Telemedicine in Asia-Pacific - Possible expansion to Latin America-

Chairman of Medical WG, APAN, Director of Telemedicine Development Center of Asia Kyushu University Hospital, Fukuoka, Japan

Shuji Shimizu, MD, PhD



http://www.apan.net/wg/medical.html http://www.temdec.med.kyushu-u.ac.jp shimizu@med.kyushu-u.ac.jp 2012.7.3@TICAL2012, Lima, Peru

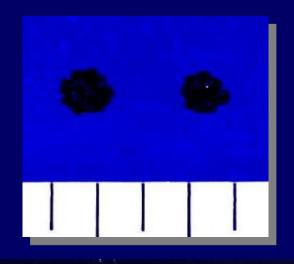
Today's menu

- Medical situation
- Activities
 - > One-to-one
 - > Multi-station
- Directions to go



Gallstones

Black stones





Cholesterol stones





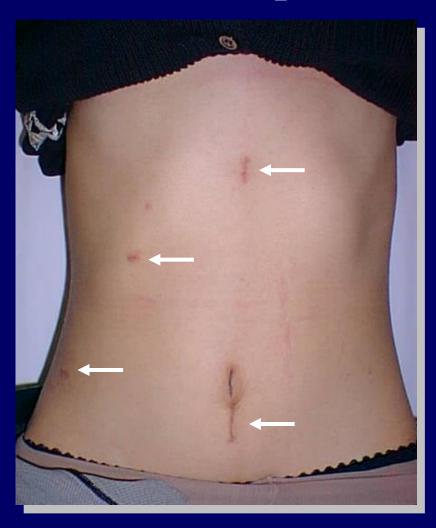
Mixed stones

Surgical development: One example

Open

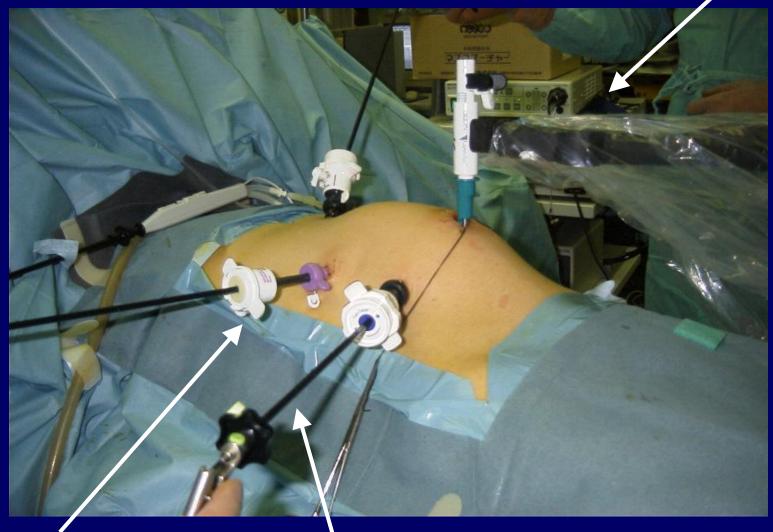
Endoscopic





Surgical view of new surgery



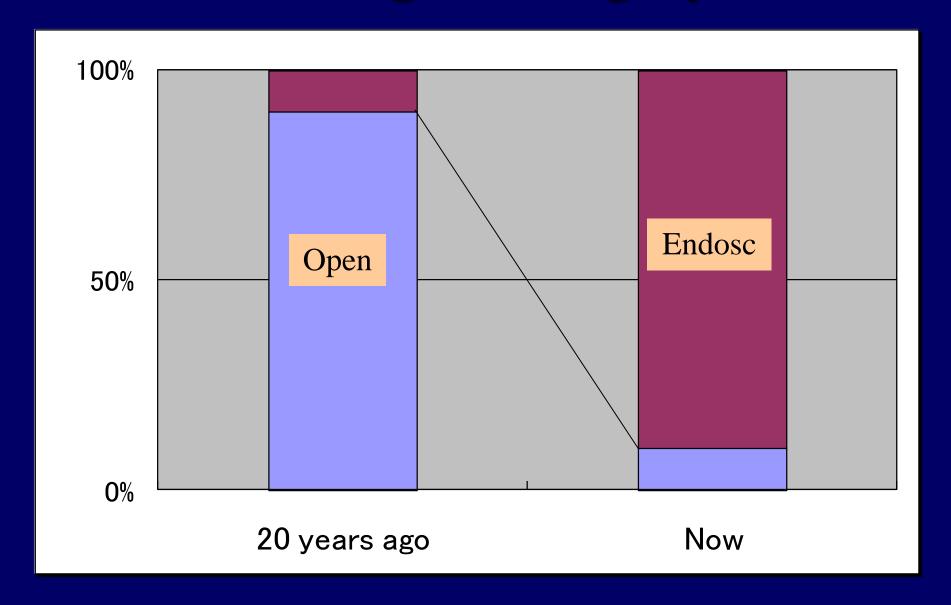


Trocar

Instrument

Surgery I, Kyushu Univ

Dramatic change in surgery



How to learn new surgery

◆To watch a real surgery is most important.

- Few hospitals have experts in all fields
- > Limited chance to visit other hospitals
- > Waste of time, waste of money
- > Not continuous, not many people



Do you think you can learn it enough?



Remote Education: Convenient and Useful!

Practically

But, NOT popular in our clinical situation



Why not?

Conventional telemedicine...

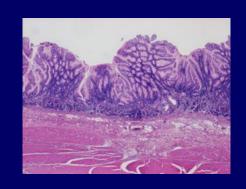
ISDN /Narrow band

~1Mbps

- Still pictures
 - Radiology (CT, MR), Pathology
- <u>Discussion</u>
 - Slide presentation



Surgery: compressed





- 1. Video transmission was impossible in good quality.
- 2. Cost for special equipments (even for bad image).

Situations dramatically changed in 2002



We use BIG Internet!



KOREA

Busan

KJCN

Fukuoka

QGPOP

JAPAN

Kyushu Univ



Bandwidth 2G ⇒Big Broadband Network

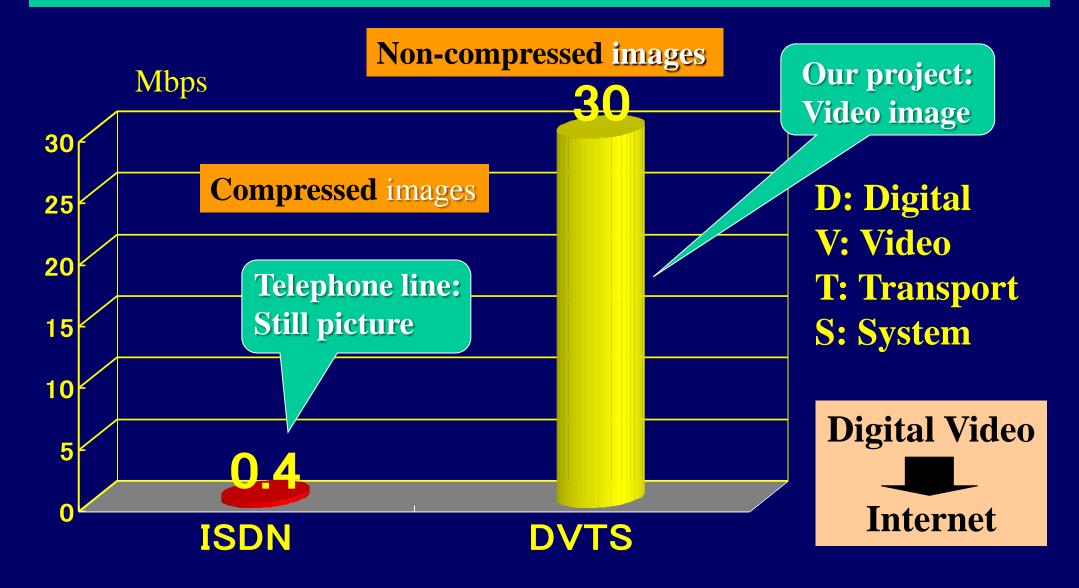
Seoul

Key technologies

- <u>DVTS</u> (Digital video transport system)
- <u>Academic network</u>

 (Research and education network)

Point 1: Clear & Smooth Transmission



Point 2: Cheap and simple equipment



DVTS PC



Internet



- DVTS: free but powerful software
- No special teleconferencing equipment

BIG & STABLE network is essential!

INFORMATION TECHNOLOGY

Not the Internet You Know

An ambitious experiment could point the way to tomorrow's academic network

BY VINCENT KHERNAN

Point 3: Academic Network for Research and Education

Latin America: RedClara

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The first live demonstration of surgery

OR Surgical movie

Aug 1, 2003



- Lap. distal gastrectomy
- Security software used





Kyushu Univ., Japan

NCC, Korea

TV news reports



Aug 22, 2003



RKB



KBC



NHK



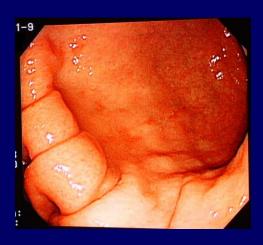
KBC

TNC in the evening news

Casual setting to neighbors

New endoscopic procedures

2006.8.21





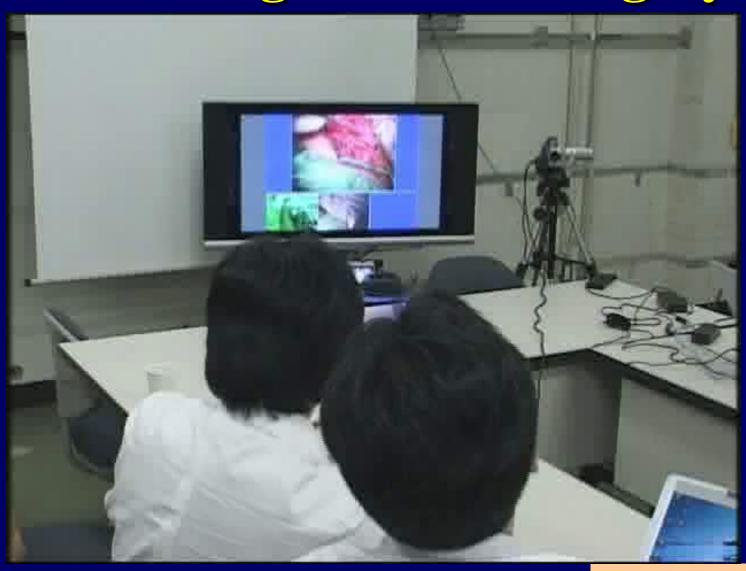


Live surgery in a big congress

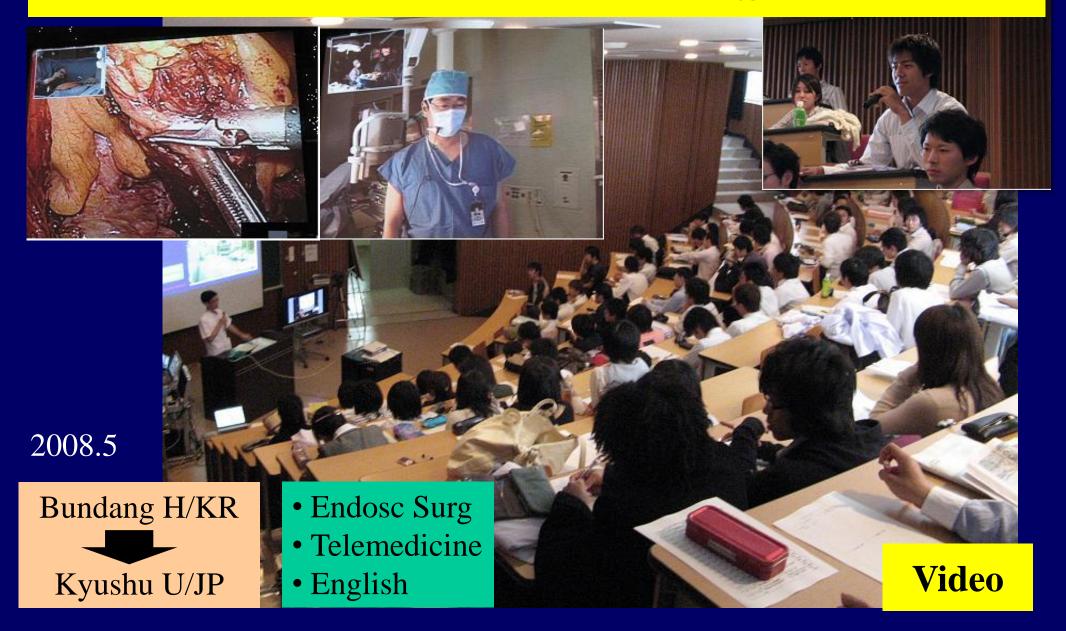


Telementoring for neurosurgery

2003.11.25



Live lecture for Medical Students



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Asia-Pacific Advanced Network (APAN)





The first multi-station teleconference by DVTS

Pancreatic Transplantation Meeting New technical breakthrough



2005.3.18

第32回膵・膵島移植研究会 第2回九州・沖縄地区膵腎移植研究会

Teleconference

- アジアにおける膵・膵島移植の現状と問題点-

Live broadcast connecting

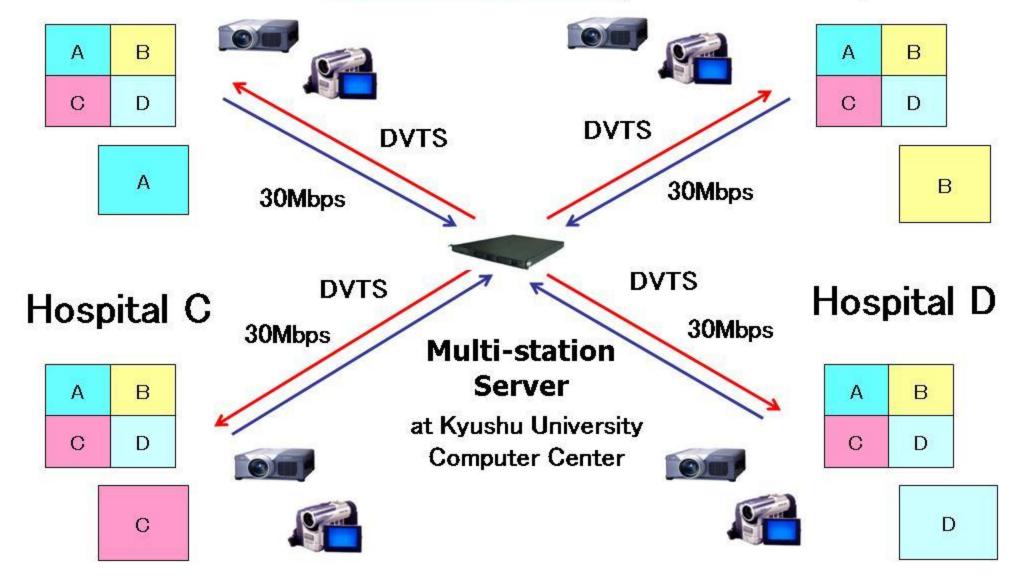
Beijing Fukuoka

Tainei Seoul

Hospital A



Hospital B



Quatre: MCU for DVTS



- Only equipment for multi-point connection of DVTS
- Very powerful, stable and useful



- Support only NTSC, but not PAL
- Available only in Japan (&Korea)
- Connection < 8 stations



DVTS-Plus: New version from China

Live Demonstration @ APAN-Tokyo



First multistation live demonstration with security

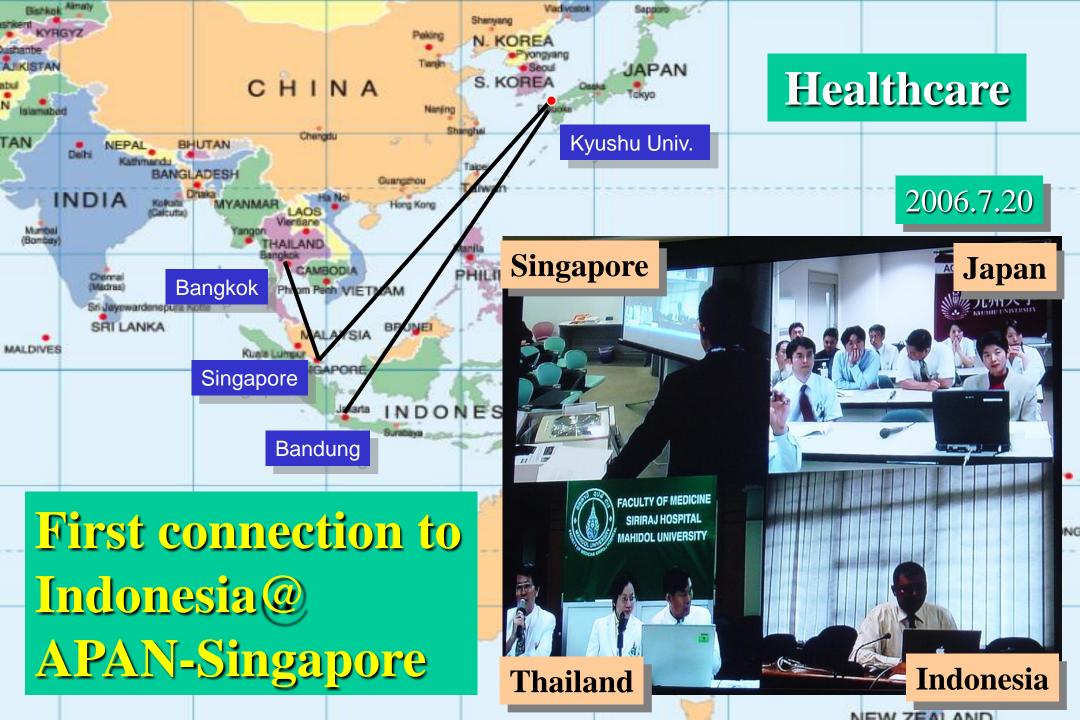
2006.1

- Kyushu
- Tokyo
- Seoul
- Taipei

Current security system

- Essential to protect patient privacy
- Used for live demonstration
- IPsec
- Used to be C4-VPN
- About US\$ 1000-2000





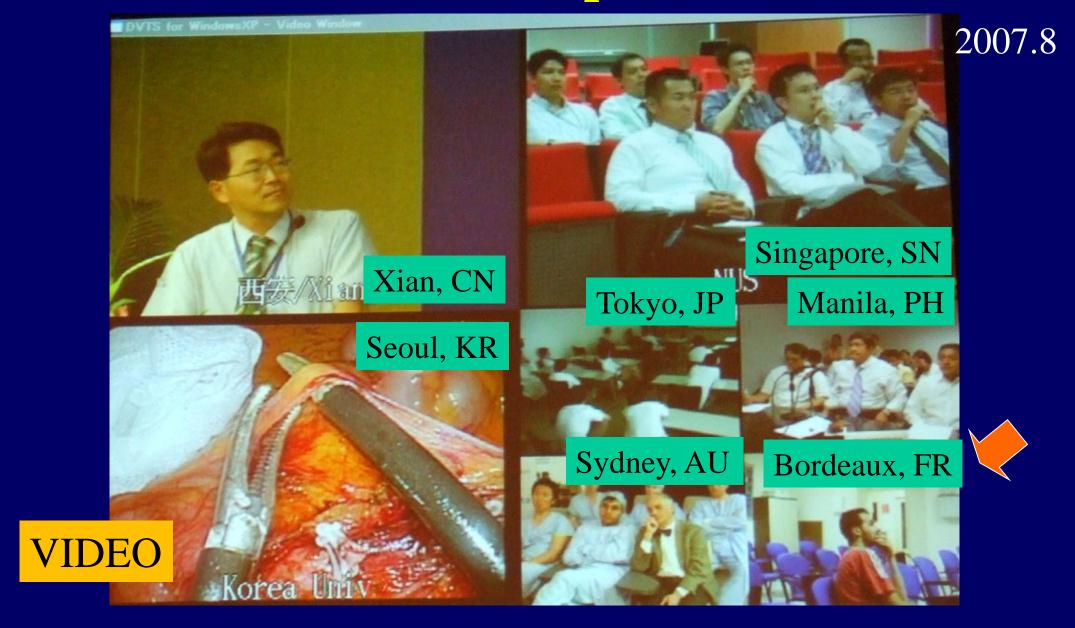
Bird flu teleconference @ APAN-Manila



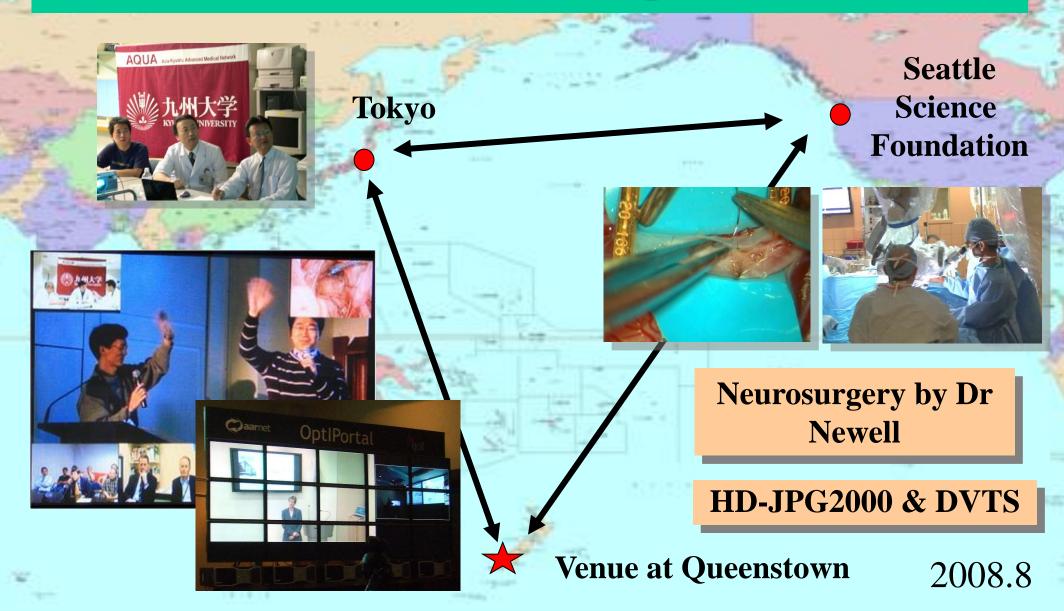
- Manila venue
- Peking U
- AustraliaNational U
- Stanford U
- Nagasaki U
- Chulalongkorn U
- National Hosp. of Pediatrics / Hanoi
- Indonesia U

2006.1.24

First connection to Europe @ APAN-Xian

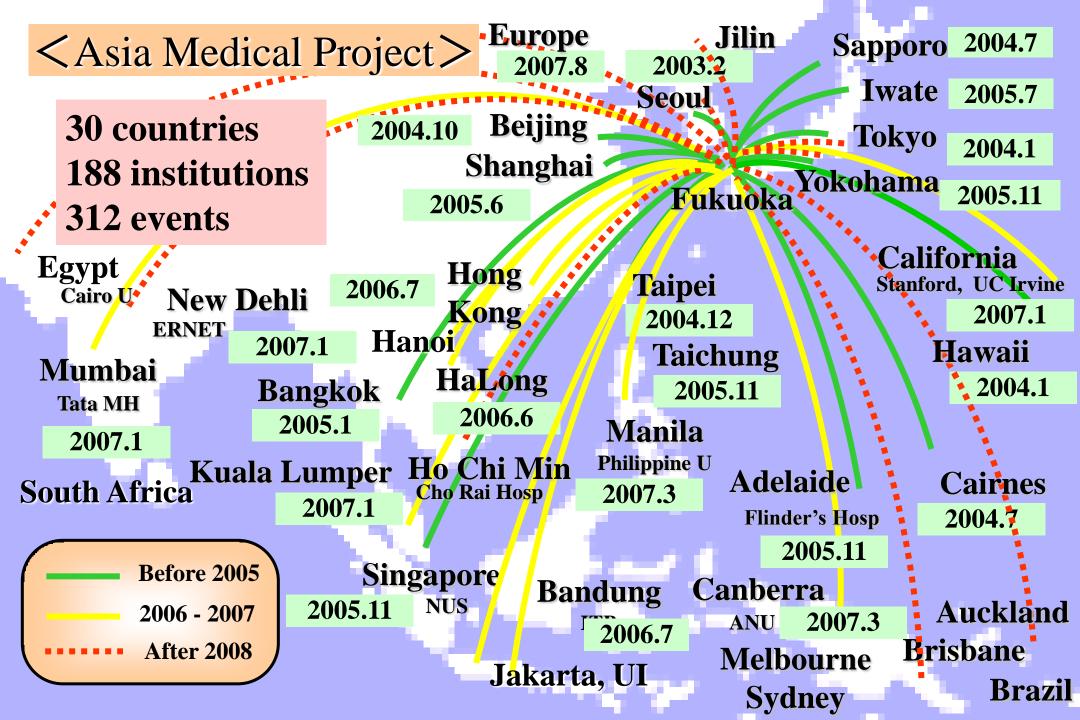


HD-Med Joint Demo @ APAN-NZ



First to Cape Town in South Africa





Whole variety of new medical contents

- Surgery
- Endoscopy
- Medical informatics
- Basic Science
- Interventional radiology
- Nursing, Healthcare
- Bird flu, SARS, HIV
- Medical students, etc.

More tomorrow...



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World Gastroenterology Organization:

- Endoscopic training centers -



Training Centers







Training Center	Training Center Director	Country	Launch Date as WGO Center
Soweto Training Center	Professor Reid Ally	South Africa	June 23, 2000
Rabat Training Center	Professor Naima Amrani	Morocco	January 2003
Karachi Training Center	Professor Wasim Jafri	Pakistan	May 2003
Cairo Training Center	Professor Ibrahim Mostafa	Egypt	March 01, 2004
Santiago Training Center	Dr. Claudio Navarrete Dr. Roque Saenz	Chile	July 23, 2004
La Paz Training Center	Dr. Guido Villa-Gomez	Bolivia	March 14, 2005
Bangkok Training Center	Dr. Sathaporn Manatsathit	Thailand	March 20, 2006
Rome Training Center	Professor Guido Costamagna	Italy	May 11, 2006
La Plata Training Center	Dr. Nestor Chopita Dr. Nestor Landoni Dr. Juan Carlos Gomez	Argentina	March 21, 2007
Mexico City Training Center	Dr. Miguel Valdovinos	Mexico	July 28, 2008
Bogotá Training Center	Dr. Luis Carlos Sabbagh	Colombia	August 6, 2008
Ribeirão Preto Training Center	Dr. Roberto Oliveira Dantas	Brazil	August 8, 2008
Suva Training Center	Dr. Joji Malani, Dr. Thein Htut Dr. Finlay Macrae, Dr. Chris Hair	Fiji	October 26, 2008
San José Training Center	Dr. Herbert Burgos	Costa Rica	March 5, 2010





Preliminary connections



Not so good...

2009.10.7

U San Polo, BZ

2009.7.1





Visiting Latin America

USP/BR Alemana Hosp/CL 2012.1.18-24 Univ. of La Plata/AR

Necessary information

- 1. How big network is there in each country?
- 2. Who are the contact points?---I would like to meet them all.
- 3. How big are networks for these hospitals?
- 4. Who is the network manager in each university/hospital?
- 5. Do they have adequate instrument?
- 6. Do they have other solutions like H.323 (HD) unless there is enough network?
- 7. Is there any way to establish a new network for other hospitals?

Check 1. Network to the very end



- 1) International network
- 2) Domestic (NREN)
- 3) Campus



Network Point Network Point



- APAN
- RedClara

INNOVA/AR RNP/BR REUNA/CL

Firewall



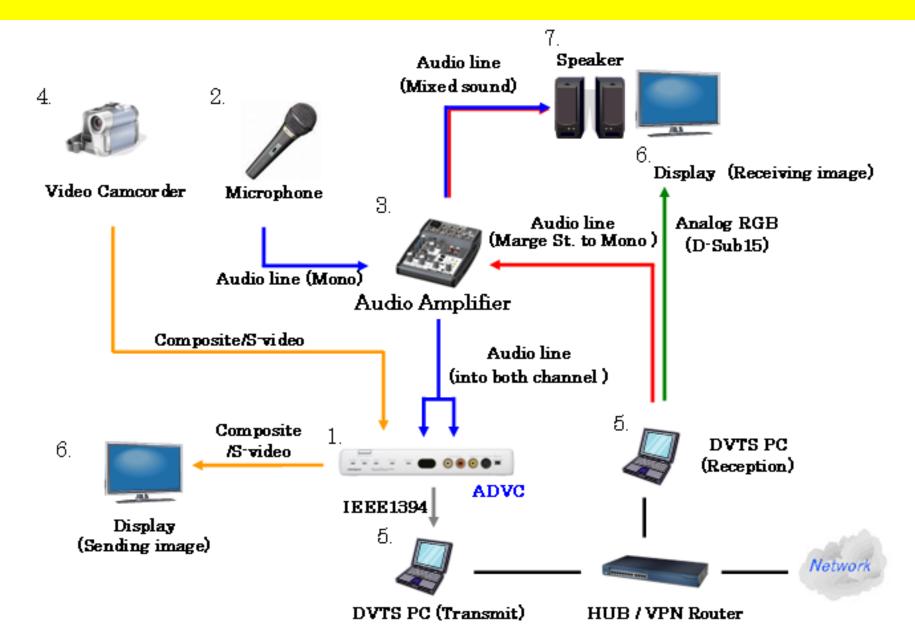
Big academic network

Connected to hospital?

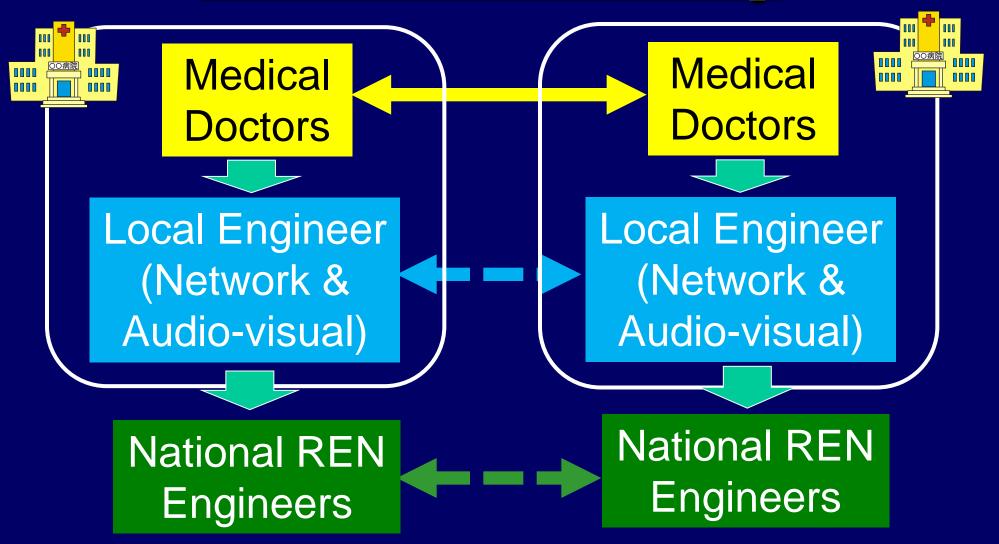
Support of engineers

Big enough and stable network at all steps

Check 2. Instruments

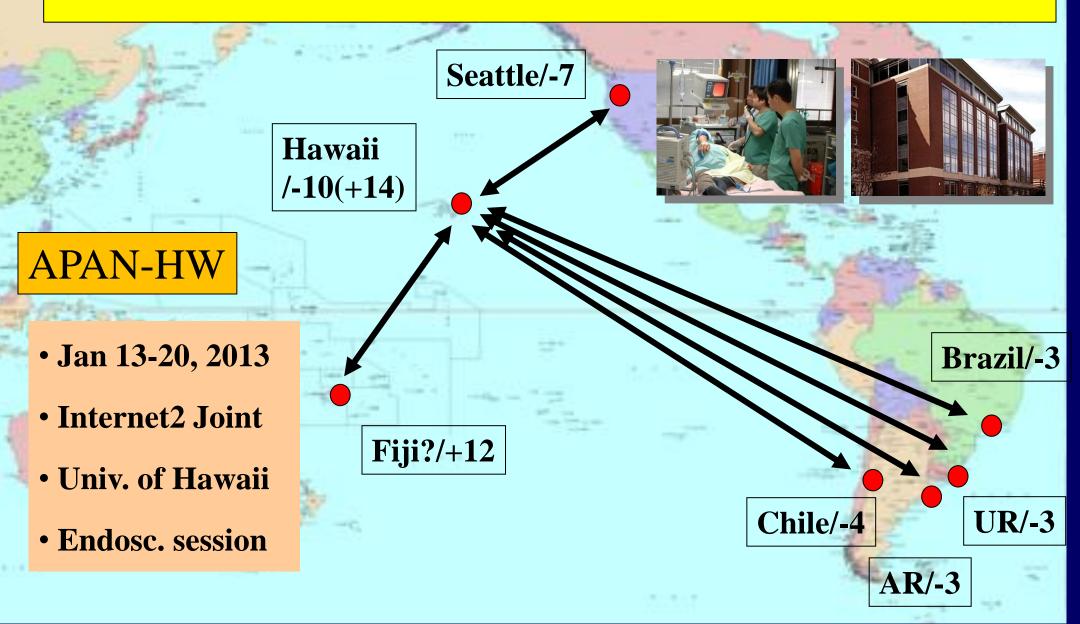


Check 3: Team buildup



The success depends on how good team you can make.

First Goal for Our Collaborations



List of the hospitals to be connected

Argentina Medical School of La Plata

• Brazil University of São Paulo Medical School

• Brazil USP Ribeirão Preto

• Brazil U State of Rio de Janeiro

• Brazil U of Rio de Janeiro

• Chile Universidad de Chile (Clínica Alemana?)

• Uruguay Universidad de la República

Instituto Nacional de Ciencias Med. y Nutr.

Hospital de Clnicas

Clinica Universitaria Colombia

U Autonoma de Centroamerica



• Mexico

• Bolivia

• Columbia

Costa Rica







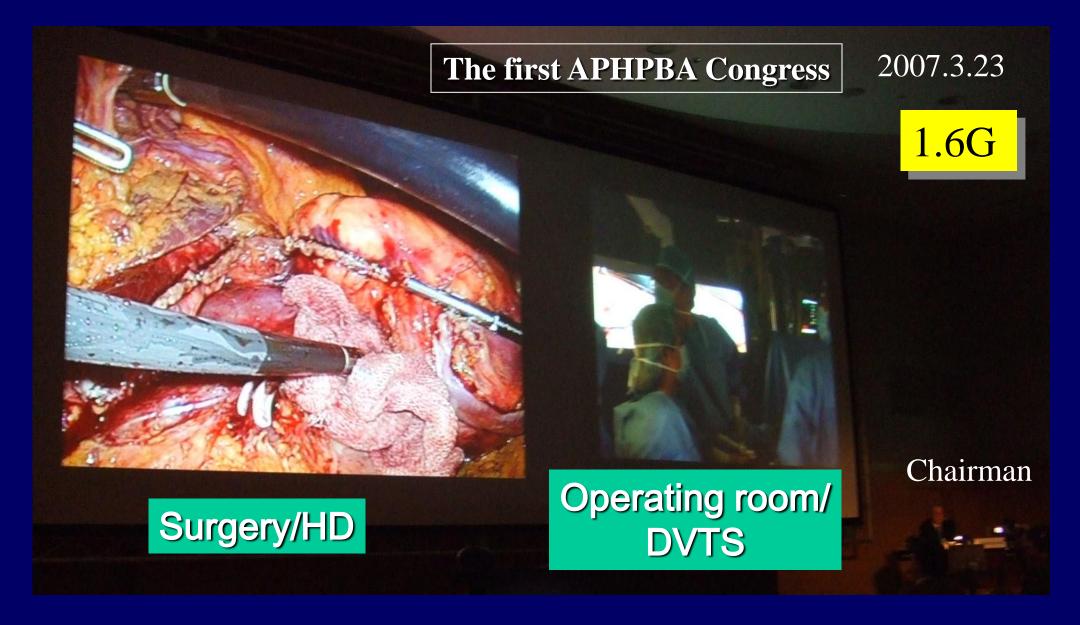








Future Challenge-1: Un-compressed HD



Future Challenge-2: 3D transmission

Robotic Surgery



2005 Korea Med 2012 Robot surg





Conclusions



- 1. Image quality, especially for moving images, and its quality control is a key in telemedicine.
- 2. R&E network has made the clear and smooth medical streaming possible with low cost.
- 3. We hope that we can have collaborations for better medical education in Latin America.

Le us work together!