

Comments :

I am pleased to see the Prime Minister has taken an interest in this important health issue. My concerns about this issue have arisen from my experience as a General Physician working in South Tyneside in recent years, having previously worked for 16 years in the same capacity in the West Midlands. My concerns are about the local delivery of services needed to deal with the extremely variable workload. In my current area we usually have approximately 6-10 hospital admissions due to alcohol related diseases over a weekend compared with about 3 per month in Dudley previously. This obviously places a huge burden on, not only hospital resources, but also a need to develop even more local community follow up and preventative facilities. Unfortunately, as with the burden of chronic respiratory diseases, there can be extremely marked local variation in the burden of these diseases. Although it is the express intention of this government to encourage local decision making about health care delivery, the pressure on local PCT's to satisfy the demands and priorities of the National Plan (which by its very nature does not take on board local pockets of disease burden) will mean that these issues are given scant support. With these diseases obviously well associated with such noxious habits such as excessive alcohol consumption or cigarette smoking additional funding (top sliced) needs to be made. This could easily be based on known demographic census data which would allow far better allocation of valuable resources to deal with these pockets of disease burden to both the hospital and community health services.