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Edmilson Jr. Caparelli

Courage, the engine that moves the world

ou will never do anything in this world without courage", once said Aristotle. This thought remains coherent and alive today, precisely because personal determination is one of the biggest engines that boosts the great ideas and memorable deeds.

People like Edward Jenner, Alexander Fleming, Ross Harrison, Maurice Wilkins and Gerty Cori are, without a doubt, influential in global medicine. Their achievements - from discovering the origin of the vaccine to the DNA's helical shape revelation – revolutionized the ways to make and take care of our health all over the world.

What would those people be without fearlessness? Gerty Cori, for example, was born in Prague, in 1896 and grew up in a time when women were marginalized in the science field. However, she persisted in her research until she became the first woman in the world to win a Nobel Prize in Physiology or Medicine for enriching the comprehension about diabetes.

Courage, perseverance and determination. Those are the three nouns that stimulated the great names in world medicine. And it was, precisely those same nouns that encourage us, from Grupo Mídia to expand our role at Medica Fair, giving the 100 Most Influential People in Healthcare - World Edition award.

After several years being a part of the Fair and five years giving the 100 Most Influential People in Healthcare in Brazil award, we faced the challenge and the responsibility of promoting this tribute to the names that highlighted in Healthcare on a global level. After all, as Walt Disney used to say, "All our dreams can come true if we have the courage to pursue them".

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among 39 specialties.

Santa Izabel, the Hospital of Santa Casa da Bahia.



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Summary



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Health Innovation

The Medicine of the Future and the Democratization of Knowledge



Market

SAHE, Brazil's premium trade fair



100 Most influential people in Healthcare-World Edition

The leading figures of Healthcare worldwide



Strategy

Health without frontiers



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MEDICAL

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"Every country has a lesson to teach, and every country has something to learn",

Mark Britnell

uthor of the book "In Search of the Perfect Health System", British Mark Britnell, 51, has vast knowledge of various health systems throughout the world. In his work, Britnell shares health studies from 30 countries, such as Japan, Singapore, Israel, United States, and others.

Global leader of health care practices of KPMG, Britnell also acted as one of the former directors of the British health system (NHS). In his interview for Healthcare Management, the expert talks about the Brazilian Unified Health System (SUS) and the Family Health Program (Programa Saúde Família - PSF), the particulars of a few countries in terms of Health, and also addresses financing models which, he believes, in the future, "higher efficiency can result from mixed payment models to help drive the achievement of specific quality goals"



What is your assessment of SUS? What are its strengths and weaknesses?

Positive features can be pointed out; however, such as in any universal Health system, this model needs to be supported by a transparent and strong economy. I have recently heard the Ministry of Health providing details on important advances in efficiency and technology for the SUS. However, the freezing of the Federal Health budget puts the public sector under enormous pressure. But I believe that, even with the crisis, this should not weaken the system, since it has been an inspiration for many countries since its introduction in the Constitution of 1988. I notice that a poor health system results in more costs for the country's economy. Comparing the Brazilian System worldwide, Brazil spends about 10% of its GDP in Health, but their performance, life quality and expectancy could be much better. Differently from the United States, who spends 18% of the GDP in a limited system. It is important to note that a good national health system results in riches for the country. In the work we are performing globally, it is estimated that for every US\$1.00 spend in Health, US\$4.00 are generated in economy, due to the high value of the entire Health supply chain.

the care of an increasingly elder population. Elder prevention programs are highly recognized, with increased physical activities and knowledge on Health. The best form of prevention consists in promoting active and healthy aging, with participation of these citizens in the social, cultural and economic life in their community.

You have emphasized many times the importance of the Family Health Program in Brazil. What is your view about this program?

I have mentioned the Family Health Program (Programa Saúde Família - PSF) in my book as one of the top 11 examples in Health. It is key for the system and its efforts to reach poor and secluded communities have received a lot of praise. As in many countries, Brazil lacks sufficient doctors and nurses throughout its territory, but the primary care services offered by the PSF seek to address such deficiency. Providing care to the families, as well as to the entire community, ends up promoting Health and this is why PSF has been an inspiration for many developing countries in the world, especially in Africa and Asia.

How do you analyze the importance of investing in preventive medicine? Which country can be used as a role model in this practice?

The quality and impact of a few Brazilian health programs are admired internationally. However, Brazil can learn from many other countries, such as Israel's primary care, with partnerships between operators and providers to promote healthy living. In the sense of promoting Health, countries such as Denmark, Finland, Iceland, Norway and Sweden are the most remarkable, with great performance in addressing behavioral risk factors, such as smoking and obesity. Internationally, prevention generates efficiency in

In your opinion, what is the best Health system in the world? Why:

As I wrote in my book "In Search of the Perfect Health System", there is no such thing as a perfect Health system, but every country has a lesson to teach and every country has something to learn. Based on my work experience in 69 countries, in more than 250 occasions, I wrote the strengths and weaknesses of 30 countries so that politicians, health professionals, patients and the public could understand that each country is facing pressure with its health services, and that Brazil is not an isolated case.

Still, is it possible to point out a few particulars?

Despite stating that no country may be awarded for having the best system in the world, I have traced 12 systems with high performance, with which all countries can learn. They are as follows:

- United Kingdom's Universal system This is the first universal health system, which is a model of safety, efficiency, cost and effectiveness in patient--centered care.
- Israel's primary care The country's primary care is deemed excellent, with quick access. On line appointments are frequent and all patients have electronic registration.
- Community services in Brazil PSF has already achieved reduction in mortality rates and hospitalization due to chronic illnesses.
- Mental Health and well-being in Australia Since 1992, successive Australian governments funded and supported the country's National Mental Health Strategy, which promotes a more progressive approach concerning traditional hospitalization. The country provides wide access to psychological services and quick interventions in psychiatric crisis and meltdowns. It is a successful model in the transition from the old model of mental institutions to the care of the patient still within the community.
- Health promotion in Nordic countries Public and private sectors adopt health promotion policies, such as anti-smoking, alcohol consumption, obesity and sedentarism prevention programs.
- Patient and community empowerment in parts of Africa - Sub-Saharan African countries have trained patients to be partners and communities to act as care providers.
- Research and Development in the USA In addition to proposing new business and health care models, the United States are distinguished for their high public and private investments in medical research (basic science, diagnosis and therapies).
- Innovation, talent and speed in India Distinguished for quick responses for complex problems. An example of this is the hospitals' standardized care, which optimizes the use of labor. India also manufactures medical devices when suppliers don't lower their prices.
- Information, communication and technology in Singapore - the health services records are electro-

- nically integrated, which enables extensive clinical, financial and operational assessment of the system. Patients can also access their medical records.
- Health Choice in France The patient's choice is a singularity of the French health system, where the citizens are free to consult any doctor or go to any hospital of their choice. No reference to experts is necessary. Patients pay for the services and then are reimbursed through a medical record credit card.
- Health financing in Switzerland Medical care expenses represent 11.5% of the country's total GDP, which makes it the second most expensive health system in the world. Switzerland's investment in its citizens and a good environment for innovation enable a strong economy. As a result, the Swiss people is the happiest, most healthy and educated in the planet.
- Aging care in Japan In 2000, Japan started to demand a long-term care insurance for 65-year-olds, providing home care, gyms, day-centers and residential centers aimed at various profiles.

In Brazil, there is a wide debate about the payment model which today is mostly through fee-for--service. However, the industry has debated a lot about the DRG. What is your opinion on this?

The impulse to reform the payment model often arises from the need to control the costs, and, in a system in which the Federal budget is frozen, this can accelerate the change. Fee-for-service models reward the volume in detriment of quality, providing little incentive for investment in innovation. However, a DRG-based payment system is administratively and technically more complex to deliver and cannot improve costs and quality of care on its own. For an average-income country wishing to apply the DRG model, it is important to carefully consider the implementation, with pilot-systems and expense limits and proper local adaptation from any DRG-based imported group. Globally, DRG has become the most common way to reimburse hospital for acute hospital care; but, in the future, higher efficiency can result from mixed payment models to help stimulate the achievement of specific quality goals.



There are interviews in which you give a lot of emphasis to the Singapore model. What can we learn from this country?

Globally, Singapore has one of the best universal health systems, with high life expectancy and low child mortality, despite spending only 4.6% of its GDP in Health. This is achieved by balancing individual rights and social accountability, reinforced by the government's capacity to plan for the long term and to exploit technology, including the development of a national electronic health registration program. These are areas from which many systems could learn, although the country still have issues to be solved, including inequality in health care and the need for better integration of individual hospital services. But the country's reputation in terms of innovation is coveted.

How is it possible to conciliate hight technology and quality with low cost?

There are increasingly more examples of high technology guiding quality to low cost. I have recently visited Israel, and they are making a better use of the technology, including artificial intelligence to predict when the patients will get sick. The country is also investing in technology to provide faster, more accessible and less expensive medical records and telephone appointments for the patients. Clalit, the main health maintenance non-profit organization in Israel, has more than 70% of its 4.2 million members accessing their electronic health records on line. Real-time patient data sharing includes medical records of primary and secondary care, data from joint health services, records of diseases, pharmacy and medication data, results from diagnosis and social and demographic images and data. This profound integration is a powerful tool to improve the quality of the care and a real-time benchmarking of the health system's quality, access, patient experience and costs. The issue now faced by care providers is less about how health technology and quality can function with low cost and more about how to make use of this and successfully implement the change.

How do you assess the importance of aging care?

Nearly all countries are experiencing population aging, and few of them - such as Japan, Holland and Singapore - are starting to take the necessary measures. Statistics speak for themselves. With the aging of the population, the number of people with dementia will go from 44 million today to 135 million in 2050. Dealing with this and other needs will be a significant global challenge. In my book, I listed some of the best practices I've seen in terms of care for this population. One of them is the community acting as caretakers, and Japan is doing a wonderful job with its Community-Based Integrated Care System. They provide services such as well-being, health care, long-term care and preventive measures within the existing communities.

How do you assess the public-private partnerships in Health development?

Private health care needs to transition to a more cooperative and transparent relationship that will benefit the patients and the entire system. The public and private health sectors in Brazil seem to be currently heading in different directions, and this is not good for the country, for its social cohesion and efficiency. In many average-income countries, there are successful examples of public-private partnerships. This involves new joint medical schools, new care centers, public patients treated in private facilities at nationally or regionally determined prices, and so on. In my book, I argue about how the private health market in Brazil is currently too large to be seen merely as a parallel system, and this relationship needs to be redefined, as the next development stage of the Brazilian system.







SAHE INFRASTRUCTURE FORUM IN THE HEALTH ENVIRONMENT

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Providing patients with access to qualified knowledge is the greatest bet for the currently ongoing change in the industry. Demands such as high-quality care and equity in decision-making between the patient and the physician are the new paths arising in the Health industry.

woman fells strong headaches and decides to seek care in a hospital. Instead of only testing her to discard a potential neurological dysfunction, physician performs genetic mapping. The result shows that the patient has 80% chance to develop breast cancer in a few years. This is what many experts and researchers expect for the future of medicine.

Our relationship with health is changing, and this is a fact. Robots, smart phone apps and increased mastery in genetics are set to make a revolution in diagnosis, treatments and the way we take care of the population's health and illnesses. This context drives the discussion regarding 4P Medicine.

According to Jeane Tsutsui, Medical, Technical and R&D Chief Executive Officer of Grupo Fleury, this concept concerns the association of a more customized, predictive, preventive and participative medical practice. "This model is capable of predicting potential events and informing the patient so he or she can increasingly take better care of his or her own health".

Lilian Hoffmann, IT executive officer of the hospital Beneficência Portuguesa de São Paulo, adds that this future medicine will be not only predictive, but also based on algorithms and units. "It will be less aggressive for the individual. Resources will allow us to perform less invasive surgeries". However, Hoffman points out that this model will demand patient empowerment, which will be the decision-maker and the expert



IT IS WORTH EMPHASIZING THE GREAT RESPONSIBILITY TRANSFERRED TO THE CITIZENS, NOT ONLY AS PATIENTS, BUT IN TERMS OF KNOWING HOW IMPORTANT IT IS TO MANAGE THEIR OWN HEALTH."

> Carlos Goulart. Chief Executive Officer of ABIMED.



TODAY, COMPANIES ARE **INVESTING IN GENOME** ASSESSMENT TECHNOLOGIES. THESE INSTITUTIONS ARE PROVIDING A SERIES OF TESTS WHICH USED TO BE EXPENSSIVE."

Jeane Tsutsui, Medical, Technical and R&D Chief Executive Officer of Grupo Fleury.

regarding his or her health. "This will be one of the greatest challenges of this medicine of the future."

Carlos Goulart, chief executive officer of ABIMED -Associação Brasileira da Indústria de Alta Tecnologia de Produtos para Saúde (Brazilian Association of High-Tech Industry of Health Care Products) also points out that the health care system is undergoing a large disruptive change, of which the technological evolution is the vehicle. "It is worth emphasizing the great responsibility transferred to the citizens, not only as patients, but in terms of knowing how important it is to manage their own health. Thus, they will also significantly contribute to the sustainability of the industry".

"Additionally, in case of genetic illnesses, the genetic diagnosis also allows to identify couples who are 'at risk' of having their children affected", explains Mayana Zatz, professor of Genetics and coordinator of the Human Genome and Stem Cells Research Center of the Institute of Bioscience of the University of São Paulo.

Showing a promising horizon, 4P Medicine has raised interest in technological advances. "Today, companies are investing in genome assessment technologies. These institutions are providing a series of tests which used to be expensive", says Tsutsui.

Currently, genetic advisory is mostly used in Oncology. "The health community is noticing the benefits of this type of approach, which is expanding its use and, thus,

may reduce the cost in the health care chain. Spending money in testing may, for instance, reduce expenses with chemotherapy, which, depending on the test result, may not be necessary", highlights Tsutsui.

Accessibility

Cost is one of the main obstacles to promote access to customized medicine in Brazil. However, according to Gonzalo Vecina Neto, Assistant Professor of Public Health of USP and president of the Institute of Support for the Development of SUS (Unified Health System) (AID-SUS), this reality extends to a global level.

The professor believes that in the field of diagnosis, for instance, there must be about 200 possibilities, of which many are still expensive, indicative and not definitive. "Their prices should decrease, as better scales arise." He also states that few of these solutions are offered by the Unified Health System (Sistema Único de Saúde - SUS).

"Unfortunately, genetic tests are not covered by SUS. They remain a utopia for those who can't afford private health insurance. I believe this is due to the lack of vision by the managers", Mayana Zatz adds.

For Nicolas Toth, president of Healthways, both private and public health face similar issues, although in different levels of costs and quality. "In both cases, costs increase in a proportion much higher than inflation. There is difficulty in access, lack of adhesion to treatments by the



CUNFORTUNATELY, GENETIC TESTS ARE NOT COVERED BY SUS. THEY REMAIN AN UTOPIA FOR THOSE WHO CAN'T AFFORD PRIVATE HEALTH INSURANCE, I BELIEVE THIS IS DUE TO THE LACK OF VISION BY THE MANAGERS."

Mayana Zatz, professor of Genetics and coordinator of the Human Genome and Stem Cells Research Center of the Institute of Bioscience of the University of São Paulo.

patients and lack of integration between the systems."

Eliézer Silva, officer of Diagnostic and Ambulatory Medicine of the Sociedade Beneficente Israelita Brasileira Albert Einstein, thinks that although this model is present in Brazil, the country still has a health care system that works heterogeneously, in which only a few centers can be compared to the best in the world in terms of quality of the services provided.

"When analyzing why the genetic services in medicine don't exist in a larger scale, we may point out structural difficulties impacting the quality of the medical care, such as medical education, since the entire innovation field needs critical mass for its correct implementation. The system financing also limits the implementation of good practices in all sectors", Silva analyzes.

However, according to Healthways' president, as a customized health care management arises, the effectiveness will be higher and will have the most indicated intervention within the proper time, resulting in better cost-benefit relationship. "The entire data volume and developing technology enables a much broader view of the individual, which will reflect in assertive treatment and, consequently, in health costs."



WHEN ANALYZING WHY THE GENETIC SERVICES IN MEDICINE DON'T EXIST IN A LARGER SCALE, WE MAY POINT OUT STRUCTURAL DIFFICULTIES IMPACTING THE OUALITY OF THE MEDICAL CARE, SUCH AS MEDICAL EDUCATION."

Eliézer Silva. Officer of Diagnostic and Ambulatory Medicine of the Albert Einstein Hospital.

HEALTH INNOVATION



INSTEAD OF A MEDICINE CONTAINING 5 TO 10 MG, THERE WILL BE INDIVIDUALIZED AMOUNTS, SUCH AS 6.5 MG OR 7.2 MG, WHICH WILL GENERATE HIGHER EFFECTIVENESS OF THE TREATMENT AND REDUCE SIDE EFFECTS."



Nicolas Toth, president of Healthways.

Customized medication

According to Nicolas Toth, president of Healthways, based on individual genetic characteristics and capacity of absorption of substances, it will be possible, for instance, to assess specific forms of medication for each person, that is, individualized treatment. "Instead of a medicine containing 5 to 10 mg, there will be individualized amounts, such as 6.5 mg or 7.2 mg, which will generate higher effectiveness of the treatment and reduce side effects."

"This is already a reality, but not in large scale. In the future, we will no longer have the same drug for everyone. From the commercial point of view, specific drugs will be produced for each individual, according to his or her genome and the environment", Lilian Hoffmann adds.

In this sense, José Eduardo Krieger, Research Dean in the University of São Paulo (USP) and professor of Molecular Cardiology and Genetics of FMUSP, believes that the pharmaceutical industry of the future will probably differ from today's model.

In Krieger's view, there are currently two divergent pharmaceutical industries in the market: the ones developing the drugs and the ones investing in diagnosis. "In the future, we may have a company mixing the two, since the medication will not be marketed for millions, but for hundreds of people, with certain genetic profiles."

It will be necessary to have the diagnosis in addition to the drug", he ponders.

In contrast, Vecina Neto estimates that "given how the industries are behaving, it seems they found the pot of gold at the end of the rainbow. Producing medication in small scale for rare diseases, at prices which are not at all related to cost, but only to profit."

Neto also defends that no economy in the world will be able to survive with such a model. "The problem today is that we are looking through a a fissure into the future, and failing to see the whole picture, let alone the mobilization of all forces of the society towards defending a social organization model that will have to be reconsidered."

Mined field

Customized medicine is fascinating for the sciencerelated industry. The works in this field resulted in a series of recent breakthroughs concerning genetic counseling. Although such advances are reason for a lot of excitement among the Health community, this new model presents many bottlenecks, from financing issues to ethical and legal challenges.

"It is a very recent field and the committees need to learn how to handle technological advances using common sense. We have to prevent a regulatory rage", states Mayana Zatz, coordinator of the Human Genome and Stem Cells Research Center of the Institute of Bioscience of the University of São Paulo.

The professor thinks there are no ethical dilemmas regarding genome research, but gridlocks for the usage of information. Regulatory concerns mainly include the preservation of identity and data. "Shall we inform when we discover, by chance, a mutation which is not related to the patient's complaint? Or should we inform only if it can be treated?", ponders Zatz. "For many situations, there is no legislation; therefore, we must always seek what is best for the patient or research subject."

In this sense, Krieger points out that these are a few issues which the ethics committees must address. "The legal system needs to get used to this reality. The problem is that technological development often surpasses regulatory mechanisms."

"It will be important to discuss matters regarding the 'privacy' of our genome. Who will have access to our genome's data? Certainly, health care insurance companies or our employers will be interested in knowing if we have mutations responsible for degenerative and high-cost diseases", Zatz points out.

Additionally to such legal challenges, another element slowing the growth of this area in the country is the lack of political and economic incentive in research. "Unfortunately, research in Brazil is going through a severe cut in resources. There is little investment and we are losing great minds. The technological advances in the developed world are quick and we are at risk of 'losing the caravan", Zatz emphasizes.

As much as the country is conducting research aimed at the medicine of the future, Krieger believes we can enhance our participation even more. The professor thinks the economy needs to open up and the interfaces between the productive system and the generation of research and development must intensify. "We are amongst the ten largest economies in the world and our performance in this field is not compatible with our country's economic size and needs."



GIVEN HOW THE INDUSTRIES ARE BEHAVING, IT SEEMS THEY FOUND THE POT OF GOLD AT THE END OF THE RAINBOW. PRODUCING MEDICATION IN SMALL SCALE FOR RARE DISEASES. AT PRICES WHICH ARE NOT AT ALL RELATED TO COST, BUT ONLY TO PROFIT."

> Gonzalo Vecina Neto. professor of Public Health of USP.

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Eduardo Krieger, Research Dean in the University of São Paulo (USP) and professor of Molecular Cardiology and Genetics of FMUSP.



Hospital of the future

Since we are talking about the medicine of the future, how will the hospital of the future look like? For Lilian Hoffmann, of the hospital Beneficência Portuguesa de São Paulo, technological innovation is helping the country to achieve, increasingly faster, this coveted model.

"We are capturing a lot of information, creating a universe of data within our medical charts. And the hospital of the future will be where these data shall be effectively used, not only to document the patient's care, but to ensure its continuity. Differently from the past, in which the implementation of a process was more gradual, I assume we will live in faster times and quickly achieve this hospital of the future", argues the executive.

In this sense, Nicolas Toth, president of Healthways, points out that the entire data volume and developing technology enables a much broader view of the individual, which will reflect in a more assertive treatment and, consequently, in the health costs.

"There are major fields of performance in public and private Health management which undergo structure adjustment to the more relevant demands, as well as the incorporation of technologies enabling access to a lower cost, associated to improved quality of the health care

Cognitive technology for Health

According to Miguel Aguiar Netto, IBM Brazil chief health officer, cognitive medicine is a reality in many countries in the world. "This technology is bringing vast knowledge to the health sector. It will enable us to be more precise in the patient treatment. I believe it will be responsible for the democratization of information."

One of the cognitive platforms already present in the Brazilian market is IBM's solution Watson for Oncology. According to Netto, this software assists in Oncology's clinical decision-making. "The physician enters the clinical characteristics of the patient and the solution associates the date to certain protocols With this, the health professional can search each treatment option, find out why certain option is being considered, as well as other information. From that the doctor decides", he explains.

Netto has an optimistic view of the medicine of the future. "The industry is concerned in presenting the best for the patient. I take kindly to this movement of creating a safety medicine, focusing our efforts on the patient. We can only profit from this."



process, including prevention and sharing information with the patients", adds Eliézer Silva, from the Albert Einstein Hospital.

Hoffmann believes that technology is only one of the pillars needed to achieve the hospital of the future. According to her, it will also be necessary to review the current business model which "needs to consider the patient's health, not only the disease."

Another aspect highlighted by the executive is the cultural factor, which involves the professionals who will handle this technology, the institution and the patients. "Through empowerment, patients can participate in their own health. We need to understand technology as an ally. If we have artificial intelligence, patient empowerment and preventive medicine, we will achieve what we refer as the hospital of the future."

However, as in with the medicine, the hospital of the future also needs to face cost as one of the main obstacles. But, in addition to this challenge, Hoffmann brings to light the issue of interoperability. "This involves expense and working with application suppliers. This shall be solved for our hospital of the future", she says.

IN THE FUTURE, WE WILL NO LONGER HAVE THE SAME DRUG FOR EVERYONE. FROM THE COMMERCIAL POINT OF VIEW, SPECIFIC DRUGS WILL BE PRODUCED FOR EACH INDIVIDUAL, ACCORDING TO HIS OR HER GENOME AND THE ENVIRONMENT".

> Lilian Hoffmann, Lilian Hoffmann, IT executive officer of the BP.

SAHE, Brazil's premium trade fair

In 2018, the trade fair brings a unique and innovative experience in business-making and knowledge-sharing to exhibitors and visitors



AHE - South America Health Exhibition is a trade fair aimed at the health industry. The first edition was held this year, in São Paulo. The purpose is to provide a business environment to bring together the players in the industry and to promote a closer relationship, as a premium fair.

This compact trade fair provides a calm and objective visitor's experience. The goal is to offer an event where the market leaders can meet: managers, influencers, health professionals and investors.

As of September of this year, Grupo Mídia took over control of 100% of the fair, shortly after purchasing 50% of the fair. This is a bold initiative, which will enable leveraging growth and visibility of the SAHE fair, since Grupo Mídia is a reference in content production and advertising in the industry, as well as in events.

"The fair will bring innovation, always focused on providing better services to exhibitors and visitors, becoming a reference for all Health players and decision-makers, both in Brazil and in South America", says Edmilson Jr. Caparelli, CEO of Grupo Mídia and SAHE. "But all of the innovation and change that SAHE will bring will maintain its main characteristic: a premium event, where the main leaders and authorities of the Health industry in Brazil and the world meet", he adds.

The second edition of SAHE will occur from March 13 to 15, in São Paulo, at the Pro Magno Events Center. Close to a subway station and to the main airports in the city, the space is strategically located for the visitors to have easy access to the fair. Additionally, the space also provides cutting-edge technology, air-conditioning, various parking lots, food courts and Wi-Fi.







Cutting-edge contents

For this selected audience, during SAHE 2018 Grupo Mídia will hold congresses with distinguished contents, organized by specialized committees, bringing the most renowned speakers of the industry from Brazil and the world, since knowledge diffusion is GM's DNA.

The Scientific Committee of the Health Environment Infrastructure Forum is one of the main groups. The committee is leaded by Salim Lamha, founding member of MHA Engenharia, one of the largest Brazilian engineering and construction work management companies, with a significant presence in renowned hospitals in Latin America, such as in the Hospital Israelita Albert Einstein.

"Our goal is to bring the expectations and wishes of the industry to the forum. We will address matters such as medical technology dynamics, evolution of equipment and procedures, all under the perspective of infrastructure. This scientific committee is being formed with cutting-edge hospitals, both from the public and private sectors. The purpose is to bring these

views to the seminar, sharing the building's demands, as well as the demands of the hospital managers", states Salim Lamha.

The scientific committee of the Health Environment Infrastructure Forum includes various personalities within the industry, such as: Giovani Felipe Guastelli, from Hospital Alemão Oswaldo Cruz; Ricardo de Oliveira Gomes, Hospital Israelita Albert Einstein; Anderson Cremasco da Silva, Hospital São Camilo de São Paulo; Adhemar Dizioli Fernandes, Department of Health of the State of São Paulo.

The technology field also has its own committee. Under the leadership of Jacson Barros, president of the Brazilian Association CIO Saúde (ABCIS) and CIO of the Hospital das Clínicas of University of São Paulo, one of the largest hospitals in Latin America with over 2,100 beds, the scientific committee of the 2nd Connected Hospital will bring debates and lectures on the advances of technology in Health. The subjects debated in the meetings include matters related to integration, standardization, user experience, IoT, Big Data, security, mobile Health and telemedicine.

"What caught my attention were the profiles we are gathering in the committee. These are different skills and profiles, each presenting their point of vies and showing daily demands faced by IT. We also managed to gather in the same group CIOs from benchmark health institutions", states Jacson Barros.

The committee is composed of 14 officers, including Marcelo Sartori, medical officer of AACD - Associação de Assistência à Criança Deficiente (Association for Assistance to Disabled Children); Teresa Sacchetta, current healthcare director of InterSystem; Fabio Carvalho, IT manager of Hospital Adventista de São Paulo; Klaiton Simão, CIO of São Camilo Hospital Group; Patricia Hatae, IT manager of Hospital Santa Catarina de São Paulo; Bruno Célio, of GRAAC -Grupo de Apoio ao Adolescente e à Criança com Câncer (Support Group for Teenagers and Children with Cancer); Vilson Cobello Jr., of the IT department of Hospital das Clínicas da Universidade de São Paulo; Marco Bego, of the innovation center of Hospital das Clínicas da Universidade de São Paulo; David Oliveira, CEO of Decida; Marcio Lago, officer of ABCIS -Associação Brasileira CIO Saúde; Edson Kitaka, CIO of Hospital das Clínicas da Universidade de Campinas, in São Paulo; and Tiago Damasceno, Hospital CIO of Hospitais Lefort.

Following the exponential growth and the demands of the field, Health-IT magazine will also hold the 1st Annual CIO Meeting, with the purpose to integrate professionals from various health institutions in the country.

In addition to these committees, SAHE 2018 will also held Welcome 2018 - Welcome to Health 2018, 2nd SAHE Clínicas, 1st Congress and Annual Hospital Meeting, 1st Annual Meeting of Engineers, Architects and Designers, as well as contents on Management, Nursing, Rehabilitation, Clinical Engineering, Pharmacy, Operators, Laboratories, and other important segments.



Health Awards

SAHE will also offer moments of tributes and awards during the three days of the fair. The III HealthARQ and II Health-IT awards, which reward successful cases, personalities of the industry, the most remembered brands and health institutions, respectively in the fields of architecture, and engineering and technology, will occur during the premium fair. At this occasion, ABCIS will also elect the CIO of the year.

"These awards will occur during the fair, paying tribute to the professionals who work hard to provide quality health, each within their expertise", explains Caparelli, CEO of Grupo Mídia.

SAHE will also be the stage of the 6th edition of the major award The 100 Most Influent People in Health, the Brazilian Health Oscars. The gala dinner will meet the most influent personalities of the Braizlian Health industry, from its various fields, such as Industry, Health Operators, Hospitals, Advisors, etc.





HEALTHCARE MANAGEMENT MAGAZINE REALIZES







Most influential people in Healthcare

The leading figures of Healthcare worldwide

uring the 18th century, human pox was hardly fought. The disease has killed up to 40% of the patients, and the ones who did survive, would often become blind and disfigured. Then, in the middle of 1870's, the British Doctor Edward Jenner discovered that, if a person is infected by the cow pox wound, this person would be free from the infection by the human pox. The origin for the vaccine had then being discovered.

This achievement led Edward Jenner to become one of the biggest names in Medicine in the world. This is an example of big deeds that leave marks in the history of humanity and make their creators to be a reference in the field they are inserted in.

Revolution, engagement, demeanor, importance and visibility are some of the characteristics that make an influential person. However, the influence is something immeasurable, that dismiss indicators, rankings or any other kind of tool that objectifies numbers for comparison. The influence is simply by itself, a result of important actions for the society, as it was with Jenner – unquestionably influent in the Healthcare.

The good actions, discoveries and activities in favor of Healthcare spread along all the history of humanity, including today. And it was exactly with the intention of honoring the executives, physicians, entrepreneurs, researchers, managers and other professionals in the fields that search for the better in Healthcare all over the world that Grupo Mídia (GM), with Healthcare Management International magazine, has the honor to release the award 100 most influential people in Healthcare-World Edition.

After five years giving the award in Brazil, GM faced the challenge to promote this tribute in a global level. For this ambitious project, the Editorial Board of Healthcare Management International magazine listened to the Healthcare community, through an open poll on the Healthcare Management magazine website, as well as a market survey.

The names mentioned in the pool had easily exceeded the 100 number, attributing to the Editorial board a huge responsibility to choose the men and women that truly represented the World Health within the last twelve months. It was not an easy task, there were months of meetings until we found a common denominator.

These professionals are distributed in ten categories that reflect the market changes and nuances. And, as we said before, because their influence is innumerable, those elected for this award have no score position.

Just like the British doctor Edward Jenner, the 100 names in this list are incontestably influential in the world Healthcare. The influence has no borders, so the inspiration of these people goes beyond those who are around them. Each one, with their expertise and path, encourage us and show that we are capable of making the world into a better and healthier place for future generations.

category ASSOCIATION AND FEDERATION



João de Deus

João de Deus is the President of European Association of Senior Hospital Physicians since January 2010. He is also a Professor of Ophthalmology in the Health Technology High School at the University of Lisbon since 1995. He is a Professor of Medical Ethics and Deontology in the Catholic University of Lisbon since 2003.



Markus Heibach

arkus Heibach is Executive Director of the VDDI - Association of the German Dental Industry. Today the membership of VDDI comprises almost 200 German manufacturers of dental-medical and dental-technical products (DentalPlace).



Franco Pallamolla

raduate in Business administration at UFRGS – the Federal University of Rio Grande do Sul, President of LIFEMED Corporate Group, President of ABIMO – Brazilian Medical and Dental Devices Manufacturers Association and member of the director board at BIOBRASIL - Bioindustry Committee of the Federation of Industries of the State of São Paulo.



Harold (Hal) Wolf III

arold (Hal) Wolf III is the President and CEO of the Healthcare Information and Management Systems Society (HIMSS). With nearly 35 years of experience, Wolf is respected internationally as a healthcare and informatics executive with areas of expertise in mhealth, product development, integrated care models, marketing, distribution, information technology and innovation implementation. He has helped health systems and providers across the world with end-to-end operations, commissioning, data and architectural design.



Devin A. Jopp

evin A. Jopp serves as the CEO for the American College Health Association, which is the principal leadership organization for advancing the health of college students and campus communities through advocacy, education and research. He is also CEO at Future Focus Leadership, a consulting firm that transformed organizations through strategy development, governance optimization, innovation incubation and organizational development services.





Marco Bobbio

arco Bobbio is one of the founders of the Italian Slow Medicine Movement. This movement aimed to promote processes of care based on appropriateness, but within a relation of listening, dialogue and decision sharing with the patient.



Clifford A. Hudis

r. Hudis is the CEO of the American Society of Clinical Oncology. With nearly 40,000 members, ASCO is committed to improving cancer care through scientific meetings, educational programs and peer-reviewed journals. Previously he served for nearly two decades as the Chief of the Breast Medicine Service and Attending Physician at Memorial Sloan-Kettering Cancer Center (MSKCC) in New York City.



Scott Whitaker

Scott Whitaker is the President and CEO of AdvaMed, the world's largest medical technology association. As CEO of AdvaMed, Mr. Whitaker is the voice of the medical technology industry. He is widely recognized as a top health care advocate and policy expert with experience across multiple health policy sectors, having worked successfully with diverse stakeholder groups.



Gerard O'Dwyer

erard O'Dwyer has been the Chief Executive of South/South West Hospitals Group at Health Service Executive. He became the first Irish person to be elected President of the European Association of Hospital Managers (EAHM).



Eva M. Weinreich-Jensen

va M. Weinreich-Jensen is the President of HOPE - European Hospital and Healthcare Federation. HOPE actively monitors EU policies and legislations to have an impact on the organization and operation of hospitals and healthcare services. HOPE also provides input and the perspective of healthcare providers in arenas where these issues are debated.

category **BUSINESS**



Vincent A. Forlenza

Incent A. Forlenza serves as CEO and President of Becton, Dickinson U.K. Limited. Mr. Forlenza has been Chairman of Becton, Dickinson and Company since July 1, 2012 and has been its CEO since October 1, 2011. Forlenza has been involved in various professional and community associations. He currently serves as vice chairman of The Valley Hospital board of trustees. He is also a member of Lehigh University's Board of Trustees and is a former member of Lehigh's Engineering Advisory Council.



Heinz-Walter Große

Prof. Dr. Heinz-Walter Große is CEO of B. Braun Melsungen AG. Prof. Dr. Große started his professional career 1978 after his studies about Business Administration at the University of Göttingen in the Finance Department of B.Braun Melsungen AG, where he first served as assistant to the CFO. B. Braun is a german medical and pharmaceutical device company, which has offices and facilities in more than 50 countries.



Axel Kühner

r. Axel Kühner has been CEO of Greiner Holding AG since 2010. Greiner is active in the packaging, furniture and automotive industries, in the medical technology and life science sectors. He worked in a consistent implementation of the globalization strategy, the bundling of core competencies and the strengthening of innovative capacity in all divisions.



Joachim Schäfer

oachim Schäfer is Managing Director Operational Trade Fair Business since 2006. He is the executive vice president and managing director at Messe Düsseldorf. During 1985 until 2005 he was in Development of the US Subsidiary of Deutsche Messe AG and President of Hannover Fairs USA, Inc.



Stephen J. Hemsley

September 1st, 2017. The UnitedHealth Group is one of the largest insurance company in terms of revenue. Mr. Hemsley placed #7 on Modern Healthcare's list of the 100 Most Influential People in Healthcare in 2016.





Toshio Takiguchi

oshio Takiguchi serves as the CEO and President of Toshiba Medical Systems Corporation. He also serves as Senior Managing Executive Officer and Chief Executive of Medical Systems Operations at Canon Inc. Mr. Takiguchi served as a Corporate Vice President and Executive Officer of Toshiba Corporation from October 6, 2015 to March 22, 2016.



Benoît Potier

graduate of CentraleSupélec (Ecole Centrale Paris), Benoît Potier joined Air Liquide in 1981 as a Research and Development engineer. After serving as a Project Manager in the Engineering and Construction Division, he was made Vice-President of Energy Development in the Large Industries business line.



Dave Panther

ave Panther is the VP of Global Sales Informa Life Sciences Exhibitions portfolio. He manages a team of highly experienced event professionals, and his role comprises of organizing the annual exhibitions schedule and being the key liaison with health ministries, governmental bodies and diplomatic attachés both locally, regionally and globally. He is also the main contact at Informa Life Sciences Exhibitions for healthcare industry giants such as GE Healthcare, Philips, Siemens, Drager, and many more.



Sybill Storz

Storz is managing director of Karl Storz GmbH & Co. KG. Her father, Karl Storz, founded his company in 1945, as a manufacturer of ear, nose & throat medical instruments, headlamps and binocular loupes. Today, with a portfolio of more than 15,000 products, the company is a world leader in endoscopy instruments for human and veterinary medicine as well as industrial applications.



Andreas Bacher

r. Andreas Bacher is the Chief Operating and Strategy Officer at Kulzer, one of the world's leading dental companies with its headquarters in Hanau, Germany. He graduated from the Technische Darmstadt University in 1998 and the Otto Beisheim School of Management in 2003.

category EDUCATION AND RESEARCH



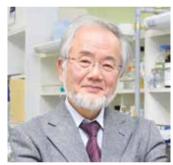
Celina Turchi

elina Turchi is an infectious-disease specialist in Recife, Brazil—where the epicenter of the first major outbreak of Zika-associated microcephaly happened to be. Celina has been elected one of the 100 most influential people in the world by Time magazine and is also one of the 100 most influential people in Healthcare in Brazil by Healthcare Management magazine.



George Church

In 1984, Mr. George Church developed the first direct genomic sequencing method, molecular multiplexing & barcode tags, which led to automation & software used for the first cellular genome sequence (pathogen Helicobacter) in 1994. He also pioneered new privacy, biosafety, environmental & biosecurity policies. His honors include election to NAS & NAE, NIH Center for Excellence in Genomic Science & Franklin Bower Laureate for Achievement in Science.



Yoshinori Ohsumi

Japanese cell biologist known for his work in elucidating the mechanisms of autophagy, a process by which cells degrade and recycle proteins and other cellular components. Ohsumi's research played a key role in helping to uncover the critical physiological activities of autophagy, including its function in helping cells adapt to various types of stress, in contributing to embryo development, and in eliminating damaged proteins. For his discoveries relating to autophagy, Ohsumi was awarded the 2016 Nobel Prize for Physiology or Medicine.



Regina E. Herzlinger

Regina E. Herzlinger is the Nancy R. McPherson Professor of Business Administration at the Harvard Business School (HBS). She was the first woman to be tenured and chaired at Harvard Business School and the first to serve on many established and start up corporate health care/medical technology boards. She initiated the courses in nonprofit and health care at HBS and was the first faculty member to be selected by the students as their best instructor.



Peter A. Singer

eter Singer has dedicated the last decade to bringing innovation to tackling the health challenges of the world's poorest people. He is well known around the world for his creative solutions to some of the most pressing global health challenges. Dr. Singer is CEO of Grand Challenges Canada. He is also Professor of Medicine at the University of Toronto, Director at Sandra Rotman Centre at University Health Network, and Foreign Secretary of the Canadian Academy of Health Sciences.





João A. C. Lima

e attended the Johns Hopkins University School of Business and Education and later pursued a fellowship in cardiology there. He also spent years studying and interning in medicine and cardiology in Maryland, Brazil, Canada and France. He is Professor of Medicine and Director of CV Imaging in the Division of Cardiology at Johns Hopkins University School of Medicine



Gianvito Martino

rom 1991 to 1992, Gianvito Martino held the position of Research Associate at the Department of Neurology at the University of Chicago (USA). From 1992 to 2008, he worked first as Senior Scientist and then as Director of the Neuroimmunology Unit of the San Raffaele Scientific Institute in Milan (Italy) where, since 2008, he acts as Director of the Division of Neuroscience.



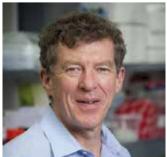
Ronald J. Daniels

Since taking office in 2009 as president at The Johns Hopkins University, Daniels has focused his leadership on three overarching themes: enhanced interdisciplinary collaboration, individual excellence, and community engagement. Under Daniels' leadership, the university has launched a series of transformative, multidisciplinary initiatives that seek to advance the understanding of some of society's most vexing issues, from realizing the promise of individualized health to addressing the challenges facing urban environments.



John Zhang

r. Zhang is the Founder/CEO of New Hope Fertility Center in New York City where he has served as Medical Director since opening in 2004, and oversaw the expanding fertility network internationally to China, Russia, and Mexico. He has been behind several notable achievements in the area of assisted reproductive technology (ART).



lan Frazer

he Weekend Australian Magazine described Ian Frazer as "God's gift to women". His breakthrough vaccine for cervical cancer is also being given to boys to protect them against Human papillomavirus, or HPV, the main cause of cervical cancer in women and a health issue for males too.

category INDUSTRY



Frans van Houten

rans van Houten is CEO of Royal Philips, a position he has held since April 2011.

Mr. Houten first joined Philips in 1986 and has held multiple global leadership positions across the company on three continents. He is leading Philips on a course to leadership in health technology, dedicated to making the world healthier and more sustainable, with the aim of improving three billion lives per year by 2025.



John J. Greisch

John J. Greisch was elected President & Chief Executive Officer of Hill-Rom effective January 8, 2010. As the CEO of Hill-Rom, Mr. Greisch brings valuable multinational experience with multiple roles in a major public healthcare company, including as Chief Financial Officer, as well as operational insights and business knowledge to the Board.



Kieran Murphy

lieran Murphy is President and CEO of GE Healthcare, a \$20 billion business unit of General Electric that provides transformational medical technologies and solutions to the global healthcare industry. Kieran has over twenty years' experience in the global life sciences and biotechnology industry, beginning his career with Janssen Pharmaceutical, a division of Johnson and Johnson.



Bernd Montag

ernd Montag has been the Chief Executive Officer of Healthcare Business at Siemens AG since January 2015. Dr. Montag serves as CEO at Siemens Healthineers, Inc. Before holding executive positions, he established an understanding of company processes contributing to its success. From 1995 to 1999, he served an in-house consulting position in process management at Siemens and served as Sales Manager for Siemens Hearing Instruments.



Djalma Rodrigues

jalma Rodrigues is the founder and was the CEO of ABIMO - Brazilian Medical and Dental Devices Manufacturers Association for 11 years. He is also the CEO at Fanem, a Brazilian multinational company, a pioneer in the manufacturing of medical and laboratory equipment. He has been elected one of the 100 most influential people in Brazilian Healthcare in 2017 by Healthcare Management magazine.





Stefan Dräger

ounded in 1889 by Johann Heinrich Dräger, the family business has been headed in the fifth generation by CEO Stefan Dräger since 2005. Like his predecessors, he is firmly comitted to the Company's four fundamental values: close customer relationship, continuous innovation, high quality and competence on the part of each and every employee.



Mattias Perjos

r. Mattias Perjos has been the Chief Executive Officer and President at Getinge AB since March 27, 2017. He joined Getinge from the Coesia Group, a privately owned Italian group of companies, where he holds the position as CEO of the IPS Division and a member of Group management since 2012.



Omar Ishrak

mar Ishrak has served as Chairman and Chief Executive Officer of Medtronic since June 2011. In 2014, Omar engineered the acquisition of Covidien, a \$10 billion global manufacturer of surgical products and supplies. The acquisition of Covidien was the largest medical technology acquisition in the history of the industry.



Luc Thijs

uc Thijs started his career at Agfa Gevaert's Medical Division in 1990. He has been the President of Agfa HealthCare NV and Agfa HealthCare AG since April 1, 2011. He served consecutive general management roles for Agfa HealthCare in Asia Pacific, Latin America and Italy. Since 2009, he led Agfa HealthCare's Growth Markets region, comprising Asia Pacific, Latin America, Africa, the Middle East and the CIS countries.



Amir Aghdaei

mir Aghdaei has been Group Executive and Vice President of Danaher Corp. since April 5, 2011. He joined Danaher in 2009 as President of Tektronix. Mr. Aghdaei's career includes more than 20 years of providing leadership and strategic direction at leading technology companies.

category INNOVATION



Evan Doll

irector, Health Software Engineering at Apple, Evan Doll is the co-founder of Flipboard. Previously, he worked at Apple as a software engineer on the iPhone team, as well as on Final Cut Pro and Aperture. He also taught the first university-level iPhone application development course at Stanford University.



7ane Burke

s the president of Cerner, Zane Burke joined Cerner in 1996. He has served in a broad range of executive positions across sales, implementation, support and finance. Prior to becoming president in 2012, he led Cerner's Client Development organization with a focus on establishing new relationships across all segments of the health care market.



Deborah DiSanzo

eborah DiSanzo is the General Manager for IBM Watson Health, the business unit founded to support IBMs next 'moonshot': to advance health at a global scale. As the top executive for Watson Health, Deborah leads more than 2,000 IBMers worldwide from the unit's headquarters in Cambridge, Massachusetts.



Bertalan Meskó

Bertalan Meskó is the Medical Futurist; a Hungarian medical doctor, geneticist, author and speaker. As a geek physician with a PhD in genomics and Amazon Top 100 author, his research focuses on the impact of digital health technologies on the future of health. He has been selected by the Huffington Post as one of the 30 biotech thinkers with the biggest global impact.



Türkan Özilhan Tacir

zilhan graduated from Oglethorpe University in 1996. She worked at Anadolu Holding as Financial Affairs Assistant Specialist from 1996 to 1998 and as Human Resources Specialist from 1998 to 2000. Ms. Türkan Özilhan Tacir has been serving as CEO at Anadolu Medical Center, in Turkey, since July 2014.





Olivier Brandicourt

Brandicourt has 28 years of global experience in the pharmaceutical industry. He joined Sanofi in April 2015 after serving as CEO of Bayer Healthcare AG since 2013. He is a member of the Board of Management of the Pharmaceutical Research and Manufacturers of America (PhRMA), as well as a member of the Council of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA).



Boris Feodoroff

oris Feodoroff is a research Associate (and lecturer) at the German Sport University Cologne, Germany since 2009. In 2017 he published his PhD thesis "Technological development and evaluation of an assist system for adaptive and mobile training with an electrically-assisted bicycle" (magna cum laude). His recente Project is "Full Body Gamification in Virtual Reality".



Han-Joong Kim

an-Joong Kim served as President of Yonsei University from 2008 to 2012. He has been the Chairman of CHA Health Systems since 2012. He served as Chairman of Korea University Sport Federation from 2010 to 2012. He has also been an Independent Director of Samsung India Electronics Pvt. Ltd. since 2012. He also has been an Professor Emeritus at Yonsei University since 2012.



Erwin Böttinger

rwin Böttinger is head of the Digital Health Center and Professor for Digital Health at the Hasso-Plattner-Institute GmbH and the University of Potsdam, Germany. From November 2015 until July 2017, he served as CEO of the Berlin Institute of Health. He is widely recognized in personalized medicine implementation and digital health.



Kemal Malik

alik was born in Slough, United Kingdom. Malik joined Bayer in 1995 as Head of Metabolism and Oncology Europe in the Pharmaceuticals Business Group. He subsequently served as Head of Global Medical Development before being appointed Head of Global Development and a member of the Executive Committee of Bayer HealthCare AG until his appointment to the Board of Management of Bayer AG.

category INTERNATIONAL REFERENCE



Bernard J. Tyson

Bernard J. Tyson is the chairman and CEO of Kaiser Foundation Health Plan, Inc. and Hospitals — known as Kaiser Permanente, one of America's leading integrated health care providers and not-for-profit health plans. His career at Kaiser Permanente has spanned more than 30 years. During that time, he has successfully managed all major aspects of the organization, serving in roles from hospital administrator to division president to president and CEO of the Oakland, California-based health care organization.



Mark Chassin

ark R. Chassin is president and CEO of The Joint Commission. In this role, he oversees the activities of the nation's predominant standards-setting and accrediting body in health care. Joint Commission accreditation and certification is recognized worldwide as a symbol of quality that reflects an organization's commitment to quality improvement and to meeting state-of-the-art performance standards.



Tedros Adhanom Ghebreyesus

edros Adhanom Ghebreyesus was elected as World Health Organization (WHO) Director-General for a five-year term by WHO Member States at the Seventieth World Health Assembly in May 2017. He is the first WHO Director-General to have been elected from multiple candidates by the World Health Assembly, and is the first person from the WHO African Region to serve as WHO's Chief Technical and Administrative Officer.



Simon Stevens

Simon Stevens is CEO of NHS England, which leads the NHS's work nationally to improve health and ensure high quality care. As a frontline NHS manager he subsequently led acute hospitals, mental health and community services, primary care and health commissioning in the North East of England, London and the South Coast.



George S. Barrett

eorge S. Barrett is chairman and CEO of Cardinal Health, a company ranked among the top 25 on the Fortune 500 and dedicated to improving the cost-effectiveness of health care. Barrett has refocused Cardinal Health on its essential role in supporting hospitals, pharmacies and alternative sites of care in their efforts to improve the quality and safety of patient care, while reducing costs and improving efficiency.





Agnes Binagwaho

gnes Binagwaho is a Rwandan pediatrician who served as the Minister of Health of Rwanda for 5 years, from May 2011 until July 2016. She was awarded an Honorary Doctor of Science from Dartmouth College and earned a Doctorate of Philosophy from the University of Rwanda College of Business and Economics, with her PhD Dissertation titled "Children's Right to Health in the Context of the HIV Epidemic."



Mark T Bertolini

ark T. Bertolini is Chairman and CEO of Aetna, a Fortune 50 diversified health care benefits company with over \$60 billion in 2015 revenue. Aetna serves an estimated 46.5 million people with information and resources to help them make better informed decisions about their health care and has operations in North America, Asia, Europe and the Middle East. Mr. Bertolini assumed the role of CEO on November 29th, 2010 and of Chairman on April 8th, 2011.



Melinda Gates

elinda Gates is co-chair of the Bill & Melinda Gates Foundation. Along with Bill Gates, she shapes and approves the foundation's strategies, reviews results, and sets the overall direction of the organization. Together, they meet with grantees and partners to further the foundation's goal of improving equity in the United States and around the world.



Sir Muir Gray

sir Muir Gray, Director of the Oxford Centre for Healthcare Transformation, worked in the Public Health Service in England since 1972, developing a number of projects. He currently works as a Consultant in Public Health for the University of Oxford Hospitals NHS Trust. His other work includes developing Better Value Healthcare whose mission is to publish handbooks and develop programs to get more value from health care resources worldwide.



Francis S. Collins

rancis S. Collins was appointed the 16th Director of the National Institutes of Health (NIH) by former President of the United States Barack Obama and confirmed by the Senate. Collins is a physician-geneticist noted for his landmark discoveries of disease genes and his leadership of the international Human Genome Project, which culminated in April 2003 with the completion of a finished sequence of the human DNA instruction book.

category HEALTHCARE MANAGEMENT



Thomas Mansky

Prof. Dr.Thomas Mansky (born in 1953) is the head of the new Department for Structural Advancement and Quality Management in Health Care, which has been established in April 2010 at the Technical University of Berlin. From 2000 to 2010 he was responsible for Medical Development at the HELIOS Kliniken, one of the largest German for-profit hospital groups.



Hermann Gröhe

ermann Gröhe is Federal Minister of Health in the grand coalition government. The fully qualified lawyer, who was born in Uedem in North Rhine-Westphalia in 1961, was Minister of State in the Federal Chancellery from 2008 to 2009 and Secretary-General of the CDU from 2009 to 2013.



Erik Gerritsen

rik Gerritsen is the Secretary-General of the Netherlands Ministry of Health, Welfare and Sport, top official of the Ministry. He is the Chairman of the National Health Information Council. He has served in several executive positions at the Ministries of Foreign Affairs, Finance and was city manager/CEO of the City of Amsterdam.



Michael Strübin

ichael Strübin is European Programme Director for the Personal Connected Health Alliance (PCHA), a non-profit organization that works collaboratively with health, technology and life sciences, public policy, research and advocacy groups to achieve personal connected health for all. Michael leads PCHA's outreach, communication and advocacy activities in Europe, and oversees the involvement in EU-funded projects.



Talya Miron-Shatz

alya Miron-Shatz is the CEO of CureMyWay, a consultancy in the health space, whose clients are big pharma, health advertisers, startups and corporations. Prof. Miron-Shatz is also CEO of Buddy&Soul, a digital platform for personal development, which helps patients manage their condition, and helps everyone achieve growth.





Veli Stroetmann

Peli Stroetmann is Head of eHealth Research & Policy with empirica Technology Research in Bonn, Germany, and Executive Board Member of the European Institute for Innovation through Health Data. Over the last 25 years, she has been principal investigator and consultant, advisor to European Commission (EC) and global organisations (WHO, OECD), national governments, health service providers and industry.



Patrick Figgis

atrick Figgis is PwC's Global Leader for Health Industries as of July 1st, 2013. He is one of PwC's most experienced Partners who has worked across a number of sectors, including health. He is an experienced advisor to Boards and other senior executives, with a track-record of delivering value and insight through strategic, operational and commercial advice.



John Haughey

ohn Haughey is the Deloitte UK lead Partner for Life Sciences and Healthcare for North West Europe. He recently led Deloitte UK's CFO Advisory Practice which assists CFO's in all aspects of finance transformation from strategy through to implementation. His specialty is optimizing business operations on a global scale covering strategy, M&A, operational and financial improvement, shared services, outsourcing, and process reengineering.



Clemens Martin Auer

rom March 2003 to January 2007, Mr. Auer was Head of the Cabinet of the former Minister of Health and since September 2005 is Director-General at the Federal Ministry of Health. One of the key areas of his strategic work is eHealth in Austria. Being the coordinator of the EU-eHealth Governance Initiative Dr. Auer is responsible for the strategic orientation of the Member States' joint eHealth policy.



Arturo Romero Gutiérrez

r. Arturo Romero Gutiérrez is Technical Advisor, Ministry of Health, Social Services and Equality, Spain. Mr. Gutiérrez is specialist in General Surgery and Gastroenterology.

category HOSPITALS



Redonda Miller

Redonda Miller is president of The Johns Hopkins Hospital. Before her May 2016 appointment as the hospital's 11th president and the first woman to hold the position in The Johns Hopkins Hospital's 127-year history, she served as vice president of medical affairs for The Johns Hopkins Hospital and senior vice president of medical affairs for the Johns Hopkins Health System.



Delos M. Cosgrove

elos M. Cosgrove serves as the CEO and President of Cleveland Clinic Innovations. Cosgrove serves also as the CEO and President of The Cleveland Clinic Foundation. He is a 2016 Fortune Businessperson of the Year (#14), has topped Inside Business's "Power 100" listing for Northeast Ohio, is highly ranked among Modern Healthcare's "100 most powerful people in healthcare" and "most powerful physician executives," and is an inductee of the Cleveland Medical Hall of Fame.



John Noseworthy

ohn H. Noseworthy, M.D., president and CEO of Mayo Clinic, leads one of the largest not-for-profit, academic health systems in the U.S., with \$11 billion in anual revenues and 63,000 employees. Noseworthy is a professor in the Department of Neurology. He specialized in multiple sclerosis and spent more than two decades designing and conducting controlled clinical trials.



Claudio Lottenberg

laudio Luiz Lottenberg is the President of UnitedHealth Group Brazil, Board President at Brazilian Israel Society Albert Einstein and the President of Coalização Saúde Institute. Lottenberg had already been elected one of the 100 Most Influential People in Healthcare in Brazil by Healthcare Management magazine.



Karl Max Einhäupl

n 1992, Karl Max Einhäupl was appointed Professor of Neurology at the Humboldt University in Berlin. From 1993 to 2008 Einhäupl was director of the Department of Neurology of the Charité Berlin. From 2007 to 2015 he was the chairman of the University Council of the Technical University of Munich.





Malvinder Mohan Singh

n Healthcare, Malvinder incubated and established Fortis Healthcare Limited, in the late 1990's. Since then, he has been instrumental in transforming it into a leading healthcare delivery company in India and more recently in Asia, as the largest emerging healthcare organisation.



Foo Hee Jug

r. Foo is the Deputy Chief Executive of the National University Health System (NUHS) where he oversees the JurongHealth campus comprising the integrated 700-bed Ng Teng Fong General Hospital and 400-bed Jurong Community Hospital as well as the Jurong Medical Centre. Mr Foo also holds a concurrent appointment as the Chief Executive Officer of Ng Teng Fong General Hospital.



Martin Hirsch

artin Hirsch is a senior French official born in Suresnes (Seine). Current Director General of Public Assistance - Hospitals of Paris, former President of the Civic Service Agency, Emmaus France and the new Agency of Active Solidarities. From 2007 to 2010 he was High Commissioner for Active Solidarities against poverty, within the Fillon government.



Mike More

ike More became Chair of Cambridge University Hospitals (CUH) on 11 April 2017. He joined the CUH board of directors in September 2013 bringing extensive experience from health, police, transport as well as local government. He began his career at the National Audit Office in 1981. He was senior auditor at Cambridgeshire County Council in 1986 moving on to a number of increasingly high-level positions at the council including head of finance.



Rolf Kühlenthal Ressler

olf Kühlenthal Ressler is President at Clinica Alemana, Chile.

This is an institution accredited by the Joint Commission International and is considered the best clinic in Chile and the second in Latin America by the América Economía Intelligence consultancy.

category PHILANTHROPY



Jeremy Farrar

Before joining Wellcome in October 2013, Jeremy was Director of the Oxford University Clinical Research Unit in Vietnam for 18 years. His research interests were infectious diseases, tropical health and emerging infections. He has published over 500 peer-reviewed scientific papers. He was named 12th in Fortune's list of the World's 50 Greatest Leaders in 2015.



Faith Mitchell

aith Mitchell, PhD, is President and CEO of Grantmakers In Health (GIH). Previously she served as Vice President for Program and Strategy at the organization. Before joining GIH, Dr. Mitchell was Senior Program Officer at the Institute of Medicine (IOM). She spent 12 years at the National Academies, both at the IOM and as a Center Director in the Division of Social and Behavioral Sciences and Education.



Roberto Sá Menezes

rom Salvador - BA (Brazil), Roberto Albuquerque Sá Menezes, is a professional acknowledged by his engagement and dedication in philanthropic institutions management. He is the current director and the main manager at Santa Casa of Bahia. He is also founder and member of the Administration board and president of GACC – BA (Support Group for Children with cancer of Bahia). In 2017, he has been elected one of the 100 most influential people in Healthcare in Brazil by Healthcare Management magazine.



Jesse Milan, Jr. JD

Jesse Milan, Jr., is President and CEO of AIDS United a national organization focused on policy, grantmaking, and capacity building. Mr. Milan is a lawyer whose career includes leading HIV program and organizations at national, regional and global levels. He has chaired five non-profit boards, was AIDS Director for Philadelphia, has chaired federal advisory committees, and serves currently on the Scientific Advisory Board for PEPFAR.



Aida Kurtović

he Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria selected Aida Kurtović as its new Chair, after serving as Vice-Chair for the past two years. Kurtović, who is from Bosnia and Herzegovina, was selected for a two-year term during a Board meeting that is being hosted by the government of Rwanda.





Charles Lyons

harles Lyons, president and CEO of the Elizabeth Glaser Pediatric AIDS Foundation, is devoted to promoting children's welfare and helping HIV/AIDS patients and their families. Taking over as CEO in 2010, Lyons heads the strategic, financial, fundraising, and management operations of this non-profit organization. He works tirelessly to eradicate pediatric HIV infection through research, advocacy, and prevention and treatment programs.



Ernest Madu

rnest Madu is an internationally recognized authority in cardiovascular medicine and innovative healthcare systems and solutions. Over the past 15 years, he has been a change catalyst in leading the transformation of healthcare delivery systems and processes in developing countries. In 2005, he established the Heart Institute of the Caribbean in Jamaica.



Prince Maximilian of Liechtenstein

S.H. Prince Maximilian von und zu Liechtenstein has been the Group Chief Executive Officer and Chairman of the Board of LGT Group Foundation October 2006. H. S. H. von und zu Liechtenstein initiated LGT Venture Philanthropy in 2007.



Vito Angelillo

Ito started his career as geophysicist in the humanitarian context with water exploration in the Sahel region, in Africa. He was then executive director with an international consulting engineering firm, and in parallel continued to participate in humanitarian missions in crisis areas. Vito then turned to social action at Swiss national level, first with an international non-governmental organisation and then in public service in Geneva. He has been Director General of the Terre des hommes foundation since December 2012.



Brenda R. Sharpe

Brenda Sharpe joined the REACH Healthcare Foundation as President and CEO in 2004. As the Foundation's first CEO, she worked closely with the founding Board of Directors to define REACH's grant making priorities and processes, and establish an effective governance structure for the organization. Prior to joining REACH, Sharpe worked in the non-profit service sector for nearly 15 years, including 10 years as President and CEO of Sunflower House, a child advocacy and abuse prevention center in Kansas

category SUSTAINABILITY



Erol Odabasi

rol has over 10 years of experience with Johnson & Johnson, starting his career at J&J's Corporate Headquarters with Worldwide Environmental Affairs. In addition to experience with J&J, he spent several years providing environmental, safety, and sustainability consulting for a number of global clients, and was responsible for developing the global EHS & Security programs for a rapidly growing smart-grid startup company.



Michael G. Vale

ike Vale leads 3M's Health Care Business Group, which provides hospitals, doctors and other medical markets with solutions for infection prevention, oral care, drug delivery and food safety. He was most recently head of the company's Consumer Business Group. Over the years, his career with 3M has sent him abroad four times for varied roles, including research chemist, manufacturing director and general manager.



Jon Utech

Jon Utech, director of the Office for a Healthy Environment at the Cleveland Clinic. The Clinic's sustainability program leads the healthcare industry with a comprehensive organizational response to the environmental issues of 21st Century Healthcare.



Kevin Krueger

evin Krueger is a rocurement & Sustainability Manager for the food program at St. Jude Children's Research Hospital. He oversees sourcing and purchasing of goods, supplies, and equipment for their operation which serves over a million meals per year to patients, family members, visitors, and employees. His areas of focus for sustainability initiatives include sourcing meat and poultry raised without subtherapeutic antibiotics, developing and strengthening partnerships with local businesses, and reducing the amount of landfill waste generated on our campus.



Scott Slotterback

Scott Slotterback is a Policy Director, Global Green and Healthy Hospitals (GGHH), Health Care Without Harm. He comes to this role after working for over 30 years on complex building projects, including a decade at Kaiser Permanente, where he led teams that improved the design and sustainability of 60 major healthcare buildings.





Douwe Kiestra

ouwe Kiestra is president of the IFHE, The International Federation of Hospital Engineering. Vice president of The NVTG "The Dutch Association for Technology in Healthcare" after being president for more than 6 years. Member of the IFHE Digest Advisory panel, board member of the Ronald McDonald Children's foundation Friesland and several other branch committees.



Gail Vittori

ail Vittori is the 2017 Chair of the Green Business Certification Inc. Board of Directors (formerly Green Building Certification Institute), and has served on that Board since 2011. Vittori has been a catalyst for several national initiatives focused on greening the health care sector and advancing fundamental human health considerations in green building.



Ahmed Idhammad

hmed Idhammad Head of Sustainable Development Unit The Mohammed VI University Hospital Center of Marrakech, Morocco. He is member of Francophone Alliance for Quality and risk Management in Healthcare. In 2016, he is part of the international team organizing the Climate and Health Care Conference – COP22 in Marrakech, Morocco.



Sonia Roschnik

onia Roschnik works as a sustainable health advisor building on 30 years experience in the health and social care sector, as a clinician, in senior hospital management and in sustainability. She recently worked as Head of the Sustainable Development Unit for the NHS and health sector in England which pioneered system wide approaches. She also has regularly worked as an advisor to WHO and UNDP on sustainability and health programmes.



Gustav Eriksson

ustav Eriksson graduated at Mid Sweden University. He is the Head of Environmental Department at Karolinska University Hospital, Sweden, since 2003. Over his leadership, environmental work at Karolinska Environment has been certified according to International Environmental Management Standard ISO 14001.



Health without frontiers

With 55 years in the field of medical and dental equipment in Brazil, Abimo promotes sustainable growth of the industry in the National and International market.



The first event to welcome Brazilian companies was the International Bogota Fair, in Colombia, in 1966. The Brazilian pavilion assembled there for exclusive exhibition of national products resulted in the creation of Cibra.

xporting is the solution." This was the motto which guided the Brazilian medical and dental equipment industry during the 1960's and 1970's. Facing the challenge to become stronger in the internal market, this segment won a new ally in 1961: Abimo (Brazilian Association of Medical, Dental, Hospital and Laboratory Articles and Equipment), which led national brands to major fairs outside Brazil, first acting in neighbor countries.

Creating possibilities for the national industry to overcome geographic obstacles was one of the most significant steps started by Abimo. From then, over the years, the Brazilian pavilion consolidated its presence in events in countries such as Mexico, Portugal, Spain, South Africa and Lebanon. "We started to export and it was amazing. No one made it, we simply imported it", reports Manoel Baumer, founder of Abimo. "When they said exporting was the solution for our businesses, we started to think about it, first contacting our smaller neighbors."

"When we started the first export consortium, in the 1970's, we called it Cibra (Brazilian Industrial Consortium of Equipment) and started to take our first steps", recalls Djalma Rodrigues, president of Fanem and the main responsible for the prominence and importance given to exports within Abimo, during his mandate as president. "But many efforts and investments were really necessary for the Brazilian companies to conquer their space in the external market", he recalls.



Strength in union

Many events have occurred and contributed for the national industry to observe which were the main obstacles and how to handle them. From that time, after 15 years, the scenario has changed dramatically. The major changes in the field include the creation of the sectoral project Brazilian Health Devices, performed by Abimo in partnership with Apex-Brazil (Brazilian Agency of Export Promotion and Investments).

Abimo's sectoral project not only broke barriers and gleamed into the success in foreign trade for a field that was not well known, but it was one of the first projects to plan the development of a sectoral strategy as a whole. It was in the beginning of the year 2000 that, observing the successful partnerships of Apex-Brazil with other segments, the entity was excited about the possibility of developing a sectoral project encouraged by the agency.

When in 2002 the internationalization project was



competence to lead the presence of the Brazilian health products' industry in more than 180 countries, through constant and conscientiously planned actions, which turned our medical and dental devices into a high-quality option, at fair price, competing in markets with the highest standards.





actually started, there were different expectations. The industry, in general, was not yet prepared for exporting and was only taking small steps into the international market, through a few pioneering actions. Thus, the participation in the Medica Trade Fair, the largest in the field taking place in Germany, was really a milestone. This was the first participation of a national pavilion in such a major fair.

After this fact, other countries received the green and yellow pavilion. In 2003, the dental companies attended IDS for the first time, also in Germany, at the most significant moment for the Brazilian dental industry in the international market; in 2004, they attended Arab Health, in Dubai, the second largest



WE CURRENTLY HAVE A PAVILION WITH 60 COMPANIES, GENERATING A LARGE AMOUNT OF BUSINESSES." Clara Porto. Marketing and Project Manager of Abimo

health industry fair in the world; in 2006, it was the time for AEEDC, the largest dental fair in the Middle East; and many others.

In 2017, the sectoral project with Apex-Brazil is in its 8th edition. And this partnership is visibly growing throughout the years. Today, even though Brazilian Health Devices is not the only tool used by the entity to promote the national industry in the international scenario, it is the main project of Abimo in the field of internationalization, and also the most strategic one.

Through the national exposure in the international fairs, it is possible to create a panorama of how the Brazilian Health Devices has grown in these 15 years. The first Brazilian pavilion at Medica, for example, had the presence of 8 companies. In 2009, seven years after the beginning of the project, the space held nearly 50 national brands. "We currently have a pavilion with 60 companies, generating a large amount of businesses", emphasizes Clara Porto, current project manager in the entity, about how the pavilion became notorious in time.

Well-established international work

With the purpose of encouraging exports of Brazilian products aimed at assistance and rehabilitation technologies, eight companies associated to Abimo - and which are part of the Brazilian Health Devices Project - attended Rehacare 2017, the main trade fair of this segment in Europe.

"This was the second year of Brazilian Health Devices as exhibitor in the fair, and we certainly established Abimo's work in the field of assistance and rehabilitation technologies", celebrates Clara Porto, international marketing manager of the entity. "We had customers from Brazilian companies in the VIP space promoted by Messe, we also exhibited in the innovation space, right in the entrance - which promoted the location of our pavilion - and we gathered more than 200 guests for our Happy Hour." Porto believes that Rehacare 2017 has definitely confirmed the quality of the Brazilian products to the international market.

Not only this was the largest participation of Brazil in the history of the fair, but Abimo also brought to the event Dr. Linamara Rizzo Battistella, State Secretary of Rights of the Disabled Persons. Linamara was announced at the trade fair website, giving an exclusive interview. "Relying on the presence of Dr. Linamara at Rehacare was very important for Abimo, since she is one of the most respected activists in the world in terms of inclusion", says Porto.

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