

THE HONG KONG COLLEGE OF FAMILY PHYSICIANS



July 2025

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Congratulations to **Dr. Cecilia FAN** on her appointment by the Chief Executive, Mr. John LEE, as Under Secretary for Health, effective 14 July 2025.

The Hong Kong College of Family Physicians (HKCFP) reaffirms its commitment to supporting the Government in training more qualified family doctors and in enhancing the quality of primary healthcare services in Hong Kong.



# Message from the President



Dr. David CHAO delivering welcoming speech at Conjoint Fellowship Conferment

Many congratulations to Dr. Cecilia FAN Yuen-man, the ex-Honorary Secretary of our College, who has been appointed as the new Under Secretary for Health

of the Hong Kong SAR in July 2025 as the successor to Dr. Libby LEE Ha-yun, who has in turn been appointed to be the new Chief Executive of the Hospital Authority of the Hong Kong SAR with effect from August 2025! Congratulations also go to Mr. Henry FAN Hung-ling, the incumbent Chairman of the Hospital Authority, who has been reappointed as Chairman of the Hospital Authority! (https://www.info.gov.hk/gia/general/202507/02/P2025070200638.htm) I look forward to continuing to work closely with them to further develop primary healthcare services and the specialty of family medicine in Hong Kong.

The Hong Kong College of Family Physicians has just successfully held the 38<sup>th</sup> Fellowship Conferment and Diploma Presentation Ceremony, and the 35<sup>th</sup> Dr. Sun Yat Sen Oration on 13th July, 2025 at the Hong Kong Academy of Medicine Building. Once again, I would like to congratulate our new Conjoint Fellows,

successful candidates of the Exit Examination and Diplomates of Family Medicine for their great achievements as their hard work and dedications over the years have been duly recognised and their awards are truly well-deserved. We must also thank the family members who have provided support to all the successful candidates unconditionally.

This year, I have the great honour of welcoming the Chair of the Royal Australian College of General Practitioners Board and South Australia Dr. Siân GOODSON, who travelled all the way from Adelaide, Australia to join our Conjoint Fellowship Conferment Ceremony and Dr. Sun Yat Sen Oration, as well as the Hong Kong Primary Care Conference 2025.



(Continued on page 2)

# **MESSAGE FROM THE PRESIDENT**

#### (Continued from page 1)

The Hong Kong College of Family Physicians (HKCFP) and the Royal Australian College of General Practitioners (RACGP) have been collaborating on training, education and assessments of our Fellows and Members since 1986. On behalf of the RACGP and HKCFP, Dr. GOODSON and I agreed on further strengthening the collaborations between our two Colleges by building on the solid foundations set by many generations of family physicians and General Practitioners before us from the RACGP and HKCFP. Once again, I would like to express our heartfelt thanks to Dr. GOODSON and the RACGP for their collegiality and continuing support.

We are most honoured to have Prof. Martin ROLAND as our 35<sup>th</sup> Dr. Sun Yat Sen Orator delivering his Oration entitled "What are family doctors for? And will they be replaced by artificial intelligence?". Prof. ROLAND CBE was Chair of Health Services Research at the University of Cambridge until his retirement in 2016. He is Emeritus Fellow in Health Services Research, Murray Edwards College, Cambridge University and was appointed CBE for services to medicine in 2003. Prof. Roland has been visiting Professor to Department of Family Medicine and Primary Care, the Hong Kong University since 2017. In recognition of his

contributions and support towards primary healthcare research in Hong Kong, Prof. ROLAND has been awarded honorary Fellowship of the HKCFP in 2025.



Dr. David CHAO (right) presenting the Honorary Fellow certificate to Prof. Martin ROLAND (left)



Dr. David CHAO, President of HKCFP (right) exchanging the souvenir with Dr. Siân GOODSON, Chair of the RACGP Board and South Australia (left)

I would like to take this opportunity to thank the ongoing support by the Government in the further development of primary care services and training; WONCA and colleagues from around the globe

for the friendship and promotion of Family Medicine; the Universities for Family Medicine education, research and development; and the Department of Health, the Hospital Authority, the training centres in the private sector,



Dr. David CHAO (right) with Dr. Siân GOODSON (left) at Conjoint Fellowship Conferment Ceremony 2025







(Continued on page 3)

# MESSAGE FROM THE PRESIDENT

#### (Continued from page 2)

the Academy of Medicine and sister Colleges for supporting our Family Medicine vocational training.



Since 2011, the Hong Kong Primary Care Conference (HKPCC) has been an important annual scientific event for clinicians, nurses, and allied health professionals, to share their experiences and insights, on how we can further enhance

the primary care service delivery and primary care research for the benefit of our patients in the community. This year, the HKCPCC 2025 was held from 11th to 13th July 2025, and we had a record breaking attendance of about 800. We are most grateful to have government officials, many renowned local and international experts, family doctors, nurses, allied health professionals, and other primary care providers to share their expertise and experiences with us. The theme of HKPCC was entitled, "Family Doctors in Partnership: Synergising Primary Care Outcomes". The rich scientific programme has been packed with attractive plenaries and seminar sessions. As in the previous years, full research paper competition, clinical case competition, and posters competition have been well subscribed. Many thanks again to all your active participation and support! Heartfelt thanks also go to the Organising Committee led by Dr. Lorna NG and the College secretariat led by Ms. Erica SO and Ms. Teresa LIU for their dedicated work and unfailing support.

The RACGP GP Annual Conference GP25 is to be held from 14<sup>th</sup> to 16<sup>th</sup> November 2025 at the Brisbane Convention and Exhibition Centre, Brisbane, Queensland, Australia (<a href="https://gpconference.com.au/">https://gpconference.com.au/</a>) and that the WONCA Asia Pacific Regional Conference 2026 is to take place at Iloilo City Convention Centre, Iloilo City, the Philippines from 23<sup>rd</sup> to 27<sup>th</sup> March, 2026. (<a href="https://www.wonca-apr2026.ph/">https://www.wonca-apr2026.ph/</a>) Both of these conferences are open for registration now.

But before that, please join us to attend the WONCA World Conference 2025 at the Lisboa Congress Centre, Lisbon, Portugal from 17<sup>th</sup> to 21<sup>st</sup> September 2025. (<a href="https://www.woncaworld2025.org/">https://www.woncaworld2025.org/</a>) Please register and make necessary arrangements as soon as possible as the flights and hotels are going fast. See you in Lisbon!

#### Dr. David V K CHAO

President







#### **ORGANISERS:**





# Family Doctors:

27 - 30 May 2027

# The Heart of Quality Primary Healthcare

## **Announcement of Logo Design Competition**

We are delighted to announce the results of the WONCA Asia Pacific Regional (APR) Conference 2027 in Hong Kong's Logo Design Competition. The competition was a resounding success, showcasing the exceptional creativity and talent of our community.

After careful consideration by the Judging Panel organized by the Publication Committee of the WONCA APR Conference 2027 Host Organizing Committee, we are thrilled to announce **Dr. SHEK Hon Wing as the winner and designer of the Conference's official logo**.

The winning design is composed of 2 major elements:

- 1. Flowers the outer petals are composed of two hands forming a heart-like shape; whereas the inner petals are composed of different family members. This collage represents the "heart" that we as family doctors put into the care of each members as well as the unit called family.
- 2. Vortex the whole flower is located in the center of the vortex which continuously generates spreading waves. This symbolize that we family doctors play an important core (heart) role in the primary healthcare system and continuously contribute substantial impact to the system.

It does capture the essence of the theme "Family Doctors: The Heart of Quality Primary Healthcare". Congratulations to Dr. SHEK for his outstanding work!

We extend our gratitude to all participants for their creative submissions. Your contributions have been invaluable in shaping the identity of this significant event.

Please stay tuned for the news of the WONCA APR Conference 2027 in Hong Kong (27-30 May 2027).



# HOUSE MANAGEMENT COMMITTEE

## We are the HKCFP Family

Dr. LAU Ho Lim Chairman, House Management Committee

At the Hong Kong College of Family Physicians, we do not just talk about family and family medicine—we live it. We conceive that our College is more than an institution; it is a joyful and harmonious family where every individual plays a vital role, especially the unsung heroes behind the scenes: our 15 dedicated administrative staff members in the College Secretariat, and the generous doctors who choose to serve our College voluntarily.

While members may not often get the chance to meet them in person, these hardworking colleagues in the College Secretariat are the pillars of our office, handling a myriad of day-to-day challenges to keep our activities running smoothly. From coordinating examinations to supporting our training programmes and managing logistics for College events, they are truly the foundation on which much of our work stands.

Thanks to the thoughtful arrangement by our venerable Dr. Stephen FOO, an appreciation dinner was recently held in a cosy restaurant near Dr. FOO's clinic. The dinner was originally held to thank all those staff involved in the 2024 Conjoint Examination, but it soon evolved into a meaningful gathering where Council members, Board of Conjoint Examination members and College staff could share a meal, stories, and laughter. It was a wonderful opportunity to connect beyond our usual roles and strengthen the bonds that make our College community so special and so endearing.

We hope our members will take a moment to get to know our staff who support the College every day, often quietly and tirelessly behind the scenes. Their efforts reflect the spirit of camaraderie that underscores our College—one team, one heart.



(From left to right) 1st row: Dr. Simon AU, Dr. Loretta CHAN, Dr. CHAN Hung Chiu, Dr. Stephen FOO, Dr. IP Pang Fei, Dr. LAU Ho Lim, Dr. LI Yim Chu 2<sup>nd</sup> row: Dr. Peter FOK, Ms. Hannah LOK, Ms. Yvonne CHOW, Ms. Iris IP, Ms. Alky YU, Ms. Nana CHOY, Ms. Windy LAU, Ms. Teresa LIU, Dr. Catherine CHEN, Ms. Erica SO, Ms. Minny FUNG, Dr. Barry BIEN, Dr. FU Sau Nga, Dr. Wendy TSUI

3<sup>rd</sup> row: Mr. Roy LEUNG, Ms. Carol PANG, Ms. Katie LAM, Dr. Thomas DAO, Dr. Felix TSUI, Dr. Welchie KO

## **Internal Affairs Committee News**

## **HKCFP Photography Club - Landscape Photography Lecture**

Dear College Fellows and Members,

HKCFP Photography Club is excited to announce that a sharing of landscape photography by Mr. Carlo YUEN will be scheduled on 9 August 2025.

Mr. Carlo YUEN is a Hong Kong photographer who loves photography and focuses on capturing natural scenery and urban landscapes. He is known as a "weather expert" (氣象達人) for his ability to capture the best weather conditions. His award-winning works "Cloud Covered Peaks"(雲蓋高峰) and "Layers of the City" (城市的層次) fully demonstrate his in-depth understanding of Hong Kong's natural environment and his skilled photography skills. These works have not only won him many awards in international photography competitions, but also continue to inspire him to move forward on the road of exploring photography art.









[Photo credits: Mr. Carlo YUEN]

Date

9 August 2025 (Sat)

Time

14:30 -16:00

Venue

: Nikon Hong Kong, Unit 2007, 20/F, Tower 2 Grand Century Place, 193 Prince Edward Rd West, Kowloon, Hong Kong

Speaker

: Mr. Carlo YUEN

HKCFP Photography Club Internal Affairs Committee HKCFP The lecture is generously sponsored by Nikon Hong Kong. Souvenirs will be available on site and the latest Nikon mirrorless cameras and lenses will be available for members to try hands-on at 14:00.

A maximum of 25 participants are welcomed.

Registration will be first come first served. Please scan the QR code to complete the registration.



QR CODE FOR REGISTRATION

Should you have any enquiry, please contact Ms. Windy LAU by email to internal@hkcfp.org.hk or call 2871 8899.

## **Quality Assurance & Accreditation Committee News**

## CME/CPD Compliance 2023-25 Cycle

Dear Colleagues,

Please be reminded that this is the last cycle year for cycle 2023-25, kindly arrange your CME and CPD activities. Your HKCFP CME report can be accessed by the College website at <a href="https://www.hkcfp.org.hk/cme\_mchkcme\_report.aspx">https://www.hkcfp.org.hk/cme\_mchkcme\_report.aspx</a> (Membership login is required)

The committee wishes to highlight that colleagues **must engage in ALL categories of activities** in order to fulfill the **QA Certificate 2023-2025** criteria, briefly summarized as follows:

- (1) A minimum of 90 points in total, including at least 30 CPD points
- (2) A maximum of 45 credit points will be counted for each category of educational activities
- (3) Participants must engage in **ALL** categories of activities
- (4) Maximum points set for Subcategories (3.01, 3.02, 3.03a-c, 3.04, 3.09, 3.10)

For Point (2) and (3) above, the 'categories' are referring to

- i) Category 3, related to CPD activities,
- ii) Category 4, related to activities organized by our College alone, and
- iii) Category 5, related to pre-accredited activities organized by other professional institutions themselves or in collaboration with our College. Examples of this category include accredited educational events by the Hong Kong Medical Association, The Universities, the Hospital Authority, and the Primary Care Office / Department of Health.

To obtain CME Certificate 2025, Members should obtain at least 30 Credit Points in either CME or CPD or both.

In particular, **HKAM Fellows** are required to obtain the minimum of 90 points, including **at least 15 CPD points** in a 3-year cycle (2023-2025).

For Reciprocal Recognition for year **2025**, members should obtain at least 30 Credit Points with no less than 10 CPD points in year 2025.

Please be reminded that **ONLY CPD points** would be accredited, for teaching medical students in Universities.

Another point to highlight is the various ways to gain CPD points. Please refer to the table summarized by QA committee at: https://www.hkcfp.org.hk//upload/Documents/QA/Way%20to%20Obtain%20CPD%20Point%20%282021%20ver%29.pdf

Please see the "Regulations for Award of Quality Assurance 2023-25 (QA)" for more details: http://www.hkcfp.org.hk/pages\_5\_81.html

In particular the committee would like to mention the regulation of Continuous Professional Development (CPD) Logs:

#### Activity:

Self-appraisal activities on lectures, seminars and workshops organized by the **Board of Education of College**. For activities that are applicable for CPD log submission, the following statement "**Up to 2 CPD Points (Subject to Submission of Satisfactory Report of Professional Development Log)**" will be marked in the 'Board of Education News' published in FP links or circulated through bulk email. The log is required to be submitted within one month after the lecture.

#### Journal:

Specific articles published in the HK Practitioner or HK Medical Journal

**HK Practitioner:** Update Article, Original Article, Discussion Paper, Internet

HK Medical Journal: Original Article, Review Article, Medical Practice

('Online First' articles are not included)

The log is required to be submitted within one month after publication.

Late submission of CPD logs would not be accepted. Please be reminded you must fulfill the requirement to obtain CME points, in order to obtain CPD points through activity CPD Log.

Requirements to obtain HKCFP CME for attending online CME events:

- 1) Attend 75% or above of the length of the online session;
- 2) To complete a post event quiz\*, questionnaire OR feedback form set by organizer (\* MCQ/ True or False Question; 50% or above correct answers are required.)

For any enquiry please contact our QA&A Secretariat (Mr. John MA or Ms. Iris IP) at 2871 8899 or email to <a href="mailto:cmecpd@hkcfp.org.hk">cmecpd@hkcfp.org.hk</a> at your convenience.

Yours sincerely,

Dr. LI Yim Chu

Chairlady, Quality Assurance & Accreditation Committee

## **Board of Conjoint Examination News**

## **Report on CCE 2025 Information Seminar for Candidates**

The Information Seminar on CCE segment was held on 15 June 2025. A total of 34 candidates and members from the Board – including the Chairman, Chief Examiner, CCE Coordinator, Deputy CCE Coordinator and secretarial staff attended the seminar.

The seminar started with a warm welcome by Dr. CHAN Hung Chiu (Chairman), who first introduced the concept and expectations of our Conjoint Examination. He then introduced the structure of Written & Clinical (Clinical Competency Exam (CCE)) Examination segments and presented some exam preparatory advice for the candidates' reference. After that, Dr. IP Pang Fei (Chief Examiner) further explained the CCE, presented the concept of competency and how the competency would be assessed in the exam.

Dr. Loretta CHAN (CCE Coordinator) and Dr. FU Sau Nga (Deputy CCE Coordinator) presented sample cases with demonstration videos to illustrate the expected competency performance of candidates in the CCE exam, followed by discussion of the marking criteria. Candidates were invited to express their views and comments.

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

In summary, the afternoon was fruitful for both the participants and board members. It is hoped that the additional information provided to the candidates will help them prepare well for the coming CCE exam.

## **CCE 2025 Information Seminar**



Presentation by Chairman – introduction of the clinical exam (CCE).



Presentation by CCE Coordinator – introduced the Clinical Encounter case of CCE.



Presentation by Deputy CCE Coordinator – introduced the Case Discussion case of CCE.



 $\label{lem:presentation} \textbf{Presentation by Chief Examiner-introduced the CCE competency}.$ 



Interaction with candidates

# HKCFP Family Medicine Boot Camp 2025

To : 2025 Basic Trainees

Date : 6 September 2025 (Saturday)

Time : 1430 to 1600

Venue : The Sage, 3/F, HKAM JC Building,

99 Wong Chuk Hang Road, Aberdeen, Hong Kong

**Organiser: Young Doctors Committee,** 

The Hong Kong College of Family Physicians

Content: 1. Ice-breaking Game

2. Survival Tips for FM trainees

3. Introduction to Mentorship Programme









Register for this exciting event via scanning the QR code before 29 August (Friday)



For enquiry, please contact Ms Nana CHOY or Ms Kathy LAI at 2871 8899 or via email at <a href="mailto:ydc@hkcfp.org.hk">ydc@hkcfp.org.hk</a>.

# HKCFP Trainees Research Fund 2025 / HKCFP Research Seed Fund 2025

The Research Committee of HKCFP is pleased 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\$20,000). 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 HK\$25,000 award will be made to the successful applicant to assist the conduct 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 research project (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: research@hkcfp.org.hk

Please indicate the research funding title e.g. "HKCFP Trainees Research Fund 2025" or "HKCFP Research Seed Fund 2025" on your research project upon submission.

Submission Deadline: 31<sup>th</sup> October 2025

Supported by HKCFP Foundation Fund

## **Membership Committee News**

The Council approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **May – June 2025**:

#### **New Application**

Associate Membership			
Dr. CHAN Ho Lam, Eric	陳	浩	霖
Dr. CHAN Ka Po	陳	嘉	寶
Dr. CHAN Man Hung, Clemens	陳	文	雄
Dr. KAM Tsz Yan	甘	子	
Dr. KWONG Pui Chun, John	12 41	培	/
Dr. LAU Wai Yin		蔚	
Dr. LEE Hung Faat	李	鴻	發
Dr. LEUNG Mo Ching	梁	慕	貞

Dr. MOK Tsz Ngai	莫	子	藝
Dr. TSANG Ho Wa	曾	浩	樺
Non-HKSAR Membership			
Dr. CHAN Tang Yu	陳	騰	宇
Student Membership			
Mr. CHAU Yu Chak	周	餘	澤
Mr. LAU Ho Kai	劉	浩	楷
Ms. TAN Yongying	譚	泳	盈
Mr. WONG Chak Pan	汪	澤	斌

## **Board of Vocational Training and Standards News**

# Reminder: Submission of Application for Certification of Completion of Basic Training

To those who will complete basic training,

You are advised to submit the 'Application Form for the Certification of Completion of Basic Training in Family Medicine' and the **original copy** of your training logbook to BVTS for certification of completion of training within 3 months upon the completion date. If the training logbook is incomplete after review by BVTS, you should complete the training process within 6 months upon the completion date and the completion date of training will only be counted from the time all required documents are handed in to complete the certification and **basic training fee of next year will be charged**.

Basic Training Subcommittee

## Reminder: Application for Recommendation for Exit Examination 2026

To those who prepare to sit for the 2026 Full Exit Examination,

Please submit the application letter and the 'Checklist for Recommendation for Exit Examination' on or before **30 September 2025**. Late applications **WILL NOT** be entertained.

Higher Training Subcommittee

The above information has already been stated in the IMPORTANT NOTICE and the related forms are available at the College website: https://www.hkcfp.org.hk/pages\_9\_95.html

Should you have any inquiries, please contact Ms. Hannah LOK or Ms. Kathy LAI at 2871 8899 or email at BVTS@hkcfp.org.hk.

Board of Vocational Training and Standards

# READERSHIP DRIVE

**Congratulations!** The returns from the following doctors have been selected for June 2025 issue:

Dr. CHEN Tien Chiang, Dr. CHEUK Hiu Ying, Dr. SHIU Wing Ho, Dr. TUNG Po Yin, Dr. YU Yi Fung



need your views about its role as the newsletter of College!







Selected returns would be published in FP Links and gift vouchers would be given as token of appreciation.

You can also access the Google form through the link, in addition to the QR code.

https://forms.gle/KmZwgYpzB3F977Mi8

FP Links also need your support through submissions to our various columns:

Feature / Family Doctors Column / News Corner / The Diary of a Family Doctor / After Hours .

If articles are selected for publication, Options of College Souvenirs or Gift vouchers will also be given as token of appreciation

## LI SHU PUI SYMPOSIUM 2025

# STRATEGIC MANAGEMENT OF A PATIENT WITH A MASS



Date: Sunday, 7 Sept	ember 2025	Time: 08	:50 - 17:00
Venue: Ballroom, JW	<b>Marriott Hotel</b>	Hong Ko	ong & via Webinar

08:50 - 09:00	Welcome		Dr. Walton LI
09:00 - 09:30	Peking Union Medical College Hospital Lecture Strategic Management of Pancreatic Mass		Prof. ZHAO Yu-pei
Symposium 1	Imaging	Chairperson	Dr. Thomas CHENG   Dr. Michael KAM
09:30 - 09:45	Role of Imaging for Abdominal Mass		Dr. John CHAN
09:45 - 10:00	Choice of Imaging for a Breast Lump		Dr. Christine LO
10:00 - 10:15	Advances of PET Scan in Locating Unknown Primary		Dr. Sam WU
10:15 - 10:30	Application of Proton Therapy for Localised Tumour		Dr. Rico LIU
10:30 - 10:40	Discussion		
10:40 - 11:00	Break		
Symposium 2	Medical	Chairperson	Dr. Julia CHAN   Dr. KOU Sio Kei
11:00 - 11:15	Management of a Shadow on X-Ray Chest		Dr. LAM Bing
11:15 - 11:30	Intra-cardiac Mass		Dr. Elaine CHAU
11:30 - 11:45	Management of a Limb Mass		Dr. LAM Ying Lee
11:45 - 12:00	The Pandora's Box of Pelvic Lesion – Role of Pathologists		Dr. Annie CHEUNG
12:00 - 12:10	Discussion		
12:10 - 13:00	Li Shu Pui Lecture Artificial Intelligence in Medical Practice	Chairperson	Dr. Joseph CHAN  Mr. Jason CHIU (CEO, Cherrypicks Ltd & Honorary President, HK Startup Council)
13:00 - 14:00	Lunch		
Symposium 3	Surgical	Chairperson	Dr. LAW Wai Lun   Dr. Ambrose HO
14:00 - 14:15	Diagnosis and Management of Pelvic Mass		Dr. TAM Kar Fai
14:15 – 14:30	Mass in Gastrointestinal Tract – Diagnosis & Therapy		Dr. Anthony TEOH
14:30 - 14:45	Management of Brain Masses		Dr. YU Chung Ping
14:45 – 15:00	Neck Mass - Management Plan		Dr. NG Yiu Wing
15:00 – 15:10	Discussion		
15:10 – 15:40	Royal College of Surgeons of Edinburgh Presidential Le Innovating Diagnosis of a Mass with Multi-omic Liquid		Prof. Paul BRENNAN (Introduction by Dr. William WEI)
15:40 - 16:00	Break		
Symposium 4	GP Forum	Chairperson	Dr. Sara CHAN   Dr. YAU Chun Chung
16:00 - 16:15	Abdominal Mass in a Child		Dr. Godfrey CHAN
16:15 – 16:30	Oral and Jaw Masses: Insights into Soft Tissue and Bony Lesions		Dr. Raymond CHOW
16:30 - 16:45	Skin Nodules		Dr. Johnny CHAN
16:45 - 17:00	Proptosis		Dr. Jasmine NGAI

\*Content is subject to change without prior notice

REGISTRATION IS ON A FIRST COME, FIRST SERVED BASIS

Reserve your place at www.hksh.com/lsp2025

CME Accreditation by Various Colleges Pending | CNE 6 points | CPD (Allied Health) Pending

Registration: 22 July to 25 August 2025 or Once the Quota is Full | For Medical Professionals Only



## AHA Scientific Statement about Alcohol Use and Cardiovascular Disease

American Heart Association (AHA) has recently published a scientific statement on alcohol use and cardiovascular disease. World Health Organization (WHO) has all along made it clear that 'no level of alcohol consumption is safe for health', which is echoed by Canada's guideline. All along the association between heightened health risk with heavy alcohol consumption is quite consistent, but the message is unclear as to the health risks and potential benefits with lower alcohol consumption such as 1 to 2 standard drinks\*/day.

Concerning blood pressure, a meta-analysis of 36 randomized controlled trials (RCTs) shows that drinking >=3 drinks/day would lead to significantly higher systolic BP and diastolic BP compared with less or no drinking. A linear positive association is also found between amount of alcohol and incidence of new-onset hypertension above an intake of 1 drink/day.

For stroke, heavy alcohol use (>4 drinks/day) is a risk factor for all stroke types, whereas the relationship between moderate alcohol consumption (<=2 drinks/day) and ischemic stroke is not conclusive.

Back to the heart, alcohol consumption in heavy amount predisposes the drinker to higher risk of developing atrial fibrillation (AF). It is also known that alcohol quitters appear to have a lower risk of AF than those who continue to drink. However, conclusion cannot be made as to whether low consumption of 1 drink/day on average affects AF risk.

Excessive alcohol for a long time is associated with dilated left ventricle, normal or reduced left ventricular (LV) wall thickness and mass, and heart failure with reduced LV ejection fraction as well. But the exact amount and duration is not clearly understood. Some data suggests ~7 to 15 standard drinks/day over a 5 to 15 year period is associated with decrease in systolic or diastolic ventricular function, while another report states as few as 4 drinks/week is already enough to increase the odds of diastolic dysfunction.

For the risk linked to coronary artery disease (CAD), there is a meta-analysis that suggests low alcohol consumption (<=1 drink/day for woman, <=2 drinks/day for men) has a lower (14%-25%) risk of incident CAD. A weak association was also found between average level of alcohol consumption and reduced CAD risk relative to no alcohol intake in a review of data retrieved from cohort and case-control studies. But in the same review using Mendelian randomization (MR) studies' data, there

is no association found. There is another MR study also showing no to minimal CAD risk rise with low level of consumption (3-6 drinks/week). However, the risk begins to rise at level more than 7 drinks/week (1 drink/day). Binge and heavy episodic drinking may also affect this relationship. Consuming <30g/day (~ 2 drinks/day) doesn't confer a benefit in CAD risk reduction when accompanied by occasional heavy or binge drinking (pooled relative risk was 1.12).

Overall, the certainty of a causal relationship between alcohol use and CAD is still limited due to challenges in the interpretation of the evidence available. It is also strongly affected by the complexity of the variations in study design e.g. how CAD was defined and whether myocardial infarction is included alone or grouped etc. A clinical trial comparing continued drinking and abstention is ongoing to review any potential causal relationship, and hopefully this will shed light on this unknown area.

To conclude with all the evidence reviewed, heavy (generally >=2 drinks/day) and binge alcohol intake causes harm to cardiovascular (CV) health. Reducing and quitting drinking may lower the risk for certain CV problems e.g. hypertension. However, it remains uncertain if low level of consumption (e.g. 1 -2 drinks/day) confers protection and more research is needed to fill in this gap.

- \*1 US. Standard drink (14g alcohol) Examples as follows:
- 12 ounces of regular beer ~5% alcohol by volume (ABV)
- 5 ounces of wine ~12 ABV
- 1.5 ounces of 80-proof liquor (vodka , rum, tequila) -~40% ABV
- 1 ounce of 100-proof liquor ~50% ABV

#### Reference:

Piano, M. R., Marcus, G. M., & Aycock, D. M. (2025). Alcohol use and cardiovascular disease: A scientific statement from the American Heart Association. Circulation. Published 9<sup>th</sup> June 2025 https://doi.org/10.1161/CIR.000000000001341

Compiled by Dr. David CHENG



# **FAMILY DOCTORS COLUMN**

# Case Report: Suspected Domestic Assault Presenting as Forearm Injury in an Elderly Patient

Dr. John-Hugh TAM, Specialist in Family Medicine

#### **Abstract**

A 75-year-old woman presented to a general outpatient clinic (GOPC) with acute left forearm swelling and pain following an alleged assault by her granddaughter. Clinical findings suggested a possible forearm fracture, subsequently confirmed by X-ray at the accident and emergency department. This case highlights the importance of recognising domestic violence in elderly patients, the need for thorough clinical evaluation, and the legal and ethical considerations in managing such cases.

#### **Case Presentation**

A 75-year-old woman, Madam X, of Chinese origin, with no significant past medical history, presented to a local general outpatient clinic on a Sunday morning for an episodic "walk-in" visit with acute left forearm swelling. Her expectation was to "receive oral anti-inflammatory drugs" as home treatment.

Upon further exploration, Madam X reported living with her daughter and 19-year-old granddaughter. She stated that, on the day before the consultation, her granddaughter deliberately struck her left forearm with a broomstick, resulting in acute severe pain, swelling, and functional impairment.

Madam X described the forearm pain as severe, preventing wrist movement, fist clenching, and sleep. Madam X's daughter had volunteered to take over all household chores thereafter due to the debilitating pain. Before presenting to this clinic, Madam X sought treatment from a local bonesetter, who applied a topical herbal paste, which provided no relief. She denied head injury or other bodily injuries.



## **Physical Examination**

Madam X presented as an ambulatory, alert, and oriented individual with a kempt appearance. She had no facial wounds, and her neck was soft. Her pupils were reactive, and she maintained eye contact throughout the examination. Her speech was coherent, and her affect was congruent. She was cooperative during the interaction with the doctor.

The left forearm, initially wrapped in a dressing and covered by herbal paste, revealed significant swelling and possible deformity at the distal ulnar aspect of forearm upon removal. No local external wounds or bleeding were noted, though bruising assessment was obscured by the skin staining from the herbal paste. The affected area was markedly tender, and wrist examination was incomplete due to pain. Examination of the finger movement noted impairment in left 4<sup>th</sup> and 5<sup>th</sup> finger flexion. Distal left wrist and finger temperature were normal, ulnar artery pulse was weakly palpable, with intact sensation distally and capillary refill.

## **Clinical Impression and Management**

The primary impression was a domestic injury with suspected assault, with a distal ulnar fracture as the top differential diagnosis due to deformity and severe symptoms. Given the need for urgent evaluation, Madam X's request "for oral anti-inflammatories" was declined by the attending doctor in the general clinic, and she was referred to the local accident and emergency department (AED) for urgent assessment. Madam X showed willingness to attend AED and was able to travel independently.

Review of subsequent progress confirmed that Madam X attended AED that same morning, where an X-ray confirmed an extra-articular left distal ulnar fracture. She was admitted to the orthopaedics ward for further management. The fracture was treated by orthopaedic surgeons with emergency surgery, namely through open reduction and internal fixation.

Further records shown during admission, the attending orthopaedics team discussed the assault with Madam X, who declined to report the incident to the police. The team also contacted the in-house medical social worker (MSW) to interview Madam X during her admission. The MSW suggested a psychiatric consultation due to Madam

# **FAMILY DOCTORS COLUMN**

X's reported "increased irritability" over the past two years. However, Madam X left the hospital before the psychiatric assessment could be conducted. At the time of the hospital discharge, she was scheduled for follow-up at the orthopaedics outpatient specialist clinic in two weeks to review her fracture.



Caption: Illustration of an ulnar fracture (not an actual clinical photo)

#### **Discussion**

This case underscores the complexity of managing elderly patients presenting with injuries suggestive of domestic violence. Clinically, the presentation of acute swelling, deformity, and severe pain raised immediate concern for a fracture, necessitating urgent imaging and referral to AED.

The decision to forgo Madam X's requested "home remedies" in the outpatient setting was essential, as discharging her without ruling out a fracture could delay definitive care and worsen outcomes. Distal ulnar fractures in the elderly are often associated with significant morbidity, including loss of function, particularly in the context of trauma<sup>1</sup>. Early orthopaedic intervention, as pursued in this case, is critical to optimise recovery.

Furthermore, failure to identify or act on the suspected fracture could have exposed the doctor to liability for negligence, particularly if delayed treatment led to complications such as non-union or chronic pain<sup>1</sup>. In this case, prompt referral mitigated this risk.

The reported mechanism of injury—assault by a family member—raises significant ethical and legal considerations. Elder abuse, defined as the intentional harm or neglect of an older adult, is underreported and requires a high index of suspicion<sup>2</sup>. In this case, Madam X's self-reported history of deliberate trauma inflicted by her granddaughter warranted further exploration. During the handling of the case, careful documentation of the injury history and physical findings, possibly supplemented with clinical photographs for future reference, could enhance the assessment process.

Facing a case like this, clinicians must balance patient autonomy with the duty to protect vulnerable individuals.

While the patient was alert and orientated, her safety at home, particularly with the alleged perpetrator, raises concerns about ongoing risk.

Whether the attending doctor is mandated to report the suspected assault to the police depends on the jurisdiction's laws. In some countries, such as the United States, certain healthcare professionals are designated as mandatory reporters for suspected elder abuse, requiring them to notify authorities (e.g., adult protective services or law enforcement) when there is reasonable suspicion of abuse, neglect, or exploitation<sup>3</sup>.

On the other hand, this case highlights the complexity of managing suspected elder abuse in Hong Kong, where no universal mandatory reporting law exists<sup>5</sup>. The Social Welfare Department's "Procedural Guidelines for Handling Elder Abuse Cases" (Revised 2021) encourage voluntary reporting to Family and Child Protective Services Units or the police, particularly in severe cases like Madam X's, where an assault caused a confirmed fracture<sup>4</sup>. However, the doctor's decision to respect the patient's refusal to report aligns with the guidelines' emphasis on autonomy, provided there is no imminent risk. This legislative approach is like what is currently happening in Australia, where it is also mandatory to report cases of abuse for children but not for elder abuse [Reference 5, paragraph 8.73].

Barriers to reporting, such as fear of family disruption or lack of evidence, as identified in a Hong Kong study of general practitioners<sup>6</sup>, may have influenced this decision. Cultural factors, including multi-generational households and the common Asian societal values of "filial piety" (孝順), may further deter elderly patients from disclosing abuse, underscoring the need for empathetic, culturally sensitive communication<sup>4</sup>.

To enhance future management, clinicians may need to receive training on elder abuse identification, possibly by incorporating elder abuse modules into medical and nursing curricula, as seen in foreign jurisdictions with higher reporting rates<sup>3, 6</sup>. Systemic improvements, such as standardised abuse definitions and multi-disciplinary case conferences, could prevent recurrence and ensure victim safety<sup>3, 4</sup>.

# Further Discussion: What if Madam X Returns to Our General Clinic?

Given Madam X's recent medical history, if she returns to the general clinic, the attending doctor has an ethical duty to discuss her situation again. This task may be challenging but is critical to ensure her future safety.

# **FAMILY DOCTORS COLUMN**

If Madam X is not ready to disclose or pursue action regarding the suspected abuse, the doctor must adopt a sensitive, patient-centred approach. Building trust is paramount, as elderly patients may fear retaliation, family disruption, or loss of independence if abuse is reported. Discussion should <u>aim at framing interventions as family support rather than accusations, to align with Hong Kong's collectivist values.</u> Strategies to assist Madam X include:

- 1. **Empathetic Communication:** Engage Madam X in a non-judgemental manner, acknowledging her distress and validating her experience. For example, the doctor might say, "It sounds like you've been through a difficult situation. I'm here to help you stay safe and get the care you need." This approach encourages openness without pressuring her.
- 2. **Safety Assessment:** Gently explore Madam X's living situation to assess ongoing risk. Questions such as, "Do you feel safe at home?" or "Has anything like this happened before?" can elicit critical information without being confrontational. In this case, Madam X's granddaughter, the alleged perpetrator, lives in the same household, raising concerns about recurrent abuse.
- 3. Referral to Support Services: Offer again to connect Madam X with social workers, counsellors, or elder abuse support services, framing it as additional support rather than an accusation. For example, the doctor could suggest, "There are professionals who can help with challenges at home. Would you be open to speaking with someone?" In Hong Kong, the Social Welfare Department or NGOs like the Hong Kong Family Welfare Society provide such services<sup>4</sup>.
- 4. **Respecting Autonomy:** If Madam X declines intervention, the doctor must respect her autonomy, provided she has decision-making capacity. In this case, she was alert and orientated, suggesting capacity. However, the doctor should document the discussion, any refusal of services, and the rationale for any actions taken to address safety concerns.
- Follow-Up Planning: Offer to arrange follow-up, either in the outpatient clinic or through hospital services, to monitor Madam X's recovery and safety post-discharge.

If Madam X remains resistant but the doctor believes there is imminent risk (e.g., further violence), seeking advice from seniors in the clinic, ethics committee or legal adviser of the corresponding health institute, may be warranted to determine whether breaching confidentiality to report the case is justified under local laws.

## Epilogue (後記)

To ensure safety, the author (also the attending doctor of Madam X) continued to review Madam X's progress. The MSW eventually re-established contact with Madam X and her family. Upon further exploration, Madam X disclosed to the MSW "there were also other episodes of family conflicts and domestic violence in the years prior to this injury", which had required police involvement, all related to her granddaughter's behavioural problems.

Yet this time, Madam X refused to report the issue to the police after thorough discussion with the MSW, citing concerns about disrupting family harmony.

Despite this, the MSW had already warned the granddaughter about the potential criminal liability for assault. Madam X then further requested the social worker's support for counselling for her granddaughter, with the agreement of Madam X's daughter, but this was refused by the granddaughter. The MSW further passed the case to the social workers of the Integrated Family Service Centres (IFSC) for continued management of the family's situation.

#### Conclusion

On a personal level, this case has stayed with me as a reminder of our role as doctors in the community in protecting vulnerable patients. On a general level, it illustrates the importance of a thorough clinical evaluation in elderly patients presenting with traumatic injuries, particularly when domestic violence is suspected. Prompt referral for imaging and specialist care was critical in confirming a distal ulnar fracture and initiating treatment. Clinicians must remain vigilant for signs of elder abuse, ensuring appropriate documentation and referral to safeguarding services to protect vulnerable patients. This case highlights the intersection of medical, ethical, and legal responsibilities in managing complex presentations in primary care.

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## An exciting trip to WONCA Busan!

Dr. G. K. L FONG Family Doctor in Private Practice



The 2025 Asia Pacific WONCA Conference was held in Busan, South Korea. Over 1000 delegates attended from over 40 different countries! Imagine what happens when you get so many Family Doctors and other health professionals in the same room: it's interesting, joyful and exciting all at the same time!



Standing with Officials and colleagues together

It was very kind of The Hong Kong College of Family Physicians to offer scholarships to colleagues to attend such an auspicious occasion. Indeed, as one of those who were sponsored by the College, it was an awesome experience to attend such an important meeting!



World WONCA president, Dr. Karen FLEGG

The current President of WORLD WONCA, Dr. Karen FLEGG, spoke about the importance of Family Medicine to the health of the community and that this form of Primary Care was shown to be costeffective, comprehensive and

most accessible to the community. Indeed, she quoted prominent Hong Kong figures in the health and primary care scene like Dr. Donald LI (a former World WONCA President) and Dr. Margaret CHAN (of the WHO). Quoting Dr. Donald LI: 'There can be no Universal Health Coverage without comprehensive Primary Health Care. And there

cannot be comprehensive Primary Health care without Family Medicine'. Quoting Dr. Margaret CHAN: 'A health system where Primary Care is the back bone, and Family Medicine the bedrock, delivers the best outcomes, at the lowest cost and with the greatest user satisfaction'.

During the conference we experienced rich cultural heritage. Each culture has its amazing diversity and flavour. I was personally encouraged by all the work our colleagues from overseas are doing, and amazed at their ingenuity in the way they did it: often



in resource limited settings, and finding innovative ways to make things work even in the most rural and remote setting. Using AI to understand and predict fracture risk in the Osteoporotic, Go-Pro like cameras on each health professional during a simulated home visit to see how each person felt about their input into the case, how to be a DOC-Fluencer debunking myths like a Youtube influencer but with medical flavour, and what we can do to improve Planetary Health, just to name a few!

In Korea, we were treated with a lot of cultural richness too: with traditional folk dancing with percussion instruments and spinning tops during the opening ceremony, a K-pop star being part of the reception, traditional Korean games to create a sense of joy and laughter and even being treated to classical music by the Korean Medical Philharmonic Orchestra!!

# **WONCA EXPRESS**

What a great time we had at this conference which was situated by the sea, blown gently by the wafting breezes of the seaside and watching the ferries docked by the edge of the venue. Being teleported into another land, another culture and being in the company of such illustrious family physicians was a big thrill for me.

It was very stimulating to hear the progress in Family Medicine in tackling the unique needs in each nation. Even in remote villages, follow up and monitoring of Diabetes was being done through Mobile Phone Apps; after hours on-call telemedicine service was piloted for a resource-limited setting that covered Paediatric emergencies on week-ends and after hours; and the Rise of AI in family medicine were presented.

One workshop that stood out focused on the concern for planetary health. We rotated through multiple stations to discuss how Family Doctors could influence all the planetary health domains. Here, new insights about how to reduce the carbon footprint came out of lively discussion: like how to reduce waste in the clinic, how to reduce unneeded drugs (deprescribing), how to reduce unnecessary clinic visits and tackle over-hospitalization. As we all reflected, many resolutions began to form in our minds, to do our bit to reduce waste and to save the planet.

Did you know that 2027 WONCA Asia Pacific Region is meeting right here in our beautiful Hong Kong? Those who were sponsored by the college invited participants to come to our wonderful city to experience great dim sum and other cool parts of our culture. I'm sure that the organizers for Hong Kong will pull out all the stops to host an even more wonderful meeting, so be sure to come and support this event that will be a blessing to Hong Kong.

Imagine, in 2 years' time, there could be up to several thousand family doctors and other professionals converging on our shores. Wouldn't it be a great time to spend encouraging one another and uplifting our profession to new and lofty heights?! Ah, all heady stuff, but thinking about Hong Kong WONCA APR 2027 is making me really excited! Please come along, and see what all the excitement is all about! Yay! team Hong Kong WONCA APR 2027 go-go-go!!





## WONCA Asia Pacific Regional Conference (APRC) 2025

Dr. SZE Hon-Ho Specialist in Family Medicine



The WONCA Asia Pacific Regional Conference (APRC) 2025 took place in Busan, Korea, from April 24 to 27. It was a comprehensive program encompassing a diverse range of pertinent topics, aiming to deepen understanding and promote advancements in our field. In attending the conference, it enhanced our professional development, expanded networks, and kept us informed about the latest trends and research in the Family Medicine field.

Dr. Karen FLEGG, WONCA World, Australia, gave us a plenary lecture "Family Medicine- Essential to Primary Care Transformation". A holistic approach at the policy level is required in addressing the systemic imbalances between primary healthcare (PHC) and secondary/tertiary healthcare in terms of policy-making, resources, manpower, regulation and outcome monitoring. A coordinated approach at the implementation level is also required to ensure commitment to drive institutional changes and enhance cross-sectoral and interorganisational co-ordination among PHC services in an integrated manner.

I attended a workshop "Diabetes Remission Strategies for Multidisciplinary Teams: A Mission Possible". The primary goal of this workshop was to foster regional collaboration and knowledge exchange on diabetes remission strategies. This session shared reallife cases, and addressed country-specific barriers to diabetes remission across Asia. Dr. Jasmee introduced key tools and methods for diabetes remission, including recent advancements in clinical approaches and lifestyle interventions. This segment also provided

a quick overview of evidence-based tools and guidelines available across Asia.

In the afternoon, I attended the seminar on 'Comprehensive Utilization of Pocket-Sized Ultrasound by Family Physicians: Integrating Physical Examination and Imaging Diagnosis'. This session aimed to provide practical insights into using pocket-sized ultrasound in clinical practice. The speaker demonstrated the skills to enhance the immediacy and accuracy of outpatient care by integrating physical examination with imaging findings, establishing a more efficient and high-quality diagnostic approach. There were 2 topics: Musculoskeletal (MSK) Ultrasound and echocardiography. MSK Ultrasound was used for diagnosis of ligament injuries, periarticular inflammation and nerve blocks. The second part of the seminar was focused on how pocket-sized ultrasound can aid in evaluating heart failure, including decisions on diuretic use and cardiac function assessment.

On day 2, I attended a seminar on 'The Practical Aspects of ACP (Advance Care Planning) in Action'. The objective was the actual communication practices in each country within ACP. Speakers were 3 professional and knowledgeable female doctors: Dr. Shao-Yi CHENG (National Taiwan University, Taiwan), Dr. Machiko INOUE (Hamamatsu University School of Medicine, Japan), and Dr. Sang-Yeon SUH (Dongguk University Ilsan Hospital, Korea). They explored the application of ACP in clinical



# **WONCA EXPRESS**

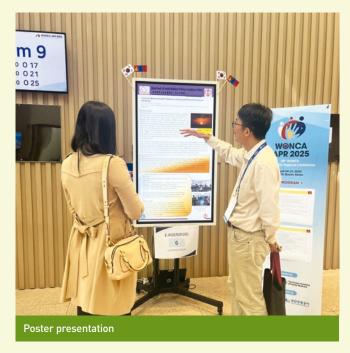
practice, experiences, and communication methods in each of the three countries: Korea, Taiwan, and Japan.

There was a very interesting Clinical Lecture in the afternoon of day 2. The topic 'Mastering Vertigo: The 'Wow-Woow' Rule, Tips & Tricks for Confident Diagnosis and Differentiation' was delivered by Dr. Hiroyuki HAYASHI (University of Fukui, Japan). The key focus is to distinguish the peripheral and central vertigo. Timing and duration of symptoms are more diagnostic. The features of benign paroxysmal positional vertigo (BPPV) are completely resoloved at rest, with subtle diagnostic cues like normal vigor facial expressions. The speaker highlighted the important of Frenzel glasses to identify the nystagmus in case of persistent vertigo. HINTS+ is effective only with horizontal unidirectional nystagmus. In vestibular neuritis, anticipating the head impulse test (HIT) response is critical; the "Wow-Woow rule" highlights transient ocular misalignment upon rapid head movement from the nystagmus side to neutral.

On day 3 afternoon, there was an oral presentation by Prof. Cindy LAM on 'The Long-Term Effect of a Medical-Social Integrated Health Empowerment Program on Behaviour and Quality of Life of Children from Low-Income Families'.

The conference enhanced continuing education and professional development. There were numerous hands-on workshops, panel discussions, and lectures to enhance

the skills and knowledge of physicians. We gained insight into the latest clinical trials and research that may not yet be published in journals. It was a good chance to engage with exhibitors to learn about the latest products and services in the healthcare industry. WONCA enhanced our global perspectives. We can learn about healthcare practices and challenges from different countries and cultures, broadening our understanding of global health issues.





# **WONCA Asia Pacific Region Conference in Busan:**Primary Care Transformation

Dr. Cheryl CHAN Member, YDC, HKCFP; YDM Lead, WONCA

The WONCA Asia Pacific Region conference took place at the Busan Exhibition and Convention Center (BPEX) from April 24-27, 2025, under the theme "Primary Care Transformation: Implementing High-value, High-quality Care." This year, we explored the innovative practices and collaborative efforts shaping family medicine across the region. I was excited to participate in this remarkable event and connect with family doctors from diverse backgrounds.

# Young Doctors Movement Pre-conference Activities

A highlight of the conference was the Young Doctors Movement (YDM) pre-conference held on April 23, 2025. This gathering provided an opportunity for young doctor representatives from each APR country to share and update their activities. After the sessions, participants enjoyed a city walk, visiting the Historical Diorama Observatory. This unique location offered a glimpse into Busan's rich history as a refuge city and maritime hub, juxtaposing the preserved hillside slum areas with the vibrant future vision of the city's North Port redevelopment. The day concluded with a dinner hosted by the Korean Academy of Family Medicine at a traditional Korean restaurant, allowing attendees to savor local culture and cuisine.

### Addressing Healthy Equity

Family medicine is central to advancing health equity in the Asia-Pacific region, addressing complex challenges such as caring for aging populations, rural and remote healthcare disparities, migration, and the impacts of climate change. After the opening remarks, Dr. Viviana MARTINEZ-BIANCHI, President-elect of WONCA, delivered a plenary lecture that explored how family doctors, with their holistic approach to care, can lead efforts to ensure equitable, accessible, high-quality, and sustainable healthcare for individuals, families, and communities across diverse settings.

# Engaging and interactive workshop—learning can be fun!

I was particularly proud to co-organize the "Derma Trivia" workshop, the inaugural event of the WONCA Special Interest Group in Dermatology. This engaging session focused on common skincare product ingredients and treatments for prevalent dermatological conditions, utilizing gamification to enhance learning. With over 40 attendees, the interactive format created an energetic atmosphere, encouraging participants to deepen their knowledge while enjoying the process.



# Adovating exercise and mental well-being for doctors

The Sunrise Run was an exceptional social event to participate at early 7am, we gathered more than a hundred of family doctors jogging together through the picturesque Busan North Port Waterfront Park. Renowned as one of Busan's top walking destinations, this park beautifully blended urban landscapes with serene waterfront views, providing a refreshing environment for both exercise and relaxation. At the end of the run, we created a video together for World Family Doctor Day 2025, emphasizing the importance of mental health—a crucial topic in today's healthcare landscape.

# Looking Forward to WONCA APR 2027 in Hong Kong

Throughout the conference, attendees engaged in workshops and discussions that highlighted the evolving role of family medicine practitioners. Key sessions focused on sustainable practices, mental health strategies, and the importance of collaboration in addressing contemporary healthcare challenges.





I was grateful for the opportunity to share my experiences and insights during the conference, particularly in discussions that emphasized the role of family doctors in promoting health and well-being within their communities. The WONCA APR conference was an enriching experience, fostering connections and inspiring new initiatives in family medicine throughout the Asia Pacific region.



Gamification of learning : we learn about skincare product ingredients via a game



Dinner at Traditional Korean Restaurant, with executive members of the Rajakumar Movement

Looking ahead, I am excited about the upcoming WONCA APR conference in 2027, which will be held in Hong Kong. We look forward to hosting our friends and colleagues from across the region, continuing our journey of collaboration and shared learning in family medicine.



City Walk of Busan Old Town after TRM preconference

## The Diary of a Family Doctor【家庭醫生的日常】

# [尋找自己的樹窿]

冼銘全醫生

63歲女士,和丈夫同住,過來跟進焦慮抑 鬱問題。她每次覆診後都很努力去改變,情 緒亦逐漸改善。

**女士**:「我報告一下先,最近聽你講,學習多啲表達自己,原來講咗出嚟,

內心真係舒暢好多。」

我 : 「妳最近點樣表達自己?」

女士:「我同一個識咗20幾年嘅朋友講返

一啲最近對佢嘅不滿。雖然最後有 少少不歡而散,有啲可惜,但係講 咗出嚟真係舒服咗好多,好似心頭

舊石放低咗一樣。」



### **UNIVERSITY HEALTH SERVICE**

Medical Officer (Ref. 250625003)

The University Health Service (UHS) of The Hong Kong Polytechnic University is a community-based Family Medicine training centre, as accredited by The Hong Kong College of Family Physicians. UHS provides primary health care to students, staff members and their dependants and other eligible members. The University invites applications for the Medical Officer post in UHS. Duties: provide primary health care / health counselling, promote health education and perform administrative duties. Qualifications: registrable with the Medical Council of HKSAR and fluent in spoken English and Cantonese. A higher qualification in Internal Medicine, Emergency Medicine and/or Family Medicine is an advantage. Doctors enrolled in vocational training in Family Medicine are also welcome. Please visit http://www.polyu.edu.hk/uhs/en for more information about UHS. Post specification and online application are available on PolyU's career website (https://jobs.polyu.edu.hk/management). Application closing date: consideration of applications will commence on 16 August 2025 until the position is filled.

PolyU is an equal opportunity employer, dedicated to fostering an environment that embraces diversity and demonstrates inclusion of people from all backgrounds, cultures, identities and experiences where all members of the University are treated with fairness, dignity and respect. To learn more about the University's "Statement on Equal Opportunities, Diversity, and Inclusion", please visit our website at https://www.polyu.edu.hk/hro/equal\_opportunities\_diversity\_and\_inclusion/.

我 : 「有咩令妳以前唔去表達?」

我 : 「妳呢句好有意思。要先處理好自己,然之後先有能力幫助其他 人。」

**女士**: 「係,上次我先生陪我過嚟,先生忍唔住喺你面前講咗話我幾十年操縱佢生命,我聽完叮一聲,原來喺佢心目中我係咁樣,我能唔到。我診住一切都係為佢好,點知原來對佢係一個張为…之後大家坦白啲表達,內變下,感覺都好咗,好勢物你。」

要處理好情緒,很多時候要一併處理家庭關係。太在乎自己,或太在意其他

人問拿己和的兼體受大生,題捏的在角顧察,學的都。好內庭色達人是,問有要自心裏,與感一一。

# The Diary of a Family Doctor 家庭醫生的日常

Submission of articles to The Diary of a Family Doctor with up to 600 words in Chinese or 400 words in English are always welcome.
Options of College Souvenirs or Gift vouchers will be given as token of appreciation if the articles are selected for publication.

Email: FPLinks@hkcfp.org.hk

## **Meeting Highlights**

#### Mental Health Seminar on 21 June 2025

Representatives from New Life Psychiatric Rehabilitation Association, Ms. YIU Yan Yee Cindy, Ms. YEUNG Tsui Yee Gladys, and Ms. CHEUNG Wai Man Candy, delivered a lecture on "The services of Integrated Community Centre for Mental Wellness including clinical psychological service and the peer support service"; Representatives from Baptist Oi Kwan Social Service, Ms LEE Tsz Ying Eunice, Ms. LAM Tsui King Karen and Ms. Kennis, delivered a lecture on "The services of Parents/ Relatives Resources Centre for Carers of Persons in Mental Recovery including the carer peer support service".



Group photos taken on 21 June 2025

## CME Lecture on 4 July 2025

Dr. NG Kim Pong, Kenny, Specialist in Medical Oncology and Dr. TRAN Le Son, Research and Development team leader, Gene Solutions, Vietnam, Medical Genetics Institute, delivered a lecture on "The importance and novel technology in genetic early cancer screening".



Dr. CHUNG Tze Nang, John (left, Moderator) presenting a souvenir to Dr. NG Kim Pong, Kenny (right, Speaker).



Dr. CHUNG Tze Nang, John (left, Moderator) presenting a souvenir to Dr. TRAN Le Son (right, Speaker).

# Ultrasound Workshop on Urology and Management of Common Urological Pathology on 5 July 2025

Dr. Henry CHOW, Associate Consultant, Department of Surgery, Princess Margaret Hospital, delivered a lecture on "Update LUTS/OAB Consensus Paper in the Management of Urological Disease"; Dr. CHAN Kin Wai, Consultant, Department of Family Medicine and Primary Health Care, Kowloon West Cluster, Hospital Authority, delivered a lecture on "Collaboration Model Between Primary & Secondary Care in Urological Disease Management"; Dr. CHAN Yun Sang,

Samson, Consultant, Department of Surgery, Tuen Mun Hospital, delivered a lecture on "Essential Guide to Ultrasound in Urology for Family Physician" and Dr. MA Wai Kit, Consultant Urologist, Hong Kong Urology Clinic; Honorary Clinical Associate Professor, Department of Surgery, The University of Hong Kong, delivered a lecture on "Red Flags and White Flags: When Should/ Shouldn't a Family Physician refer to the Urologist".



From left to right

Dr. TSE Sut Yee (Moderator), Dr. LEE Sum (Tutor), Dr. CHAN Kin Wai (Speaker), Dr. CHAN Yun Sang, Samson (Speaker), Dr. Henry CHOW (Speaker), Dr. MA Wai Kit (Speaker), Dr. LO Ting Kit (Tutor) and Dr. CHAN Chung Yuk, Alvin (Tutor)

# **BOARD OF EDUCATION NEWS**







## Certificate Course on Bringing Better Health to Our Community 2025

Co-organized with

Queen Elizabeth Hospital, The Hong Kong College of Family Physicians and The Hong Kong Medical Association

Dates : 30 August 2025, 27 September 2025, 25 October 2025, 29 November 2025

Time : 1:00pm - 2:00pm Light Refreshment

2:00pm - 4:00 pm Lecture & Discussion

Venue : Lecture Theatre, G/F, Block M, Queen Elizabeth Hospital

Course Fee : Free
Accreditation : pending

Certification : Certificate will be awarded to participants who have fulfilled the attendance requirement for 3 sessions or more

#### Programme Schedule

Dates	Time	Topics	Speakers
August   2025 4:0	2:00	Update on Management of DM and Obesity	<b>Dr. Annette Ka Yee CHAN</b> Associate Consultant, Department of Medicine, Endocrine Team, Queen Elizabeth Hospital
	4:00 pm	Women's Health Service	<b>Dr. Susanna Lok Lam HUNG</b> Associate Consultant, Department of Family Medicine and Primary Health Care, Kowloon Central Cluster
27 September	2:00 Management of Chronic Stable Coronary Artery Disease		<b>Dr. Jake Yin Kei YEUNG</b> Resident Specialist, Department of Medicine, Cardiac Team, Queen Elizabeth Hospital
2025 (Sat)	4:00 pm	How to reduce our risks in primary care - Challenges in interprofessional communication and spotlights of potential risks in primary care setting	<b>Dr. Uzair SIDEK</b> Medicolegal Consultant,  Medical Protection Society
25 October	2:00	Diagnosis and Management of Dementia in Primary Care Setting	<b>Dr. Andrew Chung Ho LEE</b> Resident, Department of Medicine, Geriatrics Team, Queen Elizabeth Hospital
2025 4:0	4:00 pm <b>0</b>	Occupational Therapy - Cognitive Assessment and Management	Ms. Carol Kam Yan HUI Advanced Practice Occupational Therapist, Department of Occupational Therapy, Queen Elizabeth Hospital
29 November	2:00	Management of Hip Pain and Low Back Pain in Primary Care Setting	<b>Dr. Aaran Heng Chi LEUNG</b> Associate Consultant, Department of Orthopaedics & Traumatology, Queen Elizabeth Hospital
		Physiotherapy - Hip Pain and Low Back Pain	Mr. Ray Tsz Kit CHOW Senior Physiotherapist, Department of Physiotherapy, Queen Elizabeth Hospital

Registration will be first come first served. Please scan the QR code to complete the registration.

For enquiry, please contact Ms. Crocus LAN at 3506-8143

Notes: 1. In case of over-subscription, the organiser reserves the right of final decision to accept registration.

2. Due to copyright issue, please note private recording of the lecture is prohibited.

3. Registration will be closed 3 days prior to the event.





# **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 ensure appropriate dress code to the hotel for the Scientific Meeting.

## **Online Monthly Video Sessions**

Dates and Time	Topics
25 July 2025 (Fri) 2:30 – 3:30 p.m.	"The Essentiality of Heart Rate Control" by Dr. TANG King Fun
29 August 2025 (Fri) 2:30 – 3:30 p.m.	"Diagnosing and Managing Migraine in Primary Care Setting" by Prof. Hans-Christoph DIENER

#### **QR** Codes for registration



#### Accreditation:

1 CME Point HKCFP (Cat. 4.2) 1 CME Point MCHK (pending)

Up to 2 CPD Points (Subject to submission of satisfactory report of Professional Development Log)

\*CME points would be given for self-study at online recorded CME lectures only if participating doctors have not attended the same live CME lectures and completed the relevant quiz.

Admission Fee

: Member Fre

(For all online seminars) Non-m

Non-member HK\$ 100.00 for each session

For non-members, please contact the secretariat for registration details. All fees received are non-refundable nor transferable.

#### Registration Method

: Please register via the registration link to be sent by email later or scan the QR code above. For enquiry about registration, please contact Ms. Minny Fung by email to education@hkcfp.org.hk or call 2871 8899. Thank you.

#### Notes: 0

#### Online Events

- 1. In case of over-subscription, the organiser reserves the right of final decision to accept registration.
- 2. The link to join the webinar **SHOULD NOT** be shared with others as it is unique to each individual who has completed prior enrolment procedures. If additional attendee(s) is/are found using the same unique link to join the webinar with you, all attendees joining the lecture via your unique link would be dismissed. You can only login with one device at a time. CME point(s) would only be given to those on the pre-registration list and attended the lecture.
- 3. Please note you can just attend **ONE** CME activity at a time. If found attending more than one CME activity simultaneously by the CME administrator later, you may NOT be able to receive the CME point(s).
- 4. Members who have attended less than 3/4 of the length of the webinar may not be able to receive CME. Final decision would be subject to the approval of the related Board / Committee.
- 5. Please be reminded to complete and submit the \*MCQs or survey after the session for HKCFP and MCHK CME point(s) accreditation. (\*MCQs/ True or False Question; 50% or above of correct answers are required)
- 6. Please be reminded to check the system requirements beforehand to avoid any connection issues.
- 7. Due to copyright issue, please note private recording of the lecture is prohibited.
- 8. Registration will be closed 3 days prior to the event.

# **BOARD OF EDUCATION NEWS**

# **Structured Education Programmes**

Free for members

HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
Wednesday, 0	6 August 2025		
14:30 - 17:00	Rm 5019, 1/F, Rehab Block, Tuen Mun Hospital	Nutrition in Pregnancy Dr. LIANG Kai Ting	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Approach to Laboratory Results (Radiology) Dr. CHAN Hoi Lam, Letty, Dr. OR Ego	Ms. Emily LAU Tel: 3506 8610
15:30 - 17:30	Seminar Room, Family Medicine Specialist Clinic, 3/F, Li Ka Shing Specialist Clinic (South Wing), PWH	Common Upper Limb MSK Symptom + POCUS Demonstration Dr. CHAN Cheuk Lam, Phoebe, Dr. CHONG Lok Man	Ms. LiLi YUNG Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	Updates in Immunisation / Vaccination Dr. TONG Tin Yan, Emily	Ms. Cherry WONG Tel: 2589 2337
Thursday, 07	August 2025		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Out-patient Clinic	Prevention of Cardiovascular Risk in Familial Hyperlipidemia Cases Dr. SO Kwok Ho, Dr. FAN Siu Wai	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 1	3 August 2025		
14:30 - 17:00	SB1032, 1/F, Special Block, Tuen Mun Hospital	Referral Criteria Principles: Ensuring Comprehensive, Coordinated, and Patient-Centered Care in Family Medicine Dr. FUNG Hoi Yin	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Management of Menopausal Symptoms (Including Traditional and Overseas Remedies) Dr. H0 Han Chung Gary, Dr. NG Yuen Shan	Ms. Emily LAU Tel: 3506 8610
15:30 - 17:30	Seminar Room, Family Medicine Specialist Clinic, 3/F, Li Ka Shing Specialist Clinic (South Wing), PWH	<b>Dementia, Delirium, Depression</b> Dr. WONG Ka Yan, Judy, Dr. YEUNG Yuen Ching, Chloe, Dr. NG Wang Ho, Rex	Ms. LiLi YUNG Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	COPD Management Prof. KWOK Wang Chun	Ms. Cherry WONG Tel: 2589 2337
Thursday, 14	August 2025		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Out-patient Clinic	Update Management of Rheumatologically Disease - SLE , RA , Gout Dr. LAM Ka Wai, Dr. HO Chung Yu	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 2	0 August 2025		
14:30 - 17:00	1/F, Health Education Room, Tin Shui Wai (Tin Yip Road) Community Health Centre	Update Management of Dermatological Disease such as Eczema, Tinea and Psoriasis Dr. LI Ronald Muk Lam	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Adult Emergency in General Practice (Including Advanced Primary Care Life Support) with Case Presentation Dr. WONG Yuet Hei, Jacob, Dr. MAK Hollam, Harry	Ms. Emily LAU Tel: 3506 8610
15:30 - 17:30	Seminar Room, Family Medicine Specialist Clinic, 3/F, Li Ka Shing Specialist Clinic (South Wing), PWH	Cardiovascular Kidney Metabolic Syndrome Dr. TANG Yeung On, Dr. WONG Wing Kwan, Leo, Dr. YUNG Lok Yee, Louise	Ms. LiLi YUNG Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	Handling of Bereavement in Family Medicine Dr. LO Ching On	Ms. Cherry WONG Tel: 2589 2337
Thursday, 21	August 2025		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Out-patient Clinic	Menopause and Hormonal Replacement Therapy Dr. HSU Kwok Fai, Dr. JOR Hon Man	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 2	7 August 2025		
14:30 - 17:00	1/F, Health Education Room, Tin Shui Wai (Tin Yip Road) Community Health Centre	Use of Common Medicines in Pregnancy Dr. CHAN Cheuk Yin	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Common Symptoms in Medicine and Geriatrics (4) (Minor Ailments, eg. Cough, Sore Throat, Vomiting, Diarrhoea) Dr. LAU Tsz Ying Yumi, Dr. CHENG Yee Sum, Summer	Ms. Emily LAU Tel: 3506 8610
15:30 - 17:30	Seminar Room, Family Medicine Specialist Clinic, 3/F, Li Ka Shing Specialist Clinic (South Wing), PWH	Common Symptom Complaints - Dizziness / Headache Dr. FUNG Yan Ning, Elaine	Ms. LiLi YUNG Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	Community Resources for Occupational Safety and Health Dr. FONG Lok Ki, Dr. IP Chung Ho	Ms. Cherry WONG Tel: 2589 2337

# **COLLEGE CALENDAR**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
3:00 – 6:00 p.m. HKCFP Conjoint Examiner Workshop (CCE Segment)	28	29	30 2:30 – 7:00 p.m. Structured Education Programme	31 4:00 – 6:00 p.m. Structured Education Programme 9:00 – 11:00 p.m. Board of Conjoint Examination Meeting	1 Aug	2
3:00 – 6:00 p.m. HKCFP Conjoint Examiner Workshop (CCE Segment)	4	5	6 2:30 – 7:00 p.m. Structured Education Programme	7 4:00 – 6:00 p.m. Structured Education Programme	8	9 2:30 – 5:30 p.m. DFM Consultation Skills Workshop 1
10 3:00 – 6:00 p.m. HKCFP Conjoint Examiner Workshop (CCE Segment)	11	12	13 2:30 – 7:00 p.m. Structured Education Programme	14 4:00 – 6:00 p.m. Structured Education Programme	15	16
9:30 a.m. – 12:30 p.m. HKCFP Conjoint Exam - KFP Segment	18	19	2:30 – 7:00 p.m. Structured Education Programme	21 4:00 – 6:00 p.m. Structured Education Programme 8:30 – 11:30 p.m. HKCFP Council Meeting	22	2:30 – 5:30 p.m. DFM Module III Structured Seminar
9:30 a.m. – 1:00 p.m. HKCFP Conjoint Exam - AKT Segment	25	26	2:30 – 7:00 p.m. Structured Education Programme	4:00 – 6:00 p.m. Structured Education Programme	2:30 – 3:30 p.m. Online Video Session	30 2:00 – 4:00 p.m. Certificate Course on Brining Better Health to Our Community 2025 2:30 – 5:00 p.m. DFM Module IV Clinical Skills Enhancement
31	1 <b>3</b> 9p	2	3 2:30 – 7:00 p.m. Structured Education Programme	4:00 – 6:00 p.m. Structured Education Programme	5 7:00 – 9:00 p.m. Pre Exit Exam Workshop	6 2:30 – 4:00 p.m. HKCFP Family Medicine Boot Camp 2025

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