

HONG KONG COLLEGE OF PHYSICIANS
香港內科醫學院



Sapientia et Humanitas

**HONG KONG
COLLEGE
OF
PHYSICIANS**

AUGUST 2026

SYNAPSE

HONG KONG COLLEGE OF PHYSICIANS
香港內科醫學院

***HKCP
40***

Sapientia et Humanitas

RESTRICTED
TO MEMBERS
ONLY

Message from the Editor

Welcome to this edition of *Synapse*. As part of the College's 40th Anniversary Special Edition, this issue presents the second part of our Special Articles, curated by our Specialty Boards under the inspiring theme **"A Journey Through Time and Future Aspirations."** We are especially delighted to feature an interview with Professor Anna Lok, who shares an illuminating journey on the meaning and power of mentorship, one that continues to strengthen our profession, guide our trainees, and inspire our future.

We extend our heartfelt congratulations to our Fellows on receiving prestigious honours and awards, including the 2026 Silver and Bronze Bauhinia Stars, the 16th Guanghua Engineering Science and Technology Award, and the HA Outstanding Staff Awards, as well as the appointment of CUHK Associate Vice-President (Research). These recognitions reflect the exceptional contributions our Fellows continue to make to healthcare and the community.

Also, we were delighted to have met with three recipients of the HKCP-HKGI Overseas Training Scholarship / Grant over dinner to learn about their experience and aspirations. Their dedication and training are helping to transform patient care across all fields of medicine, bringing innovation and renewed hope to countless patients and families.

Finally, we invite you to stay tuned for exciting updates on our 40th Anniversary celebration. This year promises unforgettable moments ahead, including our Annual Scientific Meeting, Annual Conferment Ceremony, Annual Dinner, and our 40th Anniversary Dinner with distinguished Guests. Thank you for your continued support and commitment - together, we celebrate our past achievements and confidently step into a bright future.



Dr Emmy Yuen Fun LAU
Editor-in-Chief



HONG KONG COLLEGE OF PHYSICIANS

Room 603
Hong Kong Academy of Medicine Jockey Club Building
99 Wong Chuk Hang Road
Aberdeen
Hong Kong

Tel 2871 8766 Fax 2556 9047
email enquiry@hkcp.org
College Website <http://www.hkcp.org>

Synapse and Communications Committee

Editor-in-Chief

Dr Emmy YF LAU

Assistant Editor

Dr Thomas SY CHAN

Co-Editors

Dr Heyson CH CHAN
Dr HM CHAU
Dr HY KWAN
Dr Alexander MH LEUNG
Dr Terrence PS YIP

Dr Pierre CHAN
Dr CH CHOI
Dr Edward CH LAU
Dr Jacqueline SO

Ex-Chief Editor

Dr KK CHAN

TABLE OF CONTENTS

04 SPECIAL ARTICLES

- 04 **Specialty Boards: A Journey Through Time and Future Aspirations**

- 19 **Reflections of a Mentor**

- 22 **Paving the Way for Competence-Based Medical Education (CBME): HKCP Launches Inaugural Workplace-Based Assessment (WBA) Workshop**

- 25 **Three Fellows, Three Specialties, Two Locations and One Vision: Genetics and Genomics Beyond the Laboratory**

30 COLLEGE NEWS

35 CONGRATULATIONS

38 TRAINING

- 38 **Statistics on Fellows and Trainees in all Specialties**

- 39 **Case Report that Received High Score at AIM Interim Assessment**

40 EXAMINATIONS AND RESULTS

- 40 **Examination Calendar**

- 41 **Information on Examination Dates for Joint HKCPIE/ MRCP(UK) in 2027**

- 42 **Pass Rates**

44 YOUNG FELLOWS AND TRAINEES SECTION

- 44 **Research Workshop 2026**

- 46 **Career Talk 2026**



SYNAPSE

Specialty Boards: A Journey Through Time and Future Aspirations

From Rare to Routine: Genetics and Genomics in Internal Medicine

Dr Raymond Siu Ming WONG

Chairman

Specialty Board in Genetics and Genomics (Medicine)

There are few narratives in modern medicine as transformative as the journey of genetics. Not long ago, clinical genetics in Hong Kong was widely perceived as a boutique, highly specialized niche—predominantly confined to the realms of paediatrics and rare, congenital malformations.

The completion of the Human Genome Project in 2003, rapid acceleration of high-throughput sequencing technology and the dawn of precision medicine catalyzed a paradigm shift. Suddenly, genetics became central to understanding common conditions such as diabetes, hypertension, and cancer. The arc from a niche, reactive diagnostic service for rare paediatric syndromes to a proactive, predictive bedrock of every subspecialty from cardiology to oncology charts a radical shift. The development of Genetics & Genomic as a formal specialty was accelerated by a concerted effort from the government, the Hong Kong Academy of Medicine, and the Hospital Authority. The publication of the *Strategic Service Framework for Genetic and Genomic Services* provided the structural blueprint needed to organize services into a tiered system.

In late 2022, the Medical Council of Hong Kong formally accepted the addition of “Genetics and Genomics (Medicine)” to the Specialist Register. This milestone marked the birth of a formalized specialty under the Hong Kong College of Physicians (HKCP) with a rigorous, standardized higher specialty training curriculum. This pathway equips physicians with a deep understanding of molecular biology, advanced bioinformatics, and clinical counselling skills, transforming them from general internists into specialized gatekeepers of genomic data.

The scope of genetics and genomics in adult medicine is vast, spanning diagnostics, prognostication, risk prediction, treatment selection, response monitoring, and advanced therapeutics. Adult genomics frequently deals with conditions such as hereditary cancer predispositions (such as BRCA1/2 mutations) or utilizes genomics to catch genetic conditions that “hide” behind common adult presentations such as hypertrophic cardiomyopathy. Physicians are increasingly leveraging pharmacogenomics—modifying drug therapy based on genetic variants that

alter drug metabolism or increase toxicity risks. Genetics and Genomics has evolved into a comprehensive framework that guides an adult patient's medical journey from initial screening to precision medicine, enabling physicians to prescribe therapies tailored to individual genetic and molecular profiles. It shifts the entire healthcare paradigm away from reactive, one-size-fits-all disease management and toward a proactive, highly individualized model of lifelong precision health.

Looking to the future, genetics and genomics will transform our practice in many ways. The future physicians will not wait for disease

to present; they will manage genetic risk. Physicians will manage a rapidly expanding formulary of gene-targeted therapies, and be a therapeutic engineer, understanding that a drug's efficacy depends on a patient's specific genetic change, not just their clinical phenotype. It is important to recognize that the genome is not a static report but a dynamic, lifelong resource. Every patient sequenced will harbour dozens of actionable secondary findings and variants of uncertain significance (VUS). Genetics and genomics will be a longitudinal service that periodically reinterprets a patient's genome in light of new gene-disease associations.

The Evolution of Cardiology in Hong Kong: A 40-Year Perspective

Dr Michael Kang-Yin LEE

Chairman
Specialty Board in Cardiology

Dr Gary Chin-Pang CHAN

Secretary
Specialty Board in Cardiology

As the Hong Kong College of Physicians marks its 40th anniversary, it is an opportune moment to reflect on the parallel and explosive evolution of cardiology. The past four decades have witnessed a paradigm shift in the specialty, transforming once-fatal conditions into manageable chronic diseases and offering new hope to patients through increasingly sophisticated, minimally invasive techniques.

The modern era of interventional cardiology was heralded by two landmark events: Andreas Gruentzig's first percutaneous transluminal coronary angioplasty (PTCA)

in 1977 and the introduction of coronary stents a decade later. These breakthroughs revolutionized the management of ischaemic heart disease, offering a minimally invasive alternative to bypass surgery. Subsequent technological leaps—from bare-metal stents (BMS) to drug-eluting stents (DES) and the latest bioresorbable scaffolds (BRS)—have continually refined the approach, dramatically reducing the risk of in-stent restenosis and improving long-term patient outcomes.

This evolution has had a profound impact on the treatment of acute coronary syndromes.

The establishment of timely percutaneous coronary intervention (PCI), particularly for ST-elevation myocardial infarction (STEMI), has proven to be a cornerstone in reducing mortality. Today, a robust 24/7 Primary PCI service is available across all public and private hospitals in Hong Kong, a testament to the territory's commitment to world-class emergency cardiac care.

In the last two decades, the most captivating frontier has been structural heart intervention. Since the first Transcatheter Aortic Valve Implantation (TAVI) was performed in France in 2002—and subsequently in Hong Kong and the Greater China Area in 2010—we have witnessed its exponential global growth. This momentum has been paralleled by the rapid development of transcatheter solutions for mitral and tricuspid valve repair and replacement. Crucially, this progress has nurtured the field of interventional echocardiography, which has become indispensable for guiding these complex procedures and ensuring their success.

The period from 2010 to 2025 has been a transformative era for cardiac electrophysiology in Hong Kong. The field has advanced from traditional pacemakers and implantable cardioverter-defibrillators (ICDs) to embrace next-generation technologies. The adoption of leadless pacemakers and subcutaneous ICDs has significantly reduced lead-related complications, enhancing both patient safety and comfort. Concurrently, catheter ablation for arrhythmias, most notably atrial fibrillation, has been refined through the integration of three-dimensional electroanatomic mapping, contact force-sensing catheters, and the advent of pulsed field ablation. These innovations have empowered Hong Kong's electrophysiologists to perform more precise, efficient, and successful procedures, resulting in lower

arrhythmia recurrence rates. Complementing these clinical advances, multidisciplinary cardiac centers have cultivated robust training programs and research initiatives, fostering deep local expertise. Looking ahead to 2026 and beyond, the integration of artificial intelligence and remote monitoring promises to further revolutionize device management and arrhythmia care, solidifying Hong Kong's role as a leader in the field.

While these advances have successfully reduced overall mortality from acute events, they have also led to a growing population of patients living with various stages of heart failure. In response, Hong Kong has developed comprehensive heart failure programs that emphasize early and appropriate adoption of mechanical circulatory support for acute failure or cardiogenic shock, fostering maximizing guideline-directed medical therapy and close monitoring of patients in transition clinics early after discharge, all significantly contribute to improving survival. These multidisciplinary, structured programs are key to optimizing outcomes in this complex and growing patient cohort.

As we look to the future, two emerging fields are poised to shape the next chapter of cardiology in Hong Kong and worldwide. First, cardiac genetics and genomics will play an increasingly pivotal role in the diagnosis, risk stratification, and personalized treatment of inherited and acquired cardiac diseases. Second, the wave of robotic-assisted transcatheter procedures—for PCI, TAVI, and mitral valve repair—is gaining momentum, with remote capabilities potentially redefining the geography of care. As we celebrate this 40th milestone, the Hong Kong College of Physicians looks forward to embracing these innovations, continuing its legacy of excellence, and leading the way in shaping the future of cardiovascular medicine.

Endocrinology, Diabetes and Metabolism

Dr. Ying Wai NG

Chairman

Specialty Board in Endocrinology, Diabetes & Metabolism

The past decade has heralded transformative advances in diabetes and endocrinology, revolutionizing diagnostics and therapeutics through precision technologies and multifaceted pharmacotherapies. Continuous glucose monitors (CGMs) and automated insulin delivery systems now enable real-time glycaemic control, substantially mitigating risks of hypoglycaemia and glucose excursions. Sodium-glucose cotransporter-2 inhibitors (SGLT2i) and glucagon-like peptide-1 receptor agonists (GLP-1 RAs), substantiated by landmark cardiovascular outcome trials since 2015, deliver cardiorenal protection. SGLT2i notably curtailing heart failure hospitalization and chronic kidney disease (CKD) progression, with emerging renal benefits for GLP-1 RAs. In wider endocrinology, genetic testing and sophisticated imaging, such as PET scans with novel sensitive tracers and MRI, permit precise detection of endocrine neoplasms, enabling earlier interventions, risk stratification, personalized treatment selection and improved outcomes.

The coming decade holds curative promise, with stem cell-derived beta cells and CRISPR gene editing—in early clinical trials—poised to restore insulin production in type 1 diabetes, potentially eliminating lifelong therapy if long-term safety and efficacy are affirmed. Potent incretin peptide agonists targeting GLP-1, GIP, and glucagon pathways may achieve weight loss comparable to bariatric surgery in clinical

trials, profoundly alleviating obesity-related mortality and comorbidities. Fully closed-loop artificial pancreas systems, augmented by artificial intelligence (AI), will automate glycaemic management seamlessly, while non-invasive diagnostics such as wearable glucose sensors and microbiome modulation will further personalize care.

A structured training pathway in endocrinology has evolved, blending bedside apprenticeship with formal laboratory exposure, lectures, and case-based discussions to build expertise in hormone physiology, assay interpretation, and imaging. Gratitude is extended to trainer endocrinologists and chemical pathologists for their steadfast mentorship under the training programme. Trainees are encouraged to attend local and international conferences to stay abreast of advancing diagnostics, genetic testing, and therapies. Rigorous assessments—interim and exit examinations—uphold standards in knowledge, clinical reasoning, and professionalism. The Guidelines on Postgraduate Training in Internal Medicine, including endocrinology, were refreshed in July 2025. Collaborative efforts by endocrinologists, cardiologists, and nephrologists produced the Hong Kong College of Physicians' 2025 Position Statement on cardiovascular-kidney-metabolic (CKM) syndrome, promoting integrated screening, staging, and multidisciplinary management. This paradigm

unifies diabetes, hypertension, and adiposity risks, emphasizing early detection to forestall cardiovascular and renal complications.

Endocrine services increasingly embody multidisciplinary synergy, uniting endocrinologists with diabetes nurses, dietitians, endocrine surgeons, radiologists, pathologists, neurosurgeons, obstetricians and gynaecologists, oncologists, and family physicians to deliver cohesive, patient-centred care. These collaborations underpin contemporary management of complex pituitary and adrenal disorders, thyroid and parathyroid conditions, reproductive and gestational endocrinopathies, and community-focused metabolic and osteoporosis care.

As of January 2026, the Specialty in Endocrinology, Diabetes & Metabolism

boasts 158 Fellows, 72 trainers, and 19 trainees. On this milestone anniversary, building on the steadfast efforts of our predecessors, the endocrine community aspires to bridge health disparities through equitable access to evidence-based pharmacotherapies and diabetes technologies. We also aim to pioneer impactful local research shaping regional guidelines; and to advance patient-centred, multidisciplinary care across the lifespan. Through regional and global partnerships, robust training and examinations, investment in emerging fellows, and strengthened ties with allied disciplines, endocrinologists strive to propel scientific breakthrough and meaningful improvements in the lives of those affected by endocrine and metabolic disorders.

Gastroenterology & Hepatology

Dr Yiu Keung MA

Chairman

Specialty Board in Gastroenterology & Hepatology

Congratulations on the Hong Kong College of Physicians' 40th anniversary, and heartfelt applause to everyone involved. Under Her guidance, Internal Medicine has evolved into nearly 20 subspecialties, and I am honored to chair one of them in Gastroenterology and Hepatology. It is both a privilege and a profound responsibility to reflect on our subspecialty's remarkable journey and to help chart our path forward.

Hong Kong has been a critical contributor to the global understanding of hepatobiliary diseases, particularly hepatitis B (novel markers, treatment strategies aimed at cure,

and prevention), metabolic dysfunction-associated steatotic liver disease (MASLD; formerly known as non-alcoholic fatty liver disease, NAFLD), non-invasive assessment and predictors of liver fibrosis and hepatocellular carcinoma, and liver transplantation. Our role in advancing treatment protocols for viral hepatitis, with the goal of achieving both macro- and micro-elimination of hepatitis C, has been significant.

In Gastroenterology, our clinicians and scientists have been at the forefront of research into gastrointestinal cancer, peptic

ulcer bleeding and inflammatory bowel disease (IBD). The integration of advanced endoscopy has set a high standard of care. Early diagnosis and surveillance of at-risk populations are now possible using image-enhanced endoscopy and artificial intelligence, while advanced endoscopic techniques such as endoscopic submucosal dissection (ESD) have expanded our capabilities. Therapeutic and palliative interventions using endoscopic ultrasound have also been made possible through the combined efforts of our devoted fellows and industrial partners.

Furthermore, our work in IBD, once considered rare in Asia, has improved diagnosis and enabled tailored management for a growing number of patients. The establishment of the Hong Kong Faecal Microbiota Transplantation Stool Biobank, the first stool biobank in Asia, has revolutionized the treatment of *Clostridioides difficile* infection.

All of these clinical excellencies have been translated into coordinated patient journeys, supported by our subspecialty nurses. Their areas of coverage have filled the gaps between patients and clinicians, encompassing patient and carer education and training, complication risk assessment, peri-clinic and peri-procedure management, and much more. We are delighted to see the establishment of nurse-led clinics for patients with hepatitis, IBD and colorectal polyps.

Our landscape is evolving rapidly, urging us to go beyond our comfort zones, explore new horizons, and collaborate with other specialties and subspecialties.

Our future aspiration is guided by several key aspects:

1. **Combating the Modern Epidemic:**
The rising burden of MASLD associated

with metabolic syndrome and alcohol associated liver disease represents our greatest challenge. We must move beyond tertiary care and lead public health initiatives. By fostering multi-disciplinary collaboration with endocrinologists, gastrointestinal surgeons, family physicians, psychiatrists, subspecialty nurses and paramedics, we can implement community-based screening and intervention programmes and introduce bariatric endoscopy.

2. **Precision Medicine and Personalized Care:** The future lies in genomics, biomarker discovery, and advanced therapeutics. Through ongoing research in both basic science and clinical trials, we aim to move towards personalized treatment strategies. Integrating artificial intelligence into endoscopic image analysis and risk prediction models will be transformative. In parallel, establishing an onco-gastroenterology pathway will enhance our cancer patient journey.
3. **Sustaining Global Leadership through Training and Collaboration:** Nurturing the next generation will be our foremost priority. This means modernizing fellowship training with competency based medical education (CBME) and work-based assessment (WBA). Strengthening regional and global collaborative research, particularly with our Mainland China and Asian counterparts on shared disease profiles, will generate meaningful improvements in patient care and support evidence-informed health policy.

Once again, happy 40th birthday to the Guardian of Medicine in Hong Kong!



Haematology and Haematological Oncology

Dr Bonnie Chi Shan KHO

Chairman

Specialty Board in Haematology & Haematological Oncology

In recent decades, advances in haematology have been driven mainly by genetically and molecularly targeted therapies, biomarker-guided precision medicine, innovative clinical trial designs, as well as advances in supportive care. Among many international efforts, work from Hong Kong has helped advance two areas in particular: NK/T-cell lymphoma and oral arsenic therapy in acute promyelocytic leukemia (APL)

NK/T-cell lymphoma is an aggressive, EBV-associated cancer endemic in Asia and historically highly fatal. Over the past two decades, the Hong Kong group has

been instrumental in developing risk-adapted management, improving survival by helping to establish non-anthracycline, asparaginase-based chemotherapy as standard care, and contributing as a participating centre in the early East Asian SMILE trials. The Hong Kong group helped pioneer the integration of PET/CT staging and serial plasma EBV DNA into risk stratification and response adapted treatment, and reported the first use of PD-1 blockade in refractory disease with promising results. Their highly cited reviews have influenced international standards.

In acute promyelocytic leukemia (APL), defined by the PML–RARA fusion, treatment became a paradigm of molecularly targeted therapy. All-trans retinoic acid (ATRA) was first used to treat APL in China in the mid-1980s before worldwide adoption, and intravenous arsenic trioxide (ATO), likewise pioneered in China in 1970–80s, was later incorporated into modern APL therapy. Both ATRA and ATO directly target PML–RARA, and their combination has transformed APL from one of the deadliest AML subtypes into one of the most curable. Hong Kong subsequently developed and implemented an oral ATO formulation, first produced at the University of Hong Kong around 1998–2000, enabling outpatient, chemotherapy-free therapy. The AAA regimen (oral ATO, ATRA, and ascorbic acid), used for over 20 years in Hong Kong public hospitals and provided free of charge, achieves cure rates above 90%.

Global transformative developments have reshaped haematology. In chronic myeloid leukemia, the discovery of BCR–ABL in the mid-1980s led to targeted therapy with tyrosine kinase inhibitors (approved 2001), these oral pills turned a once-fatal disease requiring transplant into a chronic condition with survival approaching that of the general population.

In acute leukemias, molecular and genomic risk stratification (e.g., ELN for AML, WHO/ICC diagnostic categories) guides decisions on allogeneic stem cell transplantation and targeted therapies—for example, FLT3 inhibitors or gemtuzumab ozogamicin in AML, and blinatumomab (CD19/CD3) or inotuzumab ozogamicin (CD22) in B-ALL. For older or unfit AML patients, hypomethylating agents plus BCL2 inhibitors have improved outcomes. Next-generation sequencing now supports risk- and MRD-guided treatment

and the identification of new therapeutic targets.

B-cell lymphoma treatment was transformed by rituximab (anti-CD20), approved in 1997 as the first anticancer monoclonal antibody; adding rituximab to CHOP markedly improved survival in diffuse large B-cell lymphoma. Today, anti-CD20 antibodies can be combined with antibody–drug conjugates, small-molecule inhibitors (e.g., BTK, BCL2) for different B-cell lymphoma subtypes. Bispecific T-cell engagers, and CD19-directed CAR T-cells are important expanding options for relapsed or refractory disease.

In multiple myeloma, though remains generally incurable, patient survival has nearly doubled in the past two decades due to advent of proteasome inhibitors (e.g., bortezomib, 2003), immunomodulatory drugs, and anti-CD38 antibodies — often alongside with autologous haemopoietic stem cell transplant. At relapse, bispecifics, antibody–drug conjugates, and CAR T-cell therapies are new armamentarium for relapsed refractory patients with promising results.

Developments in classical haematology are equally exciting. In haemophilia, non-factor replacement therapies such as FVIII-mimetic bispecific antibodies and rebalancing agents are shifting care from intravenous factor replacement to highly effective, long-acting subcutaneous prophylaxis. In transfusion-dependent thalassaemia, effective oral iron chelators, modern tools for monitoring iron burden, luspatercept (the first-in-class disease-modifying therapy in β -thalassaemia major), and emerging gene therapies have greatly extended survival and reduced transfusion requirements. In immune thrombocytopenia (ITP) and aplastic anaemia, thrombopoietin receptor agonists have transformed chronic ITP management and, when combined with immunotherapy,

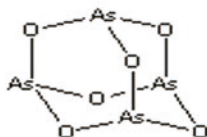
have markedly improved outcomes in aplastic anaemia.

Sustained collaboration at the local, regional and international levels, along with adaptive

regulatory frameworks, is essential for future advances. Just as important is ensuring that innovative treatments remain affordable.



Tiangong Kaiwu 《天工開物》 (1637)
"Pishuang Tu" 砒霜圖
<http://www.nlc.cn>



From PiShuang to Arsenol™



Milestones in Nephrology: Celebrating 40 years of Developments and Achievements

Prof Sydney TANG

Chairman
Specialty Board in Nephrology

Over four decades, nephrology in Hong Kong has evolved from a nascent speciality into one that shines across the globe. The peritoneal dialysis (PD)-first policy, started in 1985, has remained the world's only place where true PD-first is practised. For decades, PD utilisation is highest in the world with excellent patient outcomes by international standards. PD catheter insertion has gradually shifted from a

urology to nephrology procedure using various techniques. The College keeps a log of nephrologists deemed competent in performing these procedures. Hong Kong nephrologists defined the threshold Kt/V_{urea} for PD adequacy, and wrote clinical practice guidelines (CPGs) in PD peritonitis and catheter-related infection for the International Society for Peritoneal Dialysis (ISPD). To increase home-based dialysis

options, automated PD and nocturnal home haemodialysis (HHD) were introduced in 1995 and 2006, and in the year 2025, 31.8% of PD and 8.6% of HD patients were on APD and HHD, respectively.

In 1995, HA's Central Renal Committee launched the Renal Registry (RR) that became a useful service and research resource for the local kidney replacement therapy (KRT) landscape. The College published comprehensive CPGs for Renal Services in 2019. Since the inception of RR, diabetes has been the single most important cause of KRT with an incidence of 49.4% in 2025, which resonates with the introduction of the Cardiovascular-Kidney-Metabolic (CKM) syndrome in 2023. The College commissioned a Position Statement in 2025 that highlights the need of integrated care for CKM prevention and management. Hong Kong nephrologist contributed to the understanding of diabetic kidney disease (DKD) pathogenesis and the Asian Pacific Society of Nephrology (APSN) CPG in DKD.

In glomerular disease, Hong Kong nephrologists contributed to the understanding of the pathogenesis and advanced treatment of IgA nephropathy and lupus nephritis, and played key roles in developing CPGs for both conditions for Kidney Disease: Improving Global Outcomes (KDIGO), a global organization developing evidence-based CPGs in kidney disease.

In kidney transplantation, HA launched a Paired Kidney Donation Pilot Programme in 2018 to facilitate incompatible living donor-recipient pairs find matches by exchanging kidneys with incompatible pairs. The Programme's first successful case was performed in 2021, benefiting two patients (and families) simultaneously. Thus far, three pairs have been performed. The first ABO blood group-incompatible transplantation

was performed in 2017, and to date, ten such transplants have been completed. Hong Kong nephrologist led the UpToDate section on hepatitis B virus infection in kidney transplant recipients.

In the international arena, Hong Kong nephrologists have 1) held leadership roles in prestigious organizations such as International Society of Nephrology (ISN), International Society of Glomerular Disease, ISPD, KDIGO, APSN, Asian Society of Transplantation (AST); 2) taken up major editorial positions in prominent journals including *Journal of the American Society of Nephrology* (JASN, official journal of ASN), *Nephrology Dialysis Transplantation* and *Clinical Kidney Journal* (official journals of European Renal Association (ERA)), *Peritoneal Dialysis International* (official journal of ISPD) and *Nephrology (Carlton)* (official journal of APSN); and 3) received international nephrology-related awards from APSN, ERA, ISPD and *Kidney International* (official journal of ISN). Hong Kong hosted major international conferences such as Asian Pacific Congress of Nephrology in 1995 and 2020 (Photo) held virtually due to Covid-19, ISPD Congress in 2006, World Congress of Nephrology (WCN) in 2013, AST Congress in 2023. Hong Kong nephrologist chaired the Scientific Program Committee for WCN 2026 held in Japan.

The future of nephrology lies with young nephrologists. Many who became College fellows in the last 10 years or so have set foot on various clinical and research agendas and established international roles as Emerging Leaders, Committee Chairs or Members of Young Nephrologist Committees, Green Nephrology (GREEN-K initiative) and other Education-related Committees across ISN, ISPD, APSN, American Society of Onconeurology, and

The Transplantation Society. Critical care nephrology, genetics and genomics in kidney disease, interventional nephrology and onconeurology are emerging branches of

nephrology in this era of artificial intelligence and big data utilisation. The future in nephrology looks bright for trainees, fellows and the patients we care.



Asian Pacific Congress of Nephrology 2020 held in Hong Kong on a virtual platform

Left screens from top down: Peter Ratcliffe (UK), Nobel Laureate in Medicine or Physiology 2019; Kwok Yung Yuen; Anushka Patel (George Institute for Global Health)

Right screens from top down: Masaomi Nangaku (Japan), APSN President (2019-2022); David Harris (Australia); Katherine Barraclough (Australia)

Neurology

Dr Yuk Fai CHEUNG

Chairman
Specialty Board in Neurology

On behalf of our Board, I extend my heartfelt congratulations to the Hong Kong College of Physicians on its 40th Anniversary. We are proud to be part of this milestone.

In the past, our predecessors taught us that neurology was primarily a diagnostic

specialty. Arriving at a precise diagnosis was often the greatest contribution we could make to our patients, as treatment options were limited. Today, however, neurology has entered an era of transformative treatments and interventions that profoundly improve patient outcomes.

Take stroke as an example. Intravenous thrombolysis and mechanical thrombectomy have revolutionized the care for hyper-acute stroke patients. The establishment of evidence-based treatment protocols and care bundles, coupled with advanced neuroimaging techniques, telemedicine and artificial intelligence, has fundamentally shifted the paradigm of stroke management. Newer drugs have also enhanced ease of use, efficacy and safety. For instance, direct oral anticoagulants have largely replaced warfarin for treating cardioembolic stroke. As a result, we now have a deeper understanding of therapeutic goals and optimal timing, even in challenging scenarios.

Movement disorders have also evolved dramatically over the past few decades. With improved insights into pathophysiology, we are advancing toward precision medicine that considers patient demographics, disease stages and subtypes. Video recordings shared between patients and clinicians have further accelerated and refined diagnoses. Progress in advanced-stage therapies represents another major milestone; deep brain stimulation (DBS), for example, is now standard for Parkinson's disease and dystonia. Innovative options like magnetic resonance-guided focused ultrasound (MRgFUS) for tremor are expanding treatment choices for patients.

Epilepsy is another rapidly progressing field. Newer anti-seizure medications offer better safety profiles and fewer drug interactions, improving prognosis and quality of life. Advances in electroencephalographic techniques enable more precise localization of seizure foci. Surgical interventions, such as temporal lobectomy, DBS and vagal

nerve stimulation (VNS), have dramatically enhanced outcomes for those with drug-resistant epilepsy.

The field of neurocognitive disorders is also advancing, with neuroimaging and fluid biomarkers aiding the diagnosis of Alzheimer's disease. We can now offer anti-amyloid therapies to selected patient groups.

Neuroimmunology is an emerging specialty, extending beyond multiple sclerosis and myasthenia gravis to conditions like neuromyelitis optica, immune-mediated neuropathies and myopathies, and autoimmune encephalitis. Greater understanding of immunopathogenesis has led to a surge in therapeutic options, including monoclonal antibodies, which have redefined treatment goals and prognoses.

Management of neuromuscular diseases has progressed through precision diagnostics, such as neuroimaging and neurogenetics. What was once limited to symptomatic and palliative care is increasingly shifting toward molecular therapies - for example, in spinal muscular atrophy and motor neuron disease.

Last but not least, neurogenetics is a budding field in Hong Kong. Its applications span movement disorders, epilepsy, neuromuscular conditions, and many other rare diseases, offering hope to patients whose diagnoses remain elusive.

Through the concerted efforts of past and present neurologists, patient management has steadily improved, often meeting or exceeding global standards of care. We hope future generations will carry forward this legacy.

The Evolution and Future of Clinical Pharmacology and Therapeutics in Hong Kong

Dr Raymond Siu Ming WONG

Chairman

Subcommittee in Clinical Pharmacology & Therapeutics

Clinical pharmacology is the medical specialty that studies how drugs interact with the human body, ensuring their safe, effective, and cost-efficient use in patient care. It bridges basic pharmacology with clinical practice, guiding rational prescribing, medication safety, and drug development. Over the past few decades, the specialty in Hong Kong has transformed from a niche academic interest into an indispensable pillar of a modern, strained healthcare system.

The early days: Sowing the Seeds of Science

The early development was deeply intertwined with the two medical schools at the University of Hong Kong (HKU) and The Chinese University of Hong Kong (CUHK). Early pioneers recognized that the Chinese population exhibited distinct pharmacokinetic and pharmacodynamic profiles compared to Western populations, driven by genetic polymorphisms (such as cytochrome P450 enzyme variations). This realization prompted the establishment of specialized clinical pharmacology units at both universities. This era was defined by a mission to bring the principles of basic pharmacology to the patient's bedside, including rational use of drugs and therapeutic drug monitoring. Clinical pharmacologists started the first Drug Information Services, answering complex queries from frontline clinicians about adverse reactions, drug interactions, and dosing in organ failure.

Rational and Cost-Effectiveness of Drug Treatment: The Foundation of Therapeutics

As healthcare costs escalate globally, the sustainability of public medical services relies heavily on pharmacoeconomics and rational prescribing. The “rational and cost-effective use of drugs” has become a central, non-negotiable duty of clinical pharmacologists. With the Hospital Authority's Drug Formulary governing access to therapies for 7.5 million people, the stakes of every listing decision are colossal. Clinical pharmacologists are core members of the HA's Drug Advisory Committee. They apply rigorous epidemiological and biostatistical methodologies to evaluate whether newly developed, highly expensive therapeutics justify their cost relative to existing standard treatments and ensure that public funds are allocated toward drugs that yield the maximum therapeutic benefit per dollar spent.

With an aging population and a rising prevalence of chronic diseases, managing polypharmacy is a major public health priority. Clinical pharmacologists utilize large-scale longitudinal databases (such as the HA's electronic health record system) to analyze real-world drug utilization patterns and promote rational use of drugs.

Medication Safety: Guarding the Bedside

Medication safety is the bedrock of Clinical Pharmacology. In a high-throughput clinical environment like Hong Kong, preventing

adverse drug reactions (ADRs) and medication errors requires systemic, scientifically driven interventions. Clinical pharmacologists have been involved in various measures to promote medication safety, including the evaluation and implementation of pharmacogenetic testing to prevent catastrophic ADRs. The days of a purely reactive “start low, go slow” dosing strategy are waning. By institutionalizing routine genetic screening before drug prescription, molecular genetics are incorporated into routine clinical safety protocols, establishing a blueprint for personalized medicine in Hong Kong.

Drug Development and Clinical Research: The Current Renaissance

In recent years, the Hong Kong SAR Government has declared a clear mandate to transform the city into an international innovation and technology hub, with life and health sciences at the forefront. This policy shift has catalyzed a renaissance in local clinical research. The expertise of clinical pharmacologists has enabled Hong Kong to rapidly advance its Phase I and First-in-Human (FIH) trial capabilities. The establishment of Phase 1 Clinical Trial Centres at both the HKU and the CUHK facilitates Hong Kong to participate in early-stage drug development. These centres provide rigorous evaluation of drug safety and pharmacokinetics in humans, as well as infrastructure for international collaboration, enhancing Hong Kong’s role in global drug development.

The Future Horizon – Stewardship in the Age of AI and Aging

Hong Kong faces a demographic singularity—the world’s longest life expectancy combined with an ultra-low birth rate. The future patient will be old, frail, multi-morbid, and on a polypharmacy of unprecedented complexity. The specialty’s greatest challenge and duty will be to master and mitigate this polypharmacy. This will require a new discipline of precision

deprescribing, powered by artificial intelligence. The clinical pharmacologists of the future will oversee AI-driven algorithms, integrated into the electronic clinical management system, that continuously analyze a patient’s entire medication list against their ever-changing renal and hepatic function, frailty scores, and genetic data. These systems will not just flag harmful drug interactions but will proactively provide decision support on prescription. The clinical pharmacologist will be the human expert who validates the AI’s recommendations, navigates the ethical complexities with patients and families, and updates the underlying therapeutic logic.

The next generation of clinical pharmacologists will increasingly rely on computational metabolomics, machine learning, and advanced pharmacokinetic modelling. Future research will pivot toward “virtual clinical trials” and digital twins, where AI algorithms simulate drug interactions and efficacy across diverse patient phenotypes before physical administration. This technological shift will radically compress drug development timelines and introduce a new era of proactive medication safety.

Summary

From its academic beginnings as a niche subspecialty, Clinical Pharmacology and Therapeutics has evolved into a strategic pillar underpinning public health policy, regulatory reform, and biomedical innovation. As Hong Kong looks to the future, the principles of Clinical Pharmacology—rational drug use, cost-effectiveness, medication safety, and cutting-edge research—have never been more critical. The relevance of Clinical Pharmacology will only intensify, though its tools and focus will necessarily evolve. The discipline is poised to redefine Hong Kong’s status, transitioning it from a regional centre of medical excellence into a premier global hub for biomedical research and innovative drug development.

Rehabilitation

Dr Tsz Kin KWOK

Chairman

Specialty Board in Rehabilitation

Rehabilitation Medicine in Hong Kong has flourished for just over four decades. Though we are a relatively young specialty, we have proudly stood as part of the Hong Kong College of Physicians throughout this journey. With structured training, rigorous assessment, and accreditation, our Rehabilitation Physicians have attained world-class standards, serving as role models for colleagues across regions and nations.

In the early years, rehabilitation was largely a labour-intensive, multidisciplinary practice. Physicians, therapists, nurses, and allied health professionals worked hand in hand, often relying on perseverance and teamwork more than technology. This foundation of collaboration and dedication shaped the identity of our specialty and ensured that patients with disabilities received care that was holistic and compassionate.

As the decades unfolded, Rehabilitation Medicine has been uplifted by remarkable advances in science and technology. In just the past ten years, computer-assisted treatments, 3D printing, and artificial intelligence have rapidly emerged. Electrophysiological therapies, implants, telerehabilitation, and robotics have advanced with unprecedented speed, while targeted therapy, immunotherapy, and genetic therapy have opened new possibilities for patients once thought beyond the reach of modern medicine. These innovations have not replaced the physician's role; they have expanded it. As a result, we must acquire new skills and master new tools. Artificial

intelligence, in particular, holds great promises for improving the precision of assessments, personalizing training prescriptions, and patient monitoring, enabling us to tailor rehabilitation more effectively than ever before.

The next generation of Rehabilitation Physicians will harness these technologies to pioneer treatments once unimaginable. Yet amid this transformation, our core essence remains unchanged: to deliver evidence-based, ethically sound, and patient-centred care. Innovation must always serve humanity, and our specialty continues to embody this principle.

Looking ahead, our Board bears the responsibility of ensuring that training keeps pace with progress. Curricula must be continuously revised to reflect new developments, while trainees and trainers alike must prepare for evolving formats such as Work-Based Assessment. Learning is not confined to patients—it is the lifelong duty of every Rehabilitation Physician. Through simulation, electronic platforms, and continuous education, we will nurture excellence and uphold the enduring values of the College.

As we celebrate the 40th anniversary of the Hong Kong College of Physicians, Rehabilitation Medicine stands as a testament to resilience, innovation, and dedication. From humble beginnings to a future rich with possibility, our specialty continues to grow, adapt, and inspire - honouring the past while embracing the promise of tomorrow.

Reflections of a Mentor

Anna S. LOK, MD

Division of Gastroenterology and Hepatology
Department of Internal Medicine
University of Michigan, Ann Arbor, MI, USA



Michigan alumni reception at 2023 AASLD meeting – Following the tradition that Dame Sheila set, Anna organizes an alumni reception for all current and former trainees and faculty at the annual meeting of the American Association for the Study of Liver Diseases.

Mentorship is universally recognized as a key contributor to a successful career in academic medicine. Despite its importance, none of us receive formal training in mentoring. Thus, each mentor adopts a different style shaped by our own experience as a mentee and our motivation to mentor. Over time, this approach may be modified by successes and failures of our academic journeys as well as those of our mentees.

I completed my hepatology fellowship training in London under Professor Dame Sheila Sherlock. I did not realize how fortunate I was until Dame Sheila's retirement celebration (2 months before the end of my fellowship) when more than 200 mentees flew in from around the world to express their appreciation. Dame Sheila always embraced her mentees as part of the Sherlock family. I benefited tremendously not only from the rigorous clinical and research training but also her motherly love that

continued well after my fellowship, and the connections and support from my 'siblings' who were the Who's Who in Hepatology. It would be remiss of me not to mention my role models, Sir David Todd and Professor Rosie Young, whose dedication to training of the next generation and emphasis on excellence in clinical care and research I try to emulate.

My transition from mentee to mentor occurred insidiously after my return to Hong Kong. Working in a busy clinical environment with no protected time and limited resources, we identified clinical dilemmas we face in clinics and determined which ones are 'solvable' if we dive deep. One of my most accomplished mentees in Hong Kong is Professor TM Chan, current President of the Hong Kong College of Physicians. Because our specialties are different, we complement each other and have continued to co-author on hepatitis and kidney diseases to this day.

This is an example of how mentor-mentee relationships can evolve and endure, and how each can learn from the other.

Over the years, I have mentored more than 80 trainees from all over the world, some of whom have become division chiefs, department chairs, and chief medical officers of hospitals. Every mentor has a different style, and I had been criticized for being a ‘Tiger Mom’. I have mellowed over the years, and I hope I am no longer perceived as a ‘tiger’ though tough love and being able to provide honest feedback – good and bad – is crucial in mentoring. I certainly hope I am still considered a ‘mom’ because I see the role of a mentor as that of a parent, providing unconditional love and support with the only expectation that the mentee tries to do his or her best to maximize their potential and reach their goals.

Mentoring is an investment of time, energy, and resources including financial. It can be exhausting, frustrating, and heart-breaking. It is rarely recognized or compensated. Thus, one should take on mentoring as a calling, a desire to pay it forward, along with the understanding that problems can only be solved when successive generations of physicians and researchers continue to work on them.

A very important role of a mentor is to guide mentees to leverage their strengths and passion towards goals that are meaningful and attainable, and to help them develop a plan to reach each goal. Here is where tough love comes into play because there are so many distractions in life, mentees can veer off and be lost. Research projects (and life) often don’t go as planned, and it is difficult to keep going when the projects

hit a roadblock, and papers and grants are rejected. A mentor must help mentees accept and learn from failure and pursue with renewed commitment or find an alternative path (when it is clear the original plan is doomed). The most important role of the mentor is to continue to believe in the mentee. Project failure must not be equated to mentee failure but if it is clear the mentee has interests and talents in other areas, helping mentees find an alternative path to success and fulfillment can be a blessing.

As a mentor, I consider my role to be more than a coach guiding the development of goals and work plans but also a task master holding mentees accountable, and a cheer leader when things go well and more importantly when there are setbacks. I embrace my role as a ‘parent’ sharing knowledge, experience, connections, and resources, and standing up for mentees, when necessary. Witnessing the success of my ‘kids’, many of whom have far surpassed me, and learning from them brings more joy and satisfaction than authorship, efforts on grants, or free labor that many mentors expect from their transactional relationships with mentees.

Over the last 30+ years, my academic family has grown. Indeed, one of the greatest satisfactions is to witness mentees passing the torch, amplifying and perpetuating progress in medicine and science, and in nurturing yet another generation of physicians and researchers. Although I left Hong Kong 34 years ago, my academic family tree in Hong Kong has continued to expand. Henry Chan joined me for a 1-year fellowship in 1996. He brought in Grace Wong, my granddaughter who in turn brought Terry Yip and Jimmy Lai, my great

grandchildren. I have collaborated and co-published with 3 generations from the CUHK branch of my academic family and am thrilled to be working closely with Grace for the next 5 years as Editors of HEPATOLOGY. The HKU branch of my family tree is catching on, and I am thrilled to have co-published with Wai-Kay Seto, Ivan Hung, and Loey Mak recently with more to come.

Mentor-mentee relationship is between two people and success of the relationship requires both parties to contribute to it. Mentors and mentees need to understand each other's personality, style, goals,

competing interests and demands, and both parties must be able to communicate openly and honestly with each other. At the start of my mentorship, I make it very clear that I expect my mentees to show up, do their part, respect the timelines we agree upon, and respect my time. In return, I offer them unconditional love and support. Among the many awards I have received, the ones I cherish most are the Distinguished Mentoring and Outstanding Teaching Awards and Mother's Day wishes from my academic children.



Mentees and colleagues at Anna's Festschrift September 2025 – After 29 years as Director of the University of Michigan Hepatology Program, Anna stepped down in 2024. In September 2025, University of Michigan organized a Festschrift to celebrate Anna's contributions and the passing of the torch. More than 20 mentees and collaborators participated in a 1-day symposium.

Paving the Way for Competence-Based Medical Education (CBME): HKCP Launches Inaugural Workplace-Based Assessment (WBA) Workshop

Dr Hoi Yee KWAN

Convenor

HKCP WBA workshop & Co-convenor, HKCP CBME Taskforce



A delightful visit: Prof Richard Yu (Senior Advisor, HKCP) and Prof Philip Li (President, HKAM) made a surprise appearance at the inaugural HKCP Workplace-Based Assessment (WBA) workshop to show their support.

The Hong Kong College of Physicians (HKCP) remains steadfast in advancing medical training and ensuring the highest standards of patient care. In line with international best practices and the Hong Kong Academy of Medicine (HKAM) guidelines, the College has strategically incorporated the principles of Competence-Based Medical

Education (CBME) into the latest version of its “Guidelines on Postgraduate Training in Internal Medicine.” Following the successful rollout of Workplace-Based Assessment (WBA) by the Critical Care Medicine Board, the Nephrology Board is now spearheading the next phase by piloting WBA for all Higher Physician Trainees enrolling after July 2026.

Cultivating a strong pool of competent trainers is vital to promote a culture of “assessment for learning” and to ensure alignment with CBME across the College.

To support this, the first WBA workshop tailored specifically for nephrologists was held on 20 June 2026. Generously funded by the Hong Kong Jockey Club Charities Trust (HKJC) and organized in

collaboration with the Jockey Club Institute for Medical Education and Development (JCIMED) of HKAM, the workshop combined asynchronous learning with an interactive, half-day face-to-face session. Fellows first completed comprehensive online preparatory modules, followed by a dynamic face-to-face session, where they engaged in hands-on debriefing practice with alignment of assessment standards and gained practical



Prof Sydney Tang, Chairman of the Specialty Board in Nephrology, welcomed all participants and introduced the upcoming pilot run of Direct Observation of Procedural Skills (DOPS) within the Workplace-Based Assessment (WBA) framework for all nephrology HPT enrolled after July 2026.

insights from experienced faculty. Attendees highly praised the workshop, noting that the practical feedback and debriefing skills gained are directly applicable to strengthen teamwork and interpersonal communication.

The second WBA workshop is planned for late 2026, this time to support the Respiratory Medicine Board, which will be the next specialty to pilot WBA in 2027.



Group photo of all participants and faculty.



Live demonstration of debriefing skills for Direct Observation of Procedural Skills (DOPS) by faculty members.



Faculty members of the first HKCP WBA workshop (from left to right): Dr Frankie Choy, Dr P T Chan, Dr Albert Chan, Prof Sydney Tang (Chairman, Specialty Board in Nephrology), Dr H Y So, Dr Candy Kwan, Dr C K Tong, Dr Wilson Chan, and Dr L T Chan.



Prof Daniel Chan, President of HKCP, introduced College's direction for implementing Competence-based Medical Education (CBME) to participants via the e-learning platform.

Three Fellows, Three Specialties, Two Locations and One Vision: Genetics and Genomics Beyond the Laboratory

Dr Hoi Yee KWAN & Dr Hoi Man CHAU

Co-editors

Synapse and Communications Committee



Supported by the HKCP-HKGI Overseas Training Scholarship, Dr. Carmen Lee (first right) and Dr. Derek Lee (second right) completed one year of training in genetics and genomics in London.

completed their training, with more trainees expected to attain their fellowship in the coming years. To promote the development of the specialty, HKCP, in collaboration with Hong Kong Genome Institute (HKGI), has established overseas training scholarships and training grants, enabling clinicians to gain specialised training in genomic medicine both locally and internationally.

What do you associate with genetics in modern medicine - rare inherited disorders, molecular testing in oncology? While these remain important applications, genetics and genomics have evolved well beyond their traditional boundaries.

Recognising this emerging need, the Hong Kong College of Physicians (HKCP) established its 19th specialty in 2022: Genetics and Genomics Medicine. Since then, twenty-five founding fellows have

Over a relaxed dinner gathering, we had the pleasure of meeting **Dr Becky Ma, Dr Carmen Lee** and **Dr Derek Lee**, awardees of the HKCP-HKGI Overseas Training Scholarship and Training Grant for Excellence in Genomic Medicine. As they shared their experiences, one theme emerged consistently: genetics and genomics are increasingly integrated into routine clinical practice, transforming and refining patient care across all fields of medicine.

The Catalyst: Clinical Encounters

Their journeys into clinical genomics were sparked by day-to-day clinical encounters. Dr Carmen Lee, a haematology fellow at Queen Mary Hospital, frequently encounters genetic counselling and supports patients through the complex interpretation of next-generation sequencing results in the context of haematological malignancies. Her specialist interest has since developed in hereditary bleeding disorders and thrombosis, informed by the unmet clinical need in these conditions. This is particularly relevant for patients of reproductive age, where genetic diagnosis can guide family planning, pregnancy management and peri-procedural care.

Dr Derek Lee is a cardiology fellow at Queen Elizabeth Hospital, with a strong passion for inherited cardiomyopathy conditions. He shared a memorable encounter caring for a young patient with

hypertrophic cardiomyopathy, who asked about the genetic basis of the condition and what it might mean for family members. This experience left a lasting impression, highlighting the profound clinical implications of achieving a genetic diagnosis - not only to guide targeted therapeutics, but also to facilitates early cascade screening. Inspired by this encounter, Derek embarked his journey in genomic medicine and pursued a master's degree in Medical Genetics at The Chinese University of Hong Kong.

Dr Becky Ma is a fellow in nephrology working at Queen Mary Hospital. Her interest in genetics began during medical school, when she first encountered patients living with polycystic kidney disease. The interest continued to grow throughout her nephrology training, as she frequently cared for patients who progressed to end-stage kidney disease without a clear underlying cause. These clinical challenges ignited her desire to seek understanding in genetic kidney diseases, so that she could identify



Dr Carmen Lee shared her overseas training experiences and her vision to establish a hemophilia registry in Hong Kong.



Dr Derek Lee is partnering with the Hong Kong Children's Hospital to run a multidisciplinary G&G clinic on hereditary cardiomyopathies. He plans to extend the network to involve more cardiologists who share his vision.



Dr Becky Ma's dedication to specializing in genetics and genomics began during her medical school years.

the underlying cause and ultimately improve outcomes for patients.

Immersive Training in Genomics Medicine: From Local to International Centres of Excellence

The HKCP-HKGI training grant provided a unique gateway for fellows to step beyond their usual clinical environments and gained expertise, and training exposure in Genomic Medicine at specialist institutions in Hong Kong and London.

Becky was attached to the Hong Kong Genome Institute, where she gained experience in whole genome sequencing, variant curation and genomic data interpretation. She contributed to several cohort analyses, including studies investigating potential genetic causes in patients with chronic kidney disease of unexplained aetiology and genotype-phenotype correlations in patients living with autosomal dominant polycystic kidney disease. Her local attachment was built upon a year of overseas training at Columbia University in New York, supported by a separate scholarship. There, Becky was attached to specialised clinics for genetic kidney diseases and molecular diagnostic laboratories, while also participating in various research projects. Together, these experiences served as important milestones in Becky's professional development and enabled her to complete fellowship training in Genetics and Genomics.

Carmen undertook overseas training at the Royal Free Hospital in London, in the United Kingdom where she gained extensive exposure across the continuum of care for patients living with haemophilia. Her fellowship spanned laboratory sequencing,

genetic counselling and long-term clinical management, providing a comprehensive understanding of how genomic medicine can be integrated throughout the patient journey.

Similarly, Derek pursued his overseas training in hereditary cardiomyopathies, at the Royal Brompton Hospital in London. His fellowship encompassed advanced cardiac magnetic resonance imaging alongside the genomic evaluation of patients presenting with newly diagnosed cardiomyopathy. Through participating in specialist clinics and multidisciplinary meetings, he learnt to integrate phenotypic and genotypic information to refine diagnosis, guide surveillance strategies and inform therapeutic decisions.

Despite training in different specialties and healthcare systems, all three fellows were struck by the pivotal role of multidisciplinary collaboration in delivering effective genomic medicine. They reflected on the valuable opportunities facilitated by the HKCP-HKGI training grant, which provided comprehensive exposure to diverse models of genomic medicine in clinical practice. Carmen was particularly inspired by the highly coordinated model of care, in which haematologists, geneticists, laboratory scientists and specialist nurses worked collaboratively to support patients with inherited bleeding disorders throughout key transitions in their lives, including reproductive counselling, pregnancy planning and peri-procedural care.

Translating Genomic Training into Clinical Impact

Beyond deepening understanding of genetics and genomics, the fellowships

fostered a broader vision for the future of genomic medicine, and the impact of their experiences is already evident upon their return to Hong Kong.

Derek now incorporates genetics and genomics into the routine evaluation of patients presenting with cardiomyopathy, enabling more accurate identification of hereditary diseases and facilitating cascade screening among family members. He is also actively involved in a local multidisciplinary network investigating sudden cardiac death, with the goal of identifying inherited predispositions and preventing future tragedies through earlier detection and intervention in at-risk relatives. He shared an example of how his training has strengthened his expertise in the interpretation of variants of uncertain significance. Through meticulous phenotypic correlation, complex genomic data were successfully translated into clinically actionable decisions, ultimately enabling a life-saving intervention for that patient. As Derek reflected on his journey, he shared with us that ***‘patients need more than just medicine—they need medicine tailored to them. That takes commitment, from education and training to system and service development... One day, clinical genomics will be fully integrated into mainstream medicine as a standard of care’.***

In parallel, Carmen is collaborating with the local obstetrics and gynaecology team to establish a local disease registry for patients living with hereditary thrombosis and haemophilia. This will provide a solid foundation for improved epidemiological understanding in our locality, facilitating earlier diagnosis and optimising personalised medicine for patients and their families.

Becky is expanding the genetic kidney disease service with a particular focus on

Alport syndrome, and autosomal dominant polycystic kidney disease. Recognising that hereditary kidney diseases require lifelong multidisciplinary care, she is also actively involved in the transitional care from paediatric to adult renal services at the Hong Kong Children’s Hospital.

The Art of Genomic Medicine: Navigating the Known and the Unknown

From our meeting with Becky, Carmen and Derek, we could immediately appreciate their enthusiasm and commitment to the field of genetics and genomics. Beyond their clinical responsibilities, they dedicate significant time reading scientific literature to keeping pace with the developments in this rapidly evolving discipline.

What we learnt from our discussion was that the clinical value of genetic diagnosis varies across different conditions. In some diseases, establishing a molecular diagnosis can have immediate implications for clinical management. In contrast, many conditions remain incompletely understood despite advances in genomic technologies. Many patients choose to pursue genetic testing in the hope of obtaining long-awaited answers and, potentially, future therapeutic opportunities. Others may decide against testing due to concerns regarding the implications of identifying an inherited condition and the possibility of transmitting disease-causing variants to future generations.

Our discussion highlighted that beyond the scientific challenges, genomic medicine raises important ethical considerations. Clinicians are required to carefully guide patients through complex decisions, navigating the uncertainties in genetic

testing. Comprehensive pre-test counselling encompasses not only the potential diagnostic benefits, but also the possible psychological and familial implications of testing. The practice of genomic medicine therefore demands not only scientific expertise, but also effective communication and ethical consideration. It reinforces the importance of balancing diagnostic advancement and patients' values to achieve patient-centred care.

The Paradigm Shift and an Invitation to the Next Cohort

Having undergone overseas training in genetics and genomic medicine, the fellows now approach clinical practice through a different lens. These experiences have broadened their clinical perspectives, enabling them to integrate genomic medicine into their respective specialties. The fellowships have fostered strong professional networks with both local and international

centres, facilitating scientific collaboration that will continue to advance the practice of genomic medicine in Hong Kong.

Together, Becky, Carmen and Derek demonstrated the value of investing in genomic medicine training. By bringing back new expertise, aspirations and collaborative models of care, they are building the foundations of genomic medicine within their respective specialties. Their experiences serve as a powerful reminder that genomics medicine is no longer confined to laboratories, but is increasingly becoming an essential part of everyday clinical practice.

As they embark on this exciting new chapter, their journeys reflect the growing integration of genomic medicine into everyday clinical practice - driving a shift towards more proactive healthcare, delivering precision and personalised care to our patients. Their achievements will serve as an inspiration to the next cohort of fellows in Genetics and Genomics in Hong Kong.



Dr Becky Ma pursued further specialized training in genomic medicine at the Hong Kong Genome Institute (HKGI), with the support of the HKCP-HKGI Training Grant for Excellence in Genomic Medicine.

Together, We Are More

Report from the 3rd HKCP Trainees Conference

Dr. Raymond Kam Wing WOO

Caritas Medical Centre

Dr. Maggie Li Man LAM

Queen Elizabeth Hospital

Dr. Katie Wai Sze KWAN

Caritas Medical Centre

On behalf of the organizing committee of 3rd HKCP Trainees Conference



The Hong Kong College of Physicians may be entering its fortieth year—an age traditionally defined by freedom from doubt. Yet, for incoming internal medicine trainees at the start of their journey, a degree of trepidation remains entirely natural. This year's HKCP Trainees Conference aims to address these concerns by offering guidance on training pathways, clinical reasoning, patient communication, emergencies, and tips for avoiding clinical mistakes.

The conference began with welcoming remarks from the College President, Professor Daniel Tak Mao CHAN, and the Vice Chairperson of the Training Subcommittee, Dr Candy Hoi Yee KWAN. Next, Dr Maggie Li Man LAM and Dr Tobias Hin Yao TSOI then shared fun facts

about the College. This was followed by Dr Wan Yeung CHUI, who provided practical tips on Basic Physician Training and the MRCP(UK) exam. Dr Jacqueline SO, Co-chairman of the Young Fellows and Trainees Committee, highlighted the support the College offers to its junior members.

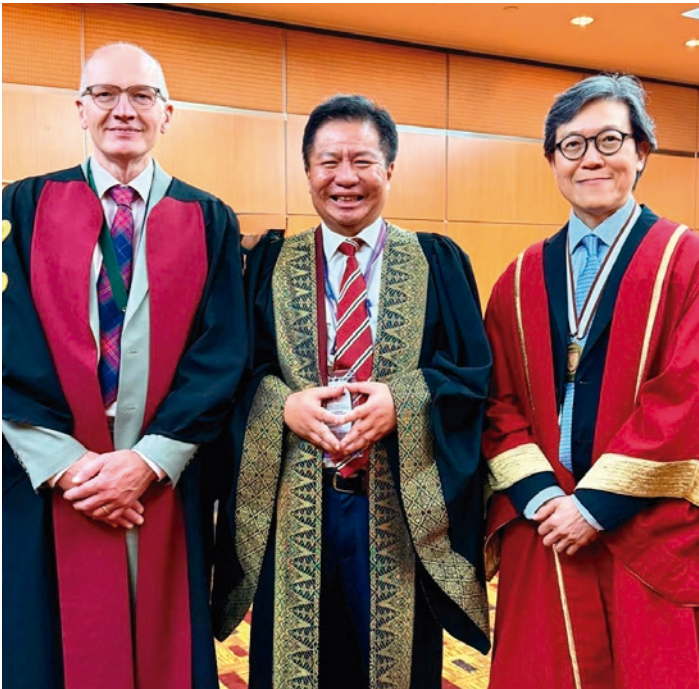
Following the insightful lecture by Dr Jacqueline Kwan Yuk YUEN on breaking bad news, Dr Andrew Lung Tat CHAN, Dr John Yu Hong CHAN, Dr Carmen Ka Man CHEUNG, and Dr Raymond Kam Wing WOO performed role-plays to demonstrate how strong communication skills and empathetic listening can help clinicians engage effectively with patients and relatives experiencing intense emotions.

In the afternoon, Dr Jason Chiu Ming NG shared crucial advice on cultivating habits that help prevent clinical mistakes. This was followed by lectures on emergencies in neurology, as well as gastroenterology and hepatology, delivered by Dr Florence Sin Ying FAN and Dr Loey Lung Yi MAK. Finally, using cases shared by Dr Christopher CHAN and Dr Nelson Siuki TSANG, Dr Chung Ming CHU and Dr Woon Leung NG passed down their wisdom on tackling diagnostic dilemmas through clinical reasoning.

In closing, Dr Ka Lung CHUI reminded attendees of the importance of “Stay Friendly, Stay Curious”. Although the conference has officially wrapped up, the dedication and support from the College for our young trainees remains unwavering, because “Together, We are More.”



College President attended the Academy of Medicine of Malaysia's 60th Anniversary celebration, as well as the 59th Malaysia-Singapore Congress of Medicine and the 37th Annual Scientific Congress 2026, 3-5 July in Kuala Lumpur.

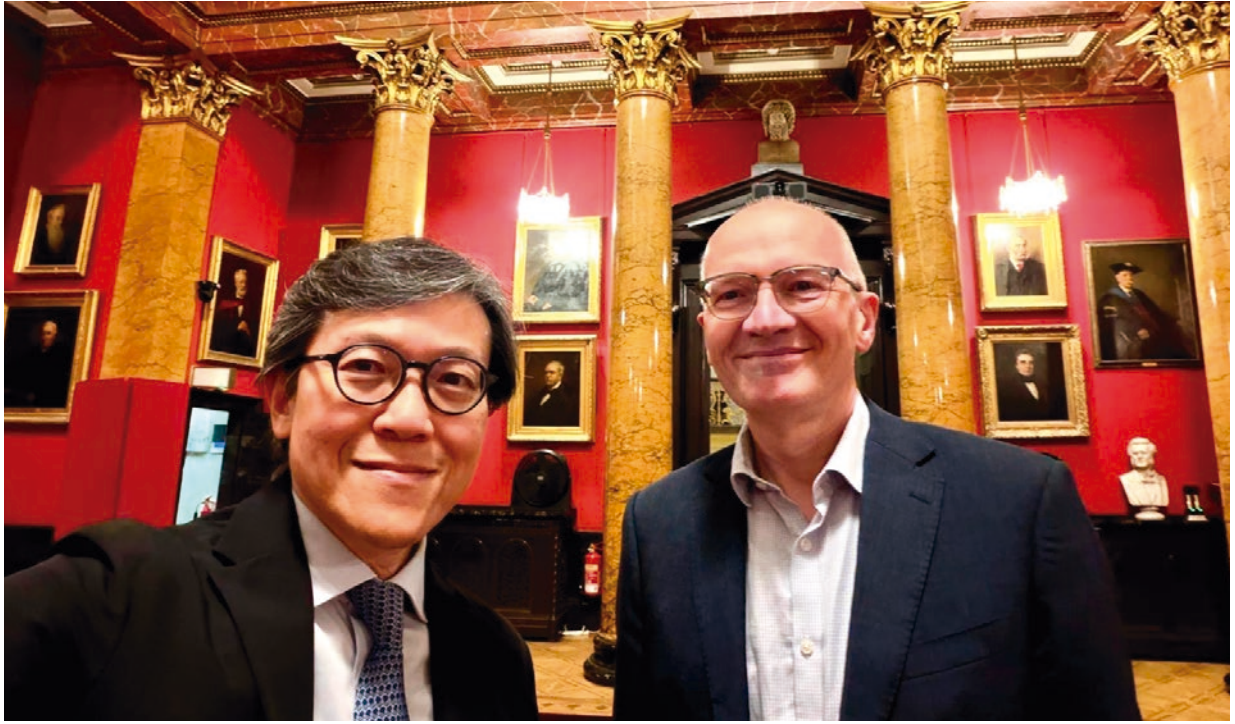


From left to right: Prof Mark Strachan, President of the Royal College of Physicians of Edinburgh; Prof Dato' Dr Hanafiah Harunarashid, Master of Academy of Medicine of Malaysia, and our College President.



Our President met with Academy President and Presidents of other sister Colleges.

College President visited the Royal College of Physicians of Edinburgh



College President Prof Daniel Chan visited RCPE President Prof Mark Strachan at the Edinburgh College.



Dinner hosted by Prof Strachan for Prof Daniel Chan and Prof Andrew Elder.

40 Years of Excellence in Clinical Medicine: Join Us in Honouring a Remarkable Legacy!

The Hong Kong College of Physicians proudly celebrates its 40th Anniversary this year, honouring four remarkable decades of dedication to professional and clinical excellence.

This special occasion is a joyous moment to look back with pride on the achievements of our physician community, and to come together in celebration of the shared passion and impact that have defined these years.

Alongside the Annual Scientific Meeting on 10–11 October, the College will also host the Conferment Ceremony and Annual Dinner on 10 October, followed by a spectacular 40th Anniversary Dinner on 11 October. Distinguished guests, together with Presidents and leadership from physician colleges and training institutions across the Chinese Mainland and overseas, will be invited to join us for these landmark events.

We warmly invite all of you to celebrate this momentous milestone. Thank you for your continued support and for helping make this Anniversary truly memorable.

Congratulations

Silver Bauhinia Star 2026



Dr Tony Pat Sing KO

College Fellow Dr KO has devoted over 30 years to HK's public healthcare system. As Chief Executive of the HA, he led HA through the COVID-19 pandemic with steadfast resolve. Under his leadership, services improved, Public-Private Partnerships expanded, and key initiatives such as telemedicine and drug delivery were successfully delivered, along with major capital projects. For his outstanding dedication to strengthening public healthcare, Dr KO received the SBS.

Bronze Bauhinia Star 2026



Prof Daniel Tak Mao CHAN

College President Professor Daniel CHAN is awarded BBS in recognition of his notable contributions in advancing specialist service development, medical training and professional standards. He is widely recognised for his academic distinction and international professional standing. As President of the HKCP, Professor CHAN has demonstrated his exceptional professional leadership and commitment to healthcare advancement.

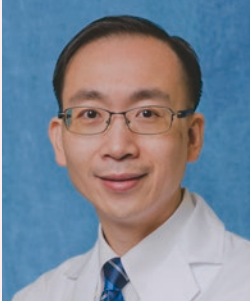
16th Guanghua Engineering Science and Technology Award



Prof Siew Chien NG

College Fellow Professor Siew Chien NG has been honored with the 16th Guanghua Engineering Science and Technology Award by the Chinese Academy of Engineering, in recognition of her outstanding contributions to medical research. This award, China's most prestigious engineering prize, recognizes significant achievements and exceptional impact in engineering science and technology and engineering management.

CUHK Associate Vice-President (Research)

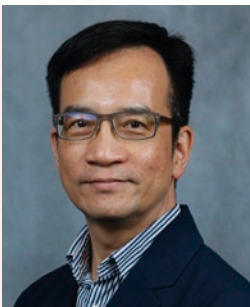


Prof Vincent Wai Sun WONG

Congratulations to College Council Member and Fellow Prof Wong on his appointment, effective 1 August 2026. A distinguished clinician-scientist and world-leading hepatology expert, Prof Wong brings an outstanding record in research, teaching, and academic leadership. We look forward to Prof Wong's continued leadership and vision in elevating research capacity across the University.

Hospital Authority Outstanding Staff Award 2026

Congratulations to the following College Fellows and Office Bearers who have received the Outstanding Staff Award 2026 from the Hospital Authority:



Dr Johnny Wai Man CHAN

The Power of Teamwork

Over the years, College Fellow Dr Chan has worked closely with departments across the Cluster. He believes teamwork makes the difference: individual strengths are limited, but shared effort and spirit lead to success.

Alongside his clinical duties, he has held key roles in various capacities, including Vice-President and Chairman of the College Education & Accreditation Committee and he emphasizes communication as the key to strong teamwork.



Dr Kai Ming CHOW

Actions Speak Louder than Words

College Honorary Secretary and Fellow Dr Chow believes teaching should be led by example. He shared that he failed his specialist examination twice before passing on his third attempt. He emphasized that through observing his consultations, students learn how to communicate with patients and handle real-life situations. He also noted that while medical knowledge can be learned online, the care and compassion behind healing cannot be replaced by artificial intelligence.



Dr Yu Cho WOO

Healing Through Trust and Communication

College Fellow Dr Woo reminds young doctors to “never lose sight of humanity while managing cases.” He notes that even though consultation time is limited, care must never become a mechanical routine. He encourages doctors to stay true to their original aspirations by building trust and communicating clearly with patients, and by supporting them throughout their journey to recovery.

Statistics on Fellows and Trainees in all Specialties (as of 8 June 2026)

Specialty	No. of Fellows	No. of Trainees
Cardiology	361	49
Clinical Pharmacology & Therapeutics	10	1
Clinical Toxicology	5	0
Critical Care Medicine	133	17
Dermatology & Venereology	133	11
Endocrinology, Diabetes & Metabolism	159	21
Gastroenterology & Hepatology	265	32
Geriatric Medicine	243	27
Genetics and Genomics (Medicine)	25	4
Haematology/Haematological Oncology	100	9
Immunology & Allergy	8	3
Infectious Disease	62	5
Internal Medicine	1902	372
Medical Oncology	68	12
Nephrology	179	25
Neurology	178	24
Palliative Medicine	47	10
Rehabilitation	68	11
Respiratory Medicine	242	30
Rheumatology	114	20

Case Report that Received High Score at AIM Interim Assessment

Candidates participating in the AIM Interim Assessment are required to submit case reports. Exemplary case reports from each examination diet have been uploaded to our College website: <http://www.hkcp.org>.

Case Report Title	Name of the candidate	Department and Hospital
A Clotting Chaos	Dr Lee Yan Wing	Department of Medicine & Therapeutics, Prince of Wales Hospital
An Elusive Diagnosis: Biochemically Confirmed Insulinoma with Challenging Localisation	Dr Wu Tsun Wai Jeffrey	Department of Medicine, Queen Mary Hospital

Examination Calendar

Please take note of the following Interim and Exit Assessment dates for various Specialties:

	Interim Assessment date	Exit Assessment date
Advanced Internal Medicine	5 December 2026	12 December 2026
Cardiology	19 December 2026	19 December 2026
Clinical Pharmacology & Therapeutics	Nil	Nil
Critical Care Medicine	17 October 2026	17 October 2026
Dermatology & Venereology	28 November 2026	28 November 2026
Endocrinology, Diabetes & Metabolism	20 November 2026	20 November 2026
Gastroenterology & Hepatology	19 December 2026	19 December 2026
Geriatric Medicine	21 November 2026	21 November 2026
Haematology & Haematological Oncology	28 November 2026	28 November 2026
Infectious Disease	5 December 2026	5 December 2026
Immunology & Allergy	24 November 2026	24 November 2026
Medical Oncology	19 December 2026	Nil
Nephrology	3 December 2026	3 December 2026
Neurology	Pending	14 November 2026
Palliative Medicine	21 November 2026	21 November 2026
Rehabilitation	7 December 2026	7 December 2026
Respiratory Medicine	12 December 2026	12 December 2026
Rheumatology	1 December 2026	1 December 2026

Information on Examination Dates for Joint HKCPIE/MRCP(UK) in 2027

Type of examination	Examination date	HKCP local application period*	Official application period on the MRCP(UK) website
Joint HKCPIE/MRCP Part I examination	20 January 2027	13 October 2026 – 26 October 2026	27 October 2026 – 3 November 2026
Joint HKCPIE/MRCP Part I examination	29 September 2027	29 June 2027 – 12 July 2027	13 July 2027 – 20 July 2027
Joint HKCPIE/MRCP Part II (Written) examination	24 February 2027	24 November 2026 – 7 December 2026	8 December 2026 – 15 December 2026
Joint HKCPIE/MRCP Part II (Written) examination	24 November 2027	24 August 2027 – 6 September 2027	7 September 2027 – 14 September 2027

* HKCP local application period will be 2 weeks before the official application period set by the MRCP (UK) Central Office on their website.

Pass rate of PACES over the Past Years:

October 2001	36/72 = 50%
February 2002	34/74 = 46%
October 2002	29/72 = 40%
February 2003	30/69 = 43%
October 2003	27/59 = 46%
March 2004	39/64 = 61%
October 2004	26/69 = 38%
March 2005	35/75 = 47%
October 2005	28/75 = 37%
March 2006	36/75 = 48%
October 2006	16/73 = 22%
March 2007	44/74 = 59%
June 2007	44/74 = 59%
October 2007	36/55 = 65%
March 2008	36/74 = 49%
October 2008	29/65 = 45%
February 2009	39/75 = 52%
October 2009	24/72 = 33%
March 2010	33/75 = 44%
October 2010	40/74 = 54%
February 2011	23/66 = 35%
October 2011	34/70 = 49%
February 2012	32/74 = 43%
October 2012	32/74 = 43%
March 2013	28/75 = 37% (for HK local candidates)
October 2013	28/74 = 38%
February 2014	29/74 = 39% (for HK local candidates)
October 2014	21/74 = 28%
March 2015	36/75 = 48%
October 2015	35/75 = 47%
March 2016	40/75 = 53%
October 2016	36/75 = 49%
March 2017	26/74 = 35%
October 2017	26/75 = 35%
March 2018	32/75 = 43%
October 2018	38/75 = 51%
March 2019	46/85 = 54%
October 2019	47/86 = 55%
No examination had been conducted in 2020	
March 2021	81/119 = 68%
October 2021	84/120 = 70%
June 2022	50/87 = 57%
October 2022	32/72 = 44%
March 2023	54/89 = 61%
October 2023	46/89 = 52%
April 2024	43/76 = 57%
October 2024	54/88 = 61%
March 2025	38/71 = 54%
October 2025	38/88 = 43%
March 2026	37/90 = 41%

Joint HKCPIE/MRCP(UK) March PACES 2026 Pass List

Chan Yat Chi
 Cheung Nga Man
 Chow Ka Chun
 Chu Hon Chung
 Chu Justin Chiu Man
 Chung Cheuk Yee Coey
 Dao Wei Yin
 Fung Chi Ying Natalie
 Guo Liutao
 Hsu Benson
 Khong Ka Wa
 Kwok Mei Lan
 Kwong Jing Ting Deborah
 Lai Wing Yee
 Lam Fung Ching
 Lau Maisie
 Lau Wing Leung Gavin
 Lee Tsz Ying Kelly
 Leung Pak Wah Ambrose
 Li Cheuk Yin Boris
 Li Yuan Yuan
 Liu Munan
 Low Weng Hei
 Ng King Hei Kelvin
 Nip Ha Ying
 Pannu-Yuon Jasmine Patricia
 Sham Sze Tung Tiffany
 Shum Wing Zi
 Tsang Chun Hei
 Wong Aidan
 Wong Ching Him
 Wong Chun
 Wong See Ming Chloe
 Wong Wang Chun
 Wu Fong Kit
 Yu Olivia Gwan Ying
 Zhou Peng

Pass Rate for the Joint HKCPIE/MRCP(UK) Part I Examination:

	Sitting	Pass
September 2002	100	33 (33%)
January 2003	124	55 (44%)
May 2003 (SARS Special)	21	7 (33%)
September 2003	54	29 (54%)
January 2004	93	39 (42%)
September 2004	29	16 (55%)
January 2005	96	68 (70.8%)
September 2005	24	15 (62.5%)
January 2006	95	74 (80%)
September 2006	21	13 (62%)
January 2007	87	67 (77%)
September 2007	23	12 (52%)
January 2008	56	38 (68%)
September 2008	47	32 (68%)
January 2009	59	47 (80%)
September 2009	47	28 (60%)
January 2010	45	28 (62%)
September 2010	62	39 (63%)
January 2011	44	23 (52%)
September 2011	64	49 (77%)
January 2012	45	28 (62%)
September 2012	80	59 (74%)
January 2013	41	22 (54%)
September 2013	76	60 (79%)
January 2014	30	20 (67%)
September 2014	84	64 (76%)
January 2015	29	20 (69%)
September 2015	100	71 (71%)
January 2016	33	18 (55%)
September 2016	84	63 (75%)
January 2017	36	19 (53%)
September 2017	69	56 (81%)
January 2018	25	12 (48%)
September 2018	108	74 (69%)
January 2019	43	19 (44%)
September 2019	96	64 (67%)
January 2020	41	20 (49%)
September 2020	109	101 (93%)
January 2021	33	20 (61%)
August 2021	106	63 (59%)
May 2022	65	48 (74%)
August 2022	104	75 (72%)
April 2023	36	20 (56%)
August 2023	109	63 (58%)
January 2024	71	35 (49%)
August 2024	140	105 (75%)
January 2025	79	39 (49%)
September 2025	142	104 (73%)
January 2026	49	29 (59%)

Pass Rate for Joint HKCPIE/MRCP(UK) Part II (Written) Examination

	Sitting	Pass
2 July 2002	53	27 (51%)
13 November 2002	50	24 (48%)
13 August 2003	110	62 (56%)
10 December 2003	54	31 (57%)
28 July 2004	65	42 (65%)
8 December 2004	46	32 (70%)
13 April 2005	32	15 (47%)
27 July 2005	76	56 (74%)
7 & 8 December 2005	26	16 (62%)
12 & 13 April 2006	29	13 (45%)
26 & 27 July 2006	91	68 (75%)
6 & 7 December 2006	33	18 (55%)
11 & 12 April 2007	34	22 (65%)
25 & 26 July 2007	80	70 (88%)
5 & 6 December 2007	19	13 (68%)
9 & 10 April 2008	21	13 (62%)
30 & 31 July 2008	47	36 (77%)
3 & 4 December 2008	17	10 (59%)
8 & 9 April 2009	32	25 (78%)
29 & 30 July 2009	50	43 (86%)
25 & 26 November 2009	12	7 (58%)
7 & 8 April 2010	41	34 (83%)
28 & 29 July 2010	25	19 (76%)
24 & 25 November 2010	8	2 (25%)
6 & 7 April 2011	45	35 (78%)
23 & 24 November 2011	32	25 (78%)
28 & 29 March 2012	55	43 (78%)
12 & 13 December 2012	57	44 (77%)
10 & 11 April 2013	60	52 (87%)
11 & 12 December 2013	48	34 (71%)
9 & 10 April 2014	54	46 (85%)
10 & 11 December 2014	26	25 (96%)
25 & 26 March 2015	53	45 (85%)
9 & 10 December 2015	68	65 (96%)
6 & 7 April 2016	29	28 (97%)
7 & 8 December 2016	62	50 (81%)
29 & 30 March 2017	25	21 (84%)
28 & 29 November 2017	58	54 (93%)
27 March 2018	21	14 (67%)
24 October 2018	20	15 (75%)
26 March 2019	79	71 (90%)
22 October 2019	17	12 (71%)
27 October 2020	87	77 (89%)
23 March 2021	107	84 (79%)
5 October 2021	44	32 (73%)
1 Jun 2022	61	49 (80%)
7 September 2022	56	40 (71%)
22 February 2023	78	60 (77%)
6 September 2023	40	28 (70%)
21 February 2024	71	59 (83%)
11 September 2024	49	31 (63%)
26 March 2025	106	95 (90%)
22 October 2025	56	39 (70%)
25 March 2026	109	83 (76%)

Research Workshop 2026

Dr Jacqueline SO

Co-Chairmen, Young Fellows and Trainees Committee



Dr. Kwan engaging participants with interactive questions during the session.

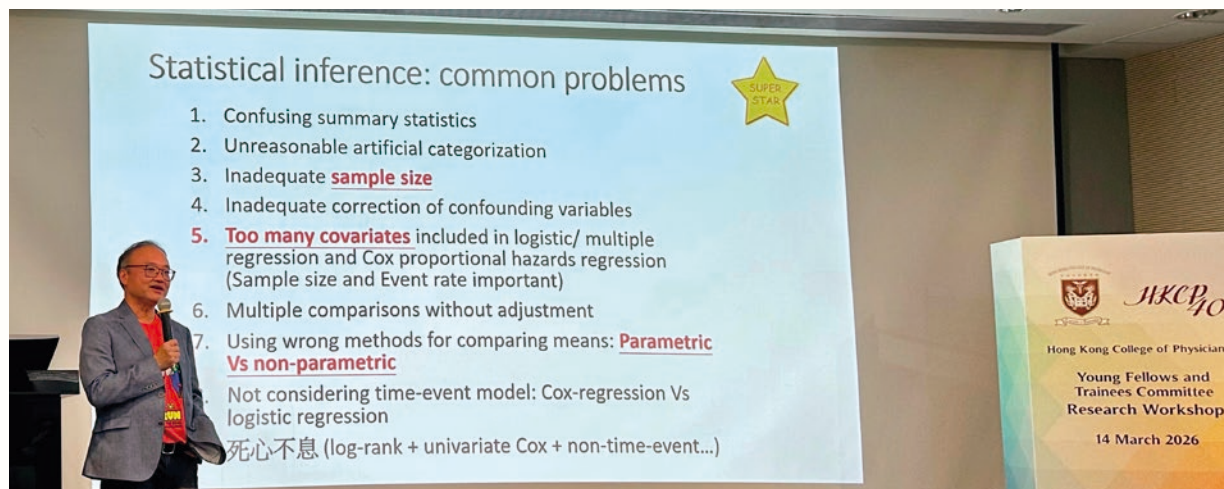
The biennial Research Workshop for higher physician trainees was successfully organized on 14 March 2026 at Queen Elizabeth Hospital. The half-day event attracted over 80 higher physician trainees.

The program began with an opening speech by Prof. Daniel TM Chan, College President. He shared how he developed a clinical question and conducted his first research

based on experiences from his clinic duties when he was a junior doctor. He emphasized that everyone can start a research project and highlighted the potential clinical impact of research.

This was followed by a sharing session by Dr. CH Choi, our Council Member, on what examiners look for in dissertations. As a member of the Research Ethics Committee and the Food and Health Bureau Grant Review Board, Dr. Choi is undoubtedly an expert in reviewing research and grants. He highlighted the key elements trainees should focus on when preparing their dissertations, as well as common pitfalls to avoid.

We were also honored to have Dr. Candy HY Kwan, another Council Member and Chief of Service at Kowloon Hospital, to share practical tips for conducting longitudinal studies. The interactive session, led by Dr. Kwan, encouraged trainees to think about how to formulate research questions and provided valuable guidance on longitudinal research methods.



Dr. Choi highlighted common pitfalls to avoid in statistical analysis.

We were delighted to have Professor Terry CF Yip, Associate Professor in the Department of Medicine and Therapeutics and Co-Director of the Medical Data Analytics Centre at The Chinese University of Hong Kong, to teach us different statistical methods and techniques, including common issues to watch for. As a leading figure in the field of big data analysis, he also shared real-world applications of big data and key considerations when working with such data.

The workshop concluded with a session by Dr. Rex Hui, a member of our Young Fellows and Trainees Committee and the winner of our College's Best Thesis Gold Award (2025) and the Distinguished Research Paper Award for Young Investigators (2024). He shared practical tips on preparing and writing dissertations—from outline to final draft—particularly benefiting trainees with limited prior research experience.

Our committee is pleased that the event continues to receive excellent feedback from trainees. We are keen to organize more activities that will further support and benefit trainees. Please feel free to share your suggestions with us at hkcp.yftc@gmail.com and follow us on Instagram for the latest updates. We look forward to seeing you all at our upcoming events.



@YOUNGPHYSICIANS.HKCP

Career Talk 2026

Dr Kelvin Lap Kiu TSOI

Co-Chairman, Young Fellows and Trainees Committee



Career talk session with fresh graduates eager to pursue a future in medicine.

The Young Fellows and Trainees Committee Career Talk was successfully held on 20 June 2026 at the Queen Elizabeth Hospital. Marking a meaningful milestone in our College's 40th Anniversary year, this event was especially significant as we welcomed a new generation of fresh graduates to begin their internships. We shared with them the journey of becoming a physician. A total of 120 participants enrolled.

The half-day programme began with an introduction to the structure of the Hong Kong College of Physicians and its subspecialties, delivered by the committee co-chairpersons. They outlined the training pathway from Basic Physician Training (BPT) to Higher Physician Training (HPT), together

with the relevant examination requirements. This was followed by a heartfelt session, "Life as a Physician," in which Dr Charing Szeto and Dr Joyce Ng shared their experiences as physicians—covering both joyful and tearful moments throughout their training years, the daily routines of a medical officer, the excitement of managing clinical emergencies, and the eye-opening experience of overseas training.

After a short tea break, Dr David Au-yang provided practical tips and strategies on CV writing and interview techniques, equipping our doctors-to-be for residency applications to their desired training units. Recognising that internship is both rewarding and demanding, Dr Muk-lam Yeung led the

session, “How to Make Your Internship More Rewarding and Educational?” He guided participants on how to maximise their learning potential while coping with a heavy workload and on-call duties. He also reminded them of the value of learning from peers and seniors in the workplace.

Towards the end of the programme, doctors from various subspecialties were invited to join small-group sharing sessions. Participants engaged actively with the doctors, gaining insights into different hospital cultures and practices, as well as

a deeper understanding of the training, lifestyle, and future development of the subspecialties of interest.

We would also like to express our heartfelt gratitude to all the guest doctors who kindly joined the programme despite their busy schedules. Highly positive feedback was received from our participants. Building on this success, we will continue to organise the Career Talk annually to further support our new graduates and warmly welcome them to our College family.



Insider Interview Strategies – Dr. David Au-yang on “Beyond the Med School Curriculum”.



Beyond the stethoscope – Dr. Charing Szeto on “Navigating a Medical Career with Purpose and Happiness”.



HONG KONG COLLEGE OF PHYSICIANS

Room 603
Hong Kong Academy of Medicine Jockey Club Building
99 Wong Chuk Hang Road
Aberdeen
Hong Kong
Tel 2871 8766 Fax 2556 9047
email enquiry@hkcp.org
College Website <http://www.hkcp.org>