Family Medicine in Pakistan: Challenges, Opportunities and Way Forward

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Family medicine is an essential part of Primary Care that is considered a mandatory part of any successful health care delivery system.^{1,2} This is because of its front line position in health care delivery. This unique position allows Family Physicians to work in the community where patients and families live, offering easy access and equity in the health care delivery system.^{3,4} Focus of Family Medicine on holistic approach including preventive, curative and rehabilitative services ensures that high quality and cost effective health care services are offered to communities and families.⁵ A trusting relationship between Patients and Family Doctors ensures a favorable impact on health seeking behavior of Patients and their families. Family Medicine alone cannot function without functioning secondary, tertiary and quaternary health care services.

Pakistan has a huge disease load with quadruple burden of disease encompassing infectious diseases, non-infectious diseases, mental disease and accidents. This special situation makes it mandatory to have health care delivery with a strong frontline, in the form of well trained and certified Family Physicians.⁶

Against this background, Pakistan Medical and Dental Council (PMDC) has recently made it mandatory for all medical colleges in the country to have Family Medicine departments and a paper in the subject in final year undergraduate MBBS program⁷. It is a much needed, timely and welcome step.⁸ This initiative will produce results in the form of strengthening of health systems through Family medicine, provided its implementation is done in true letter and spirit.

Challenges facing Family Medicine as a specialty in Pakistan are several. Newly established Family

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Medicine departments will require trained and certified faculty. The most important challenge is the shortage of trained and certified faculty in Family Medicine in the country. It will be important to initiate and expand Family Medicine postgraduate training programs in the country, to full fill the need for Family Medicine faculty in the long term.

As an interim measure, it will be appropriate to consider short term solutions to ensure that all medical colleges in the country initiate Family Medicine program. As has happened in other developed countries that initiated Family Medicine programs and took similar steps several decades ago, we can take faculty from other primary care specialties and provide them with support from Family Physicians that have not undergone postgraduate training but are practicing Family Physicians with experience and with or without minor diplomas. This will ensure that objective to have exposure of medical students to the important subject of Family Medicine at undergraduate level takes place.⁹ PMDC can also set up a Central Committee of experts to provide support to newly established Family Medicine departments in medical colleges across the country.

Another important challenge is the lack of understanding about Family Medicine among specialists from other disciplines. It is incorrectly seen as a discipline that provides treatment for minor problems such as cough and cold. On the contrary a well-trained Family Physician can look after 90% of the medical issues patients face into the community. There is a misconception that development and expansion of Family Medicine will take away patients from specialists of other discipline. On the contrary, in health systems with strong frontline in the form of well-trained Family Physicians, other specialists from other disciplines gain from more appropriate referrals to their practice and freeing them from dealing with patients that have complaints that can be easily resolved by Family Physicians. This will require raising awareness among Specialists from other

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discipline about Family Medicine and its frontline role in health care delivery that supports secondary, tertiary and quaternary sectors of health care. It is important to stress on a symbiotic and mutually supportive role of all health care delivery sectors.⁷⁰

Another important challenge is to improve understanding about role of Family Physicians in health care delivery. A lot of patients seek treatment from secondary and tertiary level for primary care level health issues. This is not only waste of scare resources, it provides less than optimum level of care, since Health Care Providers at secondary and tertiary levels are not trained to resolve health care issues patients face at primary care level.

Today, we stand at crossroads in contemplating changes in health care delivery system in Pakistan that will strengthen health systems and health care delivery in the country. We make an appeal in all sincerity to all concerned stakeholders, Health Care Providers and policy makers, to ensure that opportunity offered by changes in regulations in the country is fully exploited to the benefit of strengthening health care delivery in the country. Strengthening of health system and health care delivery by strengthening frontline staffed by trained Family Physicians is the way forward for meeting the health care needs of our communities in the country.

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