

Convention on Health Analysis and Management

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To build a fair Health System: the vision of Industrials

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1. Equality or fairness?

One of the three values of the French Republic, equality, raises questions regarding the health system. In France, certain schools of thought believe that it is necessary to do the same for everyone. Inequalities are part of nature, but fairness makes it possible to offset this reality.

2. Fairness, a question of wealth

Just thinking about fairness is a luxury, in that certain societies do not have the opportunity. And others simply do not have a health system.

3. Regional fairness comes from national wealth

Through their wealth, certain countries have sought to create a national network, but without necessarily having the necessary resources to equip all hospitals with the highest level of technology. This wealth therefore generated certain regional injustice.

4. Equality through information – importance of the Internet

The Internet also constitutes a major vector for information. The majority of the French population can now search for information from other patients. Internet-users share experiences and make comparisons between professionals, hospitals and regions. This layman's knowledge develops and coexists alongside the expert knowledge of the medical community. For certain patients, doctors are now just one vector for information among others.



5. from fixed-rate tariffs to telemedicine via payment for performance

To better support patients suffering from chronic pathologies, for example diabetes, fixed-rate invoicing could be implemented, with a view to promoting long-term monitoring for the poorest patients.

Remote monitoring, i.e. telemedicine and tele-monitoring, could be enhanced, using new technologies.

In some countries, trials have been carried out to pay for health products based on performance. To do so, patients must comply with a monitoring protocol. If they stop, patients lose their entitlement to reimbursement.

6. The need for sweeping reforms

Developments in technology and medicines are leading to an increase in expenditure of between 6% and 7%. However, at the same time, public authorities are setting objectives to stabilise health expenditure. These two dimensions are therefore contradictory. In countries in economic crisis, which have fallen into debt, Governments are seeking to make savings and reduce the cost medicines. This direction is clearly inadequate, even incoherent, since it is necessary to launch sweeping reforms of hospital establishments and Social Security funding mechanisms. Hospitals must be made more efficient by pooling technical resources.

7. The role of manufacturers and pharmacists

Manufacturers can play an important role, in particular through the development of the role of generic drugs, in order to optimise health expenditure. Instead of being purely therapists, they could also get more involved in informing and educating patients, in order to push forward a far-reaching prevention programme.

Manufacturers could bring together patients and their representatives to roll our clinical trials. To better serve patients, manufacturers must listen. They must also think on a European level, as patients find it hard to understand why a treatment is available in neighbouring countries but not their own.

France has the lowest rate of self-medication in Europe. Pharmacists could play an advisory role, helping patients self-medicate sensibly and responsibly.

8. Patient education for the young and the elderly

Health system equality firstly requires education for the young and the elderly. The former must avoid behaviour likely to encourage the appearance of pathologies, while the latter must take care to avoid overmedication. Here too, manufacturers could play an informative and preventative role.