2020 has proven to be the year that nobody could have prepared for, but the officials appointed on the Standing Committee for Professional Exchange at the start of the year were more than capable of making the most of a bleak situation and organized the following activities:

**Discussing Gender Based Violence:**

On the 26th of June, SCOPE, in conjunction with the Standing Committee for Population Activities (SCOPA), held an online lecture on the proper procedure for attending to a victim of Gender-Based Violence in a clinical setting. The session was conducted by Dr. Frida Kameti and facilitated by the Kenyatta University Local Officer for SCOPE, Loni Yike.

The objectives of the session were to

- Identify the signs of a victim of GBV
- Sensitize participants about triggers and what not to do around a victim of GBV
- Learn when to report and when not to report a suspected case of GBV
- Highlight the differences in attending to a male versus a female victim of GBV
- Identify the organizations to refer a victim to

The session was conducted on Zoom and both SCOPE and SCOPA were well represented in the full-house. Dr. Kameti was able to address each of the objectives in a comprehensive and concise manner while allowing for constructive feedback and questions from the audience. Participation from the attendees was noted to be encouraging.

Feedback obtained from the participants after the discussion was generally positive and majority expressed that they found the discussion fruitful and informative with the objectives having been
**Hypertension in the COVID-19 era:**

On 23rd August SCOHE and SCOPE held a joint webinar on hypertension in the COVID-19 era. The event was moderated by Anita Otsyula from SCOPE and Abdirahman Mohamed from SCOHE.

The speaker was Dr Namasaka and he discussed the following areas:

- Diagnosis, types and causes of hypertension
- Effects of hypertension on various organs and management of the hypertensive patient
- Hypertension as a risk factor for increased morbidity and mortality in COVID-19 patients
- Effects of anti-hypertensive drugs on COVID-19 (ACE inhibitors, angiotensin receptor blockers and calcium channel blockers)

Once again, participants left more educated and empowered to spread further awareness amongst the population.

Other than the Zoom meetings, SCOPE has also created an active WhatsApp and Telegram platform for the sharing of information and international correspondences.

FAMSA also established contact with the Asian Medical Students Association, (FAMSEP), and SCOPE is organizing exciting activities to come such as international correspondences and virtual exchanges with Asian medical students that will cover not only academics, but also cultural and socio-economic aspects. Plans are also underway for a health educative school and international clerkships.
Within the past few months, FAMSA-SCOPA has sought to achieve its aim in various ways, ranging from online awareness campaigns, seminars and webinars to community outreaches and the distribution of Personal Protective Equipment (PPE) on designated World Celebrations, notwithstanding the present reality of a pandemic.

In addition to the astute leadership of the committee, this success in performance and activity is due to the well-planned orientation programmes carried out at the onset of the administration, which were termed SOT 1 and SOT 2. SOT is an acronym for “SCOPA Officers Training”, and there, well-oriented individuals and leaders debriefed the on-board neophytes acting in various capacities as Central Committee Members, MSA Officers or Local Officers.

Highlighting some of the engagements of FAMSA-SCOPA is the celebration of the World Population Day, 11th July. It was ushered in with various posters detailing the need to put the brakes on COVID-19 and encourage everyone to protect the vulnerable individuals amidst a world with over 7.8 billion people. A novel initiative was put into motion as well to mark the celebration and was titled “An Article Fest”. It aimed to encourage African medical students to think critically and put down their thoughts about population issues surrounding the ripple increase in our world today, as well as a way to manage its aftermath. Eni Oluchi emerged winner, and Salaudeen Semiat & Linus Godwin came in at second and third places respectively.

Furthermore, SCOPA engaged in the World Breastfeeding Week (WBW) which took place from 1st-7th August. This celebration was met with vigour as committee members took to social media to educate, inform and encourage ideal breastfeeding practices and methods—sustaining the nutrition of newborn babies through adequate lactation, for example.
This met with a lot of comments, suggestions and opinions in a sequel WhatsApp discussion that was held to bring the week-long celebration to a befitting end.

FAMSA-SCOPA also engaged in the **World Contraceptive Day** on September 26th. As usual, the day was marked by using *fliers and posters* to advocate for the need of every child brought into the world to be born wanted and needed, and not due to chance.

FAMSA-SCOPA has ultimately taken up a **project** titled **Operation Feed an African Child (OFAC)** intending to feed African Children. It was launched on October 16 with the aim to reduce malnutrition in Africa, especially the rural communities and among the orphans, street children, refugees, less privileged children and children living with disabilities. The OFAC target was to reach out to about 500,000 children in each African region, and the proposed funding is 1.5 million naira ($3896.73)

**Objectives**

- Alleviate the incidence and prevalence of poverty in African societies
- Reduce the risk of malnutrition among the vulnerable children and parents
- Make African societies free from diseases related to poverty and malnutrition.

The committee has routine online meetings as well as an established reward system for deserving officers each month, including an award designated to the best performing FAMSA-SCOPA officer. This has increased the enthusiasm of members in their work, aided in achieving the aforementioned successes, and continues to drive committee members to achieve more in an atmosphere of ideas, the occasional friction and yet an underlying unity. ‘SCOPians’ have and will continue to work for the improvement of health in Africa by focusing on population and how best to make it a better place for all.
Over the last few months, SCOMER has organized several online webinars and trainings for its members. Most of these were under the topic ‘Pandemics’ and the medical issues surrounding them.

In the months of June through September, SCOMER has hosted several series installments of webinars and information sessions. Some of these were done independently while some were held in collaboration with international organizations as well as local Member School Associations (MSAs).

The first of these was the Resource Mobilization series. SCOMER did this with the intention of instilling its members with practical skills to be able to identify relevant niches in society and come up with appropriate solutions to deal with them. This was organized independently and sessions were spread out from 7th June 2020 to 13th July 2020. As part of its experienced and impressive panel, there was: Nick Kioko, the MSAKE Secretary General; Dr. Abdulhakeem Olorukooba, renowned public health physician who specializes in Telemedicine; Bidian Okoth, Co-founder of project RESPEKT and Dr. Paula Baraitser, consultant and honorary lecturer in sexual health at King’s College Hospital and King’s College in London. The topics covered focused on acquiring many resources needed for community involvement and evaluation of community based projects. In some of these, students were called upon to give their practical experiences in local projects; walking through the challenges they experienced, how they dealt with them and what changes they implemented to reduce chances of recurrence.

Additionally, the team organized a lecture series that aimed to specifically handle pandemic-related topics through WhatsApp discussions. Some of the topics covered include: **Universal Health Coverage (UHC)** and **Public Health Emergency**. Held on the 27th of June, the UHC session was facilitated by Dr. Marie Claire Wangari, founder of Kenya Healthcare Students’ Summit (KEHSS) who recently graduated from the University of Nairobi, Kenya. This theme focused on primary health coverage as a foundation for UHC, UHC in the midst of a pandemic and the role of the medical student in achieving UHC. The second installment was titled ‘COVID-19: A Public Health Emergency’ and was presented by Dr. Fakorede Olayinka, the IFMSA Program Coordinator for Healthy Lifestyles and Non Communicable Diseases 2019/2020. This session focused on the need for student activism and involvement in risk communication and community engagement in prevention of COVID-19 transmission. It also addressed the subject of activity management through social media awareness campaigns.
The other major series by SCOMER in the month of July, ‘A Guide for the Budding Researcher’, was done in collaboration with ReMed, Ubongo Campaign, SOHIC_CHS, MSAKE RePub and SCORE. These are all local Kenyan student-led organizations that are passionate about research. A total of five workshops were held covering the topics: Introduction to Medical Student Research, Grant Application and Opportunities for Medical Students, Structure of a Research Proposal and Paper, Interdisciplinary Research and Publishing a Research Paper. Most of these were facilitated by medical professionals and students with vast knowledge and experience in the sphere of research.

SCOMER has also arranged several single webinars on the subjects ‘Improving Surgical Training in Africa through Surgical simulation’ and ‘Project NCDs’. We await more and even better from them, because they are definitely up to the challenge.
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The true African spirit lies in its culture, a culture built on different aspects, one of which is food. Yes, I said food—nothing astonishes me more than the diversity in food choices by our African communities. I can’t highlight all choices but for today let’s go with the Nandi community of Kenya and its significance in medicine and health.

The community treasures milk very much and of course you can’t miss a cup of ‘MURSIK’ whenever you visit them. The cows are a sign of wealth in the community and this has come as a blessing in part because of proteins obtained from the milk. This cushions the members from protein deficiency diseases therefore milk playing a role in medicine indirectly.

Let’s leave the universal proteins aspect for now and focus on what makes the Nandi community unique in milk as food. I am talking about ‘MURSIK’, the fermented milk and their unique preparation technique. They do have specific trees which are deemed medicinal and I totally agree with them because their forefathers used them and diseases were unheard of. The specific medicinal trees are cut into firewood and left for some time until they are totally dry. Thereafter, the firewood is burnt with the resulting charcoal crushed into powder. The powder is then mixed with milk (boiled or un-boiled) and stored in a traditional gourd for 2 or 3 days after which it is ready for consumption. And you can’t believe this, the resulting product is as delicious as nothing else I have ever tasted. The medicinal importance of the powder is what I am looking forward to unearthing very soon and it is not a matter of if but when because they surely have a value.
It is been a challenging year for all of us, especially so for those in the medical field and training to join. However, in times of strife it’s important to look back and reflect on where we started to see if we’ve met the goals and standards we set for ourselves and how we responded to the unique challenge the COVID-19 pandemic brought to us as an association.

Following our very successful mental health symposium early in 2019, we renewed efforts in leading discussions on mental health in medical school by the formation of a mental health club. From burnout to anxiety and depression to substance abuse and gambling, there is a myriad of psychological and psychiatric issues that can affect us. This is a consequence of life in medical school, the long hours in class, wards and studying, teaching by humiliation and just dealing with the unpredictable failure of a unit or entire year. These stressors are often not talked about openly, or even acknowledged and many students fall by the wayside and those that make it through the system end up being dysfunctional doctors and adults. The conversation, led by the mental health club and its patron Dr. Ng’ang’a were derailed by the pandemic but we’re still committed to addressing them.
After realising its success last year, the **student led grand rounds** continued under the current team. They still encompass all aspects of the clinical years starting from the history to examination to investigations and, finally, management. This year, we’ve accommodated all clinical years, starting from the third years and above to present a case together from start to finish. This is in line with developing the communication skills and confidence from early years and as they mature in the medical profession.

We have a new series of **Career Talks** held fortnightly by different medical and surgical professionals to impress upon the students the journey from medical school to specialization. We’ve partnered with the Kenya Medical Association (KMA) to make this possible and the curiosity and turnout from the student fraternity has made this one of the most important events we hold. The need for information and mentorship, especially for the senior years, is more pronounced as they begin to look to the future and these kinds of initiatives can make all the difference and we’re committed to making it possible and bringing as wide a range of professionals as possible. The Mentorship club and committee spearheads this enterprise with recognition of **Tejal Patel, Cheryl Agutu** and **Fauzia Noor** for their efforts.

Career Talk series successfully transitioned online and has even **expanded to include a revision series** of different specialties held by residents from those specialties. These weekly meetings have become a great forum for students to supplement theoretical and clinical learning. This has all been made possible by the work put in by the **1st Vice, Victor Mutua** and his team.

In keeping with the mandate of nurturing professional development, another student driven initiative led by the new AMSUN Treasurer **Chadwink Ochieng** has been introduced: financial literacy talks. We realised that with the advent of cheap digital lending, digital sports betting and gambling and entrepreneurial efforts by the student body raises concerns on financial literacy, management, debt management and asset building. To address these, we’ve sourced numerous partners for the series **Money Talks** that will run throughout the school year on a monthly basis. We intend to tackle numerous topics around wealth creation and prudent management of our future assets.

The voice of the students has become extremely important in recent years and to magnify this voice the **AMSUN Gazette** was pioneered by the Editor Priscilla Njeri Kariuki and Salman Majid and their Editorial Team. This was a monthly publication that was entirely student driven to inform, education and entertain the students. Needless to say, the initiative was a roaring success and the magazine continues under the leadership of the new editor **Kamau Njonjo**. We hope this publication becomes an integral part of the University of Nairobi School of Medicine.

Along with the voice of the students, during the pandemic period we wished to acknowledge the artistic talents and contributions of the medical student fraternity. This led to the birth of **AMSUN Art** as a forum to bring artists, makeup artists and photographers together to share their work and as a meeting of two disciples thought to be incompatible.

Lastly, I wish to thank the entire AMSUN fraternity and the incredible team, AMSUN executive committee 2019-2020, that was elected on the 8th of November, 2019. We hope that YOU, the medical student reading this will be a well-rounded doctor, mentally, physically and financially.
Ladies and Gentlemen, this is no science fiction. According to research carried out on the mammalian brain, at the Yale School of Medicine in Connecticut, USA, scientists have been able to restore cellular and molecular activity to an isolated pig’s brain hours after its death.

The scientists could do this by restoring brain circulation for 6 hours with the aid of a new perfusion technology dubbed “BrainEx (BEx)”. The technology makes use of an “engineered haemoglobin-based, acellular, echogenic, and non-coagulative cytoprotective BEx perfusate”, a synthetic blood-like substance pumped through the carotid arteries of the brain at normal body temperature.

The aim of the study, as published in the Nature research journal, was to ascertain if the mammalian brain retained, under appropriate conditions, “at least partial capacity for the restoration of certain molecular and cellular functions...after a prolonged post-mortem interval.” The motive of their experiment was birthed from notable observations which “have questioned the inevitability of neuronal death, minutes or even hours after cessation of brain perfusion.”

The experiment was successful, as reported by the researchers. In their words: “we observed attenuation of cell death and preservation of anatomical and neural cell integrity. We also found that specific cellular functions were restored, as indicated by vascular and glial responsiveness to pharmacological and immunogenic interventions, spontaneous synaptic, and active cerebral metabolism in the absence of global brain activity.” They were, however, quick to stress that at no point in the experiment did they observe any organized global electrical activity associated with high-order brain functions such as awareness, perception; pointing out that this was not their goal. Furthermore, the scientists stated that the perfusate contained various antagonists that exerted “an overall inhibitory tone within the brain, further dampening global network activity.”

In addition, they acknowledged possibilities that their work might raise ethical concerns for consideration by researchers, institutional boards and funding agencies, thus necessitating the establishment of unambiguous procedural standards to forestall possible inadvertent suffering caused by reactivating and maintaining remnant awareness or brain functions.

The scientists are optimistic that following improvements to their technology and further studies involving longer perfusion times, their experiment may find wider applications, bridging the gap between basic neuroscience and clinical research, especially as it pertains to the human brain. Does this bring science one giant step further to reviving the dead? Only time will tell.

REFERENCES:
My mum always tells me to smile more—“Dami smile, it makes me happy when you do”. She says, it lights up my face like a sun breaking through the clouds. I had to learn to smile to the ones I love, even though it’s the only one I had to give. It’s a beautiful gift that brings happiness to the heart.
A good friend of mine is a videographer and vlogger as well; the other day he sent me a video link to his recent project around the subject of artificial intelligence (AI). Watching the video I came across an AI tool called “Ubenwa”; this software detects asphyxia in seconds. The words Ubenwa and Asphyxia can be high sounding; so, I delved into some brief research and guess what I found? Ubenwa is an Igbo word, which means “the cry of a baby” and Asphyxia is a medical condition in infants (1).

Let us dive into some brief findings: Asphyxia deals with the abnormal performance of infants in the extrauterine life, it includes an abnormal change in their breathing rate and blood pH etc. This disorder is a leading cause of infant mortality; with Ubenwa this medical disorder can be detected in seconds. Here is the magic; this software explores machine learning to study the amplitude and frequency of the cry of a healthy child at birth and detects an abnormal cry in the snap of a finger (1).

With this tool available in several primary health care facilities, infant mortality rate is expected to experience a steep decline. Not to forget Babymigo, another tech innovation, designed for expecting mothers. A little research on this app suggested that the team leader of this startup firm experienced firsthand the loss of a loved one during childbirth; this event greatly influenced the idea for this project (2).

Nigeria expects an average of 7 million births yearly and ranks third as regards infant mortality rate. Additionally, approximately 300,000 children never get to celebrate their fifth birthday. This application seeks to lessen this number by providing a network accessible to expecting mothers and answers to questions as regards childbirth, grooming etc. Furthermore, it can refer mothers to professionals or health care centers to bridge the gap of inaccessibility to health care centers or professional help (2).

Tech is revolutionary, crossing borders and making solving problems less a fable and more a reality. Several challenges plague our healthcare system and nation, with inadequate data availability as a core issue. Having a wholesome database (or statistics) is an issue present in the Nigeria community but sectors like the bank and allied institutions have made commendable efforts with the introduction of BVN (Bank Verification Number). To take advantage of projects like Health Insurance and other policies, the health care sector must have an all-inclusive data system to achieve the fit of overall health for all.

With this in mind, we can encourage medical doctors and student doctors to hone their skills or expertise in other fields. Medicine and surgery is a multi-disciplinary course and makes adherents vastly read, so delving into other fields cannot be difficult. The issue that might exist is making tools available to make that transition smooth and easy. Having medical doctors that are programmers, data analysts, financial gurus can be a reality.

Data has always been useful in our field, as early as the 1900s when this sector experienced a level of development. Under the stead of Professor Ransome Kuti; recording the deaths of mothers and child mortality during delivery was encouraged (3). Let us see the bigger picture; our world today survives on data availability and analysis. There is a need to know the actual numbers, the reason for the numbers increasing or decreasing and possible ways to avert or reduce those numbers. So, in simple terms, we can monitor our progress in that field.

With AI, technology and the technical know-how, we can harness several tools in our field to obtain data and complement the available data in the country. The desired utopia as regards good health might be far-fetched but a step at a time can be encouraging. Today, we have Ubenwa and Babymigo and e-records. We are nowhere close to our destination but there is hope with technology and AI.

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No region in the country stands a chance to beat the meat producing power of the northern region (Nigeria). Before, and even after the advent of the discovery of the territory, cattle rearing has been a spring of flowing wealth drowning the northerners. Younger generations have continued in the flourishing paths of their ancestors and have mastered the art of cattle rearing. Arguably, their unending love for their livestock can be attributed to their relative success in the field.
Hey there Big Guy, How’s it going up there  
Please grab a seat, I’m sorry it’s a bit messy in here  
I guess it’s the overwhelming doubts and fears that have made my heart dirty  
I called you for help, but it seems like you didn’t hear me  

It’s been a while, that much I can tell  
Without you, nights of pain and anguish, it really felt like hell  
I cried out in depression, you didn’t heed my pleas  
Drowned out by my demons, I was left on my knees  

The world, my sins and desires became my comfort  
Left wandering alone, darkness became my cohort  
Walls around me caving in, my world was crumbling  
“Where are you Lord,” the only thing my heart was mumbling  

But Lost and insecure, You found me  
Lying on the floor, a broken thing  
My heart’s been overcome by death, anxiety and loss  
But you still sit here, hearing my stories of what was  

Now I know I’m not much when it comes to conventional prayer  
Would rather prefer to pronounce my words letter by letter  
But there’s still a lot more I want to tell you  
I hope you keep listening Lord, because all I utter from my heart is true  

I enjoy our talks, I Hope you never leave  
I hope for your grace and favour, that your truths be revealed to me  
I want to be able to call you Father and Friend  
And continue our Therapy sessions till the very end  

Oreoluwa Odutoye  
Bowen University Association of Medical Students
IN LOVING MEMORY OF THOSE WHO HAVE LOST THEIR LIVES TO POLICE BRUTALITY AND SYSTEMIC INJUSTICE
This newsletter has been put together through the efforts of the Federation of African Medical Students’ Associations-Standing Committee on Publications (FAMSA-SCOPUB).

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