Assalaamu alaykum

Dear IMANA Members and JIMA Readers:

I thank Allah and the members of the Islamic Medical Association of North America (IMANA) for allowing me to serve as the president of our organization.

The eventful year began with a rewarding visit to China in July 2006. The continuing medical education (CME) program started with a welcoming address from the president of the Chinese Medical Association. The scientific presentations were well received. In addition to the rewarding cultural experience, tours of various provinces in China were spiritually and intellectually uplifting. Likewise, the PRISSNA CME session in Chicago provided many valuable lessons in medicine. The International Institute of Islamic Medicine (IIIM), a special project of IMANA, arranged a memorable program in Qatar and Dubai in January. In April, another successful medical student bash was held in Chicago. Members of the executive council of IMANA met in Tampa, Florida, and visited Dr. Ahmed El Kadi, one of the stalwarts of IMANA. In fact, each year an award entitled the “El Kadi Award” is presented to a deserving member.

Sadly, though, in May we were all sorrowful to learn of the death of Professor Muhammad Azhar Khan, one of our past presidents and former executive director of the Federation of Islamic Medical Associations (FIMA).

إنَّا لِلّهِ وَإِلَّهَيْ رَاحِعُونَ

We belong to Allah and we will return to Him.

His works and push for excellence in medicine at the international level will long be remembered. On a personal note, it was Professor Khan who introduced me to IMANA and FIMA. His accomplishments are being addressed in this issue of JIMA in an eulogy written by Hossam E. Fadel, MD, the editor of JIMA.

Dr. Muhammad Azhar Khan and Dr. Faroque Khan represented IMANA in planning a state-of-the-art medical program in Saudi Arabia. Members of IMANA will have the opportunity to participate in an exchange of knowledge that this program will establish.

The record will show that those who led our organization in the past served in an unselfish manner that involved taking a significant amount of time from their busy professional lives to meet their obligations of the respective elected and appointed offices. Not only did they personally bear the expenses incurred in executing their duties, they also generously donated funds for the operation of IMANA. In addition to the elected officers and appointed chairs, many members of IMANA continue to volunteer by serving on one or more of the various committees that are crucial to the operation of IMANA. The elected officers and appointed chairs worked tirelessly, despite their full-time jobs, in the execution of their offices.

However, many challenges lie ahead, including:
- evolving medical/ethical issues in a multicultural society,
- promoting cultural competence (physician and staff) in medicine,
- striving for professionalism,
- verifying the outcomes in continuing medical education,
- treating new and emerging diseases,
- managing disaster medicine,
- evolving medical technology, and
- changing the landscape of information technology.

IMANA is strategically poised to meet these challenges. For example, some jurisdictions now require physicians’ continuing medical education programs to include sessions on medical ethics and cultural competence in medicine. Our CME programs already include such sessions.

The Journal of IMANA (JIMA) is among the high-
lights of IMANA. However, there is room for additional articles, and our members are urged to submit articles for consideration for publication.

Our challenges also exist on the front of medical practice. Almost 30 years ago we were challenged with what we now call HIV disease. This infection affects the minority population disproportionately, and Muslims are not spared. Now, we have yet a different challenge: “disaster medicine”. Disaster medicine includes diseases that result from disasters that are induced by man as well as from naturally occurring events. Often overlooked are the long-term health consequences that follow these disasters. Two of the major ones are mental illnesses and physical rehabilitation. Regardless of the cause, healthcare providers must be prepared to recognize and act appropriately in the acute and chronic phases of these illnesses.

The most important aspect in the practice of medicine is the prevention of disease, and this is followed by the maintenance of health. To this end, we as human beings, as Muslims, and as healthcare providers have the obligation to be proactive in our practices and in our communities in preventing the occurrence of human suffering. IMANA is directly involved in relief activities, and I am aware that many members of IMANA are personally engaged in such preventive and relief efforts as well. The members of IMANA have been very generous in donating their time, effort, and money to various relief programs across the world.

In general, healthcare providers are highly respected in their communities. Each one of us should volunteer time, if we are not already doing so, to educate members of our communities on healthy lifestyles and to serve in clinics for the underprivileged.

The challenges are many, and some can be complex, but with the help of the members of IMANA and the permission of Allah we will rise to each one, insha Allah. The forum of IMANA must continue to expand so that we foster more diversity in our membership and leadership.

Wassalam,

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