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# Wanted: FAMILY DOCTORS

The good old family physicians have given way to specialists, who are expensive and inadequate. Some companies are trying to fill the need gap

BY SWAGATA YADAVAR

If there was one thing that Preeti wished she could get to Mumbai from her home town in Ludhiana, apart from the comfort of her family and home, it was her family physician. Having been in Mumbai for the last two and a half years, she is yet to find another doctor like her trusted family physician back home to treat common ailments. Tired of spending too much on specialists, she prefers going home and getting treated or calling her brother who is also a doctor, for prescriptions. Those genial and friendly neighbourhood doctors who treat everything from fever and cold to infections and even help manage chronic conditions are slowly disappearing. In their place have come specialists who focus on specific areas of medicine.

## *The advantage*

This is not a healthy trend, believe experts. A family physician is a primary health care provider who is equipped to deal with common ailments, which do not need a higher level of intervention. Also, there is larger involvement of the physician in the patient's health since he knows him well. "A family physician sees the patient as a whole and since he knows the person's family history and socio-economic status, he is likely to manage the illness better," says 67-year-old Dr Vibhakar Adhvaryu, who has been running a clinic in Nepean Sea Road, Mumbai, for the last 40 years and is the president of the Association of General Practitioners, Greater Mumbai.

The trust patients have in their family physicians gives them the time

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needed for a diagnosis. "We often tell our patients to wait and see us again after a day when the symptoms get confusing," he says. Also, family physicians see routine cases more often. That makes them more adept at accurately diagnosing them than specialists who see severe cases. Generally, about 80 per cent of all complaints can be solved at the general practitioner's level. So, it saves the patients time and money to first consult one. "Since we know the family history, we will immediately know that a particular case of breathlessness is due to asthma, thus save the patient a battery of tests," says Ahmedabad-based family physician Dr Bharat Shah.

### *No easy job*

This doesn't mean that being a family physician is easy. "It is the most difficult branch of medicine to practise," says family physician Dr Janak Shah. "We need to know about all the systems in the body and be available to the patient when they require us," he says. It also requires long hours of consulting and attending to late night emergencies. Also, there are patients who believe in receiving medicines or

prescriptions for everything. "Fifty per cent of the cases are viral infections where antibiotics are not needed," says Dr Bharat. In such cases, only supportive treatment is required. So, in many cases, the family physician gives only a day or two of medicines.

What is expected of a physician is to manage conditions like diabetes and blood pressure and also attend to routine cases. "They have to spend more time counselling patients on lifestyle management than prescribe medicines," says Dr Pushkar Shikarkhane, a consulting physician. "A family physician can act as a bridge between a specialist and the family and even guide the patient if hospitalisation is required."

### *Understanding the need*

Much valued in other countries, this is a field of medicine orphaned in medical colleges in India. The Medical Council of India estimates that 42,000 MBBS doctors graduate every year from medical colleges. Out of these 10,000 travel abroad for studies or fellowships, another 20,000 do postgraduation courses and about 2,000 quit the profession. The rest 10,000 take up

family medicine, which is only a fraction of the number required to treat the primary needs of our enormous population.

There are many reasons for this. Family medicine, for one, is not as lucrative as other streams and it takes many years to set up a good base of patients. But the biggest challenge is the exorbitant realty rates. "The clinical establishment bill has proposed a minimum of 400 square feet of space for a clinic, which would be highly expensive in metros and only a fraction of the physicians can afford it," says Dr Vibhakar. So, very few young doctors take up family medicine and this puts the average age of members in his association at 50. "For the last 15 to 20 years, there has not been a new family practitioner in our neighbourhood. It may be good for me, but not for the public," says Dr Bharat.

### *The intervention*

Chains of community health clinics are recognising this need gap. Healthspring Clinics that started its first clinic in 2011 in Mumbai is one such. The clinics are open seven days a week with services like pharmacy,



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diagnostic laboratory, nurses and physiotherapy and a toll free number that patients can call in case of an emergency. It has led to better doctor-patient interface, says Kaushik Sen, CEO and co-founder of Healthspring. The doctors are paid a fixed remuneration package and so, they don't feel the financial compulsion for kickbacks by prescribing expensive medicines. “As doctors know they are on a good career path with us, we get more applications than we have room for,” he says.

NationWide, another chain of health clinics, has 16 clinics in Bangalore and Delhi NCR and has served 50,000 patients. Dr Santanu Chattopadhyay, founder, CEO of NationWide says that they aim to provide a family physician for every

Indian. “We realise that to achieve this, the number of general practitioners in India must increase. This can only be done by making a career in family medicine an attractive proposition.”

The Medical Council of India has also recognised the need and has approved an MD in family medicine, which was started two years ago in Calicut Medical College, Kerala. The Ministry of Health and Family Welfare has also sent out a circular to all states to start postgraduate training in family medicine to encourage more students to take it up. There are about 200 national family medicine training sites providing 700 family medicine posts.

Will this revive the traditions of good old family physicians? Only time will tell. □