

## Message from the Editor

### Assalaamu alaykum

#### Dear IMANA Members and JIMA Readers:

This is JIMA annual conference issue. We are excited to have our meeting this year in the nation's capital on the 4th of July weekend.

The CME committee has prepared an interesting scientific program as well as magnificent sightseeing tours.

As usual, JIMA publishes the abstracts to be presented and asks that authors/presenters submit the full-length articles for publication in JIMA. As I mentioned in the last editorial (April 2009), we are working on having JIMA published online in addition to its current printed version. There is still some work to be done but inshaALLAH the online version will be available shortly. Articles so published will be available through search engines and will receive wider exposure to the general readership. It is hoped this will make citation of JIMA articles by other authors surfing the web—while preparing for their articles—a reality.

I regret to report that IMANA suffered a number of losses the past few months. First was the death of one of our esteemed colleagues and a past president of IMANA, Dr. Mohammad Abdul Bari (see IMANA Newsletter Vol. 25, No. 1, January 2009). Then there was the loss of Dr. Ahmad Elkadi on April 11, 2009, and, more recently, the loss of Dr. Hassan Hathout on April 25, 2009. JIMA recently published a profile of the late Dr. Hassan Hathout (JIMA Vol. 40, No. 2, May 2008). In the current issue I wrote an obituary for Dr. Elkadi. May Allah ﷻ have mercy on all of them.

Also in this issue we have interesting articles. Dr. Basheer Ahmed reports on al-Shifa Clinic/Muslim Community Center for Human Services in Fort Worth, Texas. He describes its relevance to the community and the services provided. It is a good example of what each one of us can do in our communities. In addition to providing a much-needed humanitarian service, a part of our Islamic duty, it is a form of Dawah.

Dr. Aly Misha'l in his reporting of the Federation of Islamic Medical Associations (FIMA) holistic approach to the HIV/AIDS pandemic further exemplifies this concept. He describes how groups of Muslim physicians are handling such a significant social/medical problem. He advocates the involve-

ment of Muslim physicians in the community efforts to combat this pandemic. Muslim physicians, along with other religious leaders and civic organizations, can add other dimensions to the care of these patients i.e. education, prevention, and cure. Dr. Misha'l describes the programs of different Islamic medical associations, specifically those in Uganda, South Africa, Malaysia, and Jordan. He outlines their different approaches in this regards.

Dr. Owaeye et al report an interesting study about self-esteem and suicidal risk among subjects with dermatologic disorders in Lagos, Nigeria. They showed that patients with chronic dermatologic disorders have—as a group—lower self-esteem and increased risk of depression and suicide. Of note is the fact that Hansen's disease (leprosy) is still present in this part of the world.

Dr. Hodson et al reported on maternal mortality over a 19-year period in an eastern North Carolina tertiary center. It is alarming that there is still the high maternal mortality rate of 13.1 per 100,000 live births in the year 2004 in the United States. The stated goal of the U.S. Department of Health and Human services in its report of Healthy People 2010 is 3.3 maternal deaths per 100,000 live births. It is apparent that we are too far from achieving that goal. According to Hodson et al, the maternal mortality rate in the Brody School of Medicine in Greenville, North Carolina, was 27.6 per 100,000 live births, which is substantially higher than the national average. This is not unusual in tertiary centers, which usually deal with high-risk patients or more commonly with late referrals and transfers of seriously sick patients from other hospitals. Also, sadly, there is still a wide discrepancy in maternal mortality rates between Caucasians and African-Americans. In this study, it was 3.8 times as high among African-American women, and this discrepancy is true for the nation as a whole. It is reported to be four times higher nationally.<sup>1</sup> This is related to lower socio-economic conditions and more limited access to medical care, specifically late prenatal care. The authors discussed cases of maternal deaths and the causes of death and identified which ones were preventable. They also discussed measures to reduce these rates.

In this issue, Dr. Faroque Khan profiles the first

female Muslim physician elected to the board of regents of the American College of Physicians (ACP), the largest medical specialty organization and the second largest physician group in the United States.

I hope to see you in Washington. I again ask you to support your journal by submitting your articles. I will be happy to help you in getting your manuscript published.

#### Reference

1. Maternal and Child Health Bureau. U.S.

Department of Health and Human Services. Child health USA 2006 data book. 2006:25. Available from [http://mchb.hrsa.gov/chusa\\_06/pages/pdfs.htm](http://mchb.hrsa.gov/chusa_06/pages/pdfs.htm).

**Wassalaam,**

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