

# LCQ6: Integrated Chinese-Western Medicine Pilot Programme

Following is a question by Professor the Hon Chan Wing-kwong and a written reply by the Acting Secretary for Health, Dr Libby Lee, in the Legislative Council today (November 22):

Question:

In 2014, the Government engaged the Hospital Authority (HA) to implement the Integrated Chinese-Western Medicine (ICWM) Pilot Programme (the Programme) to provide ICWM treatment for HA in-patients of three selected disease areas (i.e. stroke care, musculoskeletal pain management and cancer palliative care). In this connection, will the Government inform this Council:

(1) whether it knows the number of patients of each of the aforesaid three selected disease areas who have participated in the Programme since its introduction, and the percentage of the number of participating patients of each disease area in the total number of patients enrolled in the Programme;

(2) given that at present, the Chinese Medicine Clinics cum Training and Research Centres participating in the Programme provide out-patient follow-up services to discharged patients under the Programme at a fee of \$120 per visit, and that the relevant fee will be waived for recipients of Comprehensive Social Security Assistance, whether it knows the respective numbers of patients who have been granted fee waivers and are required to pay the fee since the introduction of the Programme (as well as the total amount of fees paid by the patients), together with a breakdown by the aforesaid three selected disease areas;

(3) whether it knows the financial expenditure incurred by the Programme since its introduction, and whether the authorities will consider increasing the amount of funding for the Programme in order to provide fee waivers to patients enrolled in the Programme, so that patients will not be deterred from participating in the Programme due to economic factors; and

(4) whether it knows if the authorities have reviewed the effectiveness of the Programme and taken measures to enhance its popularity, and whether the authorities will consider extending the service scope of the Programme to cover all public hospitals and healthcare institutions in Hong Kong; if the authorities will, of the details; if not, the reasons for that?

Reply:

President,

In consultation with the Hospital Authority (HA), the consolidated reply

to the question raised by Professor the Hon Chan Wing-kwong is as follows:

To explore the operation of Integrated Chinese-Western Medicine (ICWM) and Chinese medicine (CM) in-patient services and gather operational experience for formulating a roadmap for the future development of CM, the Government commissioned the HA to launch in 2014 the time-limited ICWM Pilot Programme (Pilot Programme) for the provision of ICWM treatment to in-patients of selected disease areas (namely stroke care, musculoskeletal pain management and cancer palliative care) at eight designated hospitals (Note) by phases.

The HA plans the development of its services on a cluster basis. Following regularisation of the Pilot Programme in early 2023, the HA has further expanded ICWM services to more public hospitals and other disease areas for leveraging the advantages of CM and ICWM. To support cancer patients of different stages in particular, the HA has incorporated ICWM services into the cancer treatment protocol, and launched the new cancer care pilot programme at Princess Margaret Hospital and Tuen Mun Hospital in September and October 2023 respectively to provide such services for the first time in day chemotherapy centres. In 2023-24, the HA has also included CM rehabilitation in the clinical framework for stroke care in-patient services and gradually increased the number of participating public hospitals providing stroke care ICWM services to cover all seven hospital clusters. The aforesaid new initiatives on ICWM services have been announced in the 2023 Policy Address.

For the long-term development of sustainable ICWM services, the HA will continue to explore from multiple perspectives the feasibility of extending ICWM services to cover more disease areas (such as elderly degenerative diseases), starting from those where CM has advantages. In addition, under the Greater Bay Area CM Visiting Scholars Programme launched by the HA in November 2022, Mainland CM experts have been invited to come to Hong Kong to provide coaching and clinical training on in-patient services, with a view to strengthening the clinical capability of CM practitioners in treating in-patients, thereby promoting the development of ICWM services.

Under the existing framework of ICWM services, the team comprising CM practitioners and western medicine (WM) doctors will collaborate in formulating clinical treatment protocol for selected disease areas where CM and WM have advantages. The team will also jointly assess the suitability of in-patients for receiving CM treatment, conduct ward rounds and consultations together, and discuss cases regularly. Invited patients may choose to accept relevant services on a voluntary basis. With government subsidies, patients only need to pay \$120 for each attendance of ICWM in-patient services (not including general fees for public hospital services), while Comprehensive Social Security Assistance (CSSA) recipients are eligible for the medical fee waiver. The HA has not received any feedback from patients for not being able to join the programme due to financial factors. Upon discharge from hospitals, patients may choose to attend government-subsidised or non-subsidised CM out-patient services in the 18 Chinese Medicine Clinics cum Training and Research Centres (CMCTRs).

As at March 31, 2023, the cumulative number of patients who have participated in the ICWM Programme was 3 560, of which 490 (about 14 per cent) were CSSA recipients, with the total attendance exceeding 58 000. Details are set out in the table at Annex.

On financial expenditure, the Government has earmarked a funding of \$348 million in 2023-24 for the HA to take forward initiatives for promoting CM development. They include regularisation of the Pilot Programme and ICWM services, efforts on quality assurance and central procurement of CM drugs, operation of CMCTRs to provide government-subsidised services and implement the training scheme for CM practitioner trainees, as well as enhancement to and maintenance of the CM Information System.

The Government will work with the HA to conduct ongoing review of the development of ICWM services, continue to expand various initiatives and build a sustainable model for ICWM collaboration based on experience consolidated over the years. In parallel, the Government will maintain close liaison with the CM sector to jointly formulate the CM Development Blueprint. The Blueprint will map out long-term development strategies and plans for CM in Hong Kong, including the development and planning of CM services.

Note: A total of eight hospitals, namely Kwong Wah Hospital, Pamela Youde Nethersole Eastern Hospital, Princess Margaret Hospital, Prince of Wales Hospital, Shatin Hospital, Tuen Mun Hospital, Tung Wah Hospital and United Christian Hospital.