Editorial
By Primo Andres
Executive Director, USTMAAA

There are moments in the annals of any organization that seem to stand out in its history. The year 2016 certainly is turning out to be one of those moments. It was just over 25 years ago that the Silver Jubilarian Class of 1968 embarked on a journey that gave birth to the University of Santo Tomas Medical Alumni Association in America (USTMAAA). And through the years, they have carried for the most part the brunt of making sure that the organization stayed its course.

This time, the Silver Jubilarian Class of 1991 showed up in great numbers, perhaps the largest Silver Class that ever showed up in a homecoming. Not only did over 200 of them come, they have dominated the homecoming activities, taking over the bulk of the presentations during the Mariano M. Alimurung Memorial Postgraduate CME course with very high quality talks on contemporary topics that were of very practical value. The Welcome Walk from the Arch of the Centuries to the Quadricentennial Square was more animated than usual. Their roster is studded with superstars and it was no wonder that 50% of the THOMAS awards handed out this year went to members of their class.

We, the leadership of the USTMAAA, cannot be more enthused in welcoming this highly motivated group of young Thomasians to the fold of the organization with high expectations that they someday will carry the banner of the organization. They have already demonstrated their willingness and ability to get things done by working with the CME Committees from both sides of the Pacific spearheading the effort to get approval of the Mariano M. Alimurung Postgraduate Course for AMA PRA CME credit for the first time ever. Thanks to the continuing support of our CME Director, Dr. Dionisio B. Yorro, this was made possible through his close association with Vista Health Systems that co-sponsored the CME program. This is sure to be maintained from hereon.

The high energy experience at the USTMAA Homecoming in the Philippines is carrying its momentum into the 24th USTMAAA Grand Reunion and Medical Convention this July 3-6, 2016 in Long Beach, California. There is already a strong demand for rooms at the Hilton Long Beach Hotel where the meeting is going to be held. There was a need to condense the scheduled events into three days by moving back the opening by one day because of the blocked rooms on the first day being booked quickly. A pleasant problem for organizers for sure but a problem just the same. We therefore urge everybody to take care of their room reservations early so that we can determine the need for additional rooms while something can still be done about it. The same thing is true for the different events during the Grand Reunion. Earlier registration is strongly encouraged to avoid unpleasant, and potentially frustrating, last minute adjustments.

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ANNOUNCEMENT:
The revised schedule of the 24th USTMAAA Grand Reunion and Medical Convention is now July 3-6, 2016. Please reserve early for rooms at Hilton Long Beach to avoid rushing and unnecessary inconvenience.
The official beginning of the 2016 USTMAAI Homecoming Activities with the theme “Mundi Dottore: From Tamarind to the World” began with the 35th Mariano M. Alimurung Memorial Postgraduate Course on Thursday, January 14, 2016 at the San Martin de Porres (Medicine building) CME Auditorium. The Silver Jubilarian Class of 1991 showed up in great numbers supporting their classmates who gave almost all the presentations the first day. There was no doubt that the star of the day was Dr. Edgar V. Lerma who delivered the MMA Memorial lecture speaking on “The Evolution of Evidence-based Medicine”. The whole course was probably one of the most successful offerings ever presented with record attendance on both two days of the program.

And for the first time, the program was accredited by the AMA PRA for 7 hours of CME credit through the USTMAAA in partnership with Vista Health Systems as arranged by our CME Director, Dr. Dionisio B. Yorro.

This is sure to become a permanent part of our cooperative programs between the USTMAAPhippines and USTMAAAmerica.

Welcome Walk

Later that afternoon the alumni gathered in front of the campus at the Arch of the Centuries ushered in by the beats of the drum. After seemingly an interminable photo ops, the marchers finally relented to the urging of the organizers led by USTMAAI President, Dr. Anthony Leachon, and AHOC Chairman, Dr. Johnny Lokin, and the Director of the Office of Public Affairs, Prof. Giovanna Fontanilla, to walk through the Arch of the Centuries. After some brief speeches, the leisurely march down the Benavidez Lane and Garden and around the Benavidez Monument commenced. There was a short stop inside the Main building as time was again spent to take group pictures at the memorable main steps where Fr. Mata used to stand guard to separate the men from the women. Past the Main building was the Quadricentennial Square where a reception was waiting for the walkers. One can easily feel a palpable sense of camaraderie as the attendees lingered on around the Quattromondial monument until dusk when the darkness finally reminded everybody that there was still the weekend to spend time with classmates and friends to continue to reminisce the good old days.
Different this year is the Homecoming Mass and Jubilarian Awarding Ceremonies which were moved to Saturday morning from the usual Sunday event. Registration and voting for the board members of the USTMAAI was held all morning long. The mass was con-celebrated by the Rector Magnificus, the Very Rev. Fr. Herminio V. Dagohoy, OP and the Regent of the Faculty of Medicine and Surgery, Rev. Fr. Angel A. Aparicio, OP. USTMAAA President, Dr. Cecilia Bayes-Vallejo of Class 1972, was on hand to tell everybody of the Academic Excellence Program of the USTMAAA Foundation, giving unrestricted grants of $500 to all the class topnotchers and $1000 to the summa cum laude valedictorian of the graduating class. Dr. Jeri Charlotte Albano of Batch 2015 was in attendance to receive her Certificate of Academic Achievement and check for S1000. Also present were two of the five 2015 Top Ten Board Topnotchers including Dr. George Michael Ngo Sosuan, fifth place, and Dr. Thomas Vincent Torres Vergara at 7th place. No grant was handed out however because we only award the number one Board Topnotcher. This is done to challenge our young colleagues to always aim for the best, the top of the heap.

The culmination of the Awards Ceremony was the giving of the THOMAS Awards. Recipients this year were Dr. Zosimo E. Micabalo of Class 1961 for Community Service, Dr. Ma. Erlinda de Guzman-Gordon of Class 1971 and Dr. Elmer B. Santos of Class 1991 for Research and Dr. Edgar V. Lerma also of Class 1991 for Medical Education.

It was indeed a banner year for Class 1991 who were celebrating their 25th Anniversary from medical school with over 200 of them in attendance, perhaps the largest silver jubilarian class in attendance ever. Their cocktail reception at the Thomasian Alumni Center lobby later that afternoon at 5 PM must have been quite a party. I am sorry to say that I missed it as I had to attend another Jubilarian gathering.
The trip to the Philippines is earlier this year because of the confluence of events that required my going home earlier than usual. We just missed the winter storm that enveloped the Midwest that caused delay in the airports especially the Detroit and Chicago regions and we actually landed at the Ninoy Aquino International Airport ahead of schedule.

Attendance in the 70th Anniversary of the Tau Mu Sigma Phi on Monday, January 11 provided the first opportunity for me to try the hotel rooms in the Buenaventura G. Paredes, OP (BGPOP) building that is anchored by the Thomasian Alumni Center, the construction of which was heavily supported by the USTMAAA becoming the premier project of the University during the Quadricentennial Celebration of the University of Santo Tomas. In order to qualify for tax deduction, the building was upgraded to 12 floors that includes classrooms. It now houses the College of Tourism and Hospitality Management (CTHM) that runs the hotel, and some high school classrooms.

The rooms were very nice and comfortable and provided the usual conveniences that you would expect from a modern 3-4 star hotel in the United States. The view from the seventh floor was spectacular and overlooking most of the UST buildings including the main building and the UST Hospital beyond the expansive parade ground. Sylvia, my wife, and I woke up at 4 AM still jet-lagged. Unable to go back to sleep we decided to go down and walk the campus for exercise. And after an hour, dawn was just breaking when we decided to have breakfast at McDonald in front of the UST Hospital, tasting their various combination of fares including “tapsilog”, “longsilog”, and my favorite, “eggdesal”. The Hotel service is relatively new and not quite where it needs to be yet. The checking in was easy but the check out process was far from being smooth and there was a relatively long delay. I anticipate that this will be corrected in time as they gain more experience and receive more constructive criticisms. After all this is a learning institution that is expected to turn out graduates that can compete in the real world.

The Thomasian Alumni Center (TAC) occupies the first four floors and are now almost fully operational except for a few of the Alumni Association rooms still being finished. The lobby was an impressive venue for a cocktail reception and welcome ceremony. The Ballroom located in the second floor was very presentable. Catering was provided by outside services that were arranged by
the host. We had a buffet dinner and the quality of the food and its presentation left a lot of room for improvement. This falls more on the caterer and not necessarily on the CTHM itself. However, pressure should be exerted on the caterers to provide better service because any perceived weak link will eventually fall on the lap of the BGPOP-Thomasian Alumni Center and create a bad reflection on the University.

I am looking forward to the next stay when I expect that a lot of the kinks will then be straightened out. It is really a good experience to have whenever alumni from abroad go home to visit our alma mater even just for an overnight stay. The challenge then is to enhance their experience by having the UST Alumni Association (USTAA) and the Office for Alumni Relations (OAR) provide services such as courtesy parking, hosting by various student organizations especially the fraternities and sororities, tour of the University, and assistance in getting things done in the campus to name a few, as we had envisioned and dreamed about when we consented to help promote the TAC project.

Homecoming Gala Dinner

Finally, the grand finale of the UST Alumni Homecoming, the Gala Dinner at the Manila Hotel Fiesta Pavilion, with close to 1000 attendees clad in their best attires with many sporting a mask as it was a Masquerade Ball titled “Must Dance”.

Speeches were kept brief and the Induction of Officers of both the USTMAAI and the Foundation went without too much fanfare to pave the way to the Jubilarian presentations. The new USTMAAI President is Dr. Ma. Victoria Concepcion Pilares-Cruz of Class 1986 who promises to continue the programs that were started successfully by the outgoing President, Dr. Anthony C. Leachon also of Class 1986, a staunch advocate of Public Health.

The performances that night might not have been as elaborate as in the preceding year but there was no wanting of talent and remarkable entertainment that could surprise anybody not familiar with the extra-academic versatility of Thomasian physicians. Indeed we are all proud to say that we not only heal, we also feel; we not only live, we also love.

See you all in Long Beach!
See the next page for images of the Gala Dinner & Masquerade Ball.

Diamond Jubilee

Away from the maddening crowd was a more quiet celebration of a remarkable anniversary. Class 1956 gathered at the Manila Golf Club in Makati City to celebrate their Diamond Jubilee and to talk about the planned encore during the 24th USTMAAA Grand Reunion in Long Beach, California at the Hilton Hotel on July 3-6, 2016. I was requested by Dra. Lita Luz and Corazon de Guzman to come by and answer some questions that their classmates might have. I did not plan on staying very long as I was on my way to another informal gathering and I was in my jeans and sneakers. To my pleasant surprise they invited me to hand out their medallions and have group pictures with them in their formal attires. It was a wonderful experience to feel so welcome with no barriers whatsoever. I am really looking forward to seeing everybody again in July under hopefully even more enjoyable circumstances.

Staging Ground

Nine out of ten jubilarian activities or excursions scheduled outside the Greater Manila area probably originate from the UST campus. This was true for the Ruby Jubilarian Class of 1976 who met in UST by the Main building on Pres. Manuel L. Quezon Drive to board a bus to go to Cabiao, Nueva Ecija. The town is located at the foot of Mount Arayat and they were on their way to do a one day medical mission in the Gawad Kalinga Village that their class helped build. They continue to sponsor the village as partners together with the charismatic movement called Bukas Loob sa Diyos (BLD) that one of their leaders, Dr. Cirilo “Bong” Encarnacion belongs to. A story of their mission appears elsewhere in this newsletter.
Tripartite Meeting

The annual meeting of the UST Faculty of Medicine and Surgery, the UST Hospital, the USTMAAI and the USTMAAA took place a few days later than usual on Monday, January 18 per request of the Asst. Dean, Dr. Maria Lourdes D. Maglinao, who was filling in for Dean Jesus V. Valencia who was indisposed. Present were the Officers and Board members of USTMAAI including the outgoing President, Dr. Anthony Leachon, and incoming President, Dr. Ma. Victoria Pilares-Cruz. From the USTMAAA side, both Presidents of the Association, Dr. Cecilia Bayes-Vallejo, and of the Foundation, Dr. Mary Lou Javier-Buendia, and Dr. Stella Evangelista, the Foundation Executive Director, and Drs. Zita Yorro and Dr. Roberto Ang from the Board of Directors, and Dr. Primo Andres, the Association Executive Director, were present. Not represented was the UST Hospital but we made it a point to meet with the Hospital Administrators later that day. We always find the Tripartite meeting very productive because it gives us a chance to talk about common grounds and cooperate on projects that are of common interest that benefit patients, students and the Faculty, in addition to threshing out problems and try nipping them on the bud before they became too pernicious.

UST Hospital

With the UST Hospital Medical Director, Dr. Vicente Caguioa, not around, we sought an audience with the Chief Finance Officer, Ms. Isadore Lee, who wields a fairly big influence in the operations of the hospital. She was very gracious and hospitable and she went out of her way to show us around in the Clinical Division accompanied by the Assistant Medical Director and Director of Medical Education and Research (DMER), Dr. Marcellus Ramirez, who used to be the Chief Cardiology Fellow when we first started the Save A Heart mission in 2004 but who is now the foremost Electrophysiologist in UST. We were quite impressed by the improvements that have been made since we had a similar tour a few years ago. The sleeping quarters for the junior and senior interns are roomier and cleaner. There are study rooms and separate dining rooms and several conference rooms and research areas. Stipends for the interns and residents have been adjusted and more competitive, and we would like to think that we somehow had a little bit do with that. The interns seem to have a better attitude and higher spirit and greater morale. There are still a lot of things to be worked on like increasing the clinical experience of those who are rotating through the hospital. This is were the USTMAAA Foundation is realigning its funds to enhance the clinical and educational quality of the patients so that more can be learned by our young colleagues even if the number of patients are not necessarily increased due to various constraints.

And perhaps to help ease this burden, the new hospital is well underway in its construction with an optimistic opening sometime in 2017 adding 110 private rooms and updated facilities that should be able to compete with other hospitals in the country. There is a lot banking on this big project and we can only hope that this will further enhance the quality of care of patients and the education of our students and alumni, the real jewel of the Thomasian medical institution.

Save A Heart Mission

Now on its 12th year, the Save A Heart mission that was conceived on 9/11/2001 while the three Cardiologists,
Drs. Jose Evangelista, Dionisio Yorro and Primo Andres, were stranded with their wives while on vacation in Lima, Peru while waiting for the US borders to open following the tragedy that was brought about by the terror attack on the Twin Towers of the World Trade Center in New York, NY. In cooperation with the Section of Cardiology of the UST Hospital, Cardiovascular services are provided to indigent patients at a minimal cost allowing the performance of interventional procedures and device implantation. Catheters and stents were again brought in from the United States. Six devices were donated by Medtronic Pacemaker Company including a biventricular pacemaker and an implantable defibrillator that would have cost over $100,000 in today’s market. The Save A Heart mission is now adopted as a permanent project of the USTMAAA Foundation allocating a minimum of $10,000 a year to take care of the operational expenses. All the professional services are rendered gratis by the participating Cardiologists, Cardiovascular Surgeons and Anesthesiologists.

Fifteen cases were screened and were presented in a pre-interventional conference that was attended by senior medical students. The Cardiology fellows under direct supervision of Drs. Milagros Yamamoto and Wilson Tan de Guzman shouldered the heaviest burden in preparing for the mission, and in return were given more opportunity to have hands on experience in managing the patients. Everyone involved benefited: the patients, the students, the residents and fellows and the medical staff, all in the spirit of missionary work.

I had an occasion to meet a 21 year old young lady who was a recipient of a pacemaker 2 years ago and is now leading a normal life, thanks to the Save a Heart mission and its partner in the device industry, Medtronic.

It was also very rewarding to see that one of the current Cardiology fellows was a recipient of the St. Dominic Scholarship Fund that provides help in the tuition of medical students who are in financial difficulties. We are now seeing and reaping the benefits of what we have sown in the not too distant past.

**Other Medical Missions**

We partnered with Lingkod ER and ABS CBN in cooperation with Tau Mu Sigma Phi to do a medical mission in Indang, Cavite that was sponsored by the Gusi Foundation. Funds from the Medical Mission and Disaster Relief Fund of USTMAAA were utilized for this purpose including donating P 96,000 ($2,000) to the Gusi Foundation to help them purchase additional medications to take care of 8,000 patients that were seen that day.
We are indeed happy to be back home after an exhausting but fun school reunion in Manila, Philippines last January. We had the usual class meetings and parties where we renewed old friendships and reminisced about the good old days while enjoying a seemingly endless supply of food and drinks. There were medical missions and small group outings that we attended.

On the second day of our reunion, our group hired a big air-conditioned bus that took us to Barrio Concepcion, Cabiao, Nueva Ecija, about a ninety-minute-drive from Manila. This place is special to our class. About 10 years ago, our Class together with Bukas Loob sa Diyos (BLD) - Newark sponsored and built 100 Gawad Kalinga homes here; thus the Fr. Paul Lehman-UST Med Class ’76 Gawad Kalinga Village was born. Since then, the two sponsors have continuously supported the village, that included the installations of a potable water supply in each house and a new concrete road through the village.

Five years ago, our class, UST Med Class ’76, on a similar reunion trip to the village met the residents and coordinators of the village. For some of us, that was the first time we set foot on the village. We talked with the homeowners who prepared a sumptuous lunch to show their gratitude to us while the teenagers and the children prepared songs and dances to entertain us. Seeing the talents of the young men and women of the village, some of our classmates agreed to send a few of the village’s youth to college. Now it is a yearly project of Class 1976.

Over the past 10 years, we’ve visited the village whenever we are in the Philippines; and, despite the assistance we’ve provided, I had always been struck by the lack of adequate livelihood projects there to more quickly help the residents improve their lot. But I didn’t really have much to offer them except our encouragement and support whenever they had ideas about earning a better living. There were a few different projects started but none had really taken off to help lift them out of their poverty. Ruefully, I just thought to myself that I maybe expecting too much from them.

Now, five years later, our class went back to visit our village again. The first batch of college scholars have already finished, are gainfully employed and able to help their families now. And from that, positive changes have happened among the village’s youth. This time, I saw them helpful and enthusiastic, eager to talk about and look forward to their future. This time I saw hope alive in their hearts as they try to work and study harder so that they too could qualify for college scholarships and have a better future! And I couldn’t help but be moved. After all these years, we are finally making a real sustained and lasting impact, and changing people’s lives!

The village mothers also expressed their gratitude to all of us. One mother spoke of her own experience in the village. She said that all her life, she has never considered helping anyone but herself. She started living in the village several years back and through the years, her heart has changed. She said that she now realizes that even though she is poor, she can still give to other people just like how her neighbors and friends in the village ‘Kapitbahayan’ group have helped her and others in times of need. She has recognized that help does not need to be financial or physical; but having someone to run to who is willing to listen when she needs someone to talk to helps her tremendously as she goes through life’s struggles. She and others now have a sense of community that they have never experienced before!

Once more, my heart was touched and I thank God for letting me see these signs of transformation, that warm and inspire us, to continue the work, to never tire or give up serving the people He loves. “When you have done what you have been commanded to do, say, ‘We are unprofitable servants; we have done what we were obliged to do.” (Luke 17:10)

Meet Aedes Aegypti

Sylvia Andres went home to her family in Nanyo, Panabo, Davao del Norte and was entertained by the Sacred Heart Andres-Arguelles Legacy GK Villagers sitting for 3 hours early in the evening wearing slippers without socks on. She went to General Santos to visit her cousins a week later and while enjoying the seaside resort at Long Beach she felt a bone-crushing muscle and joint pain, fever and headache. Two days later while doing a medical mission in Koronadal, South Cotabato with Tau Mu Sigma Phi Fraternity her platelet count was found to be only 36,000. Dengue fever was suspected. She was immediately hydrated orally and parenterally and was transferred to General Santos Doctors’ Hospital where an apheresis machine was available for possible platelet transfusion. Dengue fever was confirmed with positive serological tests including NS1 and IgG and IgM antibody titers. Fortunately she did not need to have transfusion, thanks to the excellent care from the local physicians especially Dr. Lucy Yap, UST Med ’92, Internal Medicine and Endocrinology who was her primary care physician, and Dr. Noel Pingoy, who was her Hematologist.
News of Sylvia’s illness spread like wild fire. Well-meaning friends and relatives mobilized practically all resources and gave their advice on how to deal with Dengue. Friends from Davao wanted her moved there. Manila was out of the question because of the need to fly. Return to US, where she would have been a ‘reportable case’, was even suggested. A good friend made sure the Rotary Club of Mindanao was alerted so that prospective donors of platelets were lined up. Tau Mu brothers volunteered to be donors as well. The local blood bank was told to make sure platelets were available in case of emergent need. Everybody in the hospital had a suggestion to make and an advice to give including the housekeeper who had her own concoction to offer. But one thing in common was the advice to drink as much “tawa tawa” brew as much as possible. And so her cousin went home to harvest the weed and had them boiled like tea ready for everlasting consumption.

What helped a lot was good nursing care provided by the hospital staff and especially by special nurses: her sister, Lela, and nephew, Andrew, who stayed with us in the hospital suite all that time, offering two liter-bottles of hydrite at a moment’s notice. This, we were told, was the secret of the successful management of Dengue fever. Those cases that did not have a good outcome were usually those who could not drink due to GI upset that not uncommonly accompanies the illness. Fortunately, Sylvia did not have that problem. There was a sense of relief and anticipation of recovery the following day when a rash appeared in her legs, the Herman’s rash. The platelet count though continued to go down to the lowest level of 20,000 keeping us at bay. And when finally it started rising and with appearance of megakaryocytes, she developed a bad splitting headache that made us think of intra cranial bleeding. Quick reading on the disease however confirmed that headache can be anticipated during the recovery phase probably resulting from cerebral edema as fluids from interstitial spaces are mobilized. Drawing from my ICU experience of using hypertonic saline solution to minimize brain edema, I urged her to drink more of the salty Hydrite solution. Although she was clinically feeling better on the fourth day, her platelet count was only 76,000 and it was thought that it was still too low for her to be flying safely.

We had already moved back our return flight to the USA one week. We decided to use the rest of that week for an unexpected vacation at the Sarangani Highlands Garden that is owned by Dr. Anabelle Abella who is friends with two of Sylvia’s closest friends from Davao.

We found her a very interesting and entertaining and a wonderful person. We were given the largest two-bed second floor room overlooking the gorgeous view of Sarangani Bay. The whole hotel property was like paradise for gardeners. There were flowering plants all over. The restaurant serviced several pavilions that could accommodate groups of various sizes. There was live music by a 3-man band most of the evenings. The menu was marvelous and it offered a lot of local dishes all of which we tried to sample.

But my personal favorite was the deep fried tuna tail that was prepared like a crispy pata. Ummm! There was after all something good to be said about getting sick. Ha ha ha!

So what is Dengue Fever?

Dengue is caused by a virus that is closely related to the one that causes Yellow Fever, West Nile and Japanese encephalitis. It is carried by the Aedes mosquito principally the Aegypti species that gets infected after biting an infected person. The virus eventually settles in its salivary gland. The mosquito passes this on by biting another person and releasing its contaminated saliva. The mosquito tends to live closer to human beings living in stagnant pools of water, old cans and tires and similar environments.

Symptoms typically appear 4-7 days after the bite as a febrile illness accompanied by severe generalized body malaise earning its nick name of “breakbone fever”, headache and skin rash that blanches with pressure. There can be vomiting and diarrhea that can limit oral hydration. Mucosal bleeding around the nose and mouth may occur. These symptoms result from the body releasing cytokines and interferons to combat the virus.

This febrile state is soon followed by the critical phase where there can be capillary permeability leading to tissue swelling, ascites and/or pleural effusion and intravascular fluid depletion that can lead to organ failure and increased hematocrit. Bone marrow involvement can lead to severe thrombocytopenia and bleeding, and in the worst of situations,
death. These are brought about by the virus particles occupying the cells and taking over their functions to replicate more viral particles.

And finally as the body produces IgG and IgM antibodies against the virus, recovery takes place about a week into the illness. Platelet count starts rising. The fluid that had leaked out starts getting reabsorbed and this may sometime lead to volume overload and cerebral edema that can lead to headache and altered mental states and seizures. A new kind of skin rash that looks like “islands of white in a sea of red” called Herman’s rash usually appears. There can sometimes be itching. Easy fatigability may persists for weeks.

Dengue fever is endemic not only in Southeast Asia but also in China and India, Central America, the Caribbean, and even Northeastern Australia. And now the same Mosquito carrier is responsible for Zika virus that causes microcephaly in the newborn that is so highly publicized. And do not forget our old nemesis, malaria.

How do we prevent it? Let’s get rid of the mosquitoes by eliminating their reservoir. Avoid getting bitten by them. In addition to using “Off” and “Citronella” sprays, wear long pants and long sleeves and shoes with socks especially when out in the evenings and early mornings when they are in the hunt. Let us not fall prey to these blood suckers. More novel ideas like releasing small fish called guppy in ponds that eat mosquito larvae and genetically engineering male mosquitoes that can lead to baby mosquititos that cannot fly are being tried. A vaccine is even now available. In the long run, prevention by attacking the carrier that causes so many diseases will probably prove more effective. Down with the mosquitoes!

This topic would be a very interesting subject to cover during our CME program. Any takers?

**Tau Mu Koronadal Medical & Surgical Mission**

In conjunction with the 70th Anniversary of the Premier fraternity of the University of Santo Tomas Faculty of Medicine in Surgery, the Tau Mu Sigma Phi (Thomasian Medical Students’ Fraternity) that was founded on January 5, 1946 went for a three day combined surgical and medical mission in the Capital of South Cotabato, Koronadal City.

This has been a yearly project for the fraternity to honor the commitment of their brother, Dr. Dodoy Sueno, whose dream was to hold one in his hometown. While he saw his dream come into reality in 2006, he died from cancer the following year. In his honor, the fraternity had revived the mission and has maintained it yearly since 2009.

The mission was hosted by the City of Koronadal whose Mayor, Dr. Peter Miguel, is a Tauan brother. Improving on the usual surgical mission, a medical mission was offered for the first time, with broad screening for hypertension and diabetes mellitus. A health forum attended by hundreds of community health workers was held and topics of general interest including prevention of heart attack and stroke, gastrointestinal procedures and surgery, and kidney disease prevention were covered.

As a part of community service, a “tree growing” project was participated in by planting mahogany trees by the steep slope of a government office park with hopes of preventing erosion someday. There was an opportunity to visit the village of a local indigenous B’laan tribe where the villagers graciously hosted the missionaries offering local delicacies then entertaining them with dances performed by young girls and women clad in very colorful dresses.

And for rest and recreation, the group was treated to a trip to the scenic Lake Sebu and its Seven Falls where the adventurous had a chance to enjoy the double zip lines that traversed a panoramic gorge with winding river and several falls way down below. It was no fun for the acrophobic for sure. A stop was made on the way back to the airport at the Dole Plantation for brunch. Mission anyone? Be sure not to miss an invitation from the City of Koronadal. **Kanami Koronadal! Kanami Gid!**

Links to videos of Jubilarian presentations are now available in our website: www.ustmaaamerica.wildapricot.org