



World Health Summit

Regional Meeting - Asia | Singapore 2013







Tuesday, April 9th, 2013 I Program



Program | Wednesday, April 10th, 2013

19.00

	Grand Ballroom	Millenia 1	Millenia 2	Millenia 3		
8.00						
	Symposium	Symposium	Symposium	Symposium		
9.00	A Holistic Approach to Public Health: Man, Nature and the Environment	Non-Communicable Diseases - Stemming the Tide of Chronic Diseases in Asia: The Urgent Need for Comprehensive Preventive Efforts	Improving the Medicines Situation in Asian Health Systems	The Challenge of Universal Health Coverage: Lessons from Asia		
10.30			Page 66			
8.30 - 10.30			Panel Discussion			
10.00			Improving the Medicines Situation in Asian Health Systems			
	Page 64	Page 65	Page 70	Page 68		
	Coffee Break					
	Keynote Lectures					
11.00 11.45	Keynote Lectures An Asian Contribution to Health Improvement - Thailand's Universal Health Coverage Initiative (Suwit Wibulpolprasert) Grand Ballroom · Page 72 The Coming Plague Revisited (Laurie Garrett)					
10.4						
		N				
12.00	Grand Ballroom · Page 73	Grand Ballroom ⋅ Page 73 The M8 Alliance Statement				
	Break					
13.15	Lunch Session	Lunch Session	Lunch Session			
13.00	Economic Evaluation and Health Policymaking: Challenges and Opportunities Page 74	NIHA Symposium Page 75	IAMP Young Physician Leaders Program Page 76			
		Break				
		Keynote Lectures				
14.00 14.45	Keynote Lectures Financing Health Care in Asia (William Hsiao) Grand Ballroom · Page 77 Motivating Changes in Health Behaviours (K. Srinath Reddy)					
13.4						
15.00	Tea Break					
15.00	Symposium	Symposium	Symposium	Symposium		
	Infectious Diseases, Endemic Infections, Anti-Microbial Infections	Mental Health for the Population: Identifying Barriers and Creating	External Health Aid and Sustainable Development - New Kids on the Block	Community-Based Health Care Design for the Elderly in Asia		
16.00		nnovative Solutions to Address the reatment Gap	Page 82	Page 83		
16.00			Symposium	Symposium		
			Innovative Financing for Health - Opportunities in Asia	The Role of Medical Academia in Prevention and Preparedness for the Health Effects of Major Disasters		
17.00	Page 79	Page 80	Page 84	Page 85		
18.00						

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Regional Meeting – Asia Singapore 2013

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Summit Venue

The Ritz-Carlton, Millenia Singapore 7 Raffles Avenue Singapore 039799

John Eu-Li Wong



Detley Ganten

Dear Friends, Dear Colleagues,

It is our great privilege to warmly welcome you to the World Health Summit, Regional Meeting – Asia Singapore 2013. For the first time, the World Health Summit will meet formally outside of Berlin, Germany, and we are delighted that the M8 Alliance of Academic Health Centers, Universities and National Academies has chosen Singapore as the site to focus on Asia.

Key opinion leaders from academia, politics, industry, civil society and media will share their expertise on possible solutions to health challenges worldwide. For two days we will focus on the theme "Health for Sustainable Development in Asia", as the region grapples with both opportunities as well as challenges.

We are honoured to have Singapore's Prime Minister, Mr. Lee Hsien Loong, deliver the Opening Address, as well as the presence of several Cabinet Ministers and their delegations from across Asia. Together with distinguished representatives from the World Health Organization, academia, industry, civil society and media, we look forward to fruitful discussion and exchange of ideas. Other highlights include the Asian Ministers Panel Discussion, the Industry Leaders' Roundtable, the Keynote Lectures, and all the Sessions for which we greatly encourage interaction between speakers and audience, both within and outside of the meeting rooms.

We plan to issue a M8 Statement on Day 2, summarizing key health care issues affecting the region, representing the considered opinions of participating institutions and health care leaders, and providing integrated action points for delegates to bring home. Through sharing of information, innovation, and best practices in health care, Asia can invest and reap from its most important resource – its people.

In our truly globalized world, chronic non-communicable diseases and infectious diseases transcend all borders. Therefore we wish all delegates a stimulating and enriching Summit, where we all can learn from each other and understand that we share a destiny we have to approach together.

With warmest regards,

Prof. JOHN EU-LI WONG
President, World Health Summit 2013
Co-Chairman, WHSRMA 2013 Organizing Committee
Vice Provost (Academic Medicine),
National University of Singapore

Prof. Dr. DETLEV GANTEN
Founding President, World Health Summit, Chairman,
Foundation Board, Charité Foundation,
Charité - Universitätsmedizin Berlin





Lee Hsien Loong

Mr. Lee Hsien Loong Prime Minister of Singapore

Welcome to Singapore! We are honored to host the inaugural World Health Summit in Asia.

Asia is developing rapidly. Urbanization and economic growth are lifting millions out of poverty and improving their quality of life. At the same time, new challenges are emerging, especially in health care. Policy makers must keep health care affordable and accessible, address the needs of aging societies, combat lifestyle diseases like obesity, and prepare for emerging infectious diseases. We all face these challenges in some form, despite our diverse circumstances.

The inaugural World Health Summit, Regional Meeting – Asia is therefore a valuable initiative. Policy-makers, academics and practitioners from many countries can discuss these issues, learn from one another and explore new partnerships and solutions.

I wish all the participants a fruitful Conference, and an enjoyable stay in Singapore!

Mr. Gan Kim Yong Minister for Health, Singapore

Health and health care will continue to dominate discussions on the sustainable growth and development of all nations. Asia, as home to more than half the human race, has a growing place in this discussion, due to changing demographics, the need to balance growth with sustainability and, unfortunately, the emergence of new and threatening diseases such as SARS.

Good public health policies that result in better health for our people have helped many countries in Asia lay strong foundations for growth and prosperity. We need to continue to invest in sound health policies to meet future challenges.

Therefore, I am happy that the World Health Summit, Regional Meeting – Asia will foster focused discussion on these issues.

It is significant that the World Health Summit's first regional meeting is taking place in Asia. This unique gathering among key players in health care – academia, health care experts, business leaders, civil society and governments – allow us to pool ideas, knowledge and expertise for the benefit of our citizens. I look forward to the outcome of the discussions and exchange of ideas during this landmark conference. I wish the organizers and all participants a successful and productive meeting.



Gan Kim Yong

Participants

Top level researchers and members of the scientific community, high profile political decision makers, executives and representatives from the health care system, leaders of the health related industry and technology sector, representatives of civil society and foundations, students and young professionals from all health related fields will be a part of the World Health Summit, Regional Meeting – Asia Singapore 2013.

Key Facts

Date

April 8th - 10th, 2013

Guest-of-Honor

Mr. Lee Hsien Loong Prime Minister of Singapore

Venue

The Ritz-Carlton, Millenia Singapore 7 Raffles Avenue, Singapore 039799



The World Health Summit Profile

The World Health Summit is the annual conference of the "M8 Alliance of Academic Health Centers, Universities and National Academies". It is one of the world's foremost gatherings of leaders from academia, politics, industry and civil society to develop joint strategies and take action to address key challenges in medical research, global health and health

care delivery with the aim of shaping the political, academic and social agendas. After a highly successful inaugural conference in 2009, on the occasion of the 300th year anniversary of the Charité - Universitätsmedizin Berlin, WHS is now being held annually.

WHSRMA 2013 Profile

Asia is home to over half the world's population. The challenges, especially for health care and health-systems will include megacities, environmental hazards and fast growing and aging societies. Asia's challenges need Asian solutions and international cooperation at scientific, economic and political levels.

Hence we have the timely introduction of the World Health Summit, Regional Meeting - Asia (WHSRMA), held April 8th - 10th in 2013. For the first time, the Summit takes place outside of Berlin, focusing on the Asian region, with Singapore as host city. The Regional Meeting continues the aims of the World Health Summit to improve health care and health-systems and strengthen the links between research, academic medicine and decision makers across all health care sectors, including government and industry, with a focus on Asia and its specific needs.

Themed Health for Sustainable Development in Asia, the topics that will be discussed at the Regional Meeting include:

- The Impact of Health on Asian Economies
- Innovations in Health in Asia
- · Financing Health Care in Asia
- · Emerging Health Threats in Asia

WHSRMA 2013 is supported by Singapore's Ministry of Health and jointly organized by the National University of Singapore (NUS), MOH Holdings (MOHH) and the M8 Alliance.

Vision

Health is a Human Right (UN Declaration 1948). Health and personal wellbeing are our societies' most important values. However, compared to the immense rate of progress in the medical sciences, we are lagging far behind in the global delivery of public health and health care.

At present, more than half of the world's population is not receiving proper medical care. At the same time, demographic change in all parts of the world results in a rapidly rising burden of chronic diseases.

We must clearly define our responsibilities and investments for the development of medicine to increase knowledge transfer from bench to bedsides. We can make a difference. It is our responsibility to ensure today's science becomes tomorrow's agenda.

Apart from fine-tuned coordination of initiatives between academia and governments, the civil society and the private sector, stable private-public partnerships, investments in health can also accomplish our key objectives to improve health in our world.

Purpose

By initiating the WHS as one of the foremost international gatherings of its kind in health care, the M8 Alliance established the World Health Summit as a sustainable high-level forum. Research, education and clinical care are needed to develop answers to health challenges in an increasingly complex environment of globalisation and international interdependency.

Bringing together all the stakeholders involved in health research and health care presents an unprecedented opportunity for constructive interactive partnerships. There is an urgent need for a cross-sectoral approach and multidisciplinary research to unleash the power and creativity of academic medicine and to involve societies, governments and industries.

By the close collaboration of analysis of today's science and extensively sharing international experience and debate, we will be able to structure tomorrow's agenda.

Focus Topics

The four sub-themes of the Summit are chosen for their currency and relevancy to the Asian region.

1. The Impact of Health on Asian Economies

Asia is experiencing the rapid changes of globalization and modernization. Consequently, health and disease patterns also change over time in Asia's societies. Asian societies are undergoing a "life cycle" in which infectious diseases and nutritional deficiencies dominate rural societies, whereas in the 'grown-up' and 'urbanized' societies, non-communicable diseases have become more prevalent. Health and health care considerations need to be part of all government policies, but how can this be achieved? How do we develop and prioritize sustainable strategies to promote health in response to this rapid pace of change?

Modernization has also resulted in migration of workers, thus perpetuating and exacerbating inequity in health care systems. How do we urge governments and international organizations to develop policies in ameliorating brain drain? How will these policies ensure a sustainable health workforce?

A relatively new form of medical tourism, where patients travel out of their home country to private facilities catering to international patients, is growing quickly. Because of lower costs and availability of good quality care, medical tourism has the potential of generating economic benefits for some nations in Asia. The range of social and economic consequences and benefits of medical tourism in Asia have to be carefully considered and will be discussed at this Summit.

2. Innovations in Health in Asia

Advances in life sciences as well as in information and communication technologies have significant impact on the way people live, work, think and behave in Asia. Clinicians should be encouraged to actively incorporate genomics, epigenomics, bioinformatics and point of care diagnostics into their practice. Just as importantly, health care providers and policy makers should leverage on these technologies to share information and streamline processes, so that patients can receive the best possible access to health care.

In tandem with rapid advances in life sciences, health care costs are rising in Asia. In addition, sometimes poor regulatory frameworks for drugs and medical devices, as well as lack of harmonization, are inhibiting rapid development of needed medicines and devices in Asia. Taking these into consideration, presentations will be made at this Summit to discuss how (business) innovations should be made affordable, accessible and focus on disadvantaged and vulnerable groups.

Also at the Summit, we will discuss how to promote and encourage out-of-the-box frugal innovations, social entrepreneurship, and innovative philanthropy to make health care available to everyone. Strategies to urge governments to improve national regulatory capacity and work towards regional harmonization of regulatory processes will also be covered.

3. Financing Health Care in Asia

Systems of health care coverage are quite diverse in Asia. For instance, Japan, Korea, Taiwan, and Thailand provide health care coverage for the entire population. However, in other countries, individuals from low-income groups face great barriers to health care. Often, those who are financially well-off have greater access to medical care, whereas the poor cannot afford to pay and even give up treatment. How do we make health care accessible to everyone?

Given the potential destabilizing effect of weak health systems to the region, how do we advocate wealthier nations in the region to utilize their external development aid to help poorer countries strengthen their health care delivery systems? While market failures continue to exist in both availability and access to needed medicines, how can we urge the private and public sectors in both developed and developing countries to work together to make medicines more affordable and accessible to those in greatest need and with the least power to pay?

4. Emerging Health Threats in Asia

Non-communicable diseases (NCDs) are on the rise in Asia. Malnutrition and infection in early life can increase the risk of such NCDs in adulthood. Maternal and early childhood health and nutrition are intricately linked to the long term health of individuals. Investment in maternal and early child health should be undertaken with the view of improving the long term well-being of nations. NCDs are also exacerbated by changing lifestyles secondary to globalization and urbanization, as well as tobacco use and sedentary lifestyles. The aging population cannot be ignored. What are the challenges to combat NCDs in Asia? Can we encourage a whole government-whole population approach to fight NCDs in Asia?

Rapid urbanization can result in socio-economic changes that will make mental health issues more pressing. Mental disorders increase the risk for NCDs and injuries, whereas many health conditions increase the risk for mental disorders. How can we urge governments to be proactive in responding to these and other health threats?

The risks of new diseases such as SARS, bird flu and swine flu are increased by globalization and by creating "hot spots" in the environment that bring humans, livestock and wildlife into contact. There is also the continued threat of emerging infectious diseases caused by deforestation and the resulting increased contact between humans and wild animals. What can the government and society do to combat these to ensure continued biosecurity?

International Advisory Panel

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Program Structure

The World Health Summit, Regional Meeting - Asia Singapore 2013 has plenary sessions to present selected topics of interest to a broad audience and a variety of breakout sessions to allow for deeper discussions on highlighted themes.

Keynote Lectures with high profile speakers will focus on topics of high importance.

Symposia are the main discussion platforms of the World Health Summit, Regional Meeting - Asia Singapore 2013. They will start with kick-off presentations held by prominent experts followed by a solution-oriented discussion involving all participants of the Symposia.

Partner/Industry Symposia are sessions organized in different formats to foster discussions on selected topics. They are organized by stakeholders and partners as part of the Summit.

Panel Discussions will focus on topics of potentially controversial relevance. Panel Discussions start with a brief presentation and then turn into an exchange of different viewpoints. The aim of the session is to draft possible answers to strategic questions of health care and health research.



WELCOME TO SINGAPORE

WELCOME TO THE WORLD HEALTH SUMMIT

REGIONAL MEETING - ASIA | SINGAPORE 2013

Understanding Local and International Health Care Policy



Host: Medical Society, Yong Loo Lin School of Medicine, National University of Singapore

Co-Hosts: International Federation of Medical Students' Association: Association: Association International

Date: April 6th, 2013, 09.00 – 16.30

Location: Auditorium, Clinical Research Centre, MD11, Yong Loo Lin School of Medicine,

National University of Singapore, 10 Medical Drive, Singapore 117597



Health | National University of Singapore | Professor of Public Health London School of Hygiene & Tropical

Medicine | Singapore

Vernon Lee | Head | Biodefence Center | Singapore Armed Forces | Singapore

Adjunct Assistant Professor | Yong Loo Lin School of Medicine | National University of Singapore

Visiting Consultant | Ministry of Health | Singapore

Present Medical Epidemiologist | World Health Organization | Indonesia Office in 2007

Philippe Guibert | Regional Medical Director | Consulting Services, South & South East Asia at International

SOS | Singapore



International and local health care policies play an important role in building the needed infrastructure for sustainable development to take place, which is what this meeting will focus on. Speakers from well established and prestigious organizations, for example the World Health Organization, will be invited. This gives participants an opportunity to bounce ideas off them and hear their views about health care policy.

Designed to be an interactive session, the workshops will constantly keep you on your toes and hopefully give you greater insights into health care policy decision making. Student projects about health care policy will be presented as well, and in the social program a tour around the Yong Loo Lin School of Medicine!

This workshop is designed for anyone and everyone - ranging from students to doctors to allied health professionals.

Program Details:

9.00 - 10.30

Workshop 1: Role of Public Health in Controlling Old and New Infectious Diseases in Asian Countries

Richard Coker | Visiting Professor | Head Infectious Diseases Programme | Saw Swee Hock School of Public Health | National University of Singapore | Professor of Public Health London School of Hygiene & Tropical

Medicine | Singapore

10.30 - 10.45 Morning Tea

10.45 - 12.00

Workshop 2: Key Principles of Health Care Financing

Philippe Guibert | Regional Medical Director | Consulting Services, South & South East Asia at International

SOS | Singapore

12.00 - 13.30 Lunch with Research Presentations

13.30 - 14.30

Workshop 3: International Health Policies, Management and Strategies

Vernon Lee | Head | Biodefence Center | Singapore Armed Forces | Singapore

Adjunct Assistant Professor | Yong Loo Lin School of Medicine | National University of Singapore

Visiting Consultant | Ministry of Health | Singapore

Present Medical Epidemiologist | World Health Organization | Indonesia Office in 2007

14.30 - 14.45 Afternoon Tea

14.45 – 16.30 School tour around the Yong Loo Lin School of Medicine by our medical students

1 day social programme for international delegates on 7th April!

Satellite Meetings

Infectious Diseases in Asia



Tan Tock Seng

Host:

STOP Dengue Translational Clinical Research Programme, Institute of Infectious Disease and Epidemiology,

Tan Tock Seng Hospital

Date:

April 8th, 2013, 08,30 - 15,00

Location:

Theatrette (Level 1), Tan Tock Seng Hospital, 11 Jalan Tan Tock Seng, Singapore 308433

Moderator: David Lye | Senior Consultant | Tan Tock Seng Hospital | Singapore

Speakers:

David Heymann | London School of Hygiene & Tropical Medicine | United Kingdom

Paul Anantharajah Tambyah | National University Hospital | Singapore

Hsu Li Yang | National University Hospital | Singapore

Suwit Wibulpolprasert | Disease Control | Ministry of Public Health | Thailand

Richard Coker | Saw Swee Hock School of Public Health | National University of Singapore | Singapore

Ng Lee Ching | Environmental Health Institute | National Environmental Agency | Singapore

Simon Hay | Oxford University Clinical Research Unit | United Kingdom

The burden of infectious diseases has increased dramatically due to globalization and health care practices, among other factors. The recent surge in influenza and dengue makes management and resource allocation challenging and likely requires a multi-disciplinary approach.

This workshop has been specially designed for local and overseas infectious disease practitioners, researchers, policy analysts, policy makers, and all health care administrators. It will provide an open platform to discuss pressing issues on emerging and persistent infectious diseases. Presentations from international experts will focus on health policy and strategies to confront these issues, and a round table discussion will facilitate active participation from all participants.

Improving Mental Health of the Population – An Asian Perspective

Host: Institute of Mental Health

Date: April 8th, 2013, 09.30 – 16.00

Location: Institute of Mental Health, Lecture Hall, 10 Buangkok View, Singapore 539747

Speakers: Parminder Raina | Raymond and Margaret Labarge Chair in Optimal Aging | Department of Clinical Epidemiology

& Biostatistics | Faculty of Health Sciences | McMaster University, Hamilton | Ontario | Canada

Chong Siow Ann | Vice Chairman | Medical Board (Research) | Senior Consultant Psychiatrist | Institute of

Mental Health | Singapore

Anthony Francis Jorm | Professorial Fellow | ORYGEN Research Centre | University of Melbourne | Australia Alan Ong | Deputy Director | Community Mental Health Branch | Primary and Community Care Division |

Ministry of Health | Singapore

Mental disorders are among the most common causes of disability. Poor mental health impedes an individual's capacity to realize their potential, work productively, and make a contribution to their community, while positive mental health is linked to a range of beneficial outcomes and is fundamental to coping with adversity.

To improve mental health and lessen the burden of disease, mental health services must be provided in ways which are proactive and can effectively impact on relevant factors at both population and individual levels.

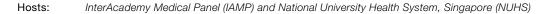
This one-day symposium is focused on innovative and multidisciplinary approaches to improving mental health. Participants will learn about the state of mental health and approaches to improve it from leading mental health professionals and researchers. Break-out sessions focusing on specific areas such as child and geriatric mental health and cost of mental health delivery will be discussed in small groups using case-studies. The venue of the workshop – Singapore's only tertiary psychiatric hospital – offers participants an opportunity to see first-hand, tertiary facilities to support mental health recovery.



Satellite Meetings

IAMP Young Physician Leaders Program 2013





National University Heart Centre, Singapore (NUHCS) Co-Host:



Location: Learning Room 03-05, Level 3, MD6, Centre for Translational Medicine (CeTM), NUS Yong Loo Lin School of

Medicine, 14 Medical Drive, National University of Singapore, Singapore 117599

Speaker: Looi Lai-Meng | InterAcademy Medical Panel



The IAMP Young Physician Leaders Program is a satellite meeting which will take place from April 8th - 10th, 2013. Together with the M8 Alliance of Academic Health Centers and Medical Universities in Asia, the InterAcademy Medical Panel (IAMP) will select 10 outstanding young physician leaders from nominations by IAMP member academies in Asia and by member institutions of the "M8 Alliance".

Articulated in two parts, a specific leadership development workshop on April 8th will be followed by participation as special guests at the World Health Summit, Regional Meeting - Asia Singapore 2013, which will provide an outstanding scientific and policy program and networking opportunities with a global group of medical and scientific professionals, government officials, business leaders and health related organizations. This regional program follows the success of global Young Physician Leaders sessions in Berlin in 2011 and 2012. Selected candidates will be provided with mentorship opportunities with IAMP members and with designees of the nominating academies, and will join a unique alumnus of Young Physician Leaders worldwide for mutual support and peer mentorship.

Eligible physicians for the Young Physician Leadership Program are under 40 years of age, have demonstrated outstanding accomplishments in clinical medicine, medical education, public health or health policy and show significant promise for leadership in their fields in the future.



Heart Centre, Singapore

Decision Modeling in Health Care: A Hands-on Workshop

Host: Program in Health Services and Systems Research, Duke-NUS Graduate Medical School Singapore through

an NMRC grant awarded to develop capacity in Singapore

Date: April 9th - 10th, 2013, 09.00 - 17.00

Location: Duke-NUS Building, 8 College Road, Singapore 169857

Speaker: Mark Roberts | Professor and Chair of Health Policy and Management | University of Pittsburgh | United States

The purpose of this 2-day workshop is to develop skills in the construction and evaluation of decision analytic models for health care. The workshop will alternate between short didactic sessions followed by hands-on development of a model in TreeAge software. The following topics will be covered:

- · Branch and node decision trees
- Basic Sensitivity Analysis
- Basic Cost Effectiveness Analysis
- Including Quality of Life (QALYs)
- State Transition (Markov) Models
- Advanced Sensitivity Analysis (Probabilistic Sensitivity Analysis)
- · Dealing with complexity: Individual Microsimulation
- Cost-effectiveness Acceptability Curves
- Value of Information Analysis

Participants must have a current version of TreeAge Pro on a laptop computer to use during the workshop.

A free demo version of the software is available from TreeAge.

To register, please contact amina.islam@duke-nus.edu.sg



Workshop on "Theory of Constraints"



Host: Program in Health Services and Systems Research, Duke-NUS Graduate Medical School Singapore through an

NMRC grant awarded to develop capacity in Singapore

Date: April 10th, 2013, 14.00 – 17.00

Location: Duke-NUS Building, 8 College Road, Singapore 169857

Speaker: Stephen Pauker | Professor of Medicine | Tufts University School of Medicine | United States

The Theory of Constraints (TOC) was developed by the late Eli Goldratt as an approach to improving systems and identifying and implementing change. Three steps are required: 1) deciding what to change, 2) what to change to, and 3) how to implement the change. The underlying principle is to find the constraint or limiting step in the system. A variety of tools help from building a model of current reality, using a conflict resolution diagram to evaporate the constraint (often by making "pigs fly"), building a model of future reality (taking care to minimize negative branches or unintended consequences of the change), mapping out a step by step transition process, and identifying and resolving various layers of resistance. Beyond its application to manufacturing, it has been applied to service industries, education, and most relevantly to medicine. This 3 hour course will introduce the basic concepts and application models with a focus on medicine, public health and health care systems. Laptop based simulations will be used to illustrate problems and the effect of solutions in the inpatient, outpatient and public health settings. The objective of the course is to whet the attendees' interest and begin them on a life- long quest to a process of ongoing improvement.

To register, please contact amina.islam@duke-nus.edu.sq

Symposium on Building Models to Inform Aging Policy: Getting it Right Before Time Runs Out

Host: Program in Health Services and Systems Research, Duke-NUS Graduate Medical School Singapore through

an NMRC grant awarded to develop capacity in Singapore

Date: April 11th, 2013, 09.00 – 17.30, & April 12th, 2013, 08.30 – 14.00

Location: Duke-NUS Building, 8 College Road, Singapore 169857

Speakers: David Matchar | Kelvin Tan | Angelique Chan | Mary Ann Tsao | Hayden Boswort | Mark Roberts | Alex Cook |

Peter Hovmand | John Pastor | David Lane | Jack Homer | Bobby Milstein

This Symposium focuses on the useful application of models in the context of aging policy. We will highlight exemplars of modeling efforts related to issues such as long-term care planning and innovation in the care of individuals with chronic disease. We will consider the potential for modeling to simultaneously promote multiple perspectives: medical, social, economic. Questions to be addressed will include:

- What is the state of contemporary model application in health care?
- In which situations have models been especially useful?
- How can stakeholders be best engaged in the model building process?
- What is the role of models in identifying research priorities and contributing to the "learning health system"?

The Symposium is designed for academics, researchers, health care professionals and policy makers, who are faced with or investigate complex problems that evolve over a period of time. They will be exposed to different modeling techniques and illustrations of how these techniques can be used to gain insight and promote communications.

To register, please contact amina.islam@duke-nus.edu.sg





Summit Mobile Guide App

The World Health Summit, Regional Meeting – Asia Singapore 2013 (WHSRMA) has gone mobile. Download the WHSRMA 2013 Mobile Guide App to enhance your experience at the meeting. The WHSRMA 2013 Mobile Guide App offers delegates a more interactive experience at the Summit by facilitating delegate networking, providing evaluation, and real-time posting and voting of Q&A. You will be able to plan your day at the meeting with schedules, maps, and more right at your fingertips. The app is compatible with iPhones, iPads, iPod Touches, Android devices, Blackberry devices and other smart devices. Download the WHSRMA 2013 Mobile Guide App via App Store on your Apple device, Google Play on your Andriod device, or App World on your Blackberry device. You may also access the application via our mobile site at whsrma.flck.co from your smart device's browser, or scan the QR Code below to get the app.





Directory of Participants

The Directory of Participants is a private social network for delegates of the World Health Summit, Regional Meeting – Asia Singapore 2013. Delegates will be able to connect with each other via the Directory of Participants which can be found on the WHSRMA 2013 Mobile Guide App. You can browse the full list of delegates and see who is attending the Summit. Be one of the first to know who will be at the Summit and take the opportunity to organize meetings and send messages to fellow delegates. Get the app and check back frequently as the directory will be updated on a regular basis. It's easy to stay in contact with interesting and like-minded people during and after the Summit with the Directory of Participants.

Health for Sustainable Development in Asia

World Health Summit, Regional Meeting – Asia Singapore 2013 Call for Abstracts

The New Voices in Asian Health (NVAH) is a competitive abstract submission and selection program designed to highlight important research, policy and advocacy initiatives of new and future leaders in global health, and empower participants with global health advocacy skills. Issues addressed have to be relevant, reflect current challenges, show originality and would spark the interest of Summit participants. Topics of particular interest were those linked to the Summit's main themes:

- The Impact of Health on Asian Economies
- Innovations in Health in Asia
- Financing Health Care in Asia
- Emerging Health Threats in Asia

Selected participants will now present their abstracts at the World Health Summit, Regional Meeting – Asia Singapore 2013. The accepted researchers will participate in the NVAH-Forum or will present their poster in the poster area throughout the Summit. Selected abstracts will be made available on the Summit thumbdrive as well as the WHSRMA 2013 mobile guide app.

Oral Presentations:

Date: April 9th, 15.45 – 16.45 Venue: Millenia 2, Level 2

Poster Viewing

M8Alliance THE LANCET

All posters (both physical and electronic) will be presented during the entire time at the World Health Summit, Regional Meeting – Asia Singapore 2013.

Authors of physical posters are invited to be present next to their posters during the longer breaks so that delegates can visit the poster area independently and have the opportunity to ask the abstract authors questions regarding their posters.

Location of the Posters:

The physical posters will be displayed in the Grand Gallery which is located on Level 1 of the Venue. Electronic posters will be displayed via screens in the vicinity.

Oral and Physical Poster Presentation

Who Should Pay for Global Health, and How Much? Lessons from Kyoto.

Luis Roman Carrasco, National University of Singapore, Singapore

Understanding, Evaluating, and Improving Health System Surge Capacity for Mitigating Pandemics and Other Disasters in Southeast Asia

James W. Rudge, London School of Hygiene & Tropical Medicine, Thailand

Trends in Epidemiology and Antibiotic Resistance in Enteric Fever in Last Two Decades in Nepal:

Evidence From a Systematic Review and Meta-Regression Surendra Karki, Monash University, Australia Participation in Social Networks as a Determinant for Health: Evidence from India

Somen Saha, University of Melbourne, Australia

Physical Poster Presentation

A Reliability Centered Management Approach to Evaluate, Manage and Optimize Care for Early Diabetic Nephropathy in a Primary Care Setting

Anantharaman Vathsala, National University Hospital, Singapore

Economic Burden Of Resistant Gram Negative Bacilli Infections Among Critically III Patients

Anupama Vasudevan, National University Health System, Singapore

Climate Change and Diarrheal Diseases in Jhapa District of Nepal: Evolving Facts from Nepal

Gajananda Bhandari, Nepal Public Health Foundation, Nepal

Prevalence of, and Factors Associated with, Psychosocial Distress in Indonesia, Malaysia, the Philippines and Thailand: Report from the LIFE Course Study in CARdiovascular Disease Epidemiology (LIFECARE)

Hwee Lin Wee, National University of Singapore, Singapore

Groundwater Arsenic Contamination and its Health Effects in a Gold Mining Area of Northeastern Karnataka, India Kusal Das, Al Ameen Medical College, India

Low Contraceptive Prevalence in Malaysia

Mohamed Najimudeen, Melaka Manipal Medical College, Malaysia

Occupational Status & Prediabetes Status in Middle Aged Women.

Pranita Ashok, Bharati Vidyapeeth Medical College, India

A Simple, Economical, and Accurate Quantitative Field Test for Faecal Coliforms - A First Feasibility Study in Southeast Asia Anthony Ng, University of Cambridge, United Kingdom

Justice in Health Care Distribution: A Study of Universal Health Coverage through Insurance Schemes in Three Asian Jurisdictions

Calvin Wai Loon Ho, National University of Singapore, Singapore

Development of Community Based Voluntary Health Insurance Scheme in Selected Community

Hla Win, University of Medicine-2, Yangon, Myanmar

Support for the Tobacco-Free Generation Proposal Jon A. Berrick, Yale-NUS College, Singapore

The Impact of Area Socioeconomic Status on Health and Health Services in an Asian Urban Low-Income Setting, at Baseline and Post-Intervention.

Liang En Wee, National University of Singapore, Singapore

Battered Women: Demographics and Traumatology Nathasha Luke, National Hospital of Sri Lanka, Sri Lanka

Access to Medicines - the Oncology Perspective in the Asia-Pacific Region

Swee Sung Soon, National University of Singapore, Singapore

E-Poster Presentation

Kazakhstan Health Study: The Study of the Determinants of Metabolic Syndrome in Elderly Population

Adil Supiyev, Nazarbayev University, Center for Life Sciences, Kazakhstan

Development and Implementation of the New University Hospital Model in Kazakhstan: Problems and Prospects Ainur Kumar, Kazakh National Medical University, Kazakhstan

The Emergence of Governance Capacity in Global Policy Implementation: Evidence from Managing Transnational Public Health Crises

Allen Yu-Hung Lai, National University of Singapore, Singapore

Academic Health Care System in Kazakhstan: Integration of Patient Care and Research

Almaz Sharman, Nazarbayev University, Center for Life Sciences, Kazakhstan

Customizing Stroke Rehabilitation Using a 'Rehabilitation Problem-Solving Form' for a Home-based Therapy Model in India Anirban Dutta, Univ. of Goettingen, Germany

Supplementing the Healthy: Vitamin E in the New Millennium Anthony Ng, University of Cambridge, United Kingdom

An mHealth Review: Mobile Health Care in Developing Countries Arul Chib, Nanyang Technological University, Singapore

Infertility Observed in a Community Study "STREE AROGYA SHODH" a Women's Health Program in Goa, India. Bernadette Pereira, Sangath, India

Smarter Facilities and Infrastructure for Smarter Health Care Calvin Kam, Stanford University, United States

Sufficient Economy and Health of Community Organization Collaboration Centers at Bungwai Sub-District, Ubon-Ratchathani Province, Thailand

Chanakan Boonnuch, Mahidol University, Thailand

Using Surrogate Financial Markers to Estimate the Costeffectiveness of the Community Health Worker Program of the Surmang Foundation in Rural China.

Christal Chow, Surmang Foundation, China

Gap Between Comprehensive Knowledge of HIV/AIDS and Practice of Unsafe Sex Among Sexually Active Young Men of Rural India

Debashrita Chatterjee, Jawaharlal Nehru University, India

Route to Universal Health Insurance in Vietnam: Current Performances and Future Challenges

Duc Ha, Ministry of Health, Vietnam

Enhancing Telehealth Diffusion Among Volunteer Groups: A Case Study of Two Projects Undertaken by an International Non-Government Organization.

Gerard Chew, Director, Consumer Health, MOH Holdings Pte. Ltd., Singapore

Pick Up the Phone! Opportunities, Barriers and Challenges of mHealth in Asia from Various Perspectives

Hubertus Vrijhoef, National University of Singapore, Singapore

Healthcare Financing and Chronic Disease Management in Singapore: Lessons for the Expansion of Universal Coverage Joanne Yoong, NUS/NUHS, Singapore

Clinical Study of Efficacy of Magnascent Iodine (Nascent Iodine) as Therapeutic and Chemoprophylaxis Agent in Tropical Malaria *John Brookshire, Shield Bearer Inc., United States*

The Influence Of Langgam Jawa Music Therapy Toward Pain Intensity In Abdominal Surgical Wound Treatment In Indonesia Junaidi Junaidi, University of Indonesia, Indonesia

The Role Of Mixture Of Honey (Apis) and The Betel Leaf (Pipper Betle) Salve To Growth Inhibitors And Kill The Staphylococcus Aureus

Junaidi Junaidi, University of Indonesia, Indonesia

Modification Of Oucustic Stethoscope With Software as Signal Processing To Heart And Lung Auscultation

Junaidi Junaidi, University of Indonesia, Indonesia

United States

The Productivity of MD General Practice Doctors in Rural District Hospital in Nepal: an Economic Analysis Kiran Pandey, Rosalind Franklin University of Medicine and Science,

A Strategy to Reduce Deaths from Dengue Haemorrhagic Fever Kolitha Harischandra Sellahewa, Melaka Manipal Medical College, Malaysia

To Promote Nursing Staff Correctness about Execution Blood Culture Acquisition Technology

Lin Lin, Changhua Christian Hospital, Taiwan, Republic of China

How Participation in Social Nursing Care Insurance and Other Social Resources Relate to the Quality of Life of Elderly People, Those with Spouses with Dementia? - Comparative Case Studies Between Long-term Homely Care and Institutional Care from China and Germany

Ling Yue, Charité - Universitätsmedizin Berlin, Germany

Using Predictive Analytics to Predict "No Show" Patients Contacted Via SMS at Specialist Outpatient Clinics

Ma Nang Laik, Singapore Management University, Singapore

Nurses Administered, the Dressing Time Allocation of the Overall Working Hours Discussion

Mei-Wen Chen, ChangHua Christian Hospital, ChangHua, Taiwan, Taiwan, Republic of China

Computerized Pap Smear Screening Reminder System to Increase the Screening Rate

Mei-Wen Chen, Changhua Christian Hospital, Taiwan, Republic of China

Survival of Female/Male with Oral Cancer According to Oral Cancer Screening Exposed

Mei-Wen Chen, Changhua Christian Hospital, Taiwan, Republic of China

Financial Reporting and Sustainability of Non-profit Community Hospitals in Singapore

Michael Lim, Ang Mo Kio Community Hospital, Singapore

Prevalence, Risk Factors and Public Health Responses to Type 2 Diabetes in Bangladesh: A Literature Review

Mohammad Radwanur Rahman Talukder, International Centre for Diarrhoeal Disease Research, Bangladesh

Assessing Gap in Nutrition Treatmet for Patients with HIV and AIDS in HIV Referral Hospitals in Yogyakarta, Indonesia Mutiara Kusuma, Gadjah Mada University, Indonesia

Financing Outreach Clinic in Rural Indonesia Using Government In Kind Cash Transfer: Benefit and Challenges Mutiara Kusuma, Gadjah Mada University, Indonesia A New Molecular Surveillance System for Leishmaniasis Pedro Ferreira, Institute Tropical Medicine (NEKKEN), Japan

Successes, Adventures and Challenges: Driving IT Adoption in the Primary and Long-term Care Sectors - Singapore, Australia and Beyond.

Peter Morgan, MOH Holdings, Singapore

System Dynamics Model for Predicting Dengue Fever 2003-2023: a Sustainablility Analysis of Health R. Azizah, University of Airlangga, Indonesia

Knowledge, Attitude and Practice Regarding Health and Diseases in Rural and Urban Area Of Nepal and Role Of Medical Students - A Qualitative Study

Rahul Rauniyar, Institute of Medicine, Tribhuwan University, Nepal

Compliance on Health Promotion Activities among PTB Patients in Selected Villages in Cebu City Philippines
Rosielyn Tan, University of Cebu, Philippines

Political Economy of International Migration of Health Professionals from India: The Role of National and Global Health Governance Sanjoy Nayak, Programme Lead, V&TSM, United Kingdom

Working Together to Increase the Number of Nurses in East Jerusalem

Seema Biswas, Ziv Hospital, Israel

Challenges Facing Outreach Clinic in West Nusa Tenggara, Indonesia: Result of A Qualitative Study Siti Helmyati, Gadiah Mada University, Indonesia

Brisk Walking for Sustainable Health Benefits Teo Ho Pin, Mayor, North West District, Singapore

Rising to the Challenges of a Community: Meeting the Health Needs of the Indigenous Syrian Community in the Villages of the Golan Heights

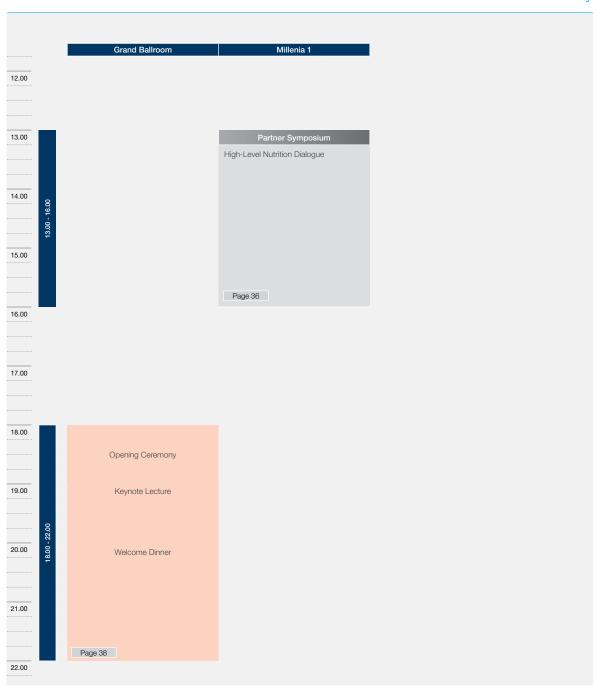
Wajdi Safadi, Golan for Development of the Arab Villages, Israel

How Much Eye Care Services Do Asian Populations Need? Projection from the Singapore Epidemiology of Eye Disease (SEED) Study

Yingfeng Zheng, State Key Laboratory of Ophthalmology, Zhongshan Ophthalmic Center, China

The S Factor in the Retention of Medical Workforce Zarrin Siddiqui, University of Western Australia, Australia

PRE-SUMMIT DAY Monday, April 8th





Partner Symposium Nutrition Dialogue















Peter Gluckman



Martin W. Bloem

Session 1 The Science Behind the First 1000 Days, Stunting and Long-Term Health Impacts

Time: 13.00 – 14.15

Chair:

Outline:

Augustine Anthuvan | Editor | International Desk | Channel NewsAsia

Compelling evidence relates the conditions of embryonic, fetal and infant life to childhood development, human productivity and the risks of developing chronic disease, in particular diabetes and heart disease, later in life. These relationships reflect plastic responses of the developing organism to environmental cues. Studies in animals and humans have shown that these relationships are underpinned by epigenetic changes in the offspring associated with early manipulation of maternal or infant nutrition, maternal stress and maternal – infant behavioural interactions. These effects are not dependent on alterations in fetal growth and can occur with both excess and deficient maternal nutrition albeit through distinct mechanisms. Of particular concern is the rapidly rising incidence of gestational diabetes and maternal obesity in Asia which have major implications for the next generation. The definition of epigenetic mechanisms also allows an estimate of the prevalence of these phenomena. Our recent studies show that epigenetic state at birth can explain a significant proportion of the propensity to obesity in childhood. Given the strong evidence of diverse developmental exposures having long-term effects on metabolic risk, individual and population differences will need to be explained in genetic. epigenetic/developmental and life style terms rather than simplistic models of gene-environment interactions. Research and public health in transitioning and transitioned populations must address the contributions of various developmental exposures such as nutritional behaviours to the burden on NCDs. It will likely lead to a greater role for managing the nutrition of mother, and infant, greater understanding of the role of demographic and socioeconomic change and to epigenetic surveillance becoming integrated with nutritional management.

Speakers: Opening Message

David Nabarro | UN Special Representative | Food Security and Nutrition | United Kingdom

Developmental origins of health and disease

Peter Gluckman | New Zealand Chief Science Advisor | Office of the Prime Minister | New Zealand

Nutrition in the first 1000 days and diseases in later life

Martin W. Bloem | Chief, HIV/AIDS and Nutrition | United Nations World Food Programme | Rome | Italy

Panel Discussion

How Can Science Best Inform Policy to Ensure Nutritional Support is Available to Women of Child-Bearing Age and Children in Their First 1000 Days

Stephan Tanda | Member, Managing Board | Royal DSM

Regina Moench-Pfanner | Director, Singapore | Global Alliance for Improved Nutrition Trihadi Saptoadi | Regional Leader | South Asia & Pacific | World Vision International

Session 2 The Critical Role of Nutrition in Sustained Health and Economic Development Outcomes

Time: 14.40 – 16.00

Chair: Augustine Anthuvan | Editor | International Desk | Channel NewsAsia

Outline:

In the past two decades, countries in Asia have experienced rapid changes in diet and lifestyles. Rapid economic growth in Southeast Asian countries, in particular, results in unhealthy dietary patterns. Chronic non-communicable diseases (NCDs) account for about 60% total deaths in this region, especially in the 15-59 year age range. Prevalence of diabetes and obesity hit a record high in both wealthy and poorer nations. At the same time, countries have to deal with the unfinished agenda of undernutrition, especially childhood stunting and micronutrient deficiencies while the prevalence of obesity has emerged as a problem of public health significance, creating the situation known as "double-burden of malnutrition". The linkage of undernutrition and obesity/NCDs has been hypothesized as the fetal adaptation to malnourished mothers, restricted growth in the first two years of life followed by the accelerated growth rate, leading to increased risk of obesity and NCDs in later years. While most countries include NCDs in their national policies and programs, efforts have yet to gain significant momentum and to showcase key achievements on a long-range goal.

Investing in improved nutrition improves cognitive development, schooling achievement, and hence economic productivity of adults. It is estimated that investments in early nutrition can increase a country's GDP by 2-3%. It also reduces the burden on health services. Studies suggest that investments in nutrition are top priorities for economic development. Moreover, updated work on the cost of nutrition interventions (in advance of this year's Hunger Summit) suggests that the investments needed are indeed affordable.



Nutritional transition in Asian countries undergoing economic transition

Emorn Wasantwisut | Senior Advisor | Institute of Nutrition | Mahidol University | Thailand

Opportunities and Challenges in Implementing Community Nutrition Programs in India

Thomas Chandy | Chief Executive Officer | Save the Children | India

The Case for Investments in Nutrition as Part of the Global and National Development Agendas

Susan Horton | Associate Provost | Graduate Studies and CIGI Chair in Global Health Economics | Canada

Panel Discussion

What Can Be Done to Place Nutrition Security as a Priority for Government, Industry and Civil Society Action in Asia? What Can We Learn from the Scaling Up Nutrition (SUN) Movement?

Stephan Tanda | Member, Managing Board | Royal DSM

Regina Moench-Pfanner | Director, Singapore | Global Alliance for Improved Nutrition Trihadi Saptoadi | Regional Leader | South Asia & Pacific | World Vision International



Emorn Wasantwisut



Thomas Chandy



Susan Horton



Keynote Lectures Opening Ceremony



Lee Hsien Loong

Gan Kim Yong

Welcome Address

John Eu-Li Wong | Isabel Chan Professor in Medical Science | Co-Chairman, WHSRMA 2013 Organizing Committee | Vice Provost (Academic Medicine) | National University of Singapore | Singapore

Detlev Ganten | Founding President, World Health Summit | Chairman, Foundation Board, Charité Foundation | Charité - Universitätsmedizin Berlin | Germany



Lee Hsien Loong | Prime Minister of Singapore

Moderator: Detlev Ganten | Founding President, World Health Summit | Chairman, Foundation Board, Charité Foundation |

Charité - Universitätsmedizin Berlin | Germany

Speaker: Beyond Longer Life: An Urgent Need for a Society-Wide Approach to Health and Disease

Peter Piot | Director | London School of Hygiene & Tropical Medicine | United Kingdom

Host: Welcome Dinner hosted by Gan Kim Yong | Minister for Health | Singapore

Opening Performance | Musical Performance

- Brass Fanfare
- String Ensemble

by Yong Siew Toh Conservatory of Music, National University of Singapore | Singapore



John Eu-Li Wona



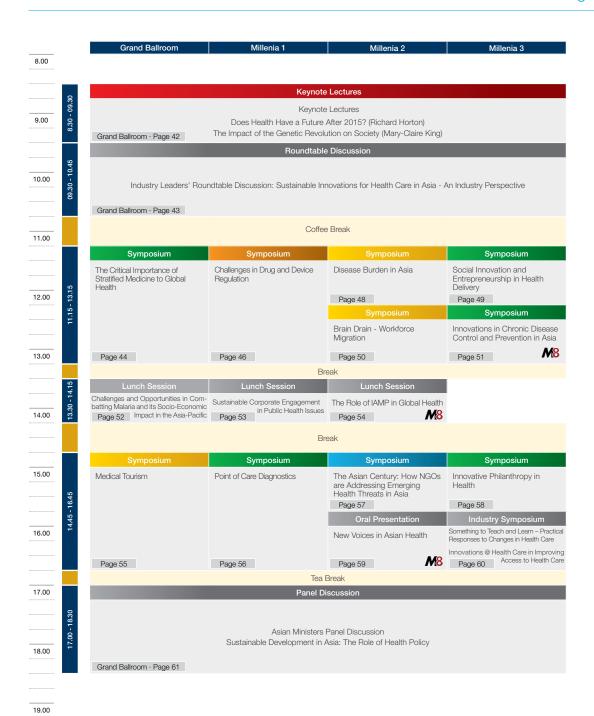
Detlev Ganten



Peter Piot



SUMMIT PROGRAM Tuesday, April 9th



Grand Ballroom 08.30 - 09.30

Keynote Lectures Keynote Lectures



Richard Horton

Moderator: Sania Nishtar | Founder and President | Heartfile | Pakistan

Speaker: Does Health Have a Future After 2015?

Richard Horton | Editor-In-Chief | The Lancet | United Kingdom

Moderator: John Eu-Li Wong | Isabel Chan Professor in Medical Science | Co-Chairman, WHSRMA 2013 Organizing

Committee | Vice Provost (Academic Medicine) | National University of Singapore | Singapore

Speaker: The Impact of the Genetic Revolution on Society

Mary-Claire King | American Cancer Society Professor | University of Washington School of Medicine | United States



John Eu-Li Wong



Mary-Claire King

Roundtable Discussion

Industry Leaders' Roundtable Discussion: Sustainable Innovations for Health Care in Asia – An Industry Perspective

Grand Ballroom

09 30 - 10 45

Chair:

Bernard Yeung | Stephen Riady Distinguished Professor and Dean | NUS Business School | National University

of Singapore | Singapore

Outline:

In this session, leaders of companies engaged in drug discovery, pharmaceutical research & development and medical devices will share their experiences in developing innovative and sustainable health solutions for Asia and beyond.

The panelists represent international companies active in Asia (Bayer, Johnson & Johnson) as well as companies of Asian origin (Chugai Pharmaceutical, Dexa Medica). They will each share their approaches to addressing some of the most pressing health problems of the day, in a manner that sustains both their business and the communities served.



Osamu Nagayama

Panel Discussion

Speakers:

Osamu Nagayama | Chief Executive Officer | Chugai Pharmaceutical Co., Ltd. | Japan

Vladimir Makatsaria | Chairman | Johnson & Johnson Medical Asia Pacific | Singapore

Andreas Busch | Head of Bayer HealthCare Global Drug Discovery and Member of the Executive Committee | Bayer HealthCare Global Drug Discovery | Germany

Ferry Soetikno | President Director | Dexa Medica | Indonesia

Alex Chang | Head of Asia Cluster | Novartis | Singapore



Vladimir Makatsaria



Alex Chang



Andreas Busch

Track 2 **Grand Ballroom** 11.15 - 13.15

Symposium

Outline:

The Critical Importance of Stratified Medicine to Global Health



Stephen K. Smith



Andrew Morris



Yongvuth Yuthavong



Daehee Kang

Chair: Stephen K. Smith | Vice President (Research) | Nanyang Technological University | Singapore

> Stratified Medicine refers to the tailoring of therapies to the individual and it is delivered by stratifying the patient population based on specific biomarkers, so that the patient sub-population is allocated a specific tailored therapy that is effective for it.

> This is of interest to biopharmaceutical companies as stratification of patient populations during clinical trials will allow for enrichment of patients most likely to respond to the therapy. For health care providers, Stratified Medicine reduces health care costs, improves patient outcomes and selects therapies with minimal side effects.

> The development of drugs as Stratified Medicine requires sophisticated stratification of patients although stratifying patient populations based on their ethnicities provides preliminary stratification indications, for example there is a higher response rate to gefitinib in Asian population compared with Caucasian population. The molecular phenotype, which is linked to a more effective treatment response and which might be of greater prevalence in certain ethnicities, is the biomarker used to stratify the population for Stratified Medicine.

> To achieve statistical power for the identification of biomarkers, it is useful to have preliminary ethnicity stratification indication and also more importantly treatment data from a large population to start with. Hence Stratified Medicine, far from segregating the population to disparate sections, can only be achieved through an inclusive partnership of the whole global population.

Speakers: Stratified Medicine

Andrew Morris | Chief Scientist for Scotland | United Kingdom

Yongyuth Yuthavong | Senior Researcher | National Center for Genetic Engineering and Biotechnology | Thailand

Personalized Preventive Care

Daehee Kang | Dean, Professor, Preventive Medicine | Seoul National University, College of Medicine | Republic of Korea





Challenges in Drug and Device Regulation

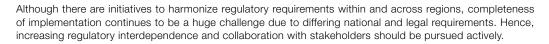


Host: Health Sciences Authority Singapore

Chair: John Lim | Chief Executive Officer | Health Sciences Authority | Singapore

Outline:

Over the past decade, regulators of health products are facing a changing landscape in response to globalization and scientific advancements. The growing complexity of the global supply chain coupled with rising stakeholder expectations have placed greater demand on regulatory frameworks and agencies that may be constrained in relevant resources and expertise.



With less productive pharmaceutical industry pipelines, there are calls for regulatory changes to support innovation. There is a shift towards developing alternative frameworks for new drug development, such as accelerated approval for drugs treating serious diseases with unmet medical needs, or adaptive licensing for earlier access of new drugs balanced with the need to obtain adequate real world data on benefit-risk profiles of such products. This is also in line with the increased moves to enhancing post-market surveillance to manage safety of approved drugs.

The requirements for medical device approvals are different and less rigorous compared to drugs.



John Lim

Welcome Remarks and Keynote Address

John Lim | Chief Executive Officer | Health Sciences Authority | Singapore

Regulatory Agency Perspective

Alasdair Breckenridge | Chair | Emerging Science and Bioethics Advisory Committee | Immediate Past Chairman | Medicines and Healthcare Products Regulatory Agency | United Kingdom

Challenges in Drug and Device Regulation: Japan's perspective

Tatsuya Kondo | Chief Executive | Pharmaceuticals and Medical Devices Agency | Japan

Perspective of Drug Industry

Ling Su | President | Drug Information Association (DIA) | Senior Advisor to Sidley Austin | China

Challenges in Drug Device Regulation

Ranga Krishnan | Dean | Duke-NUS Graduate Medical School | Singapore



Alasdair Breckenridge



Tatsuya Kondo



Ranga Krishnan



Ling Su

Disease Burden in Asia



Kenji Shibuya



Alan Lopez



Stephen Lim

Kenji Shibuya | Professor and Chair, Department of Global Health Policy | Graduate School of Medicine | University of Tokyo | Japan

Outline:

Chair:

The Global Burden of Disease Study 2010 was published in December 2012, providing detailed findings on trends and patterns of causes of death and disease burden attributable to 300 diseases and injuries, and 67 risk factors, for the world and 21 geographical sub-regions. This session will focus on highlighting the findings and implications of the Study for health policy for the Asia Pacific sub-regions, where the speed of epidemiological transition has been particularly brisk. The global trend towards a higher proportion of disease burden being caused by non-communicable diseases, with increasing periods of life being lived with disability, and a marked transition in the relative importance of non-communicable disease risk factors, has been particularly accentuated in Asia. This session will describe those trends for major sub-regions, contrast country performance in reducing premature death and disability, and review the rapid changes in disease burden attributable to various risk factors, including dietary sub-components. Next, the session will address the potential gains in health that might be achieved by the wider, and effective application of established interventions to control leading causes of disease and injury burden in the region.

Speakers: Trends in Death and Disability in Asia: Overview of Findings from the Global Burden of Disease 2010 Study

Alan Lopez | Rowden-White Chair in Global Health and Burden of Disease Measurement | Melbourne School of Population and Global Health | University of Melbourne | Australia

Burden of Disease and Injury Attributable to 67 Risk Factors and Risk Factor Clusters: Findings for Asia from the Global Burden of Disease Study 2010

Stephen Lim | Institute for Health Metrics and Evaluation in Seattle | United States

Summit Program

Tuesday, April 9th, 2013

Symposium

Social Innovation and Entrepreneurship in Health Delivery

Track 2 Millenia 3 11.15 - 12.15

Hosts: NUS Business School, National University of Singapore

Saw Swee Hock School of Public Health, National University of Singapore

Chair: Audrey Chia | Associate Professor, NUS Business School & Saw Swee Hock School of Public Health |

Co-Director, Asia Centre for Social Entrepreneurship & Philanthropy | Singapore

Outline: Social entrepreneurs have played an increasingly significant and growing role in addressing health problems in Asia. They have identified the needs of neglected groups, and the best of them have brought holistic solutions

to the difficult and inter-related problems of poverty, sanitation, water, and diseases.

This session brings together three of Asia's most notable and creative social entrepreneurs who have helped to improve health while nurturing the sustainable development of communities. Antonio Meloto (Philippines), founder of Gawad Kalinga, has led many community-based social innovations to the problems of poverty, housing, food sufficiency and health. Jack Sim (Singapore), founder of World Toilet Organisation, uses novel and business-inspired approaches to improve underprivileged populations' access to sanitation. Amit Jain (India), co-founder of E Health Point, has provided rural Indians with a one-stop service for clean water, teleconsultation and medicines. These social entrepreneurs employ frugal innovations, leverage and inter-sector collaborations to achieve substantial social impact and positive health outcomes for millions in Asia and beyond.



Audrey Chia

Speakers:

Social Innovation & Entrepreneurship in Health Delivery Antonio Meloto | Founder | Gawad Kalinga | Philippines

Antonio Meioto | Founder | Gawad Kalinga | Frillippines

Creating Effective Advocacy for Sanitation as a Preventive Medicine

Jack Sim | Founder | World Toilet Organisation | Singapore

Amit Jain | Co-Founder, President and Chief Executive Officer | Global Healthpoints | India



Antonio Meloto



Amit Jain



Jack Sim

Track 1

Millenia 2

Symposium Brain Drain – Workforce Migration



Manuel M. Dayrit



Pascal Zurn

Chair:

Manuel M. Dayrit | Dean, Ateneo School of Medicine and Public Health | Ateneo de Manila University | Philippines

Outline:

Countries aspire towards universal coverage of health care which is comprehensive and of good quality. Without an adequate health workforce to provide the health services, these aspirations remain empty rhetoric. Now more than ever, health systems are challenged to ensure that health workers with the right attributes are available everywhere, in all countries whether rich or poor.

Good health workers – dedicated, competent, compassionate – are a prized resource anywhere. The dynamics of their supply and demand are complex. Health workers are educated in countries but in a globalized world, it has become more and more apparent that a well-trained health worker can work in any country in the world; the barriers to their mobility are there to be overcome.

The mobility of the health workforce, that is the brain drain and brain gain of this precious human resource, is the topic of this session. The following questions are posed: What is the global picture of health workforce mobility? What is the particular situation in Asia? How are countries and labor markets being affected and how are they responding?

Speakers:

Brain Drain and Brain Gain: Selected Country Experiences and Responses. What is the Particular Situation in Asia? How are Countries and Labor Markets being Affected and How are they Responding? What are the Emerging Trends and Policies for Health Worker Migration for the Future?

Manuel M. Dayrit | Dean, Ateneo School of Medicine and Public Health | Ateneo de Manila University | Philippines

Global Issues and Trends in Health Workforce Mobility: The Mobility of the Health Workforce is the Topic of this Session. The Following Questions are Addressed: What is the Global Picture of Health Workforce Mobility? How are Countries and Labor Markets being Affected and how are they Responding? What are the Emerging Trends and Policies for Health Worker Migration for the Future?

Pascal Zurn | Health Economist | World Health Organization | Switzerland

Innovations in Chronic Disease Control & Prevention in Asia

Track 2 Millenia 3 12.15 - 13.15

Host: Monash University

Chair: John McNeil | Head of Department of Epidemiology & Preventive Medicine | Head of School of Public Health

& Preventive Medicine | Monash University | Australia

Outline: The Global Burden of Disease study demonstrated the transition from infectious diseases to chronic diseases

across Asia. This will be felt even more strongly in countries whose population is aging. Deaths and disability from heart disease, stroke, diabetes and cancer are now creating the principal burden of illness in Asia, Australasia, Europe and the Americas. As life expectancy increases the principal goal of health care systems is increasingly focusing on prolonging disability free survival. At present the key to delaying disability is the promotion of a healthy lifestyle, typified by healthier diets, tobacco control and optimal levels of exercise. This is a challenge that will not be solved by health professionals alone but will require a marshalling of resources

from all parts of society.

In this session we shall be focussing on the opportunities in Asia to reduce the incidence of diabetes, heart disease and cancer, three of the major challenges facing our region. To finish Professor Ajay Mahal will

summarise the economic costs of action and inaction on this front

Speakers: Diabetes and CHD Prevention in Asia

Brian Oldenburg | Professor and Chair | International Public Health Unit | Monash University | Australia

Cancer Control in Asia

Robert Burton | Department of Epidemiology and Preventive Medicine | Monash University | Australia

The Economics of Chronic Disease Control in Asia

Ajay Mahal | Finkel Chair of Global Health | Monash University | Australia







John McNeil



Brian Oldenburg



Ajay Mahal



Robert Burton

Lunch Session

Grand Ballroom 13.30- 14.15 Challenges and Opportunities in Combatting Malaria and its Socio-Economic Impact in the Asia-Pacific



Host: Roll Back Malaria Partnership

Chair: Thomas Teuscher | Coordinator, Policy, Strategy and Governance | Roll Back Malaria Partnership | Switzerland

Outline:

A 2011 study by the Asian Development Bank (ADB) suggested that an additional 3 billion Asians could enjoy living standards similar to those in Europe today, and the region could account for over half of global output by the middle of this century. One major reason for the coming of the Asian Century is the remarkable economic growth in Asia, and the continuing growth rates. Asia's per capita income could rise six fold in purchasing power parity (PPP) terms to reach Europe's levels by 2050. Asia's rise is changing the world. This is a defining feature of the 21st century—the Asian century. These developments have profound implications for people everywhere.

However, Asia's continued growth is not guaranteed. Its leaders will have to manage multiple risks and challenges, particularly managing the risk of growing inequality within countries, making the necessary infrastructure investments, managing global warming and climate change as well as competition for finite natural resources, such as land, water, fuel or food. The ASEAN (Association of Southeast Asian Nations) fosters market integration in the Greater Mekong Subregion. To optimize the impact, the public sector will need to create policies that will create an attractive investment environment. A physical and social environment without stigmas of poor countries such as the presence of endemic disease, lack of job opportunities for all, low levels of competencies and access to markets, will maximize the redistribution of macroeconomic growth, will help this endeavor. The free trade zone needs to attract private investments which are expected to create new employment opportunities and thus will durably improve livelihoods of local populations. The elimination of poverty associated diseases such as malaria will enhance profitability of private enterprise, thus enhance return on investment; this favorable investment environment will contribute to attract additional private capital.

The malaria panel is to discuss regional malaria elimination as a driver to maximize impact of free trade zone developments within the ASEAN region and identify elements of a business case that will be supportive of ridding the trade zone of the malaria stigma.



Karen Mok

Speakers:

Welcoming Remarks

Karen Mok | Roll Back Malaria Partnership Champion

The Impact of Malaria Control on Macroeconomic Growth and on Poverty Reduction in the Asia-Pacific

Economic Development Projects and Re-emergence of Malaria in the Asia-Pacifc

Innovation, Research and Development to Combat Malaria

Yongyuth Yuthavong | Senior Researcher | National Center for Genetic Engineering and Biotechnology | Thailand

Lessons Learnt from Across the Globe: Containing the Threat of Malaria
Fatoumata Nafo-Traore | Executive Director | Roll Back Malaria Partnership



Yongyuth Yuthavong

Lunch Session

Sustainable Corporate Engagement in Public Health Issues

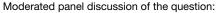
13 30- 1/ 15

Host: GBCHealth

Chair: Michael Schreiber | Executive Director | GBCHealth | United States

Outline: Using business skills and resources to help solve social problems isn't always philanthropically motivated. Companies are increasingly awakening to the idea of developing innovative public health programs for the

benefit of society while they create economic value for themselves. Many companies are actively engaging in meaningful public health programs in low- and middle-income countries and the emerging markets. The discussions are envisioned to focus on best practice examples of three selected companies to meet the health needs in Asia and how such initiatives are sustained and aligned with their respective corporate mission.



What's the motivation for the company to promote sustainable engagement in public health issues, what have been some of the successes as well as some of the lessons learned?

Speakers: Shared Value Strategy Enables a New Business Model that Directed towards Public Health Issues

Anita Wei | PR & Communication Director | BD Greater China | China

Public Health to Strengthen Private Sector: A New Paradigm in Asia?

Philippe Guibert | Regional Medical Director, Consulting Services for South & Southeast Asia | International

SOS | Singapore

Standard Chartered in the Community

Mark Devadason | Group Head of Sustainability & Regions Corporate Affairs | Standard Chartered Bank | Hong Kong





Michael Schreiber



Anita Wei



Mark Devadason



Philippe Guibert

Millenia 2 13.30- 14.15

Lunch Session

The Role of IAMP in Global Health



iamp

Host: InterAcademy Medical Panel (IAMP)

Looi Lai-Meng | Distinguished Professor | Department of Pathology | Faculty of Medicine Building | University

of Malaya | Malaysia

Outline:

Chair:

IAMP is a network of the world's medical academies and medical sections of academies of science and engineering, committed to improving health world-wide. The principal goals of the IAMP are to strengthen the capacity of academies to provide evidence based advice to governments on health and science policy; to support the creation of projects by member academies to strengthen research and higher education in their countries and to issue consensus statements on matters of importance to global health.

The one hour session will be divided into four 15-minute sections. Making reference to activities carried out with member academies such as the Young Physician Leaders Programme, dissemination of the Global Commission on Education of Health Professionals for the 21st Century, joint statements on control of infections and climate change mitigation, projects on reducing maternal and perinatal mortality and regional workshops on non-communicable diseases, the three speakers will lay out how IAMP can assist academies to intervene concerning

- a) Education and Training for Health Professional Leadership
- b) IAMP Statements and advice to governments and
- c) Collaborative action through projects and workshops.

The final 15 minutes will be dedicated to questions and answers between the audience and the speakers.





Detley Ganten



Eduardo Krieger

Speakers: Education and Training for Health Professional Leadership

Looi Lai-Meng | Distinguished Professor | Department of Pathology | Faculty of Medicine Building | University of Malaya | Malaysia

IAMP Statement and Advice to Governments

Detlev Ganten | Founding President, World Health Summit | Chairman, Foundation Board, Charité Foundation | Charité - Universitätsmedizin Berlin | Germany

Collaborative Action Through Projects and Workshops

Eduardo Krieger | President | Brazilian Academy of Sciences & National Academy of Medicine | Brazil

Track 1
Grand Ballroom
14.45 - 16.45

Chair: Rifat Atun | Professor of International Health Management | Head of the Health Management Group | Imperial

College London | United Kingdom

Speakers: Medical Tourism - Malaysia

Abu Bakar Suleiman | President | International Medical University | Malaysia

Medical Tourism - Its Growth and Impact in Asia

Tan See Leng | Group Chief Executive Officer and Managing Director | Parkway Pantai Ltd. | Singapore

Malvinder Singh | Executive Chairman | Fortis Healthcare Limited | India

The Growth of Medical Tourism in Asia - What is the Impact on Health Systems?

Phua Kai Hong | Associate Professor of Health Policy & Management | Lee Kuan Yew School of Public Policy

| National University of Singapore | Singapore



Rifat Atun



Abu Bakar Suleiman



Phua Kai Hong



Tan See Leng

Track 2 Millenia 1 14.45 - 16.45

Symposium Point of Care Diagnostics



Tikki Pana

Chair:

Tikki Pang | Visiting Professor | Lee Kuan Yew School of Public Policy | National University of Singapore | Singapore

Outline:

Diagnostic tests with high sensitivity and specificity are commercially available, but they are often neither affordable nor accessible to patients in the developing world, where disease burden is greatest. Laboratory-based testing often requires patients to return for their test results, leading to loss to follow-up or delay in treatment. In recent years, rapid advances in detection technology have made a range of point-of-care (POC) tests available. It is now possible to screen and diagnose diseases or conditions at all health care settings using blood from a finger prick or a non-invasive specimen such as oral exudate. Immuno- and molecular assays can now be performed with minimal user input, but provides fast and highly accurate results for diseases such as typhoid fever. These innovations will not only lead to increased patient access to diagnostics and result in improved management of patients but also provide more accurate data on disease prevalence and trends to inform policy decisons. Innovations in personalized medicine using genetic testing will improve on the efficacy of drugs for chronic diseases such as cancer. POC diagnostics will ensure widespread access to diagnostics so that patients can benefit from timely, evidenced-based management.



Rosanna Peeling

Speakers: Point-of-Care Diagnostics to Improve Global Health: Successes and Challenges

Rosanna Peeling | Professor and Chair of Diagnostics Research | London School of Hygiene & Tropical Medicine | United Kingdom

Mary-Claire King | American Cancer Society Professor | University of Washington School of Medicine | United States

POC diagnostics for Typhoid Fever

Lim Pak Leong | Chairman | IgGENE | Fo Tan | Hong Kong



Mary-Claire King



Lim Pak Leong

Track 4

Symposium

The Asian Century: How NGOs are Addressing Emerging Health Threats in Asia

Host: FHI 360

Chair: Christina Misa Wong | Scientist | FHI360 | United States

Outline: The role of international and local NGOs is often thought to be focused narrowly on program implementation and technical assistance. But NGOs often play multi-faceted roles in the health and development sphere,

along with other key actors such as government, civil society, the private sector, academia, and public and private funders. The emerging health challenges facing the Asia Pacific region in the 21st century are not going to be solved by any one actor. These challenges are increasingly wicked problems whose complex interdependencies will require integrated and cross-sectoral solutions and an array of partnerships in order to achieve success. This one-hour session will provide three examples of how NGOs are involving multiple stakeholders in complementary approaches to addressing issues such as multi-drug resistant tuberculosis,

the green hospital movement, and integrated community health services.

Speakers: Greening the Health Care Sector: Issues and Innovative Solutions Using a Partnership Approach

Janet Robinson | Director of Laboratory Sciences and Director of Research for the Asia Pacific Region | FHI 360 |

Thailand

Fighting Drug-Resistant Tuberculosis in the Mekong: Engaging Civil Society for Tuberculosis Control Anh Innes | Director CAP-TB Project | FHI 360 | Thailand

Strengthening Civil Society and Health Capacity at the Community Level in Myanmar Matthew Tiedemann | Chief of Party, Shae Thot Project | PACT Mynamar | Myanmar





Christina Misa Wong



Janet Robinson



Matthew Tiedemann



Anh Innes



Innovative Philanthropy in Health



Host:

Asia Centre for Social Entrepreneurship & Philanthropy, NUS Business School, National University of Singapore Saw Swee Hock School of Public Health, National University of Singapore

Chair:

Audrey Chia | Associate Professor, NUS Business School & Saw Swee Hock School of Public Health |

Co-Director, Asia Centre for Social Entrepreneurship & Philanthropy | Singapore

Outline:

Philanthropists and social entrepreneurs have made huge contributions to health in Asia. In recent years, philanthropists have not simply donated funds but provided expertise, designed interventions and stayed engaged with recipients. This session features three of the most innovative approaches used by notable philanthropic organisations and individuals to make sustained, positive impact on health in Asia:

Strategic philanthropy by a family foundation which is also an operating foundation (Zuellig Family Foundation)

Involved and engaged philanthropy by a corporate foundation (Novartis Foundation for Sustainable Development)

Entrepreneurial philanthropy (Viva Healthcare, Richard Chandler Corporation)



Audrey Chia

Speakers:

Karen Mok | Roll Back Malaria Partnership Champion

Strategic Philanthropy - Philippine Rural Health

David Zuellig | Board of Trustees | Zuellig Family Foundation | Philippines

Innovative Philanthropy in Health: A View from the Private Sector

Klaus Leisinger | Chairman Novartis Foundation for Sustainable Development | Novartis International AG |

Switzerland

John Forsyth | Managing Director Viva Healthcare | Richard Chandler Corporation | Singapore



Karen Mok



David Zuellia



Klaus Leisinger

Oral Presentation

New Voices in Asian Health

Millenia 2

15 45 - 16 45

Chair: Richard Horton | Editor-In-Chief | The Lancet | United Kingdom

Speakers: Who Should Pay for Global Health, and How Much? Lessons from Kyoto

Luis Roman Carrasco | National University of Singapore | Singapore

Understanding, Evaluating, and Improving Health System Surge Capacity for Mitigating Pandemics and Other Disasters in Southeast Asia

James W. Rudge | London School of Hygiene & Tropical Medicine | Thailand

Trends in Epidemiology and Antibiotic Resistance in Enteric Fever in Last Two Decades in Nepal: Evidence

from a Systematic Review and Meta-Regression Surendra Karki | Monash University | Australia

Participation in Social Networks as a Determinant for Health: Evidence from India

Somen Saha | University of Melbourne | Australia





Richard Horton



Luis Roman Carrasco



Somen Saha



Surendra Karki



James W. Rudge

Industry Symposium

Something to Teach and Learn – Practical Responses to Changes in Health Care



KPMG Host:

Outline:

As we see health care organizations grapple with an era of rapid and dramatic change, and the combined forces of ageing populations, technological advances, rising expectations and spiralling costs, they can choose to either transact - incrementally improving their performance - or they can choose to transform innovating new strategies and models for delivery and financing. In this respect, we all have something to teach, and something to learn. This applies to individuals, and equally to organisations, systems and nations. We are starting to see top academic and medical centres globally developing deep-seated transformational strategies which enable them to provide better care at lower cost. It's a truly global campaign, and we believe there are unique lessons for our people, our providers and our communities.



Speaker: Malcolm Lowe-Lauri | Partner | KPMG's Global Center of Excellence for Health | United Kingdom

Industry Symposium

Industry Symposium

Innovations @ Health Care in Improving Access to Health Care

PHILIPS

Host:

Philips Healthcare



Vincent Chan

Outline: As organizations and governments respond to access to health care in the region, changes in care delivery and health

infrastructure will be essential to be in place. It's a global stance that people should be healthy, live well and enjoy life. As a technology company that cares about people we at Philips challenge ourselves every day to deliver on this promise and help solve the world's toughest health care concerns and clinical challenges through meaningful innovation. In this presentation, the presenter will cover on what drives the future of health care and how does developing innovative solutions across the continuum of care in partnership with clinicians and government to improve patient outcomes, provide better value and expand access to care across a diversified region. The presenter will also discuss on key approaches and challenges (eg. Policy, clinical mindset, stakeholder engagements) to deliver innovative solutions that enables a change in health care for the better. From the hospital to the home, we think very broadly about how innovation impacts patients, health care systems and patients. From products and services to new clinical protocols, business models and partnership arrangements its about having solutions to help patients and clinicians improve patient outcomes, provide better value and expand access to care to also improve access to health care in the region.

Speaker: Vincent Chan | General Manager ASEAN | Philips Healthcare

Asian Ministers Panel Discussion

Sustainable Development in Asia: The Role of Health Policy

Grand Ballroom

17.00 - 18.30

Moderator:

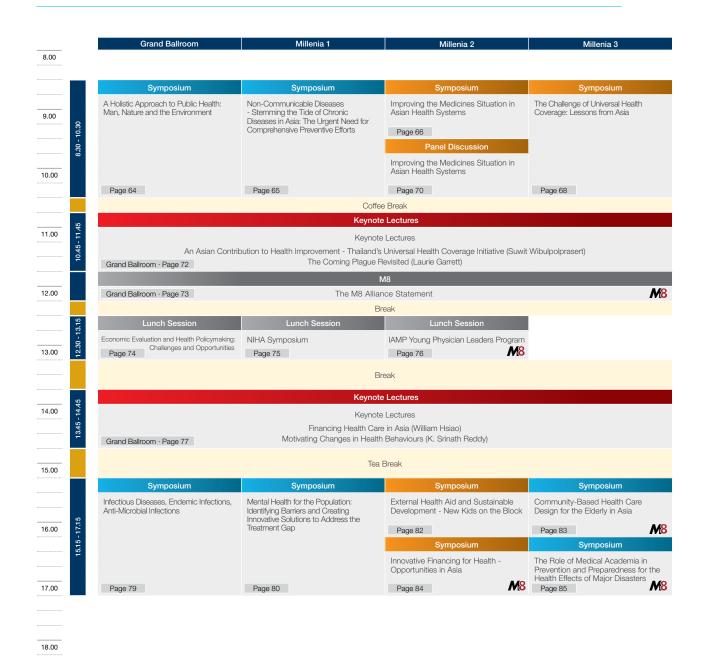
Kishore Mahbubani | Dean | Lee Kuan Yew School of Public Policy | National University of Singapore | Singapore

Outline:

The world is well into the second decade of the "Asian Century". In Asia, there have been different approaches to the way health systems are structured. Despite the differences, the aims of delivering good-quality health care, while keeping costs down, and nurturing a healthy workforce are shared across borders. Emerging infectious diseases, an increasing prevalence of chronic diseases brought about by shifting demographics and lifestyle changes are complex challenges, bringing the issue of sustainability to the forefront. At this panel discussion, Asian Health Ministers will share their perspectives on sound, sustainable and system-wide health policies and the link to economic progress and sustainable development.

SUMMIT PROGRAM Wednesday, April 10th

19.00



A Holistic Approach to Public Health: Man, Nature and the Environment



Track 4

Host: Ministry of Health

Chair: Tommy Koh | Ambassador-At-Large at the Ministry of Foreign Affairs | Special Adviser of the Institute of Policy

Studies | Chairman of the Centre for International Law | National University of Singapore | Singapore

Speakers: Lim Mong Hoo | Chief Specialist (Water Quality) | PUB Singapore | Singapore

Peter Ng | Director of Raffles Museum of Biodiversity Research & Tropical Marine Science Institute | Department of Biological Sciences, National University of Singapore | Singapore

Chia Kee Seng | Dean | Saw Swee Hock School of Public Health | National University of Singapore | Singapore



Tommy Koh

Panel Discussion

Tommy Koh | Ambassador-At-Large at the Ministry of Foreign Affairs | Special Adviser of the Institute of Policy Studies | Chairman of the Centre for International Law | National University of Singapore | Singapore

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Peter Ng | Director of Raffles Museum of Biodiversity Research & Tropical Marine Science Institute | Department of Biological Sciences, National University of Singapore | Singapore

Chia Kee Seng | Dean | Saw Swee Hock School of Public Health | National University of Singapore | Singapore



Lim Mong Hoo



Peter Na



Chia Kee Seng

Non-Communicable Diseases – Stemming the Tide of Chronic Diseases in Asia: The Urgent Need for Comprehensive Preventive Efforts

Track 4 Millenia 1 8.30 - 10.30

Host: Saw Swee Hock School of Public Health, National University of Singapore

Chair: Lim Yee Wei | Vice Dean (Research) | Saw Swee Hock School of Public Health | National University of Singapore

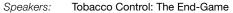
| Singapore

Outline: The rate of increase in the burden of chronic diseases in Asia is alarming. More can be done in all sectors of

health, whether be it primary prevention of risk factors such as smoking as it relates to lung cancer, or

delivering better primary care to keep the diabetic population well and healthy.

In this session, our panel of distinguished speakers will address systems level preventive health policies in tobacco control and urban health, community based obesity prevention programs, and describe a comprehensive primary care delivery model centered on patients with chronic diseases. The presentations will highlight lessons learned from these policy interventions and discuss possible applications in the future.



K. Srinath Reddy | President | Institute of Public Health | India



Rob van Dam | Department of Epidemiology and Public Health | Saw Swee Hock School of Public Health | National University of Singapore | Singapore

Kuala Lumpur's Health Response to Health Care Problems in an Urban Setting

Shahnaz Murad | Director | Institute for Medical Research | Ministry of Health Malaysia | Malaysia

Patient Centered Medical Home

Paul Grundy | IBM's Global Director of Healthcare Transformation | President, Patient-Centered Primary Care Collaborative | Adjunct Professor University of Utah Department of Family and Preventive Medicine | IBM | United States



Lim Yee Wei



K. Srinath Reddy



Paul Grundy



Shahnaz Murad



Rob van Dam



Improving the Medicines Situation in Asian Health Systems



Hosts: Centre for Biomedical Ethics, Yong Loo Lin School of Medicine, National University of Singapore

Department of Population Medicine, Harvard Medical School

Chair: Enki Tan | Executive Chairman | Giti Tire Company Limited | Singapore

Background: Despite the existence of many clinically effective medicines to prevent deaths from treatable causes, access to medicines remains limited, their use is frequently inappropriate, and they represent a great economic burden on households and systems. The growing epidemic of non-communicable diseases and the continued prevalence of communicable diseases, a pipeline of innovative, expensive medicines that benefit fewer individuals, and national and global resource constraints will heighten existing challenges.

> The global movement toward universal health coverage, spearheaded by Asian countries; technology advances; and an acknowledgment of needed change in pharmaceutical industry practices promise opportunities to improve the dismal medicines situation in the region. Realizing these opportunities requires new multi-stakeholder strategies that address questions of equity, human rights, and behaviour change of all stakeholders in systems.



Description:

Two one-hour sessions at the World Health Summit Asia Regional Meeting will address medicines situations in Asian health systems. In the first session, we will lay out the rationale for focusing on medicines in Asian health systems at this time, from economic, constitutional, ethical, and clinical perspectives. In the second session, senior representatives from government, civil society, the health professional community, and the pharmaceutical industry will propose how these constituencies need to change behaviour to meet the 21st century medicines challenges in the region.

Jointly, both sessions will (a) lay out key issues for improving pharmaceutical situations in Asian countries; (b) Objectives:

propose approaches for change from the perspectives of major stakeholders; and (c) suggest next steps

toward a multi-stakeholder strategy.

Enki Tan

Speakers: Expanding Coverage – Why Medicines Access Can Decrease Poverty

William Hsiao | K.T. Li Professor of Economics Department of Health Policy and Management and Department of Global Health and Population | Harvard School of Public Health | United States

Medicines in Health Systems - Medicines Access as a Human Right

Hans Hogerzeil | Professor in Global Health | University of Groningen | Netherlands

Medicine Access and Affordability - Key Ethical Questions

Alastair Campbell | Director | Centre for Biomedical Ethics | National University of Singapore | Singapore

Medicines in Health Systems - Why Access is Not Enough

Anita Wagner | Department of Population Medicine | Harvard Medical School and the Harvard Pilgrim Health Care Institute | United States

Chair's Synthesis – Challenges and Opportunities for Improving Medicines Situations in Asia Enki Tan | Executive Chairman | Giti Tire Company Limited | Singapore



William Hsiao



Hans Hogerzeil



Anita Wagner



Alastair Campbell



The Challenge of Universal Health Coverage: Lessons from Asia



Host: Ministry of Health Singapore

Chair: Lee Chien Earn | Chief Executive Officer | Changi General Hospital | Singapore

Background: Strong consensus has emerged amongst all countries - both developed an developing, on the importance of

Universal Health Coverage (UHC) for sustainable development. UHC ensures that citizens have access to quality health care without facing catastrophic financial payments. Recognising the economic and social benefits that UHC provides, international organisations such as the UN, WHO and Worldbank have committed towards promoting and strengthening UHC systems amongst member countries. Achieving UHC is no easy task even for developed countries. The challenge is not only in achieving UHC but in maintaining universal

access in the face of rising non-communicable disease and population ageing.

Description: This session shares the experience of three Asian countries in meeting the challenge of Universal Health

Coverage, and the on-going efforts in maintaining such coverage.

Objectives: This session will also discuss how health care financing systems can best meet the challenges that rising

non-communicable disease and population ageing will pose for UHC. We will draw lessons which can be

applied by countries around the world.

Speakers: Health and Sustainable Development Goals - The Role of Asia

Suwit Wibulpolprasert | Senior Adviser for Disease Control | Ministry of Public Health | Thailand

Kelvin Bryan Tan | Director | Policy Research and Economics Office | Ministry of Health | Singapore

Universal Health Coverage in China

Hu Shanlian | School of Public Health | Fudan University | China



30

Suwit Wibulpolprasert



Hu Shanlian





Panel Discussion

Improving the Medicines Situation in Asian Health Systems



Host: Centre for Biomedical Ethics, Yong Loo Lin School of Medicine, National University of Singapore

Department of Population Medicine, Harvard Medical School

Chair: Dennis Ross-Degnan | Department of Population Medicine, Harvard Medical School | Director of Research |

Harvard Pilgrim Health Care | United States

Background: Despite the existence of many clinically effective medicines to prevent deaths from treatable causes, access to medicines remains limited, their use is frequently inappropriate, and they represent a great economic burden on households and systems. The growing epidemic of non-communicable diseases and the continued prevalence of communicable diseases, a pipeline of innovative, expensive medicines that benefit fewer individuals, and national and global resource constraints will heighten existing challenges.

> The global movement toward universal health coverage, spearheaded by Asian countries; technology advances; and an acknowledgment of needed change in pharmaceutical industry practices promise opportunities to improve the dismal medicines situation in the region. Realizing these opportunities requires new multi-stakeholder strategies that address questions of equity, human rights, and behaviour change of all stakeholders in systems.



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Objectives: Jointly, both sessions will (a) lay out key issues for improving pharmaceutical situations in Asian countries; (b)

propose approaches for change from the perspectives of major stakeholders; and (c) suggest next steps

toward a multi-stakeholder strategy.





Dennis Ross-Degnan

Panel Discussions:

Speakers: Perspective of Country Governments

Ali Ghufron Mukti | Vice Minister | Ministry of Health | Indonesia

Perspective of Civil Society / Non-Governmental Organization Kaosar Afsana | Director | BRAC Health Programme | Bangladesh

Differential Pricing, Patient's Assistance Programs and Philanthropy

Klaus Leisinger | Chairman Novartis Foundation for Sustainable Development | Novartis International AG | Switzerland

Perspective of Providers

Alfredo Bengzon | President and Chief Executive Officer | Medical City Hospital | Philippines

Chair's Synthesis – Next Steps Toward Innovative Stakeholder Collaborations to Improve Medicine Situations in Asia

Dennis Ross-Degnan | Department of Population Medicine | Harvard Medical School | Director of Research | Harvard Pilgrim Health Care | United States



Kaosar Afsana



Klaus Leisinger



Dennis Ross-Degnan



Alfredo Bengzon

Summit Program

Grand Ballroom 10.45 - 11.45

Keynote Lectures Keynote Lectures



Abu Bakar Suleiman



Suwit Wibulpolprasert



David L. Hevmann



Laurie Garrett

Moderator: Abu Bakar Suleiman | President | International Medical University | Malaysia

Speaker: An Asian Contribution to Health Improvement - Thailand's Universal Health Coverage Initiative Suwit Wibulpolprasert | Senior Adviser for Disease Control | Ministry of Public Health | Thailand

Thailand started its attempt at expanding access to essential health services without financial barrier since 1975 and achieved UHC in 2002. Benefit package has been expanded greatly in first 10 years. Five lessons can be learnt from 40 years experiences. Thailand has proved that country does not have to wait until it is rich to start UHC. The attempts started in 1975 when GDP per capita was mere \$US 390 and achieve UHC in 2002 at \$US 1,900 per capita. It also proved that UHC is the effective measures to reduce poverty. Each year more than 100,000 households were prevented to fall into poverty from catastrophic illnesses. Thai UHC exemplified need to expand primary health infrastructure to ensure health care access. It also demonstrated that fiscal spaces within health sector and government budget could be created to allow more health investment. Finally it demonstrated the effectiveness of strategic purchasing in expanding coverage with well-controlled cost, supported by evidences generated through policy and researches and technology assessments. Thailand achieves UHC with quite deep benefit package when total health expenditure is 6% of GDP.

Future challenges include harmonization of three schemes: ageing population, explosion of expensive new technologies, and sustainable financing.

David L. Heymann | Head and Senior Fellow | Chatham House Centre on Global Health Security and Professor | Infectious Disease Epidemiology | London School of Hygiene & Tropical Medicine | United Kingdom

Speaker: The Coming Plague Revisited

Moderator:

Laurie Garrett | Senior Fellow for Global Health | Council on Foreign Relations | United States

Ten years ago today the SARS epidemic was unfolding across Asia, including here in Singapore. Since then the global health commnity has take steps to better see and respond to outbreaks, even as attention has shifted away from infectious to noncommunicable diseases. But complacency and nonchalance are dangerous: New challenges are emerging and the architecture of global health governance is ill-designed for both infectious and noncommunicable disease challenges.

Grand Ballroom

11 /5 10 15

The M8 Alliance Statement

Moderator: Richard Horton | Editor-In-Chief | The Lancet | United Kingdom

Outline: The M8 Alliance statement, endorsed by the M8 Alliance, will be issued at the first Regional Meeting of the

World Health Summit in Singapore. This statement is a call to action concerning health challenges faced by Asian nations in the areas covered by the four main themes at the Summit. This statement calls on leaders and policy makers in Government, Non-Governmental Organizations, and the Private Sector to make health a priority and to work on closing the significant gaps that still exist in Asia. It emphasizes the importance of a

healthy population as the key to sustainable development.

Speaker: John Eu-Li Wong | Isabel Chan Professor in Medical Science | Co-Chairman, WHSRMA 2013 Organizing

Committee | Vice Provost (Academic Medicine) | National University of Singapore | Singapore

M8 Alliance Representative

Detlev Ganten | Founding President, World Health Summit | Chairman, Foundation Board, Charité Foundation | Charité - Universitätsmedizin Berlin | Germany

IAP Representative

Sania Nishtar | Founder and President | Heartfile | Pakistan





Richard Horton



John Eu-Li Wong



Detlev Ganten

Lunch Session

Grand Ballroom

Economic Evaluation and Health Policymaking: Challenges and Opportunities



Lim Yee Wei

Chair:

Lim Yee Wei | Vice Dean (Research) | Saw Swee Hock School of Public Health | National University of Singapore | Singapore

Outline:

In this session, speakers from the United Kingdom, Thailand and Singapore will share each country's experience in translating health technology assessment evidence into health care policy.

They will discuss the institutional arrangements in place for facilitating the evidence translation process and also the processes for turning questions decisions makers have into research questions that can be addressed by prospective evidence generation.

Furthermore, speakers will share some of the successes and lessons learned in the process of implementing health technology assessment evidence in practice; methods for measuring impact and attributing health care improvement and increased efficiencies to specific health policies and, finally, ways for ensuring stakeholder buy-in and consultation that is meaningful and can lead to change in policy, when appropriate.

Speakers will be encouraged to use specific examples/case studies of evidence-informed policy decisions, how these were identified as policy priorities, how the decisions were made and uncertainty dealt with and how the impacts on health outcomes (where possible to quantify) bit also on organization and overall costs were measured and attributed to the guidance.

The session will conclude with a discussion on what the right ingredients are in terms of institutions, information and technical expertise, for increasing the likelihood of health policy impact on practice.



Michael Rawlins | Chairman | National Institute of Health & Clinical Excellence (NICE) | United Kingdom

Health Technology Assessment and Policymaking in Thailand

Sripen Tantivess | Senior Researcher | Health Intervention & Technology Assessment Program (HITAP) | Thailand

Translating Knowledge into Action

Lee Chien Earn | Chief Executive Officer | Changi General Hospital | Singapore



Sripen Tantivess

Michael Rawlins



Lee Chien Earn

Lunch Session

NIHA Symposium

Millenia 1

12 30 - 13 15

Chair: Melvyn Sim | Department of Decision Sciences | NUS Business School | National University of Singapore

Speakers: Yan Chow | Director, Innovation and Advanced Technology, Digital Health Technology and Strategic Initiatives |

Kaiser Permanente Information Technology | United States

Affordable Excellence:

The Singapore Health Care Story How to Create and Manage Sustainable Health Care Systems

William Haseltine | President | ACCESS Health International | United States



Yan Chow



William Haseltine

Lunch Session

IAMP Young Physician Leaders Program



iamp

Host:

InterAcademy Medical Panel

Chair:

Looi Lai-Meng | Co-Chair | InterAcademy Medical Panel

Outline:

The IAMP Young Physician Leaders (YPLs) program will bring together 10 physicians under age 40, nominated by academies of medicine and science which are members of the IAMP in Asia and of the M8 Alliance. These individuals have been selected because of demonstrated accomplishments in research, clinical practice, public health, health service management and health policy and who have shown leadership qualities and commitment to broader societal well-being in their professional and personal activities. This workshop session will feature 4-5 of these YPLs who will initiate what we hope will be a lively roundtable by sharing their responses to two questions:

- "What are the major leadership challenges they face in their careers?"
- "How the current health and medical sector leaders can be more supportive of them?"

Recommendations from the discussion will be incorporated into future IAMP work on supporting the next

generations of physician leaders worldwide.



Looi Lai-Meng

Speaker: What are the Major Leadership Challenges They Face in Their Careers?

How the Current Health and Medical Sector Leaders Can Be More Supportive of Them?

Carolyn Lam | Consultant, Cardiac Department | National University Heart Centre | Singapore (NUHCS) Associate Professor | Yong Loo Lin School of Medicine | National University of Singapore | IAMP YPL 2012 | Singapore



Carolyn Lam

Keynote Lectures

Keynote Lectures

Grand Ballroom 13.45 - 14.45

Moderator: David Reisman | Professor of Economics | School of Humanities and Social Sciences | Nanyang Technological

University | Singapore

Speaker: Financing Health Care in Asia

William Hsiao | K.T. Li Professor of Economics Department of Health Policy and Management and Department of Global Health and Population | Harvard School of Public Health | United States

Good health is a major contributor to economic growth and people's wellbeing. Good health for all the citizens requires funding. Most Asian nations are struggling to achieve universal health coverage with adequate and sustainable financing. Often nations' health care needs far exceed the financial resources available to fund them, particularly for low and middle income countries. For higher income nations, aging and rapid increasing in chronic illnesses along with the diffusion of expensive new medical technology and drugs put pressure on their financial resources. This session analyzes the major financing issues confronting Asian nations and the options they have to address them. We will also assess the innovative approaches in financing, examine the experience around the globe and draw lessons for Asian countries.



David Reisman



William Hsiao

Grand Ballroom 13.45 - 14.45

Keynote Lectures Keynote Lectures



Phillip Phan



K. Srinath Reddy

Moderator: Phillip Phan | Executive Vice-Dean | The Johns Hopkins Carey Business School | Armstrong Institute for Patient Safety and Quality | The Johns Hopkins School of Medicine | United States

Speaker: Motivating Changes in Health Behaviours

K. Srinath Reddy | President | Institute of Public Health | India

Behaviour change for improving health extends across all areas of health policy and practice. Apart from the conventional application of behaviour change models to individuals who are to be motivated for adopting health enabling behaviours and giving up health eroding behaviours, behaviour needs to change even at the level of policymakers and institutions engaged in setting health priorities and steering programmes across multiple sectors.

From improving levels of childhood immunization and institutional deliveries to tobacco cessation and adherence to prescribed treatment for secondary prevention of coronary heart disease, the health system needs to employ effective motivational methods for behaviour change. From exclusive breast feeding in early infancy to regular physical activity in adult life, behaviour change is a critical component of health promotion and disease prevention.

Interventions for behaviour change require a synergy between empowering education (which provides knowledge, motivation and skills) and enabling environment (which is conducive to people making and maintaining healthy choices across the life course). Effective interventions have ranged from non-personal policy measures (such as tobacco taxes or legislation for smoke-free public places) to conditional cash transfer and in-kind incentives that are attractive to individuals. Pathways of change extend from re-setting social norms of communities through environmental engineering to social marketing which targets change in the perceptions, priorities, beliefs and behaviours of individuals and families. Even more upstream are economic and trade policies which influence the availability and affordability of goods and services relevant to health.

Research on behaviour change, in the context of health promotion, needs to be inter-disciplinary integrating knowledge from diverse fields such as behavioural economics, social and cultural anthropology, urban engineering, communication sciences and information technology. Health systems research is now opening up to such inter-disciplinary engagement to provide a platform for knowledge generation and translation. This will increase the ability of health professionals to successfully shape and steer behaviour change at various levels, from policy to public health and clinical practice.

Symposium Infectious Diseases, Endemic Infections, Anti-Microbial Infections

Track 4
Grand Ballroom

Chair:

Jeremy Farrar | Professor of Tropical Medicine | Director of the Oxford University Clinical Research Unit | Singapore

Outline:

The session profiles several emerging and endemic infection health threats to Asia. The following subjects are addressed in order: public health, pathogen discovery, mathematical modelling, mapping and the feasibility of an AIDS free society. Each presenter is asked to draw on their experience and to help translate the lessons learned in the emerging and endemic infection arena that can be applied to non-infectious diseases. They will also identify cross cutting issues of wider importance in mitigating these emerging health threats and in making progress. These include the importance of international collaboration, the future contribution of smart surveillance, technological development and its importance and understanding the epidemiological significance of the animal - human interface. Special consideration is also given to much better integration of clinical work, surveillance in the human and animal sector, smarter diagnostics, mapping the distribution of these threats and using mathematical modeling to provide insights about their epidemiology and control.



Antimicrobial Resistance: An Emerging Public Health Problem Across the Sectors

David L. Heymann | Head and Senior Fellow | Chatham House Centre on Global Health Security and Professor | Infectious Disease Epidemiology | London School of Hygiene & Tropical Medicine | United Kingdom

The Threat of Emerging Infectious Diseases in Asia

Wang Linfa | Director of the Program in Emerging Infectious Diseases | Duke-NUS Graduate Medical School | Singapore

Population Dynamics and Control of Hand, Foot and Mouth Disease in SE Asia

Bryan Grenfell | Professor of Ecology and Evolutionary Biology and Public Affairs | Woodrow Wilson School | Princeton University | United States

The Global Distribution and Burden of Dengue

Simon Hay | Professor of Epidemiology | Department of Zoology | University of Oxford | United Kingdom

Is AIDS Free Society an Achievable goal?

Prasada Rao Jonnalagadda | Former Secretary Health of India | Former Regional Director for Asia of UNAIDS | Special Envoy for Aids in Asia and the Pacific of the UN Secretary-General | India



Prasada Rao Jonnalagadda



Simon Hay



Jeremy Farrar



David L. Heymann



Wang Linfa



Bryan Grenfell



Mental Health for the Population: Identifying Barriers and Creating Innovative Solutions to Address the Treatment Gap



Host:

Institute of Mental Health

Chair:

Chua Hong-Choon | Chief Executive Officer | Institute of Mental Health | Singapore

Outline:

Not only are mental disorders prevalent in every country, but also it is common that many of those with mental disorders are neither seeking nor receiving help. This is the case even in developed countries: of the 31% of the US population affected by at least one mental illness, 67% of them are not being treated and in Europe where mental illness affects 27% of people yearly, 74% of them received no treatment. Generally, the treatment gap is wider in developing than in developed countries with the proportion of those receiving help corresponding with the countries overall spending on health care in particular mental health care.



Chua Hong-Choon

Whether or not an individual with mental disorder seeks help is dependent on and influenced by multiple factors including demographic characteristics, culture and religion, socioeconomic factors and the geographical accessibility of services. Understanding these factors and their interaction is important in any effort to change and inculcate appropriate help-seeking behaviour in order to improve accessibility of care.

With medical advances that prolong life, ageing and its associated multimorbidity (including mental illnesses) has already moved beyond a public health issue. A raft of initiatives and interventions would be needed to alleviate the burdens and the adverse consequences of untreated mental disorders. These include documentation of the prevalence of mental illnesses and the extent and nature of the unmet needs, establishing a system for early detection and treatment, training the lay community to recognize manifestation of mental illnesses, and measures to reduce stigmatization and discrimination. Evidence from research has to be actionable to policy makers who operate in a world with multiple societal, economic and political influences, and the need for mutual understanding and collaboration between policy makers and scientists is vital to address this gap.

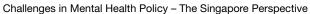
Speakers:

Bridging the Gap for People with Mental Illness

Chong Siow Ann | Vice-Chairman Medical Board (Research) | Institute of Mental Health | Singapore

Mental Health First Aid: An International Program for Building Community Capacity for Early Intervention
Anthony Francis Jorm | Professorial Fellow and NHMRC Australia Fellow, Population Mental Health Group |
University of Melbourne | Australia

Treatment Challenges for People with Dementia: Clinician, Caregiver and Policy Perspective
Parminder Raina | Raymond and Margaret Labarge Chair in Optimal Aging | Department of Clinical Epidemiology
& Biostatistics | Faculty of Health Sciences | MacMaster University | Canada



Alan Ong | Deputy Director | Community Mental Health, Community Mental Health Branch | Primary and Community Care Division | Ministry of Health | Singapore



Chong Siow Ann



Anthony Francis Jorm



Alan Ong



Parminder Raina

Track 3 Millenia 2

Symposium

External Health Aid and Sustainable Development - New Kids on the Block



Host: Lee Kuan Yew School of Public Policy, National University of Singapore, Singapore

Chairs: Ratna Sitompul | Dean, Faculty of Medicine | University of Indonesia | Indonesia

Tikki Pang | Visiting Professor | Lee Kuan Yew School of Public Policy | National University of Singapore | Singapore



Outline:

Development assistance is a significant mechanism by which major countries exercise influence in the global health arena. Of the major Asian powers, Japan has long provided significant funding, while China and India have primarily been recipients but are beginning to increase their funding roles. Interesting differences exist in the objectives of such aid from these three countries, in the kinds of aid which is offered, and the way in which aid is organized and delivered in recipient countries (Florini et al, Global Policy 3, 336-347, 2012). The session will discuss the amounts, channels, modes, disease allocations and the geographic focuses of their foreign health aid, and delineate the institutional structures that govern the formulation and implementation of foreign health aid policy in each of these countries. It will also discuss what influence China, India, and Japan have and may develop in the global health arena, and to understand what if anything is different from existing approaches to global health governance and what might be expected from these three key Asian nations vis-à-vis global health.

Ratna Sitompul

Speakers:

External Health Development: Aid-Increasing Involvement of China

Huang Yanzhong | Senior Fellow for Global Health | Council on Foreign Relations | United States

Emerging Contours of Indian Health Diplomacy

Sachin Chaturvedi | Senior Fellow | Research and Information System for Developing Countries (RIS) | India

External Aid: What Works; What Doesn't - Lessons From Africa

Nelson Sewankombo | Principal | College of Health Sciences | Makerere University | Uganda



Tikki Pang



Huang Yanzhong



Sachin Chaturvedi

Community-Based Health Care Design for the Elderly in Asia

Host: Kyoto University Graduate School of Medicine

Chair: Kozo Matsubayashi | Kyoto University School of Medicine and Public Health | Japan

Outline:

It is only during the last half century when aging came to be truly thought of as a societal issue rather than simply a personal one, as well as a challenge to be tackled by science and medicine. Diseases used to be studied only in hospitals and laboratories, centering on patients treated there. As modern medicine developed, diseases were compartmentalized according to organs and organ systems. This advanced medical care has revolutionized the treatment of acute diseases and vastly increased survival. As the result, the average life expectancy in Asia is increasing at a rate never seen before in human history. However, the resulting supergraying of society has necessarily produced a population of frail elderly people requiring nursing care. Geriatric medicine is charged with finding ways to assist elderly persons who have chronic diseases affecting multiple organs and are still living within their communities. The need to provide comprehensive and holistic medical care has been called for; however, it is not easy to provide integrated health care within a hospital system that has been compartmentalized into specialties. Doctors working in hospitals tend to think in terms of diseases and conditions in his/her specialty and has little latitude to consider other issues. How is the patient spending his/her time? What kind of social interaction and support does the patient have from friends and family? What does the patient eat? What are the important issues this patient faces in daily life? What is their wisdom regarding their purpose of life? These are not questions asked by medical staff in hospitals.

To truly understand the health issues of the elderly, we ventured into communities and visited elderly persons in their homes and cultural environments. In this session, several community-based health care designs for the elderly in Pan-pacific and Asian countries will be reviewed.

Speakers:

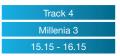
Community-Based Health Care Designs for the Elderly in Japan and Asia

Kozo Matsubayashi | Kyoto University School of Medicine and Public Health | Japan

Challenges in the Provision of Community Aged Care in China

Colette Browning | Deputy Head, Professor of Healthy Ageing | School of Primary Health Care | Monash University | Australia

Chan Wah Tiong | Director | Community Care Development Division | Agency for Integrated Care | Singapore









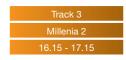
Kozo Matsubayashi



Colette Browning



Chan Wah Tiong



Chair:

Innovative Financing for Health - Opportunities in Asia



Host: Imperial College London

Imperial College London Rifat Atun | Professor of International Health Management | Head of the Health Management Group |

Imperial College London | United Kingdom

Speakers: Sabahattin Aydin | Ex Deputy Minister of Health | Rector Medipol University Istanbul | Turkey

Robert Fillipp | Director | innovative Finance Foundation | Switzerland

Caitlin MacLean | Associate Director of Financial Innovations Labs | Milken Institute | United States

Marie-Ange Saraka-Yao | Director of Resource Mobilisation | GAVI Alliance | Switzerland



Rifat Atun

Outline:

The Role of Medical Academia in Prevention and Preparedness for the Health Effects of Major Disasters

Track 4 Millenia 3 16.15 - 17.15

Host: Kyoto University Graduate School of Medicine

Chair: Shunichi Fukuhara | Deputy-Dean | Kyoto University School of Public Health at Graduate School of Medicine

| Vice President, Fukushima Medical University | Japan

On March 11, 2011, a major disaster occurred in the great east Japan. 2 years later, health hazards to the public remain. The health hazards caused by such disasters range from immediate injury, death and sanitation

to mental-health problems and the long-term physical effects of exposure to ionizing radiation in Fukushima. This is not a local issue, but it could happen anywhere in the world.

With the recent and ongoing tragedy as a trigger, the world Health Summit (M8) leadership decided in October 2012 that M8 will regularly have session on the role of medical academia in preventing and preparing for the health effects of major disasters, organized by Kyoto University and Fukushima Medical University.

At this regional meeting in Singapore 2013, specifically, this session will highlight and address the role of medical academia in three areas:

- 1. Health Emergency Management in an Urban Setting
- 2. Securing sanitation: a disaster-responsive and environmentally friendly portable toilet
- 3. Management of blood for transfusion in disaster setting

Speakers: Health Emergency Management in an Urban Setting

Arturo Pesigan | Team Leader of Urban Health Emergency Management | WHO Center for Health

Development (WHO Kobe Centre) | Japan

Urine Diverting System for Securing Sanitation in Disaster and Emergency Situations

Yoshihisa Shimizu | School of Engineering | Kyoto University | Japan

Japanese Disaster, World Experience

Kenneth E. Nollet | Fukushima Medical University | Japan







Yoshihisa Shimizu





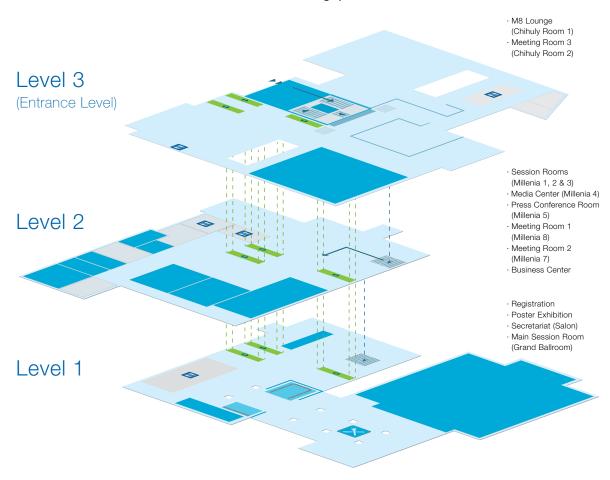


Shunichi Fukuhara

Conference Venue

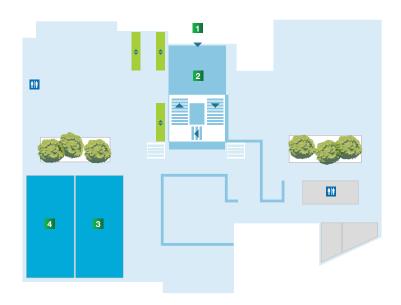
A dynamic business hotel with more than 35,000 square feet of pristine indoor and outdoor meeting areas, The Ritz-Carlton, Millenia Singapore specializes in pairing ideal meeting rooms with impeccable service. The World Health Summit, Regional Meeting – Asia Singapore 2013 will utilize levels 1, 2 and 3 of the hotel. The session rooms are located on Level 2 and Level 1. The registration area, as well as the poster presentations, are located on Level 1.

Venue Overview - The Ritz-Carlton, Millenia Singapore



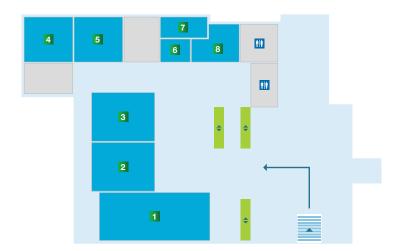
Venue Floorplan

Maps



Level 3 (Entrance Level)

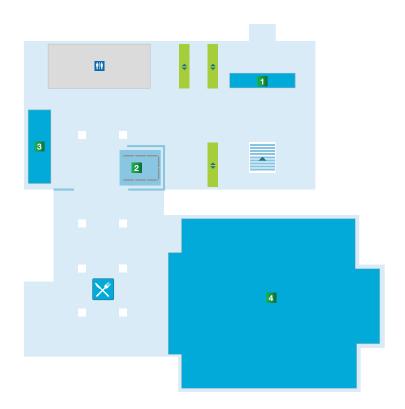
- 1 Entrance
- 2 Main Foyer
- 3 Meeting Room 3 (Chihuly 2)
- M8 Lounge (Chihuly 1)



Level 2

- Session Room (Millenia 1)
- 2 Session Room (Millenia 2)
- 3 Session Room (Millenia 3)
- 4 Media Center (Millenia 4)
- 5 Press Conference Room (Millenia 5)
- 6 Meeting Room 1 (Millenia 8)
- Meeting Room 2 (Millenia 7)
- **8** Business Center

Venue Floorplan



Level 1

- 1 Registration
- 2 Poster Exhibition
- 3 Secretariat (Salon)
- 4 Main Session Room (Grand Ballroom)

About the Host City - Singapore

Located right in the heart of Asia, Singapore thrives as an international financial and trading hub with a sterling reputation in many industries, including health care. A dynamic and multi-cultural city, Singapore is rich in contrast and color. Its reputed efficiency, skilled workforce, strong trade agreements, excellent infrastructure, extensive and high-growth networking base make Singapore a compelling destination for business and conventions. Looking further beneath Singapore's business legacy, you will find a rich social fabric that is vibrant, colorful and unique in many ways.

A city of contrast, Singapore is East and West. It is where the ideas of the future mingle with the ways of tradition. This is a city with many unique and enriching experiences, now and throughout the year. It has a rich events calendar, from world-class musicals to boisterous festivals. To find out more about "What you can do in Singapore", visit www.yoursingapore.com.

Travelling around Singapore

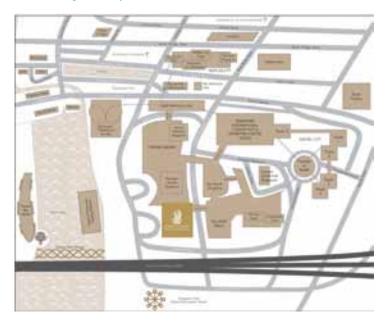
Singapore's efficient roads and transportation system make it easy to get around. The Mass Rapid Transit (MRT) system is probably the fastest way to get around Singapore besides taxis. There is also an efficient public bus network which covers most major attractions in the city. Standard single trip tickets or stored value smartcards (known as the ez-link card) can be purchased at MRT stations and used on both MRT and public buses.

Getting to and from Singapore Changi Airport

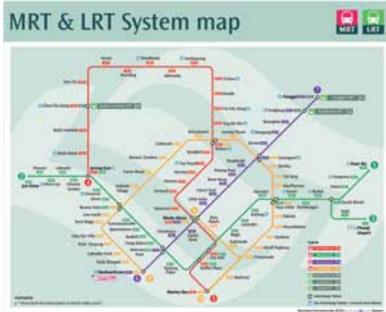
Singapore Changi Airport is on the eastern tip of Singapore and is located about 20-30 minutes from the city center by taxi. From the airport there are a number of ways to get into the city:

- Taxi is easiest simply follow the signs after clearing Customs. Meters are always used in Singapore and prices are reasonable. A trip to the city during the day will be between S\$20 - 30, including a S\$3 - 5 airport surcharge. An additional 50% surcharge applies between midnight and 06.00.
- Limousines charge a flat S\$50 to anywhere in the city and are a pretty good deal after midnight, as you can skip the
 queue and avoid the surcharge. The same pricing applies to chartering van-sized MaxiCabs, which are good for large
 groups or if you have lots of baggage.
- Mass Rapid Transit MRT trains run from a station between T2 and T3, but you'll need to change trains at Tanah Merah
 to a city-bound train: just exit through the left hand side door and cross the platform. The 30 minute ride to City Hall
 station costs \$\$1.90 plus a refundable \$\$1 deposit, and trains run 05.30 23.18.
- Bus Bus terminals can be found in the basements of T1, T2 and T3. 06.00 to midnight only. Fares are less than \$\$2.00, exact fare required (no change given) if you pay cash.

Vicinity Map of Ritz



MRT & LRT System Map



Fast facts about Singapore @ a glance

- · Country name: Republic of Singapore
- · Capital: Singapore
- · Location: An island and islets in the heart of Southeast Asia, between Malaysia and Indonesia
- Area: 712.4 sq km
- Highest point: Bukit Timah Hill at 163.36m
- Climate: Tropical. It's hot and sunny all year, with two monsoon seasons (December to March and June to September) bringing heavy rains
- Currency: Singapore Dollar (S\$)
- Population: 5.183.700 (Statistics Singapore, 2011)
- Ethnic groups: Chinese 74.1%, Malay 13.4%, Indian 9.2%, Other races 3.3%
- Language: Malay, Mandarin, Tamil and English are the 4 official languages in Singapore. English is the lingua franca.
- Religions: Buddhism 33.3%, Islam 14.7%, Christianity 11.3%, Taoism 10.9%, Catholicism 7.1%, Hinduism 5.1%, other religions 0.7%, none 16.9% (Statistics Singapore, Census of Population 2010)
- Literacy: 96.1% of the population above 15 years of age can read and write
- Communications: Excellent facilities and services, including 3G wireless service and a 104.5% household broadband penetration rate
- International country code: +65
- Internet country code: .sg

Things to do and see in Singapore

Singapore is a bustling cosmopolitan city with many unique and enriching experiences and throughout the year. You'll discover a ubiquitous collage of cultures, where people of different ethnicities and beliefs coexist. We've chosen some short excursions for you to experience the uniqueness of this Asian city. You may select your preferred leisure activities from the following tour operators:

East West Planners Pte Ltd

Telephone: +65 6238 8488 Email: fatsin@eastwestplanners.com

Tour East Singapore Pte Ltd

Telephone: +65 6738 2622 Email: daytours@toureast.net

Alternatively, please check the Summit Mobile Guide App on your smart devices for more information.

General Information

Address

The Ritz-Carlton, Millenia Singapore 7 Raffles Avenue Singapore 039799

Administrative Details

- The registration counters are located at Stella Gallery, Level 1 of The Ritz-Carlton.
- Registration Opening Times:

Monday, April 8 th	16.30
Tuesday, April 9 th	7.30
Wednesday, April 10 th	7.30

 Delegates will be issued a Summit name badge and a Conference Kit upon registration.

All delegates are required to wear the name badge the entire time they are at the venue, and for admittance to all official Summit Sessions.

- In case you lose your name badge or forget to bring it to the Summit, an administrative fee of \$\$20.00 will be charged to get a replacement badge. Your old name badge will be de-activated and will become invalid.
- The official Summit Language is English. There will be no interpretation services.
- For up-to-date information regarding the Summit including the Program, please login on to: www.worldhealthsummit.org/whsrma2013 or check out the WHSRMA 2013 Mobile Guide App via your smart devices.
- Lunches and tea and coffee breaks will be available to all delegates during the Summit.

- A total of 4 session rooms are used the Grand Ballroom located at Level 1, as well as function rooms Millenia 1, Millenia 2, and Millenia 3 located at Level 2. As the capacity of each session room is limited, the organizers reserve the right to refuse access to a session if the maximum number of delegates is reached.
- All delegates are advised to set their mobile phone to silent mode in all session rooms at all times.
- Out of respect for speakers' copyrights, photo taking or filming during any official Summit sessions is forbidden. In case of negligence, the organizers reserve the right to exclude a participant from the Summit.
- Please note that smoking is prohibited at the Summit venue.

Program and Conference Kits

- The Conference Kit including the final Summit Program will be available onsite for regularly registered delegates.
 Availability of onsite registrations may be limited.
- The organizers cannot assume liability for any changes in the program due to external or unforeseen circumstances and reserve the right to cancel, postpone, relocate or change any of the sessions.
- For up-to-date information regarding the Summit including the Program, please login to: www.worldhealthsummit.org/whsrma2013 or check out the WHSRMA 2013 Mobile Guide via your smart devices.

Categories of Summit Name Badges

MEDIA	CREW
GUEST	SPEAKER
ORGANIZER	DELEGATE
LIAISON OFFICER	

Technology

Summit Mobile Guide App

The World Health Summit, Regional Meeting - Asia Singapore 2013 (WHSRMA) has gone mobile. Download the WHSRMA 2013 Mobile Guide App to enhance your experience at the Summit. The Mobile Guide App offers delegates a more interactive experience at the Summit by facilitating delegate networking, providing evaluation, real-time posting and voting of Q&A. You will be able to plan your day at the meeting with schedules, maps. and more right at your fingertips. The app is compatible with iPhones, iPads, iPod Touch, Android, Blackberry and other smart devices. Download the WHSRMA 2013 mobile app via the App Store on your Apple device, Google Play on your Android device, or App World on your Blackberry device. You may also access the application via our mobile site at whsrma.flck.co from your smart device's browser.

Hotel Facilities

- The Business Center is located on Level 2 of The Ritz-Carlton and is open to all delegates for a fee.
- Meeting rooms and discussion corners are available at Level 1 for sideline meetings. You can approach the onsite registration counters located at the Stella Gallery, Level 1, to make your booking. Please note that confirmation of booking is based on first-come-first-served basis.
- Wireless LAN is available in all session rooms and foyers.
 However, performance is dependent upon factors (e.g. distance from access points, shape of the building, the number of accessing devices, etc) which are beyond the organizers' control.
- The Summit venue is accessible to Summit participants with disabilities. Please contact the Ritz-Carlton if you have any questions or need assistance.

 In the event of suspected fire, the fire alarm will ring and the first announcement will be broadcast to inform guests that the hotel is carrying out an investigation. At this point, no evacuation is required. After the investigation, if there is a need to evacuate, the second announcement will be broadcast to inform guests to evacuate via the nearest exit to the Assembly area.

Certificate of Attendance

 A Certificate of Attendance for all registered delegates will be available upon request at the registration desk, on April 9th and April 10th, from 3.00pm - 5.30pm. Please collect your certificate toward the end of the program (for day pass on April 9th, certificate can be collected on that day.)

Insurance and Liability

 The Summit organizers cannot accept liability for personal injury, loss of or damage to belongings of Summit participants, either during or as a result of the Summit.

Media

 Media has access to all official sessions of the World Health Summit, Regional Meeting – Asia Singapore 2013. Please refer to your Media Brief for more details. Press related information can also be found at the official Summit website.

Press Conference

Date: Monday, April 8th, 2013

Time: 15.30 - 16.30

Venue: Press Conference Room (Millenia 5), Level 2,

The Ritz-Carlton, Millenia Singapore

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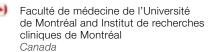


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