

From Bench to Bedside and the Problem of ensuring Equity in Healthcare

As part of its commitment to continuing professional development, the Malta Medical Journal is pleased to issue its clinical updates for this year. The latest developments in the fields of respiratory medicine, gastroenterology, obstetrics and gynaecology, urology, emergency medicine and orthopaedics are presented here. The impact of new technologies in the various fields is a tribute to the scientists who make advances in the diagnosis and management of disease and the clinicians who implement these discoveries. The major hurdle to be overcome in a number of institutions and countries worldwide is lack of access to resources and new management options as a result of inadequate facilities, trained personnel and financial restraints. Arebi & Saunders provide us with an example of the targets attainable with the establishment of a facility dedicated to staff development and training, albeit in this instance, in one particular area.

The dissemination of knowledge and expertise to establish global equity in health care is a worthy campaign. However, despite ongoing efforts to reach certain targets worldwide, international disease surveillance organizations provide us with constant reminders of our inadequacy in a number of areas and fields of medicine.

One such dilemma is that posed by the possibility of an influenza pandemic sweeping across the world and the resultant predicted high mortality rate. In this issue Spiteri et al discuss the issues that need to be grappled with. Despite state of the art facilities in developed countries, the timely production of adequate amounts of specific vaccines and antivirals still remains an insurmountable challenge when nature sporadically but with deadly efficiency churns out freshly mutated viruses and bacteria.

The organisation and planning of health care provision and equitable distribution of resources against a backdrop of an influenza pandemic will stretch the resources of the best health services around the world. Ours will be no exception. Information campaigns for the general public regarding the manifestations and outcomes of specific diseases remains a top priority but care is necessary to avoid panic driven actions and decisions at times of crises. Professionals in primary healthcare and hospital based practice need to have a clear concept of what is expected of them in a pandemic situation with familiarization with action plans and practice guidelines occurring at an early stage. In addition, health service administrators are faced with the onus of ensuring an adequate supply of the necessary medications, antivirals and vaccines as well as facilities for the care of the sick and for containment of the spread of infection. Given the problems posed by open borders, mass tourism, population migration and modern travel means, early identification of cases is essential for the necessary wheels to be set in motion, making the role of disease surveillance units a crucial one. These however depend on proper reporting by individuals in the field.

Historically influenza epidemics have come and gone as can be clearly seen in Dr Savona Ventura's historical perspective on influenza in the Maltese islands. A national disaster plan which ensures the maintenance of essential services and aid to the whole population whilst maintaining order in what can potentially become a country under siege remains crucial given that this time round we may not be so fortunate as on one or two occasions in the past.

Josanne Vassallo
Editor

Errata Corregite

The telephone numbers featured in the article Domestic Violence by Mark Rosso are as follow:
Domestic Violence Unit: 2295 9000
Men's Services: 2259 000