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Αθήνα 21/4/2015

Αριθμ.Πρωτ. 1040

Προς τους  
Προέδρους των Ιατρικών Συλλόγων  
της Χώρας

Αγαπητή/έ κυρία/ε Πρόεδρε,

Σας διαβιβάζουμε έγγραφο του Δικτύου Νέων Ιατρών Ελλάδας (ΔΙ.Ν.Ι.Ε.)- Junior Doctors Network –Hellas (JDN-Hellas), με θέμα: Ενημερωτικό Δελτίο/Newsletter του Διεθνούς Δικτύου Νέων Ιατρών, αριθμ.πρωτ. 2/2015, 14 Απριλίου 2015, με τη παράκληση όπως ενημερώσετε τους νέους ιατρούς-μέλη σας.

Για τον Π.Ι.Σ.  
Εμμανουήλ Ηλιάκης  
Προϊστάμενος Διοικ. Υπηρεσιών

**ΠΑΝΕΛΛΗΝΙΟΣ ΙΑΤΡΙΚΟΣ ΣΥΛΛΟΓΟΣ (Π.Ι.Σ.)**

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Δίκτυο Νέων Ιατρών Ελλάδας (ΔΙ.Ν.Ι.Ε.) – Junior Doctors'  
Network – Hellas (JDN-Hellas)

Αρ. Πρωτ. 2/2015  
Αθήνα, 14 Απριλίου 2015

Προς: ΠΑΝΕΛΛΗΝΙΟ ΙΑΤΡΙΚΟ ΣΥΛΛΟΓΟ

Θέμα: ΕΝΗΜΕΡΩΤΙΚΟ ΔΕΛΤΙΟ / NEWSLETTER ΤΟΥ ΔΙΕΘΝΟΥΣ ΔΙΚΤΥΟΥ ΝΕΩΝ ΙΑΤΡΩΝ

Αγαπητοί συνάδελφοι,

Χριστός Ανέστη, Χρόνια Πολλά.

Σε συνέχεια της αλληλογραφίας μας, θα θέλαμε να σας αποστείλουμε το 6<sup>ο</sup> τεύχος του ενημερωτικού δελτίου / newsletter του Διεθνούς Δικτύου Νέων Ιατρών – Junior Doctors' Network of World Medical Association (WMA), με νέα και ειδήσεις από τους νέους ιατρούς από όλο τον κόσμο.

Θα θέλαμε να παρακαλέσουμε, αν είναι δυνατόν, να προωθήσετε το έντυπο και στους Ιατρικούς Συλλόγους της χώρας, ώστε να ενημερωθούν και οι νέοι ιατροί – μέλη τους.

Για οποιαδήποτε πληροφορία/διευκρίνιση, μπορείτε να επικοινωνήσετε οποτεδήποτε μαζί μας στο [jdnhellas@gmail.com](mailto:jdnhellas@gmail.com)

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# JUNIOR DOCTORS NETWORK

The World Medical Association, Inc.  
L'association Médicale Mondiale, Inc.  
Asociación Médica Mundial, Inc.

## Newsletter

Issue-6  
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# JUNIOR DOCTORS NETWORK

## Editorial



Dr. Wunna Tun  
Communication  
Director  
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Editor in Chief,  
JDN Newsletter,  
WMA

Starting from last issue, colleagues with smart phone can decode the newsletter QR code and redirect the phone's browser to all WMA JDN newsletter links. After scanning QR code in this newsletter, readers may receive text, add link to their devices, open a Web hyperlink, and share it to other colleagues via smartphones.

This 3rd Year Anniversary of WMAJDN issue includes:

- Nivio make chair address
- Ahmet Murt, MD highlights our commentary for international collaboration among junior doctors.
- Sam Wing Li shares WMAJDN, WHO, IFMSA joint survey on medical education
- Mustapha Thaim MBChB reports on Young Doctors fighting against Ebola in Sierra Leone
- Fehim Esen, MD discuss about Turkish Young Doctors Annual meeting.
- Roy Shen, MD recounts Holistic approach in community health in Malawi.
- Joanna Xanthaki, MD share about Online campaign regarding working hours in Greece.
- Deborah Shin, MD presents Recent update from Korea.

I am sure you will enjoy the stories in this issue.



Written by Dr.  
Nivio Moreira  
Chair, WMA  
JDN

The last few months have been intense activity in the JDN. We expanded our communications to include the participation of the African countries in the developed projects, as we seek to participate in various medical meetings around the world. The increased global participation is the main objective to strengthen the JDN.

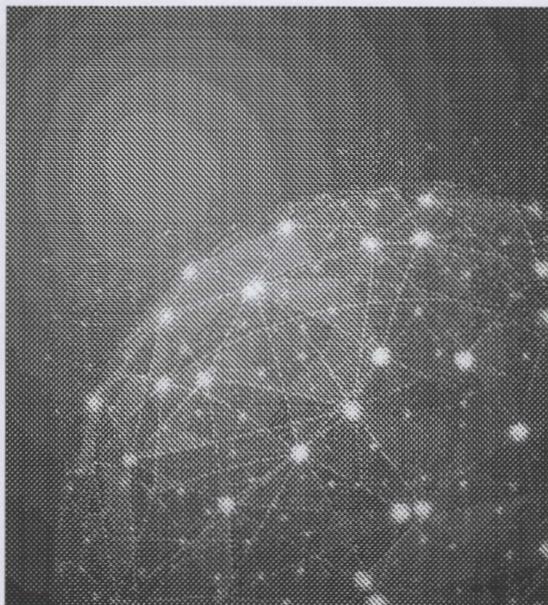
Among the other activities developed have been working in the JDN Well-Being Working Group, with extensive work to discuss the various situations involving medical education during residency and medical activities.

The performance of JDN members, guided by the board, expands the relationship between WMA and young doctors. New projects are emerging and improving medical training around the world. Be part too. Enjoy the newsletter and send your articles.



## JUNIOR DOCTORS NETWORK

### A Commentary for International Collaboration among Junior Doctors



Written by  
Dr. Ahmet Murt (Secretary of WMAJDN)  
President, Turkish Young Doctors Platform

The globalization of today's world makes the lives of people living in miles of distance alike and the needs of societies start to show big similarities. The consequence of such trend is application of identical job satisfaction or educational outcome indicators worldwide. However, suggesting one type of solution does not generally fit into different national or regional contexts. The most probable explanation of this discrepancy is the failure of people to share their vision although their real-life experiences are almost similar.

I believe that we can find ways to share vision among healthcare providers worldwide which will help our attitudes to develop hand in hand. When our ideas have the opportunity to evolve in an interactive environment with our colleagues worldwide, we will most probably come up with policies and systems that will serve the global community. This kind of an approach is much better than implementing a policy which was composed far away from home. We all should work for taking a step towards stand-

ardization instead of borrowing from each other.

If we are eager to be successful to work in a global harmony, we should implement the concept of membership to a multinational mechanism which will set the agenda, define the rules and build the consciousness among its members. A second sub-mechanism we need is instituting regional operating units which will provide signals to the multinational mechanism. And the third, we all need an explicit process in order to make all the steps understood by involving parties. JDN is aware of the importance of these 3 requirements and tries to accomplish them all.

There are the tradition and experiences of WMA which enlighten our challenging road to form shared vision among junior doctors. We are also putting big efforts to be successful according to our defined framework. Early experience of junior doctors in this area will be serving for tomorrow's healthier global community and we will be working to offer opportunities for junior doctors to improve themselves in the field.



# JUNIOR DOCTORS NETWORK

## Junior Doctors' Network Hellas Online Campaign "Working Conditions of Young Doctors"



Written by  
Dr Joanna Xanthaki, MD

Junior doctors have to learn how to deal with long shifts, lack of sleep, study hours, increased responsibilities, and unrelenting competition in addition to a personal and social life. The amount of pressure on junior doctors can affect their physical and mental wellbeing. In Greece, residency is considered to be a full-time and exclusive occupation, but it is not yet determined how residents view their working environments.

JDN-Hellas organized a week-long online awareness campaign raising the issue of physician wellbeing on its official page on Facebook, as well as on its official twitter account from June 17 till June 24, 2014. During the campaign, interesting facts originating from the results of a survey performed by JDN-Hellas among Greek residents entitled "How satisfied do you feel in our working environment?" were shared with junior doctors all over the country, as well as junior doctors of Greek origin working abroad. These were organized in slides, two for each day of the campaign.

The campaign was very well received by Facebook as well as Twitter users, reaching more than 500 daily views on Facebook for each slide, while on Twitter JDN-Hellas' followers increased by 200% during the week of the campaign and the campaign's posts were retweeted by local news agencies. Campaign slides were also translated in English and reached fellow young doctors

abroad through the IFMSA and EMSA channels. Lastly, the initiative was concluded with the compilation of a scientific paper entitled "How satisfied do you feel in our working environment? A survey to assess job satisfaction among Greek junior doctors," which will be presented by JDN-Hellas representatives as a poster at the upcoming "Zagreb International Medical Summit - ZIMS 2014" taking place in November 2014 in the city of Zagreb, Croatia. The abstract will be published in "Lijecnicki vjesnik", the official journal of the Croatian Medical Association.

This is the second online awareness raising campaign organized by JDN-Hellas since its establishment in February 2014, which followed the previous one organized on the occasion of World Health Day 2014. Young doctors in Greece face lots of difficulties while training in their specialty with bureaucracy being one of the major problems, leading to diminished work efficiency and teaching by senior faculties. JDN-Hellas will continue advocating for more healthcare investments and a better working environment with competitive salaries, as we believe good health is the foundation for a stable society and Greek public health is in part the result of the work of hardworking Greek junior doctors.





## JUNIOR DOCTORS NETWORK

# Young Doctors Fighting against Ebola in Sierra Leone

Written by: Mustapha  
Thaim Buya Kamara, MB, ChB

Newly qualified doctors in Sierra Leone spend their first two years of practice in Freetown as 'housemen', where they undergo hands-on intensive training in Surgery, Medicine, Obstetrics/Gynecology and Pediatrics on a six months rotation. After this period, most of them are posted to the provinces as medical officers. Like in many other countries, junior doctors are the first line of contacts for patients coming to the health facilities for medical care. However, there is a gap in training of doctors in Sierra Leone because almost obsolete postgraduate medical program. As a result, the teaching hospitals lack residents, leaving 'housemen' to do most of the work, with the more specialized roles left for the more experienced physicians. Although this may foster confidence and experience in a very short period, the workload is very unforgiving and the mistakes may be many, ultimately hurting patient care. After months of rumors of Ebola in Sierra Leone, the Ministry of

Health and Sanitation reported the first confirmed case of Ebola on May 25th, 2014. As of August 7th, the number of deaths due to this fatal disease is 223. Drastic measures have been put in place by the authorities to counter the spread of the disease, declaring a state of 'public health' emergency and quarantining epicenters, and grounding of all government officials. At present, the number of laboratory confirmed cases is 613. The epicenters of the disease are in the eastern province, namely Kailahun and Kenema districts. However, few cases have been confirmed in the capital city, Freetown, and other provinces in the North (Kambia, Bombali, Tonkolili, and Port Loko districts) and South (Pujehun, Bo, Moyamba and Bonthe districts). Koinadugu district is the only district in the northern province that has not registered confirmed cases of Ebola in Sierra Leone. In the midst of this epidemic, junior doctors have stayed

on the ground in their normal routines that include morning rounds, inpatient and outpatient duties. Doctors have expressed how cautious they have to be in their roles as health providers these days. For example, one of the junior doctors at the military hospital in Freetown mentioned that he had treated a patient weeks back with signs and symptoms of Ebola, but the patient fully recovered and returned home. He, however, emphasized that he uses full protective gear only when there is a strong suspicion of an ebola case presenting, while attending to the rest with non-sterile gloves. In Connaught, the main teaching hospital in Sierra Leone, another house officer that is working in the surgery department mentioned that there have been a drastic reduction of cases coming into the surgical department. Attention is given only to emergency cases of pure surgical nature. This, he says, is a relief for him, as it makes his posting somewhat safer. However, he mentioned that outpatient clinics



## JUNIOR DOCTORS NETWORK

# Holistic Health in Community Approach – Our experience in Malawi

Written by: Dr. Jen-Hsiang Roy Shen



In our previous article, Stepping into the Warm Heart of Africa – Malawi, we introduced our ongoing work. In briefing, we are 2 young doctors trained in Malawi, under program of Taiwanese Ministry of Health and Luke-International-Norway (LIN). About 80% of the staff are local Malawians. As medical doctors, there are many things we can do in our local community to strengthen holistic care. We would like to share two of our experiences.

### Titemwanenge

This word mean "let's love each other" in Tumbuka. The main source of income for people living with AIDS in certain areas is through soy. They make soy milk, soy muffin and many other soy products. Soy product is a good nutrition supplement since maize/sima is the main food here. Therefore, Lin guided them to initiate and coach their business. Besides medical attention, having jobs and regular income are also crucial for this population. These supports could hardly be provided by hospital, but can be

provided in community projects.

### Kanyika

Kanyika is a support group of people with disabilities. According to their coordinator, they were sometimes called beggars, and viewed inferiorly in the past. They gathered to show that they can work as 'normal' people, and hope to end the discriminations they face daily.

They have their farm, paper-coal production, weaving department, and library to keep learning. LIN helped the start-up, and keeps collecting internationally donated books to them.

We know some governments are still developing their policies in helping the citizens with disabilities. As young doctors, we can encourage our patients and their families to learn about and join support groups. Also, we can support these groups by personal strength, or link resources for them. Good support plays no second role than the medical attentions.

Thinking back to the JDN concepts, we know medical treatments are not the whole of medicine. Our patients need holistic care and support. Community, medical facilities, medical staff, government and society are all pillars for the welfare of our citizens. Starting from our doctor career, we can pay attention to all the pillars. In this globalized era, we could use this JDN platform to strengthen our capability, and connect our view and power together. son, the moment we look into the direction of making people pay for their placement of internship training instead of being paid allowances. some of these short comings have to be ironed out. For that matter therefore, discussing internship matters and posting interns in meetings where they have no representation will continue to harvest hassles like what we have all experienced in July 23rd – August 2014 and consequences that ensued.