



Healthcare is still unaffordable



Vatsala Vedantam, MAY 06 2019, 21:57 IST | UPDATED: MAY 06 2019, 22:06 IST

With the election epidemic sweeping across the country, larger issues like health, infant mortality and malnutrition have taken a back seat. Whichever party comes to power, these issues will have to receive their immediate attention.

It is ironic that the main cause for infants dying, the elderly suffering and sick persons being denied proper medicare should be highlighted in a foreign country.

A recent report by the US-based Centre for Disease Dynamics, Economics and Policy (CDDEP) has made a shocking revelation. Terminally ill patients suffering from treatable diseases in India have no access to life saving drugs or even to doctors who know how to administer them. "Lack of access to antibiotics kills more people currently than do antibiotic resistance," says director Ramanan Laxminarayan.

Besides, "the irrational use of antibiotics and poor antimicrobial stewardship leads to treatment failure and propagates the spread of drug resistance which, in turn, further narrows the available array of effective antibiotics," he says.

The present study, conducted by scientists, continues to point out how India is short of 6,00,000 doctors and 2 million nurses to take care of these patients.

Besides, improperly trained medical staff actually deprive patients from life saving drugs through their careless and unnecessary use of antibiotics. It also pointed out the sad truth that use of antibiotics and life saving drugs often left patients and their families bankrupt.

In India, 65% of health expenditure is out-of-pocket, and such expenditures "push some 57 million people into poverty each year," concludes the report. Far from seething at this criticism by a foreign organisation, our policy makers should take it in the right spirit and correct such serious anomalies.

One of the biggest anomalies in this country is the sharp divide between the healthcare facilities provided for the rich middle class on the one side, and the impoverished sections of the population on the other.

Take the Central Government Health Scheme (CGHS) where a mere 10 lakh "platinum" card holders consisting of central government employees, pensioners and their families, members of Parliament (past and present) former governors, former Vice-Presidents, existing and former SC judges are the beneficiaries of that exclusive akshaya patra called CGHS.

A real scheme hatched by the same people who would benefit by it during their service and after retirement. Their families and other dependents too will be the beneficiaries of this scheme which offers the biggest share to the privileged few while the rest scramble for the dregs.

On the other hand, there is one government doctor for 10,189 patients as against the recommended ratio of 1:1000, according to a WHO Report. The nurse:patient ratio is 1:183 implying a shortage of two million nurses in the country.

Over and above these shortages, the pathetic primary health care centres in the country, catering to a one billion population, are either ill equipped to treat poor patients, or they are inaccessible to them.

The CGHS, on the other hand, provides 100% inpatient care through a private network of hospitals where rich patients enjoy high-end tertiary care in luxurious corporate hospitals.

And, if those hospitals recommend expensive diagnostic and surgical interventions, the CGHS gladly pays that too.

Studies indicate that for every Rs 5,000 spent on a rich patient, the government spends Rs 180 on the poor patient.

This glaring disparity between the minuscule rich population which gets the lion's share of the healthcare pie and the teeming millions of poverty stricken patients who wait in long lines just to attract a doctor's attention and care is reminiscent of the pre revolution days in France

...last year, when the central government laid out its ambitious plans to improve affordable healthcare in India, it was going to be the world's largest government-funded health programme targeting a staggering 500 million beneficiaries. This was a long-term initiative involving a total overhaul of the system to bring about more parity into it.

If the new government earnestly continues this programme, many of the present deficiencies and disparities will get corrected and the anomalies pointed in the CDDEP report will become a thing of the past.

As for the shortage of doctors and nurses, with 235 government medical colleges having a total intake of 31,727 candidates in addition to the nine AIIMS institutions which have 800 MBBS seats, why should there be a shortage of medical personnel?

State colleges admit another 30,455 students MBBS seats while private medical colleges admit 36,165.

The Government of India increased the number of medical seats to cope with the country's rapidly growing healthcare sector. But, where have the doctors gone?

The foreign countries where they have emigrated after utilising India's costly medical education probably have the answer.

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