

Chinese doctor's death rekindles anger over health system

A correspondent

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On June 2, Dr Hu Weifeng, a urology doctor at Wuhan City Central Hospital, died from COVID-19 after a protracted illness, causing renewed public outrage over the poor condition of the Chinese medical system and the deaths of health workers.

According to reports, the doctor was diagnosed with COVID-19 on January 18 and was treated at the hospital. His condition deteriorated several times, and he received popular attention because a photo appeared of his face turning black when undergoing treatment.

On April 22, due to a sudden cerebral hemorrhage, his ill-health again became critical, and after more than a month of further treatment, he died last week. A colleague re-posted his last words on social media: "I am like a little boat in the sea and may be submerged at any time."

Although China's internet and social media have been greatly restricted to suppress public opinion during the past few months, Hu Weifeng's death still caused widespread anger, focussing first on the official censorship of news about it.

Wuhan City Central Hospital remained silent about the doctor's death. The hospital's official website published nothing about it and Hu Weifeng's colleagues were barred from being interviewed by the media.

It is understood that during the epidemic, a total of six doctors died in this hospital. As of early February, approximately 70 of the hospital's medical workers were infected with COVID-19. Those who died included Dr Li Wenliang, who is known as the "whistleblower" of the outbreak. In the early days of the pandemic, police warned him for sharing information about it on social media.

Li Wenliang's death caused considerable concern and demands for free speech on Chinese social media.

The hospital's silence on Hu Weifeng's death and the government's restrictions on online public opinion sought to prevent similar dissent from re-appearing on a large scale.

Throughout the pandemic, doctors have been told not to disclose information to the public or the outside world. Doctors and nurses have been prohibited from using protective equipment in order to create the illusion that "all is well." As a result, many healthcare workers became infected in China's hardest-hit area. Official statistics indicate that more than 3,000 doctors and nurses were infected in Wuhan.

There is discontent over the government's initial concealment of epidemic information. On January 18, the Wuhan government organised a feast attended by more than 40,000 families in a local community. The official media declared that the feast had defeated "rumours" about the outbreak. Only two days later, the government had to declare a state of emergency. According to reports, this community has suffered the highest infection rate in Wuhan.

Incomplete statistics from unofficial sources show that more than 500 Chinese medical workers have died in the epidemic, and the actual number may be much higher than this. The treatment and protection of medical workers has become a topic of public concern, adding to long-standing dissatisfaction with the medical system.

As in other capitalist countries, the epidemic has exposed the shortage of resources in the public health system. Tens of thousands of doctors and nurses have to work without adequate protection. Some have only low-quality sanitary protection equipment, and some have had to make their own.

A photo of medical workers using plastic bags to make protective clothing was popular on the internet. It

has been reported that in a typical medical service centre, about 100 doctors and nurses share one set of protective clothing.

China's government has always boasted about the country's rapid economic growth, but the government's spending on the medical system accounts for just 6 percent of its gross domestic product. According to the World Health Organisation, China had only 2 doctors per 1,000 people in 2017, about half the level in the euro zone. This shortage is worse in China's remote areas and small country towns.

Compared with 2012, China's medical demand increased by more than 10 percent by 2014, but the number of doctors rose by only 3.5 percent. Research shows that the burnout rate of Chinese doctors is as high as 76.9 percent, so the situation is likely to worsen.

Official statistics indicate that at least half of doctors' incomes are lower than the average urban monthly salary, which was 4,780 yuan (\$US675) in 2014. In the same year, two-thirds of doctors' incomes were less than 5,000 yuan.

At the same time, ordinary people often cannot afford medical services and dare not go to a hospital when they get sick. It is estimated that nearly 30 percent of patients who should be hospitalised are not, for financial reasons. It is not uncommon for families to become poor because of illness.

The pro-capitalist "reform" of the medical system since the 1990s has continuously pushed privatisation and commercialisation. This makes the relationship between doctors and patients extremely tense. In recent years, medical workers have been assaulted and even murdered.

The harm and social problems that capitalism has brought over decades are far greater than those caused by viruses. People will not forget the victims who died in this pandemic as a result.



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