



STRIVING FOR BEST VISION FOR 40 YEARS





養和眼科部40周年 40th Anniversary of **HKSH Department of Ophthalmology**

1980 - 2020



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部門主管的話 Message by Dr. Walton LI 家父李樹培醫生常言道: 「醫生既要有所專精,亦要 廣泛涉獵。」 My father Dr. LI Shu Pui had always said, "A doctor needs to know something about everything, and everything about something."





1980年,我於美國UCLA考獲眼科文憑及完成角膜及眼表疾病(Corneal and External Ocular Disease)專科培訓後,回港成立養和醫院眼科部。早年香港從事角膜移植的醫生不多,大部分本地手術都由我包辦。隨後張叔銘醫生亦於UCSF考取眼科文憑及專業資格,1991年返港加入本部門。

激光矯視中心隨後於1996年成立,首任總監為國際知名角膜切割激光矯視手術(LASIK)先驅陳蔭燊教授。陳教授是上世紀70年代美國少數華藉眼科教授之一,深受同行敬仰。中心開業首年,陳教授與張叔銘醫生、唐柏泉醫生及我完成逾800宗LASIK手術,翌年中心更成為至港首間獲認証的LASIK培訓中心,多年來對本地激光矯視手術的普及不遺餘力。

陳教授擔任激光矯視中心總監期間,致力培育後輩及指導同事,充分體現其Teaching (悉心教學)、Teamwork(團隊精神)及Trust (互相信任)的3T精神。時至今日,3T精神是養和的核心價值之一,對我營運眼科部以至養和都影響甚深。

家父李樹培醫生常言道:「醫生既要有所專精,亦要廣泛涉獵。(Know something about everything, and everything about something.)」40年來,養和眼科部不單致力引入最新眼科儀器及技術,更積極擴充其專業團隊。現時團隊成員包括16位眼科專科醫生,以及一眾視光師、護士、工程師及支援人員,服務範疇涵蓋兒童眼疾、視力矯正、青光眼、角膜病變、視網膜病變、

眼部整形及神經眼科等附屬專科。各醫生在 其附屬專科均獨當一面,亦樂於互相分享及 交流臨床經驗,彼此緊密合作,同心同德, 令服務質素得以提升,傲視同儕。

在教學方面,養和眼科部早年得力於陳蔭燊教授、前任港大醫學院院長周肇平教授及陳煥堂醫生,自1998年起安排港大醫科生在院接受名譽顧問醫生指導。本部亦獲香港眼科醫學院認証,從2001年開始為眼科醫生提供專科深造培訓,致力為業界作育英才。

展望將來,部門將進一步建立重要學術交流 平台,為深化國內眼科培訓出一分力。同時 我們亦會一如以往,匯聚更多優秀人才,令 服務更專更廣。期望團隊繼續群策群力, 為病人帶來更稱心、細心和安全的優越病人 體驗。

李維達醫生

養和醫療集團行政總裁 養和醫院院長 養和眼科部主管 眼科名譽顧問醫生 眼科專科醫生

陳蔭藥教授 Prof. Guy Hugh CHAN

養和陳蔭燊視力矯正中心創辦人 Founder of HKSH's Guy Hugh Chan Refractive Surgery Centre

Refractive Surgery Centre 將角膜切割激光矯視手術引進香港之先驅 Pioneer of LASIK for Refractive Surgery in Hong Kong 拿孩影房黑 4美些父是右首 **预览经外体内**。 也只像自己切土题紅沙 Guy H.Chan M.D. (3) (9)

Upon the completion of my fellowship training in Corneal and External Ocular Disease at UCLA, I returned to Hong Kong and set up the Department of Ophthalmology in HKSH in 1980. Cornea transplantation was not commonly performed in those days, and most of them were carried out by me. Dr. John CHANG later joined us in 1991 after obtaining his fellowship at UCSF.

Then came the establishment of Refractive Surgery Centre (RSC) in 1996 with the world-renowned LASIK pioneer Prof. Guy Hugh CHAN as its founding director. I was one of the many admirers of Prof. CHAN, who was among the very few Chinese professors of Ophthalmology in the US in the 1970s. In the first year of RSC, over 800 LASIK cases were performed by Prof. CHAN, Dr. CHANG, Dr. Patrick TONG and myself. In 1997, it became the first accredited LASIK training centre in Hong Kong, and since then has been contributing to the prevalence of refractive surgeries in the local community.

Prof. CHAN also had the most influence on my running and developing the department and HKSH. Without his 3T principles (Teaching, Teamwork and Trust), now being part of the culture of HKSH, we could not have achieved what we have today.

My father Dr. LI Shu Pui had always said, "A doctor needs to know something about everything, and everything about something." For the latter, one has to work with and learn from peers in other subspecialties. That's why we have continued to develop over the past 40 years, not only with advanced equipment and technology but also by building up strong expertise in wide-ranging subspecialties, including paediatric ophthalmology, refractive surgery, glaucoma, corneal diseases, vitreoretinal diseases, oculoplastics and neuro-ophthalmology. Supported by a team of optometrists, nurses, technicians and other personnel, our 16 Specialists in Ophthalmology, each being a recognised authority in his or her own discipline, work hand in hand with a common vision, shared expertise and excellent teamwork.

With the support of Prof. CHAN, Prof. CHOW Shew Ping, the former Dean of Medicine of HKU, and Dr. Joseph CHAN, we began to provide training to HKU medical students in 1998. Advanced specialist training in Ophthalmology has also been provided at our department since 2001 with the recognition of the College of Ophthalmologists of Hong Kong.

In future, we will continue to contribute towards establishing a major platform for academic exchange and promoting structured specialty training in the Mainland. We will also keep recruiting the best experts across all subspecialties and expanding our service spectrum to provide the best patient experience with care, safety and satisfactory outcomes.

Dr. Walton LI

Chief Executive Officer, HKSH Medical Group Medical Superintendent, Hong Kong Sanatorium & Hospital Head, Department of Ophthalmology, HKSH Honorary Consultant in Ophthalmology Specialist in Ophthalmology

里程碑 Milestones

眼科部正式成立,位於中院2樓,李維達醫生擔任部門主管。 Establishment of Department of Ophthalmology on 2/F, Central Block with Dr. Walton LI as the Head



1980年,白內障摘除手術佔當年養和眼科手術逾七成。 In 1980, extraction of cataract accounted for over 70% of ophthalmological operations in HKSH

養和醫院於1981年進行首宗角膜移植手術。 HKSH's first corneal transplantation was performed in 1981.

1984 - 1985

引入白內障超聲波乳化術。

Introduction of Phacoemulsification for Cataract

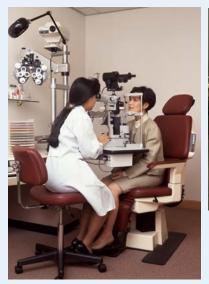


李維達醫生在上世紀80年代,率先利用顯微鏡及超聲波 進行白內障手術。

Dr. Walton LI was among the first in Hong Kong to perform cataract surgery with microscope and ultrasound in the early '80s.

1991

眼科部遷至李樹培院8樓。 Removal to 8/F, Li Shu Pui Block







養和醫院聯同中大及加州大學洛杉磯分校Jules Stein Eye Institute,在香港台辦「眼科及視覺科學新挑戰」國際研討會。

HKSH co-hosted the International Symposium on Modern Challenges of Ophthalmology and Visual Sciences with CUHK and Jules Stein Eye Institute, UCLA in Hong Kong.

1996







陳蔭燊教授加入眼科部。

Prof. Guy Hugh CHAN joined the Department of Ophthalmology.

全港首間視力矯正手術中心於中院5樓開幕,中心總監為陳蔭藥教授。

Opening of Hong Kong's first Refractive Surgery Centre (RSC) on 5/F, Central Block with Prof. Guy Hugh CHAN as the Director.





養和至今已為逾12萬隻眼睛進行LASIK手術。 LASIK surgeries were performed on over 120,000 eyes since 1996.



李樹培醫生(左)及陳蔭燊教授(右) Dr. LI Shu Pui (left) and Prof. Guy Hugh CHAN (right)

視力矯正中心為國際視力矯正教育協會認可LASIK培訓中心,4月舉辦首個LASIK課程。陳蔭燊教授為香港當時唯一合資格LASIK培訓導師,首年有21位醫生接受培訓。

The CRS (International Education Group for Refractive Surgery) - approved RSC conducted its 1st LASIK Course in April, with Prof. Guy Hugh CHAN being the only certified LASIK trainer in Hong Kong. Twenty one surgeons were trained in the first year.

中院5樓眼科部投入服務。 Service commenced on 5/F, Central Block.





1998

開始為港大醫科生提供培訓。
Training of HKU medical undergraduates began.



自1998年起,逾2,400港大醫科生在眼科部接受培訓。 Over 2,400 HKU medical undergraduates received training in the department since 1998.

2001

開始為眼科醫生提供專科深造培訓。 Introduction of Higher Training in Ophthalmology



自2001年起,共42位眼科醫生在眼科部接受專科深造培訓。 A total of 42 higher trainees were trained in the department since 2001.





陳蔭燊教授於4月離世。視力矯正中心同年遷至李樹培院 5樓,改名為陳蔭燊視力矯正中心以作紀念。張叔銘醫生 於5月擔任中心總監。

RSC was moved to 5/F, Li Shu Pui Block and renamed "Guy Hugh Chan Refractive Surgery Centre" in memory of Prof. CHAN, who passed away in April. Dr. John CHANG was appointed as the Director in May.

2003

中院5樓的白內障手術中心於1月開幕,曾雁醫生擔任中心總監。中心於沙士期間暫時關閉,2007年3月重開。

The Cataract Surgery Centre was opened on 5/F, Central Block in January with Dr. Ivan CHEN as the Director. It was closed during the SARS epidemic and resumed service in March 2007.







陳蔭燊醫學基金成立於2003年,至今已資助17名醫生在眼科部接受培訓,為期3個月至1年。

Established in 2003, the Guy Hugh Chan Medical Education Foundation has sponsored clinical attachments of 17 doctors at the department, with duration ranging from 3 months to 1 year. 部份來自澳門、大陸、泰國、菲律賓及美國。中心往 後亦有就植入式隱形眼鏡手術提供培訓。 Over 100 doctors received LASIK training in the Guy Hugh Chan Refractive Surgery Centre. Some of them came from Macau, the Mainland, Thailand, the Philippines and USA. Training related to ICL (Implantable Contact Lens)

逾100名醫生於陳蔭燊視力矯正中心接受LASIK培訓,

施行無刀飛秒激光LASIK。 Introduction of Femtosecond Laser LASIK



2008

位於中環莊士大廈2樓的 眼科中心投入服務。 Opening of Eye Centre (Central Clinic) on 2/F,

Chuang's Tower, Central







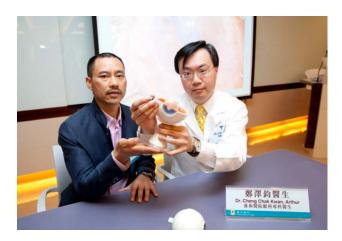
2011

中環眼科中心遷至莊士大廈3樓。

Removal of Eye Centre (Central Clinic) to 3/F, Chuang's Tower

本港首宗後彈力層內皮細胞眼角膜移植 無縫手術。

1st Descemet's Membrane Endothelial Keratoplasty (DMEK) in Hong Kong



引入飛秒激光輔助白內障手術。 Introduction of Femtosecond Laser-assisted Cataract Surgery



眼科部遷往李樹芬院4樓。 Departmental Removal to 4/F, Li Shu Fan Block





中院6樓的眼科手術中心投入服務。 Opening of Eye Surgery Centre on 6/F, Central Block





本地私家醫院首次成功進行波士頓 人工角膜移植。

1st Artificial Cornea Transplantation (Boston Keratoprosthesis) in Hong Kong Private Hospitals



2015

中環眼科中心遷至金鐘太古廣場。

Removal of Eye Centre (Central Clinic) to One Pacific Place, Admiralty

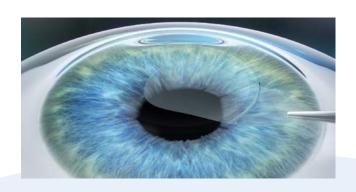




2016

陳蔭燊視力矯正中心遷至金鐘太古廣場。 Removal of Guy Hugh Chan Refractive Surgery Centre to One Pacific Place, Admiralty





引入小切口透鏡切除術矯正視力。
Introduction of Small Incision Lenticule
Extraction (SMILE)

2020

金鐘太古廣場新設養和眼科手術中心。

Opening of HKSH Eye Surgery Centre in One Pacific Place, Admiralty





養和陳蔭燊視力矯正中心與養和醫院眼科手術中心共同榮獲《讀者文摘》信譽品牌眼科 手術中心組金獎,前者連續10年獲獎。

HKSH Guy Hugh Chan Refractive Surgery Centre (Admiralty) and HKSH Eye Surgery Centre won the Reader Digest's Trusted Brand Award (Eye Surgery Centre Category). The former has received the same award for 10 consecutive years.



眼科今昔40年 40 Years of Ophthalmology: Past and Present 40年來,養和眼科部見證眼科重大變遷,一直緊貼各大附屬專科發展新趨勢,為公眾提供最先進、最全面及最優質的治療和護理服務。

The past 40 years witness myriad breakthroughs in the development of ophthalmology. By keeping abreast of the latest advances in different subspecialties, the HKSH Department of Ophthalmology is, and will always be committed to serving the public with the best treatment and care.



病人及醫學教育 Patient and Medical Education

不分年齡 眼界健康

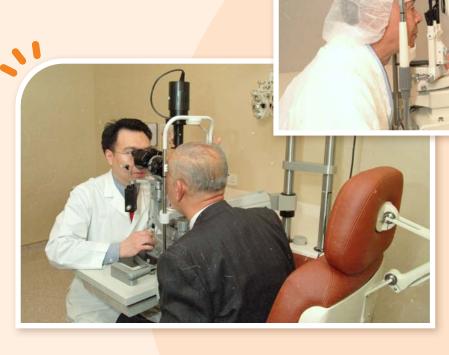
「透視靑光眼及兒童眼疾」講座





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資深專業團隊 Experienced Professionals



2009

眼科部團隊照

Group Photo of Department of Ophthalmology











張叔銘醫生 Dr. John CHANG

1991年加入眼科部 Joined in 1991 近幾十年,矯視手術由傳統開刀形式,發展至今天的SMILE 及個人化LASIK,以無刀方式切割及打磨角膜,植入三焦鏡提升遠、中、近距離視力,再加上適合深近視及深遠視人士的植入式隱形眼鏡等先進技術,病人可以無須佩戴眼鏡之餘,近視、遠視及老花亦大大改善,效果更勝普通隱形眼鏡。

From conventional surgery to SMILE and now the latest laser-assisted custom LASIK, great advances have been made in the past decades in terms of safety and precision of refractive surgery. With seamless and customised corneal reshaping, implantation of trifocal lenses for correction of distance, intermediate and near vision as well as implantable contact lenses for high myopia and hyperopia cases, patients can now enjoy freedom from spectacle and contact lens wear with significant reduction of myopia, hyperopia and presbyopia.



40年前的白內障手術,只是移除白內障,不會植入人工 晶體,病人術後利用重甸甸的眼鏡協助視物。後來技術 改良,醫生可在眼球表面將角膜切開,利用儀器把白內障 從已放大的瞳孔取出,再植入人工晶體,傷口雖大,但病人 視力回復得不俗。

1980年,李維達醫生回流香港成立養和眼科部,引入超聲波 乳化白內障手術,先將白內障打散乳化後再抽出,然後 植入人工晶體。現在白內障手術傷口只有兩毫米,術後亦 不用縫針,癒台較快。2012年,部門更引入飛秒激光輔助 白內障手術,效果更精準,配以不同種類的人工晶體,可 一併解決老花、散光、近視、遠視等問題。



曾雁醫生 Dr. Ivan CHEN

1998年加入眼科部 Joined in 1998

40 years ago, in cataract surgery the cloudy lens was removed but not replaced by artificial lens. Patients had to wear heavy aphakic glasses to see things after treatment. Thanks to advances in technology, cataract can be extracted via a corneal incision from the expanded pupil, followed by lens implantation. The wound is large, but the result is satisfactory.

Dr. Walton LI returned to Hong Kong in 1980 and set up the Department of Ophthalmology in HKSH. Under his leadership, the department pioneered phacoemulsification cataract surgery, a new surgical procedure in which the cataract is broken up by ultrasound and then removed, and implantation of an intraocular lens. Recovery is much quicker and the wound is only 2mm nowadays. Usually no suture is required. High-precision femtosecond laser-assisted cataract surgery was later introduced in 2012. With the implantations of different types of artificial lens, cataract surgeries can be refractive surgeries, correcting myopia, astigmatism, hyperopia and presbyopia at the same time.





謝道欣醫生 Dr. Agnes TSE

1998年加入眼科部 Joined in 1998

> 病人教育普及, 父母能及早讓 子女接受治療 Early Treatment for Children due to Patient Education



初加入養和眼科部時,部門是一個4、5位眼科醫生的小家庭。多年來,在李維達醫生的領導下,部門已擴展成一個有16位眼科專科醫生,以及過百名護士、視光師和其他支援人員的大團隊。我見證部門不斷引入新科技和新治療,並不斷推廣病人教育,使病人得到最佳的照顧。從前很多小朋友患上弱視或斜視,父母都未必懂得在治療黃金期時帶小朋友去看醫生。隨著病人教育的推廣,現在更多病人能接受適時和適切的治療。對於患斜視的成年人,部門更引入可調節性的斜視手術,令斜視病人的眼睛能調節至最理想位置。手術不但對病人的視覺功能有幫功,減少重影和眼睛疲累,更能明顯改善病人的外觀,增加自信。

There were only 4 to 5 ophthalmologists when I joined the department. Under the leadership of Dr. Walton LI, it has grown to a team of 16 doctors and over a hundred of nurses, optometrists and supporting staff members. For optimal patient care, we have kept introducing advanced treatment and promoting patient education in the past decades. In the past, often unware by parents, most children with amblyopia or squint missed the "golden period" for treatment. Thanks to patient education, nowadays patients can receive timely and appropriate treatment before too late. As for adults with squint, we can now perform adjustable squint surgery to "fine tune" the eye position, thereby not only improving one's appearance but also enhancing the eyesight with less double vision and eye fatigue.

由於人們自然的年齡增長,每個人都將會慢慢在閱讀與看近距離物體時感到困難,這個老花問題是人類所共有的。

以往人們只能依賴老花眼鏡,近年由於現代科技的進步 發達,我們已經掌握了多種技術,有助減輕人們對老花鏡的 依賴與困擾,包括手術性與非手術性技術,例如多焦點隱形 眼鏡、多焦點置入式人工晶體、單眼視覺激光矯正等等。您 可與我們的醫生約見檢查,以得到最適合您的建議與治療。

As people age naturally, after the age of 40, we will start to feel the difficulties of reading and seeing close objects. This is an universal issue for human beings.

In the past, wearing reading glasses was the only option. However, in recent years, thanks to the modern technology development, we now have several treatment options available to reduce the burden of having to wear reading glasses. The options include both surgical and non-surgical ways, such as multifocal contact lenses, multifocal lens implantation, monovision laser treatment, etc. You can consult our eye doctors to get the most appropriate advice and treatment according to your specific condition and need.



吳肜醫生Dr. Joan WU
2001年加入眼科部
Joined in 2001





郭坤豪醫生 Dr. Alvin KWOK

2003年加入眼科部 Joined in 2003 黃斑點穿孔手術以往的成功率只有約四成。時至今日,臨床研究證實,如果移除視網膜表層的內界膜,手術成功率能提升至九成以上,尤其對年長或有深近視的高危人士帶來希望。移除內界膜亦可應用於其他黃斑點疾病手術,如黃斑前膜增生及黃斑裂損等。

In the past, surgery for macular hole had a success rate of mere 40%. Today clinical research shows that the success rate can jump to more than 90% with the removal of the inner limiting membrane of the inner retina, bringing hope to high-risk individuals, e.g. the elderly and those with high myopia. The removal of inner limiting membrane can also be used to treat epiretinal membrane, maculoschisis, etc.



移除內界膜可治療各類黃斑點疾病,效果良好 Good Outcome in Treating Macular Diseases with Removal of Inner Retina's Inner Limiting Membrane 成為養和醫院眼科的一份子,不經不覺已16年了,目睹 部門的逐漸成長,有為的專科人才的不斷加入,令本院眼科 服務水平能緊隨著時代和醫療技術進展的步伐,不斷提升, 能為更多複雜眼疾患者提供適切的治療,作為醫者,這是 最大的滿足。

In the blink of an eye, I have been with the department for 16 years. With the joining of top-notch specialist staff and talents, we are able to keep abreast of the latest medical advance and provide proper treatment to more patients with complex eye conditions. As a medical practitioner, to me nothing is more rewarding than that.





許少萍醫生 Dr. HUI Siu Ping

2004年加入眼科部 Joined in 2004

> 養和眼科緊跟 時代步伐,服務 不斷提升 Enhance Service by Keeping Abreast of the Latest Advances



陳偉民醫生 Dr. CHAN Wai Man

2006年加入眼科部 Joined in 2006

> 革命性技術讓 糖尿病眼疾患者 有機會重拾更佳 視力 Better Vision Now Possible to Diabetic Eye Disease Patients with Revolutionary Advances

糖尿病視網膜病變是糖尿病最常見的併發症。過去40年, 治療糖尿病黃斑水腫及糖尿病視網膜病變的技術發展迅速, 著重精確診斷,加上影像導引治療、嶄新藥物療法、個人化 醫治方案,以及先進激光與複雜外科手術技術,既能有效 防止糖尿病眼疾患者病情惡化,更能以往所不能,讓病人有 機會重拾更佳視力。

Diabetic retinopathy is the most common complication of diabetes. The past 40 years have witnessed a number of remarkable advances in changing the management of diabetic macular edema and diabetic retinopathy. New strategies focus on precision in diagnosis, imageguided therapy, innovations in pharmacological therapy, personalised approach in treatment, and advanced technologies in laser delivery and in complex surgical procedures. With all these revolutionary developments, people with diabetic eye diseases are not only able to stop the disease progression, but to regain the vision loss to a better level, which was thought to be impossible in the past.



養和眼科40載,眼角膜移植在這40年也有翻天覆地的轉變:由至層到分層角膜移植;由縫16針線到無縫無針的微創移植技術;由從斯里蘭卡到自美國引進角膜組織,今天的手術已經更快更準。

From penetrating keratoplasty to lamellar keratoplasty, from the use of 16 interrupted sutures to sutureless, minimally invasive surgery, from procuring donor corneas from Sri Lanka to now using corneas from the US, we have witnessed drastic advances in cornea transplantation over the past 40 years. Nowadays the surgical procedure allows fast recovery, minimal down time and can be done with higher precision.







鄭澤鈞醫生 Dr. Arthur CHENG

2007年加入眼科部 Joined in 2007



眼角膜移植40年轉變翻天覆地, 今天更快更準 Minimal Down Time and Higher Precision in Corneal Transplantation after 40 Years



范舒屏醫生 Dr. Dorothy FAN

2011年加入眼科部 Joined in 2011 醫學發展一日千里,這不單是在醫治上,在預防方面亦然。大約10年前,養和醫院是至港首間私家醫院使用低濃度阿托品眼藥水預防兒童近視加深。現時低濃度眼藥水已經廣泛使用,希望我們下一代的眼睛能夠更健康、明亮。

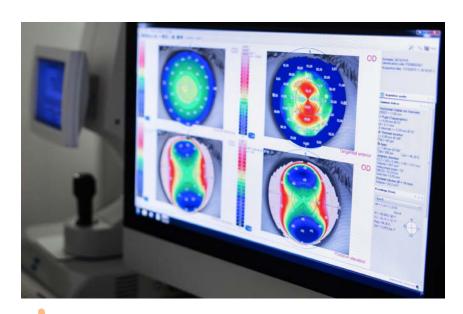
HKSH is the first private medical institution in Hong Kong to introduce low-concentration atropine eye drops, now being widely used to reduce myopia progression in children. Thanks to the great advance not only in treatment but also disease prevention, we are looking forward to better health and eyesight in our future generations.





40年以來,我們見到青光眼的診斷及治療,在各方面均有重大進步,由光相干性斷層造影、先進的激光治療、更好更舒適的青光眼藥水,以至微創青光眼手術,都大大增加了效用和安全性。養和醫院是私營眼科服務中先導先行使用這些最新的科技。而最重要的是,我們服務有眼疾病人的誠心誠意,比40年前只有更強!

Over 40 years, we saw great advances in glaucoma diagnosis, optical coherence tomography scanning, treatment including sophisticated glaucoma lasers, better and more comfortable glaucoma eye drops, and microincisional glaucoma surgical devices that are both effective and safe. While HKSH is amongst the first in the private ophthalmology service to employ these latest technologies, our heart and dedication to serve our patients with eye diseases is nothing but stronger than 40 years ago!



養和先導先行最新青光眼科技[,]40年熱誠更熾 HKSH among the First to Employ the Latest Glaucoma Technologies



梁裕龍醫生 Dr. Dexter LEUNG

2011年加入眼科部 Joined in 2011



鄭智安醫生 Dr. Andy CHENG

2015年加入眼科部 Joined in 2015 鼻淚管阻塞引起的溢淚症,主要以淚囊鼻腔造口手術治療。 相比於以往要在鼻外皮膚作一切口,醫生現時可利用鼻腔鏡 作無切口手術。手術成功率高,術後皮膚亦不會留疤,兼 有效減少瘀腫。

From external dacryocystorhinostomy (DCR) using direct skin incision to endonasal dacryocystorhinostomy using nasal endoscope without any skin incision, the recommended treatment for epiphora due to nasolacrimal duct obstruction has changed in the past years. While able to achieve a good surgical success rate, there is no skin scarring and minimal facial bruising after the endonasal DCR.

鼻腔鏡無切口手術不留疤 痕,有效治療溢淚症 Incision-free Treatment with Nasal Endoscope: Effective at Treating Epiphora





過去40年,眼瞼下垂手術已發展至包括微創方法。此技術能夠從眼瞼內側著手並使用臨時縫線來治療眼瞼下垂, 其成功發展有賴於專門器材之應用和程序性知識的發展, 並配合了周密的術前準備。該技術既可縮短手術時間,並 達到更一致的效果,復原時間亦因免卻切割皮膚的需要而 加快,現已成為治療眼瞼下垂的主要方法。

Over the last 40 years, eyelid ptosis surgery has advanced to include minimally invasive approaches. With meticulous preoperative planning and specialized instrumentation, patients can now have their drooping eyelid repaired from inside of the eyelid. The techniques are associated with shorter operative time, more consistent results, and less postoperative down time without the need for a skin incision. This kind of ptosis surgery has undergone further advancements including temporary sutures and evolution in the knowledge of the procedure. Over the last 4 decades, the procedure has become the primary method for repairing drooping eyelids.



馬思特醫生 Dr. Marcus M. MARCET

2017年加入眼科部 Joined in 2017





陳頌恩醫生 Dr. Tommy CHAN

2018年加入眼科部 Joined in 2018

> 板層角膜移植 大大縮短康復 時間,減低手術 排斥風險 Lamellar Corneal Transplantation: Shorter Recovery Time and Lower Risk of Rejection



眼科在這40年間不斷轉變和進步。在角膜和眼睛前房手術的領域上已經有不少改變。角膜移植已經由傳統需要整個角膜移植演變為版層角膜移植。板層角膜移植大大縮短康復時間,減低手術排斥風險。

另外,白內障手術已經不只是令患者能夠看見,同時亦可以配合使用不同的人工晶體,減低病人術後對眼鏡的依賴,能夠看清楚遠和近的事物。

至於激光矯視,由一開始的表面切割發展到之後的LASIK和 近期的SMILE,這些先進的技術都令很多人能夠以重新的 角度看見世界。

Ophthalmology has advanced over the past 40 years. There are several changes in the field of corneal and anterior segment surgery. Corneal transplantation has improved from transplanting the whole cornea to lamellar surgery. Lamellar corneal transplantation shortens recovery time and reduces the risk of rejection.

Moreover, the aim of cataract surgery has broadened from clearing vision of patients into one kind of refractive surgeries that can reduce the need of spectacles after implantation of various premium intraocular lenses.

As for laser refractive surgery, the advancement from surface ablation to LASIK and the recently introduced SMILE has helped many people see the world from a new angle.

2000年前的黃斑病變,只限相對消極的激光治療,會同時破壞正常及異常組織; 現時醫生可直接注射血管內皮生長因子抑制劑入眼睛,針對性地消除壞組織,甚至提升視力。

Compared with laser treatment prior to 2000, treatment of macular degeneration can now target diseased tissue by way of intraocular injection of vascular endothelial growth factor inhibitors. Its effect is less indiscriminate than its predecessors, and can even enhance eyesight.





王逸軒醫生 Dr. Ian WONG

2019年加入眼科部 Joined in 2019

嶄新血管內皮生長因子抑制劑,治療黃班病變
Treating Macular Degeneration with Vascular
Endothelial Growth Factor Inhibitors



碧納菲醫生 Dr. BAIG, Nafees Begum

2020年加入眼科部 Joined in 2020 養和眼科40年,青光眼治療的發展更是一日千里:由從前只有一種青光眼藥水,發展至今已有6大類眼藥水。養和醫院近年亦已引入最新青光眼藥水,致力為病人提供更多元化的治療選項。手術方面,由傳統青光眼引流手術,發展至現今多種微創導管手術,減低併發症的風險,加速術後康復。近年亦有研究顯示,白內障手術能有效控制眼壓,讓患者多一個治療的選擇。

From only 1 type of eye drop to the present 6 major classes, from the conventional drainage surgery to a myriad of minimally invasive procedures today, great advance has been made in glaucoma treatment over the past 40 years. Here in HKSH, glaucoma can now be treated with the latest eye drops. Patients in need of surgery can opt for minimally invasive procedures to benefit from lower complication risk and quicker post-operative recovery. Recent researches also show that cataract surgery is effective in controlling eye pressure, making it another viable option of glaucoma treatment.



眼科背後 Memories



李維達醫生 Dr. Walton Ll

養和醫療集團行政總裁 Chief Executive Officer, HKSH Medical Group 養和醫院院長 Medical Superintendent, Hong Kong Sanatorium & Hospital 眼科部主管 Head, Department of Ophthalmology, HKSH 眼科名譽顧問醫生 Honorary Consultant in Ophthalmology 眼科專科醫生 Specialist in Ophthalmology

明欣在8個月大時患上德國麻疹,眼角膜受感染。為了保護明欣雙眼,我從她三歲半起便為她進行共6次角膜移植手術。她是香港首個接受部分角膜細胞組織移植的病人。

移植後的角膜容易發炎,明欣每次術後都要戴上隱形眼鏡,短時間重見 光明。可惜她8歲時不幸角膜發炎壞死,從此永久失明。

猶記得明欣兒時活潑可愛,最愛到眼科部看魚缸裡的魚。她曾經一睹這個世界,卻最終未能恢復視力,令我仍不時耿耿於懷;然而最終開解我的,反而是明欣。

明欣失明後未有灰心,中學時隻身往澳洲求學,入讀聖艾蒙失明人學校。 回港後她入讀英華女校,成為該校首位失明學生。明欣致力於音樂創作、 演出及寫作,亦積極參與義務工作。2004年,她出版首部小説《如果你相信 童話》,以勵志童話故事寄語年青人不怕困難,努力向前。2008年,明欣 當選「香港十大傑出青年」。

我現在仍與明欣保持聯絡,早幾年出席了她的婚宴,更跟她合唱一曲。這些年來,她過著愉快、充實的生活,以行動宣揚正面、積極的人生觀。明欣 令我明白,病人跟醫生不單是診斷和治療,更重要的是有深厚的互信,方能 攜手前行。

Ming Yan suffered from rubella and corneal infection at 8 months old. To save her eyesight, I performed the first epikeratophakia operation when she was about three and a half years old. She was the first person to have partial corneal transplantation in Hong Kong.

Cornea is prone to infection after transplantation, and Ming Wan had to wear contact lens for protection all the time after every operation. However, despite 6 operations, she lost her eyesight to cornea necrosis at the age of eight.



I can still remember the time when she gazed in awe at the colorful fishes swimming in the tank in our department. What aches me most is that she went blind only after catching a short glimpse of this beautiful world. Yet it is Ming Yan, with all her cheerfulness and resilience in later years, that has helped me come to terms with this outcome after all these years.

The loss of eyesight hardly deters Ming Wan, as she continued her secondary studies in St. Edmund's School for the Blind and Visually Impaired in Australia. Later she returned to Hong Kong and became the first blind student of Ying Wa Girl's School. With passion for volunteer service, she is also devoted to music, acting and writing. In 2004, Ming Yan published her first novel "If You Believe in Fairy Tales" to encourage youth to overcome hardship and move forward on their life journey. She was chosen as one of The Ten Outstanding Young Persons in 2008.

I am still in touch with her from time to time. A few years ago I was invited to her wedding and sang with her at the banquet. As a role model of optimism in action, Ming Yan is now living a fruitful, happy life. She makes me understand that there is more than treatment and diagnosis between doctors and patients, and it is mutual trust that helped us get through the 5 years' journey together with all the laughs and tears.



張叔銘醫生 Dr. John CHANG

視力矯正主任 Director, Refractive Surgery 眼科名譽顧問醫生 Honorary Consultant in Ophthalmology 眼科專科醫生 Specialist in Ophthalmology

多年來接觸不少接受激光矯視手術的病人,情況各有不同:有的近視只得 50度,為了投考消防而接受手術;亦有近視高達3,000度的病人來求診。

愛美是女士的天性。要數印象最深刻的,是一位有深近視的女士:她的左眼和右眼各有2,300度及2,500度近視;卻極之抗拒佩戴有框眼鏡。當時的隱形眼鏡不足以矯正她的深近視:即使同時戴上隱形眼鏡及普通眼鏡,由於眼鏡會令影像縮少,始終還是看得不太清楚。

我最終決定為她施行人工晶體置換手術。她術後非常開心,每次覆診都滿臉 笑容。她在最後一次覆診時告訴我:她已經辭職不幹,令我大為驚訝。問其 原因,她說這是她有生以來首次看得如此清楚,感受到世界是何等美麗。 她驚覺自己以往真的錯過了很多美麗景象,最終毅然辭職,嘗試重新感受 這個世界,到處旅遊,欣賞各地美景。

Patients come for refractive surgery for different reasons. One patient, with myopia of mere 50 degrees, sought treatment only for fulfilling the entry requirements of firefighting forces. Another patient came to see me when she already had myopia of nearly 3,000 degrees.

A high myopia patient came to see me one day with 2,300 degrees in her left eye and 2,500 degrees in her right eye. She refused to wear glasses for aesthetic reasons, yet contact lens cannot correct such high amount of myopia. Things still looked smaller and far from clear despite her wearing both glasses and contact lens at the same time.

Finally, we went for IOL implantation. She was so pleased with the result that I could see her all smiles in every follow-up consultation.

To my surprise, she told me she had already quitted her job in her last consultation. She said that it was the first time she could see so clearly and fully appreciate the world's beauty, and it's time for her to quit her job, trot the globe and enjoy the beautiful world to the full.





曾雁醫生 Dr. Ivan CHEN

眼科手術中心主任 Director, Eye Surgery Centre 眼科名譽顧問醫生 Honorary Consultant in Ophthalmology 眼科專科醫生 Specialist in Ophthalmology

「曾醫生早晨。」診症房再次亮起一把熟悉的嗓音。

「早晨蕭明。最近過成點呀?」

「我啱啱結咗婚喇。」

聽到這裡,我和明之間的醫患關係,今天顯得格外微妙。

明是一名早產嬰兒,28週出生。出生時,他的體重只有1.5公斤,所以他在氧氣箱裏待了幾週。萬幸的是,他並沒有患上早產嬰兒視網膜病變。可是,他幼稚園時患上近視,到了高中更變成千幾度的「超級大近視」。

明是一個非常勤奮上進的學生,一向成績優異,也積極參與體育活動,尤其熱衷籃球。

有一次籃球練習時,明意外撞上了右眼。當時他的眼睛有點疼痛,視野有點模糊。不消一會,視力便恢復了。幾天後,他卻突然見到很多飛蚊。再過兩天,右眼就看不清事物了。明趕忙到醫院眼科檢查後,才發現是患上了視網膜脱落。那次是我第一次為他診症,陪他來的是他的父母。

幸好,經過視網膜修復手術,明總算恢復了視力,但是近視卻增加了200度。

自此,明非常小心保護他的雙眼。然而,不幸的事情再次發生了。讀大學時,明的左眼患上視網膜脱落。經過兩次視網膜修復手術後,視網膜總算復位,但視力無法十足恢復。入了大學的明少了幾分稚氣,多了幾分秀氣。那次陪他來的,也是他的父母。

如是者過了10年,明的雙眼慢慢發展出白內障和左眼視網膜前膜。明的雙眼進行了白內障手術,植入了晶體,左眼做了玻璃體 黃斑前膜手術。那半年反反覆覆的覆診,陪他來的,是明的女友 和父母。

自此,明雙眼的情況才算穩定下來。

今天,明再來例行覆診。那幾句簡單的問候,透露了他成家立室的好消息,令我感觸良多。



22年來,明由一名充滿稚氣中學生,變成懷抱夢想、富有魄力的大學生,再變成成熟 穩重專業人士,最近還結了婚和成立了自己的家庭。

身為明的眼科醫生,縱使未必在明生命中擁有舉足輕重的地位,我亦有幸在一旁靜靜地洞察著他生命中微妙的變化。醫者明明於他人的故事中扮演著觀察者,卻由別人的快樂中,為自己的生命添上了幾分溫情,一絲欣慰。

下次見到明的時候,不知他的生命又會發展成如何呢?

"Good morning, Dr. CHEN!"

I knew instantly who was coming in. It's Ming SIU.

"Hello, Ming. How're you doing?"

"Well, I got some big news to tell you. I just got married!"

I had a wonderful feeling and I smiled unconsciously. It's amazing to witness how Ming has grown, matured and now become someone's husband.

Ming has been my patient for over two decades. He was born prematurely at 28 weeks with a birthweight of merely 1.5 kg. He had to live in an infant incubator with enriched oxygen for a few weeks. It was really lucky of him not to develop retinopathy of prematurity or retrolental fibroplasia.

Ming has been an exceptionally industrious student. He achieved straight A's on all his report cards. I reckoned this might be one of the reasons that he gradually developed severe myopia in his school years. He was also passionate about basketball – and of course, he was really good at it.

One time, he accidentally injured his right eye in a high school basketball match. It was a little painful, and maybe a little blurry, but all of that seemed to have resolved within

minutes. Ming thought it wasn't a big deal. However, he started to see floaters a few days later, and woke up one morning to find his right vision really blurry. Ming's parents rushed him to the hospital immediately and that was how I met him. I found that he had retinal detachment and treated him with scleral buckling and vitrectomy. His vision was restored, but with some additional myopia as a side effect.

Ming took extra care for his eyes ever since the accident. However, he developed retinal detachment in his other eye while in university. This time he needed two surgeries to repair his left retinal detachment and his vision could not be fully recovered.

Ten years had passed in the blink of an eye and Ming developed cataracts in both eyes and an epiretinal membrane in his left eye. After cataract surgeries, lens implants, vitrectomy and epiretinal membrane removal, his eye conditions finally stabilised. During that period of the time, Ming was mostly accompanied by his girlfriend. I remembered muttering to myself about how he had grown up while I escorted him and his girlfriend outside of the consultation room.

Today, Ming returned for regular check-up with the big news. How I have realised that he is no longer the innocent boy who loved to play basketball I met 22 years ago! He has truly evolved into this charming, sophisticated and well-mannered man who is ready to embark onto a new phase of life. While I again escorted him to the door, I had to suppress the thoughts and feelings that otherwise would be pouring out of my mind. It is astounding how swiftly time has gone by. It is delightful witnessing Ming's growth over the years. It is whimsical how I, as his doctor, can catch a small glimpse of his life every now and then, translating his happiness into my own. This is what I like to call "a doctor's blessing" – we have the privilege in shouldering the burden and sharing the joy of others' life stories. It is a true blessing that fills our everyday lives. It happens when we don't even realise – when we greet our patients, when we ask them how they are doing, and when we think about when we will see them again – all in the simplest moments.

5

護眼心得 Tips for Eye Care

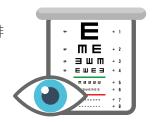


小童/青少年 Children/Teenagers

1

如子女在4歲或之前出現任何眼部問題(如斜視),應及早安排接受檢查及跟進

Arrange eye examination and follow-up in case of any eye problem (e.g. squint) in children aged 4 or below.



2

限制不同年齡兒童使用屏幕的時間:*

Limit screen time/use of electronic gadgets according to age:*



2歲以下	盡量避免使用
Under 2 Years Old	Avoid using electronic screen products
2至6歲	少於1小時
2 to 6 Years Old	No more than 1 hour
6至12歲(小學)	少於2小時(娛樂用途)
6 to 12 Years Old (Primary School)	No more than 2 hours of recreational use
12至18歲(中學)	避免長時間使用
12 to 18 Years Old (Secondary School)	Avoid excessive use

3



雙手不要捽眼。如有沙塵入眼,可閤上眼睛, 讓異物隨淚水排走

Do not rub eyes with hands. Close eyes when dust gets into them. Let the tears do the cleaning.



避免兒童接觸利器及化學品 Keep sharp objects and chemicals out of children's reach.

* 美國兒科學會建議 Recommendations of American Academy of Pediatrics



成人 Adults



使用電腦時要保持良好姿勢及適當距離 Maintain proper posture and good distance from computer screen when at work.

3



40歲作首次眼部檢查,了解個人家族病史及 風險因素

Have a baseline eye examination at 40.# Know you family history for risk factors.

2



視線每20分鐘遠離屏幕,遠望20呎外約20秒, 讓眼睛稍作休息

Look at something 20 feet away for 20 seconds after every 20 minutes of screen time.

4



經常運動,健康飲食 Exercise often. Eat healthily.



長者 Seniors

1



65歲後每隔一至兩年接受 眼部檢查

Have routine eye check every 1 or 2 years after 65.#

2



盡早戒煙 Quit smoking. 3



佩戴太陽眼鏡, 有助阻擋 紫外光

Wear sunglasses outdoors for UV protection.

美國眼科學會建議

Recommendations of American Academy of Ophthalmology

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