

## Anne W.M. Lee, Vice-Chair, HKACS, Hong Kong

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*Professor Anne W.M. Lee, vice chairman of the Hong Kong Anti-Cancer Society, discusses the role of patient associations in driving change within healthcare systems.*

### **Professor Lee, could you perhaps start by sharing the current strategic priorities of the Hong Kong Anti-Cancer Society (HKACS)?**

As the biggest non-government organization (NGO) in Hong Kong dedicated to cancer, our fervent hope is that we can positively impact the lives of patients. To this end, the Society offers a wide range of services including patient support and counseling, public education, research, advocacy, and even the operation of a nursing home for cancer patients.

A key area of focus for us today is advocacy, both within Hong Kong and internationally. This is why I am proud to share that in October 2018, we will be running a symposium on 'Cancer Challenge in Hong Kong'. This will be a stimulating event where we have invited global experts including Princess Dina Mired, President-elect of the Union for International Cancer Control (UICC), Cary Adams (CEO of UICC), and various leading health economists and professors from institutions like Harvard University to discuss the development of a sustainable comprehensive cancer plan in Hong Kong.



The Hong Kong Anti-Cancer Society Jockey Club Cancer Rehabilitation Centre

As a patient organization, a perennial focus is also on fostering close collaboration and cooperation with all stakeholders from patients, healthcare practitioners, care-takers, government and industry.

**Hong Kong is known to have one of the best public healthcare systems in the world.**

**What are the strengths and areas for improvement related to oncology?**

We are certainly very lucky in that there is an excellent comprehensive public health care system that covers all citizens. Within the public health system, 90 percent of patient medical expenses are covered.

Hong Kong runs a very efficient system in the sense that only six percent of our GDP is spent on health, split evenly between the public and private sectors. At the same time, we have very good health outcomes, most clearly reflected in our life expectancy, which currently stands at an average of 87.7 years old for women and 81.7 years old for men – some of the highest in the world. This is something we are very proud of.

From an oncology perspective, we are fortunate that public healthcare institutions are very well equipped to treat cancer. Patients in Hong Kong have access to all major forms of treatment like surgery, radiotherapy, and pharmaceutical drugs. However, although these options are available, they can be very expensive. In terms of cancer, 90 percent of patients resort to public service because the costs are so high.

When a drug becomes mature and has a high level of proven effectiveness, the drug becomes a standard provision in the public system. For new treatments that are very expensive and whose long-term benefits need further study, the government has established self-financing guidelines. This means patients treated in the public system have to finance these particular treatments

themselves.

In light of this, Hong Kong has 'safety net' initiatives to help patients access these treatments. The Samaritan Fund and Community Care Fund exist to provide financial assistance to needy patients, who meet the specified clinical criteria and passed the means test in order to access new drugs not covered by the public care system. In addition, NGO support is another strength within the Hong Kong oncology healthcare ecosystem.

**Could you share some of the successes HKACS has had in supporting cancer patients in Hong Kong?**

HKACS plays a key role in helping the patients. One major success I would like to share is the Professor H.C. Ho Memorial Medical Assistance Program, which was established in 2006. Professor Ho was the founder of HKACS, and a great pioneer in cancer research.

When he passed away, just over HKD 0.5 million (USD 64,102) was collected at his funeral by friends and family, which was donated to the HKACS. With that money, we started this drug assistance program to help needy patients to finance the high costs of self-financing drugs. However, we knew this monetary subsidy can only suffice to help a limited number of patients, so we developed another source for sustainable support.

In addition to this lump sum, we invited pharmaceutical companies to donate drugs through the HKACS. While it was difficult at first, we built our relationships with industry and to date, in Hong Kong, we have had up to 19 companies support the program by donating pharmaceutical products. We have also managed to receive support from the Hospital Authority to allow such products to be dispensed to patients within the public healthcare system, which is also very important.

Through this program, over the past twelve years, we have helped more than 5,700 patients. The total value of the drugs donated through this program exceed HKD 0.35 billion (USD 45 million) – far outstripping the original donation.

Effectively, we have created a third safety net for cancer patients. If doctors in public hospitals feel that a patient needs certain innovative drugs that are not covered by the Samaritan Fund or Community Care Fund, and the patient meets the means testing criteria, the patient can be referred to our Medical Assistance Program.

**Many patient organizations around the world find it very difficult to connect with industry players like pharmaceutical companies. How has the Anti-Cancer Society established such a successful program?**

In the beginning, it was not easy to establish the program. When we first thought of the idea, many people wondered if this would be accepted by the Hospital Authority and industry. Fortunately, the then-Chief Pharmacist was very supportive of the Program. Initially, only one pharmaceutical company pledged to donate. Many others were initially skeptical. With the success in setting up a robust system, increasingly more companies have joined the program.

In this way, we can achieve greater value from the drug treatments. We would never have been able to achieve such a large impact by simply petitioning for monetary donations. Together with our pharmaceutical industry partners, we have achieved a meaningful impact. Even so, we are careful to ensure that the companies are not using our program as a means to promote or market their products.

Being on the board of directors for the UICC, I strongly feel that cancer is such a big societal burden that it needs support from all areas – public, academic, health professionals, government, as well as industry. All stakeholders need to work together to fight against cancer.

### **How has the globally recognized academic excellence of Hong Kong impacted the health care system for cancer patients?**

We are fortunate to have skilled researchers and clinicians here in Hong Kong contributing to the system. For example, there are very severe types of cancer which have exceptionally high here in Asia, like Nasopharyngeal cancer (NPC). Our founder, Professor Ho, was one of the forerunners in studying this type of cancer.

NPC is difficult to detect because the nasopharynx is a very small area behind the nose. NPC itself is also an aggressive form of cancer and most patients are diagnosed in the late stages. Surgery is not a treatment option because it would be too invasive to reach the affected area. However, when radiation therapies were first introduced, it was discovered that NPC cancer is sensitive to and can be cured by this treatment modality.

With the contributions of many, the incidence for NPC in Hong Kong has since decreased by 50 percent over the last 30 years, since the research began in the 1970s. For those patients who are diagnosed with this condition, the five-year survival has risen from only 50 percent in the 1970s to over 80 percent in the modern era. This is a local Hong Kong success story we are very proud of, which once again highlights the impact of collaboration between government, academics, patients, NGOs.

**As a successful patient association, what final message do you have for other similar organizations working to develop their country's healthcare system?**

As an advocacy organization, having a patient focus is a priority. Offering diverse services that address the whole patient cycle – from education, prevention, and screening to radical treatment and finally palliation for patients who are towards the end of life – is an important aspect.

Collaborating with all stakeholders like the government, other NGOs, and industry institutions is also an important strategy. International collaboration is especially valuable for learning and sharing our advocacy works. This is why the HKACS is an active member of the UICC. Over the past year, we have partnered with them to organize conferences to share experiences throughout Western Pacific. We invited Asian countries to come together to discuss how we can work together to improve cancer control in the region. Additionally, the UICC invited HKACS to take on the Chinese editing of the Cancer Atlas, an international catalog of various important data related to cancers.

Looking to the future, we believe Hong Kong can be the bridge between China and the rest of the world for healthcare development. When we speak at conferences my message is, 'if Hong Kong can, the rest of China and the other Asian countries can too'. This may provide strong encouragement to other countries in the region, as they may feel that medical provisions and achievements in Europe or the US are too distant, so Hong Kong offers a more relevant experience to share within the region.

We have shown that Asia has the potential to initiate, develop and achieve our own health objectives and initiatives. In this way, I earnestly hope HKACS can act as an exemplary model for other organizations by sharing our experiences.

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