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## **A balance and a perspective of Italian healthcare public system by Minister Beatrice Lorenzin**

**What are main features who affected Italian healthcare from year 2000 till now? Why there is a huge gap in health services within Italian regions? Did the international financial crisis penalized budget destined to healthcare? What is next challenge at the horizon that public sector healthcare should afford? All leading question submitted to the Italian Minister of Health, Beatrice Lorenzin, to Gilberto Turati, professor of Economics at the Sacro Cuore University in Torino, and to Giuseppe Remuzzi, eminent nephrologist at the University of Milano other than coordinator at the Mario Negri Institute in Bergamo. Moderating the debate, Pierangelo Giovanetti, editor in chief of the local newspaper “L’Adige”.**

“Starting from year 2000 – explains Minister **Beatrice Lorenzin** - in Italy occurred at least four events: the so-called devolution, that is the transfer of some competencies from the central level to the local one, and healthcare was of course the most important of them; the failure of several Regions, almost of the country, in managing healthcare and the following substitutive administration by central government commissioner; the unexpected international financial crisis that costed to the public healthcare system some 25 billion euro; finally, the upcoming challenge of new pharma, effective in the therapy of chronic pathologies, but extremely expensive to be unsustainable for public sector budget”. Anyway the age of horizontal cut has finished, ensures Minister Lorenzin, new parameter in Essential Level of Assistance (LEA) has been fixed, and a new “Health Agreement” is ready to be released. Yet, reorganisation of public health services is still a priority. “Many times we experienced difference of treatment not only between two regions – points out Minister Lorenzin - but also between two structures of the same local agency. That is the reason why we should turn from management of macro organisation to control over single process”.

**Gilberto Turati**, from an economic point of view at the question if public healthcare is still sustainable replies frankly: “It is just a matter of political choice!”. In his opinion health could be a good business, subsidies can work, but the dilemma “better central or local government in healthcare” it is a false problem.

**Giuseppe Remuzzi** provided instead the outlook of a MD. “Even after the so called Obamacare the US spends a lot of money with very poor results – says Remuzzi – so many times it is not a matter of reducing costs but the ethics of avoiding waste of money; a very simple expedient is to hire good MDs, through their work they can save money”.

At the end of the meeting, Minister Lorenzin spent few words on the vaccination campaign too, because of criticism for her commitment in mandatory vaccination for children, since a couple of diseases eradicated in the past are now coming worryingly back.

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