

## IMIA 3.0: Connecting and Sharing Knowledge

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As the Worldwide Web is being semantically upgraded, on its way to its third incarnation, most information-intensive domains are following the trend. Our field is moving towards health informatics 3.0 as well, getting closer to what was implied in its very original name: “informatics” for health, i.e., making information fit for automated processing in order to improve health. Indeed, with health informatics 1.0, we have mastered the use of information and communication technologies, and put them to use in a set of systems that mirror the first version of the Web: a lot of information, which can be published and shared electronically, but still mostly relies on human intelligence for its processing. The social web (v2.0) has added the complexity and power of social constructs, human and organizational factors; these challenges dominate the current work of deploying meaningful information systems in the attempt to rescue our ailing healthcare and health systems. With the third wave coming, “health informatics” will reclaim the full meaning that might have been somewhat eclipsed by the “health information technology” of the first web period, and the “eHealth” of the second. We are now, again or more than ever, dealing with the core of our business: information, knowledge and automated processing, in order to impact healthcare and health.

It is thus comforting that many of the International Medical Informatics Association’s working groups have contributed to this issue of the IMIA Yearbook and present their perspectives of

the move to health informatics 3.0. IMIA’s working and special interest groups are the muscle of our association, bringing enthusiasm, innovative ideas and expertise in the many facets of our domain.

This strong participation will help us progress towards achieving two of our strategic goals [1], namely, a) to provide advice, information resources and guidance on how health and biomedical informatics can best support new trends in medicine and healthcare from the perspective of potential impact on populations, clinical settings and personal health, and, b) to be the authoritative source for internationally stimulating, organizing and recognizing research contributions, challenges, directions and ethical principles in biomedical and health informatics research.

IMIA’s richness also lies in its diversity and ability to connect the many regions of the world, and foster exchanges and mutual learning. IMIA’s regional organization will be put under the spotlight for another effort which is starting now: the edition of a special issue on eHealth, in collaboration with the World Health Organization, due to appear as a special issue of the WHO Bulletin, a project made possible thanks to the financial support of US and Canadian institutions. The main goal is to collect evidences and lessons learned from all around the world, in the design, implementation and impact measurement of eHealth activities, trying to answer such as: are they truly improving health equity? What types of disparities are being minimized or

exacerbated? How is the health system as a whole and the governance of it being influenced by these e-health solutions, policies and practices?

A second goal of this project is to give a voice to researchers and implementers globally, by encouraging international teams of authors, and, if needed, providing support and mentorship. Finally, it is expected that this publication will provide useful material to help orient high-level decision-makers as they work on furthering the global eHealth agenda [3] by promoting better interoperability of health and healthcare information systems, in particular through a World Health Assembly resolution.

The call for papers was published on June 1<sup>st</sup>, 2011 [2]. Contributions are evidently welcome!

And to fuel the sharing of knowledge on these important topics, the international medical informatics community will meet in Oslo, at the Medical Informatics Europe 2011 conference [4], from August 28<sup>th</sup> to 31<sup>st</sup>. Appropriately, the main theme of this conference will be “User centered, networked healthcare”.

### References

1. Murray P, Haux R, Lorenzi N. Let a thousand flowers bloom: transition towards implementation of the IMIA strategic plan. *Methods Inf Med* 2007;46(6):625-8.
2. <http://www.who.int/bulletin/volumes/89/6/11-090274.pdf>, last accessed on June 2<sup>nd</sup>, 2011
3. [http://apps.who.int/gb/ebwha/pdf\\_files/WHA58/WHA58\\_28-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA58/WHA58_28-en.pdf), last accessed on June 1<sup>st</sup>, 2011.
4. <http://www.mie2011.org>, last accessed on June 1<sup>st</sup>, 2011.