

HTTTG 2007-1

Recommendations for improved health care in the Mekong Delta, Vietnam

Health Stations

In order to improve the health care for the majority of Vietnamese who live outside the cities, the capability and functions of the Health Stations (HS) need to be increased.

The health care roles and responsibilities need to be clearly defined for the HS, such that cost savings are made by improved local medical services, reducing the referred patient load at higher levels, and reducing disruption of families when patients need to leave the village for treatment elsewhere.

This can be achieved by the provision of basic equipment; eg x-ray, ultrasound and blood analysis, so that the HS can provide a more complete service. With such facilities, telemedicine would further enhance the capabilities of the HS, with training coming down from higher medical levels and images coming up for expert opinion by radiologists.

Breast and cervical examination for early detection of cancer would also reduce costs and allow curative treatment at higher levels.

Vertical Integration of the Health Service

Telemedicine between all health service levels should be introduced, so as to empower each level, reducing costs and disruption of families.

In that most cancer patients are stage 4, palliative treatment is indicated. Provincial hospitals should have this capability to allow treatment to be regional, sparing patients and families from excessive disruption when family support is most important.

The current health structure is ideal for Vietnam. The Health Stations are the foundation stone of the system, and should receive higher priority for funding and equipment. Such actions would generate cost savings at higher levels, and would certainly facilitate access to health management for the majority of families.

B J Allen
Chair, HTTTG

23/7/07