



## A new HKSPR council: preparing for the future

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As the first Christmas issue of the Journal, I would like to take this opportunity to wish members of the Society Merry Christmas. In this issue, we have three case reports ranging from the complicated congenital anomalies, i.e. pulmonary artery sling and tracheal stenosis, to the common cases of problems associated with the use of chlorpheniramine in infants. They all have one common outcome, i.e. mortality if not dealt with appropriately.

I am delighted and honoured to be elected the President of the Society in the AGM held on 9th October, 2005. The Society was founded in 1997 to promote the development of paediatric respirology and critical care. Under Dr. So Kwan-Tong, the founding President, the Society worked hard to arouse the interest in these areas with success. Further development was achieved under Dr. Alfred Tam, who led the Society for six years. Alfred was instrumental in establishing the Society its present leading position in Hong Kong and Asia. The successful hosting of the International Pediatric Respiratory, Allergy and Immunology Congress (IPRAIC) by the Society in 2004 would not have been possible without the vision and perseverance of Alfred. I would like to take this opportunity to thank Dr. So and Dr. Tam for their contributions. Behind them were a group of dedicated office bearers and council members who have been

working hard to promote the works of the Society. I thank them all from the bottom of my heart.

I would like to build on the past success and push for further development in the areas of paediatric respirology. I see three main areas that the Society should focus on in the coming years, i.e. research, training and accreditation. Original clinical research is essential for development of paediatric respirology and it should not be confined to the university units. I hope to encourage more collaborative research projects both in the HA hospitals and the private sector. Collaborative research projects would provide the platform for mutual understanding. This is essential to develop a common training program for the whole of Hong Kong with different hospitals playing different parts in it. It is extremely important for this Society to help train recognised paediatric sub-specialists in the areas of paediatric respirology or it will never occur. Eventually, these "specialist in paediatric respirology" should be formally accredited by the Hong Kong Academy of Medicine. The process of research, training and accreditation would be an arduous one but its success is assured if we all work toward this goal.

I would like to end by wishing all members a happy, healthy and successful 2006 and Year of Dog.

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