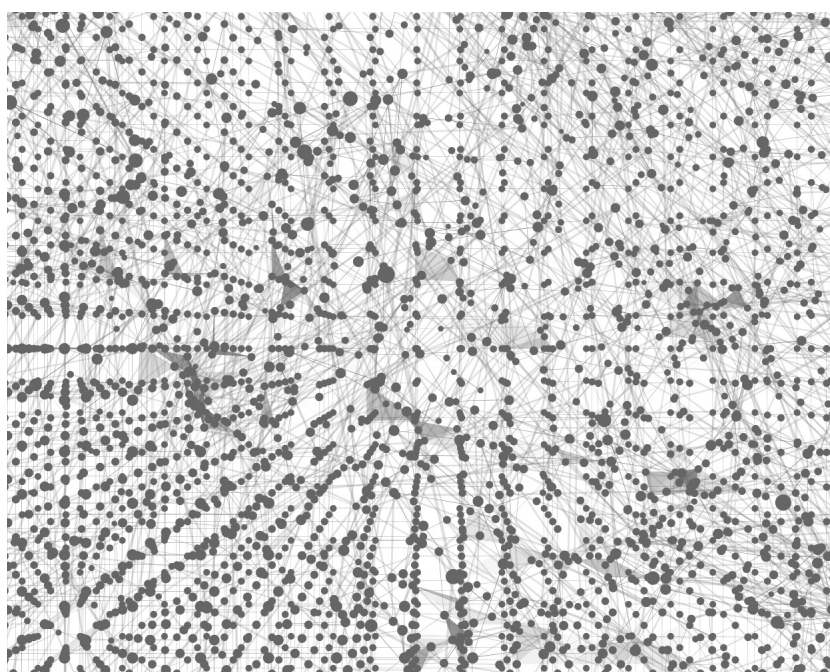




# Geneva Health Journal

N°2

## SPOTLIGHT



Credit: Viktor Palstsiuk

## The innovation Process: from ideas to implementation

“Innovation is not a final destination... it's a long and arduous journey”. Dr. Zaman's astute words were not just pertinent to the opening panel of the Geneva Health Forum for which he spoke, but also to the theme of the whole conference: Innovation and Sustainability. The panelists from a variety of professional fields emphasized the different processes of innovation and the need for collaboration in innovation. In the context of pharmaceutical

development, Bill Anderson, Head of Global Product Strategy for Roche Pharma, emphasized the incremental nature of innovation. Elmar Mock highlighted the need for disruptive thinking to break through boundaries in his product development work as founder and managing partner of Creaholic. Innovative processes of problem solving are as important as the solutions they generate. Taking a systems approach to problem

solving is necessary when tackling complex problems to innovate effective and innovative health solutions. Dr. Muhammad Zaman of Boston University, reflected on the importance of context-based health solutions. Only by approaching innovation in a holistic way and by integrating interdisciplinary and diverse knowledge will it be possible to catapult ourselves into the next generation of health innovations. *E.C & R.P*

## CARTOON OF THE DAY

- Zyka takes the plane for Geneva -



Pecub

## PERSPECTIVE

### Planetary Health

This session highlighted how the concept of Eco Health, Global Health and Planetary Health are definitely innovative as they challenge the traditional approach towards health with different actors (i.e. health care workers, veterinaries and environmental experts) as working separately instead of cooperating together.

Following the session, J. Zinstag (Swiss TPH Institute) noticed how innovation was at the center of the debate because “we realize that we are working in complex systems (e.g. biological, environmental or the human biology) and whatever we introduce... we need to have innovation all the time... There is broad space for innovation and these concepts of planetary health and global health are definitely new, they are only two years old.”

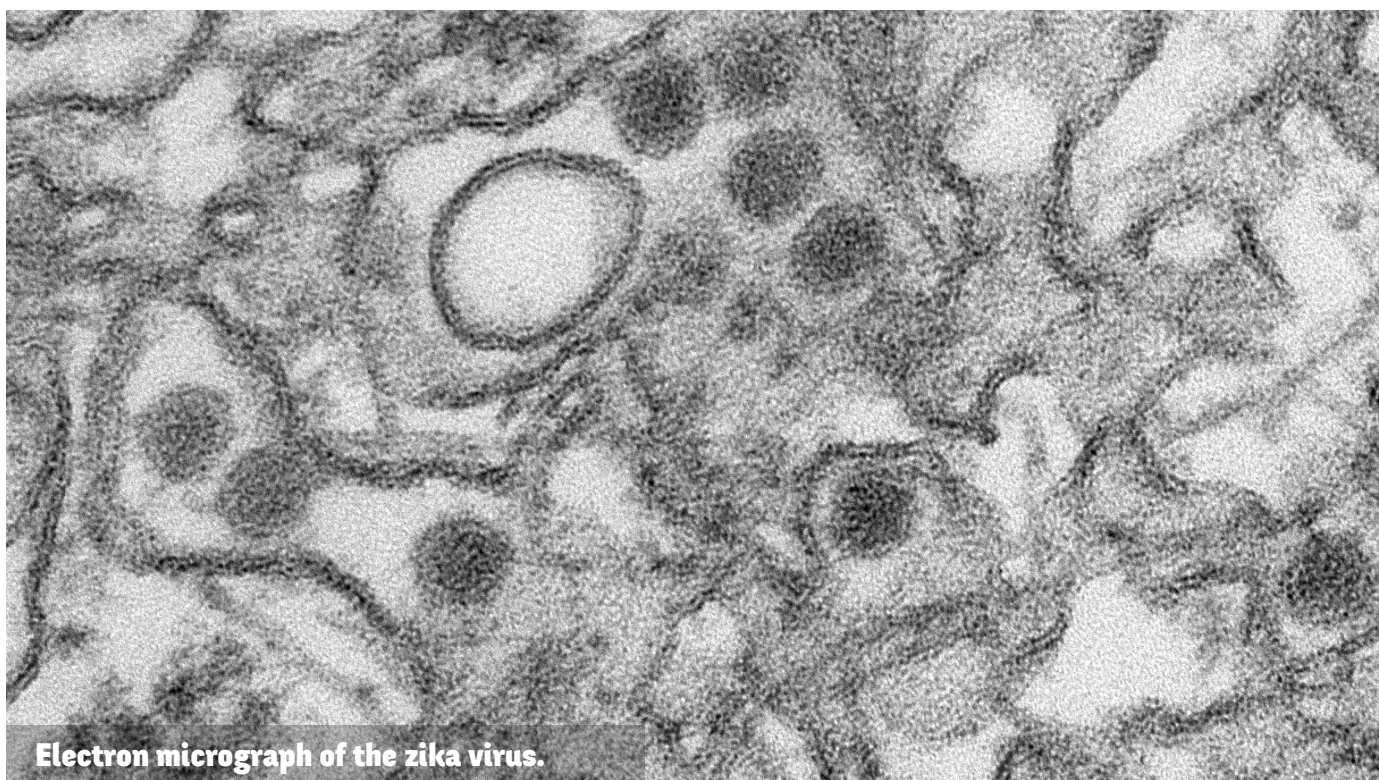
Such approach will have major health impacts on all of humanity.

*L.S & C.P*





# ZOOM OF THE DAY



Electron micrograph of the Zika virus.

Credit: Wikimedia

## Zika: Consequences and challenges

The continuing importance of vector borne diseases in global health was reflected in two sessions dedicated to exploring their consequences and challenges, e.g. “unexpected complications,

unexpected as all other emerging viruses...” (L. Kaiser) In one session co-hosted by the World Economic Forum, the challenges facing public health were highlighted using the example of Zika, which as many other vector borne

viruses, is hard to control as there is no vaccine, and vectors can be difficult to control. Aluisio Segurado of Brazil denounced the limited state of research regarding Zika: “there are more questions than answers so far”. The panel underscored the

need for interdisciplinary education and research to fill knowledge gaps, innovate in diagnostics and therapeutics, and establish protocols for study follow up. Both sessions called for increased intersectoral collaboration and

international cooperation in order to act effectively and efficiently to the threats which vector borne infections pose to health globally. *J.E*

### LA VOIX DE LA FRANCOPHONIE

#### Radio Burkina Faso

La radio « La Voix du Paysan », dirigée par Anama Sougouri et basée au nord du Burkina Faso, était à l'honneur hier matin au Federal café. Avec deux

millions d'auditeurs, elle se consacre à la lutte contre le noma (pauvreté, défiguration) et les maladies bucco-dentaires, particulièrement dans les milieux ruraux où elle

collabore avec les hôpitaux locaux et les écoles. Une mission que son slogan « la radio qui vous écoute » résume bien. *A.R.*

### TOMORROW

**New approaches against antimicrobial resistance will be presented** in the PS2-6 sessions (04/21, 2.00pm), echoing back to the 1st WHO anniversary global action plan on the issue.

**The UK Science and Innovation Network** will present the Longitude Prize dedicated to this issue at a breakfast session. Confidential discussions and networking will be favoured (04/21, 8.00am). *S.P*







PUBLIC HEALTH CHALLENGES

PS1-4

## Integrated community care in translational countries

“Integrated and people-centred health services should not be considered a luxury of high-income countries, nor a utopia for low-and middle-income countries.”

(Nuria Toro, WHO).

Reforms are necessary to ensure that health systems deliver quality of care that responds to and respects the patients’ needs and preferences. Therefore this parallel session (PS1-4) on integrated community care in translational countries will provide a platform where countries can exchange their experiences, ideas

and best practices on implementing people-centred integrated care. Examples that will be discussed during this session include experiences related to the integration of medical and social services in Romania, community action for health in Kyrgyzstan and integrated medico-social home care services in Eastern Europe.

Join this session and to share your own experiences! *K.L*



Credit: flickr.com

IMPROVING CLINICAL CARE & ACCESS

PS2-4

### Patient with neglected tropical diseases

Patients with NTDs, especially in LMICS, have difficulties to obtain access to quality care. How can we ensure that these patients have a timely access to adequately equipped health care structures? Challenges such as this

and possible solutions will be addressed during the PS2-4 parallel session on promoting access to care for patients with neglected diseases which will include examples on Chagas disease, strongyloidiasis and snakebites.

For example a project in India that provides free toll and user charge free emergency ambulance service to manage snakebites will be presented by Omesh Kumar. Welcome to join this session and share your own experiences! *K.L*

ADDRESSING SPECIFIC NEEDS

PS3-4

### Neonatology and innovations

Neonatal mortality and morbidity have always been neglected and are still underestimated. Nearly 4 million newborns die every year; 98% of these in low income countries. Mainly due to: Prematurity, Asphyxia,

Infections. Inexpensive equipment can reduce neonatal mortality and morbidity, such as: skin-to-skin Kangaroo care, neonatal resuscitation, hand hygiene and antibiotic stewardship. Newborns have no voice!

However, a countries’ future lies in its youth. If newborns survive, infant mortality will fall and also maternal mortality. *E.T*

VIEWS FROM THE FIELD

PS4-4

### The Revolutions of the nursing profession

Changes in epidemiologic chronicity or ageing population are challenges nurses have to face in today’s clinical practice. Nurses have to work autonomously and provide either a supportive or holistic approach to meet the ever-changing patients’ needs. In order to maintain and improve the quality of care nurses worldwide have to possess the knowledge and skills at a Bachelor level. The University of Applied Sciences Western Switzerland, School of Health Science, Nursing Degree Program, Geneva,

provides an education structured based on seven roles corresponding to the needs of the different settings of health care system. *E.T*

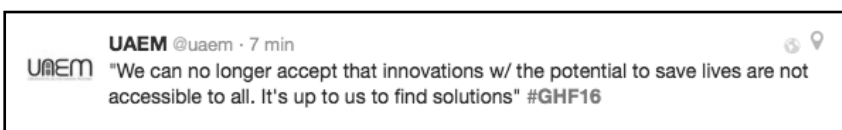




# YESTERDAY AT GHF

## YESTERDAY TWEETS

Join the social media conversation that arise around GHF sessions.  
Come and take part in discussions that address the latest controversial topics:



## FIGURE OF THE DAY

# 100<sup>+</sup>

Almost 100 posters were selected, including from young researchers. downloading the GHF 2016 App on the App store or on Google Play you can vote and like for the contribution of your choice. 6 prizes will be awarded during the closing ceremony.



## Sessions in short

### QUALITY OF CARE AFTER SUDDEN ONSET DISASTER

This session focused on strengthening the voices of local actors, looking specifically at the speakers' experiences of providing health care after disasters in Nepal and the Philippines. An emphasis was placed on using those lessons to improve in the future and on the importance of appropriate coordination among donors, as well as sustainability, lengths of support, and the necessity to empower a community. Poorly coordinated and short-term support may cause

more harm than good in the quality of care in an affected environment: as Suda Devkota stated, "If you can't do good things – don't do bad, let us be what we are". *DK*

### GOOD CLINICAL PRACTICES

"Good clinical practice is not law, it is only a guideline for clinical trial", (Nerina Vischer) from the Swiss TPH during the session devoted to the Good Clinical Practice (GCP). This international quality standard set by ICH for clinical trials is facing increasing challenges in

our globalized world. There is a need to globalize GCP under the same or similar guidelines as how it is exercised, and as a result the research participants in less resourced countries stay well-protected. The panelists agreed on the fact that the differences between commercial and non-commercial sponsors of clinical research are not always clear, and therefore need to be clarified. Almost everybody shared the opinion that there are some gaps in the current GCP guidelines due to the fact that GCP regulation cannot keep updated with new developments.

Today, there is a push to make data from research available, but this raises important concerns in terms of confidentiality and harmonization. This is not addressed in current guidelines for clinical trials, so to some extent there is a pressing need to update them; otherwise, things will go on in the field of data sharing and bio-banking without regulation. *AV*

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