Hungarian health care in transition; studies on the improvement of the effectiveness of health care in Hungary by implementing quality assurance
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Intermezzo

CASE STUDY: PATIENT WITH STOMACH-ACHE

When working as a general practitioner in the 80s, the author often covered for his fellow GPs. One day he saw a patient one day whose story with the Hungarian health care system provided many health care quality problems for further investigation.

The story is as follows:

It was an early spring day when the patient, a man in his mid sixties, realised some irregularities in his bowel motion, and some weeks later he had a permanent and painful constipation. As he did not like to complain and was rather shy, he was reluctant to see a doctor. He was suffering from constipation during the spring. At the beginning of summer he asked his neighbours to advise him what to do. He received some better pieces of advice on all occasions saying that he should take three different sorts of laxatives. But laxatives caused only painful cramps and stomach-ache.

After a few more weeks of waiting and hesitation he decided to see a doctor. He really did not like to go to see the doctor, because it meant waiting 2-3 hours. Patients would come and go, and there was never a good opportunity to have an intimate talk with the doctor. His general practitioner told him that elderly people often suffer from the same or similar symptoms, and suggested that he should eat plum, jam, dried prunes or some mineral waters. Upon examination, the physician found that not only did the patient have constipation but his blood pressure was unusually high, too, which made follow up visits necessary to evaluate this patient’s hypertension. The patient claimed that he was fine except for this constipation and wanted the doctor to prescribe some medicine for him. The physician explained that medicines were not necessary against constipation and went on stressing the need for follow-up because of the elevated blood pressure. The patient was scheduled for a return appointment, but he did not want to return, because he was frustrated by his inability to get the medicine for which he had come to his general practitioner. The general practitioner was frustrated by the patient’s refusal to continue treatment as the patient’s hypertension rendered him more liable to heart and kidney diseases. Furthermore the above mentioned discussion was interrupted by other patients, there were seventy five more patients outside in the waiting room. So, the patient went home, but everything was getting worse and worse, thus some weeks later he came to the surgery again to ask for some help. Shrugging his shoulders the general practitioner prescribed some medicines for him and the patient went home. This medicine was probably good for the first two weeks but in a few weeks his health status became worse than ever.
before. Some weeks later he went back again to the general practitioner and asked for a referral to the out-patient department for medical check up. The general practitioner did not see any need for referral to the out-patient department and prescribed oleum ricini for him. The GP was offended because his service did not seem to satisfy the patient, and what is more, the patient was impatient, always disturbed him and was in doubts concerning the GP’s knowledge. After the visit the patients went home without any help again. This particular medicine gave no relief.

Early October the patient travelled to the out-patient department of the hospital by train (50 kms return) to the nearest city. But medical check up was not possible without referral from the general practitioner. He expressed his willingness to pay extra fee under the counter, but the waiting room was full and he could do nothing. Back home one of his relatives recommended him a good private physician. The following day he went back to the city again to see this private physician. This physician made a very thorough examination, including neurological examination, took his temperature and blood pressure. He even gave injections immediately. The private physician prescribed some other injections such as Vitamin B1, Vitamin B6, Vitamin B12, and Nerobolil as well. He got 55 injections as a cure every other day for two weeks. The patients had to be back to the private physician to the city by train to receive injections every other day. As the train service was rather bad, he had to wait a lot in the private physicians waiting room. Each visit took him 6-7 hours altogether. He found it very expensive. So he travelled every second day from the village to the city. During the cure, in the beginning of December his stomach-ache and constipation were getting worse rapidly, so he discontinued the injection regimen and went back to his own general practitioner again.

The general practitioner did not examine him, but gave him the necessary referral to go to the out-patient-department of the hospital. He went to the out-patient department again, in the laboratory an assistant drew blood from him for a test and a lot of examinations were done. It took four days to receive the results, then it was suggested to him to have a rectoscopy made. He went back to the outpatient department, to the surgery and was waiting more than half a day when he was told to come back in a week. Before coming back he had to take oleum ricini. He did it as ordered but oleum ricini caused painful cramps, nothing else. So one week later the patient was sent back home again with the same advice, i.e. to take more oleum ricini. Unfortunately when the patient arrived at the surgery for his appointment to have an examination, the equipment was out of work. When he went back for the fourth time, it was already before Christmas and the specialist was not there. This was a very unpleasant Christmas because of the sharp stomach-ache. After Christmas he went back without the necessary preparation. Notwithstanding, the physician began to make rectoscopy. But the equipment was not perfectly in order, the examination and the patient were not prepared, there was no rectal irrigation. When the patient had been kneeling for twenty five minutes on the examination table, he decided to refuse this kind of examination in the future. In the end the examination did not succeed. The patient was told to go back to the out-patient department in the following day to have some special X-ray. However, this special X-ray was available only for patients with advance appointment, as for this examination, the X-ray department had to be prepared
before, special material were necessary and so on. Thus the patient was not on the appointment list. It is needless to say that the examination did not take place.

Just outside of the waiting room, another private physician was recommended by another patient to the exhausted, disappointed man. The visit to the private physicians was very expensive but all in vain, because the private physician said the patient should have gone to hospital. However the private physician could not refer him to the hospital because he was not permitted to refer patients to hospital. The patient went home and did nothing for two weeks. He was completely exhausted and hopeless.

His health status was getting rapidly worse and worse, his stomach-ache was very painful, the constipation became intolerable. He went back to the GPs surgery for a referral to the hospital, but the GP said that he could refer him to the out-patient department only and not directly to the hospital. The patient, because of his very bad experience in the out-patient department and after some days thinking and contemplating went straight to the hospital without referral. He found a physician and gave him under the counter payment and informed him about his symptoms and complaints. The physician suggested a rectoscopy examination what the patient refused. The physician was not willing to deal with him without rectoscopy, so the patient went home. At this time a herbalist was lived in the same village where the patients lived. He visited her and was given some special tea for his pain and constipation. This tea made him better for some weeks.

He thought he could recover but he lost about ten kilos during these weeks, he became very weak, and had no appetite at all. He felt very ill. He was thinking what to do but he did nothing.

A bit later a relative of him suggested to go to the capital to see a famous professor. He asked an appointment by letter from him. Some days later he received a letter with an appointment, some days later he went to the capital to see the professor. After the examination the professor put him on the waiting list and the patient returned home. Some days later he received the referral, went to the capital and was admitted to the hospital. Every examination was ready in three days, and on the fifth day he was operated on.

When I talked to him he felt a little bit better, but he lost another fifteen kilos again and he was very weak. The professor told him that it was too late to operate his neoplasms.

From the first complaint till the operation more than nineteen months had passed.