

Health system developments in former Soviet countries

by *Sherry Merkur, Anna Maresso and David McDaid*

Nearly 25 years after the dissolution of the Soviet Union all of the countries in the region are actively engaged in the process of reforming their health care systems, with various degrees of success. The latest issue of Eurohealth (volume 21, issue 2), just been published by the **European Observatory on Health Systems and Policies** (in which **LSE Health** is a partner), analyses developments in these countries.

This issue's **Eurohealth Observer** section examines the main challenges and achievements. Looking first at primary care, Kühlbrandt and Boerma highlight the heterogeneity between the countries in the region in their struggles to operationalise the family medicine model and to overcome the many infrastructural, financial and human resources obstacles facing the reconfiguration of primary care services. The next article looks at attempts over the last two decades to downsize and rationalise the extensive hospital sectors inherited by all the countries in the region. With overwhelming (and unsustainable) investment of resources in in-patient services the challenge here is to not only rebalance the provision of health care away from hospitals and towards primary care but also to improve the management, efficiency, appropriateness and quality of inpatient care.

Pharmaceutical care provides the third focus with Richardson et al. assessing the impact of price increases following the liberalisation of pharmaceutical markets across the region in the early 1990s, the financial access barriers posed by significant out-of-pocket payments for medicines and factors impeding the implementation of rational prescribing policies. Finally, the two country case studies in this section put the spotlight on Ukraine and Uzbekistan which both face many of the challenges highlighted in the thematic articles, particularly Ukraine which must meet the additional challenges of providing essential services under conditions of conflict and crisis.

In the **Eurohealth International** section, the health priorities of the upcoming Luxembourg Presidency of the Council of the European Union (1 July 2015 to 31 December 2015) are showcased, which scope the areas of medical devices, personalised medicine, dementia, cross-border health care, and health security. Further, they express the intention to always put patients at the centre of discussions.

In the first article of the **Eurohealth Systems and Policies** section, Saltman and colleagues examine new reforms which they characterise as an “aggressive multi-pronged effort to efficiently and effectively deal with the growing number of elderly patients”. They describe the introduction of a series of inter-linked structural, financial, and care coordination reforms in both Denmark and Norway. The next article analyses views from the Dutch public on their out-of-pocket payment system and draws conclusions as to why this policy tool, in this context, might not meet the goal of limiting health care expenditure. Third, García-Gómez et al. report on Spain's universal access to long-term care services for those with certain levels of dependency. They present findings of horizontal inequity both in terms of use and unmet needs across socioeconomic groups.

Eurohealth Monitor features two new books that provide country reports. The first focuses on a dozen European countries to understand and evaluate the diverse range of contexts in which new approaches to *chronic care* are being implemented. The second comprises structured case studies to summarise the state of *primary care* in 31 European countries. The News section brings you a range of health sector developments from across Europe and around the world.

Read the full issue [here](#)

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Sherry, Anna and David edit the Eurohealth series.

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