က်

A glimpse at Croatia's socialized medicine

The flashing lights in my eye were familiar. A similar experience left my right eye nearly blind two years ago. What worried me most was this time the flashes were in my good eye. Time is of the essence when you see signs of a retina detachment.

It was 6 a.m. on my first day of teaching a weeklong leadership course for the Zagreb School of Economics and

Management (ZSEM) in Croatia. I had 10 St. Ambrose University students and 42 Croatians counting on me to start class at noon.

The university hospital looked like an ancient government building. It was hard to find the ophthalmology unit. Signs were in Croatian and no one spoke English. Fortunately, Dr. Kresimir Yulkich noticed that I was lost and guided me to the right elevator. Six hours later, I would find out that he was to become my eye surgeon.

About 150 people were packed into a waiting room built for 60. Patients with



Dan
Ebener
GUEST
VIEWPOINT

The doctors in lowa said that they would have followed "exactly" the same procedures as the doctors in Croatia.

walkers were waiting for a seat to open up. About 30 people were pushing toward a large window where a woman seemed to be announcing names of patients. With each name, the crowd pushed harder toward that window.

This time it was Dr. Marin Davidovic who rescued me. A young doctor who had interned at the University of Michigan, Marin was coming off a 12-

hour night shift and was trying to set up an appointment for a relative. I reached out to Marin and fortunately, he translated for me and patiently guided me through the whole application and waiting process.

Socialized medical systems like the one in Croatia can be difficult to maneuver around, especially when you don't speak the language or know how the system works. You have to be patient. You wait. Marin and I visited. I kept asking him if he didn't need to get home. But typical of Croatians, he said, "You are my responsibility now." Marin stood with me for over two hours until my name was announced as the next patient.

Inside the first door, a nurse dilated my eyes and said to come back in two hours. That gave me time to start my class at ZSEM, which just happened to be a five-minute walk from the hospital. Two hours later, I left my Ambrose students in charge of the class and walked back to the hospital.

Dr. Yulkich found that indeed my retina was torn. Immediately, he applied laser surgery. Five minutes later, I was teaching. Two mornings later, he lasered the eye again. Five minutes later, back to teaching. By then, my family, my students and my Croatian colleagues were all urging me to head home and see my doctors in Iowa.

With the gracious offer from ZSEM to cover the \$3,650 change fee for my flight, I flew home a few days later for an eye appointment at the University Hospital in Iowa City. Everything checked out. The doctors in Iowa said that they would have followed "exactly" the same procedures as the doctors in Croatia. They said the quality of the Croatian laser surgery was "perfect."

Socialized medicine means that Croatians have a single-payer, government-sponsored health care system covered by their taxes. No health insurance. No co-pays or deductibles. Very little paperwork. As a foreigner, I had to pay for both surgeries. Total charge: 57 kuna per visit, which amounts to \$9.95.

-We can learn a lot from the Croatian people: warmth, hospitality, friendliness, patience. Perhaps we can also learn how top-quality health care can be made available and affordable to everyone.

Dan Ebener of Davenport holds a Ph.D. in business administration and teaches in St. Ambrose University's Masters of Organizational Leadership program. He also owns Quad-City Leadership Consulting Inc., an independent consulting firm.