

Thursday, October 16

9:30 - 10:30 am : ISfTeH Board

11:00 am - 12:30 pm : CATEL "Accompagnement's" GA and CATEL "Réseau" GA

2:00 - 3:00 pm : OPENING CEREMONY

- **Welcome and presentation of CATEL**
- **Welcome and presentation of ISfTeH**



Didier ROBIN,
President of CATEL



Pierre TRAINEAU
Director General of CATEL



Yunkap Kwankam
Executive Director ISfTeH
(International Society for Telemedicine and eHealth)



André Petitet,
Director and Chairman of the International Commission of CATEL
Board member of the ISfTeH

The new eHealth connected new tools and services ?

Chair

Gérard COMYN, Vice-President of CATEL and former head of the unit "ICT for Health" to the European Commission



De nombreux objets communicants envahissent le secteur médical, certains d'utilisation déjà bien maîtrisée (tensiomètres, oxymètres), d'autres venant d'horizons non nécessairement médicaux (bien-être grand public). Cette situation ouvre de nouvelles perspectives, mais pose aussi de nombreux problèmes. Une vision prospective est nécessaire afin de créer les bonnes conditions pour le développement de ces solutions : elle vous sera proposée par Joan Cornet, Directeur de mobileworldcapital, au cours de la session dédiée aux objets connectés lors du Carrefour de la Télésanté. Suivra une présentation par le Dr. Aizan Hirai (Japon) d'un exemple pratique utilisant de tels objets communicants, puis une proposition de cadre pour le développement d'un agent mobile par le Pr. Justice EMUOYIBOFARHE, Nigeria. Enfin Pirkko Kouri, membre du board de Directeurs de l'ISfTeH, résumera brièvement le contenu de cette session.

FRANCE

Prospective vision of mobile health technologies, and impact of connectivity in health systems

Joan CORNET PRAT, director of the mHealth Competence Center at mobile World capital Barcelona



Apps and other mHealth solutions promote wellness and prevention. Linked to smart sensors and ICT systems; they expedite the detection of chronic diseases and assist in their treatment and monitoring. And they deliver information and support decisions of clinical personnel where and when needed. Taken together, these innovations will not only lead to better health and quality of life, more effective and efficient healthcare systems, and economic growth.

SPAIN

Monitoring System for Self-administration of Insulin by Elderly Diabetes Patients

Doctor Aizan HIRAI MD, PhD and Director of Chiba Prefectural Hospital in Japan.



With the rapidly increasing number of elderly diabetes patients, improper insulin self-injection due to dementia is an emergent issue. Therefore, we have developed a monitoring system for insulin self-medication. The system includes two sensors in a box containing the insulin injection. Data from these sensors is uploaded to a server via the internet, and can be accessed by professionals such as medical doctors, nurses, and home care workers, in order to provide support to the patient.

JAPAN

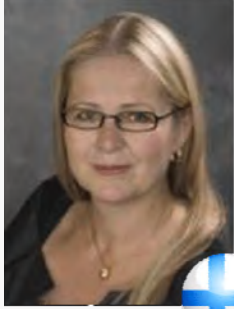
A Context Aware Mobile Agent Middleware Framework For Remote Patient Monitoring

Justice EMUOYIBOFARHE, Professor of Computing, Faculty of Engineering and Technology, department of Computer Science an engineering, Ladoke Akintola University of Technology, Ogbomosho



This work presents the development of an interoperable model for a localised context aware mobile agent middleware framework for a rural e-Healthcare Information Infrastructure (LAUe-HCMS) with Service-Enabled Middleware Support for remote patient monitoring. With the rising concern of doctors to patient ratio and the corresponding increase of aged persons and delicate outdoor patient requiring continuous care, the use of pervasive and wearable devices, intelligent mobile agents was employed.

NIGERIA



Co-chair

Pirkko KOURI, Principal Lecturer in Healthcare Technology at Savonia University, ISfTeH (International Society for telemedicine and eHealth) Board Member and secretary of Finnish Society for Telemedicine and eHealth (FSTeH)

Every country is challenged to prepare healthcare professionals for a future that has ever growing use of eHealth and where information management is a central part of professional practice. The definition of eHealth is consisting of all information and communication technologies (ICT), tools and services in health care. The role between healthcare personnel and patient is changing due patient's eHealth literacy and user skills. The personnel must update their eHealth skill regularly and be aware of new applications and tools.

FINLAND

4:45 - 6:15 pm : Session 2 - Success stories of use of eHealth in the world

Overview of success stories of eHealth applications around the world among the best one

Chair

Philippe DE LORME, Deputy Director and Chief telemedicine project , CHU de Rouen



Il est toujours bon de sortir de son hexagone ; force est de constater que nous sommes déjà à la veille d'un bouleversement d'une multitudes de changements de paradigmes en terme de prise en charge globale de nos citoyens/patients.

Cette révolution numérique mondiale, que nous impose une nouvelle culture d'économie de partage dans un environnement à la fois contraint et de défiance généralisée, nous impacte tout un chacun, institutionnels, décideurs, professionnels de santé, industriels et usagers, ces derniers devenant plus responsables d'eux mêmes.

Les innovations exponentielles en santé issues de la recherche et des sciences du numérique nous amènent à nous interroger stratégiquement sur la gouvernance et le devenir de nos systèmes de santé connectés. Nous devons considérer leurs forces et nous poser de légitimes questionnements sur leurs composantes éthiques, économiques, industrielles, tout en tenant compte des usages et des services rendus à la collectivité.

Le numérique est sans frontières, de l'Afrique à l'Australie en passant par le Japon, l'Amérique du sud et l'Europe, cette session a pour but de témoigner d'ores et déjà du chemin parcouru et d'applications significatives mises en œuvre.

France



Telehealth Network of Minas Gerais: a sustainable public telehealth network for remote municipalities in Brazil

Beatriz Alkmim, Head of Telehealth Center of University Hospital, Federal University of Minas Gerais

The Telehealth Network of Minas Gerais (TNMG) is a Brazilian public and sustainable telehealth initiative that offers telediagnosis and teleconsultation services mainly for primary care of small and remote municipalities. The service started in 2005 as a research project in 82 villages and nowadays operates in 710 municipalities. Until July 2014, 1.8 Million EKGs and 60,000 teleconsultations were performed. A cost-benefit analysis showed that for each dollar spent, four dollars has been saved.

BRAZIL



Broadband Satellite Based Tele-Eye care for Indigenous and Older Australians Living in Very Remote Area

Yogesan KANAGASINGAM - National Research Director at the Australian e-Health research Centre

The aim of the project is to bring specialist eye care to the Indigenous and older Australian living in very remote areas using broadband satellite technology. We have seen 980 patients from two different States. 82 cases of diabetic retinopathy were diagnosed. Two patients were diagnosed with proliferative DR and two with severe non-proliferative DR. The project has improved access to ophthalmic services. It was demonstrated that the broadband satellite service provides adequate connection for eye related remote consultations.

AUSTRALIA



Measuring the Benefit of e-Ambulance in Kochi Prefecture

Masatsugu TSUJI - Graduate School of Applied Informatics, University of Hyogo

This study is the first attempt to evaluate the economic effect of the e-ambulance project by using CVM, to the best of our knowledge. In measuring benefit, WTP (willingness to pay), which is the monetary amount that residents want to pay for receiving the e-ambulance service is estimated based on the survey to residents. The total cost of the system consists of initial fixed and annual operating costs. The B/C ratio is 0.459, and benefits are about half of costs for the three year project.

JAPAN



1 700 wearing patients of pacemakers telefollowed daily by the University Hospital of Bordeaux: return on a regional success story in the innovative economic model

Doctor Sylvain PLOUX, Hospital practitioner, Department of cardiology-electrophysiology and heart stimulation, University Hospital of BORDEAUX

Le CHU de Bordeaux est actuellement leader en France de la télésurveillance des dispositifs cardiaques implantables communicants (pacemakers, défibrillateurs automatiques implantables) avec plus de 1700 patients télésuivis quotidiennement. Notre activité s'inscrit dans le cadre d'un réseau régional de télésurveillance initié en 2012 avec le soutien de l'agence régionale de santé d'Aquitaine. Ainsi le CHU de Bordeaux assure le télésuivi de 11 établissements de santé partenaires (publiques ou privés) en Aquitaine.

France



CORDIVA: a system of remote monitoring which showed its ability with 16 000 patients affected by heart failure in Germany

Viviane CENTAURE, co-ordinator nurse, ALERE

FRANCE

Steffen SONNTAG, Cardiologist and Medical Director Europe of ALERE

GERMANY

CORDIVA is a eHealth programme for heart failure (HF) patients, based on a modular IT platform, remote monitoring and patient education. This programme is provided by ALERE in Germany for three major health plans and 12.000 patients per year. Since 2006, more than 27.000 patients have participated in the CORDIVA Programme. In May 2013, CORDIVA has been started in France, through 2 major randomized controlled trials headed by Toulouse University Hospital (OSICAT) and Pontoise Hospital / Paris Region (PIMPS).

Based on elementary control, results indicate that CORDIVA may continuously reduce all cause hospitalization by up to 40%, almost half mortality and decrease total health care cost by up to 20%.

Dr Steffen Sonntag, Medical Director at Gesellschaft für Patientenhilfe DGP mbH, will present the German experience along with clinical and Economical results, while Mrs Vivianne Centaure, head Nurse at the French CORDIVA platform will talk about the French practice and experience.





Co-chair

Moretlo MOLEFI, Managing Director, Telemedicine Africa

SOUTH AFRICA

6:15 - 6:45 pm : OFFICIAL SPEECHES

OFFICIAL SPEECHES - WELCOME FROM THE FRENCH AUTHORITIES



Marisol TOURAINE

Minister of Social Affairs and Health

(to be confirmed)



Axelle LEMAIRE

Secretary of State for Digital, with the Minister of Economy, Industry and Digital

(to be confirmed)

6:45 - 7:30 pm : Press point

Press conference

Guided visit of the Forum meetings and exchanges

7:30 - 10:00 pm : Diner cocktail

French model of eHealth ecosystem

eHealth toast by a partner provider

International and foreign federations overview

Friday, October 17

8:30 am - 9:00 am : Welcome

9:00 - 10:30 am : Session 3

Which legal and regulatory frameworks have been adopted? From solution security to user trust



Chair

Nathalie BESLAY, Jurist specialized in Health at BESLAY + LAWYERS

La conduite d'un projet e-santé suppose la mise en oeuvre d'une véritable conduite juridique de projet composée au moins de trois piliers

1/ la qualification légale et réglementaire du e-service ou de l'application envisagé

2/ le parcours réglementaire

3/ l'architecture contractuelle. Dans un contexte international, la question de la loi applicable sera également déterminante.

FRANCE



Impact of e-Health on health law (in Europe) and on healthcare systems

Stefaan CALLENS, professor at the KU Leuven and lawyer

Since ICT is playing an important role in society, ICT-developments will influence health care systems and health law. E-Health and in particular telemonitoring will influence:

- The way health institutions are organized*
- The different networks of hospitals*
- The on call services of healthcare providers*
- The way the industry is involved in the delivery of health care.*

Telemonitoring will also lead to new healthcare actors with who legal contracts have to be drafted. The seminar explains the influences on health law and on health care.

BELGIUM



Telemedicine, E-Health and the Law: A View from Both Sides of the Atlantic

Terrence LEWIS, Associate Counsel for the University of Pittsburgh Medical Center ("UPMC")

Telemedicine, E-Health and the Law: A View from Both Sides of the Atlantic (US and EU)

Telemedicine and E-Health is one of the fastest growing areas of medicine and continues to be one of the most challenging from a legal and regulatory perspective. The populations in the US and the EU are aging at a rapid pace, there is a growing shortage of qualified medical providers and the increasing cost of health care on both sides of the Atlantic Ocean require new legal rules for delivering quality health care and new regulatory strategies and models. Both the US and the EU need to timely resolve these legal and regulatory hurdles to allow for the full cross-border expansion of the use of telemedicine and e-health which will not only reduce costs for the citizens of the US and the EU but will also provide greater access to high quality care.

The audience will gain a better understanding of several important legal and regulatory issues including cross-border provider licensing and credentialing, patient privacy and protection of data security, developing cost-effective models for incorporating telemedicine and e-health across multiple clinical specialty areas and best practices for developing and expanding programs for maximum benefit including the better health of an aging global population.

UNITED STATES OF AMERICA AND EUROPEAN UNION



Co-Chair

Valeriy STOLYAR, secretary of the Russian Association of Telemedicine and member of cardiovascular Scientific Surgery Center of the Russian Academy
RUSSIA

11:00 am - 12:30 pm : Session 4 - Economic impact of eHealth in countries that invest

How does eHealth contribute to economic development of the nations that invest?

Chair

Denise SILBER, President of BASIL STRATEGIES and founder of the conference
Doctors 2.0 & You



This session will demonstrate through operational examples and studies how Telemedicine and, more broadly, eHealth, are contributing both to healthcare and to economic development. A healthier population is itself a driver of the economy. Additionally, virtual tools help in two ways. They enable the healthcare system to reach more people and they create new economic opportunities for those multiple stakeholders involved in the provision of service. Populations are ready, but key to success is the willingness of professionals to participate.

UNITED STATES OF AMERICA – FRANCE

Tele-education or telemedicine : what is the way for sub-Saharan Africa?

Maurice MARS, Research Professor at the University of Kwazulu Natal,
Department of telehealth in medical school, Nelson Mandela R



Africa needs more doctors and health workers. Tele-education offers a simple and viable solution to the shortage of skilled teachers within medical schools and nursing colleges within Africa. The success of existing programmes in Africa demonstrates the willingness of health professionals to embrace this method of teaching. A co-ordinated approach is required to bring the existing programmes together to expand their scope and reach.

SOUTH AFRICA

A teledermatology system in a rural geriatric service

Adolfo Luiz Falcão SPARENBERG, Cardiologist, MSc Biomedical Engineering



This presentation describes a Teledermatology initiative established in a Geriatric ward of a Rural Hospital in Brazil - Centro de Saude da Reserva (CSR) -. Based on "CampusMedicus", the project is the result of a partnership established between the CSR and the German Company Klughammer. Results covering a 2-month period show that specialized Teledermatology counselling represent a unique opportunity towards providing dermatological assistance to elderly citizens living in a geriatric unit.

BRAZIL

Humanitarian Telemedicine: Potential Telemedicine Applications to Assist Developing Countries in Primary and Secondary Care

Alexandra BONNEFOY - Research Fellow at the European Space Policy Institute (ESPI)



Humanitarian telemedicine (or the delivery of remote medical care to underserved regions), not only has the potential to improve healthcare for all, especially in regions where doctors are scarce, but also de-isolates and in turn empowers local health professionals. Furthermore, as a key component of individual growth, an increased and improved access to health care has the potential to lead to greater individual economic opportunities, and in turn national economic transformation.

UNITED-KINGDOM



The engagement of Réunion in supporting the implementation of telemedicine projects: examples of projects helping to improve the quality of life of patients and the economic and territorial development.

Stéphane SEBASTIANI - Network Director of Social Delegations Réunion group

Le groupe Réunion, acteur majeur de la protection sociale en France, soutient depuis plusieurs années le développement de projets dans le domaine de la télésanté, qui contribuent à mettre les nouvelles technologies au service des personnes âgées ou fragilisées tout en améliorant la qualité des soins médicaux. Ces projets, à dimension nationale ou territoriale, s'intègrent dans un écosystème plus global, renforçant les possibilités de pérennisation des solutions et ainsi le potentiel de développement économique.

FRANCE



Co-chair

Women and eHealth worldwide, Studies and Prospects

Doctor Veronique Inès THOUVENOT, PhD, Co-Founder and Scientific Director, Millennia2025 Foundation, Geneva

Encore peu exploré, le domaine des Femmes et de la eSanté a fait l'objet d'une étude en 2010-2012 à Millennia2015, une initiative de recherche prospective pour l'autonomisation des femmes de l'Institut Européen de Recherche Jules Destrée, Namur, Belgique, en relation officielle avec l'UNESCO et l'ECOSOC. L'étude abouti à la création de la Fondation Millennia2025 et à des investissements dans des projets innovants dans 10 pays pour soutenir le développement des compétences des Femmes en eSanté.

SWISS

2:00 - 3:30 pm : Session 5 - Methodological support and efficiency of eHealth

Which methodologies should be implemented to support eHealth projects ? How efficient is it for countries that use it ?



Chair

Robert LAUNOIS, Scientific Director REES

FRANCE



A Methodology for the Implementation of Person-centered Telehealth Research

Claudia BARTZ - Coordinator for the International Council of Nurses eHealth Programme

This paper describes how the concept of person-centeredness can be integrated with telehealth research methodologies. After extensive literature review, using telehealth research reports which had, as participants, people with diabetes, a framework for the assessment of person-centered research was devised, based on three ethical concepts that guide human subjects research: respect, benefit and justice. Participants themselves can contribute to the research design, interventions and outcomes.

SWITZERLAND

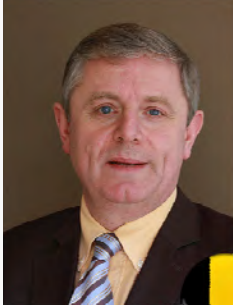


Momentum success factors and the ITACA project

Tino MARTI, International Project Manager

The Momentum Thematic Network is a platform across which the key players share their knowledge and experience in deploying telemedicine services into routine care. We have identified the critical success factors to deploy telemedicine services in different contexts throughout Europe. The case of ITHACA (Badalona, Spain) will be used as a demonstration site of critical success factors. ITHACA is an innovative integrated telemedicine service that optimises the care of patients with high-blood pressure.

SPAIN



The secrets of the Telehealth: how to deploy these services at a large-scale ?

The factors of successes identified by Momentum through Europe.

Marc LANGE, Secretary General of ETHEL

To date, only few telehealth projects have successfully shifted from lab to routine care. Even fewer have gone from small- to large-scale deployment. Lack of clinical evidence, user adoption, reimbursement and business models have been identified as the main explanations for this situation. An element that has been much less studied is the lack of deployment method. This is also a pitfall and the European project Momentum has identified a list of Success Factors which are Critical for the deployment of telehealth on a large scale.

BELGIUM

Co-chair

In the process of identification

3:30 - 4:00 pm : CLOSING SESSION

Synthesis of Carrefour de la Télésanté



**Frank LIEVENS,
Secretary General of the ISfTeH**

and



By a representant of the Scientific Council of CATEL