IIHMR New Delhi, works with a mission of improving standards of health through better management of healthcare and related programmes, prepare students for managerial positions with a focus on national and international healthcare management.

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**UPCOMING CONFERENCES**

1) International Medical Tourism
   Forum Conference
   Date: 12th - 13th May 2012 and 15th - 17th June 2012
   Venue: Istanbul, Turkey
   Organized By: Bosphorus Event Management Company
   Website: [http://www.bosphorusencounters.com/futuremedical.html](http://www.bosphorusencounters.com/futuremedical.html)

2) Conference on “Working Together to Eradicate Poverty and Mitigate Climate Change in India”
   Date: 16th June 2012
   Venue: Toronto, Canada
   Organized By : IDCA
   Development Coalition of America (IDCA)

   Date: 24th – 27th June 2012
   Venue: Donapaula, Goa, India

**HOSPITAL AND HEALTH INSIGHT OF THE MONTH**

**HEALTHCARE IT WITNESSED 184 MILLION DOLLAR VENTURE CAPITAL FUNDING IN THE JANUARY-MARCH QUARTER 2012**

According to the report by Mercom Capital Group, a global clean energy communications and consulting firm, VC funding for the January-March quarter of 2012 stood at USD 184 million compared to USD 35 million in the previous year. A significant momentum in terms of private venture capital flowing into healthcare IT and robust mergers and acquisitions has been witnessed. The reason for the geared up demand of IT in the healthcare is thought to be to reduce healthcare costs, enhance clinical and administrative workflow of hospitals, and huge demand for faster, error-free efficient healthcare delivery. It is also estimated that the sector will grow at an annual rate of 10.2 percent per annum.

**HEALTH MINISTRY DECLARES TUBERCULOSIS AS NOTIFIABLE DISEASE**

As the cases of Tuberculosis (TB) are showing an increase every year, a notification has been issued by the Union Ministry of Health declaring TB as a notifiable disease. It is essential to have complete information of all TB cases in order to have proper TB diagnosis and case management, reduce TB transmission, and address the problems of emergence and spread of drug resistant-TB. With this notification, healthcare providers will help patients get better access to quality diagnosis and treatment. This will also facilitate early diagnosis, rational treatment, prevention of complications and reduce deaths due to TB.

**LAUNCH OF SCHOOL BASED SCREENING PROGRAM FOR DIABETES**

The Ministry of Health has started a school based screening program for Diabetes in Nainital (Uttarakhand), Theni (Tamil Nadu), Nellore (Andhra Pradesh), Dibrugarh (Assam), Bhilwara (Rajasthan) and Ratlam (Madhya Pradesh). The screening programme is in progress in these six districts. To carry out this programme, funds for each district have been allotted and released to the districts. The screening is primarily focused on school children of 1st to 10th standards in the age group of 5 to 15 years. The School Health Programme (SHP) is under the National Rural Health Mission (NRHM). The main focus is to address the health needs of children, both physical and mental. In addition, it provides for nutrition interventions, physical activities and counselling.
A new financial forecast by the Global Fund says that a funding of more than $1.6 billion will be available in different projects that aims to save human lives against diseases like AIDS, Tuberculosis and Malaria. It is because of the strategic decisions taken up by the board to invest funds in countries where there is the most pressing demand, and adopting a plan to transform the Global Fund into an effective, continuous and effective way to support a more rapid implementation of the Global Fund’s new 2012-2016 Strategy. However the Global fund says that alone the funds do not suffice. Support and quality work from the health workers are required to reach the desired goal.
HEART DAMAGE REPAIRED BY REPROGRAMMING RESIDENT FIBROBLASTS INTO FUNCTIONING HEART CELLS

A new therapeutic strategy was announced by LoneStar Heart Inc., aimed at genetic reprogramming of cardiac fibroblasts into functioning heart muscle cells. The strategy helps in treating damage following a heart attack and other forms of heart disease. The study was conducted by researchers at the University of Texas Southwestern Medical Center (UT Southwestern) and was published in the journal, Nature. The exclusive worldwide rights to the new technology have been acquired by the company. Fibroblasts comprise of the majority of cells in the heart and are activated following injury. Fibrosis impedes regeneration of cardiac muscle cells that leads to heart failure and death. Therapeutic strategies that promote new muscle formation and limit fibrosis form a major step in heart repair.

EVERY 1 IN 6 CANCERS CAUSED BY INFECTION

A study published in the journal, The Lancet, has revealed that among the twenty-seven Cancers in 184 countries, around 16 percent are infection related. This fraction of Cancers related to infections is about three times higher in developing than in developed countries. These infections are caused by causative organisms like Human papilloma viruses, Helicobacter pylori Hepatitis B (HBV) and C viruses (HCV). Many of the infection related Cancers are preventable. Overall one in five Cancers in India are caused by infections with bacteria, viruses and parasites. Whereas worldwide, 1 in 6 Cancers are caused by infections. Around 49 percent cases of Hodgkins lymphoma, 77 percent of liver Cancers, 88 percent of anus Cancers, 74 percent of Non Hodgkins lymphoma, 70 percent of Cancer cases in the vagina and half of all penis Cancers were due to infections. The study's estimates have also shown that preventive programmes in less developed countries will considerably reduce the global burden of Cancer.

DO YOU KNOW?

1. Noise free life can lead to sound health
2. Health Midline crisis can lead to Dementia
3. Marijuana may ease multiple sclerosis symptoms
4. Health workers to get swine flu vaccine soon
5. Cancer drug prices cut by more than half
6. Soon a click will be enough to find blood donors
7. Population growth rate dips to 17%
8. Potential respite from AIDS
Dr. Supten Sarbadhikari visited IIHMR, New Delhi, in the month of March, 2012 to deliver a lecture on the Implementation techniques of HMIS at Brownfield Hospitals. Dr Sarbadhikari is the chair person of HL7 India and also founding Chair of Biomedical Informatics at PSG Institute of Medical Sciences and Research, Coimbatore, Tamil Nadu. He has given an overview on various scopes of HMIS in Brownfield hospitals and has defined informatics as “the art and science of processing information.”

These HMIS are designed to integrate the different manual systems existing in the organizations into a single efficient intranet system. It enables hospitals and nursing homes to serve the rapidly growing number of consumers in a cost effective manner. Hospital administrators would be able to significantly improve the operational control and thus streamline operations. HMIS also provides doctors and hospital staff with the decision support system that they require for delivering patient care, which is comparable to global standards.

Some of the HMIS software’s available for implementing to Brownfield hospital are:

- Quintegra HMIS
- PARAS HMIS
- Remedi lite web HMIS
- Birla medisoft Quanta 2.0 web HMIS
- ABC (Acumen Brilliance Commitment) MIS
- Orion HMIS

The HMIS modules have been designed according to three categories – core modules, supporting modules and enterprise-enabling modules. These modules can further be customized according to hospital needs.

Key functions of the HMIS include:

- Patient Administration
- Clinical Management
- Resource Management
- Financial Management
- Network configuration

Additionally, the HMIS has direct benefits such as easier patient record management, reduced paperwork, faster information flow between various departments, greater organizational flexibility, reliable and timely information, minimal inventory levels, reduced wastage, reduced waiting time at the counters for patients and reduced registration time for patients. The indirect benefits are improved image of the hospital and increased competitive advantage.

However, challenges faced by Brownfield hospital in implementing HMIS includes- Data Migration from one system to another which is a big issue to deal with, integrating legacy system with new system and the workflow management (Old Practice Vs New Practice).

The barriers existing in India for HMIS implementation include – commitment of top management to execute the whole system, traditional non IT practices are imbibed within the system leading to perceived notion of loss of job and lastly, the communication network in India is still in its nascent phase to handle high volume of data.