

Bringing medical prevention and treatment to Thailand

"Really, it was UW Medical School that pointed me in the direction I wanted to go. Thirty-five years later, I think I have found my way."

by M. Van Eyck

At 9:30 a.m. on December 26, 2004, Thep Himathongkam, MD '69, and his wife checked out of their hotel on Patong Beach in Phuket, Thailand, a little earlier than planned. They and four vacationing friends had decided to visit the beautiful resort at Khao Lak in Phang Nga, a one and a half hour drive from Patong, before returning home to Bangkok.

But police stopped their car on the main road before they reached the destroyed bridge crossing to Phang Nga. The first tsunami had hit, leaving the road wet and covered with debris. The group learned later that Patong had been struck around 10 a.m. and that Khao Lak was the most devastated area.

"Dr. Thep," as he is called (Thais address people by their first names), and his companions escaped the waves that killed thousands of people by what he calls "a narrow window." Had he and his party left Patong only 30 minutes later, they would have been hit by the first wave. Had they left only a little bit earlier, they already would have been in Khao

Lak and would have faced the deadliest wave.

Addressing a medical conference on aging in Bangkok a few days later, Himathongkam said he took that window as a sign that his work in philanthropy and diabetes prevention and treatment was not yet finished. "I figure God wanted me to continue to talk with you instead of him," he joked with his audience.

Today Dr. Thep runs the Theptarin General Hospital that he created. It is an 80-bed facility located in Bangkok that also sees approximately 12,000 outpatients per month, a little over 2,000 of whom are diabetic or thyroid patients. The Theptarin diabetes team is the biggest and most comprehensive in Asia.

By the end of this year, he also will open the doors to the adjacent 20-story Theptarin Center for Quality of Life and Disease Prevention, an outpatient service that will educate both patients and healthcare providers in everything from diet and exercise to cardiovascular health to diabetes care and prevention.

Particularly exciting for Dr. Thep, the center will also focus on foot care and shoe

fitting for diabetics. "This is so important because we don't have podiatrists in Thailand," he says.

The growing size and reach of Himathongkam's medical facilities mirror a relatively recent movement in Thailand to bring comprehensive, cutting-edge healthcare to its population. In fact, Prince Mahidol of Songkhla, the father of the present king, studied at Harvard Medical School and is credited with introducing Western medicine to Thailand. (His son, His Majesty King Bhumibol Adulyadej, was born in Boston during Mahidol's studies.) Regarded as "the father of Thai medicine," the prince was devoted to bringing comprehensive medical education, research and healthcare to all Thais.

But it wasn't until the 1970s that the country's economic circumstances began to allow for the kind of medical system Mahidol had envisioned. Now, with public health educators, volunteer health workers, public and private facilities and relatively low medical costs, Thailand's health system addresses everything from HIV and AIDS prevention in small villages to cosmetic surgery

■ Thep Himathongkam, MD '69



The diabetes team at Theptarin General Hospital, which Himathongkam created, is the biggest and most comprehensive in Asia. The doctor recently stood in front of his hospital.

contract with a courier service that will help us serve neighboring countries as well."

Meanwhile, as Himathongkam observed the changing health concerns in his country, his focus shifted from thyroid and pituitary function to diabetes.

Medical advancements, it seems, weren't the only western influence on the health of the Thai population. Due to the introduction of fast foods and sugary drinks, he says, today 9.6 percent of Thais over age 35 have diabetes, but only half know that they do. And the rate of obesity in children has reached 12 percent to 13 percent, nearing the alarming 15 percent of U.S. children.

"We even have our own Frito Lay factory," he says.

To address these concerns, Himathongkam took an early retirement from teaching in 1985 and founded the Diabetes and Endocrine Center. He patterned his clinic after the model of diabetes care he had seen during his training at Harvard's Joslin Diabetes Center, which emphasized teamwork and education.

"If you want to treat diabetes patients efficiently," he explains, "you have to do behavior modification of their diet and exercise habits." This requires input not just from physicians and nurses, but also diabetes educators and dietitians.

Accordingly, his center hosts learning activities through camps and diabetes clubs that encourage diabetes patients to learn from a team of healthcare providers how to live healthier lives—and to teach newer participants to take responsibility for their health.

"It took me six years to get patients to sit down in a class and learn," he says. "But now it's just a matter of getting patients to teach other patients."

In 1993, Himathongkam expanded the center into the Theptarin General Hospital, which addresses a broader spectrum of family medicine issues.

Through the years, Himathongkam has worked closely with Thailand's Ministry of Health and other government associations to improve the training and education of practitioners. He also has founded the Thai Association of Diabetes Educators, a group of medical personnel from various fields who pursue multidisciplinary approaches to educate the Thai population on diabetes and its prevention. Each year, scores of visitors tour his facilities, and his teamwork model is replicated in institutions and organizations around the world.

Perhaps not surprisingly, Himathongkam believes strongly that physicians must master team management skills in order to be effective.

"You can take care of thousands instead of just hundreds of people that way," he says.

In addition to relying heavily on dietitians and nurses, he takes advantage of the many volunteer health workers in villages who are trained to treat, for example, parasitic diseases, to assist in child delivery and to provide health, nutrition and family planning education at the local, "grassroots" level.

"We have a very good system in Thailand," he says, "with about one volunteer for every 10 families, and there are 9,700 health stations throughout the country."

Dr. Thep also has help closer to home. His son, Tarin, who holds an MBA, now serves as the chief financial officer of Theptarin General Hospital. In fact, the hospital shares their two names. He also works with his eldest daughter, Tanya, who holds an MBA and a master of public health from University of California at Berkeley. His youngest daughter will be graduating

from Wesleyan University in the spring.

With a strong support system intact, Himathongkam has been able to turn his attention toward philanthropy, which he sees as a way to coordinate the resources of universities, the government, professional organizations and industries like pharmaceutical and medical device companies. With the help of these organizations, he hopes to bring an even higher quality of diabetes care and prevention to the country at large and even to establish a regional standard for diabetes educators.

It's a big vision for someone who graduated from UW Medical School in the late '60s with the much smaller goals of teaching and practicing endocrinology back home.

"Really, it was UW Medical School that pointed me in the direction I wanted to go," says Dr. Thep. "Thirty-five years later, I think I have found my way."

Q



Himathongkam (in glasses) graduated from UW Medical School in 1969.