Section 8 | Healthy aging and national finance |

08-2 Research in balneology in France: how it helped keeping balneotherapy financed by the National Health Insurance Fund

Claude Eugene BOUVIER1,2, Thierry DUBOIS1
1) Conseil National des Exploitants thermaux (CNETh), Paris, France
2) Association Française pour la Recherche thermale (AFRETh), Paris, France

French balneotherapy is highly dependent on public regulations and finance. State and public bodies have a major say on cares delivered, in both nature and number, on required qualifications of therapists, on a fixed 3-week’s duration, on hygiene and safety. At the same time, public financing of cares is by far more important than the contribution of complementary private health insurances and out-of-pocket payments by the patient.

Some 10 years ago, the National Health Insurance Fund openly stated that hypothesized health benefits of spa therapy were no longer good enough to keep the subsidizing of thermal treatments. Clinical research with flawless methodology had to be organized to prove thermalism has a true medical interest.

Years later the challenge has been met and fewer opponents question any longer the virtues of hydrotherapy. The actual medical benefit of spa treatments is now well established in such fields as generalized anxiety disorders, knee osteoarthritis, obesity and overweight, post-breast cancer rehabilitation, healthy ageing, ...

This financial effort of more than 10 million euros proved to be fruitful as the National Health Insurance Fund recently renewed the subsidizing of thermal treatments.

However, in the wake of spiralling health costs putting a strain on public spending, a new requirement is set on spa center operators. Nowadays, they also have to prove that balneotherapy is cost-efficient in comparison with other therapies. The yet to be proved economic relevance of spa therapy as well as new expectations are set to bring about a dramatic shake-up by which alongside the traditional treatment of chronic diseases, spa companies will have to address new fields of competences, such as prevention, rehabilitation, quitting of addictions, postponing of age-associated loss of autonomy, etc.

Keywords: Financing of balneotherapy, Research, Chronic diseases, Ageing