

E-textiles and an advance in 'wearable electronics'

Thursday, 29 September 2011 02:57

Fabric-based monitoring devices are suddenly getting hot. This paper published in the American Institute of Physics' [AIP Advances](#) discusses the use of copper oxide embedded in fabric. The researchers developed a new flexible memory fabric (not related to spandex 😊) woven together from interlocking strands of copper and copper-oxide wires. The weave becomes a reversible, rewritable memory system able to retain information for more than 100 days. This along with a power generator and biometric sensors embedded in the fabric could be useful as a part of a wearable and thus substantially less intrusive telemonitoring system or for self-monitoring your workout. [E-textiles get fashion upgrade with memory-storing fiber](#) (Physorg.com); full text of paper [Copper oxide resistive switching memory for e-textile](#)
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mCare named one of US Army's 'Greatest Inventions'

Thursday, 29 September 2011 01:09

Late this summer, a panel of veteran US Army soldiers--noncoms as well as field grade officers--selected the best advances in Army technology. On the list of a dozen, along with the 40mm Infrared Illuminant Cartridge, M992 and the M240L 7.62mm Lightweight Medium Machine Gun--and the only health tech on the list--is the **mCare mobile phone app** for supporting soldiers with traumatic brain injury (TBI) and other long term wounds. [\[TA 16 Aug\]](#) In the citation, "mCare was developed by modifying commercial off-the-shelf technologies to meet the unique needs of the Army Medical Department. Secure, HIPAA-compliant messaging system was needed to operate on wounded warriors' existing mobile devices, in a manner uniquely distinct from text messaging or email. This allows members of the care team to connect with Warriors-in-Transition throughout their outpatient recovery process through a device they already own and are familiar using -- their personal cell phone." mCare is based on the [Diversinet](#) MobiSecure platform. [Army Announces Greatest Inventions. Army News Service via Military.com](#)

Certainly there is a growing need. Almost 1,400 U.S. servicemembers deployed to Afghanistan and Iraq have been diagnosed with concussions or mild brain injuries, with over 9,000 servicemembers sidelined after explosions or 'heavy jolts'. While it is estimated by the neurologist quoted that 90% may dissipate within a few days, what is the cumulative effect of multiple shocks? [More Troops Being Diagnosed with TBI. Stars and Stripes via Military.com](#)

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GrandCare Systems adds ECG

Thursday, 29 September 2011 01:07

[GrandCare Systems](#) announced yesterday its 'strategic alliance' with fellow West Bend, Wisconsin company **Spaulding Clinical** to integrate the Spaulding iQ ECG with its telecare/telehealth system. The integration is interesting because it meets a definite need beyond diabetes and CHF which is not covered by most telehealth monitoring/integrated telehealth providers. Home ECG has not gained a lot of traction in the US market but this may be changing. This follows on newer telecare/telehealth entrant **Waldo Health** adding on an ECG peripheral which combines a chest harness with biometric analysis; this was awaiting FDA clearance as of this spring [\[TA 19 May\]](#). [Release. More on the Spaulding iQ ECG](#)
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The Role of Cloud Computing within Telehealth

Tuesday, 27 September 2011 16:43

In a Telecare Aware exclusive, Rashed Khan, who holds an MSc in Software Engineering, describes a number of ways that cloud computing is currently used in telehealth applications and looks forward to the future.

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Return of the Telecare LIN eNewsletter

Tuesday, 27 September 2011 07:15

Congratulations to Mike Clark for securing new funding from the Assisted Living Innovation Platform (ALIP) to resurrect the Telecare LIN eNewsletter which last published in February 2011. In addition to news of UK telecare and telehealth projects, the newsletter has usually carried a comprehensive list of related news items that Mike assiduously collects. In September's newsletter ([PDF download here](#)) readers will see that Mike has added helpful notes about the content of the items. *Your TA editors welcome this development in the light of our recent decision to focus on posting about key developments only - see announcement in the right hand sidebar.* [Telecare LIN website to sign up for the newsletters.](#)
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AMAC directors' sale to Tunstall under investigation

Tuesday, 27 September 2011 06:32

Faruqi & Faruqi, a NY-based securities firm is investigating the Board of Directors of American Medical Alert Corp (AMAC) for potential breaches of fiduciary duties in connection with their conduct related to the sale of the company to Tunstall in the all-cash deal valued at about \$82.3 million. Brief note: [Faruqi & Faruqi, LLP Announces Investigation of American Medical Alert Corp.](#)

ALSO ON THIS ITEM: Editor Donna and a sharp-eyed Telecare Aware reader have picked up in the original sale announcement a hint that Tunstall itself may be subject to sale talks. See comments on [Tunstall to acquire American Medical Alert Corp \(AMAC\)](#), to which further comments on this item may also be added.

Update 28 September. Ed. Donna notes that Faruqi & Faruqi is not the only firm (in their case, securities) investigating a 'breach of fiduciary duties'. There is a positive pileon of law and securities firms from last Friday on--eight through today--see [Yahoo! Finance](#) headlines. The common thread? Were shareholders underpaid for their stock in the deal with Tunstall, and did the AMAC board adequately 'shop around' the company to get the best deal for shareholders (also worded as "undertook a fair process to obtain fair consideration") before accepting the Tunstall offer. While there's generally a flurry of this with any public company sale, particularly smaller ones, this strikes this editor as just a bit unusual. It raises several questions: many of the shareholders were not consulted or given the reason why Tunstall would be a good partner; and were there reasons other than fiduciary for the choice of Tunstall as a buyer?

Also to correct the statement expressed in the earlier posting, supposedly the acquisition price represented a 50% premium to the value of the shares the day prior to the announcement. One thing is obvious; until these are settled in court (often by a richer payout to the shareholders), it is 'no sale'--and it is unlikely to be cleared up by end of year.

GPs sceptical of community matron value (UK)

Tuesday, 27 September 2011 06:25

Implementing a telehealth program in the UK and relying on the support of community matrons? They may not be around too long if many GPs have their way it seems, according to a British Journal of General Practice survey reported in Nursing Times: [GPs sceptical of community matron value](#). On the other hand, this may be the ideal time to convince doubting community matrons that telehealth can help give them a valued role.

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Telehealth monitoring babies after heart surgery

Tuesday, 27 September 2011 06:14

Two-minute video of telehealth monitoring of infants after surgery for complex congenital heart defects - an explanation by Dr. Bradley Keller, Kosair Charities Endowed Chair and Director of Pediatric Heart Research at the Cardiovascular Innovation Institute, University of Louisville, Kentucky, US.

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Technology use in long-term care: a call for information

Saturday, 24 September 2011 15:43

For many new--or not so new--companies in the telecare, telecare+social connectedness and even telehealth systems, one of the difficulties in creating appeal for their service, especially among long term care (LTC) providers, is PROOF. Normally one of the tasks of company marketers is to provide this proof. But 'research that counts': long term, large N studies; academic research etc. developed in time frame available and the budget, when it resembles the life of the may fly....a bridge too far. Laura Mitchell, who is VP Marketing for one of the earliest and most visionary companies in the field, **GrandCare Systems**, and also a founder/leader of the industry group [AgeTek](#), is calling for others to help her build a paper for general dissemination on succesful technology implementation into LTC. This is an area where this kind of information will be a 'tide that lifts all boats.' With her permission, I'm excerpting her posting on several groups on LinkedIn. *The*

Editors also invite Laura to consider the comment space for this article as a workspace for development on this project, as our exposure is international and different than LinkedIn's.

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Tunstall to acquire American Medical Alert Corp (AMAC)

Friday, 23 September 2011 07:51

New York-based AMAC is to be bought by Tunstall Healthcare Group. AMAC is reported to have 75,000 PERS subscribers in the US and Tunstall has been looking to expand into the US market. *[Is it too much to hope that the acquisition will start to move the market in the US away from pendant alarms towards the use of other telecare monitoring devices? Ed. Steve]* Details in the press release: [Tunstall Healthcare Group Limited to Acquire AMAC, American Medical Alert Corp.](#)

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Report: Good Governance of Telehealth Services

Friday, 23 September 2011 07:28

Better care for people with long term conditions: the quality and good governance of telehealth services is a report published July 2011 by the UK's Good Governance Institute. Despite its unusual provenance, it is actually one of the **best reports on telehealth** (as in remote vital signs monitoring) that editor Steve has read for a long time. Best not only in terms of content but in jargon-free readability. Download the PDF by clicking on the report cover image on [this webpage](#). (There's a £30 price on the cover - get the PDF while it is free.)

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Costs and opportunities of automated 'we call you' systems

Friday, 23 September 2011 07:15

Jamie Cole of UK-based [Telecare Technology](#) is quizzed in the video below on the economics, opportunities and risks of the automated 'we call you' phone system that his company provides. The approach is the logical extension of the type of services common in the US - often called 'telecare' - where volunteers on a rota phone people to check that they are alright. [FineThanx](#) runs a similar automated system in the US.

There are clearly opportunities in such systems to deliver, say, medication prompts at lower cost than sending a person to check, although an [automated telecare medication dispenser](#) may give more assurance that the person has actually complied. However, what is never mentioned by proponents of such 'we call you' systems is that by tethering the recipients to their homes while waiting for the call (because if there is no answer the planned escalating response kicks in) they essentially run counter to the ethos of promoting independence. Only one automated system that this editor (Steve) is aware of avoids this issue with a simple system for allowing the user to initiate the call to tell the system that they are alright, and that's the UK-based [Alertacall](#).

[Comments \(2\)](#)



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