



全新網站正式上線! New Website is Officially Launched

楷和醫療在提升醫療服務質素和網站體驗方面不斷努力,現在全新官方網站正式上線!新網站不僅強化了原有的功能,更改善了設計界面和用戶體驗,並加入了多項新功能以提升使用便利性。

Chiron Medical has been continuously striving to enhance the quality of medical services and website experience. We are excited to announce that our new official website is now live! The new site not only strengthens the original functionalities but also improves the design interface and user experience, and adding several new features for greater convenience.



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www.chiron.care



I 訂閱最新楷和通訊 調輸入你的電郵地址

網站界面 Website Interface

- > 用戶體驗:流暢度更高,美感更豐富
 User Experience: Higher fluidity and richer aesthetics
- > 響應式設計:更完善,確保在各種設備的最佳瀏覽體驗 Responsive Design: Improved to ensure the best browsing experience across various devices
- > 使用者界面:更友好,輕鬆找到所需資訊 User-Friendly Interface: Easier to find the information you need

網站功能 Website Features

- > 預約功能:隨時隨地預約服務 (將於4月內推出) Appointment Function: Book services
 - anytime, anywhere
 (Will be launched in April)
- > 尋找醫生按鈕:快速找到所需的醫生 Button of Finding Doctors: Quickly locate the doctor you need
- > 訂閱通訊功能:掌握楷和最新動態 Subscription Feature: Stay updated with the latest news from Chiron

膽囊炎發作痛楚萬分 出現併發症需即處理

急性膽囊炎發作時患者會出現持續的上腹絞痛,伴隨發燒、噁心、作嘔症狀,讓患者疼痛難耐。楷和醫療外科專科夏威醫生分享,發生急性膽囊炎的原因有95%是膽結石導致,雖然急性結石性膽囊炎的死亡率不到一成,但如果惡化至嚴重併發症如化膿、壞死甚至出現敗血症,死亡率可高達6成,因此務必謹慎以對。處理膽囊炎,會先考慮較簡單和徹底的微創膽囊手術,如不適合做手術時則考慮引流。

夏威醫生 Dr. SHARR Wei William

外科專科 Specialist in General Surgery

> 楷和醫療 Chiron Medical

膽囊炎持續未治療症狀會加重

夏威醫生表示,女性膽結石風險是男性的2倍!年齡、女性、懷孕、糖尿病、肥胖、肝硬化、高膽色素血症、節食人士較易生膽石,繼而增加急性結石性膽囊炎風險。此外,膽汁過於濃稠、流動不順暢,或膽囊受感染與腫瘤也可能導致膽囊發炎(非結石性膽囊炎),患者以男性稍多。急性膽囊發炎嚴重時有機會導致膽囊壞死、穿孔及腹膜炎,有機會危及生命,必須緊急處理。

內視鏡超聲波膽囊引流手術解決膽囊炎



夏威醫生指出,一旦出現膽石的併發症例如膽囊炎、膽管炎或膽源性胰臟炎,便應考慮根治性治療,盡早以腹腔鏡微創方式切除膽囊。手術時間約一小時,大部分病人可翌日便能出院,亦可安排即日出院。但若患者膽囊壁附近黏連嚴重,便可能要採用傳統開放式手術,恢復時間較長。如果病人年邁,或本身患有癌症或嚴重內科疾病而未能承受手術,可用膽囊引流作為保守的治療方式。如經皮體外膽囊引流術,用細針經病人皮膚穿刺進入肝臟內,再到膽囊,然後裝置一條引流管,把膽汁從肝臟引流出體外。近年新興的超聲波內視鏡膽囊引流手術是將內視鏡伸進十二指腸,經超聲波引導用儀器刺穿十二指腸及膽囊,放置一個冬菇形金屬支架,為膽囊與十二指腸之間打開一條新通道引流膽汁。手術成功率高,相對

傳統的經皮體外膽囊引流術亦較少痛楚、較低機會有相關的併發症和膽囊炎復發,亦可省卻病人腹部外掛喉管的不便,是急性膽囊炎患者的又一佳音。

Cholecystitis causes excruciating pain; complications require immediate treatment



During an attack of acute cholecystitis, patients experience persistent upper abdominal cramping pain, accompanied by fever, nausea, and vomiting, causing significant discomfort. Dr. SHARR Wei William, a specialist in General Surgery, shares that 95% of acute cholecystitis cases are caused by gallstones. Although the mortality rate for acute calculous cholecystitis is less than 10%, if it worsens to severe complications such as pus formation, necrosis, or even sepsis, the mortality rate can rise to as high as 60%. Therefore, careful attention is crucial. When managing cholecystitis, simpler and more definitive minimally invasive gallbladder surgery is usually considered first; if surgery is not suitable, drainage may be an option.

Symptoms of Untreated Cholecystitis Worsen

Dr Sharr indicates that the risk of gallstones is twice as high in women compared to men! Factors such as age, being female, pregnancy, diabetes, obesity, liver cirrhosis, hyperbilirubinemia, and dieting can increase the likelihood of gallstone formation, thereby raising the risk of acute calculous cholecystitis. Additionally, thick bile, poor bile flow, or infection and tumors in the gallbladder can also lead to inflammation (non-calculous cholecystitis), which is slightly more common in men. Severe acute cholecystitis can lead to gallbladder necrosis, perforation, and peritonitis, which can be life-threatening and requires urgent treatment.

EUS-guided Gallbladder Drainage Surgery for Cholecystitis

Dr Sharr points out that when complications from gallstones occur, such as cholecystitis, cholangitis, or gallstone pancreatitis, radical treatment should be considered, and the gallbladder should be removed as early as possible using laparoscopic minimally invasive surgery. The procedure typically takes about one hour, and most patients can be discharged the next day, with same-day discharge also feasible. However, if the patient has severe adhesions near the gallbladder wall, traditional open surgery may be required, which has a longer recovery time.

For elderly patients or those with cancer or serious internal diseases who cannot tolerate surgery, gallbladder drainage can serve as a conservative treatment option. For instance, percutaneous external gallbladder drainage involves using a thin needle to puncture through the patient's skin into the liver and then into the gallbladder, followed by placing a drainage tube to drain bile from the liver externally.

Recently, the emerging technique of endoscopic ultrasound gallbladder drainage involves inserting an endoscope into the duodenum. Guided by ultrasound, instruments puncture through the duodenum and gallbladder to place a mushroom-shaped metal stent, creating a new channel for bile drainage between the gallbladder and duodenum. This surgical method has a high success rate and is associated with less pain, a lower risk of related complications and recurrence of cholecystitis compared to traditional percutaneous external gallbladder drainage. It also spares patients the inconvenience of abdominal drainage tubes, making it a promising option for patients with acute cholecystitis.



護士的話 -同理心是苦其所苦,急其所急

In Her Own Words -Empathy is about sharing in others' suffering and urgency

同理心是護理人員不可或缺的特質,它是我們每天上班的動力泉源。同理心可以是 簡單的擁抱和拍拍肩膀,言語上給予鼓勵,行動上努力支持,希望能在接受治療的 過程中緩解心靈的疼痛。

同理心的精髓在於我們要做到「苦其所苦,急其所急」,這是醫生教我的,也成為我的人生 座右銘。很多時候,我們剛接觸的患者除了常年忍受身體神經受壓的苦楚,精神上也因病情 反覆而飽受折磨。當我們明白了他們的痛苦,就會理解他們內心的焦急,繼而拼盡全力、爭分奪 秒地去尋找解決方法。當我們成功幫助病人之後,我們也會獲得非凡的快樂-「樂其所樂」。

我曾經遇到一個脊椎長了腫瘤的老婆婆,需要進行手術,而她的女兒即將在數天後回美國。我能感受到兩母女互相放不下、想要陪伴對方的迫切心情。因此,在我能力範圍內,不惜用一切方法去幫婆婆致電不同的醫院做協調,最終手術得以在女兒回美國前完成,還可以術後多陪婆婆幾天。這個過程中見到兩母女幸福滿足的笑容令我獲得了滿滿的使命感,相信就是同理心的力量。

>- 摘自診所助護Jennie

Empathy is an indispensable trait for nursing professionals; it serves as our source of motivation every day at work. Empathy can manifest as simple gestures like a hug or a pat on the shoulder, offering verbal encouragement, or providing support through actions, all aimed at alleviating the emotional pain experienced during the journey of treatment.

The essence of empathy lies in our ability to "feel their pain and urgency," a lesson taught to me by a doctor and now a guiding principle in my life. Often, the patients we first encounter endure not only the physical pain of nerve compression but also the mental anguish caused by the recurring nature of their illness. When we understand their suffering, we also grasp their inner anxiety, which drives us to seek solutions with all our might, seizing every moment. When we successfully help a patient, we experience extraordinary joy, "sharing in their happiness."

I once met an elderly woman with a tumor on her spine who needed surgery, and her daughter was about to return to the U.S. in a few days. I could sense the urgency of their mutual desire to be together. Therefore, within my capabilities, I did everything I could to coordinate with different hospitals for the patient. Ultimately, the surgery was completed before her daughter returned to the U.S., and allowed them to spend a few extra days together afterward. Seeing the happy and satisfied smiles of both mother and daughter gave me a profound sense of mission, which I believe is the power of empathy.

>- By Jennie, Clinic Assistant

我們在雙數月設「護士的話」欄目,記錄來自醫療團隊的經驗分享和觀察,透過講述病人與醫護團隊之間的互動故事,讓大家更深入了解診所的服務理念,也藉此感受到我們的關懷和努力。

We will introduce a column, "In her own words", every 2 months featuring experience sharing and observations from our medical team. By telling stories of interactions between patients and the healthcare team, we aim to provide deeper insights into our clinic's service philosophy, convey our care and dedication.









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