

## APPNA FALL CONVENTION 2023 NOVEMBER 16-19, 2023 HOUSTON, TX



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JAVED IQBAL SENIOR VICE PRESIDENT, PRIVATE EQUITY JAVED@ZTCORPORATE.COM 310.384.9818

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## President's Message



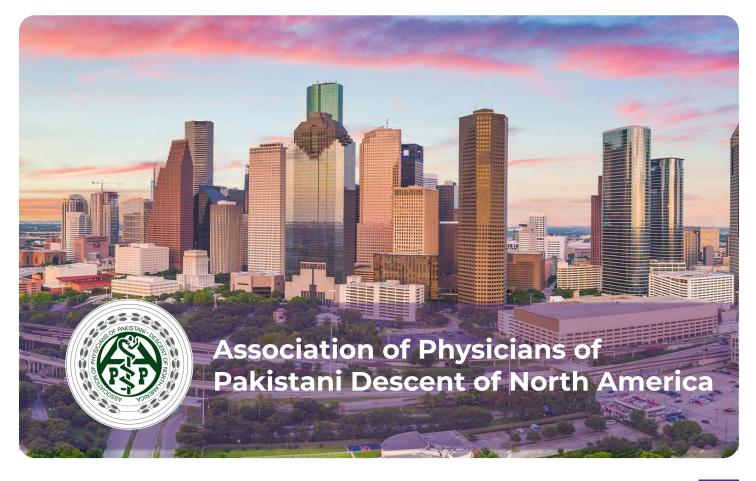
Welcome to the 2023 fall convention at Houston. I am most thankful to the host committee, most ably led by Dr. Arman Raza, for putting together a great program for you.

The meeting is already the biggest fall meeting in the history of APPNA in terms of the number of participants. The enthusiasm of the members continues to show the ever-growing confidence of the membership in the organization.

Please enjoy state of the art CME, wonderful entertainment and great food. We look forward to your feedback by writing to appna@appna.org.

Regards,

Arshad Rehan





## Chair Host Committee Message



On behalf of the host committee, I welcome you all to APPNA Fall Convention 2023 in our great city of Houston. We are grateful to APPNA, in particular the President Dr Arshad Rehan, for giving us this opportunity. I would like to specially thank our co-chairs Drs Haider Afzal and Asim A. Shah and our APPNA South Texas Chapter President Dr Naveed Zafar for their tremendous help in this endeavor.

As the fourth most populous city in USA, Houston prides itself in being the home of world's largest medical complex, Texas Medical Center – which includes the world's largest children's hospital and world's largest cancer hospital. In addition, Houston is home to NASA's Johnson Space Center, which is the no.1 attraction to the region for international visitors.

Houston is the most diverse large city in USA and is home to some of the best restaurants and shopping in the country. The Galleria Mall is the largest in Texas and 4th largest in US. We also have a beach in Galveston, which is only a short 45-minute drive from Houston.

At the APPNA Fall Convention 2023, we have an excellent 3-day event starting with Qawwali Night on Thursday with world-renowned Abu Muhammad and Fareed Ayaz followed by Alamgir and Noori Band on Friday and finally the biggest name in entertainment from Pakistan, Ustad Rahat Fateh Ali Khan, on Saturday to entertain us all. During the day, we have excellent CME program, YPC seminars and Social Hour to keep everyone busy and engaged. Also, the famous APPNA Bazaar is also here with over 60 vendors from the sub-continent.

In addition, we have a food street set up right outside Hilton Americas in the Discovery Green area with several options from our local Houston food establishments.

We hope you all have a great time during this event in Houston and create wonderful memories here.

Sincerely,

Syed Arman Raza MD, FACC, FSCAl Chair, Host Committee, APPNA Fall Convention 2023.



## Host Committee



Syed Arman Raza, MD Chair



Riaz Ul Haque, MD



Atif Qureshi MD, FCCP



Hassan Arif, MD



Mehmood Khan, MD



Asim Shah, MD Co-Chair



Syed Zaidi, MD, FASN



Avais Chatha, MD, FACG



Hibba Haider, MD



Mirwat S. Sami, MD, FACS



Tara J Rizvi, MD



Haider Afzal, MD Co-Chair



Naveed Saqib, MD



Bilal Lodhi, MD



Junaid Kamal, MD



Muhammad A. Mujtaba Jajja MBBS, FASN, FAST



Zaka Khan, MD, FHRS



Naveed Zafar, MD



Abbas Jafri, MD, FACP



Fabia Younus, DDS, MSD, MS



Lubna Khawaja, MD



Murtaza Arif, MD



Zeenat Safdar, MD, MS, FCCP, FACP, ATSF







Faisal Masud, MD, FCCM



M. Siddique Khurram, MD



Sara Andrabi, MD, FACEP, CPPS



Riaz M Chaudhry, MD



Tanveer Khan, MD



Atif Akhtar, MD



Gulzar Nathani, MD



Mahmood Mehkri, MD



Shahid Hasnain, MD



















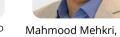


















## Chair CME & Co-Chair Host Committee Message



Dear APPNA Members,

Welcome to the APPNA FALL meeting in Houston, after almost 10 years, and welcome to our amazing line up on speakers, and CME program. We have 12 lectures, 6 each on Friday and Saturday, and 12 highly qualified speakers, all with academic backgrounds and national/ international reputation. I have tried to include topics of interest to all physician, but I am sure I may have failed to satisfy some, but that was not intentional.

This year, unlike other years, we start the CME program at 9 am, so we can get undivided attention of members and finish at noon, again so members can go and attend to other business. Fall meeting is full of other sessions, agenda items, and I hope you will enjoy them, in addition to the CME program.

Lastly, I would like to thank our dedicated team of 12 speakers, 2 moderators, for their hard work, and diligent organization. It was not possible to arrange such a high level CME without this awesome team.

Sincerely,

Asim A. Shah, MD Chair CME Committee Co-Chair Host Committee

## Co-Chair Host Committee Message



I would like to welcome you all to Houston for APPNA fall meeting 2023. We are looking forward to a very successful meeting which will showcase the APPNA as well organize, United and the most representative organization of Pakistan.

We as chair and host committee will ensure that everyone will enjoy the meeting for that we have arrange best of entertainment, banquet, social forums and educational sessions.

Looking forward to host you all.

Haider Afzal M.D. Co-Chair Host Committee



## From The Editor's Desk



Dear fellow APPNA members,

Wassalam and welcome to APPNA fall meeting 2023 in Houston. I would like to start by appreciating the efforts of APPNA for the humanitarian work that it has been doing in Pakistan and the USA since it came into existence. APPNA and its members were at the forefront of every disaster relief effort, whether it was COVID 19 or the unprecedented flood of 2022 in Pakistan.

We are all honored and delighted to have you in the great city of Houston. The city of Houston has many names, Space city, Bayou city, H-town but we like to call it a mini Pakistan. The city of Houston has a formal sister city relationship with Karachi as well. The November weather is nice in Houston and we certainly hope that you will enjoy good desi food, lots of places for shopping and trips to Galleria, museum district, Galveston island and NASA space center.

Our local host committee has worked hard to bring you a memorable event. We all hope that you will have a fun filled weekend in Houston. We have an excellent and comprehensive CME program planned for Friday and Saturday by highly qualified speakers. We will have social forums, entertainment, desi bazaar, reunions and much more. Overall, our dedicated team has put together an event full of educational activities and entertainment.

In the end, I must recognize and convey my sincere gratitude to the entire APPNA STC team and various supporting staff that helped us bring this Fall 2023 publication into existence. Please give us your constructive feedback so that it will help us enhance our future publications and journals.

I wish you all a wonderful time in Houston.

Riaz Ul Haque, M.D. Chair Publication Committee APPNA Fall Meeting 2023 President Elect APPNA South Texas Chapter 2023



## President Elect's Message



Dear APPNA Family

Asalam Alaikum Welcome to the 2023 APPNA Fall Meeting in Houston Texas . As the President elect of APPNA 2023 and member of the Board of Directors (BOD), I would like to extend warm greetings to you and your family from Houston Texas.

Drs. Arman Raza, Haider Afzal, Asim Shah and Naveed Zafar and host committee have put in a lot of effort, energy, and time to arrange this spectacular event. The local host committee has put together an amazing

program for you and your family to enjoy. We are looking forward to many of APPNA members attending this event with their families as It promises to be the most attended Fall event ever. With top Pakistani performers such as Rahat Fateh Ali khan, delicious desi houston food, and shopping for your spouses it promises to be a great event. There are many CME lectures and other educational events for APPNA members to attend.

As BOD APPNA, we honor you and your membership and your attendance to such meetings which helps makes APPNA a vibrant association.

As we age as an organization, the only way forward is for APPNA to have a new generation of physicians graduates from US and Pakistan join us. We want to make this organization a 5000 member strong, and we ask you to please encourage your children who have newly become physicians to join the APPNA family. We will be working to change the membership structure to attract more members next year.

APPNA had a strong Summer meeting in Dallas and the BOD will continue to look for new cities for its event to engage new communities. I have already chalked out the APPNA local meetings and the international APPNA trips for 2024 well in advance for you to attend

We recognize that APPNA needs to commit more resources and energy into research and innovation technology and engage the younger generation of Physicians of Pakistani origin to join us by setting up membership of value to them and the general membership.

APPNA has achieved greater heights as an association under the leadership of Drs. Rizwan Khalid, Haroon Durrani, and Arshad Rehan. However, it's only the beginning and we have much more to achieve. We need to invest our resources in the right places and stay united together under one banner with one goal to make APPNA a stronger organization.

We have faced many legal and other challenges this year that has kept us busy, and we have resolved this amicably and moved on. We need to promote an inclusive and a positive culture in APPNA and we will continue to defeat personal agendas for the betterment of the organization.

I hope you and your family will have a wonderful time in Houston. Best wishes,

Asif Mohiuddin, MD President APPNA 2024



## Secretary's Message



Dear APPNA Members,

Thank you for giving me the opportunity to serve as a APPNA Secretary for 2023.

According to our new bylaws, the secretary is the recording officer of all BOD, Council and General body meetings.

It is the job of the secretary to help the President prepare an agenda for the meetings, while also keeping detailed records of the membership.

Our year started with a very successful Strategic planning meeting in Chicago. It was attended by more then two hundred APPNA members. Each committee chair presented his vision and plans for the future. President Dr Arshad Rehan shared his plans and was applauded for his efforts.

This year Summer meeting was a huge success. It was very well organized and attended by a significant number of APPNA members.

Since January, we have had 10 BOD meetings that were attended by most of the board members.

There have been three council meetings which were attended by the majority of council members.

Our Fourth General body meeting will be held during the Fall meeting in Houston.

All the meetings minutes will be available for review online and can be accessed by logging into the secured membership portal.

Our current membership stands at 3426 members.

This includes:

- 2491 Lifetime members
- 554 Annual members.
- 173 Physician in training members
- 36 Associate members
- 72 Emeritus members
- 09 Affiliate members
- 91 Student members

Once again thank you so much for giving me the opportunity to serve this esteemed organization.

Stay Blessed

Dr. Aftab Khan Secretary APPNA 2023 630-631-8683 1368khan@gmail.com



## Treasurer's Message



Assalamu Alaikum APPNA Family and Friends,

Welcome to Houston! I hope these next few days of good company and joyous festivities rejuvenate you for the rest of the year.

We are very fortunate to have an institution like APPNA that allows us to gather in this manner on a regular basis. To have a forum where friendships are maintained and opportunities for

tomorrow are forged for the betterment of our community is a great blessing.

As APPNA Treasurer 2023, I am very pleased to report that APPNA's financial strength is healthy and its programs are once again, vibrant and full of life. This year, APPNA's leadership and its finance committees continue to steward the organization towards better financial security through auditing and optimizing operational expenses, making better use of resources, expanding avenues for revenue generation, revamping our short and long term investment strategies, and providing better value for our membership through richer programs. The financial forecast going forward is also very positive. Planning for the 2024 programs is already complete including International trips. Healthy attendance is expected at all of the meeting venues and the trips are all projected to be sold out.

Once again, welcome and enjoy the fall meeting 2023.

Sincerely,

Tayyib Rana, MD Treasurer APPNA 2023



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#### TANWEER AHMED

IS A VISIONARY PATRIOT. A BUSINESSMAN BY PROFESSION, HE'S KNOWN FOR HIS PHILANTHROPIC EFFORTS. STARTED AS A YOUNG BOY OF A MERE 17 YEARS OF AGE, HE HAS WORKED TO BECOME ONE OF THE TITANS OF HIS INDUSTRY. ATTEND TO LEARN MORE OF HIS JOURNEY!



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## Immediate Past President's Message



My dear APPNA family,

In a couple of weeks, I will have the pleasure of meeting our members at the APPNA Fall Meeting . As we all continue to closely monitor the political turmoil in Pakistan, my hope is that all parties will put the interests of Pakistan above any issues and will join hands to serve Pakistan. It is imperative that Government/ all parties should work under the frame work of Constitution and assure the protection of Human rights.

We have gone above and beyond to create a culture of civility, respect and tolerance at APPNA. As your immediate past President, my emphasis has always been team work and bringing all parties to the table. It has been an excellent experience working with Board members, APPNA council and regular interactions with our amazing members.

As we are almost in the middle of Dr. Arshad Rehan Presidency, it is heartening to see the continued growth and success of APPNA.

I stand shoulder to shoulder with him and will always be there to support Arshad, who is doing a great job in taking APPNA to new heights.

My year as President was first year under new bylaws. Transition was not easy but with the unwavering help and support of all of you, we made it. Last year as I worked diligently on creating a positive and productive culture in APPNA, I remained equally focused on institution building.

I am very humbled and proud to share that in the year 2022, APPNA has been most profitable with record breaking income and profits. This is a testament to the interest and trust APPNA gained from its membership.

Close to my heart are few projects, of which opening an APPNA office in Pakistan and registering as an NGO is the top priority. I am happy to report that APPNA office was recently inaugurated in Rawalpindi Medical College Campus by Dr Arshad Rehan couple of weeks ago . The process of registering as an NGO is on going.

Some of the financial details and planning.

- APPNA have earmarked 50 K from last years profit to hire an expert in grant writing. Search for suitable candidate ongoing.

- As immediate past President, 205K was left in restricted account for investment in real estate for additional income to APPNA.

- \$250 K from last year profits for home building for flood victims in Pakistan. Total amount



for home building (appr 500 homes) for flood victims is over a Million dollars, rest raised by Social Welfare and Disaster Relief Committee. I am happy to report that majority of the houses have been built and handed over to victims. This phase will end in next couple of months.

At the core of our organization vision is charity work. I am extremely proud to share the achievements of SWDRC. APPNA SWDRC has been very busy during 2022. COVID-19 Pandemic relief work continued in 2022, provided over \$150k worth of food supplies in USA and Pakistan, total reaching \$2M since start of pandemic, including Food/ration packs to deserving families, PPE supplies to healthcare professionals, home O2 cylinder supplies to sick patients requiring supplemental Oxygen in various cities across the country.

APPNA SWDRC immediately started relief efforts for families affected by one if the worst flooding in the history of Pakistan. Over \$250k worth of cooked hot meals, ration/food packs, medicines, mosquito nets, hygiene kits, blankets and other needed supplies were provided in flood affected areas of Sindh, Baluchistan, South Punjab and KPK. In rehabilitation phase, over \$1Million is being spent to build 500 homes for flood affected families across the country including Sindh, Baluchistan, South Punjab, KPK and Gilgit including an entire Hindu village which was wiped out by floods in Sind, in collaboration with Custom healthcare society and HDF. I really appreciate the generous support of our donors which includes individual members, some of our chapters and Alumni associations.

APPNA success in our academic, healthcare, diplomatic and social work domains is purely due to dedication of our team.

As I step back from my role, I feel content knowing that APPNA is in really in good hands. Dr. Arshad Rehan as President of 2023 and Dr. Asif Mohiuddin as President elect of 2023, will take APPNA to new heights. I will stand shoulder to shoulder with them for any help they might need.

Looking forward to seeing you all in summer!

Long live USA! Long live Pakistan! Long live APPNA!

Haroon Durrani, MD Immediate Past President APPNA.



## **APPNA Strategy Meeting 2023**



APPNA strategic meeting for the year 2023 was held on January 27th and 28th in Chicago. Despite poor weather conditions in Chicago the meeting was very well attended.

The meeting had a morning session which started with a CME presentation on Opioid Use disorder. It was followed by the strategic planning meeting where all committees were introduced and the Chairs of each committee presented their goals for the year. There were 65 participants.

This was followed by an evening dinner and music where the total

attendance was 220 .It was a sold out event .Overall the meeting was very productive and successful .

I would like to thank the office staff as well as the members of the host committee for their tireless efforts including Drs. Mansoor Alarm, Aftab Khan, Amera Rehman, Samina Hijab, Samina Khattak, Maleeha Ahsan, Naheed Qayyum, Asif Syed and Tehmina Bajwa.

It is worth mentioning that the financials of the meeting ended positive .

#### Dr. Hasina Javed Chair Host Committee









## **APPNA Spring Meeting 2023**



The 2023 APPNA Annual Spring meeting was held in Orlando from March 16-19. President Dr. Arshad Rehan inaugurated the meeting. Ms. Fariya Afridi arranged a talent show on the inaugural night where members displayed their talent in singing, poetry and acting. On Friday AMA certified CME was arranged by Co-Chair Dr. Khurram Moin. A total of 8 hours of CME sessions were held. APPNA Khuddi talks series was hosted by Dr. Umer Khan and speakers talked about various topics including advocacy, innovation in healthcare, improving collective brilliance etc. Members did Eid shopping in the bazaar. Sponsors setup booths to display their products and services. Friday night banquet was well attended and followed by musical performances by Bilal Patel and Hassan Jehangir. Irfan Aslam was the master of ceremony. An Urdu mushaira was the

final event of the day enjoyed by poetry lovers.

On Saturday, PSL final match was watched by the cricket fans. A medical malpractice question and answers session with defence attorneys was hosted by Dr. Khizzar Shaukat.

Social forum with Dr. Moeed Pirzada and Raza Rumi was hosted by Dr. Abdul Jabbar whereby the state of freedom of expression and rule of law in Pakistan was discussed in a rather emotionally charged but cordial atmosphere.

APPNA council meeting was hosted by APPNA President Dr. Arshad Rehan and was attended by the board of directors and council members.

Khyber Alumni retreat was hosted by legendary Pashto actor Ismail Shahid and Pashto musicians performed on Rabab and tabla.

A golf excursion, male and female cricket, match, and tennis matches were also arranged. Saturday night banquet was attended by a large number of the members, five previous APPNA presidents, Dr. Moeed Pirzada, and consul general of Pakistan Mr. Ibrar Hashmi. The consul general was the keynote speaker as well.

APPNA secretary Dr. Aftab Khan and the president Dr. Arshad Rehan spoke about APPNA plans for the current year and president-elect Dr. ASIF Mohiuddin spoke about plans for next year. Local host committee was recognized. Plaques were awarded to Dr. Khurram Moin and Dr. Hameed Ahmad for helping with sponsorship for the meeting. It was followed by a dinner and musical performances by Ather Sani and Komal Rizvi. Sabeen Aslam and Farheen Mohiuddin were the master of the ceremony.

Sunday morning was the last day of the meeting. Guests were served a special Halwa Puri breakfast. Food at the meeting was arranged by Sabri Nehari.

Participants appreciated the arrangements of the multi day meeting and termed it rather equivalent to a summer meeting with the number of activities and events arranged.

Sharif Uz Zaman Khan, MD Chair Host Committee, APPNA Spring Meeting 2023







## **APPNA Annual Convention 2023**



The vibrant city of Dallas, Texas, played host to the highly anticipated Summer Meeting of the Association of Physicians of Pakistani Descent of North America (APPNA) from July 4th to July 9th, 2023. With attendance exceeding 4,000 people, including APPNA members, their families, and friends, the event showcased the vitality of this organization.

Financially, this meeting turned out to be one of the most successful in the history of APPNA. The abundance of attendees, coupled with a robust vendor presence, contributed to a significant increase in revenue. This financial success underscores the organization's continued growth and its ability to support its mission and initiatives.

The highlight of the event was undoubtedly the video link address of Turkey's President, who served as the esteemed chief guest& Turkey's ambassador. His presence not only honored the event but also symbolized the importance of international collaboration and partnerships in the field of healthcare. The President's address & ambasador's presence provided a platform for fruitful discussions and opportunities for cross-border cooperation in medical research, education, and patient care.

Local food caterers added another layer of excellence to the event, serving the most delectable and authentic Pakistani cuisine ever. The sumptuous dishes delighted the palates of attendees, offering a culinary journey through the rich and diverse flavors of Pakistan. The fusion of food and culture left a lasting impression on all those in attendance, enhancing the overall experience of the meeting.

Throughout the meeting, CME attendees had the privilege of participating in a wide range of educational sessions, symposia, and workshops. These sessions covered topics of great relevance to the medical community, with a focus on innovations in healthcare, patient care, and the challenges faced by healthcare professionals of Pakistani descent in North America. The event served as a platform for the exchange of ideas, knowledge, and best practices within the medical field.

In addition to the intellectual and professional aspects of the meeting, APPNA members and their families had the opportunity to enjoy social events, cultural showcases, and entertainment that celebrated Pakistani culture and heritage. These festivities included traditional music and dance performances, art exhibitions, and a culinary journey through the diverse and delicious cuisine of Pakistan.

The Summer Meeting of APPNA in Dallas, Texas, was a resounding success, fostering a sense of community and collaboration among medical professionals of Pakistani descent in North America. The event not only provided valuable educational and networking opportunities but also celebrated the rich culture and heritage of Pakistan. As a testament to its growth and impact, the meeting drew record-breaking attendance and showcased the organization's commitment to advancing healthcare and fostering cultural exchange. APPNA continues to play a vital role in uniting professionals and making a positive impact on the healthcare landscape in North America.

All of this would not have been possible without our hard working and experienced team led by our both event organizers Tipu Ahmed and Laiq Siddiqui.

Dawood Nasir, MD Chair, APPNA 46th Annual Convention 2023, Dallas, TX







## 1st APPNA Canadian Meeting 2023



The Canadian Chapter had the privilege of hosting the inaugural APPNA Canada meeting, a wonderful initiative spearheaded by President Dr. Arshad Rehan.

This momentous event took place from September 2nd to 4th, 2023, in the vibrant city of Mississauga, Ontario, known as one of North America's most dynamic locales.

The gathering offered a rich array of activities, beginning with live telecast of the Pakistan vs. India cricket match, followed by a sold-out Cruise on the Toronto Harbour. Attendees were fortunate to enjoy a well-attended Musharria, a world-class CME session, and the pleasure of a performance by the talented Shazia Manzoor during the banquet.

It was a source of great pride for the Canadian Chapter to receive a Certificate of Appreciation from Honourable Senator Salam Attaullah Jan. This meeting attracted local physicians and their families, as well as several physicians and board members from the USA. The Alberta chapter was also well-represented.

One of the most crucial moments of the event was the announcement of the Election results for the upcoming year's Board of Directors and the President-Elect for 2025.

The First APPNA Canada meeting was a resounding success, bringing together healthcare professionals from Canada and the United States in the spirit of collaboration and growth. We look forward to many more fruitful gatherings and endeavors in the future.

Sincerely,

Humaira Haleem, MD Chair, 1st APPNA Canadian Meeting 2023







## **Publication Committee**



Afraad ke haathon mein hai Aqwaam ki Taqdeer Har Fard hai millat ke Muqaddar ka Sitara---Iqbal

Iqbal's philosophy of "Khudi" extends beyond individual growth. He believed that when a society collectively embraces "Khudi," it can lead to progress, innovation, and positive change. By nurturing the "Khudi" of its citizens, a nation can tap into the collective potential of its people, leading to cultural, intellectual, and economic advancement.

APPNA's brilliant Khudi Edition emerged as a breath of fresh air-contributions from membership on what it means to be collectively and individually brilliant while paying homage to the individuals who contribute a sense of self awareness in their repertoire of charitable and other work. Print and video media were equally utilized with interviews of personalities like Mushtaq Chhapra Founder of the Citizens Foundation. He has become synonymous with philanthropy and social welfare in Pakistan. As the founder of the Citizen Foundation and the Patients Aid Foundation, he has dedicated his life to improving the lives of those in need.

Another interview of Professor Abdul Bari Khan of the Indus Health Network was featured. He is a prominent Pakistani healthcare professional and the CEO of Indus Health Network (IHN). IHN is a non-profit organization that operates a network of healthcare facilities, primarily in underserved areas of Pakistan. His leadership has been instrumental in improving healthcare access and quality for marginalized communities in Pakistan. The latter is a video recorded, from USA and Pakistan. A notable piece was an interview with Masood Akhtar, an Indian-born proud American Muslim entrepreneur and activist, founder of "United Against Hate." He is a keynote speaker/panelist/ columnist/ guest on TV shows.

Showcasing the achievements of personalities in the fields of medicine, social work and activism, this edition highlighted the heights of Khudi by the immigrants and how they worked collaboratively with the natives in the homeland. We hope we are able to continue this tradition of APPNA publications as a platform to congregate and present the best and the latest in such endeavors in future editions. Until then, stay tuned.

Saima Anis, MD, MPH DUHS 1998 APPNA Publication Committee



## **APPNA Scholarship Committee**

Dear APPNA family,

It gives me great pleasure to present the report of APPNA scholarship committee. As many of you know that the Alumni Scholarship Project was established after a generous matching donation of over one million dollars from one of the Nishtar Alumni of North America towards the Alumni Scholarship Program. Since the inception of the scholarship program the funds have grown more than \$ 3 million.

The mission of the committee is to provide scholarships to deserving medical students who do not have the means to continue their education and follow their dreams due to financial hardship. The vision of the committee is to promote excellence in the medical field by ensuring that no one is left behind just because he/she does not have the means and create a sense of generosity and desire to give to everyone.

Among others, the one of the goals of Scholarship Program is to help deserving students enrolled at their respective medical colleges in Pakistan to defray some of their educational expenses so they can continue their medical education. The money is distributed from the appreciation and income of invested funds. Each Alumni selects the students from their universities based on certain set criteria, such as the financial health of the family, the students grades and willingness to help others after graduation.

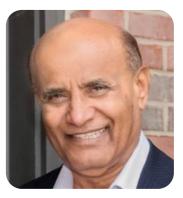
Currently there are nine medical universities alumni participating in this program and total assets are over \$3 million. Last year hundreds of scholarships were granted to their respective Alumni students and Nishtar medical university alumni granted scholarship to 55 students.

Lastly, the APPNA scholarship committee requests all the Alumni members to donate generously to their Alumni scholarship funds, so that this mission continues.

Sincerely,



Muhammad Aslam, MD Chair APPNA Scholarship Committee, 2023



Ghulam Qadir, MD Co-Chair APPNA Scholarship Committee, 2023

## **APPNA Young Physicians Committee**



Dear APPNA Members,

The goal of the APPNA's Committee for Young Physicians (YPC) is to assist young physicians in navigating the complicated and often overwhelming process of obtaining US residency and fellowship positions. YPC conducts regular monthly online webinars and workshops for the applicants to guide our young physicians in every aspect of their journey to becoming competitive candidates for the training spots in the US.

APPNA YPC works with a highly accomplished group of volunteer mentors who help our young physicians daily through our Facebook portal and other mentorship social media groups. We saw a sizeable increase in the number

of young Pakistani physicians matched for training spots in the US this year, which increased from 300 to 600 matched positions. Most of these young physicians were helped with their visa processing by the members of the APPNA YPC and APPNA Advocacy Committee. We extended free membership of APPNA to all the applicants and added more than 200 new members in training. For the first time, we have created an advisory group of more than 20 Pakistani program directors from the US that provides mentorship to our young physicians. One of the threats to APPNA has been insufficient investment in projects that create a sustainable funding source for the organization. As a chair of the YPC, I reached out to my counterparts in the RESA and MERIT committees earlier on to combine our efforts in creating an online library of all the educational lectures that we offer. We resolved to combine our separate YouTube channels to increase our subscriber base and public views to monetize one channel for all educational committees. I am happy to report that in the first 5 months of the year, we added more than 600 new subscribers and 1,000 public views, which helped us Monetize our channel.

In addition, we have added 3,500 new members to our APPNA YPC Facebook group this year and started a WhatsApp mentorship group for the fellows.

To make our young physicians more competitive for the training spots, APPNA YPC has created a student mentorship subcommittee of leaders from undergraduate medical education. The committee is tasked with creating an educational curriculum for the medical students to train them in professionalism, QI projects, DEI, and US healthcare system exposure. We hope to do a workshop for the medical schools in Pakistan to share the curriculum.

APPNA YPC worked with most of our alumni and chapters this year to conduct several webinars and seminars. Our most successful seminar was during APPNA's Annual Summer Convention in Dallas. More than 75 young physicians attended this seminar. We had a panel of five program directors from different specialties who participated in the interactive Q&A session with the applicants and judged their posters and oral presentations. We will be publishing and sharing the research proceedings from the meeting during our Fall meeting in Houston. This digital publication is an effort to develop the APPNA American College of Medicine Journal in the future.

Our observership subcommittee put together a state-of-the-art program that has provided around 150 observership placements. This committee has also helped us raise funds to cover the administrative cost of the APPNA YPC. APPNA YPC is the only committee of APPNA that is financially self-sufficient at this point.



Our Mock interview committee has received close to 800 requests for a 1:1 interview, and our committee has been able to assign all candidates to the mentors.

We have revised the APPNA YPC Road to Residency guide after 4 years, and we hope to share the new guide with the students during the APPNA YPC Fall meeting session.

APPNA YPC is collaborating with NAMA to arrange a Medical School Admission Seminar under Dr. Mujtaba Qazi's lead in the Fall Meeting.

#### Future Directions:

We are working on starting an APPNA YPC Research Travel Award that will be awarded to the medical students and trainees whose poster submissions are selected in the top 5 best submissions for the APPNA YPC session in the Summer Meeting Convention every year. This travel award will cover the cost of travel, lodging, and attendance at the APPNA Annual Convention for the awardees.

APPNA YPC loan subcommittee is working closely with the APPNA Foundation to put together a proposal to submit to the council and the APPNA BODs for approval. This proposal will reorganize the dormant loan program so we can restart our loan program for young physicians.

APPNA YPC has extended its help and expertise to the Pakistan Medical Council (PMC) to work collaboratively towards WFME accreditation. The application has been submitted, and the audit visit is planned for November.

APPNA YPC will work on developing the APPNA VSLO program to help medical students from Pakistan secure elective opportunities in the US during their medical school training.

APPNA YPC has conducted numerous webinars this year that covered all the aspects of successfully navigating the US residency match. These webinars can be accessed through our YouTube channel. In addition, our mentors help our young physicians 24/7 through our APPNA YPC Facebook group. I would like to express my deepest appreciation to all my APPNA YPC committee members, volunteers, and advisors for their selfless dedication to the cause of APPNA YPC. To join the APPNA YouTube or APPNA YPC Facebook group, please use the following links:

To join the APPNA YouTube of APPNA YPC Facebook group, please use the following lif

Facebook: https://www.facebook.com/groups/308140919099/. YouTube: https://www.youtube.com/@appna\_org For suggestions, please contact us @ ypc@appna.org.

Sincerely,

Nauman Ashraf, MD

Chair, APPNA YPC 2023 Secretary, Liaquat Alumni 2023 Chair, NEC PAPANA 2023 Vice Chair of Education, PAPANA 2023 Psychiatry Residency and Addiction Medicine Fellowship Program Director - KCU-GME Consortium/Ozark Center Associate Professor of Clinical Psychiatry, University of Missouri Adjunct, Associate Professor of Psychiatry, KCU



## **APPNA Alabama Chapter**

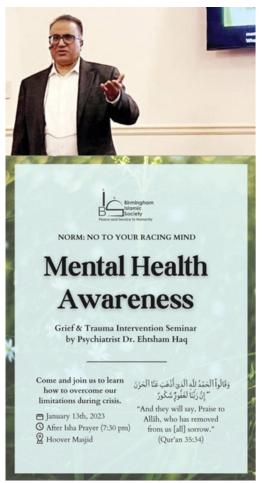
Over the years APPNA Alabama chapter with its team of dedicated physicians and youth have worked together to support health, youth leadership and various community needs in Alabama and beyond .

Many short and long-term projects are ongoing and successfully accomplished by Alabama Chapter, including free service medical clinic, RCCA – a joint venture of Appna Alabama chapter and BIS providing free medical services to the local community, helping local community and organizations since the time of Covid pandemic and ongoing dedication towards youth leadership by providing our young community members and students with guidance, support in training goals and volunteer time has been a great contribution since day one.

This year our Alabama chapter president Dr. Ehtsham Haq, along with a support team participated in mental health awareness seminar and supported to establish NORM (Say: No to your racing mind) as a wellness initiative support group with goals to raise community awareness on various mental health issues, offering grief and trauma intervention seminars, youth well-being discussions, and free medical mental health assistance at RCCA.

The Appna Alabama chapter will continue its efforts addressing various health and social needs of our community and beyond with its team of dedicated individuals. Special thanks to our youth Azka, Iman, Numair and others who supported chapter activities.

Aniqa Baqauddin, MD Secretary APPNA Alabama Chapter.



### Appna Alabama Chapter Executive Committee



ima Zaidi , MD . Treasurer



Aniqa Baqauddin, MD. Secretary



Ehtsham Haq, MD. President .



## **APPNA Great Cincinnati Chapter**



APPNA Greater Cincinnati Chapter had another successful year in accomplishing its core missions; community engagement, education and philanthropy. We partnered with ChildLife Foundation and helped them raise funds to continue to provide free world class healthcare to poor and needy children in Pakistan through their vast network of healthcare facilities. Our annual educational forum was held in May and as always was attended and appreciated by community physicians. Several pharmaceutical companies supported and sponsored the event. The topics

included Complications of Peripheral Edema, Cardiac Transplant,

and Role of physicians in providing quality care; all pressing issues of today's medicine. This year we had the first APPNA GC Picnic to appreciate our lifetime members and Friends of APPNA GC. Pakistani Mangoes were the highlight of this picnic. During our annual dinner and Gala in October, we invited Indus Hospital and Healthcare Network and helped them raise funds to add more primary care clinics throughout Pakistan (cost around 50000/ year to run a rural Clinic). Our annual gala was well attended and in addition to great food, it featured performances from Bushra Ansari and her sister Asma Abbas. Our event concluded with an entertaining concert by Komal Rizvi. Twenty five percent of the proceeds from Gala ticket sales were donated to Islamic Relief USA to help the humanitarian crisis in the Middle East. And last but not the least, in November, APPNA GC will continue its tradition to partner with AliGarh Alumni Association to live broadcast the Annual Mushaira to the Cincinnati community. This year we had to transition our leadership from Dr. Farhan Zafar to Dr Khurram Bari mid year due

to Dr. Zafar moving to Boston, Thanks to our executive committee, this transition was seamless. We are very thankful for the years of volunteer service Dr. Zafar provided to our chapter.

Dr Khurram Bari President APPNA GC 2023





## **APPNA Maryland Chapter**



The Maryland APPNA chapter (founded in 2021) is still young but has accomplished many goals.

As one of the founding members we have collectively registered the Maryland chapter with the state of Maryland, as a tax-exempt non-profit 501c3 organization and continue to steadily increase our membership. We have done several social welfare projects. We have collaborated with ICNA and held extremely successful health fairs at several locations. We have administered hundreds of flu vaccines as well as free lipid panels and screening tests for the community, distributed face masks, and provided diabetic education. We continue to provide health education to local places of worship.

We have started our telemedicine project for mental health and will soon be starting tele neurology for our non-affording community members. We aim to provide highly personalized care by board certified physicians from the comfort of their home by telehealth.

Our physicians and executive committee members were also involved in different social welfare projects for Pakistan- especially empowering women and women education. In the US some of our social welfare projects include helping the local Afghan refugees, funding local school libraries and continuing active participation in community health fairs, in collaboration with ICNA to provide free health care services to minority communities. We strive to collect locally for all central APPNA projects and relief efforts for local and global crisis.

We strive to promote membership engagement and



have held several successful events including annual summer picnics and annual dinners in the winter. We had our 2nd Annual Maryland APPNA chapter dinner and CME which was attended by 120 people and was a great success, complete with live entertainment. We arranged 3 AMA category 1 CME credits along with the dinner. The upcoming annual dinner will be in winter 2023-on November 4th.

Our aim is to maximally grow and engage the Maryland physician community and provide a platform for physicians to volunteer, network and give back to their communities. Our platform is to collaborate fully with local organizations and enhance their offerings as well as take on new projects. Please donate to https://mdappna.org and collaborate with us on our many welfare projects. Let us all work together to grow our APPNA Maryland chapter community!

Samina Qureshi, MD President, APPNA- Maryland Chapter 2023 email: squreshi15@hotmail.com



## **APPNA Southern California Chapter**

ASW, Appna Southern California chapter had annual Gala dinner and Entertainment by Adeel Burkee on September 23rd at Sheraton Garden Grove Hotel. Approximately 200 people attended, one hour non- CME lecture on Role of Primary care in reducing Cardiovascular Risks given by Dr. Marriyam Moten followed by social hour, few speeches, dinner and Entertainment by Adeel Burkee and his performance was superb.

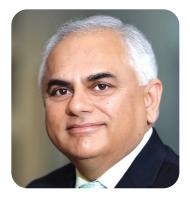
Thanks

Yasmin Qasim, MD. FASCP President local chapter APPNA SoCal



### Extreme Heat affects our Mental Health Asim A. Shah M.D. Professor, Psychiatry, Family & Community Medicing

### Professor, Psychiatry, Family & Community Medicine, Baylor College of Medicine



As the nation experienced scorching temperatures this summer, extreme heat is affecting everyone across the country. While heat can make anyone irritable, people with mental health conditions experience escalate effects of severe heat compounded by irritability. Excessive heat causes changes in emotions and behavior that can result in feelings of anger, irritability, aggression, discomfort, stress and fatigue. Heat alters those behaviors because of its impact on serotonin, the primary neurotransmitter that regulates your mood, leading to decreased levels of happiness or joy and increased levels of stress and fatigue.

The most vulnerable groups affected by heat and mental health include people with preexisting conditions and people who use substances. People who already suffer from stress, anger or anxiety will experience increased serotonin. If people use substances, especially alcohol, they need to be more hydrated. Combining substance use with heat requires even more hydration.

All mental illnesses increase with heat because it results in more fatigue, irritability and anxiety and it can exacerbate depressive episodes. Signs of heat impairing mental health start with irritability, decreased motivation, aggressive behavior and sometimes mental fogging. In worse cases, it can cause confusion and disorientation. While avoiding the heat may not be possible, hydrating with electrolytes and keeping your head covered when going outside is always recommended. If not, pour some water on your head to cool down and try doing things in the shade. If you normally go for walks outside, move them inside by walking in the mall or a large space with air conditioning.

If you take medications, consult with your provider before mixing your dose with excessive heat. Some medications for mental health, such as lithium for bipolar patients, might not pair well with heat. Lithium goes through the kidney, so if you sweat more, levels of lithium fluctuate. Some antibiotics, antifungals interact with sunlight and excessive heat also. If you are out in the heat and using lithium, levels may fluctuate. In that scenario, we have to be very careful and either adjust the dosage of lithium or avoid heat.

Previous studies on emergency room visits explore hospital visits due to heat and mental health. A study in JAMA Psychiatry reported about an 8% increase in emergency visits due to the effects of heat on mental health. If you feel affected by severe heat, speak with your primary care provider or mental health specialist.



### Islamic Arts Festival Houston Khawaja Azimuddin, MD

Houston is home to the Islamic Arts Festival, the largest festival of Islamic arts in America. It was started in 2014 by one of our own, a Dowite and past president of APPNA STC, Dr. Khawaja Azimuddin. Since its humble beginnings in 2014, the festival has grown to become a national institution. Each year, over 50 artists, some internationally acclaimed, come from all over the USA to participate in the festival and bring together a dazzling display of over 5,000 pieces of Islamic art under one roof.

The festival is organized under the umbrella of the Islamic Art Society, a 501 C3 that aims to share the rich heritage of Islamic arts. In doing so the society hopes to promote the positive image of Islam and Muslims in America. Art is a universal language and by sharing Islamic arts they hope to promote mutual understanding and bring the broader American community together.

The prevalent theme in Islamic Art is Quranic calligraphy written in beautiful styles. There are intricate decorative designs consisting of undulating floral or petal arabesque patterns seamlessly repeating to present a sense of the Infinite. There are no human forms, instead, Islamic art uses floral or geometric patterns to provide an element of serenity and tranquility. Some of the iconic examples of Islamic art are the Alhambra, Taj Mahal, and the Blue Mosque, and the society aims to share this amazing heritage.

Apart from the festival, the society organizes art lectures, workshops, and live demonstrations in libraries, colleges, and universities. In arranging Islamic art programs, the society has collaborated with prestigious institutions such as the Museums of Fine Arts Houston, the



Asia Society, Rice University, the University of Houston, and Muslim organizations such as ISNA and IR-USA.

Over the years, the Islamic Arts Festival has become an annual ritual in Houston. Many Christians, Jews, and Hindus visit the festival each year making it one of the biggest interfaith events in Houston. The event is co-sponsored by the Interfaith Ministries of Greater Houston, ISGH, and the Boniuk Institute of Religious Tolerance.

This year the Islamic Art Festival will be celebrating its 10th anniversary on the 9th & 10th of December. The event is free and everyone is welcome. Visitors will be able to buy art, interact with artists, and watch live demonstrations in calligraphy, henna, and Ebru. They will be able to take part in art workshops, sound art programs, and children's art activities. The two-day festival is expected to bring seven thousand people of diverse backgrounds and faiths for two days of fun, festivity, and cultural education. It is an event not to be missed.

### Obstructive Sleep Apnea and the role of the Dentist Fabia Younus DDS, MSD, MS; Ruckshanda Majid MD, FCCP



#### Introduction

Sleep-related breathing disorders (SRBD) are a group of diagnoses that include obstructive sleep apnea (OSA) and central sleep apea (CSA), with OSA being the most prevalent in the U.S. comprising 80% of all SRBDs. It is estimated that approximately 23 million adults in the United States have undiagnosed or untreated moderate to severe obstructive sleep apnea (OSA). An epidemiologic review of studies over a 20-year period reported a mean OSA prevalence level of 22% for men and 17% for women (10). In addition, the risk and prevalence of OSA increases progressively with age (11,12) and with the increasing obesity epidemic, the diagnosis of OSA is also rapidly rising (13).

Patients with OSA typically present with snoring, poor quality of sleep, daytime

fatigue and inability to concentrate during the day. Sleep is disrupted by the recurrent collapse of the upper airway while sleeping which characterizes OSA, leading to the partial or complete cessation of airflow and subsequent desaturation of oxygen associated with arousals from sleep (1-3). It is these recurrent drops in oxygen and episodic stress inducing events that lead to the consequential spikes (or sustained elevations) in blood pressure, a rise in inflammation, metabolic dydregulation and endothelial dysfuntion. This leads to insulin resistence and increased risk for cardiovascular comorbidity including uncontrolled hypertension, coronary heart disease, atrial fibrillation and strokes (14).

#### Table 1.0 Risk factors for obstructive sleep apnea

Age older than 50 years(7) Males (7) Family history (7) BMI >35 kg/m2 (7) Neck circumference of 17 inches or larger in males and 16 inches or larger in females (7) Craniofacial abnormalities

- jaw position ie micrognathia, retrognathia, (8)
- adenotonsillar hypertrophy, macroglossia and nasal septum deviation (8)
- high-arched or narrow hard palate (9)

Menopause Tobacco or alcohol use

**Table 2.0** Implications of obstructive sleep apneaObesityDepressionAtrial FibrillationCongestive heart failureEnd stage renal diseaseCOPD

Asthma Hypothyroidism Stroke Resistant Hypertension Type I and II diabetes

#### **Screening and Diagnosis**

Dentists and primary care physicians see patients regularly, between 1-3 times a year. Therefore, their role in screening patients for SRBD is essential. A referral for a sleep study can be made by any physician. The most widely used and validated screening tool to assess for OSA risk is the STOP-BANG questionnaire. This includes



a review of symptoms (sleepiness, snoring and witnessed apneas), in addition to comorbidities (hypertension) and physical exam (weight, age, neck circumference and gender). The modified Mallampati classification can also used to describe the patency of oral airway (7).

Once the patient has been referred, a diagnostic sleep evaluation for OSA can either be performed at home with the use of a monitor worn when sleeping at night, or in the sleep laboratory (polysomnogram-PSG), attended by a sleep technician. Although the PSG provides a more detailed assessment (including sleep staging), both evaluations monitor breathing, oxygen saturation and respiratory effort during sleep. It is subsequently reviewed by a sleep specialist to confirm a diagnosis of OSA and to quantify the severity, determined by the number of obstructive events that occur on average each our of sleep.

A dental evaluation may be included in the subsequent treatment plan for the patient. Tonsills do not play a significant role in the pathophysiology of OSA in adults and, unlike in the pediatric age group, tonsillectomy is not an effective treatment intervention for OSA in adults. Other anatomic findings that would suggest the presence of OSA however, which may also contribute as a risk factor might be present in the oral cavity (9). Dentists in addition have radiographic tools that might help evaluate the upper airway which would include cephalometric tomography and cone-beam computed tomography.

#### Treatment

Continous positive airway pressure (CPAP) is considered the gold standard treatment for OSA because its use can improve sleep-related symptoms and quality of life. CPAP acts as a pneumatic splint that stabilizes the upper airway with constant positive pressure via a mask interface. The optimal treatment pressure can be determined either in the sleep laboratory by manual titration (until the apneas and hypopneas are adequately treated) by prescribing an "auto-PAP". This device is programmed with a range of pressures and while wearing it (when sleeping), the device automatically up titrates the pressure until it no longer detects any apneas. These devices have the added advantage of being able to track optimal use (number of hours used on average each night) and monitor adequate treatment (detecting the residual obstructive events).

CPAP is usually well tolerated by most patients, with a wide range of comfort settings on the device in addition to a variety of masks that are selected after fitting the patient. Despite optimization of all of these features, some patients cannot tolerate the pressure. For such patients an evaluation by a sleep dentist would be an option.

Another treatment modality, especially for mild and moderate OSA, is a mandibular advancing device (MAD). This second line treatment can also be used as first line treatment in milder forms of OSA. This is a custom made dental device which is worn when sleeping to treat OSA. It attaches to the upper and lower teeth and advances the lower jaw (mandible) relative to the maxilla by the titration of an adjustable hinge mechanism typically connecting the upper and lower apperatus. This opens up the posterior airway hence preventing the collapse of the soft tissue structures. Just as the CPAP requires optimal titration, MADs also need optimization (distance that the lower jaw is advanced) with a reevaluation with a sleep study to ensure adequate control of the OSA.

A multidisciplinary approach is an optimal way of ascertaining treatment, in order to effectively treat OSA. This would include a dentist and primary care physician (to screen for SRBDs) a sleep physician (for diagnosis and treatment), along with an otolaryngologist, orthodontist and oral surgeon for potential surgical treatment options to address dental malocclusions and orofacial deformities. (4). In addition to custom oral appliance therapy orthodontic treatment is key in improving OSA due to Dental malocclusion ie narrow and high arched palate, mandibular retrognathia, maxillary hyploplasia by maxillary expansion, orthodontic growth modification (in growing patients) and mandibular advancement, or a combination of the above in conjunction with orthognathic surgery

- Surgical treatment
  - Septoplasty
  - Uvolopalatopharygoplasty
  - Maxillomandibular advancement
  - Lingual frenulectomy



Follow-up sleep testing by a physician should be conducted to evaluate the improvement or confirm treatment efficacy for the OSA, especially if the patient develops recurring OSA relevant symptoms or comorbidities. Multidisciplinary teamwork is the key to success in the treatment for patients with SRBD/OSA where the dentist following up on the OA, the family physician following up on global health, and the sleep physician following up on OSA/SDB treatment would lead to a favorable outcome. (5)

#### **Recommendations from Dental and Medical Associations**

Overall, the position statements or guidelines of the various dental or medical associations agree that the dentist's role in SDB is related to the screening for potential SRBDs and OSA and to refer to the sleep physicians when suspected of the same. The initial diagnosis of OSA should be done by the sleep physician and a multidisciplinary approach is essential for best outcome. Mandibular advancing devices are indicated for patients with mild to moderate OSA who prefer OA to CPAP therapy or who do not respond to CPAP or have contraindications for the use of CPAP. When a MAD is prescribed, the qualified dentist should preferably use custom, titratable appliances over noncustom oral devices, the dentists should provide follow-up to evaluate possible dental-related side effects such as occlusal change. Dental and craniofacial abnormalities must be treatment with a combination of orthodontic and orthognathic surgery and follow up sleep testing must be utilized to confirm treatment efficacy and success.

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### Navigating Health Horizons: A Guide to Travel Sara Andrabi, MD, FACEP, CPPS



Traveling exposes individuals to new experiences, cultures, and landscapes, but it also carries potential health risks. Understanding and preparing for medical emergencies while traveling is vital to ensure a safe and enjoyable trip. This article delves into some critical emergency medicine topics related to traveling.

#### Traveler's Diarrhea and Gastrointestinal Illnesses

Traveler's diarrhea is a common concern for travelers, often caused by consuming contaminated food or water, often contaminated with bacteria (E. Coli, Salmonella, Shigella, Campylobacter), viruses (norovirus, rotavirus, adenovirus), or parasites (Giardia, Cryptosporidium, Entamoeba histolytica). It can lead to dehydration and discomfort, potentially disrupting travel plans. Symptoms include watery diarrhea, abdominal cramps, nausea, vomiting, and/or fever. Preventative measures such as

drinking bottled/purified water, and maintaining good hand hygiene can mitigate risks. It is also best to avoid raw or undercooked foods and ice. Peel fruits and vegetables yourself to reduce the risk of contamination. Depending on your travel destination, consider vaccinations for diseases like hepatitis A and typhoid. Drink plenty of fluids to prevent dehydration caused by diarrhea and vomiting. Oral rehydration solutions can be helpful.Over-the-counter medications like loperamide can help manage symptoms, but travelers should consult

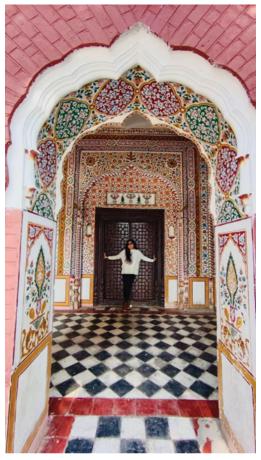
a healthcare professional if symptoms persist or worsen. In severe cases or if symptoms persist, a doctor may prescribe antibiotics to treat the specific bacterial infection causing the diarrhea. Seek medical help if you have severe symptoms like high fever, bloody stools, or severe dehydration or If symptoms do not improve within a couple of days or worsen.

#### Altitude Sickness and High-Altitude Medicine

Ski season is upon us! Travelers exploring high-altitude destinations may experience altitude sickness due to reduced oxygen levels. Altitude sickness, also known as acute mountain sickness (AMS), can occur when you travel to high-altitude areas, typically above 2,500 meters (8,200 feet). Ski resorts and mountainous regions often fall within this elevation range. When you ascend to higher altitudes too quickly, your body may struggle to adapt to the change in oxygen levels. Symptoms range from mild to severe and can include headache, nausea or vomiting, fatigue, weakness, dizziness, lightheadedness, and shortness of breath. AMS can be mitigated by gradual acclimatization, staying hydrated, avoiding caffeine and strenuous activity initially. Severe cases may require descent to lower altitudes and supplemental oxygen. Pretrip conditioning and understanding altitude sickness are crucial for a safe and enjoyable high-altitude experience. Educate yourself and your travel companions about the signs and symptoms of altitude sickness. Be prepared to adjust your plans and seek medical help if symptoms worsen or persist.

#### **Tropical Diseases and Travel Medicine**

Travel to tropical regions poses unique health risks, including exposure to diseases like malaria, dengue fever, and Zika virus. Travelers should consult a healthcare provider well in advance to determine necessary



vaccinations and prophylactic medications. Mosquito bite prevention, proper clothing, and staying in airconditioned or screened accommodations can further reduce the risk of tropical diseases. Use insect repellents with at least 20% DEET, wear long sleeves and pants, and use bed nets treated with insecticides to reduce the risk of insect-borne diseases.

Tropical diseases and travel medicine are essential aspects of healthcare and preparation for individuals planning to travel abroad, especially to regions where specific infectious diseases are prevalent. These diseases are often found in tropical and subtropical regions, but they can also occur in other parts of the world. It's crucial to be informed about potential health risks and take preventive measures to ensure a safe and healthy trip.

### Jet Lag

Jet lag, resulting from crossing multiple time zones, disrupts the body's internal clock, leading to fatigue, sleep disturbances, and impaired cognitive function. Gradually shift your sleeping and eating schedule to match the time zone of your destination a few days before you travel. This can help your body start adjusting to the new time zone before you even arrive. Spend time outdoors in patural daylight

zone before you even arrive. Spend time outdoors in natural daylight during the day at your destination. Sunlight exposure helps regulate your body's internal clock and can aid in adjusting to the new time zone. Drink plenty of water before, during, and after your flight to stay hydrated. Avoid caffeine, as it can dehydrate you and disrupt your sleep patterns. If needed, use sleep aids such as melatonin supplements (a hormone that helps regulate sleep-wake cycles) under the guidance of a healthcare professional. Melatonin can help you adjust to a new sleep schedule, but it's important to use it at the right time and dosage. Eat light, well-balanced meals and avoid heavy, rich foods close to bedtime. This can help improve your sleep quality and aid in adjusting to the new time zone. Short naps (20-30 minutes) can help boost your energy levels and improve your mood if you're feeling excessively tired during the day. However, avoid long naps that can interfere with your ability to sleep at night. If you have persistent or severe jet lag symptoms, consider consulting a healthcare professional.

### **Traveling with Chronic Medical Conditions**

Travelers with chronic medical conditions should prioritize proper planning. This includes consulting their healthcare provider for advice, carrying necessary medications and prescriptions, wearing medical alert jewelry, and understanding healthcare options at their travel destination. Additionally, travelers should have a comprehensive medical summary and contact information for their healthcare team.

### **Building a Comprehensive Medical Kit for Travel**

A well-prepared medical kit is essential for managing minor medical issues while traveling. It should include essential medications, adhesive bandages, antiseptic wipes, pain relievers, antidiarrheal medications, motion sickness remedies, and any necessary personal prescriptions. Tailoring the kit to the traveler's specific needs and destination



ensures readiness for unexpected medical concerns. Obtain comprehensive travel insurance that covers medical emergencies and evacuation. Keep a list of emergency contacts and medical information.

Be aware of the healthcare facilities in the area you're visiting in case of medical emergencies.

### Have Fun and Be Safe!

Traveling, while enriching, necessitates an awareness of potential health risks and preparedness for illnesses. By familiarizing oneself with topics such as above, travelers can embark on their journeys with confidence, ensuring a safe and enjoyable experience. It's crucial to consult a healthcare professional before your trip to discuss preventive measures, vaccinations, and any specific health concerns you may have related to your travel destination. Additionally, ensure you have travel insurance that covers medical emergencies while abroad. If you're pregnant or have specific health conditions, consult your healthcare provider for personalized travel advice. By being proactive and taking necessary precautions, you can minimize health risks and enjoy a safe and enjoyable trip abroad. Always prioritize your health and well-being while traveling.



# Event Schedule

Venue: Hilton-Americas, Houston, TX

## Thursday, November 16, 2023

5pm - 7pm 7:30pm - 11:30pm

Registration Qawwali Night

## Friday, November 17, 2023

8am - 12pm 7am - 11pm 9am - 6pm 10am - 6pm 9am - 12pm 1pm - 2pm 2pm - 2:30pm 3pm - 5pm 4:30pm - 9pm 6:30pm - 8:30pm 9:30pm onwards

Registration Prayer Room Non-Retail Exhibit Area Bazaar CME Jummah Prayer Mental Health Care Walk Council Meeting Registration Dinner Entertainment

### Foyer of Ballroom of Americas Marquee (Outside the hotel)

Foyer of Ballroom of Americas 336 A-B Foyer of Ballroom of Americas Linear Ballroom - J-K-L 335 A-B-C 336 A-B Outside the hotel 335 A-B-C Foyer of Ballroom of Americas Linear Ballroom Linear Ballroom

## Saturday, November 18, 2023

8am - 12pm Registration 7am - 11pm **Prayer Room** 9am - 12pm CME 9am - 6pm Non-Retail Exhibit Area 9am - 6pm Bazaar **APPNA YPC Meeting** 10am - 11am 10:30am - 11:30AM **Dental APPNA** 11am - 12pm **Mission Impossible** Medical School Admission - YPC 11:30am - 12:30pm AIMCAANA 11:30am - 2pm **DOGANA Brunch** 12pm - 12:30pm Chat GPT Workshop - YPC 1pm - 2pm APCNA 1:30pm - 3pm Social Forum 2pm - 3pm Alliance 3pm - 5pm DOW 2001 3 pm-4 pm Dow 2000 Reunion 4:30pm - 9pm Registration 6:30pm - 8:30pm Dinner 9:30pm onwards Entertainment

Foyer of Ballroom of Americas

335 A-B-C Foyer of Ballroom of Americas Linear Ballroom - J-K-L 340 A-B 339 A-B 337 A-B 339 A-B 340 A-B 337 A-B 339 A-B 335 A-B-C 340 A-B 335 A-B-C 340 A-B Foyer of Ballroom of Americas Linear Ballroom Linear Ballroom

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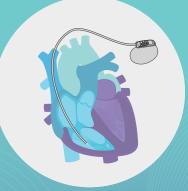
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EO, Zuithoff NP, van Hernel NM, et al. Incidence and predictors of short- and later term complications in pacemaker therapy: the FOLLOWPACE study. Heart on m. May 2012;9(5):728-735. ABBOTT 15900 Valley View Court, Sylmar, CA 913 a Tel: +1 818 362 6822 Se Abbott.com





## **CME** Program

This activity is being certified for ABIM MOC. Learners will have the ability to claim MOC credit.

Asim Shah, MD - Chair

# Day 1 - Friday, Nov 17, 2023

Friday, November 17 2023	9AM - 12PM CST
	Session Chair: Asim Shah MD
	Moderator: Muhammad Zeeshan MD
9am - 9:30am	Clinical Applications of Novel Antidepressants in Primary Care
	Mujeeb Shad MD
	Adjunct Professor of Psychiatry, University of Nevada Las Vegas,
9:30am - 10:00am	Human Trafficking (ETHICS)
	Asim Shah MD
	Professor Psychiatry, Barbara Corbin Jr Chair, Baylor College of Medicine
10:00am - 10:30am	How faith, culture and being in community impacts mental health and defines our
	Farha Abbasi MD
	Assistant Professor in the Department of Psychiatry at Michigan State University
10:30am - 11:00am	Modern Parenting, Screen Addiction, Academic Success: What Parents can do.
	Muhammad Zeeshan MD
	Current Clinical Assistant Professor of Psychiatry, Rutgers NJMS, Newark NJ
11:00am - 11:30am	Opioid Use Disorder in the Context of Chronic Pain: Historical Background and
	Nauman Ashraf MD
	Associate Professor of Clinical Psychiatry, University of Missouri School of Medicine
11:30am - 12:00pm	Attention deficit hyperactivity disorder: Diagnosis & Treatment.
	Sadig Naveed MD
	Associate Professor of Psychiatry, University of Connecticut School of Medicine



## **CME** Program

This activity is being certified for ABIM MOC. Learners will have the ability to claim MOC credit.

Asim Shah, MD - Chair

## Day 2 - Saturday, Nov 18, 2023

Saturday, November 18 2023	9AM - 12PM CST
	Session Chair: Asim Shah MD
	Moderator: Zeenat Safdar MD
0.20.2m	Ethical Issues with Constant Coll Therapy for Conser and Blood diseases (Ethics)
9am - 9:30am	Ethical Issues with Gene and Cell Therapy for Cancer and Blood diseases (Ethics)
	Muzaffar Qazilbash MD
	Professor, Department of Stem Cell Transplantation, The University of Texas MD
9:30am - 10:00am	Compassionomics - You Can't Do Without it
	Faisal Masud, MD
	Professor of Clinical Anaesthesiology, Weill Cornel Medical College
10:00am - 10:30am	Ethical Challenges: Who Should Receive a Liver Transplantation? ETHICS
	Bilal Hameed, MD
	Professor of Medicine & Program Director of transplant Hepatology at UCSF
10:30am - 11:00am	Fatty Liver
	Fasiha Kanwal MD
	Professor, Gastroentology, Baylor College of Medicine
11:00am - 11:30am	Cancer and Heart Disease
	Wamique Yususf MD
	Professor, The University of Texas MD Anderson Cancer Center, Houston, TX
11:30am - 12:00pm	Pediatric Global Health
	Davidson H. Hamer MD
	Professor of Global Health and Medicine, Boston University Schools of Public Health

### Dr. Shahid Rashid welcomes you all to APPNA Fall Convention!

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## Blepharoplasty (aka Eyelid Surgery) – aging gracefully in today's world with a bright and uplifted perspective Mirwat S. Sami, MD, FACS

### Oculofacial Plastic Surgeon Houston - Oculofacial Plastic Surgery



It is inevitable, unavoidable, inexorable...a basic fact of the human condition: aging! As an oculoplastic surgeon, I hear my patients complain about how their aging eyelids make them look tired, angry, worried, sleepy, and older than how they feel inside. It humbles me how after surgery they talk about their boosted self-confidence, the rested and brighter look to their face and eyes, and even how much more of the world they are able to see!

It is well known that the signs of aging creep into the periocular area much earlier than other parts of the face. Hence it is not surprising that Eyelid Surgery is in the top 3 most performed surgeries worldwide, and clocks into second place in the US (American Society of Plastic Surgeons).

At the risk of sounding cliché, the eyes are truly the windows to our soul. They are not only how we view the world, but also how we communicate and interact with it. The eyes, being a central facet of our face, are also central to our expressivity, interaction and vitality. And of course, from a medical perspective, we also know that multiple systemic conditions are associated with ocular findings, sometimes even as initial presentations of illness. So that analogy (or cliché) holds true in every sense.

Blepharoplasty (from Greek blepharon for "eyelid" and plastos "to form") is the term used to describe plastic surgery of the eyelids. This surgical procedure entails removal of redundant skin, excision or transposing of protuberant fat, droopy eyelid or muscle

repair and sometimes softening or creation of creases. The goal is to restore functionality of the eyelids and the aesthetic balance of the eye region in the face.

When it comes to aesthetics, eyelid surgery is certainly a mainstay of facial plastic surgery and there has been a significant increase in numbers, among both men and women, and at increasingly younger ages.

There are several theories as to why that is the case. The heightened awareness of facial appearances, the need to look as good as you feel inside, and the shift in social acceptance are all certainly propagating this trend. In today's day and age, where we want to stay physically active, healthy and fiscally comfortable, health and vitality are more than just an absence of illness. They are the products of pro-active and thoughtful pursuit of physical and mental well-being. So the definition of "aging gracefully" has certainly changed...it is about looking as good and young as one feels inside! Although our obsession with the "fountain of youth" is not new, what has changed however is our perceptions, access and information exchange! It is become increasingly acceptable for men and women alike to seek surgical solutions to enhance their features, thanks to social media influencers and celebrities.

Another factor in the recent past that has nudged the demographic needle in the direction of younger age groups is the Zoom-effect, thanks to COVID. For hours on end, people watched their visages projected on computer screens, and previously unnoticed features now became the center of their attention. In addition, mask-wearing left us all keenly aware of the eyes...all the focus shifted to the periocular region. Patients also discovered that it is easier to recuperate from surgery in the virtual, work-from-home environment. Hence it is not surprising that we have seen a higher than anticipated rise in blepharoplasty surgery.

This, however, does not mean that eyelid surgery should be undertaken at a very young age. In fact, I am happy to report that despite increased surgical numbers, there is also a refreshing increase in patients' understanding



and pursuit of natural results, to avoid the "done look". Social media channels have also helped highlight the risks of overdone plastic surgeries, as seen in celebrities and influencers with avatar-looking features, not to mention a better understanding of body dysmorphia. There is increased appreciation of ideal aesthetics and natural results, as well as an understanding of the limitations of techniques and human aging.

Now the trend is for PRE-juvenation and not Rejuvenation! Rather than a huge "overhaul" at a later age with drastic and unnatural results, patients are wanting to achieve a subtle change and a refreshed look, with the possibility of repeat surgeries a decade or so later to maintain that look.

And of course when it comes to the eyelids, the biggest concern is always that of preserving, if not enhancing, vision. Patients are savvier in surgeon selection, researching their options and seeking experienced oculofacial plastic surgeons to entrust their eyes and face.

Upper eyelid blepharoplasty, also known as "eyelid lift" typically entails removal of redundant or extra sagging skin from the eyelid, sculpting of fat, correcting droopy eyelids (ptosis repair) and even recreation of creases or shape of the eyelids (as seen in pictures 1-3).

Lower eyelid blepharoplasty involves correction of "under-eye bags", excision or tightening of loose and crepey skin, repositioning/sculpting fat to eradicate hollows, tightening of canthal tendons and muscles and recreating a smooth transition with midface (as seen in pictures 2 and 3).

Picture 3: Upper and lower eyelid blepharoplasty and brow lift, before and after.

Blepharoplasty surgeries are performed in an outpatient setting under local anesthesia or light intravenous sedation.



Picture 1: Upper Eyelid Blepharoplasty, before and after.



Picture 2: Upper and Lower Eyelid Blepharoplasty, before and after.



Picture 3: Upper and lower eyelid blepharoplasty and brow lift, before and after.

The painless recovery, despite various short-

term limitations, seems to be an easy one for the vast majority of patients, with limited downtime. The resulting change in appearance can be dramatic with a positive impact on self-esteem and well-being. As noted in a 2009 Academy of Otolaryngology Head and Neck Surgery Foundation paper, blepharoplasty can have a positive impact on perceived Quality of Life (QoL) for almost all the outcome measures used in the Glasgow Benefit Inventory (GBI). The authors noted that most patients underwent blepharoplasty to feel better about their appearance and improve their self-esteem.

Although this procedure has been in existence for a long time, it has been tremendously refined and its true potential towards achieving aesthetic harmony is well appreciated and harnessed in today's enlightened age. That is why, it is recommended that patients seek an experienced, skilled in all the subtle nuances of this procedure and knowledgeable about its countless outcomes. Each surgery should be customized to the patient, taking into account their unique features, facial symmetry, skin quality, ocular health and the rest of the facial anatomy to create a harmonious result. The goal is to reveal a more invigorated, youthful, and refreshed appearance.

Even these subtle changes can make a big difference in the way the whole face looks. After all, no one wants their default look to be "sleepy" or "tired" no matter how young they actually are!

## Nurturing Understanding: Empowering Patients with Low Health Literacy through Effective Communication Author: Zoha Irfan

Published in in-Training, online peer-reviewed publication for medical students https://in-training.org/nurturing-understanding-empowering-patients-with-low-healthliteracy-through-effective-communication-27203



Zoha is currently a fourth-year medical student at Florida International University Herbert Wertheim College of Medicine in Miami, Florida. Prior to medical school, she graduated from the University of Florida with a Bachelor of Science in Applied Physiology and Kinesiology. In her free time, she enjoys exercise, baking, and socializing with friends.

You never know what environment you are going to walk into at the start of a busy clinic day. Patients visit their doctors with a multitude of expectations and fears surrounding their medical treatment and care. As medical providers, we must apply our carefully practiced art of medicine to deftly sort through these delicate notions. It's why we are taught, time and time again, to work our hardest to leave our biases at the door before knocking to enter a patient room.

I had spent part of the prior evening preparing for the patients scheduled for our primary care clinic that day. Since completing my chart reviews, I had one main concern that wouldn't leave my mind. One of the afternoon patients had multiple discrepancies in his chart. Specifically, there were several pharmacy communications detailing refill rejections for blood pressure and diabetes medications from six months ago, with the only recent update being the successful refill of a lipid-lowering medication. But that was months ago, and surely the patient had not gone so long without his medications, right? Still, my worry wouldn't budge.

As the busy morning passed, naturally, my worries were sidelined, as I had new patients with new concerns to focus on. When I had a free moment, I began to more thoroughly read through the chart of the patient who had stuck out to me the previous evening. The most recent note was riddled with a latent sense of disdain for the patient: I advised patient to lose weight. Patient did not lose weight.

Finally, I noted "noncompliance" buried within his problem list.

When I entered the patient's exam room, I was greeted with a sheepish, "Hello doctor," by a well-appearing male who seemed to be in his mid-forties, staring at the floor. I clarified my position as a medical student, but before I could finish, he began to apologize, anxiously rambling about his guilt for not coming to the clinic sooner. His speech was pressured and jittery -- he was nervous, with eyes that never once left the floor.

My initial suspicions proved correct. He had not taken any medications for his blood pressure or diabetes since September, a whopping six months ago. But it was not for a lack of trying. There were clear notes in his chart detailing his attempts to refill his medicines. Disregard for his health, embedded in the notion of "non-compliance," did not seem to be the issue. He was taking his daily cholesterol medication. He was logging his blood pressure at home twice daily and his blood sugar three times daily. For someone not appropriately taking medications to assist with these conditions, I wasn't quite sure why he was checking so frequently, but he seemed more adherent to monitoring regimens than any patient I'd seen in my rotations thus far.

It all clicked when I decided to ask him to describe his medications and the conditions they were used for. He understood that he was to take tablets daily but had little awareness of their purpose. His knowledge of diabetes was limited to the fact that he had once witnessed a hypoglycemic episode in his mother after she had taken her insulin, but even that story was not clear. He had thought she was dying, but EMS "fixed her diabetes."



I realized he lacked health literacy and did not understand his medical problems or their respective medications. In my experience, specific deficits in health literacy are typically addressed at the first or second visit when medications are initiated. I felt a unique bias at play here. The patient was a Caucasian male, English-speaking but not formally educated. We often grant those with language barriers time and grace with understanding their medical conditions. This is certainly warranted, as it is a difficult task to learn medical jargon when English is not your first language. However, we often assume that someone who speaks English has received formal schooling and is going to be able to keep up with the prescribed treatment regimen. This is not the true reality of the patient population we care for. Data from the latest U.S. census reveals that nearly 10% of the population have less than a high school diploma equivalent and nearly 30% have no further education beyond high school (US Census Bureau, 2022). This is a resounding number, considering the well-documented relationship between literacy rates and health outcomes, particularly as it relates to chronic disease (Nutbeam and Lloyd, 2021).

I quickly organized a plan to engage the patient in some teaching. We began with an exercise to hand-write the names of his medications and their indications on a sheet of paper that he could carry in his wallet. I then organized handouts with primarily graphic representations about diabetes and glycemic index and took a seat next to the patient to read and talk through the images. He was more engaged with me at this point than he had been in the entire encounter, holding eye contact with me, asking questions and interjecting comments about adjustments he could make to his diet and lifestyle. We then spoke about his blood pressure and the need to have another meeting to do the same for it. To avoid overwhelming the patient with information, I didn't cover all that I wished to cover, but by the end of the visit, I felt slightly reassured with his understanding of his health. While one visit will not solve everything, at the very least, I provided some tools to jumpstart his understanding of what has likely been repeatedly explained to him without much effect.

Now, as I reflect on this experience months later, I am led to reflect on the very character of the notes we write about our patients. Truly, the purpose of documentation is to allow us to describe details for ourselves and other providers to be able to continue care for the patient in a clear, organized manner. This allows us to put the patient first and to, over time, find solutions that meet our patients where they are in order to help them improve their health. Oftentimes, it is necessary to delineate a patient's adherence to the advised regimen, but it is not at all useful without understanding why they are not adherent. This is the central purpose of our shared decision-making model. Ultimately, in situations like this, a label of "noncompliance" can be quite harmful, instigating continued biases that have no place in caring for people.

I often think back to this patient, particularly as I meet many more like him -- individuals with limited health literacy who desperately need an opportunity to understand their condition. I wonder if he was able to understand and retain the massive amount of information shared with him during our one office visit together. Unfortunately, with the end of my rotation came the end of my follow-up with him, and I may not know what became of our discussion. Yet, now I understand, this is the role of a doctor. We may not be able to resolve every deficit or to amend every problem, but focusing on compassion and understanding is our best chance at improving the health of our people.

Ultimately, from this experience, I gleaned a new perspective on the "non-compliant" patient. There are a plethora of barriers that we can prepare for, but we can never fully predict why a patient may not follow our exact instructions. This patient clearly lacked any apparent understanding of his medical conditions, with a background that prevented him from understanding the words used by providers and a shortage of confidence to stop providers for clarification. No amount of nutrition or other specialty referrals would have been able to get through without increasing his baseline knowledge. This patient is no different than a patient who speaks a different language, yet we may often find ourselves failing to recognize the need for a translation. But if we are conscious of this bias moving forward, we can touch more people; and this is where we find the true art of medicine. And I am very proud to spend my career learning and practicing it.

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# REMINISCNCE OF A DREAM-HOW PAPS CAME INTO BEING!! Dr. Muhammad Siddique Khurram



Finding my feet in the US healthcare system as a pathology trainee, I realized the dire need of guidance and resource pooling for pathology aspirants of Pakistani descent. We did have a decent number of Pakistani pathologists training and practicing in the US but there was no formal platform to have them united under one banner. We came up with a plan to establish Pakistani American Pathologists' Society (PAPS) to provide quality education, create mentorship channel for incoming NRMP pathology match applicants, and develop a strong networking platform. I was joined by 14 similar minded pathologists leading to the foundation of this non-profit organization.

What started from a group of 14, hoping to achieve the above-mentioned goals, is now a continuously growing community of 200+ practicing pathologists in academic settings and private practice, fellows and residents in training who have come together to develop a strong network in this rapidly flourishing specialty in the US. We are working on multiple fronts to streamline the transition of pathology aspirants from Pakistan to the US. We have conducted numerous seminars dispersing information about different aspects of the practice of pathology in the US, e.g., Visa guidance, Pathway to Pathology, Entrepreneurship to name a few. This concerted effort is not only helping Pathology Match applicants in understanding the system and its nuances and eventually matching but is also shaping the career development of graduating trainees. Another such effort is our plan to conduct a seminar on contract negotiations for our trainees to help guide them when signing contracts for jobs.

This platform has resulted in centralizing and even creating multiple pathology rotations and electives, research, leadership, and mentorship opportunities for residency applicants. We have arranged over 40 pathology rotations and observerships in our first year (2021) for Pakistani students and the number rose to 70 observerships placements last year before Match 2023 season. We also assist them by reviewing their personal statements, ERAS applications, conducting mock interviews and helping with their visa applications. We reviewed resumes and conducted mock interviews for 25 and 43 students in NRMP Match 2022 and 2023 seasons respectively. Numerous PAPS students had their abstracts accepted and presented posters at the multiple National Pathology conferences and meetings. The trend is only growing with time.

Our education committee conducts monthly educational lecture series with eminent speakers covering disease classification updates, practice guidelines and diagnostic challenges faced in multiple subspecialties. These presentations have been beneficial for all levels of pathology practice.



I take pride in sharing that PAPS has grown exponentially in such a short time period since inception. It won't be an overstatement to say that more than 75-80% of new Pakistani pathology aspirants either know about PAPS through our work or through the word of mouth by those who attest to our achievements. PAPS has also mentored students from across the globe.

One of our major achievements is to be recognized as a mainstream pathology society by United States and Canadian Academy of Pathology (USCAP). We were granted companion society status and invited to have our inaugural meeting as part of the USCAP annual meeting. We had a very successful first annual meeting at USCAP 2022 in Los Angeles and hosted another educational session at its Companion Society Meeting at USCAP 2023 in New Orleans. This recognition is a testament to the leadership role of Pakistani American Pathologists in the field.

Although we are striving to pave the path for Pakistani doctors in their pursuit of medical training in the US, we are concurrently working on projects to help upgrade the practice of pathology back home too. PAPS Outreach Committee has successfully established a pathway for subspecialty training opportunities in the US for junior faculty and early career pathologists from Pakistan. Subspecialty workshops, teaching sessions, and visiting faculty program have been established with multiple institutions in Pakistan to provide a platform of collaboration between the North American and Pakistani pathology communities.

While trying to establish a strong Pakistani pathologists' community in the US, we have not forgotten our responsibility towards our home country. The devastating floods in Pakistan this year generated a strong compassionate response from PAPS membership. Our Social and Welfare Committee raised over USD \$20,000 of donations from PAPS leadership and members. We collaborated with multiple organizations in Pakistan to help provide relief to flood victims through free medical camps and provision of necessities like food and shelter.

I am very proud of the PAPS team and extremely grateful to our members for what we have achieved together. It would not have been possible without everyone's involvement, trust, and support. I hope our members will continue the momentum by their active engagement. I am honored to witness the realization of the dream I once had and I'm happy that I took the initiative from scratch.

All these efforts stem from one motivation, helping our fellow countrymen in circumstances where we needed help, but we didn't have these resources and guidance.

Dr. Muhammad Siddique Khurram: President and founding member of Pakistani American Pathologists' Society (PAPS). Staff Pathologist at HCA North Cypress, Clinical Assistant Professor Sam Houston University.



## Do Food Dyes Affect Behavior in Children? Hibba Haider, MD



This has been a discussion amongst parents and a puzzling question to answer by some pediatricians, but it is very clear for me to share and warn against it.

Candies with eye catching colors, brightly colored sweetened drinks, cotton candy on sticks and neon gelatin jiggles, Zarda (famous rice desert of Pakistan) blissfully remembered as colorful sweet rice. Those were my childhood memories involving food dyes, and they were great memories.

Most of those foods bring back memories of special times with family, playing outside with neighbors or visits to my grandma's house, but my own children (hopefully) won't associate these memories with brightly colored foods.

Living in the US the challenge is even harder as kids have access to a variety of candies and colorful edibles around Halloween, Easter, and the Holiday season as well.

Many times, of year, food dyes are especially popular as millions buy little pellets of artificial dyes to color baked stuff and brightly colored jellybeans, marshmallow chickens and more to adorn many edible delicacies.

But should our celebrations include these dyes? Short answer: no. long answer...

### What is the harm with Food Dyes?

When I was younger, I never even thought about questioning the safety of food dyes. I assumed that if food dyes were allowed in foods, they must be safe.

Certainly, the food dyes were not the only problems with many of the foods I used to consume, and I cringe when I think about the sugar, artificial sweeteners, and chemical additives, but food dyes deserve their own scrutiny, especially since they are added to so many foods that are marketed to children!

When we think about it, it seems logical that consuming candy, drinks, or foods with added petroleum-based colorings not found in nature might be problematic, but the problem is simpler than that... often we don't stop and think about it.



If you are arguing that artificial dyes are harmless or a minor ingredient? Consider this...

• Food companies add more than 15 million pounds of artificial food dyes to foods each year (Over five times the amount added to the food supply when our parents were children)

• Artificial food dyes have been linked to behavioral problems, various types of cancers and other problems.

• The European Union requires foods with food dyes to come with a warning label and has banned many of the dyes still used in the US.

• Many people encounter food dyes without even realizing it in toothpastes, crackers, pickles, yogurt, potato chips, pastas, jams, jellies and other foods that would not be obvious sources of dyes.

### What's in a Food Dye?

There are seven main artificial food dyes approved for use in foods in the US. The most used dyes are Red 40, Yellow 5, and Yellow 6, which make up 90% plus of the market.

These dyes are created synthetically in several ways. Some dyes are created by burning coal tar and others are derived from petroleum byproducts like tartrazine and erythrosine.

These artificial dyes are added to foods to enhance their color and make them more "kid friendly" but they are nutritionally void and potentially harmful. Many food dyes have already been banned by the FDA after research found that they caused substantial health problems (from minor illness to cancer) and surprisingly little research has been done to prove that the remaining seven dyes are safe.

### Seeing Red: Artificial Food Dyes and Behavior?

In the EU, foods containing artificial food dyes are required to carry a warning that:

Consumption may have an adverse effect on activity and attention in children.

Those same foods are routinely marketed to children in the US without any such warning. The FDA currently holds the position that they have not found any conclusive evidence that food dyes cause behavior problems in children but that some children who are susceptible will notice increased symptoms of ADHD from consumption of food dyes:

Exposure to food and food components, including artificial food colors and preservatives, may be associated with adverse behaviors, not necessarily related to hyperactivity, in certain susceptible children with ADHD and other problem behaviors, and possibly in susceptible children from the general population.

The Center for Science in the Public Interest (CSPI) released a 68-page report detailing



the potential of artificial food dyes to contribute to hyperactivity in children, increase cancer risk and lead to other health problems and dental caries. You can read the full PDF document here.

https://cspinet.org/resource/food-dyes-rainbow-risks

Research suggests that some children may be susceptible to even tiny amounts of artificial dyes but that a significant number of children were affected by amounts over 35 mg per day.

See this article: http://journals.sagepub.com/doi/abs/10.1177/0009922814530803

Recent research from Purdue University showed the amount of dyes in common foods was much higher than expected and that one bowl of brightly colored cereal or some candy and macaroni and cheese was enough to break the 35mg threshold.

In fact, it was estimated that many children are consuming 3-4 times the 35-mg amount per day.

The research on artificial dyes and its link with behavior issues is still developing, but the personal experience in my clinical practice and reported observations of many moms is astounding. I have Pediatrician friends, moms of children in my practice who swear to have noticed a drastic difference in their children's personalities after removing dyes and who can immediately tell if their children have increased consumption of foods with dyes by the drastic behavior change.

Again- these cases are not scientific research, but for parents of children struggling with hyperactivity, dietary changes might be worth a try.

### **Feingold Diet and Elimination Diets**

Dr. Benjamin Feingold first published a book called "Why Your Child is Hyperactive" in the 1970s. A pediatrician and allergist, Feingold suggested that certain food additives, including artificial dyes, contributed to hyperactivity and symptoms of ADD or ADHD in children.

His book detailed his protocol for reducing these problems in a two-stage approach:

1. The first stage removes food additives including dyes and salicylate compounds found in some natural foods, as well as chemicals in personal care products and cleaning products. Natural foods containing salicylates include: "Almonds, Apples, Apricots, Berries, Cherries, Cloves, Coffee, Cucumbers, Currants, Grapes, Nectarines, Oranges, Peaches, Peppers (bell & chili), Pickles, Plums, Prunes, Raisins, Rose hips, Tangelos, Tangerines, Tea, Tomatoes."



2. Stage 2 helps identify which of the salicylate compounds are not tolerated and develop a long-term plan.

The Feingold protocol is still popular today and many moms use this program to help determine if food additives are causing problems for their children. A modified approach to this diet seems more popular in online support groups for moms of children with hyperactivity or allergies. In most cases, it seems that parents notice a benefit to their children from removing artificial dyes, MSG, and excess sugar.

### To Dye or NOT to Dye

Artificial food dyes do nothing to improve the nutritional value of food but simply enhance the color, making processed foods more attractive, especially to children.

While these chemical dyes are still legal for use in the US, they have been banned or carry warning labels in the EU and other countries. The same food companies that sell foods with artificial dyes in the US produce naturally colored versions to sell in other countries, proving that it IS possible to create even their processed foods without the artificial dyes.

Most foods that contain artificial dyes are highly processed anyway and are wise to avoid, but food dyes can be added to unexpected foods like pickles, fresh oranges, meats, yogurts, crackers, canned fruits and much more.

Since these artificial dyes don't add anything beneficial to foods and are most often found in highly processed foods, nothing is lost by avoiding them. Don't wait for regulation or warnings, just ditch these foods now.

### So How to Dye?

Artificial food dyes are just one item on an ever-growing list of reasons to avoid processed foods. Unfortunately, food dyes can be sneaky so avoiding them can take some effort. Here are some tips:

• Buy organic– dyes can be hidden in produce, meats, pickles, salad dressings and other foods. Buy organic whenever possible and read labels.

• Stick to real foods in whole form – A head of broccoli or bunch of spinach is much less likely to contain food dyes than any food that comes in a box or bag.

• Check Personal Care Products – Many toothpastes, mouthwashes, shampoos and makeups contain artificial dyes as well. Though these are not being ingested, research indicates that they can be absorbed by the body and evidence is lacking on skin safety for these dyes.

• Use Natural Alternatives – For common artificial food dye containing recipes that you make at home, consider using a naturally derived dye instead.



# Poem by Mansoor Nasim MD from New York using artificial intelligence

In the realm of surgical art, Where pathology unveils its heart, A dance of healing in microscopic sight, Where knowledge and precision take flight.

Within the lab's embracing confines, Slides and samples tell tales and signs, Pathologists, guardians of hidden stories, Unravel mysteries with diligence and glories.

A scalpel's touch reveals the truth, As tissues whisper secrets, ruth, Through stained slides and careful gaze, Histological portraits come ablaze.

Lesions and anomalies come to light, Shapes and patterns, an intricate sight, Diagnoses crafted with keen insight, To guide treatment, to set things right.

From biopsies to complex resections, Surgical pathology's vast connections, Navigating the depths of disease's core, Seeking answers, striving for more.

In the language of cells, a silent voice, A symphony of whispers, a subtle choice, Pathologists decipher the hidden script, Expertly guiding the medical ship.

So let us sing an ode to those, Whose expertise and skill truly shows, In the world of surgical pathology, A beacon of hope and clarity.

With microscopes as their guiding light, They navigate the realms of insight, Composing diagnoses with dedication, Their work a vital contribution.

In surgical pathology's noble domain, A fusion of science and art remain, A tribute to those who lend their hand, Understanding our bodies, helping us stand.





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# PEACE FOR ALL

Many people claim, 'Peace for all' is a dream. Let us join hands together to make it a reality And pray that one day everyone enjoys real peace.

We know peace can not happen with a few speeches, Nor can it become a reality without sincere hard work. Actually we have to walk on bumpy roads to achieve it.

We all realize,our final destination is nowhere near And by being silent,nothing will change. To accomplish peace for all,we will have to do a lot more.

Let us keep spreading the powerful message; Discrimination and disparity should end for ever And equal rights,equity and justice shouldu prevail.

Saleem A. Khan, MD 10/10/2021 (This poem was recited at the Academy for Peace In Delaware by the poet, Dr. Khan)

# Virtues of Silence

- Silence releases tension from the brain and promotes Creativity.
- Silence can communicate acceptance of the other person when they are feeling sorrow.
- Silence provides an opportunity to listen to our life.
- Silence is a very effective step on the spiritual journey.
- Silence is necessary to attain wisdom. (Jewish thought)
- Whoever guards his mouth preserves his life. (Bible)
- "He who keeps silent, saves himself." (Prophet Muhammad PBU.H)
- Silence fasting has been used in many different cultures and religions to provide a sense of grounding.

Saleem A. Khan, MD 6/14/2023



# Gratitude Quotes

"Gratitude bestows reverence...changing forever how we experience life and the world." -John Milton

"O Lord that lends me life, lend me a heart replete with thankfulness." -William Shakespeare

"We must find time to stop and thank the people who make a difference in our lives." -John F. Kennedy

"Cultivate the habit of being grateful for every good thing that comes to you, and to give thanks continuously. And because all things have contributed to your advancement, you should include all things in your gratitude." -Ralph Waldo Emerson

"Appreciation is a wonderful thing. It makes what is excellent in others belong to us as well." -Voltaire

"When eating fruit, remember the one who planted the tree." -Vietnamese Proverb

"Enough is a feast." -Buddhist Proverb

"Wear gratitude like a cloak, and it will feed every corner of your life." -Rumi

# Grandfather Figure Advice

Dear Grandchildren,
My advice to you, try to balance your:
1. Religious Practices (Obligations)
2. Personal Life (Health, diet, rest and exercise)
3. Family life (Good relations with your parents, siblings and other important relatives)
4. Service to your community
(Volunteer and charity work)
I wish you the best of luck for your bright future.

May Aliah keep you on the right path. Ameen!

Love, Grandfather Saleem A. Khan



خنزير كادل بيه نظم منصور محى الدين كو معنون كرتا ہوں

کیااسے جپسکہ پڑے گاجنگل کی سیاست کا کیااسے عہدہ ملے گاسوروں کی صدارت کا لیاجائے گااس سے کام جنگل کی امامت کا

> د هر نادے گا کیاوہ اپنی پارٹی کی ہار پر سب کی پھریلغار ہو گی شیر کی کچھآر پر

کیاک کلغی دار مرغادے گااک پر زور بانگ اور سارے جانور نکلیں گے کرنے مارچ لانگ

ایک لومڑ کوبنادیں گے کیاجنگل کا جج نوسوچوہے کھاکے اک بلی کرے گی جائے جج

> نافذ ہو گاجنگل میں آئین گرانسان کا ہو گاپھرانسان جیساحشراس حیوان کا

> > آفتاب ناز

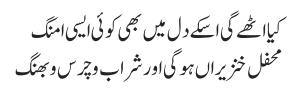
تحقیق کررہی تھی ساری سائنسی مشین ( ان میں تھےاک ڈاکٹر منصور محی الدین) کیاجین ہے خنزیر کاانسان جیسا جین

> تجربه کامل ہوٗاجب جین کی تسخیر کا پیوند کیاانسان میں پھرایک دل خنزیر کا

دل اگر خنز بر کالگ سکتا ہے انسان میں قلب انساں کیوں نہیں لگ سکتا اک حیوان میں

> دل اگرانسان کاخنزیر میں پڑ جائے گا کیااس کے اندر جذبۂ انسانیت بھر جائے گا

اک حسینہ سے محبت کیااسے ہو جائے گی پاپرانی سور نی ہی اس کادل بہلائے گی





اک دن به مجھ سے کہنے لگے ڈاکٹر حسن

دل کے ہیں چار خانے اذن دواور دو بطن لازم ہے ہر اک خانے میں ہوا یک ایک زن اک دوسرے سے بڑھ کے ہو ہر ایک گلہدن اُن کے در میاں بیٹھوں تودل کاساراغم نکلے ہوں چاروں بیگمات ایسی کہ ہر بیگم پہ دم نکلے آفاب ناز

غلطی سے فقطاک بار چھیڑ اتھااسے میں نے اس کے سبھی بھائیوں سے میر ی ہوئی د ھلوائ ہے حاضر ی ہر ہفتے اب یولس کی چو کی پر لمحوب نے خطاکی تھی صدیوں نے سزایائی نظروں نے خطاکی تھی۔ کو کھوں نے سزایائی آفاً الناز

یہ وقت بھی دیکھاہے تاریخ کی نظروں نے لمحوب نے خطاکی تھی صدیوں نے سزایائی مظفررزميهر



اُن کے در پہ کیا گئے کہ در بدر ہی ہو گئے بجلیاں اب کیا گریں گی آسانی ہائے ہائے

> سوچ کر تجھ کولہور وشنائ بن گیا آگی میرے قلم میں بھی روانی ہائے ہائے

ہر مدادرت کاصلہ کیوں شکوہءجاناں رہا عاد تیں جاتی نہیں ہیں یوں پرانی ہائے ہائے

ہم کہاں سب سامعین بھیرا کھ ہو کررہ گئے کررہا تھا شوخ جو وہ شعلہ بیانی ہائے ہائے

> داستانِ عشق کی جلوہ گری کا کیا کہیں بے خود می رہتی ہے کیسی سہانی ہائے ہائے

حبّه على حيدر

ہم نشینوں سے بیہ کیسی بد گمانی ہائے ہائے دل لیااور جان بھی رکھ لی نشانی ہائے ہائے

اشار وں سے گفتگومہفل میں اچھی نہیں ے پر ستوں میں کہاں کی راز دانی ہائے ہائے

ہم نے کب اقرارِ الفت کی کبھی تر دید کی پھر گلہ کیساً کیوں روزیاد دہانی ہائے ہائے

دل تیری نظروں کی تابِش سے باقی بچا اُس پہ لبِ دلبراں سے گل فشانی ہائے ہائے

تُو بھی ہم کو کفر کی جانب بلاتا ہے صنم اور پچھا پنی بھی تھہری بے ایمانی ہائے ہائے

صحرا کو چل د<u>ی ئے ر</u>ختِ سفر باندھ کر سن لیا تھاذِ کر کیا تیری زبانی ہائے ہائے

اب توویرانے میں بھی دل پائے نہ تنہائ کو ہو گی ان محفلوں کی مہر بانی ہائے ہائے



ذراس بات

آه مگر میراثِ قائدلٹ چکی بازار میں اب تلک باطل رہاہے ہر قدم پر کامیاب

وطن عالیشان ہے اب آند حیوں کے ہاتھ میں رہز نوں کی کار گاہ ہے ملک وملت کا حساب

دولت ملی کومل کر کچھ کٹیرے کھاگئ احتساب واحتساب اے خدا پااحتساب

اِن کر دڑوں بے نواؤں کانہیں کوئی نعیم کیسا نظم وضبط ہے اور کس قشم کاانتخاب

حلقہ ءا قوام میں بھی اب کوئ عرّت نہیں نو کریم دمہر بال ہے پھر ہے کیسا سہ عتاب

ہاں ذراسی بات تھی ہوتے اگر ہم باصواب کارواں ہو تافلک پڑ ہم نہ ہوتے یوں خراب

خون کے دریا بہے بتھے اس وطن کی راہ میں پھر کہیں تعبیر کے قابل بناتھاا یک خواب

کشتِ ویراں میں فقط بارانِ رحمت کے لئے آتشِ نمر ود میں ہی جل گئے لاکھوں سحاب

> لا کھوں ہی گلفام بچ نزرِ نیزہ ہو گئے تامیشر ہو جہاں میں اِک مقام دیریاب

کتنی صدیوں سے تقلی طاری ہاں غلامی کی وہ رات کتنے تاروں نے خرید ااِک طلوعِ آ فتاب

خونِ مسلم آج بھی بھارت میں ہے ارزاں فروش حِبّہ علی حید ر کننی کاوش سے دُوانْتمبیرِ قصرِانقلاب



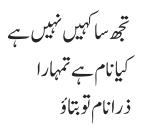
ى ئىك ئاكر

ىر بى گال كے بير ڈمپل زلفوں کے تیرے بیرخم تجھ کو خبر نہیں ہے گاہک ہیں حسن کے ہم ترے وصل کے لئے تو میں جان دے دوں ہمد م

ىك ٹاك پر تم آكر مجھ کونہ یوں ستاؤ کیانام ہے تمہارا ذرانام توبتاؤ ميرے قريب آؤ مير \_ قريب آؤ

آ فتاب ناز

توس قدر حسیں ہے روشن تری جیس ہے ترے دانت موتی جیسے



ترے قہقہوں کی دل پر بجتی ہے کھنکھنا ہٹ اکھیوں کو کردے خیر ہ چہرے کی جھلملا ہٹ مری روح میں جااترے بیہ تیری مسکرا ہٹ

کیوں چھٹرتی ہو مجھ کو كياكام ہے بتاؤ کیانام ہے تمہارا ذرانام توبتاؤ گردل ہے مجھ کودینا ذرادام توبتاؤ







Our mission is to provide inclusive opportunities and support to individuals with disabilities and their caregivers in the Greater Houston area.



### Education

Inclusive educational programs for children and adults with disabilities



# Support

Resource support, caregiver training, and social connections



Awareness

**Disability awareness** training and volunteer programs

# **Our Impact**

'Sakina Sunday School was a phenomenal experience. We were loved, included, and made to feel that we belong. I wish the entire world were like Dar-us-Sakina." Parent of Sunday School student

"I like the Teen Adult program because made lots of friends there and have fun learning things like how to make different food. I also like when we go for outings." Jeen adult Program student



individuals with disabilities enrolled in our weekly educational programs

special needs caregivers enrolled in our support group programs

special needs families provided crisis support through our Zakat program

community youth enrolled

in our volunteer programs



We are a 501c3 nonprofit organization dedicated to inclusion. We inspire the community to abandon stigmas and embrace individuals with disabilities with empathy and respect. Hear what program participants have to say about our services:



"I have a daughter with autism spectrum disorder. Me and my daughter, we were homeless. We were introduced to Dar-us-Sakina. They helped my daughter get a nice education in a school and all the resources that I needed to help her get better. I am so glad Dar-us-Sakina is there in my life; I am so happy I met them." -zakat Program Lecipient



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# **APPNA Events 2024** Save the Dates



# APPNA Strategy Meeting

January 25-29, 2024 Mexican Cruise (From Tampa, FL) Committee:

Nadeem Ahmed, Tayyib Rana, Mujtaba Qazi

# APPNA Spring Meeting

April 25-28, 2024 Chicago, IL Chair - Dr. Sajid Mehmood





# **APPNA** Summer Convention July 3-7, 2024 National Harbor, MD (D.C.) Chair - Dr. Tariq Mahmood

**APPNA Fall Meeting** September 26-29, 2024 San Antonio, TX *Chair - Dr. Aamir Ehsan* 





# International Meetings 2024

## Chair - Dr. Saeed Sabir Co-Chair - Dr. Nadeem Ahmed



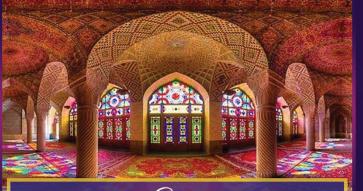
Botswana Safari

Cape Town - Victoria Falls - Botswana February 24 - March 3, 2024



Brazil

Amazon Cruise and Rio De Janeiro July 21-29, 2024



Mashad - Shiraz - Isfahan - Qum - Tehran October 3-15, 2024



China

Beijing - Guilin - Zhujiajiao - Shanghai October 11-20, 2024

Save the Dates

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Current M.D. Candidate at Stanford Harvard | A.B. Neuroscience & Philosophy Duke | M.A. Bioethics & Science Policy Fulbright Scholar | Neurophilosophy

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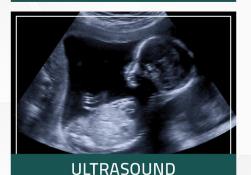
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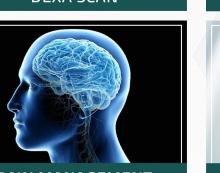
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MRI







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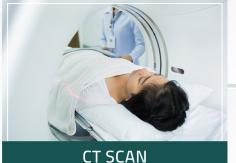


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As physicians deal with the daily business and financial challenges that healthcare faces today and the immediate future, they must be confident that their medical practice can successfully navigate the transformation that health reform is having. Health reform is ushering in substantive and lasting change that can adversely affect an unprepared medical practice.

Health reform has drastically increased physician quality compliance obligations and potential liability. Many physicians believe that health reform will "increase" their patient loads while "decreasing" the financial viability of their practices.

Herrera Practice Management understands the daily and comprehensive challenges faced by healthcare providers today. This first-hand "provider" experience enables Herrera PM to better assist physician practices in all medical specialty areas for the impact of health reform.



# 832-344-8249

### HELPING PHYSICIANS PREPARE FOR TODAY & THE FUTURE OF HEALTHCARE



## **PHYSICIAN SERVICES**

Once the physician has accepted our Proposal of Services, the Herrera PM Consultant will schedule an onsite meeting at the practice to meet with the physician(s) and the appropriate administrator and office staff to discuss the processes to be used to achieve the desired practice--improvement goals. Some of the practice management services Herrera PM provides medical practices include:

- + Operational Efficiency Assessment
- + Billing and Coding Analysis
- + Outsourced Billing and Collection Services
- + Revenue Cycle Analysis
- + Revenue Enhancement (Alternative Sources)
- + Strategic planning and implementation
- + Marketing Plan Development
- + Medical Practice Differentiation in the Marketplace

HERRERA PRACTICE MANAGEMENT 9711 S. Mason Rd. #270 Richmond, TX 77407

### & 832-344-8249

- www.herrerapracticemanagementllc.us
- joe@herrerapm.com



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Fortune Healthcare Hospice Services' highest priority is patient care. We strive for excellence in providing the support of compassionate care by including the families and caregivers in our individualized plan of care and by educating them to understand what is happening , what they can expect moving forward, and empowering them to provide the care when our staff is not present. We stress the importance of human need that goes beyond the physical care of the patient.

## **Benefits**

- Covered 100% by Medicare & Medicaid with some eligibility requirments
- Private Insurance

## **Hospice benefits Cover**

- > Adult failure to thrive
- Cancer
- COPD
- Chronic degenerative neurological disease
- Dementia
- Heart disease
- > HIV
- Huntington's disease
- Liver disease
- Parkinson's disease
- Renal failure
- Stroke



Dedicated to quality of life, hospice focus on palliative care by providing a support system of professional staff and volunteers to the patient and their family in meeting their physical, emotional, social and spiritual needs.





## Waqar Naqvi Rashid Naqvi

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