



東風

Rotary
Club of
Hong Kong Island East
TUNG FENG



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24 Sep 2014

LAST WEEK'S PROCEEDINGS - 17 September 2014



DGN Eric Chin chaired the meeting and rang the bell to kick off the meeting at 1:05 PM. DGN extended a warm welcome to the visiting Rotarians for this meeting, who were PDG Anthony Hung from Rotary Club of Tai Po and PP WH Fok from Rotary Club of Peninsula Sunrise. PP Henry Chan was also warmly welcomed back, as he joined the meeting after a recent trip.

and sometimes overlooked issue relevant to all men in their 50s and above.



After the presentation, Rtn. Chris Kyme represented the club to thank the speaker in our usual manner.

The meeting adjourned at 2:05PM after group photo was taken.

The chairman then invited the birthday boy, being PP John Luk who invited PP Uncle John to sing the happy birthday song for him with Chair DGN Eric and President Norman Lee who also presented the birthday gift from the club. PP John Luk made his birthday wish and did the cake cutting after the birthday song was sang.



Acting SAA PE William then announced the red box contribution which was a healthy HK\$1,300.

It was then time for DGN Eric to invite Dr Raymond Chu to the rostrum to introduce this week's guest speaker to the rostrum, who was Rtn Dr Y.C Ho, and his topic for this was the Prostate Gland and its problems. An interesting



THE ROTARY CLUB OF HONG KONG ISLAND EAST

香港東區扶輪社週報

Club 16340 District 3450 Chartered on 06 April, 1954 by Charter President

PDG (Uncle) John Yuen

ANNOUNCEMENTS

1. The ECO park vocational visit and seafood dinner fellowship is scheduled on Sept. 27 afternoon and onward. Official notice will be sent out shortly.
2. Choi Jun joint school swimming gala is scheduled on Oct. 25 morning in Ma On Shan swimming pool. Official notice will be sent out in early Oct.
3. District Peace Day is scheduled on Sept. 21 1pm – 4pm. Venue: 9 Justice Drive, Admiralty, Asia Society HK Center. All Rotarians and families are welcome to join.
4. District badminton tournament is scheduled on Oct. 18. Please read the official email from district.
5. DG election nomination committee is accepting nomination for committee members. Our club can select a PP and a non-PP to be the candidates to represent area 3.
6. Rotaract Club of Hong Kong Island East new board of directors installation and new Rotaract member induction will be held on Nov 1 2014 2- 4 pm. Venue to be confirmed. The new board members are composed of young leaders from France, Germany, South Korea, Australia, USA, Switzerland and Mainland China and Hong Kong. The President is Fiona Chin who is the elder daughter of DGN Eric.
7. Next week's program is our First Club Assembly which PE William will host and report on the activities/services project in our first quarter.
8. Members of Rotary Club of Hong Kong Harbour will also visit us in our next club meeting on Sept. 24, 2014.



THE LAST LAUGH

A woman finds Aladdin's magic lamp.

She starts rubbing it and a Genie comes out as usual.

The woman looks at the Genie and asks him to grant her the following wishes:

- I want my husband to have eyes only for me
- I want to be the only one in his life
- I want that when he gets up in the morning I'm the first thing he grabs and takes me everywhere he goes."

The Genie turned THE LADY into a iPhone 6



OFFICERS

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Secretary
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Ex-officio
Jonathan Lamport

Club Advisors
Peter Hall
Y. K. Cheng
Henry Chan
Hubert Chan
Eric Chin

Club postal address : P.O.Box 47064, Morrison Hill Post Office, Hong Kong
Meeting Venue : Regal HK Hotel, Causeway Bay, Hong Kong
Meeting Schedules : Every Wed. 1st week at 7:30 pm. Other weeks at 12:30 pm
Website : <http://hkie.rotary3450.org/>
Facebook : <https://www.facebook.com/RotaryClubHKIslandEast>

About Dr. Y.C. HO



Assistant Governor (Area 7) Dr. YC Ho is married and has three children who are now all in their 20s. He graduated from HKU with a primary medical degree in 1982 and began surgical training in Queen Mary Hospital after graduating. In 1987 he Attained Fellowships in the Royal College of Surgeons of Edinburgh and Royal College of Surgeons and Physicians of Glasgow.

He achieved Foundation Fellow of the HK Academy of Medicine in 1990, Foundation Fellow of the Urological Society of HK in 1990 and received Urology Specialist training from 1988 in, respectively, UCSF at San Francisco, Stanford U, Mayo Clinic and Syracuse U Medical School.

He became the Urologist Chief of service in HK U Surgical Unit at the Queen Mary Hospital in 1989 and started as Chief Resident Doctor of HK Baptist Hospital

from 1990 to 1992. Since then and up now he has operated his own private clinic.

Dr Ho is also Honorary Consultant in Surgery and Urology in Union Hospital to now, which he was also at Baptist Hospital during the 90's.

Other achievements and contributions include opening the first sole privately owned elderly home in Jordan providing residence for 65 elderly persons.

In 2001 also opened the second sole-owned elderly home in Sai Wan Ho with 90 beds capacity. In 2009 opened the third one in Western District holding 100 beds capacity.

His Rotary history is as follows:

- Since 1994 joined Rotary Club of Peninsula South.
- In 2010-11 VP and Director of Publicity of the club
- 2011-12. PE and Club Service Director.
- 2012-13. Club President of RC of Pen South
- 2013-14, DAG of area 7, and Trainer of level 1 and 2 of Rotary Leadership Institute
- 2014-15, presently AG of area 7 and Sec of District TRF Committee
- Paul Harris Society member and Major Donor Level one.

OUT & ABOUT

The members of Rotoract Club of Hong Kong Island East were busy during Mid Autumn Festival spreading goodwill, entertainment and mooncakes to make a happy time for the elderly at the Good Neighbour Network(Kwong Fuk) United Christian Nethersole Community Health Service, Tai Po, New Territories on September 7th. You can see from some of the happy faces how much joy was delivered on the day, summed up here with a comment from club President Fiona Chin: "It was thrilling to gather with friends and accomplish our first community service in the Rotary year 2014-15! It was a real learning experience to plan ahead for the event and bring joy to these people, and the effort was all worth it as we saw the heartfelt grins on their faces."



SPOTLIGHT ON: PROSTATE GLAND AND ITS PROBLEMS



THE PROSTATE GLAND

1: Location:-

The prostate is located beneath the urinary bladder, behind the pubic bone with the rectum behind it. The urine passage (called urethra) drains through the centre of the prostate gland.

2: Function:-

The only known function of the prostate is to produce seminal fluid. Other functions such as to produce prostatoglandin and its role in that are speculative.

3: Benign Prostate Hypertrophy (BPH)

a. The term means benign prostate enlargement. It is mainly a result of long-termed male hormone stimulation under genetic influence. Symptoms of urinary obstruction usually start around or after 50 years of age. When enlarged the gland impinges the central urinary passage or indents into the base of the urinary bladder.

b. Symptoms mainly include obstruction, poor urine flow, frequent voiding, inadequate urine clearance, night urination and even failure to void urine resulting in over an distended bladder.

c. Diagnosis depends on a rectal examination to the back of the prostate, and/or an ultrasound examination of the prostate. Ultrasound has to be conducted by putting the probe into the rectum to get a close picture of the prostate rather than the usual method through the abdomen in the front which is too far away from the gland otherwise.

Also blood for Prostate Surface Antigen (PSA) is needed to check the likelihood of having cancer inside the prostate. Others like urine flow rate check may be needed to quantify the rate of urine flow under prostate enlargement.

d. Medical treatments include the use of Proscar to decrease the rate of prostate growth; a-blocker to lessen the sphincter muscles around the urethra and medicine to improve bladder muscle contraction force.

e. Surgery has to be done if the problem of urine blockage disturbs the patient to a severe extent; when by USG prostate size measures hugely; or urine flow rate is so poor that acute retention is imminent. But the decision to operate has to consider the whole clinical picture. There is no absolute correlation between the severity of urine obstruction with the

actual size of the prostate gland.

f. The operation, named TURP is an endoscopic procedure that involves the use of an endoscope introduced via the urethra under anesthesia. The main central enlarged portion will be removed to make way for voiding. But by TURP there will remain the prostate capsule without a total removal of the whole gland.

4. PROSTATE CANCER

a. Probable causes include smoking, a Western diet, or environmental pollution. But BPH is NOT a causative factor. Infection of the prostate is not.

b. Its peak age occurs at and after middle age. It occurs at the similar peak age as in BPH.

c. There is no discrete symptom specific to prostate cancer. Hence urinary obstruction may also be due to prostate cancer. Pain is never its early symptom.

d. Diagnosis depends on an elevated PSA level in blood, and definite diagnosis relies on Prostate biopsy done via anus from the back under USG guidance.

e. Treatments include the use of a major operation to remove the prostate gland totally in case of localized cancer, and the combined use of anti-androgen to suppress cancer cells. To remove both testicles by surgery is also one way of hormonal augmentation. Radiotherapy and chemotherapy are reserved to inoperative cases with or without spread of disease.

5. PROSTATE and SEX FUNCTION

a. Erection involves penile erectile bodies engorgement with sexual stimulation under the effect of libido. It does not involve the prostate gland. Hence BPH or Prostate Cancer does not affect erectile function although either diseases may occur at similar ages.

b. Ejaculation depends on nerve mediated series of reflex contraction responses involving successively sperm ducts, prostate gland, and urethra muscles. Prostate is only a part of the process but not playing the central integral role.

CONCLUSION

Prostate enlargement or cancer disease is common in males after middle age, but most of them are not preventable, unrelated to sexual activities and usually amenable or treatable by medical treatments.

