

Hospital Partnerships Spur Clinical Improvements

At Jávorszky Ödön Hospital in Vác, Hungary, it is clear that patient support matters. On the ground floor, an expansive lounge, newsstand and snack bar serve patients and visiting families; the maternity ward features three-sided cribs placed next to the beds so that new mothers can have easier access to their newborns; and follow-up support groups like the "colostomy club" are popular among patients recovering from surgery.

During a tour of the facility for conference participants, it was also clear that the small Hungarian town, located an hour's drive north of Budapest, is very proud of its hospital. The mayor of Vác told the multinational group: "I ask you to tell us your sincere opinion of what you have seen here. I would like to promise that we will learn from it."

While Jávorszky Ödön got the chance to showcase its facility and its emphasis on diabetes management and family practice, seven other CEE hospitals presented brief summaries of their partnership activities. Some spoke of the impact and sustainability of clinical improvements, and others spoke of the enthusiasm that partnership can generate.

"The ability of the American side to find the most efficient ways ... has made it possible to solve some of our problems," said Zhani Treska, MD, director of the University Hospital of Obstetrics and Gynecology in Tirana, Albania. In partnership with Jacobi Medical Center in Bronx, NY, Treska's hospital has seen measurable improvements among maternal care indicators in the last two years. From 1994 to 1995, for example, maternal mortality at University Hospital dropped from eight cases to three, and Cesarean sections declined from 28 percent of births to 15 percent.

The training of nurse-midwives also has been a successful offshoot of the Tirana-Bronx alliance, and, according to Treska, "All the midwives who have been trained in the US are now in a leading position in our institution."

For the Zagreb-Lebanon, New Hampshire partnership, a leadership development course held in Croatia last fall had a lasting impact. "It is very useful for us to get acquainted with methods of management in the US," said Dragutin Kosuta, MD, PhD, director of Sveti Duh General Hospital in Zagreb. "The course was a great contribution to our positive move forward."

Anita Caune, MD, director of the Riga Maternity Hospital in Riga, Latvia said she appreciated the positive approach of her US partners in St. Louis: "They didn't make us feel like we were something different or of lower status." Referring to the success of a recent conference on pediatric infectious diseases, Caune added, "We have to act like catalysts ourselves --we have to implement these programs to other hospitals in our country."

And results from the ongoing Women's Health Initiative between Mustamäe Hospital and Tallinn Central Hospital in Tallinn, Estonia and George Washington University Hospital in Washington, DC, have spurred equally positive feedback. Training Estonian health professionals in topics like hypertension, mental health and gynecological disease has served to create "a permanent educational resource for continuing medical education," according to Teet Lainevee, MD, chief doctor, Mustamäe Hospital.

AIHA hospital partnerships have built upon the progress of ten USAID hospital partnerships established in 1991, and three of these earlier partnerships were on hand in Budapest to present outcomes that serve as positive examples of partnership achievement. Most strikingly, the Pediatric Oncology Outreach to Hungary (POOH) project has claimed a 16 percent drop in short-term mortality from pediatric cancer over the last four years, and the partnership in Cluj, Romania carried out the first survey of health attitudes in Eastern Europe in an effort to improve cardiovascular health.