In the capital city of Malaysia, Kuala Lumpur, representatives of over 20 nations attended the 7th annual Asia Pacific Military Medicine conference from 2-7 March. This meeting is a scientific forum for regional Military Medical departments to share information, learn about regional medical issues, and develop closer working relationships. The meeting is annually hosted by a different nation and has been held in Sydney, Australia (1996), Delhi, India (1995), and Honolulu (1994) in recent years. Participation has steadily grown as the U.S. Army Pacific sponsored program has become recognized as a well received, informative and scientifically robust forum.

The theme of this years meeting was "Medical Readiness." Training for medical management of military actions is a complex activity, involving logistical, tactical, and unique operational medical techniques. Medical readiness of a military unit depends largely upon the ability to rapidly transport and sustain medical material, and patient care facilities. Medical intelligence regarding potential endemic disease threats, and appropriate practical management is an integral part of physician readiness. Military physicians routinely receive specialized training in environmental diseases (frostbite, heat stroke, altitude sickness, etc.), tropical and non-tropical infectious diseases, and treatment of biologic, chemical, and nuclear injuries. The mission of many nations Military Medical Departments has evolved to include humanitarian relief and disaster response capabilities.

Presentations in Kuala Lumpur focused on infectious disease threats and research, unique operational environments, and humanitarian missions. Delegates from around the Asia Pacific region presented informative details of regional problems and experiences. Delegates from Nepal discussed hydatid cyst disease and tube thoracostomy in Kathmandu. Representatives from Thailand discussed the impact of deforestation on malaria rates in troops, and effective new malaria control programs were reviewed. Chinese physicians reviewed how the Peoples Liberation Army mobilizes and activates medical facilities when required for wartime missions. A remarkable review of the very effective AIDS prevention program in the Thai Army was enjoyed by the audience. Investigational antimalarial drugs were the subject of a review by the Madagascar delegation. Psychiatric effects of intense conflict were reviewed by the Sri Lanka Air Force Medical delegate. The Malaysian development of an Underwater and Hyperbaric Medicine unit was showcased, and contrasted with a similar presentation by the Royal Australian Navy delegation. Chemical warfare and the medical response to the Sarin terrorist attack was reviewed by the Japanese Self Defense Force. Other presenting nations included Cambodia, Vietnam, Pakistan, India, Indonesia, Russia, Mongolia, Philippines, New Zealand, and others. Most of the Pacific Island nations were represented.

Hawaiian based physicians reviewed the impact of Malaria in the Solomon Islands during W.W.II (Col. Thomas Cashman, TAMC), Telemedicine in the Pacific (Maj Brian Goldsmith TAMC), The Military Role in Complex Humanitarian Emergencies (Adm Dennis I. Wright, Command Surgeon - Pacific Command, Camp Smith), Asthma in the Military (LTC Benjamin W. Berg, TAMC), and many others. Tripler departments of Radiology, Surgery, Medicine, Dentistry, Nutrition, Pediatrics, and Family Practice presented original research and reviews. Medical officers of the 25 Infantry Division (Light) at Schofield Barracks reviewed field experiences in Medical readiness and training exercises in the Pacific region.

The Malaysian hosts proved to be gracious and many enduring friendships were developed. The City of Kuala Lumpur proved an enticing venue for the meeting, and the fabulous cuisine invited long meals and good esprit de corps. Kuala Lumpur is a bustling city of 1.3 million people. Explosive growth evident everywhere, with construction of modern skyscrapers and other facilities continuing day and night. A sharp contrast to the small trading post founded by a group of tin miners in 1857. As the tin trade flourished British intervention came, and the Federated Malay States was formed in 1896, with Kuala Lumpur as the capital and seat of British administration.

British influences are palpable throughout Malaysia today, 40 years after independence was gained in 1957. Muslim influences are prominent in architecture, food and custom. Elaborate mosques are interposed with colonial British administration buildings. The sights, sounds, tastes and olfactory delights of the city are exotic, and tantalizing. The influence of the multi-ethnic Malay (Chinese, Indian, Dutch and Malay Bumiputra) population and rich heritage make Kuala Lumpur a remarkably cosmopolitan city, with something for everyone. A visit to the city of Melaka (Malacca) yields a respite from the urban tenor of Kuala Lumpur. There is an abundant history of Dutch influence, South China Sea piracy, and Indonesian trade in this seaside city 2 hours from Kuala Lumpur.

*Correction:
The article on “Dateline: Boualapha, Laos," which was last published in my column in the HMJ December 1996 issue, was authored by Dr Edward Chiu, Department of Medicine, Tripler Army Medical Center.