

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.fmsk.org.hk/hkgs>, <http://www.hkgs.org.hk> ; <http://www.hkgerisoc.org/>

June
2008

President	: Dr. Chan Hon Wai Felix	Council	Dr. Wong Chun Por	Dr. Ko Chi Fai
Vice-President	: Dr. Chan Ming Houng	Members :	Dr. Leung Man Fuk	Dr. Ko Pat Sing Tony
Honorary Secretary	: Dr. Kong Ming Hei Bernard		Dr. Kwok Chi Yui	Dr. Wu Yee Ming
Honorary Treasurer	: Dr. Shea Tat Ming		Dr. Luk Ka Hay James	
Ex-Officio	: Dr. Kong Tak Kwan			
Honorary Legal Advisor	: Mr. C K Chan			
Honorary Auditor	: Mr. Eddy S B Wong			

Editorial

We have quite a few good news to report in this issue. After years of effort, we finally see the organization of a co-joint Postgraduate Diploma in Community Geriatrics (HKU) and Diploma in Geriatric Medicine (RCPSG) being materialized in May 2008. Prof Brian Williams and Prof Paul Knight, President and Registrar of RCPSG, visited Hong Kong for the occasion. Prof Williams is well-known to the local geriatricians and he kindly spared some time to meet the HKGS council and local geriatricians despite his tight schedule. Their visit further strengthen the strong ties between HK geriatricians and our counterparts in Glasgow.

Our Annual Scientific Meeting will be coming soon and you can find the preliminary programme in our present issue. For those members who are planning for overseas training, there is a very comprehensive article on the European Academy for Medicine of Ageing (EAMA) program.

Lastly, 2 long-serving members of our Editorial Board Dr Tsui Chung Kan and Dr Sheng Bun have decided to retire from the editorial. I would like to take this opportunity to thank them for their contributions throughout the years.

Tony Ko, Editor

Message from the President

Dr. Chan Hon Wai Felix



Coming to the end of my second term as President of the Hong Kong Geriatrics Society, I have once again the privilege to contribute a column in the Newsletter. In February this year, our Society was invited by the Legislative Council to present our views on the inadequate supply of residential care homes for the elderly, and the quality of care in these homes have attracted much attention by the Leg Co members as well as the media. In a very short time, we prepared a response paper with the help of Dr. TK Kong and Dr. KM Lo. In my presentation at the Leg Co, I stressed the need for comprehensive geriatric

assessment, which could turn functional disabilities to treatable diagnoses, for every older person applying for residential placement. By improving their functional status, residential care may no longer be needed, thus reducing the demand. In addition, I emphasized the role of geriatricians in the provision of specialist service to residents with complex medical needs and frailty, while family physicians could manage stable chronic diseases and ad hoc medical problems. The bi-lingual presentation can be found in the website of our Society.

http://www.hkgerisoc.org/press_release/press110408.pdf

The long waited Health Care Reform Document on health care financing, titled "Your Health, Your Life", was released by the Secretary for Food & Health in March 2008. Once again, our Society was invited to prepare a response statement. A Task Group Meeting was held on 23 April which was well attended by academic geriatricians, executives and chiefs of service, consultants, associate consultants and fellows. In our discussion, we could not over-

emphasize the continuing need for the government to support the present generation of older people who are poor and under-privileged. Moreover, we are most concerned if an older person could effectively negotiate between various government departments and insurance companies should the need arises for a claim for medical insurance, be it mandatory or voluntary. Although we could not reach a consensus on which of the six options proposed in the consultation paper is the best solution to health care financing, Dr. PS Ko has kindly volunteered to take up the role as our draftsman who will summarize our key messages and write up a response paper for endorsement by the Council and submission to the Food & Health Bureau by 13 June 2008.

After months of preparation work, I am most pleased to report that the Memorandum of Understanding between the Royal College of Physicians & Surgeons of Glasgow, and the Faculty of Medicine, University of Hong Kong, to organize the conjoint clinical examination for the Diploma in Geriatric Medicine (Glasgow) and the Post-graduate Diploma in Community

Geriatrics (HKU) was signed on 9 May 2008. The MOU was signed by Professor Raymond Liang, Dean of the Faculty of Medicine, HKU and Professor Brian Williams, President of the RCPSG. Professor Williams, the first External Examiner of the PDCG exam 8 years ago, has been known to HKGS for over a quarter of a century! He has been a mentor and friend to many of the senior geriatricians, including Dr. YY Ng, Dr. HC Tam, Dr. YC Lee and Dr. CP Wong, to name but a few of these big brothers of Geriatrics in Hong Kong. The first conjoint examination will take place in Ruttonjee Hospital & Alice Ho Miu Ling Nethersole Hospital on 17 and 18 June respectively.

The upcoming Annual Scientific Meeting on the 21 June 2008 will surely be another huge success. The theme this year will be Community Geriatrics and Geriatric Endocrinology. Community Care has rapidly developed in HK in the past decade. While there is still controversy on whether community care is a more cost-effective option, it would be of immense interest to us to hear from our overseas and local experts on

their insight and experience. Geriatric Endocrinology is an exciting clinical arena with recent advances in disease prevention, treatment and organization of care between specialists and primary care doctors. We must thank Dr. MH Chan, Chairman of the Organizing Committee and his team, for their hard work and enthusiasm in putting up such an enriched programme.

As we are saddened by the tragedy of the Sichuan earthquake on the 12 May 2008, we should count our blessings here in Hong Kong, not only for food, shelter, political and economic stability, but also for our family, friends, as well as colleagues with whom we strive to make Hong Kong a better place to live for young and older people. We are, indeed very proud of the readiness and professional demeanour demonstrated by our colleagues in the current disaster relief activities. We salute to the hard work and selfless contributions of these volunteers who are working in stricken areas in our motherland, and pray for their own health and safety.

Prof & Mrs Brian Williams, Prof & Mrs Paul Knight, Prof Rowan Harwood, Dr CH Leong, Dr TP Lam with local Geriatricians



Council news

Dr Bernard Kong
Hon. Secretary, HKGS

1. Annual Scientific Meeting 2008

Proposed program:

Theme : Endocrine and Metabolic Disorders in Old Age

Free paper presentations by HPTs in Geriatric Medicine

Best Research Paper Award on Clinical Gerontology presentation

Date and time: 21st June 2008, 12:30 – 10:00 pm

Venue: Ballroom, 3rd floor, Sheraton Hotel Tsimshatsui, Kowloon

Officiating Guest of Honour: Dr SV Lo, Director (Strategy & Planning) of Hospital Authority

Invited speakers: Professor AJ Sinclair, Professor Michael Stone, Professor Clive Cockram, Professor William Primrose, Mr Peter H T Chan

Will also invite the APGC network, Inner Mongolia Gerontology Association and Professor Piu Chan from Mainland China

2. An updated pamphlet on “What is Geriatrics”

A promotion pamphlet on “What is Geriatrics” for the public in Chinese format is being drafted by the HKGS newsletter publication subcommittee.

3. Meeting with Panel on Welfare Services (立法會福利事務委員會)

HKGS had expressed our views to the Legislative Council on the provision and standard of residential care homes for the elderly in Hong Kong on 19th Feb 2008 at the LegCo Building. HKGS has submitted a response in both English and Chinese.

The paper can be downloaded from the HKGS website. http://www.hkgerisoc.org/press_release/press110408.pdf

Issues discussed at the LegCo meeting can be viewed from:

http://www.legco.gov.hk/yr07-08/chinese/panels/ws/ws_els/papers/ws_els0122cb2-835-1-c.pdf

Papers can be obtained from HKGS President or Sec on request.

4. Pilot Neighbourhood Active Ageing Project

HKGS has been invited by the Hon. Dr. CH Leong of Elderly Commission to participate in the Pilot Neighbourhood Active Ageing Program (左鄰右里積極樂頤年) to promote the concept of active ageing and enhance neighbourhood support with a view to creating a harmonious society. HKGS assisted in developing volunteer networks to take care of frail elders in different regions of Hong Kong. There will be training course for the volunteers with transportation honorarium. Dr. B Kong proposed to use the HKEC training protocols for volunteers.

5. RCPSG President’s Visit & welcome banquet on 12 May

Professor Brian Williams, President of RCPSG, and Dr Paul Knight, Registrar of RCPSG had been invited by the HKGS to discuss about geriatrics training in both Scotland and Hong Kong.

6. Asian Pacific Geriatric Conference 2008

The next APGC will be held in Bali 13th – 16th November 2008.

Theme “Geriatrics Giant: The New Epidemic in the 21st Century”

Call for abstract: Deadline for Free Paper and Poster Submission August 1st, 2008

Details of the meeting will be announced in the official website.

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

7. XIXth World Congress of Gerontology & Geriatrics

The next 19th WCGG will be held in Paris 5th -9th July 2009.

Details of the meeting will be announced in the official website.

Official website: <http://www.gerontologyparis2009.com/site/view8.php>

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

Local News

Meeting the President and Registrar of the Royal College of Physicians and Surgeons of Glasgow meeting – *Dr Chi Fai Ko*

HKGS hosted a dinner for the President and Registrar of the Royal College of Physicians and Surgeons of Glasgow.

11 May 2008 was a very special Mother's Day for our Society. A dinner was held in Dynasty Club, Wan Chai to welcome our guests Prof. Brian Williams, President of the Royal College of Physicians and Surgeons of Glasgow (RCPSG) and Prof. Paul Knight, Registrar of RCPSG. Both of them are renowned geriatricians from Scotland. Prof. Williams is already well known in local geriatrics community, as many of our senior colleagues had visited his centre in Glasgow for post-membership geriatrics training.

Before the dinner, we had a discussion on the training of geriatricians. Dr MF Leung presented the curriculum of geriatrics training in HK, while Prof. Knight enlightened us on the new development of how a trainee's competency is assessed in Glasgow. It was then followed by 45 minutes of hot discussion around this topic.

Apart from our past presidents, HKGS council, senior local geriatricians; Prof Rowan Harwood from Nottingham UK, Dr CH Leong (Chairman of Elderly Commission), and guests from Family Medicine Unit of HKU also participated in this memorable event.



Prof Brian Williams, Dr Felix Chan, and Dr CH Leong



Dr TK Kong, Prof Knight, Mrs Knight, and Dr Bernard Kong

Prof David J Stott's visit to Kwong Wah Hospital – *Dr Jones Chan*

Professor David J Stott, one of the renowned experts in Geriatric Medicine of University of Glasgow, visited the Acute Stroke ward of Kwong Wah Hospital during 21st to 25th January 2008. During his visit, Prof Stott gave a very comprehensive lecture on stroke diagnosis. In a joint nutritional ward round at the rehabilitation hospital with Professor Jan Potter of the Monash University in Australia, they shared their expert opinion on nutritional support for under-nourished people. After visiting the Centre for Traditional Chinese medicine, Professor Stott believed there were tremendous opportunities for clinical research in topics related to the expertise in traditional Chinese Medicine.

During his stay, Professor Stott also gave a tutorial on MRCP PACES clinical examination to junior doctors who are sitting for the examination. He emphasized on some key principles to success such as the importance of reading the written instruction, effective time management and clear verbal presentation.

Last but not least, Professor Stott also gave a lecture on research methods in Geriatric Medicine to our trainees during his visit. Many of our fellows were also present in the lecture where he advised on some of the challenges in performing high quality research in Geriatric Medicine.



Prof David Stott, Prof Jan Potter with Drs Felix Chan, MH Chan, and other local Geriatricians

My experience of the EAMA (European Academy for Medicine of Ageing) post-graduate geriatric course.

Dr Stanley Tam

Specialist in Geriatric Medicine, Queen Elizabeth Hospital

As one of the EAMA (European Academy for Medicine of Ageing) network member, I would like to share with you my experience in this post-graduate geriatric course which aims at 'Teach the future teachers in geriatrics'.

Some background information first: In the early 1990s, a group of European Professors of Medical Gerontology (GEPMG) was very concerned about the great need of an 'advanced post graduate geriatric course for junior geriatricians in Europe.' In 1994, they founded the first European Academy for Medicine of Aging (EAMA) post-graduate training course in Sion (Switzerland). EAMA is a 2-year course consisting of four intense 1-week sessions (twice a year in January and June). An EAMA Certificate is issued to all participants who have successfully completed the four sessions. Successful participants are also appointed members of the EAMA. The number of participants in each course is around 40. The official language during the courses is English.

I was introduced to this course by Professor Ouslander of Emory University USA, who was my supervisor during my overseas training in Geriatric Medicine. I attended the four sessions in 2006 and 2007. All the courses took place in Sion is a small town situated in the Wallis canton of Switzerland. The Wallis canton is attractive in all seasons, particularly in January (the winter resorts and the ski slopes are famous), and in June (nice warm weather, attractive walks and hiking trails in the Swiss mountains), They are also famous for excellent local wines and traditional Swiss cooking.

Each 1-week session covered a different well-balanced geriatric topic. The scientific board members set up the session programs and participate actively. In "Teachers' State of the Art lectures", experts on the specific topics are selected and invited from all over the world. They give updates on the most recent developments in their special field. In a subsequent debate, students can ask questions and express their opinions. During the discussion / debate, every one had to learn to respect cultural differences and accept different points of view.



Teachers' State of the Art lectures



Small group discussions

In a similar way, each student is asked to give a lecture on a topic that is determined and communicated by the scientific board few weeks before the session. The topic is usually not on the students' field of research or competence. Prior to the session, student needs to prepare and submit an abstract to a designated member of the scientific committee, and to give an attractive lecture of precisely 10-min, presenting the most recent developments as well as giving a concise summary of the topic. This is the most challenging part of the course. The lecture is followed by a discussion with the student answering questions from other students and teachers. After each presentation, the student is evaluated with regard to the lecture's content, the presentation skills, the slide quality and the ability to cope with the various questions raised by the audience.

Apart from these lectures from teachers and students, there are small group discussions. These discussions involve seven to nine participants and address any clinical, managerial or ethical topics. In each discussion group, one student is designated to be the chairperson who has to lead the discussion and help the designated reporter to summarize and present important messages to the other groups in 10 mins. All students as well as the experts of the field discuss this report in the plenary.

Editor's choice

Vascular events in healthy older women receiving calcium supplementation: randomised controlled trial

BMJ 2008; 336(7638): 262-6.

A randomized controlled trial in which 1471 postmenopausal women were randomized to receive either 1 g of elementary calcium or placebo. After a follow up period of 5 years it was showed that myocardial infarction was more common in the calcium group than in the placebo group (45 events in 31 women vs 19 events in 14 women, $P=0.01$). The composite end point of myocardial infarction, stroke or sudden death was also more common in the calcium group (101 events in 69 women v 54 events in 42 women, $P=0.008$). After adjudication myocardial infarction remained more common in the calcium group (24 events in 21 women v 10 events in 10 women, relative risk 2.12, 95% confidence interval 1.01 to 4.47). The author concluded that calcium supplementation in healthy postmenopausal women is associated with adverse cardiovascular event and the risk should be balanced against the benefit.

Patent Foramen Ovale (PFO) and Cryptogenic Stroke in Older Patients

NEJM 2007; 357 (22): 2262 - 2268

This was a German prospective study to investigate whether there is association between PFO and cryptogenic stroke in older patients.

The authors examined 503 consecutive patients (aged 20 to 84 years, mean age 62.2 \pm 13.1) who had been admitted to stroke unit or neurologic intensive care unit. The presence of PFO was examined by Transoesophageal echocardiogram. Two hundred and twenty seven patients with cryptogenic stroke were compared with 276 control patients with stroke of known cause. They also compared data for the 131 younger patients (<55 years of age) and those for the 372 older patients (\geq 55 years of age).

The prevalence of PFO was significant greater among younger patients with cryptogenic stroke (43.9%) than those with stroke of known cause (14.3%). The prevalence of PFO was also significant greater among older patients with cryptogenic stroke (28.3%) than those with stroke of known cause (11.9%).

Complex interventions to improve physical function and maintain independent living in elderly people: a systematic review and meta-analysis

The Lancet 2008; 371: 699-700

A systemic review of available randomised controlled trials in the literature assessing community-based multifactorial interventions in elderly people living at home with at least 6 months of follow-up. 89 trials with 97984 participants were included. The result showed that interventions reduced the risk of not living at home (relative risk [RR] 0.95, 95% CI 0.93–0.97), nursing-home admissions (0.87, 0.83–0.90), hospital admissions (0.94, 0.91–0.97), falls (0.90, 0.86–0.95) but not death (1.00, 0.97–1.02). Physical function of the intervention group is also better (standardised mean difference -0.08 , -0.11 to -0.06). However, the review did not specify which type or intensity of intervention is likely to be beneficial.

Acute ischaemic stroke in patients aged 80 years and older- focus on the tolerability of thrombolytic agents **Drugs & Aging 2008; 25(2): 95-103.**

Ageing is independently associated with higher mortality and morbidity in acute ischaemic stroke. Among all the RCTs for r-tPA in ischaemic stroke, only 42 patients were aged >80 years. Because of the paucity of data from RCTs, its effectiveness in this age group could not be established. In addition, the pool analysis from RCTs showed that older age as a continuous variable was associated with a greater risk for symptomatic ICH. In this review, the authors reviewed all the published cohorts on r-tPA in ischaemic stroke that included patients aged >80 years and identified 10 studies with a total of about 500 patients. It was impossible to compare directly the effectiveness of treatment between older and younger patients in cohorts, but the information gathered was still very helpful to supplement the knowledge gap.

In general, mortality was up to 2-3 fold higher in the >80y old. This difference in mortality was similar to the mortality difference in surveys on untreated old and young stroke patients. In all but one of the cohorts, the symptomatic ICH rate (from 2.6-13%) was similar to younger patients. It may be cautiously concluded that while we still could not establish a definite clinical efficacy with confidence, r-tPA in ischaemic stroke aged >80 years carried no extra harm. Age is a poor prognostic factor for outcome, but not a negative treatment effect. Current evidence dose not show a differential treatment effect with age.

Overseas Scientific Meetings

Name	Time	Organizer	Contact
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
Fifth Congress of the EUGMS Geriatric medicine in a time of generational shift	3/9/08 – 6/9/08 Copenhagen, Denmark	European Union Geriatric Medicine Society	http://eugms2008.org/
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
Annual National Dementia Research Forum	18/9/08-19/9/08 Sydney, Australia	University of New South Wales	http://www.dementia.unsw.edu.au/DCRCweb.nsf/page/Forum
6th International Congress on Mental Dysfunctions & Other Non-Motor Features in Parkinson's Disease and Related Disorders	16/10/08-19/10/08 Dresden, Germany	The Meeting is endorsed by the World Federation of Neurology Research Group on Parkinson's Disease and Related Disorders	http://www.kenes.com/pdment2008/
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
British Geriatrics Society Spring Meeting	1/4/09-3/4/09 Bournemouth, UK	British Geriatrics Society	www.bgs.org.uk
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
Australian & New Zealand Society for Geriatric Medicine Annual Scientific Meeting	7/9/09- 9/9/09 Fremantle, Australia	Australian & New Zealand Society for Geriatric Medicine	www.asgm.org.au

Hong Kong Geriatrics Society – Membership application / Information update Form

A). Personal information for *membership application or information update*

Name	
Corresponding Address	
Current Practice (HA - Hospital Authority/ DH - Department of Health / PR - Private practice / HS - Hospital Service Department / HK - HKU / CU- CUHK / OT - Others)	“√” one of the following : <input type="checkbox"/> HA <input type="checkbox"/> DH <input type="checkbox"/> PR <input type="checkbox"/> HS <input type="checkbox"/> HK <input type="checkbox"/> CU <input type="checkbox"/> OT
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 "√" either one below
<input type="checkbox"/> a) I am an accredited Geriatric Specialist according to the criteria of HK Academy of Medicine <input type="checkbox"/> b) I am currently under higher specialty training in Geriatric Medicine according to HKAM <input type="checkbox"/> c) I am a registrable medical practitioner in HK who is interested in Geriatric Medicine but the above two conditions do not apply.	
Membership: (Official Use)	Regular/Associate
Approved by council at: (Official Use)	

*Category a or b (Annual fee : \$200) - Regular member

Category c (Annual fee: \$100) - Associate member (No voting right nor right to be elected as council member)

For new application of membership, one has to be proposed by a **Regular Member of the Society:

Name of Proposer: _____ (Signature: _____)

B). I have the following publication/presentation of local studies / surveys in Geriatrics:

Title (Summary can be sent separately)	Journal index/ Name of meeting or seminar & dates

Please send this form to the following:

Dr. Kong Ming Hei
 Honorary Secretary, c/o Department of Medicine, Pamela Youde Nethersole Eastern Hospital, 3 Lok Man Road, Chai Wan, Hong Kong

☐ ☐ ☐

C). **Annual / Life membership fee**

Please send a cheque payable to "The Hong Kong Geriatrics Society"

(Regular member: \$ 200 – 1 yr; Life member \$2000; Associate member: \$ 100 – 1 yr)

**Please tick if you want a receipt & your address: _____

Name : _____ Signature: _____ Date : _____

E-mail address: _____

Please send to: **Dr. Shea Tat Ming, Honorary Treasurer, Hong Kong Geriatrics Society, Rm 902, Crawford House, 70 Queens’ Road Central, HK**