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The ISfTeH Newsletter is published quarterly for members of the telemedicine community to provide up-to-date information regarding current happenings in the international telemedicine and e-Health industry.

Feel free to share this Newsletter with business colleagues by forwarding it to your associates.

If you would like to submit an article or be added to our email distribution list, please email Aliana at asvechak@amdtelemedicine.com.

Letter from the Executive Director

Dear Reader,

It is my pleasure to welcome you to this fourth issue of the rejuvenated ISfTeH Newsletter - the final issue in this first year of the restart that began with the September 2011 issue. I would like to share with you information on events that have marked our eHealth landscape over the past few months.

One is the publication of a special theme issue on eHealth of the WHO Bulletin, the world’s premier public health journal. Volume 90, Number 5 appeared on May 1, 2012. It represents a significant step in the effort to mainstream eHealth in health systems the world over, and is the very first such issue of the Bulletin, dedicated entirely to eHealth. An earlier special theme issue on Bridging the Know-Do Gap in Global Health, which included sections on eHealth, was Volume 82 Number 10 published in October 2004.

In a section of this theme issue titled “The Big picture for eHealth” leading thinkers in the field discuss how new technologies can lead to better health for all. Among the four persons interviewed was Archbishop Emeritus Desmond Tutu, Chair of the Global eHealth Ambassadors Program (GeHAP) of the ISfTeH. The others were, Hamadoun Touré secretary-general of the International Telecommunications Union, a United Nations specialized agency which aims to improve the standards of information communication technologies in underserved areas, including eHealth; Tore Godal, Special Adviser to the Norwegian Prime Minister on global health; and Ariel Pablos-Méndez, Assistant Administrator for Global Health at the US Agency for International Development (USAID). In the “Perspectives” section I was able to share my thoughts on a framework for organizing the eHealth profession in countries, and to propose what I consider the six eHealth Grand Challenges. To delve further into the
We look forward to many more such special theme issues focused on our field, and in between them, many more articles on eHealth in regular issues of the Bulletin. Your involvement in preparing articles for the Bulletin will go a long way to ensure continued visibility of eHealth to policy and decision makers until the next theme issue.

On May 4, 2012 the African Development Bank (AfDB) launched a competition for innovative and sustainable information and communication technology (ICT) initiatives for the health sector in Africa. The ISfTeH participated in the launch by putting out a special "blast" issue of the Newsletter, as the next regular issue would not appear until after the May 30, 2012, deadline for submissions. Thanks to this involvement, the AfDB received over one hundred applications.

The competition aims to a) document what is being done in the field of e/mHealth in Africa, b) encourage the production and sharing of evidence on eHealth solutions and c) provide an added value through the sharing of lessons learnt in e/mHealth. Click here for more information on the award. I am privileged to co-chair the technical committee charged with evaluating the proposals and refining the process of selecting a winner of this first eHealth award of the AfDB. I look forward to many more of you participating in future editions of the award.

Finally, an event which is just round the corner is the annual meeting of the GeHAP, which will be held at the premises of the Gulbenkian Foundation in Lisbon on June 25, 2012, with five of the six ambassadors - including the Chair - in attendance, as well as the entire Executive Committee of the ISfTeH. The meeting is expected to outline a future vision for the program and provide an opportunity to identify new partners of the GeHAP.

The GeHAP meeting will be the last key activity for the Society this summer, the next major event being the 17th Annual Conference of the ISfTeH in Abuja, Nigeria on November 7-9, 2012. The northern hemisphere summer tends to be a slower period for the Society, what with many institutions and individuals taking a well-deserved vacation around July and August. So, let me also take this opportunity to wish you all a restful summer break - one that will help you to come back in the fall reinvigorated to carry on the worthy cause of improving health locally, regionally and globally through the judicious use of information and communication technology.

Prof. S. Yunkap Kwankam
ISfTeH Executive Director

In honor of Professor Michael Nerlich
interested in joining the ISfTeH network to expand your global reach or to learn from existing experiences and best practices.

Membership information is available here.

Or send an e-mail with your question or membership request.

Michael Nerlich was born in Landshut, Germany, in 1953. No one then could possibly have imagined consulting a doctor over the net or video, or of being operated on by a surgeon thousands of kilometers away. During his medical studies at the Ludwig-Maximilians-University in Munich, the concept of telemedicine was still unknown and it would take a while for Professor Nerlich to come into contact with it.

Professor Michael Nerlich successfully led the ISfTeH as President from the society's relaunch in 2003, until 2011. His tenure oversaw several important milestone events in the society and in telemedicine. The ISfT was renamed the ISfTeH in 2005 in recognition of the increasing importance of eHealth. Since 2007, the ISfTeH can claim the status of an "NGO in official relation with WHO". 2008 saw the recruitment of Professor Yunkap Kwankam as Executive Director, a move which has further strengthened the ISfTeH. Annual international Med-e-Tel congresses and conferences have cemented the ISfTeH's place in the telemedicine landscape.

eHealth is still a young discipline, but it is already impossible to imagine medicine without it. Who would have thought it possible even a few years ago, that in 2012 the ISfTeH (International Society for Telemedicine and eHealth) would include members from over 70 countries? Or that the society would be represented worldwide by ambassadors such as Nobel Peace Prize winner Desmond Tutu, musician Peter Gabriel and former President of Brazil Fernando Henrique Cardoso?

The untiring commitment and rich technical knowledge of Professor Nerlich have helped make the ISfTeH into a professional, successful organization which has realized several effective telemedicine projects. I want to offer my sincere thanks to Professor Nerlich for his efforts and wish him all the best in his private and professional future at the University Clinic at Regensburg. I look forward to taking over the presidency of the ISfTeH and continuing his vision. And who knows how many members the ISfTeH will have in a few years from now?

Dr. Andy Fischer, President, ISfTeH

Professor Dr. Michael Nerlich

Upcoming ISfTeH-Supported Telemedicine Events

**Americas Region**

**TELEHEALTH Workshop**
Mexico City, Mexico
June 25-27, 2012

**3rd International Conference on Transforming Healthcare with IT**
Hyderabad, India
August 31 - Sept 1, 2012

**ICT4Health Conference**
Capetown, South Africa
Sept 12-13, 2012

**SFM'12 Meeting**
Saratov, Russian Federation
Sept 25-28, 2012

**Health 2.0 Europe (2012)**
Berlin, Germany
Nov 6-7, 2012

**17th ISfTeH International Conference**
Abuja, Nigeria
Nov 7-9, 2012

**Global Telehealth 2012**
Sydney, Australia
Nov 25-28, 2012

ISfTeH Meetings and Conferences

**17th ISfTeH International Conference**
Abuja, Nigeria

**17th World Congress**
International Society for Telemedicine & eHealth

...making eHealth Work!

The annual ISfTeH Conference is held each Fall.
Telemedicon is an initiative of the Telemedicine Society of India to increase the awareness and practice of telehealth in India. Telemedicon brings together telemedicine experts and healthcare professionals from around the world. It is truly a platform for learning and collaboration with experts in telemedicine. Today the use of telemedicine is finding wide use in our country and we expect a large number of potential users, apart from the regular users to participate in this mega event.

Telemedicon 12 is an opportunity for exploring the immense potential of telemedicine as it brings national and international experts and service providers together in this forum. This three day conference attracts over 500 participants from a wide spectrum of healthcare practitioners and telemedicine experts.

Med-e-Tel 2013
Luxembourg
April 10 - 12, 2013

For more information on these events, please visit www.isfteh.org.

Corporate Member Spotlight

Health2Health works with supplier companies, large and small, who are either already active in the UK health market or want to enter it. For these companies
we offer a variety of services ranging from a rapid assessment of their UK market entry potential, through to starting up and running their UK-based business for them. Our consultants work as part of the client team, providing highly experienced staff acting on their behalf. This gives both new entrant companies and existing suppliers a professional edge, which is often a crucial factor in determining success. Skilled staff are difficult and expensive to acquire. Having a “part time” executive can be a good solution during the start-up phase of a market entry programme. Through our network we can access and introduce, where appropriate, recognized experts in the field, including clinical, NHS executive, government policy, regulatory & compliance. Our clients are typically health IT product or service suppliers, Biotech companies, device manufacturers, generic product suppliers without in-house health sector knowledge. We have experience in both the NHS and private health provider and life sciences markets and are fully familiar with the UK regulatory and compliance requirements.

Our Approach

Rapid Assessment Studies
It is sometimes less than obvious whether a product will meet local market needs or whether the timing or political drivers are right for the client to enter a new market. We will carry out a rapid assessment that, in a few days, helps the client to answer the key questions and agree whether or not it makes sense to proceed with a strategic study and the preparation of a business plan.

Market Analysis
An in-depth knowledge of the eHealth and health informatics market throughout Europe and the US and our extensive library, allows us to complete market studies and analyses for a wide range of products rapidly and economically. Client reports typically cover market size, market characteristics and process, value for money analyses, buying motivation, trends and outlook. They identify the principal incumbents and their strengths and weaknesses. The market analysis may also include a competitive analysis, although this may also be done as a discrete study.

Product Reviews
A number of our clients have successful businesses in other market sectors in the UK, but little or no business in the healthcare market or the NHS. The NHS is unique and the determination of how to launch a new product is always challenging. The product review will compare the capability/functionality of a product to existing and projected market needs. This work can include:

* functional comparison and gap analysis
* dataset review
* language and terminology issues (clinical and localisation)
* prices and pricing structure
* service and support needs

The review will set out the Critical Success Factors for the product to achieve market acceptance.

Competetitive Analysis
Health2Health keeps up-to-date with the product capabilities of most of the leading suppliers, and can rapidly supplement our knowledge when a particular competitive analysis is needed. In making these analyses we only use information that is available in the public domain. Competitive evaluations, including comparing how different functionality can change the value analysis by the prospective purchaser, can be done readily for most health application products, including:

* all EPR & PAS systems
* ePrescribing and pharmacy
* pathology systems
* RIS/PACS
* ISTC offerings
* coding products
* order entry/results reporting
* nursing
* care records
* child health
* renal systems
* primary care systems
* care planning and care pathway products
* staff rostering
* capacity management
* financial systems
* document management

We have developed templates setting out the comparison criteria, thus saving time when doing the work.

**Business Plans**

The development and delivery of a business plan normally follows the market analysis, product review and competitive analysis work. Sometimes we do this work ‘step by step’ but often as one integrated study. We work closely with the client to assess the suitability and competitiveness of their products and services for the healthcare market, their strengths and weaknesses and the options for market entry. The deliverable is usually a complete business plan.

**The HealthSystems Group**

**Health2Health** is a wholly owned subsidiary company of Genio Health & Life Sciences Ltd; Health2Health was formed to serve eHealth and Health Informatics Supplier clients. The business mission is to provide the highest possible quality of healthcare informatics consultancy to the NHS and to private healthcare providers. About 70% of our work each year comes from existing or previous clients. The company has been involved with many aspects of clinical and health informatics almost since these terms were invented, and is fully qualified to provide expert consultancy both to the healthcare provider and to the technology and product suppliers to the healthcare market, both in the UK and internationally. Each member of our team is chosen carefully based upon their practical healthcare experience, their communication skills and their ability to transfer their knowledge to clients.

For a full overview on Health2Health, click here.

**CONTACT:**

Health2Health Ltd
58 Grosvenor Street * LONDON * W1K 3JB * UK
T: +44 (0)276 290590 E: mboseley@health2health.co.uk

Click here to learn about Health2Health’s affiliate company, HealthSystems Consulting!

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A different Corporate Member will be spotlighted each quarter.
Japanese Telemedicine and Telecare Association (JTTA)

Mission
The purposes of telemedicine and telecare are to contribute to healthcare, medical treatment, and nursing care with telecommunication technology. JTTA is committed to improving the quality of telemedicine and telecare. To do so, we gather relevant information and collaboratively discuss its clinical, economic, and social aspects.

Background of Japanese telemedicine and telecare
The Japanese have achieved the longest life spans of people anywhere in the world, although an aging society and an increase in medical payments require further improvements in the efficiency of Japanese medical systems. Telemedicine and telecare are expected to contribute to resolving some of these current healthcare problems.

Short history of JTTA
The first telemedicine study group was organized in 1996 by the late Prof. Shigekoto Kaikara of Tokyo University and supported by the budget of the Ministry of Health and Welfare. The first conference on telemedicine was held in 1997 in Tokyo. The original study group was the foundation for JTTA (formed later); it was reorganized by Prof. Sumio Murase in 2003 as a telemedicine special interest group of the Japanese Association for Medical Informatics. In 2005, the Japanese Telemedicine and Telecare Association (JTTA) was established as a private organization, and Prof. Murase was elected as its first president. In that year, JTTA began publishing original journals and held its first annual conference in Takamatsu. The chairman of the first conference was Prof. Kazuhiro Hara of Kagawa University; he was elected the second president of JTTA.

Activation of projects related to telemedicine, funded by national budget, required the exchange of outcomes and experiences in a common meeting ground. Accordingly, JTTA’s first Spring Conference was held in Tokyo in February 2009. JTTA Telemedicine Guidelines for telehomecare, based on information accumulated from conference exchanges, was released in March 2011. JTTA was reorganized from a private organization to an incorporated body in April 2011. The first election for managing members of the “new” JTTA was held between April 2011 and June 2011; board members were nominated as well.

Outlines of the current status of telemedicine and telecare in Japan
Clinical telemedicine is classified into the following two categories: doctor-to-doctor (DtoD) telemedicine and doctor-to-patient (DtoP) telemedicine. DtoD telemedicine includes teleradiology and telepathology. The DtoP telemedicine services are mainly operated by local public bodies in cooperation with regional medical associations for regional public healthcare or homecare of chronic diseases patients. Teleradiology services are already commonly operated as commercial services. According to the statistical data maintained by Japan’s Ministry of Health, Labour and Welfare (MHLW), more than 1800 medical facilities might have used teleradiology services in 2008.

The world’s first telepathology project was carried out in 1983 between Tokyo and Ise by Keio University. Some telepathology systems applicable to practical medicine were developed and utilized in the mid-1990s. It is estimated that about 400 facilities currently operate telepathology systems; about 75% of
associated cases utilize telepathology for quick intraoperative diagnoses.

DtoP telemedicine systems are usually constructed with vital monitoring devices, such as a blood pressure monitor, electrocardiogram (ECG), glucose meter, weight scale, and TV phone. The MHLW estimated that about 90 facilities were operating DtoP telemedicine systems in 2008. However, the additional telemedicine fee for neither DtoD nor DtoP has not been approved by the public medical insurance.

Activities of JTTA

1. Academic Meetings
   We regularly hold two conferences every year. One is the annual academic conference and the other is a spring conference.
   a. Annual Academic Conference - This conference is held once each year in autumn in a Japanese city; it is known as JTTA 20xx combined with the city name. A conference chairman is nominated annually. The program is constructed to feature special lectures, symposiums, and workshops based on the conference theme; general presentations (speeches or posters) from telemedicine studies of the members are also included, and an exhibition is held. The 2012 annual conference, JTTA2012 Kobe, is scheduled as shown below:
      Date: September 28-29, 2012
      Place: Hotel Maiko Villa in Kobe
      Chairman: Prof. Masatsugu Tsuji of University of Hyogo

   b. JTTA Spring Conference - A conference is held every February in Tokyo. Its program is constructed to include nominated reports that describe specified telemedicine practices used in national projects.

2. Publications
   We publish a journal (JTTA Magazine) twice each year. Japanese and English papers are accepted through peer review. An editorial committee ensures excellent quality of published articles.

3. Education
   We schedule lectures, workshops, and seminars several times a year to spread information and share practical telemedicine skills.

4. Consultation for central and regional governments
   We provide the latest accurate information, along with our opinions, regarding developments in telemedicine for government officials and politicians.

5. Support for special interest groups
   We support and encourage special interest group (SIG) activities and meetings to seek financial aid.

6. Support for Recovery from Disasters
   We promote and support regional governments’ disaster recovery programs.

7. International Cooperation
   JTTA is a national member of the International Society for Telemedicine and eHealth (ISfTeH). We will hold an ISfTeH international meeting in October 2013 in Takamatsu, Kagawa Prefecture. Also, we engage in international collaborations with foreign organizations.

Contact Information
Email: jtta@takasaki-u.ac.jp
Phone/FAX: +81-27-350-7475
Website: jtta.umin.jp
Office address:
C/O Takasaki University of Health and Welfare
37-1 Nakaooru-Machi, Takasaki, Gunma Pref.
370-0033 Japan

A different National Member will be spotlighted each quarter.
Board Member Spotlight

Dr. Lynette Molefi

Dr. Lynette Molefi is a dynamic and versatile entrepreneur and business executive, with a reputation for exemplary leadership. She has been one of the few pioneers of telemedicine in South Africa and Africa with representation at various levels of government and non-governmental organizations.

She achieved a BSc degree at Roma University in Lesotho and went on to qualify as a medical doctor at the Medical University of South Africa (MEDUNSA). She practiced as a community doctor for a number of years as well as working for major pharmaceutical companies such as Adcok Ingram, Upjohn Pharmaceutical Company and Aspen Pharmacare Africa before entering into the field of business. Currently she holds executive positions at Telemedicine Africa Pty and Sunpa Africa Pty.

In 2011, Telemedicine Africa was presented with the award for Technology for Women in Business by the South African Department of Trade and Industry. In addition to the overall award, Dr Molefi was also presented with the category award for medium sized companies.

She also serves as a board member of The International Society for Telemedicine and eHealth, HCI (a JSE listed company); Etv (South Africa’s first free-to-air commercial television station) Business System’s Group Africa (business and software company), Syntell (a leading blue chip company providing technology based services for Road Safety, Traffic Management and Revenue Collection) and Unigas.

Dr Moretlo Molefi served as Director for Telemedicine Research at the Medical Research Council (MRC) of South Africa for 7 years. She was also Project Leader in the development of the Telemedicine Workstation for developing countries for which the MRC has paid her an inventors fee, Monitoring & Evaluation of the Health Channel, and Poverty Alleviation study for the Dept. of Science & Technology focusing on telemedicine, Multi Drug Resistant Tuberculosis project, Testing and Evaluation of Telemedicine technology for the Defence Institute just to name a few.

Dr Molefi’s success has been built on a solid work ethic, a belief in the power of technology, and an unwavering insistence that business must do good to do well.

Contact:
Dr Moretlo Molefi
Managing Director, Telemedicine Africa PTY (LTD.)
"Telehealth Education Opportunities"
Enhanced Health IT Teaching Materials Available

The U.S. Office of the National Coordinator (ONC) has announced that a set of 20 curriculum components is now available to the public at no cost, including all institutions of higher education nationwide and internationally. The components are designed around the six mobile workforce roles identified by ONC as the building blocks of health IT courses. Each component is made up of several units that can be modified and combined to meet the needs of instructors as they design their courses. The components include slide-based lectures with professional audio narration and transcripts, learning activities, self-assessment questions with answer keys, and instructor manuals. The components cover topics such as workflow process redesign, technical support, networking, usability, and project management, among others.

To obtain the materials, go to: www.onc-ntdc.org or www.onc-ntdc.info to set up a profile and download the components. The teaching materials offer a robust set of tools for health IT instructors; they total over 9 gigabytes of information across more than 200 units. Visit the ONC website to learn more about the Curriculum Development Centers program and other ONC health IT workforce development programs.

The materials will continue to be made available through this program until the end of the calendar year but earlier versions will no longer be supported. Planning is underway for self-sustainability of the materials in 2013 and beyond.

For questions relating to the Curriculum Development Centers Program, email: HITCurriculum@hhs.gov.

Telenursing

Virtual Education Session

The ISfTeH Telenursing Working Group will have a one-hour Virtual Education Session in late July. An email to the TWG membership will be sent when the dates and speakers are finalized.

Contact Claudia Bartz at cbartz@uwm.edu for more information.

ISfTeH Lifetime Achievement Award

The first ever Telemedicine/eHealth Lifetime Achievement Award was awarded to Professor Louis LAENG at Med-e-Tel 2012 in Luxembourg at the Opening Session on Wednesday, April 18th. Congratulations!
Global eHealth Ambassadors Program (GeHAP)
Meeting in Lisbon

Click here to read more about Professor Lareng's acceptance remarks.

Prof. Ricky RICHARDSON and five of the Ambassadors (Left to Right-Lord Nigel Crisp, Dr. Emilio Rui Vilar, Archbishop Desmond Tutu, Peter Gabriel, and Strive Masiyiwa)
Arch. Desmond Tutu (center) and ISfTeH Executive Board Members (Left to Right- Frank Lievens, Secretary; Steve Normandin, Vice-President; Yunkap Kwankam, Executive Director; Dr. Andy Fischer, President)

ISfTeH Member News

"International Telemedicine Act"

To learn more about the International Telemedicine Act, please visit internationaltelemedicineact.org or contact:

Secretariat
International Telemedicine Act
102, Siddhivinayak, Plot no.3 Sector 14, Khanda colony, New Panvel (W). Navi Mumbai India 410206
E-mail: milinda@nishithdesai.com / telemedicon11@gmail.com

THE AGA KHAN UNIVERSITY

The Second FMIC International Paediatrics Conference
Auditorium, French Institute of Afghanistan
September 22-23, 2012

Call For Abstracts: Submission Guidelines

French Medical Institute for Children invites abstracts for its Second Annual Paediatrics Conference, from local, regional and international presenters affiliated with hospitals, universities, research institutes and the industry. Click here for detailed submission guidelines.
Abstracts submissions must be received by 31st July, 2012.

Submit your Abstracts to: abstracts.conf@fmic.org.af

Additional Documents: Conference Subthemes and Conference Registration Form

For more information on the Conference, click here.

International Organizations News

"ICT Proposer's Day 2012 - Networking for European ICT Research & Development" 26-27 September, Warsaw

The ICT Proposers’ Day is a unique networking opportunity to build quality partnerships for participating in the new Information and Communication Technologies Work Programme for 2013. Building on the success of the previous ICT Proposers’ Days, the event will provide:

- first-hand information from European Commission officials on the new ICT Work Programme 2013, offering around 1.5 billion euro of EU funding
- answers to questions related to the upcoming calls for proposals
- an opportunity to present and discuss your project idea during one of the networking sessions
- a platform for exchanging ideas and finding right partners to form project consortia
- guidance on how to present a successful proposal

To learn more, please visit their website.

Publications

"Telehealth in the Developing World"

The book, which is also available online (see URL below), has 28 chapters covering Policy, Education, and Clinical issues and examples about telehealth worldwide. Chapter 2, "Bridging the digital divide: Linking health and ICT policy," gives a very clear overview of this topic. Countries discussed in other chapters include Philippines, Brazil, India, Cambodia, Italy, Neal, Ecuador, China, South Africa and sub-Saharan Africa, Pakistan and Chechnya.

To view online, click here.