

Rehabilitation is the field that has remained in the shadows for many years in many countries, including my country. Rehabilitation services are the most inaccessible of all medical services. For many reasons - lack of strategic visions, lack of financial resources, lack of trained personnel. Patients who underwent costly surgeries, stroke treatments, children bedridden after various childhood diseases, confined to the house or in wheelchairs, all of these because rehabilitation services in the country are limited and often insular.

Today we all understand that a strong rehabilitation system is the only hope of critical or disabled patients to return to social life, to workplace and to regain a normal life. Ast

What I would like to add to the documents developed by the WHO is that rehabilitation must contain different steps of interventions and to be offered at different levels in different volumes focused on the capacities and objectives of each level – highly specialized, medium or even the level of primary medicine.

It is imperative that the rehabilitation has to be able to cover all categories of patients and diseases that require this kind of services, such as stroke, trauma, childhood disability, but also COVID-19 or other diseases. It is known to everyone that today, in their vast majority, patients who suffer post-COVID-19 consequences do not have rehabilitation solutions in many health systems. Rehabilitation needs a comprehensive vision, it must become a mandatory part of Universal Health Coverage. Though it does require significant financial resources to provide the necessary equipment and trained medical personnel. Therefore countries must have strategies, projects for the development of this field, evidence and expertise, and the WHO should take leadership in the field.

But the fact that we are discussing this topic today, at EB, is a big step forward, especially taking into account the demographic changes in the world and the aging of the population.