

# 編輯的話

執筆之時，《啓思》第二期的出版已完成大半。短短一年的莊期，很快便完結了。回顧兩期《啓思》，都實踐了初時我們編輯部的目標：讓同學有自由發表的空間，以及增進同學之間的認識。

《啓思》能圖文並茂的把同學們的寫作分享給全醫學院所有同學，能提供醫學院學生有關的資訊，能為同學們提供趣味，而且是實實在在拿在手上的。最重要的，《啓思》更是醫學院學生的文化遺產，它能讓過去、現在、將來的學生作為交流的工具，只要閱讀不同時期的《啓思》就能知道不同時期醫學院學生的文化。

出版一本刊物需要同學的貢獻，所以今年兩期《啓思》能順利出版要多謝各位投稿的同學，希望將來同學仍能支持《啓思》，讓這文化遺產能延續下去。

麥子揚

副編輯

## Editorial

This is our second and last issue of Caduceus in 2005. It is a real challenge to get involved in the publication of a reader like Caduceus for all students in the Faculty of Medicine, as I had no experience before. However, there is no denying that it is great fun working with students from different studies. We had super efficient meetings. We set interesting themes for interviews. We had loads of to-be-proofread stuff to go through. And we gave birth to these two issues of Caduceus. It is not an easy and short task to do, but it is really rewarding and fun. At least it is to me. And we hope that you find Caduceus is rewarding and fun as I do.

In order to publish this issue, lots of people have contributed their efforts without which this Caduceus wouldn't have been born. Special thanks to Dr Chan, Dr Ip, Dr Ngan and Dr Wong, who are really enthusiastic to help and have generously spared some time for our interviews. Thanks to those who supported Caduceus, whether by submitting articles or by cherishing every essay published. Thanks to all our committees who have dedicated themselves to Caduceus from the start. Last but not least, thank you for choosing Caduceus. Take your time and enjoy every bit of it.

Ng Kam Man, Tony

General Editor

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# CADUCEUS

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# The Science of Naming

## Lala United

*Words are, of course, the most powerful drug used by mankind.*

— *Rudyard Kipling*

### Three's a crowd

Drugs often have several names. Not just plain, simple names, but names that are often long winding and tongue twisting. This has added not only to the avalanche of confusion already experienced by medical students, but has indeed led to fatal medical errors in practice. An 8-year-old died after receiving methadone instead of methylphenidate and a 50-year-old woman was hospitalized after taking Flomax instead of Volmax. It was estimated that in the United States, some 7,000 to 20,000 people each year die or are injured as a consequence of drug name confusion.

In response to the dramatic increase in drug substances being registered during the last decades, authoritative bodies were established and stringent procedures implemented to minimize the risk of name confusion. Naming a drug is no easy task. Indeed, it might come as a surprise to many that the acquisition of a name for a drug can cost up to millions of dollars.

The name of a drug has to go through a series of procedures before it can become official. In general, a drug has three different names: a chemical name, a generic name, and a trade name. Each of these names has different development procedures, different usage, and different legal power.

### In the beginning was the word...

Upon the first discovery of a drug, it is given a chemical name, which basically describes the molecular structure of the drug e.g. 7-chloro-1,3-dihydro-1-methyl-5-phenyl-2H-1,4-benzodiazepine-2-one. This name does not require pre-approval or registration and is primarily used by researchers and not in medical practice. As this chemical name is obviously too complex and cumbersome for every day use, a shorthand version or a code name is often developed for easy reference among researchers e.g. RU486, MK869.

The generic name is also known as the "International Nonpropriety Name" (INN). The INN system, an international nomenclature system for pharmaceutical products, was initiated by the WHO and began operating in 1953. Its establishment remains crucial for the clear identification, safe prescription, and dispensing of medicines, as well as for communication and exchange of information among health professionals and scientists worldwide.

INNs are public property. They belong to the public and no company can claim legal right to them. INNs are globally recognized and are intended for use in pharmacopoeias, labeling, product information, drug regulation and scientific literature. As a result of ongoing collaboration with the WHO, national nomenclatures such as British Approved Names (BAN), United States Accepted Names (USAN), and Japanese Adopted Names (JAN) are nowadays synonymous with INN.

### To be or not to be

To aid manufacturers in devising INNs for novel pharmaceutical substances, the WHO has issued a set of detailed guidelines, the principles of which selection of INNs should be based on. The two primary principles are:

1) INNs should be distinctive in sound and spelling. They should not be inconveniently long and should not be liable to confusion with names in common use.

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2) The INN for a substance belonging to a group of pharmacologically related substances should, where appropriate, show this relationship.

To demonstrate pharmacological relationship, generic names are coined using an established stem. The WHO has published a comprehensive document which lists the common stems for which chemical or pharmacological categories have been established. This is an important feature of the INN system. Names that include defined stems are easier to remember and give clues as to its intended usage. Below are a few examples of some common stems:

– **olol**

β-adrenergic blocker

e.g. acebutalol, metoprolol, propranolol

– **mycin**

antibiotics produced by Streptomyces strains

e.g. azithromycin, clarithromycin, clindamycin

– **terol**

bronchodilators, phenethylamine derivatives

e.g. formoterol, salmeterol, tobusterol

– **tidine**

histamine H<sub>2</sub>-receptor antagonists, cimetidine derivatives

e.g. famotidine, lafutidine, ranitidine

Just as an interesting fact, generic drug names do not begin with the letters H, J, K, or W because those letters do not exist in some countries, or have different sounds in various languages.

A group of experts, known as the WHO Expert Advisory Panel on the International Pharmacopoeia and Pharmaceutical Preparations, assumes the responsibility of selecting new INNs. The whole selection process of a new INN, from its application to its publication, requires months or, maybe, even years. First, an application is submitted to the WHO by the manufacturer either directly or through a corresponding national nomenclature authority, such as the USAN Council. Precise information on the drug as well as suggested nonpropriety names must be provided along with the request. The panel will then examine each proposed name and decide on which one to adopt. In about 6 months' time, a name will be selected and be granted status as a "proposed INN". The proposed INN will then be published for the next 4 months. During this time, any person can put forward comments or objection to the name e.g. on basis of similarity with an existing name. If the objection is accepted, then a new round of selection will be carried out and the whole selection process repeated. If no objection is raised, then the name will be published a second time as a "recommended INN". This name will, under most circumstances, not be modified and is ready for use in labeling and publications on drug information.

### **The survival of the fittest**

By the time a pharmaceutical company's clinical researchers are busy completing phase I testing of a drug, their marketing counterparts are working hard to develop a trade or brand name. The trade name is known as the "propriety" name. The manufacturing company owns exclusive property of that name. Although the company is permitted to

choose its own trade name, FDA approval is still mandatory. The FDA prohibits names that might stir confusion and names that imply efficacy. For example, names like "SaveYourLife" or "CancerCure" will not be approved. The FDA also checks for potential look-alike and sound-alike problems. Apart from having computers break down the drug names by syllables and compare them mathematically to other drug names to search for similarities, marketing researchers even ask doctors to write down the drug names as if they were writing a prescription. The researchers then study the doctors' handwriting samples, particularly the sloppy ones, to check for resemblances to other drug names. The FDA reviews about 400 brand names a year and about one-third are being rejected.

Trade names are usually catchy, relatively easy to remember, and suggest a characteristic of a drug. For example, Lopressor lowers blood pressure, Skelaxin relaxes skeletal muscles, and Lipitor means "lipid regulator". Sometimes, the trade name is simply a shortened version of the drug's generic name e.g. Minocin for minocycline. The FDA only accepts brand names of products to be filed for new drug application. This requirement distinguishes them from generic names.

Drug patents grant the manufacturing company exclusive rights to a drug for 20 years. Usually, the company has only about half of the patent time to exclusively market a new drug. After the patent has expired, other companies may produce and sell the generic version of the drug. The generic drug may be sold under its generic name or under a different trade name, but not under the same one used by the original patent-holder. However, all new brand names must also be approved by the FDA before marketing.

## **The name game**

Names are an integral part of developing a new drug. Most drug companies would want a name that can boost sales, while consumers wish for names that are user-friendly. Because of today's tough trademark requirements, it has now become a trend for drug companies to turn to a growing industry of "naming" consultants for the difficult task. With the recent increase in direct-to-consumer advertising, naming consultants are charged with creating unique names that will appeal to both doctors and patients. The biggest naming success of all is perhaps Viagra, Pfizer's so-called breakthrough drug for the treatment of erectile dysfunction. The prefix "vi-" connotes vigor and vitality, while the name Viagra rhymes with Niagara, conjuring images of the power and fury of the Niagara Falls.

It was estimated that the entire process of naming a drug costs a pharmaceutical company about \$500,000 to \$2.5 million US on average. Nonetheless, considering the hundreds of millions of dollars invested in bringing a new drug into the market, this fraction is tiny, yet worthy.

With all this effort going into naming drugs, it begs the question, does it really matter what the name of a drug is? Would a Viagra pill by any other name still rake \$1.7 billion a year? Maybe. But drug companies these days aren't taking the chance. We are all in some ways subject to marketing everywhere we look. Although the drug's name is not the sole determinant of its success, "a powerful brand draws consumers to it like moths to flame" (Igor International).

## Health Committee 2005

Health Committee was set up to provide an opportunity for students to serve the community by carrying out health-caring activities (e.g. providing basic medical check-ups, educational services, etc.). Besides, students of our faculty are encouraged to participate in our services and talk to our clients about their health concerns in the counseling sessions. We also aimed at raising the health consciousness of both the students and the public. This is important to their health as some diseases can progress without any hint. The Health Committee consists of four departments: the Estate department, which mainly organizes health check-up services in housing estates; the Community Center department which coordinates with community centers to provide talks and check-up services, the Education department which provides educational talks to students, new immigrants and elderly people, and the Outreach department which organizes visits to the clients' homes for more in-depth care and services.

### Community Center Department

As a member of the Faculty of Medicine, we are all very fortunate, but have you ever thought of those people that are less privileged than us? Having normal sight, one of the five senses we have taken for granted, is already a huge blessing. Our service at the Ebenezer Home for the Visually Impaired brought us into contact with old people who had poor visions.

At the beginning of this school year, we collaborated with the Caritas Center for the Elderly (Aberdeen) on the service project on Glaucoma. Together with Dr. Lam, our invited speaker, we managed to raise the awareness of glaucoma among the elderly community and highlight the risk factors and methods of prevention.

During the services, several senior citizens came to me expressing their appreciation, "In the hospital, the doctors never explain the results or numbers to us. But you, students, are very patient

in explaining the test results and their significances to us. Thank you for being so thoughtful and understanding." That came as a reminder to myself that under our current healthcare system in which demand is vastly outstripping supply, it becomes dangerously easy to neglect patient's needs. With tons of patients in the row, we can barely allot enough time for each of them. Yet, while we are bogged down with beeping pagers, may we not forget the empathy in our voices and the touch of our hands are sufficient to fulfill patients' need for care.



### Education Department

"Prevention is better than cure" is our belief. Therefore our mission is to promote health education at young age. On 8<sup>th</sup> March, we conducted a talk on balanced diet to 60 Primary Four and Primary Five students in Shum Shui Po. They were interested in the topic and responded smartly to our questions. We also prepared some games for the students. They were very excited and readily applied what they had just learnt in the games. It was certainly a great experience for the helpers and me, as it not only allowed us to play with them, but also conveyed some important health concepts to them at the same time.

You may not believe this, but there are people who actually apply things like soya sauce, soap, toothpaste on their wounds.



During another service on "home nursing" held in Central Caritas Centre on 2<sup>nd</sup> April, we conducted a small survey asking 20 elderly people, and over 50% of them admit doing so. We had obviously over-estimated older people's knowledge on home nursing, while they had underestimated the consequences of not treating a wound properly. During the service, we conveyed to them some right concepts and corrected their misconceptions about burns, cuts, insect bite treatments etc. We also gave some live demonstrations on how different types of wounds should be dealt with. The service turned out to be a great success.



### Estate Department



This year, a health check-up service was held after the exam. We all felt particularly excited and relaxed. Of course, there are many ways to relax oneself after examination, but we had in our mind a more fulfilling way to spend our free time — to do health check-ups for elderly. These health checkups helped them by providing them with parameters of their health. Our helpers were able to establish rapport with them and support them emotionally by showing care. It is most

rewarding to feel the trust of these elderly had in us and to know that they were accepting our advice and were willing to modify their lifestyle. Mediocre doctors treat diseases only, but good doctors care about both the physical and psychological aspects of patients.



Recently a six-hour service was held at Wan Chui Estate. This time, maculopathy and visual acuity test were introduced. We were glad that the freshmen helpers were very enthusiastic in performing checkups and counseling, and some of them had even decided to take a post in the coming session of Health Committee. More screening tests can be added in the future so that our clients will benefit more from us.



### Outreach Department

Can you imagine living in a place of the size of your bed? This is the living condition of our clients in our first service of the Outreach Department. Such kind of "living place" was also known as "cage house", which was very common in the early 60-70s in Hong Kong. On the day of service we provided the standard body check-ups together with counseling to the residents. A cleaning set was also given to each client as a souvenir. Instantly after the service, I had a strong feeling that life was really unfair. Why are some people enjoying the luxury and living in extravagant apartments, while others barely have the room to sleep? Ironically the former group may not feel happy at all. The difference, to me, is due to the easiness of being satisfied. So try to look at the things in your hand and you would certainly be amazed by how much you already have.

We have also organized a 4-month service for the elderly who are living alone in the Shum Shui Po district. All the helpers were divided into groups of 3-4 and went to 2-3 clients' homes.



This service was quite interesting as each participant would have slightly different experiences from the others. In the sharing session, almost all participants thought that it was a nice experience talking with the elderly. By sharing their life experiences, the helpers had a deeper understanding of the clients. Their relationship became closer and closer after each visit. Both the clients and our helpers benefit from our service.



### Feeling of freshmen helper



Being the only BCM student in the Community Center Department service that I joined, I made friends with some medical students during the service. And I learnt that what the elderly needed was not just the health report, but also someone to chat and share with and someone to care about their lives. I think this service helped to improve the physical and mental health of the elderly.

— Shi Ngai Ning, BCM I

### Serving the community

We believe that the aim of Health Committee services is to serve and at the same time to be educated — of how lucky we are and how we can help those in need. That's what being a healthcare worker is all about. It's not about stock, fancy cars, golf, luxuries or high social status. It's about serving the community.

Certainly, there is no greater thrill than working with Health Committee, an integrated team striving on behalf of common medical goals. They also help us in maintaining the idealism that we all set out with-to help and heal. All our services are invariably rewarding-for they nourish the optimism that pooled efforts will indeed make a difference!

Join Health Committee and make compassion contagious!



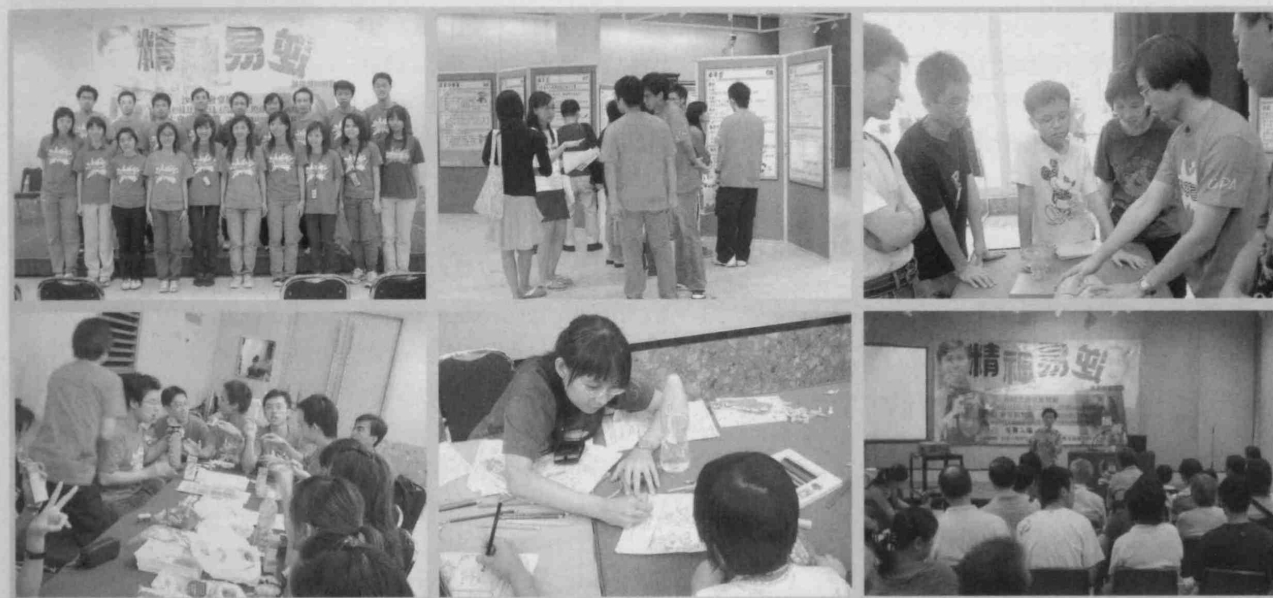


# Health Exhibition 2005 — “Mind You Mind 精神易逆”

Lai Chun Ting, Terence

The Health Exhibition 2005 — “Mind Your Mind 精神易逆”, was successfully held on 1<sup>st</sup>-2<sup>nd</sup> October at Sha Tin Town Hall and on 8<sup>th</sup>-9<sup>th</sup> October at Tsuen Wan Town Hall. After nearly 6 months of preparation, we are glad that our exhibition has gained acclaims from the public.

The preparation process of the exhibition has been an enjoyable experience for me as well as for all our committee members. From finding sponsorship to drawing advertising plan, our committee members had paid most of their valuable time and effort in order to achieve our common goal — to educate the public on health issues.



It is not an easy task for us to organise an exhibition starting from scratch. Various problems evolved during our preparation work but our morale and spirit had never been bashed. Though the exhibition lasted for only four days and was short comparing to the six-month preparation, I am sure that everyone of us find it an invaluable experience. Throughout the process, we have established concrete friendship and I am glad to have this opportunity to work with all of my friends.

This year's exhibition is definitely a success. Several organisations have approached us to seek for future co-operation in promoting mental health in the community. Visitors were impressed by our information booklets, as they believed the information provided was concise and was well written in laymen's perspective; most of them have found the exhibition very useful in enhancing their knowledge in mental health. We are glad that our main goal in educating the public has been achieved. We are most grateful that we have not only benefited the many visitors in these four days, but have as well established a social impact to arouse people's awareness towards mental health. The exhibition succeeded in clearing people's misconceptions towards mental health and allowed the public to be more open-minded in bringing mental health issues into discussion.

I would like to thank all the advisors who had helped us in many ways. I would also like to thank all the helpers who had contributed in these four days. Last but not least, I would like to thank all of my friends who had worked with me in these six months. Without you all, the exhibition would never be a success.



# The 26<sup>th</sup> Asian Medical Students' Conference (AMSC) Kuala Lumpur, Malaysia

24<sup>th</sup> - 31<sup>st</sup> July, 2005

“Technology in Medicine: Embracing the Progress, Serving the People”

Dominic Kwok (M09), Vice-President, AMSA HK

After winning the Academic Paper Presentation in the 18<sup>th</sup> East Asian Medical Students' Conference (EAMSC) Osaka last Christmas, AMSA HK's morale was boosted to the zenith. With the blazing AMSA spirit in heart, we continued to thrive and strive for the paramount event of the year, the 26<sup>th</sup> Asian Medical Students' Conference (AMSC) held in Kuala Lumpur, Malaysia, from 24<sup>th</sup> to 31<sup>st</sup> July 2005. The theme of the Conference was “Technology in Medicine: Embracing the Progress, Serving the People”. We recruited the largest delegation in the history of AMSA HK to attend the Conference, comprising a total of 57 delegates from both HKU and CUHK. Other participating countries included Korea, Taiwan, Thailand, Philippines, Japan, Indonesia, Australia, Nepal, Pakistan, Papua New Guinea, Bangladesh and Cambodia.



## Welcoming Party

In the welcoming party, all delegates were divided into 20 groups and each group had to come up with its own group name and group cheers. Everyone cheered and shouted merrily. The party ended with the song ‘At the beginning’, which also marked the beginning of the AMSC '05 and the beginning of friendships.

## Opening Ceremony

The Opening Ceremony of the AMSC '05 was held on Day 2. It was officiated by Dr Chua, the Minister of Health in Malaysia, who was also the keynote speaker. Finally, with a welcoming speech delivered by Miss Tan Ai Huey, Organizing Chairperson of the 26<sup>th</sup> AMSC, the Conference was officially commenced.

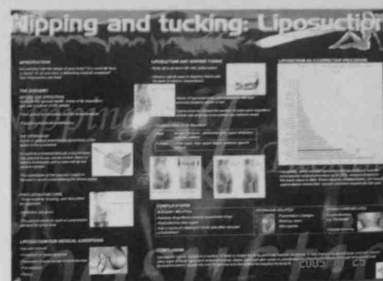


## Country Presentation: Academic Paper and Poster

The Academic Paper and Poster Presentation are the highlights of every EAMSC and AMSC. Before the Conference, each country has to prepare an academic paper and an academic poster on the Conference theme. This time a total of 12 entries were submitted from the countries. For the academic paper, Hong Kong delegates researched on the topic of Minimal Access Surgery (MAS), entitled “To see the world through a grain of sand — to visualize the human internal world with a tiny incision”. The technique of MAS is introduced and its importance to society is examined. The technique carbon dioxide urinary bladder insufflation is used as a case study. Our team also submitted 2



posters for the Poster Presentation, namely "Nipping and tucking: Liposuction" and "The Power of Light" on laser therapy. The high standard of Hong Kong delegates' work never failed to impress others. Not only were the audience captured by our interactive and stimulating presentation, they were also delighted by our informative and eye-catching posters.



### Technical Tours

Time for some hands-on experience! In order to explore the latest medical technology in Malaysia, the 20 groups of delegates were allocated to different hospitals and clinical settings. One of the groups visited the teaching hospital of UKM (Universiti Kebangsaan Malaysia) for a glimpse of the latest technological advancement in ophthalmology in Malaysia. Another group visited the hospital's Department of Surgery. The delegates even had the chance to try out a real laparoscope!

### Community Service

In order to fulfill the second part of the Conference theme, "Serving the People", we carried out some community services to visit the less privileged people at the outskirts of the city. One of the groups visited a "scum area" in which the residents had financial difficulties and were less educated. The service was divided into three parts: health check-ups, health education and house visit. First we measured the residents' body-mass index, blood pressure, blood glucose and cholesterol level. Then we explained to them posters on various topics, for example the hazards of smoking, stress control and typhoid fever prevention. Finally, we visited some of the residents' home and talked to them in order to better our understanding on their situations.



### Cultural Workshop

Besides academic activities, cultural exchange is another main focus of the AMSC. The cultural workshop was a fun event for delegates to try out some traditional Malaysian arts, which ranged from dancing to painting and crafts. The following are 2 examples. Ketupat & Congkak (traditional rice box weaving): Students used multi-coloured pieces of long reed-like leaves to weave a diamond-shaped rice "box" for cooking rice. In the end many of us turned them into accessory key chains! Seni Lakon is a kind of traditional drama. Students eagerly acted out their passion to a chair, which was to represent their boyfriend or girlfriend. The Tarian Endang dance team even performed their winning dance in front of all delegates during the dinner!





## Social Events

Finally it's time to have fun! All delegates submerged themselves in a whole day of fun in the Genting Highland Theme Park. Among all the rides, the most popular one was the Space Shot. Delegates screamed at the top of their lungs when the ride descended vertically at top speed. Being the City of Entertainment, there was also a great variety of facilities in Genting besides the theme park, for instance, disco, karaoke, pubs, video arcade and bowling.

## Cultural Night

Here comes the climax of the AMSC — the Cultural Night! It was the time when all delegates would dress in their countries' traditional costumes and give unique cultural performances. It was

a great chance for delegates to know more about the culture of other countries. Spectacular performances rocked the ballroom all night long, with Hong Kong first sending the crowd into craze. We performed a traditional Chinese dance, a Jazz and a "crossover" Tai Chi Macarina, with all delegates joining in eventually and all could feel the rising heat of excitement. Performances from other countries were diverse in style. Malaysia, Japan, Indonesia performed their traditional dances and songs while Korea performed a stylish hip-hop dance.



## Promotion of AMSC '06 Hong Kong

During the Cultural Night, we made a presentation on next year's AMSC, which will be hosted in Hong Kong and with the theme "Tobacco — its Burden on Health and Society". The first part of the presentation was an eye-catching flash movie, which was followed by our kung-fu and Jazz performance, and finally concluded by a powerpoint presentation and video showing the unique features of Hong Kong.

## AMSC '06 Hong Kong: It is not only our Conference, it is YOUR Conference!

AMSAHK proudly presents our paramount event next summer: the Asian Medical Students' Conference 2006! From 23<sup>rd</sup> to 30<sup>th</sup> July next year, more than 400 medical students from over 10 countries will gather right here, in our hometown Hong Kong, even in the lecture theatres where you spent every morning! Remember, it is not only our Conference, but also YOUR Conference! Join us and be one of our Organizing Committee. Let's make history together!



## A Regretless Choice

Mak Chong Yin, Damian

The term of office of Nexus is nearly over.

There have been joyful moments, there have been hard times; there have been success, there have been failure; there have been ups, there have been downs. We Nexians have gone through a tough yet enjoyable year.

The repetitive tasks were dull and time consuming, yet every one of them was functional; the consideration of not a detail for every part of every activity was arduous, yet it resulted in smooth operation; time was consumed, yet every bit was wasted. We enjoyed every part of our work, especially those parts which required a high level of co-operation. We Nexians worked as a synergistic unity.

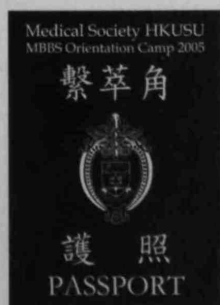


I would like to specifically mention the Medic Orientation Programme 2005. We started off with a huge obstacle. Being unable to reserve a campsite large enough to hold 400 people, the option of holding a joint orientation camp for students of the three programme courses was deemed impossible, and we were somehow forced to break into three campsites. Nevertheless, we tried hard to keep other parts of the Orientation Programme like the tea gathering and orientation day together. Despite all the compensatory measures we have taken, the opportunity for

students from different programmes to get to know each other was indeed sacrificed. Yet, we discovered several advantages of holding a small-group orientation. We introduced several new elements and plotted a theme (繫萃角) for the camp. It was actually very risk-taking as we have not had any experience in organizing camps of that large scale. Through the many obstacles, we did our best to make the camp enjoyable, and we succeeded. We saw joyful faces and the initial establishment of friendship. Both freshmen and second year tutors gave us very positive feedback. We Nexus, as the organizing committee, did enjoy the camp as well. Witnessing students taking part and enjoying is no doubt the best reward for us. The orientation camp was a nice example of our work, in the Nexus style.

The decision of joining Nexus modified my experience in the first year in the Faculty of Medicine very much, towards the positive side. Every bit of Nexus was enjoyable and memorable. The sincere friendship we established was worth all the efforts. Thanks Nexians for joining Nexus. Thanks Nexians for their support and hard work throughout the year. Thank you, Nexus.

I treasure the never-ending Nexus Adventure.



### 繫萃角角歌

繫萃角精英雲集

我們建角在梅窩

紅橙黃綠青藍紫啡黑白

Kong U Medic (精英雲集) X 2

繫萃角!



# Insomnia

Poemen Chan (Final Year)

I am trapped in this old building,  
Where it is surrounded by so much walls and bricks.  
Struggle for help, I band and smash on the door.  
Voice is broken; and the echo is swallowed by the horrid wind.  
Regret has drawn my bed and killed my sleep;  
For I came here because of my own deed.  
It was passion that drove me to where I am.  
And it was the passion that pushed me to this dead end.  
For what had been given is never received.  
I keep trying, I fall, I crawl and I bleed.  
It is a life-long struggle that no body cares.  
I am left with nothing but despairs.

\* \* \*

And so I leave myself alone  
In my room, and turn off my phone.  
Many days, I have been in gloom,  
Many nights, I have been in my room.  
Adding to cloud, more cloud with my deep sigh.  
Hiding the moon, the stars; covering the only left over lamp of the night.  
Soon as the cheering-sun begin to draw,  
Light steel from my heavy mind by the shady curtain of Aurora's bed.  
Private my sole, in an enclosed chamber,  
Shutting the windows, locking out the fair daylight,  
And made myself an artificial extension of the gloomy night.

\* \* \*

Yet sleep is murdered;  
All the Valium would not take me away from this curse.  
I shall sleep no more, and be buried  
Deep into the thought of unknown consequence.

\* \* \*

Man, you have taken away my everything! What else do you want?

# How to be a perfect bridesmaid? 10 things to remember

## The Chronic Bridesmaid



### Approaching the wedding day:

1. MUST remind the bride to check her dresses and try on her shoes one week prior to the wedding day; check your own dress and shoes as well.
2. If there isn't a wedding planner, confirm the bouquets several days prior to the wedding; especially if the bride will throw the bouquet (it's usually a separate one).
3. Confirm with hair dresser and makeup artist few days before the wedding.

### The night before the day:

4. Talk with the bride, she is probably going through a lot of stress at that point, it's your job to listen to her.

### On the DAY:

5. MUST bring band-aids — you can never trust new high heels (I saw blisters, cuts at every single wedding). I ensure you there's about 10 hours of standing in total.
6. MUST bring scissors — you'll be surprised how useful it is!!! I had to make a toss-able bouquet in less than 5 minutes during the previous wedding.
7. Make sure the bride's veil is covering her face before walking into the church.
8. MUST carry some tissues with you while walking into the church, someone will cry for sure, whether it's you or the bride.
9. Check the bride's makeup every hour or so, in particular the lipsticks.
10. MUST bring along drinks (those that with straws), you don't want to dehydrate the bride, yourself, (and other bridesmaids).

For those of you who are bridesmaid-to-be, as you can see, the list isn't exhaustive, and you can always delegate some of the jobs to other bridesmaids etc. Your job simply requires a lot of common sense and observation. Last but not least, enjoy the day!



## Lonely Planet the horse lover

This is a lonely place, ensconced in a tranquil corner of the Planet, where people can escape the hustle and bustle of this ever thriving world. This is also the place that when you first place your steps into her terrain, you will be allured by her unique culture, historic backgrounds and the hospitality of the people all around. This is Stockholm, *the Capital of Scandinavia*.



Scenic views of Stockholm city centre

The very first impression it gave me was its serenity. From the airport arrival halls, the taxi ride through the countryside, and right to the hotel at the city centre. Absolutely no clamorous noises around, and never will there be crowds disturbing us enjoying the refreshing breeze or gazing upon the lambent sky. And it was in such an atmosphere that for four brilliant summer days, we transversed the archipelagoes of the city to discover what Nordic life is about.

The city of Stockholm comprises of over a hundred islands, but despite its geographical complexities, major tourist attractions are concentrated in the central districts of *Normalm*, *Gamla Stan*, *Östermalm* and *Djurgården*, which essentially makes it very convenient for tourists to orientate themselves. And the first stop we explored: Gamla Stan.

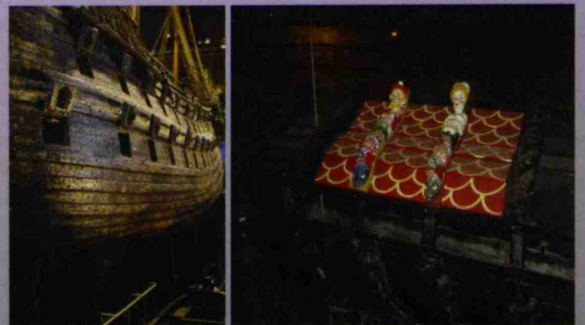
*Gamla Stan* is one of the earlier developed districts of the city, mainly consisting of old residential establishments. A multitude of miniature boutiques gathered around the main street, *Vasterlanggatan* (*gatan* for street in Swedish). Each store is modestly sized, displaying goods of a vast variety from traditional Viking soldier sculptures and home décor, second-hand *Moomin Valley* collectibles to upmarket designer watches. Looking at each little shop window and savouring each of the delicate handicraft could make time slip away so swiftly.

Towards one end of *Vasterlanggatan* is

*Normalm*, which poses an utterly different aura. Modern shops and roadside cafes are all about the area. This is also the district where major stores like *Debenhams* have set foot. Adjacent to this is the open square of *Kungstradgarden*. Originally built as the Royal vegetable garden, this was later opened to the public where people gathered for different performances and fairs. Here you may wish to try one of the hot-dogs as you pass by the many stalls around the region. These come with instantly grilled sausages in different flavours, forming a perfect companion with mustard and ketchup. Some other stalls even offer grilled burgers which are worth a try.



Another attraction that could not have been disregarded is the *Vasamuseet* (the Vasa Museum), located on the island of *Djurgården* (the Royal Gardens) and dedicated to a tragic failure in Swedish warfare in the 17<sup>th</sup> century. The *Vasa* was a vessel built for the Swedish Emperor with an unprecedented scale and unparalleled weapon equipment, in an attempt to conquer Poland. On her maiden voyage, however dramatic as it may seem, a few gusts of winds capsized the vessel and sent her straight down to the bed of the Baltic. For three centuries it remained there until she was recovered in the 1960s and has since settled in the



Side view of the Vasa (left) and the restored paintings on her decorative



Museum. What is remarkable about this Museum is not only the size of the vessel (it was a quadruple-decker) with reference to the age at which it was engineered, but also the elegance and sophistication of the ship adornments, contrasted with the severe misery and destitution of the seaman inside. Various exhibits and excavated articles helped us grasp an impression of culture and livelihood of people in medieval Scandinavia.

Looks like you need to pamper yourself with some shopping? Stockholm is just the right place. A large number of avant-garde designers have emerged in the city, making it the perfect place whether you are looking for the grandiose of haute couture, or just buying some cheap t-shirts with special designs. Traditional well-established designers like *Nina Ricci* and *Gucci* also shows a presence in the city, mainly gathered around the district of *Östermalm*. Unfortunately, goods are marked with a particularly unfriendly price, so better refrain yourself if you're not so desperate. And of course all throughout the city, there are the tourist-oriented shops offering postcards and souvenirs, as well stores selling all types of witty gadgets.

Towards the end of the day, it's time to delight oneself in some gourmet. I would not call this place a "Diners' Heaven", but Sweden does have some unique dishes that you must try, traditional Swedish cuisine be no exception. In a casual and relaxed setting, you can fully indulge



Who is floating in middle of the water? Who knows?!

yourself in some of the highlights including caviar and steak of reindeer (Yes, exactly those cute little creatures appearing in Disney animations!!) Or alternatively, if you don't feel like eating deer, you may wish to try fish, which is just as splendid. A sophisticated Swedish dinner would never be

complete without a dessert, be it a platter of traditional home-made cheese, or a cup of ice-cream dipped in molten chocolate sauce.

### Miscellanea

- \* Everything in Stockholm is costly, even by European standards. Dining is particularly the case. It doesn't make much difference, whether you want a platter of pasta at a cafe or an elaborate Swedish dinner. They both cost just as much. So why not exploit yourself?
- \* One late evening, in a Chinese fast-food store near the Central train station, we met a Mr Li who emigrated from Hongkong some thirty years ago. We had a short chat and he talked about the changes to the city he witnessed, those to the Chinese community in particular. What a misery!! (His *chow-mien with pork* was quite good. You may wish to try.)
- \* Stockholm Syndrome: a criminological syndrome named after a bank robbery in *Normalmstorg* (an open square in *Normalm*) in 1973. In this case, the victims became emotionally attached to their victimizers and even defended their captors after they were freed from their six-day ordeal. We tried to look out for the bank, which was conveniently located near some major shoppers' attractions. This was unfortunately converted into a private property. Bad luck.
- \* Much of the city's walkways are paved with handcrafted marble giving a rough and natural appearance. If you wish to explore the city thoroughly, be prepared to return to the hotel with really painful feet. You want to look elegant? NO! Stilettos simply won't do.
- \* Want an instant taste of Sweden? Go to any IKEA Café. Their hot-dogs and meat balls, though not as tasty, are not too bad compared to those at a native Swedish restaurant.

Touring, shopping and eating. Literally a complete profile of what ordinary tourist should do in any vacation. And this marks the finale. Whether you are attracted to visit Stockholm by this writing or not, it doesn't matter. What matters is: I have had a brilliant holiday! Now, as I bade farewell to this lovely city, I wish you  
**have a nice holiday as well!**



Farewell!

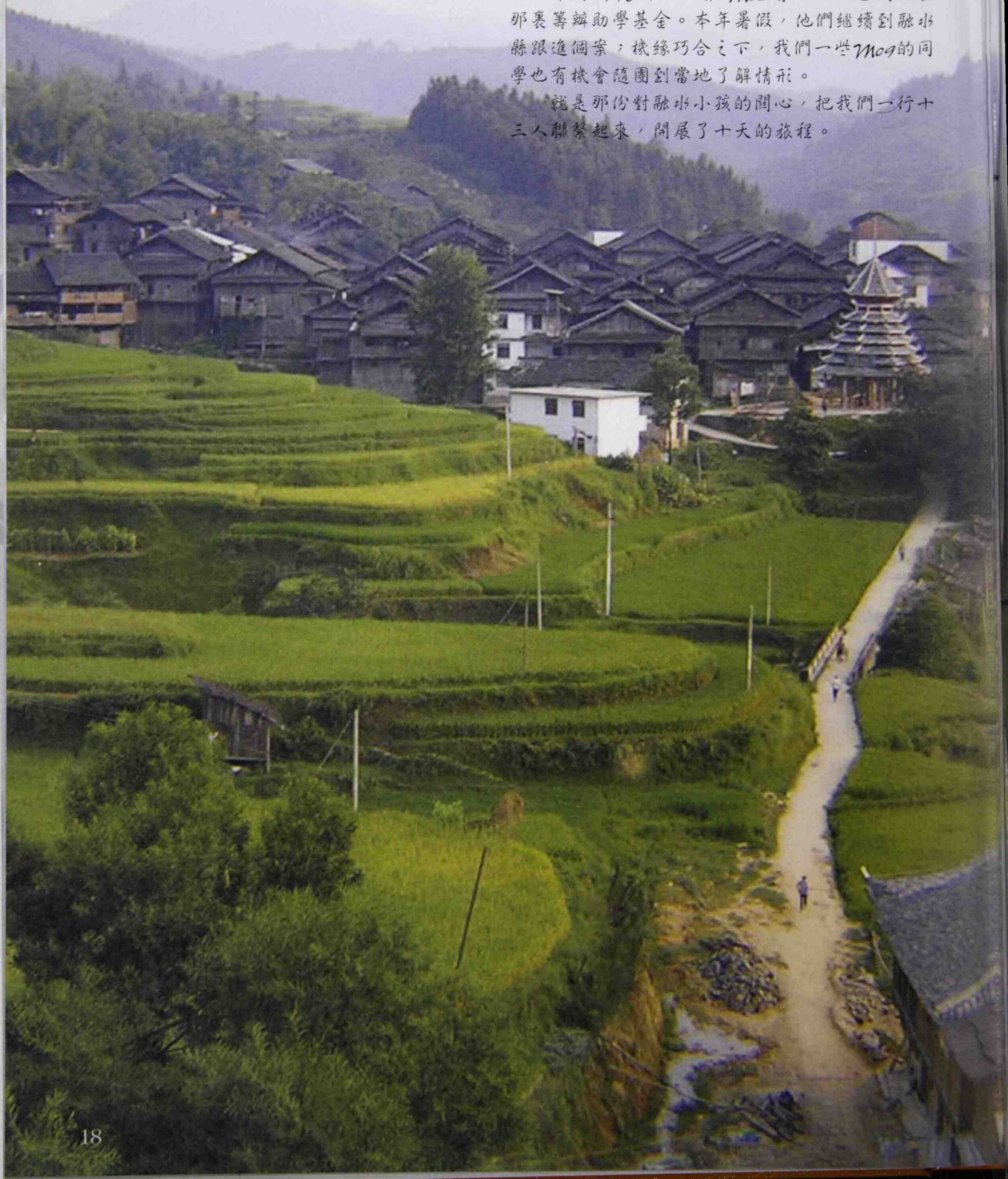


# 苗鄉之旅

覃燕筠 林婷

山青、水秀、洞奇、石美——描繪的正是有「山水甲天下」之美譽的桂林。桂林位於廣西壯族自治區北部，擁有豐富的旅遊資源，每年為當地帶來過億收入；但同樣位於廣西北部、處於桂林彼鄰的融水苗族自治區，卻有着中國一些最貧窮的地方，很多兒童都因經濟困難而失學。有見及此，早自1998年，一眾Mo2有心人士已開始在那裏籌辦助學基金。本年暑假，他們繼續到融水縣跟進個案；機緣巧合之下，我們一些Mo9的同學也有機會隨團到當地了解情形。

就是那份對融水小孩的關心，把我們一行十三人聯繫起來，開展了十天的旅程。





## 大年山水美食甲天下

大年鄉位於融水苗族自治區北部，才踏進那片土地，我便立時被山高坡陡的景觀懾著了。群山起伏，梯田林立，清溪潺潺，山谷中炊煙裊裊，讓人彷彿置身於古畫裏。這裏雖沒有桂林的商業色彩，卻添了一份大自然獨特的寧謐。

除了視覺享受，味覺享受亦絕不容忽視。首先必須品嚐地道桂林米粉：爽口彈牙的米粉，加上少許秘製辣油、酸菜和豬肉，當作早餐叫人精神為之一振。此時，假若村民給你一碗油茶，定必錦上添花。油茶的製作方法非常簡單。先把麥米炒香，後注入微甜的茶，再加以攪拌便完成。入口熱烘烘，咬下脆卜卜，像極我們平常吃的牛奶加可可米。

然後必須試試「馬打滾」。它的樣子像巧克力豆沙餅，一口咬下才發現那是糯米及花生搓成的，是當地傳統的夜宵食品。

但在眾多食物之中，最令人懷念的還是充滿溫情的家常小菜。事緣在六年前，M02的同學在大年經常光顧一家飯店，而且盛讚其老闆娘的手勢。時光荏苒，今天已看不見昔日的飯店，只留下一間空舖子。但巧合得很，惜日的老闆娘在菜市場竟認出了今天其中一位醫生。二人眼目相對，老闆娘問：「你是姓程的嗎？」程醫生點點頭，六年前的回憶頓時湧上心頭——她們終於相認了！老闆娘立即自動請纓為我們造菜，飽嘗當年情。當天晚上我們享受老闆娘精心炮製的鮮甜絲瓜，南瓜藤和竹筍，伴隨着歡笑聲，甜在心頭。

這裏沒有山珍海味、珍收百味，卻有最簡單、最溫馨的菜色，令人回味無窮。

## 苗鄉人情濃

許多被探訪的村莊都設有歡迎儀式，但要數最難忘的非良寨鄉塘苟村莫屬。

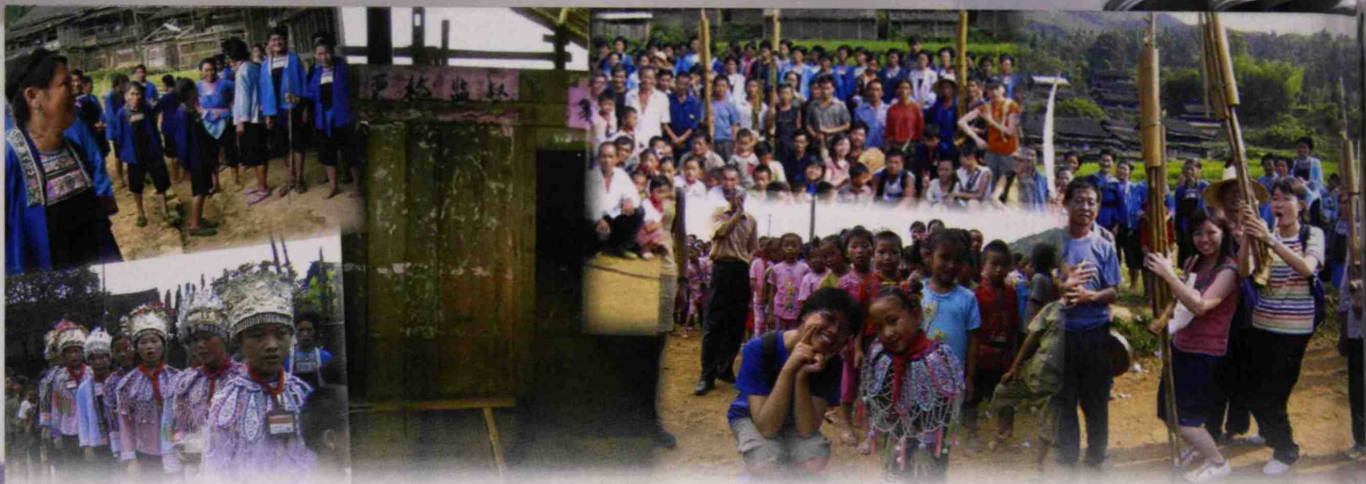
我們一下吉普車，一連串爆竹風笛聲隨即響起。全村苗族老人扶老攜幼，盛裝出席。年約十歲的小領袖高叫：「歡迎，歡迎！」。其餘學生則跟著齊呼：「歡迎，歡迎！」此時，一些女孩子會遞上鄉村特飲——米酒。雖然我們的酒量不大，但盛情難卻，每人都喝了幾杯烈酒。接下來大夥兒隨着音樂走，穿過櫛比鱗次比的木屋，翠綠的梯田，來到了村小學。始建於1952年的木瓦結構集課室，如今只由腐爛的橫樑支撐着。我們踏在搖搖欲墜的樓梯上，看見天花板半斷的電線，小小的窗戶，連在大白天也不夠光線，整所校舍破舊得像快要倒塌下來似的。試問這是孕育二百名學生的地方嗎？

其實，村民是很關心孩子們的教育的。他們都希望能用磚塊重建塘苟村小學，就連學校的新址也選好了，是位於山邊的一塊高地上，期盼小孩能望得高，眺得遠，將來能向着天空展翅高飛。可只要一想到建磚校所需的四十萬資金，他們便顯得孤立無援，束手無策。我們細心地看着一個個小孩，他們的說話不多，但每每提及學校的重建，面上總會掛上一個害羞而滿足的微笑。他們珍而重之地捧着我們分發的鉛筆和橡皮擦，彷彿小心翼翼地捧着一個讀書夢，多用力一點也會把它粉碎。我們實在被小孩單純的上學心感動，試問又怎能容忍這只是一個夢？於是我們拍下學校的照片，搜集好資料，希望帶回香港後能幫上一點忙。

離去的時候，全民載歌載舞歡送我們。吹笛之士使勁地吹，強勁的拍子感染了我們每一人。我們不其然也樂在其中，學習跳一兩步求偶舞。







### 火災洗禮·意志更強

本年七月二十九日，一場由短路引起的山林大火，瞬間摧毀了二十多個家園；為本來疏落的樓房加了幾分蕭條。在一片頹垣敗瓦中，我們遇上了梁學禮。他是航空科技大學二年級的學生。因家中火災，連忙趕回家以致沒考上末期試；加上家境困難，他便毅然放棄學業回家幫忙，等待來年末期試才繼續升學。閒談間發覺這位等待留級生竟是全級考第二名的，諷刺也！我問他：「你後悔嗎？」學禮微笑答道：「不，家才是最重要的。現在心情有如去露營般，很輕鬆。」他環顧四周破舊的家具，笑道：「這還不礙事，我總是嬌生慣養的！」

四周一片肅靜，那些不停地撥扇子、趕蚊子的手也不禁止着了——我們才是被寵壞的一群吧！

問及將來的路會怎樣走，學禮也不知道。因為家人並不支持他繼續升學，認為貧窮的命運早註定了，再努力也是徒勞，倒不如省下讀書的錢，幫補家計。而學禮只盼有好心人給他再上大學的機會。

### 魚與熊掌的抉擇

在廣西，能幸福地受教育的人不多，能夠上大學的更少；即使有，很多時候都是由家人傾家蕩產地供讀的。當日我們拜訪的陸朝文，便是最好的例子。他是歸合村七年來首名大學生，由一班M02同學由高中助學至現在。程醫生憶述：「六年前，我們初到陸宅，看見他家還有一個果園，理應比較富有。所以我們只贊助朝文的學費，每年二千元。」

六年後，人面全非。家中老父早已變賣果園、牲口為兒子籌措生活費。誰知在城市生活比想像中更昂貴，捱了一、兩年後，朝文生活已變得足襟見肘。臨近末期試的當兒，他實在呆不下去了，唯有要求校方暫時保留學位，毅然到城市裏打工，一有錢交學費便會回去考試。可惜自此音訊全無。在廣西，生計是必需品，讀書卻是奢侈品。但知識正正是改變命運的煉金術，當兩者互相衝突時，我們該如何選擇？

### 喜悅的淚

大多數學童知道有人願資助他們學習都會咧嘴而笑，面露喜色。只有她，愁眉不展。

她名叫陳紅緩，小六優異生，全級考第二，家裏的牆壁上貼滿了獎狀。但紅緩家境貧困，沒錢升學；不但如此，家中還有更複雜的事。小時候，母親改嫁，父親患了精神病，全家的擔子落在年紀老邁的公公婆婆身上。公公平日行動不便，只能在家中休養；婆婆則外出種菜維生，紅緩則留在家中做家務。當她知道全縣有名的民族中學收了她，這只意味着她會沒錢上學。







同行的黃醫生被她的情況感動，願意贊助她上初中，可她又煩惱起來。若她離開偏遠的家到城市讀書，家中剩下兩老，叫紅緩如何放心？腦子一轉，豆大的淚水缺堤而下，叫旁人心酸不已。

煩惱之際，當地的教育局長提出一個建議，就是讓紅緩平日到她家打工，將打工所賺的生活費寄回家，這樣公公婆婆便不用為生計操勞了，而紅緩又可以圓她的讀書夢。忽然出現的一線曙光，使紅緩破涕為笑，和黃醫生相擁在一起……

### 周肆上學去

作為父母，一生人最大的願望就是看着子女茁壯成長，作社會棟樑，助學也是這麼一個過程。回想幾年前，程醫生贊助了周肆——一個九歲大，熱愛畫圖畫、精靈活潑的小男孩上小三。今次返回大年鄉，程醫生特意準備了幾排木顏色筆及多套運動衣給周肆作禮物。時間飛逝，周肆已長高得像籃球員，什麼木顏色只怕太孩子氣吧。他的學業成績不是十分突出，但經過我們的安排幫助，終能繼續升讀高中。在短短兩天內得知這好消息，他必須連忙收拾行裝，拜別家鄉，立刻跟隨我們離開大連鄉到融水縣去。

辦過入學手續後，一行人便送周肆入宿舍。臨行前，程醫生不斷叮囑周肆要努力讀書，不可辜負眾人的期望。這大男孩雖沒灑下男兒淚，卻重重地點頭，堅決的說：「不用擔心，我會努力的了。」離別之際，大家不住地揮手，欣慰、傷心、喜悅、感動的眼淚再隱藏不了，一切盡在不言中。

### 廣西之旅·感動之旅

十天的旅程轉眼便圓滿結束。

但廣西之旅自一九九八年起卻從未真正結束過。

現時香港醫護人員教會(Medic Church)有許多融水縣的助學計劃正在進行，以延續「神愛世人」的精神，計劃還會包括重建學校宿舍、融水特殊教育學校等等。假若你跟我們一樣，有着同一份感動，懇請你以行動支持這些計劃，或索性跟我們到廣西走一趟，讓這份感動能薪火相傳下去。

你，願意嗎？





今  
期  
焦  
點

# 比 醫 生 多 一 點

很多人以為醫生都是書呆子，除了讀書外甚麼也不會。但其實縱觀醫學院，你不難找到各方面的人才，只是在醫學院內沒有發揮的空間。今期的專題，將會帶大家走出醫學院，訪問社會上那些能做好醫生的職責，同時也能發揮所長而有所成就的醫生。且看陳英凝醫生、黃岐醫生、顏獻基醫生和葉永玉醫生是怎樣比醫生多一點吧！





## 2005年世界十大傑出青年——陳英凝醫生

無國界醫生香港辦事處主席

### 對生命的執着 能無私的付出

陳英凝醫生在香港出生，中四時遠赴美國，先後在美國約翰霍普金斯大學、哈佛大學公共衛生學院及香港大學取得多個學位。她1998年加入無國界醫生(MSF)，2001年成為無國界醫生最年輕的董事會主席，2004年獲選為香港十大傑出青年，更在2005年獲選為世界十大傑出青年。究竟陳醫生拼搏的經過是怎樣呢？她又怎樣在正職、義工及家庭中取得平衡？



### 機緣際遇驅使下 加入無國界醫生

當時正值1998年的暑假，她剛在美國完成了兩個學位，但是因母親的病情日趨嚴重，於是她便返回香港。回港後，她看到《明報》上一篇介紹各義工組織的專欄，便打算一方面在家中陪伴母親，一方面利用餘下的時間參與義工活動，幫助有需要的人。她的清單上有一系列的選擇，可是基於無國界醫生對服務時限的要求及其工作性質，對當時未取得醫生執業資格的陳醫生來說無國界醫生只是最後的打算。但是，事出所料，她查詢了很多義工組織，最後都因與自己的見解不符而沒有加入。陳醫生是一個具有強烈宗教信仰的人，但她認為義工的工作不應只局限於有宗教信仰的人，所以她並沒有選擇教會的義工團體。後來她到無國界醫生的辦事處查詢，對方正需要義工參與廣西水災的衛生評估工作及帶領一隊法國隊伍經香港進入廣西，因陳醫生能操法語及國語，又擁有一個公共衛生的學位，與這次活動的性質不謀而合。經過與家人的仔細商量，又

因母親的病情好轉，在回港不足一個月，陳醫生便答允這次廣西之旅，踏出了她參與無國界醫生的第一步。

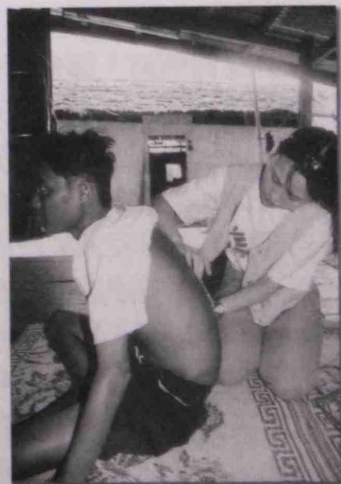
陳醫生憶述，當時她與法國隊伍攜着五噸重的物資，乘火車由紅磡到廣州白雲國際機場，再入廣西。雖然這次旅程困難重重，但經過這次活動，陳醫生自言得着甚多。她認識了一班好同事，他們做事頭腦清晰，亦有很高的道德水平，是合作的好伙伴。之後，她雖然有參加其他組織的活動，但仍堅持同時留在無國界醫生工作，她與無國界醫生的關係從此開始。

### 難忘深刻經歷多不勝數

#### 隨時逃生照料末期病人

陳醫生曾經遇過不少難忘的經歷。例如她曾於2000年，到位於菲律賓的棉蘭老島。她出發的九個月前，有數位澳洲遊客被擄至當地，而當地正是塔利班政權的基地之一，所以前往當地有一定的危險性。由於棉蘭老島位於赤道附近，所以即使晚上仍會非常炎熱，加上當地是貧窮地區，沒有電力供應，只有用蠟燭照明，而且當地晚上經常處於戒嚴狀態，屋外槍聲不絕，當地人都勸告陳醫生要穿上襪子和戴上隱形眼鏡睡覺，以便隨時走難逃生。最令陳醫生印象深刻的，並非四周炮火不斷的環境，反而是要在炎熱的天氣下穿上襪子睡覺的境況。

還有一次，陳醫生前往泰國的貧民區工作，協助照料末期愛滋病病人。這些愛滋病病人往往受到歧視，甚至被家人離棄，留離失所。若果幸運的，他們或許會被好心的人收留，讓他們住在屋底下。雖然有人收留已經很幸運，但是其居住環境的惡劣程度，實在非一般人所能想像得到的。陳醫生與另一名護士一同前往，護士告訴她需帶備



雨衣，正當陳醫生感到困惑時，一踏進那裏，只感覺到四周非常潮濕，在爬進去的一段路上，不時看到老鼠和會飛的蟑螂，最後終於走到那位病人身邊。那位愛滋病病人虛弱地躺在地上，但當他得知有醫護人員前來，仍然努力嘗試起來向陳醫生致意。然後護士便動手為病人清理傷口，沒有埋怨一聲，只是默默耕耘地工作，而陳醫生便從旁協助。

或許，很多人會認為無國界醫生的工作是向貧窮或受天然災朗的國家提供援助，那麼這些受協助的國家必定會欣然接受援助，但事實並非如此。陳醫生表示，有些國家可能因為種種原因，例如宗教問題或文化的關係，而拒絕援助。所以，無國界醫生的工作並非受每個國家認同的。

#### 從事無國界救援工作 體驗家庭凝聚力可貴

從事八年無國界醫生工作的陳醫生，對人生觀有了更深一層的體會。她明白到家庭的重要性，每次看到有天然災害發生，導致家破人天的慘況，看着至親至愛的家人去世，是最悲痛的。雖然很多人都認為金錢是最重要的，但是陳醫生認為沒有甚麼比能一家人聚在一起更重要。另外，陳醫生亦鼓勵我們要以不同的角度看人生，她舉了一個典型的比喻：一杯水，有人認為這杯水只剩下半杯，但亦有人認為這杯水有一半是滿的，前者態度消極，後者卻剛好相反，可見加入了無國界醫生組織的陳醫生比從前更積極地面對人生。

#### 時間分配懂調節 事業家庭兩得意

談到如何分配時間，陳醫生強調每個人都可以自我安排。她和常人一樣，也是自己控制時間去做一些她認為有意義的事。剛誕下女兒的陳醫生更表示在未來的日子裏會騰出時間照顧女兒；也會安排工作時間和兼顧無國界醫生的工作。她指出一個人一生只有有限的時間，但只要我們能夠將要做的事排序，那麼我們就可以依照先後次序決定甚麼時候做甚麼事。我們設計了自己短期的和長遠的「人生藍圖」後，







便有了一個清晰的人生路向，知道自己該如何做，這樣做起事來會更有信心和更得心應手。此外，她亦勸勉年青人愈早開展自己多元化的興趣愈好，因為這其實是一種自我摸索和自我訓練的歷程，目的是可以讓自己認清路向，突顯目標，向着標杆直跑。

### 陳醫生未來大計 轉戰杏林執教鞭

至於陳醫生未來的發展，她毫不諱言地表示：現職衛生防護中心擔任緊急應變及資訊醫生是希望可以在公共衛生事務(Public Health)的範疇內汲取實際經驗。她最終是希望可於香港的大學擔任教師的工作，更冀望在教學的過程中，可以和學生一起探索和學習，一方面可以授知解惑，將一己的所見、所聞、所思、所想、所學貢獻社會；另一方面可以指導年青人，使他們有正確的人生觀，達致她教學相長和終身學習的理想。此外，她希望當教師另有一份情意結：就是在她過去的學習歷程中遇到許多模範老師，啟發了她，她希望藉此回饋社會。不過，她並沒有為此設下時間表，她抱著以下的宗旨去做事：「When you try to show God your plan, God will laugh.」因她相信凡事只要憑良心去做，機會適時而來，只要事前做好準備，把握機會，自然會水到渠成。

### 勸勉醫學生們 作多方面嘗試

作為過來人的陳醫生，究竟有甚麼寶貴意見讓我們參考呢？她承認修讀醫科是需要極高的專注力，但是醫學生同時亦應該擴闊視野，要作多方面的嘗試，要終身學習；更要活學活用和發揮創意。她認為醫科生要有遠大的目標，不要局限於短期目標；只要是好人好事，我們就可以放膽去做，就算是其他人認為是沒有回報的事，只要我們認清目標，認定該事可以「學以致用」，便可以放心去嘗試、去實踐；多把握機會去創新、去接觸不同的人 and 物，提升自己的經驗和能力，目標自然能夠早日達成。



## 也是醫生，也是作家——黃岐醫生

東區醫院急症室顧問醫生

### 從小對文學興趣濃厚 機緣巧合踏上作家路

黃岐醫生從小就對寫作、文學有濃厚的興趣。他於香港大學醫學院就讀期間亦有創作。至於談到真正踏上作家之路，真正出版自己的作品，黃醫生則謂一切都是「機緣巧合」。

十多年前，由於《明報》副刊希望邀請一些醫生寫專欄，黃醫生便與區聞海醫生及區樂文醫生兩兄弟一起參與專欄的寫作。當時黃醫生寫作的靈感多是與自己的醫學生活有關，因此便離不開急症室。而他的筆名「黃岐」則源自的古時代黃帝和岐伯的醫術，即祖國醫學——「岐黃之術」。

後來，有出版社認為這類題材會有一定的讀者群，以及當時這類型的書種較少，所以便主動向黃醫生提議把他的作品結集成書，因此便出版了《悲歡離合急症室》、《急症室看人生》、《兜兜轉轉急症室》、《醫海無涯》及他主編的《沒有硝煙的戰爭》。

### 沒想過棄醫從文 沒有後悔當醫生

問及黃醫生有否曾經想過棄醫從文，黃醫生立即指出棄醫從文於香港是絕對不可能的。因為要以稿費維生是絕對不現實的，況且普遍來說，文學作品的銷量最多只有數千本。黃醫生亦表示能夠以寫作賴以為生的，香港只有著名作家亦舒、倪匡等，便遑論棄醫從文的例子了。不過，黃醫生亦舉了為了救國的魯迅、《實習醫師手記》的王溢嘉、《白色巨塔》的台灣麻醉科醫生侯文詠作例子。然而，《醫海無涯》一書之中作者不斷於不同的角度反問讀者何苦學醫，不禁讓訪者不明黃醫生為何會當上醫生。黃醫生說：「學醫的路確實是不容易走的。失得的往往比得的多。」幸運的是對於他來說失的始終比得的少，而且當時做醫生的壓力亦不像現時的那麼大，他是沒有後悔當上醫生的。

### 寫作有意義 抵抗燃盡

“Burn Out”是指醫生的工作熱誠慢慢地燃盡，亦慢慢地燃盡了醫生的醫學生命！“Burn Out”對於醫生來說，是一個很嚴重的問題。面



對日復一日的工作，寫作便起了一種平衡的作用，從而維持自己的工作熱誠。因此，黃醫生極力鼓勵同學們於空餘時間培養自己的興趣。以他個人作為例子，他於醫科畢業之後，仍先後為了個人興趣，於中文大學及城市大學攻讀工商管理碩士及語言及法律文學碩士。

黃醫生反問同學們：「考試就是你們唯一的目標嗎？成功考取專業試後又怎樣？」這點無疑是值得讓同學們思考一下。讀書之外，還有甚麼嗎？對於黃醫生來說，考試、考試、再考試的生活未免是過於死板。黃醫生指喜歡做義工的可以去當無國界醫生，喜歡打哥爾夫球便儘管去把哥爾夫球打好！至於黃醫生，喜歡寫作便把文章寫好。

出書對於黃醫生來說，還有另一重意義：看到自己的書能收藏於圖書館之中，以及知道曾經有人閱讀過自己的書，那份滿足感和成就感是無價的！

### 未來大計 兩個想法

黃醫生未來有兩個寫作念頭。其中一個計劃是以香港歷史為題材，以故事方式用人物串連整個故事，導出不同年代之下，患有同一種病的人，例如：哮喘——他們的醫療經歷會有何不同？這個計劃的困難之處是在於資料搜集那方面究竟不同年代之下，醫生會用甚麼方法拯救生命？

另一個計劃是以醫學生為題材，以一題兩寫的方法，邀請一些現時的醫科生參與這計劃，寫下他們於讀醫期間的所感，再與黃醫生學醫期間的所感作比較。黃醫生認為這的確是一個相當有趣的意念。因為兩者的時期不同，當中定必有所不同及相同的地方。可是究竟有甚麼不同之處？又有甚麼相同之處？這正是當中引人入勝的地方。

## 音樂家醫生——顏獻基醫生

泌尿外科專科醫生

### 家庭給機會學習 音樂家成為醫生



在六十年代要學習樂器是一件困難的事，因為當時學習樂器並不普及。首先，學校並沒有提供有關的課程，所以家境比較好的才有機會接觸音樂。但顏醫生出生於一個音樂世家。他的媽媽是一個鋼琴老師，而哥哥姊姊亦有研習樂器。所以顏醫生有機會接觸音樂，了解音樂，甚至曾希望進修音樂。顏醫生由四歲開始研習小提琴，至今已擁有四十多年了。

其實顏醫生曾經想成為音樂家。他於中六的時候，得到了英國皇家音樂學院的獎學金，是每年只有一個名額給予所有香港及非洲學生的獎學金，讓他到該地修讀音樂。雖然他本人亦希望可以赴英修讀音樂，奈何遭到父親的反對，沒法出國。可說是機緣，造就了今天的顏醫生。

### 成功進入醫學院 音樂生涯亦中斷

進入醫學院後，繁忙的學業、緊湊的工作以及同學之間的明爭暗鬥令顏醫生身心皆疲，缺乏練習令琴技日趨生疏。後來他更發覺沒有推動力使自己繼續下去，因為他以為自己的樂技已經沒有進步空間。他認為於當時演奏小提琴只會增加自己的疲累，但不能令自己有所進步。以上的種種原因，令顏醫生暫時放下了小提琴。這一段時期大約有八、九年，直至他完成了專科訓練，他才再拿起他的小提琴。

### 重拾小提琴演奏 以音樂打動人心

當時朋友邀請他一起合奏四重奏。能湊足四人合奏是很困難的，首先，但當時學習小提琴的人數已不多；第二，每個人都必須和其他演奏者協調和懂得互相尊重。因機會難得，顏醫生便立刻答應。就是這一次演奏，他發現自己仍有進步的空間，於是在音樂上又找到了自己的目標。

### 走出醫院作新嘗試 到精神病院和監獄演奏

顏醫生在2001年加入了醫學會管絃樂團成為團長，經常在醫院的大堂、音樂廳為病人表演。但他發現那些「聽眾」像是被挑選過一樣，無論演出的質素如何他們都會「提供掌聲」。這令他們感到和最初的目標有所出入，不能真正關懷有需要的病人。

因此他們和一班志同道合朋友，在2002年組成「醫藝盟」，還要求到小欖精神病院演出。雖然在整個表演中，病人並沒有拍手，反而不停喧嘩，但這反而表現出病人的高興，所以樂團感到非常鼓舞。自此，「醫藝盟」的嘗試一次比一次大膽。有一次，他們要求要到青山精神病院作表演，但今次他們不選大堂，而選在收容最嚴重病者的病房中舉行。當天醫院嚴陣以待，各個表演人員都很緊張，最後表演進行得非常順利。病人們都很高興有人探望自己，還走近他們，仔細觀察他們的樂器。之後他們亦為有智力障礙的病人及末期病者表演。他說大約四個末期病人中有一個會在表演時感動至哭泣。

後來有「醫藝盟」成員提出到監獄演出，樂團初時意見不一。但是最後他們還是選擇了域多利亞監獄作第一次嘗試。當天歷時三十分鐘的表演中，首十五分鐘犯人都在吵鬧，後來他們卻慢慢地安靜下來，到表演完結時大家都熱烈拍手。其後「醫藝盟」開始到不同的監獄去表演，更認識了很多不同背景的朋友。

### 以音樂代替說話 互相交流內心感受

顏醫生認為音樂是人與人之間的橋樑，可以用來表達內心的感受。他用音樂向社會上不同的人表達對他們的關心及關懷。在2003年SARS爆發前，張錫憲醫生曾於白沙灣監獄獻唱「龍的傳人」，希望所有犯人都知錯能改，並勉勵他們自強。當天他們都很感動，甚至有人哭泣。但幾個月後，張醫生不幸感染SARS去世，白沙灣囚犯沒有忘記張醫生，看到新聞後更立刻致送慰問卡給其家人。

最後，顏醫生勉勵醫學生們要勇於探索，豐富自己的生活經驗，不要將自己收藏起來。要珍惜每一個在眼前的機會，因為沒有人能預計得到將來發生的事。



## 最能承擔的醫生，香港舉重紀錄保持者——葉永玉醫生

港大醫學院骨科學系副教授



面帶着溫和的笑容，一身白色的上班服，看起來大方得體，氣度嫻雅，這就是2005年世界健力賽打破四項香港紀錄的葉永玉醫生。葉醫生成績輝煌，曾在2002年度 Asian Powerlifting Championship 得到季軍，在2002年4月香港舉重健力總會舉辦全港健力公開賽中一口氣打破三項女子組五十二公斤級的香港紀錄，分別是蹲舉舉起九十公斤，臥舉五十五公斤和硬舉一百零五公斤，以總成績二百五十公斤奪得女子組冠軍。她更在04年5月在烏茲別克亞洲健力公開賽榮獲一銀三銅。

### 為工作為健康 由健身至舉重

葉永玉醫生說上一代的女性很少接觸運動，她亦不例外。不打球不游泳，最常做的運動便是步行。可是當骨科醫生需要多一點的體力勞動，而且晚上又要隨時候命。隨着年紀逐漸增加，又缺乏運動，葉醫生自覺體能愈來愈差，做手術也好像力不從心。尤其第三個兒子出生後，身體愈來愈胖，她更自嘲自己像個「師奶」。因此，她便覺得要花一點時間調養好身體，並多做一點運動。

因自小沒有運動的習慣，打球游泳又不懂，亦沒有伴，她便只好找人教導健身，做一些「帶氧運動」如舉啞鈴、器械訓練等。及後玩出興趣來，便開始報讀訓練班，並閱讀一些有關書籍，在短期內有了相當的進步。葉醫生說自己是喜歡嘗試新事物的人，過了一段時候，當覺得自己比一般健身的女性水平高一點時，便在朋友的建議下參加本地的比賽。從沒有運動習慣到參加比賽，其實時間也不是很

長，不過是幾年間的事。

她回憶剛開始時，教練為她度身訂造了一個「運動計劃」，既有「帶氧運動」，也有一點力量訓練。「帶氧運動」能提升心肺功能，力量訓練則鍛鍊肌肉。因為之前少運動，所以一開始時她並不敢去接觸那些「男性化」的項目。但當發現自己有能力，又看見自己進步，便克服了這個心理障礙。

另外，外科手術需要運用到 Fine Motor Skill（肌肉微調能力）。葉醫生早有這方面的能力，再配合力量訓練，就有了更好的 Neuromuscular Control（神經和肌肉的相互協調），做舉重運動時便更得心應手了。可能本身是醫生的關係，葉醫生對這一點比一般人都明白，而且學得快。

### 時間分配——母親·醫生·運動員

由剛開始做運動的那一刻，葉醫生便決意要把它變成生活的一部份，因為要有良好的身體狀況才可應付工作。她表示如果要保持體能有一定水平，一星期也要做兩至三次運動，不是為了比賽，而是一般人也需要這樣的運動量。訓練比賽時也只是多花點時間針對性地做比賽要求的運動，但其實練習的次數和平時是差不多的。

葉醫生剛開始運動時，孩子已長大，所以便有時間去想運動的事。那時她最小的孩子也三歲了，她覺得小朋友過了三歲也比較獨立，所以她亦應付得來。現在她工作方面也比較穩定，通常不用在夜晚做急症手術，時間便鬆動



許多。通常在比賽前六星期，時間會緊一點，需要適當的時間調整。

### 多做舉重運動 對身體有幫助

人們總覺得很少女性會選擇舉重，以為舉重會令肌肉線條過份明顯，但葉醫生說如果在科學層面來說，任何力量都是對身體肌肉的一種刺激，人體會有兩項變化：肌肉細胞增大和有更好的肌肉控制。又因為女性體內的男性荷爾蒙很低，力量訓練雖然能令肌肉細胞增大，卻不會令肌肉線條像男人一樣明顯。就是因為一般人誤解了，很多女性才不願意去做這些力量訓練。但其實力量訓練對女性有莫大的益處，例如防止骨質疏鬆。所以一般人的看法只是一個心理障礙。她又謂有些人為了比賽取勝而服用男性荷爾蒙，這是違禁藥物。雖然它能令你達到理想的體型，但長期使用反而會令身體不勝負荷，這對整體表現反而沒有幫助，所以練習才是明智之舉。

### 評時下減肥 不主張節食

葉醫生同意現時大部份女性都喜歡纖瘦的體型，但很多女性用以減肥的方法都不健康。其實她自己也喜歡一個大眾接受的體型，可是到她說現在身陳代謝率下降了，飲宴又多，很容易會增磅；又由於會參加比賽，所以是需要去保持一個適當的體重的。她會用健康的方法去減，即是調節飲食和健身訓練。通常一次會減四公斤（即一個舉重的體重組別）。她並不主張刻意去節食，因為人體會「量入為出」，身陳代謝率會相應降低，那便會經常沒精打采了。

### 健身對工作有幫助 訓練手部協調

葉醫生表示當了專科醫生後，自己做不到的事情，沒有人會幫你去。做了健身及舉重運動後，體魄強健了，做手術時信心便更大。做手部手術時，肩膀及手肘的控制要特別好，

手才會定一些。舉重運動正正是訓練這方面的協調。所以，葉醫生的運動和工作是息息相關的。

### 葉醫生看人生 多做有意義事情

葉醫生說她以前會有很多目標，例如要對社會作出貢獻。到年紀漸漸大了，就覺得應該隨緣。以前她是沒任何計劃要玩這種運動的，是教練覺得她有這種潛質，才找她去比賽。這是預計不到的。就算是十多年前開始當骨科醫生，也不在她計劃之內。一切都由緣份安排。但是她同時希望在能力範圍內盡量發揮自己，盡用每天的時間，做更多有意義的事情。

### 給醫學生：把握時間 盡展潛能

葉醫生笑說醫學生最重要的當然是足夠的睡眠。盡量減少不良的習慣，例如玩遊戲機。其實運動要花的時間並不多，只需半小時便已足夠。時間還是要自己分配的。她也鼓勵醫學生們去盡展潛能，朝着適合自己的方向進發。

### 訪問後記：

訪問這幾位醫生是一次愉快而又難忘的經驗。這些醫生都能善用工餘時間去做有意義的事。有醫生會無私地到貧困的災區從事人道救援工作、到精神病院和監獄演奏，繼續去幫助別人。事實上，在今天功利至上的社會又有多少人會犧牲私人時間去參與一些只有付出而沒有回報的服務呢？也有醫生能把興趣和醫學緊扣在一起，用音樂來治癒、用運動來訓練，還有用寫作來抵抗燃盡。

他們都不約而同勉勵醫學生們去盡展潛能、發展興趣。從以上他們的例子可以見到，這些不但沒有為他們做成障礙，還能以不同形式為自己的人生添上不平凡。醫生是能夠的、也應該多一點的。



## 沙宣隨筆

隨風

醫學院一樓的露臺，是一條種有不少盆栽的長廊。長廊雖沒有奇花異卉、雕欄玉琢，平時也很少有人刻意去逛逛，但是卻更讓人覺得那是一處清幽的地方。而在那裏，更可欣賞秋天時的日落美景。

醫學院的生活一點也不輕鬆，課堂不時至五時後才結束。記得有次下課後，我帶着疲累的身心到一樓，突然心中閃過一念到露臺看看，才發現這個世外桃源。我隨便在一張長凳坐下，環顧四周的風境。從長廊往下俯瞰，可以看到不少平房，井然地沿岸排列。由於醫學院是靠山而建的，所以在長廊上往左右看，可見兩邊山丘各形成環抱之勢，可是景象卻截然不同。左面山丘已有不少地方被用作公路和住宅建築，只有再往上望，才可看到山上青蔥的密林。右面的山丘則是著名的摩星嶺，那裏從山頂到海邊仍是林蔭一片，是不少禽鳥的天然棲息地。從長廊遠眺，則是一望無際的大海和夕陽。





沙宣日落可算是香港的奇觀，因為那是少數地方可看到夕陽的餘暉，逐漸淹沒在壯闊廣博的大海中。隨着夕陽西下，天邊也慢慢起了變化。原先深秋時的晴空，逐漸幻化出一道紫紅的彩霞，把天水相連的一片蔚藍分開。夕陽映在海中，成了一片金黃色的大地。隨着落日愈接近大海，雲霞的色彩變化也就更鮮明多姿。一時，天邊就像降下層層羅紗，紫如蘭，紅若蓮，把太陽朦朧地罩着，使我不禁聯想起神話中的瑤池仙境，彷彿就在這襲輕紗羅帳之後。日光在這天衣重裙後，像一盞紅色的琉璃燈，照着回航的船隻和歸家的途人。儘管日落的餘暉燒紅了半邊天，但卻無力抵抗黑夜的到臨，把遠方的天空染成一片深藍。一羣白鳥在黃昏下飛回摩星嶺的老巢，使我突然想到王勃的絕句——「落霞與孤鶩齊飛，秋水共長天一色」，和沙宣日落竟有着異曲同弓之妙。清風輕吻我的臉，帶來一種醉人的冷，醉於夕陽的美好絢爛，醉於黃昏的無常短暫——也許正因這樣，才令人更嚮往，更珍惜，更懷念。隨着落日的最後一絲餘暉沉入海中，剛才的奇觀已不復見。

我閉上眼睛，極力回想夕陽的美景，但是腦海中浮現的並不是沙宣落日，而是從前和知己密友一起觀星看日落，一起行山看海的回憶。儘管那時的風景不如剛才的一幕，但卻是教人最懷念的愉快時光，只是後來大家工作忙碌，相聚的時間也就少了，感情大概也有些轉淡了罷。想到此，不禁感歎人生悲歡離合，聚少離多的無奈。良辰美景未能與人分享，亦只是一件憾事，驀然體會到「好風景多的是，夕陽平常事，然而每天眼見的，永遠不相似」這歌詞背後的情懷。或許，正因為近黃昏之故，大家才會更懂得欣賞，更懂得珍惜夕陽的無限好。



## “The Horror”

Andrea Liu

Once again, it keeps rolling down the road, in my direction, gathering momentum. Shallow breaths of panic fill the still air as I begin yet another run. But it comes rolling and rolling, unraveling one layer after another until this diminishing mass ... Bam! The unthinkable... it comes to a halt, completely unfolded at my feet. There right in front of my eyes lies the horror; the past compressed into a hideous lump-in great abhorrence returns an unyielding stare that pierces through the core of a chilled heart. Governed by an overwhelming fear — a morbid fear of loss, I start wrapping and tying it up again. And upon my shoulder, it sags and gains weight with every step I take. There is no choice but to let go and quickly it slips past my fingers and lands on the path with a callous, unforgiving thud. All the while, doubt and fear crowds upon me, slowly devouring an emaciated soul. And with tide of emotions washing over, baptism finally draws to a conclusion.





## CARPE DIEM

Philip Chan M09

As the curtain for the first year of Medical school drew to a close, the transition between high school and university is finally completed. In the half year I've attended the University of Melbourne, I've noticed that students changed from the slack to the slacker. But in the case of Hong Kong, I have noticed that many of us have morphed from nerds or geeks...to nerdy geeks (or geeky nerds, if you like). Of course, sadly, this is not the only realisation that dawned on me in the past year.

On the first day of school, 8<sup>th</sup> September 2004, we never knew what we were about to face — lung physiology taught by Lung, separating girls and guys in the ECG practical (damn...), library projects that were never meant to be due, lecturer complicating lectures, contradictions in lecture notes, Bayview, singing “I'm being swallowed by a Boa Constrictor...”, playing Simon Says in Latin (almost), told that we were not allowed to wear sandals, short skirts, flowery or beachy tops or shorts, et cetera, et cetera. We did know one fact — it would and will be a long and winding journey.



For me, I did not realise there were many many issues homing on me, eventually hitting me hard at the worst of the times. Most of you know by now that I've spent the last decade of my life in Australia, completely and utterly missing out on the Hong Kong culture. So, when I landed on Lantau Island for my ninth-of-July-two-thousand-and-four interview, I knew that adapting to Hong Kong would mean more than dyeing my hair to a shade of bronze and being prescribed a pair of glasses with thick, pure white or black rims. As I strolled on the so familiar and yet so vague streets, literally drinking the mid-summer air, I imagined what it would be like if I had to migrate

back to Hong Kong. I thought I would have all the freedom in the world, which I do, and, when I need to, I can study all I need, which I don't. I can eat at cheap restaurants with monosodium glutamate loaded dishes, which I do, and drink all the alcohol I want, which I, well, don't you mind.

Obviously, living by myself is not as simple as it seems. In fact, there are no parts of living by myself easy. Imagine a guy, like me, has to be forced into washing dishes, going to the market,



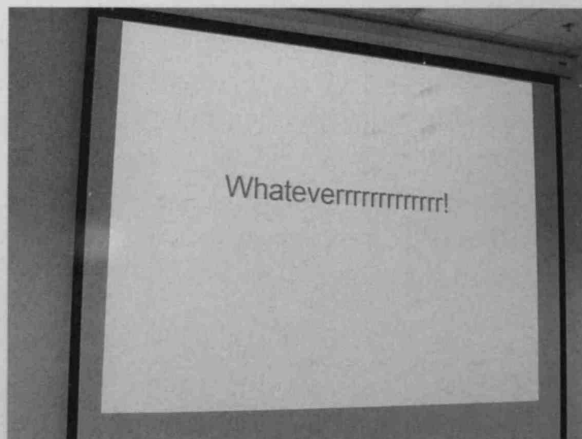


cooking meals, doing his own laundry, cleaning the house and on top of that, keeping up with his own school work, and of course keeping up his forum tally! Even after five months of solitary living, I can't say I've perfected the list of chores... apart from the last one. But I don't mind doing them, as long as I can eventually lead my life to become a doctor.

It was the beginning of a hectic year, of PBL's, lungs, hearts, blood vessels, stomachs, jejunums, and of the nightmare of respiratory

physiology. By early January, every student, apart from the rare few, had their gears up a notch now that marks count. I bet some were, by mid-January, already planning their revision timetable, in which the word "sleep" appears only once or twice every week. Some, like me, were ready to bribe PBL tutors for a higher score (those in my PBL group in the second semester would confirm that this is a factual lie. I bribed them as a joke). The aura around the faculty was definitely as different from the science faculty in Melbourne University as nerds and slackers. There was definitely the air of competitiveness. Everyone wants their own "Golden Stethoscope". For me, I just wanted my own damn one-thousand-dollar 3M(tm) Littmann(r) Cardiology III Stethoscope that arrived broken in late January.

Then a crisis came by the second week after the end of the teaching year. It's been eight months since I saw my family, and three months since I saw my girlfriend. I was beginning to miss Australia — a lot. I miss the forget-me-not blue skies, fresh air, greenness, grass, nice neighbours, and driving a car. Ever since I've been to Hong Kong, I've only noticed about ten days or so of blue skies, which is not Hong Kong's forte. Fog is, though, and I have noticed that the IFC building likes to hide in the fog. Fresh air, well, let's say that I would not like to have a constant relative risk of 1.5 of developing lung cancer because of passive smoking no matter where I go. As with my neighbours, I have terrible noise trouble with the three of them. The apartment below me and next door like to pump up their bass until I can feel the vibration on my chair. The other next door, which happens to be the in next building, plays mahjong until one or two in the morning.



But what I miss the most is my family. I don't know about you, but after learning all the relative risks, odd ratios, and attributable risks of CHD, IHD, HNPCC, FAP, GERD, or WHATEVER, I feel more anxious about the close people around me, especially the older generation. Funny how they design PBL's so that they are all big cases. Are they trying to make us paranoid if we're suffering from a slight cough or sore throat to make us think we have streptococcal pharyngitis and we shall be doomed to have rheumatic heart fever? In my innocent years (well, "early innocent



years", since those who know me well will agree that I am still, in fact, as innocent as an angel) in Australia, I used to take my family for granted, and that they will always be there for me. But, of course, that's not possible. Now that I've been isolated from them, it made me realise how much of a role they play in my life. As I said before, try to imagine a guy washing dishes, going to the market, cooking meals, doing laundry, and cleaning. But not only that, but also the direct and indirect support (Ref: R Fielding, IHD block, L67) they provide is immense. It is definitely something that we should not take for granted.



The final hurdle, which happens to be the biggest, is the Summative Exam, and is only a few days away. But by the time you read this, it will be a few negative months away. For me, it is not just learning about Medicine, about how to deal with disease, people and people with diseases. It is much more than that — I've learnt that you can sleep in class, you can skip class, you can eat in class and no one cares. I've learnt that we don't really have homework or assignments to rush the night before the due date. I've learnt that fun is sometimes making fun of the lecturer's mistakes. I've learnt that we shouldn't try so hard for the first two years, but should enjoy it, because we will inevitably, one day, forget why G6PD is so important in haemoglobin regulation, or why fatty acid metabolism in the myocardium is preferred, or the Nobel-prize standard of how insulin increases glucose uptake via PI-3K, IRS-1, GluT4, PIP2 and PIP3 (oh boy, these are just a few in the massive list. I'm sparing you the pain of it all). But the most important thing I've learnt is that there is much more than just learning in Medical School. We should care about each other — friends, family, girlfriends, boyfriends, neighbours and ourselves. Don't just bury your heads in pages of Robbins or Kumar and Clark or Davidson. There's a world out there to explore before we are suffocated in the reality of Medicine by Year Three.

As the motto of a Melbournian newspaper says — Carpe Diem.  
Seize the day.



# 啓思有感



## 覃燕筠 Esther

Chief Editor

一切從零開始。

未嘗過宣傳莊會、上議會；未曾有過一大班同路人咬文嚼字、追稿、校對、排版；更未試過訪問許多名醫、議員……

笑過、哭過、興奮過、辛苦過；空手而來，滿載而歸。

感謝我們在天上的父，是您，讓一切都變成有可能。



## 麥子揚 Henry

General Editor

做《啓思》令我看見很多新鮮的人和事。

## 吳錦汶 Tony

General Editor

在《啓思》的旅途上，我很高興認識了一班好友，並嘗過了許多難忘的第一次。我第一次上莊，第一次由學生變身為記者，四出訪問焦點人物，第一次徹夜不眠，第一次從通宵開會中感受到「疲倦」……沒有這一切，我大學的生活將會失去色彩。



## 陸頤 Andrew

General Editor

真高興能成為《啓思》的一份子，和一班好友一起工作，點點滴滴也是難忘的。希望大家踴躍參與《啓思》的編輯工作，讓《啓思》精神發揚光大！



## 吳燕婷 Michelle

Financial Secretary

一年前，我本着一試無妨的心態跟好友們加入《啓思》。身為財務秘書的首要任務便是聯絡出版商和編寫財政預算；但我們《啓思》一家親，工作起來又怎會分彼此呢？於是我還是有機會當小記者四出訪問，除了能一睹「大人物」的風采，訪問的過程更令我獲益良多。最難忘的還是上年冬天最冷的日子，我和幾位莊友去訪問李國英議員。雖然那天一大清早寒風刺骨，但和一班志同道合的莊員一起工作，怎樣也是開心的。上了這個莊我真的無悔。



## 雷雯華 Ellen

Public Relations Secretary

回想一年前，我同一班朋友一起上啟思莊。這一年，我有機會接觸到各式各樣的人，擴闊了我的眼界。但最重要的是與各個莊友的友誼。



## 杜正山 Samuel

Photographer

一直好喜歡影相，所以知道有Photographer這個位。立即答應上《啓思》！好開心過去一年同護理及西醫同學一齊合作！我係第一個中醫人上這個莊，希望將來多點中醫上《啓思》！

## 莫燕君 Sophia

Editor

能夠參與《啓思》的編輯工作，收集資料、訪問、寫稿……都是非常難忘的經驗。很榮幸能夠得到這個機會，亦很感謝各位願意接受訪問的醫護人員。



## 梁可欣 Wendy

Editor

很開心能夠成為《啓思》編輯，有機會以文會友。在一段從無到有的歷程中，我盡嘗個中的酸甜苦辣；眼看着雜誌順利誕生，實在是一件賞心樂事。驟眼來看，編輯工作似乎枯燥乏味，但我卻從中得到了難忘的體驗和樂趣。我很珍惜這些乍驚還喜的經驗，因為它們潛移默化地擴闊了我的人生觀和視野；當然另一得着就是結識了一班志同道合的戰友，分享了寶貴的友誼，而其中團隊精神的具體演現，相互的關懷和幫助，使我在醫學院的日子裏，平添了不少繽紛的色彩。

## 文芷薇 Vivian

Editor

參加《啓思》已有一年多了。由當日上莊到今天出版本年最後一期啟思，全莊都付出了不少時間和努力，安排訪問、寫稿、校對，以至最後排版的工作，都成了這年的一點一滴。但見到編撰的文章「出爐」，箇中的成功感亦是難以形容的。當然我亦非常感謝參與投稿的同學，他們的參與減輕了不少編輯的工作。



## 郭淑德 Gladys

Editor

身為《啓思》的莊員，《啓思》除了讓我有更多機會接觸不同的人，亦令我認識了一群好朋友。於這一年裏，與他們一起努力地完成兩期的《啓思》，使我更加了解自己，亦更加了解我的好朋友。多謝各位！

## 林婷 Sophie

Editor

感謝神！

一年兩期的《啓思》終於順利誕生，雖然到此刻還不時有人會帶着驚訝的眼神望着我，然後說：「原來你是上《啓思》莊的！」

但我這個隱形莊員卻是挺喜歡在《啓思》寫作的日子。印象最深刻的是有機會訪問陳英凝醫生，她的每一句說話都給我帶來很大的啟發，令我對將來的路有新的看法！

最後，廢話少說了，只希望你們都享受啟思。



