

TRANSFORMING HEALTHCARE IN PAKISTAN

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Abstract: *Pakistan, a country facing significant healthcare challenges, is witnessing a transformation through the efforts of the Pakistan Employees Social Security Institution (PESSI). This article explores the pivotal role of PESSI in providing comprehensive healthcare and social security to low-income workers and their families. Highlighting the achievements of the Rahmatul-lil-Alameen Institute of Cardiology (RAIC), the article underscores the institution's impact on improving health outcomes and social support in Pakistan*

Keywords: Pakistan, healthcare, social security, PESSI, RAIC, cardiac care, public health

Pakistan, a nation with significant healthcare challenges such as inadequate infrastructure, limited access to quality care, and a high disease burden, finds hope in the Pakistan Employees Social Security Institution (PESSI). Established under the Social Security Ordinance of 1965, PESSI aims to provide social security and medical care to employees in Punjab who earn nearly \$115 monthly.

PESSI runs hospitals and medical centres that offer free or subsidised treatments to workers and their families suffering from any disease, including emergency care, outpatient services, specialised treatments, and surgeries. Additionally, PESSI provides scholarships for workers' children's education, marriage grants, death grants, and disability pensions for injured workers (Figure 1). A prime example of PESSI's healthcare efforts is the Rahmatul-lil-Alameen Institute of Cardiology (RAIC), which offers advanced cardiac care at no cost. PESSI is funded through minimal employer contributions, with employers paying \$7 monthly per employee. This system secures the well-being of over 1.2 million workers and their 6.8 million family members, illustrating the transformative impact of PESSI on healthcare in Pakistan.

The data presented in this article were collected from various reports and publications by PESSI and RAIC. The statistical information on cardiac interventions and surgeries was obtained from the institution's annual reports and verified through interviews with key personnel at RAIC. The narrative also includes qualitative insights from patients and their families to illustrate the real-world impact of PESSI's initiatives.

PESSI is a healthcare provider and a guardian institution that extends its support beyond medical care. The institution provides education for workers' children, supports higher education, and offers grants for marriages. An excellent example of PESSI's commitment is the Rahmatul-lil-Alameen Institute of Cardiology (RAIC).

RAIC stands out as a rare gem in Pakistan's healthcare landscape. It offers treatments of international standards free of cost and has a 24/7 cardiac emergency facility. Since its inception in 2013, RAIC has performed 6,745 cardiac interventions, including angiographies, angioplasties, and cardiac pacemaker installations. The cardiac surgery department boasts an all-cause mortality rate of 1.96% after 2,354 open heart procedures. In the past year alone, the facility conducted 333 open heart operations and over 1,000 Cath lab treatments.

In addition to high-quality medical care, patients at RAIC receive 700 PKR daily for food and personal expenses, with the government compensating them for their lost wages during treatment. The recent launch of a minimally invasive heart surgery program further enhances RAIC's impressive capabilities (Table 1). RAIC plans to introduce multiple programs including percutaneous ASD, VSD, PDA device closure programs, complete Pediatric Cardiology and Cardiac Surgery Programs and MS, MD and Diploma courses in Cardiology.

Conclusion:

The Pakistan Employees Social Security Institution (PESSI) and the Rahmatul-lil-Alameen Institute of Cardiology (RAIC) stand as exemplary models of compassion and dedication. By providing invaluable services to those in need without any financial burden, these institutions have transformed individual lives and contributed significantly to the betterment of the Pakistani community. In a world often defined by challenges and disparities, such selfless and impactful facilities serve as a beacon of hope, illustrating the profound difference that dedicated social security and healthcare systems can make.

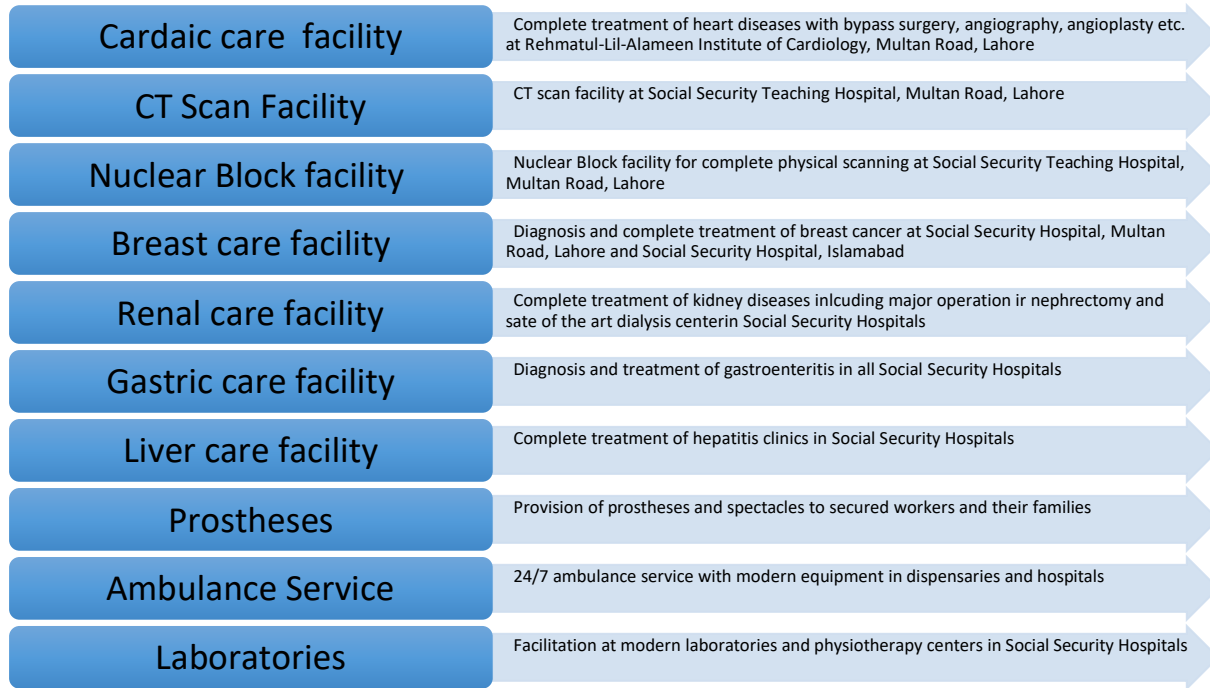


Figure 1 shows the facilities at the Social Security Hospitals.

Table 1: List of procedures offered at RAIC:

Cardiology department	Cardiac surgery department
ECG	Coronary Artery Bypass Grafting surgery (CABG)
Stress Echocardiography	Total Arterial Bypass Grafting surgery (TA CABG)
Exercise Tolerance Testing	Multiple sequential Bypass Grafting surgery (MS CABG)
Holter Monitoring	Hybrid Coronary Artery Bypass Grafting surgery (Hybrid CABG)
Coronary Angiography/Angioplasty	Beating heart Bypass Grafting Surgery (OPCAB)
PTMC	Valve Replacement / Repair
Temporary Pacemaker implantation	Vascular Surgery
Permanent Pacemaker Implantation	Embolectomy, Thoracotomy and Pericardiectomy
Pericardiocentesis	Minimally Invasive Cardiac Surgery (MICS)
Coronary Care Unit	Aortic Root Replacements
	Cardiac Tumour Removal
	ASD and VSD repairs
	Intracardiac Abnormal Shunts Repair/Closure

Declarations

Conflict of interest

The authors declared an absence of conflict of interest.

Authors Contribution

MOMIN AHMAD

Write-up, data collection, interviews with officials, Final Approval of version

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