New drugs, new operations and alternative ways to deal with health problems are frequently reported in the press. Some are soon forgotten, others are here to stay. But are they always beneficial to health? Are they always better—or cheaper—than what we had before? Is the patient more satisfied and happy about using them? In other words: is the quality of health care better than before?

WHO's European Region is deeply involved in efforts to study—and to improve—the standards of health care. For example, in conjunction with 11 countries we studied the possible advantages of the insulin pump (see World Health, May–June 1991, pages 5 and 11) compared to insulin injections made by patients themselves. Patients were asked their own personal opinion. We also examined data about the costs of the two methods, and of their effectiveness from the doctors' point of view.

It turned out that the pump did not bring much benefit for most patients. In some cases, it had some undesirable side-effects, but we were able to improve on the existing treatment. Patients could be taught to check their blood-sugar level and thus decide more easily how much insulin they should inject. We also found that more efforts should be made to help patients to stop smoking and in general to adopt a healthier life-style. The pump itself had some drawbacks, but the study taught us how we could help patients to understand and cope much better with their own condition. Millions of people with diabetes will benefit from the study.

Doctors and nurses, like most people, do not normally like to be told that they must change their ways. It is much better to involve them in the studies so that they can participate in the decisions. The computer is an excellent tool for such studies. Health workers can send their information to the researchers, and in return they can read the findings of the study on their computer screens.

We developed a computer program called WHOcare to study wound infections in hospital patients who had had an operation. The findings resulted in guidelines that were of immediate use to surgeons, as well as to hospital and health authorities. Better training of the doctors, nurses and others was an important recommendation.

Everyone has his or her own ideas and impressions about what to do to solve a health problem. Studies of the quality of health care help us to come to common agreement about what really works to the satisfaction of the health staff, but most of all to the benefit—and satisfaction—of the patients.

Dr Kirsten Staehr-Johannsen is the Regional Adviser on Quality of Care and Technologies, WHO Regional Office for Europe, Copenhagen.