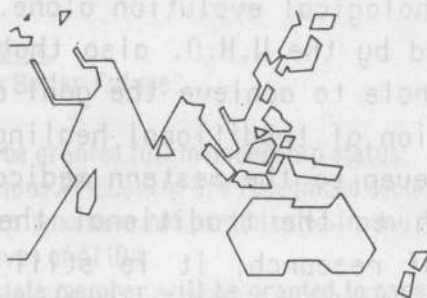


AMDA NEWSLETTER

Association of Medical Doctors for Asia

PRESIDENT :

Dr. Shigeru Suganami
Suganami Hospital
1/310 Narazu
Okayama-Shi
Japan 701-12
Tel: (0862)-84-7676



CHAIRMAN :

Dr. Francisco P. Flores
25M. Viola Street Area 111,
University of Philippines
Campus, Diliman
Quezon City,
Philippines
Tel:997432

Regional Co-Ordinators

Hong Kong:

Dr. Dennis Shun Chiu LAM
45, Yue Kwong Road,
27/F., Flat 2,
King Fai House, Aberdeen
Hong Kong

India:

Dr. Kamath M.S.
Dept. of Ayurveda,
Kasturba Hospital
Manipal-576119, India

Japan:

Dr. Kohei Tahda
c/o 39-1 Ienoshita
Hiroomote, Akita Japan

Philippine:

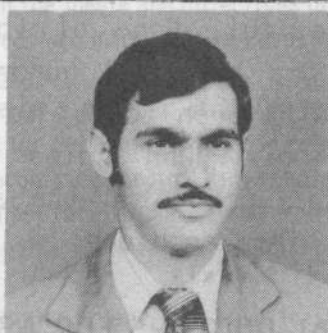
Dr. Kenneth Y. Hartigan-go
11 Lourdes Castillo St.
Quezon City 3008
Philippines

Singapore:

Dr. Euan Murugasu
25, Sunset Heights,
Clementi Park
Singapore 2159

Thailand:

Dr. Jintana Pootirat,
92/7 Soi Jitvisutl,
Muang, Nontaburi,
Thailand 11000



<<< Dr. Kamath M.S.

B.S.A.M., M.D. (Ayu), F.A.G.E.

Regional Co-ordinator,
AMDA - INDIA

Message

The world is moving towards 21st century and goal was 'Health for all by 2000 A.D.' as put forward by the U.H.O. It has also emphasized that, the utilization of traditional medicine in the health care system of various country would be desirable to achieve above said goal.

The role traditional medicine plays today is, different from country to country. In some countries traditional medicine was based mainly on meta-physical religious concepts, in others sophisticated systems of thought based on natural laws have been transmitted through many centuries. Today traditional system appears to fulfil a very important role in that they conform to traditional views harbored by large proportions of these populations as to the course and correct treatment of illness.

In India, the Indian system of medicine, Ayurveda, still serves the rural as well as the urban community. This is due to the fact that:

1) This system continue to have a strong man power and community base.

2) Local availability of cheap, effective and harmless drugs.
3) The traditional pharmacopia has more than 8000 preparations in Ayurveda alone.

4) It has a holistic approach in viewing the person in totality and emphasizing that ill health or disease is brought about by an imbalance of a person, within total ecological system and not by the causative agent and pathological evolution alone.

It is therefore accepted by the W.H.O. also that all the traditional systems have their own role to achieve the goal of 'Health for all by 2000 A.D.' The utilization of traditional healing knowledge should be made available to all, even to the western medical doctors. Then only the scientific approach to the traditional theories can be found. Despite many decades of research, it is still impossible today to point out clearly how and why numerous traditional ways of treating patients are actually successful. None of the medical systems by mankind throughout history has been one hundred percent successful and it would be very difficult, even today, to point out and support but one system. I hope that 'AMDA' aims at developing proper collaboration between the doctors of all the systems of medicine in Asia and brings out the best from each one.

ASSOCIATION OF MEDICAL DOCTORS FOR ASIA (AMDA) PROTOCOL AND BY-LAWS

1. Name of the organization:

Association of Medical Doctors for Asia

Abbreviation: AMDA

2. Nature of the Organization:

- non-governmental
- non-stock, non-profit
- intra-continental of Asia (Asia as defined geographically and to include other Oceanic countries)

3. Objectives of the organization:

General objective i: To promote mutual understanding and co-operation among its members

Specific objectives:

- To organize scientific conferences annually
- To publish an official news letter monthly which will showcase not only the members and activities of the organization but also information on both medical and non-medical matters
- To conduct field studies to know and experience the problems of each country
- To promote exchange programs for career development
- To form a data bank which will centralize information and facilitate exchange of information
- To plan and initiate other activities which will promote the attainment of general objective i.

General objective ii: To be responsive to felt needs of our Asian brothers

Specific objectives:

- To form teams for emergency medical missions
- To initiate activities to inform the laymen on matters pertaining to health
- To organize projects which will answer the existing medical and non-medical problems of our brothers

General objective iii: To support the activities of the Asian Medical Students Association

Specific objectives:

1. To extend advice and moral support to the organizers of the Asian Medical Students Conferences
2. To orient the new delegates to the conference regarding the history, objective and activities of AMDA
3. To extend help, monetary or otherwise, to AMSA in its efforts to attain the objectives

General objective iv: To co-ordinate with other agencies to attain the aforementioned objectives

4. Slogan of the organization:

"Better Medicine for a Better Future"

5. Membership:

a. The following will be granted full membership status:

1. delegates of previous AMSCs who are recognized doctors in their respective countries
2. recognized doctors who have not participated in any AMSC but who are interested in the ideals and objectives of AMDA

b. The status of associate member will be granted to paramedical personnel and other parties who are interested in the ideals and objectives of AMDA

c. The local chapter in each country will be responsible for membership recognition

6. Advantages for members:

a. The privilege of being a member of AMDA, an international organization, as well as an opportunity to work for better medicine and enhance mutual co-operation in its members

b. The opportunity of acquiring medical information and experiences from other medical and para-medical personnel through newsletter, scientific conferences and field studies

c. The opportunity to participate in exchange programs to acquire further training in one's chosen speciality

d. The opportunity to acquire friends and build lasting relationships

e. The opportunity to learn and experience the culture of our Asian brothers

7. Responsibilities of members:

a. All members shall take active participation in the activities of AMDA

b. All members shall pay a nominal membership fee of US \$ 5.00 annually

8. Organizational structure:

a. The President shall represent the ideals and history of the organization in view of his credibility, experience and resources. He shall co-ordinate with the Chairman. He shall have no voting power

b. The chairman shall be chosen from among the regional co-ordinators. Once elected, another member from his local chapter shall assume the responsibilities of the regional co-ordinator for his country. The chairman shall remain neutral in deliberations and shall facilitate decision-making. In case of a tie in voting, the chairman shall break the deadlock. Furthermore he shall perform the following functions:

1. calls and presides over meetings of the regional co-ordinators group
2. decides over issues necessitating emergency action
3. represents the organization
4. co-ordinates with AMSA

c. The secretary shall be chosen from among the regional co-ordinators. Aside from performing the responsibilities of a co-ordinator, he shall also prepare the minutes and provide copies thereof to the regional co-ordinators. He shall see to it that a news letter is published monthly. If the chairman is indisposed, the secretary shall assume the responsibilities of the chairman

d. The finance officer shall be chosen from among the regional co-ordinators. Aside from performing the responsibilities of a regional co-ordinator, he shall also perform the following functions:

1. collects fifty percent (50%) of the membership fees from the regional co-ordinators, who are in turn responsible for collecting the fees from their respective constituents. The rest of the membership (the other 50%) fee shall serve as the working

fund for the local chapter

2. prepares the annual report

3. disburses finances

4. prepares annual report of financial status

5. organizes fund raising activities

e. The regional co-ordinator shall be chosen from among the members of each local chapter. He should be a full member. He shall be responsible for managing the affairs of the local chapter

f. The local chapter in each country shall have the liberty to formulate its organizational structure and rules to attain the objectives of AMDA

g. The honorary advisers shall be chosen by the regional co-ordinators to help and guide the activities of the organization. They shall be anywhere from the world and may belong to any profession provided they have special abilities to guide and help the activities of AMDA

h. The officers of the organization (chairman, secretary, finance officer and other regional co-ordinators) shall have a tenure of office of two years. Re-election is not disallowed

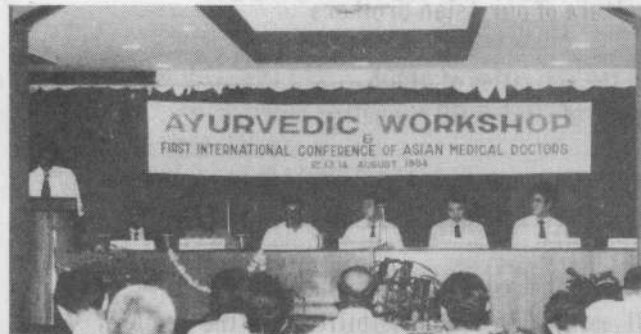
9. Meetings:

a. The officers of the organization shall conduct a business meeting at least once a year for them to discuss project proposals, review and evaluate ongoing projects, and co-ordinate the activities of the organization

b. during decision making, each country shall be entitled to a single vote. Simple rule of plurality shall be applied. In case of a tie, the chairman has the right to cast his vote to break the tie. A quorum of two thirds (2/3) of the total member countries must be reached for decision making

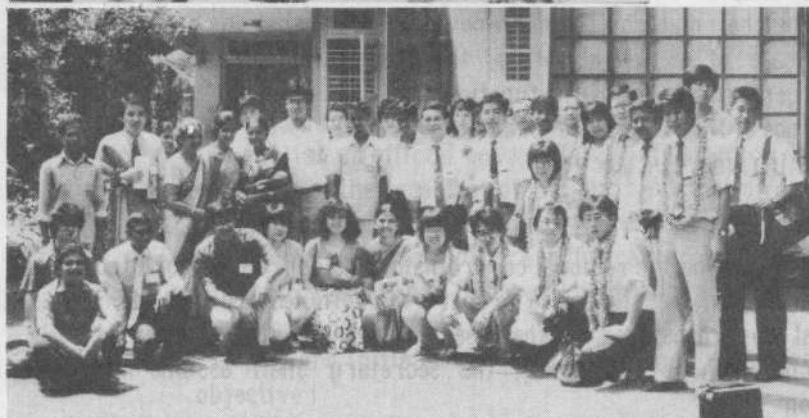
10. Financial sources:

Membership fees, donations from governmental and private institutions, donations from individuals and fund raising activities



"Milestones"

First AMDA conference was held at Udupi-Manipal (India) and Bangkok (Thailand) in August 1984. Sponsored by Udupi Ayurvedic College, Kasturba Medical College in India and Faculty of Public Health, Mahidol University in Thailand, with the theme "The Role of Traditional Medicine in Primary Health Care". A Workshop on Ayurveda (Indian Medical Science) was also held in that occasion in India.



23 Japanese participants and Indian friends with Dr. Mrs. Annapurna Rao at Mangalore, India. Dr. Mrs. Rao (third from left) is standing near Dr. Shigeru Suganami, President of AMDA.



Address by AMDA President Dr. Shigeru Suganami, sitting beside is Dr. M.S. Kamath, Head dept. of Ayurveda K.M.C. Hospital and Regional Co-ordinator of AMDA India.
