

Inappropriate practice in medicare

Medical services for the Chinese people have been improving dramatically with the rapid development of national economy. Inappropriate practice in medicare, which is particularly evident because of existing discrepancy in rural and urban economy and ideas, however, causes a vast waste of medical resources.

In the people who enjoy adequate medical insurance but have less medical knowledge, there have been an over-intervention of their health problems. We can witness the scene that a baby with a mild cold is accompanied with the whole family to seek additional infusion and antibiotics at hospital. It's known that viral cold has an idiographic course and there is no effective antiviral therapy, antibiotics abuse is just a waste of money. Once I met an old lady who was eager to have a surgery for gallbladder stones. Clinical examination showed that she had a severe heart disease but mild gallbladder stones without symptoms. I advised her to take medication in consideration of the high risk of surgery, but she was full of worries about the carcinogenesis of the gallbladder and insisted on resection of stones. This is a typical example of over-interference to the disease.

In fact, physicians are also responsible for inappropriate medical over-interference. Lack of updated knowledge or professional training, self-disciplines and ethical restrictions may inevitably lead to inappropriate treatment. The abuse of antibiotics, a serious problem in clinical practice, induces bacterial tolerance to normal treatments. Inappropriate practice may break the body balance, and interfere with the system of compensation and modulation. Over-intervention occurs in daily practice. Regimens which proved to be of no value by evidence-based medicine are still used in some institutions or even expensive regimens are selected because of economic purposes. How to prevent this

kind of practice is of paramount importance in lowering medical fee and protecting people's health.

What shall we do now?

First, we should try our best to perfect the medical insurance system to realize the objective of so-called "low fee but wide coverage". Thus we can make proper use of limited medical resources in some rural areas.

Second, we should make people learn more medical knowledge by means of newspaper, magazine and TV or other media, and foster the correct attitude toward health and healthy life-style including the awareness of the harm of medical overaction.

Third, doctors should improve their medical service constantly. Incorrect regimens should be replaced by evidence-based medical practice. They should follow the updated principles of clinical therapy and the strict indications and contraindications of a given method. Unnecessary medical intervention should be avoided.

Finally, the medical system should be reformed to change the model of "hospital supported with drugs". Medical fee and prescription of drugs should be controlled by proper monitoring and avoidance of interference from non-medical properties.

Only with the effort of the government, the hospital and the people, can we effectively control inappropriate practice in medicare. With the successful reform of medical system and increase of medical knowledge of the people, we believe that inappropriate practice in medicare may be lessened to the least.

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