

Case Report

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End Violence Against Doctors: Mobile Cabin Hospitals for Prevention and Control of Covid-19 In China

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ABSTRACT

Violence against doctors has become an increasing concern. With the improvement of the economy, the physician-patient relationship is becoming increasingly tense, and conflicts are deepening. In the current social economy, there has been a fundamental change in the ideology of the physician-patient relationship focusing on economics, the cost of healthcare, legal consequences of malpractice, as well as ethical and cultural considerations. What seems to be lost is the ideology of a physician-patient relationship based on the concept of healing the wounded and saving the dying, where the patient trusts the physician to lead them toward improved health. Since the COVID-19 outbreak in Wuhan in December 2019, a number of mobile cabin hospitals have been established in Wuhan to prevent and control COVID-19. Interestingly, mobile cabin hospital may be the much-needed remedy for the breakdown of the physician-patient relationship. Studies shown that the most harmonious physician-patient relationships in history have occurred in mobile care units. In this paper, the root cause of the harmonious doctor-patient relationship in mobile cabin hospitals is analyzed. This model may provide information for China's medical reforms and improvement of physician-patient relations in the future.

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How can we put an end to violence against doctors in China? Xueqing et al., [1], provides four aspects to improve physician-patient relations, the most critical being an increase in health resources. This has been proven by the harmonious doctor-patient relationship seen in the mobile cabin hospital established in Wuhan for the prevention and control of COVID-19. In the mobile units, there has been an increase in positive interactions between doctors and patients.

First, mobile cabin hospital units ensured that patients were not affected by the cost of medical treatment. The receiving hospital does not face any loss due to the payment policy. Civilian participation reduced the work load and produced an innovative service modality [2,3]. In this way, the government implemented measures to reduce the costs of patients who were either confirmed or suspected of having COVID-19 and provided a guarantee for epidemic prevention and control [4].

Second, the government improved the working conditions of medical staff in terms of providing them with adequate rest. This improved their physical and mental health. Attention to rest and recuperation allowed for treatment when necessary so that medical staff were well-equipped to perform their duties. The government also strengthened the humanitarian side of medical care to create a more secure environment for suffering patients. Doctors and medical staff were more motivated by giving them advanced recognition, encouraging their professional spirit. This improved

patient trust and patient care, thereby reducing mortality and increasing wellness [2].

In this way, medical personnel were not tasked with generating income, patients were not burdened by payment, and the safety of both doctors and patients was guaranteed from all aspects; thus, eliminating worries. It can be seen that when both the doctor and the patient do not have conflicting interests, there is enhancement of mutual trust and a harmonious doctor-patient relationship. In mobile cabin hospitals, the medical staff and the patients were seen dancing together happily, playing, caring, and encouraging each other, thus, bringing optimism and narrowing the distance between patients and doctors (Figure 1).



By timely acknowledgement of doctors' services in defeating SARS-CoV-2, mobile cabin hospitals prevented doctors from becoming victims of violence. It is hoped that the experience of

the mobile cabin hospital can be turned toward national medical reforms, which may end violence toward doctors in China.

Conflict of Interests

There are no conflicts of interest.

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