

STATE OF ART OF BALNEOTHERAPY/THERMALISME IN ROMANIA

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Abbreviations:

MS-The Ministry of Health;

CNAS-National Health Insurance House;

CNPAS-National House of Pensions and Other Social Insurance Rights.

MDRT-The Ministry of Regional Development and Tourism;

OPTBR-Organization of Spa Owners;

ANAT-National Association of Tourism Agencies;

Romania owns almost 30% of European natural resources for balneotherapy/health resort medicine consisting in climate (relief, hydrology and vegetation, including salt mines and caves microclimate), mineral/thermal waters (for bathing and drinking cure), mud/peat and gases.

Climate is temperate continental with four distinct seasons. The average annual temperature is 11°C (52°F) in the south and 8°C (46°F) in the north. Precipitation levels are over 750 mm/year with regional variation, for example in the south-central parts levels are around 600 mm/year and in the Danube Delta, rainfall levels are very low-around 370 mm/year. Romanian relief is distributed roughly equally between mountainous, hilly and lowland territories. Disposition of relief is enriched by an enormous number of springs and specific vegetation.

Romania has different types of **mineral/thermal waters**: oligomineralized, alkaline, salty, sulfurous, magnesium, metallic, thermal waters, all of them with different chemical composition. Mineral or thermal water are used for drinking cure, bathing cure, aerosols, and gynecological applications¹.

Mud is one element of nature having immense impact on the human body in health as well as in sickness. Mud is made from substances formed in natural conditions under the influence of geological processes and which in smoothly divided state and in mixture with water are used in medical practice as mud bath or local procedures. (ISMH). Some of the healing effects of the mud are known empirically from the antiquity, others have been described and studied recently, others have remained even today at the stage of summary explanation.

Gases are represented by emanation of dry carbon dioxide named mofeta and of hydrogen sulphide named sulphatarium used for vascular and chondroprotective effects².

Balneoclimatology is a part of medical specialisation in rehabilitation and physical medicine. Admission in specialisation is made after a national contest and education lasts four years. Rehabilitation using natural therapeutic factors is equally: traditional and contemporary.

After 1990, Romania inherited a health system funded by state, type Semashko, the decision-making process was completely centralized, with no

separation between the beneficiary and provider³. Despite numerous reform efforts, developments were slow and still are an ongoing process.

Key actors in the balneotherapy field are:

- ▶ The Ministry of Health (MS);
- ▶ National Health Insurance House (CNAS);
- ▶ 3. National House of Pensions and Other Social Insurance Rights (CNPAS).

For the medical tourism sector, main actors are:

- The Ministry of Regional Development and Tourism (MDRT);
- Organisations and associations involved in tourism activity, such as: Romanian Organization of Spa Owners (OPTBR), National Association of Tourism Agencies (ANAT); Trade Unions (Sindromania)

Key actors in medical balneotherapy field

1. Ministry of Health

In Romanian health system, Ministry of Health, is the authority for strategy, regulation, monitoring and control. Ministry of Health has subordinated forty - two decentralized public health authorities, county ambulance services and other institutions⁴. Among them are the National Agency for Medicines and Medical Devices and National Public Health Institute. In addition, Ministry of Health coordinates research and development institutions, of which the National Institute of Rehabilitation, Physical Medicine and Balneology is the metodological forum in the field. Moreover, a number of over 60 health units are directly under the authority of Ministry of Health. Most of them are hospitals, some among the highest in the country (eg, Techirghiol Balneal and Rehabilitation Sanatorium).

2. National Health Insurance House (CNAS)

National Health Insurance House assures unified and coordinated operation of national social health insurance system and the management of Unic National Fund of Health Insurance (FNUASS). It has 42 subordinate county health insurance houses and collaborates with Health Insurance House of the Ministry of Defence (OPSNAJ) and Health Insurance House of the Ministry of Transport⁵.

Framework Agreement and its implementing rules establishes for each year medical services provided to policy holders and settled in the contractual relations between CNAS and service providers at all levels. Balneal rehabilitation services are financed up to 70% by the National Health Insurance House (standard condition of accomodation, meal and treatment), from FNUASS.

3. National House of Pensions and Other Social Insurance Rights has the mission to administrate the public funds of pensions, work accidents and profesional diseases⁶. From these public funds are supported medical balneal activities of rehabilitation of retired peoples, after work accidents and profesional diseases. The National House of Pensions and The Ministry of Health own 20% of buildings patrimony and facilities for balneotherapy in different locations and they complete the needs by public auction from the privat owners.

Key actors in tourism sector

a. The Ministry of Regional Development and Tourism (MDRT) has the strategic planning function of products and turism destinations (including balneal products and destinations)⁷.

b. Organization of Spa Owners (OPTBR), National Association of Tourism Agencies (ANAT), Trade Unions (Sindromania) own facilities for balneotherapy.

Romanian Balneal Patrimony

Romanian balneal patrimony included in 2009 160 spa entities from which 100 are registered in "Health/Spa Resort Register" edited by "Ministry of Regional Development and Tourism" after the authorization of natural factors and methodology of using them made by "National Institute of Rehabilitation and Physical Medicine" and the number increases every year. Recently the MDRT licensed at European standards 11 localities as balneal resort and are in progress to obtain this license other 10 localities.

In 2011 were 4850 beds in city hospitals and balneal sanatorium for Rehabilitation, Physical Medicine and Balneology and 463 beds for Neuro-Psycho-Motor rehabilitation.

Infrastructure of resorts consists in 3 types of buildings/facilities for cure: hotels from 19th century, hotels from second part of 20th century and new spa complexes developed in last years. Most of them, 80% of patrimony, belong to the private owners (OPBTR, ANAT, Sindromania), and the rest of 20% of patrimony is public property of Health Ministry and Pension Fund⁸.

Strategy for Development

For a correct direction of development is important to reestablish the reliability in health tourism and upsurge relationship between output product and market requirement. For the opening up of balneal tourism is needed to choose one or more positions on the market, to define the strategy to be applied to each combination market/product and to define the way of financing the activity (public/private). Starting with 2008 year the Ministry of Regional Development and Tourism realized SWOT analysis (table 1) in order to establish the strategy of the future.

According to the evaluation made by Ministry of Regional Development and Tourism, the health tourism market includes: medical tourism (surgery,

esthetic), balneal tourism (more preventive), thalassotherapy, hydrotherapy, wellness and/or spa, fitness and diverse training.

The market's trend of the health tourism is increasing in correlation with demographic evolution and asks products as: antiageing cure, esthetic medicine. Rehabilitation segment of the market is also increasing, but in urban neighborhood and linked to the business tourism. (table 2)

Taking into account the existing conditions and requirements, the department of strategy from the Ministry of Regional Development and Tourism synthesizes the master plans for the next three years⁸. (table 3)

The marketing concepts must be reevaluated and applied properly to each region.

1. Thermal city concept means public/private treatment base, medical supervised, having water (tap or thermo/mineral) for treatment and leisure, completed with cosmetic products and/or drinking waters. This marketing concept may be applied: around Bucharest, Black Sea shore, Bucovina, and Transilvania regions.

2. Antiaging resorts concept need: clinic/hotel, having all devices for thalassotherapy and/or natural medical product from plants/herbes, mineral waters and mud including Gerovital H₃, traditionally located on the Black Sea shore.

3. Wellness and spa concept is the newest direction of development that generally doesn't need accommodation, is private financed, is targeted to: relaxation, leisure, short time cure and is developed in urban centers for active peoples.

4 Classical balneotherapy concept refers to traditional using of natural therapeutic factors. Facilities having this destination must be improved at the level of comfort and diversified medical activities. The European Directive from April 23th 2009 about reimbursement and subvention of

transfrontalier medical services (treatments) is a good opportunity for giving plus value of Romanian tradition and experience in balneotherapy.

Due to the current social transformation: hard work, long time of activity and short time for resting, the duration of cure decreased up to 7,5 - 8 days and many peoples practice the week-end cure, one week cure or other type of short time treatment applied in location named spa: spa resort, spa hotel, spa Centrum, etc. Such short duration of cure is not adequate for balneotherapy. For the purpose of medical use, balneal products/activities will take places in regions national and/or international known, with important potential for balneal tourism development (mineral/thermal waters, mud), where the demand for balneal products (antiageing, weight loss, antistress, etc) is significant for the national and international market.

In these conditions the tasks of Ministry of Health, for goals achievements are⁹:

1. improvement of medical/sanitary rules at European standards for activity in balneal resort;
2. to promote CME addressed to general physicians about indications and contraindications of balneal medicine (criteria of sending patients);
3. to increase number of qualifications and of specialists in balneal medicine, for thalassotherapy, wellness and spa;
4. to promote the medical values of natural resources for branding Romanian balneal resorts;
5. to organize cluster for slow and nice aging in order to settle Romanian resorts on antiageing type.

Both actors performing in medical balneal tourism need to work together for a common future. In the medical field is needed more elasticity to offer both medical and wellness programs and more cooperation to the master plan made by tourism actors. The tourism actors must be involved into the opening up of

balneal/thermal patrimony because research in balneology and balneal medicine means high costs for discovery, characterize and maintaining in exploitation the resource. The economic and political leaders will help this collaboration and cooperation if the actors make themselves heard in this polyphony of balneal medical tourism.

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Table 1 SWOT analysis of balneal tourism

<p>Strength</p> <ul style="list-style-type: none"> • Good potential resources for balneal tourism • Loyal customer that consider balneal resort as tourism destination. • Strong belief in healing effects of natural therapeutic factors • Holistic and integrative approach of patient and of illness 	<p>Weakness</p> <ul style="list-style-type: none"> • Poor quote of treatment and accommodation • Old customer and reduced possibility of renewal of clients • Image of sanatorium closer to the hospital than to hotel • Diminution of research in this field • Unequal level of professionalism at reception desk, restaurants, • Too much actors from private and public/state sector involved
<p>Opportunities</p> <ul style="list-style-type: none"> • Perspectives of development based on unexplored zones and resources • Availability of European fund for development • Aged patients for antiaging Aslan cure that were applied in balneal resorts (model that may be used) 	<p>Threat</p> <ul style="list-style-type: none"> • hard-line competition and competitors in the field • Strong dependence on pension fund and state subvention

Table 2 market segmentation of the balneal sector

Balneal segment	market	products	motivation	Market trend
One activity among others in a tourist destination	Tourists from Europe for some destinations: Maramures, Litoral, Bucovina Participants to events: conferences, symposiums	Wellness in a treatments base or integrated in a hotel Congresses, conferences	The interest represented of the destination: therapeutic factors, environment Work meeting	+ ++
Health tourism	Patients on their own	Private clinics, health centers for antiaging cure, esthetic medicine, etc	The value of physicians, recognized research, special technology, recommendations	++ (niche) linked to the demographic evolution
State subvention	Romanian customer, social assisted, retired	Medical prescribed treatments	Low cost, reimbursement by state	--
Rehabilitation centers in the urban neighborhood	People from big urban overcrowding	Rehabilitation centers	Nearness, architectural aspect, modern	++ Linked to the business tourism

Table 3 synthesis of master plan

Sector/domain	Type of approach: resort and/or equipments	Targeted market
Tourism destination : <ul style="list-style-type: none"> • Thermal city • Thalassotherapy • Green national resort 	As resort with private investment in hotels/centers and public investment for the city including cultural dimension	Central Europe, Ukraine, Russia
Medical tourism: Antaging, antismoking, weight loss, etc	As clinics/cure Private investments in equipments	Occidental Europe, USA (niche market in process)
Balneal and social	As balneal resort with public/state investments and support/subvention	National, social assisted
Wellness, fitness in urban centers	As centers within or separated from hotels Private investments in equipments	National, urban