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6-9 February 2017

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DAY 03 WEDNESDAY 1 FEBRUARY 2017

arab health DAILY DOSE

THE OFFICIAL DAILY NEWSPAPER OF THE ARAB HEALTH EXHIBITION

OMNIA - The Global Medical Directory Launches At Arab Health An All Encompassing Online Platform

INFORMA LIFE SCIENCES EXHIBITIONS unveiled a new online platform that connects companies with potential customers beyond the show floor, 365 days a year.

Allowing companies to upload a company profile, product listings, images, demonstration videos and catalogues, OMNIA bridges the gap between exhibitors and visitors all year round. The platform also gives members the ability to track product popularity by providing analytics about how products have performed in their category as well as providing a simple means for visitors to request more information from vendors, generating solid leads that are sent through to sales teams directly.

OMNIA enables companies to upload their information, products, images, videos, catalogues and specification sheets and receive lead information and catalogue requests directly. They can also track which products are getting the most attention and how many people have added them to their 'Walking List' (a wish list of companies they want to see at any of our events). Companies can use the platform to generate interest in their offerings before and after exhibitions, providing a nice boost to awareness on the show floor.

OMNIA promises to provide users with a 365 day exhibition experience, providing both vendors and buyers with significant value adds. It will, says Joseph Chackola, expand Informa Life Science's exhibitions "beyond geographic limitations" to become truly global.

In addition to those companies selling products, OMNIA is a significant value add for customers, providing them with a one stop shop for evaluating products away from the time limited exhibition floor, with videos and catalogues granting access to a wealth of information. It also puts them in direct contact with companies as well as allowing them to better plan their visits to exhibitions by generating a walking list based on the specific products and vendors they most want to see on the show floor.

To find out more, visit www.omniagmd.com or one of the many OMNIA stations around the exhibition.

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FC Barcelona's sports medicine doctor reveals 'winning health strategies' at the show

AN ESTEEMED SPORTS MEDICINE doctor working for over a decade at FC Barcelona presents 'winning health strategies' at Arab Health 2017.

Speaking on behalf of the Harley Street Medical Area's Isokinetic Clinic, Dr Daniel Medina MD will present his experience at the club and how he used 'big data' and data science to create a winning team.

The presentation will consider the epidemiology of injuries across all sports at FC Barcelona and the continuing education programmes, research projects and approach to innovation.

Personalised player monitoring and nutrition and predictive analytics, decision-making algorithms and understanding of relational complexity will also be highlighted throughout the presentation.

Dr Medina said: "It is an honour to be speaking at the Arab Health Congress about my experiences at FC Barcelona. Innovation is at the heart of our work at FC Barcelona and in particular FCB Universitas and our Sports Innovation Hub project.

"We wish to share the knowledge we have acquired over the years in various fields, such as medical services and performance, in an external way, with other world-renowned organisations, institutions, academic institutions and technology companies through forums, conferences, educational programmes, and master's degrees or developing research and courses, both face-to-face and online."

Isokinetic is an international medical group specialising in the field of sporting injuries, treatment, orthopaedic rehabilitation and research. With more than 30 years' experience in the treatment of patients in its eight clinics throughout Europe, it is listed as one of the 48 FIFA Medical Centres of Excellence in the world.

The group has its international headquarters on the Harley Street Medical Area, London - an area famed for its medical excellence in treating complex and life threatening conditions.

Behind its Georgian facade lays the latest in

cutting edge medical technology and the area is proud to offer unique and complex surgeries performed by renowned surgeons, and many world class practitioners for the overall management of recovery and health of patients.

Dr Medina will present on 'Big Data versus Data Science and how it is used in winning teams' taking place today at 14.30. He will also take part in a panel discussion on the topic of Big Data.





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We take care of about **3.9** million patients per year, including **250,000** accessing our emergency rooms, with a focus on all clinical specialties. **90%** of our services are accredited by the Italian National Health Service (NHS). We are **15,303** employees, including **4,092** physicians. In addition to our first-class clinical services, what makes us unique in Europe is the quality of our university and scientific research.

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TODAY AT A GLANCE

ARAB HEALTH 2017 CONGRESS

CONFERENCE	ROOM	LOCATION	START TIME	FINISH
Gastroenterology	Sharjah D	Above Hall 6	8:20	17:15
3D Printing	Dubai D	Above Shk Maktoum Hall	9:50	17:30
Workforce Empowerment	Abu Dhabi A	1st Floor building opp Hall 5	9:00	16:30
Public Health	Abu Dhabi B	1st Floor building opp Hall 5	9:00	16:15
Business Forum Free Zone	Ras Al Khaimah	2nd Floor building opp Hall 5	10:40	17:30
Emergency Medicine	Umm Al Qwain	Above Shk Maktoum Hall	8:50	17:00
Total Radiology	Al Multaqua Ballroom	Between Halls 4 & 5	9:00	18:00
Surgery	Shk Maktoum Hall section B	Concourse 2	8:50	17:30
Orthopaedics	Shk Rashid Hall - Part C	Shk Rashid Hall	8:20	17:30
Big Data	Al Ain J	Above Hall 4	8:55	17:20

ARAB HEALTH DAILY DOSE

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VISIT THE 3D MEDICAL PRINTING ZONE AT ARAB HEALTH 2017

THIS DEDICATED FEATURE AREA in Hall 5 at Arab Health is running for its 2nd year, and for 2017 will be even bigger and more engaging than its predecessor. Visit the Zone to discover many of the innovative technologies that are revolutionising healthcare. Our partners and participants will be showcasing their products and demonstrating the possibilities that 3D printing can achieve for healthcare.

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- Discussions with experts telling you about the near future for 3D-printing for healthcare

The conference that runs in conjunction with the zone will carry the theme 'fast forward 2030', and will focus on the various clinical, laboratory and pharmaceutical applications for 3d printing, as well as a look at the commercial considerations with strategic, operational and legal sessions.

3D MEDICAL PRINTING



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Enhancing Education - With an Italian Flair

PAOLO ROTELLI, PRESIDENT OF ITALY'S Gruppo Ospedaliero San Donato (GSD), one of Italy's largest private hospital groups has his sights set on the Middle East, and Dubai in particular, for the group's next phase of expansion. GSD has a strong pedigree in all aspects of healthcare, from frontline delivery and specialist care to cutting edge medical research and medical education. Indeed, Rotelli explains that the company "believes in a model of care that puts together clinical activity, university education and medical research in order to get the best care and cure for every patient."

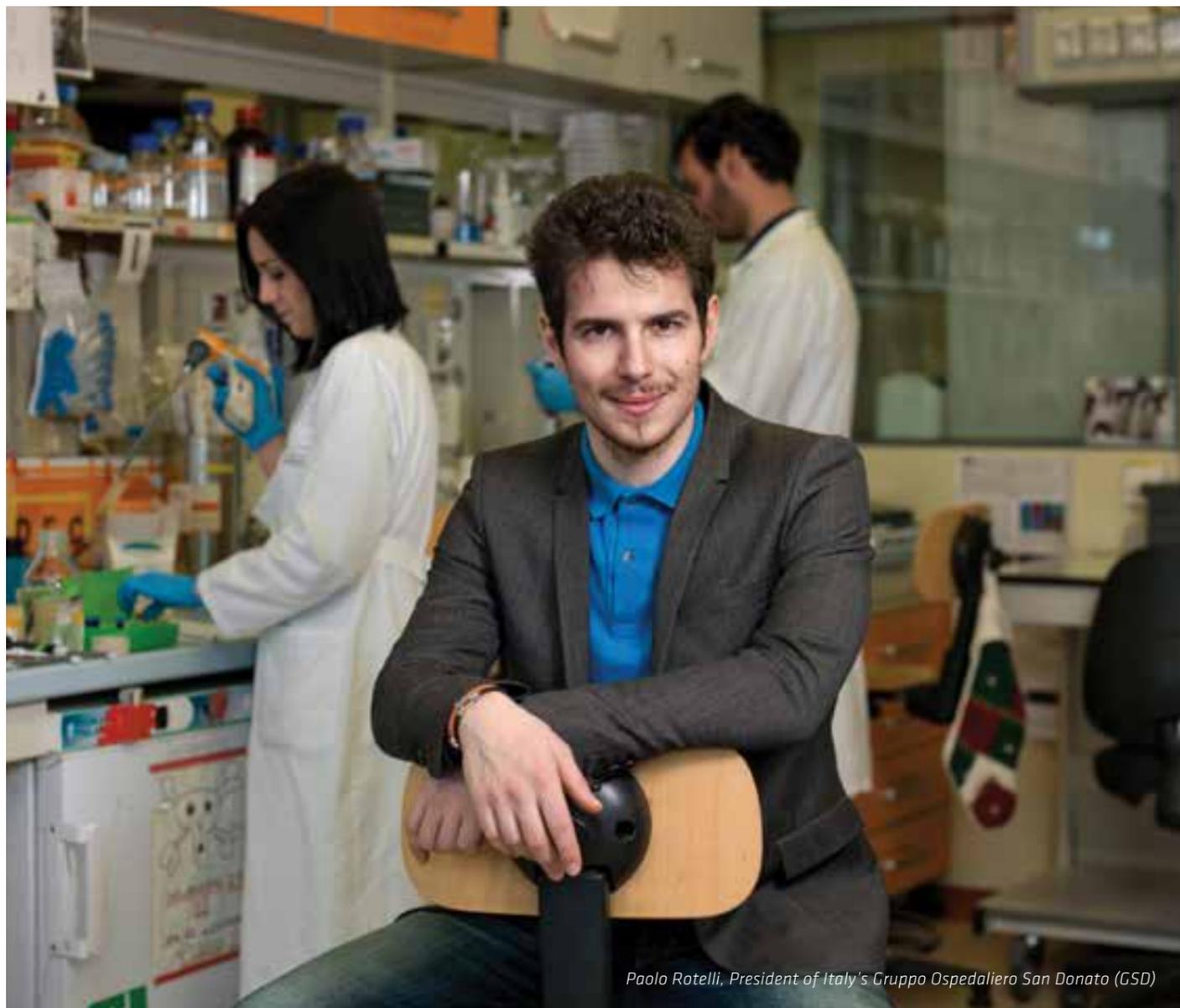
Contrasting the Middle East with Europe's significantly more mature healthcare market where there is a lot less room to grow, Rotelli sees a bright future for the region, "especially after Dubai Expo in 2020". Citing Dubai's ambition to become a "city of the future" he predicts that the city's image will only improve, increasing the number of medical tourists drawn to it. As a result, he says, "the healthcare sector will grow both in quantity of procedures and in quality." As this happens, he sees a period of oversupply of healthcare services that, through competition, will bolster quality and help drive prices down.

However, in order for Dubai to reach its full potential, Rotelli argues that "local providers will need to invest in education, training and medical research." This, he continues, is "because if you want to have great physicians that stay in Middle East, it's essential to provide them the same possibilities they would have in Europe or the US" such as being a university professor, "or at least teaching and doing advanced medical research."

Indeed, Rotelli identifies medical education and research as two key areas of the Middle Eastern market that are, at present, underserved. They are two areas, in addition to highly complex procedures and preventative medicine that his company is at the forefront of in its native Italy. Indeed, he explains that GSD "believes in a model of care that combines clinical activity, university education and medical research in order to get the best care and cure for every patient."

It is this model that Rotelli hopes to bring to the Middle East, starting with the UAE. Once again drawing a comparison between Italy and the UAE he identifies significant growth potential in the UAE citing the fact that while in Europe, research funding is harder and harder to come by, the UAE has a strong commitment to improving its healthcare sector, with a lot of private funding still available thanks to investors willing to take the plunge.

As a result of this commitment, Rotelli believes that the "Middle East could be able to develop a strong research sector" because, he says, as the UAE skyline shows "people have got both the ambition and the money to do it." GSD he concludes, has the "know-how and is ready to transfer it in the Middle East." With GSD being Italy's leading medical research institution, publishing more than 1,600 scientific papers per year, that know-how would certainly be welcomed in a market looking to kick-start its research efforts. In support of this, Rotelli cites



Paolo Rotelli, President of Italy's Gruppo Ospedaliero San Donato (GSD)

the company's role in developing the first and only ex-vivo stem cell **gene therapy** to treat patients with a very rare disease called **ADA-SCID** (Severe Combined Immunodeficiency due to Adenosine Deaminase deficiency). He also reveals that the company is working on experimental therapies to cure diabetes, a treatment that would no doubt be very welcome in a region such as the Middle East.

Asked about the Middle East's lagging behind Europe and the United States in terms of medical education, Rotelli is keen to point out that "the UAE government is doing the right thing in requiring continuous medical education for professionals in order to renew practice licenses." In addition to this, he calls for the government to implement policy to encourage the development of medical education centers in the UAE that would "make it easier for the right providers to setup branches here." However, he warns against simply importing education, stating that local universities should have a central role in order to foster sustainable development of the sector. Building on GSD's extensive experience of medical education in its one market of Italy, he announces that the company is "planning to enter the UAE

life sciences education sector, leveraging our thousands of experts in Italy, and we are very much looking forward to doing this with a reputable Emirati partner we have identified."

The company has already taken small steps in this vein, remotely conducting a heart operation over the Internet on a patient in Milan from a Dubai conference room in order to teach a new procedure they developed to treat the Brugada Syndrome. It was the first time such a procedure was performed in the UAE. Rotelli hopes that the ability to perform such operations remotely will open "great perspectives for the future."

Rotelli is bullish concerning GSD's ability to replicate its Italian success in the UAE. Lamenting the fact that the market in the country is currently dominated by British and American brands, he cites the fact that Italy has one of the world's best healthcare systems as opposed to the US and UK which have, he says, lower quality on average. "Once we build awareness of our quality in the local environment i think the market will reward us. After all I think anyone in the UAE would want high-quality and affordable healthcare services with an Italian human touch."

The UAE's health insurance laws have, he

continues, "certainly made the environment more attractive from a business perspective." However, they have also introduced a lot more competition among providers. Nevertheless, Rotelli underlines the fact that even without mandatory health insurance coverage, GSD would still have set its sights on an expansion within the UAE.

On the subject of medical tourism, Rotelli concedes that the UAE has "decades of history of sending patients to other countries, and has well-established channels to countries such as the UK, Germany and to lesser extent the USA." As a result, it is much harder for GSD to attract UAE medical tourists to its Italian facilities. However, he argues that the company's facilities in Milan "are closer, offer equal or higher quality standards than anywhere else in the world, our costs are lower than the UK or Germany, the country offers unparalleled beauty to its visitors who want to have a travel experience and we have established first-class international patient services in all our hospital facilities. Once we manage to build awareness locally about this" he says, "I am sure we will substantially increase our number of international patients."

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Thunderbeat in action in the OR

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Thunderbeat in action in the OR

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Features of THUNDERBEAT Type S at a glance

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MEDLAB to start next week



DUE TO THE SIGNIFICANT increase in healthcare investment across MENA, MEDLAB Exhibition & Congress is being launched as a stand-alone event this year from Feb 6 to 9 at the Dubai International Convention & Exhibition Centre.

In 2016, MEDLAB, the world's largest medical laboratory exhibition and congress, hosted 589 leading exhibitors and will now welcome over 700 participating companies, from 38 countries demonstrating a truly international base of suppliers.

"The UAE alone is experiencing fast expansion in the medical device, healthcare IT and medical education fields. At Informa Life Sciences Exhibitions, we aim to provide delegates, visitors and exhibitors a tailored experience for their specific areas of focus in a technological evolving scene," said Simon Page, Managing Director, Informa Life Sciences Exhibitions, Middle East.

"MEDLAB and Arab Health bring together

stakeholders and experts from around the world to showcase the latest in healthcare technology and techniques. Separating Arab Health and MEDLAB gives attendees a deeper understanding of different areas of healthcare, and an opportunity to specifically hone in on areas that are of interest to them," Page added.

The 16th edition of MEDLAB is expecting to welcome over 30,000 laboratory and trade professionals from all continents. During the four-day event, 11 multi-disciplinary conferences will be led by globally recognised speakers on topics including laboratory management, microbiology, immunology and clinical chemistry.

The event will also incorporate new tracks specialising in blood transfusion medicine, laboratory informatics and updates in clinical diagnostics of cardiology and diabetes, which will enable the correlation of roles between lab professionals and clinicians.

See you next week



6-9 February 2017

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INTENSIVE CARE UNITS (ICU) are the locations where the most difficult to treat patients are often staying for days or even weeks. For this critical and costly environment, Getinge always focus on developing user-friendly and reliable solutions that help caregivers to achieve tangible and cost-effective patient outcomes.

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For the most critical patients, such as the Acute Respiratory Distress Syndrome (ARDS) patients, Getinge offers a comprehensive range of solutions from respiratory support to Extra-Corporeal Membrane Oxygenation (ECMO) and including advanced monitoring devices that can help to solve therapeutic conflicts. As those ARDS patients usually stay longer than average in the ICU's, an early mobilization strategy starting as soon as possible is very important to reduce neuromuscular complications, help to improve outcomes and reduce length of stay. At all steps in your Early Mobility program, Getinge can support with a complete solution from in bed to out of bed mobilization using Citadel bed, Maxi Transfer Sheet, Sara Combilizer and passive and active patient lifters.

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Recent Trends of Substance Use Disorders in the UAE: Implications for National Policy

By Ahmed Elkashef, Anas Fekri, Hamad Al Ghaferi, Ali Al Marzooqi, The National Rehabilitation Center, department of Public Health and Research

SUBSTANCE USE DISORDERS IS on the rise globally with an estimated 250 million people worldwide have used tried drugs at least once in their life time (World drug report 2014) and about 50 million used drugs in the 30 days.

Despite the lack of national statistics on SUD trends in the United Arab Emirates (UAE), the country is witnessing rise in the number of patients seeking treatment for SUD and/or referred from the court system for treatment as reflected by admission data to the treatment and rehabilitation facilities in the National Rehabilitation Center in Abu Dhabi (El Kashef et al. 2013).

There are many possible reasons for this, one is increasing awareness of the general public of the dangers of drug use as a result of the many awareness campaigns that the National Rehabilitation Centre (NRC) and others e.g. Ministry of interior, Local police authorities. Another reason is expanding treatment services, as seen after the NRC opened outpatient services in 2009/2010, a sharp increase in admissions almost ten folds followed. The geographical location and affluence of the citizens of the UAE make them target for drug cartels. According to the UNODC world drug report the UAE is a primary transit country for air-trafficking of illicit substances, location bordering southwest Asia, position it on the route between the countries that cultivate and produce illicit substances and the worldwide consumer market.

The NRC in Abu Dhabi is the largest comprehensive prevention, treatment and rehabilitation center for substance use disorders in the UAE. The NRC was established in 2002 on the directives of the late Sheikh Zayed bin Sultan Al Nahyan, the former president of the UAE. In 2010, the Emirate of Abu Dhabi issued a law under which the center expanded its functions to include conducting research and studies in the field of substance use disorders and propose policies and legislations in coordination with other competent authorities which will contribute to the prevention and treatment of such disorders, these efforts have contributed to new changes and amendments to the National anti-narcotic Law in the UAE which was approved by H. H. Sheikh Khalifa bin Zayed Al Nahyan the President of the United Arab Emirates in 2016.

Methods:

Literature review of published reports on recent trends (last 10 years) on SUD were completed using PubMed and Google Scholar search engines. Search criteria were to include studies on the Trends of Substance Use Disorders in the UAE with the following key words: UAE, Abu Dhabi, Dubai, Sharjah, Ras Al Khaima, Umm Al Quwain,



Ajman, Fujairah, substance use disorders, epidemiology, trends of use/misuse/abuse, drug addiction, drug dependence, treatment, rehabilitation, prevention and outcomes.

Results:

Three studies met search criteria were found. One study was conducted by the NRC (Elkashef et al, 2013), a 10 – year retrospective study from NRC on the profile of patients with substance use disorders and treatment outcomes. The second study (Alblooshi et al, 2016), a cohort study on the pattern of substance use disorder in the UAE in 2015. The third and fourth studies (Alhyas et al, 2015), a qualitative study on Adolescents' perception of substance use and factors influencing its use in UAE, and Parents' Perceptions and Beliefs on Adolescence and Substance Use: A Preliminary Qualitative Study in Abu Dhabi, United Arab Emirates

Discussion:

El Kashef et al. 2013, showed that there has

been a steady increase in SUD over 10-years period from 2002 – 2011 with increasing trends of prescription drugs and polysubstance addiction among youth. It also showed a drop in relapse rate from 60% in the first two years the center opened which gradually improved down to about 20% in recent years. More than half of the patients treated in NRC were single, unemployed and had education below secondary school level. Alblooshi et al. 2016 study, reported rise in the use of prescription medications in the UAE, particularly among younger patients (less than 30 years of age), and continuing use of illicit opioids among males above 30 years of age. The majority of the cohort in that study (Alblooshi et al. 2016) were polysubstance users. Alhyas et al. 2015, showed that the Knowledge of substances and related consequences of use varied between adolescents' groups but was compatible with participants' age and school years. Many factors were believed to increase the risk of substance use among adolescents such as peer pressure, inadequate knowledge of

the harmful consequences of drug use, family-related factors, affordability and availability of substances, boredom and affluence. On the other hand, religiosity was as a shield against substance use, especially alcohol. The study was successful in exploring adolescents' awareness of substances and associated harm to health from their use. Also, it identifies a number of risk and protective factors based on the perceptions of a group of Adolescents.

Conclusions:

The studies available on the Recent Trends of Substance Use Disorders in the UAE are few. However, they show good evidence and necessity for establishing a nation policy to handle the increasing trend of polysubstance use and non-medical use of prescription medications specially among youth. The policy should encourage performing more epidemiological and outcome measure studies as well as setting and delivering evidence based prevention programs and preventive measures for the problem of SUD in UAE.



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First-of-its-kind e-services system for clinical and commercial activities launched

Masaar, the first-of-its-kind e-services system in the UAE introduced in the Dubai Healthcare City free zone, brings together close to 200 services for commercial set-ups, healthcare licensing, and government services under one convenient, innovative interface.



IN THE FACE OF TECHNOLOGICAL innovation and shifts in consumer behavior, the Dubai Healthcare City Authority - Regulatory (DHCR), the regulator of the Dubai Healthcare City (DHCC) free zone, ensures it stays ahead of the curve.

On the sidelines of the Arab Health Exhibition & Congress 2017, the regulator launched Masaar, the first-of-its-kind e-services system in the UAE that combines clinical and commercial services. Bringing together various applications under one convenient, innovative interface is in line with DHCR's commitment to excellence and smart governance, and supports the Dubai Smart Government initiative.

In a Q&A, Dr Ramadan AlBlooshi, CEO of DHCR, who oversees international best practice in healthcare delivery and patient care in DHCC, talks about the importance of developing innovative platforms and empowering the free zone's customers to make decisions at the click of a button.

What is Masaar?

Dr AlBlooshi: Masaar, which means 'path' in Arabic, is conceptualized to serve as a conduit or a channel to access the required services in the free zone. The launch earns Masaar the reputation of being the first-of-its-kind e-services system in the UAE to offer a one-stop-shop interface of all services from commercial set-ups to healthcare licensing and government services. (You can access Masaar by logging onto www.dhcr.gov.ae and clicking 'E-services'.)

What services does Masaar offer?

Dr AlBlooshi: Masaar has close to 200 services across commercial registration and licensing; healthcare professional licensing; quality surveys; engineering services; government services; compliance and assurance; and education and research. In its current phase, Masaar caters to healthcare professional licensing and commercial licensing services for existing partners and potential customers who wish to set up in the free zone. In the near future, it will provide government services and commercial licensing services for close to 400 existing partners.

How was Masaar developed?

Dr AlBlooshi: To develop Masaar, DHCR mapped the landscape of the services it currently provides to identify essential online services and to integrate these with government and non-government entities. We realized that there was a gap for an efficient one-stop e-service system offering comprehensive services for applications and renewals in commercial, professional licensing as well as government services. The system was developed by global technology solutions provider LINK Development.

To what extent does Masaar integrate with other government services?

Dr AlBlooshi: We are pleased with the support and collaboration from all our stakeholders who play an integral role in realizing our vision for innovation and good governance. To this end, we

are particularly proud of Masaar's integration. We have worked with government and non-government agencies to offer several features such as e-payments and an application tracking system.

There is a lot of talk around innovation. How does innovation apply to regulations?

Dr AlBlooshi: Innovation is not just about a technologically savvy product. It is about the health sector as a whole. To place Masaar in a wider context, as a platform it not only applies to regulation but it goes further to strengthen Dubai's ranking in ease of doing business and the emirate's reputation for high-quality experience. In that sense, we believe that innovative regulations should serve both the short-term need for accessibility and convenience as well as the long-term need for good governance and a culture of customer happiness. With the launch of Masaar, DHCR is empowering the free zone's customers to make decisions at the click of a button.

What plans are in the pipeline for DHCR?

Dr AlBlooshi: Like any other regulator, we strive to be relevant and deliver results in an industry that is data driven and digitally optimized. Our future projects will drive improve customer service through technology and positively impact the quality of experience for patients and the free zone's visitors.

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*Siemens AG, "Sustainable healthcare strategy – Indicators in fiscal 2014", page 3-4

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New Year New Job

You can't see the forest for the trees"? this is what happens when you are in need of a new job. You immediately dash to the market and start asking yourself "what job can I get" or "what job do I qualify for"? This is not a competitive position to be in.

THE FIRST MISTAKE PEOPLE make when looking for a job is they look in the market. They look online and look at job ads! If you want to know where the greatest opportunity of your life lies, it lies in your heart and it's in your soul. It lies in who you were created to be. You can't find it on job sites or in the papers, it's inside you.

Have you ever heard the cliché "You can't see the forest for the trees"? This is what happens when you are in need of a new job. You immediately dash to the market and start asking yourself "What job can I get" or "What job do I qualify for"? This is not a competitive position to be in.

If you want a competitive advantage in life and in your career, you have to stop asking yourself the same question everyone else is asking themselves and start asking yourself the questions that the greats among us ask themselves, which is "Who do I want to become" and "What is my life's work going to be"?

This takes you a step back from your immediate position and looks 20 or 30 years out. When you start asking yourself who do I want to become you can start to create a game plan as to what skills and capabilities you need to develop. Once you have this in perspective, your job search becomes very easy and the journey becomes the goal.

With focus, even a harmless ray of light can become a laser and cut through pure steel. Focus is everything. So, just because you qualify for a job does not mean you should apply for it.

To start your job search, you need to create a target list of companies with an industry focus. List the companies in your desired industry and list them by revenue, profit, cost position or their industry success metrics which may apply. The most commonly used metrics for a Hospital are, number of licensed beds, number of operational beds, number of staff, number of doctors, profit per bed, profit per doctor, net margin per doctor... etc. Looking at the industry through this lens will give you insight your competition does not have.

After accumulating the performance metrics of each hospital, you would then list all the Board members, the executives and their bios. Identify the winners, find out why they are so good at what they do and identify the key themes which emerge. For example, is one group mostly South African or another South Asian, or do most of the C-Suite come from the same university. Pick a target group you best fit in with.

The next step is to develop your personal

brand so that it delivers impact. During the job search process you are selling one of the most complicated products in the world, yourself. One must understand their personal brand and how to position themselves in an attractive way to their new boss or organization. To do this effectively your personal brand must infuse key documents such as your business card, resume, white papers, e-books, videos and all your social media platforms. I always suggest creating a brand capsule line; that is a single sentence that describes you professionally.

Since the world has gone digital candidates of the 21st century need a digital footprint to convey their message. If Facebook were a country, it would be the world's largest by a landslide with circa 1.5 billion active users. LinkedIn has two users every second and approximately 450 million active members. A candidate not taking advantage of these social media tools is not going to be competitive in the market. One must educate themselves on how to utilize social media and digital content to effectively move their career to the next level. Be clear that if you are a finalist for a six-figure job, they are going to google you, they will check your Facebook, and whatever else may be lurking in cyberspace. So, keep your social media presence professional and in line with the personal brand you want to project.

After all this preparation, you are ready to meet the decision maker who can give you your dream job. If you are a CEO you need to meet the Chairman, if you are a Gynecologist you need to meet with the Head of Gynecology and if you are a Controller, you need to meet with the Chief Financial Officer. All in all, you need to meet your new boss, not a recruiter or an HR Consultant.

You should be clear that applying to online jobs and meeting recruiters is the least effective way to find a job and 60% to 80% of people find their jobs through family and friends. So, when looking for a new job focus 80% of your time on your network of family and friends and spend only 5% to 10% of your time interacting with headhunters and online job advertisements.

If you are well prepared, know all the players and their key industry metrics, and are well researched on your target hospital, you should have the confidence to ace any interview. If you truly love what you do and have a vision of what you want to do with your life, then chase your dream with everything you have got. Chase, like your life depends on it because it does.



Dora Kalmar Nagy, Management Consultant, The Phillips Group

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From Bench to Bedside: Integrating Research and Care

REHABILITATION INSTITUTE OF CHICAGO (Booth H5.B63) prepares to open the Shirley Ryan AbilityLab, first-ever translational research hospital

Today, 86% of scientific discoveries never make it out of the lab. That's countless treatments and even potential cures that are never fully developed or utilized. It's hundreds of billions of dollars lost to ideas that are interesting, but impractical and quickly shelved.

Clinical practice – and the divide between what doctors know today and innovative ways they can change patients' lives tomorrow – should inspire and inform medical research. In theory, this seems fundamental; it should happen. In practice, however, it doesn't. Team science is expensive and requires a radical shift in mindset, behavior and culture; this is why it's never been done correctly or effectively.

Converting good ideas into strong solutions

One hospital is setting out to change this statistic in a profound way in an effort to increase the likelihood that good ideas are more routinely converted into strong solutions. The Rehabilitation Institute of Chicago (RIC) – a specialty, non-profit hospital serving people with the most severe, complex injuries and conditions – is making a \$550 million bet in the creation of the Shirley Ryan AbilityLab, its new, 1.2 million-square-foot hospital. The AbilityLab will be the first-ever “translational” research hospital in which clinicians, scientists, innovators and technologists work together in the same space, surrounding patients, discovering new approaches and applying research real time.

“Thanks to the convergence of disciplines and discovery, science is at a boiling point in areas like sensor technology, brain science, computer capability and speed, and tissue engineering,” said

Joanne C. Smith, MD, President and Chief Executive Officer of RIC. “With the Shirley Ryan AbilityLab, we are taking advantage of this moment. Doctors focused on solving patient problems now will collaborate in the same space with scientists working to develop future cures. The result will be targeted innovation on behalf of patients, who will be poised to achieve their best possible recoveries at the AbilityLab.”

RIC has been named the “No. 1 Rehabilitation Hospital in America” by U.S. News & World Report for 26 consecutive years, and has big plans to build on its legacy with the Shirley Ryan AbilityLab. The new hospital touts 40% more inpatient beds (with room to expand), as well as a research footprint that is three times greater and an outpatient clinic four times the size of its current facility. At the core of the hospital will be five dynamic applied research and therapeutic spaces with unique configurations based on the human function studied and the type of experimentation: Think + Speak Lab, Legs + Walking Lab, Arms + Hands Lab, Strength + Endurance Lab and Pediatric Lab. In these labs, patients will be integrated into the process of discovery and innovation.

“By fully integrating patients, doctors, researchers, and therapists in the same space, we will signal a shift in focus from the process of rehabilitation to delivering on the abilities our patients most want,” said Dr. Smith. “In the process, we will set new global standards for outcomes and recoveries that will profoundly affect patients, scientific discovery and the way healthcare is delivered.”

Sharing knowledge with the world

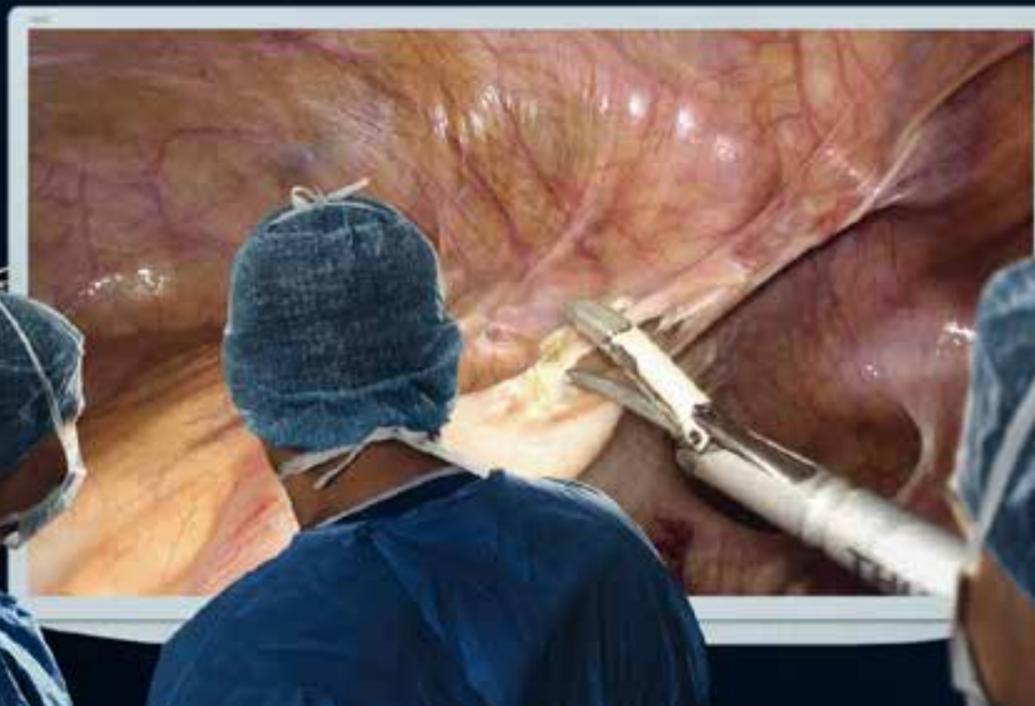
When the Shirley Ryan AbilityLab opens on March 25, 2017, it will share knowledge with the world. Dedicated to advancing the ability of healthcare



These services are ideal for hospitals seeking improved operating performance, clinical staff development and/or facility design support. For example, the AbilityLab Scholars Programs seek to export clinical and operating best practices in rehabilitation through continuing education programs that cater to thousands of physicians, nurses and allied health professionals, enabling them to advance in their field and deliver the highest level of care to patients. The Operational Scholars Program provides training to deepen participants' understanding of operational processes, metrics, and performance management. RIC's Strategic Facility Planning services help organizations make better informed decisions about the number of beds required across the post-acute continuum, alleviating pressure on acute care and potentially reducing the cost of facility development.

professionals by disseminating the latest scientific discoveries and clinical practices that are changing outcomes for patients, RIC provides robust advisory and staff training services to healthcare organizations across the globe. This portfolio of programs, led by a team of experts that works with individual hospitals to understand their needs and propose unique solutions, will continue to expand and grow with the Shirley Ryan AbilityLab.

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Study Investigates the Impact of Masimo Continuous SpHb[®] and PVi[®] on Anesthesia-related Mortality

ABSTRACT PRESENTED AT THE American Society of Anesthesiologists' (ASA) Annual Meeting in Chicago: In the study, researchers at Hôpital Dupuytren, part of the Centre Hospitalier Universitaire (CHU) of Limoges, France, investigated the clinical utility of noninvasive, continuous hemoglobin (SpHb[®]) and PVi[®] (a measure of the dynamic changes in perfusion index that occur during the respiratory cycle), two Masimo rainbow SET™ measurements. The researchers' goal was to determine, at the scale of a whole hospital, improvement in mortality and transfusion needs¹

In the prospective, single-center, observational study, Professor Nathalie Nathan and colleagues reviewed two sets of patients over two eleven-month periods, before (2013) and after (2014) implementation of a clinical algorithm to guide transfusion and fluid administration. Anesthesiologists, nurses, and residents were trained on the implementation of the clinical algorithm. Masimo Radical-7[®] Pulse CO-Oximeters[®] were installed in all operating rooms, recovery rooms, and intensive care units. The Radical-7s were connected to Masimo Patient SafetyNet™ for trend data collection. All surgical patients presenting to the hospital were accepted, with these exceptions: EMT, ophthalmology, odontology, radiology, neurosurgery, and patients less than 18 years of age.

The study included 18,867 patients (in the two groups), of whom 3450 underwent SpHb and PVi monitoring via Radical-7. The patients in the monitoring group received vascular filling with crystalloids or blood, according to the clinical algorithm. Demographic, anesthesia, surgical, and transfusion data were collected in electronic medical records. The researchers compared the percentage of patients in the monitored group who received transfusions within the first postoperative 48 hours to the percentage in the non-monitored group. They also compared mortality rates for each group at 30 days and 90 days following surgery.

Using the cox-proportional hazard model, the researchers found that the patients in the group monitored with SpHb and PVi had a 30% reduction in mortality at 30 days and a 25% reduction in mortality at 90 days. The proportion of patients receiving transfusions did not change



significantly between the two groups (7.9% in 2013, 8.5% in 2014, $p = 0.1323$), nor did the number of blood units transfused within 48 hours (3.4 ± 2.7 in 2013, 3.4 ± 2.0 in 2014, p less than 0.05). However, in non-cardiac surgery, patients were transfused sooner in the operative or recovery room (72.9% vs 56.1%, $p = 0.0002$).

The researchers concluded that "Monitoring SpHb and PVi integrated in a vascular filling algorithm allowed earlier transfusion and reduces mortality at a scale of a whole hospital with different clinical practices (and practitioners) and unselected patients."

"Access to continuous monitoring of Hb levels and fluid responsiveness has changed the way we address blood and fluid management. By

lowering inadequate fluid filling at the beginning of anesthesia, we are able to avoid diluting patients inadequately and this data helps us to guide precisely the amount of fluids or blood that must be given to patients on a case by case basis," stated Professor Nathan, Head of the Department of Anesthesiology at CHU Limoges. "Patients are transfused earlier when needed and hypovolemia is precisely treated with crystalloid. These two facts may explain the decrease in mortality at one and three months that we observed in this study. We strongly believe that surgeries of intermediate severity such as hip or knee replacement procedures as well as severe surgery will benefit from this technology. Because it is easy to use, quick to administer, provides continuous data, and does not harm the patient in any way, it is more applicable to common clinical practice."

Joe Kiani, Founder and CEO of Masimo, commented, "We have created technologies that have been shown to save babies' eyesight², screen for CCHD in newborns³, and reliably monitor patients in post-surgical wards^{4,5,6}, but this is the first time a study has shown that one of our technologies has such a big impact on mortality. Needless to say, we are excited and thank Dr. Nathan for her and her colleagues' research. We look forward to more studies like

this that investigate the impact of SpHb and PVi on other patients at other hospitals, and hope to see similar results."

SpHb monitoring may provide additional insight to the directional trend of hemoglobin between invasive blood samplings – when the SpHb trend is stable and the clinician may otherwise think hemoglobin is decreasing; when the SpHb trend is rising and the clinician may otherwise think hemoglobin is not rising fast enough; or when the SpHb trend is decreasing and the clinician may otherwise think hemoglobin is stable. SpHb monitoring, accompanied by laboratory diagnostic testing, may thus help clinicians make more timely and informed decisions, and has been shown to help clinicians provide more timely blood transfusions** and reduce blood transfusions in cases such as neurosurgery and orthopedic surgery.^{7,8}

*The use of the trademark SafetyNet is under license from University HealthSystem Consortium.

**Clinical decisions regarding red blood cell transfusions should be based on the clinician's judgment considering, among other factors: patient condition, continuous SpHb monitoring, and laboratory diagnostic tests using blood samples.

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Ascom Displays New Telligence Nurse Call Innovations

AT ARAB HEALTH, ASCOM, a global solutions provider focused on healthcare ICT and mobile workflow solutions, is showcasing their new Ascom Telligence system.

The latest version of the product adds even more enhancements to improve workflow efficiency and streamline communication and collaboration between care teams and patients.

Ahmad Al Jassim, Managing Director, MEA & Turkey, Growth markets, Ascom Wireless Solutions said, "Right now if you look at the hospitals and clinics, the flow of taking care of the patient is pretty much manual. The nurse ends up running from the desk station to the room and there is a lot of back and forth. We are now a major player in the region and we have around 50 sites that we have commissioned the system in. In the UAE, there are about half of them, others are in Saudi Arabia, Qatar and Jordan."

The new Telligence system, for example, makes it easier for the care team to communicate about patient service requests, which means response times to patients can be improved. The new capabilities provide much more visibility to the most common types of requests that are received from patients. These can be utilised to aid the hospital in making workflow improvements and coordinating the proper staffing levels.

David Foth, Global Product Manager, Nurse Call, highlighted that they are showcasing an integrated communications systems for the clinical teams at the hospital.

"This ties together our nurse call system, with our software integrated into hospital systems and delivers intelligent alerts to the clinical team and the staff members. Our goal is to get the right information to the right person at the right time. The way that we do that is by integrating the environment and providing the information to the clinical team in a mobile way

and get them information at their fingertips. The system has been getting considerable business from the MEA region," he added.

Francis Schmeer, Executive Vice President, Head of Strategy and Business Development, stressed that the Middle East is an extremely

important market for Ascom because of a couple of factors.

"One is given the sophisticated and world-leading capabilities of some of the best hospitals in Middle East and Africa and for us to be able to learn from the best and help them

become the best with technological adaptation by making workflows faster," said Schmeer. "It is also important for us as we get to participate in the economic growth that we see in the region. Although there has been a slump in 2016, we have grown in double digits."



Linking Health, Education and Research

Hamad Medical Corporation is the main provider of secondary and tertiary healthcare in the State of Qatar and is also one of the leading hospital providers in the Middle East.

Hamad aims to deliver the safest, most effective and most compassionate care to each and every one of their patients.

Hamad at Arab Health 2017

The Center for Patient Experience and Staff Engagement (CPSE) is a department within Hamad Medical Corporation that drives transformation to continuously improve patient care. To hear about more about the work of CPSE, please visit the stand (H6A15) at Arab Health 2017 exhibition or email us on CPSE@hamad.qa

Philips showcases

Intelligent data-driven connected health solutions to enhance diagnostics, improve patient care and help lower costs at Arab Health 2017

FULL SUITE OF INTEGRATED SOLUTIONS in minimally invasive image guided interventions, ultrasound, patient monitoring and clinical informatics help drive first-time right diagnosis and treatment in cardiology and more.

At this year's Congress, Philips will feature its fully integrated data-driven connected health technology solutions across the entire health continuum, from prevention and healthy living, to diagnosis and treatment and care at home. Visitors to the Philips Booth (S2 C10, SHEIKH SAEED HALL 2) at Arab Health will also experience advanced solutions in acute and chronic care management of cardiology. From intravascular imaging, ultrasound, healthcare IT and advanced software applications, to physiology image guided interventional technologies and Personal Health Solutions for better heart health, Philips is providing a customized integrated approach to deliver enhanced outcomes for clinicians and patients alike.

Cardiovascular disease is the number one cause of death around the world. Over 7 million people annually die of coronary heart disease alone. One in every five in the UAE lose their lives due to cardiovascular diseases. As a leading company, that combines clinical and personal health solutions across the health continuum, Philips offers unique integrated solutions to help healthcare professionals treat cardiovascular disease by encouraging healthy living and prevention, first-time-right diagnosis, more effective treatment, and enabling recovery and monitoring that is more effective at home.

Arjen Radder, Philips CEO Middle East and Turkey said, "At Philips we believe every heart is unique and every patient deserves an individual approach to health. Today, digital technologies are empowering people to take greater control of their health and lead healthier lives. Data and connected

solutions help deliver the relevant information at the right time, enabling clinicians to make more efficient and effective clinical decisions and deliver personalized care to each of their patients."

Connected care solutions on show during Arab Health 2017

Philips fully integrated cardiology solutions leverage deep clinical insights to help speed the path to treatment through early interventions, improved productivity and enhanced patient outcomes. Philips data-driven intelligent solutions offer actionable insights to help drive timely intervention, while advanced technology enables minimally invasive, more effective, personalized treatments so patients can go home earlier.

Prevention and Healthy Living

According to the Future Health Index, an international report commissioned by Philips, of the more than 25,000 patients surveyed, one-third (35%) have a cardiology related medical issue, with high blood pressure being the most common condition, present in 23% of survey respondents. The results of Future Health Index reinforce the need to move from reactive to proactive and preventative care management, especially within cardiology. To that end, Philips will highlight its personal health programs at the Arab Health Conference 2017. Philips' Personal Health Programs represent a new era in connected care by empowering consumers to improve their health through better habits, which enables them to measure, monitor, and manage all their vitals. To further promote adopting a healthy lifestyle, Philips will also display the revolutionary Philips Sonicare toothbrush; which delivers the best in class oral healthcare, and in turn is a key pillar in the prevention of heart related diseases. The WHO announced that death from heart disease is twice the average level in patients with severed periodontal disease.

Diagnosis and Treatment

At this year's Arab Health, Philips will demonstrate its advanced solutions delivering diagnostic confidence and enhanced decision-support through every step of the cardiology patient journey, highlighting the following:

- The Minicare system, a handheld testing platform that is able to show blood test results on the reader display 10 times faster than conventional methods, this helps speed cardiovascular disease diagnosis.

- HeartModelAI - premier Anatomical Intelligence Ultrasound (AIUS) application - part of a suite of tools and technologies available on Philips' EPIQ Ultrasound system that brings advanced automated quantification, 3D views, robust reproducibility and significant time-savings to echocardiography.

- InnoSight is a Philips diagnostic, compact ultrasound system that will be on display for the first time at Arab Health. InnoSight is designed to address customer's needs for an affordable, portable ultrasound system that combines simplicity with clinical versatility.

- IntelliSpace Cardiovascular - next generation image and information integrated software solution. Web-based echo reporting provides clinicians with improved remote access and convenience and vendor agnostic expanded WebAPI enables easier integration for comprehensive patient data and analytics

- Dynamic Coronary Roadmap: is a Philips exclusive technology that allows physicians to navigate in coronary arteries efficiently and with confidence by creating a dynamic, motion-compensated, real-time view of the coronary arteries. This new technology is seamlessly integrated into standard care workflow and is used in daily clinical practice. Philips is a global leader in Image Guided Therapy

and our image guided solutions helps physician Decide, Guide and Confirm the right therapy for each patient.

Arjen Radder continues: 'Healthcare is not just limited to a clinical setting inside the hospital (between the 4 walls of the hospital). In fact, if you want to lower costs and improve outcomes, it is important to focus on the home. That is where health mostly happens'.

Home care

At the booth, Philips Telehealth solutions for chronic heart failure patients will be showcased; enabling the patients to take better control of their own health with personal devices and an educational program rooted in behavioral science, as well as by helping providers remotely monitor and coordinate care across settings through the eCareCompanion solution. The eCareCompanion is an easy-to-use telehealth solution that patients access on a secure tablet at home to measure their vital signs to share with their care team.

Philips will also present innovations that help improve the sleep therapy experience for people with obstructive sleep apnea (OSA). OSA is commonly associated with cardiovascular diseases. The Dream Family offers innovative, comprehensive sleep therapy technology with sleek, patient-driven design, and personalized tools to keep your patients engaged and using therapy.

All the above solutions are connected through Philips HealthSuite, an open, secure, cloud-based platform that pulls together this vast amount of data produced by digital solutions, including third party devices, traditional medical data sources like electronic medical records, diagnostic and treatment information, and medical images and enables many of these solutions.

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SAUDI ARABIA SENDS RECORD NUMBERS TO ARAB HEALTH

SAUDI ARABIA'S VISION 2030 will take another step towards implementation this week, as the Kingdom's Ministry of Health will reach out to local and foreign investors for the first time with specific market opportunities at the Arab Health conference in Dubai.

The Saudi Arabian General Investment Authority (SAGIA) will join the Ministry of Health along with the largest delegation of Saudi organizations to be represented at Arab Health, reflecting a recognition of the event's growing status as the premier conference for the healthcare industry and its consumers.

The Ministry and SAGIA will host a series of workshops focusing on opportunities in primary care, laboratories, hospital commissioning, medical cities, radiology, long-term & home care, rehabilitation and pharmacies. Ministry of Health officials have said the concentration on these areas will be the first steps towards doubling the private sector's participation in the ownership

and management of hospitals, and catalyzing the localization of certain pharmaceuticals, vaccines and medical products.

The services and products examined at Arab Health, however, represent only the first wave of opportunities to enable the private sector to be a growing player in transforming healthcare delivery in the Kingdom.

"The Government plans to spend \$160 billion over the next ten years to meet rapidly growing healthcare demand in Saudi Arabia. Though the financial commitment the Kingdom will be making within areas covered at Arab Health is significant, this is just the surface of a deep pool of investments through which the private sector can stake their claim in the Saudi market", said Dr Khalid Al Shaibani, Deputy Minister of Planning and Health Economics at the Ministry of Health.

Adding to Dr Shaibani's comments, Managing Director of the Healthcare and Life Sciences Sector at SAGIA, Dr Basmah Al Buhairan said: "Given its size and its international prominence, Arab Health presents a strong platform for Saudi Arabia to share the opportunities there are in the Kingdom with the private sector."

"Our large delegation, however, not only reflects our interest in the event - but also the number and scale of the investment offerings there are in healthcare in Saudi Arabia"

Dr Basma continued. "Our presence represents the breadth of only the first wave of opportunities in the healthcare sector in Saudi Arabia. We look forward to engaging with the business community to help them explore the Kingdom's large and growing market."



MedTech Enables GCC Doctors to Review Records in 3 Seconds or Less

GCC DOCTORS WILL BE able to review patient medical records in 3 seconds or less, if healthcare providers adopt the latest technology in the next three years.

In the face of rising healthcare costs, GCC national transformation plans such as UAE Vision 2021 and Saudi Vision 2030 call for investment in the latest medical technology solutions such as digital patient records, mobile apps, and Big Data analytics.

Gartner predicts Middle East and North Africa medical IT spend has reached a record high of USD 3 billion. In general, GCC healthcare spending is set to nearly double from USD 40 billion in 2015 to USD 71 billion in 2020, according to Alpen Capital.

"GCC healthcare providers are facing a data explosion, often generating millions of medical images per week across patient records, doctor's notes, and lab results," said Nick Scholes, a keynote speaker at Arab Health conference ahead of his presentation on the topic of "Extracting Clinical Value from the Healthcare Data Lake".

"The next three years are vital for GCC healthcare providers to adopt Internet of Things solutions to optimize data. Using an Internet of Things platform,

clinicians can use a tablet to view patient data within three seconds, delivering better patient care at lower costs," added Nick Scholes, Data Analytics Consultant - Europe, Middle East, and Africa at digital healthcare enabler Hitachi Data Systems.

In his presentation, Nick Scholes also details how Hitachi Data Systems is leveraging global best practices in scalable healthcare data management solutions, as well as harnessing Hitachi Group's Social Innovation strategy. Specifically Pentaho's Data Integration and Analytics capabilities provides the platform to consolidate, analyze and visualize healthcare-related data to provide clinical and patient treatment improvements.



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'NEMISIS': The Pioneering Solution For Diabetic Foot Pathology

By Dr Ros Miller, Consultant Orthopaedic Foot And Ankle Surgeon, Harley Street Medical Area

GLOBALLY, DIABETES CONTINUES TO INCREASE, with nearly half a billion people affected worldwide and one person dying from it every six seconds. The pathology is an increasingly significant healthcare burden, with most countries spending between 5% and 20% of their total health expenditure on the disease.

In the Middle East, diabetes is a huge problem and one that is growing rapidly. The region has the highest global prevalence of the disease, with around 20% of the population affected. This number is expected to rise and countries such as Saudi Arabia, Qatar, Bahrain, Kuwait, and the United Arab Emirates will be significantly impacted.

This year for the first time, Harley Street Medical Area and UK Orthopaedic Foot and Ankle Surgeon Dr Ros Miller FRCS Tr & Orth will be talking about the global problem and her pioneering solutions at the Arab Health Congress. Dr Miller specialises in foot and ankle pathology and is internationally renowned in all foot and ankle conditions, from Minimally Invasive Surgery to Total Ankle Replacements. She is also a pioneer of NEMISIS (Neuropathic Minimally Invasive Surgeries), a pioneering solution for the treatment of diabetic foot pathology.

"Surgery for people with diabetic foot pathology is extremely complex and are some of the most challenging surgeries facing orthopedic foot and ankle surgeons," said Dr Miller.

"The Middle East has the highest global prevalence of diabetes and therefore greatest risk of diabetic foot ulceration, so I am delighted to be invited to Arab Health to share my experiences of diabetic foot screening and stratification, and to present on NEMISIS - the work that I have pioneered to improve quality of life and reduce the requirement for amputation".

Dr Miller explains that one of the worst side effects of diabetes is non-traumatic lower limb amputation, with diabetic foot ulcers preceding around 85% of amputations.

A patient with diabetes is up to 30 times more likely to have an amputation than the general population. The mortality rates for patients following a trans-tibial amputation can be as high as 70% at five years, which is worse than the mortality for prostate and breast cancer combined. It is estimated that around 50% of patients will die within 5 years.

There are also several pathologies that affect the feet of patients who have diabetes such as ulcers, infection and destruction of the deep tissues. The likelihood of a diabetic patient having an ulcer at some point in their lives is around 15%.

"As well as mortality, diabetes can also have a huge impact on patients' quality of life," added Dr Miller. "Repeated hospital visits for regular dressing and modification of footwear have a significant role in preventing amputation and reducing mortality, however this has a significant impact on the patients' and their families' quality of life."

"It also impacts on their work life, with many having to give up their jobs and this may have a knock-on effect on their social life and relationships as they are

unable to go out socially or go on holiday. Unsurprisingly, patients can develop low mood and self-esteem and in some cases, can result in depression."

Appropriate screening and risk stratification is essential and vital for educating patients and health care practitioners to identify 'at risk' patients who will benefit from a multidisciplinary team approach to management of their feet and crucial early surgical intervention when appropriate.

In the UK, Dr Miller has joined the multidisciplinary diabetic foot and ankle team in Scotland, where the Diabetic "Traffic Light" Risk Stratification and Screening already existed to ensure that diabetic patients have their risk of developing diabetic foot pathology risk assessed, stratified and managed accordingly to prevent the development of ulceration and subsequent amputation.

She said: "Traditionally when diabetic patients require surgery, this is usually when their life is at risk from overwhelming sepsis and amputation is the only option to save their life. Vascular surgeons do perform interventional surgery to improve the circulation to lower limbs when there is a blockage that can be opened or bypassed. Orthopaedic surgeons are called upon when the sepsis is not related to arterial disease, but instead, neuropathy."

Patients who have neuropathy are at increased risk of ulceration due to the change in shape of the foot due to Charcot Neuroarthropathy and as a result of the loss of their protective sensation.

Minimally Invasive Surgery (MIS)

Although minimally invasive foot surgery is becoming more common in Europe for conditions such as bunions, claw toes, hallux valgus and hammer toes, preventative and salvage diabetic foot surgery is extremely rare. Dr Miller is one of the few surgeons globally specialising in it. It is performed through tiny percutaneous skin incisions and done underneath the skin, thus protecting the soft tissues and reducing the risk of infection.

Dr Miller has taken this one step further by extending the use of MIS to the diabetic population who are at significant risk of complications following open surgery, due to decreased or sluggish blood supply and neuropathy.

Neuropathic Minimally Invasive Surgeries (NEMISIS) provides a permanent surgical solution, whilst reducing the risk from the significant complications associated with surgery for diabetic patients' foot pathology.

It can be applied to all aspects of Diabetic Foot Syndrome, including debridement of osteomyelitis, realignment of the toes to expedite the time to healing of ulcers and reduce recurrence. It can also be used for major deformity correction for patients who have developed deformity and risk of ulceration secondary to Charcot Neuroarthropathy.

Due to the reduction in risk of recurrence of ulceration, there is also a theoretical risk in reduction of mortality associated with Diabetic Foot Syndrome that has early intervention with NEMISIS.

Dr Miller added: "The initial results suggest NEMISIS may offer potentially better surgical



outcomes than traditional open surgical correction. There are complications associated with this type of surgery and postoperative management, but these can be anticipated, and close supervision and the combined care of a multi-disciplinary team, the major goals of prevention of re-ulceration, avoidance of major amputation, and death can be achieved."

Correct foot positions can also be maintained, despite subsequent removal of metalwork or fibrous non-union. The surgery is dependent on access to good multi-disciplinary clinical working to ensure the best outcomes and improve quality and duration of life of the diabetic patient with foot abnormality. NEMISIS may facilitate earlier stabilisation and therefore shorten the treatment period and reduce risk of amputation in this challenging patient group.

Harley Street Medical Area

Dr Miller practices at The London Orthopaedic Clinic based in the illustrious Harley Street Medical Area, London, UK, which has been famed for its medical excellence in treating complex and life threatening conditions for over 200 years. Behind its Georgian facade lays the latest in cutting edge medical technology and it is proud to offer unique and complex surgeries by renowned surgeons.

Under the careful stewardship of the Howard de Walden Estate, the landowner, the Harley Street Medical Area maintains a reputation for offering the very highest standards of medical care and expertise and is notable for the sheer variety and excellence of services on offer in such an attractive and accessible setting.

Dr Miller is the first and only female foot and ankle surgeon in the Harley Street Medical Area and is able to provide a female only pathway for any patients who wish, for the full range of foot pathology ranging from bunions and hammer toes, to more complex flat foot corrections, total ankle replacements and NEMISIS.

In her Harley Street practice, Dr Miller works with the top Diabetologists, Vascular Surgeons and Radiologists in their fields to ensure the best quality of care for her patients. The multidisciplinary



You can speak to Dr Miller at the Harley Street Medical Area stand which is located on the UK Pavilion in Zabeel Hall 1, Stand Z1F30 on Thursday 2nd of February 2017 at 10:30am.

management that patients require for management of their Diabetic Foot Syndrome is provided across the area with close liaison with podiatrists, orthotists and physiotherapists. She also provides management of Diabetic Foot Syndrome, from screening and prevention, through to complex deformity correction with NEMISIS.

Dr Miller also has a highly skilled Diabetic Foot Team of Vascular Surgeon, Diabetic Podiatrist and Diabetic Orthotist, who work with her to be able to provide bespoke international education programmes. The aim is to provide education for screening and prevention and the latest surgical and non-surgical techniques to manage Diabetic Foot Syndrome.

Dr Miller added: "I work with a highly skilled team that can provide local education to teams internationally about risk stratification and prevention, as well as up-to-date education for the latest surgical and non-surgical techniques to manage diabetic foot pathology. These can be tailored to specific regions' educational needs."



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Are You Too Old to Have Spinal Surgery? Probably Not

By Ali Bydon, Associate Professor Of Neurosurgery, Johns Hopkins Medicine, Baltimore, U.S.A.

WHEN IT COMES TO SPINAL surgery, old age doesn't necessarily mean worse outcomes. That is good news for thousands of older adults living with acute – sometimes disabling – lower back pain.

While it is true that patients over 65 have significantly higher rates of complications compared to younger patients, when outcomes of patients 65 and older are compared, age by itself is not a risk factor. That means an 83-year-old man with minimal medical problems can tolerate an operation much better than a 67-year-old man with heart disease.

In fact, a couple of 88-year-old patients of mine are doing great after big spinal surgeries.

Their example is supported by results of a study



I led to look into whether or not age was a factor in the complication rates of elderly patients after lumbar spine fusion. This type of surgery connects two or more vertebrae in the spine to effectively reduce pain, improve stability or correct a deformity.

However, lumbar spinal fusions are sometimes avoided in older patients due to fears of increased complication rates with advanced age.

Our study found that smoking, diabetes, heart disease and other chronic conditions pose greater risk for post-surgery complications than age.

Older adults tend to have more spinal issues because as we age, inflammation, arthritic illness and bone spurs can narrow the openings in the vertebrae. In addition, spinal discs that cushion the space between the vertebrae gradually dry out and flatten, and can put pressure on the spinal canal, causing pain.

Surgery is not the first option to treat lower back pain at any age. Mild cases may be successfully treated with nonsurgical approaches, such as exercise, lifestyle changes, hot and cold treatments, injections, or oral medication.

However, if a patient tries this approach and the pain does not subside after six to 12 months, it is appropriate to explore surgical options – even when the patient is 65 or older. As long as there are no other chronic conditions present, spinal surgery may be a sound solution for lower back pain at any age.

For more information visit hopkinsmedicine.org or visit Johns Hopkins Medicine's booth: hall 4 at stand D10.

SAINT ROMAIN TO PRESENT A COLORFUL CASE OF EASY-TO-USE TABLEWARE

REGULAR ATTENDEE AT THE Arab Health exhibition, Saint Romain, the French specialist in easy-to-use designer crockery for the medical sector, will be presenting its new product for 2017: the Easyeat case.

Made entirely in France and guaranteed free from bisphenol A, this full set of specially adapted place settings is ideal for the elderly and those with disabilities. It will help users rediscover the pleasure of mealtimes and regain their independence.

Contents of the case:

- 23 cm non-slip plate: with four feet, designed with a slope to collect food in the deepest part of the plate, making it easier to eat. With rectangular edges to prevent spills.
- Cutlery: easy-to-use, light and flexible knife, fork and spoon to avoid any risk of injury, designed to be easy to grip
- 45 cl bowl with lid
- 16 cl glass: small in diameter for an easier grip and to avoid any risk of injury
- two-handle grip
- non-slip support: helps prevent yogurts, glasses etc. from being knocked over

Standard plates and bowls are available in a range of sizes. They use warm colors to make them easy to locate on the table and their lightness makes them easier to grip and aids independent eating. Unbreakable, they are safe for use in industrial microwaves and dishwashers.

Saint Romain operates throughout the world. It will be exhibiting in the France Pavilion at Arab Health, Dubai Zabeel2, Stand E53



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AGU Establishes

“Clinical Skills and Simulation Center” to enhance the quality of education and scientific research

DR. KHALID ABDUL RAHMAN AL OHALI, President of the Arabian Gulf University, signed a joint cooperation agreement with the Group Chief Executive Officer of Leader Healthcare, Mr. Sukhdeep Sachdev. The agreement is for successfully establishing the clinical skills and simulation center at the Faculty of Medicine and Medical Science University on an area of 400 square meters. Through this agreement, Leader Healthcare will provide the simulator equipment and educational simulation solutions as task trainers, high fidelity patient simulators and the right training tools needed for practical training and innovative simulation learning. This will help to launch the training center within the current academic year.



Dr. Al Ohaly, the president of the university said during signing this agreement that, “ This partnership with Leader Healthcare Group aims to provide the Clinical Skills and Simulation Center with all the devices and medical simulators which will serve the global hands-on training and reaching goals with the latest medical training methods. “ He pointed out that the center will be open for training to all medical students in various medical specialties for the upcoming generation of the Gulf Cooperation Council in the Arab States of the Gulf, saying that establishment of the clinical skills and simulation center is only a preliminary step to the establishment of a medical training center. It is going to be an innovative and sophisticated work to strengthen clinical skills to medical students. This training center will expand to achieve the larger goal and the ultimate establishment of the project in King Medical City that is the high world-class city to be a beacon of educational pioneer, and will offer a sophisticated landmark health treatment services for the citizens of the Kingdom of Bahrain and their brothers in the Gulf Cooperation Council (GCC).

The President confirmed that the faculty of medicine and the medical sciences is aware of the importance of keeping pace with digital technology and modern technical innovations that inspire new doctors and provide them with the applications of technical tools which will help in advanced diagnosis and treatment of diseases accurately.

Therefore, the simulation center will allow the medical students with training to enhance practical skills in diagnosing diseases, monitoring symptoms and prescribing appropriate medications through digitally and electronically programmed simulators, so that those simulators will interact with medical interventions conducted by the students through

changing scenarios, symptoms and data as per the emerging treatments prescribed by the students.

The CEO of Leader Healthcare, Mr. Sukhdeep Sachdev welcomed the cooperation with the Arabian Gulf University, which is one of the most important academic edifices in the GCC countries. He praised the leading role in the graduation of generations and contribution in awareness of evolution of the modern health system in the GCC countries. He praised the achievements and successes of the university through its long career in both the medical, academic fields, scientific research and what they have from a privileged position among the various Arab and international universities, pointing out that the Leader Healthcare through this cooperation will contribute in building an advanced clinical skills and simulation center. This will allow medical students to train in advanced medical scenarios include examining the patient in various medical conditions, to diagnose and describe various stages of treatments.

The Leader Healthcare team has planned out a vision along with the team of Arabian Gulf University to provide the first stages of the training services dedicated to the clinical stage, and then the pre-clinical stage, in order to set up advanced and integrate the training programs across all the Gulf states.

Not all types of medical scenarios can one come across in the hospital, thus, the clinical skills and simulation center is a modern center to train students on learning about many such real lifelike cases. Through the help of audiovisual simulation solutions, students will be enabled to re-examine their procedure multiple times until they reach perfection stage. Through these different techniques it will qualify the graduates of the College of Medicine by empowering them to better deal with various medical conditions.

The clinical skills and simulation center designed will have the international accreditation which will contribute to raising the level of medical competence of the graduates of the Arabian Gulf University.

This partnership and innovation will add a new achievement to the College of Medicine in the university history. The team is trying to being keep the pace with current and future practical skills requirements for medical students of the upcoming generation of the Gulf cooperation Council (GCC), so that the finest doctors and consultants will train medical students in the best environment.

This year, the university formed a committee for simulation and medical simulation training skills, that consists of a group of faculty members at the Faculty of Medicine and Medical Science. The committee is as follows: Dr. Mona Arekat, Vice Dean Clinical Affairs, Dr. Tayseer Said Garadah, Chairman of Internal Medicine Department, Dr. Ahmad Mohamed Al Ansari, Consultant Medical Education in the Bahrain Defense Force Hospital . The entire team has worked over the past months to prepare the simulation clinical center plan and held a series of meetings with simulation experts, and prepared the action plan for the first phase of the project with the Leader Healthcare team.



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The integrated Operating Room, for a more efficient patient care environment

By Peter Kyriakos, Head of Marketing, Sony Professional Solutions MEA

WHEN IT COMES TO DIAGNOSIS, surgery, or post-operative care, medical technologies have vastly progressed in the last few decades as a result of medical research pushing the margins of medicine and its practices, and consequently its tools. The medical technology industry has also shifted with the arrival of computerization, and witnessed furthermore a recent inflow of innovations particularly from the consumer electronic industry, benefitting medical efficiency and enhancing patient care outcomes.

A lot of the technology expertise and knowledge applied in other specialized B2C and B2B markets have in fact been transferred to the medical sector. An example of this is Sony's broadcast HD, 3D, OLED and 4K technologies, which have been applied to medical monitors and remote cameras across all clinical areas that could benefit from the effective use of A/V technology, such as general surgery, radiology, endoscopy, ophthalmology, neurology, urology. With 4K resolution allowing to see four times the quality of Full HD definition (four times the amount of pixels in Full HD), it means clinicians can get a better view of the human anatomy and blood vessels, with a greater level of detail and clarity.

When conducting an endoscopic surgery or a minimally invasive microsurgical procedure, on the eyes or the brain, using 4K cameras, monitors and recorders, the surgeon is able to view and review more clinically relevant information, and therefore is more able to make informed decisions. For instance, in a Mohs micrographic surgery (procedure used to treat skin cancers often on the head and neck), the surgeon needs to extract a tissue layer, where the cancerous cells are. 4K resolution allows him or her to see through the magnifying zoom the details between the epidermis and the dermis,

and the dermis and the subcutaneous fat, and thus allow him to map out the location accurately to remove the tumor and spare normal skin tissue as much as possible.

However, it's not just about the camera, monitors and recorder working alone in the Operating Room, but about the entire medical workflow and how it is interconnected. It's about having an integrated Operating Room, where clinicians can capture, share, and view images (recorded during the surgery) in a seamless and efficient way. Healthcare providers are in fact increasingly looking for turnkey end-to-end solutions, with compatibility between visualization technology and other imaging devices.

Some hospitals and clinical facilities have integrated Operating Rooms with robotic and pan-tilt-zoom cameras, which serve for training and simulation purposes, and most importantly are placed high above the patient, so they are out of the surgeon's way. This way, surgeons may be able to conduct surgeries seamlessly, without viewing limitations (without hands and heads in the camera frame), while the rest of the staff in the Operating Room can perfectly follow the procedure on the high resolution monitor, away from the surgeon's hands.

The workflow goes far beyond the Operating Room: large screen displays, business projectors and video conferencing systems are used in hospital conference rooms and lecture halls, so all staff can view live surgical content, and access an online video on-demand platform whenever they want. IP "live" technologies, such as Sony's NUCLeUS, which is a Video-over-IP platform, deliver full IP communication. This technology converts and transmits, via the hospital network, the images recorded from the Operating Room, from endoscopes, boom arm



cameras and surgical microscopes, in near-real time to any monitor, whether it is in a consulting room or even a classroom in a healthcare campus. Being able to show almost live surgical content to medical school students means that for the first time, they are able to observe and learn in such great detail and clarity, in such a seamless way.

It is becoming clearer that for seamless and improved efficiency in medical operations, even outside the Operating Room, healthcare providers will have to look at smart and flexible workflow solutions, which integrate the facilities within their institutions. For instance, HD monitors and remote cameras can allow caregivers to monitor patients remotely, centralizing patient monitoring from the nurses' station, or allow doctors to confer with

other specialists on complicated cases, regardless of where they are located. These technologies can help a healthcare organization, whether in the Operating Room, the classroom, the staff conference room, or everywhere in between, to improve medical or administrative workflow.

The integration of the theater equipment in the Operating Room is key to facilitating minimally invasive surgeries or any advanced procedure, requiring the best imaging technology with the most efficient streamlined workflows. The future of medical technologies for the Operating Room and the wider workflow will lie in continuing to find better solutions that help advance surgery precision, increasingly support the decision-making process of a surgeon, as well as help prevent medical errors.

Harnessing VR, Apps and Gamification to Better Treat Asthma

DESPITE THE FACT THAT THE asthma treatments currently available in the Gulf are "successful at treating asthma" and that improved education of patients coupled with advancement in the medical field have both "significantly contributed to increasing public awareness, which has led to better outcomes." Dr. Bassam Mahboub, the Chief Innovation Officer at Dubai Health Authority has called for more innovations in treatment and management of the condition, which affects between 8 and 10% of the Gulf population.

A lack of understanding of the nature of their disease, and the fact that that "even though they might not have symptoms, there might still be inflammation inside wind pipes which can be reduced through the administration of inhaled drugs containing steroids." Alongside frequent struggles with "inhaler technique" says Prof. Mohamed Saleh Al-Hajjaj, the Vice-Dean of the College of Medicine, and a Consultant and Professor at the University of Sharjah combine to prevent patients from effectively managing their asthma.

Chris Chen, Mundipharma's Associate Director of Digital Strategy for Asia Pacific, Latin America and MENA explains how the company is attempting to meet the challenge of better patient engagement. Citing their testing of "exciting new technologies in the ongoing journey to help doctors and patients manage asthma more effectively."

Virtual reality has been, he continues, a great success in training both healthcare professionals and patients. Building on that success, the company has expanded to mobile applications and is planning

to launch a "full room" virtual reality experience. In addition, Chen describes augmented reality as having "huge potential in healthcare education". As a result, he explains the company will be launching an application aimed at helping patients learn to use their inhalers more effectively.

The challenge, as ever, with applications such as these, especially those aimed at patients, is how to ensure they are 'sticky'. Key to that, says Chen, is ensuring it solves a specific problem. "Once this has been achieved, there are a number of things developers can look at to increase stickiness. The first is to ensure that the app is self-explanatory with no learning curve. This is especially critical for medical apps which should be held to the same standards as any consumer apps." Re-engaging users is also important for long term retention and usage. Companies should, says Chen, focus on getting the "right message, to the right person at the right time."

Given the effect that environmental irritants and allergens such as dust, smoke, strong perfumes, and paints can have on asthma patients, Chen explains that their app 'breathrite' "will use behavioural profile algorithms to serve relevant content and notifications to specific individuals." Gamification he says, can also work very well, but more importantly, Chen believes that "mastery is the real key to ensuring true stickiness. If a user can see and track their increasing mastery of a game or in this case, the control of their asthma symptoms or correct use of their inhaler, with real time feedback and longitudinal tracking, it can become extremely motivating and empowering driving long term engagement with the app."



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