



Hong Kong Obesity Society

香港肥胖學會

REDEFINING OBESITY

New Perspectives, New Solutions



Nov 9
2024

6th Annual Scientific
Symposium



Patients
ty have
rate with
eight

Weight loss
2cm
ST
CUMFERENCE
DUCTIONTM

9 out of 10 PATIENTS ACHIEVED WEIGHT LOSS^{2*}

1 out of 3 PATIENTS LOST >10%^{2†}

8.2cm WAIST CIRCUMFERENCE REDUCTION^{2‡}

Saxenda®, a GLP-1 analogue indicated for weight management as an adjunct to diet and exercise¹

5358 patients included in 4 SCALE Clinical Trials[†]

Long Term Efficacy and Safety validated through 3 year data^{*}

- ✓ FDA Approved⁴
- ✓ EMA Approved⁵
- ✓ DOH Approved⁶

† Versus 10% of patients in placebo group.



Keywords: *Angiography*; *angioplasty*; *coronary artery disease*; *hypertension*; *myocardial infarction*; *stroke*; *vascular disease*; *vascular surgery*. **Abstract:** Vascular disease is defined as an arterial or venous disorder, and is characterized by the presence of atherosclerosis in the arterial system. Vascular disease is a leading cause of morbidity and mortality, and is a major risk factor for cardiovascular disease. The most common types of vascular disease are coronary artery disease (CAD), peripheral artery disease (PAD), and aortic aneurysm. CAD is the most common type of vascular disease, and is characterized by the narrowing of the coronary arteries due to the buildup of plaque. PAD is the second most common type of vascular disease, and is characterized by the narrowing of the peripheral arteries. Aortic aneurysm is a condition in which the aorta, the main blood vessel in the body, becomes enlarged and weak, and is at risk of rupturing. Vascular disease is often diagnosed through a variety of tests, including angiography, ultrasound, and CT scans. Angiography is a procedure in which a contrast dye is injected into the arteries, and X-rays are taken to visualize the blood flow. Ultrasound is a non-invasive test that uses sound waves to create images of the blood vessels. CT scans are a type of X-ray that can provide detailed images of the blood vessels. Vascular disease is often treated with a combination of lifestyle changes, medications, and surgery. Lifestyle changes, such as quitting smoking, exercising regularly, and eating a healthy diet, can help to reduce the risk of vascular disease. Medications, such as statins, beta-blockers, and aspirin, can help to lower cholesterol, blood pressure, and reduce the risk of blood clots. Surgery, such as angioplasty and bypass surgery, can be used to treat severe cases of vascular disease. Angioplasty is a procedure in which a catheter is inserted into the blocked artery, and a small balloon is inflated to widen the artery. Bypass surgery is a procedure in which a new blood vessel is created to bypass the blocked artery. Vascular disease is a serious condition that can lead to heart disease, stroke, and other complications. It is important to be aware of the signs and symptoms of vascular disease, and to seek medical attention if you experience any of these symptoms. Early diagnosis and treatment can help to improve outcomes and reduce the risk of complications.



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Saxenda 秀身達
Liraglutide injection

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NOW APPROVED FOR WEIGHT MANAGEMENT¹

Help your patients experience
a significant weight loss^{1,2}



Novel mechanism of action^{1,2}:

The first-and-only treatment activating both GIP and GLP-1 receptors to target the pathophysiology of obesity.



Powerful weight loss^{1,2}:

People taking Mounjaro[®] significantly reduced their body weight by up to an average of 22.5% (23.6 kg).^{1,5}



Cardiometabolic improvements³:

As demonstrated across key parameters, including blood pressure, waist circumference, triglycerides, HDL cholesterol, and LDL cholesterol.^{11,4}

WEIGHT MANAGEMENT

*Hypothetical patient image.

¹ In SURMOUNT-1 efficacy analysis, the weight loss of Mounjaro[®] was superior and clinically meaningful compared to placebo ($p < 0.001$). The mean change in weight at end of treatment (week 72) was: -16.0% (a reduction of 16.1 kg) with Mounjaro[®] 5-mg dose; -21.4% (a reduction of 22.2 kg) with Mounjaro[®] 10-mg dose; -22.5% (a reduction of 23.6 kg) with Mounjaro[®] 15-mg dose and the mean change with placebo was: -2.4% (a reduction of 2.4 kg), and included a reduced-calorie diet and increased physical activity.^{1,2}

² Individual results may vary.

³ Efficacy analysis, MMRM analysis, mITT population (efficacy analysis set).^{1,3}

⁴ The efficacy estimate for individual doses was not adjusted for multiplicity, with the exception of waist circumference 10 mg and 15 mg.³

⁵ Mounjaro[®] is not indicated to reduce cardiometabolic parameters. In SURMOUNT-1 trial, reductions in blood pressure, waist circumference, triglycerides, HDL cholesterol, and LDL cholesterol were secondary endpoints.^{1,3}

Mounjaro[®] was evaluated in a phase 3 trial for 72 weeks. SURMOUNT-1 included 2539 adults with a BMI of $\geq 30 \text{ kg/m}^2$ or a BMI of $\geq 27 \text{ kg/m}^2$ and at least 1 weight-related complication, excluding type 2 diabetes. Participants in all arms, including placebo, received instructions for a reduced-calorie diet and increased physical activity. Included were counseling by a dietitian or qualified healthcare professional, a deficit of 500 calories per day, and at least 150 minutes of physical activity per week. Coprimary endpoints (10 mg and/or 15 mg): percentage change in weight from baseline at week 72; percentage of population with weight reduction of $\geq 5\%$ at week 72. Key secondary endpoints: change from baseline to week 72 in systolic blood pressure, fasting insulin, and lipid levels (triglycerides, HDL cholesterol, non-HDL cholesterol) (all doses combined); percentage of population with weight reduction of $\geq 10\%$, $\geq 15\%$, and $\geq 20\%$ at week 72 (10 mg and/or 15 mg); change from baseline to week 72 in waist circumference (10 mg and/or 15 mg); physical function score on the 36-item Short-Form Health Survey (SF-36), version 2, acute form (10 mg and 15 mg); percentage change in body weight from baseline and percentage of population with weight reduction of $\geq 5\%$ at week 72 (5 mg). Mounjaro[®] and placebo were administered QW subcutaneously as an adjunct to a reduced-calorie diet and increased physical activity.^{1,3}

BMI=body mass index; GIP=glucose-dependent insulinotropic polypeptide; GLP-1=glucagon-like peptide-1; HDL=high-density lipoprotein; LDL=low-density lipoprotein; mITT=modified intent-to-treat; MMRM=mixed model for repeated measures; QW=once weekly.

INDICATION¹

Mounjaro[®] is indicated:

- For the treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise:
- as monotherapy when metformin is considered inappropriate due to intolerance or contraindications
- in addition to other medicinal products for the treatment of diabetes.

- For weight management, including weight loss and weight maintenance, as an adjunct to a reduced-calorie diet and increased physical activity in adults with an initial Body Mass Index (BMI) of $\geq 30 \text{ kg/m}^2$ (obesity) or $\geq 27 \text{ kg/m}^2$ (overweight) in the presence of at least one weight-related comorbid condition (e.g., hypertension, dyslipidaemia, obstructive sleep apnoea, cardiovascular disease, prediabetes, or type 2 diabetes mellitus).

SAFETY PROFILE^{1,3-9}

Type 2 diabetes mellitus:

In 7 completed phase 3 studies, 5179 patients were exposed to Mounjaro[®] alone or in combination with other glucose lowering medicinal products. The most frequently reported adverse reactions were gastrointestinal disorders, including nausea (very common), diarrhoea (very common), constipation (common), and vomiting (common). In general, these reactions were mostly mild or moderate in severity and occurred more often during dose escalation and decreased over time.

Weight management:

In 2 completed phase 3 studies, 2579 patients were exposed to Mounjaro[®] alone or in combination with other glucose lowering medicinal products. The most frequently reported adverse reactions were gastrointestinal disorders, including nausea (very common), diarrhoea (very common), constipation (common), and vomiting (very common). In general, these reactions were mostly mild or moderate in severity and occurred more often during dose escalation and decreased over time.

References: 1. Mounjaro[®] Hong Kong Prescribing Information. 2. Willard FS, et al. JCI insight. 2020;5(7):e140532. 3. Jastreboff AM, et al. N Engl J Med. 2022;387(3):205-216. 4. Garvey WT, et al. Lancet. 2023;402(10402):613-626. 5. Fries JP, et al. N Engl J Med. 2021 Aug 5;385(6):503-515. 6. Rosenstock J, et al. Lancet. 2021 Jul 10;398(10295):143-155. 7. Ludvik B, et al. Lancet. 2021 Aug 14;398(10303):583-598. 8. Del Prato S, et al. Lancet. 2021 Nov 13;398(10313):1811-1826. 9. Dehli D, et al. JAMA. 2022 Feb 8;327(6):534-545.

Scan to Access the
Full Prescribing
Information of Mounjaro[®]



SCIENTIFIC PROGRAMME

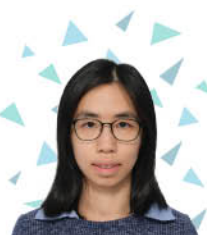
Time	Topic	Speaker
12:00 - 12:30	Registration	
12:30 - 13:15	Lunch Symposium: Role of GLP1-RAs in obesity management – Current and future perspective	Dr Julie Ann Louise LOVSHIN
13:15 - 13:35	Booth Visit	
13:35 - 13:45	Opening Remarks Guest of Honor:	Dr Tellus Man Yuk NG Dr Rita Ka Wai HO
13:45 - 14:30	Plenary Lecture: Redefining obesity beyond BMI: Updates on latest definition, diagnosis & pharmacotherapy	Dr Samantha HOCKING
14:30 - 14:50	Panel Discussion / Round Table Discussion on Obesity Beyond BMI	
14:50 - 15:05	Tea Break	
15:05 - 15:30	Multidisciplinary Session I: Obesity Surgery - The theory behind & how it works	Prof Chih Kun HUANG
15:30 - 15:35	Q&A	
15:35 - 16:00	Multidisciplinary Session II: Defining Childhood Obesity	Dr Connie Lai Ling HUI
16:00 - 16:05	Q&A	
16:05 - 16:20	Tea Break	
16:20 - 16:45	Multidisciplinary Session III: MASLD: A risk enhancer in CKM syndrome?	Dr Paul Chi Ho LEE
16:45 - 16:50	Q&A	
16:50 - 16:55	Closing Remarks	Dr Patrick Man Pan CHAN

ORGANIZING COMMITTEE

Organizing committee members arranged alphabetically according to surname



Dr Patrick Man Pan CHAN
HKOS President-elect
Specialist in General Surgery



Dr Wendy Wing Man CHAN
Specialist in Endocrinology,
Diabetes & Metabolism



Dr Johnny Yau Cheung CHANG
Specialist in Endocrinology,
Diabetes & Metabolism



Dr Tellus Man Yuk NG
HKOS President
Specialist in Endocrinology,
Diabetes & Metabolism



Dr Sarah Wing Yiu POON
Specialist in Paediatrics



Dr Queenie Wing Shan SEE
Honorary Secretary
Specialist in General Paediatrics & Paediatric
Endocrinology



Dr Rain Choi Kwan SO
Specialist in General Surgery



Dr Catherine Pui Ka SZE
Vice-president
Specialist in Family Medicine



Dr Terence Chi Chun TAM
Honorary Treasurer
Specialist in Respiratory Medicine



Dr Joanna Yuet Ling TUNG
Vice-president
Specialist in Paediatric Endocrinology



Dr Tsun Miu TSUI
Specialist in General Surgery



Dr Desmond Yat Hin YAP
Specialist in Nephrology



Dr Michele Mae Ann YUEN
Specialist in Endocrinology,
Diabetes & Metabolism

OFFICIATING GUEST

Dr Rita Ka Wai HO

Head of Non-Communicable Disease Branch,
Department of Health HKSAR, China

ABOUT HONG KONG OBESITY SOCIETY

Hong Kong Obesity Society (HKOS) was set up in April 2016 with the following principal aims:

- To raise awareness of obesity in Hong Kong.
- To serve as a platform to connect doctors and allied health professionals involved in the management of obesity and obesity-related disorders.
- To serve as a bridge between the local and international professional communities in the field of obesity medicine.

Website: <http://www.hkobesity.org/>

Email address: info@hkobesity.com

Facebook page: <http://www.facebook.com/hkobesity/>

HKOS COUNCIL MEMBERS

Dr Tellus Man Yuk NG

President

Specialist in Endocrinology, Diabetes & Metabolism
Consultant, Department of Medicine & Geriatric,
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Dr Joanna Yuet Ling TUNG

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Honorary Secretary

Specialist in General Paediatrics &
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Honorary Associate Consultant,
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Clinical Associate Professor of Practice,
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Immediate Past President
Specialist in General Surgery
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Council Member

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Honorary Clinical Assistant Professor, University
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HKOS COUNCIL MEMBERS

(CONTINUED)

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Council Member
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Co-founder & Chief Strength and Conditioning Coach,
Prudens Wellness Lab
Master Instructor, Stick Mobility (USA)

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University Department of Medicine,
The University of Hong Kong
Founder of Hong Kong Obesity Society

Ms Sylvia See Way LAM

Council Member
Consultant Dietitian
Accredited Practising Dietitian (D.A.) Accredited Dietitian (H.K.A.A.D.),
Full Member (H.K.D.A.) Member of Register of Dietitians Accredited by
the Department of Health (H.K.) Approved Practitioner, Australian Centre for Eating Disorders

Local

Prof Karen SL LAM

Specialist in Endocrinology,
Diabetes & Metabolism

Prof Simon LAW

Specialist in Esophageal and
Upper Gastrointestinal Surgery

International Advisors

Prof Lee M. KAPLAN

MD PhD

Director, Obesity, Metabolism & Nutrition Institute,
Massachusetts General Hospital
Associate Professor of Medicine, Harvard Medical School

Prof Chih Kun HUANG

Superintendent, Body Science & Metabolic Disorders
International Medical Centre,
China Medical University Hospital

Prof Ian CATERSON

Foundation Director of the Boden Institute of Obesity Nutrition and Eating Disorders
Boden Professor of Human Nutrition, University of Sydney
President of the Australian Diabetes Society
President of the Australasian Society for the Study of Obesity
Regional Vice-president of the Asia Oceania Association for the Study of Obesity
President-elect of the World Obesity Federation

MESSAGE FROM PRESIDENT

**Dr Tellus Man Yuk NG**

President
Hong Kong Obesity Society

As we gather for this year's annual scientific meeting of the Hong Kong Obesity Society, it is my distinct pleasure to reflect on our collective journey and the significant strides we have made in the fight against obesity. Our society has embraced the vital mission of educating and empowering our communities about the complexities of obesity and its profound health implications.

In the past year, we have launched numerous initiatives, including the successful 5th Go Go Training Program, which has helped countless individuals adopt healthier lifestyles. Our participation in the Asia-Oceania Conference on Obesity and the Multi-Specialty Medical Mega Conference has fostered invaluable collaboration and knowledge-sharing among experts in the field.

Our outreach efforts have extended into the community through public health talks with 6 district health centres, educational events on World Obesity Day, and a dedicated school tour that reached over 1,700 primary students. Each of these initiatives exemplifies our commitment to raising awareness and providing practical strategies for managing obesity.

Moreover, the release of our "Overcoming Obesity" booklet marks a significant milestone in our efforts to offer accessible resources that empower individuals in their health journeys. This resource is a testament to our understanding that combating obesity requires not only medical interventions but also support and education.

As we continue to address the growing challenge of obesity, let us remain united in our purpose. Together, we can advocate for healthier environments, enhance public understanding, and inspire lasting change in our communities.

I invite you to engage with the program and take part in the discussions that will shape the future of obesity management in Hong Kong. Thank you for your commitment to this important cause.

Dr. Ng Man Yuk Tellus
President

MESSAGE FROM PRESIDENT-ELECT



Dr Patrick Man Pan CHAN

HKOS President-elect
General Surgery

Dear Friends,

On behalf of the organizing committee, it gives me immense pleasure to extend a warm welcome to all of you to join our annual scientific meeting. We are set to embark on a journey of exploration, discovery and exchange of knowledge in the realm of obesity management.

Obesity is not merely a physical condition; it is a multifaceted issue that demands comprehensive understanding and dynamic solutions. As we gather here today, we aim to challenge existing notions, embrace novel perspectives, and collaborate towards new solutions that can reshape the landscape of future obesity treatment and prevention.

Throughout this meeting, we have curated a diverse program that encompasses a wide array of topics. Our esteemed speakers will share their insights, experience, and visions, providing you with a wealth of knowledge and inspiration.

This meeting not only serves as a platform for intellectual exchange but also fosters networking opportunities that can pave the way for future collaborations in the fight against obesity. Once again, welcome to our annual scientific meeting. May this gathering be a source of enlightenment, empowerment and inspiration for us all.

Warm regards,
Dr Chan Man Pan
Chairman, Organizing Committee



Lunch Symposium

ROLE OF GLP-1RAs IN OBESITY MANAGEMENT – CURRENT AND FUTURE PERSPECTIVE

Dr Julie Ann Louise LOVSHIN

Assistant Professor of Medicine in the Division
of Endocrinology and Metabolism at the
University of Toronto

The escalating prevalence of obesity represents a formidable challenge to global health, necessitating innovative therapeutic approaches. Glucagon-like peptide-1 receptor agonists (GLP1-RAs) have emerged as a promising class of drugs in the management of obesity beyond their established role in diabetes treatment. The session delves into the multifaceted effects of GLP1-RAs on weight management, examining their impact on glycemic control, appetite regulation, and potential cardiovascular benefits.

This lecture will examine the integration of GLP1-RAs into comprehensive obesity treatment regimens. This includes their synergistic potential with lifestyle modifications and other pharmacotherapies. Future perspectives will encompass ongoing research aimed at optimizing GLP1-RA formulations, dosing regimens, and delivery methods to maximize patient adherence and outcomes.

Furthermore, the lecture incorporates the latest updates from Cardiovascular Outcome Trials (CVOT) data, elucidating the cardiovascular safety and efficacy of GLP1-RAs, thus providing a comprehensive understanding of their potential implications for cardiovascular health in obese individuals.

In conclusion, GLP1-RAs represent a significant advancement in the field of obesity management beyond weight control. By elucidating their current role and exploring future prospects, this lecture aims to equip healthcare professionals with the knowledge necessary to harness the full potential of GLP1-RAs in combating obesity and improving patient health outcomes.



Plenary Lecture

REDEFINING OBESITY BEYOND BMI: UPDATES ON LATEST DEFINITION, DIAGNOSIS AND PHARMACOTHERAPY

Dr Samantha HOCKING

Assistant Professor
Endocrinologist
University of Sydney, Australia

Obesity has long been quantified by the Body Mass Index (BMI), a simplistic measure derived from an individual's weight and height. However, BMI has faced substantial criticism for its inability to accurately capture the complex, multifactorial nature of obesity, which encompasses genetic, metabolic, behavioral, and environmental factors. Modern definitions of obesity are shifting from a sole reliance on BMI to a more comprehensive assessment involving body composition analysis and specific attention to visceral adiposity, which has a stronger correlation with metabolic complications. Advanced diagnostic tools such as Dual-Energy X-ray Absorptiometry (DEXA), Magnetic Resonance Imaging (MRI), and computed tomography (CT) scans, along with biomarkers like adipokines and inflammatory markers, are being explored to predict obesity-related risks and individualize treatments. This approach underscores the importance of personalized medicine in tackling obesity.

Pharmacotherapy has evolved significantly, offering promising avenues for obesity management. The latest pharmacotherapeutic agents target various pathways involved in appetite regulation, energy expenditure, and fat absorption. Dual GIP/GLP-1 receptor agonist and GLP-1 receptor agonist have shown efficacy in weight reduction by enhancing satiety and slowing gastric emptying, while combination therapies, leveraging multiple mechanisms, address both appetite and reward pathways. The redefinition of obesity beyond BMI marks a pivotal shift in its understanding and management, paving the way for personalized and effective treatments that ensure better outcomes for individuals grappling with this complex condition.

ROUND TABLE DISCUSSION ON OBESITY BEYOND BMI



Prof Chih Kun HUANG

Metabolic & Bariatric Surgeon
Superintendent, BMIMC China Medical
University Hospital



Dr Samantha HOCKING

Assistant Professor
Endocrinologist University of
Sydney, Australia



Dr Connie Lai Ling HUI

Assistant Professor
Nutritional Epidemiologist
The Hong Kong Polytechnic University



Dr Queenie Wing Shan SEE

Clinical Assistant Professor of Practice,
Department of Paediatrics & Adolescent
Medicine, University of Hong Kong



Dr Tsun Miu TSUI

General Surgery



Dr Michele Mae Ann YUEN

Endocrinology, Diabetes & Metabolism



Multidisciplinary Session I

OBESITY SURGERY - THE THEORY BEHIND & HOW IT WORKS

Prof Chih Kun HUANG

Metabolic & Bariatric Surgeon
Superintendent, BMIMC China Medical
University Hospital

Obesity surgery, also known as Bariatric & Metabolic surgery(BMS) has evolved significantly since its inception, shifting from purely weight-loss procedures to comprehensive interventions targeting metabolic disorders such as type 2 diabetes, hypertension, and dyslipidemia.

In the past, our understandings of underlying theory of obesity surgery is based on altering the gastrointestinal anatomy to induce weight loss and improve metabolic health through two mechanisms: restriction and malabsorption. By reducing stomach size, restrictive procedures such as sleeve gastrectomy and adjustable gastric banding limit food intake, promoting early satiety. On the other hand, malabsorptive procedures like biliopancreatic diversion bypass a significant portion of the small intestine, leading to reduced calorie and nutrient absorption.

From research in recent decades, hormonal modulation has found to be the main mechanism inducing longterm success of BMS and lead to innovative procedures. Among these, the recent introduction of "Sleeve Plus" concept, such as sleeve gastrectomy with proximal jejunal bypass or sleeve gastrectomy with loop duodenojejunal bypass, represents a pivotal advancement. These combinations optimize weight loss and enhance glycemic control by leveraging dual hormonal modulation of Hunger and Satiety.

Understanding the physiological changes induced by these surgeries is crucial for selecting the most appropriate procedure tailored to each patient's needs. This presentation will delve into the theoretical foundations of various bariatric surgeries, explore their mechanisms of action, and discuss their long-term impacts on obesity and metabolic health.



Multidisciplinary Session II

DEFINING CHILDHOOD OBESITY

Dr Connie Lai Ling HUI

Assistant Professor
Nutritional Epidemiologist
The Hong Kong Polytechnic University

Body Mass Index (BMI) is widely used as a proxy of childhood overweight and obesity, despite it is not a direct measure of body composition. The World Health Organization (WHO), U.S. Centers for Disease Control and Prevention (CDC), and International Obesity Task Force (IOTF) propose using different BMI cut-offs for classifying overweight and obesity in children and adolescents. Differences in BMI related to fatness vary by age and by ethnicity. In 2024, Hong Kong updated its population-specific growth charts HK2020 growth references, using primarily the data collected in the territory-wide Hong Kong Growth Survey 2020-22. Body composition, including fat mass and lean mass, was measured by 4-compartment bioimpedance analysis in the Growth Survey. In this presentation, the test characteristics of different BMI cut-offs to define childhood overweight and obesity among Hong Kong Chinese aged 6 to <18 years taking part in the Growth Survey will be presented and discussed.



Multidisciplinary Session III

MASLD: A RISK ENHANCER IN CKM SYNDROME?

Dr Paul Chi Ho LEE

Endocrinology, Diabetes & Metabolism
Clinical Associate Professor Queen Mary Hospital

In 2023, the American Heart Association (AHA) established the cardiovascular-kidney-metabolic (CKM) syndrome, an entity characterized the complex inter-relationships among metabolic disturbances including excess adiposity, metabolic syndrome, diabetes, chronic kidney disease (CKD), as well as cardiovascular conditions including atherosclerotic cardiovascular diseases (ASCVD), atrial fibrillation (AF) and heart failure (HF). There are five stages of CKM syndrome, ranging from the absence of CKM risk factors (Stage 0) to established clinical cardiovascular diseases (CVD) (Stage 4), which reflect the progressive nature of its pathophysiology and highlight the need for early identification of high-risk individuals for timely management to improve their CKM health. Metabolic dysfunction-associated steatotic liver disease (MASLD) is also a new nomenclature for non-alcoholic fatty liver disease (NAFLD) to highlight the pathophysiology of metabolic dysfunction as the core component in driving the development and progression of steatotic liver disease.

This talk will illustrate how MASLD is associated with CVD and CKD and whether it is a potential risk enhancer in this new CKM syndrome.

GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

Statement of Work done during the period from 2023 Apr to 2024 Mar

1 4th Go Go Go Training Program (May 2023)

The "Go Go Go Training Program" was successful in the previous years. HKOS decided to continue the same program in 2023-24. The training was resumed in May 2023 due to the ease of the pandemic situation in Hong Kong. There were two training sessions every month.



2 Asia-Oceania Conference on Obesity 2023 (AOCO 2023) (4-6 Aug 2023)

2.1 HKOS was acting as the organizing committee of AOCO 2023 at the Hong Kong Convention and Exhibition Centre.



3 Multi-Specialty Medical Mega Conference 2023 (9-10 Sep 2023)

3.1 Multi-specialty Medical Mega Conference 2023 was held on 9-10 September 2023 in Cordis, Hong Kong with live stream. We were proud that Dr Tsui Tsun Miu and Dr MAK Lung Yi were invited to the Conference as speaker and chairperson.



4 Hong Kong Society for Metabolic and Bariatric Surgery (HKSMBS) Public Health Talk on Obesity (24 Nov 2023)

HKOS President Dr Ng Man Yuk Tellus was invited to deliver a lecture at the public talk on Obesity diseases by Hong Kong Society for Metabolic and Bariatric Surgery (HKSMBS) on 24 November 2023 at Hong Kong Central Library.



5 HKMA CME Lecture for District Health Network CME Programme (23 Jan 2024)

Invited by Precious Blood Hospital (Caritas), Dr Tsui Tsun Miu was sharing on the topic 'To Update Clinical knowledge in Obesity Management' to hospital nurses on 27 June 2023.



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

6 長者增肌減脂有妙法 (27 Jan 2024)

The Central & Western DHC Express, along with other Sub-district Care Teams (Central and Western), welcomed Dr. Ng Man-yuk, President of the Hong Kong Obesity Society, to discuss "Effective Strategies for Muscle Gain and Fat Loss in the Elderly" with seniors at the Kennedy Town Kai-Fong Welfare Association on 27 January 2024.



7 QC Medical Training Scheme - Health Exhibition 皇仁醫學培訓計劃——健康展覽 (2 Mar 2024)

Dr. Tsui Chun-miu, joined the "Kingren Medical Training Program - Health Exhibition" by Queen's Alumni Association and Queen's College Life Planning Section on 2 March 2024. More than a hundred attendees, including former students and parents, took part. The event included health check-ups for parents and body weight assessments for students interested in medicine. This initiative was in observance of today's World Obesity Day on 4 March 2024.



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

8 World Obesity Day 2024

8.1 Public education event at Citywalk, Tsuen Wan with the Hong Kong Association for the Study of Obesity (3 March 2024)

8.1.1 HKOS held a public education event at Citywalk, Tsuen Wan with the Hong Kong Association for the Study of Obesity on 3 March 2024. Mr Stephen Chan Chi Wan, Ms Stephanie Che Yuen Yuen were invited to share weight loss tips. Master Li Hui, a famous martial arts expert, even taught Baduanjin weight loss on the spot, urging the public to exercise more.



8.2 Patient Awareness Campaign

8.2.1 6 educational talks in different District Health Centres during March

8.2.1.1 There was a total of 6 educational talk held by HKOS in different District Health Centres during March. The total number of attendees, including both physical and virtual participants, was 852.

8.2.2 Two classes of Stick Mobility at Tsuen Wan District Health Centre

8.2.2.1 Two classes of Stick Mobility were organized at Tsuen Wan District Health Centre. Stick Mobility is a new dynamic exercise that can help improve posture, stretch muscles, and enhance joint flexibility, stability, and muscle strength. The aim of this event was to encourage public to exercise with fun.



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

8.3 Primary School Tour (Feb-Apr 2024)

8.3.1 HKOS held a school tour on obesity and children during February to April 2024, supported with District Health Centres. During the tour, weight management empowerment video recorded by paediatricians, dietitians and exercise trainer was presented to primary school students, together with quiz to raise awareness of child obesity and provide tips on diet and exercising for children. There was a total of 1,779 primary school students and 50 parents attended the event. A booklet 'Overcome Obesity Enjoy Life' (戰勝肥胖 擁抱健康) was also published and distributed to public in both hard copies and soft copies.



9 Media

9.1 Sing Tao Daily Video recording- 中年好身形 (Mar 2024)

9.1.1 There are 2 series in total entitled 「無三高都要減肥膏」 and 「減肥有方」. Both videos reached more than 200,000 views.



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

Statement of Work done
during the period from 2024 Apr to 2025 Mar

1 Set up of WhatsApp Community (Apr 2024)

HKOS has set-up the WhatsApp Community to regularly update the latest news from the society as well as information related to obesity. Currently we have 141 members joining the community.



2 Multi-Specialty Medical Mega Conference 2024 (Jun 2024)

Multi-specialty Medical Mega Conference 2024 was held on 8-9 June 2024 in Cordis, Hong Kong with live stream. We were proud that Dr Ng Man Yuk and Dr TAM Chi Chun Terence were invited to the Conference as speaker and chairperson.



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

3 Media

3.1 《志雲頻道》[健康傾]

There are 3 series in total and the videos reached 100,000 views.

3.1.1 EP01 帶氧或負重運動，那樣減肥更有效呢？| 運動可以抗衰老？| 分享在家做運動方法 (7 Sep 2024)

嘉賓：香港肥胖學會會董、香港中文大學矯形外科及創傷學系哲學博士 李韋煜博士



3.1.2 EP02 父母肥，子女都會肥？肥仔變肥佬的機會有幾大？(16 Jul 2024)

嘉賓：香港肥胖學會前任主席、外科專科醫生 徐俊苗醫生
兒童內分泌科專科醫生 張璧濤醫生



GLANCE OF ACTIVITIES FROM 2023 TO PRESENT

3.1.3 EP03 精神健康是肥的因還是果？脂肪都有定位？身心健康也與肥胖有關？(23 Jul 2024)

嘉賓：香港肥胖學會創會主席、內分泌及糖尿病科醫生 袁美欣醫生 臨床心理學家 黃沛霖博士



4 5th Go Go Go Training Program (Sep 2024)

The "Go Go Go Training Program" was successful in the previous years. HKOS decided to continue the same program in 2024-25. The training was started in Sep 2024. There were two training sessions every month. HKOS provided free treadmill test to all the new participants.



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LDL-C^{1,9}

38.0%



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References: 1. Euthyrox® Hong Kong Product Insert; 2. Hostalek U & Lipp HP (2018) Curr Med Res Opin 35(1):147-50.

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