



PROPOSALS FOR THE HEALTH SYSTEM

Italy is one of the few countries in the world that has a universally accessible public health system. According the World Health Organisation (WHO) it is the second in the world for its quality. However in recent years, two aspects are undermining the universality and the homogeneity of the National Health Service:

- devolution which allows the Regions to take care of the management of the health service and thus risks to accentuate territorial differences
- the emphasis on private health services which takes away talent and resources from the public sector.

Furthermore, for the last 10 years, so as to make more efficient use of resources and to overcome the clientism of the old USL {Unità Sanitaria Locale – Local Health Organisation} management committees, there has been an emphasis on running the health system like a company. This approach has often led to the economic objectives being given more importance than the objectives of health and service quality.

Here are the proposals to improve the health service that have come out of the Citizen Primaries.

DRUGS

- Promote the use of generic drugs that have no patent, that are equivalent and cheaper than the "branded" drugs that also often cost much more in Italy than in other countries and are safer than products that have been recently approved.

- Promote the use of generic drugs that have no patent, that are equivalent and cheaper than the "branded" drugs that also often cost much more in Italy than in other countries and are safer than products that have been recently approved.

Start an independent health education programme aimed at teaching people about the risks, benefits and uses of particular drugs.

HEALTH INFORMATION

Put in place a national health policy that is cultural and is based on information and social communication, that aims to promote consumer choice based on knowledge and adequate provision and developing self-management of one's own health (taking into account risk factors and protection) and simple self-medication.

Provide adequate information about health promotion measures like diet, physical activity, and smoking cessation. Also about the limits of secondary prevention like screening, preventative diagnosis, predictive medicine. The scope of this should be changed as it is currently influenced by commercial imperatives and by the medicalisation of problem areas rather than the genuine needs for public health.

Set up a system for measuring the quality of hospital care. Indicators could include success rates, death rates, and volume of cases treated. This information should be made public so that people have a real chance of making an informed choice. This also encourages those places with poor results to take corrective action.

WOMEN'S HEALTH

- Register the abortion pill RU-486 without uselessly pretending that it is still in an experimentation phase, since the product is already used quite safely by millions of women in nearly all of Europe.

- In view of the attacks on family planning units, now is the time to invest in them. Have them managed by non-religious people so that they can respect the will of all women since they are dealing with such a painful subject as the termination of pregnancy.

CITIZEN PRIMARIES



DOCTORS

Prohibit economic incentives for "scientific" sales personnel on the sale of drugs. Attack corrupt doctors and bring in new laws to do this if necessary.

Separate the careers of public doctors from private doctors. Don't allow doctors working in a hospital to work privately as well as this means putting them in competition with the public system.

But to ensure that this "separation of careers" does not cause a flight of doctors from the public sector towards the more lucrative private sector, it is necessary to provide adequate incentives to stay in the public sector. This can be connected to merit. Prices set in the private sector can be capped.

Establish transparent criteria so that senior doctors are promoted on merit and not according to family relationships and affiliation to political parties.

Break any connection that may exist between the professional education of doctors and the influence of industrial sponsors. Encourage the development of competence in communication, empathising and relating to patients.

Do systematic evaluation of waiting lists and make the results known online so that everyone can be better informed.

Set up centralised booking systems in each region with the possibility to book online as well.

Have a strict set of reviews to be applied before renewing contracts with private organisations.

Limit the power of directors of ASLs (Aziende Sanitarie Locali or Local Health Authorities) and hospitals by bringing back Boards of Directors but without allowing party politics to determine their composition.

MEDICAL ERRORS

Make sure that there is greater transparency in communicating and checking errors in the health system with the corresponding mechanism for fair compensation. Establish the possibility to make anonymous reports of errors so that they can be quickly uncovered and dealt with so that they are not repeated.

FIGHTING PAIN

Bring Italy into line with other European countries in applying the directives of the World Health Organisation (WHO) in the fight against pain. In particular, eliminate cultural and bureaucratic obstacles to the use of opiates (like morphine). One example where pain is not sufficiently controlled is the case of cancer.

Even though there are published guidelines (including those published by WHO) for managing pain due to cancer and effective treatment is available in 70-90% of cases, many patients with cancer are not given sufficient treatment. (sometimes up to 40%). The most frequent cause of this is a lack of knowledge about opiates whose frequency of use in Italy is among the lowest in Europe.

RESEARCH

- Allow tax paying citizens the chance to dedicate 0.8% of the income tax they pay to scientific research.
- Ensure that finance is available for independent research even by drawing on funds destined for military research. Such funds have grown exponentially in recent years.
- Promote and finance research into the effects on health of social inequalities and environmental pollution giving priority to "pure" researchers.
- Promote research into rare illnesses, which are not given financial support by pharmaceutical associations since they are likely to produce a low return on investment.
- Based on the recommendations of the WHO, establish at national and regional level health impact assessments of public policies in particular for the sectors of transport, town planning, the environment, work and education.