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Radiology in Russia

Interviewee

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What are the Main Professional Challenges for a Radiologist Working in Russia Today?

One of our major problems is infrastructure. While our government has bought a lot of equipment, we still need more. Very few hospitals are equipped with PACS and RIS, and these systems are from different vendors and usually they are isolated from each other. Very few people understand how to proceed further with them.

The number of radiologists is Russia is quite high, above 14,000 (just in public healthcare, not counting the ones in the private sector), and including nuclear medicine and ultrasound specialists it is about 27-29,000. However, even in big cities like Moscow there is a shortage of radiologists educated in high tech medical systems who can work effectively with MRI, PET-CT and so on. In part this is because of low salaries. I know it is a problem for many European countries, but it is acute for Russia too. Secondly, we have the old system of education for radiologists, from Soviet times, which was mostly working with classical x-ray. Now we have CT, MRI etc. in the curriculum, but the duration of training is not enough. Many teachers of radiology must be upgraded and motivated to do so, which again can be hard because of low salaries. I teach a lot, but most of us do it pro bono to improve things. This cannot work on a big scale and last forever. We need a programme to 'teach the teachers.'

Is Demand for Medical Imaging Increasing?

It is, because our surgical interventions are developing. In Russia surgeons do all kinds of oncological, cardiovascular procedures etc., so demand for imaging is going up and up. Also our healthcare administration recently announced (from my point of view a very good decision) they think we have too many hospital beds with comparatively underdeveloped outpatient centres. They want to improve outpatient services and do as many examinations and medical procedures in outpatients. We need more equipment and qualified radiologists for this.

Are Waiting Lists for Imaging Exams a Challenge in Russia?

It is difficult to know the whole picture, but in Russia I never heard complaints about long waiting lists. In my department, which is quite large, the longest wait is 2-3 days. If there is a need for urgent exam we do it on the same day.

Are Departments of Radiology in Russia Commonly Audited and Accredited for Quality Levels?

No they are not. However, we have state control on radiation exposure. We have special bodies, which control the work of radiological equipment, radiation exposure to patients and staff and carry out regular checkups about radiation exposure. We have a national law on radiation safety. Quality of medical care is a very poorly shaped field. In general the ministry of health does formally care about quality, but practically there are no measures for it. We provide annual reports to the ministry, but it's in numbers, how many procedures, of what kind. Sometimes we are asked about the number of our mistakes. Usually I believe they are a little bit diminished, so these are the tip of the iceberg.

Does the Size of the Country Affect Access to Imaging Services?

Yes, due to the difference in population density across the country. Russia has 89 regions, some of which are bigger than many European countries. There are very big discrepancies in quality of radiology services across Russia. In big cities you can find hi-tech equipment, including PACS, PET/CT etc., and in small cities still there is not enough hi-tech equipment and there are problems with staffing.

To What Extent is Teleradiology Used in Russia? Is Teleradiology Regulated by Specific National Laws?

Due to the differing access to services, there is big demand for teleradiology. We are at the beginning of teleradiology. Just this year my hospital started a pilot project to provide a teleradiological service for the Russian Far East, for Vladivostock and cities and towns in the area. It does not mean we are taking jobs from them. We are helping them, showing them how it could be done, as a kind of outsourcing. The final part of the project is that each region should establish centres for teleradiological services in their own territories. In no way are we suggesting that Moscow will provide a service for the whole territory.

There are no official regulations on teleradiology, how it should be done. The Ministry of Health has plans to develop regulations.

Is Outsourcing an Issue in Russia?

Outsourcing is not a problem for public healthcare, as few people abroad can speak Russian. Patients can of course apply to a hospital or teleradiology company abroad for a private consultation. The only way for outsourcing, given the shortage of radiologists, is for top radiological centres to assist with clinical consultations in cases of difficult patients, provide training for future consultants in the field, and help regions to create their own teleradiological centres.

Are Radiologists Under Threat from Competitors?

So far it's not a big problem for my country. From time to time we face cardiologists, for example, saying that they want to do a cardiac MRI or CT, but according to our regulations, only radiologists can do these. For ultrasound every medical doctor can perform it, after proper training. For CT and MRI we are not facing competition, and I hope this stays for the coming years.

What is the Russian Approach to Dose Management and Radiation Exposure?

We have a national system of control of radiation exposure and we have a law that every medical record includes a table of the radiation dose the patient received. Our government has guidelines on how dose should be done, comparable with international guidelines. However, the major issue in Russia is knowledge of radiation exposure. Russian doctors are quite sensitive to their own exposure, but probably they should be more concerned about the patient's exposure. Still a lot should be done to promote dose according to ALARA (As Low as Reasonably Achievable) principles, in children and young adults, in particular. In our department, we were the first (in Russia) to perform low dose cardiac CTA. You can cut down exposure 4-5 times less and provide the same diagnostic information. It is a great step forward. This is a big issue for education, and with the involvement of industry, and our radiological community, we need to think not only about the right exam, but also about radiation exposure to patients. We can do more to decrease exposure even further.

Valid for system of medical centres in the frame of the Ministry of Health, as at April 2013

Radiology Equipment	
X-ray units	36700
CT	1300
MRI	600
Angio units	410
SPECT	380
PET and PET/CT	21

Figures are for 2009 unless indicated.
Sources: World Health Organization Global Health Observatory,
*Russian Federation Federal State Statistics Service

Statistics

Total population	143,000,000
As percentage of total population:*	
Urban	74
Rural	26
Gross national income per capita (PPP international $)	20,560
Life expectancy at birth m/f (years)	63/75
Probability of dying under five (per 1 000 live births)	10
Probability of dying between 15 and 60 years m/f (per 1 000 population)	351/131
Population decrease % (2011)*	-0.9
Total expenditure on health per capita (Intl $, 2011)	1,316
Total expenditure on health as % of GDP (2011)	6.2
No. of physicians per 10 000 population (2010)*	50.1
No. of hospitals (000s) (2010)*	6.3
No. of hospital beds per 10 0000 population (2010)*	94
Number of medical institutions rendering out-patient services (000s) (2010)*	15.7

Please Tell us About the Russian Association of Radiologists: What are its Most Important Activities Today?

The Russian Association of Radiologists (RAR) is our major national radiological society. We have also several subsocieties – on interventional radiology, cardiac radiology and so on. I feel our national society needs to be more active in education, professional CME and dealing with our Ministry of Health. All regulations and standards etc., which the ministry develops should be done with the involvement of professional organisations. Outside of Russia the European Society of Radiology (ESR) has nearly 1000 Russian members, which is a tremendous growth over the last few years. We cannot get all knowledge in our own country. Today radiology is international. I teach a lot of medical students, residents, fellows and I tell them to please learn English. You don't need to be perfect, but you should be good enough to understand scientific literature.

You are Chief of the Radiology Department at the Federal Centre of Medicine and Rehabilitation in Moscow. What are its Activities Today?

I came five years ago. It was a challenge, and I have reshaped it completely. Now I have a new team of mostly young motivated doctors who want to work better and be part of the international community. We are a teaching base for Moscow State University, the top educational institution in our country. We provide radiology electives, and medical students come to our department, I encourage them to attend international congresses, e.g. ECR provides free places to medical students.

We do approximately 5-7,000 radiological examinations per month (70,000 -80,000 a year). We do practically everything – breast, brain, spine, abdominal, cardiac, emergency, nuclear medicine, interventional procedures, you name it, we do it. Our young doctors should be more or less well trained in all these fields. Later on they can sub-specialise. When necessary we send doctors overseas for further training One has to be part of the international radiological community, to follow the best examples of our profession.

Your Current Roles Include: President of the European Congress of Radiology 2014, President of the European Society of Cardiac Radiology and Board Member of the Russian Association of Radiology. How do You Balance these Activities with Your Clinical/Medical Work?

It takes a lot of my time, but I like it. Each term of duty is good for one thing, and I approve that there is room for everybody, and you cannot hold the same position twice. I get the opportunity to use my invaluable experience from working in the framework of ESR and the European Society of Cardiac Radiology for the benefit of my department, my colleagues, students and residents and for Russian radiology. I spend as much time as I can in my department. I still do clinical work, write reports, consult on difficult clinical cases and I am involved in educational activities. We run a course in English for Russian-speaking radiologists (ESOR - European School of Radiology - from ESR) , which has faculty from Russia and overseas. This year we ran it for the 5th time, and we will continue this.

As I am President of ECR 2014, the congress will include the session "ECR meets Russia". More and more Russian radiologists are involved in the activities of ESR and its sub-societies. I hope it will be a lot of help to the further development of Russian radiology, and bring us closer to the best U.S. and international standards.

You are active in social media, running a blog and tweeting. Why do you think radiologists should get involved in social media?

Radiologists who are going to be part of international radiology should be involved. It's the best way to get up-to-date. All the top information can be obtained only from the internet - from blogs, Facebook, Twitter, including the ones run by the European Society of Radiology. These are all excellent tools to communicate with our friends in the frontline of radiology, and be the first to get news from publications, journals and congresses. I cannot be at all of the international congresses, and social media gives me the opportunity to get highlights. I am very happy that all top journals, including your journal, use social media, send out highlights, tables of contents, and provide e-learning, internet editions and special portals.

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