

## **Interview – Dr. Prem Nair**

I am Dr. Prem Nair. I am the Medical Director here at the Amrita Institute of Medical Sciences in Kochi, Kerala.

**What ails in Indian health care? What prescriptions do you suggest to solve the challenges of access and affordability?**

Health care has a lot of challenges in India. First and foremost is the issue of funding. Every time we talk about the health care, we talk about the low funding which ails our healthcare system here in India and it has a profound impact on the way medicine is practiced. Because of the low levels of funding, we see almost 80% of our population having to pay out of pocket and the one of the commonest cause of poverty and the poverty cycle created is due to out of pocket expense for health care particularly in the elderly, which is a growing population in India. That is one of the major factors.

There are many other issues related to health care which are major challenges one is infrastructure issues, issues related to poverty, safety, issues related to skilled health care personnel, very poor representation of health care devices and biomedical technology in India most of which are imported even today. These are some of the major challenges that need to be addressed to enhance our health care scenario.

**Hospitals are social businesses. How can a balance be struck between social responsibility to provide healthcare for everyone v/s the need to meet costs and ensure a return on investment?**

I personally feel that cost and return on investment are required for a sustainable health care program. This is not dependent on whether it is private or public necessarily. I think all funding we have the accountability to ensure that it is appropriately spent. If you look at the

public sector even if the health care is “free” somebody is paying for it, mainly the taxpayer. And it is important for us to make that accountable to the taxpayer and we need to ensure that the health care funding is used efficiently and effectively so that eventual healthcare outcomes are maintained and excellent. Return on investment allows measurement of efficiency objectively and will be able to ensure that we understand the real cause and be able to equate it with the value that we create using that funding so in the long haul sustainability is dependent on cause and return on investment whether it be in the public sector or the private sector.

Now the government can provide free healthcare to the poor through public funds but those funds must be used judiciously so that you get the maximum 'bangs for the bucks' as they say and you get the value for that money, because we cannot afford to waste money in unnecessary medical expenses.

### **What is the key USP of Amrita Institute of Medical Sciences?**

Amrita is very unique, it is a very unique organization, it is a non-profit charity and it functions quite differently from many other institutions. There is a lot of volunteer support from a variety of committed sources at the human resource level, at the infrastructure level, there is a lot of support, so that we are able to very vigorously look at our cause and be able to maintain very low cost without compromising quality and that is very unique to Amrita we have been to provide right from primary care to tertiary care at a very affordable cost and a large number of patients come to us mainly from the middle and lower middle class and the poor because of the affordability of health care.

**Amrita Hospital is known for several firsts. Can you recount some of your achievements and milestones in health care excellent over the years?**

I think we have been uniquely successful mainly because of the affordability of our health care. We have been able to maintain quality. We are accredited by the NABH, NABL, ISO and NAAC and have maintained very high rankings at the global level. Again, this is because of the way we practice medicine here is a little bit different. We vigorously monitor our costs both by us as a provider of healthcare and also we work with the insurance companies to provide a good cost-benefit ratio. Additionally, we are able to put aside some money for charity so that we are accessed by very poor patients as well going to the fact that ours is a humanitarian institution and Amma is the head of the institution. There is a lot of charity that we provide for patients who require it. We have instituted systems and in place that allow us to keep the cost down without affecting quality. We have a utilization review process which is very unique and new to India and that has allowed us to save considerable cost and provide maximum healthcare to the lowest cost.

**What are your expansion plans? Can you please tell us the status of your upcoming Faridabad hospital?**

We have been expanding our educational programs, for instance, particularly at the super speciality level and broad speciality levels, and the doctoral programs and research have been a major trust because we are a university hospital and that has been a major growth curve for us over the last 12 years. We are in the process of expanding our outpatient facility here, a number of new specialities had been introduced over the last 10 years which includes transplant, major involvement in robotic surgery as a partner with the industry. We do realize it is an expensive technology but it is likely to be the major technology in the next decade and we have gone ahead with it partnering with the industry so that we keep the cost down for the patient.

**Can you throw some light on health research activities that you are associated with as a hospital? Can you tell us so some of the key innovations and research being done?**

We are a university hospital and by definition we are mandated to do research and develop new information and new knowledge for the health care, the patients and for the industry. So, along those lines we have pioneered the establishment of a very strong research establishment within the hospital. Now we have are particularly keen on having it developed within the hospital because we want active cooperation and participation by the entire medical faculty because generally among the medical faculty the research is not a part of our culture, so we have to bring the research lab to the doctors and have them very closely involved in developing large variety of research programs. This has allowed a majority of our physicians and surgeons be actively involved in research and it also gives them professional satisfaction and it also improves our retention of outstanding faculty.

**Please tell us your international collaborations such as with Madagascar and Nepal and other countries. What will be your role in these tie-ups?**

Our international collaborations on numerous, both on the clinical service side as well as on the research side. On the clinical service side, we are regarded as a super speciality centre of excellence and we have a large number of patients who come from neighbouring countries as part of the medical tourism mainly because we maintain high quality and very affordable cost for the foreign patients also so we get patients from Middle East, Sri Lanka, Mauritius, Central Africa as part of our collaborative MoUs with them. Additionally, we are a university and a teaching hospital so we have a large number of collaborations with over the 150 universities throughout the world. Most of these collaborations are related to faculty exchange, exchange of skills, student exchange for teaching and training as well as research and these collaborations are immensely helpful in sharpening our skills and improving our clinical services as well as increasing our research output.