World Congress of Internal Medicine 2016, Bali
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I am overjoyed to be awarded the IMSANZ Advanced Trainee Travelling Scholarship, 2016. I attended The 33rd World Congress of Internal Medicine in Bali, Indonesia in August 2016.

Bali is certainly a breath-taking beautiful island. I have been to Bali once 4 years ago and I did not like the experience. During the previous trip, the moment I set foot at Bali Airport, I was surrounded by local men offering me their ‘services’ to carry my luggage and skip the custom queue. After I passed custom, they demanded for an unreasonable amount of tips. I was also scammed by the taxi-drivers and money changers.
However, I really enjoyed every moment in Bali this trip. The experience I had this trip was completely different from the previous trip. The airport has been upgraded and it was very impressive, those men were no longer allowed to pounce on tourist to provide their ‘porter services’. To avoid being scammed again, I have only used taxi services requested by the hotel staff and exchanged money with licensed money changers this trip. Nusa Dua, where the conference was held, is a much better part of Bali compared to places such as Kuta or Seminyak.

This conference was participated by approximately 2500 delegates from 69 countries. There were keynote lectures followed by 9 different sessions daily which ran concurrently covering all aspects of internal medicine. The key themes in this conference were the important roles of a generalist in an ageing population with multiple co-morbidities, the evolving epidemics of autoimmunity and climate change.

**Reviving the role of a Generalist**

We are confronted with an unprecedented aging society in all parts of the world. As health care improves and economy blossoms over the decades, people live longer and elderly people are more prone to suffer multiple organs dysfunction. The complex disease patterns require practices and approaches (in diagnostics and therapy) which differ substantially from approaches which focus on a single disease. This fact implies the important role of generalist in hospitals, out-patient clinics and emergency units.

Generalists are more capable to cope with the complex disease pattern involving multiple organ systems among the elderly. General Physicians are the ‘Master of Physicians’ and we should always be the first point of consultation. General Physicians
will then decide whether a referral should be made to a sub-specialist. This model of care is certainly more cost effective. Fragmentation in patient care is not cost effective and not future-orientated. Unfortunately there is an increasing lack of generalists. We need to revive and re-emphasise the importance of general internal medicine to preserve the generalist holistic capabilities.

Research in “poly-morbidity” to develop “evidence based guidelines” in the elderly patient is needed since there is only little scientific knowledge available for appropriate diagnostic reasoning, care and treatment for multi-morbid patients.

**The epidemic of autoimmune diseases**

During the recent decades, there has been a vast increase in autoimmune diseases. Neurological, endocrine, rheumatic and gastrointestinal autoimmune diseases are all becoming more frequent.

Inflammatory bowel disease has increased ten-fold.\(^1\) Besides heredity factors that facilitate the development of autoimmune diseases, several environmental factors have been suggested to contribute to disease onset, such as smoking, stress, hygiene, infections, but also antibiotic use (especially in childhood) and nutrition. When it comes to food, especially vitamin D deficiency, could be critical in view of the impact this vitamin has for immune function. The north south-gradient that has been observed in type 1 diabetes and IBD could also be explained by concomitant variations in vitamin D levels. Recent observations in Multiple Sclerosis suggest that a diet with a high salt intake could be immune activating as well (via the Th17-pathway). Many of these factors are thought to mediate their effect through increased intestinal permeability and dysbiosis, i.e. a disrupted gut microbiota.\(^2\) A low-fibre, high-fat and carbohydrate diet has been suggested to contribute to a reduction of commensals and microbiome diversity and consequently development of IBD.\(^3\)

Despite of all the proposed mechanisms of the onset of autoimmunity, the exact mechanisms are yet to be clarified.

**Climate Change**

The United Nations Intergovernmental Panel on Climate Change states that it “Is the Greatest Global Threat of our Time”. It is clear that the climate is changing at a pace and in pattern that is not explainable under natural phenomena. That build-up of CO2 and other gases (methane and nitrous oxide) from the burning of fossil fuels is the main driver of this phenomena and the harm to humans and the ecosystem has begun. But there is a chance to stem the changes if aggressive action is taken now.
The four major indicators of global climate change are:
1) Global Temperature Rise
2) Sea Level Rise
3) Ocean Acidification
4) Ice Melt and Loss of Glacier Mass

The Five major effect of global change are:
1) Forest Fires
2) Drought
3) Floods
4) Heat Waves
5) Extreme Weather.

The health effects of climate change include
1) Heat Related
2) Respiratory Illnesses
3) Air Pollution
4) Tick Borne infection
5) Waterborne infection
6) Food insecurity
7) Mental Illness.

There needs to be global effort to anthropogenic greenhouse gas emissions with the following principles:

• The developed countries need to take a leading role in developing / implementing and monitoring the success of mitigation measures.

• Health co-benefits are an integral part of global climate change discussions

• Expanded use of low carbon or carbon neutral energy

• Improve carbon sinks by decreasing deforestation and increasing reforestation

• Increase fuel efficiency standards

• Energy efficiency standards for buildings

• Financial incentives for proper land management

Global Climate Change is real, happening now and there is an opportunity to mitigate its effects and prevent serious worldwide health consequences.
Besides attending all these lectures and discussions, I have managed to do some networking and made a few international friends. I also took the opportunity to enjoy the pristine Nusa Dua Beaches and did some water sports.

In summary, it was a remarkable experience and I am utterly grateful to IMSANZ for providing me the opportunity to learn, network and relax in this beautiful island – Bali.

References: