What innovations in medicine do we need after COVID-19 to guarantee fair access but also the safety and efficacy of health services.

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The first semester of 2020 has presented Italy, and many prominent Countries, with a challenge we had theoretically prepared for since over a decade following repeated alarms of increasing plausibility of zoonotic disease diffusion facilitated by amonq humans climate change and globalisation: pandemic. Nevertheless, а and sadlv ironically, most of the hardest hit Countries hail from the top scorer in the Global Health Security Index and in International Bank for Reconstruction the and Development's IBRD 43420 report (which included a Predicted country vulnerability to pandemic economic loss, 2018 (% GDP loss) estimate).

What exactly went wrong then? And what lessons can we learn from facing (some with more success than others) the SARS-CoV-2 pandemics that, as of the time of writing, is yet to be controlled on the global scale?

We will touch on the economic inclusivity (or lack thereof) of public health policies that have been deployed; on the state of digital services in healthcare and the virtuous examples of citizen partnerships it has produced e.g. in Taiwan, but also the impact of a rushed adoption after "pilot-itis" of of practices decades branded critical teleconsultations; and the role on of harmonisation between healthcare, social policies, and continuing education ... to conclude proposing a map of the adjacent their affordability possible and and desirability.