



NEWSLETTER



COLLEGE NEWS



STUDENTS' CORNER



STUDENT ASSOCIATIONS



MEDICAL MISHAPS



RECOMMENDATIONS

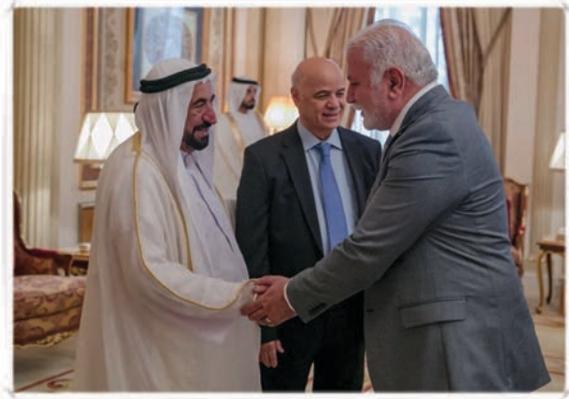


DOCTOR'S ORDERS

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DEAN'S MESSAGE OF THE MONTH

The College of Medicine has progressed very well in the fields of education, research and commu-



nity service. We will be making an effort to focus on education in the College of Medicine, with an emphasis on innovations in teaching, as well as revision of the curriculum, teaching and assessment tools in our college.

The graduation ceremony has been scheduled and I encourage all faculty to attend this event to see the results of their efforts over the years with their beloved students.

The last month has been very busy at the College with numerous events that took place, as well as meetings, faculty development workshops and seminars. Many grant deadlines were also met by an increasing number of applications from the faculty. Our students have also been busy, not only with studying for upcoming major exams such as the exit exam and the final MBBS exam but also with events and extracurricular activities both in and out of the university. I would like to congratulate our faculty and students on all their wonderful achievements. They continuously make me and our college proud.



COLLEGE NEWS



College of Medicine Signs International MoUs

In the month of January, the College signed multiple Memorandums of Understanding (MoUs) with various international medical colleges, again solidifying its position on the global scale. The colleges included the Royal College of Surgeons - Ireland, University Medical Center Schleswig-Holstein in Germany, University of Bordeaux in France and University of Luxembourg. These MoUs will provide a wide choice of universities and opportunities for our students and graduates interested in pursuing their electives and residencies abroad. Additionally, delegates from the University of Cambridge visited the medical campus to discuss future collaboration.



Omega 3 and Cardiovascular Protection Seminar

On Monday 20th January 2020, the Diabetes and CardioVascular Diseases (CVD) Research group held a seminar by Dr Ricardo Oliveira, an Endocrinologist, on Omega 3 and whether it has any role in Cardiovascular protection.



AMO Visit

On Wednesday 29th January 2020, Mr. Daniel Rivers, Director of Partnerships of AMO, gave a talk to students in clinical years who are interested in pursuing clinical training in the United States. AMO opportunities is a company that creates direct affiliation agreements with hospitals to provide clinical rotations, facilitating the application process for students.



Zero Food Waste

The team LEAF (Linking Education and Farming) of the Sustainable Circle at the University of Sharjah, led by Dr. Anu Ranade, developed a strategy to utilize all biodegradable waste within the medical campus. The project started as a pilot study on 19th October 2019 aiming towards zero waste in the campus, and making UOS the first educational institution in the UAE to change waste into soil for organic farming.

To implement the project, a deep freezer was installed in the college for the faculty to deposit their daily food waste, in addition to coffee grounds collected from Coffeol and Starbucks. The thawed wastes were later mixed with microbiomes, left in composting bins for two weeks for curing, then shifted to the community farming area on campus. Four weeks later, the high-grade soil ready for use on plants within the green house, enhancing the agricultural productivity.

With 150 kg of soil produced in 3 months from the medical campus alone, a community-scale composting system is expected to not only reduce the amount of waste in landfills, but also enhance the quality of soil in the UAE for future generations, develop a sustainable food system, and improve overall health and nutrition among the population.

Faculty Achievements

Dr. Jibran Muhammad published an article titled "Melatonin triggers the anticancer potential of phenylarsine oxide via induction of apoptosis through ROS generation and JNK activation" in the journal *Metalomics* on the 21st January 2020. DOI: [10.1039/c9mt00238c](https://doi.org/10.1039/c9mt00238c)

Dr. Maha Saber gave a lecture titled "Our Immune System, and the Way to Nobel Prize" at the Supreme Council for Family Affairs on the 23rd January 2020.

Prof. Azzam Magazachi, Prof. Nabil Sulaiman and Prof. Salah Abusnana as well as Dr. Basema Saddik, Dr. Samrein Ahmed and Dr. Rifat Hamoudi participated in "Fostering University and Industry Partnership: Assessing Biomedical & Health Research Opportunities" at the College of Pharmacy on the 30th January 2020.

VIRAL NEWS

Coronavirus reaches the U.A.E.

Four members of a Chinese family who arrived in the United Arab Emirates from Wuhan have been diagnosed with the new coronavirus, the first known cases in the Middle East, the UAE health ministry announced. The four were visitors who arrived in the country on January 16th, stated health ministry official Hussein Al-Rand. One family member, feeling unwell, attended a clinic on January 23rd where they were diagnosed with the coronavirus.

The other three members were subsequently tested and also diagnosed with the virus. The family comprises a wife and husband, both 36, a child aged nine, and a grandmother aged 63, Al-Rand said. All four are in a stable condition and under medical observation, the ministry said in an earlier statement carried by the state news agency.

Coronaviruses are a large family of viruses that cause respiratory illnesses, according to the Centers for Disease Control and Prevention. This family includes the viruses that cause SARS (Severe Acute Respiratory Syndrome) and MERS (Middle East respiratory syndrome), as well as viruses that cause milder illnesses, like the common cold.

Nearly 60 cases have been reported in 15 countries outside China, including the United States, France and Singapore. The United States and other countries tightened travel curbs on Friday and businesses said they were facing supply problems because of the coronavirus in China, a day after the World Health Organization declared a global health emergency.

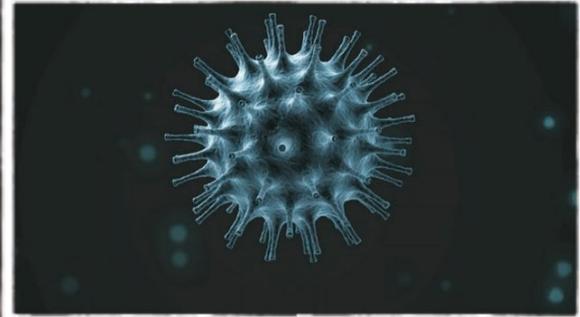
The outbreak came to light in late December and prompted fear in China of a possible resurgence of SARS, an acute viral respiratory illness first reported in the country in 2002 that caused a pandemic that

rippled throughout Asia. SARS spread to 37 countries worldwide, infected more than 8,000 people and killed 774 in less than a year. The illness is brought on by a coronavirus, and symptoms include fever, cough, severe headache, dizziness and other flu-like complaints.

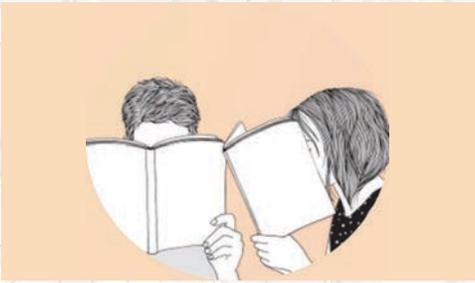
With the death toll rising to 213, all of them in China, the United States warned Americans not to travel to the Asian country, where the outbreak first appeared in Wuhan, capital of the central Hubei province.

The WHO has reported at least eight instances of human-to-human transmission in four countries: the United States, Germany, Japan and Vietnam. Thailand said on Friday it too had a case of human-to-human transmission.

As of the end of January, countries such as Singapore and Mongolia have begun closing their borders to Chinese visitors or foreigners who had visited China within fourteen days.



Adapted from [livescience.com](https://www.livescience.com), [BBC.com](https://www.bbc.com), [NYTimes.com](https://www.nytimes.com), and [Reuters.com](https://www.reuters.com)



STUDENTS' CORNER

"Il y a des fleurs partout pour qui veut bien les voir."

Radwa Atef, Year 1



"Day-dreaming."

Moza AlZaabi, Year 2

'It is all that I have lost that has set me free.
But I wonder, if I look in the mirror - would I even recognize me?'

Afnan Al-Rawi, Year 3



"If I tell you what happens, it won't happen."

Mahmoud ElAdl, Year 4



"When a door opens, run through it!"

Hazem Taifour, Year 5

STUDENT ASSOCIATIONS



Medical Student Association

ZANZIBAR VOLUNTEERING TRIP

“Catch me in a light, which once lit, will never dim. The better your practice, the brighter the flame.”

Armed with excitement and packed with confidence, 32 students from the College of Medicine travelled to Zanzibar, Tanzania for a medical volunteering trip organized by the Medical Students’ Association and hosted by NomuHub. Students from years 1-3 were divided into groups of 15 and 17 as they completed their 6-day expedition between 5th and 18th January 2020. The primary aim of this trip was to allow students to acquaint themselves with underprivileged hospital settings and to apply their clinical knowledge in a more practical setting.



Following is a first-hand account of the trip, with some interesting experiences and challenges of the journey.

Day 1: We set forth with excitement galore and that remained intact even after we touched base, in spite of the multiple flight delays. The first shock was the high level of humidity, followed by a tinge of nervousness and uncertainty about everything. Would we be able to make it through? Hussain, our entertaining tour guide, introduced us briefly to the history of Zanzibar, taught us the basics of Swahili, and sang with us the addictive song "Jambo Bwana".

Day 2: We made an early start to the day and headed to our first day clinic in the villages. We were assigned different re-

sponsibilities and these included vitals (BP, hemoglobin, glucose and BMI), pharmacy, and out-patient consultations. Initially, there was confusion but with guidance, we were able to adapt and serve more than 85 patients on our very first day. Following our work at the clinics, we enjoyed a tour at the spice farm. The highlight was definitely the natural makeup, in addition to an insight into exotic plants and spices.

Day 3: This was very similar to the second day in terms of tasks and responsibilities, but we were placed at a different location. We got the opportunity to see quite a few interesting cases – child with tuberculosis, plenty of fungal infections and suspected renal cell carcinoma. The best part was the boat ride on the calm waters of the Indian Ocean. We got the most entrancing view of the sunset and ended the trip on a high by plunging into the depths of the ocean from the boat’s roof top. Post-dinner, a storm struck the island and we had the life-changing experience of running blind in knee-deep water through the narrow alleyways of Stone Town, Zanzibar.





Day 4: Busiest day at the clinic. There was no respite as we worked tirelessly to end the long queues. Some students got the fantastic opportunity to assist in draining a large foot abscess while the rest of us helped with the other consultations. Strangely, the majority of cases that day required a referral for chest pain. The exhausting day ended with a tour to Prison Island, which was historically a checkpoint for yellow-fever infected patients. Today, it's a tourist paradise with clean beaches and turtles that are winning at life, at the young age of 190 years.

Day 5: We worked in a school facility

that was converted into a clinic. This one was, by far, the most organized and spacious of all the clinics that we had visited so far. We did a lot of learning on the job but also ended up learning a lot about bargaining when we went shopping for souvenirs later that day. We lost our way roaming around the narrow streets but what's a little adventure without panic? We eventually did find our way home and the goodbyes were beginning to set in.

Day 6: Our last day was perhaps the best of the lot. We visited 2 different schools to raise awareness on different stigmatized health conditions like epilepsy and sexually transmitted infections. We tried our best to break the language barrier and used a lot of hand gestures and drama to keep the students at the school engaged. Songs and music kept them hooked to our presentations. We ended this magical trip with a tour to Paje beach where we rented motorbikes, watched kites and took enough pictures to last a lifetime. With heavy hearts, we held our farewell dinner and enjoyed the last moments of pure camaraderie.

This trip has been a wonderful lesson in medicine and clinical practice but an even bigger lesson in friendship, trust and responsibility. Some days were difficult and some extremely fun, but we paddled forward as a group, hands held and with hearts in the right place. If we get another opportunity to visit this magical island, we're definitely singing "Jambo Bwana!"



TEAM LUNCH

Team spirit is the motivation that keeps hearts and minds working in harmony. With that in light, on 23rd January 2020, MSA’s board and committee heads spent an afternoon of light conversation at La Mer, Dubai.

We reached famished and immediately dug into our meal. Eventually, the conversation shifted from a formal vibe to casual discussions on first and current impressions. We played ‘Psych’, a fun party game where players make up fake answers to real trivia. It was a fun way to get to know each other better. This was followed by a good game of ‘Truth and Dare’, leading to some very surprising revelations. All in all, this was a lovely way to get the team excited for the upcoming semester.



HATTA KAYAKING TRIP

Friends, food and cheer, there is no better way to get 2020 started at the College of Medicine. The MSA’s Social Committee organized a trip to Hatta Dam, Dubai. The day started with a two-hour ride on five buses packed with students from Foundation Year to Year 3 which left campus at 9 a.m. The first event in the day’s itinerary was kayaking in the fresh waters, a first-time experience for many students. The relaxed paddling soon transitioned into a competitive challenge.

After the activity, everyone was still brimming with excitement and proceeded to participate in various activities such as tug-of-war and card games. The good weather, impressive barbeque feast and charming conversations marked this trip as a wonderful memory for the students.

PSYCHE PROJECT - SESSION 3

Psyche Project is one of the front-running projects of the Scientific Committee. It was started with the aim of de-stigmatizing conversation around mental health and addressing human psychology. In continuation from the activities of last semester, the first Psyche Project session was organized at M27, on the afternoon of 28th January 2020. The theme of the session was to develop an overall understanding of psychotherapy techniques.

To make the session engaging, participants wrote about their innermost fears as well as coping mechanisms. Each fear was anonymously addressed as a group and people facing similar challenges offered their thoughts, experiences and perspectives on how they deal with these obstacles. Advice was liberally exchanged, with the hope that a sentence or two may help someone cross their own hurdles better. The session ended on a heavy note but everyone definitely left with food for thought. After all, they say that a burden shared is a burden halved.



Research & Development Association

“UAE MEDICAL LIABILITY LAWS: WHAT HEALTH PROFESSIONALS NEED TO KNOW?”



Under the guidance of Dr. Sara Shorbagi, the Research and Development Association organized a lecture titled: “Medical Liability Laws in the UAE: What Health Professionals Need to Know”. This was delivered by Dr. Layla Al Marzouqi, specialist cardiologist at Dubai Health Authority and Director of the Health Tourism Department in Dubai. The lecture was held in the Medical College on Monday 27th January 2020. Faculty and students from clinical years attended the lecture which discussed various laws in the UAE with regards to liability of doctors in several situations. It facilitated open conversation and discussion with the students and faculty members with regards to expectations and obligations that students will face once they graduate and join the medical field. The lecture also addressed the concept of being a safe doctor, the importance of documentation and how to avoid any possible mishaps that might lead to medical errors. The floor was later opened for any enquiries and possible discussions. Overall, this lecture was extremely beneficial for the students who were not exposed to such concepts previously and were unaware of any possible liability that might fall upon them once they join medical teams in the sector.



Peer Advisory Committee

ROUTE TO A U.S. RESIDENCY

On Monday 20th January 2020, the Peer Advisory Committee held a session to shed light on the path of residency training. Dr. Abdallah Malas, Class of 2016, shared his experience of pursuing internal medicine in the US detailing the steps to being a board certified internist. In his talk, he highlighted the major challenges that he was faced with and the culture clash that one might encounter when moving to the U.S. Additionally, he provided advice to prospective applicants.



Subsequently, Dr. Mahmoud Ismayl, Class of 2019, elaborated more on the process of application to residency programs. He tackled common misconceptions and delineated the proceedings following graduation, the importance of the internship year and the significance of planning ahead. Dr. Mahmoud outlined the general schemata of how to decide on the path after medical school and how to pave the way and zero in on the target they set out for themselves.



MEDICAL ELECTIVES ORIENTATION

On the 27th and 28th January 2020, a grand assembly was held to introduce and orient the Year 4s in their quest to secure an elective; a Year 4 curriculum requirement. Year 5 students explained the process of applying to the desired elective spot both nationally and abroad as well as the pros and cons of electives in the UAE, Jordan, Lebanon, Ireland, Canada, UK, Japan, Germany and the United States.

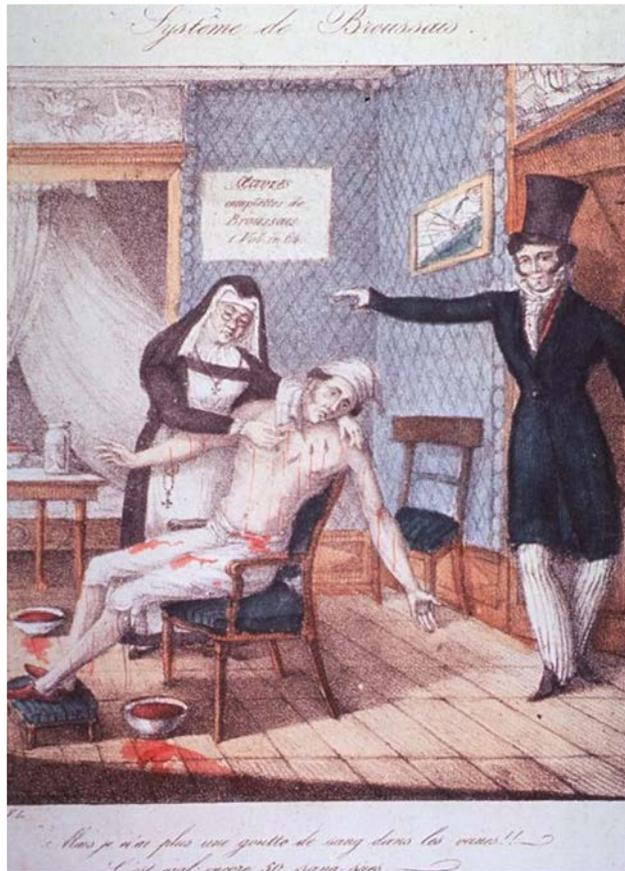


MEDICAL MISHAPS

By: Drishti Kampani

Racing to the Past, Without Antibiotics

A careless lab mistake in 1928, led to the development of the greatest achievement in modern medicine – Penicillin. The discovery of this game-changer ushered in an era of antibiotics which dramatically helped increase the average lifespan from 47 years in 1920 to about 72 years in 2019.



Sir Alexander Fleming, a Scottish researcher, is credited with the discovery of penicillin. At the time, Fleming was experimenting with the influenza virus in St. Mary's Hospital Laboratory in London. Interestingly, he was often described as a careless lab technician. On his return from a two-week vacation, he found that a mould had developed on an accidentally contaminated *Staphylococcus* culture plate. The mold seemed to prevent growth of the organism. The spark of curiosity led to Penicillin – the wonder drug that helped treat formerly severe illnesses such as bacterial endocarditis, meningitis, gonorrhea and syphilis.

Before the development of antimicrobial drugs, how were infections treated in the 20th century? Bloodletting was one such practice, dating back to 1000 B.C. in Egypt. According to ancient medical theory, the four humours of the body (blood, phlegm, black bile and yellow bile) had to be balanced for good health and infec-

tions were thought to be caused by an excess of blood. Hence, excess blood was removed from afflicted patient via leeches, cupping or incisions. Mercury and bromine were used to treat infected wounds and syphilis. Both these chemicals caused more damage to normal cells than infected ones. The treatment for tuberculosis used to be a shift in scenery for fresh air.

Today, we've progressed to a better understanding of infections and have devised multiple antibiotics for treatment and prophylaxis. They're used -or rather misused- to treat minor infections like common cold to systemic infections like shock; for preventing potential infections in minor dental procedures as well as major invasive surgeries like organ transplantation.

Unfortunately, this boon is heading to its expiration date. Nearly a century's worth of research will become redundant if we don't take action soon. In spirit of Darwin's 'survival of the fittest', microbes are rapidly evolving to resist the effect of antibiotics, leading to a phenomenon known as 'antimicrobial resistance'. What this means, is that no drug will be effective in eliminating infections entirely. Are we headed back to the 1800s, an era without penicillin, an era where a common cold could potentially kill?

The rapid emergence of resistant bacteria is occurring worldwide, endangering the efficacy of antibiotics. Antibiotics remove drug-sensitive competitors, leaving resistant bacteria behind to reproduce as a result of natural selection. This antimicrobial resistance crisis has been attributed to the overuse and misuse of these medications, as well as a lack of new drug development by the pharmaceutical industry due to reduced economic incentives and challenging regulatory requirements.

Aside from irresponsible prescription practices and unregulated over-the-counter sale of antimicrobials, the biggest challenge it faces is the lack of interest shown by pharmaceutical industries in finding the solutions to this problem. Since antibiotics are used for short periods of time and often curative, they are just not as profitable as drugs for chronic conditions like diabetes or cancer. Moreover, infectious disease specialists and microbiologists recommend holding the newly developed drugs as a backup option instead of immediate prescription, for the fear of promoting drug resistance. Instead they choose to use older drugs with similar outcomes. Consequently, this practice leads to a diminished return on investment for the pharmaceutical companies, further diminishing their interest in pursuing antibiotics as a promising field.

The World Health Organization has labelled antibiotic resistance as 'one of the biggest threats to global health, food security and development'. If no action is taken, drug-resistant diseases could cause 10 million deaths annually by 2050 and an economical slowdown as bad as the 2008 financial crisis. By 2030, it could lead to 24 million people being pushed to extreme poverty.

Action is needed, urgently and imperatively. Right from awareness programs to maintaining a population registry and drug development, there's an ocean of work that needs to be done and every drop will count.

At the level of students studying human health, spread your knowledge to family, neighbours, community. Identify and warn against popping antibiotic pills when not needed. Participate in research studies that pinpoint wrong attitudes amongst health care professionals.



Join projects working on antimicrobial drug development. Learn, share and contribute. Make a difference!

RECOMMENDATIONS

By: Dua'a AlNusairat

خاطرة الشهر

"ولا تَأْمَنَنَّ لأحد في رفقته حتى تراه في ثلاث،
شدةً تُصيبُك، ونعمةً تصيبُه، وجفوةً بينكما..
فإن أغلب الناس تكشِفُ عما في نفسه
الأولى .. وآخرون تفتنهم النعمة..
فإن سَلَموا من الشدة والنعمة فاختبرهم في
الجفوة..
فإن كفران العشرة أصل الكواشف."

Movie of the month:



Movie title: *The Sky is Pink*

Book of the month

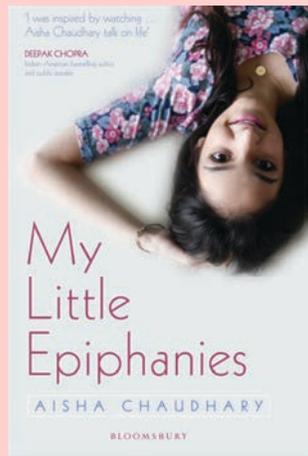
Book Title: My Little Epiphanies

Author: Aisha Choudhary

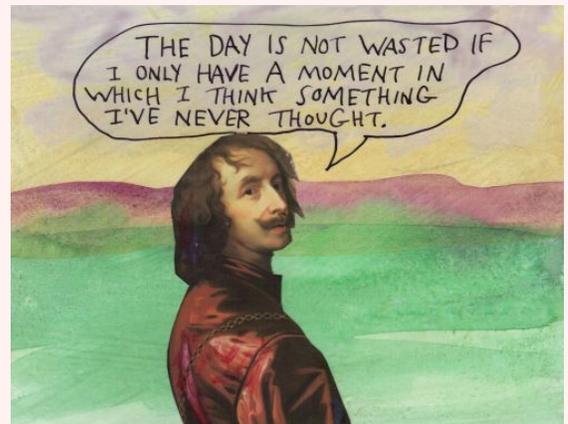
Excerpt:

"Then is not
now, but now
will soon be
then."

" Are we living
to die or dying
to live?"



Painting of the month:



By Michael Lipsy



For any comments regarding this newsletter or suggestions for improvement, you can reach us at:
comnewsletter@sharjah.ac.ae

DOCTOR'S ORDERS - DR. SARRA SHORBAGI

TECH NECK: AN ONGOING EPIDEMIC

What is Tech Neck?

It is neck pain caused by prolonged flexion of the cervical spine while using a computer or smartphone.

How does Tech Neck occur?

Our cervical spine is not made to carry heavy loads; for every 5° of flexion, the weight of the head increases by a factor of 3. This strains the spine and causes a lot of tension on the neck, shoulders, and upper back.



What are some of the problems you can get from Tech Neck?

- Chronic neck pain because of strained neck muscles.
- Inability to keep the neck in proper posture
- Structural back and neck problems
- Numbness and tingling in arms and hands due to pressure on the nerves on the neck

Tips to Prevent Tech Neck:

- Position your screen higher
- Sit in a chair with a headrest
- Get up and walk around and position your neck differently, even if it's just for a minute
- Set reminders to take five-minute breaks from your computer
- Correct your posture.
- Stretch and strengthen your muscles
- Regular exercise



Check this out for simple posture exercises: chiropractic-uk.co.uk