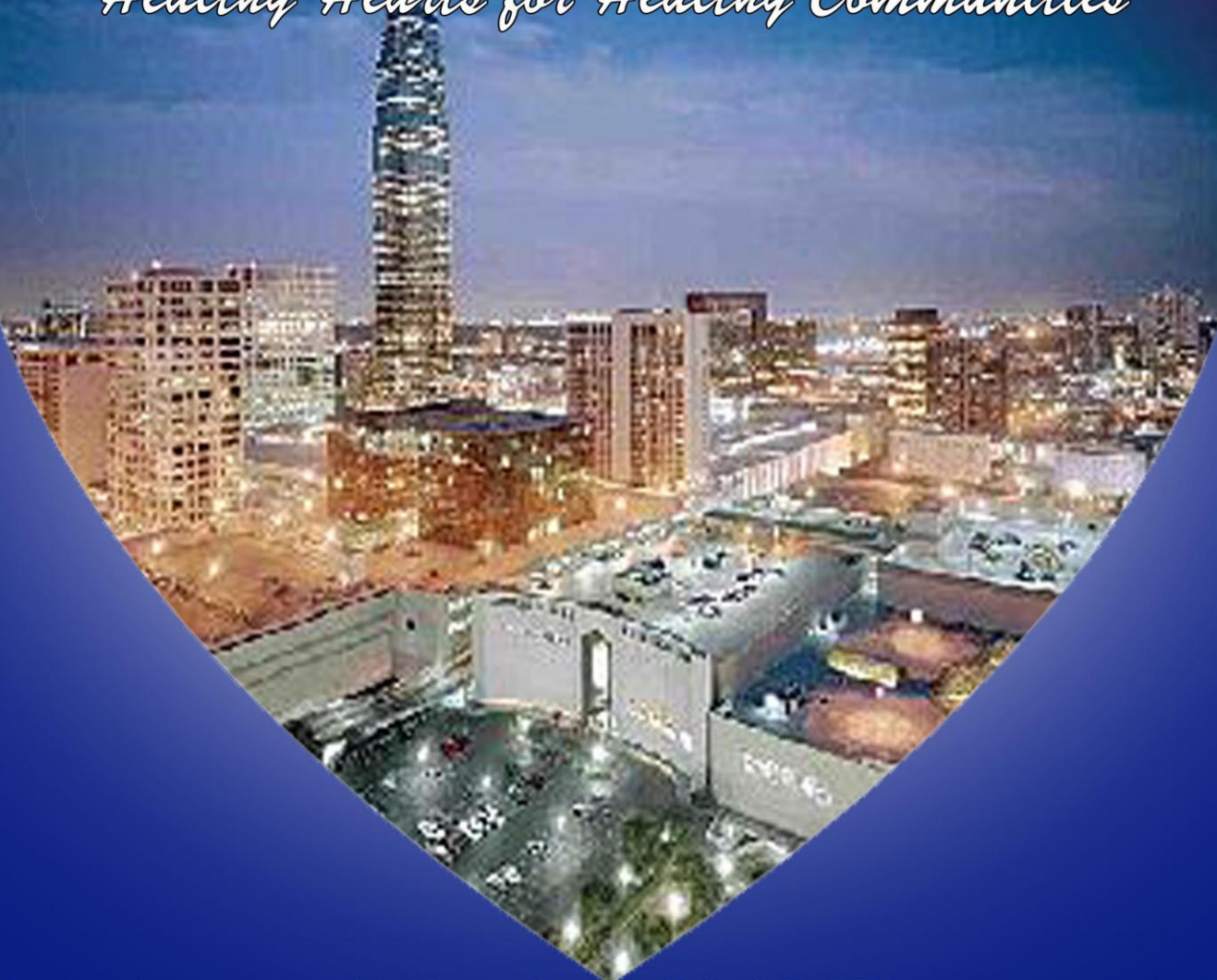




APPNA

Association of Physicians of Pakistani Descent of North America

Healthy Hearts for Healthy Communities



Fall Appna Meeting 2013 Houston, TX

**Oct 24th-Oct 27th at Westin Galleria
5060 West Alabama Houston TX-77056**



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America



view my video
on htexas.com



Dr. Shagufta Naqvi, M.D. Dr. Mohammad Riaz, M.D.

Premier Oncology
12121 Richmond Ave., Ste. 208
Houston, TX 77082
281-556-6622

19770 Kingsland Blvd, Ste. 340
Katy, TX 77094
281-647-7766

www.premieroncology.com

Dr. Shagufta Naqvi and the professionals at Premier Oncology Consultants strive to provide compassionate and high-quality medical care to each and every patient. For Dr. Naqvi, making each patient comfortable in her office, despite their sometimes serious medical conditions, is a top priority.

"My entire office is special. I want to make the chemotherapy as positive an experience as possible from a most-caring staff to a home-like chemo suite with entertainment for the patients," she says.

Dr. Naqvi also designs specific treatment plans to fit each patient's unique situation, and takes pride in the family atmosphere that she, the other doctors and staff have cultivated.

"My staff asked a few of my patients what would make someone choose us over other physicians. Overwhelmingly, the answer was 'We feel like we are part of their family.' That is quite a compliment," she says.

Dr. Naqvi attended Dow Medical School and completed an internship at Case Western University. Following medical school, she completed her residency at the University of Texas Medical Branch in Galveston. She practiced internal medicine for five years and has spent three years in private practice, dedicating herself to hematology and oncology.

She is also trained in palliative care and symptom management, which better allows her to manage patients' chemotherapy side effects and help them live a symptom-free life.



PRESIDENT'S MESSAGE



President APPNA, Javed Suleman, MD, FACC, FSCAI.

Dear Colleague:

With the Annual Fall Meeting of APPNA we are reaching towards the end of my tenure as President. I can look back and say that I did what I promised. I would like to express my gratitude to my team of volunteers who worked tirelessly in different capacities including Chairs, Co-Chairs and Members of different Committees. I thank them for their hard work and that We have been able to do so much together!

I promised to bring a CHANGE in APPNA, to make a difference. The fact is, yes we've made a difference. The way I see it, there were two great triumphs, two things that I'm proudest of. One is the policy of Transparency and Accountability which continued throughout the tenure. The other is the gaining of faith of our members in APPNA, resulting in an

increase of 500 Life Time Members.

As President, I made my goal to steer APPNA in the right direction, where mutual respect and positive attitudes prevailed, and productive outcomes are achieved consistently. With this spirit I and my team of dedicated volunteers worked hard throughout the year in all venues of APPNA, including: to increase the membership, providing un-wavering support for our young physicians and extending continued support of social, philanthropic, research and educational causes. With all the teamwork in place we have seen some of the most well attended meetings of APPNA, from the Planning Meeting in January to APPNA Mideast and APPNA Europe International trips and the Spring Meeting in New York. The Spring Meeting was historically the most widely attended meeting and generated positive revenues. Then came the Grand Summer Meeting in Orlando, and unequivocally was one of the most successful and memorable meetings with the highest ever number of participants. This Meeting was organized and conducted in a very professional manner and gave a very positive effect on all participants. Now comes the Fall Meeting, and The Fall Meeting Host Committee is putting tremendous efforts to make it a memorable one also. I thank them in advance for their untiring efforts.

The strength of an organization is in its membership. Our efforts have been to bring all potential members into the fold of APPNA and Therefore, in order to encourage membership we reduced the Membership Dues by 40%. This resulted in an increase of approx. 500 Life Time Members (from 1200's to 1700's). Under the SWDR Committee the Trauma Initiative project, which has the potential of saving thousands of lives in Pakistan, has already started in two locations and is expanding rapidly. The Advocacy Committee worked with the US State Department and has helped many medical graduates seeking J-1 waiver in expediting their security clearance. Of all the applicants who approached us, 100% were able to get their visa / security clearances on in time and started their trainings in timely fashion. APPNA Scholarship Fund has been initiated which already has the collection of \$600K as investments in the bank. The logistic and educational support of APPNA regarding fighting the epidemic of Hepatitis C has continued. Through the MERIT program we have continued live transmission of the presentations on different medical topics in Pakistan.

The theme for this year has been "Preventive Medicine" and "Heart Healthy Communities". We realize that in our efforts to support the medical infra-structure in Pakistan, the biggest bang for the buck is in "Prevention" rather than "Cure". With this thought we intend to initiate first "APPNA Institute of Public Health" with the cooperation from Jinnah Sindh Medical University in Karachi, Pakistan. From here onwards we can spread the idea of such APPNA Institutes to other major towns and cities. This effort will have a long lasting impact and will help significantly in reducing preventable morbidities & mortalities.

In the next three months, the upcoming events are: Disney Cruise to Bahamas, Day on the Hill in Washington DC, APPNA National Health Care Day, International trip to India (possibly) and the Winter Meeting in Karachi. We look forward towards your strong participation.

Lastly, let me say my friends: We promised and we did it. We weren't just marking time. We made a difference. We made APPNA stronger, more diversified, more inclusive, more professional and more transparent.

I pray that the coming years will be blessed with positivity and productive growth for APPNA!

— **Javed Suleman, MD, FACC, FSCAI.**
President APPNA



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America



ANNISE D. PARKER
MAYOR

OFFICE OF THE MAYOR CITY OF HOUSTON TEXAS

Greetings!

On behalf of the City of Houston, it is my pleasure to welcome you all. I am delighted that Houston is the host of the Association of Physicians of Pakistani Descent of North America's annual fall convention.

As home to the largest Medical Center in the world we understand the importance of ground breaking research, innovative patient care, and leading medical practices. I'd like to thank APPNA and all physicians for their continuous dedication. Your work has helped so many and increased access to high quality care.

APPNA's commitment to selfless service and charitable acts is inspiring. Your humanitarian and relief efforts have not only helped citizens here at home but also abroad. I congratulate you on over thirty five years of success and leadership for the Pakistani-American community. Your organization has been a gift to our city and it is a pleasure to have you all here.

I invite you to experience all the sights and sounds of Houston.

Again, welcome and enjoy your stay!

Sincerely,

Annise D. Parker
Mayor



POST OFFICE BOX 1562 • HOUSTON, TEXAS 77251



APPNA, ACA, Houston.

As APPNA meets in Houston, the ACA (Obamacare) is starting to be implemented. Many established physicians are worried about what comes next. That is natural. However as an organization of Pakistani descent physicians APPNA also wants to facilitate further immigration of Pakistani physicians to the US. The question of 'brain drain' from the home country is a concern but is not a reason for APPNA to discourage physicians from Pakistan to come to the US. Of the thousands of physicians presently graduating from Pakistani medical colleges every year, if a few hundred to come to the US, that should not be a major concern. From the Pakistani perspective the greater brain drain at this point is of physicians with post graduate training and experience that are going to the middle-east.

Once the ACA is well established, perhaps more than thirty million 'new' patients will get insurance and enter the pool of paying patients that will need 'formal' medical care. This will require the services of additional thousands of health care professionals, especially physicians that are just not available at this time and even if medical school enrolments in the US are increased they will not become available for many more years. This will create an acute physician shortage that can only be taken care of by increasing import of foreign physicians. Here it is important to have an historical perspective. The first and the largest wave of Pakistani origin physicians arrived in the US between 1965 and 1975.

There were three major reasons for that influx. After the Medicare Act that was passed in 1965, first this added millions of 'insured' patients requiring a large number of physicians to take care of these now 'paying' patients. Second, the Medicare Act also allowed the government to pay for internships and residency programs allowing many hospitals to start new teaching programs that were then filled by physicians imported from abroad. Third, the US was in the middle of the Vietnam War and close to a million US young men and women were serving in the armed forces including field hospitals. This took out these trained professionals from the

EDITORIAL MESSAGE

pool available to take care of patients 'state side'. Once the war was over, and the imported physician supply was already adequate, further immigration of foreign physicians was cut down to a trickle.

But it is also important to remember that even though most of the major physician organizations were opposed to the Medicare Act, this act provided an increase in physician incomes and also was the impetus of some of the major advances in medicine that produced a dramatic increase in life expectancy in the US. Today, few if any physicians still oppose Medicare and want it to disappear. The ACA a generation from now will probably be in the same category that Medicare is today.

The second and a smaller wave of medical immigration occurred in the eighties when the AIDS epidemic was at its height and since it was concentrated in many of the major cities, therefore the 'inner city' hospitals often bore the brunt of this epidemic. As such many graduates of US medical schools opted out of doing their training in these hospitals opening up the door for another albeit smaller wave of immigration of physicians. By the nineties this was also over and done with. And from the nineties onwards, the number of physicians coming into the US has decreased dramatically.

Of course, as physicians of Pakistani descent, if we do wish to have more physicians from Pakistan come to the US, the last thing we would wish for is another health care crisis like the one we faced in the US during the height of the AIDS epidemic. However the ACA offers us in APPNA a unique opportunity, not unlike the post Medicare Act environment to facilitate increased immigration of Pakistani physicians to the US. As the ACA is rolled out and the need for new physicians becomes more urgent, APPNA will be in a position to influence US policies and open up immigration of physi-

cians from Pakistan. But there is a problem that we in APPNA need to confront head on.

Many in the US today believe that Pakistan is the 'hot bed' of religious extremism and terrorism and bringing in Pakistanis will bring in potential terrorists. It is imperative that as one of the major Pakistani organizations in the US we must do whatever we can to negate that impression. I will say it again and I have said it before that many APPNA members are well established members of society in their localities. They must become active participants in local, state and national politics. As people from Pakistan our presence and contributions in political fundraisers for politicians will establish our bona fides as 'true' Americans. And at the same time put out 'markers' that we can call in when needed.

Finally, one last point worth making. When I joined the faculty of King Edward Medical College, Lahore in 2004 as a full professor, we had seven US trained professors on staff. Today there are no professors and only one associate professor with US training. Perhaps if we can bring in around five hundred Pakistani physicians every year to the US for training, it is possible that a significant number of them will return to Pakistan. That in my opinion will be a good thing for Pakistani medicine. And I hope that APPNA will find time in Houston to discuss the impact as well as the consequences of ACA on the future of Pakistani physicians coming to the US.

Syed Mansoor Hussain TI. (EDITORIAL)

(Short Bio: Dr Hussain is a graduate of KEMC, 1970. He is a Diplomat of the Boards of General and Thoracic Surgery. He is a fellow of the American Colleges of Cardiology and Surgery and served as a member of the clinical faculty of UMDNJ. He also served as Professor and Chairman of the Department of Cardiac Surgery in KEMC/KEMU from 2004 to 2011. He is the founding editor of the APPNA Journal. He is an op-ed writer for Daily Times, Pakistan and a contributor to The News on Sunday (TNS) besides being a former editor at large of Newsweek Pakistan. received a Tamgha-e-Imtiaz (TI) in 2012 for Public Service.)





Message from Shagufta Naqvi, MD



Shagufta Naqvi, MD

Dear Friends

I welcome you to Houston for APPNA fall meeting. I hope for you all to have a good time. This is very difficult time for our country and our people. We need to focus on what we are not doing right and how can we all help in our own capacity. I think we need to start from very basic. Try to be a good human being and not harm

others. Instead of fighting on basis of religion and cast we should connect to each other on broad horizon of Kindness and humanity.

If kindness didn't exist, this world would be a terrible place to live. By being kind, we make this world a better place. Differences in beliefs wouldn't be such a big deal if kindness always came first. If one can't be kind, then at least resist from causing harm.

Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around.

I hope during this visit we all will connect with each other with spark of kindness.

HOST COMMITTEE APPNA 2013



(Left to Right) First Row:- Lubna Elahi, Aliyah Ahmad, Sara Zaidi, Farida Abid, Shagufta Naqvi, Anila Gardezi, Ateka Zaki, Zeenat Safflar, Jiya Abbas, Humaira Faruqi,
Second Row (Left to Right) Syed Ali Gardezi, Shahid Hasmain, Zaki Moin, Muhammad Tariq Aziz, Kashif Khan, Arshad Umer,
Members not in Picture :- Amin Karim, Monira Kundi, Asad Abbas.



Message from Publication Chair Host Committee



DR Anila Gardezi (Publication Chair Host Committee)

I thoroughly enjoyed this journey of collaborating with my colleagues on this challenging endeavor. Asking doctors to write is like requesting our patients to schedule a colonoscopy. It's not that we doctors are not creative; in fact, sometimes we can be so creative that handwriting experts may be needed to decipher our art hidden in the form of progress notes. As a magazine chair I also had a responsibility of collecting funds. I must admit that after attempting all of this I have developed a special respect for Medicare in reimburs-

ing physicians.

Dear friends, none of us are professional writers, although a few among us think they have the talent to be Iqbal or Tolstoy and were unfortunately thrown into medicine like the rest of us. These colleagues, when asked to write an article of a few pages, produced a 20 page dissertation. My apologies to them; the space and time constraints prevented us from publishing the next War and Peace in this magazine.

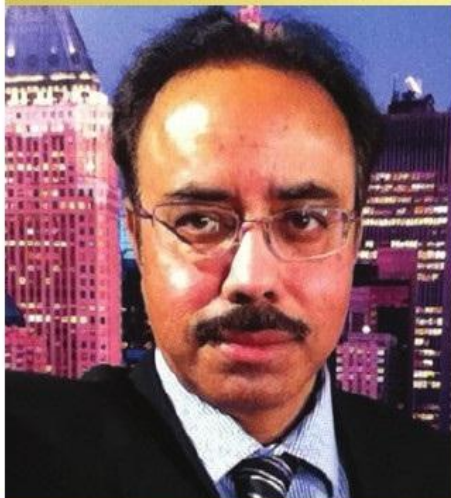
I am deeply appreciative of the sponsors for their advertisements

and especially the physicians who have advertised in support of APPNA.

Any creative effort makes you feel vulnerable to all the possible negative criticism that accompanies it. My message is to accept vulnerability because it is not the critic who changes the world, but a person who works hard with sweat and blood. One who is not afraid of failing, and instead puts himself or herself on line while daring greatly.

— DR Anila Gardezi (Publication Chair Host Committee)

Message from Publication Chair APPNA 2013



Zahid Asgher MD
Chair APPNA Publication committee 2013.

Dear Members:

Fall journal is in your hands to enjoy it, and after review send us your feedback. Publishing a

journal every quarter is a daunting task by any standards especially in a volunteer organization like APPNA. Gathering material, including articles, messages, reports, pictures and above all advertisements is equivalent to "pulling teeth" literally. Hats off to my team of very dedicated and committed members of the publication committee who worked hard to bring out a timely quality journal for the membership. It is an uphill battle to keep everyone charged up all the time to meet certain requirements in a timely fashion, however, I am fortunate to report that the local in charges for the journal publication worked hard day and night to bring us a valuable high quality product. These publications though may sound repetition and routine material but trust me years down the road when you will pick up and old journal and go over its contents it will bring back lots of beautiful memories in form of articles, pictures and other material. We are creating memories to cherish more with time.

My deepest gratitude and heartfelt thanks to the hardworking folks including Dr. Salman Zafar (Spring), Dr. Abid Rasool (Summer) and Dr.

Anila Gardezi (Fall) journal in charges. Their work was not easy and especially gathering ads which helps to publish a quality product. It is the trust of our president and other officials of APPNA that kept us going day in and day out to meet the deadlines. As you are aware this year APPNA decided to merge the various meetings publications with APPNA quarterly journal, it worked out much better for us to focus our efforts undivided.

I am confident that membership is enjoying the fruit of hard work of all the volunteers. The publication committee repeatedly invited articles, pictures, poetry and reports and tried to include in the journal each and every item sent to us, even at times much later than the deadline dates so as to provide this forum to the APPNA membership to the best possible way. Go ahead, review the fall journal, give us your feedback and constructive evaluation that may help us to enhance our next and the final journal of this year in winter to meet your expectations.

Thank you.

Zahid Asgher MD
Chair APPNA Publication committee 2013.



Message from the CME Chair



Farida Abid, MD
Chair CME Committee
APPNA Fall Meeting 2013

Dear APPNA members,

Welcome to the APPNA Fall CME 2013. I feel very honored to be included in such a prestigious program. It has never been easy to compile a CME course which perfectly suits your personal needs and interests. My main objective for the course was to come up with topics which would appeal to audiences from every specialty, and preserve their interest till the end of the course. We have astounding and knowledgeable speakers from unique and different specialties. They are to present interesting, compelling topics, which most of you come across during your practices. I hope that we offer you a full lineup of diverse, top-tier educational programs that you have come to expect. No matter what your career stage, your specialty, or your schedule the result is sure to be memorable, valuable and deeply rewarding to you, your profession, your practice and to your patients.

I would like to formally praise all the speakers for their unsung effort and for taking the time out from their busy schedule to be a part of this educational program. I want to humbly thank you all for your support.

I would also like to convey my gratitude to committee members: the chair host committee, Dr. Shagufta Naqvi, and the President APPNA Dr. Javed Suleman for their trust and support. I also want to acknowledge Dr. Rizwan Naeem and Dr. Zeenat Safdar for helping me during the whole process, from deciding the topics all the way to helping me find speakers.

Sincerely,

Farida Abid, MD
Chair CME Committee
APPNA Fall Meeting 2013



Treasurer's Message



Syed Tariq Shahab, MD, FACC

Dear APPNA members and friends:

Welcome to Houston for the Fall Meeting of 2013. I hear that the chair of the meeting-Dr Shagufta Naqvi and her team have worked very hard and are ready to host you in Houston. I am sure it will be a fun and relaxing event.

As the year is coming to an end, so is my tenure as a Treasurer and I am glad that I was able to live up to your expectations. I started the year with a visit to our central office in Chicago where I met the accountant and the rest of the office staff. We reviewed the account status from last year and laid down policy and procedures for this year. Among many steps, the decision where all transactions were to be requested by the respective committee/meeting chairs before payment was approved has been hailed as a very bold and remarkable step. This has helped immensely to

streamline the process of transparency and accountability I also flew to Dallas and met Mr Hank Bashore and Mr Ali Rahman from Stephens Inc. to go over our investment accounts. All the money that was laying idle because of their switching the companies were immediately invested. The Finance Committee met four times this year to review and manage the various financial matters of your organization. A report of last year's financial status and the current year budget were presented at the Spring Meeting in New York. And for the first time the entire report was sent to the general membership via a blast e-mail.

The good news is that the Spring Meeting and the International Meeting both left us with a positive balance. The total income for the Spring Meeting was \$243,046.22 and the total expense was \$216,538.62 leaving a profit of \$26,507.60. The total income for the first International Meeting was \$803,424.83 and the total expense for the meeting was \$742,938.86 leaving a profit of \$60,485.97. We are still waiting for the Summer Meeting and Europe overseas tour report. I am told by the office committee chair and the office administrator that the annual audit is underway and the tax returns are being finalized. We hope to present these reports at the meeting.

At the request of the Scholarship Committee, a separate account has been opened with Stephens, which will be used solely for scholarship donations. The interests from these funds will be used for various scholarships awards and the principle will remain invested. One donor has pledged to donate 1 million dollars (courtesy of Nishtar Alumni) in matching funds till the end of 2014.

In the end, the committee would like to thank all the office staff, the committee chairs, the meeting chairs, the President, and the rest of the executive council members for their understanding and patience with us throughout this year.

Truly,

S. Tariq Shahab, (Chair),
Sabir A Khan and Hasina Javaid (Co-chairs),
Abdul H Munis, Sabahat Mahmood, Tariq
Khursheed, Mohammad Yazdani, Azim
Qureshi, Ahmed Shahab and Arshad
Anwar (members).



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America

AGENDA

Friday, October 25th, 2013

Thursday, October 24th 8:00 pm till 11:30 pm complimentary Dinner and music

Time	Topic	Speakers
8:00 am	Breakfast	
9:00 am	Welcome Remarks	Farida Abid, MD
9:05 am	A Physician Guide to Bone Marrow/Stem Cell Transplantation	Sarah Ahmed, MD
9:35 am	Q & A	
9:40 am	Is an Echocardiogram Sufficient to Diagnose Pulmonary Hypertension in 2013	Zeenat Safdar, MD
10:10 am	Q & A	
10:15 am	Local Public Health Matters: Public Health's Role in Preparedness & Prevention	Umair Shah, MD, MPH
10:45 am	Q & A	
10:50 am	Coffee Break	
11:00 am	Disparities in Care of Depression in Ethnic Minorities	Aqeel Hashmi, MD
11:30 am	Q & A	
11:35 am	Acid Reflux Disease update	Waqar Qureshi, MD
12:05 pm	Q & A	
12:10 pm to 1:10 pm	Legal and Ethical Considerations in Medical Practice <i>(With Lunch)</i>	Massod Azad
1:30 pm to 2:00 pm	Jum'a Prayers	
6:30 to 7:30	Youth Talent show	
7:00 pm to 8:00 pm	Social Hour	
8:00 pm to 9:00 pm	Dinner and Speeches	
9:00 pm to 10:00 pm	Heer Ranjha Musical	
10:00 pm to 12:00 pm	Musical Program (Adil Burki) simultaneous Mushaira	

2:30 to 4:00 pm YOUNG PHYSICIAN FORUM

Panel will include:

1. **Fareed Mahmood Khan, MD**
Associate Professor & Residency Program Director
Baylor Family Medicine Residency
Department of Family and Community Medicine
3701 Kirby Drive, Suite 600
Houston, TX 77098
"The nuances of residency application, what to focus on and what not to, for success"
2. **Talha Siddiqui, MD**
"Residency updates and visa issues for foreign medical graduates"
3. **Zeenat Safdar, MD**
"Interviewing and CV improvement tips"
4. **DOGANA Residency Manual** for distribution during the YPF session.

Saturday, 26th October, 2013

8:00 am to 8:30 am Breakfast for CME participants
8:30 am to 12:00 Noon Meeting Central Council APPNA

TIME	TOPIC	SPEAKERS
12:00 pm	Lunch	
1:00 pm	Opening Remarks	Farida Abid, MD
1:35 pm	Q & A	
1:40 pm	Lipid disorder and coronary heart disease	Salim Virani, MD
2:10 pm	Q & A	
2:15 pm	Novel Intervention Therapies for Valve Disease and Refractory Hypertension	Jose Diez, MD
2:45 pm	Q & A	
2:50 pm	Coffee Break	
3:00 pm	Pre diabetes and Cardiovascular Risk, Does Ethnicity Matter?	Morali Sharma MD
3:30 pm	Q & A	
3:35 pm	An introduction into Patient Centered Medical Home. The concept and the reality	Fareed Khan, MD
4:05 pm	Q & A	
4:10 pm	Hepatobiliary imaging in the Hospital and non hospital setting	Sabir Khan, MD
4:40 pm	Q & A	

3:30 pm to 4:30 pm Social Forum

پاکستان کے نظریات کا قاتل کون

7:00 pm to 8:00 pm
Social Hour
8:00 pm to 9:00 pm
Dinner and Speeches
9:00 pm to 9:45 pm
Comedy (Saad Haroon)
10:00 pm to 12:30 am
Musical Evening (Sajjad Ali)



DR. ANWAR

and



ALIYA AHMAD

**ON BEHALF OF
EAST TEXAS CARDIOLOGY, PA
WELCOME
APPNA ATTENDEES
TO
HOUSTON, TEXAS
FOR
FALL MEETING, 2013**

**2000 CRAWFORD #1403
HOUSTON, TEXAS 77002**

**15200 S. W. FWY SUITE 310
SUGAR LAND, TEXAS 77479**



PREVENTION OF 'CORONARY HEART DISEASE



ANWAR AHMAD, MD, FACC
EAST TEXAS CARDIOLOGY,
PA, HOUSTON TEXAS

In keeping with the theme of healthy heart and preventing heart disease. I have attempted to summarize current established concepts in primary prevention of Coronary Heart Disease (CHD). Clinical CHD in the form of heart attack or acute coronary syndrome is the culmination of a process started years to decades ago. Best defense against CHD is prevention of atherosclerosis.

Several factors are well established as contributors to CHD including age, sex, hypercholesterolemia, diabetes mellitus in all its manifestations, hypertension, family history of premature coronary heart dis-

ease, smoking, elevated homocystine level, sedentary life style, obesity and metabolic syndrome. Several of these factors cannot be altered like age, sex or family history. Several others are altered with behavior modification like smoking cessation, increase in aerobic activity, weight loss. Homocystine levels can be reduced by using folic acid supplements but its clinical significance in reducing CHD events remains non-established.

Three risk factors which are pharmacologically modifiable and have shown to have altered natural course of CHD are high LDL levels, Diabetes Mellitus and hypertension.

LDL level above 100mg/dl has direct correlation with the incidence of CHD in population studies. Diabetes mellitus has even stronger correlation with CHD. Every 1% increase in Hemoglobin A1c (A1c) above 4.6% increases risk of CHD by 2.3 times in non-diabetics. In diabetic patients CHD risk increases 1.14% with every 1% increase in A1c throughout the range. Strong correlation also exists between hypertension and CHD. Every 20/10mmHg increase in blood pressure above 115/75 doubles the risk of CHD. It is also noted that for persons above 50, only systolic blood pressure correlates with incidence of CHD.

Treating all these three conditions is intertwined. It is important to perform global risk assessment. It is a scoring system derived from Framingham Heart Study. Higher the score, higher the incidence of CHD in short term (<10years). 20% or higher incidence of CHD in 10 years is considered high risk, 10-19% is moderate risk and <10% is low risk. Measurement of LDL cholesterol starting at age 20 and every 5 years thereafter is recommended. LDL cholesterol above 130mg/dl should be monitored more closely and above 160mg/dl should be treated to a level below 130mg/dl. Similarly, diabetes needs to be controlled to maintain A1c level at or below 6.5%. ACCORD trial has dampened the enthusiasm for over aggressive A1c control because of an increase in all cause mortality below these levels. Systolic blood pressure control is also related with reduced CHD. Target is below 140 mmHg for all patients and below 130 mmHg for diabetics and patients with chronic kidney disease. Thiazide diuretics are recommended as first line therapy without coexisting conditions. In presence of depressed left ventricular systolic function or DM, ACEI or ARBs should be the first line of therapy.

In summary if primary prevention is started early in life then we can significantly reduce the burden of CHD later in life.



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Discography

*Diagnostic and Therapeutic
Epidural and other
Nerve Blocks*

&

*Other Innovative Interventional
Techniques in Pain Medicine*

SHAHID RASHID MD

Trained at UT Medical School at Houston in Anesthesiology and Pain Medicine

*Certified by American Board of Anesthesiology, American Board of Pain Medicine and
American Academy of Pain Management*

KATY, TEXAS & SUGARLAND, TEXAS



Breastfeeding, traditional farming only panacea

Pakistan Medical Association's (PMA's) Health Report 2013 makes the sad disclosure that in the impoverished country with a population of 173 million one child dies every minute from EPI disease, diarrhea and acute respiratory infection.

This is despite the fact that Pakistan is extremely rich in human and natural resources.

Low priority to health and education has been blamed.

"The overall health situation has not changed in Pakistan in last many years. It may be claimed that more money is being spent on the health of the nation as compared to previous years but the fact is that the majority of our population has no access to primary health care, emergency obstetrical care or emergency health care throughout Pakistan... at least one-third population is living below poverty line. Even worse the under-five mortality rate remains high at 95.2/1,000 and infant mortality at an abeyance 65.1/1,000. A big proportion of our population is unable to drink clean water or enjoy the facilities of sanitation," the PMA report points out.

There was a time when emerging economies such as Korea and Malaysia learnt from Pakistan. Today, even Bangladesh has better economic and health indicators as compared to Pakistan.

It's high time to ponder what went wrong. Why a booming economy in the 1960s regressed? More important question is whither Pakistan? Doctors, engineers, lawyers, teachers and other professionals are being ruthlessly killed in the port city Karachi and other parts of the country in the name of 'religion' and forced to migrate to greener pastures such as Canada, United States, Saudi Arabia, UAE, Sultanate of Oman, Kuwait and other countries.

Massive brain drain is taking place! One can easily visualize that Pakistan is headed towards chaos. The intelligentsia lives in constant fear of being abducted for ransom, killed or maimed.

A high level delegation of Pakistan Medical Association (PMA) comprising Prof. S.Tipu Sultan, Prof. M. Idrees Adhi, Dr. Mirza Ali Azhar and Dr. S.M Qaisar Sajjad met the Inspector General (I.G) Police, Sindh on Sept 11 to discuss lawlessness, insecurity, target killing, kidnapping and extortion by criminal gangs.

The I.G was told that nobody is safe; there is no security of life and property for the common man. Extortionists and target killers are scot free. Poor people have no place to go and register their com-



SHAHID RASHID MD

plaints. The doctor's community is the worst sufferer.

PMA delegation demanded early and safe recovery of the recently kidnapped doctors from Khairpur, a city in the interior of Sindh.

In spite of miniscule allocation to health and education sectors it's amazing that large numbers of committed doctors are building operation theatres and other health care facilities in public sector hospitals through donations from philanthropists and colleagues living abroad. In the Civil Hospital, Karachi (CHK) and the Jinnah Postgraduate Medical Centre (JPMC) doctors and professors are serving the masses despite immense load. Very often they are beaten by unruly mobs; they are not paid their salaries for months but they don't succumb.

Same is the case in Lahore, Rawalpindi, Islamabad and other important urban centers of Pakistan.

Doctors at reputable private-sector hospitals such as Aga Khan University Hospital in collaboration with USAID and other donor agencies are contributing to bring solace to low-income segments of the population. For instance a Hyderabad-based NGO namely Management & Development Foundation has organized a chain of satellite clinics in Mithi, the district headquarters of serene desert

Tharparkar and in Mirpurkhas too in the interior of Sindh.

The NGO is also planning it to extend chain of satellite clinics to Mansehra in the northern part of Pakistan and the capital city Islamabad.

Ex-General Secretary PMA (Center) and a prominent gynecologist Dr. Shershah Syed and eminent neurosurgeon Dr. Rashid Jooma have even introduced robotic surgery through their endeavors.

In Karachi, Chairperson Department of Pediatrics, Dow University of Health Sciences, the prestigious public-sector hospital, Prof. Aisha Mahnaz not only toils at her department but also tell mothers how they could ensure a balanced diet to their children when food is becoming too costly.

"Actually the persons hailing from low socio-economic areas don't have a clear concept about balanced diet. It's basically ignorance of the importance of good diet. It's the poverty of knowledge rather than the poverty itself. In fact very few people know that items such as 'kitchni' and 'dalya,' if properly cooked can be a wholesome nutritive diet for children and adults alike," Mahnaz told Pakistan's leading English daily The News International recently.

"The practice of junk eating needs to be abolished. We have done a survey among the poor and lower socio-economic population and we discovered that on an average they are spending between 50 to 150 rupees daily on items such as 'paan' 'chahlia' cigarettes and other non-nutritive stuff. With this amount of money they can purchase fruits and other food items for their children. This misplaced priority is damaging the prospect of development of healthy children and youth. The indiscriminate use of cell phone is also not only placing an economic constraint on the family but also damaging their health and well being," Mahnaz said.

"Vaccination is a child's right but breastfeeding is the best vaccine," she said.

Citing government figures, PMA's Health Report 2013 says more than 270/100,000 women die every year during pregnancy because of unavailability of emergency obstetrical care to the majority of women in Pakistan. More than 80 per cent women are delivered by traditional birth attendants-often in unhygienic and subhuman conditions all over the country. Maternal morbidity (fistula, infertility, loss of uterus, etc) is increasing because of lack of health care facilities for under privileged women in cities and rural areas.

Continued on Next Page



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America

Continued from Previous Page

"Infectious and childhood diseases are responsible for 2/3 rd of burden of disease in Pakistan. Seventy per cent of rural population in Pakistan lives within 5km of a health facility," says PMA's Health Report 2013.

At a 2-day workshop organized for journalists by Save the Children's global campaign Every One on 24-25 June 2013 in Islamabad speakers said every child - no matter where or to whom they are born - has an equal right and deserves an equal chance to survive. It is unjustifiable that children still die from pneumonia, diarrhea, measles and other conditions when the world has both the knowledge and resources to cure. In 2000, the world's leaders agreed, making a commitment to 'reduce the under-five mortality rate by two-thirds by 2015' in Millennium Development Goal 4.

Dr. Qudsia Uzma, Director Health and Nutrition at Save the Children explained the status of child and maternal health in Pakistan, particularly highlighting the importance of nutrition, health workers and immunization in meeting our commitments made to the MDGs.

While sharing some crucial statistics she said 'Malnutrition in first 1,000 days of life causes irreversible damage' and while stressing on the same issue she also mentioned, "We all know what needs to be done but now it's about generating the political will to do that. We require a repeated call to action and pressure from the media to help tackle the issue," she observed.

Maternal and child mortality is directly connected with water and sanitation. The government and non government organizations are now focusing on provision of safe drinking water, sanitation and low-cost housing for low-income groups. In this regard doctors have done a commendable job, especially in flooding that devastated Sindh, Balochistan and other parts of the country. They have built low-cost houses, laid sewerage lines and ensured basic education in health care such as hand washing to the rural poor.

In this regard HANDS led by eminent pediatrician A G Billoo besides ex-PMA general secretary Dr. Shershah Syed pooled funds from philanthropists and international non-profit donor agencies and constructed low-cost houses for flood victims. One need not say that in an environment when the government of Pakistan is facing worst kind of diktat from The World Bank and The International Monetary Fund and subsidies are

being taken away, participatory development alone can bring relief to the low-income population of Pakistan.

These non-profit organizations are also focusing on mother's education since an educated mother can ensure good health to the child.

However, it's high time that experts pay heed to the concept of organic intellectuals as enunciated by great Italian thinker Antonio Gramsci and learn from the people, instead of thrusting on them urban theories.

Education is a 2-way process and economists, sociologists, doctors and health workers need to learn how the rural population survived through thousands of years. Unlike us the rural folk focused on breastfeeding and use of medicinal plants for their survival when they were ill. Urban diseases such as hypertension, diabetes, obesity and depression, to name a few, are not so common in the rural set-up since they have learnt from their ancestors how to survive in the absence of doctors.

This great heritage spanning thousands of years needs to be preserved.

"Breast milk is a super food. In the first hours and days of her baby's life the mother produces milk called colostrums, the most potent natural immune system booster known to science. Research for this report estimates that 83,000 newborn deaths could be prevented every year if all infants were given breast milk in the first hour of life," says "Superfood For Babies" a report compiled by Save the Children EveryOne.

"In Pakistan there is only one nurse against eight doctors. The government (federal and provincial) has no understanding or plans to produce adequate number of nurses and paramedical staff. The initiative of the federal government to produce community midwives is not well thought out and the suggested one year midwifery training in the absence of trained tutors will not produce competent health workers. It will be another waste of resources like the 'dai' training program in the past. The government and donor agencies have failed to understand that a shortcut to reduce maternal death does not exist," says PMA's Health Report 2013.

While nurses produced by private-sector hospitals are migrating to Europe and Canada and Saudi Arabia where new hospitals are coming up, nurses and paramedical staff in public sector hospitals in Pakistan are lowly paid and are not being given their salaries for months. How can a surgeon or a doctor per-

form her/his duties without the assistance of nurses and paramedics?

Maddening advertising by multinational national and national companies in developing countries such as Pakistan is promoting bottle feeding instead of breastfeeding. On the top of that there are superstitions in the elite population that breastfeeding makes the woman's breast loose and ugly. This is far from truth. Woman's breasts become firm and beautiful if she breast-feed the child, according to Prof. D.S. Akram, an eminent pediatrician in Pakistan.

However, media houses continue to promote bottle feeding since their sole motive is to earn a quick buck even if that plays havoc with the child and mother's health.

In the absence of a code of ethics, TV channels in Pakistan continue to promote unhealthy practices.

It's also high time to focus on organic food instead of genetically modified organisms (GMOs). Farmers in Pakistan have been cultivating the healthy organic food through centuries and studies suggest that productivity at small farms is much more than large, cooperative farms. However, multinationals such as Monsanto are thrusting GMOs on Pakistan farmers and ruining their land. They are also vying to monopolize seed business.

Farmers organizations, civil society and scientific community need to resist neo-colonialism at a higher plane and educate small farmers that GMOs are neither pest-resistant as claimed by the MNCs nor do they require less water as compared to traditional farming.

In an exclusive interview with The News International a couple of years ago, Senior US scientist Dr Michael Hansen said genetically modified crops are not the panacea for food security.

Rather, the answer to food security lies with small-scale, ecologically rational, sustainable agriculture that focuses on local food systems, he said.

He said during the last 10 years the International Centre for Improvement of Maize and Wheat (CIMMYT) released 50 variations of either hybrid or open pollinated maize varieties. Genetically-engineered hybrid did not produce any useful drought-tolerant wheat varieties while conventional breeding produced them.

The problem of food insecurity, it seems, can be resolved through adhering to traditional system in health care i.e. breastfeeding and organics.



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How Leaders can inspire action?



Syed Ali Gardezi, MD
Internist ,Houston TX

"Leadership is influence"

— *John C. Maxwell*

Leadership has been described as a process of social influence in which one person can enlist the support of others in the accomplishment of common task.

There are two ways to influence human behavior: you can manipulate it or you can inspire it. Imagine a world where we could all learn to think, act and communicate like those who inspire. If more of us knew how to build organizations that inspire, we could live in a world where people would love going to work. Where people are more productive and more creative. Inspired people make strong companies and even stronger economies. For those people who want to change the world and create a long lasting success, a challenge must be accepted. From now on; start with WHY.

Most companies know very well the HOW and WHAT, but only the inspired few companies and people start with WHY. The inspired leader will first determine the real purpose before trying to figure out the "how" and "what." When we ask WHY, we don't mean "to make money;" that's merely a result. By "why," we're asking you what your vision is. WHY does the company exist? WHY do you get out of bed every morning? And WHY should anyone care? Finding out WHY is a process of discovery, not invention. Ironically, gaining clarity of WHY is not the hard part. It is the discipline to trust one's gut, to stay true to one's purpose, cause or belief.

All inspired leaders have two things: the vision of a world that does not exist and the ability to communicate it. The question is where the vision comes from. And therein lies the power of WHY. Our visions are the world we imagine; the tangible results of what the world would look like if we spent every day in pursuit of our WHY.

Leaders don't have all the great ideas; they provide support for those who want to contribute. Leaders achieve very little by themselves; they inspire people to come together for the good of group. Leaders never start with what needs to be done. Leaders start with WHY we need to do things. Leaders inspire action, and in doing so, they keep in mind that people don't buy what you do, they buy WHY you do it.



We became physicians!

Becoming a physician involves a detailed and rigorous process of growth through self-reflection and enduring years of highly technical and advanced education. The pronouncement to undergo this transformation can be emotional and that lends us to becoming better than we were. The selection is a life-changing verdict that can have an effect on not only you, but those that love you as well. A chain composed of a wide variety of answers are all linked together, in defining what the individual hopes is successful in making the utmost valuable impact in a multitude of humans well-being and ultimately their lives. Not many professions are so entirely encompassed in somewhat joyful, and yet difficult decisions, alongside dire circumstances on any given day of the week.

One can become a physician in light of fulfilling a much further and additional inner dedication and self-motivation. That feeling and desire, of course, being what would in turn enlighten a greater cause than just a single and solitary person and their own desires. Becoming a physician may include a definite honor that is bestowed upon the individual wishing to achieve an ever enlightening point of view and career in a world where so many "jobs" may not be enjoyable or compassionate as being a physician may result in thereafter.

When a physician is in the midst of a patient, they enacting and engaging in more than simple the textbook definition of what a physician's textbook claims they are to be. You are a partner. You are someone who cares. You are a professional both dedicated to making sure



Shahid Hasnain, MD MPH
Pediatrician, Houston, TX

that a patient's time spent within your professional atmosphere results in a more meaningful and productive conclusion. In that moment a physician can act almost like a bridge in henceforth they are metaphorically stretching from the depths of medical knowledge that may escape the common intelligence and understanding towards the very people who come to you in the event of being sick, worried, and perhaps even vulnerable. Often times we are not practicing physicians for a pay check or the title of being called a doctor. Physicians are simultaneously always embarking on a quest for knowledge and what superior quest can we find ourselves on than a quest that enables us to be of assistance to those around us throughout a

servitude enriched in commitment, the building and maintain of relationships, and cemented in empathy.

How lucky are we to be physicians rooting and growing within an industry that refuses to be defeated when perhaps another element or circumstance to a seemingly impossible problem can and will be researched, discovered, tested, and proven within the limits of existing knowledge and new and adopted knowledge of the recent successes we are making as a medical workforce and community.

In conclusion, the art and measures of performing the tasks of a lifetime in the role of a physician can be summed up in drawing attention to the very act of waking in the morning and lastly settling to bed at night with an overall sentiment of accomplishment in knowing that as a person you enclose the procedures required to transform someone's day for the better. As a physician, I would in fact be lying if I didn't state that that level of impact being a physician is able to make upon another's life and physical health is and will continue to be immensely gratifying. Betting ourselves for the very cause of bettering others is the very reason that several of us can define why we became physicians despite the fact that so many elements of the jobs leaves several impact so numerous realities within our lives. Perhaps being a physician can be defined first and foremost as nothing more than a "calling" and in taking on that definition of so few words we are in fact simply attesting to the fact that in asking any fellow physicians they will be the first to make clear that the entire experience will by no means be given justice in just one word, one phrase, or even one article. It is simply too great.



Dental APPNA



Dr. Mohammad Arshad, DDS
President, Dental APPNA

Dear Dental APPNA Family:

Assalam-o-alaikum. On behalf of our chapter, I would like to welcome all of you. As you know, our chapter was created in 2008. However, it was only recently that we began to organize it. This was only possible because our previous members worked hard to lay the foundation for our success.

For the very first time in 2012, we were able to offer Continuing Education (CE) certification at the APPNA Convention in Washington, D.C. This year we had another successful meeting, in which five CE credit hour certificates were given to members who attended. Additionally we hosted our very first Dental APPNA dinner. We were thrilled to see all of our members at this year's meeting and hope those of you who could not attend this year will be able to make it next year.

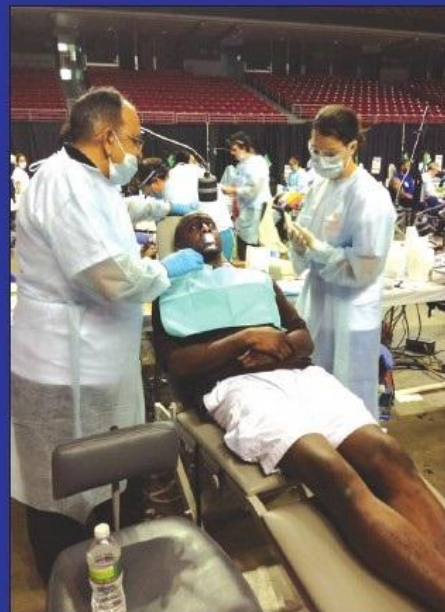
I am incredibly thankful to my executive board team who worked together to make our annual meeting successful. We are especially proud to have such accomplished dentists of Pakistani origin

as part of our organization. Some of these include our very own Dental APPNA secretary, Dr. Faisal A. Qureshy, who lectured at this year's symposium on evaluation and management of dental and maxillofacial injuries and sleep apnea. We were also pleased to have Dr. Nadeem Ahmad and Dr. Najia Usman lecture on dental implants and regenerative endodontics, respectively.

We encourage all of our members to please make plans to attend the APPNA Convention in 2014, which will be hosted in Washington, D.C. from August 13 to August 17. Dental APPNA is planning another exciting program as well as holding elections for a new executive board for the 2015-2016 term. Joining the executive board is a rewarding experience and we encourage our members who are interested to run.

We also kindly request those who are not members to join our organization as well as current members to renew their membership. APPNA currently offers lifetime memberships at a reduced fee and for those who are annual members, upgrading to this membership is a great way to stay continuously involved with our organization. As a lifetime member, you no longer have to pay annual member or registration fees. Furthermore, gaining more lifetime members enables our organization to become a permanent chapter of APPNA, allowing us to continue to provide the best programs and events for you. In order to keep our organization running, your continued membership and support are critical. We have over a dozen lifetime members and hope to gain more next year.

Lastly, and most importantly, charitable work is an important component of APPNA and Dental APPNA's mission. Over the years, members have contributed their knowledge, skills and passion to help their communities in various charitable projects in the U.S. and around the world. This year, our very own Dental APPNA participated in one of the largest free dental clinics in the U.S. President, Dr. Mohammad Arshad, and Treasurer, Aliya Khan, along with Dental APPNA members Dr. Javed Iqbal and Dr. Malik Mubarak volunteered at the Dental Missions of Mercy in Pennsylvania (MOM-n-PA) to provide free dental care to underserved communities of North Philadelphia. The event took place at Temple University's Liacouras Center from May 31



to June 1 and included services such as restorative care, endodontics, extractions, and oral hygiene. Over 1500 patients were treated with an estimated value of services of \$850,000. Dental APPNA was honored to represent the Pakistani community in such a monumental event. We hope to continue such charitable work in the future and will keep all members informed on how to participate in such events in the future. We also encourage our members to bring forth ideas for charitable work in the future.

We welcome any suggestions from our members to improve our chapter. All suggestions, comments or concerns can be addressed to the executive board at dentalappna@gmail.com or individual board members, mohammadarshaddds@msn.com (President), faq@case.edu (Secretary), aliya.khan82@gmail.com (Treasurer), lub-nalam786@gmail.com (Advisory to executive board) or afshanhaque1@gmail.com (immediate past president). We also have a Facebook page with pictures from past and current events as well as our current executive board. Please join and stay updated on future Dental APPNA events.

Sincerely,
Dr. Mohammad Arshad, DDS
President, Dental APPNA



North Texas Chapter FALL REPORT



Dr. Dawood Nasir is an Associate Professor at UTSouthwestern Medical Center in department of Anesthesiology & pain management. He is also the director of Acute Pain & regional anesthesia at Parkland Hospital. Dr. Nasir has served as President of Dallas County Anesthesia

society, he is a delegate member of Texas Society of anesthesia. He published several research papers & is the author of handbook of regional anesthesia used in curriculum at his institution.

He has conducted numerous regional anesthesia workshops & taught in board review courses to prepare candidates for written & oral board exams. Dawood has served in several APPNA committees & organized many APPNA meetings.

Chapter should consider this report as the prime opportunity to showcase the activities of North Texas chapter. Taking time to reflect on the year's events and prepare a report is important for the

health, success and growth of this chapter. By looking back on this year, we will remember things to celebrate and keep for next year, and also see areas for improvement. In addition, our report and chapter information update is very important for the records of APPNA. So please take time to read it & provide us with your opinion for the sake of improvement. Our chapter activities may be featured in our upcoming website.

This year during our annual meeting North Texas Chapter members filled up a survey form with tasks which they wanted the Executive committee to undertake. A corporate office was established to fulfill those goals.

Membership wanted APPNA North Texas chapter to have a website. As APPNA central office already has a website for component chapters, including North Texas chapter, the local chapter was linked to the central APPNA website. The second question on the survey was to have a separate 501C3 status for the chapter. As to date all the paper work has been completed, filed & temporary status of not for profit has been received pending the final decision.

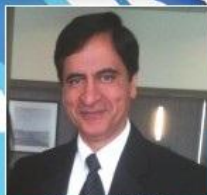
By the time this report is published six grand chapter meetings would have been concluded including annual meeting, follow up general body meeting, opening ceremony of corporate office, iftar dinner in Ramazan, eid millan & brunch at Texas General Hospital. This year due to free chapter membership our numbers for chapter have swelled to 300 physicians.

North Texas chapter also awarded two scholarships to deserving students. First scholarship was worth \$3000.00 given to a student for research work in Pakistan. Second scholarship was worth \$5000.00 given to a medical student to cover college expenses. Both scholarships were given through central APPNA but financed by members of APPNA North Texas Chapter.

We still lack in number of members for APPNA from North Texas. Although we have more than 400 physicians residing in this area but less than 20% are APPNA members. We have to be innovative & creative in attracting more physicians to become APPNA members.



APPNA Diabetes and Obesity Initiative Report



Khalid Aziz MD

I feel honored to present report on APPNA Diabetes and Obesity Initiative. This is one of the health care initiatives of APPNA,

SWDRRC, which was recently started with the goal to create awareness among public and physicians, in USA and Pakistan, to early screen and prevent this disorder. Alhamdulillah within a short period of time we were able to launch this initiative in both the countries. Our team includes Dr Khalid Aziz (Diabetologist), Dr Naveed Aziz (Internal Medicine), Dr Raheela Khawaja (Endocrinologist), Dr Maqbool Arshad (Pulmonologist) and Dr Waheed Akhtar (Cardiologist).

On March 16, 2013, we organized First International seminar on Diabetes in collaboration with Pakistan Medical association (PMA) in Lahore to educate physicians about prevention and early treatment of Diabetes. Speakers included Dr Khalid Aziz and Dr Naveed Aziz. About 150 physicians from multiple specialties including family practitioners, surgeons, pediatricians and Ob/Gyn attended this seminar. All the attendees received a hand out on prevention and treatment of Diabetes compiled by Dr Khalid Aziz. This one day seminar covered wide aspects of Diabetes including both inpatient and outpatient management of Diabetes. Physicians were very appreciative of this health care initiative of APPNA.

During this visit Dr Khalid Aziz also delivered lecture on prevention of Diabetes to 4th year medical students at Fatima Jinnah Medical College. Lecture was also delivered at Services Hospital for the staff of Nephrology and Urology departments to discuss basics of Diabetes and challenges of Diabetes care in surgical units.

We have organized two free seminars on Diabetes and Obesity for public in US. First one was held on February 23 and second one on May 11, 2013, in Fayetteville, North Carolina. Each lasted for 4 hours and was attended by about 125 people. Speakers included Dr Khalid Aziz, Dr Naveed Aziz and Dr Waheed Akhtar. Attendees received information about Basics of Diabetes, Prediabetes, Prevention of Diabetes, Life style modifications including Diet and Exercise, and complications of untreated Diabetes. They were given free glucose meters and food was also provided. People were very appreciative of this community service provided by APPNA. Most important comment expressed by one attendee was "If I had attended this seminar 5 years ago I would not have had Diabetes today."

Dr Raheela Khawaja organized screening of Diabetes in Pakistani Americans in Columbus Ohio in April 2013.

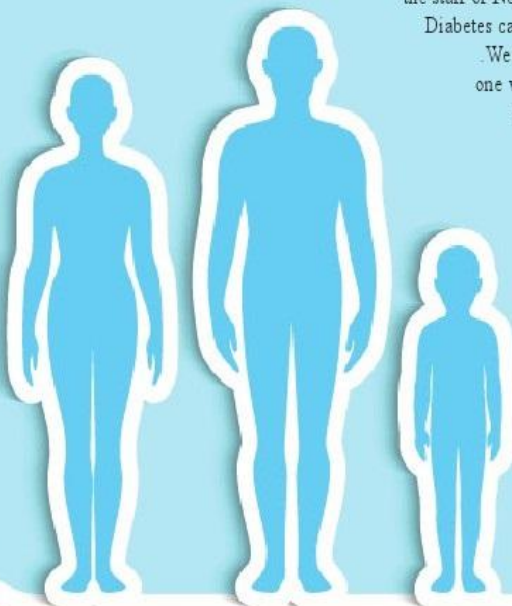
Future plans of our Initiative include organizing Diabetes education classes for public in other States of US and conduct seminars for physicians and medical students in other cities of Pakistan.

Report prepared by

Khalid Aziz MD

Chair, APPNA Diabetes and Obesity Initiative

Member, SWDR Committee of APPNA





APPNA Nomination and Election Committee Report



By: Jamil Azam Farooqui, M.D.
Chairman, Nomination and Election
Committee APPNA 2013

I am honored for being entrusted by our president, Dr. Javed Suleman for this important job.

The purpose of Nomination and Election Committee is not only to supervise and conduct free and fair elections but also to strengthen and promote the democratic culture of the organization.

As per amended-by-laws a new timeline was proposed and adopted by the N&EC after the approval of the Executive committee.

Last date for candidates to pay their membership dues 31-Mar-1

Last date of Nominations 1-Jun-13

Last date of withdrawing Nomination 17-Jun-13

Last date to become voting member for election 2013 7-Jul-13

Release of Voters list to Candidates by the MC 8-Aug-13

Candidates to submit objection on voters list, if any! 18-Aug-13

Rectify and respond to the objections on voter list 24-Aug-13

List released to candidates, approved by MC and P. Elect 30-Aug-13

List duly signed off by the candidates 8-Sep-13

Mailing of Ballots 16-Sep-13

Last date to postmark return ballots 15-Oct-13

Last date to request a duplicate ballot 07-Oct-13

Counting of Ballots 26-Oct-13

This year we had two candidates for each office and a total of six candidates are contesting the election.

Committee met several times to discuss multiple issues including the devel-

opment of new election timeline, reviewing the nominations, finalizing the slate of the candidates, communicating with the membership committee and forwarding the voters list to all candidates in timely manner, forwarding the election code of conduct to all candidates as approved by the APPNA council, working with election company to coordinate the mailing of ballots in timely fashion and reviewing the concerns and complains if any!

The committee will again meet on Saturday, October 26, 2013 in Houston to do the counting in the presence of the members of election company and the candidates or their representatives.

I would like to thank our honorable committee members for their help and assistance and also their willingness to volunteer their time for this important organizational work. I am lucky to have them as part of our team.

I would also like to thank our candidates for their cooperation and APPNA office personnel for their help during this process.

Regards

Jamil Farooqui, M.D.

Co-chairs:

Qazi Kamal Haider, M.D. and Ashraf Sabahat, M.D.

Members:

Khawaja Mujeeb Rahman, M.D.

Khalil Khatri, M.D.

Zahid Asghar, M.D.

Shagufta Siddiqui, M.D.



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America



Dear APPNA Family,

Needless to say, I am privileged and proud to be the President of this tremendous organization, whose members continue to surprise me with their remarkable potential. This year in particular has been very exciting year for us. First, I would like to extend my gratitude to my central and executive council, a distinguished group of hardworking individuals who continue to express sincere and novel ideas for the betterment of DOGANA and APPNA. I am also very thankful for our Dowites, who are constantly working hard to get involved with charitable activities and benefit the people in the US and Pakistan.

Along with the previous years, our focus remains on assisting young physicians, who are the lifeline for our organization. We are working hard to do what we can to improve their chances of getting residency training in the US. This consists of aiding with the aspects involved before and after being matched in a residency program. This includes assistance with getting interviews, coaching for interviews, helping with acquiring visas, etc. When it is possible and for our most deserving candidates, we also work on applications for financial assistance during the interview process. In addition, we continue to provide financial support for the APPNA house in Detroit. DOGANA is planning to have a winter meeting in Karachi this December and will award scholarship to deserving medical students.

This past spring, we had successful and well-attended retreat in Houston. I wouldn't be wrong in saying that it was one of the most remarkable



spring retreats ever held in DOGANA history. My gratitude goes out to the chair of the meeting, Dr. Shagufta Naqvi, and her team for working hard and doing an excellent job. We had a great summer meeting in Orlando at APPNA's summer convention. DOGANA had 600 people at the alumni night banquet, which was the most populated alumni banquet at the convention. The atmosphere of the DOGANA meeting was casual and as usual, the Dowites had a great time. The Class of '88 had their 25th year anniversary which was also very well-attended. I would like to thank and congratulate Dr. Asif Mohiyuddin for doing an admirable job in arranging this event.

We are about to hold the DOGANA elections

for 2013 and I would like to thank Dr. Talha Siddiqui, chair of the Election and nomination committee for staying on top of the whole process. For the last 2 years, we have been doing electronic elections, and we will continue with that for this year also.

I would like to conclude by thanking my DOW family and larger APPNA family for the support and would like to thank and encourage them to continue with all of the marvelous causes they are involved in. Keep up the great work and keep making us proud Pakistani Americans.

**Long Live DOW and DOGANA
Long Live Pakistan and USA.**



APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America

36th Annual APPNA Convention, 2013 3rd – 7th July, 2013 Orlando, Florida

What a memory. It still seems like a beautiful dream. A dream come true for so many of us as the summer convention of 2013 went down in APPNA history as the most organized and most attended event.

It is impossible to fit all that happened during the Convention, and the hard work of a very talented and dedicated Host Committee in 1-2 pages of the fall journal. This world-class convention was possible because of many dedicated men, women and children who came together and took upon themselves to present the best meeting ever to their loving membership.



Organization and attention to every fine detail was the reason of this success story. Beginning in September of 2012 till the start of the convention on July 3rd, every member of our Host committee rehearsed their role multiple times so everything flows flawlessly and it was evident from Registration to Bazaar, CME to Youth activities, Juma prayer to Baithak and from Alliance night to Saturday Banquet. Dinner was served every night at 8:30pm as planned. The stage presentation on Saturday night was flawless, thanks to a great stage management team. The food was of variety and quality, served timely with respect and managed by a wonderful team. I cannot thank our caterers and food vendors enough for satisfying our taste buds to the fullest.



Finance procurement and sensible utilization of resource is vital to the success of any event. We were fortunate to present innovative ideas to our sponsors through the video wall advertisement, journal advertisement, Medical and non-Medical booths allocation, lunch talks, photo booth, and multiple other venues to satisfy their needs, which benefited them tremendously. APPNA is very thankful to all of their sponsors and wish their continued support in future events.





APPNA FALL MEETING 2013

Association of Physicians of Pakistani - Descent of North America



CME had a different but upbeat flavor with inclusion of world-class speakers talking about everyday medical issues. The introduction of clinical workshops for the first time was a great success. Young Physicians had the opportunity to showcase their work through posters and research papers as well.



When the leader of an organization is hands-on and trusts his co-workers, the confidence trickles down to every member of the working committee. Dr. Javed Suleman, as the President of APPNA, showed his confidence in the Host Committee by allowing them to organize the event as they deemed it right, which resulted in one of the best meetings ever. There are hundreds of testimonial to this effect. A good leader is a reflection of a good organization.



Youth are our future. They will be taking over from us to steer the organization to the peak. Our Youth from SAYA and CAPPNA did a marvelous job by holding multiple events of their own along with being part of their ancestors' dream work.



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Regardless of what anyone says, the most compelling reason for anyone to attend the annual convention is to reconnect with his or her old friends and enhance their circle by making new friends from all corners of Pakistan. This networking for social, professional, political and philanthropic reasons surpass all other reasons combined, and will continue to do so in all our future events.

We are the ambassadors of our motherland. We are the face of our Pakistan. People in our adopted land will see what we want to show them. The

attendance of Congressmen, Chair of Foreign Relations Committee, State Senator, President of AMA, and President of FMA, is a clear indication of increasing interest of our political and professional diaspora of this great nation.



We did not hold back on entertainment either. Bringing the entertainers like Mo Sabri, Bilal Khan, Amjad Sabri, Bushra Ansari, Sunidhi Chauhan, RDB, Ali Zafar and Mahira Khan got the people excited and the attendance broke all records. More than 1400 guests attended the Alliance event. More than 2300 members attended the Alumni dinner and the attendance surpassed 3550 at the Saturday night banquet. Thank you all for being a part of this magnificent event.

In the end, I would like to thank our membership and their guests and families for their continued support of APPNA. I am whole-heartedly delighted to deliver a good meeting to our membership on behalf of our President, Executive Committee, and the esteemed membership.

Thank you all.

Iqbal Zafar Hamid, MD
Chair, 36th Annual APPNA Convention-Orlando



APPNA Scholarship Committee Report Fall 2013



M. Masood Akbar, M.D.
Chair - APPNA Scholarship Committee

Dear Friends and Colleagues,

APPNA Alumni Scholarship Project has made great strides since its inception earlier this year. Contributions have exceeded \$600,000. This is being invested in the dedicated APPNA Scholarship Account, according to the APPNA Finance Committee Guidelines. The investment is being managed by Stephens Inc., a member of New York Stock Exchange, under the close supervision of Hank Bashore and Ali Rehman who have been diligently managing APPNA Accounts for over 25 years.

I want to acknowledge the commitment and dedication of Scholarship Committee Members who have worked so hard to establish this project and raise funds, and would like to thank the APPNA Executive Committee for their wholehearted support for this noble project. Nishtar Medical College and King Edward Medical College Alumni have raised substantial funds for this important project. This entitles their contributions to be matched dollar for dollar, thus doubling their contribution towards scholarships for their respective medical colleges.

The following is a breakdown of total funds as of August 31, 2013:

Nishtar Medical College	\$150,000.00
King Edward Medical University	\$ 75,000.00
Anonymous Donor Grant	\$380,000.00
Total contributions:	\$605,000.00

I want to request all the Alumni Presidents and their teams to work diligently to raise funds for their respective medical colleges.

Respectfully Submitted,

M. Masood Akbar, M.D.
Chair - APPNA Scholarship Committee



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International Meetings Committee Report 2013



AFTAB AHMED MD FACP
Chair International Committee 2013
APPNA

About AFTAB AHMED MD FACP Chair International Committee 2013 APPNA

Dr. Ahmed is an Internist with specialization in Physical Medicine and Rehabilitation. Currently, he works as a Hospitalist in Louisville, KY. He is the founding President of the Kentucky & Indiana Chapter of APPNA. He is also the Founding Member and Past President of SMCAANA. He is a Life Time member of APPNA for over 10 years and has served as Chair, Co-Chair and Member of several committees in APPNA over the last 10 years. Currently, he is a member of the Board of Trustees of SMCAANA and APPKI (Association of Pakistani Physicians of Kentucky India).

2013 has been a wonderful year for the APPNA International Meeting Committee. In the spring we had 173 APPNA members, friends, and family join us for a memorable trip to Egypt, Jordan and Israel. In the Middle East, we took in the glorious Pyramids, the Dead Sea and Temple Mount in Jerusalem. During late summer we had 101 APPNA members, friends, and family in Eastern Europe. We stayed and enjoyed the beautiful and historic riverfront cities of Budapest, Vienna, and Prague and visited Bratislava and Dresden.

During our "downtime" we participated in CME, multiple Talent Nights, delicious cuisines, river cruises and an APPNA only flight from Cairo to Aqaba (Jordan).

Please take a look at the photographs of the aforementioned trips to get a glimpse of the fun we had.

We will continue to keep the APPNA membership entertained through the end year with a Disney Cruise to the Bahamas during Thanksgiving and a historic visit of India at the end of the year!

Aftab Ahmed, MD FACP
Chair International Meeting Committee 2013





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APPNA Alliance Report

Two thousand thirteen is the year to Think Global Act Local. APPNA Alliance started off on a positive foot to a great beginning in 2013. We had a united executive committee consisting of Fatima Elahi, Samrina Hasib, Jabeen Bokhari, and Zille Huma Zaim who all worked effortlessly together as a team for the betterment of the alliance.

The first six months of my tenure was focused on the banquet so we could sustain funding and build awareness via interactive engagement. I am pleased to see our efforts fruitful as we were able to have a sell out crowd and were able to raise funds. As a privileged community built by the merits of studious sacrifices and hard work, we continue to unite together to make headway in giving to those that have little to none. My main goal was to make sure it was a family oriented event focusing on our APPNA youth. I was very particular in my selection of speakers and their presentation topics. The focus of topics was to create awareness amongst the adult audience regarding the daily challenges our youth encounters everyday.

Wardah Sidiqui, a high school student from Las Vegas, is the chapter president of Miss Representation. This organization is trying to show how the mainstream media contributes to the under-representation of women in influential positions by circulating limited and often disparaging portrayals of women. We are hoping to bring Ms. Sidiqui back next year to network with the APPNA youth in opening chapters throughout the United States. You may inquire information regarding the organization at www.missrepresentation.com.

Mo Sabri was very honored to be the Master of Ceremonies and our audience was very amused. Mo is a son of an APPNA lifetime member who can relate to our children's daily challenges. He is a song writer, poet, and a rapper who is trying to send a peaceful message to the world by composing interfaith related

lyrics regarding tolerance of each other. He was also invited by President Obama to attend an interfaith brunch banquet at the White House with fellow global interfaith leaders. Thank you Mr. Sabri for hosting the evening and entertaining us.

For the final and keynote speaker we had Rahilla Zafar who is a global leader in business entrepreneurship. Rahilla Zafar spends her time traveling around the world and empowering women in third world countries and locally establishing entrepreneurship programs by creating the curriculum for the inner city schools alongside the Ivy League business school, Wharton School of Business at UPenn. The CEO of Urban Outfitters is bankrolling the business entrepreneurship leadership program at an inner city high school within close range of the UPenn campus.

I have committed the last year to serving the Alliance in a humble effort to produce tangible results that would harmonize our community as well as stand for betterment of the underprivileged. The second goal was to inform adults on the importance of donating your time and services within your local communities amongst the non-Muslim and the non-Pakistani society. We don't need to emphasize our religion or our ancestral background whenever we go on a mission journey. We need to be loud in our actions and be silent about our background. Once people have seen how kind-hearted we are they will inquire about your personal background in a positive manner. I have personally experienced this on multiple occasions. Our actions will shine amongst our fellow Americans and we will be remembered as a true Patriotic American who, by the way, was a Pakistani decent Muslim.

As a privileged community built by the merits of studious sacrifices and hard work, we continue to unite together to make headway in giving to those that have little to none. My third and final



Hajra Shani Kazi
President APPNA Alliance 2013

goal for the year is to implement a curriculum that will be composed and rendered by Rahilla Zafar for 5-8 year old students of inner city schools. I believe a secure foundation of a building will stand forever. If a child does not develop his/her basic learning skills within their foundation years of birth to 8 then chances of that child having a successful future are very slim. The beauty of this project is that it will be funded by your heartfelt services and precious time donated by you. We can accomplish many things without having to reach into our bank accounts. It's not about how much we give but how we deliver our services in making an impact on an individual by empowering them with knowledge, courage, and cognition to move forward with confidence and sustain their dreams.

I am very thankful to our gracious donors, AZZA Atelier and Reveti Jewelers for donating their precious items for auction in return of aggregating \$10,000.00. Special thanks to Saira Ansari for being the auctioneer. Also, to our senior and founder members Bushra Sheikh, Shahnaaz Akhtar, and Zubaida Arain for all their efforts in abstergent the past bungles and paving a smooth road for my presidency to spritz on auto drive.

Thank you from the bottom of my heart for allowing me to serve your

organization and forgive me if I have offended anybody. This journey has truly taught me to stay grounded but at the same time to full fill my passion for humanity. I still have a tremendous amount of passion to brim but at least I have begun the journey, the journey of helping thy fellow neighbor and effectuate my inner soul. Please join me in my endeavor to reaching out to the innocent young lambs of the inner city districts.

Much obliged to Maliha Shaikh for being my confidant and supporter, to all the volunteers, Fatima Elahi for being available every second in the am hours not to mention the late pm hours, and Mansoor Alam for all your help in executing the desideratum required for a successful alliance banquet.

Last but not least my children Faraaz and Farhaan who have been tolerant of my invisibility at the time of their needs. And of course Nadeem, my husband, my best friend, my life partner who would tell me to keep my mind on a positive track, order me to sleep, and made sure I was focused on my presentation. Thank you Nadeem Kazi on behalf of the alliance for being the body guard backstage when situations were becoming chaotic.

For all of you who came to me, thanked me, and showed your appreciation for the annual alliance dinner I truly appreciated your gratefulness and acknowledgement of my hard work. You the audience all made it a successful evening. For those who did not approve the event,

I would be more than willing to discuss any complaints you may have. I can be reached at 520-450-2433 or you may email me, hskazi@aol.com.

To all future APPNA Alliance leaders, I wish you all the best and truly hope that each year the annual banquet is a copious success from the previous year. In shaa Allah.

Hajra Shani Kazi
President APPNA Alliance 2013



Office Management Committee (OMC) Fall Report



Mansoor Alam, Chair, OMC 2013

The OMC for 2013 is comprised of the following members: Dr. Aftab Khan; Dr. Irfan Mirza; Dr. M. Ishaq Memon; Dr. Faiza Kareemi; Dr. M. Waseem Kagzi; Dr. Saima Sabah and Dr. Mansoor Alam, Chair, as appointed by President Javed Suleman. The OMC meets once per month at the central office or via teleconference with APPNA Administrator Jennifer Wozniak, JD, to review office matters and develop strategies to make the APPNA central office run as smoothly as possible and meet the needs of the Executive Committee and the membership.

Thus far in 2013, the OMC has continued to oversee and facilitate membership renewals, additions and voter-list creation; secured all 2013 past, current and future meetings and maintain reconciliation of the APPNA financials and continued monitoring of technology issues.

Membership / Elections:

APPNA office has processed membership renewals for 2013 as well as new memberships and upgrades to lifetime membership. Many membership renewals and lifetime membership upgrades took place on-site at summer convention and these were processed by the office. The last date to become a voting member for 2013 was July 7, 2013. APPNA office also prepared the voter list and sent this for approval. Upon all approvals, APPNA office sent the list to the candidates and the ballots for the 2014 election were mailed on September 16, 2013.

Meetings:

APPNA office has worked on the completed International meeting to Egypt/Jordan/Jerusalem and Best of Europe and Spring meeting and Summer convention. APPNA office continues to work on facilitating the International Disney Cruise, and Fall and Winter meetings. Office facilitates payments, contract reviews, meeting set-up and registration and answers all questions from the membership and meeting-committees related to the meetings. Office staff also attends most meetings to work on-site.

Financials:

APPNA office continues to work with accounting firm of Scanlan and Leo. Accountant John Strauss works with APPNA Treasurer and APPNA staff to complete the financial obligations of the state and federal government. At press time, taxes were being prepared for the extended file date of November 15, 2013 and a new audit firm CFS was contracted and has been working with APPNA staff and accountant Strauss to complete the audit of 2012 funds as required by the state with tax filing. APPNA continues to facilitate the reporting and transfer of funds received for the donated projects of 2013 and works with the social welfare and disaster relief committee (SWDR) to ensure the funds are sent properly as designated by the donors. APPNA also works with Hank Bashore and Ali Rahman of Stephens, Inc. to invest the lifetime, scholarship and Continuing Medical Education (CME) funds.

Technology:

APPNA office continues to work with Hasan Tariq and IQVIS on the database, meetings and donation portal to make a smooth process for members to renew their membership, register for meetings, make donations and claim CME credits. APPNA office also continues to send out eblasts to membership through Constant Contact so that membership has all of the latest news and information on happenings at the office, meetings and donation opportunities. APPNA office has also contracted to have a server in the office area to use as a back-up. At press time, server was being created and items were in process of being added. APPNA office continues to strive to make each application easy for membership to use and easy for the office to keep track of on a daily basis.

I would like to thank the OMC and APPNA staff for their diligent work and state that we will all continue to do our best for APPNA!

Respectfully submitted,

Mansoor Alam,
Chair, OMC 2013



BOARD OF TRUSTEES REPORT

THE BOARD HAD A MEETING ON 9/5/2013 AT 9PM. THE FOLLOWING MEMBERS WERE PRESENT: KIMAT GUL KHATAK, AFTAB NAZ, MUFIZ CHAUHAN AND ABDUL RASHID PIRACHA. THE STATE OF THE ORGANIZATION WAS DISCUSSED.

THERE HAS BEEN NO NEW EVENT/PROBLEMS SINCE OUR PREVIOUS REPORT TO THE SUMMER MEETING. THERE IS A COMPLAINT ABOUT LAST YEAR'S ELECTION WHICH IS BEING FOLLOWED UP ON BY ETHICS AND GRIEVENCE COMMITTEE.

THE AUDIT REPORTS ARE BEING WORKED ON BY CENTRAL APPNA AND THE TREASURER. THE AUDIT REPORTS OF CHAPTERS NEED TO BE PERSUED AS MUCH AS POSSIBLE. IF THERE ARE ANY PROBLEMS THAT WE CAN HELP FOR THE BETTERMENT OF APPNA FAMILY, PLEASE ASK AND WE WILL BE VERY HAPPY TO RESPOND. WE EXPECT MORE CONCENTRATION ON HEALTH AND WELFARE WORK IN USA AND HEALTH RELATED MATTERS IN HOME LAND BY APPNA.

WE WISH ALL MEMBERS OF APPNA FAMILY A HAPPY EIDUL ADHA AND THE FALL WEATHER AND FALL MEETING IN HOUSTON.

WASSALAM,

KIMAT GUL KHATAK,
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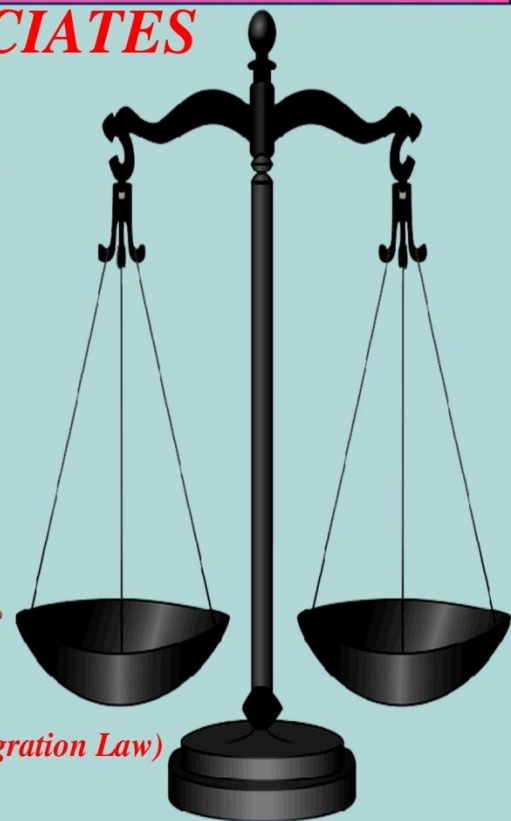
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Dear APPNA friends and members
“Thank you for your support and trust”

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“I promise I will continue to work hard and strive to live up to your expectations in the years to come. Together we can achieve greater heights.”

Syed Tariq Shahab, MD

Thank you Houston and specially the host committee including Drs. Shagufta Naqvi, Zaki Moin, Shahid Hasnain, Amin Karim, Anila Gardezi, Jiya Abbas, Humaira Farouqi, Syed Ali Gardezi, Kashif Khan, Farida Abid, Ateka Zaki, Zeenat Safdar, Assad Abbas, Monira Kundi, Arshad Umer, Aliya Anwar, Lubna Elahi, M. Tariq Aziz and Sarah Moid.

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A Vision Becoming A Reality

Dear fellow Doctors,

We all have strived and succeeded in our careers. Over the last 25-30 years of our lives, all of us worked hard and accomplished the goals we set out for ourselves. It is now time for us to sit back and reflect.

Let us reflect upon what our poor country Pakistan, has provided for us and what have we done to give our gratitude in return. In the words of former US president John F. Kennedy, "...ask not what your country can do for you; ask what you can do for your country." Abdul Sattar Edhi should be an inspiration and role model for all of us. He has championed the causes of all the under privileged people in Pakistan. Now, we as doctors originally from Pakistan and of Pakistani origins, should also strive to help take care of the sick and under privileged patients in Pakistan.

Hamara Clinic Healthcare Foundation is your opportunity. Hamara Clinic will be providing free basic healthcare to the local communities all over Pakistan. Over the years, all of us have supported various disease specific charity projects in Pakistan, including cancer and kidney hospitals. Yet such efforts, although successful, have only addressed the needs of few while missing to address the basic needs of the larger population. There is no basic healthcare infrastructure in Pakistan to take care of majority of population. For example, majority of deaths in small children and women are as result of complications of minor treatable diseases.

Hamara Clinic's vision is to setup a free healthcare system for the people of Pakistan. The foundation is to be governed and supported by



ARSHAD UMER, MD
INTERNAL MEDICINE
SUGAR LAND, TEXAS

doctors in US and UK, while the clinics will be operated by local doctors and nurses in Pakistan. The clinics will strive to reach maximum efficiencies within their operational controls by leveraging best practices and through the use of technology. Examples of technology utilization include connecting the local clinics in Pakistan and all the EMR information via a centralized IT platform available through the cloud. E-consultations for complex patients would be provided by teams of volunteer consultants in US and UK. Partnerships with Pakistan based imaging centers, laboratories and pharmaceutical companies is also tenant to Hamara's future success, many of whom have already committed their support to Hamara Clinic System. The foundation will also seek to partner with the media, sports and the entertainment industry in Pakistan, leveraging their brands to outreach and bring the message of Hamara Clinic System to the people. Some notable figures have already committed their support to Hamara Clinic System, including cricketer, Shahid Khan Afridi, and singers, Faakhir Mehmood and Tehseen Jawed. The aim is to have a prototype clinic in operational form by the end of this year.

Dear friends and colleagues, lets join together and take care of health of our country, our "Sohni Dharti" our Pakistan.



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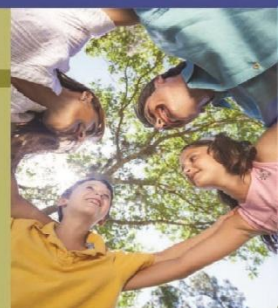
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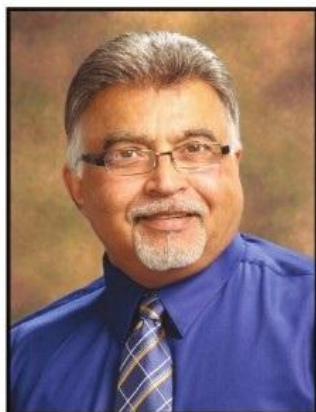
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I extend warmest wishes to the APPNA Fall Conference Committee Members and to all the Conference participants, welcoming you all to our wonderful city of Houston.

APPNA continues to provide an effective platform to collectively work for better health care services here in the United States and in Pakistan.

I wish APPNA and all its members every success in its noble endeavors.

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Dr. Asaf Qadeer

**Thank you for your whole hearted support for my
Candidacy as SECRETARY APPNA 2014.**

**Looking forward for
even strong support next year as
PRESIDENT ELECT APPNA 2015.**



Life is not fair

Written Asif Ali Zaidi MD, DMC 1989

Life is not fair,
So, is death---

Two faces of a coin,
Choose whatever you like,
It's always head or tail,
A random selection of Fate.

A game designed by Nature,
No favoritism,
No cheating,
No short cuts,
Everybody gambles,
Within one's limited choices.

Follow Nature's course,
Or one's own preference,
Of favoritism, deceit, short cuts,
Or any evil one can think of,
Giving ugly meaning to,
An unspoken truth.

Life is a straight line,
No matter what zigzag
Path you take,
It has an end,
You may not play fair in life but,
Death will.

Quicksand

Written by Farheen Azhar

He woke up to the buzz of the alarm.
The other to the rooster's call in the farm.
Walking during the bustle of Penn Station,
Feeding stable residents' their ration.

Call after email,
Plowing and a scale,
Conference calls, lunch meeting at twelve.
Stocking produce for supermarket shelves.

A cramped, stiff neck at night,
As his blistery hands far from feeling light.
A bed, a cot,
And the cycle continues.....but perhaps not?

What if one or the other just took a step outside,
Broke the pattern for a minute and looked inside
to confide.

Heard the clarity over the noise,
Taking away the numbness and fake poise.

How our everyday hurries,
Clutch us into the quicksand of worries.
Spas, country clubs, and the like would be few.
If only there was time to view the morning dew!

حمیرا رحمن

عشرت آفرین

سائیں میرے کھیتوں پر بھی رت ہریالی بھیجونا
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جو فطرتاً اداس ہوں وہ لوگ کیا کریں

تعبیر ہے کچھ اور تو خواب اور طرح کا
اس شہر پہ اترا ہے عذاب اور طرح کا
اس موسم گل میں سفرِ آغاز نہ کرنا
اب کے بے ستاروں کا حباب اور طرح کا

سوچو تو وہ خوشبو کی طرح ساتھ چلے ہے
دیکھو تو وہی خانہ خراب اور طرح کا

کیوں آپ کی آنکھیں میری آنکھوں میں بسی ہیں
کیوں آج ہوا رنگِ شراب اور طرح کا

اب شہر میں تنہائی سخن کرنے لگی ہے
آیا ہے کوئی خانہ خراب اور طرح کا

اک بات عجب سی تھی مرے نظ میں بھی لیکن
آیا ہے ادھر سے بھی جواب اور طرح کا

ہو جاتا ہے پانی میں سوا اس کا رنگ و روپ
آئینے میں رہتا ہے گلاب اور طرح کا

شاہد رشید

عطر شیشہ

ڈاکٹر شیر شاہ سید

اسے عطر شیشہ سے لایا گیا تھا۔ ایبٹ آباد سے مظفر آباد کے راستے پر مانسہرہ سے نکل کر جب پہاڑی سلسلے شروع ہوتے ہیں۔ بڑی بڑی اونچی چوٹیوں کو چھلانگتے ہوئے سرسبز وادیوں سے گزرتے ہوئے جھرنوں، ندی نالوں کے کنارے سفر کرتے ہوئے ایک چھوٹی سی جگہ عطر شیشہ کے نام سے آتی ہے۔ عطر شیشہ کے پاس کے کسی چھوٹے سے گاؤں سے ایڈھی ایمبولینس کے رضا کار اسے لے کر آئے تھے۔

اس کے گھر کا کوئی فرد نہیں بچا تھا۔ نہ باپ نہ ماں نہ بھائی نہ بھائی اور نہ ہی گھر کے نینوں بچے۔ زلزلہ سب کو اپنے ساتھ لے گیا۔ صرف وہی اس گھر کی زندہ فرد تھی۔ اسے زلزلے نے تو کوئی نقصان نہیں پہنچایا مگر زلزلے کے فوراً بعد جب وہ پوری قوت سے اپنے ہی گھر کے بلبے کی دیوار کو کوڑھی تھی تو گرتے ہوئے گھر کی ایک دیوار کا حصہ اس پر آن گرا اور اس کی دونوں ٹانگیں ٹوٹ گئی تھیں۔ مانسہرہ کے بی ڈی او ہسپتال میں وہ بستر پر پڑی ہوئی تھی۔ اور اس کا بستر گیلیا تھا۔ اور اس کے پاس سے سخت بد بو آ رہی تھی۔ میں نے ہی سب سے پہلے اسے دیکھا اس کی عمر پینتیس چھتیس سال سے زیادہ نہیں ہوگی۔ اس علاقے کے رہنے والوں ہی طرح وہ گوری چینی خوبصورت عورت تھی۔ اس کے جسم پر کوئی بہت اچھے کپڑے نہیں تھے۔ اور نہ ہی کان، گلے اور ہاتھوں میں کسی قسم کا زیور۔ وہ ایڈھی ایمبولینس کے اسٹریچر پر بیہوش پڑی دھیرے دھیرے سانس لے رہی تھی۔ ایڈھی ایمبولینس کے رضا کاروں کی گاڑی جب گاؤں پہنچی تو گاؤں کے کچے مکانوں کی دیواریں ڈھلکی ہوئی یا گری ہوئی تھیں۔ ان چھوٹے چھوٹے گھروں کے لیکن اپنے اپنے گھروں کے باہر نیکیسی اور بے بسی کی تصویر بنے ہوئے تھے۔ گاؤں کا واحد پکامکان زمین بوس تھا اور اس گھر کی واحد فنج جانے والی حمیدہ بی گھر کی ایک دیوار گرنے سے اپنے پیروں پر چل نہیں سکتی تھی۔ گاؤں والوں نے اسے دیوار کے نیچے سے اٹھا کر ایک چار پائی پر ڈال دیا تھا جہاں وہ مسلسل درد سے کرا رہی تھی۔ ایڈھی ایمبولینس میں موجود ڈاکٹروں نے حمیدہ کے دونوں پیروں کے نیچے کٹڑی کے پھٹے لگا کر، پیروں کو سیدھا کر کے پٹی سے باندھ دیا اور درد سے نجات کے لئے اسے انجکشن لگا کر مانسہرہ کے بی ڈی او ہسپتال بھیجا تھا۔ ہڈیوں کی صحیح حالت کا تو ایکس رے کے بعد ہی پتہ چلتا، فوری طور پر رضا کاروں نے اسے صاف کپڑے پہنا کر وارڈ میں ایک بستر پر لٹا دیا، وہاں ہی اس کے پیروں کے زخم کو صاف کر کے پٹی باندھ دی گئی۔ اینٹی بائیوٹک سے فوری علاج بھی شروع کر دیا گیا تھا۔ فی الحال اس کا چلنا پھرنا ممکن نہیں تھا۔ تو ایک نرس نے پیشاب کی نلکی لگا دی۔ تاکہ پیشاب کے لئے بار بار جانے کی ضرورت نہ پڑے۔

میں نے اسے پھر سے درد سے بچاؤ کا ایک اور انجکشن لگا دیا تاکہ اس کی تکلیف تو کم ہو۔ ہسپتال میں مسلسل مریض آرہے تھے۔ اوپر اور نیچے جتنے بھی بستر تھے ان پر اور زمین پر ہر طرف مریض پڑے ہوئے تھے۔ اب صرف زخموں والے مریضوں کی مرہم پٹی کی جارہی تھی۔ زیادہ زخمی مریضوں کو ایبٹ آباد اور اسلام آباد کی طرف بھیجا جا رہا تھا۔

دو ہزار پانچ کا زلزلہ بڑی تباہی لے کر آیا، پاکستان، ہندوستان کی سرحدوں کے دونوں جانب خوبصورت کشمیر کی وادی میں، زلزلے، طوفان، سیلاب، بہار، خوشبو، سردی، گرمی، ہوا، سرحدوں کا احترام نہیں کرتے۔ پاسپورٹ ویزہ اور سفری دستاویزات کا خیال نہیں رکھتے۔ جب زمین کے نیچے بہت نیچے دھرتی کے پرت آپس میں ٹکراتے ہیں تو ان کا اثر اذیتناک ہوتا ہے۔ زمین ہل جاتی ہے، پہاڑ گر جاتے ہیں۔ چٹانیں لڑھک جاتی ہیں ندی نالے، دریا راستے بدل دیتے ہیں۔ وہ زمین کے اوپر کھینچی ہوئی لکیر، کنٹرول لائن اور جھنڈوں کا خیال نہیں رکھتے۔ بالکل خوشبو کی طرح جو پاکستانی ہندوستانی نہیں ہوتی، جو ہندو مسلمان نہیں ہوتی، جو وہابی دیوبندی، بریلوی نہیں ہوتی جو شیعہ سنی نہیں ہوتی، خوشبو تو خوشبو ہی ہوتی ہے، بالکل بدبو کی طرح ہر طرف ہر سو پھیل جاتی ہے۔ ایک کی پذیرائی کی جاتی ہے دوسرے سے لوگ بھاگتے ہیں۔

دو ہزار پانچ کے زلزلے میں یہی ہوا تھا۔ سرحد کی دونوں جانب لاکھوں مکان گر گئے، پہاڑوں نے وادیوں کا نقشہ بدل دیا اور دریا یا اپنا راستہ بھول گئے۔ نہ جانے کتنے لوگ جان سے چلے گئے۔ دونوں ملک اپنے اپنے مضبوط فوجیوں، بے شمار ہتھیاروں اور ایٹم بموں کے باوجود اپنے زخمی، سسکتے بلکتے شہریوں کی امداد کو نہ پہنچ سکے ماؤں نے اپنے بچوں کو اپنے ہاتھوں میں بلکتے ہوئے سسکتے ہوئے مرتے دیکھا۔ نوزائیدہ بچے زخمی اور مرنے والی ماؤں کی چھاتیوں سے لپٹے ہوئے امداد کی راہ تکتے رہے۔ سرحدوں کی دونوں جانب سے اس قسم کی بے شمار کہانیاں سننے کو ملی تھیں۔ انسان جب انسان بن رہا تھا تو بھی اتنا ہی مجبور تھا اب بن گیا تب بھی مجبور ہے۔ میں اس جیون کے کھڑاگ کو سمجھنے سے قاصر تھا۔

دوسرے دن ایکس رے کی فلمیں آگئیں۔ حمیدہ بی بی کے دونوں پیروں میں گھٹنے سے نیچے کی دونوں ہڈیاں ٹوٹ گئی تھیں۔ ہسپتال میں کراچی اور لاہور سے ہڈیوں کے مشہور ماہر ڈاکٹر آگئے تھے۔ ان کا خیال تھا کہ اس وقت تو دونوں پیروں میں پلاسٹر لگا دیا جائے تو تھوڑے دنوں میں ہڈیاں جڑ جائیں گی۔ پلاسٹر اترنے کے بعد فزوپوتھرپائی کر کے حمیدہ بی بی پھر چلنے پھرنے کے قابل ہو سکے گی۔ پلاسٹر لگانے کی تیاری ہو رہی تھی کہ نرس نے مجھے بتایا کہ پیشاب کی نلکی کے باوجود حمیدہ بی بی کا پیشاب ہر وقت بہتا رہتا ہے، اس کا خیال تھا کہ پلاسٹر کے

بعد تو بستر پر ہی لیٹی رہے گی اور پیشاب رس کر پلاسٹر کے اندر تک جائے گا اور اس سے دوسرے مسائل شروع ہو جائیں گے۔ زخم گندا ہوگا اس میں انفیکشن ہو جائے گا۔ بیماری سے ایک اور بیماری پیدا ہو جائے گی۔ یہ نرس آسٹریلیا سے زلزلہ زدگان کی خدمت کرنے آئی تھی۔ جب ایبٹ آباد، پشاور، اسلام آباد کے بہت سے ڈاکٹر اپنے پرائیویٹ مریضوں کو دیکھ رہے تھے۔ جب کراچی، لاہور، جیسے بڑے شہروں کے بڑے بڑے ڈاکٹر کیمپوں میں تصویریں کھنچوا رہے تھے اور فلمیں بنوا رہے تھے۔ اخباروں میں تصویریں چھپوا رہے تھے اور ٹیلی ویژن پر اپنی فلمیں چلوا رہے تھے اس وقت آسٹریلیا کی نرسیں اپنے اسپتال سے دور دو اور پیسے جمع کر کے پاکستان کے زلزلہ زدہ علاقے میں زلزلہ زدگان کی مدد کرنے آئی تھی۔

پورا علاقہ کیوبا، فرانس، جرمنی، ترکی، ایران، روس، سعودی عرب، امارات، جارجیا، اٹلی اور بہت سارے دوسرے ملکوں کے ڈاکٹروں اور نرسیوں سے بھرا ہوا تھا۔ نہ جانے کہاں کہاں کی ایجنسیاں خیرات اور امداد لے کر آئی تھیں، ایسا نہیں تھا کہ پاکستان کے ڈاکٹر نہیں آئے تھے۔ آئے تھے مگر اتنے نہیں جتنے آنے چاہئے تھے۔ زلزلے نے انسانوں کی دوسری شکل بھی دکھائی جو انفسوس ناک بھی تھی اور خوفناک بھی۔

زلزلے کے فوراً بعد میں ایڈمی ایسوسی ایشن کے رضا کاروں کے ساتھ جب مظفر آباد پہنچا تو مجھے پتہ چلا کہ زلزلے کے دوسرے دن جب بلے کے نیچے سے سسکتے ہوئے آہ و بکا کرتے ہوئے مرنے والوں کی آوازیں آرہی تھیں تو کچھ لوگ تباہ شدہ کاروں میں سے پھپھے، کیسٹ پلیئر اور جو بھی سامان تھا، منظم طریقے سے نکال کر لے گئے۔ ٹوٹے ہوئے گھروں میں جہاں کے مکین مر گئے یا بھاگ گئے وہاں سے باضابطہ سامان ٹرکوں میں ڈال کر نکل گئے تھے۔ جب پوری وادی میں مرے ہوئے آدمیوں، دبے ہوئے انسانوں کے جسموں کی باس پھیل رہی تھی اس وقت کچھ لوگ ان مرے ہوئے سڑتے ہوئے لوگوں کی خوبصورت بیٹیوں کو امداد کے بہانے بہلا پھسلا کر اغوا کر چکے تھے۔ چھوٹے چھوٹے بے سہارا معصوم بچوں کی کھپکھپ پاکستان کے دوسرے شہروں میں پہنچادی گئی تھی۔ کیسے انسان تھے یہ لوگ؟ کیسا جہان تھا یہ؟ زمین کے اندر لوگ مرکز سڑ رہے تھے جنکی باس سے فضا بوجھل تھی۔ اوپر سڑے ہوئے زندہ لوگوں کی بدبو کسی کو نہیں محسوس ہوئی، حکومت نے اچھا کیا کہ کشمیری لڑکیوں اور بچوں کی نقل و حمل پر پابندی لگادی۔ اس سے پہلے کہ عرب دنیا کے حسن کے بازار ان لوگوں سے بھر جاتے، عرب شیخوں کے حرم میں یہ کشمیر کی کلیاں پہنچادی جاتیں۔

نرس پیٹریشیا کے توجہ دلانے پر جب حمیدہ بی بی سے بات ہوئی تو اس نے بتایا کہ سترہ سال پہلے اس کے پہلے حمل میں مرا ہوا بچہ پیدا ہوا۔ جس کے بعد سے اسے پیشاب بہنے کی مسلسل بیماری ہے۔ ہر وقت پیشاب آنے کی وجہ سے اس کے شوہر نے اسے چھوڑ دیا تھا۔ جس کے بعد وہ اپنے ماں باپ کے گھر عطر شیشہ واپس آگئی تھی۔ تھوڑے دنوں تک گھر میں رہی مگر اس کے پاس سے مسلسل بدبو آنے کی وجہ سے اس کے بھائی کی بیوی نے یہ انتظام کیا کہ اس کے لئے گھر سے باہر ایک کچا کمرہ بنوادیا تھا۔ جہاں وہ اپنے پیشاب سے لٹھڑے ہوئے جسم اور بدبو کے ساتھ رہتی تھی۔ شاید یہی مناسب انتظام تھا۔ شکر ہے اسے گھر سے نہیں نکالا لوگ ایسا بھی کرتے ہیں۔ اس رات بھی وہ اپنے اسی کمرے میں گھر سے باہر تھی جب زلزلہ آیا۔ جب زمین ہلکی تھی، جب پہاڑ ڈھیر ہوئے، وادیاں بکھر گئیں، عمارتیں گر گئیں، لوگ اجڑ گئے، خاندان بچھڑ گئے چند لمحوں میں سب کچھ ڈھیر ہو گیا۔

مرنا تو مجھے چاہئے تھا ڈاکٹر صاحب، میری زندگی تو ویسے ہی بیکار ہے۔ میں بیچ گئی اور وہ مر گئے، اس کی آنکھوں سے بہتے ہوئے آنسوؤں کی لڑیاں اس کے گالوں کو مسلسل تر کر رہی تھیں۔ وہ لوگ تو ٹھیک تھے ان کے جسم میں تو کوئی خرابی نہیں تھی۔ پیشاب میرا بہتا ہے، ناپاک میں ہوں نجس میں ہوں، نماز میں نہیں پڑھ سکتی، سپارے کو ہاتھ میں نہیں لگا سکتی۔ ناپاک میں ہوں اور مردہ لوگ گئے پاک لوگ، صاف لوگ، وہ آہستہ آہستہ بین کر رہی تھی۔

میں نے جب اس کا اندرونی معائنہ کیا تو پتہ چلا کہ اس کی پیشاب کی تھیلی پر چھوٹا سا تقریباً ایک سینٹی میٹر کا سوراخ ہے جہاں سے پیشاب مستقل بہ رہا تھا۔ یہ تو بہت معمولی سا سوراخ تھا۔ مشکل سے آدھے گھنٹے کا آپریشن، میرا دل جیسے اندر سے رو دیا۔ سترہ سال سے یہ لڑکی گھر کے باہر جانوروں کے اصطبل میں جانوروں کی طرح محض اس لئے رہ رہی ہے کہ کوئی اسے کسی سرجن کے پاس نہیں لے گیا کہ اس کا آپریشن ہو جاتا۔ ایک چھوٹا سا آپریشن، کسی بڑے خرچے کے بغیر۔ پھر یہ صحیح ہو جاتی، نہ اس کا شوہر اسے چھوڑتا نہ یہ سسرال چھوڑ کر میکے آتی۔ اور نہ ہی اسے گھر کے باہر کچے کمرے میں رہنا پڑتا۔ اس کے بچے ہوتے اس کا گھر ہوتا اور یہ بھی ساری مغرور ماؤں کی طرح اپنے بچوں کے ساتھ اپنے گھر میں خوش رہتی۔ اس وقت میں نے نہیں سوچا تھا کہ اگر گھر میں رہتی تو شاید زلزلے میں مر جاتی۔ تم کو کوئی ڈاکٹر کے پاس نہیں لے گیا، علاج کے لئے؟ آپریشن کے لئے تاکہ تم ٹھیک ہو جاؤ۔ میں نے سوال کیا تھا۔

گئی تھی ڈاکٹر صاحب میں۔ اماں باوا مجھے لے گئے تھے۔ کوئی ڈاکٹر وہاں کی ٹیم آئی تھی فرانس سے جو مظفر آباد کے فوجی ہسپتال میں اس بیماری کا علاج کر رہے تھے، میرے باوا کو کسی نے بتایا اور ہم لوگ عطر شیشہ سے وہاں پہنچے تو اسی دن ڈاکٹر واپس جا چکے تھے۔ فوجی ہسپتال میں پینتالیس مریضوں کا آپریشن کیا تھا ان لوگوں نے سارے مریض موجود تھے وہاں پر اور سب ٹھیک تھے۔ میری تو اس وقت بھی قسمت خراب تھی۔ کچھ بھی نہیں ہو سکا اور ہم لوگ واپس آگئے اس امید کے ساتھ کہ دو سال بعد ڈاکٹر پھر آئیں گے۔ میرے بابا مستقل پتہ کرتے

رہے تھے۔ مگر نہ ڈاکٹر دوبارہ آئے اور نہ ہی میرا آپریشن ہو سکا۔

مگر ہم لوگوں نے اس کا آپریشن کر دیا تھا، پہلے اسے کراچی منتقل کیا پھر دونوں بیروں کا آپریشن کر کے لوہے کی پلیٹوں سے ٹوٹی ہوئی ہڈیوں کو جوڑ دیا گیا۔ کسی پلاسٹری کی ضرورت نہیں تھی۔ آپریشن کے تیسرے چوتھے دن سے ہی وہ سہارے سے چل سکتی تھی۔ چھ ہفتے بعد پیشاب کی تھیلی کے آپریشن کی بھی منصوبہ بندی کر لی گئی تھی۔

کراچی میں ہی اس کی پیشاب کی تھیلی کا آپریشن کر دیا گیا اور دو ہفتے کے بعد اس کا پیشاب بہنا بند ہو گیا۔ وہ ایک مکمل عورت بن چکی تھی۔ اس کی پھوپھی اسے گھڑی دوپٹے سے لینے آئیں تھیں۔ عطر شیشہ سے دور مظفر آباد کے ایک چھوٹے سے گاؤں میں وہ بیاہ کے گئی تھی۔ حمیدہ بی بی اس کے خاندان کی آخری نشانی تھی۔

اسپتال سے گھر جانے کا منظر بڑا ہی جذباتی تھی۔ نئے جوڑے میں ملبوس، صاف ستھرے کپڑوں میں تین بڑے آپریشنوں کے بعد اور زلزلے کے خم سے ٹوٹی ہوئی ہونے کے باوجود حمیدہ بی بی اس دن بہت خوبصورت لگ رہی تھی۔ اس کے لئے ہسپتال میں ایک کٹا۔ ہسپتال کا عملہ اس سے ملا، اسے گلے سے لگایا، دعائیں دیں اور ابدیدہ آنکھوں کے ساتھ نرسوں نے اسے الوداع کہا تھا۔ ایسے مریض جو ہسپتال میں دو دو تین تین مہینے رہتے ہیں نرسوں سے ان کی خوب دوستی ہو جاتی ہے اور اکثر یہ دوستیاں ساری زندگی چلتی رہتی ہیں۔ مجھے ایسا ہی لگا کہ جیسے وہ بھی ہمارے ہسپتال کی نرسوں کی آشنا ہے گی۔

تقریباً دو سال کے بعد جب زلزلے کی دوسری سالگرہ کو گزرے ہوئے شاید چار مہینے ہوئے تھے اور سالگرہ پر ہم لوگوں کو اس کا خیال بھی آیا اور پھر اسے بھول بھی گئے تھے کہ ایک دن دوپہر کو جب میں ہسپتال سے نکل رہا تھا تو وہ ہسپتال آئی، اپنے شوہر کے ساتھ۔ میں دیکھتے ہی اسے پہچان گیا۔ اور یہ بات فوراً ہی میری سمجھ میں آگئی کہ وہ حاملہ ہے۔ مجھے یاد آیا کہ اس کی پھوپھی کو میں نے سمجھا یا تھا کہ جیسے بھی ممکن ہو سکے حمیدہ بی بی کی شادی کر دیں۔ وہ بالکل نارمل ہے۔ اس کا بچہ بھی ہو سکے گا۔ بس یہ کہنا ہوگا کہ بچے کی پیدائش ہسپتال میں آپریشن کے ذریعے ہوگی۔ وہ اپنے شوہر کے ساتھ اسی لئے آئی تھی۔ سارے ہسپتال نے اسے ہاتھوں ہاتھ لیا۔ اس کا شوہر زائد اچھا آدمی تھا اور حد سے زیادہ باتوئی بھی۔ زلزلے میں اس کی بیوی اور دونوں بچے مر گئے تھے، وہ کسی کام سے ایک رات پہلے پنڈی گیا تھا۔ ادھر بالاکوٹ میں سارا گھر زندہ دفن ہو گیا۔ زائد حمیدہ بی بی کے پھوپھا کا دور کارشتے دار تھا۔

حمیدہ سے شادی کے بعد وہ بہت خوش تھا۔ حمل کے چالیسویں ہفتے پر میں نے ہی آپریشن کر کے بچہ پیدا کیا، حمیدہ کا دوسرا لڑکا اور زائد کا تیسرا بچہ اور ان دونوں کی زندہ اولاد۔ وہ دونوں دیر تک روتے رہے۔ کبھی خم کے آنسو، کبھی خوشی کی پھیلی ہوئی ہیکلی سی مسکراہٹ۔

ہسپتال سے جانے سے ایک دن پہلے وہ دونوں میرے کمرے میں میرے لئے مٹھائی کا ڈبہ لے کر آئے تھے، زائد کو باتیں کرنے کا شوق تھا وہ بے تکان مسلسل بولتا رہا تھا۔ میں اس دن فارغ تھا اور بات سے بات نکلتی چلی جا رہی تھی۔ کشمیری باتیں، مانسہرہ، ایبٹ آباد کے زلزلے کی صبح کی کہانی۔ بالاکوٹ کیسے زمین میں دھنسا، لوگ کیا کر رہے ہیں، سرکار نے ہر ایک کو پیسہ دیا ہے، اسکول دوبارہ بن رہے ہیں۔ سڑکیں واپس آ رہی ہیں، اور سیاسی لوگ سرکاری لوگوں سے مل کر لوٹ مار بھی کر رہے ہیں۔

باتوں باتوں میں اس نے بتایا کہ "سینکڑوں سال پہلے ایک قافلہ مظفر آباد جاتے ہوئے پہاڑوں کے درمیان ایک وادی میں رات کے پڑاؤ کے لئے رک گیا تھا۔ صبح جب قافلہ تیار ہو کر نکلا اور آدھے دن کی مسافت پوری کر لی تو سالار قافلہ کی بیٹی نے اپنے باپ کو بتایا کہ پچھلے پڑاؤ پر قدرتی چشمے کے کنارے وہ عطر کی شیشی اور آئینہ بھول کر آگئی ہے۔ اس کی آنکھوں کے تملاتے آنسوؤں نے سالار قافلہ کا راستہ روک لیا تھا۔ اسی وقت پڑاؤ جنگل میں ڈال دیا گیا اور دو پیادے روانہ کئے گئے کہ وہ اس بچی کا عطر اور شیشہ لے کر آئیں۔

یہ صدیوں پہلے کا واقعہ ہے، ڈاکٹر صاحب اس وقت ہمارے بزرگ بیٹیوں کا اس طرح خیال رکھتے تھے۔ اس واقعے کے بعد ہی اس جگہ کا نام عطر شیشہ پڑ گیا۔ آج کے عطر شیشہ میں سترہ سال تک حمیدہ بی بی زلزلے کا انتظار کرتی رہی۔ زلزلہ آیا تو ایدھی والے آئے اور ایدھی والے آئے تو آپ ملے اور آپ ملے تو آپریشن ہوا تو حمیدہ کا پیشاب بہنا بند ہوا تو حمیدہ نجس سے، ناپاک سے پاک ہو گئی۔ آج حمیدہ دوبارہ زندہ ہو گئی ہے جناب۔۔۔۔۔ زلزلے کی وجہ سے۔

عطر شیشہ جیسے ہزاروں گاؤں دیہاتوں میں بالاکوٹ سے باغ تک، بشام سے سوات تک، گڑھی دوپٹے سے پٹہ بٹہ تک سرحدوں کے اس طرف آزاد کشمیر میں اور سرحدوں کے اس طرف غلام کشمیر میں ہماری بچیوں بیٹیوں کے لئے کوئی نظام نہیں ہے۔ وہ بچے جنم دیتے ہوئے مرجاتی ہیں، بانجھ ہو جاتی ہیں، زخمی ہو جاتی ہیں، ان کے جسم میں سوراخ ہو جاتا ہے۔ ان کا پیشاب بہتا رہتا ہے۔

اس کا چہرہ سرخ ہو گیا۔ ان دیہاتوں میں سرحد کے دونوں طرف اور زلزلوں کی ضرورت ہے ڈاکٹر صاحب۔ حمیدہ جیسی بے شمار لڑکیاں اپنے زخموں کے پیشاب سے زندہ درگور ہیں۔ شاید کوئی اور زلزلہ آئے تو انہیں بھی نجات مل جائے۔"

میں حیران نظروں سے اس کے چہرے کو تنک رہا تھا۔

اردو کے انگریز شعراء

الیکزینڈر ریڈر ہیڈرلی آزاد (1829 - 1861)

میری صورت سب کہے دیتی ہے میرا راز دل
میرے تیور دیکھ کے وہ مجھ سے بدظن ہو گیا



رابرٹ گارڈنر اسٹیون

جب کہا میں نے قسم کھاؤ تو بولے ہنس کے وہ
گر قسم ہے چیز کھانے کی تو کھالی جائے گی



جارج برنس شور

غیر کے ساتھ عیادت کو وہ دلبر آیا
لومسجاملک الموت کو لے کر آیا

بلنظر اسیر

شع فائوس میں در پردہ جلی ہے دیکھو
شعلہ آہ نکالے ہے جگر سے باہر
ہم اس کو آئینہ رُو کے جگر میں یوں زیت بسر کرتے ہیں
کہہ سکتے کی سی حالت ہے نہ جتے ہیں نہ مرتے ہیں



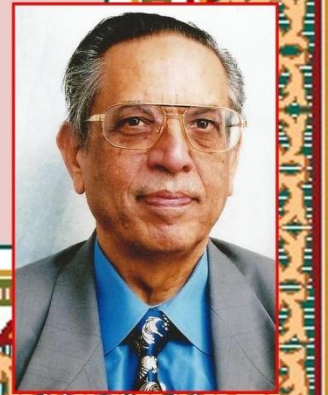
جارج فائوس شائق

جو رقیب و منہ درباں و طرز غیر
کیا کیا جفا نہیں ہم نے تیرے واسطے کہیں



جوزف برویٹ ویم

بت بنے بیٹھے ہیں کچھ کہتے نہیں سنتے ہیں سب
یہ نہیں کھلتا زباں ان کے دہن میں کیوں نہیں



Courtesy of Dr Ahmed Syed.

دل کے دروازے پہ دستک دیتی یادیں۔

اسامہ اختر..... (ڈاؤمیڈیکل کالج 1989ء)

بیگم کرمل عزیز خان کی دی ہوئی ڈائری 6 جنوری 1936ء سے شروع ہوتی ہے۔ صفحات خستہ زرد اور کرم خوردہ ہیں۔ سیاہی اپنی نیلا ہٹ کھوپچکی ہے۔ آخری لیکچر 13 جنوری کا ہے۔ پہلا لیکچر ریڈیالوجی کا عمومی تعارف ہے اور آخری نظام انہضام کی ریڈیالوجی کا احاطہ کرتا ہے۔ قائد اعظم کے مزار کے سامنے ایک گلی میں پچھلی صدی کی تعمیر شدہ زرد پتھر سے بنی کوٹھی میں اپنی زندگی کے آخری ایام یادوں کے سہارے اور تنہائی کی سرسراہٹ میں گزارتی بیگم عزیز خان کی اکلوتی بیٹی کا انتقال ہو چکا تھا اور نواسی سنگا پور جا رہی تھی۔ لوہے کا رنگ آلود پھاٹک آدھا کھلا کھلا زمین میں دھنس چکا تھا۔ مین فورے کا گول حوض خشک اجاڑا اور جگہ جگہ سے پھٹا ہوا تھا۔ نیم کے قد آرد درختوں کے علاوہ پورے باغیچے کو خورد و پودوں اور جنگلی گھاس نے گھیر رکھا تھا۔ پورٹیکو میں پرانے ماڈل کی بھاری بھر کم ایمپیسڈر کا گرڈ وغیرہ میں اٹی ہوا نلکے ٹائروں اور اینٹوں کے سہارے کھڑی تھی۔ نیچے شاگرد پیشہ تھا۔ لوہے کے خم دار زینے پر مدھم سی روشنی والا بلب ٹنڈا ہوا تھا۔ بیٹھک کانفیس اور سب فرنیچر اپنی چمک دمک کھو چکا تھا۔ تنہائی بہت بری چیز ہوتی ہے۔ بیگم عزیز نے سادگی سے کہا۔ بس میں سگریٹ پتی رہتی ہوں۔ رجیم ٹولا بہت منع کرتا ہے۔ اب ہر وقت کھانسی پریشان رکھتی ہے۔ دیکھیں یہ کرمل صاحب کی کتابیں ہیں اگر آپ کے کام کی ہیں تو لے جائیں۔ ان کی اجازت سے میں نے کرمل صاحب کے لندن میں قیام کے دوران لکھی گئی چند ڈائریاں اٹھالیں۔ انہوں نے مجھے ڈاکٹر صاحب کی وہ تصویر دی جس کا حصول ملاقات کا عنوان بنا تھا اور جو بعد ازاں اتلار جنٹ کے بعد اکیڈمک کونسل کے کمرے کی زینت بنا دی گئی۔ سنا ہے کوٹھی کی جگہ اب پارٹمنٹ بن چکے ہیں۔ بیگم صاحبہ نے کچھ ہی عرصہ بعد زمین کی چار داڑھی لی۔

کرمل عزیز خان ہمارے ڈاؤمیڈیکل کالج کے پہلے پرنسپل تھے۔

کرمل صاحب کی کوٹھی کی طرح ڈاؤمیڈیکل کی تعمیر بھی زرد پتھر کی سلوں سے ہوئی۔

ایک قدم ادھر ایک قدم ادھر

میں کالج کے گیٹ پہ کھڑا ہوا۔ میں اندر جانا چاہتا ہوں۔ سب کچھ ویسا ہی ہے اور سب کچھ بدل گیا ہے۔ محافظ سوال کرتا ہے کہ میں کیوں جانا چاہتا ہوں۔ میں دہراتا ہوں اور خود سے سوال کرتا ہوں کہ میں کیوں جانا چاہتا ہوں۔ اندر کی خاموشی سے گھبرا کے میں رخ موڑ کے آگے چل پڑتا ہوں۔ یہ سب کچھ کتنا جانا پہچانا اور کتنا اجنبی ہے۔

کالج کے سامنے کووال بلڈنگ اسکول کی عمارت ہے۔ کبھی حمیب جالب اس اسکول میں پڑھتے تھے۔ عمارت بڑے سائز کے پیلے پتھروں سے بنی ہے۔ یہاں سے ایک چارمیل آگے ٹاورنک جہاں قائد اعظم نے جنم لیا اور دوسری جانب چندمیل دور صدرنک جہاں گووینئر کلب کی اجاڑ اور خستہ حال بلڈنگ بھوت بنگلہ بن کے کھڑی ہے۔ کھیر ملی پھتوں والی عمارتیں ہیں اور قد آور ٹھنڈے سائے والے نیم کے درخت ہیں۔ ان پہ لیرا کرنے والی چیلپس ہیں جن کے چلانے کی آوازیں گرم اور آداس دوپہروں میں دور دور تک گونجتی ہے۔

کالج کے دروازے سے متصل ہینٹل کے درخت ہیں۔ چٹاؤں اور شاخوں میں چھپی پیلے پتھروں کی ایک سہیل ہے۔ سب مرمری تختی دھوئیں میں سیاہ پڑ چکی ہے۔ انگریزی میں تحریر مٹے مٹے حروف کو غور سے پڑھا جائے تو عبارت کا ترجمہ کچھ یوں ہوگا: اوم: آنجمنی سری رام چند گوپال چند سابق اور سینئر شہر کراچی کی اہلیہ نے اپنے بہت عزیز شوہر کی یاد میں استعمال عام کیلئے بنوائی۔ اوم۔ اوم۔ اوم۔ بھلا سوسا سوسال پہلے جب آن پتی ورتا بی بی یہ سہیل تعمیر کروائی تو کراچی کتنا مختصر، کتنا پرسکون اور کتنا خاموش ہوتا ہوگا۔

کالج سے بندر روڈ کی طرف مڑیں تو پیلے پتھروں سے بنی عمارت ہے جہاں برصغیر میں چلنے والی بڑی تحریکوں میں سے ایک کا آخری باب لکھا گیا۔

خالق دینا ہال میں مولانا محمد علی جوہر پہ خلافت تحریک کی پاداش میں مقدمہ بغاوت، قید اور سزا سنانا کے انہیں اسی بندر روڈ پر پولیس لاری میں بٹھا کے جیل بھیج دیا گیا۔ ان بہت سے کاغذات میں جو میں نے سینٹ سینٹ کے رکھے ہوئے ہیں نیویارک ٹائمز کا 5 جنوری 1931ء کا وہ شمارہ بھی ہے جس نے ایک کالمی خبر لگائی کہ مولانا محمد علی جوہر نہر ہے۔ محمد علی جوہر جاتے جاتے وصیت کر گئے کہ غلام زمین میں نہ دفن کیا جائے۔ خالق دینا ہال لاہور کی کو ہمیشہ خالی آداس اور ویران ہی پایا۔

دو چار قدم آگے بڑھیں تو جگہ کا نام بدل جاتا ہے۔ مولوی مسافر خانے کا نام اب کم کم سننے میں آتا ہے۔ نئی نسل تو سرے سے واقف ہی نہیں۔ برصغیر میں سو پچاس برس پہلے اگر کسی کے بزرگ نے وہ حج کیا جس کا دورانیہ چار سے چھ مہینے پر محیط ہوتا تھا تو قیاس ہے کہ ان کی روانگی بذریعہ بحری جہاز بعد از قیام مولوی مسافر خانہ سے ہی ہوئی ہوگی۔ پچیس تیس سال پہلے میں نے دکانوں، شامیانوں، مچانوں، اشتہاری بینروں، پتھار دیداروں اور بانسوں سے جھولتی چادر نما چھتوں سے جھانکتی مولوی مسافر خانے کی پیلے پتھروں کی کنگورے والی فصیل نما یوار ڈھونڈ نکالی۔ کچھ تنگ دودو کے بعد اس جگہ کا بھی سراغ ملا جہاں اگلے وقتوں میں بلند و بالا دروازہ رہا ہوگا۔ ذرا اوپر دیوار پہ مٹیا لے سب مرمری تختی عبارت کے تعمیر کنندہ کے نام و جب تعمیر عمارت یعنی برائے خیر و ثواب و برکت اور سن تکمیل تعمیر کی خبر دے رہا تھا۔ جانے دیوار کے کھنڈرات، چوکھٹ اور مرمری سہیل زماں اور حرص و ہوس کی نذر ہوئی یا باقی ہے۔

ذرا آگے مٹھانیوں کی وہ پرانی دکان ہے جو دن بھر بھائیں بھائیں کرتی مگر سورج ڈھلنے سے پہلے بھانت بھانت کے اجنبی لوگوں سے بھر جاتی۔ دیکھتے ہی دیکھتے مٹھانیوں کے تھال خالی ہو جاتے۔



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اہل محلہ اس دکان پر نہیں جاتے تھے۔ مشہور تھا کہ یہاں سے جن مٹھائی خریدتے ہیں۔

برسبیل تذکرہ اور بوجہ رقت حالات حاضرہ مذکور ہے کہ سامنے اللہ والا مارکیٹ کے عقب میں پیلے پتھروں کی ایک عمارت کی دوسری منزل پہ موجودہ صدر پاکستان ممنون حسین کا مکان تھا اور ہزاری کی دکان سامنے والے بازار میں تھی۔

مولوی مسافر خانے سے دو قدم آگے فری مین لوگوں کا تھیو سٹوئیوکل ہال تھا۔ یہاں ہر طرح کے موضوعات پہ بحث مباحثے اور جلسے اور مذاکرے ہوتے تھے۔ روڈ پارٹیو پاکستان کی گنبد والی پیلے پتھروں سے بنی عمارت تھی۔ ذوالفقار علی بخاری نے کیسے کیسے ادیب، شاعر، گلوکار اور فنکار یہاں جمع کئے۔ ساتھ گلی میں ہارمونیم کی مرمت کی دکان پہ بیٹھے کاریگر کا دعویٰ تھا کہ اس نے استاد برکت علی اور استاد بڑے غلام علی سے لے کر مہدی حسن تک کے ہارمونیم کے بیچ و خم درست کئے ہیں۔

تھیو سٹوئیوکل ہال کے ساتھ ہی این جے وی اسکول کی عمارت ہے۔ کم ہی لوگ واقف ہیں کہ پاکستان بننے کے بعد سندھ اسمبلی کی عمارت مرکزی مجلس قانون ساز کے تصرف میں آئی تو سندھ اسمبلی کے اجلاس این جے وی اسکول میں منعقد ہونے لگے۔ اب اس کشادہ پیلے پتھروں سے بنی عمارت کے وسیع اور ہوادار اہداریوں اور کھلی کھڑکیوں میں کچی اینٹوں کی چٹائی کر کے محکمہ تعلیم کے بابوؤں کے بیٹھے کیلئے کمرے نکال دیئے گئے ہیں۔ ساتھ ہی سعید منزل ہے۔ پیلے پتھروں سے بنی کوٹے میں واقع اس عمارت کی پہلی منزل پر ڈاکٹر یار عباس کا مطب تھا۔ سال بہ سال یار عباس بڑی دھوم دھام سے ایک طویل اور تازہ مرثیہ پڑھتے تھے۔ کراچی کا کون سا ادیب اور شاعر ایسا ہوگا جس نے ان سے علاج نہ کرایا ہو۔ مطب اس زمانے کی اس مخصوص طبی خوشبو سے مہک رہا ہوتا جس میں آج کی مروج اصطلاح استعمال کریں تو فائل، پیپر، آئیوڈین، اسپرٹ اور خانہ ساز مسکروں کے ٹوٹے ہوئے تھے۔

سامنے ہی ایرانی ہوٹل تھا۔ سب ایرانی ہوٹلوں کی طرح اس میں بھی ایک بہت بھاری بھر کم سفید رنگ کا فرنج تھا۔ سبز چائے اور دودھ والی چائے اپنے مخصوص ڈانٹے رکھتی تھیں۔ کھارے ورتی سکت، زیرے وال سکت اور کیک پیس پہ مشتمل مینو کے ساتھ یہ ہوٹل مقامی کاروباری ملاقاتوں، سماجی رابطوں، سیاسی اور ادبی سرگرمیوں کا ذریعہ تھا۔

ایرانی ہوٹل کے ساتھ بھر بھری زرد اینٹوں اور سرخ مٹی کی کچھروں والی وہ عمارت تھی جہاں میں نے اپنے بچپن میں مشاہیرین کو سیٹھیاں چڑھ کے اوپر جاتے دیکھا۔ کیسی کیسی صورتیں تھیں جو خاک میں پنہا ہو گئیں۔ نواز زہد نصر اللہ خان، مفتی جعفر حسین، ماہر القادری، مفتی محمد شفیع، علامہ خلیل عرب، سردار قیوم ابوالاعلیٰ مودودی، سید محمد جعفری، بنگر مراد آبادی، مولوی تمیز الدین، سردار فاروق خان لغاری، شورش کاشمیری، محمد صلاح الدین، حکیم نصیر ندوی، مولانا شاہ احمد نورانی، پروفیسر غفور احمد، مولانا بخش سومر ڈالے کے بروہی، خالد اسحق، ایڈووکیٹ، محمود شام، جو شگل نظر آئی تصویر نظر آئی۔ مجیب الرحمن شامی، جاوید ہاشمی، پروفیسر جمال نقوی، الطاف حسین قریشی، علامہ طالب جوہری اور سردار شیر باز مزاری حیات ہیں۔

دو گھر چھوڑ کے زرد پتھروں کی دو منزلہ عمارت پر سارہ صدیقی میٹریٹی ہوم کا بورڈ لگا تھا۔ سارہ صدیقی ڈاؤمیڈیکل کالج کی گائی کولوجی کی اولین پروفیسر تھیں۔ اچھے بالوں کے ساتھ بیٹی کوٹ اور بلاؤز پہنے وہ ہمیشہ اردو اور انگریزی بولتے ادھر ادھر پھرتی نظر آتیں۔ وہ ٹھیک ٹھاک سکی مشہور تھیں۔ کریم صدیقی جو ڈاؤمیڈیکل کالج میں سرجری کے پروفیسر رہے سارہ صدیقی کے بھتیجے تھے۔ موجودہ پیرپگارو کے دادا پیر صبغت اللہ شاہ قادری کو انگریزوں نے جیل منتقلی اور پھانسی کی سزا سے پہلے اسی مکان میں نظر بند رکھا تھا۔

بندر روڈ پر کبھی ٹرام چلا کرتی تھی۔ لمبے سے کاغذ کا ٹکٹ ہوتا تھا۔ رسی سے بندھی گھنٹی جو تھوڑی تھوڑی دیر پہ بلا وجہ بجتی رہتی۔ کنڈیکٹر اور ڈرائیور اُبلے یونیفارم پہنا کرتے تھے۔

بندر روڈ پر ماما پارسی اسکول کے سامنے پرڈی اسٹریٹ ہے۔ یہاں اور یہاں سے آگے صدر تک یہودی گویز اور پارسی آباد تھے۔ کچھ اور اینگلو انڈینز بھی یہاں اور قریب و جوار میں رہتے تھے۔ شام کو سفید کپڑے پہلے عمر رسیدہ پارسی اور ادھیڑ عمر کے لمبی ناکوں والے یہودی ٹیلٹے ہوئے نظر آجاتے۔ اینگلو انڈینز اور گویز لڑکیاں سیر و تفریح اور رقص وغیرہ کے شوقین تھے اور نشاط کے سامان مہیا کر لیتے تھے۔ پارسیوں کے گھروں کے باہر صبح فرش پہ پلاسٹک آف پیرس کے غبار سے پھولوں کے نقش اُبھارے جاتے تھے اور تازہ پھولوں کے ہاردروازوں پہ لٹکا دیئے جاتے۔ گویز اور اہل یہود اب قصہ کہانی ہوئے۔ پارسیوں کی مٹی ہوئی نسل اب بھی وہاں بہتی ہے۔

ہاں تو پرڈی اسٹریٹ کے ساتھ ہی بنی باغ کالج ہے اور اسی احاطے میں میا لے سے بھورے رنگ کی اینٹوں سے بنی ایک بڑی سی مربع نما عمارت ہے۔ عمارت کی کھیریل کی چھت ایک آدھ جگہوں سے بیٹھ گئی اور عمارت کی دھنیاں اور بلایاں نظر آنے لگی ہیں۔ یہ کبھی شہر کا گوردوارہ ہوتا تھا۔ دو قدم پہ رتن تلاء کی جانب شری سوامی نرائن مندر ہے۔ گوردوارے پہ برسوں پہلے تالا پڑا تو پھر نہیں کھلا۔ تقسیم کے بعد کے فسادات میں سکھ بھی مارے گئے تھے۔ عرصے تک اس گوردوارے کی دیواروں پہ خون کے نشانات دیکھے جاسکتے تھے۔

مندر کے ارد گرد جامنی، عنابی، سرخ اور زرد ساریاں اور پھنسی پھنسی آستینوں والے بلاؤز پہنے اور کسی چٹیا نہیں باندھے ہندو پیمیاں نظر آتی تھیں۔ پیشانی پہ بندی منہ میں پان اور لالی سے ہونٹ سرخ۔ سب ڈھیروں زیور ضرور پہنی تھیں۔ پاؤں کے پازیب اور پاؤں کی انگلیوں کے چھلے اور بازو کے کندھے تو لازم ہی ہوتے۔ کلانیوں بھی کہنیوں تک چوڑیوں سے پھری ہوتیں۔

دیکھئے گھوم پھر کے میں پھر کالج کے دروازے پہ پہنچ گیا۔ جیسا کہ میں نے عرض کیا کرنل صاحب کے گھر کی طرح کالج بھی پیلے پتھروں سے تعمیر کیا گیا۔ میری خواہش ہے کہ میں کالج کے دنوں کی یادیں تازہ کروں۔ تاہم کالج کے ارد گرد ان پیلے پتھروں کی اور عمارتوں کے سفر نے تھکا دیا ہے۔

ڈاؤمیڈیکل کالج کا بیان پھر کبھی سہی۔

عبد اللہ علیم سے کہ ڈاؤمیڈیکل نے انہیں اور انہوں نے کالج کو بہت محبوب رکھا، تصرف کے ساتھ مضمون کا عنوان مستعار لینا ہوں۔



CenterPointe Hospital provides a comprehensive continuum of behavioral health services for individuals of all ages, and private, residential chemical dependency and self-injury programs for adults. Outpatient services, based on the medical model, are available at several locations in the St. Louis area and Metro Kansas City. Additional outpatient locations will open in Minnesota later this year, and in Central Missouri and Houston in early 2014.

CENTERPOINTE HOSPITAL IS SEEKING QUALIFIED CANDIDATES FOR PSYCHIATRY POSITIONS

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**Please contact CenterPointe Hospital CEO Azfar Malik, MD, MBA at
Azfar.M.Malik@gmail.com.**

**CenterPointe Hospital's treatment team looks forward to providing care to
the Houston community in early 2014.**



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Adult Psychiatrist



Ateka Zaki MD
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