Enhancing primary health care medicine research creativity in distant practices through online consultancy (personal project)

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GOAL

To enhance primary general health promotion, preventive medicine & epidemiology care research creativity & inventiveness in distant practices of the US & world, through an online training & consulting unit previous to usual substantive general specialties & biostatistics consulting & collaboration cores.

Antecedents

- Ostbye, 1989 gave an e-course in epidemiology/medical statistics & in 1991 created an international PC network for research/teaching in health/epidemiology. Tempus Consortium, 1992 developed the Hungarian public health through PC international collaboration; Parkin & White, 1993 used e-mailing lists for health/epidemiology. LaPorte et al, 1994 gave an impressive global public health e-future.
- Swanson & Smalheiser, 1986-97 created Arrowsmith (Internet interactive-computerized system) to stimulate scientific discovery, formulating hypotheses from PubMed.
- In Havana, this author accessed very controlled email & restricted internet to PubMed, WHO & some health sites, 1998. The GFHR invited him to 3rd Forum, Geneva, meeting Tamashiro, WHO, & attending MedNet, 1999, Heidelberg, invited by Eysenbach, meeting Shortliffe, Laporte & others. He contributed to Varmus' e-Biomed Project and 1998-9 & Grand Challenges in Global Health, 2003-.
- The WHO & medical/health publishers launched HINARI, 2002- expanding worldwide scientific information to health scientists, & easing research/teaching in poor nations.
- The North American Primary Care Research Group (NAPCRG), 2006- supported research on primary general health promotion, preventive medicine & epidemiology care with a consulting-collaboration unit on general specialties & qualitative-quantitative methods.
- The research collaboratory multi-users' platform, 1989- has progressed with the Internet
 for health, medicine & epidemiology tele-research. The CDC, NAPCRG, WHO, UNESCO &
 academy could employ it for online research creativity training-consulting units.

Research Creativity

- epidemiology care research presents a great challenge that is going unnoticed with the accelerated convergent & fragmentation research approaches since 1945. This could be solved increasing creativity & inventiveness of primary care general research with new clinical & health divergent & defragmentation approaches by CDC, NAPCRG, WHO, UNESCO & academy solving the psycho-social & logic-methodological challenges.
- The online training-consulting for primary health care medicine research will require continuing direct research psycho-social & logic-methodological approaches to the whole health problems, as well as to develop re-integrative substantive psycho-social & logic-methodological divergent & defragmentation approaches. At the same time, must be continued the use of the successful convergent & fragmentation approaches in the core phases of the research process that will continue requiring them. If the global health research programs are not faced with these broadest view & multiple tools; then they will continued slow and will stagnated.
- Many of this author's IT personal initiatives were continually rejected by the West Havana Scientific Productive Pole, Ministry of Public Health & Havana University, & at higher governmental instances of Havana, Cuba since 1999.

TODAY

E-Mail
Consulting
Collaboration

Substantive/Factual
Primary Health Care General
Medicine Concepts & Methods

Using Mainly Scientific Convergent & Fragmentation Approaches

NAPCRG

2) Abstract/Formal Qualitative, Quantitative & Statistical Methods

TOMORROW

CDC, NAPCRG, WHO, UNESCO, Academy

On-Line
Training-Consulting
Research Collaboratory
& Tele-Conference

3) Psycho-Social & Logic-Methodological Creativity & Inventiveness

Encouraging Divergent & Defragmentation Approaches

Complexities & Barriers

- A scientific creative thinking & research proof paradox in the psycho-social & logic-methodological fields of health, clinical & epidemiological research invention & discovery sciences was originated since 1946. This contradiction has been supreme for the increasingly convergent & fragmented substantive general fields, specialties & problems of the blooming modern primary health promotion, preventive medicine & epidemiology care research slowing its progress.
- beneficial effects of diagnostic, therapeutic & preventive means, & truth-likeness of epidemics & diseases' causal theories, the primary general health promotion, preventive medicine & epidemiology progress have been slowed until 2011, in relation to the secondary/tertiary care huge amount of results given by biomedical & biotechnological convergent & fragmented research.
- Statistical tests are crucial, but previously to screening & confirmation clinical/population health surveys/ trials, it must be increased critical/creative clinical & health sciences thinking, & the forgotten in depth case-studies, which made classic primary general health promotion, preventive medicine & epidemiology care progress until 1945, with direct scientific approaches of the whole health problems.

- By the other hand, the last 65-years' convergent & fragmentation approaches applied to the substantive primary general health promotion, preventive medicine & epidemiology research have weakened their slow millenarian advances. This has happened because these late very triumphant approaches did not come together with or generate immediately after their explosion of fragmented results, new substantive reintegrative research psycho-social & logic-methodological approaches to primary & even to secondary care general clinical & health areas, fields, specialties & problems.
- Training scientifically the fresh minds of students & general residents, but also of millions of general specialists already working in distant practices of the US & the world, with suitable psycho-social & logic-methodological guidelines is urgently needed. It is required to encourage the detection of much unknown facts & anomalies, classifying & measuring them better, improving descriptions qualitative/quantitatively, explanations & predictions, and innovating & inventing new substantive re-integrative concepts, products, technologies, methods & theories. This will impact positively present & future global clinical & health re-integration programs, & even the differentiation ones too.

Creative Research Unit Proposal

In the training-consulting unit of the CDC, NAPCRG, WHO & UNESCO centers (& universities research branches, maybe into clinical epidemiology or clinical departments or research offices), a complementary first 'Primary Health Care Medicine Research Creativity/Inventiveness Training/Consulting Unit' as pilot project, could be organized. This would foster primary general health promotion, preventive medicine & epidemiology care creative thinking for invention & innovation of divergent, defragmented & re-integrative concrete ideas, conjectures, hypotheses & products, supporting the research activity in general clinical medicine, epidemiology, public health & healthcare management disciplines & research matters, through research collaboratories & tele-conferences web sites with the last IT tools.

Multidisciplinary Team

- Research creativity medical & health psychologist-sociologist
- Research medical & health logician-methodologist
- Research primary health care general clinician-epidemiologist
- Research collaboratory/tele-conference informatics specialist

Multiple Services

- 1. Information & discussion of the psycho-social & logic-methodological complexities & barriers of the direct approach to the whole human problems of primary general health promotion, preventive medicine & epidemiology care research creativity & inventiveness, related to macro socio-environmental systems.
- 2. Information & discussion of the psycho-social & logic-methodological complexities & barriers of the re-integrative, divergent & defragmentation approaches to the analyzed, convergent & fragmented resulting solutions of secondary/tertiary special healthcare of micro bio-systems, applicable on primary general health promotion, preventive medicine & epidemiology care, reconnecting human micro & macro systems.
- 3. Information & discussion of the challenges of global & most general scientific paradigms, problems & research programs needing re-integration & synthesis on primary general health promotion, preventive medicine & epidemiology care.
- 4. Training & debate of new psycho-social & logic-methodological guidelines to encourage primary general health promotion, preventive medicine & epidemiology care research creativity & inventiveness reintegrating human health multi-level fragmented solutions from tertiary, secondary & even primary health community care.
- 5. Concentrate national & world global health scientific ideas, data & creativity clearinghouses, where to search to be able to spark most original research on primary general health promotion, preventive medicine & epidemiology care fields.
- 6. Operationalize the creativity & inventiveness iterative support in the long mental planning period of substantive meditation, previous to the biostatistical-design phase, to be able to design original substantive research case-studies & small screening survey/trial, on primary general health promotion, preventive medicine & epidemiology care research.

PRIMARY HEALTH CARE MAIN CREATIVE RESEARCH TARGETS

7. TO INTEGRATE ALL RESULTS IN A BROADEST & NOVEL E-HR NETWORK

6. TO BOOST A BROADEST GLOBAL LIFE & HEALTH CARE CLASSIFICATION

1. TO ALSO MEASURE W.H.O.
HEALTH MENTAL &
SOCIAL DIMENSIONS

5. TO INVENT WIRELESS VIDEO SENSORS OF ABILITY & WELLNESS VARIABILITY

2. TO CREATE A GLOBAL POSITIVE LIFE & HEALTH CARE CONCEPT

4. TO DEVELOP WIDE SPECTRUM LAB-TEST VIDEO-LIVING-"SOCIOPSIES" 3. TO INVENT A BROADEST HEALTHCARE MAINTENANCE SEMIOLOGY & NOSOLOGY

Main Research Targets

Global Clinical & Health Scientific Areas

- 1. To measure also the mental & social dimensions of the W.H.O. health concept, re-integrated with the then transcended physical dimension, & measuring all of them together from the individual to the nation levels.
- 2. To create the broadest global primary positive life care & positive health care concepts & programs, including all disease programs in use, & evaluating all of them from the individual to the nation levels.
- 3. To invent the broadest lifetime health care maintenance semiology & nosology, causality, principles, methods & technologies, for a novel e-HR network from the individual to the nation levels.

Global Clinical & Health Scientific Areas

- 4. To develop wide spectrum psycho-socioeconomic/moral-cultural labtests "video-living-sociopsies", objective expressions of patients' inner experiences correlated to patho-morpho/physiological living-biopsies.
- 5. To develop wireless video sensors measuring the whole-spectrum of states/transitions from ability & wellness to disability & suffering, & vice-versa, enriching the para-clinical/health tests & methods in use.
- 6. To create a dynamic & comprehensive global life & health preventive concept & classification complementing the static WHO family of ICD & others, defragmenting the narrow health states of individuals & nations.
- 7. To create with last IT a novel broadest & re-integrated concept of e-HR network to be able to monitor & evaluate continuously the individual, family & community levels up to the nation, regional & world levels.

General Clinical & Health Disciplines & Problems

Broadening Primary Care Preventive Medicine Strategies

- Primary Care Preventive Medicine Research
- General Family Preventive Medicine Research
- General Preventive Internal Medicine Research
- General Preventive Obstetrics-Gyn. Research
- General Preventive Pediatrics Research
- General Preventive Geriatrics Research
- General Preventive Exercise & Sport Medicine Research
- General Preventive Nutritional Medicine Research
- Community Preventive Medicine Research
- General Preventive Epidemiology Research
- Preventive Mental & Social Stress Research
- Primary Health Preventive Service Research
- Primary Human Preventive Service Research

- Community Health Promotion Research
- Community Living Promotion Research
- Global Primary Care Preventive Research
- Global Primary Health Promotion Research
- Global Primary Living Promotion Research
- Global Primary Poor Rural Health Research
- Global Primary Slum Health Research
- Global Healthier Villages, Towns & Cities' Research
- Global Healthier Women & Mothers' Research
- Prevention of AIDS & Re-Emerging Diseases' Research
- Prevention of Tobacco, Alcohol, Drug & Other Addictions' Research
- Prevention of Terrorist Groups, States & Networks' Research

Other General Clinical & Health Problems

Promoting Positive Human Pre-Modern to Modern Transitions

- Sedentary & Nutritional Transitions
- Libertarian & Industrial Transitions
- Epidemiologic & Demographic Transitions
- Information & Knowledge Transitions
- Length & Quality of Life Transitions
- Length & Quality of Health Transitions

- Balancing Life Quality, Length & Levels Models
- Balancing Health Quality, Length & Levels Models
- Balanced Living & Health Care Research Models
- Developing a More Balanced Life & Health Model
- Liberty & Equity of Living, Education & Health Care
- Liberty & Equity of Working & Welfare Care
- Information & Equity of Living, Education & Health Care
- Information & Equity of Working & Welfare Care

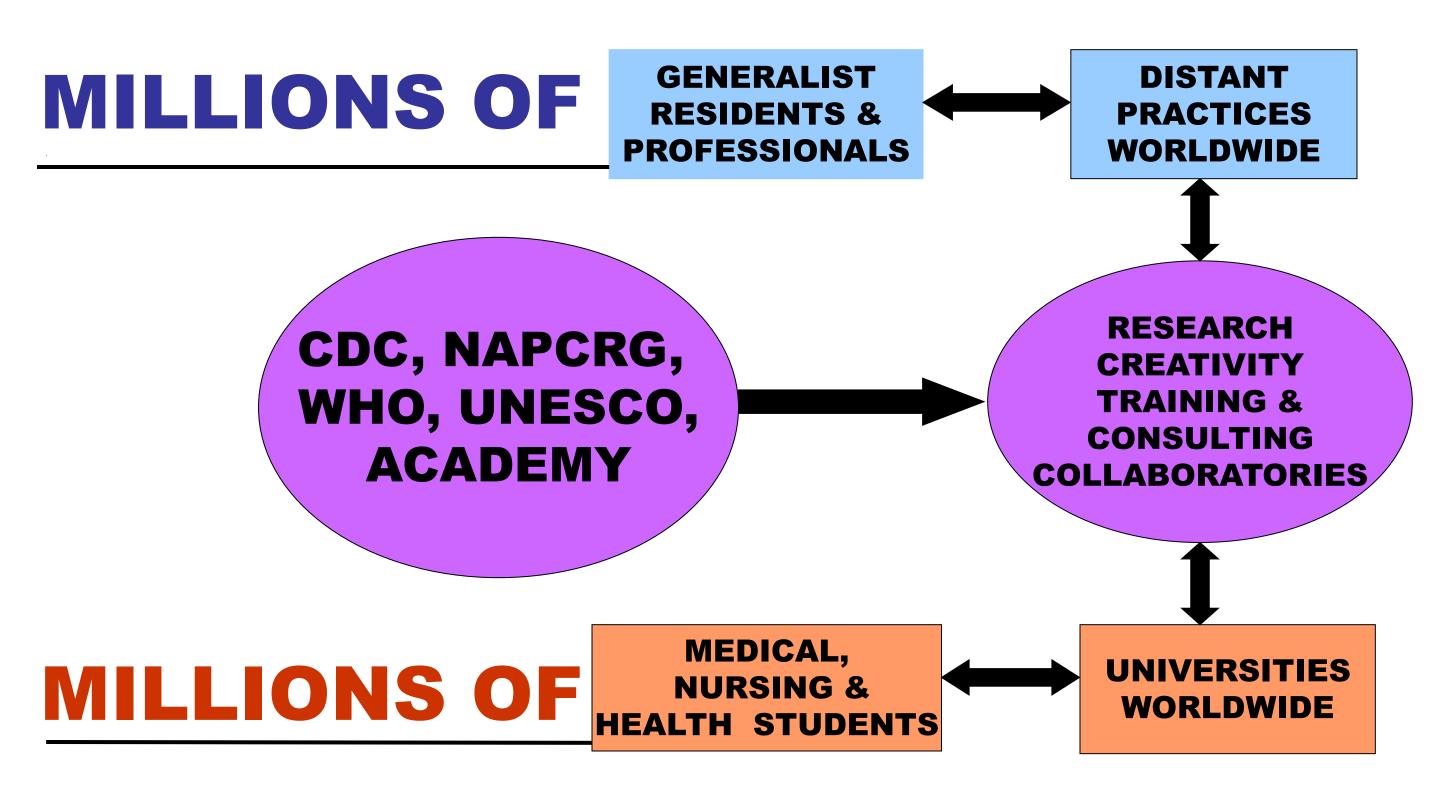
Promoting Positive Health Research on Mental & Social Life

- Positive Health Care Promotion Research
- Positive Living Care Promotion Research
- Human Quality & Length of Health Research
- Human Quality & Levels of Health Research
- Human Length & Quality of Physical Health
- Human Length & Quality of Mental Health
- Human Length & Quality of Social Health
- Human Quality & Length of Life Research
- Human Quality & Levels of Life Research
- Balancing Life Quality, Length & Levels Models
- Balancing Health Quality, Length & Levels Models
- Balanced Living & Health Care Research

Unifying the Health Care Bio & Social Ethics' Research

- Quality of Healthcare Increase without Equalization
- Quality of Healthcare Increase with Stable Costs
- Healthcare R&D Increase without Funds Rising Integrated Preventive, Therapy & Healing Method
- Complementary & Alternative Medicine Research
- Integrating Natural & Modern Medicine Research
- Human Medical & Health Sciences Unified Theory
- Human Bio & Info-Medical Techs Unified Theory
- Fostering a Unified Medical & Health Science
 - Primary Care Medicine Philosophy of Science Problems,
- & many other Targets

ENHANCING PRIMARY HEALTH CARE RESEARCH



Coordination & Funding

- This type of unit would support conceptually & operationally the clinical medicine, epidemiology, public health, and healthcare management departments' research programs & areas of the CDC, NAPCRG, WHO & UNESCO centers, & universities, always in close relation with the biomedical & translational research departments' research programs & research offices. For the MD degree, general resident specialties, MSc/MPH & PhD degrees, the research students, resident physicians & health generalists will have training & consultation in concrete general clinical & health research of new facts, products, bio- & info-technologies, methods, concepts, hypotheses, theories, etc.
- Afterward, the researchers will go to the substantive health promotion, preventive medicine & epidemiological cores, & finally to the biostatistical collaboration & consulting core, in an iterative way, for a smoother practical implementation of the abstract probabilistic auxiliary & statistical hypotheses testing design, analysis, interpretation, presentation & publication of the research evidence & information.
- With the help of this new unit the CDC, NAPCRG, WHO, UNESCO, UNDP & other U.N. Regional & Country Centers, & universities could solve core research challenges on primary health promotion, preventive medicine & epidemiology care, and other key general matters of the broadest fields & specialties.