Introduction to AEMAU and PEC course

Accident and Emergency Medicine Academic Unit (AEMAU)
Accident and Emergency Medicine Academic Unit

The AEMAU was established on 2 October 1995, with Professor Robert Cocks as its first Director.

The unit was the first of its kind in Asia. The Faculty of Medicine of the Chinese University of Hong Kong tasked the unit to provide clinical, administrative, educational and research leadership in Emergency Medicine, not only in Hong Kong but more widely in China and across the Asia-Pacific region. Since its inception, the Department of Surgery has hosted the AEMAU administratively but the unit functions with almost complete autonomy and has an independent budget.

Professor Peter Cameron served as the unit’s second Director, and was followed by Professor Timothy Rainer who was Director from August 2003 until March 2015. During this period, staff in the unit pursued many research themes, including trauma, infectious disease (including SARS and influenza), cardiovascular disease, stroke care, critical care, disaster medicine and aviation medicine.

The unit is currently led by Professor Colin Graham and we continue to undertake research in several areas of interest while providing teaching to every undergraduate final year medical student in the Chinese University of Hong Kong, along with students from other medical years and disciplines, and visiting elective students. We continue to foster local and international collaborations with other departments and institutions and we are committed to interdisciplinary research and education.
Our team
Professor Colin A Graham

Colin Graham qualified in 1994 and trained in emergency medicine in Scotland. He moved to Hong Kong in 2004 and has been a Professor in the Chinese University of Hong Kong since 2007. Colin is the recipient of the BASICS Gold Medal award, Royal College of Surgeons of Edinburgh, 1997. He is the fellow from various Colleges including American College Chest Physicians, Hong Kong Academy Medicine, Hong Kong College Emergency Medicine, Royal College Physicians and Surgeons Glasgow, Royal College of Surgeons Edinburgh, and UK Royal College of Emergency Medicine. He is also a council member of the European Society Emergency Medicine since 2009.

Colin teaches and practices emergency medicine at the Prince of Wales Hospital. He has broad research interests within emergency medicine and he has published about 300 papers. He directs the MSc in Prehospital and Emergency Care at CUHK and is a co-author of the Oxford Handbook of Emergency Medicine.

Colin has been Editor-in-Chief of the European Journal of Emergency Medicine since 2009 and he serves on the Executive Committee and Council of the European Society for Emergency Medicine and the Council of the Hong Kong College of Emergency Medicine. He is a member of eight editorial boards and reviews for more than forty medical journals.
### Current Issue Highlights

**Editorial**
- Outcomes in emergency care research
  - Hung, Kevin K.C.; Lo, Ronson S.L.; Graham, Colin A.

**Review Articles**
- Disposition of emergency department patients diagnosed with acute heart failure: an international emergency medicine perspective
  - Miro, Oscar; Levy, Philip D.; Mockel, Martin; More

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**Notice**

Reviewer Acknowledgement: The Editor is grateful for the assistance to those reviewers listed who have assisted in the peer-review of papers during 2015.
RECOMMENDED READING!

Educational Resources

1. Free Emergency Medicine Talks
   Free educational resource for emergency medicine, designed and run by Dr Joe Lex who is a highly respected EM physician from the US. Most of the files are mp3 format for ease of listening.

2. EMRAP Educators' Edition
   A useful resource for Emergency Medicine Educators.

3. Lectures on Emergency Medicine Topics
   By the International Federation for Emergency Medicine
   These talks may be downloaded and used for other presentations.

4. AccessEmergency Medicine
   By the McGraw-Hill Companies (Limited to CUHK staffs and students)

5. Recommended Emergency Medicine blogs, podcasts, and websites
Current Issue

2016 November

Hong Kong Journal of Emergency Medicine:
November, 2016 Issue No. Volume 23, Number 6

ORIGINAl ARTICLE

- Toxicology training unit in emergency department reduces admission to other specialties and hospital length of stay
- The 100 top-cited articles published in emergency medicine journals: a bibliometric analysis
- Nurse performed ultrasonography in confirming the position of nasogastric tube in the emergency department: a prospective single group diagnostic test study
- Epidemiology of paediatric out-of-hospital cardiac arrest presented to a local emergency department: a retrospective case series
- Local emergency department pediatric cardiac arrest: a retrospective case series
- Hong Kong Poison Information Centre: Annual Report 2015

SPECIAL FEATURE

CASE REPORT
Emergency Medicine

Ketamine vs. Etomidate for Rapid Sequence Intubation
An observational study suggests that these two agents are similarly safe but send a possibly worrisome signal.

Intravenous Ketorolac: Are Lower Doses Just as Effective?
Limiting the assessment of pain relief with ketorolac to 30–120 minutes after administration limits the conclusions we can draw from this study.

Intranasal Ketamine vs. Intravenous Morphine for Renal Colic Pain
A small trial finds the two options to have similar efficacy at 30 minutes.

Begin Treating Acute Cholecystitis Based on Point-of-Care Ultrasound Findings
A meta-analysis shows that no single finding of the history and physical examination, lab tests, or ultrasound can reliably rule out acute cholecystitis, but a positive ultrasound can increase likelihood enough to begin antibiotic treatment.

Termination of Resuscitation Criteria for Out-of-Hospital Cardiac Arrest
Even without return of spontaneous circulation, some patients had good outcomes if the arrest was witnessed by emergency medical services or they had a shockable rhythm.

Year in Review
General Medicine Year in Review 2016
By Allan S. Brett, MD, NEJM JW General Medicine Associate Editor
The most important medical topics of 2016, as chosen by the editors of NEJM Journal Watch General Medicine

Richard D. Zane,
MD, FAAEM
Editor-in-Chief
NEJM Journal Watch Emergency Medicine

A perspective on the most important research in the field from the past year:
1. Tissue Plasminogen Activator for Severe Stroke?
2. Guidance for Vaccination, Diagnosis, and Treatment of Influenza in the ED
3. Consider Using TMP-SMX After Draining Uncomplicated Abscesses
4. Sharp Increase in Marijuana-Related ED Visits in Colorado by Nonresidents After Recreational Legalization
5. Increased Admissions for MI/PE after Bariatric Surgery
6. A Can We Do It? Have It

FREE COLLECTION
Guideline Watch 2016
INTERNATIONAL CONFERENCE OF EMERGENCY MEDICINE, ICEM 2018

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Upcoming Events
APRIL
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Publications
Oral Prednisolone in the Treatment of Acute Gout
A Pragmatic, Multicenter, Double-Blind, Randomized Trial

Timothy Hudson Rainer, MD*; Chi Hung Cheng, MD*; Hein J.E.M. Janssens, MD, PhD; Chi Yin Man, MD; Lai Shan Tam, MD; Yu Fai Choi, MD; Wah Hon Yau, MD; Ka Hing Lee, MD; and Colin Alexander Graham, MD

Background: Two recent double-blind, randomized, controlled trials (RCTs) showed that oral steroids and nonsteroidal anti-inflammatory drugs have similar analgesic effectiveness for management of gout, but the trials had small sample sizes and other methodological limitations.

Objective: To compare the effectiveness and safety of oral prednisolone versus oral indomethacin in patients presenting to emergency departments (EDs) with acute gout.

Design: Multicenter, double-blind, randomized equivalence trial. Patients were randomly assigned (1:1 ratio) to receive either indomethacin or prednisolone. (ISRCTN registry number: ISRCTN45724113)

Setting: Four EDs in Hong Kong.

Participants: 416 patients aged 18 years or older.

Measurements: Analgesic effectiveness was defined as changes in pain (at rest or with activity) greater than 13 mm on a 100-mm visual analogue scale. Outcomes were measured during the first 2 hours in the ED and from days 1 to 14.

Results: 376 patients completed the study. Equivalent and clinically significant within-group reductions in mean pain score were observed with indomethacin and prednisolone in the ED (approximately 10 mm [rest] and 20 mm [activity]) and from days 1 to 14 (approximately 25 mm [rest] and 45 mm [activity]). No major adverse events occurred during the study. During the ED phase, patients in the indomethacin group had more minor adverse events than those in the prednisolone group (19% vs. 6%; P < 0.001). During days 1 to 14, 37% of patients in each group had minor adverse events.

Limitation: Diagnosis of gout was usually based on clinical criteria rather than examination of joint fluid.

Conclusion: Oral prednisolone and indomethacin had similar analgesic effectiveness among patients with acute gout. Prednisolone is a safe, effective first-line option for treatment of acute gout.

Primary Funding Source: Health and Health Services Research Grant Committee of the Hong Kong Government.

For author affiliations, see end of text.
This article was published at www.annals.org on 23 February 2016.
* Professor Rainer and Dr. Cheng contributed equally to this work.
Selected Items

   Rainer TH, Cheng CH, Janssens HJ, Man CY, Tam LS, Choi YF, Yau WH, Lee KH, Graham CA.
   PMID: 26903396
   Similar articles

2. Oral prednisolone is more cost-effective than oral indomethacin for treating patients with acute gout-like arthritis.
   Cattermole GN, Man CY, Cheng CH, Graham CA, Rainer TH.
   PMID: 19521293
   Similar articles

3. The effectiveness of a specially designed shoulder chair for closed reduction of acute shoulder dislocation in the emergency department: a randomised control trial.
   Chung JY, Cheng CH, Graham CA, Rainer TH.
   PMID: 23103318
   Similar articles

4. Trauma care systems: a comparison of trauma care in Victoria, Australia, and Hong Kong, China.
   Cheng CH, Graham CA, Gabbe BJ, Yeung JH, Kossmann T, Judson RT, Rainer TH, Cameron PA.
   PMID: 18216542
   Similar articles

5. Organised stroke care must include the emergency department.
   Graham CA, Cheng CH, Rainer TH, Wong KS.
   PMID: 16741168
   Free Article
   Similar articles

   Yu AH, Cheng CH, Yeung JH, Poon WS, Ho HF, Chang A, Rainer TH.
Out-of-Hospital Cardiac Arrest in the Pediatric Population in Hong Kong: A 10-Year Review at a University Hospital.

Law, Alex Kwok-Keung MBChB, NRCSEd; Ng, Man-Ho MBBS(HK), FACC, FHKAM, FHKCSEM, FRCS(4&E); Hon, Kam-Lun E MBBS, MD(CUHK), FAAP, FCCM, FHKAM(Paed), FHKCPaed; Graham, Colin A MD, MPH FRCP FRCS FCEM FHKCEM FHKAM(EM)
Characteristic of a good research question

FINER

- Feasible
- Interesting
- Novel
- Ethical
- Relevant
Thank you

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