



## A bridge between community and patients: an interview with Dr Douglas NT Chan

by: Apple TY Lo, Katherine Wong, Waylon WL Chan  
Year 4, The Chinese University of Hong Kong

“Are you here for Dr Chan’s consultation? You can queue up after me. He will be here soon.” Reaching the door of Dr Douglas Nim-tak Chan’s clinic early in the morning, we were greeted eagerly by an old lady waiting for a flu vaccination. In a small clinic in Tai Koo, Dr Chan is no stranger to the neighbourhood. With a warm smile, he gently welcomed the old lady into the waiting area, chatted with her like an old friend and began his day. His composed and modest demeanour cannot mask the passion Dr Chan has for serving the vulnerable elderly people in Hong Kong who are cast out of the media’s spotlight. He is familiar to the people who appear in community centres, as Dr Chan is a frequent visitor and volunteer. As a directly elected committee member of the Hong Kong Medical Association, he has been one of the major driving forces behind the Community Health Academy initiative that aims to reach out to the elderly people in a multidisciplinary approach, hoping to represent the general practitioners (GPs) of Hong Kong and serve the community in the role of doctor.

Dr Chan graduated from the University of Hong Kong in the Class of ’86, after which he practised as a GP for over 25 years. He currently sees cases in two clinics, as well as delivering lectures and carrying out health checks for the public in various community centres in his spare time.

### Stepping into community service

Over the past few decades, as the baby boomers of the 50s and 60s in Hong Kong have aged, the number of elderly people has risen at a staggering pace. The community at large is ill-equipped to deal with the social problems associated with an ageing population.

Dr Chan has given over 30 talks since 2000 covering a wide array of topics including common mood disorders, depression and suicide, stress management in schools, early detection and management of dementia, and prevention of stroke and osteoporosis. When Dr Chan first engaged in community events a decade ago delivering health talks aimed at the public, he noticed that these public health events were mainly sponsored by either pharmaceutical companies or non-governmental organisations (NGOs). They were usually one-dimensional in the sense that they focused on a specific issue, such as controlling diabetes. However, the problems faced by the audience of such talks, targeted at the aged, were multifaceted and sometimes intractable. Social issues ranging from inadequate housing and food security to mental issues caused by loneliness and a lack of purpose were often overlooked by medical practitioners who were trained to focus on physical ailments and treatment. Even those who recognised the intertwining social issues had no means to help their patients deal with them.

This rings especially true for ‘hidden elders’ who are isolated from the outside world and often live by themselves. Dr Chan recalled a case where he met an aged gentleman living by himself in a public estate in poor condition. His television had broken several years previously and his radio set malfunctioned soon after. As he rarely left the house, he was completely detached from the outside world. In this case, there was a simple solution—Dr Chan bought a battery-operated radio for him which he received ecstatically.

His idea of starting a new project sprang from a course he attended with other GPs 10 years ago on hospice care organised by Pamela Youde Nethersole

Eastern Hospital; home services to patients suffering from chronic diseases were arranged. He came to realise that most GPs were not well-equipped to handle the complex medical and social issues faced by these patients. Being eager to help yet constrained by the resources available to him as a private GP, he kept the idea of providing holistic care close to his heart and started various initiatives over subsequent years.

### **Holistic care for the elderly people**

Dr Chan believes that the way to help the vulnerable elderly people is to involve specialists of varying professions to work closely as a team in order to provide all-round care that meets the actual needs of the elderly people. To accomplish the goal, Dr Chan and his colleagues launched the Community Health Academy that brings together doctors and nurses, various paramedics, NGOs, social workers, and housing department officials. The young generations are also involved. Medical students and secondary students are also recruited to participate. In the community project, elderly individuals who have difficulty walking are evaluated by medical staff, allocated to a more accessible apartment by housing officials, offered checks on home safety, and visited from time to time by NGOs. This combination is more flexible and timely in solving the needs of each individual elderly person.

Apart from initiating home visits with social groups to help patients with chronic disease, he has also been working on projects that target psychiatric problems such as dementia. By reaching out to different social groups and organising monthly visits, Dr Chan is determined to offer assistance to isolated patients in the community. From providing basic necessities and encouraging them to open up, to playing chess like old friends during visits, Dr Chan and volunteers have gradually established close bonds with them, prompted their recovery physically and psychologically; and most importantly, allowed them to feel warm and loved despite their illness. A special feature of the current project is that on their website, there is a function to directly connect to local NGOs. This provides a link between social organisations and patients, connecting patients in need with those who can deliver assistance.

### **Extending beyond the doctor-patient relationship**

Dr Chan believes that a doctor's duties should not be limited to only treating a patient in a doctor-patient setting, but should also extend to public health advocacy and speaking out on policies that impact citizens' health. He describes a doctor-patient relationship as analogous to a point-to-point connection, while advocacy is a point-to-plane

connection that has the potential to achieve much more. Advocacy reaches a much wider audience and can strive to shift opinion and garner support on health care policies.

He believes that doctors, equipped with their profession's autonomy and knowledge, can help patients outside of the clinic environment. Government health care policies have great influence on patients' well-being, and doctors should help shape discussion of such policies to improve the lives of patients.

Public health advocacy can also take the form of educating the public about a wide range of health issues. Dr Chan has been giving a series of lectures in various community centres aimed at the elderly people on a variety of topics ranging from caring for those with dementia to healthy eating. Teaching the elderly people how to take care of themselves reduces the burden on the health care system. He also attempts to tackle health issues that are less recognised by the general public.

### **Government policies are crucial in Hong Kong's health care**

Dr Chan notes the numerous challenges faced by the Hong Kong medical system. One problem he highlights is the medical staff shortage in Hong Kong. Dr Chan believes the situation to be less dire than it seems. There are more than 10000 registered doctors in Hong Kong along with the increasing quota of medical students who will be graduating in the coming years. According to Dr Chan, the main problem is the uneven distribution of resources, not a manpower shortage. The best way to solve this issue is to develop stronger connections between local patients, private GPs, and the Hospital Authority. Government policies that encourage such connections can go a long way to solving the long waiting time in public hospitals.

Another issue Dr Chan raises is the inflation of health care costs. He recognises that medical expenditure is a controversial issue across the world, with debates over the Affordable Care Act in the US to the National Health Service funding in the UK. He recalled a patient suffering from tuberous sclerosis personally delivering a speech to the Legislative Council several weeks ago who complained about skyrocketing medical costs that made better medications unaffordable. The patient died a week later. Even in his own clinic, Dr Chan once had a patient who was diagnosed with leukaemia and had to sell her flat in order to afford the targeted therapy, despite being from a middle-class family and working as a teacher. He sees the government as best positioned to help these people who struggle with medical bills, either by directly funding orphan drugs or setting up medical insurance schemes.

## Advice for medical students and young doctors

Before leaving, Dr Chan imparted some words of wisdom for current medical students and young doctors. He stressed the importance of getting adequate social exposure, and the need for us to stay connected and in touch with people in the community. As an example, Dr Chan recalled that last year, doctors and medical students initiated a sit-in protest outside LegCo in the hot summer for 7 days to protest the passing of a Medical Registration (Amendment) Bill of the Medical Council of Hong

Kong composition. As any amendment in the bill will have significant and long-lasting impact on medical practice in Hong Kong, these issues that determine the landscape of the future medical profession should be closely watched. “It is important for us to keep abreast of local news, speaking out to fight for the right decisions when necessary. Having more social awareness can favour our medical practice in the future”, Dr Chan added, with a gleam of optimism in his eyes, reminding us of the most pivotal role of doctors—the bridge between the community and patients.



Home visits by Dr Douglas Chan with Outreach Ambassadors

