Metro Manila and several areas in Luzon experienced heavy floods brought about by monsoon rains or “habagat” early last month. The continuous rains, which started August 6 and lasted for several days, has resulted in an Ondoy-like situation.

To help the flood victims, the Philippine Medical Association led by Dr. Modesto Llamas, PMA President and Dr. Hector Santos, chair of the PMA Committee on Emergency and Disaster, organized several medical missions which included “Doctors on Boat”. Areas served included Malabon, Novaliches, Calumpit in Bulacan, Pasig, Apalit and Macabebe in Pampanga, San Mateo, and Muntinlupa. Relief goods were distributed and medical consultations were done. Psychosocial counselling was also done in Brgy. Sta. Lucia Covered Court, Evacuation Center in Novaliches, Quezon City. A total of 4,272 patients were served.

Volunteers included Dr. Ferdinand E. Cercenia, PMA Governor for Quezon City, doctors and medical personnel from East Avenue Medical Center and Social Security System, and PMA members from Bulacan Medical Society, Las Pinas Medical Society, Makati Medical Society, Malabon-Navotas Medical Society, Marikina Valley Medical Society, Muntinlupa Medical Society, Pampanga Medical Society, Pasay Paranaque Medical Society, Quezon City Medical Society, and Taguig Medical Society.

Medicines were provided by UNILAB, GSK, Pharex, Pfizer, Pascual Laboratories and Pacific Pharma. The UST Pharmacy provided the much needed anti-fungal creams. Aside from the medicines, UNILAB also provided logistic support like transportation and meals for the volunteers.
The Philippine Medical Association celebrated its 109th Foundation Day last September 15 at the PMA Compound in North Ave., Quezon City. The event started with the wreath laying ceremonies, which was followed by celebration of the Holy Eucharist with Rev. Fr. Alfredo Fernando as presider.

After the fellowship dinner, the program proper started with the singing of the PMA Hymn led by the Board of Governors. Gina C. Nazareth, M.D, chair of the PMA 109th Foundation Anniversary Celebration, welcomed the participants while Albert C. Guevarra, M.D., PMA National Treasurer, acknowledged the guests and dignitaries.

In his message, Modesto O. Llamas, MD, PMA President, stated that the guidance and commitment of the Association’s leaders and the support of the members have made the PMA evolve from a group of American and Filipino physicians 109 years ago to a professional organization that it is today, a respected organization with objectives and responsibilities. The task of unifying the members into a solid and strong PMA is difficult and he has requested every officer and member to move as one and to reject people who for personal interest, to try to derail the journey.

An AVP presentation featuring the past presidents was shown and this was followed by the traditional Candle, Cake and Wine Ceremonies, the ceremonial toast led by Dr. Llamas and the dancing of the anniversary waltz. As a response from the past president, Santiago del Rosario, M.D., chair of the Association of Former PMA Presidents, gave the highlights of the PMA history.

Aside from Dr. Santiago, the other past PMA presidents who were able to attend the celebration were Nena Eng Tan, M.D., Nenita Lee Tan, M.D., Gil Fernandez, M.D. and Jose Asa Sabili, M.D.

Marianne O. Dobles, M.D., PMA Secretary-General, was the Master of Ceremonies while Agnes E. Calleja, M.D, and Arnel M. Asino, M.D. were the co-emcees.
My Dear Colleagues,

Our reform and unification programs are proceeding despite some deterrence. Your PMA Board is very transparent and fair without any hidden agenda. Every issue is being thoroughly discussed and voted upon freely. Allow me to report the following that may be of interest:

1. PMA has received the 0.5M from the PDIC. The Export Import Bank is being bid out to two prospective interest groups by the Central Bank. In fairness to all, we cannot blame any officer of the last PMA administration for the misfortune, not even the President, despite the principle of “Command responsibility.” Monthly financial report is being discussed by the PMA Board including money placements and deposits. Nobody, outside of the top men at the Central Bank and the President of the Republic, will ever know when a bank will be closed.

Please be assured that this will in no way affect the mutual aid benefits to our members. In fact, an increase in the benefits will be submitted to the Board for approval.

2. Your humble servant already apologized to the PRC chair for my answer to the chair of the Board of Medicine which was magnified and broadcasted as being “Scolded”. I was just performing my duty as PMA President to also voice out the necessity of allowing our colleagues who were fully trained but not certified to continue to practice the specialty field. I need SUPPORT not MOCKERY!

3. New development plan of the PMA compound is being discussed with Filinvest, the developer approved by the Regional Assembly in 2010. A “Build – Operate – Transfer” and a much shorter term than the previous 75 years, with no disruption of service in the Doctors’ Inn (which will actually be improved), indigency clinic, administration, and no loss of PMA property. Hopefully, in time, PMA will be financially independent that can translate to increased benefits to the members.

4. For everyone’s information – the building project initiated by former PMA president Dr. H.B. Calleja with me as the Vice President in 1995 – 1997, was pursued by my administration in 1997 – 1999. Unfortunately the developer backed out because it could not secure a bank loan due to the existing Asian Financial Crisis at the time, with a glut in building spaces.

5. With the active support of the Specialty / Subspecialty Societies we have adopted the categorization of Physicians into Specialists / Subspecialists and Generalists as required by the PRC Board of Medicine.

6. Accreditation of PMA as the Professional organization for Physicians which expired last March 2, 2012 is still pending approval of renewal, so are many other professional associations. The last deterrent factor, the categorization of Physicians has been settled as we have submitted the Board Resolution adopting the PRCBOM categorization.

7. The MRA (Mutual Recognition Agreement) signed by the different Asean Countries for categorization of Physicians into Specialists / Subspecialists / Generalists for the purpose of reciprocity of medical practice effective 2015, is the basis of the PRCBOM POLICY on Categorization.

8. “Program till 2015 to pass the certifying examination”. Realizing that we have numerous colleagues who were fully trained but not certi-
fied, the various Specialty / Subspecialty Societies have heeded the request of PMA to absorb this group into their folds and to come up with programs to help them pass the certifying examination. In fact, many specialty societies have amended their bylaws just to accommodate the request.

9. PMA will seek the approval of Philhealth for improved payment of professional fees for the “fully trained but not certified group” if not yet in place.

10. PMA will appeal to Congress to introduce the following amendments to the Physicians’ Acts of 2012:
   - Delete provisions that will criminalize the uncertified medical practitioners in practicing the specialty field. The act is already sanctioned by the PRC Board of Medicine in another provision.
   - Addition of a Transitory provision
   - Addition of a “Grandfather Clause” to allow fully trained but not certified physicians who have been in practice for at least 10 years, to continue practicing the specialty field as validated by the PMA and the Specialty / Subspecialty Societies concerned.

11. On the Government Physicians under the LGU hospitals, DOH Secretary Dr. Enrique Ona assured us of measures being undertaken by Philhealth to ensure the payment of Philhealth fees to the Physicians.

12. Per arrangement with Philhealth and with the approval of the Commission on Professional Specialization/ Specialty Divisions, Specialists and Subspecialists can apply for Philhealth accreditation directly through the PMA. However, certification of Specialty and Subspecialty society concerned will be required.

13. The Commission on Professional Specialization and the Committee on Bylaws and Administrative Code are looking into the need for Amendment of the Bylaws.

14. Our proposal for sisterhood relation with Philippine Hospital Association (PHA) and Private Hospital Association of the Philippines (PHAP) to join hands to address common issues.

15. PMA Advocacies -
   - Transparency, sincerity and good governance
   - We continue supporting:
     - Clean Air Act
     - No Smoking Campaign
     - Silent on RH Bill as of this report – the position of previous administration stays.
   - New Advocacy:
     - We support the “SIN TAX BILL”
     - We support the Breast feeding group.

16. PMA wants to be strong and be heard, but not in every issue, every matter nor every single small thing, irrelevant to PMA as a national organization of Physicians. We want to be heard at the right time on vital and relevant matters. Otherwise, ang labas natin ay “TSISMOSA” tayo!

As the PMA President, it is my obligation to ensure that PMA be represented properly, that positions and stands truly represent those of our members’! We avoid to be involved in controversial, political, and irrelevant issues. Remember the Chinese proverbs: “Less talk, less mistake”, “No Talk, No Mistake”. But, PMA will definitely talk when necessary at the proper time.

GOD BLESS US ALL!
Weather forecast: It is still rough seas, dark clouds, and stormy winds for the Philippine Medical Society. But we are sailing on.

At the start of the fiscal year, we likened the PMA to a ship with the PMA President Dr. Modesto Llamas at the helm, as the Captain. We forecasted blue skies and clear weather. The storms continue though. Yes, the sailing has not been smooth and problems have cropped up like tempests and storms.

Our ship has been battered with strong winds and heavy waves but it has braved the storm and has kept cheerfully afloat. But we all know that after the heavy rains, there will always be bright and sunny days. So despite the heavy downpour, we keep calm, and carry on.

To steer the ship ashore, we all know that we would need the support of each member on the platform and programs of the PMA. The PMA National Officers and Board Governors might have been from different ships before and during the election, but we now realize that we are all just in one ship and if we are to move forward, we must all pull through.

The PMA is now a team, as it should be, first and foremost. Casting away our personal interests and getting into our roles be it as boatswain, steward, first assistant engineer, skipper, chief engineer, cook, chief mate, or even captain, we now come together.

Now is the time to help our President take our bearings, so he may chart our course and lead us in our arduous journey. Because like a ship navigating dangerous waters, we must avoid not only unseen shoals and rocky reefs, we must also be on guard against disorienting lights on the shore.

Then as everyone contributes according to his or her role and capability to achieve the pre-defined targets successfully within the desired time frame, we come closer to shore.

Johann Wolfgang Von Goethe once said, “Knowing is not enough, we must apply; Willing is not enough, we must do!”

The PMA – SAILING ON THROUGH ROUGH WEATHER

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Presidents of Component Societies
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The Physician is an internal publication of the Philippine Medical Association instituted by the PMA Board of Governors for the dissemination of information to PMA Members.

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As I See It...

By MARIANNE O. DOBLES, M.D.
PMA Secretary General

The meeting with the Chairs of the Emergency and Disaster Committee and the Medical Missions by the President, Dr. Modesto Llamas last July 2, 2012, to set down action plans was timely. Because barely a month later, we were hit by the calamity, which PMA dubbed as “Rumaragasang Habagat”. The medical missions in disaster stricken areas lasted from August 12, 2012 to September 2, 2012. We gave medical aid to 4272 patients and 150 families. PMA is ever grateful to our doctors from the NCR region, from Bulacan and Pampanga, who crossed borders to help colleagues in treating our less fortunate citizens. PMA also expresses our gratitude to our partners who readily came with help like medicines, food, water, and transportation for our doctors. They are United Laboratories, GSK, Pharex, Pfizer, Pacific Pharma, Pascual Laboratories, Generics Pharmacy, and the UST Pharmacy for their anti-fungal cream. Our sincerest gratitude too, to the Philippine Red Cross, the DENR, MMDA, PNA, DSWD, the Coast Guard and other government agencies who supported the drive.

The PMA-Unilab Regional Orientation and Leadership Seminars for Luzon, NCR with Southern Tagalog and Bicol and Visayas – Mindanao have been completed. Attendance in all these assemblies have been very encouraging.

PMA has received 150 card readers from Pfizer for use by our component societies, specialty divisions and all affiliate societies primarily to record and transmit electronically, all CME units to the member’s database at the PMA. Arrears and other data may also be accessed with the use of the PMA ID card which we will be distributing soon.

Last July 24, 2012, the PMA National Officers and NCR Governors made a courtesy call on PRC Chair Teresita Manzala. Also present were the PRC Board of Medicine. Discussions centered on the classification of Physicians. The PRC only recognizes 3 tiers of classification, specialists, subspecialists, and generalists.

Together with National Treasurer, Dr. Albert Guevarra, we had a meeting with Mrs. Lucita Rodriguez, Assistant Commissioner to the Deputy Commissioner Estela Sales last August 14, 2012. They will be coming out with a CD on a BIR Primer for Physicians which we shall distribute to all PMA members. This is upon request of the PMA for an easy to follow guide on the proper way of paying taxes, the required receipts, books, ledgers, etc.

On August 21, 2012, all Accredited Professional Organizations were requested to attend a PRC workshop at Holiday Inn, Clarke. PRCBOM Chair Dr. Jose Cueto gave his talk on matters pertaining to the practice of Medicine in the country.

A meeting was called by Dr. Modesto Llamas last August 23, 2012 to shed light on 2 conflicting statements given by 2 of our members to the press regarding the medical condition of Past President Gloria Macapagal-Arroyo. In the light of this, a special board meeting was called wherein the Board of Governors issued a board resolution that the PMA President is the duly authorized person to issue statements in behalf of the PMA or any representative he may designate. All other statements will be regarded as the personal opinion of the speaker and not of the PMA. This was done to avoid confusion.

The 8th “Operation Bukol” at the PMA Auditorium last September 13, 2012 ushered
in the start of Medicine Week. This is a yearly event sponsored by the PMA, PCS, Metro Manila Chapter, and the QC Medical Society. 79 indigent patients came for excision of small sized tumors done on an OPD setting.

The PMA Foundation Day last September 15, 2012 was at the PMA Auditorium, in honor of all PMA Past Presidents. Dr. Santiago del Rosario gave the response in behalf of the Past Presidents. He cited the long history of the PMA and the role it played in every decade of its 109 years.

The PMA celebrated its 55th year of the National Medicine Week last September 23, 2012 to September 29, 2012, with the theme “PMA: Nagkakaisang Manggamot Tungo sa Kalusugan Pangkalahatan”. On August 30, 1957, former President Carlos P. Garcia, issued Proclamation 439, declaring the fourth week of September every year as Medicine Week and authorizing the Philippine Medical Association to take charge of the observance thereof. Another former president, President Ferdinand E. Marcos, declared the 27th of September of every year as Physicians Day.
September 2003, more than eight (8) years to date with initial placements of Mutual Aid Fund – Php4,194,572.00 and Physicians Fund – Php970,183.00 with a total of Php5,164,755.00. In January 2008, an additional placement from Doctor’s Inn Fund – Php1,000,000.00. The rate for time deposits ranges from 4% to 9.25% in interest which is relatively higher than the other banks. From September 2003 to March 31, 2012, the total interest earned is Php5,002,491.00 with an actual exposure of Php6,164,755.00. The total PMA Fund at the time of the Bank’s closure is Php11,167,246.00.

Control of Funds

All monies, time deposits and other placements are submitted monthly to the PMA Board of Governors, including interest rates amount and effectiveness dates. The PMA Board of Governors decides on the movement of placements of money from one PMA Depository Bank to another. The National Treasurer through the Committee on Budget and Finance may also recommend to the board subject to their approval.

Merger of Banks

The Banko Central ng Pilipinas has always been encouraging mergers of bank to make them stronger, as in the merger of BPI with Far East Bank of Jobo Fernandez, former Central Bank Governor. This merger made BPI the number one bank at that time. The PCIB merged with Equitable more than five years ago and was then named PCI- Equitable Bank. This was eventually merged with BDO making BDO the number one bank at the present. We can also mention the merger of I-Bank with Union Bank. Allied Bank is now number ten in bank listing but once the merger with PNB is finally completed, it will become the number four bank in the roster.

A merger with the EIB with BDO was afloat but this could not have been interpreted as an indication that EIB was in trouble. In fact, it meant that it would be a stronger bank.

Cannot Be Foreseen

What happened to EIB is unfortunate but there is no way it could have been foreseen. In other banks, there would be signs of illiquidity, such as instances when branches cannot comply with withdrawals.

As to what happened with EIB, there was no bank run noted. PDIC did not initiate its take over EIB. It was the bank that asked PDIC to take over.

EIB has 80,000 depositors nationwide. There are many big businessmen mostly Chinese as depositors, and surely they may have had access to top management. Still, their deposits were caught too in the closure of the bank. Information only circulated at the top levels and were kept there because business exigency and huge sanctions if word leaked.

Closure of EIB

The merger of the EIB with BDO was posted in the Breaking News of ABS-CBN website on April 13, 2012. It noted that the merger has been approved by PDIC. The PMA Committee of Budget and Finance met in April 21, 2012 and our placements were discussed. EIB declared a bank holiday on April 27, 2012.

Update

The latest news (PDI, September 19, 2012) which was reported by the PDIC, announced that two (2) separate biddings involving EIB have been set in October. The first bidding which is targeted at the first week of October is for EIB’s commercial banking license. The winning bidder will be given the right to operate a commercial bank. The second bidding on October 18 is for the branches and other assets of EIB. The buyer of EIB’s assets will assume the bank liabilities. With this welcome news, we are hoping that the funds of the Association will be eventually paid and recovered.

As of now, we already have claimed the maximum insured deposit of Php500K from PDIC.

Benefits and Assistance NOT Affected

The closure of EIB did not affect the issuance and payment of the claims of our
Aside from the free clinics, there was free bone density screening, eye consultation and refraction by Dr. Eduardo Sarabia after which they dispensed free reading glasses for the first 100 patients. Lay fora at the PMA Auditorium consisted of lecture on the Senior Citizen’s Law, Prostate Cancer Awareness and Osteoporosis. At the Manila Medical Society (President: Dr. Alejandro Y. Tan) several patients underwent out-patient cataract operations at the Manila Medical Society headquarters at M. de la Fuente St.in Sampaloc, Manila. At the Marikina Valley Medical Society (President: Dr. Nympha S.P. Mundin) male senior citizen patients underwent prostate screening through Digital Rectal Exam. The Senior Physician’s Night was celebrated per Component Society to honor their senior physician members.

On September 29 (Saturday) the 2nd Fe del Mundo Bulilit and Teen Health Workers Congress Day in partnership with Child (Bulilit) Health Workers Foundation and Community Pediatric Society of the Philippines was held at the De La Salle University in Lipa, Batangas. The activity was spearheaded by Dr. Benny Atenza, former PMA Governor of Southern Tagalog; Governor: Dr. Margarito Hernandez and all the Southern Tagalog Medical Societies: Laguna (President: Hector A. Alvarez); San Pablo City (President: Haydee H. Viray-Sarmiento); Tanauan (Dr. Sylvia P. Ramilo); Batangas (President: Dr. Alejandro M. Palines Jr.); Cavite (President: Dr. Arnulfo A. Zenerosa); Lipa City (President: Dr. Teresa C. Andal); Taal-Lemery (President: Dr. Anzia A. Sangalang); and Western Batangas (President: Dr. Arnel M. Atenza). There were approximately 500 delegates including teachers and parents. Delegates came from Zambanga del Sur, General Santos, Quezon Province, Cavite and Batangas. Some of the highlights of the day included a Quiz Bee and Cheer Dance Competition. Dr. Leo O. Olarte, PMA Vice-President attended the affair to lend support.

Component Societies comprising the Central Luzon Region (Governor: Dr. Wilfredo F. Batol) deserve special mention as they try their best to attend all the NCR Organizing Committee Meetings and the Opening and Closing Ceremonies despite heavy downpour.

All these activities at the National Capital Region are also replicated nationwide in coordination with the various Chapters of the nine Specialty Divisions. Reports keep pouring in from the Component Societies from the different regions, but limitations of space preclude including all the write-ups and pictures. I really marvel at the creativity and organizing skills of the Officers and Members of the various Component Societies in coming up with the various activities that highlight the multiple geniuses of the Filipino Physician. I could not have done it also without the able support of Dr. Marianne O. Dobles, PMA Secretary General and Dr. Albert C. Guervara, PMA National Treasurer.

The Closing Ceremony was held at the PMA Auditorium with Guest of Honor and Speaker on behalf of the DOH Secretary Dr. Enrique T. Ona, is DOH Undersecretary David J. Lozada, Jr. All the PMA National Officers and the Officers and Members of Component Societies present had a good time-line-dancing to live band music to celebrate a week well-spent.

In this day and age, our young soon-to-be physicians need role models they can look up to. It goes by different names: Character, Heart, Will, and the Mind of the Champion—but each mean the same thing. It is what makes us go the extra mile, and it is that which allows us to dig down and pull it out when we most needed it. It allows us to work hard, keep our focus under pressure, and stretch beyond our ordinary abilities when we have to.

I am talking about an inclusive, honorable, learning-filled, rollickingly self-motivated journey to fulfill our potential. It is the journey that we go through in our quest for excellence as professionals, as community organizers and social mobilizers... a journey that does not end after this year’s Celebration.

My warmest congratulations to this year’s Component Society Officers and Members who contributed to the success of our Medicine Week Celebration nationwide! Maintain the spirit of transformation and keep up the good work! Thank you everyone for another milestone successfully hurdled!
In the Beginning...

In late Spanish era there were already health groups in Manila although limited to doctors, sanitaries and nurses only. There was also the Colegio Medico – Farmaceutico de Filipinas. On September 29, 1898 a board of health was created to oversee the improvement of Health and Sanitation of Manila.

When William Howard Taft was appointed civilian governor general, he assigned Major John Rich Mc Dill, M.D., Brigade surgeon of the 7th Army corps operation in Cubao, to organize a medical society in order to hasten delivery of medical assistance from the American Red Cross. Thus, on July 9, 1902 the Manila Medical Society was founded and Dr. Mc Dill became the first president.

To be affiliated with the American Medical Association, a prerequisite for recognition and eligibility for Congressional allocation of funds for health, the affiliating Association must be in the category of a national level. Dr. Mc Dill called a meeting of the MMS and members of the Colegio, who were mostly MMS members anyway and merged them into the national Philippine Islands Medical Association (PIMA) on September 15, 1903 with only MMS as its component society. Societies from Cavite, Bulacan, Rizal and the rest were eventually formed.

Highlights by Decade

First Decade 1903-1913 –
- Expanded the MMS to be the Philippine Island Medical Association
- Worked for the affiliation of PIMA with the American Medical Association and recognition with the U.S. Congress
- Encouraged all physicians to unite with PIMA attracting them through CME
- Surveyed the magnitude of all Communicable Diseases and formulated strategies on how to control them
- Organized the First PIMA Annual Convention
- Instigated government to form a second Medical School with a Division on Tropical Medicine, Malnutrition, Tuberculosis
- Enlarged the Board of Health into the Bureau of Health
- PIMA worked for the establishment of the following:
  1905 – St. Paul’s Hospital
  1906 – Mary Johnston Hospital
  1910 – Philippine General Hospital
- Started education of the public on hygiene, sanitation and immunization
- Expanded the municipal laboratory of Manila into the Bureau of Research Laboratories which produced farms and developed sera, vaccines and biological chemicals were developed

Second Decade 1913-1924 –
- PIMA instigated the establishment of the Santolan Sanitarium in San Juan del Monte for Treatment of Tuberculosis
- Initiated survey on Typhoid Fever epidemics and their successful control
- Initiated the prophylactic treatment of hookworm and the anti-cholera vaccinations
- Established the first PIMA Journal to facilitate the spread of medical communications to physicians
- Lobbied and succeeded in urging the establishment of Dispensary services all over the country

Third Decade 1924-1934 –
- Organized the House of Delegates where important health issues were discussed and PIMAs plan of action
- Created the PIMA National Council of Research. Urged legislation to control influx of foreign doctors. Created the PIMA Committee on Drugs and Patients; Created the PIMA Committee on Maternal Mortality
- Managed to convince Governor General Theodore Roosevelt to require Philippine government to consult PIMA on appointments to the Board of Medical Examiners
- Amended the American Code of Ethics in existence then and produced the PIMA Code of Ethics
- Initiated and was successful in promoting the setting up of cancer hospitals and facilities
- 1939 – PIMA congressman managed to produce legislation in the creation of the Department of Health
- Created the Liga Anti cancerosa de Filipina to help government fight cancer
- Created the Women’s Auxiliary
Fourth Decade 1934-1944 –

Most of the period was under the Japanese occupation and PIMA did not want to participate with the government however during this period the Philippine Islands Medical Association was amended to be the Philippine Medical Association.

PMA had legislation passed – Nationalization Law which provided that only Filipino Physicians can practice medicine in Philippines.

PMA discovered Beri-beri as the No. 1 killer of newborns hence doctors prevented breastfeeding on women with signs of the disease.

Fifth Decade 1944-1954 –

Researched, discovered and eradicated Beri-beri which was the cause of high infant mortality. Tiki-Tiki was invented and breastfeeding was prevented on mothers with signs of Beri-beri. Research on conditions why there’s high mortality on “below 5 years old children.

Creation of the Board of Examiners in Medicine and Surgery.

PMA was admitted as a member of the World Medical Association, an honor at the time.

Sponsored the idea of a Confederation of Medical Association of Asia and Oceania.

Succeeded in making President Elpidio Quirino to Proclaim September 15 as the Medicine Day and later President Magsaysay was prevailed by PMA to make it Medicine Week September 15-21.

In 1957, Proclamation No. 330 was signed by President Ramon Magsaysay declaring September 15-21 as Medicine Week.

In 1966, Proclamation No. 439 was signed by President Carlos P. Garcia declaring the 4th week of September every year as Medicine Week and authorizing the PMA to take charge of the observance thereof.

Sixth Decade 1954-1964 –

Advocated the creation of the Food & Drugs and Cosmetic Board and got it passed by Congress. This became the Food and Drugs Administration.

PMA interceded with the U.S. government in favor of Filipino doctors who were being sent home when they failed in the Executive Council for Foreign Medical Graduates (ECFFMG).

PMA started the idea of Medical Care which became the Philippine Medical Care Commission, then became Philhealth.

PMA created the MARIA project which dispersed physicians to rural areas without doctors.

PMA acquired its present real estate.

PMA had a Dangerous Drug Board approved and a Drug Rehabilitation Center.

PMA produced the Professional Fee Guidelines.

PMA created Task Force Caduceus which was assisted by police and courts sanctions on missions made against abortionists, malpractice and quackery.

Eight Decade 1974-1984 –

Got the support of the Philippine Board of Medicine to cite Media for unethical and false newspaper advertisements.

Founded the Association of Pediatric Societies in Southeast Asian Region in 1977.

PMA issued the following Public Declarations:

a. Dangers of Tobacco and smoking
b. The need for the military to protect doctors in areas of conflict
c. PMA objection to the Ministry of Health policy of undue restrictions on drug importation

PMA issued a stand against violations of Physicians freedom to practice medicine in areas of conflict and voiced opposition to the detention and kidnapping of physicians in rebel infested communities.

Increased PMA participation in Government projects – DO, BFAD, PHIC, PRC, BIR

Instituted Closure of Abortion Clinics and apprehension of Abortionists.

Ninth Decade 1984-1994 –

Return of internship to the Colleges

PMA advocated reforms in the undergraduate medical curriculum and the return of internship to the Medical
September 23, 2012 (Sunday)
7:00 A.M.—Wreath Laying Ceremonies
   Rizal Monument, Luneta
8:00 A.M.—Opening Ceremonies
   Guest Speaker: Hon. Nemecio T. Gako, M.D.
   ASec, Department of Health
   Hyatt Hotel, Manila
11:00 A.M.—Thanksgiving Mass
2:00 P.M.—Simultaneous Lay Fora on Exercises, (Aerobics and Strength exercises), Healthy lifestyles, Nutrition, Breast and Cervical Cancer Awareness

September 24, 2012 (Monday)
EARTH DAY—Tree planting, or any other activity in support of PMA Advocacy Programs as anti-smoking, or clean air programs. Lay fora on Waste Management at Home
8:00 A.M – 12:00 NOON—Daily Free Clinic Screening Tests
   PMA Auditorium and different Component Society venues

September 25, 2012 (Tuesday)
CHILD ADVOCACY DAY – Lay Fora – Breastfeeding, Immunization, Newborn Screening, Childhood Diseases
ELIMINATION of the Singing Physicians Contest
September 26, 2012 (Wednesday)

CARDIO-METABOLIC DAY — Lay Fora — Healthy Lifestyle (Anti-smoking, Anti-Obesity) Diet, Aerobics and Strength Exercises

6:00 P.M. — Grand Finals 9th PMA Singing Physician’s Contest
PMA Auditorium

September 27, 2012 (Thursday)

MOTHER’S DAY — Lay Fora — Women’s Health: Cervical and Breast Cancer Teenage Pregnancy; Drug Addiction

34th Physician’s Day Anniversary and APMA 30th TOPICS Awards (The Outstanding Physicians In Community Service)

September 28, 2012 (Friday)

SENIOR CITIZENS’ DAY - Lay Fora—Osteoporosis (TAI—CHI; Brisk Walking Alzheimer’s Disease, Senior Citizen Law, Prostate Cancer

SENIOR PHYSICIAN’S NIGHT (per component medical society)

September 29, 2012 (Saturday)

Bulilit Congress (Dela Salle, Lipa, Batangas)

Closing Ceremonies and Fellowship Night
Guest Speaker: Hon. David A. Lozada Jr., M.D.
USec, Department of Health

Free Medical and Dental Clinic conducted at the PMA Indigency Center and PMA Auditorium during the Med Week.

Lay forum about waste segregation by Dr. Metodio Palaypay.

Tree planting done by MVMS

9th PMA Singing Physicians contest Finals held at the PMA Auditorium.
At a young age, she was a devoted catechist until she became a full time mother of 8 children and professor of Pharmacology, Anesthesiology and Clinical Epidemiology at the UST Faculty of Medicine and Surgery. A full pledge champion in medication safety and one of the most veritable academic icon in the field of medicine. The outstanding “Thomsonian” is active not only in the Philippine Society of Society of Anesthesiologists but also in the Philippine Medical Association holding various positions which is in all sincerity a real challenge!

She was cited for her exemplary achievements and exceptional professional competence with integrity in the field of ORGANIZED MEDICINE as two-term PRESIDENT, Manila Medical Society (MMS) 2002-2004; two-term PRESIDENT, Society for Obstetric Anesthesia of the Philippines (SOAP) 2000-2002; two-term PRESIDENT, International College of Surgeons Alliance (ICSA) 2001-2003; PMA GOVERNOR for Manila 2004-2005; VICE-CHAIR, Board of Examiners and MEMBER of the Board of Trustees, Philippine Board of Anesthesiology (PBA) 2002-2007; and two-term PRESIDENT, Philippine Society of Anesthesiologists, Inc. (PSA), 2010 and 2011. She was also commended for her effective discharge of the profession’s social responsibility through her various ADVOCACY CAMPAIGNS on drug safety and patient safety, and on women’s health; for her various COMMUNITY SERVICE rendered over the last 24 years as volunteer Anesthesiologist in medical missions; for her significant contributions to the advancement of the profession as RESEARCHER, having authored and co-authored numerous research papers that garnered several awards and recognitions, 14 times first prize, 5 times second prize, and 4 times third prize; her influence and contributions in her fields of specializations as ANESTHESIOLOGIST, PHARMACOLOGIST, CLINICAL EPIDEMIOLOGIST and MEDICAL EDUCATOR; her professional expertise as manifested in her awards from various award-giving bodies, i.e., UST Gold Series Awards for Excellence in Research (2003-2009), UST DANGAL Award (Gawad Santo Tomas) for Research in the Health Sciences (2003); the PMA Most Outstanding Physician Awards (2003 and 2004); the PMA Leadership Awards (2003 and 2004); the APMA TOPICS Award in Community Service (2006); the USTMAA THOMAS Award for Leadership in Health and Health-Related Issues (2006); UST QUADRICENTENNIAL DANGAL Award (Gawad Santo Domingo) for Community Service (2011); the Outstanding Achievement in the Pain Research for the Basic Science from the International Association for the Study of Pain (IASP) for her part in the establishment of the first fully online course in Masters in Medicine-Pain Management (the first in Southeast Asia) for the University of Santo Tomas in collaboration with the University of Sydney; and the STS. COSMAS...
and DAMIAN Award as Outstanding Thomasian Physician (2011). Dr. Calimag also exhibited an excellent academic record – graduated from the UST College of Science with a B.S. (Pre-Med) **Magna cum laude** (1977); from the UST Faculty of Medicine and Surgery with the grade of **Benemeritus** in the Oral Revalida (1981); from the University of the Philippines College of Medicine with a Masters in Clinical Epidemiology under a scholarship grant from the Philippine Council for Health Research and Development; and from the UST Graduate School with a Doctorate in Educational Management degree **Summa cum laude**. Truly, a proud and accomplished FILIPINO PHYSICIAN in word and in deed!

Garnering the **top-rank** among 39 other outstanding professionals after a rigorous search conducted by the PRC. Members of the panel of judges: Justice Arturo B. Buena (Chairman) and Justice Apolinario D. Bruselas Jr. and Justice Jose C. Reyes Jr. (Members), Dr. Calimag was adjudged the “2012 MOST OUTSTANDING PROFESSIONAL AWARD IN THE FIELD OF MEDICINE.”

The **PROFESSIONAL REGULATION COMMISSION** (PRC) in its 39th Anniversary Celebration and Awarding of Outstanding Professionals held at the Fiesta Pavilion, Manila Hotel on June 22, 2012 bestowed the **FIRST ERIC NUBLA EXCELLENCE AWARD**, recognition intended to accord distinct honor to a professional who surpassed the qualification standard based on the criteria set forth to be an outstanding professional to Maria Minerva Patawaran-Calimag.

**PMA, A Partner in the Multi-sectoral Coalition Advocating Healthy Lifestyle**

Last September 21, 2012, the PMA National Officers and different Component Society’s Officers and Members of the NCR participated in a program of Aerobics, dances and exercises at the People’s Hall of Quezon City Memorial Circle.

The event was led by Center for Health Development NCR/Metro Manila Integrated Non-Communicable Disease Program Coalition (MIND-PC) during its anniversary celebration. With the theme “Mind Your Health: Unite to Fight Non-Communicable Diseases“, the coalition aims to involve the citizenry into awareness and prevention of the different NCDs such as hypertension, cardio-vascular diseases, diabetes, overweight and obesity.

The event was graced by the Department of Health Secretary Dr. Enrique T. Ona.

**Operation Bukol**

The Philippine Medical Association, together with the Philippine College of Surgeons-Metro Manila Chapter (PCS-MMC) and Quezon City Medical Society (QCMS), conducted 79 minor surgical procedures tagged as "Operation Bukol" at the PMA auditorium last September 13, 2012.

The day started with a short program hosted by Dr. Jose Ravelo T. Bartolome, Secretary of PCS-MMC. Dr. Ma. Lilybeth Pascual-Naguit, QCMS Treasurer, gave the invocation. Warm messages of gratitude were delivered by PMA President Dr. Modesto O. Llamas and Dr. Rosario B. Cruz-Dalida, QCMS President.

A Lay Forum on the Diagnosis, Prevention and Treatment of Skin Cancer was exquisitely lectured by Dr. Hector M. Santos, Jr., President of PCS-MMC.

Dr. Napoleon B. Alcedo Jr., PCS-MMC Vice-President capped off the program with his closing remarks.

Now on its eighth year, Operation Bukol is usually held before the annual PMA Medicine Week Celebration, according to Dr. Marianne Dobles, PMA Secretary.
A reliable Health Information System (HIS) is essential for better healthcare delivery and better health outcomes. HIS is an integrated effort to collect, process, report, and use health information and knowledge to influence policy making, program action, and research. Our political leaders, government policy makers in the different agencies particularly in the health sector, the healthcare workers in the field, civil society and NGO’s, Donor Agencies, and Media all need a reliable health data to know how well the health system in the country is doing.

The Department of Health’s thrust is Nationwide Health Information System (HIS) to ensure the sustained generation, analysis, communication, and use of reliable, timely, and accessible health information for all healthcare stakeholders. It is envisioned that the

Philippine HIS will move the health sector into an environment where health information can easily be available and accessible and services are efficient and effective. This could be the best tool to achieve Philippine Health Care reforms that will address widening inequity in health, misdistribution of health human resources, high out-of-pocket payments by patients, disparity in health service delivery and utilization, low health expenditure by the government, and most importantly, poor quality of health data and information being generated from our rural health units for decision. These health care reforms will therefore make government health policies more responsive the health needs of the communities, and make health care service delivery become more efficient and people-centered.

**Vantage Point**

by Bayani B. Tecson, M.D.
PMA Governor Northwestern Luzon Region

A reliable Health Information System (HIS) is essential for better healthcare delivery and better health outcomes. HIS is an integrated effort to collect, process, report, and use health information and knowledge to influence policy making, program action, and research. Our political leaders, government policy makers in the different agencies particularly in the health sector, the healthcare workers in the field, civil society and NGO’s, Donor Agencies, and Media all need a reliable health data to know how well the health system in the country is doing.

**Quezon City Medical Society**

by Ferdinand E. Cercenia, M.D.
PMA Governor Quezon City Region

The Quezon City Medical Society started the quarter with a Strategic Planning and Team Building Workshop at Taal Vista Hotel Tagaytay City. This was followed by the celebration of 62nd Foundation Day Anniversary with gift giving to Balay Kahibalo Day Care Center and Senior Citizens of Brgy. Sta. Monica. On August 12 to 16 members of the QCMS led by Dr. Cruz-Dalida, the President and Dr. Cercenia, PMA Governor undertook a medical mission in Malabon and Calumpit Bulacan. This was highlighted by a Doctors on Boat Mission at Maysulay by Dr. Dalida. On September 13 the QCMS, PMA & PCS Metro Manila Chapter conducted the 8th Operation Bukol at the PMA Auditorium. This was followed by the PMA Foundation Day on September 15 wherein the QCMS was in charge of the program including the Wreath Laying Ceremonies. The QCMS also participated actively during the 55th National Medicine Week September 23-27, 2012. After the Wreath Laying Ceremonies at Luneta Park members of the QCMS proceeded to Hyatt Hotel where the society is in charge of the Opening Ceremonies. At the start of Medicine Week Activities members of QCMS undertook Tree Planting/Urban Farming, Lecture on “Waste Management at Home”, “Dengue & Leptospirosis”, Livelihood Program: Pera sa Papel & Lay Forum on “Cervical Cancer” at SM North Edsa. September 25 was Child Advocacy Day. The QCMS held On-the-Spot Drawing Contest for Public Elementary School, Lay Forum on “Breast Feeding, Immunization & New Born Screening” other activities like ECG, DRE, Dental & Cataract Screening, Bone Densitometry, Cholesterol determination and Free Medical Consultation, all were held in the PMA Auditorium. On September 26 a Healthy Lifestyle Dance Exercise was held at PMA grounds based on the latest dance craze “Gangnam Style”. The

PMA Singing Physicians Contest was held in the evening with Dr. January Ramirez as QCMS representative. On the last day of Medicine Week September 27, several activities were held namely Lay Forum on “Teenage Pregnancy” by Dr. Lilybeth Pascual-Naguit and “Drug Addiction” by Dr. Angela Cruz with Pap Smear at Brgy. Baesa, Quezon City. Preventive Health Committee had a Lay Fora on “Dengue” and donation of Walis Tingting and Dust pan at Pres. Cory Aquino Elem. School Batasan. In the evening the 30th TOPICS Awarding Ceremonies & 34th Physicians’ Day Celebration was held in Unilab wherein the Immediate Past President Dr. Realiza G. Henson is one of this year’s awardees.
Southern Tagalog
by Margarito D. Hernandez, M.D.
PMA Governor Southern Tagalog Region

The First Southern Tagalog Regional Council Meeting was held last August 4, 2012 at the Our Lady of Caysasay Medical Center, Conference Room, Lemery, Batangas. Headed by Governor, Margarito Hernandez, M.D. and STAMP President Jose P. Santiago, M.D.

The Southern Tagalog Region has been vigilant all through the years of the unification of the region thru instilling good camaraderie amongst its leaders and members.

The day affair started with a review of the PMA Mission and Vision, PMA and Component Society concerns and activities.

Dra. Sangalang was appointed Secretary and the following were elected officers: Treasurer-Dr. Ariel Atienza, Auditor-Dr. Hector C. Alvarez and PRO-Dr. Arnulfo Zenarosa. Meetings are scheduled monthly. Different committees were presented the upcoming Dr. Jose Rizal Awards, wherein STAMP is the over-all chair was also discussed.

Together with the vision of the PMA President Modesto O. Llamas, everyone has been equipped to gear for unification of the region and all look forward to a challenging but blessed year ahead! Mabuhay ang STAMP! Mabuhay and PMA!

North Central Mindanao
by Eileen G. Aniceto, M.D.
PMA Governor North Central Mindanao Region

I govern one of the smallest region, having only five component societies, the Misamis Occidental Medical Society—Oroquieta, the Misamis Occidental Medical Society—Ozamis, the Lanao del Norte Medical Society, the Lanao del Sur Medical Society and the Iligan Medical Society. Given the distance between Oroquieta, the farthest component society and Iligan City, where I am based, communication is largely based on the internet and cellphones. It is not ideal, but better than nothing.

The MOMS-Oroquieta is headed by Dr. Karen Conol-Salomon who is serving her second term as president. During the Sendong aftermath, under her governance, MOMS Oroquieta participated in the Oplan Doc Santa, a PMA grand medical mission held in Iligan City. She and her team sent financial aid as well as medicines and goods for the Sendong survivors. During the most recent habagat disaster that struck large areas in Luzon, the MOMS-Oroquieta has been one of the few component society that responded with financial assistance. The enviable generosity despite the fact that the main priority of the society is to complete construction of their MOMS building which was started more 20 years ago, and which has been delayed due to lack of funds and 2 separate incidents of burglary.

The MOMS-Ozamis is headed by second-term Dr. Jessie Ayop who showed support for the Sendong survivors by participating in the Oplan Doc Santa and providing financial aid and medical missions. His competent society gave one of the most grandiose induction ceremony I ever had the chance to attend as governor.

The LNMS under the leadership of the immediate past president Dr. Basiledes Valencia participated in the Oplan Doc Santa. He was able to provide a good and strong contingent in the Oplan Doc Santa event. Dr. Medel Tomada promises to improve participation from his members and welcomes the hosting of the regional assembly this coming October 28.

The LSMS’ immediate past president Dr. Nariman Lao Taha, is one of the most active presidents. She has shown support for the Sendong medical missions. The current president Dr. Raquelina Benito vowed to make her society more relevant to its members and to the PMA organization by increasing scientific meetings, improvement in availability of funds and service of their members. She wants to improve coordination with government and NGO on implementation of health related projects, improving health information dissemination and creation of committee on disaster management.

The Iligan Medical Society has been led through the disaster stricken times by its president Dr. Darlene dela Cruz. The component society’s efforts has been concentrated on providing medical missions and participating in the city’s health related projects. Under the leadership of Dr. Malou Vega, we conducted medical missions to the communities affected by Sendong. The Iligan Medical Society has a project which aims to bring medical assistance to a whole new level, the Bahay Kalusugan. This program aims to provide health evaluation, and preventive care to the members of the community. IMS believe that the answer to rising cost of health care is to shift from sick care to preventive care. For the past 5 years, the thrust of the society is to complete the Bahay Kalusugan building which will house the program. Our most recent fund raiser was a successful funrun the 2nd RX run which also served as the opening event of the Medicine Week activities.


I am glad to have witnessed extraordinary generosity and actions from the members of these medical societies and proud to have served as their governor through these times.
APMA CELEBRATES 66th FOUNDATION DAY

After more than six decades of coexistence, the Auxiliary to the Philippine Medical Association (APMA) remains in its objective to assist the Philippine Medical Association (PMA) in attaining its goals and objectives, as well as foster friendship and camaraderie among physician’s families and render community service in areas related to health. APMA continues to support the PMA infrastructure projects such as the reconditioning of the ground floor of the PMA Administration Building through its various fund-raising initiatives.

The well-attended Foundation Day celebration culminated at the PMA auditorium on July 25, 2012. It was highlighted by the traditional cake and champagne ceremony as it paid tribute to its past presidents. A cultural dance number was rendered by select officers lead by APMA President Ms. Hermie Lorenzo, Ms. Ellen Uy and Ms. Cepci Galicia. The event was capped by words of congratulations and well wishes by PMA President Modesto O. Llamas.

The current set of officers resolved to reach out and reinvigorate the inactive chapters and implement more meaningful programs and activities encouraging interaction and more participation. APMA looks forward to a vibrant organization strengthened by mutual support and care and render valuable assistance to the PMA.

“A genuine leader is not a searcher for consensus but a molder of consensus.” - Martin Luther King Jr.

Our Code of Ethics states:

“Colleagues, legitimate children who are minors, or even those who are not minors but mentally incapacitated and dependent upon our colleague for support, should be given the courtesy. However, this shall not apply to plastic or cosmetic procedures unless the cosmetic service is for reconstructive procedure for conditions resulting from diseases or accidents. In case of package deals, professional fees included in said package shall be waived.”
PMA History...
(continued from page 13)

PMA opposed Government restriction on the right of physicians to practice in areas of conflict.

Succeeded in including the first normal delivery as compensable by the Medicare Commission.

Fought for the restoration of PMA representation in the PMCC Return of internship to the Colleges.

Assailed the Government on the local Government Code, Revised.


Warned the public on deterioration of health care with the HMO and MHO.

The PMA created the Centennial commission that will take charge of the 100th year Anniversary celebration of the Association.

Established the First Joint PMA-APPA Scientific meetings.

PMA created the Association of former PMA Presidents.

PMA expanded the PMA Indigency Center with funds from outside sources.

PMA established a dental clinic, prenatal care, and baby well clinic.

PMA opposed vehemently the Generic Law which abrogated the right of Physician Autonomy to prescribe the best medicine considered for one’s patient. Objected strongly to Malacanang in approving the Generic Law that unethically allowed pharmacists or drugstore clerks to make substitutions on doctor’s prescription. PMA obtained the support of MASEAN, CMAAO and the World medical Association in refuting Malacanang’s Position. PMA in desperation brought the Generic Law opposition to the Supreme Court but eventually lost the case. Therefore it is incumbent to subsequent leadership of the PMA to carry on “conscious objection until Physician autonomy of the doctors will be complied by the government. In the World Medical Association where there are more than one hundred national Medical Associations active in membership, only in the Indonesia Medical Association and the Philippine Medical Association are there generic laws violating the ethical right of physician autonomy.

Tenth Decade 1994-2004 –

PMA engaged in ecology and zero waste projects of Government.

Opposed and succeeded in preventing governments plan of compulsory community service doctors after graduation.

Opposed BIR plan to withheld Tax from professional fees.

PMA participated in Party List elections.

Celebrated the Centennial Anniversary of PMA.

Eleventh Decade 2004-2012 –

PMA won the Most Outstanding Accredited Professional Organization Award for two consecutive years, 2008 and 2009. The award was given by the Professional Regulations Commission.

To help victims of calamities like the Ondoy, Pepeng, and the recent habagat, the PMA conducted medical missions in the affected areas in cooperation with other organizations of Health Professionals, pharmaceutical companies, and government institutions like DSWD, PNP.

PMA implemented the computerization of the membership and CME data of the members.

The Philippine Health Insurance Corporation (PhilHealth) has appointed the Philippine Medical Association (PMA) to register physicians for PhilHealth accreditation as a professional health care provider.

In Memoriam

“He, who has gone, so we but cherish his memory, abides with us, more potent, nay, more present than the living man.” ~Antoine de Saint-Exupery*

“Memory is a way of holding onto the things you love, the things you are, and the things you never want to lose.” ~From the television show The Wonder Years*

PMA FORMER PRESIDENTS

Concordia Pascual, M.D. 1994-1995

Vicente JA Rosales, M.D. 1983-1984

Perla D. Santos-Ocampo, M.D. 1981-1982

Jose Galvez Jr., M.D. 1968-1969
The people started trickling in and converging at around 6AM…the venue – the Rizal shrine at the Luneta Park…the occasion – the kick-off activity of the PMA Annual Medicine Week Celebrations…the scene was quite familiar, it seemed like I was reliving the event all-over again … inching slowly towards the steps of the Rizal Monument…in cadence with the uniformed men of the Navy…the wreath-laying and 21-gun salute in honor of Jose Rizal, the complete physician and our national hero. I am heading the PMA Medicine Week Celebrations for the second time after 10 years. Many things have transpired since then…even the Hyatt Hotel has moved from its original location in Roxas Boulevard beside San Juan de Dios Hospital to its present site at Pedro Gil St. corner M.H. del Pilar St. I scanned the faces of those present….there were new and younger faces – the new breed of doctors…and there are many familiar faces – more mature and wisier through the years. I sensed the same palpable passion and fervor in each and every member and in each and every Component Society that participated.

The annual celebration of Medicine Week on the fourth week of September was established by virtue of Presidential Proclamation No. 439 issued by President Elpidio Quirino in 1957. This year’s Annual Medicine Week Celebration was scheduled September 23-29, 2012 with the theme “PMA: Nagkakaisang Manggagamot tungo sa Kalusugang Pangkalahatan”. I was happy to note that the daily themes that we introduced ten years ago have endured the test of time, but the diseases covered have expanded. The capstone of this year’s event is the Health Awareness Lay Fora centered on the following themes: Healthy Lifestyle, Cardio-Metabolic Diseases, Children and Women’s Health, Cancer Awareness, Drug Addiction, Teenage Pregnancy and the PMA Advocacy Programs on Anti-Smoking, Clean Air and Anti-Pollution, Greening and Waste Management. In developing countries such as ours, the adage, “An ounce of prevention is better than a pound of cure” certainly makes sense. At 10:00am, our PMA President and Honorary Chair of the Medicine Week Celebration, Dr. Modesto Llamas, officially declared the 55th Medicine Week Celebration open by ringing the ceremonial bell.

The Wreath-laying Ceremony was ably organized by the Pasay-Paranaque Medical Society (President: Dr. Ludovico Mariano, Vice-President: Dr. Jose Florencio F. Lapeña, Jr., Governor: Dr. Eileen Christine B. Habawel)). The Opening Ceremony followed at the Hyatt Hotel and Casino which was organized by the Quezon City Medical Society (President: Dr. Rosario B. Cruz-Dalida; Governor: Dr. Ferdinand E. Carenis). Guest of Honor and Speaker on behalf of the DOH Secretary Dr. Enrique T. Ona, is DOH Undersecretary Dr. Nemesio T. Gako. The PM activities were devoted to Lay Fora in selected malls.

September 24 (Monday) is Earth Day at the NCR was organized by Caloocan City (President: Dr. Panciano Aberin) and Marikina Medical Society (President: Dr. Nympha S.P. Mundin) with Tree Planting activities at the Riverpark in Marikina which was replicated nationwide. Dr. Methodo Palapay lectured on Environmental Sanitation and Waste Segregation and Management at the PMA Auditorium. Other Lay Fora topics tackled nationwide were on preventable diseases such as HIV, dengue, leptospirosis, typhoid, and hepatitis.

September 25 (Tuesday) is Child Advocacy Day organized by the Quezon City (President: Dr. Rosario B. Cruz-Dalida) and Parañaque Medical Society (President: Dr. Virginia P. Crisostomo, Governor: Dr. Julio P. Javier II). The Lay Fora centered on breastfeeding, immunization and the value of newborn screening.

September 26 (Wednesday) is Cardio-Metabolic Day organized by the Malabon-Navotas (President: Dr. Filipina B. Tan) and Pasig City (President: Dr. Mylah L. Tuazon). Lay Fora – Healthy Lifestyle (Anti-Smoking; Anti-Obesity); Healthy Diet; Aerobic and Strengthening Exercises; screening for cholesterol, blood sugar, ECG, x-ray.

The Pharex-PMA Singing Physicians 2012 Grand Finals Night was hosted by the Pasay-Parañaque Medical Society (President: Dr. Ludovico Mariano and Vice-President: Dr. Jose Florencio F. Lapeña, Jr.) Ten finalists nationwide competed for the chance to become the Singing Physician 2012 The distinguished members of the Board of Judges were well-known Voice Mentor and Professor Kitche Molina (UP Conservatory of Music), Professional Singer/Performer Lucky Robles, and Lounge/Event Singer Judith Ann Santos. Adjudged winners were: Dr. Kim Dicen Sanchez (First Prize), who sang “Part of Your World” from The Little Mermaid; Dr. Diane Sarah Donacoo (Second Prize) who sang “Colors of the Wind” from Pocahontas; and Dr. Nympha Fernando (Third Prize) who sang “Reflection” from Mulan.

September 27 (Thursday) is MOTHERS’ & WOMENS’ HEALTH under the auspices of the Manila Medical Society (President: Dr. Alejandro Y. Tan, Governor: Dr. Lakadula A. Elayda) and the PMA Indigency Clinic. Forty-six women had PAPS Smear and the Philippine Society of Pathologists interpreted the results of the PAPS Smear. Lay Fora were on Cervical Cancer; Breast Cancer and Teenage Pregnancy.

The Auxiliary to the Philippine Medical Association (APMA) headed by Mrs. Herminia A. Lorenzo, R.N. awarded The Outstanding Physicians in Community Service (TOPICS) at the UNILAB Bayanihan Hall in Pasig City to this year’s winners: Dr. Erlinda de los Reyes (Canlaon Medical Society), Dr. Benjamin Alaban (Cavite Medical Society), Dr. Ana Liza Lanuza (Davao Medical Society), Dr. Realiza Henson (Quezon City Medical Society) and Dr. Lina Fe del Rosario (Pasig Medical Society).

September 28 (Friday) was Seniors Day organized by the Makati Medical Society (President: Dr. Noemi M. Sarabia).
Format Proposals for CME Scientific Topics for 2013

By RAMON F. ABARQUEZ, JR., M.D.
Chairman, Commission on Continuing Medical Education

Introduction:

As part of the issues to be discussed during the 2013 Scientific Meeting and Annual Convention of the PMA, the focus shall be on “medical risk stratification” and “lay preventive measures” concerning specific “hot” and “national interest” issues. Among other issues with national perspective is the Sin tax bill and the RH bill. As a format for discussion, background data regarding why such issue is identified, how did the problem develop and what lay information can be given as basis for preventive measures.

For example, in the Inquirer, Sunday issue (July 29, 2012), 30 UP economists’ “talk of the town” article entitled “Population, poverty, politics and RH bill” concluded that “the RH bill is pro-poor and authentically pro-life and pro-family”. Agree or not, PMA clout is concerned with national perspective is the Sin tax bill and the RH bill. As a format for discussion, background data regarding why such issue is identified, how did the problem develop and what lay information can be given as basis for preventive measures.

But from a public health and sanitation issue, RH bill is “pro-quality of life”. As repeatedly emphasized, the target group that would likely benefit most is the depressed, low-income, marginalized segment of our society who are deprived of easy access to information and resources and probably readily gullible to any proposal regarding their dismal health and sanitation issues.

From a medical viewpoint, promoting health is a complex issue involving among others aside from the doctors, elected officials, religious groups, civic groups, the military, the academe, NGOs, industries, community ‘baranggays’, etc. More importantly families, if not clans with varied degrees of relationships, share the same abode wherein news updates can be transmitted “by word of mouth.” Child bearing may even be a competitive past-time?? This scenario is a fertile opportunity to be hopefully addressed by the RH bill. How relevance then is the RH bill?

ISSUE BASIS: Heart and Circulation Mortality, a PMA and National Concern:

For the past decades, heart and circulation diseases remain the leading cause of death with prolonged and repeated hospitalization or consultations here and abroad. In China for example, heart failure (HF) prevalence at 16.9% (1995–1999) increased to 29.1% (2005–2009). (China Med. J. 2010;123;646)

In USA, Medicare HF 30-day unadjusted mortality rates decreased (1993-2008) but post-discharge mortality rates, 30-days post-discharge re-admission rates and admission into nursing home facilities have increased. (JAMA 2010;303;2141)

Even the disadvantage child under 5 years are shorter, with 1984 having a birth weight (Lancet 2007;369;60) and lowest public health score card is in developing countries where the Philippines is categorized (Lancet 2008;372;1988) thereby accounting for very high CV mortality and morbidity. Even in affluent and developed countries the risk of low birth weight has dire consequences.

RISK STRATIFICATION: Birth Weight Affects Heart and Circulation Diseases:

The highest prevalence of low birth weight (McGregor, Lancet 2007; 369: 60–70) and lowest public health score card is in developing countries where the Philippines is categorized (Lancet 2008;372;1988) thereby accounting for very high CV mortality and morbidity. Even in affluent and developed countries the risk of low birth weight has dire consequences.

Nutritional Risk Factors: Nutrition risk factors for heart and circulation diseases, i.e., hypertension, diabetes, underweight, smoking or the disadvantage child under 5 years are highest in developing countries. (Lancet 2007;369:60) In Cebu, with 33 baranggays in 17 urban and 16 rural sites, children born in 1983-1984 had bi-monthly screening for the first two years of life. During 1991,1994,1998, 2002, 2005 or till age 21 years, those born under-weight are shorter, with more central or “dirty” fat leading...
to adulthood obesity and with the highest adolescence blood pressures. *(Asia-Pacific Population Journal, 2008;23:39)* Those with the lowest birth weight and a family history of obesity in the USA provided the highest risk for “metabolic syndrome” as a causative factor for atherosclerosis. *(Circ 2012;125:902)* Such underweight issues at birth, due to compensatory “catching-up parents’ attitude”, resulted in the highest obesity rates among Filipino Americans compared to other ethnic Americans. *(JACC 2010;55:966)* More importantly, “metabolic syndrome” was highest (25%) among Filipino or Chinese Americans. *(Prev Chronic Dis 2007;4:1)* Thus, as adolescence weight gain increases, childhood all-cause mortality became higher. And, the childhood survivors are at a greater adulthood heart and circulatory disease risk.

**Birth Weight Implications as a Heart Failure Risk:** Low birth weight is also related to new-onset diabetes development based on a Cincinnati Children’s Medical Center study from 1980 to 2007. *(EHJ 2009;30:1930)*. More importantly, independent of birth weight and gain, the smoking addiction can start at childhood. Passive or active smokers consuming a pack or 1 ½ pack of cigarettes daily have 3-4 times diabetes risk as well as obesity and LVH risk. *(EHJ’99;20:1769, Ann Intern Med’00;133:183)* Diabetes can be a single risk for adult heart failure (HF). In the Strong Heart 12 years Study, after adjusting for age, sex, obesity, central fat distribution, hypertension, antihypertensive medications, prevalent atrial fibrillation, GFR, urinary albumin/creatinine ratio, plasma cholesterol, HbA1c, smoking habit, alcohol use, educational level and physical activity, diabetes was independently associated with a 2-fold greater risk of incident HF versus non-diabetic cases. *(HR=2.45, p<0.0001)*. Diabetes can still convey a 1.5-fold greater HF risk without associated myocardial infarction (MI) and hypertension. *(J Hypertens 2010;28(2):353-360)* And, children with the highest weight gain and highest BP percentile can already show left ventricular hypertrophy (LVH). *(J Ped 2008;142:70)* More importantly, if a heart attack occurs later in life, ECG- LVH compared with bio-markers troponin T or brain natriuretic peptide predicts a mortality risk of 4.1, 3.9 and 2.7 times respectively. *(AJC ’09;103:22-28)* Thus, low birth weight can predict future heart failure and fatal events.

**Growth Pattern Risk:** Early infancy growth pattern to future coronary heart disease in later life was the basis of a longitudinal study in Finland. *(Eriksson, johan.eriksson@ktl.fi)* The study population involved 4630 men who were born in the Helsinki University Hospital during 1934-44 and who attended child welfare clinics in the city. Low birth weight and low ponderal index or ‘at-birth’ BMI (birth weight/length^3) were associated with increased risk of coronary heart disease. Regardless of ‘at-birth’ BMI, slow or low weight gain during infancy is still associated with increased risk of coronary heart disease. More importantly, after age 1 year, rapid weight gain is associated with further increase in CAD risk, particularly among boys who were thin at birth. The adverse effects of rapid weight gain on later coronary heart disease are already apparent at age 3 years. This scenario is in Finland, Unfortunately, the disadvantage, stunted and poorest child is in the SEA countries that includes the Philippines. More importantly, the rapid weight gain among 5 to <10 years old, 10 to < 15 years old and 15 to < 20 years old in a later study also showed all-cause mortality risk before age 20 years. *(NEJM 2010;362:485)*

**Summary Suggestions for Lay Preventive Measures:** Improvements in fetal, infant, and child growth could lead to substantial reductions in the incidence of adulthood DM, hypertension, CAD and heart failure. Unfortunately, life style modification success rate is merely 39%. *(Arch Int Med 2000;160:481)* But, why wait for the problem to occur. Reduce the developmental risk of infant mortality and low birth weight consequences. Compromised born babies who are fortunate to survive infancy to adolescence are still at a greater adulthood diabetes, obesity, hypertension, LVH or HF and CAD risks. The number ‘needed-to-treat’ years hence will be a tremendous health and sanitation burden. Health and sanitation is a “family affair.” Individual smoking cessation, eating the proper food and indulging in physical activities will not be successful if other members of the family will no cooperate. Being proactive now can project an enviable future for generations to come.

No wonder, our government out-patient clinics and charity wards are loaded with metabolic syndrome related atherosclerosis disease entities. Heart disease is no longer the exclusive “waterloo” of the rich and famous. paradoxically, atherosclerotic cardiovascular disease is currently a “luxurious commodity” for the underprivileged. The RH bill can be the ideal primary “family affair” prevention strategy that can translate into maximized “quality of life” vision for the marginalized Filipino. Such should be the mission of everyone.
The CME Commission, thru the PMA as the Approved Professional Organization, was given a mandate (by PRC Board of Medicine, Resolution 465, 466 Series 2008 with a MOA dated Feb. 23, 2011) to accredit CPE providers and to certify CPE credits earned by all medical Professional as a requirement for licensure to practice Medicine. The CME Code, Chapter III Section 38, revised 2002 also requires that CME credits earned should have 30% obtained from Component Societies and 70% from National Activities.

This PMA ID swipe card will definitely confirm and document individual member’s CPE attendance, within their respective Societies in addition to participation in PMA Component and National activities. However, the CME Commission will advocate that CPE credits be allocated 20% each for Specialty Divisions and Component Societies and 40% for Normal activities. The remaining 20% credit can come from other CPE activities.

More importantly, the PMA ID card can subsequently reflect data regarding pre- and post-test CPE performance as well as professional growth yearly attainment, i.e. academic appointments, research outputs, CPE participations, regional dispersal, lay for a activities, on-line CPE modules authorship, Peer Review Board participation, innovative programs and medico-legal case involvement in addition to the required obligations to the PMA.

Let us all hope and pray that all PMA members will participate in CPE activities as a commitment, responsibility, obligation and privilege of being an Active PMA member.

Finally, this should be remembered as an “Evidence-based” day, Oct. 5, 2012 as a date:

That the PMA is truly an “Integrated Medical Organization”;

That the PMA membership has a mission committed to a life-time continuing updated education, upgraded skills, pioneering researches, and lay teaching fora;

That the PMA will integrate its public service mission and vision with Government institutions, the Academy and Industry or NGO partners;

That the PMA CME activities “best foot forward”, with God’s blessing, should be shared without boundaries or reservation toward the vision of “quantified quality of life” for all Filipino and “to whom it may concern”.

MABUHAY ANG PMA. MABUHAY AND PILIPINO.

***The PMA CME Commission requests PMA Officers and Members for reactions and suggestions.***
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