



香港家庭醫學學院

The Hong Kong College of Family Physicians

What can Family Physicians do in Managing Patients with Chronic Diseases in the Community?

Is there enough trained Family Doctors in Hong Kong?

Dr Angus Chan

President, The Hong Kong College of Family Physicians

A Lot !

Health Care Systems Based on Primary Care

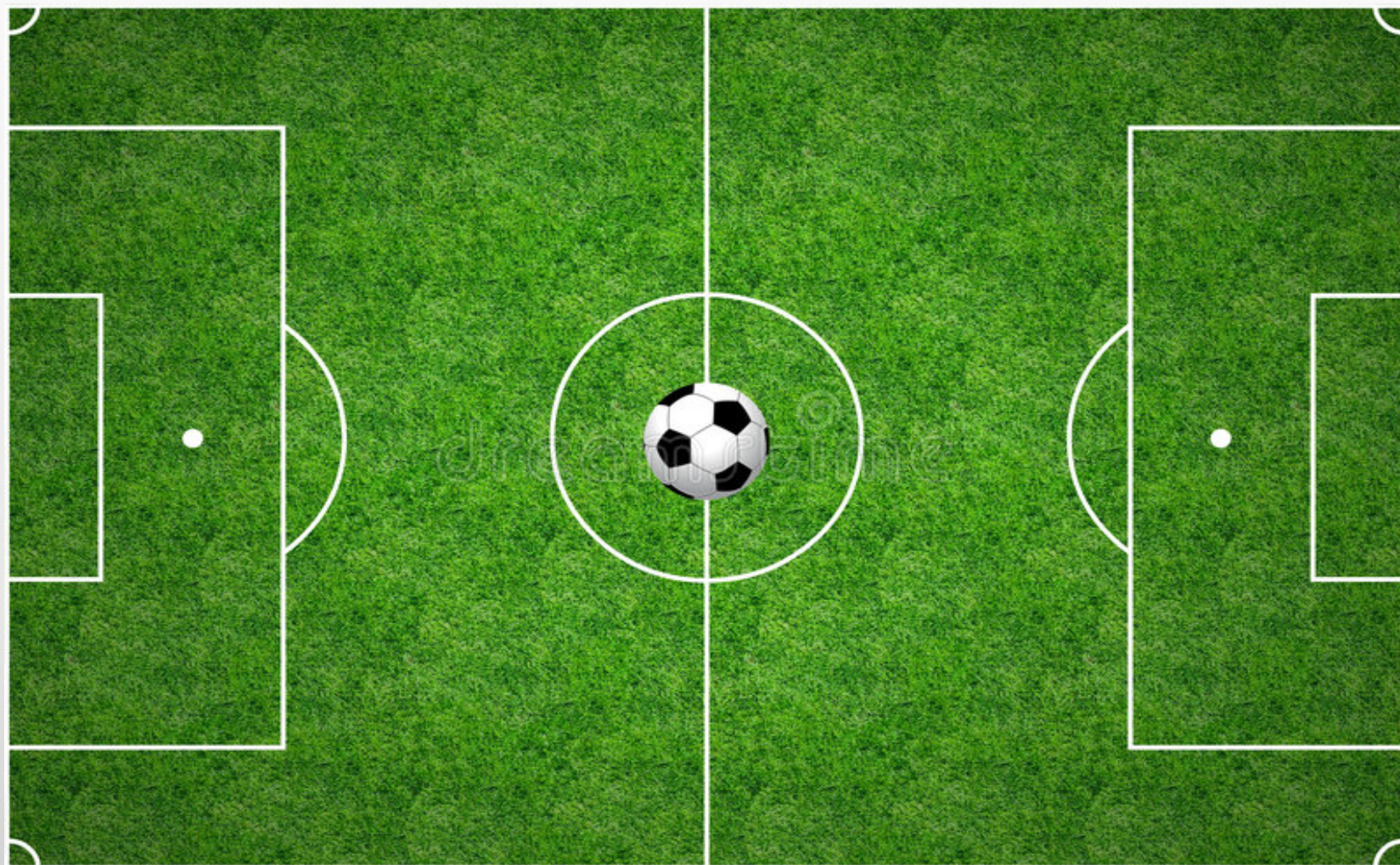
- ▶ Better population health
- ▶ Lower cost
- ▶ Less inequality

Bill Gates

“Primary HealthCare Performance Initiatives” 2015

“Hear argument about vertical and horizontal health care. The horizontal piece is the most important. Strengthening primary health care is the most viable way to close the treatment gap and ensure that all people in all communities get access to the health care they need.”





Principles of Family Medicine

1. Family Physicians are committed to the person rather than a particular body of knowledge, group of disease
2. Family Physicians seek to understand the context of the illness
3. Family Physicians see every contact with the patient as an opportunity for prevention and health education
4. Family Physicians view their practice as a population
5. Family Physicians see themselves as part of community-wide network of supportive and health care agencies
6. Ideally, Family Physicians share the same habitat as their patients
7. Family Physicians see patients in their homes
8. Family Physicians attach importance to the subjective aspects of medicine
9. Family Physicians act as a manager of resources

(Freeman T. McWhinney IR. McWhinney's textbook of Family Medicine. 4th Ed)



Demand for Family Doctors in Hong Kong

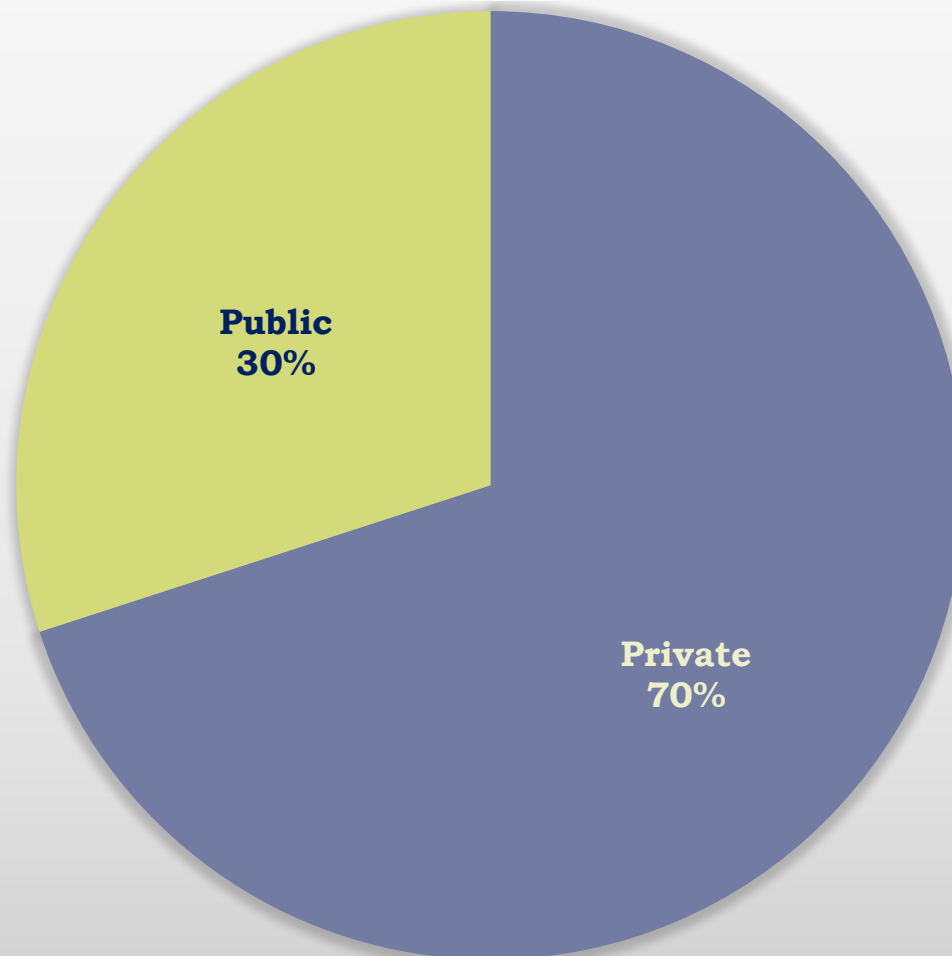
- ▶ Ageing population
- ▶ Comorbidities
- ▶ Increase expectation of patient
- ▶ Keep our crown of highest life expectancy in the world

The knowledge of local community resources and versatility of Family Physicians are best suit to deal with chronic diseases management in the community.

Control of these non-communicable diseases relies on -

- ▶ Primary Prevention (Risk factors)
- ▶ Secondary Prevention (Identify the cause at earlier stage, treatment)
- ▶ Tertiary Prevention (Complication)
- ▶ Quaternary Prevention (Over-investigation, over treatment)

Out-patient Primary Care Consultation



Situation in Hong Kong

- ▶ Chronic diseases: “A” GOPC
- ▶ Colorectal screening: “B” primary care doctor
- ▶ Influenza vaccination: “C” primary care doctor
- ▶ Other illnesses: “D” Family Doctor

General Outpatient Clinic Public Private Partnership Programme (GOPC PPP)

- ▶ 352 primary care doctors
- ▶ 22000 patients enrolled



“Health for All, The Way Ahead, Report of the Working Party on Primary Health Care” 1990

- ▶ Primary Health Care forms an integral part both of the country's health system which is the nucleus and of the overall social and economic development of the community. Hong Kong always shifts the nucleus from primary healthcare to the more expensive hospital care. It is unnoticeable when there is a budget surplus.

- ▶ There was a shortage of qualified and well trained primary care doctors or family physicians. Unless the standards of practice in the private sector were improved, it would not be wise to consider transferring the 15% public sector provision to the private sector.

This is still applied in 2018

- ▶ Family Physicians training is a long-term investment.

Hospital Authority as the sole training provider is allocating well less than 10% of medical graduates to train in Family Medicine.

“Purchaser Provider Split” delivery model create competition between providers which lead to improvements in service delivery, greater efficiency and better quality of training to our future generation. In Hong Kong, Hospital Authority is both the purchaser and provider of postgraduate medical training. What a monopoly!

- ▶ The Authority should have two separate divisions, i.e. a Hospital division and a Primary Health Care division, to take account of the different approaches and orientation required in managing hospital and primary health care services and to ensure parallel and balanced development of both primary and secondary/tertiary care.

“Planning for a Primary Health Care Authority should proceed with concurrent improvement to our primary health care services which is long overdue.”



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- ▶ Hospital Authority
 - Sole training ground of Family Physicians
 - ▶ ? ? Budget for Training of Primary Care Doctor
 - ▶ Need a purchaser / provider split?
 - ▶ Need a Primary Care Authority?

The Future of Primary Care in Hong Kong depends on **MANPOWER**

Primary Care Doctors in Hong Kong

- ▶ Family Medicine Specialist
- ▶ Trained in Family Medicine, non-FM Specialist
- ▶ Non-trained GP
- ▶ Mix of Paediatricians, Physicians and Surgeons

No Pre-requisite to become a Primary Care Doctor!

How many Primary Care Doctors in Hong Kong?

The Medical Council of Hong Kong

Resident List

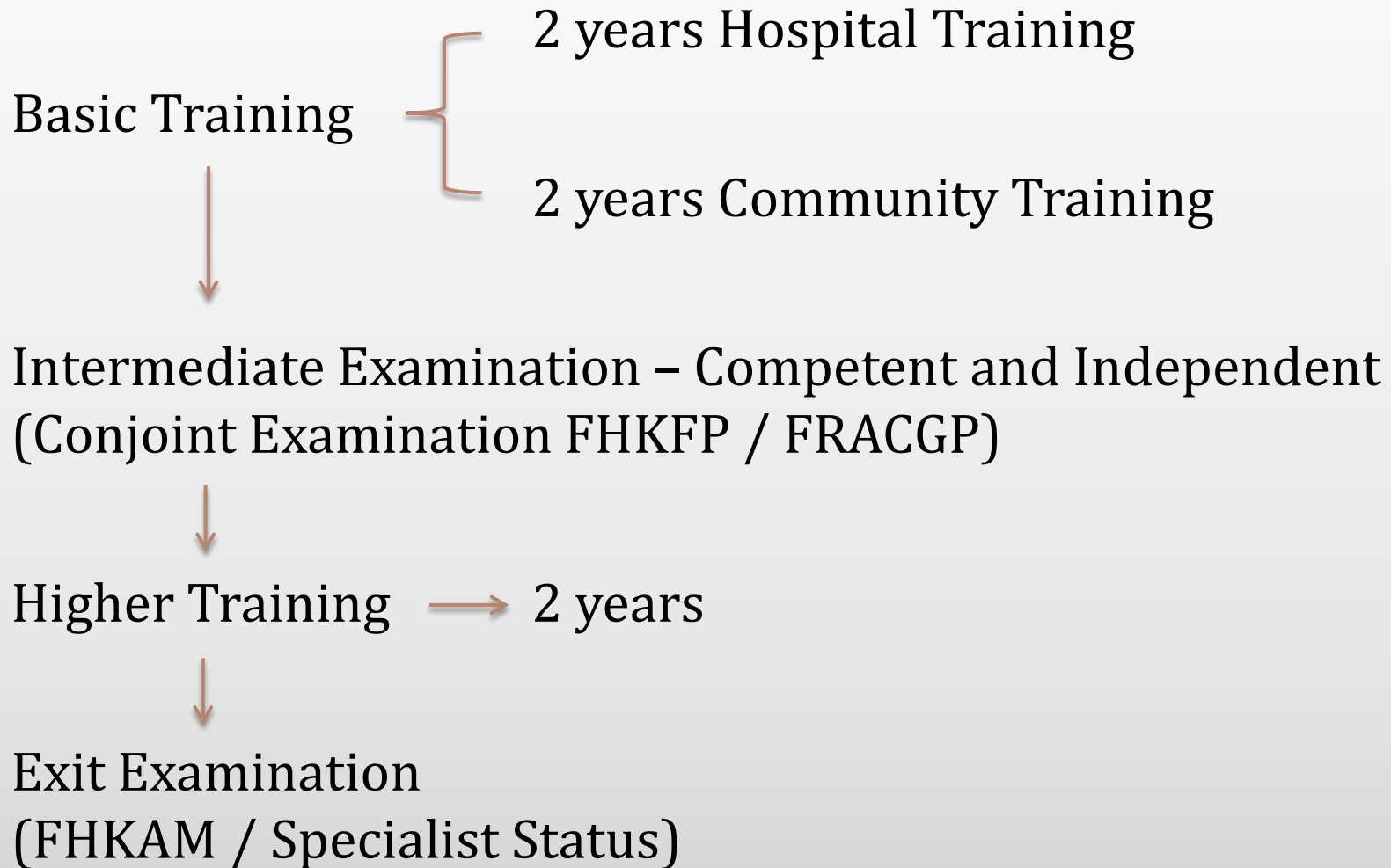
- Specialist List

= ?? GP List

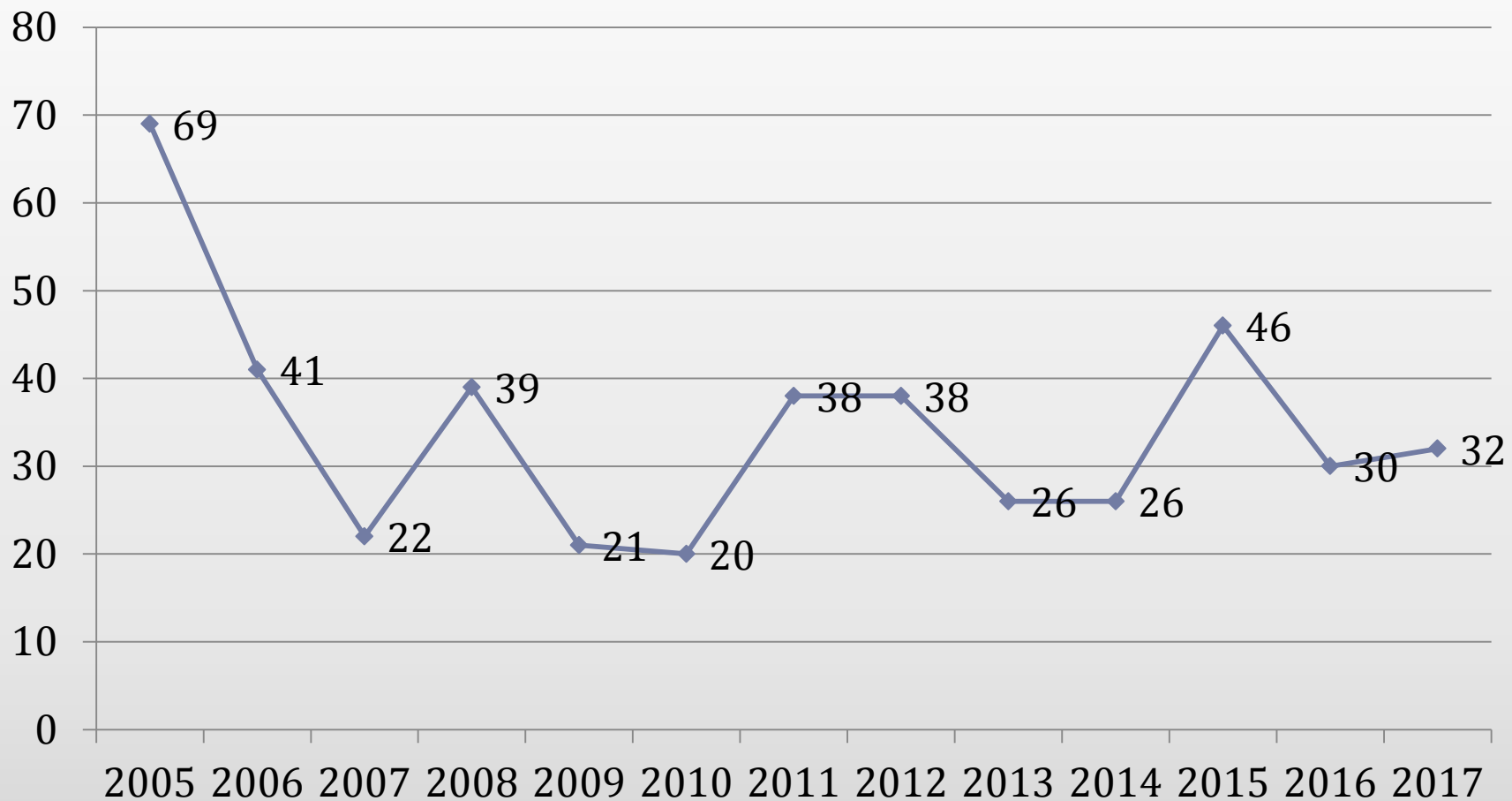
(Does not need to comply with CME requirement)

**Two Local Universities produce
“Undifferentiate” Doctors**

Training pathway of HKCFP



Basic Trainee Enrollment over the past 10 years



HKAM New Fellows (2007 – 2017)

(first fellowship only)

College	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Grand Total
Anaesthesiologists	14	16	18	24	15	13	26	24	28	13	22	213
Community Medicine	18	10	11	6	8	16	7	14	6	5	5	106
Dental Surgeons	8	12	6	9	6	13	10	6	15	17	13	115
Emergency Medicine	21	19	17	5	21	7	12	32		18	20	172
Family Physicians	18	22	34	32	55	52	28	20	21	10	10	302
Obstetricians and Gynaecologists	11	13	11	4	14	18	24	16	16	12	15	154
Ophthalmologists	9	9	14	10	5	8	13	5	20	11	9	113
Orthopaedic Surgeons	10	22	6	11	8	12	18	18	23	17	20	165
Otorhinolaryngologists	4	5	5	1	8	7	2	7	8	6	5	58
Paediatricians	12	16	16	15	14	8	16	17	18	26	23	181
Pathologists	14	4	6	6	10	14	2	13	7	11	8	95
Physicians	70	63	54	66	70	85	65	60	63	43	21	660
Psychiatrists	10	24	34	15	10	9	30	20	19	22	20	213
Radiologists	8	19	13	16	15	25	24	25	21	36	28	230
Surgeons	22	31	25	21	25	37	35	35	35	43	26	335
Grand Total	249	285	270	241	284	324	312	312	300	290	245	3112

Average: 283/year

HKCFP Examination passing rate

Year	Intermediate Examination (Conjoint HKCFP / RACGP Fellowship Examination)			Final Examination / Assessment (Exit full and sup)		
	Sitting	Passing	%	Sitting	Passing	%
2011	43	22	51.2%	68	55	81%
2012	46	28	60.9%	66	52	78.8%
2013	38	28	73.7%	38	28	73.7%
2014	27	15	55.6%	31	21	67.7%
2015	34	27	79.4%	25	21	84%
2016	38	29	76.32%	16	9	56.25%
2017	27	20	74.07%	18	10	55.55%

Population of Hong Kong:	7.4 million
Medial age:	43.6 years
Life expectancy:	87.32 years
	81.24 years



Ratio of
One Family Physician to population

Number of Family Physician needed

1:2000

3700

1:2500

3000

1:3000

2500

Fellows of Hong Kong Academy of Medicine

Physicians	1705
Surgeons	938
Paediatricians	640
Radiologists	542
Anaesthesiologists	526
Obstetricians and Gynaccologists	500
Family Physicians	460 (6%)

Years of Professional Services Post Training	No. of Trainees enroll per year
35 years	$2500/35 = 71.4$
	$3700/35 = 105.7$
65 years	$2500/65 = 38.5$
	$3700/65 = 66.9$

Long Live the Emperor
萬歲萬歲萬萬歲

Tom
Hanks is
Forrest
Gump



Forrest was multi-talented and cared for everybody he encountered.

Family doctor is multi-talented and cares for everybody he/she encounters!

Thank you !