terveydenhuollon että tietojenkäsittelyn asiantuntemusta. Standardien kanssa työskentelyn mieltäminen vaikeana johtuu Stegween mukaan siitä, että terveydenhuolto on monimutkainen sovellusalue ja eri maissa on runsaasti erityyppisiä tarpeita. Standarien kanssa työskentely tulisi kuitenkin saada osaksi päivittäistä projektityötä: "On tärkeää suunnitella eri kehittämisprojekteissa, mitä standardeja voidaan hyödyntää tai kuinka voidaan osallistua kehitykseen yhdessä muiden kanssa", Stegwee korostaa. "Vain tällä tavoin voimme hyödyntää muualla tehtyä työtä ja varmistaa, että standardit palvelevat niitä vaatimuksia kuin pitääkin".

Kokouksen yhteydessä järjestettiin myös erillinen Health Innovation Evening tapahtuma Kuopion Tiedepuistossa. Tapahtumassa kokouksen osallistujat pääsivät tutustumaan suomalaiseen terveydenhuollon teknologian osaamiseen. Tapahtumassa kuultiin muun muassa Michio Kimuraa (Japan Association for Medical Informatics, JAMI), joka on viimeaikaisten Japanin tapahtumien myötä paneutunut terveydenhuollon tiedonhallinnan problematiikkaan katastrofialueilla.

News

Interviewing Frank Lievens: Telemedicine does not know frontiers!

Frank Lievens, ISfTeH, is Master in Economic and Diplomatic Sciences, Board member, Secretary and Treasurer of the ISTeH, Managing Director of Lievens-Lanckman BVBA and Akromed France, International Coordinate of MED-e-TEL. He participated in the 16th Finnish National Conference on Telemedicine and eHealth, and conceded the following interview to FinJeHeW:

Q: First, how do you define cross-border telemedicine? Does it mean all electronic information exchange of patient date beyond frontiers?

A: Telemedicine is not only restricted to electronic information or patient data, even if those are indeed current and important components. One has to see it even much broader, such as exchange of second opinion between doctors, possible patient monitoring beyond the frontiers of its own region or country. Telemedicine does not know frontiers!

Q: Which are the strong areas of cross- border telemedicine in the point of view of a citizen, and in the point of view of national health care organizations?

A: In my opinion, right now the most practical applications related to cross-border Telemedicine are:
- Access to proper health services by patients/citizens is not restricted to their own territory
- National health care systems can and should connect beyond their own borders in situations such as "epidemics"

Q: Which are the main obstacles to disseminate cross-border telemedicine services?

A: Bureaucracy and politics. Maybe also language, but to a minor extend.

Q: As the risks of cross-border medicine there have been mentioned the danger of a "health bazaar?" (The target only to make money at the expense of patients' health)

A: This is indeed a specific risk linked to "Medical Tourism", more than Telemedicine itself.

I believe that there will still be a longer way to go and we will probably have to face some abusive situations (such as making money as a principal motivator rather than helping the patient first) in order to "canalize" it into proper and regulated channels. That will be the main responsibility of Health Authorities (National and International) and also Medical Tourism Associations.

Q: When cross-border telemedicine are planned, developed, and implemented, which kinds of applications are presently in the focuses?

A: This will vary of course from country to country, from region to region, as priorities may be different. But I believe that generally Physician's and other Health Care Professional's Accreditation, Access to and Transfer of Patient Health Records, Health Insurance Compatibility will be on top of the list.

Q: Along with ISfTeH, which are the main actors and organization in the area of telemedicine?

A: Although the ISfTeH is the International Federation of National Telemedicine Associations or Societies, there are many other organizations that have a role to play in this matter.

The National Telemedicine Associations are of course the flag carriers in each country, but also the Medical Informatics Associations, the Medical Associations themselves, the Hospital Federations, the Associations within specialized medical fields (e.g. Dermatology, Cardiology, Diabetes, Pathology, Ophtalmology, Radiology, etc…), Assistive Technology Associations, m-Health Alliances. And evidently the International Organizations such as WHO, ITU, UNOOSA, the E.U., etc… As Telemedicine is primarily a tool that can contribute to deliver better healthcare at anytime, anywhere, all actors and/or organizations involved with "Health" will sooner or later be confronted with Telemedicine.

Q: What is the role of WHO in terms of cross-border telemedicine?

A: WHO being the International body governing health issues all over the world (193 member states), it is only normal that it got involved with the issues around Telemedicine/eHealth.

A few benchmarks:
- WHO Resolution on eHealth, which was passed during the 58th World Health Assembly in Geneva, on May 23, 2005 (http://apps.who.int/gb/ebwha/pdf_files/WHA58/WHA58_28-en.pdf)
- eHealth Standardization and Coordination Group
- Global Observatory for eHealth
- etc…

But it is also important to stress the role of the I.T.U. (International Telecommunication Union), who played a pioneer role in establishing Telemedicine. The "Tele" part of Telemedicine, in all its possible forms, is indispensable in making it all work. The main challenge of Telemedicine is the coordination between all the involved parties!

Q: Could we have in the future a global electronic health record, with structured content and standardized functions, and which would be available in an automatic translation all over in the world? If yes, could you guess the year?

A: That is definitely a goal, but there will still be lots of discussions about what should be included in such E.H.R., taking into account a.o. the "privacy" issues. Technically, all is possible, including automatic translation. The issue will be a worldwide "political" agreement, and that will take time.

One can try to set a target, although I do not believe in it and therefore would not want to guess in which year all this could be achieved. Yet one thing is for sure: there is no way back. So, we can only watch and hope for the future!

Q: How do you see the role of ISfTeH? Is is more for information exchange or for practical collaboration between different eHealth organizations?

A: At this point, the ISfTeH is primarily a "Networking" Society, which does indeed include a.o. information exchange and practical collaboration between different eHealth (and also general Health) organizations.

For the ISfTeH in order to achieve its mission "Facilitating the International Dissemination of Knowledge and Experience in Telemedicine and eHealth and to Provide Access to Recognized Experts in the Field Worldwide", it is important to identify and bring together the players and create the umbrella under which they can professionally and actively exchange and share their experiences, learn from each other's successes and failures and as such be able to contribute to the adequate development of Telemedicine.