ABSTRACT
After decentralizing health management in the early 1980s, China’s health care system developed many of the problems that we in the United States are currently working to solve. Though China is literally on the other side of the world, I think we might learn a few very important lessons from a close look at their successes, failures, trends, and goals in health care administration and delivery.

INTRODUCTION
Between 1952 (around when the Communists came to power) and 1982, life expectancy in China increased from 35 years to 68 years, and infant mortality per 1000 births fell from 200 to 34. In the late 1970s and early 1980s, though, China began to shift from a Beijing-based economy to one that was more open and market-based. This led to rapid economic growth and development, but it also left much of the country’s population without the health insurance coverage – about 900 million people became uninsured overnight. And the Chinese health system was quickly characterized by medical problems quite familiar to us in the United States: loss of efficiency and rise of for-profit medical administration. Access to care soon became an enormous problem for China’s rural population. The Chinese government has since been making steady improvements in the health system, and they have recently agreed to spend a much greater percentage of GDP on health. Several major challenges, however, stand in the way of reaching their goals of universal health care. Some of these challenges have been (and remain) the subject of great debate and contention in the United States.

METHODS
In July of 2007, I flew to the western Chinese city of Chengdu, in the Sichuan province, and spent roughly a month in the emergency department of the West China Hospital. The West China Hospital, or HuaXi, as it’s known to the locals, is a 5,000 bed hospital, perhaps one of the largest in the world, and it serves as a Trauma Center and tertiary care referral center for some 100 million people in Western China and Tibet. While there, I familiarized myself with some of the practices of the Chinese health care system first-hand. I gathered primary information from nurses and physicians, and when I returned home I gathered more information from the literature on the current state of the Chinese health system. Presented here is the union of both the primary information and that from the published medical literature.

RESULTS
From speaking to the doctors and nurses, I gathered that health care in China “has a long way to go” and is currently experiencing rapid growth and change. A critical care physician highlighted for me the three main health-related goals of the Chinese government in the near future:
1. Develop a functional and competent emergency services and disaster management system
2. Distribute physicians evenly amongst rural and urban medical centers to ensure adequate training
3. Implement a system of health insurance that covers everyone, wealthy and poor

My review of the current published medical literature returned much of the same goals. The quality gap urban medicine and rural medicine is vast, and certain data indicate that such a trend is worsening. However, one very important advantage was mentioned: China can afford to increase health spending without cutting funds from other social services. And they are eager to seek advice from international sources to secure reliable information and outline the best plan for their people.

CONCLUSION
Different language, different hemisphere; similar problems. The current climate of health care in China appears to contain both weighty challenges and the energy required to address those challenges.

REFERENCES