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Women’s Health

In this issue of the Journal, we publish four articles which are all related to women’s health.

What is so unique about women’s health? First of all, females represent 50% of the world’s population and they do have unique physical, psychological and social problems on account of their anatomy, psychological emotions and social roles.

So, what are women’s unique problems? Since female is the only sex which can give births, women suffer from problems associated with pregnancy. With the recent developments of obstetrics, this is in fact a better looked after area for women’s health compared with the rest. I wonder if men may have had a vested interest in this as their own offsprings are at stake? However, problems related to pregnancy still exist e.g. unplanned pregnancy, infertility and the rising rate of caesarian section.

Women may suffer because of their unique anatomy. Breast cancer is an example. It is the second leading cause of cancer death for women in Hong Kong and the rate is rising. This may be related to our changing life style. Early detection of breast cancer is a hot topic in Western countries, what should we do in Hong Kong? Sue Douglas discusses some of these controversial issues in her article (page 447) which should prove to be very stimulating.

Women also suffer from a unique but preventable form of cancer: the cervical cancer. Pap smear has been available for over 30 years and its value is well proven. And yet, many Hong Kong women have never had one done and many are dying every year from this preventable form of cancer. Whose responsibility is it to promote pap smear? I have little doubt that general practitioners should play a very important role in promoting pap smear. However, let us ask ourselves whether we do it or not. The pap smear take-up rate in Hong Kong is appalling and we should take a fair share of the blame for the current unsatisfactory state of affairs. Prevention is better than cure. Can we imagine how we would feel if we came
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home one day and to be told that one of our closest female relatives was diagnosed to have incurable cervical cancer? I hope it will never happen to any of us. However, I also hope it will not happen to our patients and their relatives.

Women suffer from other physical problems as well, e.g. increased risk of osteoporosis, iron deficiency anaemia, vaginal problems and the list will go on forever. These problems do demand special care from the attending doctors.

We can never separate physical problems from psycho-social ones. The same is true for women's health. Many women suffer from problems, both physical and psychosocial, related to their menses. However, many women also complain that their doctors do not show any interest in helping them with their menstrual problems. These problems affect the general well-being of a significant number of our female patients. They suffer from pre-menstrual syndrome, dysmenorrhea, menorrhagia and many others. They can be severely debilitated for several days each month, causing significant hardship. We doctors should take the initiative to identify these problems and provide appropriate management.

Menopausal problem is another example and may be even more neglected by us. However, hormonal replacement has been shown to be useful in helping many female patients with these problems. We should not be too slow in offering help.

Many women are prone to depression which may be easily missed. Their depression may also be closely related to their social roles which we may not be able to change a great deal. However, by providing counselling support and information on social services, we can help them cope with difficult times. Some patients may also benefit from anti-depressant. And yet, if we do not identify their problems, we may never be able to help them.

For a long time, women's health was a very neglected area worldwide. However, with the advancement of equal rights and the persistent campaigning of dedicated individuals, women's health is receiving special attention in most Western countries. Where do we stand in Hong Kong?

Admittedly, women's health in Hong Kong is receiving better attention from the government and the medical profession than a few years ago. However, it is not nearly enough. The first Well Women Clinic run by the Government's Department of Health was recently launched, nearly four years after it was first proposed by the Working Party on Primary Health Care. But I have not heard of plans to have such facilities available territory wide.

Setting up Well Women Clinics is one way that we can improve our service to female patients. However, it is not the only way. Many general practitioners provide good care to their female patients without setting up Well Women Clinics, but they are interested in the unique health problems the female patients may present. Unfortunately, such doctors are very much in minority. We need to direct more attention and resources to this particularly neglected area of primary care. To sum it up, for women's health, we have still got a long way to go.

Lam Tai Pong
Chief Editor