

The 2nd Annual Meeting of Society for Disaster Medicine and Public Health. (2016/7/27-29)

Topics: Achieving Global Health Security: Prepare, Respond, Recover, Prepare...
Venue: Hilton Hotel & Conference Center (Rockville MD, U.S.A.)

On Jul 27-29, 2016, the 2nd Annual Meeting of Society for Disaster Medicine and Public Health (SDMPH or Society) was held in Washington D.C. SMDPH has been publishing the Journal of Disaster Medicine and Public Health Preparedness (DMPHP or Journal) for 10 years and promoting the international awareness and preparedness of disaster medicine and public health. Prof. Shinichi Egawa organized the International Workshop for Disaster Medicine and Public Health Management in May, 2014 in collaboration with many of the Society members and currently serves as an Associate Editor of the Journal. This Annual Meeting is the second time, but is officially accredited as Continuous Medical Education of American Medical Association.

On the 1st day, Prof. Egawa presented the “Japanese response to Nepal Earthquake” . He mentioned the official response of Japan Disaster Relief to Nepal and the preparedness of Nepal health care providers. He also presented “Tokyo Mega-Earthquake, The role of university” as the key note lecture on the 2nd day. He constituted his speech of the hazard anticipation, promotion of self-protection to the general population by Metropolitan Government, the system of disaster medicine and public health in Japan and the disaster risk reduction according to the Sendai Framework.

More than a hundred participants actively discussed on each panel discussion. The importance of education and training of general population as the immediate responders, such as “STOP THE BLEED” were emphasized. It was very impressive that the Assistant Secretary for Preparedness and Response (ASPR) of US Government together with NIH is promoting the readiness of research resources in disaster medicine and public health. The tools and articles are publicly available on the website that has already passed the IRB of NIH and references and reports that are not included in the PubMed are cumulated in a disaster medicine database. Amazingly, the population density map of people who needs special assistance are available all over the nation so that the Search and Rescue Team could prioritize the areas. This data and toolkits are not only for the researchers but helps to achieve “DO NO HARM” ethical principle. This indicates that U.S.A. is promoting disaster medicine at the national level. Meanwhile, the medical license is only valid in the issued state and this system is an obstacle to the physicians to assist the affected area unless you are designated as DMAT.

The panel discussions were under the following topics

1. Global Engagement
2. Global Events
3. Global Response
4. WHO Emergency Medical Team Concept
5. The Universe of Responders
6. Active Shooter

7. Education. Training
8. Research in Disaster Medicine and Public Health
9. Modified Tabletop Exercise (Medical/Public Health effects of Total Grid Outage in a Major City
10. Bystanders in Response
11. Human Environmental Interactions and Health Impacts

There were various special lectures including Terrorism explosion, Boston Marathon Explosion, Medical facility evacuation in Hurricane Katrina, and Mental health of responders. Active discussion was made by health responders, researchers, governmental and military responders and other sector stakeholders. NOAA of US Government presented the impacts of space weather on the GPS signals and electrical power supply. We have to aware the possibility of emerging vulnerability in parallel with the development of cutting edge technology. The Northeastern Coastal area from Washington DC to New York is the most vulnerable area to the extreme space weather and the tabletop exercise became more realistic and the importance of trans-sectoral, trans-disciplinary approach.

Prof. Egawa pointed out the lack of disaster risk reduction according to the Sendai Framework and Bangkok Principles because without the mutual prospective action against the rapid urbanization, aging and coordination of Sendai Framework, SDGs and Climate Change Adaptation, it is impossible to catch up only by the capacity building.

The Annual Meeting will be held in every July in Washington D.C.



Prof. Shinichi Egawa at Key Note



Tabletop exercise by panelists the extensive power outage of hospital



Active audience



ASPR in DHHS is now providing tools,
reference database and risk maps.
Shinichi Egawa (Disaster Medical Science Division)