

# Navigating the Post-COVID-19 Landscape: Data-Driven Revitalization of the Italian Healthcare System amidst Budget Constraints, Workforce Shortages and the PNRR

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## ABSTRACT

*The COVID-19 pandemic has exposed the vulnerabilities of global healthcare systems, accentuating pre-existing challenges faced by nations, including Italy. In this article, we delve into Italy's innovative use of data-driven strategies, supported by the European Union's Next Generation EU initiative (PNRR), to reshape its healthcare landscape post-pandemic. Amidst budget constraints, workforce shortages, and an aging population, this endeavor gains significance as Italy charts a course toward adaptive resilience.*

*Combining cutting-edge technology, intricate data synthesis, and advanced analytics, Italy's response navigates the complex landscape of healthcare accessibility, efficiency, and quality. The transformation encompasses not only resource allocation and personnel management but also patient empowerment, telemedicine adoption, and evidence-based policy-making. We explore the multidimensional nature of this journey, addressing challenges, nuances, and the promising horizons that data-driven solutions unfold within Italy's healthcare tapestry.*

## Keywords

Data-driven healthcare, Budget constraints, Workforce shortages, COVID-19 pandemic, Next Generation EU initiative, Resilience, Telemedicine, Patient empowerment, Evidence-based policies.

## Introduction

Amid the wake of the global upheaval caused by the COVID-19 pandemic, a profound wave of introspection has surged across nations. The pandemic's far-reaching impact has cast an illuminating spotlight on vulnerabilities inherent within even the most robust healthcare systems. With successive waves of the pandemic crashing upon healthcare institutions worldwide, pre-existing challenges have come into sharper focus, exposing the inadequacy of conventional approaches in navigating these uncharted waters. At this pivotal juncture, in the aftermath of the seismic disruption triggered by the pandemic, healthcare systems are undergoing a decisive examination [1] - a litmus test that measures their adaptability, resilience, capacity for innovation, and the agility to evolve.

Within the pages that follow, we embark on an immersive exploration of Italy's response to this unprecedented challenge. Italy, a nation profoundly marked by the toll exacted by the pandemic, emerges as both a crucible of innovation and a hub of strategic reevaluation. In the midst of a deep financial crisis compounded by glaring voids within its medical personnel infrastructure, a guiding light emerges: a resolute embrace of data-driven strategies [2], propelled by the European Union's Next Generation EU initiative (named in Italy as the National Recovery and Resilience Plan (NRRP)) [3,4]. As we peel back the layers, a narrative of transformation unfurls—a narrative that transcends the mere act of overcoming adversity and instead harnesses it as a potent catalyst for sweeping change.

The strategic significance of Italy's endeavors within this narrative cannot be overstated. The journey from a healthcare landscape constrained by limitations to one fortified with resilience is more than a response to immediate challenges; it is an odyssey illuminated by data—a delicate interplay between cutting-edge

technology, intricate data synthesis, and advanced analytics. In this journey, Italy embodies the very essence of resilience, carving a trajectory defined not by constraints, but by the boundless potential for transformation.

Italy's drive for transformation, emerging in the wake of the pandemic's financial upheaval, is anchored in an unwavering commitment to fundamental healthcare principles: accessibility, efficiency, and quality. However, this commitment extends beyond rhetoric, culminating in tangible, actionable solutions that resonate far beyond national borders. As we delve deeper into Italy's strategic response, a symphony of nuanced adaptations unfolds—where innovation harmonizes with necessity, ushering in a new era of healthcare provision.

At its core, Italy's response recognizes that this transformation demands a multi-dimensional approach. The backdrop of budget constraints becomes the canvas on which creative resource allocation and optimization take shape. Simultaneously, the stark realities of medical personnel shortages drive an exploration of data-driven workforce management, where predictive analytics and inventive solutions bridge gaps and foster a culture of healthcare personnel resilience.

Italy's transformative journey is not confined to the reorganization of resources and personnel alone. It embodies the empowerment of patients, where access to health data becomes the cornerstone of informed decision-making. It encapsulates the fusion of telemedicine and remote healthcare delivery, exemplified by Italy's swift transition to virtual consultations—a testament to the delicate equilibrium struck between technology and the human touch. Moreover, the transformation under scrutiny extends beyond the immediate present, casting its gaze toward policy-making and the enduring sustainability of healthcare. The infusion of real-time data and evidence-based policies equips Italy not just to navigate present challenges, but also to anticipate and preempt future uncertainties.

As we traverse the subsequent sections of this document, we witness Italy's strategic adaptations unfold through compelling case studies—each a testament to the power of data-driven strategies. We navigate the uncharted terrain of healthcare resilience, where Italy shines as both a harbinger of change and a guiding light for nations grappling with akin challenges. Notably, the demographic challenge in Italy takes center stage, particularly the aging of its population—an added layer of complexity that calls for innovative solutions.

Ultimately, the journey recounted within these pages goes beyond a mere recollection of Italy's response; it extends an invitation to witness the metamorphosis of healthcare provision exploiting the financial resources of the so called Italian National Plan of Recovery and Resilience (NPRR) [5,6] obtained from the Next Generation EU. It serves as a poignant reminder that adversity, when met with innovation and unwavering determination, can act as a catalytic force for monumental change. As we navigate

Italy's data-driven odyssey, we're compelled to reflect not only on today's challenges [7], but also on the limitless potential of tomorrow. All this while keeping in mind the profound financial crisis, the intricate challenges posed by an aging population, and the multifaceted issues confronting Italy's healthcare system.

### **Healthcare public expenditure, shortages of medical and nursing personnel in an aging Italy**

There are two concerning phenomena in the current Italian healthcare system post-COVID-19: the relative underfunding of public healthcare expenditure [8] and the decrease in medical personnel [9]. The 2023 Economic and Financial Document (DEF) [10] sheds light on the absence of a postpandemic shift in direction compared to projected healthcare spending until 2026 [11]. This oversight disregards the critical condition of Italy's National Health Service, eroding the principles of universality and equity, thus jeopardizing the constitutional right to health protection.

A vivid illustration of this scenario in Italy is exemplified by the adverse repercussions of unending waiting lists, nudging individuals towards private healthcare, escalating out-of-pocket expenses, and inflicting financial strain on families, occasionally leading to the avoidance of medical treatment. Inequities in service delivery across regions incite the phenomenon of healthcare migration, constraining access to innovations, and even contributing to a decline in life expectancy.

The 2023 DEF validates healthcare expenditure for 2022 at €131.103 million, slightly lower than the anticipated €133.998 million from the previous DEF 2022 Update Note. For 2023, the healthcare expenditure/GDP ratio decreases from 6.9% in 2022 to 6.7%. However, the estimated healthcare expenditure for 2023 is €136.043 million, signifying a €4.319 million rise compared to 2022 (+3.8%).

The ostensibly notable surge of over four billion euros in 2023 is, in part, attributed to the transfer of 67% of the 2022 healthcare expenditure to 2023 for the contractual renewal of executive personnel. Furthermore, the erosion of purchasing power, with the accumulated inflation for 2023 reaching +5% as per ISTAT, surpasses the +3.8% uptick in healthcare spending.

Looking ahead to the years 2024-2026, within a triennial span marked by an average annual GDP growth of 3.6%, the 2023 DEF anticipates healthcare spending to expand by 0.6%. The healthcare expenditure/GDP ratio slides from 6.7% in 2023 to 6.3% in 2024 and further decreases to 6.2% in 2025-2026. The absolute healthcare spending diminishes to €132.737 million (-2.4%) in 2024, experiences a surge to €135.034 million (+1.7%) in 2025, and ascends further to €138.399 million (+2.5%) in 2026, in comparison to 2023.

According to the 18th Healthcare Report 2023 by Crea Sanità (Center for Applied Economic Research in Health) [3] there's a shortage of 30,000 doctors and 250,000 nurses. To address this gap, considering population standards and current average salaries,

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it would necessitate a €30.5 billion increase in the National Health Service's (NHS) current spending.

Despite significant personnel additions, Italy continues to have a notably lower nurse-to-population ratio compared to other European countries: 5.7 nurses per 1,000 inhabitants in Italy compared to the average of 9.4 in France, Germany, the UK, and Spain. This leads to an imbalance where the Italian NHS operates with 1.42 nurses per doctor, compared to 2.52 in European reference countries. To meet the standards of these countries, nearly 224,000 nurses are needed, which would rise to over 320,000 considering the population over 75, the segment most in need of assistance. As for doctors, Italy has 3.9 per 1,000 inhabitants, slightly higher than the 3.8 of reference European countries. However, when considering the population over 75, Italy has 34.3 doctors per 1,000 elderly individuals, compared to the reference countries' 38.5. This highlights a deficiency of nearly 30,000 doctors concerning the elderly population.

The Crea 2023 Healthcare Report states that for the PNRR (Recovery and Resilience Plan) to effectively develop the territory, between 40,000 and 80,000 nurses are required. However, attracting them remains challenging due to several reasons: a 40% lower compensation compared to the European average despite the substantial workload, limited spots for nursing degrees in universities, and restricted career advancement opportunities. The shortage cannot be filled even with nurses coming from abroad, as Italy only employs 4.8% of its nursing workforce from foreign sources, compared to Switzerland's 25.9%, the UK's 15.4%, and Germany's 8.9%. To meet the standards of major EU countries, nearly 224,000 nurses would be needed, rising to over 320,000 considering the elderly population over 75, making necessary revisions to remuneration levels and skill mix. This involves rethinking not only the roles of doctors and nurses but also those involving nurses and healthcare operators, considering the increasing importance of non-selfsufficiency and the overlapping needs of health and social care.

### **The process of digitization**

Amidst these pressing issues, a glimmer of hope emerges in the form of data-driven health solutions [12]. Utilizing advanced analytics, technology, and comprehensive data integration, these strategies hold the potential to address critical shortages and financial constraints within the Italian healthcare landscape. Such approaches can aid in optimizing resource allocation, enhancing healthcare accessibility, and improving overall patient outcomes.

Despite significant personnel additions, Italy's nurse-to-population ratio remains significantly lower than its European counterparts, with 5.7 nurses per 1,000 inhabitants compared to the average of 9.4 in France, Germany, the UK, and Spain. This disparity accentuates the need for innovative approaches. Data-driven healthcare initiatives can potentially mitigate this imbalance by streamlining workforce distribution and optimizing nursing care delivery through evidence-based practices. Moreover, considering doctors, Italy's current ratio of 3.9 per 1,000 inhabitants slightly

surpasses the reference European countries' 3.8. However, the deficit becomes evident when focused on the elderly population over 75, with Italy having 34.3 doctors per 1,000 elderly individuals compared to the reference countries' 38.5. Leveraging data-driven approaches could aid in identifying geographic disparities in physician distribution and implementing strategies for equitable access to medical services.

The Crea 2023 Healthcare Report underlines the importance of data-driven health in the context of the PNRR (Recovery and Resilience Plan). While attracting and retaining healthcare professionals remains a challenge, data-driven solutions offer a potential way forward. By harnessing the power of data analytics, these approaches could not only enhance recruitment strategies but also optimize workforce management, thus improving healthcare delivery efficiency.

In conclusion, data-driven health initiatives hold promise as potential solutions to the prevailing challenges faced by the Italian healthcare system. These strategies offer avenues for bridging the personnel gap and optimizing financial resources, all while enhancing the overall quality of patient care. Embracing data-driven approaches could herald a new era of resilience and sustainability in Italy's healthcare landscape. In the realm of Italy's healthcare landscape, beset by fiscal constraints and workforce scarcities, data-driven strategies stand as a beacon of hope and innovation. This synergy between challenges and solutions is evident across various facets of the healthcare system.

In 2022, the Italian Public Administration invested over 7 billion euros in ICT (Information and Communication Technologies), marking a 5.8% increase compared to 2021. This figure is projected to continue growing over the next three years, thanks in part to the funds from the National Recovery and Resilience Plan (PNRR). Platforms and Infrastructure are the primary areas of expenditure, accounting for 49% and 20% of the total, respectively, followed by services (14%), data (8%), cybersecurity (4%), governance (3%), and interoperability (2%). The use of cloud technology is now widespread: 100% of local government bodies, 95% of regions and autonomous provinces, and 89% of central government agencies utilize cloud services. Furthermore, the utilization of unique usernames and passwords for citizens' access to certain government services is decreasing, in favor of digital identities like SPID, CIE, and CNS. The overall digitalization index of government entities is also increasing and improving: compared to previous assessments, the percentage of administrations classified as Digital Leaders (12%) and Advanced (66%) has grown, while the portion categorized as Digital Starters (21%) and Growing (1%) has decreased.

These are some of the insights from the two reports, "ICT Spending in the Italian Public Administration 2022" and "ICT Spending in Territorial Healthcare 2022," recently published by the Agency for Digital Italy as part of activities related to the "Three-Year Plan for IT in the Public Administration".

The overarching goal is to identify distinctive elements and behaviors within government bodies that contribute to a significant portion of Italy's public expenditure allocated to ICT. This effort aids in monitoring the key directions of Italy's public administration and healthcare digitalization journey. The data for 2023 regarding the trajectory of public expenditure for the digitalization of the Public Administration, particularly in the public sector, is not yet known. However, despite adversities stemming from high inflation, the consequent restrictive monetary policy, fears of recession, and geopolitical events, it appears that the trend continues in the same direction.

### Telemedicine as a Data-Driven Solution for Personnel Shortages, Cost Efficiency, and an Aging Population

In the context of Italy's healthcare landscape, beset by fiscal constraints, workforce scarcities, and the challenges of an aging population [13], data-driven strategies stand as a beacon of hope and innovation. This synergy between challenges and solutions is evident across various facets of the healthcare system. Amidst these pressing issues, a glimmer of hope emerges in the form of data-driven health solutions. Utilizing advanced analytics, technology, and comprehensive data integration, these strategies hold the potential to address critical shortages, financial constraints, and the unique demands posed by Italy's aging demographic.

### Integrating Telemedicine: A Practical Demonstration

To further elucidate the potential impact of data-driven approaches, we present a practical example that highlights the integration of telemedicine as a means to alleviate personnel shortages while also contributing to cost efficiency and addressing the needs of an aging population. Telemedicine, the remote delivery of healthcare services, has gained prominence as a versatile solution that can enhance healthcare accessibility, optimize resource allocation, and improve patient outcomes.

```
class Patient:
    def __init__(self, name, age, chronic_disease):
        self.name = name
        self.age = age
        self.chronic_disease = chronic_disease
        self.telemedicine_consultations = []

    def add_telemedicine_consultation(self, consultation):
        self.telemedicine_consultations.append(consultation)

class TelemedicineConsultation:
    def __init__(self, patient, nurse, doctor, consultation_date):
        self.patient = patient
        self.nurse = nurse
        self.doctor = doctor
        self.consultation_date = consultation_date

class Nurse:
    def __init__(self, name):
        self.name = name

class Doctor:
    def __init__(self, name):
        self.name = name
```

Below is an illustrative Python code snippet that demonstrates the concept of using telemedicine to address the shortage of medical and nursing personnel for chronic disease management in an aging population. This example showcases how telemedicine consultations can be conducted, thereby conserving healthcare resources, reducing healthcare costs and mitigating the strain imposed by personnel deficits.

### Discussion of Limitations

While data-driven solutions offer promising avenues for healthcare transformation, several limitations warrant consideration:

- 1. Privacy and Security Concerns:** Data-driven healthcare solutions involve the collection and analysis of sensitive patient information. Ensuring data privacy and security [14] is crucial to maintain patient trust and comply with regulations.
- 2. Data Quality and Availability:** Accurate and comprehensive healthcare data [15] is essential for meaningful insights. Incomplete or inaccurate data can lead to biased results and hinder the effectiveness of data-driven approaches.
- 3. Digital Divide:** Not all individuals have equal access to technology, potentially creating disparities in healthcare accessibility. Implementing data-driven solutions should consider equitable access [16] for diverse populations.
- 4. Technical Challenges:** Implementing advanced analytics and integrating disparate data sources can be technically complex [17] and resource-intensive, requiring specialized skills and infrastructure.

### Future Directions

#### Harnessing Machine Learning and AI

The integration of machine learning and artificial intelligence (AI) [18] has the potential to revolutionize healthcare in Italy. These technologies can analyze vast amounts of patient data to predict disease outcomes, optimize treatment plans, and identify patterns that might otherwise go unnoticed. For instance, machine learning algorithms could be employed to predict patient readmissions, allowing hospitals to allocate resources more efficiently and reduce healthcare costs. Additionally, AI-powered diagnostic tools could aid in the early detection of diseases, enabling timely interventions and improved patient outcomes.

#### The role of AI in healthcare

AI is a rapidly developing field that has the potential to revolutionize healthcare delivery. AI can be used to develop new diagnostic tools, personalize treatment plans, and improve patient care coordination [19]. For example, AI-powered machines can now interpret medical images more accurately than human radiologists, and AI-powered algorithms can be used to predict which patients are at risk of developing certain diseases.

AI is also being used to develop new drugs and therapies. For example, AI-powered systems can be used to screen large datasets of chemicals to identify potential new drugs.

#### Transformative Impact of IoT and Wearable Devices

The Internet of Things (IoT) and wearable devices [20,21] offer

```

def main():
    # Simulating patients with chronic diseases
    patients = [
        Patient("John", 75, "Diabetes"),
        Patient("Anna", 82, "Hypertension"),
        Patient("Michael", 70, "Heart Disease")
    ]

    # Simulating available nursing and medical personnel
    nurse1 = Nurse("Nurse A")
    nurse2 = Nurse("Nurse B")
    doctor1 = Doctor("Dr. Smith")
    doctor2 = Doctor("Dr. Johnson")

    # Simulating cost of in-person consultation
    in_person_consultation_cost = 100 # Hypothetical cost in euros

    # Tracking cost savings from telemedicine consultations
    total_cost_savings = 0

    # Conducting telemedicine consultations
    for patient in patients:
        nurse = nurse1 if len(patient.telemedicine_consultations) % 2 == 0 else nurse2
        doctor = doctor1 if patient.age > 80 else doctor2

        consultation = TelemedicineConsultation(patient, nurse, doctor, "2023-08-20")
        patient.add_telemedicine_consultation(consultation)

        # Calculate and accumulate cost savings
        total_cost_savings += in_person_consultation_cost

    # Displaying telemedicine consultations and cost savings
    for patient in patients:
        print(f"Patient: {patient.name}, Age: {patient.age}, Chronic Disease: {patient.chronic_disease}")
        for consultation in patient.telemedicine_consultations:
            print(f"- Consultation Date: {consultation.consultation_date}, Nurse: {consultation.nurse.name}, Doctor: {consultation.doctor.name}")
        print("\n")

    # Highlighting the cost-reducing impact of telemedicine
    if total_cost_savings > 0:
        print(f"Total Cost Savings from Telemedicine: {total_cost_savings} euros")
        print("Telemedicine can significantly reduce healthcare costs by replacing in-person consultations.")
    else:
        print("No cost savings achieved through telemedicine.")

if __name__ == "__main__":

```

Patient: John, Age: 75, Chronic Disease: Diabetes  
- Consultation Date: 2023-08-20, Nurse: Nurse A, Doctor: Dr. Johnson

Patient: Anna, Age: 82, Chronic Disease: Hypertension  
- Consultation Date: 2023-08-20, Nurse: Nurse A, Doctor: Dr. Smith

Patient: Michael, Age: 70, Chronic Disease: Heart Disease  
- Consultation Date: 2023-08-20, Nurse: Nurse A, Doctor: Dr. Johnson

Total Cost Savings from Telemedicine: 300 euros  
Telemedicine can significantly reduce healthcare costs by replacing in-person consultations.

a unique opportunity to provide personalized and real-time healthcare monitoring. Wearable health trackers can continuously collect patient data, such as heart rate, blood pressure, and activity levels. This information can be transmitted to healthcare professionals, enabling proactive interventions and remote patient management. For example, elderly patients with chronic conditions could wear smart devices that alert caregivers or doctors in case of irregularities, ensuring timely medical attention and potentially preventing hospitalizations.

### Enhancing Data Security with Blockchain

Blockchain technology presents a powerful solution to enhance data security and patient control in the healthcare system. Italy could implement blockchain-based electronic health records (EHRs) that give patients control over their data and allow secure sharing with authorized healthcare providers [22]. Patients could grant access to specific parts of their medical history, promoting transparency while protecting sensitive information. This decentralized approach could significantly reduce data breaches and unauthorized access, fostering trust between patients and healthcare institutions.

### Interdisciplinary Collaboration

Collaboration between healthcare professionals, data scientists, policymakers, and other stakeholders is essential for realizing the full potential of data-driven healthcare solutions. Multidisciplinary teams [23] can combine medical expertise with technological insights to develop innovative strategies that address complex challenges. For instance, a collaboration between doctors and data scientists could lead to the creation of predictive models that forecast disease outbreaks, helping public health authorities allocate resources and manage crises effectively.

### Overcoming Challenges with Collective Expertise

The multifaceted challenges faced by Italy's healthcare system demand a holistic approach that considers medical, technical, and policy dimensions. Policymakers must collaborate with healthcare providers and data experts to create regulations that protect patient privacy while promoting data sharing for research and innovation. Healthcare professionals [24] can provide valuable insights into the practical implementation of data-driven solutions, ensuring that they align with the needs of patients and healthcare providers.

## The ethical implications of data-driven healthcare

As healthcare systems become more reliant on data, it is important to consider the privacy and security of patient data [24]. Additionally, it is important to ensure that data-driven decisions are made in a fair and equitable way.

Some of the ethical challenges of data-driven healthcare include:

- Privacy and security: Patient data is sensitive and must be protected from unauthorized access. Data breaches can have serious consequences for patients, including financial loss, identity theft, and discrimination.
- Fairness and equity: Data-driven decisions must be made in a fair and equitable way. This means that all patients must have equal access to care, regardless of their race, ethnicity, gender, or socioeconomic status.
- Bias: Data-driven algorithms can be biased if they are trained on data that is not representative of the population. This can lead to unfair treatment of certain groups of patients.
- Transparency: Patients must be aware of how their data is being used and have the right to access their data.

It is important to address these ethical challenges [25] in order to ensure that data-driven healthcare is used in a responsible and ethical way.

## Conclusions

In summary, Italy's journey towards a data-driven healthcare landscape demonstrates the transformative potential of technology in overcoming budget constraints, personnel shortages, and the challenges of an aging population. By leveraging machine learning, AI, IoT, wearable devices, and blockchain, Italy can create a healthcare ecosystem that is more efficient, accessible, and patientcentric. The collaborative efforts of healthcare professionals, data scientists, and policymakers will play a pivotal role in realizing these advancements. Italy's pioneering strategies serve as a blueprint for nations worldwide, offering inspiration and guidance as they navigate similar challenges. As we embrace the era of data-driven healthcare, we recognize the limitless possibilities it holds for improving lives and reshaping the future of healthcare delivery

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