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**Members reports – ITALY
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Please name 3 main current concerns of the healthcare system in your country :

- **Epidemiology of medical workforce in Italy**
- **Resignation Phenomenon**
- **Violence Episodes**

INTRODUCTION

Currently, Italian healthcare expenditure for 2024 corresponds to 135876 millions euro. It increased by 3 billions euro compared to previous year but nevertheless it represents only the 6.4 % of GDP and provisions for next years are even lower. Large amount of this expenditure has been destined to contract renewal of healthcare professionals and another amount to the private sector for the assistance to shorten waiting lists.

Even though investments in public healthcare sectors are lower and lower, in Italy performance is still good as proved by some indicators as preventable mortality rate less than European rate (91 vs 158 out of 100000 inhabitants).

1. Epidemiology of medical workforce in Italy

Italian medical workforce is experiencing an odd situation: currently there is a shortage of physicians, in particular in demanding specializations, in the public sector and in family medicine. The most demanding specialties or those offering less opportunities in the private sector (for instance, emergency medicine, anesthesiology, clinical pathology, microbiology..) are less attractive so PGT contracts are not allocated or abandoned. On the other hand, projections based on enrollment in medical universities and current retirement requirements prove that in next 10 years (2023-2032) there will be a surplus of trained doctors that won't find a contract in the Italian healthcare sector. In fact, in this time about 109000 professionals will retire and 141000 doctors will be ready for the job market, after their medical study course. This means that in Italy, in next years, there will be on

one side a surplus of doctors and on the other side a lack of key figures in the medical sector.

2. Resignation phenomenon

From 2020 up today about 11000 doctors resigned from NHS, proving a high level of dissatisfaction and burnout . These professionals have chosen to work for the private sector or to go abroad, not only in European Countries but also in the Arabic area where remuneration, allowances and taxes are much favourable.

3. Violence episodes

Lack of funds, shortage of health care professionals, longer waiting lists, reduction of hospital beds have contributed to a climate of tension in hospitals (in particular in the emergency departments) and in health mental services, manifesting in an increase in episodes of violence, verbal and physical, against doctors and nurses. Italian Government has recently enacted a law to establish the automatic persecution of criminals even without any victims ' report (that most of the time avoided to complain).

