

Another year in review

In finishing our second year as the Co-editors of this journal, we are again grateful for the support of Emerald's staff members, our Editorial Advisory Board (EAB) (which has expanded greatly in geographic areas and perspectives represented), and the many professionals who volunteered their time and expertise as manuscript reviewers, who are thanked by name below.

Over the past two years, the journal has continued to meet or beat our benchmarks for time from manuscript submission to completed review and time to final decision on publication. Our two theme issues (antimicrobial stewardship in 2016, vaccine preventable diseases in 2017) were well received in terms of download volumes and another theme issue is rapidly moving toward publication (maternity care in 2018). Following nomination by EAB members and editors, four papers were selected for recognition in the annual Literati Awards for Excellence. The awardees are posted at: www.emeraldgroupublishing.com/authors/literati/awards.htm?year=2017.

Building upon these successes, our priorities for next year include:

- continuing to expand the EAB by recruiting new members from areas not currently represented (specifically Central and South America and Europe);
- continuing to build recognition for the journal through strategic attendance at regional, national and international conferences; and
- working to create a sense of intellectual community among members of the EAB, as well as to encourage and support our authors in the promotion of their work.

In terms of conference attendance, we also are grateful to the organizers who encouraged our attendance at their important events this year. In this editorial, we describe highlights of several conferences attended by regional editors or co-editors in 2017.

- The Biennial Information Technology and Communications in Health (ITCH) International Conference was hosted in February by the University of Victoria's School of Health Information Science. As in previous years, over a hundred delegates from over a dozen countries came together to share the latest research and development findings related to critical aspects of evolving standards, technologies, security issues, user applications and interfaces (www.uvic.ca/hsd/itch/home/history/index.php). ITCH will convene again in February 2019.
- The UK's Health Foundation's Q initiative has been hosting a series of conferences in the UK, providing a platform for quality improvement professionals to come together. Over 150 delegates attended the conference in the south of England. Keynote speakers focused on the critical role played by leadership and culture in reducing harm and improving quality for patients and their families. Delegates presented their work through a wide variety of presentations, workshops and poster sessions, highlighting the rich variety of work and providing opportunities for sharing good practice. The Q Community, sponsored by the Health Foundation, supported by Don Berwick from IHI, is a growing network of quality improvers from across the UK, with over 1,600 members (<https://q.health.org.uk/>).
- The UK's Professional Standards Authority International Regulatory Conference in March is fast becoming one of the largest annual gatherings of health regulators and academics with an interest in furthering the theoretical and empirical base of



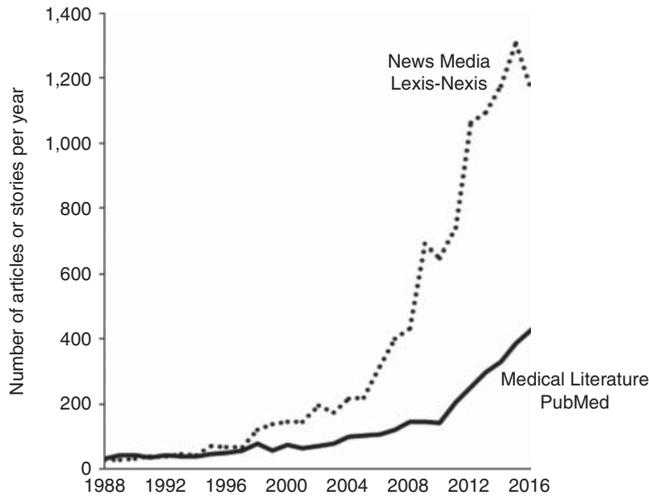
professional health regulation. This year's focus was on exploring ways to build trust in health professionals and to look at reasons why public expectations towards health professionals are changing (www.professionalstandards.org.uk/what-we-do/improving-regulation/find-research/regulation-research-academic-conferences).

- Washington Patient Safety Coalition's 15th Annual Northwest Patient Safety Conference, which brought over a hundred advocates and senior-level professionals together last May for a day of presentations, workshops and high-intensity discussion sessions. Through sharing of stories, case studies and research summaries, delegates learned about government policy changes, increasing potential through data mining of large data sets for pro-active harm prevention, inter-professional collaborative opportunities expanding from acute care in-patient to community-based initiatives, growing challenges to prevent harm from overdiagnosis and practical measures to improve communication between all stakeholders (www.wapatientsafety.org/news-events/patient-safety-conference).
- Annual Scientific Congress, Royal Australasian College of Surgeons, Adelaide, Australia May 8-12, 2017 (<http://asc.surgeons.org>). Disparate range of topics, with a very active patient safety and clinical quality section.
- Biennial Meeting International Society for Gastrointestinal Tumours (InSiGHT) July 5-8, 2017, Florence, Italy. Over 400 delegates from multiple nations, outlining not only scientific aspects but also the effect of health systems on delivery of evidence based and cutting edge clinical care (www.insight-group.org/meetings/florence/).
- InSiGHT Council meetings (held twice a year; in 2017 in London and Florence) with a focus on upskilling poorly developed countries in Asia and Africa in areas of genetic counseling, cancer prevention and early detection.
- The fifth Annual Preventing Overdiagnosis: Winding Back the Harms of Too Much Medicine conference attracted nearly 400 attendees from 22 countries to Quebec City in August. Growing attention since the inaugural conference at Dartmouth is evident in exponential growth of publication numbers (see Figure 1) and an evolution from just describing the problem then to now examining implemented solutions. Choosing wisely together (doctors, patients and the guideline research community), spending wisely (government, management and policy communities) and promoting meaningful communication (knowledge translation efforts) are critical to resolving inconsistent practices or beliefs and suboptimal outcomes in order to find the proper balance between doing too much vs too little. Evolution in the appreciation and understanding of complex systems, identification of knowledge gaps and the need to overcome our own inertia (the "we've always done it this way" justification) were discussed by representatives from government, management, medicine, nursing, data analysts, social scientists and other academic researchers, lawyers, journalists and journal editors. Registration is already open for the next conference, August 20-22, 2018, in Copenhagen, Denmark (www.preventingoverdiagnosis.net).
- The International Society for Quality in Health Care Conference in London, October will be host to 1,500 delegates from over 40 countries. This year's theme will focus on how improvement at the systems level can be achieved (www.isqua.org/Events/london-2017).
- IDWeek (www.idweek.org/past-and-future-events/), the conjoint Annual Conference of the Infectious Diseases Society of America, the Society for Healthcare Epidemiology of America, Pediatric Infectious Diseases Society and HIV Medicine Association, held October 4-8, 2017 in San Diego, was attended by some 7,000 infectious disease enthusiasts who were able to choose among more than 80 symposia, nearly 200 oral presentations and almost 2,000 poster presentations.

- Patient leadership Summit, London, December 15, 2017 “Enabling patient leaders to work collaboratively with the NHS through to co-production” (healthcareconferencesuk.co.uk).

This also marks a year of global political events that challenge communities like ours. The USA and the UK each appear to be turning inward, seeking to curtail immigration and break away from long-standing international partnerships; France flirted with but did not follow a similar path; democracy and civil rights appear threatened in several European countries, and have essentially disappeared in Venezuela. While these events may seem outside the sphere of interest of this journal, in fact they do raise issues central to health governance and, more generally, the health of populations. According to the 1997 Jakarta Declaration on Leading Health Promotion into the 21st Century, “The prerequisites for health are peace, shelter, education, social security, social relations, food, income, the empowerment of women, a stable eco-system, sustainable resource use, social justice, respect for human rights, and equity. Above all, poverty is the greatest threat to health” (World Health Organization, 1997).

Clearly, global political events affect public health, not least because of the potential for damage to essential scientific collaborations (Maxmen, 2017). This brings us to the question of what each of us in the health sector can do to ensure that good governance will prevail in protecting the well-being of inhabitants of countries around the world. Hopefully, the answer will not be widespread boycott of scientific journals and scientific conferences based in any particular country – something that injures innocent third parties but already has been initiated (Oransky and Marcus, 2017). It is important that we all stay active and involved; please let the *International Journal of Health Governance* know how best to serve your information needs.



Notes: News media search in Lexis-Nexis (Newspapers, major world publications, magazines, wire services and blogs conducted on August 1, 2017): overdiagnosis OR overdiagnosed OR overdiagnose OR overdiagnosis OR over-diagnosed OR over-diagnose from January 1, 1987 to December 31, 2016. Medical literature search in PubMed on same date with same terms and time frame. Reproduced with permission of Steven Woloshin, MD, MS and Lisa M. Schwartz, MD, MS, Professors of Medicine and Community and Family Medicine, Co-Directors of the Center for Medicine in the Media, Dartmouth Institute for Health Policy and Clinical Practice, Lebanon, NH

Figure 1.
Trends in journal
articles and news
stories about
overdiagnosis

We close with our profound thanks to the following Peer Reviewers, who gave so graciously of their time to support this journal, and more broadly, international scientific collaboration:

Patience Abor
Louise Ackers
Rajeev Advani
Roger Atinga
Alex Berland
Johan Berlin
Angie Bricco
Ian Callanan
Eric Chan
Respicius Damian
Uta Dietrich
Lydia Dixon
Yvon Dufour
Laura Font
Nick Harrop
Jeanne Lythgoe
Fiona MacVane Phipps
Leanne Male
Mahendran Maliapen
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William Schaffner
Lisa Schilling
Edward Septimus
Sam Sheps
Allan Spigelman
Akeau Unahalekhaka
Philip Vergauwen
Carmel Williams
Lloy Wylie

David Birnbaum and Michael Decker

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