

# Health and Regulation in the Internet Age

By The Hobbit

Surfing the web has become a pastime for many Singaporeans. Web-linked communities now have the means to access a huge number of sites to avail themselves to a vast array of information. The number of health sites in the Web providing scientific information, pseudoscientific information and pure rubbish masquerading as information is expanding at an amazing rate. One of them is even the subject of a book by a best selling author. We already have several of such companies listed in USA and we have one on the Singapore Stock Exchange<sup>2</sup>.

The Internet has become an enabling tool for many businesses, the health industry included. Almost every major private healthcare player in Singapore has an Internet strategy of some kind. The promise of enhanced communication between care-givers, institutions and patients via the Internet is already seen in some institutions overseas. In Singapore, the race is on for a fully functional Electronic Medical Record (EMR) to be put in place.

Bill Gates has remarked that if business in the 80s was about the quality movement, and the 90s about business process reengineering, then the beginning of the 21<sup>st</sup> century will be about velocity<sup>3</sup>. Computers and Internet enables dissemination of information to many people at the speed of thought literally and businesses have to correspondingly respond and react to this Information Revolution with new e-business strategies such as portals, online consultations, etc.

Where there is use, there is abuse. Today, healthcare can be given virtually on the Internet. In some cases, the Internet is a blessing, such as the use of Internet-based Telemedicine to provide medical consultations to communities in far-out places, such as the outbacks of Australia. In many cases, it is clearly a case of abuse. Prescription drugs can be obtained online without much of a decent profiling

of a person's problems. It is said that one can now order a certain sexual performance-enhancing drug on the Internet and the whole package will arrive in the disguised form of a package of books within 5 working days. While we regulate our medical clinics, pharmacies, hospitals, laboratories, nursing homes stringently, a whole new face of the health industry is evolving on the Internet. Make no mistake, health is BIG business. It is said that health sites are the most popular sites on the Internet after pornography, entertainment and IRC (Internet Relay Chat).

Can the law keep up with the changing times to safeguard and promote worthy initiatives and also to curb abuse? After all, processes and excesses are just different sides of the same coin.

The current Private Hospital and Medical Clinics (PHMC Act) states that clinical laboratories, medical clinics, laboratories and hospitals are "premises"<sup>4</sup>. When licences are issued to these healthcare establishments, they are issued on the grounds that these establishments are physical premises with physical addresses. It is likewise for the Medicines Act that provides for the licensing of pharmacies. But in the Internet Age, one can argue that an existence need not always be physical but virtual: a URL is sometimes more representative of an establishment than a physical address. It is perhaps time for us to look into re-defining what a pharmacy or healthcare establishment is, to take into account the realities of a virtual world, no matter how oxymoron this may sound. The regulators have a little edge here. No matter how virtual and powerful the Internet gets, it cannot substitute for the physical Internet is but electrons, photons and agitation of air molecules. It cannot make a delivery of physical goods or a physical examination.

EMR has been called the holy grail of medical informatics. Its potential is



enormous, but few have truly harnessed it, many more have avoided it (for the time being) and some are plainly stuck in it like quicksand. Some embrace it like Bill Gates who devotes an entire chapter of his book to it. Many of us have heard many times of the potential benefits of a properly designed and implemented EMR that can be shared between different institutions such that a person's medical records are available to different care-givers in different healthcare establishments. Such an EMR will undoubtedly save time and costs. No more letting the same patient or relative re-tell a past history spanning 2 decades to 7 different doctors and nurses. No more prescription errors. No more wasting time and persons on tracing of notes.

However, before virtual sharing of medical records is possible, the law needs to play an enabling role in this. Concerns such as patient's confidentiality are justifiably important and the law rightly should protect the patient's interests in this. Currently, the licensee of a licensed healthcare establishment is responsible for the integrity of a medical establishment's medical records<sup>5</sup>. What that means is that a licensee under the same PHMC Act may not be able to release information about a patient to another establishment to create a longitudinal composite record of the same patient without the patient's specific consent. In law-abiding Singapore, what is not explicitly expressed as allowed will not be deemed permissible by those concerned and so licensees would rather err on the side of caution in such potentially

sensitive issues. Many Singaporeans doctor-hop such that a patient can be seen at many different GP clinics, specialist clinics and hospitals. As such, an unlinked institution-limited EMR is about as much use as trying to preserve an inflamed appendix. And trying to obtain a patient's consent in every case is just unnecessary hard work. While a patient's privacy has

to be protected, should protection hinder care as well? How many patients actually do not want certain things about doctors and not others? Not many, I think.

In the Internet Age, policy makers and care-givers need to embrace the velocity of today's world yet safeguard the individual's perennial rights. It is a huge

undertaking. Yet we can either undertake to do so, or risk being overtaken. ■

#### References

1. Michael Lewis: *The New, New, Thing, 2000 (Healthon/WebMD)*.
2. *EzyHealth, listed on MainBoard of SGX, 2000.*
3. *Bill Gates: Business at the Speed of Thought, 1999.*
4. *PHMC Act 1999 Section 2.*
5. *PHMC Regulation 12.*

#### ◀ Page 3 – EQ, IQ & RQ of Doctors

These are the abilities that undergird popularity, leadership and interpersonal effectiveness. People who excel in these skills do well at anything that relies on interacting smoothly with others. This is what the doctor-patient relationship needs and you must provide all these factors to make it a successful and beautiful relationship.

#### PORTRAITS OF HIGH IQ AND EQ INDIVIDUALS

To understand the significance of IQ and EQ, we can look at portraits of persons who possess only either high IQ or EQ.

The high IQ pure type (that is, setting aside EQ) is almost a caricature of the intellectual, adept in the realm of mind but inept in the personal world. If male, he is typified by a wide range of intellectual interests and abilities. He is ambitious and productive, predictable and dogged, and untroubled by concerns about himself. He also tends to be critical and condescending, fastidious and inhibited, uneasy with sexuality and sensual experience, inexpressive and detached, and emotionally bland and cold.

By contrast men with high EQ are socially poised, outgoing and cheerful, not prone to fearfulness or worried rumination. They have a notable capacity for commitment to people or causes, for taking responsibility and for having an ethical outlook. They are sympathetic and caring in their relationships; their emotional life is rich, but appropriate. They are also comfortable with themselves, others and the social universe they live in.

Pure high IQ women have the expected intellectual confidence, are fluent in expressing their thoughts, value intellectual matters, and have a wide range of intellectual and aesthetic interests. They

also tend to be introspective, prone to anxiety, rumination and guilt and hesitate to express their anger openly (though they do so indirectly).

High EQ women by contrast, tend to be assertive and express their feelings directly, and to feel positive about themselves; life holds meaning for them. Like the men, they are outgoing and gregarious, and express their feelings appropriately (rather than say, in outbursts they later regret); they adapt well to stress. Their social poise lets them easily reach out to new people; they are comfortable enough with themselves to be playful, spontaneous, and open to sensual experience. Unlike the women purely high in IQ, they rarely feel anxious, or guilty, or sink into rumination.

#### BALANCING IQ WITH EQ

These portraits are extreme, as all of us mix IQ and EQ in varying degrees. We have both cognitive and emotional intelligence. Of the two, EQ adds far more of the qualities that makes us more fully human.

I am sure we can do with more EQ in each of us. IQ we already have a lot of and we do not need a formal Mensa test to evaluate our level of IQ. But let us balance high scores of IQ with high scores on EQ also. How?

Many a time we hear that someone's attitude is bad. Why? The crux is the lack of listening skills. In any social interaction, there is listening and communication. After all, people must listen to each other; we doctors to our patients and their relatives in order to do our jobs, improve outcome and be successful.

#### LISTENING SKILLS AND EQ

There are five stages in the listening continuum. The first four stages in ascending order of effectiveness and all within one's

own frame of reference are ignoring, pretend listening, selective listening and attentive listening. The final step is empathic listening. Empathic listening takes the other person's frame of reference into our consideration.

To listen effectively, there are three keys. Firstly, begin listening to others from a neutral, open-minded state. This allows you to really concentrate and focus on what others are saying to you. Seek first to understand. The proof of empathic listening is when you can restate what you have heard and the one you listened to agrees with you. The one you listened to must also feel understood by you.

Secondly, pay attention not only to the logical content of what someone is saying but also to how they say it viz. how they feel about the subject under discussion. If you listen for emotions rather than only words, you will absorb both and your understanding will be deeper.

Thirdly, respond in such a way that proves you are taking the other person seriously. Demonstrate respect for their points of view.

To be successful, you need more than IQ which you already have. More EQ is better than less. Performance and success depends on more than brilliance of mind. In our caring profession, EQ is vital to the success of the doctor-patient relationship.

#### ON ENTREPRENEURIAL QUOTIENT (THE OTHER EQ)

In today's shrinking world, EQ also refers to entrepreneurial quotient. We want people with a sense of adventure, to strike out into the unknown – into a brave new world, a wilderness of sorts where anything and everything goes. To think creatively, to think outside the box, to go through uncharted waters, to even go where angels fear to tread?