

Case of a Diabetic Patient: One patient, a diabetic, went to the polyclinic immediately after getting a nail stick. He was given a needle for the injury. The following day, he returned due to pain and requested antibiotics, which were provided in tablet form. The next morning, he returned again, in severe pain, and was finally given intravenous antibiotics. That afternoon, he begged to be sent to St. Maarten. Upon arrival, the doctor in St. Maarten asked why he had delayed coming, and had to amputate his toe due to severe infection.

Financial Strain During Overseas Treatment: When patients are sent overseas for medical treatment, some are away for a week or more. Often, patients receive their allowance money only after they return home from the medical trip. This delay forces those who cannot afford it to borrow money from family members or friends. This situation is particularly challenging given the high cost of living in Aruba, Curacao, and St. Maarten.

Inadequate Allowance: Patients receive only \$20 per day according to their destination. While some may argue that patients should contribute to their own food expenses, many simply cannot afford it. At home, they can rely on family, friends, and neighbors for support, but when overseas, they face additional stress and hardship due to the insufficient financial support and their existing health issues.

Companion Allowance Issues: When a companion travels with a patient, the allowance is put into the patient's account. This is problematic as the patient is often in the hospital, leaving the companion without funds. The solution should be to provide allowances to each individual separately.

Doctor Availability and Emergency Response: There are significant issues with doctors not being available for emergencies. They often expect nurses to handle situations and refuse to come to the hospital, leading to severe consequences. Recently, this resulted in a patient's death, with doctors blaming nurses. The solution should be to have on-call doctors stationed at the hospital with a designated room for rest if necessary.

Case of a Patient with a Tumor: One person brought their mother to the hospital with a severely swollen head. The doctor initially refused to come in, only arriving later and merely prescribing paracetamol. The daughter insisted on further tests, but none were done. The following day, they traveled to St. Kitts, where a CT scan revealed a large tumor. The mother died two months later.

General Incompetence: Many local doctors seem to lack sufficient knowledge or willingness to help. The community is forced to seek medical care off-island in places like Colombia, St. Domingo, and St. Kitts, a viable option only for those who can afford it.

urge the responsible authorities to take immediate action to address these critical issues. The health and well-being of our community depend on a well-executed and responsive health care system. It is imperative that we see tangible improvements to ensure that all residents receive the quality care they deserve.

I am writing to express my deep disappointment in the current state of the health care system on St. Eustatius. While I acknowledge that we are fortunate to have access to one of the best health care systems in the world, the execution and implementation on our island leave much to be desired. Despite continuous complaints and feedback from the community since its inception, many people continue to suffer due to the inadequacies in its execution.

- **Poor Implementation:** Despite the overall quality of the health care system, the local implementation on St. Eustatius has been subpar, resulting in numerous challenges and inefficiencies.
- **Community Complaints Ignored:** The community has been vocal about their concerns since the health care system was established, but these complaints seem to fall on deaf ears.
- **Suffering Due to Execution Failures:** Many residents are experiencing unnecessary suffering due to the lack of effective execution and support within the health care framework.
- **Inadequate Resources:** There appears to be a significant lack of resources, both in terms of medical personnel and equipment, which severely hampers the quality of care.
- **Delayed Treatments:** Patients often face delays in receiving treatments and consultations, exacerbating their health issues.
- **Lack of Specialist Care:** There is a noticeable absence of specialist care on the island, forcing residents to seek medical attention elsewhere, which is both costly and inconvenient.
- **Ineffective Communication:** There is a communication gap between the health care providers and the community, leading to misunderstandings and unmet health care needs.
- **Insufficient Follow-Up Care:** Post-treatment follow-up is often inadequate, resulting in complications and prolonged recovery times for patients.
- **Hospital Issues:** Our hospital itself is a major concern. Many doctors sent to work in Statia are incompetent, and those who have been here for years are equally ineffective. This has led to dire consequences for patients.
- **Negligence Leading to Amputations:** Due to the negligence of the medical staff, patients often have body parts amputated because infections are not treated promptly. Instead of sending patients to the appropriate specialists off-island in a timely manner, they wait until the infection has spread extensively.
- **Lack of Proper Facilities:** The local hospital lacks the necessary knowledge and facilities to perform critical operations, leading to unnecessary suffering and higher costs.
- **Unnecessary Costs and Suffering:** Prompt referral to specialists would only incur travel costs, but delays result in more severe health issues, leading to higher overall costs and patient suffering. Patients are often questioned by specialists about the delay in their referral, highlighting the inefficiency of the current system.
- **Case of a Broken Wrist:** One gentleman received a broken wrist and was sent to St. Maarten for further assistance. Screws were put in his wrist, and he was supposed to return to St. Maarten after a month. However, he wasn't sent back until three months later, by which time flesh had grown over the screws, complicating his treatment further.