

Hot Topic

Chinese Medicine Practice and Research in Hong Kong, China: Current Status and Future Direction

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Historical Review

Since the dawn of time, Chinese medicine (CM) has been the major remedy for Hongkongers. Tung Wah Hospital was found in 1872 as the first hospital in Hong Kong to provide free CM service for out-patients and in-patients. According to literature, the total patient number of Tung Wah Hospital in 1896 was 116,150, 45% of the 240,000 population in Hong Kong. While the outpatient number from Civic Western Medicine Hospital of the British Hong Kong Government (predecessor of Sai Ying Pun Jockey Club Polyclinic) was only 1,157 in 1895, less than 0.5% of the total population.⁽¹⁾

After Japanese invasion in 1941, the CM in-patient service of Tung Wah Hospital was abandoned because Japanese army believed that CM's relatively complicated administration route did not fit the needs of wartime, thus only CM out-patient service was kept. After World War II, the British Hong Kong Government treated CM as a kind of culture custom of Chinese population rather than a profession, as a result, CM development was significantly slowed down, while the Western medicine developed very fast.⁽²⁾

In the late 20th century, the British Hong Kong Government started to consider means to develop and regulate CM. In August 1989, the Working Group of Chinese Medicine was formed, with the aim to review the CM status in Hong Kong. Following the Working Group's recommendations, the Preparatory Committee on Chinese Medicine was established in April 1995 to make suggestions and recommendations on the promotion, development and regulation of CM

in Hong Kong.⁽¹⁾ After the reversion of sovereignty, CM was officially recognized by Hong Kong Special Administration Region (HKSAR) Government and began the process of rapid development.⁽³⁾

Achievements Since the Return

Policy and Regulation

The policy for the development of CM was enshrined in the Basic Law of HKSAR. Article 138 of the Basic Law provides that the Government of HKSAR shall, on its own, formulate policies to develop Western medicine and CM and to improve medical and health services. Community organizations and individuals may provide various medical and health services in accordance with the Basic Law.⁽³⁾

With efforts of all stakeholders, the Chinese Medicine Ordinance (Cap. 549 of the Laws of Hong Kong) was passed by the Legislative Council of Hong Kong on 14 July 1999. Later in September 1999, the Chinese Medicine Council of Hong Kong (the Council) was officially established, responsible for implementing regulatory issues for CM and its practitioners.⁽⁴⁾ The promulgation of the Chinese Medicine Ordinance and the establishment of the Council indicated the formulation of formal regulatory system of CM in Hong Kong.

Based on the Ordinance, only registered CM practitioners are qualified to practice. In consideration of historical factors, the Chinese Medicine Ordinance provided transitional arrangement for CM practitioners. CM practitioners who were practicing CM on January

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3, 2000 could apply to become listed CM practitioner. If the listed practitioners have abundant experience in clinical practice and acceptable education background, namely for the applicants who had been practicing CM in Hong Kong continuously for at least 15 years, or more than 10 years with academic qualifications in CM that were accepted by the Chinese Medicine Practitioners Board, they could become a registered CM practitioner directly. Other practitioners were required to pass a public registration examination.⁽⁵⁾ In addition, the Chinese Medicine Ordinance established a limited registration system so that educational or scientific research institutions can recruit qualified CM experts to perform predominantly clinical teaching or research in Hong Kong. The person with limited registration can only perform certain clinical teaching or research in institutions, but cannot practice privately.⁽⁵⁾ By the end of May 2017, there were 9,932 qualified CM practitioners in Hong Kong, including 7,250 registered CM practitioners, 43 registered CM practitioners with limited registration, and 2,639 listed CM practitioners.^(6,7)

CM Service Mode

HKSAR government, higher education institutions, non-governmental organizations and CM practitioners have made great effort to promote the development of CM in recent two decades after the transfer of sovereignty.

The Government has actively promoted the development of CM clinical service in the past years. During the severe acute respiratory syndromes (SARS) outbreak in 2003, the Hong Kong Hospital Authority introduced CM service to certain in-patients in the public hospitals, thus CM obtained the opportunity to help patients in treatment and recovery in the public hospitals. Afterwards, public hospitals began to provide a channel to patients to provide CM consultation service based on established protocols. Since 2003, in accordance with the Hong Kong Government's policy to promote the development of "evidence-based" CM and out-patient CM services in the public sector and training placements for local CM graduates, the Hospital Authority was tasked to establish a total of 18 Chinese Medicine Centers for Training and Research in each of the 18 districts. The center would apply tripartite cooperation mode, including Hospital Authority, non-government organization and local university.

The Hospital Authority provides policy support and financial subsidies; the universities assist education and research; and non-government organizations are responsible for operation.⁽⁸⁾ In 2014, all 18 centers had been set up. In financial year 2013/14, the tripartite centers served over 1 million patient attendances annually.⁽⁸⁾

Higher education institutions are also an important force of CM service in Hong Kong. Since 1998, Hong Kong Baptist University (HKBU) has offered the full-time bachelor of CM and bachelor of science (Hons) in biomedical science double degree programme funded by University Grants Committee, and provided the CM out-patient service almost at same time.⁽⁹⁾ Thereafter, both The University of Hong Kong and The Chinese University of Hong Kong began to provide full-time CM programmes and CM out-patient service too. Since then, the majority of CM graduates of the three local universities entered the industry of private CM service. Currently, three Schools of Chinese Medicine under HKBU, The University of Hong Kong and The Chinese University of Hong Kong provide out-patient service for the public.⁽¹⁰⁻¹²⁾ Charitable organizations such as the Tung Wah Group of Hospitals, Yan Chai Hospital, Pok Oi Hospital, Hong Kong Federation of Trade Unions and Yan Oi Tong also provide the CM out-patient service to the public.⁽¹⁾ Besides, other commercial medical groups, such as Pura pharm company, also provides high quality CM clinical services.

Exploration of CM in-Patient Service

CM in-patient service still is in the early stage in Hong Kong. Since 2009, HKBU has provided CM in-patient service for certain in-patients in collaboration with the Hong Kong Anti-Cancer Society, covering majorly cancer rehabilitation after chemotherapy and radiotherapy, stroke rehabilitation, and refractory pain syndrome. Currently, the disease categories have been expanded, and the comprehensive therapies have been provided including but not limit to acupuncture, moxibustion, massage, and Chinese herbal medicine.⁽¹³⁾ In addition, School of Chinese Medicine under the University of Hong Kong has also provided CM in-patient service in the University of Hong Kong-Shenzhen Hospital since 2016.⁽¹⁴⁾

HKSAR government took great efforts to develop CM in-patient service. In Policy Address

of 2013, the Government set up the Chinese Medicine Development Committee, and put forward policies promoting integrated Chinese and Western medicine treatment and introducing CM in-patient services in Hong Kong.⁽¹⁵⁾ In Policy Address of 2014, the Government has announced that a site has been reserved to develop a CM hospital to provide CM in-patient services.⁽¹⁶⁾ Afterwards, the Government officially confirmed that a site in Tseung Kwan O had been reserved for CM hospital in 2016 Policy Press.⁽¹⁷⁾ In latest 2017 Policy Press, the Government has decided to finance the construction of a CM hospital on a reserved site in Tseung Kwan O, and invited the Hospital Authority to assist in identifying a suitable non-profit-making organization by tender to take forward the project and operate the hospital.⁽¹⁸⁾ The establishment of CM hospital of Hong Kong is ready to go.

Since 2014, the Hospital Authority has been tasked by the Government to carry out an integrated Chinese-Western medicine pilot project (pilot project) in the public hospitals. Based on the clinical protocol proposed by CM and Western medicine experts, CM service was provided to selected in-patients of stroke care, cancer palliative care and acute low back pain care in three public hospitals. According to the plan, the project will be expanded to more hospitals in future.⁽⁸⁾

CM Clinical Research

In recent years, the Hong Kong Government provided large support for CM clinical research. The major funding agencies include the Innovation and Technology Fund (ITF) administered by the Innovation and Technology Commission, and the Health and Medical Research Fund (HMRF) under the Food and Health Bureau. In the last decade, the CM research projects reflected an upward trend overall. By the end of 2016, ITF has supported 79 CM research projects and HMRF has supported 70 CM research projects, respectively.^(19,20)

All Hong Kong universities have actively participated in CM clinical researches in different capacity. The Chinese Medicine Clinical Study Centre (CMCS) was established in September 2014 in HKBU. The aim of CMCS is to perform "evidence-based CM" researches based on unique characteristics of CM and the principle of evidence-based medicine.

The research topics contains but not limit to trial protocol design, study implementation, systematic reviews and meta-analyses of clinical studies. In the meantime, CMCS targets to establish excellent reporting standards for CM clinical researches, and promote the CM interventions to be included into clinical practice guidelines.⁽²¹⁾ In addition, the Chinese Clinical Trial Registry Hong Kong Center (ChiCTR HK) was officially established on December 15th, 2016. The ChiCTR HK is an entity organized by Chinese Clinical Trial Registry (ChiCTR). The mission focuses on methodology research of clinical study and relative field, training and dissemination.⁽²²⁾

Prospects

Providing high-quality prevention and treatment service is a core value of CM development in Hong Kong. Many scientific researches and clinical practice have indicated that CM and Western medicine have their own advantages, and could achieve better outcomes when collaborating properly. With the support of Hong Kong Jockey Club, HKBU has established "Health Hong Kong — Chinese Medicine Preventative Centre" to promote CM development in prevention of disease, at same time, the Centre will perform large scale body constitutions research in Hong Kong population and assess the efficacy of CM in disease prevention. These researches may improve the overall health condition of Hong Kong population, decrease the needs of hospitalization and reduce public health burden.

Establishing CM specialty is another direction for CM development in Hong Kong. In July 2014, the "Hong Kong Chinese Medicine Specialty Development Working Committee" was founded and the "Hong Kong Chinese Medicine Specialty Development Working Committee Memorandum of Cooperation" was signed. The Committee aims to unit CM academic and industrial communities to build a system of CM specialty and corresponding qualify determination based on available CM system in Hong Kong, and provide recommendations to the Government. Up to now, the Working Committee has set up three specialty subgroups, namely "internal medicine", "acupuncture and moxibustion" and "orthopedics", and other specialty subgroups could be established if necessary.⁽²³⁾

The establishment of a CM hospital will turn the page of CM development in Hong Kong. Firstly, it will

provide clinical training opportunities for undergraduates of CM programmes using the "classroom-bench side-bedside" teaching system. Secondly, CM hospital will serve as platform for clinical research and translational study. This will further promote the development of evidence-based CM and integrative medicine. Thirdly, CM hospital will provide high quality in-patient service and out-patient service for the public. Lastly, CM hospital will comply with the trend of the international health industry, and promote the industrialization of CM. Cooperating with national "One Belt and One Road" strategy, Hong Kong can actively promote the internationalization of CM and construct the solid status of CM in the world.

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