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啟思

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關於被訪者的資料

接受訪問的一共有一百四十五人，大部份是第一次參觀醫學會的展覽會，男仕和女仕的人數相等。年齡方面，一半是十五至三十歲，而一半是三十歲以上。職業方面，大部份都與教育有關，其中更以中學生為多，而老師也有數位，其他的職業很廣泛，包括數位工友，與及一位天主教修女。

展覽會的主題和水準

被訪者都一致地認為主題適合，而且水準不錯。

車衣工友劉小姐覺得內容相當豐富，主題很好，很適合現今社會的需要。

教師朱太是第一次參觀醫學會的展覽。她覺得以第一次

普通，不夠深入。對一些缺乏認識的年青人或會有新的感覺，但由於他曾經教授衛生的關係，便覺得不夠深入了。但他認為展覽會有價值，因為可以介紹年青人認識正常的性知識，免除他們的好奇心，使他們對性有正確的態度，不會覺得有什麼特別，因而可以控制自己和有正當的心理反應，因為很多的性罪行是出於好奇和對性有不正常的心理反應。

對展覽會場的內容編排的意見

被訪問者都覺得會場內空氣不暢通，而且由於人太多的原因，以致秩序有些混亂。陳太提議可以舉辦流動動性的展會或者把展期延長，作為解決的方法。

內容方面，教師馮先生認為圖片較為相對。不大清楚。

若果色調鮮明些，效果會更好。另一方面，主題的表達亦有不適合觀眾的感覺，太過於學術性。他認為若果擴大些範圍，包括更多問題，將更容易避免青年人產生誤解。性生理方面可以粗略些，因為較為普及。

吳先生亦覺得模型太少。如果多些模型，效果將能加強一些醫學的基本知識會很難明白。

建築系司機歐陽先生則認為展覽只是在字面上，若果缺

中大王同學則提議加上社會上對性的各種看法，例如宗教上，或社會學上。內容也缺少了關於難產的知識。

對講解同學的意見

在九月中舉辦的「性與健康」展覽會已經完滿結束。雖然「性」的問題會一度引起爭論，但從各方面收集來的意見都顯示出這一次的展覽會很成功，很受歡迎。同學們的努力結出了美好的成果。

展覽期中「啟思」訪問了一些參觀者。除了徵詢他們對展覽會的意見外，更把握了這個機會，訪問了他們對大學生的印象。

舉辦有關「性」的展覽未說，水準已是很不錯。主題也很切合香港現今的情況。

一位梁同學則認為內容為太過偏重女性，只有很少部份適合他。他很欣賞大會標誌的設計。

編委會

「性與健康」展覽會參觀者的訪問



舉辦展覽會和參與社會性活動的意見

吳先生則認為同學們好像是介紹一些書本知識，缺乏對問題的深入了解，因此有不切實際的感覺。這一點是需要改善的。

工友劉先生覺得這次的展覽會做得很好，很有意思，因為可以幫助市民，與及一般知識水準低，沒有機會受太多教育的人，去了解和認識這些問題。

梁同學認為展覽會可以幫助中學同學認識更多事物，因為在學校內學不到這方面的知識。

陸太太也認為大學生應該多做灌輸知識工作，把所學的介紹出來。

劉小姐則認為大學生每年化去納稅人不少金錢，總得對社會作出一些貢獻。

馮先生表示大學生的學習和社會分不開。把所學的用不同形式貢獻給社會也就更有意見。



歐陽先生認為展覽會可提高青年人的知識水準。對市民大眾都有益處。他也提出在國內大學生們正是時刻地把所學的提供給社會。

對於社會性活動的參與公務員彭先生認為大學生應該多接觸社會。

浸會書院賴同學也表示大學生已經走出校園，多去了解社會的事物，參與社會性活動是必然的事。

朱太認為大學生應該多一些社會各階層的情況，和人與人之間的關係，向社會多做一點東西。如果現在開始對社會有認識，多些接觸，將來在社會上工作時候便會理智地去分析事物，和更有把握地處理各樣事情，不敢完全

……我們這麼接近，但又得那麼遙遠……

一個星期日的早上，在母校碰到了一位要好的舊同學，他第一句就開聲說：「某君飲毒死了，我上星期從報章上看到這件消息；不知他是否我們認識的那一位呢？聽說他是住在三村家的。」

「呀！是了，就是他；他本來住在仁愛收容所，最近才遷進三村安置區，還不到一月呢！我本來打算上星期去探他的……你是從那份報章得知的。」

「××日報，他們還訪問了他的妻子。」

「毒殺人」這件新聞，在這兩星期內，差不多每天都報章大字標題的報導，怎會不知道呢，只是由於功課和活動太繁忙了，以至是讀了標題就沒有顧到內容吧！想不到某君竟然是第一批飲毒死去的其中一個。

我與其君認識不到兩個月；當時他住在仁愛村收容所，房屋司署劃地給他一家在三村家安置區搭木屋居住，就是爲他申請民政署之津貼的認識的。從一些朋友口中得知，他相

當好酒及賭博，常常因此而至無以爲牧；雖然自從他失業，便每月領取公共援助六百多元，但他還是要每月向親友借貸，才能渡日。

在我認識他的時候，就已經知道他因酗酒而患上肝硬化，醫生一早就勸他戒酒；但他總說沒有酒飲，他的身體將變得更壞。

某君死了，但他遺下的妻子及四名幼小的兒女又怎樣呢？爲了要知道整件事的經過及了解他們一家之現況，於是便在那天下午乘車到三村去探望他們。由鯉魚門巴士站開始，走了十多分鐘，終於在那梯田式的廿多間鐵皮屋中，我看

他們居住的一間。某君的太太面上竟毫無憂傷的表現，大概連日來設者及警方的詢問使她麻木了吧，亦或，他的丈夫死不足惜。寒喧幾句後，我便單刀直入問她丈夫死之前後之事，這是我第一次這樣做，真怕提起她的傷心事而令她號哭，好在，自此至今，她都保持了冷靜的情緒。

原來某君是於九月廿七日去世的，他在那天飲了些酒，便覺得眼瞓及頭昏，於是便睡在床，到了下午，還是覺得不適，於便再飲些酒，以圖解除痛苦，但在飲酒後，便發生嘔吐，於是她妻子便替他到聯合醫院求診，當值的醫生說他患眼疾，便寫紙給他依利沙伯醫生看，他的妻子見勢色不安，便立即把他送往聯合醫院，該院醫生還是說他患有眼疾，促他住院求醫，可是某君越來越痛苦，於是便召十字車把他送往醫院，就在當晚，他便去世了，死時，他的妻子正趕回家中帶他的兒女來見他。

死後，他的屍交由警方保管，直至檢屍後才由他的妻子領回。他們一家五口仍然是領取公共援助渡日；三個較大的兒子亦已進入附近一所幼稚園讀書，細的則留在家裏。他的妻子希望能夠獲得徙置區單位，以免受風吹雨打之苦，同時亦易於照顧兒女。

就這樣，一個壯年時代的男子離去了，遺留下來的，就是他的妻子和四個兒女；我在想，究竟那些人應對這件事情負責？究竟那些人怎對那四個幼小的孩子負責？是社會風氣

……，大家傳播界鼓吹之享樂主義？是他們父親好酗酒之個性？是教某君飲酒的豬朋狗友？是那製造毒酒之奸商？是那對賣毒酒給他的六十多歲夫婦？是聯合醫院當值醫生診斷的錯診？是現代醫學之失敗？這一切都有可能，然而，自己亦未盡知。朋友之誼，勸他戒酒。

「現代搞醫療，不應只注重消除疾病，還要走較積極的一面，就是建立個人的健康。」

「現代醫學，不再把病人當作一個個案，而應視之爲人；人是不停地受着環境的影響。因此，心裏和社會因素，就不能忽畧了。」

在病房做臨時時，發覺不少病人有肝硬化，亦知道其中有很多是酗酒所致；我們都管不着，我們只希望有更多機會觸摸多幾個病人，增加自己的經驗，我們都不會留意他們將是生是死，更管不到他的家庭……。

同學們，我們能做些什麼？

這刻，我們這麼接近，但又顯得那麼遙遠。

有很多是酗酒所致；我們都管不着，我們只希望有更多機會觸摸多幾個病人，增加自己的經驗，我們都不會留意他們將是生是死，更管不到他的家庭……。

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(五) 應訂下一條規則，觀眾可以作任何即席批評，喝彩程度以不引起人身或物件損害或引致該劇不能繼續演至完場為限，否則，評劇扣除該班的演出分數。扣除多少，以破壞性質及人數成正比例。例如該班的批評，意見或即興演出是正確和有見地，有建設性或精彩的則應加分。

(六) 各班演出之後，可由各班負責人陸續出台，對本班及其他各班的演出作出總結批評，幫助評劇評分，負責人亦應有一段時間答覆台下詢問。

(七) 評劇主席在報告名次時，須報告各級在各方面的得失分數。

以上只是提議大綱，是否可行，當然還有很多要商討的地方，只希望這提議，能引起各位同學對 MEDIC NITE 多想一想，努力使它成爲一個更有樂趣的活動。

聯誼夜 雜聞 夜 話 (花) (絮)

聯誼夜是聯誼會在這學期中活動之一，已經在十月八日

晚假座陸佑堂舉行過了。這項活動最主要的目的，顧名思義，是希望各級同學有機會相聚一起，大家互相認識，藉此促進互相了解及班與班的團結。

筆者於當日下午，被同學「捉」去護送幻燈銀幕，通得提前往陸佑堂。孰知到已經有很多同學在做準備工作；台上、台上及排演的學生，忙成一片，但值得一提的是大家互相合作，各級參加當夜表演的同學都能竭誠及認真地演習！

當接近八時，陸佑堂開始熱鬧起來，雖然來的大多數是

一年級同學，但二、三甚至四、五年級的亦大不乏人，這是

一年級的照辦夷碗，不但不求上進，還對觀眾滿意，而當

觀眾的嘈吵不一定是不良現象，很多大受歡迎的流行歐曲那顯然是演出的失敗，即使不向觀眾致歉，也應面紅耳赤。

NITE 諸公，在同樣情形下，能一年復一年的照辦夷碗，不但不求上進，還對觀眾滿意，而當

觀眾的嘈吵不一定是不良現象，很多大受歡迎的流行歐曲那顯然是演出的失敗，即使不向觀眾致歉，也應面紅耳赤。

其實，要舉行一個熱鬧抒發情緒但又

令觀眾滿意，而演出者又不遭受的節目，而當

觀眾因無聊不滿而嘈吵時，又諸多「勸告

」，令人百思不得其解。

值得鼓舞的。各同學來到時要請十位其他同學簽名，此舉不單是節目之一，同時亦藉此機會使各同學有機會互相認識及談話。隔了一段時間，在幾位同學帶領之下，熱鬧的土風舞開始；當各人感到有點力不從心時，節目主持人亦見機便告開始；當各人安坐下來之後，一連串的節目表演亦開始；計有一年級的合唱，二年級的二人樂隊，三年級的絲網舞，還有一、四年級同學中樂表演，壓軸表演是由一、二、三年級合力演出的戲劇，獲得全場不少笑聲及掌聲；在表演中亦有幻燈片放映，介紹學生的生活，使到初入醫學的同學認識到以往同學所遇到的問題及生活，其中所含的意義巨大！

最後聯誼之夜就在融洽及愉快的氣氛中結束！

(花)

(絮)

他，口中雖不喊著，身體酸軟，却仍見他不時從台前跑到台後，無分身不暇，責任心重也！

分身不暇，責任心重也！

他，當晚在各項節目結束後，方知「聯誼夜」幕後主持人藍

芷宇當晚在吃晚飯，同時在節目未開始時，手指發脹，各

位同學有何高見？

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MEDIC CONCERT '75

Li Chung Ki

Despite the typhoon and rain on that day the Medic Concert was held as scheduled.

Although we are to blame for being over-optimistic in booking the full seating capacity of Loke Yew Hall, which is over 700, we have reasons to be disappointed at the attendance of less than 200 that evening. Whether this reflects an inadequacy of publicity on the part of the organizing committee or simply indifference of medical students to the occasion remains a puzzle, and one can always blame the weather.

The Medic Concert is only in its embryonic form and will need years of maturation before it can be firmly established as one of the important occasions of the Medical Faculty.

Although only the second occasion of its kind, this year's concert can claim to have improved in certain respects. It is a general belief that our standard of music is lower than that of the secondary schools, the Chinese University and even the other faculties of the University of Hong Kong. One of the aims of the concert is to prove that musical talents are always present in our faculty and they only need to be given the opportunity to express themselves.

Of the thirteen programmes offered in this year's concert eleven were performed exclusively by members of the Medical Faculty. Guest performers from other faculties were invited as a gesture of good will towards our fellow students in the University.

Admittedly, our demanding curriculum has its toll on our gifted musicians, many of whom have to sacrifice their practising hours for their school work, with a consequent diminution in their virtuosity and confidence over the year. All the same, most of them need only some polishing up to be back at their very best.

The Medical Faculty can now proudly claim that we have a String Orchestra of our own, possibly the only one in existence in the University of Hong Kong. Although its standard cannot be compared with those of the secondary schools or the Chinese University. While the programmes performed were quite rudimentary, it is good enough for a start. We may even be able to see a Medic Chinese Orchestra or Medic Symphony Orchestra in the near future. Let us hope that the orchestra will not become another project of fleeting existence.

The concert has also tried to promote friendly relationship among fellow students as well as between students and staff. This is probably the only occasion when lecturers can actively participate in student activity and their presence was heartily welcome, as could be evidenced by the warm ovation they received from the audience. However, the search for staff performers was by no means exhaustive and it is hoped that many more lecturers can participate in the future, if not as performers, at least as audience.

The ultimate aim of the concert is to promote the interest of music in the Medical Faculty. With this in mind, the programme has been designed to suit the average audience. However, little can be achieved if only those well-acquainted with music comes to the concert, and if music appreciation is made an annual event it would be more logical to promote musical interest on a continuous basis throughout the year — in the form of lunch time concerts of recorded music, training classes, talent quests, inter-year and inter-faculty competitions and the Medic concert as the culmination of these efforts. All these have been proved possible with sports and other extra-curriculum activities. Would it be possible with music as well?



MEDIC CONCERT AND MEDIC NITE

Li Chi Him

One can but be surprised at noticing the great difference in popularity between the Medic Concert and the Medic Nite. The attendance at the former event was so poor that only a few rows in Loke Yew Hall were seated, whereas the Medic Nite attracted a considerable large number of audience.

Surely, the reason for this cannot be that preparation for the concert was inadequate or that the acting participants were all incapable of good performance. Indeed, one can easily see that the organizers for the concert have done as much (if not more) preparatory work as those for the Nite. The date for the concert was known well beforehand and a notice was placed on each table of the canteen on that day. On the other hand, many students knew the date for the Medic Nite only in that very morning. (Propaganda for the nite was unsatisfactory probably because of the unexpected holiday brought about by a typhoon the day before). One can also just as easily see that the concert performers, each of them possesses the talent of interest in music and who had revised their pieces thoroughly, could hardly produce a concert less enjoyable than the Medic Nite, in which many of the actors found they were to act in a loosely composed play only at the very last moment. Thus, the question arises: if the Medic Concert was enjoyable and its propaganda good, why was it so badly received?

I am not here advocating the abolition of the Medic Nite. It is a good device — a valve — for an outlet from academic burden, though the possibility of its fulfilling aims as stated by the minutes of the fifth

Emergency Council Meeting of the Medical Students' Council — to promote friendship between (among) classes and between staff and students . . . for those who were interested in drama to exchange ideas — was highly debatable. I am only lamenting on the fact that the crude performances of the Medic Nite, accompanied by all the hustle and bustle (paper aeroplanes and whistles, clash and nearly wrestle) could be so well tolerated while the fine piano solos, mixed duets, operetta, choir, orchestral and other performances could be so little appreciated.

Doctors are esteemed to be some of the most learned, repeatable scholars. Yet, if we, as doctors-to-be are to show so little taste for the fine sides of culture such as music but are to potter away our time with ruthless acts of rattle in drama, are we not inviting scandal to our future profession?

A taste for fine arts is what every scholar should possess, but the sanity to act responsible, especially in occasions such as the Medic Nite, is what every same person should have. Have some of us lacked both?

I wish to avail myself of the opportunity here to put forward two questions; one for the organizers of the next Medic Nite, and one for those of the next Medic Concert respectively. The first is: is it possible to set a rule saying that the plays must be well thought-out and rehearsed several times before they are staged? The second is: can anything be done to cure medical students of their numbness to the fine arts of music?