

**FEBRUARY ISSUE 2021**

We are CMEL! Welcome to the forty-eighth issue of the CMEL Newsletter! This publication aims to update you on the latest news and information in the biomedical world. We will also share information about upcoming events, so stay tuned! Find out more about [CMEL](#). We also have a [Twitter account](#) and a [Facebook page](#).

Top story in this newsletter**Recent Cases:****Doctor and patient acquitted of charges arising from the gifting of a watch in Hong Kong**

A public hospital doctor who accepted a watch as a gift from a patient was charged with "public servant accepting an advantage" and has recently been acquitted. The patient, who was charged with "offering an advantage to a public servant", has also been acquitted. The Magistrate held that the defendants had a reasonable excuse and that the prosecution failed to prove that the defendants had the requisite intention. The Magistrate observed that the doctor, who accepted the watch without seeking approval from her department, had inadequate knowledge of the Hospital Authority's guidelines. The Magistrate added that the case reflected an issue of inadequate training of healthcare staff. Read more [here](#) (article in Chinese only).

一名公立醫院醫生因收下病人送贈的手錶而被控「公職人員接受利益」罪，而涉案病人則被控「向公職人員提供利益」罪，近日兩人被判無罪。裁判官指涉案醫生及病人有合理辯解，並認為控方未能證明涉案醫生及病人有上述控罪的相關意圖。涉案醫生在未尋求部門批准的情況下收下手錶，裁判官指涉案醫生對醫管局的守則認知不足，裁判官並指從本案可見醫護人員培訓不足。[按此](#)閱讀更多。

Runaway COVID-19 patient sentenced to four months in jail in Hong Kong

A COVID-19 patient who escaped from a Hong Kong hospital has been sentenced to 4 months' imprisonment upon pleading guilty to a charge of exposing others to the risk of infection contrary to the Prevention and Control of Disease Regulation (Cap. 599A). Read more [here](#).

一名 2019 冠狀病毒病患者擅自離開一間香港醫院，他被控違反第 599A 章《預防及控制疾病規例》「任何人不得使他人蒙受感染的危險」的規定，他認罪後被判入獄 4 個月，[按此](#)閱讀更多。

News:**Controversy over proposed new pathway for non-locally trained doctors to practise in Hong Kong**

The government plans to introduce the Medical Registration (Amendment) Bill to create a new pathway in order to allow more non-locally trained doctors to practise in Hong Kong, hoping to alleviate the shortfall of doctors in the public sector. The newly proposed entrance threshold for non-locally trained doctors to practise in Hong Kong has given rise to much discussion. Read more about the proposal [here](#) (item (2)).

香港政府將提交《醫生註冊 (修訂) 條例草案》，以加入一條新途徑讓更多非本地培訓醫生來港執業，並希望新安排能紓緩公營醫療系統醫生人手不足的問題，政府所建議的醫生來港執業的新門檻引起了廣泛討論。[按此](#)了解政府的建議 (項目(二))。



Online book talk with the editor and contributing authors

Book: ["Covid-19 in Asia: Law and Policy Contexts"](#) (Oxford University Press, 2020)

One of the chapters, "**Hong Kong: The Healthcare Professions and the Outbreak**", was co-authored by our Associate Prof [Calvin WL Ho](#) & Assistant Prof [Daisy Cheung](#).

Speakers include:

1. The Editor: Prof Victor V. Ramraj (University of Victoria);
2. Chair: our Associate Prof [Calvin WL Ho](#) (CMEL HKU) (contributing author);
3. Discussants:
 - Prof [Vivian Lin](#) (HKU);
 - Assistant Prof Matthew Little (University of Victoria) (contributing author);
 - Our Assistant Prof [Daisy Cheung](#) (CMEL HKU) (contributing author).

Date & Time: 17 Mar 2021 (Wed) | 11:00 am – 12:00 noon (GMT +8)

Registration: click [here](#)

[網上書籍講座]「與編輯及合著者對談」

書籍: [《亞洲的 2019 冠狀病毒病疫症: 法律和政策環境》](#) (牛津大學出版社, 2020 年)

該書其中一章《香港: 醫療專業與疫情爆發》由本中心[何維倫](#)副教授及[張天目](#)助理教授合撰。

講座講者包括:

1. 該書編輯: Victor V. Ramraj 教授 (維多利亞大學)
2. 主持人: 本中心[何維倫](#)副教授 (香港大學) (合著者)
3. 討論者:
 - [林光汶](#)教授 (香港大學)
 - [Matthew Little](#) 助理教授 (維多利亞大學) (合著者)
 - 本中心[張天目](#)助理教授 (香港大學) (合著者)

日期及時間: 2021 年 3 月 17 日 (三) 上午 11:00 – 中午 12:00 (香港時間)

報名: 請[按此](#)

Publication:



Recent publication by CMEL member

[Journal article]

1. "**Immunity certification for COVID-19: ethical considerations**" [Open Access]

By Teck Chuan Voo, Andreas A Reis, Beatriz Thomé, [Calvin WL Ho](#), Clarence C Tam, Cassandra Kelly-Cirino, Ezekiel Emanuel, Juan P Beca, Katherine Littler, Maxwell J Smith, Michael Parker, Nancy Kass, Nina Gobat, Ruipeng Lei, Ross Upshur, Samia Hurst & Sody Munsaka

In *Bulletin of the World Health Organization* (2021) 99(2): 155–161.

<http://dx.doi.org/10.2471/BLT.20.280701>

For easy reference, the official abstract is copied below:

"Restrictive measures imposed because of the coronavirus disease 2019

(COVID-19) pandemic have resulted in severe social, economic and health effects. Some countries have considered the use of immunity certification as a strategy to relax these measures for people who have recovered from the infection by issuing these individuals a document, commonly called an immunity passport. This document certifies them as having protective immunity against severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2), the virus that causes COVID-19. The World Health Organization has advised against the implementation of immunity certification at present because of uncertainty about whether long-term immunity truly exists for those who have recovered from COVID-19 and concerns over the reliability of the proposed serological test method for determining immunity. Immunity certification can only be considered if scientific thresholds for assuring immunity are met, whether based on antibodies or other criteria. However, even if immunity certification became well supported by science, it has many ethical issues in terms of different restrictions on individual liberties and its implementation process. We examine the main considerations for the ethical acceptability of immunity certification to exempt individuals from restrictive measures during the COVID-19 pandemic. As well as needing to meet robust scientific criteria, the ethical acceptability of immunity certification depends on its uses and policy objectives and the measures in place to reduce potential harms, and prevent disproportionate burdens on non-certified individuals and violation of individual liberties and rights."

[Extracted from Teck Chuan Voo, Andreas A Reis, Beatriz Thomé, [Calvin WL Ho](#), Clarence C Tam, Cassandra Kelly-Cirino, Ezekiel Emanuel, Juan P Beca, Katherine Littler, Maxwell J Smith, Michael Parker, Nancy Kass, Nina Gobat, Ruipeng Lei, Ross Upshur, Samia Hurst & Sody Munsaka. Immunity certification for COVID-19: ethical considerations. Bull World Health Organ. 2021; 99(2). 10.2471/BLT.20.280701. Licence: [Creative Commons BY 3.0 IGO](#)]

[期刊論文]

1. 《新冠肺炎免疫認證: 倫理考量》[免費閱覽]

作者: Teck Chuan Voo, Andreas A Reis, Beatriz Thomé, [Calvin WL Ho](#) (何維倫副教授), Clarence C Tam, Cassandra Kelly-Cirino, Ezekiel Emanuel, Juan P Beca, Katherine Littler, Maxwell J Smith, Michael Parker, Nancy Kass, Nina Gobat, Ruipeng Lei, Ross Upshur, Samia Hurst 及 Sody Munsaka

刊登於《世界衛生組織簡報》(2021) 99(2): 155–161
<http://dx.doi.org/10.2471/BLT.20.280701>

為方便參考，從上述連結摘錄官方摘要如下：

「因新型冠狀病毒肺炎（新冠肺炎）大流行而強制實施的限制性措施已造成嚴重的社會、經濟和健康影響。有些國家已考慮採用免疫認證策略來放鬆這些限制性措施，即，向感染後康復的人員發放一份通常被稱為免疫通行證的證件。該證件證明此類人員對引起新冠肺炎的病毒——嚴重急性呼吸綜合症冠狀病毒-2 (SARS-CoV-2)——具有保護性免疫力。世界衛生組織建議目前不要實施免疫認證，因為尚不確定感染新冠肺炎後康復的人員是否切實存在長期免疫力，且對計劃用於測定免疫力的血清學檢測方法的可靠性尚存疑

慮。僅當達到確保免疫的科學閾值（無論是基於抗體還是其他標準）時，才可以考慮採取免疫認證。然而，即使免疫認證得到了科學的充分支持，也仍存在許多倫理問題，包括對個人自由的不同限制及其實施過程。對於在新冠肺炎大流行期間准許某些人員無需遵守限制性措施的免疫認證，我們研究了這種認證在倫理上予以接受的主要考慮因素。免疫認證不僅需要滿足嚴格的科學標準，而且在倫理上是否予以接受還取決於免疫認證的用法、實施對象以及是否採取措施以降低對未獲得認證的人員造成的潛在傷害，防止對其產生過重的壓力以及違反個人自由和權利方面的規定。」

[摘自 Teck Chuan Voo, Andreas A Reis, Beatriz Thomé, [Calvin WL Ho](#), Clarence C Tam, Cassandra Kelly-Cirino, Ezekiel Emanuel, Juan P Beca, Katherine Littler, Maxwell J Smith, Michael Parker, Nancy Kass, Nina Gobat, Ruyong Lei, Ross Upshur, Samia Hurst & Sody Munsaka. 《新冠肺炎免疫認證：倫理考量》. 《世界衛生組織簡報》. 2021; 99(2). 10.2471/BLT.20.280701. 許可: [共享創意 BY 3.0 IGO](#)]
