

Astronauts stuck on a space station treat illnesses with some virtual help.

A 3-D visor display being tested on Earth could guide astronauts with virtual reality graphics overlaid on top of the real world. Such a do-it-yourself space medicine device may prove a lifesaver for deep-space missions — especially if communication delays or blackouts prevent astronauts from contacting medical experts on Earth. The "augmented reality" technology could also help emergency responders far from hospitals, battlefield medics, or scientists stuck in remote places such as Antarctica. "Once it reaches maturity, the system might also be used as part of a telemedicine system to provide remote medical assistance via satellite," said Arnaud Runge, a biomedical engineer overseeing the project for the European Space Agency. "It could be deployed as a self-sufficient tool for emergency responders as well." The 3-D display allows the wearer to see virtual "cue cards" that guides his or her hands to points on a patient's body that match the points on a virtual version of the patient. The wearer follows the virtual guidance to correctly position an ultrasound probe used in medical exams. Wearers can also control the CAMDASS (Computer Assisted Medical Diagnosis and Surgery System) headset with spoken commands, and view ultrasound images of what they should be seeing during the medical exams. "Although medical expertise will be available among the crew to some extent, astronauts cannot be trained and expected to maintain skills on all the medical procedures that might be needed," Runge said.

Cameroon: The Cardiopad – an African Invention to Save Lives

Yaoundé— A young Cameroonian engineer has built the first fully touch screen medical tablet that could soon save many African lives. He first has to find the necessary funding to mass-produce the device. In a country that has only 30 heart surgeons for more than 20 million people, the dream of Arthur Zang, a 24-year-old Cameroonian engineer, is to facilitate the treatment of patients with a heart disease across Cameroon.

Kenyans to Have Greater Say in Health care Services Through Online Platform

Citizens participation in health care provision has been strengthened through an interactive platform that enables Kenyans to engage with both medical personnel and health care facilities in demanding quality and timely medical attention. Two Kenyan lobby groups, Social Development Network (SODNET) and the Kenya Treatment Access Movement have partnered with Kenya Medical Association to launch an online platform that amplifies the voice of citizens in health care service delivery.

Health goes hi-tech at GCC conference

Harnessing the power of information technology is just one of many subjects being discussed at a two-day e-Health GCC Conference organized by Universal Conferences and Exhibitions being held at the JW Marriott in Kuwait City. Speaking with the Kuwait Times yesterday, Dr Ahmed Al-Barrak, Associate Professor of Health Informatics, Medical Informatics and Conference Chairman said their objective was to bring together healthcare providers and information technology experts to exchange information and demonstrate the market-ready applications.

Paper on diabetes lauded

A paper on Diabetes Tele Management System (DMTS), a treatment method popularized by Jyothidev's Diabetes and Research Centre, has won critical acclaim in the Advanced Technologies and Treatment for Diabetes convention held in Barcelona in Spain recently. The system which combines telemedicine with self monitoring of blood glucose level has been found effective in patients in Kerala and Middle East. Dr Jyothidev Kesavadev, who presented the paper, said a team of doctors specializing in various disciplines give advices on dosages, diet and exercise to the patients over the phone or internet. Irrespective of the geographic location, this mode of treatment helps to reduce the cost of diabetes treatment, he added. Another paper on the evolution of different devices for continuous glucose monitoring was also presented by the team from Jyothidev's Centre at the conference.

An 'under-the-radar' payer-home health-tech move? (US)

The purchase of New York-based geriatric care management (GCM) /chronic care home health provider SeniorBridge by insurance giant Humana late in 2011 went largely unnoticed. SeniorBridge has done quite a bit with integrating technology such as EMRs and telehealth (with providers such as VRI) into their GCM model (see journal article), as has Humana. The interest of highly tech-focused Triple Tree in the Humana-Senior Bridge acquisition, citing the fit with Humana's own member self-management initiatives which are largely tech-integrated (guidance centers, telehealth and health coaching).

FDA throwing a monkey wrench into telehealth? (US)

Recent word has been that the FDA is really going to listen to the industry, and be kinder and gentler on smartphone medical apps [TA 25 Aug 11]/ Not according to Joel White, executive director of the Health IT Now Coalition, writing in the Washington Times. FDA continues to 'explore options to regulate mobile medical applications as medical devices under the Food, Drug and Cosmetic Act, particularly around adverse-event and patient-safety reporting.' With approvals taking up to three years and millions to file (and prove), plus a 2.3% medical device tax to fund, free and low-cost apps might be a lot more expensive. Plus it throws a ton of sand into efforts by other parts of the government to encourage outcomes-based care to lower costs, which use telehealth for consumer engagement. FDA's assault on mobile technologies; New regulations could be death blow to smartphone medical apps.

Healthbots interview: Professor Bruce MacDonald (New Zealand)

A team led by Professor Bruce MacDonald at the University of Auckland in New Zealand has been working to create a corp of medical robots - Healthbots - to accompany people at home and to guide them through self-monitoring tasks. Lengthy interview in Medgadget still doesn't make a convincing case that robots are the future of telecare and telehealth.

Success of telemonitoring systems hinges on features, design

The success of mobile phone telemonitoring systems hinges both on their features and design, a study focusing on heart failure patients published in the Journal of Medical Internet Research concluded. In particular, characteristics that led to improved care for such patients included ease of use, as well as immediate clinical feedback with self-care instructions, according to researchers.

Disadvantages of the Reimbursement Model

Reimbursement is one of the biggest challenges of telemedicine. A handful of states including California, Louisiana, Texas, Oklahoma, and Kentucky mandate reimbursement by private insurance for telehealth services. The reimbursement rates may vary and aren't always equivalent to an in-person meeting. Medicaid reimburses for telemedicine in many states. Medicare reimburses for services such as outpatient visits, nutritional counseling, kidney disease education, medication management and end-stage renal disease-related services—but only for rural patients.

Vets' Access to Telehealth Expands

Telehealth will play an increasing role in helping combat veterans receive treatment for post-traumatic stress disorder. The National Defense Authorization Act, recently approved by Congress, lifts a key restriction against behavioral-health consultations across state lines. The change will give military members at small or rural bases the same access to mental health care as those at large bases with major hospitals, the Army Times newspaper reports. The act grants a new exemption to a requirement that health care providers be licensed in the state in which their patients are treated, The federal government already had exempted state licensure requirements for military health care providers in federal facilities treating patients in other federal facilities. The new exemption includes care provided at any location, including civilian clinics and patients' homes.

Telemedicine solution improves practice productivity, pleases patients

There was a time when telemedicine services could only be provided by very large clinics, academic medical centers or government health organizations. Telemedicine required big bulky equipment and expensive dedicated landlines or satellite connections that were capable of sending quality audio and video signals from one place to another. Of course, that is not the case today. Thanks to advances in digital technology and broadband Internet services at commodity prices, telemedicine can be provided by nearly any health facility regardless of size or budget. Connections can easily be made from one medical practice to another or even directly into patients' homes.

NHS time to take action for the sake of Britain's health

Dramatic changes are taking place which mean that leaders in healthcare must rapidly become leaders in patient privacy. This is essential for the reputation of their organizations and the protection of patients and staff. Events are being driven by two powerful and converging forces – demand and regulation. The Prime Minister's announcement that telecare services will be rolled out to three million patients underlines the speed at which electronic healthcare is being mainstreamed. At the same time seismic shifts are underway in the formal rules, and public expectations, on confidentiality. All this places a huge weight of expectation on the NHS, especially when it is battling to save billions of pounds.

New report identifies key elements for improving oral health quality

Study notes that dental expenses are among the highest out-of-pocket health cost to consumers, second only to prescription drug expenditures. The Kellogg Foundation teamed up with DentaQuest Institute to suggest steps such as increased emphasis on electronic health records, further development of diagnostic coding systems, innovative payment and "incentive" mechanisms based on demographics, use of telehealth technologies in rural areas, and the delivery of care in nontraditional settings that would involve new types of allied dental professionals.

ESA launches project to improve healthcare in Africa with satellite technology

The European Space Agency (ESA) has set up an international consortium to pave the way for the use of satellite systems to help overcome the challenges to healthcare in Sub-Saharan Africa. The region

has around 11% of the world's population, but has 25% of the global disease burden (in human and financial costs), but less than 1% of global health expenditure. Delivery is also a challenge, with just 3% of the world's health workers deployed in the region, so doctors and nurses are often a long way from their patients and access is difficult due to poor infrastructure. Information and communications technology (ICT) and in particular satellite communications can enable the timely delivery of care, training and educational content, perform epidemic surveillance and support health system administration over the vast distances involved in the region. ESA recently launched the Satellite-Enhanced Telemedicine and eHealth for Sub-Saharan Africa Program (eHSA). Working in collaboration with the Luxembourg Agency for Development Cooperation (LuxDev) and with the co-funding of the Government of Luxembourg and the European Union - Africa Infrastructure Trust Fund, eHSA's goal is to develop a satellite-enhanced eHealth and Telemedicine infrastructure to benefit sub-Saharan Africa. It has also recently issued a tender for a study on the interoperability aspects of the Program. One of the first objectives of the program is to conduct a governance study among 48 countries in the region which will make sure that the right procedures, policies, and organizational structures are in place before the eventual move to eHealth delivery

Upcoming International Events

International Congress on
Telehealth and Telecare 2012
The King's Fund, London, United
Kingdom
March 6-8, 2012

Telemedicine
Experience@Prospects
Donetsk, Ukraine
March 19-20, 2012

Med-e-Tel 2012
Luxembourg

April 18-20, 2012

ISPHT 2012
Baltimore, Maryland, U.S.
May 14-16, 2011

World Health Care Congress
Europe
Amsterdam, Netherlands
May 23-24, 2012

IFA 11th Global Conference on
Ageing

Prague, Czech Republic
May 28 - June 1, 2012

3rd International Conference on
Transforming Healthcare with IT
Hyderabad, India
August 31 - Sept 1, 2012

Health 2.0 Europe (2012) Berlin,
Germany
Nov 6-7, 2012

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