

2012 International Society for Disease Surveillance Conference

Expanding Collaborations to Chart a New Course in Public Health Surveillance

The International Society for Disease Surveillance held its eleventh annual conference in San Diego on December 4th and 5th, 2012, under the theme *Expanding Collaborations to Chart a New Course in Public Health Surveillance*. During these two days, practitioners and researchers across many disciplines gathered to share best practices, lessons learned and cutting edge approaches to timely disease surveillance. A record number of abstracts were received, reviewed and presented – the schedule included 99 orals, 4 panels, 94 posters, 5 roundtables and 12 system demonstrations. Presenters represented 24 different countries from Africa, North and South America, Europe, and Asia. Topics covered included, but were not limited to, statistical methods for outbreak detection, border health, data quality, evaluation of novel data streams, influenza surveillance, best practices and policies for information sharing, social network analysis, data mining techniques, surveillance during weather events and mass gatherings, syndrome development, and novel uses of syndromic surveillance data. There were also discussions on the impact of regulations and standards development on disease surveillance, including Meaningful Use and the International Health Regulations.

The 2012 Conference was also host to several exciting keynote and plenary talks, including those given by James Fowler, Professor of Medical Genetics and Political Science at the University of California, San Diego and Bill Davenport, Global manager of Esri's Health and Human Service Solutions Group. Plenary speakers Steve Waterman, Centers for Disease Control and Prevention (CDC); Simon Hay, University of Oxford; and Brian McCloskey, Health Protection Agency in London, reflected on the importance of effective collaborations in their respective topics of migrant and border health,

malaria disease epidemiology and mass gathering health. National and international representatives from the CDC, the World Health Organization and the Department of Homeland Security also discussed their respective strategic plans for disease surveillance.

In addition, the 2012 Data Visualization Event enabled conference attendees to collaborate and gain knowledge of visualization tools and techniques applied to a rich, de-identified set of ambulatory electronic health record (EHR) data. Participants developed visualizations of chronic disease events using this common data set and presented their work during the evening poster session. The goals for this event were to demonstrate and share visualization tools and techniques that attendees could learn to apply to their own data and also to provide exposure to data elements available in ambulatory EHR systems and highlight their potential for surveillance and research.

My hope is that attendees of the 2012 ISDS Conference strengthened existing collaborations and fostered new ones, and returned to their places of work or study energized with new ideas and approaches to disease surveillance. The challenge for all of us is to sustain this new energy throughout the coming year and to leverage the tools available to us to share best practices and reach out for assistance when needed. We all want to improve the health of our populations, and collaborations will enable us to achieve that goal.

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