CUHK Psychiatry – The First Four Decades, From Foundation to Future

Scientific Symposium cum dinner

3 November 2018 (Saturday)
Kerry Hotel, Hunghom
CUHK Psychiatry – the First Four Decades, from Foundation to Future

Scientific Symposium cum dinner

To honor 3 Distinguished Scholars:

Prof. Chen Char-nie, Prof. Helen Chiu & Dr. Leung Chi-ming

Date: 3 November 2018 (Saturday)

Time: 12:00 – 22:00

Venue: Hunghom Room 1-2, Level 1, Kerry Hotel, Hong Kong,
38 Hung Luen Road, Hunghom, Kowloon, Hong Kong
# Content

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme</td>
<td>3</td>
</tr>
<tr>
<td>About the Symposium</td>
<td>4</td>
</tr>
<tr>
<td>About Professor CHEN Char-nie Research and Education Fund</td>
<td>4</td>
</tr>
<tr>
<td>Organising Committee of the symposium</td>
<td>5</td>
</tr>
<tr>
<td>Our three distinguished scholars and clinicians</td>
<td>9</td>
</tr>
<tr>
<td>Memorabilia of Department of Psychiatry, CUHK</td>
<td>12</td>
</tr>
<tr>
<td>Recent Research</td>
<td>14</td>
</tr>
<tr>
<td>Abstracts</td>
<td>18</td>
</tr>
<tr>
<td>Signature</td>
<td>38</td>
</tr>
<tr>
<td>Sponsors</td>
<td>40</td>
</tr>
<tr>
<td>Time</td>
<td>Topic/Event</td>
</tr>
<tr>
<td>------------</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>11:30 – 12:00</td>
<td>Registration and light refreshment</td>
</tr>
<tr>
<td>12:00 – 12:05</td>
<td>Welcome Speech (Prof. YK Wing, Chairman, Department of Psychiatry, CUHK)</td>
</tr>
<tr>
<td>12:05 – 12:50</td>
<td>Education theme (Session Chairman: Prof. YK Wing)</td>
</tr>
<tr>
<td>12:05 – 12:25</td>
<td>Psychiatry Education - from past to future (Dr. Winston Chiu)</td>
</tr>
<tr>
<td>12:25 – 12:45</td>
<td>Medical Student education and student wellness (Dr. Sandra Chan)</td>
</tr>
<tr>
<td>12:45 – 12:50</td>
<td>Discussion</td>
</tr>
<tr>
<td>12:50 – 13:35</td>
<td>Old Age Psychiatry (Session Chairman: Dr. Allen Lee)</td>
</tr>
<tr>
<td>12:50 – 13:10</td>
<td>Development of the Hong Kong Brief Cognitive Test (Prof. Helen Chiu)</td>
</tr>
<tr>
<td>13:10 – 13:30</td>
<td>Re-interpreting common sense in aging (Prof. Linda Lam)</td>
</tr>
<tr>
<td>13:30 – 13:35</td>
<td>Discussion</td>
</tr>
<tr>
<td>13:35 – 14:20</td>
<td>Sleep Medicine in Hong Kong (Session Chairman: Dr. Samson Fong)</td>
</tr>
<tr>
<td>13:35 – 13:55</td>
<td>Novel Ideas in Sleep Medicine (Prof. CN Chen)</td>
</tr>
<tr>
<td>13:55 – 14:15</td>
<td>Psychiatry, sleep and neuroscience – the way forward (Prof. YK Wing)</td>
</tr>
<tr>
<td>14:15 – 14:20</td>
<td>Discussion</td>
</tr>
<tr>
<td>14:20 – 15:05</td>
<td>Epidemiology of Mental Health (Session Chairman: Prof. Lee Sing)</td>
</tr>
<tr>
<td>14:20 – 14:40</td>
<td>Figures and numbers, what’s next? (Prof. Linda Lam)</td>
</tr>
<tr>
<td>14:40 – 15:00</td>
<td>Child Epidemiology of Mental Disorders: What for? (Dr. SF Hung)</td>
</tr>
<tr>
<td>15:00 – 15:05</td>
<td>Discussion</td>
</tr>
<tr>
<td>15:05 – 15:25</td>
<td>Coffee Break</td>
</tr>
<tr>
<td>15:25 – 16:10</td>
<td>Liaison Psychiatry (Session Chairman: Dr. TS Lee)</td>
</tr>
<tr>
<td>15:25 – 16:35</td>
<td>The hidden liaison (Dr. CM Leung)</td>
</tr>
<tr>
<td>15:35 – 16:50</td>
<td>Traversing affectivity - modern avenues of research in psychosomatic medicine (Dr. Arthur Mak)</td>
</tr>
<tr>
<td>15:50 – 16:05</td>
<td>Consultation-Liaison Psychiatry - learning from the master (Dr. Irene Kam)</td>
</tr>
<tr>
<td>16:05 – 16:10</td>
<td>Discussion</td>
</tr>
<tr>
<td>16:10 – 17:00</td>
<td>Substance Abuse Services and research in Hong Kong (Session Chairman: Dr. Lam Ming)</td>
</tr>
<tr>
<td>16:10 – 16:25</td>
<td>Novel Ideas in Substance Abuse (Prof. CN Chen)</td>
</tr>
<tr>
<td>16:25 – 16:40</td>
<td>Ketamine Abuse (Prof. WK Tang)</td>
</tr>
<tr>
<td>16:40 – 16:55</td>
<td>From Hospital into Community (Dr. Ben Cheung)</td>
</tr>
<tr>
<td>16:55 – 17:00</td>
<td>Discussion</td>
</tr>
<tr>
<td>17:00 – 17:35</td>
<td>Psychiatrists in Community (Session Chairman: Dr. Dicky Chung)</td>
</tr>
<tr>
<td>17:00 – 17:10</td>
<td>My PWH (Dr. CM Leung)</td>
</tr>
<tr>
<td>17:10 – 17:20</td>
<td>Homelessness and Mental health in Hong Kong (Dr. Larina Yim)</td>
</tr>
<tr>
<td>17:20 – 17:30</td>
<td>Our Professor and Those in Need (Dr. David Lau)</td>
</tr>
<tr>
<td>17:30 – 17:35</td>
<td>Discussion</td>
</tr>
<tr>
<td></td>
<td>Evening Events</td>
</tr>
<tr>
<td>18:00 – 19:00</td>
<td>Cocktail reception at Foyer Reset up of symposium venue</td>
</tr>
<tr>
<td></td>
<td>Registration for Evening Symposium</td>
</tr>
<tr>
<td>19:20 – 19:30</td>
<td>Welcome speech (Prof. YK Wing, Chairman, Department of Psychiatry, CUHK)</td>
</tr>
<tr>
<td>19:30 – 20:00</td>
<td>Evening Lecture: <em>The Historical Development of Psychiatry in China &amp; Taiwan</em> (Prof. CN Chen)</td>
</tr>
<tr>
<td>20:00 – 22:00</td>
<td>Dinner and performance</td>
</tr>
</tbody>
</table>
About the Symposium

This Scientific Symposium cum dinner is to honor 3 distinguished scholars and clinicians, Professor CHEN Char-nie, Professor Helen CHIU and Dr. LEUNG Chi-ming, who have contributed to the development of mental health in Hong Kong over the past four decades. The symposium will cover various topics in Psychiatry including Medical Education, Old Age Psychiatry, Epidemiology, Sleep Medicine, Liaison Psychiatry, Substance Abuse and Psychiatrists in Community. In addition, the establishment of a department research and education fund, namely Professor CHEN Char-nie Research and Education Fund will be inaugurated during the symposium.

About Professor CHEN Char-nie Research and Education Fund

Professor Chen Char-nie was our Foundation Chairman and Professor of Psychiatry since 1st January 1981. He served as department Chairman for the first 17 years of our Faculty. He formally retired in August 1998 from CUHK. Professor Chen is currently in private practice after his retirement. Professor Chen was awarded Emeritus Professor in early January 2018. In summary, Professor Chen is a distinguished scholar, psychiatrist, researcher and educator who has not only helped to build up our Faculty of Medicine but has also contributed to the wider mental health development and research locally and globally. Therefore, we would adopt his name for establishment of a department research and education fund.

This fund will be used in (i) recruitment of visiting scholars, academic staff, honorary staff, etc. to deliver teaching and research-related activities, (ii) support academic staff for research purpose, (iii) support organization of department mental health activities e.g. workshops, conferences and seminars, etc.
**Organising Committee of the symposium**

**Chairman**

Prof. WING Yun Kwok  
Chairman & Professor  
Department of Psychiatry  
The Chinese University of Hong Kong

Professor Wing graduated from The Chinese University of Hong Kong, Hong Kong SAR, China. He is currently the Chairman and Professor in the Department of Psychiatry and Associate Dean (Student affairs) of the Faculty of Medicine of the Chinese University of Hong Kong. He is also the Director of the Sleep Assessment Unit of Shatin Hospital. He has been the Honorary Chief of Service in the Department of Psychiatry in both Shatin Hospital and Prince of Wales Hospital since 2003.

Professor Wing has diverse research interest in sleep and circadian medicine, psychiatric disorders, neuropsychiatry, and transcultural psychopharmacology with extensive publications in international journals. He is actively contribution to the scientific communities, including his leadership service role in the Hong Kong Society of Sleep medicine (ex-President, HKSSM) and Asian Sleep Society of Sleep medicine (ASSM, Vice-president (Research), Hong Kong Society of Biological Psychiatry (Committee member and Chairman of scientific committee). Furthermore, he also involved in the Collegium Internationale Neuropharmacologicum (Local organizing Committee of biennial CINP symposium, 2010), World Association of Sleep Medicine (Scientific Committee, 2011, 2013 and 2015) and World Sleep 2017 (Scientific Committee).

**Members**

Dr. David Lau  
Specialist in Psychiatry

Dr. Ying Kit Lau, David graduated from the Medical School of the Chinese University of Hong Kong. He is granted membership by the Royal College of Psychiatrists in 2000. He is a fellow of the Hong Kong College of Psychiatrists, and a Specialist in Psychiatry of the Medical Council of Hong Kong. David started his private practice in psychiatry since 2005. He is currently working as the Honorary Consultant in Psychiatry of St Paul's Hospital and the Infectious Disease Centre of the Hospital Authority. He is the Vice-chairman of the Mental Health Foundation from 2011 – 2014 and he became the Chairman of the Foundation since 2014. He is appointed as a member of Advisory Committee on Mental Health in 2017. He has special interest in Consultation Liaison Psychiatry (諮詢會診精神科), Electroconvulsive Therapy (腦電衝療法) and Early Psychosis (思覺失調).
Dr. Samson Fong  
Specialist in Psychiatry

Dr. Fong received his undergraduate medical training in Chinese University of Hong Kong and then in University of Sydney. He started his basic psychiatric training in 1995 and higher training in sleep medicine in the Chinese University of Hong Kong from 1999. He was the Vice-President of the Hong Kong Society of Sleep Medicine from 2014-2016 and is now the Honorary Clinical Associate Professor of the Department of Psychiatry, the Chinese University of Hong Kong.

Dr. Peter Pang Chi-Wang  
Specialist in Plastic Surgery

Dr. Peter Pang Chi-Wang, graduated from the Chinese University of Hong Kong obtaining the MBChB degree in 1994. He worked and was trained in the Prince of Wales Hospital, became the Fellow of Royal College of Surgeons (Edinburgh) in 1998, Fellow of Hong Kong Academy of Medicine (Surgery), specialist in plastic surgery in 2002. He has 29 paper publications and two book chapter. He is Chairman for the charity “BEAM International Foundation” and received the Hong Kong Humanity Award 2011. He is the 3rd Vice Chairman of Lok Sin Tong Benevolent Society Kowloon. He was the president of the Rotary Club of New Territories (2008-09), District Governor of Rotary District 3450 in 2015-16. He is the Panel Committee Chairman of the New Territories General Chamber of Commerce. He is the member of the Public Education and Publicity Sub-Committee Steering Committee on Mediation and was the member of the Committee on Promotion of Organ Donation (2016018). He is now a plastic surgeon in private practice, Director of the Plastic and Aesthetic Centre; the Director of the Hair Transplant Centre of the Union Hospital. He was the Chairman of the CUHK Medical Alumni Association.
Dr. Arthur Mak
Assistant Professor
Department of Psychiatry
The Chinese University of Hong Kong

Dr. Arthur Mak graduated from the Faculty of Medicine of the Chinese University of Hong Kong in 2000, and was a fellow at the Fogarty International Mental Health Training Program at the Department of Social Medicine, Harvard Medical School in 2006. Since returning to Hong Kong, Dr Mak has become in charge of the Consultation Liaison Psychiatry services at the Prince of Wales Hospital, and worked with Professor Justin Wu of the CUHK Department of Medicine to develop a pioneering service and research program on Functional Gastrointestinal Disorders. He is also devoted to work on psychiatric epidemiology as well as clinical, neuro-modulation and neuroimaging research on affective disorders and neurodevelopmental disorders. He is a co-investigator in the HKMMS 3-year follow up survey, and currently a collaborator of the WHO World Mental Health Survey Initiative. Since joining the Faculty, he has led teams of investigators in gaining 5 competitive research grants from the Research Grants Council (GRF) and the Food and Health Bureau (HMRF) to pursue neuroimaging and interventional studies for affective, neurodevelopmental and Functional Gastrointestinal Disorders. He was recipient of Early Stage Investigator recognition award by the American Gastroenterology Association in 2015 for his neuroimaging work on Functional Dyspepsia. Dr Mak is also passionately devoted to music – he has founded the Hong Kong Medical Association Orchestra Chamber Ensemble to organise concerts for charity and health promotion. ‘Madly Musical’, the RTHK4 radio program he co-hosted with educational psychologist Mr Louis Lee and neuroscientist Prof Vincent Cheung to provide community mental health education via in-depth discussion and illustration of the impact of mental illnesses on the lives and creativity of great composers, have won a Bronze medal in the 2017 New York Festivals World’s Best Radio Program Award (Culture and Arts category).

Dr. MA Suk-ling
Assistant Professor
Department of Psychiatry
The Chinese University of Hong Kong

Dr Suk Ling Ma is currently Assistant Professor at the Department of Psychiatry, the Chinese University of Hong Kong. Dr Ma received her BSc degree in Biochemistry, M.Phil. and Ph.D. degree in Medical Sciences from the Chinese University of Hong Kong. She received her postdoctoral training from Harvard University. Dr Ma has a major interest in genetics of Alzheimer's disease. Her study is focus in identifying the high risk subjects and development of diagnostic tools. In addition to Alzheimer's disease, Dr Ma also worked on a number of genetic studies on sleep disorder and autism.
Allen Lee is currently a Clinical Assistant Professor in the Department of Psychiatry at the Chinese University of Hong Kong and an Honorary Associate Consultant in the New Territories East Cluster of the Hospital Authority. His main research interests include identification of modifiable risk factors of neurocognitive disorders and non-pharmacological intervention for cognitive impairments. Together with Professor Helen Chiu and Professor Linda Lam, he has published a number of international peer-reviewed journal articles with high Almetric scores. He was awarded the Distinguished Young Fellow by the Hong Kong Academy of Medicine in 2017.

Dr. Allen Lee
Assistant Professor
Department of Psychiatry
The Chinese University of Hong Kong
Our three distinguished scholars and clinicians

Emeritus Professor CHEN Char-nie

Professor Chen was the Foundation Chairman and Professor of Psychiatry since 1st January 1981. He served as department Chairman for the first 17 years of our Faculty. In addition, Professor Chen was also the Foundation Head of Shaw College from 1987 to 1994. He also served as Honorary Chief of Service of Department of Psychiatry of Prince of Wales Hospital during 1992-1998; and Honorary Chief of Service of Department of Psychiatry of Shatin Hospital for the period of 1996-1998. He formally retired in August 1998 from CUHK. Professor Chen is currently in private practice after his retirement.

Professor Chen has been making tremendous contribution to the department and Faculty since its inception and has laid the solid foundation for all aspects of teaching, research and services for both the department and Faculty. Although he has officially retired almost 2 decades ago, he is still very dedicated in contributing to education and learning of our medical students and trainees. He has been serving as our departmental examiner and providing clinic attachment to medical students for past 2 decades.

Professor Chen has been greatly contributing to the Hong Kong mental health development and related research landscape. He has been the most influential leader in leading the development of Hong Kong mental health service. Because of his distinguished services, he has been awarded an Officer of the Most Excellent Order of the British Empire (OBE) - Appointed by Her Majesty, The Queen of The United Kingdom on her 1997 Birthday Honours list; Honorary Fellow (2008), Shaw College, CUHK; International Distinguished Fellow (since 2012), American Psychiatric Association; Honorary Fellow (2014), Hong Kong College of Psychiatrists; 特别贡献奖 (Special Contribution Award), 中国睡眠研究会 (Chinese Sleep Research Society) at its Annual Conference in Chengdu, Sichuan, China, in September 2016.)

Professor Chen was awarded Emeritus Professorship in 2018.
Emeritus Professor Helen CHIU

Professor Helen FK Chiu, MBBS, FRCPsych, FHKAM(Psychiatry), FHKCPsych is Emeritus Professor of Psychiatry at the Chinese University of Hong Kong and President of the Hong Kong Psychogeriatric Association; Past President of the Pacific Rim College of Psychiatrists, Past President of the Hong Kong College of Psychiatrists, as well as Past President of the International Psychogeriatric Association. She has been Head of the Department of Psychiatry at the Chinese University of Hong Kong from 1996 to July 2011. Prof. Chiu was a member of the Elderly Commission from 2005 to 2011. She was Chair of the Psychogeriatric Working Group of Hospital Authority for many years. She was previously a member of the Expert Group on Dementia set up by the Hong Kong Government. Currently she is Editor of the journal Asia Pacific Psychiatry, and sits on the Editorial Board of over 10 journals. Prof Chiu has over 400 papers published in international journals.

Prof Chiu’s major research interests are in Suicide and in Dementia. She is instrumental in setting up the Elderly Suicide Prevention Service (ESPP) in Hong Kong. In addition, she is a pioneer in the field of dementia research and service development in Hong Kong, and has carried out the first epidemiological study in dementia in Hong Kong in 1995. The Cantonese version of the Mini-Mental State Examination was validated by her, and recently she had developed a new cognitive test for use in Chinese communities and in Asia- The Hong Kong Brief Cognitive Test (HKBC). She is the Founding Director of the Jockey Club Centre for Positive Ageing, a specially designed centre for dementia care, from 2000 to August 2004. Her contribution to dementia research and services have been recognized internationally and she is now a member of the Medical and Advisory Panel of the Alzheimer’s Disease International. She is invited by WHO Department of Mental Health and Substance Abuse to be a member of the Consultation Group on the Classification of Behavioural and Psychological symptoms in Neurocognitive Disorders. She was awarded a Medal of Honour by the Government of Hong Kong Special Administrative Region in 1999. Further, she has been awarded the Distinguished Service Award by the International Psychogeriatric Association in September 2011.
Dr. LEUNG Chi-ming

Retired HA consultant psychiatrist 2017
Formerly lecturer, Dept of Psychiatry CUHK 1989-1993
Adjunct Asso Professor, Dept of Psychiatry, CUHK
Born - KH 1950s
Play - CC island 1960s
Study - WYC & HKU 1970s
Trained - YMTPC, CPH & KWH 1980s
Work - PWH 1990-2010s
Teach - CUHK
Age - SH
Sell - TST (psyche, bags & music)
Write - Karaoke & Mental Health
Like - children & dogs
Memorabilia of Department of Psychiatry, CUHK

The Staff of Department of Psychiatry, Prince of Wales Hospital on 3 June 1987
According to the World Health Organization, mental health is an integral component of health. Mental health problems are common and lead to significant mortality and morbidity. They bring about marked personal distress and functional impairment. They also place a heavy burden on carers and have multiple negative impacts on society. Today, mental illness is the leading cause of disability-adjusted life years (DALYs) and has the greatest economic impact among all non-communicable diseases. Although mental disorders are both treatable and preventable, they remain underrecognised, undertreated and heavily stigmatised. Over the past three decades, our Department has systematically investigated the spectrum of mental health morbidities in Hong Kong from neurodevelopmental, neurodegenerative, and psychosocial perspectives. Some of the findings of our studies have contributed to better clinical practice, formulation of international diagnostic guidelines and the making of mental health policy in Hong Kong and the international arena.
Neurodevelopmental Disorders

Our group has conducted a series of studies on behavioural, biomarker, and neuropsychological research in neurodevelopmental disorders, including autism and attention-deficit hyperactivity disorder (ADHD) in children. Our findings highlight the psychiatric and physical comorbidities that are highly prevalent among children with neurodevelopmental disorders. We have also validated various instruments that have been used for assessing autism and ADHD in western countries. The Chinese versions of these instruments are now being widely used in Hong Kong. Recently, we have embarked on the study of the psychopathology and cognitive and functional impairments in young adults with a previous clinical diagnosis of ADHD in childhood.

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Neuroimaging Studies and Neuromodulation Treatment

Major depressive disorder, or depression, can have a devastating effect not only on individuals but on society at large. Despite its high toll, there has been little improvement in treatment efficacy for this disorder. Recently, the Department has established navigated neuromodulation treatment facilities. It has also conducted clinical trials, funded by the Research Grants Council (RGC) and Health and Medical Research Fund (HMRF), of neuromodulation interventions such as transcranial direct current stimulation (tDCS) and transcranial magnetic stimulation (TMS) for treatment-resistant depression, bipolar affective disorder, and neurocognitive disorders. Within the Department and in cooperation with the University Medical Center Utrecht (UMC Utrecht), we have embarked on several synergistic neuromodulation research projects. The objective of these projects is to devise clinical interventions for mood-disordered patients and examine the structural connectivity map that explains the functional connectivity and treatment response trajectory of their illness. By combining neuroimaging and navigated neuromodulation, this research approach has the potential of identifying network-based neural biomarkers. The latter can then be utilised in hypothesis-driven treatment studies that target TMS on selected biotypes of depression.

In addition, the Department has begun a multimodal research programme — Prospective Evaluation of Affective Complex symptoms and Etiological Factors (PEACE) — to study the relationships of brain energy metabolism, structure and functional connectivity in bipolar and related disorders. This programme involves the prospective evaluation of young adults with unipolar and bipolar disorders, using systematic phenomenological evaluation, neuropsychological assessment, magnetic resonance spectroscopy, and functional magnetic resonance imaging.

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Consultation-liaison Psychiatry

The neuropsychiatric consequences of cerebrovascular accidents (stroke) have often been overlooked. In collaboration with CUHK neurologists and radiologists, we have determined that cerebral microbleeds not only increase the risk of depression in stroke survivors but also have an impact on the course of post-stroke depression. We have also collaborated with the CUHK Institute of Digestive Disease and Institute of Integrative Medicine to provide a combined clinical and research programme for functional gastrointestinal disorders. Current research includes a magnetic resonance spectroscopy and functional magnetic resonance imaging study of functional dyspepsia, and intervention trials of electroacupuncture and yoga for different types of irritable bowel syndrome.

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Substance Use Disorders

Substance abuse is a serious social and medical problem worldwide. Among various psychoactive drugs, ketamine is one of the most commonly abused substances in Hong Kong. Using neuroimaging methods and biochemical techniques, we have conducted a series of major studies to explain how psychoactive drugs such as ketamine alter the structure and function of the brain and how these brain alterations affect mental functions in subjects with psychoactive drug abuse or dependence. Comprehensive data from these studies have been published, detailing the psychiatric comorbidities, cognitive impairment and evidence of brain damage among local ketamine users.

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Circadian Rhythm and Sleep Disorders

The close reciprocal relationship between sleep and mental disorders is clearly recognised today. Our findings, which have implications for early intervention, have suggested that puberty is the critical period for the development of insomnia symptoms and emergence of sex differences. In addition, our group has identified that sleep loss and deprivation are very common in Hong Kong children and adolescents, and are closely related to an array of mental and physical health conditions. These findings have subsequently been translated into a sleep education programme and delayed school starttime intervention. We also established the Sleep Assessment Unit (SAU) at Shatin Hospital, which provides both clinical service for local patients with sleep disorders and professional training to clinicians and technicians in sleep medicine from all over the world. The SAU is actively involved in epidemiological, translational and clinical studies in sleep disorders, as well as circadian rhythm disorders in various medical and mental disorders.

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Neurodegenerative Disorders

Neurocognitive disorders are a major global health concern. Given the current lack of disease-modifying treatments and the ageing of our population, early detection and finding ways to delay or prevent the clinical onset of neurocognitive disorders are of great importance from a clinical and public health perspective. Two of our prevalence studies, one conducted in 1995 and the other in 2005, showed that the prevalence of dementia in Hong Kong had doubled during that 10-year period. We have also succeeded in validating and testing the applicability of a wide range of cognitive screening instruments, which are now widely used throughout Hong Kong. Additionally, we have identified various risk and protective factors for neurocognitive disorders and conducted a series of randomised controlled trials of non-pharmacological interventions for improving cognitive function that have received worldwide attention.

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We have also discovered genetic predisposing factors to Alzheimer’s disease as well as the clinical response to cholinesterase inhibitors in the local Chinese population. Apart from our study of Alzheimer’s disease, we have demonstrated that rapid eye movement (REM) sleep behaviour disorder (RBD) is highly predictive of future synucleinopathy neurodegeneration, the second most common neurodegenerative disorder. Our current projects in sleep and neurodegeneration include a longitudinal cohort study of typical RBD with in-depth measures of clinical, biochemical and sleep biomarkers, along with a family cohort and national registry of RBD. Our long-term goal is to facilitate the search for biomarkers that predict the onset of neurodegeneration and to develop strategies for its prevention.

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Epidemiology

Following a strong tradition of community psychiatric epidemiological research since the 1980s, the Department continues to provide and disseminate a wealth of locally relevant data on the prevalence, distribution, correlates, treatment and outcome of mental disorders in Hong Kong. Our findings have had a widely-felt local impact, including the introduction of broad-based mental health advocacy and new government policy on mental health service and training. Our collaboration in the World Mental Health Surveys has contributed to the understanding of mental disorders by examining the prevalence, risk factors, disease burden, interventions and barriers to service use. From the data we have produced, we have disproved the myth that mental disorders such as depression and anxiety are uncommon in Chinese society. In our latest territory-wide face-to-face community survey, the Hong Kong Mental Morbidity Survey, we further demonstrated that while mental disorders are as common in Hong Kong as in developed Western countries (13% of the local population), the under-utilisation of mental health services and under-treatment are highly prevalent. This is a matter of great urgency for public health. Moreover, contrary to the widespread perception that common mental disorders often resolve spontaneously, our longitudinal data indicate that in the absence of effective interventions they are persistent and can worsen with comorbid complications over time. In addition, our series of largescale community-based studies identified not only the epidemiology of common sleep disorders and problems, such as obstructive sleep apnoea, insomnia, nightmares and parasomnia across the lifespan, but also developmental issues in sleep disorders and their relationship with mental and physical problems.

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Kelly Yee Ching LAI |kellylai@cuhk.edu.hk
Session: Education theme  
(Session Chairman: Prof. YK Wing)  
Lecture Title: Psychiatry Education - from past to future  
Speaker: Dr. Winston Chiu

Abstract:
Dr Winston Chiu will give a brief overview of the history of education and training in Hong Kong from the late 1960’s to the present. The presentation is based on his personal journey of being educated and trained in Hong Kong, and later working with the Medical School in the Chinese University of Hong Kong; combined with the bird’s eye view in the last decade gained through involvement in quality assurance in health care here, and attendance of education activities provided by the Hong Kong College of Psychiatrist. He will express his ideology of medical practice and his personal view of how this should influence education, and, suggest future directions.

Biography:
Dr Winston Chiu is a graduate of the University of Hong Kong. He is a Fellow of the Royal Australian and New Zealand College of Psychiatrists and of the Hong Kong College of Psychiatrists. He contributed to undergraduate teaching as a clinical lecturer of the University of Western Australia, visiting senior lecturer of the Chinese University of Hong Kong; he is a member of the Clinical Academic Unit of Hollywood Hospital, which is a teaching hospital for both medical schools in Perth, Western Australia. His post-graduate training experience includes being a member of the Training Committee of the RANZCP, the Director of the Post-Graduate Training in Western Australia and the Senior Executive of the Post-Graduate Training Committee of the WA Branch of the RANZCP. In the last decade, his position as Consultant to the Australian Council on Health Care Standards – International, his commissioned Overview of Mental Health Service Delivery in Hong Kong, and subsequent interactions with health care providers allowed him privileged insight into the success of the training and standards provided by the Hong Kong College.
Abstract:
Medical schools strive to educate knowledgeable, caring and professional physicians. The growing interest in empathy, wellness and resilience has fuelled the design and implementation of structured educational programmes worldwide to cultivate empathy especially at a time of increasing professional burnout among undergraduates and resident trainees. Empathy in the medical setting includes the appreciation of the patient’s emotions and the expression of that awareness. Empathy is an essential learning objective and it is believed to significantly influence patient satisfaction, adherence to medical recommendations, clinical outcomes, and professional satisfaction. A key component to empathy is reflective capacity. Fostering reflective capacity within medical education helps develop critical thinking skills inform clinical reasoning, and enhance professionalism among trainees. Development of reflective capacity has been highlighted as necessary for effective use of feedback in medical education and is an essential aspect of self-regulated and lifelong learning. Reflection is not necessarily intuitive, especially in students at initial stages of their medical careers. The overarching aim of the resilience building course and other informal community engagement programs is to nurture and consolidate the key soft skills of an effective doctor, as well as healthy resilient personality though the development of reflective capacity and empathy.

Biography:
Dr Sandra Chan, Specialist in Psychiatry, Fellow of the Royal College of Psychiatrists (UK), is currently appointed as Associate Professor of Department of Psychiatry, and Assistant Dean (Student Support) of Faculty of Medicine, The Chinese University of Hong Kong. She is educator of undergraduate and postgraduate psychiatry training for CUHK and the Hospital Authority of Hong Kong respectively, as well as researcher in suicide prevention and mood disorder specializing in neuroimage guided neuromodulation treatment for treatment refractory depression. She also held appointment as chairman of research committee at the Hong Kong College of Psychiatrists.
Session: Education theme  
*(Session Chairman: Prof. YK Wing)*

*Please refer to Page 5.*

Session: Old Age Psychiatry  
*(Session Chairman: Dr. Allen Lee)*

**Lecture Title:** Development of the Hong Kong Brief Cognitive Test  
**Speaker:** Prof. Helen Chiu

**Abstract:**

This presentation is on the development and validation of a brief cognitive screening instrument for use in older people with lower educational levels. There are many existing cognitive tests for screening of cognitive impairment eg the Mini-mental State Examination, the Montreal Cognitive Assessment (MoCA). These tests are strongly influenced by educational levels of the subjects and some tests are difficult for older adults with low educational level.

A new cognitive test, the Hong Kong Brief Cognitive Test (HKBC) was developed. It consists of 9 cognitive domains and administration time is around 7 minutes. The test was administered to 359 older subjects, including normal controls, subjects with Major Neurocognitive Disorder and subjects with Mild Neurocognitive Disorder. Performance of the HKBC in differentiating the 3 groups of subjects was compared with the clinical diagnosis, MoCA and MMSE scores.

We found that the performance of the HKBC as a screening instrument for cognitive impairment is superior to the MMSE and MoCA, with good psychometric properties. The HKBC can be applied to older people with low educational level without adjusting the cut-off scores. Clinical application of the HKBC is discussed in the presentation.

*Please refer to Page 10.*
Session: Old Age Psychiatry  
*(Session Chairman: Dr. Allen Lee)*

Lecture Title: Re-interpreting common sense in aging  
Speaker: Prof. Linda Lam

Abstract:

Population aging is common sense in Hong Kong. It is also public knowledge that dementia is affecting our community and has great impact on the health care system. While medical researchers are exploring pharmacological options that would revert the process of aging, we are also aware that simple lifestyle factors affect the process of ageing. In this talk, we will revisit the ‘common sense modulating factors of aging’ from an evidence based approach. Hopefully, with the relabeling of these modulating factors, inspirations on clinical significant adjuvant interventions will be developed and brought into practice to optimize the developmental potential of later life.

Biography:

Professor Linda Lam is Professor at the Department of Psychiatry of the Chinese University of Hong Kong (CUHK). She obtained her medical undergraduate and post-graduate degree from CUHK.

Professor Lam is Fellow of the Hong Kong College of Psychiatrists and the Royal College of Psychiatrists (United Kingdom). At present, she is the Immediate Past President of the Hong Kong College of Psychiatrists. She is also the past Chief Editor of the East Asian Archives of Psychiatry, and the founding President of the Chinese Dementia Research Association in 2009.

Professor Lam’s main research interests have been the assessment of neurocognitive disorders, identification of risk factors and early intervention for cognitive decline in late life. She has recently completed the first territory wide epidemiological survey of mental disorders in Hong Kong, and pioneered structured lifestyle cognitive and physical activity interventions for Chinese older adults with neurocognitive disorders. Professor Lam has over 200 peer review publications in related areas.

In 2007, she was awarded as Honorary Fellow of the Royal College of Psychiatrists and Honorary Member of the World Psychiatric Association.

Session: Old Age Psychiatry  
*(Session Chairman: Dr. Allen Lee)*

*Please refer to Page 8.*
Novel ideas normally come from many years of hard work, but sometimes they emerge through intuitive thinking. The latter depends upon common-sense knowledge and collateral learning, which should be a good general education for professional training. Many novel ideas may turn out to be workable, although some may not. But this is the fate of learning process in research.

In sleep medicine, the first two-third of the twentieth century was perhaps the beginning of the scientific thrust for novel ideas in sleep-wake mechanisms. More have emerged since then.

First, insomnia is a common clinical disorder. In our Shatin Community Mental Health Survey in the mid-1980, about 17% local residents reported ‘not sleeping well’. Chronic insomnia may also run the risk of dependence on sleeping pills. What are the neural mechanisms underlying insomnia? Could insomnia be corrected through manipulation of neural mechanisms?

In neuroscience, as originally proposed by Giuseppe Moruzzi and Horace Magoun in the 1940s, there is indeed an ascending reticular activating system (ARAS) in the brain which is responsible for the waking behaviour. The ARAS has two pathways. The dorsal one originates from the pedunculo-pontine tegmental nucleus (PPTn) and the latero-dorsal tegmental nucleus (LDTn) in the meso-pontine tegmentum, projects extensively to the neocortical areas through thalamus, leading to cortical arousal or waking behaviour. The ventral pathway is a concerted action of many monoaminergic neurons present from the upper brain stem to the posterior hypothalamus. They finally converge onto the basal forebrain, from where they activate the neocortex and create wakefulness. On the other hand, a neuronal system with opposite action originates in the preoptic area and anterior hypothalamus. It consists of the ventro-lateral preoptic nucleus (VLPOn) and the extended VLPOn, from where they inhibit all the major neuronal groups of the ARAS. In 1998 a new neuropeptide, orexin/hypocretin was separately found by two research groups. Neurons with orexin-1 receptor (OX1R) & orexin-2 receptors (OX2R) were found in the lateral hypothalamus. Although they are few in number, they have widespread mutual projections to many brain regions, including both the ARAS and sleep-promoting neurons. However, OX1R was not expressed in the VLPOn, indicating that orexin neurons may reinforce the arousal systems, but probably may not directly inhibit the VLPOn. For the latter reason, it has been quick for Merck Pharmaceutical to market an orexin receptor antagonist, Suvorexant (Belsomra®), for the treatment of insomnia.

Second, Alzheimer’s Disease (AD) is a debilitating clinical disorder and the most common cause of neurocognitive dysfunction. Patients with AD also suffer from insomnia. Is insomnia a consequence of an ageing brain? Is it a pathognomonic symptom of AD? Or, is it an aberrance of neurons that could perhaps be corrected through neuro-biological manipulation? Recently, two kinds of neuropathology in AD have been reported, i.e., the accumulation of \( \beta \)-amyloid protein and of abnormal tau hyperphosphorylation, both of which can lead to cognitive dysfunction. It has also been suggested that correction of such accumulation of either \( \beta \)-amyloid protein or abnormal tau hyperphosphorilation may improve cognition and/or insomnia. This hopefully may bring possible cure for neurocognitive disorders in the future.

Please refer to Page 9.
Abstract:

Sleep plays fundamental role in maintaining brain and mental health. The establishment of sleep assessment unit by Professor Char Nie Chen has contributed greatly to the development of sleep medicine and research in Hong Kong. Together with other leading centers in the world, we have shown increasing evidences on the bidirectional relationship between sleep and medical disorders including cardiometabolic and neuropsychiatric disorders. The occurrence of sleep disorders have been found to be the main manifestation of several underlying neurological and psychiatric disorders. In particular, our center has active research in REM sleep behavior disorder which has been considered as the most specific precursor for synucleinnopathy neurodegeneration.

Therefore, better delineation of the neurobiological mechanism of sleep and circadian systems have significant implication for advancing our understanding of a lot of neuropsychiatric disorders. This lecture will summarize the research evidence and clinical findings related to sleep disorders such as REM sleep behavior disorders, insomnia, sleep deprivation, and their relationship to neuroscience and psychiatry. In addition, the future direction in this field will also be covered.

Please refer to Page 5.
Session: Epidemiology of Mental Health
(Session Chairman: Prof. Lee Sing)
Lecture Title: Figures and numbers, what’s next?
Speaker: Prof. Linda Lam

Abstract:
Prevalence of mental disorders informed the community about ‘How common?’ or ‘How significant?’ a particular mental condition is affecting the community. In the past 3 decades, CUHK Psychiatry performed large scale epidemiological surveys, telling us that mental disorders are both common and significant. In the Hong Kong Mental Morbidity Survey conducted from 2010-2013, depressive and anxiety disorders affected over 13% of our adult community, whereas 2.5% suffered from psychotic disorders in their lifetime.

Beyond findings of psychiatric epidemiological studies conducted locally and globally, this talk will try to explore the impact of these figures and numbers on clinical practice, and possibility for bringing a paradigm shift in primary or secondary disease prevention for mental disorders.

Please refer to Page 21.
**Session: Epidemiology of Mental Health**  
*(Session Chairman: Prof. Lee Sing)*  
**Lecture Title: Child Epidemiology of Mental Disorders: What for?**  
**Speaker: Dr. Hung Se-fong**

**Abstract:**

There is no health without mental health. Hong Kong needs a mental health policy and an epidemiological study to help us in planning and delivering a coherent and effective mental health service. Professor CN Chen is the pioneer in the area of epidemiological study in Hong Kong. He started the first study, Shatin Community Mental Health Survey about 25 years ago.

Similar adequate size study has to wait for 20 years until the commencement of the Hong Kong Mental Morbidity Survey. However both studies were on adult population. There is a lack of epidemiological study on children. The only one that is done with stringent methodology was conducted by our group on F1-FIII students done 15 years ago as a pilot feasibility study with a sample size of 541. We plan to conduct an adequate sample epidemiological study on children age 6-17 years commencing next year. It'll be a one stage study basing on clinical interview. The aim is not just counting the prevalence. It'll explore the various biopsychosocial factors that affect the occurrence of mental disorders. The study design will be reported and we hope that in the long run we can follow up the cohort so as to examine the evolution of symptoms/syndrome/impairment over time in relation to the biopsychosocial factors.

**Biography:**

Dr. Hung graduated from University of Hong Kong in 1978. He joined the Mental Health Services in Hong Kong since 1979. He was trained in Hong Kong. He received further training in London, United Kingdom in 1983-1984 and in Sydney and Melbourne, Australia in 1994. He is a Specialist (Psychiatry) in Private Practice, Honorary Consultant of Kwai Chung Hospital, Honorary Clinical Professor, Department of Psychiatry of Chinese University of Hong Kong and Honorary Clinical Professor, Department of Psychiatry of Li Ka Shing Faculty of Medicine, University of Hong Kong.

Dr. Hung was Hospital Chief Executive and Consultant Psychiatrist of Child and Adolescent Psychiatric Team of Kwai Chung Hospital and Yaumatei Child Psychiatric Centre before his retirement in March 2012. He is a Fellow of the Royal College of Psychiatrists as well as a Fellow of the Hong Kong College of Psychiatrists. He was Honorary Fellow of the Hong Kong College of Psychiatrist in 2017. He was a member of the Task Group of Global Child Mental Health of the World Psychiatric Association from 2002 to 2006 and President of the Hong Kong College of Psychiatrists from 2006 to 2010.

He has been awarded the Hong Kong Special Administrative Region Chief Executive’s Commendation for Community Services in 2009 for services in Sichuan earthquake and the Bronze Bauhinia Star Medal in 2012 in recognition of his achievement and contribution in the mental health services.
Session: Epidemiology of Mental Health  
(Session Chairman: Prof. Lee Sing)

Biography:

Dr Lee has been a professor (clinical) at the department of psychiatry, CUHK, for a very long time. He is a teacher, clinician and researcher. He researches on psychiatry primarily from social and cultural perspectives, and in such areas as eating disorders, classification, and community mental health. He has also been active in community mental health education, primary care training and advocacy.

Session: Liaison Psychiatry  
(Session Chairman: Dr. TS Lee)
Lecture Title: The hidden liaison  
Speaker: Dr. CM Leung

Abstract:

Liaison work and contribution to local medicine by non-psychiatrists with background psychiatric training is presented. The significance of such phenomenon is discussed.

*Please refer to Page 11.*
Session: Liaison Psychiatry  
*(Session Chairman: Dr. TS Lee)*  

**Lecture Title: Traversing affectivity - modern avenues of research in psychosomatic medicine**  
**Speaker: Dr. Arthur Mak**

**Abstract:**

The modern techniques of neuroscientific research and the readiness of psychiatry to embrace a transdiagnostic and non-dualistic approach to psychosomatic medicine have created a rich occasion for research that endeavors to gain novel insights into pathophysiological mechanisms underlying various common mental disorders, and to seek effective treatment approaches. The CUHK Functional Gastrointestinal Disorders Program – located at the Department of Medicine but jointly run by the PWH Consultation-liaison psychiatric services and the CUHK Department of Medicine & Therapeutics – serves as an example of how, by embracing a collaborative and non-dualistic approach, progress is to be gained both in terms of clinical outcomes, neuroscientific research, but also self-education for the consultation-liaison psychiatrist (and physicians too).

*Please refer to Page 7.*
Consultation-liaison (C-L) psychiatry is the branch of psychiatry that specializes in the interface between physical and psychological health, usually taking place in a general hospital or medical setting. Dr. CM Leung has been of no doubt, one of the most important pioneers in the development of C-L psychiatry in Hong Kong and his unique teaching in the field had benefited many medical students and trainees in psychiatry through the past few decades. In this presentation, the speaker will share the experience of learning from the master and the inspirations that she got from him.

Dr Irene WK KAM (MBChB, MRCPsyCh, FHKAMPsyCh, FHKCPsyCh) studied medicine in the Chinese University of Hong Kong (CUHK) and graduated in 1993. She has worked in the Department of Psychiatry of the New Territories East Cluster for more than 20 years and is currently a consultant working in the fields of General Adult Psychiatry and Gender Identity Disorder service. She is a tutor and trainer (general adult and psychotherapy) of the Hong Kong College of Psychiatrists and Clinical Associate Professor (honorary) of the Department of Psychiatry, CUHK.

Dominic TS Lee read medicine at The Chinese University of Hong Kong. He furthered his training in Hong Kong, Cambridge University and Harvard Medical School. He was previously a Professor at CU and a Lecturer in Social Medicine at Harvard. He is currently in private practice.
Abstract:

Recent research studies have concentrated on the possible link between substance use disorder and early childhood sexual abuse. The latter has also been a common complaint among people with psychiatric disorders, attempted suicide, female sex workers, as well as lesbians, gay, bisexuals and transsexuals (LGBTs). Since 1980s, the world has been over-shadowed by the emergence of HIV infection, which can be transmitted through the exchange of tissue fluids. Since the 1990s, the morbidity and mortality from HIV infection have largely been under controlled by effective anti-retroviral therapy, careful screening prior to transfusion of blood and blood products and during the prenatal period. However, the number of annual new cases of HIV infection, though reduced somewhat in the 1990s, have remained unchanged worldwide in recent years. Studies have shown that there remain two types of high-risk behaviours that account for the annual new cases, i.e., unsafe sexual practice among the LGBTs and injectable drug use. For primary prevention of both substance use disorders and HIV infection, it appears that we should go further and deeper into childhood pathology rather than spending all the money on just educating reluctant people to stop unsafe sexual practice or inject drugs. We should identify and manage childhood sexual abuse as early as possible so that treatment could be given early and future adverse consequences can be prevented. There may be other earlier psycho-social pathologies, which should also be identified and managed as early as possible.

Another novel idea came from the study of orexin. These are brain peptides, the orexin-A and orexin-B, mainly present in the lateral and dorso-medial hypothalamus and perifornical region of the brain, but they project widely throughout the brain. There are two types of orexin receptors, the OX1R and OX2R, which are G-protein coupled receptors. While OX2R is related to sleep-wake cycle regulation, OX1R is related to reward (drug)-seeking behaviours, including morphine, cocaine, nicotine, alcohol, etc. This is probably because OX2R is more prevalent in nucleus accumbens and specific thalamic/hypothalamic regions, whereas OX1R is highly expressed in the cortical regions, the bed nucleus of the stria terminalis and the locus coeruleus. Animal experiments have shown that animals gave up seeking for addictive drugs after destroying the OX2R. This points to a possible future treatment of addictive behaviour with orexin B antagonist. More research is needed.

Please refer to Page 9.
Scientific Symposium cum dinner

Session: Substance Abuse Services and research in Hong Kong
(Session Chairman: Dr. LAM Ming)

Lecture Title: Ketamine Abuse
Speaker: Prof. WK Tang

Abstract:

Ketamine was developed in 1962 as an anesthetic agent for use in pediatrics, oncology, and veterinary practice. During the past decade, ketamine has been proven efficacious in treatment-resistant depression. Due to its unique neurochemical profile, ketamine, and its analogue phencyclidine, has also been tried as new treatments for psychosis and addiction. In contrast to increasing research efforts to understand ketamine’s potential as a therapeutic agent, only a few studies focused on understanding ketamine addiction.

Ketamine misuse started in the United States in the 1970s, soon after its development and wider availability. Ketamine is still a commonly abused drug around the world, particularly in East Asia. Ketamine is predominantly consumed by young people, gay clubbers and poly-substance users. Heavy ketamine users suffer from both physical and mental problems. Serious lower urinary tracts symptoms (increased urinary frequency, urgency, incontinence, hematuria, and dysuria), gastritis and liver and kidney dysfunction are also common in this population. Psychiatric disorders are often comorbid by ketamine include depression, which is remarkably prevalent among chronic ketamine users, psychosis and cognitive impairment. Although there are no typical withdrawal symptoms, craving, anxiety and dysphoria are the main reasons for continuous ketamine use despite of its adverse consequences.

How ketamine affects human brain is not yet clear. A few neuroimaging studies revealed structural and/or functional abnormalities in the frontal regions in chronic users. For example, compared to controls ketamine users had less bilateral prefrontal grey matter, lower white matter integrity and more axon damage in the prefrontal regions, altered regional synchrony of metabolism in the precentral frontal gyrus and anterior cingulate cortex (ACC) and altered resting state functional connectivity (RSFC) between thalamic nucleus and several cortical regions including the prefrontal area. However, it is still not clear if chronic ketamine intake is the cause or consequence of these brain alterations due to the cross-sectional design of these studies. Further, white matter microstructural abnormalities were found predominantly in left prefrontal region in ketamine chronic users when, restricted to the right hemisphere white matter regions when compared with poly-drug users. While a significant correlation between the subgenual ACC - dorsal medial prefrontal cortex connectivity and depression score was found in female ketamine users but not in female controls, it is hard to draw a conclusion whether it was ketamine use or depression that accounted for the discrepancy between ketamine users and controls.

Biography:

Professor WK Tang was appointed to professor in the Department of Psychiatry, the Chinese University of Hong Kong in 2011. His main research areas are Addictions and Neuropsychiatry in Stroke. Professor Tang has published over 100 papers in renowned journals, and has also contributed to the peer review of 40 journals. He has secured over 20 major competitive research grants. He has served the editorial boards of five scientific journals. He was also a recipient of the Young Researcher Award in 2007, awarded by the Chinese University of Hong Kong.
Session: Substance Abuse Services and research in Hong Kong
(Session Chairman: Dr. LAM Ming)
Lecture Title: From Hospital into Community
Speaker: Dr. Ben Cheung

Abstract:
Dr. Ben Cheung graduated from CUHK in 1987. As inspired by Professor CN Chen during his psychiatric module in year 4, he decided to pursue Psychiatry as his lifetime career. Dr. Cheung established the Substance Abuse Assessment Unit at Kwai Chung Hospital in 1995, providing specialized addiction treatment services to a huge population in the catchment area. After years of serving in a tertiary treatment setting, he developed a growing awareness of the big treatment gap as a result of the conventional high threshold model of psychiatric service delivery. He then actively promoted the low threshold, broad-based, motivational approach through networking and partnership with multidisciplinary members of various NGOs. With the help of the Beat Drugs Fund, Dr. Cheung had established the first day hospital for substance users, started a self-help organization for family members and carers, founded outreaching clinics in the community, and pioneered telemedicine services to support remote residential rehabilitation centres. Following the footsteps of Professor Chen, Dr Cheung has now become the Chairman of Action Committee of Narcotics, fighting the drug war on a different platform. The Committee is responsible for advising the Government on policy making, resource allocation, treatment & rehabilitation provision, as well as promotion of public education and academic research.

Biography:
Dr CHEUNG Kin-leung is the incumbent Chairman of the Action Committee Against Narcotics (ACAN), and Vice Chairman of Caritas Lok Heep Club. He is serving many NGOs as honorary advisor for treatment and rehabilitation services. Dr CHEUNG is the Honorary Consultant Psychiatrist of Hong Kong Sanatorium & Hospital. His previous academic posts include: Honorary Clinical Assistant Professor in Faculty of Medicine of HKU, Adjunct Assistant Professor in Department of Psychiatry of CUHK, Trainer (Drug Abuse) of Hong Kong College of Psychiatrists, and Honorary Lecturer of the University of Hong Kong Family Institute. Dr CHEUNG was awarded the JCI Hong Kong Ten Outstanding Young Persons and Medal of Honor of the HKSAR in 2001 and 2003 respectively in recognition of his outstanding contributions in promoting mental health in Hong Kong. He was further awarded the Bronze Bauhinia Star (BBS) in 2014.
Session: Substance Abuse Services and research in Hong Kong
(Session Chairman: Dr. LAM Ming)

Biography:
Dr. Lam has been working in public psychiatric service since 1989 after graduating from the medical school of The Chinese University of Hong Kong in 1988. Subsequently, he was awarded MRCPsych by The Royal College of Psychiatrists in 1994 and FHKAM (Psych) by the Hong Kong Academy of Medicine.

Since 1995, he has been the in-charge psychiatrist of Alcohol & Drug Dependence Unit of Castle Peak Hospital. Before taking up the position as Hospital Chief Executive this year, he was the COS of the department of general adult psychiatry.

Besides clinical and administrative work, he is also actively in research and community participation. He is a member of treatment & rehabilitation subcommittee of Action Committee Against Narcotics (ACAN) and Advisory Committee of AIDS.

Session: Psychiatrists in Community
(Session Chairman: Dr. Dicky Chung)
Lecture Title: My PWH
Speaker: Dr. CM Leung

Abstract:
It is about picking up artistic skills in mental patients and how to sell them.

Please refer to Page 11.
Session: Psychiatrists in Community
(Session Chairman: Dr. Dicky Chung)
Lecture Title: Homelessness and Mental health in Hong Kong
Speaker: Dr. Larina Yim

Abstract:
Homelessness and mental health in Hong Kong – collaboration with NGOs

The presence of the severely ill and unreached homeless people reflect that the current mode of health care service delivery fails to support the most marginalized group in the society. The same is true for other neglected groups. Through the collaboration between health care workers and social workers, the “unreachables” can be identified and treated.

Biography:
Dr Yim Chi Lap Larina
Psychiatrist
Associate Consultant
Clinical Assistant Professor (Honorary)

Research Interests:
Develop a new health care service delivery model. Medical care is easily available in Hong Kong and it is free of charge for patients who have financial difficulty. This is true for majority of the citizens, but not for the “unreachables” in the society, namely the street sleepers with severe mental illness, refugees, ethnic minorities or elderly who live alone and have undetected cognitive impairment. Through collaborating with NGOs, Dr Yim is working on a pilot service project that provides mobile medical assessment service for the homeless and clients with hoarding disorder. With growing manpower, resources and experience, hopefully this service project can benefit other “unreachables” in the society.
Abstract:

Professor Chen Char Nie has been an internationally and locally renowned scholar and clinician not only because of his academic excellence, but also his commitment and care to those in need. He founded the first Pro Bono psychiatric out patient service at the Integrated Treatment Centre (ITC) of Kowloon Bay Health Centre from mid 1999, providing regular psychiatric consultations to patients living with HIV (PLHIV). This is of paramount importance to those with HIV as they are known to have high percentage of psychiatric comorbidities. This set the foot print for similar multidisciplinary services at other HIV clinical services like the one at Princess Margaret Hospital and Queen Elizabeth Hospital. By 2012, Professor Chen founded a mental health charity named the Mental Health Foundation (MHF) with a group of mental health professionals like psychiatrists, clinical psychologists, social workers, nurses and community leaders, It advocates to facilitate Hong Kong into a mentally healthy and stigma-free city and to advance the mental wellbeing of our community. Among all it's works, MHF launched the first psychiatric medication subsidization scheme for those underprivileged patients in town, markedly enhancing the accessibility to new generation medications. It continues to work with various community partners and NGOs, focusing on niche service and education in mental health for our next generation and their family.

Please refer to Page 5.
Session: Psychiatrists in Community  
(*Session Chairman: Dr. Dicky Chung*)

**Biography:**

Dr. Chung, a graduate of the Chinese University of Hong Kong (CUHK) of Year 1987, has been serving in the public mental health service since 1988. He was trained in different psychiatric units in Hong Kong before completing his training in Prince of Wales Hospital (PWH) & CUHK in 1992. After a further training in Cambridge UK, he came back again to join the Department of Psychiatry in PWH in 1994, and later extending to New Territories East Cluster since 2003. He is a consultant psychiatrist and Chief of Service of Tai Po Hospital, Alice Ho Mui Ling Nethersole Hospital and North District Hospital. He is also the Medical Superintendent of New Territories East Psychiatric Observation Unit and Deputy Hospital Chief Executive of Tai Po Hospital. His main areas of interest in psychiatry are early psychosis, forensic psychiatry and community psychiatry. He was awarded with The Chief Executive's Commendation for Community Service, Hong Kong, SAR in 2013, for his contribution to the rehabilitation for ex-offenders in Hong Kong.
The Historical Development of Psychiatry in China & Taiwan

As Mencius (孟子) and Sunbin (孫臏) said it, success at any endeavour depends on three factors, the macro-environment (天), the immediate environment (地) and the human factor (人). To develop modern medicine in China in the 19th century, all three factors were deficient. Macroscopically, in the 19th century, the socio-economic situation was at its worst. In addition to the ‘close door’ policy since the late Ming dynasty, the Qing dynasty in the 19th century also suffered several defeats in wars with the Western countries and Japan. Socio-economic unrest and distrust to the western world made it difficult to accept new ideas, including the then modern western medicine, from the outside world.

Against the background of distrust to the western world, there was also the craving among the rising young Chinese intellectuals for new knowledge and technology in order to save the ‘weak’ China as a nation. Meanwhile, early in the 19th century, the Protestants were anxious to spread the Christian gospel to China. The first Protestant missionary who came to China in 1807 was Rev. Dr. Robert Morrison, FRS (1782-1834). In 1820 he was also quoted to open a dispensary (which was also a clinic in addition to dispensing medicines) with Dr. John Livingstone in Macao (澳門). This paved the way for preaching Christian gospel in China through the provision of Western medical care. Among the medical missionaries entering China, it was mainly, at least initially, the surgical wonders that attracted the curious Chinese eyes and tapped into a huge unmet need in China at the time. Medicine developed later than surgery. This was probably because Chinese people still trusted herbal medicine more than foreign medicine. Besides, the medicinal doctors in the College of Imperial Physicians (太醫院) were still powerful with their influence on the decision whether or not to accept foreign medical practice.

Nevertheless many new medical schools were gradually built in China during the late Qing dynasty. For example, the Boji-yi-xue-tang (博濟醫學堂) in Guangzhou (廣州) in 1866, the Viceroy’s Hospital Medical School (總督醫學堂) in Tianjin (天津) in 1881; the Hong Kong College of Medicine for Chinese (HKCM,香港醫學院) in 1887; the Shengjing Medical School (盛京醫學院) in Shengjing (盛京), currently Shenyang (瀋陽), in 1892, the Taiwan Viceroy’s Medical College (臺灣總督府醫學校) in Taipei (台北) in 1899 (Meiji 明治 32 年), the University Medical School in Canton in Guangzhou in 1905, the Union Medical College (協和醫學堂) in Beijing (北京), now Beijing 北京, in 1906, the South Manchus Medical College (南滿醫學堂) in Sheng-yang in 1911, and the St. John’s Medical University in Shanghai (上海) in 1913. However, it was only when a medical school was in a proper shape that a department of neurology or neurology and psychiatry was available.

Currently, information about the development of psychiatry in a medical school is available on four sites, the Peking Union Medical College (PUMC), the St. John’s Medical University in Shanghai, the Taiwan Viceroy’s Medical College, and the South Manchus Medical College. The first two were set up by foreign medical missionaries, while the last two were established by Japanese government at a time when the land was occupied and controlled by Japanese army.

Among the hospitals with custodial care for psychiatric patients, there were the Hui Oi Hospital (惠愛醫院) at Fangcun (芳村) in Guangzhou in 1897; the Beijing Municipal Psychopathic Hospital (北平市立精神病院) in 1906; the Keelung Hospital (基隆醫院) in 1916; the Psychiatric Hospital in Shenyang in 1919; the Renji Hospital (仁濟醫院) in Taipei (臺北) in 1922; the Elizabeth Blake Hospital in Suzhou in 1923; the Keelung Yang-ming-tang (基隆養命堂) in 1925; the Yang-hao-tang Hospital (養浩堂醫院) in Taipei in 1929; the
Ai-ai-liao (愛愛寮) in Taipei in 1929; the Ai-hu-liao (愛護寮) in Tainan (臺南) in 1929; the psychiatric hospital in Dalian (大連) in 1932; the Taiwan Viceroy’s Yang-shen-yuan (臺灣總督府立養神院) in Taipei in 1932; the Kaohsiung Bao-yang-yuan (高雄保養院) in 1933; the Shanghai Mercy Hospital in 1935; the Jing-he Hospital (靜和醫院) in Taichung (臺中) in 1936; the Psychiatric Hospital in Siping (西平) in 1937; the Yong-kang-zhuang Hospital (永康莊醫院) in Tainan in 1938; the Psychiatric Hospital in Chengdu (成都) in 1944; the Psychiatric Hospital in Nanjing (南京) in 1947 and the Psychiatric Hospital in Changsha (長沙) (undated). It should be noted that all these psychiatric hospitals, either public or private, had had differences in resources and quality of care.

In general, the development of psychiatry in Beijing before the Second World War was largely influenced by the work of Professor Richard Sherman Lyman (1891-1959), alias Lui-man (雷門), who was Professor Adolf Meyer’s intern at the Johns Hopkins University School of Medicine in early 1920s. Not only that he reorganised, and provided academic input to, the Peking Psychopathic Hospital, he was able to recruit many Chinese talents into the academic department at the PUMC, many of whom became the pioneers of Chinese psychiatry in latter years. In Shanghai, the influential person was Dr. Fanny Gisela Halpern (1899-1952), alias Han-fen (韓芬), who studied under Professor Wagner-Jauregg at the University of Vienna School of Medicine in 1924. She was trained in psychoanalysis but brought biological therapeutic methods to China, meanwhile trained psychiatric social workers and ran postgraduate courses in psychotherapy in Shanghai. The development of psychiatry in the Northeastern part of China and Taiwan was mainly influenced by Japanese psychiatry at the time, which was mainly along the line of Professor Emil Kraepelin (1856-1926) in Germany. It should also be noted that, in Taiwan, the development of modern psychiatry did not take off until 1946, when Professor Lin Tsung-yi, who was a graduate of the Imperial Tokyo University School of Medicine, became chairman of the Department of Neurology and Psychiatry at the National Taiwan University Faculty of Medicine. Following his later training at the Harvard Medical School, he expanded the academic department, established subspecialty training and research activities, and, with the help of the World Health Organisation, set up a Children's Mental Health Centre.

Finally, one may ask a question. Why did psychiatry not develop sufficiently in China as a whole with the work of so many medical missionaries? The answer is not simple, but generally there were perhaps four major factors. First, there was distrust of foreign influence by Chinese people at the time. Second, the priority of psychiatry was low as a medical discipline. Third, the main objective of most American or British medical missionaries was not to develop medicine but to spread the Christian gospel. Fourth, perhaps the most important one, American psychiatry was not in good shape at the time.

Thus, for the latter reason, the private Rockefeller Foundation in America decided to fund ‘mental hygiene’ as early as in 1914, but the real work in the field of psychiatry did not take effects until 1930s. In 1943, a Trustee Bulletin described three reasons for the decision to concentrate resources on psychiatry: (1) To counter the economic losses due to nervous and mental diseases, in particular the care of patients in state funded institutions; (2) To integrate into standard medical curricula a neglected field of medicine; and (3) To improve overall medical care by helping doctors understand connections between body and mind. Successively, they strengthened academic departments of psychiatry in seven American university medical schools (Universities of Chicago, Yale, Harvard, Duke, Tulane, Washington and Johns Hopkins) as well as neurology/neurosurgery in the McGill University, Montreal, Canada. The Rockefeller Foundation's approach to fund teaching and research proved successful in establishing worldwide standards of psychiatric research and treatment and in training experts in the field of psychiatry in the United States.

I sincerely hope that, in Hong Kong, such private funding body will come up one day.

Please refer to Page 9.
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BRINTELLIX (VORTIOXETINE) - PRESCRIBING INFORMATION

Presentation: Film-coated tablets 5mg, 10mg and 20mg.

Indication: Treatment of major depressive episodes in adults.

Dosage: Adults: starting and recommended dose is 10mg, once-daily, taken with or without food. Elderly ≥65 years: Starting dose 5mg. Children and adolescents (<18 years): should not be used. Discontinuation: Patients can abruptly stop taking the medicinal product without the need for a gradual reduction in dose.

Contraindications:
- Hypersensitivity to vortioxetine or to any of the excipients. Combination with MAO-inhibitors should not be used during pregnancy or lactation unless clearly needed and after careful consideration of the risk/benefit. Special warnings and precautions: Depression is associated with an increased risk of suicidal thoughts, self-harm and suicide. It is a general clinical experience that the risk of suicide may increase in the early stages of recovery. Close supervision of high-risk patients should accompany drug therapy. Patients (and caregivers) should be alerted about the need to monitor for any clinical worsening, suicidal behaviour or thoughts and unusual changes in behaviour and to seek medical advice immediately if these symptoms present. Patients should be monitored for the emergence of signs and symptoms indicating a seizure or exacerbation of an existing seizure disorder. Patients should be monitored for the emergence of signs and symptoms of cutaneous bleeding abnormalities with the use of SSRIs/SNRIs. Hyponatraemia has been reported rarely with the use of SSRIs/SNRIs. Caution should be exercised for patients with renal or hepatic impairment.

Interactions:
- Caution is advised when taken in combination with MAO-inhibitors, serotonergic medicinal products, products lowering the seizure threshold, lithium, trypthophan, St. John's Wort, oral anticoagulants or antiplatelet agents, and products that interact with the enzymes CYP2D6 and Cytosroma P450. Undesirable effects: Adverse reactions are most frequent during the first or second week of treatment and usually decrease in intensity and frequency with continued treatment. Very common: Nausea. Common: Decreased appetite, abnormal dreams, dizziness, diarrhoea, constipation, vomiting, itching. Uncommon: Grinding one’s teeth, flushing, night sweats.


Marketing authorisation holder: Lundbeck HK Limited. Revision Date: 28 April 2015. Full prescribing information is available upon request.

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