The Hong Kong Geriatrics Society Newsletter

The Hong Kong Geriatrics Society

c/o Department of Medicine, Pamela Youde Nethersole Eastern Hospital 3 Lok Man Road, Chai Wan., Hong Kong Tel: (852) 25956899 Fax: (852) 25153182

Websites: http://www.fmshk.org.hk/hkgs, http://www.hkgs.org.hk; http://www.hkgerisoc.org/

Feb 2008

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Editorial

Time really flies. We'll have our annual scientific meeting and annual general meeting again in a few months' time. The ASM organizing committee is now very busy preparing for the event and they would like to call for interested colleagues to submit abstract to the conference.

Quite a few members of HKGS have recently attended the Asia/Oceania Regional Congress of Gerontology and Geriatrics and Asia Pacific Geriatrics Network meeting held in Beijing. Many of our members found the meeting a very fruitful experience. For those of you who haven't attended the meeting, you can get a grasp of the highlight in some of the articles of our newsletter.

As Chinese New Year is approaching, may I wish you all a very happy Chinese New Year.

Tony Ko, Editor

Message from the President

Dr. Chan Hon Wai Felix



famous "Bird's Nest", the venue of the Olympic Games 2008.

As Hong Kong celebrates the 10th Anniversary of the handover of its sovereignty to mainland China this year, the Hong Kong Geriatrics Society has formed the largest ever number of delegates to visit Beijing, our capital city, in October 2007. Nearly 20 geriatricians from Hong Kong attended the 8th Asia-Oceania Regional Congress of Gerontology & Geriatrics (AOGG) at the Beijing International Convention Centre, which is right opposite to the

I was overjoyed to see so many geriatricians, young and old, including trainees, fellows and past presidents, participating in the conference. In addition to engaging in academic activities, sharing our original research work and presentations at the three symposia on long term care organized by our Society, we had the opportunity to get to know each other better. It is

most encouraging to know that some of our younger members are keen to get themselves more involved in the activities of HKGS.

Apart from the AOGG meeting, eight of us represented the Hong Kong Geriatrics Society to participate at the second Asia Pacific Geriatrics Network Meeting (APGN) at the Beijing Continental Grand Hotel on the 21 October, one day before AOGG, which was attended by delegates from

Australia, Japan, Malaysia, Philippines, Singapore, Mongolia and China. On the 23 October, we visited the Beijing Institute of Geriatrics at Xuan Wu Hospital of the Capital Medical University. We were most grateful to Professor Piu Chan, Director of the Institute, who showed us around his research and service units despite his very busy schedule during the week of AOGG. While listening attentively to his master project of developing a comprehensive geriatric service in the capital city with direction from the Beijing Municipal Government, we had a strong desire to contribute, collaborate and interact more with our Beijing colleagues in future. At the same time, most of us felt the need to brush up our communication skills in Putonghua!

Although we just missed the "FENDI on the Great Wall" fashion show, we had a wonderful climb up the Great Wall on our last day in Beijing before sunset, and obtained the "accreditation" as heroes of China - a wish come true for many of us who paid visit to the Great Wall for the first time. Dr. Christopher Lum & Dr Bernard Kong, both senior members of HKGS, had proved to younger members physical fitness could be well maintained through regular exercise, for they have by far walked much further and faster, leaping up the uneven steps, than most of us!

On return to Hong Kong, I hope HKGS will keep up our links with geriatricians from other regions of the Asia Pacific.

We have already heard from our colleagues in Beijing and Mongolia via email, expressing their intention to visit us next year. For those who are making plans for the New Year, do mark in your diary the next AGPN meeting, which will be held in Bali, Indonesia in November 2008. Another important event to note is, of course, the XIXth IAGG World Congress of Gerontology & Geriatrics in July 2009 in Paris.

As Lunar New Year lightings are already glittering in the streets, I would like to bring well wishes for the Year of the Rat. Wishing you good health, success and prosperity throughout the New Year!

Hong Kong Geriatrics Society delegates visiting Capital Medical University in Beijing



"Accredited as heroes of China"



Publication subcommittee:

Dr. Ko Pat Sing,Tony
Dr. Chan Chun Man, Jones
Dr. Lam Wai Sing
Dr. Leung Ho Yin
Dr. Lo Kwun Man
Dr Mak Ying Fai
Dr. Sheng Bun
Dr. Tsui Chung Kan

Council news

Dr Bernard Kong Hon. Secretary, HKGS

1. Annual Scientific Meeting 2008

Proposed program:

Theme: DM and Endocrine Disease in Old Age Free paper presentations by HPTs in Geriatric Medicine

Best Research Paper Award on Clinical Gerontology presentation

2. DGM/PDCG exam

PDCG exam has 24 candidates this year. Proposed date and examination centre in 2008

RH 17 June 08 AHNH 18 June 08 QEH 19 June 08

3. Asia/Pacific Geriatric Network Meeting 2008

The next APGC will be in Bali 13 – 16 November 2008. Details of the meeting will be announced in the official website.

Official website: http://www.apgcbali.com/

4. Updates APGG/HKGS Newsletter /Promotion of Geriatrics

3 prizes were set up for the 3 best papers in APGG 1st prize HK\$5000 2nd prizeHK\$3000 3rd prize HK\$2000

The panel of judges was made up of Drs TK Kong, F Chan, LW Chu, T Kwok. Dr MF Leung will prepare eligible papers before April 2008.

HKGS Newsletter

Next issue would be released around Dec 07 and report on conference news.

The newsletter group is working on the promotion pamphlets on Geriatrics. A draft on the first pamphlet "What is Geriatrics" has been compiled .

Local News

A symposium organized by Hong Kong Bioethics Association, Hong Kong Association of Gerontology, Hong Kong Geriatrics Society, Hong Kong Hospital Authority Clinical Ethics Committee and the Hong Kong Medical Association on "End-of-Life Decision Making in Elderly People – Interdisciplinary perspectives will be held at 6:30pm-8:30pm in lecture theatre of Hospital Authority on 26 March 2008. Speakers include Professor Dr Jochen Vollmann ,Director, Institute for Medical Ethics and History of Medicine, Ruhr-University Bochum, Germany, Ms Helen Chan, Member, Working Group on End of Life Care, Hong Kong Association of Gerontology, School of Nursing, The Hong Kong Polytechnic University, and Dr Chu Leung Wing, Chief and Consultant, Division of Geriatrics, Queen Mary Hospital.

The 8th Asia/Oceania Regional Congress of Gerontology and Geriatrics Dr KM Lo

Medical Officer, Alice Ho Miu Ling Nethersole Hospital

The 8th Asia/Oceania Regional Congress Gerontology and Geriatrics was successfully held in Beijing on October 22-25, 2007. It was organized bv the International Association of Gerontology Geriatrics: Asia/Oceania Region. The Congress was supported and hosted by the Chinese Society of Gerontology.

It has been realized that quality of life of aging population partly relies on economic development and social advancement. It, however, has posed challenges to many developing and developed countries in the region. There should be a vision for individual government to prepare strategies, policies, measures and plans of action on aging population in the 21st Century. In this congress, professionals, policy makers, scholars, and experts in different field seized the chance to gather and discussed on the issues related to the aging population. The theme of the Congress was "Aging Diversity in Asia-Oceania: Health, Participation, Security and Sharing". As mentioned by the Chairperson, it provided "a platform communication, research sharing and resource integration, so that the elderly can live fruitful lives in their golden age."

The Congress was sparked off by the opening ceremony with a welcome speech by Mr. Peng Du, the President of the Executive Committee. He pointed out that the ever-growing aging population in the region, in particular China, has been the results of the rapid socio-economic development and growth in the region. He emphasized that it would be a great challenge to the government and yet he

was determined that the challenge would be tackled by the conglomerate efforts by the health care professionals, social workers, scholars and policy makers with the support of the government.

The programme consisted of several keynotes lectures, plenary lectures and a repertoire of symposiums, workshops, oral presentations and round table discussions covering the medical, nursing, socio-economic, ethnical and political aspects of the aging population.

Professor Jean-Pierre Michel, Head of Medicine and Chair of Rehabilitation and Geriatrics at the University of Geneva Medical School in Switzerland, Director of European Union Geriatric Society (2006-10) and WHO Expert Ageing and Health Programme delivered a keynote lecture on "Geriatric medicine: From clinical practice to research and He teaching." stressed on multidisciplinary and interdisciplinary team approach with continuity of care in geriatric medicine. He continued his lecture with elaborations management of falls, osteoporosis and dementia care for the elderly. Professor Jean-Pierre Michel also holds a directorship of the Post-Graduate and interdisciplinary School Gerontology at the University Geneva Medical School in Geneva. He welcomes the geriatric trainees in the region to continue their study in the School. In 1994, he also founded the European Academy for Medicine of Aging in Switzerland, a postgraduate training course for teachers in the field of geriatrics.

than twenty Hong Kong Geriatrician delegates participated in the congress. Dr Edward Leung spoke on the Training and Education on Geriatric medicine in a plenary session. number of our fellows had contributed to and spoke in the various symposiums, namely Professor Jean Woo, Professor Timothy Kwok, Dr Au Kit Shing, Dr Christopher Lum., Dr Elsie Hui, Dr Felix Chan, Dr Raymond Lo, and Dr Wu Yee Ming. The Hong Kong Geriatric fellows were invited to visit the Xuan Wu Hospital of the Capital Medical University, Beijing. Professor Piu Chan, who is the head of Geriatric medicine, had a round table discussion with our fellows on the development of Geriatric medicine in China. The Chairman of HKGS also shared our experience and views on the geriatric development in Hong Kong. He further introduced the service organization and delivery models of geriatric medicine in Hong Kong. Reciprocally, our fellows admired very much the neuroscience development in Beijing, namely the stem cell treatment of Parkinson disease and Alzheimer disease in primate models. It was a fruitful discussion in which we had mutual understanding on the geriatric medicine development in both parts and paved the road for our future collaboration and training in geriatric medicine. To express our appreciation to the hospitality of Professor Chan and his colleagues, the president of HKGS presented the Hong Kong Geriatric Curriculum as a souvenir to Xuan Wun Hospital for their fellows who are keen to read more about the practice of geriatric medicine in Hong Kong.

HKGS Delegates and Friends in the 8th Asia-Oceania Regional Congress of Gerontology & Geriatrics



Second Asia/Pacific Geriatrics Network Meeting Dr KM Lo Medical Officer, Alice Ho Miu Ling Nethersole Hospital

The Second Asia/Pacific Geriatrics Network Meeting was held in Beijing, China just one day before the 8th Asia/Oceania Regional Congress of Gerontology and Geriatrics. It was hosted by Division of Geriatric Medicine, Capital Medical University, China and supported by Asia Pacific Geriatric Network.

Professor Chen Ke Ji, Capital Medical University, China delivered a talk on the development of Geriatrics in China. Professor Leon Flicker, University of Western Australia updated the audience on the advances in Dementia Care in the elderly.

Professor Hajime Orimo, Chairman of the Japan Osteoporosis Foundation elaborated on the Advances in Management of Osteoporosis. He embarked on the epidemiology of osteoporosis in Japan follow by discussion on how the Vitamin-K enriched diet in Japan in relation to the incidence of osteoporosis in Japan.

Dr. Shelley de la Vega of Philippines Society of Geriatric Medicine, spoke on the topic of "Improving vaccine coverage amongst Older Persons". She highlighted that the influenza vaccine among the older persons in institutions was suboptimal at the moment. In the lecture, she noted that she would like to borrow the model in Hong Kong where we have more than 95% coverage for the influenza vaccination programme for the elderly in institutions. It was also thought-provoking to the audience when she talked on the varicella vaccination in the elderly.

Prof. Pang Weng Sun of Society for Geriatric Medicine, Singapore gave us a talk on the issue regarding the End of Life Care in the Elderly. He lectured on the development of palliative medicine in Singapore and the development of Advanced Medical Directives in Singapore. Professor Pang expressed that it would be a stepwise approach in carrying out the Advanced Medical Directives in Singapore.

Prof. Philip Poi, University of Malaysia, Chairman of the Asia Pacific Geriatric Conference (APGC) 2006 updated us on the post APGC 2006 geriatric development in Malaysia. He also announced that the upcoming APGC 2008 will be held in Bali in November 2008 and he called for abstracts and submissions. Our fellows who are interested can visit the official website at http://www.apgcbali.com.

Editor's choice

Four years on: The impact of the National Service Framework for Older People on the experiences, expectations and views of older people

Age and Ageing 2007; 36(5): 501-507

The National Service Framework of Older People (NSFOP) is a comprehensive strategy introduced in England by the Department of Health in 2001. It has a 10-year timetable for implementation. It is designed to promote fair, high quality, integrated health and social care services for older people in England.

The NSFOP emphasizes (i) the specialization of services for key conditions (stroke, falls and mental illness), (ii) the need for services to support independence and promote health and (iii) advocates a cultural change in services so that the older people and their carers are treated with respect, dignity and fairness.

In this qualitative research, the impact of NSFOP on the experiences and expectations of older people was evaluated using a mixed methods approach. A portfolio of methods (listening events, nominal groups and interviews) was used with older people and carers to focus on processes as well as on outcomes and to allow for the possibility of conflicting or differing judgments about service quality.

1839 people participated in public listening events, 1,639 took part in nominal groups and 120 were interviewed individually. Many, but not all older people, identified themselves as members of a group that was subject to age prejudice that altered the quality and standard of their care. This identity included a role as carer for others, but there was less emphasis on the rights of older people.

Positive changes in primary care services were offset by difficulties in accessing general practice and a sense that services were becoming impersonal. The quality of social care at home varied from sensitive and personal to fragmentary, hurried and impersonal.

Hospitals treatment was perceived as improved in speed and quality in most places, but hospitals were also seen as risky and insufficiently caring, with discharge sometimes being unprepared, over-zealous and disorganized.

In conclusion, older people do not perceive improvements as the result of a NSFOP, but nonetheless they do perceive improvements in systems.

Transcutaneous Electrical Nerve Stimulation Combined With Task-Related Training Improves Lower Limb Functions in Subjects With Chronic Stroke Stroke, 2007; 38: 2953-2959.

This is a local study from the Hong Kong Polytechnic University. Building from their previous research on TENS, investigators examine in this randomized study whether the combined TENS and TRT had summative effect on motor control in chronic stroke patients. They include 88 subjects who had suffered a single stroke at least 1 year ago and randomized them into four groups (TENS+TRT, TENS, placebo TENS+TRT, and control). The program was carried out 5 days /week for a total of 4 weeks. The study found that the combined TENS+TRT showed significant improvement in gait speed when compared to other three groups, TENS+TRT was superior to TENS on ankle dorsiflexion torque and ankle plantarflexion torque, and superior to placebo TENS+TRT on reduction of plantarflexor spasticity.

Cross-cultural validation of the London Handicap Scale and comparison of handicap perception between Chinese and UK populations Age and Ageing 2007; 36(5): 544-548

London Handicap Scale is a recognized outcome in the International Classification of Impairment, Disability, and Handicap (ICIDH) for assessing the effects of chronic diseases and intervention. This study validates this Scale on populations from diverse cultures by comparing handicap perceptions in Mainland (Sichuan) Chinese, Hong Kong Chinese and UK subjects.

Utility ratings of 10 real life health scenarios were given by a group of healthy and disabled Sichuan Chinese subjects. The ratings were then correlated with published scale scores of HK and UK subjects on the same scenarios.

201 Sichuan Chinese (mean age: 63.3 years) comprising of healthy (31.8%) and disabled individuals with stroke, fracture, cancer or other chronic conditions (69.2%) were recruited.

Overall ratings for health scenarios were found to be highly correlated between Sichuan Chinese and UK subjects (r=0.85; P < 0.0005), and between Sichuan and HK Chinese subjects (r=0.98; P < 0.0005), with the exception of scenario J.

The international notion of handicap applies across different cultures and is also valid in mainland Chinese. UK, HK, and Sichuan subjects share similar perception on selected handicap scenarios. The London Handicap Scale is useful for health evaluation and outcome assessment for elderly of different cultures.

Donepezil for the treatment of agitation in Alzheimer's disease (AD) NEJM 2007(357);14:1382-1392

This was a British trial consisting of 272 patients with AD who had clinically significant agitation and no response to a brief psychosocial treatment program. Most of the patients were nursing home residents with severe dementia. The trial excluded patients who had been treated with a neuroleptic agent or cholinesterase inhibitor during the previous month. The intervention group (128 patients) received Donepezil 10mg daily for 12 weeks whereas the control group (131 patients) received placebo

After 12 weeks, there was no significant difference in primary outcome (changes in score on the Cohen-Mansfield Agitation Inventory) and secondary outcomes (Neuropsychiatric Inventory and Clinician's Global Impression of Change). Adverse effect were similar in the intervention and control groups.

SIG membership application

To Dr. Kong Ming Hei, Honorary Secretary, HKGS

c/o Department of Medicine,

Pamela Youde Nethersole Eastern Hospital, 3 Lok Man Road, Chai Wan, Hong Kong. Tel: (852) 25956899 Fax: (852) 25153182

I am interested in joining the following SIG of HKGS:

[] Cognition and Cerebral Ageing SIG
[] Chinese Medicine SIG
[] Continence SIG
[] Falls SIG
[] Infectious Disease SIG
[] Medical Ethics SIG
[] Nutrition SIG
[] Sexuality and Older Adults SIG
[] Long Term Care

My personal details are:

Name:

Place of work:

Contact: e-mail phone

Please notify the corresponding Chairperson of the SIG to contact me for future activities.

Use of probiotic Lactobacillus preparation to prevent diarrhoea associated with antibiotics: randomised double blind placebo controlled trial BMJ 2007;335:80

A randomised controlled trial in which 135 hospitalized patients with mean age 74 receiving antibiotics therapy were randomised to consume a drink containing Lactobacillus casei, L bulgaricus and Streptococcus thermophilus twice daily or a sterile milkshake during the course of antibiotics and for one week after the course. There was a reduction in both antibiotic associated diarrhoea and diarrhoea caused by C difficile. The absolute risk reduction was 21.6% (6.6% to 36.6%) and 17% (7% to 27%) respectively.

Editor's choice

Warfarin versus aspirin for stroke prevention in an elderly community population with atrial fibrillation (the Birmingham Atrial Fibrillation Treatment of the Aged Study, BAFTA): a randomised controlled trial Lancet 2007; 370: 493-503

A randomised controlled trial which compared the efficacy of warfarin with that of aspirin for the prevention of stroke in a primary care population of patients aged 75 years or over who have atrial fibrillation. 973 patients were given either warfarin with a target INR of 2-3 or aspirin 75 mg daily. The primary endpoints was first occurrence of fatal or disabling stroke (ischemic or haemorrhagic), other intracranial haemorrhage or clinically significant arterial embolism. outcomes were major haemorrhage (defined as a fatal haemorrhage, or one that resulted in the need for transfusion or surgery), other admissions to hospital for haemorrhage, hospital admission or death as a result of a non-stroke vascular event, and all-cause mortality. After a mean follow up period of 2.7 years there were 24 primary events in the warfarin group and 48 primary events in the aspirin group which corresponded to a relative risk of 0.48, 95% confident interval 0.28-.0.8. The yearly risk of extracranial haemorrhage in the warfarin group was 1.4% vesus 1.6% in the aspirin group. The study supported the use of anticoagulation therapy for patient aged over 75 with atrial fibrillation unless there are contraindications.

Hong Kong Geriatrics Society

Annual Scientific Meeting 2008

Free Paper Presentation CALL FOR ABSTRACTS

One of the objectives of the Hong Kong Geriatrics Society is to encourage conduction of quality scientific research and clinical studies in our local community. There will be a free paper presentation session in our coming Annual Scientific Meeting 2008, to be held on **21 June 2008** (Saturday). All submitted papers will be assessed by an expert scientific panel. Selected participants will be invited to present their papers in the Meeting. The panel will select the three most outstanding papers, to be awarded the Dr Chan Sik Prize, the Dr Ng Yau-Yung Prize and the Dr Ng Ngai-Sing Prize.

Participants may submit any number of papers, but only one prize will be awarded to any one participant each year. You can still participate even if you have received any of these awards in the past years. The decision of the selection panel will be final.

The deadline for abstract submission is 19 April 2008.

Please e-mail your abstract to:

Dr Szeto Sze Lok Samuel Senior Medical Officer Department of Medicine and Geriatrics Kwong Wah Hospital 25 Waterloo Road, Yaumatei, Kowloon

Tel: 35175329

E-mail: <u>sszeto@netvigator.com</u>

Abstract format:

Dr P YEUNG

- 1. Title: a clear and brief title that indicates the nature of the study
- 2. Name and initials of all authors (please underline the presenting author)
- 3. Name of the institution
- 4. The content of the abstract should include:

Member

- Introduction
- Objective
- Method
- Result
- Conclusion

The length of abstract content should not exceed 300 words with a font size not smaller than 9.

Organizing Committee members:

Dr M H CHAN	Chairman	Kwong Wah Hospital
Dr H C YUEN	Secretary	Tuen Mun Hospital
Dr K K MO	Member	Yan Chai Hospital
Dr Michael CHENG	Member	Kowloon Hospital
Dr K M LO	Member	Alice Ho Miu Ling Nethersole Hospital
Dr James LUK	Member	Fung Yiu King Hospital
Dr S L SZETO	Member	Kwong Wah Hospital
Dr Stephen WONG	Member	Pamela Youde Nethersole Eastern Hospital

Princess Margaret Hospital

Overseas Scientific Meetings

Name	Time	Organizer	Contact
Geriatrics 2008 Congress	6/4/08 – 8/4/08 Antalya, Italy	European Union Geriatric Medicine Society, International Association of Gerontology and Geriatrics and International Institute on Ageing	www.geriatrics2008.org
2008 Annual General & Scientific Meeting of the Canadian Geriatrics Society	10/4/08 – 12/4/08 Montreal, Canada	Canadian Geriatric Society	www.canadiangeriatrics.org
British Geriatric Society Spring Meeting	23/4/08 – 25/4/08 Glasgow, UK	British Geriatrics Society	www.bgs.org.uk
2008 Annual Scientific Meeting American Geriatric Society	30/4/08 – 4/5/08 Washington DC, USA	American Geriatric Society	www.americangeriatrics.org
5 th congress of the European Union Geriatric Medicine Society	3/9/08 – 6/9/08 Copenhagen, Denmark	European Union Geriatric Medicine Society	www.eugms.org
Breaking Barrier 18 th Alzheimer Europe Conference	22/5/08-25/5/08 Oslo, Norway	Alzheimer Europe The Norwegian Alzheimer Association The Norwegian Centre for Dementia Research	www.alzheimer- conference2008.org
Australian &New Zealand Society for Geriatric Medicine Annual Scientific Meeting	8/9/08-10/9/08 Melbourne, Australia	Australian &New Zealand Society for Geriatric Medicine	www.asgm.org.au
First Conference Clinical Trials on Alzheimer's Disease in collaboration with the EADC (European Alzheimer's Disease Consortium)	17/9/08-19/9/08 Monpellier, France	European Alzheimer's Disease Consortium French Federation of Memory Centres for Resource and Research	www.ctad.fr
British Geriatrics Society Autumn Meeting	12/11/08-14/11/08 Birmingham, UK	British Geriatrics Society	www.bgs.org.uk
Asia Pacific Geriatric Conference	13/11/08-16/11/08 Bali, Indonesia	Asia Pacific geriatric Conference	www.apgcbali.com
International Association of Gerontology and Geriatrics World Congress of Gerontology and Geriatrics	5/7/09-9/7/09 Paris, France	International Association of Gerontology and Geriatrics	www.paris2009.org

Hong Kong Geriatrics Society – Membership application / Information update Form

A). Personal information for <i>membership applica</i>	ition or information update
Name	
Corresponding Address	
Current Practice (HA - Hospital Authority/ DH - Department	" $$ " one of the following :
of Health / PR - Private practice / HS - Hospital Service	□ HA □ DH □ PR □ HS □ HK □ CU □ OT
Department / HK - HKU / CU- CUHK / OT - Others)	
Present post (e.g. MO, Cons, Prof. etc.)	
Hospital (working at)	
Department (working at)	
Home Address	
E – mail address	
Home Telephone	
Office Telephone	
Fax Number	
Basic Qualification (basic degree) and year	
Higher Qualifications and year	
Membership status to apply for or change	Please " $\sqrt{}$ " either one below
☐ a) I am an accredited Geriatric Specialist according to the	•
□ b) I am currently under higher specialty training in Geria	
☐ c) I am a registrable medical practitioner in HK who is inter	ested in Geriatric Medicine but the above two conditions
do not apply.	
Membership: (Official Use) Regular/As	sociate
Approved by council at: (Official Use)	
*Category a or b (Annual fee: \$200) - Regular member	
Category c (Annual fee: \$100) - Associate member (No ve	oting right nor right to be elected as council
Category c (Annual fee: \$100) - Associate member (No vermember)	
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Please send to: Dr. Shea Tat Ming, Honorary Treasurer, Hong Kong Geriatrics Society, C/o Dept. of Medicine, Queen Elizabeth Hospital, Kowloon