

A Difficult Start Into the Year

Editorial

The current year began with remarkable problems for many physicians and their organizations. In Poland, the parliament tried to hold physicians financially responsible for the management of non-transparent entitlements of their patients. This is interesting in a country where the health insurance system is run by the state – the entity best positioned to fix the problem in the first place. Fortunately it appears that the actions might be reversed soon.

At the end of the year in the Slovak Republic, the government put the hospitals in a state of emergency, which placed hospital physicians under a kind of martial law, prohibiting them from going on strike. Do they really believe physicians waived all their rights upon entering the profession? Of course it is easy to save money at the expense of others, especially when you can “gag” them with the help of the police. This is yet another bitter attempt of a government to compensate for their financial problems by taking from those who serve most and work hardest. The fact that physicians in the Slovak Republic are already severely underpaid makes the situation even more deplorable.

But the worst situation has been the attempt by the Turkish government to dismantle physician self-governance, despite the fact that this responsibility was granted by law to the Turkish Medical Association. Through a government order, the Turkish government is attempting to take key self-regulatory functions away from the TMA and empower a government-controlled organization with oversight of all health professionals. This is a blatant attack on civil society and defies the principles of parliamentary democracy, in which laws made by the parliament must not be changed by the executive branch.

Letters of solidarity have come to the Turkish Medical Association, supporting them in their fight for self-governance, civil engagement, and the maintenance of basic democratic rules. The World Medical Association will have a presence in Ankara and Istanbul on April 16th and 17th to help the Turkish Physicians regain their rights of self-regulation.

Attacks on physician self-governance have not been limited to these very recent situations. We have seen this several times in the past years, with some efforts more successful and some less so. The common thread among these situations is the objective of “command and control” of the profession. In most affluent societies, health care is by far the largest identifiable sector of economy. To steer this sector holds strong appeal for all governments. Physicians, with their highly influential structures designed to maintain and develop health care systems, are the most targeted group in this changing environment because cutting entitlements for medical and health care is most easily accomplished when this group is disempowered. And in the end, it matters very little whether control of the profession is exercised by a government body, an insurance company, or a managed care company.

The profession has a lot to lose. Being regulated by a bureaucratic administration that does not understand medicine and the work of physicians is difficult. Being regulated by an administration that is not only disconnected from medicine and care but that has only cost-savings on its radar is even worse. And while these frustrations and difficulties are not to be underestimated, the ultimate threat is to be downgraded from a respected profession to a technical service.

Professional self-governance is not merely a means for physicians to exercise control to serve their own interests; it serves a critical patient-centered purpose and we must make that understood to all stakeholders. In health care, the objective of self-governance is to provide better medical care to the patients and services to our people, to protect the dignity of patients, and to improve public health in our communities. We must be able to demonstrate to our societies that it is to their advantage to have physicians who can freely exercise their duties according to professional standards and ethical rules rather than to be under the control of a government, or an insurance or a managed care company. When physicians are forced to follow third party orders, the interests of the patients will always come last.

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