Rebuilding New Orleans

Rather than mourning Hurricane Rita's decimation of New Orleans, public-health officials are now thinking of it as an opportunity. They plan to rebuild the city's health system with a new focus on primary care. But Washington must first approve the necessary funds. Todd Zwillich reports.

As with almost every part of New Orleans, the public-health system was ravaged by Hurricane Katrina and its successor Rita. Several of the city's hospitals were knocked out of action, some for weeks but others indefinitely. Clinics all over the region were damaged, and an unknown number were completely destroyed. Add to that a near total loss of medical records and even personnel in many parts of the region, and it soon became clear that with everything else they had lost, the city's mostly poor residents would go without even the meagre health services that had sustained them before the storms.

But no sooner had the waters started to recede than officials began to think that the catastrophe could also be an opportunity.

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Hurricane Katrina decimated health services in Louisiana and Mississippi

A small group of public-health officials have hatched a plan to rebuild services not as the dysfunctional and underfunded system they were, but as an example of what a modern and technologically advanced system can be.

Before the storm, Louisiana ranked at or near the bottom of the list on a host of national public-health indicators, from child mortality and prenatal care rates to incidence of heart disease, HIV, and diabetes. 25% of the city's residents lacked health insurance, driving them to seek care at emergency rooms, where they waited for up to 24 h to be seen.

"It was an inadequate system", says Kevin Stephens, a physician and chief of the New Orleans Department of Health.

Planners are now trying to shift the city's focus from its prestigious but outdated tertiary-care facilities to a network of satellite clinics concentrating on primary care and disease prevention. Local officials also want to improve the city's ability to communicate health messages and prevention to the public.

"We are going to focus on allegiance to people and give up on allegiance to institutions", Stephens says. But, he cautions, no one knows yet how much it will cost because no one knows how many evacuated residents will return.

Still, the idea has excited federal health officials, who will be responsible for convincing Congress to spend money on a new health system. Refocusing US health care from treatment to prevention has been a government aim since President Bush took office.

Washington has pushed several initiatives designed to speed the development of electronic medical records. Now, officials see New Orleans as the perfect laboratory to show what computer records and automated connectivity might do for care efficiency and epidemiology.

"This is what we're trying to do in the rest of the country. Why not do it here, right now when we have the opportunity", Surgeon General and US Public Health Service chief Richard Carmona told *The Lancet*. "I don't know of any other time in history where there is a chance to rebuild at this level."

Of course, this isn't the first time officials have proposed a public-health wish list. And if history is any guide, their rebuilding priorities are likely to run into the harsh reality of budget priorities.

Many experts were excited by a post-9/11 buildup meant to gird the nation against terrorist attacks and revamp the crumbling public-health infrastructure. 4 years on, the national stockpiles of anthrax vaccine and ciprofloxacin are cold comfort for promised publichealth improvements that never came.

Though President Bush has already pledged to rebuild Gulf Coast areas devastated by the hurricanes, it remains far from decided how that money will be spent and who will have the final say over what it's used for.

"I'm a little nervous, always, until you see the money", Stephens says. "But I'm tired of being at the bottom . . . "Now's the time for us to get to the top."

But Louisiana is a long way from reaping the results of this new mood. Fred Cerise, the Louisiana Secretary of Health and Hospitals, predicted that health indicators for New Orleans' poor would measurably improve as a result of the visionary rebuild. But he also warned that even a complete renovation will only go so far in solving the city's problems. "There may be an immediate infusion to help us... [but] at the end of the day, there are still a lot of uninsured people and not enough resources."

Todd Zwillich