

# No quality health cover in Punjab

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LAHORE: Although the Punjab government boasts of introducing a number of reforms in health sector during the year 2003, yet it miserably failed to provide affordable and quality health cover in urban and rural areas alike during the period under review.

The establishment of University of Health Sciences (UHS), Lahore, and subsequent compulsory affiliation of all public and private sector medical institutions also triggered a constant unrest among the students, studying in medical institutions across the province, who were compelled to spend their precious time in holding protests on roads and filing suits in courts against their de-affiliation with the Punjab University during 2003.

Punjab Health Minister Dr Tahir Ali Javed, while presenting a one-year performance of the Health Department under his leadership in a press conference recently, kept on counting the 'achievements' without any hint of knowledge about the actual on-ground situation in the province.

The 'achievements' need not be repeated time and again because minister's several statements on each subject, published in newspapers during the last one year or so, more or less formed content of his press conference. There is visible helplessness on the faces of poor patients, who run from pillar to post to get the diagnostic and treatment facilities in autonomous hospitals, DHQs/THQs, BHUs, RHCs or elsewhere in 34 districts in the province.

The patients and their attendants are in miserable condition even in autonomous hospitals in the provincial capital, having a number of complaints about the attitude of doctors, paramedics as well as non-availability of

dants into patients rather than help patients to recover. Medical students fear ruining their careers in view of 'unrecognised status' of UHS at the international level.

The students were particularly annoyed over government's decision to give exemption to King Edward Medical College, Lahore and Fatima Jinnah Medical College, Lahore from compulsory affiliation with the UHS, which tantamount to sheer discrimination.

The unrest among medical students came to an end after Supreme Court and Lahore High Court had given verdict in favour of the UHS declaring it a validly established university.

The UHS was assigned the task of enhancing the standard of medical education, promote research in health sciences and produce handsome number of PhDs in medical sciences every year. The UHS, Lahore conducted its maiden examination of MBBS third professional of the students of Nishtar Medical College, Multan on August 16, 2003, and declared the results within four days of finishing of examination.

However, the UHS administration was, later, accused of tempering with the results by revising various MBBS and BDS examination results. However, the UHS authorities vehemently denied the allegations and asserted to have established absolutely transparent and foolproof examination system.

Meanwhile, the UHS administration was also criticised for devising harsh affiliation rules for self-financing public sector and private sector medical institutions envisaging strict conditions coupled with exorbitant affiliation fees for the medical institutions.

The UHS administration is yet to grant affiliation to other private medical institutions after granting affiliation status to Fatima Memorial Hospital/College of Medicine

institutions inflicted huge financial blows upon the students after offering admissions against merit policy. The Lahore Medical and Dental College (LMDC), Lahore did not get extension in provisional recognition from the Pakistan Medical and Dental Council (PMDC), besides admitting students with less than 65 per cent marks in FSc pre-medical, or with simple FA and Matriculation qualifications after collecting huge fees from them.

The management of Islamabad Medical and Dental College (IMDC), Islamabad, reportedly, did not fulfill requirements to acquire affiliation with the UHS. The medical students, in both cases, are at the receiving end, who suffered huge blows both financially and academically.

On the other hand, the fruits of reform initiatives, introduced by Punjab Health Department, may take years to reach masses even if these are implemented with sincerity through honest and judicious use of funds, which seems quite unlikely in view of rampant corruption at every level in health delivery system.

Hundreds of pending inquiries of financial and administrative irregularities by the corrupt officials of Health Department await attention for many years, what to speak of their quick disposal, recovery of misappropriation and appropriate action against the culprits. The threat of incurable diseases like Hepatitis (especially B & C), HIV/AIDS and SARS posed a big challenge to the provincial health authorities, in addition to controlling other diseases like malaria, polio, increasing cases of blindness etc, to mitigate the sufferings of ailing humanity in the province.

Health Department faced a challenge of acquiring vaccinations as well as execution of its regular immunisation drives

Meanwhile, Dr Tahir Ali Javed was in soup after he was allegedly found involved in spreading fatal diseases through reuse of syringes during his stay in the US. As the issue was much propagated back in Pakistan, the minister blamed 'drugs mafia', operating in Lahore, for trying to malign his reputation after he led a campaign against sale of spurious and substandard drugs in retail and wholesale markets in the city.

The Health Department could not live up to its promise of continuing its campaign to eliminate sale of fake medicines in the market after its maiden raid caused much hue and cry by the drugs dealers. One can easily guess the performance of Drug Testing Laboratories and drug inspectors, when expensive and substandard medicines are being sold unchecked at virtually every medical store in the city.

The imposition of users' charge in the hospitals kept the poor patients in quandary, who felt treatment equally expensive in public sector hospitals as in private hospitals.

The purpose of imposition of users' charge could not be served, as it only filled the pockets of the doctors and professors in these hospitals. The Health Department could not eliminate the scourge of quackery, as the masses, lacking awareness, continued to 'purchase' diseases against heavy financial costs.

The Health Department also failed to manage/dispose of hospital waste particularly syringes, which were feared to be recycled and reused without proper sterilisation in public sector hospitals and private clinics.

Moreover, no serious effort was made to curb the practice of reuse of waste in hospitals, as the Health Department harped on the tune of installing incinerator in Children's Hospi-

mentary secretary on health, Dr Farzana Nazir also failed to come up to expectations because she simply could not defend government's performance in health sector in the absence of Health Minister Dr Tahir Ali Javed, what to speak of giving answers to questions posed by MPs in Punjab Assembly.

Besides, the performance of Dr Javed Asghar, adviser to chief minister on new health initiatives was zero. He may have shown better results by executing his ambitious plans in health sector, had he not owned a controversial medical institution.

Meanwhile, the Pakistan Medical Association (PMA), Lahore adopted a critical stance about the policies of provincial government, as it started a campaign against the imposition of users' charge in public sector hospitals, and voiced a scathing tirade against the establishment of UHS, Lahore, compulsory affiliation of medical institutions, and then revision of some of MBBS/BDS results - all contributing to enhance mental trauma for the medical students.

The management of DHQ/THQ hospitals, BHUs and RHCs have been devolved to district governments. The EDOs of the Health Department have been declared as Category-1 officer and the district governments are empowered to approve development schemes up to Rs 20 million.

The purchase of medicines and equipment and recruitment of essential staff including specialists, general duty doctors, nurses and paramedics has been decentralised. As the availability of inexpensive diagnostic and treatment facilities remained a distant dream during the year 2003, it calls for applying chief minister's idea of inducting more ministers after devolving Health Department in divisions in line with the divisions of Education De-