WHY “RADIOACTIVE”?

Mohamad Raad, Editor-in-Chief

Atomic nuclei collide to form a more powerful nucleus and emit radioactivity. Many people from different specialties, backgrounds, and walks of life have come together to create Radioactive. “Radioactive”, in its effect, emits, transmits, and puts opinions forward, giving a voice to those who want to be heard. “Radioactive”, in its impact, targets those who care about the present and the future. “Radioactive”, in its power, resembles atomic nuclei; whereby medical and graduate students convene with nurses, physicians, and professors to create a better and stronger AUBMC. It is simply a true form of radioactivity.

ACCREDITATIONS AT AUBMC

Cesar Yazbeck, Med II & Rana El Jarrah, Med III

Since its establishment, AUBMC has been a pioneer in Lebanese and Middle Eastern healthcare, consistently ranking as one of the top medical institutions in the region. To sustain this hard earned reputation, the administration has aimed to seek a number of international accreditations providing it with a distinct level of international recognition. Accreditations certify that the institution’s quality of care delivery, patient safety and advocacy, and academic programs meet international standards. AUBMC has successfully maintained the American Nurses Credentialing Center (ANCC) Magnet accreditation, considered to be the ultimate credential for high quality nursing given to hospitals in recognition of their excellence and innovation in the professional nursing practice. It reflects excellent care delivery which has increased patients’ trust to seek healthcare there. (Continued on page 7)

IS LEBANON READY TO FACE EBOLA?

Tala El Tal, Med III

Ebola Virus Disease (EVD), previously known as Ebola Hemorrhagic Fever, is a serious illness, often fatal if left without early symptomatic treatment. So far, there is no licensed vaccine but therapies are underway. The World Health Organization (WHO) dates the first emergence of EVD back to 1976 in a remote village near the Ebola River in the Democratic Republic of Congo. Now, the virus is quickly moving from remote to urban areas in West Africa namely in Sierra Leone, Guinea, and Liberia, and most recently in Mali, causing the largest outbreak to date. (Continued on page 9)
Physicians, Patients, and Society (PPS) at AUBFM

Ahmad Abu Mohammad & Hadi Abou El Hassan, Med I

Last year, the Undergraduate Medical Education Committee at the American University of Beirut launched the new IMPACT curriculum into effect with a clear vision of training physicians to take the lead as social healers, scholars, educators, and advocates. Unlike the previous curriculum, IMPACT is divided into modules based on organ systems. In addition, it features holistic courses such as Global Health and Social Medicine and Physicians, Patients and Society (PPS) that provide a humanities-based interactive platform for students to share, discuss, and debate relevant medical issues from a non-medical perspective.

The implementation of social medicine, art, and skills-based courses all seem to gear students towards becoming more compassionate physicians. Practical skills, taught during the Clinical Skills course, strongly emphasize the importance of proper communication and the need to demonstrate empathy. Dr. Umayya Musharrafieh, Clinical Associate Professor at the Department of Family Medicine and the course coordinator, believes that future physicians would better acquire fundamental skills if exposed to them early in their education.

The PPS course in particular has broadened students’ interests and has already started to alter their way of thinking about medicine. By shadowing a patient, medical students are encouraged to approach medicine with a reflective, critical eye allowing them to better understand the importance of patient advocacy. Students also take art classes, which according to Sarah El Halabi, a first year medical student, “add appreciation and contemplation not only of the science behind anatomy, but also of the endless beauty of how things come together to create the human body.”

According to Dr. Ramzi Sabra, Assistant Dean for Undergraduate Medical Education, the philosophy behind PPS is to instill students with both intrinsic and instrumental values essential for practicing medicine with empathy and understanding. The fusion of history, ethics, literature and art with science make PPS one of the most fundamental courses in medicine, shaping future physicians’ ideals and beliefs. As such, the new IMPACT modules, in conjunction with taught medical sciences, foster well-rounded, knowledgeable, and reflective physicians.

PPS enriched the medical program at AUBMC by placing its students at the forefront of changes in medical practice and societal debates. PPS aims at creating responsible physicians who care for their patients and wish to better serve their society.

Jawad Fares, Med II

PPS is the class I’m always most excited to go to, so they must be doing something right!

Zeinab Kassem, Med II

Out Loud
How do you feel about the new PPS module in the IMPACT curriculum?
BOOK REVIEW:
LE JOUR OÙ NINA SIMONE A CESSÉ DE CHANTER

Sara Moufarrij, Med II

Dropping medical texts and replacing them with a literary experience seems to be quite a feat for most medical students and staff members. I propose a dive into the personal accounts of the Lebanese-French author, Darina al-Joundi. In her book entitled “Le Jour où Nina Simone a cessé de Chanter”, al-Joundi entraps the reader in a series of personal chronicles, during which she discovered the difficulties of living as a free woman in Lebanon during and even after the aftermath of the Lebanese Civil War.

This novel, which has been translated into many languages and transformed into an international theatrical, relays the story of a girl who had to come to terms with her father’s death. A pioneer of civil liberties and a known journalist in Lebanon, her father was her role model of a fighter for personal freedom. Upon his death, al-Joundi was left with a conservative family and a rebellious mind, all within the backdrop of war and misery; she grew to resent Lebanon and the closed, conservative nature that shaped it. In attempt to discover true love, she found herself bound, over and over to abusive men. For speaking the truth and for want of questioning the ruthless patriarchal society that drove her since the death of her father, she was labeled as the local crazy and was threatened to an insane asylum. She became caught up in life-threatening abatilles, all for the want of understanding whether the Lebanese can truly be free.

This account seems partially applicable to modern day Lebanon: it puts into question our social frameworks that, rather than being protective and conducive to personal growth, are merely wrecking internal havoc. One of the main social frameworks addressed in the book is the healthcare system. Al-Joundi’s experience at a psychiatric center is wrought with feelings of humiliation and despair. You can’t help but want to bang your book against the table as your eyes collect the depiction of the disgraceful treatment by the doctors toward their patients. The subsequent description of healthcare workers “punishing” the psychiatric patients for any behavior that deviated from what was expected from them reflects on the realities of mental health in the country: the field is not prioritized enough by the Ministry of Health.

Scenes of domestic abuse are rampant in the book, and they serve as a fundamental pillar to the author’s claim on personal freedoms. Al-Joundi’s determination to find a loving and compassionate partner during the times of war only brought her to repeated instances of demise: she would be drugged and beaten. Those around her blamed these occurrences on her desire for these “personal freedoms” that her father had clamored for. She could not find any console in her family, friends, nor in any medical institution. Although one could conclude that her experiences were only made drastic by the wartime nature of the era, it is not wrong to say that women in Lebanon are still facing difficulties in legitimizing their claims, especially when it comes to violence in the household. The repeated attempts by the Lebanese parliament to pass a law giving women enough power to report violators exemplifies this especially since our medical infrastructure lacks adequate centers that deal with abuse.

Lebanese healthcare priorities during the war are questioned throughout the novel, and what makes this book all the more poignant is the fact that currently, certain institutions still propagate these failures, 40 years after the Civil War. Can we shift our country’s medical priorities merely by studying from medical texts? I’m sure you already know what al-Joundi’s answer would be.
The Diana Tamari Sabbagh building, better known as DTS, is the home of many students pursuing their degrees in medicine or masters in basic sciences. It is definitely a one of a kind institute, encompassing the most advanced and state-of-the-art equipment in the region. Many of the innovative projects in the Middle East are currently being carried out in DTS. As part of the AUBMC 2020 Vision, DTS is continuously undergoing major renovations upholding its leading role in the region as an internationally-recognized and accredited center.

DTS is a dynamic department teeming with life where research and study often last beyond midnight. For the past few years, research in DTS has caught the interest of medical students aspiring to contribute to the scientific community. One cannot deny the fact that medical students have to sacrifice a lot of precious time for research as they struggle to integrate lab work into their hectic schedules. However, the IMPACT curriculum has given the newer generation of medical students the opportunity to incorporate more extra-curricular activities into their schedules. Those who choose to take part in research work alongside graduate students, research assistants, lab managers, PhD students and post-doctorates.

Currently, around 20 labs are active in DTS. Each lab tackles a particular scope of research, offering interested students a wide array of choices to pursue. A well researched topic is exploring therapeutic possibilities of different types of cancer. These are being investigated by the labs of: Dr. Marwan El-Sabban, Dr. Julnar Usta, Dr. Rihab Nasr, Dr. Nadine Darwish, Dr. Ghassan Dbaibo, Dr. Ali Bazarbachi, Dr. Raya Saab, Dr. Rose-Mary Boustany and Dr. Nathalie Zgheib. Their work involves chronic myeloid leukemia, rhabdomyosarcoma, lymphoma, and breast cancer among many others.
Dr. Rose-Mary Boustany, Dr. Georges Nemer, and Dr. Mazen Kurban study the genetic polymorphisms found in the Lebanese population. Dr. Boustany's research focuses on autism in an attempt to detect it at an earlier age. Dr. Nemer is undertaking the task of mapping possible hereditary genes linked to certain cardiac anomalies. Dr. Kurban's work focuses on the genetics behind skin pathologies.

As for the cardiovascular system, in addition to Dr. Nemer's research, Dr. Asad Zeidan's lab studies the effect of hypertension on vascular hypertrophy, and Dr. Ayad Jaffa's lab is investigating the role of bradykinin in the pathogenesis of atherosclerosis and diabetic nephropathy. The latter is also being studied by Dr. Assaad Eid whose lab is identifying the intracellular pathways implicated in the disease.

Meanwhile, Dr. Firas Kobeissy's lab centers on the field of neuroscience. His work focuses on two main topics: traumatic brain injury and its possible treatment through stem cells as well as the effects of smoking on the central nervous system. Another neuroscience lab is run by Dr. Nayef Saadeh and Dr. Wassim Abou-Kheir who are investigating the effects of deep brain stimulation on the endogenous pool of neural stem cells in mice. Dr. Abou-Kheir’s lab is also working on creating induced pluripotent stem cells.

Research is a vital part of medical education. It provides tomorrow’s doctors with insight into novel discoveries in human physiology and pathology, allowing them to better understand, diagnose, and treat patients’ diseases. For all those interested in research, DTS is “the place to be”.
Palliative care is an essential part of medicine. A physician’s duty is not only to prolong the patient’s life but also to improve the quality, reduce any suffering, and provide comfort whenever possible to patients and their families.

Zeyad Sahli, Med III

Palliative care, an emerging field in medicine, aims at preventing and relieving the social, physical, and psychological suffering of the patients and their families. Dr. Hibah Osman, a palliative care specialist at AUBMC and founder of Balsam, a non-governmental organization that works to relieve patient suffering and improve quality of life, describes three major roles of her specialty. First, palliative care focuses on symptomatic management which ensures that patients are comfortable and pain free. Second, it assists them in deciding on their preferences when it comes to end-of-life medical dilemmas. This is done through an intimate dialogue that addresses their fears and emotions regarding their condition and its implications. Lastly, palliative care manages the patient’s transition from the medical center to the patient’s home ensuring the availability of the appropriate set up, medical equipment, and necessary medical support.

Current recommendations are to initiate palliative care early in the course of a serious illness. Dr. Salah Zeineddine, Assistant Dean for Graduate Medical Education at AUBMC, clarifies that “whenever the current therapeutic regimen of the patient is deemed to be futile, you are not intending anymore to cure. Rather, the intervention is making the symptoms of the patient deteriorate and get worse.” At this level, the doctor consults the palliative care team to provide input into the plan of care.

Dr. Arafat Tfayli, Chair of the Palliative Care Committee, emphasizes the role of palliative care in medical education. “We are concentrating on training students and residents in this field to improve patient satisfaction and quality of care.” Through the Physicians, Patients, and Society course in Medicine II (PPS-II) and rotations in Medicine IV, medical students go beyond the knowledge acquired from a textbook to learn a new art of communication. Palliative care reinforces our humane and personal values by reminding us that we are treating patients, not only diseases. Dr. Zeineddine says, “This practice enlightens everybody to treat the patient with authenticity.”

“It is new to our culture,” Dr. Tfayli explains, “but it is just a matter of time before palliative care becomes a multidisciplinary approach, actively employed in the management of these conditions.” Many medical societies, including the Lebanese Society of Medical Oncology and the Lebanese Pulmonary Society, are incorporating palliative care talks in their conferences. Since its establishment, the palliative care service has tremendously evolved at AUBMC, thus further complementing the doctors’ efforts in the overall care of patients, which has always been and will be the physician’s main concern.

Palliative care service is covered by a multidisciplinary team that comprises doctors, nurses, a psychiatrist, a social worker and a pharmacist. The team can be reached at the pager 1554.
ACCREDITATIONS AT AUBMC

Cesar Yazbeck, Med II & Rana El Jarrah, Med III

In April 2014, AUBMC received the full Joint Commission International (JCI) accreditation as a medical care center and for the first time as an academic center. According to Dr. Zeina Kanafani, Assistant Professor, Division of Infectious Diseases, Department of Internal Medicine, “A medical center is not restricted to its medical personnel; it is a dynamic environment with constant changes and responsibilities, including performance and innovative aspects.” JCI emphasizes leadership abilities, innovative solutions, and improvements in health care across different levels. These include monitoring operations, engineering, safety, administration, and maintenance, in order to improve outcome and performance and ultimately increase patients’ trust in the quality of care delivered.

In addition, AUBMC is accredited by the College of American Pathologists (CAP) as a testament to the excellent practice in pathology, outstanding quality in conducting tests, impeccable standards in equipment quality and wide range of laboratory medical services provided across the entire spectrum of labs in the medical center. This certifies that research and lab practices are reliable, valid and comparable to international standards.

The recent certification by the Accreditation Council for Graduate Medical Education International (ACGME-I) has brought AUBMC one step closer to receiving the American Board of Medical Specialties (ABMS) accreditation. ABMS provides worldwide recognition of the available fellowship programs at AUBMC. The ACGME-I is a foundational and advanced specialty accreditation aimed at preparing health centers and medical schools around the world to conform to United States standards in healthcare training, thus maintaining AUBMC’s reigning supremacy in the Lebanese domain of healthcare. Dr. Salah Zeineddine says, “It provides residents with programs that are up to US standards with the privilege of earning diverse expertise in their specialty program upon graduation. By July 2016, an ACGME-I accredited residency program is expected to be compulsory for any resident considering a US fellowship.”

Having garnered so many international accreditations, AUBMC is currently seeking to gain the Liaison Committee on Medical Education (LCME) certification, an accreditation that is restricted to medical schools in the US. This accreditation requires a medical school to demonstrate that its graduates exhibit professional competencies that are appropriate for entry to the next stage of their training and that serve as the foundation for lifelong learning and proficient medical care. Knowing the AUBMC mission to persistently seek excellence, rest assured that the day a decision will be made for LCME to go international, AUBMC will be at the forefront leading the race.
ELECTRONIC RECORD KEEPING: A VIEW ON THE CURRENT AND FUTURE SYSTEMS AT AUBMC

Aya Hamadeh, Clinical Research Assistant, Department of Psychiatry

Digital technology is essential for information exchange and communication, particularly in information rich domains like medicine. Electronic health records (EHRs) are at the base of the medical digital infrastructure, allowing data to be easily communicated and transferred across health practitioners, transforming the way care is delivered.

EHRs provide a more comprehensive view of the patient, improving the ability to make well-informed treatment decisions quickly and safely. The Family Medicine Department at AUBMC has been a pioneer in the region, creating and utilizing one of the first EHR systems. Dr. Ghassan Hamadeh, chairperson at Family Medicine explained that the current information system, which started off as simple management software, is the product of cumulative efforts spanning over the past 30 years. “The key to the transition to using this system”, he explained, “was the adoption of one master patient index that incorporated multiple patient registries from within the medical center.”

The current EHR system at Family Medicine is incredibly well received by physicians, residents, nurses and medical students alike. “Involved members have access to all the information they need; more importantly, this information can be read clearly and quickly.” Errors due to miscommunication such as illegible handwriting, limited access to complete labs, poorly scanned files and incomplete patients’ histories have become negligible through the use of EHRs.

So why has this system remained within the walls of Family Medicine? “The system is perfect for a small clinical setting; however moving it to be available hospital-wide would require more man power as well as more advanced security setup and tracking,” explained Dr. Hamadeh.

“As part of the AUBMC 2020 Vision, we are acquiring an integrative health information system that would help patient safety, reduce medical errors and facilitate information exchange all through the medical center. The main uses for this system would be computerized order entry, reconciliation of medication, confirmation of patient identification, and providing a unified holistic patient file.” A task force has been assembled to select the most appropriate system to replace the current existing in-house-developed system, allowing the hospital to become completely paperless and to satisfy another requirement for further accreditations. The transition to an EHR-based hospital must be done with extreme precision and care to ensure control over data access and privacy through a stringent back-up and data protection plan.

OUT LOUD

Would you push to have EHR implemented at AUBMC?

“EHR, once implemented at AUBMC, would be a dream coming true since more efficient documentation means even more time can be directed to patient care.”

Nidal Saadi, RSN

“One of my struggles as a medical student on the floors is reading through the different handwriting styles in the charts.”

Tala El Tai, Med III
IS LEBANON READY TO FACE EBOLA?

Tala El Tal, Med III

According to Dr. Ghassan Awar, Assistant Professor, Division of Infectious Diseases, Department of Internal Medicine, it is likely that fruit bats of the Pteropodidae family are the natural reservoirs of the virus. The virus is transmitted to the human population by close contact with these fruit bats’ secretions or the tissues of infected end host especially primates (apes, monkeys) and forest antelopes. Transmission from human to human is by direct contact with blood or body fluids (i.e. saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen) of infected individuals (living or deceased), or via indirect contact with surfaces contaminated with infected blood and body fluids, entering via breached skin or mucous membranes. However, you cannot get Ebola through air, water or food. In addition, the disease cannot be transmitted if the patient is asymptomatic or still in the incubation period of the virus which averages around 8-10 days (range 2-21 days).

Symptoms that typically arise after the incubation period include fever, severe headache, muscle pain, weakness, diarrhea, vomiting, abdominal pain, rash, and unexplained internal or external bleeding (i.e. gum bleeding and bruising) ultimately leading to multi-organ failure. These symptoms are nonspecific and are shared by other febrile illnesses common in Africa like malaria and typhoid fever, making a definite diagnosis problematic.

Concerns in Lebanon surfaced when news broke out about a patient being investigated for Ebola in one of Beirut’s hospitals. Efforts in line with the WHO’s recommendations are being carried out by the Ministry of Public Health (MOPH) at Beirut’s Rafiq Hariri International Airport, at the ports in Beirut and Tripoli, and most importantly, at governmental hospitals. Primarily, flight attendants of airlines coming from West Africa are required to report any passengers with Ebola symptoms to the Lebanese authorities. These passengers will be placed in an isolation unit at the airport where they are screened with thermal cameras, before being examined by the MOPH’s medical team.

As for hospitals, the MOPH is in the process of preparing about eight to nine governmental hospitals in areas like Beirut, Nabatieh, Sidon, Tripoli, Dahr al Basheq and Baalbek, with the appropriate personal protective equipment (PPE) and isolation units. Private medical centers like AUBMC are adhering to the directives of the MOPH, gathering the PPE based on contact and droplet precautions which take into account the risk of aerosols from cough and vomitus, heightened in the end hemorrhagic stages of EVD.

Travel history about possible exposure to EVD in the last three weeks should raise suspicion, and a patient with such history presenting to Emergency Department is immediately investigated further, the infectious diseases’ specialists are called in, and the MOPH is informed. First, blood samples are taken to test for malaria at the point of care while other blood samples are shipped off to France that has special biosafety cabinets of level four, which are not yet available in Lebanon. Test results need about 36 hours before EVD can be confirmed. Meanwhile, the patient is required to stay in the isolation units. There, the patient is provided with supportive care and fluid replacement. Strict precautions, such as using antiseptics, detergents with virucidal effect, incineration of the equipment, and cremation of the deceased should ideally be followed to prevent the spread of the infection.

WHO has stated that several Ebola vaccine trials are currently under way. There is no doubt that the collaboration between local and international efforts amongst worldwide organizations is required to overcome this epidemic.
ADVANCED PRACTICE IN NURSING

Rachel Sabbagh, RN, MSN-student

The evolution of the term “advanced” in nursing is unclear. Several fellow AUBites have asked me what does it mean to have a Master’s degree in nursing and what does it entitle nurses to do. It’s almost impossible to give one concise answer that fully captures what nurses actually do. Nonetheless, as a nursing student myself, I will try to give an overview of the various advanced practice specialties in nursing, emphasizing specifically the role of Advanced Practice Psychiatric Nursing (APPN).

Some assume that the end point of a graduate degree in nursing is an administrative or managerial position. While this could be a very prospective role, it is not exclusive to nursing advancement. AUB offers four specialization tracks at a Master’s level, all accredited by the Commission on Collegiate Nursing Education (CCNE) including Master of Science in Nursing (MSN) administration, in adult care, in community nursing, and in psychiatric mental health nursing. This is followed by postgraduate training and certifications for nurses who wish to specialize even further.

APPN is one of the oldest and most highly-developed clinical specialties in nursing. With growing public awareness of mental health concerns, psychiatric nursing was able to make major strides in the development of a specialized direct care role. By 1946, the National Mental Health Act designated psychiatric nursing as a core discipline. In the early 1950s, the primary contributor to mental health law reform, Hildegard Peplau, published the middle-ranged nursing theory of interpersonal relations that helped revolutionize the apprenticeship of psychotherapy. This set the foundation for mental health nurses to begin seeking new management roles.

APPNs assess, diagnose, plan treatment, implement psychotherapy and evaluate the mental health of patients. One of the many values a nurse psychotherapist holds is patience, primarily because of their work experience with the chronically ill. Both Bachelor of Science in Nursing (BSN) and MSN programs have extensive pathophysiology and pharmacology courses that guide nurses to adopt a holistic paradigm of care.

Ultimately, there is a growing need for advanced nurses on all levels especially in practice, education, and management. Indeed, nurses play a significant role in patient’s care. Although nurses are highly recognized for their continuous efforts and valuable role at AUBMC, the Lebanese laws do not recognize advanced nursing practice. Bridging the gap between what advanced nurses can actually do and what their rank in the healthcare system allows them within the frames of the Lebanese laws would lead to stronger future recognition to those dedicated members. Nevertheless, nurses will continue to be a key working force in medicine, ensuring that optimal care is delivered to all patients.

OUT LOUD

What do you think of nursing as a profession?

“Nursing is “a calling” and an “honorable” profession. Love and compassion for life were the foundation of the Nursing Profession, the very essence of its existence.”

Eva Tabarani, RN, MSN student

“Nursing is a humanitarian profession more than just a job. With the comfort and support we are giving our patients, we are able to make their lives better.”

Dina Mouzayen, RN, MSN student

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Dina Mouzayen, RN, MSN student
INTERVIEW WITH
DR. SOUHA KANJ SHARARA

Interview was conducted by Mohamad Raad, Med III

Q: What is your title at AUBMC?
A: Professor of Medicine, Chair, Division of Infectious Diseases, Department of Internal Medicine, Chairperson of the infection control and prevention program.

Q: What do you find most challenging about your job?
A: Trying to keep a balance between patient care, teaching, research and administrative duties.

Q: What do you enjoy most about your job?
A: I love teaching, especially when I feel that students are genuinely interested in the material.

Q: How did you feel when you were selected for the National Council for Scientific Research (CNRS) Research Excellence Award?
A: I was very happy. It feels great to know that my research efforts have received recognition at the national level.

Q: Do you think research should be part of every physician’s work at AUB?
A: It shouldn’t be part of every physician’s work but physicians should have an inquisitive mind to ask the right questions. Medicine is an ever evolving career in which one should constantly question whether patient care can be further improved.

Q: What do you think helped you most in achieving this award?
A: My mentors at Duke. They were inspirational and great role models, three in particular: Drs. Ralph Corey, Daniel Sexton, and John Perfect.

Q: When you were a medical student, how did you finally come to choosing your specialty?
A: It was only after I became a house staff at Duke that I chose my specialty. I had initially considered cardiology or intensive care. It was those same role models who inspired me to go into Infectious Diseases.

Q: Which profession other than your own would you like to attempt?
A: I love singing, so maybe a singer. If it was in the medical field, I’d still be in something related to infectious diseases; maybe public-health where I can still serve my patients in addition to the community at large.

Q: Which profession other than yours would you never attempt?
A: Oncology. I become attached to my patients and find oncology to be too depressing.

Q: What do you do in your free time?
A: I am a swimmer, I like to swim laps in the summer and exercise in the gym during the winter.

Q: What is your favorite movie?
A: Pride and Prejudice. Keira Knightley is one of my favorite actresses.

Q: What is your favorite book?
A: The 7 Habits of Highly Successful People by Stephen Covey.

Q: What advice would you give to medical students?
A: Stay motivated and keep the positive spirit. Always feel that you are making a difference, don’t expect things to be perfect.

Dr. Kanj Sharara was awarded the CNRS (National Council for Scientific Research) Research Excellence Award 2014 on November 12, 2014 in a ceremony at the Grand Serail, under the patronage and in the attendance of His Excellency Prime Minister Tammam Salam. The award recognizes scientists who excelled in conducting research in different scientific disciplines in Lebanon. Congratulations!
LeMSIC, the Lebanese Medical Student International Committee, is known to welcome confused first year students. It is the school where second year students learn to take charge, and the home of third and fourth year students who have learned commitment and responsibility. This year’s National General Assembly (NGA) was the launch pad for an ambitious new year kicking off with the “Standing Committee Fair” introducing new students to the various Standing Committees they could sign up for.

As with every year, the Standing Committee on Professional Exchange (SCOPE) will organize the clinical exchanges for first year medical students. They will also hold the annual gala dinner, an event that brings together medical students and doctors for a night of celebration, screening of student-made movies, and fundraising for the international exchanges.

The Standing Committee on Research Exchange’s (SCORE) will hold its annual Research Day, which won first place amongst 536 worldwide IFMSA projects, in mid-April showcasing the medical research of Lebanese students. SCORE will also organize research workshops and research exchanges during the summer.

The Standing Committee on Sexual and Reproductive Health including HIV/AIDS (SCORA) plans to work as diligently as ever this year to spread awareness about reproductive health issues through several activities including International Women’s Day, anti-discrimination campaigns, and peer education sessions. The main event is the World AIDS Day Concert, which aims to ultimately provide free CD4 Count testing for HIV positive patients.

The Standing Committee on Public Health (SCOPH) will be implementing the newly founded “Health Day,” which aims at raising awareness about preventable diseases, health habits, and screening across villages in Lebanon. They’re also fundraising for their “Diabetes Fund” and continuing with their successful AUB mental health campaign.

This year, the Standing Committee on Medical Education (SCOME) will host several orientation lectures for pre-medical students and first year medical students, to help them prepare for their Board exams and plan their trips abroad for clinical electives.

The Standing Committee on Human Rights and Peace (SCORP) hosts several large events such as “Blind Date” organized in collaboration with the Youth Association for the Blind and “Trivia Night”, hosted last year by comedian Nemr Abou Nassar, which supported Syrian refugees through fundraising for the health and hygiene project.

With the collective energy brought to the NGA by enthusiastic new medical students and the older more experienced members of the LeMSIC family, the year has officially kicked off.

OUT LOUD
What are your thoughts on this year’s NGA?

“Every year, the National General Assembly brings together medical students from all over the country. Together we collaborate to set the grounds for health sustainability and take on leadership roles both locally and globally.”

Jessica El Asmar, Med IV

“During this tough first semester of med-school, LeMSIC has been the one thing combining both the fun and educational aspect of medicine.”

Karen Feghali, Med I

THE NGA COMES TO LIFE!

Lea Fayad, Med II
VIENNA WAITS FOR YOU

Rasha Raslan, Med II

Even though my LeMSIC professional exchange to Vienna was only a few months ago, the memory of it seems to belong to a different time and place. From the moment I set foot in its beautiful streets, I was overwhelmed by the artistic ambience and history that seemed to be deeply rooted in every nick and crevice of the city. This should have come as no surprise as Vienna is home to some of the greatest historic figures and artists that ever lived: Gustav Klimt, Wolfgang Mozart, Johann Strauss, and of course, good ole Siggy Freud. Walking around its historic streets and admiring the stunning scenery and architecture, I could see firsthand how this city inspired Mozart to compose his classical symphonies.

My trip went beyond all art galleries and museums. My mornings were mostly spent in the operating room of the maxillofacial department (better known locally as mund kiefer gesichtschirurgie) of the well-renowned Vienna General Hospital. Taking the 6:30 am metro to the hospital and grabbing a quick cup of coffee before attending the morning meeting made me feel like a doctor in the making! In my first week there, I was asked to assist in a complicated carcinoma of the tongue surgery. Scrubbing in as second assistant made me feel slightly apprehensive; after all, this was my first time in an operating room. These feelings quickly abated once I saw how the doctors, nurses and students were all working together in perfect unison and harmony. It was like watching a well-rehearsed masque, not unlike the one I had seen at the Opera House a few days earlier.

The pinnacle of my summer, however, was the people I met through the exchange. Even though we were twenty people with nothing in common except for our medical background, we hit it off from the very beginning. Our eclectic group had students from almost every continent brought together in the name of knowledge, medicine and culture. I am proud to say that wherever I go in the world, I have a friend who has helped me see life through a different lens. With my summer exchange etched in my memory forever, I am certain of one thing: I now know where I plan on retiring in the future!

EXCHANGE IN LEBANON -
A RESPONSE FROM POLONA GAMS, SLOVENIA

In August 2014, I was on a monthly exchange in Beirut, Lebanon. I was hosted by the Department of Cell Biology, Anatomy and Physiology at AUB. I found AUB to be an extremely sophisticated institution with neat facilities, developed equipment and professional staff.

I was assigned to an interesting project on cancer stem cells where we used a Nobel Prize winning method for cell de-differentiation. I learned a lot of the laboratory techniques I have only read about in theory, but never seen in practice. In the laboratory, I spent most of the time in the company of student researchers who were educational, hospitable and gave me a good perspective of their work.

My summer wasn’t only about work; I also managed to have a lot of fun. Every weekend, LeMSIC took us on a trip, starting with discovering romantic Byblos, then exploring ancient Sidon and Tyre, learning about Lebanon in the National History Museum, being served Lebanese Mezza for lunch, experiencing the notorious Beirut nightlife, and much more. My exchange in Lebanon was unique, both professionally and personally fulfilling, and in a word: unforgettable.
MEDICINE AND MUSIC; IS THERE ROOM FOR BOTH?

Elie Abdel-Nour, Med III

Since the very beginning of our medical academic journey, a lot of people around us implanted the idea that our vibrant life is over; “THIS is your new life!” was a statement we heard over and over. “Starting your first year in medicine means your books and cadavers are your best friends.” Before even starting, we were led to believe that to succeed in this path, we had to make a compromise – let go of most if not all of our hobbies.

Personally, I could never let go of music. I’ve been part of a band called Safar for two years now. We create our own pop-jazz original songs, and currently we are recording our first album to be released in December 2014. While some people believe this might interfere with my studying, it never does. Finding the right balance between a number of side projects and medical school is key.

You would be surprised by the great talents hidden behind the white coats. Elie Ramly, who graduated from AUBMC with an exceptional rank and is currently working in one of the best hospitals in the United States, Brigham and Women’s Hospital, recently released his own album, “Drown the Morning Sun.” Quite the achiever!

The future class of 2016 also has true diamonds in the rough. Known initially as the “shredder”, Ryan Jo Rachwan started producing musical pieces using specialized computer software. His compositions, which range from sad ballads to epic music, are posted on YouTube. They are without a doubt worth listening to.

Many other talented Med students are worth mentioning; our multi-instrumentalist virtuoso Christopher Khoury, Tara Bardawil’s golden voice, Tala El Tal with her soothing piano compositions, and Julien Torbey’s mind-blowing guitar skills are some of many on the list of talented Med students. At the end of the day, medicine is an art, and medical students are artists by definition. Our hobbies and talents are a major component of our lives, and it’s up to us to keep them alive.
Medical education is a full-time job that one has to be entirely dedicated to in order to succeed. I realized when I first joined med school that physicians lead very stressful lives: they are healers, teachers, and counselors but are also social interactive human beings. They must be able to relieve the stress induced by their hectic lives in order to maintain their well-being. Upon entering the field of medicine, we become pulled into a fast-paced high-stress lifestyle, often forsaking hobbies and activities to focus on our careers. However, looking around AUBMC, you find highly accomplished medical doctors who managed to find a balance between their professional and social life. Beneath the scrubs, white coats and gloves, talented artists are hidden.

Dr. Kamal Badr, Associate Dean and Professor of Medical Students, who is specialized in nephrology, also happens to be an amazing guitarist. He began playing late during his high school years as a hobby and kept practicing throughout his medical school years. Although he never learned how to read or write music, he relied on his musical ear to learn to play. As with most physicians, he felt overwhelmed with family, work and daily responsibilities, which forced him to stop practicing in order to focus on his social and professional life. A few years down the line, a playwright friend of his transformed some of the music he and his friends had created into a musical play, Wars Within, commemorating his music forever.

Dr. Ramzi Sabra, Professor of Pharmacology and Toxicology and Assistant Dean for Undergraduate Medical Education, considers the organ to be his second specialty. Although initially a piano-player, Dr. Sabra was asked to play the organ during church services, and since then, it became his passion. At the age of 16, he began receiving lessons by professor Thomas Weaver at the American University of Beirut. Even when he was overwhelmed during medical school and his fellowship, he maintained the organ as his outlet. He believed that this artistic side of his personality, and learning new pieces of music were a form of success similar to those attained when publishing an article. Dr. Sabra also clarified that music was never a reaction to the overwhelming stressful life he leads, but that it has always been integrated in his daily life. He still takes part in AUB’s choir concerts in addition to the various official ceremonies.

Art, especially music, is a key element in developing a sense of appreciation towards different human aspects in a physician’s personality. It is no surprise that Drs. Badr and Sabra have advocated the implementation of the new courses that focus on art in medicine in the IMPACT curriculum. Through these courses, medical students have come to recognize how art can relay feelings and ideas of the real world, thus enriching their lives and allowing them to appreciate the complexity of both the world and people. While medical students may feel overwhelmed by all the lectures, material, and exams that they must be on track with, Drs. Badr and Sabra advise that students should always maintain a hobby or form of artistic expression to relieve some of their stress and keep them grounded.
So you’re not coming to the vascular surgery conference?

I mean we’re not learning anything from these “conferences” and it’s like they’re not even meant for us students. Besides, the last six of them were about limb ischemia...

I don’t even care about the attendance grade anymore...

So give me ONE good reason for why I should go to the vascular surgery conference!

Sure...

Free food...

Limb ischemia

two words