Note of the Editor about the Influenza:

The entire country has known recently a period of deep freeze and with it bring the possibility of common cold or influenza. The virus of influenza is the least respected and when one exhibits fever, body aches, cold symptoms or even a stomach bug, we believe that this is the "Flu". Influenza is due to a specific respiratory virus with multiple strains accounting for more than 35000 deaths a year and more than 100000 admissions in our hospitals in the USA..

Influenza virus can result in illness ranging from mild to severe with life threatening complications. Generally more prevalent during the cold weather, especially as seen this past week. November to March represent the period when cases of Influenza will be discovered the most.

Many types have been described A, B, C. Types A and B cause epidemics every year and getting a Flu shot can prevent illness or slow the symptoms. The type C is generally less virulent causing milder respiratory illness but no epidemics.

Receiving yearly the Flu vaccine during the fall, is definitively the best way to avoid being sick. Although it is believed that small changes in the virus itself are noted in the so called "Antigenic Drift" producing new viral strains that may or may not be recognized by the body immune system to produce antibodies. So this is the reason why the Flu vaccine can be given more than one time preferably every year prior to the Flu season. The vaccine contains 3 strains: two influenza A and one influenza B.

I invite you to take the vaccination at least this year because the Influenza will hit us without any pity. If you experience extreme tiredness, fever with headache, dry cough, runny or stuffy nose, muscle aches, Nausea, vomiting or even diarrhea in children or adults, even confusion, chances that you suffer from the flu are very High. Once diagnosed with it, you may have to be treated with antiviral drugs like (Amantidine, Zanamavir, Rimantadine, Oseltmavir) for a period of 5 days but must be started on the second day of the illness.

Maxime Coles  MD

PS: we recommend you to review the new data with the CDC and the National Institute of Allergy and Infectious Diseases
Le message du président: La dette de la Diaspora.

Mes visites de plus en plus fréquentes en Haïti au cours de ces dernières années m’ont permis de toucher la plaie du doigt. Le système de santé en Haïti, particulièrement en milieu rural, est dans un état qui devrait indigner la conscience. Il revient à nous de la Diaspora qui avons bénéficié de l’éducation et de la riche culture d’Haïti de venir en aide à ce pays en détresse. L’AMHE nous donne l’opportunité de payer cette dette et de faire la différence en Haïti.

L’avancement d’un pays dépend de ce que lui laissent les citoyens qu’il a formés. Le calcul est simple: Si vous enlevez plus que vous ne remettez, vous avancez vers le déficit. Quand vous donnez en retour une partie de ce que vous avez reçu, vous contribuez au progrès. Qu’on veuille l’admettre ou non, de près ou de loin, chaque Haïtien de la Diaspora a hérité des sacrifices de nos ancêtres et du système qui a contribué à l’éducation et à la formation qui nous ont permis d’exceller en terre étrangère. La connaissance ou la matière grise est encore plus précieuse que l’or et c’est de même afin de pouvoir changer l’humanité. Comme disait Ralph Waldo Emerson : « Allez où il n’y a pas de route et créez un sentier ». Nous ne prétendons pas pouvoir changer le système de santé en Haïti, mais nous pouvons l’améliorer.

A l’aube de cette nouvelle année, nous vous souhaitons une santé robuste et vous encourageons à prendre bien soin de vous-même afin de pouvoir nous aider dans nos différentes missions. Nous devons continuer à supporter « la maison des étudiants », organiser plus de missions médicales en Haïti, travailler avec les différentes facultés de médecine afin d’améliorer la qualité de l’éducation, apporter notre support aux différents hôpitaux afin d’améliorer la qualité des services.

Chers confrères, après 45 ans d’existence, il est grand temps de faire sentir notre présence en Haïti. C’est pourquoi nous voulons donner la priorité à notre projet sur l’anémie falciforme, la construction du centre de santé à Milot en collaboration avec GRAHN.

Nous ne pourrons pas accomplir ces missions sans votre générosité et votre engagement. Soyez au moins aussi généreux que nos paysans en donnant la valeur d’une journée de travail à la Fondation AMHE aussi souvent que vous le pouvez. Ou mieux encore, vous pouvez faire un don mensuel automatique de $25, $ 50, $ 100 ou $ 200 et vous n’allez même pas remarquer la différence dans votre compte bancaire. C’est une façon pratique de faire des versements réguliers sur votre dette envers Haïti. Je vous exhorte à encourager vos amis à faire de même.

Nous sommes conscients de notre dette envers Haïti et nous à l’AMHE pensons que l’amélioration de la santé en Haïti représente notre contribution à l’avancement du pays. Avec votre aide, nous ferons la différence.

Je profite de l’occasion pour vous formuler mes meilleurs vœux pour l’année 2018. Que chaque jour de cette nouvelle année vous trouve avec une sante robuste, une paix d’esprit afin que puissiez continuer à prospérer et améliorer la santé des autres.

Merci encore de votre support continu à l’AMHE.

J. Roosevelt Clérismé, M.D.
AMHE Central Executive President
This section is dedicated to essays, interesting stories, useful information and profiles of colleagues who are involved in interesting projects for the furtherance of society’s welfare. The first foray included a story set in the homeland with a Christmas background. In this Newsletter previously, some real estate was taken up a few years ago to write tribute to previous colleagues, Rodrigue Mortel, MD and Fritz Francois, MD. With this issue, we are paying homage to Vladimir Berthaud, MD. We invite our colleagues to submit names of persons worthy of mention so they can be profiled and or to submit write-ups about interesting persons or projects that they are familiar with. Let’s each contribute and come up with interesting tidbits… or nuggets… that can be appreciated by all.

Reynald Altema, MD

I have known Vladimir for more than thirty years but I was left slack-jaw when he forwarded his bio to me for this profile. He was introduced to me by a classmate who remained back home and who attended medical school with him in Haiti and he was described as “a person who rarely attends lectures but always scores at the top of the class, spending his time with his hobby, photography.” What was not said was he simultaneously obtained degrees from Institut National d’Administration, de Gestion et des Hautes Études Internationales and Institut Haitien de Statistique. Moving forward, it is a safe bet that he always ranks at the top of any academic undertaking but he will not volunteer the information.

He emigrated to the US in 1983 and did training at Maimonides Hospital in Surgery, at Kingsbrook Jewish Hospital in Internal Medicine and then at Harlem Hospital in Infectious Diseases. He trained under the world-famous Wafaa El-Sadr and Harold Neu from Columbia University Presbyterian Hospital and Harlem Hospital. He did an additional year of Infectious Diseases Fellowship at Memorial Sloan Kettering Hospital where he acquired further expertise in immunosuppressed patients from autologous transplants, neutropenia from chemotherapy as well as AIDS. From 1992 till 2001, he was an attending physician at Harlem Hospital and a faculty member at Columbia University School of Medicine. Along the way, he collected an MPH from Columbia University and then a string of Board certifications: Internal Medicine, Infectious Diseases, Public Health, Tropical Medicine & Travelers’ Health and Fellowships: American College of Physicians, Infectious Diseases Society of America.

He left his mark at Harlem Hospital. A fact that is not well known and needs to be publicized in this day when minorities are being demonized, he was part of a very successful training program as an attending at Harlem Hospital where the success rate of residents in training was 100% and the highest scores in ABIM certification exams! In fact, he was the first recipient of an award for excellence as a teacher: “Award for Outstanding Contribution to the Internal Medicine Residency Training Program at Harlem Hospital.”

From 2001 till now, he has been the Chair of Infectious Diseases at Meharry Medical School in Nashville, Tennessee and as expected he has made some very significant contributions both locally and internationally. In 2006, he created two centers for AIDS treatment:

- **Meharry Community Wellness Center** in Nashville as the Founding Executive Director that
has since been garnering the exclusive distinction of **HIV/AIDS Center of Excellence**, a very strict set of criteria that needs to be evaluated on a yearly basis. The Center receives more than a dozen public grants annually.

- First ever AIDS Clinic at L’Hôpital de l’Université d’État d’Haïti under the PEPFAR/Global AIDS Project. This clinic is still operating without his direct input, a goal he has set out to accomplish upon its creation.

In Tennessee, he keeps creating new paths. Later on he became the Chief Infectious Disease Consultant for Tennessee Department of Corrections and implemented an innovative telemedicine practice that is cost effective and offers highest quality of care to patients afflicted with HIV, hepatitis, and tuberculosis. In fact, he is in charge of 50% of the pharmacy budget allocated by the state for care of the incarcerated population. His involvement in patient’s care encompasses the whole spectrum. He is the Associate Director of the Clinical Discovery Core of the **Tennessee Center for AIDS Research** since 2014. It is a joint venture among Meharry, Vanderbilt and Tennessee Department of Health. It fosters bench research, as well as translational research, a mixture of bench and clinical research. In addition, he is a member of HIV/AIDS Centers of Excellence Committee and ADAP formulary Committee, Tennessee Department of Health, member of the Technical Advisory Group, Human Immunodeficiency Virus (HIV)/Outpatient Skin and Soft Tissue Infections (SSTI), Health Care Innovation Initiative, Tennessee Health Care Finance and Administration and the Mayor’s Task Force for Elimination of HIV in Nashville.

Beyond the New World border, his influence is also being felt. As of July 2017, he is the Clinical Director of PEPFAR/HBCU Consortium Project in Africa focusing on AIDS. Zambia is the first targeted country due to its high prevalence of HIV/AIDS cases. Eventually it will spread to three other African countries.

Never resting on his laurels, he keeps venturing out into other endeavors. Since 1998, he has been part of the Military Reserve and has served at Fort Campbell (famed to be the center that houses the elite Navy SEALs Team 6) and West Point where he became a Military Academy Liaison Officer for many years.

Of course, wherever he goes, awards find their way to him. He participated in some very competitive national contests and won the Johnson and Johnson Health Care Executive Award at The UCLA John Anderson Graduate School of Business, NIH/NIMH Health Disparities Scholarship, and the National Library of Medicine Fellowship in Medical Informatics.

His services are requested by famous Boards, among them:
- National Board of Medical Examiners (NBME). It gives national tests to medical students.
- National Board of Public Health Examiners. He participated in the creation of the blueprint for Board Certification in Public Health.

He also serves as Article Consultant for Interpretation of the Medical literature Project for both NBME and McMaster University in Canada and President of the Minority Interest Group of the Infectious Diseases Society of America.

Such a bio could entitle one to be pompous but he is as self-effacing as it can get and can even be self-deprecating. He is an avid collector of music, spanning a broad spectrum with a library of about 30,000 titles, including rare CDs, LPs and cassettes but he is the first one to say he can’t play any instrument worth a lick! Photography is also a hobby of his that he doesn’t indulge much in due to limited time. However, he always makes time to read, be it technical/scientific literature or literary works….

When I mention to him “God bless the child who has it all,” he replies, “To whom much is given, much is expected.”
Au niveau du chapitre de la Floride, on a eu une année riche en activités de toutes sortes. Prenant le taureau par les cornes, nous avons su éviter des écueils et surmonter bien des obstacles pour finir l’année en beauté en organisant un gala qui a été, à tous regards, un véritable succès. Nous n’aurions pas pu réaliser de tels exploits sans le support de tous nos commanditaires et de nos membres qui ont été avec nous à chaque étape de la route, assurant notre progression continue vers l’utile et l’agréable. Nous les en remercions bien sincèrement et nous continuons à réclamer leur support et leur appui dans la tâche titanique que s’étend devant nous.

Malgré les succès remportés jusqu’ici, et l’âge pourtant mur qui s’inscrit à notre calendrier, nous demeurons cependant une association encore fragile. Il est vrai qu’on a eu pignon sur rue depuis déjà des décennies, n’empêche cependant que nous continuons d’évoluer dans des conditions de précarité enorme. Nous avons l’impression, certaines fois, d’avancer en pleine nuit avec une bougie vacillante capable de succomber au moindre souffle du vent. J’ai dit, quelques années de cela, que toute mesure qui ne tienne compte d’un accroissement de notre assiette numéraire est morte et vouée à l’échec. À mon humble avis, le rajeunissement des cadres est la priorité #1 à notre survie.

A en juger par le nombre de médecins résidant dans l’état de la Floride, et dans d’autres états où se trouve implantée l’association, nous aurions du avoir des salles archi-combles à chacune de nos réunions, et des volontaires à repondre par centaines aux appels lances a nous joindre au combat. …

Mais il y a très peu d’ouvriers dans la vigne alors qu’est très grande pourtant la moisson. … Je sais que tout succès est éphémère s’il ne se construit sur l’entente, la concorde et le respect mutuel. Mais l’entente et la concorde ici mentionnées seront de vains mots si d’abord l’on ne s’asseyt ensemble pour discuter et tomber d’accord sur quelque chose. … Nous avons besoin d’entendre tous les sons de cloche avant de dresser cette carte de route si vitale à notre survie. Si vous n’avez pas encore joint notre association, c’est le moment plus que jamais de le faire. Nous avons besoin du support de tous nos amis et supporteurs pour pouvoir aller de l’avant.

Au seuil de l’année nouvelle, nous ne demandons pas moins que de pouvoir vous compter au nombre des volontaires voulant travailler avec nous pour une association plus grande, plus forte et plus vivace. Deja nous vous souhaitons la bienvenue parmi nous. Il y a des missions médicales qui attendent d’être entreprises, des étudiants qui attendent votre support pour que la cafétéria de la maison des étudiants continue de leur délivrer les plats chauds au quotidien, enfin des supports financiers sont tres recherches pour permettre aux residents de pouvoir poursuivre leur rotation à l’étranger.

Encore une fois, nos meilleurs vœux de succès continus a vous tous membres et amis de l’AMHE !!!!!

RONY JEAN-MARY, M.D.
CORAL SPRINGS, FLORIDA
Join us in the 20 Million Campaign.

Michele David, MD, MPH, MBA, FACP

20 million people – a number greater than that of the populations of Florida or New York – 20 million people live in your neighborhood, worship with you, attend school with your children, sit next to you at the cafe. Some of them now also sit alongside you in the waiting room of your doctor or dentist. These are the 20 million people who stand to lose their health care if the Affordable Care Act (ACA) is repealed, and they are your neighbors.

They daily shoulder important functions within your community and at your workplace. As a physician, I know many of these 20 million men, women and children; I care for them; I laugh and cry with them; I partner with them to ensure that they are healthier than before we met.

I am able to provide care for some of these 20 million people because the ACA gave physicians and other health care providers access to them, offering a route into the health care system that had previously been closed. If that access disappears, I know quite well that most of these 20 million people are likely to become sicker, and eventually to die prematurely. If the effort to repeal this law is realized and 20 million people lose their health insurance, we will be doing harm. Great harm.

Regardless of your politics, providing people with health insurance is a good for them, and for our country.

I became a doctor above all to be able to care for patients, to promote health, and to alleviate suffering. And then, above all, I pledged an oath: to do no harm. I do not pretend that the ACA is perfect; we have borne witness to the fact that it is not. The fervent voices urging one point or another on every side have left us all-too familiar with the range of deeply held positions that animate supporters and detractors.

What can be lost in this debate, however, is the voice of the 20 million people who would be largely excluded from health care in our country without the ACA. Some things can develop in parallel while waiting for redress; the benefits that accrue with timely health care are not among them. Health is too important, America is too important, and healthy Americans are too important for any of them to be figured into political football.

Providing healthcare for all Americans will continue to require a course that integrates moral and ethical practices and beliefs. We remain the only major, industrialized nation that treats health care as a commodity, rather than as a basic human right. As a commodity, health care – and health itself – can be reduced to a budget byline, or seen as a staple, rather than as a matter of justice.

I choose to believe in the solidarity and resiliency of Americans. I choose to believe that empathy can be apolitical. I choose to believe that our country, including our lawmakers, will not allow 20 million human beings of all ages to be stripped of their health care coverage. I am calling for a compassionate approach to health care legislation, one that keeps the needs of 20 million Americans front and center, one that expedites and extends health care benefits for them and for others.

If we instead allow politics and rhetoric to siphon the nation’s health care efforts through a political spigot of half-truths and innuendo, 20 million American friends, neighbors, and loved ones will suffer. You will still see them everywhere – except in our waiting rooms – and that one single exception will affect our nation’s development, reach and productivity across every aspect of life. As with all new legislation pointing toward a higher standard of life for our citizens, we do need eyes and minds focused on ways to improve the ACA; we do not need to repeal it and wait for some suitable, future opportunity to start the ball rolling toward better access to care all over again.

As a physician, I cannot allow this harm to transpire – not to the 20 million, not to the fabric of American life – because I took an oath.

Join us in the 20 Million Campaign.
http://www.20millioncampaign.com
Dr. Jean William Pape : le taux de sida chez des adultes en Haïti est inférieur comparé à Washington DC
Publié le 2018-01-03 | Le Nouvelliste

Le docteur Jean William Pape, responsable des centres Gheskio, un sourire presqu’amusé dans la voix, a répondu au journal que « tous les Haïtiens n’ont pas le sida », fin décembre 2017, à un moment où la Maison-Blanche a démenti et qualifié d’outrageux un article du New York Times indiquant que le président Américain, Donald J. Trump, avait indiqué lors d’une réunion en juin dernier que tous les 15 000 ressortissants haïtiens entrés aux États-Unis en 2017 ont le sida. (Suite)

AHDH's Mission Report:
Fall 2017, and Summary of 2017 blessings
Preparations for Winter 2018 Mission,
our 71st Report

UMUC Graduation Conferral Update
Dear Marie,

The completion of your academic program and degree requirements is an important step toward your personal and professional goals. On behalf of the administration at University of Maryland University College (UMUC), I congratulate you on successfully completing your program and for the conferral of your degree.

As a graduate of UMUC, you can feel confident in the quality education you have received as you enter the workforce or seek advancement in your current career. Additionally, you have access to resources such as Alumni Relations and Career Services to help you in your transition.

Now that your credential has been conferred, the Graduation Certification team will be facilitating the mailing of diplomas and certificates, which should be received in four to six weeks. Please remember that all financial obligations to the university must be met before your diploma and/or certificate can be issued.

For information on requesting an official transcript, visit our Transcripts and Enrollment Verification webpage. If you have any questions or need additional assistance, contact the Graduation Certification team by e-mail at graduationserv@umuc.edu or by phone toll-free at 800-888-8682, ext. 2-2299.

Once again, congratulations on the completion of your program, and continued success to you in your future endeavors.

Sincerely,

Sean Pitterson
Director, Graduation Services
À l’occasion du temps des fêtes, les membres de mon personnel se joignent à moi pour vous souhaiter, ainsi qu’à vos êtres chers, nos vœux les plus chaleureux de paix, de santé et de bonheur.

With the holiday season upon us, my staff is joining me to offer you and yours, our best wishes for peace, health and happiness.

Marie-Françoise Mégie
SENATRICE | SENATOR
QUEBEC (ROUGEMONT) | QUEBEC (ROUGEMONT)
The project will be rolled out in 3 phases.

**PHASE I – Building Construction**

Health care is critical to the well-being of all populations. As a result of the 2010 earthquake, the City of Léogane suffered devastating blows. The destruction of its major hospital and other major infrastructures left the city inhabitant deprived of many basic services including healthcare. With the construction of the healthcare facility, the AMHE hope to bring to critical health services to the area.

The AMHE proposes to the build a 1800 square foot para-seismic facility offering 4 consulting rooms, 1 on-site laboratory of testing, etc. Considering, the challenges of the environment for energy services, the AMHE will build an energy independent facility that will be able to generate and renew its own energy. Solar windmill and Solar Panels will be used to supply renewable energy to the clinic. A water well will supply water to the clinic.
PHASE II – Furnishings and Staffing

In phase two, the AMHE will outfit the facility with the up to the minute furnishings and medical equipment, computers, medical and office equipment to ready the facility for operation.

The clinic will be staffed with medical professional with expertise in materno-infantility care, sickle cell expertise, and HIV/AIDS. The staffing will be as follows:

1 General practitioner
1 Pediatrician
1 Sickle cell specialist
1 Lab Technician
1 Pharmacist
2 nurses
1 facility custodian
1 facility security
1 administrative assistant

The clinic hours of operation will be:
Monday through Friday 8:00am to 4:00pm
Saturday 8:00am to 2:00pm

PHASE III – Health Screening

Materno-Infantile care and Sickle Cell Screening

HIV/AIDS care and Screening

Using telemedicine and Tele-pathology the health clinic will have access to a wide network of qualified physicians, hematologists, pediatricians for diagnosis and follow up. The AMHE network will offer awareness workshops, distance education, visiting physicians, and health screening services.

The facility will feature:
4 medical screening rooms
1 onsite laboratory
1 pharmacy
1 large waiting room
1 conference room
1 administrative office
5 restrooms
1 cafeteria

Donations to the AMHE-Abellard Health Clinic in Darbone-Léogane are being accepted. Please write check for your charitable donations to: AMHE Foundation. In the check memo, please mark your donation as “Darbone-Léogane Health Clinic” donation.

Mail to:
AMHE, Incorporated
1166 Eastern Parkway
2nd Floor
Brooklyn, NY 11213
Tel (718) 245-1015 - Fax: (718)-735-8015

For more information about the project, please contact our Executive Director:
M. Michaël Débrosse-Bruno, BS, MBA-ISMA
Phone: 202-681-3506   email: mdbruno@amhecec.org
Upcoming Events

AMHE 45th Annual Convention
A gathering of Healthcare Professionals and friends

DATE: JULY 22-29, 2018
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FOR MORE INFORMATION PLEASE CONTACT: MYRIAM DELVA
(718) 245-1015 OR VISIT US ONLINE: AMHE.ORG