



**09.45-10.45 The burden of physical inactivity  
(Chair: K.-M. Braumann)**

Coronary Artery Disease – inactive life style compared to other risk factors  
*NETSIM Consortium (10 min)*

Rehabilitation and Prevention with PA in Hypertension  
*A. Pinto (10 min)*

A European effort to predict the risk of bone fracture – The Osteoporotic Virtual Physiological Human  
*W. R. Taylor (10min)*

Physical activity as treatment & outcome in COPD  
*J. Weber (10 min)*

Discussion/Buffer  
*(20 min)*

**COFFEE BREAK**

**11.00-12.00 Panel Discussion  
(Chair: C. Kulikowski)**

Similarities, Differences, Synergies across diseases – emerging topics

**LUNCH  
(12.00-12.45)**



**12.45-14.00**

How to build evidence for sustained improvement – protheses & physical activity  
*K. Kaufman (15 min)*

Assessment of health enhancing physical activity at a population level: experience with the WHO-approved IPAQ and accelerometry in Sweden and application in an MS trial  
*M. Hagstroemer (15 min)*

Activities around physical activity of the DKV in Germany  
*W. Reuter (10 min)*

How to attract health insurers to innovation  
*C. Szymkowiak (10 min)*

Moving forward: Laying out the structures for finding the priorities to “improve human health” in a complex network of diseases, risk factors and aspects of PA  
*C. Kulikowski (20 min)*

**14.00-15.00 Panel Discussion  
(Chair: K.-H. Hoffmann)**

- How should PA be measured?
- What are the most relevant aspects of PA?
- Should other biosignals be coupled with PA?
- What are the roadblocks – technological, financial, psychological – preventing the widespread increase of PA?
- Ideas for key projects

**15.00-16.00 Next steps  
Summary / Conclusion  
Wrap up (M. Daumer)**



**Expert Panel Meeting  
on  
Physical Activity**

**December 06 – 07, 2007**

**Fakultätszimmer  
Klinikum rechts der Isar  
Ismaninger Strasse 22, 81675 Munich**

**PROGRAM**

The meeting is jointly organised by



**Sylvia Lawry Centre for Multiple Sclerosis Research e. V.**



**Trium Analysis Online GmbH**

and supported by



**BOSCH Robert BOSCH GmbH**

## PREFACE

Dear Colleagues and Friends,

Physical activity is one of the most powerful treatments and also one of the most useful outcome parameter for efficacy of treatment and rehabilitation measures for many chronic diseases such as cardiovascular disease, overweight, diabetes, chronic obstructive pulmonary disease (COPD), musculoskeletal/ gait/ movement disorders and injuries, neurological (degenerative) diseases, stroke and cancer.

But why is this powerful “drug” not frequently prescribed by physicians? Why is it not the top-selling self-medication patients are consuming? Why is it not a well-defined outcome measure used in most clinical trials and observational studies?

We believe that two major obstacles are responsible: “treatment” with physical activity is usually not applied in a medical care environment but embedded in daily living. There is no standardized way for prescribing and controlling both the dosing and the effect of this treatment.

The Robert Bosch GmbH, Trium Analysis Online GmbH, and the Sylvia Lawry Centre are partnering in an evaluation of the usefulness of various telemedical devices to monitor physical activity that may be able to solve these problems.



This can e.g. be done with devices like “actibelt”. The actibelt is a belt with a hightech belt buckle carrying high-precision 3D-acceleration sensors that allow a continuous,

unobtrusive long-term monitoring of physical activity in daily life. Data storage, transmission, analysis and reporting is done with a flexible web-based backbone of customised, partially automated services. This allows to determine compliance with the subscribed “dose” of treatment with physical activity and to monitor the short- and long-term evolution – deterioration or improvement – of disability, gait and movement disorders.

We'd like to discuss with you, as an expert in the field, pros and cons of the various possibilities to develop this and similar technology for various disease areas, to discuss potential roadblocks and the usefulness of supporting training, teaching and disease management programs.

We are very much looking forward to welcoming you here in Munich.

**Dr. Martin Daumer**  
Sylvia Lawry Centre for  
Multiple Sclerosis  
Research e.V.  
Scientific Director

**Dipl. Stat. Michael Scholz**  
Trium Analysis Online GmbH  
Managing Director

### FOCUS OF THE MEETING

- Respiratory problems (Asthma, COPD)
- Neurologic degenerative diseases
- Falls
- Diabetes type 2
- Obesity and Overweight
- Stroke
- Congestive heart failure (CHF)
- Hypertension

### 8.15-8.45 Welcome and Objectives of the meeting

The Munich cluster of companies & research institutions for clinical bioinformatics and technical medicine: A brief history of the motivation for the actibelt – a glimpse in the future

*K.-H. Hoffmann, M. Daumer (10min)*

New directions at the Klinikum rechts der Isar: to get the patient going – the fast track from sick bed to home

*R. Gradinger (10 min)*

BOSCH's vision “invented for life

*S. Henke (10 min)*



### 08.50-09.45 The burden of physical inactivity (Chair: K.-M. Braumann)

The need for controlling the dose of treatment & outcome

Current deficits in outcome measures in chronic diseases: example Multiple Sclerosis

*G. Ebers (15 min)*

Monitoring of PA in patients with movement disorders – Parkinsons disease

*B. Haslinger (10 min)*

The role of PA as treatment and/or outcome measure in Dementia/Geriatrics/Falls/Depression

*H. Foerstl (10 min)*

Obesity in children – the challenge of motivating children to be active

*R. Oberhoffer (10min)*

The role of PA as treatment and/or outcome measure in Asthma

*R. Hauck (10 min)*

