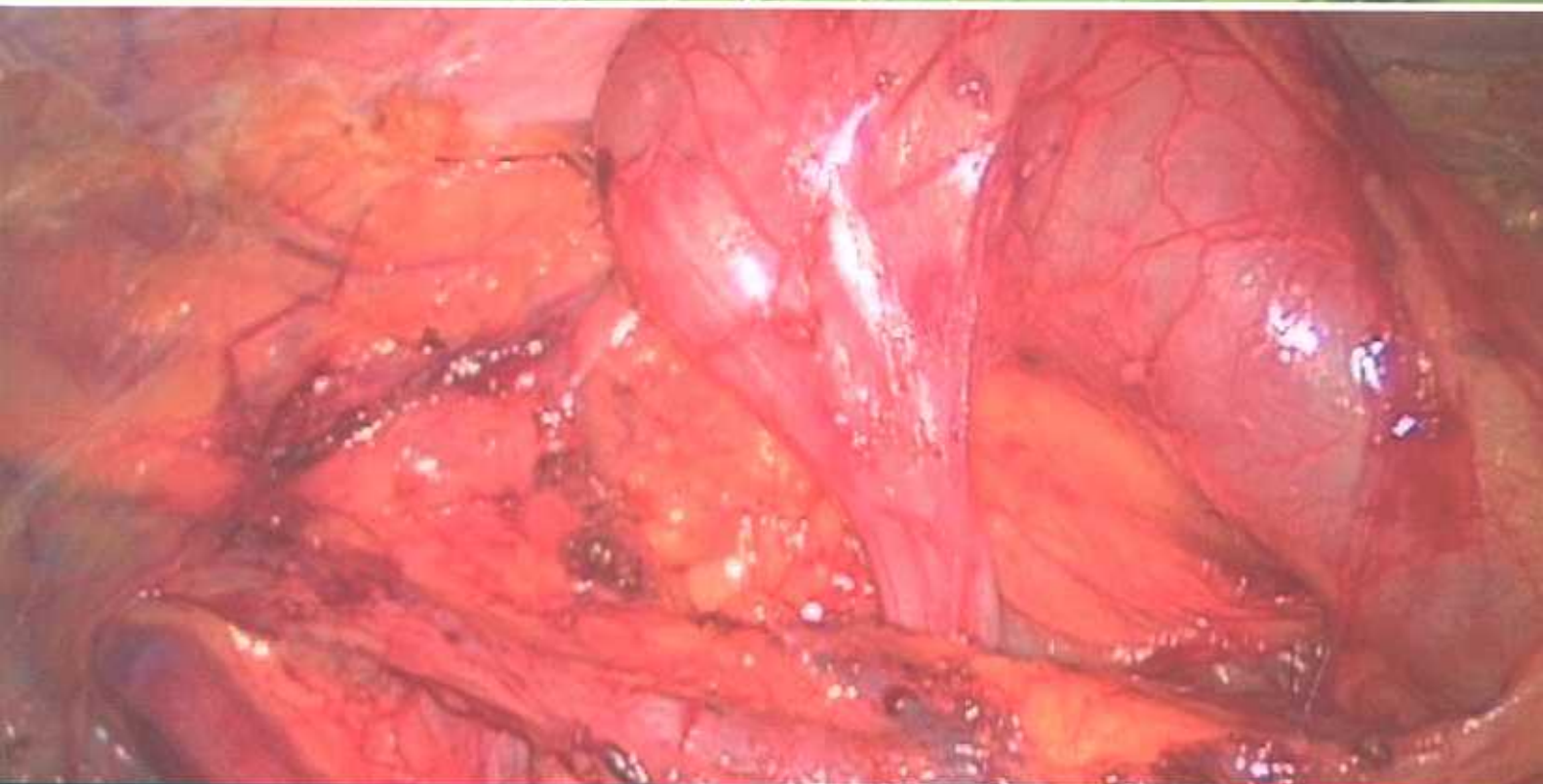




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CUTTING EDGE



The College of Surgeons of Hong Kong Newsletter
香港外科醫學院簡報

May 2008

二零零八年五月號



Editorial

A lot of reform consultations related to healthcare have been going on in the community recently. In line with the recommendation report by the steering committee on doctor work hour, Hospital Authority has initiated a number of doctor work reform programmes. While these reform projects aim to address a multitude of healthcare related issues from different perspectives, one of the key objectives is to cut down the doctor work hours to an average of no more than 65 per week. This good will is generally welcomed, especially by the frontline doctors and trainees. However, there is a growing concern, particularly among the surgical disciplines, whether training will be affected due to reduced work hours of trainees. This is certainly something the College needs to keep a close watch on. Another big issue is of course the global reform on the entire healthcare system, for which the Food and Health Bureau has recently published the consultation document. In response to this, the College has decided to form a subcommittee to collect our fellows' viewpoints and to see which funding option put forward by the Government is most appropriate and sustainable. Please direct your comments related to healthcare reform to either Professor Enders Ng or Dr W T Siu.

After more than a year's preparation, the Conjoint Annual Scientific Congress (CASC) of the College and the Royal Australasian College of Surgeons is soon approaching (12-16 May 2008). The scientific programme has indeed a wide coverage of various subspecialties and include start-of-art lectures, debate panels as well as free paper session, thanks to the hard work of various scientific conveners. This is a singular opportunity that the College has co-organized with the Australasian College in this sort of major international event; fellows are thus strongly encouraged to attend the congress. As pointed out by the new chairman of the Younger Fellows Chapter, Dr. T.L. Kwan, the annual younger fellow forum, a tradition of Australasian College, will be held for the first time in Hong Kong as well. Thus don't miss this golden chance for academic exchange as well as making friends in the various social functions including the specialty dinners.

If, after all these excitements, you decide to settle down and indulge yourself in some quiet life in the country, please join Dr. S.H. Lam and take bow and arrows with you. Dr Lam will also tell you how doctors started archery in Hong Kong.

Dr. Cliff C C Chung
PYNEH

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Message from the President

Dear Fellows,

Much to our gratification, the first Hong Kong Intercollegiate Board of Surgical Colleges Part 3 Membership Examination that was established by our own College has been held successfully from 1 to 7 March 2008 alongside with the Conjoint MRCS Part 3 Examination in Tung Wah Hospital. It is thrilling that the passing rate was 100%. This is a very important milestone marking the successful establishment of our own examination system that is internationally recognized. Successful candidates will be conferred membership diplomas not only from our College (MCSHK), but also from the Royal College of Surgeons of Edinburgh (MRCSd). Once again, I would like to reiterate my strongest aspiration to gain wide international recognition for our training and examination systems at different occasions. I have shared this vision and determination not just with our Fellows, but also in a press interview with the SCMP, and during an interview with the RTHK Radio 1 at the programme '精靈一點' which was aired on 11 February 2008. I wish our surgical fraternity would resonate with this vision. And of course this is just a new start. We would definitely need to strive together to achieve more.

Needless to say, special credits should be given to our Examination team, led by Dr Hung-to Luk, our Censor-in-chief, and Dr Heng-tat Leong, Chairman of the Examination Subcommittee for their tireless efforts in making the new examination system a great success. Much appreciation has to be extended also to our sister College, the Royal College of Surgeons of Edinburgh for their unfailing support. Our collective effort has helped us to surmount the difficulties confronting us and has contributed to the assurance of our continuous success.

Noting the rapidly increasing number of female medical students over the past few years, the College Council has resolved to take an active role in attracting distinguished women doctors to join the surgical community, and to attend to their rather special needs. The establishment of a Women's Surgical Chapter is thus imminent, with a view to inspire, encourage and enable

women surgeons to realize their professional and personal goals. The establishment of a Younger Fellows' Chapter is another initiative in forging solidarity within the College. It aims to encourage younger fellows to add input into the College's development and planning, and to promote the exchange of views amongst the younger and more senior fellows as well as enhance their relationship.

Continuous medical education has been a subject of much discourse over the past few years since the government's wide publicity on lifelong learning and the public's rising expectation of our services. Starting from January 2008, active CME points were introduced to encourage more proactive participation and exchange of expertise among fellows. Due to the ever-changing nature of professionalism in our surgical profession, we must catch up on latest development in surgery so that we become secure in breadth and depth of our expertise.

Everyone is getting excited as the Conjoint Annual Scientific Congress 2008 with RACS is almost at the doorstep. With a close partnership with RACS, I assure we can reap the benefit of the exchange of surgical expertise and mutual understanding of diversities. It is really encouraging that the two colleges can put aside cultural differences and rise above our own interest to come together to form a bigger fraternity for the good of the surgical profession. The efforts and contributions of convenors and co-convenors are indispensable.

I look forward to your continuous support and the success of the CASC 2008.



Professor Chung-kwong YEUNG
President
The College of Surgeons of Hong Kong

Message from the Censor-in-Chief

Dear Fellows and Trainees,

The last diet of the old Conjoint MRCS/MC-SHK Examination will be conducted in September this year. It will be replaced by the new Hong Kong Intercollegiate Board of Surgical Colleges Examination next year.

I am glad to announce that the first diet of Part 1 and Part 2 of the new Hong Kong Intercollegiate Board of Surgical Colleges Examination had been conducted in November 2007 and Part 3 in early March 2008 in parallel with the old examination before complete switch over. For the new examination, we have got the recognition from Royal College of Surgeons of Edinburgh with a Memorandum of Agreement signed in March this year between the Edinburgh College and the Hong Kong Intercollegiate Board of Surgical Colleges where successful candidates for the new examination will be awarded MRCS (Edinburgh) and membership of respective College of Hong Kong. Therefore, in terms of quotable qualification, the new examination is equivalent to the old one and this totally smoothes out the transition. I would like to thank all the effort of members of Examination Committee for putting the new examination into reality and our College President's effort soliciting the recognition from Edinburgh College securing the award of MRCS (Edin) to successful candidates.

It was also resolved in the Education and Examination Committee and endorsed by the Council that there will be annual examination for all

Surgical Boards except General Surgery where the examination diets will be similar as present. All Specialty Boards are holding Conjoint Exit Examination with Royal College of Surgeons of Edinburgh with the award of dual Fellowship to successful candidates with the exception of Plastic Board. The Education and Examination Committee will act according to the wish of Plastic Board Members whether they are heading for a conjoint Fellowship Examination with Edinburgh College making it in par with all other Specialty Boards.

Examination results of Intermediate and Exit Examinations of various Boards conducted in March is attached.

For CME/CPD activities, the new cycle begins early this year. Active CME points have been introduced. To facilitate Fellows acquiring active CME points, various measures had been taken to provide active CME points including the quarterly luncheon symposiums, selection of a number of articles from our College journal for feedback and active participation in College Annual Scientific Meeting. Individual fellows can submit application for active CME points such as revealing articles for Surgical Journals and presentation at International meetings etc.

Fellows are welcome to suggest topics for luncheon symposiums. Volunteers for presentation can contact College secretariat.



Dr Hung-to LUK
Princess of Margaret Hospital

News from the Specialty Boards

General Surgery Board

The MRCS Part 3 Examination and MHKICBSC Part 3 Examination were held concurrently on 1-7 March 2008. Two candidates who sat for the MHKICBSC Part 3 Examination both passed. For the MRCS Part 3 Examination, 54 of the 72 candidates (75%) had passed the oral examination and proceeded to the Clinical part of the examination. Of these 54 candidates, examination, 41 (76%) were able to pass the examination. The exit examination in General Surgery was held on 10-12 March 2008, 12 candidates out of 22 (54.5%) passed.

The General Surgery Board of the College of Surgeons of Hong Kong, together with representatives from the Royal College of Surgeons of Edinburgh, has conducted the second and final stage of hospital reinspections of the General Surgery Training programs in TKOH, CMC, KWH, PYNEH, PMH, QEH, QMH, RH, UCH and YCH, and have visited Tseung Kwan O Hospital. The general feedback from the inspection team is favorable and it is expected that the number of accredited Higher Surgical Training posts will be increased across the territory. The Edinburgh inspectors have also raised certain comments regarding the future directions of training, particularly stressing the need for sub-specialization, and centralization of training rotations. The Board will take these suggestions into consideration in planning.

Professor Stephen Wing-keung CHEUNG
Queen Mary Hospital

Paediatric Surgery Board

The conjoint exit examination for paediatric surgery took place in Queen Mary Hospital on 12th March 2008. Two candidates namely Dr. Lawrence Lan and Dr. Beatrice Wong, sat for the examination and both passed achieving a 100% passing rate. As we are now aiming towards annual exit examination, the provisional date for the next exit examination will be in March 2009.

Our College has recently signed a Memorandum of Understanding with the Royal College of Surgeons of Edinburgh signifying the beginning of a tricollegiate exit examination in paediatric surgery with Singapore.

The next inter-hospital clinical meeting will be held sometime in June together with our AGM. The exact date will be announced in due course.

Dr. Kelvin K W Liu
Board Chairman in Paediatric Surgery

News from the Specialty Boards

Cardiothoracic Surgery Board

The Hospital Inspections were completed by representatives from the Edinburgh College at the end of 2007 and the final report and recommendations is awaited. The Cardiothoracic Examinations will be held in Singapore this year (2008) on 17th and 18th of November, final details will be available soon. The 3rd Asian Cardiothoracic Specialty Update Course will again be hosted by Hong Kong and will be held at the Chinese University on 21st and 22nd of November in association with the National University Hospital of Singapore and the Royal College of Surgeons of Edinburgh. A comprehensive programme will be available soon and an exciting International Faculty is once again being organized.

Professor MJ UNDERWOOD
Prince of Wales Hospital

Plastic Surgery Board

1. Experienced Plastic Surgery Trainers continued to resign from training centers. Restructuring of training centers into

- a) Hong Kong Island (HKI): QMH & RH
- b) Kowloon (Kln): KWh & QEH
- c) New Territories (NT): PWH & TMH

had been proposed to the Specialty Group in Plastic Surgery and agreed by HAHO to facilitate Manpower Planning for Plastic Surgery in 08/09. Extra funding had been granted by HAHO to support two new HSTs in Plastic Surgery in the coming selection exercise.

2. Hospital Inspection of the training centers will be conducted in June 2008.

3. Exit Examination will be held in September 2008 in Kwong Wah Hospital.

Dr Wing-yung CHEUNG
Kwong Wah Hospital

College Focus

Introduction of new General Manager: Ms. Janice Chan



Ms. Janice Chan, the General Manager of the CSHK Secretariat, earned her first degree in the Chinese University of Hong Kong with Bachelor of Social Science (Honours) in 1991. While she was a student, she participated in various public competitions and achieved outstanding results which included the Champion in Chinese Book Report Competition organized by the Radio Television of Hong Kong. She is a keen learner and carried on studying in laws over the past years in the University of Hong Kong and the Renmin University of China. Apart from acquiring the qualification of a solicitor in Hong Kong and the UK, Janice further obtained the Master of Laws with Distinction in the University of Northumbria at Newcastle, UK.

Janice devoted her professional career in both public and private sectors. Upon graduation from CUHK, Janice joined the Hospital Authority as a hospital Administrator, working in Queen Elizabeth Hospital, United Christian Hospital and Kowloon Hospital for three years. During her stay in HA, she had great exposure to administrative, policy formulation and public relations areas.

With the expertise in law and administration, Janice further developed her career as a solicitor in law firms and in the Government. Before joining the Secretariat of CSHK, Janice was an Assistant Director in the Law Society of Hong Kong and gained extensive experience in formulating policies and guidelines to uphold the legal professional standards. She also had wide exposure to liaise with external bodies in pursuing the interest of the legal profession. It is assuring that Janice can lead the Secretariat the way to provide high quality service to the College.

What will be your focus as head of the Secretariat?

My utmost focus is to make sure the smooth operation of the Secretariat, which is greatly affected by the high staff turnover last year as a result of the blooming job market and thus, aggravating the issue of heavy workload among the existing staff. Staff is a valuable asset for every business or organization. In order to lead our College to grow, staff continuity is a crucial issue to be addressed. We have taken various initiatives to retain valuable staff in the Secretariat. For example, we improve the working environment by introducing a five-day week to reduce work pressure and improve the quality of private life for individuals. Moreover, we provide career path for every staff who can grow with our College. I expect all these measures can cultivate a sense of belongings, loyalty and commitment to the College among staff. Team building is an indispensable and challenging process which takes time to achieve the deliverables and overcome obstacles.

Apart from creating a supportive and harmonious climate in the workplace, I would like our staff to excel themselves at the greatest and bring their talents into the full play. Staff of the Secretariat are young and energetic, and their potential are readily realized. Based on the strength and weakness of the staff, I will design appropriate in-house training according to the needs of each individual. The training includes, for instance, workshops on improving communications skill, risk management skills, etc.

As a professional regulatory body in the healthcare sector, we should provide efficient and high quality service to our members and build up strong ties with different working partners. Thus, I put great emphasis on our staff quality in the following aspects:

- Integrity
- Discipline
- Responsibility
- Efficiency

College Focus

What are the tactics to manage people effectively?

I think it is important for the management to comprehend the needs and pressure of staff, and to strike a balance between discipline and autonomy. In other words, we shall ensure staff to act on our advice and empower staff to make decision on their own at appropriate time. Engaging in frequent communication with staff is important to showing understanding and caring to them. Thus, we can breed staff with the spirit to serve straight from the heart.



What do you think of the big family of College of Surgeons?

There are currently twelve staff in the Secretariat serving over 1,000 fellows and members of our College. On top of that, we work closely and liaise with council members, who are from both the private and public healthcare sectors. As you can imagine, the schedule of surgeons is pretty tight, however, we manage to fit into their schedules and develop close working relationships with most of the surgeons. This could not be achieved without their support. I am very grateful that most of the surgeons are willing to spare time to participate in the management of our College. The dynamic force from surgeons of various specialties could make enormous contribution to the College.

As a General Manager, work can be all-consuming. How do you relax?

No matter how hard we try not to let work encroach on our peace of mind, it can still find a way of creeping into our after-work life. Listening to soft music and going on a short trip are ways of relieving my stress at work.

Being a business woman, how do you balance your job and private life?

Despite my long working hours during weekdays, my family is always watching out for me. My greatest source of support is seeing my little son smiling and waiting at the doorstep when I return home. He is just one and a half years old but is already considerate. I regret not to spend much time taking care of my little son on weekdays; however, I try to spend as much time with my family as possible at weekends.

Looking forward, what would you like to achieve in order to lead the College grow?

Looking ahead, apart from building up a strong team of staff who are committed to the College, I aim at further institutionalizing the College in key areas so as to maintain smooth running of the College.

On the other hand, I am developing a PR team to enhance our collaboration with external parties and to strive for good reputation of the College around the world. To polish the communication platform, we will be more proactive in disseminating information, promoting corporate image of the College and responding quickly to requests and enquiries. With dynamics of surgeons of different specialties being taken care of and staff's needs being addressed, the College of Surgeons will be a big family sharing the same goal and mission and the Secretariat will become a devoted team with high quality of service.

Prepared by Jane Wong
Assistant Project Executive, CSHK

Close-up and Macro



EASE 2007 HONG KONG

The East Asian Society of Endourology 2007 Meeting in conjunction with HKUA ASM

The East Asian Society of Endourology (EASE) meeting 2007 was held in conjunction with the Hong Kong Urological Association Annual Scientific Meeting from 13th to 16th of November 2007 at the Hong Kong Sheraton Hotel and Towers, Tsim Sha Tsui.

EASE

The East Asian Society of Endourology (EASE) is an international academic society formed by urologists specialized in endourology from East Asia Region, namely, China, Hong Kong, Japan, Korea, Taiwan and with the Philippines as newly joined member region. The fourth annual assembly of this society was held in Hong Kong this year.

Over 300 delegates joined the meeting, with participants from all over Asia, including China, Japan, Taiwan, Korea, Malaysia, India, the Philippines etc. Opening ceremony was held on 13th December 2007, announcing the beginning of 4-day exciting programs focusing on the latest hot topics in endourology.



Opening ceremony

HKSE

This meeting is also a special occasion celebrating the inauguration of the Hong Kong Society of Endourology.



HKSE inauguration ceremony

The HKSE was founded in March 2006, with an aim to provide a platform for development and promotion of endourology and all forms of minimally invasive urological topics. We would like to share with you more at our website: www.hksenet.hk.

Scientific symposiums

Endourology is a major subspecialty in urology, involving a wide spectrum of diseases. This year, the organizing committee has come to a conclusion seven topics for more in-depth discussion. Symposiums on stone management, BPH, Robotic surgery, Laparoscopic urology, small renal tumors, endourology complications, and lastly, new technologies were held, with experts over all Asia sharing with us their opinion and experience.

Young Urologist symposium

The young urologist symposium was organized for young urologist, with the target of fostering friendship and exchange of knowledge amongst young urologist in Asia. In this 3 hour session, young urologists presented their abstracts, and Prof Ralph Clayman gave us an encouraging speech, sharing 25 years' experience in his career and life. He reminded us to be innovative, and respond to new ideas.



Young urologist forum

From the audience's enthusiastic respond and applause, I believe the live surgery session was an eye-opening experience for many of our guests and delegates.

Social function

Being the Pearl of the Orient, how can we not treat our guests well with fine dining and tours? I hope the following photos speak for themselves, that we all enjoyed this 4 days conference: the East Asian Society of Endourology 2007 Meeting.



Prof R Clayman delivering his speech

Live demonstrations

An exciting live surgery demonstration session was held on 14th December, in PYNEH. From 8:30am to 5pm, there were altogether 8 live surgery demonstrated, ranging from Botox injection for treatment of overactive bladder, to mini-PCNL, green laser prostatectomy, to laparoscopic cystoprostatectomy.

*Prepared by:
Dr Lap-yin Ho & Dr Wai-hee Chan*

Topic on film

HKUA 20th Anniversary Dinner

Twenty years have passed since the establishment of the Hong Kong Urological Association. The association has evolved from the brainchild of 7 urologists at its establishment in 1987 (Dr Leong Che Hung, Dr Peter Chan Siu Foon, Dr Chan Yau Tung, Dr George Koo Ka Ki, Dr Li Man Kay, Dr Wong Kwok Kei and Dr Wong Shu Hong) and owes its existence to 2 retired members, 91 full members, 27 ordinary members, 8 associate members and 197 nursing members of its urology nursing chapter in 2007. Besides promoting the standard of urological practice locally and educating the public about common urological problems, the association has organized regular social functions for its members.

To celebrate the association's 20th anniversary, a crowded dinner party was held in Jockey Club on 22nd November 2007. There were around 200 participants that night with renowned urologists flying back all the way from Harrogate (Dr Peter Chan Siu Foon) and Singapore (Dr Li Man Kay) to join the function. Moreover our friendly urologists from Macau also came to the party. Our distinguished poet Dr Man Chi Wai had also written a poetic eulogy both in Chinese and English to celebrate the 20th anniversary. No wonder the party was filled with laughter especially after listening to the astonishing risqué stories from Dr C H Leong.

The lucky ones that evening took back presents from the lucky draw. All in all, it was a most successful and enjoyable evening and a good time to meet many old friends and colleagues.

*Hands on we relay our cherished skill,
Knowledge like river with streamlets fill,
Undaunted by threats self and without,
Art and science bring success, no doubt,
Be united when mapping our direction,
Excellence is founded upon our devotion,
Successive generations laurelled us fame,
Together we will win in every game.*

泌技無私薪火傳
尿能細水匯碧川
外患內憂何足懼
科學仁心定勝天
發展還須共籌策
揚名有賴立志專
光耀門庭才輩出
大夥並肩再超前



Dr CH Leong, the association's founding president, speaking at the start of the dinner party

Topic on film



President Dr W S Wong and the council members toasting the party and the association
From left: Drs WH Sun, MY Yiu, CW Man, Ida Mah, WS Wong, SK Li, Francis Lee, Simon Chu, KK Chan



Dr SM Hou (second from left in the first row) with doctors and nurses of the urology team of PWH



Lucky guy Dr Ringo Chu (right) receiving his present from the President Dr WS Wong during the lucky draw



Old friends for more than 20 years who came to know each other while working in QMH

From left: Drs John Ngan, KK Wong, MK Li, WS Wong, PC Tam



President Dr WS Wong (forth from left in the back row) with urology nurses of the nursing chapter of the association



Is that an outside clinic free consultation?
From left: Dr Peter Chan, Sir David Akers Jones, Dr CW Man

Younger Fellows Chapter

Succession rests with new blood and it's especially true for younger fellow chapter. By definition, "Younger Fellows" are Fellows who are within 10 years after they have obtained their fellowship and it means the status will expire automatically.

For better division of labor and better representation over various specialties, a number of young fellows who are willing to contribute their valuable time to our young fellows are called upon and their positions in the Younger Fellow Committee (YFC) are as follows:

Chairman: Kwan Tim Lok (General Surgery, CMC)

Vice- Chairman: Chan Suk Ha, Vana (Plastic Surgery, KWH)

Secretary: Day Weida (General Surgery, KWH)

Treasurer: Tsang Shiu Hei (General Surgery, QEH)

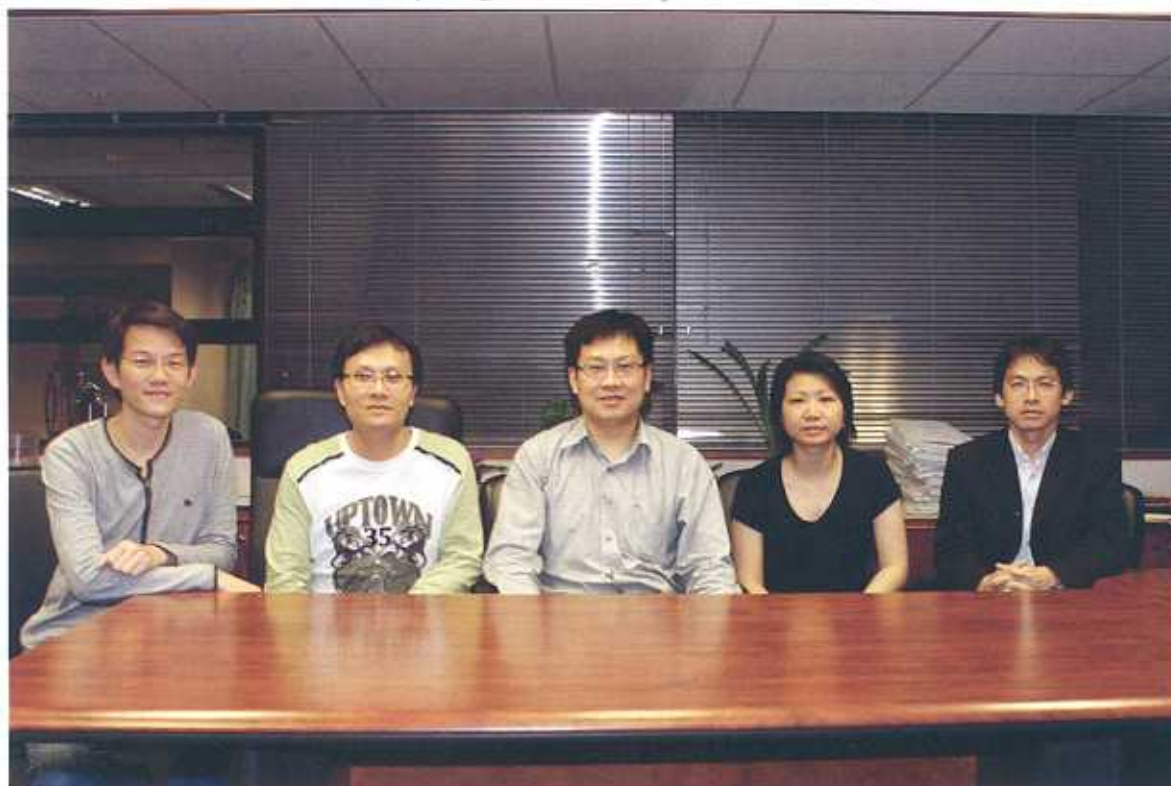
Internal Affair: Chan Kin Chun (General Surgery, UCH)

Publication: Ho Pak Kin (General Surgery, QEH)

Research: Ho Kwan Lun (Urology, QMH)

Advisor: Chad Tse (General Surgery, QEH)

The YFC shares the missions that the younger fellow chapter



- To act as a conduit of younger fellows views to be represented to College Council.
- To empower younger fellows involvement in the College of Surgeons of Hong Kong
- To help younger fellows for professional practice in surgery especially in area of finance, business, practice management and professional development skills.
- To enhance a sense of belonging and fraternity amongst the younger fellows

This year is a special year for young fellows. The original idea of younger fellow chapter was originated from Australasian surgeons. Every year, Younger Fellows Forum is held and it facilitates exploration, discussion, and debate of a wide range of ideas and issues that concern and interest Younger Fellows in the hope of making recommendations to college council. In May this year, there will be conjoint annual scientific congress of CSHK and Royal Australasian College of surgeons in Hong Kong and the annual younger

Younger Fellows Chapter

fellow forum will be held locally as well. It indeed marks a significant event for our younger fellows and we urge you for your participation.

In latter time of this year, we are planning to organize activities concerning career development sharing. We will keep you updated through this column.

Hong Kong is a small place. We have limited number of fellows from individual colleges each year but not every one of them would be interested in running their college. Earlier involvement in learning about the business of colleges will help to appreciate the immense effort of predecessors and it is another important role of YFC. In the last issue of Hong Kong Academy of Medicine newsletter, Prof Grace Tang in her president's message expressed her concern on succession of individual colleges and the Academy. She called on



colleges" to groom their young fellows to take part in activities of their college". I hope the YFC could also act as an option for a smoother succession of colleges and academy in the future.

Dr Tim Lok Kwan
General Surgeon, Caritas Medical Centre

Off the Scalpel

Archery

Bow and arrows is an ancient weapon of war that could kill the enemy at a distance. In modern day, bow and arrows are no longer used in battle instead guns are the commonest weapon. However the art of archery does not die with the obsolete role of bow and arrows in battle. It is being re-vitalized as a game in sports.

Archery as a sport is not being stressed in Hong Kong for most people believe it is a dangerous sport that the players could easily get hurt or cause injury to other people. This belief is deep rooted even in the government officials and archery ranges are usually hidden in area well concealed for safety reason. Besides archery range does required a relatively large area for field set up.

Can you image that the development of archery in Hong Kong is closely tied with the medical professions. Back in the early '70, archery was introduced by a group of doctors in a government hospital as a rehabilitation program for the paraplegic patients. Obviously the clinicians, paramedics and staffs in the same hospital who were attracted by archery joined together and practice archery for fond. Eventually the non-medical friends also came in and made up the first archery club in Hong

Kong. In the past 4 decades, archery as a sport has been well recognized. There are now over 20 archery clubs in Hong Kong. There are archery clubs in most of the universities and also couple of secondary schools as well. Obviously most of us have a taste of archery in recreational resorts locally or overseas.



My first formal contact of archery was dated in the '80 when I was a surgical trainee in a government hospital. I was being attracted by a small circular that there was a training course of archery for staffs working in government hospitals (the old Medical and Health Department). The first day when I presented myself to the training course, the first time when I shot an arrow to the grass butt..... I was deeply attracted by this sport. Over the past 2 decades, I spent most of my Sunday afternoon in the green grass archery range within a hospital compound. Can you guess which hospital? Do you know where is the first archery range in Hong Kong? Yes they are the same place. An archery range that was full of the footprints of mine and some archery enthusiasts, who in fact had represented Hong Kong to Asian games, World championship ...etc. It is within the compound of Kowloon Hospital, just neighborhood to the Hospital Authority building.

I was often asked what are the things that attracted me to archery. I really don't know the answer, Might be the demand for consistent perfection; It would also be the challenge of yourself or a training for precise concentration....



Off the Scalpel



Archery as a sport is easily to learn. I guess a couple of hours in a recreation resort would be enough for novice to pick up the basic skill of shooting an arrow. However to achieve an advanced archer level is not easy. Over the years I saw numerous archery beginners dropped out from the sport because they could not move forwards to achieve a consistent kill. At the same time I saw couples of high-level archers dropped out because they encountered a drop in performance from which they could not turn themselves back. People always have the mis-belief that you have to be muscular to be a good archer. The truth is that you do need some muscles to draw the bow, but the demand to mind is even greater. In the world-class archers competition, the winning edge is the mind rather than the skill and muscle power.

Do you still remember Robin Hood, the legendary archer in the forest of Britain? What bow he was using in defeating his enemy? The bow that was using by Robin Hood in the



movie is called a 'long bow'. This type of bow is not powerful enough and difficult to handle with consistent result. Robin Hood had to be a marvelous archer to achieve the result. What about Rambo, the story of First Blood Part II. What type of bow he used to kill the soldier in the river of Vietnam? The bow is known a 'compound bow'. In fact the most popular bow in the northern America for game and hunting. The type of bow we normally found in the Olympic game is the 'recurve bow', a modification of longbow for more power and higher consistency.

In Hong Kong, recurve bow is the commonest and traditional bow that a beginner will be instructed to use. I also began as a recurve archer. However the recurve that we used in modern archery is highly sophisticated equipment and precisely engineered. It is made of light aluminum alloy or carbon, designed



and cut to withstand the stress and torque force of shooting and yet produced minimally adverse effect to the arrow trajectory. The force producing part of the bow is the limbs. Again not a simple piece of wood or bamboo, it is a multi-laminated structure with carbon graphite,

Off the Scalpel

fiberglass and woods. Couple with this highly engineered product is the stabilizing system and sighting device.

Figure showed one of the fully equipped recurve bow used by modern archers in competition.

Emerging as the most powerful and more easily to handle device is the compound bow. In the Part II First Blood, Rambo killed a soldier in a distance even before reaching the fire range of AK47 rifles. This is the power that could be delivered by a compound bow. Bow hunting and fishing are sports in the northern America that attracted a number of hunters. The device



they are using is the compound bow; powerful enough to kill a bear with a single razor-head arrow. Compound bow is a modern-day change of recurve bow with the addition of wheels or



“cams” in both ends of the bow. The energy is stored by the cams and allows the archers to exert less effort in the full drawn position as to allow more accuracy and consistency. Also more gadgets, such as magnifying scope, mechanical releasing device...etc could be used in a compound bow competition. However the addition of technology could not replace the demand of skill and mental concentration in getting consistent shot. The archer is still the most important component no matter it is



the recurve bow archery or compound bow archery. In the last decade, compound bow shooting is becoming more popular in Hong Kong. I also switched to compound bow shooting in late '90 for it is less demanding on physical strength, more fun with the ability to shoot in simulated hunting environment as well as conventional target practice. However because of its inherited danger, normally we recommended the beginners to pass a certain

Off the Scalpel

standard of recurve bow skill before they were allowed to attend the compound bow course.

There is still a lot to write about the shooting technique, various equipment and the archery events...etc. I guess the best thing to get the actual experience by shooting a couple of arrows and ask yourselves whether you would like to pursuit further on this sport. The experience could not good, but sometimes it would be painful as well (when you hurt yourselves by bouncing the bow string onto the forearm)!

If you are interested in archery, please do come to visit our archery range in Kowloon Hospital in Sunday afternoon. May be you like to learn more about archery in Hong Kong. The following websites will definitely give you an idea.

Hong Kong Archery Association <http://www.archery.org.hk>

Our club website, The Kowloon Archery club <http://www.kachk.com>

Dr Siu Ho Lam
United Christian Hospital



Field archery - counting the trophy of the day



Field archery - counting the trophy of the day



Field archery tournament



Indoor tournament in progress

In memoriam

In Remembrance of Dr Leung Lap Chi



Dr Leung Lap Chi, Consultant Surgeon of Department of Surgery of Tuen Mun Hospital, passed away on 25 March 2008 at age of 56 following a courageous battle with cancer. Our Department of Surgery mourned with great sadness Dr Leung's departure, which, though expected after his long illness, came still as a shock to all of us.

Dr Leung graduated from the University of Hong Kong in 1976. He received his surgical training in Queen Elizabeth Hospital. In 1981 he was elected Fellow of Royal Colleges of Edinburgh and of Glasgow after passing both final examinations in UK. I was privileged to be his junior shortly afterwards when he was in charge of one surgical ward. He always amazed me with his astute observation and sharp reasoning. His hands were particularly gifted and it was such a delight to watch him operating. He was a good teacher both in book knowledge and clinical skills. He cared much about his juniors and indeed interns nowadays owe their annual leave to a struggle by him together with some of his classmates. He was also a candid raconteur who never failed to draw audience whenever he went. In his leisure time, he was a serious tennis player.

Dr Leung was swiftly promoted to Senior Medical Officer in Queen Elizabeth Hospital in 1985 and then to Consultant Surgeon in Princess Margaret Hospital in 1990. At the time when he left Queen Elizabeth I parted with him to join the newly formed Department of Surgery in Tuen Mun Hospital. At its inception, the Department of Surgery in Tuen Mun Hospital was extremely short of experienced staff. Yet it had to face growing demand from an increasing population in the area. Naturally we appeal to Dr Leung for help. Without second thought he agreed to a lateral transfer from a well-established institution down town to a rudimentary centre in the outskirt and came to Tuen Mun in 1991. I could see no reason for his decision other than friendship and altruism. With his help the Department of Surgery in Tuen Mun gradually took shape. He had made immense contributions in training and the introduction of new technologies. Indeed, he had helped me to kick-start my laparoscopic work in urology back in 1992.

Dr Leung had participated in the formation of the Specialty of Plastic Surgery in the College. In 1994 he established a Plastic Surgical Team in Tuen Mun Hospital. Various new services were started and soon Tuen Mun Hospital was recognized as a training centre for Plastic Surgery. As usual, Dr Leung was never complacent and he continued to take up new challenges and responsibilities. Just when he was so heavily involved in specialty development, training, clinical work, administration and community services, it was extremely unfortunate for everyone that a cancer should occur to him. Despite every effort taken by his colleagues, and despite his strong will, his cancer defied control. The departure of such a wonderful colleague at the pinnacle of his career came as an irreparable loss. His legacy, however, will undoubtedly live on forever in our hearts. We will always cherish his memory and remember his compassion for patients. He will also be dearly missed by all whose lives he touched.

Dr Leung is survived by his wife June and his daughter Ping. With his family, he proved to be a man so loving and full of care. We offer his family our most sincere condolences.

"Our destination is a place
Far greater than we know.
For some the journey's quicker,
For some the journey's slow.
And when the journey finally ends,
We'll claim a great reward,
And find an everlasting peace
Together with the Lord.
- Anonymous"



Dr Man, Chi Wai

Arrangement has been made with the late Dr Leung's family to receive donations from colleagues through the following Tuen Mun Hospital bank account: A/C No. HSBC: 004-500-046404-001

* This is a hospital account and tax exemption is not possible*

For enquiries of the donation arrangements, please contact Mr Chris LEE at 2468 6042

Announcements



ACHIEVEMENT THROUGH COLLABORATION

ROYAL AUSTRALASIAN COLLEGE OF SURGEONS
THE COLLEGE OF SURGEONS OF HONG KONG

CONJOINT ANNUAL SCIENTIFIC CONGRESS

HONG KONG CONVENTION AND EXHIBITION CENTRE
12 – 16 MAY 2008

It has been more than 20 years since the local surgeons held a combined scientific meeting with the Royal Australasian College of Surgeons.

Over the past one year, our Hong Kong co-conveners have worked closely with the Australian counterparts in working out the scientific program for the Congress. There will be more than 20 scientific programs to be convened over the four-day meeting.

The conjoint Congress will commence in the evening of 12 May 2008, Tuesday with the Conjoint Award and Diploma Ceremony Conjoint Award and Diploma Ceremony, bringing together the important ceremonial elements of both Colleges. The Hon, Donald Tsang GBM, Chief Executive of Hong Kong SAR, has accepted our invitation to deliver a combined Arthur Li and George Adlington Syme Oration. The ceremony will be followed by the combined College Welcome Reception.

The scientific programs will be held over the following four days (13 May, Tuesday to 16 May, Friday), setting the new model for future Congresses, in response to the feedback from delegates. Breakfast sessions and Masterclasses will be held from 7:00am to 8:20am followed by the plenary program. This will cover contemporary and controversial topics including "Credentialling the Surgeons the Surgeons for New Technology - who is responsible?"; "Doing More with Less - improving bed utilization without compromising standards", "Identifying and Helping the Under-performing Surgeon". The presentations will occupy one hour and will be followed by named lectures. Scientific sessions will occupy the remainder of each day and specialty dinners will be held in the evenings with the spectacular Congress Banquet on Thursday evening.

The provisional program has been drafted and fellows can visit the Congress website at www.surgeons.org/casc2008 for a preview of the program. The program will be finalized over the coming two months. Fellows are encouraged to register early for enjoying a reduction in the registration fee.

I look forward to seeing you in the Congress.

Dr Andrew Wai-chun YIP
Kwong Wah Hospital
CASC 2008 Scientific Convener HK

Calendar of International Surgical Meeting

Date	Event	Website
26-29 Mar 2008	23rd European Association of Urology (EAU) Annual Congress Milan, Italy	www.uroweb.org/meetings-events/annual-eau-congress/
27 - 30 Mar 2008	American Hepato-Pancreato-Biliary Association 2008 Annual Meeting Florida, US	www.ahpba.org www.ahpba.org/subpage_meetings.php
6-9 April 2008	OESO 9th World Congress Gastro-esophageal Reflux Disease Monaco, Europe	http://www.oeso.org/
9-12 April 2008	The Society of American Gastrointestinal and Endoscopic Surgeons Annual Scientific Meeting Philadelphia, USA	http://www.sages.org/meetinginfo.html
15- 19 April 2008	European Breast Cancer Conference Berlin, Germany	
24-26 April 2008	3rd Congress of the European Society of Endocrine Surgeons Barcelona, Spain	asitges@imas.imim.es
26 April - 1 May 2008	American Association of Neurological Surgeons 2008 Annual Meeting	www.aans.org/annual/2008/default.asp
8-10 May 2008	3rd European Conference on Head and Neck Oncology Croatia	http://www.ehns.org/ehns/content/view/23/37/
10-14 May 2008	American Association Thoracic Surgery 88th Annual Meeting San Diego, US	www.aats.org/annualmeeting/
12 - 16 May 2008	Royal Australasian College of Surgeons and The College of Surgeons of Hong Kong Conjoint Annual Scientific Congress Hong Kong	www.surgeons.org/AM/PrinterTemplate.cfm?Section=ASC
16 - 19 May 2008	8th European Congress of Paediatric Surgery Turin, Italy	www.eupsa.org/index-ie.php
16-21 May 2008	American Thoracic Society 2008 International Conference Toronto, Canada	www.thoracic.org/sections/meetings-and-courses/international-conference/index.html
17-19 May 2008	The 2nd Hong Kong International Burns and Wound healing Symposium Prince of Wales Hospital, Hong Kong	http://www.surgery.cuhk.edu.hk/woundhealing2008/
17-22 May 2008	American Urological Association Annual Meeting Orlando, Florida USA	www.aaup2008.org
17-22 May 2008	Digestive Disease Week 2008 San Diego, US	www.ddw.org
5-6 June 2008	Recurrent Head and Neck Tumors HKU, Hong Kong	http://www3.hku.hk/surgery/headneck2008.php
2 - 5 Jul 2008	British Association of Paediatric Congress Salamanca, Spain	www.baps.org.uk/salamanca/salamancaindex-may07.htm

Calendar of International Surgical Meeting

Date	Event	Website
11-12 Jul 2008	Hong Kong Surgical Forum - Summer 2008 HKU, Hong Kong	http://www3.hku.hk/surgery/forum.php
15-16 Jul 2008	Swan XVI Trauma Conference Sydney, Australia	www.swsahs.nsw.gov.au/livtrauma
19-23 Jul 2008	7th International Conference on Head and Neck Cancer San Francisco, US	http://www.head-and-neckcancer.org/meetings/intnlconference.php
2-6 Sept 2008	11th World Congress of Endoscopic Surgery, incorporate with 9th Asia Pacific Congress of ELSA Yokohama, Japan	www.wces2008.com www.elsa2008.com
7-11 Sept 2008	The 14th Congress of the International Society for Burn Injuries Montreal, Canada	Isbi2008-montreal.com
10-13 Sept 2008	ESSO 2008 - 14th Congress of the European Society of Surgical Oncology Netherlands	ESSO2008@fecs.be
10-13 Sept 2008	The International Society for Diseases of the Esophagus 11th World Congress Hungary	http://www.isdecongress2008.com/
18-21 Sept 2008	Leura VI International Breast Cancer Conference Sydney	http://www.tourhosts.com.au/leura/
2-5 Oct 2008	9th Asian Congress of Urology New Delhi, India	www.acu2008.com
12 - 16 Oct 2008	American College of Surgeons 94th Annual Meeting San Francisco, US	postmaster@facs.org
31 Oct - 3 Nov 2008	4th International Congress of the Asia-Pacific Hernia Society Beijing, China	http://www.aphs2008.com/
19-21 Feb 2009	International Colorectal Disease Symposium (ICDS) 2009 PYNEH, Hong Kong	
5-8 Mar 2009	The Society of Surgical Oncology Cancer Symposium 2009, Phoenix, US	MtgReg@surgonc.org
25-27 March 2009	The 2nd Biennial Congress of the Asian-Pacific Hepato-Pancreato-Biliary Association Bangkok, Thailand	http://www.2-aphp-ba2009.org/scientific.html
18-22 April 2010	9th World Congress of the International Hepato-Pancreato-Biliary Association Buenos Aires, Argentina	http://www.ihpba-ba2010.com/

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