

A word from the chairman

Dear Friends,

I am pleased to present you with another edition of IMA Around the Globe.

As you all understand, during the last few months, we in Israel and many of you across the globe have been engaged in a fight against Covid-19. We have dedicated much of our newsletter to this issue, sharing stories with you about the Israeli Medical Association's 'Corona Zone', designed to provide information on issues and answer questions related to the work of medical staff during this challenging time; position papers on prioritization of care; and the work that the IDF have been involved in during our fight against the Corona virus.

Israel is at the forefront of developing new technology to tackle the current pandemic. A new study at Meir Hospital in Kfar Saba examining breath analysis technology to detect Covid-19, and work by Israeli start up Aura Air together with Sheba Hospital installing an air

purification system in the hospital's surgical department, are just two examples. In addition, you will hear how researchers at the Biological Institute in Ness Ziona have had a breakthrough in developing an antibody to the Corona virus.

As always, you will be able to read about other international events with which the IMA has been involved, such a visit to South Africa to represent the Israeli Medical Association at an Aliya Expo and a visit by the Costa Rican Department of Social Services here in Israel. I hope you will also enjoy the Aliyah interview with Dr. Sophie Larrar, who made Aliyah from Paris with her husband and two children. Sophie will also give you her personal experience of how the current pandemic has affected her. Finally, you will get an update from our medical residents from Panama and hear about their graduation and move to the next part of their journey here in Israel.

I would like to take a moment express my



appreciation and gratitude to healthcare workers around the world, who are on the frontlines battling this pandemic.

We hope that you enjoy this special edition of IMA Around the Globe and I hope that you and your loved ones are all keeping safe and well at this very difficult time.

> **Professor Arnon Afek**

Chairman, IMA World Fellowship

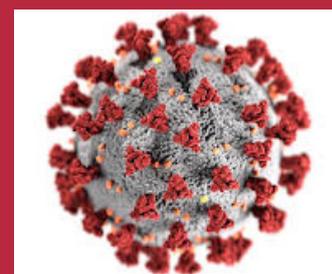
Associate Director General, Sheba Medical Center

Former Director General, Israeli Ministry of Health



COVID-19 SPECIAL ISSUE

This issue is dedicated to all health workers around the world who tirelessly put their own health and safety aside, to save lives.



IMA Domestic News and Activities

IMA TV Campaign

» In appreciation for the tireless work of doctors during the Covid-19 Pandemic, the Israeli Medical Association produced a TV campaign showing our support and appreciation during this difficult time and urging people to stay home in order to protect themselves and others.

Link to video: <https://youtu.be/1xvd-qZixlM>



Passover 2020

» Traditionally a time for both close and extended family to gather in celebration, this year we celebrated Passover in social isolation. For many, this was an extremely upsetting and challenging time. The Israeli Medical Association produced a video that was aired prior to Passover on Israeli TV, urging people to remain at home to protect themselves, their families, and others.

Link to Video: <https://www.youtube.com/watch?v=2c5cMQSDokk>



Medical Achievements

printed by courtesy of ISRAEL21c www.israel21c.org

Israeli doctors take on life-threatening superbugs

» One of the scariest things about being admitted to the hospital is the possibility of catching some dangerous, drug-resistant superbug.

The chances of that happening could become slimmer with a new discovery from Israeli researchers, who found that

aggressive bacteria can be controlled if treated within a specific timeframe.

Like all living organisms, bacteria develop defenses against hostile elements in their environment – in their case, antibiotics.



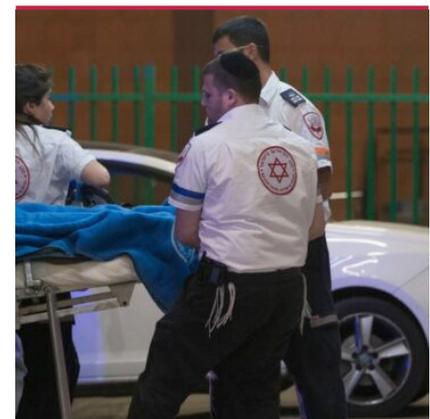
To read the full story, [click here](#).

Bioinformatics study could help prevent rehospitalizations

» Healthcare systems worldwide struggle with the problem of patients who return shortly after discharge from the hospital for the same or a related condition.

Prior studies have examined the recurrent readmission problem by focusing on patients with one chronic

condition, such as congestive heart failure. A new study carried out in Israel sought to predict the risk of readmission among patients with more than one chronic condition.



To read the full story, [click here](#).

Israel's Sheba Medical Center ranks 9th in the world

» Sheba joins Mayo Clinic, Cleveland Clinic and other prestigious institutions at the top of Newsweek's list

Chaim Sheba Medical Center at Tel Hashomer, Ramat Gan, has been ranked by Newsweek magazine as the ninth best among 50 medical centers in 21 countries, moving up a notch from its



2019 ranking as 10th best.

The tertiary referral hospital, affiliated with Tel Aviv University, includes centers for nearly all medical divisions and specialties.

The largest medical center in the Middle East, Sheba has more than 9,100 employees serving about 1.6 million patients every year.

To read the full story, [click here](#).

New Corona virus trial at Sheba hospital in collaboration with Israeli startup Aura Air

» In the midst of the Corona epidemic in April, Israeli start-up Aura Air installed their air purification system in the surgical department of Sheba Hospital, in Tel Hashomer, as part of an experiment to screen for Covid-19.

In laboratory experiments, results showed that 99% of influenza viruses were destroyed, and that there is potential to filter and destroy Covid-19.

This initial pilot in Tel Hashomer



The Chaim Sheba
Medical Center at
Tel HaShomer
ISRAEL'S CITY OF HEALTH

will examine whether this development can help cleanse and disinfect air from severe viruses. Israeli start-up Aura Air is currently in the final stages of receiving funding from the European Union to find solutions for contagions in closed

spaces, including Covid-19, according to the company's reports.

Source: Calcalist 16.4.

Link to full article:

<https://www.calcalist.co.il/internet/articles/0,7340,L-3808453,00.html>

IDF prepares to fight Corona: Medical Corps confirmed the participation of soldiers infected with Covid-19 in various studies.

» The IDF Medical Corps approved the participation of soldiers infected with Covid-19 in 18 medical studies, following requests from hospitals and research institutes. The soldiers' participation in all studies was on a voluntary basis only.

In some studies, the soldiers, with their consent, gave blood samples to examine at what stage the body effectively develops antibodies to the virus and whether a person who has Corona disease can become sick for a second time.

Another study examined utilizing dogs from the IDF's 'Sting' unit to aid

in the diagnosis of the virus. Academic studies have found that dogs possess the ability to identify who is ill based on a certain odor emission. This study examines the possibility of diagnosing Corona carriers by means of the olfactory sense, and later, in the development of an artificial 'intelligence based' nose.

Further sensory-based research is expected to help diagnose patients based on hearing the voice of the infected person before and after infection, and even identify the moment of infection.

The Medical Corps explained that the concentration of infected soldiers in the "Recovery Village" in Ashkelon allows the coordination of a large group of subjects, including the distribution of questionnaires and the examination of activity and behavioral patterns.

Source: Walla News 4.5



Link: <https://news.walla.co.il/item/3355022>

A new study at Meir Hospital examines breath analysis technology to detect Corona

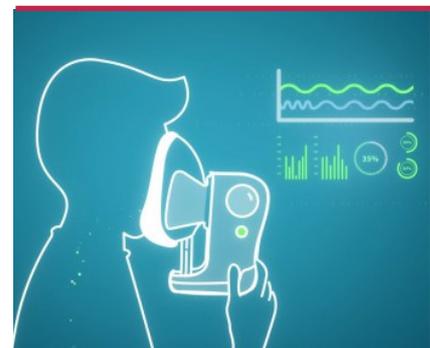
» A new trial at Meir Hospital in Kfar Saba is testing the efficacy of an innovative development for the diagnosis of Covid-19 by breath analysis, technology that is similar to breathalyzers used by police. This is the development of two Israeli companies NEXTGEN Biomed and Scentech. The test was developed to identify biological signs associated with the Covid-19, which will allow a short and simple test to quickly diagnose the virus.

The trial, which began in April, is carried out on Corona patients with varying degrees of illness. The experiment seeks to isolate exhaled gas compounds associated with the Corona virus. The great advantage of this test is its ability to identify even asymptomatic patients and to enable early detection of the virus, allowing for early isolation



and helping to reduce the spread of the epidemic.

Breath analysis technology with digital capabilities will also allow for fast results as compared to the tests currently in use, thus increasing the number of tests performed. In addition, the technological capability of the test will identify the genetic ‘fingerprint’ of the virus, which will allow the discovery of the fingerprint of the next virus within a few weeks, thus helping to cope with future epidemics.



Source: Hayadan 20.4

Link: <https://www.hayadan.org.il/israeli-testing-for-coronavirus-2004203>

Researchers at the Biological Institute have developed an antibody to the Corona virus

» An Israeli breakthrough in the war against Covid-19 was recorded at the Biological Institute in Ness Ziona. Researchers have developed an antibody, which is an immunotherapy drug (rather than a vaccine) that attacks the virus and neutralizes it in the sick patient.

According to the Institute’s researchers, the antibody development

phase is over, and the Institute will now proceed with the patent registration process, and at the next stage, the researchers will contact international companies for the commercial production of the antibody. Experts note that the drug trial phase is expected to take about a year; at this stage, there is only laboratory research and there are many more steps to the full development of the drug. It is worth noting that there are many other companies in the world undergoing research and experimentation with other Corona



antibodies.

Source: Israel Today 4.5.

Link: <https://www.israelhayom.co.il/article/757625>

International Conferences

Israeli Medical Association attends Aliya Expo in South Africa

» On February 23-25, 2020, Adv. Malke Borow, Director of the Division of Law and Policy at the Israeli Medical Association, attended the Jewish Agency’s Aliya, Masa and Higher Education Expo in Johannesburg, South Africa. While there, she lectured on the healthcare system in Israel and

met individually with tens of potential olim who wished to understand more about how the health care system in Israel operates, as well as with medical professionals who wanted to learn about transferring their credentials and opportunities for employment.

During her stay, Adv. Borow

was treated to an evening of South African traditional fare and African entertainment, courtesy of the Jewish Agency.

We are looking forward to welcoming the South African olim in Israel!



International Activities

Danish Association of Senior Physicians

» In early March, the Israeli Medical Association hosted a delegation of physicians from the Danish Association of Senior Physicians.

Dr. Lisbeth Lintz Christensen, Chairman and Dr. Klaus Peder Klausen, Deputy Chair of the Danish Association of Senior Physicians headed the delegation and were joined by fellow Board Members, in addition to key members of the Association of Senior

Hospital Physicians.

As Denmark is currently planning a reform of its healthcare system, with the aim of strengthening community-based healthcare and moving specialist functions from secondary to primary healthcare, the delegation visited Israel in order to obtain an overview of the Israeli healthcare system.

Adv. Malke Borow, Director of the Division of Law and Policy at the

Israeli Medical Association gave a presentation on the Israeli healthcare system, and was joined by Leah Wapner, Secretary General of the Israeli Medical Association, Dr. Shimshon Erdman, Dr. Israel Eilig and Professor Moshe Salai who further elaborated and answered questions from the Danish physicians.



Israeli Medical Association Residency Program for Panama, 2019 Graduation.

» In October 2019, the Israeli Medical Association welcomed the first group of physicians as part of the Panamanian Residency Program. The group immediately embarked upon a course of Hebrew study (Ulpan) under the expert guidance of Ulpan Aviv, at the Israeli Medical Association offices in Ramat Gan, and following three months of intensive study, the residents attained an excellent grasp of basic Hebrew.

On January 31st, the Israeli Medical Association held a graduation ceremony for the group to celebrate this achievement. Present at the graduating ceremony was Her Excellency Adis Urieta Vega, Panamanian Ambassador to Israel, accompanied by Anabelle Vasquez from the SENACYT, who was visiting Israel as part of a Panamanian delegation.

The group have now moved onto the next stage of their journey here in Israel, as they have taken up their residencies



■ (Left to right) Dr. Sergio Silva, Dr. Isaac Sitton, Dr. Mia Levy, Gil Pentzak and Sisi Ohayon (Ulpan Aviv), Dr. Diana Bolivar and Dr. Katherine Matos.

and fellowships in hospitals throughout the country.

The success of this first group of physicians will ensure the success of the Physicians' Exchange program as a whole and we would like to wish each of

them: Dr. Katherine Matos, Dr. Mia Levy, Dr. Diana Bolivar, Dr. Sergio Silva and Dr. Isaac Sitton, the very best of luck.



■ (Left to right) Professor Zion Hagay, Her Excellency Adis Urieta Vega, Dr. Shimshon Erdman, Anabelle Vasquez, Leah Wapner

Delegation from Caja Costarricense de Seguro Social (CCSS), Costa Rica

» In February, the Israeli Medical Association welcomed a delegation from the Costa Rican Department of Social Services, Caja Costarricense de Seguro Social (CCSS). Dr. Román Macaya Hayes, Executive President, headed the delegation, which included key members from the CCSS organization. His Excellency Marco

Vinicio Vargas, Ambassador of Costa Rica to Israel, was also in attendance, along with Dyana Cordero, Director & Trade Commissioner for Costa Rica in Israel.

Following welcome speeches from Professor Zion Hagay and Leah Wapner, Dr. Yossi Noga, Acting Head of the Medical Division, Clalit Healthcare Services presented an overview of the Israeli healthcare system. Dr. Shimshon

Erdman, Director of Relations with Latin America, presented the Israeli Medical Association's Physician's Exchange Program and, at the request of the delegation, Dr. Zvi Bar-Sever, Director of the Institute of Nuclear Medicine at Schneider Children's Hospital, provided insight into the work of the Institute.



■ (left to right) Dr. Román Macaya Hayes, Leah Wapner, Professor Zion Hagay, HE Marco Vinicio Vargas.



■ Costa Rican Delegation meeting with the Israeli Medical Association.



■ (left to right) Adam Levene, HE Marco Vinicio Vargas, Dr. Shimshon Erdman, Dr. Román Macaya Hayes, Dr. Elhanan Greenberg.

INTERVIEW with Sophie Larrar

Full Name: Sophie Larrar
Occupation: Pediatrician
Date of Aliyah: 3rd July 2016

Originally from: Paris, France
Made aliyah with: Husband and 2 children

Personal/Professional Background

Could you tell us a little bit about your education and past work experiences?

I studied at the Faculté de Médecine in Paris, followed by a residency in Pediatrics and then a 2-year fellowship. I then worked for a period of 9 years, part time in Pediatric ER and part time in clinics in Paris.

How did you decide to make Aliyah? What were your reasons for making Aliyah?

We love Israel and enjoyed coming here for regular vacations. With the rise of anti-Semitism, we began to feel that there was no longer a future for our children in France (our oldest son was 14 at the time) and so we made the decision to make Aliyah.

The Aliyah Process

Could you briefly describe the process of making Aliyah?

We were very fortunate in that Professor Marc Mimouni, now Chairman of the Israeli Medical Association's Absorption Committee (for new immigrants entering into the health system), took us under his wing and helped guide us through the entire process, to enable us to begin our new lives here in Israel.

Life in Israel

Where do you live and work in Israel? Can you describe your job?

We live in central Tel Aviv, and I work as a Pediatrician in Dizengoff Children's Medical Health Center. My husband is also a doctor and works as a Psychiatrist.

What do you enjoy most about life in Israel? What are some of the challenges you have faced?

We enjoy everything about Israel, particularly the solidarity and just how positive everybody is. Life in Israel can be difficult at times, but you never hear Israelis complain.

We have faced some challenges regarding the school system in Israel and while the French school system is not perfect, we find the lack of structure and homework in Israeli schools to be somewhat of an issue.

The key to success of course is the language, you must study Hebrew and attain a certain level of proficiency before arriving as this will make life so much easier

Compare working in France to working in Israel. Describe any professional culture shocks you've experienced in Israel.

It was a surprise and a challenge to find that the allocated patient examination time in Israel is just 10 minutes, as in France it is at least 20-30

minutes per patient. In France, you take care of the child from birth and so have a connection with the family and know the child's medical history from day one, whereas in Israel the care of the new baby is initially the responsibility of the Baby Clinics and then the Pediatrician, so that you do not have a global view of the child from birth.

Covid-19

How has the Covid-19 outbreak affected you?

Luckily, I have not been directly affected by it. While there have been some cases in the clinic, that is extended family members of the children I treat, the children themselves have been asymptomatic.



Covid-19

'Corona Zone' - the Israeli Medical Association's online source of information and instructions for doctors and specialists.



With the outbreak of the Corona epidemic and the onset of the crisis in Israel, the Israeli Medical Association launched 'Corona Zone', a section of the website dedicated to Covid-19, which includes extensive and comprehensive information on issues and questions related to the work of medical staff in the shadow of the epidemic.

Among other things, the information includes guidelines and recommendations for the protection of medical staff (including staff in psychiatric hospitals) and the guidelines of scientific organizations and associations in Israel and around the world that have been translated into Hebrew for the convenience of the medical staff. Also included are detailed recommendations from the Israeli Ministry of Health and the World Health Organization for the treatment of Corona patients, including references and links to access the full information.

The Corona Zone also includes information provided by the Israeli Medical Association's Ethics Board on issues and ethical questions that medical teams may encounter while working during the epidemic, such as: Is there a limit to medical duty during pandemics? Other issues addressed by the Ethics Board include recommendations for the duration and cessation of

respiratory treatment in Intensive care, the ethical dilemmas of prioritizing critical patients in exceptional and difficult conditions and the monitoring of Corona patients through the use of photography and recording.

Another vital and important service provided by the Israeli Medical Association is a hotline that allows doctors and specialists to raise difficulties and address various issues during this exceptional period, as well as information on organizations that provide mental health support at no cost to medical personnel who need it.

Information can also be found relating to work and employment during the Corona epidemic, including wage agreements, a salary simulator, assistance for independent physicians, information on Collective Agreements signed by the Israeli Medical Association and information relating to residencies, examinations and licensing.

The Corona Zone is updated regularly with the latest information.

To access the Corona Zone, please click onto the following Link: <https://www.ima.org.il/mainsitenew/imagespage.aspx?ipid=2>

Shaare Zedek Hospital in Jerusalem has established a database of Corona virus in Israel



Shaare Zedek Hospital in Jerusalem has established a huge database - probably the largest in Israel, called 'Bio-Bank', for use by researchers and drug developers in the search for drugs and vaccines in the fight against Covid-19.



The database includes data from hundreds of biological samples taken from patients and can be used for multiple studies. Shaare Zedek Hospital currently cares for the highest number of Corona patients in Israel, and data collected from their patients can help both hospital doctors in developing new

ideas, and external researchers.

The database collects and stores biological samples, their analysis, and demographic, clinical and laboratory information from patients who have contracted the Corona virus and from a control group. As of the publication of the article, some 30 research

groups from Shaare Zedek and from other research institutions have already signed up for permission to use these samples for research purposes.

Source: Doctors Only 27.4. Link: <https://doctorsonly.co.il/2020/04/192009/>

Is there a limit to the medical obligation in pandemic situations?

Published in December 2008.

The Ethics Board Rules and Position Papers Prepared by: Dr. Tami Karni, 2018 Prof Avinoam Reches 2009, 2014 #40



The SARS epidemic that broke in 2002 raised incisive questions regarding the limits of medical responsibility in pandemic situations. The epidemic caused by the Corona virus, spread within a few days from China to five additional countries by means of persons who contracted the illness and flew to other destinations. Within about five months, more than 8,000 people contracted the illness.

The mortality rate from the illness is about 10% on average, but the percentage of medical workers amongst the dead in Singapore and Canada was 45%. Dr. Carlo Urbani, a specialist in infectious diseases who first identified the virus in Hanoi, Vietnam in March 2003, was himself one of the victims of the disease and died from it a month later.

Avian influenza, which was diagnosed in 2006, attacked "only" a few hundred persons, but the mortality rate among those affected reached 70%. If this virus should change its structure and become more contagious to humans, society will have to contend with a catastrophe whose dimensions are very difficult to estimate.

Spanish influenza, which raged in Europe at the beginning of the last century, caused the death of about 50 million persons. Today, when nearly a billion people fly every year all over the world, a violent virus like Spanish influenza is liable to spread globally within a few months. Based on accepted estimates, this is liable to cause the deaths of about 100 million persons, and to harm tens of millions more, who will require hospitalization in critical respiratory condition. No country in the world is prepared for such a catastrophe.

How should a physician act when required to treat patients suffering from an infectious disease under conditions in which the chances of contracting the disease are so real and threatening? How should we act towards a physician who, in order to save his and his family's lives, deserts his post in the hospital? Should he be brought to trial?

Despite the urgent need to do so, no country in the world has solved these conflict of interests. It is clear to everyone that it is impossible to force a physician by legal or disciplinary means to return to work against his will. As has already happened, physicians will prefer to leave their profession rather than being forced to pay with their lives and those of their families for their unbounded devotion and altruism.

A partial solution to this problem lies in renewal of the physicians' social contract. Alongside ratification of the special commitment of the physicians to the general public during a crisis, the public should

recognize the additional, unique risk that physicians voluntarily assume, beyond the normal risk inherent in the profession, and compensate them accordingly. Compensation means the acceptance of special responsibility for medical workers who become ill, and for their families.

Society must nurture physicians and medical workers in general, and encourage in them feelings of responsibility, leadership, and personal example. The free will of every physician in the moment of truth will only come from these values.

Position Paper

- In states of emergency of widespread epidemics and mass disaster, the involvement of all physicians in the country is required.
- Medical knowledge and professional skills reduce the risk of the physician contracting the disease, and therefore he is permitted to give aid to persons suffering from an infectious disease more than anyone else.
- Therefore, the rule is that the physician has an ethical obligation to treat any patient suffering from an infectious disease.
- The obligation to give treatment also applies in the presence of a reasonable increased risk to safety, health or the life of a physician.
- Situations may occur in which the plausible risk to a physician from a patient suffering from an infectious disease is more tangible and exceeds the usual risk of the profession.
- A physician also bears ethical obligation to preserve the health of his family and all the patients he is treating.
- Consequently, when treating a patient suffering from an infectious disease, the physician should strike a balance between the immediate benefit expected for the individual patient and his ability to provide medical treatment in the future to other patients, as well as the value of preserving the health of the physician himself and that of his family.

Prioritizing serious patients during the Corona epidemic



The global Corona epidemic has created a legal social, religious and ethical dilemma from the most severe, harsh and tragic, due to the need to prioritize the treatment of severely ill and respiratory patients. The significance of these tragic decisions is that in the absence of life-saving measures and enough skilled manpower to simultaneously treat all patients in need of life-saving treatments, some particularly critical patients will not receive optimal life-saving treatment. Which is why these are questions of life and death.

The Corona virus infection can be asymptomatic or may vary in severity, ranging from mild flu-like symptoms and varying degrees of respiratory distress, to interstitial pneumonia accompanied by severe hypoxia. Seriously ill patients require hospitalization for treatment which includes the use of respirators. Considering the large number of infections, and in view of the large number of simultaneous ICUs and respirators required over long periods of time, several countries have reached health system failure and have had to establish criteria for prioritizing complex respiratory care. These countries differ in defining the criteria for prioritization.

The issue of setting criteria for prioritizing life-saving shortages and skilled manpower has always been recognized in various forms and for different reasons:

Situations that are defined as Mass Casualty Incidents (MCI), such as road accidents with many injured; natural disasters, such as earthquakes, floods, tornadoes, tsunamis, etc.; wars with many wounded from conventional and unconventional weapons; industrial disasters, such as fires, explosions, toxic material leaks and so on.

And in this case: mass epidemics, such as Plague, Cholera, Influenza, Ebola, AIDS and the like. This is usually a sudden and unpredictable event, in which many people are infected

to varying degrees within a short period of time, and when there is limited ability on the part of the medical system to provide complete solutions to each casualty, both because of the lack of manpower and sufficient means, and the speed of intervention required.

A country can make a decision that medical teams will have the freedom of flexible conduct in emergency situations without public normative requirements; However, the Commission believes that there is a clear priority to a pre-set approach to the country's religious, legal and ethical norms, which will enable uniform and transparent professional medical practice. There is no intention, nor a realistic ability, to dictate the conduct in advance in any situation and on a case-by-case basis, as there are always delicate and complex boundaries that require specific attention. But in most cases, it can and must be conducted in a structured and transparent manner according to clear ethical, legal, social and religious standards. Such conduct is to ensure the best possible equality of rights between patients, as well as to increase public confidence in the medical system, which undoubtedly goes above and beyond for the benefit of patients, sometimes even at their own risk.

It should be emphasized that at the time of publication of this position paper, the State of Israel is not suffering from a scarcity of resources and manpower in order to treat patients in need of intensive care and respiration. Therefore, in the current situation, it is mandatory to provide equal treatment to everyone, regardless of restrictive criteria and as is customary in routine situations. It should be noted that in both the current situation and the lack of resources, preference should not be given or discriminated against in the treatment of a non-corona disease versus a corona patient.



PRESS RELEASE – 14 MAY 2020

European Medical Organisations condemn attacks on healthcare professionals fighting the COVID-19 pandemic

Following the alarming reports of cases of violence, discrimination and exclusion that physicians and other healthcare professionals across Europe have been facing because of the fear they will spread the Coronavirus, European Medical Organisations reaffirm that they stand in complete solidarity with their colleagues who are in the front line of the fight against the COVID-19 pandemic.

European Medical Organisations strongly condemn the stigma that physicians and other healthcare professionals dealing with infected patients are facing on a daily basis, both inside and outside the workplace. This unacceptable behaviour poses a huge risk to the physical and psychological health of physicians and other health professionals. Such traumatizing experiences lead healthcare staff to be ostracized and, in some cases, pressured to move out of their own homes, as well as discriminated against, physically attacked and verbally threatened and abused. Furthermore, in most of these cases, these victims do not disclose their experiences to the appropriate authorities because they have to keep focusing on the fight against the virus and therefore no legal action is being taken.

The on-going pandemic has reaffirmed physicians' central role in ensuring the stability and wellbeing of our societies. On the 12th of March of this year, European Medical Organisations marked [the first ever European Awareness Day on Violence against Doctors and other Health Professionals](#) and committed themselves to act against this disturbing problem. We call on European governments and health authorities to achieve a zero-tolerance policy for violence against healthcare staff, to provide them with a safe working environment and adequate personal protective equipment while they are in the front line, and to deploy all necessary means to protect the physical and psychological integrity of our colleagues during this pandemic and beyond. These healthcare professionals, whom we applaud, deserve admiration, respect and protection. European Medical Organisations also pay tribute to all healthcare professionals who sadly lost their lives in the fight against the COVID-19 pandemic.

For more information, please contact:

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Faces Behind Masks

Faces Behind Masks is a global non-profit initiative, founded by Rafi Albo from Israel, with the mission to provide medical staff members across the globe with sets of personalized stickers of their smiling faces, to be worn on their protective clothing. You can see more about the initiative **here: <https://bit.ly/BehindMasks>**.

During this difficult time, medical teams are kitted out in Personal Protective Equipment (PPE), which can make them feel disconnected from the patients they are treating. At the same time, the patients are being treated by someone with masks covering their faces, making it difficult for them to bond with their physician. Both physicians and patients can feel alienated, which has taken away the personalisation of care. The aim of the project is to add a personal touch back to care during the pandemic.

Rafi Albo, who usually spends a lot of his time on planes and works with Augmented Reality and Printing, was at home on lockdown and saw a post on social media about a few young volunteers in Israel trying to help medical staff put pictures of themselves on their clothing. This was similar to what many did during the Ebola outbreak. Rafi was affected by this idea and happily helped them to further develop it. He was able to recruit 9 digital printing companies who were willing to print A5 size stickers for the medical teams to use. They provided 300,000 stickers, free of charge, to many teams across the country. This helped both the patients and medical teams to feel more connected.

Rafi wanted to take the project further and build a global initiative. He identified that each medical team member would need at least 100-300 face stickers (depending on which department in the hospital they serve in). Rafi recruited XMPIE, a leading personalization web to print software company, and convinced more than 20 individuals to help out. He later managed to recruit DSCOOP – A leading global digital print industry organisation.

The Faces Behind Masks easy to use portal was set up, helping medical teams from anywhere around the world to upload and automatically and securely create personalized smiling face stickers. The portal supports every language, making it

easy to use across the globe. It is currently being communicated to 20,000 digital printers around the world and is now available in Brazil, Chile, Mexico, Colombia, Canada and Israel. This allows any digital printing company to immediately customize the portal with its branding and donate face stickers to medical teams in the local community.

Doctors can access the portal, select where in the world they are and how many stickers they require. After they upload their photo, name and position, the system uploads their image and automatically creates PDF files which are sent to their local donating printer and then delivered to their hospital. If there is no local digital printer available for the location, medical team members will receive a pdf file that they can download and print themselves.

As the initiative grows, the aim is to make it available to all medical teams in all hospitals. Currently Faces Behind Masks has the supply, as many digital printing companies are joining - they just need the demand. We offer you to try it out and show your smiling faces to your patients once again.

“ I wish medical teams in as many countries, all over the world, will get free face stickers - a small thing that makes a BIG difference “

Rafi Albo
Founder & Makes Things Happen Officer
Faces Behind Masks Global Initiative
www.facesbehindmasks.org

Become an Ambassador

Help us to bring the Faces Behind Masks initiative to hospitals in your local country or region.

We are looking for Medical Community Ambassadors who will bring awareness of this initiative to local medical facilities and will help them get our FREE face stickers.

Apply to become an Ambassador
AMBASSADOR@BEHINDMASKS.ORG



Rafi ALBO

Rafi

Founder & Makes Things Happen Officer
Faces Behind Masks Global Initiative



POLAND



MEXICO CITY



ISRAEL



ISRAEL

Chapter Tidbits



CANADA

» Here, the Toronto medical community is responding to the precautions as suggested by the MOH

in Ontario. We have very few pediatric inpatients with COVID at the Hospital for Sick Children.

However the precautions for staff regarding PPE and hand washing as well as social distancing is the same as in all the hospitals and in the community.

There is concern that parents are struggling, as are school aged and high school kids with the demands of social distancing and the isolation and lack of usual structure that school and day care

provides, which they need to deal with at the present time. A number of studies are ongoing regarding the adjustment and mental health needs of the hospital staff as they continue to comply with the dictates of the Covid-19 precautions. Dr. Rose Geist, Canadian (Toronto) Chapter.

**Registration is open.
We look forward to welcoming this
year's participants!**

Fall 2020

**Emergency and Disaster
Preparedness Course in Israel**



American Healthcare Professionals
and Friends for Medicine in Israel



November 7* - 12, 2020 *After Shabbat

APF's 22nd *Emergency & Disaster Preparedness Course in Israel* will take place from November 7 to 12, 2020.

Created in conjunction with Israel's Ministry of Health and the Israel Defense Forces (IDF), this one-of-a-kind program offers healthcare professionals firsthand training from some of the world's foremost experts.

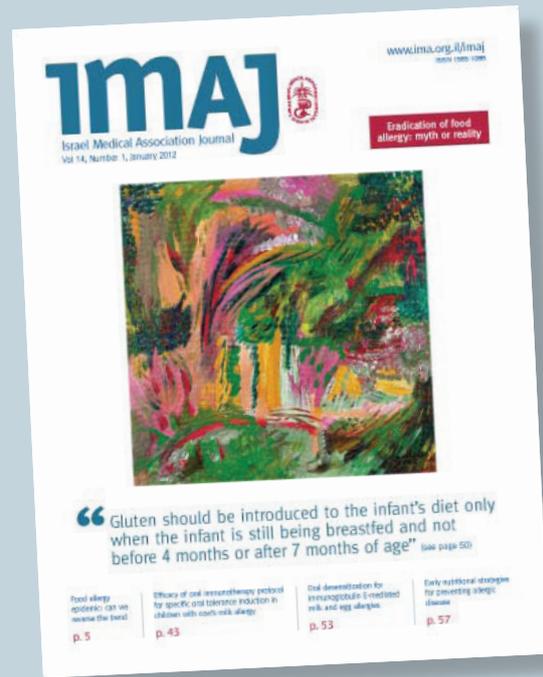
If you have any questions, contact Amir Goldshtein at amir@apfmed.org or call 617-232-5382.

For more information

Israeli Medical Association Journal - IMAJ

We are happy to inform you that the Israeli Medical Association Journal (IMAJ) is available online for all IMA World Fellowship members. IMAJ publishes original articles and reviews, editorials, case reports and other feature columns. Unique is IMAJ's coverage of specific regional issues - infectious and parasitic diseases, effects of the local environment on morbidity and mortality, Jewish genetic diseases, epidemiology of subpopulations - relevant to medical practice in distant countries with similar biopsychosocial problems.

> www.ima.org.il/imaj



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 for our next edition.

Ima Around The Globe

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