



Development of Chinese medicine

Figure 1 – Number of attendances at CMCTRs⁽¹⁾ in selected districts⁽²⁾

Districts	2015	2021	Change
Tsuen Wan	70 611	93 815	+33%
North	68 996	85 988	+25%
Eastern	58 154	83 095	+43%
Sha Tin	62 652	83 067	+33%
Kowloon City	29 766	78 922	+165%
Yau Tsim Mong	57 082	70 978	+24%
Islands	36 168	63 928	+77%
Southern	49 280	61 031	+24%
All districts	1 103 726	1 279 987	+16%

Notes: (1) The 18 CMCTRs were rolled out in phases between December 2003 and July 2014. Each CMCTR operates on a tripartite collaboration model involving the Hospital Authority, a non-governmental organization and a local university.

(2) Selected districts are those with percentage changes in attendances between 2015 and 2021 that are higher than the average percentage change of all districts.

Figure 2 – Spending on CM services covered by Elderly Health Care Vouchers

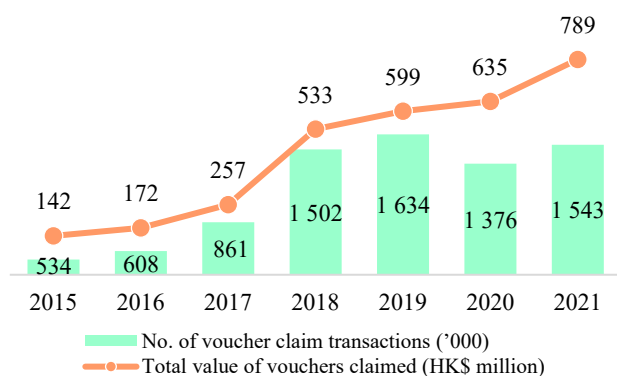
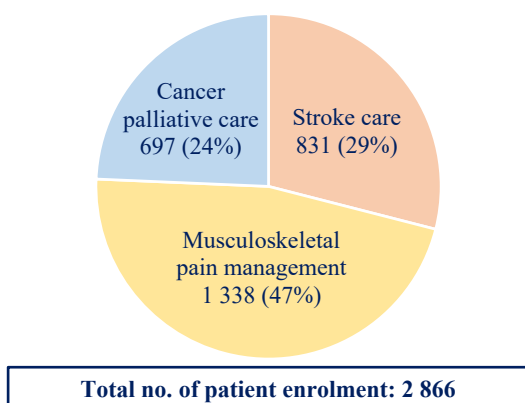


Figure 3 – Patient enrolment of ICWM Pilot Programme, end-2021

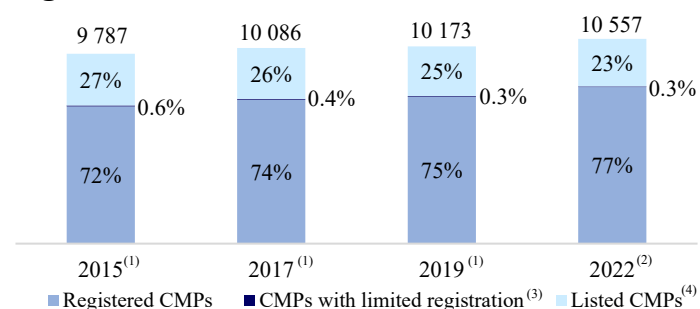


Highlights

- The Government has implemented a range of policy measures over the years to promote the integration of Chinese medicine (“CM”) into the local healthcare system. As early as from 2003, it has subsidized the establishment and operation of 18 Chinese Medicine Clinics cum Training and Research Centres (“CMCTRs”), one in each district, to provide consultation services, training and research. Recently starting from March 2020, the Government has expanded its CM policy from just subsidizing the daily operating expenses of CMCTRs to also include providing new subsidized out-patient services at these clinics. As such, the annual provision for the operation of CMCTRs more than doubled from HK\$94.5 million in 2015-2016 to HK\$230 million in 2021-2022. Amidst the introduction of subsidized CM services, as well as the gradual increase in the number of Chinese medicine practitioners (“CMPs”) practising in CMCTRs from 366 as at end-2015 to 415 as at end-2021, the number of attendances at the 18 CMCTRs reached 1.28 million in 2021, up by 16% from 2015 (Figure 1).
- The increased demand for CM services is also reflected in the rising spending on CM services covered by Elderly Health Care Vouchers during 2015 to 2021. Within the period, noticeable increases were recorded in 2018 and 2019 when an additional voucher amount of HK\$1,000 was disbursed to each eligible elderly on a one-off basis in June 2018 and June 2019 respectively. The high usage level of CM services continued into the ensuing two years even when the annual voucher amount per beneficiary was kept at the original HK\$2,000 level (Figure 2). Mirroring this trend, the number of voucher claim transactions for CM services, as a ratio to the total number of voucher claim transactions, increased from 20% in 2015 to 37% in 2021.
- As for the development of CM in-patient services, the Hospital Authority launched the Integrated Chinese-Western Medicine (“ICWM”) Pilot Programme in 2014 to provide ICWM treatment services for in-patients of three selected disease areas, namely musculoskeletal pain management, stroke care and cancer palliative care. The coverage of the Pilot Programme has gradually expanded from three hospitals in 2014 to the current eight, with 2 866 patients having enrolled in the programme as at end-2021 (Figure 3). The first CM hospital, which will commence services by phases from mid-2025, will predominantly offer CM services with ICWM services being provided for specific patient types or diseases where patients can benefit from both types of treatment.

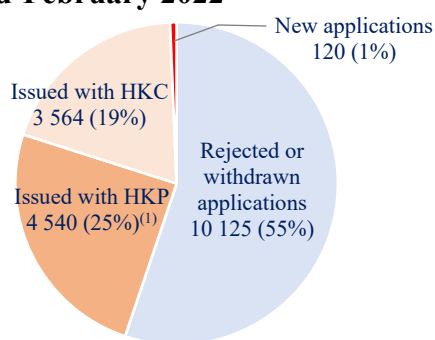
Development of Chinese medicine (cont'd)

Figure 4 – Number of CMPs



Notes: (1) Figures are as at end of the year.
 (2) Figures are as at end-February 2022.
 (3) CMPs with limited registration are allowed to perform clinical teaching and research in CM in specific institutions.
 (4) Listed CMPs have been practising CM before the registration system was introduced in 2000 and not yet obtained the registered CMP status.

Figure 5 – Applications for registration of pCms, end-February 2022



Total no. of applications: 18 349

Note: (1) HKP stands for “Notice of confirmation of transitional registration of pCm”. Among the HKP cases, 862 had been approved for formal registration and HKC would be issued subject to payment of the relevant fees from the applicants. For another 2 271 cases, approval of HKC would be granted after completion of the assessment of the product labels and inserts.

Figure 6 – Chinese Medicine Development Fund

Funding Schemes	No. of applications approved	Funds approved (HK\$'000)
CM Personal Training Funding Scheme ⁽¹⁾	3 177	Information not available
CM Clinic Improvement Funding Scheme ⁽²⁾	308	5,335
pCm Quality and Manufacturing System Enhancement Funding Scheme ⁽²⁾	10	1,229
pCm Registration Supporting Scheme ⁽³⁾	604 ⁽⁵⁾	9,527
CM Warehouse Management, Logistics and Services Improvement Funding Scheme ⁽²⁾	81	4,057
CM Industry Training Funding Scheme ⁽⁴⁾	7	6,119
CM Promotion Funding Scheme ⁽⁴⁾	18	7,660
CM Applied Studies and Research Funding Scheme ⁽³⁾	26	29,281

Notes: (1) Figure is as at end-February 2022.
 (2) Figures are as at 1 July 2022.
 (3) Figures are as at 2 June 2022.
 (4) Figures are as at 29 July 2022.
 (5) The figure refers to the number of pCm products supported.

Research Office
 Research and Information Division
 Legislative Council Secretariat
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 Tel: 3919 3181

Highlights

- As at end-February 2022, there were 10 557 CMPs (or 14.3 CMPs per 10 000 population) in Hong Kong, up from the corresponding 9 787 and 13.4 as at end-2015 (Figure 4). Between 2015 and 2021, an annual average of 65 locally-trained and 170 non-locally trained graduates passed the Chinese Medicine Practitioners Licensing Examination and obtained registered CMP status. The latest round of healthcare manpower projection conducted by the University of Hong Kong in 2020 indicates that there will be an adequate supply of CMPs in the short-to-medium term. Yet, some stakeholders are concerned over the reportedly high turnover rate of CMPs due to the large gap between their actual salary and expectation, as well as the slow progress in developing a CM specialty structure and a related training and qualification accreditation mechanism.
- Regarding the regulation of proprietary Chinese medicine (“pCm”), while the Government has implemented a registration system since 2003, the progress in processing registration applications is considered to be slow, leading to concern about the efficiency and effectiveness of the system. As at end-February 2022, there were over 18 000 applications for registration of pCm, but only less than 20% succeeded in obtaining “Certificate of registration of pCm” (“HKC”) (Figure 5). Some 25% of the applications are still holding “transitional registration”. Nevertheless, those pCms with transitional registration are still available in the market, and some of them have been on sales in Hong Kong for nearly 20 years.
- In another effort to support the development of CM, the Government established the HK\$500 million Chinese Medicine Development Fund (“CMDF”) in June 2019 to support training, improvement of clinic facilities, enhancement of pCm manufacturing quality and management systems, pCm registration, promotion of CM, and applied studies and research, etc. According to the latest figures available, over 3 000 applications had been approved for CMPs and CM drug practitioners to attend training programmes (Figure 6). Applicants for HKC registration of some 600 pCms had also been provided with subsidy to engage professional consultants and/or conduct the necessary testing to meet the registration requirements. The Government has committed to engaging the stakeholders to review the existing funding schemes under CMDF and introducing new measures to support CM development as appropriate.

Data sources: Latest figures from Chinese Medicine Council of Hong Kong, Department of Health, Health Bureau and Hospital Authority.

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