

SOME ASPECTS OF THE SYSTEM OF MEDICAL INSTITUTIONS AND OF MEDICAL SERVICES IN THE BIHOR-HAJDU-BIHAR EUROREGION

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Abstract: *Some aspects of the system of medical institutions and of medical services in the Bihor - Hajdu-Bihar Euroregion.* Among the determining factors of the health condition of the population an important contribution must have medical services. We must mention that maintaining health does not only consist of adequate medical assistance but it also has a profound social ingredient, being an important part of the whole of the economical-social conditions. The importance and necessity of the system of medical institutions and of the medical services is felt by every single person of contemporary society, beneficiaries of these being not only the people who take advantage of the services of public institutions but the society as a whole. Actions and measurements taken for increasing hopes for life at birth, for curing diseases or for reducing death rates have a serious impact on the level of the society as a whole.

Key words: medical services, medical institutions, the territorial distribution of medical resources and of medical staff.

Introduction

Medical infrastructure and medical staff represent the basis of the medical system, the activity of medical assistance and its quality also conditions the quality of the medical services.

The process of preventing and curing of diseases, in which medical services have the highest importance, implies major financial efforts. We must point out that, the higher the level of development of a country is, the higher the costs of healthcare are. This results in high-performance infrastructure and equipment.



Fig.1. Geographical position of the Bihor-Hajdu-Bihar Euro region (Ilieș A., 2003)

1. Methods of work

For completing this study I observed the quantitative situation of the positioning of emergency stations and of hospitals on the Euro regional territory of Bihor-Hajdu-Bihar. To

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this I added the situation of human resources of the same territory during the year 2005. The necessary data was provided by the Emergency Station of Debrecen and Oradea, County Agency of Public Health of Oradea and Debrecen and the Offices of Statistics Bihor-Oradea and Hajdu-Bihar-Debrecen.

2. Geographical position of the Bihor-Hajdu-Bihar Euro region

Bihor-Hajdu-Bihar Euroregion includes Bihor county on the territory of Romania having Oradea as a central town and Hajdu-Bihar county on the territory of Hungary having Debrecen as a centre (Fig.1).

3. Results

The infrastructure and the staff constitute the basis of the medical system, the medical assistance provided by these and their quality highly conditions the quality of medical services as such. These things might as well determine a movement of the population on the territory – medical migration – that has at its basis various objective or subjective motifs.

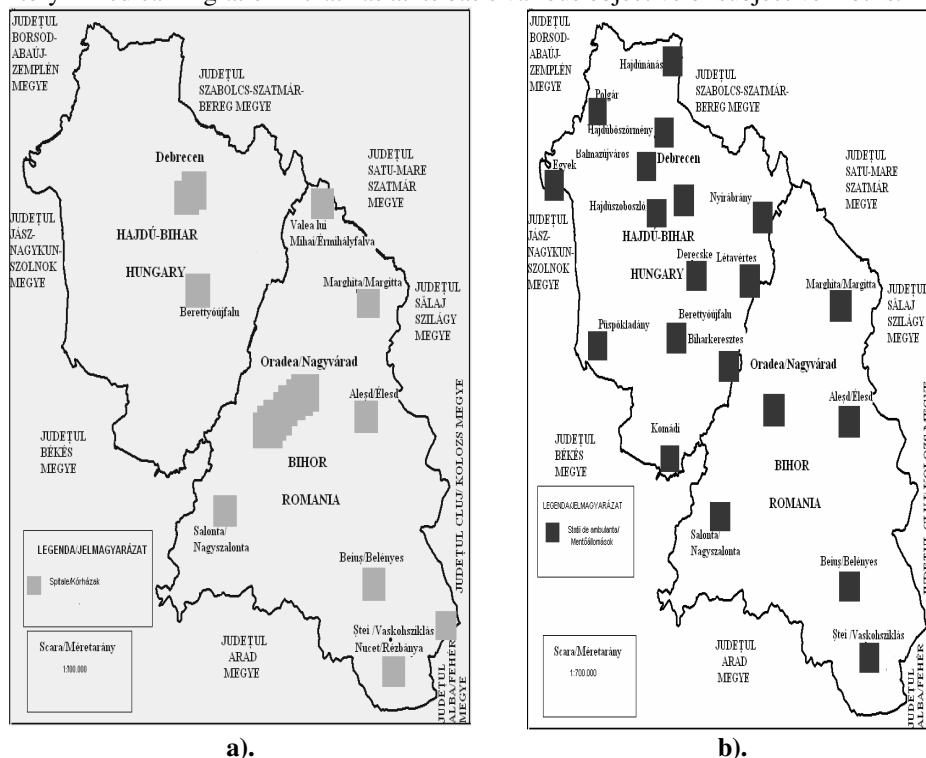


Fig. 2. The distribution of regional hospitals (a) and emergency stations (b) in the Bihor-Hajdu-Bihar Euro region in the year 2005.

The most common causes of these movements are determined by the investigation, diagnosing and treating of some diseases in specialized hospitals. These movements are strictly tied to and dependent from the economical, social, cultural or psychological situation of the ill person. Within the range of this medical migrations journeys taken for the investigation and treatment with medicines of the illnesses, surgeries executed in hospitals or health centers have an important role. These movements are resulting from several factors but their main cause is the lack of balance present in the distribution and the quality of medical resources. The most frequent factors are: the inadequate distribution of medical resources and

of medical staff on the territory especially in municipal areas where the infrastructure and the equipment is of high-performance, hyper-specialized and renown staff, even if these sometimes imply extra costs.

Medical services are highly influenced by the standards and values standing at the basis of society. These reflect in a way the cultural and social values of the members of that particular society. These fundamental values, although integrated outside the formal structures of the medical system, often define the character and capacities of the society. In what follows I will present the distribution of regional hospitals and emergency stations in this Euro region (Fig. 2a, b).

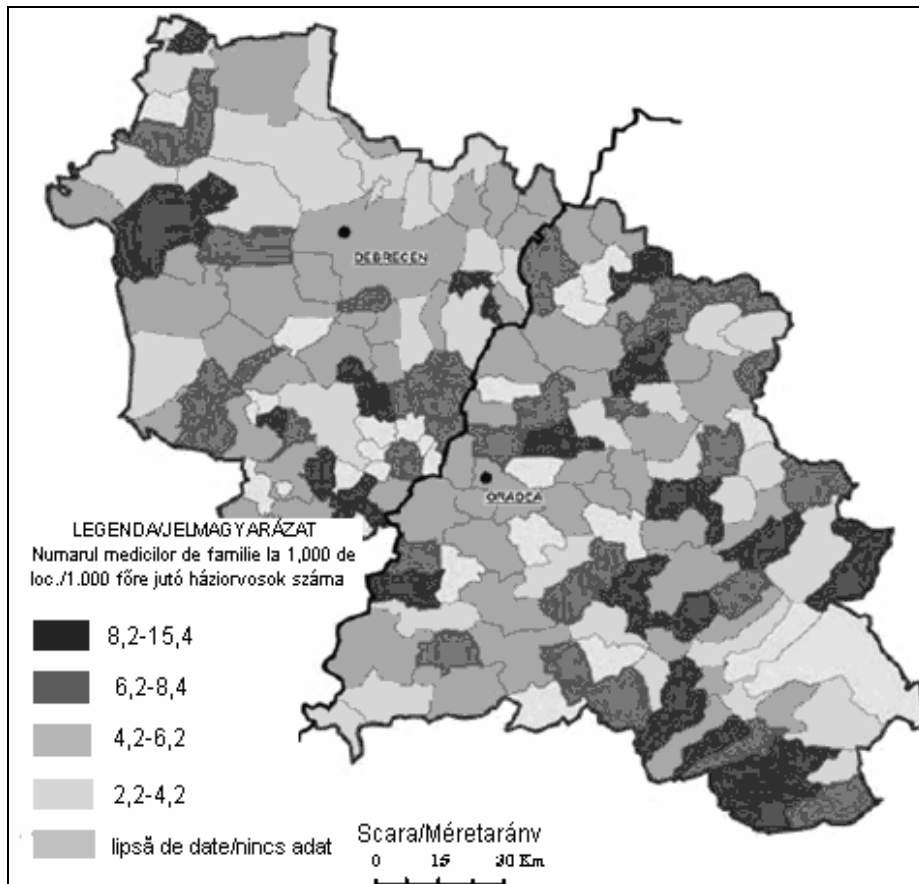


Fig.3. The evolution of the number of doctors of family per 1.000 people in the Euro region

Analyzing the territorial distribution of regional hospitals (Fig.2) in the Bihor-Hajdu-Bihar Euro region in the year 2005 we might conclude that hospitals are more numerous in the Eastern part of the Euro region (15) than in the Western part (3). The infrastructure, the quality of the means of communication or the physico-geographycal conditions might sometimes make difficult the fast access to the sick and than to the hospitals. To this we may add the fact that the hospitals of the smaller centres of the region do not meet the adequate standards of those in the municipal regions. In what follows I will present the situation of the human resources in the system of the Euro region (Fig. 3, 4).

Studying the situation of the human resources in the medical system of this Euro region in the year 2005 I observed that the total number of doctors in Bihor county is smaller (1, 185) than in Hajdu-Bihar county (1,877) as well as the number of people per one doctor is smaller in Hajdu-Bihar (291) county than in Bihor county (502). The number of people per one family doctor is smaller in Hajdu-Bihar county (285) than in Bihor county (337). Fig. 3 presents the situation of family doctors per 1000 people in the year 2005 with minor territorial differences that might be due to the physico-geographical characteristics of the relief or the minor differences caused by the structure and organization of the medical system.

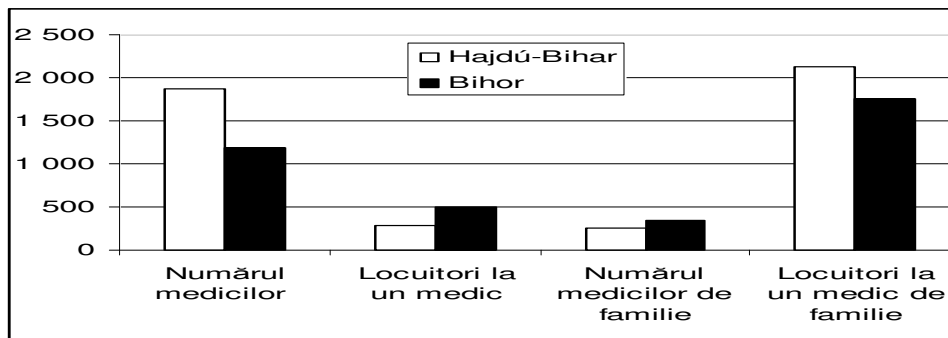


Fig. 4. The situation of human resources in the medical system of the Euro region in the year 2005

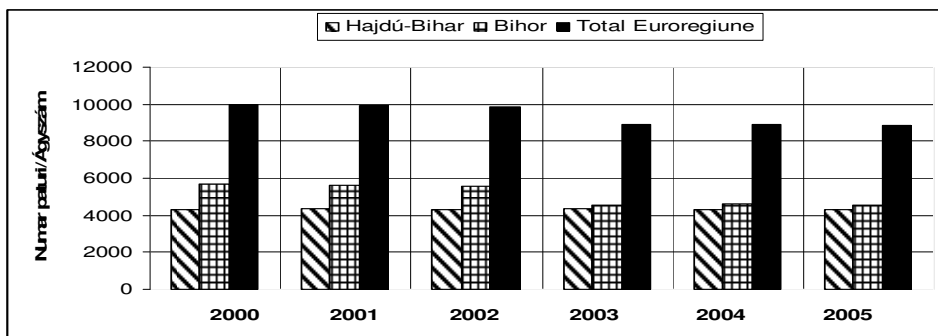


Fig. 5. The evolution of the number of beds in the hospitals of the Euro region

The attentive analyses of the number of beds in the hospitals of the Euro region we observe that there is a higher number of beds up to the year 2002, with a higher share in Bihor County. After this came stagnation and even a reduction of this number in the same county. (Fig. 5) As a whole, in the year 2005, the number of beds in the Euro region was 80.

Another element that indicated the level of medical endowment is represented by the number of emergency stations the distribution of which is presented in Fig. 2. The analyses of this results a total of 20 emergency stations, out of which 6 in Bihor county and 14 in Hajdu-Bihar in the year 2005.

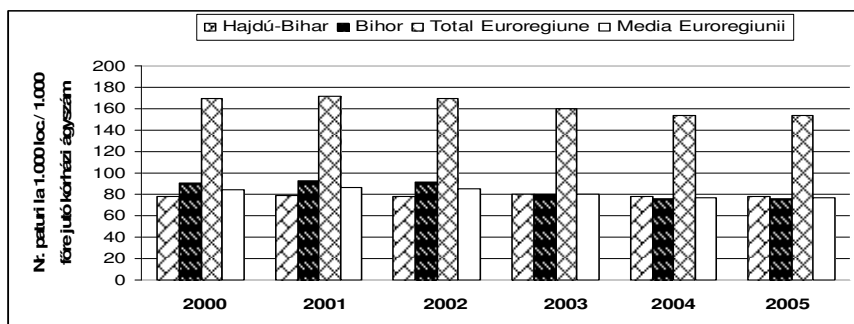


Fig. 6. The evolution of the number of beds in the hospitals of the Euro region, calculated for 1.000 people (Source: KSH-Debrecen, DSB-Oradea)

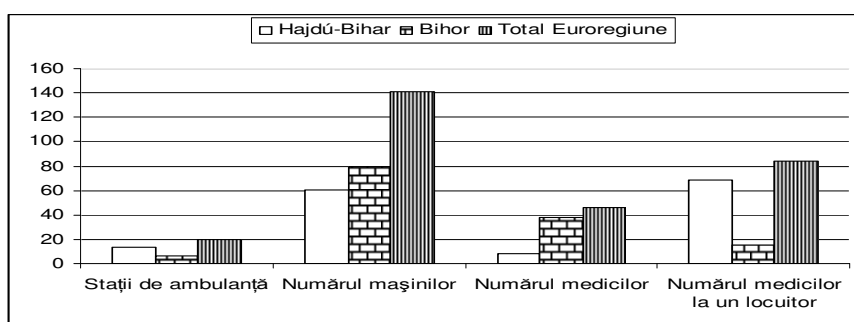


Fig. 7. The number of emergency stations, of ambulance cars and of doctors in the Bihor-Hajdu-Bihar Euro region

After we discussed the territorial differences in the distribution of the emergency stations in the Bihor-Hajdu-Bihar Euro region (Fig. 2) we observe that also the infrastructure and the rate of the human resources of these emergency stations of the two counties is very high.

The number of ambulance cars and of the doctors serving on them is higher in Bihor than in Hajdu-Bihar (Fig. 7). At the level of the Euro region we can conclude a total number of 141 cars and 46 doctors serving on them, out of which many are resident's doctors.

Conclusions

It is evident in some of the cases that the system of public healthcare needs to be restructured; the section of medical assistance and other areas need to rethink their strategies of medical services. We must recognize that without taking efficient measurements for adequate healthcare the reforms taken will not reach their goals. There exist defavourized or simply isolated areas that do not have the financial support necessary for covering the costs of treatments where it is difficult to access the medical services. The medical staff receives low salaries which lead to the diminishing of the moral aspect, the generalization of the process of bribe and a negative attitude of the population towards these. This situation provokes the pretreatment of specialists that reassure the healthcare of the population; in the situation of the medical staff with medium studies this process is already irreversible and a natural shortage and migration of specialists has already started. For the improvement of the situation of the medical system the common effort of the decision-makers of the two counties must be needed both on local and on national level for introducing a medical policy that would motivate the staff of the medical departments. At

the same time the authorities in collaboration must also take common efforts to increase the moral and quality of the services because the health of the population is the most important factor in lasting human development.

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