



NEW MOWASAT HOSPITAL
CARING FOR GENERATIONS

Advocating, Leading, Caring ...

International Nurses Week



A Publication of the New Mowasat Hospital | 2012

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2012



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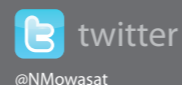
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CARING FOR GENERATIONS

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01 International Nurses Day Celebration under the theme "Nurses: Advocating, Leading, Caring"



May 2012 - On the occasion of the International Nurses week, New Mowasat Hospital shared appreciation towards its nursing crew by celebrating the event in recognition of their essential participation as healthcare providers who offer compassionate services to patients daily.

New Mowasat's Hospital Director, Mr. Nadeem Nazir, stated that hospital management believes the nursing staff is a key partner in the development of healthcare and better service provision to patients. Indicating the hospital's great pride in its nurses, Mr. Nazir added that the hospital follows the standards of the Canadian Council and the American Joint Commission accreditations and thus, carefully selects its staff according to the highest degree of efficiency both in terms of professionalism and on a personal level.

Moreover, in another speech New Mowasat's Nursing Director Mrs. Halima Booshehri congratulated the nursing team and pointed out her immense pride in New Mowasat staff in general and the nursing team in particular. "The celebration of this event will not be possible without the great and continuous support from the hospital's management team who always recognize and acknowledge the Nursing Department for their hard work, dedication, commitment and most of all for their outstanding contribution to the health care system, and consider nurses as the backbone of the NMH healthcare system."

"This year's theme is Nurses: Advocating, Leading, Caring". During this pivotal time in our journey to transform health care, the theme is particularly meaningful. We, NURSES continue to advocate for a system that puts patients at the center and that emphasizes prevention and wellness. We, NURSES are identified as leaders who can improve practice. We, NURSES demonstrate our caring every day, not only in our interactions with patients, but by our integrity." Mrs. Booshehri added.

Mrs. Booshehri then concluded saying, "There is no better time of year to show nurses how much we appreciate their contributions than this week. They are always more committed to the health of their patients than their own and this tireless effort indeed has to be recognized, appreciated and acknowledged". She then handed certificates of appreciation to New Mowasat Hospital's nurses.

The nursing staff is a key partner in the development of healthcare and for a better service provision to patients.

Nadeem Nazir



02 Employees Birthday Celebrations

“One team...
One family”

New Mowasat Hospital started the birthday celebrations tradition in September 2010 as an employee engagement initiative. Since then, every month the management comes together to celebrate the employees' birthdays.



With this monthly tradition, the human resources department aims at sharing the employees' joy on this special occasion; being the “one family” that Mowasat's employees have always been.

“This get together with the senior management and the birthday celebrants made me feel at home. I really enjoyed it and I wish this to continue in future, so that all may feel the same. I appreciate the management and all those who are involved for bringing out such ideas. May God bless them all.”

Ms. Chacko Sosamma



“It was indeed a very pleasant and happy occasion. It will help to build the one family feeling among our staffs. Thank you very much.”

Ms. Swapna Thottunkal

“Thank you very much for birthday treat given by the HR and the management. I appreciated the effort of reaching out to us and made us feel a part of the NMH family. I hope this will be the beginning of a better relationship among us”.

Ms. Jane Pronto

“I would really have to thank everyone who had come up with this decision to celebrate the birthdays of our staff. This decision is one of the best decisions to motivate and encourage our staffs to perform better in their daily chores. Overall, I would like to say that celebrating the birthday of our staffs is a great decision to motivate, encourage, and appreciate the staff at least once a year on an occasion which they consider ‘special’”.

Ms. Fawziya Al Mansouri

“Thank you very much. It was really great. This will improve our relationship and get all the hospital to become one family.”

Dr. Nahla A. Fattah



03 Professional Skills Development Lecture

April 18th - The hospital held an in-house lecture for NMH employees to enhance their skills in regards of communicating difficult news to children and families. The lecture was presented by Dr. Rose Logan, clinical psychologist (UK) from Al Soor Center for Professional Therapy and Assessment. Dr. Logan addressed the identification of good practice and areas for development, the essentiality of effective communication, and the methods to adapt communication and manage emotional reactions.

At the end of the lecture, there was a small group case study as a practice of the addressed topics.



05 Physicians receive Communication & Performance Management Workshops

04 Health Information Administration Students Visit from Kuwait University

In a move that reaffirms its community role, New Mowasat Hospital hosted a visit of 3rd year Health Information Administration students from Kuwait University, Faculty of Allied Health Sciences.

Ms. Fawziya Al Mansouri, Manager of the Medical Records Department, Mr. Pierre Aoun, Customer and Support Services Manager, and Mr. Yasser Tarabay guided the field trip of 15 students to observe and experience real-world applications of HIA practices in New Mowasat as an internationally accredited healthcare facility.

Furthermore, the trip emphasized New Mowasat Hospital's vision of the younger generation as a vital element in shaping Kuwait's future.



At the end of the visit, the students highly appreciated New Mowasat's support for allowing them to see and to learn more about the daily operations that takes place in the different departments of the hospital. They also acknowledged the continuous support and cooperation between private sectors and Kuwait University regarding New Mowasat Hospital as the Leader in this field.

Ensuring the best quality of clinical excellence and patient care

Ensuring the best quality of clinical excellence and patient care, New Mowasat Hospital continues to enhance the skills of its staff through continued investment in training and development.

New Mowasat physicians received the "Communication for Medical Professionals" and "Performance Management" workshops which were mainly intended to allow NMH physicians to explore alternative and practical ways of thinking about communication with patients and colleagues and to align the performance for which they have always been known of.

Held in a consultative and informative way and focusing on the importance of communication and how language, emotion and objectivity affect communication, the workshop given by Edara Group addressed aspects like day-to-day communication with patients and in-house colleagues.

The workshops echoed a very positive feedback from the participants. "The workshop was a great learning experience and we look forward to more such interventions in the future" one of the participants stated. While another participant explained that the presentation and discussion were very useful and gives the chance to share views, problems, and suggestions.

Moreover Human Resources Manager, Mr. Majeb Al Ajmi, declared that the training is in line with the hospital's strategy of developing the skills of the hospital's physicians, nurses, administrators and technicians to ensure the highest quality of health care services for patients and visitors.

06 Talk with Dr. Aziz Alfeeli on Medical Acupuncture and Manual Medicine

April 2012 - The New Mowasat Hospital has recently launched new services to the Rheumatology and Physical Medicine department including “Medical Acupuncture” and “Manual Medicine” such as Chiropracy and Osteopathy. To shed more light



Dr. Aziz Alfeeli
Physical Medicine and
Rehabilitation Specialist

on this type of treatment, Dr Aziz Alfeeli, Physical Medicine and Rehabilitation Specialist, holding Medical Acupuncture and Manual Medicine fellowship, and who has recently joined the New Mowasat Hospital explains the nature of such new services.

What is the Definition of Medical Acupuncture and Manual Medicine?

Medical Acupuncture is a type of medical treatment that works by pricking parts of the human body using small (Chinese) needles in order to treat pains or some chronic diseases.

Whereas Manual Medicine focuses on using manual skills such as mobilization or manipulation to treat musculoskeletal system, such as in muscle or joints pain. It is divided into Chiropracy (rectifying the spine) and Osteopathy (rectifying body joints and muscles, in addition to the spine).

What do Medical Acupuncture and Manual Medicine treat?

Medical Acupuncture deals with so many diseases including but not limited to migraine headache, sciatica, arthritis, neck and back pain.

Whereas Manual Medicine deals with muscle and joints pain, such as acute and chronic neck or back pain, muscle pain or sprain.

How does Medical Acupuncture work?

There are several theories about the way Acupuncture work. Here are some:
By stimulating the secretion of pain-relieving endorphins.

By stimulating the secretion of neurotransmitters which deliver the nerve signal to and from the brain.

By activating or deactivating the central nervous system including the autonomic nervous system.

By stimulating the local blood circulation.

What are the Manual Medicine?

There are two types of techniques used in Manual Medicine:

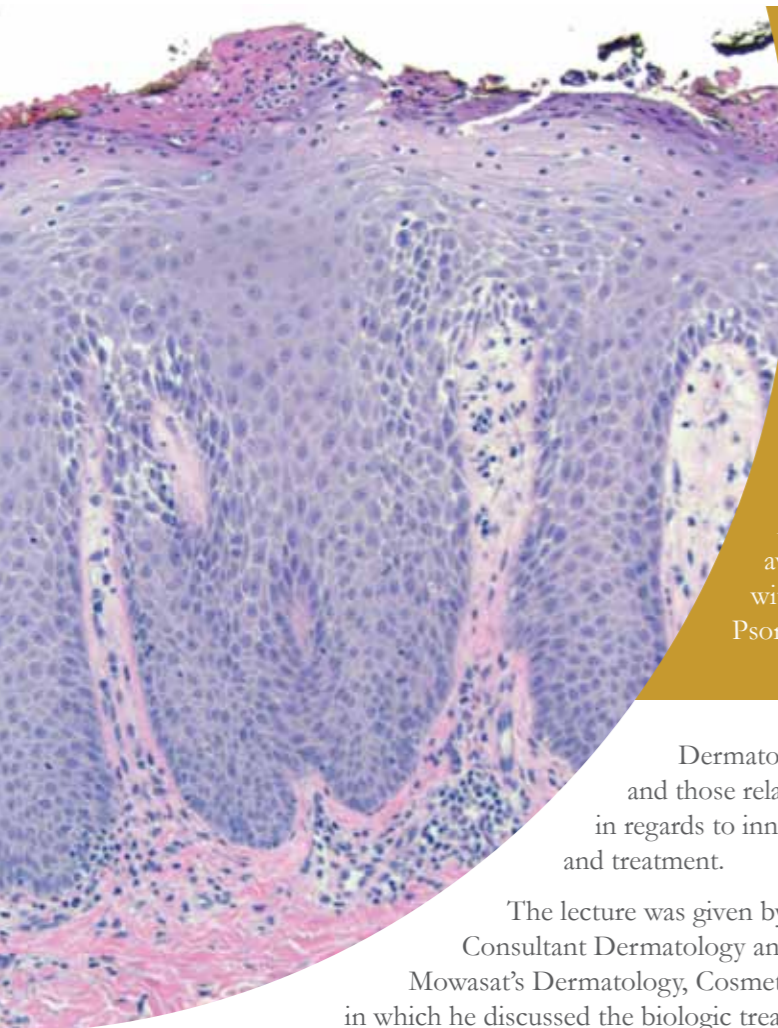
Basic: which include strain/ counterstrain, positional release, muscle energy technique by means of manipulation or mobilization to joints and soft tissues.

Advanced: which include advance myofascial release (deep tissue massage) and complicated manipulation or mobilization.

To conclude, it is necessary to indicate that these treatments must be performed under the supervision of a specialist physician who is qualified in this area in order to achieve the desired medical results and avoid any possible side effects.



07 New Mowasat addresses Psoriasis in an Awareness Lecture “New Era in Psoriasis”



Psoriasis is a chronic skin disease indicated by red hues of scaly patches appearing on the top first layer of the skin. It often appear on the scalp, knees, elbows, lower back, ankle, fingernails, feet, chest and abdomen, the back of the arms and legs, and the palms of hands and feet.

As part of its public awareness lectures series, New Mowasat Hospital organized an educational lecture to address the advanced treatment methods “Psoriasis” on the 23rd of April. As a contribution from New Mowasat to raise health awareness in the society, the lecture was organized in association with “ABBOTT” Pharmaceuticals under the title of “A New Era Psoriasis” in which advanced technologies used in the medical field

Dermatology was highlighted in general and those related to “Psoriasis” in particular; in regards to innovative methods of diagnosis and treatment.

The lecture was given by Dr. Hisham Al Khatib, Consultant Dermatology and Venereology in New Mowasat’s Dermatology, Cosmetic and Plastic Surgery Center; in which he discussed the biologic treatment of psoriasis and other chronic skin diseases. Informatively, Dr. Hisham further discussed the use of this type of medications, side effects, precautions and complications.

Dr. Hisham Al Khatib explained that biological therapy is a huge step in medicine as it is used in the treatment of many chronic diseases like rheumatoid and asthma, not only skin diseases.



Dr. Hisham Al Khatib
Consultant Dermatology
and Venereology



08 Visit continues decade-long within the International Physicians Program at New Mowasat Hospital

Dr. Mark Hurdle, a Professor in Physical Medicine and Rehabilitation at the world-renowned Mayo Clinic, returned to Kuwait from 16-19 April. This was his sixth visit as part of the International Physicians Program at New Mowasat Hospital.

During the visit, Professor Hurdle had the opportunity to continue important experience exchange and dialogue with Dr. Samer Abdullah, who heads the Rheumatology and Physical Medicine Department at New Mowasat Hospital. Dr. Samer visited Mayo Clinic in Rochester, Minnesota last summer as part of Mayo’s Continuing Medical Education program, which offers courses that teach timely, evidence-based practices that can be implemented immediately.

Professor Hurdle and Dr. Samer saw nearly 50 patients during the visit, many with rare syndromes related to spinal and peripheral joint tissues.

“I am always humbled to have the opportunity to collaborate and share important medical intelligence with international experts like Dr. Samer,” said Professor Hurdle. “By continuing to solidify this important relationship, we are learning invaluable information that will assist physicians at both our hospitals to better serve the needs of the patients. I am grateful to be able to personally visit with many of the patients who reside in Kuwait and whom I previously treated at Mayo Clinic.”

“The International Physicians Program is an important and unique offering that we provide to patients. It allows for collaboration with some of the best medical specialists from all over the world, including Professor Hurdle,” said Dr. Samer. “Mayo Clinic is a world-class institution of its own, and this collaborative relationship allows our patients to receive the most up-to-date medical advice to address their unique health needs. Patients also appreciate the opportunity to receive a second opinion, especially when recommended by their primary physician.”



Professor Mark Hurdle
Consultant at Mayo Clinic with
Dr. Samer Abdullah, Head of
Rheumatology & Physical Medicine Dept.

“The International Physicians Program is an important and unique offering that we provide to patients. It allows for collaboration with some of the best medical specialists from all over the world, including Professor Hurdle.”

Dr. Samer Abdullah

09 Coronary CT Angiography



Dr. Amr Gamal
Consultant and Clinical Director
of Radiology

In the past, noninvasive functional tests of the heart were used, such as treadmill tests and nuclear studies, to indirectly assess if there were blockages in the coronary arteries. The only way to directly look at the coronary arteries was via a cardiac catheterization and coronary angiogram.

A new generation of 64 multislice CT scanners which can take 64 pictures a minute is now available making non-invasive Imaging of coronary arteries now possible. A powerful 3D reconstruction tool helps much to establish an accurate morphologic assessment.



How is CT coronary angiogram (CTA) performed and what are the risks of the procedure?

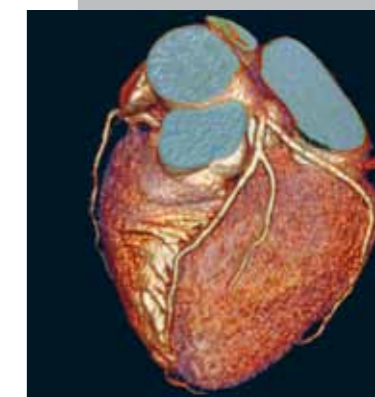
This procedure use intravenous dye and CT scanning to image the coronary arteries. While the use of catheters is not necessary (thus the term “noninvasive” applies to this procedure), there are still some risks involved. For people allergic to iodine, pretreatment with medications is necessary to prevent allergic reactions to the dye. In people with abnormal kidney function and/or diabetes, the dye may worsen kidney function. Finally, there is radiation exposure which is similar to that received with a conventional coronary angiogram. Nonetheless, this is generally a very safe test for most people but should only be undergone when ordered by a physician familiar with the patient and their underlying medical condition.



Who should get a CT coronary angiogram?

While CTA should not be used as a “screening” test in the general population, it is a major new tool in the diagnosis of coronary artery disease. In patients at high risk for developing coronary disease (cigarette smokers, those with genetic risk, high cholesterol levels, hypertension or diabetes) who have unclear results on their stress test or who have symptoms suspicious of coronary disease, CT angiography is an excellent next step in the diagnosis. If the CT scan is normal or only mildly abnormal, it makes the likelihood of a severe blockage of the coronary arteries extraordinarily small.

Conversely, if the CT scan is significantly abnormal, cardiac catheterization and angiography are then indicated to see if angioplasty, stenting, or coronary bypass surgery may be indicated. In people who have had bypass surgery, CT angiography is very effective at evaluating the patency of the bypass grafts. In people who have had coronary stents, it is sometimes difficult to image the inside of the stent to see if it is narrowed. CTA can also detect pulmonary embolism, aortic aneurysm and dissection and calculate calcium build up in the wall of coronary arteries (calcium score) which is taken as early sign in calculating risk of having coronary heart disease. it is imperative to discuss with your physician if this is the correct test for you.



10 Orthodontics - Embrace The Supersmile



Dr. Javed W. Parker
Specialist - Orthodontist



We live in an era where the pursuit of “good looks” has become a major goal in everyday life, as “looks” seem to be one of the most important and significant assets for success.

Everyone wants an alluring smile, and enhancing their appearance of their “pearly whites” encourages them to appear and feel pleasant. Having teeth that are crooked or out of place (malaligned) affects the way a person chews, talks and how their smile looks.

These problems can be corrected by orthodontic treatment (or braces as it is commonly known).

Orthodontics is the oldest speciality in dentistry and deals with the diagnosis, prevention and treatment of problems with the alignment of the teeth related to the jaw bone and the chewing muscles.

Orthodontic treatment works by exerting a gentle pressure over a period of time to straighten teeth that are growing or have already grown out of place. The word orthodontics is derived from the Greek words *orthos* meaning “straight” and *dons* meaning “tooth”.

Dental experts estimate that more than two-thirds of the population need braces to correct tooth alignment problems including teeth that protrude or are crooked, teeth that overlap or crowd each other, and teeth that have gaps between them. Whatever the condition, individuals recognize that orthodontics will enhance their appearance in the long term and are making an investment in their health and facial appearance.

An attractive smile is a wonderful asset. It contributes to self-esteem, self-confidence and self-image

Need for Orthodontic Treatment ?

Properly aligned teeth help an individual to effectively bite, chew and speak. Straight teeth contribute to healthy teeth and gums. Teeth that work better also tend to look better. An attractive smile is a pleasant “side effect” of orthodontic treatment.

You may be surprised to learn that straight teeth are less prone to decay, gum disease and injury. Straight teeth collect less plaque a colorless, sticky film composed of bacteria, food and saliva. Decay results when the bacteria in plaque feed on carbohydrates (sugar and starch) we eat or drink to produce acids that can cause cavities. Plaque can also increase the risk for periodontal (gum) disease. When teeth are properly aligned, less plaque collects and these risks decline. It is easier to keep teeth clean. As for injuries to teeth, protruding upper teeth are more likely to be broken in an accident. When repositioned and aligned with other teeth, these teeth are most probably going to be at a decreased risk for fracture. (Fig. No. 1)

Untreated orthodontic problems may become worse. They may lead to tooth decay, gum disease (Fig. No. 2), destruction of the bone that holds teeth in place, and chewing and digestive difficulties. An attractive smile is a wonderful asset. It contributes to self-esteem, self-confidence and self-image—important qualities at every age. A pleasing appearance is a vital component of self-confidence. A person’s self-esteem often improves as orthodontic treatment brings teeth, lips and face into proportion.

Finally, the importance of an attractive smile should not be underestimated in this new era which emphasizes on the best looks and designer clothing, then why not have a “Designer Smile”!

When Should Treatment begin ?

The American Association of Orthodontists recommends that children receive their first orthodontic examination as early as seven years, especially for children who have an imbalanced facial profile, difficulty in chewing ,pain or noise in the jaw joint, a speech problem and a digit sucking habit that persists after the age of four years.

An examination and detection of prospective problems at a young age allows treatment to begin early enough to take advantage of the primary growth period and is technically called as “Interceptive Orthodontics”. Interceptive therapies correct problems before they have established themselves and hence produce more stable results. It may also help avoid permanent tooth extraction and achieve results that are not possible to attain once the face and jaw have finished growing.

The biological process involved in tooth movement is the same in both adults and children. The oral health of individual’s teeth, gums and supporting bone is most important in determining the prospects for improving



Before



After

Fig. No. 1



Fig. No.2

an adult's smile and dental health. But certain corrections cannot be accomplished with braces alone as adult facial bones no longer grow. Nevertheless very dramatic and exciting results can be achieved nowadays with latest technology combining Surgery with Orthodontics. This treatment is called "Orthognathic Surgery".

How Long Does Treatment Take?

Movement of teeth is a slow process active treatment time can take on average, 18 - 20 months and ranges from 1 - 3 years depending upon the severity, type of problem and patient's age. The patient's cooperation is indeed a pre-requisite for successful treatment. After the braces are removed a patient may have to wear "retainers" which are custom made for each individual. They are worn as much as needed to maintain the teeth in their new position.

An ideal orthodontic treatment requires a combined effort of the Orthodontist and the patient. Those patients who brush thoroughly, avoid sticky and hard food wear their elastics and headgears as instructed and keep their appointments, usually finish treatment on time with achieving the treatment goals - a healthy mouth and a beautiful smile.

Successful orthodontic treatment is like a two-way street that requires a consistent co-operative effort by both the orthodontist and the patient. To keep teeth and gums healthy regular visits to the family dentist must continue during the orthodontic treatment.



Ceramic or Clear brackets

The Damon System is not just about revolutionary braces and wires; it's a whole new way of treating patients. Traditional treatment often requires removal of healthy teeth and/or the use of palatal

The wires that are used in braces today are also better than they used to be. Newer corrective wires made of Heat Activated Nickel Titanium (HANT) apply optimal forces over a prolonged duration and minimize the number of visits to the Orthodontist's office.

Orthodontics in the new millennium is also capable of providing patients with a window to the future, courtesy of new computer software that generates a "virtual face" which can display the outcome.

Your smile is the first impression people get of you. When you consider the lifelong personal and professional benefits of a healthy, confident and attractive smile, Orthodontics is the best investment you'll ever make. A new smile can increase your self confidence, improve your appearance and promote better dental health. As the saying goes "A smile is a curve that sets everything straight"..... (But of course by your Orthodontist !)

The stigma of braces has disappeared over the years. The new generation opts for orthodontic treatment, witnessing its benefits in the society and amongst friends. Whether aged 16 or 60, the appearance and health of one's teeth is an important aspect of one's life.

Types of Braces:

Braces have come a long way from the train track look of yesteryears when it was a taboo. Everyday new and improved techniques are being introduced in Orthodontics that makes wearing braces more comfortable and attractive. Braces are much less noticeable than they used to be.

Metal brackets can be silver or golden. Metal brackets tend to be less expensive than other types of brackets. In addition, you can make them colorful with ligatures that come on a rainbow of colors. They are also designed in various shapes like Flowers, Hearts, Stars, Soccer balls and Football brackets etc., also known as Wild Smiles Brackets, to choose from and suit their fashion statement.



Ceramic or Clear brackets are translucent or the same color as one's teeth and they are much less noticeable than metal brackets. Adults like to choose ceramic brackets because they "blend in" with the teeth and are less noticeable than metal.

Lingual or Invisible Braces which are fixed behind patients teeth. It is suitable for those who don't want the stigma of wearing braces.

expanders to make space. This approach is often uncomfortable, takes longer, and can leave a narrower arch and a flat profile. Damon smiles are full, natural 10-tooth smiles achieved with light biologically-sensible forces, and are specifically designed to improve the overall facial result of each patient.

This system delivers a faster treatment time, fewer appointments, improved comfort, less extractions and freedom from Headgear and expansion screws.

If the thought of wearing braces is holding you back from the smile you've always wanted, this is good news. Invisalign, a state-of-the-art alternative to braces.

Virtually undetectable to other people. Invisalign straightens your teeth, not with brackets and wires, but with a series of clear, customized, removable appliances called aligners. Each aligner is worn for about 2 weeks, and a series of aligners are used until the teeth are straightened. The aligners are worn full-time, and taken out only for eating and brushing.



Invisalign

11 LASIK Alternatives and Returning to Surface Treatments (Epi-LASIK, LASEK or PRK)



Dr. Mohamed Abd Al Naby
Ph. D of Ophthalmology
Consultant - Ophthalmology

The continuously recurring question nowadays is: What is the difference between LASIK and other types of surface treatments such as Epi-LASIK, LASEK or PRK and others? This is what we will attempt to examine in these lines.

Initially, Excimer Laser Rays used in all such operations are cold and invisible with a wave speed of 193 Nanometer. When these rays fall onto the cornea tissues, they carve the cornea (as per defined measurements and controls) to offer the required eyesight strength.

There are two way to release and point the Laser to the cornea: either by releasing it to the cornea surface, which is called the surface treatment, or release it inside the cornea tissues, which is called LASIK.

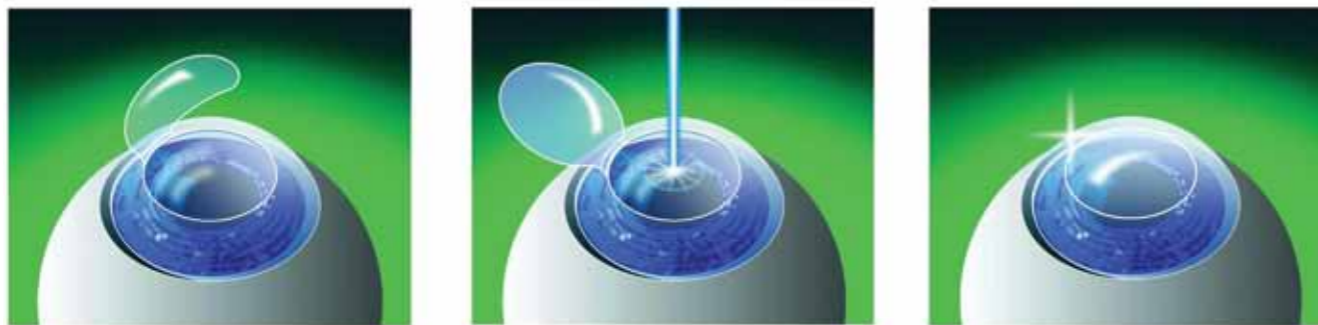
The start was by the surface treatment. When we began using the Excimer Laser rays in the second half of 1980s, we used to point the rays to the cornea surface. The cornea surface was prepared by removing the corneal epithelium manually. Then the laser was directed to that area. This operation was called "PRK". It was the only surgical operation at that time to correct shortsightedness, using Excimer Laser rays.

In fact, this operation enabled millions of people to get rid of glasses and lenses. Yet, there were still two main problems accompanying that procedure, namely:

First: Severe pain. The epithelium removed manually, is host to plenty of nerves, and the patient complains of pain similar to a wound or cut pain until this removed layer completely grows again.

Second: Excimer Laser rays react with the cornea surface leaving a haze that may affect the eyesight level with a certain number of patients.

These two reasons motivated ophthalmologists to think into another direction: "why do not make a cut in the front part of cornea and then, point the Excimer Laser rays inside the cornea tissues? Accordingly, we relieve both problems. Indeed, the Micro-keratome was developed and we had automatic cutting devices which are highly safe. This operation was called LASIK and, gradually, it replaced PRK operations. The term "LASIK" became the magical word in 1990-2000. A greater advance took place with the use of Femtosecond Laser devices to cut the cornea peel as the LASIK operation is completely done using Laser.



LASIK Operation Steps

In Laser literature, we began to hear the "wow effect", which translates into "Wonderful" when spoken of LASIK patients to show admiration of how quick they could live without glasses. Within less than 24 hours, most patients move with full freedom without glasses, but again we faced two problems which restricted using LASIK with all patients.

First: How can we deal with the thin cornea? Thin cornea cannot undergo the exposure to cutting and then treatment with Laser. This is simply because it will be too thin and will not be able to retrieve its natural shape and, consequently, complications appear.

Second: LASIK is the bitter enemy of a conical cornea as it increases the severity of this disease.

These two problems have excluded a number of patients who wish to do away with glasses and lenses and could not benefit from LASIK procedure. However, human ambition and continuous endeavor to be better motivated the development and improvement of PRK operation once again. In practice, a sudden advance took place in surface treatments and the solution to get rid of pain and hazes. Therefore, recent years witnessed a variety and development in surface treatments that share three names which may be difficult for many patients to differentiate:

1. PRK Laser Operations
2. LASEK Operations
3. Epi-LASIK Operations

(Epi-LASIK operation)

As explained, the goal of all these medical procedures is to remove the corneal epithelium and then apply Excimer Laser. If removal is executed manually, the operation is called PRK. If the removal takes place using a chemical, it is then referred to as LASEK. However, if the removal is executed by making an incision the corneal epithelium, the operation is called Epi-LASIK. Differences among

the results of each operation are minor. Now, in Mowasat New Hospital, we have available as part of our the latest improvements an advanced Laser device medically used to remove the corneal epithelium and, then, perform a laser treatment through one step only and with extreme precision.

Summary

So, how do we summarize what is now available to us compared with what we have left behind in this first decade of the new millennium?

To count the lesser of Allah's blessings, we have now two types of medical treatments in place: surface and LASIK treatment.

The LASIK technique is used to treat patients with a cornea that has sufficient thickness and return normal natural topography image. The surface technique is used to treat patients with cornea that lacks sufficient thickness and return suspected natural topography image. What brings in assurances is the fact that the results of both techniques are so close to one another and almost lead to the same final outcome. Therefore, it is needless to hesitate in the acceptance of performing surface treatment operations based on wrong information.

Let me whisper in the ears of those who wish to put away their glasses: "Allow more space of freedom to your physician to choose the suitable medical procedure for your eyes."

Mowasat Eye Center is completely equipped with state-of-the-art technological devices in the area of sight correction. We have Femtosecond Laser, which presents a uniquely precise solution based on Infrared rays applied in a long wave. 3D Schwind ARAMIS 750S with eye - tracing technology is also available and can trace the eye, leading to more accurate results according to the highest safety standards. Using Iris Wavefront present a possibility of thorough treatment of difficult medical cases.

12 DON'T let hypertension symptoms go undiagnosed!! HYPERTENSION... The Silent Disease

High blood pressure is at epidemic levels, and some estimates put the lifetime risk of developing it at 90 percent for those living in developed countries. Recent studies show that the number of adults living with high blood pressure (hypertension) was 972 million back in 2000, and expected to rise up to 1.56 billion by 2025!

One of the major problems when it comes to this particular disease is that it is “silent”; thus known as the “silent killer”.



Dr. Amgad Suliman
Specialist Cardiologist

What is blood pressure (BP)?

BP (blood pressure) is the force of blood that is pushing up against the walls of the blood vessels.

What is hypertension (HTN)?

Hypertension is a chronic or transient elevation of blood pressure to a level likely to induce vascular damage.

What is the complication?

If the blood pressure is too high, the heart also works harder to pump and this leads to organ damage such as heart failure, stroke, renal failure and heart attacks.

Levels of BP.

Normal 120/80 mmhg or below to maintain normal organ perfusion.

Pre-hypertension is 120/80 mmhg -139/89

True hypertension is 140/90 mmhg or more

Causes of hypertension:

1. Primary hypertension - Multifactorial includes:

- High salt intake
- Smoking
- Overweight

- DM (diabetes mellitus)
- Vitamin D deficiency
- High “bad cholesterol” (LDL)
- Low potassium (K), magnesium (Mg), Calcium (Ca) levels
- Sedentary life
- Genetic blacks and Indians have more familial HTN.
- Medicine (e.g. contraceptive pills, some antihistamines)
- Stress

2. Secondary hypertension - appears at young age usually between 20-35 years old.

- Narrowing of kidney arteries
- Chronic kidney disease
- Adrenal hormones over secretion.
- Thyroid problems
- Autoimmune diseases like polyarteritis nodosa, Takayasu arteritis, Coarctation of aorta.
- Pre-eclampsia and eclampsia in pregnant females.

3. White Coat Hypertension -single elevated reading in doctor’s office due to ANXIETY.

Symptoms of hypertension:

- Asymptomatic for 35-50% of patients, so regular check up is essential.
- Headache specially in the back of the head
- Dizziness and fatigue
- Irregular heartbeats
- Vision problems, nausea and vomiting
- Chest pain

Diagnosis:

1. Medical history
2. Sphygmomanometer machine to measure blood pressure; at least three readings while at physical and mental rest.
3. BP monitor accurate measurement over 24 hours.
4. ECG to rule out enlarged heart from longstanding hypertension to prevent heart failure.

Treatment:

Low salt diet, stop smoking, control of DM and hyperlipidemia, change lifestyle to more exercises and less stress.

Medicines: Every patient needs special group of medicine as per doctor’s findings.

Prevention:

- Proper diet and exercise
- Healthy weight
- Reduce salt intake and stressful life
- Screen to prevent hypertension complications as 35-50% of patients have no symptoms.



13 Health Risks Associated With Weight Gain / Obesity

Say "NO" to Obesity

Health troubles related to obesity increase when the body mass index exceeds 25 (Measured by dividing the body weight in kilograms by square meter length).

Good nutrition is not enough:

Everyone thinks of healthy options in good faith, but often fail to apply them to themselves. Excessive weight increases the possibility of health troubles, such as heart diseases, brain stroke, high blood pressure, joint troubles, as well as certain types of cancerous tumors.

High blood pressure in the arteries:

In this case blood pressure remains high continuously, particularly in the case of heart slackness between pulses. If left without treatment, it may tend to increase slowly. Over several years, it is proven that sometimes a sudden high blood pressure occurs. This case must be treated as soon as possible, because it can hurt the blood vessels in the kidneys, the eyes or the brain. If left without treatment, it may eventually lead to death within six months. High blood pressure in the arteries is a main factor of brain stroke and heart diseases in adults.

In the same context, many persons suffering from high blood pressure in the arteries may continue to enjoy normal body weights. However, persons with obesity issues tend to suffer a treble high blood pressure compared to those who enjoy normal body weights.

Persons with excessive body weights who suffer from high blood pressure in the arteries can go back to the normal blood pressure if they lose only a half of their excessive weight bulk despite the fact that they will be somewhat overweight.

Persons with excessive body weight should be encouraged to lose excessive body weight as soon as possible. If they are not able to drop most of their excessive body weight, then every kilogram they lose makes them able to control the high pressure. With a relatively small loss of weight, we can experience a noticeable decrease in blood pressure in the arteries.

Increase of the stock of fatty substances:

This takes place normally as the age progresses and in accordance with the decreased muscle mass. A good part of this is mainly due to overeating and less physical activity.

Obesity resultant from increase in fat stock may cause high blood pressure in the arteries and increase sugar in the blood. It also makes walking and performing jobs more difficult despite the

Excessive weight increase gives rise for the possibility of health problems

fact that small increase of fat during adolescence may not damage health. However, high increase often causes many troubles.

Diabetes:

- Diabetes is characterized by high sugar concentration in blood for several reason:
- Insufficient insulin released by pancreas.
- Sugar is not transported to body cells, causing the appearance of the second type of diabetes, and environmental and genetic factors. This type usually appears at the age of 20.
- People from families with a history of the type 2 diabetes should avoid the accompanying risk factors, such as obesity and lack of starch. They also must be medically checked regularly. The type 2 diabetes associated with obesity often disappears if excessive weight is overcome. Achieving a healthy weight should be the main objective of treatment. However, even the small loss of weight shall better help organize the blood sugar.

Heart Disease:

Heart diseases are characterized by residuals of fatty substances in blood vessels feeding the heart. These residuals hinder the blood stream and may reach the hearth causing heart failure and, eventually if not treated, death.



Joint Problems:

These problems may take place as a result of a genetic condition disease, or simply as a result of excessive load imposed on the joints in the backbone, knees, hips, ankles, and feet because of excessive body weight.

Weight gain indicates bad health...

Maintaining a good health is possible by getting rid of the risk factors:

- You can protect yourself against health risks associated with weight gain.
- Obesity must be considered as a chronic disease that needs to be treated immediately.
- Long term lifestyle is what you should properly apply to change and not a temporary diet after which you return to previous eating habits.
- Simple behavioral changes in selecting foods and physical activity will help you enjoy a full healthy life.
- What you should concentrate on are active healthy life, practicing sports as well as alimentary modifications.

Monitor your diet:

Persons who gain weight quickly should closely monitor the food they eat and the motor activities they attempt. Body weight is solely the most important factor in defining the fat rate in the human body.

Maintain a low fat rate in your body:

It is possible that the fat rate forms 2% to 70% of body weight. Men with more than 25% of fat and women with more than 30% - 35% of fat are considered individuals suffering from obesity.

Seek to lead a healthier life:

Excessive weight increases gives rise for the possibility of health problems, such as heart diseases brain stroke, high blood pressure, joint troubles, as well as certain types of cancerous tumors.

Travel Safe with Travel Medicine

Consult your doctor to prevent and manage travel-related health problems through immunization, vaccination, and medical advice.



For more information

Dr. Mahmoud Omar, Consultant & Clinical Director Digestive Diseases and Endoscopy
Ext. 2236-2231-2252 – 1826666



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14 Don't forget your Health Guidelines Travel Safe...



**Did you Know?!
One third of travellers
experience a
travel-related illness;
in most cases diarrhea
or an upper respiratory
infection.**

With the summer travelling season fast approaching, it is time to start thinking about your travel checklist.

Along with packing your favorite summer clothes, new sun shades, and map; make sure you haven't forgotten your travel health guidelines.

Always seek pre-travel advice.

- Ideally, all international travelers must have an initial consultation at least six weeks before their departure date to allow time for immunizations and assessment of any undesirable reactions.
- If you are a Diabetic, make sure to consult your physician about your personal needs.
- Diabetics have special travel issues that should be discussed with a specialized doctor.
- Share your medical history with your physician.
- Especially if you are travelling to high altitudes, your physician will need to evaluate your medical history.
- Do not swim, bathe or wade in freshwater, streams, rivers or lakes' this is where schistosomiasis is transmitted. If contact with such water occurs, immediately towel dry the skin.

Take Personal Precautions against insects.

Use insect repellants, wear clothes that cover arms and legs, and spray rooms with pyrethrum-containing flying insect sprays.

Take appropriate dietary precautions.

Boil water for 10 minutes; for drinking, brushing your teeth, or even cleaning your contact lens. Avoid ice, and use fresh straws and disposable cups if possible. Eat only well cooked food & avoid salads uncooked vegetables, and food sold by street vendors.

Protect yourself from accidental injury.

In some areas motor vehicle accidents are the leading cause of medical problems among tourists. Avoid riding motorcycles and always wear a helmet. Avoid traveling in crowded buses, trucks and taxis, request rental cars with seat belts, and bring infant car seats.

Assemble a traveler medical kit.

A traveler medical kit should include:

- Tweezers.
- Needle.
- Pocket knife.
- Scissors.
- Flashlight.
- Band aids.
- Sterile 4x4 pads.
- Adhesive tape.
- Povidone-iodine solution for skin disinfection.
- Antibiotic ointment.
- Pain or fever medication (aspirin, acetaminophen, ibuprofen).
- Antifungal cream.

- Cortisone cream and antihistamine tablets.
- Insect repellents and insecticides.
- Water purification tablets.
- Sunblock.
- Medications for diarrhea, dehydration, and altitude and motion sickness.

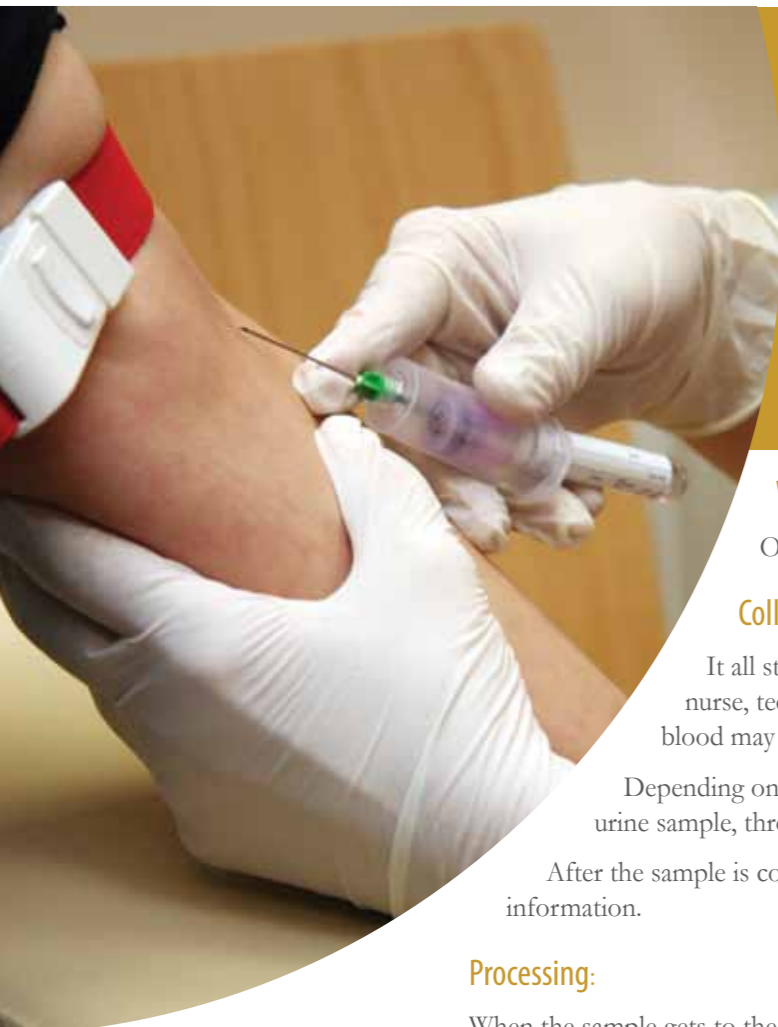
Appropriate response to illness after returning home

Some Diseases may not manifest themselves immediately after you return. Make certain you see your physician when you come back.

**You are now set to go,
travel safe and enjoy
your vacation!**



15 Behind the Scenes: What Happens to my Sample? Understanding Your Laboratory Tests



“We’re going to run some tests on you.”

Have you ever wondered what your doctor means by that? When you provide blood, urine, or other body substances, these samples are sent to the medical laboratory, where the technical and professional staff process the sample, test it and report the results to your physician.

What Happens to Your Sample?

Once collected, your sample goes through 5 different stages...

Collection:

It all starts with the collection of proper blood or other specimen. A nurse, technician, or phlebotomist will draw your blood. Several tubes of blood may need to be drawn for different types of tests.

Depending on what illness you might have, your doctor may want to obtain a urine sample, throat swab, or other sample.

After the sample is collected, the container is labeled with your name and other information.

Processing:

When the sample gets to the laboratory, it is logged into the hospital computer. In some cases, the liquid portion of blood is separated from the cells to prepare it for testing. It is then given to the laboratory staff who will perform the testing.

Testing:

- **Chemistry**

In the Chemistry section of the lab, blood and other body fluids are tested for chemicals, drugs and substances that indicate disease. Examples of chemistry tests include cholesterol and other tests for risk of heart disease, glucose to monitor diabetes, and thyroxin to monitor the thyroid gland.

- **Hematology**

The Hematology section of the lab analyzes the amount and function of blood cells and plasma. Examples of Hematology tests include the Complete Blood Count (CBC) that tells the doctor how many cells of each type are in your blood, and the prothrombin time (PT), to monitor patients on the drug Coumadin.

- **Microbiology**

The Microbiology section of the lab tests patients for infections caused by bacteria, fungi or parasites. Many types of specimens -- including blood, urine, sputum, stool and others are tested. An example of a Microbiology test is a urine culture for urinary tract infections.

Reporting:

After the tests are done, results are reviewed and entered into the hospital computer system. For results that indicate the patient may be very ill, the laboratory calls the doctor with the results.



Dr. Chandrashekar
Consultant Histopathology
and Clinical Director
of Laboratory

Depending on how long it takes to carry out a particular test, the length of time between the drawing of the blood and when your provider gets the results can vary greatly, from as little as a few minutes to as much as several weeks. Most laboratory testing is done here, but some specialized testing is sent to other labs in London or France which are experts in particular tests.

Using the Results:

Once the information is reported, your doctor will interpret them based his or her knowledge of you. The test results may help to rule out or diagnose a disease, or to do the best possible job of managing a known disease. You should ask your doctor to explain your lab results to you, so you can participate in maintaining your health.



16 Meet our Staff



Olfat Younis Abdel Azeem

OR Head Nurse

What do you do?

I am mainly responsible of coordinating the operation room (OR) nursing staff locations & monitoring supplies and equipment in the OR whenever there is a surgery.

What do you like about your job?

I love my job because it gives me a chance to witness unique and exceptional things that I could never see outside of the OR.

What is your favourite book?

I read medical books.

What is your favourite movie?

I like historical movies; such as “The Victorious Salah Al Din Al AyoubI” & “Omar Al Mukhtar”

What is your hobby/hobbies?

Walking & travelling.

Mini George

Assistant Head Nurse, NICU

What do you do?

I provide patient care to babies and newborns.

What do you like about your job?

I have been working in the same field for 21 years & the most part I like is relieving the parents by telling them good news about their baby.

What is your favourite book?

Books related to my field.

What is your favourite movie?

English movies specially horror ones.

What is your hobby/hobbies?

Stamp collection.



Marina Roldan

Senior Staff ER Nurse

What do you do?

I provide general medical nursing responsibilities for emergency room patients.

What do you like about your job?

When I finish my shift with satisfied patients who says “thank you” and I feel that I have fulfilled my duty.

What is your favourite book?

Informative books about technology and Internet.

What is your favourite movie?

Comedy and Romantic movies interest me.

What is your hobby/hobbies?

Watching movies and, of course, shopping.



17 Patient Testimonials

My wife and I have been married for over 10 years and it didn't take us long to know that we won't be able to have a baby. Throughout those years, we visited many doctors and even thought about seeking medical expertise out of Kuwait. We were hopeless when we came to see Dr. Nahed who was strongly recommended for us to an extent that made us curious.

Dr. Nahed explained the case and I specifically remember the day the doctor ran some tests and told us that there is a 50% chance of getting pregnant and having a baby...and I felt hope again.

He encouraged us to regain our faith that we can actually have a child by his simple and comprehensible explanation of the procedure and his amazingly cooperative staff who constantly followed up and made us feel amongst family.

When I was initially directed to New Mowasat Hospital, and to Dr. Nahed Hammadih particularly, as #1 in Kuwait in the IVF field; I was very hesitant as I have already seen too many others specialized physicians before. However, my previous experience with other doctors was not so good; I never felt the caring and cooperation I felt with Dr. Nahed.

In my very first visits to his clinic, I was very surprised that he himself came out to the waiting area and called my name when it was my turn.

From the first visit, he has been one of the most optimistic and compassionate doctors I have ever seen in my life. After few months, I got pregnant and he was always assuring me by explaining everything in detail without being bored or tired; even though his clinics is one of the busiest I have been to.

One of the most important things for a pregnant woman is a doctor who is willing to listen, explain and reassure and this is Dr. Nahed's method with all his patients.

Despite the negative background some people gave me about pregnancy and delivery, I enjoyed both and I believe it was Dr. Hammadih's supportive nature and positive energy that made it happen.



I had a root canal done several years ago and I had the build-up but I never had the crown. The whole build-up fell out one day and so I came in to New Mowasat and saw Dr. Danijal after examination. In a quick check, Dr. Danijal looked at my tooth and brought me in , explained everything to me very thoroughly, gave me his best opinion of what I should have done and what I could do and I think he simply saved my tooth and relieved me from my pain.

I am very happy and satisfied because nothing can beat the medical quality and this hospital maybe the best I've been to. I would say New Mowasat hospital is simply one of the cleanest, most efficient and most professional hospitals; it reminds me of the United States hospitals.

Patrick Harvey



18 Welcome on Board

Pediatrics and Neonatology Clinic



Dr. Eisa Abdul Razaq
Specialist Neonatology

Kuwaiti Board in Pediatrics.
MRCPCH (UK)
IBCLC International Board Certified Lactation Consultant.

Fellowships/Memberships:

International Board of Lactation Consultant.
Kuwait Association of International Lactation Consultant.

Ext.: 2328 | erazaq@newmowasat.com

Family Medicine and Wellness Center



Dr. Khalil Shahin

Clinical Director of ER, Family Medicine and Wellness Center
American Board Certified in Family Medicine
with concentration on Emergency Medicine.

Fellowships/Memberships:

AAFP (American Academy of Family Physician)
AMA (American Medical Association)
AHA (American Heart Association)
CME (Harvard University Continuing Medical Education).

Ext.: 2120 | kshahin@newmowasat.com

THIRD Digestive Endoscopy Symposium

October 6-7, 2012

Al-Hashemi II Hall, Radisson blu Hotel, Salwa, Kuwait



GUEST FACULTY

Simon LO	(Los Angeles, USA)
Miguel MUÑOZ-NAVAS	(Pamplona, Spain)
Thierry PONCHON	(Lyon, France)
Hakan SENTURK	(Istanbul, Turkey)
Joseph SUNG	(Hong Kong, China)
Hironori YAMAMOTO	(Tochigi, Japan)

For Further Information

Dr. Mahmoud M. OMAR, Symposium Director

Tel.: 00965 97150602 - e-mail: mmmommar@hotmail.com

CME 12 Credits (Category 1)



مستشفى المواساة الجديد
NEW MOWASAT HOSPITAL



مستشفى المواساة الجديد ينظم المؤتمر الدولي الثالث لمناظير الجهاز الهضمي

في الكويت

ينظم مستشفى المواساة الجديد المؤتمر الدولي الثالث لمناظير الجهاز الهضمي في دولة الكويت، والذي يعقد يومى السبت الموافق 6 والأحد الموافق 7 أكتوبر 2012 في فندق راديسون بلو "قاعة الهاشمي".

ويدير الندوة الدكتور محمود عمر - رئيس قسم الأمراض الباطنية في مستشفى المواساة الجديد، بالإضافة إلى كل من الدكتور جوزيف سنج من الصين و الدكتور سيمون لو من الولايات المتحدة الأمريكية. كما سيشارك الاستاذ الدكتور ثيري بونشو من فرنسا ليتحدث عن اورام القولون، و أيضاً الاستاذ الدكتور هيرونوري ياماموتو من اليابان والذي سيتناول موضوع منظار الأمعاء الدقيقة و الدكتور ميچول نافاز من اسبانيا ليناقدش فحص القولون بالكبسولة كما سيشارك في برنامج المؤتمر الدكتور موسى خورشيد من الكويت ليكون موضوع محاضراته عن العلاج الجراحي لمرض كرون.

هذا المؤتمر الدولي والذي سيجتمع العديد من أطباء الجهاز الهضمي والجراحين وأطباء الباطنية وأطباء الأطفال والممارسين العاميين وأطباء الأسرة والمرضات من مختلف أقطاب العالم، وذلك في دولة الكويت وتحت سقف سيتيح الفرصة للالتقاء وتوسيع وجهات نظر المجتمع الطبي وذلك عبر الاستفادة من تبادل الخبرات والمواهب والإنجازات من خلال المشاركة في المحاضرات وعروض الفيديو ومعالجة الحالات بأحدث التقنيات بالمنظار، والتي أقرتها الجمعية الأوروبية والجمعية الأمريكية لمناظير الجهاز الهضمي.

من جانبه وجه الدكتور محمد عمر عناية الأفراد المهتمين والراغبين في المشاركة في المؤتمر بأنه يمكنهم التسجيل عبر الإنترنت على موقع مستشفى المواساة الجديد أو بالتواجد الشخصي في مستشفى المواساة الجديد قبل 30 سبتمبر، أو عن طريق فندق راديسون بلو قاعة الهاشمي في تمام الساعة 8 صباح يوم السبت 6 أكتوبر 2012.

New Mowasat Hospital to host the third

Digestive Endoscopy Symposium

in Kuwait

On October 6-7 2012, New Mowasat Hospital will host the third Digestive Endoscopy Symposium in the State of Kuwait. The Symposium is directed by Dr Mahmoud Omar, Chairman of Internal Medicine Department at New Mowasat Hospital and Dr. Simon Lo, professor of Gastroenterology in Los Angeles, USA and Dr. Joseph Sung, Professor of Gastroenterology in Hong Kong. The symposium will include lectures, postgraduate coursework and interactive discussions. The guest faculty list includes Professor Thierry Ponchon from France to discuss the Diagnosis and characterization of small, flat and depressed colorectal Neoplasmas, Dr. Hironori Yamamoto from Japan to present an argument about the endotherapy of small bowel complications of Crohn's disease, Dr. Mousa Khoursheed from Kuwait to elaborate on fistulizing and stenosing Crohn's disease and its surgical option, and Dr. Miguel Munoz-Navas from Spain whose lecture will focus on the colon capsule endoscopy.

This event, which is organized for gastroenterologists, surgeons, internists, pediatricians, general practitioners, family practitioners, nurses and biomedical will bring participants are together to share insight on, compare, discuss and participate in lectures and video case presentations addressing the latest endoscopic techniques, methods for effective endoscopic management of digestive diseases and how to best evaluate multidisciplinary plans of digestive diseases management.

According to Dr. Mahmoud Omar, being endorsed by the American Society for Gastrointestinal Endoscopy and the European Society of Gastrointestinal Endoscopy; the Symposium will broaden the perspectives of the medical community by building on the experiences, talents and accomplishments of physicians in the medical field.

Interested individuals wishing to take part in the symposium can register online through new mowasat hospital's website, in the hospital before September 30th, or onsite at the Radisson blu Hotel at 8:00 a.m on October 6, 2012.