



FP Links

Issue 162
August 2017

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Message from the President



HKCFP 40th Anniversary Conference “From Seedling to Forest- Ever Enriching Primary Care” is just round the corner. The conference is from 2-3 September 2017 featuring 4 plenary lectures, 3 forums, 3 seminars, 4 workshops and 6 morning sessions. For the first time we also have a parallel morning session in Putonghua. We

welcome Prof. Amanda Howe, WONCA President as guest of honour who delivers one of the plenary lectures. Prof. Sophia Chan, Secretary for Food and Health Bureau will be one of the officiating guests. Do join us at this memorable weekend!

The much anticipated Young Doctors Committee was officially formed and headed by the young and capable Dr. Loretta Chan. The terms of reference were as below:

- To provide perspective and advocacy of HKCFP to young members
- To engage young members in College activities
- To connect young members of College and enhance our communication
- To nurture young leaders in HKCFP
- To promote continuity of representation by young HKCFP members in national and international meetings
- To connect with medical students and promote family medicine amongst undergraduates

The committee has proposed the launching of Mentorship programme for basic trainees for the purpose of bridging across different generations in the College. All basic trainees will be invited to join on a voluntary basis and each trainee will be matched with one mentor.

I am a member of the Hong Kong Alliance for Advocacy Against Alcohol which expresses grave concern regarding the organization of a sports event which encourages participants to consume beer while running. While physical activity has definite health benefits, there is no place for alcohol in exercise and sports. Alcohol is classified as Group 1 carcinogen by the World Health Organization and there is no safe level of alcohol consumption. Alcohol use is also associated with many other chronic diseases such as ischaemic heart disease, liver cirrhosis and neuropsychiatric disease. Consuming alcohol

while engaging in sports may cause dehydration and enhance the risk of heat stroke, increase burden on the vital body systems and increase the risk of accidents and injuries due to its adverse effect on the central nervous system. I urge all of you to condemn this initiative of “Beer Run” and educate our patients to refrain from alcohol.

I was one of the delegates of the Hong Kong Academy of Medicine to attend the 60th Anniversary Diamond Jubilee Celebration of the Academy of Medicine led by Dr. Donald Li and Prof. CS Lau. College of Family Physicians Singapore was inaugurated in 2014 as a Chapter of the Academy and she has grown from strength to strength and hopefully will be one of the constituent Colleges in the not too distant future. Prof. Doris Young, our external examiner for Exit Examination is now based in Singapore and when the two of us are together, mischief can happen. We managed to speak to Mr Ong Ye Kung, Minister for Education and guest of honour of the Anniversary Dinner to address him the importance of having more academics at the Universities to teach Family Medicine and enhance the role of Family Physicians in the community. Mr. Ong is one of the potential candidates as future Prime Minister and he was receptive to our conversation. Our Singaporean colleagues exclaimed, “We don’t dare to speak to our Minister like that.” Job was done, Hong Kong style.

There was a very good satellite Symposium in Family Medicine covering topics like innovation and research, emerging role of Family Medicine Physicians in meeting the challenges of a greying population. Singapore’s healthcare system is facing exactly the same problems as Hong Kong. No wonder I could communicate in the same wavelength with Prof. Lee Kheng Hock, President of College of Family Physicians Singapore. I was very grateful to Prof. Lee who managed to locate my old classmate that I had not seen since our graduation day!

Finally the icing on the cake was the conferment of honorary fellowship to Presidents of Overseas Fraternal Colleges by the Academy of Medicine, Singapore. I was one of the recipients! Before my ink dries up, I must mention the Donald Li Good Food Guide recommendation is Hua Ting Restaurant, Orchard Hotel, Singapore.

Dr. Angus MW CHAN
President





更致全康 四十載 春夏秋冬 健康來

家庭醫生

家庭醫生為市民在醫療系統的第一個接觸點，
守護每一位市民的健康。

香港家庭醫學學院，努力將優質健康資訊與家庭醫學理念帶給大眾。為慶祝香港家庭醫學學院成立四十週年，本學院將於2017年四個季度共主辦四場公眾健康教育講座。

詳情如下：



	日期	時間	地點	題目	講者
春季	3月25日 (星期六)	下午3時	香港灣仔駱克道3號 香港小童群益會5樓 502室演講廳	過敏性鼻炎/哮喘 心血管健康	顏寶倫醫生 區志立醫生
夏季	5月13日 (星期六)	下午3時	旺角奶路臣街38號 麥花臣匯3樓遊協禮堂	中暑/防曬 外遊前見醫生	何家銘醫生 陳穎欣醫生
秋季	9月23日 (星期六)	下午3時	九龍油塘邨第二期福 建中學附屬學校	濕疹及其他常見皮膚問題 抑鬱症	李艷珠醫生 王惠敏醫生
冬季	11月18日 (星期六)	下午3時	旺角奶路臣街38號 麥花臣匯3樓遊協禮堂	常見的兒童感染 流感疫苗/常見的成人免疫接種	鄺碧綠醫生 趙志輝醫生

參加者可獲贈精美紀念品乙份，送完即止。

查詢及報名：+852 2871 8899 (林小姐 或 葉小姐)

(星期一至五 上午9:00 至下午1:00; 下午2:00至下午5:30; 星期六、日及公眾假期休息)

香港家庭醫學學院

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Facebook: <http://www.facebook.com/hkcfp>

HKCFP Photography Club Macro Photography Lecture by Canon Hongkong

Wish to explore the world of Macro Photography (微距攝影)? What are reproduction ratio, extension tubes and bellows? HKCFP Photography Club is pleased to announce that a lecture on Macro Photography will be delivered by Canon Hongkong on 9 September 2017 for HKCFP members. Masters from Canon Institute of Creative Imaging will share with us from the basic principles, operation of a macro lens, to the practical setup of a macro photograph. Details are listed as follows.



Date : 9 September 2017 (Saturday)

Time : 3:00 - 4:30 p.m.

Venue : Institute of Creative Imaging, Canon Hongkong, 20/F iSQUARE, Tsim Sha Tsui, Kowloon

Special offers on selected Canon products and workshops will also be offered on site. And participants can also elect to stay behind for a guided tour in Canon's showroom after the lecture.

As seats for HKCFP members are limited to 20, please email Ms. Windy Lau at windylau@hkcfp.org.hk for registration at your earliest convenience.

See you then!

HKCFP Photography Club
Internal Affairs Committee

Board of Vocational Training and Standards News

Final Reminder: Application for Recommendation for Exit Examination

To all Higher Trainees,

For those who prepare to sit for 2018 Full Exit Examination, please submit the application letter and the checklist for recommendation for Exit Examination before 30th September 2017.

Late applications will not be entertained.

Should you have any enquiries, please contact Ms. Charlotte Cheung at 2871 88993

Higher Training Subcommittee
Board of Vocational Training and Standards

Membership Committee News

The Council approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **June – July 2017**:

Associate Membership (New Application)

Dr BIEN Szu Hsin, Davina	卞 巳 昕
Dr CHAN Ki Fung, Dickson	陳 祺 峯
Dr CHAN Yuen Ling	陳 婉 玲
Dr CHANG Hsu Wei	張 煦 璋
Dr CHAU Yiu Shing	巢 耀 城
Dr CHEUNG Yan Yee, Christie	張 昕 怡
Dr CHOW Hoi Kei, Jessica	周 愷 琦
Dr KONG Ka Ming, Andres	江 家 銘
Dr LEUNG Eunice Hilching	梁 曉 菁
Dr LUK Sze Wan, Candy	陸 詩 韻
Dr MA Man Ki	馬 汶 琪
Dr MA Yuen Ying	馬 琬 瑩
Dr PANG Sze Ching, Esther	彭 詩 情
Dr TAM Man Kit	譚 民 傑
Dr WONG hung Ming	黃 宗 明
Dr YEUNG Lok Ki	楊 樂 祺

Non-HKSAR Membership (New Application)

Dr AU Tak Wai	區 德 偉
Dr LAM Kuo	林 果
Dr LAO Cheuk Un	劉 灼 玄
Dr LO Benjamin Ying Lu	羅 英 儒
Dr LOK Mei Kun	陸 美 娟
Dr LEUNG Ka Pao	梁 家 寶
Dr WONG Chi Peng	黃 子 秉
Dr WONG In	王 燕

Resignation of Fellowship

Dr YEUNG Lam Fung	楊 臨 鋒
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Resignation of Associate Membership

Dr CHEUNG, Sin Nga Heidi	張 倩 雅
Dr CHOI Yuen Ling, Janice	蔡 婉 玲
Dr YICK Jennie Ching Yee	易 靜 宜

Withdrawn of Full Membership

Dr WONG Kwong (pass away)	王 廣
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Withdrawn of Fellowship

Dr LI Kwing Chun (pass away)	李 炯 鎮
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Classified Advertisements

Invites applicants for full-time doctor in Evangel Hospital – shift-duty in General Out-patient throughout the week and on-site overnight call. Please send C.V. and enquiry to hr@evanhosp.org.hk

Clinic for Rent

Family doctor clinic at a busy residential mall in Shatin area. Well established practice. 40K long term patients. Immediately available for rent. 96130035 Mrs. Wong

Accredited Private FM Centre invites FT/PT Doctors for expanding services (Tuen Mun / Kwai Fong). FM, Paed., Surgeon, Gynae. welcomed. Basic + Profit Sharing ± Partnership. Send CV enquiry@adecmed.com (Amy CHAN) 9212-6654

United Christian Nethersole Community Health Service invites registered Medical Doctors committed to Family Medicine to join our group practices in East Kowloon/NTE/NTW. Good work-life balance. Contact: Ms Chung hr@ucn.org.hk/2172-0736

Enroll Now!

Serving the Elderly – Act Now Join the Elderly Health Care Voucher Scheme

- The Scheme provide subsidies for elders aged 65 or above to receive private primary healthcare services that best suit their needs.
- Under the Scheme, each eligible elder is provided with an annual voucher amount of \$2,000 for settling of payment for healthcare services provided by various types of healthcare professionals in the private sector, including doctors.
- By the end of 2016, more than 6 100 private healthcare service providers have enrolled in the Scheme accepting the use of vouchers by eligible elders.



Electronic Platform – Simple Claim Process

- Elders do not need to pre-register, collect or carry vouchers.
- Eligible elders can use the vouchers with his/her Hong Kong Identity Card by simply visiting an enrolled healthcare service provider's clinic and signing a consent form.
- Enrolled healthcare service providers can make claims through the electronic platform by inputting simple information.



Simply Visit

www.hcv.gov.hk

for enrolment procedures & application forms

醫療券

Health Care Voucher

The Government of the Hong Kong Special Administrative Region

衛生署
Department of Health



HKCFP

40th ANNIVERSARY CELEBRATION IN 2017



Dear Colleagues,

As you are aware, 2017 marks the 40th Anniversary of our College and we have organised a series of exciting events to celebrate this significant milestone. Two of the significant celebration events including the Conferment Ceremony and Annual Dinner would be held on the same day, i.e. 10 December 2017 (Sunday). These will no doubt bring our 40th Anniversary celebration activities to a new height, providing valuable opportunities for all to meet new Fellows of the College, to catch up with your acquaintances, and to join hands in celebrating these special occasions together with families and friends. Here are the details of these forthcoming attractions.

The 30th Fellowship Conferment Ceremony and the 28th Dr. Sun Yat Sen Oration, HKCFP

The College is holding "The 30th Fellowship Conferment Ceremony and the 28th Dr. Sun Yat Sen Oration" on 10 December 2017 (Sunday) at the Hong Kong Academy of Medicine Jockey Club Building.

Successful candidates of Conjoint Examination would be conferred Fellowships, and the successful candidates of Diploma in Family Medicine and the Exit Examination would be granted certificates. In addition, Dr. Stephen Foo, Censor of the Hong Kong College of Family Physicians, would deliver the 28th Dr. Sun Yat Sen Oration to the audience.

All Fellows*, members and their spouses are cordially invited to attend the Conferment Ceremony and the Oration. Details are listed as follows.

- Events : (i) The 30th Fellowship Conferment Ceremony
(ii) The 28th Dr. Sun Yat Sen Oration by Dr. Stephen Foo
- Venue : 1/F, Run Run Shaw Hall, Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong
- Date : 10 December 2017 (Sunday)
- Time : 3:00p.m. – Ceremony
4:30p.m. – Cocktail
- Dress Code : Business
- Remarks : 1 CME (Category 4.3)
These collegial functions are free of charge for our College Fellows, members and their spouses.
*All College Fellows are welcome to bring their Fellowship gowns for the Conferment Ceremony.

THE HKCFP 40th ANNIVERSARY DINNER

The College's 40th Anniversary Dinner would be held on 10 December 2017, Sunday

- Venue : Run Run Shaw Hall, 1/F, HKAM Jockey Club Building,
99 Wong Chuk Hang Road, Hong Kong
- Time : 19:00 Anniversary Dinner Reception
19:30 Chinese-style Dinner

College Members, Fellows and their spouses are welcome to register for the Annual Dinner free of charge on a first-come-first-serve basis until all the available seats are filled.

To register for the Conferment Ceremony and/or Annual Dinner, please contact Ms. Teresa Liu or Ms. Windy Lau on Tel: 2871 8899, or email to teresaliu@hkcfp.org.hk or windylau@hkcfp.org.hk for registration at your earliest convenience.

We look forward to meeting you all at the Conferment Ceremony and 40th Anniversary Dinner!

Dr. David Chao
Chairman, HKCFP 40th Anniversary Celebration Organising Committee
HKCFP

HKCFP Trainees Research Fund 2017 / HKCFP Research Seed Fund 2017

The Research Committee of HKCFP is proud to continue to offer the two research funds, The Trainees Research Fund and the Research Seed Fund.

The Trainees Research Fund will be opened to all registered HKCFP trainees and is made of four awards (each up to HK\$5,000). It is envisaged it will help trainees especially (but not limited to) those doing research projects as their Exit Examination. Those who have funding support elsewhere will not be considered.

The Research Seed Fund is open to all HKCFP members when a maximum of \$10,000 award will be made to the successful applicant to assist the conduction of a research project.

Winners of the award will receive 50% of the approved grant up front and the remainder 50% upon completion of the project.

Please note that each applicant can only apply either one of the above Funds

Assessment Criteria for both funds:

1. Academic rigor of the paper (e.g. originality, methodology, organisation and presentation);
2. Relevance and impact to family medicine & primary care (e.g. importance of the topic and the impact of the findings on the practice or development of the discipline); and
3. Overall budget

Each Research project submitted will be assessed according to the above assessment criteria set by the selection panel. Please send your submission to:

Research Committee, HKCFP

803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong by post or by email: hkcfp@hkcfp.org.hk

Please indicate the research funding title e.g. “**HKCFP Trainees Research Fund 2017**” or “**HKCFP Research Seed Fund 2017**” on your research project upon submission.

Submission Deadline: 31st October 2017

Supported by HKCFP Foundation Fund

Meeting Highlights

CME Lecture on 4 July 2017

A/Prof Marion Margaret Aw Hui Yong, Senior Consultant, Division of Paediatric Gastroenterology, Nutrition, Hepatology and Liver Transplantation, National University Hospital, Singapore, delivered a lecture on “Assessing Growth and Nutritional Status” and Ms. Sally Poon, Master of Nutrition & Dietetics, University of Sydney, Australia, BSc Nutrition, King’s College London, United Kingdom, Accredited Practising Dietitian (Australia), Registered Dietitian (UK), delivered a lecture on “Role of Nutritional Intervention in Promoting Catch-up Growth” on 4 July 2017.



Dr. Kwong Bi Lok, Mary (left, Council Member) presenting a souvenir to A/Prof Marion Margaret Aw Hui Yong (right, Speaker) during the lecture on 4 July 2017



Dr. Kwong Bi Lok, Mary (left, Council Member) presenting a souvenir to Ms. Sally Poon (right, Speaker) during the lecture on 4 July 2017

CME Lecture on 11 July 2017

Dr. Juan Manuel Palacios, Scientific Director Urology, GSK, Spain, delivered a lecture on “Welcome and Introduction to a BPH Patient Journey” (Video Session) and Dr. Michael J Manyak, Professor of Urology, Engineering, Microbiology, Immunology, and Tropical Medicine, The George Washington University, USA, delivered a lecture on “The Role of PSA in identifying patients at risk of progression” (Video Session) and Dr. Márcio Averbeck, GSK Internal Expert, delivered a lecture on “Effective Monitoring of PSA in BPH Patients” (Video Session) and Dr. Martin Wong, Specialist in Urology, delivered a lecture on “BPH and Comorbidities” on 11 July 2017.



Dr. Chan King Hong (right, Moderator) presenting a souvenir to Dr. Martin Wong (left, Speaker) during the lecture on 11 July 2017

Interest Group in Evidence-based Medicine

Dr. Lau Wai Yee, Aster, delivered a lecture on “Management of Uncomplicated Cystitis: Medication and Alternative Treatment. How Strong is the Evidence?” on 8 July 2017.

Dr. Lau Kin Sang, Kinson (left, Moderator) presenting a souvenir to Dr. Lau Wai Yee, Aster (right, Speaker) during the lecture on 8 July 2017



CME Lecture on 16 July 2017

Dr. Lau Chun Leung, Specialist in Cardiology, delivered a lecture on “Update of Stroke Prevention for Atrial Fibrillation” and Dr. Ma Shing Yan, Specialist in Haematology and Haematological Oncology, delivered a lecture on “Management of NOAC-Associated Bleeding in General Practice” on 16 July 2017.

Dr. Au-Yeung Shiu Hing (right, Moderator) presenting a souvenir to Dr. Lau Chun Leung (left, Speaker) during the lecture on 16 July 2017



Dr. Au-Yeung Shiu Hing (right, Moderator) presenting a souvenir to Dr. Ma Shing Yan (left, Speaker) during the lecture on 16 July 2017



Dr. Lam Wing Wo, Edmund (left, Moderator) presenting a souvenir to Dr. Chan Yung (right, Speaker) during the lecture on 22 July 2017

Interest Group in Dermatology

Dr. Chan Yung, Specialist in Dermatology and Venereology, delivered a lecture on “Evolving Management in Psoriasis” on 22 July 2017.

Board of Conjoint Examination Report on OSCE 2017 Information Seminar for Candidates



Presentation by Chairman



Presentation by OSCE Coordinator

The Information Seminar on OSCE segment was held on 25 June 2017. The room was well attended by 21 candidates (Cat I: 20, Cat II: 1) and members from the Board – including the Chairman, the OSCE Coordinator and the secretarial staff.

The seminar started with a warm welcome by our Chairman, Dr. Chan Hung Chiu. Dr. Chan first introduced the concept and expectation of our Conjoint Examination. He then explained the various measures undertaken by the Board to ensure the examination is fair, reliable and valid for all the candidates.

Dr. Chui Siu Hang Billy (OSCE Coordinator) presented information concerning the examination. A case demonstration of one role-playing candidate was shown to the audience. One candidate was also put on the spot to participate in an 8-minute sample case.

We presented the marking scheme and went through the setting of the domains of each case. We also explained the marking rationale behind using essential marking points to divide between pass and fail for a particular domain in each question. The candidates were given a chance to mark the scenario with the respective key feature checklist themselves and understand how to assess a particular domain and how to achieve the pass criteria in each domain.

This year the Board again plans to invite the candidates to participate in the rehearsal day on the 8 October 2017. They will get a chance to role play as candidates and meet with the examiners. Their response is positive.

On the whole there was lots of interaction and the atmosphere was friendly. The candidates were enthusiastic and there were lively discussions. Feedback forms were distributed and the feedback was positive. Looking at the feedback statistics, most candidates benefited from this seminar and found it very useful. The majority of attendees agreed that the seminar helped their OSCE preparation, and provided useful information regarding how their performance will be assessed.

In summary, the afternoon was fruitful for both the candidates and Board members. It is hoped that the additional information provided to the candidates will help translate their hard work into success in the coming examination!



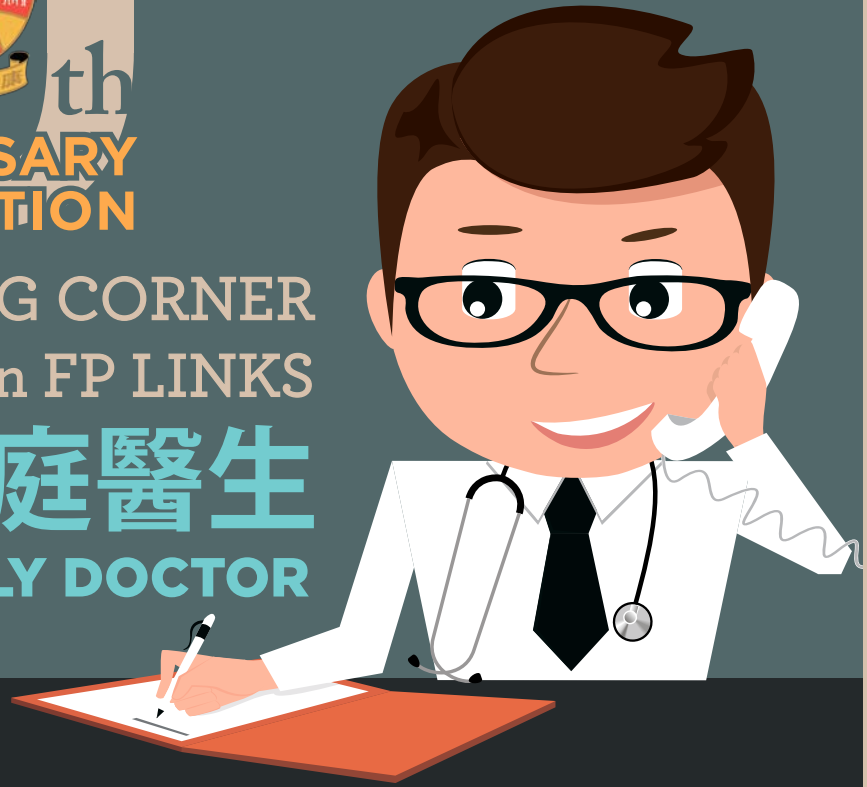
Case Demonstration

40th ANNIVERSARY CELEBRATION



WRITING CORNER in FP LINKS

我是家庭醫生 I AM A FAMILY DOCTOR



2017 marks the 40th Anniversary of the Hong Kong College of Family Physicians. Writing Corner in FP Links is now open for submission. College Members and Fellows are invited to write on the topic “I am a Family Doctor” (我是家庭醫生). Submissions can be related to case sharing, interesting encounters, reflections and aspirations as a family doctor.

The selected articles would be published in FP Links and College website during the period of HKCFP 40th Anniversary year according to the tentative schedule below:

Submission Deadlines	FP Links Publication Schedule (maybe subject to change without notice)
30th November 2016	January - March 2017 Issues
28th February 2017	April - June 2017 Issues
31st May 2017	July - September 2017 Issues
31st August 2017	October - December 2017 Issues

Selection Panel :

- To be appointed by the 40th Anniversary Celebration Organizing Committee.
- The decision of the 40th Anniversary Celebration Organizing Committee is final.

Submission details :

- Articles must be the original work(s) of the doctor.
- Articles must be submitted by electronic format. The word count should NOT exceed 500 words (English or Chinese). All submissions must be in Microsoft Word format.
- Each member could submit **ONE** piece of article for this event.
- The copyrights of the submitted articles would be transferred to the Hong Kong College of Family Physicians.

For submission and enquiry please contact:

Ms. Erica SO

The Hong Kong College of Family Physicians

Room 803-4, HKAM Jockey Club Bldg,
99 Wong Chuk Hang Road, Aberdeen, Hong Kong.

Tel: +852 2871 8899

Fax: +852 2866 0616

Email: hkcfp@hkcfp.org.hk



已婚未婚
同樣重要

保護就係愛
即刻
TAKE ACTION!

全新 9 合 1 HPV 預防方案

覆蓋更多 防禦更強[#]

預防 9 種 HPV

6 11 16 18 31 33 45 52 58

9 種 HPV (型號)¹
能導致 90%¹ 的子宮頸癌

及早預防
有助避免感染
HPV 相關疾病

女²

- 子宮頸癌
- 外陰及陰道癌前病變
- 肛門癌
- 生殖器官濕疣 (椰菜花)
- 外陰癌
- 子宮頸癌前病變
- 陰道癌

男

- 肛門癌
- 生殖器官濕疣 (椰菜花)
- 亦有機會令伴侶因感染 HPV 而患上癌症及濕疣³ (椰菜花)

適用於 9 歲以上男女⁴
www.hpv.com.hk
請向醫生查詢

請向醫生查詢你是否需要定期作子宮頸抹片檢查。

此海報只提供醫生參考。

唯一經 FDA、歐盟及香港衛生署認可的 9 合 1 預防方法 *與 HPV [4 合 1] 預防疫苗比較。重要信息：• 若你對 HPV [9 合 1] 疫苗的任何成份過敏，請勿接種。• 若你曾經接種 HPV [4 合 1] 或 HPV [9 合 1] 疫苗並且出現過敏症狀，請勿接種。• 接種 HPV [9 合 1] 疫苗的決定應取決於疫苗的潛在益處及曾經感染的 HPV，並且應在適當的醫療情況下進行，以應付罕見的過敏反應。• 與所有疫苗一樣，接種 HPV [9 合 1] 疫苗後未必能為所有接種者提供保護。此疫苗不能用作治療或預防已感染的濕疣 (椰菜花)、子宮頸癌、外陰及陰道癌前病變 (CIN、VIN 或 VaIN)。疫苗亦不能預防非 HPV 所引起的疾病。• 接種 HPV [9 合 1] 疫苗期間應避免懷孕。懷孕婦女應避免接種。• 一般建議接種後留醫診所約十五分鐘接受觀察。此外，接種疫苗後仍須定期進行子宮頸細胞檢驗 (柏氏抹片)。• HPV [9 合 1] 疫苗只屬預防部分由疫苗概括的 HPV 引起的疾病。因此，適當的預防相關疾病措施應繼續使用。• 若你正在使用強效免疫抑制治療、遺傳缺陷、人類免疫缺陷病毒或其他原因有受損的自身免疫系統，可能不會對疫苗有反應。• 血小板減少或凝血障礙的人應謹慎使用這種疫苗。• 現時沒有數據來支持 HPV [9 合 1] 疫苗與 HPV [2 合 1] 或 HPV [4 合 1] 疫苗的互換性。• 在臨床研究中，最常見的副作用為注射部位的不良反應和頭痛，這些不良反應通常為輕度或中度。其他常見的副作用包括注射部位疼痛、腫脹或紅斑、頭暈、噁心、發熱、疲勞、注射部位瘙癢或瘀傷等。請向醫生查詢詳盡的副作用資料。

請向醫生查詢有關藥物的詳盡資料。

HPV 是常見的，幾乎每個人一生中都會有機會感染。雖然大多數感染會自行清除，但持續感染某些 HPV 類型可導致癌症或其他疾病。² 9 合 1 預防方法適用於九歲以上人士。⁴ 暫未有研究在 26 歲以上女性進行。9 合 1 預防方法在 27 至 45 歲女性的預期成效是建基於 4 合 1 預防方法在 16 至 45 歲女性的高效能，以及兩種預防方法於 9 至 26 歲女性有著相當高的抗體產生力。

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我是家庭醫生

家庭醫生生涯 是苦也是甜

張意靈醫生



80年代中我成為一個私人執業的家庭醫生，那時香港醫學院畢業的女醫生人數很少，因此我的病人大多是女性。當政府尚未廣泛宣傳子宮頸癌和抹片檢查的重要性時，我已在診症時趁機向她們推介避孕、生育計劃、子宮頸抹片檢查等。由於是女醫生，比較容易得到女性病人的信任，有時更可為她們做婚姻輔導、性病檢查和預防、提供家庭暴力的求助途徑等，讓她們在最困難時得到精神上的支持。

80年代後期乙型肝炎疫苗面世，當時政府仍未為兒童免費注射，因此很多私人的兒科和家庭醫生，致力推廣預防乙型肝炎的知識和疫苗接種。隨後有更多的疫苗面世：如MMR、水痘、乙型流感嗜血桿菌疫苗（Hib vaccine）等，家庭醫生一直以來都是社區疫苗接種的先鋒推動者。

家庭醫生亦在多方面彌補公營醫療的不足。假日和晚上當政府普通科門診關門後，醫院的急症室常常人山人海，那時家庭醫生便擔當了病人負擔得來的快速前線服務。在診所內，我除了診症和開藥，還會進行簡單的治療程序，如為急性哮喘病人提供擴張氣管噴霧劑（SARS前）、處理燒傷和各種傷口、放膿、縫針、拿走耳朵內的昆蟲或外物、口腔內插着的魚骨、甚至插在手指頭的縫衣車針等。當看到病人疾病得到舒緩和他們感激的面容，那種滿足感真是難以形容！

藥物標籤實行前，我常替病人辨認各種藥物、解釋用途、和刪減那些不必要的藥物。至於政府門診的慢性疾病患者，由於覆診的間隔期很長，期間我會為他們微調藥份來減少副作用，以增強他們的藥物遵從性（drug compliance）。

曾經接受政府門診或住院服務的病人，有些對自己的診斷和治療並不清楚，因此顯得很憂慮和緊張，亦對持續醫療服務構成困難。我會從病人提供的有限資料儘量向他們解釋病情，並建議他們下次如何向醫生提問。公營醫療電腦化和「公私營醫療資料共享」推行後，情況便改善了。

2000年前，一般香港人還未有「個人私隱」這個概念，因此常有病人家屬前來詢問親人的病情或化驗報告，有時會牽涉敏感的資料。當我婉轉地解釋需要有病人的同意我才能向他們透露病情時，往往引來難看的面色或一頓惡罵，可幸如今這個情況已絕少發生。

在互聯網和醫療刊物普及前，我需要深入淺出向病人解釋各種醫療的問題。如今鐘擺卻去了另一方：有些病人用從媒體中學來的知識與醫生爭辯，增加了提供治療的困難。

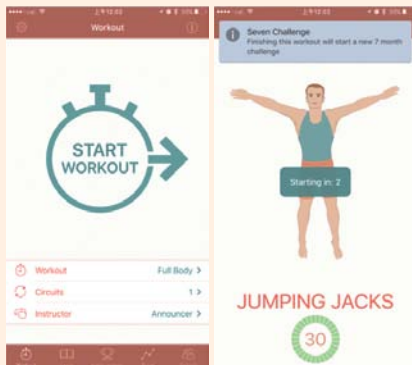
家庭醫生的工作時間很長，週末和公眾假期也要工作，有時未能兼顧家庭和孩子。其它不開心的事情也有，如有些病人接受治療後不付錢、多痰的病人回來堅持要換那些強力的止咳藥、有些病人拒絕付費因為沒有開藥、癮君子的滋擾……當然最難過的莫若是自己經驗不足，導致誤診或醫源性的併發症（iatrogenic complications），事後惟有盡力補救，並坦誠謙虛地向病人道歉，可幸一般都願意體諒無心的輕微失誤。

High Intensity Interval Training (HIIT) - A Feasible Exercise Option for Busy Lifestyle?

Dr. John-Hugh Tam, Specialist in Family Medicine
Mr. Mak Cheuk Hang Thomas, Registered Physiotherapist

As discussed in a previous exercise-related article in the FP Links in October 2015¹, we have been told from the American College of Sports Medicine's statement² that, we are recommended to participate in a programme of regular exercises, which beyond activities of daily living, to improve and maintain physical fitness and health, whilst most healthy adults should engage in moderate-intensity cardiorespiratory exercise training for >30 minutes per day on >5 days per week for a total of >150 minutes per week (Exercise intensity can be estimated by several methods, the easiest way being the percentage of maximum heart rate [%HR_{max}], whereas HR_{max} = 220 - Actual age, and 64-76% of HR_{max} is categorized as moderate intensity); in addition, strength training should be performed a minimum of two days each week, with 8-12 repetitions of 8-10 different exercises that target all major muscle groups. Despite of the above recommendations, many time-conscious city dwellers like us started to question if this routine is indeed sustainable due to our busy lifestyle and have start looking for less time consuming alternatives to this "150 minutes per week" plan.

Starting from few years ago, a new form of exercise plan began to gain popularity within the public, known as the "7 minutes HIIT workout" or "high-intensity interval training / high intensity circuit training", which consists of a series of short workout exercises that were emphasised to be "executable in anywhere and anytime". Nowadays there are even apps on the phone that teach and automatically prompt you how to do these exercises, and you might occasionally be hearing this term from your patients during consultations.... As doctors, do you actually know what these HIIT exercises are and are these exercises indeed suitable for everyone? This introductory article would give you a brief idea on the issue.



Apps in the market are easily found for promoting HIIT exercises

High Intensity Interval Training - What is it and how may it benefit health?

From Literature³, HIIT is described as a combination of aerobic and resistance training in a high-intensity, limited-rest design, aiming at promoting strength development for all major muscle groups of the body, recruitment of large muscle groups to create the appropriate resistance and

aerobic intensity, as well as creating a balance of strength throughout the body. This exercise concept is different from the traditional endurance workouts as in past, aerobic and resistance training were usually performed separately. It is also different from the traditional circuit-style training that the modern HIIT uses body weight as resistance, hence eliminating the limiting factors of access to equipment and facilities as the exercises were designed to be performable using simple furniture and require very little space (e.g. at home or in office).

The core essence of HIIT is a **series of vigorous contractile activities of multiple large muscle groups** in a **short period of time** (at a level of exertion that pushes the person's heart rate **beyond 80% of his/her estimated maximal heart rate**⁹), during which the muscle cells would exhaust all the ATP-PC (adenosine triphosphate and phosphocreatine) to the extent their anaerobic threshold is reached, leading to an increased "EPOC" (excess postexercise oxygen consumption, also informally known as the "oxygen debt") that is greater than other traditional means of exercise. This increase in "EPOC" would mean a person would require extra energy for post-exercise recovery.



There were evidence that HIIT can be a fast and efficient way to lose excess body weight and body fat while maintaining muscle mass^{4,5,6,7}, as its resistance training component contributes significantly to the amount of fat burned during a workout⁸, whilst this EPOC generated would last for 2 hours thus adding about 6-15% more calories expenditure⁹. Some other evidence point out that HIIT would lead to an increased level of catecholamines and growth hormone in the blood both during and after high-intensity resistance training exercise with shortened rest periods (<30 seconds)^{5,10}. There had also been data suggesting HIIT could help reduce glucose concentration, HbA1c level & systolic blood pressure¹¹. Other health claims from HIIT would include its effects to strengthen joints and improve posture, as well as the improving cholesterol profiles⁹.

What is a typical HIIT exercise programme like?

Though the contents of these workout may vary, a typical HIIT usually consist of a series of aerobic and strengthening exercises

at a high intensity (e.g. around 10-12 different exercises, 30 seconds each) of all major muscle groups in rapid succession with limited-rest (e.g. 10 seconds) between exercises. During these high intensity exercises, it is normal for participants to experience difficulty in carrying on a conversation during exercise with increase in heart rate (i.e. greater or equal to 80% of the participant's estimated maximal heart rate).

Below is a sample HIIT circuit¹² with each exercise lasting 1 minute with 1 minute rest in between, it is worthwhile to note how different types of exercises are arranged in the circuit in this illustration:

(red = aerobic exercises, blue = strengthening exercises, green = exercises for core stability)

1. High knees (total body)
2. Jumping jacks (total body)
3. Squat (lower body)
4. Side leg raises (lower body)
5. Lunge (lower body)
6. Plank arm raises (core)
7. Plank leg raises (core)
8. Planks with rotations (core)
9. Climbers (lower body)
10. Push up (upper body)



Source : www.darebee.com

In a doctor's point of view, is HIIT risk-free and applicable to everyone?

Just as all kinds of exercise programmes, we should bear in mind that **not all exercise programs are suitable for everyone, and some programs may result in injury**. HIIT is **not** risk free and should **not** be liberally applied to all individuals of the public without taking proper precautions. This point is especially true in the case of HIIT, as it was designed to boost the exercise capacity & subsequently the heart rate / cardiac output up to "high intensity" (>80% HR_{max}) level, thus its proper execution requires a willing and able participant who can handle a great degree of discomfort for a relatively short duration, whilst we should always ensure these activities are carried out at a pace that is tolerable for the participants, and participation in any exercise activity that causes unusual pain or discomfort should be discharged (In such event, medical consultation should be immediately obtained). Since HIIT boosts heart rate up to "high intensity" level, CVD risk stratification for exercise should be done prior to the training, and medical supervision of exercising "high risk" individuals is essential. The stratification calculation includes the following risk factors¹³:

- ✘ Detrained persons who have been living sedentary lifestyles or persons of physical inactivity.
- ✘ With family history of coronary heart disease.
- ✘ Cigarette smoker.
- ✘ Persons with hypertension, diabetes (or pre-diabetes), abnormal cholesterol levels and obesity as they would have increased CVD risks.

(For further details, you may also read up about it here - <https://www.acefitness.org/blog/3492/applying-risk-classification-as-a-fitness>)

It was also worthwhile to remind your patients that for all individuals, the Valsalva maneuver should be avoided, particularly for the isometric exercises, and in spite of the name "7 minutes HIIT", that extra time should be spared for appropriate warm up and cool down exercises additionally before and after the exercise session.



Finally, as a word of reminder, that literature also suggested⁹ that prior to joining HIIT training, the participants are advised to consider safety as the primary priority and establish a "foundation level

of fitness" before joining this kind of programme (e.g. having been undergoing consistent aerobic training for several weeks that produces muscular adaptations and establish muscle strength before engaging in regular HIIT) to reduce the risk of musculoskeletal injury, and for more details on HIIT, you may also consider contacting and referring your patients to sports physiotherapists or physicians specialised in sports medicine in aid of your patients' pre-exercise planning.

Financial/commercial conflict of interest

- None declared.
- Special thanks to Dr. Vincent Liu for his help on photo shooting and demonstrations of some of these HIIT exercises.

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Will You Give Antibiotics for Acute Bronchitis?

Acute bronchitis is the fifth most common outpatient illness encountered by Australian general practitioners, for whom it represents 3.5% of encounters and 2.4% of problems seen (Meza 1994). Community-based studies have isolated viruses in 8% to 23% of cases (Boldy 1990; Macfarlane 1993; Stuart-Harris 1965). Other pathogens implicated in acute bronchitis are *Mycoplasma pneumoniae*, *Chlamydia pneumoniae*, and *Bordetella pertussis*, each of which has been identified in up to 25% of cases in various populations (Boldy 1990; Falck 1994; Foy 1993; Grayston 1993; Herwaldt 1991; Jonsson 1997; King 1996; Macfarlane 1993; Robertson 1987; Stuart-Harris 1965; Thom 1994).

But acute bronchitis is a clinical diagnosis (based on medical signs and patient-reported symptoms) for an acute cough, which may or may not be associated with coughing up mucus or sputum. Symptoms generally last for two weeks but can last for up to eight weeks. There is no practical test to distinguish between bacterial and viral bronchitis.

The review included 17 trials with 5099 participants in the primary analysis. The quality of trials was generally good. At follow-up there was no difference in participants described as being clinically improved between the antibiotic and placebo groups (11 studies with 3841 participants, risk ratio (RR) 1.07, 95% confidence interval (CI) 0.99 to 1.15). Participants given antibiotics were less likely to have a cough (4 studies with 275 participants, RR 0.64, 95% CI 0.49 to 0.85; number needed to treat for an additional beneficial outcome (NNTB) 6) and a night cough (4 studies with 538 participants, RR 0.67, 95% CI 0.54 to 0.83; NNTB 7). Participants given antibiotics had shorter mean cough duration (7 studies with 2776 participants, mean difference (MD) -0.46 days, 95% CI -0.87 to -0.04). The differences in presence of a productive cough at follow-up and MD of productive cough did not reach statistical significance.

In conclusion, the review found limited evidence of clinical benefit to support the use of antibiotics for acute bronchitis. Some people treated with antibiotics recovered a bit more quickly with reduced cough-related outcomes. However, this difference may not be of practical importance as it amounted to a difference of half a day over an 8- to 10-day period. There was a small but significant increase in adverse side effects in people treated with antibiotics. The most commonly reported side effects included nausea, vomiting, diarrhea, headache, and rash. Antibiotics may have a modest beneficial effect in some patients such as frail, elderly people with multimorbidity who may not have been included in trials to date. However, the magnitude of this benefit needs to be considered in the broader context of potential side effects, medicalization for a self-limiting condition, increased resistance to respiratory pathogens, and cost of antibiotic treatment.

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Compiled by Dr. Fok Peter Anthony

Interest Group in Mental Health & Psychiatry in Primary Care The 53rd Meeting on 1 April 2017

Title : **Understanding Youth Suicide from a Psychological Perspective and Early Mental Intervention in a Multi-disciplinary Approach**

Speaker : **Ms. Zanonía CHIU Sze Nga**
Registered Clinical Psychologist (HK)

Moderator : **Dr. Chan Suen Ho, Mark**
Board of Education

Attendance : 43

The speaker : Ms. Zanonía CHIU Sze Nga graduated with M.Soc.Sci (Clin. Psy.), PGD. Psy., Dip. Counselling and B. Nurs. (Hons.) Ms Chiu is a registered practicing Clinical Psychologist and Associate Fellow of The Hong Kong Psychological Society. Ms Chiu is active in the profession, as Honorary Secretary of the Hong Kong Clinical Psychologists Association (2012-2017). Ms Chiu has delivered lectures, conducted research and continued to promote mental health in the community. Ms. Chiu's interest is general, child and adolescent psychology.

development and personality might be affected, and their risk for having mood disorders such as anxiety and depression would increase as well. Through the real cases sharing, the common mood disorders among youth were also illustrated in my presentation.

Local statistics of increasing trend of having mood disorders, including depression and anxiety, among Hong Kong students were also reported. In the period between September 2015 and April 2016, there was alarming number of students committing suicide in Hong Kong. On behalf of the Division of Clinical Psychology, Hong Kong Psychological Society and the Hong Kong Clinical Psychologists Association, I was honorably in-charge of the voluntary Mental Health Promotion and Suicide Prevention Campaign for local schools during the period between January and July, 2016. In the presentation, I have shared the statistical data and the mental health promotion works that our professional volunteer team had conducted for the students, parents, school teachers and public.

The inter-disciplinary approach on early detection and intervention for the youth mood problems is crucial to prevent deterioration and reduce impairment. During the treatment process, multidisciplinary approach with the engagement of medical professionals, psychologists, social workers and the stakeholders including parents and school teachers is also inevitable in providing holistic care and psychosocial support for the youth. Studies also showed that enhancing resilience and positive coping skills would also help in promoting psychological wellness of the youth.

I truly hope that with the close collaboration on mental health promotion and suicide prevention among different health care professionals, the suicide rate among youth in Hong Kong would be under controlled and their psychological wellness would be greatly promoted.

Learning points prepared by Ms. Zanonía CHIU Sze Nga

Summary of Presentation

It is my honour to share with nearly 50 members of the HKCFP on the topic of youth suicide on 1st April, 2017. Thank you again to the Interest Group in Mental Health, HKCFP for the invitation.

The increase in the prevalence of mood disorders and suicide rate among youth in Hong Kong is appalling in recent years, reflecting the significance of youth stress problems and psychological issues. It is inevitable for health care professional to work together for the mental health promotion and prevention of suicide among the youth population.

During my presentation, we have discussed about the major stressors of youth, i.e. their family, academic demands and social problems and the multi-dimensional contributing factors of youth suicide. Youth's maturity and resilience is relatively low when compared to adult. When they experience overwhelming stress while having limited coping and mood regulatory skills, they would experience burnout and have their emotion, daily functioning and school performance impaired. In severe cases, their

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Interest Group in Evidence Based Medicine (EBM) – Meeting on 27 May 2017

- Theme** : Evidence Based Medication for Common Cold
- Speaker** : Dr. Ip Sui Wah, Victor
- Moderator** : Dr. Hui Lai Chi, Primus
- Co-ordinator** : Dr. Lee Wan Tsi, Francis

On 27 May 2017, the EBM Interest Group held a workshop titled “Evidence Based Medication for Common Cold”. Dr. Ip Sui Wah, Victor gave the talk. This was followed by group discussions, led by the speaker, the moderator Dr. Hui Lai Chi, Primus and the coordinator Dr. Lee Wan Tsi, Francis. Prior to the meeting, the participants were requested to submit a questionnaire on prescribing medicine for common cold.

The following is the summary of the presentation and discussion, with some updated information.

Evidence Based Medication for Common Cold

Common Cold refers to a mild upper respiratory viral illness. It is a separate and distinctly different entity from influenza, pharyngitis, acute bronchitis, acute bacterial rhinosinusitis, allergic rhinitis, and pertussis.¹

Common cold with mild symptoms does not require any symptomatic therapies.² Patient should return for review if their condition worsens or exceeds the expected time for recovery.^{3,4} For common cold with moderate to severe symptoms, symptomatic therapy can be given to relieve symptoms. The following recommendation of medication is based on evidence available and doctors should use the medication based on clinical judgement.

Therapies that may be effective

Analgesics: Acetaminophen and NSAIDs are roughly equivalent.⁵ They can be used to relieve associated symptoms (e.g. headache, ear pain, muscle pain, joint pain or malaise).

Antihistamine/decongestant combinations: May be more beneficial than either component alone.² Number needed to treat for symptom benefit compared with placebo is 4.⁶

Dextromethorphan: A meta-analysis including six randomized trials comparing dextromethorphan with placebo concluded that dextromethorphan 30 mg was effective for cough suppression.⁷

Pholcodine: A randomized trial involved 129 adults with acute, frequent, non-productive cough found the efficacy of a 3-day course of pholcodine being similar to that of dextromethorphan.⁸

Bromhexine: 5mg 3 times/day for average of 4 days reduced frequent cough in 1 trial with 99 adults.⁹

Honey: Honey has a modest beneficial effect on nocturnal cough. World Health Organization (WHO) and American Academy of Pediatrics (AAP) suggest honey as a potential treatment for upper respiratory infection in young children who are older than one year old.^{10,11}

Intranasal/inhaled cromolyn sodium: A randomized study of 118 adult patients with symptoms of rhinorrhea, throat pain, or cough for less than 24 hours, symptoms resolved faster in patients treated with sodium cromoglycate than with placebo.¹²

Intranasal ipratropium bromide: A systematic review of seven trials (2144 participants) found improvement in rhinorrhea.¹³

Therapies with minimal or uncertain benefits:

These medications may be reasonable to try in some patients who are not able to tolerate the more effective therapies.

Decongestants: A 2007 meta-analysis suggested a net 6 percent decrease in subjective symptoms after a single dose of decongestant compared with use of a placebo¹⁴. Topical decongestant use should be limited to two to three days because rebound rhinitis can occur after 72 hours of use.²

Saline nasal spray: A 2015 systematic review concluded there may be symptomatic benefits, but there was limited evidence to support this conclusion, as the available trials were small and had a high risk of bias¹⁵.

Expectorants: A 2014 systematic review concluded that there was no good evidence for or against the

effectiveness of over-the-counter medications (including guaifenesin, mucolytics, and combination medications)¹⁶.

Lozenges: Lozenges is an option for treating cough in children without aspiration risk. Although there is no evidence from controlled trials that cough lozenges is effective in decreasing cough, they are unlikely to be harmful¹⁰.

Chinese herbal medicines: A systematic review shows decreased duration of main symptoms and increased recovery from cold.¹⁷ However, a Cochrane review found limited evidence as the trials are of poor quality (15 out of 17 trials are of high risk of bias and used controls of unknown efficacy)¹⁸.

Ineffective therapies: Evidence does not support the use of these therapies.

Antibiotic therapy: Treatment with antibiotics for uncomplicated upper respiratory tract infections causes more harm than benefit¹⁹.

Antiviral therapies: Complicated by the wide array of potential viral etiologies, rarity with which an etiologic agent is identified, and paucity of agents with proven efficacy.²

Antihistamines: Antihistamine use alone is of minimal benefit and frequently results in troublesome side effects.² A systematic review of 18 trials concluded that antihistamines improved the severity of symptoms slightly more often than placebo for the first one to two days of treatment, but offered no benefit after 6 to 10 days of treatment²⁰.

Intranasal glucocorticoids: Topical glucocorticoids are not effective in treatment of the common cold^{21,22}.

Codeine: Although codeine is effective in suppressing chronic cough, trials in patients with acute cough due to the common cold have found no consistent benefit of codeine compared with placebo⁶.

A simple survey was done in the seminar. All of the doctors used Panadol as analgesic or antipyretic. 90.5% doctors used piriton for running nose, sneezing or nasal stuffiness. 66.7% doctors used lozenges for sore throat. The most common used cough mixture was pholcodine which was used by 47.6% doctors. 71.4% doctors found the seminar delivered some new information or some concept was clarified.

References:

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The University of Hong Kong Family Practice Attachments for Medical Students



The Department of Family Medicine and Primary Care of the University of Hong Kong is actively recruiting primary care doctors who are prepared to take students into their practices for teaching purposes

- As part of the **Professionalism in Practice programme (PIP)**, each student will attach individually or in pairs to the same preceptor for one half-day session per year over the first three years of medical school. Through early attachment to a primary care doctor, students will focus on developing an understanding of what it means to be a doctor and how professionalism is practiced in real life. The dates of the attachment are flexible.
- During the **Family Medicine Junior Clerkship – Family Practice Attachment (FPA)** each student is required to spend some time attached to a family practice in the community. These attachments are on a one-to-one basis, and are scheduled at regular intervals throughout the academic year. Each family practice (FP) teacher will have a minimum of two students attaching to his/her practice, each for 2 half-day sessions during a 9 week period.

Most doctors find that teaching medical students a rewarding experience, and the satisfaction gained often more than compensates for the minor disruption to the practice. Those who volunteer to teach will be offered an honorary academic appointment at the University of Hong Kong, which is a quotable appointment. CME and CPD accreditation has been given to these teaching activities by the Quality Assurance and Accreditation Committee of the H.K.C.F.P. towards the award of the Certificate of Quality Assurance. Our honorary teachers are entitled to use our University facilities including the library, email access to the HKU portal and the sports club.

Fellows and members of the Hong Kong College of Family Physicians are most eligible, and enquiries from other doctors would also be welcome. No previous experience is necessary - interest and motivation to pass on your expertise are much more important.

Please complete and return the reply-slip below. If you would like more information about our programmes, please contact us by email (fmpc@hku.hk) or telephone (2518 5657)

Professor Cindy L.K. Lam
Head, Department of Family Medicine and Primary Care
The University of Hong Kong

REPLY SLIP

To : Department of Family Medicine & Primary Care, the University of Hong Kong,
3/F., Ap Lei Chau Clinic, 161 Main Street, Ap Lei Chau, Hong Kong/ Fax 2814 7475

A. Professionalism in Practice Programme (PIP):

I am interested in this programme.

B. Family Medicine Junior Clerkship – Family Practice Attachment (FPA):

I will be willing to take students for attachment in my practice.

Name: _____ (_____)
in English (BLOCK LETTER) in Chinese

Office Address : _____

E-mail Address: _____

Office Tel. No. : _____ Fax. No. : _____

Date : _____ Signature: _____

Refresher Course for Health Care Providers 2017/2018

Jointly organized by
 Hong Kong Medical Association
 The Hong Kong College of Family Physicians
Our Lady of Maryknoll Hospital

Venue : Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital
 118 Shatin Pass Road, Wong Tai Sin, Kowloon

Time : 14:15 to 16:15

Dates	Topics	Speakers
9 Sep 2017	CT/MRI/Ultrasound Interpretations in Primary Care	Dr. Piter LO Department of Diagnostic & Interventional Radiology, KWH Dr. Victor CHAN Department of Radiology and Imaging, QEH
14 Oct 2017	Approach to Arthritis and Joint Pain	Dr. HO Tsz Chung Roy Rheumatologist, QEH
11 Nov 2017	Targeted Therapy and Recent Advances in Oncology	Dr. WONG Kam Hung CONS(Clinical Oncology), QEH
9 Dec 2017	Updating Epilepsy	Dr. Herrick LAU Neurologist OLMH
13 Jan 2018	Community Infectious Diseases and Travel Medical Advice	Dr. LEUNG Wai Sing Associate Consultant (Med&Geri) PMH
3 Feb 2018	Primary care Infant and Children Dermatology	Dr. IP Fong Cheng Francis Specialist in Dermatology and Venereology, Department of Health Chairman, Hong Kong Society for Paediatric Dermatology
1 Mar 2018	Updating Asthma, Allergic Airways and COAD in Primary Care	Dr. Wilson YEE Con i/c Chest & Respiratory Medicine(IMS), KWH/WTSH
14 Apr 2018	Updating in Osteoporosis	Dr. WONG Kam Kwong Consultant (ORT), KWH
12 May 2018	Family-oriented Approach to Mental Health and Chronic Diseases	Dr. LAM Wing Wo Private Family Doctor
9 Jun 2018	Foot Problems- Care and Management	Mr. Jackie FAN Pod i/c(Podiatry), OLMH

A certificate will be presented at the end of the course for those achieving $\geq 80\%$ of attendance.

CME accredited by HK College of Family Physicians 2 credit points (Cat. 5.2) and HK Medical Association 2 credit points (for MCHK non-specialist). (pending)

CNE points accredited by OLMH: CND 2 credit points.

Limited car parking can be reserved, on first come first serve basis

RSVP : Tel: 2354 2440 (Ms. Clara Tsang, OLMH) Fax: 2327 6852

Certificate Course on Common Mental Disorders and Dementia for Primary Care Doctors

Co-organized by the Hong Kong College of Family Physicians, and the Primary Care Office, Department of Health



Objectives

Common mental health problems like anxiety, depression, together with dementia are prevalent in Hong Kong. A significant number of patients with these conditions may have other chronic diseases or health problems as well. Hence, primary care doctors with appropriate training are most suited to look after patients with all these conditions. The Hong Kong College of Family Physicians, responsible for standard setting and training quality primary care doctors will organize a comprehensive tailor made course for primary care doctors in caring patients with common mental disorders and dementia. Course participants are welcome to participate in our regularly held Interest Group in Mental Health, and Interest Group in Counselling to further enhance their skills in managing these conditions.

Dates : 10 & 24 September, 15 & 22 October, 12 November and 3 December 2017 (Sundays)

Time : 1:30pm - 2:30 pm Registration and Lunch
2:30pm - 4:30 pm Lecture & Discussion

Venue : 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai, H.K.

Course Fee : **HKCFP Members / PCD Enrollees – \$500 for whole course**
(The \$500 fee will be refunded upon obtaining the "Certificate of Attendance")

Non-HKCFP Members – HK\$1,000 for whole course
Cheque should be made payable to "HKCFP Education Limited".

Accreditation : HKCFP : 2 CME points for each session (Cat 4.4) and max. 10 points for whole course
MCHK : Pending

Award : Those who have attended 80% or more of all the sessions will be awarded a "Certificate of Attendance".
Course participants are entitled to free admission to the 2 Interest Group run by the Board of Education, HKCFP: Interest Group in Counselling and Interest Group in Mental Health.

Capacity : 50 doctors

Format : Interactive seminar, case vignettes

Enrollment Deadline : 1 September 2017 (Friday)

Dates (Sun)	Topics	Speakers
10 September	(1) Anxiety & Related Disorders	Dr. Tso Kwok Chu Specialist in Psychiatry
	(2) Stress Management/ Relaxation Exercise	Ms. Chiu Sze Nga, Zanon Clinical Psychologist (HK)
24 September	Counselling, Brief Psychotherapy in Primary Care, and Introduction of Common Psychotherapies	Dr. Ho King Yip, Anthony Specialist in Family Medicine Dr. Lau Wai Yee, Aster Specialist in Community Medicine Dr. Lo Sze Mon, Dana Specialist in Family Medicine
15 October	(1) Insomnia, Psychosomatic Symptoms	Dr. Chu Wai Sing, Daniel Specialist in Family Medicine
	(2) Psychotic Disorders in Primary Care	Dr. Chung Kwok Hang Specialist in Psychiatry
22 October	(1) Mental Health in Geriatric Patients	Dr. Lau Ka Hin Specialist in Psychiatry
	(2) ADHD & Common Psychiatric Problems in Children	Dr. Lin Hoi Yun, Candy Specialist in Psychiatry
12 November	(1) Approach to Depressed Patients in Primary Care	Prof. Lam Tai Pong Specialist in Family Medicine
	(2) Managing Depression in Primary Care & Suicidal Risk Assessment	Dr. Wong Chung Hin, Willy Specialist in Psychiatry
3 December	Dementia, Team Care Approach & Community Resources	Dr. Dai Lok Kwan, David Specialist in Geriatric Medicine

Registration will be on first-come-first-served basis. Please call the secretariat, Ms. Katie Lam at 2871 8899 for enquiry.

Certificate Course on Common Mental Disorders and Dementia for Primary Care Doctors

Co-organized by the Hong Kong College of Family Physicians, and the Primary Care Office, Department of Health



REGISTRATION FORM

Enrollment Deadline: 1 September 2017 (Friday)

To : HKCFP, Rooms 803 - 4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Hong Kong
(Fax : 2866 0616 / Tel: 2871 8899)

I would like to attend the **Certificate Course on Common Mental Disorders and Dementia for Primary Care Doctors** and enclosed please find the appropriate course fee payment.

HKCFP Members / PCD Enrollees : HK\$500 for whole course
(The \$500 fee will be refunded upon obtaining the "Certificate of Attendance")

Non-HKCFP Members : HK\$1,000 for whole course

Cheque No: _____ (Cheque should be made payable to **"HKCFP Education Limited"**)

.....

Personal Particulars:

Name : _____
Surname (BLOCK LETTERS) Given Name Name in Chinese

HKCFP Member ID (if applicable) : _____ **Primary Care Directory Enrollee:** Yes / No

Correspondence Address : _____

Mobile : _____ Office Telephone : _____ Email : _____

Current Practice:

Private : Solo Group
Government : HA Department of Health Other Institutions (Please specify _____)

NOTES:

1. Priority would be given to HKCFP members and PCD enrollees. In case of over-subscription, the organisers reserve the right of final decision to allocate places.
2. Please returned the completed form together with the cheque by post to Rooms 803 - 4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Hong Kong for enrollment.
3. If enrollment is successful, applicant will receive confirmation email sent to your email address provided above.
4. Please wear a surgical mask if you have respiratory tract infection and confirm that you are afebrile before coming to the meeting.
5. Private video recording is not allowed.
6. For registration or enquiry, please call the College secretariat, Ms. Teresa Liu at 2871 8899 or email to education@hkcfp.org.hk.

- Activities are supported by HKCFP Foundation Fund.
- Please wear a surgical mask if you have respiratory tract infection and confirm that you are afebrile before coming to the meeting.
- Please wear an appropriate dress code to the hotel for the Scientific Meeting.
- Private video recording is not allowed. Members, who wish to review the lecture, please contact our Secretariat.

16 September 2017

Saturday

Board of Education Interest Group in Evidence-Based Medicine (EBM)

Topic	Medications after Stroke: What to Take? A friend comes to you. His mother aged 85, has just suffered a minor stroke. He brings a bag of 10 medications and asks for advice on whether these are good for her mother. What would you tell him?	
Speaker	Dr. Ngan Po Lun, Allan	
Moderator	Dr. Hui Lai Chi, Primus	
	The Hong Kong College of Family Physicians	
Time	Part A 2:15 pm to 3:15 pm	Lecture
	Part B 3:15 pm to 4:15 pm	Discussion
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai, Hong Kong	
Admission	Members	Free
Fee	Non – members	HK\$ 300.00
	HKAM Registrants	HK\$ 150.00
	All fees received are non-refundable and non-transferable.	
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) 2 CME points MCHK	
Language	Lecture will be conducted in English and Discussion will be in English or bilingual.	
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.	
Note	Please bring along your mobile internet device if available. Participants are expected to take an active role in discussion during the workshop. They are requested to take part in a survey on management of cystitis. Participants will be awarded CME for attendance in Part A of workshop and CPD for Part B.	

Register Online

23 September 2017

Saturday

Board of Education Interest Group in Dermatology

Aim	To form a regular platform for interactive sharing and discussion of interesting dermatological cases commonly seen in our daily practice	
Theme	Chronic Idiopathic Urticaria	
Speaker	Dr. Chan Chun Yin, Johnny Specialist in Dermatology and Venereology	
Co-ordinator & Chairman	TBC	
Time	1:00 p.m. – 2:00 p.m.	Lunch
	2:00 p.m. – 4:00 p.m.	Theme Presentation & Discussion
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong	
Admission	Members	Free
Fee	Non – members	HK\$ 300.00
	HKAM Registrants	HK\$ 150.00
	All fees received are non-refundable and non-transferable.	
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) 2 CME points MCHK	
Language	Lecture will be conducted in English and Cantonese.	
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.	
Note	Participants are encouraged to present own cases for discussion. Please forward your cases to the Co-ordinator via the College secretariat 2 weeks prior to meeting.	

Register Online

HKCFP would like to thank HKMA for supporting this educational activity.

Sponsored by
Sanofi-aventis Hong Kong Limited

Monthly Video Viewing Session

Monthly video viewing sessions will be scheduled on the last Friday of each month at 2:30 – 3:30 p.m. at 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong.

August's session:

Date	25 August 2017 (Friday)	
Time	2:30 p.m. - 3:30 p.m.	
Topic	"EBM Workshop - Antibiotics & You" by Dr. Hui Lai Chi & Dr Ip Sui Wah	
Admission	Free for Members	
Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)	
Language	Lecture will be conducted in Cantonese.	

Register Online

September's session:

Date	29 September 2017 (Friday)	
Time	2:30 p.m. - 3:30 p.m.	
Topic	<ol style="list-style-type: none"> "Glycemic Index-Non-Alcoholic Fatty Liver Disease" by Dr. Leong In Son "Understanding Fats: Good vs Bad" by Ms. Sylvia S W Lam 	
Admission	Free for Members	
Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)	
Language	Lecture will be conducted in English.	

Register Online

Community Education Programme

Open and free to all members
HKCFP CME points accreditation [Cat 5.2]

Date/Time/CME	Venue	Topic/Speaker/Co-organizer	Registration
7 Sep 2017 1:00 – 3:00 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital, 130 Hip Wo Street, Kwun Tong, Kowloon	Update on Chronic Cough Management in Children Dr. CHIU Wa Keung Deputy Chief of Service, Paediatric and Adolescent Medical Department, United Christian Hospital	Ms. Polly Tai Tel: 3949 3430 or Ms. Cordy Wong Tel: 3949 3087
9 Sep 2017 2:15 – 4:15 p.m.	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	CT/MRI/Ultrasound Interpretations in Primary Care Dr. Piter LO Department of Diagnostic & Interventional Radiology, KWH Dr. Victor CHAN Department of Radiology and Imaging, QEH	Ms. Clara Tsang Tel: 2354 2440

Structured Education Programmes

Free to members
HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
6 September 17 (Wed)			
2:00 – 5:00 p.m.	Conference Room 4, G/F, Block M, Queen Elizabeth Hospital	Infection Control in General Practice Dr. Wong Hin Hei Henry & Dr. Lau Ka Man	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Medical Services Provided by NGO in HK Dr. Chan Ka Wai & Dr. Lam Kang	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Conference Room, 3/F, Block P, United Christian Hospital	Obesity & Weight Reduction Dr. Wong Yu Man Tracy & Dr. Chang Hsu Wei	Ms. Polly Tai Tel: 3949 3430
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Emergency Care in Sport Medicine Dr. Kong Ka Ming Andrew & Dr. Wen Yongna Wendy	Ms. Carmen Kwong Tel: 2632 4371
7 September 17 (Thu)			
4:00 – 6:00 p.m.	Room 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	Patient with Chronic Diseases and AED Attendance: Case Discussion Dr. Yuen Ching Yan & Dr. Sze Chung Fai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Family Planning Dr. Chan Ki Chun	Ms. Kwong Tel: 2595 6941
13 September 17 (Wed)			
2:00 – 5:00 p.m.	Conference Room 4, G/F, Block M, Queen Elizabeth Hospital	Pap Smear, HPV Vaccination Dr. Hou Jing How to Handle Angry/Difficult Patients Dr. Siu Wing Yee	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Emergency Cardiac and Respiratory Conditions Dr. Hun Pek I & Dr. Tsang Kam Wah	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Promoting Mental Health in the Community – An Australian Experience & Care of Dementia in the Community by Family Physicians Dr. KC Jonathan Lau	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Updates in the Management of BPH Dr. Ma Wai Kit	Ms. Chloe Leung / Ms. Yan Ng Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Menopause and Andropause and ED Dr. Chan Lam Chole	Ms. Carmen Kwong Tel: 2632 4371
14 September 17 (Thu)			
4:00 – 6:00 p.m.	Room 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	How to Conduct a Research in Primary Care Setting Dr. Leung Hor Yee & Dr. Lo Cheuk Wai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Behavioral Problems in Children Dr. Lo Ka Man, Michelle	Ms. Kwong Tel: 2595 6941
20 September 17 (Wed)			
2:00 – 5:00 p.m.	Conference Room 4, G/F, Block M, Queen Elizabeth Hospital	Approach to Patients with Poorly Differentiated Symptoms Dr. Chan Kiu Pak Kilpatrick & Dr. Law Man Fong	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Electronic Medical Records, eHR Communication with Various Parties in the Community Dr. Chan Yin Yue & Dr. Lam Wai Yiu	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Infection Control in General Practice Dr. Lim Martina & Dr. Pang Sze Ching Esther	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Management of Common GI Diseases in Primary Care Dr. Kelvin Liu	Ms. Chloe Leung / Ms. Yan Ng Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Case sharing for medical ethics and insurance Dr. Chow Kam Fai	Ms. Carmen Kwong Tel: 2632 4371
21 September 17 (Thu)			
4:00 – 6:00 p.m.	Room 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	MPS Case Sharing Dr. Tong Ka Hung & Dr. Ng Mei Po	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Health Care System in Hong Kong vs Mainland China Dr. Wu Xiao Qing	Ms. Kwong Tel: 2595 6941
27 September 17 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Adult Emergency in General Practice (BCLS, ACLS, E-trolley, Out-reach Medical Bag) with Case Presentation Dr. Lee Wing Lam & Dr. Cheung Yuen Yan	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Development of Primary Care System in HK Dr. Ng Ngai Mui	Ms. Eliza Chan Tel: 2468 6813
4:45 – 6:45 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	The Current Guidelines in Cancers Screening Dr. P L Tsang	Ms. Chloe Leung / Ms. Yan Ng Tel: 2589 2339
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Common Symptoms in Gynaecology Dr. Hui Yuk Ting Candy & Dr. Wong Chung Ming Tom	Ms. Polly Tai Tel: 3949 3430
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Contraception Dr. Chung Hiu Yeung & Dr. Leung Yuen Yee Yuki	Ms. Carmen Kwong Tel: 2632 4371
28 September 17 (Thu)			
4:00 – 6:00 p.m.	Room 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	Approach to Haemospermia Dr. Hsu Kwok Fai & Dr. Sung Cheuk Chung	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Consultation Skill - Role Play Dr. Lo Ka Man Michelle	Ms. Kwong Tel: 2595 6941

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
13 Aug Conjoint Written Examination 2017 – KFP Segment	14	15	16 2:15 – 7:30 p.m. Structured Education Programme	17 2:15 – 7:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	18	19 2:30 – 5:00 p.m. Exit Exam – Pre- Exit Exam Workshop 2:30 – 5:30 p.m. DFM or orthopaedic Injection Workshop
20 Conjoint Written Examination 2017 – MCQ Segment	21	22	23 2:15 – 7:30 p.m. Structured Education Programme	24 2:15 – 7:00 p.m. Structured Education Programme	25 2:30 – 3:30 p.m. Video Session	26 2:30 – 5:30 p.m. AEC 2017 2:00 – 4:00 p.m. Certificate Course on Bringing Better Health to Our Community 2017
27	28	29	30 2:15 – 7:30 p.m. Structured Education Programme	31 2:15 – 7:00 p.m. Structured Education Programme	1 Sep	2 9:00 a.m. HKCFP 40th Anniversary Conference
3 9:00 a.m. HKCFP 40th Anniversary Conference	4	5	6 2:15 – 7:30 p.m. Structured Education Programme	7 2:15 – 7:00 p.m. Structured Education Programme 1:00 – 3:00 p.m. CME Course for General Practitioners 2017 in UCH	8	9 2:15 – 4:15 p.m. Refresher Course for Health Care Providers 2017/2018 2:30 – 5:30 p.m. DFM Counselling Skills Workshop
10 2:00 – 4:00 p.m. Certificate Course on Common Mental Disorders and Dementia for Primary Care Doctors	11	12	13 2:15 – 7:30 p.m. Structured Education Programme	14 2:15 – 7:00 p.m. Structured Education Programme	15	16 1:00 – 4:00 p.m. Certificate Course on Use of Insulin 2:15 – 4:15 p.m. Interest Group in EBM 2:30 – 6:00 p.m. AEC 2017 Mock Exam 2:30 – 5:30 p.m. DFM Module III Care for the Elderly & Chronic Illness
17	18 8:00 p.m. Specialty Board Meeting	19	20 2:15 – 7:30 p.m. Structured Education Programme	21 2:15 – 7:00 p.m. Structured Education Programme 1:00 – 3:30 p.m. Certificate Course on Asthma Management 8:30 p.m. HKCFP Council Meeting	22	23 1:00 – 4:00 p.m. Interest Group in Dermatology 3:00 p.m. 健康教育講座 (油塘)
24 2:00 – 4:00 p.m. Certificate Course on Common Mental Disorders and Dementia for Primary Care Doctors	25	26	27 2:15 – 7:30 p.m. Structured Education Programme	28 2:15 – 7:00 p.m. Structured Education Programme 1:00 – 3:30 p.m. Certificate Course on Asthma Management	29 2:30 – 3:30 p.m. Video Session	30 2:30 – 5:30 p.m. DFM Women's Health Workshop 2:00 – 4:00 p.m. Certificate Course on Bringing Better Health to Our Community 2017

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Back row (left to right): Dr. David Cheng, Dr. Alfred Kwong and Dr. Ken Ho
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Red : Education Programmes by Board of Education
Green : Community & Structured Education Programmes
Purple : College Activities

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