Family Medicine: A Frontline Approach to Preventive Healthcare in Low Middle-Income Country - Pakistan

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Family medicine is a medical specialty that provides first contact and continuous, comprehensive healthcare for individuals, families and communities across their entire lifespan, while also including care of all genders and reproductive stages", this is the widely used definition given by the American Academy of Family Physicians.[1] Further, family medicine integrates the biological, clinical and behavioural sciences, extending care to all ages, genders and illnesses, making it the worldwide cornerstone of the healthcare system.[2]

Family medicine, frequently called the "*doorstep of healthcare*," ensures that medical services are accessible near people's homes for treating acute and chronic conditions, focusing on preventive and overall health. It is a unique medical specialty integrating preventive and therapeutic approaches to deliver holistic healthcare. Family physicians handle a variety of medical conditions and recommend patients to specialists, making it the starting point for healthcare. Further, they offer immunisations, health screenings, lifestyle advice, and early disease detection to prevent illnesses and promote health.[3]

Family medicine is distinct from primary health care and primary care; it is an adaptive and evolving specialty, but the boundaries of these three are often blurred. Some consider family medicine a subset of primary care, whereas family physicians are specialists who provide contextual healthcare according to health needs and available resources. They treat various illnesses and serve as gatekeepers, handling specialist referrals when needed. Their long-standing patient connections and in-depth knowledge of community health dynamics uniquely position them to provide preventative care. Thus, they play a crucial role in preventive care, where both communicable and non-communicable diseases are common, and the role of family physicians in preventive care is indispensable.[4]

Family medicine is a well-recognized specialty in high-income countries (HICs), including the United States, Canada, Australia, and the United Kingdom. It has been incorporated into universal healthcare models in nations such as the UK, emphasising its importance in patient care through the National Health Service (NHS).[5] Family Medicine education and training are incorporated in medical education curricula encompassing eight core principles: first-contact care, comprehensiveness, continuity of care, coordination, prevention, family orientation, community orientation, and patient-centredness.[6]

Considering these core principles, family medicine is essential for strengthening primary healthcare, improving preventative care and tackling the country's health issues. However, the trajectory of uptake of Family Medicine into the healthcare system is growing slowly in Low-Middle Income Countries (LMICs).[7] Similarly, in Pakistan, family medicine is not given enough credit. Although it can fill gaps in primary care between tertiary care, the other subspecialties frequently take precedence over it. Therefore, family medicine's integration into the healthcare system is limited by its lack of priority in national health policy and undervaluation as a field.[8]

Family medicine plays a crucial role in addressing many public health concerns in Pakistan, such as maternal and child healthcare, childhood vaccination programs, and mental health. Family physicians manage these often-overlooked issues by integrating treatment and counselling while providing essential health education on proper nutrition and hygiene.

They diagnose and treat various medical disorders like respiratory infections, diabetes, high blood pressure, and asthma. The strength of family medicine lies in its seamless combination of therapeutic and preventive approaches, with early diagnosis and treatment facilitated by preventive screening, helping to reduce complications and medical expenses.[9]

Family medicine is the cornerstone of primary health care because it offers comprehensive and coordinated care to individuals and families in the broad context of community health. It emphasises patient-centred approaches, continuity of care, and accessibility, which are essential for achieving optimal health outcomes.

Despite its significance, family medicine in Pakistan has encountered several difficulties, such as a lack of training programs, a lack of certified family physicians, and limited recognition as a separate specialty. The specialty's expansion has historically languished for several reasons, such as a lack of resources and gaps in policy.[10] Historically, In 1986, Aga Khan University took the first initiative by

integrating the family medicine programme into the undergraduate medical curriculum. [11] Later, in 1990, the College of Physicians and Surgeons of Pakistan started its first postgraduate diploma programme. It was upgraded in 1993 to a fellowship programme, recognizing family medicine as a specialty in Pakistan.[12]

The Pakistan Medical and Dental Council (PMDC) has recently recognized family medicine as a primary care specialty, similar to practices in other developing countries. Specializations in family medicine and related postgraduate training programmes, such as Fellow of the College of Physicians and Surgeons of Pakistan (FCPS), Member of the College of Physicians and Surgeons of Pakistan (MCPS) and International Member of the Royal College of General Practitioners (MRCGP) are becoming increasing popular.[13]

Family medicine is needed today to provide holistic patient-centred care. It is recommended to be strengthened as a discipline and a specialty by (a) Policy Support and Recognition: Establish policies that encourage the growth of family medicine and recognize it as a crucial specialist within the healthcare system (b) Educational Initiatives: Expand and enhance family medicine training programs to develop qualified family physicians with strong therapeutic and preventive care competence. (c) Resource Allocation: Ensure primary healthcare facilities receive sufficient funding for family physicians to provide effective therapeutic and preventive care (d) Public Awareness: Increase awareness of family physicians' contributions to preventative care to encourage the use of these services. (e) Lowering Medical Expenses: Family medicine provides affordable care by treating various medical conditions at the primary care level and reducing unnecessary hospital admissions and specialist referrals.

In conclusion, family medicine must be integrated into medical education and the healthcare system to improve health outcomes and advance preventative healthcare in Pakistan. By investing in the growth of family medicine, Pakistan can establish a more robust and proactive healthcare system that effectively meets the needs of its population. Incorporating family physicians into primary healthcare systems and expanding family medicine training programmes will enhance healthcare delivery, particularly in underserved areas.

REFERENCES

1. American Academy of Family Physicians. Definition of Family Medicine [Internet]. Leawood, Kansas: American Academy of Family Physicians; 2025 [cited 2024 October 15]. Available from: https://www.aafp.org/about/policies/all/family-medicine-definition.html
2. Hashim MJ. A definition of family medicine and general practice. J Coll Physicians Surg Pak. 2018 Jan 1;28(1):76-7.
3. Qidwai W, Nanji K, Khoja TA, Rawaf S, Al Kurashi NY, Alnasir F, et al. Health promotion, disease prevention and periodic health checks: perceptions and practice among family physicians in Eastern Mediterranean Region. Department of Family Medicine. 2015 Jan 1.
4. Phillips WR, Haynes DG. The domain of family practice: scope, role, and function. Fam Med. 2001;33(4):273-7.
5. Kringos DS, Boerma WG, Hutchinson A, Van der Zee J, Groenewegen PP. The breadth of primary care: a systematic literature review of its core dimensions. BMC Health Serv Res. 2010;10:1-3.
6. Kidd M. The contribution of family medicine to improving health systems: a guidebook from the World Organization of Family Doctors. CRC press; 2020 May 6.
7. Arya N, Gibson C, Ponka D, Haq C, Hansel S, Dahlman B, et al. Family medicine around the world: overview by region: The Besrour Papers: a series on the state of family medicine in the world. Can Fam Physician. 2017;63(6):436-41.
8. Tejani FA, Rashid MA. Enhancing family medicine training to build capacity in Pakistan: a call for action. Educ Prim Care. 2023;34(5-6):240-3.
9. Saifullah, Ma Z, Li M, Maqbool MQ, Chen F. Family physician service quality and sustainability: a roadmap for Pakistan's healthcare sector. Front Med. 2024 Dec 5;11:1455807.
10. Qidwai W. Family medicine in Pakistan: challenges, opportunities and way forward. J. Dow Univ. Health Sci.2015 ;9(1):1-2.
11. Zuberi RW. Family medicine: a brief review of its history and concepts and its relevance to Pakistan. J Pak Med Assoc. 1993;43(5):102.
12. Ashraf S. Historical review and evolution of family medicine as a specialty. J Rehman Med Inst. 2016;2(4):42-5.
13. Amin F, Sabzwari SR. Family medicine as an emerging specialty: a Pakistani perspective and the RCGP International Overseas Network. BJGP open. 2018;2(3).