Kosovo to shift emphasis to a primary care system

Hilary Bower Pristina

The United Nations Mission in Kosovo laid out an ambitious blueprint for rebuilding and modernising health services in Kosovo this week, to address not only the recent destruction of the war but 10 years of political turmoil and neglect.

According to Dr Hannu Vuori, the mission's commissioner for health and social services, the interim health policy guidelines and six month action plan launched on Monday provide a framework for the emergency relief effort, to guide the 300 or so international agencies and non-governmental organisations that have descended on the province.

But, crucially, it should also help Kosovo's health professionals to take advantage of the opportunities for long term development that exist as a result of the influx of aid money. "The goal is to create a system that offers the highest possible standards of health and health care. But it has to be one that can be sustained by the future government of Kosovo," said Dr Vuori, who is seconded to the UN from the World Health Organisation.

The guidelines draw on Health 21– Health for All in the 21st Century, the framework adopted by all WHO European member states in 1998. They were developed after extensive consultation involving local professionals, institutions, UN agencies, and others.

Key priorities are to reorient what was a traditional eastern European, hospital driven system to one focused on family medicine and preventive care.

Specific targets highlight areas that currently fall well below European standards, including antenatal care (Kosovo is estimated to have the highest infant mortality in Europe—some 90% of premature infants die), children's care, and mental health care. Professor Mazllum Belegu, dean of Pristina University Medical School and one of the policy working group, said that improving primary care will have the greatest impact on Kosovars' health.

"In the past many primary care doctors have just been administrators for the hospitals. Making these changes will mean these doctors—who will become part of a new specialty in family medicine—will be directly involved with patients. Patients will get better, speedier care, and it will make it easier for those in secondary care to do their job."

But there is much work to be done to translate the policy into reality. Most healthcare facilities have been burnt and looted, and most of those that are functioning lack water and electricity. Hospitals are dogged by broken windows, stolen equipment, and overflowing clinical waste. The challenge, said Dr Dean Shuey, the WHO's health policy adviser, is to direct emergency aid in such a way that it contributes to the long term development of an improved and affordable system.

Equally challenging is the human resources situation.

There are two particular problems. Firstly, there has been an almost complete changeover of staff since the end of the NATO bombardment, with many Kosovar Albanians replacing Serbs in the medical services.

Secondly, many of these Kosovar Albanians have spent the past 10 years working in an unofficial system, "parallel" to the regular medical services. This system developed when political pressures in 1991 forced many Albanian doctors from their jobs. It has been run mainly from private homes. Others were trained in this parallel system and have no official qualifications.

However, the WHO's human resources adviser, Dr Eric Goon, said that these unusual circumstances may, in fact, help to encourage young health professionals to take up the new specialty of family medicine, and Pristina Medical School and various international agencies are now developing catch-up curricula that will lead to formal certification.

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Eight die in outbreak of virus spread from birds

Fred Charatan Florida

An outbreak of disease in New York City in August, which was originally diagnosed as St Louis encephalitis, has turned out to be West Nile-like virus, a virus never before found in the United States. Previous outbreaks have occurred in Uganda, Israel, Romania and south Africa.

The health commissioner for New York state, Dr Antonia Novello, reported last week that 48 laboratory positive cases of West Nile-like virus had been identified. A total of eight people have died during the outbreak, all of whom experienced symptoms of clinical encephalitis.

The correct identification of the disorder is being attributed, in part, to conscientious detective work by Dr Tracey McNamara, a Bronx Zoo pathologist, who became concerned at the large number of crows dying around the zoo during the summer. Then, early in September, the zoo lost several exotic birds.

Postmortem examinations in these birds showed varying degrees of meningoencephalitis and severe myocarditis. Tissue samples were sent to laboratories for further study.

Testing at the federal Centers for Disease Control and Prevention (CDC) indicated that the samples contained material closely related to West Nile virus. In other tests at the CDC, a West Nile-like virus genomic sequence identical with that derived from the bird isolates was observed in a human brain specimen from an encephalitis case.

Concurrently, specimens of brain tissue from three human encephalitis cases, sent to the Emerging Disease Laboratory, at the University of California at Irvine, were reported as positive for West Nile-like virus by genomic analysis.

The West Nile virus is transmitted to humans from mosquitoes that have bitten infected birds. At the beginning of September New York City began aerial and ground spraying of pesticides to reduce the mosquito population.

Surveillance for new, human West Nile virus cases will be conducted until several weeks after the first frost, when mosquito activity is expected to subside.

Dr Duane Gubler, the director of the division of vector borne infectious disease at the CDC, said, "These viruses do travel with birds, and bird migration has been in process now for a better part of the month. There is a good possibility that this virus has already been taken to areas further south." \Box

A report on West Nile-like viral encephalitis can be found in the CDC's Morbidity and Mortality Weekly Report of 1 October (at www.cdc.gov).



New York City Health Department official applies larvicide to a swimming pool to kill disease-carrying mosquitoes