

TCM in GP Practice



Dear Editor,

It is indeed surprising that the first Graduate Diploma in Acupuncture organised by Singapore College of Traditional Chinese Medicine had such good reception by Western-trained General Practitioners (GP) as this is a non-CME course. This is the first time that Traditional Chinese Medicine (TCM) and acupuncture are being taught in a formal and systematic way in English. The first batch of 50 will graduate next year but how have the medico-legal implications been looked into?

Learning TCM is only a natural progression. Western medicine is currently plagued by high cost and management limitations. Where such limitations exist, maybe TCM can offer an alternative mode of therapy. In areas where Western medicine is proven, TCM can contribute as a complementary therapy. Hence by adopting TCM in Western medicine, patients have the best of both worlds.

How will the law address medico-legal problems that may arise in the practice of a doctor with a TCM degree? Since 2000, TCM practitioners were required by the law to be registered for licensing purposes. This, in theory, will make TCM on par with GPs. However, in practice, this is not so. This is evident from the non-reimbursement of medical insurance schemes and non-recognition of medical reports, among others. Because of this discrepancy in practice, what will be the status of TCM when practised by a "mainstream" doctor? Is it any different from that of a "pure" TCM physician?

Currently, all practices of Western medicine are evidence-based. As such, if a treatment is not supported by studies, it may not be an acceptable practice. Therefore, if unintended consequences occur, then the doctor involved is liable. As TCM is mainly empirical-based, how will this affect

his practice? In the eyes of Western practice, his treatment is not acceptable; but to TCM, such treatment had been tried and tested and hence is acceptable practice. How will this stand up to the Bolam test?

The law in Singapore is currently based on the English system. There has been no test case involving TCM practice. This is largely due to the lack of a licensing board previously. With licensing now, things should be different. However, is the law able to adequately address a case of TCM malpractice? Is there any framework in place to deal with such eventualities? If there are no current provisions to deal with TCM physicians, double licensing for a Western-trained doctor will be even more complicated to deal with. In the case of a doubly-licensed doctor who utilises both modes of treatment, where do Western concepts end and TCM begin? How do we justify the crossover point that is acceptable medico-legally?

How will the practice of TCM affect the medical protection scheme? It is clearly spelt out that only acceptable practices will be covered by the insurance. Since all insurance schemes to date only cover acceptable practices, how will the use of TCM affect coverage? This brings us back the above argument – where does Western medicine end and TCM begin? Until and unless this crossover point can be adequately addressed, there will be a very large grey area to deal with.

The enthusiasm of the GPs is indeed laudable. The practice of medicine is not something static. Anything that can improve the understanding of a disease will greatly help our patients. However, in the quest to help our patients better, it is hoped that GPs know where they stand with regards to the law. Something good for our patients may not be good enough for the law. It will be a sad day when a GP gets into trouble for using a treatment that is tried and tested but not evidence-based and may not stand against the Bolam test. ■



Wormie

<http://thewormiepage.blogspot.com>