

EHFG 2011: EU HEALTH SERVICES "SUFFERING FROM VIRUS"

In a powerful exposé of what he called "a virus in our health services", EHFG Founder-President Prof Günther Leiner used his opening speech to the European Health Forum Gastein to attack the vast number of inappropriate drug prescriptions and unnecessary checks and treatments in the EU. It was a racket, he said, opening the EHFG debate on "Innovation and Wellbeing", "an inexcusable waste of resources" which could also be positively dangerous. In a time when health budgets were under such enormous strain, largely because of Europe's lopsided demography, the matter needed urgent attention, said Prof Leiner. He blamed in part the way medicine had been turned into a business, and market economics had undermined a traditional commitment to the wellbeing of patients.

Bad Hofgastein, October 5, 2011 – Introducing an ambitious agenda focussing on the challenges posed to health services by Europe's rapidly ageing population, EHFG Founder-President Prof Dr Günther Leiner used his keynote opening address to the 14th European Health Forum Gastein to launch a sharp attack on what he called "the virus in our health services". Until it was tackled, he told the 600 delegates from all over the world, overdoctoring made nonsense of health policy and of any attempt to balance the books in Europe's strained health budgets.

"We agonise about supposedly financially unsustainable health systems," he said. "How can that square with the phenomenon or over-doctoring? There are some things that have gone wrong. The financial incentives are wrong. Sometimes a provider should be rewarded for not intervening, for example. For years there has been some determined pushing-of-the-envelope. And finally, over-doctoring has become almost normal because of the whole sense of entitlement. Health has progressively come to be seen as a consumer good. Those, I would say, are what have made our health systems sick."

Soaring costs of routine high-tech investigations – to what purpose?

President Leiner said "less can often mean more" and the principle applied to medicine too. "Unfortunately it has often been forgotten. Operations are often carried out too early or too often. The most obvious example is unnecessary back operations. These are not just expensive but needlessly expose patients to risk. Similarly with medication. People over 75 typically take seven distinct drugs every day, with all the side-effects that implies. The main German health insurance company, Barmer Ersatzkasse, recently revealed that around 50% of dementia patients needing the maximum amount of care were being sedated with neuroleptics although 20% to 30% less were actually necessary."

Prof Leiner also said the practise of needlessly intrusive diagnostic procedures needed critical examination. These were often just the prelude to treatment. A typical example was the regular recourse to CT and MRI scans for back pains. "Recently the American College of Physicians asked its member not to perform such tests in the case of back-pain except in unusual neurological circumstances, and if there were signs of serious illness," said Prof Leiner. "Between 1997 and 2005 the costs in the USA of graphic data based diagnoses have risen by 65% without improving the health of patients suffering from back-pain by one jot."

Another reason for being suspicious was the huge difference between the number of MRI and CT found in different places in Europe, he said. "This does not reinforce one's faith in them being performed for medical reasons, nor can it be explained by one or other population being healthier. OECD data for 2010 showed there were 98 MRI investigations a year per 1,000 of the Greek population, compared with 72 in Iceland, dropping to 28 in the Czech Republic and 24 in Slovakia.

The gap was similarly striking for computer tomography diagnoses: 320 CT scans per 1.000 Greeks, 182 in Belgium, 82 in Slovakia and 60 in the Netherlands. "Such differences cannot, I am quite certain, be explained medically. Not being examined does not make the Greeks any healthier, but every scan makes the nation another bit poorer."

USA – 34% of health costs "just to keep doctors safe from legal action"

In the USA legal considerations and a fear of being sued played a large part in encouraging excessive use of scans. A Gallup poll found doctors thought 34% of health expenditure could be ascribed to "defensive medicine", meaning diagnosis and therapy, mainly to protect them from complaints. This trend was not yet so pronounced in Europe, but was certainly on the increase, Prof Leiner said. The major problem behind was "medicine as business".

Medical values reduced to "ideological sideshow"

A Dutch medical periodical had recently published an inquiry that found four in 10 medical specialists considered they were under pressure from the hospital management to carry out investigations which were actually unnecessary. Prof Leiner: "Lump sum payments per case, market-economy rules in hospitals, endless calculations – this is what happens when medicine is reduced to economics and the application of technology."

Making a business of the whole medical profession, so that it is practised within a system based on market competition, has made the very existence of a modern hospital a matter not only of helping people as best one can, but first and at least as importantly, of how well the hospital can be run commercially. The caring professions are being driven into conflict situations "which are almost unbearable", said Prof Leiner. "Bit by bit, the fundamental commitment to the well-being of patients is being reduced to a purely ideological side-show".

The EHFG is the most important conference on health care policy in the EU. This year it attracted more than 600 decision-makers from 45 countries for discussions on the latest developments in health care policy.

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