



European Confederation of Primary Care Paediatricians
Confédération Européenne de Pédiatrie Ambulatoire - CEPA



European Academy of Paediatrics
U.E.M.S. - Section of Paediatrics - European Union of Medical Specialists



---- Strategic Paediatric Alliance for the Future Health of Children in Europe ----

31 January 2012

Prof. Renato Balduzzi
Italian Ministry of Health
Via Lungotevere Ripa
Roma, Italy

Dear Prof. Balduzzi

We, the representatives of the European "Strategic Paediatric Alliance", are writing on behalf of the alarming news that has reached us from Italy concerning the potential change of the health professional who will be taking care of children from 7 years until adolescence. From our understanding this has been dictated by an excuse of there not being enough paediatricians to take care of all the children. This seems as a very unconvincing argument that can be surely resolved by either increasing the necessary number of paediatricians, reorganizing the exuberant number of hospital paediatric departments or leaving things as they are so that at least the majority of children can benefit from the best possible health supervision they deserve.

However, considering the financial problem that Italy is currently undergoing, this maneuver could also represent a move to save money on the assumption that a General Practitioner (GP) based system is less expensive than a Paediatrician based system. If this latter case should be the reason, than Italian Governmental officials are making grave errors on both sides: 1) Not allowing the best possible care to be offered to their future citizens, and 2) Falsely believing that children seen by a GP will make them save money.

We would like to emphasize both of these points individually.

1) Children deserve the best possible care that can be afforded to them.

The importance of children and the doctors who should be taking care of them are too frequently underestimated by governments, hopefully this is only because they lack a clear understanding that children are not just "small adults" and need a particularly trained physician to assure that they grow and develop into sound, productive citizens.

From birth until adulthood a child is in constant change. These changes are characterized by differences in physical, mental and emotional growth and development as well as the illnesses they develop. Some diseases are specific to childhood, but children can also manifest illnesses differently: in signs and symptoms, in the rapidity of decline and recovery, and in behavioral responses.

Paediatricians must protect their children! At no other time in history, is it becoming so important for paediatricians to truly be the advocates of children. Only the paediatrician knows the complexities of the different phases of a growing and developing individual from birth, through infancy, through puberty and finally in the phases of reaching adulthood where the individual, much too frequently, undergoes a stressful confrontation within himself between having a body of an adult but a mind of a child which is slowly adapting to accept what is happening to his/her body. The recognition that "Paediatrics" is truly a variety of independent "internal medicines" for children, based on age, is well recognized in those countries where the age limit for paediatrician-related care is 18 years (usually the completion of all aspects of puberty and adolescence), not to mention the United States where paediatrics is defined till the age of 21 for males and 20 for females,

Only the paediatrician knows the complexities of the different phases of a growing child and adolescent and families realize the importance of having a physician whose professional training was completely devoted to understand, as much as possible, on how to give to his patient all the best possible chances of developing into a productive component of his adult society

Governmental officials should be reminded that what happens to children during their phases of development from an infant to an adolescent is of critical importance not only to their immediate well-being, but also to their future. The care and attention a child receives during these formative years are critical and influence the child for life. Children who are well nurtured and cared for are more likely to survive, to grow in an appropriate manner, to have fewer illnesses and most importantly to develop appropriate thinking, language, emotional and social skills. Therefore, every child must be assured the best possible attention, not only does their future depend on it but also the future of their communities, nations and the world. All parents should be taught, by appropriately trained care givers, to know and recognize the warning signs that indicate when a child's growth and development are faltering and what measures can be taken to avoid them. There should be no doubt in the well documented findings which substantiate the fact that prevention is more cost-effective than treating a problem later. A pediatrician has specifically been trained to do this very thing, not just treat a common cold or cure a pneumonia!

- 2) False belief that it is less expensive for Governments to have a system where GP's take care of children rather than Pediatricians.

Unfortunately, many countries are either autonomously considering the change-over to a GP system or, as it is occurring in some countries, there is evidence that they are being coerced to change over in lieu of financial support. This is probably occurring on the presumed premise that it costs less to maintain a GP system than a Pediatrician-based system. In response to this assumption, there is increasingly accumulating data that show that for governments it is much more economical, when all variables are considered, to have pediatricians take care of children than having GP's take care of them, as one would logically expect.

A recent study conducted in the Italian region of Molise over a 3 year period (2007-2009), compared all of the costs involved in caring for children from 6 to 16 years (divided into two groups: 6-11 years and 11-16 years) between Pediatricians and GP's. The study showed that over the three year period, based on the incurred costs to take care of the children under the GP and under the Pediatrician, if all of the children, in a region where the 6-16 year child population is approximately 35,000, were taken care of by a pediatrician, the Regional government would have saved € 6.5 million. Such results are understandable when one considers that a physician who has not been trained in pediatrics is less confident of his "medical thinking" and "decision making" and in order to be safe, more easily prescribes studies, medicines and refers for hospital admissions. Therefore, even if at first glance it would look as if the GP would cost less to care for a child, in the long run the expenses incurred by governments (financial) as well as by families and child (emotional and financial) are overwhelmingly unacceptable.

The same study looked at "patient satisfaction" through a questionnaire given to those families whose children were or had been under the care of both a pediatrician and a GP. The families were asked to compare the performance of the physicians in a series of situations related to the child's care and well being. From the 310 questionnaires that have thus far been analyzed, the average score of 18 different items evaluated was 89% (\pm 13% standard deviation) for Pediatrician-related care and 56% (\pm 21% standard deviation) for GP-related care. Although these are preliminary results, there is no doubt that families (the voting population with children) overwhelmingly prefer pediatrician related care for their children. Parents want the best for their children; Governments cannot deny this basic fundamental need.

The belief that children may be looked after by General Practitioners is usually exemplified by the UK System where the General practitioner is the gatekeeper for all pediatric problems. This does not mean that European governments should follow this example! Two articles which span a period of approximately 20 years, the first written by General practitioners and the second by Pediatricians, come to basically the same conclusions. The article published by Marsh G.N, *et al.* that appeared in the *Journal of the Royal College of General Practitioners* (1989;39:138) entitled "Is Paediatrics Safe in General Practitioners' Hands" comes to the conclusion that "General practitioners are not well trained to provide paediatric care". Analogously, a recent article entitled "Improving child health services in the UK: insights from Europe and their implications for the NHS reforms" by Ingrid Wolfe *et al.*, (BMJ 2011;342:d1277) comes to the conclusion that Pediatric "health services in the UK too often provide

poor outcomes and are seemingly planned around the needs of organizations rather than those of children, young people and families”.

Governments have the obligation to fulfill their commitments to children (their future citizens), as well as to their parents, guardians and educators. Pediatricians, as advocates for children, must hold governments accountable to the Convention on the Rights of a Child. When governments, civil societies and the international community work toward a common goal, i.e. the protection of children, great accomplishments can be achieved. We hope that this can be reached in your Country on behalf of your children.

We, as a European delegation for the Future health of children in Europe can offer all the help which your government may deem necessary to make a wise decision which hopefully will adequately balance the children's needs and economical issues on one side, against political issues, professional pressures and geographical constraints on the other side.

We apologize for the lengthy presentation which was necessary to clarify as best we could the necessary information you may require to tackle this important and possibly very negative standard setting decision for European children which your government will shortly take.

We leave you with one important thought: “A child IS NOT a small adult” this is why the field of “Pediatrics” was officially created some 200 years ago!

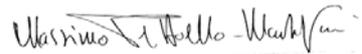
Sincerely yours,



Elke Jaeger-Roman
President (ECPCP)



Alfred Tenore
President, (EAP)



Massimo Pettoello-Mantovani
Secretary General, (EPA)