



E.A.N.A. MEETING GIBRALTAR , MAY 27-28, 2011

COUNTRY REPORT FROM SPAIN BY ASPROMEL

EVOLUTION SINCE OUR LAST COUNTRY REPORT

The Public Spanish National Health System suffers an increasing need of sustainability due to the factual impossibility to offer equal medical assistance to equal conditions to all citizens. The budget for 2011 is inferior to the expenditure of 2009 and the accumulated dept of the public services is about 15'000 millions of Euros. Suppliers have to wait up to 300 days to be paid by the health administrations. Health professionals are amongst those with the lowest income in Europe and are systematically excluded from decision making processes and management. Health policy is dangerously losing contact to Health Sciences and to Health Professions. Political interests have supplanted medicine as the central axis of the NHS. Autonomic Communities has fragmented health policy and the market, and menace further the sustainability of the NHS. From inside the NHS, G.P.s claim more transparency in analysis and evaluation of planning and management, a major role in medical assistance, a major role in health policy and a more citizen-centred organisation of the whole health system.

On the other hand medicine in free practice is still systematically excluded from the same NHS. This parallel private medicine which represents 30% of the country's medicine and occupies some 50'000 doctors continues to struggle for being recognized as a resource and contribution to the population's health. They even in 2011 suffer under apartheid policy observing how their prescriptions are refused by NHS facilities where patients can read : " Doctors of this health centre are expressively forbidden to extend or approve prescriptions made by a doctor from a private facility."

Expenditure in research has decreased a 6 %, pharmaceutical policy has reduced the Spanish pharmaceutical market a 14 %. Politicians fail to link results in people's health with financing and price, reducing only price and volume, and this in open contrast with European standards. The increasing difficulties of the NHS to pay the prescriptions put the pharmacies under further economic pressure.

To resume health policy with the words of Albert Jovell Fernández, President of the Spanish Patients' Forum : " The nation's health sector has accepted with a iatrogenic resignation the austerity and rationing due to a crisis which it has not generated and

which it is not responsible for. If we continue on this way in 2012 we'll have a Health Care Card with on it the following tagline : “ Your disease damages our Health System, please care yourself “, and the Royal Academy of Language will consider to replace the word *state* by the word *market*. “

Medical Profession continues to claim authority in terms of professional development separating it from professional career inside the NHS. On the other hand politicians are elaborating a law which could abolish compulsory membership in Medical College. Some Autonomic Communities have already abolished compulsory membership for those doctors who work exclusively for the public administration, e.g. the NHS, thus depriving Medical College of its authority. Final decision depends now on the Constitutional Tribunal.

A good deal of problems of sustainability could be resolved by an integration of public and private resources, facilities, doctors and know-how into a new public-private national health system following European standards. In the interest of guarantee of the continuity of the patient's therapeutic healing processes, of access to medical care in equal conditions for everybody and of the sustainability of the whole health sector it is unavoidable to proceed to this European integrated standard.

Initiatives for integrating the different health sectors into a new National Health System, based on public-private partnership, come from different corners but politicians continue to live in their own world, not being able to promote the urgent National Health Pact.

Regarding our young and modest professional association ASPROMEL, we continue trying to catalyze the process by maintaining the dialogue with all the actors in the field of health policy and by motivating the doctors, who still too often drown themselves in this iatrogenic resignation which represent for us the major difficulty to grow in terms of membership causing economic narrowness.

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André Bolliger M.D.
President of ASPROMEL