremony was held at the Honorable Senate of Argentina in August 2008 to mark the occasion.

Dr. Claudio Cosman is a Board member of C.A.A.M.I. – the IMA WF Argentinean Chapter and is a professor of cardiology at Maimonides University, Buenos Aires. He has visited Israel many times and was a fellow in cardiology in Israel.

» In May 2008, we celebrated the inauguration of our new home office in São Paulo.

Another very important event for us was the official institution of the Rio Grande do Sul Section of the Brazilian Chapter of the Israeli Medical Association WF, by its president Dr Abram Topczewski, with the presence of Dr Claudio Lottenberg, president of the Albert Einstein Hospital. The next sub chapters will probably be in Minas Gerais and then in



■ Members of the Brazilian Chapter of the IMA WF, with the president, Dr Abram Topczewski, on the right



■ (left to right): Dr. Cosman, Dr. Sarfatti, Dr. Bumaschny, Mr. Borger, Prof. Korin, Dr. Schlosser, Dr. Drelevich

Rio de Janeiro.

We also held an event at the Albert Einstein Hospital, in September at which Dr Judith Guedalia’s lectured on early detection of cognitive and neuro-emotional disturbances in children.

The next very important event was our Doctor of the Year festivity, and in 2008 Prof Jayme Murahowski, a very renowned pediatrician was elected.

» **Dr. Wanda Reichstein Gonda**  
Brazil

» Dr Claire Walford, London President of the JMA (UK) delivered her Presidential Address. She based this on her work as a consultant in the Accident and Emergency Department at University College London Hospital, and



■ Dr Claire Walford, London President of the JMA (UK) and Prof. David Katz, President of the JMA (UK)

on her experience in voluntary work with disabled and disadvantaged teenagers. Her topic was “Do you want to be in my gang? Gangs, Youth, Violence and Crime – a local and global perspective”.

On 8th December the eighth annual Jakobovits Memorial Lecture in Jewish Medical Ethics, organized jointly with the Institute of Jewish Studies at University College London, was delivered by Prof Charles Sprung, who is Director of the General Intensive Care Unit in the Department of Anaesthesiology and Critical Care Medicine at Hadassah Medical Centre. His topic was “End of Life Decision Making: A Worldwide Perspective”.

Later in December JMA (UK) Clinical Meeting for Junior Doctors took place: the guest speaker was Neil Bradman, talking about his work on demographic aspects of chromosomal patterns in Jewish people. This meeting was organized by Dr Claire Naftalin, who is chairing this group.

Aliza Abeles, joint student chair of JMA (UK) in 2007-8, and a medical student at University College London, was awarded a scholarship for her elective in Australia. In addition to pursuing her medical studies there she has also found time to give a talk about our activi-

ties to the Melbourne branch of the Australian Jewish Medical Federation and to work with them on the development of a parallel medical student group.

› **Prof. David Katz**,  
President JMA UK

» As Italian Jews we often go back to our roots to understand better our present, the environment in which we live and, in the same time, we look at the “promised land”.

So this last autumn AME, the Italian chapter, devoted energy to two important events.

In Roma, in September, we organized an international congress concerning Jewish medicine in Italy with a special focus on the role of the physician – rabbi.

The conference was divided into two sessions, one historical and one ethical, so that we could follow the path traced from long ago to today.

During the Middle Ages, Renaissance, in Ferrara, Padova, Roma... faith and science were used by rabbis, who were also physicians, not only to treat patients but also to give an example of human relations. It was an important

presence in non Jewish society where culture was limited by several obstacles. One of them, language, could be solved by rabbis who translated from Arabic.

On the other hand, it was also an opportunity to go out of the Ghetto, contributing to general welfare on a higher level than the usual one occupied by our coreligionists.

We discussed the here and now, problems of bioethics, subjects regarding beginning and end of life, subjects which Italians discuss a lot in this recent period.

Our objective was to reach a deeper knowledge of these themes in order to work better and to contribute to the national debate with old – modern medical theories.

In the first week end of December, in Parma, the 60th anniversary of Israel gave the opportunity to the Cultural Department of the Union of the Italian Kehillot to organize a workshop entitled “Israel, 60 years of history and a future to build”, concerning the consequences of the birth of this country and the relation between it and Diaspora Jews. Well known Italian, French and Israeli speakers demonstrated how the

consciousness of Jews of their image changed with the creation of the State. Jews living in and out of Israel, in fact, have to search for a new identity.

AME contributed to this event with an afternoon session on the development of medicine in Israel.

I will not write what all of us already know, I just want to report that the descriptions of the Israeli sanitary system, the information given about the relations between our Ministers of Health and about the initiatives of Israeli physicians out of the country, the occasion to compare health services and new technologies in our two nations, gave rise to such lively discussion that the kitchen had to stop us for dinner.

› **Maria Silvera**, AME Italia

» The Israel Medical Association-World Federation USA Chapter (IMA-WF-USA) held its inaugural event in the Maryland-DC area on October 16, 2008, during the Sukkot festival. In cooperation with the Health Professions Affinity Group of the Jewish Federation of Greater Washington, a parlor meeting was graciously hosted by Dr. and Mrs. Leo Rozmaryn in Silver Spring, Maryland, to inform health professionals in the Nation’s Capital of the work of the IMA-WF-USA Chapter. Following a delicious reception held in the Rozmaryn’s Sukkah, Adi Haramati, PhD, Professor of Physiology and Medicine at Georgetown University School of Medicine and Secretary of the IMA-WF-USA Chapter served as host for the evening and introduced USA Chapter President, Abe Berger, MD, who presented to the 40 participants on the Chapter’s mission to promote academic, clinical and professional links with colleagues in Israel and around the globe. The keynote speaker was Steven Kutner, MD, founder and medical director of Jewish Healthcare International, an organiza-



■ (from left to right) Brent Berger, MD, co-chair, Health Professions Affinity Network, The Jewish Federation of Greater Washington, Michael Stern, DDS, co-chair, Health Professions Affinity Network, The Jewish Federation of Greater Washington, Abe Berger, MD, Past President, IMA-WF-USA chapter, Adi Haramati, PhD, Vice President, IMA-WF-USA chapter, Steve Kutner, MD, Medical Director, Jewish Healthcare International, Leo Rozmaryn, MD, host



■ Dr. Claudio Cossman receiving the decoration of “Gobernador Enrique Tomás Cresto”

tion dedicated to improving the quality and access to medical services for at-risk communities.

► **Adi Haramati, PhD**  
Secretary, IMA-WF-USA Chapter

» On November 27th 2008, the French National Academy of Medicine welcomed Israeli representatives in honor of Israel’s 60th anniversary. The event was organized by Prof. Robert HAIAT, President of the AMIF (Association des Médecins Israélites de France). The auditorium was full with all the most important figures of French Medicine and French Jewish community authorities.

The President of the Academy of Medicine, Professor Gentilini and Professor Jacques-Louis Binet welcomed the Israeli representatives of the most important universities and structures for research in Israel : Weizmann Institute and Technion of Haifa, University of Jerusalem and Hadassah.

We have been honored by the brilliant lectures of the Israeli Minister of Health Mr Yacov Ben-Yizri who mentioned all the progress Israel did in the last 50 years in terms of struggle against infectious diseases in the area, helping both Israelis and Palestinians. We learnt about the disappearance of trachoma and malaria and all the improvements concerning pre-natality.

Professor Raphael Walden from Sheba Medical Center, Prof. Ilan Marek from the Technion, Prof. Michel Revel, (Sciences Academy of Israel) and Samuel Kottek (Jerusalem University) showed the developments in Israel that benefited the whole world.

Dr. Tzaki Siev-Ner, chairman of the Israeli Medical Association World Fellowship, discussed the multiple activities of humanitarian medicine developed by Israel for the Third World and all countries in need. He mentioned the need for all doctors in the world to express solidarity, cooperate and spoke of the role of the IMA World Fellowship.

Finally, he invited all the participants to come to Israel, especially during April 22th-26th 2009 to participate in the International Conference of the IMA.

The great success of this meeting was due to Israel’s results in the field of medicine and the links between Israeli and French Medicine.

► **Prof. Bernard Lobel**  
President, IMA WF France

» On the 5th December 2008 at AMIA (Asociacion Mutual Israelita Argentina), in Buenos Aires city,

CAAMI (Capitulo Argentino de la Asociacion Medica de Israel) was formally recognized, after having obtained its juridical legal status by the Jewish community authorities.

From AMIA its president Mr. Guillermo Borger, General Secretary Dr. Julio Schlosser, Treasurer Dr. Bernardo Zugman and the Culture Coordinator Prof. Moshe Korin took part.

CAAMI was represented by his President Prof. Dr. Eduardo Bumashny, Secretary Dr. Salvador Sarfatti, and Dr. Simon Drelevich and Dr. Claudio Cossman.

We explained to all CAAMI our mission and objectives, reported all the year activities and our future projects.

► **Dr. Claudio Cossman, Argentina**

» Congratulations to Dr. Evelyn Van Pinxteren-Nagler who was unanimously elected as the new president of the IMA World Fellowship Dutch Chapter at the beginning of 2009. She is replacing Dr. Robert Levi who served in this position for many years and did a wonderful job in developing the local chapter. We thank Dr. Levi and wish Dr. Van Pinxteren-Nagler the very best of luck.



■ (Left to Right) Dr. Tzaki Siev-Ner, Dr. Yves Kamami, Prof. Raoul Ghozlan, Prof. Robert Haiat, Dr. Tarac, Prof. Bernard Lobel, Dr. Charly Hanoun and Mrs. Hanoun at the French National Academy of Medicine in Paris

## CONNECTING - A New Initiative for Strengthening Relationships among Physicians

Dear Colleague,

We are pleased to announce our “Connecting” project – a new initiative of the Israeli Medical Association World Fellowship (IMA WF) as part of the activities for bringing together physicians who wish to strengthen the bond with Israel and Israeli medicine.

We believe the most significant activity to bring people together is person-to-person contact resulting in a genuine link, commitment and affinity. Although we will begin this venture adjacent to the 19th ISRAELI MEDICAL ASSOCIATION WORLD FELLOWSHIP INTERNATIONAL CONFERENCE, this will be an ongoing project for any of our members who visit Israel in future. Initially the project will offer personal companionship of an Israeli physician to each IMA WF conference participant who so wishes, during his/her stay in Israel. The project will include social and/or professional interaction, a visit to the Israeli colleague’s workplace for a first hand impression of the Israeli health system and other activities, taking into consideration both the guest’s and host’s needs and desires.

We invite you to take part in this unique project, to take the opportunity to meet new colleagues and hope it will help to create more meaningful relationships and develop true partnership and collaboration between physicians in the future.

Please let us know if you’re interested in taking advantage of this wonderful initiative as well as your preferences, and send your full details, including email, field of medicine and interests, to Tziona Greenberg at [tziona@ima.org.il](mailto:tziona@ima.org.il).

Best Wishes

› **Dr. Tzaki Siev-Ner**

Chairman, IMA World Fellowship

› **Dr. Itsik Kreiss**

Head, “Connecting” project, IMA WF



## Personal Connections...

In this section you will have the opportunity to extend personal messages, either for professional or personal purposes. You may wish to find a placement, a place to stay or seek other advice or services from any of our IMA World Fellowship members around the globe or offer yourself as a friendly face to other physicians.

If so, please send your message to [international@ima.org.il](mailto:international@ima.org.il) for our next edition.

## Ima Around The Globe

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