

# Message from the President

## Time Flies and It Has Almost Come to the End of the Year 2012

This year, the Specialty Board chaired by Dr. Wendy W. S. Tsui and her board members have developed changes in the Clinical Audit and Consultation Skill Assessment segments of the Exit Examination. Trainees can submit either a clinical audit or a research paper this year. The purpose is to encourage our future specialists to develop skills and interest in research. The on-site Consultation Skill Assessment has also been changed to Video-recording Assessment. The aims of these changes are for better assessment of the actual daily practice of candidates.

This is the 26<sup>th</sup> year of our Conjoint Fellowship Examination with the Royal Australian College of General Practitioners (RACGP). I would like to thank the RACGP for the continuing advice and support. I would also like to congratulate the Board of Conjoint Examination chaired by Dr. Chan Hung Chiu and his board members who have run the Examination flawlessly with their hard work, experience and wisdom. On the day of the OSCE, examiners, candidates and staff worked together as a team whole-heartedly for this very important event.

The Board of Education led by Dr. Mary B. L. Kwong and her board members have organized a large number of educational activities with broad varieties. Thanks for their excellent work which represented the commitment of our College on vocational education of medical practitioners.

The Board of Diploma in Family Medicine (DFM) under Dr. Simon C. L. Au and his board members have worked hard to provide an intermediate step to fellowship qualification in Family Medicine and improve standards and quality in the practice of Family Medicine. With the support from the Macau Health Bureau, our DFM course has a record high number of students this year. I would like to express my most sincere gratitude to the DFM team for their hard work and the Macau Health Bureau for their support and promotion of the specialty of Family Medicine.

The new Board of Professional Development and Services (BPDS) was established to organize and develop educational activities for medical and health professionals outside Hong Kong in relation to Family Medicine as well as liaise and coordinate with other boards of the College for co-organizing other activities. Dr. Lau Ho Lim, Chairman of the Board and the board members have worked hard to organize educational activities for colleagues in various parts of China.

There is evidence that countries with more trained generalist family doctors are more likely to have better health outcomes, lower costs and greater patient satisfaction. Not only will financial resources be saved but also the use of advanced technology be highly effective. Primary health care is the best route to universal access, the best way to ensure sustainable improvements in health outcomes, and the best guarantee that access to care will be fair. Prof. Chen Zhu, the Minister of Health of China, and his delegates visited us this year to discuss the development of primary care in mainland China. We were also visited by the Department of Health of the Guangdong Province led by the Deputy Director Mr. Geng Qingshan and his delegates to explore the possibility of organizing training programmes in some selected cities in Guangdong. The growing demand for our Family Medicine education indicated an increasing emphasis on Family Medicine in our country. With increasing common values among us, we should strive to improve the status of Family Medicine and to thrive together.

The Public Education Committee led by Dr. Ngan Po Lun and his committee members have continued to deliver health education to the public through

*(Continued on page 2)*

THE HONG KONG  
COLLEGE OF  
FAMILY PHYSICIANS



# Family Physicians Links



ISSUE 106  
December 2012

## INSIDE THIS ISSUE

- 01-02 Message from the President
- 03 College News
  - 03 CMOD, Membership Committee News, Board of Vocational Training and Standards News
  - 04 Board of Diploma in Family Medicine (DFM) - Lectures
- 05 News Corner: Steroids and Antivirals for Bell's Palsy
- 06 After Hours: My First Europe Marathon
- 07 Learning Points From Board of Education
- 08 Feature: Introduction of Integrated Depression Care
- 10 Board of Education News
- 16 College Calendar

## Message from the President

various channels including regular publications in various newspapers. Dr. Ngan has also led publicity campaigns to promote the concept of family doctor in collaboration with the Primary Care Office of the Department of Health.

The 2<sup>nd</sup> Hong Kong Primary Care Conference (HKPCC) was successfully held on June 2-3, 2012 with the theme "United We Care – Forging Partnerships in Health". There were newly added events and awards including "Best Programme Book Cover Page Design", "Best Clinical Case Presentation" and the team with "Largest Fans Club". The HKPCC 2012 has actualized its role as a fertile platform for all primary healthcare providers to share the latest scientific updates, and participate in academic exchange and hence promoted networking opportunities among the primary care communities.

I am most delighted to learn that many of our trainees are interested in research. Primary care is now a WHO priority with a substantial potential in research and publications. Besides our unique experience in health care, we are also part of China, a nation with an important role in our world's health with emerging primary care. Hong Kong is also part of Southeast Asia, a global microcosm with huge diversity. Primary care research can provide answers to many common clinical questions. I would like to thank Prof. Samuel Y. S. Wong for chairing the Research Committee and he will be retiring from our College Council after AGM.

The Editorial Board under Prof. Samuel Y. S. Wong and his board members, and the FP Links Committee under the Adviser Dr. Wendy W. S. Tsui and Chief Editor Dr. Catherine S. W. Ng have worked hard on the high quality and timely quarterly publication of our journal the Hong Kong Practitioners and the monthly publication of our FP Links, respectively.

The hard work of our secretarial staff led by Miss Erica So, External Affairs Committee under Dr. Gene W. W. Tsoi, Business Manager Dr. Mary B. L. Kwong, House Management, Quality Assurance & Accreditation Committees under Dr. Billy C. F. Chiu, Finance Committee under Dr. Quincy S. M. Yuen, Council Member on Duty System under Dr. Tony C. K. Lee, Web & Computer Committee under Dr. Mark S. H. Chan, Internal Affairs Committee under Dr. David V. K. Chao, and Membership Committee under Dr. Cheung Man Kuen have enabled the smooth and successful daily operation of our College.

Many Council Members have represented our College in various professional committees including Dr. Angus M. W. Chan in the Education Committee of the Hong Kong Academy of Medicine, and Clinical Advisory Group (CAG) of the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings; Dr. Gene W. W. Tsoi in three Task Forces on Conceptual Model and Preventive Protocols, Primary Care Directory, Task Force on Primary Care, and Delivery Models, Working Group on Primary Care, and WONCA International Classification Committee; Dr. Chan Hung Chiu in Working Group on Alcohol and Health, Steering Committee on Prevention and Control of Non-communicable Diseases; Dr. Lau Ho Lim in Task Force on Hong Kong Code of Marketing of Breastmilk Substitutes, Self Learning Kit on Breastfeeding for Medical Professionals, Project Planning Committee, CAG of the Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings, and the University of Hong Kong Health Services Committee; Dr. Billy C. F. Chiu in Subgroup on Professional Development for Primary Care Directory Enrolled Doctors and Dentists; Dr. Tony C. K. Lee in Working Group for Revision of Teaching Kit for the Exercise Prescription Project; Dr. David V. K. Chao in the Scientific Committee of Hong Kong International Cancer Congress; and Dr. Mary B. L. Kwong in the Resuscitation Council of Hong Kong, to name a few.

This year we have Professor Sum-ping Lee, Dean of the Li Ka Shing Faculty of Medicine, The University of Hong Kong, as our Sun Yat Sen Orator on 3<sup>rd</sup> June 2012. Professor Lee examined the direction and the future development of the healthcare system in Hong Kong, in view of the phenomenal speed of technological advances in Medicine, cost-effectiveness of newer interventions, increasing expectations from the public and fragmentation of healthcare services. When summarizing his speech, Professor Lee concluded that "Family Medicine must rise to the call, step up to the plate and play the role of the hero in Hong Kong's healthcare reform. We must educate both the public and the medical profession, and bring to focus our disparate and fragmented way of providing care to focus. Family Medicine must position itself to be the foundation of healthcare delivery and healthcare reform in Hong Kong. It must foster a better doctor-patient relationship with the sick; and doctor-doctor relationship within the medical profession. To do so, the College is in a unique position to educate and to generate primary data on healthcare needs and outcomes. The College is also well situated to co-ordinate with academic institutions, government and non-government institutions. This would result in original scientific information from which will mould our own healthcare policy. This would be, in this diverse and metastable milieu, a guiding light for our social transformation. With that vision in mind, the direction and future of healthcare in Hong Kong is positive and bright."

Last but not least, I must thank our Chief Censor Prof. Cindy L. K. Lam, Censors Dr. Stephen K. S. Foo and Prof. Donald K. T. Li, and Immediate Past President Dr. Gene W. W. Tsoi for their invaluable advice and guidance; my Executives Drs. Angus M. W. Chan, Lau Ho Lim, Billy C. F. Chiu, Quincy S. M. Yuen, and all Council Members who shared a lot of the duties and assignments. I have to thank all the secretariat staff under Ms. Erica So for their dedication and hard work.

## "Council Member-On-Duty" (CMOD) System

Dear College members,

We are still providing this alternative channel of communication for you to reach us. Do let us have your ideas and comments so that we can further improve our services to all the members.

From the period 15<sup>th</sup> December 2012 to 14<sup>th</sup> January 2013, Dr. Au Chi Lap and Dr. Mary Kwong will be the Council Members On Duty. Please feel free to make use of this channel to voice your doubts, concerns, queries, and comments about anything relating to our College and Family Medicine. You can reach us by contacting our College Secretariat by phone: 2528 6618, by fax: 2866 0616, or by email: [hkcfp@hkcfp.org.hk](mailto:hkcfp@hkcfp.org.hk). Once we receive your call or message, we will get in touch with you directly as soon as we can.

Dr. Tony C. K. Lee  
Co-ordinator, CMOD System



Dr. Au Chi Lap



Dr. Mary Kwong

## Membership Committee News

The Membership Committee approved, on recommendation of the Chairlady of the Membership Committee, the following resignation application for membership in **November 2012** :

### Resignation from Associate Membership

Dr. Tse Mei Kuen, Queenie

謝美娟

## Board of Vocational Training and Standards News

### Reminder: Submission of Annual Checklist for Basic Training

To all Basic Trainees,

Please be reminded that **all** basic trainees must submit the annual checklist to the Board of Vocational Training and Standards either by registered post **or** in-person **on or before 31<sup>st</sup> January 2013 (Thursday)**. Late submission will not be accepted.

The training experience of 2012 **WILL NOT** be accredited if the trainee fails to submit the checklist on or before the deadline.

Basic Training Subcommittee  
BVTS

### Reminder: Enrolment of Higher Training

Basic trainees who have completed 4-year basic vocational training and attained a higher qualification in Family Medicine can be enrolled into the higher training programme.

For those who prepare to sit for the Exit Examination in **2015**, please submit the application for higher training **on or before 28<sup>th</sup> February 2013 (Thursday)** in order to meet the requirement for sitting Exit Examination. The application form can be available from the College Secretariat or downloaded from the College website.

Higher Training Subcommittee  
BVTS

### Reminder: Submission of Annual Checklist / Logbook for Completion of Higher Training

To all Higher Trainees,

Please be reminded that **all** higher trainees should submit the original copy of annual checklist to our Board **either by registered post or in-person on or before 28<sup>th</sup> February 2013 (Thursday)**. Late submission will not be accepted.

For the application for certification of completion of higher training, please make sure that the application form and checklist for completion of higher training are completed and returned together with the original copy of your training logbook **on or before 28<sup>th</sup> February 2013**.

The training experience of 2012 **WILL NOT** be counted if the trainee fails to submit the checklist before the deadline.

Higher Training Subcommittee  
BVTS

## Board of Diploma in Family Medicine (DFM) - Lectures

### Topics and Speakers :

Dates	Topics	Speakers
5 Jan 2013 (Sat)	Module III – Evidence-based Medicine	Dr. Wong Chi Kwong, Roger
12 Jan 2013 (Sat)	Module III – Critical Appraisal	Dr. Lau Kin Sang, Kinson

**Co-ordinator :** Dr. Au-yeung Shiu Hing

*Board Member, The Board of Diploma in Family Medicine, HKCFP*

**Venue :** Council Chamber, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong

**Time :** 2:30 p.m. – 5:00 p.m. Lecture and Discussion

**Accreditation :** 3 CME Points HKCFP (Category 4.4)  
3 CME Points MCHK

**Registration Fee** (Please tick as appropriate):

Dates	Topics	HKCFP Member	Non-member
5 Jan 2013 (Sat)	Module III – Evidence-based Medicine	<input type="checkbox"/> HK\$200	<input type="checkbox"/> HK\$400
12 Jan 2013 (Sat)	Module III – Critical Appraisal	<input type="checkbox"/> HK\$200	<input type="checkbox"/> HK\$400

**Capacity :** 20 Doctors

**Registration :** Registration will be first come first served. For registration or enquiries, please call the College secretariat, Mr. John Lee at 2861 0220. All cheques are payable to "HKCFP Holdings and Development Limited". Please mail the cheque to Rm 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai. All fees received are non-refundable and non-transferable.

To : HKCFP, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong.  
(Fax: 2866 0981)

Dear Sir/ Madam,

I am a \*Member/ Non-Member of the Hong Kong College of Family Physicians. (\*Please delete as appropriate)

I would like to attend the lecture(s) of **Module III** at Council Chamber, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong.

**Name :** \_\_\_\_\_

**Tel No. :** \_\_\_\_\_

**Email :** \_\_\_\_\_

**Date :** \_\_\_\_\_



## Steroids and Antivirals for Bell's Palsy

Bell's palsy occurs in 0.2% of the population in the Western world with geographical variations, approximating to a lifetime risk of 1 in 65. The incidence is slightly higher in persons of Japanese descent.<sup>1</sup> It mostly occurs in females in their teens and twenties. The distribution is almost equal in the thirties, with a slight predominance in males over 40. The incidence is highest in persons aged 15-45 years of age. It affects both sexes equally overall.<sup>2</sup>

It was first reported by Nicolas A Friedrich two centuries ago in 1798. Sir Charles Bell originally described this condition in 1821. The term Bell's palsy is used to describe an acute-onset, idiopathic facial paralysis resulting from a dysfunction anywhere along the peripheral part of the facial nerve from the level of the pons distally.

The updated guideline, developed by the American Academy of Neurology (AAN) Guideline Development Subcommittee and published online on 7<sup>th</sup> November 2012, is based on a review of relevant studies published since the 2001 AAN Practice Parameter regarding the effectiveness, safety, and tolerability of steroids and antiviral agents for Bell's palsy.

It is a Level A recommendation for steroid prescription - with the two Class I studies demonstrating a significant increase in the probability of complete recovery in patients randomized to steroids, with a risk difference favouring steroids in the range 12.8% to 15%, translating to a number needed to treat (NNT) of six to eight.

However, it does not necessarily follow that "all patients" need steroids. For example, it would be reasonable for a clinician to opt not to use steroids in a patient with brittle diabetes mellitus. Other comorbidities potentially requiring further consideration include morbid obesity, osteopenia, and a prior history of steroid intolerance.

On the other hand, the evidence for efficacy of antivirals in new-onset Bell's palsy remains less clear. The updated guideline concludes that antiviral agents in combination with steroids do not increase the probability of functional recovery of the facial muscles by more than 7%. However, because of the possibility of a modest increase in recovery, patients might be offered antivirals (in addition to steroids) (Level C). Patients offered antivirals should be counselled that the benefit from antivirals has not been established, and its benefit, if any, is at most modest.

Because the studies included only patients presenting early after the onset of palsy, it is difficult to determine the effect of steroid or antiviral treatment in patients presenting later in the course of their illness (e.g. one week after the onset of facial weakness).

Finally, future large randomized trials comparing outcomes in patients receiving steroids with or without antivirals would help determine whether adding antivirals results in further additional benefits.<sup>3</sup>

### References

1. D Doshi and M Saab. Bell's palsy in children: is there any role of steroid or acyclovir?; *Hong Kong j.emerg.med.* 2007;14:233-236
2. Garg KN, Gupta K, Singh S, Chaudhary S. Bell's Palsy : Aetiology, Classification, Differential Diagnosis and Treatment Consideration : A Review; *www.journalofdentofacialsciences.com*, 2012; 1(1): 1-8
3. Gary S. Gronseth and Remia Paduga. Evidence-based guideline update: Steroids and antivirals for Bell palsy : Report of the Guideline Development Subcommittee of the American Academy of Neurology, *Neurology*; 2012;79:1-5

Compiled by Dr. SZE, Hon Ho

# MY FIRST EUROPE MARATHON

Dr, Chan Shan Ching  
Resident, United Christian Hospital



AT THE FINISH LINE

I started running the marathon in 2005 when my clinic colleagues asked me to join the Standard Chartered Marathon. After a few years, I enjoyed running the marathon more and more. Through training for a marathon, not only could one develop a strong body but also a tough mind. One of my wishes is to run in different places around the world. My target is to qualify for the Boston Marathon (one of the five races that make up the World Marathon Majors), which requires me to fulfill a qualifying time to enroll. My ultimate target is running a marathon under 3 hours (sub-three).

For this round, I chose a beautiful city in Russia, Saint Petersburg as the place for my first Europe marathon. My basic target was to

run within 3:10:00 (the qualifying time of the Boston Marathon for my age group). I trained myself for this marathon for three months in total through a structured programme from a professional book called 'the Advanced Marathonning'. Through this training, I became strong both physically and mentally.

The weather was good on the race day with a temperature below 20 degree Celsius and a cloudy sky. The race course was completely flat. With a structured training, good weather and a flat course, I finally finished this race in 3:04:14. I broke my personal best record and fulfilled the qualifying time for the Boston Marathon.

To me, a fruitful result after a period of hard training is worthwhile. And I enjoy running a lot more after this race.



PRE-RACE PASTA PARTY

*"Submissions of articles to After Hours with up to 500 words are always welcome. Gift vouchers will be given as a token of appreciation if the articles are selected for publication. Email: carmen@hkcfp.org.hk"*

## Interest Group in Dermatology – The 33<sup>rd</sup> Meeting on 3<sup>rd</sup> November 2012

Dr. Wong Nai Ming (Co-ordinator) – Board of Education

**Theme** : **Skin Infection**  
**Speaker** : Dr. Chan Shu Yu  
Dermatologist in Private Practice  
**Moderator** : Dr. Wong Nai Ming  
Co-ordinator, Board of Education

Dr. Chan Shu Yu, a Dermatologist in private practice, spoke to us on Skin Infection.

### Learning points

Impetigo is caused by bacterial infection of the superficial layers of epidermis, usually by staphylococcus or streptococcus. Besides superficial skin changes like redness/oedema/tenderness, blisters may form which could break easily, discharging golden yellow exudates and dried to form yellow crusts. The infection is highly contagious and rapidly spreads. It is common in children, especially involving the areas surrounding the orifices of face, affecting both normal and abnormal skin (e.g. impetiginisation of herpes infection). There will be no scarring if effectively treated by antibiotics.

In Erysipelas and Cellulitis the infection involves deeper level of dermis and subcutaneous tissue, there is no desquamation of the superficial skin. Aggressive treatment with systemic antibiotics is necessary to avoid damage of the subcutaneous lymphatics which may lead to recurrences.

Syphilis is a great imitator of other skin conditions. Primary syphilis occurs at the site of contact after an incubation period of 9 to 90 days as Chancre which is a painless ulcer with an indurated base, and the neighbouring lymph nodes may be enlarged. Blood tests in the primary stage may be negative. 6 to 8 weeks after the primary lesion, syphilis enters into the secondary stage where there may be systemic symptoms affecting other body systems. The skin lesions may present with patchy alopecia of scalp, and generalized, non-itchy, symmetrical maculopapular rash with or without desquamation, affecting mainly the trunk but also the palms and soles in particular. Blood tests at this stage are usually positive. Differential diagnoses at this stage include pityriasis rosea, pityriasis versicolor, guttate psoriasis etc. In treatment of syphilis with penicillin, Jarisch-Herxheimer reaction may develop, especially in those with high VDRL titre.

A wart is a rough-surfaced growth arising from skin, usually with its diameter greater than its height. It can be congenital or acquired. Acquired warts can be benign or malignant and benign warts can be infectious or non-infectious. Infectious warts are usually caused by human papilloma virus (HPV) infection.

The layman term "chicken-eye" (雞眼) can mean a viral wart or a corn (or callosity). It can be distinguished after pairing down the hard core when corn will show a smooth surface while a wart will show red or black spots representing the feeding small blood vessels.

Viral warts can occur in different parts of the body. Periungual warts are notoriously difficult to treat. Subungual warts can be painful. Plane warts usually affect younger individuals. Warts can also affect mucosal surfaces and scalp.

When treating viral warts, patients should always be given the option of NO treatment, in fact some warts can involute by themselves. After treatment, patient should always be warned that other warts (even belonging to the same episode of infection) may develop later.

HPV infection can cause genital viral warts (condyloma acuminata) through sexual exposure at the sites of contact. In doubtful cases, acetic acid test can aid diagnosis. By applying 5% acetic acid, the lesions may turn white after a short period of skin occlusion.

Herpes usually present as a group of blisters. It can be infectious e.g. herpes simplex type I/II, herpes zoster and can also be non-infectious e.g. dermatitis herpetiformis, herpes gestationis. Herpes infection can usually be diagnosed clinically. However, sometimes viral culture/DNA study may be required to differentiate herpes simplex from herpes zoster infection.

Scabies infection are acquired after prolonged physical contacts, and short contacts are unlikely to cause transmission. Pruritus starts 2 to 6 weeks after infestation. Successful treatment should significantly reduce pruritus within one day. Nowadays, the treatment of choice is 5% permethrin solution, applied once and washed off after 8 to 14 hours. Patients may develop inflammatory juicy nodules e.g. at scrotum. This is due to sensitization to the scabies mite and there should be no scabies within the nodules. Even after successful treatment with scabicial agents, the nodules may persist for a few more weeks to months.

### Next meeting

The next meeting will be on Saturday, 5 January 2013. The guest speaker is Dr. Luk Nai Ming, Specialist in Dermatology and Director of the Dermatology Research Centre, CUHK. He will speak to us on Antibiotic Resistance in *P. Acnes*.

All members are welcome and encouraged to present their cases and problems for discussions or role play. Please send your cases to our secretariat ([yvonne@hkcfp.org.hk](mailto:yvonne@hkcfp.org.hk)) 2 weeks before the date of presentation.



(from left to right) Dr. Chan Shu Yu (the speaker) and Dr. Wong Nai Ming (the moderator)



## Introduction of Integrated Depression Care

Dr. Chan Man Li

Associate Consultant, Department of Family Medicine and Primary Health Care, New Territories West Cluster

### Introduction

Patients with common mental disorders (CMD) are common in our community. It is estimated that prevalence of depressive disorder in adults is around 5-20% from local study.

Improving Mood: Promoting Access to Collaborative Treatment (IMPACT) is a multisite primary care trial of collaborative and stepped care for depression that integrates brief psychotherapy and medication management.

### IMPACT Treatment Protocol

1. Assessment and Education
2. Behavioral Activation / Pleasant Events Scheduling AND
3. a) Antidepressant Medication  
Usually an SSRI or other newer antidepressant  
OR  
b) Problem-Solving Treatment in Primary Care (PST-PC)  
6-8 individual sessions followed by monthly group maintenance sessions
4. Maintenance and Relapse Prevention Plan for patients in remission

### Stepped Care

Systematic follow-up & outcomes tracking

- Patient Health Questionnaire (PHQ-9)

Treatment adjustment as needed

- Based on clinical outcomes
- According to evidence-based algorithm
- In consultation with team psychiatrist

Relapse Prevention

Patient Health Questionnaire (PHQ-9) 病人健康狀況問卷-9				
1. 在過去的兩個星期，您是否經常被以下問題煩擾著？	完全沒有	有幾天	過半數的日子	差不多每天
	0	1	2	3
a. 任何事都覺得沉悶或者根本不想做任何事	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 情緒低落、抑鬱或絕望	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. 難於入睡；半夜會醒或相反地睡覺時間過多	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. 覺得疲倦或活力不足	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. 胃口極差或進食過量	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. 不喜歡自己，覺得自己做得不好、對自己失望或有負家人期望	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. 難於集中精神做事，例如看報紙或看電視	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. 其他人反映你行動或說話遲緩；或者相反地，你比平常活動更多坐立不安、停不下來	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. 想到自己最好去死或者自殘	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. 如果你剔選出以上任何問題，這些問題對你的工作、處理家中事務或與人相處時來說有多少困難？	完全沒有困難 <input type="checkbox"/>	有些困難 <input type="checkbox"/>	很困難 <input type="checkbox"/>	極度困難 <input type="checkbox"/>

### Collaborative Care

Patient can choose treatment in consultation with health care(s):

- Antidepressant and / or brief psychotherapy

The team comprises Primary Care Provider (PCP)

(Refers; prescribes antidepressants)

- + Depression Care Manager
- + Consulting Psychiatrist

### Primary Care Provider

- Oversees all aspects of patient's care at the primary care clinic
- Makes / confirms diagnoses of common mental disorders with the use of PHQ-9 for depression
- Starts pharmacotherapy as indicated
- Prescribes for medications if clinically indicated
- Introduces collaborative care team and care manager
- Works closely with the care manager and other team members to stay informed about treatment progress and to make treatment adjustments if clinically indicated
- Supports patient in working with care manager
- Consults with the team psychiatrist on difficult diagnostic or therapeutic issues
- Adjusts treatment as clinically indicated in consultation with the patient, care manager, and consulting psychiatrist

### Care Manager

- Supports and collaborates closely with PCPs in patient management
- Facilitates patient engagement and education
- Performs systematic initial and follow-up assessments. Tracks depression symptoms and treatment response (PHQ-9)
- Supports medication management by PCPs
- Provides brief, evidence-based counseling (e.g. behavioral activation and / or PST-PC) or refers to other clinic-based providers for such counseling services
- Regularly reviews challenging patients with the consulting psychiatrist



Attentive listening by primary care provider



- Facilitates referrals to other services (e.g. substance abuse treatment, specialty care and community resources) as needed
- Prepares patient for relapse prevention

### Consulting Psychiatrist

- Supports care managers and PCPs
- Provides regular (weekly) and as needed consultation for a caseload of patients followed in primary care, focusing on patients who are not improving clinically
- In person or telemedicine consultation or referral for complex patients
- Provides education and training for primary care-based providers

### What is Problem-Solving Treatment in Primary Care (PST-PC)?

- Problem-Solving Treatment is an action focused on immediate issues causing depression
- It is not Life Review Therapy, Psychodynamic Analysis or \*JUST\* supportive therapy / case management
- It is Brief, Common sense, Evidence-based, Practical to apply, Easily Learned by therapist and patient, enjoys high patient receptiveness and satisfaction
- Three Broad Goals of PST-PC:
  - A. Helps the client understand the link between current life problems and current symptoms
  - B. Develop a systematic problem solving strategy
  - C. Engage in pleasant social and physical activities

### Seven Steps of PST-PC

1. Clarify and Define the Problem
2. Set Realistic / Achievable Goal
3. Generate Multiple Solutions
4. Evaluate and Compare Solutions
5. Select a Feasible Solution
6. Implement the Solution
7. Evaluate the Outcome [if a new problem comes out, go back to step 1]

### PST-PC Session 1 (60 Minutes)

Three Main Goals:

- A. Build the Rationale for PST-PC (15 minutes)
- B. Collect an Initial Problem List (15 minutes)
- C. Conduct an Initial PST-PC Session (30 minutes)

#### A. Building Rationale for PST-PC (First 15 Minutes)

Six Main Tasks:

1. Explain the Structure of PST-PC
2. Achieve Agreement with the Patient that Symptoms are Related to Depression
3. Explain the Link Between Problems and Depression, and the Rationale for PST
4. Establish Positive Problem Orientation
5. Describe the 7 stages of PST-PC
6. Build the Rationale for Activity Scheduling

#### B. Compile a List of Current Problems (15 Minutes)

- Stay focused on the present  
“What problems are you facing right now?”
- Allow spontaneous reporting
- Cue patient as necessary regarding:
  - Relationships, Work, Money
  - Housing and Transportation
  - Health and Exercise
  - Pleasant Activities, etc

#### C. PST-PC Session (30 Minutes)

1. Clarifying and defining the problem
2. Establishing a realistic goal
3. Generating multiple solutions
4. Evaluate pros and cons
5. Choosing the preferred solution(s)
6. Implementing the preferred solution(s)
7. Evaluating the outcome

#### Structure of PST-PC Treatment

- Four to eight sessions [majority 4 sessions]
- Can be weekly or bi-weekly
- Initial session: 1 hour
- Subsequent sessions: 30 minutes
- Work through at least one full problem per session
- Let patient to action between sessions

#### Conclusion

IMPACT can be adapted and is effective in a wide range of health care settings

Effective teamwork is key to success

- Different professionals (nurses, social workers, psychologists, licensed counselors, and medical assistants) can be trained to support primary care providers with evidence-based care management
- Psychiatric consultation provides important back-up to primary care based care management programs

#### Reference

Evidence-Based Models of Integrated Management of Depression in Primary Care by Thomas E. Oxman, Psychiatric Clinics of North America 28(2005) 1061-1077.



Smiling face at your healing hand

## Written Enhancement Training 2013

- Organizer** : Written Enhancement Training Sub-committee, Board of Education, HKCFP
- Tutors** : Family Medicine Specialists, Fellows of HKCFP and RACGP
- Supervisors** : Dr. Kwong Bi Lok, Mary;  
Dr. Chan Chi Wai, Edmond &  
Dr. Lee Kar Yun, Peter
- Co-ordinator** : Dr. Tam Chung Yin, Janet
- Objectives** : 1. To enhance the clinical knowledge and problem solving skills through different workshops.  
2. To improve the preparation skills for written examination.  
3. To provide opportunity for inter-professional communication and social network expansion through self help groups.  
4. To improve time management through simulated practice workshop.
- Venue** : 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai

## Written Enhancement Training 2013

Dates	Topics	Speakers	Moderators
26 Jan, 2013 (Sat) 2:30 – 4:30 p.m.	<b>Introduction on Key Features with sample practice questions</b>	Dr. Leung To Fung, Andrew	Dr. Lee Kar Yun, Peter
2 Mar, 2013 (Sat) 2:30 – 4:30 p.m.	<b>Introduction on MCQ with sample practice questions</b>	Dr. Ng Ching Luen	Dr. Tam Chung Yin, Janet

- Accreditation** : Up to 4 CME points (Category 4.3) for the whole course
- Enrolment** : Enrolment is now open. Please call the College Secretariat, Ms. Yvonne Lam, at 2861 0220 for details. Successful applicants will be informed later.
- Course Fee** : Members : HK\$1,200 (Whole Written Enhancement Training)  
HK\$ 500 (Spot admission for each workshop)
- Non-Members : HK\$ 2,400 (Whole Written Enhancement Training)  
HK\$ 900 (Spot admission for each workshop)
- All cheques payable to "HKCFP Education Ltd".  
(All Fees received are non-refundable and non-transferable.)
- Capacity** : 30 doctors maximum
- Disclaimer** : All cases and answers are suggested by our tutors only. They are not standard answers for examination.
- Registration will be first come first served. For any enquiry, please call the College secretariat, Ms. Yvonne Lam at 2861 0220.

## REPLY SLIP

To: HKCFP, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, H.K.

I am a \***Member/ Non-member** of The Hong Kong College of Family Physicians. (\*Please delete as appropriate)

I would like to attend "Written Enhancement Training Course 2013".

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

## HKCFP Practice Management Training Course – Part B: Practical Part: Practice Management Attachment Course in Private Sector

### Introduction:

Practice management is very important to all practicing doctors irrespective of whether you are practicing in the public or the private setting. It is one of the quality assurance accredited items and is an area to assess the competence of a family medicine specialist. Possession of good practice management knowledge and skills can prevent foreseeable medical and legal risks and facilitate daily clinical operation more effectively and efficiently. The clinical attachment in private practice is aimed at sharing hands-on experience in practice management within the private setting in which the majority of primary health care is provided in our locality.

### Learning Objectives:

Family Medicine doctors undergoing this attachment are expected to gain exposures in the following:

- Patient consultations conducted by private family physicians in
  - Private clinic settings in the community
- The disease spectrum in private primary care setting
  - The challenges in management, including the use of medications, surgery tests and investigations
- Rapport among patients and private family physicians
- Common practical procedures in private practice
- Setting up a private practice
- Daily operation of a practice
- Clinic drug store organization
- Drug dispensing procedures
- Patient record systems
- Patient registration systems
- Staff management
- Community networking of private family physicians
- Experience sharing from private family physicians

### Target Group:

- 1) Doctors who have attended the HKCFP training certificate course of practice management OR
- 2) Family Medicine higher trainees

**Venue** : Private Family Medicine clinics

**Date** : From March 2013 to Feb 2014

**Time** : To be arranged by the HKCFP secretariat and mutually agreed by the Practice Management Advisor and the participating doctor.

**Duration** : Two clinic visits and each visit lasts for 3 hours per participating doctor

### Pre-requisite Qualification of Practice Management Advisors:

FHKAM (Family Medicine) AND currently practicing in private sector.

**Course fees** : HK\$2,700 **All fees received are non-refundable and non-transferable.**

**Deadline of Application** : 25 Jan 2013

**Award** : The participating doctor will be issued a certificate by the Board of Education, HKCFP

## Practice Management Training Course Part B APPLICATION FORM

Name: \_\_\_\_\_  
Surname (BLOCK LETTERS)                      Given Name                      Name in Chinese

Sex: M / F

Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_

Mobile: \_\_\_\_\_ Office Telephone: \_\_\_\_\_

Contact Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Membership: HKCFP member: Fellow / Full / Associate / Affiliate    Member ID: \_\_\_\_\_ - \_\_\_\_\_

Current Practice:

**Private: Solo**                       **Group**                       **Years in practice** \_\_\_\_\_

Government: HA                       Department of Health                       Years in service \_\_\_\_\_

Other Institutions: Please specify \_\_\_\_\_

NOTES:

**A completed application form must be returned to the Hong Kong College of Family Physicians on or before 25 January 2013 with an application fee of HK\$2,700 by crossed cheque payable to "HKCFP Education Limited". This application fee is non-refundable unless the application is unsuccessful.**

Registration will be first come first served. For registration or any enquiry, please call the College secretariat, Mr. Marco Cheng at 2861 0220. Please mail the cheque to 8/F, Duke of Windsor Social Services Building, 15 Hennessy Road, Wanchai, H.K.



**5 January 2013 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	<b>Antibiotic Resistance in <i>P. Acnes</i> - Does It Matter</b>	
Speaker	<b>Dr. Luk Nai Ming</b> Specialist in Dermatology and Director of the Dermatology Research Centre, CUHK	
Co-ordinator & Chairman	<b>Dr. Wong Nai Ming</b> The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:00 p.m. Lunch	2:00 p.m. – 4:00 p.m. Theme Presentation & Discussion
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong	
Admission Fee	College Fellow, Full or Associate Members	Free
	Other Categories of Members	HK\$ 350.00
	Non-Members	HK\$ 450.00
	All fees received are non-refundable and non-transferable.	
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) 2 CME points MCHK	
Language	Lecture will be conducted in English and Cantonese.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	
Note	<b>Participants are encouraged to present own cases for discussion. Please forward your cases to the Co-ordinator via the College secretariat 2 weeks prior to meeting.</b>	

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

Sponsored by  
**Galderma Hong Kong Limited**

**5 January 2013 Saturday**

## Board of Diploma in Family Medicine Module III

Theme	<b>Evidence-based Medicine</b>	
Speaker	<b>Dr. Wong Chi Kwong, Roger</b>	
Co-ordinator & Chairman	<b>Dr. Au-Yeung Shiu Hing</b> The Hong Kong College of Family Physicians	
Time	2:30 p.m. – 5:00 p.m.	
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong	
Admission Fee	College Fellow, Full, Fee or Associate Members	HK\$ 200.00
	Non-Members	HK\$ 400.00
	All fees received are non-refundable and non-transferable.	
Accreditation	3 CME points HKCFP (Cat. 4.4) 3 CME points MCHK	
Language	Lecture will be conducted in English and Cantonese.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

**12 January 2013 Saturday**

## Board of Diploma in Family Medicine Module III

Theme	<b>Critical Appraisal</b>	
Speaker	<b>Dr. Lau Kin Sang, Kinson</b>	
Co-ordinator & Chairman	<b>Dr. Au-Yeung Shiu Hing</b> The Hong Kong College of Family Physicians	
Time	2:30 p.m. – 5:00 p.m.	
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong	
Admission Fee	College Fellow, Full, Fee or Associate Members	HK\$ 200.00
	Non-Members	HK\$ 400.00
	All fees received are non-refundable and non-transferable.	
Accreditation	3 CME points HKCFP (Cat. 4.4) 3 CME points MCHK	
Language	Lecture will be conducted in English and Cantonese.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

**17 January 2013 Thursday**

## Basic Principles of Electrodiagnosis and Its Application in Patients Complaining of Lower Limb Pain

**Dr. Chow Chi Ping, Alex**  
*Specialist in Rehabilitation,  
Director, Department of Physical Medicine and Rehabilitation,  
Hong Kong Sanatorium & Hospital*

Chairman	<b>Dr. Lee Wan Tsi, Francis</b> The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:00 p.m. Buffet Lunch	2:00 p.m. – 3:30 p.m. Lecture & Discussion
Venue	Shanghai Room, Level 8, Langham Place Hotel, 555 Shanghai Street, Mongkok, Kowloon	
Admission Fee	College Fellow, Full or Associate Members	Free
	Other Categories of Members	HK\$ 350.00
	Non-Members	HK\$ 450.00
	All fees received are non-refundable and non-transferable.	
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)	
Language	Lecture will be conducted in English.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

Sponsored by  
**Pfizer Corporation Hong Kong Ltd**

## 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.

### December's session:

Date	28 December 2012 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	<b>Myofascial Pain Syndrome (2) – Dr. Ngai Ho Yin, Allen</b>
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.

### January's session:

Date	25 January 2013 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topics	<b>1. Understanding Fats: Good VS Bad – Dr. Sylvia Lam</b> <b>2. Therapeutic Strategies to Prevent Diabetic Nephropathy – The ROADMAP Study Is BP &lt; 120/70 mm Hg a Good Control? – Prof. Jan Menne</b>
Admission	Free for Members
Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)
Language	Lecture will be conducted in English.

## 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
<b>12 Jan 2013</b> 2:30 – 4:30 p.m. 2 CME points	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	<b>Updating Breast Problems Management</b> Dr. Chiu Ying Wah SMO OMLH, Department of Surgery	Ms. Clara Tsang Tel: 2354 2440 Fax: 2327 6852

## Structured Education Programmes

Free to members  
HKCFP CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
<b>27 Dec 12 (Thur)</b>			
2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	<b>Personal Data Ordinance</b> Dr. Leung Yuen Kin and Dr. Fan Wing Chi	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Community Resources on Work Stress</b> Dr. Ip Chung Ho	Ms. Eliza Chan Tel: 2468 6813
<b>02 Jan 13 (Wed)</b>			
2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>Family Medicine Training in Hong Kong</b> Dr. Lau Lai Na	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	<b>Consultation Process, Models of Consultation</b> Dr. Ho Pui Gi and Dr. Wan Pui Chu	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Common Urological Conditions, and Discussion</b> Dr. Yiu Ming Kwong	Ms. Man Chan Tel: 2589 2337
<b>03 Jan 13 (Thur)</b>			
2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	<b>Consultation Process, Models of Consultation</b> Dr. Kwong Lok See and Dr. Chung Sze Ting	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>What Makes a Competent Family Physician</b> Dr. Lai Siu Wai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Hyperlipidaemia &amp; Familial Hyperlipidaemia</b> Dr. Choy Yi Chun, Vanessa	Ms. Kwong Tel: 2595 6941

## 09 Jan 13 (Wed)

2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>Counselling in Primary Care Setting</b> Dr. Cheng Chui Ching	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	<b>Journal Club (EBM related)</b> Dr. Chan Kam Sum and Dr. Mok Ka Yee	Ms. Cordy Wong Tel: 3513 3087
5:00 – 7:30 p.m. 3 CME points	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	<b>Psychological Problems in Elderly</b> Dr. Wong Hiu Lap	Ms. Crystal Law Tel: 2632 4021
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Care of Patient with Common Heart Diseases (IHD/AF/CHF) in GOPC Setting</b> Dr. Carol long	Ms. Man Chan Tel: 2589 2337

## 10 Jan 13 (Thur)

2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	<b>Journal Club (EBM related)</b> Dr. Zhu Guixia and Dr. Ng Hoi Ling	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Counselling in Primary Care Setting</b> Dr. Ip Chung Ho	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Approach to Abnormal Results: Immunology</b> Dr. Cheng Long Yee, Eva	Ms. Kwong Tel: 2595 6941

## 16 Jan 13 (Wed)

2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>Healthy Lifestyle</b> Dr. Liu Chung Wo	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	<b>Infections Diseases and Infection Control in Hospital / Community</b> Dr. Luk Wei Kwang <b>Journal Club (Infections Disease / Infection Control Related)</b> Dr. Lo Ka Kit	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Medical Council, MPS and Other Insurances</b> Dr. Tseung Kwan Hang	Ms. Man Chan Tel: 2589 2337

## 17 Jan 13 (Thur)

2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	<b>Infections Diseases and Infection Control in Hospital / Community</b> Dr. Luk Wei Kwang <b>Journal Club (Infections Disease / Infection Control Related)</b> Dr. Tsui Wing Hang	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Health Care Delivery Systems in Switzerland</b> Dr. So Chi Kin	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Introduction to Clinical Psychology Service</b> Dr. Wu Xiao Qing	Ms. Kwong Tel: 2595 6941

## 23 Jan 13 (Wed)

2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>The Red Book: Professional Code &amp; Conduct</b> Dr. Tong Ka Hung	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	<b>Update on Management of Dementia</b> Dr. Wong Sze Kei & Dr. Lo Alvina	Ms. Cordy Wong Tel: 3513 3087
5:00 – 7:30 p.m. 3 CME points	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	<b>Genogram</b> Dr. Lee Sum	Ms. Crystal Law Tel: 2632 4021
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Management of Common Peri-menopausal Problems in OPD Setting</b> Dr. Lai Sum Yin	Ms. Man Chan Tel: 2589 2337

## 24 Jan 13 (Thur)

2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	<b>Update on Management of Dementia</b> Dr. Cheung Yan Kit & Dr. Lee Tin Wai	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Common Medical Legal Issues in Primary Care Setting</b> Dr. Lee Kar Fai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Osteoporosis in Practice</b> Dr. Wan Man Choi	Ms. Kwong Tel: 2595 6941





*The FP Links Editorial Board would like to thank all  
readers, contributors, sponsors and  
the College Secretariat for the tremendous support to  
the FP Links throughout the year.*

*Wishing you all*

*Merry Christmas & Happy New Year*

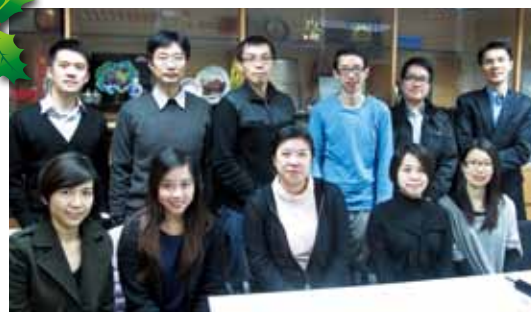
*The FP Links Committee*



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
23 <b>Dec</b>	24	25	26	27 2:15 – 6:00 p.m. Structured Education Programme	28 2:30 – 3:30 p.m. Board of Education - Video Session	29
30	31	1 <b>Jan</b>	2 2:15 – 7:15 p.m. Structured Education Programme	3 2:15 – 7:00 p.m. Structured Education Programme	4	5 1:00 – 4:00 p.m. Interest Group in Dermatology 2:30 – 5:00 p.m. DFM Module III Evidence-based Medicine
6	7	8	9 2:15 – 7:30 p.m. Structured Education Programme	10 2:15 – 7:00 p.m. Structured Education Programme	11	12 2:30 – 4:30 p.m. Community Education Programme 2:30 – 5:00 p.m. DFM Module III Critical Appraisal
13	14	15	16 2:15 – 7:15 p.m. Structured Education Programme	17 1:00 – 3:30 p.m. CME Lecture 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Council Meeting	18	19
20	21	22	23 2:15 – 7:30 p.m. Structured Education Programme	24 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting	25 2:30 – 3:30 p.m. Board of Education - Video Session	26 2:30 – 4:30 p.m. Written Enhancement Training

## FP LINKS EDITORIAL BOARD 2012

Board Members :		
<b>Board Advisor :</b> Dr. Wendy Tsui	Dr. Alvin Chan	Section Coordinator (Oasis)
	Dr. Chan Man Li	Section Coordinator (Feature / Trainee Column)
	Dr. Chan Ting Bong	
	Dr. Judy Cheng	Section Coordinator (After Hours)
<b>Chief Editor :</b> Dr. Catherine Ng	Dr. Chung Chak Cheong	
	Dr. Anita Fan	
	Dr. Fung Hoi Tik, Heidi	Section Coordinator (WONCA Express)
	Dr. Ho Ka Ming	
	Dr. Alfred Kwong	
<b>Deputy Editors:</b> Prof. Martin Wong Dr. Natalie Yuen	Dr. Dorothy Law	
	Dr. Maria Leung	Section Coordinator (Photo Gallery)
	Dr. Ngai Ka Ho	
	Dr. Sin Ming Chuen	
	Dr. Sze Hon Ho	Section Coordinator (News Corner)
	Dr. Wong Yu Fai	
	Dr. Wong Yu Shing, Lawrence	



Back Row (left to right): Dr. Chung Chak Cheong, Dr. Sze Hon Ho, Dr. Ho Ka Ming, Dr. Alfred Kwong, Dr. Sin Ming Chuen, Dr. Chan Man Li  
Front Row (left to right): Dr. Judy Cheng, Ms. Carmen Cheng, Dr. Wendy Tsui, Dr. Catherine Ng, Dr. Heidi Fung

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

"Restricted to members of HKCFP. The views expressed in the Family Physicians Links represent personal view only and are not necessarily shared by the College or the publishers. Copyrights reserved."

### Contact and Advertisement Enquiry

Ms. Carmen Cheng  
Tel: 2528 6618  
Fax: 2866 0616  
E-mail: carmen@hkcfp.org.hk  
The Hong Kong College of Family Physicians  
7<sup>th</sup> Floor, HKAM Jockey Club Building,  
99 Wong Chuk Hang Road, Hong Kong