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New Year's Greetings and Looking Ahead

Prof. Marco PANG

President, HKPA

I feel incredibly honored to have been elected as the President of HKPA for the third term. I would like to take this opportunity for the support and encouragement I had received from many of our members during the election period. I promise I will continue to strive for excellence in my service to HKPA, as I fully understand that carrying the title as the President of HKPA involves tremendous responsibilities.

Looking back, the year of 2021 was certainly not an easy year but we were able to overcome many obstacles and ultimately managed to organize two major physical events as part of the celebration of the 60th Anniversary of Physiotherapy Education in Hong Kong, namely, the World Physiotherapy Day Celebration in September and the HKPA Conference in December. I was also pleased that our professional community had gained more unity after the incident involving the TV program featuring a chiropractor and the announcement of the Chief Executive's Policy address mentioning the future implementation of direct access.

There is much to look forward to in the coming year. The work on direct access will enter its critical stage. Work is also underway to develop a title program for physiotherapists in Hong Kong. A review of the HKPA Constitution will also be initiated in the first half of 2022. We will be hosting the World Physiotherapy Asia Western Pacific Congress on June 18-20, 2022. This Congress will feature many prominent scholars, and I am confident that you, regardless of your interest and specialty area, will find something that would appeal to you. I sincerely hope you can support the work of HKPA by joining this important event. Finally, I wish all of you a healthy and fruitful Year of the Tiger!



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Introduction of Home Care Service for Persons with Severe Disabilities

Mr. Wilson CHIU

Senior Physiotherapist, TWGHs Lok Kwan Home Care Service

Due to lower fertility and longer life expectancy, population ageing is a well-known trend in Hong Kong. [1] As such, the Elderly Services Programme Plan (ESPP) was launched in 2014. One of the key strategic direction was reducing institutionalization rate through significantly strengthening community care services (CCS). [2] As a result, provision of Home-based CCS was reviewed and streamlined to enhance the service coverage. [2]

On the other hand, in review of the demand of persons with disabilities, Census and Statistics Department conducted a territory-wide survey on persons with disabilities and chronic diseases throughout 2013. It stated that there was 578,600 persons with disabilities (excluding persons with intellectual disability) (8.1% of total population), when compared with 361,300 persons in 2007 (5.2% of total population). There was an increase of about 60%. Among those persons with disabilities, 506,600 persons living in households, 203,700 persons (40.2%) needed others to take care of their ADL as a result of their disabilities (Fig. 1). [3]

In order to meet the increasing demands of Community Care Services (CCS) in persons with severe disability who were living in households, several CCS with home-based service started. In 2011, Social welfare department launched a three-year Pilot Scheme on Home Care Service for Persons with Severe Disabilities (HCS), [4] which was regularized in 2014 and extended to the severely disabled in all districts in

Hong Kong, irrespective of whether they were on the waiting list for residential care services. [5]

Home Care Service for Persons with Severe Disabilities aims at providing a package of home-based support services to meet their personal care, nursing care and rehabilitation training needs of persons with severe intellectual / physical disabilities / moderate nursing care need or functional impairment. It also aims at relieving the stress of their family members / carers and improving their quality of life. [6] Rehabilitation training are provided by PT, OT or ST together with their assistants.

Including pilot teams, currently there are total six HCS teams in Hong Kong. TWGHs runs one of the HCS team, named Lok Kwan Home Care Service. We serve qualified service users who are living in Hong Kong Island and other outer islands. In paramedical team, we have physiotherapists (PT), occupational therapists (OT) and speech therapists (ST). In view of our users' nature, who suffer from multiple medical conditions and functional impairments, clients benefit the most by therapists' direct interventions. We provide rehabilitation training mainly by therapists instead of assistants. We now have 11 physiotherapists, 10 occupational therapists and 1 speech therapist, serving more than 550 severe disabled users.

According to "White paper on Rehabilitation 1995", preventive services was categorised into three levels: primary, secondary and tertiary prevention. [7]

Level of Prevention	Content
First-level prevention (Primary prevention)	Include measures aimed at reducing the occurrence of impairment
Second-level prevention (Secondary prevention)	Prevents the development of disability once an impairment has occurred. It also involves social intervention and the prevention of additional impairments
Third-level prevention (Tertiary prevention)	Prevents the transition of a disability which has occurred and is found to be irreversible into a handicap. It includes wide range of social intervention

(Continued on Page 3)

HCS contributes mostly in secondary and tertiary prevention. Different professionals work together as a team to design rehabilitation plans for users. With social workers act as case managers, PT, OT, nurses join together in the initial assessment, setting short-term and long-term goals of users. Goals will be reviewed half-yearly in review meetings on regular basis. Our main focus is to maintain or improve QOL of users and their families. PTs focus on the physical aspects of users, other than only using conservative approach, PTs try to maximize users' rehabilitation potentials, with promoting more independent living as long term goals.

Role of PT includes reducing chronic pain, improving ROMs and strength of limbs, training sitting and standing balance. In addition, PTs try to upgrade their mobility level, this plays an important role in reducing carers' burden on taking care of clients. Other than direct treatments on clients, PTs pay attention on carer education and provide consultations. Teaching transfer techniques, home programs for clients, prescribing assistive devices such as transfer belts, boards, and hoists will be introduced. Moreover, PTs provide staff training to our frontline staffs, especially therapist assistants. Therapist assistants carry out exercise programs for users prescribed by PTs, which can enhance the treatment effects.

Before the pandemic outbreak from 2020, PTs focused more on users "re-entering the community": for some younger and active users who could walk indoor after PTs' training, PTs would start outdoor walking training, targeting at walking to the closest community recreational facilities. After several trials, users became more confident in managing themselves for community walks.

During first three episodes of the COVID-19 pandemic, home visits were suspended, we changed to provide tele-rehabilitation as a replacement. Through video conferencing apps, PTs taught users to perform simple home exercises, gave advice to carers about users' conditions. Since the pandemic condition became stable from 2021, we resumed home trainings.

As newly designed and developed technologies become more popular in rehabilitation field, PTs start to explore the use of IT equipment in enhancing our training, which is more portable, user-friendly. With the help of funding provided by Social Welfare Department, we can afford to purchase such equipment for clients as home training equipment, which benefits our users in preventing deterioration and keep them having a quality living standard in the community.

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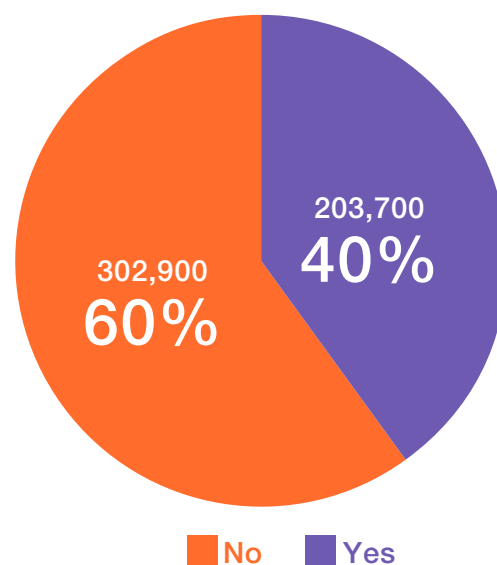


Fig 1. People with disabilities living in household by whether needed the others to take care of their ADL (excluding persons with intellectual disability)

An Interview with Mr. Benny KU

Date : 24 July 2021
Venue : Online
Interviewee : Mr. Benny KU,
 Health Informatician, Hospital Authority
Interviewers : Ms. Nicole CHU and Ms. Ada YEUNG,
 Year 3 Physiotherapy Students



Q1

Have you ever considered studying other subjects (e.g., computer science) other than physiotherapy when you graduated from secondary school? Why?

A1

I also considered studying biology instead of physiotherapy when I graduated from my secondary school. Since I liked Biology very much in the secondary school, I wanted to study something related to biology after I graduated. Additionally, I would like to study something that emphasizes on human connection and can help people directly. That's why physiotherapy became my first choice to study. For computer science, it was quite unfamiliar to me and the field was not well-developed back then. Therefore, I did not consider studying computer science.

Q2

How did you change your job from working as a physiotherapist to become a health informatics scientist? What exactly is health informatics? Why does HA need it?

A2

I changed my job from a physiotherapist to a health informatician because of the CMS platform. It is an electronic platform that is designed to enhance efficiency and safety of clinical practice. I was working in the Hospital Authority Head Office to help with a project to refine the CMS platform for allied health professions. With more experiences that I gained from the CMS platform project, I gradually changed from a physiotherapist to a health informatics scientist.

A Health informatician serves as a bridge between the frontline clinicians and IT engineers. We help them communicate better. Healthcare is a complex industry. It is difficult for IT engineers to understand the exact situation of clinicians such as clinical implications

while the clinicians sometimes cannot express their needs accurately to IT scientists. Health informatician help the two parties to communicate better in order to design more user-friendly systems for clinicians to use, such as assessment tools for physiotherapists.

Informaticians play important roles in the overall CMS system development in the Hospital Authority (HA). In addition to being a bridge between clinicians and technicians, we also need to help the system to run smoothly in the long run. The system need to be updated continuously as the data being collected and things change quickly. Therefore, we need to be always on a standby mode to provide the best system for all HA staff at all times.

Q3

What was / were the greatest challenge(s) that you faced during your transition? How did you overcome it / them?

A3

Working as a physiotherapist for a long time, I had been focused on physiotherapy-related issues. After I become a health informatician, I need to explore another world. I need to be competent regarding the functions of CMS. I spend much more time studying information related to technology advancement. In addition, I need to know more about healthcare knowledge as I need to communicate with clinicians from different disciplines. I am so inspired that we need to learn things more widely and deeply. I believe that goals can be achieved if you spend more time and effort on something you are interested in.

Communication is very important in my transition. Before working as a Health Informatician, I only focused on communicating with patients. Now, I need to communicate multi-directionally with different types of people in order to be a good 'bridge'.

(Continued on Page 5)

Q4

Currently, everyone is talking about big data or artificial intelligence (AI). How can physiotherapists make good use of such knowledge or technology in their clinical practice or professional development?

A4

Big data and AI technology may become a trend in the near future. Physiotherapists may need to make good use of the database by entering different data into it so as to facilitate the entire analytical process related to rehabilitation. Once the data are collected and analysed, physiotherapists may refer to the results as a reference to help them make the most appropriate clinical decisions with the best treatments for their patients.

AI technology is relatively new in Hong Kong but it has a great potential in facilitating physiotherapists' clinical decisions-making process. For instance, it may be applied in the clinical decisions-making process of stroke patients. The AI technology may help physiotherapists estimate the potential / likelihood of their patients' recovery. This technology may also help gather all information related to each patient and issue warnings to physiotherapists if their patients are incapable to undergo certain treatments.

This helps physiotherapists better design their treatment plans and enables them to estimate the time needed for the patients to be discharged. However, both the big data and AI technology will remain to be a tool to help facilitate the whole rehabilitation process. They will never be able to replace physiotherapists in making clinical decisions.

Q5

Telemedicine seems to play an important role during the pandemic. What would be the future trend of telerehabilitation in Hong Kong?

A5

Telerehabilitation has been playing a vital role during the pandemic. During the COVID-19 pandemic, nearly half of the rehabilitation services including outpatient services are cut due to health concerns.

Telerehabilitation not only helps save patients' travelling time, but also helps increase the frequency of patients in performing exercises. A mobile rehabilitation application (app) has been established within months, over a hundred of wide-ranging rehabilitation exercises have been added into the app during the pandemic. Patients can receive a well-designed schedule,

which provides them with guidelines on their own rehabilitation exercises, enabling them to complete rehabilitation exercises regularly at home.

In addition to the establishment of the rehabilitation app, online meetings are scheduled and phone calls are made between patients and therapists to allow therapists to follow up with the patients' rehabilitation progress. Because telerehabilitation has become more prevalent, telerehabilitation will continue to take up an increasingly pivotal role in rehabilitation in the future.

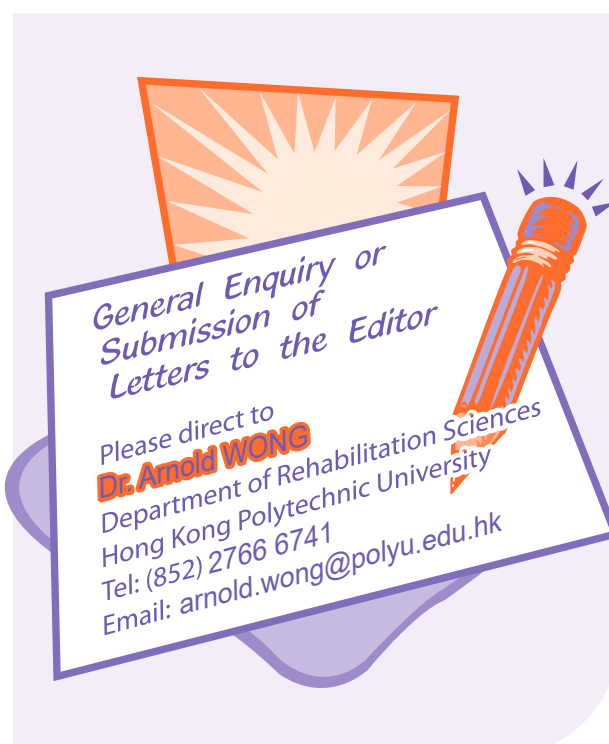
Q6

What suggestions will you give to junior PTs in equipping themselves for the future?

A6

Aside from equipping themselves with professional knowledge, junior physiotherapists are highly recommended to have a better understanding about how computer science and different technologies can be applied to rehabilitation services.

Junior physiotherapists should become more open-minded to make breakthroughs by applying new technologies in rehabilitation so as to help patients' recovery. No matter whether they are engaging in the field of informatics, having a comprehensive understanding of different technologies may help improve the efficiency of the whole rehabilitation process. It is because information technology will eventually take up a more crucial role in the rehabilitation sector.



Would a volunteer physiotherapist providing first aid service be found guilty to the charge of rioting?

Mr. Bronco BUT

Honorary Legal Advisor of HKPA

Assumed scenario:

1. Mary was a registered physiotherapist working in a public hospital. In October 2019, she knew from the WhatsApp groups that various groups of protesters would gather in Wong Tai Sin area to stage a protest against the HKSAR Government. She opined that the Police might use tear gas, plastic bullets and/or force against the protesters. She was concerned that some protesters might be affected by the tear gas or wounded by plastic bullets or suffered injuries in the course of scuffle with the Police.
2. Besides having received physiotherapy training, she had attended first aid course and had got first aid certificate. She opined that she should provide volunteer first aid service to protesters so that they would recover from the irritating effects of tear gas as soon as possible and their wounds could be tendered with at the scene of protest. Therefore, she decided to go to the scene of protest.
3. She put on black long sleeve shirt, a pair of long black pants, black helmet, a pair of black sports shoes, a pair of black gloves, black goggles, and black gas mask. She wore first aid vest on top of the black shirt. She carried a black ransack which contained 5 bottles of 500cc normal saline, bandages, 2 rolls of surgical tapes, 10 packs of alcohol swabs.
4. Mary attended the protest scene. Shortly after her arrival, police officers arrived at the scene and announced that she and other protesters participated in an illegal assembly and demanded the protesters to leave the scene peacefully. Otherwise, the police officers would arrest those protesters who refused to leave the scene peacefully. The protesters defied the police officers' demand, chanted slogans, use foul language to swear at the police officers and hurled stones and "fire-bombs" towards the police officers. In return, the police officers fired tear gas cannisters towards the protesters.
5. After the eruption of violent clashes between the police officers and protesters, Mary did not comply with the Police's demand to leave the scene but stayed with the protesters. She offered first aid treatment to those protesters affected by the irritating tear gas; treated the wounds and injuries suffered by the protesters.
6. After the violence lasted for about two hours, the police officers stated to advance towards the protesters. Mary still did not leave the scene forthwith but mingled in the crowd of protesters and continued to treat those protesters affected by the irritating tear gas.
7. Suddenly, the police officers charged forward towards a group of protesters and arrested protesters including Mary. At the time of arrest, Mary was fleeing from the pursuit of police officers
8. After arrest, Mary was brought back to the Police Station. Upon being questioned by the police officer, she remained silent and refused to answer any questions put forward by the interviewing police officer. She was released on police bail pending further investigation.

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9. After her release from the Police's custody, Mary thought that she was just a volunteer providing first aid at the time of arrest; she did not take part in the protest; she did not throw stones against the Police; she did not throw fire bombs against the Police. She opined that Police would not lay a charge against her and she would have no fear of being prosecuted of rioting.
10. Mary discussed with her Senior Physiotherapist who advised her to be of cautious and seek professional legal advice.

District Court Criminal Case No. 770/2020

11. On 28 January 2022, His Honour Judge Lee Chun Man convicted eleven male and female defendants of the offence of rioting. Among the convicted defendants was a young male called Mr. Lau who claimed to be a volunteer providing first aid providing first aid treatment to protesters.
12. His Honour Judge Lee said in the verdict that Mr. Lau was playing the role similar to an "army doctor" providing first aid treatment

to injured protesters whose confidence and determination to confront with the police officers would be boosted because they knew that Mr. Lau would take good care of them even if they got injured in the course of violent clashed with the police officers. Without his medical back up, the protesters would be dispersed by the police officers. As a result, Mr. Lau was deemed to take part in rioting based on the legal principle of joint enterprise.

Discussions

In view of the recent court judgment, any person besides ambulance men rendering first aid treatment to protesters at the scene of rioting was likely to run the risk of being charged with and convicted of the offence of rioting.

Depending on whether there was sufficient evidence to lay a charge against Mary, there was a real risk that she might have to fight an uphill legal battle if she was indeed prosecuted of the offence of rioting.




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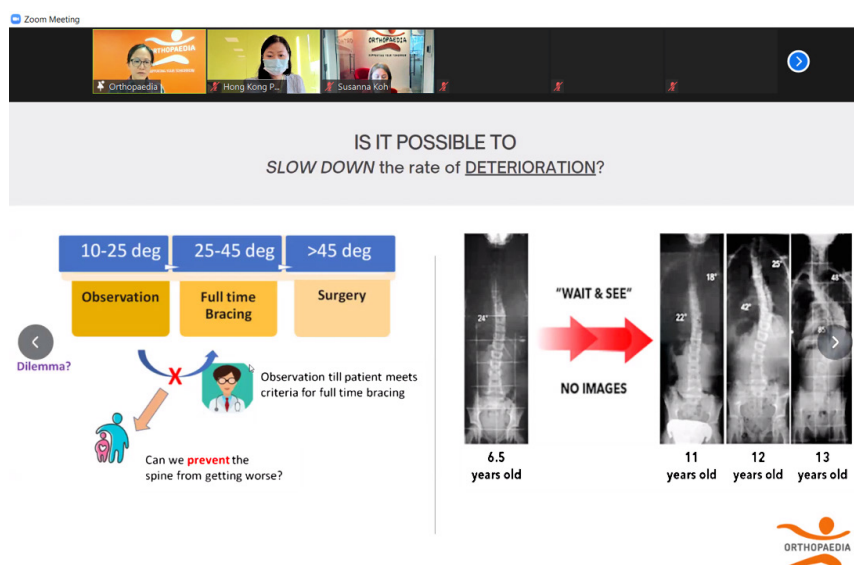
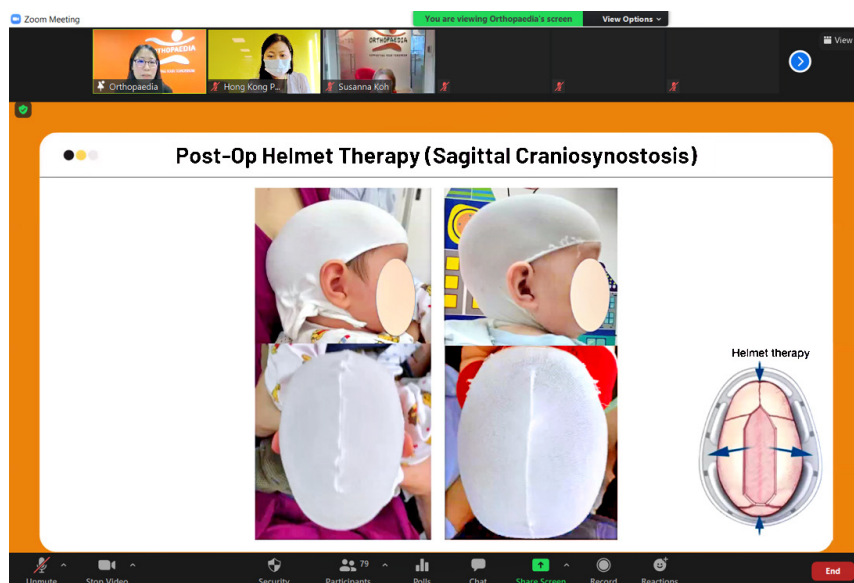
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Paediatric Specialty Group (Update in Paediatric Orthotic Management)

Date : 20 November 2021
Venue : Online Zoom Webinar
Speakers : Ms. Susanna KOH, Ms. Lucetta WONG, and Ms. Helen LEE

Susanna is a Principal Orthotist based in Singapore, and Lucetta and Helen are both local P&Os. They shared their area of expertise in the talk by covering the advancement in cranial, spinal and lower limb orthoses in a 1hr 45min-talk which was held online. They introduced the incorporation of 3-D scanning technique in measurement and evaluation, and selection of various types of orthoses according to children's conditions.

They illustrated their presentations together with successful case examples of paediatric clients, such as enhancing gait pattern, improved head contour with helmet, etc. And, they especially highlighted early referral for cranial orthosis to enhance the outcome dealing with cranial deformities. There were 71 participants in total and the overall feedbacks are positive. With this event, participants have gained new insight in different techniques, materials and designs available in the market. Through equipping such knowledge, while considering prescription, physiotherapists can most probably bring about enhanced functional outcomes in our clients.



Gerontechnology Platform Launching Ceremony

Date : 1 December 2021
Venue : Duke of Windsor Social Service Building, Wan Chai
Physiotherapist : Prof. Marco PANG

Prof. PANG was invited to attend the Launching Ceremony of Gerontechnology Platform and he is currently serving in the Assessment Panel of the Platform



First Meeting of the Preparatory Sub-committee on Occupational Therapists and Physiotherapists Sub-Directories of Primary Care Directory

Date : 10 December 2021
Venue : The Hub, 23 Yip Kan Street, Wong Chuk Hang, Hong Kong
Physiotherapist : Dr. Ivan SU

Dr. SU was appointed by the Food and Health Bureau as the Convenor of the Preparatory Sub-committee that was formulated to advise and support on the establishment of the new Sub-directories in view of the extensive involvement of physiotherapists in primary care for various medical conditions, in particular on chronic illness and long-term care. A sub-committee will later be formed under the Advisory Committee on Primary Care Directory to further set out the details within the context of relevant professionals. The first meeting of the Preparatory Sub-Committee was held in December 2021 with Prof. Amy FU of the Hong Kong Polytechnic University, Mrs. Eleanor CHAN of the Hong Kong Physiotherapists' Union, and Mr. Clement CHAN of Hospital Authority participated as physiotherapist representatives. Thanks to the effort of Prof. FU, Mrs. CHAN and Mr. CHAN, a physiotherapy logo design and the major categories of physiotherapy service were proposed to the Bureau in January 2022.

CPD News

Enquiry of CPD News and Activities Please Visit

<http://www.hongkongpa.com.hk/cpd/doc/CPD%20All.xls>

HKPA Conference 2021

(60th PT Education Anniversary with Sik Sik Yuen 100th Anniversary)

Date : 12 December 2021

Venue : Nina Hotel, Tsuen Wan West

The conference was successfully held on 12 December 2021 in Nina Hotel, Tsuen Wan West using hybrid mode. A total of 170 registrants from Hong Kong, Macau, Japan, Ghana, India and Sri Lanka attended the full-day conference. Prof. Susan Effgen from University of Kentucky, Dr. Lim Wee Shiong from National University of Singapore, Prof. Timothy Kwok from the Chinese University of Hong Kong, Mr. Jimmy Wu from Primary Healthcare Office and Ms. Tracy Bury from World Physiotherapy were invited as keynote speakers. The conference organizing committee also invited guest speakers Mr. Lo Sang Ho and Mr. Wong Sze Tat from Sik Sik Yuen to share the Medical and Physiotherapy Service development at Sik Sik Yuen. Importantly, the conference included 3 parallel sessions to allow presenters with diverse backgrounds and interests to share their research findings and clinical practice experiences with our audience.



(Continued on Page 11)



(Continued on Page 12)



Meeting on Mandatory CPD Scheme for Physiotherapists

Date : 15 December 2021

Venue : Online Meeting

Physiotherapists : Prof. Marco PANG, Ms. Mandy MAK

Prof. Marco PANG and Ms. Mandy MAK attended the meeting organized by the PT Board to discuss the implementation of the Mandatory CPD Scheme for Physiotherapists. The role of HKPA in this initiative was discussed at the meeting, as well as the possibility of developing an e-platform for management of CPD data.

AWP Region Executive Committee Meeting

Date : 23 December 2021

Physiotherapist : Prof. Marco PANG

Prof. PANG delivered a presentation to update the AWP Region Executive Committee on the World Physiotherapy AWP Congress, which is scheduled to be held on 18-20 June 2022.

2022-23 Budget Consultation Session

Date : 28 December 2021
Venue : Central Government Office, Tamar
Physiotherapist : Prof. Marco PANG



Prof. PANG attended the captioned session and expressed his views on 3 major issues: (1) inadequate manpower for administrative support of the PT Board, (2) lack of staff retention measures for physiotherapist staff in HA, and (3) provision of tide-over grant for NGOs to hire retired physiotherapists to deal with the staff shortage. Written comments on these issues were also sent to the Government on 30 December 2021.

Meeting PolyU RS Master of Physiotherapy (MPT) Year 1 Students and Inauguration Ceremony

Date : 6 January 2022
Venue : The Hong Kong Polytechnic University
Physiotherapist : Prof. Marco PANG

Prof. PANG was invited to attend the Inauguration Ceremony for the MPT Program. Earlier on the same day, Prof. PANG gave a presentation to introduce HKPA to the students, and encourage them to join HKPA as a student member. Almost all MPT students in this cohort joined HKPA as a result.

Meeting with Wheel for Oneness

Date : 13 January 2022
Venue : Online Meeting
Physiotherapists : Prof. Marco PANG, Mr. Mike AU YEUNG, Ms. May CHAN

Prof. PANG, Mr. AU YEUNG and Ms. CHAN had a meeting with representatives of Wheel for Oneness, an NGO that organized activities for people with disabilities, to discuss the opportunities for future collaborations. The meeting was fruitful, and HKPA is looking forward to contributing to the various meaningful activities organized by Wheel for Oneness.

Meeting with PT Board Chairman

Date : 20 January 2022
Venue : A Chinese Restaurant
Physiotherapists : Prof. Marco PANG, Dr. Ivan SU, Mr. Gorman NGAI

The main agenda of the meeting was direct access. Prof. PANG provided his views on the global trend, and also provided information on research evidence showing the benefits of direct access, the insurance premium, and also various direct access models used in the USA.

Article Published in News Media

Date : 24 January 2022
Physiotherapist : Prof. Margaret MAK

In January 2022, Prof. MAK shared with us and general public how physiotherapy helps parkinsonism in Ming Pao.

運動處方 帕金森病大步走、要太極防跌倒

帕金森病是一種常見神經系統疾病，患病率為1/1000。帕金森病的典型運動症狀，導致功能受限的運動遲緩、僵直和震顫。跌倒則是帕金森病患者常見的主要問題，發生率在35%至70%之間。令人震驚的是，25%至50%患者會經歷跌倒。嚴重跌倒會導致骨折、功能受限、喪失獨立性和更早進入護理院。

為什麼帕金森病患者會跌倒？因他們的平衡能力差，走路時步幅小，在走路時會失去平衡而跌倒。他們的腳軟在地上，而身體則嘗試向前或向側面移動，引起跌倒。步態遲緩常發生在走路轉彎、走過狹窄門口或注意力分散時。患者在不平坦地面上行走也可能會跌倒。此外，當患者突然被他人碰觸時，他們會以小而短促的步子做出反應，甚至沒有足夠反應而跌倒。

改善步態訓練 提高平衡力 有什麼預防和治療跌倒的方法？藥物是主要的治療方法，但儘管有藥物治療，跌倒意外仍然發生。藥物加上物理治療可以改善平衡和行走能力，防止跌倒。物理治療和運動學專業，訓練患者快速行走不同方向的目的，這有助於提高步態反應的速度和幅度。前引入平衡訓練和平衡活動，可訓練患者以更大角度和適當步伐轉彎，增加轉彎穩定性，亦可從

走在跑步機上，看前面的螢幕，在不斷變化的行走速度下跨越障礙物，以輕微抖動身體情況。而慢步行走，包括手膝運動、緩慢轉彎和大步步行走，可以訓練他們行走能力，防止跌倒。太極是另一種訓練，訓練中，身體重心會經多次移動，涉及向不同方向的步態和旋轉旋轉。長距離練習可以改善平衡。除了提高平衡和行走能力，物理治療師還檢查容易跌倒的活動，糾正其模式以停止跌倒。走路轉彎是常見的問題情況，因帕金森病患者轉彎時，腳跟和腳趾活動，可訓練患者以更大角度和適當步伐轉彎，增加轉彎穩定性，亦可從

用棍提示，以地板上的線，或腳拍作提示，助患者在發生步態遲緩時重新開始行走。除了訓練，家庭環境的改造同樣重要，如浴室不應有地毯，地板不應有水；地上不應有電線/障礙物等；良好的照明亦非常重要。

總括一下，物理治療師針對了許多訓練策略，增強帕金森病患者的平衡和行走穩定性。最重要是儘早開始並發展可持續的運動習慣。患有帕金森病的人可以繼續練習良好和習慣，定期練習，每星期3次，「運動是藥」，必須每天做。

文：麥潔儀（香港物理治療學會會員、香港理工大學康復治療科學系教授）

HKPA Online Forum on Direct Access

Date : 27 January 2022
Venue : Online Meeting
Physiotherapists : Prof. Marco PANG, Prof. Margaret MAK as presenters

This forum was co-organized with Hong Kong Physiotherapists Union, the Hong Kong Polytechnic University, Tung Wah College, Hong Kong Metropolitan University, and Caritas Institute of Higher Education. The participants shared their views on the future implementation of direct access. The consensus was to form a sub-group to draft a direct access model that would be presented to the PT Board Chairman.



Meeting with Dr. David LAM (Legislative Councilor)

Date : 28 January 2022
Venue : Online Meeting
Physiotherapists : Prof. Marco PANG, Dr. Ivan SU, Mr. Gorman NGAI

Representatives from the Department of Rehabilitation Sciences of the Hong Kong Polytechnic University, and the Hong Kong Occupational Therapy Association also attended the meeting. At the meeting, we expressed our opinion on direct access.



Department of Orthopaedics and Traumatology
Faculty of Medicine
The Chinese University of Hong Kong
香港中文大學 醫學院 矯形外科及創傷學系

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