



給孔新希望

A gift of life



將心比心
Empathy is here to stay



母乳是嬰兒的天然食品，含天然抗體和奧米加3脂肪酸，有助嬰兒健康成長。對早產或患危疾的初生嬰兒來說，更具醫療效用。不過，媽媽因各種原因無法親自授乳，香港母乳庫正好為有需要的初生嬰兒提供安全和有營養的母乳，期望每年收集約1000公升母乳，讓450至600名早產及患有危疾的初生嬰兒受惠。母乳庫的成立除了是團隊、醫護人員和母嬰健康院同事努力的成果，更重要是媽媽的無私參與，將心比心。這些由其他媽媽捐贈的母乳，是初生嬰兒生命中珍貴的禮物。今期《協力》為大家帶來三名媽媽的故事，分享她們為甚麼願意捐出母乳，用愛接力。

2025年第一期，《協力》送上充滿愛的故事，同時滿載希望，《協力》全人祝福大家新年快樂，身體健康！

Breast milk is natural food for infants with antibodies and omega-3 fatty acids to help babies grow healthily. It can also act as a medical food for preterm and critically ill infants. However, some mothers may not be able to breastfeed for a variety of reasons. The Hong Kong Breast Milk Bank has therefore been established to provide safe, nutritious breast milk for newborns in need. It is hoped to collect 1000 litres of breast milk annually, benefiting 450 to 600 premature and critically ill newborns. This is the result of efforts of the team, medical professionals and colleagues from maternal and child health centres and, more importantly, the selfless contributions of mothers and their empathy to the needy. The breast milk donated by other mothers is the gift of life and, in this edition of *HASLink*, three mothers open their hearts and explain why they generously give breast milk.

Our first edition of 2025 brings you mothers' stories of love and compassion. They are also stories of hope. The team at *HASLink* wishes you happiness and good health in the year ahead.

捐贈母乳 給早產嬰的最佳禮物

Breast milk donation:
A lifeline for preterm infants



嬰兒帶著父母的喜樂和期望呱呱落地，但他們有些因早產或患有先天性嚴重疾病，一出世便與父母分離，需入住新生兒深切治療部（NICU），生命危在旦夕，母乳成為拯救他們的「靈丹妙藥」。「母乳含有豐富抗體，特別容易被初生嬰兒所吸收，可減少出現併發症的機會。對早產或患重症的嬰兒而言，母乳不止是食物，有營養價值，更具醫療作用。」香港母乳庫總監黃明沁醫生表示，部分媽媽因各種原因未能提供母乳或母乳量不足，促使香港母乳庫成立，為有需要的嬰兒提供優質母乳。「捐贈母乳是送給早產嬰的最佳禮物，可拯救他們的生命。」黃醫生說。

母乳具醫療效用

早產嬰的腸道未完全發育成熟，消化能力較足月的嬰兒差，因此，易消化和吸收的母乳於他們有如醫療食品。「早產嬰患上壞死性腸炎的情況並不罕見，需要做手術切除壞死部分，可引致短腸症，嚴重會有生命危險。母乳可增強嬰兒抵抗力，減低感染風險，提高存活率。」

然而，並非所有媽媽都有能力親自餵哺母乳。「眼看著才剛出世的嬰兒入住 NICU，媽媽當然不好受，加上骨肉分離，增加媽媽上奶的難度。不少媽媽會因為精神壓力、自身身體狀況等問題，無法為嬰兒提供母乳。」



黃明沁醫生指，香港母乳庫會確保捐贈母乳的質量，嚴格篩選捐贈者。
The HKBMB will ensure the quality and safety of donor breast milk and screen donors strictly, says Dr Rosanna Wong.

提高母乳餵哺率有助提高捐贈率

黃醫生憶述，在香港兒童醫院成立後不久，接收了一名患壞死性腸炎的嬰兒，其時她的媽媽情緒低落，無法泵奶。嬰兒接受手術後身體日漸康復，媽媽亦在護士的幫助下，恢復母乳量。她得知香港母乳庫成立後，覺得很高興，認為可以幫助到有需要的初生嬰兒，並安慰其他 NICU 的家長，協助推廣母乳庫的服務，令黃醫生十分感動。

「母乳捐贈的最大挑戰在於本港母乳餵哺率較低，變相要招募有剩餘母乳的媽媽捐贈難度較大。我很感恩我們有優秀的團隊，包括產科、兒科護士、母嬰健康院同事，大家上下一心參與推廣。希望大家的努力下，母乳餵哺率能夠上升，直接幫到母乳庫。」

母乳庫今年1月起投入服務，首階段會接收捐贈母乳，視乎母乳收集數量，預計約3月展開第二階段服務，向有臨床需要的早產及危重嬰兒提供捐贈母乳。

香港母乳庫總監黃明沁醫生（左四）和副總監黃卓凝醫生（右四）指，通過醫院及母嬰健康院同事推廣母乳餵哺，相信捐贈母乳數量會不斷增多。

Dr Rosanna Wong (fourth from left) and Associate Director Dr Sally Wong (fourth from right) believe the amount of donor milk will increase through the promotion of breastfeeding by colleagues in hospitals and maternal and child health centres.

The arrival of a newborn baby always brings joy and hope. However, some babies are separated immediately from their parents and admitted to the Neonatal Intensive Care Unit (NICU) due to prematurity or serious congenital conditions that jeopardise their lives. In these cases, breast milk is nature's miracle remedy that can save their lives. "Breast milk is rich in antibodies and easily absorbed by newborns, which reduces the risk of developing complications. For preterm or critically ill infants, breast milk is not just a nutritious food but therapeutic," says the Director of the Hong Kong Breast Milk Bank (HKBMB) Dr Rosanna Wong. Recognising that some mothers struggle to produce breast milk or have an insufficient supply, the HKBMB has been established to provide quality breast milk to needy infants. "Breast milk donation is the best gift for preterm infants. It can save their lives," Dr Wong explains.

Therapeutic effects of breast milk

The gastrointestinal tract of preterm infants is not fully developed, resulting in poorer digestion than full-term infants. Easily digestible and absorptive breast milk therefore becomes their vital nutrition and medical support. "It is not uncommon for preterm infants to develop necrotising enterocolitis," explains Dr Wong. "Surgery may be needed to remove the affected bowel, which may lead to short bowel syndrome. In severe cases, it could be life-threatening. Breast milk not only boosts babies' immunity, but also reduces the risk of infection and enhances their chance of survival."

Not every mother is able to breastfeed. "Mothers feel worried to see their newborns admitted to the NICU. Not being able to stay close to them also makes breast milk production more

challenging," Dr Wong says. "Many mothers are unable to breastfeed because of mental stress or their own physical condition."

Higher breastfeeding rate boosts breast milk donation

Dr Wong recalls that shortly after the Hong Kong Children's Hospital opened, a baby with necrotising enterocolitis was admitted. The mother was emotionally distressed and unable to breastfeed. However, after the baby underwent surgery and began to recover, she started to produce more breast milk with nurses' support. Delighted to learn about the establishment of the HKBMB, she offered support to comfort other NICU mothers and promote breast milk donation. Dr Wong found this gesture deeply moving.

"The biggest challenge of breast milk donation is that the breastfeeding rate in Hong Kong is relatively low, making it harder to recruit mothers with surplus milk to donate," Dr Wong reflects. "I am grateful to our excellent team, which includes nurses from obstetrics and paediatrics, as well as colleagues from maternal and child health centres. We are all working together to promote breast milk donation. I hope our efforts will increase the breastfeeding rate, which will directly benefit the HKBMB."

The HKBMB began receiving donations in January and, in the second phase of the launch, is expected to start providing donor breast milk to preterm and critically ill infants by March, contingent on sufficient donations.

誰人合資格接受捐贈母乳？Who are eligible for receiving donor breast milk?

1. 懷孕不足 32 周出生的早產嬰兒
Infants born at less than 32 weeks' gestation
2. 出生體重低於 1,500 克的嬰兒
Infants with a birth weight of less than 1,500 grams
3. 因接受內科或外科治療而需要捐贈母乳的嬰兒
Infants with medical or surgical conditions that require donor breast milk
4. 經 NICU 主管人員評估為有需要的嬰兒
Infants at the discretion of the NICU team head



滴滴母愛 母乳媽媽守護早产嬰

Guarding premature babies by drops of donors' motherly love



阿馥：母乳滴滴珍貴

Katrina: Every drip of breast milk is precious

阿馥剛為人母三個月，跟很多新手媽媽一樣，受荷爾蒙變化影響，不時情緒低落、焦慮，動輒將女兒的健康問題歸咎於自己。自女兒出生以來，她一直盡力泵奶，希望提供最好營養予女兒，試過因奶量一度下跌令她感到絕望，「女兒本身是全母乳餵哺，因為不想女兒飲奶粉，某夜凌晨起床泵奶後，自己望著奶樽默默流淚。」

幸而這段低潮期僅歷數日，她透過頻繁泵奶，刺激奶水分泌，母乳量隨日子逐漸增加。至今每日餵哺女兒後，仍可儲下數百毫升母乳，儲下來的母乳已放滿一個容量20公升的小冰箱和家中雪櫃的一格格，「但我到現在仍然珍惜每一滴母乳，即使泵奶器只餘少量乳汁都倒進奶袋，每一滴均是如此珍貴，不想浪費！」阿馥說。

阿馥從屯門醫院母乳小組護士得知香港母乳庫成立，當她儲藏一定母乳量後，便主動致電母乳庫，登記成為首批捐贈者。



有些媽媽沒有足夠的母乳，有我們其他媽媽 support (支持) 她們，所以請她們不要灰心。

Some mothers may struggle to provide sufficient breast milk for their babies, but we other mothers are here to support them. So, please do not feel discouraged.

Like many new mothers, Katrina, who has just become a mother for three months, often experienced low mood and anxiety due to hormonal changes, blaming herself for her daughter's health issues. Since her daughter's birth, she has been tirelessly pumping milk, aiming to provide the best nutrition for her daughter. She recounted moments of despair when her milk supply suddenly dropped. "My daughter had been exclusively breastfed, and I was so upset at the thought of switching to formula abruptly. One night, I woke up to pump milk and tearfully watched the milk flow into the bottle," Katrina recalls.

Luckily, this period lasted only a few days. Through frequent pumping to stimulate milk production, her breast milk volume gradually increased. After feeding her daughter daily, she can store hundreds of millilitres of breast milk, which has filled up a 20-litre mini refrigerator and a freezer compartment in her home fridge. "But I still cherish every drip of breast milk. After pumping, I carefully collect every last drip in the milk bag. Each drip is so precious, I do not want to waste it!" says Katrina.

Katrina learnt about the establishment of HKBMB from nurses of the breastfeeding team at Tuen Mun Hospital. After accumulating a considerable amount of breast milk, she proactively registered with the milk bank to become the first batch of donors.



阿馥為給女兒最佳營養，花盡心機增加母乳量。

To provide the best nutrition for her daughter, Katrina has dedicated herself to increasing her breast milk supply.

香

港母乳庫於今年1月啟用，首批登記捐贈母乳的三位媽媽阿馥、Yoyo 和 Yan 懷著「不獨子其子」的大愛，透過捐贈母乳，將母愛與祝福分享給有需要的寶寶，守護脆弱小生命茁壯成長。



Yoyo：生命來之不易

Life doesn't come easy

昔日的流產經歷，加上生女兒歷盡艱辛，令 Yoyo 感嘆「生命實在來之不易」。首兩個寶寶分別在孕期第六周和第四個月時不幸夭折，她努力懷上第三胎同樣吃盡苦頭，10個月來吃不下飯，瘦了30磅，一度懷疑無法繼續懷孕。在醫護人員的悉心照料下，Yoyo 終誕下一名足月女嬰，現已八個月大。

Yoyo 表示，多得廣華醫院護士的母乳餵哺指導，她順利上奶，女兒亦吃不完儲備的母乳。既然自己有能力，就決心捐出母乳幫助其他有需要的嬰兒。「生命很寶貴，我兩個孩子都無緣來到世上，早产嬰兒這麼困難和努力才可出生，我雖然不懂醫治他們，但分享食物我做得得到，所以我一定會捐！」她還積極將母乳庫成立的消息轉發至社交媒體和媽媽群組，希望有更多媽媽響應捐乳。



在登記成為母乳捐贈者前，她一直有分享母乳給同事的女兒，估計約有100公升母乳。對 Yoyo 來說，日後分享母乳增添多重意義，「我會更加堅持泵奶，每泵一次，不單止是我的女兒，還有更多其他小朋友可以受惠。」

每一個生命均值得被珍惜，祝福他們健康喜樂地成長。即使我們未必有緣相見，但我們都會愛護、守護他們成長。

Every life deserves to be cherished. I wish the babies health and joy as they grow. Even if we may not meet, we will love them and protect their growth.

The HKBMB has been opened in January this year. The three registered milk donors in first batch, Katrina, Yoyo, and Yan, embody a profound love of "caring for others' children as her own." Through donating breast milk, they hope to share maternal love and blessings with babies in need, and guard the fragile young lives to grow up strong and healthy.

Having experienced miscarriages and challenges in giving birth to her baby girl, Yoyo reflects that "life doesn't come easy." Her first two babies were tragically gone at the sixth week and fourth month of pregnancy. Similarly, carrying her third child was a struggle, during which she could not eat well for ten months, resulting in a 30-pound weight loss. She doubted her ability to continue the pregnancy. With the attentive care of medical staff, Yoyo was able to deliver a full-term baby girl, who is now eight months old.

Yoyo is grateful for the breastfeeding guidance she received from the nurses at Kwong Wah Hospital after her delivery. Having a surplus of milk that her daughter cannot finish, she determined to donate breast milk to help other babies in need. "Life is precious. Both of my babies never made it into this world. Preterm babies require such effort and struggle to be born. Although I cannot cure them medically, I can share food with them. So, I will definitely donate!" She actively shared the news of the establishment of HKBMB on social media and mum social groups, hoping to inspire more mothers to donate.

Before registering as a breast milk donor, she had been sharing her breast milk with her colleagues' daughter, estimating that she had given away about 100 litres of breast milk. For Yoyo, sharing breast milk in the future carries multiple meanings. "I will persist in pumping milk. Each pump is not only for my daughter but also for many other kids who can benefit."



一袋袋母乳放滿 Yoyo 家中的冰箱。

Bags of breastmilk fill the fridge at Yoyo's home.





Yan: 過來人感同身受 Shares the feeling of mothers with preterm babies

早產兒媽媽的痛心和無助，Yan 最能感同身受。去年9月，Yan 在懷孕26周時突出現宮縮陣痛，挨過10多小時的痛楚後誕下一對仔仔。兩兄弟出生時僅重約1公斤，須在NICU留醫。她憶述生產翌日首次去探望兒子，「看見他們躺在保溫箱中，幼小身軀插滿喉管，倍覺傷心，眼淚不其然流下來。」

仔仔需要使用胃喉餵食，Yan 日復日堅持泵奶、送奶到醫院。近三個月後，兩兄弟順利增磅至2.77和2.59公斤，Yan 深信：「他們的體重不斷上升，一定是我的母乳發揮力量，他們營養吸收得好！」

Yan 現時每日擠出逾千毫升母乳，遠遠多於仔仔的食量，儲下數公升的母乳；又眼見部分 NICU 院友媽媽，用盡方法「谷奶」都無充足奶水供應給自己的寶寶，因而陷入自責，Yan 早有捐贈的念頭，卻不敢付諸實行。她理解早產嬰媽媽對私人捐贈母乳有衛生和安全的憂慮，故當得知將會成立母乳庫，她毫不猶豫登記成為捐贈者，希望循可靠途徑與人分享母乳。



Yan 深信，母乳供給仔仔最好的營養和抗體，使他們體重穩定上升。

Yan believes that breast milk provides the best nutrition and antibodies for her twins, enabling them to gain weight steadily.



Yan deeply empathises with the heartache and helplessness of mothers of premature babies. In September last year, at 26 weeks of pregnancy, Yan experienced sudden contractions and delivered a pair of twin boys after enduring more than ten hours of labour pains. The brothers weighed only about one kilogram at birth and required care in the NICU. When she first visited her sons the day after giving birth, "seeing them lying in the incubator with tubes all over their tiny bodies, I felt heartbroken and tears flowed uncontrollably," Yan recalls.

Despite the twins needing gastric tube feeding, Yan diligently expressed milk every day and delivered it to the hospital. After nearly three months, the twin brothers successfully gained weight to 2.77 and 2.59 kilograms, leading Yan to believe, "their weight gain can surely be attributed to the power of my breast milk. They are absorbing nutrients well!"

At present, Yan pumps over a thousand millilitres of breast milk a day, far exceeding the twins' consumption. She has stored several litres of breast milk. Witnessing some NICU mums who exhausted all means to increase breast milk supply for their babies without success and blamed themselves, Yan had thought about donating her milk. However, she was hesitant to act. She understands that mothers of premature babies are concerned about hygiene and safety in private milk sharing. When Yan heard about the upcoming HKBMB, she promptly registered as a donor to share breast milk through a reliable channel.

加油！母乳是 BB 最好的食物，讓他們能夠完全吸收營養，希望我的母乳幫到你們。

Hang in there! Breast milk is the best food for babies. Let them absorb nutrients completely. I hope my breast milk helps you.



母乳餵哺冷知識 Breastfeeding at a glance

母乳含有嬰兒所需的各種營養和成分，包括天然抗體、活免疫細胞、酵素、奧米加3脂肪酸等，可增強免疫力，支持寶寶健康成長。

Breast milk contains a wide range of nutrients and components that babies need, including natural antibodies, living immune cells, enzymes and omega-3 fatty acids, which enhance immunity and support healthy growth of babies.

推廣母乳餵哺至接近全面普及水平，全球每年可挽救逾

82萬名兒童的生命

Over 820,000 children's lives worldwide could be saved each year by scaling up breastfeeding to a near universal level

母乳餵哺可令初生嬰兒患上腹瀉的機率

減少**50%**

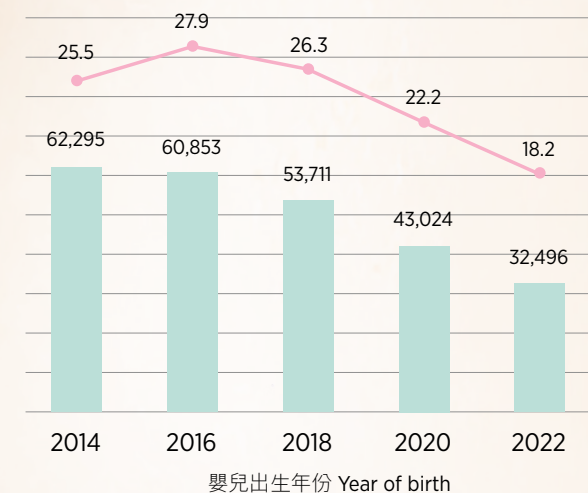
Diarrhoea episodes could be avoided by 50% by breastfeeding

女性每進行12個月的母乳餵哺，患入侵性乳腺癌的風險就會

降低**4.3%**

For every 12 months of breastfeeding, a woman's risk of invasive breast cancer was reduced by 4.3%

香港全母乳餵哺率 Exclusive breastfeeding rate in Hong Kong



公立及私家產科醫院的嬰兒人數 (名)
Number of infants at hospital discharge

全母乳餵哺至嬰兒六個月大的比率 (%)
Exclusive breastfeeding rate of infants at 6 months of age (%)

資料來源：衛生署
Source: Department of Health



母乳捐贈流程 The journey of breast milk donation

1. 捐贈者篩選 Donor screening

有意捐贈母乳者需通過篩查，主要涉及三個步驟：

Mothers who are interested in donating breast milk must undergo a three-step screening process:

- 填寫健康問卷：提供病歷和生活習慣等資料

Complete health questionnaire: This includes providing information about medical history and lifestyle habits

- 面談：與護士進行健康篩查面談

Interview: A face-to-face health screening interview conducted by nurse

- 驗血檢查：接受驗血以篩查傳染性疾病，此後每三個月定期檢查，以繼續捐贈母乳

Blood testing: A blood test to screen for infectious diseases. Regular blood tests will be required every three months to continue donating breast milk



2. 收集與儲存母乳 Collect and store breast milk

合資格的捐贈者會收到有關母乳收集及安全儲存的指引，並獲分發儲存母乳容器，如奶瓶或奶袋；她們亦可選擇使用市面有售的食品級且不含雙酚 A 的儲奶袋。母乳需一直保持冷藏，並且與其他食物分開存放，保存時間不超過 10 周。

Eligible donors will receive instructions on how to collect and safely store their breast milk. They will be provided with storage containers, such as bottles or bags. They may also choose to use commercially available food-grade and Bisphenol A-free storage bags. Breast milk must be kept frozen at all times and stored separately from other food items for up to 10 weeks.



3. 母乳運送安排 Delivery arrangements

指定速遞公司上門收取母乳，運送期間會監控溫度。如捐贈者選擇親自將冷藏母乳送至母乳庫，可提前聯絡職員安排及協助。

A designated courier service will be arranged to collect the breast milk directly from the donor's home, with proper temperature control and monitoring throughout the transportation process. Alternatively, if the donor chooses to personally deliver the frozen milk to the HKBMB, they can contact the staff in advance for assistance and arrangements.

4. 在母乳庫經嚴格處理 Processed in HKBMB with a robust system

嚴格控制溫度 Under precise temperature control

母乳送抵母乳庫後，會存放在攝氏零下 20 度的冷藏櫃。

Upon arrival at the HKBMB, donor milk is stored in refrigerator at a temperature of -20°C.



巴士德消毒 Pasteurisation

固態母乳經處理還原為液態後，需進行巴士德消毒，以特定溫度和時間加熱，殺死細菌和病毒，同時可保留母乳中大部分獨特的營養和成分，如免疫因子。

Processed solid donor milk is returned to liquid form before undergoing pasteurisation. Pasteurisation involves heating the breast milk to a specific temperature for a set period of time to eliminate bacteria and viruses. Most of the unique nutrients and components in the breast milk, such as immunological factors, are preserved to ensure its nutritional and protective benefits.

微生物測試 Microbiological testing

在消毒過程前後，化驗師會為母乳進行微生物測試，確保安全。

Laboratory staff perform microbiological testing on the donor milk both before and after pasteurisation to ensure its safety and quality.

營養檢測 Nutritional analysis

化驗師會檢驗母乳樣本，監測其營養成分，包括碳水化合物、脂肪等，作為分發母乳時的參考依據，配合嬰兒所需。

Donor milk samples are analysed to monitor their nutritional content, including carbohydrates and fats. These results are used as a reference when distributing the milk to meet the nutritional needs of babies.



5. 母乳配發 Distribution of donor milk

符合標準的捐贈母乳將被分配到新生兒深切治療部，根據兒科醫生的評估，處方予有需要的嬰兒。

Donor milk that meets the required standards will be distributed to NICUs. It will be prescribed by paediatricians to babies in need, based on medical assessment.



全程追蹤 Full traceability

母乳庫嚴格遵循國際標準，從收集、多重處理程序，直至最終交付至嬰兒，每個環節都對捐贈母乳進行密切追蹤，確保全程均可追溯。

HKBMB strictly adheres to international standards to ensure that donor milk is closely tracked at every stage—from collection and multiple processing steps to final delivery to infants. This meticulous tracking system ensures full traceability.

注意事項 Points to Note

- 捐贈母乳純屬自願及無償
Breast milk donation is voluntary and without remuneration
- 所有捐贈者資料均會保密
All donor information is kept strictly confidential
- 母乳庫為每位捐贈者提供母乳餵哺支援
Breastfeeding support will be provided to every donor by the HKBMB
- 母乳庫收到的捐贈母乳一概不會退還
All breast milk donated to the HKBMB will not be returned

低場磁力共振 加快診治急性中風

**LOW-FIELD MRI AIDS IN
TREATING ACUTE STROKE**

馬師浩醫生稱，低場 MRI 同樣有助診斷臨床徵狀不明顯的中風個案，使病人及時獲得適切治療。

Dr Ma Sze-ho points out that low-field MRI can also help diagnose stroke cases with insignificant clinical symptoms, enabling patients to receive timely and appropriate treatment.



急性中風千鈞一髮，若未能及早醫治，嚴重者可導致半身不遂、永久殘障，甚至死亡。威爾斯親王醫院（威院）去年引入低場磁力共振影像（MRI）儀器，加快診斷急性中風，力保病人倖免於下半生癱瘓在床。威院內科及藥物治療學系副顧問醫生馬師浩稱：「病人從見醫生、做初步檢查、影像掃描到治療，都在同一間房、同一張病床上完成，除了減省不必要的病人運送，整個流程亦有望縮短至 20 分鐘內完成。」

急性中風可分為缺血性中風及出血性中風，會令腦組織不能得到充分的養料和氧氣，每分鐘多達 200 萬個腦細胞壞死，繼而影響患者日後的活動和語言能力。全港每年有逾萬宗急性中風入院個案，當中八成屬缺血性中風，假如能夠把握黃金搶救期，即病人於病發四小時內接受溶栓治療，「每早一分鐘暢通堵塞的血管，減慢腦死的過程，病人日後復康之路就越容易行。」馬醫生說。

目前疑似急性中風病人送抵急症室後，需在院內不同地方進行一系列的臨床評估和檢查，包括電腦掃描，到病人確診為急性中風，並進行治療，整個過程平均需時 66 分鐘。

革新診治睡醒中風病人

威院引入嶄新低場 MRI 儀器，加快急性中風的診治流程。馬醫生解釋，MRI 影像掃描能提供清晰腦部影像，提高診症準

確度。低場 MRI 亦較傳統 MRI 具有多項優勢，其佔地較小，可靈活擺放，毋須安裝在配置特殊屏蔽設施的獨立房間；其低磁場的特性，使掃描腦部所需時間由原本約 30 至 40 分鐘，大減至僅三至五分鐘。低場 MRI 儀器現時放置於威院急症室的緊急中風診斷及治療室，疑似急性中風病人一抵院便直達此室診治，至 12 月中已處理 45 宗個案，「診斷成功率高達 100%！」

去年 12 月初，71 歲的鄭伯伯一朝醒來發現自己右半身乏力、行動困難，家人召喚救護車將他送到威院，經使用低場 MRI 儀器作腦部掃描後，醫生診斷他為缺血性中風，幸仍處於黃金搶救期，即時為他注射溶栓藥物。「整個治療過程很順暢，沒料到這麼快完成，很感激各位醫護人員努力醫治我。」鄭伯伯憶述。

馬醫生指以鄭伯伯為例，他在前一晚 12 時入睡未見異樣，翌日 7 時起床發現中風，即屬睡醒中風。按平常做法，會假設他已錯過黃金四小時，不符合作溶栓治療的條件。低場 MRI 可助醫生加快確認病人實際病發時間，及時用藥，提高康復成效，革新診治睡醒中風病人。鄭伯伯為腦幹中風，原大有機會半身癱瘓，幸及時獲得診治，經約一星期的預後治療，活動能力已大有改善。

Time is brain. Without immediate intervention, acute stroke potentially results in hemiplegia, permanent disability, and even fatality. Last year, Prince of Wales Hospital (PWH) introduced a low-field magnetic resonance imaging (MRI) scanner to expedite the diagnosis of acute stroke, ensuring patients are spared from a lifetime of paralysis. “From seeing the doctor, undergoing initial assessments, imaging scans to treatment, all are done on the same bed and in the same room, reducing unnecessary patient transfers. The entire process is expected to be shortened and completed within 20 minutes,” states PWH Department of Medicine and Therapeutics Associate Consultant Dr Ma Sze-ho.

Acute stroke can be categorised into ischemic and hemorrhagic strokes. Both of which will deprive brain tissues of adequate nutrients and oxygen, leading to the necrosis of two million brain cells every minute, which in turn will affect the patient's future mobility and ability to communicate. With over 10,000 acute stroke admissions annually in Hong Kong, 80% of which are ischemic strokes. If such patients can seize the golden opportunity to receive thrombolytic therapy within four hours of the onset, “every minute earlier to unclog and restore the blood flow of brain, slowing down the brain's death process, the easier the path of recovery for the patient,” Dr Ma says.

Currently, suspected acute stroke patients arriving at the accident & emergency (A&E) department undergo a series of clinical assessments and tests at various locations within the hospital, including computed tomography (CT) scans. The entire process from admission to confirmed diagnosis of acute stroke and commencement of treatment takes an average of 66 minutes.

Transforming the diagnosis and treatment for wake-up stroke patients

The introduction of new low-field MRI scanner has accelerated the diagnostic and treatment process of acute stroke at PWH. Dr Ma explains that MRI scans provide clear brain images and enhance diagnostic accuracy. Low-field MRI offers several advantages over traditional MRI, requiring less space, eliminating the need for installation in specially shielded rooms, and allowing for flexible placement. Additionally, its low magnetic field characteristic reduces the time required for brain scans from approximately 30 to 40 minutes to just three to five minutes. The low-field MRI scanner is now placed in the

Emergency Stroke Unit at PWH's A&E, where suspected acute stroke patients are promptly directed to the room upon arrival. PWH has successfully handled 45 cases as of mid-December, with a 100% success rate in diagnosis.

In early December last year, Mr Kwong, aged 71, woke up with weakness on his right side and difficulty walking. His family called an ambulance, rushing him to PWH, where a low-field MRI brain scan revealed an ischemic stroke. Still within the golden treatment window, he was immediately given a thrombolytic injection. “The entire treatment process went smoothly, and I never expected it to be completed so quickly. I am grateful to all the healthcare professionals for their diligent efforts in treating me,” Mr Kwong recalls.

Dr Ma takes Mr Kwong as an example, he displayed no unusual symptoms before going to bed at midnight but woke up at 7am with stroke symptoms, which is a typical case of wake-up stroke. According to the usual practice, it would have been assumed that he had already missed the golden four-hour window for thrombolytic therapy. Low-field MRI enables doctors to pinpoint the actual onset time of the stroke, administer timely medication, thereby facilitating better recovery outcomes for patients. It has transformed the diagnosis and treatment for wake-up stroke patients. Diagnosed with a brain stem stroke, Mr Kwong was at high risk of hemiplegia. Fortunately, he received timely treatment. After around a week of prognosis, his mobility had significantly improved.



病人鄭伯伯（右）在威院留醫四日後，獲安排轉送沙田醫院繼續復康治療，有威院醫生定期到院跟進其病情。

Patient Mr Kwong (right) was transferred to Shatin Hospital for further rehabilitation treatment four days after his admission to PWH, with regular visits by PWH doctors to follow up his medical condition.

引入磁波刀治原發性震顫

**TREMOR TREATMENT OFFERS STEADY FUTURE
FOR PATIENTS WITH UNCONTROLLABLE SHAKING**

病人在接受磁波刀治療時保持清醒，醫生會請他畫圈或畫線，以評估手震是否即時改善。

Patients remain awake during the MRgFUS procedure and doctors ask them to draw lines or circles during surgery to assess if their tremors have stopped.

陳先生患有原發性震顫，長年飽受手震困擾，寫字、觸控電話螢幕或端水杯等日常動作，都變得困難重重。他憶述：「有次在快餐店取餐，捧著餐盤的雙手不停發抖，才走了數步，餐盤上的飲料就倒了出來。」由於擔心開腦手術的風險，他選擇服藥減輕病情。隨著醫院管理局（醫管局）引入全港首個「磁波刀」儀器，他上月在屯門醫院接受治療，並認為過程相對安全，無須開刀或植入裝置。治療後，他的左手顫抖即時消失，令日常生活質素得以改善。



屯門醫院腦神經外科副顧問醫生**何文傑**表示，原發性震顫徵狀包括手震，頭部或聲線顫抖，「這些症狀雖不危及生命，卻會嚴重影響病人的生活，例如病人因手震無法簽名、刷牙或刮鬍子等。」

「磁波刀」治療系統設置在屯門醫院神經醫學中心，為原發性震顫患者提供新的治療選擇。何醫生解釋，磁波刀結合磁力共振和超聲波技術，透過聚焦最多1,024個超聲波束，穿過頭皮及頭骨，精準地消融丘腦內的靶點，「治療過程毋須開刀，磁波刀的『刀』實際上是指在腦內消融直徑數毫米的靶點。」治療前，病人需進行電腦掃描作頭骨密度評估，以確保符合特定標準，「若頭骨密度不太平均，超聲波束會反射，無法穿透以達到最佳治療效果。」此外，如病人體內有與磁力共振不相容的裝置或患有幽閉恐懼症，也不適合接受磁波刀治療。

病人手震即時消失

治療當天，病人需剃光頭髮，接受局部麻醉，並以頭釘及頭架固定頭部位置。在進行永久消融前，醫生會先以低溫和中溫進行機器及臨床測試，同時利用實時磁力共振監察病人腦內溫度，以確保超聲波束精準聚焦在靶點，並達到最佳溫度，減低其他腦部組織的損傷。「病人在過程中保持清醒，我們會請他畫圈、畫線，以評估手震是否即時改善，並確認身體是否出現副作用。」何醫生表示，病人在治療時會見證手部顫抖突然停止的瞬間，這對他們來說是一個非常高興及難忘的時刻。

醫管局神經外科統籌委員會主席**陳達明**醫生稱，這次成功引入磁波刀儀器，是醫管局全體成員包括總辦事處、內科統籌委員會、放射科統籌委員會，以及各醫院聯網共同合作的成果，全港公立醫院的原發性震顫病人均可在屯門醫院接受磁波刀治療。他稱計劃逐步增加治療人數，預計兩年後每年能治療約30名患者。

陳醫生期望磁波刀能用於治療不同疾病，如帕金森症，並正等待美國食品及藥物管理局批准使用磁波刀治療肌張力障礙，「醫管局服務將持續與時並進，相信未來能幫助更多病人改善生活質素。」

Mr Chan suffered from essential tremor – a condition that can lead to uncontrollable shaking of the hands – for years, making simple daily tasks such as writing, using a smartphone, or holding a cup of water extremely difficult. “On one occasion, I picked up my meal at a fast-food restaurant and my hands were shaking uncontrollably as I held the tray,” he recalls. “After just a few steps, the drink on my tray spilled.” Concerned about the risks associated with open-brain surgery, he opted for medication to reduce his tremor. However, when Hong Kong’s first magnetic resonance-guided focused ultrasound (MRgFUS) service was introduced by the Hospital Authority (HA), Mr Chan underwent treatment at Tuen Mun Hospital (TMH) in December 2024 as the procedure required no incisions or implants. Following the treatment, the tremor in his left hand disappeared immediately, improving his quality of life.

TMH Associate Consultant (Neurosurgery) Dr **Jason Ho** explains that the symptoms of essential tremor include trembling hands, head, or voice. “Although it is not life-threatening, it severely impacts patients’ daily lives. For example, some patients cannot sign their names, brush their teeth, or shave because of the tremors,” he says.

The MRgFUS system is located at TMH Neuroscience Centre, offers a new treatment option for patients with essential tremor. It combines magnetic resonance imaging (MRI) and focused ultrasound technologies, delivering up to 1,024 ultrasound beams through the scalp and skull to precisely ablate target areas. “The procedure is incisionless and the ablation targets area of a few millimetres in diameter in the brain,” says Dr Ho. Before treatment, patients undergo computed tomography (CT) scan to evaluate the skull density. “If the skull density is not very even, the ultrasound beams will reflect from and fail to penetrate the skull,” he notes. Patients with implants that are incompatible with MRI or those with claustrophobia are also not suitable for MRgFUS treatment.



陳先生接受磁波刀治療後，左手不再顫抖，能穩定地握杯倒水。

The tremor in Mr Chan’s left hand disappeared after MRgFUS treatment, and he can now hold a cup and pour water without shaking.

Tremors vanish even during surgery

On the day of treatment, patients must have their heads shaved, and fixed onto a frame with pins under local anaesthesia. Before performing the permanent ablation, doctors conduct low and medium temperature machine and clinical tests with assistance of real-time MRI to monitor the temperature in the brain. This helps ensure the ultrasound beams are accurately focused onto the target area with optimal temperature rise while other adjacent area is not involved. “During the procedure, patients remain awake. We ask them to draw circles or lines to assess whether their tremor improves immediately and to confirm they experience no side effects,” Dr Ho says. Patients would experience immediate cessation of their hand tremors during the procedure, which is a truly joyful and memorable moment for them, he adds.

Chairman of Coordinating Committee (COC) in Neurosurgery at the HA Dr **Danny Chan Tat-ming** states the introduction of the MRgFUS system was the result of collaboration across the HA, including the Head Office, COC in Internal Medicine, COC in Radiology and the hospital clusters. Patients with essential tremor from all public hospitals in Hong Kong can now receive MRgFUS treatment at TMH and the HA plans to gradually increase the number of patients treated annually to around 30 within two years.

Dr Chan hopes MRgFUS can be used to treat other conditions, such as Parkinson’s disease. Meanwhile, MRgFUS treatment for dystonia is currently pending approval by the United States Food and Drug Administration. “The HA will continue to keep pace with international developments. We believe that in the future, this technology will help more patients and improve their quality of life,” Dr Chan says.

醫管局神經外科統籌委員會主席**陳達明**醫生（前排左三）稱，委員會在五年前開始籌備引入全港首個磁波刀治療儀器，希望惠及更多病人。旁為前主席**張豐青**醫生（前排中）及委員。

Chairman of the Coordinating Committee in Neurosurgery at the HA Dr **Danny Chan Tat-ming** (front row, third from left) says the HA prepared the introduction of Hong Kong’s first MRgFUS system five years ago. Pictured alongside him are former Chairman Dr **Cheung Fung-ching** (front row, centre) and other committee members.

急症室醫生養寵物 「以毒攻毒」

AN A&E DOCTOR'S
FATAL PASSION FOR REPTILES

紅尾蚺「花生」被漁護署充公，交到香港兩棲及爬蟲協會，由黃凱峯醫生六年前領養。

Dr Wong Oi-fung adopted his red-tailed boa Peanut six years ago after it was confiscated by the AFCD and then handed over to the Hong Kong Society of Herpetology Foundation.

金庸筆下的西毒歐陽鋒，身邊常年帶著一條毒蛇，他從蛇身上獲得靈感，自創靈蛇拳與靈蛇杖法。北大嶼山醫院急症室顧問醫生**黃凱峯**對爬蟲類動物同感興趣，飼養了包括一條名為「花生」的紅尾蚺，以及有毒的希拉毒蜥。黃醫生雖不會武功，但他利用自己的知識幫助被蛇咬的市民，在晚間行山尋找毒蛇。

自上幼稚園前父母送他人生第一隻烏龜，黃醫生一直與爬蟲類形影不離，他現在一共養了一條蟒蛇、20隻蜥蜴包括希拉毒蜥、60隻烏龜及四隻鸚鵡。小時候他看紀錄片《生命之源》認識希拉毒蜥這種受保護動物，至今已養了幾代。

「飼養爬蟲類動物需要了解牠們的生態和習性，例如有些動物自外地輸入，溫度變化會對牠們的健康構成影響。」黃醫生坦言，不時會被自己所養的動物咬傷，他試過被希拉毒蜥咬傷手臂，登時紅腫疼痛，幸好一日後經已痊癒。

助海關人員「緝兇」

黃醫生笑言不是對飼養有毒動物「情有獨鍾」，而是對研究有毒動物咬人深感興趣，更會相約對蛇有認識的朋友，下班後一起到醫院附近行山，尋找不同品種的本地毒蛇。「很多市民行山時被毒蛇咬傷，或者被寵物蛇咬傷，我在這方面的知識和經驗有助加快治理病人。」

有一次，一名海關人員在檢查包裹時，被包裹內的毒蛇咬傷。漁農自然護理署（漁護署）職員初時以為是東南亞的毒

蛇，但黃醫生看過相片後，發現是來自非洲的毒蛇，毒性非常強，及時為海關人員提供正確治療。

北大嶼山醫院位處熱門行山地點附近，不時接收被蛇咬傷而到急症室的求診者。以前醫生都需要請教蛇類專家，以確定蛇是否有毒，至近10年，隨著他對蛇的認識加深，可自行處理個案。他又會將本地個案刊登在外國期刊，幫助其他醫護人員了解蛇的毒性。

飼養寵物有助黃醫生減壓，他更在牠們身上悟出做人道理：「雀鳥面對風雨來襲，只管昂首面對，牠教會我面對挑戰時不要逃避。」烏龜總有自己的節奏，對諸事處之泰然，「做人也是一樣，面對壓力要學會放鬆。」



養過眾多動物，黃醫生最喜歡烏龜，認為牠們善良且有韌力，他手中的是蛇頸龜。

Of all his pets, Dr Wong loves his turtles and tortoises the most, saying he finds them kind and resilient. Here, he holds a snake-necked turtle.

In Jin Yong's famous martial arts novels, the character Ouyang Feng – also known as Western Venom – often carries a venomous snake. He was inspired by the snake and incorporated the Spirit Snake Fist and Spirit Snake Staff techniques into his fighting repertoire. North Lantau Hospital (NLTH) Accident and Emergency (A&E) Department Consultant Dr **Wong Oi-fung** has a similar interest in reptiles and has pets including a red-tailed boa called Peanut and a collection of venomous lizards Gila monster. But rather than martial arts, he uses his expertise to identify cures for snake bite victims and goes hiking at night to identify venomous snakes in the hillside.

Since being given his first turtle by his parents before he began kindergarten, Dr Wong has had a lifelong passion for reptiles and currently keeps a python, 20 lizards including Gila monsters, and 60 turtles and tortoises, as well as four parrots. He learnt about Gila monsters as a child from the TV documentary *First Life* and went on to keep generations of the protected species.

“When you keep reptiles, you need to understand their ecology and habits,” Dr Wong explains. “For example, some reptiles are imported from overseas and changes in temperature can affect their health.” He has sometimes been bitten by his pets, once getting a painful bite from a Gila monster which left a red mark, but Dr Wong recovered within a day.

Identifying a lethal cargo

Dr Wong says he is not particularly interested in keeping venomous animals, but studying venomous animal bites

instead. He goes hiking near the hospital after work with friends familiar with snakes to seek out different species of indigenous snakes. “Many people get bitten by venomous snakes while hiking or by their own pet snakes,” he says “My knowledge and experience can provide immediate treatment for patients.”

On one occasion, a customs officer was bitten by venomous snakes while inspecting a package from overseas. Staff from the Agriculture, Fisheries and Conservation Department (AFCD) thought the snakes were from Southeast Asia, but Dr Wong examined the photos and discovered they were highly poisonous snake from Africa, giving the information needed for the customs officer to receive the correct management in time.

NLTH is located near popular hiking trails and its A&E receives snake bite cases from time to time. Previously, doctors had to consult snake experts to determine whether a snake was venomous but for the past decade, Dr Wong has been able to handle cases himself as his expertise has grown. He also publishes accounts of Hong Kong cases in foreign journals to help other healthcare professionals understand the toxicity of snakes.

Dr Wong's collection of animals and reptiles helps relieve stress and teaches him valuable lessons. “Birds face storms with their heads held high, teaching me to face challenges ahead,” he reflects. Turtles, on the other hand, take life at their own pace and respond calmly to everything. “Life for us is similar,” says Dr Wong. “When we have to deal with pressure, we must learn to relax.”



黃醫生特地租下一個農場飼養動物。

1. 酋長鳳頭鸚鵡 2. 亞達伯拉象龜
3. 希拉毒蜥 4. 盾臂陸龜

Dr Wong rents a farmhouse to house his collection of reptiles and animals.

1. Major Mitchell cockatoo
2. Aldabra giant tortoise
3. Gila monster 4. Geochelone sulcata



訪問短片
Interview video



蛇咬急救法
Management of
snake bite

拆解蜂螫過敏

A closer look at bee sting allergies

秋冬是行山好時節，惟本港近兩年都有人在郊外被蜜蜂螫中後不治。香港中毒控制中心平均每年錄得約100宗懷疑被昆蟲螫咬而到急症室求診的個案，大多數是被蜜蜂或黃蜂螫傷。大部分人被螫傷後徵狀輕微，皮膚會紅腫和疼痛；少數人會產生嚴重過敏反應，出現呼吸困難甚至休克，倘不及時處理，可能會有生命危險。

Autumn and winter are ideal seasons for hiking. However, in recent years, there have been fatal cases in Hong Kong involving individuals stung by bees in the countryside. The Hong Kong Poison Control Center (HKPCC) recorded an average of about 100 cases annually of suspected insect stings incidents attending the accident and emergency (A&E) departments, most commonly involving bee or wasp stings. While most people experience mild symptoms such as redness, swelling, and pain, a few may develop severe allergic reactions, including shortness of breath or even fainting, which can be life-threatening without prompt treatment.

徵狀 Symptoms:

被蜜蜂或黃蜂螫傷後的反應因人而異，傷口普遍會發紅、腫脹、疼痛和痕癢，徵狀會慢慢消退。部分人會在被螫後數分鐘出現過敏反應，一般徵狀為皮膚痕癢及出疹，嚴重患者會出現呼吸困難、血壓下降、作嘔、暈眩、休克，甚至死亡。假若遭受大量蜜蜂或黃蜂襲擊，毒素有可能會在體內累積，產生嚴重中毒反應，誘發心臟病或中風。

Reactions to bee or wasp stings may vary from person to person. Common symptoms include redness, swelling, pain, and itchy skin, which usually subside gradually over time. However, some individuals may develop allergic reactions within minutes after being stung, typically presented as itchy skin and rashes. Severe cases can present with shortness of breath, low blood pressure, nausea, dizziness, fainting, and even cardiac arrest. If a person is attacked by a large number of bees or wasps, the toxins may accumulate in the body, leading to severe poisoning that may trigger heart attack or stroke.

即時處理方法 Immediate treatment:

蜜蜂的尾針有倒鉤，螫人後，尾針會連同毒囊留在人的皮膚上。患者可用卡片或信用卡沿著皮膚刮出毒囊，或使用眉鉗拔出毒囊，不宜徒手強行將針拔出，以免擠出毒液。黃蜂的針沒有倒鉤，螫人後不會留在皮膚上。之後可以用清水清洗傷口，並塗上止痕藥膏。

Bees have barbed stingers that remain attached in the skin along with their venom sac after stinging. You can remove the stinger by gently scraping it out with a card, such as credit card, or using tweezers to pull it out. Avoid using your fingers to remove the stinger, as this may squeeze the venom into the skin. Wasps, on the other hand, do not have barbed stingers and thus will not leave their stingers behind. After a sting, you can wash the affected area with clean water and apply an anti-itch cream.

治療方法 Treatment options:

醫生會提供支援性治療，如有需要，會為病人注射抗敏感藥、類固醇或腎上腺素。如市民已知對蜂螫有嚴重過敏反應，可諮詢醫生處方俗稱急救筆的一次性便攜式腎上腺素自動注射器，在郊外被蚊叮蟲咬後，可即時向大腿外側注射腎上腺素，紓緩過敏徵狀，並立即報警求助。

Doctors will provide supportive treatment and may administer anti-allergy medicines, steroids, or adrenaline if necessary. Individuals who are known to have severe allergic reactions to bee or wasp stings should consult a doctor for a prescription of a disposable portable adrenaline auto-injector. In the event of a sting, they should use the auto-injector immediately by injecting adrenaline into the outer thigh to relieve the allergic symptoms, and report to the police for immediate assistance.



醫生可為有過敏病史的病人處方急救筆，以應對蚊叮蟲咬後的嚴重過敏反應。

Doctors can prescribe an adrenaline auto-injector for persons with a history of severe reactions caused by insect stings.



注意事項 Precautions:

郊遊時緊守行山禮儀，切勿騷擾動物、昆蟲或牠們的巢穴，避免觸摸植物。

It is important to follow proper outdoor etiquette when engaging in outdoor activities. Avoid disturbing animals, insects, or their nests, and refrain from touching plants.

部分人被蜜蜂螫後，皮膚出現水泡，變得紅腫。

Some people develop blisters and redness on their skin after being stung by bees.



注意蜜糖產地 防狂蜜病中毒



Be cautious of the source of honey to prevent mad honey poisoning

早前有市民進食由尼泊爾帶回港的蜜糖後狂蜜病中毒。香港中毒控制中心表示，一般花蜜並無毒性，但市民需留意出產自印度、尼泊爾和土耳其黑海地區的蜜糖，這些蜜糖在當地出售時，部分產品會宣稱具特殊保健作用，甚至被視為壯陽食品，錯誤進食這類蜜糖可能會引發狂蜜病中毒。狂蜜病中毒是由進食含桉木毒素的蜂蜜引起，桉木毒素是一種由杜鵑花科植物產生的神經毒素，可影響神經和肌肉。進食後會在短時間內出現噁心、嘔吐、肚瀉、頭暈、乏力、出汗、唾液分泌異常，嚴重患者會出現幻覺，甚至引致低血壓和心律下跌。中心建議患者在安全情況下躺下休息，並報警求助，急症科醫生會以抗膽鹼藥品阿托品治療，減輕徵狀。

Recently, a man suffered from mad honey poisoning after consuming a honey product brought from Nepal. HKPCC reminds the public that honey is generally non-toxic; however, we should pay attention to the honey originated from India, Nepal, and the Black Sea region of Turkey. Some honey products from these regions are marketed for its purported health benefits and is even considered as an aphrodisiac in local market. Accidental consumption of these honey products can result in mad honey poisoning. Mad honey poisoning is caused by consuming honey that contains grayanotoxin, a neurotoxin derived from plants in the rhododendron family, which can affect the nervous system and muscles. Symptoms can appear shortly after consumption and may include nausea, vomiting, diarrhea, dizziness, fatigue, sweating, and hypersalivation. Severe cases may result in hallucinations, low blood pressure, and bradycardia. HKPCC advises patients to lie down in a safe place and seek emergency medical assistance. A&E doctors would alleviate patients' symptoms by administering the anticholinergic drug atropine.

進食蜜糖要注意 What to note when consuming honey ?

- 1 購買前宜注意宣稱具特殊功效，特別在印度、尼泊爾和土耳其黑海地區出產的蜂蜜。
Before purchasing, be cautious of the honey claiming to have special effects, especially those produced in India, Nepal, and the Black Sea region of Turkey.
- 2 向可靠來源或信譽良好的養蜂場購入。
Buy honey from reliable sources or reputable apiaries.
- 3 所有蜜糖都有機會受肉毒桿菌孢子污染，一歲以下幼童不宜進食。
All honey has the potential being contaminated with Clostridium botulinum spores. Avoid feeding honey to infants under one year old.

中醫翹楚張樟進教授： 盼推動中西醫結合

Acupuncture expert Zhang Zhang-jin: aims to promote closer integration of Chinese and western medicine

張樟進教授小檔案 Profile of Professor Zhang Zhang-jin

- 香港大學中醫藥學院教授、醫院中醫服務及發展統籌
Professor and Coordinator of Chinese Medicine Service for Hospital and Development of the School of Chinese Medicine of HKU
 - 香港大學深圳醫院中醫部教研室主任
Chair of Department (COD), Department of Chinese Medicine, HKU-Shenzhen Hospital
 - 私家醫院中醫診所主管
Chief of Service (COS), Department of Chinese Medicine in a private hospital
- 人生格言：享受過程，不問結果。
Motto: Enjoy the process, regardless of the outcome.

張教授的研究領域包括針刺機制、中藥神經精神藥理等，曾發表 200 多篇相關論文。

Professor Zhang's research areas include acupuncture mechanisms and the neuropsychopharmacology of Chinese medicine. He has published more than 200 papers.

張樟進教授是首名擁有中醫專業背景的醫院管理局（醫管局）大會成員，他稱：「這一任命體現了政府、醫療界和醫管局對中醫發展的重視，令人鼓舞。」自 1990 年代起，張教授便致力研究中西醫結合治療神經系統各種疾患，尤其是心理精神疾病，是針灸中藥治療精神研究研究的先驅。他擁有豐富教學、臨床及科研經驗，現為香港大學（港大）中醫藥學院教授兼醫院中醫服務及發展統籌，期望發揮專業所長，推動醫管局中西醫結合，並探索將中醫專科納入公立醫院服務體系。

張教授在上海中醫藥大學本科畢業後，為進一步掌握現代生物醫學系統知識，遂入讀西安交通大學醫學院，專攻神經解剖學和神經科學，取得醫學碩士及博士學位。他於 1995 年赴美國工作，專注研究精神藥理學及臨床精神病學，「當時我研究以中醫治療精神病，並利用傳統方劑『加味逍遙散』治療抑鬱症，是國際上最早開展中醫治療精神障礙臨床研究，並逐步將中西醫知識結合起來。」

2006 年，張教授來港發展。他憶述當時與醫管局已有一些淵源。加入港大之初，他開展的首個臨床試驗是與九龍醫院精神科合作，研究新針刺方法「密集顳部電針刺激」改善抑鬱患者的病情。

張教授希望推動中醫藥在公立醫療系統中發揮作用，他指出：「針灸治療各種痛症是有充分的醫學實證支持、國際認可和被市民廣泛接受的療法，應盡早納入醫管局轄下的公立醫療系統。這不僅為醫生和患者提供多一個選擇，而且可大幅節省醫療開支。」張教授去年 4 月加入醫管局大會後，有更多機會了解醫管局的運作，他尤其關注醫管局在財政預算、人才吸納和新科技引進等方面的議題。

融會中醫生活哲學

中醫理念也深深地融入張教授的生活哲學中。他引用《黃帝內經》「聖人不治已病，治未病」，強調未病先防之重要。為此，他每周至少做兩次運動，紓緩壓力、強身健體。他尤其熱愛游泳，「記得有一次氣溫只有攝氏六度，幾乎是全年最寒冷，我也去泳灘游泳。」他還喜歡跑步，每年都會參加香港渣打馬拉松賽事，享受揮灑汗水的快樂。

張教授亦相信，樂觀心態是保持身心健康的關鍵，「不管是甚麼事情，我都會從正面看，就像半杯水的理論——『水已裝滿了半瓶』，而不是『水才裝滿了半瓶』。」

Professor Zhang Zhang-jin is the first Hospital Authority (HA) Board member to have a professional background in Chinese medicine. “My appointment reflects the commitment of the government, the medical sector, and the HA to the development of Chinese medicine, which greatly encourages me,” he reflects. Being a pioneer in the use of acupuncture and herbal medicine to treat psychiatric diseases, Professor Zhang has been dedicated to researching the integration of Chinese and western medicine for treating various brain disorders, in particular psychiatric diseases, since the 1990s. He has extensive experience in teaching, clinical practice, and research, and currently serves as a Professor and Coordinator of Chinese Medicine Service for Hospital and Development of the School of Chinese Medicine at the University of Hong Kong (HKU). He hopes to draw on his expertise to promote the integration of Chinese and western medicine practices within the HA and explore the possibility of establishing the speciality of Chinese medicine in public hospitals.



張教授擅長以針灸和中藥治療心理精神疾病及神經系統疾病。

Professor Zhang specialises in using acupuncture and Chinese medicine to treat neurological and psychiatric disorders.

After completing his undergraduate studies at Shanghai University of Traditional Chinese Medicine, Professor Zhang deepened his knowledge of western medicine by enrolling at the Xi'an Jiaotong University College of Medicine, specialising in neuroanatomy and neuroscience, where he earned his master's and doctoral degrees. In 1995, he moved to the United States, focusing on research in psychopharmacology and clinical psychiatry. “I was exploring ways to use Chinese medicine to treat psychiatric diseases, including the application of a traditional Chinese medicine formula to treat depression, gradually integrating knowledge of Chinese and western medicine,” he recalls.

Professor Zhang came to the HKU to further develop his career in 2006. He recalls he already had some connections with the HA at that time. His first clinical trial after joining the university was a joint study with the Department of Psychiatry

at Kowloon Hospital into a novel acupuncture method called dense cranial electroacupuncture stimulation, to treat patients with depressive disorder.

Harmonising medical and life philosophies

Professor Zhang hopes to promote a greater role for Chinese medicine within the healthcare system. “Acupuncture for pain management is an internationally recognised and extensively used therapy supported by medical scientific evidence,” he explains. “For instance, acupuncture is widely recognised to be effective in treating various pain disorders. It should be introduced into the HA public healthcare system. It not only provides an additional option for physicians and patients, but also will save medical cost for the public healthcare system.” Since joining the HA Board in April 2024, Professor Zhang has gained a deeper understanding of the HA's operations and has looked into issues such as financial challenges, talent recruitment, and the integration of new technologies.

The philosophy of Chinese medicine is also deeply embedded in Professor Zhang's approach to life. He quotes the ancient Chinese medicine text *Huangdi Neijing* which emphasises the importance of prevention in a passage stating: “The sage does not treat a disease that has already occurred but treats one that has yet to manifest.” He exercises at least twice a week to relieve stress and stay healthy and is a keen swimmer. “I remember once when the temperature was only six degrees Celsius – probably the coldest day of the year – I still went to the beach for a swim,” he recalls with a smile. He also enjoys running and takes part in the Standard Chartered Hong Kong Marathon every year. Professor Zhang believes that maintaining an optimistic attitude is the key to physical and mental wellbeing. “No matter what I encounter, I always try to look at it from a positive perspective – just like the glass-half-full theory,” he said. “For me, the glass is already half full, rather than only half full.”



張教授常帶同愛犬 Lucy 外出跑步。

Professor Zhang takes his beloved pet dog Lucy for running.

醫道有段故

The Inside Stories of
Hong Kong's Hospitals

東華東院95周年 古樸建築載創新思維

*TWEH's 95th anniversary:
A historic building with
a modern vision*

行政總監劉家獻醫生（中）讚東東同事充滿活力，具開放思維。旁為鄧小慧（右）、蕭淑儀（左）。

TWEH HCE Dr Lau Ka-hin (centre) with Tang Siu-wai (right) and Loretta Siu (left). Dr Lau says TWEH employees are energetic and open-minded.



東華東院（東東）位於銅鑼灣掃桿埔，環境清幽，創院95年來，大隱隱於市。前內科及復康科部門運作經理鄧小慧憶述初次踏進東東時，不禁心想：「原來這裡有一間醫院？」她於1986年加入東東，發現這座外觀古樸的醫院蘊藏新思維，「別看它外表古舊，其實內裡儀器先進；同事亦思維創新，勇於嘗試。」

自1990年代起，東東逐步轉型，發展復康專科包括胸肺科、腦內科、腦外科、心臟科及骨科等。鄧姑娘主動請纓，成為復康科的開荒牛，見證復康日間醫院於1999年成立。她稱，每當引入新服務，同事總能發揮小宇宙，以新冠疫情期間為例，同事支援北大嶼山醫院香港感染控制中心，體驗到「電子維生指數紀錄系統」有助提升效率，院方隨即成立小組推動系統推行，錄製短片、設計模擬應用練習，經過九個月的努力，成為首間全面應用該系統的復康醫院。

復康服務旨在幫助病人提升自理能力，從醫院回歸社會。鄧姑娘分享，一名少女在中一的暑假不幸罹患多發性硬化症，需依賴輪椅行動，學校曾建議她轉讀特殊學校。她的母親當時感到非常徬徨，鄧姑娘與復康團隊成員主動介入，與校方溝通，終為少女爭取升

讀原校，並繼續協助和鼓勵她進行復康，讓她有動力支撐下去。多年後，這位少女已能獨立生活，並找到了一份工作，生活安好。「東東不僅是一間醫院，更像是社區的朋友、友善的鄰居，為市民提供支持與幫助。」鄧姑娘道。

復康專科服務扎根地區，眼科發展同樣緊貼地區需求，1991年，東華三院盧家駒眼科醫療紀念中心落成。眼科部門運作經理蕭淑儀加入東東逾32年，初入職時正值眼科服務擴展時期。時至今日，眼科服務需求與日俱增。「港島東人口老化，越來越多病人需要眼科服務，因此，我們在2021年整合港島東醫院聯網服務，東東肩負聯網內八成的眼科專科門診服務及所有非緊急新症服務。」

蕭姑娘稱，眼科服務重視病人在手術前後的健康教育及溝通，教導他們自理。不少眼科病人需要定期覆診，「病人都與我們非常熟稔，會像朋友般聊天。」除了醫患間建立信任關係，蕭姑娘珍視的還有同事間的十足默契：「我們是一所小型醫院，如同家庭，每次推出新服務，大家總是齊心協力，一呼百應。」

該院行政總監劉家獻醫生稱，初到東東時便被這座有95年歷史的建築物吸引，其後發現這裡的同事不會給自己設限，勇於接受新事物，「同事都充滿活力、具開放思維，對新科技和服務充滿熱忱，致力將新科技融入日常運作。期盼東東繼續朝智慧醫院方面發展，為病人提供更優質的服務。」

東東在1970年代擴建手術室、化驗室及X光部。

TWEH expanded its operating rooms, laboratories, and X-ray department in the 1970s.

Nestling in a peaceful corner of So Kon Po in Causeway Bay, Tung Wah Eastern Hospital (TWEH) has a history spanning 95 years and the aura of a hidden gem amid the hustle and bustle of the city. Former Department Operations Manager of the Department of Medicine and Rehabilitation Tang Siu-wai recalls her first impression when she joined the hospital in 1986, saying: “I couldn’t help but think ‘Is there really a hospital here?’” She soon discovered a modern facility behind the hospital’s historic façade. “While the exterior may look old, the equipment inside is advanced, and my colleagues were innovative and bold in trying new ideas,” she says.

Since the 1990s, TWEH has undergone a gradual transformation and developed rehabilitation specialties, including pulmonary, neurology, neurosurgery, cardiology and orthopaedics. Tang volunteered to be a pioneer of the rehabilitation services and witnessed the establishment of the Rehabilitation Day Hospital in 1999. Whenever new services were introduced, she noted, her colleagues would rise to the challenge. During the COVID-19 epidemic, for instance, some colleagues supported the North Lantau Hospital Hong Kong Infection Control Centre and learnt how the electronic vital signs recording system (eVital) enhanced efficiency. The hospital immediately formed a task force to promote the system, producing videos and designing simulated training exercises. After nine months of effort, TWEH became the first rehabilitation hospital to fully adopt and apply the eVital system.

Rehabilitation services help patients regain their ability to look after themselves so they can reintegrate into society. Tang remembers a young patient in her first year of secondary school who was diagnosed with multiple sclerosis during her summer break and had to rely on a wheelchair for mobility. Her school suggested transferring her to special school, leaving her mother dismayed. Tang and her team contacted the school to discuss the situation and successfully ensured she was able to stay on in her school. They continued to provide the patient with rehabilitation support, giving her motivation to persevere. Years later, the young girl was able to live independently. She has found a job and now leads a healthy life. “TWEH is more than just a hospital,” Tang reflects. “It’s like a friend to the community – a caring neighbour who provides support and assistance to the public.”



東東在1950年代擴建門診部，圖為1959年前港督柏立基（左二）到訪參觀。

The hospital’s outpatient department was extended in the 1950s. Former Hong Kong Governor Sir Robert Black (second from left) paid a visit to TWEH in 1959.

Like its rehabilitation services, the hospital’s Ophthalmology Department also closely addresses the evolving needs of the community, the Tung Wah Group of Hospitals (TWGHs) Lo Ka Chow Memorial Ophthalmic Centre opened at the hospital in 1991. Department Operations Manager (Ophthalmology) Loretta Siu has been at TWEH for over 32 years and had just joined during a period of rapid expansion in ophthalmology services. Today, demand for those services is still growing. “With the ageing population in Hong Kong’s Eastern District, more and more patients require ophthalmology care,” Siu explains. “That’s why, in 2021, we integrated services across the Hong Kong East Cluster, TWEH managed 80% of ophthalmology specialist outpatient cases and all routine new cases in the cluster.” Ophthalmology services focus on patient education, particularly before and after surgery. Patients are taught how to care for themselves and many require regular follow-up appointments for treatment. “Patients become very familiar with us, and we often chat like friends,” Siu says. As well as the trust between patients and staff, Siu also values the strong camaraderie among colleagues. “We are a small hospital and we are like a family,” she says. “Every time we launch a new service, everyone works together with full dedication and enthusiasm.”

Hospital Chief Executive Dr Lau Ka-hin was drawn to the hospital’s architecture when he first arrived. He was then impressed by the enthusiasm of colleagues who work without limits and get with the programme. “TWEH colleagues are passionate and open-minded about incorporating new technologies and services into daily operations. Looking ahead, I hope TWEH will continue its journey toward a smart hospital, offering patients even better quality care,” says Dr Lau.



東華東院歷史印記

TWEH: A Historical Journey

從集善到東東

From Chap Sien Hospital to TWEH

東華醫院董事局在1920年代獲政府撥出掃桿埔用地興建新醫院，並將港島東坊眾籌款成立的集善醫院合併管理，命名為東華東院（東東）。東東在1929年開幕，秉承東華贈醫施藥的傳統，既有中藥局，亦提供西醫治療。

The Board of Tung Wah Hospital (TWH) was granted land in So Kon Po by the government in the 1920s to build a new hospital that would incorporate Chap Sien Hospital, a hospital funded by community fundraising in the Eastern District of Hong Kong. The new hospital was named Tung Wah Eastern Hospital (TWEH) and opened in 1929. It upheld the Tung Wah tradition of free health services and initially provided both a Chinese medicine dispensary and western medical services



設產科應對戰後嬰兒潮

Maternity services for a baby boom

東東發展脈絡與本港歷史息息相關。1941年，第二次世界大戰爆發，東東被徵用為戰時醫院，其後被日軍接管，停辦逾三年。戰後，東東重歸東華三院管理。為應付戰後出生的嬰兒潮，東東一度設產科服務。

The history of TWEH is intertwined with societal developments in Hong Kong. During the Second World War in 1941, the hospital was requisitioned as a wartime facility and was later taken over by the Japanese army, forcing it to suspend operations for more than three years. After the war, TWEH resumed operations under the management of the TWGHs and provided maternity services during the post-war baby boom.

培訓護士70載

Seven decades of nurse training

創院之初，東東已設護士學校，培訓註冊護士。1965年，東東及東華醫院的護士學校，合併入廣華醫院總校，稱為東華三院護士學校。東東培訓護士使命未完，1969年起提供兩年制登記護士課程，右圖為師生合照。課程至2001年完成歷史任務。

TWEH opened with a nursing school. In 1965, the nursing schools of TWEH and TWH were merged into a centralised campus at Kwong Wah Hospital, forming the TWGHs Nursing School. TWEH's mission to train nurses continued, however, and in 1969, it launched a two-year enrolled nurse training programme. This photograph shows the programme's graduates and the staff. The final cohort of student nurses graduated in 2001.



走進歷史建築

A walk-through history

歷經95年的時光，東東的外貌依然保留著昔日風貌與歷史韻味，更在2009年被評為二級歷史建築，讓我們一起細賞其建築特色：

TWEH's exterior has retained much of its original charm and character spanning almost a century. In 2009, the hospital was declared a Grade II historic building. Here are some of its distinctive architectural features:

弧形四翼

Curved four wings

東東採用西式建築風格，由知名建築師樓巴馬丹拿集團設計主座，並於1930年代擴建主座背部四翼，四翼之間以迴廊相連，整體呈扇形展開。

Designed by the renowned architectural firm Palmer and Turner Hong Kong, the hospital adopted a western style. In the 1930s, the main building was expanded with four interconnected wings at the rear, linked by corridors and arranged in a fan-shaped layout.



拱形頂窗

Arched windows

建築細節亦經過精心設計，頂樓樓窗採用拱門形，配合高樓底結構，兼具採光與通風效果。

The top floor windows feature an arched design, thoughtfully paired with high ceilings to make the most of natural light and ventilation.

病人專屬樓梯

Staircases for patients only

為滿足建院早年的公共衛生需求，騎樓外設置樓梯，作為傳染病患者的專用通道。

Staircases were installed outside verandas to address the public health needs of the time and provide dedicated access for patients with infectious diseases.



以東東命名的道路

A road named after TWEH

西營盤有醫院道，銅鑼灣則有以東華東院命名的東院道。一如其名，東院道是通往東華東院的主要道路，沿路有多間中小學，以及香港大球場。此外，東院道也是學車考牌的熱門路線。

Sai Ying Pun has Hospital Road, while Causeway Bay has Eastern Hospital Road, which is named after TWEH and is the main route to the hospital. The road is home to several schools and the Hong Kong Stadium and is also a popular route for learner drivers and driving tests.



訪問短片
Interview video

逾1,300跑手齊來續紛跑

Over 1,300 athletes completed 'HA Run & Fun'

醫院管理局（醫管局）續紛跑經已圓滿結束，超過1,300位跑手順利完成賽事。當日天公造美，開跑前一直天陰有雨，睇賽事鳴槍後，立即變得陽光明媚，跑手能一展身手，穿梭於機動遊戲中。醫管局續紛跑為醫管局慈善基金籌得逾173萬元善款，用嚟支持病人項目。賽後好多跑手都留低同家人朋友一齊嚟樂園玩，度過一個開心周日。

With the participation of over 1,300 athletes, the 'HA Run & Fun' went with a bang earlier. The day was blessed with good weather. It was cloudy and rainy, and became sunny right after the starting gun shot at the race. Runners were able to showcase their abilities, weaving through amusement rides. 'HA Run & Fun' has raised over HK\$1,730,000 for the Hospital Authority Charitable Foundation to support patient projects. Many athletes had a great weekend who stayed to enjoy the park's facilities with friends and family after the race.



精華短片
Highlights of the day



員工置業貸款計劃個案分享及最新安排

Enhanced HLISS case sharing and latest arrangement



九龍西醫院聯網一名駐院專科醫生與同任職醫管局醫生的妻子及女兒原本租住將軍澳一單位，一直打算置業。按家庭每月收入及首期預算，他們僅可負擔600多呎單位，在員工置業貸款計劃支持下，醫生成功購入900多呎單位（見圖），迎接小女兒出生。「既減輕首期負擔，又節省10多萬按揭保費。」另一位新界東醫院聯網顧問醫生則為按揭貸款轉按，減省總利息支出。該名醫生認為員工置業貸款計劃提供更優惠貸款條件，有助挽留人才。

員工置業貸款計劃最新安排：滿一年合資格服務可以申請；員工貸款還款期最長30年。首位獲批30年期員工貸款為一名總辦事處行政主任，以逾700萬元購入物業。「相比20年還款期，每月供款額現減少4,000至5,000元，減輕了還款壓力。」

A resident specialist from Kowloon West Cluster with his wife, who is also a doctor in Hospital Authority, and their daughter previously rented a flat in Tseung Kwan O, and had been planning to purchase a property. Based on their family's monthly income and down payment budget, they could only afford a flat of around 600 square feet. With the support of Enhanced HLISS, the doctor successfully purchased a flat of over 900 square feet (photo) to welcome his newborn daughter. "Not only reduced the down payment burden but also saved over HK\$100,000 in mortgage insurance premium." A consultant from the New Territories East Cluster refinanced the existing property through Enhanced HLISS, thereby reducing the total interest costs. The doctor reckons that Enhanced HLISS provides more favourable loan terms, which serves the purpose of talent retention.

Latest arrangement for Enhanced HLISS: Eligible staff may apply upon completing one-year qualifying service and enjoy the maximum Staff Loan tenor of 30 years. The first 30-year Staff Loan was granted to an executive officer from Head Office, who purchased a property for over HK\$7 million. "Compared to a 20-year repayment period, the monthly payment has reduced by HK\$4,000 to \$5,000, alleviating repayment pressure."



「蘭」食的病人餐

葵涌醫院行政總監阮家興與醫生經常說，院友最常問他的問題是「今日食咩呀？」對精神科病人來說，最好的復康治療就是受到一般人的看待，盡快回復正常生活。因此，葵涌醫院膳食部在設計餐單時，十分重視「家」的味道。

「做冬」、大年初一會加銼、節日有應節食品、生日要慶祝、愛心湯水糖水等等，最能帶出家的感覺。我們相繼推出節日餐單和食品，近年還新增西式節日餐單，加入甜品。院友縱使未能與家人歡度佳節，亦希望他們透過特別餐單感受到節日氣氛。最近我們還搞搞新意思，在院慶當日推出漢堡餐單。我們亦為有吞嚥問題的院友提供佳節糊餐，包括紅豆月餅、鴛鴦四寶糰及牛油曲奇等，讓院友品嚐到食物的真實味道之餘，更還原立體造型，食得又睇得。不得不提的是，每件節日食品都是由同事親手製作；還有醫院管治委員會主席及成員聯同醫院管理層，多次百忙中抽空到來一起參與製作食物，絕對誠意十足！

小朋友最喜歡外出用餐，兒童餐單就是以餐廳食物為藍本，讓小朋友在醫院都可以食到日式蛋包飯、沙嗲肉絲湯意粉、海鮮炒飯、吉列食物及叉燒等美食，目的是增加食慾，令他們更有力量戰勝病魔。一位患厭食症的小院友經常寫信給我，說兒童餐的款式及味道好好；雖然厭食，但她仍盡力吃光每一餐，後來她的體重終於達標了！

回想最初加入醫院工作時，對自己說過的一句話：「我的廚房不可以出難食的病人餐。」當推出新餐單，由「諗到」到「做到」的過程當中，已經有無數的運作問題需要解決，得到管理層支持可以「出到」，最後病人「食到」並表示滿意，就是最大的回報。食物有甜有鹹，是因為包含了製作者的笑與淚，希望院友收到葵涌醫院全院上下送上的心意，享受到不一樣的病人膳食。

張儉蘭
一級膳食經理
葵涌醫院行政部



每逢大時大節，膳食部都會製作正常版和軟餐版應節食品，讓病人感受節日氣氛。



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蛇靈 瑞獻

Welcome
the Year
of the Snake

在歡送龍年的同時，我們喜迎蛇年。蛇代表智慧、靈巧和幸運。醫院管理局總護理行政經理唐華根博士揮毫為《協力》讀者送上祝福，祝願大家新一年身心富足！

It is time to say goodbye to the Year of the Dragon and hello to the Year of the Snake. The snake symbolises wisdom, agility and good fortune in Chinese culture. Dr Danny Tong, Hospital Authority's Chief Manager of Nursing, has written a fai chun, wishing HASLink readers an abundant life in the coming year!

