

Medical Museum snapshot

香港醫學博物館 通訊

位於左右腰側的兩個腎臟，不止用來排走體內的廢物，也有調整血壓和造血的重要功能。在香港，大約每 10 人便有 1 人患有不同程度的腎病，導致每年多達 1400 新症病人因為末期腎病而需要洗腎或換腎。近年無論治療還是移植技術都有進步，但應對腎病的威脅，最終仍需要社會參與，採取措施預防患病，並要支持器官捐贈，讓更多病人得以延續生命。

本次「腎防衰竭、預防腎病」講座請來腎科的重量級人馬為大家講述腎科的發展，包括腎臟科專科醫生余宇康教授、梁智鴻醫生，香港大學余氏基金教授及講座教授（腎臟內科）鄧智偉教授、香港腎科學會主席周啟明醫生、香港移植學會主席馬錦文醫生，以及香港腎臟基金會主席雷兆輝醫生，還有擔任主持的全球華人腎臟病學會主席李錦滔教授。

余宇康教授素有香港腎科教父之稱，他指腎科是較遲才發展的專科，直至 1960 年代才確立為一個專科，到後來香港腎科學會、香港腎臟基金會及香港腎科移植學會等先後成立。李錦滔教授亦帶出，全球在 1945 年才進行第一宗以人工腎為腎衰竭患者進行透析治療，初時透析設施體積十分龐大，但隨著科技發展，現在病人可以在家進行洗腎。



腎防衰竭 預防腎病

The two kidneys on the left and right waist are not only used to expel waste from the body, but also have the important functions of regulating blood pressure and hematopoiesis. However, in Hong Kong, about 1 in 10 people suffer from different degrees of kidney disease, resulting in as many as 1,400 new patients each year requiring kidney dialysis or kidney transplantation due to end-stage renal disease. In recent years, both treatment and transplantation technology have improved, but we still need social participation and take measures to prevent disease and support organ donation, so that more patients can continue with their lives.

The lecture on "Kidney Failure, Prevention of Nephropathy", invited prestigious experts in the nephrology department to talk about the development of nephrology, including nephrology specialists Prof Richard Yu, Dr C.H. Leong, from the University of Hong Kong. They also include Chair Professor (Nephrology) Prof Sydney Tang, Chairman of the Hong Kong Society of Nephrology, Dr Chow Kai-Ming, Chairman of the Hong Kong Transplantation Society, Dr Maggie Ma, and Chairman of the Hong Kong Kidney Foundation, Dr Lui Siu-Fai, as well as the Chairman of the Global Chinese Nephrology Society, Prof Philip K.T. Li.

Prof Richard Yu is known as the godfather of nephrology in Hong Kong. He pointed out that nephrology was a specialty that developed relatively late, and it was not established as a specialty until the 1960s. Prof Philip K.T. Li also pointed out that the world's first dialysis treatment using artificial kidneys for patients with renal failure was carried out in 1945. In the beginning, the dialysis facilities were very large, but with the development of technology, patients can now perform dialysis at home.

Kidney failure prevention, kidney disease prevention



除了儀器進步，鄧智偉教授亦介紹了腎科的四大進展，首先是更有效的降血糖藥物面世，減低糖尿病患對心臟和腎臟功能的破壞。其次是有生物製劑可治療多種腎病，如原發性膜性腎絲球腎炎及狼瘡腎炎等。第三則是了解細胞感知和適應氧氣供應，改善慢性腎病患者貧血的情況。最後一個進展就是慢性腎病患者對新冠疫苗的反應。

香港腎科學會創會會長的梁智鴻醫生表示，腎臟不但負責排泄體內過多水份和新陳代謝廢物，也有維持血壓及促進生血作用。根據2020年的數據，本港大約有6500名病人正接受透析治療，當中73%為腹膜透析，其餘為血液透析。周啟明醫生說，腎衰竭就如手機無電一樣，腎科醫生會盡力維持病人的腎功能。

洗腎不能完全替代腎臟原有功能，而換腎則可以帶來更好的治療效果，只是本港的器官捐贈率偏低，每年連同活體移植在內，也只有六、七十名病人接受腎臟移植，對於多達2320人的輪候名單而言是杯水車薪。

馬錦文醫生稱，捐贈器官與輸血一樣需要按血型配對，以往病人只能等候合適的遺體腎臟。但現在就新方法可用，包括跨血型及或交叉配對，以提高移植機會。梁智鴻醫生憶述，1969年本地進行首次換腎手術，無論病人、捐贈遺體腎臟的家屬以至醫生都面臨極大挑戰。甚至會責難醫生，他本人亦曾試過因為勸捐器官被打。

雷兆輝醫生直言，如何讓病人繼續有尊嚴地生活及妥善管理健康十分重要。現時治療以病為中心，但未來應該以病人為中心，以更有效的治療處理各種症狀，幫助病人能夠「復康豐盛人生」。

香港醫學博物館25周年系列講座已經圓滿結束，共開辦6期，除了本期的腎病，還開設糖尿病、X光、牙科、癌症、心血管病主題相關的講座，獲得一致好評。開設系列講座旨在傳播與生活相關的醫學知識，提升對醫學的認識和了解。

In addition to the advancement of equipment, Prof Sydney Tang also introduced the four major advances in nephrology. The first is the availability of more effective hypoglycemic drugs to reduce the damage to heart and kidney function in diabetic patients. Secondly, there are biological agents that can treat a variety of kidney diseases, such as primary membranous glomerulonephritis and lupus nephritis. The third is to understand how cells perceive and adapt to oxygen supply, so as to improve anemia in patients with chronic kidney disease. The last development is the response of patients with chronic kidney disease to the new crown vaccine.

Dr C.H. Leong, the founding president of the Hong Kong Nephrology Association, said that the kidneys are not only responsible for excreting excess water and new metabolic wastes in the body, but also maintaining blood pressure and promoting blood production. According to 2020 data, about 6,500 patients in Hong Kong are receiving dialysis treatment, of which 73% are peritoneal dialysis and the rest are hemodialysis. Dr Chow Kai Ming said that kidney failure is like a mobile phone without electricity, and nephrologists will try their best to maintain the patient's kidney function.



Kidney dialysis cannot completely replace the original function of the kidney, and kidney transplantation can bring better therapeutic effects. However, the organ donation rate in Hong Kong is relatively low. Every year, including living donor transplantation, only 60 to 70 patients receive kidney transplantation, this is a drop in the bucket for a waiting list of up to 2,320 people.

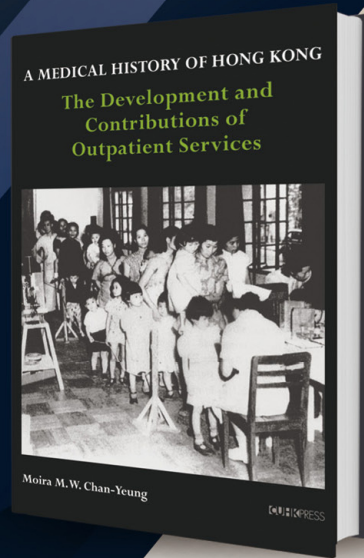
Dr Maggie Ma said that donated organs, like blood transfusions, need to be matched according to blood type. In the past, the patient could only wait for a suitable deceased kidney. However, new methods are now available, including cross-blood type and/or cross-matching to increase the chance of transplantation.

Dr C.H. Leong recalled that in 1969, the first local kidney transplant operation was performed, and both the patient, the family members of the donated kidney, and the doctor all faced considerable challenges and suffering, and even blamed the doctor then. In order to persuade others to donate organs, he was chased and even beaten.

Dr Lui Siu-Fai said bluntly that it is very important for patients to continue to live with dignity and properly manage their health. The current treatment is disease-centered, but in the future it should be patient-centered, helping patients to "speedy recovery" with the goal of a healthy and prosperous life."

The 25th Anniversary Lecture Series of the Hong Kong Museum of Medical Sciences has ended successfully. A total of 6 sessions have been held. In addition to the kidney disease in this session, there are also lectures on diabetes, X-ray, dentistry, cancer, and cardiovascular diseases. The series of lectures are aimed at disseminating medical knowledge related to life and enhancing knowledge and understanding of medicine.





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感謝各位一直以來對香港醫學博物館的支持，本年度籌款晚宴將在2022年11月1日舉行，誠邀各界善長踴躍支持，再次衷心感謝各位贊助商與支持者。

The Hong Kong Museum of Medical Sciences is deeply grateful to our generous sponsors and supporters. The annual Fundraising Dinner will be held on 1 November 2022.

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Friedmann 視野測量及分析儀

今年六月我館納入新藏品——Friedmann 視野測量及分析儀，由胡志鵬醫生及唐柏泉醫生慷慨捐贈。

視野檢查主要用於診斷及觀察各種眼科病如青光眼以及腦神經各種症狀的情況。而產於 1940 年代的 Goldman Perimeter 則最為經典的，用於評估周邊視野。後來，自動視野計的研發則有 Octopus 和 Humphrey 視野分析儀。傳統的中央視力測量方法稱為 Bjerrun Screen，使用一塊和病人平行的平板作測量。Friedmann 在 1966 年創建了第一個中央視野分析儀，備有下巴和頭枕給患者使用，更有光源作刺激模式，一共有 46 個光源刺激點。

捐贈者在 1970 年代後期獲得圖中的儀器。後來在 1979 年，Friedmann 視野測量及分析儀 Mark II 面世，是為一種更複雜的儀器，共有 99 個刺激點，亦更為自動化。而現今的視野分析儀要先進得多，用電腦來控制刺激點的亮度和模式，並輔助數據的解釋，這些較新的型號能夠分析病人的周邊及中心視野。

資料來源：唐柏泉醫生



Friedmann Visual Field Analyser

Friedmann Visual Field Analyzer, a newly acquired collection, was donated to our museum in June 2022 by Dr Woo Chi-Pang and Dr Tong Pak-Chuen.



The visual field testing (perimetry) is mainly used for diagnosis and following the progress of eye diseases such as glaucoma and neurological diseases. For assessing the peripheral visual field, the classic instrument is the Goldman Perimeter in the 1940's. Later, automated perimeters such as the Octopus and Humphrey Visual Field Analyzers were developed. The conventional approach for measuring the central visual field was to use a tangent screen known as the Bjerrun Screen. Friedmann created the first Central Field Analyzer model in 1966, which contained a patient chin and head rest, a source of illumination for the stimulus patterns with a total of 46 stimuli.

The donors had obtained this model in the late 1970s. Friedmann Visual Field Analyzer Mark II, a more sophisticated instrument that included 99 stimuli and more automated, was later manufactured in 1979. Modern visual field analyzers are far more advanced, with computer-controlled stimulus brightness and patterns, as well as computer-assisted interpretation of the data. These newer models are capable of analyzing both peripheral and central fields.

Reference: Dr Tong Pak-Chuen

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博物館資訊 Museum Information

開放時間

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
\$10 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
\$10 Children, full-time students, senior citizens (aged 60 or above) and disabled persons
\$50 Family Package (2 adults and maximum of 3 children)

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