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HEALTH & FITNESS

Universal Health Care Problems in the United States of America
C. Ovid Trouth
Mathias Wagner
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Three Stars (out of Five)

Public opinion about health care in the United States ranges from advocating a complete overhaul to changing nothing. Small wonder that progress towards establishment of more equitable health care coverage moves slowly. The country's privatized health care system continues treating those who can afford insurance, while leaving others to pay for treatment as health problems which may have become critical.

Universal Health Care Problems in the United States of America consists of chapters written by fifteen contributors. Edited by C. Ovid Trouth and Mathias Wagner, these excerpts describe how different countries deliver public or private health care to their citizens. A few countries have enjoyed some form of comprehensive, government-funded health care for years, while others still struggle to provide basic services in remote rural areas to impoverished populations. One common point unites these diverse examples: none have attained a system that has managed to escape complaints from users about what they pay for health insurance or the quality of care they receive.

Trained as a medical professional in Germany, Wagner serves in the Department of Pathology at Saarland University. Trouth has studied and held medical positions internationally and is emeritus professor at Howard University.

Burgeoning costs drive the need for reform of the U.S. health care system. From large corporations to individual consumers, the burden of paying monthly insurance premiums has become insupportable. Premium charges increase each year while quality of care decreases; many sources want a slice of each health care dollar spent. "Simply put, people are siphoning out the money that is supposed to be caring for the patient," contributor Tiong G. The' writes.

Nigeria loses many of its native-born medical practitioners, who leave to seek better pay and working conditions in more developed countries. The remaining doctors must work outside their specialities to provide adequate care for their countrymen. Dr. Cheif M.O.N. Ibe explains,

“Physicians must be prepared at all times and are trained and experienced in treating everything so we are usually kept quite busy!”

The majority of Germany’s population supports their government’s health care program. Contributors Wagner and Roland Linder say, “The solidarity principle can be described as: the healthy paying for the sick, the young for the geriatric population, single people for families and high income for low income clients.”

This book offers informative overviews of how various countries address the medical needs of their citizens. Each contributor expresses genuine concern for their fellow countrymen and sincere expectations that they receive superior professional medical care. Some grammatical, typographical, and format errors occur throughout. The concluding three chapters express Editor Trouth’s views about the shortcomings of many U.S. policies, from health care to other problems only tangentially related to that subject. His writing lacks the calm reasoning and coherence of chapters written by the majority of contributors.

Interested readers worldwide will gain insight from this opportunity to compare and contrast how these countries deliver health care to their populations.

Margaret Cullison