

A word from the chairman

We are happy to publish another issue of IMA Around the Globe. As you will see, a lot is going on in the Israeli medical field and in our chapters around the world.

Israeli medicine is highly respected internationally when evaluated by health indicators such as life expectancy, infant mortality, rate of immunization and waiting time for primary care. However, this excellence is achieved despite a series of alarming health system statistics.

There is a constant decrease in the number of hospital beds (from 2.5 beds per 1000 population in 1990 to 1.9 today, where the OECD median is 3.5/1000), a constant rise in hospital occupancy (88% in 1990 to over 96% today) and a constant decrease in hospital stay in days per patient (5.5 days in 1990 to 4 days today, where the OECD median is 6.3 days). Israel spends only 7.7% of its GDP on health care while Britain spends 8.4%, Australia 8.7%, Canada 10.1%, Germany 10.4%, France 11%, and the US over 16%. This overcapacity is at the heart of the crisis Israeli medicine will face in the coming years.

The ratio of physicians per population is constantly decreasing from a peak of 3.7 physicians/1000 population in the 1990's to 3.3/1000 today and to an estimate of less than 3/1000 in the near future. In 2000, 900 new physicians were "infused" into the Israeli medical system each year, which was sufficient to balance the number of retiring physicians; at this time, we are down to less than 600 new physicians

a year. This trend is alarming, as in the next few years more than 2000 physicians are expected to retire.

The gravity of the situation is accentuated as this trend is even steeper when the numbers of new residents in key medical specialties are analyzed. Fewer and fewer young physicians start residencies in General Surgery, Anesthesia, Internal Medicine and Intensive Care. For example, in 2000 we had more than 200 new residents in Inter-

nal Medicine, and today we are down to less than 150.

The Israeli medical schools have boosted their programs, and have increased the number of graduates from around 400 per year to an anticipated 550 per year in the coming 2 years. A fifth medical school will be established in Zfat, but the fruits from this school will be harvested only in 10 years. To conclude, the high performance of the Israeli medical system on one hand and the alarming statistics on the other emphasizes the stressful environment in which we are functioning.

Around the world, Israel continues to attract hostility, especially on university and college campuses. The latest hostile paper published in the July 2, 2010 issue of The Lancet just emphasizes this trend. I call upon you to follow Dr. Willy Lipschutz, the Chairman of our Belgian Chapter, who protested this publication in a letter to the ombudsman of the Lancet (ombudsman@lancet.com).

In view of this hostility, we had the honor to host Sir John Bell, the President of the British Academy of Medical Sciences and Regius Professor of Medicine at Oxford University, who was this year's Lord Henry Cohen Visiting Professorship to Israel. We hope that his impressions from Israel, Israeli medicine and Israeli science, will help to counteract this trend.

Finally, as this is the last bulletin before this year ends, I would like to wish you Shana Tova and Chag Sameach,

› Zeev Feldman

Chairman

IMA World Fellowship



On behalf of the Israeli Medical Association-World Fellowship, we wish to extend to you, your family and your associates, blessings for a happy, healthy and prosperous new year Filled with peace for us all Shana tova umetuka

IMA Domestic News and Activities

Physician Strikes: Interview with Dr. Leonid Eidelman

» A major activity undertaken by the Israeli Medical Association in the last decade was a lengthy arbitration process designed to raise physicians' salaries and implement reforms to their working conditions. Following the physicians' strike in 2000, and in recognition of the serious legal, ethical and financial costs of striking, the IMA agreed in July 2000, on behalf of all publicly employed physicians, to give up the right to strike for ten years in exchange for this mandatory arbitration. The arbitration process only began in 2005, and in 2008 it was decided that doctors would receive a salary increase

of approximately 23.5%; however no real reforms on issues such as manpower and CME were realized.

It is now 10 years since the agreement was made and Dr. Eidelman, President of the IMA, predicts that the subsequent calm is due to come to a crashing halt. Last month in an interview with Haaretz, one of Israel's leading newspapers, Dr. Eidelman discussed the struggle that physicians in Israel are currently facing and highlighted the issue of strikes.

“ Dr. Eidelman warned that the physicians are prepared for organizational steps, including striking”

Dr. Eidelman explained that over the past 10 years physicians have watched as the government has skimmed on work slots, investments in infrastructure and doctors' salaries. It now appears that the healthcare system is in a worse state than it was before the arbitration process began a decade ago. We are currently facing a physician shortage, with the ratio of doctors to the general population decreasing. The difference between what a doctor earns in Israel compared to countries abroad has also increased. Dr. Eidelman reported that physicians are disappointed that the government dragged out the arbitration process for more than eight years, which meant that it was only possible to effect one arbitration agreement. The original plan had been to execute many agreements resulting in several wage



■ Dr. Leonid Eidelman

increases. Furthermore, the physicians had to go to court to pressure the Finance Ministry to uphold the agreement they made. This has resulted in poor relations between the physicians and the government, which is not a good way to start new negotiations.

After the High Holidays the IMA will begin new negotiations with the government and Dr. Eidelman warned that the physicians are prepared for organizational steps, including striking.

IMA holds conference on mental health reform

On 7/7/2010 the IMA held a half day conference attended by over 100 physicians, patients and representatives of the government and the health funds to discuss the proposed mental health reform currently being discussed in the Knesset.

The reform has three major components:

1. Structural reform: The reduction of the number of beds in the psychiatric inpatient facilities and the transfer of patients to ambulatory settings.
2. Insurance reform: Currently, psychiatric care is not included in the health care basket of services provided by the health funds, but rather is under the auspices of the Ministry of Health. Besides making an arbitrary distinction between physical and mental health, this results in the Ministry having to fight with the Treasury each year for an increase (unlike the basket of services which is updated by law) and underfunding for these services.
3. Rehabilitation reform: A law passed in 2000 was meant to provide resources for improving rehabilitation services in the community, but

these improvements were applied insufficiently or unevenly.

The IMA supports the idea of mental health reform, but wishes to ensure that there is proper infrastructure to absorb the patients into the community setting, to allow flexibility in the amount and types of treatment offered and diagnoses covered rather than a predetermined list set by law and to ensure that the most vulnerable populations—children and the elderly, who are not discussed in the new law—are not adversely affected. They also demand that the clinics currently operated by the Ministry not be closed.

The IMA wants to assure serious and comprehensive discussion of the proposed law before changes are made.

Dental Plan to be added to the Health Basket

Recently the Israeli High Court ruled on a petition submitted by the Israeli Medical Association (IMA), finding that the government's decision to finance dental care for children was illegal. The dental program, first proposed by the deputy Health Minister Ya'acov Litzman last year, would make children up to the age of 8 years eligible for free dental treatment including checkups, x-rays, fillings, cleanings and extractions and with certain other procedures costing up to 20 NIS.

The Court ruled that in order for this program to be added to the state-subsidized health care basket of services, approval is required from the Knesset's (Israeli Parliament) Labor, Social Welfare and Health Committee prior to its being put forward in Cabinet. Dr. Leonid Eidelman, president of the IMA, expressed great satisfaction with the Court's decision. The IMA has continuously opposed the government's

“ The IMA has continuously opposed the government’s proposal to take NIS 65 million from the standardized health care basket in order to subsidize the dental plan”

proposal to take NIS 65 million from the standardized health care basket in order to subsidize the dental plan, stating that the new program should not be launched at the expense of other drugs. The IMA welcomed the decision by MP Haim Katz, the Committee chair, who confirmed that the dental program could run on a provisional basis from July 1 to November 30, at which point it will be decided whether the program will be renewed. The IMA supports the continued existence of the program, dependent upon a thorough examination of the committee that the program is well conceived and executed, and supported by adequate funding.

Uruguayan Medical Association

A delegation from the Uruguayan Medical Association (SMU), travelled to Israel last May in order to learn about the Israeli Health System. The group included Dr. Julio Trostchansky (President); Dr. Martín Fraschini (Vice-President), Dr. Martín Rebella (Secretary) and Luis Lazariz Eq (Financial Advisor).

The Uruguayan health system is currently undergoing a transformation, aiming to overcome a series of problems grounded in health care services and socio-economic issues. Public health authorities have driven the reform of the health system (SNIS) and have consistently emphasized this by comparing the Uruguayan experience

with that in place in Israel. Similarities between the two health systems are evident from the decision to concentrate funding through social insurance and reimbursement to providers based on the calculation of risk-adjusted premiums for the covered population. Furthermore, in Uruguay they often hear about the benefits of the Israeli health system as a whole.

The Uruguayan delegation began their trip with a visit to the Israeli Medical Association where they met with several representatives from the board and Scientific Council. They also met with representatives from the Israeli Ministry of Health, Mashav (Israel's agency for International Development Cooperation), and the Uruguayan Embassy.

The Uruguayan professionals were able to hear the views of doctors in Israel and see how the system works in a practical sense through visits to a range of hospitals and primary health clinics across Israel. During their visit to Hadassah Hospital they met with Prof Avi Israeli the head of the Health Policy, Health Care Management and Health Economics Department at the Hebrew University.

At Rambam hospital, in addition to visiting the departments related to their specific specialties, the delegation visited the trauma unit and teaching center for trauma emergency and mass casualty situations and ended with a tour of the emergency and trauma unit. The group learnt about Clalit Health services, the largest health fund in Israel, during their visits to Rabin Medical Center and through a tour of the South where they

“ The Uruguayan professionals were able to hear the views of doctors in Israel and see how the system works”

visited primary health clinics in Bedouin villages ending at Souroka Hospital.

It is believed that this visit was not only beneficial to the Uruguayan Medical Association in teaching them about the Israeli Health Service, but also allowed the Israeli Medical Association to learn from their Uruguayan colleagues and discuss common practices and problems.

Sir John Bell Delivers the Lord Cohen Visiting Professorship Lecture

» Prof Sir John Bell is President of the Academy of Medical Sciences and Regius Professor of Medicine at Oxford University. He trained in medicine in Oxford as a Rhodes Scholar and then at Stanford University where he developed research interests in immunology, genetics and genomics, with a particular focus on susceptibility to autoimmune diseases.

The Lord (Henry) Cohen Visiting Professorship to Israel is a joint annual initiative funded by Hadassah UK/ British Friends of the Hebrew University/ Jewish Medical Association (UK). The Visiting Professor is selected as a leading member of the medical profession from the UK and is taken on a tour of the major medical institutions in Israel, meeting the leading doctors and researchers at those institutions. On return to the UK, a keynote lecture is delivered at the Annual General Meeting of the Jewish Medical Association UK on a specialised subject, which can draw on the Professors experiences and conclusions that arose from his or her visit to Israel.

Sir John Bell's lecture was entitled "Personalised medicine - when will it happen?" He introduced the subject by explaining how the study of human genetics and the genomic mapping of individual patients would enable us to

“ Sir John spoke warmly of his packed visit to all of Israel's major medical institutions”

match therapeutics to pathophysiology in the future. For complex diseases, where many genes are involved, the genetic mapping work is already enabling us to explore novel metabolic pathways and explain the way that different medicines work in different people. Sir John gave several examples of the way that recent medical developments have already had a major impact on health care. Development of anti-psychotic medicine have led to the closure of psychiatric inpatient units, biological therapies have changed the natural history of rheumatoid arthritis; and genetic and molecular studies have enabled us to ensure that only those people whose tumours will respond to Herceptin receive treatment.

Sir John spoke warmly of his packed visit to all of Israel's major medical institutions, where he met with biomedical scientists, clinical academics and the heads of several Universities and Institutes. He visited Hadassah / Hebrew University, Weizmann Institute, Shaarei Zedek Hospital, Ben Gurion University, Sheba Medical Centre and the Technion. Accompanied by his wife and children, Prof Bell also had an opportunity to see historical and cultural sites in Israel, and at the home of British Ambassador he met, *inter alia*, with the newly appointed Director General of the Israeli Ministry of Health and with the President of the Israel Medical Association. Sir John's conclusions were that:

1. Israel has amazing strength in ground breaking research, despite the lack of local funding.
2. The number of centres of excellence was remarkable for such a small nation.

3. The Israeli lead in technological commercialisation in medicine and pharmaceuticals was something which the rest of the world could learn from them.
4. There was a very strong commitment to translational research, from laboratory bench to patient.

Sir John looked to the future for two developments: there needs to be more, and stronger, fellowships and student exchange programmes between Israel and the UK, and based upon the number of centres of medical excellence in Israel today, he believed that it was time to create an “Israel Genomics Institute” which would ensure that the leading groups were encouraged to work more closely together. If Israel could develop such an Institute he felt they would be world leaders in this field, which he feels is the real medicine of the future.

Dr. Leon Cohen Bello visit

» Dr. Leon Cohen Bello, Chairman of the IMA Argentinean Chapter, travelled to Israel to attend the International Conference on Bioethics Education: Contents, Methods, Trends, which was held in Zefat last May. During his time in Israel, Dr. Bello was welcomed by the Israeli Medical Association and met with Dr. Eidelman, President; Dr. Rahamimov, Vice-President; Leah Wapner, Secretary General; Dr. Feldman, IMA World Fellowship Chairman and Dr. Erdman from the IMA WF board.

The IMA was to happy invite Dr. Bello for dinner, where they were able to discuss the work of the Argentinean Chapter as well as medical ethics in both Israel and Argentina. Dr. Bello presented the IMA representatives with a CD from the Argentina Medical Association which contained their Code of Ethics. We hope Dr. Bello enjoyed his time in Israel and will return again.



■ Dr. Eidelman and Dr. Leon Cohen Bello



■ From left to right: Dr. Leon Cohen Bello, Dr. Erdman, Dr. Eidelman, Adv. Wapner, Dr. Rahamimov, Dr. Feldman

“ The IMA was to happy invite to Dr. Bello for dinner, where they were able to discuss the work of the Argentinean Chapter and also medical ethics in both Israel and Argentina”

IMA International Activities



■ Dr. Eidelman with representatives of the Korean Medical Association

Dr. Eidelman's visit to South Korea

» During a trip to South Korea last month, Dr. Eidelman, president of the IMA, met with delegates of both the Korean Medical Association and Korean Hospitals Association. To start the day, Dr. Dong Chun Shin (Chair, Executive Committee of International Relations at the Korean Medical Association) arranged a tour of Yonsei University Severance Hospital. The Severance Hospital of the Yonsei University Health System is the second largest university hospital in South Korea and is the oldest western-style hospital in the country. It was founded in 1885 by Dr. Horace N. Allen, an American missionary doctor.

Severance Hospital manages the Cancer Center, Rehabilitation Hospital,

Cardiovascular Hospital, EYE & ENT Hospital, Child and Adolescent Clinic, Emergency Care Center, Diabetes Center, Allergy Clinic, and Stroke Intensive Care Unit. Dr. Eidelman enjoyed a very informative tour of the hospital's impressive departments and met with many of its physicians along the way.

Dr. Eidelman then had the pleasure of meeting with Dr. Man Ho Kyung, President of the Korean Medical Association (KMA) and Dr. Tai Joon Moon President Emeritus of KMA, Former President of the World Medical Association and KMA and former minister of health and welfare of Korea. They were able to discuss current problems which affect both health systems and medical associations in South Korea and in Israel.

Finally, Dr. Eidelman met with representatives from the Korean Hospitals Association (KHA). The main mission

of the KHA is to guarantee high quality medical care to the public by improving hospital facilities and services. Since it was founded nearly half a century ago on July 2nd, 1959, the KHA has been leading the efforts to upgrade public medical care and further advance the hospital industry.

The key functions of the KHA include such hospital development projects as hospital management surveys and analyses, hospital policy research, prevention and mediation of medical malpractice cases, among others. In addition, the KHA hosts a wide range of on-the-job programs and seminars to train resident doctors and improve the quality of medical services.

Dr. Eidelman had the opportunity to meet and share ideas and experiences with physicians from the other side of the world. He was able to spend time

learning about both associations and gain a greater insight into the Korean Health Care system. Dr. Eidelman stated that: “No level of correspondence can substitute for the experience of visiting another’s country and viewing the other health system from within. As they say, a picture is worth a thousand words.”

Dr. Yoram Blachar presents the Boniuk-Tanzman Lecture at Washington University

» In late April this year Dr. Blachar (Past President of the IMA) was invited to Washington University in St. Louis to give the Boniuk-Tanzman lecture on Jewish Medical Ethics. This lecture is dedicated to the memory of Mr. Hyman Boniuk for his concern for people and Jewish thought, and Dr. Joseph Tanzman for his dedication to the propagation of Jewish ethics in the practice of medicine. It is also held in memory of Rachel Boniuk and Cecelia Tanzman, the women of valor behind these two dedicated men. Dr. Blachar was the 26th Boniuk-Tanzman Lecturer. His three most recent predecessors were:

- Avraham Steinberg, M.D.
Director, Center for Medical Ethics, Hebrew University-Hadassah Medical School
- Fred Rosner, M.D., F.A.C.P.
Former Director of the Department of Medicine, Queens Hospital Center and Professor of Medicine, Mount Sinai School of Medicine
- Michael A. Grodin, M.D.
Professor of Health Law, Bioethics, and Human Rights, Boston University School of Public Health and Professor of Socio-Medical Sciences, Community Medicine and Psychiatry, Boston University School of Medicine

At the Boniuk-Tanzman Lecture, the audience was made up of physicians and faculty members of Washington

University. Dr. Blachar delivered a presentation titled: “Israeli Medicine in the Media: Reality, Politics or Prejudice”. In the course of the presentation, he demonstrated how information is not always presented objectively, especially in the media, and certainly not when Israel is involved. Dr. Blachar highlighted how the media can be ruled by economic interests and sensationalism sells! In addition, there is often a hidden, political agenda which can result in an untenable mix of politics and medicine. Dr. Blachar presented aspects of the medical reality in Israel and showed some of the problems in the way this is presented by the media.

The next day Dr. Blachar met with medical students at Washington University Medical School where he de-

“ he demonstrated how information is not always presented objectively, especially in the media, and certainly not when Israel is involved”

livered a lecture on the World Medical Association titled: “World Medical Association: Mission and Vision for the Future”. The lecture was followed by a question and answer session and a lively discussion.

During his time in St Louis, Dr. Blachar also had the opportunity to have dinner at the Hillel of St. Louis, next to Washington University Campus.

Jewish medical ethics conference

» Dr. Zeev Feldman, IMA-WF chairman, and I spent a wonderful four days at the JMec in Stoos, Switzerland, sponsored in part by the IMA-WF Swiss Chapter.

The conference itself was held in a lovely hotel nestled in the picturesque mountains overlooking Lake Lucerne- or so we were told. Four days of rain and snow kept us inside for a fascinating program but will necessitate a return trip to the area to enjoy the scenery.

The program-focusing on the theme of “The Human Mind in Crisis” – was diverse and informative and included lectures by physicians, psychologists and



■ Dr. Yoram Blachar



■ Social activities at the JMEC conference

rabbis, among others. Individual case studies, Jewish sources and unusual ethical dilemmas added to the interest of the sessions.

Along with the scientific program, we were treated to wonderful Klezmer music, a Swiss night replete with traditional Swiss food and music and the pleasure of meeting health professionals from all over the world.

I'd like to thank our hosts, Rafael Guggenheim and Willy Lipschutz of the Swiss Chapter for their Swiss hospitality. We can't wait for the next conference!

► **Malke Borow**

Prof. Shoenfeld's visit in Argentina

► On 29.6.10 Prof. J. Shoenfeld, the editor of the IMA publications "HAREFUA" and "IMAJ", and head of the Department of Internal Medicine 'B' at Sheba Medical Center, met with members of the Argentinean chapter in Buenos Aires. The purpose of his visit to Buenos Aires was to organize

and attend the conference: LACA - Latin American Congress of Autoimmunity. Prof. Shoenfeld arranged for this to be held in the Argentine capital, with 600 physicians and scientists from around the American continent in attendance.

“ The program-focusing on the theme of “The Human Mind in Crisis” was diverse and informative and included lectures by physicians, psychologists and rabbis”

During his visit, Prof Shoenfeld discussed Israeli relations with the members and, in particular, the work of the “Federico” Foundation program, for which he is a consultant. The “Federico” Foundation program works to bring Latino doctors and scientists to Israel. So far, Prof. Shoenfeld has recruited eight doctors from Mexico, Ecuador, Argentina, Brazil and Colombia. In the near future an additional two doctors from Brazil and Argentina will travel to Israel to work at the Zabłudowicz Center for Autoimmune Diseases at Sheba Medical Center.

Prof. Shoenfeld was granted honorary membership by the Argentinean chapter.



■ Prof. Shoenfeld

Cross Border Medicine

DOCTORS AGAINST RACISM AND ANTI-SEMITISM (DARA)



We have all read with admiration in these pages the work of the Israeli physicians and allied professionals who travelled to Haiti on a humanitarian mission following the devastation of the recent earthquake. From lives saved in state of the art field hospitals, to the work of search and rescue teams, Israel’s contribution has been exemplary.

If one, however, were to believe much of what has been circulating on the Internet and in the blogosphere, the real reason Israel sent its delegation was to secretly steal the organs of Haitians and sell them for profit.

Such statements should come as no surprise. In the past few years, there has been a dramatic, global resurgence of anti-Semitism. What is somewhat surprising is that it frequently emanates from academics, who often disguise their hatred for Jews in the form of irrational, disproportionate, and vocal criticism of Israel.

Unfortunately, this form of anti-Semitism has found its way into medicine and the medical literature.

In response to a highly biased piece of anti-Israel propaganda disguised as medical literature in the Lancet, a group of physicians and dentists in Toronto, Canada formed a group to combat racism and anti-Semitism in medicine and academia in March 2009. Doctors Against Racism and Anti-Semitism (DARA) was born.

Currently numbering over 500 members around the world, DARA is a grassroots organization of health care professionals whose activities are directed at opposing racism and anti-semitism in the medical realm specifically and academic environments generally. It seeks to ensure that medical publications maintain the standards of verifiability expected of scientific literature in avoiding promulgation of subjective articles aimed at vilifying any race, nation or country.

In the past year and a half, since the not-for-profit group was formed, much has been accomplished.

1. In response to an ostensibly anti-Israel article in the Canadian Medical Association Journal, DARA teamed up

with HonestReporting.com and disseminated emails to the membership encouraging them to write letters to the journal. After receiving over 200 letters, the editor of the journal engaged DARA in an hour-long discussion about the biased nature of the articles. The editor kept to his word of publishing a piece highlighting one of Israel’s favourable medical contributions (Save a Child’s Heart) and promised to be more objective in selecting future articles for publication.

2. DARA members have attended anti-Israel medical lectures on University campuses to challenge the one sided view of the speakers. This often led to verbal assaults on the DARA members in attendance. This atmosphere of intimidation has led to high level meetings between DARA and University of Toronto administration to implement mechanisms whereby University events would be free of harassment and intimidation.
3. DARA organized a Royal conference in October 2009 titled “The Medical & Psychological Impact of Terrorism”. Speakers included specialists from Pakistan, Afghanistan, Israel and Canada. The Royal College of Physicians and Surgeons of Canada approved the conference for CME credits.
4. DARA spear-headed and very actively supported a counter-petition to prevent the removal of the WMA president Dr. Yoram Blachar.
5. DARA has been very active in the counter boycott of Israeli physicians.

After it came to DARA’s attention in November 2009 that a CME conference sponsored by the Ontario Medical Association (OMA) was to take place in Dubai (thereby disallowing entry to Israeli physicians), DARA notified the OMA and the sponsorship was cancelled.

In November 2009, Israeli physicians and scientists were disallowed entry into Egypt to participate in a regional Breast Cancer Conference. After discussions with the organizers, assurances were given to DARA that the Israeli delegation would be allowed to par-

“ DARA is a grassroots organization of health care professionals whose activities are directed at opposing racism and anti-semitism in the medical realm”





ticipate. Unfortunately the decision came too late to affect their attendance.

After it came to DARA's attention that an International Anesthesiology conference was to take place in Dubai, DARA contacted American sponsors of the meeting, who subsequently withdrew sponsorship.

DARA was involved in high level discussions with the organizers of the International Society of Thrombosis and Hemostasis in May 2010, after several Israeli physicians were disallowed into the International meeting in Egypt, under threat of boycott and intimidation from the Egyptian Medical Syndicate. Regrettably, DARA was unable to persuade the organizers to cancel the conference, though we are quite certain Egypt will not be a future location for their annual International meeting.

DARA is currently involved in an education campaign targeting International medical societies, encouraging them to hold conferences in locations where entry of conference

delegates is not prohibited on the basis of nationality, race, religion, sexual orientation, and other xenophobic criteria.

DARA is not an Israel advocacy group. Where there is racism and anti-Semitism, DARA, as part of its mandate, will get involved. For example, DARA endorsed the "Save the Doctors" campaign, encouraging due process of law for two Sri Lankan physicians held without trial in Sri Lanka.

DARA continues to monitor the literature, fight boycotts of physicians, and are planning a second conference on the humanitarian contributions of various countries in the medical arena. DARA continues to engage Universities to provide an academic environment that protects freedom of

speech without harassment and intimidation.

DARA strives to promote the message that hate and discrimination have no place in medicine.

“DARA is currently involved in an education campaign targeting International medical societies, encouraging them to hold conferences in locations where entry of conference delegates is not prohibited on the basis of nationality, race, religion, sexual orientation, and other xenophobic criteria”

For information on how to join DARA, please visit:

www.daradocs.org or email daradoctors@gmail.com.



Israeli Arabs and Jews in the medical arena

During last year's Gaza war I blogged for the BMJ and here is a piece of relevance to my point about coexistence of Israeli Arabs and Jews in the medical arena

› by Mark Clarfield

<http://blogs.bmj.com/bmj/2009/01/16/mark-clarfield-on-israeli-arab-patients-in-time-of-war/>

Someone less than familiar with Israel might wonder how during this crisis we handle Israeli Arab patients who walk around the hospital in a bright red kaffieh and use the helicopter pad as a place to pray. After all, we are in the midst of a war just a few miles from the hospital involving an Arab Islamist group bent not only the killing of Jews, but publicly and proudly sworn to the destruction of the Jewish state.

Can one detect any hostility expressed towards our Israeli Arab patients? Do we provide second class service? Is there a problem at all? The simple answer is that both before and during the war, Arab patients were and are treated in our hospital no differently than are their Jewish counterparts. In fact, Soroka Hospital's staff is made up of both Arabs and Jews, and whatever our politics, in our day to day work we actually get along quite well. In fact, all over the country, Israeli Arab doctors operate on Israeli Jewish patients. For their part, Israeli Jewish paramedics look after Israeli Arabs when the Hamas missiles fall in the south, or Hizbullah rockets in the north. And they can and do strike both Israeli Arabs and Jews. Evidently our enemies believe in equal opportunity.

Oddly enough, relations between the two nations here in Israel reminds me of the charged social/political climate when I lived in Quebec in the fractious 1980s. Then (and now) An-

glophones and Francophones, despite sometimes powerful political disagreements, pragmatically worked together. My guess is one can also find an analogy with the relations between Protestants and Catholics in Northern Ireland.

It is true that for the most part, Jewish and Arab folk here in my hospital avoid talking much about politics. But we do talk about our patients and their needs. I will not deny that Israeli society suffers from friction between her nearly 6 million Jews and more than 1 million Arabs as well as displaying both social and economic gaps. But then again other countries are burdened with not dissimilar problems: for example, the United States with whites and blacks; Canada and Australia with their aboriginal populations; or the UK with her Muslim minority. And these countries do not have a war raging on their borders nor missiles lobbed at them from just outside.

That being said, neither within the health service in general nor Israeli hospitals in particular have I ever noticed any problems; furthermore despite the

“ Soroka Hospital's staff is made up of both Arabs and Jews, and whatever our politics, in our day to day work we actually get along quite well”

tensions, this war has not produced any in this domain. My wife, also a doctor, who works in a Jerusalem hospital feels the same. Despite the conflict, Israeli hospitals remain bastions of civic and civil sanity.

When this war started the hospital administration decided to close down several wards (including my own geriatrics department) because they were located in buildings relatively insecure against a missile attack. (A direct hit would of course pulverize any building here.) The neonatal intensive care unit also had to be transferred. The scene was an evocative one indeed: a variegated caravan of mothers and fathers – half of whom were Bedouins, the women with their long flowing robes mixed in with Jewish mothers and fathers dressed in more conventional styles, all pushing their babies in incubators to their new home in the hospital. Five of the neonates were attached to ventilators, not an easy lot to transfer in a hurry. Along with parents were staff, both Arab and Jewish, helping them along.

We all hope that one day, despite this recent round of fighting, peace will break out between Israel and her neighbours, including the Palestinian Arabs of the Gaza Strip. Until then, despite all pressures, our hospital as well as all health institutions in Israel remain an excellent model for future coexistence between Arab and Jew.

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Humanitarian Aid

Haiti rehabilitation mission

» Dr. Tzaki Siev-Ner updates us on his second visit to Haiti and the progress of the rehabilitation mission. The Israeli team returned to Haiti in the months of April and May this year. A rehabilitation center was opened during their stay at Haiti's University and Educational Hospital (HUEH) in Port-au-Prince.

ON A MISSION

Plans for the future....

In the long term, the Israeli team will set up a program of rotating specialists, including a physiatrist, orthopedic surgeon, physiotherapist, O.T., and a prostheses technician, all of whom will travel to Haiti to continue to treat patients and maintain the program.

A major part of the work that the Israeli team plans to focus on is in the development of prostheses. The aim is to make and provide prostheses for the people of Haiti free of charge. The team will also work on gait training and orthopedic rehabilitation in all post traumatic conditions.

To secure sustainability....

In order to ensure that their work is sustained the Israeli team are training the trainers and renovating the center, ensuring that it has all the equipment it needs. They have also made a contract for the next three years stating that the department will continue to run as a rehabilitation center. The Israeli team is working in collaboration with Magen David Adom (MDA), Jewish Distribution Committee (JDC), Local Red Cross and a government run hospital.



Giving a personal example - to shorten the process

■ Dr. Tzaki Siev-Ner



Renovation of the clinic: Equipping the center with good western standards. The Haitian people deserve the same professional standards that we receive.



■ Dr. Lassegue – CEO of HUEH and JDC (Jewish Distribution Committee) delegation



■ Symbolic celebration of the "official beginning" of the project with Dr. Gedeon

Medical Achievements

Pre-empting multiple sclerosis

› printed by courtesy of ISRAEL21c

» www.israel21c.org

A breakthrough finding from Israel may lead to earlier diagnosis, more effective intervention, and perhaps even a cure for the autoimmune disease multiple sclerosis.

“Those who will develop MS will show a different blood signature from those who will not,” says Prof. Anat Achiron, director of the Multiple Sclerosis Center at Sheba Medical Center.

Multiple sclerosis (MS) has devastated the lives of two million people around the world. The disease is more prevalent in cold climates and attacks twice as many women as men. There is currently no cure. Now, research from Israel may pave the way for a diagnosis before symptoms appear and debilitation sets in. Earlier diagnosis of the disease will allow earlier medical intervention - and perhaps even lead to a cure.

Prof. Anat Achiron of Tel Aviv University’s Faculty of Medicine and director of the Multiple Sclerosis Center at Sheba Medical Center has uncovered a new way of detecting MS biomarkers in the blood. Her findings were published in the journal *Neurobiology of Disease* and are expected to pave the way for a diagnosis of MS before symptoms can appear, allowing for earlier treatment.

MS attacks the central nervous system and eventually renders most patients disabled. The National MS Society estimates that there are currently about 400,000 cases in the US. In Israel there are an estimated 5,000 cases, according to the Israel Multiple Sclerosis Society.

» To read the full story, click here

Smoking – a habit not an addiction

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» www.israel21c.org

Smoking is a habit, not an addiction according to new research from Israel. Lighting up – it’s psychosocial, not physiological, according to a new Israeli study.

Everyone has been assuming it’s an addiction for years, but now compelling new research from Israel suggests that smokers find it hard to give up cigarettes because they are a habit, not an addiction. In a new study, Dr. Reuven Dar, of Tel Aviv University, found that the intensity of cravings for cigarettes had more to do with the psychosocial element of smoking than with the physiological effects of nicotine as an addictive chemical.

“These findings might not be popular with advocates of the nicotine addiction theory, because they undermine the physiological role of nicotine and emphasize mind over matter when it comes to smoking,” admits Dar, who published his findings in the *Journal of Abnormal Psychology*.

Today about 1.35 billion people in the world smoke - that’s about 20 percent of the world’s population. In the US alone, one in five Americans dies of smoking related causes, according to the World Health Organization. Worldwide, someone dies from tobacco use every eight seconds - about five million people annually. Cravings among flight attendants

Dar and his colleagues based their conclusions on two landmark studies. In the most recent study, the research-

ers monitored the smoking behavior and craving levels of male and female in-flight attendants working at the Israeli airline El Al.

» To read the full story, click here

Diabetes may double cancer risks in women

› printed by courtesy of ISRAEL21c

» www.israel21c.org

A new Israeli study suggests that women with type 2 diabetes are twice as likely to get cancer, while men with the condition are less likely to get prostate cancer.

Women with type 2 diabetes are at double the risk of getting cancer according to a new study by Israeli researchers.

Led by Dr. Gabriel Chodick and Dr. Varda Shalev of Tel Aviv University’s Department of Epidemiology and Preventive Medicine at the university’s Faculty of Medicine, the study of over 16,000 diabetes finds that while diabetes reduces the rate of prostate cancer in men, women with type 2 diabetes are twice as likely to get female genital and other cancers.

This is not the only study to report such a risk, but it’s one of the largest to confirm these findings, and the first to determine the statistical differences in cancer risks for men and women.

Type 2 diabetes normally occurs in adulthood and is characterized by high blood glucose and an insulin deficiency. It affects more than 10 percent of all women in the US over the age of 20, according to the American Diabetes Association.

» To read the full story, click here

Chapter Tidbits



■ From Australia

Australia: AJMF family conference last Jan 2010

» The conference was our biennial AJMF conference this year held along the South Queensland coast at the Hyatt Coolum resort. 80 delegates from around Australia and 1 from New York and their families, over 230 people in all, gathered at a 5 star resort engaging together in a wonderful holiday atmosphere. An excellent scientific program brought the delegates together in the morning followed by conference lunches social activities and dinners. The conference was fully kosher. As usual a great time was had by all. We look forward to welcoming more of our world fellowship colleagues to future conferences.

A recent debate on whether the iphone is good for medicine or not was held between medical students and physicians recently in Melbourne. A great turnout voted the students clear winners of the debate arguing the affirmative.

Regards, Ronald

Belgium: European Academy of Childhood Disability conference in Brussels

» Welcome reception for the Israeli delegation at the Musée de la Médecine

From 26 to 29 May 2010 the European Academy of Childhood Disability organized its annual meeting in Brussels un-

der the presidency of professor Bernard Dan from Brussels. Several topics were discussed among them new diagnostic and therapeutic tools and the difficulty of evidence based treatment evaluation in childhood disability. The impact of human, cultural and familial influences were also studied. The Israeli contribution at this level was impressive.

The neuropediatric unit of Shaare Zedek Medical Center from H. Ben-Pazi, S. Jaworowski and R.S Shalev in Jerusalem stressed the importance of the recognition of specific cognitive and psychiatric phenotypes in movement disorders in children in order to choose appropriate treatment. Their work was supported by a grant of the IMAWF-Belgium.

V. Kindler from the Israeli Bobath Tutors association showed her results with techniques of improving the ability to integrate visual information in children with cerebral visual impairment. She also discussed together with M. Waismann Nitzan from D. Agmon Preschool from Jerusalem the importance of powered mobility and their consequences.

D. Green from the Sackler school



■ From left to right: Prof. Bernard Dan, M. Lev, Mme ambassador Samash, M. Belder MP, Dr. W. Lipschutz



■ Dr. W. Lipschutz and Dr. Hilla Ben-Pazi



■ M. Belder, European MP addressing the Israeli delegation

of Medicine in Tel Aviv together with L. Holmstrom, F. Ullen, A. Hedberg and A.C. Elliasson from the Karolinska institute in Stockholm were able to show specific improvement of finger movement speed, timing and accuracy with a specially designed laptop game in unilateral cerebral palsy.

S. Capelowitch from European Bobath Tutors Association and T. Ashkenazi from Clalit Child development in Carmiel evaluated together with I. Namonrah from princess basma in Jerusalem and A. Amro from the Al Quds university in Bethlehem the feasibility of a cross-culture research project administered by the Joint Distribution Committee. The Tools for motor function, quality of life, and participation were translated into Arabic and Hebrew. The research is conducted in three groups: Israeli-Jewish, Israeli-Arab and Palestinian-Arab.

D. Elad, E. Eisenstein O. Bar, S. Barak, U. Givon and A. Brezner from the Saffra children Hospital at the Sheba Medical Center in Tel Aviv showed discrepancies between the parent's and health care provider's assessment of functional level of children with cerebral palsy.

After the reception at the city-hall and academic séance at the European Parliament, the Israeli participants had the opportunity to meet Mme Samash, Ambassador of Israel, M. Belder, European MP and member of the European friends of Israel, and Dr. W. Lipschutz president from the Belgian chapter at a welcome lunch organized by the Israel Medical Association World Fellowship.

Italy

Two nice girls, medical students, received grants from AME Italia (the Italian Medical Jewish Association) to participate at the European Jewish Medical Student Conference, in London, last February. They were happy to have the possibility to be in an international meeting where they could meet their colleagues and cope with "jewish medicine".

Just our girls and two dutch students were not english among 40 people. Next time let's do it more international! Send your future!

They came back to Italy with an interesting report and hoping to meet again.

The development of the Israeli model and the international perspectives of collaboration – Lombardy, Israel, and the United States of America.

Milan, March 9, an international conference was organized by the Jewish Community of Milan, AME and Mount Sinai Association involving the top management of Italian, Lombardian, Israeli and American health systems.

The necessity of realizing a global and joint social-health care system to face up to social-health emergency all over the world was the common purpose of the meeting.

The experts showed the importance of the cooperation between the Lombardian, Israeli and American health systems, lead by the Lombardy Region.

In fact, in 1998 started the visits to Israel to understand the health system and import some aspects of the model in Italian reality.

In 2008 the Lombardy Region and the Israel Health Ministry signed an agreement of cooperation.

Considering that in Israel modern structures have been realized to solve



■ Medical students at the European Jewish medical student conference

problems of social emergency reducing the costs of the system, Lombardy and USA are interested in a partnership.

Call centers committed to multiple services of advanced home care assistance, new technologies, expenses, the difficulties that the American managing group is facing with the reform, maxi-emergencies were the core of the conference.

The three countries were very well represented by directors of associations and members of ministries, I just want to remember Yaakov Litzman, Deputy Minister of Health of the State of Israel.

Last, but not least, a tasty buffet introduced the debate.

Dr. Maria Silvera, AME Italia.

Britain: Updates from the Jewish Medical Association UK

» Prof Peter Rubin, newly – elected President of the General Medical Council, visited Israel as Henry Cohen Visiting Professor under our auspices (with added support from Hadassah UK) and saw aspects of Israeli medicine at first hand. He addressed the Annual General Meeting of the Association, reviewing the history of medical education in the UK over the past 150 years, questioning the view that “all has changed for the worse”.

Dr. Nicholas Naftalin, in a Presidential address, told the Association about his experience in reorganisation and re-



■ David Katz with Ron Prof at their annual dinner



■ Alan Naftalin, Dr. Barsoum and David Katz

configuration of health services in order to improve patient care.

Nine elective bursaries were awarded to medical students for electives, many of which were for periods of study in Israel, but also including placements in Mumbai (India) and Australia.

An intensive medical student Israel experience tour took a group from the north (Western Galilee Hospital, Nahariya) to Jerusalem and Tel Aviv, and then south (Yeroucham and Ben Gurion University / Soroka Hospital).

Dr. John Cookson delivered the first Sam Cohen Memorial Lecture, told us about his work in Liaison Psychiatry, following in the traditions of the late Prof Cohen, and about how the subject had developed in recent years.

Dr. Masad Barhoum, Director of the Western Galilee Hospital, and the first Israeli Arab to be appointed to such a position, spoke to a meeting about his experiences running a 650 bed hospital, and his future plans for the Nahariyah medical campus.

Ten Israeli colorectal surgeons visited the UK for a training course, and took part in a JMA meeting addressed by Prof Irving Taylor on the topical subject of how UK doctors will be revalidated for medical practice in the future.

Dr. Shai Dar from Hadassah Hospital, Jerusalem spoke to a meeting about his experiences as part of the Israeli Emergency team that went to Haiti to

participate in disaster relief.

Mr Alec Nacamuli from the Nebi Daniel Foundation spoke to a meeting about the topic “Jews from Arab Countries” and described the recent restoration of synagogues in Egypt.

Prof Howard Cedar from the Hebrew University, Jerusalem, delivered a Joffe Memorial lecture about his current work on silencing of genes, highlighting how epigenetics is likely to influence cancer research in the future.

Medical student activities have included Freshers events in both London and Birmingham, promotion of Tay Sachs screening in Birmingham, a ski vacation, and regular social events.

The first “Student Jewish Medical Association UK conference” took place in London, with participants from the UK, Italy and the Netherlands. Speakers were Jonathan Sacks (medical student from Barts and London) on surrogacy in Jewish Law; Dr. Michael Coren on Jewish aspects of paediatric practice; Rabbi Dr. Akiva Tatz about assessment of risk in Jewish Law; Prof Michael Baum about the anti-scientific nature of “alternative medicine”; and Prof David Katz and Mr Benjamin Pogrud about the inaccurate analogy that is made between Israeli medicine and medicine under the apartheid regime in South Africa.

The tenth Jakobovits Lecture in Jewish Medical Ethics, (11th May), was delivered by Rabbi Prof Michael Broyde. Sadly this lecture took place during the week of shiva for Lady Jakobovits z”l, an outstanding personality in the Jewish world, and a strong supporter and patron of our activities.

The Annual General Meeting (13th July) will be addressed by the Henry Cohen Visiting Professor for 2010, Prof Sir John Bell (Regius Professor of Medicine at Oxford and President of the Academy of Medical Sciences).

In addition Jewish Medical Association (UK) members have continued

to provide expert advice to the Board of Deputies and other Jewish organizations about professional issues on many occasions.

Canada: CIMA Annual Dinner and Lecture

» At the end of January the Canadian branch of the International Federation of the Israel Medical Association (CIMA) held their annual dinner and lecture. Dr. Rose Geist, President of the CIMA, reviewed the activities of the last year.

The IMA supported two scholarships in 2009: The Dr. Wolf Grobin Scholarship was given to Dr. Alice Lam who completed her educational elective in Israel at the Haddassah Hebrew University Medical Centre for Infectious Diseases focusing particularly on women's health issues and Infectious Diseases in Pregnancy. The Dr. Arthur Wolfish Scholarship was awarded to Dr. Dana Newman who attended the Ben-Gurion University Medical School for International Health.

Dr. Geist reported that there is an initiative underway to develop a working relationship with their American Colleagues to create a North American Branch of the International Federation of the Israel Medical Association. A joint meeting is being planned in the 2010. It has been suggested that an Institute for Jewish Medical Ethics be a focus of activity of the two organizations.

Dr. Mark Clarfield, Director of the Ben-Gurion University of the Negev Medical School for International Health in collaboration with Columbia University Medical Center was the key note speaker. Dr. Clarfield provided an excellent overview of geriatric medicine in Israel. He also spoke about the medical school and its innovative programs in international health medical training. Members of his staff distributed packages describing the activities of the medical school.



■ From left to right, Back: Dr. Levi Gegati, Prof. Bumaschny, Mrs. Castro Nessim, Dr. Castro Nessim, Dr. Benyakar. Front: Mrs. Cohen, Dr. Levin, Mrs. Shoenfeld, Prof. Shoenfeld and Dr. Cohen Bello.

Argentina

» To mark the occasion of the Buenos Aires Latin American Congress of Immunology, we met with Prof. Yehuda Shoenfeld, of Tel Aviv University.

Prof. Shoenfeld was received by the Argentine Chapter of the Israeli Medical Association, with whom he joined in a warm dinner last June. Prof. Shoenfeld has been the editor of scientific publications at the IMA (Israeli Medical Association) for 10 years, in addition to being a central reference point for issues related to the auto immunology worldwide. He has published over 2,000 scientific papers and several books on the specialty. He was received together with his wife, by the board of the Argentine Chapter of the IMA, led by its chairman, Dr. Leon Cohen Bello, Secretary, Dr. Ernesto Castro Nessim, Prof. Eduardo Bumaschny of the Advisory Committee, Dr. Ricardo Levi Gegati, and Prof. Elena Levin, active members of

the executive as well as their spouses.

On this occasion Prof Shoenfeld was presented with the title "Honorary Member of the Argentine Chapter of the IMA" for lifetime achievement in research. Visitors and hosts expressed their enthusiasm for the beginning of a relationship that goes beyond academics, to become a true gathering of friends sharing and working for the same purpose.

Brazil

» On the 12th of January, an earthquake of 7.0 Richter magnitude occurred in Port au Prince - Haiti, the least-developed and poorest country in the Western Hemisphere. A few hours later, we managed to organize a medical team of specialists and nurses to send to Haiti as an humanitarian AID and disaster relief effort. Two days later, we sent a team first to the Dominican Republic, for logistical reasons, and

hours later we drove a van into Jimani, on the border of Haiti with the following objectives: to provide immediate medical help to the many injured and to create a situational diagnosis in order to organize the aid post.

During 30 days, Hospital Israelita Albert Einstein from Brazil joined the Harvard Humanitarian Initiative (HHI) who established the Fond Parisien Disaster Recovery Center (DRC)- a partnership between the HHI and Love a Child Inc. This large displacement center and medical compound in Fond Parisien on the Haiti side of the border with the Dominican Republic has treated over 1,200 patients. This camp

with more than 200 beds in tents was created to accommodate the several hundred injured Haitian earthquake victims who underwent surgery in the nearby Dominican Hospital in Jimani and provides a high level of medical and rehabilitative support.

The Albert Einstein team of 50 members consisted of orthopedic surgeons, general surgeons, internal medicine, pediatricians, obstetrician/ gynecologist, anesthesiologists, OR assistant, nurses and lab and radiologic technicians. We also provided a broad range of services, including point of care testing, 4 tons of medical supplies and a lab.

The team speedily worked to create

a rehabilitation center which utilizes a multi-disciplinary, team-oriented approach to patient care. Heading the team of health care professionals were physician specialists, and along with nurses, therapists, psychologists, the rehab process benefits patients by preventing complications, doing rehabilitation interventions, monitoring and treating patient's pain and providing strong emotional support and psychological intervention.

This report was written by Dr. Lottemberg, President of Albert Einstein Jewish Hospital in São Paulo and Dr. Steinman a surgeon that was there. This was the contribution of the Brazilian Jewish community Shabat Shalom Abram.



IMA-WF invites you to take part in 2 initiatives

Taglit for medical students

1 aged 22-26. This program will be based on the standard Taglit model, with emphasis on elements of special interest to aspiring physicians. Our aim is to recruit about 20 students from all over the world for each trip.

The trip will involve touring cultural, historical and religious sites, as well as trips to scientific and medical institutions and meetings with distinguished physicians.

We'd be pleased to have your cooperation in helping to recruit medical students for this project.

We would like to launch our first trip at the end of December.



Emergency preparedness course

2 The APF (American Physicians Fellowship) has, for several years, been running a course in emergency medicine for physicians who wish to volunteer in Israel in times of national emergency. We intend to broaden the format and the number of courses and would like to suggest that you, IMA-WF chapters, check to see if you have physicians who may be interested in participating. We aim to propose 10-12 physicians for the upcoming course to be held from November 06, 2010- November 11, 2010.

Initially the course will be available for English speakers only, but once the format proves itself, courses for French speakers will be organized as well.

The program, which is published by the APF, can be found at the following link:

<http://www.apfmed.org/apf.php?c=emergency>

If you are interested, please respond to: international@ima.org.il

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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