Dialects and diplomacy – a day in the life of two doctors in Shanghai (8 min read) [1]

Access to Healthcare [2]

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You might think that seeing dozens, even hundreds, of patients per day would steal the mental energy needed for any sort of personal reflection. However, orthopedic physician Dr. Jianxin Jiang, and Dr. Hua Yue, an osteopath specializing in metabolic diseases, never seem to tire of caring for patients. Each experience teaches them something new and motivates them in their daily work of providing medical care.

Jiang and Yue can look back on great improvements of access to healthcare in China during the past decade. As a result of broad healthcare reforms, more people than ever are able to seek out the medical service they need, averaging about six visits per person to physicians and clinics per year.¹ Now some 95% of the country’s 1.3 billion population has some form of health insurance coverage, up from 30% in 2003.² Jiang hopes that the reforms will continue to increase access to medical services in China. In addition, he says, people should have better medical information, so they learn how to avoid illness in the first place.

Dr. Hua Yue, Osteopath, Shanghai No. 6 People’s Hospital

Shanghai No. 6 People’s Hospital, where Jiang and Yue work, is a top-grade “Tier 3” hospital, meaning it offers specialist consultations, and modern diagnostic equipment. This draws in great numbers of patients, who come from various regions of the country – a situation that presents a very unique challenge of providing healthcare in that region. “Since I see lots of patients, I encounter all kinds of dialects,” says Jiang, 51, counting on his fingers the five variations of Chinese he knows. Not being well-versed in those dialects would pose a significant barrier to treatment. In addition, most of his patients are elderly, he says, and seniors in particular appreciate his effort to speak their local language. This helps to build trust, and enables him to better understand exactly why they are seeking treatment at the hospital. “Speaking the right dialect is extremely important for being able to communicate
effectively with patients. It helps building trust, and patients feel more attached to you.”

Jiang’s focus on listening and learning has earned him the reputation of being able to deal well with older people. When seniors show up in the ward, they are directed to his office. And it makes him proud when an elderly patient brings along ten friends to the hospital, who ask to be treated by him. “I think it is a great honor to be a doctor with such a strong recognition from others,” says Jiang.

Doctors spend their lives making a difference silently

**Dr. Jianxin Jiang**, orthopedic surgeon, Shanghai No. 6 People’s Hospital

Another quality that contributes to being a good doctor in China is diplomacy, a key skill in medical care. Yue, an osteopath specializing in metabolic diseases and Jiang’s colleague, says that as she listens to what people say, she also observes their behavior and actively attunes to them. This helps her tremendously in making a diagnosis and delivering therapy. “Working in a large clinic means you are dealing with all kinds of patients. Since they come from different backgrounds and cultural levels, how to handle relationships has become a main focus of my work.” The 41-year-old adds that when she finished university, she was eager to demonstrate her medical knowledge, but as the years passed, “I learned that effective treatment is really all about dealing with people.”

But dealing with huge numbers of people is another challenge for physicians who work in specialist hospitals such as Shanghai No. 6. Jiang says he can see up to 344 patients per day when working with an assistant. If alone, he still manages to speak with 160 patients. This is about nine times as many patients as US doctors see, typically 19 patients per day. Jiang manages his steady stream of patients through focus. “Attention to details is crucial in my practice,” he says. “I have to stay persistent to ensure a good memory.”
Yue mentions another habit to serve her patients well; she grasps day-to-day learning opportunities. She says when she was just starting clinic work, she would often stay in the ward after finishing her shift, because she felt very satisfied learning from other doctors, and solving the problems of patients. Yet failures also deliver experience. She vividly remembers being fresh out of university and taking on her first case. Sadly, despite her best efforts, her 20-year-old patient with end-stage cirrhosis didn’t survive. Because Yue couldn’t save the young man, she vowed to ask herself every day what she could learn. In her 18 years of practice, “Reflection and learning - from successes and failures alike - have become my working habits.”

Reflection and learning have become my working habits

Dr. Hua Yue, osteopath, Shanghai No. 6 People’s Hospital

Learning and teaching naturally go together, and the more of an expert one becomes the more his expertise is sought. That’s why physicians at Shanghai No. 6 are also teachers helping to improve medical education in China. The hospital is affiliated with Shanghai Jiao Tong University, so in addition to seeing patients, staff physicians are academically active. Both and Yue and Jiang say this double duty of consultations and research often stretches them thin. “We do scientific research, such as verifying resources, writing papers, or applying for projects after work, or at weekends or holidays,” says Yue. “Therefore, we basically don’t have breaks.” Jiang says he also struggles with “striking a balance between frontline practice and science outreach.” Yet it is gratifying to help train the next generation of doctors, just their mentors did when passing knowledge to them. “If I have seen further, it is by standing on the shoulders of my tutors,” says Jiang.
Despite their responsibility for improving lives and health, doctors in China are not VIPs, Jiang says. And the high workloads, long hours and psychological pressure on physicians result in high attrition rates. For example, since Jiang graduated from university in 1990, two-thirds of his classmates have given up medicine, he says, and of the remaining one third, only a few stay in China. Jiang, however, is still fully committed to his career. “Doctors spend their lives making a difference silently,” he says. “Medical knowledge makes my life meaningful. Staying in this profession is a way of life.”

For Yue, any time she is on duty is the most important time of her day. Professionally, she would like to spread the word on her specialty. The public understands little about osteopathy – a non-invasive therapy that treats mobility problems by moving and massaging muscles and joints, she explains. “Therefore, I devote myself to helping patients know more about it.” The thought of giving up medicine leaves Yue a bit perplexed. “I don’t know what else I would do,” she admits. “I am destined to be a doctor.”

Hospitals and healthcare facilities in China

Since 1989, hospitals have been categorized according to their size and function. Of the 23,170 hospitals in China:

- 26% of hospitals are Tier 1 Primary hospitals, with up to 100 beds and providing preventative and clinical treatment in rural areas. There are 5,982 of these hospitals.
- 28% of hospitals are Tier 2 Secondary hospitals, with up to 500 beds and providing comprehensive medical care. There are 6,566 of these hospitals.
- 7% of hospitals are Tier 3 Tertiary hospitals, with more than 500 beds and renowned for quality care and specialist physicians. There are 1,624 of these hospitals.
- 39% of hospitals are Ungraded hospitals, including private hospitals and those offering traditional Chinese medicine. There are 9,018 of these hospitals.

Traditional Chinese medicine (TCM) hospitals are found in almost every city. Also, across the country, more than 900,000 “grassroots medical institutes” including health rooms, community health centers, village clinics, and county hospitals offer health services.

Sources:
- http://www.wpro.who.int/asia_pacific/observatory/hits/files/china_health_systems_review.pdf (p. 100-101)
- China Health Statistics Yearbook (2012)
- http://www.moh.gov.cn/mohwebwz/xzzx/h07097/201206/a59745d0a953f668549a85509e45379eb92.shtml
Healthcare reform in China

In 2009, major healthcare reforms were launched in China, with the aim of universal insurance coverage by 2020. Other priority areas include:

- Establish a national essential drugs system
- Strengthen local medical services
- Promote public hospital reform

Another challenge to China's healthcare system is the growing number of seniors [5]. By 2050, nearly one in four Chinese will be age 65 or older. Taking care of the elderly means greater demand for hospitals, medical centers and nursing homes.

Source: WHO Fact Sheet: Health sector reform in China
http://www.wpro.who.int/china/mediacentre/factsheets/health_sector_reform/en/


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