

## Activity Report of Asia-Pacific Medical Network Project in Kyushu University Hospital : Vol.3

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## 11. Closing

### *Epilogue <What is our role?>*

“Telemedicine” had meant the system which provides complementary IT system for the area which has shortage of medical manpower like out-countries and isolated islands in Japan a decade ago. We had to narrow down the information volume and class, because of limited band-width of the available line. Recent telemedicine has also included IT services in healthcare network like medical home care and nursing-care facility. This seems quite different service compared to the former concept, however, both of these are identical in “services to provide a standardized medical care anywhere”.

The trial of AQUA is communicating medical information with high quality moving images on ultra-broad-band lines in Asia-Pacific area. We can say this is also a trial of “provision of a standardized medical care anywhere”. In this view, the AQUA’s activity is a typical telemedicine.

We have continued the activity of AQUA for 4 years. During the initial phase, we had aimed to spread Japanese advanced medical services across the Asia-Pacific area as “the standard medical service”. However, we realized that it is “a big fish in a small barrel”. Medical service should be matched for each land, climate, custom, religion, and racial constitution. We learned Asia-Pacific area already grew the beautiful medical service in each area by continuous efforts. In other words, “standardized medical service” would rather “medical tenderness” based on human fellowship than “advanced medical service”. Now, we feel Japan or some other countries, which have advanced medical services, easily get lost the way of standard medical services in that sense.

We believe that the role of AQUA activity should be to “let a big fish in a small barrel know about sea”.

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