

Review of: "Biomedical and Healthtech Innovation: The Dilemma Between Purpose, Current Stakeholder Economics, and "Patient" Benefits / Desires — What Might the Future of Health Look Like?"

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Thanks a lot for submitting this paper. This article addresses a topic of great interest, but unfortunately, as in other cases of this kind, general themes are touched upon without at least proposing lines of concrete thought on which to begin to reflect and propose solutions.

It should be emphasised in this regard that the cultural, economic, and organisational dimension to address these issues is not dominated solely by 'medicine' but requires the presence of institutions at all levels.

There is no doubt that medicine, which remains one of the underlying components of health, will have to systematically address these issues. A mandatory path and debate for the survival of medicine itself as we understand it now. It certainly can't let alone. Precisely because it is only one of the many factors that contribute to health, the topic will have to be addressed in a synergistic way with other environments such as sociology, philosophy, and religion. All this cannot fail to pass through the political and economic world. It will be a topic that will occupy us for many, many years. I therefore think that a good starting point could be the world of school and training. New values must be introduced and shared, and for this, training is the basis. At the same time, we must think that a large part of the non-industrial world would not be a good ally at this stage because it is facing basic problems such as access to drinking water, infections, maternal mortality linked to childbirth, or the high mortality rate in the first years of life. Perhaps it will be necessary to "slow down" the race towards ever-increasing lifespans in a part of the world to allow the rest of the world to make some progress. Thinking about the difference in the rate of years of life gained (LE) versus years of healthy life (HALE) versus amounts spent could help in this regard. I think we will have a delta that will tend to always increase: almost a side effect of increasingly advanced and expensive technologies.

I am an elderly man of almost 72 years, and at this moment, I have no news about my serious diseases. I don't know if I would say the same things - like slowing down LE and improving HALE - if I was in a life-threatening situation for medical reasons. I emphasise this aspect to focus on the theme that medical science alone is NOT able to design and sustain such an epochal change.

