East Meets West

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Healthcare is both universal and local. Although the challenges can be easily shared globally, the solution must be strongly affected by local healthcare policy, social acceptance of general publics of the nation, and other various local factors. The other way around, a silver bullet for a very local problem of a small section of hospital can be found from the other side of the glove.

While working as a reviewer, the author came across so many reinventions of the wheels and too-simple opinions simply introducing cases of other culture as solutions of certain challenges without any modification (a person to express such opinions called "DEWANOKAMI" in Japanese). Most of the readers may have same experiences, I believe. The only way to avoid publishing such papers and opinions is to introduce reviewers and editors from other cultures.

The editorial committee of the European Journal of Biomedical Informatics (EJBI) newly invites three editors including the author from the board of the Japanese Association of Medical Informatics (JAMI) [1]. JAMI will encourage its members to submit papers and case reports to EJBI. We, Japanese editors, hope to make EJBI as a window to share insights and experiences between Japanese and European researchers.

One feature of Japanese medical informatics research is the existence of professors of university hospitals. As a result, many researches presented in JAMI annual conference series are strongly related with real clinical needs; some of them are about development and introduction of innovative hospital information systems and others are about data analysis for better hospital management.

For example, the author is the professor of medical informatics in school of medicine and of informatics, in addition to be the chief information officer of university hospital. The author designs, introduces, and manages a hospital information system, as well as conducts education and research on medical informatics for medical and informatics students. Additionally, the author is Ph.D. of computer science graduated an engineering course. It means that university students conduct medical informatics researches strongly related with needs of clinical field under computer scientist's direction. As a result, some of the prototypes developed as a Ph.D. or a master project are introduced to daily clinical activities.

The six papers from Japan published in this issue are typical examples.

I hope, European researchers will get some insights to promote their own researches from the papers and papers on comming issues.

Through his experience worked as visiting professor of mobile computing and augmented reality at the University of Oulu, the north end of Europe, in his early research career, the author knows how collaboration between strong European theoretical researches and strong Japanese development harvests wonderful academic fruit. The author expects that this newly opened window between Europe and Japan initializes lots of fruitful collaborations.

References

1. Japanese Association of Medical Informatics : http://jami.jp/english/