



# American College of Physicians, Bangladesh Chapter August, 2021

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## Message from the Governor:

Greetings from ACP Bangladesh Chapter. It feels like we might finally be getting close to the light at the end of the tunnel but things are still far from over. If we can endure and push through with proper measures and vaccination rollouts, we might finally be able to return to a semi normal life. However, there are still a few severe obstacles that we must overcome first. Vaccine rollout is still slow and there are simply not enough vaccines to go around to cover the vulnerable population. A large portion of the population that are of working age are unable to receive the first dose which delays restarting the economy as we still cannot vaccinate our population that are under 40 years of age. Furthermore, studies indicate that Long Covid Syndrome is yet another pressure point to address where recovered patients are still suffering from the effects of their prior infection.

With that out of the way, we are still hopeful that if we are given adequate distribution of vaccines, we can successfully navigate through the last push and emerge a stronger nation. While much is still uncertain, there is hope that things may look better in the future even if the current situation is worrying.



H.A.M. Nazmul Ahasan, MBBS, FCPS, FRCP (Edin and Glasg), MACP, ACP Governor

## Asian ACPCON 2021

ACP Bangladesh Chapter participated in the first Asian ACPCON 2021 which was organized by ACP India Chapter. ACP Bangladesh chapter along with Japan and Saudi Arabia Chapter attended this conference. It was a two-day long conference that was held virtually on 6th and 7th February 2021.

Bangladesh Chapter participated in the Doctor's Dilemma Competition, e-Poster Competition and multiple oral presentations in various scientific sessions. Prof Quazi Tarikul Islam, former governor, ACP Bangladesh Chapter was assigned the role of Judge in Doctor's Dilemma program and Prof Dr. Md Julhas Uddin (Major, Retd.), Professor of Medicine also assigned the role as Judge in e Poster session.

To participate in Doctor's Dilemma Program in February 2021, preparation started long before. There were two stage selection examinations to build 'Team Bangladesh'. In the first round, 172 post graduate students took part in the online selection examination held nationwide on the 27<sup>th</sup> of November, 2020. Among them, 19 participants were selected, who appeared at second and final round examination held on the 11<sup>th</sup> of December, 2020. Then finally four participants were selected according to their merit scores to form Team Bangladesh. Team Bangladesh participated along with Japan, India and Saudi Arabia Chapter in Doctor's Dilemma Program virtually on the 7<sup>th</sup> of February, 2021 and secured 1st Runner Up position. We congratulate our team for their every effort and success.

Another success was in the e-poster competition. About 18 participants took part in poster competition in three categories – postgraduate, undergraduate and students. Winners of the e-poster competition are Dr Mohammad Mehruz E Khoda (post graduate category) and Dr Arfa Rahman (undergraduate category). We also congratulate our participants for their success.

Three renowned physicians and professor of Medicine from Bangladesh participated as speaker in the main event at different scientific sessions. Prof H.A.M. Nazmul Ahasan, Governor, ACP Bangladesh Chapter talked on 'Expecting the Unexpected: Rare Complications of COVID-19 in patients.' Prof Khan Abul Kalam Azad, Governor elect, ACP Bangladesh Chapter talked on 'COVID-19: Challenges and Hopes ahead.' And Prof Titu Miah, Professor of Medicine, delivered his speech on 'Public Health Response to Emerging Viral Infectious Diseases.'

Another three renowned Professors of Medicine, Prof Khwaja Nazimuddin, Prof Ahmedul Kabir and Prof Rubina Yasmin conducted three different scientific sessions as chairpersons in the main event. In this covid pandemic situation Asian ACPCON 2021 was a great opportunity for learning and to come to know latest research and innovations conducted by eminent international and national speakers in virtual platform, making the theme of the conference 'Resilient Physicians' fruitful.

## Masterclass on OSPE for final year MBBS students

ACP Bangladesh Chapter also organizes masterclass on OSPE (Objective Structured Practical Examination) program for students as part of ACP Global Development Program as well as responsibility as an organization in the country. The program was arranged at 9 PM local time. Program was targeted for 5th year MBBS students.

We used stream yard platform for the program and it was broadcasted in Facebook and YouTube at the same time. We arranged seven programs in total in this session and each program last for 90 minutes. There were question and answer session after main lecture. Around 200 students participated in each session.

First lecture was taken by Prof. Khan Abul Kalam Azad MACP on 2nd of March. His topic of presentation was X-ray. He talked predominantly on chest X-ray. Second lecture was taken by Prof. Sujat Paul on 4th March. He talked on X-ray excluding chest X-ray. Third lecture was held on 5th March and was taken by Prof. Al Amin Mridha, a renowned pediatrician on pediatric OSPE. Fourth lecture held on 9th March and it was taken by Prof. Md. Titu Miah. His topic of presentation was ECG for MBBS students. The fifth lecture was taken by Prof. Rubina Yasmin on 11th March. Her topic of presentation was Instruments used in Medical Practice. On 16th of March Prof. Md. Zakir Hossain presented his lecture on OSPE based

on pictorial of different diseases. The final lecture was taken by Prof. Ahmed Hossain on 18th March. His topic of presentation was clinical problems frequently given in OSPE examination.

## Participation of ACP Bangladesh Chapter in Internal Medicine Meeting 2021

ACP annual conference ACP/IMM'21 this year was held from 29th of April, 2021 to 1st May, 2021 and as of last year it was virtual. The conference was preceded by BOG meeting from 26<sup>th</sup> April 2021 to 28<sup>th</sup> April, 2021. ACP Bangladesh chapter participated in all the events of this year's virtual internal medicine meeting. Members have actively participated on all the scientific sessions. It was a great experience for us, especially the session by Anthony S. Fauci, MD on the topic, "Covid-19 in 2021: Lessons learned and remaining challenges".

This year, Professor Khan Abul Kalam Azad was awarded with the Master of American College of Physician (MACP)



Professor A.K.M Aminul Hoque and Professor Abdul Jalil Chowdhury has been awarded with Laureate award for the session 2019 & 2020 respectively





Team Bangladesh with their mentors.

### Doctors Dilemma Program:

Team Bangladesh participated for the 1st time in the national Doctors Dilemma competition 2021. The team was led by Mahbub Mayukh Rishad. Other participants were Dr. Sarwar E Alom & Dr. Atunu Das. The team performed very well as their 1st participation but unfortunately, they out of the competition being runners up in the group in the elimination round.

### Meeting Minutes of Advisory Council

A virtual meeting of advisory council of ACP Bangladesh Chapter was held on 8<sup>th</sup> June, 2021 at 11:00 am. Prof. H A M Nazmul Ahasan, Governor, ACP Bangladesh Chapter, Prof. Khan Abul Kalam Azad, Governor Elect, ACP Bangladesh Chapter, and the members of the advisory council were present in the meeting.

There were three agendas for the meeting.

- Discussing about the activities of ACP Bangladesh Chapter in 2020-21.
- Planning for future academic activities
- Miscellaneous

In the beginning, Prof H A M Nazmul Ahasan, Governor ACP Bangladesh Chapter, informed the advisory council about the activities of the chapter in the year 2021. Following activities were mentioned-

1. Till date, the total number of the fellows of ACP is 39.
2. Prof. Khan Abul Kalam Azad was elected as the Governor Elect for the next term and also as a Master of ACP.

3. Two renowned physicians as well as active member of ACP, Bangladesh Chapter Prof Md. Abdul Jalil Chowdhury and Prof. A K M Aminul Hoque were selected for Laureate award of ACP.
4. ACP Bangladesh Chapter actively participated in the ACP Internal Medicine Meeting Virtual Experience held on April 29-May 1.
5. The Doctors Dilemma Competition preliminary selection examination was held on 27<sup>th</sup> November,2020 where 172 residents all over the country were participated. 19 candidates were selected from 1<sup>st</sup> round. Second and final round examination to form 'ACP Team Bangladesh 2021' was held on 11<sup>th</sup> December, 2020, where 4 topmost scorers were selected. This team competed with other Asian chapters of ACP in the ASIA ACPCON 2021 held on 6<sup>th</sup>-7<sup>th</sup> February,2021 and became runners up.
6. In the ASIA ACPCON 2021, there were three keynote speakers and three chairpersons from Bangladesh. There were also 2 judges of the poster competition and doctor's dilemma competition from Bangladesh. More than 10 posters were selected for presentation and among them, two have won special award.
7. For the final year MBBS students, master classes on OSPE were organized by the chapter from 4<sup>th</sup>- 18<sup>th</sup> March,2021. Total 7 classes were arranged on different topics of OSPE.
8. Master classes are going on from 1<sup>st</sup> - 17<sup>th</sup> June, 2021 for Medicine Final part (Part- II), Mid-term and Preliminary Part-II examinee.
9. IMIG sponsorship program application is now waiting for approval.
10. Newsletter is being published regularly.
11. A By-laws of ACP Bangladesh Chapter has been formed.

#### **Future plan-**

1. A single day program on Acute Medicine will be arranged in this year
2. An annual dinner will also be arranged

#### **Challenges-**

1. Establishing a permanent office for the chapter

#### **Decisions taken in the meeting-**

1. An actual meeting of the advisory council will be arranged in the month of August,2021
2. ACP Bangladesh Chapter will arrange the next virtual/ actual ACP Asian Conference in 2022.

Finally, Governor, ACP Bangladesh Chapter thanked all the participants for attending the meeting and requested to join the next meeting.

### List of New Members in Last Six Months (Ninety-four in total)

03356603 MD MAHABUBUL ALAM KHANDKER, MBBS MD

03640958 Md Shakhawat Hossain, MBBS MD

03662851 Dr. A.S.M. RIZWAN, MBBS

03664824 Nazmul Alam

03864176 Taisir Shahriar, MD  
03864413 Kazi Jannatul Islam, MBBS  
03991292 Nawsabah Noor, MBBS  
04067733 Imtiaz Ahmed, MBBS  
04098059 Nazrul Islam, MBBS  
04107003 Md Hossain, MD  
04117778 BG M Kumrul Hasan, MBBS  
04125633 MD. MUSFIQUR RAHMAN, MBBS  
04126216 Golam Mostafa, MBBS MD  
04126229 ASIF HASAN KHAN, MD  
04127540 Md Janesar Rahat Faysal, MBBS  
04127546 Rajib Nath, MBBS  
04128832 MD MOSTAFA KAMAL, MBBS  
04128834 AMIR HOSSAIN, MBBS  
04128836 SUMAN KUMAR DAS, MBBS  
04128841 MINHAJ UDDIN AHMED, MBBS  
04129923 MUHAMMAD HEZBULLAH, MBBS  
04129926 MD SOLAIMAN MIA, MBBS  
04129929 SHAMSUN NAHAR, MBBS  
04130149 Palash Kumar Biswas, MBBS  
04130319 MOSTAQUE AHAMMAD, MBBS  
04130322 MD KAMRUL HASAN, MBBS  
04130323 MD ENAMUL HAQ, MBBS  
04130336 Samir Kumar Talukder, MBBS MD  
04130340 MD ABU ZAHID, MBBS  
04130341 MD HABIB-E-RASUL, MBBS  
04130897 MD MOSHFEQ-UR-RAHMAN, MBBS  
04130898 GOUTAM KUMAR GHOSH, MBBS  
04131910 SADLEE S M, MBBS  
04132121 Elias Bin Akber, MBBS  
04132644 MD. SOLAIMAN HOSSAIN, MBBS  
04132647 ZAHIR UDDIN MAHMUD ILLIUS, MBBS  
04132650 MUHAMMAD SULTAN MAHMUD, MBBS  
04132664 MOHAMMAD MOAZZEM HOSSAIN, MBBS  
04134018 Suranjit Kumar Saha, MBBS  
04134020 SAQIB SALAH AUFI, MBBS  
04134043 Abdur Rahim, MBBS  
04134823 Shariwatullah Khan, MBBS

04135020 MOHAMMAD AMINUL ISLAM, MBBS  
04135028 ABDUS SALAM, MD  
04135030 MOHAMMAD TAUHIDUR RAHMAN, MBBS  
04135033 MOHAMMED NURUN NABI, MBBS  
04135799 Mohammad Ashikur Rahman Khan, MBBS  
04136091 MOHAMMAD AYUB, MBBS  
04136573 Humayun Kabir Sarker, MBBS MD  
04137002 Hossain Muhammad Mostafijur Rahman, MBBS  
04137019 Muhammad Musa Hasnat, MBBS  
04140630 Anwar Islam, MBBS  
04140713 MOHD. FAYSAL ALAM, MBBS  
04143008 Nadim Ahmed, MBBS  
04143019 AMRITA KUMAR DEB NATH, MBBS  
04143022 MAHMUDUR RAHMAN, MBBS  
04143023 MOHAMMAD ALI, MBBS  
04145356 Sadia Afrin, MBBS  
04146231 FARZANA RAHMAN, MBBS  
04146234 MD. KARIMUL HUDA SHIRAJI, MBBS  
04146236 MD. FARUQUE HOSSAIN, MBBS  
04146238 MD. SHAHEDUL KABIR, MBBS  
04146239 GOBINDA KARMAKER, MBBS  
04146240 GOLAM MOHAMMAD MOHIUDDIN, MBBS  
04146242 MOHAMMAD ABDUL MATIN, MD  
04146243 NUSRAT JAHAN SABIN, MBBS  
04146844 Biswojit Mondal, MBBS  
04148233 Saad Ahmed Tanmoy, MBBS  
04148243 Joybaer Anam Chowdhury, MBBS  
04150484 Mohammad Ali Rume, MBBS MD  
04151095 Kamrun Nahar, MBBS  
04151658 Mrinal Kanti Sana, MBBS  
04151704 Swadesh Barman, MBBS  
04151978 Mamunoor Rashid, MBBS  
04153204 MD MAHMUDUL ALAM, MBBS  
04153227 Tariq Musharraf Husain, MBBS  
04153230 Karishma Shamarukh, MBBS  
04153347 Md Saiful Islam Patwary, MBBS  
04153683 A.K.M. Zahin, MBBS  
04154121 Shahryar Ahmad, MBBS



04154459 Dr. Md. Golam-Ur- Rahaman, MBBS  
04155219 HASAN MAHMUD, MBBS MD  
04155894 Md Abul Kalam, MBBS  
04155907 Dr. Md. Shamim Chowdhury, MBBS MD  
04155908 Dr.Noor E Jabeen, MBBS MD  
04156065 Anirban Modak, MBBS  
04156429 Mithun Saha, MBBS MD  
04156462 Jewel Barai, MBBS  
04156700 MD FARHAD HUSSAIN, MBBS  
04156704 RAKIBUL ISLAM MOLLAH, MBBS  
04156711 DEBABRATA DAS, MD  
04156714 MUHAMMAD NAZMUL ALAM, MBBS  
04156724 NURMAHAL RUBAIYA, MBBS  
04156730 ISSA MUHAMMAD BAKER, MBBS

### List of Fellows in Last Six Months

03285279 Md Nurul Amin Miah, MBBS MD FACP  
03338319 Durba Halder, MBBS MD FACP  
03354220 Abdul Hannan Miah, MD FACP  
03355420 Samira Rahat Afroze, MBBS FACP  
03462112 Md Sakhawat Hossain, MBBS FACP

### Post-acute COVID-19 syndrome

Coronavirus disease 2019 (COVID-19) is a serious respiratory disease that resulted from infection with Severe Acute Respiratory Syndrome Coronavirus 2 (SARSCoV-2). One of the most critical issues related to the COVID-19 is the high spread rate, millions of people have been infected around the world, and hundreds of thousands of deaths till now had been recorded. COVID-19 infected patients suffer from different symptoms like fever, dry cough and fatigue which is mild in about 80% of cases, but the severity of the case may progress to develop ARDS or respiratory failure.<sup>1</sup>The severity of the disease is related to age, comorbidities and duration of disease of the infected subjects. For mild cases symptoms, may last for 2 weeks, while for the severe cases it ranges from 3 to 6 weeks.<sup>2</sup>

However, many cases have suffered from different symptoms after recovery from the disease which are different from COVID-19 symptoms. Scientific and clinical evidence is evolving on the sub-acute and long-term effects of COVID-19, which can affect multiple organ systems. Post-recovery manifestations were also studied after the severe acute respiratory syndrome (SARS) attack in 2003 reflecting many symptoms experienced by studied subjects such as fatigue, myalgia, depression and weakness.<sup>3</sup>

While the definition of the post-acute COVID-19 timeline is evolving, it has been suggested to include persistence of symptoms or development of sequelae beyond 3 or 4weeks from the onset of acute

symptoms of COVID-19.<sup>4</sup> Post-acute COVID-19 is divided into two categories: sub-acute or ongoing symptomatic COVID-19, which includes symptoms and abnormalities present from 4–12 weeks beyond acute COVID-19; and chronic or post-COVID-19 syndrome, which includes symptoms and abnormalities persisting or present beyond 12 weeks of the onset of acute COVID-19 and not attributable to alternative diagnoses.<sup>5</sup>

In different studies, prevalence of post-acute covid-19 symptoms vary from 32% - 86% of patients recovered from COVID-19.<sup>6</sup> Potential mechanisms contributing to the pathophysiology of post-acute COVID-19 include: virus-specific pathophysiologic changes; immunologic aberrations and inflammatory damage in response to the acute infection; and expected sequelae of post-critical illness. There is a relationship between the severity of post-acute COVID-19 manifestations and the severity of the disease. The severe cases express high severity of post-acute COVID-19 symptoms compared with those suffering from mild condition.

### **The system specific symptoms**

#### **Pulmonary:**

Dyspnea, decreased exercise capacity and hypoxia are commonly persistent symptoms and signs. Reduced diffusion capacity, restrictive pulmonary physiology, ground-glass opacities and fibrotic changes on imaging have been noted at follow-up of COVID-19 survivors.

#### **Hematologic:**

Thromboembolic events have been noted to be <5% in post-acute COVID-19 in retrospective studies.

#### **Cardiovascular:**

Persistent symptoms may include palpitations, dyspnea and chest pain. Long-term sequelae may include myocardial fibrosis or scarring (detectable via cardiac MRI), arrhythmias, tachycardia and autonomic dysfunction.

#### **Neuropsychiatric:**

Persistent abnormalities may include fatigue, myalgia, headache, dysautonomia and cognitive impairment (brain fog). Anxiety, depression, sleep disturbances and PTSD have been reported in 30–40% of COVID-19 survivors. Critical complication such as stroke can also occur.

#### **Renal:**

Resolution of AKI during acute COVID-19 occurs in the majority of patients; however, reduced e-GFR has been reported at 6 months follow-up.

#### **Endocrine:**

May include new or worsening control of existing diabetes mellitus, subacute thyroiditis and bone demineralization.

#### **Gastrointestinal and hepatobiliary:**

Prolonged viral fecal shedding can occur in COVID-19 even after negative nasopharyngeal swab testing. COVID-19 has the potential to alter the gut microbiome, including enrichment of opportunistic organisms and depletion of beneficial commensals.

#### **Dermatologic:**

Hair loss is the predominant symptom and has been reported in approximately 20% of COVID-19 survivors

Multisystem inflammatory syndrome in children (MIS-C):

Diagnostic criteria of MIS-C is <21 years old with fever, elevated inflammatory markers, multiple organ dysfunction, current or recent SARS-CoV-2 infection and exclusion of other plausible diagnoses. Typically it affects children >7 years and disproportionately of African, Afro-Caribbean or Hispanic origin.

Cardiovascular (coronary artery aneurysm) and neurologic (headache, encephalopathy, stroke and seizure) complications can occur.<sup>6,7</sup>

### **Assessment**

Assessment of progression or recovery of pulmonary disease and function may include home pulse-oximetry, 6MWTs, PFTs, high-resolution computed tomography of the chest and computed tomography pulmonary angiogram as clinically appropriate. Patients may be monitored with echocardiogram and electrocardiogram, blood sugar, thyroid function and other investigation as needed.

### **Management**

The management of post-acute COVID-19 includes pragmatic and symptomatic management with an emphasis on holistic support until the results of long-term follow-up studies are available and severe complications have been eradicated. Most of the reported manifestations were mild reversible symptoms that could be relieved without medical interventions.<sup>8</sup> Referral to a specialist rehabilitation service does not seem to be needed for most patients.

Self-management includes – daily pulse oximetry over three to five days may be useful in the assessment and reassurance of patients with persistent dyspnea in the post-acute phase, especially those in whom baseline saturations are normal and no other cause for dyspnea is found on thorough evaluation, proper diet, adequate sleep, quitting smoking, limiting alcohol & caffeine, rest and relaxation, self-pacing and gradual increase in exercise if tolerated.

Cough seems to be best managed with simple breathing control exercises and medication when secondary bacterial infection or pleural inflammation is suspected. Breathlessness tends to improve with breathing exercises. Those who have had significant respiratory illness may benefit from pulmonary rehabilitation.

Direct oral anticoagulants and low-molecular-weight heparin may be considered for extended thromboprophylaxis after risk–benefit assessment in patients with predisposing risk factors such as immobility, persistently elevated d-dimer levels (greater than twice the upper limit of normal) and other high-risk comorbidities such as cancer.

Clinical assessment of the post-acute COVID-19 patient with chest pain should follow similar principles to that for any chest pain. Cardiac manifestations should be managed according to standard guideline.

COVID-19 survivors with persistent impaired renal function may benefit from early and close follow-up.

Patients with newly diagnosed diabetes in the absence of traditional risk factors for type-2 diabetes, suspected hypothalamic–pituitary–adrenal axis suppression or hyperthyroidism should be managed accordingly.

### **Conclusion**

Most of the subjects recovered from COVID-19 experienced several manifestations after the last negative PCR which could be mild symptoms or more critical manifestations. All subjects recovered from

COVID-19 should undergo long-term monitoring for evaluation and treatment of symptoms and conditions that might be precipitated after recovery from COVID-19.

#### References

1. Wu Z, McGoogan JMJJ. Characteristics of and important lessons from the coronavirus disease 2019 (COVID-19) outbreak in China: summary of a report of 72 314 cases from the Chinese Center for Disease Control and Prevention. 2020.
2. COVID, C. Severe outcomes among patients with coronavirus disease 2019 (COVID-19)—United States. February 12–March 16, 2020.
3. Moldofsky H, Patcai J. Chronic widespread musculoskeletal pain, fatigue, depression and disordered sleep in chronic post-SARS syndrome; a case-controlled study. *BMC Neurology*. 2011; 11(1):37.
4. Datta, S. D., Talwar, A. & Lee, J. T. A proposed framework and timeline of the spectrum of disease due to SARS-CoV-2 infection: illness beyond acute infection and public health implications. *J. Am. Med. Assoc.* 324, 2251–2252 (2020).
5. Greenhalgh, T., Knight, M., A'Court, C., Buxton, M. & Husain, L. Management of post-acute COVID-19 in primary care. *Brit. Med. J.* 370, m3026 (2020)
6. Nalbandian A, Sehgal K, Gupta A, Madhavan MV, McGroder C, Stevens JS, Cook JR, Nordvig AS, Shalev D, Sehrawat TS, Ahluwalia N. Post-acute COVID-19 syndrome. *Nature medicine*. 2021 Mar 22:1-5.
7. Kamal M, Abo Omirah M, Hussein A, Saeed H. Assessment and characterisation of post-COVID-19 manifestations. *International journal of clinical practice*. 2021 Mar;75(3):e13746.
8. Gemelli Against COVID-19 Post-Acute Care Study Group. Post-COVID-19 global health strategies: the need for an interdisciplinary approach. *Aging Clin Exp Res*2020; doi:10.1007/s40520-020-01616-x. pmid:32529595

#### Conclusion:

We have learned a lot from the start of the pandemic to this very day. We have endured through many uncertainties and we are hoping that the worst is over, but one can never be too sure. Once the vaccination program rolls out in full capacity, we can finally breathe a sigh of relief. Misinformation and lack of adequate vaccination are still challenging that we face today and thus we must strive to educate the population about the hard reality while simultaneously providing the means to return to a livelihood that is similar to how things were pre-Covid 19. While the world may never go back to being the same, we hope that there is a brighter future ahead once vaccine rolls out properly. ACP Bangladesh Chapter hopes that the world can enter into a better, post-covid era soon.

Prof. HAM Nazmul Ahasan

Governor, ACP-Bangladesh Chapter.