Brief Communication

Rehabilitation medicine in the Kingdom of Saudi Arabia

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The purpose of this article is to discuss on the need for rehabilitation medicine with emphasis on its level of development in the Kingdom of Saudi Arabia. The Kingdom is the largest country in the Middle East occupying approximately four-fifth of the Arabian Peninsula and has a population of approximately 27,136,977.1 Health services in Saudi Arabia are provided mainly by government thru Ministry of Health (MOH). Some Government agencies including Ministry of Defense and Aviation, Ministry of Interior, National Guard. In addition to others are also participating in providing health services. In the meantime, there is a growing role and increased participation from the private sector in the provision of health care services. The private sector accounts for 21% of the 53,888 hospital beds in Saudi Arabia, which totaled 11,362.2,3 The majority of the secondary healthcare services are provided in the 244 general hospitals. Other governmental health services, which consist of 38 hospital and 113 private hospitals.2,3

Modern medical rehabilitation in Saudi Arabia started in the early 1960's following an outbreak of poliomyelitis with many victims, mainly children. This resulted in mainly paralysis or weakness of the lower extremities. Most of the affected people, who survived, were left with some sort of disability largely related to mobility. Because there was no medical rehabilitation department in the few hospitals present at that time, most of the patients were sent abroad by the government for surgical correction of deformity and/or fitting with braces to help in walking. Others received some sort of physiotherapy, but that was limited to patients living in major cities. In early 1970's, the government launched some prosthesis and orthotic centers in some of the MOH hospitals, but that focused only on braces or caliper fitting. In the beginning of the 1980’s, the Ministry of Defense and Aviation commissioned many medical rehabilitation centers within the Military Hospitals. Some private hospitals also allocated some rehabilitation beds for people who sustained work related disability and were insured by general organization for social insurance. Only in the beginning of the twenty first century when real medical rehabilitation centers were opened in few of the MOH hospitals. In addition, there have been some private for no-profit centers, which opened, including Sultan Bin Abdulaziz Humanitarian City. Currently, there are many rehabilitation hospitals/centers, mainly in large cities, such as Rehabilitation Unit of Riyadh Military Hospital, Rehabilitation Unit of King Abdulaziz Medical City (Riyadh), Rehabilitation Hospital of King Fahad Medical City (Riyadh), Riyadh Medical Complex, Rehabilitation Hospital of Al-Hada Military Hospital (Taif) and Riyadh Care Hospital (Private). Additionally, Disabled Children Association has 7 centers and provides medical, social and vocational services for children. Moreover, most of MOH hospitals in different regions of Saudi Arabia has Medical Rehabilitation Department. Their services are mainly physiotherapy for outpatients.

There is still a greater requirement for more rehabilitation centers due to the following reasons; growing population, increased road traffic accidents with the consequences of traumatic brain injuries, spinal cord injury, amputation fractures, and others.4,5 There has been a change in life style and increased incidence of diabetes mellitus, hypertension, ischemic heart disease and stroke.5 In addition to that, there are an increased number of children born with cerebral palsy or hereditary diseases because of the consanguinity. Some Hospitals, like the Riyadh Military Hospital (RMH), have worked toward training of Saudi Residents to specialize in Rehabilitation Medicine. In 2000, a memorandum of understanding (MOU) was signed between the RMH and the Australasian Faculty of Rehabilitation Medicine (AFRM). By that MOU, the AFRM recognized the first 4 years (of 6) of the residency training in rehabilitation medicine at RMH and the last 2 years of training to be spent in Australia and to set for the exit examination after that. It was active until recently when it was stopped because of many reasons including the change of administrative rules and regulations at AFRM. In 2010, the Saudi Commission of Health Specialties (SCFHS) established the Saudi Board of Physical Medicine and Rehabilitation. It is a 4-year residency program. A scientific committee and other related committees were formed. The first enrolled residents will be in October 2011. There are 3 major hospitals, all in Riyadh, which started and submitted their interest in joining the program and are credentialed by the SCFHS. Moreover, there are some health authorities that are sponsoring Saudi residents undergoing training in the field of Physical Medicine and Rehabilitation (PM&R) in other countries including Canada, Australia and France.

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There is still need for more physical therapists, occupational therapists, speech language pathologists, social workers, prosthetists and orthotists and clinical psychologists. Currently, there is only one school of occupational therapy in Saudi which offers a bachelor degree, and it has started only few years ago. For this reason, the number of Saudi Certified Occupational Therapist is very low. It is believed that we can have a better organization of rehabilitation services when the number of hospitals increases and when more Saudi physicians join this newly introduced specialty in Saudi Arabia. However, we need decades before we have self-sufficiency in all specialty of rehabilitation medicine. Currently, there are approximately 170 rehabilitation medicine physicians registered at the Saudi Commission for health specialties, 85% of them are non-Saudi. It is hoped that the number will increase gradually.

Saudi Arabia represented by the Riyadh Club of Rehabilitation Medicine has been an active member of the International Society of Physical and Rehabilitation (ISPRM) since it was found and the First Regional Conference of (ISPRM) in February 1-4, 2001 was organized in Riyadh. It was a very successful scientific gathering with approximately 60 national and international speakers. It has attracted more than 700 attendees. It was a good chance to introduce PM&R as a medical specialty. One of the sessions was directed toward training in the field of PM&R and the President of Saudi Commission for Health Specialties (SCFHS) chaired the session during that time. The Canadian, American, Australasian and the Jordanian training programs were presented. It was the cornerstone for recognizing the importance of the formation of Saudi Board of PM&R. Recently, there was a royal decree in April 2011 to expand the Health Services and number of beds in many hospitals with the cost of 4.2 Billion USD. Rehabilitation beds were specified in that decree.

One of the problems found for the newly graduating physicians not choosing to specialize in PM&R is the lack of recognitions for the importance of PM&R in treating and rehabilitating patients with special needs by some colleagues. Others, including the occasional unnecessary dispute with some of the medical rehabilitation professionals. Until now the PM&R is not included properly in the Medical School curriculum except in one University. There is an effort to include it in most of the colleges of Medicine in Saudi Arabia. Some interns have rotated in some rehabilitation medicine departments, as part of the electives and that was a great chance to disseminate the specialty.

In conclusion, due to the rapid population growth, diseases and trauma leading to disability including: systemic and congenital diseases and road traffic accidents, there are still a greater requirement for more rehabilitation centers, rehabilitation medicine physicians and rehabilitation team professionals in the Kingdom of Saudi Arabia.

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