



ALBANIA – HEALTH SYSTEM OVERVIEW

***MINISTRY OF HEALTH
ALBANIA***



Surface: 28.748 km²

Population: 2,831,741 inhabitants

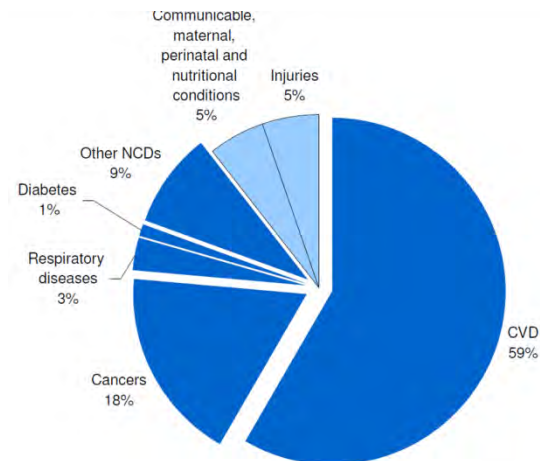
Rural areas: 46.3 % of the population

Life expectancy: men 74.7 years; women 80.1 years.

Infant mortality : 7.9 per 1000 live births (2014) as compared to 17,5 per 1000 live births in 2002

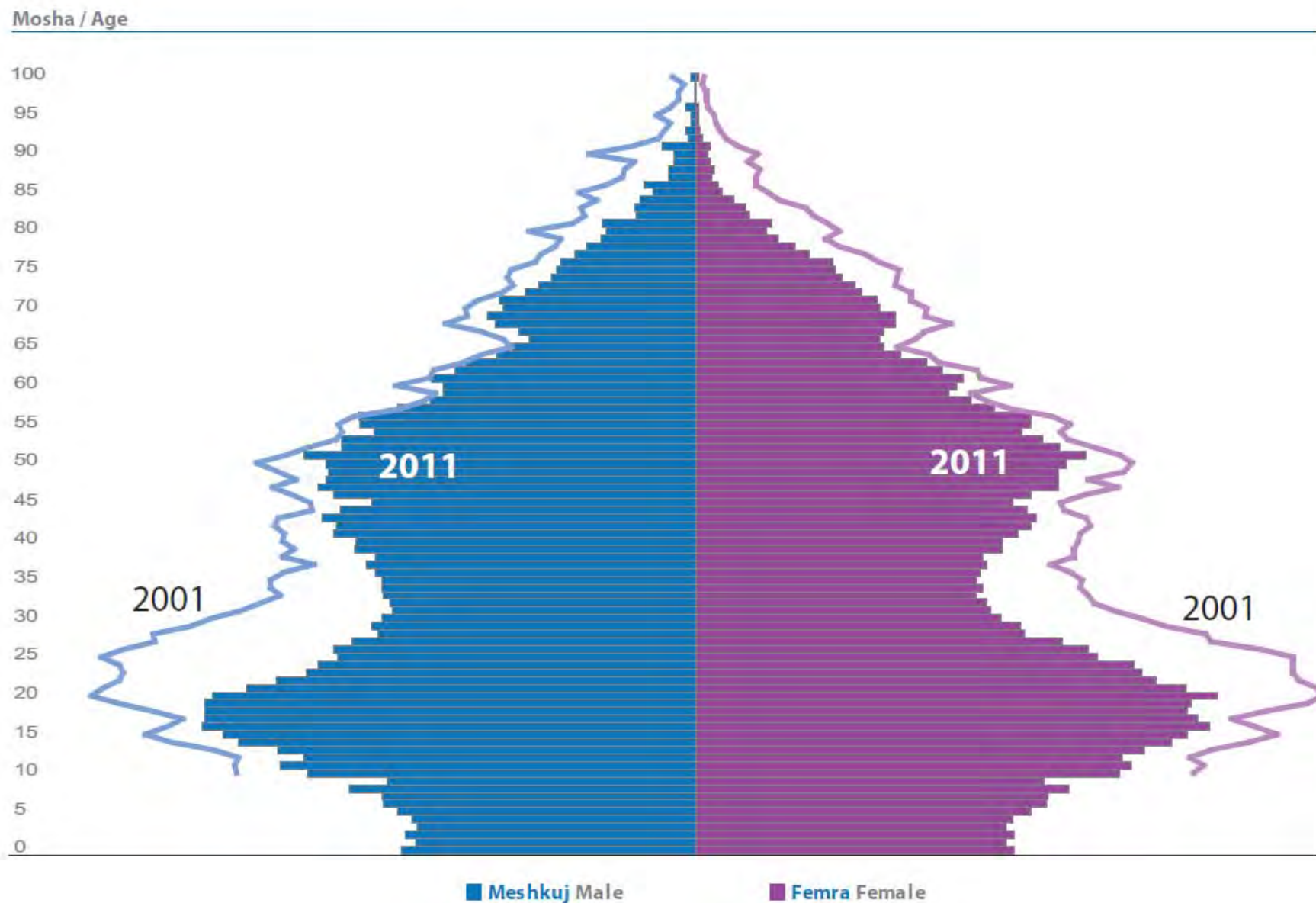
Under 5 mortality rate: 9.2 in 2014 as compared to 20.1 in 2002

NCD account for about **89%** of all deaths in Albania (**59%** from cardiovascular diseases and **18%** from cancer).



NCDs are estimated to account for 89% of all deaths.

Grafiku 1. Piramidat e popullsisë sipas Censurit 2001 dhe 2011
Figure 1. Population pyramids according to 2001 and 2011 Censuses





2014 Territorial & Administrative Reform

**Before 2014: 64 Municipalities
311 Communes**

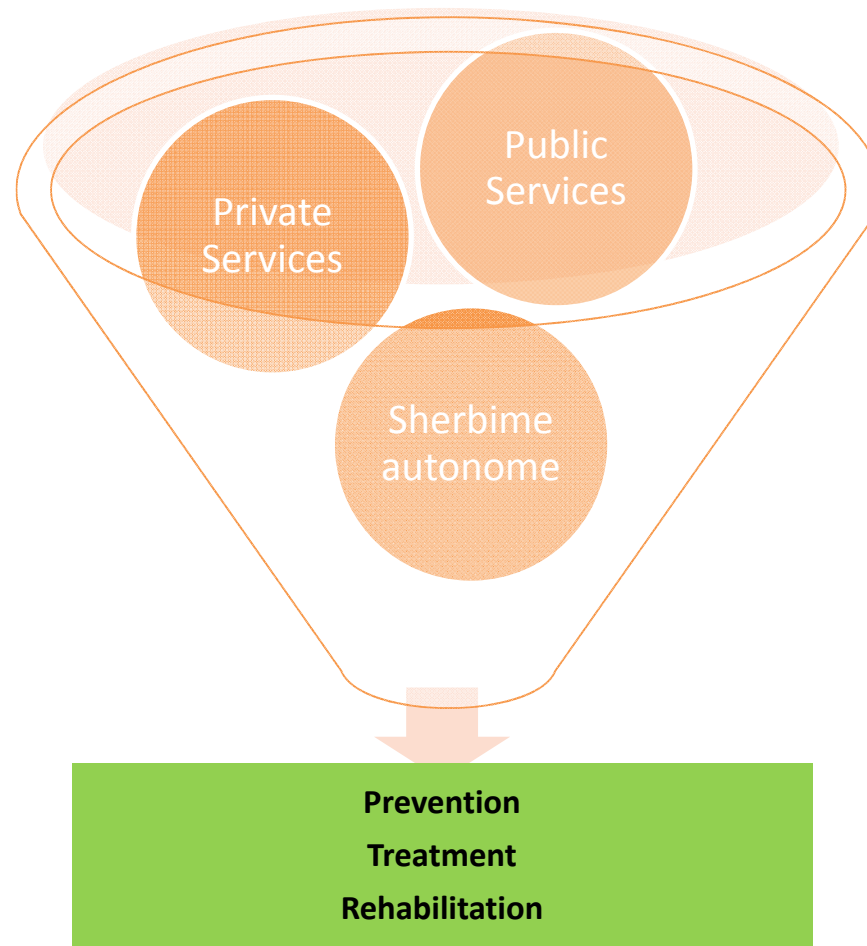
After 2014: 61 municipalities

Opportunities for reshaping Health Services

**Barra e sëmundjeve që i atribuohet të gjithë faktorëve të stilit të jetesës në Shqipëri
në vitin 1990 dhe në vitin 2010 (burimi: GBD, 2010)**

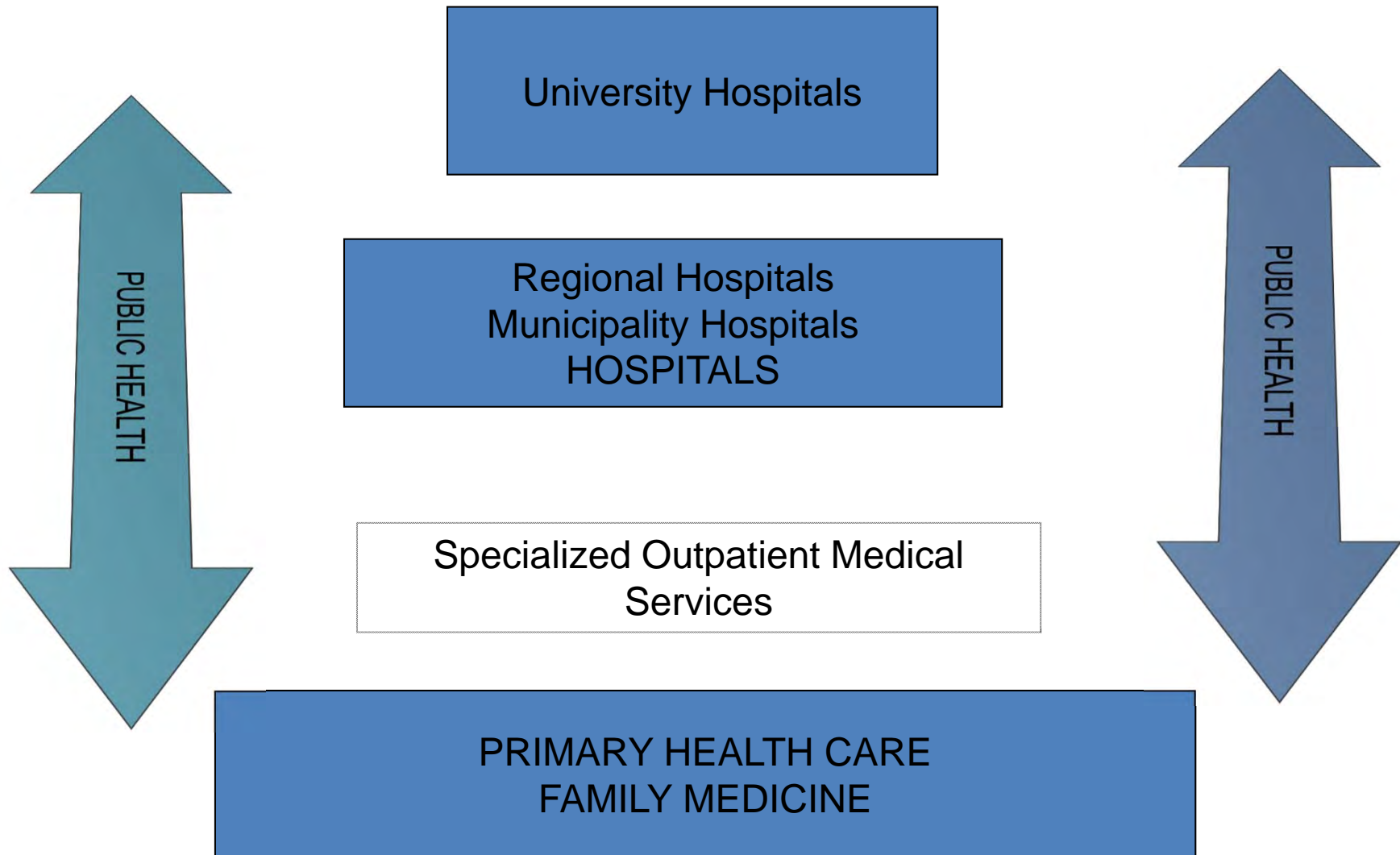
Faktori i stilit të jetesës	Viti: 1990		Viti: 2010	
	DALY (për 100,000)	Përqindja DALY	DALY (për 100,000)	Përqindja DALY
Inaktiviteti fizik	-	-	1167.0	4.3
Rreziqet e dietës	2907.3	10.1	4813.8	17.6
Dendësia e ulët e mineraleve në kocka	45.8	0.2	84.7	0.3
TMT i lartë	1116.7	3.9	2241.8	8.2
Tensioni i lartë i gjakut	2600.8	9.1	4199.7	15.3
Niveli i lartë i kolesterolit	651.4	2.3	1073.9	3.9
Niveli i lartë i glukozës	770.6	2.7	1281.9	4.7
Konsumi i drogës	268.8	0.9	369.2	1.3
Konsumi i alkoolit	433.2	1.5	956.2	3.5
Duhanpirja	2856.3	9.9	3313.5	12.1
<i>Stili i jetesës në total</i>	<i>11650.9</i>	<i>40.6</i>	<i>19501.7</i>	<i>71.2</i>

Health Services in Albania

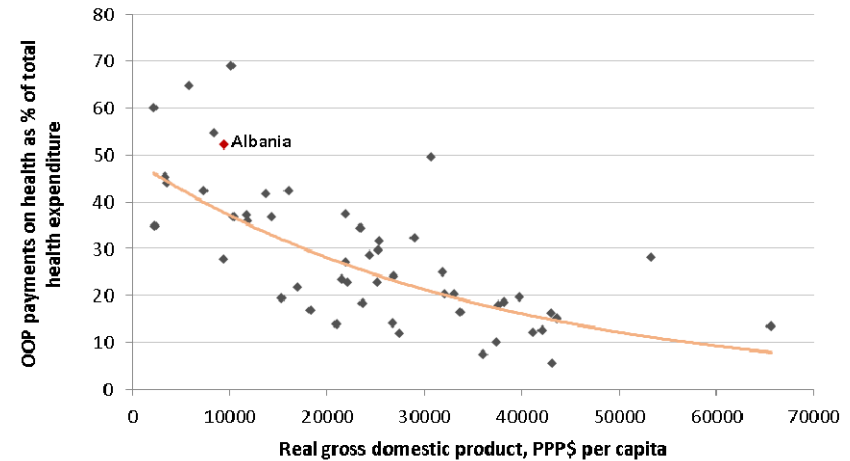
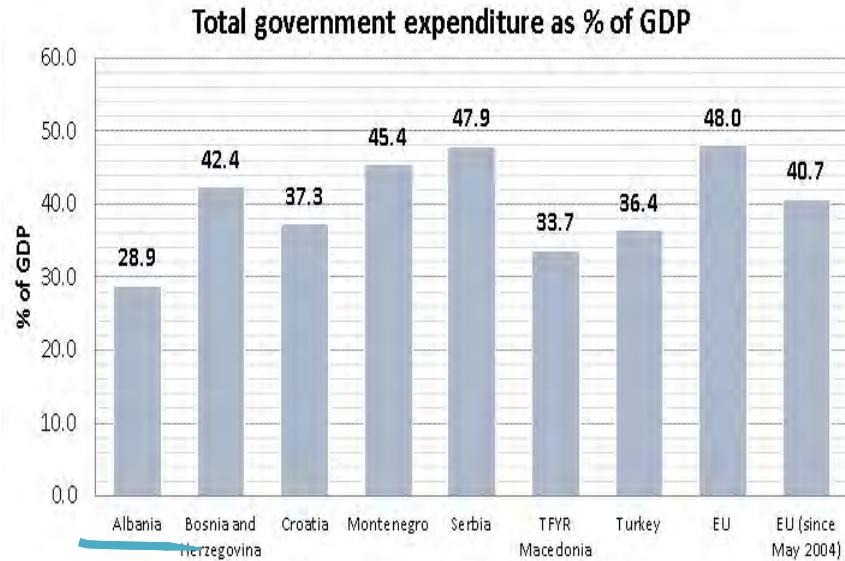


Improvement of social, mental and physical wellbeing of all citizens

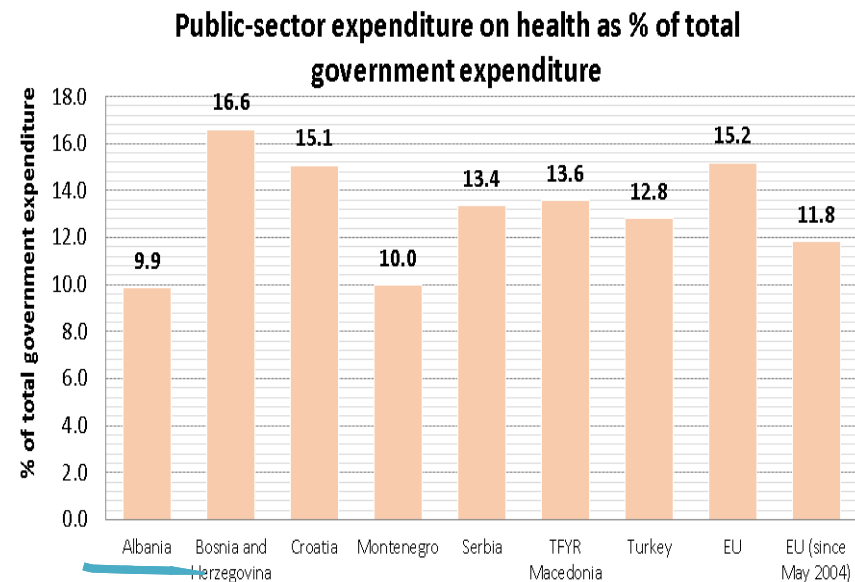
Health System Pyramid



Public spending

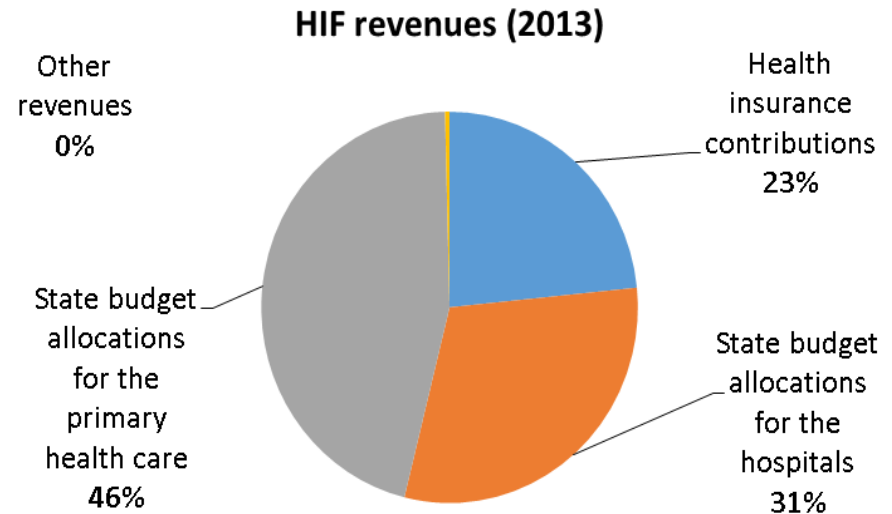


Public Expenditure in the sector has increased from an estimated 6,600 ALL per capita in 2004 to 14,200 ALL in 2015



Revenue sources

- According to the law compulsory health insurance is obligatory for all economically active and non-active population groups
- HIF is funded through a mix of payroll taxes (3.4%) and general budget revenues on behalf of non-active population groups
- Voluntary enrolment for those not covered



2014	ALL	EURO
MoH Budget	42,293,383,000	306,473,790
Health Insurance Fund	35,856,384,000	259,828,870
Contributions	8,008,133,000	58,029,949

Health Insurance Fund

- Most of public funds are channeled through Health Insurance Fund (HIF) which is an important precondition for effective strategic purchasing;
- Still, the treasury rules applied for hospital expenditures and strict control over staffing policies reduces flexibility to be active purchaser;
- Thus, even funds are pooled to HIF there is still fragmentation inside that pool diminishing HIF's ability to be efficient purchaser of care;

Source: WHO assessment mission on health financing for universal health coverage with a focus on primary care in Albania. 2015

HEALTH SERVICES

- Primary Health Care providers network in place (421 autonomous health centers, 2300 health posts) but its package of services, management and accountability mechanisms to be revised in the framework of the administrative and territorial reform;
 - Financial incentives being considered to support Primary Health Care Providers to take broader role and focusing on outcomes

- Hospital network with unused capacity needs re-profiling to be able to respond to population health needs
 - More autonomy needed to respond to financial incentives

- Evolving private providers market and Public Private Partnerships (PPP) provide efficient use of available resources in the country;

Services (cont.)

Public Sector

421 Public Primary Health Care Centers;
43 public hospitals (5 University Hospitals).

Private sector

10 private hospitals, 66 outpatient medical centers, 111
outpatient medical cabinets, 229 laboratory diagnostic
centers, 563 dentistry cabinets, 1650 pharmacies
(*reference 2014*)

Human resources projections in the Health Sector 2013-2020
(in thousands)

	2013	2020
I.Total number of employees	28.6	32.4
a)Public Sector	24.8	25.5
b)Private Sector	3.8	6.9

- 12114 Hospital health care workers
- 7700 Health care workers in primary care
- 50 epidemiologists
- 100 Other public health workers
-

The way ahead

- Improving access that prevents exclusion;
- Increasing the efficiency of public spending;
- Filling the identified gaps in the system;

Overall:

Ensuring universal health coverage and access focusing on maximizing healthy lives and reducing the burden of noncommunicable diseases (NCDs);

KONTROLLO SHËNDETIN PA PAGESË



SHËNDETI NUK ËSHTË NJË PRIVILEGJ, ËSHTË E DREJTA JOTE.

Kontrolli Shëndetësor Bazë

Kontrolli Shëndetësor Bazë është një program kombëtar, pa pagesë për përfutuesit e tij, që synon depistimin e popullatës për faktorët e rrezikut dhe sëmundshmërinë më prevalente, me qëllim kujdesin për shëndetin, parandalimin e sëmundjeve dhe komplikacioneve, zbulimin e hershëm të çrregullimeve, mjekimin në fazat e hershme dhe përmirësimin e kulturës shëndetësore, prej të cilit, do të përfitojnë të gjithë shtetasit e grupmoshës 40-65 vjeç me qëndrim të përhershëm në Republikën e Shqipërisë.

Ftojme të gjithë shqiptarët e kësaj grupmoshe, që një herë në vit, pa pagesë, të paraqiten në qendrën shëndetësore pranë vendbanimit të tyre dhe të kryejnë kontrollin bazë.

Të shëndetshëm, jemi të gjithë të barabartë!



FILOZOFIA E KONTROLLIT MJEKËSOR BAZË



Shëndeti është një aspiratë e përbashkët njerëzore e përpasesse më të lartë dhe kjo qendron në thelb të ekzistencës së shoqërive moderne.

Nisma botërore e ODSH-së, "Shëndeti 2020", e bën të qartë se përmirësimi thelbësor i shëndetit mund dhe do të arrihet kur në të përfshihemi të gjithë, e "gjithë shoqëria" dhe e "gjithë qeveria", duke synuar mbrojtjen e popullatës nga kërcënimet mbi shëndetin, që njerëzit të jenë në gjendje të jetojnë cilësisht më gjatë, duke ndihmuar gjithashtu, edhe mbrojtjen e shtrësbave të pambrojtura të shoqërisë.

Kjo përfaqësojë na ofron mundësinë të fokusohemi, më së pari, te shëndeti dhe ruajtja e tij, dhe jo vetëm te sëmundja dhe kurimi i saj.



SI JE?



MINISTRIA E SHËNDETËSISË



FONDI I SIGURIMIT
TË Detyrueshëm
TË Kujdesit
Shëndetësor

0800 74 53
Numër i gabëll

www.sije.al



SI JE?





KERKONI...

FILLIMI

AKBPM

LEGJSLACIONI

LAJME

PUBLIKIME

FARMAKOVIGJILENCA

LIDHJET

GALERIA

KONTAKTE



AGJENCIA KOMBËTARE E BARNAVE
DHE PAJISJEVE MJEKËSORE

SEKTORET

- * 1-Burimet Njerëzore
- * 2-Çështjet Juridike
- * 3-Financa dhe Shërbimet Mbështetëse
- * 4-Teknologji e Informacionit dhe Komunikimit
- * 5-Laboratori i Kontrollit
- * 6-Shpërndarja e Barnave dhe Pajisjet Mjekësore
- * 7-Sektori i Inspektimit
- * 8-Autorizimi për Tregtim dhe Çështjet Rregullatore
- * 9-Sektori i Pajisjeve Mjekësore
- * 10-Sektori i Farmakovigjilencës

BARNAT

REGJISTRI I BARNAVE

NJOFTIME TE FUNDIT

Tërheqje nga tregu e serisë DY5223 me datë skadence 30.09.2018 të barit NIFEDIPIN 20 RET 1A PHARMA të Mbatësit të Autorizimit për

NA KONTAKTONI



kontakt@akbpm.gov.al

New Legislation on Medical Devices



**REPUBLIKA E SHQIPËRISË
KUVENDI**

LIGJ

Nr. 89/2014

PËR PAJISJET MJEKËSORE¹

Mamografët e Lëvizshëm



Erseke



Gjirokaster



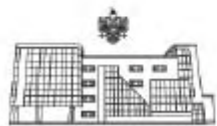
Bulqize



Prrenjas

□ Pamje: Reparti i **Kemioterapisë** në Sp. Rajonal Durrës [20/10/2015]







Gripi



Inf respiratore



Gastroeneterite



Helmim ushqim



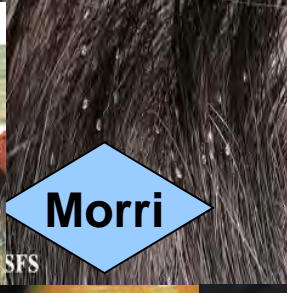
Varicela



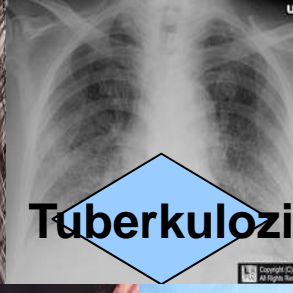
Zgjebja



Bruceloza



Morri



Tuberkulozi



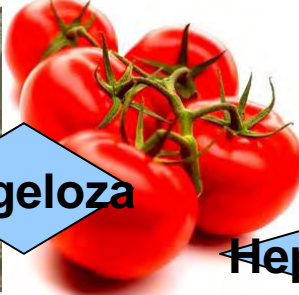
Dermatofitia



Salmoneloza



Shigeloza



Hepatiti viral



Streptokoksi



Parotit viral



Antraks



Meningiti



Tifo abdomin



Leptospiroza



Rikecioza



Ethe hemorragjik



Leishmania



IST

HIV/AIDS

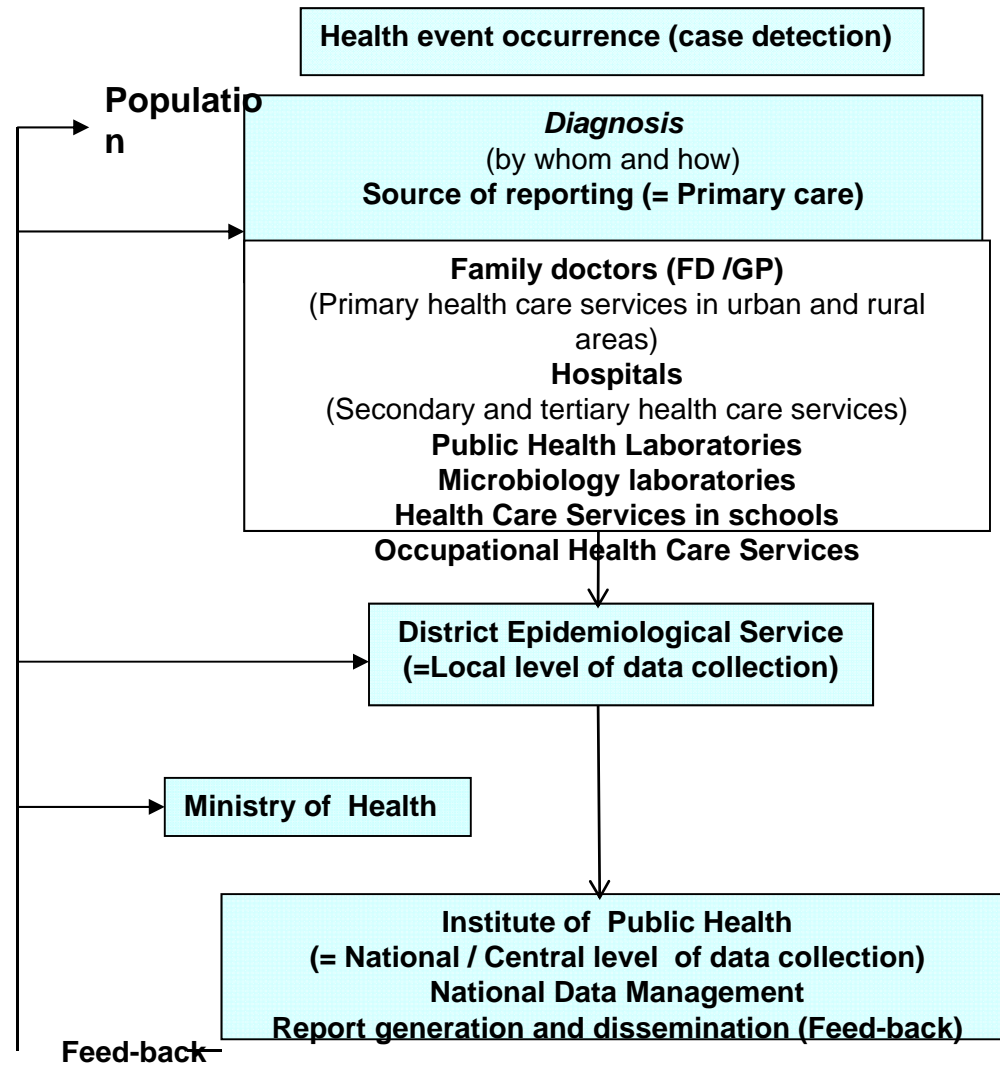


Sifiliz

Public health system

- Ministry of Health
- Institute of Public Health
- National Blood Bank Center
- National Drug Control Center
- Directories of Public Health
- Primary Care Centers
- University Hospital
- Regional hospitals
- District hospitals

Flow-chart of data collection in each statutory notification system of Infectious Diseases



General information about surveillance in Albania

- **Major Disease - Based Surveillance System** mainly hospital based
Monthly mandatory notification of diseases through a specified form (
- **ALERT system**
Syndrome – Based Surveillance System, weekly mandatory notification of infectious syndromes

STI syndromic system

- **Case-Based Surveillance System**
- **Rumour analysis system**
- **Sentinel surveillance sites (Influenza, Rotavirus etc)**

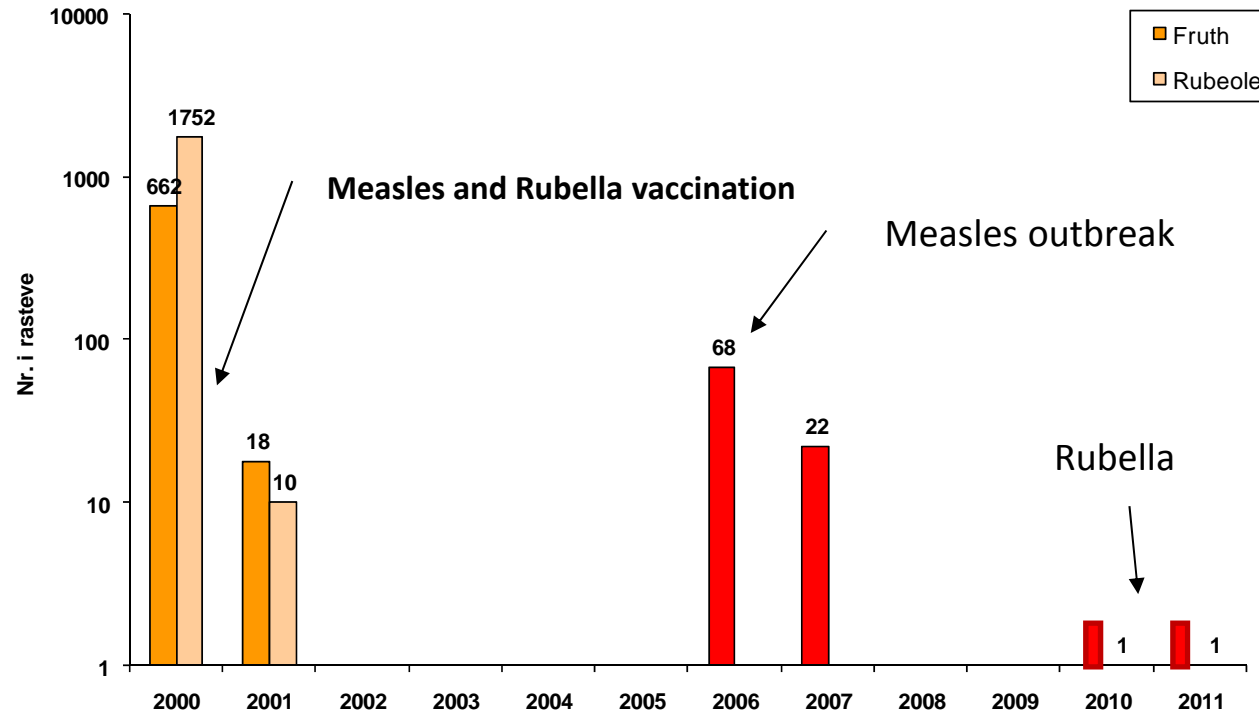
Major changes in communicable diseases

- Improving lab capacities - New diagnostics
- New law on communicable diseases
- New vaccines (IPV, Hepatitis B for HCW, Influenza vaccination of HCW)
- Immunization Information System
- One health assessment of Infectious Diseases (Leishmaniasis) toward One health surveillance and there after One health dashboard
- Efforts to digitalize the surveillance system and link with digitalization of health care services

Surveillance challenges

- New case definitions implementation
- Laboratory diagnostics funding
- Serosurveys
- Chronic hepatitis reporting
- Liver cancer registry
- Estimation of deaths
- Treatment rates
- One platform

Measles and Rubella outbreaks 2000 - 2011

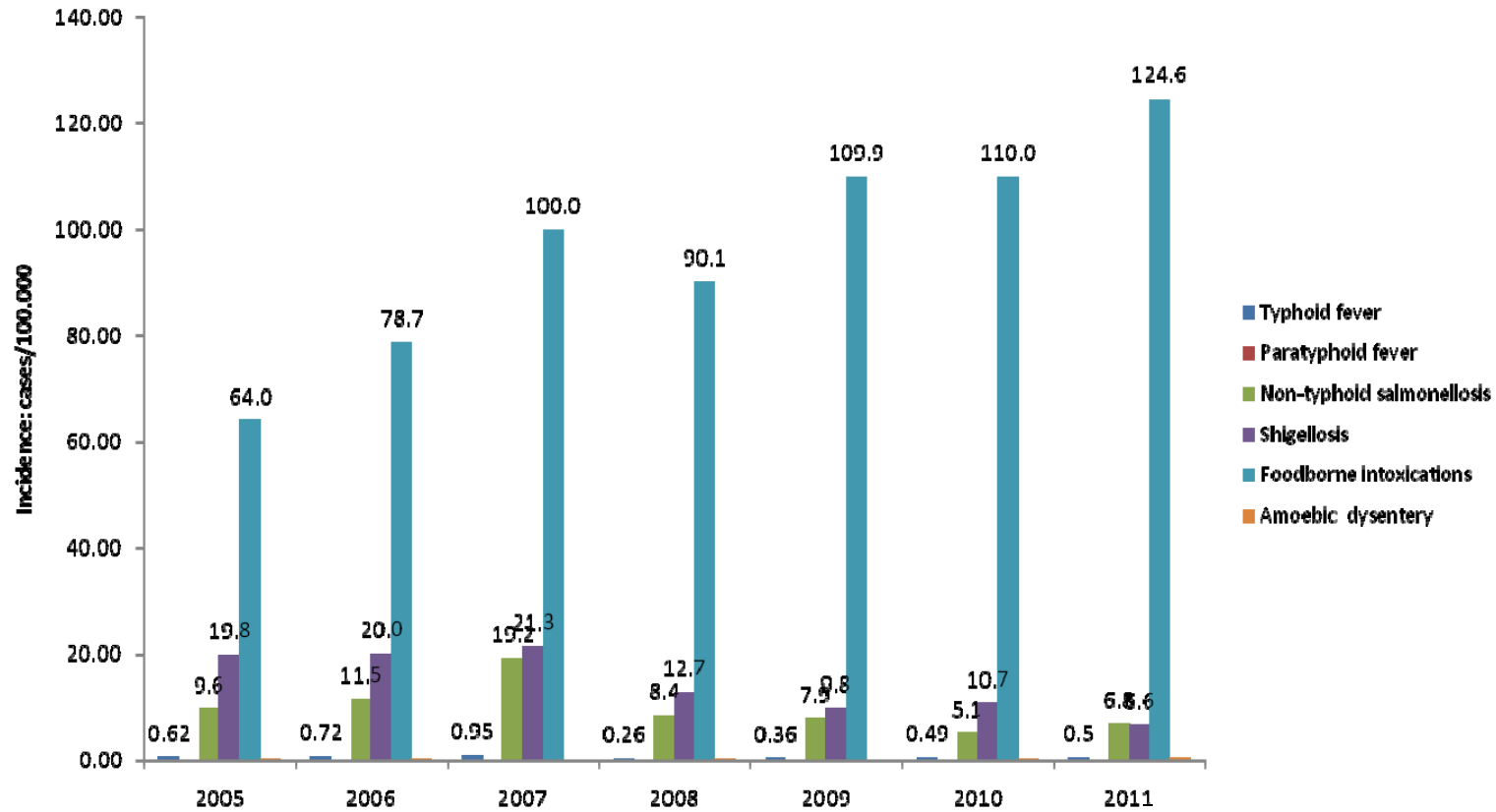


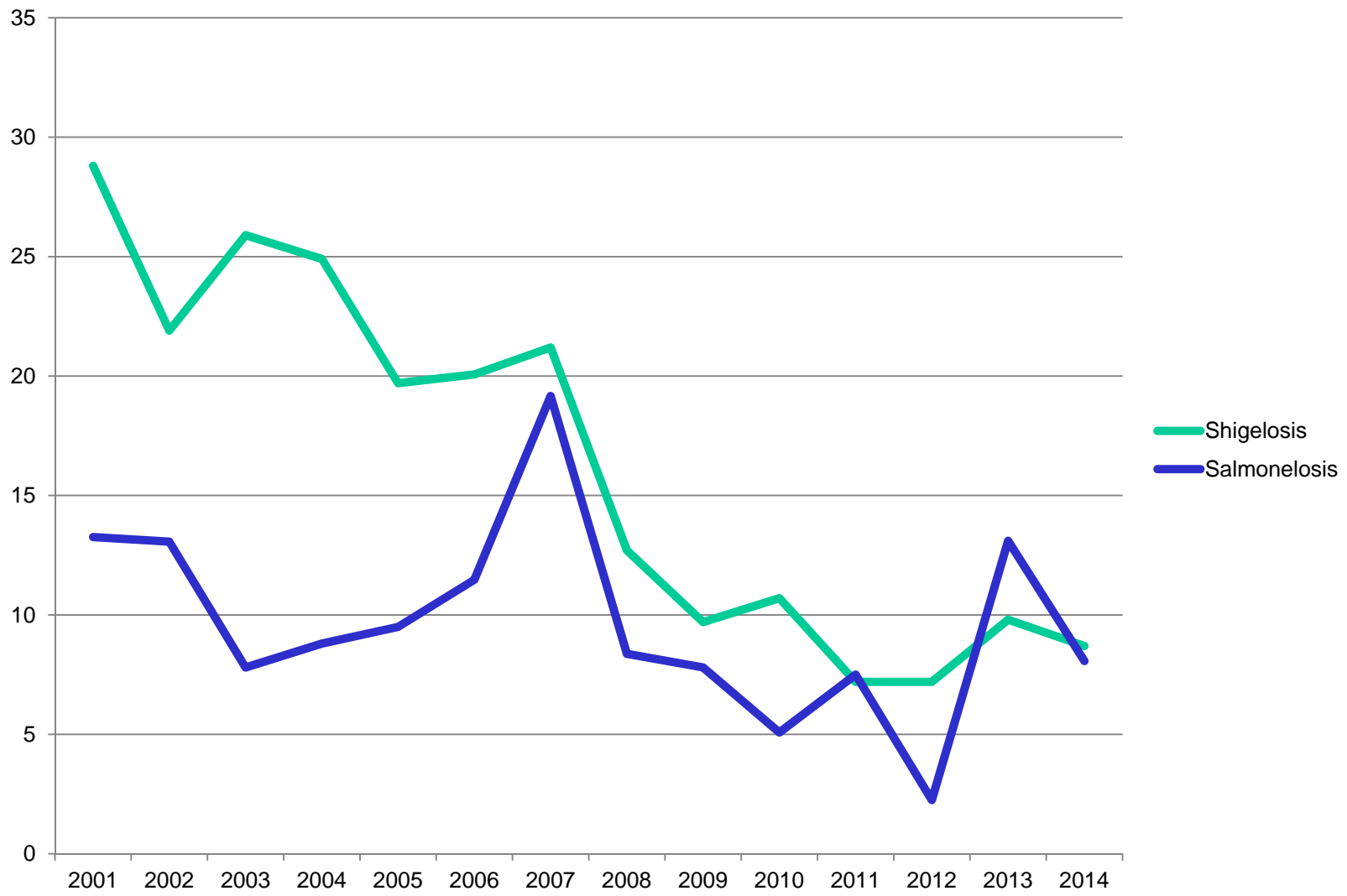




Diarrheal diseases

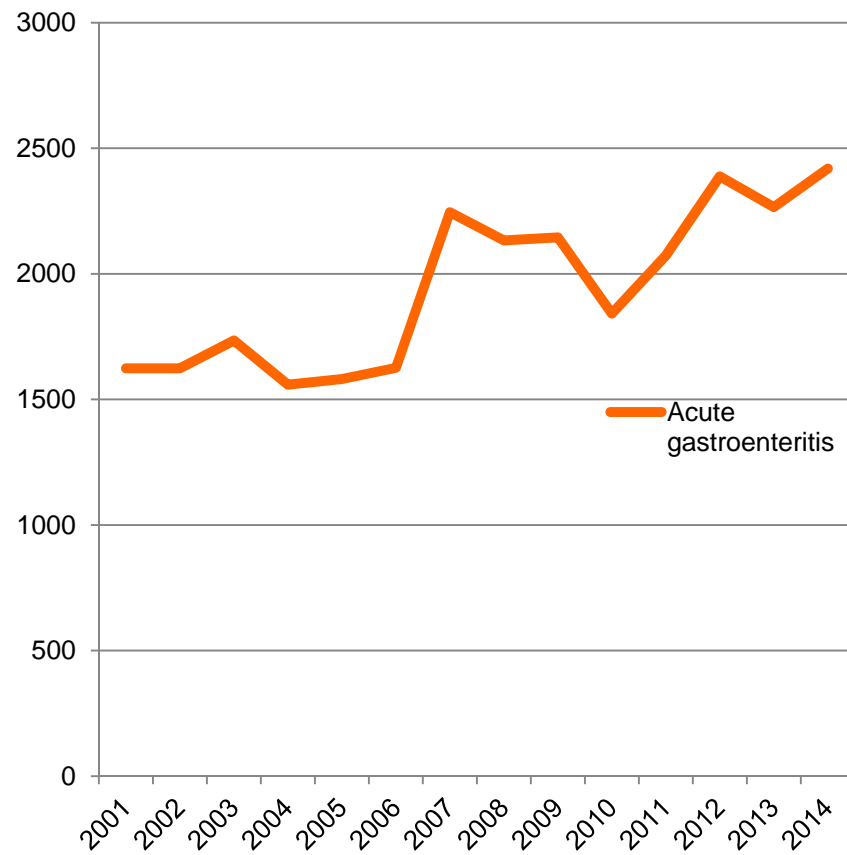
Incidence: cases/100.000 population



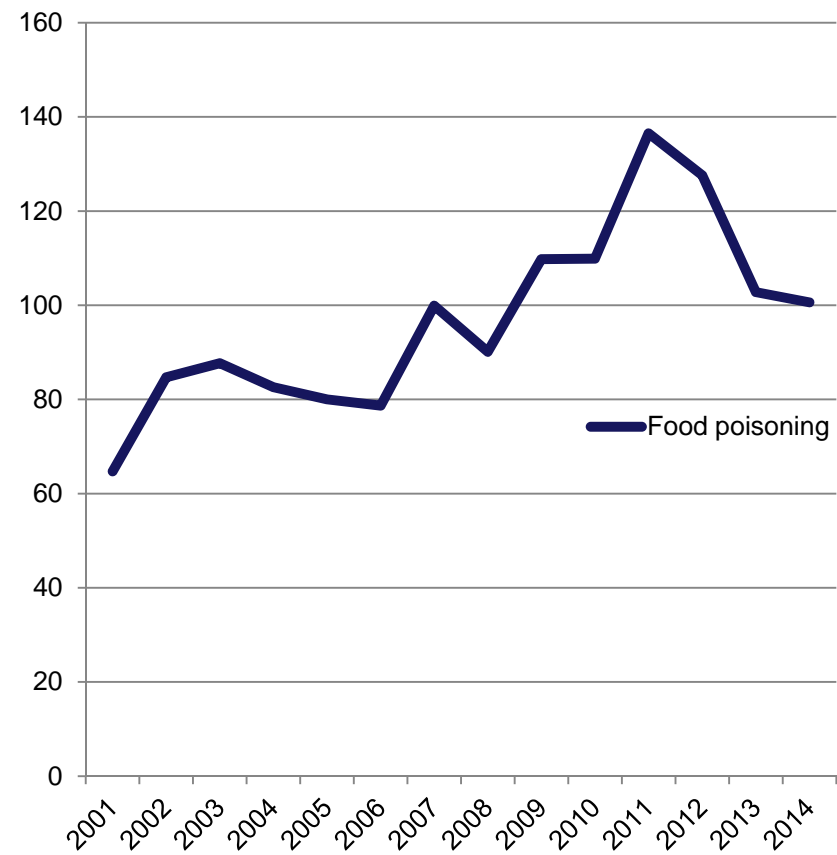


Food and waterborne diseases

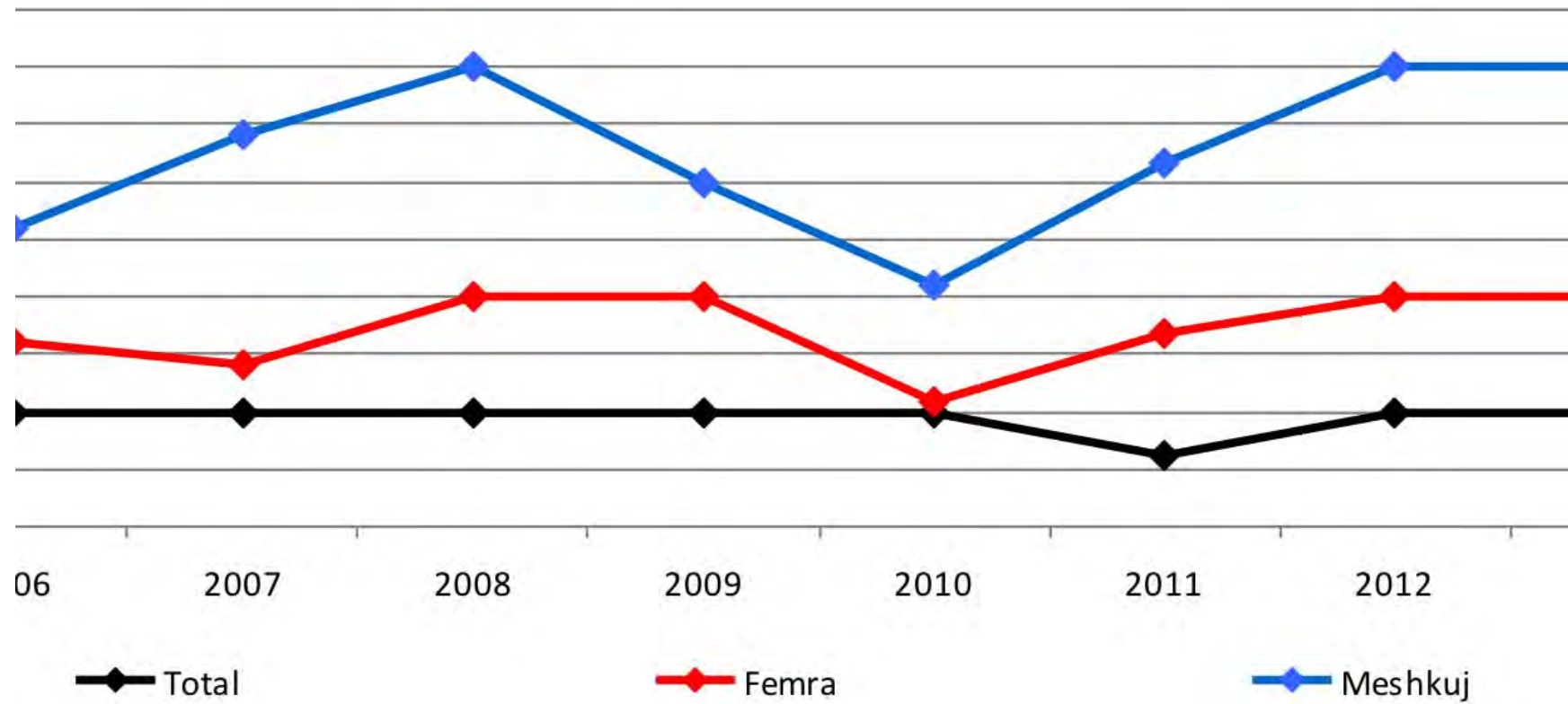
Acute gastroenteritis

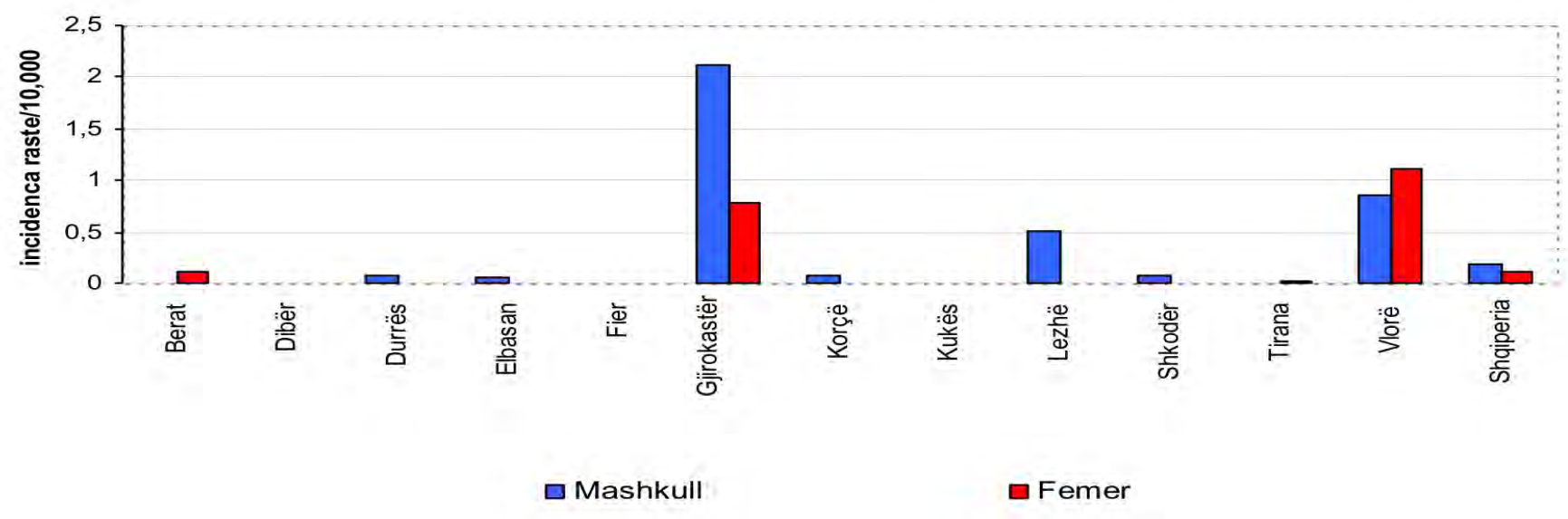
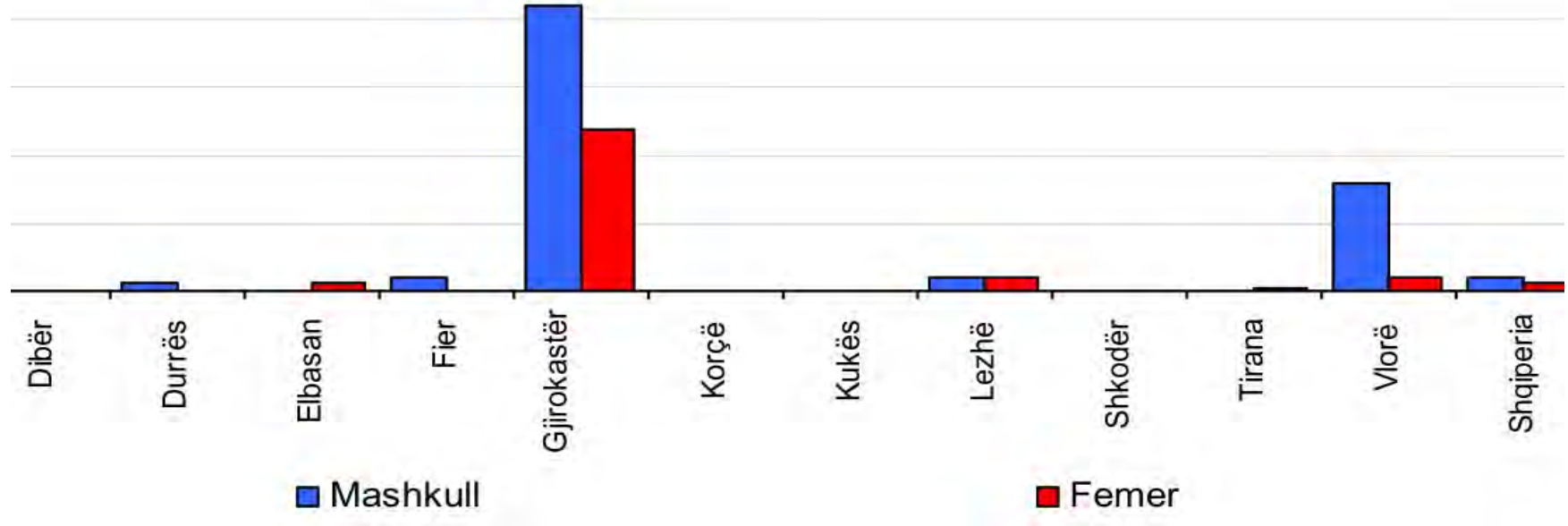


Food poisoning

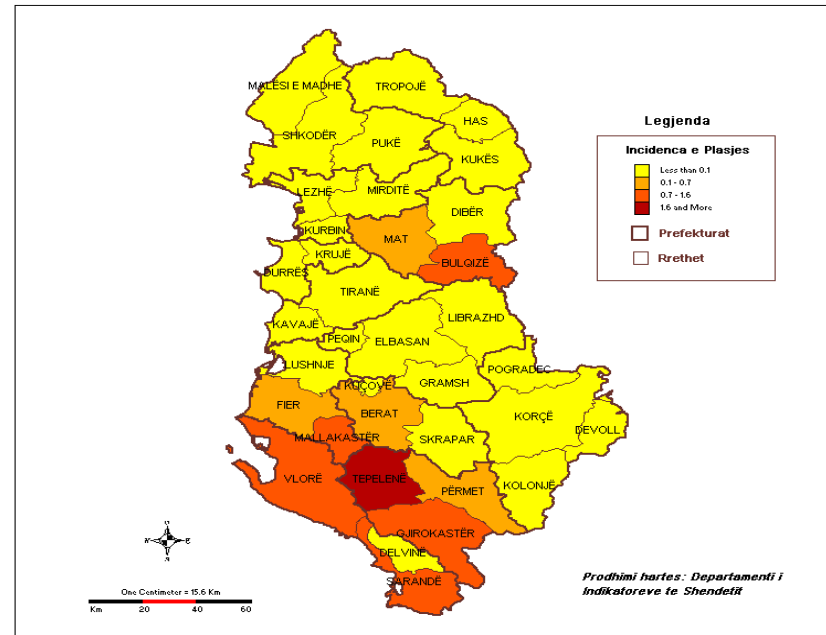
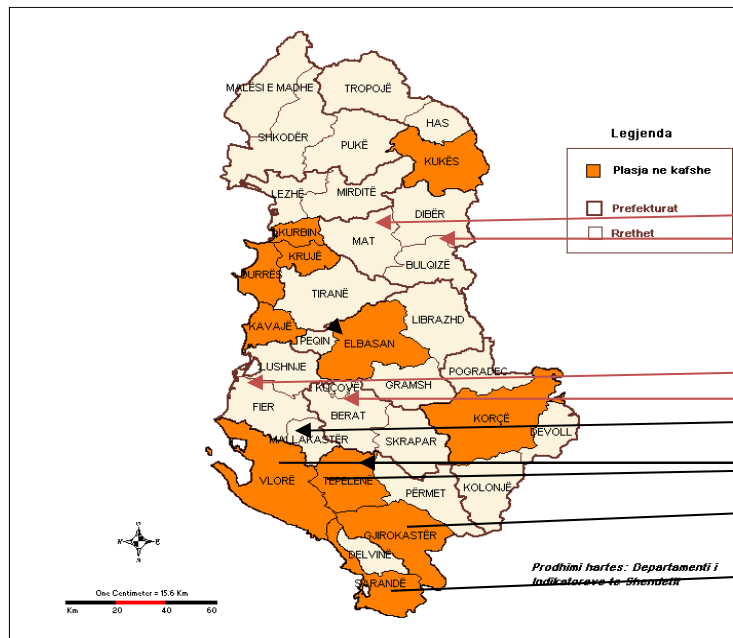


Anthrax 2006 -2013

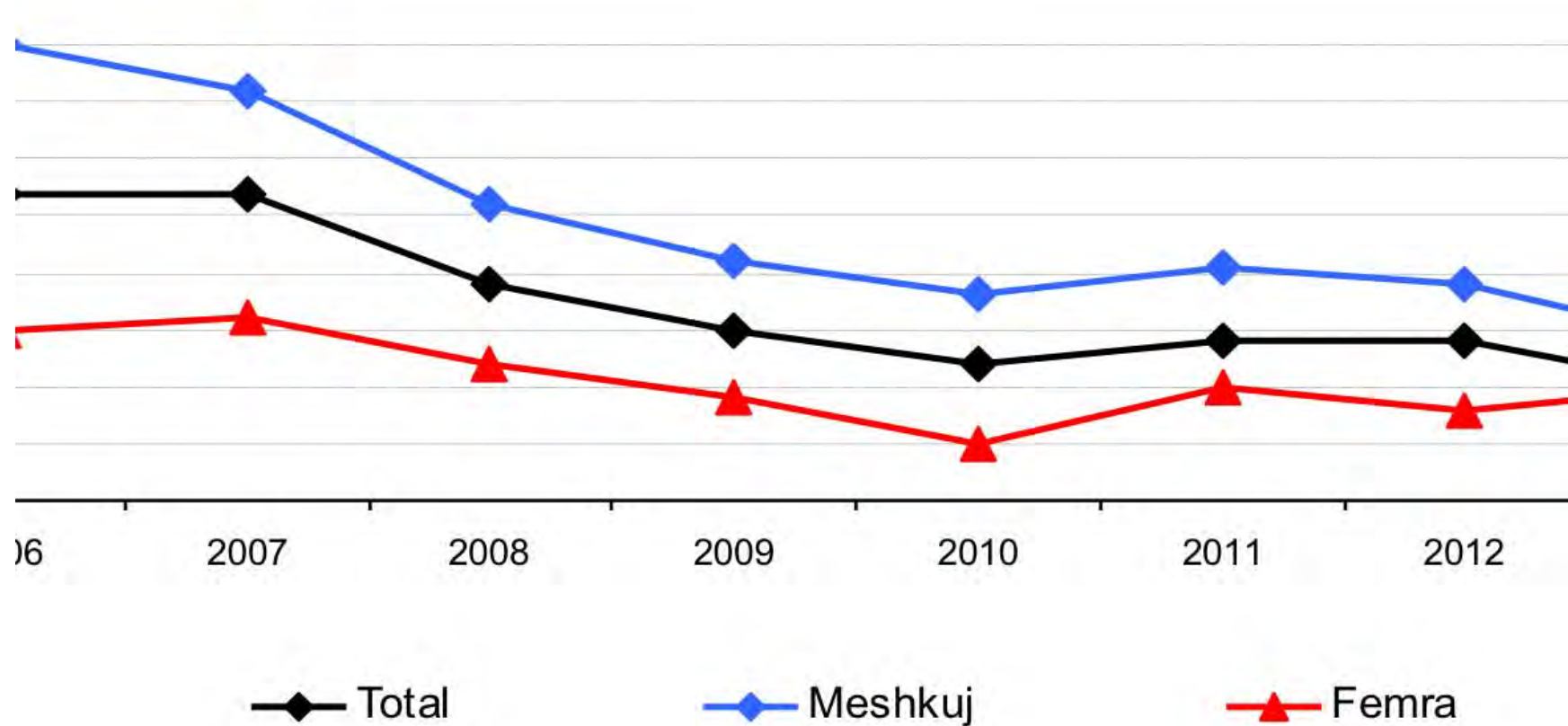


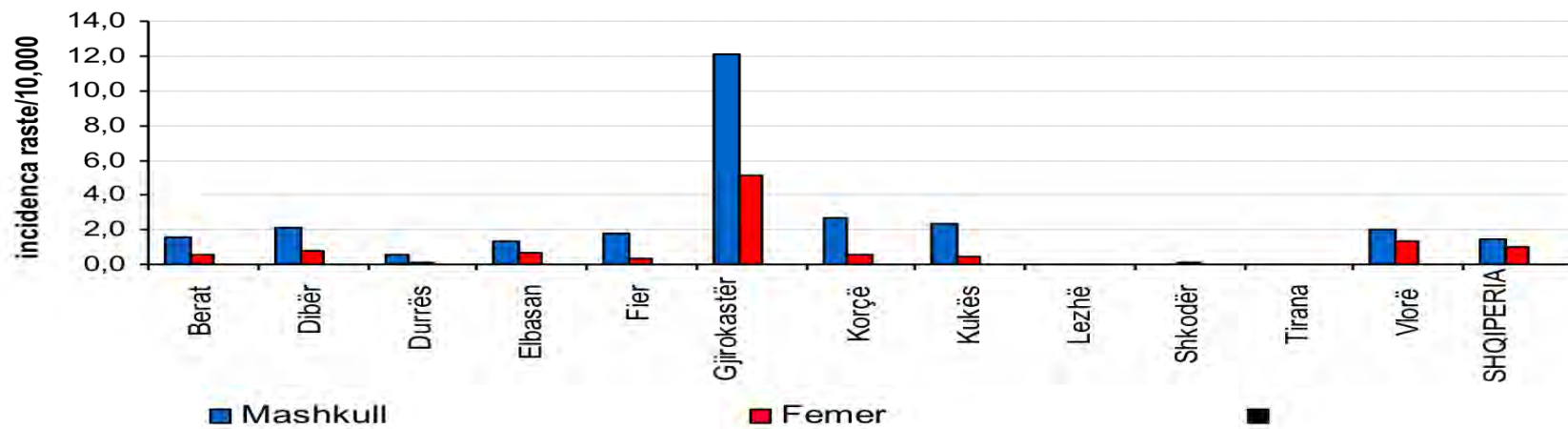
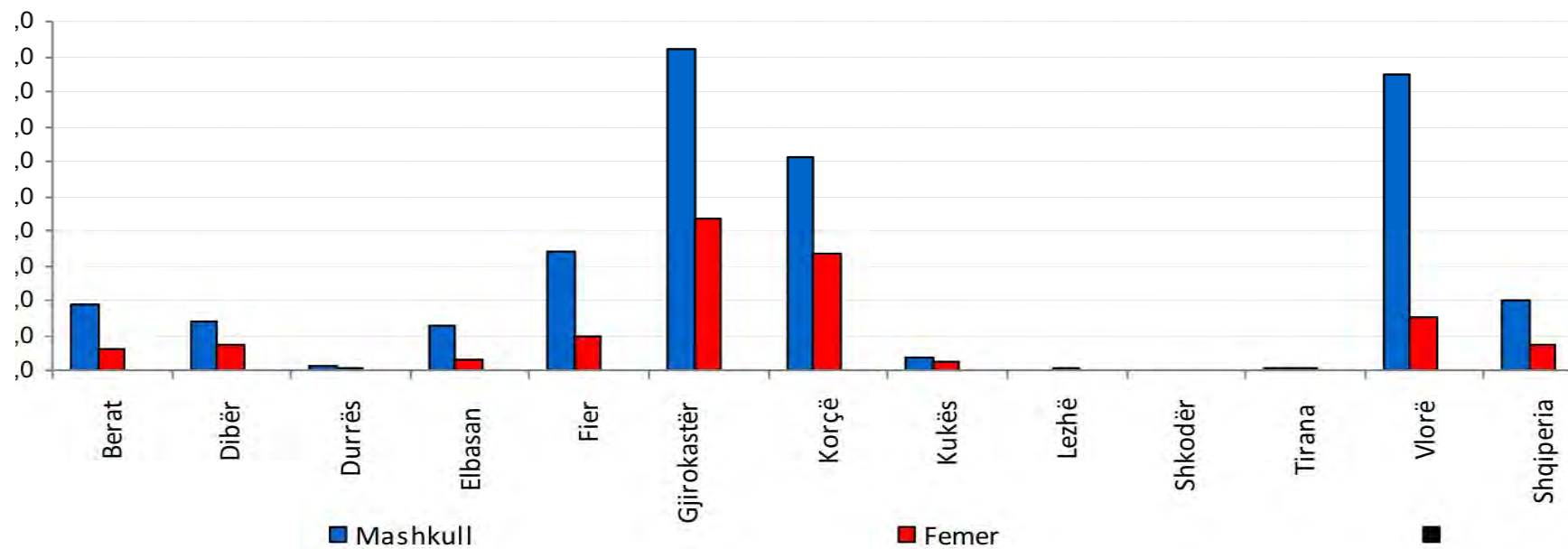


Distribution of Anthrax in man and animals



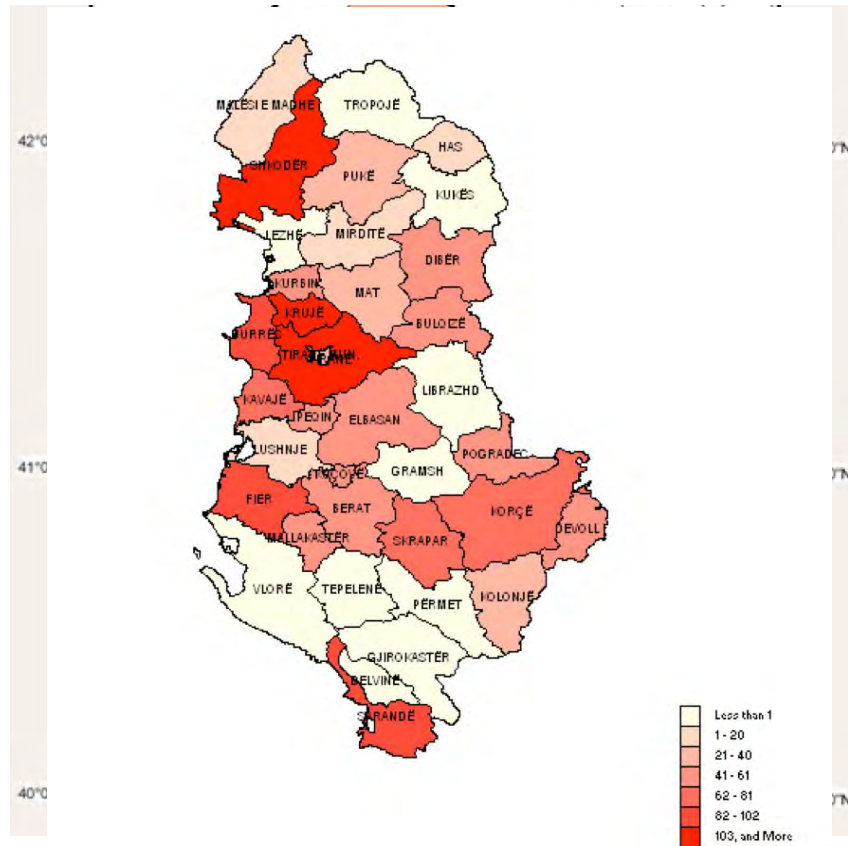
Brucellosis 2006 - 2013



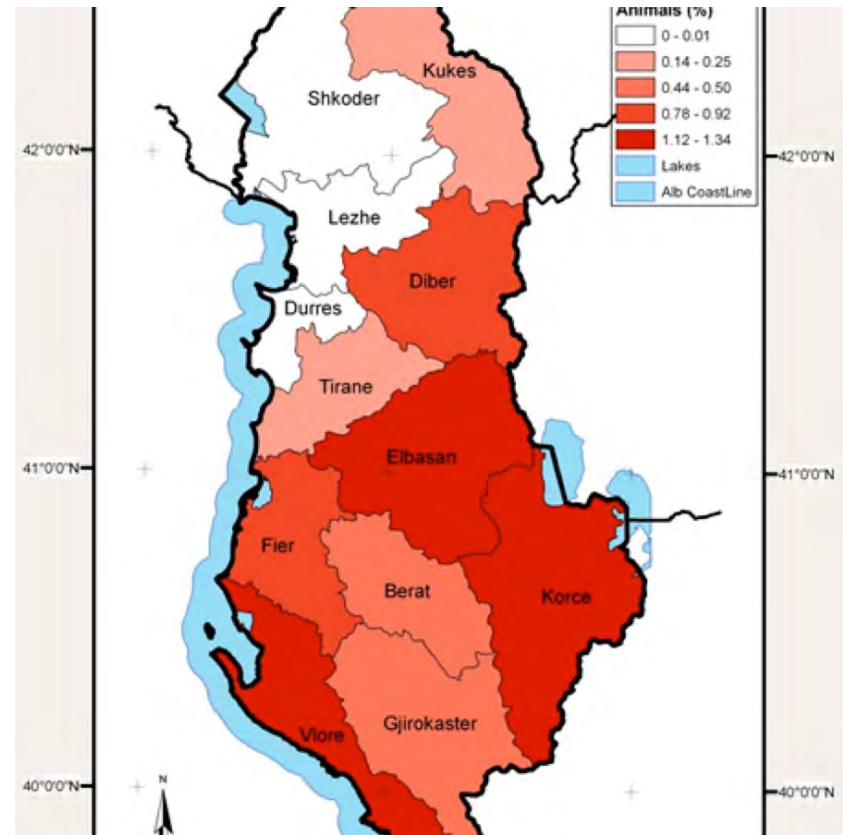


Brucellosis

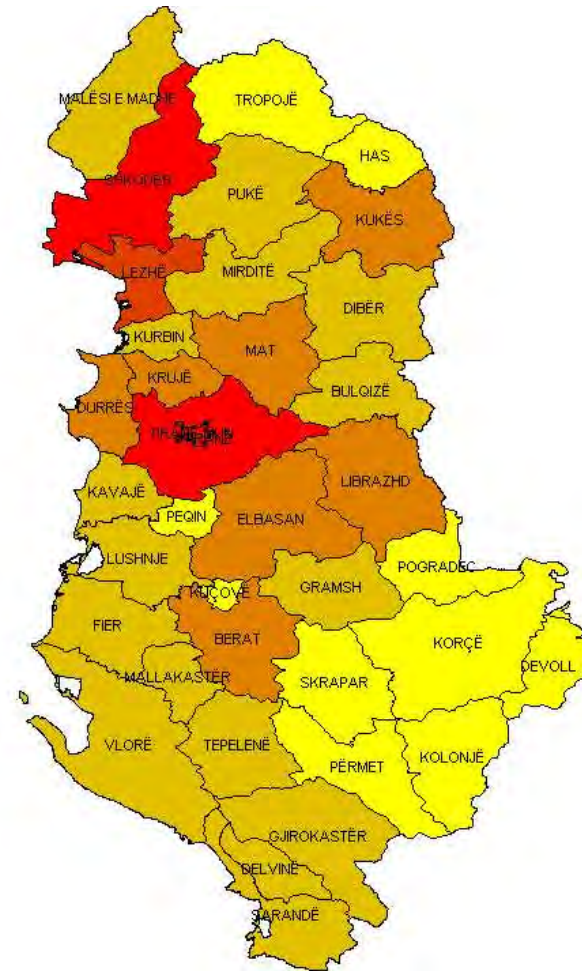
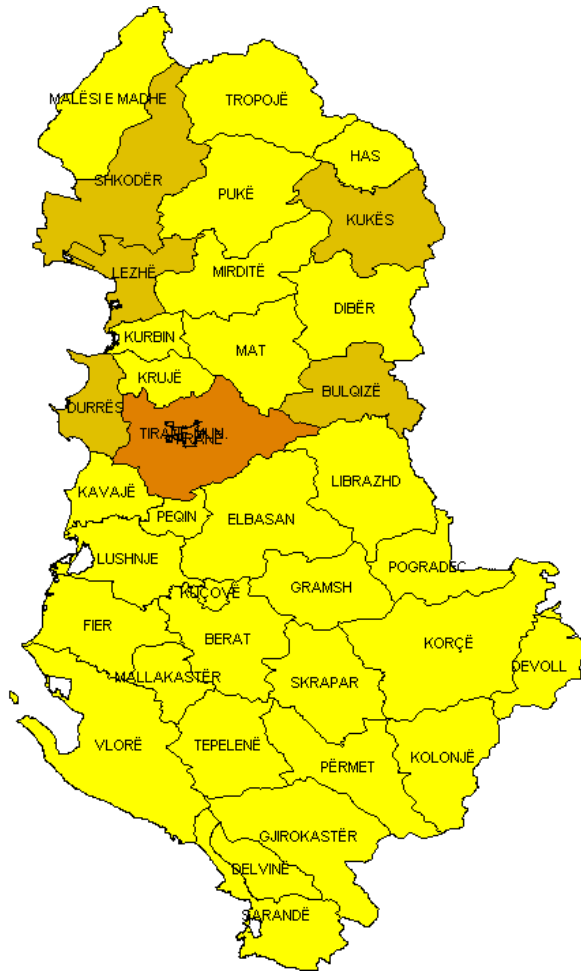
Brucellosis in humans



Brucellosis in animals

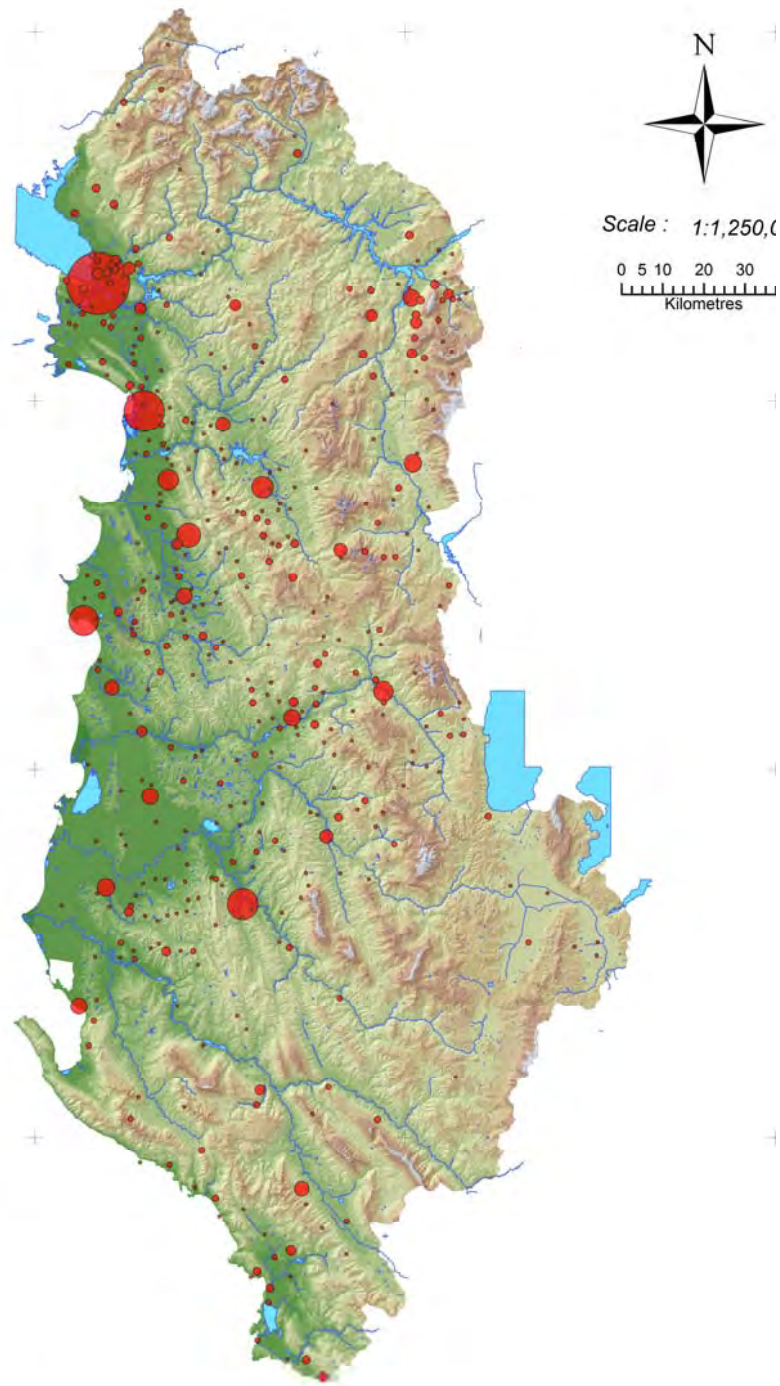


Key finding





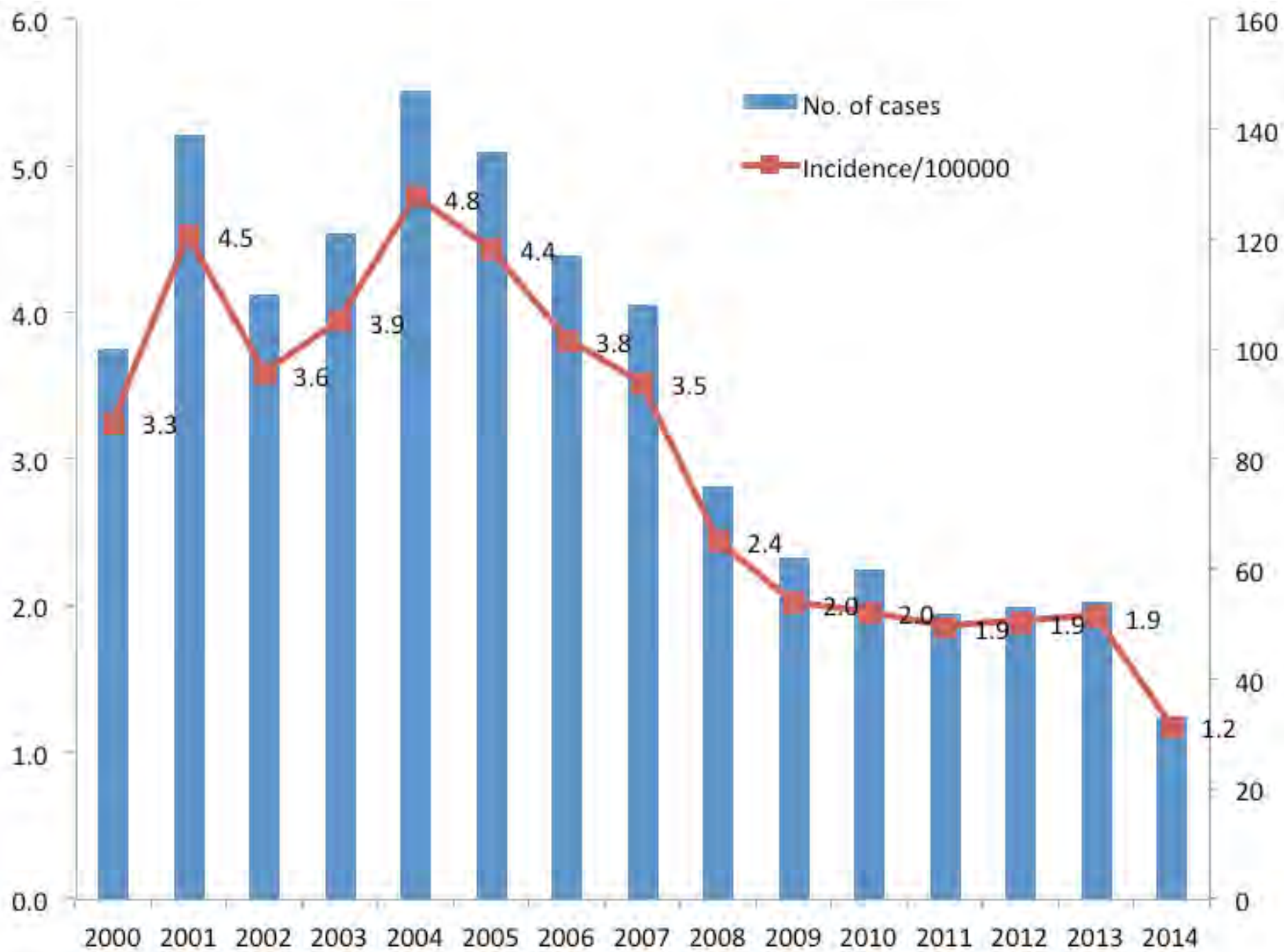
- Seropositive CanL Cases
- ▲ Resistance HumL Cases
- Resistance CanL Cases



Legend

**Cases
count**

- 1
- 5
- 10
- 50
- 100

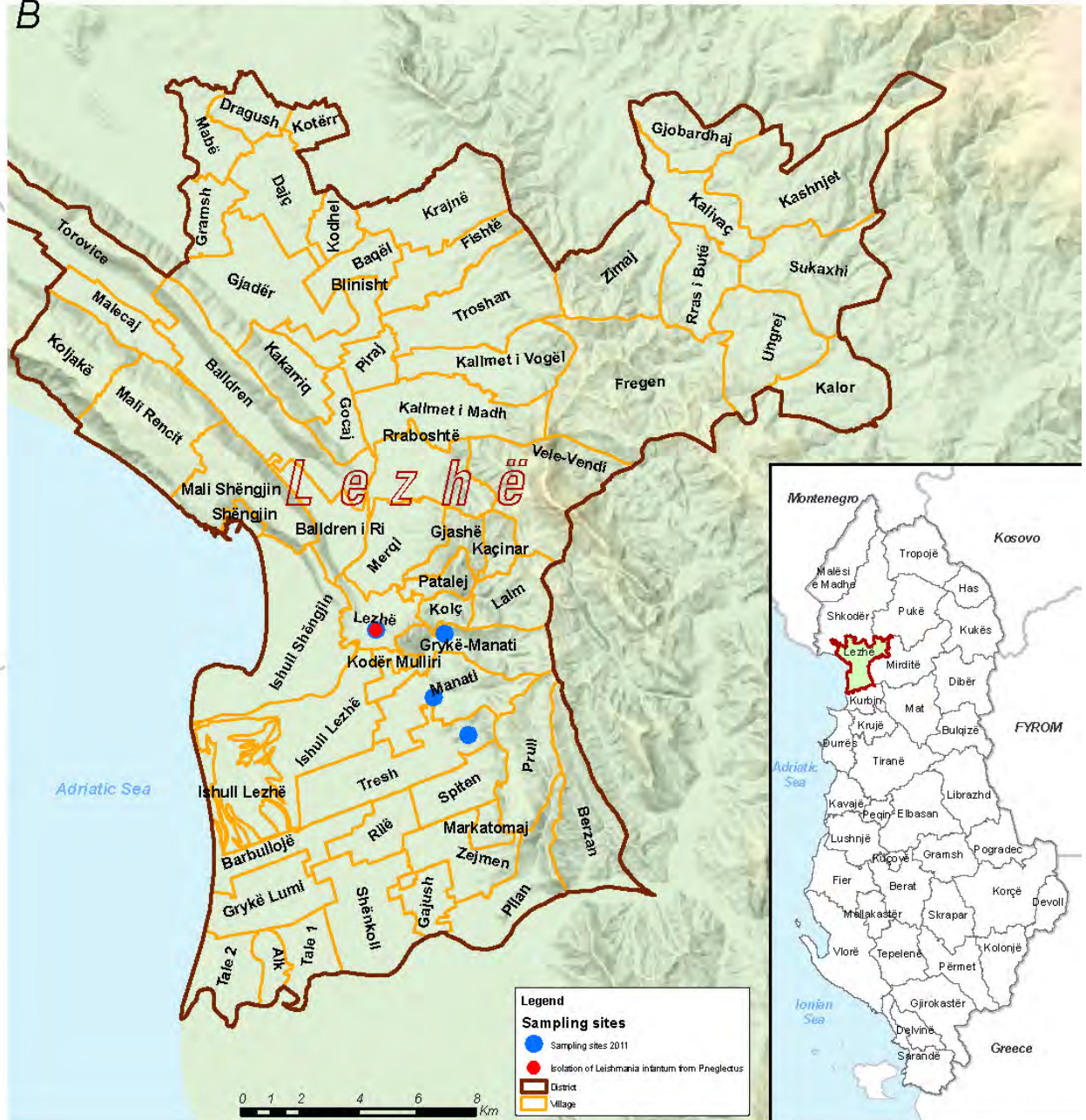


Entomological survey - spatial distribution of sand flies sampling sites

A



B

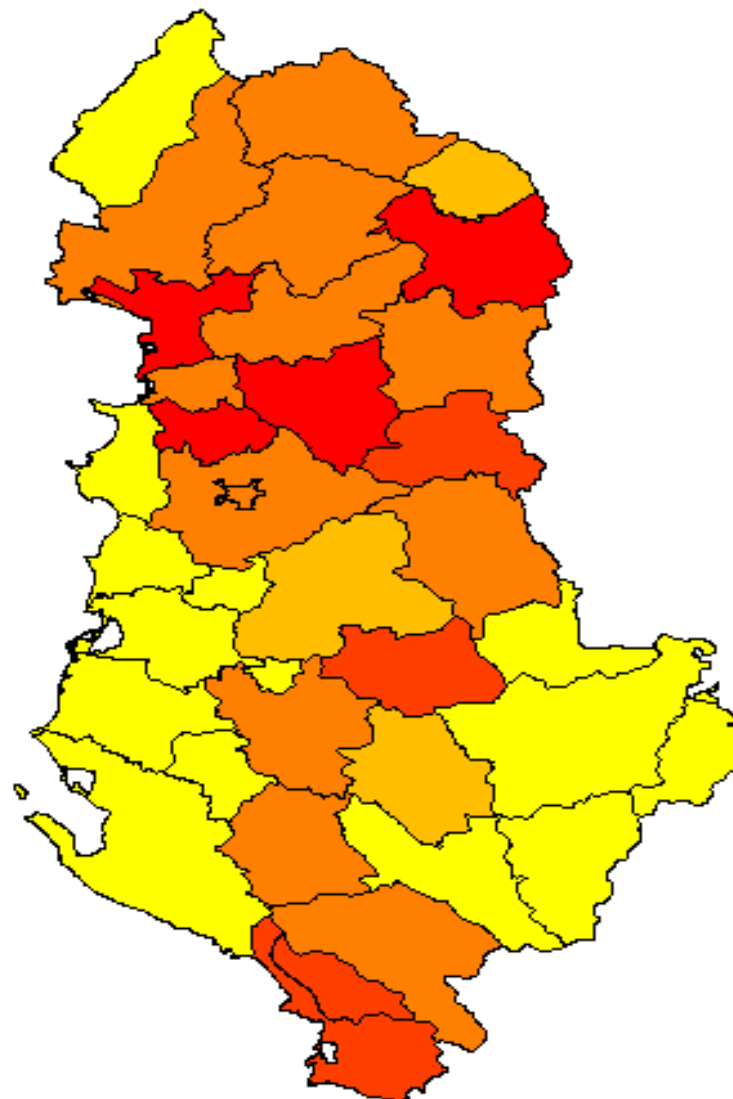
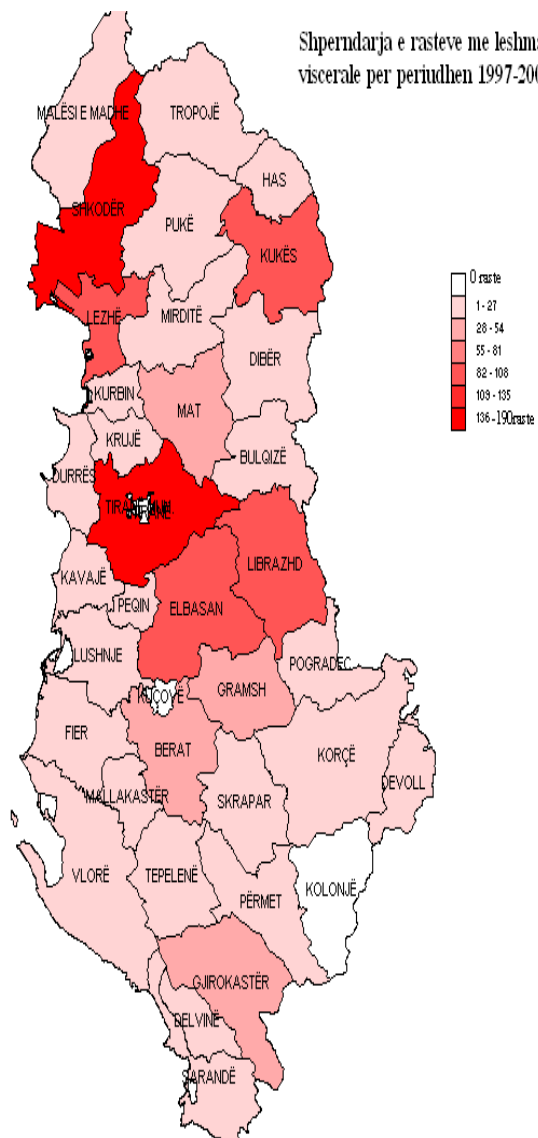


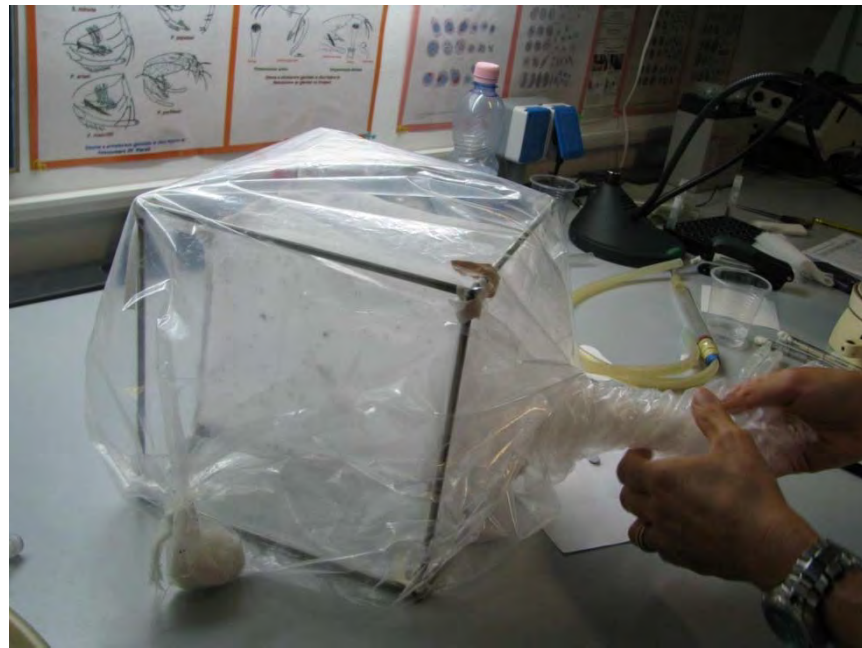
Spatial distribution of vectors and human leishmaniasis cases 2000-2013



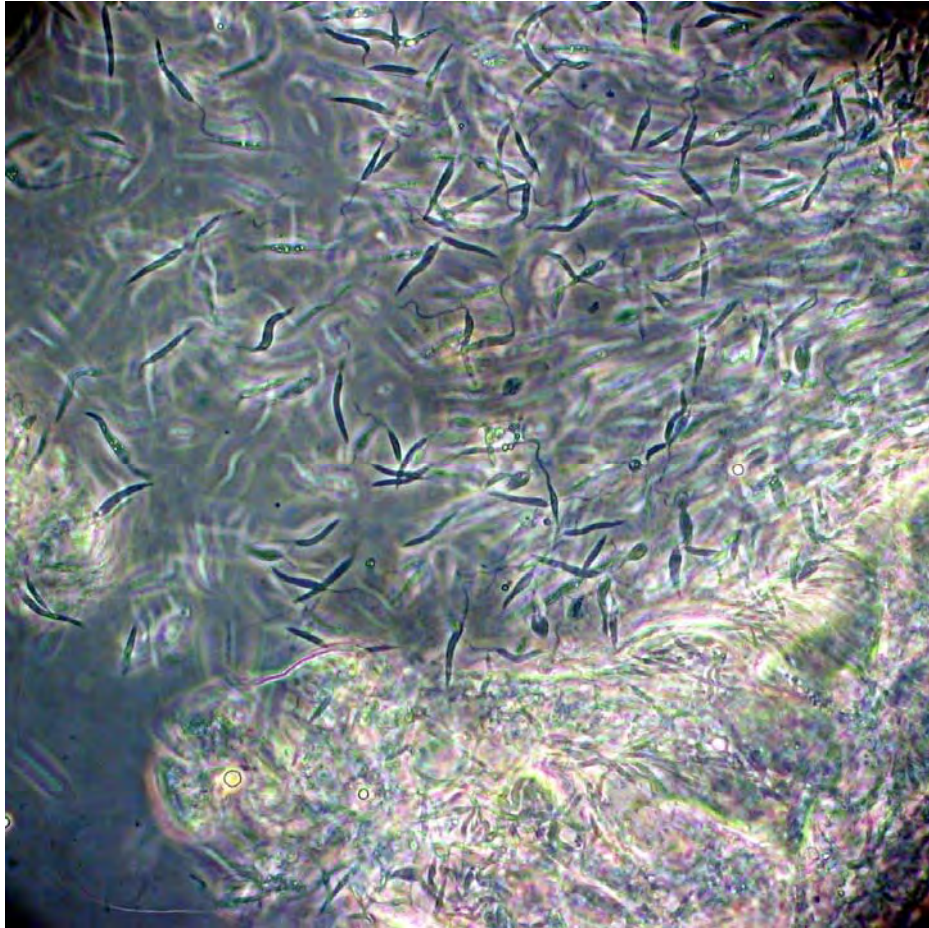
LEISHMANIASIS

Shpërndarja e rasteve me leishmanioze
viscerale per periudhen 1997-2008





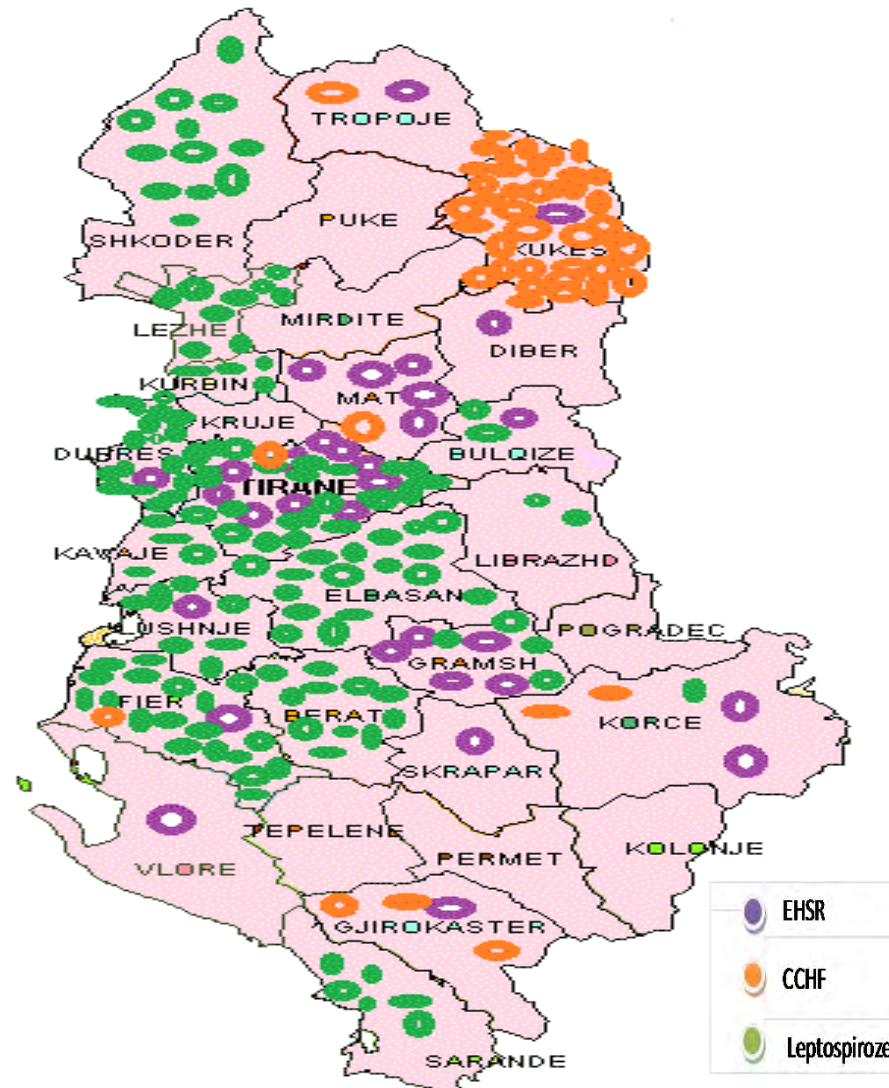
And Phlebotomes



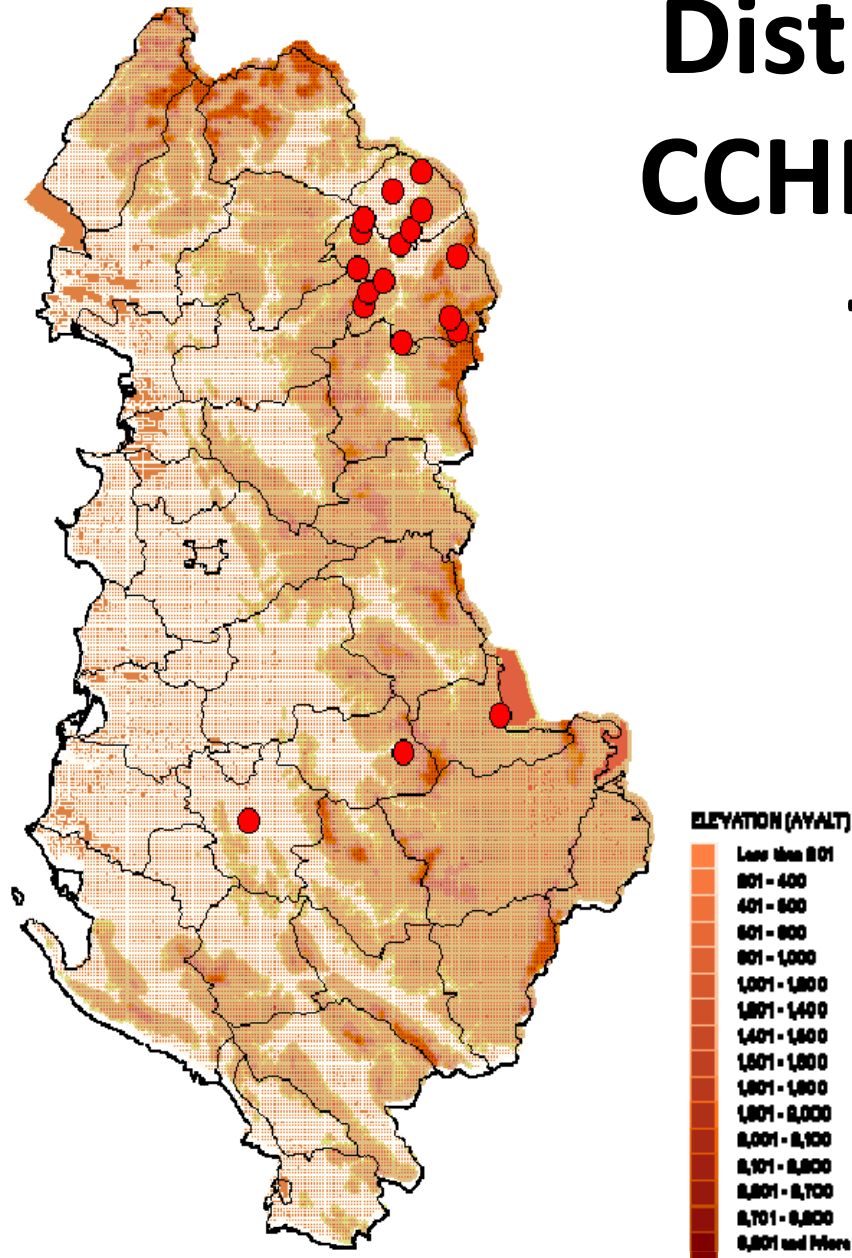
Identifying *P.neglectus*
as a vector of
Leishmaniasis in
Albania

***Leishmania infantum* present in
Phlebotomus neglectus, Lezha,
Septemeber 2011**

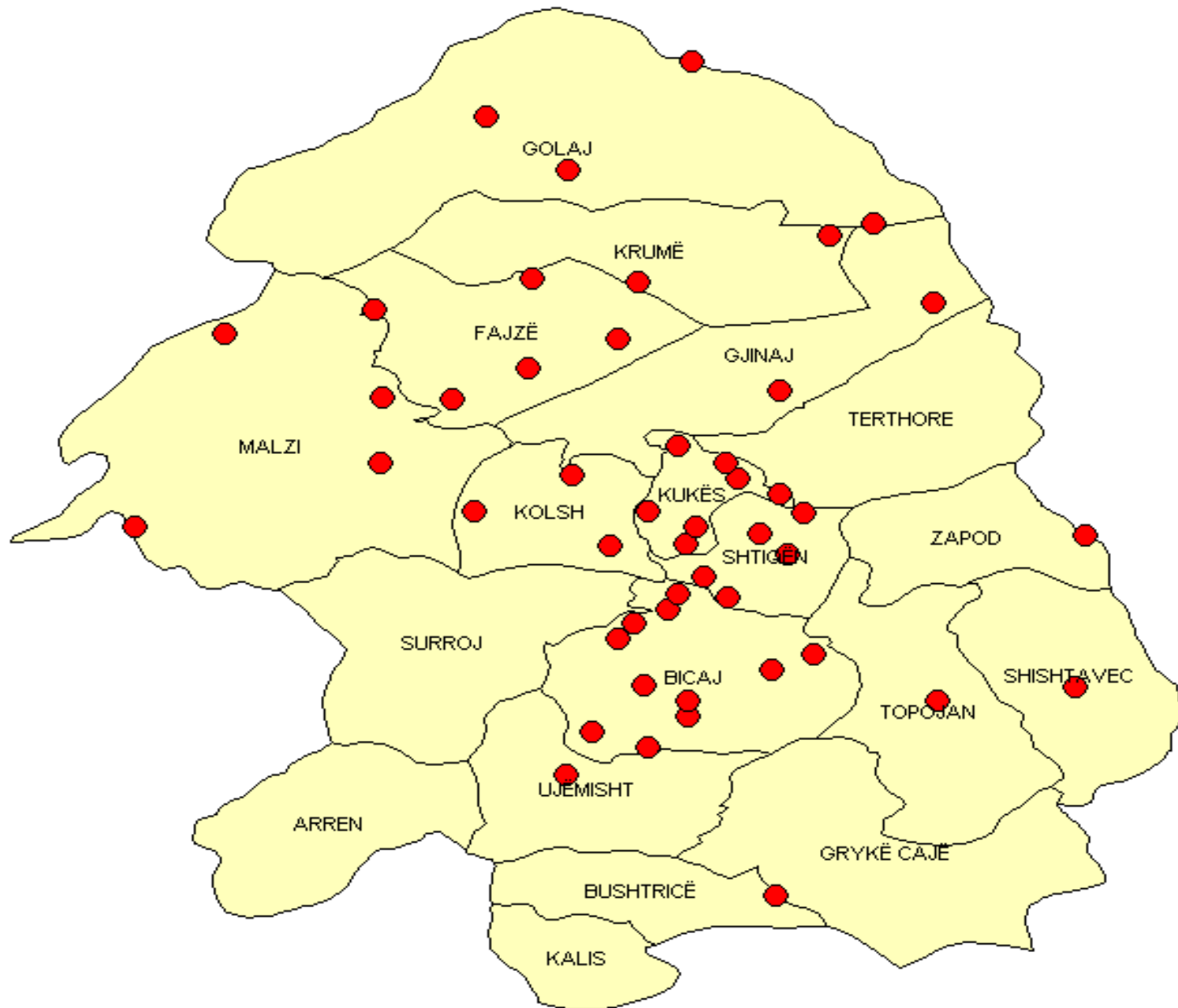
Hemorrhagic Fever Syndrome



Distribution of CCHF cases and forests

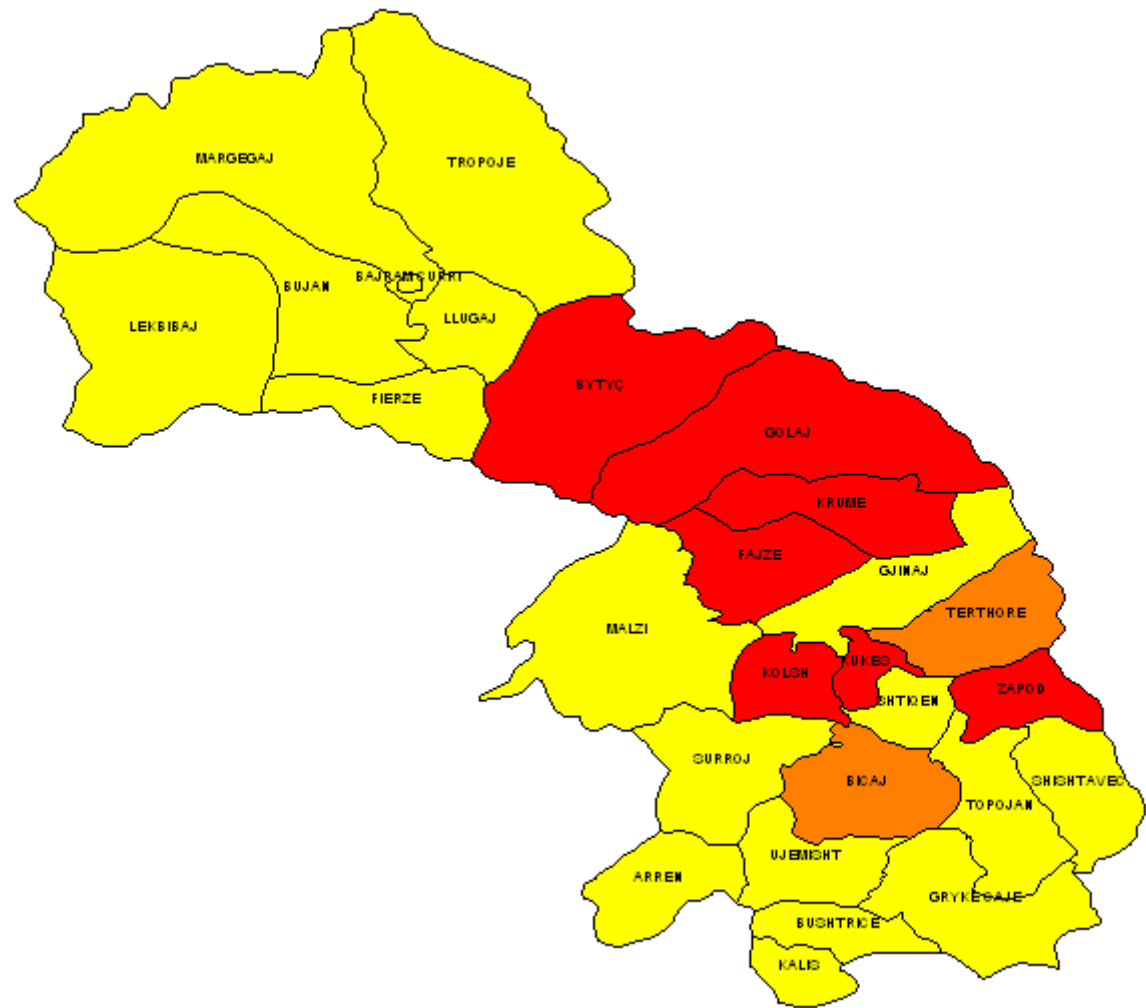






CCHF Seroprevalence study 2013



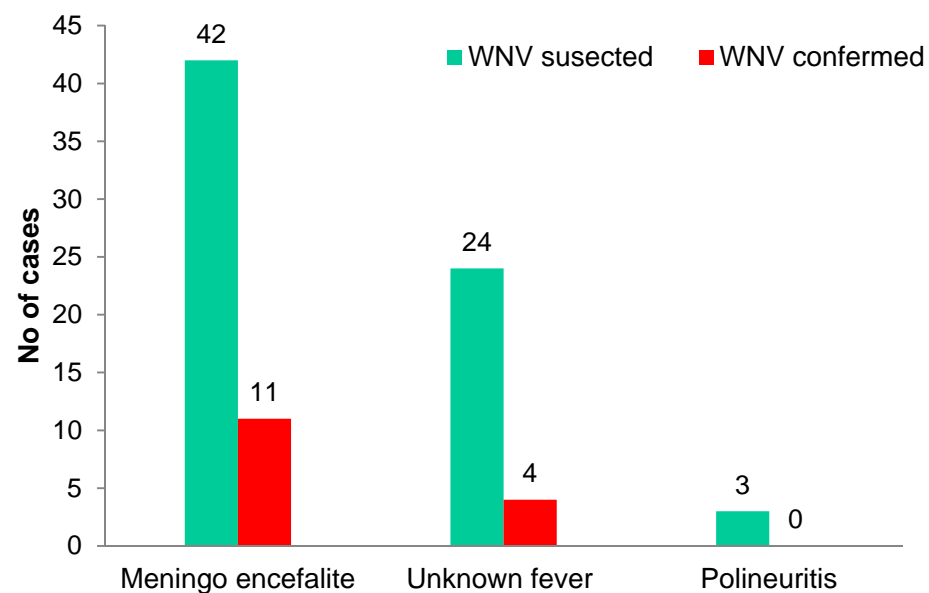


CHASSING TICKS



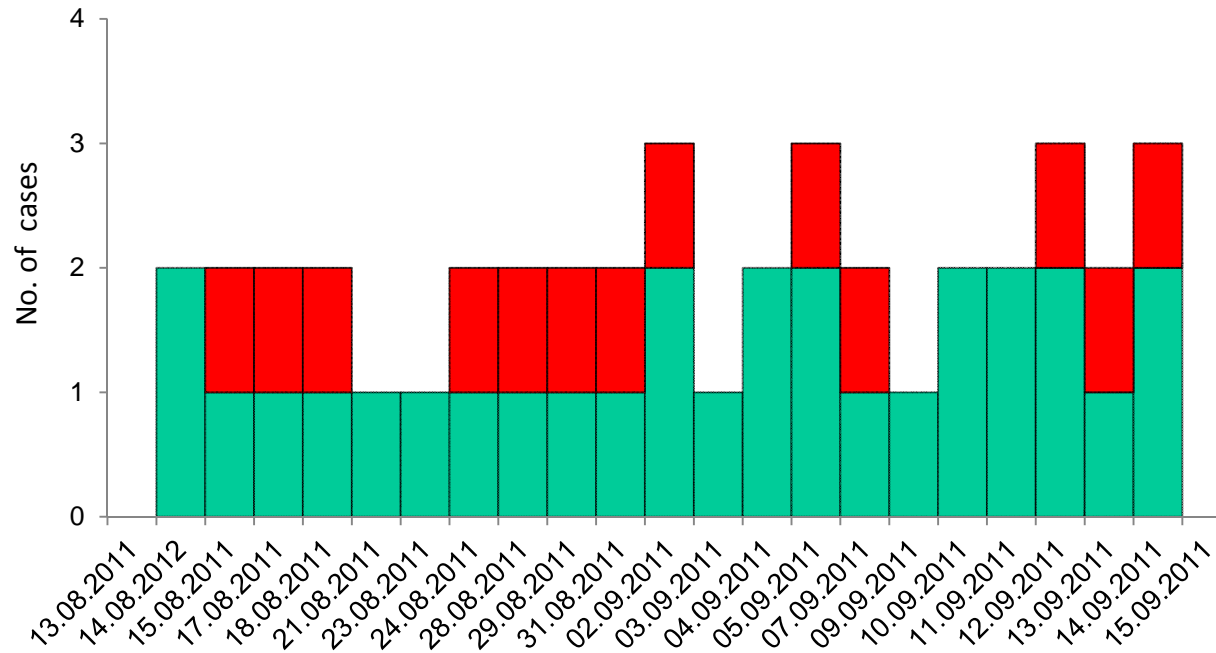
West Nile Virus in Albania

- First human cases – Meningoencephalitis – August 2011
- Positive cases were between 22- 78 years old patients

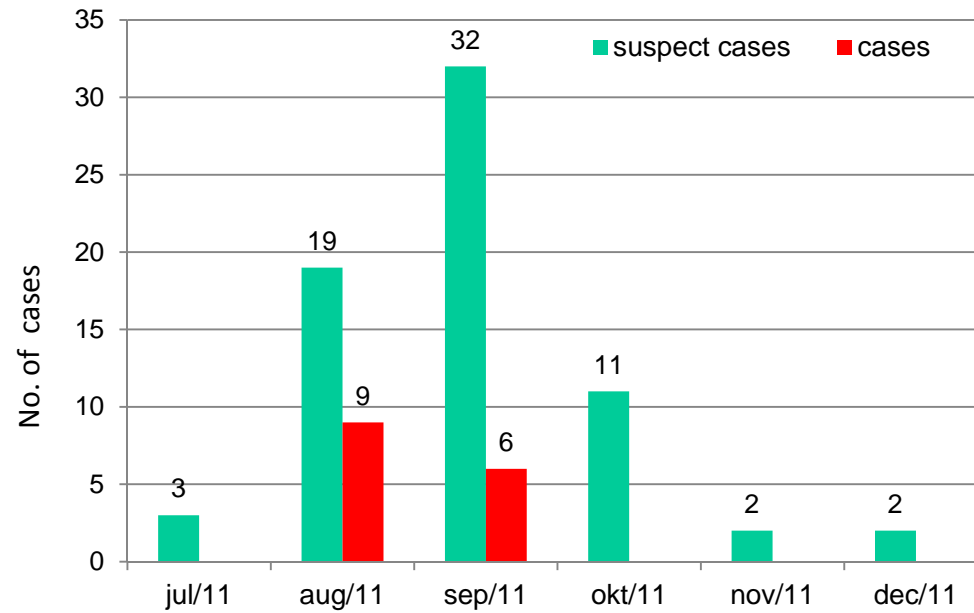


	WNV suseded	WNV confermed
Encefalitis and Aseptic meningitis	42	11
Unknown fever	24	4
Polineuritis	3	0

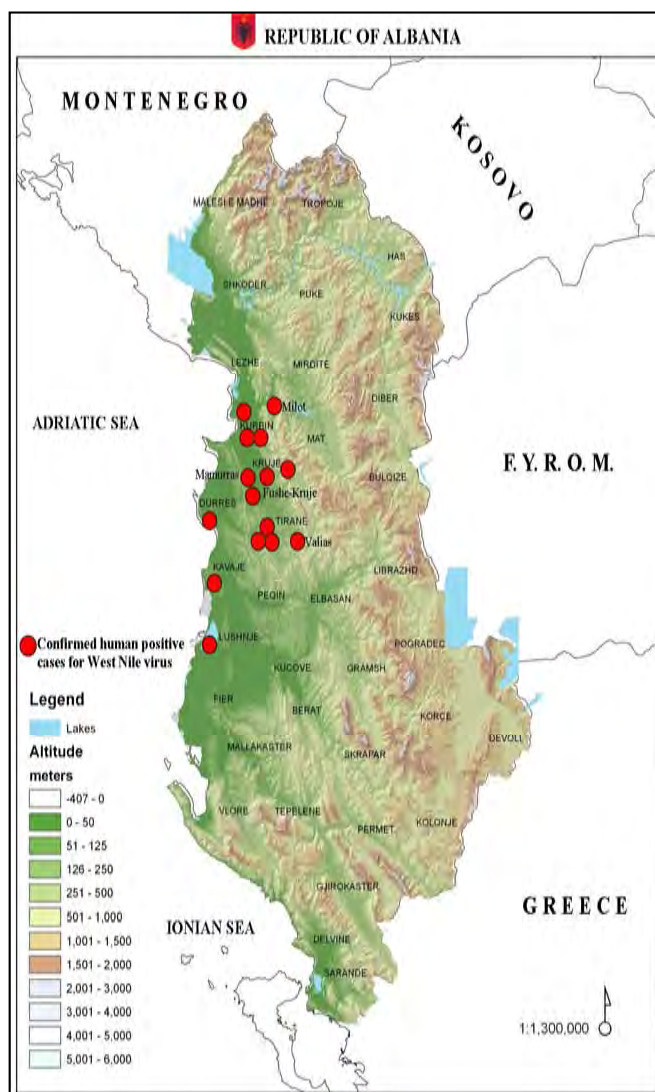
Epidemic curve



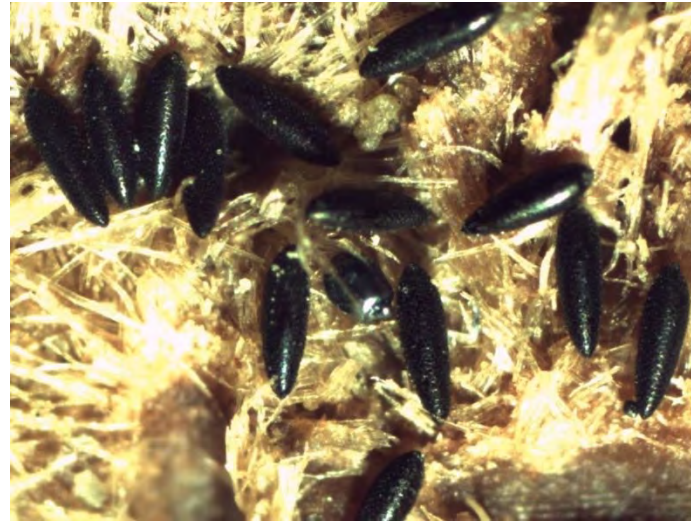
Distribution of suspected and confirmed cases of WNV by month during 2011



Geographic distribution of confirmed human positive cases of West Nile Virus during 2011, in Albania.



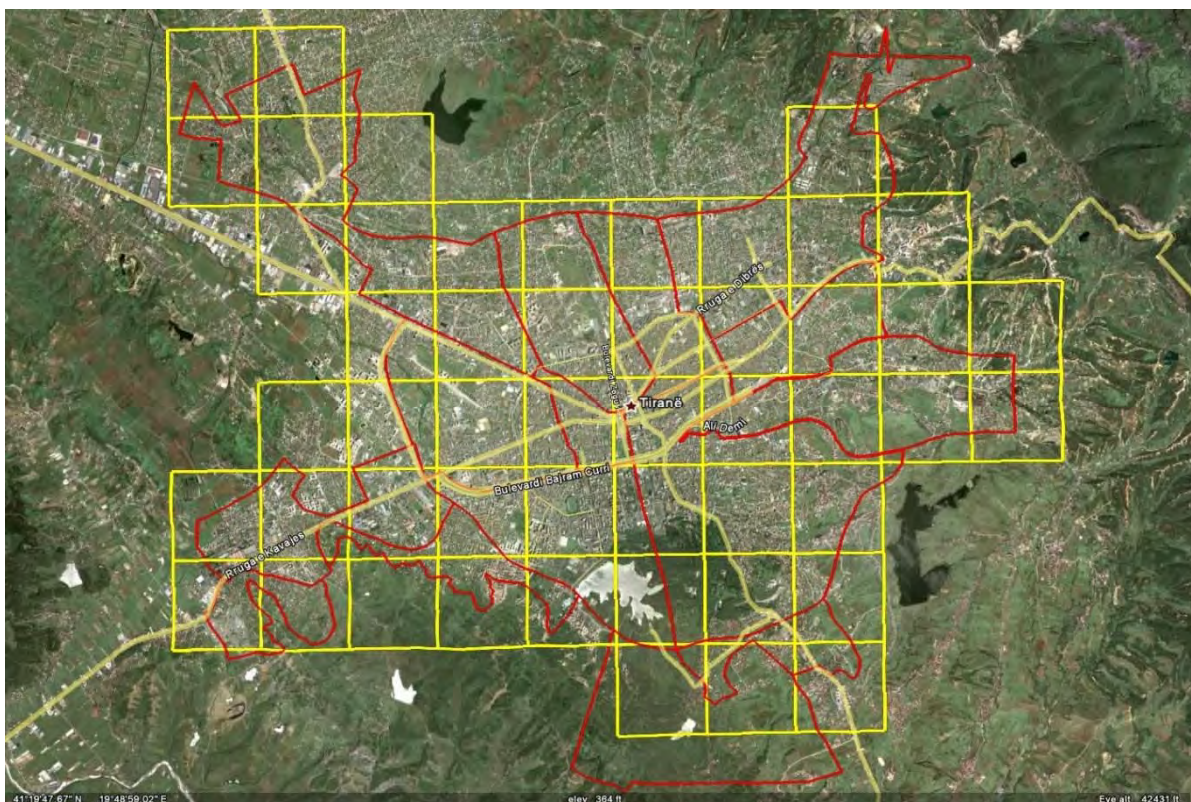
Human cases were distributed in the coastal and central part of Albania, (*Lac, Kruje, Mamurras, Lushnje, Durres, Tirane, Kavaje*)





Risk assessment for West Nile Fever

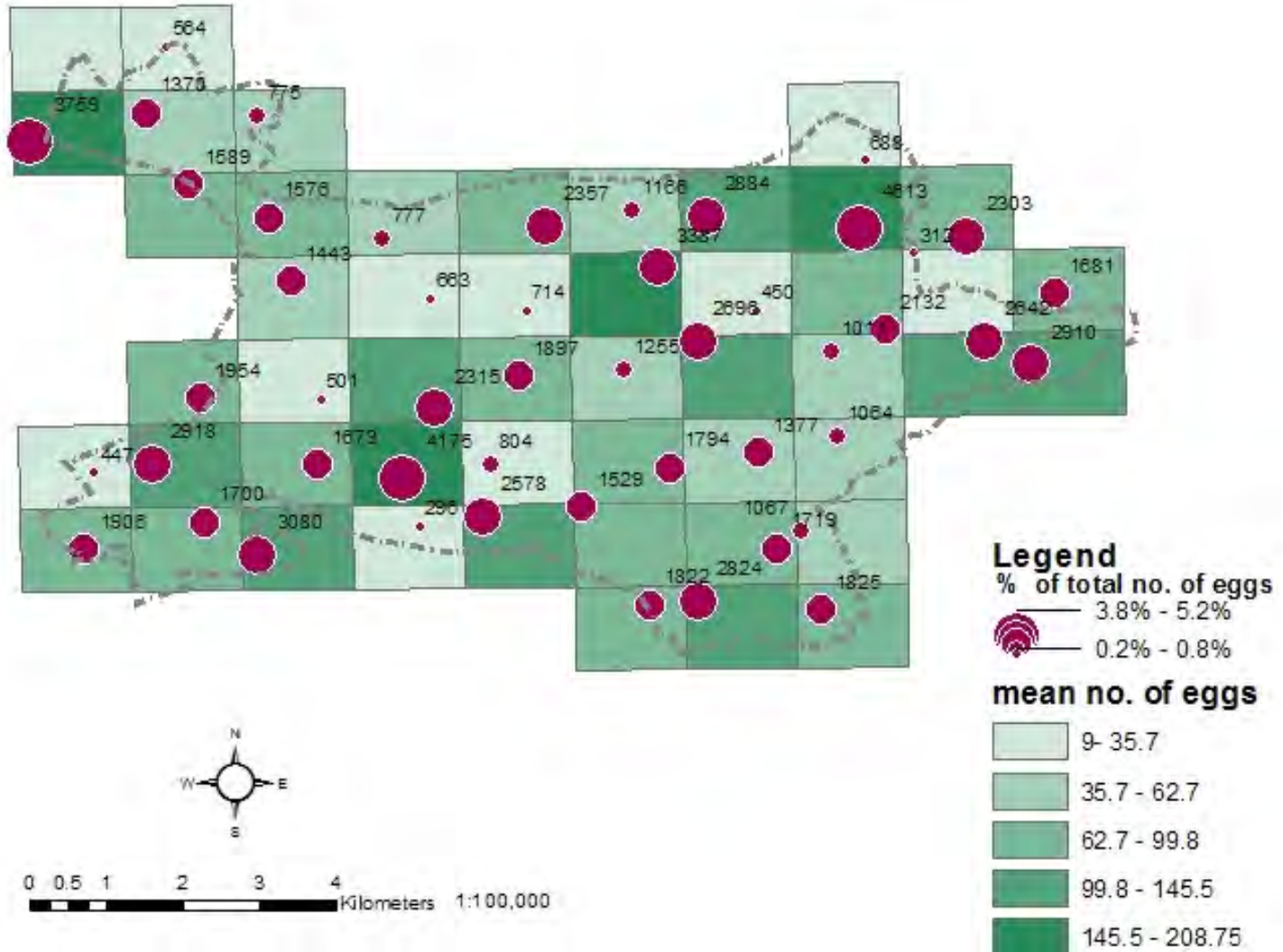
AEDES ALBOPICTUS SURVEILLANCE IN TIRANA

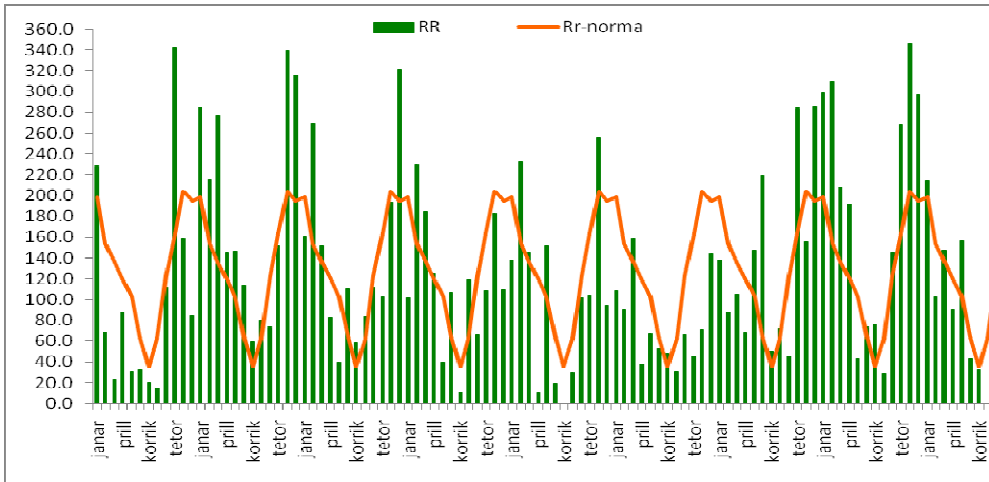
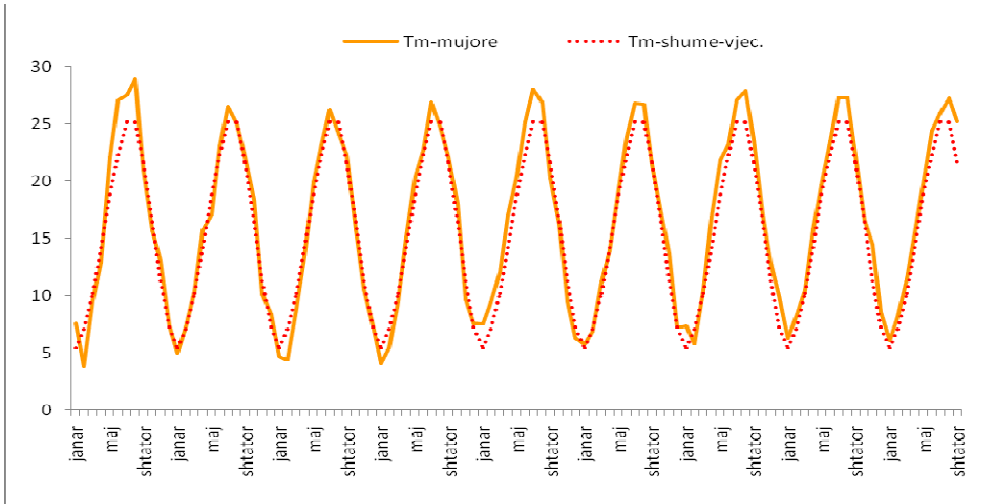


50 stacione ne zona urbane dhe sub urbane

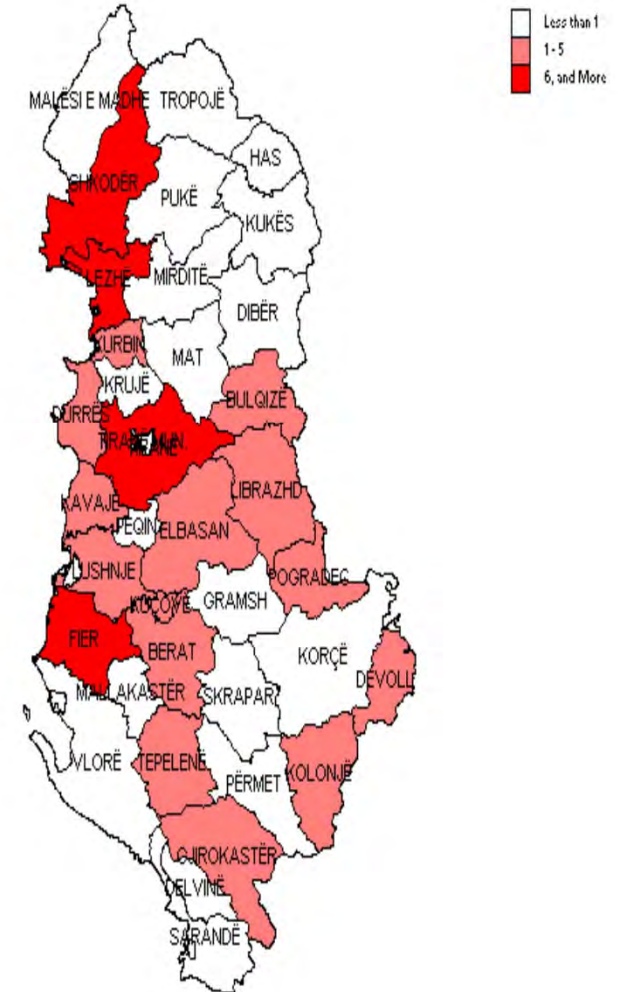
180

Presence of *Ae albobictus* eggs in Tirana

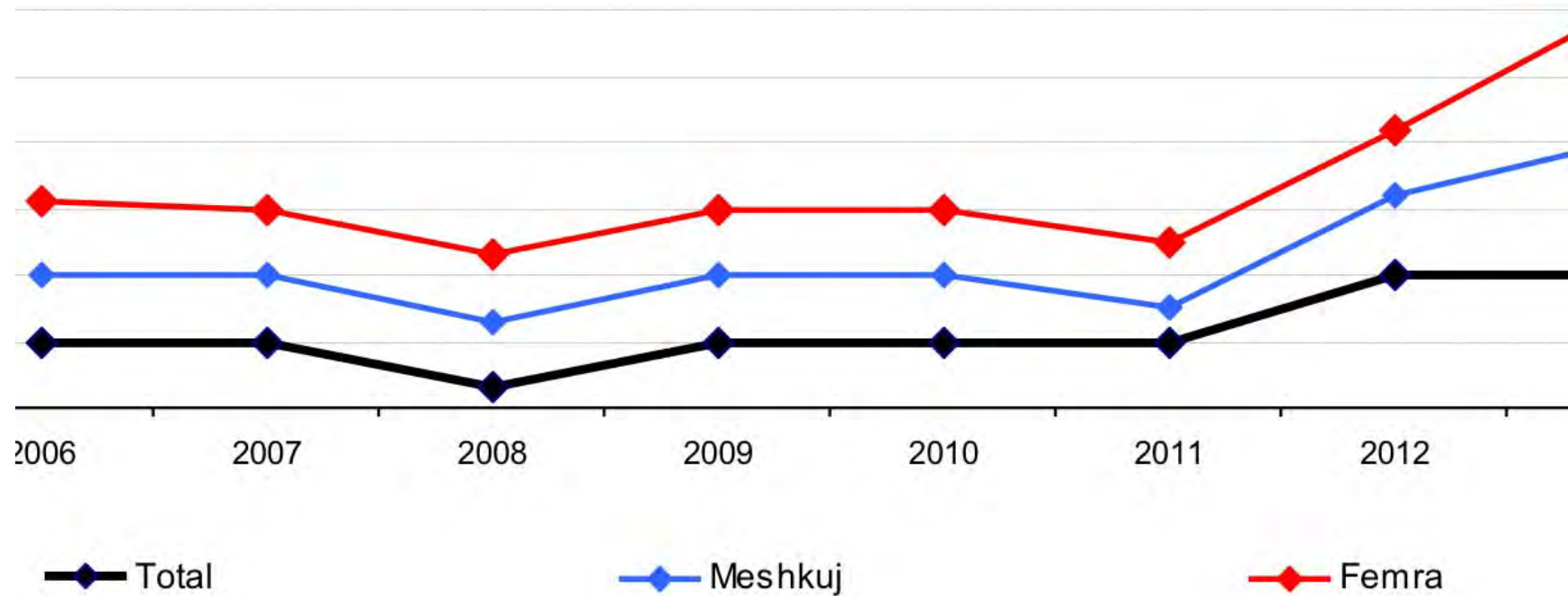


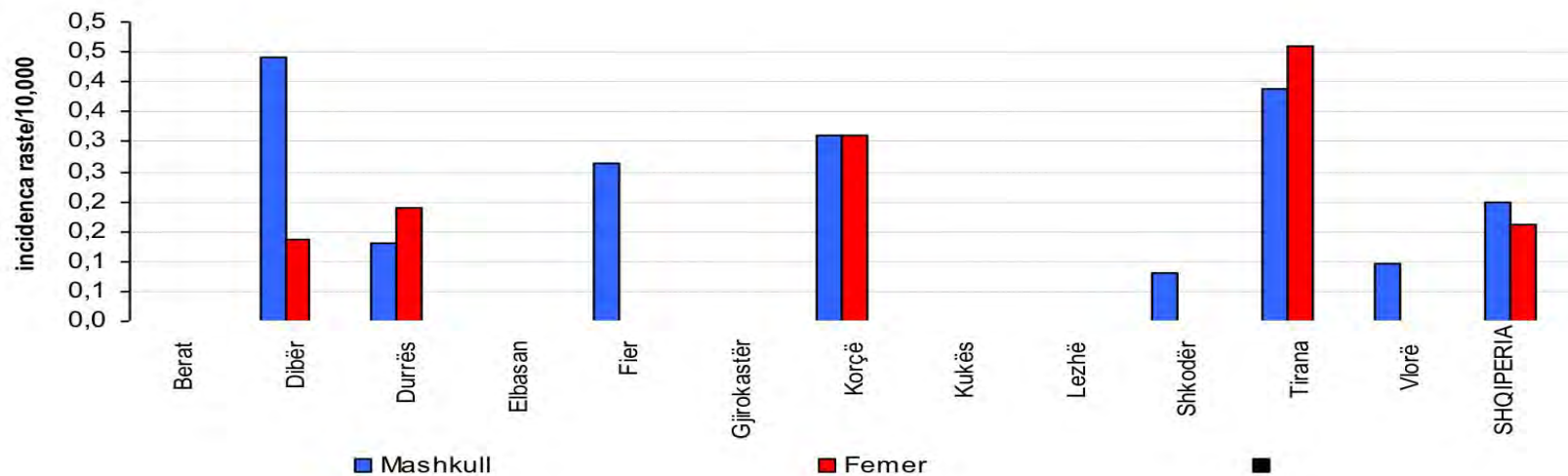
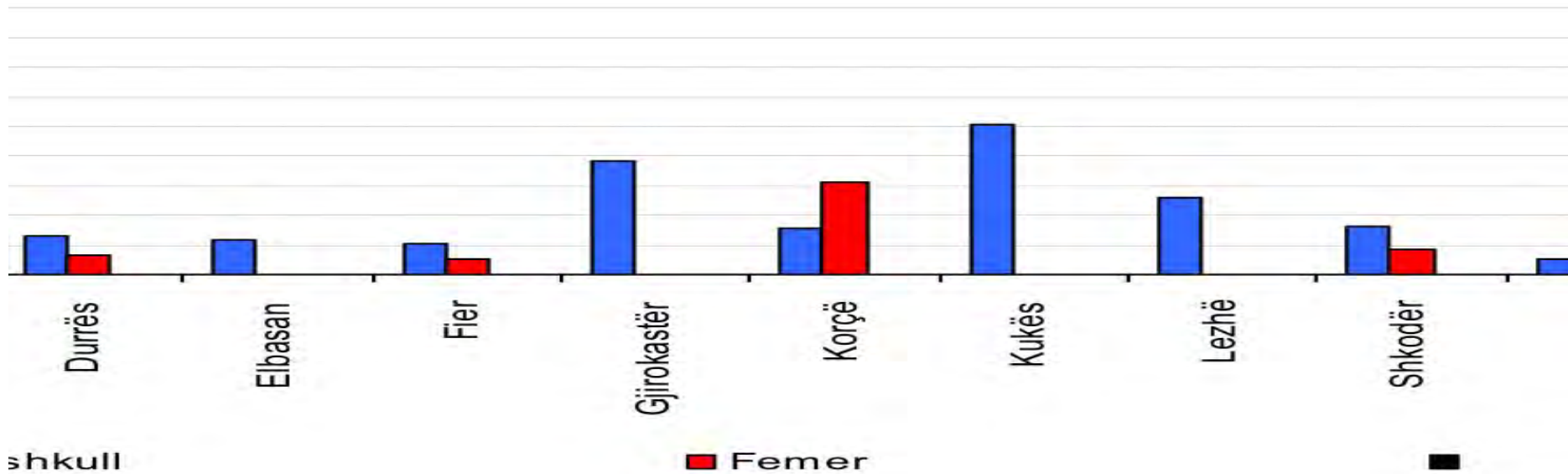


Shpërndarja gjeografike e Leptospirozës sipas rrethëve (Numer total rastesh)



Extrapulmonary TB





SHERBIMI
HIGJENES DHE
EPIDEMIOLOGJISE
DURRES



ORGANIZATA BOTERORE
E SHENDETTIT
EUROPE

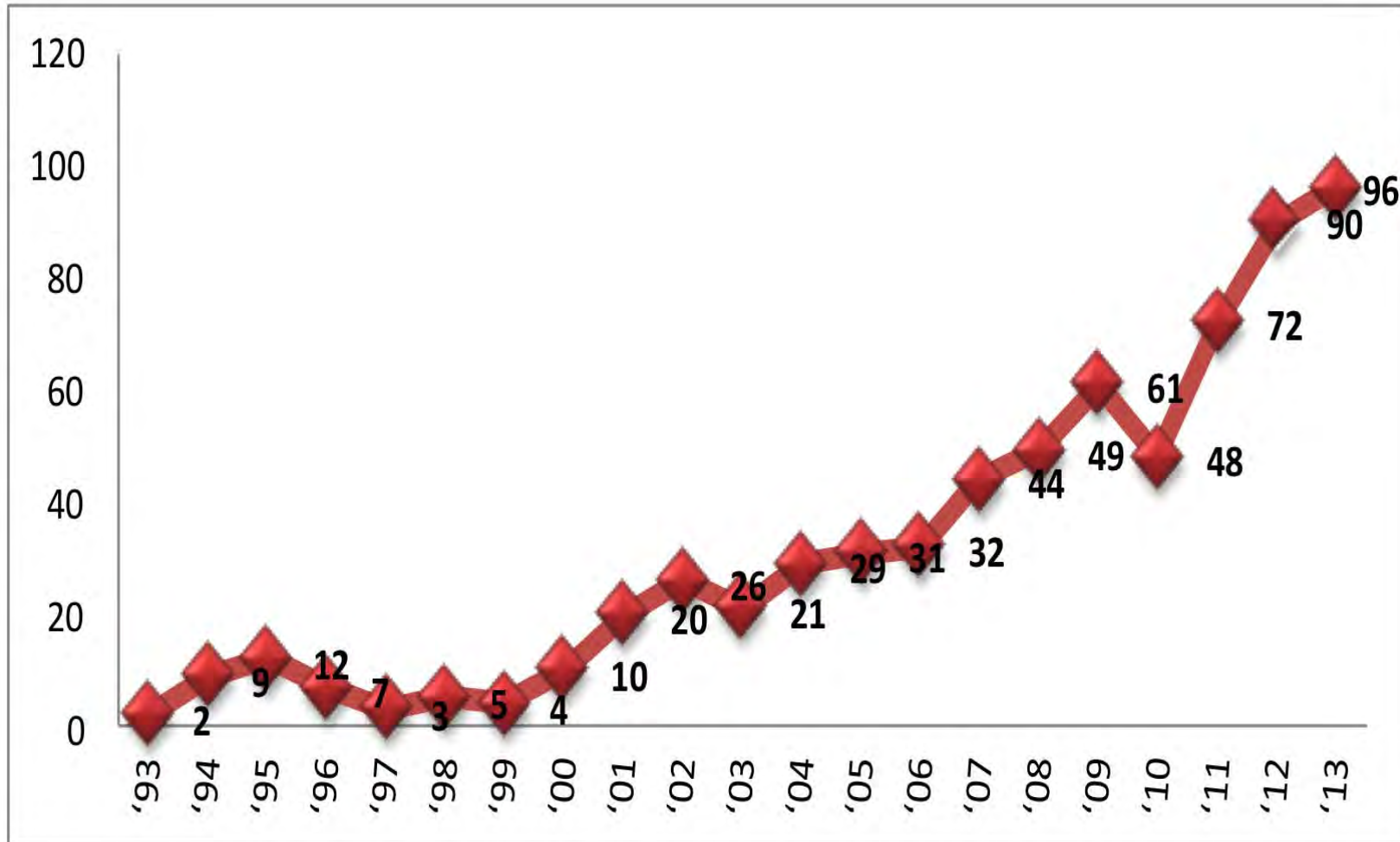
RREGULLORIA NDERKOMBETARE
E SHENDETTIT (2005)

Udhëzimi i Regullores
që përbëjnë të Shëndetit

BOTERORE E SHENDETTIT

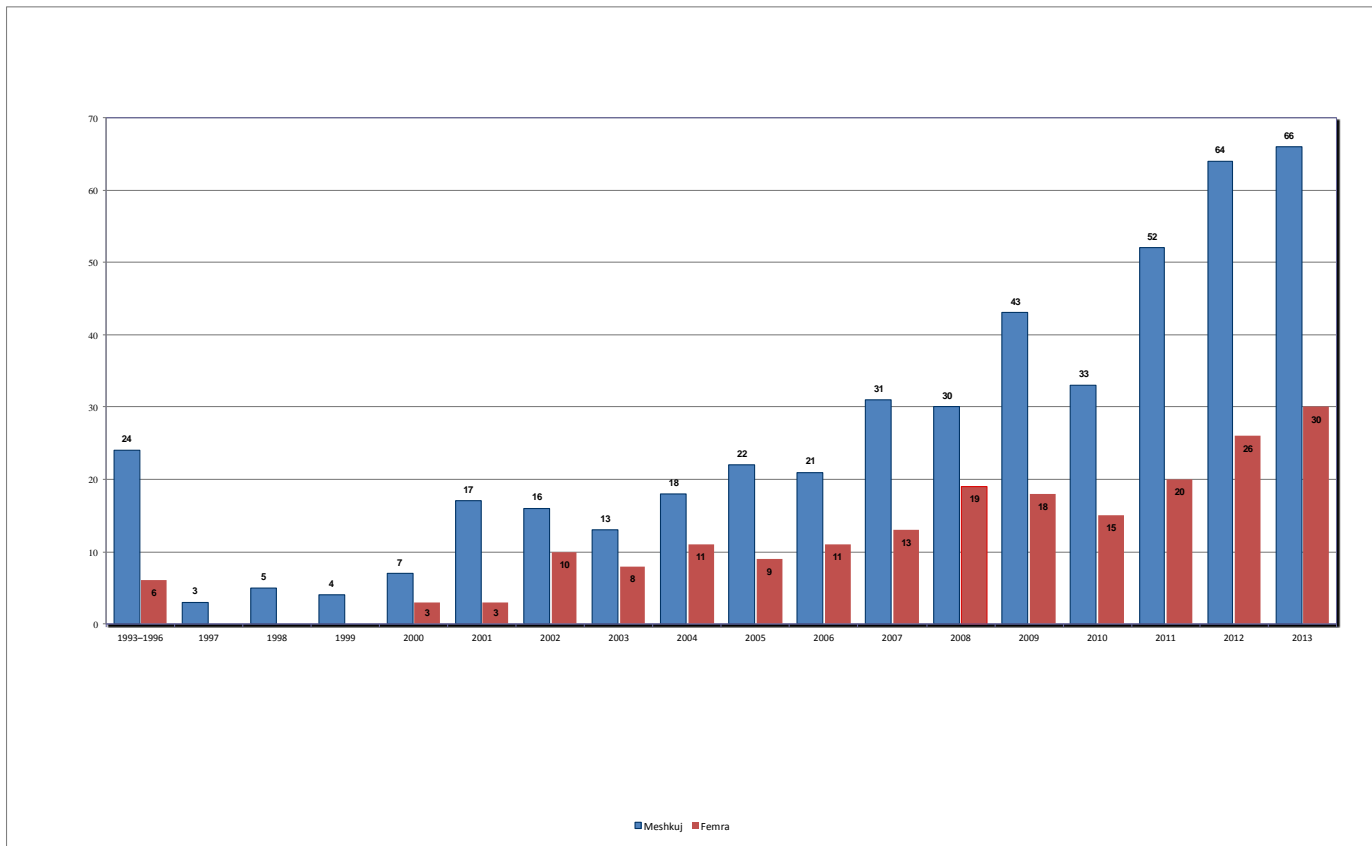
E PES

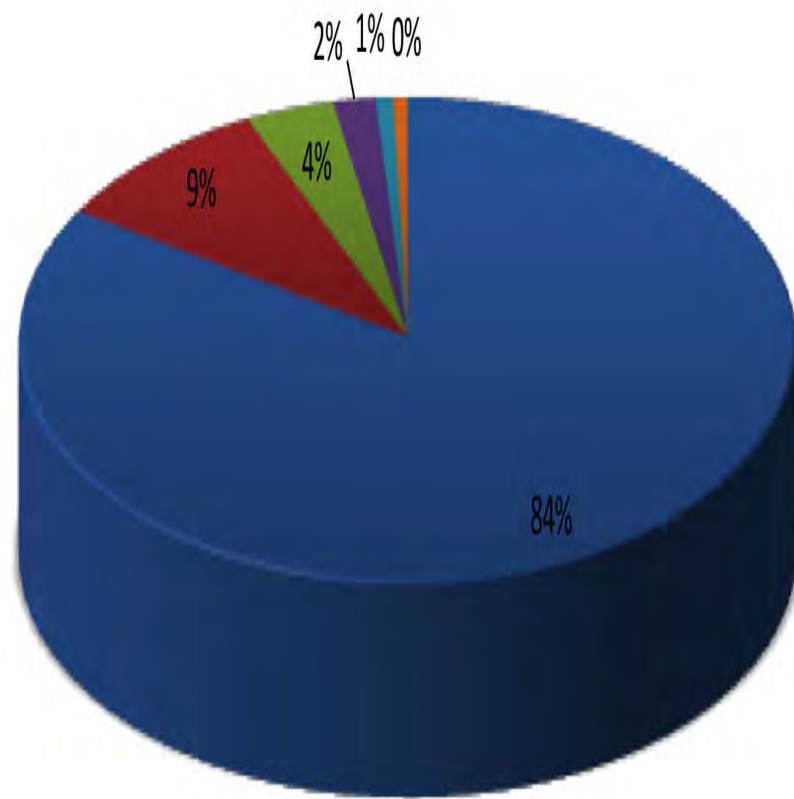
HIV EPIDEMIC IN ALBANIA



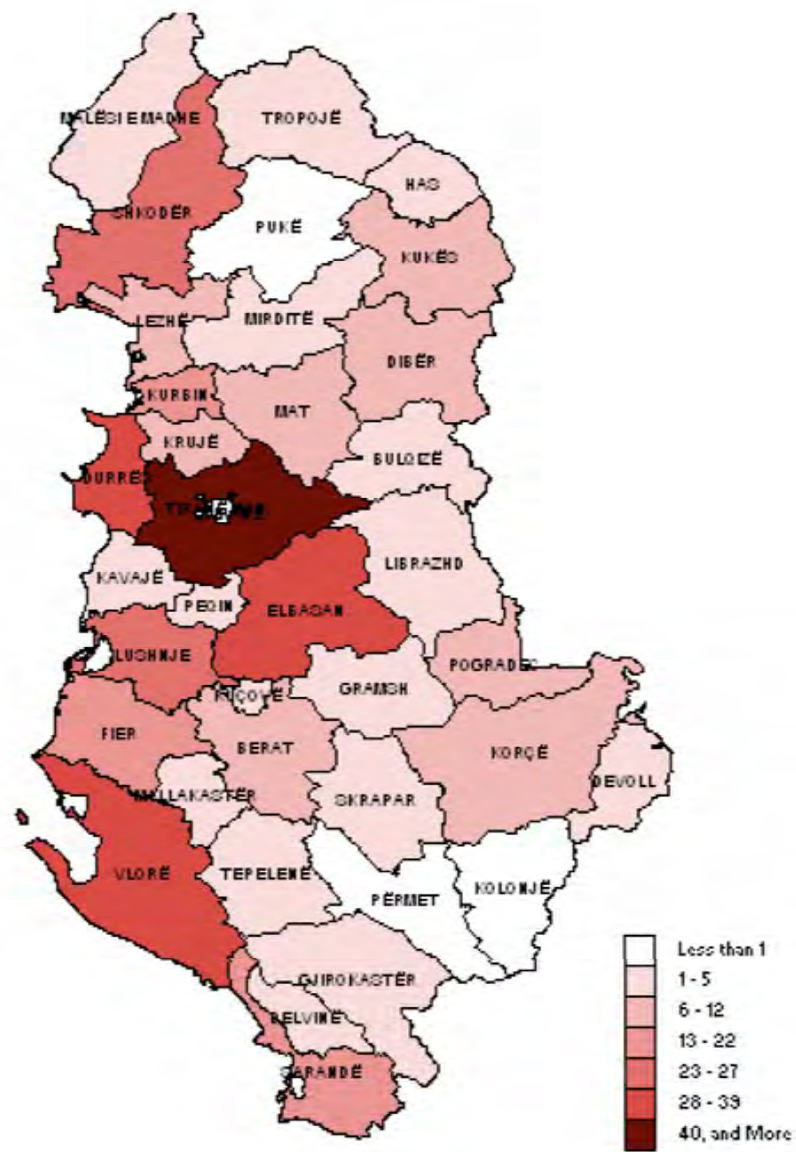
HIV EPIDEMIC IN ALBANIA

GENDER ISSUES

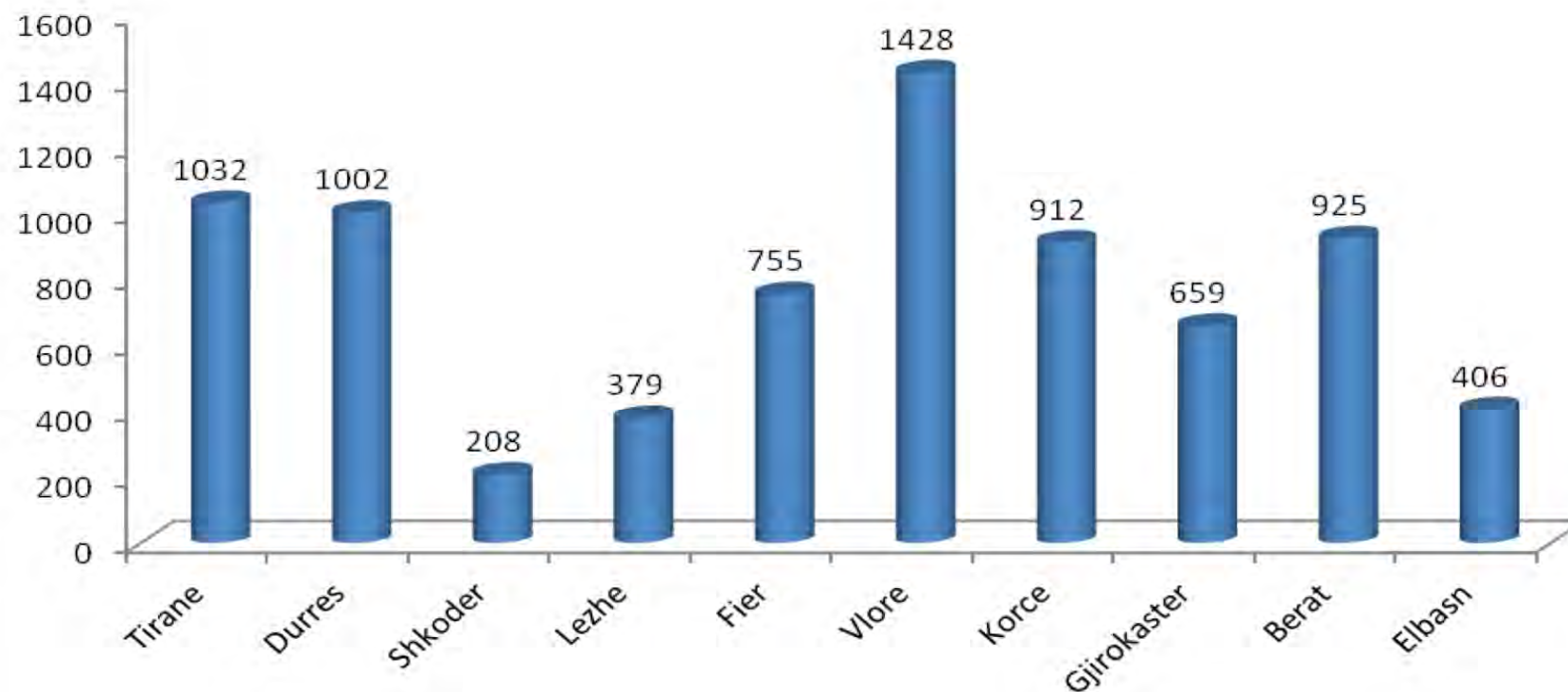




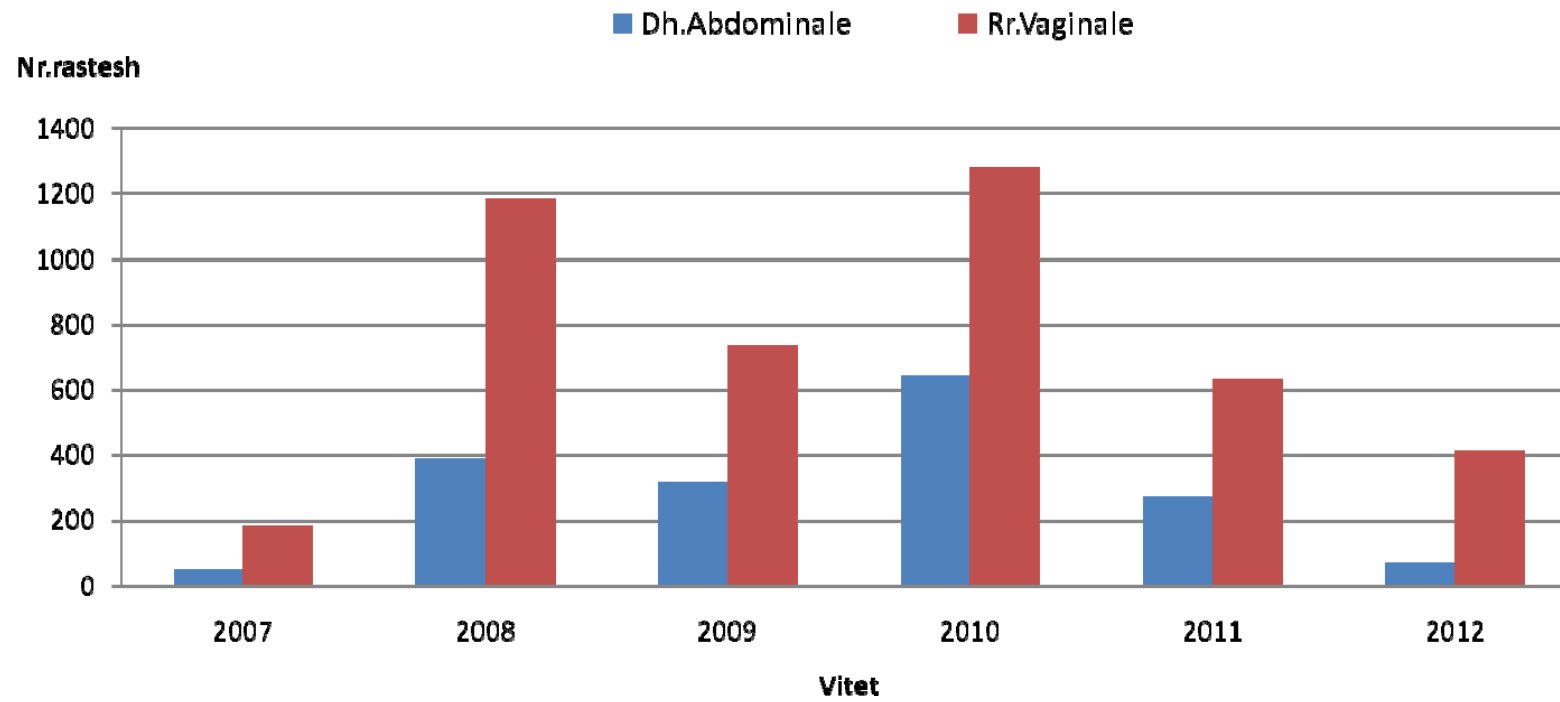
■ Heteroseksuale ■ Homo-biseksuale ■ Vertikale ■ gjaku ■ e panjohur ■ IDU



Nr i testimeve dhe këshillime per HIV sipas rretheve në periudhën 2008 - 2013

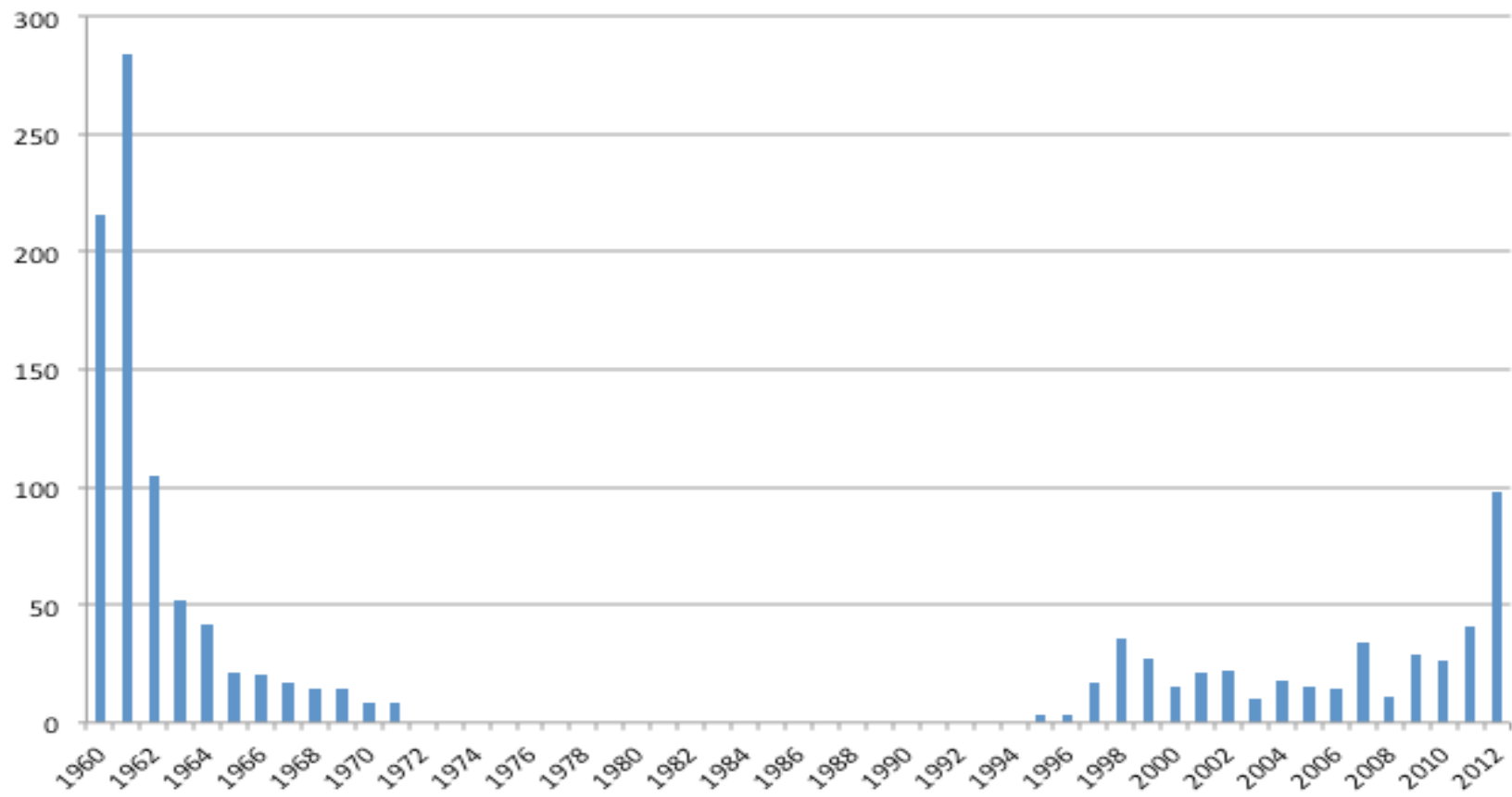


STI SYNDROMES



Syphilis

Nr.rastesh



Where is Syphilis established

1. TIRANA
2. ELBASAN
3. DURRES
4. SHKODRA

• Reemergence of Syphilis in

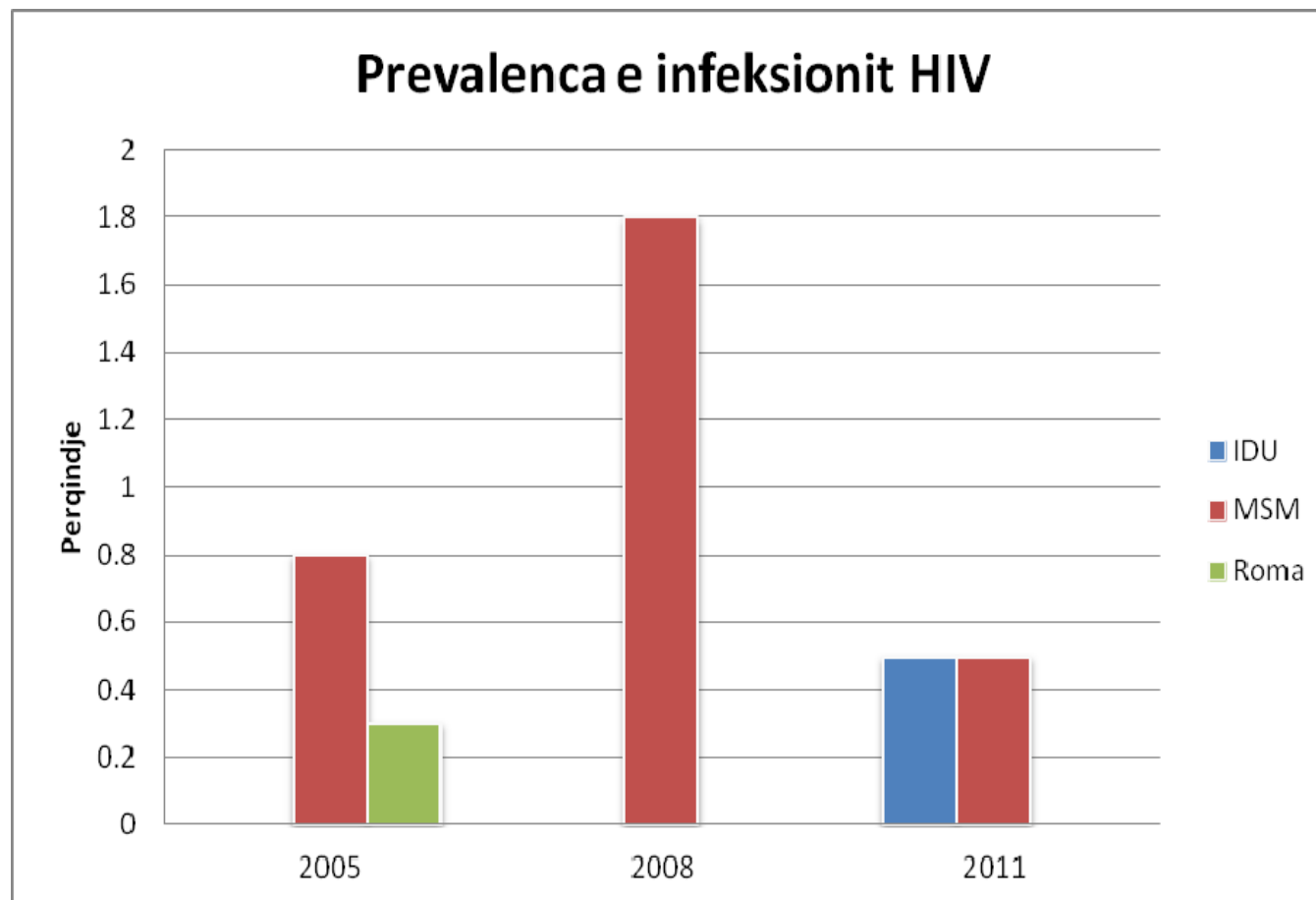
1. KORCA
2. LEZHA
3. REMERGENCE OF NEWBORN SYPHILIS IN
TIRANA AND KORCE AFTER 50 YEARS

Chlamydia & HPV

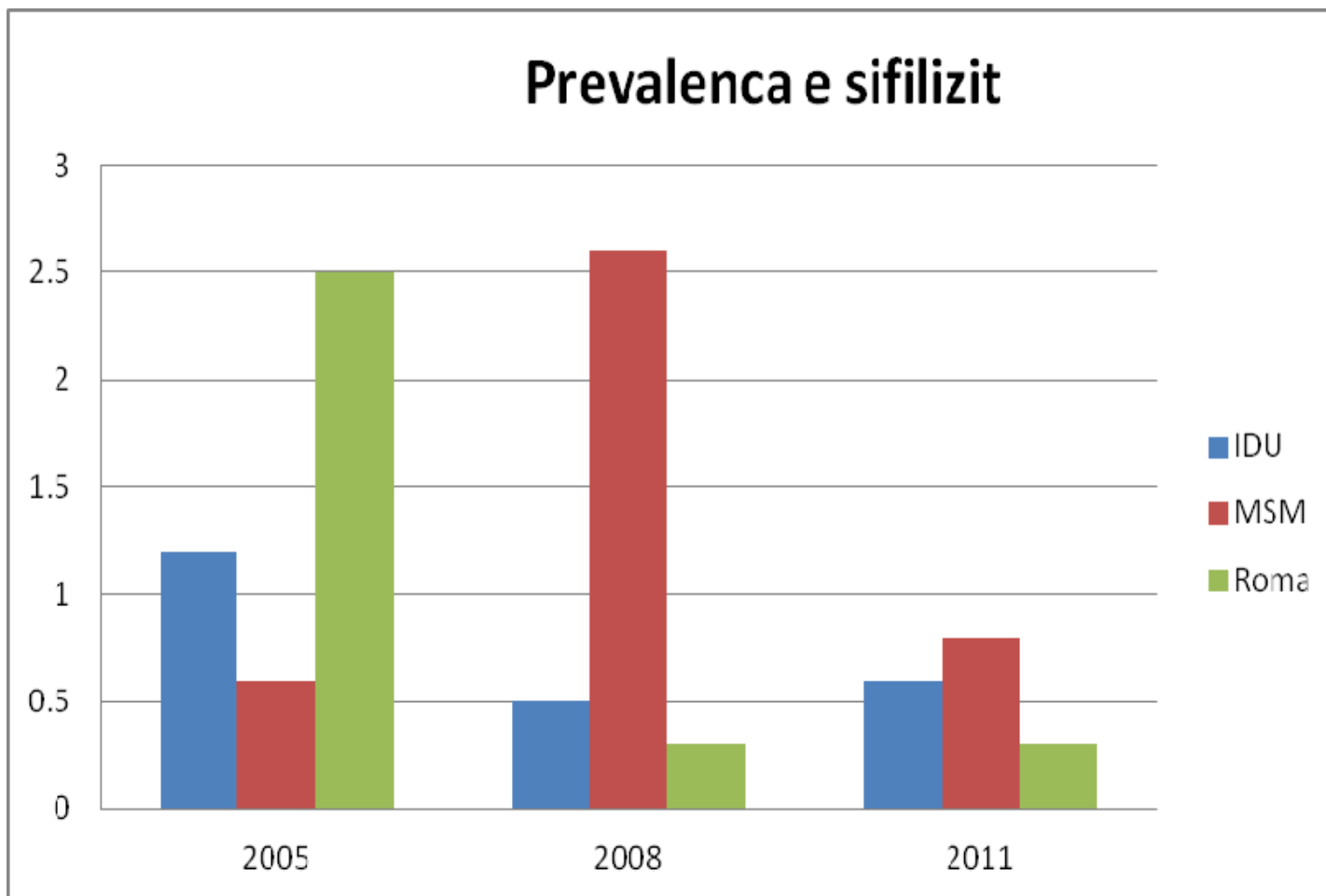
First study in women of
reproductive age groups

Prevalence = 5,6%

Vulnerable population

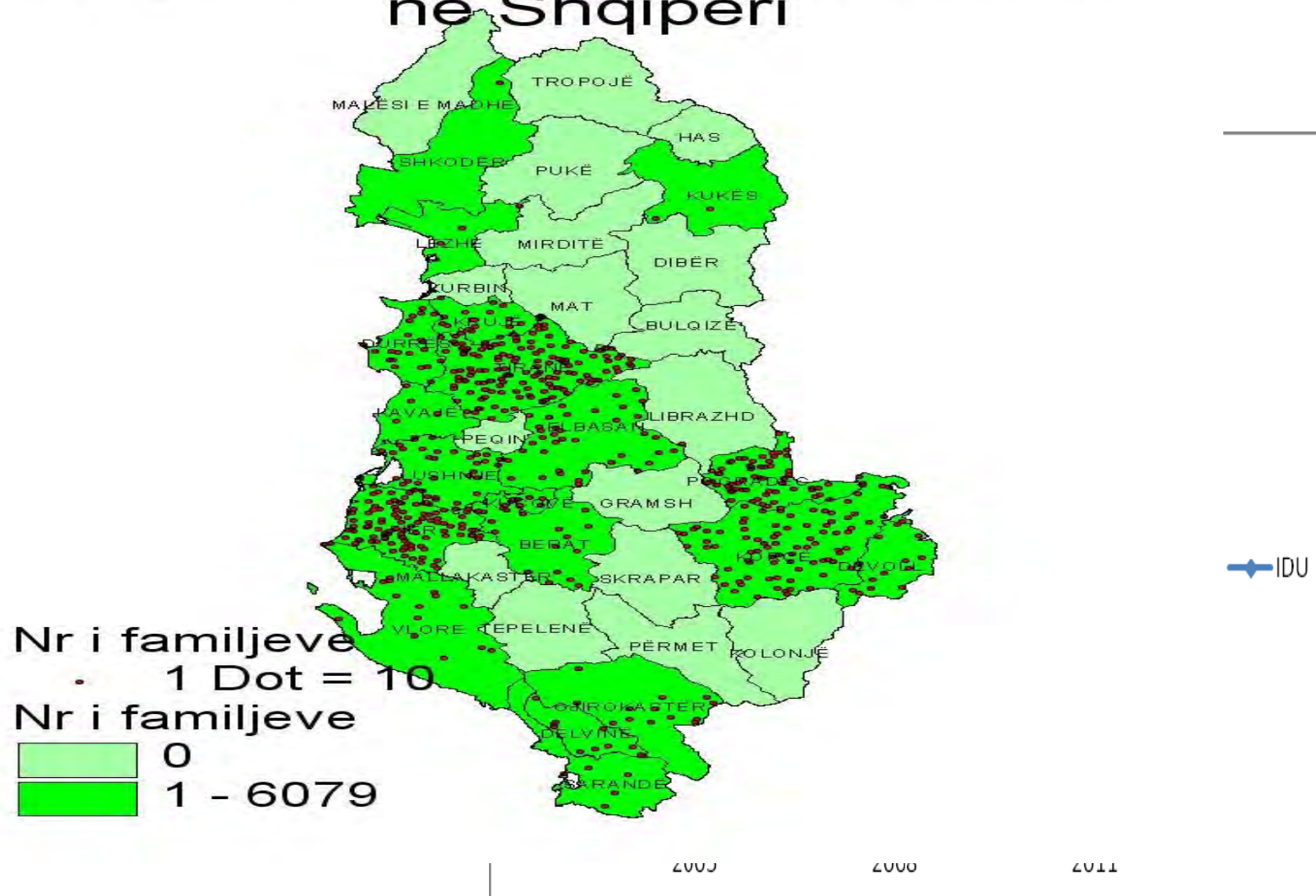


Vulnerable population



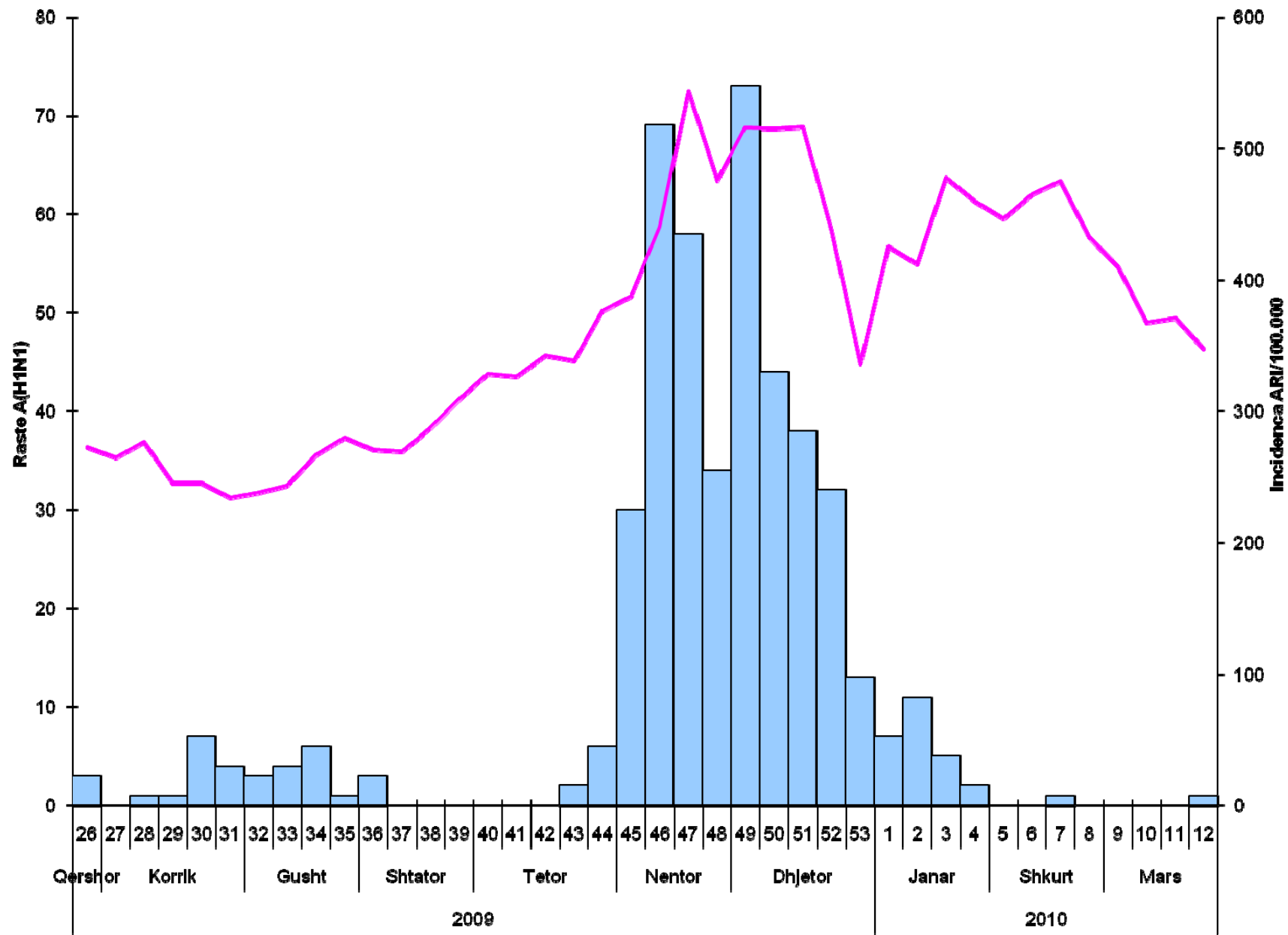
Shperndarja e familjeve rome ne Shqiperi

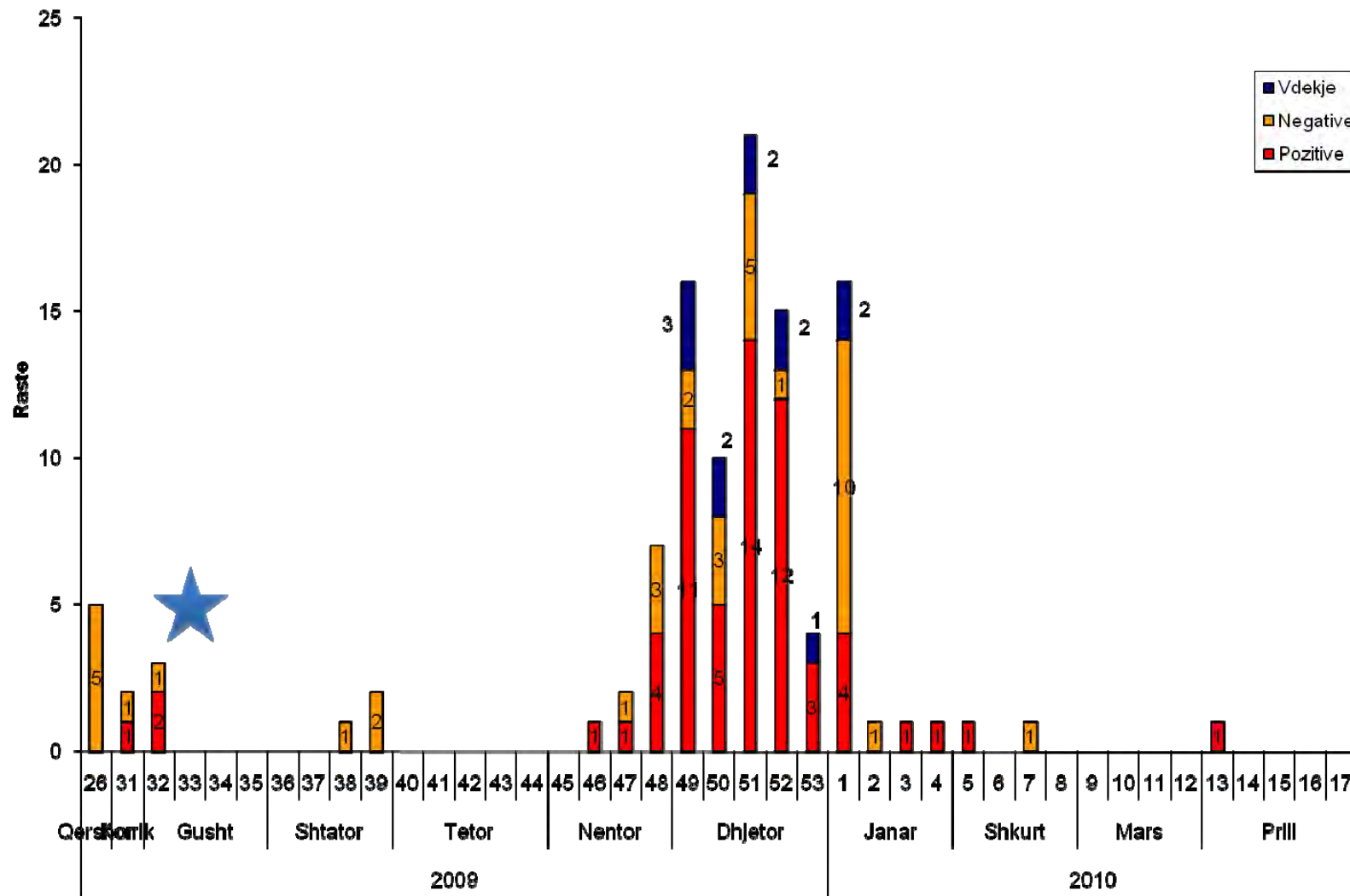
e

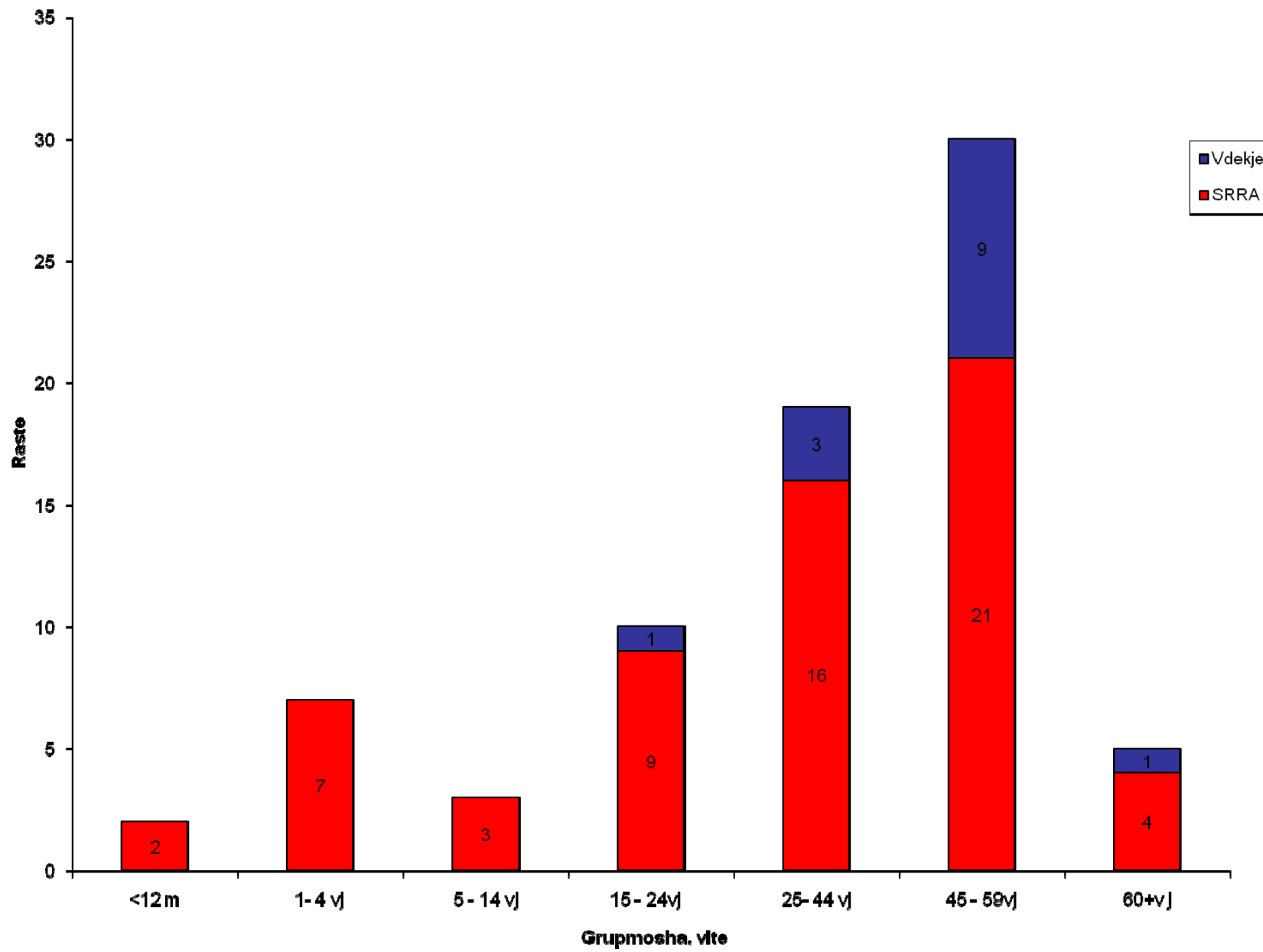


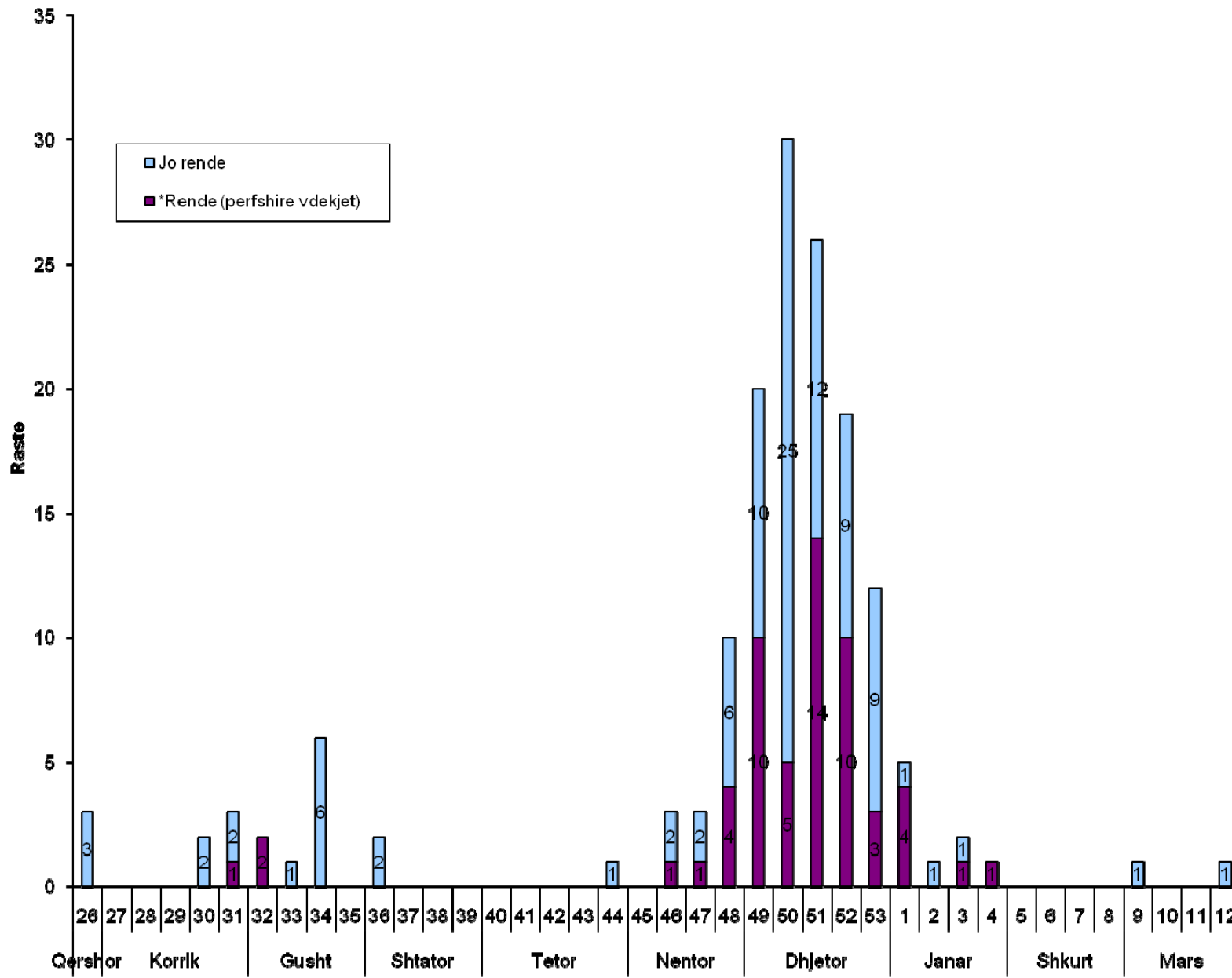
FLU PANDEMIC A(H1N1) ALBANIA

- **29 July 2009:** 3 philipino near Dures port
- **10 June 2009:** First diagnosed case A(H1N1)pdm09 in Albania
- **7 Gusht 2009:** First death from A(H1N1)pdm09
- Most of deaths in December 2009 in **18-63 years old including two pregnant women**
- **Until October 2009** – Confirmation in Romania
- From November 2009 Flu lab in IPH = cell culture, serology, RT-PCR etc.









FALEMINDERIT
THANK YOU