

Research Seminar in Health Sciences

**Prof. Dr. Stefan Boes
Prof. Dr. Gisela Michel**

Department of Health Sciences and Medicine

Fall Semester 2021

Description

The Research Seminar in Health Sciences offers a platform for PhD students, Post-Docs, and Master students as well as interested faculty members to discuss recent developments in health sciences, with a focus on topics in health behavior and health economics. Internationally renowned researchers and PhD students are invited to present their work and all presentations are followed by discussions with the audience.

Format

The Fall Semester 2021 will take place in hybrid mode. Maximum 26 participants are allowed to physically participate to the seminar, but there are no limits regarding the online attendance. As announced by the university management, please be aware that regular classes will be subject to compulsory certification. Therefore, access to the Research Seminar in Health Sciences in person will be granted only to people who have been vaccinated, tested or who have recovered from Covid-19 (3G: geimpft, getestet, genesen). Starting with December 2021, due to the Winter Universiade, the remaining appointments of the seminar will take place only on Zoom.

Requirements & Credits (ECTS)

PhD students who are interested in receiving 1 ECTS are required to:

- Visit the seminar 9 out of 10 times
- Choose one presentation and write a two-page report on the topic
- Actively participate to the sessions

The two-page report should be a critical evaluation of the presented research topic and not an evaluation of the presentation style. The report should analyse the topic itself and the study/studies presented with focus on the methods, study limitations and relevance. Please write an e-mail to the organizer until October 31 in order to confirm your interest in receiving the ECTS and communicate the chosen topic.

Contact

For questions and assistance, we are available via e-mail:

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Appointments

Date & time	Invited speaker	Presentation title	Location
04.10.2021 14:15-15:15	Rebecca Tomaschek	Collaboration of general practitioners and specialists for patients with complex chronic conditions: The case of spinal cord injury in rural Switzerland	Room 4.B02, UniLu ID: 697 0794 9726 Passcode: 123
18.10.2021 14:15-15:15	Lorena Wyss	Premium subsidies in Switzerland and their impact on health plan choices and health care demand	Room 4.B02, UniLu ID: 622 9663 2209 Passcode: 123
25.10.2021 14:15-15:15	Stefan Essig	Overuse of Medical Services: The Example of Testing for Vitamin D Deficiency	Room 4.B02, UniLu ID: 655 5166 1186 Passcode: 123
08.11.2021 14:15-15:15	Katrin Scheinemann	Survivorship and long term follow up after childhood and adolescent cancer	Room 4.B02, UniLu ID: 650 9641 0161 Passcode: 123
15.11.2021 14:15-15:15	Kevin Migliazza	Does hospital volume affect outcomes after abdominal cancer surgery: An analysis of Swiss health insurance claims data	Room 4.B02, UniLu ID: 653 8098 1753 Passcode: 123
22.11.2021 14:15-15:15	Gabriel Okasa	The Effect of Sport in Online Dating: Evidence from Causal Machine Learning	Room 4.B02, UniLu ID: 667 5935 2372 Passcode: 123
29.11.2021 14:15-15:15	Erika Harju	Corona Immunitas Lucerne: Spread of SARS-CoV-2, vaccination progress and the pandemic's impact on the population of the Canton Lucerne	Room 4.B02, UniLu ID: 631 6226 0527 Passcode: 123
06.12.2021 14:15-15:15	Alexander Ort	Are you still watching? - Insights into people's binge-watching habits and their consequences	ID: 668 5664 3338 Passcode: 123
13.12.2021 14:15-15:15	Sven Strebel	Hearing Loss in Childhood Cancer Survivors	ID: 635 4699 4616 Passcode: 123
20.12.2021 14:15-15:15	Asma Mohamedsharif	Development of a transitional care protocol for low resource settings	ID: 680 6959 6068 Passcode: 123

Collaboration of general practitioners and specialists for patients with complex chronic conditions: The case of spinal cord injury in rural Switzerland

MSc Rebecca Tomaschek, University of Lucerne

Speaker Rebecca Tomaschek is a PhD student of Health Sciences and Health Policy at the University of Lucerne. She is doing her research at the Center of Primary and Community Care, University of Lucerne, in close collaboration with the Swiss Paraplegic Research. She focusses on the collaboration and role distribution between medical specialists and general practitioners

Date and time 4 October 2021, 14:15 – 15:15

Location Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne
<https://unilu.zoom.us/j/69707949726>
ID: 697 0794 9726
Passcode: 123

Content Coordination of healthcare professionals seems to be particularly important for patients with complex chronic disease, as they present a challenging interplay of multiple conditions and symptoms. Therefore, such patients typically require the attention of multiple healthcare providers, facilities or home-based care. However, these patients' needs blur boundaries and responsibilities of care providers at the interface of primary and secondary care. Especially, the absence of a commonly shared information system complicates information exchange; oversight and comprehensive knowledge on the patients' situation is lost. Therefore, patients with complex chronic conditions are more vulnerable to fragmentation of care. As one solution, to counteract or prevent this, improving collaboration between GPs and specialists has been the aim of studies by linking or coordinating their services along the continuum of care. However, results from some newly introduced, collaborative models are not universally applicable and do not reflect the prevalent problem of multimorbid patients, as they seem to focus on one chronic condition. Some researchers fear that, disease-specific organization of care delivery based on guidelines potentially limits the possibilities for tailoring care delivery to individual patients.

Spinal cord injury is an exemplification of a complex chronic condition that requires lifelong care for secondary health conditions. As a model to learn from, the "SCI-CO" research project aims to develop a new model of care for patients with spinal cord injury in rural Switzerland. Special focus is on the establishment of a collaboration between general practitioners and specialists. This presentation will give you insights into this collaboration based on 1) a scoping review summarizing international literature, 2) a survey on the quality of collaboration in Swiss physicians and 3) semi-structured interviews with physicians engaged in the "SCI-CO" project.

Contact rebecca.tomaschek@unilu.ch

Premium subsidies in Switzerland and their impact on health plan choices and health care demand

MSc Lorena Wyss, University of Lucerne

Speaker Lorena Wyss holds a BSc in business administration issued by the University of Bern, and a MSc in Health Sciences with a major in health services research issued by the University of Lucerne. She started her PhD at the Department of Health Sciences and Medicine at the University of Lucerne in July 2021. She works in the team of Prof. Dr. Stefan Boes and investigates the impact of in-kind versus cash transfers as well as premium subsidies' impact on health plan choices and health care demand.

Date and time 18 October 2021, 14:15 – 15:15

Location Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne
<https://unilu.zoom.us/j/62296632209>
 ID: 622 9663 2209
 Passcode: 123

Content Low-income households face a higher financial burden regarding their premiums for mandatory health insurance (MHI) and out-of-pocket expenditures, leading to inequity in access to health care and ultimately to negative consequences on health outcomes. Premium subsidies were installed in 1996 to reduce the financial burden of those households and the inequity in access to health care. However, recently the eligibility criteria for premiums subsidies became more restrictive while premiums have risen, increasing the burden for the financially less well-off. Debates about reforming the premium subsidy system have been ongoing for several years. To design a well-functioning premiums subsidy system, knowing what impact premium subsidies have on the demand for health care as well as on the choice of health plans is important. However, little is known in Switzerland and internationally about the impacts of premium subsidies. Two studies, funded by the SNSF, are planned to decrease this research gap. The first study will investigate how different premium transfer schemes impact health plan choices and demand as well as health outcomes. While the second study will explore to what extent the amount of subsidies impact health plan choice and health care demand. Both studies will be using data from the Swiss Household Panel and/or the Swiss Health Survey, containing individual-level data on health insurance choices, health status, health care utilization, as well as background characteristics such as household income and structure. The first study will be using a difference-in-difference design comparing eligible individuals with an in-kind transfer scheme with eligible individuals with a cash transfer scheme. The second study will be using a regression model with a flexible functional form to test whether there are non-linearities in the relationship between subsidies and health plan choice and health care demand. The research will help to better understand the effects of premium subsidies in MHI systems and will inform health policy-makers about how to effectively increase value, efficiency, and equity in a health system.

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Overuse of Medical Services: The Example of Testing for Vitamin D Deficiency

Dr. med. Stefan Essig, PhD, University of Lucerne

Speaker	Stefan Essig completed medical school at the University of Basel in 2010. He then did a doctorate in health services research and epidemiology within the framework of Swiss National Science Foundation's MD-PhD program. He studied research questions in pediatric oncology and orthopedics in Switzerland and Mongolia at the Institute of Social and Preventive Medicine, University of Bern. He has the project lead at the Center of Primary and Community Care of the University of Lucerne and at Interface Policy Studies Research Consulting, Lausanne/Luzern. His main areas of interest are collaborations between health care providers in the community, both within primary care and between primary and specialist care.
Date and time	25 October 2021, 14:15 – 15:15
Location	Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne https://unilu.zoom.us/j/65551661186 ID: 655 5166 1186 Passcode: 123
Content	Overuse of medical services is a severe problem in most health care systems. The service of testing for vitamin D deficiency has been described as an example. There is consensus that vitamin D supplementation is often indicated but population-based screening by laboratory testing for vitamin D deficiency is inadequate. Testing should be restricted to people at high risk of severe deficiency. We therefore described the current lab testing for vitamin D deficiency in the adult population of Switzerland. We assessed Swiss health insurance data for incidence of lab testing for vitamin D levels, comparing the years 2015 and 2018. Vitamin D level was tested in 14% of the sample population in 2015 and 20% in 2018. Testing increased by 69% for individuals aged 26–30. Testing was associated with being middle-aged to young senior citizens, having a mandatory insurance with a low deductible, additional insurance coverage, and living in urban areas. We estimate that the total laboratory cost to mandatory insurance was about 90 million Swiss francs in 2018. We conclude that potentially inappropriate testing for vitamin D deficiency is occurring in Switzerland.
Contact	stefan.essig@unilu.ch

Survivorship and long term follow up after childhood and adolescent cancer

Assoc. Prof. (CAN) Dr. med. Katrin Scheinemann, Cantonal Hospital Aarau

Speaker	<p>Katrin Scheinemann is a pediatric oncologist-hematologist. Following graduation from medical school in 1999 she completed her pediatric residency in Switzerland. At the Hospital for Sick Children in Toronto, Canada, she completed a fellowship in pediatric oncology-hematology and especially neurooncology. In 2008 she was appointed Assistant Professor at the Department of Pediatrics at the McMaster University in Hamilton, Canada – she still holds a part time appointment as Associate Professor there.</p> <p>She returned to Switzerland in 2014 and started in her role as Division Head Pediatric Oncology-Hematology in 2017. She is the head of the Life After Childhood Cancer research group (LACC). At the national level, she is the current president of the Swiss Pediatric Oncology Group (SPOG) and the Co-chair of the Long-Term Follow-up Working Group Childhood Cancer Switzerland. At the European level, she is the current PanCare (Pan-European network for care of survivors after childhood and adolescent cancer) chair and Co-chair of the Quality of Survival working group of the SIOPE Brain tumor group.</p> <p>Up to date, she has published 65 peer reviewed publications in PubMed and has edited two textbooks.</p>
Date and time	8 November 2021, 14:15 – 15:15
Location	Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne https://unilu.zoom.us/j/65096410161 ID: 650 9641 0161 Passcode: 123
Content	<p>Each year around 350 to 400 children and adolescent are diagnosed with cancer in Switzerland. Over 85% will be surviving their diagnosis at least 10 years, around 7000 survivors of childhood and adolescent cancer live in Switzerland today.</p> <p>But the diagnosis and treatment will lead to chronic medical and psychosocial sequelae, some of them even life threatening. They can occur any time following treatment, even decades later. A long-term follow-up care including a transition from the pediatric to the adult medical system is needed. How is the long-term follow-up care organized in Switzerland? What are frequent chronic late sequelae and what is their risk for an individual survivor? How are they detected and treated or hopefully in the future even prevented?</p> <p>"Cure is not enough" – a strong statement from G. D'Angio already in 1974 – is the summary statement of this presentation.</p>
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Does hospital volume affect outcomes after abdominal cancer surgery: An analysis of Swiss health insurance claims data

MA Kevin Migliazza, University of Lucerne & Helsana Group Zürich

Speaker	Kevin Migliazza holds a BSc in Health Sciences and Technology issued by ETH Zurich, and a MA in Health Sciences with major in Health Economics and Health Policy issued by University of Lucerne. He started his PhD at the Department of Health Sciences and Medicine of the University of Lucerne with employment at Helsana Insurances in September 2020. Currently, he works at Helsana in a project which identifies differences in regulation between the Swiss and German healthcare market and in the behavior of healthcare providers and insureds.
Date and time	15 November 2021, 14:15 – 15:15
Location	Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne https://unilu.zoom.us/j/65380981753 ID: 653 8098 1753 Passcode: 123
Content	<p>Background Medical treatment quality has been shown to be better in high volume than in low volume hospitals. However, this relationship has not yet been confirmed in abdominal cancer in Switzerland and is relevant for referral of patients and healthcare planning. Thus, the present study investigates the association between hospital volumes for surgical resections of colon, gastric, rectal, and pancreatic carcinomas and outcomes.</p> <p>Methods This retrospective analysis is based on anonymized claims data of patients with mandatory health insurance at Helsana Group, a leading health insurance in Switzerland. Outcome parameters were length of hospital stay, mortality and cost during the inpatient stay as well as at 1-year follow-up. Hospital volume information was derived from the Quality Indicators dataset provided by the Swiss Federal Office of Public Health. The impact of hospital volume on the different treatment outcomes was statistically tested using generalized estimating equations (GEE) models, taking into account the non-independence of observations from the same hospital.</p> <p>Results The studies included 2'859 resections in patients aged 18 years and older who were hospitalized for abdominal cancer surgery between 2014 and 2018. Colon resections were the most common procedures (n=1'690), followed by rectal resections (n=709). For rectal, colon and pancreatic resections, an increase in the mean number of interventions per hospital and a reduction of low volume hospitals could be observed. For the relationship between hospital volume and outcomes, we observed good outcomes in the low-volume category and did not observe a clear dose-response relationship as the differences were not statistically significant. Thus, a positive "routine effect" cannot be excluded, and our results suggest that even hospitals with low volumes are able to achieve good treatment results if excellently staffed and equipped.</p> <p>Conclusion In summary, this study increases transparency on the relationship between hospital volume and treatment success. It shows that simple measures such as defining a minimum number of procedures only might not lead to the</p>



intended effects if other factors such as infrastructure, the operating team or aggregation level of the available data are not taken into account.

Contact

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The Effect of Sport in Online Dating: Evidence from Causal Machine Learning

MSc Gabriel Okasa, Swiss Federal Institute of Technology Lausanne

Speaker Gabriel Okasa is a post-doctoral researcher in data science at the Chair for Technology and Innovation Strategy at the École Polytechnique Fédérale de Lausanne. He holds a M.Sc. in Economics from the Vienna University of Economics and Business and is currently finishing his PhD studies in Econometrics at the University of St.Gallen. Prior to joining the EPFL he worked at the Swiss Institute for Empirical Economic Research (SEW-HSG). His research focuses on the intersection of machine learning and causal inference, with a particular interest in the random forest algorithms.

Date and time 22 November 2021, 14:15 – 15:15

Location Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne
<https://unilu.zoom.us/j/66759352372>
ID: 667 5935 2372
Passcode: 123

Content Online dating emerged as a key platform for human mating. Previous research focused on socio-demographic characteristics to explain human mating in online dating environments, neglecting the commonly recognized relevance of sport. This research investigates the effect of sport activity on human mating by exploiting a unique data set from an online dating platform. Thereby, we leverage recent advances in the causal machine learning literature to estimate the causal effect of sport frequency on the contact chances. We find that for male users, doing sport on a weekly basis increases the probability to receive a first message from a woman by 50%, relatively to not doing sport at all. For female users, we do not find evidence for such an effect. In addition, for male users the effect increases with higher income

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Corona Immunitas Lucerne: Spread of SARS-CoV-2, vaccination progress and the pandemic's impact on the population of the Canton Lucerne

PhD Erka Harju, University of Lucerne

Speaker	<p>Erika Harju is a Senior Research Fellow at the Department of Health Sciences and Medicine and project manager for the Corona Immunitas Lucerne study at the Lucerne Cantonal Hospital.</p> <p>She successfully completed her PhD at the University of Lucerne in December 2020 at the Department of Health Sciences and Medicine. Her research focused on childhood cancer survivorship, specifically the psychosocial impact of childhood cancer and screening instruments for distress. Erika also holds a Masters in Health Sciences and a Bachelor of Science in Nursing with clinical expertise in oncology.</p>
Date and time	29 November 2021, 14:15 – 15:15
Location	<p>Room 4.B02, University of Lucerne, Frohburgstrasse 3, 6002 Lucerne</p> <p>https://unilu.zoom.us/j/63162260527</p> <p>ID: 631 6226 0527</p> <p>Passcode: 123</p>
Content	<p>Erika will present the Corona Immunitas study in Lucerne and early findings on the pandemic's impact on mental health in the Canton of Lucerne.</p> <p>Background/Objectives: To mitigate the impact of the current Severe Acute Respiratory Syndrome-Coronavirus 2 (SARS-CoV-2) pandemic, sound evidence on medical, scientific, economic, and social issues is imperative. Therefore, the research program Corona Immunitas was implemented in Spring 2020. This program is coordinated by the Swiss School of Public Health (SSPH+). Initially created to measure the spread of SARS-CoV-2 across Switzerland, the study has expanded into a nationwide project with more than 40 studies on COVID-19. In January 2021 the University of Lucerne and the Cantonal Hospital Lucerne joined the project to provide information regarding the Canton of Lucerne. Corona Immunitas has been providing reliable epidemiological data to make informed decisions on the adoption of proportionate and effective protective measures. Furthermore, the studies help to plan vaccination programs and to better prepare for future coronavirus waves or other virus outbreaks. In Lucerne, data on seroprevalence, vaccination progress and other topics such as the influence of protective measures, risk and health behavior and the pandemic's influence on mental health have been and are continuously collected.</p> <p>Methods: We conducted a cohort study with a random sample (N=1045) of the general population in the Canton of Lucerne. Our cohort included two age groups: 20-64 years (n=540) and 65+ years (n=505). We collected blood samples for seroprevalence calculation and participants were invited to further participate in weekly and monthly questionnaires (eCohort N=977).</p>
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Are you still watching? Insights into people’s binge-watching habits and their consequences

PhD Alexander Ort, University of Lucerne

Speaker	<p>Alexander Ort studied Communication Science (B.Sc.) and Empirical Communication Science (M.Sc.) at the University of Hohenheim. He focuses on topics concerning media use and media effects, especially within the domain of health communication and media psychology. His research is based mostly on quantitative methods, including psychophysiological and real-time response measurements.</p> <p>From 2013 to 2015, he was a research assistant at Wissenschaftscampus Tübingen and University of Tübingen. Afterward (2015-2019), he worked as a research and teaching assistant for the chair of Empirical Communication Research (Department of Communication and Media Research) at the University of Fribourg. After completing his doctorate in 2019 ("Advancing persuasive health communication— Investigating and comparing the effectiveness of persuasive strategies beyond the use of fear appeals"), Alexander became a senior research fellow in a project funded by the Swiss National Science Foundation (SNSF) about excessive media use (binge-watching). Since 2020, he is a senior research fellow at the University of Lucerne in another SNSF-project that focuses on improving institutional health communication during health emergencies, such as the COVID-19 pandemic.</p>
Date and time	06 December 2021, 14:15 – 15:15
Zoom credentials	<p>https://unilu.zoom.us/j/66856643338</p> <p>ID: 668 5664 3338</p> <p>Passcode: 123</p>
Content	tbd
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Hearing Loss in Childhood Cancer Survivors

MSc Sven Strebel, University of Bern & University of Geneva

Speaker Sven Strebel is a PhD Candidate in Clinical Epidemiology at the Institute of Social and Preventive Medicine (ISPM) of the University of Bern. He is a member of the Childhood Cancer Research Group supervised by Prof. Dr. med. Claudia Kuehni. He is also a research associate at the CANSEARCH Research Platform in Paediatric Oncology and Haematology of the University of Geneva, supervised by Prof. Dr. med. Marc Ansari. His research focuses on late effects after childhood cancer, with a particular interest in hearing loss

Date and time 13 December 2021, 14:15 – 15:15

Zoom credentials <https://unilu.zoom.us/j/63546994616>
ID: 635 4699 4616
Passcode: 123

Content Background: Hearing loss is a late effect in childhood cancer survivors (CCS) after ototoxic treatments – in particular platinum chemotherapy, cranial radiotherapy (CRT) with doses of ≥ 30 Gray, and surgery involving the auditory system. To date, we have not studied the prevalence and clinical risk factors for severe hearing loss based on audiogram data in CCS at a national level in Switzerland.

Methods: As part of the international collaborative research project PanCareLIFE, we performed a retrospective analysis of all CCS diagnosed at age ≤ 18 years in Switzerland and treated with platinum chemotherapy in the nine paediatric oncology clinics between 1990 and 2014. Audiograms, treatment-related information and socio-demographic data were extracted from medical records and from the Childhood Cancer Registry. Two audiologists independently graded all audiograms based on the Münster Ototoxicity Scale. We defined severe hearing loss as \geq grade 3 of the last audiogram. We used multivariable logistic regression to assess associations between clinical risk factors and hearing loss.

Results: We analyzed data from 304 CCS, median time from cancer diagnosis to last audiogram 4.4 years (IQR 2.0-7.8 years). Prevalence of severe hearing loss was 23% (CI: 19-28). Severe hearing loss was associated with younger age at diagnosis (odds ratio [OR] 4.4, CI: 1.9-10.1 for < 5 years and OR 2.4, CI: 1.0-5.6 for 5-9 years versus 10-18 years), treatment in earlier years (OR 5.0, CI: 1.9-13.2 for 1990-1995 and OR 1.7, CI: 0.8-3.8 for 1996-2005 versus 2006-2014), higher cumulative doses of cisplatin (OR 3.5, CI: 1.1-10.8 for < 300 mg/m²; OR 7.6, CI: 2.7-21.6 for 300-500 mg/m²; OR 10.1, CI: 3.1-33.4 for > 500 mg/m² versus no cisplatin), concomitant CRT (OR 3.5, CI: 1.7-7.2), and hematopoietic stem cell transplantation (OR 2.8, CI: 1.2-6.8).

Conclusion: One in four CCS treated with platinum-based chemotherapy suffers from severe hearing loss emphasizing the need for audiological follow-up and counselling in this population.

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Development of a transitional care protocol for low resource settings

MD Asma Mohamedsharif, University of Lucerne

Speaker Asma MohamedSharif is a medical doctor from Sudan. She earned her master of public health diploma at AlNeelain University, Khartoum, Sudan in March 2016 and she was a lecturer at the same university. Asma is a Certified Professional in Healthcare Quality CPHQ and she holds a Professional Diploma in Infection Control (PDIC) and a Diploma of Research Methodology and Ethics. Asma is a SAFRI fellow, which is funded by the Foundation for Advancement of International Medical Education and Research (FAIMER). Between 2015-2020, Asma was appointed in different position related to the quality improvement of healthcare improvement and medical education development. Since September 2020, she is working as a PhD student at the University of Lucerne in the team of Prof. Armin Gemperli. Her PhD project focuses on the Development of a healthcare transition model for low resource settings and is funded by the Swiss Government Excellence Scholarships for Foreign Scholars and Artists ESKAS.

Date and time 20 December 2021, 14:15 – 15:15

Zoom credentials <https://unilu.zoom.us/j/68069596068>
Meeting ID: 680 6959 6068
Passcode: 123

Content During an episode of illness, patients may require care from different practitioners at multiple settings, placing them at risk of fragmented care. Evidence has shown that interventions targeting the transition of care has consistently resulted in improved patient outcomes and reduced health care costs. Most of the available models are designed for developed country where system, care provider, and patient are very different. Despite the importance of tackling care transitions in developing countries with low-resources settings, improving care transitions have received little attention in Sudan. There is lack of information about structured model for transition of care or the other strategies that may be introduced to address the issues and there are questions about the efficiency. This study is aimed to develop an evidence based transitional care protocol for a low resource setting, that suit the Sudan context (the health system, care provider and patients). Study will be done through three phases:

- Phase 1: Scoping review of the systematic reviews in transitional care intervention
- Phase 2: Situational analysis which provide in-depth understanding of the strategies related to healthcare transition in Sudan
- Phase 3: Development of new transitional care protocol

The study will yield innovative transition of care protocol that suit the system, care provider and patients of low resource setting. Necessary elements for effective transitions (the model) are then illustrated, followed by promising new directions for care transition quality improvement at the level of the delivery system, information technology, and national health policy.

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