With the ageing of the population in Asia, dementia care has become one of the major challenges in the region. The number of people with dementia is rising exponentially, but dementia care is not well developed in many countries in Asia, public awareness of dementia is low and policy on dementia care is frequently deficient. Against this background, a 3-year program of consensus meetings on dementia care has been established. Prof. Edmond Chiu, Past President of IPA and Chair of the World Psychiatric Association Section on Old Age Psychiatry is Chair and Prof. Helen Chiu is Deputy Chair of this program.

The QoLDEM program was organized under the auspices of three international organizations: the International Psychogeriatric Association, the Pacific Rim College of Psychiatrists and the World Psychiatric Association, Section on Old Age Psychiatry. The first consensus meeting was held in Hong Kong on April 29, 2004. The Jockey Club Centre for Positive Ageing, a dementia centre funded by the Hong Kong Jockey Club and operated by the Chinese University of Hong Kong, played host to this consensus project. Experts from various parts of Asia, including China, Japan, Indonesia, South Korea, Singapore, Malaysia, Thailand and the Philippines attended the meeting. The group identified the problem areas and discussed on the issues important for quality of life for elderly with dementia in this region. A Consensus Statement on Improving the Quality of life of Asian people with dementia was developed. The document would be submitted for consideration of publication in an international journal. Another highlight of this issue is the Recent Advances section in which Prof John O'Brien, Dr Robert Barber, and Prof Robert Baldwin outlined the cutting-edge development in old age psychiatry.

Before signing off, I would like to invite members to contribute to the Newsletter. Why not email your articles or news items to the editors at chanwc1@ha.org.hk? Your offerings and input are very much appreciated and welcomed.
The Asia-Pacific Regional Conference on Prevention of Elderly Suicide, which was jointly organized by the Hong Kong Council of Social Service, Social Welfare Department, and HKPGA, was held at Sheraton Hotel and Tower on 24 - 26 March 2004. We were very privileged to have three world-renowned experts, Prof Diego DeLeo (Australia), Prof Helen Chiu (HK) and Prof Rosalie Kane (US), as the keynote speakers. A number of prominent local and regional researchers also joined this important event as plenary speakers. More than 490 delegates from eleven countries/administrative areas shared with one another their experience and research findings on elderly suicide prevention. The responses from participants were positive and encouraging. To view the photo album of this conference, please visit the following website http://www.jppes.net/photo_frameset.html. You will also find a detailed account of this conference by Ms Wai-ping Fung in this issue.

Following the successful HKPGA study visit to Taipei four years ago, the Association organized its second overseas study trip on 6 - 11 September 2004. Seventeen members participated in this study tour and visited Samsung Medical Center and Noble County in Korea. Delegates also participated in the Pre IPA Symposium: Hong Kong-Japan-Korea Joint Meeting, and the International Psychogeriatric Association Asia-Pacific Regional Meeting in Seoul. Responses from delegates were favourable.

The Pre IPA Symposium: Hong Kong-Japan-Korea Joint Meeting was jointly organized by the Korean Association for Geriatric Psychiatry, Japanese Psychogeriatric Association, and HKPGA. It was held on 8 September 2004 at Shilla Hotel, Seoul, Korea. More than 100 participants from Korea, Japan and Hong Kong attended this Meeting chaired by Prof Masaaki Matsushita (JPGA President), Prof Jonghan Park (KAGP President), and our President Dr Wah-fat Chan. Ms Eppie Wan, who represented HKPGA, joined experts from Japan and Korea in the plenary symposium entitled ”Long-term Care System for the Elderly People”. It was followed by an interactive session chaired by Prof Takeda and Prof Shigeta in which Japanese colleagues presented interesting case vignettes. The busy day was concluded by two informative talks on management of psychosis and depression in late life given by Prof Dilip Jeste and Prof Edmond Chiu respectively. We look forward to another joint meeting with Korean and Japanese colleagues in the near future.

HKPGA was invited to host two symposia at the
International Psychogeriatric Association Asia Pacific Regional Meeting in Seoul on 9 and 10 September 2004 respectively. We were honoured to have a number of local and overseas opinion leaders to join us as chairpersons / speakers. The first symposium, chaired by Mrs Eliza Leung, was on "Prevention of Elderly Suicide" while Prof Helen Chiu chaired the second symposium entitled "Dementia Services and Research in Asia". The council would like to take this opportunity to thank our guest speakers including Ms Anita Wong, Mr Peter Ng, Dr Siu-wah Li, Dr Kouzin Kamino, Prof Sandra Chan, Prof Timothy Kwok, Prof Byoung-hoon Oh, Prof Masatoshi Takeda, Prof Helen Chiu, and Dr Wai-chi Chan, and the chairpersons of the symposia, for their generous support.

At the 11th Scientific Meeting of the Pacific Rim College of Psychiatrists on 28 - 31 October 2004 in Hong Kong, HKPGA was invited to host a symposium on "The Changing Position of the Elderly in the Society: Elder Abuse and Related Issues"; a topic deserves attention from the public as well as policy makers. We were honoured to have three local experts Dr Tak-kwan Kong, Dr John Wong and Ms Pui-yi Chan as the speakers of this symposium, which was chaired by Dr Wah-fat Chan and Mrs Sook-pee Chang LAM. Interested members could find details about this conference in Ms Medina Chow's meeting report published in this issue.

The Association held the 6th Annual Scientific Symposium on 1 November 2004 at the Regency Room, 3/F, Hyatt Regency Hotel, 67 Nathan Road, Tsim Sha Tsui, Kowloon. At this symposium chaired by Dr Pey-chyoung Pan, Professor Paul Mullen from Australia talked on "Advance Directives" and Dr Roger Bullock from the United Kingdom gave another speech on "Advances and Controversies in Dementia". Members thoroughly enjoyed their talks, which stimulated fruitful discussion and exchange of ideas among participants.
On 12 January 2005, HKPGA co-organized the Symposium on Prevention of Elderly Suicide with Hong Kong Council of Social Service. More than 150 participants attended this event in which Prof Yeates Conwell from the United States gave us an informative speech on "Creating Suicide Prevention Interventions in the Community to Meet the Needs of At-Risk Elders". It was followed by a Forum on Suicide Prevention in Community Elderly at Risk chaired by Prof Helen Chiu. We were glad to have Mr Peter Ng, Mr Timothy Ma, Dr Vivian Leung and Ms Yuk-mui Lau as the discussants whose views were inspirational.

Following the inauguration meeting in 2004, the second QoLDEM (the Consensus Programme on Improving the Quality of Life for Asian People with Dementia) meeting was held at the end of April this year in Hong Kong. In preparation for the meeting, HKPGA invited a number of local policy makers, service providers, and researchers to participate in a pre-meeting focus group on 16 April 2005 at Hyatt Regency Hotel in Tsim Sha Tsui. We were delighted to have Prof Helen Chiu, Dr Siu-wah Li, Dr Joshua Tsoh, and Dr Wai-chi Chan as the moderators. Participants had in-depth discussion over four important themes, which included Service System Issues, Human Resources Issues, Training, and Consumer Participation. The meeting brief would be published in the coming issue of the newsletter.

Every attempt is made to maintain an up-to-date database of the membership. If your membership details including correspondence address have changed recently, please contact the Hon. Secretary at hkpga@hongkong.com.

---

**2005 HKPGA Research Awards**

**The Awards**

The Hong Kong Psychogeriatric Association (HKPGA) Research Awards were established with an annual donation from the Pfizer Corporation to encourage and reward fine research projects in psychogeriatrics. There are three awards, which will be given annually to the best-submitted projects that have attained a good scientific standard as decided by the selection board. The **HKPGA / Pfizer Research Award**, of value HK$10,000, will be awarded to the best-submitted postgraduate research project. The **HKPGA Postgraduate Research Award**, of value HK$5,000, will be awarded to the second best-submitted postgraduate research project. The **HKPGA Undergraduate Research Award**, of value HK$5,000, will be awarded to the best-submitted undergraduate report. The submitted reports for postgraduate awards have to be either unpublished research reports or research reports that have been published within one year dating back from the closing date of submission. The submitted reports for the undergraduate award have to be research reports, projects or review articles relevant to the local setting. The postgraduate awards will be awarded to postgraduates of any discipline. Only members of the HKPGA will be eligible for the postgraduate prizes.

The prizes will be presented at the Annual Scientific Meeting of the HKPGA. Abstracts of the winning projects will be considered for publishing in the HKPGA Newsletter.

**Referees:**

We are very privileged to have the following world-renowned experts as the referees of 2005 HKPGA Research Awards:

---

We would like to congratulate the winners of the 2004 HKPGA Research Awards. This year, HKPGA/Pfizer Research Award went to Dr Victor Lui whose research project was "Development and Evaluation of an Instrument for the Assessment of Awareness of Memory Deficits in Alzheimer's Disease". Mr Raymond Wong won HKPGA Postgraduate Research Award by his project entitled "Needs of Home Dwelling Dementia Patients and their Informal Carers: A Qualitative Study". Ms Mandy Ng, Ms Isabella Wah, Mr Alvin Wan and Ms Candy Wong won HKPGA Undergraduate Research Award by their submission on "A Qualitative Approach to Examine the Psychological Needs of the Chinese Elders". We would also like to take this opportunity to express our heartfelt gratitude to the referees, including Prof Edmond Chiu (Australia), Prof Eric Caine (US), Prof David Thompson (HK), and Prof Chetywn Chan (HK), for their generous support.

The Auditorium was packed with enthusiastic audience

Prof Eric Caine (left) and Dr Joshua Tsoh were among the audience

Prof Yeates Conwell

Mr Peter Ng

Mr Kam Wah Ma

Ms Yuk Mui Lau

Dr Vivian Leung

---

2005 HKPGA Research Awards

Sing-yuen Li
Prof Edmond Chiu (Australia), Prof Eric Caine (US), Prof David Thompson (HK), Dr Pey-chyou Pan (HK), and Prof Chetywn Chan (HK)

Call for Submissions
Submissions of research reports are invited for the 2005 HKPGA Research Awards. Research reports should reach the Association not later than 31 August 2005.

Requirements
* Papers must be written in English with author-date citations of references in text. APA style (per Publication Manual of the American Psychological Association, 4th ed.) is preferred.
* References must include complete titles, all author names, and journal names spelled out in full. References to works written in another language must include both the original title and its English translation.
* Papers must be double-spaced on one side of A4-size white bond paper with margins on all four sides. A floppy disk containing a copy of the paper should also be sent. Be sure the disk is labeled with the name of the word processing program used and the correct file name under which the paper is saved.
* An abstract of no more than 250 words must precede the text.

Report on the 11th Scientific Meeting of the Pacific Rim College of Psychiatrists
28-31 October, 2004

The 11th Scientific Meeting of the Pacific Rim College of Psychiatrists 2004 was held at the Kowloon Shangri-la Hotel in Hong Kong from 28 - 31 October 2004. As claimed by the organizing committee, it is definitely a rich and appealing programme for mental health professionals of the region. I have the pleasure to join the four days programmes, but yet what I could peep was just part of a renowned picture. The conference has covered a variety of topics, from Advancement in Medical Technology to Ethical Issues on Advance Directives. All these I think are hot issues of current practices.

Amongst a number of distinguished presentations, I would like to highlight a few which have impressed me most. There were quite a number of papers discussing efficacy of different drugs. The one presented by Dr R Tandon on 'Efficacy of Atypical Antipsychotics' was really atypical. Atypical not only by his humorous jokes on the America's election, but also due to his clear and objective discussion on different researches sponsored by pharmaceutical companies.

The plenary session on 'Empathy, Meaning, the Treatment Alliance and Psychotherapeutic Techniques in Psychiatric Practice' worth most reflection for all clinicians. Recent scientific advances and economic interest in pharmacology study has really pushed majority of professionals toward evidence-based practice. De-emphasis on biopsychosocial approach has dampened the development of those treatments addressing the deep psychological needs of psychiatric patients. I fully agreed that only through integrate a humanistic and scientific approach, best quality of service could then be provided.

Discussion on Advance Directives is always interesting and controversial. The speech by Ms A Liu has provided the audience a clear picture on the legal misconception and confusion to the general public and clinicians. This aroused our attention towards future advocacy on patient's autonomy. The part on 'Nice Idea, Pity in Practice' was also interesting and stimulating. This session was ended by an unanswerable question on the concern of Advance Directives of refusing institution by people with mental disorder.

The symposium on Elder Abuse is the last session I attended. I am afraid it was one with least audience, but it was the one which I appreciated most. All the speakers were excellent. The speech by Dr TK Kong has deeply stricken me. I agreed that healthcare profession should avoid institutional abuse. Nevertheless, it is always our great challenge to balance between good quality of care and input of resources which directly affect the stress and working condition of frontline carers.

Apart from the content, the hardware arrangement was also perfect. The venue, refreshment, sponsored meals all contribute to make this a memorable event. There is no doubt that the scientific meeting was a success and all the outcomes reflected the earnest effort of the organizing committee. They deserve all credit and our heartiest congratulations!
Elderly suicide has aroused extensive concerns among the general public in Hong Kong in recent years. Elderly suicide rate in Hong Kong is found relatively high compared to other countries in the world¹ and it is also relatively high compared to other age groups of the population.²

It is within this context that the Hong Kong Council of Social Service, Hong Kong Psychogeriatric Association and the Social Welfare Department have initiated a 3-year project-Live Life! Joint Project on Prevention of Elderly Suicide with the funding support from the Hong Kong Jockey Club Charities Trust in 2001. The project emphasizes on public education, awareness building, skills training for professionals and service providers, and improvement of the service coordination on prevention of elderly suicide and promotion of mental health among older persons in Hong Kong.

Live Life! Joint Project on Prevention of Elderly Suicide was just completed successfully at the end of 2004. The Project have already coordinated three series of Community Education Project Funding Scheme and a pilot service model of 3-Tier Coordinated Service on prevention of elderly suicide in the community. The Asia-Pacific Regional Conference, which is one of the major components of the Joint Project, was held successfully in Hong Kong on March 24-26, 2004. It represented the climax of the Joint Project in which over 400 local and overseas academics, service administrators, social workers, medical and allied health practitioners from both governmental and non-governmental sectors participated. The encouraging responses did mark a cornerstone for the development on the prevention of elderly suicide in Asia-Pacific Region.

We have chosen "Prevention of Elderly Suicide: A Transdisciplinary Challenge" as the theme of the Conference. It signified the importance of the joint efforts and collaboration across disciplines to tackle this complicated yet important problem. The Scientific Programme comprised Keynote & Plenary Sessions, Invited Symposia, Concurrent Workshops and Free Paper Sessions focusing on different areas. Throughout the 3-day Conference, speakers from all over the world exchanged their research findings, innovative service models and practices on the subjects of Global Trends of Elderly Suicide, Early Detection and Prevention of Suicide and Depression, Grief and Bereavement, Healthy Ageing as well as the Quality of Life of the Elderly.

Prof Diego DeLeo and Prof Helen Chiu, two of our Keynote Speakers, gave us insightful presentation on the Gender Issue in Elderly Suicide and Prevention Work of Elderly Suicide in Asia-Pacific Region respectively. Another Keynote speaker Prof Rosalie Kane shared her distinguished experience on the promotion of Well-being of Older People through the physical environment, equipment, provision of training and development to the frontline caregivers in the United States. Apart from the above, we invited Dr Michael Phillips, Mr Fung Pak Yan, Dr Kuniaki Takahashi and Mr Phua Kok Tee to give us stimulating presentations over the suicidal trends in Mainland China, Hong Kong, Japan and Singapore in the Plenary Sessions. While reporting the cultural and regional differences of elderly suicide, these presentations also enlightened the participants in the suicide prevention programme planning and practices. The feedback of customer satisfaction survey showed that the participants of the Conference found the presentations were innovative, useful and stimulating to their practice.

Following the information-packed Scientific Programme, we organized a half-day Field Visit Programme for the participants. It consisted of four routes and covered twelve services units including residential services, community-based services, suicide prevention services and medical services for the elderly. Over 150 delegates participated in this programme. It was a valuable experience for the participants to deepen their understandings towards the elderly services in Hong Kong.

Although the Project came to the end in November 2004, it is surely that the work of prevention of elderly suicide would not be stopped. As the title says, " it was just a start, not the end". We believe that the insights, knowledge and inspirations which had been generated from this Conference would be a new energy to the work on prevention of elderly suicide in the sectors.

¹ Hong Kong elderly suicide rate: 26.3/100000 (2000)
Recent Advances (Reprinted from IPA Bulletin, Volume 22, Number 2 with permission)

Professor John O’Brien, Dr. Robert Barber, and Professor Robert Baldwin

Cholinesterase inhibitors in early AD, multiple sclerosis and frontotemporal dementia.

The value of using cholinesterase inhibitors in mild to moderate Alzheimer’s disease (AD) is well established. But there is, of course, interest in evaluating the effectiveness of this treatment across the spectrum of severity. In a recent 24-week week study, 153 patients with early-stage AD were randomised to either donepezil (70% completed) or placebo (81% completed) (Seltzer et al, Arch Neurol. 2004 Dec;61(12):1852-6). Subjects with AD were included if they had an MMSE score of 21-26, Clinical Dementia Rating (CDR) of 0.5 or 1.0 and only minimal impairment of activities of daily living (ADL). At week 24 the drug-placebo difference was approximately 2.3 points on the ADAS (p=0.008) and 1.8 points on the MMSE (p=0.002) in favor of donepezil. No significant differences were observed on CDR-Sum (proxy for ADL) or Patient Global Assessment Scale, a finding the authors suggested reflected the relative high functioning of subjects at recruitment. Nevertheless, this leaves the question of the wider benefits to patients, their family and indeed society still open to further study.

There is also interest in exploring the limits of the effectiveness of cholinesterase inhibitors in non-AD populations where cholinergic deficits are at least, hypothetically, possible. Krupp et al (Neurology, 2004 Nov 9;63(9):1579-85.) completed a 24-week single-center double-blind placebo-controlled trial (n=69) to evaluate the effects of donepezil (10mg daily) in patients with multiple sclerosis associated with cognitive impairment. The researchers used a different primary outcome measure than that normally applied to trials involving Alzheimer’s disease namely the change in verbal learning and memory on the Selective Reminding Test (SRT). Donepezil-treated patients showed significant improvement in memory performance on the SRT compared to placebo. Clinicians were also more likely to report cognitive improvement in patients on active treatment. The medication appeared to be well tolerated, save for an increase in abnormal dreams.

A much smaller, open-label study investigated the effects of rivastigmine (3-9mg/day) in 20 patients diagnosed with frontotemporal dementia (FTD) (Moretti et al, Drugs Aging, 2004;21(14):931-7.). Though active treatment did not appear to prevent deterioration in MMSE scores, patients were less behaviourally impaired, and caregiver burden was reduced, at 12 months, compared with baseline. The authors of both these studies recognise the need for further replication and extension of these preliminary findings, but in the meantime they add to the debate surrounding the generic effects of cholinesterase inhibitors.

Antipsychotics and dementia

The use of atypical antipsychotic in dementia raises a number of uncertainties and indeed controversies. This partly stems from concerns about their over use and adverse effects, but also about the evidence-base for their effectiveness. In this regard, Rabinowitz et al (J Clin Psychiatry, 2004 Oct;65(10):1329-34.) conducted a post hoc analysis of 3 randomized, controlled trials of risperidone versus placebo in treating 1150 nursing home residents with behavioral and psychological symptoms of dementia. Using standardised measures, risperidone was more effective in treating a range of behaviours including hitting, injuring self or others, cursing or verbal aggression, repetitive questions, scratching, restlessness, grabbing, physical threats and/or violence, agitation and delusions. The authors concluded that risperidone is more effective than placebo in treating a variety of non-cognitive symptoms associated with dementia.

Immunotherapy of Alzheimer’s disease

As argued by Nitsch there are a number of important reasons why beta-amyloid plaques are potential immunotherapeutic targets in AD (Alzheimer Dis Assoc Disord. 2004 Oct-Dec;18(4):185-9). However, as previously reported, clinical trials were discontinued owing to the development of an autoimmune, cell-mediated meningoencephalitis. Could a different approach to immunotherapy circumvent this problem? Qu et al (Arch Neurol. 2004 Dec;61(12):1859-64) set about seeing whether gene vaccination could be used to generate an immune response to Abeta(42) that produced antibody response but avoided an adverse cell-mediated immune effect. Encouragingly, their studies in mice showed this was possible, indicating this immunotherapeutic approach could provide an alternative form of active immunization in the treatment and prevention of AD. Furthermore, on-going findings from Alzheimer’s transgenic mice show that lifelong immunization with human beta-amyloid (1-42) protects mice against cognitive impairment well into older age (Jensen et al, Neuroscience, 2005;130(3):667-84).

Can neuropsychological changes be detected before the onset of Alzheimer’s disease?

The answer seems to be “yes” according to findings from a longitudinal study from the United States (Saxton et al, Neurology, 2004 Dec 28;63(12):2341-7). Researchers annually tracked 693 individuals for a median of 7.4 years. The seventy-two individuals who were ultimately diagnosed with AD had poorer scores on baseline neuropsychological measures than subjects who remained free of dementia.

Interestingly, although individuals closest to the onset of illness (i.e. 1.5 to 3.4 years) had, as would be expected, the worst performance, cognitive impairment was detected in individuals who did not develop AD until 5 to 8 years later. These findings parallel those from a smaller study tracking the evolution of symptoms in patients with familial Alzheimer’s disease over a 10 year period (Godbolt et al, Arch Neurol. 2004 Nov;61(11):1743-8.). Patients were found to have a long prodromal phase of several years characterised by subtle deficits of general intelligence and memory, while spelling, naming, and perception were relatively preserved until a late stage. MMSE was not sensitive to early disease detection.
Development and Evaluation of an Instrument for the Assessment of Awareness of Memory Deficits in Alzheimer's Disease

Victor Lui, Department of Psychiatry, North District Hospital
Linda Lam, Department of Psychiatry, The Chinese University of Hong Kong
Helen Chiu, Department of Psychiatry, The Chinese University of Hong Kong

Background
This study describes the development and validation of a new assessment tool, the Memory Inventory for Chinese (MIC), with an aim to provide a reliable, valid, objective instrument useful for measuring the degree of awareness of memory deficits in the Chinese population with Alzheimer's disease (AD).

Methods
A combination of qualitative and quantitative approaches was adopted. The MIC was developed with focus group discussion, pilot testing and reviewed by local experts. A consecutive series of 79 new out-patients with the National Institute of Neurological and Communicative Disorders and Stroke and the Alzheimer's Disease and Related Disorder Association (NINCDS-ADRDA) criteria of probable and possible AD and 20 non-demented elderly subjects were recruited.

Results
The MIC has a patient version and a caregiver version. A high internal consistency was found, with Cronbach alpha of .89 for the patient version and .90 for the caregiver version. The inter-rater and test-retest reliabilities were satisfactory. For validity assessment, the caregiver score of the MIC correlated significantly with cognitive score of the subject as assessed by the Mini-Mental State Examination ($r_p$ = -.37; $p < .01$). The Memory Deficit Awareness Score, calculated by subtracting the patient score from the caregiver score, correlated significantly with clinician ratings of awareness of memory impairment ($r_s$ = -.67; $p < .01$).

Conclusions
The MIC appears to be a culturally appropriate, reliable, and valid instrument for the measurement of awareness of memory deficits in patients with AD in the local population. Potential applications of the MIC should be further explored in other subtypes of dementia and in large-scale longitudinal studies.

Needs of Home Dwelling Dementia Patients and Their Informal Carers: A Qualitative Study

Raymond Wong, Occupational Therapy Department, United Christian Hospital
Pey-choy Pan, Department of Psychiatry, United Christian Hospital
Hing-ling Tsang, Department of Psychiatry, United Christian Hospital

Introduction
Previous studies have shown that community care is both desirable and cost effective. However, caring people with dementia at home imposes severe stress on carers. In order to promote community care, it is necessary to understand the needs of these patients and carers.

Methods
A purposive sample of twelve persons diagnosed as suffering from dementia (representing clients with different stages of dementia, relationship with carer and living environment) and their principal informal carers were invited for individual unstructured interviews by experienced mental health professionals. Thematic analysis on the content of the pooled interview reports identified ideas, concepts and themes pertinent to the research questions. Mind-maps were used to organize such themes around topics relating to the research aims.

Results
The results mainly reflect carers’ views because patient subjects gave limited response. The subjects expressed needs in different areas with particular needs in finance, self-care, housework, transportation, and information on dementia. Four major themes of carer stress were discovered: the carers were frustrated, role-captivated, ill-healthed and ill-informed. Besides pin-pointing the inadequacy of existing services, they also provide illuminating ideas on modifying available community services or even novel service models that match their needs.

Conclusions
This study used a qualitative approach to investigate the needs of clients with dementia and their chief informal caregivers, from the users’ perspective. Although the results only represent views from a typical group of carers, they complement studies adopting the service provider’s perspective, using a quantitative approach. It shed light on the way service users perceive their problems and possible solutions.

Newsletter Committee Members:
Prof Linda Lam (Chinese University of Hong Kong)
Dr Wah-fat Chan (Pamela Youde Nethersole Eastern Hospital)
Dr Wai-chi Chan (Castle Peak Hospital)

Acknowledgement:
This issue of HKPGA Newsletter is sponsored by Pfizer