

THE NEED TO HELP THE SPINE OF WORLD HEALTH CARE GAIN A SCIENTIFIC IDENTITY AND PROPOSED SOLUTIONS



First, all clinical researches should be truly scientific.

Therefore, all steps of the research, from the planning to the analysis should be able to be interactively inspected and monitored.

Sadly tens of millions of clinical researches published until today have failed the mentioned expectations.

The faulty/deficient planning, lack of control and deficiencies during research and on top of all of this faulty analysis would lead to columnists or scientists sharing the research which would then lead to new researches and treatment methods to be based on this faulty interpretation.

This would all cause negative effects on medical equipment and preventive medicine.

The lack of proper inspection of the said chain of events ([research](#), [treatment](#), [planning](#)) causes scientists to waste tens of billions of hours, hundreds of billions of damages and leads to the inability to provide the promised and ideal health services to individuals.

To scientifically assess and recommend treatment to a patient, all variables such as blood/urine test results, how they consume their calculated daily energy/nutrients needed, exercises, used medicine/supplements, monitoring results, surgical etc. interventions, stress, sleep schedule etc. should be viewable from past to present either as graphs or on a figure of the human body. ([Attached is an example](#))

Hakan Hamzaçebi, M.D. and his colleagues has planned and started the software projects to provide practical and scientific solutions to the needs of this complex chain in 2001.

With his workmates, they have developed hundreds of integrated Web and Mobile applications under the HEALTH MASTER GLOBAL name.

EXAMPLES OF TARGETS THAT THE HEALTH MASTER GLOBAL PROJECTS COULD HELP ACHIEVE SCIENTIFIC STANDARDS

1. CLINICAL RESEARCH MANAGEMENT

- a. Optimization of planning
- b. Optimization and supervision of execution
- c. Optimization of interpretation

2. PATIENT MANAGEMENT

- a. Optimization of diagnosis
- b. Optimization of treatment and meal recommendations
- c. Optimization of the planning and execution of the controls

3. MANAGEMENT OF A HEALTHY INDIVIDUAL

- a. Optimization of risk determination
- b. Optimization of treatment and meal planning
- c. Optimization of the planning and execution of controls

4. MANAGEMENT OF THE COUNTRY'S HEALTH BUDGET

- a. Optimization of diagnosis (planning and expenses)
- b. Optimization of treatment and meal planning (planning and expenses)
- c. Optimization of controls and predictive medicine

5. PRIVATE HEALTH INSURANCE MANAGEMENT

- a. Optimization of the determination of the insured individual's health risks
- b. Optimization of evaluation of insured individual's diagnosis, treatment and follow up activities
- c. Optimization of the planning and realization of company goals

6. MANAGEMENT OF MEDICAL FIRMS

- a. Optimization of human and animal testing and their planning, execution and interpretation
- b. Optimization of medicine usage, review and procedure steps
- c. Optimization of the planning and execution steps of the production of new medicine