What is 'Family Medicine' in the Asia Pacific region?

'Doctor, is there something wrong with my liver?' I was once asked by a well looking middle aged male Chinese patient not long after I started practising in Hong Kong. I was certainly taken by surprise. He then went on to disclose to me that he had had some problem with his vision but further questioning indicated that it was likely to be no more than early presbyopia.

Why did he ask me about his liver when in fact he had some visual problems?

Marinker once said, 'The medicine of general practice (or Family Medicine which I take as synonymous) has to be most closely applied to the configuration of the culture which it serves.'1 In the Asia Pacific region, this may be particularly relevant as many of the countries in the region have long and established cultures, and traditional therapies. The above scenario happened because the traditional Chinese medical theories relate vision to the health status of one's liver. By the same token, I am also frequently asked by my Chinese patients, 'Doctor, am I suffering from too much 'heat'?' It is their application of the 'yin/yang' systems theory in explaining their illnesses that leads them to ask these questions. I am sure examples like this are just too familiar to many family physicians in the region, of course, with some local adaptation. How should we emphasize these cultural factors in Family Medicine in the Asia Pacific region?

Why should we raise this issue? Family Medicine may be an old discipline in many parts of the world but it is also quite young in many parts of the Asia Pacific region. Do we all share the same meaning of what Family Medicine is?

In 1991, Wonca defined family physician as the physician who is primarily responsible for providing comprehensive care to every individual seeking medical care and arranging for other health personnel to provide services when necessary. The family physician functions as a generalist who accepts everyone seeking care, whereas other health providers limit access to their services on the basis of age, sex or diagnosis. The definition also says that family physician cares for the individual in the context of the family and the family

in the context of the community, irrespective of race, religion, culture or social class. He/she is clinically competent to provide the greater part of their care after taking into account their cultural, socioeconomic and psychological background. In addition, he/she takes personal responsibility for providing comprehensive and continuing care for patients. The family physician also exercises his/her professional role by providing care, either directly or through the services of others according to their health needs and resources available within the community he/she serves.

However, Wonca Europe produced a new definition in 2002. It defines family doctors as specialist physicians trained in the principles of the discipline with core competencies in primary care management, person-centered care, specific problem solving skills, comprehensive approach, community orientation and holistic modelling.²

Where do we stand in the Asia Pacific? Wonca Asia Pacific has 17 member organizations which cover almost one third of the world's population and a very rich cultural diversity. The standard of medical healthcare varies greatly, as well as the development of family medicine. These limitations however, should not stop us looking at this very fundamental issue: how do we define the discipline of Family Medicine in Asia Pacific?

This discussion on the definition of Family Medicine in Asia Pacific is likely to go on for quite a long while before we can have some consensus. This new regional journal, *Asia Pacific Family Medicine*, is no doubt the most appropriate channel to facilitate such a forum. We may end up with core definitions but optional components to suit the needs and developments of Family Medicine in different member countries.

What we need to do, however, is to get it started! I therefore call on all member organizations to begin discussions on this important issue and come out with their core definitions.

This is your journal and this is where it can get started.

Tai Pong LAM

References

1 Marinker M. Should general practice be represented in the University medical school? *BMJ* 1983; **286**: 855–9.

² Wonca Europe. The European Definition of General Practice/Family Medicine. http://www.sfam.nu/ Navigationssidor/ST-lakare/DefGP.pdf (cited Dec 2002).