C-F-2

How Effective is the First Year Transitional Course in the Revised Medical Curriculum at the University of Hong Kong?

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Introduction: The New Medical Curriculum (NMC) has been introduced at the University of Hong Kong since 1997. The NMC emphasises self-directed, student-centred and problem-based learning, together with early clinical contact. This study examined the effects of a transitional course for new medical student to help them adapt to the NMC.

Methods: Quantitative and qualitative data were collected through the year-end questionnaire distributed to all First Year students over three years from 1997–2000. They were analysed using SPSS and NUD*IST respectively.

Results: The students considered the transitional course had encouraged them to be active, self-directed learners although there were different views about its overall effectiveness. Some suggested additional support to those students who did not have a biology background from high school. Students appeared uncertain as to the depth in which they were expected to master the subjects, thus leading them to call for more clearly stated learning objectives to help relieve the anxiety they had towards the examinations. Lectures and self-assessment exercises were seen to be providing the general guides for that. Clinical components were generally well accepted.

Conclusion: The transitional course helped the new medical students to adapt their passive learning style to the requirements of a self-directed problem-based new medical curriculum.

C-G-1

A Comparison of the Clinical Characteristics, Urodynamic Findings and Clinical Response to Antimuscarinic Agents Between the Chinese Elderly with Idiopathic Detrusor Instability and Detrusor Hyperreflexia

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Introduction: Overactive bladder, a common cause of incontinence in the elderly, can be divided into two groups – idiopathic detrusor instability or detrusor hyperreflexia. Patients with overactive bladder in the presence of relevant neurological disorders are classified into detrusor hyperreflexia group. Those patients with overactive bladder without known aetiology are classified into idiopathic detrusor instability group. The clinical features and urodynamic findings between these two groups of patients have not been well documented in the elderly both locally and internationally.

Methods: This is a retrospective case analysis. Case records of patients followed up in the Continence Clinic of Fung Yiu King Hospital were reviewed. Patients with idiopathic detrusor instability and detrusor hyperreflexia are compared in following aspects: clinical characteristics, urodynamic parameters and clinical response to antimuscarinic agents.

Results: Patients with detrusor hyperreflexia showed statistically significantly (P<0.05) higher functional dependence level, higher male to female ratio (0.33 vs 0.04), more number of co-morbid diseases (3.32 vs 0.04) and higher incidences of hypertension (68% vs 38%) and hyperlipidaemia (14% vs 2%). In the cystometrogram, detrusor hyperreflexia group of patients showed significantly higher maximum unstable detrusor pressure in millimetre water during the filling phase (42.7 vs 29.9), higher detrusor pressure at maximum flow (38.9 vs 30.4) and higher maximum detrusor pressure during voiding phase (48 vs 36.5). Moreover, detrusor hyperreflexia patients had lower infusion volume in millilitre at first unstable detrusor contraction (122 vs 177) and lower residual volume (29 vs 52). However, both idiopathic detrusor instability and detrusor hyperreflexia groups of patients showed similar clinical response rate to antimuscarinic agents (71.9% vs 70.2% respectively, P>0.05). Lower Abbreviated Mental Test (AMT) score, living in institution, known history of dementia, history of faecal incontinence, using diapers before the first medical consultation for bladder problems and high maximum unstable detrusor pressure during the filling phase of cystometry were associated with poor clinical response to antimuscarinic agents in both group of patients.

Conclusion: There were significant differences in clinical characteristics and cystometry performance between idiopathic detrusor instability and detrusor hyperreflexia group of patients. These implied that they may have different underlying pathophysiological pathway. Also, poor mental and physical conditions were associated with poor response to antimuscarinic agents in both groups of patients.