

Rural Hospitals Combat Isolation

Starting just outside the town limits of Oskaloosa, central Iowa's corn and soybean fields roll right on to the horizon, broken only by scattered farmhouses and a thin ribbon of road. Oskaloosa is home to the county's only hospital, drawing patients from as far as 50 miles away.

Two groups of conference participants visited Mahaska County Hospital in Oskaloosa and the Grinnell Regional Medical Center, another rural hospital, to gain a better understanding of how health care practitioners can serve far-flung populations.

For instance, both hospitals have neurologists, cardiologists and oncologists who visit once or twice a week from larger facilities in urban areas. They also share with other hospitals mobile medical units equipped with MRIs and ultrasound machines.

Because of the remoteness of some of the population, both hospitals have outfitted vans as mini-clinics that travel to the patients, from farmers to the elderly.

"Farmers are often the most difficult patients to take care of. They often seem to care more about their livestock than their own health," said Todd Linden, president and CEO of Grinnell Regional Medical Center.

Mahaska County Hospital's outreach to farmers includes testing for pesticide exposure through analysis of cholinesterase, an enzyme important to the functioning of the nervous system that can be inhibited by contact with pesticides. Blood samples are taken in the winter and in the spring after planting to measure the difference in cholinesterase levels. Depending on the amount of decrease in the enzyme, farmers may be instructed on better use of pesticides to avoid poisoning or told not to come in contact with any pesticides until their levels increase.

Grinnell Regional takes a small X-ray machine to 27 area nursing homes, a cost-effective practice that saves expensive, lengthy ambulance rides for patients, Linden said. Mahaska County Hospital offers flu shots and public health screenings at a variety of community locations.

Another problem faced by rural hospitals is the system of reimbursement that allots more money to urban facilities because their operating costs--from the price of land to salaries--are generally higher. But this practice is unfair, Linden said, arguing that rural institutions are chronically under-reimbursed.

In addition, attracting physicians to remote locations can be difficult, said Kathy Szazy, Grinnell's assistant administrator. But that has been changing recently as some doctors move away from cities in search of crime-free streets, easy commutes and a low cost of living, she said.

Doctors in the NIS say they are facing some of the same challenges as their rural counterparts in America.

In the Republic of Georgia, for instance, where 48 percent of the population lives in rural areas, providing modern equipment and adequate personnel is difficult, said Archil Kobaladze, special adviser to the minister of health.

People living in the high Caucasus Mountains that form the nation's northern border are cut off during winter. Telemedicine would be an effective way to connect patients to physicians, but is

too expensive to implement in the short run, he said. Kobaladze also said he'd like to adopt Iowa's idea of a truck carrying equipment to share among hospitals.

In Ukraine, health problems are exacerbated by the fact that less than 20 percent of the rural population has running water or sewer systems, according to the World Health Organization.

"I worry about the accessibility and quality of care in more remote areas. I am also concerned about the ability of these patients, who often have low salaries, to pay," said Miroslava Struk, MD, partnership coordinator for the L'viv, Ukraine-Detroit, Michigan partnership.

And small towns in Stavropol Krai in Russia also experience their own challenges. Robert J. Richard, RN, CEO of Peoples Memorial Hospital of Buchanan County in Iowa, has visited rural Stavropol Krai four times to provide assistance drawn from his work as a rural hospital administrator.

He helped EMS personnel reposition their ambulances so that they had fewer miles to travel to reach patients far from cities. Richard said that although physicians are concentrated in the larger cities of the krai, clinics staffed by feldshers, or physician assistants, are equipped to take care of a variety of health care needs.

"In these communities of 200 or 300 people, I saw a sincere desire to take care of people and make them better, no matter the resources at hand," he said. "It's that commitment to the patient, and not just to a paycheck, that I want to bring back from the small towns of Stavropol Krai to rural Iowa."