

Diederik Gommers: ‘Without investing in innovations you further undermine healthcare’

The coronavirus crisis has shown that the way in which we design our healthcare system will have to change drastically, says IC head Diederik Gommers. An important role in this process is laid out for medical innovations.

By Niels Hoeben

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Diederik Gommers
head of intensive care at
ErasmusMC



The demand for healthcare in the Netherlands has been on the rise for years. A rapidly ageing population and rising life expectancies contribute to maintaining an unabated high pressure on the healthcare system. In the meantime, the number of nurses just keeps dropping. This is a situation that will end up being untenable, and which is caused, among other reasons, by the constantly high work pressure on healthcare workers. This is expressed by Diederik Gommers, head of intensive care at ErasmusMC, and one of the faces of the coronavirus crisis: ‘To be totally honest, things were already going downhill before the pandemic began. We already had too few nurses at hospitals, both in the nursing ward and in intensive care, as well as in homecare and nursing homes. The pandemic may have rubbed our noses in it, but it wasn’t really a new problem. Simply put, healthcare is an unattractive employer, with its night shifts, lack of regularity and limited flexibility. People who work in healthcare take that for granted, because their main concern is the well-being of the patient. In the end, for many nurses the high work pressure is the reason to say farewell to the profession with a painful heart. And I cannot blame them for it.’

Humanity

‘If there is something that the coronavirus crisis has taught us, is how important nurses are,’ says Gommers. ‘In my IC unit, with fifty beds, we have 250 nurses, 25 intensivists, and as many assistant physicians. Those numbers alone already show how incredibly important the role of nurses is. The power lies in their humanity. They have chosen this profession to care well for patients, sit next to them, start a conversation with them, drink a cup of tea, hold their hand, support someone. But right now there is just too little time for that.’

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'The pressure on the healthcare system is too high, even without a pandemic. And patients feel that. In the end, it is about empathy. Every person senses whether you as a doctor or as a nurse are really interested in them, and you show that by having personal attention and time for the patient. Those are the subtleties that we need to pay more attention to in the future.'

Medical innovation

To once again make healthcare an attractive sector to work in, Gommers argues for drastic changes in the way the healthcare system is designed. In this respect, he sees a role for medical innovations. 'If we're talking about how we can make the work of medical personnel more attractive, we must make every effort to lower the work pressure and administrative burdens. You can accomplish this by achieving a lower patient inflow through illness prevention – tackling overweight and smoking, stimulating exercise – as well as by shortening the duration of patients' hospital stay. The DeltaScan is a good example of an innovation that makes this possible, but as care sector we should dare to invest more in such innovations: invest in order to make the work nicer and better, that is my personal mantra'

Gommers sees the fact that the healthcare sector has so far been reluctant to take the step towards innovation as a result of the way in which hospitals are financed. 'Healthcare in the Netherlands is organised very reactively: someone gets a disease, they go to the hospital, and the hospital gets paid to treat those patients. The more patients you treat, the more revenue you generate. So hospitals do not really benefit from preventing disease. No – in our current system a hospital benefits mainly from surgeries and other treatments, because you can declare those interventions. Even a shorter hospital stay is not a goal unto itself, because an ICU is financed based on a patient's admission days.'

Investing in innovation

Gommers berates what he sees as an old-fashioned way in which medical innovations have been dealt with so far. 'Hospitals used to be kept afloat by the government, but that is no longer the case, so as director you really have to ensure that you stay within budget. Healthcare costs should not increase too much. But it is precisely because of that focus on cost management that there is hardly any investment capital for medical innovation. For example, take a hospital like mine, with revenues of nearly 2 billion, and at the end of the year we have 15 million in black figures. Of course that seems like a nice amount, but with revenues of 2 billion it is negligible.' This is why Gommers argues for a nationwide innovation regulation in which certain venues are designated as testing grounds to investigate which medical innovations should be rolled out in the country. 'Without investing in innovations you further undermine healthcare, because together with disease prevention, medical innovation is one of the main pillars of the healthcare of the future.'

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