Štěpán Svačina – Chairman, Czech Medical Association (CzMA)



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Štěpán Svačina, Chairman of the Czech Medical Association (CzMA), gives insights into the challenges that the Czech Republic faces in bringing change to the life sciences infrastructure. Whilst pointing out the areas in which the country is seeing positive advances — efficient communication with key personalities in healthcare such as the Ministry of Health — he also cautions that change is needed in the highly-regulated country and outlines the work that CzMA is contributing to this endeavour.

As Chairman of the CzMA, which represents over 130 member companies within the healthcare and life sciences sphere, what is your contribution to the dialogues taking place in the Czech Republic's healthcare and life sciences ecosystem?

As an institution in education and science that has a great relationship with the Ministry of Health, one of our commitments is to keep our members up to date in all disciplines related to the sciences and healthcare.

An example of how we contribute to the dialogue in life sciences is through the 250 laws concerning healthcare in the Czech Republic. These laws, before set in stone, are prepared by the Ministry of Health but they come to the association for feedback and advice. We select members who best fit the criteria to discuss these with, depending on the nature of the topic, to then draw

conclusions from their answers and provide the Ministry with our view. This is usually a two-week process, which can be challenging considering how controversial this area of life sciences is and thus the opinions of our members are of high importance.

Thanks to being in constant contact with the key personalities of the health sector and being involved in the decision-making of the different ministries, we are able to positively influence the healthcare system and the development of new laws.

Since its founding, the Czech Medical Association has had a focus on developing the science-based knowledge of medical sciences and scientists. Could you give an overview of your history in the country?

Although the Czech Medical Association in its current form dates back to a 1992 statute, our oldest journal was published as far back as 1862. Back then, we were called the Czech Medical Association of J. E. Purkyně. Despite the multiple changes of our name, our mission has remained the same: as an independent association connecting physicians, pharmacists, and others in the healthcare ecosystem, our priority is to educate our members in medical sciences, healthcare and all related disciplines.

We strongly focus on improving the conditions for the exchange of information and knowledge and encourage our members to cooperate between them as well as with the government, national and international regulatory bodies and with other organizations and professional institutions. The more science-based knowledge, the better the impact in areas like preventive healthcare will be.

How would you assess the current level of science-based knowledge in the Czech Republic?

The average Czech does not know much about preventive diseases because of the insufficient levels of education about this taught in schools. Two countries that rank highly when it comes to education in this area are Austria and Australia, so we are using them as a reference to improve education in healthcare. We plan to soon launch a new website to educate the population and to answer the main questions on key areas, such as cardiovascular diseases, oncology, and vaccinations, among others.

Looking at the talent in the country, what would you address as the main strengths and weaknesses?

Although the country has some very well-educated professionals, there are some significant problems.

Since the 1990s, the salaries of physicians have been very low. Whereas there has been a strong development in other industries, the organization of healthcare has not seen positive advances.

We have eight medical schools in the Czech Republic, but many people are leaving the country. Moreover, in small towns near the border, there is a shortage of physicians. In Prague, there are enough doctors, but not enough nurses, resulting in some hospital departments closing due to a shortage of nurses. Just recently, we had discussions with the Ministry of Health about how we could attract talent from abroad, especially nurses but also across the whole spectrum of healthcare practitioners.

In the Czech Republic, we have something called “Prescription Limitation”, which means that GPs are too niche in their area and cannot treat people or prescribe medications outside of their field of knowledge. For example, a doctor specializing in diabetes can only treat and prescribe patients with diabetic conditions. This is adding to the pressure when we have shortages, such as waiting times, so there needs to be higher flexibility. This should be changed in the next one to two years so that GPs can prescribe more.

Nevertheless, we continue to drive a change, especially when it comes to attracting talent, but sometimes we see that the European Union is quite slow in implementing changes that are crucial for the development of the scientific education system. This issue trickles down to causing problems in the Czech Republic.

Digitalization is on the lips of everyone in the country – from the government to the industry. Where do you see the potential benefits of digitalization for the doctors’ working environment?

Digitalization in the Czech Republic is making major advances. There have been some new laws that have been beneficial, for example electronic prescriptions. In health, it is functioning well: electronic prescriptions were a big problem when they started two years ago but are proving to work now.

Additionally, there are collaborations with databases of companies and pharmacies to move on from paper-based services. Although more cooperation between different stakeholders is still needed, things are moving in the right direction.

How has your vision for the association shifted over the past years?

When the Czech political scenario changed in 1989, I thought it would be very simple to foster the healthcare ecosystem. After some years, I realized it is not that simple and that there are big problems to tackle, not so much with the medicine itself but with the healthcare organization and infrastructure.

Nevertheless, we have managed to make a significant change in recent years: our main achievement of better communication with the Minister of Health has been reached. It is milestones like this that motivate us to keep going.

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