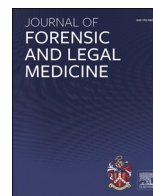




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High time for ease the doctor-patient relationship in China

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ABSTRACT

As doctors, we find it disturbing to read the paper "Burnout in physicians who are exposed to workplace violence" (January 2020).¹ Workplace violence experienced by doctors has been documented both in developed and developing countries. Reports show that Chinese medical professionals are being injured, disabled, or even killed by patients or their family members.^{2,3} The killing of a doctor in Beijing in 2019 attracted national attention. China's top legislative body has approved the first fundamental and comprehensive law to protect health-care professionals. The bill will take effect on June 1, 2020. However, the law alone will not solve the problem. We need to treat it from the root and address the issues that have led to this health-care-related violence. A multi-faceted action must be launched to reduce violence against doctors in China urgently.

First, the current relationship between medical workers and patients resembles a buying and selling relationship. Patients and their family members hope to secure better treatment with money. However, doctors should provide equal service to all patients. When the doctor's services are not up to the needs or expectations of the patient, the relationship between them becomes very tense.¹⁻³ The Chinese government has the responsibility of taking measures to eliminate this conflict. Health treatment should not be bought with money. Second, the media should put effort into reporting more positively on the practice of medicine. Once a patient is admitted into a hospital, her or his family spends a lot of money. If despite all efforts the patient dies, reports in the media suggest that all the health-care providers were interested in was making money. Years of adverse media reports cannot be amended quickly, and the gap between the doctors and their patients is impossible to bridge overnight. Efforts should, however, be urgently invested into changing the image of the medical profession. Third, the Chinese government would need to increase its investment in health care. The current governmental spending on the health system in China is much lower than that in European countries and the United States. This lack of funds

manifests itself at all levels. The medical workers' income is not high. To get somewhat better pay, they work far more than 40 h a week. If the Chinese government would invest more money in health care and ensure a more decent salary for the medical professionals, we think it would make doctors more responsible. Finally, the number of qualified general practitioners in China is inadequate.⁴ The Lancet reported that only one-sixth of the 600,000 professionals who have obtained a doctor's license in China between 2016 and 2019 chose to work in medical institutions.⁵ China's total number of consultations has quadrupled from 20.82 million in 1999 to 83.08 million in 2018. However, the number of practicing doctors has only doubled from 1.56 to 3.01 million during the same period. For two decades, the number of health technicians per 10,000 Chinese citizens has also stagnated. This situation should change. When the COVID-19 epidemic has broken out at the end of 2019 in Wuhan, Hubei, China, medical workers rushed to Hubei to help save the lives of patients infected with SARS-CoV-2 while risked their own lives. They paid with blood and tears to save their patients. We think it is high time the Chinese government took action to amend the doctor-patient relationship in China.

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