

New professionalism in the field of health

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One hundred years ago, the application of the “Flexner” report introduced modern science to the foundations of the medical curriculum, created the academic model of doctors’ education, created the conditions for the academic medical centers and decided to put scientific research in function to improve patient care and clinical training.

This model, which made a valuable contribution to health in the XXth century, is unable to prepare skilled health professionals for the challenges of the XXIst century. This due to the fact that we already live in a very different context, even in a very fast and uninterrupted change. We live in the conditions of a rapid demographic and epidemiological transition. We live in the time of the explosion of the flow of knowledge, technology, information and ease of access to it. We live in the time of the complexity and unstoppable growing cost of the health system. We live in times when other demands on health workers are being set. (2,3) When they are already facing chronic illnesses, different social states, with more knowledge, proactive and with other demands for their health (4,5,6)

What is “produced” today in the faculties of medicine?

“Today university hospitals - according to Knowles (9) - almost exclusively function as ‘castles’ of acute curative medicine Students are usually in contact with hospitalized patients, generally in severe condition, in most cases with acute problems. Current curricula do not provide a balanced vision for health care in general. According to them, the most important place where medicine is practiced is the hospital, which is considered a ‘health repair service’. They report an underestimation for primary care, ambulatory patient, and those with minor

diseases. Negative habits are used to treat chronic diseases. They leave out of attention the prevention, community health or public health.... They leave out of attention the economic problems. The dominant model continues to be oriented to the disease, and not to the patient; there is a hospital basis, which means cure, not care. “

In most medical schools, the only formal learning that students receive for health insurance is the need for them to own it (10).

Shortly, educational strategies have stalled in the trap of the health conditions of the century we left behind. They produce doctors unprepared for the challenges of the time, which are primarily social and economic. Doctors prepare only 10% of what they will face in life, unable to keep in touch with the development of the health system.

Two surveys ...

1 - In the century we live, inadequate nutrition is the root of diseases that seriously threaten public health (obesity, diabetes, heart disease, cancer, etc.), and therefore science of nutrition is a basic discipline of health care. It improves the quality of life and saves the costs of health care. . In September 2011, the results of a survey with family doctors in Tirana were published by the Institute of Public Health. It turned out, among other things, that these doctors had insufficient knowledge of nutrition ... The result may have surprised the public, but not the physicians, who are aware that their dietary knowledge is extremely pervasive, and in many cases lacking at all. This is a defect in their formation at the Faculty of Medicine, where there is no nutrition department, where only a few are concerned about nutrition science, while they focus on the most “important” things, that they will have to deal with just a little or not at all during the exercise of the profession.

2- Whereas many talk about effective-costs, hospitalization, healthcare systems and other topics of this nature, the Medical Faculty considers this superficially. The fact that the health economy, which is indispensable in the conditions of a surge of spending on health care, is not being widely implemented, shows that doctors continue to lack the proper knowledge in this area. Not having an Albanian survey, I referred to a 2009 survey with a group of American students (11). The result: Less than half of the students believed they were properly educated on topics such as medical economics, healthcare systems, healthcare quality, healthcare, health policies, and legality. And all these shortcomings certainly have a direct impact on their later practice as doctors in cost-consciousness and facing everyday complex spending. These are all problems in the heart of contemporary health policies. (12.13)

Time for change...

Educational reforming of health professionals should start without wasting more time. A new vision is required. Informative and formal learning should leave the place to transformative learning. The old, fragmented and static curricula that produce poor leadership, incompetence in health policies and management, unprepared to improve the performance of the health system, unprepared for teamwork, prepared for persistent pursuit of chronicles patients, unprepared for primary care, unprepared for the challenges of public health and, most importantly, unprepared to successfully carry out health reform. On the other hand, it is necessary to set up interdisciplinary teams which should include health economists, medical sociologists, health policy analysts, people trained in different fields of social sciences, like business and organizational management, ethics and psychology. (14,15,16) Training in these areas is indispensable for young health professionals, prepared beyond the narrow field of medical care.

A paradox or a ? ...

In April 2012, Korean-American Jim Yong Kim was elected as the new World Bank director. The impression is that 52-year-old Kim, who will lead one of the world's most important financial institutions, is not an economist, but a doctor!!! Doctor in medicine and Ph.D. in anthropology. So, the World Bank won't be run by a finance expert, but by a graduate in medicine, who will lead 9 thousand economists and decide on billion credits...!!! Does Kim have enough knowledge on important topics related to development? In an interview in the New York Times magazine, Kim himself said: "Economic development and the fight against poverty are so complex that no single discipline can ever involve ... The World Bank has many experienced economists with whom I will cooperate ... Throughout my life as a physician I have tried to solve social problems across the world. So, for a new organization at the World Bank, Kim's experience in the health field as a development expert is required. And the doctor Kim has the required preparation of an expert in medicine, social medicine and human rights.

In conclusion...

As during a century ago, health education reform is a long and difficult process. Hard to design and slow to implement. Especially in countries with limited resources,

which are forced to channel funds into emergency projects. The Faculty of Medicine has made a valuable contribution to the preparation of health professionals, but in its new conditions its reform is indispensable (17). This reformation must at least go hand in hand with the health reform. If this does not happen, this reform can hardly be accomplished or will be poorly carried out. And this has consequences not only for doctors and patients....

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