



# American Healthcare Professionals and Friends for Medicine in Israel

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**Dr. Jonia Alshiek** is the only Druze senior consulting urogynecologist in Israel.

She is an APF 2017-2018 Fellow in Pelvic Floor Ultrasound and Reconstructive Surgery at Inova Fairfax Medical Campus Women's Center in Falls Church, Va., affiliated with George Mason and Virginia Commonwealth Universities.

"I came from a conservative community," she says. "As a female gynecologist I felt I could really help people in my community who are very shy about going to a male gynecologist, especially with urogynecology problems. I thought about this a lot. I worked with religious communities early on with great success.

"The fact that you are female and have an empathetic approach is very very important when working with women."

Alshiek is an attending physician at Tel Aviv Sourasky Medical Center's Lis Maternity and Women's Hospital, where she is a senior consulting urogynecologist and obstetrician/gynecologist (OB/GYN). Lis is a premier hospital for women's care in Israel with more than 1,000 deliveries a month. Alshiek, an attending at Lis for three years since her residency and fellowship there, does most of her work on the urogynecology and pelvic floor unit.

A urogynecologist is a physician with special training in female urology-gynecology that focuses on the evaluation and treatment of female pelvic floor disorders including: pelvic organ (uterus, bladder and rectum) prolapse, urinary and fecal incontinence, urinary infections and pelvic floor trauma following vaginal delivery. Treatment involves both surgical and non-surgical approaches.

Alshiek says one of the reasons she decided to specialize in urogynecology was because of a significant knowledge deficit in this field. She felt she could contribute greatly through research, scholarship, clinical care and education.

"While many women suffer from pelvic floor disorders, both patients and clinicians ignore the problem and the numbers are underestimated. It's very important to increase awareness among women *and* professionals.

"It is important to let women know that it's perfectly natural to talk openly about pelvic floor disorders and to seek treatment. I want people to 'talk it up.'

"You can't imagine how you can change a woman's life with proper urogynecology treatment," Alshiek says. "Before treatment a patient's quality of life can be very bad. She can be depressed. It can affect her daily activities, her work, her relationship with her husband/partner/family and her sexual function -- just about everything.

"In the United States, for example, 13 percent of women suffer irreversible immediate pelvic floor damage during childbirth and another 30% have trauma that effects women for years to come."

As far as Israel is concerned -- The higher the childbirth rate is, the greater the need for urogynecological care following vaginal birth. And in Israel the need is very great, she says.

With an average of three children per woman, Israel has the highest fertility rate in the Organization for Economic Cooperation and Development (OECD) by a considerable margin and much higher than the OECD average of 1.7

*The OECD is a forum where the governments of 34 democracies with market economies work with each*

*other, as well as with more than 70 non-member economies, to promote economic growth, prosperity and sustainable development.*

“When I chose to study medicine I was the only Druze female from my village pursuing an academic medical career,” Alshiek says.

“Today it is different, but when I decided to attend medical school it simply was not acceptable for a Druze female to have higher career ambitions. My going into medicine was a kind of ‘break-through.’ “

(Indeed, she started a kind of family trend. Her younger sister is a resident in neurology.)

Alshiek’s family was, however, very supportive. In fact, her mother, a math teacher, was the first Israeli Druze woman to attend university. Her father is a math teacher.

“My parents are the most amazing parents I know. All my life they have encouraged me to do what I wanted to with my life. I’ve been very lucky and I’m very grateful.”

Still, when she applied for an APF Fellowship, they asked, “Why do you need to do more things when you’re already in such a unique position?”

“But that’s my personality, I’m always very curious.” (Now Alshiek also is the only one from her community who’s done a fellowship abroad such as the one she’s doing now.)

The 36-year-old native of the village of Abu Snan, in the Western Galilee, knew she wanted to become a physician when she was just a preschooler. “For me, learning medicine was something I had wanted for myself since I was about four years old. Every single day I asked my parents to buy me doctor toys. I can’t explain it. It wasn’t any particular event or family member in the profession influencing me.

“At the same time my goal was to help people, to be empathetic. I also can’t explain my desire to work with people; it’s just something engrained in me.”

Alshiek attended medical school at Technion in Haifa. “It was close to my home and parents. It was, therefore, more ‘acceptable.’ So I took into consideration their wishes.”

She chose OB/GYN in her fourth year. “It was during my clerkships that I found I really liked working in this specialty. It’s one of the few fields in medicine where you have rapidly alternating happy *and* sad moments.

“At the end of most deliveries you can say ‘congratulations.’ And then there are sad things for which you don’t have happy solutions and don’t know how to help people – two sides of the scale -- sad and happy.

“The other thing is that I wanted to combine surgery with endocrinology and imaging. You can do this in OB/GYN. It’s a very diverse specialty.”

To further her education, Alshiek volunteered to stay late nights in the delivery room and did extra OB/GYN research.

A one-year internship at Chaim Sheba Medical Center at Tel HaShomer preceded an OB/GYN residency at Tel Aviv Sourasky Medical Center.

“My two options were Sheba and Sourasky and I was accepted to both. Both are large comprehensive facilities with great technology. I desired the variety and scale of complicated cases that only a tertiary care referral center could offer. But I somehow felt more attached to the department at Sourasky. As such, I chose to do my residency there,” Alshiek says.

“And Tel Aviv itself is quite a unique environment. It is ‘open’ day and night. And it’s very diverse. You have very very high society, homeless people, tourists and more -- people from everywhere and of every race. But we treat everyone the same. As a physician you see it every single day and you can’t consider socio-economic levels.

“There’s one more thing that is very beautiful about the hospital’s diverse population. We see complicated patients from Palestine. People cross the border who don’t even have permission to

come to Israel except for their treatment. It's very beautiful to see, so humane. I have not encountered such tranquility and humanity as this in other medical facilities."

While the large volume of patients creates hard work, it also toughens students up for the real world of medicine.

"It's not easy in terms of numbers and night shifts, 40 to 50 deliveries every 24 hours," says Alshiek. "I can't forget one particularly tough night shift after which my supervisor said, 'Now you've seen practically everything written in a textbook.'

"While it's a highly demanding place, you feel very independent when you finish residency, very secure in your knowledge. The program's strong academics also help.

"When it came time for my final examinations I had already seen an example of everything in my work."

The "ah-ha moment" for her urogynecology choice came during her residency when she was doing a six-month plastic surgery elective, such a rarity in her field that she had to get special permission to do it.

"I believe every surgeon should work in plastics for at least a couple of months while training. You really learn how to deeply respect the tissue and acquire other techniques, more than surgeons do – different techniques for incisions, stitching and wound treatment -- many things a surgeon really should know."

When Alshiek returned to her department she felt urogynecological surgeries were similarly beautiful. "They are very gentle and elegant. These are the surgeries I really love. They are not rushed like C-sections when everything is very stressful and you are focused only on getting the baby out.

"In my field surgery is not rushed. I enjoy every moment and could do it for hours!"

For her other elective she chose ultrasonography. This would later bear fruit when she explored post doctoral fellowships.

After Alshiek finished her residency she completed a two-year urogynecology fellowship at Sourasky and then assumed her current position.

Alshiek arrived in Virginia in December, 2017 with her husband Roni, 38, a judge and their two daughters – Emily, 5 and Alma, 2 ½. They live in Falls Church.

### **WHY DID YOU CHOOSE INOVA?**

"First of all, I wanted to work with Dr. S. Abbas Shobeiri. People come from all over the world to be evaluated by him for pelvic floor disorders. His specialties include: 3D pelvic floor ultrasound, complex pelvic floor repairs and reconstructive surgery, evaluation of vaginal birth-related injuries and assessment of urogynecological mesh and other surgical complications.

"People also come with very rare conditions such as vaginal agenesis. Seeing these is very important for my learning."

*Vaginal agenesis is a birth defect where the vagina does not develop normally, affecting perhaps 1/5,000 females.*

Shobeiri is Vice Chairman of Gynecologic Subspecialties at Inova Fairfax and a Professor of Bioengineering at George Mason University.

"He is also world-renowned for his research as well as his work with medical devices. Dr. Shobeiri has written more than 150 original articles and several books. I am thankful for the opportunity to have written two book chapters in 'The Innovation and Evolution of Medical Devices: Vaginal Mesh Kits' (October, 2018).

"That's another reason why I chose Inova – it has a great research infrastructure and unique databases. Dr. Shobeiri, alone, has 20 years of research for exploration. The program is designed for advanced assistant- and associate professor- level fellows eager to use their statistical analysis knowledge and publish.

As for his relationship with George Mason – Shobeiri leads a one-of-a-kind, internationally

cutting edge research and development consortium called Ultrasound of Pelvic Floor Investigation & Therapeutics (UPFIT). UPFIT collaborates with George Mason scientists.

“We have regular meetings where we investigate the pathophysiology of pelvic floor disorders in ways that no other center in the world is capable of. It is a great opportunity for a fellow to work with this very special and exciting collaborative group.”

In addition, Shobeiri is involved in the development of many new technologies. “We’ve already tried a new device – a sling for fecal incontinence. And now we are preparing a manuscript.

“I would also say that I wanted the volume and diversity of patient issues. Inova Fairfax is a very big center, with five pelvic floor surgeons performing 600-900 surgeries a year – much more than at Lis.”

#### **WHAT DO YOU DO IN A TYPICAL FELLOWSHIP WEEK?**

“I start every day between 7:30 a.m. and 8:00 a.m. and finish around 6:30 p.m. I have no night or weekend hours.

“I perform three days of data analysis, one day of clinic and one day of observational work in the operating room which again pertains to ongoing research studies. In a clinic visit Dr. Shobeiri and I first listen to the patient and answer any questions. Then he and I ask questions and he examines the patient. Together we formulate a differential diagnosis and a treatment plan. The experience is unique as the evaluation involves 3D ultrasound to evaluate the pelvic floor anatomy. Even though this may sound like a simple and reasonable thing to do, most urogynecologists do not possess the core competency to perform or interpret these ultrasounds. I can now analyze the patient’s 3D ultrasound results and I have learned to perform this unique ultrasound technique.

“I have also performed many cadaveric dissections with Dr. Shobeiri. We routinely spend eight or nine hours on one cadaver. I’ve been eager to learn

every single surgical procedure as well as sharpen my laparoscopic skills.

“I have learned that each surgery needs to be individualized and that the number of surgeries that can be performed is infinite. And I have seen surgeries that are not performed elsewhere.”

At the start of the program Dr. Shobeiri asked Alsheik about her goals for the one-year-fellowship and then designed a plan that would ordinarily take two to three years to complete. “For example, a typical research scholar doesn’t write a book chapter in the first year, but I’ve now completed four.

“Every day I am also at the hospital spending about two hours at Inova’s very well-known Advanced Surgical Technology and Education (simulation) Center practicing my skills. I can practice advanced laparoscopic and robotics skills too.”

While Alsheik doesn’t have night or weekend hours, creativity doesn’t know a clock. “Sometimes I start a manuscript and it just can’t wait,” she says. “I get the inspiration to work and I work at night after the kids go to sleep.”

Because, for her, a fellowship is what you make of it.

“This program is not for the faint of heart. Scholars are chosen carefully as the program requires both one-on-one mentorship and intensive self-directed learning. It is very demanding, of course, but you are responsible for what you want to do and I want to take advantage of everything.

“At the beginning you feel like you are in the middle of an ocean of knowledge and literally gasping for air. You may be tempted to quit as it seems all so overwhelming. It has been a life-changing experience for me.”

All of her hard work is already paying dividends down the road. On the basis of her efforts so far she has received a grant from the American Urogynecologic Society to attend an advanced pelvic surgery program in Florida.

Yet another move.

### **AND WHAT ABOUT YOUR RESEARCH?**

“The research I’m doing is amazing. It’s mainly concerning 3D pelvic ultrasound. I’m using ultrasound as a measure of different pelvic floor disorders such as: prolapsed pelvic organs – uterus, bladder and rectum, incontinence – urinary and anal, mesh complications and surgery complications in general. Ultrasound really affects treatment and management of patients.

“I’m also evaluating how aging affects the pelvic floor muscles, using pressure sensors in the vagina, 3D ultrasound and other gauges.”

Alshiek has other types of projects in the works including one comparing different surgery techniques for repairing pelvic floor disorders and one on treating *vaginismus* – spasm of pelvic floor muscles – by injecting Botox directly into the muscles.

So far she has published the results of her work in four peer reviewed journals and has 11 more under review for publication. “And then there are 13 additional projects in development.”

### **WHAT ABOUT MENTORS?**

“Oh, Dr. Shobeiri, of course. He is a role model for what I’d like to be as a healer, as a curious person, and as a humble human being.

“One of the special things about him is that he does everything. He’s an excellent surgeon and research mentor. Also, his manner with people is incredible! It’s a rare combination of clinical skills and people skills, not something you see in all physicians and something I had not experienced before.

“Dr. Shobeiri asks all the right questions, but he never stops anyone from talking and asking her own questions. He says that the first thing is to listen to everything the patient has to say, to take every complaint seriously until proven otherwise. Moreover, Dr. Shobeiri is always trying to be a better person.

“I’d been asking myself, ‘Why am I doing this? It’s so hard and such a rare thing.’ Now that I’ve met him I know. When I compliment Dr. Shobeiri, he says that he has learned much more from me than I have learned from him and he genuinely believes that.”

In Israel Alshiek has had two clinical mentors -- Dr. David Gordon, her principal mentor, is Director of the Urogynecology and Pelvic Floor Unit at Lis. Alshiek did many surgeries with him during the two years of her urogynecology clinical fellowship. Another mentor, Dr. Asnat Groutz, is a Lis consulting urogynecologist.

### **HOW DO YOU MANAGE WORK/LIFE BALANCE?**

“It has been mostly just me alone with the girls. My husband received a substantial promotion just before we left and had to return to Israel the spring after we arrived. If I had to work night and weekend hours I truly couldn’t manage.

“We live nexdoor to the hospital and the girls are in a wonderful daycare center there that opens around 6 a.m., with staff there until around 7 p.m. I haven’t had to stay home once.

“It was hard for them in the beginning with language and all. Their first language is Hebrew and their second is Arabic. When we arrived I just immersed them in this new world,” Alshiek says. “But eventually they became adjusted and now they enjoy every single day.”

At home before bed, just like at work, it’s 110 percent. Alshiek, devoted urogynecology fellow, becomes Alshiek, center of her children’s lives.

“There’s no ‘me’ in this. During the hours we have together, weekends and after pick-up from daycare, it takes all my energy to serve their needs. They need their ‘mommy time.’ ”

Alshiek says she receives so much support from the many successful relationships she’s built since her arrival, that she feels like she has a second family in Virginia. “On weekends, Dr. Shobeiri often invites us to his house to play with his kids. All in all, we feel very much wrapped in love and attention.

“It’s definitely not for everyone. Every single day you have to be happy and strong because your main goal is to succeed here.

“I was the one who chose this very long journey and it has not been easy at all, but I’m very happy.”

**ANY TRAVEL?**

“Every weekend we have plans. We went to Miami, we went to New York City twice, we went to New Jersey and we often go to Washington DC – it’s so close and I love it there. Also, there’s so much to do in Virginia with all the museums and monuments.

“I’ve traveled some, without the kids, to conferences. For example, I’ve been to the American Urogynecological Society in Chicago and to the International Continence Society in Philadelphia to present our research.”

**WHAT DO YOU HOPE TO DO WITH YOUR FELLOWSHIP EXPERIENCE WHEN YOU RETURN TO ISRAEL?**

“I plan to create multi center research opportunities and tap into the existing research networks involving Dr. Shobeiri and his collaborators. I know

Dr. Shobeiri will be there for me no matter where life takes me. He plans to come to Israel to be involved with many programs, including clinical development. And he will come to operate with me on complicated cases, especially those involving advanced pelvic reconstructive surgery or mesh complications. I also plan to further develop laparoscopic urogynecological surgery at Lis. Dr. Shobeiri has many friends in the Israeli academic and medical device communities, and I can see him becoming integral to the Israeli urogynecology experience.”

“And I’m working on securing 3D pelvic floor ultrasound equipment for my department. It can be an expensive investment, but I plan to achieve this goal and provide optimal individualized treatment for women.”

**WILL YOU BE THE ONLY ONE IN ISRAEL TRAINED IN THIS 3D TECHNOLOGY?**

“I plan to share my hard-earned knowledge with those who are willing to learn.”

**American Physicians Fellowship for Medicine in Israel**

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