Editorial RESP

Scientific assessment and balance of the 14th Congress and 21st Conference of the Spanish Society of Prison Health held at Jerez de la Frontera, Cadiz

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A lot of water has passed under the bridge since the Spanish Society of Prison Health organised its first congress and many things have changed since then. We've even changed centuries.

It's been a long road, with many challenges along the way, and we can feel rightfully proud of what's been achieved. The prison population with human immunodeficiency virus (HIV) dropped from 32% in 1989 to 3.8% in 2021. Almost all the current patients are receiving treatment and have almost undetectable viral loads. Hepatitis C dropped sharply from 48.6% in 1998 to 0.9% in 2021. Cases of tuberculosis went down from 523 in 1996 to 24 in 2021.

Our main challenge was infectious diseases, and we've received a lot of recognition for the work we've done in controlling them. The presence of new treatments has had a lot do with our success, but our enthusiasm and dedication also had a large part to play.

But now we are facing changing times and different challenges, and the non-application of the law and a shortage of human resources are making such issues hard to resolve, and so we should look to the future with some concern.

The appearance of new diseases, such as the recent pandemic, the aging HIV+ population, now associated with age-related diseases, with multiple interactions and adverse effects that can occur in a highly polymedicated population or the growing

number of inmates with psychiatric problems (1,834 inmates included in comprehensive care programmes for the mentally ill on 31 December 2021, while the number of patients who are not included is hard to calculate) are realities we are facing. We cannot also ignore the increasing number of inmates from other countries (12,519 in late September 2022), with diseases that we didn't even think about until now, the spike in sexually transmitted infections, especially amongst the young, increasingly frequent resistances to antibiotics or the relevance of early detection of new transmissible diseases that are appearing in our environment. All of the above, together with a lack of personnel, are just some of the new challenges to be faced by the carers who will replace us in the future.

This year's congress set out to respond to these new challenges in the roundtables we organised. They ranged from discussions on how to continue with the control of infectious diseases and considerations on diseases that were uncommon in Spain until now, chronic pathologies, control and effective use of drugs, where the prison pharmacist (who up till now has hardly been visible in our congresses) plays an ever more important role, alternatives to prison sentences for psychiatric patients and the need for psychiatrists in prisons.

The roundtables that made up the congress (pharmacy, infectious diseases, primary care, mental

health and management), tackled all these issues with rigour, and the quality of the discussions will help us all to at least try to overcome these new challenges in spit of the current difficulties that we face.

It would be interesting at this point to draw up a scientific balance sheet of the 14th National Congress and the 21st Conference of the Spanish Society of Prison Health held at Jerez de la Frontera, Cadiz, to help and encourage us for the next congress, to ensure that with more time, there will not only be more studies and presentations, but even better ones, with a stronger presence and participation of nursing, medical and pharmaceutical personnel from prisons all around the country.

50 scientific studies related to the thematic areas of the congress were received. Besides the day to day issues, they also brought to light the concerns shown in improving healthcare for inmates. 39 were accepted (78%), 13 of which were oral presentations (5 on primary care, 4 on infectious diseases, 2 on pharmacy, 1 on mental health and drug addiction and 1 on management).

Most of the presentations accepted came from authors in Catalonia, with 16 (41%); followed by the Basque Country, with 6 (15.4%); Madrid with 5 (12.8%) and Andalusia with 3 (7.7%).

Most of the presentations focused on primary care, infectious diseases and mental health (18, 12 and 10 respectively); while 6 on pharmacy and 4 on management were also submitted.

More than 50% of the first signatories of the studies submitted were nursing (29 presentations), just over 30% were physicians (15) and 6 were pharmacists.

6 of the 11 presentations that were not accepted were on issues of mental health and drug addiction, 4 were on primary care and 1 on management.

5 awards were given to the best presentations, one for each subject in the congress, 3 of which were given to studies from Catalonia and 2 from prisons in the Basque Country.

These results, plus the presence of 150 congress attendants, more than 30 speakers from all around Spain and, above all, the quality of the debates and the high attendance levels at the sessions, are good reasons for feeling very satisfied with the final balance in organisational and scientific terms. Evidently, to grow and improve, we need a certain capacity for selfanalysis and positive criticism, but we feel sure that even more will be achieved at the next congress in 2024, and by doing so our Society will be more visible and successful and above all, it will have a viable and relevant future.

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