Hippokrates Exchange Programme

Dates of Exchange:
From: 14/05/2012
To: 26/05/2012

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Difference is the value underneath any useful exchange. In Switzerland the major difference that attracted me, was a health system based on private insurances. As the Portuguese health system is under heavy debate and facing great financial challenges, I intended to discover how could be family practice in a system with a different paradigm.

During first two days my Host was absent but Dr. Kotsilianos was available to introduce me to all staff and I followed him during these days. Dr. Kotsialinos is a dermatologist working in primary care. The presence of a dermatologist in a family practice, working beside family doctors was my first big surprise.

The second big surprise was the existence of Medical Practice Assistance (MPA) a job position which as completely unknown to me. The MPAs have a fundamental role in a primary care practice for them multi-task capabilities. They are able to do bureaucracy functions, laboratorial procedures, x-ray images, ecg, blood samples, IV punctions and others.

In the second day I dedicated some time behind the main reception. The objective was to see how the MPAs manage the patient from the time he enters in the practice until the time he leaves. In the afternoon, I finally met Dr. Malm, we had a briefing about the practice and the health system. In the practice works three more doctors besides Dr. Malm, who is also the owner of the practice. The practice have is own laboratory and x-ray equipment, which eliminate delays to get this exams. A 24 hours emergency service is also provided, whether as consultations or dispatches. The
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team has two specialized and well equipped vehicles for emergency service and home visit service.

As the third day coincides to be a holiday, there wasn´t consultations scheduled however as the practice have a 24 hour emergency service, I agreed to be available on-call in case of any interesting situation. This day was the opportunity the discovery the nearest city, Bremgarten.

The rest of the week was spent with Dr. Malm in consultation. Dr. Malm makes great emphasis in child's care, he used to say that none child could leave the office while crying. This objective was achieved by the quality of the interaction. All children receive a toy as a gift and there were also diplomas of good behavior. The procedures were previously depicted in toys and they were incentivized too look through the otoscope, which is probably the instrument mostly feared. After the vaccination there was always some play so that last memory from the office was kept as a good time.

On Sunday I went to Zurich where Franziska Morger, the Switzerland Coordinator of Hippokrates Program, was expecting me. Franziska was very helpful, completely accessible to answer all my questions about medical residency and the major difficulties that residents and young family doctors are facing.

Franziska invited me to be in a meeting of family practice residents and young family doctors, which took place on Tuesday of the second week. This meeting was an excellent opportunity to meet futures family doctors from Switzerland in a relaxed environment. The main topics that I explored were the path to become a family doctor in Switzerland and how attractive is that to medical students and residents.

During the second week the most time was spent with Dr. Malm in consultations although I also saw some dermatologic procedures and done a home visit. I got impressed by the way doctors could put their work together, sharing doubts and knowledge. Breaking the idea that family medicine is mainly a lonely activity happening inside the office.

For being a system based on private insurance the relation between doctors and patients have a complete different structure from that I´m used to know. As patients can freely choose their family doctor, the relation must be based in patients’ satisfaction otherwise he will flee to other doctor. Conflicts must be avoided, which is much easier
because the decision of what health assistance the patient has access isn’t in doctor hands, instead it is a call from insurance companies. Doctors can be focused on their clinical practice without be bored by these bureaucratic concerns. Other difference in this equation comes from patients having a bigger share on health expenses this radically changes their demands of complementary exams and medication.

The system allow to doctors practice medicine as a real liberal activity, since they have more autonomy and freedom to innovate, without having their clinical practice formatted by political demand. The good salaries makes possible for doctors be dedicated to just one practice without need to accumulate additional jobs, sometimes under conflict of interest as many Portuguese doctors do.

The way to become family doctor is very different between the two countries. As in many other things in Switzerland the way isn’t predefined. There is no common formation program to all those who want to became a family doctor. I think this situation isn’t benefic, because is very difficult to create a strong and united group of family doctors and there is a lack of specialized formation in consultation techniques and family evaluation. This group would be useful for scientifically and lobbying purposes.

In the end this exchange is totally a win. The only drawback is that Switzerland German language demands surpass my knowledge of German language even after taking language classes aiming specifically this exchange. This turned communication with patients more difficult.

I’m very grateful to Dr.Malm and all his team for their hospitality.