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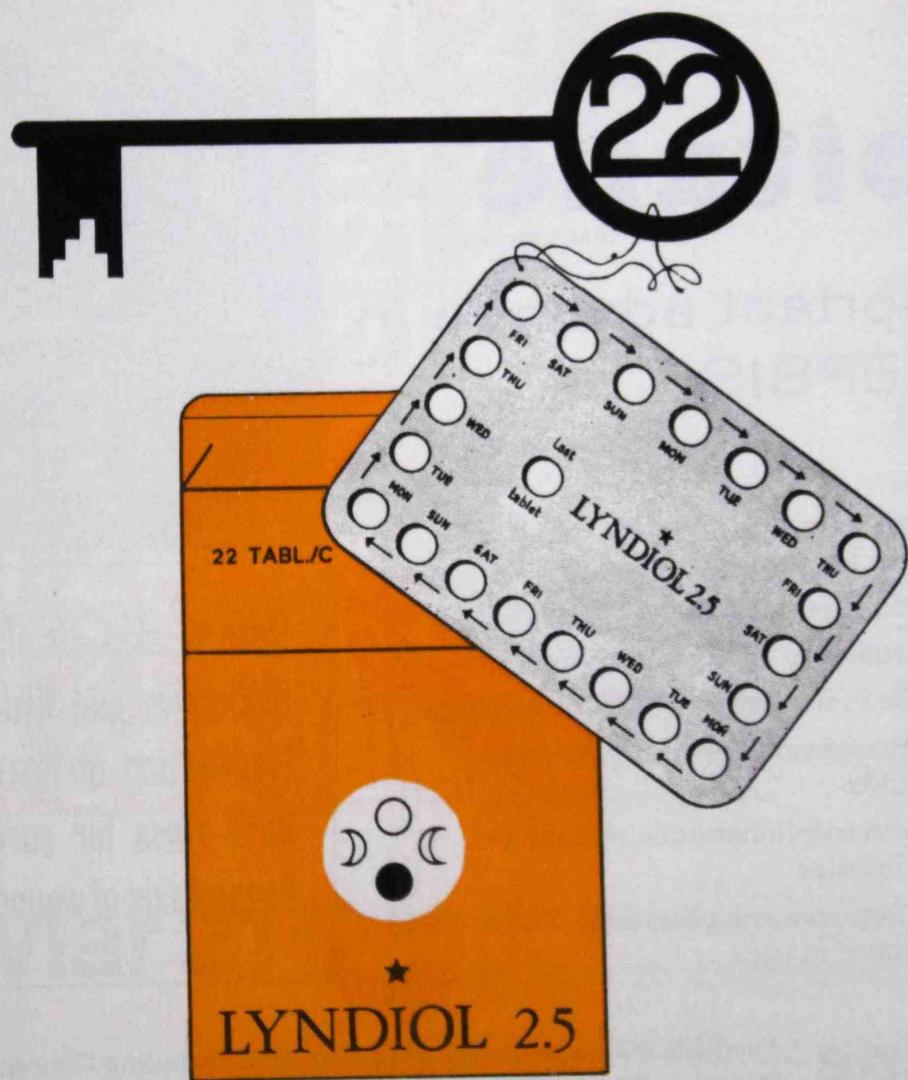
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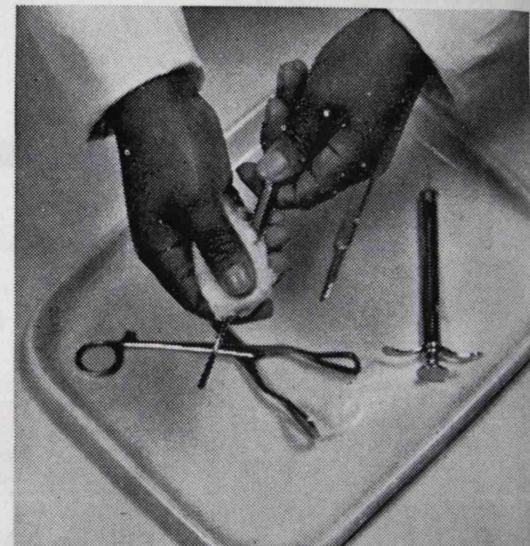
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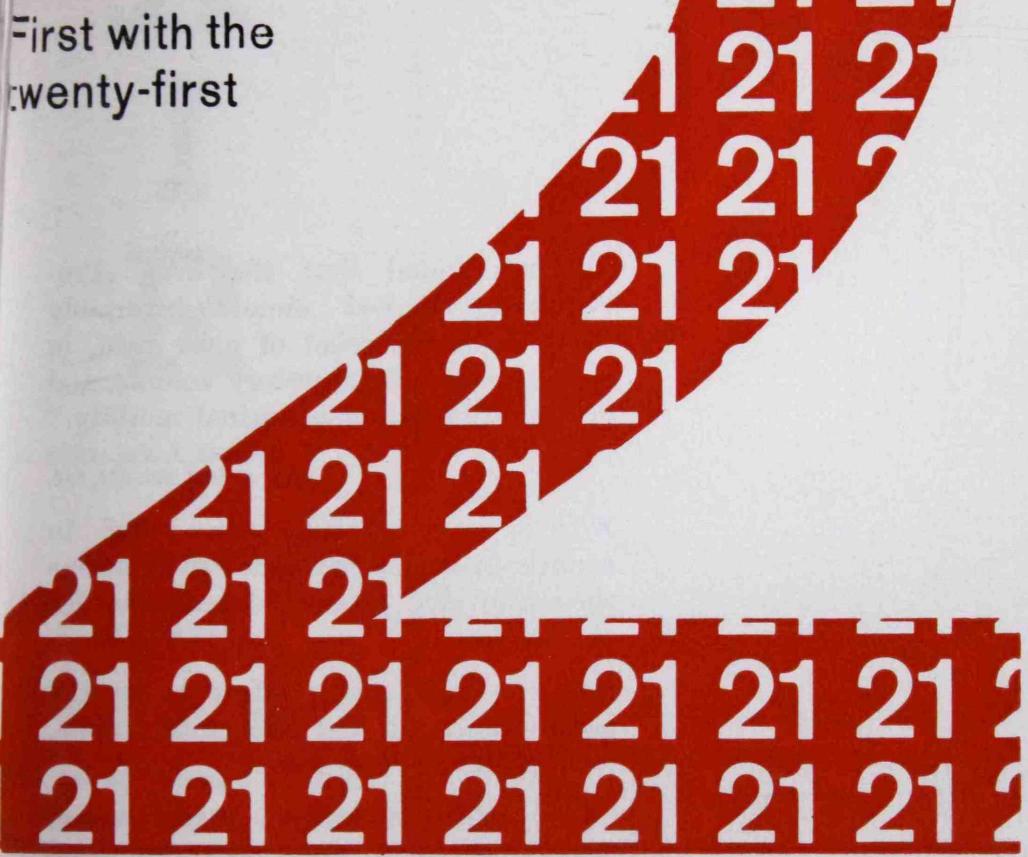
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EDITORIAL

"Medicine learned from a monk how to use antimony, from a Jesuit how to cure agues, from a friar how to cut for stone, from a soldier how to treat gout, from a sailor how to keep off scurvy, from a postmaster how to sound the Eustachian tube, from a dairymaid how to prevent smallpox, and from an old marketwoman how to catch the itch-insect."—

Oliver Wendell Holmes, 1867

The final outcome is that the unfortunate medical student in this twentieth-century setting has to be a Jack of all trades, and a master of all as well. The train of events has further led him to learn from James Bond how to escape unharmed each time from all kinds of dangerous psychological trauma encountered in his hazardous life.

In order to understand more about this strange category of individuals who have puzzled many people including their teachers, we present in this issue 'A Profile of the Hong Kong Medical Students'. Be it to some people's disappointment or other's relief, the medical student is after all just another human being, capable of the same joys and woes of life. But then, who would be more qualified to heal sometimes and sympathise always with another individual than someone who is a humble human being himself?

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Jose, A.D. (1960),
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Found: A Pill To Improve Memory

By Theodore Berland

(Condensed from an original of four serial articles)

Plato said, "All knowledge is but remembrance." And Cicero called memory "the treasury and guardian of all things." Said Dr. Samuel Johnson, "We owe to memory not only the increase of our knowledge, and our progress in rational inquiries, but many other intellectual pleasures."

In recent years memory has been the concern not only of the philosopher and writer, but also of the scientist. And, as so often happens when science looks at something, there is a minor revolution in the offing.

The revolution, it seems, will come in the way of a pill. You simply swallow it and your memory improves. And so does your ability to learn and remember.

Memory Substance: RNA

An Englishman named J. L. W. Thudicum, who was the father of brain chemistry, said in 1884: "Behind every twisted mind is a twisted molecule."

McConnell found flatworms can learn. He placed some in a trough of pond water, flashed lights on them, then gave them electric shocks. The electric shocks made them curl up. After repeating this 300 times, the worms curled up when the lights alone were flashed. He cut up educated flatworms to see if loss of their heads hindered their memories. It didn't. Furthermore, if he kept slicing up flatworms and making new ones, they all had some memory of the light and shock.

Then, in the summer of 1962, he got another idea. He chopped up educated flatworms and fed them to unschooled ones which had never even been in the water troughs. When put in the troughs, they curled up as the lights flashed. Evidently, some memory-bearing chemicals were being passed from worm to worm.

There have since been more flatworm experiments, this time teaching the worms to take the right or left leg of a Y to get food. (Cannibal worms knew how without taking lessons.) Then two University of Rochester scientists pinpointed the chemical that transmits their learning. It was, said Drs. William Corning and Roy John, RNA.

Last August a team at the University of California at Los Angeles added a new twist. They taught rats to go to a food cup when they heard a click sound. Then the researchers killed the rats, cut out their brains, extracted RNA from the brains and injected it into untrained rats. As in worms, the memory was transferred.

RNA has the form of a circular staircase cut in half lengthwise. The steps of the stairs are four simple chemicals that can be arranged like Morse code in almost infinite combinations. The theory is that learned facts can be stored by rearranging this code in RNA molecules. These RNA molecules, says Hyden, have the potential of storing from a million-billion to 100-thousand-million-billion bits of information. Another of his findings was that the concentration of RNA in brain cells changes throughout your life. It increases from birth to age 40, then reaches a plateau until 55 or 60 years, when it starts to fall. This matches pretty well our abilities to remember at different stages of life.

Professor Hyden also found that there was a direct relation between mental activity and RNA concentration in brain cells. Thus, in rabbits born and reared in complete darkness, those cells connected to the eyes are low in RNA. But when the animals are put into lighted surroundings and start seeing, the RNA content of these cells zooms.

In another series of experiments, the Swedish scientist taught laboratory rats to balance themselves on a wire. The animals then had to walk three feet along the inclined tight wire to get to food. Then he sacrificed the skilled animals and, with the aid of a 100-power microscope and a fine needle, dissected single cells out of their brains. These cells were connected to the inner ear and were intimately involved in the animals' sense of balance.

He found more RNA in these cells than in identical cells in untrained rats. What's more, the composition of the RNA in these balancing rats had changed, as though they had picked up a new memory code.

Rats at the University of Rochester were given a chemical that fools cells into making faulty RNA; it greatly lowered their ability to learn their way through a maze.

Mice at the University of Pennsylvania and goldfish at the University of Michigan were injected with puromycin, a laboratory antibiotic that prevents RNA from working. The memories of both kinds of animals were severely hampered.

Rochester, N.Y., researchers gave to both flatworms and cats an enzyme that chemically tears RNA apart; a Danish researcher in Copenhagen did the same this year with rats. All three kinds of animals forgot laboratory tricks they had just learned.

Researchers at Smith Kline and French Laboratories in Philadelphia gave rats daily injections of RNA and found they learned faster and remembered longer than rats which hadn't gotten any RNA.

This last approach has been tried in people by D. Ewen Cameron, formerly of McGill University, Montreal, and now with the Albany, N.Y., Veterans Administration Hospital. He injects RNA into oldsters to improve their memories.

Treatments with RNA, derived from brewer's yeast, seem to work. Dr. Cameron's yardsticks are psychological tests given before and after.

"Until the use of RNA was discovered, no means had been found to affect memory defects favorably in pre-senile, arteriosclerotic, and senile patients," Dr. Cameron said. "The use of RNA has opened up wide and remarkable possibilities."

In one counting test, the average RNA-caused improvement was 164 percent; another group improved 253 percent on the average. Memory test scores increased from 78 to 90.

An 80-year old woman who forgot names and appointments, and who repeated the same questions three or four times in 10 minutes, was typical. On daily doses of RNA, her memory perked up considerably—as revealed both by psychological tests and by her daughter.

The daughter of a 58-year-old woman whose memory was helped by RNA told Dr. Cameron, "Memory is excellent. If she omits her pills she is not nearly so good."

The evidence is clear: RNA pills improve memory. But they also induce abdominal pains and nausea. There had to be a better way to increase RNA in one's brain. There is; it's a drug, and three Chicago researchers have found it

The Memory Pill: Magnesium Pemoline

The drug is the brainchild of Dr. Alvin J. Glasky, a biochemist with Abbot Laboratories of North Chicago, Ill., and his teammates Drs. Lionel N. Simon of the Illinois State Pediatric Institute, Chicago, and Nicholas Plotnikoff of Abbot.

They started out rather basically. They looked into the brains of newly-killed rats for RNA-polymerase, the enzyme that directs the construction of RNA molecules, chemical brick by chemical brick. It was there all right.

If they put some of the enzyme in a test tube along with RNA ingredients, they could make RNA right then and there. It was simple to tell. They labelled one of the four RNA ingredients—adenine, cytosine, guanine and uracil—with a radioactive element like carbon-14. If Geiger counters showed that the resultant RNA was radioactive, it must have taken on the ingredients and been made in the test tube.

Drs. Glasky and Simon then looked for chemicals that might speed up the manufacture of RNA. Such a chemical, if safe enough to use as a drug, could match or even better the use of RNA pills to improve memory.

Then they found magnesium pemoline, a stimulant which Abbott code-numbered 30400, trade-named Cylert. It is a derivative of a drug which has been sold as a caffeine-like stimulant in Europe for five years or so.

In the test tube and in laboratory animals, the magnesium pemoline considerably speeds up RNA manufacture. Just 30 minutes after the drug is given to rats, the RNA enzymes start working. The activity keeps building up for hours.

What about other kinds of stimulant drugs, like amphetamine? Drs. Glasky and Simon tried it and four other kinds of stimulants, pep pills, and waker-uppers. None of these had the same effect on RNA production, they report, "thus the effect of magnesium pemoline is specific and not necessarily related to the general pharmacological properties of psychotropic drugs."

It was left to pharmacologist Plotnikoff to see if the speed-up of RNA production in the brain related at all to learning and memory improvement. He taught rats to jump from a wire grid cage floor to a platform when a buzzer sounded, by first conditioning them with electric shock.

Then he separated the slow learners from the group, the ones that required lots of electric shock before they'd jump. He gave half of the group magnesium pemoline pills and tested them 30 minutes later. They then learned the trick four to five times faster than fellow slowlearners not given the drug.

The rats not only learned faster, they remembered longer. Eight weeks later, those on the drug jumped to the platform after hearing the buzzer for five seconds. Rats not given the memory pill just sat there for 30 seconds—the test cut-off point.

Dr. Plotnikoff searched for other explanations: What about the effect of electric shock? Did it make rats forget, as it does humans who get it as treatment for mental ills? Electric shock does indeed shorten the memories of unmedicated rats; but those which has taken the memory pill remembered their lessons well after shock as rats which never had taken the pill.

Was it learning and memory or were the animals just stimulated into reacting faster? Dr. Plotnikoff tried other stimulants, like amphetamine, and found them "completely ineffective in altering acquisition or retention responses."

Magnesium pemoline, the memory pill, is a buff-colored drug which, Plotnikoff says, "has an enormous margin of safety. At therapeutic doses, it has practically no side effects."

There is a rocky, hilly road between these first highly promising experiments and the time when you might be able to buy the memory pill in your

drug store. But Dr. Glasky and his team have started on it. Animal studies with drugs in the past have shown that their success is a good indication of success with the drugs when given to human beings.

The first tests will be in small groups of patients, people who are normal, or pre-senile, or slightly retarded mentally. None of the subjects will know whether he is getting the memory pill or a buffcolored sugar placebo. Neither will the tester involved. Later, all of the data from these "double-blind" studies will be analyzed to see how the memory pill works in people.

While he isn't exactly sure how the drug helps speed up RNA production and therefore improves learning and memory, he is sure of what it doesn't do.

He says the drug may well work by waking up sleeping enzymes and prodding them into RNA production. Then, the more RNA a person's brain contains, the greater its memory potential.

There are precedents for such enzyme-activators, he points out. The stomach contains lots of digestive pre-enzymes, but none goes to work until triggered by another substance. Magnesium pemoline may thus trigger RNA polymerase.

The drug may also work by physically reshaping what RNA is already there, but in a way that it can more efficiently be used for learning and memory.

The drug may also simply help the brain "write" down what it experiences and to also help it "read" what it has written.

In all of this, Dr. Glasky points out, the RNA affected is in the brain. RNA exists throughout the body, but what is in the liver and elsewhere does not get the push that brain RNA does.

What the pill won't do has to be emphasized, he adds. "We're not changing the genetic make-up of individuals. If anything, we are helping them to make more efficient use of their genetic potentials."

Thus, the memory pill may not make geniuses of idiots; nor will it cure brain damage, mental retardation, or senility. It can, however, enhance what is already there, perhaps make retarded people more educable, return some memory to old people, and even raise your IQ a few points—to what it should have been had you used more of your potential.

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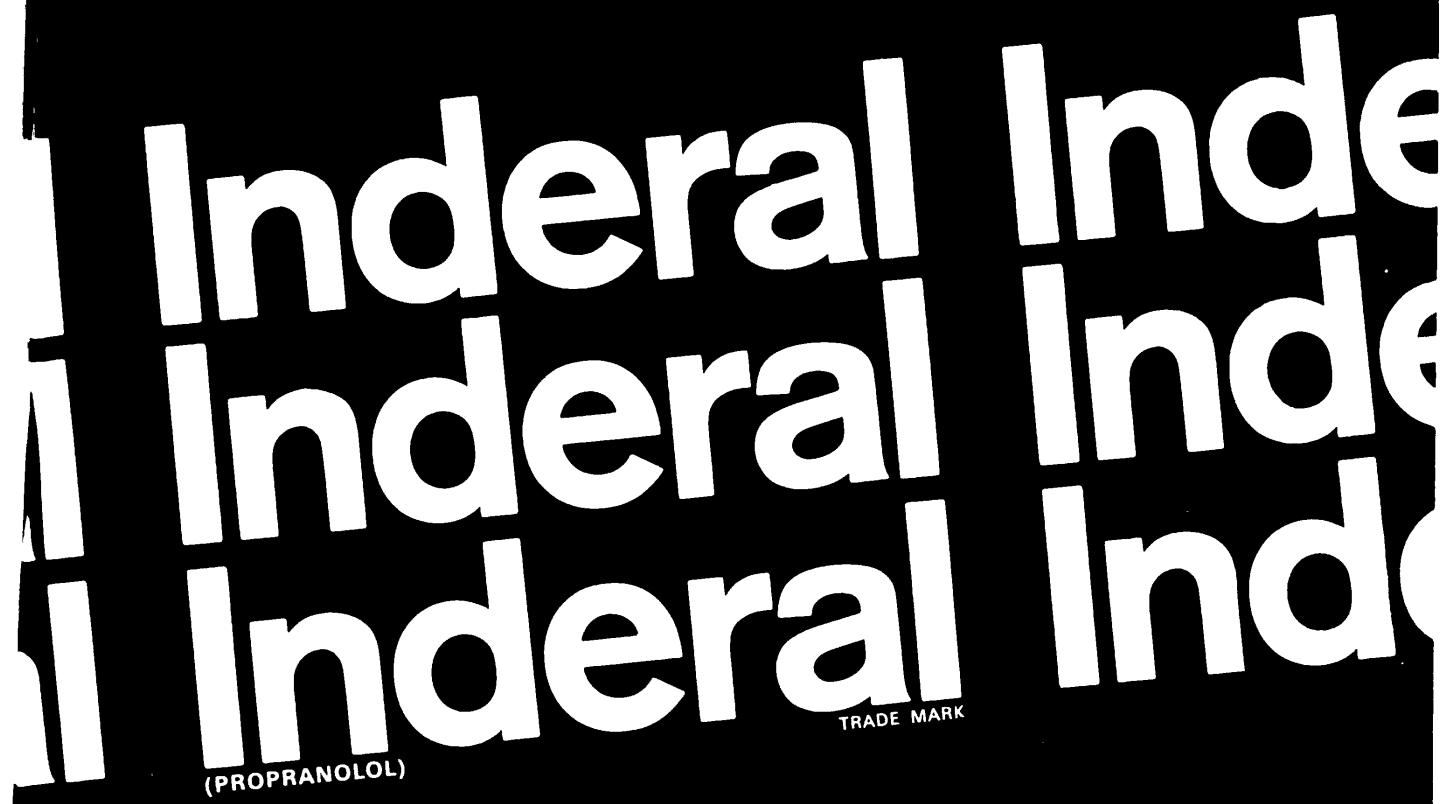
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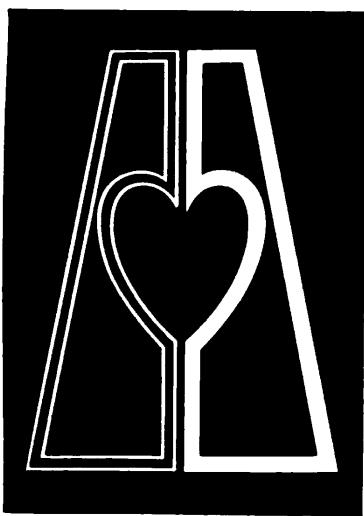
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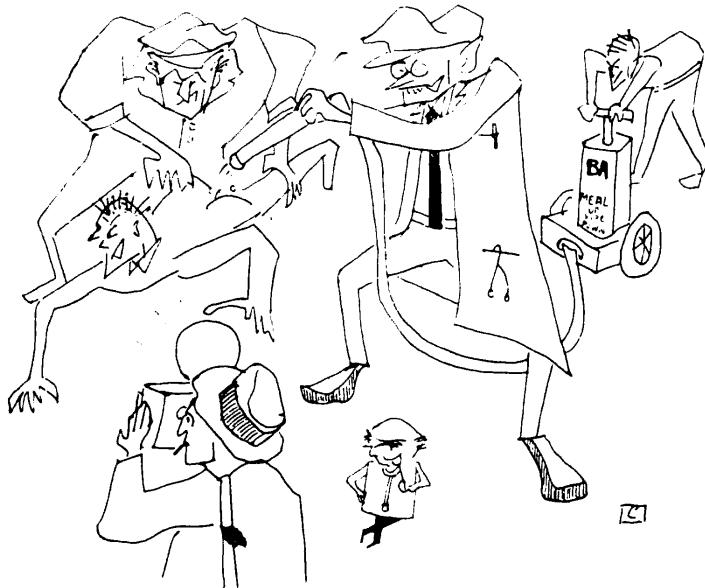
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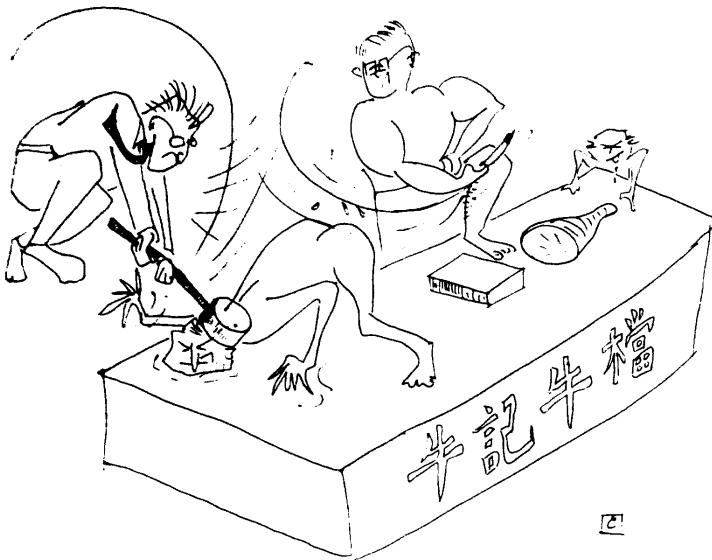
CANCER'S A FUNNY THING

BY J. B. S. HALDANE

(Reprinted from the NEW STATESMAN of 21 February 1964 by Permission)



I wish I had the voice of Homer
To sing of rectal carcinoma,
Which kills a lot more chaps, in fact,
Than were bumped off when Troy was sacked.
I noticed I was passing blood
(Only a few drops, not a flood),
So pausing on my homeward way
From Tallahassee to Bombay,
I asked a doctor, now my friend,
To peer into my hinder end,
To prove or to disprove the rumour
That I had a malignant tumour.
They pumped in BaSO₄
Till I could really stand no more,
And, when sufficient had been pressed in,
They photographed my large intestine.
In order to decide the issue
They next scraped out some bits of tissue.
(Before they did so, some good pal
Had knocked me out with pentothal,
Whose action is extremely quick,
And does not leave me feeling sick.)
The microscope returned the answer
That I had certainly got cancer.
So I was wheeled to the theatre
Where holes were made to make meer. bett
One set is in my perineum
Where I can feel, but can't yet see 'em.
Another made like a kipper
Or female prey of Jack the Ripper.
Through this incision, I don't doubt,
The neoplasm was taken out,
Along with colon, and lymph nodes
Where cancer cells might find abodes.
A third much smaller hole is meant
To function as a ventral vent;
So now I am like two-faced Janus
The only* god who sees his anus.
I'll swear, without the risk of perjury,
It was a snappy bit of surgery.
My rectum is a serious loss to me,
But I've a very neat colostomy,
And hope, as soon as I am able,
To make it keep a fixed time-table.



So do not wait for aches and pains
 To have a surgeon mend your drains;
 If he says 'cancer' you're a dunce
 Unless you have it out at once,
 For if you wait it's sure to swell,
 And may have progeny as well.
 My final word, before I'm done,
 Is "Cancer can be rather fun",
 Thanks to the nurses and Nye Bevan
 The NHS is quite like heaven
 Provided one confronts the tumour
 With a sufficient sense of humour.
 I know that cancer often kills,
 But so do cars and sleeping pills;
 And it can hurt one till one sweats,
 So can bad teeth and unpaid debts.
 A spot of laughter, I am sure,
 Often accelerates one's cure;
 So let us patients do our bit
 To help the surgeons make us fit.

(*In India there are several more
 With extra faces, up to four,
 But both in Brahma and in Shiva
 I own myself an unbeliever.)

* * * * *

Lower Motor Neurone Paralysis

For a lower motor neurone paralysis to be,
 Damage to that segment of the cord there must be,
 Or else to the nerve roots, peripheral nerves may do.
 Paralysis disables the muscle in what it can do,
 Flaccidity follows from a loss of tone,
 Areflexia is like hammering on stone;
 Marked is the muscle with wasting seen,
 Dryness and cyanosis are trophic changes in the skin;
 In time the muscle is gone for replacement
 By fibrous tissue contracture and disfigurement.

* * * * *

While all the gallant young men who went to the intervarsity games came back with Athlete's foot, one fair member of the gentle sex was quite exceptional in that she only got athlete's foetus.

Profile of the Medical Student in Hong Kong

KAN KWOK CHOI, ET AL*

This article has been prepared with the view of promoting better understanding of medical students. Not only is it intended for the latter so that they know more about themselves as a group, but also for others so that the medical student is better represented in their mind.

The information contained herein has been gathered by various means. A study of the ways of life of over 300 medical students has been made by critical analysis of the results of a questionnaire-study, it must be admitted that deductions so made have to be accepted with reservation. A similar study has also been conducted on undergraduates of other faculties to provide a comparison. An extensive interview with people directly connected with medical students has been carried out to obtain an objective view. Certain data have been drawn from official sources, others from previously documented literature.

Why do medical students want to study Medicine?

The questionnaire-study shows that the following three reasons in their order of preference are most popular out of seven alternatives:

1. Interest in Medicine itself.
2. Medicine as an independent and respectable profession.
3. Humanitarian reasons.

In analysing the answers to the questionnaire, the index of popularity of each of the seven reasons is based on the frequency with which the reason has been chosen and its order of preference. The actual results are charted out as follows:

Reason	Popularity Score by female	Popularity Score by male	Total Popularity Score
Interest in Medicine itself	100	162	262
Medicine as an independent and respectable profession	34	189	223
Humanitarian reasons	78	105	183
Family influence	66	83	149
Good pay	3	78	81
Only alternative to other science subjects in Hong Kong	27	60	87
No reason	18	37	55

* Working group includes: Mr. Cheung Chi Fong, Miss Tsou Sheung Mei, Mr. Yu Tak Po, Mr. Chow Tung Shan, Mr. Kong On Tai, Miss Yang Yang, Miss Becky Shan, Mr. Chow Wing Shing and Miss Lam Chuen Bik.

PROFILE OF THE MEDICAL STUDENT IN HONG KONG

A comparison may here be made with a similar study in Japan: (from 'A Comparative Studies of Medical Education in Japan', JME 1964)

1. Interest in Medicine.
2. Family Influence
3. Independent social status.

The study has also revealed that about 70% of them decided to study Medicine before Matriculation, and about 20% after Matriculation, the remainder had their decision made in childhood.

It is interesting to note the percentage of medical students having a doctor in their family or as a relative:

Parent	6.1%
Brother/Sister	9.3%
Close relative	27.6%

Admission to the Faculty of Medicine

Selection is made on a competitive basis. From 1960-1966, 1259 students applied for admission to the Medical Faculty, but only 647 were admitted.

Year	Total Applications	No. Admitted	% Admitted
1960	104	68	65.4
1961	118	79	67
1962	144	84	62.6
1963	213	76	35.7
1964	181	100	55.3
1965	224	120	53.6
1966	275	120	43.6
1960 - 1966	1259	647	51.4

Here is a statement from the Authority concerning the policy of the selection committee: "The aim of the Committee is to select those applicants who are most likely to complete the course and become good doctors. In making its decisions the Committee places greatest stress on academic merit as revealed by performance at the University's Advanced Level examination but it also takes into account other factors such as performance at other examinations, extracurricular activities, Headmasters' reports, etc. Naturally, with the large number of applicants for a limited number of places, considerable care is taken to evaluate each applicant on his merits. It has been the practice of the Faculty Board to reserve a small number of places each year for allocation to Overseas students. In 1966 five places were allocated to Overseas students."

Expenses and Financial Background of the Medical Students

The questionnaire-study shows a wide variation in individual yearly expenses:—

Hostel resident			Non-resident		
Yearly expenses	Male	Female	Yearly expenses	Male	Female
Less than \$4,000	7	1	Less than \$2,500	32	16
\$4,000—\$5,000	34	7	\$2,500—\$3,500	46	37
\$5,000—\$6,000	25	2	Over \$3,500	102	10
Over \$6,000	23	1			
Total	89	11	Total	180	63

The distribution of occupation of members of their family is as follows:

Businessman	34.2%	Executives	8.3%
Professionals	20.0%	Retired	6.0%
White Collar	15.1%	Working class	3.4%
Teacher	12.0%		

This pattern is basically similar to the results obtained from the Arts students, but here the percentage of professionals is higher, and of working class is lower.

As to the family income, most of the male students are from families with monthly income ranging from \$500 to \$2,000, but about half of the female students are from families with monthly income of over \$2,000.

Family income per month	Medical students		Arts students	
	Male	Female	Male	Female
Less than \$500	9.5%	8.7%	16 %	0%
\$500—\$1,000	25.0%	8.7%	33.3%	17%
\$1,000—\$1,500	25.6%	19.6%	33.3%	22%
\$1,500—\$2,000	16.2%	10.9%	16 %	27%
Over \$2,000	24.4%	52.2%	8.3%	34%

Various Scholarships, Bursaries and Grants are available to medical students. The Medical Society has also provided a Loan Fund Scheme for needy students. However, results of the questionnaire show that about four-fifths do not receive any form of financial assistance:

PROFILE OF THE MEDICAL STUDENT IN HONG KONG

	Medical students		Arts students	
	Number	%	Number	%
Scholarships	24	8.1	4	4.3
Bursaries	31	10.5	11	11.9
Loan fund	12	4.1	5	5.4
None of the above	228	77.3	73	79.1
Total	295	100	93	100

To meet the study expenses, 46 out of 286 students have to take up a part-time job.

Study and Examination

Most clinical students spend from 5 to 20 hours each week for study, while most preclinical students spend from 10 to over 25 hours each week. Half of the students consider that the medical course is heavy, a quarter of them consider it very heavy.

The First M.B. Part II and the Final M.B. Examinations are the two most dreaded examinations. From 1960—1966, 586 students sat for the First M.B. Part II Examination, and as many as 150 failed (25.6%). 85 of the failure were referred for examination in September and nearly all of them passed. In the same years, 422 students sat for the Final M.B. Examination and 125 failed (29.6%).

Year	First M.B. Part II				Final M.B.		
	Number	Pass	Fail	Referred	Number	Pass	Fail & Referred
1960	76	54	22	11	47	34	13
1961	83	62	21	13	37	26	11
1962	75	63	12	7	46	33	13
1963	82	65	17	10	62	45	17
1964	90	66	24	8	79	58	21
1965	82	67	15	9	73	49	24
1966	98	59	39	27	78	52	26

Postgraduate Plans

Majority of the students admit that they are not well acquainted with the various aspects of medical practice, and would like to be better informed. Their plans may be represented thus:

General Practice	7.8%
Postgraduate studies	30.4%
Work in hospital	34.5%
Undecided	27.3%

Activities and Interests

About half of the students have recreations often. Their interests are as follows:

Films	71% of students	Concerts/plays	30%
Sports/games	60%	Nightclub	14%
Indoor activities	42%	Ballroom	6%
Outdoor activities	37%		

With respect to reading habits, it is as follows

Chinese newspaper	73%	Journals	29%
English newspaper	38%	Sex stories	25%
武俠小說	33%	Adventures	18%
Pictorials	33%	Tragic/sentimentals	14%
Comics	29%	None	4%

Frustrations

About two-thirds of the students admitted to have frustrations occasionally, a quarter frequently. Some of the reasons are shown to be:

	% of Male	% of Female
Frustrations without obvious reasons	35	43
Unsatisfactory results in study	31	32
Financial difficulties	32	15
Loneliness	28	17
Frustrations from love affairs	24	17

Majority of them in frustration will get out of it by talking to friends or seeking recreations, but some still do not know what to do.

Romance

Only a minority admits having a steady. One-fifth considers that it is too early to think of love affairs. But one-third is on the lookout for someone suitable. In general, character, culture, ability and common interest are regarded as important in choosing a companion, but a University education is of less importance to the male students.

The questionnaire-study further shows that about half of the male Arts students would not consider having a medical student as a girl-friend, but a majority of the female Arts students would consider having a medical student as a boy-friend.

Attitudes

The majority of medical students feels that there is a sense of pride over other students. At the same time, over half of the Medical and Arts students notice that certain prejudice against Medical students exists.

Aptitude

Dr. D. E. Gray has been carrying out a Reasoning Test on First year medical students since 1963, the purpose is to determine if the Reasoning Test Score could be used as a predictor of success in University examinations. It is still too early to draw conclusions therefrom, but it has been noted that the mean score for each of the three classes so far tested is not significantly different from the mean score for first year medical students in a British University.

Professor Cheng thinks that medical students are hard-working enough, but lack a critical approach to their studies. Dr. Braga said that the students read too narrowly and refrain from discussion. She encourages independent thought and freedom of argument even with Staff members.

One part-time lecturer said that there should be free discussion between students and staff, therefore he welcomes questions from his students.

Society Consciousness

Dr. Braga is very much disappointed at the poor spirit and lack of society consciousness among medical students. It is an exact contrast to the high spirit of students in the pre-war period, so testified by both Dr. Braga and Professor Cheng.

One graduate has also deplored the poor sense of fraternity among medical students and graduates. He said, "This sense of fraternity has received very little fostering throughout our education. It is sad to see the almost invariable poor turn-out at functions organised by the University or the Alumni for our graduates. In fact, there seems to be very little loyalty among our graduates for these two institutions. More emphasis on group achievement and less on those of individuals may help to rectify the situation."

Health and Physical Training

Dr. Bard has the impression that at first entrance to the University, medical students appear to be of higher standard physically and intellectually. However, they tend to have more minor complaints later on. Peptic ulcer, tuberculosis and mental breakdown are quite common, but probably not more common than among other students. He believes that the pressure and mental strain on medical students are not greater than those on students in other professional faculties.

At the physical training programme of the first year students, Mr. Duthie has observed that there is a wide range in strength, speed and endurance. Many students are clearly on the border line of physical competence. The results of the programme are rewarding: the students are capable of higher work output, suffer less fatigue on work, and show greater ability to recover from exertion.

Hostel-Life

On the whole, more medical students are accepted as residents than those of other faculties. Rev. Fr. Barrett explained that there are more of them applying, and their long course and numerous examinations make residence very important to them. But success in examinations, in the sense of getting high marks, is not the ultimate criterion of a good doctor. The ability to mix with others, a power to make independent decisions and an understanding of human nature are all essential to a doctor. These can be acquired in a hall of residence. So said Fr. Barrett.

Prospects

One specialist remarked that the commercialised society of Hong Kong is conducive to the breeding of the get-rich-quick type. Under such circumstances it is not surprising to find the majority of graduates look forward to setting up a private practice in preference to institutional jobs because the former is more lucrative. On the other hand, some are forced to choose private practice because they are unable to get a good University or Government post as these are few in number, or because these posts offer such poor remuneration. There are, of course, the academic type who do not mind the poor remuneration, but then the local institutional jobs, with few exceptions, usually allow very little time and provide only poor facilities for research.

* * * *

Acknowledgement

The writer wishes to express his sincere thanks to the following for helping to make this article possible: Professor K. K. Cheng, Dr. C. Braga, Dr. S. M. Bard, Dr. D. E. Gray, Mr. Duthie, Rev. Fr. Barrett S.J., a specialist who wishes to remain anonymous, Mr. A. P. Walker, Miss Kan, Mrs. Chung, Miss B. Shan, the Elixir editorial board, and all members of the University who have given their help.

Reference:

A Comparative Studies of Medical Education in Japan from the Journal of Medical Education (JME) 1964, p.360.

* * * *

Turkish Bath

It promotes free diaphoresis, tissue metabolism, excretion via perspiration, and loss of weight. Further, it gives a sedative effect and a sense of well-being. It helps in lowering the blood pressure in moderate hypertension, and in eliminating uric acid by the skin in gout. However, it may lead to constipation if there is inadequate water-intake; and is dangerous in severe hypertension.

* * * *

Thumb-sucking

It is the first-experienced means of gaining relief. Normally by the age of 2 other means of satisfaction are obtained from crawling, walking, etc. But emotional tension and maladjustment can precipitate a reversion to thumb-sucking. Attention should therefore be given to the child: remove such causes as feeding difficulties, illness, lack of maternal care, etc. If necessary, psychological aid may have to be sought.

1 in 3 runs the risk of Coronary Heart Disease

(U.S. Public Health data 1963)



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Patients with Angina

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Patients with history of Myocardial Infarction

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- Annual Mortality only 5.4% in the first year
- Mortality Rate Reduced to 2.6% in the second year
- Average Mortality Rate from CHD was 4% per annum over 27 months in 312 patients

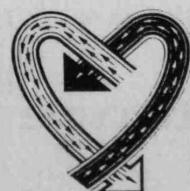
This average is less than half what might be anticipated

*Proc. 2nd Int. Symposium on Drugs Aff. Lipid Metab., Milan 1965.

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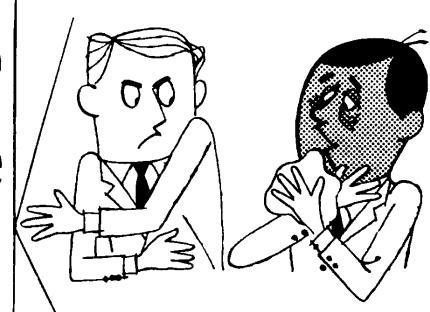
for
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relief
from
the
common
cold
and its
complications...



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for rapid and effective
control of coughs.....



SUPPLY: Bottles containing 60 cc., 120 cc. and 950 cc. of Coryaid Cough Syrup.

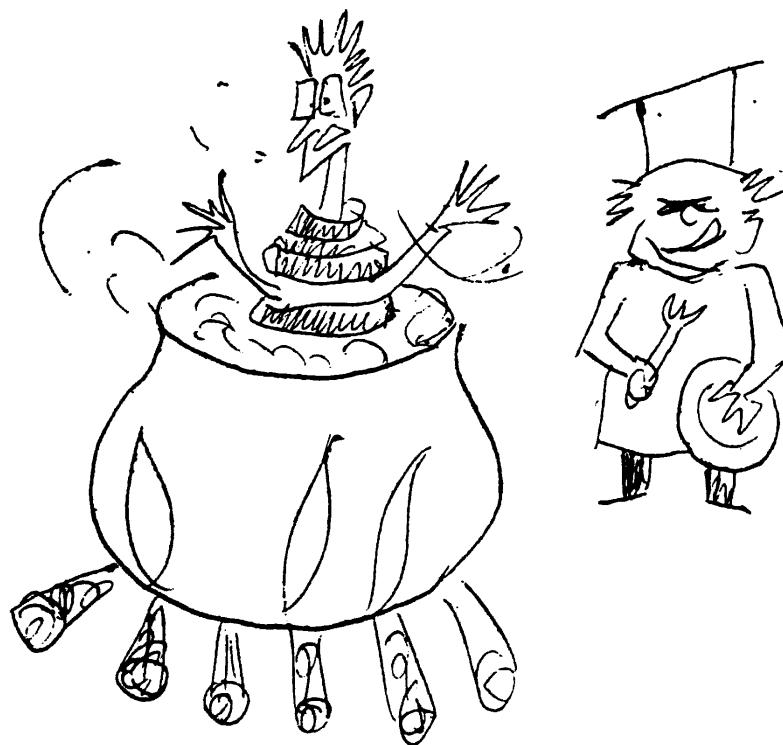
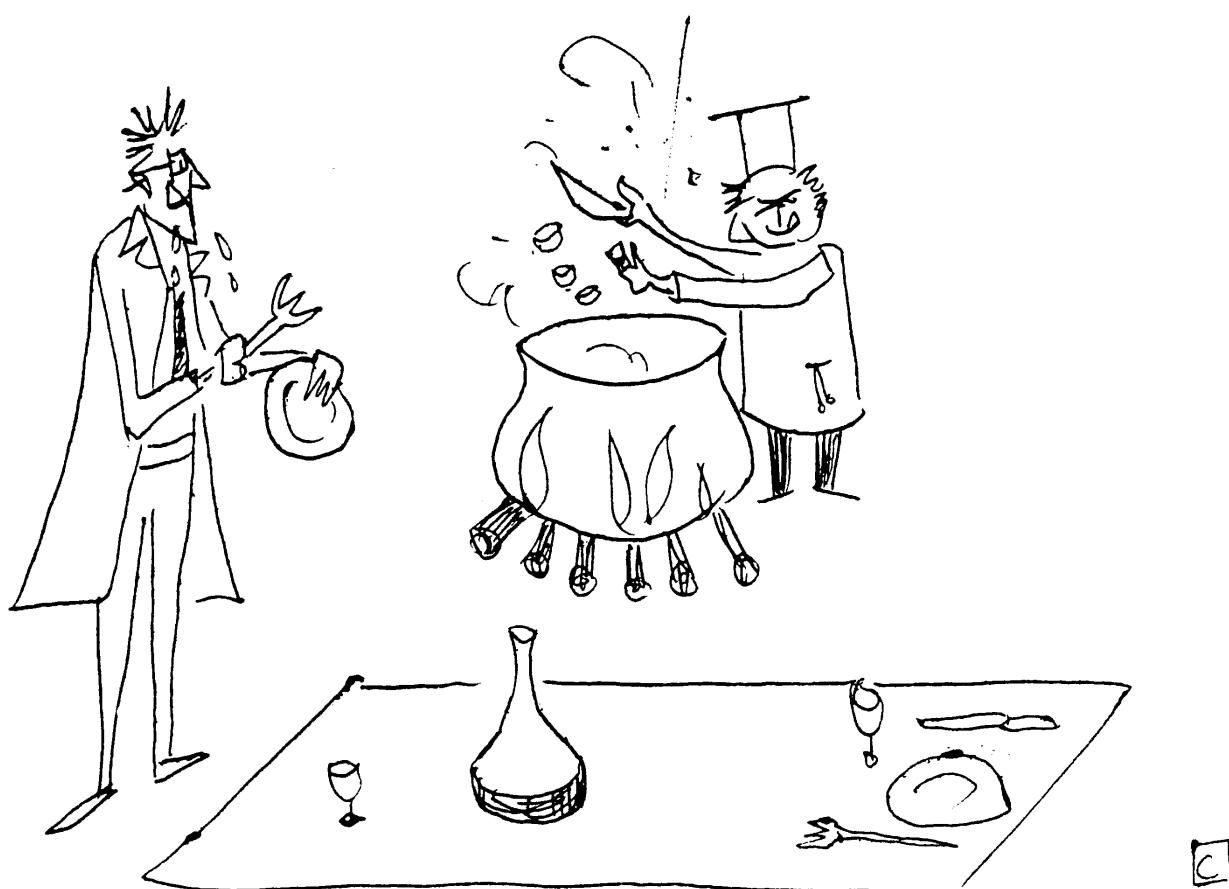


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POT-LUCK

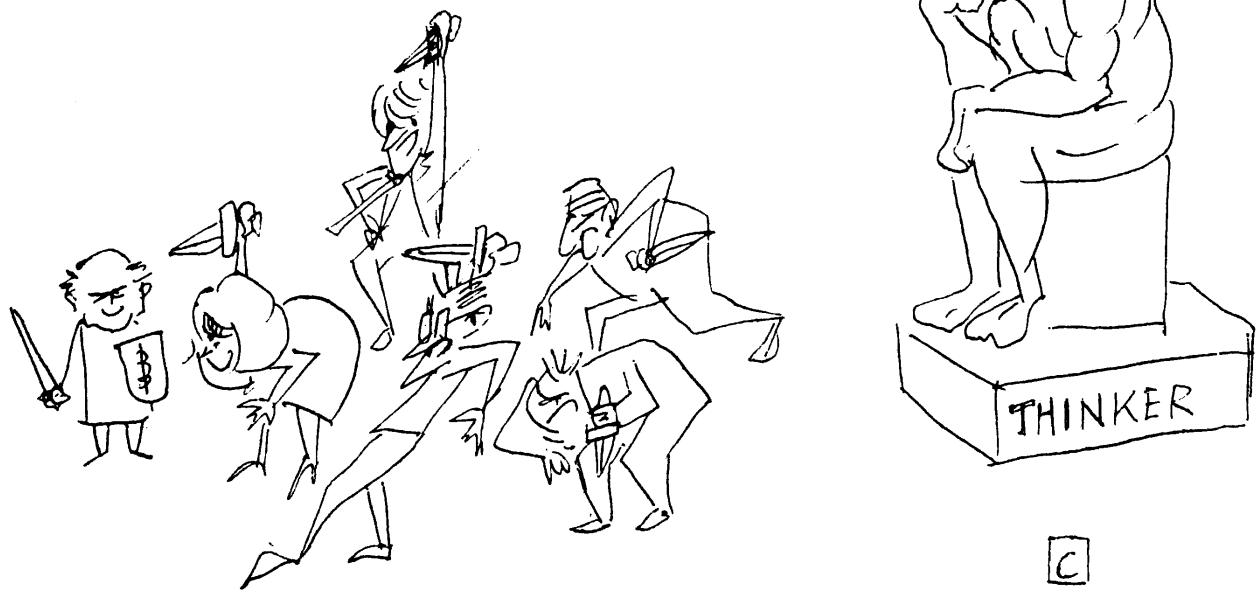


BY THE "SQUARE" SON OF CHEUNG

THE AGONY



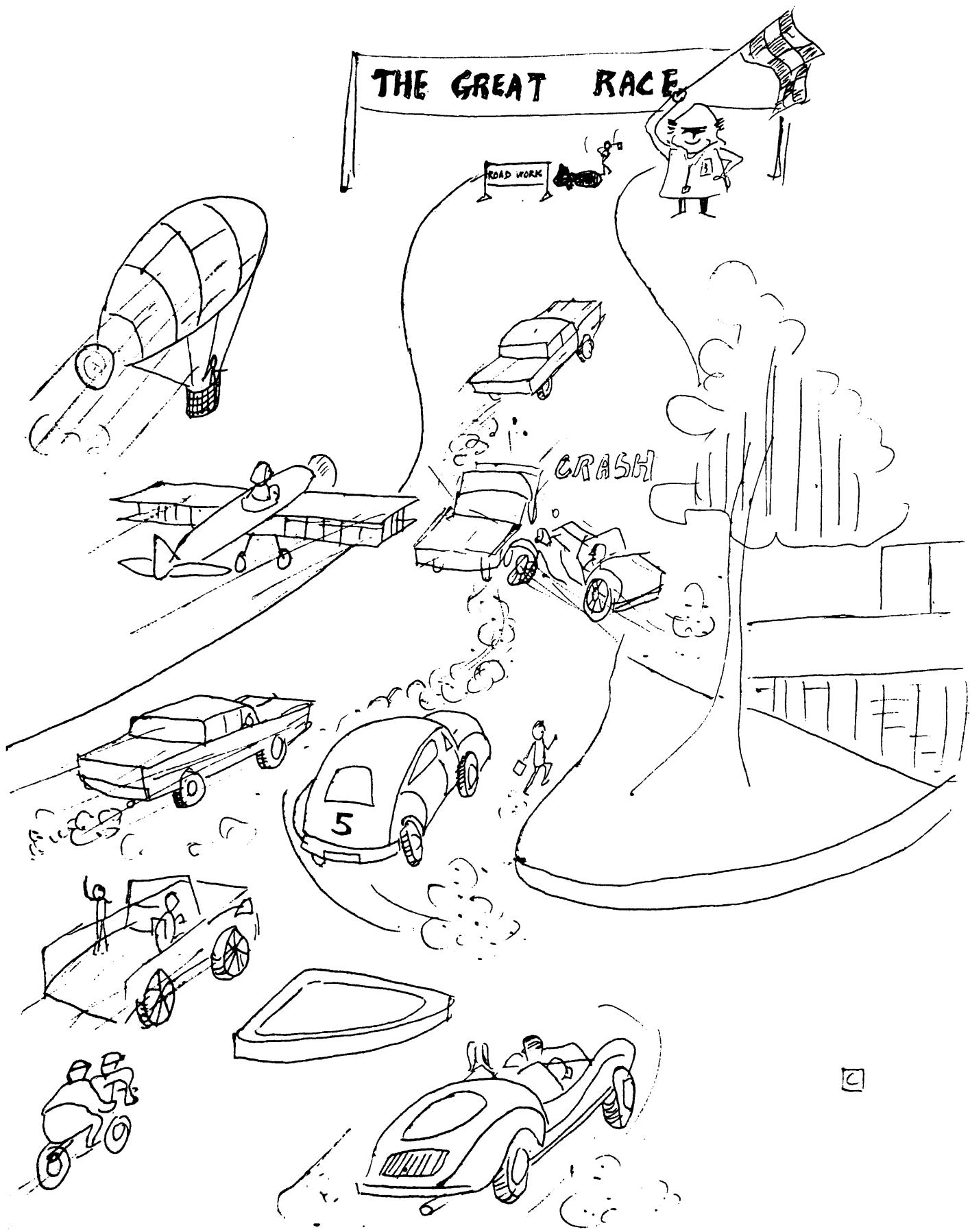
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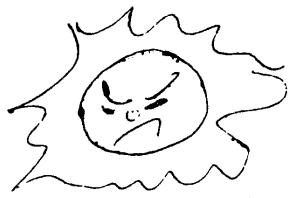
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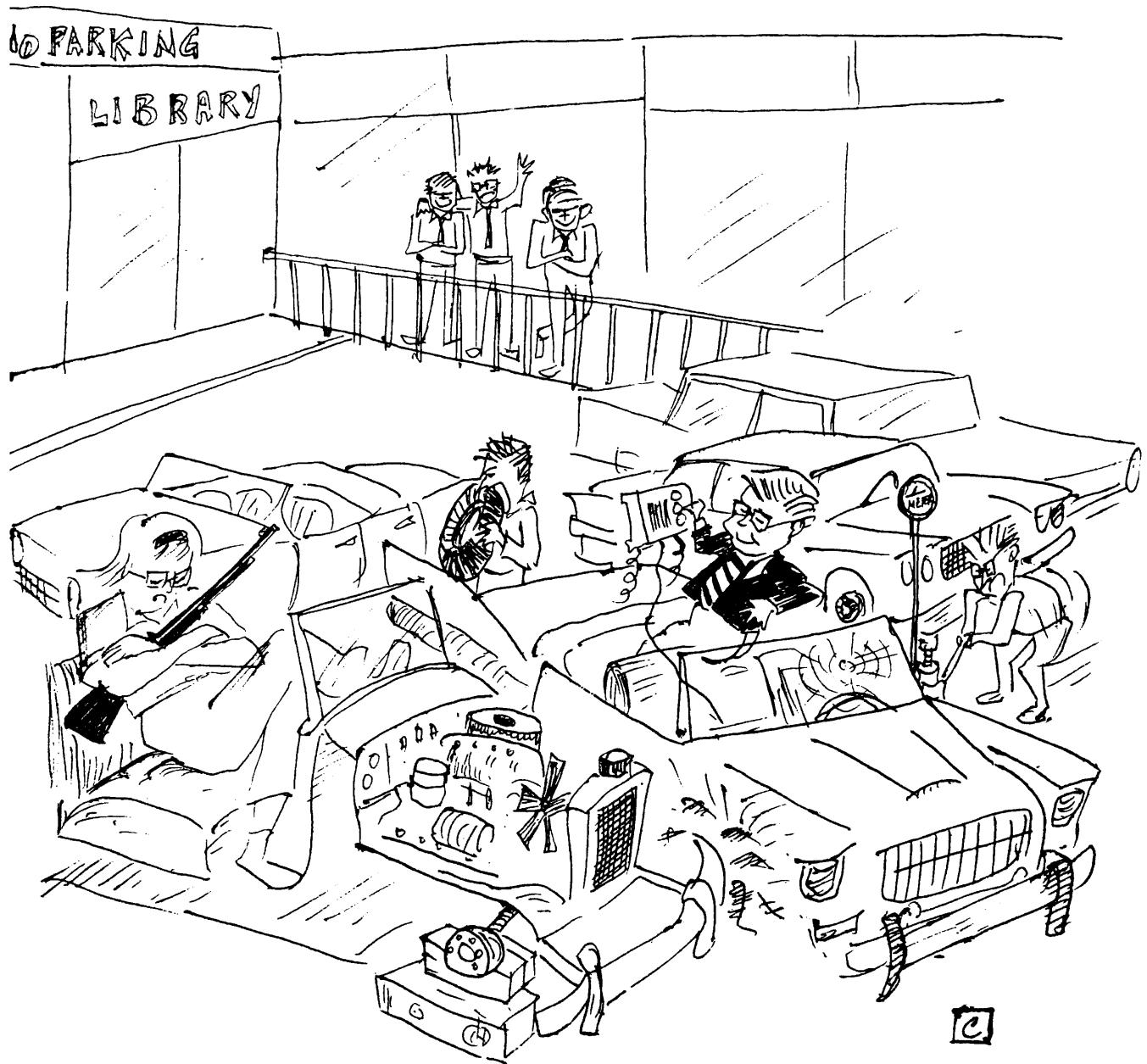
THURSDAY CLINIC



MEDICAL "FITNESS"



PARKING PROBLEM

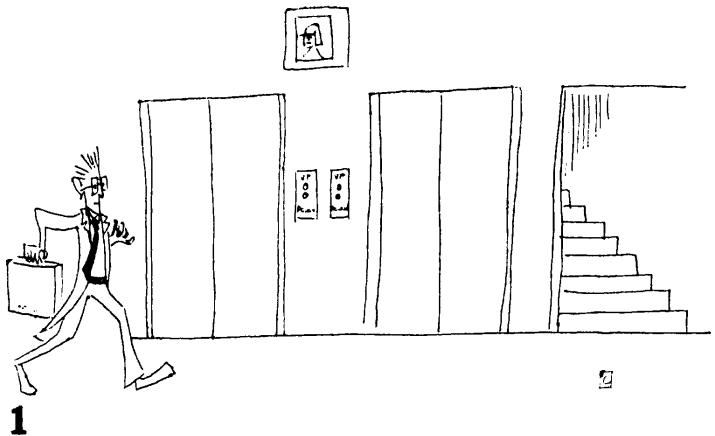


RECAPTURE THAT
SOCIETY SPIRIT – IT IS
EVAPORATING AWAY



PLACE: QUEEN MARY HOSPITAL

TIME: ANYTIME



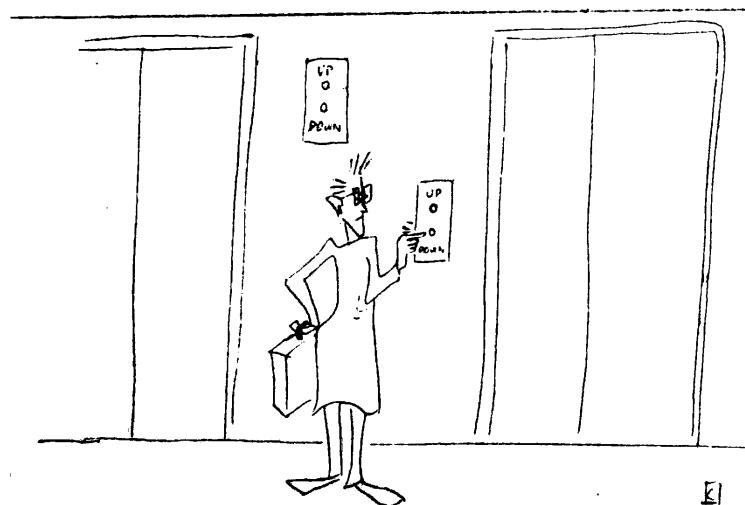
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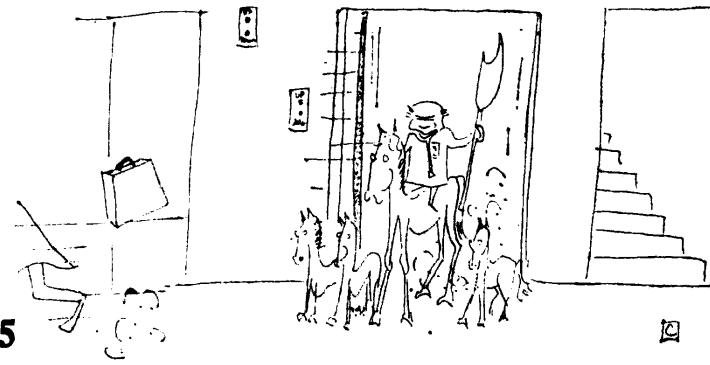
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5

bacillary dysentery



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..... TO ELIXIR HONG KONG PERIOD MEDICAL
NEWS PERIOD FROM UNITED PRESS INTERNATIONAL
PERIOD WITH COMPLIMENTS PERIOD

RUBBER ARTIFICIAL HEARTS

New York, November 26 (UPI), by Michael Prendergast—American Heart Surgeons are now predicting that within five years rubber artificial hearts will be used frequently to save the lives of sufferers from heart disease.

Texas Heart surgeon Dr. Michael Debakey wrote a new chapter in Medical history by implanting a "Half Heart" in a rheumatic heart victim. The patient died a little more than four days after the operation, but death was attributed to a ruptured lung and not to the failure of the left ventricle by pass, as the "Half Heart" was called.

Since then, comparable operations involving portions of the heart have been performed by medical teams in various parts of the country. One Mexican woman survived the bypass operation which allowed her weakened heart to rest.

Now another team of scientists is at work in Akron, Ohio, seeking to perfect a completely artificial heart. They are rubber chemists, engineers, physicists and experts trained in physiology, hydraulics and electronics who work in the research division of the Goodyear tire and rubber concern.

The improved rubber heart is smaller and lighter than its predecessors. Part of the new model is more readily sutured to real tissue than earlier prototypes.

Less external instrumentation and control machinery is needed. A new type of fabric used for the chambers above the ventricles promotes a rapid build-up of tissue like surfaces and prevents clotting.

This heart has undergone endurance tests on a mock circulatory system in Goodyear's laboratories of up to 500 consecutive hours.

These tests show the heart is capable of pumping blood through a system that simulates the circulatory system of a Calf.

Although more modifications are ahead, the artificial heart could be the basic forerunner of the organ medical science sees as a future hope for those with afflicted hearts.

* * * * *

ANIMAL FAT NOT CAUSE OF CORONARY HEART DISEASE

New York, November 26 (UPI) by Delos Smith—The men who earned scientific interest by being all but immune to the "Heart Attack" type of heart disease now turn out to be so superior in physical fitness that some of them easily out-do even olympic athletes in physical endurance.

They are the men of Masailand in Africa. By the dietary theory of what is the long-range cause of heart attacks, they should have even more of them than American men do. Their customary life-long diet is even richer in animal fats than is the standard American diet.

Dr. George V. Mann, a nutritional scientist of Vanderbilt University, Nashville, Tenn., holds the opposing theory which contends that physical inertia and the resulting physical flabbiness characteristic of so many American males, is the long-range cause of heart disease.

Several years ago he gave pause to the dietary theorists with a statistical study of Masailand males that demonstrated the rarity of heart attacks among them, along with proof of their dietary devotion to the "saturated" fats of animal origin.

He and two associates—Dr. Roy D. Shaffer and Alan Rich—have now tested Masailand men for physical fitness.

They did it with a power-driven treadmill which could be given an up-grade of several degrees. The men walked against it, attached to instruments measuring oxygen consumption. They were men of two south Masailand villages and they were told to walk until exhausted.

The Treadmill test is a standard one and has been given to thousands of men, including celebrated athletes. Many of the Masai out-walked these athletes and two of them broke the records of Don Lash, the Olympic distance runner, Jernberg, the Swedish skier, and the late Clarence Demar, the celebrated Marathon runner.

"The Masai spend much of their lives as boys walking with the herds. As warriors they are on the move almost daily, walking great distances in their surveillance of cattle, property, girls and distant friends. Their exercise, primarily walking, is done at a brisk, long stride at a rate of three to five miles per hour.

"The Masai men rarely produce maximal effort unless there is a war or some other catastrophe. It must be concluded that persistent walking with an expenditure-rate of no more than 300 to 500 calories per hour is sufficient to maintain this high degree of fitness."

Mann said the supporters of the theory that 'coronary heart-disease is caused by the kind and quality of food eaten' were mistaking a statistical association for a cause. But he granted that what he had also was an "association"—one that "suggests but by no means proves a causal relationship, i.e., fitness protects against coronary heart disease."

* * * * *

What do you know about the heart?

"The heart consequently is the beginning of life; the sun of the microcosm, even as the Sun, in his turn, might well be designated the heart of the world, for it is the heart, by whose virtue and pulse the blood is moved, perfected, made apt to nourish, and is preserved from corruption and coagulation; it is the household divinity which, discharging its function, nourishes, cherishes, quickens the whole body, and is, indeed, the foundation of life, the source of all action."

— by WILLIAM HARVEY



Fifth Year Writes

TO MEDICINE

*Pearls of wisdom I dare not boast
Satires, pathos, are off my coast,
Medicine, an art, from sad mistakes must all learn
Midnight oil and faces —— do equally burn!*

So

*Smile not the goals we all aspire
Frown not the wrongs each so dire,
Climb, yea, climb, with ever dying faith to craze
Distant castles, clouds sublime —— allure but haze!*

But

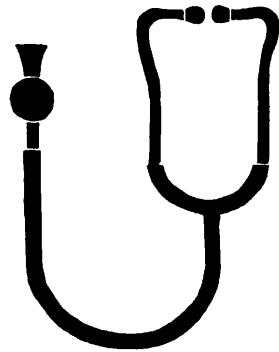
*Mystic lab'rinth may you linger
Boundless kingdom, souls to conquer;
Deep abyss still gaping wide to bury
Body, blood and iron true —— so flurry!*

Still

*Medicine, my Love, you sweeter grow
Roses amidst the thorns of woe,
Teach me, curb my tongue, to high and low alike
Time to heal, my heart's elixir —— blast the dyke!*

Cleopatra

N.B. Medicine: med'sn (Oxford)



Fourth Year Writes

TEA - TIME CHAT

At the medic canteen.

“Gee, I feel frustrated these days.”

“Me too!” A chorus of “fruss” went around the table.

Nulla elaborated, “Life is dull. Lectures, ward rounds, OPD’s, clinics and case-taking!”

He was echoed by Sesom, “Yeah! We all need RECREATION. Say, how about a social gathering with Q.M.H. nurses?”

Immediately, K. K. Yeung objected on the grounds that on considering the number of nurses and the number of medical students, it would be too immense a project to be carried out in H.K.U.

By no means discouraged, Sesom replied, “O.K., if the Medical Society refuses to do it, why can’t the 4th Year students organise one for themselves. Moreover, we have at hand a very competent class representative, Mr. Fukay!” People all clapped.

Such a compliment produced enough buoyancy to float any human being in the air for a few minutes. It happened that the worthy Fukay was also human. A long pause was followed by a murmur, “Eh . . . well . . . no . . . I can’t do it. I have no time. Besides, my foot has yet to recover. I can’t dance!”

* * * *

Next day. Same time, same place, same people.

“How was yesterday’s class election?” asked Square.

“Dear sir, Mr. Fukay has been re-elected our class rep, beating all other candidates by 4 votes.”

“How many votes did he get?”

“4 votes, for the rest got no vote.”

Sesom asked Fukay, “Hi, new class rep, how about the social gathering we were discussing yesterday?”

Fukay digged out a new defense weapon, “Do you still remember the instructions we received at the beginning of our clinical days that we should keep away from the nursing staff?”

A bell rang for Nulkat who have not spoken before, “Why insist on nurses? I don’t mind having a gathering with D.K. or secondary school girls.”

Fukay saw no way of escape, suggested, “Will somebody, like Nulla and Nulkat, who are so interested, organise it for the class? They may use the name of ‘assistant class rep’ in their proceedings.”

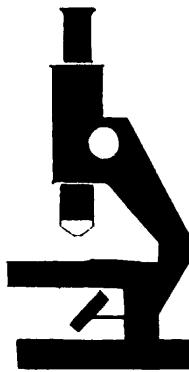
“I don’t mind,” said Nulla, while turning to other tables for support.

The neighbouring tables were not too enthusiastic. “No, who cares for socials? We are going fishing today.”

Another group was busy planning for camping in Ngong Ping with barbecue.

Who was saying we lacked recreation?

(The writer wishes to clarify that all the names above are fictitious. Any resemblance between the characters above and persons in real life can only be mere coincidence.)



Third Year Writes

The Room at the Bottom

By CON

Follow the road leading from the lower car park to the unused tennis court, look for an arrow
not unlike a cercarium of schistosomes, ten steps further, turn right.

* * * *

I entered——by the front door, of course. Only the privileged is escorted through the rear.

‘Kernicterus M/-’ was scrawled on the board. What on earth is that? Hurriedly, a small crowd gathered round a copy of Muir’s

Figures in white were moving stealthily round a stone-slab set on a tapering stand. There were murmur of voices exchanging comments, clicking of scissors, splashing of water, shuffling of feet

* * * *

11:53 a.m. —— the V.I.P. made his entrance. There was the routine clinical history, then came the ordeal. He pored over the specimen like a connoisseur intent on his task. Stroking the cut surface gingerly, he looked around for his ‘victim’.

‘Are you a student or a House-officer?’ —— It was addressed to one of our comrades who apparently has never graced these sessions with his presence.

‘Is there anything wrong with the brain?’

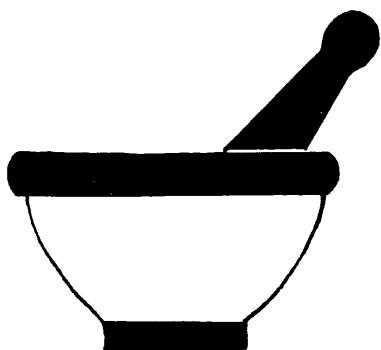
‘Necrosis and bile-staining of the Hippocampus, Corpus Luysi, Lentiform and Olivary Nuclei.’ —— An immediate answer.

An eye-brow was lifted in the direction of the blackboard, the puzzled frown gave way to a broad smile —— The attendant has forgotten to clean off the entry of the day before.

* * * *

‘If you want a lift in my car, you’d better clean your shoes on the grass.’

I was outside.



Second Year Writes

When it came to the First Comprehensive Test in Anatomy, everybody wished the summer vacation had been spent more wisely. For a few days before the final moment, the attendance curve at lectures dropped sharply to the base-line. Or else those present were having blood-shot eyes (could it have been an endemic of conjunctivitis?) or half-closed eyes (was this their prophylactic measure against picking up conjunctivitis from their learned colleagues?) or better still and empty gaze (in which case the lecturer's operating frequency would not have been received at all). But the library suddenly became the most popular resort, even though it meant running the risk of haemorrhoids. Some wise guy was underlining his text with a Chinese brush in order to cover up the previous lining in red and blue. Another one discovered he hadn't even put a cover on his book let alone touching it in any other way.

* * * *

But the nightmare was soon over and all awoke to be greeted by happy smiling feminine faces: all 25 of them strong, freshly imported into the First Year Class. Nobody would like to be behind in a wild-goose chase. And so a knowledge of anatomy was most helpful in guiding the gentle hands of the novice at dissection: no one seemed to mind carrying the Heavy-weight champion (Gray's Anatomy) back everyday just in case some fair lady signalled S.O.S. Gallantry could be shown in more ways than one, such for example as offering a seat in the congested canteen at lunch-time to someone fair but not square, and then making sure to recommend a dish that would take the longest time to come just to ensure a perfect rendezvous.

* * * *

When it came to socialising with the girls of Kowloon Maryknoll School, none could be more eager. It was arranged to have four cars at the Star Ferry to provide transport for the ladies: but no later than half an hour before time, ten cars were there to offer the service. No doubt, the early bird catches the worm.

* * * *

The longest hour of the week came during the Physiology tutorial, when the Prof. himself conducted the class. He would pick a few victims who would have to answer questions before the whole assembly. When standing before the execution, no amount of books or notes could buy the way out, nores erve of adrenaline could not be used up, no grey-cell could have been more empty. If ever one wished to see involuntary tremor, come and have a look!



First Year Writes

To begin with life was very much a chaos. One had to make doubly sure of the correct lecture-room before going in, a mistake would be very regrettable: a lecture-room occupied by the seniors could blast one out sooner than a rocket. Further confusion arose when a Class Representative had to be elected, for nobody was yet acquainted with everybody. One unassuming lad, whose name was suggested in the election, gave a lengthy speech as if he was running for the Union Presidency. Then it was decided that the newly-elected he-Class-Rep should be entitled to have a she-Class-Rep to share his domestic problems: a cross-match was then done for him.

* * * *

Someone remarked that day by day he is like going through a series of torture chambers, and a never-ending series too. Every afternoon his tears run like a stream for he is allergic to formalin, but formalin and dissection go so well together that he just has to put up with the tear-gas. In the morning, he received the most treacherous stab at the finger from his neighbour, and a few drops of his precious blood was violently squeezed out for the purpose of an experiment which yielded no result because the blood sample was not generous enough. Another painful stab was inflicted. This was repeated until all five of his fingers were ultimately involved. He was still suffering from the effects of his blood loss when the physical training session called for a marathon led by some wise guy who had just too much energy to spill over. The next day at the Organic Chemistry Laboratory he burnt his finger because the next fellow forgot to turn off the burner. Then at the Physiology laboratory he thought he was just going to pith the frog like he had done so many times before, well this time the frog decided to bite him for a change. He sighed and wondered what next?

* * * *

The Viva still poses the greatest threat to life. One can't help but wonder whether this is a School intended to teach the art of prolonging life or to help shorten it, for surely anyone who goes through all these Vivas is likely to have his life expectancy reduced by anything up to five years.

Results of Competition held in Elixir No. 1, 1966.

The respective answers should be:—

1. Nethersole Hospital
2. Tung Wah Hospital
3. Tung Wah Eastern Hospital
4. Central Hospital
5. Canossa Hospital



The winners were:—

After Prize—Distribution

First Prize: Mr. Wong Chun Bong (4th Year)

Second Prize: Mr. Wong Chun Kuen (2nd Year)

Third Prize: Mr. Wong Tai Wai (2nd Year)

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PARKE-DAVIS

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Stockholm and Hong Kong

BY IVAN HUSMARK

So there we were, two medical students from Sweden, in Hong Kong thousands of miles from home. We had travelled through Siberia, Mongolia and China and we settled down in good old University Hall for a nice unusual holiday after a very thorough and well guided tour to five different cities in China.

We, Michael Berglund and myself, Ivan Husmark, are not used to the kind of summer you have here; that's one of the reasons for our expectation of an unusual holiday. Back home we have an air humidity of about 40% and a temperature of 20 - 30 degrees centigrade and typhoons just don't exist. A water-temperature of about 18 degrees is considered just perfect, 20 being somewhat too lukewarm for swimming.

U-hall seems to be populated by the most excellent students. They deserve all my admiration since they not only survived but also attended lectures dressed in shirt-and-tie, read thick books on different subjects all night through, played the guitar and chatted with us; all this in a heat which to me was a good enough excuse for doing nothing at all! I would like to analyse the weird mind who once put summer studies on Hong Kong - students' schedules!

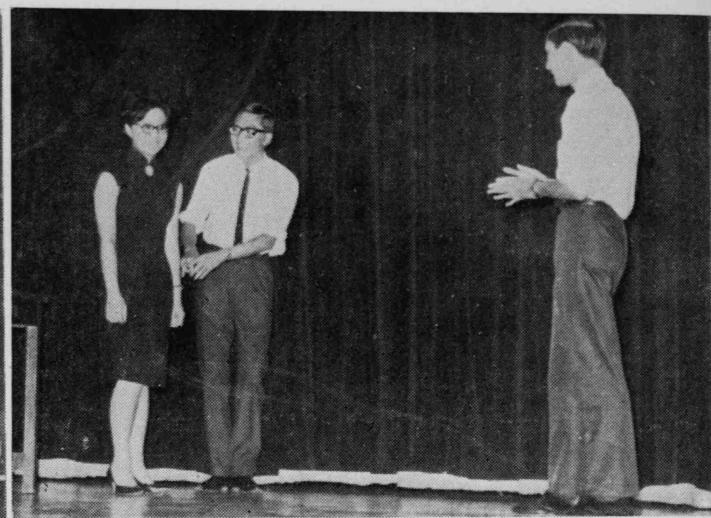
In other respects medical students seem to be pretty much the same everywhere; we study talk and enjoy ourselves much the same way. There are a few differences though. There is the difference in space in which to move around of course; there you are victims of circumstances beyond control. Then you have a delicate position in the midst of everything that is politically important to all mankind right now; in this respect Stockholm and Hong Kong are entirely different. We are free to comment and express our views on these matters whereas you have to refrain.

The lectures I overheard were the most elegant and instructive I have witnessed so far, although the sarcastic flavour of many remarks from your teachers on medical student's general behaviour would have stricken me as unusually unfair had they not been so witty and basically well-meaning. The English tutorial system has set an example for the Swedish medical educational system as it is developed at present.

The lack of doctors in Sweden gives us an opportunity to work as doctors while we are studying, thereby giving us means to support ourselves during the last three years of our studies. My own experience is that motivation for further studies is greatly enhanced by responsibility. I am led to believe, though, that this system of ours is rather unique, but I can assure you that so far it has caused no disaster. This is mostly due to common sense on the part of the students, skill and thorough education on the part of the nurses, great patience and understanding on the part of the staff.

It is my hope that you will find it possible to do the same journey we did although it will be in the opposite direction of course. The route is comparatively cheap if you go by Japan to Russia where they give separate visas, which are not entered in your eventual passports. The trans-siberian railway is worth the experience and Russian domestic airlines are cheap. I must warn you though that Europe certainly is more expensive than Hong Kong. Regrettably Sweden is at the absolute top in this respect, but do come! I think you might find it worth while.

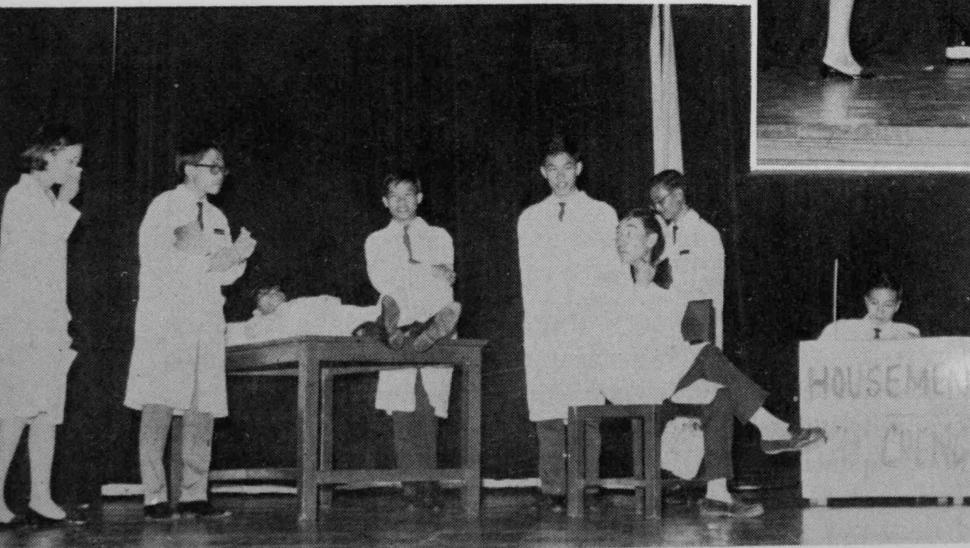
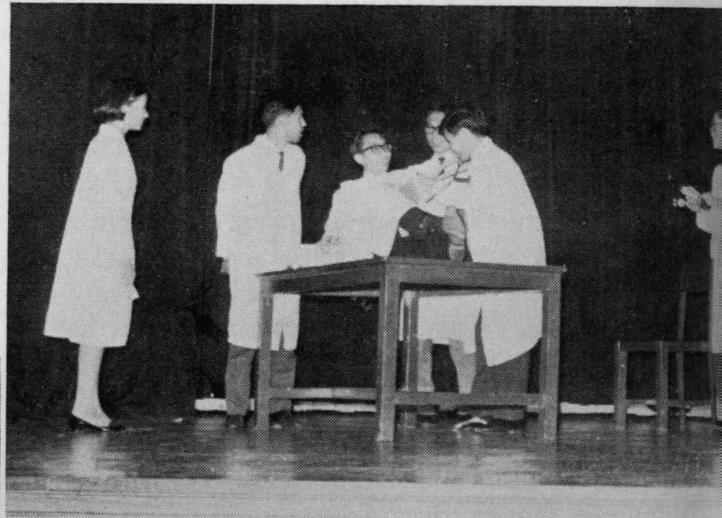
OUR MED - NITE



Music is a stimulant to mental exertion—
Disraeli.

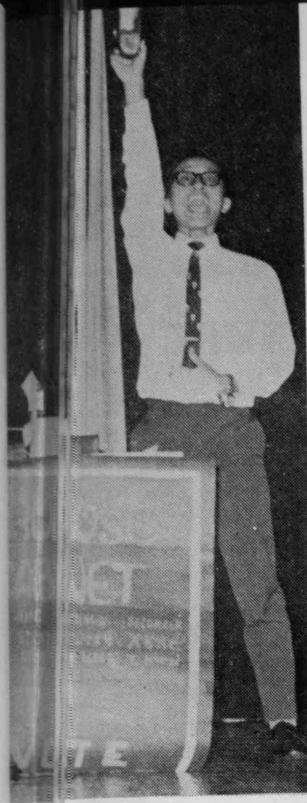
The Final Year put on so much exertion that
they deservedly took away the First Prize

When you hear 'the sound of music' with
your stet, fret not, for "Music, like many
other things worth living for, begins in the
heart"—Geo. Hahn

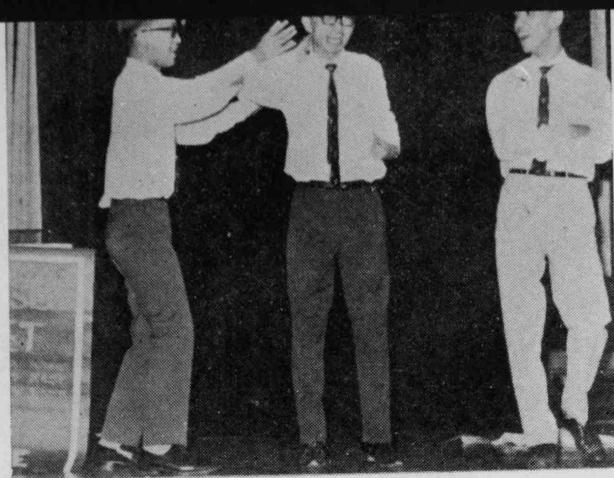


The best of mimics gave the
Fourth Year the Second Prize

Mention must also be made of the delightful performance provided by Dr. Franklin Li, Dr. A. Chan, Dr. P. C. Chan and Dr. Donald Chan. To them our grateful thanks!

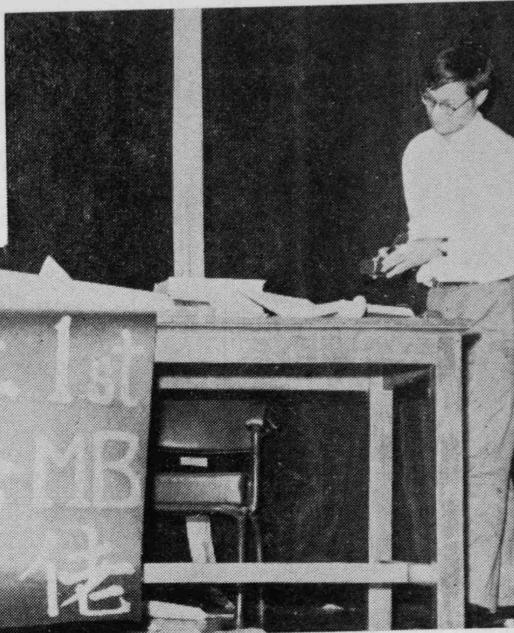


Kruzaev couldn't have done better



An action-full performance by Third Year

So you want to a chairman, learn the a-b-c first

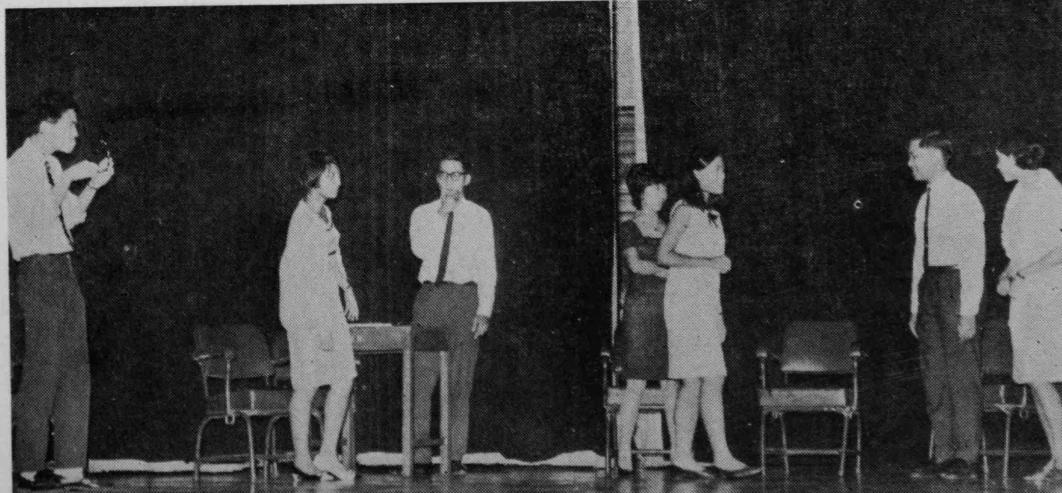


The World belongs to the energetic—Emerson



"Music is perhaps the best recreation in the world. It is also the best unifier in the world. It is the best bond of Comradeship."—Dr. Frank Crane.

Thus, the Third Prize went to the Second Year



First Year refined our
s with an excerpt from
"Pygmalion"

ave the
rize

C. Chas

HONG KONG UNIVERSITY MEDICAL SOCIETY

ANNUAL REPORT (1965 - 1966)

The Hong Kong University Medical Society has successfully passed another academic year.

With the addition of a steward into the Committee and the opening of our new canteen a further step is taken towards the promotion of the interest and welfare of its members and with the joining in the Asian Regional Medical Students' Association as one of its founder members progress is made towards the promotion of cooperation and contact among medical students of Asia and Australia.

The following is a summary of the events during the past academic year.

THE STEWARD

At the Extraordinary General Meeting held on November 30, 1965, a steward was added to our Committee. The duty of whom is to be responsible for all domestic concerns of the Society—our Canteen and our Common Room mainly.

STUDENTS' WELFARE

Elixir Loan Fund

Total contributions and donations received since establishment	\$28,294.00
10 loans of \$1000 each	\$10,000.00
Balance of funds at Oct., 1966	\$18,294.00

The 10 loans distributed was twice the number given out last year.

The Canteen

On the 7th of January, 1966, our Canteen at the Medical Students' Centre opened into service. The opening hours are from 8.00 a.m. to 8.00 p.m. During lunch hours a fixed number of 'quick' dishes are available.

The Students' Common Room

During the summer vacation, the Society received a letter from the Dean saying that the Locker Room on the 2nd floor, Li Shu Fan Building would be temporarily given to the Society as our Common Room.

Lockers had been rearranged systematically in the Common Room and the Estates and Maintenance Office had agreed to lend us furniture until the Society has enough funds to provide furniture of her own.

Guided tour for new Clinical Students

An information sheet was issued to the new clinical students. Some representatives of the class were shown around Queen Mary Hospital to help them to get orientated.

Freshmen Information Service

A Freshmen Information Desk was set up during the Registration Period. Information sheets were distributed to the new students. Sales of secondhand books, microscopes, skeletons and a guided tour of the Preclinical Building was arranged. The Society is much indebted to the third year students who helped us by sacrificing their time and energy to help their colleagues.

ACADEMIC AND CULTURAL ACTIVITIES

Presidential Address

On 1st April, the Presidential Address was delivered by Dr. Carol Braga at the Physiology Lecture Theatre. The Address—Our Medical School—was both interesting and informative. A group photo was taken and tea was served before the Address at the Canteen.

Christmas Gifts for Sick Children

On December 22, a group of 'merry makers'—members of our Society trooped to Sandy Bay Convalescent Home and the Children's Wards of Queen Mary Hospital to cheer the children up with gifts and carol singing. We owed much to our Santa Claus Mr. Stephen Leung who lightened all the children's hearts with his happy good wishes.

Film Show

Throughout the year, film shows were arranged for members. The Medical Society wishes to thank Professor Ong and the Department of Surgery, the Department of Medicine, who helped us to make the various arrangements.

SOCIAL ACTIVITIES

The Barbecue

Over 300 people attended the first function of the year of the Society held on December 6, 1965. Tickets were sold at \$2.00 to members. The programme included music by the Nautics, a treasure hunt, group singing and the barbecue.

The Starlight Dance

The Informal Gathering was held in the Canteen on 10th February, the good music by the Playboys, the light refreshment and the warmth of the late winter evening contributed to the happy and relaxing night.

The Annual Ball

The Medical Ball 1966 held at the Peninsula Hotel on June 4, was attended by over 100 people. Our guest singer Miss Judy Jim and our special guest players the Medical Band lightened up the evening with their music. Dr. Carol Braga drew the winning tickets for the Raffle Draw. The first prize—a roundtrip ticket to Singapore—went to a first year medical student.

The profits of the Ball—a total of \$6500 went to the Elixir Loan Fund.

The Launch Picnic

Our Launch Picnic took place on August 18, 1966—a rainy day. Over 70 high spirited members amongst them Dr. Franklin Li went for a round the island cruise on board the S. S. Wing Hang. A few courageous members went for a dip in the cool dark sea. The food was gorgeous and the Launch Picnic fun. The Society owes much to the Winthrop Representatives who sponsored the function.

Medical Night

The last function of the year—the Med Nite was held on October 18, 1966, at the Loke Yew Hall. The Programme included music by the Medical Band with Dr. Franklin Li, Dr. A. Chan and Dr. P. C. Chan, folks songs by Dr. Donald Chan and interclass light drama competition. The first prize went to the final year, the runners-up the fourth year. Trophies were presented to our sportsmen and winners of the interclass sports competitions.

SPORTS

Interfaculty Games

In the interfaculty games the Medics obtained the following results

Champions in :	Table tennis
	Lawn tennis
Runners-up in:	Football
	Badminton
Third in :	Basket ball
	Softball
	Volley Ball

We scored 46 points and lost by 8 points to the Arts students in the Omega Rose Bowl Competition, but throughout our victories and defeats a spirit of comradeship and sportsmanship persisted.

Interclass Competition

This year an interclass table tennis tournament was introduced for ladies. On June 2 and June 6, 1966, students from all four years competed in the interclass Braga Cup contest. Results were—

Table tennis (Ladies)	—1st year	Champion
	2nd year	Runners-up
Table tennis (men)	—3rd year	Champion
	4th year	Runners-up
Volleyball (men)	—4th year	Champion
	2nd year	Runners-up
Basket Ball (men)	—2nd year	Champion
	1st year	Runners-up
Badminton (men)	—4th year	Champion
	1st year	Runners-up

The fourth, second, and first years got equal marks and the Braga Cup would be kept evenly through the year by them.

A Cup was also awarded to the Best Sportsman of the Medical Society—Mr. Kwan Man Woo.

The Society gratefully acknowledges thanks to Dr. Braga and Dr. Todd who have kindly donated the Braga Cup and the Cup for the best sportsman of the year of the Medical Society.

PUBLICATIONS

The Elixir

Under the guidance of Professor Lin and through the diligent work of our editors, the first issue of the Elixir was distributed in September, 1966. From the first issue an appropriation of \$2000 was directed to the Elixir Loan Fund. The second issue is expected to be out by December this year. The Society owes much to the endless efforts of the Elixir Editors.

Society Handbooks

The Society handbooks containing the revised Society constitution and list of names, addresses, and halls of medical students were printed and distributed to members in January, 1966.

ASIAN REGIONAL MEDICAL STUDENTS ASSOCIATION

In December, 1965 a selection committee consisting of staff members of our Society was formed to appoint a delegate to represent the Medical Society at the ARMISA Inaugural Conference to be held in March, 1966. Mr. Chang Pai Tak was appointed the delegate.

The attendance of our delegate to the conference in Singapore was made possible by grants from the Chinese Medical Association and private donors.

By attending this conference, the Medical Society joined in an international students association devoted to the co-operation and mutual assistance between medical students of the member countries—Australia, Singapore, Malaysia and Hong Kong.

At the Conference it was decided that the Hong Kong University Medical Society will form the Standing Committee on Medical Education and Health and will be host country for the second General Assembly of ARMSA taking place in July, 1967.

OTHERS

Society Christmas Cards were printed and met with great approval from members. They were sold at 20 cents each.

Past Examination Papers were printed and distributed as usual.

Society keyrings, ties, car badges, and pennants were sold to members.

Lockers at Queen Mary Hospital were rearranged and keys were rented to students at \$1.00 each.

Medical Journals—B M J and Practitioner were ordered at special concession rates for students.

Visitors:

Medical students from other countries visited Hong Kong on study tours were received by the Society.

In Dec., 1965—8 students from Sydney University, they were—

Mr. I. Kalnius,	Mr. J. Liu,
Mr. G. Devlin,	Mr. P. Ng,
Mr. R. Murray,	Mr. W. K. Siu,
Mr. T. Liu,	Mr. B. McCurdie.

In June, 1966—2 students from Royal Caroline Medical Institute, Stockholm, Sweden.

Mr. Ivan Husmark and Mr. Michael Berglund. In June, 1966—2 Nuffield Scholars from United Kingdom.

Mr. John Powell Jackson from Guys Hospital
Mr. L. J. Findley from Sheffield University.

Thanks are due to Mr. Llewellyn for the provision of lodgings to the visitors at the University Hall during their stay.

Throughout the year the Medical Society was much indebted to Dr. Carol Braga, our President for her constant guidance, Professor J. B. Gibson, our Vice-President for his valuable advice, Dr. K. S. Lai, our Hon. Treasurer for his understanding and patience, and to Dr. Franklin Li, our Graduates' Representative for his generous and enthusiastic support.

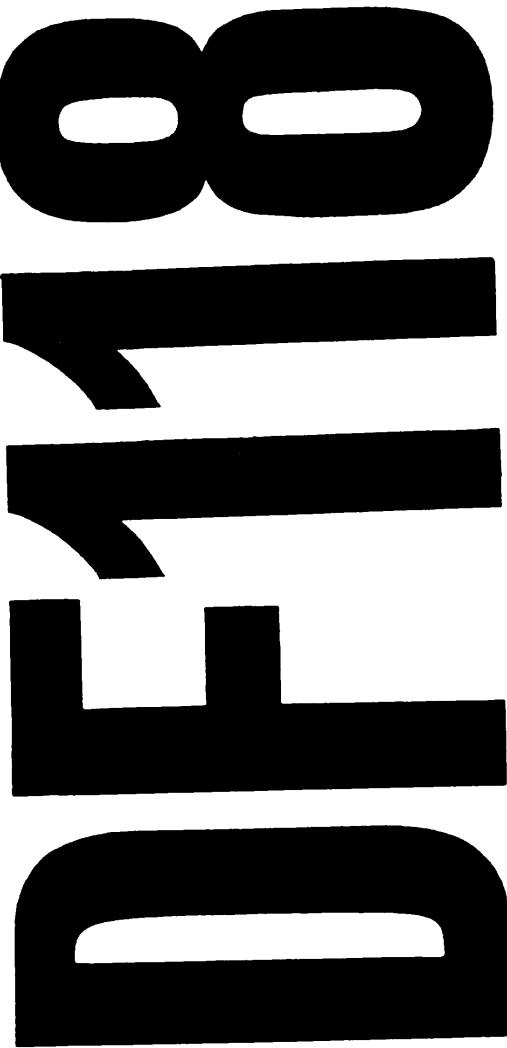
*Sd. CHRISTINA WANG,
Hon. Secretary.*

* * * * *

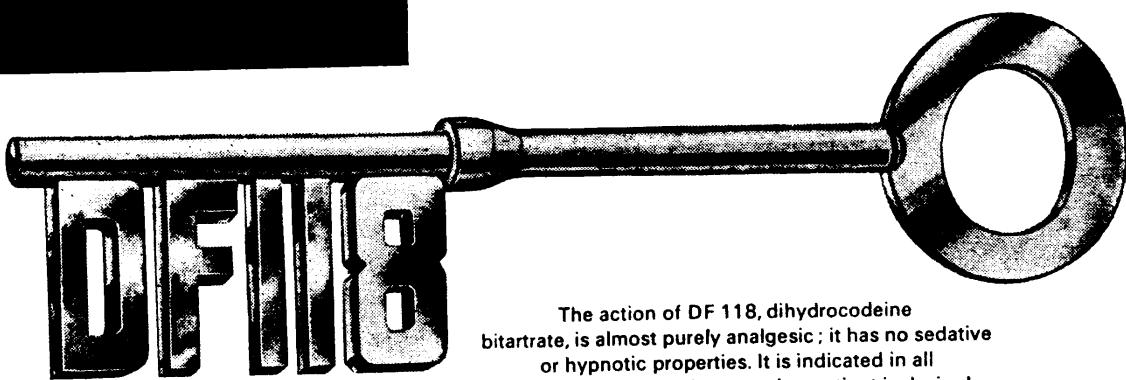
ABSTRACT

Successful culture of *Mycobacterium Leprae* in Laboratory: Reported in DISCOVERY Vol. XXVII No. 9 September 1966.

Dr. R. Chatterjee from John-Hopkins-Leonard Wood Memorial Laboratory in the School of Hygiene in Baltimore reported that this has been done by using a complex medium containing serum, the snack being a very acid medium. At a temperature below 32 degrees Centigrade the bacilli went through a characteristic cycle of development, one of the morphological variants may be a stage in human infection. The importance of a successful culture lies in the possible development of vaccine and effective anti-leprosy drugs.



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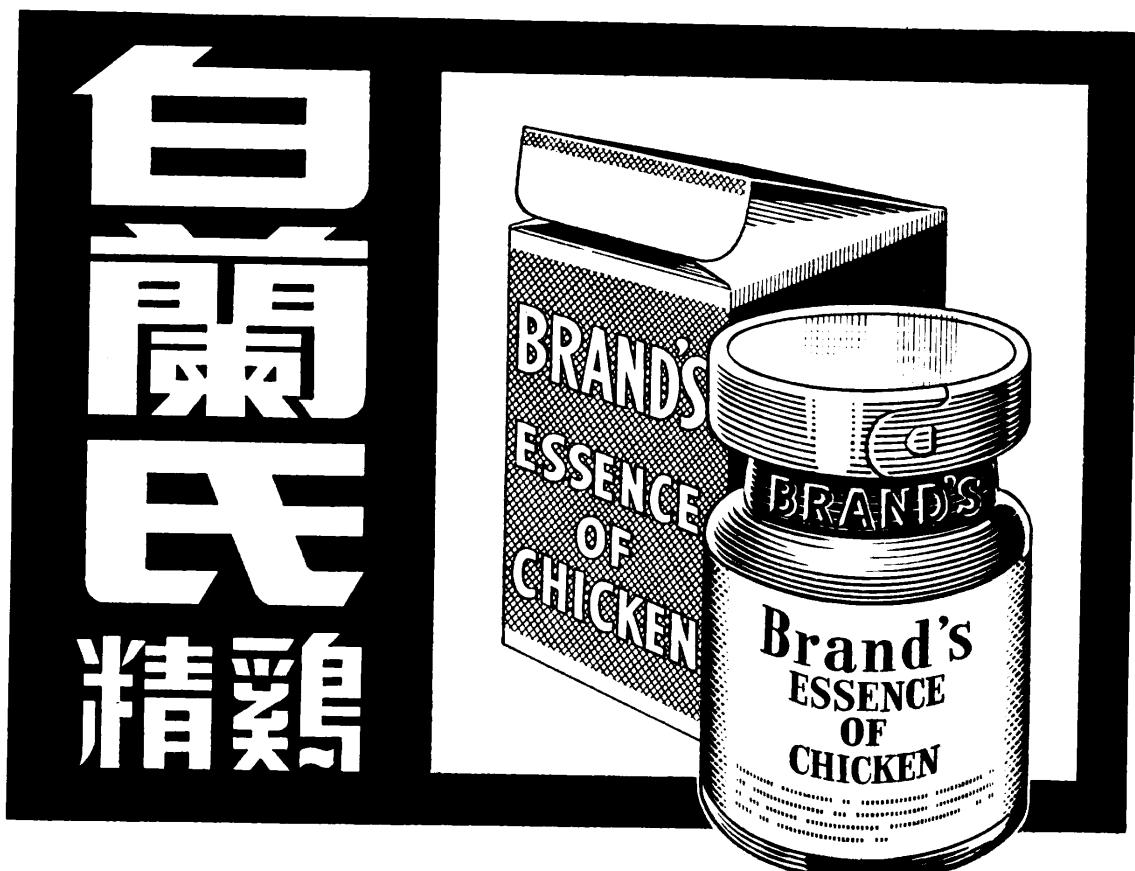
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ASIAN REGIONAL MEDICAL STUDENT ASSOCIATION

2nd General Assembly
Place: HONG KONG
Time: July 2 - July 11, 1967

Tentative Programme

<i>JULY 2, SUNDAY</i>	Arrival
<i>JULY 3, MONDAY</i>	Morning — Free
	Afternoon — Opening Ceremony at Li Shu Fan Building
	Evening — Cocktail and dinner
<i>JULY 4, TUESDAY</i>	Morning — Meeting (Conference Room at Dean's office)
	Afternoon — Tour University campus & QM Hospital
	Evening — Dinner at Union Canteen
<i>JULY 5, WEDNESDAY</i>	Morning — Meeting
	Afternoon — Meeting
	Evening — Dinner at Medical Canteen
<i>JULY 6, THURSDAY</i>	Morning — Meeting
	Afternoon — Launch
	Evening — Launch
<i>JULY 7, FRIDAY</i>	Morning — Tour hospitals (QEH, Castle Peak)
	Afternoon — New Territories
	Evening — New Territories
<i>JULY 8, SATURDAY</i>	Morning — Meeting
	Afternoon — Sandy Bay
	Evening — Dance
<i>JULY 9, SUNDAY</i>	Morning — Free
	Afternoon — Free
	Evening — Free
<i>JULY 10, MONDAY</i>	Morning — Free
	Afternoon — Meeting—Final Session
	Evening — Free
<i>JULY 11, TUESDAY</i>	Tour Lantao Island and Hay Ling Chau.

So, hurry up and participate actively by enlisting as a member of the:—
Standing Committee on Medical Education and Health (SCOMEH)
ARMSA 2nd General Assembly Organising Committee.

Simply write to ARMSA, Medical Society, c/o Student's Union,
University of Hong Kong, Hong Kong,
Or just inform your Class Representative.

LOOKING BACK AT THE FIRST TERM

— F. K. H.

Were you there on Med-Nite?—No? Oh, you'll never know what you missed! Lots of fun, laughter, excellent performance, and . . . and . . . and lots to eat. So, make sure you have your share next year.

Do you know that the Department of Biochemistry has revolutionised its system of lecture? Now, several courses run simultaneously, that is, A course in Methods and Techniques (1 lecture/week); A course in General Biochemistry (2 lectures/week); A course on Special Topics (1 lecture/week).

Did you notice some graduates were taking examinations in Anatomy, Physiology, and Pathology again? Well, for the first time in Hong Kong the Royal College of Surgery (Edinburgh) held the Primary (Basic Science) Examination of its Fellowship Examination here, at the Department of Anatomy. There were 29 candidates, some of them came from other parts of the Far East.

Have you attended any of the evening lecture-demonstrations organised by the Department of Paediatrics in conjunction with the Hong Kong Chinese Medical Association? There was a whole series of them, attendance was overwhelming.

Read on for more of what has happened during these past few months:

October 3 *Department of Surgery:*
"Patho-Physiology of Peptic Ulcer"—Mr. James Kyle, M.Ch. (Belf.), F.R.C.S. Consultant Surgeon, Aberdeen, Royal Infirmary.

October 7 *Department of Pathology and Bacteriology:*
"The Pathogenesis and the Cytological Diagnosis of Cervical Cancer"—Dr. William M. Christopherson, M.D., Professor and Chairman, Department of Pathology, University of Louisville, Louisville, Kentucky, U.S.A.

October 8 *Department of Surgery:*
Pan-Pacific Surgical Meeting.

October 11 *Department of Paediatrics:*
"Newer Concepts and their Importance to Paediatric Practice"—Professor C. E. Field.

October 14 *Department of Paediatrics:*
"The Nephrotic Syndrome"—Dr. Tsao Yen Chow.

October 18 *H.K.U. Medical Society:*
Medical Night, at Loke Yew Hall, H.K.U.

Department of Paediatrics:
"The Management of Neonatal Jaundice"—Dr. S. C. Hu.

October 21 *Department of Paediatrics:*
"Seminar on Congenital Heart Disease: 1. Clinical and Diagnostic Aspects. 2. Medical Care. 3. Surgical Treatment."—Dr. J. Y. C. Pan, Dr. A. Chau and Professor G. B. Ong.

October 24 *Department of Pathology and Bacteriology:*
"Respiratory Virus Diseases"—Dr. H. G. Pereira, M. D., Head of Division of the W.H.O. World Influenza Centre.

LOOKING BACK AT THE FIRST TERM

October 25 *H.K.U. Medical Society:*
Medical Society Committee Meeting.

Department of Paediatrics:
"Congenital Abnormalities and Genetic Counselling"—Dr. A. Chau.

October 27 *Department of Pathology and Bacteriology:*
"The Structure of Viruses"—D. H. G. Pereira, M.D., Head of Division of the W.H.O. World Influenza Centre.

October 28 *Department of Paediatrics:*
"Infant Feeding and its Problems"—Professor C. E. Field and Dr. S. Wong.

October 31 *Department of Pathology and Bacteriology:*
"Abnormal Haemoglobins"—Professor G. M. Edington, M.B.E., M.D., F. C. Path., M.R.C.P., D.C.P., D.T.M. & H., Professor of Pathology, University of Ibadan, Nigeria.

November 1 *Faculty of Medicine:*
"The causes of Cancer"—Professor E. Boyland, Chester Beatty Research Institute, Royal Cancer Hospital, London.

Department of Paediatrics:
"Seminar on Mental Retardation"—Dr. Tsao Yen Chow & Staff of Department of Paediatrics.

November 2 *Department of Surgery:*
"Carcinoma of Stomach"—Mr. J. W. W. Thomson, Senior Lecturer in Surgery, University of Edinburgh.

Department of Gynaecology and Obstetrics:
"Progress in Treatment of Erythroblastosis Foetalis"—Dr. Ralph C. Benson M.D., University of Oregon. Followed by a film show.

November 4 *H.K.U. Medical Society:*
2nd Extraordinary General Meeting—concerning the revision of constitution as proposed by the Committee.
20th Annual General Meeting of the H.K.U. Medical Society.

Department of Paediatrics:
"Blood Disorders and their Management"—Dr. K. H. Luke.

November 7 F.R.C.S. Part 1 Examination.

November 8 F.R.C.S. Part 1 Examination.

Department of Paediatrics:
"The Neonate"—Dr. Johnson Lee.

November 9 *Department of Gynaecology and Obstetrics:*
"The Honolulu Congress"—Dr. Braga's Report.

November 11 F.R.C.S. Part 1 Viva Examination.

Department of Obstetrics and Gynaecology and Medicine:
"Chemotherapy of Acute Leukaemia"—Dr. James F. Holland, Chief of Medicine A, Roswell Park Memorial Institute.

November 11 *Department of Paediatrics:*

“Panel Discussion; Drug Therapy in Children”—Professor R.C.Y. Lin, Dr. Frank Hsu, Dr. S. C. Hu and Professor C. E. Field.

November 14 F.R.C.S. Part 1 Viva Examination.

November 18 *H.K.U. Medical Society:*

Extraordinary General Meeting for the General Election.

November 23 *Department of Gynaecology and Obstetrics:*

“A Case of Virulism in a Chinese Girl”.

November 25 *H.K.U. Medical Society:*

Medical Society Committee Meeting.

November 30 *Department of Gynaecology and Obstetrics:*

Professor Chun's Report on her trip.

Medical Society Lunch Time Film Shows

December 2 *Public Lecture:*

“Laboratory Diagnosis of Anaemia”—Dr. David Todd, M.D., F.R.C.P.

December 8 Medical Society Barbecue

December 13 *Department of Pathology and Bacteriology*

“The Identification of Clostridia”—A.T. Willis, Reader of Microbiology, Monash University, Victoria, Australia.

(The writer wishes to thank all the Departments for the supply of information listed above).

* * * * *

What is the best treatment for a moustache and beard in a young healthy woman aged 24?

The best is yet shaving, for this purpose the electric razor is best. Inferior alternatives include pulling the hair out by epilating wax; rubbing repeatedly with a piece of smooth pumice stone; application of depilatories, electrolysis, and diathermy. In patients whose only abnormality is excessive hair on the face, endocrine treatment has not so far proved to be of any use. (Condensed from an excerpt in “**ANY QUESTIONS**” compiled by the B.M.J.)

值夜隨筆

我在贊育醫院三樓當值夜班，不知不覺已是凌晨四時許了，夜，是多麼恬靜，多麼安詳，我凝望着漆黑的海洋，遙遠地閃爍着五彩燈光。病人都似乎酣睡着，什麼痛苦，什麼憂慮，在寂靜中，都消逝了。

突然，護士驚叫及叱罵聲劃破了靜寂，隨着一個頭髮蓬鬆的婦人，頹喪地躡回自己的病床，她蒼白的面孔，在黯淡的光管下顯得更蒼白，更悽婉了，一雙呆滯的目光，突遭恐懼，失望，不禁顯得更呆滯，更不知所措！然而忠於職守的護士，怒氣衝衝地斥逐她：「你怎能就這樣跑進那嬰兒房裏。你倒狡滑，竟由後門進去，我差點看不到你。須知醫生們進去也要另外穿袍帶口罩等，你的孩子若病了，倒不要緊，最糟是連累了別人的……」

黑夜的瑪利醫院比起日間的忙碌緊張，真是不可同日而語，可是它一樣有人呻吟，一樣有人等待死神，一樣有人急症入院，一樣有人愛莫能助！

那夜有一個細小的婦人在「鍾士」房前的長櫈上假寐着，晚上九時半仍未返家。我細心慰問她，本欲帶件絨線衣給她，以免她着涼。她却這樣向我低訴：「她是我媽媽，今年已是七十三歲了，平日替我看管兒女，好讓我賣生菜來維持生活。唉！都是我不好，由她一個人在家，以致她暈倒在地，她生時我未能使她有什麼享受，但願我能盡點女兒的責任，好好地在她未去世之前服侍她……我是不走的，我是希望她能清醒一刻，好讓我去見她最後一面……就算她不能清醒我也要在她身傍……啊！但願我能夠點女兒的責任，好好地服侍她！但願……」

這不是呻吟的聲音嗎？短短的一聲，低沉，微弱，不自覺，在肅寂夜間的瑪利醫院裏，本是最普通不過的事，然而我却感到無比的絞痛，因為我知道那小小的一聲所隱藏着無限的淒酸，苦楚！一個劇痛的脊骨及腳，已是夠受

了，加上一個破碎的心，永遠願意為愛人供獻及犧牲一切，永遠祈待着他回來，永遠無時無刻的思念着他，祝福他，却又知道他不再愛她了！她日間是何等愉快，何等輕鬆，有說有笑，只是夜間她才願意一洒傷心的淚，靜靜的嗚咽。啊！又是她的聲音了，輕微的一聲……

她是一個三十五歲初產的婦人，丈夫隔別了十幾年，如今竟要剖腹取兒，而兒子却在第二日死了。我欲安慰她幾句，故趁着有點空閒時間，雖已是夜幕低垂，仍去探訪她，她的丈夫已沒有去看她幾天了，她看見我倒高興，細問她兒子出世時的重量：「我自己是不把他養大，我不會，先生說還是交給別人料理好。唔！他是個男孩，他有六磅十二安士，是嗎？你說是六磅十二安士嗎？啊！是！六磅十二安士……六磅十二安士……」

晚上九時半瑪利醫院五樓出現了兩個陌生人，手裏提着一袋東西，在走廊裏徘徊，良久還未找到目的地，我不禁上前問問他們。「我們是找『亞追成』房，有個朋友明日出院，我們是從大角咀來的，帶些衣服給他換，明日我們又要返工，不能陪他出院，」我聽不懂房的名稱，繼續問下去才知道是一間男性大病房，而他的朋友是患傳染性黃疸病，我便親自帶他們到三樓的『愛狄臣』房了。

那是我住醫院的最後一晚，倍覺依依不捨。我呆呆地望着廣闊的海洋，皎潔的月亮，星兒點點，不斷地閃爍着。夜，是最美麗，最迷人的最安詳的。我感到造物者的偉大，上帝的慈愛，永遠的眷顧我們。我酷愛醫院生涯，大概是因為我與主接近得多吧！我感到人與人之間的愛，我更感到救世者的愛：「神愛世人，甚至將他的獨生子賜給他們，叫一切信他的，不至滅亡，反得永生。」

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RESULTS OF FINAL M.B., B.S. DEGREE EXAMINATION IN MAY, 1966

M.B.,B.S. with Honours:

Yu Yan, William (Distinctions in Anatomy, Physiology, Pharmacology, Surgery, Obstetrics & Gynaecology)

M.B.,B.S.

AU Kwok Ping (Distinction in Anatomy)
CHAN Charn Sing (Distinction in Biochemistry)
CHAN Chin Bong, Lawrence (Distinctions in Paediatrics, Medicine)
CHAN Lo Chi
CHAN Sau Yee, Ann (Miss)
CHAN Tsoi Tsuen, George
CHAN Wing Hang
CHAN Wing Hoi, David (Distinction in Pharmacology)
CHAN Ying Chih
CHAN Ying Shek
CHANG Sze Wang (Distinctions in Biochemistry, Medicine)
CHENG, Rosalia Yuen Kong (Miss)
CHIU Hung-Cheung, John
CHUK Pui Chun (Distinction in Pharmacology)
HO Siu-Wai, Joseph
HUANG Chen Ya (Distinctions in Pharmacology, Medicine)
KAAN Sheung-Shun, Kenneth
LAM Kui Chun (Distinctions in Anatomy, Prev. & Social Medicine)
LAU See Heung, Peter
LEE Wah Keung
LEE Wing-Hon, Victor
LEUNG Chun-Yin, Daniel
LEUNG Ming-Kit, Paul
LEUNG Nai Kong (Distinctions in Anatomy, Physiology)
LEUNG Ping Chung
LEUNG Sai Wing, Michael
LI Kai Leung
LIM Boon Tock
LO Ngah Man, Josephine (Miss)
LOUIE Wai Ying, Stephen (Distinctions in Pharmacology, Prev. & Social Medicine)
LUI Man Hang, Loretta (Miss)
MAK Yat Cheong
MAU Kwok-Yung
PANG Kwok Hung
PAU Wing Iu, Patrick (Distinction in Prev. & Social Medicine)
POON Yui Chee
SIU Mei, Connie (Miss) (Distinctions in Pharmacology, Obs. & Gyn.)
SUNG Man Ling (Miss)
TAM Ping Yiu
TAM Wai Chau
TUNG Ki Luk
WONG Kam Chuen
WONG Ling Chui, Rosamond (Miss)
WONG Po Yee (Miss)
WONG Siew Hua (Miss)
WU Chi Li, Wallace
WU Pui Chee (Miss) (Distinctions in Physiology, Pathology, Prev. & Social Medicine)
YEUNG Chung Him
YIP Leung-Bun, Michael
YU Tak Yan, David (Distinctions in Biochemistry, Obs. & Gyn.)
YUE Shu Hoi, Andrew (Distinctions in Biochemistry, Prev. & Social Medicine)

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Hock, C.W. (1961)
J.med.Ass.Ga., 50, 485

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THE RAPID-ACTING ANTI-DIARRHOEAL

Lomotil Searle

NEWS FROM THE GAZETTE

1ST NOVEMBER, 1966

HONOURS

Dr. Lau Man-Hin, M.B.,B.S. (1935): *Serving Brother of the Most Venerable Order of the Hospital of St. John of Jerusalem.*

PERSONALIA

Professor A. R. Hodgson attended the S.I.C.O.T. meeting in Paris during September 4-9, 1966, and the meeting of the British Orthopaedic Association in Edinburgh during September 29-October 1, 1966.

Professor A. J. S. McFadzean, Professor G. B. Ong, and Dr. D. Todd, Senior Lecturer in Medicine, have been appointed members of the Medical Council of Hong Kong for three years from July 8, 1966.

Professor Lo Hisang-Lin has been appointed external examiner in history at the Nanyang University in Singapore.

Professor E. O'Farrell Walsh was appointed external examiner for a Ph.D. degree candidature in the University of London.

Professor R. C. Y. Lin attended a summer workshop on Classical Physiology and Modern Instrumentation and participated in a research project at Baylor University, Texas. He also attended the Fall Meeting of the American Physiological Society held in Houston, Texas, during June 6-August 31, 1966.

Dr. D. Todd, Senior Lecturer in Medicine, attended and read two papers at the XIth Congress of the International Society of Haematology held in Sydney, Australia during August 21-27, 1966. He also attended a Symposium on Haematology

at the University of Melbourne Medical School during September 1-3, 1966 and presented a paper on 'Thalassaemia-Haemoglobin H Disease' at the Royal Children's Hospital, Melbourne.

COUNCIL

Gifts

Sir Shiu-kin Tang: a grant of HK\$2,500 to Professor K. S. F. Chang for research in the growth and development of Chinese children in Hong Kong.

Wardenship

Dr. P. N. Mo, Lecturer in Physiology, appointed Warden of Morrison Hall for one year from September 1, 1966.

SENATE

Commonwealth Scholarships for 1966-68

The following graduates of the University have been awarded Commonwealth Scholarships for 1966-68:

(Miss) Chan Mo Wah, M.B.,B.S. (1962), Lecturer in Medicine, to study medicine at St. Mary's Hospital Medical School, London.

Cheng Chi-yan, M.B.,B.S. (1963), Lecturer in Surgery, to study surgery at the Institute of Basic Medical Sciences, London.

Yeung Chap-Yung, M.B.,B.S. (1961) to study paediatrics at the Institute of Child Health, London and Edinburgh.

Raymond Yang Medical Bursary

The Senate has accepted the offer for the award of the Raymond Yang Medical Bursary for a further period of three years from 1966-67.

FACULTY OF MEDICINE

Appointments

Ip Moon Choi, M.Sc. (Hong Kong), Ph.D. (Durham), Temporary Lecturer, appointed Lecturer in Anatomy from January 1, 1966.

Richard Yu Yue-Hong, M.B.,B.S. (Hong Kong), Ph.D. (London), M.R.C.P. (Edinburgh), appointed Lecturer in Medicine from July 13, 1966.

Donald Yu Yu-Chiu, M.B.,B.S. (Hong Kong), M.R.C.P. (Edinburgh), appointed Lecturer in Medicine from July 15, 1966.

Ting C. Yu, M.B.,B.S., B.Sc. (London), M.R.C.P. (Edinburgh and London), appointed Lecturer in Medicine from October 10, 1966.

Gabriel Chung Shing Ha, M.B.,B.S. (Hong Kong), appointed Lecturer in Paediatrics from July 1, 1966.

James Wang Chi-Ching, Dip.Med. (Aurora), Demonstrator in Anatomy, appointed Assistant Lecturer in Physiology from July 18, 1966.

Visiting Scholar

Dr. Boyd Webster, a Rotary Foundation Scholar from New Zealand, arrived on August 31, 1966, for a year's study with the Department of Pathology.

Prizes

The following prizes have been awarded on the results of degree examinations held in May 1966:

Anderson Gold Medal: William Yu Yan

Chan Kai Ming Prize: William Yu Yan

C. P. Fong Medal in Medicine:

Chang Sze Wang and Huang Chen Yu

Digby Memorial Gold Medal in Surgery:

William Yu Yan

Gordon King Prize in Obstetrics and Gynaecology:

William Yu Yan

Ho Kam Tong Prize in Preventive and Social Medicine:

Constant Cheng Po Kong

Leave of absence

(Miss) Chan Mo Wah, Lecturer in Medicine, and F. C. Y. Cheng, Lecturer in Surgery, have been granted special leave for two years from September 1, 1966 to enable them to take up Commonwealth Scholarships for further studies in the United Kingdom.

PUBLICATIONS

DEPARTMENT OF MEDICINE

A. J. S. McFadzean and D. Todd: 'Anaemia in postnecrotic cirrhosis of the liver with splenomegaly', *Abstracts of Papers XIth Congress of the International Society of Haematology*, P. 149, (Sydney, August 1966).

D. Todd: 'Family studies of hydrops foetalis with haemoglobin barts', *Abstracts of Papers XIth Congress of the International Society of Haematology* P. 269, (Sydney, August 1966).

DEPARTMENTS OF MEDICINE AND SURGERY

A. J. S. McFadzean and G. B. Ong: 'Intrahepatic typhoid carriers', *British Medical Journal* Vol. 1, No. 5503, pp. 1567-1571 (25 June 1966).

DEPARTMENT OF PAEDIATRICS

Y. C. Tsao: 'Genital intersex', *Far East Medical Journal* Vol. 2, No. 7, pp. 222-227 (July 1966).

DEPARTMENT OF PATHOLOGY AND BACTERIOLOGY

J. Grant: 'Macrogranulocytes and diseases', *Far East Medical Journal* Vol. 2, No. 8, pp. 256-264 (August 1966).

DEPARTMENT OF PHYSIOLOGY

A. C. L. Hsieh: 'Thyroid requirement in rats exposed to cold', *Gunma Symposia on Endocrinology* Vol. 3, pp. 239-248 (1966).

B. P. N. Mo (with E. Leong Way, Collin P. Quock, in collaboration with P. M. Yap, George Ou, S. C. Chau and T. Cheng): 'Evaluation of the nalorphine pupil diagnostic test for narcotic usage in long-term heroin and opium addicts', *Clinical Pharmacology and Therapeutics* Vol. 7, No. 3, pp. 300 (May-June 1966).

* * * * *



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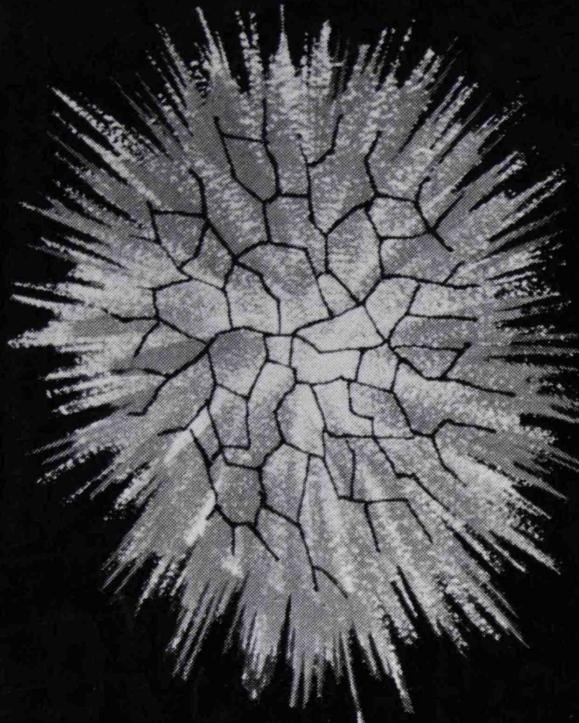
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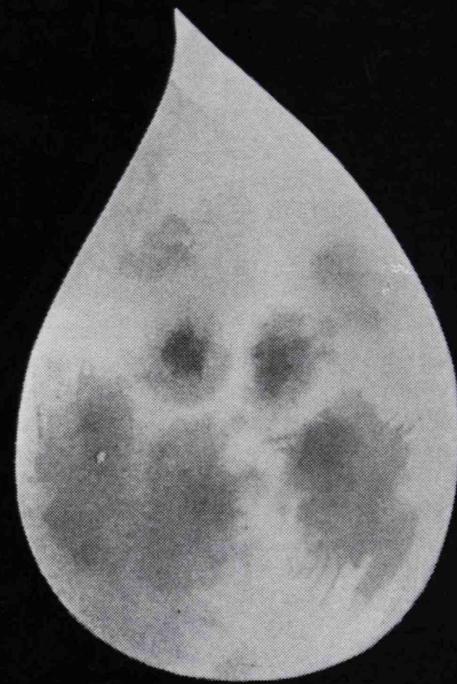
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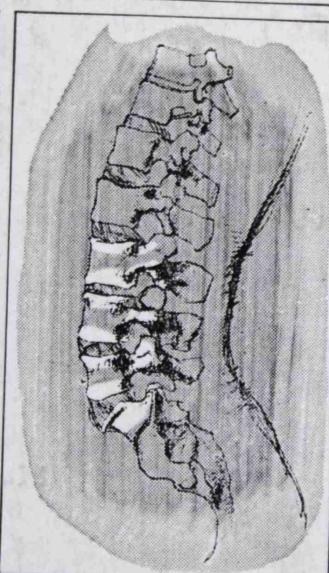
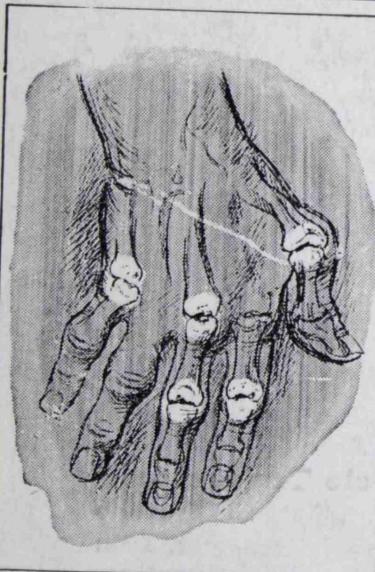
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References: 1. Smyth, C. J. and Godfrey, R.: The treatment of rheumatoid spondylitis with indomethacin, *Arthr. and Rheum.* 7:345, June 1964 (Proceedings of the Annual Meeting of the American Rheumatism Association, San Francisco, June 18-19, 1964).

2. Hart, F. D. and Boardman, P. L.: Indomethacin, *Practitioner* 192:828-832, June 1964.

3. Norcross, B. M.: Treatment of connective tissue diseases with a new non-steroidal compound (indomethacin), *Arthr. and Rheum.* 6:290, June 1963. (Proceedings of the Annual Meeting of the American Rheumatism Association, Atlantic City, June 13-14, 1963). (Also in: Abstracts of Communications — Fifth European Congress on Rheumatic Diseases, August 25-28, 1963, Stockholm, Sweden.)

4. Wanka, J., and Dixon, A. St. J.: Treatment of osteo-arthritis of the hip with indomethacin. A controlled clinical trial, *Ann. rheum. Dis.* 23:288-294, 1964.

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