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Message from the President

Cancer as the leading killer disease in Hong Kong has claimed over 14 000 lives in 2018, accounting for approximately one-third of the total annual deaths locally. In light of the ageing population, changing health risk profiles, social changes and globalisation, cancer burden is expected to continue to rise and be a major public health challenge to Hong Kong in the coming decades. The Hong Kong Cancer Strategy (HKCS) launched by the government recently is offering a holistic plan for cancer prevention and control for Hong Kong. The directions laid down in HKCS include reducing risk factors leading to cancer and providing evidence-based screening; seeking early detection and diagnosis; offering timely and effective treatment; strengthening survivorship support to cancer survivors; providing palliative and end-of-life care; investing in technology; enhancing collaboration among relevant bureaux government departments, the Hospital Authority, community organisations, civil society; as well as enhancing surveillance and research capabilities. All in all, these strategic directions are highly relevant to primary health care and family doctors who provide lifelong care to patients in the community.

Provision of preventive care, in addition to management of diseases, is important for promoting health of the population. Cancer and other non-communicable diseases (NCDs) share many common risk factors associated with unhealthy lifestyle, like smoking, alcohol consumption, lack of physical activity, obesity and so on. Family doctors can help patients to reduce the modifiable risk factors leading to cancer by

promoting the adoption of healthy lifestyle, which is an important strategy for primary prevention of cancer.

Through our continuing partnership with patients and their families, survivorship support to cancer survivors can be further strengthened according to their changing needs and health conditions. Provision of appropriate palliative and end-of-life care for patients during their final journeys in life is what family doctors can do to improve the quality of life of the patients and their families.

A primary care system supported by well qualified family doctors is essential for prevention, early detection, as well as timely and effective management of cancers and other NCDs. Cancer burden can be relieved through a well delivered primary care system. As mentioned before, it is high time that the policy makers should look into further enhancing the current system to ensure a steady supply of quality family doctors, from the annual allocation of more Family Medicine training posts, to supporting Continuing Medical Education and Continuing Professional Development activities, so that "right patient in the right place at the right time" could be achieved and sustained, i.e. appropriate patients could be looked after in the community by family doctors, avoiding the need for all patients queueing up at the hospital setting.



(Continued on page 2)

Message from the President (Con't)

(Continued from page 1)



Dr. David Chao (right) presenting a HKCFP shield to Mr. Alexis Tam Chon Weng, Secretary for Social Affairs and Culture, Macau SAR

The inaugural Ceremony of Macao Academy of Medicine was held on 13 July 2019. The Macao Academy of Medicine sets the standard of specialists training in Macao. With a view to foster closer collaborations between the two academies in the future, the Hong Kong Academy of Medicine and the Macao Academy of Medicine also signed a Memorandum of Understanding together. The ceremony was well attended by Presidents or representatives of sister Colleges from Hong Kong.

Dr. David V K CHAO
President

Specialty Board News

Pre-Exit Examination Workshop – For 2020/21 Exit Examinations

The Specialty Board is pleased to announce the Pre-Exit Examination workshop on Exit Examination of Vocational Training in Family Medicine. The workshop will give participants an insight into different segments of the Exit Examination. **ALL candidates who wish to sit for the Exit Examination 2020/21 are strongly encouraged to attend. All Examiners, Trainee Examiners, Clinical Supervisors are also welcome to attend.**

Date : 11 September 2019 (Wednesday)*

Time : 7:00 – 9:00 p.m.

Venue : James Kung Meeting Room, 2/F, HKAM Jockey Club Building, Wong Chuk Hang

* A **Video Session** will be arranged on 12 September 2019 (Thursday), 6:30 p.m. for the potential candidates who are not able to attend the workshop on 11 September 2019.

For registration, please submit the registration form online or contact the board secretaries, Mr. John MA or Ms. Alky YU by email to exit@hkcfp.org.hk.

Yours sincerely,

Dr. Wendy Tsui
Chairlady, Specialty Board



Enrolment

Board of Vocational Training and Standards News

Reminder: Application for Recommendation for Exit Examination

To all Higher Trainees,

For those who are preparing to sit for 2020 Full Exit Examination, please submit the application letter and the checklist for recommendation for Exit Examination before **30th September 2019**. Late applications **WILL NOT** be entertained.

Should you have any enquiries, please contact Ms. Charlotte CHEUNG or Ms. Kathy LAI at 2871 8899.

Higher Training Subcommittee
Board of Vocational Training and Standards

Membership Committee News

HKCFP Membership Annual Subscription 2020 Announcement

Dear College Members,

It has been 22 years since the last adjustment of the membership annual subscription. In view of the increase in operating expenses in recent years, the Council has reviewed the membership annual subscription rate and endorsed its adjustment at the Council meeting in June.

The following adjusted membership annual subscription would be effective from 1st January 2020.

✦ Fellows Member:	HK\$ 1,380
✦ Full Member:	HK\$ 920
✦ Associate Member:	HK\$ 920
✦ Affiliate Member:	HK\$ 345
✦ Non-HKSAR Fellow Member:	HK\$ 863
✦ Non-HKSAR Member:	HK\$ 345
✦ Student Member:	HK\$ 115

Also, it has been decided by the College Council that a 15% discount on the 2020 annual subscription fee will be applied to members who

- ✦ settle the annual subscription fee on or before 29th February 2020, or
- ✦ settle the annual subscription fee through **PayPal** on or before 30th June 2020

Members please refer to the 2020 Annual Subscription Fee Debit Note for detailed instructions and please also note the following important dates:

Early Bird Discount	- on or before 29 th February 2020 by Autopay or by Cheque (according to the postal mark). Post-dated and incorrect cheque are not accepted.
PayPal Discount	- on or before 30 th June 2020
Normal Rate	- from 1 st March 2020 to 30 th June 2020
Cut-off Date of Membership renewal	- 30 th June 2020
Effective of Termination	- date-back from 1 st January 2020

Should you have any enquiries, please do not hesitate to contact the Secretariat by phone to 2871 8899 or email to membership@hkcfp.org.hk.

Thank you for your continuing support to the College.

Dr. Maria KW LEUNG
Chairlady
Membership Committee

Membership Committee News

The Council approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **June 2019 – July 2019**:

Associate Membership (New Application)

Dr CHAU Kei Wai	周琦瑋
Dr HO Chun Kei	何振圻
Dr HO Suet Ying	何雪盈
Dr KO Pak Long	高柏朗
Dr LEUNG Cheuk Yiu	梁卓瑤
Dr LO Chak Yui	羅澤銳
Dr TAM Long Yee	譚朗怡
Dr TONG Wing Sze	湯詠詩
Dr TSANG Lai Ting	曾麗婷
Dr TSANG Tsz Lok, Charlotte	曾子洛
Dr WONG Chun Hun, Jonathan	黃駿鏗
Dr WONG Hiu Yeung	黃曉陽
Dr WONG Lo Lo, Louise	黃璐璐
Dr WU Flora	鄔芷喬

Reinstatement of Fellowship

Dr TSE Ching Wan, Charmaine	謝青雲
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Transfer from Affiliate to Associate Membership

Dr WONG Carmen	黃嘉雯
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Student Membership (New Application)

Miss CHAN Hiu Man	陳曉旻
Miss CHEUNG Jessica	張詩嘉
Miss CHEUNG Shun Ting	張舜婷
Miss CHOW Chi Kwan	周芷筠
Mr CHU Hoi Kuen	朱凱權
Miss HO Hau Ting, Janet	何巧婷
Mr HUI Tak Leung	許德亮
Miss HUNG Pui Shan	洪珮珊
Mr JIM Wing Hong	詹永康
Miss LAM Sze Yan	林思恩
Mr LAM Yat Hei	林逸希
Mr NG Yiu Ming	伍耀明
Mr NGAI Stanley Hiu-on	倪曉安

Miss PENG Xu	彭旭
Miss TAI Ngan Ni	戴雁妮
Miss TEE Yen Sean	鄭燕軒
Miss TO Sum Yi	陶心怡
Miss WOO Tiffany	胡天詠

Resignation of Associate Membership

Dr HONG Ka Yi	項嘉怡
Dr HUNG Leong Pan	洪亮斌
Dr KONG Ka Lun	江嘉麟
Dr SIN Ka Wai	冼家偉
Dr WONG Yuen Hon	黃元瀚

Terminated from Associate Membership

CHAN Hoi Fai, Raymond	陳凱輝
CHAN Pui Hong	陳培匡
CHANG Elizabeth	張宗蕙
CHEUNG Biu	鄭標
CHIU Ming Ming, Denise	趙鳴鳴
CHIU Yuen Chun	趙園春
LEE Tsz Ching	李子靜
LEI Wan Lung	李雲龍
LEUNG Kwai Chiu, Lawrence	梁貴超
LIU Cheuk Ying, Shirene	廖卓螢
NG Kenneth Cheuk Kee	吳卓基
SIT Hing Cheong	薛慶昌
SO Ka Wing	蘇家榮
TEH Kwan Geok, Dawn	鄭冠玉
TSANG Chap Cheung	曾集祥
TSANG Kwok Ying, Ingrid	曾幗瑛
WONG Cheuk Fai, Francis	黃焯輝
WONG Si Wah, Paul	黃思華
YEUNG Chi Fung	楊志峰
YU Pak Him, Vincent	茹柏謙
YU Suet Mui	于雪梅

Classified Advertisements

Accredited Private FM Centre invites FT/PT Doctors for expanding group practice in NTW/KLN. FM. Paed., Surgeon, Gynae, Psychi welcomed. Profit Sharing ± Partnership. Send CV enquiry@adecmed.com (Amy CHAN) 9212-6654

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

HKCFP CERTIFICATE COURSE IN ESSENTIAL FAMILY MEDICINE

The HKCFP Certificate Course in Essential Family Medicine (CCEFM) is designed to meet with the training needs of practicing primary care doctors who would like to refresh or update their clinical knowledge and skills relevant to family medicine practice. The curriculum of this course also forms part of the well-established HKCFP Diploma in Family Medicine (DFM) course. Our teaching faculty are experienced clinicians working in primary care, in secondary care and in academia. The course has been designed to enhance the course participants' competencies in daily Family Medicine practice in the community.

1. OBJECTIVES:

- i. To provide knowledgeable, pragmatic and structured training in Family Medicine for medical practitioners
- ii. To encourage professional development of practising medical practitioners
- iii. To improve standards and quality in Family Medicine practice by adopting holist patient-centered care via an integrated care approach

2. SYLLABUS:

The CCEFM consists of THREE segments, including Modules III, IV (FM attachment + Update) and parts of Module V in the Diploma in Family Medicine (DFM). Doctors who have graduated from the CCEFM are expected to have acquired the following essential concepts and course contents:

- i. The role of Family Doctors and in providing cost-effective primary care to the community
- ii. The essential knowledge and skills on common problems encountered in Family Medicine
- iii. Enhancement in the consultation and problem solving skills
- iv. Acquiring the knowledge and skills in common practice procedures related to family practice

3. AWARDS/CREDITS:

- i. After completion of all the components and course requirements (max. within TWO years), a certificate will be awarded to the successful candidates
- ii. The completed modules and credits can be accredited towards the quotable HKCFP DFM course, if the candidates would like to enroll into DFM course subsequently
- iii. 25 CME and 5 CPD credit points will also be awarded by HKCFP.

4. COURSE CONTENT:

Segment I – Essentials of Family Medicine (Structured Seminars)

Objectives:

- ◆ Strengthen knowledge in Family Medicine
- ◆ Understand the potential growth of Family Medicine
- ◆ Enable the evidence-based family medicine practice

Contents:

Anticipatory Care, Elderly Care and related issues, Chronic Disease Management, Common Musculoskeletal Problems, Evidence Based Medicine & Critical Appraisal, Mental Health, Practice Management; and Clinical Audit, Research & Teaching in Family Medicine.

Segment II – Problem Solving and Clinical Updates

Objectives:

- ◆ Acquire in-depth knowledge by clinical scenario/stimulated cases in our daily Family Medicine practice
- ◆ Transfer the practical skills and hand-on experience by interactive learning methods led by Family Medicine Fellows

Contents:

A site visit plus scenario based training including Diagnostic Challenges on Common Symptoms, Problem-based Learning on Chronic Disease, Motivational Interviewing, Child Health, Women's Health, Aging and End-of-Life and Common Musculoskeletal Problems.

Segment III – Practical Family Medicine (Practical Workshops)

Objectives:

- ◆ Enhance practical and communication skills in Family Medicine by practical workshops in selected areas
- ◆ Transfer the practical skills and hand-on experience by interactive learning methods led by Family Medicine Fellows

Contents:

Consultation Skills and Orthopaedics Injection

5. ADMISSION REQUIREMENTS:

Medical Practitioner with Bachelor's degree in Medicine.

6. TEACHING STAFF:

A panel of experienced academic medical professionals in Family Medicine, hospital specialists and experienced Fellows or Trainers of HKCFP will be invited to teach in the programme.

7. TEACHING MEDIUM:

English (Cantonese may be used in some sessions in the course)

8. COURSE FEES:

Administration fee for application	HK\$ 1,000		
<i>plus</i>			
Enrol for the complete Certificate Course	HK\$ 22,000	for members	HK\$ 44,000 for Non-members
Or			
Enrol for individual session:			
Single session from Segment I and Segment II	HK\$ 1,700	for members	HK\$ 3,400 for Non-members
Single Session from Segment III	HK\$ 2,200	for members	HK\$ 4,400 for Non-members

All fees must be paid upon application and before commencement of the course. ALL fees paid are NON-TRANSFERABLE and NON-REFUNDABLE.

9. APPLICATION PROCEDURES:

Application is now open.

A completed application form must be returned to The Hong Kong College of Family Physicians with the following:

- i. Photocopy of the current Annual Practising Certificate;
- ii. A recent photo of the applicant (passport size);
- iii. A signed "Disclaimer of Liability";
- iv. An administration fee for application of HK\$1,000 by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable;
- v. A Course Fee in appropriate amount by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-transferable and non-refundable.

Successful applicants will be notified by an official letter of admission after the application deadline.

Information and application forms can be obtained from the College or can be downloaded at the College Website (<http://www.hkcfp.org.hk>). Please contact the College secretariat, Ms. Alky Yu at 2871 8899 for any queries.

Application Deadline: 30 August 2019

**Course syllabus and schedule may be subject to change without prior notification*

WONCA ASIA-PACIFIC REGIONAL CONFERENCE 15-18 MAY 2019 KYOTO, JAPAN

ASIA-PACIFIC ACADEMIC PRIMARY CARE GROUP (AAPCG) SYMPOSIUM – ENABLING PRIMARY CARE RESEARCH COLLABORATION

Dr. Yu Yee Tak, Esther
Clinical Assistant Professor
Department of Family Medicine and Primary Care, The University of Hong Kong

On 17th May 2019, I joined other scholars of the Asia-Pacific Academic Primary Care Group (AAPCG) to share our first-year journey in regional research collaboration with an enthusiastic audience at the WONCA Asia-Pacific Regional Conference 2019 held at Kyoto, Japan. The symposium, chaired by Dr. Lay Hoon Goh from the National University of Singapore (NUS), comprised four presentations: 1. Dr. Victor Loh, also from the NUS, summarized all the AAPCG activities since its inauguration in September 2017; 2. Dr. Regina Sit from the Chinese University of Hong Kong introduced research methodologies suitable for primary care researches and shared practical tips on avoiding pitfalls; 3. Dr. Lian Leng Low from Duke-Medical School of Singapore presented the rich variety of research methodologies employed by different AAPCG scholars on a common topic – multi-morbidities, and elaborated how their work complemented each other and contributed to future research collaboration; 4. I from the University of Hong Kong described how our team of scholars from Singapore, Shanghai and Hong Kong together developed a research project on community-based diabetes mellitus (DM) screening using spot capillary HbA1c test, which was important and feasible for all of us from different countries/cities with different primary care systems and services.



Dr. Regina Sit (left) and Dr. Esther Yu (right) speaking at the AAPCG symposium at WONCA APR 2019, Kyoto

My presentation: “Upscaling your research”

The global endemic of DM affects countries of the Asia-Pacific region even more than the West; one-third of patients with DM and DM-related mortality can be found in the West-Pacific region. Moreover, it was estimated that 85 million adults with DM remained undiagnosed in this region in 2017. Primary care doctors have a pivotal role to offer targeted screening for at-risk individuals and offer early intervention to minimize this DM burden. However, current international guidelines on DM diagnosis and management are developed in Western countries and may not be applicable for Asians.

For example, HbA1c test has been recommended by the American Diabetes Association in 2010 and World Health Organization in 2011 as a stable and convenient diagnostic test for DM. Since HbA1c levels has known ethnic variation, its accuracy for DM detection using the recommended cut-off value of $\geq 6.5\%$ and its optimal cut-off value for DM detection among different Asian population are topics of on-going debates. Consequently, HbA1c has still not been adopted as a DM screening/diagnostic test in most Asia-Pacific countries despite its many advantages over glucose tests. Moreover,

guideline implementation is often limited by local health care system and available resources. While DM screening is subsidized by the government for all at-risk Singaporeans, only the elderly above 65 years and patients with established hypertension managed in public primary care clinics are offered subsidized DM screening in Hong Kong and Shanghai. Other at-risk individuals who cannot afford private body check would not have access to such testing. Hence, the use of HbA1c test to improve DM detection among at-risk individuals seems appealing to all primary care doctors from different Asia-Pacific countries and, the accuracy of HbA1c in the different Asian ethnic groups represents a common concern. On the other hand, the exact research question and methodology would be different in their unique healthcare systems, e.g. What is known from previous studies? Who should be screened? Who would pay for this expensive test?

In Hong Kong Chinese, previous studies demonstrated that the accuracy of HbA1c test to detect DM varied with risk of the subject. For primary care patients labelled to have impaired fasting glucose, the sensitivity of HbA1c $\geq 6.5\%$ to detect DM compared to oral glucose tolerance test was only 33.2%. The optimal cut-off

value of HbA1c to diagnose DM ranged from 6.0-6.3% in different risk groups. Of note, the HbA1c testing in these studies were performed on venous samples but not capillary samples, which would in fact be most useful to overcome the limited availability of spot venous sampling in most clinics and lack of patient time to come for testing on a separate day. No similar study has been conducted among the growing South Asian population in Hong Kong, who are known to carry higher DM burden. Also, the impact of haemoglobinopathies, a condition prevalent among both Southern Chinese and South Asians, on the accuracy of HbA1c was not known. Therefore, our team proposed to evaluate the optimal cut-off value of HbA1c to detect DM among Chinese and South Asian at-risk adults in Hong Kong, taken into consideration the presence of undiagnosed haemoglobinopathies. In particular, we would like to conduct the study in the community, where most dwellers would not have regular DM screening.

The presentation attracted keen discussion amongst the participants. Many shared their similar concerns and considered this research question important, yet the cost of HbA1c tests would be a limiting factor for most developing countries.



Prof. Cindy Lam addressing another participant's question regarding the AAPCG initiative



Prof. Doris Young interacting with a WONCA participant interested to be part of AAPCG



The panel discussing challenges of collaborative research in different healthcare systems

We ended the thought-provoking session with a good stretch, some jumps and lots of laughter... and of course, a group photo for the AAPCG mentors and scholars! I felt so honored to be part of the AAPCG family and treasured every chance to learn from other scholars and each activity. So looking forward to our next gathering in June 2019!



Exercise time after the 90-minute symposium



AAPCG group photo after the symposium, WONCA APR 2019, Kyoto, Japan

From Left: Dr. Regina Sit (CUHK), Dr. Lay Hoon Goh (NUS), Dr. Victor Loh (NUS), Dr. Lian Leng Low (Duke), Prof. Samuel Wong (CUHK), Prof. Doris Young (NUS), Prof. Cindy Lam (HKU), A/Prof. Ping Yein Lee (UPM), A/Prof. Ngiap Chuan Tan (Duke), Dr. Esther Yu (HKU) & Dr. Yang Hua (Fudan)

Joint Clinics in Hong Kong West FM&PHC – Adding Colors to Family Medicine Practice

Dr. Cheng Chun Sing, David, Family Medicine Specialist
Special thanks to Dr. Stephen Chou for the photos

Back in my early days in General Outpatient Clinic (GOPC), when I was first invited to help coordinate and attend the Geriatric joint clinic, I just knew what I needed to do but could hardly understand what it was all about. A few questions kept wandering in my mind. Why is this special clinic session needed? What is its role in our practice?

Joint clinic is a special clinic service jointly organized with various specialties under Family Medicine Specialist Clinic (FMSC). One or two colleagues would be designated to help coordinate each of them.

During each session, the respective specialists would come to our clinic to provide consultations to selected patients, together with our assigned colleagues/coordinators. Some cases and material of interest e.g. ECGs and X ray films would also be discussed if appropriate.

In our cluster, besides Geriatric joint clinic, similar sessions are held with endocrinologists on management of complicated DM patients, e.g. those who still have poor or fluctuating control despite appropriate insulin and drug doses.

Later on, collaboration has expanded to involve other specialties/subspecialties, namely Cardiac Medicine, Orthopaedics (O&T) and Ear Nose Throat Surgery (ENT).

The most important mission of joint clinics is capacity building. This is well realized when colleagues absorb more through the sessions and more extensive collaboration develops with time. As the term implies, its aim is to build up and consolidate our FM doctors' ability and competency in the management of certain health problems.

In the past, we would arrange all patients presenting with cognitive impairment to see the geriatricians, but we learn that if we take a short while to ask the history in more detail, we would be able to differentiate mild/subjective cognitive impairment from real dementia. The former will be managed in primary care e.g. referral to cognitive training class, instead of being arranged to consult geriatrics.

Another good example is, in the pre-joint clinic era, some non-urgent abnormalities in ECG and X-ray would have been referred to other specialists by our colleagues as we always tend to play safe for uncertainty. But now as we know more and share more with our doctors, this practice has profoundly changed. When these abnormalities are encountered, colleagues would consult our coordinators first. These would be screened by our coordinators who have a gatekeeping role. Those who need specialist comments would be arranged to be seen in joint clinic, while referring doctors would be given appropriate feedback on management plan for those not requiring further investigations.

Coordinators act as pioneers in gaining more exposure and knowledge at the beginning, followed by colleagues who would learn through sharing and feedback on cases over time. Ideally at the end, most of us would get to know which group of patients or abnormalities can be managed earlier in primary care, and on the other hand which group that really needs other specialist input.

As a result, capacity building leads to a change in practice.

Moreover, evolving from attachment by a designated doctor every time, nowadays many of our doctor colleagues would be arranged to attend the Geriatric joint clinic through a roster, so as to enhance their direct exposure. Some of the other joint clinics may follow suit in the near future.

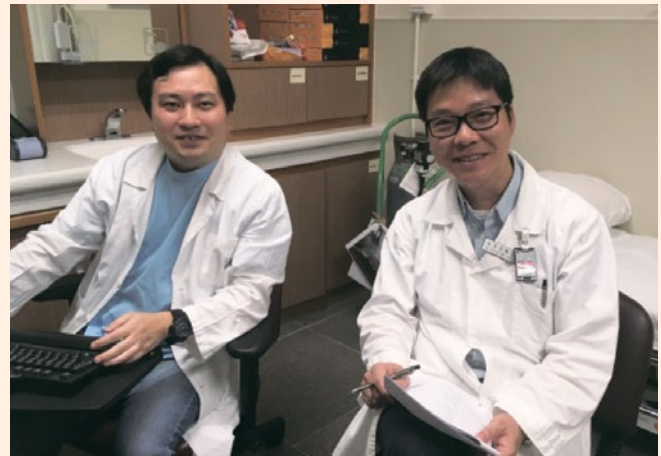
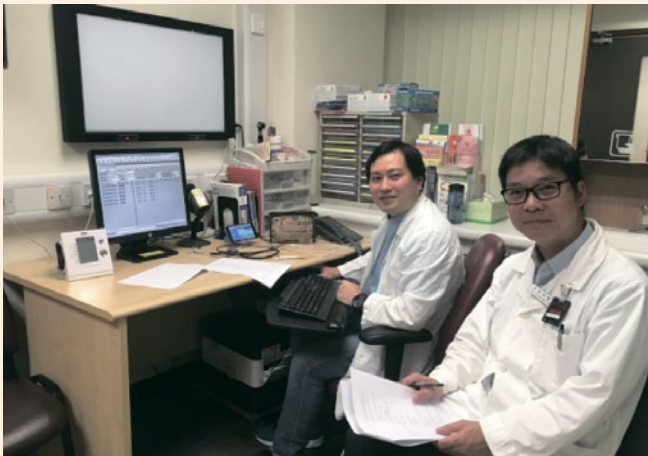
Initially, sharing was limited to infrequent sessions during meetings and seminars. In these few years, more frequent and comprehensive sharing on various topics have been arranged, e.g. how to adjust insulin dosage and use the new diabetic drugs, how to interpret and manage ECG abnormalities. In order to boost the coverage for our colleagues, summaries containing learning point highlights were prepared by attending doctors, which were then shared out in emails and downloadable formats on our department website.

More than capacity building, those patients who really need other specialist opinion can be assessed at an earlier time in primary care, preferable over the long waiting time of the specialist clinics in hospital.

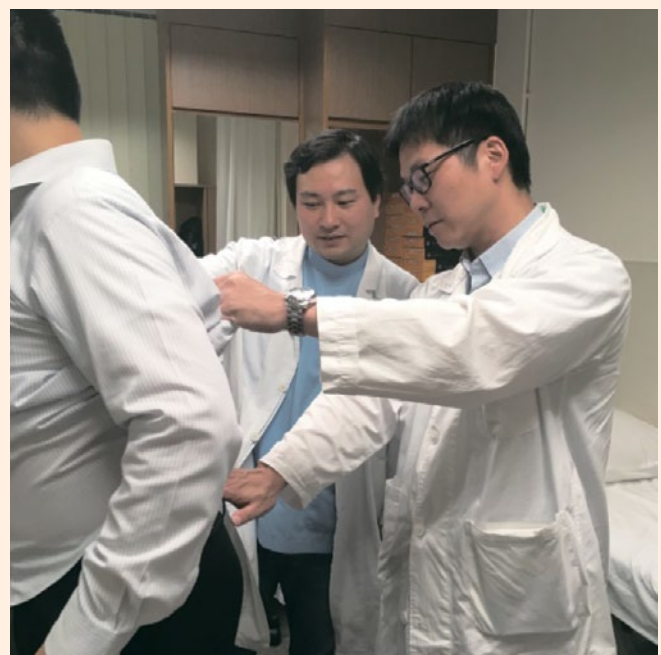
Many of the referred patients are chronic cases followed up in our clinic, so a more coordinated and continuous care could also be provided. An example for illustration, a long term diabetic patient complaining of sciatica was seen by orthopaedic surgeon in joint clinic and surgical intervention was considered not necessary, he/she will be followed up for the sciatica over time at our chronic follow up and may be referred again if symptoms progress.

From a wider perspective, due to more interaction and discussion with other specialties, mutual understanding and inter-specialty bonding has been strengthened. Hopefully more service enhancement could be put forward in the future, for the good of the patients.

Continuity, Comprehensiveness, Coordination, first-Contact, Collaboration, Gate-keeping – these principal Family Medicine concepts can all be applied well in joint clinics. Together with its capacity building function and other benefits, joint clinic service has made our primary care service more colorful and amazing. It is hoped that they will be further developed and enriched in the years to come.



Our O&T joint clinic coordinator Dr. Stephen Chou (left) and QMH O&T specialist Dr. WY Cheung (right) discussing on the cases



Doctors working together to perform back examination

Effects and Management of Exposure to Tear Gas and Pepper Spray

Chemical irritants used in crowd control, such as those in tear gas and pepper spray, are generally considered to be safe and to cause transient discomfort. However, reports show that their use can cause serious injuries and have risk to people with pre-existing respiratory conditions. Family physicians play a role in the first line management of patients exposed to these chemical irritants, and should identify those at risk of complications.

What is a tear gas?

A tear gas is actually not a gas at all, but a toxic chemical irritant in the form of powder or drops mixed to variable concentrations in a solvent, and delivered with dispersion.

The most common chemical irritant in a tear gas is chlorobenzylidene-malononitrile (also known as **CS**, after the chemists Corson and Stoughton who first synthesized it). Other chemicals include chloroacetophenone (**CN** or "Mace"), dibenzoxazepine (**CR**), Diphenylaminochloroarsine (**DM** or adamsite)

What is pepper spray made of?

The active ingredient in pepper spray is oleoresin capsicum (**OC**), an oily concentrated extract from pepper plants of the genus *Capsicum*, commonly referred as chilli pepper.

How do these crowd control agents work?

These agents interact with mucocutaneous sensory nerve receptors such as TRPA1 cation channels. The effect of oleoresin capsicum is linked to a direct stimulation of type C and A δ sensory nerve endings, provoking an immediate release of the inflammatory P substance.

Medical consequences of acute exposure to tear gas and pepper spray

Area affected	Clinical manifestations	Potential complications	Potential sequelae
Eyes	Tearing, burning sensation, blepharospasm, photophobia, corneal oedema (OC)	Keratitis (CN), corneal erosion (OC), intraocular haemorrhage	Cataract, glaucoma
Respiratory tract	Severe rhinorrhea (CS), sneeze, cough, dyspnoea (CS), pharyngitis, bronchitis	Bronchospasm, hypoxaemia (CN), delayed pulmonary edema (CS)	Reactive airways dysfunction syndrome
Cardiovascular system	Hypertension (CS)	Heart failure, cerebral haemorrhage	Not described
Skin	Rash, oedema, erythema, blistering (CS)	Irritant dermatitis (CN), facial oedema (CN), aggravation of dermatitis	Allergic dermatitis (CN)

Area affected	Clinical manifestations	Potential complications	Potential sequelae
Digestive tract	Buccal irritation, salivation (CS), odynodysphagia, abdominal pain, diarrhea, nausea, vomiting (DM)	Liver toxicity (CS)	Not described
Nervous system	Trembling (DM)		
Agitation, anxiety	Hysterical reaction	Not described	

Assessment and management of effects of tear gas and pepper spray

At as triage we need to identify at-risk patients, including those with loss of consciousness or with dyspnoea, those of advanced age and those with comorbidities. We need to take into account the weather (wind, rain and ambient temperature) in addition to the characteristics of the site of deployment (open or closed space). Effects of tear gas are enhanced by heat and high ambient humidity. Characteristics common to these agents are rapid onset time and a short duration of effects (most less than 60 minutes).

Staff should move patients away quickly from the toxic vapours and undress them in a well-ventilated area. If contamination is severe, pullovers and T shirts must be removed by cutting and should not be pulled over the patient's head.

Eyes should be rinsed for 10 to 15 minutes with isotonic sodium chloride or room temperature water and any contact lenses removed.

For skin contamination, showering with soap and water is advised to remove the irritant from skin that should be blotted dry, not rubbed. Skin lesions are treated with topical steroid and antihistamine agents as necessary.

For bronchial spasm, oxygen, Beta2 mimetic and ipratropium aerosols can be given.

Reference:

1. Clinicopathological effects of pepper (oleoresin capsicum) spray MF Yeung, William YM Tang. Hong Kong Medical Journal, Vol 21 Number 6, December 2015
2. Management of the effects of exposure to tear gas. Pierre-Nicolas Carron. BMJ 2009; 338:bb2283
3. Health impacts if chemical irritants used for crowd control: a systemic review of the injuries and deaths caused by tear gas and pepper spray. Rohini J. Haar et al. BMC Public Health (2017)17: 831

Compiled by Dr. Sin Ming Chuen



香 港 大 學
THE UNIVERSITY OF HONG KONG

**Non-Tenure Track Assistant Professor
in the Department of Family Medicine and Primary Care (FMPC) and
the Bau Institute of Medical and Health Sciences Education (BIMHSE)
(Ref.: 495838)**

Applications are invited for appointment as **Non-Tenure Track Assistant Professor in the Department of Family Medicine and Primary Care (FMPC) and the Bau Institute of Medical and Health Sciences Education (BIMHSE)** (Ref.: 495838), to commence as soon as possible, on a three-year fixed-term basis, with the possibility of renewal subject to satisfactory performance.

Applicants should possess a Ph.D. degree in a relevant field or equivalent. Preference will be given to those who have received a higher qualification in family medicine training and demonstrate a strong commitment to medical education. Proven ability in conducting independent research and performing teaching duties will be required. Applicants should also be fluent in written and spoken English. Preference will be given to those who can communicate in Cantonese.

The appointee will report directly to the Head of the Department of FMPC, as well as to the Director of the BIMHSE. The key responsibilities will include undergraduate teaching of medical students, curriculum development, programme co-ordination, research relevant to family medicine and medical education, and the development and delivery of medical and health sciences education programmes of BIMHSE. The appointee will also contribute to the administrative duties in the Department and the Faculty.

A highly competitive salary commensurate with qualifications and experience will be offered, in addition to annual leave and medical benefits. At current rates, salaries tax does not exceed 15% of gross income. The appointment will attract a contract-end gratuity and University contribution to a retirement benefits scheme, totalling up to 15% of basic salary. Housing benefits will also be provided as applicable.

The University only accepts online application for the above post. Applicants should apply online at the University's career site (<https://jobs.hku.hk>) and upload an up-to-date C.V. Review of application will start from August 9, 2019 and continue until **September 15, 2019** or until the post is filled, whichever is earlier.

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and is committed to equality, ethics, inclusivity, diversity and transparency



香 港 大 學
THE UNIVERSITY OF HONG KONG

**Non-Tenure Track Clinical Assistant Professor
in the Department of Family Medicine and Primary Care (FMPC) and
the Bau Institute of Medical and Health Sciences Education (BIMHSE)
(Ref.: 495845)**

Applications are invited for appointment as **Non-Tenure Track Clinical Assistant Professor in the Department of Family Medicine and Primary Care (FMPC) and the Bau Institute of Medical and Health Sciences Education (BIMHSE)** (Ref.: 495845), to commence as soon as possible, on a three-year fixed-term basis, with the possibility of renewal subject to satisfactory performance.

Applicants should possess a medical degree registrable with the Medical Council of Hong Kong with a higher qualification in general practice/family medicine, and demonstrate a strong commitment to medical education. Proven ability or potential in conducting independent research and performing teaching and clinical duties will be required. Applicants should also be fluent in written and spoken English, and spoken Cantonese. Prior experience or qualifications in medical education and/or research would be an advantage but not necessary.

The appointee will report directly to the Head of the Department of FMPC, as well as to the Director of the BIMHSE. The key responsibilities will include undergraduate teaching of medical students, curriculum development, programme co-ordination, research relevant to family medicine and medical education, and the development and delivery of medical and health sciences education programmes of BIMHSE. The appointee will also contribute to the administrative duties in the Department and the Faculty, and provide clinical services in clinics of the HKU Health System.

A highly competitive salary commensurate with qualifications and experience will be offered, in addition to annual leave and medical benefits. At current rates, salaries tax does not exceed 15% of gross income. The appointment will attract a contract-end gratuity and University contribution to a retirement benefits scheme, totalling up to 15% of basic salary. A monthly cash allowance will be offered to the successful candidate. Housing benefits will also be provided as applicable.

The University only accepts online application for the above post. Applicants should apply online at the University's career site (<https://jobs.hku.hk>) and upload an up-to-date C.V. Review of application will start as soon as possible and continue until **October 20, 2019** or until the post is filled, whichever is earlier.

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Meeting Highlights

Interest Group in Dermatology

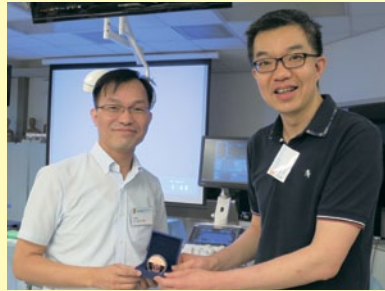
Dr. Lee Tze Yuen, Specialist in Dermatology and Venerology, delivered a lecture on "Doctor, Am I Suffering from Rosacea?" on 6 July 2019.



Dr. Lam Wing Wo (right, Moderator) presenting a souvenir to Dr. Lee Tze Yuen (left, Speaker)

Primary Care Point-of-care Ultrasound (POCUS) Course

Dr. Andrew Wai and Dr. Samuel Lau, Specialists in Radiology were the speakers for Primary Care Point-of-Care Ultrasound (POCUS) Course held on 6, 13 and 20 July 2019.



Dr. Alvin Chan (left, Chairman of Board of Education) presenting a souvenir to Dr. Samuel Lau (right, Speaker)



Dr. Alvin Chan (left, Chairman of Board of Education) presenting a souvenir to Dr. Andrew Wai (right, Speaker)

CME Dinner Lecture on 12 July 2019

Dr. Leung Kwan Wa, Maria, Specialist in Family Medicine; Consultant, Department of Family Medicine, New Territories East Cluster, Hospital Authority, delivered a lecture on "Discovery in Smoking Cessation" on 12 July 2019.



Dr. Lai Sheung Siu (right, Moderator) and Dr. Mary Kwong (left, Council Member) presenting a souvenir to Dr. Maria Leung (middle, Speaker)

Certificate Course on Bringing Better Health to Our Community 2019

The 3rd session of the "Certificate Course on Bringing Better Health to Our Community 2019" co-organized with Queen Elizabeth Hospital was held on 27 July 2019. Dr. Chan Kam Tim, Consultant, Department of Medicine, Queen Elizabeth Hospital, delivered a lecture on "Update on Management of Hyperlipidaemia"; Ms. Bonnie Cheng, Dietitian, Department of Dietetics, Queen Elizabeth Hospital, delivered a lecture on "Dietitian - Management on Hyperlipidaemia" and Dr. Tsang Chun Fung, Sunny, Resident Specialist, Department of Medicine, Queen Elizabeth Hospital, delivered a lecture on "Update on Usage of Anti-platelets in Primary Care" respectively.



Dr. Chan Hung Chiu (right, Council member) presenting a souvenir to Dr. Chan Kam Tim (left, Speaker)



Dr. Chan Hung Chiu (left, Council member) presenting a souvenir to Ms. Bonnie CHENG (right, Speaker)



Dr. Chan Hung Chiu (right, Council member) presenting a souvenir to Dr. Tsang Chun Fung, Sunny (left, Speaker)

BOARD OF EDUCATION NEWS

- 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.

7 September 2019

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	Eczema and Common Papulosquamous Lesions in Quiz Format		
Speaker	Dr. Chang Mee, Mimi Specialist in Dermatology and Venerology		
Coordinator & Chairman	Dr. Lam Wing Wo The Hong Kong College of Family Physicians		
Time	1:00 p.m. - 2:00 p.m.	Registration and Lunch	
	2:00 p.m. - 3:30 p.m.	Lecture (Part A)	
	3:30 p.m. - 4:00 p.m.	Discussion (Part B)	
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong		

Admission Fee	Members Non – members HKAM Registrants	Free HK\$ 300.00 HK\$ 150.00
Accreditation	All fees received are non-refundable and non-transferable.	
	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 Coordinator via the College secretariat 2 weeks prior to the meeting. Participants are expected to take an active role in discussion during the workshop. Participants will be awarded CME for attendance in Part A of workshop and CPD for Part B.	

Register Online

Sponsored by
Ego Pharmaceuticals 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	30 August 2019 (Friday)		
Time	2:30 p.m. - 3:30 p.m.		
Topic	"Eczema treatment in Primary Care – Topical Role in Holistic Approach" by Dr. Wu Wai Fuk		
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 and October's video sessions are cancelled due to renovation work in Wanchai office.

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
12 Sep 2019 1:00 – 3:00 p.m.	Lecture Theatre, G/F, Block K, United Christian Hospital, 130 Hip Wo Street, Kwun Tong, Kowloon	Assessment of Mental Competency Dr. YIU Gar Chung Michael Consultant, Department of Psychiatry, United Christian Hospital	Ms. Polly Tai Tel: 3949 3430 or Ms. Cordy Wong Tel: 3949 3087
26 Sep 2019 1:00 – 3:00 p.m.	Lecture Theatre, G/F, Block K, United Christian Hospital, 130 Hip Wo Street, Kwun Tong, Kowloon	Interpretation of Common Haematological Investigations & Management of Common Haematological Problems in Primary Care Settings Dr. LIN Shek Ying Consultant, Department of Medicine & Geriatrics, United Christian Hospital	Ms. Polly Tai Tel: 3949 3430 or Ms. Cordy Wong Tel: 3949 3087

Structured Education Programmes

Free to members

HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
4 Sep 2019 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Approach to Abnormal Laboratory Results (Microbiology) Dr. Hui Alice Sau Wei & Dr. Kelly Sara Jane	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Compensation Scheme: Employee (IOD), Road Traffic Accident (RTA) and Violence and Law Enforcement Injuries Dr. Lam Wai Yiu & Dr. Tsang Lai Ting	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Compliance and Patient Centered Care Dr. Yau Chi Yan, Davy & Dr. Leung Eunice Hilching	Ms. Phoebe Wong Tel: 3949 3079
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	How to Understand a Patient Better - Family Therapy Dr. Wu X Q	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Update of Asthma Dr. Kong Ka Ming, Andrew & Dr. Chung Hiu Yeung, Arthur	Mr. Alex Kwok Tel: 5569 6405
5 Sep 2019 (Thu)			
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Mountain Emergency Care Dr. Chan Cho Shan & Dr. Ho Shu Wan	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Clinical Psychology in Family Medicine Ms. Irene Au Yeung	Ms. W L Kwong Tel: 2595 6941
11 Sep 2019 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Improving Patient Care for Anxiety and Depression Dr. Chan Wing Yan, Loretta	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Air Travel Emergency Dr. Chang Ting Ting & Dr. Lam Ka Wai	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Smoking Cessation Dr. Chan Ki Fung, Dickson & Dr. Wong Sze Man	Ms. Phoebe Wong Tel: 3949 3079
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Breastfeeding Talk Dr. Annie Fok	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Eating Disorder Dr. Li Wing Hei, Sunny & Dr. Fung Yat Wang, Andrew	Mr. Alex Kwok Tel: 5569 6405
12 Sep 2019 (Thu)			
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Occupational Health at Primary Care Clinic Dr. Ho Tsz Bun & Dr. Lo Cheuk Wai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Fever and Skin Rash in Children Dr. Yuen Man Ki, Vivian	Ms. W L Kwong Tel: 2595 6941
18 Sep 2019 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Disinfection: Procedures and Equipment in Clinic Setting Dr. Chan Kam Sheung & Dr. Mak Shen Rong, Sharon	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Cryotherapy in Primary Care Clinic Dr. Lam Kang & Dr. Leung Ching	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Anxiety Disorders Dr. Li Wing Chi, Gigi & Dr. Chang Hsu Wei	Ms. Phoebe Wong Tel: 3949 3079
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	MPS- Case Demonstration; Common Pitfall in Daily Practice Dr. Esther Pang	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	HK Medical System Dr. Chung Kin Wing	Mr. Alex Kwok Tel: 5569 6405
19 Sep 2019 (Thu)			
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Hong Kong Voluntary Health Insurance Scheme Dr. Ng Kai Man & Dr. Hong Sze Nga	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Cancer Screening and Prevention: the Evidence Dr. Chan Yuen Ling, Carrie	Ms. W L Kwong Tel: 2595 6941
25 Sep 2019 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Approach to Management of Thyrotoxicosis & Goitre/Thyroid Nodule Dr. Chuang Chi Kit & Dr. Shum Kin Kai	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Pharmacy Services in the Community Dr. Fan Siu Wai & Dr. Ko Pak Long	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Update of Management of Osteoporosis Dr. Chen Tsz Ting & Dr. Ma Man Ki, Katelyn	Ms. Phoebe Wong Tel: 3949 3079
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	The Current Guidelines in Cancers Screening Dr. Prudence Hou	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Smoking and Drinking Cessation Counselling Dr. Leung Yuen Yee, Yuki & Dr. Leung Wai Yan, Viola	Mr. Alex Kwok Tel: 5569 6405
26 Sep 2019 (Thu)			
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Update Management of Metabolic Disease including Lipid, Urate, Potassium or Calcium Disorder Dr. Lee Hoi Ying & Dr. Wong Fai Ying	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Management of Menopausal Women Dr. Tai Lik	Ms. W L Kwong Tel: 2595 6941

COLLEGE CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
18 Aug 9:30 a.m. - 1:00 p.m. Conjoint Exam - AKT	19	20	21 2:00 - 7:30 p.m. Structured Education Programme	22 4:30 - 7:00 p.m. Structured Education Programme	23	24 2:00 - 4:00 p.m. Interest Group in Medical Humanities
25	26	27	28 2:00 - 7:30 p.m. Structured Education Programme	29 4:30 - 7:00 p.m. Structured Education Programme	30 2:30 - 3:30 p.m. Video Session	31 1:00 - 4:00 p.m. Certificate Course on Bringing Better Health to Our Community 2019 2:30 - 5:30 p.m. DFM - Musculoskeletal Workshop
1 Sep	2	3	4 2:00 - 7:30 p.m. Structured Education Programme	5 4:30 - 7:00 p.m. Structured Education Programme	6	7 1:00 - 4:00 p.m. Interest Group in Dermatology 2:30 - 5:30 p.m. DFM - Women's Health Workshop
8	9	10	11 2:00 - 7:30 p.m. Structured Education Programme 7:00 - 9:00 p.m. Pre Exit Exam Workshop	12 4:30 - 7:00 p.m. Structured Education Programme 6:00 p.m. Pre Exit Exam Workshop (Video Session)	13	14
15	16	17	18 2:00 - 7:30 p.m. Structured Education Programme	19 4:30 - 7:00 p.m. Structured Education Programme	20	21 2:30 - 5:30 p.m. DFM - Module III Seminar
22	23	24 8:30 p.m. Council Meeting	25 2:00 - 7:30 p.m. Structured Education Programme 8:00 p.m. Specialty Board Meeting	26 4:30 - 7:00 p.m. Structured Education Programme	27	28 1:00 - 4:00 p.m. Certificate Course on Bringing Better Health to Our Community 2019 2:30 - 5:30 p.m. Assessment Enhancement Course Mock Exam

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Front row (left to right): Dr. Heidi Fung, Dr. Wendy Tsui, Dr. Catherine Ng, Dr. Anita Fan and Dr. Natalie Siu

Red : Education Programmes by Board of Education
Green : Community & Structured Education Programmes
Purple : College Activities

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The Hong Kong College of Family Physicians

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