

Opening report of the Polish National Consultant in the field of rheumatology

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In Poland the National Consultants for the Ministry of Health operate in the fields of health care associated with medical specialties they represent. They are appointed by the Minister of Health from among specialists in the fields of medicine, pharmaceuticals and other disciplines which find application in health management [1].

Primary tasks of the National Consultants include initiating national epidemiological research, assessment of methods and results of such research and forecasting health needs with the use of the obtained results. National Consultants advise on the creation of government health care programs, including the National Health Program. They also evaluate patients' applications for receiving treatment or diagnostic services abroad. Finally, they play an important role in the system of training of medical specialists, advising on the tasks fulfilled by the Centre for Medical Exams, the Centre of Medical Postgraduate Education and the Centre of Medical Postgraduate Education for Nurses and Midwives. Each National Consultant is chosen for a 5-year term.

In May 2021 I was appointed to the post of National Consultant in the field of rheumatology. As in 2021 the COVID-19 pandemic continued, the ongoing struggle with this virus affected the availability of the rheumatologic care for patients. In this situation my activity concentrated initially on the identification of the most pressing problems faced by rheumatologists and health care managers.

In order to obtain the proper knowledge in this respect, I turned to the Provincial Consultants, asking them to prepare reports on the availability of rheumatologic care in the particular provinces of Poland. On my request, experts in the field of rheumatology, possessing both clinical and scientific experience alike – Prof. Maria Majdan, Prof. Joanna Makowska, Maria Maślińska PhD and the director of the National Institute of Geriatrics, Rheumatology and Rehabilitation Marek Tombarkiewicz PhD

(a health care manager and a medical doctor) – prepared, along with myself, the “Opening report” of the National Consultant in the field of rheumatology, intended both as a review of the state of affairs existing at the beginning of my term in office and as a plan of action for the years to come [2].

The priority targets for the National Consultant are defined as: the improvement of the hospital and ambulatory rheumatic care availability in the time of the COVID-19 pandemic and the curtailment of the delays in the diagnosis of rheumatic diseases though the introduction of so-called complex care for patients with early arthritis. The complex care project was previously presented and submitted to the Ministry of Health [3].

It will also be vital to establish a network of medical centres for patients most diagnostically challenging and requiring the most advanced treatments. Such centres should co-operate closely with other rheumatologic facilities of lower health care levels, as well as other high-level centres of different specialities (e.g. dermatology or pulmonology centres).

Special attention will be paid to the system of biologic treatment in rheumatic diseases. In Poland the biologic treatment of rheumatic diseases is publicly financed through special drug treatment programs. Those programs cover the treatment of such illnesses as rheumatoid arthritis, juvenile idiopathic arthritis, non-radiographic axial spondyloarthritis, ankylosing spondylitis, psoriatic arthritis, and granulomatosis with polyangiitis [4].

Programs are based mainly on the EULAR recommendations, although some discrepancies from those recommendations have been included. One of the additional tasks of the National Consultant is to undertake efforts to increase availability of the biologic treatment in accordance with the European recommendations by furthering appropriate changes in the drug treatment programs and promoting expansion of the public funding in that regard.

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The National Consultant will also take steps toward the establishment of the national database concerning treatment of rheumatic diseases. Creating such registers will be an important step on the way to improve health care planning, providing better understanding of health needs and improving the allocation of funding.

The plan of action for the coming years also includes the introduction of the national screening test for osteoporosis in risk groups, work toward the increase in funding of rheumatologic care, through the changes in the pricing of publicly financed hospital and ambulatory services, broadening of the co-operation with patient associations, with particular emphasis on discussion and exchange of views and experiences. Last but not least, an important part of the activity of every National Consultant is participation in training of new rheumatologists. The extended dialog with the community of young rheumatologists should help to perfect the education process in this field of medicine.

The discussed problems surely do not exhaust the topic of what should be done during the present term of the National Consultant in the field of rheumatology – yet they allow for the outlining of major directions of planned activity. In the current complicated epidemiological, economic and even geopolitical situation, The position of the National Consultant and tasks he has been entrusted with gain new importance. I hope

that my knowledge of the problems of the world of Polish rheumatology and experience gained as a member of the medical community, with the help of the experts and good-will and co-operation of the rheumatologic community, will let me fulfill all the tasks and improve the situation of rheumatologic patients in Poland.

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