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Activity Report of Asia-Pacific Medical Network Project in Kyushu University Hospital: Vol.8

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11. Closing

Fusion of two networks

The telemedicine development center of Asia (TEMDEC) accepted several new members and carried out a number of new connections in 2011.

Mr. Cao Duc Minh from VinaREN, Vietnam visited for training in engineering work on international telemedicine in January 2011. Ms. Kuriko Kudo was employed as a full-time engineer in the place of Ms. Naomi Higuchi in August 2011. Mr. Min Fu joined TEMDEC in October 2011 to study telemedicine and to start a postgraduate degree at Kyushu University straight after completing an engineering degree at Dongbei University, Wuhan, China. All of these individuals have excellent abilities, and we are expecting great things from them. Additionally, Mr. Yasuki Tateishi took charge of the support team for TEMDEC at the Kyusyu Electric Power Co., Inc., replacing Mr. Shinya Kuwahara. We are indebted to the Kyusyu Electric Power Company for their continuous support.

We also made many new connections with countries, institutes, and teams at the 32nd (New Delhi) and 33rd (Chiang Mai) APAN meetings and other events. Of particular importance is the relationship established with the International Medical Network of the National University Hospitals in Japan (IMNet Japan) in April 2011.

In December 2011, IMNet Japan formally established a project promoting medical internationalization of Japan by all 42 Japanese national university hospitals. TEMDEC supported their preparatory committee through a teleconference with 13 stations. IMNet Japan is not an IT network, but a social network set up to improve the quality of medical services for Japanese patients abroad, foreign patients abroad, and foreign patients in Japan. IMNet Japan has a manned office at Kyushu University as does TEMDEC, and Prof. Shimizu and I are founder members of IMNet Japan.

Thus far, TEMDEC has promoted international education for medical staff including students through videos of live surgeries, healthcare teleconferences, and so on, as a means of communication between medical staff. Now, we are also able to promote remote communication between medical staff and patients.

TEMDEC will promote international and domestic telemedical consultations, tele-meetings by national university hospitals and foreign patients before their visit to Japan, tele-meetings with patients' families and family doctors during their stay in Japan, follow up tele-meetings after treatment in Japan, and tele-translation of foreign languages. Fortunately, since both the offices of TEMDEC and IMNet Japan are based at Kyushu University, we can expect efficient and high level fusion of the two networks.

Ideally, medical services should not be bound by the concept of "national borders". However, it is difficult to have seamless medical relationships internationally owing to differences in national regulations and languages. Nevertheless, while delivering better medical services to patients, TEMDEC can simultaneously play a social role via fusion of the two networks.

Naoki Nakashima March, 2012