Medical Museum SILAIOS LOCK

愛滋病在香港35年

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Thirty-five years of AIDS in Hong Kong +

1985 年,香港報道了首例愛滋病(後天免疫力缺乏症)。此後,愛滋病從一種神秘的致命傳染病演變成一種可控制的慢性疾病。在過去的35年中,香港在製定預防,護理和控制規劃方面走過顛簸的道路。



▲ 1987 年政府推出大型愛滋病宣傳運動:(左起)前任資訊助理署長 Mr Peter Moss、衛生署前署理署長李紹雄醫生、伊利莎伯醫院前內 科顧問楊永強醫生

Launching of the Government's AIDS campaign in 1987 - Mr Peter Moss, then Assistant Director of Information, Dr Lee Shiu-hung, then Deputy Director of Medical & Health Services, Dr Yeoh Eng-Kiong, then consultant physician of Queen Elizabeth Hospital (left to right).

在 1980 年代和 1990 年代初,愛滋病被描繪成一種可 怕,無法治愈和具有傳染性的疾病。1987年,香港政 府推出了首個以黑色金字塔為標誌的大型愛滋病宣傳 運動。儘管公眾的意識有所提高,加上包括電視名人 在內的輿論領袖呼籲,但對愛滋病的污名卻難以消除。 1992年,有兩個人的故事呼籲不僅關注愛滋病毒感染 者(PLHIV)的醫療保健需求,而且關注香港的歧視性 環境。Mike Sinclair 是一名牙醫,他自我宣布染有愛滋 病毒,因此引起對醫療機構安全性,機密性問題和就 醫機會的擔憂。血友病男孩明仔由於感染了愛滋病毒 而無法上學,並且面臨接受醫療和社會服務的障礙。 兩事件引發了針對 PLHIV 的負面反應,包括殯儀人員 拒絕處理死者的屍體,醫療和的社會福利人員不願為 他們提供服務,以及工作場所歧視。立法局在林鉅成 醫生的帶領下,於1993進行了休會辯論,最後以當時 的衛生福利司的承諾來撫平愛滋病的非歧視性政策。

The first case of AIDS (acquired immune deficiency syndrome) in Hong Kong was reported in 1985. Since then, AIDS has revolved from a mysterious fatal infectious disease to a chronic controllable illness. Over the past 35 years, Hong Kong has taken a bumpy path in the development of its prevention, care and control programme.

In the 1980s and early 1990s, AIDS was portrayed as a scary, incurable and contagious condition. In 1987, the Hong Kong Government rolled out the first major AIDS campaign carrying a black pyramid as an icon. While public awareness has increased, the stigma attached to AIDS was hard to be removed, despite appeals of opinion leaders including TV celebrities. In 1992, 2 persons'stories called for attention to not just the healthcare needs of people living with HIV (PLHIV) but the discriminatory environment in Hong Kong. Mike Sinclair was a dentist who self-declared his HIV status, causing concern about safety in healthcare setting, confidentiality issue, and access to care. Ming Tsai, a haemophilia boy, could not attend school because of his HIV status, and again, also faced obstacles accessing medical and social services. The 2 incidents ignited chains of negative reactions against PLHIV including funeral undertakers refusing to handle bodies of deceased patients, healthcare and social welfare personnel reluctant to provide service to them, and workplace discriminations. Led by Dr Conrad Lam, the Legislative Council held an adjournment debate in the next year, ending in the pledge of the

then Secretary for Health and Welfare to iron out out non-discriminatory policy in AIDS.

◆為紀念世界同抗愛滋病,1997年 於中環廣場豎立紅絲帶紀念銅像,圖為揭幕儀式

Officiating the erection pf a ribbon sculpture in commemoration of World AIDS Day in 1997, at the Central Plaza, Hong Kong

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隨後,當局發布多種專業指引,並成立愛滋病信託基金,同時改革了政府委任的愛滋病顧問委員會。 1995 年,政府頒布了《殘疾歧視條例》,並根據該條例使平等機會委員會發揮職能。然而,這些為時已晚,無法阻止一個私人屋苑居民長達 6 年的抗議,反對在他們附近地區建立愛滋病治療服務。



◆ Dr Robert Newman 於 70 年代是政府戒毒治療顧問,圖為他身處深水 埗美沙酮診所外

Dr Robert Newman (1937-2018), outside Sham Shui Po Methadone Clinic. He was consultant to the Hong Kong Government in the 1970s, advising on drug addiction treatment

在推行愛滋病政策的過程中, 香港受益於多位有奉獻精神人

士的貢獻,其中包括前世界衛生組織全球愛滋病規劃署的 Dr Jonathan Mann,前禁毒專員利尚智先生,前政府緩害顧問 Dr Robert Newman。踏入二十一世紀,香港的經驗教訓亦傳到中國,支援內地剛開展的愛滋病防控規劃。從臨床和公共衛生的角度來看,抗逆轉錄病毒療法現已成為生物醫學預防愛滋病毒感染模式的基礎。過去幾十年的經驗教訓仍然是香港應對愛滋病未來發展的重要參考。

The issuance of various professional guidelines and the establishment of the Council for the AIDS Trust Fund followed, in conjunction with the reform of the government-appointed Advisory Council on AIDS. In 1995, Disability Discrimination Ordinance was enacted, and with it, the functioning of the Equal Opportunities Commission. These however came too late to stop the 6-year long opposition of residents of a private housing estate against the establishment of an HIV treatment service in their neighborhood.

In the course of advancing AIDS policy, Hong Kong has benefited from the contribution of many dedicated persons, including Dr Jonathan Mann of the previous WHO Global Programme on AIDS, Mr Peter Lee, ex-Commissioner for Narcotics, Dr Robert Newman an exconsultant to the Hong Kong Government on harm reduction. Since the turn of the century, lessons from Hong Kong were passed on to Mainland China which was beginning to develop programmatic response to the epidemic. Clinically and from public health perspective, antiretroviral therapy now forms the basis of a biomedical HIV prevention model. The lessons from the last decades are continuing to be important references in the future development of Hong Kong's responses to AIDS.

李教授是內科,免疫病理學和公共 衛生學科的臨床和專科醫生。他現 任香港中文大學傳染病學研究教 授、何鴻燊防治傳染病研究中心副 主任、政府衛生防護中心愛滋病及 性病科學委員會主席,亦是香港愛 滋病醫學會的創會會長。1991年 至 2005 年期間李教授是香港政府 的愛滋滋病項目主管,期間領導了 香港的愛滋病預防,控制和治療服 務。李教授曾多次擔任過國家和國 際組織的顧問,負責評估愛滋病毒 感染情況,檢討規劃和建議發展緩 害項目。他的主要研究領域包括以 醫學方法預防愛滋病毒感染,傳染 病流行病學,新傳染病。他撰寫了 超過 250 篇經同行評審的文章,40 本書章節,並且是《香港愛滋病手 冊》的編輯。

Professor Lee is a clinician and specialist in internal medicine, immunopathology and public health. He is currently Daniel Yu Research Professor of Infectious Diseases of The Chinese University of Hong Kong. Between 1991 and 2005, Prof Lee headed the Hong Kong Government's AIDS programme, during which he directed the territory's HIV prevention, control and treatment services. He is now Deputy Director of The Chinese University's Stanley Ho Centre for Emerging Infectious Diseases. He is the Founding President

of Hong Kong Society for HIV Medicine, and currently chairman of Scientific Committee on AIDS and STI of the Government's Centre for Health Protection. Prof Lee has, on various occasions, served as consultant to national and international organizations in the assessment of HIV situations, programme evaluations, and advise on harm reduction development. His major areas of research interest include biomedical approach to HIV prevention, infectious disease epidemiology, emerging infectious diseases. He has authored over 250 peer-reviewed articles, 40 book chapters, and is the editor of the HIV Manual in Hong Kong.



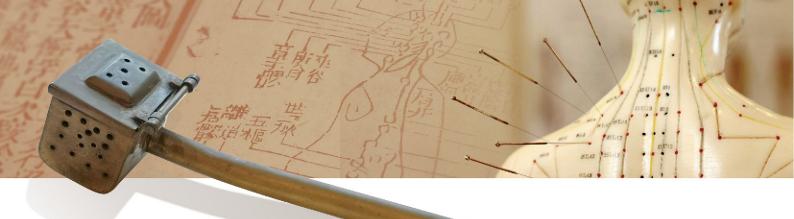
▲ 李教授 2020 年於博物館演講,重温愛滋病在港的 醫學歷程

Prof Lee reviewed the journey of HIV medicine in a lecture at the Museum in 2020



▲ 2017 年李教授與一眾專家舉辦展覽,讓公眾進一步了解愛滋病的預防及治療知識

Prof Lee and a group of specialists organized an exhibition for promoting the prevention and treatment of AIDS in 2017



3D 銅人針灸展覽延期

3D Copper Acupuncture Model Exhibition extended

你有聽過「雲門、合谷、庫房」 這些詞語嗎?是景點、還是和中國文化裡天實它們有關之人有關的 位名字,當了解這些習針不 位名字,將有助你學習針內 位知識。詳情可重温香港的 分學中醫學院與醫學博夠人可 對時代的針灸教育」, 影時代的針灸教育」, 計時物館 Youtube 平台 「HKMMS」。

早前中大校長段崇智教授造訪醫學博物館,由於段校長的父親曾任中醫針灸醫師,新展覽內的 3D 針灸銅人展品引發了他的無窮好奇,還即場和銅人「切磋交流」!「中醫與科技結合 – 3D 針灸銅人」展覽展期至 2021 年 5 月 30 日,馬上計劃來參觀這個有趣的展覽吧!

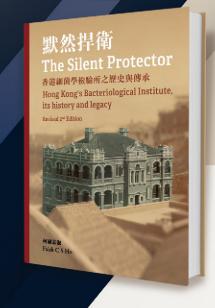
Have you ever heard of "Yunmen, Hegu, Kufang"? Are they the names of tourist attractions or company departments? They are the names of acupuncture points and their names are related to the heaven, earth and man. Every name owns its story. It will be easier to study acupuncture when you know the story behind. For details, please view the online lecture, "3D Acupuncture Man: New age of the education of acupuncture", which was



▲ 右起:展覽發起人余秋良醫生、中大校長段崇智教授及負責研發 3D 銅人的唐嘉信博士 From the right: Dr Edwin Yu, Convenor of the Exhibition Project, Prof Rocky Tuan, Vice Chancellor of CUHK and Dr Carrison Tong who is responsible for developing the 3D Acuman.

co-organized by the Faculty of Chinese Medicine and Hong Kong Museum of Medical Sciences for CUHK Chinese medicine students in January. You can search keyword "HKMMS" on Youtube platform.

Professor Rocky Tuan also visited the 3D Acupuncture Man and "interacted" with it. Exhibit brought back to him the memory of his father who had been an acupuncture practitioner. "Chinese Medicine Through Technology: 3D Copper Acupuncture Augmented Reality Model" will be exhibited until 30 May 2021. So what are you waiting for? Come and see this interesting exhibition!



默然捍衛香港細菌學檢驗所之歷史與傳承(修訂版) THE SILENT PROTECTOR

Hong Kong's Bacteriological Institute, its history and legacy (Revised 2nd Edition) 何屈志淑教授 Professor Faith CS Ho

HK\$150

此書初版於我們走出沙士的陰霾後出版,究竟我們有否從過去認 真地汲取教訓,迎接今日及未來的挑戰?以醫學為主題的博物館 又能否擔當幫助我們温故知新的角色?

The first edition of this book appeared soon after Hong Kong was recovering from SARS. Have we learnt lessons from the past conscientiously to prepare us sufficiently for meeting the challenges of today and tomorrow? How do medical museums fit into the role of facilitating such learning?

節錄自修訂版序 Quote from Preface to the Revised 2nd Edition

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藥丸搓輥器由基板與槳形手把 組成,兩者都安裝了具凹槽的 黄銅片。這台藥丸搓輥器是由 S. Maw, Son & Thompson 製造。 這儀器製造商約於 1875 至 1901 年間在倫敦營業。

醫生的處方會註明每粒藥丸應 含的藥量及患者所需的藥丸數 目。以前,製造藥丸非常費時, 因為每粒藥丸都必須徒手搓 成。藥丸搓輥器有助加快製造 較大量藥丸的過程。

首先,將藥物成分粉劑與粘合 劑(例如奶粉或葡萄糖漿)混 合成柔韌的丸劑,再將丸劑搓 成圓柱體,橫放在基板的黃銅 片上,然後將手把黃銅片面壓 下,將丸劑切割成小段,搓輥 後便可製成多顆球形藥丸。

圖示的藥丸搓輥器曾於那打素 醫院使用,現於博物館展覽。 特別鳴謝雅麗氏何妙齡那打素 醫院自 1996 年起一直借予醫學 博物館展覽。

This consists of a base board and a paddle-shaped handle, both with grooved brass plates. It was made by S. Maw, Son & Thompson, a London medical instrument manufacturer that traded c. 1875-1901.

A doctor's prescription would indicate the weight of the medicine required in one pill as well as the number of pills a patient needed. Pill making used to be labourintensive, as each pill had to be rolled individually by hand. A pill rolling machine helped to speed up the process of making larger quantities of pills.

The medicinal ingredient powders would be mixed with a binding agent such as milk powder or glucose syrup to create a malleable paste, known as a pillmass. This mass would be rolled into a cylinder, and then placed across the brass plate of the base board. Pressing the paddle-shaped handle's brass plate on the cylindrical pill-mass and base board would cut the pill-mass into segments. Further rolling would then produce the spherical pills all at once.

Photo of a pill rolling machine was previously used in the Nethersole Hospital and now is exhibited at the museum. Special thanks to Alice Ho Miu Ling Nethersole Hospital for loaning the object to be displayed since 1996.

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星期二至六 早上10時至下午5時 星期日及公眾假期 下午1時至5時

Opening Hours

Tuesday to Saturday 10 am to 5 pm Sunday and Public Holidays 1 pm to 5 pm

入場門票

\$20 成人

小童、全日制學生、六十歲以上長者或殘疾人士

\$50 家庭套票(包括兩位成人及最多三位小童使用)

Admission Fee

\$20 Adults

Children, full-time students, senior citizens (aged 60 or above) and disabled persons

Family Package (2 adults and maximum of 3 children)

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