



THE 5TH ASEAN MEDICAL DEANS' SUMMIT



THE 1ST ASEAN STUDENT COLLABORATIVE PROJECT

JULY 25TH-28TH, 2016
BOGOR, INDONESIA

REPORT

HOSTED BY:



SUPPORTED BY:



PARTICIPATING UNIVERSITIES



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Darussalam



International University,
Cambodia



University of Health Science,
Cambodia



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University of Health
Sciences, Lao PDR



University of Malaya,
Malaysia



University of Medicine
Mandalay, Myanmar



University of Medicine (1)
Yangon, Myanmar



NUS Yong Loo Lin School of
Medicine, Singapore



University of the Philippines
Manila, Philippines



Faculty of Medicine Siriraj
Hospital, Thailand



Hanoi Medical University,
Vietnam

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AMDS DELEGATES

Name	Position	University
Dk Dr Nurolaini Pg Haji Muhd Kifli, PhD	Dean (Undergraduate, Administration, and Finance)	Universiti Brunei Darussalam
Hjh Fazean Idrayati Binti Hj Idris	Programme Leader, BHSC Medicine	University of Health Science, Cambodia
Prof. Saphonn Vonthanak	Rector	University of Health Science, Cambodia
H.E. Prof. Dr. Sabo Ojano, MD, PhD	President	International University, Cambodia
Mr. Vouch Phisith	Deputy Director of International Relation Office	Universitas Indonesia
Ratna Sitompul, MD, PhD	Dean	University of Health Science, Lao PDR
Prof. Dr. Vongsinh Phothisanesack	Dean	University of Malaya, Malaysia
Dr. Alongkone Phengsavanh	Vice Dean for Postgraduate Training	University of Malaya, Malaysia
Prof. Dr. Adeeba Kamarulzaman	Dean	University of Medicine Mandalay, Myanmar
Prof. Dr. Yang Faridah Abd. Aziz	Pro Rector	University of Medicine Yangon, Myanmar
Prof. Dr. Jamunarani Vadivelu	Pro Rector	University of Medicine Yangon, Myanmar
Prof. Aye Aye Chit	Head of Training and Research Department	University of the Philippines Manila, the Philippines
Assoc. Prof. Aye Aye Han	Dean	University of the Philippines Manila, the Philippines
Prof. Theingi Myint	Associate Dean for Academic Development	NUS Yong Lin School of Medicine, Singapore
Prof. Khin-Mar-Myint	Associate Dean Planning & Research	NUS Yong Lin School of Medicine, Singapore
Prof. Agnes D Meija, MD	Assistant to the Dean International Linkages	Faculty of Medicine Siriraj Hospital, Thailand
Coralie Theresa D Dimacali, MD	Vice-Chairman, Medical Board (Education)	Faculty of Medicine Siriraj Hospital, Thailand
Armando Castillo Crisostomo, MD	Vice Dean Research	Hanoi Medical University, Vietnam
Dr. Ester G Penserga	Dean of the Faculty	Hanoi Medical University, Vietnam
Prof. Lau Tang Ching	Deputy Dean for International Relations	
Prof. Yik Ying Teo	Deputy Dean	
Prof. Dr. Prasit Waranapa	Deputy Dean for Research	
Prof. Dr. Chirayu Auewarakul	Deputy Dean and Director of Siriraj Medical School	
Assoc. Prof. Preyanuj Yamwong	Acting Chief, International Relations Officer	
Prof. Dr. Ruengpung Sutthent	International Relations Officer	
Prof. Suwannee Suraseranivongse	Vice Director, Institute of Preventive Medicine and Public Health	
Ms. Chalotorn Olanprasert		
Ms. Korboon Phetroungroong		
Prof. Nguyen Duc Hinh		
Assoc. Prof. Kim Bao Giang		



AMDS delegates in welcoming dinner



AMDS delegates in opening ceremony

ASCP DELEGATES

Name	University
Caroline Tan Chiaw Wei	
Norhidayati Binti Awang Ahmad	
Kan Cheong Tong	Universiti Brunei Darussalam
Jonanathan Wong Ming Hui	
Nadzirah Hakeemah Zainal Ariffin	
Kheav Manech	
Ky Vongudom	International University, Cambodia
Ly Zoka	
Bashar Adi Wahyu Pandhita	
Kevin Afaratu	Universitas Indonesia, Indonesia
Matthew Billy	
Sathaphone Inthavong	
Viphada Sounvoravong	University of Health Sciences, Lao PDR
Cheryl Chia Hau Yee	
Hilman Adrees Bin Khairul Annuar	University of Malaya, Malaysia
Fatin Nur Shaheera Mohd Azizi	
Mary Louise Margaret Mamaclay Javier	
Anton Garcia Elepano	University of The Philippines Manila, the Philippines
Regiel Christian Quiao Mag-Usara	
Ivan Low	
Lee You Jun	NUS Yong Loo Lin School of Medicine, Singapore
Poorinut Poonthongpan	
Piyalitt Ittichaiwong	Faculty of Medicine Siriraj Hospital, Thailand



ASCP Delegates welcoming dinner



AMDS and ASCP delegates after opening ceremony

BACKGROUND & GOALS

In 2012, The ASEAN Medical Schools Network (AMSN) was established by Clinical Professor Udom Kachintorn, Dean of the Faculty of Medicine of Siriraj Hospital, Mahidol University. The annual event of this organization is the ASEAN Medical Deans' Summit (AMDS). The 5th AMDS was held in Indonesia, with the Faculty of Medicine, Universitas Indonesia as the host. This meeting brought together presidents, deans and rectors or their representatives from 12 medical schools in 10 ASEAN countries to exchange ideas and share experiences related to medical education and research in Southeast Asia.

In 2016, the Faculty of Medicine, Universitas Indonesia becomes the initiator of student collaboration activities, namely ASEAN Students' Collaborative Project (ASCP). For several months in the range of 2015-2016, each university from 12 universities in Southeast Asia has conducted community-based projects and completed a report submitted to the steering committee. The reports of the projects were presented at the peak of the event held in Hulu Cai Camp, Bogor. Moreover, the medical students also discussed future potential collaborations.

PROGRAMME OF AMDS

Monday, July 25th 2016

- 19.00 Arrival at Indonesia
20.00 Welcome diner

Tuesday, July 26th 2016

- 09.30 Welcome speech
09.35 Speech by President of ASEAN Medical School Network
09.40 Speech by Rector of Universitas Indonesia
09.45 Speech by Director General of Learning and Student Affairs, Ministry of Research, Technology, and Higher Education of Indonesia
09.50 Opening Ceremony
10.00 Dean's Photo Session
11.10 Cultural Performance
10.30 Lecture 1:
The Role of Medical Schools in Cultivating Leadership Skills among Medical Students
11.00 Lecture 2:
Research Project Report: Medical Schools in ASEAN Countries
12.00 Group Photo
12.45 Lunch Break
13.30 Plenary Session 1:
Medical Education and Curriculum
14.30 Plenary Session 2:
Accreditation
15.30 Plenary Session 3:
Research Progress Report
16.30 Update in Student Collaboration
17.30 Afternoon Break
18.00 Dinner and Cultural Night
- Ratna Sitompul, MD, PhD
Prof. Agnes Meija, MD, PhD
Prof. Dr. Ir. Muhammad Anis, M.Met.
Prof. Intan Ahmad, PhD.
Assoc. Prof. Lau Tang Ching, MBBS, FRCP, MMedSci
Prof. Agnes Meija, MD, PhD
Prof. Adeeba binti Kamarulzaman
Prof. Suwannee Suraseranivongse
Assoc. Prof. Lau Tang Ching
Ratna Sitompul, MD, PhD

Wednesday, July 27th 2016

- 08.30 ASEAN Dean's Board Meeting
10.30 Summary of Action Plan
11.00 Closing Remarks
- Prof. Agnes Meija, MD, PhD
Ratna Sitompul, MD, PhD

AMDS PLENARY SESSION



TOPIC 1 : MEDICAL EDUCATION

PRESENTER

Prof. Adeeba binti Kamarulzaman
Dean of Faculty of Medicine University of Malaya
(Chairperson of the Medical Education Curriculum Work Group)

SYNOPSIS

Medical education in Malaysia consist of 30 medical schools (10 public and 20 private schools) with 34 programs with duration of the program is for about 5 years (2 preclinical and 3clinical years). Nearly all school except three branch campuses of foreign universities use integrated curricula with organ system based module or course. Teaching-learning activities in every campus consist of didactic lectures, student centered self-directed learning, and community base learning with 20% e-learning component. Some opportunities and challenges of medical education in ASEAN region are: easy mobility of health professionals; harmonization in medical education, opportunity to develop health tourism destinations, preferred destination for medical education and higher education, and also research.

To make a harmonization of medical education we need to unified accreditation standards by adopting some core competencies and outcome from each country and make it become a guideline which can use by all of countries in ASEAN. Some proposed core competencies of medical gradates of ASEAN region are: noble professionalism, self-awareness and personal development, effective communication, management information, scientific foundation of medicine, clinical skills, management of health problems

CONCLUSION

1. Harmonization of medical education requires further thoughts and effort to assure the harmonization within each country in ASEAN region.
2. Within the network, several options to encourage the harmonization can be initiated. Some potential projects are discussed (are detailed in the plan of actions).
3. Ideas of some topics of collaboration based on relatively similar problems or concerns in ASEAN countries: (a) infectious disease (outbreak), (b) disaster management, (c) leadership for medical student
4. Some factors need to be considered in initiating and sustaining the collaborative projects: the aims, feasibility and funding

ACTION PLANS

1. Two main projects are proposed:
 - (a) Sharing of medical education best practices
Party in charge: University of the Philippines College of Medicine
 - (b) Inter-professional Collaboration project, with outbreak management or disaster management as the core topic. The project will involve module development, faculty development and implementation
Party in charge: Universitas Indonesia
Initial collaborators: University of Malaya, NUS
2. Once the proposal is completed, the network will apply for fundings from some potential funding bodies: China medical board, Asian Development Bank, ASEAN

TOPIC 2 : QUALITY INDICATOR

PRESENTER

Prof. Suwannee Suraseranivongse
Dean of Faculty of Medicine Siriradj Hospital

SYNOPSIS

Accreditation is one of the most important issues for medical schools. The ASEAN Medical Schools Network (AMSN) has developed new “Quality Indicators” adapted from ASEAN University Network Criteria to be used as self evaluation and external evaluation tool for medical schools within the network. This project was initiated in August 2015. In July 2016, the team finally proposed the 2nd draft of ASEAN quality indicators in the Meeting of ASEAN Dean Summit. Before the summit, Professor Suwannee and team had done the pilot instrument survey from September 2015 until April 2016, taking respondents of 5 medical schools in ASEAN which are PAPRSB Institute of Health Science Universiti Brunei Darussalam, Faculty of Medicine Siriraj Hospital, University of Medicine 1 Yangon Myanmar, Hanoi Medical University Vietnam, and University of Health Science Laos. From the pilot project, the team summarized that there were positive attitudes for the Quality Indicators. As for the next plan, the team wanted to make an online Quality Indicators for generalization, sharing experience with Deans, and implement the Quality Indicators.

From the discussion in the AMDS, these quality indicators are quite difficult to be implemented as accreditation tool since some medical schools in ASEAN are already accredited by international standards, such as Joint Commission International or ASEAN University Network. Also, some countries in the network have already accreditation system in place and it is compulsory for medical schools (and other programs), whereas in some other countries, accreditation can be voluntary-based.

CONCLUSION

1. The “Quality Indicators” will not be used for accreditation, but they will be used for development and sharing between medical schools. This effort should be accompanied by self evaluation of the medical school and ‘friendly assessment’ by other medical schools within the network as external assessor. Hence, each medical school will benefit from feedback from the process as to how to improve certain areas. Furthermore, each criterion in “Quality Indicators” is still needed to be reviewed according to consensus and evidences for verification. Other assessment or accreditation system (JCI – Medical Professions Education section) may further enrich the development of indicators which are more specific to medical schools.

ACTION PLANS

1. The medical schools within the network may use the current criteria and framework to do self evaluation.
2. Further external assessment processes need to be discussed

TOPIC 3 : MEDICAL RESEARCH

ASEAN TUBERCULOSIS RESEARCH AND CLINICAL TRIALS INTEGRATED ORGANIZATIONAL NETWORK

PRESENTER

Prof. Nicholas Paton
Departmen of Medicine, National University of Singapore

SYNOPSIS

A-TRACTION is a program conducted by ASEAN TB Genomics Network aiming to create a network to foster and coordinate TB clinical research in Asia. This program have numerous benefits for both members and sponsors of the program. Benefits for members of A-TRACTION include clinical research expertise building, human capital development, clinical trial infrastructure building, flow for funds of TB research into economies, and TB burden reduction in long run. While for sponsors the A-TRACTION benefits in form of structured platform to conduct clinical trials, shorter time to complete TB research projects, faster and more efficient answers to research questions. The final expected outcome of this program is shortening standard TB therapy from 6 months to 2 months. Having 900 patients recruited from 12 sites in 5 different countries, this program has an estimated cost of USD 12,000,000 that will be enough to fund the program for 5 years (2014-2019).

Since last year, several progress regarding A-TRACTION has been made including trial protocol, trial funding, sites preparation and patient enrollment. Regarding trial protocol, ethics approval from UK and Singapore were received in 2015 while there are still awaiting ethics approval from Indonesia, Thailand, and Philippines. The 12 trial sites in 5 countries are now set up in progress. There is also over USD 10,000,000 out of USD 12,000,000 already secured for trial funding. In addition, patient enrollment will start in second half of 2016.

CONCLUSION

1. Currently, the committee has proposed plan of actions for A-TRACTION, such as raising additional funding for the project, establishing network cores, starting network meetings, creating central repository of site information, also starting enrollment to TRUNCATE-TB to strengthen the network and initiate new projects.

ACTION PLANS

1. While the research is ongoing, other medical schools in other countries can still join it. Required technology transfer and faculty development process can be discussed.

TOPIC 3 : MEDICAL RESEARCH

CLINICAL PREDICTION AND BIOMARKERS RELATED TO SEVERITY OF DENGUE VIRUS INFECTION IN ASEAN

PRESENTER

Justin Chu, MD
National University of Singapore
Prof Jamuna Vadivelu
University of Malaya, Malaysia

SYNOPSIS

The researchers then form a workgroup called "The Dengue Fighter Team" consisting 13 representatives from ASEAN countries. The formation of this research group aims to reduce mortality of dengue virus infection in ASEAN, establish longitudinal cohort of dengue virus infected patients among ASEAN countries for both severe and non-severe cases, identify clinical and biomarkers as predictive markers for severity of dengue virus infection, also study both host and viral genetic factors correlated with severity of dengue virus infection. Research plan and strategy proposed by the group is establishing an interconnecting consortium network from the ASEAN countries. ASEAN dengue team players include clinical team, biomedical team, data management team, coordinator center, and clinical sample central repository team.

Subjects involved in the study will include pediatric and adult dengue virus infection cases in 9 ASEAN countries based on WHO 2009 and 2010 criteria or local standard care. Biomarkers discovery includes NK receptor, dengue NS1 quantification, CRP, and other metabolomics markers. Immunity markers consist of neutralizing and cross-reactive antibodies, also inflammatory cytokines. Host and viral genetics (genome wide association studies and personalized genome medicine) will be included in this study. Host and viral miRNA, proteome, and genomic expression profile will also be included

CONCLUSION

1. The team has achieved a high impact publication used for the study. It is a recent publication by Dr Justin Chu's team in PLoS Pathogen suggested the association of human Toll-like receptor 6/2 with the immunopathogenesis and severity of dengue virus infection. The funding from National University Health System (NUHS), Singapore, has been secured to initiate patient cohort study on the association of Toll-like receptor 6/2 with the severity outcome from dengue virus-infected patients in ASEAN. This study is lead by Dr Justin Chu from NUS and Professor Kinh Nguyen Van & Associate Professor Nguyen Vu Trung from Hanoi Medical University, Vietnam.

ACTION PLANS

1. Proposing to host an ASEAN dengue meeting cum workshop for ASEAN dengue investigators to meet and discuss funding and collaborative action plans. Moreover, the team will formulate and submit a research funding proposal to Wellcome Trust lead by Professor Rueng-pung Suthent from Mahidol University.

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TOPIC 3 : MEDICAL RESEARCH

ECOLOGICAL APPROACH TOWARDS HEALTH CAMPUS AT UNIVERSITY

PRESENTER

Prof. Maznah Dahlui, MD
University of Malaya

SYNOPSIS

University can provide accessible programs to facilitate healthy living of the students, but it needs an integrative approach that can foster healthy environments and behaviors to the students. University of Malaya has been used an ecological approach by reviewing the policy towards healthy lifestyles. Review will be used in determining the health needs and enabling the environments. University of Malaya has conducted a research to assess the health status and health needs of UM campus community. The survey was done to year 1 students using mobile application. The questionnaire collects information on demographic background, tobacco and nicotine exposure, dietary assessment, nutritional belief, physical activity, mental health assessment, and health survey. Also, anthropometry measurements were done to the students.

UM also has conducted a qualitative study to review institutional policy on promoting healthy lifestyle in campus and performing audit for campus cafeteria. 5 public universities and 5 private universities participated in the study. Result of the study were there has not been any policies for healthy campus. There are some guidelines for canteen and foods stalls but focused mainly on cleanliness and food safety. As in advance, a canteen audit program could also be used to assess the food safety in campus.

CONCLUSION

1. The healthy life campus study initiative by University of Malaya should be considered by other Medical Schools in ASEAN. Result of study could become a formalize policies to develop proper structure to promote healthy lifestyle for students and employees in campus.

ACTION PLANS

1. Medical schools within the network should try to initiate the similar concept of study and intervention to promote a healthy campus environment.

TOPIC 4 : UPDATE OF ASCP

PRESENTER

Ratna Sitompul, MD, PhD
Dean of Faculty of Medicine, Universitas Indonesia

SYNOPSIS

The 1st ASEAN Student Collaborative Project (ASCP) is a new breakthrough in our network to improve the student collaboration in facing the future challenges of medicine and healthcare. It has an aim to improve student skills in developing health projects in community within a collaborative framework

This 1st ASCP was expected to encourage South East Asia students to (a) propose community-based health projects; (b) Implement the projects and solve any faced constraints in community; (c) Deliver comments and criticism to others critically as reviewer; and (d) Collaborate actively within related projects.

In the 1st ASCP a total of 8 projects were further presented and discussed:

1. Faculty of Medicine Universitas Indonesia: BERKAT; Bersama Berantas Tuberkulosis, A Concept of Five Level of Prevention-Based Community Empowerment
2. Medical Faculty of Universitas Cambodia: Dengue Infection
3. Medical Faculty of University of Malaya, Kuala Lumpur, Malaysia: Heat Stroke Awareness among Secondary School Students
4. Medical Faculty of Siriraj University: Siriraj Visiting at Baan Bangkok Noi; a Multidisciplinary and Holistic Healthcare
5. University of Health Science, Lao RPD: Study of The Influence of The Advertisement for Powdered Milk on Maternal Breastfeeding among Pregnant Women Coming to The Antenatal Clinic at Mahosot Hospital, Vientiane-Laos
6. Yong Loo Lin School of Medicine, NUS: Public Health Screening 2014 Institute of Health Sciences
7. Universiti Brunei Darussalam: Education on Self-Management of Minor Illness and PrOPER Medication Use, as well as Promotion of Healthy Lifestyle Practices among Residents of Kampung Sukang.
8. University of the Philippines, Manila: Environmental Investigative Mission and Health Impact Assesment of The Sanitary Landfill in San Jose Del Monte, Bulacan

ACTION PLANS

1. ASCP meeting will be held every year
2. Next ASCP meeting will be held in Indonesia
3. Financial support of ASCP will be provided by ASEAN and China bank

THE DEANS' BOARD MEETING

PROGRAMME OF ASCP

Monday, July 25th 2016

- 08.00 Arrival at Indonesia
19.00 Welcome diner

Tuesday, July 26th 2016

- 09.30 Welcome speech Ratna Sitompul, MD, PhD
09.35 Speech by President of ASEAN Medical School Network Prof. Agnes Meija, MD, PhD
09.40 Speech by Rector of Universitas Indonesia Prof. Dr. Ir. Muhammad Anis, M.Met.
09.45 Speech by Director General of Learning and Student Affairs, Ministry of Research, Technology, and Higher Education of Indonesia Prof. Intan Ahmad, PhD.
09.50 Opening Ceremony
10.00 Dean's Photo Session
11.10 Cultural Performance
10.30 Lecture 1: The Role of Medical Schools in Cultivating Leadership Skills among Medical Students Assoc. Prof. Lau Tang Ching, MBBS, FRCP, MMedSci
11.00 Lecture 2: Research Project Report: Medical Schools in ASEAN Countries Prof. Agnes Meija, MD, PhD
12.00 Group Photo
12.30 Lunch Break & Poster Presentation
13.45 Project Report 1 Moderator: Ahmad Fuady, MD, MSc HEPL
15.00 Project Report 2 Moderator: Imelda Rosalyn Sianipar, MD, Mbiomed, PhD
16.00 Afternoon Walk at Hulu Cai Camp
18.00 Dinner and Cultural Night

Wednesday, July 27th 2016

- 06.30 Morning Exercise
08.30 Project Report 3 Moderator: Ahmad Fuady, MD, MSc HEPL
09.45 Project Report 4 Moderator: Imelda Rosalyn Sianipar, MD, Mbiomed, PhD

PROGRAMME OF ASCP

Wednesday, July 27th 2016

11.00	Lecture Collaboration in Medicine	Prof. Aru Wisaksono Sudoyo, MD, FACP, FINASIM
12.00	Lunch Break	
13.30	Outbond	
19.30	Workshop: Future Research Collaboration	Facilitators: Ahmad Fuady, MD, MSc-HEPL Dewi Friska, MD
20.30	Closing	

Thursday, July 28th 2016

06.00	Preparation and breakfast
08.00	Check out
11.30	Lunch
12.30	Depart to Airport

ASCP PROJECT REPORT SESSION



TOPIC 1

HOME VISITING FOR CULTIVATING THE MIND OF HOLISTIC APPROACH

Faculty of Medicine Siriraj Hospital, Thailand

PRESENTERS

1. Pivalitt Ittichaiwong
2. Poorinut Poonthongpan

SUPERVISOR

Yodying Dangprapai, MD, PhD

SYNOPSIS

The basis of holistic medicine is to uphold a medical approach through spiritual, physical, mental, and social aspects. There are three objectives of this project, they are: to support preclinical students in learning holistic medicine, to aim and concentrate on learning holistic medicine, and to create new model for learning holistic medicine. The team doing this project by directly approach people in community, such as visiting the houses in rural areas and observe the condition. The team consists of a doctor, a nurse, and several medical students. After the survey, the team determine the actions needed to be done.

During survey, the team found target patient, Aunt Mod, 85 years-old Thai women with fatigue, dyspnea on slight exertion, and paralyzed. It has been 8 years since the last time she could walk and she has never been outside her house. She lives in unhygienic, dirty, and full of dust house. And then, the team decided to apply the holistic medicine method with a proper rehabilitation. Moreover, the team took Aunt Mod out to see her friends and go to the temple to give her motivation. The team chose Aunt Mod as a patient who needs holistic treatment because her condition was a very rare case and she desperately in need of spiritual, mental, and social support.

The roles of medical students in this project are to guide the 1st and 2nd year preclinical students to holistic approach in general, in order to understand the dimensions involved in the holistic approach and later will be able to apply it in the medical field. To implement this project in a larger community, the team will involve in a program from the hospital that has already been established, called CSR (Corporate Social Responsibility). This program is intended for nearby community.

RESULT

Poor people don't have money for their everyday life and needs, that is one of the reason why the team conducted the visiting program because the patients cannot reach the medical facilities, which is why they are trying to provide those facilities to them. In conclusion, the holistic medicine approach has a significant effect on patients.

TOPIC 2

SUKANG COMMUNITY PROJECT 2016

Universiti Brunei Darussalam

PRESENTERS

1. Caroline Tan Chiaw Wei
 2. Nor Hidayati binti Awang Ahmad
 3. Nadzirah Hakeemah binti Dr Zainal Ariffin
 4. Jonanthan Wong Ming Hui
 5. Tong Kah Cheong
- Dr. HjH Fazean Irdyati Binti Hj Idris

SUPERVISOR

SYNOPSIS

This project was held in Sukang Village, a very remote area which took around 4-5 hours by car to reach this village from Brunei city. There is no clean water supply, no electricity, and very limited access to healthcare. The only clinic there only operate once in a month with 1 general practitioner, 1 dentist, 1 pharmacist, and several nurses. The goal of this project is to promote healthy lifestyle by raising awareness and educating people with basic life support knowledge. The objectives of this project are: to perform health screenings, to promote awareness towards personal hygiene and health, and to empower and equip the people with basic life support knowledge.

The team use a community-based project design. On the first visit, the team gather information and identify health issues in Sukang Village. They conduct a focus group discussion with head of village and visit to school and Punan long house. From the observational findings, the team got several important issues, which are: poor personal hygiene (dirty hand and fingernails, skin infections), people don't have sufficient knowledge on basic life support, most elderly people are overweight, living conditions are poorly maintained (damp houses, dirty, unhygienic kitchen, algae and mosquitos breeding spots are found, and no ventilation), and limited access to clean water and road.

On the next visit, the team do some interventions such as basic health screening (giving medical advice about healthy eating, physical activity, and harmful effect of smoking and alcohol), educate the students about basic oral and hand hygiene, educate the people about minor illnesses (constipation, diarrhea, cough, flu, fever, etc.), demonstrate bandaging technique, educate basic life support skills, and donate the first-aid kit

RESULT

The team found out that most children in Sukang Village are undernourished. The possible reasons for this condition are because of the children rarely have breakfast and they still not undergo healthy lifestyle in their daily life. In contrary, most adults population in Sukang Village are obese. The possible reasons for this condition are because they lack of education and awareness about healthy eating and Brunei's diet is not healthy. In conclusion, it is not easy to change the people's habit. So, the team still need to do follow up and collaborate with the health ministers and other parties in order to support the movement.

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TOPIC 3

NUS MEDICAL SOCIETY PUBLIC HEALTH SERVICE

NUS Yong Loo Lin School of Medicine, Singapore

PRESENTERS

1. Ivan Low
2. Lee You Jun

SUPERVISOR

Fong Seng Lim, MD

SYNOPSIS

The principles of Singapore health system is universal health coverage and individual responsibility including financing, service delivery, and human resources. Even though this health system has been well-established, there are still gaps and challenges, which are: chronic non-communicable diseases, public health measures still largely centralized, lack of community-led action in health promotion, and health workforce becoming more diversified.

NUS Yong Loo Lin School of Medicine as the oldest medical school in Singapore has a program focused on preventive medicine, called NUS Medsoc Public Health Service (PHS). This program is a student-led, faculty-supported initiative established in 2004. The activities that have been done through this program including a door-to-door health promotion, mass health screening and follow ups (basic health screening, cholesterol screening, etc.), young health ambassadors programme, and media outreach efforts. Lack of health promotion in the community and sometimes health services stop at screenings instead of doing follow-up, which is why the program is more focused on the health promotion.

The project that has been done understanding the community through population screening, income per capita screening and the way forward: programs based on outreach efforts. In this project, health screening services including cardiovascular health and primary care referrals, colorectal oral women's and geriatric health, and in-screening health education. In order to empowering the youth, the team done expansion to more schools, implementing success factors for knowledge transfer, and explore translation of knowledge into action.

RESULT

A summary of the community they serve, the outputs, and outcomes, and focus areas for the future; for preserving accountability and for planning purposes. Information systems need to be strengthened for analysis of data trends over the years, and in turn for setting the direction of the health service. The health service will continue to evolve along with the local health system and its relevant policies. The health screening itself can become an opportunity to raise awareness as it provides the community with post-screening consultation session and follow-up by phone call. Also, they help to strengthen the bridge between to the community and the health providers.

TOPIC 4

ADMISSION OF DENGUE TO NATIONAL PEDIATRIC HOSPITAL, CAMBODIA FROM 2012 - 2015

International University, Cambodia

PRESENTERS

1. Pivalitt Ittichaiwong
2. Poorinut Poonthongpan
3. Ly Zoka

SUPERVISOR

H.E. Prof. Dr. Sabo Ojano, MD, PhD

SYNOPSIS

Dengue fever is one of the leading cause of death in Cambodia, and one of the most common endemic disease, which is why this topic is chosen. DHF lies in the top ten primary causes of death in Cambodia and top 5 infectious diseases admitted to the hospital. Poor education and information in the community, hence a supporting program that can raise awareness and knowledge about the DHF is needed in order to trigger an action from the people.

There were a total of 4614 cases of suspected dengue recorded in National Pediatric Hospital from 2012 - 2014. New 310 cases of suspected dengue recorded in 2015 were evenly spread between males at 49% and females at 51% of all cases. There was a total of 2601 cases of dengue fever, 1804 cases of dengue hemorrhagic fever (DHF) and 519 cases of dengue shock syndrome (DSS). No deaths were recorded in 2015. The problems of dengue can be seen from educational sector, vector-control, and living standard.

In this project, the team interview the community about their knowledge in DHF using survey method. The team also educate community about DHF using posters as the media. This project is a long-term project done by medical students on their internship.

RESULT

From survey that has been done, most people in community have minimal knowledge about DHF. This result shows why DHF is one of the leading cause of death in Cambodia. Educating community about DHF should be done continuously in order to raise their awareness and give a clearer understanding about DHF, because most Cambodian are prioritiz-

TOPIC 5

BERKAT (BERSAMA KALAHKAN TUBERKULOSIS), A CONCEPT OF FIVE LEVELS OF PREVENTION-BASED COMMUNITY EM-

Universitas Indonesia

PRESENTERS

1. Matthew Billy
2. Kevin Afaratu
3. Bashar Adi Wahyu Pandhita

SUPERVISOR

Dewi Friska, MD

SYNOPSIS

Tuberculosis (TB) is an airborne disease caused by Mycobacterium tuberculosis. Due to its airborne nature and the symptoms that is manifested in patients, TB is very contagious in place with a dense population, like Indonesia. World Health Organization (WHO) estimated that in Indonesia, TB has infected more than 680.000 people in 2013 and has killed more than 64.000 people. In order to combat the disease, Indonesia use a method that involve participation from nearby society. This is done by choosing some members of the society to be a cadre in order to raise society awareness and to help people to fight the disease. However, a lot of cadres do not have adequate knowledge about TB. This is caused by many factors, one of them is because of the lack of cadre's socialization and training. One way to increase the cadres' knowledge and skill is through community empowerment. The objectives of this project are to know the knowledge of cadres about TB and to know the method to improve community empowerment.

This project consist of research and community empowerment. The research of this project consist of two issues, which are assessing pre-post test knowledge level (I) and epidemiology of TB and relationship with 'Rumah Sehat' criteria (II). Design of the first study is cross-sectional. The community empowerment concept is based on 5-level of prevention, which consists of health promotion, specific protection, early diagnosis and prompt treatment, disability limitation, and rehabilitation. The team promoting Pola Hidup Bersih dan Sehat (PHBS), educate sputum screening, and emphasizing the importance of Pengawas Minum Obat (PMO). The team used flipchart to educate the cadres and they ensure the cadres' knowledge by playing game-modified "TB snakes and ladders".

RESULT

From the pre-post test knowledge, the result shows there is an improvement of the cadres' knowledge after the education is given. From this project, can also be concluded that learning in a fun way such as using game is an effective method to gain cadres' knowledge about specific topic, in this project about TB.

TOPIC 6

BANTAYNANAY: A MOBILE MATERNAL HEALTH INFORMATION AND MONITORING SYSTEM

University of The Philippines Manila

PRESENTERS

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SUPERVISOR

Anthony GH Cordero, MD

SYNOPSIS

The number of maternal mortality ration in Philippines are decreasing from 152 to 114 in 25 years. Top causes of maternal deaths in Philippines are complications, hypertension, and haemorrhage. From 2012 until 2013, cellular phone sales were increasing 326%. In 2016, 89% of Filipinos have cellular phone. From 89%, 53% of them have smartphone. This findings can be used to to improve maternal health seeking behaviour and identify pregnant women at risk through mobile application. The goals of this project are: pregnant women will have access to accurate and timely pregnancy-related information through a mobile application; pregnant women will be able to input pregnancy-related data; pregnant women and the healthcare team will be able to receive alerts about important health visits; and pregnant women and the healthcare team will be able to receive alerts about the presence of danger signs in pregnancy.

There are several stages in this project, which are: planning (stakeholder consultation, goal-setting and prioritization, and make a project proposal), execution and refinement (technical consultation, mobile app user interface, progress report), result optimization (collaborative meeting, mobile app development and refinement, pilot testing), and project deployment (stakeholder training, project deployment, monitoring and evaluation).

RESULT

This project will be continued to stage 3 (result optimization). In the future, this project will be implemented all over the Philippines. The team expect this project can achieve higher level of sustainability through partnership with a mobile data provider and local government units.

TOPIC 7

STUDY OF THE IN UENCE OF THE ADVERTISEMENT FOR POWDERED MILK ON BREASTFEEDING AMONG PREGNANT WOMEN COMING TO THE ANTENATAL CLINIC AT MAHOSOT HOSPITAL, VIENTIANE LAO PDR

Faculty of Medicine Siriraj Hospital, Thailand

PRESENTERS

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SUPERVISOR

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SYNOPSIS

Exclusive breastfeeding rate of Lao mothers in the first 6 months is still very limited. Many factors may contribute to the low exclusive breastfeeding rate. Powdered milk advertisement on television probably influences exclusive breastfeeding practice of Lao mothers but no study has been conducted before. The objective of this project are: to determine the rate of mothers feeding with breast milk exclusively, with powdered milk and with mixed milk before watching the advertisement; to describe the opinions of pregnant women on the advertisement for powdered milk; and to determine the rate of pregnant women planning to feed after watching advertising of powdered milk and determine the reason for choosing powdered milk.

This project use prospective descriptive study. The data collected from all pregnant women coming to antenatal clinic at Mahosot hospital (288 pregnant women). They were given informed-consent, after that they had a face-to-face interview using questionnaire. The pregnant women then shown a powdered milk advertisement video and they had a face-to-face interview again using the same questionnaire with the previous one. The result of this project can prove if the strategy to promote breastfeeding is effective or not. If it has to be strengthened the laws on breastfeeding by extending the length of maternity leave.

RESULT

The rate of breastfeeding of pregnant women before watching powdered milk advertisement video (55,9%) decreased after watching the advertisement (39,9%) with the difference is statistically significant. In conclusion, the advertisement of powdered milk has a significant influence on the choice of breastfeeding practice among Lao mothers. Lao pregnant women had positive attitudes on powdered milk advertisement on the television.

TOPIC 8

KNOWLEDGE, ATTITUDE, AND PRACTICE ON HEAT STROKE AMONG SECONDARY SCHOOL STUDENTS

University of Malaya, Malaysia

PRESENTERS

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SUPERVISOR

Assoc. Prof. Dr. Foong Ming Moy

SYNOPSIS

The global heat wave or Equinox phenomenon has hit Malaysia, mostly in northern area of Malaysia, since early January 2016 and continued until early July 2016. There is a significant decline in crops productions were reported during the very strong heat wave but no previous report on significant health impact. The Ministry of Health Malaysia has released a press statement on March 2016 expressing their concerns on the rise of heat injuries among the Malaysians. By March 2016, there are 7 heat injury related cases reported nations wide. On April 2016, the case increase to 200 cases.

Heat stroke is a preventable illness and through a good knowledge about the disease it can help to reduce mortality and morbidity. The objectives of this project are: to assess the knowledge, attitude, and practice among secondary school children in the northern state of Peninsular Malaysia; to determine the association between social demographic characteristics with knowledge, attitude, and practice on heat stroke; and to increase awareness and educate the secondary school students on heat stroke preventive measures through health education activities. The study use cross-sectional method. The team use a questionnaire consists of 43 questions based on knowledge attitude and practice using score range. The questionnaire are made based on legitimate sources and references but the team also got some help from resource persons. The data then analyzed using SPSS. After filled out the questionnaire, students are given health education to increase their awareness about heat stroke. They also play interactive games that has been organized to trigger their knowledge.

RESULT

584 out of 600 questionnaires are collected and 521 are used for data analysis. From the data analysis, there is a significant correlation between knowledge and attitude, also between knowledge and practice, but no correlation between attitude and practice.

SUMMARY OF ACTION PLANS

TOPIC 1 MEDICAL EDUCATION

1. Two main projects are proposed:
 - (a) Sharing of medical education best practices
Party in charge: University of the Philippines College of Medicine
 - (b) Inter-professional Collaboration project, with outbreak management or disaster management as the core topic. The project will involve module development, faculty development and implementation
Party in charge: Universitas Indonesia
Initial collaborators: University of Malaya, NUS
2. Once the proposal is completed, the network will apply for fundings from some potential funding bodies: China medical board, Asian Development Bank, ASEAN

TOPIC 2 QUALITY INDICATOR

1. The medical schools within the network may use the current criteria and framework to do self evaluation.
2. Further external assessment processes need to be discussed

TOPIC 3 MEDICAL RESEARCH

ASEAN TUBERCULOSIS RESEARCH AND CLINICAL TRIALS INTEGRATED ORGANIZATIONAL NETWORK

1. While the research is ongoing, other medical schools in other countries can still join it. Required technology transfer and faculty development process can be discussed.

CLINICAL PREDICTION AND BIOMARKERS RELATED TO SEVERITY OF DENGUE VIRUS INFECTION IN ASEAN

1. Proposing to host an ASEAN dengue meeting cum workshop for ASEAN dengue investigators to meet and discuss funding and collaborative action plans. Moreover, the team will formulate and submit a research funding proposal to Wellcome Trust lead by Professor Rueng-pung Sutthent from Mahidol University.

ECOLOGICAL APPROACH TOWARDS HEALTH CAMPUS AT UNIVERSITY

1. Medical schools within the network should try to initiate the similar concept of study and intervention to promote a healthy campus environment.

TOPIC 4 UPDATE OF ASCP

1. ASCP meeting will be held every year
2. Next ASCP meeting will be held in Indonesia
3. Financial support of ASCP will be provided by ASEAN and China bank





Organising Committee

ORGANISING COMMITTEE

MEMBERS OF THE ASEAN MEDICAL SCHOOL NETWORK

Mahidol University, Faculty of Medicine Siriraj Hospital, Kingdom of Thailand
PAP Rashidah Sa'adatul Bolkliah Institute of Health Sciences (PAPRSB)
Universiti Brunei Darussalam (UBD), Negara Brunei Darussalam
International University, Kingdom of Cambodia
University of Health Sciences, Faculty of Medicine, Kingdom of Cambodia
Universitas Indonesia, Faculty of Medicine, Republic of Indonesia
University of Health Sciences, Faculty of Medicine, Lao People's Democratic Republic
University of Malaya, Faculty of Medicine, Malaysia
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University of Medicine, Mandalay, Republic of the Union of Myanmar
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