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All What You Need to Know about the Zika Virus



Abstracted by
Nabil M Kronfol MD, DrPH

The Zika virus is a mosquito-transmitted infection related to dengue, yellow fever and West Nile virus. Although it was discovered in the Zika forest in Uganda in 1947 and is common in Africa and Asia, it did not begin spreading widely in the Western Hemisphere until last May, when an outbreak occurred in Brazil. It is a tropical infection new to the Western Hemisphere.

For most people, the infection causes no symptoms and leads to no lasting harm. Scientific concern is focused on women who become infected while pregnant and those who develop a temporary form of paralysis after exposure to the Zika virus.

Zika is spread by mosquitoes of the Aedes genus that usually bite during the day. The aggressive yellow fever mosquito, *Aedes aegypti*, has spread most Zika cases.

Experts believe that the vast majority of all Zika infections are transmitted by mosquitoes, not sex. Based on these reports, the C.D.C. issued tentative new guidelines suggesting that pregnant women avoid contact with semen from men who have recently returned from areas with Zika transmission. British health authorities have suggested using condoms for at least 28 days.

The possibility that the Zika virus causes microcephaly – unusually small heads and damaged brains – emerged only in October, when doctors in northern Brazil noticed a surge in babies with the condition. It may be that other

factors, such as simultaneous infection with other viruses, are contributing to the rise; investigators may even find that Zika virus is not the main cause, although right now circumstantial evidence suggests that it is.

Babies with microcephaly have unusually small heads. In roughly 15 percent of cases, a small head is just a small head, and there is no effect on the infant. But in the remainder of cases, the infant's brain may not have developed properly during pregnancy or may have stopped growing in the first years of life. These children may experience a range of problems, like developmental delays, intellectual deficits or hearing loss. Genetic abnormalities are a common cause. Microcephaly can also be triggered by infections of the fetus, including German measles (also known as rubella), toxoplasmosis (a disease caused by a parasite found in undercooked contaminated meat and cat feces) and cytomegalovirus.

Zika is often a silent infection, and hard to diagnose. Until recently, Zika was not considered a major threat because its symptoms are relatively mild. Only one of five people infected with the virus develop symptoms, which can include fever, rash, joint pain and red eyes. Those infected usually do not have to be hospitalized. Health authorities in Brazil have also reported an unusual increase in Guillain-



Barré syndrome. The US Centers for Disease Control and Prevention (CDC) is currently working with public health officials in the country to investigate whether there is any link between Zika infection and the rare neurological disorder.

There is no vaccine against the Zika virus. Efforts to make one have just begun, and creating and testing a vaccine normally takes years and costs hundreds of millions of dollars.

Because it is impossible to completely prevent mosquito bites, the C.D.C. has advised pregnant women to avoid going to regions where Zika is being transmitted, and has advised women thinking of becoming pregnant to consult doctors before going.

Travelers to these countries are advised to avoid or minimize mosquito bites by staying in screened or air-conditioned rooms or sleeping under mosquito nets, wearing insect repellent at all times and wearing long pants, long sleeves, shoes and hats.

The World Health Organization voiced concern on February 3rd over the reported sexual transmission of the Zika virus in Texas. Sexual transmission could add a new dimension to the threat Zika poses.

The WHO declared a global health emergency citing a “strongly suspected” causal relationship between Zika infection in pregnancy and microcephaly.

The potential role of scheduled international mass gatherings in 2016 could exacerbate the spread of Zika virus beyond the Americas. In Brazil, the Rio Carnival on Feb 5–10 attracts more than 500,000 visitors, and on Aug 5–21 more than 1 million visitors are expected to go to the summer Olympics followed by Paralympic Games on Sep 7–18. Meanwhile, Saudi Arabia expects to host more than 7 million pilgrims from over 180 countries for the Umrah, between June and September, and the Hajj pilgrimage on Sept 8–13. Saudi Arabia receives about 7,000 pilgrims from Latin America annually. Although the Olympics and the Hajj are very different events, each of them might favor transmission of Zika virus.

Infos

Le Genre est Associé aux Maladies Cardiaques

Le genre, contrairement au sexe, serait associé au risque de récurrence d'événements cardiovasculaires chez l'adulte, démontre une nouvelle étude pancanadienne dirigée par une équipe de l'Institut de recherche du Centre universitaire de santé McGill.

Les différences biologiques (liées au sexe) entre les hommes et les femmes sont de plus en plus utilisées pour évaluer les symptômes, les facteurs de risque et les résultats en lien avec de nombreuses maladies.

L'étude indique que les personnes adultes qui ont un rôle ou qui présentent des traits de personnalité traditionnellement attribués aux femmes ont un risque accru de récurrence du syndrome coronarien aigu prématuré (SCA) ou d'un autre incident cardiaque dans les 12 mois suivant leur premier incident, indépendamment de leur sexe biologique, a dit l'auteure principale de l'étude, la Dre Louise Pilote.

Les chercheurs ont mené leur étude sur près de 1000 patients à travers le Canada, âgés de 18 à 55 ans, qui avaient déjà été hospitalisés pour un SCA entre les mois de janvier 2009 et d'avril 2013.

Les chercheurs ont mis au point un indice de genre de 1 à 100 points, allant d'un résultat très élevé de caractéristiques traditionnellement attribuées aux hommes (1 point) à l'autre extrême, c'est-à-dire un résultat élevé de caractéristiques traditionnellement attribuées aux femmes (100 points). Ils ont observé que les participants qui obtenaient un résultat élevé de caractéristiques traditionnellement attribuées aux femmes, indépendamment du fait qu'ils étaient biologiquement un homme ou une femme, étaient plus susceptibles d'avoir un second épisode cardiaque. Les caractéristiques traditionnellement attribuées aux femmes semblaient avoir un effet sur la santé s'expliquant par une augmentation de l'anxiété.

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