

# WONCA News

An International Forum for Family Doctors



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## WONCA GLOBAL SPONSORS



**FROM THE WONCA PRESIDENT :**

**FAMILY MEDICINE IS ALSO ALIVE AND WELL IN THE EAST**

*“If the principles (of Family Medicine) ...have an enduring value, they should be applicable to all cultures and all social groups ..... I believe firmly that these principles have universal application. How they are applied, however, will vary according to circumstances. If there is only one physician for 50,000 people, it is obvious that his or her role as a manager of resources, leader, teacher, and resource for difficult problems will be predominant.....”*

*Professor Ian McWhinney  
In Oxford Textbook of Primary Medical Care,  
OUP, 2004*

During my three years of international travel as President of this remarkable organisation, and through the preceding years on the Executive, I have been repeatedly impressed by the universality of the foundations and principles of family medicine. While the content and ecology of family practice may vary from country to country, the basic characteristics of family doctors permeate all systems. “A good family doc is always a good family doc, no matter where she or he is practicing”!

This universal thread was once more stressed during my recent exciting visit to the Philippines. I was invited to present a keynote and Dr Ramon R. Angeles Memorial Lecture at the 46<sup>th</sup> Anniversary and Annual Convention of the Philippine Academy of Family Physicians. The

theme of their meeting was “Looking back, moving forward from illness to wellness”. Remarkably, this organization, which began as the Philippine Academy of General Practitioners, was established in 1960 and it commenced its first annual postgraduate course that year. The Founding President was Dr Ramon R. Angeles, a true and humble community-based family doctor in every sense, who has become a legendary icon and remarkable role-model within the country. When Wonca was established in 1972, he represented the Academy, one of the 17 Founding Member Organisations. So their organisation and its practitioners have been essential contributors to the World organisation and family medicine for nearly half a century.



Bruce Sparks and Alejandro Pineda, President of Philippine Academy of Family Physicians



Bruce Sparks Sharing a Moment with Zorayda “Dada” Leopando, Past Regional President of the Asia Pacific Region



Three Philippine Academy Past Presidents, from left to right: Raphael Bantayan, Benjamin Chang, Edward Tordesillas



Philippine Family Medicine Resident Winners of the Clinico-Pathological Conference



Bruce Sparks and Family of Founding Philippine Academy President, Ramon Angeles

The activities of this organisation under the recently re-elected President, Dr Alejandro Pineda, are most exceptional; they not only maintain high academic standards and numerous activities through contributions from all academic departments of family medicine, and national training programmes, but also have specific community programmes for the poor and indigent. Academic endeavour has a long history in the Philippines – The University of Santo Tomas was established in 1610, 26 years before Harvard! It now has one of the many excellent teaching hospitals in the multi-island country.

What has really impressed me during my tenure had been the rigor and standards of research in family practice in our member organisations. While much of the research in developing countries will not see the ink of major international publications, due to the apparent and reported bias in paper selection, the projects being carried out are generally of major

importance locally to the communities and to the health workers in these countries. This was very evident in the academic programme of the convention and the innovative research competition held during the convention in Manila. Equally exciting were the finals of the Clinico-Pathological Conference. Teams of Family Medicine Residents from training programmes throughout the country had been assessed at preliminary rounds prior to the meeting. The presentations by the finalists, of their understanding of a patient with a complex hepatic disease, had the excitement and tension of a World Cup final! It was a test not only of their academic rigour and ability to problem solving, but also essential family doctor characteristics of teamwork, collaboration, humility and respect.

Among my most rewarding experiences were the times I spent with residents, discussing their patients, course work, learning styles, and aspirations. It was in them that I particularly experienced the universal family medicine thread. Their enthusiasm of the discipline was especially encouraging, as was their biopsychosocial approach to patient care. This I had also experienced during the refreshing time I spent with the Taiwanese residency program last year. I am reassured that the quality of our up and coming leaders in the discipline will move us to new heights. Not only are they clinically very sound but they have embraced the best of the past with the challenges of the future, while maintaining the core values of being a 'good family doctor'.

The lessons I learnt are numerous, but perhaps the most refreshing was the enthusiasm instilled in the discipline by the

senior family practitioner leaders in the Philippines, not least of all Zorayda (Dada) Leopando, well known for her dedicated enthusiasm and nurturing of the discipline over the years and during her tenure as President of the Wonca Asia-Pacific Region. In no other organisation have I witnessed such continued active participation of past-Presidents in the affairs of the body – their wisdom and experience is silently influential throughout its activities without stifling growth and change. Another lesson is that of palpable commitment to improving the plight and health status of their practice populations.

My friends would know that my message would not be complete without a suitable quote from Sir William Osler. Perhaps the most appropriate one which reflects my visit to the Philippines, with its rich, long history of family medicine and which incorporates the wisdom of the past in its exciting new activities, would be from Aequanimitas, "The past is always with us, never to be escaped; it alone is enduring; but amidst the changes and chances which succeed one another so rapidly in this life, we are apt to live too much for the present and too much in the future.

**Professor Bruce Sparks**  
Wonca World President

*PS. Regretfully due to illness close to my family I was unable to submit my usual column in earlier editions. I express my family's gratitude to Professor Chris van Weel, Wonca President Elect, for standing in for me over this period.*

## FROM THE CEO'S DESK:

### OPPORTUNITIES IN A WONCA WORLD CONFERENCE

A Wonca World Conference is held only once every three years. The next World Conference will be held in Singapore in July 2007 over a three-day period. Preparations are now in their final stages.

As has been the policy over the past twenty odd years, the World Conference will be preceded by a Full Wonca Executive Meeting lasting three days, followed by a day of Regional Council Meetings for the six Wonca Regions and by three full days of the Wonca World Council. This then leads onto the conference proper lasting three days.

This gathering of the leaders of Family Medicine from the various Wonca Full and Associate Member Organizations, as well as Organizations in Collaborative Relations with Wonca, provides a unique opportunity that presents itself only once in a triennium. Besides the many opportunities for the renewal of friendships, side-discussions on issues of mutual interest, networking and learning for these leaders, the occasion also presents opportunities for several other events to occur. I hope in this short article to suggest some of these that may be worth considering.

Firstly, whilst the growth of Wonca over the past decade has been characterized by the increase in the number of member organizations, there has also been an increase in the number of sub-groups that have been established for which Wonca has agreed to

provide financial and organizational support. These would include the Women in Family Medicine, Mental Health, and the Education Working Parties.

Currently all these and other established sub-groups are actively pursuing their own agenda which in most cases do not significantly compliment each other. There is perhaps a need to have some common thread connecting the agendas and objectives of these various sub-groups. This will require that the gathering of the many family medicine leaders prior to a world conference be an occasion for Wonca to set some specific goals for each triennium. Once these goals have been identified, the various Wonca regions and sub-groups could incorporate the identified goals in their planning for the triennium's activities. In this way, the efforts of this global organization would be better focused and the objectives more achievable through its regions and sub-groups.

It is therefore with this in mind that the coming Wonca World Council will devote some time to a break-away session during which the leaders in smaller groups will be requested to discuss in-depth on what some of these specific Wonca goals should be. If this approach proves successful and desirable, the same may become a feature of all future Wonca World Councils.

Secondly, at each World Council, the Wonca Executive and the various Wonca sub-groups present their triennium's work and reports and only issues of importance are singled out for discussion. Even with this selective approach to discussions, the Council is a three full-day affair on account of the very lengthy agenda. There is hardly any opportunity for dialogue and discussions between the Wonca Executive and the CEO with the representatives of the sub-groups. Such dialogue if achievable may lead to better and closer co-ordination, collaboration and working relationships between these sub-groups and the Executive Committee.

We should perhaps explore the possibility of special working lunch or dinner meeting between the Wonca Executive and some representatives of each Wonca sub-group to achieve this end. These dialogue sessions may help the parties involved to better understand each other and the priorities, planning, concerns and limitations of the various programs proposed for each triennium. Whilst there will be some cost to be incurred, I believe the outcome will be worth the time and money spent.

Finally, there should perhaps be incentives to encourage all Wonca sub-groups to hold special events in conjunction with a Wonca world conference. Currently, most Wonca sub-groups do hold their business meetings just prior to the world conference. But these tend to only involve a small number of key persons of the sub-groups and do not add much to the attractions of attending the world conference for the vast majority of delegates of the conference. If each and every sub-group were to hold some educational programs specific to its area of interest in conjunction with its business meeting, these would increase the flavor and variety of the conference.

Perhaps one of the ways this could be realized is to encourage the use of the funds allocated to sub-groups for the year of a world conference for the specific purpose of holding such educational programs before or during the conference. Such funding could be used to sponsor speakers or help support participants from developing countries to attend the programs and also the world conference.

A Wonca World Conference, held once in a triennium, is a very special event for the Organization. This is the time when global leaders of Family Medicine gather to exchange ideas, learn from each other, expand networking and explore opportunities. I believe that maximum advantage should be taken of such an occasion, as most would have made significant effort and sacrifice to be present.

**Dr Alfred Loh**

Chief Executive Officer  
World Organization of Family Doctors

## FROM THE EDITOR:

### ONE STOP SHOPPING AT GLOBAL FAMILY DOCTOR – WONCA ONLINE

The 18<sup>th</sup> Wonca World Conference in Singapore, July 24-27<sup>th</sup>, is just three months away. Time is running out if you have not yet made travel plans to attend this most extraordinary gathering of family doctors from around the world.

Would you like to register for the Wonca World Conference? Learn more about the World Organization of Family Doctors? Keep up with relevant family medicine / general practice knowledge? Find a link to a Wonca Member Organization's website?

All of this valuable information and much more are but one web click away at [www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com)

Professor Wes Fabb has served with great distinction as GFD's Medical Editor since its inception in 2001. Stephen Wilkinson joined as Medical Editor in 2004, Jim Vause in 2005 and Linda French in 2007. The Wonca GFD Medical Editors scan 5,000 article titles each month from over 200 family medicine, general and specialist online journals for articles relevant to family doctors. This valuable service available to you through GFD allows you to maintain current as a family doctor with minimal time and effort.

In addition, GFD contains everything you need to know to quickly become knowledgeable about Wonca, its member organizations, working groups, relevant global meetings for the family doctor, and other useful resources. Each bimonthly

publication of Wonca News is posted and can be downloaded from GFD, including archived issues back to 2001.

This issue of Wonca News will give you just a taste of what is available to you on GFD.

The Wonca GFD Medical Editors, Publications Committee Chair Geoff Martin, CEO Alfred Loh and the Wonca Executive are continually looking for ways to make Global Family Doctor – Wonca Online even more relevant to you.

I continue to be amazed upon meeting family doctors who have not yet discovered a website that is so relevant and important to their professional lives. If you are already a regular GFD visitor, would you please do your part to inform your fellow family doctors about this invaluable resource at [www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com)

For those who have yet to register for the 18<sup>th</sup> Wonca World Conference in Singapore, please register online through GFD. I look forward to seeing you in Singapore!

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## FEATURE STORIES

### WOMEN IN ACADEMIC MEDICINE

*(This article is one of a series done by the authors on behalf of the Wonca Working Party on Women and Family Medicine (WWPWF) published in Wonca News over the past few months. Please see*

*[www.womenandfamilymedicine.com](http://www.womenandfamilymedicine.com) for the full monograph, literature review, summary and annotated bibliography on Women in Academic Medicine.)*

Despite the increased proportion of women entering medical training, women are still under-represented in academic medicine. Although women are more likely than men to choose an academic career, women physicians' advancement is slower than that of their men colleagues. We explored the individual, institutional and societal factors that contribute to this phenomenon. Most of our evidence came from North American literature, and might differ from experiences elsewhere that have not been reported as widely.

Currently, women comprise 32 percent of faculty at US medical schools. More women are advancing to senior academic positions in medical schools (27% of associate and 15% of full professors) than previously, but not as many as their numbers in medicine would dictate and not as fast as their numbers are growing among medical students (47%) and junior faculty (38% of assistant professors). According to the Association of American Medical Colleges (AAMC), which gathers comprehensive data each year on students and faculty at US and Canadian medical schools, women

are making slow gains from assistant professor to full professor, but the rate of promotion to full professor has been stagnant at 25% of promotions for the past 5 years (currently an average of three women faculty per medical school). The number of women deans (10%) and department chairs (11%) is still small, but has increased substantially in the last decade, although women's participation as associate and vice deans is proportional to their representation among senior faculty.

One key measure of academic productivity is the number and quality of publications. Increasingly, women fill the ranks of first and last authors of articles and editorial commentators in prestigious medical journals, especially in fields like pediatrics and ob-gyn with strong women's presence, but overall women still make up the minority of authors. A 2004 study showed that women comprised 29.3% of first authors and 19.3% of senior authors in six prestigious U.S. medical journals, and 11.4% of guest editorialists in *NEJM* and 18.8% in *JAMA*. The percentage of women editorialists *could* change dramatically, as the editors of medical journals have the explicit power to select the authors of guest editorials.

Historically, women have reported less infrastructure support than men in laboratory space and research assistance, and even when their research output was equivalent to men peers, their financial compensation has typically lagged. Several studies have shown that women academic physicians in the US received lower salaries than comparable men colleagues, a deficit in compensation worse than that for non-physician women and more exaggerated in women with greater seniority. In addition, of faculty with children in the US,

women researchers report less research funding and less secretarial support than men, with resulting fewer publications, slower progress, and less career satisfaction – differences that did not occur among faculty without children. At the personal level, letters of recommendation about highly qualified women used tame and flat language to describe their accomplishments compared to the superlatives in men's letters of recommendation. To make headway in such difficult circumstances, women believe that mentoring is important. Nevertheless, they feel that they have more trouble finding a mentor than their men colleagues. A recent UK study at one medical school showed that randomly selected medical students valued men faculty as role models "in relation to their knowledge, professional power, and authority" while they viewed the women faculty role models for the qualities of tolerance, integrity, respectfulness, and support towards students.

Structurally, academic institutions could choose to be more flexible in how they operate. Meetings still frequently occur in the early morning and evening hours, times notably unfriendly to the parents of small children. The promotions time clock, in some universities, has not slowed down for childbearing women – or their spouses. In those medical schools that do offer the possibilities of tenure clock-stopping and part-time approaches to tenure (69% of U.S. medical schools in 2005), these policies fail to generate real change because so few faculty make use of them. Moreover, the creation of part-time faculty positions has actually slowed promotions, removed tenure options and done little to resolve the problems. Both men and women may choose to work part-time: in one US study in 1993, women were

more likely to split their hours between faculty work and childrearing while men divided their hours between faculty work and private practice. While medical faculties may perceive part-time members as valuable, women (and parents of small children) believed that part-time faculty was viewed as less committed to their careers and to the institution.

The academic environment remains an inhospitable habitat for women in the U.S., even though professional development focusing on the needs of women faculty is widely available. The "hidden curriculum" continues to foster traditional assumptions about men and women. And while the academic organizations may call for leaders with the skills to build consensus and collaboration toward values-based goals, competition, not cooperation, continues to characterize medical education settings.

These challenges are not only a matter of an unfriendly "climate." Harassment (including sexual harassment) is a reality for many medical students and residents (estimates run up to 35% of 1<sup>st</sup> year residents), usually from supervisors who may be senior residents or clinical faculty members. Sexual harassment may include flirtation, offensive language, sexual propositions, sexual contact, sexual bribery and assault, as well as discriminatory grading and exclusion from educational opportunities. The experience of harassment leads to poor self-esteem and low self-confidence. Such experiences may "frame" a student's medical career and lead to long-term career dissatisfaction.

Multiple competing demands are a reality for professional women. Even highly trained academic women in medicine define success as

achieving a balance between work and home. Among mid-career women physicians in the U.S. who had completed an academic fellowship 15 years earlier, those who were satisfied with their life in academia had clear values and goals and a sense of control over their time. Those less satisfied with their careers experienced struggle in balancing their lives and confronted institutional barriers, such as unfriendly work environments, limiting their potential. At exactly the point in their early careers where childbearing was on the agenda, they were forced to choose between high intensity work inconsistent with family life, or lower pressure jobs with defined hours that would effectively remove them from the academic track. Their success, according to Kalet and her colleagues writing in the *Journal of General Internal Medicine* in 2006, consisted of “making life work,” “making work work,” and “defining, navigating, and negotiating success” through creating flexibility and managing change.

The barriers facing women in academic medicine are part of the picture; another aspect may be women’s own discouragement or reluctance about the task. They may also lack the negotiating skills to argue for resources and remuneration comparable to men. Some may find the struggle to succeed while maintaining a family and home life to be too difficult and that the achievement of balance is not feasible in an academic setting. Canadian data show that although women physicians with children do clinical work approximately eight hours less per week than men, they put in an additional 40 hours of home-related work each week. New graduates in many countries strive to balance their professional and personal/family responsibilities differently from their more senior

colleagues. Incoming academic women physicians may set more limits on their work life. Accepting part-time positions, slowing the tenure clock, attending fewer meetings, and accepting a slower trajectory in academic promotion, or even staying stationary on the academic ladder, are all ways that women might choose to achieve balance and flexibility at the cost of academic success.

Interventions to support academic women physicians have important ramifications for men as well. An academic department that implemented and studied strategies to foster the careers of young faculty showed that promotions for both men and women can be accelerated by a system of personal mentoring. Moreover, changing the timing of rounds from Saturday morning to the usual work week led to an increase in the numbers of both men and women participants. Increasingly men physicians in families are recognizing what they are missing out on in their pursuit of academic success, and some are asking for the same flexibility in academic promotion as women have chosen.

Change is also ahead in the definition of excellence. Researchers from the AAMC note the emergence of trends in the U.S. to recognize interdisciplinary team science in the process of promotion and tenure and to broaden the definition of scholarship to include integration, application, and education – a direction that would foster the advancement of many medical women in academia. If these changes succeed in taking hold, academic medicine will become a place where both men and women will seek and gain deserved work fulfillment, when equal opportunities are ensured and the critical importance of balance

between work and family responsibilities is widely recognized.

Lucy Candib MD  
Barbara Lent MD  
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## Register Online for Wonca World 2007 in Singapore

Warm greetings from the sunny island of Singapore!

Singapore is honoured to be the host of the 18th Wonca World Conference! As we gear up in our preparations for the Wonca 2007 World Conference, Singapore promises a host of exciting attractions and activities. Besides getting updates on the latest advances that genomics and biomedical sciences have to offer, our scientific program also promises a whole new paradigm in delivery of lectures and plenary sessions.

The conference theme is “Genomics and Family Medicine”, bringing you an assembly of renowned plenary speakers like Dr Shigeru Omi, Regional Director of Western Pacific Regional Office of the World Health Organisation; Dr Francis Collins, Director of National Human Genome Research Institute; Professor Yvonne Carter, Dean of Warwick Medical School; Dr Spencer Wells, Population Geneticist of National Geographic; Professor David Goldstein, Director of IGSP Centre for Population Genomics & Pharmacogenetics; Professor Edison Liu, Executive Director of Genome Institute of Singapore; Professor Michael Kidd, Head of the Discipline of General Practice in the University of Sydney; and many others. So, please sign up now to enjoy early bird discounts and also to pre book your hotels so that the choicest sites can be reserved for you!



Visit our trade exhibition — a good platform for your business and service matching opportunities. The medical technology exhibition will provide a unique business matching opportunity for all family physicians and medical groups wanting to scale up their practice profiles and offer an improved and vastly increased range of point of care testing services for their patients.

In addition to work and academic schedules, the organizing committee also promises to host a dazzling array of social programs for your partners and family members. Thinking of bringing along your loved ones? There are several fun and exciting attractions to keep your family occupied throughout your stay so that you can attend all of our programs and social activities with complete assurance that they would never get bored.

Singapore is a beautiful and dynamic city where you get to experience a multicultural society living harmoniously under one community. Geographically located in the centre of South East Asia, Singapore offers a blend of East meets West heritage, its unique multicultural society portrays tradition as well as modernity of the world today. You could shop till you drop, feast on some of the greatest culinary delights as well as attend world-class performances at our latest state of the art architectural marvel, the Esplanade. I am certain you will never have a dull moment in Singapore, the city that never sleeps! Make Singapore your 2007 travel destination today.

Stay tuned for more exciting updates on our conference website and make a date with Singapore for the Wonca 2007 World Conference, 24 July 2007 to 27 July 2007! I look forward to welcoming you here.

**Dr Tan See Leng**

Chairman  
 Host Organizing Committee  
 Wonca World Conference 2007  
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 Website: [www.wonca2007.com](http://www.wonca2007.com)

**WONCA REGIONAL NEWS**

**ASIA PACIFIC FAMILY MEDICINE JOURNAL ENTERS ITS SIXTH YEAR**

Asia Pacific Family Medicine (APFM) is published four times a year by the World Organization of Family Doctors. Now in its sixth year, APFM is dedicated to promoting the discipline of family medicine within the region. The Journal aims to provide a forum for the dissemination of high quality regional research and to enhance the standards of family medicine by focusing on best practices. The breadth of the region encompasses much cultural diversity, which provides a rich and complex heritage. By reflecting this in the pages of the journal, regional links should be fostered and strengthened.

The Journal welcome articles from all authors on the diversity of topics and interests that fall under the umbrella of general practice/ family medicine. However, we are particularly seeking papers that address four key topics of relevance for our region: avian influenza pandemic planning; mental health; diabetes; and medical education. We also particularly welcome new or aspiring authors to join the research debate. All original manuscripts are reviewed by at least two appropriate reviewers in the field of the submitted paper. Acceptance of manuscripts is based on scientific content and presentation of material and at the discretion of the editors.

We all faced many challenges during the past year. It has been a year that has seen the network of family physicians form even stronger bonds globally, as we have faced challenges from many quarters:

- Both new infectious disease threats such as avian influenza, and old ones such as the continual decimation of populations in developing countries by HIV;
- Implementing and disseminating concepts of preventive medicine;
- Addressing the issues of health inequalities, whether they be gender, ethnic or socio-economically based; and
- Dealing with the scourge of chronic disease and comorbidities that form the daily bulk of problems presented in GP waiting rooms around the world.

This concept of professional commonalities, irrespective of the locale of our practice, was emphasized most recently at the November 2006 Wonca Asia-Pacific Regional Conference in Bangkok. This meeting also highlighted the importance of research by our profession to better understand our



patients' needs and to encourage better directed health care and policy initiatives for individual countries within our region. In line with this, the "Research Networks within the Asia Pacific Region" seminar was well attended. Participants underscored the need for adequate funding and protected time to promote and support research initiatives. This focus on research closely supports the mission statement of our journal, which has always been dedicated to providing a platform for disseminating regional research and helping raise the standards of family medicine within our region.

While the APFM is in its 6th year of publication we, the editors, continue to search for the most effective and efficient way for the Journal to meet its readers' needs. While internationally recognized "quality" criteria in publishing means that many authors seek publication in the larger international journals, this underestimates the question of readership. Topics of pressing need and interest locally may have little importance or relevance on a worldwide scale. Does this mean the topic is not suitable for general debate or in need of dissemination? Not at all. It means that the audience needs to be carefully selected, and this is what smaller, more targeted journals specialize in. For this reason, we believe that the APFM journal has an essential part to play in the discipline of family medicine in this region. Its place on the library shelf is beside local, national journals, to provide a repository of locally relevant research that supplements each local national journal's impressions and discussions of their national policies and interests.

Please visit Asia Pacific Family Medicine online at [www.apfmj.com](http://www.apfmj.com)

Lyn CLEARIHAN, Co-editor  
Tai Pong LAM, Co-editor  
Zorayda LEOPANDO, Co-editor

## The European Journal of General Practice Finds New Global Publisher

Created in 1995, the European Journal of General Practice is the official journal of WONCA Europe (the European Society of General Practice/Family Medicine) and supports its aims and objectives. The EJGP is an international scientific journal. Its objectives are:

- To foster scientific research in general practice/family medicine (GP/FM) by the publication of original papers and reports;
- To present background papers, and papers stimulating discussion and debate relevant for the development of GP/FM;
- To facilitate the communication between the members of the ESGP/FM, the international network organisations and the national colleges and societies involved in general practice.

EJGP has a distinguished group of Medical Editors: Professor Michael M Kochen (*Germany*); Dr An De Sutter (*Belgium*); Dr Andrew Ross (United Kingdom); Dr Philip Evans (United Kingdom) Prof Jan De Maeseneer - *Belgium (Editor for Commissions)*. In addition, a highly respected Editorial Advisory Board is strongly rooted in all aspects of GP/FM and represents the whole geographical area. The journal is indexed in Index Medicus/PubMed and EMBASE.

Following some recent difficulties experienced in the production of the journal, the European Journal of General Practice is now to be published by Taylor and Francis. We

look forward to our new collaboration with Taylor and Francis, one of the world's largest medical and scientific publishers.

Happily, we continue to receive a good flow of manuscripts from GP researchers throughout the world and we are confident in maintaining our high standards of scientific publication. We also plan to develop other aspects of the journal including more material for education and debate in our discipline and material both from and for our growing number of European network groups. We also have plans to enhance the website and improve electronic access to the journal. It is vitally important to the development of academic general practice that you continue to support our endeavours with your journal subscription and we would urge your colleagues and institutions to do the same. The European Journal of General Practice is available online at: <http://www.tandf.co.uk/journals/journal.asp?issn=1381-4788&linktype=5>

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## Letter to Editor: Family Medicine and Culture in Argentina and Greece

As the former Chairman of the International Committee and the present Chairman of General Affairs for Japanese Academy of Primary Care Physicians, I attended the 1st Wonca Iberoamericana-CIMF Regional Conference held in Buenos Aires from Oct 11-14, 2006. The scientific program, coordinated by

Dr Ezequiel Lopez, and the overall conference, chaired by Professor Sergio Solmesky, was outstanding. In addition, I had the pleasure of attending the 2005 Wonca Europe Regional Conference in Kos Island of Greece in September 2005.

These wonderful meetings expanded my understanding of family medicine and cultural diversity. In ancient Greece, I learned about Hippocrates, the father of the western medicine, and how he taught his physician students and colleagues. In Buenos Aires, I learned how family medicine in Argentina, and throughout Central and South America, was influenced by history, politics, economy and culture.

Every time I attend a Wonca Regional Conference, I have learned not only about family medicine but the political, socioeconomic and cultural aspects of the region and its countries. We family physicians must always pay attention to the relationship among medicine and health, and the history, politics, economy, and culture of each country.

**Dr. Hiroshi Bando**

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## HEALTH AND HEALTH SYSTEM NEWS

### WORLD HEALTH DAY 2007 FOCUSES ON INTERNATIONAL HEALTH SECURITY

Political, business and opinion leaders met in Singapore on 2 April for a global debate that underscored the urgent need to improve international health security. The high-level debate, hosted by the World Health Organization (WHO) and the Government of Singapore, launched the World Health Day 2007 theme of international health security and global message to “Invest in health, build a safer future.” World Health Day highlighted the health threats to communities of emerging and rapidly spreading diseases, environmental change, bioterrorism, natural disasters, chemical spills or radioactive accidents, and HIV/AIDS.

“The uncertainty and destructive potential of disease outbreaks and acute public health emergencies gives them a high public and political profile,” said the WHO Director-General, Dr Margaret Chan. “When the world is collectively at risk, defense becomes a shared responsibility of all nations. WHO continues to track evolving infectious disease situations and acute health threats, sounds the alarm if necessary, shares expertise with local and national health officials, and mounts the kind of response needed to protect people from these dangers to health.”

The wide-ranging debate challenged panelists to confront the public health, business and diplomatic obstacles to improved cross-border cooperation and collaboration. In addition to WHO DG Chan, participants included Lee Hsien Loong, Prime Minister of Singapore; Philip Chen, Chief Executive of Cathay Pacific Airways; Dr Balaji Sadasivan, Senior Minister of State of Foreign Affairs of Singapore; and Jonas Gahr Store, Minister of Foreign Affairs of Norway.

Prime Minister Lee Hsien Loong said “The theme of this year’s World Health Day, international health security, is apt given the global health landscape today. In a highly interconnected world, diseases spread fast and recognize no boundaries. Cooperation among nations is crucial, for we all have a responsibility to one another.

Jonas Gahr Store, Minister of Foreign Affairs of Norway, began an initiative last summer to establish an informal group of foreign ministers to explore the linkages between foreign policy and global health. He said: “Globalization has increased countries’ vulnerability and interdependence. Health issues are among the major challenges that call for stronger strategic focus and closer international cooperation.”

Philip Chen, Chief Executive of Cathay Pacific Airways, steered the airline through the 2003 outbreak of SARS, a highly contagious disease that traveled the globe quickly and inflicted severe economic damage. He said: “The SARS outbreak taught us that organizational competence is essential in meeting the challenges of a crisis. Perhaps more importantly, it is also critical to invest in the time needed to build credibility and win the trust of those people you must rely on for support should a crisis ever happen. This

is as true for multinational organizations and governments as it is for commercial enterprises such as Cathay Pacific.”

A new sense of urgency following the outbreaks of SARS and avian influenza in the early years of this decade has led the world to adopt an innovative new approach to strengthen global defenses against the spread of disease. The revised International Health Regulations (2005) come into force on 15 June 2007. The legal framework requires countries to inform WHO of all public health emergencies of international concern. They represent an unprecedented public health tool that aims to ensure maximum health security and minimum interference with international transport and trade.

“New outbreaks of avian influenza and the looming danger of an influenza pandemic, together with the severe health impacts of recent flooding in Indonesia and the Horn of Africa, underline the fact that now is the time to focus on international health security,” said WHO DG Chan. “Even with serious challenges in today’s world, however, it is my view that these are optimistic times for health,”

A WHO background document, released today, was used to help guide discussions and stir debate. The paper profiled eight issues linked to international health security, together with key points to focus the debate:

New, highly contagious diseases, such as SARS and avian influenza, know no borders. Their potential to cause international harm means that outbreaks cannot be treated as purely national issues. With fewer than 10,000 cases, SARS cost Asian countries US\$60 billion in gross expenditure and business losses in the second quarter of 2003 alone.

In 2006, international crises and humanitarian emergencies affected 134.6 million people and natural disasters killed 21,342 persons. Upwards of 60,000 were killed in recent years in climate-related natural disasters,

Chemical, radioactive and biological terror threats: whether deliberate or accidental, pose serious threats to water, food and sanitation systems. Anthrax-tainted letters sent through the U.S. postal system in 2001 and the release of sarin on the Tokyo subway in 1995 remind us that although chemical and biological attacks are rare, some people are ready to use this brand of terrorism.

Additional information on World Health Day and the issue of global health and security is available at: <http://www.who.int/world-health-day/2007/en/index.html>

## MEMBER AND ORGANIZATIONAL NEWS

### LINDA FRENCH JOINS GLOBAL FAMILY DOCTOR'S MEDICAL EDITOR TEAM

Linda French, a family doctor born in the United States, has joined Global Family Doctor as medical editor. She moved to Chile with her husband when she was 22 years old and lived there for 14 years. During that time she attended medical school at Universidad Austral de Chile, the same university where her husband taught English. She graduated in 1988 first in her class. From 1988-1990 she worked in a primary care clinic in the city of Punta Arenas, Chile, which is about the southern most inhabited place on earth of any size. She was also able to take a one-month intensive course in public health during that period. This experience forged her commitment to the importance of primary care for the common good.



Dr Linda French –  
GFD Medical Editor

Upon return to the United States in 1990 she did her residency in family medicine, following which she joined the faculty of the community hospital program where she trained. In 1993-1994 she was a fellow in the Primary Care Faculty Development Fellowship at Michigan State University, a part-time program concurrent with her faculty position. Her fellowship project was a curriculum for teaching evidence-based medicine and scholarship to family medicine residents.

From 1999-2006 she was Associate Professor of Family Medicine at Michigan State University. She was also Associate Chair for Clinical Services until July of 2005 when she was appointed Senior Associate Chair and Acting Chair while the titular chair was on sabbatical. In November of 2006 she took the position of Professor and Chair of Family Medicine at the University of Toledo College of Medicine.

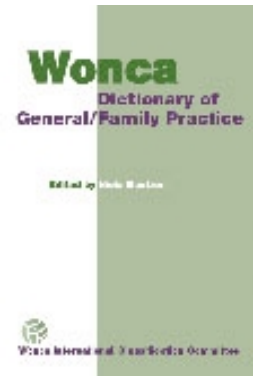
Her scholarship consists principally of evidence-based reviews, including two Cochrane Reviews. She has been a member of several editorial boards. Linda is a proud member of the Wonca Working Party of Women in Family Medicine. She has been married for more than 30 years and has four adult children.

Linda French joins a prestigious group of four editors under the leadership of Wes Fabb, Medical Editor since the inception of Global Family Doctor in 2001. Stephen Wilkinson joined Wes in 2004, and Jim Vause in 2005. Recently, Jim Vause was appointed Medical Editor of GFD to replace Wes Fabb who retires in July 2007.

The Wonca GFD Medical Editors scan the contents pages of over 200 family medicine, general and specialist online journals for articles relevant to family doctors. Over 5,000 article titles are scanned each month. Interesting articles describing clinical, epidemiological and health services research are summarized into items in Journal Watch, and reviews of topics relevant to family doctors are featured in Clinical Reviews. Summaries are posted within days of publication. The purpose of this valuable GFD service is to enable busy clinicians to keep right up-to-date with minimal time and effort.

## RESOURCES FOR THE FAMILY DOCTOR

### THE WONCA DICTIONARY OF GENERAL/FAMILY PRACTICE



The Editor of the Dictionary and Chair of Wonca International Classification Committee (WICC) Niels Bentzen writes in the Preface, "The main purpose of this dictionary is to act as a reference for GPs/FPs throughout the world, so that they can communicate meaningfully about general/family practice now and in the near future. The Dictionary's ambition is to cover general terms regarding the organization and the work in general/family practice, research, classification, and epidemiology."



Professor Niels Bentzen, Chair, WICC

The Past President of Wonca, Dr. Michael Boland writes in the Foreword, "On behalf of Wonca, I welcome this publication as a milestone in the development of international family medicine. I commend it to all our member colleges, academies and scientific

associations throughout the world, and to the growing community of teachers and researchers in family medicine everywhere. It will help us to define our discipline more precisely and to explain more clearly to others the contribution we can make to medical science and to the delivery of health care.”

The Editor of “A Dictionary of Epidemiology” Professor John Last writes, “Reading it (the Wonca Dictionary of General/Family Practice), I was reminded of the preoccupation of thoughtful GPs with improved methods of education and research, at both of which many important cutting-edge innovations have come from family practice. The Wonca Dictionary is replete with terms from these domains and defines, usually concisely and clearly, their meaning in general/family practice”.

Family doctors, the team members they work with and administrators and others who are responsible for primary care, will find this handy, slim reference book a useful source of explanations of terms they encounter and wish to ensure themselves that they know the full and correct meaning.

The Wonca Dictionary of General/Family Practice can be obtained from the Wonca website at [www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com) ‘publications’

A printed version can be paid for electronically (\$25 USD) and will be mailed directly to the purchaser from the printer in Denmark. It can also be downloaded from the website at a price of \$15 USD.

The Wonca Dictionary in General/Family Practice is published in British English. If you want to translate it you must contact the CEO of Wonca, Dr. Alfred Loh, in order to get a license. This can either be a non-commercial or a commercial license.

The translator must work in close cooperation with WICC through Dr. Inge Okkes: [i.m.okkes@amc.uva.nl](mailto:i.m.okkes@amc.uva.nl) If the translator is from one of the countries which has a member in WICC (see other side), this member should also be contacted.

Wonca has the copyright of any version of this book, and an agreement with Wonca is therefore necessary prior to any translation, publication or sale of the Wonca Dictionary in whatever language.

The Wonca International Classification Committee (WICC) is the committee in Wonca responsible for the Wonca Dictionary of General/Family Practice together

with the editor Niels Bentzen (Norway), associate editors Bent Bjerre (Denmark), Chris Peterson (Australia) and Philip Sive (Israel) and 31 contributors from all over the World.

The aim of WICC is to Develop, update and distribute systems which enable international communication about the work with patients in general/family practice. Further information about WICC and the Wonca Dictionary of General/Family Practice can be found at: [www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com) ‘Publications’ and About Wonca, ‘Committees, Groups’, ‘Classification WICC’

## Global Family Doctor: Mailing Lists For Family Doctors

Global Family Doctor – Wonca Online has a very listing of mailing lists for family doctors at <http://www.globalfamilydoctor.com> and then going into “information” and then “mailing lists” from the top tool bar.

Here is a brief summary of the mailing lists with hyperlinks for those interested from the above website to the interested organizations and individuals. The mailing list summary includes the following:

### Cardiovascular\_EUR

European Network for Cardiovascular Prevention in General Practice, mainly consisting of interested General Practice/Family Medicine physicians to discuss issues related to Cardiovascular prevention, both non-pharmacological and pharmacological both on individual and society level. Started after a workshop at the WONCA-meeting in Ljubljana June 2003.

### CISP-L

This list is for French speaking persons interested in the French version of ICPC classification system developed specifically for primary care. You can join by sending the message “subscribe CISP-L” to [requests@listserv.fp.med.umich.edu](mailto:requests@listserv.fp.med.umich.edu).

### The National Divisions of General Practice Mailing List

A list for the National Divisions of General Practice in Australia.

### Docsboard.com

Docsboard.com was created on Feb 26 2004 to help physicians share knowledge. Docsboard.com is run by a

group of physicians, on a voluntary basis. The site is non-commercial and although moderated, allows free discussions and exchange of ideas.

#### **Doctors' Dialogue**

This South African list is aimed at providing practical support to rural doctors. It has developed due to a need to reduce the isolation of rural doctors and to help facilitate their access to specialist knowledge, information and limited resources in order to improve the quality of rural healthcare. You can join by sending the message "subscribe mailadoc" to listproc@healthlink.org.za.

#### **EGPRN**

This is the list of the European General Practice Research Network. The topics to be discussed include EGPRW meetings and projects, and primary care research in general.

#### **Eyr**

This list is open to everyone who understands Norwegian and wishes to discuss topics related to general practice. File archive available.

#### **FAMDEL**

This list is organized by the Society of Teachers of Family Medicine Group on Family Centered Perinatal Care. It is directed at group members, and others teaching and providing pregnancy care in Family Medicine. The list is open to all who are interested. You can join by sending the message "subscribe FAMDEL your name" to mailserv@asri.edu.

#### **FAMILY-L**

This list is primarily for family medicine faculty and fellows who are interested in medical education, administration, or research within family medicine. File archive available.

#### **Fam-Med**

This list focuses on the use of computer and telecommunication technology in the teaching and practice of Family Medicine. It comes in two formats: unmoderated and a moderated digest version. File archive available.

#### **Fellow Family Docs**

A private group of about 50 family physicians across the USA discussing patient care and practice management via email moderated by Paul Hunter, MD.

#### **FPCAN-L**

This list is primarily for physicians and concerning issues of interest in the area of family medicine in Canada. File archive available.

#### **FPRES**

Family practice residents discussion list. You can join this list by sending the message "subscribe fpres your name" to listserv@lsv.uky.edu.

#### **GERI-FP**

A list for family physicians and health care administrators who have an interest and expertise in geriatrics. You can join this list by sending the message "subscribe geri-fp your name" to listserv@shrsys,hslc.org.

#### **GP-UK**

This list facilitates discussion on new ideas, research, workshops, seminars, conferences, grants, education, software development etc. for the UK General Practice community. Non-UK views are also welcome. File archive available.

#### **GP-WONCA**

This list is designed to facilitate member interaction and discussion on topics relevant to Family Doctors around the world. Probably, the most 'global' list around.

#### **ICPC-L**

This is an e-mail discussion list devoted to the International Classification of Primary Care. It is open for discussion of all issues related to the implementation and use of ICPC in practice and research.

#### **Le Forum**

Belgian mailing list for SSMG (Societe Scientifique de Medecine Generale).

#### **MedFam-APS**

Foro sobre Medicina Familiar y Atencion Primaria de Salud. Spanish list dedicated to discussion of all topics concerned with Primary Health Care. Primarily in Spanish and dedicated to the Spanish Primary Care professional community, non-Spanish views, specially latin-american, are welcome. You can join this list by sending the message "subscribe MEDFAM-APS firstname surname" to listserv@listserv.rediris.es. File archive available.

#### **Medfam foro**

Mailing list for the Argentinian Association of Family Medicine.

**MIR - Medicina In Rete**

Italian mailing list for general practice. To join MIR, send a message to Fabio Turone.

**MMATRIX-L**

This mailing list serves individuals interested in the development and promotion of Internet medicine resources. It is an appropriate place for Internet resource providers and authors to introduce their documents to a global medical community. You can join by sending the message "subscribe mmatrix-l your\_name" to [listserv@listserv.acor.org](mailto:listserv@listserv.acor.org).

**MPL-forum**

This is a Danish list for general practitioners.

**NAPCRG-MH-L**

An e-mail discussion list for the NAPCRG Special Interest Group and Task Force on Mental Health. You can join by sending the message "subscribe NAPCRG-MH-L" to: [requests@listserv.fp.med.umich.edu](mailto:requests@listserv.fp.med.umich.edu)

**NAPCRG-L**

North American Primary Care Research Group. This list is open for NAPCRG members and any interested persons. It is hoped that NAPCRG-L will become a resource to further research issues relevant to all primary care specialties.

**PCSG**

A discussion list for the Primary Care Society for Gastroenterology. The list is open to any Primary Health Care workers.

**Primary Care Cymru List**

A discussion list for Primary Care in Wales. All those with an interest in primary care are invited to share news, views and debate. Feel free to discuss clinical issues, education, medical politics etc.

**RURAL-CARE**

This list is a part of InterPsych, a consortium of mental health discussion groups. You can join by sending the message "subscribe rural-care firstname lastname" to [listserv@listp.apa.org](mailto:listserv@listp.apa.org).

**Rural Doctors**

This mailing list is for rural health personnel, especially those who are more or less isolated from universities, medical schools, large clinics and large hospitals. You can join by sending the message "subscribe rural\_doctors your\_name" to [listserv@rhc.coos-bay.or.us](mailto:listserv@rhc.coos-bay.or.us).

**RURAL MED**

This mailing list was started in 1995 as an initiative of the Society of Rural Physicians of Canada. It is an attempt to create a network of physicians in rural practice, as well as others in universities or elsewhere with an interest in rural medicine. Although RURALMED has a Canadian focus, international participants are also welcome.

**RuralNet-L**

This list provides a forum for the discussion of issues relevant to rural health care. Practitioners, administrators, students, faculty, government officials and others are invited. You can join this list by sending the message "subscribe ruralnet-l your name" to [listserv@ruralnet.marshall.edu](mailto:listserv@ruralnet.marshall.edu).

**SFAM Ordbyte**

Open mailing list for the Swedish Association of General Practice.

**VTS-LIST**

This list is for discussing Vocational Training of General Practitioners. You can join by sending the message "subscribe vts-list" to [majordomo@ukpc.org](mailto:majordomo@ukpc.org).

**Woncawomen**

The Woncawomen list is a listserv of people who helped to plan the Women's Track in Durban and who are involved in the recently formed Women and Family Medicine Working Party within WONCA. To subscribe, send an email to Lucy Candib at [lcandib@massmed.org](mailto:lcandib@massmed.org) stating your interest in being on the

If you know of other lists that you feel should have been included on this GFD page, please contact Hogne Sandvik ([hogne.sandvik@isf.uib.no](mailto:hogne.sandvik@isf.uib.no))



**WONCA CONFERENCES 2007 – 2011 AT A GLANCE**

Information correct as of February 2007.  
May be subject to change.

\*\*Wonca Direct Members enjoy lower conference registration fees

See Wonca Website [www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com) for updates & membership information

<b>2007</b>			
24 – 27 July	18th WONCA WORLD CONFERENCE	SINGAPORE	Genomics and Family Medicine
17 – 20 Oct	European Regional Conference	Paris FRANCE	Re-Thinking Primary Care in the European Context: A New Challenge for General Practice
<b>2008</b>			
4 – 7 Sept	Europe Regional Conference	Istanbul TURKEY	Theme to be confirmed
1 – 5 Oct	Asia Pacific Regional Conference	Melbourne AUSTRALIA	A Celebration of Diversity
<b>2009</b>			
5 – 8 June	Asia Pacific Regional Conference	Hong Kong	Building Bridges
16 – 19 Sept	Europe Regional Conference	Basel SWITZERLAND	The Fascination of Complexity - Dealing with Individuals in a Field of Uncertainty
<b>2010</b>			
19 – 23 May	19 <sup>th</sup> WONCA World Conference	Cancun MEXICO	Millennium Development Goals: the Contribution of Family Medicine
Date to confirmed	Europe Regional Conference	Malaga SPAIN	Theme to be confirmed
<b>2011</b>			
February 2011	Asia Pacific Regional Conference	Cebu PHILIPPINES	Paradigms of Family Medicine: Bridging Old Traditions with New Concepts

**GLOBAL MEETINGS FOR THE FAMILY DOCTOR**

**WONCA WORLD AND REGIONAL CONFERENCE CALENDAR**

**18th Wonca World Conference, Singapore 2007**

**Host** : College of Family Physicians, Singapore  
**Theme** : Genomics and Family Medicine  
**Date** : 24-27 July, 2007  
**Venue** : Singapore International Convention and Exhibition Centre  
**Contact** : Dr Tan See Leng, Chairman, Host Organizing Committee College of Family Physicians, Singapore College of Medicine Building 16 College Road #01-02 Singapore 169854  
**Tel** : 65 6223 0606  
**Fax** : 65 6222 0204  
**Email** : renawong@pacificworld.com enquiry@wonca2007.com registration@wonca2007.com  
**Web** : www.wonca2007.com

**Wonca Europe Regional Conference, Paris, 2007**

**Host** : French National College of Teachers in General Practice  
**Theme** : Rethinking Primary Care in the European Context  
**Date** : 17-20 October, 2007  
**Venue** : Palais des Congres Paris, France  
**Contact** : French National College of Teachers in General Practice 6 rue des Deux Communes 94300 Vincennes, France  
**Tel** : 33-153 669 180  
**Email** : cnge@cnge.fr  
**Web** : www.cnge.fr

**8th Wonca Rural Health Conference, Nigeria 2008**

**Host** : National Post-Graduate Medical College of Nigeria  
**Theme** : Frontline Medicine – From Natural Disasters to Daily Care  
**Date** : 20<sup>th</sup> – 23<sup>rd</sup> February 2008  
**Venue** : Calabar, Cross River State, Nigeria  
**Contact** : Dr Ndifreke Udonwa Chair Local Organizing Committee C/O Office of C.M.A.C University of Calabar Teaching Hospital, GPO Box 147, Calabar 54001, Cross River State, Nigeria  
**Tel** : 234 (0) 803 341 6810  
**Fax** : 234 (0) 87 232 053  
**Email** : nudonwa@yahoo.com

**Wonca Europe Regional Conference, Basel, Switzerland 2009**

**Host** : Swiss Society of General Medicine SSMG/SGAM  
**Theme** : The Fascination of Complexity - Dealing with Individuals in a Field of Uncertainty  
**Date** : 16-19 September 2009  
**Venue** : Congress Center Basel, Switzerland  
**Contact** : Dr Bruno Kissling Chair Host Organizing Committee Swiss Society of General Medicine SSMG/SGAM Elfenauweg 6, CH-3006 Bern Switzerland  
**Tel** : 0041 352 48 50  
**Fax** : 0041 352 28 84  
**Email** : bruno.kissling@hin.ch  
**Web** : www.woncaeuropa2009.org

**19th Wonca World Conference, Cancun 2010**

**Host** : Mexican College of Family Medicine  
**Theme** : Millennium Develop Goals: The Contribution of Family Medicine  
**Date** : 19-23 May, 2010  
**Venue** : Cancun Conventions and Exhibition Center, Cancun Mexico  
**Contact** : Mexican College of Family Medicine Anahuac #60 Colonia Roma Sur 06760 Mexico, D.F.  
**Tel** : 52-55 5574  
**Fax** : 52-55 5387  
**Email** : jdo14@hotmail.com

**MEMBER ORGANIZATION AND RELATED MEETINGS**

**4th National Family Medicine Days with the 2nd European Systemic Family Medicine Conference, Antalya Turkey, 2007**

**Host** : Turkish Association of Family Physicians Akdeniz University Faculty of Medicine Department of Family Medicine  
**Date** : April 25-29, 2007  
**Location** : Antalya, Turkey  
**Venue** : Kremlin Palace Hotel  
**Contact** : Dekon Congress and Tourism  
**Tel** : +90 212 347 63 00  
**Email** : dekon@dekon.com.tr  
**Web** : www.fammed2007.org/en/default.asp

**Gender Matters! in General Practice Research, Education and Health Care, Nijmegen The Netherlands, 2007**

Host : Dutch College of General Practitioners (NHG)  
 Dutch European General Practice Research Network (EGPRN)  
 Theme : Gender Matters! (in General Practice Research, Education and Health Care)  
 Date : 10-13 May, 2007  
 Location : Nijmegen, Netherlands  
 Contact : Coordinating Centre EGPRN  
 Hanny Prick  
 Dept. General Practice – University Maastricht  
 Phone : +31433882319  
 Fax : +31433671458  
 Email : hanny.prick@hag.unimaas.nl  
 Website : <http://www.egprn.org/>  
 EGPRN Meeting Nijmegen

**1st International Conference of Medical Students and Junior Doctors on Family Medicine, Lodz Poland, 2007**

Date : 11-12 May, 2007  
 Host : The Student Scientific Organisation of the First Department of Family Medicine, Medical University of Lodz  
 First Department of Family Medicine, Medical University of Lodz  
 Location : Lodz, Poland  
 Venue : Sheraton Tucson Hotel & Suites  
 Chair : Prof. Andrzej LEWINSKI, Rector of the Medical University of Lodz  
 Dr. Konstanty Radziwill, President of the Polish Medical Chamber  
 Web : [www.zmr.lodz.pl/1ConferenceOnFM.php](http://www.zmr.lodz.pl/1ConferenceOnFM.php)

**The Hong Kong College of Family Physicians Annual Scientific Meeting, Hong Kong, 2007**

Date : 26-27 May, 2007  
 Theme : 30 years of HKCFP and Beyond : A New Era in Family Medicine  
 Chair : Dr. Winnie W. Y. Chan  
 Web : <http://www.hkcfp.org.hk/asm2007.htm>  
<http://www.zmr.lodz.pl/1ConferenceOnFM.php>

**15th Nordic Congress of General Practice, Reykjavik Iceland, 2007**

Theme : The human face of medicine in a hi-tech world  
 Date : June 13-16, 2007  
 Host : The Icelandic College of Family Physicians and Department of Family Medicine  
 Location : Reykjavik Iceland  
 Chairs : Jon Steinar Jónsson  
 Alma Eir Svavarsdottir  
 Johann Ag. Sigurdsson  
 Contact : Johann Ag. Sigurdsson, Professor  
 Phone : (+354) 897 79 19  
 : (+47) 95 14 45 64 (in Norway)  
 Fax : (+354) 550 26 01  
 Email : [gp2007@hi.is](mailto:gp2007@hi.is)  
 Web : <http://www.meetingiceland.com/gp2007/>

**4<sup>th</sup> AAFP International Family Medicine Development Workshop Tucson, 2007**

Date : September 13-15, 2007  
 Location: Tucson, Arizona  
 Venue : Sheraton Tucson Hotel & Suites  
 Chair : Edward J. Shahady, MD  
 Contact : Rebecca Janssen  
 Email : [rjanssen@aafp.org](mailto:rjanssen@aafp.org)  
 Web : [www.aafp.org/intl/workshop2007](http://www.aafp.org/intl/workshop2007)

**American Academy of Family Physicians (AAFP) Annual Scientific Assembly, Chicago, 2007**

Date : October 3-7, 2007  
 Venue : Chicago, Illinois  
 Contact : AAFP  
 11400 Tomahawk Creek Parkway  
 Leawood, Kansas  
 66211-2672, USA  
 Tel : 1 913 906 6000  
 Fax : 1 913 906 6075  
 Email : [international@aafp.org](mailto:international@aafp.org)  
 Web : <http://www.aafp.org>

**The Royal Australian College of General Practitioners 50th Annual Scientific Conference, Sydney, Australia 2007**

Date : 4-7 October 2007  
 Venue : Sydney, Australia  
 Web : [www.racgp.org.au](http://www.racgp.org.au)

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# Visit Global Family Doctor – Wonca Online

## <http://www.globalfamilydoctor.com>

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### Check the regular features:

**Journal Watch** – synopses of research from the medical literature relevant to family doctors

**Clinical Reviews** – outstanding review articles for family doctors on a variety of topics

**Journal Alerts** – an emailed service about the latest in Journal Watch and Clinical Reviews

**Journal Alerts en Espanol** – a new batch is posted at the beginning of each month

**Disease Alerts** – the latest disease outbreaks from WHO and CDC

**Travel Alerts** – advice for you to give to your traveling patients

**Online CME** – interactive programs, some with CME credits

**Clinical Nutrition Updates** – a new topic is presented every three weeks

**POEMs** – Patient-Oriented Evidence that Matters – a new POEM is posted twice a week

**POEMs em Portugues** – a new one is posted twice a week

**eMedicine** – a weekly clinical case for you to solve, with a visual cue: photo, ECG, radiograph

**EBMsources** – an appraisal of two evidence based medicine websites is posted every month

**Cutting Edge** – an interesting series about the latest medical hypotheses, posted weekly

**Educational Resource Centre** – a repository of educational materials for family doctors

**Research** – the latest on Wonca's research activities, and opportunities for research

**Conference updates** – details of Wonca and other conferences

**Publications** – details of Wonca publications and Wonca News

**Wonca Websites** – addresses of Member Organization and other Wonca websites

**Global Resource Directory** – where you can record you international projects, and view others

**Medical Mirth** – humor with a medical angle to lighten your day

**Quotable Quotes** – quotes you can use, many with a medical slant

**Latest News** – of coming meetings, conferences and events

**Patient education** – resources you can use to inform your patients

**About Wonca** – details of the Wonca organization, office bearers and Direct Members

**Wonca Groups** – details of Wonca's committees and working groups

**Information** – Notice Board, Letters to the Editor, Doctor of the Month, list servers, mailing lists

**Search facilities** – you can search the 5,000 items in Journal Watch and Clinical Reviews, as well as web pages and documents on the Global Family Doctor website

**Homepage promotions** – conferences, symposia, website features, special offers

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# 18<sup>th</sup> Wonca World Conference

24 – 27 July 2007

Suntec Singapore

## Genomics & Family Medicine

Genomics & Family Medicine

### KEYNOTE & PLENARY LECTURES



~~ KEYNOTE LECTURE ON FAMILY HEALTH ~~  
**Future Health Agenda**

*Dr. Shigeru Omi*  
Regional Director, Western Pacific  
Regional Office of the World Health Organisation



~~ PLENARY LECTURE ~~  
**Impact of Human Genomics on the Practice of Medicine**

*Professor Edison Liu*  
Executive Director, Genome Institute of Singapore



~~ PLENARY LECTURE ~~  
**Confronting the Epidemic of Type 2 Diabetes: Can Novel Therapies addressing Islet Dysfunction help Patients get to Goal?**

*Professor Michael Nauck*  
Head, Diabeteszentrum Bad Lauterberg



~~ PLENARY LECTURE ~~  
**The Journey of the Genome – How Could it Impact Modern Medicine?**

*Dr. Spencer Wells*  
Population Geneticist, National Geographic



~~ KEYNOTE LECTURE ON GENOMICS ~~  
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