



# Partners in healthcare

*Dr Paul Martiquet, Medical Health Officer*

**A family doctor sees a patient come in looking quite ill and in some respiratory distress. After taking a his-**

tory and with some routine questions, the doctor learns that the man is a chicken farmer raising free-range birds, most of whom recently died and were disposed of by the farmer. Because the doctor was up to date on current public health developments, the doctor recognized that the symptoms, combined with the other information, mean he might well be infected with H5N1 (bird flu). The doctor contacts the local Medical Health Officer and an infectious disease specialist to hospitalize the farmer. The MHO follows up by notifying the Ministry of Health and the Public Health Agency of Canada who in turn.... [Summarized from *Integrating Public Health and Primary Care* by Margo Stevenson Rowan et al, published in *Healthcare Policy*, 2007.]

This scenario is not particularly fictional as primary care physicians regularly work with public health professionals on prevention, in monitoring health concerns and educating patients on making good health choices. How much they work together has changed over the years—for the better.

Generally, “primary health care” describes the work of clinical professionals such as doctors and nurses working directly with patients. They do so usually at the request of the patient (who make appointments or drop in) and focus on the needs of that individual.

On the other hand, “public health,” sometimes called population or community health, is targeted at the whole community instead of an individual. It

focuses on improving the health of communities (as small as a neighbourhood or as large as a country) through education, promoting healthy lifestyles, research and disease prevention.

Taken together, public health and primary health care work well to improve people’s lives. Bringing the two more closely together makes for better results across the spectrum of health care. Public health can identify disease and health challenges, sharing knowledge with primary care providers. In turn, they get back information about the occurrence of disease in the community from the physicians who see it first-hand. And patients receive better care as their doctors promote healthy living and disease prevention.

The role of population health in the Canadian health care system is converging with that of primary care and has taken on a new significance in recent years.

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The challenges of H1N1, bird flu, SARS have given prominence to the relationship between the two fields. Population

health professionals identify, track and educate about the spread of diseases, helping guide treatment and prevention with those in primary care.

Common goals and mutual respect by physicians and professionals at both ends of the health care spectrum means better outcomes across the board. To quote Dr David Butler-Jones, Canada’s Chief Public Health Officer: “To approach health you need the full spectrum, from public health through primary care and treatment systems, and secondary and tertiary care.”

The more the various parts of the system work to support each other, the better the health of Canadians will be.