

THE HONG KONG COLLEGE OF FAMILY PHYSICIANS



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Message from the President

The Primary Healthcare Committee (PHC) is responsible for advising the PHC Commission with a view to assisting the PHC Commission in carrying out its functions and exercising its powers in an effective and efficient manner. (https://www.info.gov. hk/gia/general/202408/26/P2024082600565.htm) The Committee comprises ex-officio members and nonofficial members. People from different professional backgrounds have been invited to join the committee as non-official members, including professionals from family medicine, Chinese medicine, dentistry and other professional sectors. The family doctors involved in the PHC Committee are Dr. Donald Li Kwok-tung, Professor Samuel Wong Yeung-shan, Dr. Lam Wing-wo, Dr. Tse Sut-yee and myself. The full list of membership can be found via the above web link.

The first meeting of the PHC Committee took place in August, chaired by Dr. Pang Fei-chau, the Commissioner for Primary Healthcare. During the meeting, Dr. Pang briefed members on the future work focuses of the PHC Commission, followed by a discussion about the governance structure of the PHC

Commission.
Several
working
groups would
be formed to
facilitate the
enhancements
of primary
healthcare
development
relating



(left to right) Dr. David Chao, Dr Karen Flegg (WONCA President) and Dr. Ramya Raman (RACGP's Acting Vice President)

to the coordination and supervision of primary healthcare services and strengthening the work of District Health Centres



(left to right) Dr. David Chao and College Censors Dr. Donald Li, Dr. Stephen Foo and Prof. Cindy Lam

(DHCs). The DHCs have been co-ordinating the primary healthcare services in the community and facilitating connections of healthcare professionals in public and private sectors in order to better establish a community service network.

Committee members brainstormed various means to further expand the community healthcare network through enlisting more healthcare professionals from different disciplines to join the primary healthcare services, thereby providing more comprehensive and quality-assured primary healthcare support for the people in the community.

The progress of the Chronic Disease Co-Care Pilot Scheme has been shared with committee members in the meeting. It was great to learn that the Pilot Scheme has recorded almost 60 000 participants at the time and the PHC Commission is pursuing promotion with the DHCs to attract more people to the Pilot Scheme via various territory-wide and district-based channels. We wholeheartedly wish the Primary Healthcare Committee every success in the years to come.

(Continued on page 2)

Message from the President (Con't)

(Continued from page 1)

The WONCA Asia Pacific Region (APR) Council Meeting 2024 was held successfully in August in Singapore just prior to this year's WONCA APR Conference. We were glad to have the opportunities to catch up with WONCA President Dr. Karen Flegg, WONCA APR President Dr. Brian Chang (online) and Presidents and representatives of WONCA APR member organisations, especially our Conjoint sister College RACGP's Acting Vice President Dr. Ramya Raman who has stood in for President Dr. Nicole Higgins. Our College sent a very strong bidding team to attend the WONCA APR Council Meeting in order to bid for hosting the 2027 WONCA APR Conference in Hong Kong, including Prof Donald Li, Prof Cindy Lam, Dr. Stephen Foo, Prof Samuel Wong, Dr. Li Yi Chu, Dr. Lorna Ng, Dr. Esther Yu, Dr. Cheryl Chan,

Ms. Erica So, and myself. Our bidding presentation went very well and we are keeping our fingers crossed. Thank you.



Our WONCA bidding team (left to right at back row) Dr. Li Yim Chu, Dr. Esther Yu, Dr. Cheryl Chan, Dr. Lorna Ng

(left to right at front row) Dr. David Chao, Ms. Erica So and Prof. Samuel Wong

Dr. David V K CHAO

President

Meeting Highlights

Certificate Course on Common Mental Health Problems for Primary Care **Doctors in Treatment of Psychiatric** Disorders 2024

The 4th session of Certificate Course on Common Mental

Health Problems for Primary Care Doctors in Treatment of Psychiatric Disorders 2024 was Ma held on 15 August 2024.

Dr. LAI Chi Lun, Specialist in Psychiatry, delivered a lecture on "Update Management on Psychogeriatric Problems in Primary Care (including dementia etc.)".



Dr. CHEN Xiao Rui, Catherine (left, Moderator) presenting a souvenir to Dr. LAI Chi Lun (right, Speaker).

Certificate Course on Updates on the Management of **Common Urological Conditions**

The 3rd session of Certificate Course on Updates on the Management of Common Urological Conditions was held on 17 August

Dr. WONG Chun Him, Francis, Associate Consultant, NTE Cluster Urology Unit, Hospital Authority, delivered a lecture on "Management of elevated Prostate specific antigen (PSA) and prostate cancer" and Dr. YUEN Kar Kei, Steffi, Associate Consultant, NTE Cluster Urology Group Photo taken on 17 August Unit, Hospital Authority, delivered a lecture on 2024 (From left to right) "Management of haematuria".



Dr. WONG Chun Him, Francis (Speaker), Dr. YEUNG Lok Ki (Moderator) and Dr. YUEN Kar Kei, Steffi (Speaker).

Online Seminar on 29 August 2024

Dr. LAI Yik Kiu Dominic, Specialist in Dermatology & Venereology, delivered a lecture on "New Treatments in Atopic Dermatitis".



Dr. TSUI Hing Sing, Robert (right, Moderator) presenting a souvenir to Dr. LAI Yik Kiu Dominic (left, Speaker).



Group Photo taken on 24 August 2024 (From left to right) Dr. LEUNG Cheuk Wing (Moderator), Prof. NG Chi Fai, Anthony (Speaker) and Dr. NG Chang Kidd Timothy (Speaker).

The 4th session of Certificate Course on Updates on the Management of Common Urological Conditions was held on 24 August 2024.

Prof. NG Chi Fai, Anthony, Tzu Leung Ho Professor of Urology, Department of Surgery, CUHK, delivered a lecture on "Diagnosis and investigation" and Dr. NG Chang Kidd Timothy, Specialist Resident, NTE Cluster Urology Unit, Hospital Authority, delivered a lecture on 'Treatment update".

HKCFP Council Meeting Attendance Summary 2023/2024

Council Members	Position	Term	2024 (Dec 2023- Aug 2024)	2023 (Nov 2022- Nov 2023)
Dr. David VK CHAO	President	Dec 2022-Dec 2024	7/7	11/11
Dr. LAU Ho Lim	Vice-President (General Affairs)	Dec 2023-Dec 2025	7/7	11/11
Prof. Samuel YS WONG	Vice-President (Education and Examinations)	Dec 2022-Dec 2024	5/7	10/11
Dr. Billy CF CHIU	Honorary Treasurer	Dec 2022-Dec 2024	3/7	2/11
Dr. Cecilia YM FAN	Honorary Secretary	Dec 2022-Dec 2024	5/7	9/11
Dr. Angus MW CHAN	Immediate Past President	Dec 2022-Dec 2024	5/7	6/11
Dr. AU Chi Lap	Member	Dec 2023-Dec 2026	7/7	10/11
Dr. CHAN Hung Chiu	Member	Dec 2022-Dec 2025	7/7	11/11
Dr. CHAN King Hong	Member	Dec 2023-Dec 2026	5/7	10/11
Dr. Anthony P FOK	r. Anthony P FOK Member		7/7	11/11
Dr. HO Ka Ming	Or. H0 Ka Ming Member		7/7	10/11
Dr. Eric MT HUI	r. Eric MT HUI Member		5/7	9/11
Dr. KO Wai Kit	Dr. KO Wai Kit Member		7/7	8/11
Dr. Maria KW LEUNG Member		Dec 2021-Dec 2024	6/7	10/11
Dr. LI Yim Chu	Dr. LI Yim Chu Member		7/7	10/11
Dr. Matthew MH LUK	Dr. Matthew MH LUK Member		7/7	10/11
Dr. Lorna V NG	Dr. Lorna V NG Member		6/7	9/11
Dr. NGAN Po Lun	Dr. NGAN Po Lun Member		6/7	9/11
Dr. Wendy WS TSUI	Or. Wendy WS TSUI Member		5/7	10/11
Dr. Marcus MS WONG	Dr. Marcus MS WONG Member		3/7	7/11
Dr. YIU Yuk Kwan	Member	Dec 2023-Dec 2026	6/7	8/11
Dr. Esther YT YU Member		Dec 2023-Dec 2026	7/7	10/11

REFRESHER TRAINING COURSE FOR EXIT EXAMINERS 2024



Organized by Specialty Board

(For Exam Observers, Trainee Examiners & Examiners of Exit Exam) (Trainee Examiners & Exam Observers need to possess certificate of Refresher Training Course before promotion as Examiners)

4 SESSIONS

Dates	Segments	Panel Speakers led by:
22 November 2024 (Fri)	Practice Assessment (hybrid mode) Venue: Wanchai office	Dr. Luk Kam Hung (Coordinator, Practice Assessment)
29 November 2024 (Fri)	Consultation Skills Assessment # (hybrid mode) Venue: Wanchai office	Dr. Wang Hua Li, Jenny (Coordinator, Consultation Skills Assessment)
6 December 2024 (Fri)	Clinical Audit (zoom only)	Dr. Kwong Siu Kei, Alfred (Coordinator, Clinical Audit)
12 December 2024 (Thu)	Research (zoom only)	Dr. Fu Sau Nga (Deputy Coordintator, Research)

Participants of CSA Refresher Training Course would be required to attend a video viewing session for completing the pre-course assignment on either 22 or 29 November 6:15 -7:00 p.m.

Time: 7:00 - 9:00p.m.

Venue: Rm 802, Duke of Windsor Social Services Building, 15 Hennessy Road, Wanchai

HIGHLIGHTS OF OUR COURSE:

- Overview on the Exit Exam Segments and interactive discussions
- Standardization of exam marking
- CME: 2 points for each session (Cat 4.4) and max. 8 points for whole course
- . CPD: Up to 2 CPD points will be awarded, depending on achievement made in the pre & post- course assessment
- Invitation to mark in the coming Exit Examination
- Privilege to receive course materials and free admission to the subsequent years of Refresher Training Courses

CERTIFICATE OF ATTENDANCE:

• Awarded for 75% or more attendance of the whole course (i.e. 3 sessions)

COURSE FEES:

HK\$1,000 for whole course (4 sessions)

HK\$500 for single session

[Course fee reimbursable upon 100% attendance of the whole course / registered session(s)]

APPLICATION DEADLINE 7 NOVEMBER 2024

For enquiry, please contact the Board Secretariat, Mr. John MA at 2871 8899 or email to exit@hkcfp.org.hk



Enrolment & Learn more

BVTS Basic Training Introductory Seminar & YDC Family Medicine Boot Camp 3rd October 2024 (Thursday)

Dear 2024 newly enrolled Basic Trainees,

[Invitation]

Board of Vocational Training and Standards (BVTS) and Young Doctors Committee (YDC) are proud to announce that the Basic Training Introductory Seminar and Family Medicine Boot Camp will be held specifically for the newly enrolled Basic Trainees on 3rd October 2024 (Thursday) from 19:00 - 21:30 (TBC) at Room 802, 8/F, Duke of Windsor Social Services Building, Wan Chai.

This first-ever joint event between BVTS and YDC aims to connect the newly enrolled basic trainees with the College, experienced Fellows and senior trainees and familiarize them with the Family Medicine Vocational Training Programme through BVTS and senior trainees' sharing.

Please refer to the details as below:

Basic Training Introductory Seminar & Family Medicine Boot Camp

Date : 3rd October 2024 (Thursday)

Time : 19:00 - 21:30

Venue : Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai

Target Participants: 2024 newly enrolled Basic Trainees

For registration, please fill up the form via scanning the QR code or via URL: https://forms.gle/c5NbSLDhLaxsGpdw7 on or before **27**th **September 2024 (Friday)**:

Basic Training Logbook and Handbook would be distributed that evening. For those unavailable to attend, please also fill up the above e-form to advise your **preferred** way to obtain the Basic Training Logbook and Handbook.



For those new College members, our Membership Committee has sent you a souvenir collection letter attached with the membership package by post earlier. Please be reminded to bring along your souvenir collection letter and a bag for immediate redemption of tie / scarf and HKCFP 40th anniversary book with our staff during this event as well.

Should you need further information, please do not hesitate to contact Ms. Nana CHOY or Ms. Kathy LAI or Ms. Hannah LOK at 2871 8899 or via email at ydc@hkcfp.org.hk or BVTS@hkcfp.org.hk for assistance.

We are looking forward to seeing you at this exciting event.

Yours sincerely,

Dr. Fok Peter Anthony Dr. Yiu Yuk Kwan

Chairman, Chairman,

BVTS Basic Training Subcommittee Board of Vocational Training & Standards

Dr. YU Yee Tak, Esther Dr. Chan Lam, Chloe

Co-Chairmen,

Young Doctors Committee

Classified Advertisement

Full-time Medical Officer (Women Health) needed. Gynaecological experience preferred. Attractive remuneration. Direct access from North Point MTR station. 5.5 days work, Sun & PH off. Contact Ms. Li at 2859 7537 or email hrdps@tungwah.org.hk.

HKCFP Trainees Research Fund 2024 / HKCFP Research Seed Fund 2024

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 2024" or "HKCFP Research Seed Fund 2024" on your research project upon submission.

Submission Deadline: 25th October 2024

Supported by HKCFP Foundation Fund

READERSHIP DRIVE

Congratulations!

The returns from the following doctors have been selected for August 2024 issue:

Dr. CHAN Chi Wai, Dr. KWAN Tsz Yan, Dr. LO Chun Hong, Dr. MA Mya Khin, Dr. TUNG Po Yin



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 could also access the Google form through the link, in addition to the QR code. https://forms.gle/KmZwgYnzB3E977Mi8

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

Share your thoughts



Unveiling the Potential of SGLT2 Inhibitors in Nondiabetic Fatty Liver Disease Treatment

As a family physician, I am always on the lookout for effective and well-tolerated treatments for the growing epidemic of nondiabetic metabolic dysfunction-associated fatty liver disease [MAFLD]. This condition, characterized by excessive accumulation of fat in the liver in the absence of significant alcohol consumption or other secondary causes, is estimated to affect up to a quarter of the general population. Left untreated, MAFLD can progress to more serious liver complications like cirrhosis and hepatocellular carcinoma.

The efficacy of sodium-glucose cotransporter-2 (SGLT2) inhibitors in treating patients with MAFLD with DM has been demonstrated in both experimental and RCTs, in which transaminase levels and liver fat content were reduced. However, evidence in the effect of SGLT2i in non-diabetic fatty liver patients are lacking.

While lifestyle modifications targeting weight loss and improvements in diet and physical activity remain the foundation of MAFLD management, pharmacological interventions are urgently needed for patients who are unable to achieve sufficient results through lifestyle changes alone. The recent investigator-initiated, randomized controlled trial published in the Journal of Hepatology provides encouraging evidence that the SGLT2 inhibitor empagliflozin may be a promising addition to our treatment arsenal.⁴

The study recruited 98 adults from the community who had evidence of hepatic steatosis on magnetic resonance imaging but did not have diabetes. Participants were randomly assigned to receive either empagliflozin 10 mg daily or placebo for 52 weeks. The primary outcome was the difference in change of liver fat content, as measured by MRI-derived proton density fat fraction (MRI-PDFF), between the two groups at the end of treatment. The results demonstrated that the empagliflozin group experienced a significantly greater reduction in median MRI-PDFF compared to placebo (-2.49% vs. -1.43%, p=0.025). While the trend towards a higher rate of resolution of hepatic steatosis (MRI-PDFF <5%) in the empagliflozin group did not reach statistical significance (44.9% vs. 28.6%, p=0.094)⁴, the magnitude of the effect is clinically meaningful.

Importantly, empagliflozin also produced beneficial changes in other parameters relevant to MAFLD. The treatment group saw greater reductions in body weight (-2.7 kg vs. -0.2 kg), waist circumference (-2.0 cm vs. 0 cm), fasting glucose (-0.3 mmol/L vs. 0 mmol/L), and ferritin (-126 pmol/L vs. -22 pmol/L) compared to placebo. These findings suggest that empagliflozin may have a multifaceted impact on the underlying metabolic derangements that drive MAFLD development and progression.

As a family physician, I find these results quite promising. MAFLD is a complex condition that often coexists with other metabolic disorders like obesity, prediabetes, and dyslipidemia. Interventions that can simultaneously target liver fat accumulation and improve overall metabolic health are greatly needed. The fact that empagliflozin, a medication primarily used for the management of type 2 diabetes, demonstrated benefits in this nondiabetic population is particularly compelling.

One of the strengths of this study is its rigorous methodology, including the use of a gold-standard imaging technique (MRI-PDFF) to quantify liver fat content. The double-blind, placebo-controlled

design and intention-to-treat analysis enhance the validity and reliability of the findings. Additionally, the 52-week treatment duration provides insight into the sustainability of the observed effects.

That said, there are a few limitations to consider. The relatively small sample size and short follow-up period mean that the study was not powered to evaluate the impact of empagliflozin on more clinically relevant outcomes, such as progression to advanced liver disease or development of diabetes. Longerterm, larger-scale trials will be necessary to fully elucidate the long-term benefits and safety profile of this intervention.

Another consideration is the generalizability of the findings. The study population was relatively homogeneous, consisting of adults without diabetes who were recruited from the community. It remains to be seen whether these results would be replicated in more diverse patient populations, including those with comorbid conditions like type 2 diabetes or established cardiovascular disease.

Nevertheless, the current study adds to the growing body of evidence supporting the use of SGLT2 inhibitors, such as empagliflozin, in the management of MAFLD. As a family physician, I am particularly excited about the prospect of having an additional therapeutic option that not only targets liver fat accumulation but also has the potential to confer broader metabolic benefits.

Integrating empagliflozin into the management of MAFLD would require careful patient selection and monitoring. Factors such as liver fibrosis stage, presence of comorbidities, and potential interactions with other medications would need to be carefully considered. Close collaboration with hepatologists and other specialists may be warranted in some cases.

In conclusion, the findings of this randomized controlled trial suggest that empagliflozin holds promise as a novel treatment for nondiabetic MAFLD. As a family physician, I am eager to see the results of larger, long-term studies that can further elucidate the role of this medication in the comprehensive management of this increasingly prevalent condition. Ultimately, the availability of effective, well-tolerated pharmacological interventions like empagliflozin would be a valuable addition to the armamentarium of tools available to address the growing public health burden of MAFLD.

Reference:

- Komiya C, Tsuchiya K, Shiba K, Miyachi Y, Furuke S, Shimazu N, et al. Ipragliflozin improves hepatic steatosis in obese mice and liver dysfunction in type 2 diabetic patients irrespective of body weight reduction. PloS one. 2016;11(3):e0151511.
- Coelho FdS, Borges-Canha M, von Hafe M, Neves JS, Vale C, Leite AR, et al. Effects of sodium-glucose co-transporter 2 inhibitors on liver parameters and steatosis: A meta-analysis of randomized clinical trials. Diabetes/metabolism research and reviews. 2021;37(6):e3413.
- Scheen A. Beneficial effects of SGLT2 inhibitors on fatty liver in type 2 diabetes: a common comorbidity associated with severe complications. Diabetes & metabolism. 2019;45(3):213-23.
- Cheung KS, Ng HY, Hui RWH, Lam LK, Mak LY, Ho YC, et al. Effects of empagliflozin on liver fat in metabolic-dysfunction associated steatotic liver disease patients without diabetes mellitus: A randomized, double-blind, placebo-controlled trial. Hepatology. 2024;10.1097.

Compiled by Dr. Chan Yuen Ching, Cheryl



Central Kowloon Health Centre

Dr. Law Tung Chi, Dorothy, Associate Consultant, KCC FM&PHC, HA

Kowloon Hospital is the first government hospital in Kowloon comprising a group of buildings constructed between 1925 and 1938. Its establishment was in response to the population boom in Kowloon in the 1920s. The Outpatients Block, now known as Central Kowloon Health Centre. (blue arrow) was built in 1935.



The original single storey Outpatients Block was a simple rectangular building built to a symmetrical plan consisting of a large central main waiting hall surrounded by consultation rooms and

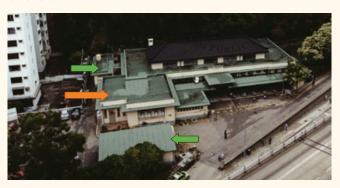


other rooms for supporting services. This building was built with a Chinese tiled hipped and pitched roof with "cow's horn" curling ends to ridge and corners (purple arrow).

Kowloon Hospital is composed of 17 buildings, and 10 of them are now listed either Grade 2 or Grade 3 historic buildings. Central Kowloon Health Centre was confirmed as Grade 2 historic building on 18 Dec 2009.

There are two small detached utility buildings (green arrows) on the south and west sides of the outpatient block which from their style might date them as 1930s period buildings. They were probably built after World War II.

A flat-roofed extension was added in 1951 and further rehabilitation works carried out in 1964/65. The 1965 extension (orange arrow) was built with a modern design to provide further waiting areas and a dispensary. Walls are rendered and painted, the roof is flat with a wide projecting canopy over the large rectangular steel framed windows. The design of the building therefore may be classified as local Arts and Crafts with a modern extension.







Working at a revitalizing historic building

Days before renovation in Oct 2021- Jun 2022

There was no air-conditioning in the waiting hall. Patients and staff had to endure hot temperatures during summer and cold winds during winter.



Nowadays

False ceiling with air-conditioning installed at waiting hall. The lamps are installed at a lower level to ensure more bright lighting in the waiting hall.



Days before renovation in Oct 2021- Jun 2022

The doors of consultation rooms were not facing the waiting hall, instead they were perpendicular to the waiting hall and were facing the door of another consultation room. This greatly confused patients trying to find the right door.



Nowadays

Doors of consultation rooms are now facing the waiting area. Installation of patient calling system (CQMS) shows a few slot numbers next in line, so patients can have a better estimation on their waiting time for being called to consultation rooms.



With a high ceiling, the old ceiling lamps up on the roof in the consultation rooms were not bright enough.

Although there were airconditioners installed in the consultation rooms the window type conditioners were quite noisy.



The new consultation rooms are more friendly with bright lights and quiet central air-conditioning. The metal bars at windows which were kept for security reason are covered by curtains.



Under the regulation of Antiquities and Monuments Office, we are lucky to have new features installed.

These facilities improve our patient journey and allow our staff to work more effectively.

1) There is a new wheelchair ramp installed at the front entrance. Patients in wheelchairs can go to registration counters directly rather than through



the old ramp at lateral entrance of the building.

2) The old wooden windows at registration are kept. But the registration area is expanded by knocking down the wall of the room opposite. Nowadays, we have enough space for 2 additional registration kiosks.





3) 3 rooms are built with negative pressure ventilation system. Patients can now have their spirometry test done here. For cases with contagious diseases, we can also see cases here and patients can wait here for ambulance transfer if he/she needs admission.



- 4) Additional patient toilet with disable access are built inside the main building.
- 5) Pharmacy is renovated to allow staff easy access to the drug storage area directly.





Central Kowloon Health Centre is not a famous historic building. However, from the very beginning till nowadays, we keep serving patients under the roof of this old beautiful building.



Etomidate Inhalation and Misuse as E-Cigarette Component

Dr. John-Hugh Tam, Specialist in Family Medicine

Etomidate (依托咪酯), a potent anaesthetic agent, has recently been reported as a misused component in electronic cigarettes (e-cigarettes). This misuse carries significant health risks, as etomidate can induce severe hypokalaemia and adrenal insufficiency. Clinicians must be vigilant in recognising the signs and symptoms of etomidate toxicity, which may present as muscle weakness, arrhythmias, and even life-threatening adrenal crisis. Understanding the mechanisms by which etomidate disrupts electrolyte and hormonal homeostasis is crucial for early diagnosis and appropriate management of these cases. This article explores the emerging phenomenon of etomidate misuse in e-cigarettes and highlights the importance of regulating the composition of these products to protect public health.

Etomidate - What is it?

Etomidate is a potent anaesthetic agent that primarily exerts its effects by modulating the γ-aminobutyric acid (GABA) receptors in the brain. While etomidate is widely used in clinical settings for the induction of anaesthesia, it has recently been identified as an illicit component in some electronic cigarette (e-cigarette) products. This concerning trend was first reported in Hong Kong, where police arrested individuals involving in the illegal sales of e-cigarettes laced with etomidate (of which the e-liquid concerned is locally nicknamed 「太空油」). Similar incidents have also been documented in mainland China and Taiwan, where the government has taken action to control the use of anaesthetic drugs like etomidate in e-cigarettes.

Besides the aforementioned local "street name"「太空油」, etomidate-laced e-liquid has also other slangs or "street names" in other Chinese-speaking territories such as「睡眠煙彈」 and「喪屍煙彈」, etc. owing to its observed neurotropic effect during misuse (such as confusion, coma, myoclonus, and even "zombie-like" whole-body tremors as well as the inability to stand). There was a recent incident in Taiwan where a driver, after using these "zombie vape cartridges", experienced druginduced impairment that led to driving the wrong way and causing a fatal collision with a police officer, which has highlighted the serious issue of "drugged driving" that cannot be overlooked.

Etomidate - The dangers during misuse

The incorporation of etomidate into e-cigarettes is particularly dangerous, as this agent can have profound effects on the body's endocrine and electrolyte balance. Etomidate is known to inhibit the activity of the enzyme 11β -hydroxylase, which is essential for the production of cortisol and aldosterone. This disruption of adrenal function can lead to adrenal insufficiency, manifesting as extreme fatigue, loss of weight and appetite, abdominal pain, nausea, diarrhoea and vomiting, areas of darkened skin, blood pressure changes, hypoglycaemia, muscle weakness, and even life-threatening adrenal crisis.

Moreover, etomidate-induced inhibition of 11β -hydroxylase can also impair the body's ability to regulate potassium levels, leading to severe hypokalaemia. This electrolyte imbalance can itself also result in muscle cramps & weakness and malignant cardiac arrhythmias, and in severe cases, paralysis and respiratory failure.

The case reports published in the literature illustrate the serious consequences of etomidate misuse in e-cigarettes. In one case, a young adult presented with lower limb weakness and difficulty walking, and was found to have severely low potassium levels and adrenal hyperplasia. In another case, the patient experienced not only hypokalaemia but also significant hypertension, underscoring the complex endocrine disturbances caused by etomidate toxicity.

These case reports highlight the importance of clinicians being aware of the potential for etomidate misuse in e-cigarettes. Patients presenting with unexplained hypokalaemia, muscle weakness, or adrenal dysfunction should be carefully evaluated for this possibility. Prompt recognition and appropriate management, including potassium supplementation and supportive care, are crucial in preventing the life-threatening complications associated with etomidate toxicity.

The emergence of etomidate-laced e-cigarettes is a concerning public health issue that requires a multifaceted approach. Regulatory bodies must take action to monitor the composition of e-cigarette products to watch out for potentially harmful illicit substances like etomidate (locally as a Part I Poison), and others such as tetrahydrocannabinol (四氫大麻酚, THC) as discussed in prior related topics. Towards the end of the last century, we once faced the challenge (and we still

FAMILY DOCTORS COLUMN

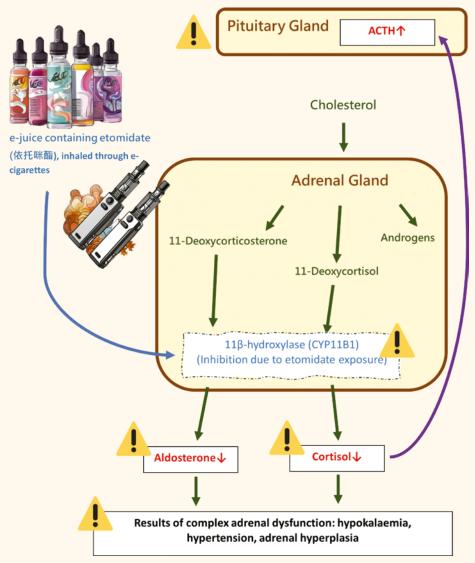


Figure demonstrating the complex network of hormones affected from exposure of etomidate from misuse, according to the case scenarios from literature.

do) of young people abusing another anaesthetic drug, ketamine (commonly known as 「K仔」). This latest challenge may be equally severe, and it highlights a key point - even the medicines we use in our daily lives can be a "double-edged sword". Used properly, they can help us maintain our health, but used incorrectly, they can inflict irreparable harm on ourselves.

Clinicians should be aware of this novel form of etomidate misuse and be prepared to recognise and manage the associated medical complications, as this can contribute to a better understanding of the scope of the problem and guide future interventions.

Reference:

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The Diary of a Family Doctor【家庭醫生的日常】

老人的遭遇 吳雨春醫生

某天早上甘伯伯到黎醫生診所覆診高血壓,他是一位85歲的退休公務員,與同齡和患上腦退化症的妻子同住,也有一位由兒子僱用和留宿的印尼藉女傭照顧。

近來很多老人家遇上電騙,黎醫生問甘伯伯有否遇過騙徒,他便把自己的故事説出來:「某天中午接到一個電話,對方是一把男聲。他說我的孫兒欠他10萬元,要盡快還錢,否則會傷害他。我立刻跟太太商量,大家同意每人各出5萬元來拯救孫兒。跟著和對方交談,約好黃昏6時在樓下交錢。

接著我帶著太太到銀行提款,傭人Yanni也和我們同去。當天銀行少人排隊,我們很快提到10萬元。黃昏6時到樓下等那債主,對方是一個20來歲的男人,我便把錢給了他。他立刻仔細地點算鈔票,完成後把錢拿走,臨走前説很快會釋放我的孫兒。

然後我趕快回家,並立刻致電給孫兒以了解他的情況。跟他溝通後得知我們被人行騙,他沒有欠人債,也沒有委托其他人向我們要錢。」

黎醫生:「後來你們有否報警和找到騙 徒?」

甘伯伯:「我們事後報了警,警方很快把 他拿住。」

黎醫生:「真是幸運,警方是如何破案的?」

甘伯伯:「這是Yanni的功勞。那天她和我

一同去見那人。當他聚精會神地 點算鈔票時Yanni用手機攝錄了 整個過程,報案時便給警察看。 後來警方也把獎狀頒給她。」

黎醫生:「你是否要上法庭?」

甘伯伯:「我下個星期便要上庭。近來

睡得不好,希望事情能盡快解

決。」

由於還有很多病人求診,黎醫生給了甘伯伯降壓藥後便讓他離開。

到了午飯時候,黎醫生獨個兒吃飯。他對甘伯伯的 遭遇有一些想法:「那個拿錢的年青人不像騙案的 首領,因為他要在短時間內小心翼翼地點算100至 200張鈔票。背後原因可能是首領命令他必須把10萬 元全數交給他,否則

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



UNIVERSITY HEALTH SERVICE

Medical Officer (Ref. 240815001)

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 Chinese. 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 9 October 2024 until the position is filled.

PolyU is an equal opportunity employer committed to diversity and inclusivity. All qualified applicants will receive consideration for employment without regard to gender, ethnicity, nationality, family status or physical or mental disabilities.

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 observe appropriate dress code to the hotel for the Scientific Meeting.

Face to Face Events

Date and Time	Venue	Торіс	Speakers
5 Oct (Sat) 2:00 – 4:00 p.m.	Room 802, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai	How the educational psychologist helps our disturbed school age patients? Organized by the Mental Health & Psychiatry Interest Group **Please note the lecture and presentation would be in Cantonese.	Mr. Gabriel CHAN Educational Psychologist, Catholic Diocese of Hong Kong
28 Oct (Mon) 1:00 – 3:00 p.m. (Lunch will be served from 1:00 p.m.)	Chalet Room, Lower Lobby, the Langham Hong Kong, 8 Peking Road, Tsim Sha Tsui, Kowloon	The innovative treatment with selective JAK inhibition for Moderate-to- Severe Atopic Dermatitis Sponsored by Pfizer Corporation Hong Kong Limited	Dr. Charles LYNDE Associate Professor, Department of Medicine, University of Toronto, Ontario, Canada

QR Code for registration



Admission Fee:

5 Oct 2024 (Sat) College Members: Non – members:	Complimentary HK\$ 300.00
28 Oct 2024 (Mon) College Fellow, Full, or Associate Members:	Complimentary *(\$50 Enrollment deposit is required)
Other Categories of Members: Non – members:	HK\$ 650.00 HK\$ 750.00

* Enrollment deposit of HK\$50.00 per lecture is needed for CME event held in hotel. Cheque should be made payable to "HKCFP Education Limited" and send to the Secretariat Office at "Room 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Hong Kong". The cheque would be returned to registered member upon registration on the day.

Pre-registration is required and subject to receipt of enrollment deposit cheque in order to confirm the registration.

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

Accreditation: 5 Oct : 2 CME Points HKCFP (Cat. 4.3)

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

Accreditation: 28 Oct : 1 CME Point HKCFP

1 CME Point MCHK

(Cat. 4.3) (pending)

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

Online Monthly Video Sessions

Dates and Time	Topics
27 September 2024 (Fri) 2:30 – 3:30pm	"Female Fertility Preservation" by Dr. WONG Ho Yan, Queenie
25 October 2024 (Fri) 2:30 – 3:30pm	"Hemorrhoidal Disease: A Common Issue with Effective Treatment Strategies" by Dr. Cheuk Cheung Yan, Edmond

QR Codes for registration

27 September 2024 (Fri) 25 October 2024 (Fri)

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 (For all online seminars)

HK\$ 100.00 for each session Non-member

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

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

Notes:

Online Events

- In case of over-subscription, the organizer reserves the right of final decision to accept registration.
 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.
 Please note you can just attend ONE CME activity at a time. If found you are attending more than one CME activity simultaneously by the CME administrator later, you may NOT be able to receive the CME point(s).
 Members who have attended less than 75% of the length of the online lecture may not be able to receive CME. Final decision would be subject to the approval of the research of the control of the control

- 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 Questions; 50% or above of correct answers are required)
 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, 02	October 2024		
14:30 - 17:00	SB1032, 1/F, Special Block, Tuen Mun Hospital	Chronic Disease Co-Care Model Pilot Scheme Dr. KWONG Chung Man, Dr. CHAN Ho Shuen	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Role of Family Physician in Preventive Medicine Dr. POON Daniel, Dr. PANNU Prubdial Singh	Ms. Emily LAU Tel: 3506 8610
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	MPS - Case Demonstration; Common Pitfalls in Daily Practice Dr. LEE Suk Yee Ada	Ms. Cherry WON Tel: 2589 2337
Thursday, 03 O	ctober 2024		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Outpatient Clinic	Emergency Management of Workplace Violence Dr. TSANG Lai Ting, Dr. KUM Chung Hang	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 09	October 2024		
14:30 - 17:00	SB1032, 1/F, Special Block, Tuen Mun Hospital	Pre-Travel Wellness Planning Consultation Dr. CHENG Ka Tong, Dr. CHAN Lai Yung	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Non-CPR Emergency Procedures in General Practice Dr. YU Lok Kwan, Dr. YIP Ching Wing	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	Smoking Cessation (Vaping and Nicotine Prescription) Dr. POON Chi Him, Dr. CHOW Chau Yi Charlie	Ms. KAM Cheuk Ya Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	Occupational Medicine- Case Sharing Dr. NG Sze Wing Catherine	Ms. Cherry WON Tel: 2589 2337
Thursday, 10 O	ctober 2024		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Outpatient Clinic	Ethical Issue of By-the-way Request in Primary Care Dr. SO Kwok Ho, Dr. HUN Pek I	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 16	October 2024		
14:30 - 17:00	Rm 13, 2/F, Tin Shui Wai (Tin Yip Road) Community Health Centre	Clinical Approach to Upper Limbs Musculoskeletal Pain in Primary Care Dr. CHAN Wing Man, Dr. CHEUNG Hoi Man	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Common Symptoms in Medicine and Geriatrics (2) (Weakness, Numbness, Headache and Dizziness) Dr. NG Kwan Chun, Dr. WAN Tsz Yan Grace	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	Community Resources for Cognitive Impairment Dr. CHAN Lok Hin Thomas, Dr. CHAN Wing Lam Kelly	Ms. KAM Cheuk Ya Tel: 5569 6405
Thursday, 17 Oc	ctober 2024		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Outpatient Clinic	How Does Artificial Intelligence Contribute to Advancements in the Healthcare System? Dr. LO Cheuk Wai, Dr. LEE Kar Fai	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 23	October 2024		
14:30 - 17:00	Rm 13, 2/F, Tin Shui Wai (Tin Yip Road) Community Health Centre	Health Education in the Community Dr. LO Yu Chee, Dr. FONG Lok Ki	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Update on Management of Thyrotoxicosis & Goitre/Thyroid Nodule Dr. LEE Ka Kei, Dr. MUI Cheng I	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	Men's Health (e.g. Androgen Abuse, Infertility) Dr. WONG Wing Kwan Leo, Dr. YEUNG Yuen Ching Chole	Ms. KAM Cheuk Ya Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	The Consultation Process: Effective History Taking Dr. WANG Luqian Lucy	Ms. Cherry WON Tel: 2589 2337
Thursday, 24 O	ctober 2024		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Outpatient Clinic	Clinical Approach to Abnormal Menstruation in Primary Care Dr. SHENG Wei Yang, Dr. CHANG Ting Ting	Ms. Eliza CHAN Tel: 2468 6813
Wednesday, 30	October 2024		
14:30 - 17:00	Rm 13, 2/F, Tin Shui Wai (Tin Yip Road) Community Health Centre	0&G Emergency in General Practice Dr. WANG Siqi, Dr. LI Muk Lam	Ms. Eliza CHAN Tel: 2468 6813
14:30 - 17:30	Conference Room 2, G/F, Block M, QEH	Professional Liability and Medical Protection Insurance Dr. FOCK Hoi Hei, Surena, Dr. FENG Jun Marc	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	Paediatric Orthropaedic Problems Dr. WAN Zihao Jason, Dr. TONG Hei Ka Anson	Ms. KAM Cheuk Ya Tel: 5569 6405
17:00 - 19:00	Lecture Room, 6/F, Tsan Yuk Hospital, 30 Hosptial Road, Hong Kong	Handling Psychological Problems: Angry Patients Dr. TSE Ping Yu Clarice	Ms. Cherry WON Tel: 2589 2337
Thursday, 31 O	ctober 2024		
16:00 - 18:00	Activities Room, 3/F, Yan Oi General Outpatient Clinic	Gate Keeping and Proper Referral Dr. NG Wing Hin, Dr. TANG Hoi Yan	Ms. Eliza CHAN Tel: 2468 6813

The FP Links Committee
would like to thank all
readers, contributors, sponsors
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the College Secretariat for
their tremendous support.

Wishing you all

HAPPY MID-AUTUMN FESTIVAL

The FP Links Committee

COLLEGE CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
22 Sap	23	24	2:30 – 7:00 p.m. Structured Education Programme	1:00 - 3:00 p.m. CME Lecture 4:00 - 6:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	2:30 – 3:30 p.m. Video Session 8:00 p.m. Specialty Board Meeting	28 1:00 – 4:30 p.m. Saturday Symposium 2:00 – 4:00 p.m. Certificate Course on Brining Better Health to Our Community 2024 2:30 – 5:30 p.m. DFM Musculoskeleta Workshop 1
29	30	1 Oct	2:30 – 7:00 p.m. Structured Education Programme	3 4:00 - 6:00 p.m. Structured Education Programme 7:30 p.m. BVTS Basic Training Seminar & YDC Boot Camp	4	5 2:00 – 4:00 p.m. Interest Group in Mental Health & Psychiatry 2:30 – 5:00 p.m. DFM FM Clinical Skills Enhancement
6 Conjoint - Clinical Competency Examination (Rehearsal)	7	8	9 2:30 – 7:00 p.m. Structured Education Programme	10 4:00 – 6:00 p.m. Structured Education Programme	11	12
13	14	15	2:30 – 7:00 p.m. Structured Education Programme	17 4:00 – 6:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	18	19 2:30 - 6:30 p.m. DFM Structured Seminar & Module II Tutorial Session
20	21	22	2:30 – 7:00 p.m. Structured Education Programme	24 4:00 – 6:00 p.m. Structured Education Programme	25 2:30 – 3:30 p.m. Video Session	26 2:00 – 4:00 p.m. Certificate Course on Brining Better Health to Our Community 2024 2:30 – 5:30 p.m. DFM Structured Seminar
27 Conjoint - Clinical Competency Examination	28 1:00 - 3:00 p.m. CME Lecture	29	30 2:30 – 7:00 p.m. Structured Education Programme	31 4:00 – 6:00 p.m. Structured Education Programme	1 אפלו	2:30 – 5:30 p.m. DFM Structured Seminar

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: Education Programmes by Board of Education Green: Community & Structured Education Programmes

Purple: College Activities

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