



# Meridian

Newsletter of the Australian Chinese Medical Association of Victoria

澳洲維省中華西醫協會

December 2016 Volume 13 Number 4

## President's message



智慧, 同情, 勇氣。Wisdom, compassion, and courage are the three universally recognized qualities of humanity. Confucius.

It is with a great degree of excitement that we awaken to the start of 2017, the year of the Rooster!

Our enthusiasm continues after our incredibly successful 20<sup>th</sup> ACMAV Conference partnered with Austin Health's Clinical Education Unit and generously supported by Audi Centre Doncaster, Audi Penfold Burwood, The Financiers Group, Global Medics and Avant. We are also indebted to the ACMAV committee, our multiple volunteers and the Andante group. Feedback from participants has been phenomenal with many commenting on the breadth and depth of our fantastic line-up of speakers, to whom we are enormously grateful. After all, real knowledge is to know the extent of one's ignorance. Please find in this edition some of the topics, highlights and photos of the event.



In 2017, ACMAV is proud to be the lead association for the Australasian Council of Chinese Medical Associations (ACCMA), with other member associations being the Auckland Chinese Medical Association, the Australian Chinese Medical Association (NSW) and the Australasian Doctors Association (QLD). In this role, we are eagerly preparing for the ACMAV/ACCMA Conference which will be held on the 16<sup>th</sup> September, 2017.

Save this date and join us for a day of highly interactive learning at Austin Health's Education Precinct with cutting edge, yet clinically relevant sessions led by experts in the field. Break-out workshops will ensure the conference is tailored to your personal learning needs. In keeping with tradition, we will be finishing the day with a delectable Asian Degustation Banquet which will allow the necessary reflection and discussion to transform knowledge into impactful clinical application!

One of the core values of our association is to give back to the community. In line with this, ACMAV has, for many years, maintained a strong charitable focus, previously executed via the ACMAV Foundation. As discussed at the 2016 AGM, we have shifted towards educational and health promotion activities to benefit the Chinese Community, channelled through the ACMAV Health Promotion Trust. Our Charitable Grants Program continues to assist relevant individuals and community groups. In this edition of Meridian is an update on Dr Adrian Mar's project on non-cultured epidermal grafting for vitiligo. This continues to be an immense success with assistance from ACMAV's Charitable Grant to the Skin & Cancer Foundation. Indeed, the skin we wear is our largest organ and the art and science behind skin transplantation is enough to make one's hair stand on end!

ACMAV is not only a community of clinicians with the ultimate aim of providing excellent patient care, but also a family of members who thrive on social and networking events. Because of this, we continue our vigorous and healthy social program. Find in this edition our Tennis Tournament, Tai Chi and Movie Night highlights, and stay tuned for our other social events in the coming year.

See you all at the upcoming Yum Cha! 恭喜发财 (gōng xǐ fā cái)! 身体健康 (shēn tǐ jiàn kāng)!

*Dr Chris Leung (ACMAV and ACCMA President)*



# ACMAV Clinical Conundrums Conference - 5 Nov 2016

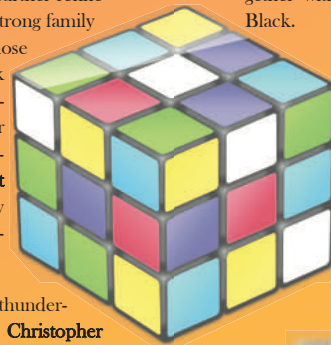
ACMAV held its major health promotion event of the year on November 5, 2016, convened by **Dr Chris Leung, ACMAV President** and the Conference subcommittee. This educational and networking event proved enormously stimulating, popular and informative, requiring a late change to a larger lecture theatre. ACMAV would like to acknowledge the support from **Audi Centre Doncaster, Audi Penfold Burwood, The Financiers Group, Global Medics** and **Avant**, for their generous support in enabling this event. Many thanks also to the **Austin Clinical Education Unit** as the major partner for this event.

There is fat, and there is fat. Are you an apple or are you a pear? The metabolic syndrome is an increasing problem in our overweight, over-indulgent society. Multiple organs are affected, including the cardiovascular system, the liver, and pancreas. **Professor Joseph Proietto** provided a comprehensive overview of the manifestations, diagnosis, and new management strategies for metabolic syndrome, underpinned by a greater understanding of fat as a highly complex endocrine organ.



Women				Men			
Smoker	Non-smoker	Age	Score	Smoker	Non-smoker	Age	Score
1	1	65	1	1	1	65	1
2	2	66	2	2	2	66	2
3	3	67	3	3	3	67	3
4	4	68	4	4	4	68	4
5	5	69	5	5	5	69	5
6	6	70	6	6	6	70	6
7	7	71	7	7	7	71	7
8	8	72	8	8	8	72	8
9	9	73	9	9	9	73	9
10	10	74	10	10	10	74	10
11	11	75	11	11	11	75	11
12	12	76	12	12	12	76	12
13	13	77	13	13	13	77	13
14	14	78	14	14	14	78	14
15	15	79	15	15	15	79	15
16	16	80	16	16	16	80	16
17	17	81	17	17	17	81	17
18	18	82	18	18	18	82	18
19	19	83	19	19	19	83	19
20	20	84	20	20	20	84	20
21	21	85	21	21	21	85	21
22	22	86	22	22	22	86	22
23	23	87	23	23	23	87	23
24	24	88	24	24	24	88	24
25	25	89	25	25	25	89	25
26	26	90	26	26	26	90	26
27	27	91	27	27	27	91	27
28	28	92	28	28	28	92	28
29	29	93	29	29	29	93	29
30	30	94	30	30	30	94	30
31	31	95	31	31	31	95	31
32	32	96	32	32	32	96	32
33	33	97	33	33	33	97	33
34	34	98	34	34	34	98	34
35	35	99	35	35	35	99	35
36	36	100	36	36	36	100	36

The morning kicked off with **Dr Gary Liew**, cardiologist, who spoke of **coronary artery calcium (CAC) scoring** for evaluating cardiovascular risk. Traditionally the Framingham Risk Score has been central to risk assessment, and integrating coronary artery calcium scoring can further refine this. CAC is particularly useful in those with a strong family history, and/or those with intermediate risk, whose CAC score may reclassify them at higher risk and warrant aggressive primary prevention therapy. Following on from this, **Kim Gray**, senior cardiac and heart failure rehabilitation physiotherapist, expanded upon **management of heart failure**. This focused on the multidisciplinary approach, and the increasing importance of psychological and appropriate palliative care input.



**Mr Jason Chuen**, Director of Vascular Surgery at Austin Health gave a refresher on management of **peripheral vascular disease**, as well as new surgical techniques, aided by the fantastic advent of 3D printed anatomical models. This was further elaborated at the conference dinner, together with another 3D printing enthusiast, Dr Jasmine Coles-Black.



Elastic Heart? Plastic Heart? No—a 3D printed heart

PEF (L/min)

Age (years)

Men

Women

It was also fortuitous that just shortly before thunderstorm asthma struck Melbourne, **Dr Christopher Worsnop**, respiratory physician, delivered key education points for diagnosis and **management of asthma**. The unfortunate dump of pollen in late November resulted in a number of deaths (post conference). This served to highlight the points from Dr Worsnop's talk regarding good preventative practice and having a clear asthma management plan that is adhered to.



**Dr Wai Khoon Ho**, haematologist, and **Dr Nora Lee**, haematology registrar, finished the pre-morning tea session with **haematological emergencies**. These included initial recognition and management of acute promyelocytic leukaemia (APML), thrombotic thrombocytopenic purpura, massive pulmonary embolism, hyperleukocytosis / hyperviscosity and tumour lysis syndrome. Febrile neutropenia was also discussed as another time-critical presentation, with mortality increasing with every hour in delay of antibiotic administration.

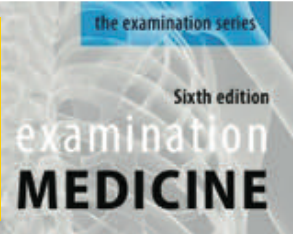
Attendees also had the opportunity to hear about **Zika virus**, as part of the travel medicine and infectious disease talk led by **Associate Professor Pat Charles**. Brought to prominence due to the threat to the Rio Olympics, Zika virus is a flavivirus originating from Uganda. It can be transmitted through a bite from the *Aedes aegypti* mosquito. Disease can also be propagated vertically, via sexual contact or through blood transfusion. Severe neurological consequences have been seen, including microcephaly and Guillain-Barre syndrome.





# ACMAV Clinical Conundrums Conference - 5 Nov 2016

Following a satisfying lunch, the brains got back into gear for **FRACP exam tips** from the experts—**Dr Stephen Warrilow** and **Associate Professor Pat Charles**. Ultimately, it still comes down to practice practice practice, smart studying, and having constructive feedback from senior clinicians and peers. Austin Health's enviable pass rate for physician exams is testament to some of the tips, tricks and traps shared during this session. Whilst some examples were specific to FRACP examinations, the principles of play are clearly applicable to all clinicians who jump through the fellowship hoops.



Conference Committee and Speakers ←  
Conference Committee assistants →



*juggling  
life  
and  
medicine*

The Professor - Ingrid Scheffer AO



Some days, one wonders how to fit everything in. Can it really all be done? According to these two very inspirational women, YES, it certainly can. **Professor Ingrid Scheffer** is a paediatric neurologist with a particular interest in epileptology. Her tireless work has resulted in an Order of Australia (amongst other accolades). Ingrid spoke of how her career evolved—some of it planned and other parts not; decisions that led to a different trajectory and focus, and fitting in research and family commitments to become successful as she is today. **Dr Elena Galiabovitch** is a resident medical officer with surgical aspirations. She was also selected to represent Australia at the 2016 Rio Olympic games in shooting, a remarkable achievement. Elena's success was a culmination of tireless planning, prioritising, making sacrifices, and a gameload of determination. Her mature advice and perspective on managing competing interests was certainly appreciated by all.



The Olympian - Elena Galiabovitch

## break out sessions

The afternoon breakouts allowed attendees to choose their topic of interest and participate in small group interactive sessions. These included **IMG pathways**, **FRACP training** (adult and paediatric), **Images in Clinical Medicine**, **Point of Care Tools**, and navigating through **FRACS training**. Thank you to all the speakers and facilitators for holding these mini-workshops.



Good perioperative management of patients is important for clinical outcome. The final joint session for the afternoon before the breakout workshops focussed on optimising patient physiology before, during and after surgical procedures. Attendees heard from **Dr Kiat Lim**, Director of Austin Health Prevocational Surgical Training, and from **Dr Suet-Wan Choy**, a renal and Perioperative physician, who is also the Director of Adult Physician Training at Austin Health. Principles of management included adequate lead up time to surgery, meticulous planning, early referral to perioperative



specialists for patients with complex comorbidities. **Images in Clinical Medicine** proved to be very popular, particularly with ophthalmology—an area that is perhaps not visited regularly for non-ophthalmologists! A big thank you to all the speakers.



major partner



bronze sponsors





## Conference Dinner

Perhaps we didn't quite get to the stage of 3D printing our own dinners and drinks, but after a full day of educational knockout, Conference delegates were able to sit down and enjoy a (real) banquet provided by Golden Dragon Palace, Templestowe. Dr Jasmine Coles-Black and Dr Jason Chuen are both 3D printing enthusiasts. They provided a short and snappy talk on the versatility and current uses of 3D printing in medicine. In particular, its considerable impact on medical and surgical training were evident. Guests were entertained throughout the evening courtesy of a beautiful string quartet - the Austin Andante Group.



## Annual Tennis Tournament

**Winners** Trevor Lau-Goocy and Lean-Peng Cheah

**Runner Up** Douglas Gin

The Annual Tennis Tournament was organised by Douglas Gin once again. Held on Sunday 25/10/16 at the National Tennis Centre, it was an inclement day with wind and rain. Play commenced on the indoor courts, and it was a case of old rivals contesting in a sweaty and robust round robin format. Congratulations to the winners. New entrants are welcome for 2017.

## Movie Day

## Tai Chi Dinner



L-R Joanne and Dr Cary Chuen, Drs David Chong, Cheryl Oh, Nora Lee, Mr Andrew Bui, Mrs Caroline Bui @ Crown Palace, Vermont South

ACMAV members went for a bundle of laughs on 2/10/16 to see *The Secret Life of Pets* at Kino Cinemas, Melbourne. With a special food package and a dedicated theatre, it was a thoroughly enjoyable afternoon for all. Keep an eye out for more family-friendly outings with ACMAV in 2017. Suggestions are also welcome—please send them along to [office@acmav.org](mailto:office@acmav.org)

## ACMAV activities

### Non-cultured epidermal grafting for Vitiligo



Dr Adrian Mar, Chris Arnold Executive Director of the Skin and Cancer Foundation and Dr Nicole Yap with the ACMAV grant.

Vitiligo is a challenging condition to treat and while its prevalence is similar across different ethnic groups (approximately 0.7% of the population, affecting both children and adults) it is more visible and hence more disabling for those of darker skin type. With the changing immigrant mix in Australia it is an increasingly common problem presenting to local clinicians.

Due to an ACMAV grant of \$9000 provided to the Skin & Cancer Foundation Inc, the Vitiligo Clinic has now become Australia's first centre for non-cultured epidermal grafting in the treatment of stable vitiligo. The SCFI, based in Carlton, is a not-for-profit organisation established by Victorian Dermatologists as a tertiary referral centre and teaching and research facility. Referrals from Dermatologists to the Vitiligo Clinic enable patients to receive standard therapy with phototherapy and topical and oral immunosuppressants, as well as offering a service for camouflage techniques and psychological counselling if required. The limitation of standard treatment is that following adequate suppression of the immune system there is very often an incomplete repigmentation of the affected skin, resulting in a long term cosmetic disfigurement in many cases. Epidermal grafting provides the most effective way of repigmenting areas of recalcitrant hypopigmentation. In this procedure a piece of skin up to the size of a credit card is removed from the patient's thigh or buttock area using a split skin shave technique. This donor skin is cut into smaller sections and transferred to a petri dish where trypsin is added and the skin is incubated for 1 hour to separate the individual skin cells. The remaining pieces of skin are then gently scraped under a sterile environment to produce a liquid suspension of

keratinocytes, melanocytes and fibroblasts and this cellular mix is concentrated by centrifuge before being placed in a small dispensing syringe. Meanwhile the area of white skin is de-epithelialised with the use of an ablative laser in preparation for the cellular suspension to be placed onto the surface.



Skin undergoing trypsinisation in the incubator.

The advantage of this technique is that it is the patient's own melanocytes that are transferred to the affected area and therefore a good colour match is achieved. The process does not involve any culturing of the cells and yet it can be used to treat areas of vitiligo at least 4 times larger than the size of the donor skin, presumably due to the proliferation of skin cells following transfer. Furthermore as only the

superficial aspects of the skin are involved at both the donor and recipient sites, the skin heals without scarring. This technique can only be used on areas of vitiligo which are "stable", meaning they are unchanged in size or appearance for at least 12 months without therapy. If vitiligo is still active in these areas then the autoimmune process is likely to destroy the transplanted cells. There is no MBS rebate applicable to this service and only adult patients can be treated at the Foundation. Epidermal grafting can be used to treat vitiligo on most areas, including the face. The expectation is for a repigmentation rate of at least 70% after each grafting session. The maximum benefit is seen about 6 months post-operatively. Success is less for the fingertips, lips and parts of the genitals and therefore it is usually not attempted at these sites. Other causes of white patches such as piebaldism, hypopigmented naevi and some scars can also be treated with this technique and results can often be excellent as the lack of an autoimmune response is of benefit in the skin recovery. With the help of the ACMAV the Skin & Cancer Foundation Inc. was able to purchase a laminar flow cabinet necessary to prepare the cellular suspension under sterile conditions. The Foundation is very grateful for the ACMAV's assistance in establishing a new service that will provide hope and relief for those suffering from vitiligo.

**Dr Adrian Mar, Dermatologist, the Vitiligo Clinic**

# Get Involved with ACMAV!

## ACMAV

**President:** Dr Chris Leung  
president@acmav.org

**Vice-President:** Dr David Chong  
vicepresident@acmav.org

**Secretary:** Dr Lisa Ling  
secretary@acmav.org

**Treasurer:** Dr Cheryl Oh  
treasurer@acmav.org

### Committee Members:

Dr Yue-Guang Baey    Dr Melissa Chen  
Dr Jason Chuen        Dr Lilia Iлина  
Dr Nora Lee            Dr Rebecca Nguyen  
Dr Nicole Yap

### Newsletter Editor:

Dr Nora Lee  
meridian@acmav.org

**Published by ACMAV Inc.**  
ABN 43 721 970 098

### All correspondence:

ACMAV House  
862A Canterbury Rd  
Box Hill South VIC 3128  
Tel: (03) 9899 6380  
Fax: (03) 9899 6389  
Web: www.acmav.org  
Email: office@acmav.org

### Printing Services:

Ivy Printing, 4 West St  
Brunswick VIC 3056  
Tel: (03) 9383 6833

### Future edition copy deadlines

3 March 2017    2 June 2017  
1 Sept 2017     8 December 2017

Statements or opinions expressed in this publication represent those of individual authors and not necessarily that of the ACMAV committee except where indicated. All material is covered by copyright by ACMAV and individual authors and must not be reproduced without permission.



## UPCOMING EVENTS

chinese new year

YUM CHA

11 Feb 2017

Details to follow

## Update: Future of ACMAV House

At the Annual General Meeting, 30 November 2016, it was resolved that the existing ACMAV headquarters would be sold in 2017. This will enable diversification of ACMAV assets and flexibility of investment to support the growth of the association. Further details will be forthcoming from the ACMAV House Subcommittee.

est 1993  
**ivy printing**

commercial • digital • design

4 west st brunswick vic 3056  
**Brunswick** t 03 9383 6833 f 03 9383 5833  
e print@ivyprinting.com.au

**business card** \$44/250 \$77/1000  
standard size 90x55mm    digital printing    off set printing  
offset print: 2 side on art gloss 360gsm high-bulk with options of finish (see below or call)

**Professional printing services for stationery advertising, displays and signage**

- wide format printing and contour cutting (display & signage)
  - indoor & outdoor posters/banners - window graphics
  - billboard - product displays - personalised wallpaper
  - personalised labels - light boxes
  - art canvas & photo print
- commercial offset printing
  - cmyk + spot colour - pantone colour
- special effect and finish
  - raised printing - foil & emboss - forme cutting
  - uv spot varnish - membership card

see promotion low price list online

www.ivyprinting.com.au