

## Editor's Page

# Education and Growth: A Continuing Priority

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**W**orldwide, important figures and realities that affect the development of cardiovascular medicine reflect the growing difficulties and problems in Greece. The value of the international cardiovascular drug market in the financial year 2011 was estimated to be \$74 billion, tending to decrease by 10% annually. For the year 2017, it is estimated that this figure will be \$38 billion. The value of the international medical device market for cardiovascular medicine remains stable or slightly in decline in the USA, with a slight upward trend in economically emerging countries.

Health care systems, especially in industrially developed countries, are cutting expenditure to preserve their viability, looking to generic drugs, restructuring codes of practice—which are often dressed up and presented as codes of ethics, while increasingly often patients are made to stump up part of the cost of their care.

As a result, for action and regulation in the field of health, the spotlight is falling more and more on health care managers, health economists, insurance companies, and politicians. Little by little, doctors are coming to be treated by all these people as ordinary and greatly downgraded clerical workers, responsible mainly for generating costs and massive expenses. At the same time, the great majority of doctors are often

excluded from current health care policymaking, with no say in strategy or planning, and no cohesive standpoint.

All this is obviously rather discouraging, not only for healthcare workers, but also for the principal stakeholders in research and development, namely the universities, research institutes, and industry. Low levels of funding and the excessive application of strict regulatory regimes frequently lead to decline.

These ominous trends have neither apparent nor easy solutions. Nonetheless, progress in cardiovascular medicine will need new ideas, vision, and of course financial support. Today, it is more important than ever for specialists in cardiovascular medicine to give the greatest priority to continuing medical education and professional development. It is essential for all those in charge of clinical laboratories and professional associations to be aware, even to a limited extent, of what progress in health care, health economics, and industry really means.

Of course, decency and decorum will be required in the management of health insurance resources; at the same time, however, there must be strict observance of what is legal and what is best for the patient. The patient must be our first consideration and our primary focus. It is the patient who is our greatest ally in progress and in medicine.

