VENUE

Kosmos
Karl-Marx-Allee 131a
10243 Berlin
Germany

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www.twitter.com/WorldHealthSmt
Hashtag: #WHS2018
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<tr>
<th>Time</th>
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<tr>
<td>11:00 – 12:30</td>
<td>Migration and Refugee Health&lt;br&gt;M8 Alliance&lt;br&gt;University of Montreal</td>
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<td>Food Systems, Nutrition and Health&lt;br&gt;InterAcademy Partnership (IAP)&lt;br&gt;German National Academy of Sciences&lt;br&gt;Leopoldina e.V.&lt;br&gt;M8 Alliance</td>
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<td>Optimizing Health in Aging Societies&lt;br&gt;Kyoto University&lt;br&gt;M8 Alliance&lt;br&gt;Max Planck Society&lt;br&gt;National Taiwan University (NTU)&lt;br&gt;University of Rostock</td>
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|              | Bridging the Valley of Death<br>European and Developing Countries Clinical Trials Partnership (EDCTP)<br>Foundation for Innovative New Diagnostics (FINDE)
| Lunch Break  | (90 min)                                                                                         |
| 14:00 – 15:30| Managing the Next Decade in Cancer<br>International Prevention Research Institute (iPRI)<br>Pfizer |
|              | Addressing the Gender Dimensions for Health Systems Strengthening<br>Research in Gender Ethics<br>RinGs<br>Women in Global Health<br>M8 Alliance |
|              | Social Stress, Inequality and Mental Health in Cities<br>Charité – Universitätsmedizin Berlin<br>Fliedner Klinik Berlin<br>M8 Alliance |
|              | International Life Sciences Location and Infrastructure Management<br>Ministry of Economic Affairs Canton of Bern<br>M8 Alliance |
|              | Digital Medicine in Real Life<br>Charité – Universitätsmedizin Berlin<br>M8 Alliance<br>Sanofi |
| Coffee Break | (30 min)                                                                                         |
| 16:00 – 17:30| An Integrated Response to Obesity, Diabetes, and NCDs<br>Sanofi<br>The NCD Alliance<br>World Health Organization (WHO) |
|              | Respect and Dialogue<br>InterAcademy Partnership (IAP)<br>International Partnership on Religion and Sustainable Development (PaRD) |
|              | Ensuring Patient Safety in Hospital Management<br>Charité – Universitätsmedizin Berlin<br>Imperial College London<br>M8 Alliance<br>National University of Singapore (NUS) |
|              | Falsified and Sub-Standard Medicine<br>Association of Research-based Pharmaceutical Companies (vfa) |
|              | Preventing Dementia by Preventing Stroke<br>Charité – Universitätsmedizin Berlin<br>M8 Alliance<br>World Dementia Council (WDC)<br>World Stroke Organization (WSO) |
| KEY 01       | Opening Ceremony<br>M8 Alliance                                                                  |
| 18:00 – 19:30| Welcome Reception                                                                                    |
| 19:30 – 22:30| Welcome Reception                                                                                    |
### Monday, October 15, 2018

<table>
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<tr>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>9:00 – 10:30</td>
<td>SAAL 1 (Rudolf Virchow)</td>
<td>Global Health Security Munich Security Conference (MSC)</td>
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<td>SAAL 6 (Europe)</td>
<td>Growth &amp; Resilience Bill &amp; Melinda Gates Foundation Grand Challenges</td>
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<td>SAAL 10 (Asia)</td>
<td>One Health Leibniz Association German Federal Ministry of Education and Research (BMBF)</td>
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<td>SAAL 2 (America)</td>
<td>Neglected Tropical Diseases and their Co-Morbidities</td>
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<td>SAAL 4 (Africa)</td>
<td>Association of Research-based Pharmaceutical Companies (vfa)</td>
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<td>SAAL 5 (Oceania)</td>
<td>Eberhard-Karls-University Tübingen</td>
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<td>German Network against Neglected Tropical Diseases (DNTDs)</td>
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<td>German Society for Tropical Medicine and International Health (DTG)</td>
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<td>Universitätsklinikum Tübingen</td>
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<td>Coffee Break (30 min)</td>
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<td>11:00 – 12:30</td>
<td>SAAL 6 (Europe)</td>
<td>Vaccine Production and Delivery Systems</td>
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<td>Heidelberg Institute of Global Health PATH</td>
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<td>Value Based Health Care National University of Singapore (NUS)</td>
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<td>14:00 – 16:00</td>
<td>SAAL 1 (Rudolf Virchow)</td>
<td>Antimicrobial Resistance German Federal Ministry of Education and Research (BMBF)</td>
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<td>Big Data Analytics in Biomedical Research and Healthcare</td>
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<td>Coffee Break (30 min)</td>
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<td>16:30 – 18:00</td>
<td>SAAL 1 (Rudolf Virchow)</td>
<td>Pandemic Preparedness in the 21st Century</td>
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<td>Federal Ministry for Economic Cooperation and Development (BMZ) KfW Group</td>
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<td>Coordination of Global Health Support German Federal Ministry of Health (BMG)</td>
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<td>Hospital Partnerships for improved Service Delivery</td>
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<td>The Else Kröner-Fresenius Stiftung</td>
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<td>Antibiotic Research &amp; Development</td>
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<td>Helmholtz Centre for Infection Research (HZI)</td>
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<tr>
<td>18:30 – 23:00</td>
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<td>World Health Summit Night</td>
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## Tuesday, October 16, 2018

### 9:00 – 10:30

**Health Systems Strengthening**
- Johns Hopkins Bloomberg School of Public Health
- **BM** Alliance

**Digital Health in Developing Countries**
- Federal Ministry for Economic Cooperation and Development (BMZ)
- German Society for International Cooperation (GIZ)

**Cities as Drivers of Global Health**
- InterAcademy Partnership (IAP)
- International Society for Urban Health (ISUH)
- World Federation of Academic Institutions for Global Health (WFAIGH)

**Population based Cohort Studies and Health Prediction**
- Charité – Universitätsmedizin Berlin
- **BM** Alliance
- Max-Delbrück-Centrum für Molekulare Medizin (MDC)

### Coffee Break (30 min)

### 11:00 – 12:30

**Innovation for Impact**
- Bill & Melinda Gates Foundation
- Grand Challenges

**Access to Essential Medicines**
- International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)

**Challenges and Breakthroughs on the Road to Universal Health Coverage**
- Federal Ministry for Economic Cooperation and Development (BMZ)

**Protecting Public Health following Environmental Disasters**
- London School of Hygiene & Tropical Medicine (LSHTM)
- **BM** Alliance
- Monash University

### Lunch Break (60 min)

### 13:30 – 15:00

**Healthy Lives and Well-being for All**
- World Health Organization (WHO)
- World Health Summit

**The Digital Healthcare Revolution**
- Commonwealth Centre for Digital Health
- Global Digital Health 2030 Innovation Task Force

### Coffee Break (30 min)

### 15:30 – 17:00

**The SDG3 Global Action Plan for Health and Well-Being**
- World Health Organization (WHO)
- World Health Summit

### Break / Transfer

### 18:00 – 20:00

**Joint Keynote Grand Challenges/World Health Summit @ Estrel Hotel Berlin**
# Table of Contents

**Welcome Messages**  8  
- High Patrons  8  
- World Health Summit Presidents  12  
- Charité  15  

**Key Facts**  16  
**Mission**  17  
**Topics 2018**  18  
**World Health Summit**  20  
- Presidents  20  
- Scientific Committee  21  
- Ambassadors and Council  22  

**M8 Alliance**  24  
- Mission  24  
- Member Institutions  25  
- Goals  26  
- Leadership  27  

**World Health Summit**  32  
- Startup Track  32  
- Summit Night  34  
- New Voices in Global Health  36  

**Program**  39  
- Sunday, October 14, 2018  39  
- Monday, October 15, 2018  73  
- Tuesday, October 16, 2018  111  

**General Information**  141  
- Directions  142  
- A–Z  144  
- City of Berlin  148  
- Speaker Index  150  
- Supporting Institutions  152  
- Partners  154  
- Media Information  159  
- Contacts  160  
- Imprint  162
Health is our most precious asset. Health is a human right. Health is not only the responsibility of the individual. The international community has set itself the goal of ensuring that every woman, man and child in the world has the chance of a healthy life. The World Health Summit shows that this goal does not have to remain a mere wish. This extraordinary dialogue forum is a particularly rich source of new solutions and ideas of benefit to humankind, so I was happy to take on the patronage of the event once again, along with President Emmanuel Macron and the President of the European Commission, Jean-Claude Juncker.

No matter where people live, health risks and the medical care available determine whether they can live in dignity. In turn, health risks and medical care are influenced by a large number of different factors. Growth and prosperity, crises and conflicts, education and information, the climate and environment, and demographic and social developments all have an impact on the health of the individual. The catalogue of goals in the 2030 Agenda for Sustainable Development highlights correlations and links – and thus also reveals the need for health to play a role in numerous policy fields and shows why we need a global health policy.

It cannot be underlined often enough that in a world of increasing interdependence among the ways globalization determines the fate of individual countries, joint efforts by the international community and collaboration between the political sphere, academia, the business sector and society are also needed as regards health and quality of life.

Naturally, the priority is that each country ensures it has a functioning and efficient healthcare system. But like other industrialised nations with a strong research sector, Germany has a particular responsibility. Whether we are talking about preventing pandemics, counteracting antimicrobial resistance or tackling neglected diseases, our future global well-being will largely depend on scientific findings. That is why we want to enhance our global health policy endeavours in the field of research and development in particular.

Giving every woman, man and child in the world the chance of a healthy life deserves our full attention, the best ideas and active cooperation. The World Health Summit has proved to be extremely important and helpful in this regard. I am delighted that so many experts will meet here to share their knowledge and experiences and draw up recommendations. All of you are helping to make the world more humane. Thank you for that and welcome to the World Health Summit 2018!

Angela Merkel
Chancellor of the Federal Republic of Germany
Health is a common good, which has particular value, for each of us, and for the global community. As such, it can bring double returns: investing in health carries benefits both for economic development, and for the progress of humanity. Health is precious and valuable for each individual, and can only be guaranteed through action and commitment on a global scale: that is what we, the international community, set ourselves to achieve through the sustainable development goals.

There have already been great collective successes, which we can build upon. Almost twenty years ago, the international community committed to fighting the three most devastating infectious diseases by launching the Global Fund against AIDS, Tuberculosis and Malaria. France has played a pioneering role in this fight through scientific research, and by promoting the rights of people affected by AIDS, TB and malaria. France is the historical second-largest donor to the Global Fund, contributing €4.2 billion since 2002. On October 10th, 2019, France will host the next Global Fund replenishment conference, in order to leverage funds for the 2020–2022 period. This commitment is grounded in our belief in the efficiency of a multilateral and sustainable response to global health issues. I know we share this vision with Germany, host of the World Health Summit, and with many of our partners.

To effectively “Ensure healthy lives and promote well-being for all at all ages” by 2030, we must keep addressing several global health challenges in an increasingly coordinated and integrated way: health systems strengthening to achieve universal health coverage with access to essential quality medicines and vaccines, response to health emergencies, antimicrobial resistance (AMR), digital healthcare revolution, etc.

The “Health in all policies” approach is key to achieve this. In our interconnected world and societies, we will not sustainably improve health without fighting climate change, nor without guarantying access to education and empowering women and girls. This is why protecting our planet and reducing inequalities will be at the heart of France’s G7 presidency.

We will build upon our active involvement through the implementation of health projects in developing countries through the Agence Française de Développement and long-term support to support other key multilateral partnerships – GAVI and UNITAID – as well as the World Health Organization, the lead international organization for global health.

We will keep promoting innovation, critical to achieving our ambitious sustainable development goal for health. We need to move at a quicker pace, we need to achieve more, to be more efficient. We must develop new methods of diagnosis, new drugs and alternative treatments, new approaches in prevention approaches. Innovation
is also key for ensuring sustainable access to existing therapies for all those in need. This is particularly crucial to improve the response to health emergencies. France is joining the World Health Organisation’s efforts by hosting this year’s WHO high-level conference on cross-sectoral coordination in response to public health emergencies in Lyon on 3-4 December. It is also crucial to tackle AMR, the global phenomenon currently compromising our collective ability to treat infectious diseases – we believe the integrated One Health approach can be particularly effective in this respect. Collective action is necessary, and France supports the creation by Germany as well as other partners of the “Global AMR R&D HUB”.

Over the years, the World Health Summit has become a major forum for addressing global health issues in a cross-cutting manner by bringing together all relevant stakeholders on an international level, especially this year for its tenth anniversary and thanks to the partnership with the Grand Challenge Annual Meeting.

I am proud to give my patronage to this Summit, and would like to join the Chancellor of the Federal Republic of Germany and the President of the European Commission in wishing you all an excellent and productive meeting.

Emmanuel Macron
President of the Republic of France
It is my great pleasure to offer my patronage once more to the World Health Summit, and to congratulate you on reaching the important milestone of your ten year anniversary. The World Health Summit is in good health!

The European Union is also in better health this year, with economic growth in every Member State, almost 12 million jobs created since this European Commission's mandate began in 2014, and public deficits down from an average of 6.6% in 2009 to 0.8% in 2018. This healthy economic picture matters for our citizens’ health, because it allows us to plan for the investments we need to make in our healthcare and social systems, and in research and innovation.

This year the Commission presented its long-term budget proposals for the years 2021–2027. Health will be a strong focus. We have proposed a spending increase of 50% for research and innovation, reflecting the strong added value of European cooperation in this field. For example, major advances have been made on cancer treatment thanks to EU research, and 1.6 million Ebola vaccine doses have already been produced and stockpiled for emergency use thanks to EU funding.

Health is also a dedicated focus of the renewed European Social Fund, which will be worth €101.2 billion over seven years, with the health strand receiving €413 million. We will focus on the priority areas where EU cooperation has a proven benefit: strengthening cross-border crisis-preparedness, assisting Member States’ health authorities, digitising health and care, supporting EU health legislation and enhancing cross-border cooperation, for instance on rare and complex diseases.

In recent months, we have seen a renewed debate and increasing disinformation spread about vaccination. It can be no coincidence that we also see diseases such as measles on the rise in Europe. It is unacceptable that there are still children dying of diseases that should have been eradicated long ago. This is why we are working with all Member States to support national vaccination efforts, and it is why I asked my Health Commissioner Vytenis Andriukaitis to propose a new set of recommendations in April 2018 to strengthen our efforts to fight diseases which can be prevented by vaccination.

I hope the World Health Summit will stimulate an interesting discussion on these topics, and more, and I wish you all the best for another inspiring gathering and another successful year ahead.

Jean-Claude Juncker
President of the European Commission
Welcome Message

World Health Summit Presidents

Science has to take responsibility! Our common future is already determined by research and by new technologies emerging from new knowledge, and this process continues to gain speed. We have to make sure that today’s amazing developments are used to benefit all of humankind. This is what people expect from the progress. Health and wellbeing is what people are most concerned about. Health may be a human right but when it comes to health, the world is in a worrisome state. The chief causes of death are shifting from infectious to non-communicable diseases, while climate change, political instability in many regions, economic crisis, migration and flight are all contributing factors in major health issues.

Meanwhile, the world’s population continues to grow and to age. The global burden of disease remains, and is even on the rise in some areas. We are not living up to expectations.

Ever since the first World Health Summit on the occasion of the 300th anniversary of the Charité - Universitätsmedizin Berlin, we have been working towards one goal: improving health for everyone on the planet. We have to respond to the most important global health challenges, and must find fast and efficient ways to bring medical advances to the places where people are in need. But each of us can do very little alone. That’s why from the beginning, the World Health Summit has brought
together stakeholders and decision-makers from every sector, from all over the world. By combining forces from academia, the private sector, industry, civil society and politics, we have been able to achieve change and improve health worldwide. And there are now some very promising leads on how we can do even more. Around the globe, the M8 Alliance of Academic Health Centers, Universities and Academies of Medicine and Sciences provide a unique think tank for the World Health Summit program in academic freedom. A milestone – and an encouraging sign – is the prominent position that health topics have assumed on the agendas of the G7 and G20 meetings. From the very beginning, the World Health Summit has enjoyed support from the highest level of politics, with ongoing high patronage from the Chancellor of Germany, the President of the French Republic and the President of the European Commission.

The Sustainable Development Goals (SDGs) and Agenda 2030 provide the framework for a holistic health approach in every area of policymaking. We are glad to see the WHO and other key organizations playing an increasingly supportive and coordinated role in achieving these goals in tandem with the United Nations and the World Health Organization. We need efforts that are transdisciplinary, science-based, cross-sectoral and concerted. They are vital to set the global health agenda for global health for the years to come. Participants from all over the world bring different views, experiences and priorities. They aren’t only welcome – they’re the very essence of the World Health Summit vision, mission and philosophy. We hope you’ll be able to join us on October 14th to 16th at the World Health Summit in Berlin, as we lay the cornerstones for global health in the coming era!

João Gabriel Silva
Acting International President
Rector, University of Coimbra, Portugal

Fernando Regateiro
Acting International President
Chairman of the Board of Directors, Coimbra University Hospitals, Portugal

Detlev Ganten
World Health Summit
Founding President
Charité - Universitätsmedizin Berlin Germany
WELCOME MESSAGE

CHARITÉ
DEAR WORLD HEALTH SUMMIT PARTICIPANTS,

As one of the largest and most influential university hospitals in Europe, the Charité - Universitätsmedizin Berlin must strive to secure the very best healthcare for its patients and all those in need of medical treatment. As such, the development of ground-breaking preventive strategies, including innovative diagnostic approaches and therapeutic options, must form an integral component of our ultimate vision. In addition, we must seek to provide the very best education for tomorrow’s healthcare workforce and thus stay apace of new trends and possibilities regarding life-long medical education.

In this context, Berlin is emerging as a new global health hub and the Charité can and must take on a pivotal role in these developments. The Charité’s recent decision to establish Charité Global Health therefore reflects Germany and Berlin’s growing commitment towards tackling global health challenges. Charité Global Health will serve as an interdisciplinary center which coordinates and further develops the Charité’s global health portfolio whilst simultaneously fostering increased collaborations with national and international stakeholders. This in turn will augment existing policies and thus influence the larger global health agenda. To achieve these major goals, the Charité already collaborates closely with its academic partners in Berlin, within the M8 Alliance and in a national and international context.

For the tenth consecutive year, the World Health Summit unites experts from across the globe, jointly committed to improving the health of the world’s population. We are extremely excited to welcome such an array of excellent minds to Berlin and hope that this year’s Summit prove inspiring and fruitful.

Karl Max Einhäupl
Chief Executive Officer
Charité - Universitätsmedizin Berlin

Axel Radlach Pries
Dean
Charité - Universitätsmedizin Berlin
The World Health Summit is one of the world’s most prominent strategic forums for global health. The interdisciplinary event takes place within an atmosphere of academic freedom and is the premier international platform for exploring strategic developments and decisions in the area of healthcare.

**Facts at a glance**
- Annual event in Berlin
- Patronage: German Chancellor Angela Merkel, President of the Republic of France Emmanuel Macron and European Commission President Jean-Claude Juncker
- Mission: Improve health all over the world through collaboration and open dialogue
- Participants: 2,000 from 100 countries
- Founded: 2009 on the 300\(^{\text{th}}\) anniversary of the founding of the Charité Hospital
- Organized by the WHS Foundation GmbH, a subsidiary of Charité - Universitätsmedizin Berlin

**Participants**
- Top-level researchers and members of the scientific community
- High-profile political decision-makers
- Executives and representatives from the healthcare system
- Leaders of the health-related industry and technology sector
- Representatives of civil society and foundations
- Students and young professionals from all health-related fields

**Website**
- [www.worldhealthsummit.org](http://www.worldhealthsummit.org)

**Social Media**
- [www.facebook.com/worldhealthsummit](http://www.facebook.com/worldhealthsummit)
- [www.twitter.com/WorldHealthSmt](http://www.twitter.com/WorldHealthSmt)
- [www.linkedin.com/company/worldhealthsummit/](http://www.linkedin.com/company/worldhealthsummit/)

Hashtag: #WHS2018
VISION AND GOALS

The World Health Summit is the annual conference of the M8 Alliance of Academic Health Centers, Universities and National Academies. Through the InterAcademy Partnership (IAP), it is organized in collaboration with national academies of science in 97 countries.

The World Health Summit aims to improve health all over the planet, catalyzing that process through collaboration and open dialogue, and steering tomorrow’s agenda to improve research, education, healthcare, and policy outcomes.

It brings together researchers, physicians, key government officials, and representatives from industry as well as from NGOs and healthcare systems all over the world to address the most pressing issues facing every facet of healthcare and medicine in the upcoming decade and beyond.

The World Health Summit is built on the stable foundation of academic excellence provided by the M8 Alliance and has strong political support from a variety of partners at global, national and state levels.

MAIN GOALS AND PARTNERSHIP ASSETS

The M8 Alliance is improving global health through pursuit of five strategic goals:

- Bring together all stakeholders at the level of equals
- Establish a unique and sustainable high-level forum and network
- Help define the future of medicine, research and healthcare
- Find answers to major health challenges – both today and tomorrow
- Make global recommendations and set health agendas worldwide
Pandemic Preparedness
The ability to prevent, detect, respond to and control outbreaks is a significant investment that many countries are still struggling to make. New financing mechanisms – such as the Pandemic Emergency Financing Facility and WHO’s Contingency Fund – are therefore critical to ensuring global health security and saving lives. In this process, domestic financing for preparedness and reliable public health mechanisms pose a key challenge.

The Sustainable Development Goals: Health in All Policies
The SDGs are an indivisible and interdependent set of goals for sustainable development that are inherently linked with the Health in All Policies approach. This approach provides a tool for finding common ground between economic and social development, environmental sustainability and human health. One of the most important challenges for global health in the coming decade will be to develop synergies between a wide range of SDGs and health.

Access to Essential Medicines
Some countries have made substantial progress towards improving access to essential medicines and treatments for fighting HIV/AIDS, malaria and tuberculosis. Even so, access to essential medicines in many parts of the developing world remains inadequate, and new challenges – like access to NCD medicines – have arisen. Recent progress shows that access to essential medicines can be improved through stronger partnerships between governments, pharmaceutical companies, civil society and individual consumers.

Health Systems Strengthening
Although we now have a sophisticated arsenal of interventions and technologies for curing disease and prolonging life, gaps in health outcomes continue to widen. The power of existing interventions is not matched by the capacity of health systems to deliver them to those in greatest need, in a comprehensive way and on an adequate scale. Smart investments have to be the centerpiece of domestic policies and financing.

Antimicrobial Resistance
Antimicrobial resistance is rising to dangerously high levels all over the world and now threatens our ability to treat common infectious diseases. The global crisis reflects the overuse of common antibiotics, as well as a lack of new compound development on the part of pharmaceutical companies to address the challenge. Fresh efforts have been made recently to coordinate efforts, implement new policies and renew research efforts. But major gaps remain.

The Digital Healthcare Revolution
The global population is growing and ageing, and that is having a profound impact on healthcare all over the planet. Meanwhile, new developments in technology are blurring the boundaries between the physical, biological and digital worlds. The goal is now the personalization of medicine – allowing tailored treatments for individual patients based on their unique genetic makeup. This revolution has the potential to provide huge health benefits and empower patients, but it also poses new ethical challenges and could make inequities in healthcare even starker than they are today.
PRESIDENTS 2018

JOÃO GABRIEL SILVA
Rector
University of Coimbra
Portugal

FERNANDO REGATEIRO
Chairman of the Board of Directors
Coimbra University Hospitals, Portugal

PRESIDENTS 2018

DETLEV GANTEN
Honorary Chairman of the Board
Charité Foundation, Germany

FERNANDO REGATEIRO
Chairman of the Board of Directors
Coimbra University Hospitals, Portugal

FORMER PRESIDENTS

2017
HÉLÈNE BOISJOLY
Dean
Faculty of Medicine,
University of Montreal,
Canada

2016
ANTOINE FLAHAULT
Director
Institute of Global Health,
University of Geneva,
Switzerland

2014
JOSÉ OTÁVIO AULER JR.
Dean
Faculty of Medicine,
University of São Paulo,
Brazil

2013
JOHN EU-LI WONG
Chief Executive Officer
National University Health System,
Singapore

2012
MICHAEL J. KLAG
Former Dean
Johns Hopkins Bloomberg School of Public Health, USA

2011
STEVE WESSELINGH
Dean
Monash University,
Melbourne, Australia

2010
STEVEN K. SMITH
Pro Rector, Health
Imperial College London,
United Kingdom

2009
AXEL KAHN
Dean
Sorbonne Paris Cité, France

2015
SHUNICHI FUKUHARA
Dean Emeritus
School of Public Health, Kyoto University, Japan

2010
STEVEN K. SMITH
Pro Rector, Health
Imperial College London,
United Kingdom

2009
AXEL KAHN
Dean
Sorbonne Paris Cité, France

2016
ANTOINE FLAHAULT
Director
Institute of Global Health,
University of Geneva,
Switzerland

2017
HÉLÈNE BOISJOLY
Dean
Faculty of Medicine,
University of Montreal,
Canada

2014
JOSÉ OTÁVIO AULER JR.
Dean
Faculty of Medicine,
University of São Paulo,
Brazil

2013
JOHN EU-LI WONG
Chief Executive Officer
National University Health System,
Singapore

2012
MICHAEL J. KLAG
Former Dean
Johns Hopkins Bloomberg School of Public Health, USA
The World Health Summit Scientific Committee consists of the M8 Alliance Executive Committee (see page 27) and these members of the World Health Summit Council:
WORLD HEALTH SUMMIT
AMBASSADORS AND COUNCIL

WORLD HEALTH SUMMIT AMBASSADORS

**EDELGARD BULMAHN**
Former Federal Minister of Education and Research
Germany

**MANFRED DIETEL**
Director, Comprehensive Cancer Center
Charité – Universitätsmedizin Berlin, Germany

**ECKART VON HIRSCHHAUSEN**
Medical Doctor and Cabaret
Germany

**MICHAEL RABBOW**
Senior Advisor
E&P Focus Africa Consulting,
Germany

**HEINZ RIEDERER**
Managing Director
iNG innovation. Nachhaltigkeit. Gesundheit,
Germany

**REINHARD SCHÄFERS**
Former Ambassador
Federal Republic of Germany

**ILONA KICKBUSCH**
The Graduate Institute of International and Development Studies, Switzerland

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Department of Global Health

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Heidelberg University

STEVE LANDRY  
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Foundation

ERICH REINHARDT  
Medical Valley

HANS-PETER BAUR  
German Federal Ministry for 
Economic Cooperation 
and Development

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Institut national de la santé 
et de la recherche médicale

MAIKE RÖTTGER  
Association Development 
and Humanitarian Aid

INGO BEHNEL  
German Federal Ministry of 
Health

MARION LIESER  
Oxfam Germany

MATHIAS SCHELLER  
Albertinen-Diakoniewerk

CHRISTOPH BEIER  
Deutsche Gesellschaft 
für Internationale 
Zusammenarbeit

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King Abdullah International 
Medical Research Center

HANS J. SCHELLNHubER  
Potsdam Institute for 
Climate Impact Research

CHRISTOPH BENN  
The Global Fund to Fight AIDS, 
Tuberculosis and Malaria

LUIZ LOURES  
UNAIDS

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German Federal Ministry of Education and Research

TOBIAS BERGNER  
German Federal Foreign Office

PHILIPPE MEYER  
Descartes University

GÜNTER STOCK  
ALLEA All European Academies

ARNAUD BERNAERT  
World Economic Forum

JÜRGEN MLYNEK  
Falling Walls Foundation

HEIKO WARNKEN  
German Federal Ministry for Economic Cooperation 
and Development

CATHERINA BÖHME  
Foundation for Innovative New 
Diagnostics

MATSHIDISO REBECCA MOETI  
World Health Organization

HEIKO WARNKEN  
German Federal Ministry for Economic Cooperation 
and Development

STEFAN KAUFMANN  
Max Planck Institute 
for Infection Biology

ANDREAS PENK  
Pfizer Germany

LOTHAR WIETER  
Robert Koch Institute
The M8 Alliance’s vision is to harness academic excellence to improve global health.

The M8 Alliance of Academic Health Centres, Universities and National Academies is a collaboration between academic institutions committed to improving global health. Working together with political and economic decision-makers, its primary goal is to develop science-based solutions to health challenges all over the world.

This international network is the outstanding academic foundation upon which the World Health Summit – the pre-eminent annual forum for healthcare dialogue – is built. It functions as a permanent platform for framing the future considerations of global medical developments and health challenges in an equitable fashion.

The M8 Alliance promotes both “bench-to-bedside” translation of research and the transformation of current medical care approaches to treating the ill. It is seeking to accomplish this through the creation of a healthcare system focused on the effective prevention of diseases, as well as the adaptation of health-related solutions to rapidly changing living conditions through research in priority areas like shifting demographics, urbanization and climate.
Tehran University of Medical Sciences (TUMS) is accredited with premier status by the Accreditation Service for International Colleges (ASIC). ASIC is recognized by the United Kingdom Department for Education and Skills (DfES), the United Kingdom Department for Universities, Innovation and Skills (DUIS), the United Kingdom Border and Immigration Agency (Home Office), the United Kingdom Office for Standards in Education (Ofsted). ASIC is a member of Council for Higher Education Accreditation (CHEA).
The M8 Alliance is improving global health through pursuit of five strategic goals:

- Developing a worldwide network of academic health science centers, and bringing together universities and healthcare providers;

- Facilitating dialogue through the World Health Summit across a global network of stakeholders who are engaged with academic health science centers. These stakeholders include (among others) individuals and institutions active in government, industry and commerce, inter-governmental agencies, healthcare providers, academies of medicine and science, professional associations and the media;

- Setting an agenda for global health improvement by addressing issues of interest to academic health science centers, and conveying findings and recommendations based on scientific evidence through the generation of key statements;

- Positioning the M8 Alliance as an authoritative, credible and respected influence when it comes to decision-making in global health;

- Creating a knowledge base amongst M8 Alliance members, which directly involves the promotion of mutual learning, research collaboration, the enrichment of educational capabilities and enhanced clinical outcomes.
EXECUTIVE COMMITTEE

JOÃO GABRIEL SILVA  
Acting International President  
Rector, University of Coimbra, Portugal

FERNANDO REGATEIRO  
Acting International President  
Chairman of the Board of Directors, Coimbra University Hospitals, Portugal

DETLEV GANTEN  
Founding President  
Charité Foundation, Germany

ALI JAFARIAN  
Incoming International President  
Chancellor, Tehran University of Medical Sciences, Iran

HÉLÈNE BOISJOLY  
Past International President  
Dean, Faculty of Medicine, University of Montreal, Canada

AXEL RADLACH PRIES  
Dean of Host Institution  
Charité – Universitätsmedizin Berlin, Germany

MICHAEL J. KLAG  
Strategic Co-operation and Stakeholder Liaison  
Former Dean, Johns Hopkins Bloomberg School of Public Health, Baltimore, USA

BEN CANNY  
Governance and Fundraising  
Head, School of Medicine, University of Tasmania, Australia

JOSÉ OTÁVIO AULER JR.  
Officer at large  
Dean, Faculty of Medicine, University of São Paulo, Brazil
# M8 Alliance Heads of Delegation

<table>
<thead>
<tr>
<th>Country</th>
<th>Head of Delegation</th>
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<tbody>
<tr>
<td><strong>Australia</strong></td>
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<td><strong>CHRISTINA MITCHELL</strong></td>
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<td>Monash University, Melbourne</td>
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<td>Faculty of Medicine, University of São Paulo</td>
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<td><strong>EDUARDO KRIEGER</strong></td>
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<td>Former President</td>
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<td>Brazilian Academy of Sciences</td>
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<td><strong>TARIK MÖRÖY</strong></td>
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<td></td>
<td>President and Scientific Director</td>
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<td>Clinical Research Institute Montreal (IRCM)</td>
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<td><strong>China</strong></td>
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<td><strong>XUETAO CAO</strong></td>
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<td></td>
<td>President</td>
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<td>Chinese Academy of Medical Sciences &amp; Peking Union Medical College</td>
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<td><strong>DEPEI LIU</strong></td>
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<td>InterAcademy Partnership (IAP)</td>
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<td><strong>FRANÇOIS HOULLIER</strong></td>
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<td>Université Sorbonne Paris Cité</td>
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<td><strong>KARL MAX EINHÄUPL</strong></td>
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<td><strong>LUCIANO SASO</strong></td>
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<td>Vice-Rector for European University Networks</td>
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<td><strong>FERNANDO REGATEIRO</strong></td>
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<td><strong>IVAN DEDOV</strong></td>
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<td><strong>EVGENY SIDORENKO</strong></td>
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<td>JOHN EU-LI WONG</td>
<td>CHANG-CHUAN CHAN</td>
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<tr>
<td>Chief Executive Officer</td>
<td>National Taiwan University</td>
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<td>National University Health System</td>
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<td>Senior Vice-President (Health Affairs), National University of Singapore</td>
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<td>KRAY GUAN YEHOH</td>
<td>MAHMUT AK</td>
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<td>Rector</td>
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<tr>
<td>Yong Loo Lin School of Medicine, National University of Singapore</td>
<td>Istanbul University</td>
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<tr>
<td>TEO YIK YIN</td>
<td>BAHÜDDIN ÇOLAKOĞLU</td>
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<tr>
<td>Vice-Dean (Research)</td>
<td>Dean</td>
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<td>Saw Swee Hock School of Public Health</td>
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<td>CHARLES IBINGIRA</td>
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<td>ANTOINE FLAHAULT</td>
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<tr>
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<td>Institute of Global Health</td>
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<td>ILONA KICKBUSCH</td>
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<td>Global Health Program, Graduate Institute</td>
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<td>BERTRAND LEVRAT</td>
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<tr>
<td>Chief Executive Officer</td>
<td>Geneva University Hospitals</td>
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<tr>
<td>NICOLE ROSSET</td>
<td>USA</td>
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<tr>
<td>Deputy Director, Geneva University Hospitals (HUG)</td>
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<td></td>
<td>External Affairs and Executive Management Member</td>
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WELCOME TO THE
WORLD HEALTH SUMMIT
BERLIN 2018
The World Health Summit Startup Track highlights outstanding ideas and innovative business concepts that have the potential to revolutionize healthcare and improve Global Health.

Out of 60 applications from 19 countries, the jury has invited 25 Startups to visit the World Health Summit 2018. Attending the World Health Summit provides young entrepreneurs with three days of access to world leaders from science, industry, politics, and civil society to set up future collaborations and get to know potential mentors, investors and board members.

10 of them will pitch their ideas to the jury and the World Health Summit audience on October 15, from 12:45 to 13:45. The winner will be presented in an award ceremony at the World Health Summit Night that evening.

Benefits

- Awarded in a ceremony at the World Health Summit Night
- Special access to the World Health Summit and M8 Alliance network
- Exclusive coaching from FLYING HEALTH, one of the leading company builders for health startups in Germany

Pitch

Monday, October 15, 12:45
Saal 1 | Rudolf Virchow

Award

Monday, October 15, 18:30
Saal 1 | Rudolf Virchow

The winner will be presented with an award at the World Health Summit Night in the evening.

Jury

KAI-UWE BINDSEIL
Berlin Partner

JUTTA KLAUER
Pfizer Germany

TOBIAS KURTH
Charité – Universitätsmedizin Berlin

SHARI LANGEMAK
Physician and Digital Healthcare Expert

MARKUS MÜSCHEMICH
Flying Health

THIMO V. SCHMITT-LORD
Bayer Foundations

ANNA BABETTE STIER
German Federal Ministry of Health

ALF WACHSMANN
Max Delbrück Center for Molecular Medicine

UTE E. WEILAND
Deutschland – Land der Ideen (Speaker)

ROLF ZETTL
Berlin Institute of Health
## THE 10 FINALISTS

<table>
<thead>
<tr>
<th>Company</th>
<th>Country</th>
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<th>Website</th>
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</thead>
<tbody>
<tr>
<td>Caspar Health</td>
<td>Germany</td>
<td>Telemedicine for musculoskeletal conditions</td>
<td><a href="http://www.caspar-health.com">www.caspar-health.com</a></td>
</tr>
<tr>
<td>DX-Labtrack</td>
<td>Germany</td>
<td>Blood and Transfusion Safety</td>
<td><a href="http://www.dx-labtrack.com">www.dx-labtrack.com</a></td>
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<tr>
<td>Eyeluminati</td>
<td>India</td>
<td>Health and Wellness, Accessibility</td>
<td><a href="http://www.facebook.com/Manovue-367387056758977/?ref=br_rs">www.facebook.com/Manovue-367387056758977/?ref=br_rs</a></td>
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<td>ImmunifyMe</td>
<td>Sri Lanka</td>
<td>Medi Tech</td>
<td><a href="http://www.immunify.me">www.immunify.me</a></td>
</tr>
<tr>
<td>Inveox GmbH</td>
<td>Germany</td>
<td>Digital Drug / Depression Therapy</td>
<td><a href="http://www.inveox.com">www.inveox.com</a></td>
</tr>
<tr>
<td>Magnosco GmbH</td>
<td>Germany</td>
<td>Skin Cancer Detection</td>
<td><a href="http://www.magnosco.com">www.magnosco.com</a></td>
</tr>
<tr>
<td>Pay It Forward</td>
<td>USA</td>
<td>STD Testing</td>
<td><a href="http://www.seshglobal.org">www.seshglobal.org</a></td>
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<tr>
<td>SpotSense</td>
<td>India</td>
<td>Medical Diagnostics</td>
<td><a href="http://www.spotsense.in">www.spotsense.in</a></td>
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<tr>
<td>Strand Therapeutics Inc.</td>
<td>USA</td>
<td>Cancer Immunotherapeutics</td>
<td><a href="http://www.strandtx.com">www.strandtx.com</a></td>
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<tr>
<td>Wulira App</td>
<td>Uganda</td>
<td>Health Technology</td>
<td><a href="http://www.wuliraapp.com">www.wuliraapp.com</a></td>
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</tbody>
</table>

[www.worldhealthsummit.org/initiatives/startup-track.html](http://www.worldhealthsummit.org/initiatives/startup-track.html)
Monday, October 15, 18:30
Saal 1 | Rudolf Virchow

The World Health Summit Night as the central networking event hosts the award ceremony of the Startup Track.
The New Voices in Global Health initiative promotes the active participation of young scientists in the World Health Summit. It is supported by the M8 Alliance of Academic Health Centers, Universities and National Academies. It is aimed at empowering research, policy and advocacy initiatives among future leaders in global health, who are invited to send in abstracts of their scientific work and ideas.

The World Health Summit Scientific Committee (see page 21) identified the best applications based on international academic standards. The selected candidates will be able to display their work in a special poster exhibition, thus playing an active role in the World Health Summit.

The selected New Voices in Global Health are:

**Faith Agbozo, Abdulai Abubakari and Albrecht Jahn**
Institute of Public Health, Heidelberg University Medical Faculty, Germany
Is there need to reconsider screening procedures for gestational diabetes mellitus at lower level facilities? Evidence from a diagnostic accuracy study

**Syeda Akila Ally**
University of Chicago
Suicide as a Mental Health Outcome: A Case Study of South Asia’s Mental Health Policy and Infrastructure

**Rebecca Racheal Apolot**
Makerere University School of Public Health
The Game Changers: Breaking Through Resource Limitation to Ebola Control by Community Structures: The Case of Bombali District – Sierra Leone
Franz Castro
Gorgas Memorial Institute for Health Studies
Determinants of under-5 mortality reduction in Central America: a secondary analysis from the GBD Study data

Moyukh Chowdhury
Umeå University
AMR-Watch: A pilot study to initiate Antimicrobial Resistance surveillance system in North-eastern Bangladesh

Kealoha Fox
Office of Hawaiian Affairs
Health in All Policies Legislation that Integrates Cultural Values with State Government Planning

Berit Sofie Hustad Hembre
The Norwegian Institute of Public Health
Access to medicines and structural power: The perceived role of the state and emerging state actors in landmark reports

Connor Rochford
University of Oxford
A One Health Approach to the Global Governance of Antimicrobial Resistance - review of evidence and three possible models

Hannah Thomas
NIHR Unit of Global Surgery (Universities of Birmingham, Edinburgh and Warwick), Clinical Surgery, University of Edinburgh, Edinburgh, UK
Safety Processes Undermined During Surgical Emergencies? A Comparison of WHO Surgical Safety Checklist Use and Outcomes in a Large, Multinational Cohort of Surgical Patients

Tran Thu Ngan, Do Van Vuong, Nguyen Tuan Lam, Hoang Van Minh
Hanoi University of Public Health and World Health Organization-Vietnam Office
Willingness to participate and pay for smoking cessation service through text-messaging in Vietnam
PROGRAM

SUNDAY, OCTOBER 14
More people are on the move now than ever before. There are an estimated 1 billion migrants in the world today of whom 258 million are international migrants and 763 million internal migrants – one in seven of the world’s population. 65 million of the world’s internal and international migrants are forcibly displaced today. This rapid increase of population movement has important public health implications, and therefore requires an adequate response from the health sector. Challenges to migrant health can be attributed to many factors, including lack of access to health services, absence of financial protection, and discrimination.

Although the number of people seeking refuge is the highest in developing countries, the rapid increase of refugees to Europe over the past two years has altered the political landscape and will have a lasting impact for many years to come. During this politically turbulent time, the health of refugees must continue to be viewed as important to governments worldwide. New strategies and ways to support migrant health must be discussed and based on ratified international human rights standards.
CHAIR

Hélène Boisjoly
University of Montreal | Dean of Medicine | Canada

SPEAKERS

Mina Barling
IPPF The International Planned Parenthood Federation | External Relations Division | Director | United Kingdom

Zsuzsanna Jakab
World Health Organization (WHO) | Regional Director for Europe | Denmark

Susanna Krüger
Save the Children Germany | CEO | Germany

Karlee Silver
Grand Challenges Canada | Programs | Vice President | Canada

Elhadj As Sy
International Federation of the Red Cross (IFRC) | Secretary General | Switzerland
Malnutrition in its various forms is a problem faced by all countries. Major challenges for delivering food and nutrition security are compounded by pressures of a growing population, urbanization, climate change, inequality and market instability. The Sustainable Development Goals provide a key framework for addressing the challenges of malnutrition and they mandate fresh engagement by science to resolve complexities of evidence-based policies and programs.

The InterAcademy Partnership project initiated four regional working groups in Africa (NASAC), Asia (AASSA), the Americas (IANAS) and Europe (EASAC) to explore scientific opportunities for sustainable production and healthy diets. The integrative food systems approach included all the steps involved from growing through to processing, transporting, trading, purchasing and consuming food, examining issues for resource efficiency, environmental sustainability, resilience and the public health agenda, while also taking account of local-global interconnectedness of systems.

The published four regional reports are being discussed with national and regional policy makers and are also serving as a collective resource to prepare a fifth, global report. In this session we will discuss some of the emerging regional and global conclusions for food and nutrition security with particular regard to the linkages to health and wellbeing. We emphasize that it is vital to be more ambitious in identifying scientific opportunities and in mobilizing the resource from research and innovation in engagement between the scientific community, policy makers and other stakeholders.
CHAIRS

Jörg Hacker
German National Academy of Sciences
Leopoldina | President | Germany

Volker ter Meulen
InterAcademy Partnership (IAP) | President

SPEAKERS

Volker ter Meulen
InterAcademy Partnership (IAP) | President
Introduction to the Project

Robin Fears
European Academies Science Advisory Council | Bioscience Programme Secretary | United Kingdom
Perspectives in Europe

Joachim von Braun
Rheinische Friedrich-Wilhelms-University Bonn | Center for Development Research | Director | Germany
Global Analysis and Synthesis of Issues

Jörg Hacker
German National Academy of Sciences
Leopoldina | President | Germany
Closing Remarks

Mohamed H.A. Hassan
Sudanese National Academy of Science | Executive Committee | Sudan
Perspectives in Africa
Below-replacement fertility and rising life expectancy primarily due to survival improvements among people at advanced ages lead to population aging in many parts of the world. This continuously increasing proportion of the elderly requires new strategies in virtually every field of public policy, probably most prominently for health care.

The workshop seeks to provide a framework for potential pathways for health developments, starting with a presentation of recent research on mortality among the elderly.

The focus in the subsequent presentations and discussions of this workshop will be on populations that are at the forefront of aging: Japan, East Asia as well as the Nordic European countries.

What health trends can we observe and how are societies dealing with current and future challenges to health care are only two questions that will be addressed throughout the workshop.
**CHAIRS**

**Roland Rau**  
University of Rostock | Professor of Demography | Germany  
Max Planck Institute for Demographic Research | Fellow | Germany

**Shunichi Fukuhara**  
Kyoto University | School of Public Health | Dean Emeritus | Japan

**SPEAKERS**

**Elisabetta Barbi**  
Sapienza University of Rome | Associate Professor of Demography | Italy  
The Plateau of Human Mortality

**Shou-Hsia Cheng**  
National Taiwan University | College of Public Health | Professor and Associate Dean | Taiwan  
The Performance of Hospital Care for the Elderly in Asian Countries: The Case of Hip Fracture Surgery

**Jun Miyashita**  
Kyoto University Graduate School of Medicine | Assistant Professor of Medicine | Japan  
Who Desires Early Advance Care Planning? Strategies for Having a Good End of Life in Aging Societies

**Karin Modig**  
Karolinska Institutet | Institute of Environmental Medicine | Assistant Professor | Sweden  
Health of the Ageing Population – Time Trends, Current Status and Future Perspectives. Examples from the Nordic Countries
Although infectious diseases remain a major health threat, the pipeline for novel intervention measures has come to a standstill. The situation has been further worsened by the profound increase of antimicrobial resistant pathogens and increasing occurrence of outbreaks with pandemic risk.

Hence, better vaccines, drugs and diagnostics are urgently needed. This is particularly true for poverty-related diseases (PRDs) including the Big Three: tuberculosis, HIV/AIDS and malaria, and neglected diseases. It has become obvious that public and private funded institutions need to form partnerships to accelerate this process.

This workshop will discuss general strategies for, and more specific examples, of the clinical development of novel intervention measures and their optimization to key populations, aimed at accomplishing this goal with a particular focus on PRDs.
CHAIRS

Stefan H.E. Kaufmann
Max Planck Institute for Infection Biology | Department of Immunology | Director | Germany

Michael Makanga
European and Developing Countries Clinical Trials Partnership (EDCTP) | Executive Director | Netherlands

SPEAKERS

Catharina Boehme
Foundation for Innovative New Diagnostics (FIND) | CEO | Switzerland
Overcoming the 2 Valleys of Death in Infectious Diseases Diagnostics

Ambassador Harald Braun
Germany’s former Permanent Representative to the United Nations
Latest News from the UN General Assembly First-Ever High-level Meeting on Ending Tuberculosis (TB)

Mutsa Bwakura-Dangarembizi
University of Zimbabwe | Department of Paediatrics and Child Health | Senior Lecturer | Zimbabwe
HIV Treatment in Children

Gérard Krause
Helmholtz Centre for Infection Research (HZI) | Department for Epidemiology | Head | Germany
The Need for an Integrated Surveillance Outbreak Response Management and Analysis System (SORMAS)

Michael Makanga
European and Developing Countries Clinical Trials Partnership (EDCTP) | Executive Director | Netherlands
The Role of EDCTP in PRDs Research & Development

Umesh Shaligram
Serum Institute of India Pvt. Ltd. | Director Research & Development | India
Companies, Vaccines and a Novel TB Vaccine

Feiko ter Kuile
Liverpool School of Tropical Medicine | Chair in Tropical Epidemiology | United Kingdom
Challenges and Progress in the Treatment and Prevention of Malaria in Pregnancy

Stefan H.E. Kaufmann
Max Planck Institute for Infection Biology | Department of Immunology | Director | Germany

Michael Makanga
European and Developing Countries Clinical Trials Partnership (EDCTP) | Executive Director | Netherlands

Harald Braun
Michael Makanga

Mutsa Bwakura-Dangarembizi
Umesh Shaligram

Stefan H.E. Kaufmann
Feiko ter Kuile
The healthcare sector is the largest economic sector in the EU. Health is also one of the most important concerns of European citizens.

Europe leads in many areas of research and has developed powerful models of cross-border, cross-sectoral research cooperation. These have helped to increase the EU’s attractiveness as a place for research and innovation, produced high-quality patents and created jobs and growth. However, innovation in health is characterized by a unique set of challenges, such as the multifaceted interaction between research, innovation, patient care and population health and complex regulatory and reimbursement systems. At the same time, advances in precision medicine and the use of health data create a wealth of opportunities.

In order for innovation to occur and become available and accessible to all European citizens in an equitable manner, governance and management of public investment in health research need to be impact and patient oriented, inclusive and holistic.

The Scientific Panel for Health, one of the expert groups tasked by the Commission, has proposed the creation of a European Council for Health Research to fulfill the above criteria. The session will compare different international models of organizing public investment in health research and focus on the impact on public health and health care.
CHAIR

Karin R. Sipido
European Commission | Scientific Panel for Health | Chair | Belgium

SPEAKERS

Ildikó Horváth
Semmelweis University | Department of Pulmonology | Professor | Hungary

Anna Lönnroth Sjöden
European Commission | Directorate-General for Research and Innovation | Directorate E-Health | Unit 1 - Strategy | Head of Unit | Belgium

Bernd Stowasser
Sanofi | Global Head of Public Private Partnerships Alliance Management | Germany
European Federation of Pharmaceutical Industries and Associations (EFPIA) | Member of Innovative Medicines working group | Germany

Mats Ulfendahl
Regional Council of Östergötland | Director of Research | Sweden

DISCUSSANTS

Laurent Degos
Institut Pasteur | Vice-President | France

Tarik Möröy
Institut de Recherches Cliniques de Montréal (IRCM) | President and Scientific Director | Canada

Axel Radlach Pries
Charité - Universitätsmedizin Berlin | Dean | Germany
In the next decade medical progress in treating cancer will potentially redefine life with this disease. Upcoming innovations will improve the treatment in many cancers. Further, better understanding and new forms of research due to e.g. “Big Data” will make us know “which drugs to give to which patients” and which treatment will be most effective and best for patients. The health care systems will have to meet the challenge to ensure fast access to these innovations: By 2030, the global burden of cancer is expected to grow to 21.7 million new cancer cases and 13 million cancer deaths simply due to the growth and aging of the population.

But recent OECD publications show a growing inequality around the world - the drivers are globalization, skill-biased technological change and changes in countries’ policy approaches. Inequalities in health status are due to many factors, including differences in living and working conditions and in behavioral factors, but also in access to and quality of health care. Despite significant progress in most countries, access to quality health care varies across the socio-demographic groups, including by sex, age, geographic area and for financial and non-financial reasons.

These growing inequalities lead to a poor translation of innovation in cancer care into health care systems in diverse communities, it hampers the impact of innovative treatments and precision medicine advances.
**CHAIRS**

**Andreas Penk**  
Pfizer Germany GmbH | Oncology | Regional President | Germany

**Peter Boyle**  
International Prevention Research Institute (iPRI) | President | France

**SPEAKERS**

**Peter Boyle**  
International Prevention Research Institute (iPRI) | President | France

**Richard Sullivan**  
King's College London | Institute of Cancer Policy | Director | United Kingdom

**Julie S. Torode**  
Union for International Cancer Control (UICC) | Director of Special Projects | Switzerland

**Sabine Vogler**  
Gesundheit Österreich GmbH | WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies | Head | Austria

**Dazhu Yang**  
International Atomic Energy Agency | Deputy Director General

Peter Boyle  
Julie S. Torode  
Andreas Penk  
Sabine Vogler  
Richard Sullivan  
Dazhu Yang
This workshop will utilize didactic and interactive learning techniques. Key representatives from Women in Global Health, RinGs and the Global Health Workforce Network Gender Equity Hub will present key findings on the barriers, as well as solutions to gender transformative health systems policies. The panelists will draw from key findings in the working paper being developed by the Gender Equity Hub, as well as panelists’ own work and research.

Following the initial presentations, audience members will be engaged in breakout sessions. These breakout sessions will be interactive dialogues where facilitators will lead participants through exercises on how to implement gender transformative policies for the health workforce and in turn how to address the gendered dimensions of health systems strengthening.
CHAIR

Roopa Dhatt
Women in Global Health | Initiative Director & Co-Founder | United States of America

SPEAKERS

Evelyn Kabia
KEMRI-Wellcome Trust | Health Economics Research Unit | Assistant Research Officer | Kenya

Rosemary Morgan
Johns Hopkins Bloomberg School of Public Health | International Health | Assistant Scientist | United States of America

Christina Schrade
SEEK Development | Managing Director | Germany

Kelly Thompson
Women in Global Health | Gender Specialist | United States of America

Roopa Dhatt
Christina Schrade
Evelyn Kabia
Kelly Thompson
Rosemary Morgan
Urbanization is one of the most significant global changes with an enormous health impact within the next decades. According to the United Nations projections two-thirds of the urban population will be living in cities. At the same time city living and urban upbringing can affect the mental health of urban dwellers through social stressors and subsequently increase the risk for mental-ill health. Social stress in urban environments may result from high social density and overcrowding, social isolation and excessive within-city inequality. Identifying populations who are particularly at risk for social stress in urban environments and who do not have adequate access to the urban advantage seems therefore key.

However, cities keep attracting people as they promise improved standards of living, better access to education, wealth, sanitation and health care and offer a broader cultural diversity. Health researchers, urban planners and governmental authorities have largely failed to develop public mental health strategies for the growing cities in all parts of our world. Such a strategy should particularly address at-risk populations with their increased exposure to urban stressors and recommend strategies to facilitate overall access to the urban advantage.

This workshop will identify the major health-relevant social stressors and at-risk populations for stress-dependent mental-ill health, and discuss approaches towards a public mental health strategy for urban environments.
CHAIR

Mazda Adli
Fliedner Klinik Berlin | Chair | Germany
Charité - Universitätsmedizin Berlin |
Mood Disorder Research Group | Director | Germany

SPEAKERS

Carlos Dora
World Health Organization (WHO) | Department of Public Health and Environment | Coordinator | Switzerland

Ulrike Kluge
Charité Universitätsmedizin Berlin | Department of Psychiatry and Psychotherapy | Intercultural Center for Psychiatry and Psychotherapy (ZIPP) | Director | Germany

Faraaz Mahomed
Open Society Foundations | Mental Health and Rights | Program Officer | United States of America

François Pelletier
United Nations | Department of Economic and Social Affairs (DESA) | Chief of Population Estimates and Projections Section | United States of America

Sahar Samavati
Tarbiat Modares University | Iran
In the context of the World Health Summit 2018, the Ministry of Economic Affairs of the Canton of Bern, Switzerland, will host a workshop on the topic of “International Life Sciences Location and Infrastructure Management: Best Practices from Around the World”.

The fact that a Ministry of Economic Affairs puts this health policy issue at the center of attention is an important strategy of the Canton of Bern. We believe that the conventional, more or less strictly differentiation of responsibilities by department (economy, science, health, finance, etc.) is in some fields not enough result-oriented and must be overcome, if the overall goal is to provide medicine and medical research as a central driver of social change and as a backbone of health-oriented developed societies. The location strategy for medicine and medical research, which the Canton of Bern and the Swiss capital region advances nationally and internationally, therefore follows the guiding principle “Health in All Policies”, surely also in regional economic policy. The new medical and health Campus in Bern is of national importance. All political forces are brought together to raise successfully an open-oscillating functional system of research, translational medicine and care.

**CHAIRS**

**Ralph Kray**
Canton of Bern | Ministry of Economic Affairs | Head of International Affairs | Switzerland

**André Nietlisbach**
Canton of Bern | Ministry of Economic Affairs | Secretary General | Switzerland
SPEAKERS

Barkin Arak
Boğaziçi University | Technology Transfer Office | Entrepreneurship & Innovation Manager | Turkey

Timuçin Bilgör
BUMED Business Angels (BUBA) | President | Turkey

José Otávio Costa Auler Jr.
University of São Paulo | Faculty of Medicine | Dean | Brazil

Uwe Jocham
Insel Gruppe AG | CEO and Chairman of the Board of Directors | Switzerland

Fabian Käsermann
CSL Behring AG | Associate Director & Head of Preclinical Innovation | Switzerland

Depei Liu
Chinese Academy of Medical Sciences (CAMS) & Peking Union Medical College (PUMC) | Former President | China

Richard B. Markham
Johns Hopkins Bloomberg School of Public Health | Molecular Microbiology and Immunology | Faculty Director | United States of America

Fernando J. Regateiro
Coimbra Hospital and University Centre (CHUC) | Administration Board | Chairman | Portugal

DISCUSSANTS

Peter Agre
Johns Hopkins Bloomberg School of Public Health | Johns Hopkins Malaria Research Institute | Director | United States of America

Erşen Kavak
Genomize Inc. | CEO | Turkey

Ihsan Solaroglu
Koç University | School of Medicine | Associate Dean for Research | Turkey

Ozan Alptekin
BiSU | CTO | Turkey

Timuçin Bilgör
Depei Liu
Collecting and analyzing the increasing amount of data from patients’ daily life is essential for improving care management. While the generation, integration and analyses of data from real life, randomized clinical trials, electronic medical records and public data is opening new ways for future treatments, the active involvement of all stakeholders (patients, physicians and the pharmaceutical industry but also regulators, payers and public health officials) remains essential if we want to build a new frame for healthcare innovation and evaluation.

This panel aims to focus on the opportunities afforded by incorporating concepts like Big Data, digital health, machine learning, and artificial intelligence (AI) and understand how to lift through a concerted effort between the various parts of the healthcare ecosystem, the challenges and obstacles which remain.
CHAIRS

Stefan Willich
Charité Universitätsmedizin Berlin | Institute for Social Medicine, Epidemiology and Health Economics | Director | Germany

Bernard Hamelin
Sanofi | Global Head of Medical Evidence Generation | France

SPEAKERS

Nikolai Brun
Danish Medicines Agency | Medical Evaluation & Biostatistics | Director of Division | Denmark

Laurent Doyen
French Diabetes Federation | Member of the Board of Directors | France

Bernard Hamelin
Sanofi | Global Head of Medical Evidence Generation | France

Alex Silverstein
NHS North West London Collaborative of Clinical Commissioning Groups | Diabetes Education and Engagement Lead | United Kingdom

Bernhard Tilg
Member of the Provincial Government of Tyrol | Austria

Stefan Willich
Charité Universitätsmedizin Berlin | Institute for Social Medicine, Epidemiology and Health Economics | Director | Germany

Bernard Hamelin
Sanofi | Global Head of Medical Evidence Generation | France
Noncommunicable diseases (NCDs) are now widely recognized as a major challenge to health and sustainable human development in the 21st century. As the leading cause of death and disability worldwide, NCDs exact a heavy and growing toll on the health and economic security of all countries and disproportionately impact the most vulnerable in particular in low- and middle-income countries. Without coordinated action at the highest political level, the escalating burden and cost of NCDs will weigh heavy across all pillars of sustainable development.

NCD investments, similar to investments in communicable diseases, antimicrobial resistance, maternal and child health and climate change, are investments in countries’ futures. Premature mortality and disability due to NCDs are largely preventable and cost-effective solutions, e.g. WHO’s Best Buys for prevention and control, are available to all Member States. However, weak high-level political action and chronically inadequate investment has hampered progress so far. Out of the 194 countries featured in the 2017 WHO Progress Monitor on NCDs, only 90 have guidelines for the management of major NCDs, which is an essential first step towards provision of effective care.

The 2018 UN High-Level Meeting on NCDs (UN HLM) constitutes a major opportunity to elevate the challenge of implementing effective national responses and international cooperation on NCD prevention and control to the level of Heads of State and Heads of Government. It is time world leaders act and invest in NCDs to avoid preventable death and disability, protect human dignity and the right to health, fight poverty and social inequality and ensure sustained human development.
Objectives:

• To discuss the outcomes of the 2018 UN High-Level Meeting for greater action on NCDs, with a focus on obesity and diabetes;
• To explore opportunities to replicate evidence-based practices for NCD prevention and control and promote solutions for integrated healthcare delivery at national and regional levels;
• To present relevant approaches and successful examples to strengthen multistakeholder action on NCDs.

CHAIR

Bente Mikkelsen
World Health Organization (WHO) | Division of Noncommunicable Diseases and Promoting Health through the Life-course | Director | Denmark

SPEAKERS

Svetlana Akselrod
World Health Organization (WHO) | Noncommunicable Diseases and Mental Health | Assistant Director-General | Switzerland

Bagher Larijani
Ministry of Health and Medical Education | Vice Minister of Education, Council of Medical Education & Speciality Training | Iran

Bente Mikkelsen
World Health Organization (WHO) | Division of Noncommunicable Diseases and Promoting Health through the Life-course | Director | Denmark

Anders Nordström
Ministry for Foreign Affairs | UN Policy Department | Ambassador for Global Health | Sweden

Edward Omete
PharmAccess Foundation | Medical Advisor | Kenya

Gerald Yonga
East Africa NCD Alliance | Chair | Kenya
WORKSHOP

RESPECT AND DIALOGUE
Linking Cultural Heritage, Values, Cutting-Edge Science, Religion, and Health to Promote Peace and Respect

HOSTS
M8 Alliance:
InterAcademy Partnership (IAP)
International Partnership on Religion and Sustainable Development (PaRD)

Sustaining peace is the central aim of Sustainable Development Goal (SDG) 16: Peace, justice and strong institutions, and a necessary basis for all other SDGs, including “Good Health and Well-being”. Recognizing universal human rights and fundamental freedoms of others is vital to ensure open dialogues as well as the wellbeing and the survival of diverse communities around the globe, as emphasized in the UNESCO’s 1995 Declaration on Tolerance.

Against the backdrop of growing violent extremism, conflicts and suffering worldwide, the InterAcademy Partnership (IAP) intends to give science a stronger voice and take more responsibility. Jointly with other organizations, IAP is setting up the initiative “Respect and Dialogue” in order to foster an atmosphere of mutual respect, contribute to an open, free, peaceful, forward-looking enlightened culture of discussion and curtail religious, ideological, political and cultural bigotry. To that end, the IAP member academies will join forces with other groups towards this important goal, including museums and symbolic places of cultural respect and exchange (e.g. the Humboldt Forum in Berlin, the Bibliotheca Alexandrina, the Louvre Abu Dhabi), international policy and academic networks such as “The Science Bridge” and the “Sapiens 5.0” project and global multi-stakeholder-partnerships such as the International Partnership on Religion and Sustainable Development (PaRD). Thus, they will bring together leading experts and practitioners from science, policy, religion, business and media for dialogues about respect, dignity, and nonviolence in different spheres of life around the globe.
The session will explore the relationships between values, cutting-edge science, religion, and health, and look into innovative and unconventional partnerships to investigate how science can contribute more efficiently to promoting respect and peace through an enlightened culture of structured dialogues.

**CHAIRS**

**Edelgard Bulmahn**  
German Bundestag | former German Federal Minister of Education and Research and former Vice President of the German Bundestag | Germany

**Jeremy Farrar**  
Wellcome Trust | Director | United Kingdom

**SPEAKERS**

**Marwa ElWakil**  
Library of Alexandria | Head of Academic Research Sector | Egypt

**Mohamed H.A. Hassan**  
Sudanese National Academy of Science | Executive Committee | Sudan

**Azza Karam**  
United Nations Population Fund (UNFPA) | Senior Advisor | United States of America  
UN Inter-Agency Task Force on Religion and Development | Coordinator

**Rev’d Phumzile Mabizela**  
Inerela+ | Executive Director | South Africa

**Xiaochun Sun**  
University of Chinese Academy of Sciences | Professor and Acting Dean of School of Humanities | China

**Paul Verschure**  
Universitat Pompeu Fabra | Research Professor & Coordinator Sapiens 5.0 | Spain

**DISCUSSANTS**

A selected round of experts
During the last 20 years knowledge about patient safety has grown rapidly and measures taken to avoid harm are numerous and widespread – however avoidable adverse events in healthcare are still a worldwide problem.

Research has shown that safety culture and the success of patient safety measures are dependent on the leadership of an organization. Patient safety needs to be approached top-down rather than bottom-up.

In this workshop, we would like to present policies, methods and measures that enhance the involvement of the senior hospital management concerning safety culture and patient safety projects.

Following questions will be discussed:

- How do head of departments learn from adverse events or near misses and how do they facilitate learning from these events?
- Does senior hospital management understand and apply the human factors approach to decisions made at the top level?
- How can Ministries of Health foster a patient safety climate and ensure implementation of risk reduction strategies after serious adverse events?
CHAIR

Ulrich Frei
Charité – Universitätsmedizin Berlin | Medical Director | Germany

SPEAKERS

Mike Durkin
Imperial College London | Institute of Global Health Innovation | Centre for Health Policy | Professor & Senior Advisor on Patient Safety Policy and Leadership | United Kingdom

Felicia Hong
Ministry of Health (MOH) | Assistant Director of the Patient Safety and Quality Improvement Branch | Singapore

Sandhya Mujumdar
National University Hospital Singapore (NUHS) | Deputy Director of Q&S | Singapore

Roland Staudinger
VAMED Management und Service GmbH | Vice President International Hospital Management | Austria
Marketing and distribution of falsified and substandard medication is a global problem, endangering the appropriate treatment of patients, putting their health and life at risk. Globally, it is estimated that about ten percent of all traded medication is falsified or substandard, in some regions the situation is much worse. There is a need to detect falsified and substandard drugs and eliminate them from pharma markets to protect patients and to secure therapy success.

This session aims at analyzing the scope of the global problem of falsified and substandard drugs, and to demonstrate and discuss practical and locally appropriate options to reduce the risk of fake and substandard drugs entering markets, and measures to detect and eliminate them.
MODERATOR

Monika Jones
Moderator & Presenter | Germany & United Kingdom

SPEAKERS

Stefan Artlich
Bayer AG | Track & Trace | Director | Germany
Practical Measures to Minimize the Risk of Falsified Drugs in the Supply Chain

Diana Lee
World Health Organization (WHO) | Substandard and Falsified Medical Products | Technical Officer | Switzerland
The World Health Organization Perspective on Substandard and Falsified Medical Products

Richard Neci
DCMP 8ème CEPAC | Pharmacist Director | Congo
Insights into the Situation of Falsified and Substandard Drugs in Africa

Gisela Schneider
German Medical Mission Institute (DIFAEM) | Director | Germany
Civil Society’s Experience with Falsified and Substandard Drugs

Han Steutel
Association of Research-based Pharmaceutical Companies (vfa) | Chairman of the Board | Germany
Cooperation - Key in the Fight Against Falsified and Substandard Drugs
Worldwide, stroke and dementia account for 2/3 of disability adjusted life years (DALY). Rates are declining in developed countries and rising in developing ones, suggesting that the control of the common risk factors can affect the incidence of both. A stroke doubles the chances of developing dementia. A successful population-level stroke strategy was associated with a 32% decrease in the incidence of stroke and a 7% decrease in the incidence of dementia.

Stroke (cerebral infarction) represents a compressed form of neurodegeneration that can cause or trigger dementia. The common mechanisms offer new therapeutic opportunities for treating both.

The World Dementia Council includes a platform for risk reduction of the common treatable risk factors underpinning stroke and dementia.

In principle, 90% of strokes are preventable and about 30% of dementias. If those developing dementia after a stroke are included, then about 50% of all dementia could be prevented beginning right now. Multimodal interventions have resulted in improvement in cognitive performance, anticoagulants cut the risk of dementia in atrial fibrillation in half, and a growing list of potential treatments await translation from promise into action.
CHAIRS

Karl Max Einhäupl
Charité - Universitätsmedizin Berlin | CEO | Germany

Vladimir Hachinski
World Stroke Organization | Joint Prevention of Stroke and Dementia | Chair | Canada

SPEAKERS

Suvarna Alladi
University of Cambridge | National Institute of Mental Health and Neuro Sciences (NIMHANS) | Professor | India
Diverging Trends in Stroke and Dementia: Prevention Opportunities

Vladimir Hachinski
World Stroke Organization | Joint Prevention of Stroke and Dementia | Chair | Canada
Preventing Dementia by Preventing Stroke: The Bases for Action

Pierluigi Nicotera
German Center for Neurodegenerative Diseases (DZNE) | Director | Germany

Zaven Khachaturian
Campaign to Prevent Alzheimer’s Disease by 2020 | President | United States of America
Stroke as a Form and a Trigger of Neurodegeneration

Brian H. Rowe
University of Alberta | Institute of Circulatory and Respiratory Health | Scientific Director | Canada
Canadian Initiatives on Stroke and Dementia
KEY 01
SAAL 1
RUDOLF VIRCHOW
18:00 – 19:30

OPENING CEREMONY

HOST
M8 Alliance

World Health Summit Trailer produced by the Deutsche Welle

CHAIRS

Detlev Ganten
World Health Summit | President | Germany

Fernando J. Regateiro
Coimbra Hospital and University Centre (CHUC) | Administration Board | Chairman | Portugal

João Gabriel Silva
Coimbra Hospital and University Centre (CHUC) | Dean | Portugal

The World Doctors Orchestra performs
Ludwig van Beethoven (1770–1827)
Symphony No. 8 in F Major, op. 93
Conductor: Stefan Willich
SPEAKERS

Jens Spahn
Ministry of Health (BMG) | Minister of Health | Germany

Elizabeth Blackburn
Salk Institute for Biological Studies | President Emerita | United States of America

Alexander Gerst
German European Space Agency | Astronaut

Albert Bourla
Pfizer Inc. | COO | United States of America

Gerd Müller
Ministry for Economic Cooperation and Development (BMZ) | Minister for Economic Cooperation and Development | Germany

Stefan Oschmann
European Federation of Pharmaceutical Industries and Associations (EFPIA) | President | Belgium
Merck KGaA | Executive Board | CEO and Chairman | Germany

Matshidiso Rebecca Moeti
World Health Organization (WHO) | WHO Regional Office for Africa | Regional Director for Africa | Congo

Young Leader in Global Health

João Gabriel Silva

Alexander Gerst

Matshidiso Rebecca Moeti

Albert Bourla
PROGRAM

MONDAY, OCTOBER 15
In recent years, global health security has received increased attention. The Ebola outbreak brought attention to the weaknesses in the systems of preparedness and response. In order to deal with these gaps a number of steps were taken. WHO has committed to improve its emergencies program, while private initiatives have also been developed. Regional organizations such as the EU and the African Union have increased their resolve to address global health security challenges.

Yet despite these initiatives, the world is not ready for the next pandemic. Furthermore, some low-income countries perceive the health security agenda as a device for protecting the developed world from health threats arising from the under-developed world, thereby only advancing the interests of the West.

There is much work to be done in gaining universal acceptance of the global health security agenda and improving collaboration between international, regional and national actors.

However, health security involves more than just infectious disease outbreaks. Health security is also part of wider health systems strengthening and Universal Health Coverage activities, but it is not yet clear how to best synergize these overlapping areas.

Improving global health security is first and foremost a political endeavor. More commitment is required from beyond ministries of health; heads of state across the globe must prioritize health as a political and security issue as well as a medical one.
CHAIR

Wolfgang Ischinger
Munich Security Conference (MSC) | Chairman | Germany

SPEAKERS

Seyyed Hassan Ghazizadeh Hashemi
Ministry of Health and Medical Education | Minister | Iran

Peter Albiez
Pfizer Germany GmbH | CEO | Germany

Seth Berkley
Gavi, The Vaccine Alliance | CEO | Switzerland

Christian Drosten
Charité - Universitätsmedizin Berlin | Institute of Virology Campus Charité Mitte | Director | Germany
Charité Global Health, Scientific Director

Jaak Peeters
Johnson & Johnson Global Public Health | Global Head | Germany

BT Slingsby
Global Health Innovative Technology Fund (GHIT) | Executive Director and CEO | Japan

Charlotte Watts
Department of International Development (DFID) | Chief Scientific Adviser | United Kingdom
We have made impressive progress in maternal, newborn and child survival in the last decade and a half. However, the burden continues to become more complex, and to meet the targets laid out in the Sustainable Development Goals, we will need to double the rate of progress made during the Millennium Development Goal era. We believe that the fastest way to interrupt the transfer of risk from mother to baby is to address underlying biological vulnerabilities, such as malnutrition and pre-term birth.

Our Growth and Resilience framework shifts focus away from development of tools for single disease conditions, and towards innovative tools that can alter the trajectory of biological vulnerability - potential game-changers for maternal, newborn and child survival. To develop these tools, our focus is on innovating in areas that reduce adverse birth outcomes, improve growth, optimize neurodevelopment, and enhance resilience to infection.
CHAIR

Sindura Ganapathi
Bill & Melinda Gates Foundation | Discovery & Translational Sciences | Deputy Director | United States of America

SPEAKERS

Rajiv Bahl
World Health Organization (WHO) | MCA Department | Maternal, Newborn, Child and Adolescent Health Research and Development Team | Coordinator | Switzerland

Stefan Dräger
Drägerwerk Verwaltungs AG | Chairman of the Executive Board | Germany

Katharina Lichtner
Family Larsson-Rosenquist Foundation | Managing Director | Switzerland

Rebecca Richards-Kortum
William Marsh Rice University | Rice 360° Institute for Global Health | Director | United States of America
Zoonotic virus infections may lead to major economic losses and disease burden in animals and man. Herein, particularly emerging viruses, such as avian influenza, MERS-CoV and ZIKV challenge current surveillance and health care systems. Moreover, evolving avian influenza viruses pose a major pandemic threat. This highlights the urgent need for network collaborations involving scientists, clinicians and public health experts working at the animal-human interface. As a major global health challenge, pandemic preparedness plans need to consider the holistic One Health concept.

This session will focus on the current challenges posed by emerging viruses to animal and human health as well as discuss potential counterstrategies to reduce disease burden.
CHAIR

Heribert Hofer  
Leibniz Institute for Zoo and Wildlife Research | Director | Germany

SPEAKERS

Gülsah Gabriel  
Heinrich Pette Institute | 
Viral Zoonoses – One Health | Head | 
Germany

Barbara Rath  
Vienna Vaccine Safety Initiative (ViVI) | 
Co-Founder and Chair | Germany

Yuelong Shu  
National Institute for Viral Disease Control and Prevention of China CDC | 
Deputy Director | China

Marc Sprenger  
World Health Organization (WHO) | 
Antimicrobial Resistance Secretariat | 
Director | Switzerland

Barbara Rath
NEGLECTED TROPICAL DISEASES AND THEIR CO-MORBIDITIES
How They Affect Healthcare Systems

More than 1.4 billion people around the world are infected with at least one NTD. The systemic impact of these diseases is considerable, not just because of the sheer number of those affected, but also because people suffering from NTDs have a higher risk of acquiring other diseases, such as HIV and AIDS, tuberculosis, cancer, diabetes and often develop various forms of physical disabilities, often requiring medical assistance. Women and girls suffering from NTDs, such as anaemia caused by hookworm infection or schistosomiasis have a higher risk of potentially lethal complications during childbirth. People suffering from NTDs also disproportionately suffer from stigma associated with disabilities and often develop constraints in their mental health status.

This session aims at highlighting the consequences and opportunities of integrating NTDs into the health system strengthening approach that the German government has recently introduced into the global health agenda. Programs to combat NTDs have a beneficial effect on health systems, because they substantially reduce the burden of diseases the systems have to cope with. They can also strengthen other preventive programs, such as mother-and-child programs and initiatives to fight hunger and poverty.
CHAIR

Carsten Köhler
University Hospital Tübingen | Institute of Tropical Medicine | Center of Competence | Director | Germany

SPEAKERS

Christoph Benn
The Global Fund to Fight AIDS, Tuberculosis and Malaria | External Relations | Director | Switzerland
Bridge to HIV/AIDS

Katey Einterz Owen
Bill & Melinda Gates Foundation | Department of Neglected Tropical Diseases | Director | United States of America
Bridge to Co-Morbidities in General

Dirk Engels
Health Consultant | Neglected Tropical Diseases | Switzerland
Impulse Statement Co-Morbidities

Narcis Kabatereine
Imperial College London | Faculty of Medicine, School of Public Health | MER Advisor | United Kingdom
Persistent High Schistosomiasis Morbidity in Uganda Despite 13 Years of Annual Mass Drug Administration

Francisca Mutapi
University of Edinburgh | Parasite Immuno-Epidemiology Group | Head | United Kingdom
From Pediatric Schistosomiasis to NCDs in Adulthood
Successful institutions need good leaders. And whether they are in high income countries or poorer countries, institutions providing healthcare, educating future physicians or promoting the public’s health are no different. Yet decision-makers in such institutions are often appointed from among people trained in medicine, with little formal training in leadership to prepare them for these roles.

The InterAcademy Partnership (IAP) Young Physician Leaders (YPL) program aims to bridge this gap. Launched in 2011, to date some 155 young physicians from some 45 countries have participated in six international and one regional editions of this personalized leadership training program (a dedicated IAP for Health YPL Directory is available here: www.iamp-online.org/iamp-young-physician-leaders-directory).
CHAIRS

Jo Ivey Boufford
New York Academy of Medicine | President | United States of America

Nora Ilona Grasselli
ESMT European School of Management and Technology GmbH | Program Director | Germany

Peter McGrath
InterAcademy Partnership (IAP) | Program Officer | Italy

SPEAKERS

Selected from among the 2018 Cohort of Young Physician Leaders
When it comes to fighting infectious diseases, vaccines offer top economic and social value, and they also represent the best means for controlling and eliminating dangerous communicable pathogens. Intensified global efforts to step up vaccine research and development are therefore a must, especially for neglected tropical diseases. A central challenge is that in some developed countries, where popular perceptions no longer view infection or epidemics as a serious risk, mindsets will need to change.
CHAIR
Till Bärnighausen
Heidelberg Institute of Global Health | Director | Germany

SPEAKERS
Seth Berkley
Gavi, The Vaccine Alliance | CEO | Switzerland

Steve Davis
PATH | President and CEO | United States of America

Frederik Kristen Ole Kristensen
Coalition for Epidemic Preparedness Innovations (CEPI) | Deputy CEO | Norway

Gayle E. Smith
ONE | President and CEO | United States of America

Lynda Maria Stuart
Bill & Melinda Gates Foundation | Deputy Director | United States of America
What is the issue?
Global healthcare spending has reached an estimated USD 7-8 trillion, a third of which is reported to be “wasted”. The misalignments of incentives, interests, strategies and behaviors of parties engaged in healthcare delivery (i.e. policy makers, regulators, private sector, R&D, providers, suppliers and individuals) are at the core of this inefficiency. Healthcare –in countries where people can benefit from it- is therefore imprecise and inequitable. The misalignments amongst healthcare stakeholders have led to dead ends at the financial (unsustainable costs), human (outcomes far from delivering the expected quality of care) and systemic levels (high degrees of variability between delivery systems).

How can this issue be addressed?
What is known as value-based health care (VBHC) has aimed to redefine how care is organized, measured, and reimbursed. Today, the concept is pushed further with the massive spread of technology, systems and devices allowing for almost real-time evidence-informed strategies and decision-making in healthcare that, in principle, could allow tailoring of care to the needs and differences of each individual and ecosystem.
SPEAKERS

John Amuasi
Kumasi Center for Collaborative Research in tropical Medicine KNUST - Research Group Leader (AG AMUASI)

Ricardo Augustus Guerreiro
Baptista Leite
Catholic University of Portugal | Institute of Health Sciences | Head of Public Health | Portugal
Parliament of Portuguese Republic | Health Committee | Portugal

Jens Grueger
Roche Pharmaceuticals | Vice President, Head of Global Pricing & Market Access | Switzerland

Richard Jansen
Medtronic GmbH | Integrated Health Solutions Europe & Russia | Senior Director | Germany

Gregory Katz
University Paris Descartes | Innovation Management & Healthcare Performance | Chair | France

Nathalie Moll
European Federation of Pharmaceutical Industries and Associations (EFPIA) | Director General | Belgium

CHAIR

Diarmuid Murphy
National University Hospital (NUH) | Chief Value Officer | Singapore
The recent outbreaks of Ebola Virus Disease in Central and West Africa are only the most prominent indications of tragic failures in outbreak detection. They also exemplify the tremendous challenge of managing the response to such outbreaks, given dramatically under resourced health care systems, societal instability and deficient information and transportation infrastructure in many parts of the world.

At the same time, modern digital information technology is becoming increasingly available even in less developed areas and may offer an opportunity to intelligently overcome aforementioned challenges.

In the recent years a large number of initiatives have come up with mobile electronic health tools (mHealth) to address continuous notifiable disease surveillance. Some tools address the response management during an outbreak such as follow-up of contact persons. Only a very small number of tools seem to comprehensively combine continuous surveillance and outbreak response, as proposed by the concept of Integrated Disease Surveillance and Response (IDSР).

With the objective to stimulate technical progress and interoperability in this field, this workshop aims to bring together among the most comprehensive initiatives of digital surveillance and outbreak response management for exchange of concepts and experiences.
CHAIRS

Denise Cardo
Centers for Disease Control and Prevention (CDC) | Health Quality Promotion | Division Director | United States of America

Jay Varma
Africa Centers for Disease Control | Senior Advisor | Ethiopia

SPEAKERS

Evelyn Castle
eHealth Africa | Executive Director & Co-Founder | United States of America

Chikwe Ihekweazu
Nigeria Centre for Disease Control (NCDC) | Chief Executive Officer / National Coordinator | Nigeria

George C. Kauki
Ministry of Health, Community Development, Gender, Elderly and Children | National IDSR Coordinator | Tanzania

Gérard Krause
Helmholtz Centre for Infection Research (HZI) | Department for Epidemiology | Head | Germany

Sonia Panzani
Terre des Hommes Foundation | Health Programme Coordinator Africa | Switzerland

Boris Pavlin
World Health Organization (WHO) | Health Operations Monitoring & Data Collection | Switzerland

David Randolph Wilson
Management Sciences for Health (MSH) | Rwanda Health System Strengthening Activity | Team Leader: Knowledge Management, Data Use and Research | Rwanda
The WHO recently released its updated list of diseases of public health concern. A new addition to that list is “Disease X” which represents “the knowledge that a serious international epidemic could be caused by a pathogen currently unknown to cause human disease”. In January 2018, the World Bank released it’s “Operational framework for strengthening human, animal and environmental public health systems at their interface” report. Recognizing that the majority of emerging infectious diseases have originated in animals, they recommend that it is time to start “targeting disease threats up-stream prevention at the source, or via early detection and response) to help reduce the frequency and impact of emergencies the system has to react to”.

Now that the need to detect public health threats in animal populations prior to spill over into humans has been recognized, the question is, how will this be accomplished?
CHAIR

Tracey McNamara
Western University of Health Sciences | College of Veterinary Medicine | Professor of Pathology | United States of America

SPEAKERS

**Mukesh Chawla**
World Bank | Advisor | United States of America
*Have GHSA investments Gone to the Veterinary Sector?*

**Ruxandra Draghia**
MSD (Merck Sharp & Dohme) | Global Vaccines | Vice President of Public Health and Scientific Affairs | United States of America
*Preparing for Disease X – Lessons Learnt from Recent Epidemic Outbreaks*

**Elizabeth Mumford**
World Health Organization (WHO) | Department of Country Health Emergency Preparedness and IHR | One Health Country Operations Team | Switzerland
*Building Multisectoral, One Health Capacity under the International Health Regulations*

**Elmar Nimmesgern**
Federal Ministry of Education and Research (BMBF) | Head of Global AMR R&D Hub | Germany
*A One Health Approach to Tackle the Spread of AMR in Humans, Animals and the Environment*

**Sophie von Dobschuetz**
Food and Agriculture Organization | Global Surveillance Coordinator | Italy
*FAO’s Surveillance Evaluation Tool (SET); Outcomes of 13 Missions on Assessment of Animal/Zoonotic Disease Surveillance Systems*

**James Wilson**
University of Nevada, Reno | Nevada Medical Intelligence Center | Director | United States of America
*Medical Intelligence Failures – Lessons Learned?*

**Lisa Yon**
University of Nottingham | School of Veterinary Medicine and Science | Lecturer in Zoo and Wildlife Medicine | United Kingdom
*The Status of Wildlife Disease Surveillance in the EU*
Antimicrobial Resistance is rising to dangerously high levels in all parts of the world. New resistance mechanisms are emerging and spreading globally, threatening our ability to treat common infectious diseases. A growing list of infections are becoming harder, and sometimes impossible, to treat as antibiotics become less effective. This crisis is global, reflecting the worldwide overuse of these drugs and the lack of development of new antibiotic agents by pharmaceutical companies to address the challenge. Coordinated efforts to implement new policies, renew research efforts, and pursue steps to manage the crisis have been created over the recent period, but major gaps still remain.
CHAIR

Lothar H. Wieler
Robert Koch Institute | President | Germany

SPEAKERS

Georg Schütte
Federal Ministry of Education and Research (BMBF) | State Secretary | Germany

Thomas B. Cueni
International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) | Director-General | Switzerland

Jeremy Farrar
Wellcome Trust | Director | United Kingdom

Jayasree Iyer
Access to Medicine Foundation | Executive Director | Netherlands

Rolf Müller
Helmholtz Institute for Pharmaceutical Research Saarland (HIPS) | Managing Director and Head of Department of Microbial Natural Products (MINS) | Germany

Georg Schütte
Federal Ministry of Education and Research (BMBF) | State Secretary | Germany

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Access to Medicine Foundation | Executive Director | Netherlands

Rolf Müller
Helmholtz Institute for Pharmaceutical Research Saarland (HIPS) | Managing Director and Head of Department of Microbial Natural Products (MINS) | Germany

Lothar H. Wieler
Robert Koch Institute | President | Germany
Data is now a cornerstone of the healthcare industry. It documents everything from blood pressure readings and surgical records to insurance claims, immunization histories, patient demographics and receipts of payment. But even though Big Data may bridge the gap between healthcare delivery and population health and improve many health outcomes through enhanced methods of research, the detailed collection of personal information poses ethical, regulatory and technical challenges. In addition, much of the promise of Big Data in health care is still awaiting confirmation through evidence from large trials of high quality.

This session will explore the opportunities but also the challenges for Big Data to assist governments and health care providers in delivering maximum benefit to society. Big Data will drive fact-based decisions by policy makers and shape how health systems address societal and global challenges in both developed and developing economies. The increased scope, detail and availability of patient and population data will also influence the broader debate around data governance and the associated ethical issues. Our panelists will discuss technological, commercial, statistical, ethical, practical, as well as policy issues which we encounter when moving from small to Big Data to help clinical practice management, surveillance, health system management, and research and innovation.
CHAIR

Ulrich Dirnagl
Berlin Institute of Health (BIH) | QUEST Center for Transforming Biomedical Research | Founding Director | Germany

SPEAKERS

Roland Eils
Berlin Institute of Health (BIH) | Center for Digital Health | Founding Director | Germany

Bernd Montag
Siemens Healthineers AG | CEO | Germany

Nicola Perrin
Wellcome Trust | Data for Science and Health Priority | Head | United Kingdom

Barbara Prainsack
University Vienna | Comparative Policy Analysis | Professor | Austria

Stephen Senn
Luxembourg Institute of Health | Statistics | Professor | Luxembourg
Humanity is facing grand challenges and pressing needs in health and food. In an ever advancing world of tech innovations an increasing number of people is left behind in poverty, starvation and bad health. Hunger, food and health crisis are global threats with capability to out-balance the world as we know it. This session is about impact pioneers who are creating new answers for food-related health challenges. Their innovations have the power to bring prosperity and opportunity to the raising billions in need.

The session showcases health and food activists from all continents demonstrating how grand challenges can be turned into big opportunities. This is a tribute to those courageous men and women who dare to brave the unknown for the purpose of shaping the future of humanity. They are icons of progress – let them inspire you to become a change maker yourself.

CHAIR

Thimo V. Schmitt-Lord
Bayer Foundations | CEO | Germany
Introduction: Start a Business – Save the World
SPEAKERS

Jeannette Countess Beissel von Gymnich
Jeannette Gräfin Beissel von Gymnich-Foundation | Founder | Germany
Changemakers Inspire Us All to Go Further

Marc Buckley
ANJA GmbH & Co. KG | Founder and CEO | UN SDG Advocate, Food Reformist, Sustainable Farming Futurist | Germany
How the Sustainability Goals Can Love us Back

Social Impact Startups

> **AI SCOPE**
AI Backed Diagnosis in Low Income Regions
Eduardo Peire
Mechanical Engineer

> **CLEARKARMA**
Blockchain Backed Solution for Food Safety
Sylvie Chin
ClearKarma | Founder and CEO

> **COOLAR**
Electricity Free Food and Drug Cooling Systems
Christoph Göller
Coolar | Co-Founder

> **LEONYTE**
Real-Time, Reliable Bacteria Detection System for Food Safety and Health
Facundo Gomez Vera
Leonyte Biosystems | CEO

> **SOS-VILLAGE HOHENROTH**
Model Farm for Mentally Disabled People
Alexander Seith
SOS Model Farm Hohenroth | Divisional Director

> **THRIVING GREEN**
Future Farming with Superfood Spirulina
Alexander Zacharuk
Thriving Green | Founder

> **WORLD FOOD PROGRAMME**
Tech innovations to end hunger
Bettina Luescher
World Food Programme | Chief Spokesperson, Berlin
WORKSHOP

HEALTHCARE SYSTEMS IN LATIN AMERICA
Achieving Health for All

HOSTS
Cluster Médico Jalisco AC
German Healthcare Partnership (GHP)
Joint United Nations Programme on HIV/AIDS (UNAIDS)

In this workshop a broad spectrum of private sector, community, scientific and political representatives will draw on their experiences and discuss progress and obstacles in achieving equitable healthcare in Latin America. The panel-members will examine this on the basis of different healthcare system models in Latin America and will also focus on marginalized populations, who do not have access to healthcare. In this context, specific attention will be given to the role of communities in healthcare provision to ensure access to health for all.
CHAIRS

Roland Göhde
German Healthcare Partnership (GHP) | Chairman of the Board | Germany

Georgina García Martínez
Cluster Médico Jalisco AC | President | Mexico

Michel Sidibé
Joint United Nations Programme on HIV/AIDS (UNAIDS) | Executive Director | Switzerland

SPEAKERS

Verónica Espinosa
Ministry of Health | Minister | Ecuador

Carlos Jiménez
Mexican Association of Innovative Medical Device Industries (AMID) | President | Mexico

Georg Kippels
German Bundestag | Member of the Parliament & Deputy Chairman of the German-Mexican Parliamentary Friendship Group | Germany

Suzanna Tkalec
Caritas Internationalis | Humanitarian Director

Verónica Espinosa
Georgina García Martínez
Roland Göhde
Michel Sidibé
Carlos Jiménez
Suzanna Tkalec
Georg Kippels
To prevent a disease outbreak from turning into an epidemic or even a pandemic which may cause significant social and economic damage, preparedness and an early response is essential. This requires sufficient and timely funding as well as structures which are in a position to respond fast and adequately. Pandemic insurance promises to avoid lengthy humanitarian appeals and make financing available when needed to contain deadly outbreaks. How does pandemic insurance fit into the global financing architecture for pandemic preparedness? How does pandemic insurance work in practice? Is pandemic insurance all it takes to contain major disease outbreaks? And what role does it play from the (re-)insurance industry’s point of view? Would countries be ready to pay insurance premiums to be covered in case of emergency? These questions will be discussed in this session that brings together representatives of WHO, the World Bank, the African Risk Capacity, civil society, reinsurance industry as well as the partner countries.
CHAIR

Peter Piot
London School of Hygiene & Tropical Medicine (LSHTM) | Director & Professor of Global Health | United Kingdom
Member of the German National Academy of Sciences Leopoldina

SPEAKERS

Robert Kwame de Graft Agyarko
African Risk Capacity | Outbreaks and Epidemics | Lead Advisor | South Africa

Timothy Grant Evans
World Bank | Health, Nutrition & Population | Senior Director | United States of America

Marjeta Jager
European Commission | International Cooperation and Development | Deputy Director-General | Belgium

Stanley Okolo
West African Health Organization (WAHO) | Director General | Burkina Faso

Peter Salama
World Health Organization (WHO) | Deputy Director-General of Emergency Preparedness and Response | Switzerland

Paul Stoffels
Johnson & Johnson | Vice Chair of the Executive Committee and Chief Scientific Officer | United States of America
Prevalence rates derived from epidemiological studies confirm that sexual violence against women and children represents a serious global health problem. Research in victims demonstrates marked long-term effects which contribute to health problems.

Against this background the session will address this huge burden in a changing society with new technologies enhancing the risk of sexual traumatization on the one hand and offering new perspectives in combating this on the other.

It will be discussed that sexual violence is promoted by cultural factors oppressing women and enhancing misogynic attitudes. Furthermore, it will highlight the new technologies (internet) for inappropriately contacting minors (e.g. grooming behavior) and distributing child abuse images, as well as promoting cultural conflicts and anti-women attitudes via the worldwide availability of pornographic materials denoting the umbrella of cognitive distortions concerning sexuality.

The workshop will scrutinize the knowledge to devise strategies for using the internet and new technologies themselves for the prevention of sexual violence against children and women.
CHAIR

Klaus Michael Beier
Charité – Universitätsmedizin Berlin | Institute of Sexual Sciences and Sexual Medicine | Director | Germany

SPEAKERS

Avni Amin
World Health Organization | Department of Reproductive Health and Research | Technical Officer, Violence Against Women | Switzerland
Sexual Violence and Global Health

Janavi Doshi
The HEAL Foundation | Primary Prevention of Sexual Violence | Program Director | India
Chances for Reducing Sexual Traumatization via New Technologie

Ateret Gewirtz-Meydan
University of New Hampshire | Crimes against Children Research Center | Postdoctoral Fellow | United States of America
Survivors of Child Sexual Exploitation Imagery

Julia von Weiler
Innocence in Danger e.V. | Director | Germany
The Impact of New Technologies: Risks for Sexual Traumatization
In order to achieve SDG3 and other health-related targets of the 2030 Agenda for Sustainable Development as well as to address Global Health challenges, coordination at all levels - national, regional and international - is imperative. Especially, the intersectoral cooperation and coordination across stakeholder groups is important. At the same time, this cooperation and coordination remains a key challenge.

The objective of this session is to present and discuss different approaches to coordination. The workshop will bring together key stakeholders who share their experiences, lessons learnt and best practices on different coordination measures and mechanisms. Representatives from different countries and civil society will exchange on principles and priority areas of their Global Health engagement, ways of ensuring a coordinated approach across sectors and stakeholder groups.
CHAIR

Ilona Kickbusch
The Graduate Institute of International and Development Studies | Global Health Center | Director | Switzerland

SPEAKERS

Maria Nazareth Farani Azevêdo
Permanent Mission of Brazil to the United Nations in Geneva | Permanent Representative | Brazil
Coordination between BRICS Countries and the Importance of Health Diplomacy

Björn Kümmel
Federal Ministry of Health (BMG) | Division of Global Health | Deputy Head | Germany
Global Health Coordination at the National Level – Experience and Lessons Learnt from Germany

Colin Mciff
U.S. Department of Health and Human Services | Office of Global Affairs | Deputy Director | United States of America
A Coordinated Approach to Global Health – Government Coordination between Capital and Permanent Missions

Maike Röttger
Plan International Germany e.V. | CEO | Germany
Coordination among Civil Society Organizations – Examples and Lessons Learnt

Päivi Sillanaukee
Ministry of Social Affairs and Health | Permanent Secretary | Finland
Coordination among Nordics on Global Health Issues, including within WHO
The Initiative Hospital Partnerships – Partners strengthen Health promotes partnerships between health organizations in Germany and medical institutions in low- and middle-income countries in order to improve healthcare outcomes by enhancing the quality, education and delivery of healthcare worldwide. Professionals such as physicians, nurses, public health specialists, midwives, lab technicians and hospital managers meet on equal terms and share expertise, experiences and ideas to improve healthcare in selected thematic areas. The initiative is funded by the Federal Ministry for Economic Cooperation and Development (BMZ) in cooperation with the Else Kröner-Fresenius-Foundation (EKFS) and aims to support the 2030 Agenda with a particular focus on SDG 3 and SDG 17.

The purpose of this session is to explore effects, outcomes and success factors of these collaborations and to identify key lessons learned from current partnerships in terms of opportunities, challenges, barriers and enablers. Stakeholders and healthcare leaders from high-income and low-income countries reflect on their partnership activities, share potentials, expectations and benefits with the audience but also discuss issues concerning sustainability, contributions to the global health agenda and quality of care.
CHAIR

Oliver Haas
German Society for International Cooperation (GIZ) | Health, Education, and Social Affairs | Head of the Global Division | Germany

SPEAKERS

Michael Madeja
Else-Kröner-Fresenius-Stiftung | CEO | Germany
Introduction & Welcome

Shamsuzzoha Babar Syed
World Health Organization (WHO) | Coordinator | Switzerland
Quality of Care in Twinning Projects

Daniel Burssa
Federal Ministry of Health | Chief of Staff | Ethiopia
Health System Strengthening

Yadeta Dessie
Haramaya University | College of Health and Medical Sciences | Chief Executive Director | Ethiopia
Hospital Partnership Mother and Child Health

Annegret Kiefer
Eichsfeld Hospital | Obstetrics and Gynecology | Chief Physician | Germany
Hospital Partnership Mother and Child Health

Gisela Schneider
Deutsches Institut für ärztliche Mission | Director | Germany
Hospital Partnership Patient Safety, AMR

Augustin Sendegeya
University Teaching Hospital of Butare (CHUB) | Director | Rwanda
Improved Patient Safety

Hans-Peter Baur
Federal Ministry for Economic Cooperation and Development (BMZ) | Principle | Germany
Closing Statement
Modern medicine is not conceivable without effective antibiotic treatment. Curing infectious diseases would hardly be possible without antimicrobial agents. However, overuse and misuse of antibiotics in hospitals and agriculture have substantially increased the spread of antimicrobial resistance (AMR). Alarmingly, the dramatic worldwide rise of multi- and pan-resistant pathogenic strains cannot be contained by the low success rates of current drug development. In fact, only a small fraction of the antibiotics approved over the last 40 years represent novel compound classes. If there is no significant future progress, the World Health Organization considers a “post antibiotic era” a realistic future scenario in which, for example, pneumonia and wound infections once again could become acute life-threatening diseases.

This workshop addresses key problems in modern antibiotic research and development from both academic and industrial perspectives and shall raise public awareness that novel antibiotics are indispensable to sustain our future quality of life. At the same time, pointing out the challenges and unavoidable costs of antibiotic drug development may help to change the political attitude towards stronger investments into sustainable scientific programs for drug development, ideally in partnership with global health organizations and industry. Innovative approaches to strengthen the discovery of novel antibiotics and to bridge the translational gap towards the clinical optimization of new therapeutics will be presented.
CHAIRS

Achim Hörauf
Bonn University Medical Center | Institute of Medical Microbiology, Immunology and Parasitology | Director | Germany

Rolf Müller
Helmholtz Institute for Pharmaceutical Research Saarland (HIPS) | Director | Germany

SPEAKERS

Heike Brötz-Oesterhelt
Eberhard-Karls-University Tübingen | Department of Microbial Bioactive Compounds | Head | Germany
Antibiotic Research & Development in the German Center for Infection Research e.V. (DZIF)

Matthew Cooper
The University of Queensland | Institute for Molecular Bioscience | IMB Centre for Superbug Solutions | Director | Australia
Antibiotic Research & Development from the Academic Perspective

Heinz Moser
Novartis Institutes for BioMedical Research (NIBR) | Infectious Diseases Chemistry | Executive Director | United States of America
Antibiotic Research & Development from the Industrial Perspective

Laura Piddock
Global Antibiotic Research & Development Partnership (GARDP) | Scientific Affairs | Head | Switzerland
Antibiotic Research & Development from the Global Health Perspective
PROGRAM

TUESDAY, OCTOBER 16
The world has never possessed such a sophisticated arsenal of interventions and technologies for curing disease and prolonging life. Yet the gaps in health outcomes continue to widen. For much of the ill health, disease, premature death, and suffering we see on such a large scale, effective and affordable interventions are available for prevention and treatment.

The power of existing interventions is not matched by the capacity of health systems to deliver them to those in greatest need, in a comprehensive way, and on an adequate scale. Smart investments and efficient system development must be the centerpiece of domestic policies and financing.
**CHAIR**

**Adnan A. Hyder**  
Johns Hopkins Bloomberg School of Public Health | Health Systems Program | Professor and Director | United States of America  
The George Washington University | Milken Institute School of Public Health | Senior Associate Dean for Research and Professor of Global Health

**SPEAKERS**

**Diane Gashumba**  
Ministry of Health | Minister of Health | Rwanda

**Steven Hildemann**  
Merck KGaA | Global Medical Affairs and Global Drug Safety | Global Chief Medical Officer | Germany

**Rüdiger Krech**  
World Health Organization (WHO) | Universal Health Coverage & Health Systems | Director | Switzerland

**Sandhya Venkateswaran**  
Bill & Melinda Gates Foundation | Policy & Advocacy | Senior Program Officer | United States of America
The rapid adoption of computers, mobile phones and the internet over the last two decades have transformed the way lives are lived globally. While most cutting-edge innovations in the field of Digitalization are taking place in high-income countries, low and middle-income countries are also undergoing digital transformation albeit to a lesser degree. Going forward, due in part to the continuous decline in the cost of Information and Communication Technology (ICT), the rate of adoption will only keep accelerating allowing for low and middle-income countries to further capitalize on the ICT and Digital revolution.

Across different functions of the health system such as service delivery and resource management, digital tools promise to improve the status quo. This session aims to

- Evaluate the status of digital health development in selected low-middle income countries.
- Analyse successes and determine whether these brought positive changes.
- Explore lessons learnt in the development process.
- Find best practices in stakeholder cooperation to better further the Digital Health agenda.
- Present and adopt the Principles of Donor Alignment for Digital Health
CHAIR

Kelvin Hui
German Society for International Cooperation (GIZ) | Digital Health and Social Protection | Technical Advisor | Cambodia

SPEAKERS

Hans-Jochen Heinze
University of Magdeburg | Department of Behavioral Neurology | Clinic Director | Germany
Tele Medical GmbH | Consultant | Germany

Haitham El-Noush
Norwegian Agency for Development Cooperation | Department for Education and Global Health | Senior Adviser | Norway

Andrew Likaka
Ministry of Health | Quality Management Directorate | Director | Malawi

David Stanton
United States Agency for International Development (USAID) | Bureau Lead for Digital Health | United States of America

Tim Wood
Bill & Melinda Gates Foundation | Global Development | Senior Program Officer | United States of America
Cities can be the critical drivers in achieving global health. Over half the world’s population already live in urban environments and this number is projected to grow to 70% in the next 2–3 decades, with fastest growth in LMICs. While cities generate 70% of the world’s GDP, they also generate 70% of the world’s greenhouse gases and global waste and use over 60% of global energy. Cities can be focal points for improving health within and across national boundaries, but to do so requires a fundamental shift from a dominant global health focus on the prevention and treatment of disease in individuals by strengthening health care systems to increase the emphasis on addressing broader determinants of health. Strategies to improve urban health must recognize that the health of people living in cities is affected by decisions made in all sectors: built and natural environment, economic development, education, and transport and through inclusive models of governance that promote public engagement. This is a major paradigm shift in international development strategy for health reflected in the first ever urban SDG and Habitat’s New Urban Agenda.

This session will set the context for the focus on broader determinants of health and the characteristics of cities that affect the success of health initiatives. Speakers will then present examples of urban health initiatives in the public and private sectors followed by discussion.
CHAIRS

Jo Ivey Boufford
New York Academy of Medicine | President | United States of America

John Finnegan
World Federation of Academic Institutions for Global Health (WFAIGH) | President | United States of America
University of Minnesota | School of Public Health | Dean and Professor | United States of America

SPEAKERS

Ann Aerts
Novartis Foundation | Head | Switzerland
Better Hearts Better Cities: A Multisector Initiative Addressing Hypertension in Low-Income Urban Communities

Nelson Sewankambo
Makerere University Medical School | Former Dean | Uganda
Uganda national Academy of Sciences | President | Uganda
Urbanization in East Africa and the Role of Academies of Science

Mark Nieuwenhuijsen
ISGlobal Barcelona Institute for Global Health | Urban Planning, Environment and Health Initiative | Director | Spain
Urban and Transport Planning: Impacts on Environment and Health

Jo Ivey Boufford
Nelson Sewankambo
John Finnegan
Although life expectancy in most countries has continuously increased over the past decades, the importance of chronic diseases will considerably grow over the next 30 years due to the demographic changes in many countries. Effective strategies for the prevention of chronic diseases require accurate data about the causes of these diseases and about the potential magnitude of decrease in chronic disease occurrence by avoiding major risk factors. Prospective cohorts represent the optimal design for epidemiologic studies on the causes of chronic diseases. Such cohort studies have a long tradition and already provided important information on risk factors for decision making in many areas, such as lifestyle (e.g. smoking), nutrition (e.g. obesity), environmental factors (e.g. air pollution), or medicine (e.g. high blood pressure). Yet, the etiology of many diseases is still not completely understood, and many risk factors are only incompletely characterized. In addition, the rapid advancement of modern high-throughput laboratory techniques and computational developments hold promise for more precise risk characterization in the field of personalized prevention. Over the past years, many countries have therefore supported the implementation of newer, large-scale cohort studies. The current workshop will present and discuss current opportunities and challenges of large population based cohort studies from different angles, including science and policy. This includes discussion of the experience of longer established cohort studies, as well as of expectations from newer large-scale cohort studies.
CHAIRS

Tobias Pischon
Max Delbrück Center for Molecular Medicine (MDC) | Head of Molecular Epidemiology Research Group | Germany

Yik-Ying Teo
National University of Singapore (NUS) | Saw Swee Hock School of Public Health | Dean | Singapore

SPEAKERS

Tobias Pischon
Max Delbrück Center for Molecular Medicine (MDC) | Head of Molecular Epidemiology Research Group | Germany

Introduction

Christoph Lippert
Max Delbrück Center for Molecular Medicine (MDC) | Group Leader Statistical Genomics | Germany
Hasso Plattner Institute | Faculty of Digital Engineering | Researcher | Germany

Machine Learning

Annette Peters
Helmholtz Zentrum München German Research Center for Environmental Health | Institute of Epidemiology | Director | Germany

NAKO Study

Elio Riboli
Imperial College London | Faculty of Medicine | School of Public Health | Chair in Cancer Epidemiology and Prevention | United Kingdom

Research and Public Health Lessons Learnt from the European Prospective Investigation on Cancer

Yik-Ying Teo
National University of Singapore (NUS) | Saw Swee Hock School of Public Health | Dean | Singapore

Singapore Studies

Solomon Iyasu
MSD (Merck Sharp & Dohme) | Center for Observational and Real-World Evidence (CORE) | Vice President and Head of Pharmacoepidemiology | United States of America

DISCUSSANT

Nicola Perrin
Wellcome Trust | Data for Science and Health Priority | Head | United Kingdom
Academic medical centers are primarily tasked with ensuring that regional and national healthcare systems function, both now and in the future, by providing education, research and patient care. At the same time, universities are expected to educate autonomous, open and responsible individuals. As the world is becoming ever more globalized, terms like global citizenship, global impact and global health increasingly find their way into the mission statements and internationalization strategies of universities, including academic medicine. However, operationalizing global health in an institution comes with a number of challenges and questions.

The session analyzes how academic medical centers around the world deal with global health: What are their motivations to become involved? What role do universities play in achieving the Sustainable Development Goals? Given that global health is highly interdisciplinary, how can universities harness the diversity of academic discipline and subject cultures for maximizing their impact? How do they organize and institutionalize global health and how do they finance their global health work? What are the barriers? What do future practitioners expect from global health education and training? How can teaching, research and patient care be effectively linked in the context of global health? What role do North-South or South-South partnerships play, and in what way do they need to be designed in order to ensure that both partners benefit? What opportunities are there to team up with non-university partners in global health? And last but not least, are current approaches suitable to reach their aims?
CHAIR

Michael H. Merson
Duke University | Department of Global Affairs | Vice President and Vice Provost | United States of America

SPEAKERS

Karin Geffert
Global Health Project (GandHI) | Project Lead | Germany
German Medical Students Association (bvmd) | National Public Health Officer | Germany

Charles Ibingira
Makerere University | University College of Health Sciences | Principal | Uganda

Ali Jafarian
Tehran University of Medical Sciences (TUMS) | Professor | Iran

Axel Radlach Pries
Charité - Universitätsmedizin Berlin | Dean | Germany

Asghar Rastegar
Yale University | Office of Global Health | Director | United States of America

Oliver Razum
Bielefeld University | School of Public Health | Dean & Head of Department of Epidemiology & International Public Health | Germany

Michael H. Merson
Duke University | Department of Global Affairs | Vice President and Vice Provost | United States of America
The session will explore the challenges of building vibrant local innovation ecosystems in low-resource settings, and ways that partners from the private and public sectors are tackling those challenges around the world. The session will specifically introduce World Health Summit participants to Grand Challenges and share its approach to helping local innovators secure funding, connect to local and regional innovation networks and catalyze dedicated health and development innovation communities.

Speakers, representing the Grand Challenges global network, will share how Grand Challenges has evolved over the past decade and supports local innovators in their efforts to address local challenges. They will also explore how the Grand Challenges model strengthens the global innovation ecosystem, complements other innovation platforms and is seeking to help address specific, urgent health challenges.

Public sector representatives may also speak to national and regional R&D prioritization processes and the link between these priorities and the Grand Challenges portfolios of work.
CHAIR

Steven Buchsbaum
Bill & Melinda Gates Foundation | Deputy Director | United States of America

SPEAKERS

Steven Buchsbaum
Bill & Melinda Gates Foundation | Deputy Director | United States of America

Raquel Coelho
National Council for Scientific and Technological Development Brazil | Health | Coordinator | Brazil

Thomas Kariuki
Alliance for Accelerating Excellence in Science in Africa (AESA) | Director | Kenya

Shirshendu Mukherjee
Grand Challenges India | Mission Director | India

Karlee Silver
Grand Challenges Canada (GCC) | Programs | Co-Chief Executive Officer (Interim) | Canada
WORKSHOP

ACCESS TO ESSENTIAL MEDICINES

HOST

International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)

The Sustainable Development Goals acknowledge needs to improve the availability of affordable medicines for the world’s poor. Several countries have made substantial progress towards increasing access to essential medicines and treatments to fight HIV/AIDS, malaria and tuberculosis, but access to essential medicines in developing countries is not adequate and new challenges include the access to NCD medicines. Recent progress in a number of countries show that access to essential medicines can be improved through stronger partnership among governments, pharmaceutical companies and civil society, including consumers, working together to ensure universal access to essential medicines.
CHAIR

Greg Perry
International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) | Assistant Director General | Switzerland

SPEAKERS

Jayasree Iyer
Access to Medicine Foundation | Executive Director | Netherlands

Helen McGuire
PATH | Program Leader, Noncommunicable Diseases | United States of America

Frédérique Santerre
Merck Serono SA | Access to Health | Global Head | Switzerland

Subhanu Saxena
Bill & Melinda Gates Foundation | Regional Director Life Science Europe | United States of America

Mariângela Simão
World Health Organization (WHO) | Access to Medicines, Vaccines and Pharmaceuticals | Assistant Director General | Switzerland

Gerald Yonga
East Africa NCD Alliance | Chair | Kenya
**Background**

SDG 3.8 on UHC envisions that by 2030 all people can use the health services they need, of sufficient quality to be effective, and without facing financial hardship. Despite strong international support for UHC, country level implementation remains challenging. Multi-sectoral approaches involving the whole of government and society are key to generate political will for investment in UHC and drive appropriate reforms.

**Aims**

In light of the joint responsibility for UHC, this session bridges the gap between the global UHC agenda and national implementation. It explores what needs to change (challenges) and what needs to be preserved and strengthened (breakthroughs) on the road to UHC.

Health, social protection, finance and governance experts illustrate interdisciplinary perspectives on what their sectors offer to UHC and vice versa. High-, middle- and low income countries exchange and learn from each other’s experience in aligning conflicting interests to strengthen political will and investments for UHC.
CHAIR

Ilona Kickbusch
The Graduate Institute of International and Development Studies | Global Health Center | Director | Switzerland

SPEAKERS

Oladipupo Hameed
Roche Products Ltd. | Gastroenterologist & Former Regional Medical Director | Nigeria

Piya Hanvoravongchai
Chulalongkorn University | Faculty of Medicine | Professor | Equity Initiative: Transformative Leaders for Health Equity | Thailand

Andrew Likaka
Ministry of Health | Quality Management Directorate | Director | Malawi

Sabine Schlacke
University of Münster (WWU) | Institute of Environmental and Planning Law | Professor | Germany
Advisory Council on Global Change | Germany

Amirhossein Takian
Tehran University of Medical Sciences | Department of Global Health & Public Policy | Chair and Professor | Iran
Major environmental disasters are occurring with increasing frequency in high, middle and low income countries around the world. They pose a major challenge for authorities including Environment Protection Agencies and Health Departments. A major responsibility for government is the protection of public health and emergency responders. However, decisions about whether to evacuate populations at risk typically have to be made urgently without good data or complete knowledge of likely health effects. This session will present some case studies of air pollution, chemical and radiation hazards, and long term followup after a terrorist attack or hurricane. There are common lessons about community engagement, risk perception and risk communication. Some guidelines will be proposed for ethical conduct of research with affected communities to better inform responses by authorities to future environmental disasters.
CHAIRS

Michael Abramson
The Alfred Centre – Monash University | Department of Epidemiology and Preventive Medicine | Deputy Head | Australia

Erik Svendsen
Medical University of South Carolina (MUSC) | Public Health Sciences | Professor | United States of America

SPEAKERS

Michael Abramson
The Alfred Centre – Monash University | Department of Epidemiology and Preventive Medicine | Deputy Head | Australia
Long Term Health Effects Following a Fire in an Open Cut Coal Mine

Heidi J. Larson
London School of Hygiene & Tropical Medicine | Department of Infectious Disease Epidemiology | Director of the Vaccine Confidence Project | United Kingdom
Engaging Communities and Building Trust in Times of Uncertainty

Shao Lin
University at Albany | School of Public Health | Environmental Health Sciences | Professor | United States of America
Long Term Follow-up of the World Trade Center and Hurricane Sandy

Erik Svendsen
Medical University of South Carolina (MUSC) | Public Health Sciences | Professor | United States of America
Community Recovery Following a Mass Chlorine Leak

Shunichi Fukuhara
Kyoto University | School of Public Health | Dean Emeritus | Japan
Sequelae of an Earthquake, Tsunami and Nuclear Crisis: 6 Years and a Half after March 11, 2011

DISCUSSANT

Kazuhira Maehara
Fukushima Medical University | Shirakawa Academy for General Medicine | Professor | Japan
It is the overarching aim of this session to deal with the impact of environment, especially climate change, on human health and performance in space and on earth. Emphasis will be given on crosslinks between research topics such as ageing, cardiovascular, thermoregulatory, and psychological adaptations in space and other extreme environments. Furthermore, advanced physiological monitoring and environmental simulation technologies designed for space and now used on earth will be presented. It will be seen that space technology and space medicine are today’s drivers in innovation, helpful for the development of an effective personalized and preventive medicine in future health care.

HOST

German Aerospace Center (DLR)
CHAIR

Jens Jordan
German Aerospace Center (DLR) | Institute of Aerospace Medicine | Director | Germany

SPEAKERS

Daniel Aeschbach
German Aerospace Center | Institute of Aerospace Medicine | Department of Sleep and Human Factors Research | Head | Germany

Hanns-Christian Gunga
Charité – Universitätsmedizin Berlin | Institute for Physiology | Director | Germany

Dietrich Manzey
Technical University of Berlin | Work, Engineering & Organizational Psychology | Head | Germany

Thomas Reiter
European Space Agency | ESA Interagency Coordinator | Germany

Jens Jordan
German Aerospace Center (DLR) | Institute of Aerospace Medicine | Director | Germany
The adoption of the 2030 Agenda for Sustainable Development has spurred opportunities for greater cohesion and maximizing effectiveness and efficiency across a spectrum of different sectors and stakeholders, including those involved in achievement of SDG3 and the health-related targets.

At present there is additional momentum towards greater synergy and cohesion as global health organizations engage in developing an SDG3 Action Plan, led by WHO. This partnership effort in moving the global health agenda forward also requires political engagement and financial support across all stakeholders who can contribute to health.

How can this be achieved? How should governments, civil society, the private sector and academia, in addition to multilateral health organizations, advance multilateral approaches and work together to strengthen global health governance so as to ensure healthy lives and well-being for all?
CHAIR

Bernhard Schwartländer
World Health Organization (WHO) | Chef de Cabinet | Switzerland

SPEAKERS

Trevor Mundel
Bill & Melinda Gates Foundation | Global Health Division | President | United States of America

Caroline T. Roan
Pfizer Inc. | Corporate Responsibility | Vice President | United States of America
Pfizer Foundation | President | United States of America

Peter Sands
The Global Fund to Fight AIDS, Tuberculosis and Malaria | Executive Director | Switzerland

H.E. Toyin Ojora Saraki
Wellbeing Foundation Africa | Founding President | Nigeria

Mariângela Simão
World Health Organization (WHO) | Assistant Director General, Access to Medicines, Vaccines and Pharmaceuticals | Switzerland
A growing, ageing global population will have a profound impact on health spending across the world, predicted to rise to $9.3 trillion by 2018. New technological developments are responding by increasingly blurring the boundaries between the physical, biological and digital worlds. Technology aims to personalize medicine in order to tailor treatments to individual patients based on their genetic makeup. This revolution has the potential to benefit the health of all and increase patient empowerment but it can also lead to new ethical challenges and increase health inequities.

In 2018, with the landmark passage of the World Health Assembly Resolution on “Digital Health” in May, and the call for the WHO Director General to deliver a “Global Strategy on Digital Health” to members states by May 2020, the stakes for advancing a truly global market in Universal Health Coverage (UHC) and the health-related Sustainable Development Goals (SDGs) by 2030 have taken on a new dimension. The next step is ensuring global cooperation and collaboration for the sustainability of innovations, their feasibility, scale-up and inclusivity.
CHAIR
Denis Gilhooly
Commonwealth Centre for Digital Health | Chief Strategy Officer | United Kingdom
Global Digital Health 2030 Innovation Task Force | Founder & CEO

SPEAKERS
Christine Dingivan
Novartis | Portfolio Strategy and Innovation | Global Head | United States of America

Martin Hirsch
Assistance Publique – Hôpitaux de Paris (AP HP) | Director-General | France

Dykki Settle
PATH | Digital Health | Global Program Leader | United States of America

Päivi Sillanaukee
Ministry of Social Affairs and Health | Permanent Secretary | Finland

Despina Spanou
European Commission | Director for Digital Society, Trust and Cybersecurity | Belgium
The ultimate success of the SDGs will be measured by their impact on the prosperity and well-being of people and the planet, particularly the extent to which the SDGs 'leave no one behind'. Initiatives such as the SDG3 Global Action Plan for health and well-being endeavour to build a foundation of greater cohesion among global health actors in support of countries’ achievement of the health-related SDGs. But accelerating the pace of progress will require increased government cooperation at country level as well as enhanced stakeholder engagement across sectors - at global, regional, national and sub-national levels.

This ministerial panel will discuss how best to catalyze political leadership to promote health, keep the world safe and serve the vulnerable as expressed in the shared purpose of WHO. It will explore the impediments and the keys to success for achieving these objectives, and propose how political actors can support a transformative approach to health and development.
**CHAIR**

**Ilona Kickbusch**  
The Graduate Institute of International and Development Studies | Global Health Center | Director | Switzerland

**SPEAKERS**

**Jens Spahn**  
Ministry of Health (BMG) | Minister of Health | Germany

**Gerd Müller**  
Ministry for Economic Cooperation and Development (BMZ) | Minister for Economic Cooperation and Development | Germany

**Jane Ruth Aceng**  
Ministry of Health | Minister of Health | Uganda

**Verónica Espinosa**  
Ministry of Health | Minister | Ecuador

**Tedros Adhanom Ghebreyesus**  
World Health Organization (WHO) | Director-General

**Jane Ruth Aceng**  
Ilona Kickbusch

**Jens Spahn**  
Ilona Kickbusch

**Verónica Espinosa**  
Gerd Müller

**Tedros Adhanom Ghebreyesus**  
Jens Spahn
JOINT KEYNOTE

GRAND CHALLENGES / WORLD HEALTH SUMMIT

@ Estrel Hotel Berlin

HOSTS

Bill & Melinda Gates Foundation
German Federal Ministry of Education and Research (BMBF)
Grand Challenges
Grand Challenges Canada

United States Agency for International Development (USAID)
Wellcome Trust
World Health Summit
SPEAKERS INCLUDE

Angela Merkel
Federal Republic of Germany | Chancellor

Erna Solberg
Norway | Prime Minister

Tedros Adhanom Ghebreyesus
World Health Organization (WHO) | Director-General

Bill Gates
Bill & Melinda Gates Foundation | Co-Chair

Detlev Ganten
World Health Summit | President
GENERAL INFORMATION
HOW TO GET TO THE WORLD HEALTH SUMMIT

Kosmos
Karl-Marx-Allee 131a
10243 Berlin | Germany

A. Alexanderplatz
B. Strausberger Platz
C. Weberwiese
D. Kosmos
E. Frankfurter Tor

2.8 km
35 min.

200 m
2 min.

Map showing directions from Alexanderplatz to Kosmos.
From Tegel Airport (TXL)
Take the bus line “TXL” to “Alexanderplatz” and change to the underground line “U5” in the direction of “Hönow”. Exit at the third stop at “Weberwiese”. The Kosmos will be 300 meter down the road to the east.

**Duration: about 60 minutes**  
**Ticket: “Berlin Tarifgebiet A-B” (€2.80)**

From Schönefeld Airport (SXF)
Take the train “RE7” in the direction of “Hauptbahnhof”, exit at “Alexanderplatz” and change to the underground line “U5” in the direction of “Hönow”. Exit at the third stop at “Weberwiese”. The Kosmos will be 300 meter down the road to the east.

**Duration: about 40 minutes**  
**Ticket: “Berlin Tarifgebiet A-B-C” (€3.40)**

From Berlin, Hauptbahnhof (Mainstation)
Take the train line “S7” in the direction of “Ahrensfelde”, exit at “Alexanderplatz” and change to the underground line “U5” in the direction of “Hönow”. Exit at the third stop at “Weberwiese”. The Kosmos will be 300 meter down the road to the east.

**Duration: about 20 minutes**  
**Ticket: “Berlin Tarifgebiet A-B” (€2.80)**

From Berlin, Alexanderplatz
Take the underground line “U5” in the direction of “Hönow”. Exit at the third stop at “Weberwiese”. The Kosmos will be 300 meter down the road to the east.

**Duration: about 10 minutes**  
**Ticket: “Berlin Tarifgebiet A-B” (€2.80)**

By car
If you arrive by car you can use the underground parking lot right at the venue.

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**Berlin WelcomeCard**
The Berlin WelcomeCard enables free travelling with all public transport services, discounts of at least 25% and up to 50% at around 200 participating partners, and a travel guide with various tour suggestions and insider tips. You can order your ticket at [www.berlin-welcomecard.de/en](http://www.berlin-welcomecard.de/en)
ACCESS TO THE VENUE / SECURITY

To enter the World Health Summit venue participants are required to present a valid identity card / passport or a similar personal identification document (photo included). Please be advised that due to security reasons, all participants will be subject to a security check including a passport identification confirmation. We kindly ask you to refrain from bringing your luggage to the venue, as this will slow down the security check process.

AVAILABILITY

Please note that the capacity of the venue and of single session rooms is limited. If the maximum number of participants is reached, the organizers reserve the right to refuse access.

CLOAKROOM

The cloakroom is located on the left side of the venue and open during the whole event.

COFFEE BREAKS

Refreshments will be served during the coffee breaks.

CURRENCY

The currency used in Berlin is the Euro (€ or EUR). Automated teller machines (ATMs), are located everywhere in Berlin and they accept most main credit cards such as Visa, Mastercard and American Express.

EMERGENCY NUMBERS

Fire: 112
Ambulance: 112
Police: 110

FILMING AND TAKING PICTURES

The organizer will provide a broad spectrum of pictures and other graphical material for the representation of all World Health Summit events. These files will be made available at www.worldhealthsummit.org.

HOMEPAGE

For up-to-date information regarding the World Health Summit, please visit www.worldhealthsummit.org.
INSURANCE AND LIABILITY

The organizers cannot accept liability for personal injury, loss of or damage to belongings of participants, either during or as a result of the World Health Summit. Please check the validity of your own insurance. Attendees are advised to arrange their own adequate travel and medical insurance for medical treatment, accidents, cancellation of bookings etc. No responsibility will be accepted by the World Health Summit organizers.

INTERNET/WIRED LAN

Complimentary Wi-Fi will be available within the venue:
Name: WorldHealthSummit
Password: #WHS2018

LANGUAGE

The official World Health Summit language is English. There will be no simultaneous translation.

LUNCHES

Lunches will be available during the lunch breaks.

MEDIA

Media representatives have access to all official sessions of the World Health Summit. Prior accreditation is required via www.worldhealthsummit.org/media/accreditation

MOBILE PHONES

As a courtesy to speakers and other attendees, we kindly request that all mobile phones and similar devices will be turned to silent mode before entering a session.

NAME BADGE

A badge is required for admittance to all World Health Summit sessions and events. Each participant is asked to present the badge in order to gain access to the venue.

PEOPLE WITH DISABILITIES

The venue is accessible to participants with disabilities. Please contact the Secretariat for assistance: Phone: +49 30 49855031 or contact@worldhealthsummit.org
LOST AND FOUND

Lost items can be collected at the registration desk during the World Health Summit. Any objects found during the event and not claimed will remain at the venue.

LIVE-STREAM / Webcasts

All keynotes and panel discussions will be available as live-stream at www.worldhealthsummit.org

Recorded webcasts will be available online after the event.

PARKING

An underground parking lot right at the venue is available.

PROGRAM CHANGES

The organizers cannot assume liability for any changes in the program due to external or unforeseen circumstances. Please check the website for regular updates. The organizers reserve the right to cancel, postpone, relocate or change any of the sessions.

POSTERS

A poster exhibition will be located at the poster area in front of Saal 7 | Elizabeth Blackwell.

PUBLIC TRANSPORTATION

Berlin’s public transport provides safe and comfortable rides to almost all destinations in the city. Tickets can be purchased directly at most train stations and in all busses.

More information: www.bvg.de

REGISTRATION

The registration desk is open during the following times:

- Sunday, October 14, 2018 09:00 – 22:00
- Monday, October 15, 2018 08:00 – 22:00
- Tuesday, October 16, 2018 08:00 – 18:00

SMOKING POLICY

It is forbidden to smoke in any part of the World Health Summit venue.
**SPEAKER CENTER**

All speakers and presenters must report to the Speaker Center, located on the first floor, opposite of the entrance, at least two hours prior to their presentation in order to check and upload their presentation. Please provide the data on a USB memory stick or a CD-ROM. Please note that you cannot run the presentation from your personal laptop in the session room. Video support is at the sole responsibility of the speaker.

The Speaker Center is open during the following times:

- **Sunday, October 14, 2018** 09:00 – 18:00
- **Monday, October 15, 2018** 08:00 – 18:00
- **Tuesday, October 16, 2018** 08:00 – 17:00

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**TAXIS**

All official taxis are colored off-white with a yellow taxi sign on the roof. The meter starts at a set minimum price.

Major Taxi Hotlines:
- Taxi Berlin +49 30 202020
- Taxi Würzelfunk +49 30 210101
- Taxi Funk +49 30 443322

If there is no taxi available, please ask the registration desk staff for assistance.

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**TRAINING COURSE**

Visiting physicians are accredited 6 points per day by the Berlin Chamber of Physicians. Please refer to the registration desk for further information.
BERLIN HEALTH EXCELLENCE – EXPERTISE AND CUTTING-EDGE MEDICINE MADE IN BERLIN

Berlin’s success as a health capital reflects a 300-year tradition as a healthcare and scientific centre. More than a dozen Nobel Prize winners worked here, including researchers such as Rudolf Virchow and Robert Koch. More than 90 hospitals with about 22,000 beds and with 9,900 doctors on duty, respectively an additional number of 9,200 doctors performing outpatient care make Berlin one of the cities with the highest numbers of doctors in Germany. Patients can thus find medical specialists for every disease. About 17,000 to 21,000 international patients are travelling to Berlin annually in order to undergo medical treatment.

One of Berlin’s most famous medical institutions is the renowned Charité, Europe’s largest university hospital and one of Germany’s leading hospitals. World-renowned scientists of the Charité cooperate closely with recognized research organizations such as the Massachusetts Institute of Technology in Boston. Other famous examples are the German Heart Centre – a top-level hospital for heart and vascular diseases under the leadership of world famous heart surgeon Professor Dr. med. Volkmar Falk – or Vivantes – with its nine clinics and several rehabilitation centres being Germany’s largest hospital group. Many more hospitals and doctor’s surgeries could be mentioned as all of them are offering top-class medical treatment and provide medical experts of all disciplines.

Medical care at the highest level requires a strong collaboration between scientists and practitioners. Berlin is a leading centre of science and research in Europe, especially focusing on medicine. Four universities, the Charité teaching hospital, seven universities of applied sciences and over 30 private universities offer teaching and research facilities for people from all over the world. Germany’s most important research organizations such as the Fraunhofer-Gesellschaft or the Max Planck Society are based in Berlin and successful technology parks like the tech-hub Adlershof or biotech park Campus Berlin-Buch established here.

This environment also makes Berlin a popular destination for international congresses in science and medicine: twenty per cent of the approximately 65,800 meetings, conventions and events held in the first half of 2018 were in the fields of medicine, healthcare and pharmaceuticals. International conferences such as the World Health Summit show that the German capital has been able to consolidate its strong position as a destination for medical events.
Apart from the excellent quality of medicine, the capital of Germany with its green character, several parks and leisure facilities offers many ways to relax or support the patients’ recovery. Guests from abroad are increasingly investing in their health during their stay. It is only in Berlin that visitors can so perfectly combine health consciousness, culture and lifestyle.

Cultural experiences in Berlin are of great variety. From ancient art by the Old Masters to avant-garde design, from classical opera to musicals to pop concerts, Berlin’s cultural calendar leaves nothing to be desired. For all seasons, at all hours and for every taste, Berlin has something to offer – 365 days a year, 24 hours a day. Visitors to the capital can choose from around 1,500 events a day.

Culture and art enthusiasts can also admire new styles and prominent works from all eras every day in Berlin’s over 180 museums and approximately 440 galleries. The city’s best known museums include the five buildings at Museum Island (Museumsinsel), which is in the historic centre. All buildings display valuable artistic treasures from 3,000 years of human history, e.g. the famous bust of Nefertiti in the New Museum, while the New National Gallery and Martin-Gropius-Bau present contemporary art.

Berlin is the world’s only city to have three opera houses: the Berlin State Opera (Berliner Staatsoper), the Deutsche Oper and the Komische Oper. Classical music lovers can choose from a repertoire of famous works, such as Mozart’s Don Giovanni, or new and experimental operas. Apart from these opera houses, the city’s eight large orchestras, including the world famous Berlin Philharmonic conducted by Kirill Petrenko, also make for high-class musical enjoyment.

This autumn’s cultural highlights include two top exhibitions in the Martin-Gropius-Bau: “Gurlitt: Status Report” shows around 250 artworks from the “2012 Munich artworks discovery”, which caused a worldwide sensation. The exhibition not only makes works lost over decades accessible again, but also conveys the history behind each individual artwork. The exhibition “Restless Times. Archaeology in Germany”, on the other hand, presents spectacular archaeological finds in Germany such as the Nebra Sky Disk.

“A Dedication of Love to Life”: the new show “VIVID” at the Friedrichstadt Palast inspires with a spectacular stage design and unusual acrobatics. The extravagant headdress is the work of hat maker Philip Tracey, who has already worked for the Queen, Madonna and Lady Gaga.

For more events, visit www.365-24.berlin
A
Abramson, Michael 129
Aceng, Jane Ruth 137
Adli, Mazda 55
Aerts, Ann 117
Aeschbach, Daniel 131
Agre, Peter 57
Akselrod, Svetlana 61
Albiez, Peter 75
Alladi, Suvarna 69
Alptekin, Ozan 57
Amin, Avni 103
Amuasi, John 87
Arak, Barkin 57
Artlich, Stefan 67
Auler Jr., José Otávio Costa 57
Azevêdo, Maria Nazareth Farani 105

B
Bahl, Rajiv 77
Baptista Leite, Ricardo Augustus Guerreiro 87
Barbi, Elisabetta 45
Barling, Mina 41
Bärnighausen, Till 85
Baur, Hans-Peter 107
Beier, Klaus Michael 103
Beissel von Gymnich, Countess Jeannette 97
Benn, Christoph 81
Berkley, Seth 75, 85
Bilgör, Timucin 57
Blackburn, Elizabeth 71
Boehme, Catharina 47
Boisjoly, Hélène 41
Boufford, Jo Ivey 83, 117
Bourla, Albert 71

C
Cardo, Denise 89
Castle, Evelyn 89
Chawla, Mukesh 91
Cheng, Shou-Hsia 45
Chin, Sylvie 97
Coelho, Raquel 123
Cooper, Matthew 109
Cueni, Thomas B. 93

D
Davis, Steve 85
Degos, Laurent 49
de Graaf Agyarko, Robert Kwame 101
Dessie, Yadeta 107
Dhatt, Roopa 53
Dingivan, Christine 135
Dirmagl, Ulrich 95
Dora, Carlos 55
Doshi, Janavi 103
Doyen, Laurent 59
Dräger, Stefan 77
Draghia, Ruxandra 91
Drosten, Christian 75
Durkin, Mike 65

E
Eils, Roland 95
Einhäupl, Karl Max 69
El-Nooush, Haitham 115
El-Wakil, Marwa 63
Engels, Dirk 81
Espinosa, Verónica 99, 137
Evans, Timothy Grant 101

F
Farrar, Jeremy 63, 93
Fears, Robin 43
Finnegan, John 117
Frei, Ulrich 65
Fukuhara, Shunichi 45, 129

G
Gabriel, Gülsah 79
Ganapathi, Sindura 77
Ganten, Detlev 70, 139
Gashumba, Diane 113
Gates, Bill 139
Geffert, Karin 121
Gerst, Alexander 71
Gewirtz-Meydan, Ateret 103
Ghazizadeh Hashemi, Seyyed Hassan 75
Ghebreyesus, Tedros Adhanom 137, 139
Gilhooly, Denis 135
Göhde, Roland 99
Göller, Christoph 97
Grasselli, Nora Ilona 83
Gruener, Jens 87
Gunga, Hanns-Christian 131

H
Haas, Oliver 107

I
Ibingira, Charles 121
Ihekweazu, Chikwe 89
Ischinger, Wolfgang 75
Iyasu, Solomon 119
Iyer, Jayasree 93, 125

J
Jafarian, Ali 121
Jager, Marjeta 101
Jakab, Zsuzsanna 41
Jansen, Richard 87
Jimenez, Carlos 99
Jocham, Uwe 57
Jones, Monika 67
Jordan, Jens 131

K
Kabaterine, Narcis 81
Kabia, Evelyn 53
Karam, Azza 63
Kariuki, Thomas 123

Hachinski, Vladimir 69
Hacker, Jörg 43
Hameed, Oladipupo 127
Hamelin, Bernard 59
Hanvoravongchai, Piya 127
Hassan, Mohamed H.A. 43, 63
Heinze, Hans-Jochen 115
Hildemann, Steven 113
Hirsch, Martin 135
Hofer, Heribert 79
Hong, Felicia 65
Hörauf, Achim 109
Horváth, Ildikó 49
Hui, Kelvin 115
Hyder, Adnan A. 113
SUPPORTING INSTITUTIONS

T
Takian, Amirhossein 127
Teo, Yik-Ying 119
ter Kuile, Feiko 47
ter Meulen, Volker 43
Thompson, Kelly 53
Tilg, Bernhard 59
Tkalec, Suzanna 99
Torode, Julie S. 51

U
Ulfendahl, Mats 49

V
Varma, Jay 89
Venkateswaran, Sandhya 113
Vera, Facundo Gomez 97
Verschure, Paul 63
Vogler, Sabine 51
von Braun, Joachim 43
von Dobschuetz, Sophie 91
von Weiler, Julia 103

W
Watts, Charlotte 75
Wieler, Lothar H. 93
Willich, Stefan 59
Wilson, David Randolph 89
Wilson, James 91
Wood, Tim 115

Y
Yang, Dazhu 51
Yonga, Gerald 61,125
Yon, Lisa 91

Z
Zacharuk, Alexander 97

A
Association of Research-based Pharmaceutical Companies (vfa) 66,80

B
Bayer Foundations 96
Berlin Institute of Health (BIH) 94
Bill & Melinda Gates Foundation 76,84,122,138

C
Charité - Universitätsmedizin Berlin 54,58,64,68,94,102,118,120
Cluster Médico Jalisco AC 98
Commonwealth Centre for Digital Health 134

E
Eberhard-Karls-University Tübingen 80
ESMT European School of Management and Technology GmbH 82
European and Developing Countries Clinical Trials Partnership (EDCTP) 46
European Commission 48

F
Federal Ministry for Economic Cooperation and Development (BMZ) 100,106,114,126
Fliedner Klinik Berlin 54
Foundation for Innovative New Diagnostics (FIND) 46

G
German Aerospace Center (DLR) 130
German Center for Infection Research e.V. (DZIF) 92,108
German Federal Ministry of Education and Research (BMBF) 78,92,108,138
German Federal Ministry of Health (BMG) 104
German Healthcare Partnership (GHP) 98
German Institute for Defence and Strategic Studies (GIDS) 90
German National Academy of Sciences Leopoldina e.V. 42
German Network against Neglected Tropical Diseases (DNTDs) 80
German Society for International Cooperation (GIZ) 114
German Society for Tropical Medicine and International Health (DTG) 80
Global Digital Health 2030 Innovation Task Force 134
Global Health Security Alliance 90
<table>
<thead>
<tr>
<th>Institution</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Challenges</td>
<td>76, 122, 138</td>
</tr>
<tr>
<td>Grand Challenges Canada</td>
<td>138</td>
</tr>
<tr>
<td>Heidelberg Institute of Global Health</td>
<td>84</td>
</tr>
<tr>
<td>Helmholtz Centre for Infection Research (HZI)</td>
<td>88, 108</td>
</tr>
<tr>
<td>Imperial College London</td>
<td>64</td>
</tr>
<tr>
<td>InterAcademy Partnership (IAP)</td>
<td>42, 62, 82, 116</td>
</tr>
<tr>
<td>International Federation of Pharmaceutical Manufacturers &amp; Associations (IFPMA)</td>
<td>124</td>
</tr>
<tr>
<td>International Partnership on Religion and Sustainable Development (PaRD)</td>
<td>62</td>
</tr>
<tr>
<td>International Prevention Research Institute (iPRI)</td>
<td>50</td>
</tr>
<tr>
<td>International Society for Urban Health (ISUH)</td>
<td>116</td>
</tr>
<tr>
<td>Johns Hopkins Bloomberg School of Public Health</td>
<td>112</td>
</tr>
<tr>
<td>Joint United Nations Programme on HIV/AIDS (UNAIDS)</td>
<td>98</td>
</tr>
<tr>
<td>KfW Group</td>
<td>100</td>
</tr>
<tr>
<td>Kyoto University</td>
<td>44</td>
</tr>
<tr>
<td>Leibniz Association</td>
<td>78</td>
</tr>
<tr>
<td>London School of Hygiene &amp; Tropical Medicine (LSHTM)</td>
<td>128</td>
</tr>
<tr>
<td>M8 Alliance</td>
<td>56, 68, 70, 120</td>
</tr>
<tr>
<td>Makerere University</td>
<td>120</td>
</tr>
<tr>
<td>Max-Delbrück-Centrum für Molekulare Medizin (MDC)</td>
<td>118</td>
</tr>
<tr>
<td>Max Planck Society</td>
<td>44, 46</td>
</tr>
<tr>
<td>Ministry of Economic Affairs Canton of Bern</td>
<td>56</td>
</tr>
<tr>
<td>Monash University</td>
<td>128</td>
</tr>
<tr>
<td>Munich Security Conference (MSC)</td>
<td>74</td>
</tr>
<tr>
<td>National Taiwan University (NTU)</td>
<td>44</td>
</tr>
<tr>
<td>National University of Singapore (NUS)</td>
<td>64, 86</td>
</tr>
<tr>
<td>PATH</td>
<td>84</td>
</tr>
<tr>
<td>Pfizer</td>
<td>50</td>
</tr>
<tr>
<td>Research in Gender Ethics (RinGs)</td>
<td>52</td>
</tr>
<tr>
<td>Robert Koch Institute</td>
<td>92</td>
</tr>
<tr>
<td>Tehran University of Medical Sciences (TUMS)</td>
<td>120</td>
</tr>
<tr>
<td>The Else Kröner-Fresenius Stiftung</td>
<td>106</td>
</tr>
<tr>
<td>The NCD Alliance</td>
<td>60</td>
</tr>
<tr>
<td>United States Agency for International Development (USAID)</td>
<td>138</td>
</tr>
<tr>
<td>Universitätsklinikum Tübingen</td>
<td>80</td>
</tr>
<tr>
<td>University of Montreal</td>
<td>40</td>
</tr>
<tr>
<td>University of Rostock</td>
<td>44</td>
</tr>
<tr>
<td>Wellcome Trust</td>
<td>138</td>
</tr>
<tr>
<td>Women in Global Health</td>
<td>52</td>
</tr>
<tr>
<td>World Dementia Council (WDC)</td>
<td>68</td>
</tr>
<tr>
<td>World Federation of Academic Institutions for Global Health (WFAIGH)</td>
<td>116</td>
</tr>
<tr>
<td>World Health Organization (WHO)</td>
<td>60, 132, 136</td>
</tr>
<tr>
<td>World Health Summit</td>
<td>132, 136, 138</td>
</tr>
<tr>
<td>World Stroke Organization (WSO)</td>
<td>68</td>
</tr>
</tbody>
</table>
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