Disparity in pediatric neurosurgery provision of care: an illustration

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The worldwide disparity in the provision of surgical care in general [1], and neurosurgery in particular, is an accepted reality that has been well researched and documented in a recent series of papers by Dewan, et al. in *Neurosurgical Focus* and the *Journal of Neurosurgery* [2, 3].

As the authors clearly describe: “Wide disparity in the access to pediatric neurosurgical care exists globally. In low and lower-middle-income countries, wherein there exists the greatest burden of pediatric neurosurgical disease, there is a grossly insufficient presence of capable providers and equipped facilities.”

This phenomenon occurs mostly in Africa and South-East Asia. Other regions also suffer from lack of sufficient and/or effective neurosurgical care.

As poor as the situation is for general neurosurgical care, this inequality is even more stark within our subspecialty of Pediatric Neurosurgery, since the affected regions all have very high birth rates [4] (Fig. 1 and Cover).

In these lower-income countries, even the presence of qualified medical practitioners may not be enough to provide adequate care for the population, since the cost of care is a major consideration. For example, in India, the socialized health care system is not yet able to cover the cost of all the treatments that a child may require.

Several noble doctors practice an extended holistic approach, where the treatment options are modified as necessary, according to the financial limitations of the patient or family.

Another model presented, promoted, and practiced by Dr. Devi Shetty and his team (Narayana health, Bangalore, India) is an attempt to dissociate health care from affluence and make it affordable for all.

What would cost \$20,000 in the USA is performed at one-tenth of the cost in his hospital, without any compromise in quality [5]. The business world considers his approach the *Walmart* approach to health care [6]. His model has also been discussed at the Harvard Business School as a means of improving the economics of health care in the USA as well [7].

Dr. Shetty believes that this successful model of health care will in the near future revolutionize medical care all over the world, making patient care more accessible and affordable for everyone. His methodology may provide a solution to reducing the disparity in provision of care in neurosurgery, especially Pediatric Neurosurgery.

Medical tourism (MT) is another possible approach to reducing the disparity in care. Social security deficits and lack of facilities in the public health system in a home country could be offset by medical tourism to a supplier country, which provides quality care at more affordable prices. MT also helps to improve the overall quality of health care in the supplier country, for example, by means of increasing experience in rare diseases [8]. With MT, the supplier countries also gain experience structuring designated medical care packages for optimal management of each individual child and family, away from their home country [8]. Transfer of children for specialized surgical care must be streamlined, and should not come at the expense of efforts to develop health care systems in the home country.

Industries also play an important role. Mega companies, including those dealing with medical equipment and/or players in the pharmaceutical industry, often (perhaps not enough) fund educational activities, support medical congresses, sponsor fellowship stipends, and may provide pro-bono expensive medication to those who cannot afford it [9, 10]. Governments, as well as the medical community, should and must make sure that the enormously profitable industrial giants return some of their income to the community.

The cover illustration *visually* emphasizes both the problem and a possible solution, highlighting the potential role of the ISPN and other organizations, as well as industry, in trying to address and resolve the situation.

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GLOBAL PEDIATRIC NEUROSURGERY

World inequality in surgical care

Sigal

Fig. 1 and Cover The cover illustration visually emphasizes both the problem and a possible solution, highlighting the potential role of the ISPN and other organizations, as well as industry, in trying to address and resolve the situation

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Compliance with ethical standards

Conflict of interest The author declares that there is no conflict of interest.

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