



Shuji Shimizu

Kyushu University Hospital, TEMDEC, Director

Japan

Biography:

Dr Shuji Shimizu, M.D. Ph.D. is a surgeon, having graduated from Kyushu University, Fukuoka, Japan. He is the Director of the Department of Endoscopic Diagnostics and Therapeutics, and majors in endoscopic surgery. Dr Shimizu is currently the Chairman and Professor of the Department of International Medical Department and is also the Director of the Telemedicine Development Centre of Asia, where for more than a decade he has facilitated a comprehensive telemedicine project between Korea and Japan. This project has widely spread in various Asia-Pacific regions and is expanding globally, collaborating with 614 institutions in 63 countries/regions and having organized over 900 programs. He has invited more than 300 young doctors and technical staff from all over the world for medical and engineering training as the Director of Overseas Exchange Center. Dr Shimizu organized the Medical Working Group of the Asia-Pacific Advanced Network (APAN) in 2005 and has been chairman over a decade. He also started Asia Telemedicine Symposium in 2007 where both doctors and engineers gather to share the information and to find out needs and problems in common.



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Tomohiko Moriyama

Kyushu University Hospital, TEMDEC, Vice Director

ATS2018 Chairman

Japan

Biography:

Dr. Tomohiko Moriyama, M.D., Ph.D. is a gastrointestinal endoscopist, currently being the Associate Professor of International Medical Department and Vice Director of Telemedicine Development Centre of Asia (TEMDEC), Kyushu University Hospital. For about 20 years, he has been keen on endoscopic diagnosis and treatment of early gastrointestinal cancer. He is a fellow of Kyushu University Hospital and has taught gastroenterology and endoscopy to more than 100 residents and many foreign trainees. Since 2016, he has involved telemedicine project, which has widely spread in various Asia-Pacific regions and been expanding globally. He is now the secretariat of Asia-Pacific Advanced Network (APAN) Medical Working Group which promote to provide better healthcare and medical education by telemedicine.



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Shiaw-Hooi Ho
University of Malaya
Malaysia

Biography:

Shiaw-Hooi Ho is an Associate Professor of Medicine in the Department of Medicine, University of Malaya. He is also a Consultant Physician and Gastroenterologist in both University of Malaya Medical and Specialist Centres. He received his basic medical degree in 2001 and went on to obtain his Master's Degree in Internal Medicine and Fellowship in Gastroenterology from University of Malaya in 2009 and 2012 respectively. Following his attachments in Japan, he began to promote the use of image-enhanced endoscopy (IEE) and endoscopic submucosal dissection (ESD) both in the detection and management of early gastrointestinal (GI) neoplasia and cancer. He also received many short stint trainings in various other international GI center-of-excellences. In his routine endoscopy work, he performs various other diagnostic and therapeutic endoscopies such as biliopancreatic endoscopy, small bowel enteroscopy, per-oral endoscopic myotomy, etc. His other areas of expertise include management of various GI disorders and liver diseases.

Assoc. Prof. Dr Ho is an associate editor of BioMed Central Gastroenterology, a peer-reviewed journal. He is the committee member of the World Endoscopy Organization Research Committee. He is also a faculty member of both the Asia Pacific Endoscopy Research Forum and the Asian Novel Bio-Imaging & Intervention Group (ANBIG). Besides that, he is also the expert panel of both the 2015 Asia-Pacific consensus on the approach of difficult biliary access and the 2016 ANBIG consensus working group on the practice of GI endoscopy. Apart from endoscopy, he is the chairman of the telemedicine working group of Malaysian Research and Education Network (MYREN). He also plays an important role as board member in the medical working group (MWG) of Asia-Pacific Advanced Network (APAN) which is active in organizing various international teleconferences among healthcare practitioners.

Abstract:

The Endoscopic Club E-conference and Various Other Special Interest Groups of the APAN Medical Working Group

Shiaw-Hooi Ho¹, Rungsun Rerknimitr², Dong-Wan Seo³, Mohamad Zahir Ahmad⁴, Shunta Tomimatsu⁵, Tomohiko Moriyama⁶

¹ Department of Medicine, University of Malaya, KL, Malaysia

² Department of Medicine, Chulalongkorn University, Bangkok, Thailand

³ Department of Gastroenterology, Asan Medical Center, Seoul, Korea

⁴ Department of Information Technology, University Malaya Medical Centre, KL, Malaysia



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⁵ *Telemedicine Development Center of Asia, Kyushu University Hospital, Fukuoka, Japan*

⁶ *International Medical Department, Kyushu University Hospital, Fukuoka, Japan*

Medical working group (MWG) of Asia Pacific Advanced Network (APAN) was formed in 2005 to cater for the increased demand in the need for educational telemedicine around this region which started since 2003. With the involvement of more and more physicians from different backgrounds and specialties, various special interest groups (SIG) were formed. They are given the liberty to determine their chairpersons, chief engineers, connection methods, topics, contents and conducts of the teleconference during each of their meeting. Through the formation of SIG, the activities of the various specialty SIGs can be streamlined to the requirement and the availability of their members.

Till date, there are around 37 active SIGs in this MWG. The types of SIG in the descending order of the number of active SIG are endoscopy (n=12), surgery (n=3), fetal medicine (n=3), pediatrics (n=2), ophthalmology (n=2), technology (n=2) and medical student (n=2) followed by one SIG each in the following fields: hepato-pancreato-biliary surgery, dental surgery, pathology (endoscopy), general medicine, heart transplant, hepatology, neurology, healthcare, patient, nurse and administration.

One of the endoscopy-oriented SIG, called Endoscopy Club E-conference (ECE), was formed in 2015 after the unnamed activities involving with didactic lectures and case conferences in GI endoscopy during the 2003-2015 period and is now comprised of 44 GI centers. It has conducted 18 teleconferences so far since its inception. ECE teleconferences were mainly conducted through the use of Vidyo system and the mean number of participants for each meeting is 12.5 ± 3.5 centers. Mostly, general GI endoscopy-related topics were discussed in the form of case sharing, didactic lectures, quiz, video competition and live demonstration. GI endoscopy-related teleconference has gained significant momentum lately. This, at large, is due to the recent rapid development in the field of diagnostic and therapeutic endoscopy. Furthermore, such diagnostic and therapeutic advances can be shared easily through high-quality video clips during teleconference. Live demonstrations as well were held successfully during some of these teleconferences since most endoscopic procedures can be demonstrated over short duration of time.



Kuriko Kudo
Kyushu University Hospital,
Japan

Biography:

Kuriko Kudo, Ph.D., has worked at the Telemedicine Development Center of Asia (TEMDEC) at Kyushu University Hospital since August 2011. She graduated from Kyushu University with a doctorate in design, with digital archives using 3D computer graphics based on physical measuring that account for motion, shape, lighting, and the spectral reflectance of materials.

She currently works in technical support for remote medical education as an assistant professor and chief technical officer (CTO) of TEMDEC. She is involved in engineering training as a Steering Committee member of the Asia Pacific Advanced Network (APAN) Medical Working Group. She also leads research on communication design for handling international medical teleconferences and development of online database systems.



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Arthur H.P. Mawuntu
Faculty of Medicine Universitas Sam Ratulangi
Indonesia

Biography:

Arthur H.P. Mawuntu is a neurologist working in the Department of Neurology, Faculty of Medicine Universitas Sam Ratulangi, Manado, North Sulawesi, Indonesia. His current position is the Head of Neurology Program in the university. In his department, he leads the Neuroinfection, Neuroimmunology, and Neuro-AIDS division. In the teaching hospital, R.D. Kandou Hospital, he has duties in some hospital committees such as the Head of Patient Safety Subcommittee and member of the Health Research Ethics Committee. He received his Bachelor of Medicine and Medical Doctor degrees from Faculty of Medicine Universitas Sam Ratulangi in the year 2002 and 2004, subsequently. He continued his education in Neurology Program Universitas Indonesia, Jakarta, Indonesia and became a Neurologist in 2011. He held a consultant brevet in Neuroinfection from Indonesian Neurology Collegium since 2018.

Dr. Mawuntu is interested in the field of Neuroinfection and Neuroimmunology. He has followed fellowship program in Neuroinfection in Cipto Mangunkusumo hospital Jakarta and some short-term courses and training in Biosafety Level 3 facility management, neuromuscular ultrasound, polymerase chain reaction technique, cryptococcus identification technique, quantitative research technique, metanalysis, and clinical neuroinfectious diseases



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management in Indonesia, Singapore, and Japan. He is also certified in research's ethics, good clinical practice, and good laboratory practice. His current researches are viral etiology of central nervous system infection in North Sulawesi, detection of rickettsia and leptospira in human CSF specimens, tuberculosis meningitis management, cryptococcal meningitis management, and long-term observation of animal to human disease transmission in a certain prone-to-zoonosis population in North Sulawesi. He also studied neuropathy in HIV population and the relationship between the severity of neuropathy and the development of neurocognitive disorder in HIV population.

Starting from 2017 until the present, Dr. Mawuntu is the local coordinator of Indonesia Neuroimmunology Teleconference. It is a telemedicine activity held by Kyushu University/Telemedicine Development Center Asia (TEMDEC) together with seven Neurology centers across Indonesia.

Abstract:

Improvement in the Indonesia Neuroimmunology Teleconference on 2018: Expanding the Network to Provide Better Service Across Indonesia

Arthur H.P. Mawuntu¹, Riwanti Estiasari², Badrul Munir³, Kartika Maharani², Darma Imran², Pepi Budianto⁴, Eko Arisetijono³, David², Andika Okparasta⁵, Cempaka Thursina⁶, Indra Sari Kusuma Harahap⁶, Nopa Krismanto⁷, Yonathan Adrian Suparman¹, Aria Kekalih⁸, Achmad Junaidi⁵, Diah Kurnia Mirawati⁴, Paulus Sugiarto⁹, Devi Ariani Sudiby⁹, Noriko Isobe¹⁰, Takuya Matsusita¹⁰, Jun Ichi Kira¹⁰

¹Department of Neurology, Faculty of Medicine Universitas Sam Ratulangi/R.D. Kandou Hospital, Manado, North Sulawesi, Indonesia

²Department of Neurology, Faculty of Medicine Universitas Indonesia/Dr. Cipto Mangunkusumo General Hospital, Jakarta, Indonesia

³Department of Neurology, Faculty of Medicine Universitas Brawijaya/Dr. Saiful Anwar Hospital, Malang, East Java, Indonesia

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⁶Department of Neurology, Faculty of Medicine Universitas Gadjah Mada/Dr.Sardjito Hospital, DI Yogyakarta, Indonesia

⁷Technology and Informatics Division, Faculty of Medicine Universitas Indonesia, Jakarta, Indonesia

⁸Indonesia Medical Education and Research Institute, Faculty of Medicine Universitas Indonesia, Jakarta, Indonesia

⁹Department of Neurology, Faculty of Medicine Universitas Airlangga/Dr. Soetomo General Hospital, Surabaya, East Java, Indonesia

¹⁰Neurological Institute, Graduate School of Medical Science, Kyushu University, Fukuoka, Japan

Background: The Indonesia Neuroimmunology Teleconference is a telemedicine activity held between Kyushu University Japan and some neurology institutions across Indonesia to escalate awareness of neuroimmunology cases. This activity has been considered fruitful for the participating institutions. We report the improvement of this activity in 2018 compared to 2017.

Method: We went through the archive of the teleconference from February 2017 to June 2018. We also obtained questionnaires from the participants after each teleconference (from the 7-th to 13-th teleconference) to see how this activity affect them.

Result: Currently there are seven participating Indonesian neurology institutions compared to four institutions at the first teleconference. Thirteen teleconferences had been held monthly since February 2017 to June 2018 and 30 cases have been discussed. All institutions have taken part in case presentation and five institutions had presented more than three cases. Questionnaires using Mentimeter application have been obtained since the 7-th teleconference to see the feedback of each institution. Most participants considered this activity beneficial, but lack of medical facilities hamper the application in clinical practice. The connection was still using 2-4Mbps connection speed but Vidyo application made it possible for the participants to have a decent audio-visual experience. However, most technical complain is about sound quality. The activity report has been made in Asian Telemedicine Symposium in Kuala Lumpur and Indonesian Telemedicine Symposium in Jakarta on 2017.

Conclusion: Neuroimmunology teleconference has become a monthly activity among some neurology Institutions in Indonesia. The penetration of this activity is better in the second year and all Indonesian participants felt the need of teleconference to improve knowledge and service to the patients. The gap between medical facilities between Japan and many Indonesia neurology centers is still the main obstacle.

Keywords: teleconference, neuroimmunology, Indonesia.



Rajan Parajuli
Nepal Research and Education Network
Nepal

Biography:

Mr. Rajan Parajuli is a researcher focusing on ICTs, gender and health. He is currently at the final stages of his PhD degree from Asian Institute of Technology, Thailand. His dissertation research has shed light on gender dimensions of telemedicine application in rural Nepal. Besides the study, Mr. Parajuli is the Director of Nepal Research and Education Network (NREN). He is also affiliated with Telemedicine



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Society of Nepal, and also holds several years of experiences in ICT4D related various initiatives in Nepal.

Abstract:

Exploring the role of telemedicine in improving access to healthcare services by women and girls in rural Nepal

Women and girls in rural areas of Nepal are facing gender-based barriers in accessing healthcare services. In this study, we explore the role of telemedicine in reducing gender-based barriers women and girls' are facing to access healthcare services in rural Nepal. Data were collected through a mixed method consisting of questionnaires survey, in-depth interviews, and focus group discussions with mobile phone and video conference-based telemedicine users. Data were analysed through descriptive and thematic analysis. Results showed that telemedicine reduced travel restrictions, treatment expenses, and apprehension regarding sexual and reproductive health consultation. Moreover, telemedicine decreased travel time, which helps women and girls access timely healthcare services and improve time management for household chores and other activities. The conclusion is that rural telemedicine tends to reduce gender-based barriers for women and girls in accessing healthcare services. Finally, policy recommendations are provided for expanding these initiatives in rural areas.



Christopher Khor

Singapore General Hospital & Duke-NUS Medical School

Singapore

Biography:

Dr Christopher Khor MBBS, FRCP(Edin), FAMS, FASGE

Senior Consultant

Department of Gastroenterology & Hepatology

Director, Ambulatory Endoscopy Centre and Inpatient & Lung Endoscopy Centre

Singapore General Hospital

Adjunct Associate Professor, Duke-NUS Medical School

Dr Khor's main practice areas are in pancreato-biliary endoscopy, endoscopic resection and general gastroenterology. He has a keen interest in endoscopic quality and education, and in promoting co-operation among the regional endoscopic community. His external work includes regular faculty invitations to regional centres to demonstrate and teach endoscopy. Back home, Dr Khor led the project team that built his hospital's new Ambulatory Endoscopy Centre, a state-of-the-art facility. He co-chairs an Asia-Pacific group focused on EUS education, and was Vice-President of Asian-Pacific Digestive Week 2011 in Singapore, for which he directed the Endoscopy program. Dr Khor is the immediate past Chairman of the Chapter of

Gastroenterologists, Academy of Medicine Singapore, and is a past President of the Gastroenterological Society of Singapore.



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Aqsa Sjuhada Oki
Universitas Airlangga
Indonesia

Biography:

Dr Aqsa Sjuhada a certified Senior Lecturer with expertise in field of Medical Physiology, and Oral Biology, he concentrates both teaching and research work in field of neuroscience and endocrinology. Beside the academic works, he is appointed as the eLearning ambassador and instructional designer focused on developing e-learning software and utilities to improve learning innovation. Although his works have always been related to education in some way, he has bounced around from teaching to training and now organizing Indonesian Dental Telemedicine.

Developing learning innovation through telemedicine is his greatest interest. Under the sustained collaboration with TEMDEC, he has conducted Asia-Pacific dental teleconference sessions in APAN meetings, as well as some distanced learning with many overseas stations. He also promotes nationwide peer dental group for telemedicine to share knowledge and experience at a distance.

Dr Aqsa Sjuhada also has been recognized as a pioneer to expand and introduce Dental Telemedicine for rural dentists in remote areas in Indonesia. It helps local dentists to gain knowledge dissemination through telemedicine facilities. His current project in the year of 2018-2019 is to establish the dental telemedicine network in primary health care in Surabaya in collaboration with Indonesian Dental Association.

He reports his telemedicine-related works in various scientific meetings and proceedings, as well as establish cooperation with various parties for the advancement of dental telemedicine in Indonesia.

In Dr Sjuhada's philosophy, telemedicine should come to bring more value for Universitas Airlangga in the aspects of Education, Research & Publications, and Community Services.

Abstract:

Telemedicine in E-Learning Implementation at Faculty of Dental Medicine Universitas Airlangga.

Aqsa Sjuhada Oki, eLearning Ambassador, Universitas Airlangga

Dental Telemedicine is the use of information technology based methods to share knowledge of dentistry between universities and hospitals. We continue to promote this method because it is very effective as it saves time, effort, and cost. The Faculty of Dentistry

Universitas Airlangga has used this method to support eLearning in the form of distance learning system, guest lectures, and even thesis defense test. The number of online lectures conducted is increasing from time to time, as well as the number of connected institutions.

To expand the use of telemedicine, we have implemented a series of innovative activities that are a combination of educational, academic, and community service areas. In 2018, we introduced the Dental Telemedicine facility to the organization of Indonesian Dental Association. We train the dentists who work in Surabaya Community Health Center (Puskesmas). Once the dentists are able to connect, we carry out some case report activities and online seminars. This activity is quite helpful to the members of the Indonesian Dental Association because they get updated knowledge easily.

In addition, we also began to implement Training of Tutors to the students as participants. It is expected that these students can help introduce this technology more widely in the community.

To be recognized by the scientific community, our dental telemedicine activities are presented in several scientific meetings and will be published in accredited scientific journals. We also strive to make this dental telemedicine activity can get patent in Indonesia.



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Pablo Cortes
Clinica Alemana
Chile

Biography:

- Gastroenterologist, Gastroenterology Unit, Clinica Alemana de Santiago, Chile
- Assistant Profesor Faculty of Medicine, Universidad del Desarrollo Chile.
- President of Chilean Society of Gastroenterology 2018-2020
- President of Chilean Association of Digestive Endoscopy 2012-2014
- Advanced Training in Therapeutic gastrointestinal Endoscopy, Gemelli Polyclinic, Università Cattolica del Sacro Cuore, Italy 2004-2005
- Advanced Training Program in Ecoendoscopy. Hospital Clinic y Provincial de Barcelona, Spain 2005

Abstract:

Latin Endoscopy Teleconference

Pablo Cortes, Gastroenterologist Clínica Alemana de Santiago, President Chilean Society of Gastroenterology. Chile.

Background:

Latin America have many challenges in medical fields, with different levels of economic resources and technological infrastructure. The high

incidence of Gastric Cancer in many countries with a low early diagnosis forces us to improve our endoscopic diagnostic and therapeutic skills. Telemedicine helps to share experiences and knowledge locally and around the world. Since 2013 Latin Endoscopy Teleconference Meetings (LETM) has been established and coordinated between several Latin American Institutions and TEMDEC.

Aims: Describe the evolution of LETM and evaluate satisfaction of doctors and engineers involved.

Methods: Review of reports of each Teleconference held since 2013. The evolution, running of and feedback on the LETM were evaluated and described.

Results: Since August 2013, 16 LETM have taken place. The main topic has been esophageal and gastric cancer diagnosis or treatment (13/16). Participation of countries and institutions increased from 5/11 in 2013 to 8/59 in 2017 without considering the streaming connections. Feedback received indicated a high level of satisfaction with program contents, audiovisual transmission and ease of technical preparation with major differences in quality of connections between institutions with or without dedicated engineer teams. The time zone differences are minimal between Latin-American countries but is huge with Japan. This, the language differences, that requires speaking in a non-native third language and technological considerations are the major challenges.

Conclusions: The LETM program, mainly focusing on gastric cancer issues in Latin America is a successful initiative with increasing participation from other countries and institutions with emphasis on key role of doctor-engineer interaction. Technical improvement and the elimination of the language barrier will most certainly enhance the functionality of such an important tool. As such, programs of remote medical education for the diagnosis of early gastric cancer will have more impact and effect.



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Roman Kuvaev

Yaroslavl Regional Cancer Hospital

Russia

Biography:

Dr. Roman Kuvaev, MD, PhD, Gastroenterologist, Endoscopy Department, Yaroslavl Regional Cancer Hospital, (Yaroslavl, Russia); Assistant Professor, Gastroenterology Chair, Faculty of Additional Professional Education, Pirogov Russian National Research Medical University (Moscow, Russia)

Professional Education

Dr. Roman Kuvaev graduated from Yaroslavl State Medical Academy (Yaroslavl, Russia). He underwent postgraduate training courses in

endoscopy (Yaroslavl State Medical Academy, 2009, 2014, Kanazawa Medical University, Kanazawa, Japan, 2012), gastroenterology (Yaroslavl State Medical Academy, 2009, Moscow State University of Medicine and Dentistry named after A. I. Evdokimov, 2014) and oncology (Yaroslavl State Medical Academy, 2015). He got his PhD (Doctorate in Internal Medicine) scientific degree in 2017 at Pirogov Russian National Research Medical University (Moscow, Russia)

Employment

Dr. Roman Kuvaev is a gastroenterologist, endoscopist and oncologist of Yaroslavl Regional Cancer Hospital, (Yaroslavl, Russia) from 2010 till present time and Assistant Professor of Gastroenterology Chair of Faculty of Additional Professional Education of Pirogov Russian National Research Medical University (Moscow, Russia) from 2017 till present time. He was employed as an Assistant Professor of Kyushu University Hospital (Fukuoka, Japan) from January 2018 to April 2018.

International educational activity

Dr. Roman Kuvaev is an individual member of European Society of Gastrointestinal Endoscopy (ESGE), international member of ESGE Quality Improvement Committee Upper GI working group (co-author of ESGE Quality Improvement Initiative <https://www.esge.com/performance-measures-for-upper-gastrointestinal-endoscopy.html>), ESGE Research Committee, ESGE Curriculum Working Group. He is an expert of ESGE Lecture Theatre and tutor of ESGE Learning Area, member of Organizing committee of international endoscopy workshop with live demonstration and hands-on training “Yaroslavl Endoscopy Symposium - YES” (2010-2018), co-chair of Russian-Japanese Teleconference supported by Telemedicine Development Center of Asia (2017-2018)

Area of scientific interest

Basic endoscopy and advanced techniques in diagnosis and treatment of upper GI lesions and early cancer. Computer-aided decision support systems in endoscopy (2012-2014: participation in the international project on creating a computer-aided pathology prediction system in stomach based on HME-NBI endoscopy under the supervision of Prof. Herbert Edelsbrunner, Austria)

Abstract:

Russian-Japanese Clinical Case Teleconference on Gastrointestinal Endoscopy: Start up and Initial Experience

Roman Kuvaev¹, Sergey Kashin¹, Evgeny Fedorov², Mikhail Agapov³, Natalia Vidyaeva¹, Ekaterina Kraynova¹, Denis Seleznev², Pavel Pravednikov⁴, Mamraim Dzhumabaev⁵, Askar Kutanov⁶, Irina Sudovykh⁷, Tomohiko Moriyama⁸, Shuji Shimizu⁸, Kenshi Yao⁹, Takashi Yao¹⁰, Kuriko Kudo⁸, Shintaro Ueda⁸

¹ Yaroslavl Regional Cancer Hospital, Yaroslavl, Russia

² Lobachevsky K+31 Clinic, Moscow, Russia

³ Vladivostok Regional Clinical Railway Hospital, Vladivostok, Russia

⁴ Clinical Hospital No 2, JSC MEDSI, Moscow, Russia

⁵ National Center of Cardiology and Internal Medicine, Bishkek, Kyrgyzstan

⁶ Central Asian Research and Education Network (CAREN), Bishkek, Kyrgyzstan

⁷ Novosibirsk State Medical University Novosibirsk State Regional Clinical Hospital, Novosibirsk, Russia

⁸ Kyushu University Hospital, Telemedicine Development Center of Asia, Fukuoka, Japan

⁹ Fukuoka University, Fukuoka, Japan

¹⁰ Juntendo University, Tokyo, Japan

Background: Clinical case conference is a very important format of ongoing education for medical professionals in the field of gastrointestinal endoscopy. Nowadays telemedicine communication provides a convenient and effective tool for medical consultations and remote education projects. The aim of this study is to demonstrate an initial experience of establishing multi-center clinical case teleconference project provided by Telemedicine Development Center of Asia (TEMDEC).

Methods:

From November 2017 to April 2018, three teleconferences among 10 centres from Japan, Russia, and Kyrgyzstan were held. Two of three teleconferences had the format of clinical case discussion conference, and one meeting was devoted to discussion the differences in endoscopy between Russian and Japanese centers. The conference time was 60-90 minutes, consisting of 2-3 clinical cases for discussion (prepared by doctors from Yaroslavl Regional Cancer Hospital and Vladivostok Regional Clinical Railway Hospital). The overall goal of the conferences was to discuss challenging cases in upper GI endoscopy. Each presenter was given approximately 20-30 minutes each for presentation and discussion with all participants and faculty experts in endoscopy (Professor K. Yao, Dr. T. Moriyama) and pathology (Professor T. Yao). Digital video transport system Vidyo was used as teleconference system and questionnaire was conducted for obtaining feedback every time after the meeting.

Result: The results of the survey are summarized in the table 1.

Table 1.

	1st Conference	2nd Conference	3rd Conference
Image sharpness	Very good – 36% Good – 64%	Very good – 93% Good – 7%	Very good – 89% Good – 11%
Image movement	Very smooth – 30% Smooth – 60% Slow – 10%	Very smooth – 80% Smooth – 20%	Very smooth – 44% Smooth – 56%
Quality of sound	Very good – 40% Good – 50% Poor – 10%	Very good – 33% Good – 53% Poor – 13%	Very good – 67% Good – 33%

Technical preparation	Very easy – 12% Easy – 44% Didn't take care – 44%	Very easy – 15% Easy – 69% Didn't take care – 15%	Very easy – 33% Easy – 22% Didn't take care – 44%
Scientific program (for doctors)	Very good – 80% Good – 20%	Very good – 87% Good – 13%	Very good – 86% Good – 12%
Program meaningfulness (for doctors)	Very meaningful – 78% Meaningful – 22%	Very meaningful – 67% Meaningful – 33%	Very meaningful – 58% Meaningful – 42%
Willingness to attend next conference (for doctors)	Yes – 100%	Yes – 100%	Yes – 88% Probably, yes – 12%

Conclusion: We successfully established regular remote teleconference project in the format of clinical case discussion. Further expanding of our activity on a regular basis, including consultation of difficult cases, as well as collaborating with new clinical centers may have an impact on clinical practice and global educational outcomes that need to be assessed in the future.



Kunio Saiki
the Embassy of Japan in Iraq
Iraq

Biography:

Education:

1981 – 1987 Shinshu University, School of Medicine, Japan
1987 Doctor of Medicine
1999 Doctor of Philosophy, Saitama Medical College, Japan

Professional Training and Employment:

1987-1989 Resident Staff, Orthopedic Department, Saitama Medical Center, Saitama Medical College, Japan (SMC)
1989-2004 Assistant Staff, Orthopedic Department, SMC
1995-2004 Assistant staff, Emergency Department, SMC
2000-2004 Lecturer, Orthopedic Department, SMC
2004-2006 Staff, Shanghai Senmao clinic, Shanghai, China
2006-2008 Medical attaché and Counselor, the Embassy of Japan in Bolivia
2008-2012 Medical attaché and Counselor, the Embassy of Japan in Kuwait
2012-2015 Medical attaché and Counselor, the Embassy of Japan in Bangladesh

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2015-2017 Medical attaché and Counselor, the Embassy of Japan in Democratic Republic of the Congo

2017.08.28- Medical attaché and Counselor, the Embassy of Japan in Iraq

Professional Members and Boarded Certification:

1987- The Japan Orthopedic Association Active Member

1997- The Japanese Association for Acute Medicine Emergency Specialist



Juvie Villaflor

Dagupan Doctors Villaflor Memorial Hospital

The Philippines

Biography:

VIVENCIO JOSE P. VILLAFLOR III, M.D.

PCS Fellow 2001

Office Address: Rm. 102, Dagupan Doctors Villaflor Memorial Hospital, Mayombo District, Dagupan City, Philippines 2400

HONORS AND AWARDS:

- Leadership Award, Pangasinan Medical Society, 2012-2013
- Most Outstanding Physician, Philippine Medical Association, 2014

I. PROFESSIONAL DATA

Specialty:

- General and Laparoscopic Surgery

II. PROFESSIONAL POSITIONS

Philippine College of Surgeons (PCS) Position:

- Philippine College Surgeons (PCS) Regent 2015-2018

Specialty Society Positions:

- Treasurer, Philippine Association of Laparoscopic and Endoscopic Surgeons (PALES), 2016 to Present
- Board of Director, Philippine Association of Laparoscopic and Endoscopic Surgeons (PALES), 2010 to present
- Fellow, American College of Surgeon
- Member, Society of American Gastro-Intestinal Endoscopic Surgery (SAGES)
- Member, Endoscopic and Laparoscopic Surgeons of Asia (ELSA)
- Member, Asia Pacific Hernia Society (APHS)
- Member, European Association for Endoscopic Surgery (EAES)
- Scientific Chairman, 2017 ELSA Congress Cebu, Philippines
- Chair, PSGS Sub-Committee on Minimally Invasive Surgery, 2017

Current & Previous Hospital Position:

- Medical Director, Dagupan Doctors Villaflor Memorial Hospital
- Consultant, Department of Surgery, St. Luke's Global City, Asian Hospital, Gen. Miguel Malvar Hospital
- Visiting Consultant, Ilocos Training Regional and Medical Center

- Former Chairman, Department of Surgery, Region 1 Medical Center, 2011-2012
- Trainer/Preceptor, Philippine Association of Laparoscopic and Endoscopic Surgeons
- Faculty, Asian Hospital Minimally Invasive Surgery Fellowship Training Program



Milben Abril Malbog
Dagupan Doctors Villaflor Memorial Hospital
The Philippines

Biography:

Milben A. Malbog, MD, FPCP, FPSG, FPSDE, FPSMS

Fellow of Philippine College of Physicians
 Fellow of Philippine Society of Gastroenterology
 Fellow of Philippine Society of Digestive Endoscopy
 Fellow of Philippine Society of Medical Specialist
 Member of the Hepatology Society of the Philippines

He is an Internist and Gastroenterologist of the Philippines. He underwent training in Advanced Clinical and Therapeutics Endoscopy at Kyushu University Hospital, Fukuoka Japan last April 2017 to October 2017.

Active Consultant in various hospitals in the province of Pangasinan, Philippines. And currently assigned as the Telemedicine Coordinator of Dagupan Doctor's Villaflor Memorial Hospital.

Kay P. Jimenez
Dagupan Doctors Villaflor Memorial Hospital
The Philippines



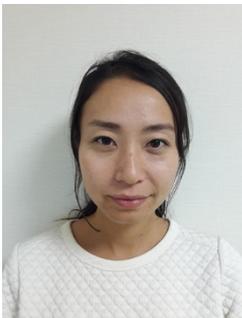
Felix K. Sukums
Muhimbili University of Health and Allied Sciences
Tanzania

Biography:

Dr. Felix K. Sukums is a Lecturer and Director of Information and Communication Technology (ICT) at the Muhimbili University of Health and Allied Sciences (MUHAS) in Dar es Salaam, Tanzania. He holds a PhD in Medical Informatics from Heidelberg University,

Germany. Master of Science and Bachelor of Science degrees in Computer Science from the University of Dar es Salaam in Tanzania. He has over 16 years of vast experience in information and communication technology (ICT) industry. Dr. Sukums has worked in various digital health research and consultancies including use of clinical decision support systems for improving maternal and new-born care and telemedicine. He currently coordinates UNESCO Chair on Telemedicine at MUHAS.

He has nine original peer-reviewed publications and made presentations in both local and international conferences (<http://tinyurl.com/sukums-profile>). His areas of interest include digital health, information system analysis, design, testing, deployment, adoption and usability, eLearning; and web technologies.



Yumiko Igarashi

St. Luke's International University

Japan

Biography:

Master's student of Midwifery, Graduate School of Nursing Science, St. Luke's International University, Tokyo, Japan

EDUCATIONAL BACKGROUND

2008 B.S.N. Bachelor of Science in Nursing Chiba University, Chiba, Japan

PROFESSIONAL QUALIFICATIONS

2008 RN, MW, PHN Registered Nurse / Midwife / Public Health Nurse, Japan

PROFESSIONAL POSITIONS

April 2008 – March 2016 A Staff Nurse, Kyorin University Hospital, Tokyo, Japan

CLINICAL EXPERIENCE

April 2008 – March 2016 A Staff Nurse in Maternity Unit, Kyorin University Hospital, Tokyo, Japan



Ti-Chuang Chiang

National Taiwan University

Taiwan

Biography:

Mr. Ti-Chuang Chiang, B.Sc. was a Medical Physicist. He took 21 years to serve at Department of Radiotherapy, National Taiwan University Hospital.

17years ago, he transfers to Division of Medical Informatics, College of Medicine, NTU as Senior Technician. Education Technology became his major interesting. There are many medical distant learning and Telemedicine's project at NTU was supported with his IT skill.

Mr. Chiang is currently at International Medical Physics Certification Board (IMPCB). Serving as Secretary General to assist the international medical community in achieving both performance excellence and contributions to health care.



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Alvin M. de Gracia

**Advanced Science and Technology Institute
Philippines**

Biography:

Mr. Alvin M. de Gracia, graduated from Holy Angel University (HAU) in 2007 with Bachelor of Science in Computer Engineering. He is currently a Science Research Specialist at the Advanced Science and Technology Institute (ASTI) of the Ministry of Science and Technology. He is part of the network operations group of the Philippine Research, Education and Government Information Network (PREGINET). He also supports the Telemedicine Network of the Philippines (TNP), a domestic medical working group in the Philippines. Also takes care of the multimedia services such as streaming, conferencing and telemedicine.

Abstract:

Video Conferencing System for Philippine Telemedicine

Alvin de Gracia

Advanced Science and Technology Institute

*Philippine Research, Education and Government Information Network
Telemedicine Network of the Philippines*

PREGINET is the country's only Research and Education Network (REN) that interconnects academic, research, government institutions, and hospitals (private and public) with links to international RENs such as the Asia-Pacific Advanced Network (APAN) and the Trans-Eurasia Information Network (TEIN).

With the continuous growth of telemedicine in the Philippines, network connectivity and video conferencing system play a major role to make this effective. PREGINET made these possible by providing high capacity network for fast and smooth audio and video transmission

ASTI started to support telemedicine using DVTS and H.323 system, however, few participants joined due to certain limitations like cost and high bandwidth requirement. To address these issues, Vido system was introduced to some hospitals which allows multipoint videoconference meetings from their desktop machines, tablets and smartphones using the free software and low bandwidth requirement.



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Tunggul Laksono
Brawijaya University
Indonesia

Biography:

Tunggul Laksono start worked at the Faculty of Medicine Beginning at 2000 as a network Engineer. Graduate from Diploma Computer Engineering at Brawijaya University at 1999, taking the training of Mikrotik MTCNA at 2010 and then MTCTCE at 2011. Right now handle computer network faculty of medicine Brawijaya University and also the Hotspot for internet Distribution in Saiful Anwar Hospital. Start using the device Video Conference began in 2007 using the Polycom PVX, and then in 2009 began using Polycom Qdx - 6000, 2013 got an additional 1 Huawei ViewPoint 2014 Polycom HDX – 7000. Since 2015 Joining TEMDEC for first time in One Month Training in Fukuoka. and then after that became Indonesia Chief Engineer in ID-Telemedicine Activity until Now.

Abstract:

Technical problem solving construction for ID-Endoscopy

Tunggul Laksono, Malang, Indonesia

After 1st Indonesia telemedicine workshop all gastro doctor agreed to start monthly meeting using Vidyoo. Almost all engineer still doesn't know how to operate this new video conference system. To start we organized connectivity test inviting all engineers to check the all equipment that they had. Then, we created a WhatsApp group to communicate intensively everyday during the preparation with all and organized connectivity test from every side before the main event. When problem occurred, we always discussed with all other engineer with this group chat, so they can learn how to handle the kind of problem if they face the same problem at their local. Beside the main group we also have other group consist only 5 people who are very core members to discuss more intense about telemedicine, such as to find some best solution of some problems and to discuss future update for engineer team.

From 2015 we started from almost no telemedicine activity recorded by TEMDEC, we had increased almost 140 event per year mostly Gastro Endoscopy event, number 3 below Vietnam and Thailand. And in the last 2016 we also started another meeting neuro-immunology, and the result in 2017 we increased the number of events to 250 event per year which reached number 1 rank in TEMDEC record.

With all hard work from doctor who want to use this technology and with all support from all engineer we can grow up together. And with the using WhatsApp as media to communicate with all engineer we always get new update and coordination among engineer and share new technology.



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Satyanarayana Ungarala
Asian Institute of Gastroenterology
India

Biography:

My Self Satyanarayana Ungarala, graduated from Andhra University and working in Healthcare Industry for the past 29 years. Currently working with Asian Institute of Gastroenterology from 2004 as General Manager – Operations. Apart from hospital operations which includes patient care services, coordination with doctors, foreign patients, I am more actively involved in all academic programmes and takes care of all CME programmes, Live workshops, Telemedicine programmes, Rural Healthcare Programmes and heading the unit since 2004. Conducting at least two live conferences every month as part of our academic programmes. Have the credit of organising World Congress of Endoscopy in February 2017, with 5 hours of live transmission of advanced endoscopy procedures for 3 days, which is attended by over 5000 delegates from all over the world.

Abstract:

Successes and Technical Problems of Live Demonstrations

Ungarala Satyanarayana

Hyderabad, India

Asian Institute of Gastroenterology, Hyderabad, India is established as one of the best hospital in Gastroenterology and also in sharing medical knowledge to other parts of the world by way of conducting live workshop and CME's.

Whatever technical problems we face, our team is always try to achieve the best result in audio and video quality. For hospitals which are well equipped, we will not have any problem. But some hospitals does not have any experienced technical staff working with them and we will have problem with these centres.

Main success of any live transmission depends on TESTING and coordination with staff from other centre. Most of the technical problems what we face are :

- Loss of Video and Audio
- Not aware about live transmission
- Availability of good bandwidth
- Shortage of Technical staff
- Shortage of equipment

One of the best example we had recently during June of this year is Live Endoscopy Workshop to Israel. Even though they hired technical staff to manage venue audio and video, they are not aware about live link between India and Israel. Here the technology what we used is Lifesize desktop and Team viewer. Few days before of the conference,

we created a whatsapp group to have good communication and we requested them to give the control of their laptop by using team viewer. Then the lifesize desktop version is downloaded and operated from our end. The quality was excellent and all appreciations from all the doctors.

Finally, we do have many transmissions with in our hospital or with in our city. These transmissions we operate using fibre optic connectivity and not through video conferencing. Here we connect our final video and audio mixer out to the fibre transmitter and the same signal will be converted at the other end. Here we get very good quality of video and audio. With in hospital also we use fibre connectivity. But in this situation we convert the singles to LAN and transmit.



Mohamad Zahir Ahmad
University of Malaya
Malaysia

Biography:

Mr. Mohamad Zahir Ahmad is the Head of Information Technology Department at University of Malaya Medical Centre (UMMC). He actively involved in teleconferencing activities in UMMC since 2010. He is leading a telemedicine engineering group in Malaysia to assist the local engineer to conduct telemedicine using various teleconferencing and telemedicine technologies, software and equipment in Malaysia. He has vast experience in numerous teleconferencing activities and technologies including broadcasting and multimedia production. He was currently appointed as Deputy Director of APAN Medical Working Group Engineering Team to train new telemedicine engineers throughout Asia for handling and managing telemedicine activities.

Abstract:

Zoom.us Video Conferencing System: Application, Infrastructure and Success Story for University Malaya Medical Center

Mohamad Zahir Bin Ahmad

Information Technology Department, University of Malaya Medical Center, Kuala Lumpur, MALAYSIA.

University of Malaya Medical Center (UMMC) had used zoom.us video conferencing for almost more than a year as an alternative tools for communication, meeting, teaching and telemedicine as replacement to the H323 based system and vidyo solution. Zoom.us is a cloud based video conferencing where very minimal equipment and setup are required to be use. UMMC had subscribed with basic 'pro' account for a start to explore zoom capabilities and end up UMMC had subscribed the enterprise education version since the demand of the usage getting higher and widely across the institution.

One significant improvement apart from video quality and audio quality is the tool available in the zoom.us interface which have annotation and drawing capabilities that is really effective for learning and education. The most very important advantages of zoom.us system is the preparation and setup where it is so easy and the doctor can use it themselves without the need to have engineer assistant. The audio quality is very good and does not encounter any echo at all which make the communication more effective and gets the doctor more interested to use.

This presentation will be focussing on the technical review of the zoom.us application, features, capabilities, the setup and infrastructure required and the activities conducted using the zoom.us application. It is also a knowledge sharing session where the problems, workaround, tricks and tips that will be shared with the participants when using zoom.us system.



Shintaro Ueda
Kyushu University Hospital
Japan

Biography:

Shintaro Ueda, Ph.D. is a Research Fellow at Telemedicine Development Center of Asia (TEMDEC), Kyushu University Hospital. He also plays a role of a technical engineer to support telemedicine activities all around the world.



Abstract:

JoinView: Content Sharing System for Telemedicine Conferences

Telemedicine conferences are an efficient method to share medical information across the globe. It is used for education, discussion of diagnosis and live demonstrations. For these purposes, high-resolution images (video and still images) are frequently shared during telemedicine conferences. During the explanation or discussion, physicians often prefer to indicate specific areas in the images. For video images, it is a challenge for the attendees to ask questions about specific time periods of the video because they cannot control the video. In this presentation I will introduce a content sharing system called JoinView, which allows synchronized sharing of images, pointing devices and annotation. I will show examples of how the images are synchronized and the pointing devices and annotations are shared amongst multiple users. I would like to emphasize that control and synchronization of the video image is made possible not only to the presenter but also to the attendees. This is a key feature that separates JoinView from existing content sharing systems. JoinView was originally developed by Unixon Systems Co., Ltd. as a content sharing system, and the Telemedicine Development Center of Asia (TEMDEC) established a joint project with Unixon to develop synchronized sharing

of images, pointing devices and annotation which are needed features in telemedicine conferences.



Muhamad Hanafi Abu Bakar
University of Malaya
Malaysia

Biography:

Mr. Muhamad Hanafi Abu Bakar graduated from Multimedia University, Cyberjaya, Malaysia in 2007 doing Bachelor Degree Creative Multimedia majoring Film and Animation.



Joining University of Malaya, in late 2009, he is leading the production technical team handling University's multimedia needs, including filming, video production, single camera production, multiple camera production, AV system, video conferencing and many more at the Information Technology Centre.

His department actively support University of Malaya Medical Centre's (UMMC) IT Department in handling advance video conference and surgery recording. Since 2012, his team also support ENDOSCOPY society event, doing transmission for conferences every year, until the latest event which is ENDOSCOPY 2018.

He also a consultant in designing studio layout and equipment for the University.

Abstract:

ENDOSCOPY 2018 Technical Setup: Feedback and Echo During Live Operation from Multiple OT to Large Hall Venue.

Muhamad Hanafi Bin Abu Bakar

Multimedia Section, ICT Operations & Support Division, Information Technology Centre, University of Malaya, MALAYSIA.

Multimedia Section (SMM), University of Malaya, together with IT Department (JTM) University Malaya Medical Centre collaborated to handle live transmission between Endoscopy Suite which running 3 concurrent cases at one time to large hall venue which can accommodate 500 pax. The event called ENDOSCOPY 2018. The team (in house team) had been in charge for endoscopy event yearly since 2014 and had a great experience year by year.

One significant improvement apart from video quality is audio quality. In the first year we suffer a great echoing and feedback problem. The problem come due to 7 mics used together concurrently and ambient sound at the endoscopy suite. After that the team had found out what causes it and continues to improve.

This presentation will show Endoscopy 2018 technical preparation, setup, cabling, testing and production run and focus more about audio problem, and how we overcome it. On audio part, type of mics, cable,

transmission, digital audio mixer vs analog audio mixer, connection to h.323, sound setting at hall and others. How to handle feedback, reduce and eliminate echo will be discussed.

It is a huge success running Endoscopy 2018 this year. The team hope that we can share to others fellow friend and together share the idea and improve.



Dwi Basuki
Sriwijaya University
Indonesia

Biography:

Dwi Basuki is usually called Dwi by people around, born in Bangunsari (OKU), October 19, 1981 in Indonesia. Basuki's father of two children, he really likes reading and sports. I got a master's degree (M.Kom) at Bina Darma University Palembang Indonesia in 2012 in the field of Informatics Engineering.

In 2007 I joined the Medical Faculty of Sriwijaya University and became a computer technician. Joining in telemedicine activities developed by TEMDEC for more than 2 years since 2016. At this time is focusing on studying and developing e-learning and websites in the Medical Faculty of Sriwijaya University.

Email: doowee19@unsri.ac.id

Abstract:

Telemedicine for Rural Hospitals

Dwi Basuki

Faculty of Medicine Sriwijaya University

Faculty of Medicine Universitas Sriwijaya for almost 2 years has joined in telemedicine activities conducted by TEMDEC. Only department of Neurology at Faculty of Medicine Universitas Sriwijaya routinely every month follows telemedicine activities.

We want to develop this activity so it can be done in rural hospitals. Because every month Faculty of Medicine Universitas Sriwijaya routinely sends their students to rural hospitals.

With this teleconference activity between Medical of Faculty Universitas Sriwijaya and rural hospitals, it is hopefully that students who are studying in rural hospitals can discuss the cases that they face there with their lecturers in the city.

Hopefully telemedicine activity can be done in rural hospitals, so between lecturers who are in faculty of Medicine Universitas Sriwijaya or in Moh. Hoesin hospital as the main education hospital can interact or discuss together about some cases in rural hospitals using teleconference.

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On April 3rd, 2018 we have done teleconference for the first time with rural hospital in muaraenim district. At that time we used the vidyo app owned by TEMDEC. Participants of this teleconference activity are doctors from Faculty of Medicine Universitas Sriwijaya, some administrative staffs from main education hospital Moh. Hoesin hospital, and also Muaraenim district doctors and staffs. The teleconference activity is still an introduction to Muaraenim district hospital. We inform that we can use teleconference between main education hospital and faculty of medicine Universitas Sriwijaya in Palembang. Hospital director in Muaraenim district supports this teleconference activity, but rural hospitals were still constrained by support tools for teleconference activities.

Dean of the faculty of medicine Universitas Sriwijaya in the year 2018 has planned budget for the purchasing of teleconference activity such as support tools to facilitate some rural hospitals for joining teleconference activity.

Hopefully, we can develop this teleconference activity (telemedicine activity) to the rural hospitals and some hospitals in Palembang, so rural hospitals can share their medical cases, informations and knowledge to Moh. Hoesin hospital as the main education hospital.

Hopefully telemedicine activity can be done in rural hospitals, so between lecturers who are in faculty of Medicine Universitas Sriwijaya or in Moh. Hoesin hospital as the main education hospital can interact or discuss together about some cases in rural hospitals using teleconference.



Tomoyuki Wakamura

Cisco Systems

Japan

Biography:

Tomoyuki Wakamura
Cisco Systems G.K.
Digital Transformation office
Business Development Operations

Working as a sales rep in the medical market.



Kazuhiro Matsui
Cisco Systems
Japan

Biography:

Kazuhiro Matsui
Cisco Systems G.K.
Systems Engineer

Working as an engineer rep in the medical market.



Osamu Kikuchi
NEC Networks & System Integration Corporation
Japan

Biography:

Mr. Osamu Kikuchi is in charge of business development at NEC Networks & System Integration Corporation since 2000. He has over 15+ years' experience in Japanese Enterprise IT market especially teleconference and network, security areas.



Satoshi Shimakata
Zoom Video Communications
Japan

Biography:

Satoshi Shimakata is Head of Sales, Japan, Zoom Video Communications responsible for executing the go-to-market strategy for Japanese video communication market. He is committed to delighting the customer, developing local team and increasing top line revenue while promoting operational excellence.

As a specialist of cloud communications business, he has spent the past 13 years on customer's business transformation. Being as a sales lead and in sales management roles at mature technology companies such as Oracle, Cisco or Thomson Reuters, he has also built start-ups to maturity at companies such as WebEx.



Fumihiko Kimura
Unixon Systems Co., Ltd
Japan

Biography:

Mr. Fumihiko Kimura has worked as a manager for the Research & Development Center of Unixon Systems in Fukuoka, Japan since July in 2008.

Software Development:

Development of Cloud or On-premise software by JavaScript, PHP, Python, C++, Java which operates on UNIX, mac and Windows.

Package software for broadcasting station, government and medical. (Broadcast System for Media Asset Management, Managed File Transfer and Artificial Intelligence.)

UNIXON SYSTEMS CO., LTD

Founded in 1991, Unixon Systems is headquartered in Fukuoka, Japan with additional branches in Tokyo providing advanced software solutions packaged into over 20 unique products widely used in Japan by broadcasters like TBS, TV Asahi, NHK and others including the Japan Aerospace Agency.

Principal Businesses: Original Packaged Software Product Development and Sales.



Hiroshi Sato
V-cube, Inc.
Japan

Biography:

Deputy General Manager of Business Headquarters at V-cube, Inc.

Hiroshi currently manages the Medical Business as well as its Financial Business at V-cube, Inc.

Before joining V-cube

Hiroshi worked as General Manager for several media firms as cancer specialist.

He also had 8 years of extensive sales experience at an online video platform firm.



Nguyen Van Tue
Hue University of Medicine and Pharmacy
Vietnam

Biography:

Officer, Office of Science Technology and Relation International – Hue University of Medicine and Pharmacy

EDUCATIONAL BACKGROUND:

- 1979 – 1985: Primary Education:
- 1985 – 1988: Secondary Education:
- 1988 – 1991: High Education
- 1993 – 1997: University Education:
 - Hue University of Pedagogy, Faculty of English

LANGUAGE:

Vietnamese (Mother tongue)
English (second language)

OTHER EDUCATION

- Participation in the training course, “Cisco Certified Network Associate (CCNA)”, Ho Chi Minh, 2006
- Participation in the training course, “Cisco Certified Network Professiona (CCNP)I”, Ho Chi Minh, 2006
- Participation in the training course for Engineer at TEMDEC, Kyushu University, Fukuoka – Japan, 2017

EXPERIENCE:

- Admin of Network System, Hue University of Medicine and Pharmacy (Hue UMP), 2005 – 2008
- The first Engineer in Telemedicine and Teleconference of Hue University of Medicine and Pharmacy and Hue University Hospital, 2011 - present.



Chakaphan Sookcharoen
The Thai Red Cross Society
Thailand

Biography:

Chakaphan Sookcharoen has worked at The Information Technology Centre at The Thai Red Cross Society (TRCS) since December 2014. Currently works in Chief of Computer and Network System Group, His responsible for information technology infrastructure, computer network, security network management and activities support. With experience in the telemedicine and tele-education more than 15 years. He is involved in leads engineering and organizing of telemedicine working group in Thailand, under the role as a member of Workshop on Inter University Network (UniNet) and Computer Application (WUNCA).



Rungsun Rerknimitr
Chulalongkorn University
Thailand

Biography:

Rungsun Rerknimitr, MD, FRCP (London), FASGE

Rungsun Rerknimitr graduated from Chulalongkorn University, Thailand with honor. He obtained his American Board of Internal Medicine from Rush Medical College, Chicago in 1996. Later, he pursued his Gastroenterology fellowship from Louisiana State University in New Orleans. Before he returned to Thailand, he obtained an ERCP fellowship from Indiana University. He is currently a Professor of Medicine and a Director of GI Endoscopy Excellence Center at Chulalongkorn University, Bangkok, Thailand. He is also a founding member and past president of the Thai Association of Gastrointestinal Endoscopy (TAGE) and also the past chief editor of the Thai Journal of Gastroenterology. He is now the chief of the Division of Gastroenterology, Chulalongkorn University, Bangkok, Thailand. His main research interests are in field of colorectal cancer including screening, adenoma detection and prediction, quality indexes in colonoscopy and palliative stenting. His other main endoscopic interest is therapeutic ERCP with a special interest in metallic stent clinical application. His extra-endoscopy medical interest is telemedicine.



Le Thanh Ni
Cho Ray Hospital
Vietnam

Biography:

Le Thanh Ni, MD. graduated from Pleven Medical University, Bulgaria. He is working at Cho Ray Hospital since 1991 as a physician of internal medicine and infectious diseases. While he was a deputy of general planning department and the head of the hospital information system, he was the key person in establishment of Cho Ray Hospital information system. His current position is the head of department of clinical skills lab of Cho Ray Hospital. Since 2009, he involved in the activities of telemedicine development in Vietnam. He actively contributed to the development of telemedicine activities in continuous medical training in southern Vietnam.



Katherine M. Panganiban
St. Luke's Medical Center
the Philippines

Biography:

Dr. Panganiban is a surgeon from the Division of Minimally Invasive & Robotic Surgery (MIRS), Institute of Surgery, St. Luke's Medical Center (SLMC), Philippines. She completed her General Surgery residency and MIRS fellowship training in the same institution. Her international rotations for advanced laparoscopic and endoscopic surgery include Kyushu University Hospital (Japan), Cho Ray Hospital (Vietnam) and Ospedale Maggiore Policlinico – University of Milan (Italy). She has been participating in MIRS workshops and researches since her residency training. She has been actively involved in telemedicine and a part of the organizing committee of the Telemedicine Network of the Philippines (TNP), established 2016. Her research work in telemedicine entitled “Telemedicine Network of the Philippines: Beyond Borders” was acknowledged by the Society of the American Gastrointestinal and Endoscopic Surgeons (SAGES) Congress of 2017 where she received the Dr. Margret Oddsdottir Fellowship Award. Also, she is a member of the SLMC-SAGIP Bayan Foundation, Inc., Progressive and Responsive Organization of Pharmacy (PROPharm) University of the Philippines – Manila (UPM) and Alpha Phi Omega (APO) International, Inc. – University of the East Ramon Magsaysay Memorial Medical Center (UERMMMMC) chapter, and regularly volunteers in medical and surgical missions all over the Philippines.

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Abstract:

Telemedicine Network of the Philippines: Out to Reach. Out to Teach.

Katherine M. Panganiban, M.D.

Jeffrey Jeronimo P. Domino, M.D. Catherine S.C. Teh, M.D.
Philippines

Telemedicine Network of the Philippines (TNP), established May of 2016, is a medical network community geared towards advancing medical education, collaboration and practice. TNP is composed of a team of doctors from different institutions (government and private) & specializations, strengthened by their respective technical staff, working together in rural & urban areas, for the continuous growth of telemedicine in the Philippines.

Infrastructure development and service delivery (which includes healthcare and education), has always been a challenge in our country, especially in rural areas. TNP has successfully bridged this gap across the country and internationally, even in its early years of establishment. With great team effort of the technical and medical members, TNP has catalyzed the advancement of telemedicine in our country. Since 2016, it has formed two national symposia with international collaborations, currently connecting fourteen (14) from the initial eight (8) hospitals across the country. TNP has been continuously expanding in different

medical specialties & subspecialties, conveying activities & trainings, both for medical & technical staff thru local and international associations & training programs.

Reaching out.. to our patients, colleagues, urban and rural communities across the country - delivering quality education and eventually, healthcare service.

Teaching out.. students, allied medical professions, doctors, engineers, technical staff, anyone who is interested and has the dedication - for the advancement and growth of telemedicine in our country.

We are TNP.



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Dadang Makmun
University of Indonesia
Indonesia

Biography:

Prof. Dadang Makmun was born in Bandung, 19 November 1959. He graduated as a Medical Doctor from Faculty of Medicine Universitas Indonesia in 1983, became a consultant of Gastroentero-hepatology in 2001, and finished his PhD in 2011. Currently, he is a Professor of Medicine in Faculty of Medicine, Universitas Indonesia as well as the Head Department of Internal Medicine, Faculty of Medicine Universitas Indonesia/Cipto Mangunkusumo National General Hospital, Jakarta. Prof. Dadang Makmun is the President of Indonesian Society of Gastroenterology and one of the Editorial Board Members of World Journal Gastrointestinal Endoscopy (WJGE). His fields of interest are pancreatobiliary, upper and lower GI malignancy, and IBD. He is now the coordinator of Indonesian Telemedicine Network which is affiliated to Asia-Pacific Advanced Network.

Abstract:

The development of telemedicine in Indonesia in the past 3 years

Prof. Dadang Makmun, MD, PhD, FACG

Division of Gastroenterology, Department of Internal Medicine, Faculty of Medicine Universitas Indonesia/Cipto Mangunkusumo National General Hospital

Telemedicine is one of the solutions to solve the health problem in Indonesia. Telemedicine could provide medical consultation without considering the distance, exchange medical information, and share knowledge and skill among doctors in Indonesia or internationally.

In Indonesia, especially in the field of gastroenterology, telemedicine has been established since 2014. In 2015, Indonesian telemedicine network has been developed, connecting among 11 centers in Indonesia and Telemedicine Development Center (TEMDEC) in Kyushu University, Japan. Today, Indonesian telemedicine network has been broadened, involving 20 hospitals in Indonesia. Hopefully in the next

future, it will involve more centers, not only in the field of gastroenterology.

After 3 years since the establishment of telemedicine in Indonesia, there are some advantages including improvement of telemedicine equipment quality in each centers, increase enthusiasm among gastroenterologists to involve in telemedicine activity, enhance the quality and quantity of medical services in all involved centers, especially in the field of gastroenterology, and finally we hope it will enhance health services in Indonesia.



Kaka Renaldi
University of Indonesia
Indonesia

Biography:

Gastroenterologist and staf in Gastroenterology Division, Internal Medicine Department, Medical Faculty, Universitas Indonesia. He also a General Secretary for Indonesian Society for Digestive Endoscopy.

He obtained his medical degree from Univeritas Indonesia before further continuing his speciality in Internal Medicine in 2010 and Gastroenterohepatologist subspeciality in 2015. He actively become a sourceperson in mational radio and televison in the field of gastroenterology.



Udaya Koirala
Center for Rural Health and Kathmandu Model Hospital
Nepal

Biography:

Dr Udaya Koirala is a Senior Consultant Surgeon at Kathmandu Model Hospital and Kirtipur Hospital, and Associate Professor of Surgery at National Academy of Medical Sciences (NAMS). After completing high school at St Xavier's College at Kathmandu, he completed his MBBS and Masters of Surgery (MS) at Beijing University, health science center in Chinese Language. In 2002, he returned back to Nepal and started working at Mission hospitals in remote district hospitals of Nepal. Then he joined as a lecturer at Kathmandu Medical College in 2004 and worked till 2008. Then he joined Kathmandu Model Hospital as a consultant surgeon. He is a member in Nepal Research and Education Network. He is also executive member in Telemedicine Society Of Nepal. He has been involved in different telemedicine programs of the country. He is also working in the field of rural health and telemedicine through Center for Rural Health and Telemedicine, Phect, as a deputy director. He completed international fellowship

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program in Hepatobiliary and Laparoscopic Surgery in Seoul National University Bundang Hospital. He has many publications and presentations in the field of surgery.

Abstract:

Telemedicine in Nepal, The Journey we have travelled

Dr Udaya Koirala

Associate professor, surgery department, Deputy Director, Center for rural health and telemedicine

Kathmandu Model Hospital, Phect, Nepal

The history of possibility of telemedicine in Nepal started in May, 2002 when the first long range wireless link was made. Mohare Relay Station is at the elevation of 11,000 ft. Setting connection in remote areas was not easy. Gaurishankar General Hospital was connected to NREN backbone through fiber, bandwidth of 10 ~ 20 mbps in 2006. Kathmandu Model Hospital worked as a Hub for Telemedicine. More than 13 remote areas like Trisuli, Jomsom, Myagdi, Makwanpur, Sidhupalchok, Kavre, Achham, Bajura, were connected by 2011. Every morning telemedicine session between remote health center and Kathmandu Model Hospital was a routine schedule. Our aim is to plant our feet on the earth and touch the sky. We were having regular oncology session with Kansas University, University of New Mexico. We are having regular video session with Korea, Japan, Malaysia, Thailand, Philippines, Indonesia, Vietnam, Singapore through APAN (Asia Pacific Advanced Network) Medical Working Group. Live video presentations and live discussions, different case presentations and tele-discussions have been fruitful to the participating surgeons. First National Telemedicine Workshop was held in 2016. Our Center for Rural Health and Telemedicine was established at Phect, Kirtipur. We are having regular inter-hospital sharing with Dhulikhel Hospital, Patan Hospital, TUTH, NAMS, Possible Health Bayalpata and Dolakha, Pyuthan district hospital, Bajura district hospital, Gorkha Ampipal Hospital, Nangi rural health care center etc. Government telemedicine center was inaugurated on Jan 21, 2011 as a rural telemedicine centre and SAARC telemedicine centre at Patan Hospital. With this, 25 districts in the country now have telemedicine facility. Also, Nepal is now the third SAARC country to have this facility. In Nepal, where the majority of people lives in remote areas and has limited access to roads, telemedicine is one of the best alternatives to deliver quality services like diagnosis, prescription and counselling by health experts and physicians over telephone, mobiles, live video conferences or store and forward method through email.



Puja Lama
phect-NEPAL
Nepal

Biography:

Dr. Puja Lama is working at Public Health Concern Trust, Nepal (phect-NEPAL). She is the deputy director at phect-NEPAL Center for Rural Healthcare & Telemedicine (CRHT) in Kathmandu, Nepal and works as one of the chief coordinators with national and international organizations.

She has graduated in Medicine from Liaquat University of Medical and Health Sciences, Pakistan and then completed her Master's in Public Health from Boston University School of Public Health, USA. At phect-NEPAL, she has been working in various departments in Research; Communication, Networking and Advocacy and now is an active member of CRHT.



Yosuke Uchiyama
KDDI foundation
Japan

Biography:

International Cooperation Department, KDDI Foundation

And Government and Industrial Affairs Department, KDDI Corporation



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He is working for introduction of ICT and related issues to developing countries, especially Asia and Pacific region. Most of his activities are belong to Asia-Pacific Telecommunity programme such as Human Resource Development, ICT pilot project, Lecture of training and conference. From 2005 till now, he achieved more than 30 projects regarding to ICT infrastructure, various applications and policy making support with foreign ICT ministries and public organizations.

Before 2005, he has belonged area of, satellite communication/control, information system, switching system, billing system, regional development plan, and installation of new ICT technology/application/service.

Abstract:

International cooperation activities focused on Information Communication Technology for medical application in remote and rural area

Yosuke Uchiyama

KDDI foundation (Tokyo, Japan)

One part of the KDDI foundation activities is introduction of Information Communication Technology (ICT) into developing countries and rural area with several applications, as collaboration project. Presentation will be showed 2 ongoing projects regarding medical services support on introduced ICT infrastructure.

1. Educational Cloud Network in Myanmar

In order to networking all universities in Myanmar including connection of mmREN, 20 computer/technological universities in Myanmar have been connected by the cloud network technology in recent 3 years. In next step to extend this network in Myanmar, remote medical lecture for medical universities in Myanmar together with Kyusy University Hospital are starting to be introduced as one of leading application.

2. Affordable and Sustainable fiber cable networking in rural area

In judging by common sense of Gbps level networking in wide sphere and small population as rural, it is almost impossible that networking will be installed in such rural due to extremely high cost, less profit and required local technical staffs. In order to introducing affordable and sustainable network in rural, our project is introduced armed slim fiber cable, easy construction (Do It Yourself), Public-Private Partnership and change consensus of quality/reliability based on what is appropriate technology in such area. In this year, introduction along with medical health check kit in mountain village in west Nepal. Other trials were the government wide LAN connected to hospital/clinic/ministry in Nauru, 2014, and the mountain village LAN in Bhutan, 2013.



Chris Hair

Australian and New Zealand Gastroenterology International Training Association

Australia

Biography:

Dr Chris Hair is a gastroenterologist and general physician at the University Hospital Geelong, and Epworth Private Hospital, Geelong. He is appointed as Conjoint Associate Professor Medicine at Deakin University.

He is a founding member, of the Australian and New Zealand Gastroenterology International Training Association (ANZGITA) and has assisted the development of endoscopy and gastroenterology through teaching and advocacy in many lower middle income countries, including Fiji, Samoa, and Solomon Islands. He is the co-director for the World Gastroenterology Organisation teaching centre based in Suva, Fiji and is the pacific programs director for ANZGITA.



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He has spent close to a decade volunteering in support of gastroenterology and endoscopy development in the Pacific. During this time, the Pacific Island Nations have seen the widespread development of endoscopy.

Chris has championed the use of digital technologies to provide more teaching opportunities and better immediate patient care across the massive Pacific region in gastroenterology and endoscopy. In 2018, through collaboration with Dr Payne Perman (Pohnpei) and Ms Christina Higa (University of Hawaii) 5 GI tele-health education sessions have been conducted using internet video conferencing. The sessions were attended by around 15 clinicians, many from previous Fiji programs, from over 12 island nations. Whilst the program is still at an early stage, it has already covered a range of topics, and feedback has been positive resulting in a plan for further sessions.

He has also created a digital group chat room (Viber) that helps bring RACP fellows and ANZGITA volunteers into immediate contact with internal medicine physicians within the Pacific. The chat room creates a global 'ward round'. 37 physicians can already connect immediately including 27 Pacific Island doctors and it has already been beneficial to the treatment of patients.

Abstract:

Extending gastroenterology training and mentorship in remote pacific islands using video-tele conferencing and other technologies

Introduction:

Since 2008 a monthly program has been conducted at the Colonial War Memorial Hospital, Suva, Fiji, aimed at upgrading skills and knowledge in gastroenterology for Fiji and the Pacific Island Countries. This program has been conducted with goodwill and funding from individual gastroenterologists from Australia and later, New Zealand, and supported by the World Gastroenterology Organisation, Australian and New Zealand Gastroenterology International Training Association (ANZGITA) and Australian Aid. Since inception, there have been 104 Pacific Island doctor attendees to the program which include physicians, surgeons, registrars and over 100 nurse attendances. These doctors and nurses have returned to their countries, established and conducted their individual endoscopy units. Support for further education in gastroenterology and endoscopy has been limited to outreach visits, in which training can be performed in person. Recently, improvements in information technology, particularly in the northern pacific islands, has allowed for faster internet speeds, such that education can be provided using multi-user video conferencing.

Methods:

A monthly video conference has been held since early 2018. Zoom videoconferencing has been facilitated in collaboration with the Pacific Basin telehealth resource centre, University of Hawaii, who also assist with invitations to all Pacific Island Nations. Topics of discussion are requested by the island nations, rather than provided by external

specialists. Specialists with Pacific Experience from ANZGITA have provided case based discussions and topic are education.

Results:

To date, 5 teleconferences have been conducted. Topics have included biopsy a suspected colorectal cancer, gastrointestinal stromal tumours, Hepatitis B, benign oesophageal strictures, polypectomy technique. The program has reached out to Palau, Pohnpei, Marshall Islands, Kiribati, Federated states of Micronesia, Fiji, Samoa, American Samoa and Tonga, with over 60 attendees. Whilst the quality of connection is excellent in the Northern Pacific Nations, limitations to the program affecting the South Pacific Nations include slow internet speeds and need for use on personal devices (such as iphone) rather than in academic institutional setting.

Conclusions:

The initial results from this program indicate an emerging success of video-tele conferencing as a method of education to reach isolated Pacific Islands. Further development of internet access and speed, particularly in the South Pacific Nations will be needed to improve local connection and access.



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Vicente Victor Ocampo

**Ospital ng Makati
the Philippines**

Biography:

Dr. Vicente Victor D. Ocampo, Jr. graduated from the University of the Philippines College of Medicine in 1996 and proceeded directly to take his residency in Ophthalmology at the Philippine General Hospital. He completed his fellowship in Uveitis and Ocular Immunology at the Massachusetts Eye and Ear Infirmary - Harvard Medical School in 2001. He is a diplomate of the Philippine Board of Ophthalmology and a fellow of the Philippine Academy of Ophthalmology.

His area of expertise is ocular inflammation and its associated systemic disorders with published articles on this matter. Dr. Ocampo is presently the President of the Philippine Ocular Inflammation Society and is a member of the International Council of the International Ocular Inflammation Society. He is also the head of Uveitis Service at the Ospital ng Maynila Medical Center and Asian Hospital and Medical Center in the Philippines.

Another passion is teaching and moulding young minds to become outstanding ophthalmologists in the future. Dr. Ocampo is currently an Assistant Professorial Lecturer in Ophthalmology at the Pamantasan ng Lungsod ng Maynila and Chair of the Department of Ophthalmology at the Ospital ng Makati. He was previously the Resident Training

Officer at Veterans Memorial Medical Center and Ospital ng Maynila Medical Center.

Abstract:

Establishing TeleOphthalmology at Ospital ng Makati (New Member)

Authors: *Vicente Victor Ocampo, Jr. MD and Emil Fiorello Balitaan MD*

Affiliation: *Ospital ng Makati, Philippines*

Objectives: To introduce the Ophthalmology Department of Ospital ng Makati to the TEMDEC Community and to establish links with other institutions in advancing tele-ophthalmology through TEMDEC.

Discussion: Ospital ng Makati (Osmak) is the tertiary government hospital of the most progressive city in the Philippines. Its Department of Ophthalmology is committed to providing quality eye care to its constituents and to moulding young doctors to become competent and caring ophthalmologists. The Ophthalmology Department of Ospital ng Makati aims to be at the forefront of telemedicine as it recognises the emerging role of digital technology as a valuable tool in performing its dual objectives of service and training. It has embarked on studies on the application of smartphones in tele-ophthalmology particularly on its use to screen for ophthalmic diseases such as retinopathy of prematurity. Another achievement is our pioneering efforts in electronic medical records. The Department is working to digitize all hospital records and operations following the efforts of Osmak to successfully implement a fully electronic medical records system for the outpatient clinics and the emergency department, a first in the country.

Conclusion: Our experience with pioneering applications of information technology in healthcare will be our leverage to boost tele-ophthalmology. By joining TEMDEC, we wish to establish links with other ophthalmologists all over the world to keep abreast on current trends and innovations in Ophthalmology. Ultimately, we hope that someday our efforts will allow not only Makati citizens but even those in far flung areas in the Philippines to have access to quality and up to date ophthalmic care through tele-ophthalmology.



Sheila John
Sankara Nethralaya
India

Biography:

Dr Sheila John is a Consultant Ophthalmologist and Head of Tele-ophthalmology and E-Learning departments at Sankara Nethralaya, the world class ophthalmic institution and clinical arm of the Medical Research Foundation, (MRF) engaged in dispensing quality eye care,



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for all eye care challenges, based in Chennai, Tamil Nadu, INDIA. Ingrained with a natural interest in the functioning of the eye and enchanted by its multiple facets, she pursued her interest with passion and completed her specialization in ophthalmology, her favorite subject after MBBS.

She joined Sankara Nethralaya in 1990 as a consultant ophthalmologist and it was a moment of great pride for the young consultant when she was chosen by none other than the Founder of Sankara Nethralaya, the legendary Dr SS.Badrinath to spearhead the clinical operations of the institution's ambitious community services in 1992. Dr Sheila John is known for her deft hand and dedication to her patients and has performed more than 10,000 cataract surgeries, helping to considerably improve the visual outcome and quality of life of her patients. She played the critical role of effectively interpreting Ocular Ultrasonogram reports and teaching ultrasonography to ophthalmic post-graduate students between years 1991 to 1997.

Dr Sheila John has demonstrated an avid interest in embracing advanced technology to effectively enhance the quality and reach of cost free eye screening to the poor and has been part of her institution's journey of adapting emerging technologies ranging from satellite aided dish connectivity to leveraging the advanced Fundus camera, beaming images of the patient's eye being examined at a remote village to the base hospital. She has been involved in conducting Tele-ophthalmology camps since 2009 leveraging technology to save the travel cost and time for rural patients. An eye care professional who keeps herself abreast of the latest in her field, Dr Sheila John has been involved in focused India centric ophthalmic research and has twelve publications both in National and International Journals to her credit. She has taken part in several international and national conferences and has also conducted in-depth Tele-ophthalmology workshops both in India and overseas.

Abstract:

The impact of Tele-ophthalmology vans in combating blindness in rural areas in the State of Tamil Nadu, India

Author Dr Sheila John, Martin Manoj M, Padmavathy.A, Divya Jayaraj, Ramesh Babu S

Teleophthalmology department, Sankara Nethralaya , No.41 College road, Chennai -600006, Tamilnadu, India.

AIM: Sankara Nethralaya introduced Tele-mobile vans which would provide comprehensive eye care to the semi-urban pockets and villages of Thiruvallur and Kanchipuram districts in April 2010 and has continued its service till date – 2018. In the 8 years of service we have demonstrated visible impact in these regions.

Method: Tele-ophthalmology mobile vans with ophthalmic equipments and paramedical staff conducted comprehensive eye examination camps and identified major causes of blindness in Thiruvallur and Kanchipuram districts of Tamilnadu. Prospective chart reviews of all the camps were done with the help of Electronic Medical Record (EMR)

during the period of April 2010 – March 2018. Professional and personalized consultation by the Ophthalmologist was made possible by means of teleconsultation during which images of the patient's eye, captured with the help of a fundus camera and along with Electronic Medical Record (EMR) from campsite were transmitted to the base hospital, using internet connectivity.

Results: This study of 147868 patients who underwent comprehensive eye evaluation at 1461 rural Tele-ophthalmology eye camps provided insight into the causes of visual impairment among the rural poor. Uncorrected refractive error (60756) was the most common cause of avoidable blindness, followed by Cataract (17271) and Diabetic retinopathy – 1882 patients. If required patients examined at the above camps were referred to the base hospital in Chennai for further investigations and treatment which was provided free of cost. The backwardness of the villages did prove to be an impediment in reaching out to a larger patient base due to poor internet connectivity in rural areas and only 2597 tele-consultations were done

Conclusion: Tele-ophthalmology holds great potential in overcoming barriers and improving the quality, access and affordability in dispensing eye care and has proven to be a boon in taking advanced eye care, right to the door steps of rural India.



Shinji Miyamoto
Oita University
Japan

Biography:

EDUCATIONAL BACKGROUND

M.D. Faculty of Medicine, Oita Medical University, Yufu-shi, Japan 4/1978-3/1984

PROFESSIONAL POSITIONS AND EMPLOYMENT

Post-doctoral training including residency/fellowship

Residency General Surgery 4
 Department of Surgery
 Oita University, Yufu-shi, Japan
 4/1984-12/1984

Fellowship General Surgery
 Department of Surgery
 Oita University, Yufu-shi, Japan
 3/1999-8/1999

Postdoctoral Research Fellow
 Department of Surgery
 University of Pennsylvania, Philadelphia
 United States
 5/1995-8/1997

Fellowship Cardiovascular Surgery
Department of Cardiovascular Surgery
Oita University, Yufu-shi, Japan
9/1999-3/2000

Academic positions (teaching and research)

Professor Department of Cardiovascular Surgery, Oita
University, Yufu-shi, Japan
2008 - present

Hospital position T

Chief, Director Department of Cardiovascular Surgery, Oita
University, Yufu-shi, Japan
2008 - present



Adil Sadiq
Sakra World Hospital
India

Biography:

Dr. Adil Sadiq has the distinction of being the only cardiac surgeon in South India trained in robotic cardiac surgery. He is one of the very few surgeons in the country with extensive experience in minimally invasive cardiac surgery (MICS CABG), including endoscopic approaches and is one of the very few surgeons performing Video-Assisted Thoracoscopic Surgery (VATS) in this part of the country.

He has considerable experience with Percutaneous Transcatheter Implantation of an Aortic Valve (valve replacement via the groin), being part of the team that had pioneered its clinical use. He has performed over 4500 Cardiac Surgeries, 1600 thoracic procedures and 65 Heart and Lung Transplants which speak volumes about his success in critical surgeries.

He is highly specialised and has years of experience and expertise in cardiac sciences, which helps him to perform significant surgeries like minimally invasive cardiac surgery, VATS - Video-assisted thoracoscopic surgery, Keyhole lung surgery, keyhole heart surgery, etc. He is experienced in using the latest, state-of-the-art technology for diagnostics and imaging studies which gives a detailed diagnosis of MICS.

He aims to build the department of cardiac sciences as a center of excellence and is committed to providing the best medical and surgical treatment to all the patients. By incorporating the best medical and surgical practices, he is providing expert care in minimally invasive surgery (MICS CABG), keyhole heart surgery, vascular surgery, bypass surgery, minimally invasive valve surgery, congenital cardiac care, etc. to all patients - from children to senior citizens.

His practice encompasses the entire spectrum of cardiac science which enables him as a best cardiac surgeon in Bangalore. He is specialised in cardiothoracic & vascular surgery, minimally invasive cardiac surgery, minimally invasive valve surgery, total arterial beating heart revascularization, keyhole heart surgery, complicated redo-heart surgery, valve repairs, keyhole vascular surgery, VATS - Video-assisted thoracoscopic surgery, bypass surgery, and congenital cardiac surgery.

Before joining to Sakra World Hospital, one of the best heart hospitals in Bangalore, he was a Senior Consultant, Cardiothoracic and Vascular Surgery at Apollo Hospitals, Bangalore for two years.



Le Ngoc Thanh

E Hospital

Vietnam

Biography:

Full name: Le Ngoc Thanh

Position: Director of E Hospital; Director of Cardiovascular Center; The Dean of the school medicine and pharmacy, Vietnam National University

Professional background:

- Degree: Doctor of philosophy
- Date of completion of highest degree: 2001
- Specialty: Cardiovascular Surgery
- Academic rank: Professor

Training and practice experiences:

- 1978 – 1984 Student of Hanoi Medical University
- 1984 – 1987 Resident in General Surgery, Viet Duc Hospital
- 1987 – now Primary doctor – Surgeon at Department of Cardiovascular and Thoracic Surgery – Viet Duc Hospital
- 1989 – 1990 Fellow in pediatric cardiac surgery, France
- 1992 – 1993 Fellow in pediatric cardiovascular surgery, France
- 1997 – 1998 Fellow in pediatric cardiovascular surgery, France
- 2000 Fellow in adult cardiac surgery, Australia
- 2000 – 2004 Vice Head – Department of Cardiovascular and Thoracic Surgery – Viet Duc Hospital
- 2004 – 2009 Head of Department of Cardiovascular and Thoracic Surgery – Viet Duc Hospital
- 1987 – now Tutor at Surgery Department, Hanoi Medical University
- 2005 – now General Secretary of Association of Cardiovascular and Thoracic Surgery of Vietnam
- 2007 – now Council member of Association of Thoracic and Cardiovascular Surgeons of Asia

- 2008 – now Member of Prenatal Diagnosis Board, National Obstetrics Hospital
- 2009 – now Director of Cardiovascular Center, Head of Department of Cardiovascular and Thoracic Surgery, E hospital.
- 2010 – now Vice President and General Secretary of Association of Cardiovascular and Thoracic Surgery of Vietnam
- 2011 – 2014 Vice Director of E Hospital, Director of Cardiovascular Center.
- 2013 – now Member of Editorial Board, Vietnam Medical Journal
- 6/2015 – now Director of E Hospital, Director of Cardiovascular Center
- 6/2016 – now President of Association of Cardiovascular and Thoracic Surgery of Vietnam
- 6/2018 – now The Dean of the school medicine and pharmacy, Vietnam National University



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Budi Rahmat
National Cardiovascular Center Harapan Kita
Indonesia

Biography:

EDUCATIONAL HISTORY

1. General Medical Degree:
 - July 1995- June 30, 2001
 - Faculty of Medicine, North Sumatra, Indonesia

2. Cardiothoracic Surgery Training:
 - July 2002- August 01, 2008
 - College of Indonesian Thoracic and Cardiovascular Surgeons
 - Faculty of Medicine, University of Indonesia
 - Graduate Grade: CUM LAUDE.**

3. Training & Workshop:
 1. **Workshop on Mitral Valve Repair**
 18th Biennial Congress Association of Thoracic & Cardiovascular Surgeons of Asia (ATCSA)
 Bali, Indonesia, November 25th, 2007
 2. **Mitral Valve Repair & Tissue Valve**
 Continuing Medical Education Cardiovascular Surgery
 Jakarta, Indonesia, November 10-11,2008
 3. **Intensive Mitral Valve Repair**
 Taweesak Chotivatanapong, MD. Dept. of CVT, Chest Disease Institute, Thailand
 October 05 – 09, 2009.
 4. **6th Mulu Rafflesia Heart Valve Symposium**
 Kathmandu, Nepal. October 06 – 10, 2010.
 5. **Pediatric Cardiac Surgery Clinical Fellowship**

Heart Center, King Faisal Specialist Hospital and
Research Center, Riyadh Saudi Arabia
August 2012 – March 2013.

Mentor: Dr. Zohair Al Halees

6. **Pediatric Cardiac Surgery Clinical Fellowship**

Hospital For Sick Children, Toronto, Canada
July 2013 – June 2014

Mentor: Dr. Glen S. Van Arsdell

7. **Training of Trainer**, Faculty of Medicine, University of
Indonesia, 2015

8. **Training of Trainer CV Masterclass,**

Prof. Paul Sergeant, MD, PhD. National Cardiovascular
Center Harapan Kita Hospital, Jakarta
02 April 2017

WORKING EXPERIENCE

1. **Chief of Pediatric & Congenital Heart Surgery Division**, National Cardiovascular Center, Harapan Kita Hospital, Jakarta – Indonesia. From March 1st, 2018 until Now
2. **Active Member** of The Society of Thoracic Surgeons, From 2015 until Now
3. **Active Member** of European Association for Cardio-Thoracic Surgery, From 2013 until Now
4. **Consultant Surgeon**, Pediatric & Congenital Heart Surgery, National Cardiovascular Center Harapan Kita Hospital, Jakarta Indonesia. From November 1st, 2008 until now
5. **Secretary General**, Association of Indonesian Cardiovascular & Thoracic Surgeons, 2015-2017.
6. **Secretary General**, Cardiothoracic and Vascular Surgery Training Program, Department of Surgery, University of Indonesia, December 5th, 2015 until now
7. **Clinical Teacher in Cardiovascular & Thoracic Surgery**, Ministry of Health of Indonesia, February 1st, 2012 until now.



Shigeyuki Ozaki

Toho University

Japan

Biography:

Shigeyuki OZAKI, MD, PhD

Department of Cardiovascular Surgery, Toho University Ohashi
Medical Center

EDUCATION:

Residency: Cardiovascular Surgery
Kameda Medical Center (Chiba, Japan)
1991 – 1994

Residency: Thoracic Surgery
National Cancer Center (Tokyo, Japan)



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1990 - 1991
Residency: General Surgery
National Defense Medical College (Saitama, Japan)
1988 - 1990
Residency: Early post-graduate rotating program (Internal medicine,
Pediatrics, Anesthesiology, Cardiology, General surgery)
National Defense Medical College (Saitama, Japan)
1986 - 1988
Medical: National Defense Medical College (including
undergraduate)
Saitama, Japan
1980 - 1986

HONORS/ AWARDS:

Best Abstract Award in Japanese Society of Echocardiography, 2009
JSAO Grant in 41th Japanese Society for Artificial Organs, 2003
Belgium Government Scholarship in Medicine, 1996

PRACTICE AND RESEARCH EXPERIENCE:

Professor and Chairman, Department of Cardiovascular Surgery
Toho University Ohashi Medical Center
2008 – To date

Associate Professor, Department of Cardiovascular Surgery
Toho University Ohashi Medical Center
2003 – 2008

Assistant Professor, Department of Surgery
National Defense Medical College
2004 – 2005

Chief, Department of Cardiovascular Surgery
Shin – Tokyo Hospital
2005 – 2009

Research Fellow, Department of Cardiovascular Surgery
Catholic University of Leuven
1996 – 1999

Consultant Surgeon, Department of Cardiovascular Surgery
Kameda Medical Center
1994 – 1996

ACADEMIC EXPERIENCE:

Professor, Department of Cardiovascular Surgery
Toho University Ohashi Medical Center
2008 – To date

Associate Professor, Department of Cardiovascular Surgery
Toho University Ohashi Medical Center
2003 – 2008

Assistant Professor, Department of Surgery
National Defense Medical College
2004 – 2005

PROFESSIONAL ORGANIZATIONS

American Association for Thoracic Surgery (AATS)
European Association for Cardio-Thoracic Surgery (EACTS)
Asian Society for Cardiovascular and Thoracic Surgery
Japan Surgical Society
The Japanese Association for Thoracic Surgery
The Japanese Society for Cardiovascular Surgery
Japanese Society for Vascular Surgery
The Japanese Circulation Society
Japanese College of Cardiology



Thawatchai Akaraviputh
Mahidol University Siriraj Hospital
Thailand

Biography:

Professor Thawatchai Akaraviputh

Dr. Thawatchai Akaraviputh is a lecturer of the Department of Surgery, Faculty of Medicine Siriraj Hospital and an endo-laparoscopic surgeon. He received his undergraduate degree and surgical training from Mahidol University, Bangkok, Thailand. In 1999 he received Germany Academic Exchange Service (DAAD) Scholarship for training in advanced endoscopy at Germany. He completed a postdoctoral fellowship in advanced surgical endoscopy and obtained “Doktors der Medizin” degree with Professor Nib Soehendra at University Hospital Eppendorf, Hamburg, Germany. He returned to Bangkok in 2002, where he continued his training in laparoscopic surgery and subsequently in robotic surgery. He has many international publications in a variety of endoscopic and laparoscopic surgery and has been promoted to Professor of Surgery in 2014. At present, he is the Editor-in-Chief of Siriraj Medical Journal (SMJ) which is the official journal of Siriraj hospital. He also is the past president of Thai Association for Gastrointestinal Endoscopy (TAGE) and the current president of International Association of Surgeons, Gastroenterologists and Oncologists (IASGO: Thai chapter). Apart from this, he is also the Deputy Dean of International Relations, Faculty of Medicine Siriraj Hospital.



Dinesh Taneja
Dr B R Ambedkar University Delhi
India

Biography:

Dinesh Taneja, M.E. (Computers Technology and Applications) is a professional with 26 years of rich experience in spearheading and managing the IT/ Telecom operations for large-scale organizations. He is an IT infrastructure architect; strategist & implementer with demonstrated abilities in the implementation of IT infrastructure and new technology for streamlining IT related operations. He has done various projects in the field of telemedicine and related activities. He is presently working at Dr B R Ambedkar University Delhi, India as Director- IT.



Tungyao Chang

Taiji Clinic

Taiwan

Abstract:

Telemedicine of Congenital Heart Disease Among Taiwan, Japan, and China

Tungyao Chang, Taiji Clinic, Taipei, Taiwan

Motoyoshi Kawataki, Tohoku University, Sendai, Japan

We report our experiences of telemedicine in the discipline of congenital heart disease

(CHD). The collaboration in this field in the form of telemedicine between Taiwan and Japan started in September, 2014. It started as an one hour teleconference for case presentation or lectures twice monthly with either H323 compatible hardware or Vidyo system. In 2015, the Zoom software was adopted as the major platform. In 2016, the peers in China started to join. Up until 2018, there have been 5 regular connecting cities including Taipei, Sendai, Guangzhou, Chengdu, and Dalian, with around 50 participants per activity.

In 2017, it further developed into the form of telediagnosis or regular work meeting between Taiwan and Japan. At times when the diagnosis was obscure, a teleconference with the Zoom software would be held, with the ultrasound image streamed to the cloud, so that the remote specialist could help to interpret the findings in real time, demonstrating that telediagnosis of congenital heart disease is feasible remotely. In addition, a routine work meeting of congenital heart disease has been held regularly every week from 2017 between Taiwan and Japan to secure seamless transfer of CHD cases from the prenatal team to the postnatal team.

A questionnaire result regarding the connection quality and participants' satisfaction will also be presented. In Summary, in the discipline of CHD, telemedicine is feasible.



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Hai An Ha Phan
Hanoi Medical University
Vietnam

Biography:

Working address:

Department of Internal Medicine, Division of Nephrology,
Department of International Cooperation, Hanoi Medical
University
Kidney Diseases and Dialysis Department, Viet Duc
University Hospital

Graduated from 2nd State Medical University of Moscow (Ex-USSR)
in 1987

Training in Nephrology, Dialysis and Transplantation in France,
Australia, Japan, and US

ISN Nephrology Fellowship

Currently works as senior lecturer at Hanoi Medical University, Dept.
of Internal Medicine, Div. of Nephrology; Nephrologist at VIET DUC
University Hospital, Kidney Diseases and Dialysis Department

Active in education, clinical research, and health promotion for
community

Abstract:

Remote Medical Education in Vietnam

Ngoc Anh Le¹, Hai An Ha Phan¹, Viet Truong Truong², Duy Chinh Ngo³

1. Hanoi Medical University, Hanoi, Vietnam

2. Thai Nguyen Medical University, Thai Nguyen, Vietnam

*3. University of Medicine and Pharmacy Hai Phong, Hai Phong,
Vietnam*

One of the key directions undertaken by Vietnam MOH is to empower the universities and enhance their potential to develop and implement innovative approaches for training the current and future members of health workforce. Therefore, some medical universities in Vietnam have implemented remote medical training (eLearning). This approach aims to improve quality and open more access to learning for students and health workers. There are many forms of remote medical education available in Vietnam. From 2008, HMU implemented online lectures. In 2012 a pilot Web-based online course focussing on HIV was launched and later, in 2015 case discussion in form of e-mentoring was released. Electronic communications helped to develop and maintain the link between senior specialists (mentor) and students, or junior - less experienced practitioners independently of geography or time schedule. After pilot phase, remote education has been expanded to several medical schools and universities, which become active in using this mode of education and training not only for medical students and health workers but also for patient monitoring and education, health promotion...

The main challenge in developing a system and network of tele-educational and practicing institutions in Vietnam is lack of

coordination and linkage between them in order to get the best benefit and save the resources. In addition a well-trained technical, supportive team is necessary for maintaining regular activities. At present the specific training courses for technical teams are unavailable in Vietnam. We look forward to having support to set up a center of excellence in eLearning in Vietnam where remote medical education and telemedicine can make difference in teaching and providing health services.



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Jakir Hossain Bhuiyan Masud

Taipei Medical

Taiwan

Biography:

Work Experience:

- Chairman, Public Health Informatics Foundation (PHIF) since 2015
- Visiting Professor, King Saud University, KSA since 2015
- Director-Program & Research, Center for Telehealth Services since December 2014.
- Advisor-Public Health Informatics & Global Affairs for Global Advisory Commission at Global Unification International since April 2014.
- National Consultant-Investment Case, UNICEF, Dhaka, Bangladesh from January 2014 to March 2014
- Project Coordinator at Diabetic Association of Bangladesh from July 2013 to December 2013
- Research Associate, Dept. of Epidemiology at National Heart Foundation Hospital & Research Institute from January 2012 to July 2013.
- Lecturer in Dept. of Health Informatics at Bangladesh Institute of Health Sciences (BIHS) from January 2011 to October 2012.
- Field Officer-Tobacco Control (Consultant) in World Health Organization (WHO) from April 2011 to December 2011.
- Worked on a project of Planning Commission as a Research Associate in NIPSOM from July to November 2010.
- Field Supervisor in Transparency International Bangladesh from May-July 2010.
- Research Associate in Planning Commission from January-May 2010.
- Research Officer, National Institute of Preventive and Social Medicine (NIPSOM), Dhaka from February to November 2009.
- Lecturer at NYDASA Medical Institute from January 2005 to July 2009.

Educational Qualification:

- Master in Biomedical & Health Informatics, Mahidol University, Thailand

- Master of Public Health, State University of Bangladesh, Bangladesh
- Master of Health Economics, University of Dhaka, Bangladesh

Publication:

- Jakir Hossain Bhuiyan Masud. HEALTH INFORMATICS IN BANGLADESH: A NEW COURSE IMPLEMENTATION IN POST GRADUATE EDUCATION. *BMJ Open* 2015;5 (Suppl 1); doi: 10.1136/bmjopen-2015-forum2015abstracts.59.
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- Islam MZ, Farjana S, Masud JHB. Complementary feeding practices among the mothers of a rural community. *NIMC Journal* 2012;3 (2); 2221-0377

Abstract:

Telemedicine in Bangladesh: A qualitative study of perspectives

Jakir Hossain Bhuiyan Masud¹, Ming-chin Lin¹

¹Graduate Institute of Biomedical Informatics, Taipei Medical University, Taiwan

Background:

Bangladesh government has given importance to ICT to provide health care primarily for providing consultation-using telemedicine. Telemedicine helps to provide health care facility to remote area. It is cost effective. It saves life and make the treatment schedule on a timely manner. Our aim was to assess the present situation of telemedicine in Bangladesh.

Methods:

Our study collected 12 semi-structured interviews with medical doctors from Bangladesh. We used qualitative method for data collection. We measured how telemedicine can help the patient more closely and conveniently. This study focused on the barriers and benefits of telemedicine in Bangladesh.

Results:

Telemedicine service helps the patient to get healthcare facility within a short time from anywhere in the country when necessary. The main drawbacks of implementation of telemedicine to emphasize the issue on ethics, data security and standard. Trained healthcare professional is required to implement telemedicine. On the other hand, patients are not aware of the facility. However, internet connectivity is a big concern for implementing telemedicine in Bangladesh.

Conclusion:

Telemedicine will have a good impact on general healthcare in Bangladesh. We can conclude that making a convenient internet connection would be more effective use of telemedicine service in Bangladesh. Thus, peoples will get healthcare when necessary.



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Agung Budi Sutiono

**Hasan Sadikin Hospital-Padjadjaran University
Indonesia**

Biography:

Dr. Agung Budi Sutiono is working as clinical assistant professor of neurosurgeon at Hasan Sadikin Hospital-Padjadjaran University Bandung Indonesia. He completed his medical school at Padjadjaran University Bandung. He did clinical fellow of neurosurgery in Groningen University Hospital, Netherlands. Continuing his PhD degree in medical socio-informatics at The University of Electro-Communications Tokyo and also in skull base surgery followed by residency training program in Neurosurgery at Keio University Hospital. His research interest is medical informatics, telemedicine, meninges pattern in skull base, neurocritical care and neurotrauma. He published many papers in medical informatics and neurosurgery in national and internationally.

Abstract:

Virtual Telepathology and Radiology for Quick Responses (Viphyd)

Jakir Hossain Bhuiyan Masud¹, Ming-chin Lin¹, Agung Budi Sutiono¹, Ahmad Faried¹, Soni Ari Yuniarto², Andri Qiantori², Yudi Tri Jayadi²

1. Department of Neurosurgery

Hasan Sadikin Hospital-Padjadjaran University Bandung Indonesia

2. R&D PT. Telkom Bandung Indonesia

The problems are arise in developing countries like Indonesia, in which specialist medical practitioner, pathologist and radiologist in special, are inadequate compare with its population, 258.7 millions (BPS-Statistics Indonesia, August 2016). Both every those expert should serve more than 200 thousands people. The geographical barriers of the Indonesia also play role in those inadequate service, since the Indonesia area cover around 3,27 million km² (land and sea) with more than 16000 of islands. The proposed system will be developed to

overcome the current problem, by using telepathology and radiology. The telepathology and radiology care system ViPhyD introduce the new way of medical care handling suitable in the rural areas or limited access county with minimum medical facilities.

Keywords: Telepathology, teleradiology



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Vincent John H. Tumlos
Philippine Council for Health Research and Development
the Philippines

Biography:

Vincent John H. Tumlos, MPM has more than 10 years' experience in running R&D program management, coordination, and agenda setting on the field of eHealth. He is currently a member of the Philippine eHealth Technical Working Group, an inter-agency and multisectoral committee that lead the development of eHealth in the Philippines. He has specialized knowledge on intellectual property protection, technology transfer and commercialization. He took extensive training course on technology transfer office and management at the IC2 Commercialization Group, University of Texas at Austin, US. He took his Master in Public Management specialized in Technology Enterprise Development at the Ateneo School of Government, Ateneo de Manila University. In 2005, he joined the Philippine Council for Health Research and Development (PCHRD), one of the sectoral research council of the Department of Science and Technology Philippines.

Abstract:

State of Telemedicine R&D and eHealth Governance in the Philippines

By: Vincent John H. Tumlos, MPM

Philippine Council for Health Research and Development

The Philippines as an archipelago faced enormous challenges on delivering health services to its geographically isolated communities. Telemedicine as one of the ICT tools has a potential to ensure equal access and quality of services to the remote areas. This paper will present the experiences of the Philippines in terms of research and development activities including development of local telemedicine device, and national eHealth governance.

The ICT for Health research priorities under the National Unified Health Research Agenda details the health technology development including telemedicine, data management and analytics, electronic medical records system, telereferrals, and other ICT-enabled devices and services. Learnings from the development of local telemedicine device and how it translates from a university laboratory to upscale industry manufacturing have provided key elements of university and industry research collaboration. Furthermore, the availability of local

regulatory framework for the validation, standardization, and registration is a challenging journey for both funder and researchers.

The Department of Health (DOH) recognized the importance on the use of eHealth tools, including telemedicine, has partnered with the Department of Science and Technology (DOST), Department of Information and Communications Technology (DICT), and Philippine Health Insurance Corporation (PhilHealth) to establish a national eHealth governance structure. Guided by the WHO – ITU eHealth Toolkit, the multi-agency partnership was to develop the Philippine eHealth Strategic Plan and Framework, a national blueprint of eHealth development in the country. Currently, the eHealth governance structure was able to formulate eHealth legislative measure being reviewed and deliberated by Philippine Congress.



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Repu Daman

School of Telemedicine & Biomedical Informatics (STBMI)

India

Biography:

Repu Daman Chand
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Repu Daman Chand, a self-motivated Telemedicine Network Manager and has work responsibility to design, operate and support PAN-India telemedicine network with various nodes involving India & Overseas. He was involved in various telemedicine research and development projects in India and overseas since 2004. He was also involved in International Projects like WHO-DPR Korea Telemedicine Project (2009) & IHDP-World bank Project (2011) for establishing nation-wide telemedicine network.

He currently works in National Medical College Network (NMCN) Project at National Resource Center (NRC), School of Telemedicine & Biomedical Informatics, SGPGIMS, Lucknow supported by Ministry of Health & Family Welfare (MOH&FW), Government of India. At present, he is involved in National and International Telemedicine Networks, Medical Content Development, Website Management, Technical support & Infrastructure Management.

Being a researcher, he has always an interest on emerging technologies in telemedicine & eHealth. He is a fellow executive member of Telemedicine Society of India (TSI).

Abstract:

Integrated Telemedicine Kiosks or Health ATM for Clinical Screening

Repu Daman^{1,3}, Dinanath Pandey¹, Vijay Yadav¹, Alisha Harry¹, Arvind Kumar¹, Ranjana Rajnish³, S. K. Mishra^{1,2}

*School of Telemedicine & Biomedical Informatics (STBMD)¹
Sanjay Gandhi Post Graduate Institute of Medical Sciences
(SGPGIMS)²
Lucknow, UP, India
Amity University Uttar Pradesh, Lucknow Campus, Lucknow³*

Introduction: Telemedicine HealthATM is a single integrated system comprises of equipment required for conducting telemedicine sessions and are connected to a database hosted at cloud data-center for storing data in an electronic form. Remote places in hilly regions, deserts and Naxalites regions lacks in medical facility and medical doctors. To bridge the gap of the need of specialist doctor, mobile telemedicine kiosk or HealthATM can be used for pre-screening of patients in its initial level. Automatic integrated HealthATM thus with less human intervention needs to be assessed as pilot study.

Methods: In October, 2017, Yolo Health ATM® an integrated telemedicine kiosk or ATM was installed at Bachrawan Community Health Center for tele-screening of patients. Portal (<https://www.yolohealth.in>) hosted in the cloud has Patient end and Doctor End. HealthATM is integrated with basic diagnostic equipment for measuring various parameters like Height, Weight, Blood-Glucose, Blood Pressure, Body Mass Index (BMI), ECG, Blood Lipid Profile, Pulse Oximetry, Temperature and Muscle mass etc. Registration of patient needs mobile number and the validation code / Biometric in the machine. The data is transmitted and analysed real-time by the remote doctor over inbuilt videoconferencing system. Patient get report in registered mailbox and also printed report immediately. Doctors can filter the data based on readings for research purposes.

Results: So far, 1118 patient users registered in the HealthATM. Reports generated immediately after capturing the patient's parameter are self-explanatory due to the use of Artificial Intelligence.

Conclusion: Health ATM is always helpful for screening of patients at remote place where there is always a scarcity of trained medical profession. Less trained staff can also operate this device, as it needs less human intervention. Artificial intelligence incorporated in the software has capability to give result based on captured reading.

Support/Grant:

Funded by Telemedicine Division, Ministry of Health & Family Welfare (MoH&FW), Govt. of India, New Delhi

Keywords: Electronic Health Record, Telemedicine KIOSK, Health & Wellness



Aria Kekalih
University of Indonesia
Indonesia

Biography:

Aria Kekalih, MD, MIT, PhD

He is an academic staff of Community Medicine Department Faculty of Medicine Universitas Indonesia since 2005, and currently is responsible as the Head of Epidemiology and Biostatistics Division. He was graduated from Medical Doctor Program, Faculty of Medicine, Universitas Indonesia in 2014; Master Degree in Information and Technology from Faculty of Computer Science Universitas Indonesia/UI in 2007

His passion in medical research database management and data analyst, encouraged him to learn and bridge two major discipline: medical research methodology and information technology. This background then led him to take the opportunity of doctoral program scholarship about big data and secondary data analysis in health and nutrition research under collaboration of SEAMEO RECFON, Harvard School of Public Health, USAID and Faculty of Medicine, Universitas Indonesia, and finished it in 2015.

Having more access to nutrition experts' network, he initiated and supervised some collaboration researches among community nutrition, public health and medical informatics, like development of food photograph applications, cohort online application for nutrition assessment, and supervising obesogenic environment mapping research using Geographical Information System.

As an academic staff, he is responsible for managing courses in Undergraduate, Master, Specialist and Doctoral Degree Program of Faculty of Medicine UI, particularly in the area of research methodology and biostatistics, as well as community, occupational and family medicine. In community development area, he is also managing community cadre development project in 9 cities in Indonesia with national bank to promote health and nutrition education specifically in topics: breast cancer, hypertension, healthy diet and active lifestyle for women at reproductive age and geriatric communities.



Minh Cao Duc
VinaREN-NASATI
Vietnam

Biography:

Cao Duc Minh is a computer engineer, currently working in Vietnam research and education network centre which was established in 2007. His main job is network management, manage and support member's

activities. With experience in the field of audio-visual, he is currently involved in organizing of telemedicine in Vietnam, under the role as a member of medical working group of APAN. He is also an IT engineer at Vietnam National Agency for Science and Technology Information, working as a computer systems manager, organizing activities in science and technology.

Vietnam National Agency for Science and Technology Information
The National Agency for Science and Technology Information (NASATI)



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Bani Lara
Advanced Science and Technology Institute
Philippines

Biography:

Bani Lara, a science research specialist at the Advanced Science and Technology Institute (ASTI), leads the network operations group of the Philippine Research, Education and Government Information Network. He has 15 years of experience in working on Internet routing, IPv6 and multicast technologies in research networking. He also takes care of the routing infrastructure of the Philippine Open Internet Exchange (PhOpenIX).

He earned his degree in Computer Science at the University of the Philippines, Los Banos.

Abstract:

PREGINET Updates

Bani Lara

Advanced Science and Technology Institute, the Philippines

The presentation will highlight the recent developments of the Philippine Research, Education, and Government Information Network in terms of its expanded uplinks and downlinks. The presentation will also highlight some of the uses of the network in the Philippine scientific community as well as the networks' role as an enabler of the research activities of its users.



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A K M Habibur Rahman
BdREN
Bangladesh

Biography:

Chief Executive Officer
Bangladesh Research and Education Network (BdREN)

Email: ceo@bdren.net.bd

Graduated from Bangladesh University of Engineering and Technology in Electrical and Electronic Engineering in 1988. Obtained Master of Business Administration degree from Institute of Business Administration, University of Dhaka in 1992. Entered Bangladesh Civil Service (Telecommunication) in 1991 and served for 21 years in Bangladesh Telegraph and Telephone Board/Bangladesh Telecommunications Company Limited with different capacities in Telecommunication Staff College, Digital Telephony Exchanges, Internet and Data Communication System, Planning & Development Wing and foreign-funded projects.

Received training on Telecommunication Engineering, Satellite Communication, Digital Transmission System, Digital Switching System, IP Network, ISP setup, Data Communication and Convergence in Communication in home and abroad. Participated in overseas seminars/Conferences/Exhibitions on Broadband, GSM, Video Conference Systems, Telecommunication and IT systems.

Working as Chief Executive Officer, Bangladesh Research and Education Network (BdREN) since 2013.

Abstract:

Addressing Resource Gap in Telemedical Education in Bangladesh

A K M Habibur Rahman

*Chief Executive Officer, BdREN
Bangladesh*

There are around 83 recognized medical colleges in Bangladesh, 29 of which are public and 54 private. Apart from these, there are medical colleges run by the Bangladesh Armed Forces. There is also a medical university established in 1998 and more medical universities are going to be established. The medical colleges situated in remote districts suffer from acute shortage of experience doctors and teachers. Hence, a considerable knowledge gap exists among the students of medical institutions of urban and metro areas. The solution of systematic distance learning can be a way out for tackling this situation to some extent. Bangladesh Research and Education Network (BdREN) has established a nationwide backbone network of its own under the joint funding of Bangladesh Government and World Bank. All public universities dispersed throughout the country have successfully been connected to the network. The private universities are being connected case-by-case depending on the technical feasibility. The ongoing phase involves the extension of connectivity to selected 12 medical colleges throughout the country. These institutions will have a Distance Learning Theatre (DLT) equipped with video conferencing equipment which can be shared by students and doctors on demand basis for telemedical education. The DLT under implementation may be seen in the picture given below. The system and facilities could address the acute shortage of experienced teachers in any one of the institutions.



Arianna Akmatova

**Central Asian Research and Education Network (CAREN)
Kyrgyzstan**

Biography:

Arianna Akmatova, has worked at EC funded project “Central Asian Research and Education Network” (CAREN) since March 2010. She graduated from Kyrgyz State National University with bachelors in law and holds Master’s degree in Business Administration from Academy of Management under the President of the Kyrgyz Republic. She currently works in the Regional CAREN Cooperation Center (CAREN CC) as an assistant of the regional coordinator. Arianna is involved in development of CAREN project applications such as telemedicine, e-learning and e-culture. She is also Program Committee member of 3rd CAREN Regional Networking Conference (CRNC2018).

Abstract:

Distance education for medical doctors using Kyrgyz Research and Education Network

Arianna Akmatova, Mamiraim Dzhumabaev, Kadyrkul Karabukaev, Bishkek, Kyrgyz Republic

Telemedicine development in Kyrgyzstan started after establishment of Kyrgyz Research and Education Network in 2002. KRENA connected medical institutions in Bishkek and created a working group of medical doctors in order to develop telemedicine within the country and establish international collaborations. One of the first events that KRENA successfully streamed to the regional hospitals was “Mirrahimov readings”, annual conference organized by the National Center of Cardiology and Internal Medicine.

Thanks to the cooperation between KRENA medical institutions and Telemedicine Development Center of Asia (TEMDEC), doctors and technical engineers had a possibility to participate in telemedicine sessions of such events like CAREN Regional Networking Conference (CRNC2017) in Kyrgyzstan, APAN44 meeting in China, One-month internship at Kyushu University Hospital in Japan, Remote participation in Endoscopy Teleconferences between Japan, Russia and Kyrgyzstan.

In 2015, during official visit of Mr. Narendra Modi, Prime Minister of India to Kyrgyzstan, National Cardiology Center organized remote consultation between Osh regional hospital and Apollo Telemedicine Center in New Delhi to consider the case of the patient with heart disease using KRENA and international connectivity of Central Asian Research and Education Network. Thus, international collaborations are very important to learn methods and new technologies in telemedicine from the colleagues.

Despite highlights of successful cases, there are still many challenges like poor- quality medical equipment, high statistics on gastric cancer

and lack of experience for its early detection, weak management and no fluency in English in medical community, low-speed commercial Internet connection in the regions.

Since Kyrgyzstan is the mountainous country, it is effective to educate young doctors in the regions via remote medical trainings. The use of H.323 and Vidyo systems allow medical doctors to transmit high quality images and sound with a minimal delay. Distance education of medical doctors and development of telemedicine in Kyrgyzstan will foster healthcare in the country.



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Sanggyun Kim

TEIN*CC

South Korea

Biography:

Mr. Sanggyun Kim is senior application project officer at TEIN*Cooperation Center. He is responsible for the application activities based on TEIN network in Asi@Connect project. He is trying to coordinate and promote technical & application collaborative research and activities with R&E community in Asia Pacific and beyond. He used to be the team leader of KOREN, one of NREN in Korea, in NIA (National Information society Agency).

Abstract:

TEIN, the playground for Telemedicine

Sanggyun Kim

TEIN network is getting bigger and faster due to the various requirement by lots of researchers. TEIN is 10Gbps based connections within Asia now, however, we recognized 100Gbps based network is getting popular and evolving fast. With this trend, telemedicine activity, the most active & expanded collaboration field in research and education community in Asia, will have more opportunity based on current collaboration. I'd like to introduce TEIN network growth, and viewpoints potential impact to telemedicine community.



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Sandie Thomson

South Africa WGO

South Africa



Ganiyat Oyeleke
Nigeria WGO
Nigeria

Biography:

Dr Ganiyat Kikelomo Oyeleke is a consultant physician, gastroenterologist and hepatologist at the Lagos University Teaching Hospital, Idi-Araba, Lagos, Nigeria..



Dr Oyeleke graduated from the Medical School of the University of Ilorin, Nigeria. She was awarded the Internal Medicine Fellowship of the National Postgraduate Medical College of Nigeria in 2009.

She was a consultant physician and gastroenterologist at the General Hospital, Broad Street Lagos for 5years. She later left in 2015 to join the Lagos University Teaching Hospital (LUTH) as a Hepatologist and Gastroenterologist.

She has attended various local and International trainings, courses and conferences. And she has published papers, given talks and presentations on the liver and gastrointestinal disorders at many local and International meetings.

She is an Examiner for the National Post Graduate Medical College of Nigeria. A member of Society for Gastroenterology and Hepatology in Nigeria (SOGHIN), European Association for the Study of the Liver (EASL), American College of Gastroenterology (ACG), American Society for Gastrointestinal Endoscopy (ASGE), and the American Academy of Hospice and Palliative Medicine (AAHPM).

She is a loving wife and mother, and the coordinator of the WGO-Lagos Training Center.



Eyitayo Adebayo
Rome Business School
Italy

Biography:

EYITAYO ADENIYI ADEBAYO

INTERN.



Eyitayo Adeniyi Adebayo is a Master Student, and Intern at Telemedicine Development Center of Asia (TEMDEC).

His quest for knowledge and strong advocacy for application of electronic health, and specifically, Evidence Based Telemedicine EBT, in healthcare delivery, imbued him with zeal to take a break from his teaching carrier to pursue a programme in Electronic Health. He is of the opinion that information and communication technology is the only

channel to revolutionize healthcare service delivery, and medical education in 21st, century (especially in underdeveloped countries).

His current project is the Management of Integrated Model of care with a Web-Based CDSS Telediagnostic Tool in orthopedic post – operative care.

Prior to this, he was a Teacher, Tutor and a Lecturer of Anatomy & Physiology, General Biology, and Cambridge Advanced Level Biology for 8 years. Eyitayo is a Physiologist of 16 years post-graduation experience.

His interests are; writing, watching soccer, sprints and volleyball. His is married with Kid.

Education.

1. BSc (Hons) Physiology, College of Medicine, University of Ibadan, Nigeria.
2. Master Electronic Health Management, Rome Business School Italy.

Contact: eyitbay@gmail.com

Abstract:

Challenge for the Establishment of International Telemedicine in Nigeria

Decongestion of Hospitals for territorial services, managements of chronic diseases, remote medical education for research and evaluation, prevention of diseases and injuries, reduction in healthcare cost, improved access to medical services, and saving of lives in critical and emergency situations are the major supply chains that telemedicine is modifying to improve quality healthcare delivery in Western Europe and Scandinavian, North America, United states of America, part of Asia and the Oceanic. However, these traditional clinical boundaries that telemedicine is gradually breaking down in aforementioned regions are firmly delineated by lack of knowledge and interests in telemedicine adoption across African countries, especially in my country Nigeria. Basically, telemedicine establishments in Nigeria lacks integrated approach, with mechanistic methods being employed.

Essentially, quality evidences are needed for telemedicine implementations. The advent of Evidence Based Telemedicine, (EBT) emphasized the role of remote medical education in providing integrated approach for implementation of telemedicine, and the reflection of evidences for its practicability.

I strongly believe that telemedicine introduction, and establishment should start with remote medical education, with stakeholders in teaching hospitals for purpose of exchange of clinical ideas, researches, sharing knowledge of advanced healthcare technologies, clinical collaborations, and facilitation of integrated clinical approaches to health problems. With this initial objective achieved, telemedicine practicality for management of patients, should follow. This will provide good platform (statistical and clinical evidences) for integrated telemedicine approach for establishment.

Based on this premise; I contacted a list of government and private teaching hospitals in Nigeria, to channel the ideal for establishment of international remote medical education; between TEMDEC, Kyushu University Hospital, Japan, and teaching hospitals in Nigeria. I am of the opinion that this will create a clinical Ecosystem for improving quality of healthcare delivery through telemedicine in my country.

This initiative is being hindered by setbacks, actualized by goodwill gestures, and promising by ongoing meaningful deliberations by some contacting institutions to address organizational and bureaucratic difficulties peculiar to adoption of every new innovation. Practically, the focus of this presentation is to give a concise account of the efforts to establish international remote medical education in Nigeria; and to elucidate the complex challenges in the journey so far.



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Evariste Tshibangu Kabamba

Oita University

Japan

Biography:

Name

Tshibangu Evariste Kabamba (TEK)

Country

TEK is a Medical Doctor (Registration CNOM N# 14933, 2010) from The Democratic Republic of Congo. After he had worked as a general practitioner at the General Reference Hospital of Mpokolo (DR Congo, 2011-2013), he started his clinical training at the Department of Internal Medicine, in Gastroenterology & GI Endoscopy, University Hospital of Mbuji-Mayi (DR Congo, since 2013). He got also research trainings related to ethical research, research methodology, good clinical practices and evidence-based medicine from the Institute of Tropical Medicine of Antwerp (Belgium) and the National Institute of Biomedical Research (DR Congo). Since 2016, he is a Doctoral research fellow at the Department of Environmental and Preventive Medicine, Oita University Faculty of Medicine (Yufu city, Japan). His on-going research project is related to genetic variations of *Helicobacter pylori* infection and epidemiology of gastro-duodenal disease in Africa.

Fields of Interest

TEK's main fields of interest are: Gastroenterology; Gastrointestinal Endoscopy; Infectious diseases; Epidemiology; and Biostatistics.

Scientific Societies

TEK is a member and fellow of the following scientific societies: Congolese Society for Gastroenterology; American Society for Microbiology; Japanese Society for *Helicobacter pylori*.

Contacts

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Abstract:

“Congo Room”: An experience report on the use of the TEMDEC platform for connecting Institutions of The Democratic Republic of Congo to outside Africa

Evariste Tshibangu Kabamba¹, Dan-Justin Yombo Kalenda², and Pascal Dibungi T. Kalenda³

¹ *Department of Environmental and Preventive Medicine, Faculty of Medicine, Oita University, Yufu city, Japan*

² *Madala Lab, Department of Pulmonary medicine, Cincinnati Children Hospital’s Medical Center, Cincinnati, OH, USA*

³ *School of Pharmaceutical Sciences, CESNOV and Department of Medicinal Chemistry and Pharmacognosy, University of Kinshasa (UNIKIN), DR Congo*

Since 2017, the platform of the Telemedicine Development Center of Asia (TEMDEC) has been connecting Congolese Medical Doctors belonging to clinical and research settings of several institutions located in Central Africa, specifically in The Democratic Republic of Congo (DRC), and outside Africa. Initially, this network named "Congo Room" intended to promote collaboration between Congolese alumni of Japanese universities with researchers and clinician working in DRC and Japan. Later, it has been extended to other countries such as Belgium. The activities within this network consisted mainly of videoconferencing and document sharing using two apps, Vidyo (Vidyo, Inc., US) and JoinView (The Foundry Visionmongers Ltd, UK). Globally, more than 50 webinars had been held, bringing together members residing in cities located in different continents. However, since the beginning of 2018, activities within the “Congo Room” have encountered difficulties and scarce activities had been conducted. We have organized a survey involving “Congo Room” members in order to make a situational analysis and identify the nature of encountered difficulties. In this presentation, we will make a report on “Congo Room” activities and self-evaluation, and discuss some development prospects of the network in the next years.

Key-words: Platform; Congo; TEMDEC



Omo Oaiya

WACREN

Nigeria

Biography:

Omo Oaiya is CTO of the West and Central African Research and Education Network (WACREN). With the other sister regional networks, he is currently assisting with the development of high-capacity Internet networks for research and education across Africa

Prior to this, he has been project manager, network manager and system developer in different IT sectors offering consultancy with a focus on developing academic networks in the last decade.

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Omo has a Pharmacy degree from the University of Benin, Nigeria and maintains his interest in health as volunteer team lead for the IT development group in the Peoples Open Access Initiative (Peoples-uni), a UK based initiative providing postgraduate public health education via Internet based e-learning.

Abstract:

WACREN - Connecting West and Central Africa to the Global Research and Education Network

Omo OAIYA, Lagos

Modern research collaborations depend on technologies and service that require good network connectivity but the costs in West and Central Africa have been amongst the highest in the region if not globally. As a result, National Research and Education Networks (NRENs) have emerged across the region to address this and sensitise heads of member institutions and policymakers unfamiliar with the purpose and potential of R&E networks. These NRENs lead the effort to provide fiber connectivity to higher education institutions in their different countries.

The West and Central African Research and Education Network (WACREN) was established to provide a platform for collaboration amongst these NRENs, regional interconnectivity in West and Central Africa and a gateway to global research and education. There are currently 13 NREN members with on-going initiatives in 3 additional countries.

Participation in the European Commission supported 'AfricaConnect2' project has enabled WACREN to roll out the first phase of a 10G regional backbone linking Ghana and Nigeria to GÉANT at the Open Exchange in London. Since these circuits were commissioned, procurement for access links to NRENs of Burkina Faso, Togo and Mali, and an extension of the backbone to Côte d'Ivoire was commenced and scheduled for completion by the end of the year.

The need to communicate, share data and provide access to computational tools for analysis also depends on identity tools that allow researchers to collaborate. WACREN is therefore working with other African RENs to build a trust and identity framework to give African researchers the ability to access remote tools, communicate and collaborate via videoconferencing and share data securely and confidently with foreign collaborators.

This presentation provides an update on these activities in West and Central Africa and a solicitation for collaboration to leverage the available infrastructure for advancing telemedicine in the region.



Pascal Hoba
Ubuntunet Alliance
Malawi

Biography:

Pascal HobaAndoh, PhD - CEO, Ubuntunet Alliance

About Pascal Hoba

Pascal Hoba was appointed Chief Executive Officer (CEO) of the UbuntuNet Alliance with effect from January 1, 2015.

Dr. Hoba is coming from the Association of African Universities (AAU) Based in Accra, Ghana where he has been Director of Knowledge Management and ICT Services since 2005. In his role at the AAU, Dr Hoba was also Coordinator of the Europe-Africa quality Connect project and the Database of African Theses and Dissertations (DATAD) programme. He is credited for initiating the Open Access process with the DATAD programme as a regional repository. He served on the advisory Board of the Pan-African E-Network project at the African Union commission and authors of several scientific articles and book chapters.

Pascal Hoba holds two masters degrees in Business Law and Information communication and PhD scientific and technical information from the University of Marseille, France.

About UbuntuNet Alliance:

UbuntuNet Alliance is a regional association of National Research and Education Networks (NRENs) in Africa. It was established in the latter half of 2005 by five established and emerging NRENs in Eastern and Southern Africa with, these are: MAREN (Malawi), MoRENet, (Mozambique), KENET (Kenya), RwEdNet (Rwanda) and TENET (South Africa). The driving vision was that of securing high speed and affordable Internet connectivity for the African research and education community in Gb/s rather than in Kb/s.

To date, the Alliance's foot print has stretched across the largest land mass of Eastern and Southern Africa with participating NRENs in 16 countries.

More information:

<http://www.ubuntunet.net/>

Abstract:

Ubuntunet Alliance The pan African Regional REN that Provides Platform and tools for African Researchers.

Dr Pascal Hoba; CEO Ubuntunet Alliance, Lilongwe, Malawi

The objective of this paper is to present Ubuntunet Alliance services and activities. The Alliance is the first and unique Regional Ren that provides platform and tools for research collaborations in Africa.

Ubuntunet Alliance is the Research and Education Networking organization for Eastern and Southern.

UbuntuNet Alliance is currently implementing the Africa. It builds and operates UbuntuNet, the Nairobi Strategic Plan 2014-2018, which



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spells out regional high-speed backbone network a roadmap for research and education networking interconnecting National Research and Education in Eastern and Southern Africa with a societal Networks (NRENs) and connecting them to vision of realizing vibrant African research and other regional RENs in the world and the Internet education institutions, networking effectively in general. The Alliance is a member-based the global knowledge society. So far the Alliance has 16 active members NRENs from the following countries: Burundi, Ethiopia, Kenya, Madagascar, Rwanda, Somalia, Malawi, Zimbabwe, Tanzania, Zambia, DRC, Sudan, Uganda, Mozambique, South Africa, and Namibia.

To achieve this, the organization registered as a Trust in Malawi. It was Alliance's mission is to secure affordable

a) To develop and provide high speed and Affordable interconnectivity among the NRENs and with the

rest of the world

b) To develop and share the knowledge and skills of ICT practitioners in the NRENs

c) To provide related auxiliary services to the NRENs

d) To lead and participate in research aimed at improving networking infrastructure,

UbuntuNet Alliance begun the work of putting in place the regional infrastructure – apart from connectivity – to enable the participation of the region's research and education community in the global arena. This includes eduroam and trust & identity platform, eduID.

Rolling out a trust and identity platform, eduID, there are a lot of resources online for use by research and education, Cloud While it is understood and many others applications.

Adedapo Osinowo
Nigerian GI Association
Nigeria

Olusegun Alatise
Nigerian GI Association
Nigeria

Dibungi Kalenda
University of Kinshasa
Democratic Republic of the Congo

Dan Yombo
Cincinnati Children's Hospital Medical Center
United States of America

Olalekan Olasehinde
Obafemi Awolowo University Teaching Hospital Ile-Ife Nigeria
Nigeria

Ajyayi Joseph
Obafemi Awolowo University Teaching Hospital Ile-Ife Nigeria
Nigeria



Ryoko Yoshida
Kyushu University Hospital
Japan

Biography:

Ryoko Yoshida is the secretariat of APAN Medical Working Group. The working group promotes the use of APAN network in medical field to provide better e-education and e-healthcare. (<https://www.apan.net/wg/medical>) She also is one of international coordinators of Telemedicine Development Center of Asia (TEMDEC) and Overseas Exchange Center (OVEX), International Medical Department, Kyushu University Hospital, Japan.