

Observations from the European Young Family Doctor's Movement (EYFDM) Bosnia and Herzegovina Exchange Program

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This year, within the scope of EYFDM (European Young Family Doctor's Movement), I had opportunity to participate in the Bosnia-Herzegovina exchange program that took place between 18.09.24-22.09.24. The program lasted 5 days, 2 days we observed family medicine in Bosnia-Herzegovina and 3 days we participated in a preventive health symposium. Bosnia-Herzegovina is a country governed by two separate entities as Federation and Serbian Entity. The exchange program took place in the city of Doboş in the Serbian Entity.

We participated in the exchange program as 4 colleagues from Türkiye, Dr. Şeyda Özcan Maden, Dr. Gizem Jülide Kalaycı and Dr. Aslınur Özmen from Türkiye and left as friends. We met colleagues from 6 different countries and made new friendships.

EYFDM Bosnia and Herzegovina representative Dr. Marina Jotic Ivanovic was in contact with us from the day the participants were selected. She hosted us in Doboş and organized the social and academic programs in the best way.

Day 1 Rural Family Medicine Observation



On the first day we had the opportunity to observe rural family medicine services. One group was guided by Dr. Aleksandra Lazica and the other by Dr. Milena Bilic and they explained the rural family medicine system in Bosnia.

We traveled with Dr. Milena Bilic to Osjecani Donji, a village of about 2000 inhabitants, 20 km from Doboş. There is a family medicine unit in this village, run by 2 doctors and 2 nurses.

The first day we arrived in Doboј, there was an internet outage throughout the city. For this reason, when we asked how they keep patient records, prescription and referral system, they told us that they keep patient records on paper because they have internet problems from time to time. However, they also use computerized procedures such as patient registration, examination, treatment, prescription and referral. There are e-prescription systems in the country.



Our observation of rural family medicine under the exchange program also covered in the local press.



07:00 am-02:00 pm and 02:00 pm-07:00 pm, two different doctors work in this family medicine unit. They give appointments to 6 patients per hour. They work with an appointment system, but Dr. Bilic says that there is no restriction; every

patient can come every day, there is no limitation at this point.

The referral system for family physicians in rural areas is active and fast. A referred patient can be examined in the relevant department within 4-5 days, for example, a patient referred for colonoscopy is treated in 10 days at the latest. Patients can go to a higher level of care without the referral system, but they have to pay a significant amount of money, and Dr. Bilic said that patients can pressure for a referral.

Family medicine services in rural areas function similarly to the emergency green area in Turkey. In the observation area where patients receive parenteral treatments, antibiotics, diuretics, analgesics and antipyretics are available.

Dr. Bilic emphasized that we are a society with a high demand for antibiotics and parenteral treatment, which was a familiar situation for the participants from Türkiye.

In Bosnia, there is also a pharmacy among the institutions providing health services in general. This is how patients obtain their prescribed medicines.



After the observation of rural family medicine, we visited the historical and archaeological museum of Doboј with a guide. This trip reminded us once again how close the Balkan culture is to us.



For the evening Marina and her friends organized a dinner at a beautiful vineyard restaurant. We reached the restaurant through quiet and forested villages. We finished the evening with Kolo, the local Bosnian dance with lots of laughs and conversations.

Day 2 Secondary Family Medicine Observation in Dom Zdravlja Doboj



On the second day Dr. Marina and her friends Dr. Sladana, Dr. Zeljka, Dr. Zagorka accompanied us to the health center. The Health Center is a secondary care hospital with several specialties such as emergency, pediatrics, internal medicine, epidemiology. There are 21 family medicine specialists and 3 doctors in training in family medicine.



Nurses greet patients and open a record by categorizing them according to the reason for their application and a detailed record appears on the doctor's screen. If the patient has come to prescribe medication for chronic diseases, the name and dosage of the medication are displayed on the physician's screen, and if the physician deems it appropriate, the patient can take the prescription from the nurse and leave. In this center, family medicine specialists can actively use methods such as spirometry and ultrasonography. Cancer screenings were carried out in certain months, for example, nurses were conducting patient interviews because breast cancer screenings were scheduled for the following month.



In Bosnia, pregnancy follow-up, infant follow-up, child follow-up and vaccination practices are not carried out in family physicians. Examination, follow-up and vaccinations of the 0-6 age group are followed up in the pediatric clinic. Vaccinations after the age of 7 are followed up in the epidemiology department. The entire pregnancy process is monitored by gynecology.

In Bosnia, patients are registered with a family physician, an obstetrician, a gynecologist and a pediatrician at certain times of the year. The management of follow-ups, vaccine management and registration with a specific physician in specialties other than family medicine are different from Turkey.

When we ask about the cost of health care, Dr. Marina informs us. Up to the age of 7 examinations are free of charge, but from the age of 15 onwards there is a small fee for health care. In the Federation there is a small fee for each medicine, while in the Serbian entity there is only a fee for certain specific medicines.



After the observation, we took a walk to Doboj castle. Once we climbed the castle, the conversations continued against the view.

Day 3 Preventive Medicine Symposium



The 4th medical symposium was inaugurated. The ceremony started energetically with local music. The opening of the symposium was also covered by the local press.

Day 4 Banja-Luka Excursion



Before the gala dinner, we took a trip to Banja-Luka, the capital of the Serbian entity. Salma and Libby were very enthusiastic about this trip, and my wife and I couldn't miss it. We had a nice tour of the city, a delicious closing with Bosnian answers, and then we drove about an hour back to Doboj.



We had a very colorful and beautiful evening as the EYFDM team at the gala dinner. Months in advance, Marina had shown great kindness by asking everyone's food sensitivities and preferences. After our dinner, we ended the night with music and dancing. The famous artists of the country also added color to the night.



Day 5-EYFDM Session





Eleven physicians from 7 different countries (Portugal, UK, Sweden, Türkiye, Bosnia and Herzegovina, Bangladesh, Pakistan) made presentations on primary healthcare services. The session enabled us to learn about the primary healthcare services of different countries and to realize the strengths and shortcomings. It was a good session that helped us to look at primary healthcare services from a much broader perspective.



Marina came up with the idea of everyone bringing their own country's famous desserts, and after the EYFDM session, our dessert table from all over the world was organized. At this colorful table, desserts were eaten and conversations were had that we will always cherish.

Conclusion

It was a very social program with plenty of cultural interactions as well as academic aspects such as reminding the importance of primary health care services and opening horizons for the development of these services. We made brand new friendships, and for many of us it was a brand new experience that will be considered a milestone in our lives. I would recommend this experience, which I will always remember with excitement, to all my colleagues.

References

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