



# ECTOPIC MURMURS

Volume 28

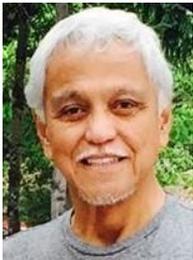
Number 7

December 2015

Opinions and articles published herein are those of the authors and do not necessarily reflect that of the FEUDNSM Alumni Foundation

## DECEMBER DONATIONS

**ROY CABRERA MD<sup>65</sup>**  
**RICHARD B SILVERMAN MD<sup>86</sup>** and an unidentified Far



**ROY CABRERA MD**



**RICHARD B SILVERMAN MD**

Eastern University Medical Alumni Association in Northern Illinois alumnus have done random and reckless abandon gift-giving this Holiday Season.

They have provided scholarship support to financially-handicapped students at the FEU-NRMF School of Medicine.

As the scholarship solicitation is ongoing; please see, on page 8, a brief note from Dean Linda Tamesis MD and her very short list of financially-needing students.

## FAITH CORNER

**REV MELVIN ANTONIO MD<sup>65</sup>**

The season of Advent

traditionally begins with a reading from a time long ago, when a king in the royal line of David was the hope of the people of Israel.

*continued on page 10*



**REV MELVIN ANTONIO MD**

## PRESIDENT'S MESSAGE

As we gather with our family and friends for the Christmas

Holiday and gift exchange, let us not forget the most precious gift we possessed our excellent health. As physicians we are unique in our knowledge and

*continued on page 12*



**MANUEL A MALICAY MD**

## A CHRISTMAS Newsletter

**EMELIE H ONGCAPIN MD<sup>64</sup>**

Now that we are both retired... moving to Foster City CA was not as stressful as we thought.

The movers unpacked and placed everything in place, including pictures, mirrors and fresh plants that were in the house as house-warming gifts from George and Olga Barrios.

*continued on page 11*



**EMELIE H ONGCAPIN MD**

## 1990s IMPRIMIS: Healing, praying, and loving

As *imprimis*-themed, the 41<sup>st</sup> annual *Balik*-FEU homecoming reunion and scientific convention will be held from Wednesday, January 20, 2015, to Saturday, January 23, 2016, at the FEU-NRMF School of Medicine Medical Center in West Fairview, Quezon City, and Crowne Plaza Galleria, Ortigas Center in MetroManila. Everyone is invited.

The schedule of events is, as follows:

**Wednesday, January 20** - golf tournament at 7:00 am at Beverly Golf and Country Club in San Fernando, Pampanga

**Thursday, January 21** – attire *Barong Tagalog* and *Filipiniana* for the Class<sup>90</sup> Silver Jubilarians

7:30 am – registration, election of FEU-NRMF Medical Alumni Society officers at the Dr Ricardo Alfonso Hall, 5<sup>th</sup> Floor

8:00 am – Thanksgiving mass, blessing and awarding of the Silver Medallions at the FEU-NRMF Medical Center Chapel

9:00 am - ribbon cutting for the scientific program, exhibits, and breakfast at the Dr Ricardo Alfonso Hall 5<sup>th</sup> Floor

9:30 am - opening Ceremonies, the National Anthem, FEU Hymn, welcome remarks and continuing medical education meeting overview

10:00 am – 38<sup>th</sup> annual **Dean Lauro H Panganiban MD Memorial Lecture**  
**Breast Cancer Treatment Evolving Paradigms in 2016**

**ANTONIO E ALFONSO MD FACS**

Distinguished teaching professor and Clarence and Mary Dennis Professor and Chairman of Surgery  
State University New York Downstate

*continued on page 7*

## TENDERLY YOURS

**NOLI C GUINIGUNDO MD<sup>62</sup>**

Three years back Cesar



**NOLI C  
GUINIGUNDO MD**

Gorillo from Gold Star wrote an article about the owners of the Philippines. He mentioned it used to be the

Sorianos, founder of San Miguel Corporation, the Elizaldes of Tanduay Distilleries, the Lopezes of Meralco, the Madrigals of Madrigal Shipping Lines, the Hanz Menzi of Manila Bulletin, and the Ayalas of Bank of the Philippine Islands.

Manny Pangilinan of Metro Pacific had taken over shares of Meralco, owns Maynilad, Sun Cellular, Talk N Text/ Smart combined, PLDT, South Luzon Expressway, Negros Navigation, Makati Medical Center and Philex Mining. John Gokongwei owns the Robinson's Galleria, Cebu Pacific Airlines, Robinson's Land, Manila Peninsula Hotel and Universal Robina Corporation.

Lucio Tan owns major shares of PNB, Allied Bank, Fortune Tobacco, PAL, University of the East, Asia Brewery and Tanduay Rhum.

George Ty owns Metrobank and Philippine Savings Bank; Andrew Tan the Megaworld; and Tan Kiat Chong founder and owner of Jollibee, Manila Pancake House and Mang Inasal.

The Aboitiz group controls Aboitiz Power and Union Bank. Andrew Gotianum founded

*continued on page 10*

## BEST MAN'S

### *Reflection*

**ANTONIO RECIO  
RECINTO MD<sup>63</sup>**

Congratulations to my beloved friend who has reached



**ANTONIO R  
RECINTO MD**

the pinnacle of his medical profession, having been elected President of the Philippine Medical Association in Chicago (PMAC), a very distinguished association of

Pilipino-American physicians. Chicago is the home of the best and brightest Filipino physicians.

Gerry Guzman MD<sup>63</sup>, you are surely a gift to the PMAC.

Gerry is a life-long friend since our days in FEU medical school. We bonded when we first came to the United States in 1964. We were seatmates on the plane heading to the United States for the first time. That was the time I saw his sensitivity and strong emotional attachment to his grandma, to his wonderful parents and siblings. He shed tears of loneliness missing the presence of his girlfriend, Gigi.

This was the beginning of knowing him as a person who is destined to succeed in all his endeavors, both personal and professional, a person who stands in crowd and do extraordinary things that make other people's lives better.

He is self-sacrificing to the betterment of other people. He lives for the service of others. He thinks first of how he can improve the world we live in, To me, this is a class act worthy

*continued on page 9*

## More on MOC

**FERNANDO LAGRIMAS MD<sup>72</sup>**

The response of Aladin Mariano MD<sup>72</sup> to my recent article about MOC

(Maintenance of Certificate) is a bright ray of hope that the crusade to generate public awareness of the unintended harms caused by MOC may not be in vain after all.



**FERNANDO C  
LAGRIMAS MD**

A mighty expression of empathy from a distinguished colleague in the person of Dr Mariano whom I consider a scholar in the realm of health care issues, highlights the urgent need to put MOC in its proper perspective so that it conforms with the desirable realities of medical practice.

What is worthy of note here is the fact there is nothing to be gained by a board certified physician like Dr Mariano in publicly espousing unpopular but correct view against MOC. Such action only invites condemnation from the powerful elitist segment of our medical society; among them the MOC fanatics of the American Medical Association House of Delegates and the medical specialty boards, the clever architects, and consequently the quiet but contented beneficiaries of the board certification/ bonanza.

Yet, Dr Mariano, displaying an enviable hallmark of a rare professional integrity and the astuteness of critical thinker, fearlessly speaks out his analytical criticism of MOCV.

## CHRISTMAS QUOTE

*God becoming man is the great message of his life. In it we humans see God's face.*

**St Hildegard**

## An **ALUMNUS SON** You Should Know



### **ALVIN CABRERA MD: Cancer Cell Obliterator**

Undergraduate: Bachelor of Arts, Harvard University, Cambridge, MA, 2000

Doctor of Medicine, University of California, San Francisco School of Medicine, San Francisco, 2006

Radiology residency, Stanford University School of Medicine, Stanford, CA 2008

Advanced training: Radiation oncology residency, Duke University School of Medicine, Durham, NC, 2012

Medical interests: Highly conformal techniques, 3-D conformal radiation therapy, intensity-modulated radiation therapy, stereotactic radiosurgery, and stereotactic body radiation therapy

Professional activities:

American Society for Radiation Oncology

Practice location: Capitol Hill Medical Center, Seattle

Specialty: Radiation oncology

Special medical interests: Stereotactic radiosurgery and stereotactic body radiation therapy.

What you might not know: He's leading the American Society for Radiation Oncology team that's writing a national evidence-based treatment guideline on radiotherapy for glioblastoma, the most common malignant brain tumor in adults.

Where he trained: He was training to become a diagnostic radiologist at Stanford University Medical Center before switching to radiation oncology and completing

a residency at Duke University Medical Center.

He notes: *I switched fields because I missed direct patient contact.* He was on the faculty at Duke before joining Group Health.

The biggest recent advancements: *Technological advances now allow us to deliver radiation to tumors with pinpoint accuracy. We can also shape the radiation field to match the shape of the tumor. If the tumor is wrapping around the spinal cord like a horseshoe, we can deliver the radiation in the shape of a horseshoe and spare the spinal cord running through it. This all translates into more effective treatments and fewer side effects. The technology has grown by leaps and bounds, and at Group Health we have an excellent team helping to create state-of-the-art radiotherapy plans to ensure that we deliver the radiation precisely every time.*

Why he came to Group Health: *I wanted to work at a place where I felt the only thing doctors cared about was how to provide the best possible care for patients. Group Health physicians are united in that goal. We provide integrated, ethical, evidence-based and patient-centered care in a collaborative and collegial environment. It's difficult to imagine a culture and approach to patients that fits my personality, values, and aspirations better than Group Health.*

Why he likes his work: *I work with patients at a time of crisis. They and their families are often suffering. It's a privilege to help them through this challenging time.*

Just for fun: *I've become a runner fairly recently and enjoy running outside. I recently ran in Oregon's Hood to Coast relay race with a team from UW ophthalmology where my wife works.*

**Reprinted with permission**

# MERRY CHRISTMAS & HAPPY NEW YEAR!



Grace A Obena MD<sup>85</sup> (in red) with family.



Santa Claus Virglio Jonson MD<sup>65</sup> with Richard Mon MD<sup>70</sup> and Leilanie Mon's MD<sup>72</sup>'s grandson



Rebecca Salvani MD<sup>69</sup>'s granddaughter fronts a \$10 paper money gift from Santa Claus Virgilio Jonson MD<sup>65</sup>.



I'm the happiest this holiday season!  
Alice Pimentel MD<sup>68</sup>



FEUMAANI president Richard Mon MD<sup>70</sup> and Mrs Amy Delfin pump a donation for the Banged medical mission.



Another Santa Claus  
Cezar Augusto Lastimosa MD<sup>72</sup>



From left, Will Telford, Isabelle Telford, Katie Telford, Emily Telford, Stan Telford, Cesar V Reyes MD<sup>68</sup>, Elisa A Reyes, Carlo Reyes, Julie Reyes, Tom Reyes, and Amy Reyes

# MERRY CHRISTMAS & HAPPY NEW YEAR!



The FEUNAA (Far Eastern University Nursing Alumni Association in America) Christmas Party group picture



Roger Cave MD<sup>65</sup>, Leilanie Mon MD<sup>72</sup>, and Gerardo Guzman MD<sup>63</sup>



Melvin Escara MD<sup>68</sup> on a California slope

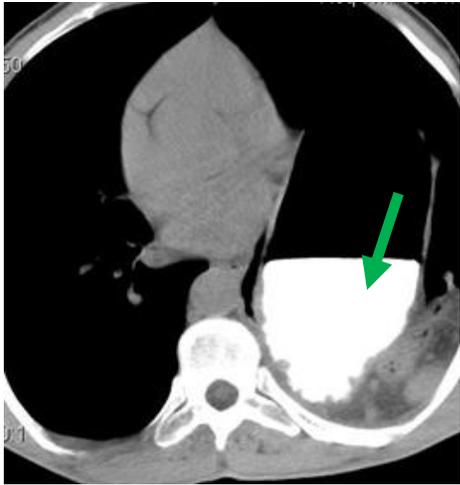


Edna Florentino Origenes MD<sup>68</sup> and Nanding Origenes MD

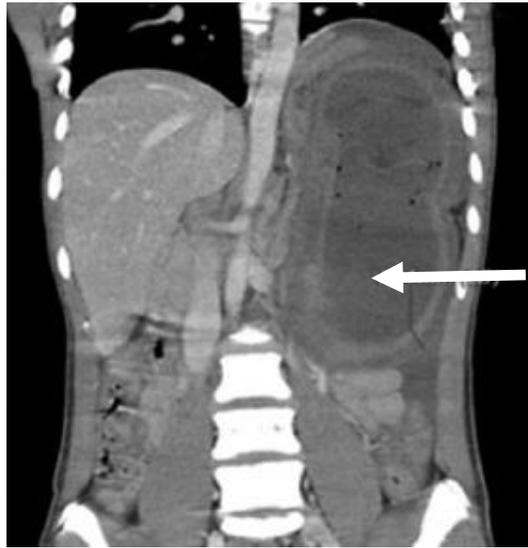


The PMAC (Philippine Medical Association in Chicago) Caroling Team for 2015, led by Gerardo Guzman MD<sup>63</sup> and Roger Cave MD<sup>65</sup>, middle first row.

# CLINICAL IMAGES GASTRIC INFARCTION



**Figure 1** – A dilated and fluid-filled stomach (arrow)



**Figure 2** – There is left elevated hemi diaphragm due to gastric infarction and volvulus (arrow)



**Figure 3** – An opened-up stomach exhibits diffuse, extensively grey red, necrotic mucosa and thinned-out wall.

These **IMAGES** are from a 49-year old Black male with multiple health issues, including profound mental retardation, phthisis bulbi-related blindness, and paraplegia due to spinal cord hemangioma, who presented with nausea, vomiting and acute abdominal pain, suspected for gastric volvulus.

Computer tomographic scan revealed a tremendously distended, fluid-filled stomach, suggestive of gastric outlet obstruction, likely of volvulus (**Figures 1 and 2**).

Upper endoscopy affirmed gastric volvulus, probably organo-axial with mucosal gangrene. An emergency exploratory laparotomy with untwisting of volvulus, partial gastrectomy and Stamm gastrostomy followed.

Gastric infarction involving proximal and distal gastrectomy margins, secondary to volvulus was confirmed on surgical pathology (**Figure 3**). The patient tolerated well the surgical procedure and was discharged in time.

## **COMMENTS** and **LITERATURE REVIEW.**

Gastric infarction is an extremely rare condition due to its rich blood supply. The cause is usually volvulus which is as an acquired rotation of the stomach, or parts thereof, more than 180° creating a closed loop obstruction. Since its initial description in 1866, there have been a little more than 300 reported cases, ranging from partial to total infarction. It is also a true surgical emergency that is life-threatening if not recognized and treated quickly.

The classical presentation of an acute gastric volvulus is epigastric pain, intractable retching with or without vomiting and the inability to pass a nasogastric tube (Borchardt triad). The predisposing causes include paraesophageal hernia which allows the stomach to move freely along its long axis, traumatic diaphragmatic hernias, diaphragmatic eventration, previous gastroesophageal surgery and other

etiologies of diaphragmatic elevation including phrenic nerve palsy or intra pleural adhesions.

Prompt recognition and decompression are required to prevent gastric infarction and perforation. If untreated, mortality rates may be as high as 30-50%.

Diagnosis may be difficult or delayed to make clinically and depends on radiological studies. Plain radiographs and barium studies can be performed. However, CT scan is now the imaging examination of choice as it is readily available and avoids a delay in diagnosis. It also provides excellent anatomical detail which can be reconstructed in multiple planes.

The many other health issues of the index patient had probably predisposed to his gastric volvulus and infarction.

A list of **REFERENCES** is available upon request.

**CESAR V REYES MD<sup>68</sup>**

## OBITUARY

FEDERICO ARCALA JR MD<sup>68</sup>



Dr Arcala was a general surgeon and general practitioner, licensed to practice in Texas and Illinois. He trained at Grant Hospital of Chicago.

He served his country proudly with the National Guards and saw active duty during Kuwait/ Iraq War.

He was married to Avila Arcala MD<sup>69</sup>; and they both practiced for many years in Port Arthur TX.

Dr Arcala will be missed.

ROSALIA FLORES DY MD<sup>69</sup>



August 12, 1943 –  
December 3, 2015

Dr Dy was an internist in Orlando FL and licensed to practice in Florida. She had her internship and internal medicine/family medicine residency at Grant Hospital of Chicago.

She served her country proudly with the United States Navy for 24 years.

She was married to Rodolfo.

Her interment was complete with military honors at the Greenwood Orlando Cemetery in Orlando.

She will also be missed.

## 1990s *IMPRIMIS*: Healing, praying, and loving

41<sup>st</sup> annual *Balik*-FEU homecoming reunion and convention  
*continued from page 1*

### Wednesday, January 20

11:00 am - Visit exhibits

11:30 am - Lunch

1:00 pm - About S -- Senility, Skin, Soul and Sex

*Myths About Aging*, Joel Ferdinand SJ Lopez MD<sup>90</sup>

1:30 pm - *Uses of Platelet-Rich Plasma*, Benedict Francis D Valdecañas MD

2:00 pm - *Combination of Surgical and Non-Surgical Facial Rejuvenation*

Florencio Q Lucero MD<sup>70</sup>

Professor of Surgery and Plastic Surgery

FEU-NRMF Institute of Medicine

2:30 pm – Question-and-answer session

2:45 pm - *Spirituality in the Practice of Medicine*, Elaine Joy T Soriano MD<sup>90</sup>

3:15 pm - *Changing Paradigms in Gender and Sexuality*, Ronaldo R Santos

MD<sup>85</sup>

4:15 pm - Question-and-answer session

4:30 pm – Campus tour

5:30 pm - Welcome Reception *Barrio Fiesta*

### Friday, January 22, 2015

8:00 am – Registration, breakfast, *Healing the body*

9:00 am - *Management of colorectal carcinoma*, Romarico M Azores Jr MD<sup>90</sup>

9:30 am - *Minimally Invasive Procedures in Gynecology*, Zoraida Umipig MD<sup>90</sup>

10:00 am - *Kawasaki Disease*

Jocelyn Y Ang MD<sup>90</sup>

Associate Professor of Pediatrics

Children Hospital of Michigan

Wayne University School of Medicine

10:30 am - *Cardiovascular exercise for the elderly*, Oliver Wendell T Go MD<sup>90</sup>

11:00 am - *Physician reinventing himself*, Benigno Waldo A Dagan MD<sup>90</sup>

11:30 am - Question-and-answer session

12:00 pm – Luncheon symposium on *Cardiac Rehab*

Edward-Bengie L. Magsombol, MD '90

1:00 pm - *Student Achievement Awards*

### Saturday, January 23, 2016

5:00 pm – *Grand alumni jubilarians' night dinner dance*

Venue: Crowne Plaza Galleria, Ortigas Center

Sunday, January 24, 2016 - Class<sup>90</sup> Silver Jubilarians' day out

### FEES for ALUMNI NIGHT and MEMBERSHIP

New life member	PhP 4,500.00
Life member	PhP 500.00
Non-life member	PhP 1,500.00
Guest	PhP 1,200.00
Golden Jubilarians	No Charge
Silver Jubilarians	No Charge
Class <sup>57</sup> up to Class <sup>66</sup>	No Charge

For more information, contact the Alumni Secretariat:

Cely or Santi - (632) 935-00-25 / 0917-8108610 / 09335100783

December 9, 2015

Dear Dr Cesar,

The first year, second semester tuition is 118,700 + miscellaneous fee of 8,310 for a total of 127,010. Second year second semester is 124,400 + 8,310 for a total of 132,710.

Attached is a few of the students looking for financial aid.

Any help would be greatly appreciated.

**LINDA TAMESIS MD**

Dean, FEU-NRMF School of Medicine

PS. First semester grades are not yet complete.

## **STUDENTS NEEDING FINANCIAL ASSISTANCE**

**All have passed their first semester of 2015 without any academic difficulty  
FIRST YEAR**

### **IRENE MAE VILLEGAS**

Asking for some financial support every semester

Father deceased, ill mother

BS Nursing from Trinity University (2010)

NMAT 78

Class president, Year Level Student Representative  
of Medicine Student Council

Enrolled with half (P50,000)



**IRENE MAE VILLEGAS**

### **CHARIS KAY PERALTA**

Father's employer promised to subsidize tuition (?)

BS Biology for FEU Manila

NMAT 91

Enrolled with p5,000 pesos



**CHARIS KAY  
PERALTA**

### **GIDELL F PALOS**

Asking for financial assistance for this semester only

BS Biology from UP Diliman

NMAT 93

Active in Medicine Choir

Enrolled with half (P50,000)



**GIDELL F PALOS**

### **MICAH DOCOG**

Asking for financial assistance for one semester only.

BS Psychology with Latin honors from FEU Manila

NMAT 84

Enrolled with half (P50,000)



**MICAH DOCOG**

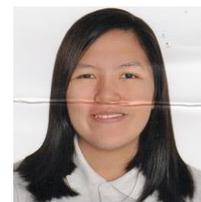
## **SECOND YEAR**

### **LUX MARJES**

Asking for financial assistance this semester

Family will sell ancestral land soon

Went on leave of absence due to finances



**LUX MARJES**

**This scholarship solicitation is ongoing. Please make your donation payable to FEUMAANI  
and send the same to Cesar V Reyes MD, 6530 Dunham Road, Downers Grove, IL 60516.**

## BEST MAN'S

### Reflection

*continued from page 2*

indeed of emulation by all of us, taking care of one person at a time.

Gerry is compassionate, knowledgeable, reassuring, kind and has a good sense of humor.

Gerry is a friend not only to his close

companions, but to his patients as well.

I am one of one fortunate ones to have a friend like Gerry, a great doctor and a loving family man.

He is married to a smart, beautiful and active woman who makes his life a joyful one.

Gigi, his loving spouse, in her own right was *cum laude* in bachelor of sciences in nursing and a top student leader of FEU, Institute of Nursing.

Gerry and Gigi has five children and all are well accomplished professionals and gifted musical artists.

I love to be with them at any occasion as they are fun and jovial, whether it be a trip to the Holy Places, or to a casino, or simply at the *mahjong* table. I had the privilege of being the godfather of his eldest son, Gerald. And Gerry is the godfather of my eldest son, Ronald.

What a blessing for both of us.

Through the years our families have partied together, went on vacations together and with Rose and me, traveled on pilgrimages together. At the

Holy places he showed his strong affinity to the Catholic Church, as a devoted Christian and a prayerful person.

He is active in the Knights of Columbus.

He is a highly spiritual person that we sometimes call him *Monsignor* Gerry. He is a man with guts, integrity and humility.

Gerry has so many attributes and achievements that one can only highlight some of his distinctions.

He is an honorable man, a good mentor, a passionate physician and recipient of many awards.

He has a quick wit, dignified with a great sense of humor.

His laughter is so contagious that you want to be with him in a crowded room.

He is what a best friend forever is about.

He gets in touch with you regularly and shows up to all family gatherings from the birth of a child, to weddings and reunions.

You can always count on him to be there.

Gerry's life parallels his internationally renowned and distinguished professor and surgeon, Francisco Cornelio Guzman MD, the president's father.

Both are extraordinary man and character with strong moral values. Both are young at heart and relates well to the younger generations.

Both epitomizes an ideal physician surgeon who has a dream for a better tomorrow for everyone in his family, friends, community and the world and for his children and grandchildren.

Gerry's mother Paraluman deGuia Chanco is a highly intelligent and gifted person. She always has a welcoming smile and is always interested in getting to know you.

She has a photographic memory. Gerry inherited his kindness and generosity from his mother since early in our professional career, he unselfishly loaned me few thousand dollars so I can place a down payment to our first house in Carmel IN.

As his wife Gigi is a scholar in nursing, Gerry's mother graduated *magna cum laude* in pharmacy at the University of the Philippines.

Both are devoted wife, mother, grandmother and home maker.

Both has successful professional careers and raised wonderful children and loving family. In the psychiatric parlance, Gerry married his mother's image.

Gerry and Gigi and the Guzman family are our best friend and family.

We are extremely grateful to be part of each other lives. Our children lovingly call each other *pseudocousins* and up to this present time, goes on vacation and parties together.

Recently, we were honored to have Gerry as a *ninong* when I got married to a beautiful person, my second wife, Marilyn. We are very happy together and is looking forward to a wonderful future together as man and wife.

Gerry and Gigi you have lived a wonderful fulfilling life. I join Marilyn, my children and grandchildren and the Recinto-



ANTONIO R  
RECINTO MD

Recio family in wishing you a long life and more happiness.

Congratulations on your 50<sup>th</sup> wedding anniversary and love to both of you, your children, grandchildren and family.

## TENDERLY YOURS

*continued from page 2*

East-WestBank and first class subdivisions in the Philippines. Manny Villar owns Camella Homes and Crown Asia. The taipan of all taipans is Henry Sy of SM Megamalls, SM Properties and BDO.

With all these moguls, the Philippines is still called poor country. Of course, we still have all the poor people you can think of. There is still stark contrast among the rich and among the poor. This had been going on for one of such a long, long time.

It is getting closer to the Balik-FEU 2016. It starts January 20, 2016, culminating on the grand alumni reunion on Saturday, January 23, 2016.

The venue is the Crowne Plaza Galleria on Ortigas Avenue corner Asian Development Bank.

A reminder to all board of trustees, the Winter Meeting on March 19, 2016, to be held at the Miami Marriott near the International Airport.

The 37<sup>th</sup> annual reunion and scientific convention in July 6-9, 2016, to be at the Hilton San Francisco at Union Square, California.



NOLI C. GUINIGUNDO MD

Consult the **ECTOPIC MURMURS** for all the particulars.

I hope to see you in Manila for the *Balik-FEU*.

## FAITH CORNER

*continued from page 1*

According to the prophet Jeremiah, the Lord *will cause a righteous Branch to spring up for David and he shall execute justice and righteousness in the land.*



REV MELVIN ANTONIO MD

**Jeremiah 33:15**

We need these words in order to better absorb what follows throughout

Advent. The righteous Branch that springs up from David has been fulfilled by the birth of Jesus centuries ago. Today, Advent is the watchful waiting for the coming of the Lord who, as Jeremiah prophesied, *shall execute justice and righteousness in the land.*

During her lifetime, Mother Teresa told a story about the time she came down with a terrible fever. Her temperature climbed so high that she became delirious. She had a vision of being at the gates of heaven and telling St Peter that she was ready to pass from this world to the next.

But St Peter denied her entry. Mother Teresa asked why. St Peter replied, *Because there are no slums in heaven.* Another Advent has begun and we could easily trivialize this season as just the beginning of another church year. We might

even spiritualize the season and see it as a time for religious retreats and inner preparation for Christmas.

A preacher recently challenged his congregation with burning questions as the Advent season opens: Why do you celebrate Advent year after year? Is it your hope that it will change the cultural dynamic of the world, a world full of sin, injustice and oppression? Do you celebrate the Advent season to *re-boot* your spirituality after the past year's excesses? The reality is that it is not possible for humanity to change the cultural dynamic of the world because humanity is born in sin and un-righteousness.

We come to church instead, to bear witness to what God is doing for creation, to bear witness to the faithfulness of God. *The days are coming, says the Lord, when I will fulfill the promise I made to the house of Israel and the house of Judah.*

**Jeremiah 33**

Waiting for the Christ child during the Advent season is best spent working for the cause of Jeremiah's Righteous Branch. That cause is justice and righteousness in the land. St Peter turned Mother Teresa back from heaven's gate because there was still much work for her to do on earth. Her vocation was in the slums of India, among the poorest of the poor, and not in the glory of heaven. So it must be with us.

If Advent is anything, it is a season of painful waiting – a season of darkness before the light, about a redemption that is *drawing near* as Jesus predicts in Luke's gospel.

Advent is about the coming of the Child of Mary. It is also about the end of history. There *will be signs in the sun, the moon, and the stars and on earth distress among nations confused by the roaring of the sea and the waves.* **Luke 21:25**

It must be like St Peter at heaven's gate, being reminded that there is work to do as we wait for the Lord of History. The best way to wait is to work for the kingdom – for justice and righteousness in the land. That's what Jeremiah did with his life and that's what Mother Teresa did with her time on earth.

In an editorial in the New York Times, the rock star Bono asserts that America holds the keys to solving the three greatest threats we face on our planet: extreme poverty, extreme ideology and extreme climate change. Extreme poverty is the darkness that is a shroud of death across the globe. Each Advent season could be the time to identify the causes of poverty. How can we revolutionize health and agriculture for the world's poor?

Extreme ideology is as a *roaring sea* that is causing distress among the nations. It is the root cause of the terror that grips the world. Advent can be a time for interfaith cooperation as we wait for One who is held high in Islam, Judaism and Christianity. I over simplify a complex issue just to start a dialogue.

Bono's third threat, extreme climate change, is a political hot potato. But so is poverty. So is extreme ideology. In so many ways, the world around us may

appear broken, especially with all the killing of the innocents around us. National economies and social systems have been damaged almost beyond repair. Too many people, especially children, awaken each day not in safety and security but in fear; too many awaken each morning to another day of hunger and anxiety.

Advent is a time for the people of God, the Church, to read the signs as carefully as we read the Bible. Advent is a time of anticipation that God will fulfill His promises to His people. We come to church to re-insert the good news of the Gospel into our culture, to bear witness to the faithfulness of God. As the bumper sticker says, *Let us bring Christ back into Christmas. He is the reason for the season.*

## A CHRISTMAS Newsletter

*continued from page 1*



EMELIE H  
ONGCAPIN MD

I missed though some of my shoes which I had to give away and donate for lack of space.

Greg loves the layout of the house: all in one level and elevators to get to the garage.

We met all our doctors who are all nice and some are good looking too (not to worry, we are both well). We just want to make sure we know our physicians in case we get sick.

We easily fell in our routine of daily early morning mass,

and a cup of Java at Starbucks. Read for free the New York Times and Wall Street Journal.

Lunch could be at the many shops in Foster City, San Mateo, or Burlingame, or on our deck by the water, while watching the ducks and rare heron.

Cooking at the beginning was an adventure. Thanks to internet and the SBMC cookbook. Greg lost weight at the beginning and now he says my cooking is better. Plan to attend cooking demos at William Sonoma.

Just love the weather. It is sunny most days. We enjoy trips to the small shops in Burlingame and Pilipino restaurants in San Bruno.

Our children and grandchildren, Angel is busy as executive director at IGSB while Karl commutes to his office in San Francisco. Our part-time job us to pick Teddy from pre-school one or twice a week. Teddy is so smart and naughty. He has a million questions and was an angler fist for Halloween.

Freddie is acting brach manager for homeland security while Mara continues to be full time school drive for kids and Sunday religion school teacher. Good looking and smart Matt is in the varsity swimming team and prepping for PSAT.

Mark (little Greg) is superb cellist and pianist. He won gold medal this year.

Johannah had her first communion last May and finally has all her front teeth.

Please to see when you visit: Half-Moon Bay, Sausalito, farmer market at the Ferry Building, Napa Valley, Neiman

Marcus at Palo Alto, and Peregrine San Francisco.

Things we miss: Taylor ham, Pepperidge Farm very very thin bread, Listerine toothpaste, Calabria's Calzone, Broadway shows, and *Liberte* yogurt.

## PRESIDENT'S MESSAGE

*continued from page 1*  
training in medicine;

however, we are not immune to the development of hypertension, diabetes mellitus and dyslipidemia.

Following some healthy rules we can outlive and continue

to enjoy a quality and meaningful lives.

The vast majority of us have inherited a set of genes that allow us to reach our late 80s and early 90s, practicing a healthy living, diet, and exercise, avoiding harmful things such as smoking and drinking, and keeping blood pressure, blood sugar and blood lipids at goal level.

In my internal medicine practice, seven out of 10 patients have hypertension. Hypertension is the leading cause of cardiovascular risk factors for stroke, myocardial infarction, renal failure, congestive heart failure, peripheral artery disease, premature death and disability. It is a common finding among adults; and its prevalence increases with advancing age to the point where more than half of people 60-69 years old and

three fourths of those 70 years and older are affected.

The lifetime risk of hypertension is 90% among 55-65 years old non-hypertensives with survival to age 70s-80s.

Hypertension is controlled in approximately 50% of US adult; this is lower in younger and Hispanic patients.

The seventh report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC7) defines normal blood pressure less than 120 systolic and less than 80 diastolic. Blood pressure 120-139/ 81-89 is mandated as *prehypertension* which carries the risk of fixed hypertension and higher risk of target organ damage.

The treatment for *prehypertension* is life style modifications which consist of weight reduction by maintaining body mass index 18.5-24.9 kg/m, a diet rich in fruits and vegetable and low saturated fats, focus to reduce sodium intake to 2.4 g sodium or 6 g sodium chloride, and regular aerobic physical activity such as brisk walking at least 30 minutes per day five to six times x a week. A moderate alcohol consumption limited two drinks per day in men, or one drink per day in women is an ideal goal.

Hypertension is largely asymptomatic. Blood pressure is estimated by indirect assessment of intra-arterial pressure. Instruments calibrated and automated device validated and intermittently calibrated are important. In general, devices that estimate blood pressure

from the fingers or wrist should not be used.

Equally important in taking blood pressure is that the patient be seated with back supported, feet on the floor, arm at heart level, and patient rested for a minimum 5 minutes. Automated devices can produce visible readouts that may be interpreted as accurate --- even if the patients are not positioned correctly. This is unacceptable as any other laboratory test value without validation.

Hypertension may be systolic as isolated systolic hypertension, diastolic as isolated diastolic hypertension, or a combination of both, systolic-diastolic hypertension. Systolic hypertension is uncommon in young, but becomes increasingly common after age 50, which reflects a decrease in vascular compliance and loss of elasticity due to arteriosclerosis disease. This conveys an increased risk of cardiovascular complication, such as stroke, cognitive function and other target organ damage.

Systolic blood pressure is highly variable and sensitive to changes in sympathetic nervous system. At time relief of stress to a patient may be more appropriate than adjusting drug therapy.

JNC 7 classifies the range of 140-159/ 90-99 as stage 1 hypertension, and range of over 160/ and over 100 distole as stage 2 hypertension.

The JNC 8 recommendations for hypertension management of 2013 are based on reviews of randomized clinical trials. In contrast, the JNC7 guidelines



MANUEL A MALICAY MD

are based on expert opinion and clinical studies.

The blood pressure goals for JNC7 are lower than that of JNC8. The goal in JNC8 for adults over 60 years old without diabetes or chronic kidney disease is less than 150/90 mm HG, whereas the JNC7 goal was less than 140/90.

The JNC 8 recommendation for 59 years and younger, the blood pressure goal is less than 140/90, and for those over 60 with diabetes, chronic kidney disease, or both, the goal is less than 140/90. The JNC 7 goal is less than 130/80.

JNC 8 recommends treatment starting over 150/90 for patient 60 years and over. Whereas JNC 7 recommends start treatment over 150/90 for 80 years and over 140/90 for others,

The main objective of hypertension treatment is to attain and maintain blood pressure goal. If goal is not reached within one month of treatment with initial drug increase dose, add a second drug of different class (thiazides-like diuretics, calcium channel blocker, angiotensin receptor blocker or angiotensin-converting enzymes inhibitor).

If goal is still not reached, add a third drug of different class.

Combined ACE inhibitor, eg, Lisinopril, and angiotensin II receptor blocker, eg, losartan together are discouraged.

Most patients will be effectively treated within 6-8 weeks on a multiple drug regimen. If goal is not reached,

hypertensive specialist should be consulted.

Incorporation of life style modifications with drug therapy to reach blood pressure goal is also effective.

The National Heart Lung and Blood Institute has very recently stopped its systolic blood pressure intervention trial (SPRINT) because the study results show maintaining blood pressure systolic below 120 among patients experiencing 30% cardiovascular events, such heart attack, strokes and 25 % fewer deaths than those with 140 systolic.

The key in hypertension management is keeping blood pressure goal or lower by drug therapy and life style modification at all time.

Merry Christmas and a Healthy and prosperous New Year!

**MANUEL A MALICAY MD<sup>72</sup>**  
**FACP FASH**

## **ATTENTION CLASS<sup>66</sup>** **ALUMNI**

Our Gold Jubilee will be celebrated in July 6-9, 2016, at the Hilton San Francisco at the Union Square. Be there! Be square! Let's see one another on the City by the Bay. Renew our friendship and gather new ones.

Please contact ASAP—

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### **Let us pray for**



**ROGER MAHOR MD<sup>69</sup>**

### **COMMENTS**

Editorials, news releases, letters to the editor, column proposal and manuscripts are invited. Email submission, including figures or pictures, is preferred.

### **ECTOPIC MURMURS**

Deadline for  
January 2016 issue

**January 20, 2016**

Please address submission to  
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### **COMMENTS**

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### **PMAC News**

Deadline for January  
2016 issue

**January 6, 2016**

Please address submission to  
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# ***BALIK-FEU, January 2016***



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Class '66 (Golden Jubilee)  
Class '70 (Sapphire Jubilee)  
Class '75 (Ruby Jubilee)  
Class '80 (Coral Jubilee)  
Class '85 (Pearl Jubilee)

Class '90 (Silver Jubilee)  
Class '95 (20<sup>th</sup> Anniversary)  
Class '2000 (15<sup>th</sup> Anniversary)  
Class '2005 (10<sup>th</sup> Anniversary)  
Class '2010 (5<sup>th</sup> Anniversary)



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