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Message from the Guest Editor



Dr. Svetlana Pospelova
WAML Governor (Russia)

For half a century the WAML has been creating a platform for discussion and sharing knowledge in the field of Health Law, Legal Medicine and Bioethics for the professional community from all countries of the world. Non-profit organizations across the globe, collaborating with the WAML play an important role in this field, in particular the European Association of Health Law (EAHL). This issue of Newsletter opens with a paper by the WAML and the EAHL Vice-President Prof. Mammadov, devoted to review of the 6th EAHL Conference "Health Rights Regulations and the Distribution of Healthcare in Europe" which was held in Bergen, Norway, on 28-29 September 2017.

The WAML 50th Golden Anniversary Annual Congress in Azerbaijan demonstrated that Russian researchers and medical lawyers are very interested in international cooperation: The Russian delegation, brought together by the National Institute of Medical Law, was the largest at the Congress. Many of the delegates participated in the scientific program of the Congress with presentations and posters and submitted

research papers to the authoritative international journal *Medicine and Law*. It is especially valuable that some participants expressed willingness to join the Association. In the light of these activities, it is a great honor for me as a Guest Editor, to present in this issue of the WAML Newsletter the papers of the famous Russian researchers and experts in the field of Medical Law and Forensic Medicine.

In recent years, activities of the law enforcement agencies on investigation of cases of adverse outcomes of medical care have extended considerably. Prof. Erofeev, who has been studying the problem of expert legal assessment of the unfavorable outcomes of medical care and medical errors for over 40 years, covers these issues in his paper.

Analysis of the law enforcement practice in the Russian Federation demonstrates increase in cases of all types of liability of health professionals and medical organizations. The issues of civil liability are especially topical because the monetary value of submitted and satisfied claims is steadily growing. Dr. Kamenskaya describes the current situation in her paper.

Currently in the Russian Federation, a forensic medical examination is not the only type of examination that can be requested by the court while hearing "medical" lawsuits. A significant part of relevant issues is resolved on the basis of medical care quality assessment by professional non-profit organizations. This matter is analysed in the article written by Dr. Kuranov.

Disclaimer: The articles presented in this newsletter express the views of the authors and do not necessarily reflect the attitudes or opinions of the WAML

The legislation in the sphere of biomedicine is being developed rapidly. One of the most awaited laws of high social significance is the draft law on organ donation and transplantation. Relevant successes and prospects for the development of this area are outlined in my article.

The active application of medical technologies in the Russian Federation contributes to the development of inbound medical tourism. The organization of treatment of foreign patients requires that a wide range of specific legal issues should be regulated, with relevant special training of medical lawyers. This is further illustrated in a paper of Mr. Zaves, a leading expert in the field of medical tourism.

Wish you nice reading!

Dr. Svetlana Pospelova
WAML Governor



Yuriy Sergeyev
WAML Honorary Governor (Russia)

Dear Colleagues and Friends!

On behalf of the Russian Medical and Legal Professional Society, I would like to wish you a Merry Christmas and a Happy New Year 2018!

Let this coming year bring you good health, happiness and prosperity, great success in the development of our favorite science - Medical Law!

Sincerely yours,

Prof. Yuriy Sergeyev

Health Rights Regulations and the Distribution of Healthcare in Europe



Prof. Dr. Vugar Mammadov
WAML Treasurer

The 6th EAML conference entitled “Health Rights Regulations and the Distribution of Healthcare in Europe”, successfully held in Bergen, Norway, on 28-29 September 2017, became a meeting place for more than 120 specialists from about 35 countries. WAML Governors Henriette Roscam Abbing, Anne-Marie Duguet, Nicola Glover-Thomas, Thierry Vansweevelt and Vugar Mammadov attended the meeting.

A number of important decisions were made during the conference. A new leadership of the Association was elected during the conference, with four new members. The new composition of the Board:

Prof. Karl Harald Søvig, Dean of Law Faculty, University of Bergen (Norway) – President

Prof. Dr. Vugar Mammadov (Azerbaijan) – Vice-President

Prof. Verena Stühlinger (Austria) – Vice-President

Steven Lierman (Belgium) – Treasurer

Joaquín Cayón-De Las Cuevas (Spain) – Secretary

Annagrazia Altavilla (France)

Athanasios Panagiotou (Greece).



A seminar for young researchers (PhD seminar) became an important part of the conference. During the seminar that was organized in the form of parallel sessions with presentations, all participants were divided into 3 groups. Young researchers had an opportunity to present and discuss their theses, as well as get the professor's advice on the intricacies of the research.

All abstracts submitted to the conference have been published in the special issue of the European Journal of Health Law as "Book of Abstracts".

The conference addressed every aspect that contributes to a distribution of healthcare that is just and in accordance with human rights standards, in times of scarcity and high-cost innovations: healthcare that is safe, culturally sensitive, cost-effective, with respect for patients' rights and human rights obligations. This includes the influence of international (UN) and European jurisprudence (Council of Europe, European Union), public health measures, standardization and prioritization of health care, professional guidelines, innovations (e.g. robotization, gene-therapy, telemedicine, orphan drugs, personalized medicine, medical research), resilience and self-care, new models of care, interplay between private and public healthcare providers and health insurances, as well as co-operation at European level on strategies to effectively manage cost effective, patient friendly healthcare. Challenges within contemporary European (and national) health law from a patient's rights and a social perspective as well as many other issues were addressed within the scope of the EAHL conference theme.

The Investigative Committee of Russia: Close Attention to the Adverse Outcome of Medical Care.



Prof. Sergey V. Erofeev, MD
Head of the Bureau of Forensic Medical
Examination of the Ivanovo Region
Head of the Department of Forensic Medicine
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Honored Health Worker of the Russian Federation, Russia

In the Russian Federation, the investigation of the crimes of medical personnel is conducted primarily by the Investigative Committee of the Russian Federation (IC RF). A forensic medical examination plays an important role in establishing the truth in medical conflicts. Therefore, it is the forensic examiner who notices significant changes in the activity of the investigative bodies in relation to medical personnel. The activity of the investigation in Russia is combined with the growth of the sense of justice and activity of the population. Together, these factors led to the same type of changes in different regions of the country.

- In the second half of the 1990s, the first wave of growth in criminal cases against physicians was noted: their number in the regions of Central Russia grew 3-13 times.
- From 2000 to 2010, the number of cases of criminal prosecution of doctors continued to increase several times in comparison with 1990. It is significant that preliminary investigation and criminal cases were initiated during this period solely on complaints of patients or their relatives. At the same time, the civil law way of claiming satisfaction in courts for causing harm to health when providing medical care rapidly developed.

In the last 5 years, the cases of adverse outcome of medical care became the subject of special attention of the Investigative Committee of Russia, which was expressed in the following events.

- ✓ Conducting forensic medical examinations not only in criminal cases, but also with all preliminary investigations.
- ✓ The initiation of a criminal case or verification is practiced not only on the complaints of the victims, but also, in their absence, on the initiative of the investigative authorities.
- ✓ Since 2016, there has been an initiative of the IC RF: the creation of its own expert groups under the regional offices of the IC of the Russian Federation, separated from the forensic medical service of the country, for the production of examinations on "medical matters". During this year, the experience of creating these expert units was analyzed in the IC RF and in 2017 it

was recommended for distribution throughout the country. The principles of this work are formulated in a special letter of the Investigative Committee of the Russian Federation “On the organization of forensic medical examination in the Investigative Committee of the Russian Federation”. It should be emphasized that for more than 90 years the state forensic medical service of the country has been conducting a conscientious and successful examination concerning improper provision of medical care. However, in recent years via active interference of the mass media, society has formed a stable opinion on medical corporatism. For this reason, patients and investigators do not trust the opinion of state forensic experts working in the healthcare system. As an expert with 40 years of experience, I consider such an attitude absurd, but it’s impossible to change public opinion on corporatism.

- ✓ Since 2017 at the initiative of the IC of the RF, health authorities in all regions of Russia have been asked to conclude agreements with the investigating authorities: to inform the police and the IC RF voluntarily and without requiring complaints from relatives, about all deaths of pregnant women, parturients, newborns, children and adolescents under 18. The bodies of the IC RF have the right to initiate an investigation or a criminal case for each of the reports. A new term appears in law enforcement practice – “iatrogenic crimes”.
- ✓ Special attention of the IC RF is paid to ensuring the high qualification of investigators handling inquiry on “iatrogenic crimes”. Therefore, the Academy of the IC of the Russian Federation has intensified the training of investigators in the field of methods for medical events investigation; similar professional seminars are included in the training programs for investigators in all regions of the country. The level of investigator awareness of the legal regulations of medical activity has increased. In communication with the investigators their specialization in the field of legal basis of the work of doctors is noticeable.

Even a brief retrospective analysis of these measures indicates an increase in the activity of the investigative authorities concerning adverse outcomes of medical

care. At the same time, it is important to remember that after all the examinations and courts, not all claims are justified: from 18% to 52% in various regions of Central Russia. Close attention and high activity of the investigative bodies to medical conflicts leads not only to the growth of care and discretion of doctors. This system of measures raises concern and alarm among health authorities and doctors with the highest risk of conflicts. In many areas this alarm has led to a personnel outflow from urgent specialties and the development of other typical signs of “defensive medicine.”

Some Peculiarities of Application of the Rules Establishing Civil Liability of Healthcare Organizations



Dr. Natalia A. Kamenskaya, PhD in Law

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Currently, the conditions and procedure for compensation for harm caused to life and health including those due to improper medical care are determined by the provisions of Chapter 59 of the Civil Code of the Russian Federation (CC RF). These provisions are devoted to obligations arising as a result of causing harm or to the so-called delictual (tort) obligations (from Latin “delictum” = transgression) which were identified as a separate category in Roman law. These obligations arise in connection with the violation of the absolute and subjective civil rights of the victims; they are extra-contractual in nature and are intended for safeguarding the victims’ right to compensation for material or moral harm. An obligation to compensate for harm arising from civil liability is normally imposed upon the person who caused the harm if the attributes of an offence are present - which includes the occurrence of harm, the wrongfulness of the conduct of the person who caused such harm, a causal link between his/her behavior and the occurrence of harm and also his/her guilt.

Applying the provisions regarding obligations arising as a result of causing harm, courts develop common legal positions in relation to the application of the provisions of the CC RF. Some peculiarities of modern law enforcement practices and emerging trends in civil liability for improper medical care may be highlighted.

1. A victim has the burden of proving that specific harm has been caused, its amount and that the defendant is the person who caused the harm; the element of fault on the part of the person that caused the harm is presumed. Article 1064 of the CC RF establishes presumed fault of a person that caused harm which means that the defendant must prove that the harm was caused not by his/her fault. The victim shall submit evidence confirming physical injury or other health impairments, the amount of harm caused and evidence that the defendant is the person who caused the harm or the person obliged by law to compensate for harm.
2. In accordance with the CC RF, harm caused to a person or property of a citizen is subject to compensation in full by the person who caused the harm. Based on law enforcement practice:
 - ▶ this norm is peremptory and does not provide for possibility of reducing the amount of harm subject to compensation by agreement of the parties;
 - ▶ the amount of compensation for harm may only be adjusted upwards, in particular, with regard to compensation for harm caused to the life and health of a citizen;
 - ▶ in determining the amount of compensation for harm, actual damage and forgone profit must be considered;
 - ▶ under the rules of evidence and evidence assessment the amount of compensation for harm and therefore the validity of claims shall be determined by a court.
3. Liability of an employer for harm caused by its employee arises regardless of form of ownership of the employer. According to the norms of the CC RF a legal entity or a citizen shall compensate for harm caused by its employee in the performance of labor (or employment, or official duties).

Liability for harm arises when there is a causal link between actions (or inactions) of health care workers (regardless of form of ownership of health

care organizations) and the resulting consequences for a patient.

The employer bears civil liability, regardless of whether its employee – the person that caused harm – was brought to criminal liability or administrative responsibility.

4. When establishing the amount of compensation, courts detail the principle of full compensation for harm caused as determined by the CC RF:
 - ▶ in case of the causing of physical injury or other injury to the health of a citizen, the lost wages (or income) which he had or definitely could have had and also supplementary expenses incurred that were caused by the injury to the health shall be subject to compensation, if it is established that the victim needs the respective means of assistance and care and does not have the right to receive them free of charge;
 - ▶ a court may refuse compensation for supplementary expenses incurred that were caused by the injury to the health, if the claimant has failed to provide any evidence showing that the expenses were actually incurred or will be incurred in the future;
 - ▶ to compensate the victim for additional expenses, at least two conditions should be fulfilled simultaneously: it shall be established that the victim needs additional services and does not have the right to receive them free of charge;
 - ▶ the victim must prove that he/she needs additional means of assistance which he/she is unable to receive free of charge;
 - ▶ the list of expenses provided by this article of the CC RF is not exhaustive.
5. In determining the amount of compensation for psychic harm, courts assume that the harm caused to the victim in all cases lead to the victim's physical and psychic suffering thus assuming that the victim suffers psychic harm. Courts establish the following grounds for compensation for psychic harm in cases of improper medical care:
 - ▶ experiences in connection with the loss of relatives (family or blood relationship with the victim does not in itself constitute absolute grounds for compensation for psychic harm;

at the same time when considering cases that involve compensation to other persons for psychic harm in connection with the death of the victim, in particular, to the victim's family members and persons that were dependent upon his/her support, courts take into account circumstances evidencing physical or psychic suffering caused to these individuals);

- ▶ experiences in connection with the inability to continue active social life;
- ▶ experiences in connection with the loss of employment;
- ▶ experiences in connection with disclosure of patient information.

Thus, the patient's right to compensation for harm caused to his/her health during medical treatment is realized within the framework of civil liability and is compensated by medical organizations in accordance with the general procedure for compensation of harm and the norms of civil legislation.

Formation in the Russian Federation Practices of the Examination of Medical Care Quality by Professional Medical Organizations.



Dr. Vladimir G. Kuranov

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Court cases connected with health and health care, are impossible without the application of professional medical knowledge. Judges are professional lawyers, but not having medical knowledge, have to resort to the assistance of experts in the field of health.

The procedural legislation of the Russian Federation and other States knows the forensic institute, which is appointed in case of need of knowledge in science, technology, art or craft. The most common form of

forensic examination in the “medical” cases is forensic medical examination.

But in addition to forensic medical examination, the Russian legislation still incorporates the concept of examination of medical care quality. This examination is performed to identify irregularities in the delivery of health care, including assessing the timeliness of delivery, the correct choice of methods of prevention, diagnosis, treatment and rehabilitation and degree of achievement of planned result.

Unfortunately, courts often do not distinguish between these two kinds of examinations, ordering only a forensic medical examination. As a result, the Bureau of forensic medical examination has to return the cases back to court because they are not competent to examine the quality of care.

Legislation on the expertise of the medical care quality in the Russian Federation is formed. In our opinion, important is the recognition by the legislator of the role of health professional organizations in this field. Today in Russia the formation of professional non-profit organizations is allowed in accordance with the following criteria:

- ▶ belonging to medical or pharmaceutical workers;
- ▶ belonging to a profession (doctors, nurses (physician assistants), pharmacists);
- ▶ belonging to one medical specialty.

It is specifically provided that a professional non-profit organization can participate in the development of rules and regulations in the health sector, in addressing issues related to violation of these rules and regulations. Such organizations can participate in the development of criteria of the quality of medical care.

It seems that a professional medical organization can take the responsibility and functions of independent expertise of medical care quality.

So, during 2013 the territory of the Perm krai created the public organization “Professional Medical Community of the Perm krai”. The medical community is organized to ensure the interoperability of the medical community, medical organizations and government authorities in the following areas:

- the creation of a socially oriented model of national healthcare,

- ▶ assistance to creation of necessary conditions for exercise of the physician's professional service in accordance with his/her vocational, ethical and moral duty to society and patients,
- ▶ assistance in the organization of government medical activity, formation of system of public health monitoring the health of the citizens and the activities of bodies responsible for ensuring the preservation of the health of citizens.

One of the structures created in the framework of the Community, was the Committee on pre-trial settlement of conflicts. Objectives of the Committee are:

- ▶ Facilitating the resolution of disputes in the field of health between health professionals, health workers and patients, medical professionals and medical organizations, medical organizations and patients;
- ▶ Participation in development of normative legal acts in the field of health;
- ▶ Improving the system of informing Community members on issues of legislation on health protection, medical ethics and deontology;
- ▶ Expert assessment of quality of care.

The Committee on pre-trial settlement includes medical lawyers, forensic experts, mediators, healthcare managers, and clinicians. When considering a specific case, the Committee engaged experts in the relevant medical specialty.

Practice shows that the judicial and investigative bodies are conservative and have traditional thinking with a negative attitude towards the conclusions of the professional organizations. The enforcers are difficult to get to change from the template that a legally relevant conclusion on the matter can only be given by the forensic experts. However, some changes to this state of Affairs has emerged.

In 2017 the Sverdlovsk district court of Perm considered the claim of a patient to one of the city hospitals. The subject of the claim was compensation for psychic damages in respect of defects of rendering of medical aid. According to the petitioner, the practitioner did not perform the necessary allergological research, and incorrectly prescribed dietary food. The course of the proceedings necessitated special medical knowledge, the court on its own initiative raised the question of the appointment of forensic examination. Defendant (city hospital) then

applied to the Professional medical community of the Perm krai. The court prepared a letter to which the Medical community expressed a willingness to conduct the examination with an indication of involved professionals and their skill level. The defendant's application for order of examination as to the Community level of practice was granted. The examination established the absence of defects in the rendering of medical aid in the treatment of the plaintiff. The claim was denied. The decision was motivated on the basis of facts established by Community experts.

Thus, in the Russian Federation there are necessary legal arrangements for the independent examination of the quality of care by professional non-profit organizations.

Legal Regulation of Human Organ Donation and Transplantation in the Russian Federation: Major Achievements and Prospects for the development



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Research Director of the National Institute of Medical Law
WAML Governor, Russia

Human organ transplantation is considered to be one of the utmost social values all over the world, since transplantation can save human lives and ensure a higher quality of life. Each year the number of human organ transplantations in the Russian Federation is increasing steadily. However, according to an expert assessment, it meets only 10% of the current need. This gap is related to the existing institutional, legal, moral, and ethical issues concerning the key procedures related to human organ donation and transplantation, including the declaration of brain death and organ withdrawal.

Human organ donation and transplantation are carried out on the basis of legislation and human rights approach, in accordance with the principles proclaimed by the international community.

In 2015 the Russian Federation took an important decision towards **the unification of the national legislation in accordance with the international norms on criminalization of trafficking in human organs**. The President of the Russian Federation signed the Convention Against Trafficking in Human Organs adopted by the Committee of Ministers of the Council of Europe on 9 July 2014. The Convention is the key international document aimed at preventing and combating this global criminal phenomenon. It should be noted that compliance with the Convention requires introduction of relevant criminal and administrative liability in the national legislation of the Russian Federation.

Currently, human organ donation and transplantation are regulated by a special Federal law “On Transplantation of Human Organs and (or) Tissues” 1992. The current law requires a significant improvement in the regulation of the system of human organ donation as the main condition for their further transplantation. In this context, a number of amendments were introduced in 2015 to the Federal law “On the Fundamentals of Protecting the Health of Citizens in the Russian Federation,” which is the basic law which regulates healthcare:

1. Organ donation (medical examination of a donor, ensuring the integrity of donor organs and tissues prior to retrieval from the donor, as well as the retrieval, storage and transportation of donor organs and tissues) was included into the term “medical activity;”
2. Mandate of the Federal bodies and executive bodies of the subjects of the Russian Federation in the sphere of health care in organizing organ donation and transplantation was enhanced;
3. The sources and mechanisms of funding medical activities related to organ donation were specified. The Federal budget is for 2017 and for 2018 about 241.2 million rubles for these purposes;
4. Medical activities related to the organ donation for transplantation were included in the Program of the State Guarantees of Free Medical Care to the Citizens of the Russian Federation;
5. Unified system of state registration of donors, donor organs and recipients was started.

All these changes have boosted an increase in organ donation, which resulted in a rising number of transplantations in the Russian Federation in 2015-

2017. At the same time, ensuring compliance of the subjects of the Russian Federation with the Federal requirements on the organization of human organ donation and transplantation is still an issue.

One of the mandatory legal regulations on postmortem organ donation – **“the order of declaring brain death”** was also amended. In the past, the relevant order of the Ministry of Health of the Russian Federation used to regulate the procedure for declaring brain death only in adults, aged 18 years and older. This made retrieving a donor organ for a child in need of transplantation possible only in rare cases with a donor organ of appropriate measurements. In 2016, the Ministry of Health of the Russian Federation approved a revised order including declaration of brain death in children aged 1 year and older. This decision opened new prospects for human organ transplantation in children.

Among other most significant changes in the national legislation is the shift **from a presumption of consent to a dual model of regulation** of declaring willingness to donate an organ or tissue following death.

Initially, the legislative regulation of organ donation in the Russian Federation was based on the “presumption of consent”, that covered the procedure for the retrieval of organs and tissues from all donors, regardless of their age and legal capacity. Since 2012, significant changes have been introduced to this model. The current norms of the Federal law “On the Fundamentals of Protecting the Health of the Citizens in the Russian Federation” (art. 47) stipulate a dualistic model of regulation:

1. In case of death of an adult legally capable citizen - the presumption of consent exists. In the absence of the donor’s will, the right to declare his lack of consent belongs to his spouse or one of his close relatives: children, parents, adopted children, adoptive parents, brothers and sisters, grandchildren, grandfather, grandmother.
2. In case of death of a minor or a person recognized as legally incapable - the requested consent of one of the parents is prescribed.

Federal Law provides for 3 forms of expressing the will of consent or disagreement to the removal of organs and tissues: oral form in the presence of witnesses, a written form certified by the head of the medical organization or notarial form. This information is stored in his medical documentation.

An important step to improvement of the legislation is the development of a new Federal law: **“On Donation of Human Organs and Their Transplantation”** was drafted by the Ministry of Health of the Russian Federation with participation of the leading experts and the professional community and was submitted for public discussion in 2013. Currently, the draft law is under consideration by the Government of the Russian Federation, its provisions are actively discussed and supported at the Parliamentary hearings at the State Duma, at the forums of the Ministry of Health of the Russian Federation, as well as at conferences organized by professional NGOs: the Russian Transplant Society and the National Institute of Medical Law.

The purpose of the new law is to create legal and organizational conditions for the human organ donation and transplantation, to achieve a balance between human organ donors and recipient’s rights. Based on the international documents, the draft law provides definitions of terms which are the most significant and require unambiguous interpretation, stipulates the basic principles of human organ donation and transplantation.

The draft law also aims at detailed regulation of the set of relations that arise in connection with organ donation and transplantation, including the process of transplantation coordination. To ensure the right of relatives of a potential donor to disagree with organ retrieving, a new mechanism is suggested for informing relatives on the declaration of brain death. State support for the promotion of organ donation is envisaged.

It introduces the Federal Register of donor’s organs, recipients and human donors, ensures protection of relevant personal data. There are a number of prohibitions in the draft law, to prevent possible abuses in the field of donation and transplantation, including trafficking in human organs.

Thus, the Russian national legislation in the field of donation and transplantation has undergone changes in recent years, with a positive impact on the increase of the bank of donor organs. At the same time, successful development of transplantology in the Russian Federation requires due enforcement of legal norms. Also, it is equally important to develop a positive attitude towards the idea of organ donation solidarity in the modern society.

Development of Inbound Medical Tourism in Russia: Current Issues



Sergey A. Zaves

Head of the Project for the Development of Inbound Medical Tourism under the Ministry of Health of the Russian Federation

In recent years, there has been a very rapid increase in the flow of foreign citizens entering the Russian Federation for receiving medical care. The number of inbound medical tourists registered in clinics of the Russian Federation has grown by almost 8 times in 2014-16: from 8,500 to over 66,000. In monetary terms, the volume of relevant paid medical care provided has reached US\$ 35 million in 2016.

Area of origin of patients entering the Russian Federation for receiving medical care is very extensive and is expanding constantly. About 62% of the total number of foreign patients arrive in the Russian Federation from Central Asia, 32% from the European states, and 5% from South-East Asia. Africa, South and North America and Australia account for about 1% of the total foreign patients’ flow.

The most popular services among the foreign patients are fertile tourism (donor fertilization and IVF), dentistry, gynecology, plastic surgery, cardiology, ophthalmology and oncology.

According to the Ministry of Health of the Russian Federation, the standard of medical care in a number of care profiles at the domestic Federal medical organizations is comparable with that at the leading clinics of Europe, the U.S., and Asia.

These Russian medical institutions outperform European clinics in a number of care directions, in terms of competitive price of medical services, and also available unique care technologies. This is true for such specialties as oncology, orthopedics, ophthalmology, neurosurgery, treatment of cardiovascular diseases, and dentistry.

The analysis of the cost of medical services proves that, in terms of price-quality ratio, the Russian Federal medical centers provide significantly more competitive offers to foreign citizens compared to relevant institutions based in other countries.

Increasing flow of foreign citizens receiving medical care in the Russian Federation clearly demonstrates the high quality of services provided, and also the growing interest of foreign citizens in the potential of the Russian health care. Thus the Russian Federation is a country with broad prospects for the development of inbound medical tourism.

The Ministry of Health of the Russian Federation established a project office for the development of inbound medical tourism in 2017. The main tasks of the project office are:

- ▶ Assessing the potential of inbound medical tourism and the main directions of its development,
- ▶ Drafting measures and tools that stimulate medical tourism, including preparation and implementation of a marketing strategy,
- ▶ Promoting capacity of the Russian Federation to provide medical care to foreign citizens.

Another direction of activities is development of a system of requirements for the certification of medical institutions aimed at further involvement of these institutions in the program of providing care to medical tourists, assessment of medical institutions, and leveling off administrative and other barriers to the development of inbound medical tourism and turning it into a comprehensive economic cluster.

The main issues preventing intensive increase in the number of patients coming to the Russian Federation from abroad are:

- ▶ Low awareness of foreign citizens about the capacities and potential of the Russian health care,
- ▶ Issues related to visa support,
- ▶ Lack of a comprehensive approach to reception and accompanying of foreign patients, including language support.

In addition, an important prerequisite for the participation of the European and the U.S. service and insurance companies is the availability of relevant international certification of the medical organizations.

To address the set of issues outlined, the Ministry of Health of the Russian Federation is working on assessment of potential patient flow from various countries. An advertising strategy is being developed to promote the Russian Federation as a center providing high-tech medical care. In addition to the CIS countries, the priority is given to China, countries of the Eastern Europe and the Middle East. The efforts aimed at attracting patients will be focused on these regions.

As part of action aimed at raising awareness about the relevant potential of the Russian Federation and possibilities for providing medical care for foreign citizens, it is planned to launch a multilingual information Internet portal with a detailed description of the leading Russian clinics in 2018. This will help the potential foreign patients to select an institution appropriate to their personal needs, will ensure treatment organization and adequate response to all other related issues. In the near future this service will assist in prompt provision of treatment, in ensuring accommodation, as well as in planning tours and entertainment programs.

We are guided by the fact that arriving patients are also essentially tourists. Our challenge is to introduce them, to a possible extent, to the Russian Federation and to show cultural diversity of the country. It is obvious that the economic effect of the stay of foreign patients in the Russian Federation is not limited to the costs of treatment. One ruble spent by foreign citizens on medical treatment in the Russian Federation is accompanied by one more ruble spent on related costs: accommodation, transportation and food. Increased flow of foreign patients and the development of service packages of care might become an additional source of income for subjects of the Russian Federation.

Development of regional medical clusters continues. The main cities that currently receive the flow of foreign patients are Moscow, St. Petersburg, Samara, Rostov-on-Don, Kurgan, Novosibirsk, Ufa and Kislovodsk. Medical clusters for inbound medical tourism which are developed on this basis are the Central, the North-Western, the Volga and the Siberian ones. Issues of medical specialization, as well as adequate infrastructure, transportation and servicing will be addressed comprehensively within these clusters.

A related challenge is to provide a comfortable language environment for foreign patients at the medical institutions. Medical professionals at large

medical centers are already fluent in English. However, in the context of increasing foreign patients' flows it is necessary to provide services of specialists who would speak not only English, but also the languages of the countries where patients come from. This applies, first of all, to patients coming from China. This work is already underway, and medical organizations in Siberia and the Far East of the Russian Federation are particularly active in this direction, due to their geographical proximity to the PRC and the common border.

Systemic and structural activities aimed at attracting foreign patients, ensuring comfortable environment for their stay at medical institutions, and raising the standard of service will allow the Russian Federation to gain the leading position in providing medical care for foreign citizens in the medium term.

What's Going on with Health Law in Asia?



Vera Lúcia Raposo

On the 16th and 17th October the University of Macau hosted the II Conference on Medical Law, this year titled "Asian Perspectives on Bioethics, Medical Ethics & Medical Law". The Conference was organised by my research circle on Health, Medicine, Technology and Law and supported by the Institute for Advanced Legal Studies.

As some of you may know, I moved to Macau in January 2014, to assume functions at the University of Macau. From the beginning my aim was to develop a trend in health law studies here, based on the work previously started by some of my colleagues, namely Rostam Neuwirth and Tu Guangjian. To bring scholars to the University of Macau was part of my plan and I started by organizing smaller events, with one or two scholars. This time, however, I decide to go big and invited twelve experts in medical law from abroad to bring us their experience and, hopefully, inspire our students to pursue their postgraduate studies in health

law (we actually have a new PhD specialization on health law).

Joining them we had several members of our academic staff, who presented their own researches either in the specific field of health law or in their particular areas of studies, whenever they had some connection with medicine and health. To be honest, we don't have many people specifically dedicated to this area of studies in my Faculty, but last year we created a research group dedicated to medical law, joining together people coming from IP law, competing law, European and international law and civil law, that now consolidate their original areas of studies with health, boosting research in this field, not only from us, but also from our students.

I also invited some friends working in the Macau Executive and in the Macau Legislative Assembly, who were eager to contribute their own perspective about many issues health they deal with in their work.

Furthermore, the conference gave to new researchers - PhD students from the University of Macau - the opportunity to present the preliminary results of their work. I had two of my PhD students participating and it was exciting to see young people preparing to lead the world of health law in Asia.

In the first panel, dedicated to the right to health, participated Weixing Shen, from Tsinghua University, describing the main problems in the drafting of China's Basic Health Care Law; Archie Alexander, from Shreveport, who talked about health-related rights in the ASEAN region; and my colleague Rostam Neuwirth, who tried to identify the missing link for a global health policy.

The second panel focused on ethics in health and actually it ended up being a WAML session: Vugar Mammadov talked about multiculturalism and bioethics; Roy Beran reported the ethical dilemmas he faces when performing clinical trials in his private clinic; and Oren Asman analysed advances directives and Ulysses contracts.

On panel three we discussed patient safety and medical liability. Robert Leflar, from the University of Arkansas, commented on the Japanese scenario in this regard; Alexander Capron, from the University of Southern California, presented an institutional approach to patient's safety; Ian Freckelton, from the University of Melbourne, analysed the evolution of the doctor-patient relationship; and I discussed adverse events reporting

mechanisms, focusing especially in China and Macau. Panel four was dedicated to medical liability. Kevin Wu, from the National Taiwan University College of Medicine, presented apologies as a method to solve medical disputes; Rui Cascão, from the Macau Legal Affairs Bureau, gave us a presentation about the methodology to use when comparing laws on medical liability; Rui Amaral, from the Macau Health Bureau, talked about alternative methods of dispute resolution and the legal solution implemented in Macau in this regard; and our PhD student Yang Manman presented to us on how loss of chance is used in Chinese medical liability.

Panel five was dedicated to patient's rights. My colleague from Macau University, Cheng Hang Leong, talked about medicine and social justice; Luis Pessanha, from the Macau Legislative Assembly, analysed the patient's right to obtain his/her medical record in light of the Macanese law; and Anne-Marie Duguet compared the regulation of genetic tests in Europe and in China.

On panel six we made a connection between health, business and patents. Bryan Mercurio, from the Chinese University of Hong Kong, discussed health protection in international investment agreements; Danny Friedmann, former Lecturer at the City University of Hong Kong, gave a talk about traditional Chinese medicine, personalized medicine and intellectual property law; Du Li, my colleague at the University of Macao, presented about Chinese press coverage of gene patents; and Alexandr Svetlicinii, also my colleague, analysed the regulation of fake food.

Finally, panel seven was all dedicated to traditional Chinese medicine, namely to the new Chinese law on this issue, with four presentations from our PhD students: Ma Zhe, Sijia Liu, Man Teng Iong and Ina Virtosu.

As we can see, the particularity of this event is that we mainly focused on specific Asian issues (Asian problems, Asian values). The fact is that health law is still in an embryonic stage here in Asia, with very few regulations and a small number of judicial decisions. But that does not mean that we don't have many scholars, Asian or Asian based, interested in it and eager to create something new and dynamic here in Asia.

Basically, I can say this was a gathering of people (old friends and new friends) that share a common interest, health law, under the umbrella of the WAML, which endorsed this conference. Actually, this event

included several WAML members and governors; so, in a sense it was a kind of warm up to Tel Aviv and our friend Oren had the opportunity to advertise the 2018 WAML conference.

It was also an opportunity for many of the speakers to visit Macau for the first time, a city where old China meets ancient Europe and crazy Vegas. I'm looking forward to receive them again, or any of you, in this small magic place that I now call home.

VERA LÚCIA RAPOSO / 黎慧華

Assistant Professor of the Faculty of Law of Macau University, China 澳門大學法學院助理教授
Auxiliary Professor of the Faculty of Law of Coimbra University, Portugal 葡國科英布拉大學法學院助理教授

International Contribution to the Field of Medical Law - Ethics from WAML in 2017



Prof. Berna Arda (MD MedSpecPhD)
Ankara University Faculty of Medicine
Vice President of WAML

While the last days of 2017 are approaching it is the time to recall some academic meetings from WAML perspective.

Invited Conference in Nepal

Prof. Berna Arda, Vice President of WAML, gave a speech at Grande International Hospital in Kathmandu on March 29th 2017. This invited lecture was about health law and bioethics in 21st century from a globalized point of views.





Continuous education activity in Ethiopia

Prof. Arda and Dr. James C. Johnston (MD, JD; member of WAML, USA) have cooperated to create the awareness and enhance the information level on health law and ethics in Addis Ababa since 2010. Therefore Dr. Johnston organised international conferences on legal medicine and medical ethics in Addis Ababa together with Ethiopian Medical Association and Addis Ababa University, in 2011 for the first time and 2013 as the second. This year as a continuous ethics education activity; Prof. Arda gave two lectures on these subjects in Neurology Department of Addis Ababa University on 3rd and 4th days of October. The participants were the all fellows of Neurology Clinic. The chief of the clinic emphasized such this training found very effective from continuous education point of view and should be regularly based.



After the lecture together with Ethiopian colleagues, Addis, 3rd of October 2017

Conferences in Indonesia

Two international conferences were held in Indonesia in November; The first one was **"Fraud and Gratification in Healthcare Services Across Jurisdictions"** at the Santika Premiere Hotel, in city of Yogyakarta Indonesia on Monday 6th November.

Prof. Berna Arda from Ankara University Turkey, one of the vice-presidents of WAML, WAML Governor Dr. Henriette Roscam Abbing from Utrecht University Netherlands and Prof. Akram Shair Mohamed from IIUM Malaysia were the invited speakers. Prof. Arda gave a lecture on industry- physician relationship from ethical point of view and mentioned on Turkey context, while Malaysian context and Netherlands context are introduced by these valuable speakers. Rector of the Universitas Islam Indonesia, Deans of the Law Faculty and Medical Faculty, academic staff of these schools, students and more than two hundred participants were present and discussion was full of interesting questions and comments.



The second **International Conference on Health Law at Military Health Care** was in Jakarta, capital of Indonesia, at Rspad Gatot Soebroto Presidential Hospital on Tuesday 7th of November 2017. Dr. Arda delivered a speech on general ethics principles in health law and the role of informed consent in the case of emergency. Dr. Roscam Abbing gave a lecture on emergency care; some legal questions and dilemmas, she emphasized the importance of patient rights' bodies and ombudsman system to cope with the daily problems. Dr. Nasser Muh also gave a speech about the health law practice in Indonesia. The Chief Executive Officer of the Army Hospital Major General Dr Terawan Agus Putranto and the all staff of the hospital clinics and units attended to the meeting; in the end of the session a discussion, QA and comments moderated. I am really grateful to Dr. Nasser Muh, Vice President of WAML and program chair of wonderful Bali Conference of Medical Law in 2014, all his effort to realise these scientific meetings in his country. Most of the participants evaluated these conferences extremely successful and eye-opening. We left Indonesia with fruitful collaboration ideas for near future.

International Conference on Ethics Education in India

The IAEE (International Association for Education in Ethics) organizes annual conferences. International conferences have taken place in Pittsburgh- USA (2012), Ankara-Turkey (2014), Curitiba- Brazil (2015), Lograno- Spain(2016). The fifth IAEE conference on Ethics Education was held in Mangalore- India 15-17 th of November. As one of the founder of IAEE and president for the period of 2012-2016, Prof. Berna Arda delivered a speech with the title of "Is there any room for women studies in bioethics education?" and mentioned about her "bioethics and woman course" experience in Ankara University for fifteen years.



Prof. Arda together with delegates from Turkey



The honour of planting a mahogany tree represent the Republic of Turkey in India

An honorable mention of appreciation to Dr. Richard Wilbur, the Editor for the WAML Newsletter and production team and Associate Editor-of the WAML Journal of Medicine and Law and production team members.

I am looking forward to seeing you at Tel Aviv, Israel in September 2018.



WAML President's Report



Thomas T. Noguchi,
President of WAML

Soon we will have a new year upon us, and as I look back to our annual congress I consider that theme-oriented discussions will continue to attract innovative research papers. We would like to discuss this in depth. So, we will have academic quality papers, and scholarly discussion rather than presenting more of the same subjects every time we meet.

I would like to express my appreciation to the members of the Executive Committee, for the exchange of ideas on a daily basis, and I would also like to express my appreciation to all members of the WAML, and program chairpersons of previous congresses and their attendees, committee members, as well as administrative support.

Thomas T. Noguchi
President, WAML

WAML Secretary General's Report



Ken J. Berger
MD, JD
WAML Secretary General

The World Association for Medical Law's (WAML's) strength is in our principles of collaboration, shared goals and initiatives, our strong synergies, protecting our core values, leading and strengthening our mission to enhance global health law and our respect for International Human Rights.

We have the talent to create differences through innovation and shared exchange of our ideas and strengths.

Both your President and I had the opportunity to work on an international collaborative effort on forensic ethics, a topic that is not well taught and often neglected; it was brought to the floor of the International Association for Forensic Sciences. Programs such as these, infect other like-minded individuals to ignite better moral principles, equality and justice for all. (James Downs, MD, Thomas Noguchi, MD and Ken Berger, MD, JD)

On behalf of the Executive Committee, we wish all our members and friends a warm and festive holiday season with their families and friends and we look forward to reinvigorating our crucial work to make a difference in the world of tomorrow.

I look forward to seeing everyone in the holy land of Israel. Let us once again support Israel at a time when global peace, harmony, multiculturalism and globalization should be celebrated anywhere and everywhere, allowing us to continue to make meaningful contributions to medical law and legal medicine."

Very truly yours,

Ken J. Berger
MD, JD

Secretary-General, Vice President, Board of Governors
World Association for Medical Law

Scientific Chair, 2020 WAML meeting, Toronto, Canada

Congress Program Chair Report



Oren Asman, LL.D.

I am excited to share with you our plans for the 2018 World Congress on Medical Law and Ethics taking place in Tel Aviv, Israel. The Congress will take place at the very renowned Dan Hotel located on the beach of Tel Aviv, famous for its colorful exterior and delicious breakfast.

I am personally thrilled that we are bringing the World Congress on Medical Law and Ethics to Tel Aviv, a multicultural and multiethnic city buzzing with life be it on the busy shopping streets, the colorful food markets or on the warm, sandy beaches. I am positive that you will have a wonderful experience in Tel Aviv and Israel!

Congress Timeline:

The Congress related events and activities will begin on Sunday September 2nd at the Dan Hotel at 18:00 with a Welcome Reception and Key Note Lecturer. Participants will be able to receive their congress bags and badges at the Dan Hotel from 14:00 - 17:00 that day.

The Congress Scientific sessions will take place at the Dan Hotel from Monday - Wednesday (September 3rd - 5th).

On Monday September 3rd at 18:30 we will hold the WAML General Assembly. All paid members have voting rights and are encouraged to participate.

On Tuesday September 4th from 17:00 - 21:00 all congress participants are invited to a special Film Festival session at the Tel Aviv Cinematheque. Films and documentaries related to the Congress themes will be screened followed by a panel discussion. The event will include a reception for the Congress participants at the Tel Aviv Cinematheque.

On Wednesday September 5th our closing session will include an award presentation for young scientists who contributed to the congress along with a closing Key Note Lecturer.

On Thursday September 6th we are planning a complimentary full day tour ending with a Gala dinner (subject to changes, final details will be available soon). The tour and Gala dinner will be provided to participants who registered to the full congress and confirmed their participation in these events ahead of time (It is limited to 300 participants, so please register and confirm your participation sooner rather than later).

See the timeline on our website: <https://www.wcml2018.com/timeline>

Abstracts Submission:

Abstract submission is open. Please submit your abstracts here: <https://www.wcml2018.com/abstracts>

Congress Themes:

Forensic Medicine, Law and Ethics

Mental Health, Law and Ethics

Health Professions, Law and Ethics

Humanitarian Medicine, Law and Ethics

Registration:

Conference registration is open. Please register here:

<https://www.wcml2018.com/register>

Hotel booking:

Please book your room at the Dan Hotel here:

[Make your reservation here!](#)

Participants from lower income countries as well as students, who require assistance with finding a cheaper accommodation, can apply for accommodation in the Tel Aviv University dormitories.

While there is limited number of rooms at the dormitories, we will do our best to help.

For more information please contact Sarah Demsitz:

Sarahdemsitz@hotmail.com

WAML Meeting Planning and Administration



Denise McNally,
WAML Administrative Officer
and Meeting Planner

JOIN US AT THE 24TH WORLD CONGRESS ON MEDICAL LAW (WCML)

**September 2 – 6, 2018
Tel Aviv, Israel
Dan Tel Aviv Hotel**

CALL FOR ABSRACTS – Deadline May 1, 2018

We encourage you to join the leading experts in medical law, legal medicine and bioethics by submitting your abstract in English online at

<https://www.wcml2018.com/abstracts>

Congress Registration – Registration is open!

You can register for the 24th Annual WAML World Congress on the following website

<https://www.wcml2018.com/>

On the congress website you will find more information about the preliminary congress program, confirmed faculty, congress themes, congress events, abstract submission and more.

Hotel Reservations – Deadline June 1, 2018

Dan Tel Aviv is a luxurious hotel located near the Tel Aviv beach. It is one of the well established and renowned hotels in the city.

Dan Tel Aviv is offering a reduced group rate of \$230 USD for single and \$250 USD for double occupancy (Tourists are exempted from an additional 17% VAT).

The rates include breakfast and internet in the guest room.

EXECUTIVE SEA VIEW ROOM Supp. \$40.00 per night, per room.

[Make your reservation here!](#)

The reduced group rate is available until June 1, 2018. After this date you may reserve rooms at the standard hotel rate only and based on availability.

This Congress will commence with a Welcome Reception, Sunday September 2nd, 2018, followed by the Opening Ceremony the morning of Monday September 3rd, 2018. The plenary closing session and awards will commence Wednesday, September 5th, 2018 followed by a special full day tour on Thursday, September 6th experiencing Law and Ethics through the history and culture of Israel including a Gala Dinner (subject to changes, final details will be available soon).

Membership Dues

The purpose of the World Association for Medical Law (WAML) is to encourage the study and discussion of health law, legal medicine, ethics and forensic medicine, for the benefit of society and the advancement of human rights.

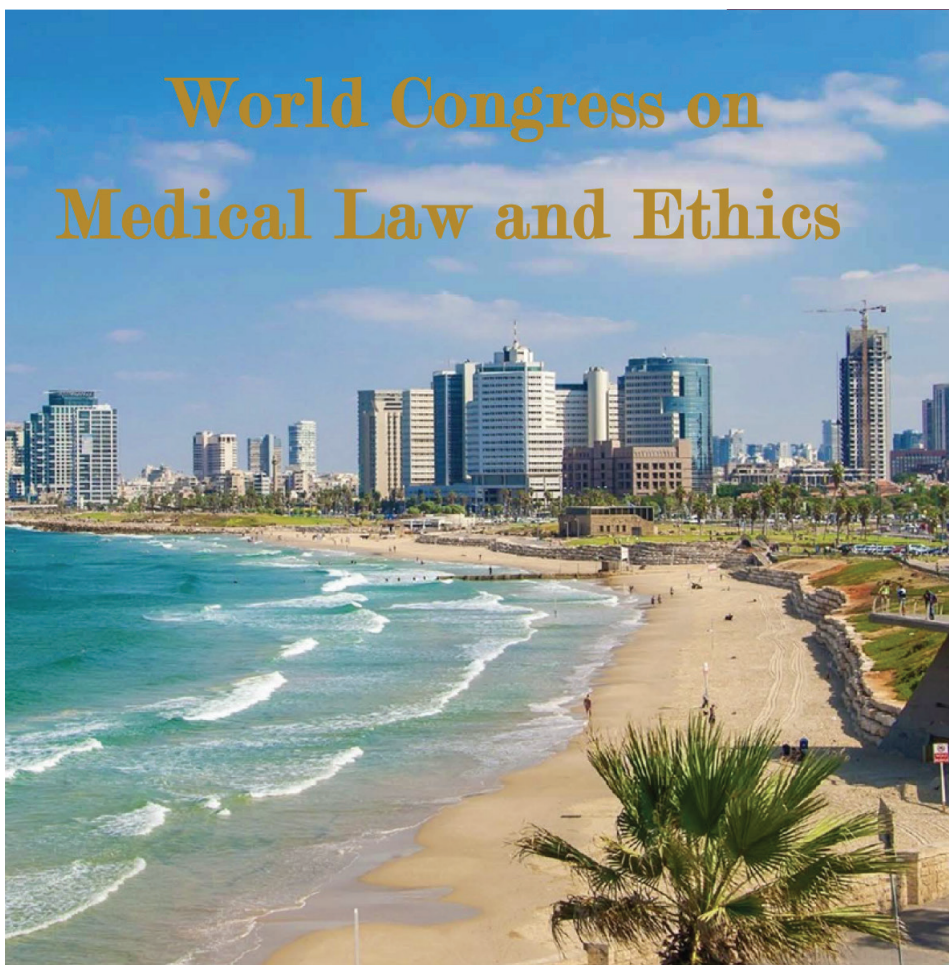
The membership of WAML is annual. WAML members enjoy many benefits which include access to quarterly E-Newsletters, discount registration fees to the WAML Congress, notice of upcoming events, active website information, the "Medicine and Law" electronic Journal and discounted access to activities of affiliated organizations.

For 2018 your membership dues are \$150, owed by January 1, 2018. The easiest method is to log into the WAML website www.thewaml.com and pay. You also have the option to pay by check or wire transfer. If so, please contact me at worldassocmedlaw@gmail.com for further information. You also have the possibility to join as a new WAML member or renew your WAML membership for 2018 when registering for the congress.

**Do you have
an idea,
comment, or
suggestion?**

Please contact
Denise McNally
worldassocmedlaw@gmail.com

World Congress on Medical Law and Ethics



World Association for
Medical Law

SAVE

THE DATE

SEPTEMBER 2-5

2018

**The 24th Annual WAML
World Congress**

Tel Aviv, Israel
www.wcml2018.com

FUTURE MEETINGS

Of Affiliated National Associations and
Collaborating Organizations

2018 NAME Interim Meeting

February 20, 2018

Seattle, WA (USA)

Website: www.thename.org

24th Annual WAML World Congress

September 2 – 5, 2018

Tel Aviv, Israel

Website: www.wcml2018.com

58th Annual Health Law & Legal Medicine (ACLM)

February 23 – 25, 2018

Charleston, SC (USA)

Website: www.aclm.org

52nd NAME Annual Meeting

October 12 – 16, 2018

West Palm Beach, FL (USA)

Website: www.thename.org

53rd NAME Annual Meeting

October 18 – 22, 2019

Kansas City, MO (USA)

Website: www.thename.org

25th Annual WAML World Congress

August 6 – 8, 2019

Tokyo, Japan

Website: www.thewaml.com

26th Annual WAML World Congress

August 13 – 16, 2020

Toronto, Canada

Website: www.thewaml.com



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Denise McNally

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