HUMANITÄRES SYMPOSIUM UPDATE 2018

Samstag, 21. April 2018









Liebe Kolleginnen und Kollegen,

Zum III. Humanitären Symposium am Samstag, den 21, April 2018, möchten wir Sie wieder herzlich nach München einladen.

Wie auch in den letzten Jahren haben wir für Sie Referenten gewinnen können, die Sie über die neuesten Trends in der Humanitären Hilfe und Entwicklungszusammenarbeit informieren möchten.

Wir wollen mit Ihnen gemeinsam diskutieren, welche neuen Strategien für ihre Arbeit als Mediziner und humanitärer Helfer vor Ort wichtig sein können.

Wir freuen uns auf einen spannenden Tag in München!

Ihr

Günter Fröschl

CIH^{LMU} – Center for International Health

Reinhard Klinkott

foring – Forum für Internationale Gesundheit

Care for gender based violences survivors in emergency and crisis settings: Example from CAR, based on capitalization of 3 years program

In Central African Republic, Médecins du Monde (Doctors of the World) has developed an innovative approach to support survivors of Gender Based Violence (GBV), offering medical care, psychosocial support and legal assistance within six health facilities. Between May 2015 and September 2017, more than 2.200 survivors have received care and treatment.

MdM has started its intervention in CAR in response to the political, health and social crisis that the country has been experiencing since the coup d'état of March 24, 2013. In order to restore access to health care for the most vulnerable, Médecins du Monde has launched mobile clinics in different locations where displaced population had settled, before steering its action towards support to health facilities. The services offered include consultations for survivors of Gender Based Violence. Midwives, lawyers and psychosocial counselors provide care to victims according to their needs, in partnership with local actors.

MdM is launching a capitalization of this project to identify good practices and lessons learnt that could be transferable to other settings. At the time of writing this abstract, the results have not been at hand, but will be presented fresh at the symposium.

Aurélie Leroyer

> Médecins du Monde France

Sepsis in the tropics - A constantly changing and challenging topic

Sepsis is one of the most important tropical health problems. This is true for its relevance as a public health topic, a clinical challenge as much as for problems it poses for resources of our scarce ICUs in the tropics and for multiple ethical questions.

It's a syndrome cross-cutting medical subspecialties like pediatrics, obstetrics or traumatology, deals with diseases uncommon to cool climates (Malaria, Ebola, HIV, Brucellosis...) and all ages from the preterm to its grandparents. Moreover, important new knowledge was discovered in the last years and is still not validated - in a time when worldwide sepsis guidelines are already moving on. Various challenges are to consider for everybody who wants to work in the tropics - might it be in a calm situation in development aid in a stable country, in a continuous emergency situation in the poorest African countries or in an acute catastrophe.

We will try to provide you with an up-to-date overview and some practical advice for your work on the ground in order to prevent you from losing orientation in all these international guidelines, which do not always apply to our daily reality.

Dr. Med. Gregor Pollach

- > Assoc. Professor, MA, MA, FCAI (hon.)
- > University of Malawi, Department of Anaesthesia and Intensive Care

Leishmaniasis – a Global Challenge

Visceral leishmaniasis, also known as kala azar, is a neglected tropical disease, affecting 200.000-400.000 patients each year, the case fatality rate reaches 20.000-40.000 deaths annually. The disease is endemic in 35 countries around the world, with 90% of cases happening in only 6 countries: India, Nepal, Bangladesh, Sudan, South Sudan and Brazil. Visceral leishmaniasis is a parasitic disease transmitted by the bite of a sandfly. Visceral leishmaniasis is strongly linked to poverty, and patients suffering from kala azar often face difficulties accessing health care. As better diagnostic tools and treatments become available there is a potential to importantly reduce the number of patients affected by the disease. However; can visceral leishmaniasis be eliminated? What are the challenges towards elimination of this disease?

With a patient case history.

Marta Gonzalez Sanz

- University College London Hospital
- > Infectious Diseases and Medical Microbiology Specialist Registrar

Universal health coverage: The overarching goal for any health system

This presentation will cover:

- The concept of universal health coverage
- Why is it important?
- What does it mean in practice?
- What are WHO's main areas of work at country level on UHC?
- What are the key challenges to achieving UHC?

Dr. Dheepa Rajan

> World Health Organization, Headquarters (Geneva)

PROGRAMM

9:30	Registrierung
10:00	Seenotrettung vor der Küste Afrikas – Erfahrungen von Sea-Eye V. Mendes, Forum für internationale Gesundheit
10:45	Antibiotika-Resistenzen vermeiden – Strategien in der EZ H. Diekwisch, BUKO Pharma-Kampagne
11:30	Pause – Markt der Möglichkeiten
11:45	Die Versorgung von Kindern verbessern – die neuen Standards der WHO R. Klinkott, Forum für internationale Gesundheit
12:30	"it could always be TB" – Approach to the Critically III Patient with Advanced HIV in Resource Limited Settings S. Albus, MSF Operational Centre Bruxelles
13:15	Pause – Markt der Möglichkeiten
14:15	Leishmaniasis – a Global Challenge M. Gonzalez Sanz, University College London Hospital
15:00	Universal Health Coverage: the Overarching Goal for any Health System D. Rajan, World Health Organization, Genf
15:45	Pause – Markt der Möglichkeiten
16:15	Care for Gender Based Violences Survivors in Emergency and Crisis Settings: Example from CAR, based on Capitalization of 3 Years Program A. Leroyer, Médecins du Monde France
17:00	Sepsis in the Tropics – a Constantly Changing and Challenging Topic G. Pollach, University of Malawi
18:00	Ende

ABSTRACTS

Seenotrettung vor der Küste Nordafrikas - Erfahrung von Sea-Eye Rescue Operations Near the North-African Coast - a Sea-Eye Experience

Since the Italian Mediterranean Rescue-Operation "Mare Nostrum" was suspended in 2014 thousands of refugees using the most dangerous Mediterranean sea-route to reach the European coast continue to unnecessarily lose their lives by drowning, thus turning the Mediterranean sea into a mass-graveyard. Europe's failure to provide adequate entry corridors and rescue operations has resulted in a humanitarian disaster. It also triggered several NGO's including "Sea-Watch", "MSF", and "Sea-Eye" to step in with the scope of saving lives and reducing the number of drowning victims. "Sea-Eye" was founded by a couple of friends in Regensburg in the autumn of 2015. Since then, with two little ships and its meanwhile over 1.000 voluntary members "Sea-Eye" has been able to rescue 13.248 migrants. In March 2018, after a short winter pause, this entirely donation-funded enterprise will resume its rescue operations near the North-African coast.

Dr. Med. Victor Mendes

> foring - Forum für Internationale Gesundheit

Antibiotika-Resitenzen vermeiden – Strategien in der EZ Prevention of Antimicrobial Resistance – Update on International Strategies

Antibiotics are indispensable for the treatment of infectious diseases. Formerly deadly diseases such as scarlet fever, septicaemia or tuberculosis were made curable with the discovery of antibiotics, but massive misuse in human medicine and the excessive application in livestock farming has led to a situation where infectious agents have become resistant and antibiotics have lost their effect. According to estimates, hundreds of thousands of people are already dying worldwide every year because antibiotics no longer work as a result of antibiotic resistance.

The WHO Global Action Plan on Antimicrobial Resistance (AMR) from 2015 is an important first step to tackle the problems with AMR. National plans of action, the surveillance of AMR and among other things a consequently implemented OneHealth approach is needed to preserve one of our milestones in modern medicines – antibiotics.

Dipl. Soz. Hedwig Diekwisch

> BUKO Pharma-Kampagne / Gesundheit und Dritte Welt e.V.

Die Versorgung von Kindern verbessern – die neuen Standards der WHO Improving the management of children - the new WHO standards

Anhand eines praktischen Beispiels soll demonstriert werden, wie sich die neuen Qualitätsstandards der Weltgesundheitsorganisation im klinischen Alltag umsetzen lassen. Dabei sollen v. a. Maßnahmen zur Qualitätsverbesserung diskutiert und Schwierigkeiten bei der Umsetzung angesprochen werden. Die Teilnehmer bekommen einen Überblick, wie sie mit begrenzten Ressourcen die Patientenversorgung im Krankenhaus bewältigen können. Als besonders vulnerable Patientengruppe werden Neugeborene besprochen, die für fast die Hälfte aller Todesfälle im Kindesalter verantwortlich sind.

A practical example will demonstrate how the new quality standards of the World Health Organization can be implemented in everyday clinical practice. We will discuss quality improvement measures and address implementation difficulties. The participants will get an overview of how they can manage the patient care in the hospital with limited resources. As a particularly vulnerable group of patients newborns will be discussed. They are accounting for nearly half of all childhood deaths.

Dr. Med. Reinhard Klinkott

> foring - Forum für Internationale Gesundheit

"....it could always be TB....."

Approach to the critically ill patient with advanced HIV in resource limited settings

While roll out of Anti-Retroviral Treatment (ART) in Sub Saharan Africa has decreased the occurrence of new HIV infections mortality rates remain elevated. The vast majority of HIV associated deaths still occur in Africa. In vast parts of the continent and the world access to diagnosis and treatment remains difficult. Therefore, advanced HIV and critically ill patients remain a reality in hospitals all over the continent.

This presentation aims to provide the audience with an overview of common pathologies in advanced HIV patients as well as available diagnostic and therapeutic options and to discuss useful clinical approaches in resource limited settings. Finally, the discussion part of the presentation can be used to illustrate concepts with a patient case history.

Sebastian Albus

MSF Operational Centre Bruxelles