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Patients' characteristics and satisfaction on mobile medicine of traditional Chinese medicine at rural areas in Taiwan

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In Taiwan, the medical rural area is defined to the number of Chinese medicine (CM) physician is 1.8 for every 1 million population and the total CM physician is < 9 in a township. To promote the role of CM in the National Health Insurance (NHI) and protect the health of people in rural area, the National Union of Chinese Medical Doctors' Association encourages all teaching hospitals or clinics to take the mission by increasing the payment. To explore the accessibility and satisfaction of the CM care in the rural area, we use a questionnaire and some information from NHIRD. Our result found that (1) the number of CM physician has increased from 153 in 2010 to 230 in 2014, (2) the number of patients and their medical visit has increased from 22,635/121,660 to 33,779/183,779, (3) the number of serving townships has increased from 62 to 85, and (4) the proportion of service resident has risen from 9.97 % to 15.05%. The satisfactions of top 3, reported by patients, were CM physician attitude, medical skill, and therapeutic effect. Conversely, the most common dissatisfactions were the time of consultation, as well as the imperfect medical equipment and process. In addition, we have found the common diagnosis of the rural residents were myositis, lumbago, cough, arthralgia, common cold, sleeping disorder, headache, sciatica. TCM practitioners actively involved the project grants supported by government could improve the patients' accessibility and satisfaction in the rural area. This result could provide a reference for CM physician to choose the formula or single herb on medical services in rural area.



Biography

Chieh-Ying Chin is the Chinese medicine third year Resident at Kaohsiung Chang Gung Memorial Hospital in Taiwan. She completed her Graduation from Chang Gung University and she is concerned on traditional Chinese medicine utilization at rural areas in Taiwan. The program encourages TCM practitioners to practice traditional Chinese medicine in areas with insufficient healthcare resources and attempts to balance the uneven distribution of traditional Chinese medical resources

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