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持續醫學進修專訊



Recognizing Rickettsial Diseases in Hong Kong

Dr. LAM, Wilson

CME
LIVE



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EDITORIAL – July Issue 2023



Dr. CHAN, Pierre

Co-editor, Hong Kong Medical Association CME Bulletin

Presenting the Revamped Clinic Computer System: HKMA CMS 5.0

The healthcare industry is constantly evolving, and with technological advancements, the healthcare providers are looking for better ways to manage and organize their operations. In Hong Kong, the Hong Kong Medical Association (HKMA) has been working on a revamp of its Clinic Management System, and the result is the HKMA CMS 5.0, which is expected to be ready in the second half of 2023.

Main Features of HKMA CMS 5.0

The HKMA CMS 5.0 is designed "to protect the legal interests of both the patient and the healthcare provider" [MCHK 1.1.2]. One of the main features of HKMA CMS 5.0 is its compliance with the Code of Professional Conduct of the Medical Council of Hong Kong (MCHK). This ensures that the system adheres to the highest professional standards and protects the interests of both patients and healthcare providers.

Data security is a top concern in the healthcare industry. HKMA CMS 5.0 addresses this issue by keeping all medical records securely stored on the local drive of the clinic. This means that no medical records are uploaded to any cloud or server, ensuring that unauthorized persons do not have access to the sensitive information contained in the records [MCHK 1.1.4]. With the increasing threat of cyber-attacks and data breaches, the security of medical records is of utmost importance, and the HKMA CMS 5.0 ensures that healthcare providers can keep their patients' records safe and secure. Another important aspect of the HKMA CMS 5.0 is its design to help doctors and healthcare providers keep their responsibilities and liabilities under the Personal Data (Privacy) Ordinance (Cap. 486) [MCHK 1.1.5].

Additional templates in HKMA CMS 5.0

In addition to the above features, the HKMA CMS 5.0 also includes some additional templates that can be useful for healthcare providers. For example, the system includes a consent template that can be used to facilitate the process of obtaining informed consent from patients before diagnostic procedures and medical treatment in the clinic [MCHK 2.1]. This can help doctors and healthcare providers ensure that their patients are fully informed about their procedures and treatments, improving the quality of care provided.

Another useful template included in the HKMA CMS 5.0 is the Dangerous Drugs Register template. This template is compiled with the requirements of the Code of Professional Conduct of the MCHK and the regulations 5/6 of the Dangerous Drugs Regulations (Cap. 134A) [MCHK 10.4 and Appendix F]. Furthermore, HKMA has a printed version of the Dangerous Drugs Register for doctor members to purchase. Please contact the HKMA secretariat office for further details.

Brief history of the HKMA CMS

The HKMA CMS has a long history, with the first version, the Tao Yuan Project HKMA CMS 3.0, and Wuhan Version of HKMA CMS 3.0, being launched in 2009. Since then, the system has undergone several upgrades, including the HKMA 3X/Yuan Wang and HKMA 3X/Nu Wa versions in 2016. The HKMA CMS 5.0 is the latest version of the system, with new features and improvements designed to meet the evolving needs of healthcare providers in Hong Kong. Moreover, the ownership of the HKMA CMS 5.0 is 100% by the HKMA, so that, firstly the system is in HKMA doctor members' control and secondly it is non-profit making. These are important points when considering a secure computer management system in a clinic.

Conclusion

The HKMA CMS 5.0 is designed to meet the legal requirements of the healthcare industry in Hong Kong, especially the Code of Professional Conduct of the Medical Council of Hong Kong, with features of medical records keeping and protecting the privacy and confidentiality of patients, as well as helping healthcare providers to comply with relevant regulations of handling personal data and dangerous drugs. With this new system, HKMA doctor members can improve the quality of care to their patients, while also ensuring that they meet the legal and ethical obligations.

Members who are interested in learning more/implementing the HKMA CMS 5.0, a trial session with physical attendance in our Premises could be arranged. Please contact the HKMA Secretariat at 2527-8452 or email to cme@hkma.org.

Recognizing Rickettsial Diseases in Hong Kong

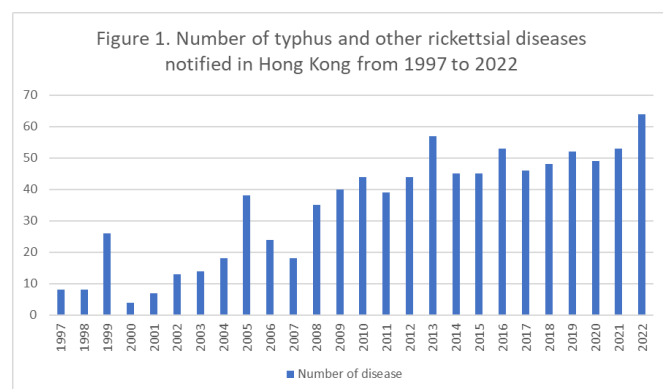


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Rickettsial diseases in Hong Kong are usually associated with patients exposed to vectors carrying the bacteria in vegetated areas of the countryside. With hiking trending in Hong Kong amidst travel restrictions during the COVID-19 pandemic, it would not be a surprise to have **more patients with rickettsiosis presenting to primary care**. Rickettsial disease often present with undifferentiated febrile illnesses which, **if diagnosis is missed and treatment is delayed, could lead to potentially serious consequences**.

In Hong Kong, **scrub typhus and spotted fever are the most commonly encountered rickettsial diseases**. They are caused by a group of bacteria known as rickettsiae. Typhus and other rickettsial diseases are notifiable diseases in Hong Kong. **The number of cases notified has been increasing over the years with the highest number recorded in 2022** (Figure 1)¹, when hiking and activities in the countryside were at its peak while people were exploring well ventilated outings locally during the COVID-19 pandemic. This is in stark contrast to other commonly seen infectious diseases locally, such as influenza, which most declined a lot in incidences in the past few years.



Scrub typhus (caused by *Orientia tsutsugamushi*) is transmitted through the bites of infected trombiculid mites inhabiting in scrubby areas². Trombiculid mites are small (1-2mm in length) and red in color. Spotted fever is transmitted through the bites of infected ticks clustering at tips of grasses or leaves in dense vegetations with suitable animal hosts (e.g. dogs, rodents).

Being a group of diseases with readily available and effective antibiotic treatment, it is very important for clinicians to be able to recognize the typical clinical features to avoid the not uncommon occasion of infection progressing to severe disease with multi-organ failure and fatalities (mortality rate about 6%, range: 0-70%)³. **The incubation period for scrub typhus is commonly 7-14 days whereas that of spotted fever is 6-15 days⁴**. Patients would present with non-specific symptoms at the beginning including **fever, chills, intense headache, generalized myalgia**. At this stage it would be difficult to differentiate the symptoms from those of a viral infection although systemic symptoms such as upper respiratory tract or urinary symptoms should not be present. Pulse-temperature dissociation (as known as “relative bradycardia”) (Figure 2) may be seen which also occur in many other infectious diseases especially intracellular gram-negative infections such as typhoid and Legionnaire’s disease but not in viral infections. **Characteristic skin rash would develop after a few days which is non-pruritic, non-painful, non-blanchable maculopapular rash or sometimes petechiae-like**. The skin lesions are dusky red to pink in color and are usually separated from one another. They typically start on the abdomen before spreading to limbs and face but do not coalesce like viral exanthem or allergic skin rash.



Figure 2. Pulse-temperature dissociation (relative bradycardia). (temperature in blue, pulse rate in red).

Before the onset of fever and associated symptoms, some patients might develop a characteristic **painless eschar at the site of the chigger bite which is initially a painless papule, then turning into a larger skin lesion covering by with a black crust, because of central necrosis, surrounded by erythema** (Figure 3 and 4). However, lack of eschar cannot rule out rickettsial diseases as it is sometimes not present or hard to discover because of it being asymptomatic and/or in some hidden locations (e.g. skin fold under the breast) (Figure 5).



Figure 3. Eschar and skin rash in rickettsial disease.



Figure 4. Eschar and skin rash in rickettsial disease.



Figure 5. Eschar under skin fold of right breast (note skin lesions on other part of the body).

Empirical treatment should be started as soon as possible once rickettsial diseases are suspected without waiting for confirmation of disease. If left untreated, patients may develop complications including kidney injury, hepatitis, retinitis, hearing impairment, pneumonitis, heart failure, various neurological manifestations or even death. It was not uncommon to see patients, especially elderly, diagnosed with severe rickettsial diseases (and treated as such) retrospectively after they were admitted to intensive care units. Some may consider malaria or dengue fever as differential diagnosis as they also could present with undifferentiated fever. However, local cases of malaria and dengue fever are extremely rare. Malaria do not present with skin rash or eschar. Dengue fever classically present with skin rash, but the skin rash is usually quite diffuse and blanchable and is quite distinct from the rash of rickettsial disease. Typhoid fever is endemic in Hong Kong and can present with fever, headache, and skin rash. But the skin rash (called rose spots) usually only appears transiently on the abdomen for a few days, few in number, and do not usually spread to other body parts (Figure 6-8). Secondary syphilis, being a great mimicker, and disseminated gonococcal infection can present with similar rash but patients don't usually have high fever, headache, or myalgia. The most difficult scenario is when rickettsial diseases presenting with undifferentiated fever but with no skin rash or eschar in which most patients would probably be diagnosed as having non-specific viral infection. Hence it is extremely important to **consider the diagnosis and enquire patients specifically about possible exposure to the infection**, as most patients with scrub typhus or spotted fever in Hong Kong have history of hiking in vegetated areas in the countryside.



Figure 6. (Left) Rickettsial diseases with skin rash on abdomen might be mistaken as rose spots seen in typhoid and paratyphoid fever. (Right) Paratyphoid fever with rose spots on abdomen.



Figure 7 and 8. Skin lesions elsewhere (anterior thigh in this picture) and eschar in the popliteal region gave away the diagnosis of rickettsiosis (same patient in left photo of figure 6).

Diagnosis of rickettsial diseases is usually confirmed by serology in Hong Kong. Turnaround time for serology tests is slow and a four-fold change is required for diagnosis. So many a time the result only serves as a confirmation of a treated case. Weil-Felix agglutination test is no longer recommended due to its poor sensitivity and specificity. However, the turnaround time for Weil-Felix test is relatively quick (a few days usually) and for scrub typhus the characteristic pattern is elevation in the OX-K antigen. Therefore Weil-Felix test is still used sometimes in Hong Kong. Polymerase chain reaction test is available locally but is seldom used. If biopsy is done for the skin lesions one would expect to see lymphohistiocytic vasculitis, which is the underlying pathogenesis for the characteristic skin rash. For routine laboratory investigations, patients with rickettsial diseases usually would have either **leucopenia or leukocytosis, thrombocytopenia, mild elevation in hepatic enzymes and lactate dehydrogenase.**

The treatment of choice for typhus and other rickettsial diseases is doxycycline (100mg twice daily, oral or intravenous)³, which is readily available in Hong Kong. It has very high efficacy and resistance is rare. **Alternative antibiotic is azithromycin for mild to moderate disease** if doxycycline cannot be used although data is much fewer when compared to doxycycline. Notably, doxycycline is still the recommended treatment of choice even in pregnant patients and children. Fluoroquinolones such as levofloxacin are not recommended for treatment as they are not effective. Other antibiotics which might be useful include rifampicin and chloramphenicol, but they are seldom used as such in Hong Kong. Patients usually respond to antibiotic very quickly within 24-48 hours so it is somewhat can be considered a therapeutic trial as well while waiting for confirmatory tests. Total duration of antibiotic is 7 days unless it is severe disease which might warrant longer antibiotic course. Prevention of rickettsial diseases in Hong Kong focuses on measures to avoid being bitten by vectors transmitting the diseases when visiting rural areas. Vaccine is not available for typhus and other rickettsial diseases. Some experts suggest chemoprophylaxis with weekly dose of doxycycline 200mg daily in ultra-high-risk individuals such as occupational need (field operations).

In conclusion, scrub typhus and spotted fever are the most common rickettsial diseases in Hong Kong and their incidences are increasing in recent years. Severe disease and deaths occur, and it is of paramount importance to recognize the disease early and offer potentially life-saving antibiotic treatment. **The typical clinical picture is a patient presenting with an eschar 1-2 weeks after an outing to vegetated areas in the countryside, followed by undifferentiated fever with intense headache, myalgia and finally generalized rash a few days later; thrombocytopenia and mildly elevated liver enzymes are very common and rapid response to empirical doxycycline is almost universal.**

Key lessons

1. Typhus and other rickettsial disease are increasingly seen in recent years.
2. Scrub typhus and spotted fever are the most common rickettsial diseases in Hong Kong.
3. Most valuable information in history taking is potential exposure to vector carrying the bacteria around one to two weeks before symptoms onset.
4. Typical symptoms of rickettsial diseases are fever, intense headache and myalgia, eschar, and diffuse maculopapular skin rash.
5. Doxycycline is the treatment of choice for rickettsial diseases.

Key message

Recognizing rickettsial diseases early followed by empirical treatment save lives.

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3. Travel-acquired scrub typhus: emphasis on the differential diagnosis, treatment, and prevention strategies. J Travel Med. 2007 Sep-Oct;14(5):352-5
4. Typhus and Other Rickettsial Diseases. Available at <https://www.chp.gov.hk/en/healthtopics/content/24/45.html>

Q&A Assessment Questions

Complete Spotlight, **1 CME Point** will be awarded for at least five correct answers

Answer these on page 10 or make an online submission at: www.hkma.org. Please indicate whether the following statements are true or false.

1. Scrub typhus and epidemic typhus are the most common rickettsial diseases in Hong Kong.
2. Incubation period of scrub typhus is 7-14 days.
3. Relative bradycardia is pathognomonic of rickettsial diseases.
4. Absence of eschar exclude rickettsial diseases.
5. Typical symptoms of rickettsial diseases include fever, headache and bilateral conjunctivitis.
6. Both leucopenia and leukocytosis could be seen in rickettsial diseases.
7. Weil-Felix test has good sensitivity and specificity.
8. Fluoroquinolone is recommended for treatment of rickettsial diseases.
9. Azithromycin is alternative treatment to doxycycline in mild to moderate rickettsial diseases.
10. There is currently no vaccine available for rickettsial diseases.

Answer to June 2023

Spotlight – Overview in Role of Magnetic Resonance Imaging in Rectal Cancer Primary Staging

1. T 2. T 3. F 4. F 5. T 6. T 7. T 8. F 9. T 10. F

Complete Cardiology case,
0.5 CME POINT will be awarded for
at least 2 correct answers in total

The content of the July 2023 Cardiology Series is provided by:
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七月臨床心臟科個案研究之內容承蒙張玲玲醫生及陳斯堯醫生提供。

A Paced Rhythm?

An 85 year old gentleman with a traditional dual chamber pacemaker implanted several years ago for sick sinus syndrome presents to you after having been found collapsed at home. He had a bout of flu prior to presentation and had reported to have had poor oral intake and urinary output for 2 days. Further history taking reveals he has had bouts of paroxysmal atrial fibrillation but otherwise with no other cardiac problem. His family reports his private doctor had recently put him on a new medication to try and suppress the atrial fibrillation. He was comatose and in shock on arrival to the accident and emergency department with a GCS of 3/15, vitals of BP 58/31, HR 50 bpm, SpO2 100% in RA, afebrile. An ECG was performed [Figure 1].

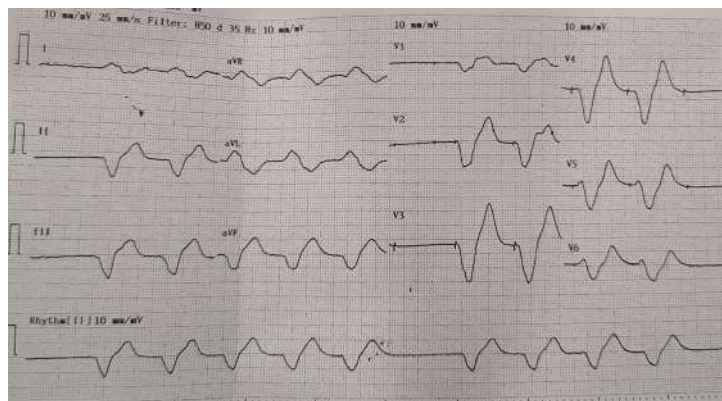


Figure 1

Q&A

Please answer ALL questions

Answer these on page 10 or make an online submission at: www.hkma.org.

1. What is the rhythm shown in the ECG of Figure 1?

- A. Atrial flutter
- B. Pre-excited atrial fibrillation
- C. Idioventricular rhythm
- D. Paced ventricular rhythm with intermittent non-capture

2. What anti-arrhythmic do you suspect to have been prescribed by his private doctor?

- A. Mexiletine
- B. Dronedaron
- C. Amiodarone
- D. Flecainide

3. What would be your next step of management?

- A. Intubation and supportive therapy for the shock then proceed for interrogation of the pacemaker and increasing the atrial output
- B. Intubation and supportive therapy for the shock then proceed for interrogation of the pacemaker along with increasing the ventricular output
- C. Intubation and supportive therapy for the shock along with intravenous sodium bicarbonate +/- lipid emulsion therapy
- D. Intubation and supportive therapy for the shock along with intravenous sodium bicarbonate +/- lipid emulsion therapy and urgent haemodialysis

Cardiology June Answers

Answers: 1. A 2. D 3. E

Explanations

Infective endocarditis is a serious condition that can cause significant morbidity and mortality. However, low grade transient bacteremia occurs frequently during routine daily activities such as tooth brushing, flossing, chewing food, use of wooden toothpicks, and even more frequently in patients with poor dental health. Therefore, the risk of endocarditis may be related more to the cumulative low-grade bacteremia rather than sporadic high-grade bacteremia after dental procedures. According to previous study, the estimated risk of endocarditis after dental procedures is very low and the use of antibiotic prophylaxis can only prevent a small number of endocarditis. These, together with potential risks of allergic reaction to antibiotics and the emergence of drug-resistance bacteria explain the need of restricting antibiotic prophylaxis. Only those patients with the highest risks of infective endocarditis (Table A) undergoing the highest risks procedures (Table B) should receive antibiotics prophylaxis.

Good oral hygiene with regular dental visits, disinfection of wounds, strict aseptic technique when manipulating venous catheter and invasive procedure are considered to be more important than antibiotics in minimizing the risks of infective endocarditis. Use of curative antibiotics is also recommended for those with any focus of bacterial infection.

1. Prosthetic heart valve (either surgical valves or transcatheter heart valves) or prosthetic material used for cardiac valve repair or #left ventricular assisted device/implantable heart
2. Previous infective endocarditis
3. Congenital heart disease IF
a. Cyanotic congenital heart disease
b. Repaired congenital heart disease with residual defects at the site or adjacent to the site of a prosthetic patch or prosthetic device (which inhibit endothelialization)
c. Completely repaired congenital heart defect with prosthetic material or device, whether placed by surgery or by catheter intervention, during the first 6 months after the procedure
4. #Cardiac transplantation recipients who develop cardiac valvulopathy

Table A. Cardiac conditions with highest risks of infective endocarditis for which antibiotics prophylaxis with dental procedures is reasonable according to the latest AHA and ESC guidelines

include in the AHA guideline only

Recommendations	Class
A. Dental procedures	
• Antibiotic prophylaxis should only be considered for dental procedures requiring manipulation of the gingival or periapical region of the teeth or perforation of the oral mucosa.	IIa
• Antibiotic prophylaxis is not recommended for local anaesthetic injections in non-infected tissues, treatment of superficial caries, removal of sutures, dental X-rays, placement or adjustment of removable prosthodontic or orthodontic appliances or braces, or following the shedding of deciduous teeth or trauma to the lips and oral mucosa.	III
B. Respiratory tract procedures	
• Antibiotic prophylaxis is not recommended for respiratory tract procedures, including bronchoscopy or laryngoscopy, transnasal or endotracheal intubation.	III
C. Gastrointestinal or urogenital procedures or TOE	
• Antibiotic prophylaxis is not recommended for gastroscopy, colonoscopy, cystoscopy, vaginal or caesarean delivery or TOE.	III
D. Skin and soft tissues procedures	
• Antibiotic prophylaxis is not recommended for any procedure.	III

Table B. Recommendation of antibiotics prophylaxis for patients with highest risks of infective endocarditis according to the latest ESC guideline

Cardiology June Answers (continued)

Situation	Agent	Adults	Children
Oral	Amoxicillin or Ampicillin	2 g oral	50 mg/kg oral
Unable to take oral medication	Ampicillin	2 g IM or IV	50 mg/kg IM or IV
	Cefazolin or ceftriaxone	1 g IM or IV	50 mg/kg IM or IV
	Cephalexin	2 g IV	50 mg/kg IV
Allergic to penicillin or ampicillin	Azithromycin or clarithromycin	500 mg oral	15 mg/kg oral
	Doxycycline	100 mg	<45 kg, 2.2 mg/kg >45 kg, 100 mg
	Clindamycin	600mg oral or IV	20 mg/kg oral or IV

Table C. Possible antibiotics prophylaxis regimens according to AHA and ESC guidelines. Single Dose 30 to 60 Minutes Before Procedure

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Dr. WONG Chi YuenMBBS (HK), FHKCP, FHKAM (Medicine), FRCP (Edin), Specialist in Cardiology
六月臨牀心臟科個案研究之內容承蒙徐城烽醫生及黃志遠醫生提供。

Dermatology June Answer

1. C

Lichen amyloidosis is a type of primary localized cutaneous amyloidosis (PLCA), which occurs due to abnormal deposition of amyloid protein in the skin. Together with macular amyloidosis and nodular amyloidosis, they form the spectrum of PLCA.

2. B

Lichen amyloidosis is reported to be more common among Asian and Middle Eastern population, with both genders aged 30-50 being commonly affected.

3. A

Lichen amyloidosis mostly occurs on the pretibial areas of extremities, with rare involvement of the chest and trunk. Upper back and neck are more commonly involved in macular amyloidosis than in lichen amyloidosis.

4. F

Localized amyloidosis, including lichen amyloidosis, is not usually associated with hematological malignancies, but it can be linked to some endocrine or autoimmune disorders such as systemic sclerosis, systemic lupus erythematosus or primary biliary cirrhosis. Blood and urine tests should thus be conducted for patients with positive family history. Localized amyloidosis, unlike systemic amyloidosis which is associated with multiple myeloma, affects only a single organ or part of the body. Except for the rare case of primary cutaneous nodular amyloidosis, it is generally accepted that localized amyloidosis does not progress to systemic disease as their amyloid is derived from keratin peptides of necrotic keratinocytes, rather than circulating immunoglobulins or serum proteins as it is in systemic amyloidosis.

5. E

Treatment for lichen amyloidosis mainly focuses on symptomatic relief of itching, which is considered the primary triggering factor for the deposition of amyloid. Sedating antihistamines, topical or intralesional steroids is therefore an effective treatment for lichen amyloidosis. Recurrence is not infrequent despite successful treatment. Phototherapy and surgical procedures such as laser and dermabrasion are also available for resistant cases.

Dermatology Series for June 2023 is provided by:

Dr. LEUNG Wai Yiu, Dr. TANG Yuk Ming, William,**Dr. CHAN Hau Ngai, Kingsley, Dr. KWAN Chi Keung,****Dr. NG Shun Chin, Dr. CHENG Hok Fai and Dr. KOH Chiu Choi**

Specialists in Dermatology & Venereology

六月皮膚科個案研究之內容承蒙梁偉耀醫生、鄧旭明醫生、陳厚毅醫生、關志強醫生、吳順展醫生、鄭學輝醫生及許招財醫生提供。

Complete Dermatology case,
0.5 CME POINT will be awarded for
at least 3 correct answers in total

Dermatology Series for July 2023 is provided by:
Dr. KWAN Chi Keung, Dr. TANG Yuk Ming, William, Dr. CHAN Hau Ngai, Kingsley,
Dr. LEUNG Wai Yiu, Dr. NG Shun Chin, Dr. CHENG Hok Fai and Dr. KOH Chiu Choi
Specialists in Dermatology & Venereology
七月皮膚科個案研究之內容承蒙關志強醫生、鄧旭明醫生、陳厚毅醫生、
梁偉耀醫生、吳順展醫生、鄭學輝醫生及許招財醫生提供

Firm Whitish Spots on Lower Limbs



A 66-year-old gentleman who had hypertension and diabetes came to your office complaining multiple hard pimples on ankle and feet. He could not remember the duration but probably longer than 6 months. There is not much symptom such as itch nor pain. Physical examination revealed multiple keratotic papules over ankle and dorsum of feet.

Q&A

Please answer ALL questions

Answer these on page 10 or make an online submission at: www.hkma.org.

- What is/are the differential diagnoses?
 - Viral warts
 - Actinic keratoses
 - Seborrhoeic keratoses
 - Stucco keratoses
 - All of the above
- Which investigation will you do to make the diagnosis?
 - Blood for HPV genotyping
 - Skin scraping for HPV genotyping
 - Skin scraping for viral culture
 - Skin scraping for fungal smear and culture
 - No investigation done, by clinical diagnosis
- These lesions are infectious.
(True / False)
- These lesions are pre-malignant changes.
(True / False)
- What is your treatment to this gentleman?
 - Reassurance, no treatment is needed
 - Topical keratolytic agent such as salicylic acid
 - Cryotherapy
 - Cauterization and curettage (C&C)
 - All of the above

Name

Signature:

HKMA Membership No.

Contact Tel No.:

HKID No. - xxx(x)

Answer Sheet

July 2023

ANSWER SHEET

Please answer ALL questions and write the answers in the space provided.

SPOTlight

Complete Spotlight, 1 CME point will be awarded for **at least 5** correct answers

1	2	3	4	5	6	7	8	9	10
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cardiology

Complete Cardiology, 0.5 CME point will be awarded for **at least two** correct answers

1	2	3
<input type="text"/>	<input type="text"/>	<input type="text"/>

Dermatology

Complete Dermatology, 0.5 CME point will be awarded for **at least three** correct answers

1	2	3	4	5
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

A maximum of 20 points can be awarded for self-study per year and no upper limit of CME points for attending CME lectures

Please return the completed answer sheet to the HKMA Secretariat (email: cme@hkma.org or Fax: 2865 0943) on or before **15 August 2023** for documentation.

If you want to complete the exercise online, please scan the below QR code and you are **NOT** required to return the answer sheet by fax/email.



CME Self-Studies Series

You can register the CME Lectures and finish the CME Self-Studies Series within the webpage (https://www.thkma.org/cme/continuous_medical_education/).

Don't wait! Please register and create your own account through <https://www.thkma.org/members/register.php> (1st time register account is limited on desktop ONLY) to experience our new Members Portal.

Please scan the QR code below to access the latest CME Self-Studies Series online.



HKMA CME Lecture Policy and Procedure

Lecture in Physical Attendance Mode

1. Unless otherwise specified, registrations are accepted from HKMA Members or Medical Practitioners in Hong Kong ONLY. Non-Medical Practitioners will not be served.
2. Prior registration is strictly required.
3. Registration is basically on a first-come-first-served basis except for district-based lectures that registration priorities will be given to doctors practicing in the related districts.
4. No walk-in will be accepted. Attendance without registration will not be recognized and no CME point(s) will be awarded. (*Please refer to the policy of "Non-registrants at CME Lecture in Physical Attendance Mode")
5. HKMA Members and Medical Practitioners intending to register for CME lectures must complete the online registration form at https://www.thkma.org/cme/continuous_medical_education/ and return to HKMA Secretariat before deadline.
6. Confirmation emails will be sent out by the HKMA Secretariat to successful registrants before each lecture. Please ensure that registration is confirmed before coming to CME lecture.
7. Successful registrants must attend the lecture in real-time and sign in person the attendance form(s) for obtaining the CME point(s).
8. Successful registrants can only attend ONE lecture at a time regardless of which CME providers. Only 1 Lecture will be counted if the doctor watches multiple CME Lectures conducted at the same time.

Non-registrants at CME Lecture in Physical Attendance Mode

1. Basically, all CME lectures require prior registration and entertain no non-registrant. But under exceptional circumstances that non-registrants come to CME lecture without prior registration, a non-registrant fee will be charged.
2. If under such exceptional circumstances, non-registrants must produce proof of personal identity together with MCHK registration for verification by the on-site HKMA staff.
3. Non-registrants must settle the exact amount of the non-registrant fees in cash or cheque before accessing the lecture. Electronic payment is not accepted, and no change will be provided.
4. The non-registration fees schedule is shown below:

	HKMA Premises	Venues outside HKMA Premises
HKMA Member	HK\$150 per person	HK\$300 per person
Non-HKMA Member	HK\$300 per person	HK\$600 per person

5. Any non-registrants in breach of the above policy will have to bear full legal responsibilities. The HKMA serves rights to take action against non-registrants for loss incurred for the non-observance.
6. This policy takes effect from 1 June 2023.

Lecture in Online (via ZOOM)

1. Registration is open to HKMA Members or Medical Practitioners in Hong Kong ONLY. Non-Medical Practitioners will not be served.
2. Prior registration is strictly required.
3. Registration is basically on a first-come-first-served basis.
4. No walk-in will be accepted. Attendance without registration will not be recognized and no CME point(s) will be awarded.
5. Please complete the online registration form at https://www.thkma.org/cme/continuous_medical_education/ and return to HKMA Secretariat before deadline.
6. Confirmation / notification emails will be sent out by the HKMA Secretariat to successful registrants 1 day and 1 hour before each lecture. Please ensure that registration is confirmed before attending the CME lecture online.
7. CME accreditation will apply to both specialist and non-specialist doctor for each lecture. If the CME accreditation is for non-specialist doctors only, there will be a notice showing in the registration form.
8. CME point(s) will be awarded to successful registrants after attending the lecture and completing the quiz with at least 50% correct answers.
9. Successful registrants must watch the lecture in real-time and complete the online quiz within the designated time after the lecture. Late submission of the quiz will not be accepted.
10. Successful registrants can only attend ONE lecture at a time regardless of which CME providers. Only 1 Lecture will be counted if the doctor watches multiple CME Lectures conducted at the same time.
11. Successful registrants may install ZOOM app/launcher system to join the lecture online.
12. Wi-Fi connection is recommended on your mobile device or computer while watching the lecture via ZOOM. Unstable internet connection may cause interruption to the broadcasting.
13. In case of technical issue and broadcast interruption, please be patient while the HKMA Secretariat works on fixing the problem; the video should resume in a few minutes.

Lecture in Hybrid Format (Online + Physical Attendance)

1. Registration policy applies the same statements as above.
2. Please ensure that registration is confirmed before attending the lecture.

General lecture policy

1. Doctor should sign for own CME.
2. Registration will cease when Q & A Session starts.
3. No recording unless permission is granted by the HKMA.
4. If doctor has attended CME Lecture in physical attendance and CME online at the same point of time, only CME Point(s) for the Lecture in physical attendance would be counted.
5. The HKMA will investigate when non-compliance at CME Session is reported, further action will be considered to ensure all CME activities are properly held.

Special weather arrangement

When Tropical Storm Warning Signal No. 8 (or above) or a Black Rainstorm Warning Signal is in force within 3 hours of the commencement time, the relevant CME function will be cancelled. (i.e., CME starting at 2:00 pm will be cancelled if the warning signal is hoisted or in force any time between 11:00 am and 2:00 pm).

The function will proceed as scheduled if the signal is lowered three hours before the commencement time. (i.e., CME starting at 2:00 pm will proceed if the warning signal is lowered at 11:00 am but will be cancelled even if it is lowered at 11:01 am).

When Typhoon No. 8 Signal or a Black Rainstorm signal is in force after CME commencement, an announcement will be made depending on the conditions as to whether the CME will be terminated earlier or be conducted until the end of the session.

The above are general guidelines only. Individuals should decide on their CME attendance according to their own transportation and work/home location considerations to ensure personal safety.

Contact

For enquiries, please contact the CME Department of the HKMA Secretariat at 2527-8452 or cme@hkma.org.



Adult Immunisation Campaign 2023

Shingles Vaccination: Guidelines and Best Practices for Primary Care Providers

11 August 2023, Friday



Herpes Zoster (Shingles), caused by the varicella-zoster virus, is a contagious disease that lies dormant in the nervous system after one recovers from chickenpox. Strengthening the immune system and vaccination can help prevent or reduce the severity of the disease. A CME lecture will be held to update on Shingles vaccination guidelines and practical tips for medical practitioners. Interested members please refer to the details below for registration.

Time	: 2:00-2:45pm Lecture
	: 2:45-3:00pm Q&A
Speaker	: Dr. TSO, Raymond <i>Specialist in Respiratory Medicine</i>
Fee	: Free-of-charge
Registration Deadline	: Friday, 08 August 2023
CME Accreditation	: For Non-specialist Doctors: 1 CME point # Accreditation for Specialist Doctors: Yes #



Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.

Sponsor: **GSK**

COVID19 and Beyond: Emerging Solutions in A Changing World

25 August 2023, Friday

COVID-19 is a disease caused by a new coronavirus called SARS-CoV-2. According to the WHO, 10-20% of recovered patients may experience long-term effects. Vaccination is effective in reducing the risk of severe illness, complications, and death. A CME lecture will be held to update the new emerging solutions of COVID-19. Interested members please refer to the details below for registration.

Time	: 2:00-2:45pm Lecture
	: 2:45-3:00pm Q&A
Speaker	: Dr. Paul GRIFFIN <i>Director of Infectious Diseases, Mater Health Services, Brisbane; Associate Professor of Medicine, University of Queensland School of Medicine; Medical Director, Nucleus Network</i>
Fee	: Free-of-charge
Registration Deadline	: Friday, 18 August 2023 ITAL
CME Accreditation	: For Non-specialist Doctors: 1 CME point # Accreditation for Specialist Doctors: Yes #



Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.

Sponsor: **moderna**

If you are interested to attend above CME Live lectures,
please register through <https://forms.gle/4Mf5zThFBLatpYsf8> or scan the QR code.
Please contact the HKMA Secretariat at 2527-8452 or email to cme@hkma.org.





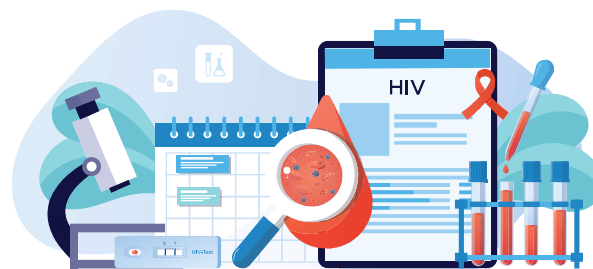
HKMA CME Hybrid Symposium On COVID-19

19 August 2023, Saturday



PROGRAMME	
1:00 – 2:00 p.m.	Lunch & Registration
2:00 – 2:05 p.m.	Introduction
2:05 – 2:35 p.m.	Lecture 1: Overview on COVID-19 Pandemic and Lessons Learnt from Hong Kong Studies Dr. CHU Wai Sing, Daniel <i>Specialist in Family Medicine</i>
2:35 – 3:15 p.m.	Lecture 2: Evolution of SARS-CoV-2 Antibody Responses and Immune Evasion Hotspots Prof. CAO Yun Long <i>Assistant Professor, Peking University</i>
3:15 – 3:35 p.m.	Lecture 3: Recent Advancement of Vaccination Strategy in Preventing COVID-19 Post PHEIC and the Challenges for COVID-19 Control and Prevention Dr. GAO Yong Jun <i>Medical Affairs Director, Sinovac</i>
3:35 – 4:00 p.m.	Panel Discussion

- Chairperson** : Representative from the Hong Kong Medical Association
- Format & Venue** : **Online and Physical Attendance**
Shanghai Room I, Level 8, Cordis Hotel, 555 Shanghai Street, MongKok, Kowloon, Hong Kong
- Fee** : Free-of-charge
- Capacity** : **The capacity is 48. Registration is strictly required on a first-come, first-served basis.**
- CME Accreditation** : **For Non-specialist Doctors: 2 CME points ***
Accreditation for Specialist Doctors: Yes #*
Accreditation from various colleges are pending.
* For both specialist and Non-Specialists doctors who attend via online, please completed the quiz online within two hours after the event with at least 50% correct for CME/CPD points.
- Registration Deadline** : **Friday, 11 August 2023**
- Registration** : Please register through <https://forms.gle/QEU4Vd3iy7RfkAzv6> or scan the QR code if you are interested to attend.
- Enquiry** : Please contact the HKMA Secretariat at 2527-8452 or email to cme@hkma.org.
* Please contact the HKMA Secretariat if you do not receive confirmation 3 days before the lecture.
- Sponsor** : **SINOVAC 科兴**





The HKMA CME Live Lecture in July 2023

All lectures start at 2:00-3:00 p.m.



	Date	Organizer and Topic	Speaker	CME Points	CME Accreditation from Colleges (Pending) #
1.	24 July (Mon)	The Hong Kong Medical Association Rapid Onset with Long-term Maintenance: A New Paradigm in Treatment of Major Depressive Disorder (MDD) <i>Sponsor: Janssen, a division of Johnson & Johnson (HK) Ltd</i>	Dr. WONG Chun Bun, Gordon <i>Specialist in Psychiatry</i>	1	Yes
2.	31 July (Mon)	The Hong Kong Medical Association Embracing a New Era in LDL Management: Latest Guidelines, Target Levels, and Treatment Options <i>Sponsor: Sanofi Hong Kong Limited</i>	Dr. CHAN Ki Wan, Kelvin <i>Specialist in Cardiology</i>	1	Yes

Physical Participation

3.	28 July (Fri)	The HKMA District Health Network (Yau Tsim Mong) Update on Heart Failure Management in HK <i>Sponsor: Novartis Pharmaceuticals (HK) Ltd</i>	Dr. TSUI Ping Tim <i>Specialist in Cardiology</i>	1	Yes
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The HKMA CME Live Lecture in August 2023

All lectures start at 2:00-3:00 p.m.



	Date	Organizer and Topic	Speaker	CME Points	CME Accreditation from Colleges (Pending) #
1.	10 August (Thu)	The Hong Kong Medical Association Prevention and Risk Reduction of CRC with the Recent Advancement of Gut Microbiome Research & Guideline <i>Sponsor: G-NiiB, Genie Biome Limited</i>	Prof. WONG Chi Sang, Martin <i>Specialist in Family Medicine</i>	1	Yes
2.	16 August (Wed)	The Hong Kong Medical Association 1: Updates on Colorectal Cancer Screening 2: Multitarget FIT-DNA Technology as the Latest Colorectal Cancer Screening Option in Hong Kong <i>Sponsor: Prenetics Limited</i>	1. Dr. LAM Yuk Fai, Frank <i>Specialist in Gastroenterology & Hepatology</i> 2. Dr. MA Wu Po, Mike <i>Chief R&D Officer, Prenetics, Ltd.</i>	1	Yes
3.	18 August (Fri)	The Hong Kong Medical Association A Spotlight on Why and How to Optimise COVID-19 Outcomes in High-Risk Patients <i>Sponsor: Pfizer Corporation Hong Kong Limited</i>	Dr. LAM, Wilson <i>Specialist in Infectious Diseases</i>	1	Yes
4.	23 August (Wed)	The Hong Kong Medical Association An Evidence-Based Perspective on the Latest Management of Male Lower Urinary Tract Symptoms <i>Sponsor: Synmosa Biopharma (HK) Co.Ltd</i>	Dr. HO Kwan Lun <i>Specialist in Urology</i>	1	Yes
5.	29 August (Tue)	The Hong Kong Medical Association Updated In Management of Lipid Disorders <i>Sponsor: Abbott Laboratories Limited</i>	Dr. CHEUNG Chi Yeung <i>Specialist in Cardiology</i>	1	Yes
6.	31 August (Thu)	The Hong Kong Medical Association Atrial Fibrillation Management: What's More Beyond Anticoagulation? <i>Sponsor: Sanofi Hong Kong Limited</i>	Dr. LAU, Chak Kwan <i>Specialist in Cardiology</i>	1	Yes

Physical Participation

Points to note for CME Lecture with Physical Participation:

1. Enrolment for CME lecture with physical attendance will be given to HKMA Members or Medical Practitioners in Hong Kong ONLY.
2. On behalf of the policy for lecture with physical participation, please refer to P. 15 for more details.

	Date	Organizer and Topic	Speaker	CME Points	CME Accreditation from Colleges (Pending) #
1.	16 August (Wed) 2:00-3:00 p.m.	The HKMA District Health Network (Sha Tin) Latest Diagnostic Tools and Treatment Paradigm for Prostate Cancer Venue: Regency Ballroom I, Hyatt Regency Hong Kong, Sha Tin <i>Sponsor: Janssen, a division of Johnson & Johnson (HK) Ltd.</i>	Dr. KAN Wai Man, Raymond <i>Specialist in Urology</i>	1	Yes
2.	23 August (Wed) 1:30-3:15 p.m.	The HKMA District Health Network (Tai Po) Seminar on Breast Cancer 1. Prevention, Awareness, Screening and Early Diagnosis of CA Breast 2. Multidisciplinary Assessment and Management Plan for Confirmed Cases 3. Treatment of CA Breast Venue: Deluxe Cuisine 百匯軒 No. 302, L3, East Wing, Tai Wo Plaza, 12 Tai Wo Road, Tai Po <i>Sponsor: Daiichi-Sankyo Hong Kong Ltd.</i>	1. Dr. HO Nga Sze, Candace <i>Specialist in General Surgery</i> 2. Dr. LEE Chi Yan, Conrad <i>Specialist in Clinical Oncology</i> 3. Dr. NG Kim Pong, Kenny <i>Specialist in Medical Oncology</i>	2	Yes
3.	30 August (Wed) 2:00-3:00 p.m.	The HKMA District Health Network (Central, Western & Southern) Gout Management Venue: Central Premises, 2/F, Chinese Club Building, 21-22 Connaught Road Central, Hong Kong <i>Sponsor: Sandoz Hong Kong Limited</i>	Dr. CHUNG Ho Yin <i>Specialist in Rheumatology</i>	1	Yes



Please register through <https://forms.gle/qjwmsPVbiKo8DibQA> or scan the QR code if you are interested to attend. For enquiry, please contact the Secretariat at 2527 8285.

Accreditation from various colleges pending, for specialists, please complete the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. For lecture without "Yes", CME Accreditation is for Non-Specialists Only. Non-Specialists doctors must complete lecture quiz (10 Q&A) and answer questions within two hours after the lecture with at least 50% correct.

Dear General Practitioners,

HKMA
Membership



HKMA as your CME
Program Administrator

Please choose your CME Administrator and register for CME Program for Non-Specialist!

The HKMA is one of the CME Programme Administrators. For HKMA MEMBERS, please find the registration form on www.hkma.org !

(HKMA Website Homepage → Login to Members Home Page → My e-Membership Card → Downloads → Registration form for choosing HKMA as Administrator under MCHK CME Programme)

Remarks: A maximum of 20 points can be awarded for self-study per year and no upper limit of CME points for attending CME lectures per year. Please contact the HKMA Secretariat at 2527 8452 or by email cme@hkma.org for assistance.



HKMA-HKSH CME Programme 2022-2023

Update in Medical Practice



- Time** : 1:00 - 2:00pm Lunch
2:00 - 2:45pm Lecture
2:45 - 3:00pm Q&A
- Format** : Hybrid; ZOOM / The Hong Kong Medical Association Central Premises, Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, Hong Kong
- Fee** : Free-of-charge
- Capacity** : The capacity for physical attendance is 30. Registration for both physical attendance and virtual format are strictly required on a first-come, first-served basis.
- Registration Deadline** : Friday, 28 July 2023
- Registration** : [If you have already registered for this CME Programme, you are already registered for the whole Programme. You will receive the notification email 1 day and 1 hour before each lecture. Therefore, you are not advised to register the Programme repeatedly.]
- Please register through
<https://forms.gle/E7eN5cCLFmuTQcyT6>
 or scan the QR code if you are interested to attend.
- CME Accreditation** : For Non-specialist Doctors: 1 CME point for each lecture #
 Accreditation for Specialist Doctors: Yes #
- # Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.
- Enquiry** : Please contact the HKMA Secretariat at 2527-8452
 or email to cme@hkma.org.



Date (Tuesday)	Topic	Speaker
1 August	Bleeding Tendency	Dr. LIANG Hin Suen, Raymond Specialist in Haematology & Haematological Oncology
5 September	Cancer of Lung	Dr. YAU Chun Chung Specialist in Clinical Oncology



HKMA-CUHK Medical Centre CME Programme 2023



- Time** : 1:00 – 2:00pm Lunch
2:00 – 2:45pm Lecture
2:45 – 3:00pm Q&A
- Format** : Hybrid; ZOOM/The Hong Kong Medical Association Central Premises, Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, Hong Kong
- Fee** : Free-of-charge
- Capacity** : The capacity for physical attendance is 30. Registration for both physical attendance and virtual format are strictly required on a first-come, first-served basis.
- Registration Deadline** : Friday, 4 August 2023
- Registration** : [If you have already registered for this CME Programme, you are already registered for the whole Programme. You will receive the notification email 1 day and 1 hour before each lecture. Therefore, you are not advised to register the Programme repeatedly.]
- Please register through <https://forms.gle/5azipM5jaxmfdqjg6> or scan the QR code if you are interested to attend.
- CME Accreditation** : For Non-specialist Doctors: 1 CME point for each lecture #
Accreditation for Specialist Doctors: Yes #
- # Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.
- Enquiry** : Please contact the HKMA Secretariat at 2527-8452 or email to cme@hkma.org.



Date (Wednesday)	Theme	Topic	Speaker
9 August	Common Health Problems For The Elderly	Osteoarthritis Of The knee – Current Conservative Therapy & Surgical Options	Dr. HO Ki Wai, Kevin <i>Specialist in Orthopaedics & Traumatology</i>
13 September		Managing Age-related Macular Degeneration	Dr. MAK Shiu Ting, Theresa <i>Specialist in Ophthalmology</i>
11 October		How To Fight Common Elderly Health Problems – Dementia and Sarcopenia	Dr. HO Wan Sze, Wency <i>Specialist in Geriatric Medicine</i>
8 November	Women's Health	Common Breast Pathology	Dr. IP Yiu Tung <i>Specialist in Pathology</i>
13 December		Breast Health And Breast Surgery	Dr. CHAN Ho Yan, Yolanda <i>Specialist in General Surgery</i>



HKMA-GHK CME Programme 2023



- Time** : 1:00 - 2:00pm Lunch
2:00 - 2:45pm Lecture
2:45 - 3:00pm Q&A
- Format** : Hybrid; ZOOM / The Hong Kong Medical Association Central Premises, Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, Hong Kong
- Fee** : Free-of-charge
- Capacity** : The capacity for physical attendance is 30. Registration for both physical attendance and virtual format are strictly required on a first-come, first-served basis.

Registration Deadline : Friday, 4 August 2023

Registration : [If you have already registered for this CME Programme, you are already registered for the whole Programme. You will receive the notification email 1 day and 1 hour before each lecture. Therefore, you are not advised to register the Programme repeatedly.]

Please register through
<https://forms.gle/sutCWaBkf4Ky8w9HA>
 or scan the QR code if you are interested to attend.



CME Accreditation : For Non-specialist Doctors: 1 CME point for each lecture #
 Accreditation for Specialist Doctors: Yes #

Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.

Enquiry : Please contact the HKMA Secretariat at 2527-8452
 or email to cme@hkma.org.

Date (Tuesday)	Topic	Speaker
15 August	Rheumatoid Arthritis	Dr. YEUNG Wan Yin, Winnie Specialist in Rheumatology
19 September to 21 November 2023		The remaining lectures shall be announced in coming CME Bulletin issues.



HKMA-HKSTP CME Programme 2023



Series 2: Neuro & Degenerative Disease Diagnosis + Treatment / Rehabilitation Solution

- Time** : 1:00 – 2:00pm Lunch
2:00 – 2:45pm Lecture
2:45 – 3:00pm Q&A
- Format** : Hybrid; ZOOM / The Hong Kong Medical Association Central Premises, Dr. Li Shu Pui Professional Education Centre, 2/F, Chinese Club Building, 21-22 Connaught Road Central, Hong Kong
- Fee** : Free-of-charge
- Capacity** : The capacity for physical attendance is 30. Registration for both physical attendance and virtual format are strictly required on a first-come, first-served basis.
- Registration Deadline** : Friday, 11 August 2023
- Registration** : [If you have already registered for this CME Programme, you are already registered for the whole Programme. You will receive the notification email 1 day and 1 hour before each lecture. Therefore, you are not advised to register the Programme repeatedly.]

Please register through
<https://forms.gle/AMe1QGz6ymVzg3ft7>
 or scan the QR code if you are interested to attend.



- CME Accreditation** : For Non-specialist Doctors: 1 CME point for each lecture #
 Accreditation for Specialist Doctors: Yes #

Accreditation from various colleges are pending. For specialists, please completed the quiz online within two hours after the lecture with at least 50% correct for CME/CPD points. Non-Specialists doctors must also complete lecture quiz (10 Q&A) within two hours after the lecture with at least 50% correct.

- Enquiry** : Please contact the HKMA Secretariat at 2527-8452
 or email to cme@hkma.org.

Date (All Thursday)	Topic	Speaker
24 August	Paradigm Shift in HPV Diagnostic – Is It Not Just a Female Infection	Dr. Francois FONG CEO, Founder & Medical Director, Neo-Health Group
28 September 2023 to 29 February 2024		The remaining lectures shall be announced in coming CME Bulletin issues.

The Hong Kong Medical Association



(From left) Dr. Danny LEE (Speaker), Dr. SO Yui Chi (Moderator) and Mr. Chris HOWSE (Speaker) giving the CME Physical lecture of The HKMA Medicolegal Support Workshops 2023 on 24 June 2023



(From left) Dr. LAU Chak Kwan (Speaker), Dr. CHOW Wing Sun (Moderator) and Dr. CHUNG Chi Tung (Speaker) giving the CME Hybrid Symposium on 10 June 2023



Dr. Stephen LAW giving a CME Live lecture on 06 June 2023



Dr. CHAN Yu Ho giving a CME Live lecture on 14 June 2023



Prof. Wise YOUNG giving a CME Live lecture on 15 June 2023



Dr. NG Yiu Wing giving a CME Live lecture on 16 June 2023



Dr. Wendy SHU giving a CME Live lecture on 20 June 2023

The HKMA District Health Network – Central Coordination Committee

CME lecture of the HKMA District Health Network (Central, Western & Southern)



Dr. Madeline KWOK presenting a CME Live lecture on 07 June 2023

CME lecture of the HKMA District Health Network (Kowloon City)



Dr. Jacky LAM presenting a CME Live lecture on 09 June 2023

CME lecture of the HKMA District Health Network (Kowloon West)



Speaker Dr. Raymond WONG (right) receiving a souvenir from Moderator Dr. TONG Kai Sing (left) on 23 June 2023

CME lecture of the HKMA District Health Network (Hong Kong East)



Speaker Dr. Phyllis CHAN (middle) receiving a souvenir from Hon Treasurer Dr. SO Yui Chi (left) and Moderator Dr. Douglas CHAN (right) on 17 June 2023.



Speaker Prof. Michael WONG (left) receiving a souvenir from Moderator Dr. Douglas CHAN (right) on 17 June 2023.



Speaker Dr. Carol CHEUNG (left) receiving a souvenir from Moderator Dr. CHAN Nim Tak (right) on 17 June 2023.

CME lecture of the HKMA District Health Network (Kowloon East)



Dr. Steve CHUNG presenting a CME Live lecture on 29 June 2023

CME lecture of the HKMA District Health Network (New Territories West)



Dr. KONG Chu Cheong presenting a CME Live lecture on 01 June 2023

CME lecture of the HKMA District Health Network (Shatin)



Dr. Ada LIN giving a CME Live lecture on 21 June 2023

CME lecture of the HKMA District Health Network (Tai Po)



Speaker Dr. Conrad LEE (left) and Dr. Kenny NG (right) receiving a souvenir from Moderator Dr. John CHOW (middle) on 20 June 2023.

July 2023

24 July (Mon) 2:00-3:00 p.m.	The Hong Kong Medical Association Rapid Onset with Long-term Maintenance: A New Paradigm in Treatment of Major Depressive Disorder (MDD) <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
28 July (Fri) 2:00-3:00 p.m.	The HKMA District Health Network (Yau Tsim Mong) Update on Heart Failure Management in HK <i>HKMA CME Physical Lecture</i> HKMA District Health Network Dept. – Tel: 2861 1979	1 Physical
29 July (Sat) 2:30-4:30 p.m.	The Hong Kong Medical Association The HKMA Medicolegal Support Workshops 2023 Lecture 6: Basic Rules of Medical Negligence <i>HKMA CME Physical Lecture</i> HKMA CME Dept. – Tel: 2527 8452	2 Physical
31 July (Mon) 2:00-3:00 p.m.	The Hong Kong Medical Association Embracing a New Era in LDL Management: Latest Guidelines, Target Levels, and Treatment Options <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1

August 2023

1 August (Tue) 2:00-3:00 p.m.	The Hong Kong Medical Association and the Hong Kong Sanatorium & Hospital Bleeding Tendency <i>HKMA CME Hybrid Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1 Hybrid
9 August (Wed) 2:00-3:00 p.m.	The Hong Kong Medical Association and the CUHK Medical Centre Osteoarthritis of The Knee – Current Conservative Therapy & Surgical Options <i>HKMA CME Hybrid Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1 Hybrid
10 August (Thu) 2:00-3:00 p.m.	The Hong Kong Medical Association Prevention and Risk Reduction of CRC with the Recent Advancement of Gut Microbiome Research & Guideline <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
11 August (Fri) 2:00-3:00 p.m.	The Hong Kong Medical Association HKMA Adult Immunisation Campaign 2023 Shingles Vaccination: Guidelines and Best Practices for Primary Care Providers <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
15 August (Tue) 2:00-3:00 p.m.	The Hong Kong Medical Association and the Gleneagles Hong Kong Hospital Rheumatoid Arthritis <i>HKMA CME Hybrid Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1 Hybrid
16 August (Wed) 2:00-3:00 p.m.	The Hong Kong Medical Association 1: Updates on Colorectal Cancer Screening 2: Multitarget FIT-DNA Technology as the Latest Colorectal Cancer Screening Option in Hong Kong <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1

16 August (Wed) 2:00-3:00 p.m.	The HKMA District Health Network (Shatin) Latest Diagnostic Tools and Treatment Paradigm for Prostate Cancer <i>HKMA CME Physical Lecture</i> HKMA District Health Network Dept. – Tel: 2861 1979	1 Physical
18 August (Fri) 2:00-3:00 p.m.	The Hong Kong Medical Association A Spotlight on Why and How to Optimise COVID-19 Outcomes in High-Risk Patients <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
19 August (Sat) 2:00 – 4:00 p.m.	The Hong Kong Medical Association 1. Overview on COVID-19 Pandemic and Lessons Learnt from Hong Kong Studies 2. Evolution of SARS-CoV-2 Antibody Responses and Immune Evasion Hotspots 3. Recent Advancement of Vaccination Strategy in Preventing COVID-19 Post PHEIC and the Challenges for COVID-19 Control and Prevention <i>HKMA CME Hybrid Lecture</i> HKMA CME Dept. – Tel: 2527 8452	2 Hybrid
23 August (Wed) 2:00-3:00 p.m.	The Hong Kong Medical Association An Evidence-Based Perspective on the Latest Management of Male Lower Urinary Tract Symptoms <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
23 August (Wed) 1:30-3:15 p.m.	The HKMA District Health Network (Tai Po) Seminar on Breast Cancer 1. Prevention, Awareness, Screening and Early Diagnosis of CA Breast 2. Multidisciplinary Assessment and Management Plan for Confirmed Cases 3. Treatment of CA Breast <i>HKMA CME Physical Lecture</i> HKMA District Health Network Dept. – Tel: 2861 1979	2 Physical
24 August (Thu) 2:00-3:00 p.m.	The Hong Kong Medical Association and the Hong Kong Science Park Paradigm Shift in HPV Diagnostic – Is It Not Just a Female Infection <i>HKMA CME Hybrid Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1 Hybrid
25 August (Fri) 2:00-3:00 p.m.	The Hong Kong Medical Association HKMA Adult Immunisation Campaign 2023 COVID-19 and Beyond: Emerging Solutions in a Changing World <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
29 August (Tue) 2:00-3:00 p.m.	The Hong Kong Medical Association Updated In Management of Lipid Disorders <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1
30 August (Wed) 2:00-3:00 p.m.	The HKMA District Health Network (Central, Western & Southern) Gout Management <i>HKMA CME Physical Lecture</i> HKMA District Health Network Dept. – Tel: 2861 1979	1 Physical
31 August (Thu) 2:00-3:00 p.m.	The Hong Kong Medical Association Atrial Fibrillation Management: What's More Beyond Anticoagulation? <i>HKMA CME Live Lecture</i> HKMA CME Dept. – Tel: 2527 8452	1