Impact of economic sanctions on orthopedic residency program (education & training)

Ali Tabrizi'

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Address: Imam Khomeini Hospital, Urmia University of Medical Sciences, Urmia, Iran

Tel: +9804433457286

Email: ali.tab.ms@gmail.com

Dear Editor

Several factors are associated with residency programs (1). For the assessment process of the residency program, applicants' official transcripts, curriculum vitae, personal letters, references, and performance at interviews are usually used (1). Orthopedic residency selection is affected by program and staff reputation as well as by hospital facilities provided by the institution (1). Social and geographic influences are also related to residency program. In surgical fields, residency training, access to a variety of surgical instrument and component, and up-to-date device are of crucial importance (1). According to US claims, the goal of economic sanctions against Iran is not drug and health care. While they have indirectly imposed restriction and lack of adequate access to drug and medical equipment. The US administration's withdrawal from the Iran nuclear deal in May 2018 has threatened the lives of nearly 80 million Iranians (2). The health system has also been affected. Initially, the drug preparation was disrupted especially in patients with malignancy (2). Also, Iran is one of the most traumatic countries in the world. Orthopedic and general surgeons are involved with both traumatic patients and patients with skeletal and non-skeletal malignancies (3). Economic sanctions resulted in a decrease in general governmental budget and Iran's currency value. So, the cost of diagnostic methods, imagining equipment preparation, and arthroplasty devices will increase and would be far affordable by public health insurance(4). In the previous sanctions against Iran before the deal breaks down, many patients with blood diseases requiring blood production suffered from serious problems (5,6).Malignancy treatments with radiotherapy and chemotherapy posed a serious problem as Iran's facilities were below the world standard level; the number of these facilities also fell sharply during the embargo before 2015 (4). Similar to arthroplasty devices and imagining modalities, novel chemotherapy drugs and new biologic anti-cancer agent and orthopedic equipment are too expensive and consequently impose a huge cost on the health system. Iranian public insurance system may not be able to afford it for the increasing number of patients. More than 95% of Iranians are covered by public or government insurance, but their inability to cover the cost of these expensive treatments and equipment restricts the supply of such equipments by governmental hospitals (4,5). This was a miserable experience in the era of economic sanctions which ended by 2015 nuclear deal (5). However, history is repeated itself. Currently, governmental hospitals are facing a lot of problems in providing equipment which

¹ Clinical Research Development Unit of Imam Khomeini Hospital, Urmia University of Medical Sciences, Urmia, Iran

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indirectly affects the residency education and training program in the extended areas of Iran. Many surgical procedures are not carried out and the required training equipment is not available so the educational programs are at risk.

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