

Dr. Stephen T. S. Lam: clinical genetic services in the private sector could use expansion

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Dr. Stephen Lam is currently a consultant clinical geneticist, Director at the recently-established Clinical Genetics Service in the Hong Kong Sanatorium & Hospital where he had played a part in setting up. He was the Consultant Clinical Geneticist and Head of Clinical Genetic Service, Department of Health, Hong Kong [1990–2015].

Dr. Lam was a MBBS graduate from the University of Hong Kong. Subsequently, he was trained in Paediatrics and Clinical Genetics in Queen Elizabeth Hospital, Hong Kong and Guy's Hospital, London. For his research on Biochemical Genetics and Cytogenetics, he was awarded Doctor of Medicine at the University of Hong Kong in 1988. He is now Fellow of Hong Kong College of Paediatricians, Fellow of Royal College of Physicians of Edinburgh, and Fellow of Hong Kong Academy of Medicine.

His main clinical activities and research are in the diagnosis and prevention of genetic diseases and ethical, legal and social issues in genetics. He has published more than 100 peer-reviewed articles and edited two books. He was the Founding Chairman of the Hong Kong Society of Medical Genetics in 1987, a council member of the International Society for Neonatal Screening, and a serving committee member of the Chinese Genetics Society. He is a Past President of the Asia Pacific Society of Human Genetics [2011–2012], and a Past President of the International Federation of Human Genetic Societies [2012–2014]. He serves as editor of several international journals including *Clinical Genetics*, *HUGO Journal*, and *Journal of Community Genetics*. He is an Honorary Professor of the Faculty of Medicine in the Chinese University of Hong Kong since 2012.

We had the honour to interview Dr. Lam as we discussed his APGHC 2017 presentation and talked about the challenges and advantages of setting up clinical genetic services within the private sector. Dr. Lam also shared with us the reasons behind his choice to enter the field of clinical genetics (*Figure 1*).

ATM: As a distinguished invited speaker for the APGHC 2017, you had an excellent presentation, which was well received by the audience. Would you like to summarize some main points to share with us?

Dr. Lam: In the presentation, I talked about how to set up a clinical genetic service in a private setting. Most clinical genetic services have been either funded by the government or the universities. The private sector, actually, contributes very little in terms of providing services. Of course, we know that the private sector has very strong and influential non-government organizations, particularly in the form of parent groups and patient groups, and so on. However, in terms of proper clinical genetic services similar to those provided and funded by the government and in the academic setting, it is non-existent in most private setting cases. My job was to start such a service in a private hospital. In summary, it should really start with trying to identify a good hospital which can allow such a partnership. This includes their ability to provide good referral and consultation systems, and having good laboratory support. We are talking about areas such as reproductive genetics. Our hospital, the Hong Kong Sanatorium & Hospital, is very well-equipped in its in vitro fertilization (IVF) center. Also, genetic and genomic labs. So with good embryology support, with good molecular and cytogenetics support, we can properly embark on a proper clinical genetic service.

The reason why we started this new service is that, for a long time, we knew that there were always deficiencies in the provision of genetic services, both in the public and private sectors. After a few consultations in the past four to five years, inviting overseas and local experts, we found that we are deficient in many ways, in both the private and public sector. While we do have these services present, the public sector requires expansion and is virtually non-existent in the private sectors.

When private patients require these services, they have to fly to other countries, or will try to find their own ways. We



Figure 1 Dr. Lam with AME groups in APCHG 2017. APCHG, Asia-Pacific Conference on Human Genetics.

do see a demand for these services. That's why we thought we should start this service, after having found a good hospital that has all the facilities and infrastructure that we need, and on top of that, with a potential for research. This particular hospital has a very strong research element. We know that genetics and genomics has to go hand-in-hand with a lot of new technologies, innovations, advances in science and medicine. So we do need to be research-minded, and this hospital provides for those opportunities.

We finally decided that this is a good setting, so I started a clinical genetic service in this hospital for a bit over a year now. The talk I gave yesterday was to summarize some of the work I've done, to share the experience in terms of how we obtain the referrals, how we run our logistics, how we manage the clinical component of the services, and how we conduct research.

ATM: *In your presentation, you mentioned The Clinical Genetics Service (CGS). What do you think is the advantage of this service?*

Dr. Lam: Similar to what I've mentioned, the provision of CGS was mostly done in the public sector; the private sector is largely left out. The people who can afford this private service could have had some difficulty in gaining access to such a service in the past. When I refer to those that can afford this service, I mean people who either have good insurance coverage that may be provided by the public sector in places such as in Hong Kong, and also people who would have good insurance coverage by their employees. Otherwise, they'd have to pay out of pocket. The private sector in Hong Kong, in particular, is made up of these two groups: people who are heavily covered by their workplace,

Ling and Poon. Meet the Professor with Dr. Stephen T. S. Lam

and those who can afford to pay out of pocket.

Basically, the advantage is that we can cover this sector of our society which has been largely left out in the past.

ATM: *What do you think is the biggest challenge in providing clinical genetics services?*

Dr. Lam: The challenge that I am confronted with is that this is just the start of a new endeavor. Everything needs to be set up from scratch, such as the logistics and how we obtain referrals and so on. I'm proud to say that we have an excellent referral system. Of the patients we've seen over the past year, we have had a sizeable percentage of people who came from other areas, such as Mainland China, Macau, Singapore, Australia, Canada, Spain and so on. It's quite an international setting and of course the challenge here is that people will have to be multilingual. In our hospital, all nursing and working staff would have to be at least fluent in English, Mandarin and Cantonese. It's not that major of a challenge.

Another challenge is in looking at how we can expand such services. In some places, particularly in Hong Kong, the number of clinical geneticists is quite small, and the different types of services that we've been providing in the past are being fully utilized and people find it difficult to get extra resources.

These are the challenges—in expanding the service and training sufficient people who are skilled to provide this service.

ATM: *You are an excellent researcher in the field of clinical genetics. Some of your titles include the Director of Clinical Genetics Service, Honorary Consultant in Clinical Genetics, Honorary Professor. Would you like to share with us any stories? What encouraged you to choose this field and career?*

Dr. Lam: I started a long time ago—about 40 years ago—as a pediatrician in training. For the subsequent 10 years in my training, I worked through a spectrum of pediatric problems. I found most of them fascinating.

In the end, I found clinical genetics particularly interesting. I thought it was intellectually stimulating; it advances all the time, we have to learn a lot, and it suits my intellectual curiosity, which is the main reason why I entered the field. For the past 30 years or so, I have not regretted my choice as a clinical geneticist. I also worked for the universities as a lecturer, did research, and helped

in different programs in the different universities. That is also exciting. It offers me opportunities for satisfying my intellectual curiosity.

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

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