Dear fellows members and associated members,

"...For the secret of the care of the patient is in caring for the patient", said Francis W. Peabody in 1925 in an address in Harvard Medical School. These words burned indelibly into the minds of many generations of medical students. In your practice, have you ever thought about the actual cares you delivered to your patients in the past, are delivering to them at present, and what they will receive in the future? Orthopaedics, is a branch of surgery, to save lives, save limbs and to restore function. With the rapidly changing world nowadays, does this statement still hold? Does the humanistic concepts embraced by Peabody remain alive?

I attended Annual Meeting of the American Society for Surgery of the Hand (ASSH) in San Francisco a few days ago. The theme of the meeting was "Education through Technology". It was my third time attending the international annual meeting in the States. This year, I was again fascinated by all the rich and inspiring program. Besides, I was much amazed by the much newer medical and surgical devices, treatment strategies, operating systems, surgical techniques, implants and prosthesis, which were of higher technology, complexity and sophistication. There were also many interesting lectures such as, "Your Digital Practice", "Utilizing iPhone and iPad Apps in a Hand Surgery Practice", "Cosmetic Rejuvenation of the Hand", "Regenerative Medicine Technologies for Nerve Injuries", and etc. Seemingly, the field of Orthopaedics is evolving in recent years. Modern orthopaedic and hand surgery developed as a consequence of the demand created by war injuries. Management of mutilating injuries of the limbs led to
the current concept of trauma care. The need for secondary reconstruction gave birth to the nowadays sophisticated reconstructive procedures in an attempt to return as near-normal function as possible. Nowadays, how many of you have treated war related injuries? How many of you have to handle major mutilating injuries? There is a worldwide changing in the disease pattern in the field. With an aging and older working population, disability from osteoarthrosis is getting more common. Sports-related injuries, whether acute or chronic, are of greater prevalence. Repetitive strain injuries, and newer terms such as Blackberry thumb, iPod finger, Gamer's thumb, Stylus finger and Emacs pinky etc, are becoming more popular and nuisances to many people. Better biologic medications made the number of rheumatoid hand and wrist procedures decreasing. Joint replacement, of newer designs and said to be more powerful and of higher durability, is now shifted from the group of patients with erosive arthropathy, to a group of patients with degenerative joint disease. And, the prosthetic replacement is applicable to almost any joint in our body. In the States, it is so common in the street to meet a person with more than 3 prosthesis in their body.

The disease pattern is changing, and the surroundings around us are also changing dramatically. Many scientific discoveries, medical advances, increasingly complex technologies, and information technologies, are emerging. In ASSH Meeting, I heard of many terms which I had never imagined they were currently belonged to the medical field and were so intimate to our daily practice....“Personal genomics”, a branch of genomics concerned with the sequencing and analysis of the genome of an individual, to determine the likelihood of trait expression and disease risk. “Crowd-sourcing”, a practice of obtaining ideas or information, by soliciting inputs from an online community, rather than from a traditional body, to help treating patients. “Molecular imaging”, a non-invasive manner to better understand the fundamental molecular pathways inside our body, in the help to treat diseases. “Mobile health”, a practice of medicine supported by mobile devices, to collect community and clinical health data, deliver healthcare information to practitioners, researchers, and patients, real-time monitoring of patient vital signs, and direct provision of care via mobile telemedicine. “Synthetic biology”, is the design and construction of biological devices and systems to treat diseases. “Systems medicine”, looks at the dynamic systems of the human body as part of an integrated whole, incorporates biochemical, physiological and environment interactions that sustain life. And also, digitalization of health records, robotics, artificial intelligence, nanotechnology, 3D printing technology and regenerative medicine, all are transforming the healthcare and in the hope to uplift the people. While the human living condition can be improved, the actual needs and demands of the patients are also changed. It is inevitably that patients’ demand and the advancing technology are competing with each other.

Nevertheless, there is not without problem with the present advances. With the paperless medical system, digitalization of health records and mobile health, doctor-patient interactions are altered. Patient can check their body condition, get their blood or other investigation results and e-medical advices through different apps and internet platform. Sometimes, the doctor-patient relationship is also drifted into a kind of doctor-client relationship. With the information and communication technology, decision of the choice of management, whether operated or not, what kind of operations, what types of external or internal prosthetic devices, is lead by the patients. Focus of some care-givers is also shifted. Medical care may have evolved from a profession to a business, with tremendous waste and unsustainable costs in futile researches, products packaging, promotion, unnecessary treatment, overdo preventive medicine and etc. Materialization on the part of care-giver appears to be a larger part in the patient care equation. Reliability of the “evidence based medicine” and confidence in the quality of a scientific method is also another problem. Ethical issues, such as that related to stem cell technology and genetic discrimination, a discrimination on the basis of information obtained from one's genome, by health insures or employers, and towards pre-symptomatic genetic testing of minors, are serious problems as well.

I hope, with advancing world and healthcare transformation, better care and outcomes at lower cost can be delivered to the patients, without any major trade-off. And, Peabody's concept is still vividly alive everyday.
Golf Day Result (18 Sep 2013)
Overall Champion: Dr Danny Tsoi
Best Gross Score: Dr Ho Ho Pak
Men Division
Champion: Dr Chak Hing Chung
1st runner-up: Dr Dicky Lam
2nd runner-up: Dr Albert Wong
Women Division
Champion: Ms Alice Cheng (spouse of Dr. Wong Man Shun)
1st runner-up: Mrs Fhronux Tsoi (spouse of Dr Danny Tsoi)

Our HKOA dragon boat team has won the HKMA Invitational Mini Dragon Boat Race cum David Fang Cup Silver Plate Championship on 18 August 2013!

Video link
Photo album

New Issue of JOTR is available online!
Please click to the following link to view the latest issue of Journal of Orthopaedics, Trauma and Rehabilitation: June 2013 (Volume 17, Issue 1): http://ejotr.org/current_issue.aspx

New website of Public Information Service (PIC)
The PIC of Hong Kong College of Orthopaedic Surgeons has been relocated to the following address: http://www.orthoinfo-hkcos.org

The 33rd Hong Kong Orthopaedic Association Annual Congress
"Defying the Aging Spine - Our Mission Continues"
Date: 23-24 Nov 2013
Venue: The Hong Kong Convention & Exhibition Centre

- Poster presentation schedule
- Poster presentation instructions
- Oral presentation instructions
- Award papers presentations
- Oral free papers presentation (in alphabetical order of authors)

AOTrauma Seminar-Paediatric Orthopaedic Challenge and Recent Advances
26-27 Oct 2013 Link

Asian Federation of Foot & Ankle Surgeons 5th Scientific Meeting & Hong Kong Foot & Ankle Society 1st Scientific Meeting
30 November, 2013 (Sat) Link

ASEAN Arthroscopy and Sports Medicine Congress 2013, Kuala Lumpur, Malaysia
6-9 November 2013 Link

中華醫學會第十五屆骨科學術會議暨第八屆COA國際學術大會
會議時間：2013年11月7-10日
會議地點：北京國家會議中心
徵文截止時間：2013年7月31日
提前注冊截止日期：2013年9月30日
網址：http://www.coachina.org/2013

1st Foot & Ankle Cadaveric Dissection & Reconstruction Workshop
1 December, 2013 (Sun) Link
More meetings information can be found in Orthopaedic Calender from HKCOS: [http://www.hkcos.org.hk/calendar/index.aspx](http://www.hkcos.org.hk/calendar/index.aspx)

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