

# Breakthrough telesurgery held in the country

By MARY JESSA T. CARITATIVO

UP Manila partners with VietDuc University in Hanoi

PHILIPPINE medicine recently scored a major breakthrough with the holding of the 1st University of the Philippines Manila and VietDuc University in Vietnam teleconference last March 28 which saw both universities performing live operations in their respective operating rooms while being connected to one another via high-speed cable transmission.

Advanced video conferencing software, Polycom was used in the said teleconference.

Dr. Serafin Hilvano, Professor, Department of Surgery, UP Manila and past Chair, UP Manila Information Technology (IT) Council, was the proponent and lead consultant of the activity.

## Pioneering effort

In an interview with *Vital Signs*, he said the teleconference is a new thing, and represents an advancement of IT in medicine. "No one has gone into it in the Philippines. It's a pioneering effort," said Dr. Hilvano.

The live teleconference wired together ten venues—six satellites in Hanoi hospitals connected with the VietDuc University hospital and one each in UP Manila Estrada Hall and the operating room. The audience in Manila who witnessed the live surgical procedures in two

different operating rooms included the surgical staff of the UP-PGH Department of Surgery, other surgeons from different hospitals, and medical students.

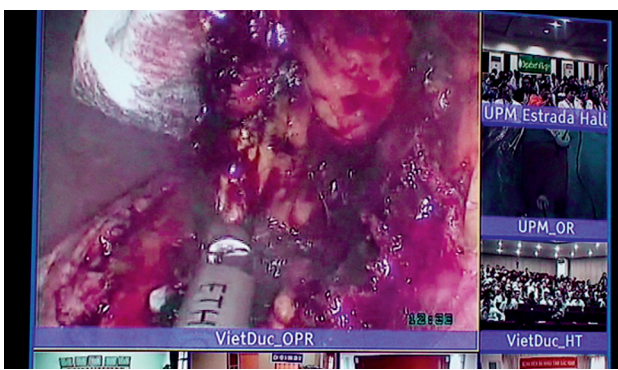
Prof. Tran Van Giang of VietDuc University was the first to perform the operation. He conducted a single incision laparoscopic adrenalectomy for an hour. He was then followed by UP Manila surgeons Prof. Crisostomo Arcilla, Jr. and Prof. Dante Ang who performed a laparoscopic common bile duct exploration with common bile duct stone extraction. Prof. Ramon De Vera annotated the second operation.

Dr. Hilvano noted that various remarks and comments by the surgeons and viewers were made on the conducted operations, and all participants benefited from the activity.

Many surgeons were pleasantly surprised at how such a teleconference can be effectively conducted and congratulated the organizers for this feat. "They didn't realize it can be done in the Philippines. This is the first in the country, first of its kind," said Dr. Hilvano.

## IT network

Dr. Hilvano explained that UP Manila, being in the network of the Medical Working Group of the Asia Pacific Advanced Network (APAN), a world-wide organization of IT networks,



Laparoscopic view within the peritoneal cavity, VietDuc or middle frame

wants "easy access to education which also includes teaching, training, research, and service."

Through live teleconferencing, "we can learn through fast means via internet or the IT developments around the world. And it is also a way for us to share and to disseminate the things that we would want other medical practitioners to know," added Dr. Hilvano.

"I thought of doing telesurgery activities, teleOR, and teleRound, teleER and teleSICU, instead of the conventional or old way of doing these activities. Residents in training could just rely on the cameras situated in different hospital rooms for fast referral in different surgical cases," he explained, recalling his vision at the time when he became chair of the Department of Surgery in UP Manila.

## Medical teleconferencing

Meanwhile, other neighboring Asian nations

likewise share the same sentiment when it comes to medical teleconferencing. "Countries like Japan, Korea, and Thailand started to show live teleconferencing of operations and endoscopic procedures," said Dr. Hilvano.

These countries are also among those that helped the Philippines, particularly UP Manila, to acquire high-speed cables and a complete set of software of DVTS or digital video transfer system, and moreover conduct its first teleconference with VietDuc University.

Looking forward, Dr. Hilvano said, they plan to continue doing live international teleconferencing and intend to include other universities in Thailand, Malaysia, Indonesia, Singapore, the NUH (National University Hospital) and particularly Chulalongkorn to form a SEA teleconferencing network under the APAN Medical Working Group.

## Unang Yakap at home

Intrapartum and newborn care possible even w/o hospital facilities—WHO

By ANGELICA A. DE LEON

AS long as a trained health professional is around, the Essential Intrapartum and Newborn Care (EINC) Protocol may be practiced at home. This was disclosed by World Health Organization (WHO) Country Representative Dr. Soe Nyunt-U during an interview with *Vital Signs* regarding *Unang Yakap*, a tie-up between WHO, the Department of Health, and humanitarian organizations, which seeks to decrease infant mortality and infection rate in the country.

According to Dr. Soe, WHO has observed this as a possible scenario, although the home is not the ideal setting. "If a woman needs to deliver at home for whatever reason and if that delivery is attended by a trained health professional, then that person can practice EINC. In particular, skin to skin contact between mother and baby may be practiced at home," said Dr. Soe.

*Unang Yakap* helps to promote the EINC Protocol, a step-by-step process of standard evidence-based interventions for the handling and caring of newborn infants in both private and government hospital settings.

Emphasizing the importance of training in the successful implemen-

tation of the protocol and the achievement of goals by *Unang Yakap*, Dr. Soe shared that so far, they have a very positive experience in terms of the trainees' reception to the idea of the protocol, especially the midwives and nurses. He added that they constantly remind health workers basic things "like washing your hands—before seeing a patient, after seeing and examining a patient—and to wash your hands again before seeing another patient. We do not want to harm patients, especially babies. These are very fragile babies, with weak immune systems."

So far, more than 42 health institutions have received training for the EINC Protocol under *Unang Yakap* while 11 hospitals around the country are now in the advanced stage of EINC practice.

However, he also admits that the protocol is still a work in progress in the country's remote regions where hospitals, healthcare facilities, and services are sparse and inaccessible. This is true even in home delivery cases, he revealed.



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## Speaker commits support for sin tax bill from page 1

a "broad consensus" to support the administration-endorsed bill which seeks to restructure the excise tax on alcohol and tobacco products. It is expected to increase government revenues with a good part of it to be allocated for programs to achieve universal health care or *Kalusugang Pangkalahatan*.

Despite objections from some congressmen representing tobacco-producing regions, the bill's

provisions will not displace tobacco farmers nor reduce profits of the alcohol industry. Speaker Belmonte explained that the tobacco-growing provinces would receive 15 percent of the revenues collected under the bill authored by Cavite Rep. Joseph Emilio Abaya. This is higher than the current system.

Bulk of the revenues will also be used for the payment of premiums for the Philippine Health Insurance Corp. to ensure the attainment of

the universal health insurance program for Filipinos.

The House hearing was reset from March to May of this year, and Speaker Belmonte said that the month-long break would give lawmakers more time to consult with all stakeholders of the proposed bill.

Congress is bearing the brunt of the pressure from all sides. The World Trade Organization (WTO) is encouraging the government to enact a new excise tax law that would

be compliant with the global body's standards. Congressmen also has to contend with the tobacco farmers, who fear that the proposed excise tax would flood the country with smuggled cheap imported cigarettes that could kill local tobacco products.

Speaker Belmonte told reporters in a press briefing that they would come out with a formula that would not impact adversely on the farmers. "But we must remember also that one of the principal problems that we are facing here is the monopoly," he

said. "The monopolistic hold of some companies on the industry—I think that's an even bigger problem."

The Speaker added that they will address all issues, but stressed that their main concern is "to protect above all the health of Filipinos and tobacco farmers and we have to convince them that it's quite beneficial."

Meanwhile, the Philippine College of Physicians (PCP) has been encouraging all its members to support passage of the bill by sending a uniform letter to congress-

men they know. The PCP secretariat can help in sending the letter by preparing it and going to the doctors' clinics to have the letters signed by the doctors.

"The Ways and Means Committee's voting for HB5727 has been moved to first week of May. We still have time to write to our congressmen seeking their support for HB 5727," said Karla Reyes, RN of the PCP secretariat. PCP members or any doctor who are willing to join the campaign can email [karla.reyes@pcp.org.ph](mailto:karla.reyes@pcp.org.ph).

## The Healthy Lifestyle Advocacy Awards from page 7

Efforts in improving PhilHealth are being undertaken side-by-side with efforts to upgrade health facilities and hospitals all over the country. This includes primary care facilities up to tertiary hospitals. We are improving their infrastructure and providing them with better equipment so they can better serve our people. More than that, we worked to ensure that competent health workers are available in these health facilities. And we did that through our "Doctors to the Barrios" and "RN Heals" programs wherein 113 doctors and over 21,000 nurses

were deployed to various underserved communities across the country.

Besides health personnel, we have also provided medicine to the most in-need areas through our "Treatment Packages" for diseases such as hypertension and diabetes which have been distributed to 1,000 RHUs and can be availed of for free by members. These serve as treatment for NCDs, but of course, we would all much prefer to prevent these diseases through healthy lifestyles, rather than treat them. After all, this is the most cost-effective way in fighting NCDs.

## Enormous cost

While we believe that our efforts to improve PhilHealth and upgrade our hospitals and health facilities will go a long way in relieving the burden of families afflicted with NCDs, we are very much aware that this will not be enough. The cost of treating NCDs is so enormous that we cannot imagine treating all of it successfully at the time when complications set in. We need to work hard to prevent NCDs. To do this, we have to advocate to our countrymen to pursue healthy lifestyles which entails a lot of badgering on our part.

I don't think we have been remiss in advocating for health lifestyles. We have time and again urged everyone to stop smoking, to engage in regular exercise, and to eat a healthy and well-balanced diet. We have had several activities to remind everyone about this. We even organized an event where our very popular president promoted the value of exercise. We have more activities lined up these coming months. As a matter of fact, our Community Health Teams include the advocacy of healthy lifestyles when they do the rounds of the homes in their area.

But advocating healthy lifestyles does not only mean badgering and organizing PR

activities, it also entails putting in place policies that will be conducive for the pursuit of healthy lifestyles among our countrymen. One such policy that comes to mind is the tobacco and alcohol tax reform bill which we are pushing for. Raising taxes for habit-forming, tobacco and alcohol products will make out countrymen especially the youth think twice or thrice before engaging in such habits. The DOH heavily supports this and we call on our legislators to pass this bill immediately.

The Outstanding Healthy Lifestyle Advocacy Awards recognize the efforts of our partners who have in their own ways, significantly

contributed in the formulation of policies and programs that promote healthy lifestyle and caused its effective implementation. We congratulate the five winners but we would also like to acknowledge all our 28 nominees and our eight finalists for their significant contributions.

While only five winners were chosen from our finalists, all of them are winners in their own right. The work they have done has contributed in saving lives and promoting health is victory in itself. Their efforts are truly appreciated. May they serve as an inspiration for all of us to persevere in the noble pursuit of advocating healthy lifestyles for our people.