

Facing medical deserts: a citizen medical service

Press release of the French National Academy of Medicine (*)

In medically under-dense areas (known as "medical deserts") the shortage of full-time equivalent physicians is reaching a critical level. The number of general practitioners in France has decreased by 11% between 2010 and 2022. Given the age pyramid and the retirement of doctors aged 55 to 65, this shortage will increase "until 2024" with "recovery of medical density only by 2033" according to a recent Senate report (March 29, 2022). This is all the more serious as it does not only affect rural areas but concerns almost the entire French territory, including suburban and even urban areas.

To try to mitigate the consequences of this shortage, largely linked to the excessive reduction in the number of trained doctors (*numerus clausus*) for a quarter of a century, numerous measures have been proposed for years. The latest was to require general medicine interns to spend a fourth year in under-medicalized areas, a measure that raised a fierce opposition from the interns concerned.

According to the mentioned above Senate report, this shortage of doctors is reflected in the fact that:

- 30% of the French population lives in a "medical desert"
- 1.6 million French people give up medical care each year
- 11% of French people over 17 do not have a regular doctor".

Wishing that the freedom of installation and the informed choice of the professional path of young doctors be respected, the French National Academy of Medicine recommends:

1. The introduction of a one-year citizen medical service for newly graduated physicians within the limited framework of a contractual commitment. This citizen medical service would allow the medicalization of under-dense areas to be reinforced and the career choice of young physicians to be based on a field experience.

This Citizen medical service will be organized :

- in the territories, jointly by the health regional agencies ("agences régionales de santé; ARS), the faculty or faculties of medicine, medical doctors and the elected representatives of the territory, according to local needs;
- within the framework of a salaried position, based on the salary scale of hospital practitioners;
- using a professional infrastructure (travel, premises and operating costs, etc.) at the expense of local authorities, which will also offer logistical assistance to the doctor and his or her family

(housing, priority registration of children in nursery schools and schools, possible help for the spouse's employment, etc.);

- targeting mainly the ambulatory practical medicine but also employment in public or private health establishments.

2. The implementation of measures encouraging recently retired physicians to combine employment and retirement while allowing their contributions to generate additional rights

3. The sensitization of the population to the proper use of medicine, including the respect of appointments made with physicians and other health care professionals, and the recognition of the service rendered by the French health care system regarding its complexity, its cost and its practice difficulties.

(*) The Academy adopted the text of this press release by 52 votes for, 13 votes against and 10 abstentions.