HMC opens first phase of new surgical specialty center

Surgical bed capacity increases, 285 new beds expected for patients

Health Check Team
Doha

Work is underway by Hamad Medical Corporation’s (HMC) Department of Surgery to establish a specialized surgery centre for patients undergoing surgery in the Women’s Hospital building.

The first phase of the three-phase relocation process has already begun with the general and craino maxillofacial surgery patients being moved to the facility. After completion of the relocation process, 285 new beds are expected to be made available for surgical patients.

The new specialised surgical facility is expected to lead to an increase in the number of surgeries performed, reducing wait times and increasing access to specialised surgical care.

Last month, 86 patients from the Department of Surgery’s inpatient unit at Hamad General Hospital were transferred to the 5th and 6th floors of the Women’s Hospital. Remaining patients at the inpatient unit will be transferred to the new Surgical Specialty Center after completion of renovations of the facility.

Dr Mohamed El Akkad, Vice Chair of Surgery at HMC, said completion of the first phase of the new Surgical Specialty Center was the culmination of many months of planning and preparation on the part of clinical and administrative staff.

“The transfer of these first patients to our new facility was completed after many months of planning and preparation. We met regularly for approximately three months and discussed all possible scenarios. Our ultimate goal was to ensure the safe and comfortable transfer of patients to the new unit.

“The second and third phases of the opening of the new Specialized Surgery Center will involve the transfer of outpatient clinics and operating rooms and is expected to be completed by mid and late 2019 respectively. The final phase of the transition will be completed by 2020 and will involve the completion of renovation and maintenance work on the ground floor, the remainder of the hospital floors, and the exterior of the building,” said Dr El Akkad.

Continued on page 4
Two years after welcoming its first outpatients, Hamad Medical Corporation’s Qatar Rehabilitation Institute (QRI) has cared for over 80,000 patients at its various clinics. The specialist rehabilitation hospital provides cutting-edge services to children and adults in need of rehabilitative care due to conditions caused by injury, disease, illness, and ageing.

“We provide high-quality compassionate care to patients who have suffered a stroke, traumatic brain injury, spinal cord injury, as well as those with a variety of conditions that cause physical pain. Our operations span five rehabilitative programs and have been very successful,” said Dr Wafa al Yazeedi, Chairperson of Rehabilitation at QRI.

According to Dr Al Yazeedi, QRI provides general rehabilitation services comprising inpatient care, day care, outpatient and pediatric clinics, speech therapy, occupational therapy, and physical therapy, as well as community-based rehabilitation.

The first of its kind in the region, the specialist facility has over 150 staff, including physicians, nurses, and occupational, physical, pediatric, and speech therapists. They all hold advanced certification in diverse clinical specialties, ranging from orthopedics to geriatrics. The facility has seven hydrotherapy pools, eleven advanced gyms, a specialist sensory room, and an assisted living unit in which patients can relearn daily tasks and readjust to life at home.

Dr Al Yazeedi said in 2018 a number of new services were launched at the QRI, including assistive technology services (sponsored by the Qatar Assistive Technology Center-MADA) and a supervised gymnasium.

“Assistive technology is helping our patients to improve their communication and functional skills through the use of specialised technologies, while the supervised gym has helped to empower them to be more independent and confident through exercising, which is recommended as follow-up therapy after they have completed their outpatient services and are ready for discharge,” she said.

Dr Al Yazeedi says physical exercise is important for patients after they are discharged from rehabilitative care in order to ensure continued improvement of their condition and early detection of any signs of deterioration that could cause complications.

According to her, there are plans for the addition of a number of new services in the coming year, including an expansion of the existing stroke rehabilitation program, the commissioning of new services for pediatric patients, and the launching of Easy Street, a rehabilitation program which helps patients practice the skills they need for independent living.

“At QRI, we are working in line with the provision of the National Health Strategy 2018-2022 to ensure health and well-being for people with special needs or disabilities by giving them access to high-quality care. The NHS 2 recognizes that disability is a public health challenge and people with disabilities face barriers in accessing health and related services, such as rehabilitation. We have helped all our patients overcome these barriers as our existing programs and services are easily accessible by patients and are made up of clinical and therapy services which are selected and adapted according to each patient’s needs by our interdisciplinary team of clinicians and therapists,” noted Dr Al Yazeedi.

“We hope to continue this trend with our new services and ensure our clinicians and therapists work together to develop a personalised program of care for each of our patients according to their individual rehabilitation requirements,” she added.
Al Wakra Hospital’s emergency depts treat over 30,000 patients a month

Al Wakra Hospital’s emergency depts treat over 30,000 patients a month

Al Wakra Hospital was established to serve the rapidly growing communities of Al Wakra, Mesaieed, and the South Doha Airport area. As one of Hamad’s largest facilities, the hospital is spread over more than 300,000 square meters of land. With over 325 beds, including 234 general and acute patient beds and more than 90 critical care beds for high-dependency and burns patients, the hospital also has 77 observation and daycare beds

Opened in 2012, Al Wakra Hospital was established to serve the rapidly growing communities of Al Wakra, Mesaieed, and the South Doha Airport area. As one of Hamad’s largest facilities, the hospital is spread over more than 300,000 square meters of land. With over 325 beds, including 234 general and acute patient beds and more than 90 critical care beds for high-dependency and burns patients, the hospital also has 77 observation and daycare beds.

Al Wakra Hospital was established to serve the rapidly growing communities of Al Wakra, Mesaieed, and the South Doha Airport area. As one of Hamad’s largest facilities, the hospital is spread over more than 300,000 square meters of land. With over 325 beds, including 234 general and acute patient beds and more than 90 critical care beds for high-dependency and burns patients, the hospital also has 77 observation and daycare beds.

With a combined staff of 2,351, including 288 doctors working across a variety of medical specialties, we provide a full range of diagnostic and treatment services for outpatients and inpatients, including day care patients of all ages,” stated Dr. Alkadhi.

He noted that Al Wakra Hospital is continuing to add to the services offered to patients as part of ongoing efforts to increase access to care for those living in Al Wakra and the surrounding community. He said that recent additions include the National Burns Center, a robotic surgery service for general surgery and urology, and a country-wide collaborative service with dentistry, diabetes, mental health, and cardiology. Al Wakra Hospital has also become a Center of Excellence for Hernia Surgery.

“We are continuing to expand the services we provide to patients. This year we introduced a play therapy service to support pediatric patients throughout their inpatient care and to help them manage their pain. We have also opened a new Admissions and Discharge Lounge to improve patient care and experience. The Admissions and Discharge Lounge is a comfortable space that has streamlined the admission and discharge processes and helps patients return home more quickly,” said Dr. Alkadhi.

According to Dr. Alkadhi, a number of new services introduced this year has helped reduce wait times and improved access to elective care services. He explained that approximately 20,000 patients are received each month in the hospital’s various outpatient departments, noting that up to 3,500 patients are treated each month by the Rehabilitation Department, which has a hydrotherapy pool and dedicated facilities for male, female, and pediatric patients.

Opened in 2012, Al Wakra Hospital was established to serve the rapidly growing communities of Al Wakra, Mesaieed, and the South Doha Airport area. As one of Hamad’s largest facilities, the hospital is spread over more than 300,000 square meters of land. With over 325 beds, including 234 general and acute patient beds and more than 90 critical care beds for high-dependency and burns patients, the hospital also has 77 observation and daycare beds.

Dr. Omar Al Qahtani, Deputy Medical Director of Al Wakra Hospital, noted that the hospital’s expanded clinics have increased capacity to care for patients. He said the main Outpatient Department features 48 consultation rooms with over 400 clinics held each week. He also noted that future expansion plans include the commissioning of a new CT scan, which is expected to be operational early in the New Year.

“We are planning to establish a Center of Excellence for Stone Treatment and are continuing work on the expansion of our inpatient and outpatient rehabilitation services. There are also plans to establish a Blood Donation Center here in Al Wakra so that those wishing to donate blood can do so right here in the community, without having to travel to Doha,” said Dr. Al Qahtani.
HMC opens first phase of new surgical specialty center

Continued from page 1

Dr El Akkad noted that there are also plans to establish a special unit for the rapid assessment of surgical patients as part of the emergency care service. He said this new unit will reduce unnecessary admissions and improve the acute care surgical service. The unit will have the latest equipment and will be staffed by clinical teams trained in the rapid assessment and treatment of a variety of conditions that require surgical intervention, he added.

Dr Moustafa Khalil, Senior Consultant and Head of the Cranio-Maxillofacial Surgery Department, said the establishment of the new Surgical Specialty Center will significantly increase the capacity of the department to provide care to patients who require head and neck surgery. In addition to increasing the number of beds available to patients and reducing wait times, he underlined that the new facility will streamline how care is provided to patients.

This repurposed space will provide a dedicated centre for the rapid assessment, treatment, and admission of emergency patients, as well as patients who will undergo planned surgery. This new facility will improve our ability to care for patients, increasing inpatient beds, reducing wait times, and providing a ‘one-stop shop’ approach to care by co-locating a number of key services and ultimately improving clinical outcomes and patient experience,” said Dr Khalil.

In recent years, centres for specialised surgery have become increasingly popular, with the United States-based Mayo Clinic and New York Presbyterian Hospital and Canada-based Toronto General Hospital having established centres that are now recognised internationally.

Khalil said HMC is aiming to have its orthopedic division of Hamad Medical Corporation’s (HMC) Outpatient Physiotherapy Department receive more than 100,000 and 120,000 patients during 2017 and 2018, respectively.

The Physiotherapy Department, which provides treatments to individuals with mobility challenges, impairments and disabilities, aged 14 to 70 years, saw more than 12,000 new patients at its Outpatient Physiotherapy Clinics in 2017 and over 15,000 in 2018.

“Providing postoperative and post-traumatic physiotherapy management, the department offers specialised care to individuals with orthopedic, neurological, and spine disorders, with many patients who use the service recovering from surgery or trauma.

Physiotherapy is a form of physical therapy that uses exercise and equipment and helps allow people to restore or improve their body’s functioning abilities. It is a specialty that treats injuries, diseases and disorders through physical movement. The specialty uses exercise, manual therapy and physical maneuvering versus medication and surgery,” said Noora Essa al Mudehka, Chief Physiotherapist and Head of the Physiotherapy Department.

According to Mudehka, physiotherapy and physical therapy are used to treat different parts of the body for a variety of reasons. She said staff provides a comprehensive range of physiotherapy services and notes that physiotherapy has become an essential part of the rehabilitation process for patients recovering from an accident or illness.

“Physiotherapy can be used to treat injuries, whether they are from sports, day-to-day activities, work-related, or resulting from an automobile accident such as breaks, sprains, and back and neck pain. Physiotherapy is also used in the treatment of more serious medical conditions, such as arthritis, muscular dystrophy, neurological disorders, and heart and stroke rehabilitation,” Mudehka added.

She said HMC’s orthopedic physical therapy specialists are highly trained health professionals who provide high-quality treatment.

“Our aim is to improve a person’s quality of life by using a variety of treatments to alleviate pain and restore function or, in the case of permanent injury or disease, to lessen the effects of any dysfunction,” according to Mudehka.

She said physiotherapy has been effectively used to successfully treat patients with a number of conditions, including chronic obstructive pulmonary disease (COPD), carpal tunnel syndrome, rotator cuff tears, and sports-related injuries. She said physiotherapy can also be effective for treating neurological conditions such as stroke, spinal cord injuries, Parkinson’s disease, multiple sclerosis, vestibular dysfunction, and traumatic brain injuries. Patients with burns, and who have wounds and diabetic ulcers, can also benefit from physiotherapy and physical therapy.

HMC’s Physiotherapy Department operates across multiple sites, providing care to patients at all HMC facilities. The ultimate goal of physiotherapy is to help patients regain maximum self-sufficiency and function.

Rising number of patients at HMC’s Outpatient Physiotherapy Dept in 2018

The Physiotherapy Department, which provides treatments to individuals with mobility challenges, impairments, and disabilities, aged from 14 to 70 years, saw more than 12,000 new patients at its Outpatient Physiotherapy Clinics in 2017 and over 15,000 in 2018.

HE orthopedic division of Hamad Medical Corporation’s (HMC) Outpatient Physiotherapy Department received more than 100,000 and 120,000 patients during 2017 and 2018, respectively.

The Physiotherapy Department, which provides treatments to individuals with mobility challenges, impairments and disabilities, aged 14 to 70 years, saw more than 12,000 new patients at its Outpatient Physiotherapy Clinics in 2017 and over 15,000 in 2018.

Providing postoperative and post-traumatic physiotherapy management, the department offers specialised care to individuals with orthopedic, neurological, and spine disorders, with many patients who use the service recovering from surgery or trauma.

Physiotherapy is a form of physical therapy that uses exercise and equipment and helps allow people to restore or improve their body's functioning abilities. It is a specialty that treats injuries, diseases and disorders through physical movement. The specialty uses exercise, manual therapy and physical maneuvering versus medication and surgery,” said Noora Essa al Mudehka, Chief Physiotherapist and Head of the Physiotherapy Department.

According to Mudehka, physiotherapy and physical therapy are used to treat different parts of the body for a variety of reasons. She said staff provides a comprehensive range of physiotherapy services and notes that physiotherapy has become an essential part of the rehabilitation process for patients recovering from an accident or illness.

Physiotherapy can be used to treat injuries, whether they are from sports, day-to-day activities, work-related, or resulting from an automobile accident such as breaks, sprains, and back and neck pain. Physiotherapy is also used in the treatment of more serious medical conditions, such as arthritis, muscular dystrophy, neurological disorders, and heart and stroke rehabilitation,” Mudehka added.

She said HMC’s orthopedic physical therapy specialists are highly trained health professionals who provide high-quality treatment.

“Our aim is to improve a person’s quality of life by using a variety of treatments to alleviate pain and restore function or, in the case of permanent injury or disease, to lessen the effects of any dysfunction,” according to Mudehka.

She said physiotherapy has been effectively used to successfully treat patients with a number of conditions, including chronic obstructive pulmonary disease (COPD), carpal tunnel syndrome, rotator cuff tears, and sports-related injuries. She said physiotherapy can also be effective for treating neurological conditions such as stroke, spinal cord injuries, Parkinson’s disease, multiple sclerosis, vestibular dysfunction, and traumatic brain injuries. Patients with burns, and who have wounds and diabetic ulcers, can also benefit from physiotherapy and physical therapy.

HMC’s Physiotherapy Department operates across multiple sites, providing care to patients at all HMC facilities. The ultimate goal of physiotherapy is to help patients regain maximum self-sufficiency and function.
MoPH warns against tobacco use to curb smoking related diseases

In a statement, the Ministry said there is no safe use of tobacco or exposure to second hand smoke, adding that irrespective of their age or years of smoking, those who quit have substantial gains in life expectancy and health compared with those who continue to use tobacco.

Worldwide, one person dies every six seconds due to tobacco use and in Qatar, lung cancer is one of the five most common cancers, the statement read.

Dr Kholood al Mutawa, manager of Health Promotion and Non-Communicable Diseases at MoPH, said: “The campaign is designed to serve as a reminder about the dangers of cigarettes, shisha and other tobacco use. We are urging everyone to protect themselves, their children and families by staying away from tobacco. By providing our citizens with accurate information, we are empowering them to make positive personal decisions about their health.”

Shisha smoking has similar health risks as cigarette smoking as it contains several toxic agents known to cause lung, throat, bladder and oral cancers. Even after it has passed through water, the smoke from a shisha has high levels of these toxic agents and is not filtered. Because of the way a shisha is used, smokers absorb more of the toxic substances than cigarette smokers do. In addition, second hand smoke from shisha can also be a major health risk for non-smokers exposed to it.

Hamad Medical Corporation’s Tobacco Control Center is a WHO Collaborating service designed to assist in cessation through clinically guided programmes. Tobacco users can book an appointment at any of HMC’s tobacco cessation services by calling 16060. People seeking to quit can also access Primary Health Care Corporation’s services by calling 107.

HMC welcomes international consultants

AMAL Medical Corporation (HMC) has received a number of international consultants from various medical specialties in January.

It is part of HMC’s focus on hosting highly-respected physicians and surgeons from around the world.

The consultants who visited HMC were Dr. Patrik Velander, Consultant Plastic Surgeon at Skåne University Hospital in Lund, Sweden, Dr. Alessandro Repici, a gastroenterology specialist from Italy and Dr. Antonio Torres, Professor of Surgery at the Complutense University of Madrid and Chief of the General, Digestive and Thoracic Surgery Service at the Clínico San Carlos Hospital in Spain.

The institution also welcomed Robert Turcotte, Chair of Surgical Oncology at McGill University Health Centre Canada and Dr. Noriko Suzuki, a Consultant Gastroenterologist from St. Mark’s Hospital in, Harrow, England, UK.

While from February 17 and 21, Dr. Gideon Hirschfield, Senior Lecturer and Consultant Hepatologist with the University Hospitals Birmingham, Birmingham, UK, and a specialist in the field of gastroenterology, including autoimmune liver disease, are also expected to visit HMC.

Hosting visiting international consultants who are experts in their field is in line with HMC’s commitment to providing specialised medical services to the people of Qatar. Other experts are scheduled to visit this year.
Pulmonology & chest Department

Diagnosis and treating the following:

- Disease of the upper and lower airways.
- All types of infectious, inflammatory and malignant lung diseases.
- Pulmonary manifestation of other systemic diseases.
- Vaccination antiviral and antibacterial.
- Diagnosis and treatment of allergy and Bronchial asthma.
- Pulmonary vascular disorders.
- Diagnostic and therapeutic procedures.
- Full Pulmonary Function Tests.
- Fully equipped Sleep Laboratory.
- Smoking cessation specialty.
- Early diagnosis of lung trauma.
- Bronchoscopy and lung biopsies.
- Diagnosis and treatment of Pulmonary embolism.
Al Ahli Hospital performs complicated coronary stenting

Dr Abdurrazzak Gehani, Consultant Interventional Cardiologist, and Chairman of Al Ahli Heart Center

The procedure is normally conducted with open heart bypass surgery

Al Ahli Hospital team has successfully performed a complicated Coronary Artery Catheterization and Stenting on a 67-years old man without the need for open heart surgery, said Dr Abdurrazzak Gehani, Consultant Interventional Cardiologist, and Chairman of Al Ahli Heart Center, who led the team during this critical procedure.

He added, "The man's life was saved from dangerous narrowing in the 3 coronary arteries, in addition to a severe obstruction in the major coronary artery, which is called the left main coronary artery and which supplies blood to more than two thirds of the heart. This is a very critical coronary artery as it is usually treated by open heart surgery due to the sensitivity of stenting the major coronary artery, especially when associated with narrowing in other main coronary artery branches. Based on many studies, it is well-known that blockage of the major coronary artery may cause sudden death in many cases.

"Placing stents in most coronary arteries is now considered a routine catheterization, which is effective and safe to a large extent. However, stenting the major coronary artery needs care and extreme precision, especially if there is narrowing in other arteries as well," said Dr. Gehani. The strategy was to phase, in stages, the stenting procedures for the major and the other coronary arteries.

He also added that to treat this patient by open heart surgery, at least three bypass grafts were needed to be placed to enable the blood to by-pass the narrowing in the major coronary artery. Some of the grafts can be taken from the inside of the chest, but the rest from the leg veins. However, the patient requested and insisted not to have open heart surgery, therefore the only option was to place multiple stents without opening the chest, using cardiac catheterization instead. It was decided to go ahead with coronary stenting despite the high risk of such catheterization.

Full details of the risk of placing multiple stents, including in the major coronary artery was explained to the patient before the operation. The patient and his family were told that in case any problem arises while deploying the stent in the major coronary artery, the patient will be moved immediately and urgently to the operating theatre for immediate open-heart surgery. Therefore, the open-heart operation theatre was prepared and the surgery and cardiac anesthesia staff were in a state of high alert and preparedness.

The coronary stenting of the major coronary artery was a complete success and without complications. Dr. Gehani added that "we used a special advanced imaging technique to make sure the stent is fully expanded and placed at exact place. This technique is called Intra-Vascular Ultrasound (IVUS) which allows visualisation from inside the artery and through the layers of the coronary artery. The images were very satisfactory showing full expansion of the stents and free flow of blood from the major artery to its branches without any remaining obstruction (see pictures). The patient was discharged within two days and was seen in the clinic after one week, one month, 3 months and 6 months, and he is doing extremely well. He is due for one year follow-up soon.

Dr Abdurrazzak Gehani, Consultant Interventional Cardiologist, and Chairman of Al Ahli Heart Center
It’s important for people to remember that they don’t have a clear view when driving in fog. Fog makes it difficult to judge the distance between cars and a driver’s ability to anticipate dangers is limited.

HE Hamad Injury Prevention Program (HIPP) at Hamad Medical Corporation’s (HMC) Hamad Trauma Center is warning drivers to take extra safety precautions during foggy weather conditions and low visibility.

According to Dr Rafael Consunji, Director of the HIPP, the community outreach arm of HMC’s Hamad Trauma Center, fog hampers visibility and can lead to road accidents and fatalities. He stressed that fog is one of the most dangerous weather conditions that drivers face and warned that the practice of many drivers of switching on their hazard lights to counter the dense fog can be very dangerous.

“It’s important for people to remember that they don’t have a clear view when driving in fog. Fog makes it difficult to judge the distance between cars and a driver’s ability to anticipate dangers is limited. It’s very important for drivers to keep a safe distance, to use their headlights on low beam, or fog lights, and to avoid using hazard warning lights unless they have completely stopped or are driving extremely slowly (less than 20 kilometres per hour). If you use your hazard lights unnecessarily, you cannot signal your intent to turn or change lane and you increase the risk of another vehicle colliding with yours,” Dr Consunji said.

“Hazard warning lights flash in unison to warn other drivers that a vehicle is a temporary obstruction. They should only be used to warn other road users when a vehicle is a temporary hazard, for example, when driving very slowly, when a vehicle has broken down on the side of the road, a tire is being changed, or the vehicle is being towed,” the expert added.

Fog is most common in the early morning hours and normally disappears after the sun has risen. Road users are advised to take appropriate measures as dense fog can decrease a driver’s visibility to almost zero and is one of the most dangerous weather conditions that drivers face. Commuters are also reminded to be extra aware of their surroundings and more conscious of other road users, especially in areas undergoing construction as this can result in unexpected changes to road layouts and traffic flow.

According to Dr Consunji, drivers should not drive if weather conditions prevent them from clearly seeing the road and their surroundings. However, if individuals absolutely must drive during low visibility conditions, the following safety tips are recommended:

- Ensure all adult passengers are correctly wearing their seat belts and all children are using age-appropriate car seats.
- Before driving during foggy conditions, ensure you know how to correctly use your fog lights. Your vehicle’s instruction manual will provide detailed information on how to do this. Before starting your engine, turn on your fog lights and keep them on until the fog has cleared.
- Drivers are advised to ensure their own safety and the safety of other by taking appropriate measures during low visibility or foggy weather conditions.

Before starting your engine, turn on your fog lights and keep them on until the fog has cleared.

Hazard lights can be dangerous when driving in fog: HMC safety expert

Drivers are advised to ensure their own safety and the safety of other by taking appropriate measures during low visibility or foggy weather conditions.

- Use your radio to listen to important notifications from the traffic department but keep the volume low so that you can still clearly hear noises outside your vehicle.
- Reduce your speed if visibility worsens. Expect to drive as slowly as 10 to 20 kilometers per hour and allow extra time to reach your destination. Before leaving, inform schools or your workplace that you may be arriving late.
- Don’t get too close to the car in front of you. Leave enough space between your vehicle and the car in front so you have time to react should the driver abruptly stop.
- In extremely dense fog where visibility is near zero, slow down, signal your intent to turn using your indicator and pull slowly off the road to a safe location. Once parked in a safe location, turn on your hazard lights. If there is no safe location (such as a parking lot or driveway), pull your vehicle off to the side of the road as far as possible. Once you come to a stop, turn off all lights except your hazard lights and put on the handbrake. Do not exit the vehicle unless there is a clear path to a safer location; low visibility conditions are as dangerous for pedestrians as they are for motorists.
- If you are a pedestrian or cyclist, wear reflective or high-visibility clothing during foggy weather conditions. Wearing high-visibility clothing, such as reflective vests or bright colors, or attaching a light to your bicycle, will allow drivers to notice you in low-visibility conditions.
Unsafe ATV use & carbon monoxide poisoning major risks for campers

Dr Hamid Ghareeb, a Consultant at HMC’s Medical Administration Department and Medical Supervisor of the Sealine Clinic, is raising awareness of the facility which officially opened for the ninth year in October

WITH the camping season now well underway, Hamad Medical Corporation (HMC) has advised the public on how to protect themselves from the most common camping-related illnesses and injuries, many of which are treated by the HMC-run Sealine Medical Clinic located in the south of Qatar near Mesaieed City.

Dr Hamid Ghareeb, a Consultant at HMC’s Medical Administration Department and Medical Supervisor of the Sealine Clinic, is raising awareness of the facility which officially opened for the ninth year in October. The clinic is open from 3pm each Thursday until 5pm on Saturday and will remain open until mid-April, which means that medical care, specifically emergency medical services, is available during the busy camping season.

“In addition to being open each weekend, the clinic also provides services during public holidays. We care for patients with both minor health concerns, as well as emergency cases. The clinic is equipped with a helicopter landing area to transfer patients who have urgent medical needs or severe injuries to hospital. We treat patients with a variety of complaints and ailments that range from fever, abdominal pain, diarrhea, and cough, as well as more severe conditions including treatment of wounds and burns, intestinal infections, asthma, bone fractures, and heart attacks,” said Dr Ghareeb.

He stressed that it is important for campers to take proactive steps to prevent accidents, noting the importance of not burning coal or firewood, or using gas-powered generators or portable gas camp stoves in enclosed spaces, including inside campers and tents. He said barbecues, gas cookers, and heaters can give off carbon monoxide and are a leading cause of carbon-monoxide related poisoning.

“Carbon monoxide poisoning is so dangerous because the signs and symptoms can be easy to miss. Many people with mild carbon monoxide poisoning think they have food poisoning or the flu and dismiss the symptoms. Symptoms of carbon monoxide can include headaches, dizziness, disorientation, nausea, and fatigue. Some individuals may also experience chest pain, especially those with coronary heart disease. Symptoms can start to appear within five to 20 minutes of exposure,” Dr Ghareeb added.

He urged campers to only use approved heating devices, which according to him can be easily identified as they include an approval number or mark. He also recommends having a separate area for cooking, with a minimum distance of five meters between a tent or camper and fire pit as well as outdoor fireplaces or fire pits must be at least 60 centimetres deep. He said campers should use fire retardant tents and ensure they have a fire extinguisher, fire blanket, and a basic first-aid kit that includes antiseptics, disinfectants and burn care supplies available.

Similarly, other officials from HMC have reminded the public about the risks of unsafe ATV use, noting that in December and January there is traditionally an increase in the number of patients injured while riding ATVs.

According to Saleh al Mejareh al Marri, Operations Manager for HMC’s Ambulance Service, many of the victims of ATV accidents are children under the age of 18. He said all ATV drivers, and passengers, should be fully clothed, wearing goggles, gloves, and boots, and using a helmet every time they operate an ATV.

He also mentioned that during the camping season, in addition to its regular round-the-clock emergency coverage in the Sealine area, the Ambulance Service has added two ambulances and two 4x4 emergency vehicles which will be permanently stationed in the area.

He said there are 11 ambulances stationed in the Sealine area during peak times and noted that the Ambulance Service is ready to transport emergency cases from the sand dune area to the clinic or the helicopter landing area, as required.
The study, led by a team from the Dartmouth College in New Hampshire, US, showed that high-sugar cereals are heavily promoted during programmes aired for children on TV. Kids who were exposed to such TV ads were more likely to subsequently eat the brands of cereals they had seen advertised, the researchers said.

**High-sugar cereal ads influence kids, up obesity and cancer risk**

CHILDREN’S exposure to TV ads about high-sugar cereals influences their food intake, which increases their health risks for obesity as well as cancers, warns a research.

The study, led by a team from the Dartmouth College in New Hampshire, US, showed that high-sugar cereals are heavily promoted during programmes aired for children on TV. Kids who were exposed to such TV ads were more likely to subsequently eat the brands of cereals they had seen advertised, the researchers said.

Children’s eating habits develop during the preschool years, and children who are overweight by the age of 5 are likely to remain overweight into adolescence and adulthood.

The adoption of poor eating habits—diets of low quality, too few fruits and vegetables and too much sugar, salt and fat can lead to obesity, a known risk factor for 13 cancers, they noted. “One factor believed to contribute to children’s poor quality diets is the marketing of nutritionally-poor foods directly to children,” said Jennifer Emond, from the Dartmouth-Hitchcock Medical Centre.

“Brands specifically target children in their advertising knowing that children will ask their parents for those products.”

For the study, published in the American Journal of Preventative Medicine, the team included preschool-age children to see how exposure to TV ads for high-sugar cereals influences kids’ subsequent intake of those advertised cereals. Emond’s team purchased an advertising database and actually counted, by brand, the cereal ads that aired on the children’s TV network programmes each child watched. Parents were asked about the shows their kids watched and what cereals their kids ate in the past week, every eight weeks, for one year.

Efforts to promote and support quality diets at a young age are important to foster the lifestyle behaviours needed to maintain a healthy weight and reduce the risk of chronic disease including many cancers.

“There are policy-level actions that could be implemented to reduce children’s exposure to food marketing and to improve the quality of the foods marketed to kids. And we as parents have the choice to switch to ad-free TV for our children and for ourselves,” Emond noted.
HE expanded diabetes clinic at Hamad Medical Corporation’s (HMC) Women’s Wellness and Research Center (WWRC) cares for between 1,500 and 1,700 pregnant women each month. According to Dr Mohamed Bashir, Endocrine Consultant at HMC, over 18,000 women who have been diagnosed with a thyroid condition, endocrine disorder, or diabetes prior to, or during, their pregnancy are treated at the clinic each year. He added that the clinic now serves as the third National Diabetes Center at HMC. The National Diabetes Center at Hamad General Hospital was opened in 2013 and receives about 2,000 adult and 700 pediatric patients each month. The National Diabetes Center at Al Wakra Hospital opened a year later, in 2014, and receives approximately 400 patient visits each month. Offering a multidisciplinary approach to patient care, the National Diabetes Centers provide patients with improved access to specialised treatment, delivering a range of services from initial screening through to treatment, health education, and the provision of medication and equipment.

The WWRC’s diabetes clinic located on Level 1 of its Outpatient Department, is dedicated solely to caring for pregnant women at risk of, or living with, diabetes. Over 20 staff comprised of endocrinologists, podiatrists, dietitians, education specialists, physicians, nurses, pharmacists and technicians, all work together to improve diabetes management and prevention in pregnant women. “Since we relocated to the Women’s Wellness and Research Center, we have seen an increase in the number of women requesting our services. On average, each year we receive up to 18,000 pregnant women who have been diagnosed with a thyroid condition, endocrine disorder, and/or diabetes, prior to, or during, pregnancy,” Dr Bashir said.

He underlined that the clinic has seen a significant increase in the number of patients received each month since it first opened in 2014. Initially located at Women’s Hospital, the clinic cared for around 600 patients each month when it became first operational.

“We are glad to have moved to this new space at the WWRC, which is almost double the size of our old clinic. We now have the capacity to attend to more patients as our number of clinics has increased. Our physicians now conduct 10 clinics weekly, while our educators and dietitians hold 20 clinics each per week,” he added.

According to Dr Bashir, there are three main types of diabetes: type 1, type 2, and gestational diabetes. He further detailed that gestational diabetes is first seen in a pregnant woman who did not have diabetes before she was pregnant. He says if not controlled, the condition can place a woman and her baby at risk of serious health complications.

“Diabetes can cause problems during pregnancy for both the woman and her developing baby. Poor control of diabetes during pregnancy increases the chance of birth defects and other problems such as congenital deficits, loss of pregnancy, high blood pressure, or complications during delivery, including premature birth, fetal death, large babies, and cesarean section. Additionally, children who are born to mothers with diabetes are at high risk of developing obesity and type 2 diabetes later in life,” he said. Dr Bashir stated that gestational diabetes can be controlled through healthy eating and regular exercise. However, he notes that diet and exercise are not sufficient to control the condition in all women as blood sugar levels depend on the individual.

“The importance of controlling diet in pregnancy cannot be over-emphasized, which is why the role of our dietitians and diabetes educators is so vital to the service we offer our patients,” said Dr Bashir.

He added that for most women with gestational diabetes, the condition goes away soon after delivery. He said when it does not go away, the condition is reclassified as type 2 diabetes and the affected woman is advised to commence diabetes treatment immediately. “Our mission at the WWRC National Diabetes Center is to help women achieve successful pregnancies by providing them with the right education to self-manage their condition. While some women with gestational diabetes may need medication, the role of controlling their diet, maintaining a healthy weight, and managing their blood pressure and blood sugar levels is extremely important,” said Dr Bashir.
SMOKING IN CLOSED PUBLIC SPACES IS PUNISHABLE BY LAW

According to Article 17 of Law No. 10 of 2016 on the control of tobacco and its derivatives:

Without prejudice to any more severe penalty stipulated in any other law, a penalty of not less than one thousand (1000) Riyals, not exceeding three thousand (3000) Riyals shall be imposed on anyone who smokes cigarettes or tobacco or its derivatives, or permits smoking, in closed public places where smoking is prohibited.

VIOLATION HOTLINE 50302001
GHCC@MOPH.GOV.QA
moph.gov.qa