



## MONTHLY SELF-STUDY SERIES

Please read the following article and complete the self-assessment questions. Participants in the HKMA CME Programme will be awarded 1 credit point under the Programme for returning completed answer sheet on p.13 via fax (2865 0943) or by mail to the HKMA Secretariat on or before **15 July 2004**. Answers to questions will be provided in the next issue of the HKMA CME Bulletin.

## 每月自修資料

請細閱以下文章，並利用第十三頁之答題紙完成自我評估測驗。香港醫學會持續醫學進修計劃參加者如於**二零零四年七月十五日前**，將已填妥之答題紙傳真或寄回本會秘書處，將可獲持續醫學進修一個積分點；至於是期自我評估測驗之答案，將刊於下一期《持續醫學進修專訊》之中。  
(本會秘書處傳真號碼：2865 0943)

## Update on Dementia

**Dr. Lam Tat Chung, Paul**

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## Definition

The word "dementia" is often used in two different connotations: (1) to denote "the dementia syndrome", in which there are over 100 different causes, some of which are treatable; (2) it is also used to denote a primary neurodegenerative type of brain failure, which basically runs a progressive downhill course. Frequently the same word is used for both concepts, creating confusion to the readers.

When a diagnosis of dementia is first considered, one must be careful to exclude other illnesses that can mimic dementia. In **delirium** (subacute confusional state), the primary defect lies in the patient's conscious level, which is diminished and fluctuating. This results in deficit in attention and memory, causing behavioural disturbances. The patient may suffer from illusions, hallucinations and fleeting delusions. He may become anxious, frightened, agitated or violent. Delirium is extremely common, especially in the elderly. Mild delirium is not detected by brief observation and casual questioning of the patients, and hence is often missed. Delirium usually develops in terms of days. Its severity fluctuates from day to day and is often worse at night. One useful question to elicit mild delirium is to ask the patient the time of the day. In **mental retardation**, the development of the brain is arrested and the patient never achieved the level of cognition expected

for his age. This differentiation is important when evaluating the less common dementia syndromes that arise at a relatively young age, as in a case of Wilson's disease.

**Focal brain syndromes** e.g. aphasia or amnesic disorders affect one specific area of the brain, and do not progress to involve other areas. In both **mild cognitive impairment** and **age associated memory impairment**, patients have memory complaints but do not develop the full-blown syndrome of dementia. Mild cognitive impairment is a pre-clinical (sub-syndromal) state and 15% of the cases progress to dementia every year. Age associated memory impairment is part of normal aging and 2% of the cases progress to dementia per annum. The two conditions have to be differentiated by formal cognitive testing. Functional psychosis e.g. schizophrenia in old age may be mistaken for dementia. Patients with **functional neurosis** such as anxiety disorder or hysterical amnesia may present with memory complaints. Patients with **affective disorder** may suffer from forgetfulness and deterioration of cognitive function, and is referred to as depressive pseudo-dementia. Lastly, dementia may be **simulated** by patients making claims for compensation for head injuries.

## Diagnostic Criteria

Decline in memory is a central issue required by both the DSM IV and ICD-10. The DSM IV places emphasis on multiple cognitive deficits e.g. aphasia, apraxia, agnosia or disturbance in executive functions. The ICD-10 focuses on a general deterioration in judgment and thinking, with a minimum time span of six months.

The Hong Kong Medical Association is dedicated to providing a coordinated CME programme for all members of the medical profession. Under the HKMA CME Programme, a CME register is installed to document the CME efforts of doctors and special CME avenues are provided. The Association strives to foster a vibrant environment of CME throughout the medical profession. Both members as well as non-members of the Association are welcome to join us. You may contact the HKMA Secretariat for details of the programme. 香港醫學會致力推動持續醫學進修，醫學會體察到業界有必要設立完善的持續進修計劃，為同僚建立有系統的進修記錄機制，以及為全科醫生提供適切的進修課程。藉著這個計劃，我們期望將優良的進修傳統推展至醫學界中每一角落，同時為業界締造一個充滿活力的進修文化。我們誠意邀請你參與醫學會持續進修計劃，不論你是否醫學會的會員，均歡迎你同來與我們一同學習，以及享用醫學會為所有醫生設立的進修記錄機制。如欲了解香港醫學會持續醫學進修計劃的詳情，請聯絡本會秘書處查詢。

## Prevalence

Figures depend on the study method used and the population surveyed. Figures quoted on *Table 1* can be used as a rough guide.

Table 1

### Prevalence of Dementia

Age >65	5%
Age 65-69	2%
Age 75-79	6%
Age 85-89	20%

## Causes

*Table 2* depicts some of the causes. The table is not meant to be exhaustive. What is important is the concept of

Table 2

### Causes of Dementia

1. Primary Neuro-degenerative Disorders Leading To Dementia	<ul style="list-style-type: none"> <li>– Alzheimer's Disease</li> <li>– Dementia with Lewy bodies</li> <li>– Frontotemporal dementia (Picks)</li> <li>– Down's syndrome</li> <li>– Frontal lobe degeneration</li> <li>– Chromosome 17 hereditary tauopathy</li> <li>– Progressive subcortical gliosis</li> <li>– Argyrophilic grain dementia</li> <li>– Kosaka's dementia</li> <li>– Progressive nonfluent aphasia</li> <li>– Semantic dementia</li> <li>– Progressive apraxia</li> </ul>
2. Primary Neuro-degenerative Disorders Sometimes Leading To Dementia	<ul style="list-style-type: none"> <li>– Motor Neurone Disease</li> <li>– Parkinson's Disease</li> <li>– Progressive supranuclear palsy</li> <li>– Corticobasal degeneration</li> <li>– Huntington's disease</li> <li>– Hallevorden-Spatz</li> <li>– Cerebella degenerations</li> <li>– Multiple system atrophy</li> </ul>
3. Cerebral Pathology	<ul style="list-style-type: none"> <li>– Vascular Dementia</li> <li>– Trauma</li> <li>– Dementia pugilistica</li> <li>– Brain tumour               <ul style="list-style-type: none"> <li>Primary</li> <li>Secondary</li> </ul> </li> <li>– Meningitis Tuberculosis Cryptococcus</li> <li>– Encephalitis Herpes</li> <li>– Prion dementia               <ul style="list-style-type: none"> <li>CJD</li> <li>vCJD</li> </ul> </li> <li>– Normal pressure hydrocephalus</li> <li>– Multiple sclerosis</li> <li>– Epilepsy</li> <li>– Surgery Corpus callosotomy</li> </ul>
4. Systemic Illness	<ul style="list-style-type: none"> <li>– B12 Deficiency</li> <li>– Folate deficiency</li> <li>– Pellagra</li> <li>– Addison's disease</li> <li>– Cushing's syndrome</li> <li>– Hypo/hyperthyroid</li> <li>– Hypo/hypercal</li> <li>– Hypoglycaemia</li> <li>– Renal failure</li> <li>– Hepatic failure</li> <li>– Cancers               <ul style="list-style-type: none"> <li>Bronchus</li> <li>Breast</li> </ul> </li> <li>– Hypoxia</li> <li>– Hypotension</li> <li>– Radiation</li> <li>– Pseudodementia</li> <li>– Post infections               <ul style="list-style-type: none"> <li>Measles</li> <li>Mumps</li> <li>Rubella</li> <li>Varicella</li> <li>Vaccination</li> </ul> </li> <li>– Drugs               <ul style="list-style-type: none"> <li>Steroids</li> <li>Methotrexate</li> </ul> </li> <li>– Substance of abuse               <ul style="list-style-type: none"> <li>Toluene</li> <li>Alcohol</li> </ul> </li> <li>– Toxins               <ul style="list-style-type: none"> <li>CO</li> <li>Arsenic</li> <li>Manganese</li> <li>Mercury</li> </ul> </li> <li>– Syphilis</li> <li>– AIDS</li> <li>– Whipple's</li> <li>– JC Virus</li> <li>– Wilson's disease</li> <li>– Metachromatic leukodystrophy</li> <li>– Adreno-leukodystrophy</li> </ul>

putting the different causes under the four different columns. Category 1 includes those diseases in which primary degeneration of the neurone occurring in those strategic parts of the brain (e.g. temporal & frontal lobes) that affect cognitive function. Such degenerative process will inevitably lead to dementia. Category 2 includes those illnesses that also result from primary neuronal degeneration, but the process does not always affect the strategic parts of the brain responsible for cognition. In such cases, dementia usually comes late in the disease process, or not at all. Category 3 includes those illnesses that result from cerebral pathology but are not due primarily to degeneration of the neurone. For example, vascular dementia results from diseases of the blood vessels. The fourth category contains systemic diseases such as nutritional deficiencies, endocrine disturbances or toxins.

### Relative Prevalence (in those over age 65)

Alzheimer's disease	50%
Vascular dementia	15%
Mixed	15%
Dementia with Lewy bodies	15%
Others	5%

### Vascular Dementia

The increased sophistication of imaging technique has greatly enhanced our understanding and classification of vascular dementia. The patient often have a history of atherosclerotic risk factors e.g. hypertension, diabetes, smoking, hypercholesterolaemia, with signs of atherosclerotic disease or peripheral vascular disease. **Lacunar infarcts** are caused by occlusion of the deep penetrating arterial branches, a sequelae of long standing hypertension. Lesions usually occur in the deep white matter causing a subcortical syndrome with impairment of attention, frontal executive malfunction, apathy and emotional lability. **Leukoaraiosis** are areas of demyelination and ischaemia, usually affecting the paraventricular white matter. They are best identified by MRI using FLAIR (fluid attenuation inverse recovery) sequences. Leukoaraiosis is found in some normal subjects, but occur with higher frequency in hypertensive patients. Subcortical arteriosclerotic encephalopathy (Binswanger's Disease) refers to patients with dementia, hypertension and leukoaraiosis. Other rarer causes of vascular dementia are vasculitis (as in SLE), cerebral amyloid angiopathy and cerebral autosomal dominant arteriopathy with subcortical infarcts and leucoencephalopathy (CADASIL).

Table 3

#### Dementia with Lewy Bodies Essential Criteria

- Dementia
- Fluctuating cognition
- Recurrent visual hallucination
- Parkinsonism

Table 4

#### Dementia with Lewy Bodies Supporting Criteria

- Repeated falls
- Syncope
- Transient loss of consciousness
- Neuroleptic sensitivity
- Systematised delusions
- Hallucination in other modalities
- Depression
- REM sleep behavior disorder

Table 5

#### Dementia with Lewy Bodies Management

- Low Dose L dopa
- Avoid neuroleptics
- Avoid anticholinergics
- Acetylcholinesterase inhibitions

**Dementia with Lewy bodies** became recognized as a clinicopathological entity in 1996 (*Tables 3, 4 & 5*). Lewy bodies are degenerated cytoskeleton components containing a protein  $\alpha$ -synuclein. Microscopically, they appear as intra-neuronal inclusion bodies with a condensed core and a clear halo. Lewy bodies are found in limbic and neocortical regions (cf in Parkinson's disease, they are found mainly in the brain stem). Depletion in acetylcholine and dopamine are hallmarks of changes in neurotransmitters in DLB.

**Alzheimer's disease** will become a very important epidemiological problem as the life expectancy of the population increases further in the foreseeable future. Alzheimer's disease is diagnosed by exclusion. A definitive diagnosis can only be made at post mortem (*Table 6*). Age and family history are important risk factors (*Table 7*). Cases with Down's syndrome develop Alzheimer's disease early, attributed to the extra copy of amyloid precursor protein gene on Chromosome 21. Depressive illness may be a prodrome of the illness. Not all NSAID exert equal beneficial effects. Ibuprofen, besides having anti-inflammatory property, is also an anti-amyloid agent, hence providing significant protection against the disease. Oestrogen replacement therapy reduces the risk of Alzheimer's disease by 30%, but its efficacy on treatment is controversial. VitE has been shown to be protective only when very high doses are used. Moderate alcohol consumption is also a protective factor. The pathogenesis in Alzheimer's disease is summarized in *Table 8*. The histological hallmarks are senile plaques and neurofibrillary tangles. Current theory of the pathogenesis of Alzheimer's disease center around excessive amyloid genesis. Amyloid precursor protein, a normally occurring transmembrane protein in the brain, is broken down by two enzymes,  $\beta$  secretase and  $\gamma$  secretase, to form  $\beta$  amyloid protein (39-43 amino acids), some of which are neurotoxic. Excess amyloid protein aggregate in plaques. There has been considerable advance in the genetics of Alzheimer's disease in recent year. Patients with 3 major causative gene mutations develop the disease early (age 35-55) with rapid progression. The apolipoprotein  $E_4$  is a susceptibility gene rendering the patient at higher risk. Apo E is a lipoprotein produced in the brain that regulates cerebral lipid homeostasis.

Table 6

#### Alzheimer's Disease Clinical Presentation

- Forgetfulness
- Losing one's way
- Misplacing and losing objects
- Difficulty with handling money
- Deterioration in work or home performance
- Personality changes/apathy/depression/irritability

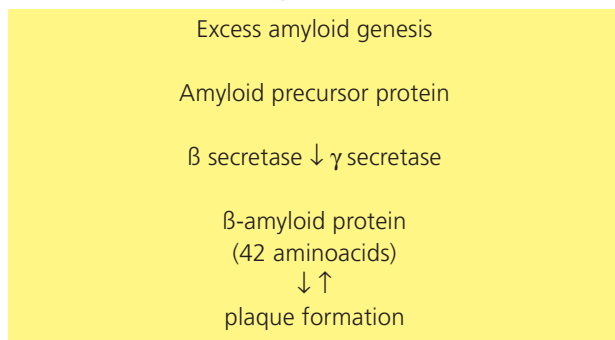
Table 7

## Alzheimer's Disease

Risk Factors	Protective Factors
– Old age	– High education
– Family history	– Genetics (Apo E-2)
– Head injury	– Ibuprofen
– Low education	– Oestrogens
– Down's syndrome	– Large head circumference
– Depressive illness	– Vit. E
– Smoking	– Selegiline
– Aluminium	– Alcohol
– Mild cognitive impairment	– Mental training
– ↑ Homocysteine	

Table 8

## Alzheimer's Disease Pathogenesis



## Treatment

(1) **Cholinesterase inhibitors.** As cholinergic dysfunction is a salient defect in Alzheimer's disease, the use of acetylcholinesterase inhibitors is a rational approach to therapy. The efficacy of ACEI is dose-dependant, but higher doses will be accompanied by more adverse effects, which limit the maximum tolerable. Since some kinds of dementia are not responsive, appropriate diagnostic workout must be done before drugs are prescribed. Indications and contraindications for use of cholinesterase inhibitors is shown in Table 9.

Table 9

## Cholinesterase Inhibitors

Indicated	Contra-indicated
– Alzheimer's Disease	– Frontotemporal dementia
– Parkinson's Disease with dementia	– Progressive Supranuclear palsy
– Dementia with Lewy Bodies	– Huntington's disease
– Vascular Dementia	– Frontal lobe degeneration
– AD with cerebrovascular disease	

(2) **NMDA receptor antagonist (Memantine)** was approved by the FDA in October 2003 and has been used in Europe for the treatment of moderate to severe Alzheimer's disease and vascular dementia. It is available in Hong Kong from April 2004. In this disease model, dementia is believed to result from excessive tonic glutamate stimulation of postsynaptic neurons.

Memantine blocks the excessive tonic influx of calcium through the post-synaptic NMDA receptor caused by pathologically elevated background glutamatergic neurotransmission. Normal glutamatergic neurotransmission required for learning and memory is not affected, as blocking by memantine is reversible. The drug is given by weekly upward titration from 5mg to 20mg over 3 weeks. Memantine has been shown to effectively improve or slacken the rate of deterioration in patients with Alzheimer's disease or vascular dementia. It has also been used in combination with acetylcholinesterase inhibitors, the combination producing a synergistic effect. Memantine is effective, safe and well tolerated. Promising data is becoming available on its use in mild dementia.

## Self-Assessment Questions

(Please indicate true or false to the following statements.)

1. Patients with Alzheimer's disease have a strong family history.
2. Alzheimer's disease is associated with loss of neurotransmitters, esp. acetylcholine.
3. Alzheimer's disease is associated with excess amyloid genesis in brain.
4. Alzheimer's disease affects temporal parietal lobes.
5. Apolipoprotein E2 is a protective gene in Alzheimer's disease.
6. Acetylcholinesterase inhibitors are indicated in all forms of dementia.
7. Acetylcholinesterase inhibitors must be used early in the course of the illness.
8. Side effects of Acetylcholinesterase inhibitors include nausea, anorexia, vomiting and insomnia.
9. Acetylcholinesterase inhibitors improve cognition as well as behavioral functions.
10. Higher doses of Acetylcholinesterase inhibitors are more effective.

## Administrative Charge for Reprinting CME Certificate

The CME Committee has resolved that an administrative charge will be imposed to members requesting reprint of their CME certificates with effective from 1 June 2004. The charge will be HK\$100 for each certificate reprinted.

## 重新簽發持續進修證書之行政收費

香港醫學會持續進修委員會正式通過，由二零零四年六月一日起，本會將向要求重新簽發持續進修證書的醫生收取每張證書港幣一百元之行政費用，敬請留意。

# Clinical Case Study

## 專科個案剖析

Please answer the questions for each quiz below by returning the completed answer sheet printed on page 13. This exercise will attract 0.5 CME point for participants completing BOTH quizzes. Answers and explanations will be provided in the next issue.

請回答下列問題並填妥第十三頁之答題紙交回本會秘書處，參加者將可獲得繼續醫學進修積分點零點五分，請注意，參加者必須同時回答兩個小測驗之問題。至於今期之答案將刊於下一期《持續醫學進修專訊》之中。

### ➤➤ Clinical Cardiology Series 臨床心臟科個案研究

Controversies in the Management of Atrial Fibrillation

Please indicate true or false to the following statements with supporting explanation.

1. *Maintenance of sinus rhythm is always more important than rate control.*
2. *3 weeks of anticoagulation is the norm prior to electrical cardioversion.*
3. *Amiodarone is the best drug for maintenance of sinus rhythm.*
4. *Digoxin is the best drug for rate control.*

The content of the Clinical Cardiology Series is provided by:

**Dr. Li Siu Lung, Steven**

M.B., B.S.(H.K.), M.R.C.P.(U.K.), F.H.K.A.M., F.H.K.C.P., F.R.C.P.(Glasg.), F.R.C.P. (Edin.),  
Specialist in Cardiology

**Dr. Wong Shou Pang, Alexander**

F.R.C.P., F.H.K.A.M.(Med.), F.H.K.C.P., Specialist in Cardiology

臨床心臟科個案研究之內容誠蒙李少隆醫生及王壽鵬醫生提供。

4. *Beta-blocker therapy is an acceptable alternative to pre-operative non-invasive cardiac stress testing.*

False

5. *Chronic renal insufficiency is a cardiac risk factor for surgery.*

True

In general, a resting 12 lead ECG does not have predictive value in patients undergoing low risk surgery. However, in patients with known ischemic heart disease undergoing high risk surgery, horizontal or downsloping ST depression greater than 0.5mm, LVH with strain pattern and LBBB on a resting ECG are clinical predictors of increased peri-operative risk.

According to ACC/AHA Shortcut to non-invasive testing in pre-operative patients, if two or more of the following three factors are present, non-invasive testing is indicated:

- 1) Intermediate clinical predictors are present (Canadian class 1 or 2 angina, prior MI based on history or pathological Q waves, compensated or prior failure, or diabetes);
- 2) Poor functional capacity (<4 METs), high surgical risk procedure (aortic repair or peripheral vascular surgery);
- 3) Prolonged surgical procedures with larger fluid shifts or blood loss.

Beta-blocker therapy is not an acceptable alternative to pre-operative non-invasive cardiac stress testing. Non-invasive cardiac stress testing is needed to identify patients at risk of myocardial ischemia, for which beta-blocker therapy reduces mortality.

Class I recommendations for peri-operative beta blocker use, according to ACC/AHA include:

- 1) Beta blockers required in the recent past to control symptoms of angina or patients with symptomatic arrhythmias or hypertension;
- 2) Patients at high cardiac risk owing to the findings of ischemia on pre-operative testing who are undergoing vascular surgery.

According to Boersma et al, the cardiac risk criteria for beta blocker in the peri-operative period include:

- 1) High risk surgical procedures, defined as intraperitoneal, intrathoracic, or suprainguinal vascular procedures;
- 2) Ischemic heart disease, defined as history of MI, recurrent angina, use of nitrates, positive stress test, Q waves on ECG, patients who have undergone percutaneous transluminal coronary angioplasty or coronary artery bypass graft surgery and who have chest pain presumed to be of ischemic origin;
- 3) Cerebrovascular disease with history of TIA or stroke;
- 4) Insulin requiring DM; and
- 5) Chronic renal insufficiency defined as a baseline creatinine level of >2.0mg/dl.

### ➤➤ Answers to May 2004 Clinical Cardiology Series 臨床心臟科個案研究 二零零四年五月份答案

Issues on peri-operative evaluation of patients with cardiac risks for non-cardiac surgery

*Please state true or false to the following statements and explain.*

1. *Left bundle branch block on a resting 12 leads ECG is a cardiac risk factor.*

True

2. *Non-invasive cardiac stress test is indicated pre-operatively in diabetic patients.*

True

3. *Non-invasive cardiac stress test is indicated pre-operatively in patients with pathological Q waves on ECG.*

True

## »» Dermatology Series 皮膚科病例研究

A 40 year old gentleman presented with asymptomatic linear reddish depressions on his right axilla extending to nearby back, shoulder and arm for six months. There was no similar lesion elsewhere. He admitted preceding application of over-the-counter topical drug for 'fungal' infection on the right axilla before occurrence of the skin lesion. His past health was good. There was no recent weight gain.

1. *What are these skin lesions and what is the most likely cause in this patient?*
2. *What are the other common causes of the skin lesions?*
3. *What are the common sites of involvement seen in otherwise normal individuals?*
4. *What are the main histological features?*
5. *What are the possible treatments?*



The content of the Dermatology Series is provided by:  
**Dr. Tang Yuk Ming, William** and **Dr. Chan Loi Yuen**  
Specialists in Dermatology & Venereology  
皮膚科病例研究之內容誠蒙鄧旭明醫生及陳來源醫生提供。



## »» Answers to May 2004 Dermatology Series 皮膚科病例研究 二零零四年五月份答案

A 45 year old male presented with change in colour of his toenail for six months. There was no other symptom. His past health was good. Physical examination revealed whitish discoloration over his left big toe nail. There was also plantar and toe-web scales.

1. *What are the clinical diagnosis and differential diagnoses?*  
The clinical diagnosis is onychomycosis (OM). This patient has the white superficial onychomycosis subtype. Differential diagnoses include other causes of acquired or congenital leukonychias.
2. *What are the different subtypes of this condition?*  
OM is most frequently caused by dermatophyte. Yeast and nondermatophyte moulds are less common pathogens. The three subtypes of OM include distal lateral subungual OM (DLSO), white superficial OM (WSO) and proximal subungual OM (PSO). DLSO is the most common form in which the dermatophyte spread from plantar skin; causing onycholysis, subungual debris and discoloration beginning at the hyponychium and spread proximally. In WSO, the surface of nail plate is directly invaded, resulting in a white crumbly nail surface. PSO begins underneath the proximal nailfold and frequently associated with immunosuppressed conditions. Total dystrophic OM refers to the most advanced form of any subtype.
3. *What are the investigations?*  
Nail specimen should be examined under microscope after potassium hydroxide preparation to review the presence of septate hyphae. Identification of the species require a fungal culture. Immunosuppressed condition may need to be ruled out in case of PSO.
4. *What are the usual causative agents?*  
Trichophyton rubrum is the most common dermatophyte reported, especially for the DLSO and PSO. WSO is usually caused by Trichophyton mentagrophytes.
5. *What are the treatments?*  
The patients should be advised to avoid risk factors such as trauma to nail, communal bathing and occlusive footwear. Topical antifungal agents such as amorolfine and ciclopirox nail lacquer could be used if the nail plate involvement is less than 50% and for patients who refuse or intolerant to systemic therapy. Systemic antifungal agents including terbinafine and itraconazole have the advantage of shorter treatment course, higher cure rate and less side effects. A cure rate of up to 80% may be achieved after three months treatment.

# CME for July 2004

## Lecture 二零零四年七月之進修講課

### CME Event 講課簡介

### Venue & Time 地點及時間

15 July 2004 (Thursday)

#### HKMA Structured CME Programme with HKS&H - Role of Therapeutic Endoscopy in Digestive Disease

**Dr. Chan Chi Wai, Angus**

Coordinator, Endoscopy Service, HKS&H  
 M.B.Ch.B.(Hons.)(CUHK), M.D.(CUHK), F.R.C.S.(Edin.), F.C.S.H.K.,  
 F.H.K.A.M. (Surgery), F.A.C.S., Specialist in General Surgery

This symposium is co-organized with Hong Kong Sanatorium & Hospital.



The HKMA Dr. Li Shu Pui Professional Education Centre  
 2/F, Chinese Club Building  
 21-22 Connaught Road Central, HK  
 Lecture: 2:00 - 3:00 p.m.  
 (Light lunch: 1:15 p.m.)

香港中環干諾道中二十一至二十二號  
 華商會所大廈二樓  
 香港醫學會李樹培醫生專業教育中心  
 講課：下午二時至三時正  
 [茶點於下午一時十五分開始]

Registration: Please fill in and return the Registration Form together with a cheque of adequate amount made payable to "The Hong Kong Medical Association" to 5/F Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong. Each lecture will carry 1 CME point under the MCHK/HKMA CME Programme. Accreditation from other colleges is pending.

報名方法: 請填妥表格連同支票寄交香港灣仔軒尼詩道十五號溫莎公爵社會服務大廈五樓，支票抬頭請書明支付「香港醫學會」。參加者可獲醫務委員會/香港醫學會持續醫學進修計劃積分一分。其他專科學院之學分尚在申請中。

Please register for participation. First come, first served. 名額有限 請早登記



I would like to register for the following CME lecture(s):

本人欲報名參加以下講課：

Please "✓" as appropriate. 請在適用處加上「✓」號

	HKMA Member HK\$50	CME Participants HK\$80
<b>Structured CME with HKS&amp;H</b>		
15 July 2004 : Role of Therapeutic Endoscopy in Digestive Disease	<input type="checkbox"/>	<input type="checkbox"/>

I enclose herewith a cheque of  
 現隨表格附上支票一張作為講課之報名費用： HK\$港幣 \_\_\_\_\_

Name 姓名: \_\_\_\_\_ Tel No. 電話: \_\_\_\_\_ Fax No. 傳真: \_\_\_\_\_

HKMA Membership No. 會員編號  
 or HKMA CME No. 或進修號碼: \_\_\_\_\_ Signature 簽名: \_\_\_\_\_

Data collected will be used and processed for the purposes related to the MCHK/HKMA CME Programme only. All registration fees are not refundable or transferable. 個人資料將用於有關香港醫學會持續醫學進修計劃之事宜。所有報名費用將不給予退還或轉授予其他會員。



The Hong Kong Medical Association



Kwong Wah Hospital



醫院管理局  
HOSPITAL  
AUTHORITY

Lecture	Date	Topic
III	27 Jun 2004	<b>Gastroenterology &amp; Hepatology</b> 1. <b>Malabsorption Syndrome</b> <b>Dr. Fung Tang Tat</b> <i>Specialist in Gastroenterology, Dept of M&amp;G, KWH</i> 2. <b>Management of Obstructive Jaundice</b> <b>Dr. Yeung Yuk Pang</b> <i>Associate Consultant, Dept of Surgery, KWH</i>
IV	25 Jul 2004	<b>Cardiology</b> 1. <b>Management of Cardiac Arrhythmia</b> <b>Dr. Lam Tse Fun, Cathy</b> <i>Specialist in Cardiology, Dept of M&amp;G, KWH</i> 2. <b>Interpretation of Echocardiogram of Common Cardiac Disease</b> <b>Dr. Tam Chi Ming</b> <i>Specialist in Cardiology, Dept of M&amp;G, KWH</i>
V	22 Aug 2004	Rheumatology & Rehabilitation
VI	26 Sept 2004	Endocrinology and DM
VII	24 Oct 2004	Renal Medicine
VIII	28 Nov 2004	Stroke and Geriatrics
IX	19 Dec 2004	Psychiatry
X	23 Jan 2005	Paediatrics
XI	27 Feb 2005	Traditional Chinese Medicine
XII	27 Mar 2005	General Surgery & Orthopaedics

- **Venue** : Lecture Theatre, 10/F, Yu Chun Keung Memorial Medical Centre, KWH
- **Date** : April 2004 to March 2005
- **Time** : 2:00 – 5:00 pm
- **Fee** : HK\$50 per lecture for HKMA members  
HK\$80 per lecture for CME Participants
- **地點** : 廣華醫院余振強紀念中心十樓演講廳
- **日期** : 二零零四年四月至二零零五年三月
- **時間** : 下午二時至五時正
- **報名費用** : 醫學會會員－每課堂港幣五十元正  
持續進修參加者－每課堂港幣八十元正

*Light snacks and lecture notes will be provided.*

敬備茶點及講義

Registration: Please fill in and return the Registration Form on p.11 together with a cheque of adequate amount made payable to "The Hong Kong Medical Association" to 5/F Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong. Each lecture will carry 3 CME points under the **MCHK/HKMA CME Programme**.

報名方法：請填妥第十一頁之表格連同支票寄交香港灣仔軒尼詩道十五號溫莎公爵社會服務大廈五樓，支票抬頭請書明支付「香港醫學會」。參加者可獲醫務委員會／香港醫學會持續醫學進修計劃積分三分。



The Hong Kong Medical Association



Queen Elizabeth Hospital

Lecture	Date	Topic
IV	11 July 2004	<b>ENT</b> <b>Diseases of Ear, Nose and Throat</b> <b>Dr. Lai Hin Wang</b> <i>Consultant, Department of ENT</i> <b>Dr. Chong Hou Ming</b> <i>MO, Department of ENT</i>
V	8 Aug 2004	<b>Obstetrics &amp; Gynaecology</b> <b>1. The Problem of No Problems</b> <b>Dr. Chan Yuk May, May</b> <i>Consultant, Department of O&amp;G</i> <b>2. Management of Infertile Couple</b> <b>Dr. Chow Mei Sin</b> <i>SMO, Department of O&amp;G</i> <b>X-Ray</b> <b>3. Radiology Review for General Practitioners</b> <b>Dr. Lai Kwok Chung</b> <i>MO, Department of Radiology &amp; Imaging</i>
VI	12 Sep 2004	Orthopaedics
VII	10 Oct 2004	Surgery & Neurosurgery

- **Venue** : Lecture Theatre, G/F, Block M, QEH
- **Date** : April 2004 to March 2005
- **Time** : 2:00 – 5:00 pm
- **Fee** : HK\$50 per lecture for HKMA members  
HK\$80 per lecture for CME Participants

- **地點** : 伊利沙伯醫院M座地下演講廳
- **日期** : 二零零四年四月至二零零五年三月
- **時間** : 下午二時至五時正
- **報名費用** : 醫學會會員 – 每課堂港幣五十元正  
持續進修參加者 – 每課堂港幣八十元正

*Light snacks and lecture notes will be provided. 敬備茶點及講義*

*First come, first served. 名額有限 請早登記*

## HKMA Structured CME Programme at QEH/KWH – Registration Form

### 香港醫學會分科進修課程報名表格

I would like to register for the following lecture(s):

本人欲報名參加以下講課：

			HKMA Member HK\$50	CME Participants HK\$80
KWH	27 Jun 2004:	Gastroenterology & Hepatology	<input type="checkbox"/>	<input type="checkbox"/>
	25 Jul 2004:	Cardiology	<input type="checkbox"/>	<input type="checkbox"/>
QEH	11 July 2004:	ENT	<input type="checkbox"/>	<input type="checkbox"/>
	8 Aug 2004:	Obstetrics & Gynaecology & X-Ray	<input type="checkbox"/>	<input type="checkbox"/>

Please "✓" as appropriate 請在適用處加上「✓」號

I enclose herewith a cheque of

現隨表格付上支票一張作為講課之報名費用：HK\$港幣\_\_\_\_\_

Name 姓名：\_\_\_\_\_ Tel No. 電話：\_\_\_\_\_ Fax No. 傳真：\_\_\_\_\_

HKMA Membership No. 會員編號

or HKMA CME No. 或進修號碼：\_\_\_\_\_ Signature 簽名：\_\_\_\_\_

Data collected will be used and processed for the purposes related to the MCHK/HKMA CME Programme only. All registration fees are not refundable or transferable. 個人資料將用於有關香港醫學會持續醫學進修計劃之事宜。所有報名費用將不給予發還或轉授予其他會員。

# Answer Sheet for June 2004

## 二零零四年六月號答題紙

Please return completed answer sheet to the HKMA Secretariat on or before 15 July 2004 for documentation. 1 CME point will be awarded for answering the Monthly Self-Study Series (I) and an extra 0.5 CME point for completing the Clinical Case Study (II). (Fax: 2865 0943)

請回答所有問題，並於二零零四年七月十五日前將答題紙傳真或寄回至香港醫學會。參加者將可獲持續醫學進修積分點—每月自修系列：一分；「專科個案剖析」系列：零點五分。(傳真號碼：2865 0943)

### (I) Update on Dementia

(Please indicate "T" or "F" in each box.)

1	2	3	4	5	6	7	8	9	10

#### ANSWERS TO MAY 2004 ISSUE 香港醫學會持續醫學進修計劃 每月自修資料二零零四年五月號答案

*Doctors, Please Have a CIDER Before You Prescribe Benzodiazepines to Your Patients*

1.	F	6.	T
2.	T	7.	T
3.	T	8.	T
4.	F	9.	F
5.	T		

姓名  
Name: \_\_\_\_\_

香港醫學會會員編號  
或持續進修編號  
HKMA Membership No.  
or HKMA CME No.: \_\_\_\_\_

香港身份證號碼   -     X X ( X )  
HKID No.:

簽名  
Signature: \_\_\_\_\_

聯絡電話  
Contact Tel. No.: \_\_\_\_\_

### (II) Clinical Case Study

(Please answer both quizzes and write down the answers in the space provided.)

#### (A) Clinical Cardiology Series

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

#### (B) Dermatology Series

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

# CME Calendar

## 持續進修日程

Date/Time 日期/時間	Function 活動	CME Accreditation 進修積分											Remarks/ Contact Info 備註及聯絡電話				
		MCHK & HKMA	HKCA	HKCCM	HKCEM	HKCFP	HKCOG	COHK	HKCOS	HKCORL	HKCPaed	HKCPATH		HKCP	HKCPsy	HKCR	CSHK
Jun 2004	<b>HKMA CME Programme</b> Monthly Self-Study Series – Update on Dementia	1															Fax answer sheet to Fax: 2865 0943 By 15 July 2004 Fax: 2506 1378
15 Jun 2004 (Tue) 2:30 – 4:30 pm	<b>The Hong Kong College of Psychiatrists</b> Molecular Genetics of: Alzheimer's Disease, Down's Syndrome, Velo-cardio-facial syndrome, schizophrenia, mood disorders <i>Conference Room 1, 2/F, Main Building, Kowloon Hospital, Kln</i>	2															Ms. Marina Pun Tel: 3513 4888
15 Jun 2004 (Tue) 4:30 – 5:45 pm	<b>The Hong Kong College of Psychiatrists</b> Seminar on classical genetic studies <i>Conference Room 1, 2/F, Main Building, Kowloon Hospital, Kln</i>	1															Ms. Marina Pun Tel: 3513 4888
16 Jun 2004 (Wed) 9:00 – 1:00 pm	<b>HA – Tuen Mun Hospital</b> Basic Infection Control Training Course <i>D1002 (Discussion Room), 1/F Main Block, Tuen Mun Hospital, NT</i>	3															Ms. Anita Au Yeung Tel: 2468 5777
16 Jun 2004 (Wed) 12:30 – 1:45 pm	<b>Our Lady of Maryknoll Hospital – Dept of Medicine &amp; Geriatrics</b> Wednesday Educational Meeting: Grand Round: Pain Management in Advanced Cancer <i>Training Room 1, 1/F, OPD Block, Our Lady of Maryknoll Hospital, Kln</i>	1															Tel: 2354 2250
16 Jun 2004 (Wed) 1:15 – 2:45 pm	<b>Pamela Youde Nethersole Eastern Hospital</b> Available Resources in the Community <i>Lecture Hall (Room: PB.01.014), 1/F Pathology Block, Pamela Youde Nethersole Eastern Hospital, HK</i>	1															Ms. Amy Ng Tel: 2595 6887
16 Jun 2004 (Wed) 1:30 – 3:15 pm	<b>Hong Kong Academy of Medicine</b> The Use of Quinolones in Clinical Practice; The Acutely Injured Knee <i>Lecture Theatre, M Block, Queen Elizabeth Hospital, Kln</i>	2															Tel: 2871 8787
16 Jun 2004 (Wed) 1:30 – 3:30 pm	<b>HKMA – Tai Po Community Network</b> Common Mood Disorders in General Practice <i>Capital Seafood Restaurant, Fortune Plaza, Tai Po, N. T.</i>	2															Ms. Pansy Yu Tel: 2833 6380
16 Jun 2004 (Wed) 2:00 – 4:30 pm	<b>Department of Community Medicine, The University of Hong Kong</b> HKU/ RFCID Joint Scientific Seminar – "New methods in the study and control of infectious disease epidemics: the role of quantitative methodologies in helping policy formulation" <i>Seminar Rm 5, LG1, Laboratory Block, Faculty of Med Building, 21 Sassoon Rd</i>	2															commmed@hkucc.hku.hk
16 Jun 2004 (Wed) 2:00 – 3:00pm	<b>United Christian Hospital</b> Perinatal risks of IVF pregnancies <i>Conference Room, Hospital Library, 1/F, Block H, UCH</i>	1															Ms. Judy Chan Tel: 3513 4851
16 Jun 2004 (Wed) 2:15 – 3:15 pm	<b>Hong Kong Doctors Union</b> Video Cassette Session – Clinical Case Reviews: the Medical / Legal Aspects of Pain Management <i>Room 901, Hang Shing Building, 363-373 Nathan Road, Kln</i>	1															Tel: 2388 2728
17 Jun 2004 (Thu) 12:30 – 1:30 pm	<b>Prince of Wales Hospital</b> One stop menstrual clinic audit <i>Seminar Room 1E, PVH</i>	1															Ms. Alice Lai Tel: 2632 2810
17 Jun 2004 (Thu) 12:30 – 3:00 pm	<b>The Association of Licentiate of Medical Council of Hong Kong</b> MSCT Application: Virtual Colonoscopy & Lung Cancer Screening & Detection <i>九龍尖沙咀彌敦道20號喜來登酒店三樓宴會廳</i>	1															Tel: 2327 2869
17 Jun 2004 (Thu) 1:00 – 3:00 pm	<b>Hong Kong Doctors Union – Tseung Kwan O Study Group</b> Recent Advance in the Treatment of Hepatitis B and C <i>Maxim's Chinese Restaurant, Shop No. 2008, Level 2 Metro City Plaza II, Tseung Kwan O, Kln</i>	1															Tel: 2388 2728
17 Jun 2004 (Thu) 2:00 – 3:00 pm	<b>HKMA CME Programme, Hong Kong Sanatorium &amp; Hospital</b> HKMA Structured CME Programme with Hong Kong Sanatorium & Hospital – Update on Treatment of Liver Cancer <i>HKMA Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, HK</i>	1	1	—	0.5	1	1	0.5	—	0.5	—	1	1	1	—	1	Members: \$50 Non-M: \$80 Tel: 2861 1979
18 Jun 2004 (Fri) 2:00 – 3:00 pm	<b>Union Hospital</b> Arthroscopic Shoulder Surgery <i>Sem Rm, 2/F, Med Centre Union Hospital, 18 Fu Kin Street, Tai Wai, Shatin, NT</i>	1				1											Tel: 2608 3388
18 Jun 2004 (Fri) 6:45 – 9:45 pm	<b>HKU Family Institute</b> Searching for Competence: Working with Families with Mental Handicap <i>HKU Family Institute, 5/F Tsan Yuk Hospital, 30 Hospital Road, Sai Ying Pun, HK</i>	3															Tel: 2859 5300
19-20 Jun 2004 (Sat-Sun)	<b>CUHK – Faculty of Medicine, Dept of Medicine and Therapeutics</b> Advances in Medicine 2004 <i>Hong Kong Convention and Exhibition Centre, HK</i>	10	12			7		5			9		11	12	11		Ms. Lenora Yung Tel: 2871 8841
19 Jun 2004 (Sat) 10:30 – 5:00 pm	<b>World Cancer Research Fund Hong Kong</b> Cancer Prevention: Transition from Policy to Practice <i>JW Marriot Hotel, HK</i>	5		4									1				Mr. Spencer Tong Tel: 2529 5025
19 Jun 2004 (Sat) 11:00 – 12:30 pm	<b>Kowloon East Cluster/ HKCOG</b> Hysterectomy audit – KE Cluster <i>Conference Room, 3/F, Dept of O&amp;G, TKOH</i>	2															Ms. Cochinn Young Tel: 2208 0948
19 Jun 2004 (Sat) 12:30 – 10:00 pm	<b>Hong Kong Geriatrics Society</b> Annual Scientific Meeting 2004 <i>Marco Polo Hong Kong Hotel, TST, Kln</i>	4.5															Tel: 2749 8228
19 Jun 2004 (Sat) 1:00 – 4:45 pm	<b>Hong Kong Paediatric Society, Hong Kong College of Paediatricians</b> Update Series on Child Health 2004 – Session 1: Current Advances in Epilepsy Management; Introduction to Positive Parenting <i>Ballroom, 3/F, Sheraton Hong Kong Hotel, TST, Kln</i>	2															Ms. Kwong Tel: 2859 6421
19 Jun 2004 (Sat) 1:30 – 3:45 pm	<b>United Christian Hospital, Kwun Tong District Health Committee</b> Refresher Course for Health Personnel 2004 (Session 4: Travel Medicine; Management of diarrhoea in children and infants) <i>Lecture Theatre, G/F, Block P, United Christian Hospital, Kln</i>	1.5															Ms. Marina Pun Tel: 2379 4888

\* Colleges accreditation pending  
# Total CME points for entire course

# CME Calendar 持續進修日程

Date/Time 日期/時間	Function 活動	CME Accreditation 進修積分											Remarks/ Contact Info 備註及聯絡電話				
		MCHK & HKMA	HKCA	HKCCM	HKCEM	HKCFP	HKCOG	COHK	HKCOS	HKCORL	HKCPaed	HKCPath		HKCP	HKCPsy	HKCR	CSHK
19 Jun 2004 (Sat) 1:30 – 4:45 pm	<b>HKMA CME Programme</b> Seminar in Infectious Diseases – Diagnostic Microbiology for Clinicians <i>Hospital Hall, 8/F Block G, Princess Margaret Hospital, NT</i>	2.5														Tel: 2861 1979 Free of Charge*	
20 Jun 2004 (Sun) 1:30 – 4:45 pm	<b>CUHK – Department of Medicine &amp; Therapeutics</b> Certificate Course in Diabetes Management and Education Year 2004 (Module 1: Diabetic Complications) <i>4/F Sheraton Hong Kong Hotel &amp; Towers, 20 Nathan Road, Kowloon</i>	3		3		2	3				3	3	1.5		3	3	Ms. Charmaine Lee Tel: 2632 5752
20 Jun 2004 (Sun) 1:00 – 4:00 pm	<b>Hong Kong Doctors Union</b> The 55th HKDU Sunday Afternoon Symposium <i>Lecture Hall, 8th Floor, Block G, Princess Margaret Hospital, Kwai Chung, N.T.</i>	1.5															Members: \$50 Non-M: \$100 Tel: 2388 2728
20 Jun 2004 (Sun) 2:45 – 6:00 pm	<b>Hong Kong Doctors Union</b> The 56th HKDU Sunday Afternoon Symposium <i>Lecture Hall, 8th Floor, Block G, Princess Margaret Hospital, Kwai Chung, N.T.</i>	2															Members: \$50 Non-M: \$100 Tel: 2388 2728
20 Jun 2004 (Sun) 5:00 – 7:00 pm	<b>Association of Medical Practitioners of Societies' Clinics, Sun Yat-Sen University of Medical Sciences Hong Kong Alumni Association, Hong Kong China Association of Medical Specialism</b> 心臟衰竭的治療 <i>九龍尖沙咀廣東道5號海洋皇宮酒樓</i>	2															周祕書 Tel: 2783 8988
21 Jun 2004 (Mon) 10:00 – 12:00 pm	<b>Department of O&amp;G, KWH</b> Twin Pregnancy Assessments -More than Double Trouble! <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
21 Jun 2004 (Mon) 2:30 – 4:30 pm	<b>Department of O&amp;G, KWH</b> Management of multiple pregnancies (workshop) <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
23 Jun 2004 (Wed) 8:00 – 9:30 am	<b>HA – Pamela Youde Nethersole Eastern Hospital, Dept of Clinical Oncology</b> Lecture – Treatment of Lymphoma – Past, Present and Future (II) <i>Room 048, Clinical Oncology Dept, Pamela Youde Nethersole Eastern Hospital, HK</i>	2															Ms. Clara Tsang Tel: 2595 4175
23 Jun 2004 (Wed) 10:00 – 12:00 pm	<b>Department of O&amp;G, KWH</b> Doppler Assessment – Where are we? <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
23 Jun 2004 (Wed) 12:30 – 1:45 pm	<b>Our Lady of Maryknoll Hospital – Dept of Medicine &amp; Geriatrics</b> Wednesday Educational Meeting: Grand Round: Case Presentation <i>Training Room I, 1/F, OPD Block, Our Lady of Maryknoll Hospital, Kln</i>	1															Tel: 2354 2250
23 Jun 2004 (Wed) 1:30 – 3:30 pm	<b>HKMA – Tai Po Community Network</b> Common Mood Disorders in General Practice <i>Capital Seafood Restaurant, Fortune Plaza, Tai Po, N. T.</i>	2															Ms. Pansy Yu Tel: 2833 6380
23 Jun 2004 (Wed) 2:30 – 4:30 pm	<b>Department of O&amp;G, KWH</b> Fetal Wellbeing Assessment (workshop) <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
23 Jun 2004 (Wed) 2:30-3:00 pm	<b>United Christian Hospital</b> Caesarean section audit 04/04 <i>Conference Room, Hospital Library, 1/F, Block H, UCH</i>	1															Ms. Judy Chan Tel: 3513 4851
24 Jun 2004 (Wed) 12:30 – 1:30 pm	<b>Prince of Wales Hospital</b> Perinatal meeting <i>Seminar Room 1E, PWH, Sha Tin, N.T.</i>	1															Ms. Alice Lai Tel: 2632 2810
24 Jun 2004 (Wed) 4:30 – 5:30 pm	<b>HA – Pamela Youde Nethersole Eastern Hospital, Dept of Paed &amp; Adol Med</b> Education Program on Paediatric Rehabilitation – Paediatric Articulation Development Paediatric ST Service Provision in HA <i>Room 01, G/F Multicentre Block B, Pamela Youde Nethersole Eastern Hospital, HK</i>	1															Ms. Suki Tsang Tel: 2595 6860
24 Jun 2004 (Wed) 6:30 – 7:30 pm	<b>HA – Princess Margaret Hospital, Cardiac Team Dept</b> Lecture for Updating the knowledge on Device Management for Cardiac Arrhythmias and Heart Failure Course – Cardiac Resynchronization Therapy for Heart Failure II <i>Hall, 8/F Block G, Princess Margaret Hospital, NT</i>	1															Ms. Ceci Tsui Tel: 2990 3151
24 Jun 2004 (Thur) 6:30 – 7:30 pm	<b>Department of O&amp;G, KWH</b> HKCOG Lecture: Prenatal Diagnosis: The Way Forward <i>Mirama Hotel, TST, Kln</i>	1															Dr. Tse Hei Yee Tel: 2781 5056
24-27 Jun 2004 (Wed – Sun)	<b>Medical Conferences</b> 3rd Asia Pacific Anti-ageing Conference – Cancer, Brain Ageing, Diet & Hormones <i>Raffles City Convention Centre, Singapore</i>	10															Ms. Cecilia Wong Tel: (65) 6731 4822
25 Jun 2004 (Fri) 10:00 – 12:00 pm	<b>Department of O&amp;G, KWH</b> Telemedicine in Prenatal Diagnosis <i>Seminar Room, N10, Kwong Wah Hospital</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
25 Jun 2004 (Fri) 12:30 – 1:30 pm	<b>Tuen Mun Hospital</b> Chronic pelvic pain and endometriosis <i>Room F2029, 2/F, Special Block, Tuen Mun Hospital, N.T.</i>	1															Ms. Angela Cheung Tel: 2454 5568
25 Jun 2004 (Fri) 1:15 – 3:00 pm	<b>Tsuen Wan Adventist Hospital</b> Pain Management <i>Longwall Hall / Auditorium, Tsuen Wan Adventist Hospital, 199 Tsuen King Circuit, Tsuen Wan, NT</i>	1															Tel: 2276 7180
25 Jun 2004 (Fri) 2:30 – 4:30 pm	<b>Department of O&amp;G, KWH</b> Fetal echocardiography (workshop) <i>Seminar Room, N10, Kwong Wah Hospital</i>	2															Dr. Tse Hei Yee Tel: 2781 5056
27 Jun 2004 (Sun) 7:30 – 8:30 am	<b>Hong Kong Sanatorium &amp; Hospital</b> Advances in Treatment for Gram-Positive Infections <i>Auditorium, 4/F Li Shu Pui Block, Hong Kong Sanatorium &amp; Hospital, HK</i>	1				1						1	1		1		Fax: 2807 2496

\* Colleges accreditation pending  
# Total CME points for entire course

# THE SOCIETY OF PHYSICIANS OF HONG KONG

CME Lecture July 14, 2004 (Wednesday)

## Risk Factor Modification in Patients with Diabetes

**Speaker** : **Dr. Tsui Yee Ling, Elaine** (崔綺玲醫生)  
MBBS Hons(HK), FRCP(Edin, Lond), FRCP(C)

**Chairman** : **Dr. Lam Tat Chung, Paul** (林達聰醫生)  
President, The Society of Physicians of Hong Kong  
FRCP, FHKAM(Medicine), FHKAM(Psychiatry)

Place : HKMA Dr. Li Shu Pui Professional Education Centre

Time : 1:30 pm Light Lunch  
2:00-3:00 pm Lecture

Sponsor : Pfizer Corporation Hong Kong Limited

CME Points : Under application

Enquiry : Ms. Becky Chiu  
Tel. 2526 2626

Space for Name Card (in English)

Open to doctors free of charge.

On first-come first-serve basis.

To register, please fax this advertisement  
to **2579 0599**

# THE SOCIETY OF PHYSICIANS OF HONG KONG

CME Lecture July 16, 2004 (Friday)

## Anxiety & Depression in Children & Adolescents

**Speaker** : **Dr. Luk Siu Luen, Ernest** (陸兆鑾醫生)  
MD(HK), MRC Psych., FRANZCP, FHKC Psych., FHKAM (Psychiatry)

**Chairman** : **Dr. Lam Tat Chung, Paul** (林達聰醫生)  
President, The Society of Physicians of Hong Kong  
FRCP, FHKAM(Medicine), FHKAM(Psychiatry)

Place : HKMA Dr. Li Shu Pui Professional Education Centre

Time : 1:30 pm Light Lunch  
2:00-3:00 pm Lecture

Sponsor : Hind Wing Co. Ltd. (顯榮行有限公司)

CME Points : Under application

Enquiry : Ms. Becky Chiu  
Tel. 2526 2626

Space for Name Card (in English)

Open to doctors free of charge.

On first-come first-serve basis.

To register, please fax this advertisement  
to **2854 0695 (Attn. Mr. Patrick Leung)**

# CME Calendar 持續進修日程

Date/Time 日期/時間	Function 活動	CME Accreditation 進修積分													Remarks/ Contact Info 備註及聯絡電話		
		MCHK & HKMA	HKCA	HKCCM	HKCEM	HKCFP	HKCOG	COHK	HKCOS	HKCORL	HKCPaed	HKCPath	HKCP	HKCPsy		HKCR	CSHK
27 Jun 2004 (Sun) 10:00 – 12:00 noon	<b>St. Teresa's Hospital – Surgical Committee</b> Haemoptysis; Evolution of Cardiothoracic Surgery in China; New & Upcoming Therapies in Coronary By-Pass Surgery <i>9/F Conference Room, St. Teresa's Hospital, Kln</i>	2	2		2	1.5									2	Dr. Lawrence Chan Tel: 2780 2226	
27 Jun 2004 (Sun) 1:30 – 4:30 pm	<b>CUHK – Dept of Medicine &amp; Therapeutics</b> CUHK Diploma Programme in Advanced Internal Medicine 2004-05 – Parkinsonism <i>Plaza Conference Centre, 35/F Central Plaza, 18 Harbour Road, HK</i>	3	15#	10#	20#		5#	1		2#	18#				18#	Ms. Isabella Fu Tel: 2632 3996	
27 Jun 2004 (Sun) 2:00 – 5:00 pm	<b>HKMA CME Programme, Kwong Wah Hospital</b> HKMA Structured CME Programme at KWH (III) – Gastroenterology & Hepatology <i>Lect Theatre, 10/F, Yu Chun Keung Memorial Medical Centre, KWH, Kln</i>	3	3		2	2		1.5		1	1	1.5	2	3		3	Members: \$50 Non-M: \$80 Tel: 2861 1979
27 Jun 2004 (Sun) 2:00 – 5:00 pm	<b>Hong Kong College of Family Physicians</b> Surgical Update <i>The Ballroom, 2/F, Langham Hotel, 8 Peking Road, TST, Kln</i>	3														Ms. Kara Lo Tel: 2861 0230	
27 Jun 2004 (Sun) 5:00 – 8:00 pm	<b>CUHK – Dept of Medicine &amp; Therapeutics</b> CUHK Diploma Programme in Advanced Internal Medicine 2004-05 – Epilepsy <i>Plaza Conference Centre, 35/F Central Plaza, 18 Harbour Road, HK</i>	3	15#	10#	20#		5#	1		2#	18#				18#	Ms. Isabella Fu Tel: 2632 3996	
28 Jun 2004 (Mon) 10:00 -12:00 pm	<b>Department of O&amp;G, KWH</b> Update on management of Twin-twin– transfusion syndrome <i>Seminar Room, N10, Kwong Wah Hospital</i>	2														Dr. Tse Hei Yee Tel: 2781 5056	
28 Jun 2004 (Mon) 2:30 -4:30 pm	<b>Department of O&amp;G, KWH</b> Interesting Obstetric Cases (workshop) <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	2														Dr. Tse Hei Yee Tel: 2781 5056	
28 Jun 2004 (Mon) 6:30 -7:30 pm	<b>Department of O&amp;G, KWH</b> Visiting Professorship's Lecture-Fetal Therapy <i>Seminar Room, N10, Kwong Wah Hospital, Kln</i>	1														Dr. Tse Hei Yee Tel: 2781 5056	
29 Jun 2004 (Tue) 1:00 – 3:00 pm	<b>The Hong Kong Medical Association</b> Seminar on Food Safety <i>HKMA Wanchai Headquarter Office, 5/F Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, HK</i>	1														Ms. Amy Ng Tel: 2527 8941*	
29 Jun 2004 (Tue) 1:00 – 3:00 pm	<b>HKDU Tsuen Wan Study Group</b> Laparoscopic Emergency Operations <i>Lecture Theatre, Nursing School, 3/F, Block A, Yan Chai Hospital, HK</i>	1														Dr. Ng Yu Kin Tel: 2492 1745	
29 Jun 2004 (Tue) 1:30 – 3:00 pm	<b>HA – Caritas Medical Centre, Dept of Family Med, Hong Kong College of Family Physicians, Hong Kong Doctors Union</b> Lecture – Joint Medical Programme Working with Families <i>Staff Lounge, 1/F Wai Oi Block, Caritas Medical Centre, Kln</i>	2														Ms. Helen Lo Tel: 3408 7921	
29 Jun 2004 (Tue) 2:00 – 3:00 pm	<b>Practising Estate Doctors' Association</b> Problem Cases of Skull & Hair <i>Hang Fook Lau Seafood Restaurant, 2/F Cheung Sha Wan Plaza, 833 Cheung Sha Wan Road, Kln</i>	1														Ms. Bally Wong Tel: 2385 3988	
29 Jun – 1 Jul 2004 (Tue-Thu)	<b>International Society of Nephrology, Hong Kong Society of Nephrology</b> 2004 Conference on Prevention of Progression of Renal Disease <i>Hong Kong Convention and Exhibition Centre</i>	10#	14.5#		6#	9.5#	5#	7#		2#	14#	10#	14.5#	14#	14.5#	14.5#	Congress Secretariat Tel: 2559 9973
30 Jun 2004 (Wed) 1:00 – 3:00 pm	<b>HKDU Kowloon East Study Group</b> Update on Nasal Allergies <i>Hei Chin Rou Annex (聘珍樓), Shop 208, Level 2, Plaza Hollywood, 3 Lung Poon Street, Diamond Hill, Kln</i>	1														Ms. Helen Chow Tel: 2807 7150	
30 Jun 2004 (Wed) 1:30 – 3:30 pm	<b>Hong Kong Academy of Medicine</b> Substance Abuse; Cognitive Behavioural Therapy in Daily Out-patient Practice <i>Lecture Theatre, M Block, Queen Elizabeth Hospital, Kln</i>	2														Tel: 2871 8787	
30 Jun 2004 (Wed) 1:30 – 3:30 pm	<b>HKMA – Tai Po Community Network</b> Common Mood Disorders in General Practice <i>Capital Seafood Restaurant, Fortune Plaza, Tai Po, N. T.</i>	2														Ms. Pansy Yu Tel: 2833 6380	
30 Jun 2004 (Wed) 1:00 -2:00 pm	<b>Queen Elizabeth Hospital</b> Topic Seminar <i>B3, Seminar Room, QEH, Kln</i>	1														Ms. Betty Cheng Tel: 2384 5834	
30 Jun 2004 (Wed) 8:30 – 10:00 pm	<b>Hong Kong College of Family Physicians, Hong Kong College of Physicians</b> Low Nephron Number Syndrome; Renin Angiotension Aldosterone System Blockage and Renal Disease in Patients with Type 2 Diabetes – An Asian Perspective from RENAAL Study <i>Ballroom B &amp; C, Island Shangri-La Pacific Place, Supreme Court Road, Central, HK</i>	2														Ms. Kara Lo Tel: 2861 0230	
3 Jul 2004 (Sat) 9:30 – 5:30 pm	<b>CUHK – Dept of Social Work, Kwai Chung Hospital – Yaumatei Child &amp; Adolescent Psychiatric Centre</b> Integrated Training Course on Childhood & Adolescent Disorders (Day 6) <i>Lt4, Wong Foo Yuan Building, Chung Chi College, CUHK</i>	5				4					18#					Ms. Polly Hung Tel: 2609 8783	
4 Jul 2004 (Sun) 8:15 – 3:50 pm	<b>The Hong Kong Society of Dermatology &amp; Venereology</b> Annual Scientific Meeting 2004 <i>Sheraton Hong Kong Hotel &amp; Towers, TST, Kln</i>	5														Ms. Sandy Chung Tel: 2669 6888	
4 Jul 2004 (Sun) 10:00 – 11:30 am	<b>St. Teresa's Hospital – Surgical Committee</b> Minimally Invasive Surgery & Post-operative pain management <i>9/F, Conference Room, St. Teresa's Hospital, Kln</i>	2				1								1.5		Dr. Lawrence Chan Tel: 2780 2226	
4 Jul 2004 (Sun) 1:00 – 4:00 pm	<b>CUHK – Dept of Medicine &amp; Therapeutics</b> CUHK Diploma Programme in Advanced Internal Medicine 2003-04 – Chronic Cough <i>Kai Cheong Tong, G/F, Postgraduate Education Centre Prince of Wales Hospital</i>	3		10#			5#	0.5			18#	10#			18#	Ms. Suzanne Shek Tel: 2632 3127	
4 Jul 2004 (Sun) 2:00 – 7:00 pm	<b>CUHK – Department of Medicine &amp; Therapeutics</b> Certificate Course in Diabetes Management and Education Year 2004 (Module 2: Quality Diabetes Care) <i>Multi-Function Room, 1/F, Postgraduate Education Centre, Prince of Wales Hospital</i>	5		5		3	5				3	5		5	5	Ms. Charmaine Lee Tel: 2632 5752	
4 Jul 2004 (Sun) 2:00 – 7:00 pm	<b>CUHK – Department of Medicine &amp; Therapeutics</b> Professional Diploma Programme in Diabetes Management and Education Year 2004 (Module 2: Quality Diabetes Care) <i>Multi-Function Room, 1/F, Postgraduate Education Centre, Prince of Wales Hospital</i>	122#		10#		68.5#	5#				18#	20#		122#	18#	Ms. Charmaine Lee Tel: 2632 5752	

\* Colleges accreditation pending  
# Total CME points for entire course

JUNE 2004  
HKMA CME BULLETIN

Date/Time 日期/時間	Function 活動	CME Accreditation 進修積分											Remarks/ Contact Info 備註及聯絡電話				
		MCHK & HKMA	HKCA	HKCCM	HKCEM	HKCFP	HKCOG	COHK	HKCOS	HKCORL	HKCPaed	HKCPath		HKCP	HKCPsy	HKCR	CSHK
4 Jul 2004 (Sun) 4:30 - 7:30 pm	<b>CUHK – Dept of Medicine &amp; Therapeutics</b> CUHK Diploma Programme in Advanced Internal Medicine 2003-04 – Sleep Apnoea <i>Kai Cheong Tong, G/F, Postgraduate Education Centre, Prince of Wales Hospital, Shatin, NT</i>	3		10#			5#	0.5			18#	10#			18#	Ms. Suzanne Shek Tel: 2632 3127	
7 Jul 2004 (Wed) 11:30 – 1:00 pm	<b>HA – Castle Peak Hospital</b> Seminar – Use of Psychiatric Drugs in the Elderly <i>Lecture Theatre, Block D, CPH</i>	2														Ms. Fion Ling Tel: 2456 7843	
7 Jul 2004 (Wed) 8:30 – 12:30 pm	<b>HA – Caritas Medical Centre, Resuscitation Training Centre</b> American Heart Association (AHA) Basic Life Support for Healthcare Providers Refresher Course (BLS-R) <i>Resuscitation Training Centre, 3/F Wai Oi Block, CMC</i>	3														Ms. Irene Shiu Tel: 3408 7444 (Course Fee: HK\$200 with valid BLS Certificate)	
8 Jul 2004 (Thur) 5:30 – 6:45 pm	<b>HA – Tuen Mun Hospital, Family Medicine Dept</b> Eczema <i>Rm 614, Ambulatory Care Centre, TMH</i>	1														Miss Cowin Tang/ Dr. Suen Hong Ning Tel: 2468 6601	
9 Jul 2004 (Fri) 8:00 – 9:30 am	<b>Hong Kong Baptist Hospital</b> Management of Overactive Bladder <i>The Chapel, 9/F, Hong Kong Baptist Hospital, Kln</i>	1.5														Dr. Yung Leung Tung Tel: 2339 8888	
9 Jul 2004 (Fri) 2:00 – 3:00 pm	<b>Union Hospital</b> The Approach to Neck Lumps <i>Seminar Room, 2/F, Medical Centre, Union Hospital, 18 Fu Kin Street, Tai Wai</i>	1														Tel: 2608 3388	
10 Jul 2004 (Sat) 2:30 – 4:30 pm	<b>HKMA CME Programme, Our Lady of Maryknoll Hospital</b> Refresher Course for Health Care Providers 2003/2004 (XI) – Update on Refractive Surgery <i>Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, Kln</i>	2	2	—	1	1	1	1	—	—	2	6#	—	—	2	Ms. Clara Tsang Tel: 2354 2440	
10 Jul 2004 (Sat) 2:30 – 4:45 pm	<b>HA – Our Lady of Maryknoll Hospital, Family Medicine Dept</b> Topical Workshop – Update on Refractive Surgery <i>Training Room II, 1/F OPD Block, OLMH</i>	2														Clara Tsang Tel: 2354 2440	
11 Jul 2004 (Sun) 2:00 – 5:00 pm	<b>HKMA CME Programme, Queen Elizabeth Hospital</b> HKMA Structured CME Programme at QEH (IV) – ENT <i>Lecture Theatre, G/F, Block M, Queen Elizabeth Hospital, Kln</i>	3	3	—	2	2	—	1.5	—	3	1	1.5	—	3	—	3	Members: \$50 Non-M: \$80 Tel: 2861 1979 Tel: 2327 2869
11 Jul 2004 (Sun) 1:00 – 5:00 pm	<b>The Association of Licentiates of Medical Council of Hong Kong</b> (1) Symptoms and Signs, Principles of Management for the Common Cancers in Hong Kong (2) Breast Cancer: From Early Detection to Re-construction <i>九龍亞答街147B號醫院管理局大樓M/F演講廳</i>	3															
11 Jul 2004 (Sun) 2:00 – 6:30 pm	<b>The HK Foundation for Research &amp; Development in Diabetes (HKFRDD), Department of Medicine &amp; Therapeutics, CUHK</b> Certificate Course in Obesity and Weight Management – Interactive Workshop (Day 2) <i>4/F, Sheraton Hong Kong Hotel &amp; Tower, 20 Nathan Road, KLN</i>	4	—	3	—	3	185	—	—	—	3	4	0.5	3	—	4.5	Ms. Charmaine S M Lee Tel: 2632 5752 Fax: 2637 3929
12 Jul 2004 (Mon) 1:45 -3:45 pm	<b>CUHK – Hong Kong Mood Disorders Centre</b> An Advanced Practical Course for Primary Care Practitioners (Session 5) <i>Langham Hotel, TST, Kln</i>	2															Ms. Cheng Tel: 2144 6996
13 Jul 2004 (Tue) 2:30 – 5:30 pm	<b>The Hong Kong Medical Association, Hong Kong Council of Social Service, Office of Dr. the Hon. Law Chi Kwong</b> [如何改善本港保護兒童機制] 跨專業研討會 <i>Rm 204, Duke of Winsor Social Service Bldg, 15 Hennessy Rd, Wanchai</i>	3															Ms. Chan Lee Tel: 2509 3120
13 Jul 2004 (Tue) 4:00 – 7:00 pm	<b>HKU – Centre on Behavioral Health</b> Workshop on Psychotherapy and Counseling in Action: Live Demonstration for Professional Training (Session 8) <i>G/F, Pauline Chan Building, 10 Sassoon Road, HKU, HK</i>	3															Tel: 2589 0510
13 Jul 2004 (Tue) 9:00– 5:30 pm	<b>HA – New Territories West Cluster, Resuscitation Training Sub-committee</b> Adult In-house Cardiac Arrest Management Training <i>Training Centre, 1/F Staff Quarters, TMH</i>	5															Ms. Anita Au Yeung Tel: 2468 5777
14 Jul 2004 (Wed) 8:00– 9:30 am	<b>HA – Pamela Youde Nethersole Eastern Hospital, Clinical Oncology Dept</b> Lecture – Antibiotic Use in Clinical Oncology <i>Rm 048, Clinical Oncology Dept, PYNEH</i>	2															Ms. Clara Chang Tel: 2595 4175
14 Jul 2004 (Wed) 9:00– 5:30 pm	<b>HA – New Territories West Cluster, Resuscitation Training Sub-committee</b> Adult In-house Cardiac Arrest Management Training <i>Training Centre, 1/F Staff Quarters, TMH</i>	5															Ms. Anita Au Yeung Tel: 2468 5777
14 Jul 2004 (Wed) 1:30 – 3:15 pm	<b>Hong Kong Academy of Medicine</b> Management of Acute Low Back Pain; The Athlete's Hip <i>Lecture Theatre, M Block, Queen Elizabeth Hospital, Kln</i>	2															Tel: 2871 8787
14 Jul 2004 (Wed) 1:00 – 3:00 pm	<b>HKDU Hong Kong East Study Group</b> Advances in the Management of Allergic Diseases <i>Maxim's Restaurant, Heng Fa Chuen Comm Block, Chai Wan, HK</i> <i>杏花村美心大酒樓</i>	1															Dr. Yeung Chiu Fat Tel: 2495 6268
14 Jul 2004 (Wed) 1:30 – 3:30 pm	<b>Hong Kong Academy of Medicine</b> Screening for Foetal Abnormalities in Early Pregnancy; Osteoporosis Prospective from Orthopaedic Surgeons <i>Lecture Theatre, M Block, Queen Elizabeth Hospital, Kln</i>	2															Tel: 2871 8787
15 Jul 2004 (Thur) 1:30 – 3:00 pm	<b>HKMA CME Programme, Hong Kong Sanatorium &amp; Hospital</b> HKMA Structured CME Programme with HKS&H – Role of Therapeutic Endoscopy in Digestive Disease <i>HKMA Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, HK</i>	1															Members: \$50 Non-M: \$80 Tel: 2861 1979
15 Jul 2004 (Thur) 1:00 – 3:00 pm	<b>HKDU Sham Shui Po Study Group</b> Cancer New Treatment & Prevention <i>Dragon Dynasty (龍朝酒樓), G/F, 226– 242 Cheung Sha Wan Road, Kln</i>	1															Ms. Janice Lai Tel: 3156 2636

\* Colleges accreditation pending  
# Total CME points for entire course

Note: For each issue of the CME Bulletin, we shall try our best to include all the CME activities for the month, which are made known to the Association Secretariat. The credit points awarded by each college are herein indicated for members' reference only. While we try our best to ensure the information to be most accurate and up-to-date, members interested in any of these functions are advised to check with the respective organizers for confirmation of the details.

Pharmaceutical advertisements are welcome. For advertising rates and placement details, please contact Ms. Cynthia Chan, Executive Officer at Tel: 2527 8452, Fax: 2865 0943 or email: cynthia@hkma.org

Your comments to the HKMA CME Bulletin are mostly welcome. Please send your opinion to Dr. Choi Kin, CME Bulletin Co-ordinator, at cme@hkma.org.