

Hong Kong Cardiology During the Severe Acute Respiratory Syndrome (SARS) Outbreak

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The first case of Severe Acute Respiratory Syndrome (SARS) broke out at the end of February 2003 in Hong Kong, and had since made significant impact on all walks of life in Hong Kong, including the medical profession. The Cardiology community and practicing cardiologists were affected in different ways during this period.

Right at the time and before anybody knew about SARS, the World Congress on Cardiac Pacing and Electrophysiology were being held between February 19-22, 2003. In retrospect, the organizer, the Hong Kong College of Cardiology, was very fortunate to have successfully hosted the meeting, with over 4,000 participants from 20 countries attending.¹ If SARS had occurred earlier, the attendance would have been dismal, and most probably the entire congress would have to be cancelled. With divine blessing perhaps, all the faculty and attendees had enjoyed their visit and returned home safely.

During the outbreak, there was severe manpower and bed shortage for SARS patients. As a result, routine cardiac activities almost came to a standstill. Many patients cancelled their appointments for fear of contacting SARS, and the numbers of outpatient

attendance and cardiac procedures were dramatically reduced. In some hospitals, catheterization laboratory had to be closed e.g. Princess Margaret Hospital. In other hospitals, e.g. Queen Mary Hospital, one of the two cardiac catheterization laboratories was closed during this period. A similar situation also occurred in the private sector. For the usually overworked cardiologist, this seemed to be a good time for respite. However, in reality, we felt very frustrated from this inactivity, and we were not alone.

Many cardiologists in the Hospital Authority took active role in the management of SARS patients. Because of their experience in critical care, some of them worked in high risk areas delivering medical care directly to those in need. They had made important contributions to the medical community. In the early outbreak of SARS, a number of cardiologists had contracted SARS and, some became very sick. We are now thankful that they have all survived, and most have already returned to full clinical duties.

SARS has provided opportunity for those academically inclined. A group of cardiologists in Hong Kong has just published the first landmark study on the effects of SARS virus on cardiac function. Li et al² reported subclinical diastolic dysfunction in 46 patients with SARS, 14 of them were ventilator dependent patients. While there was no systolic dysfunction observed in these cases as a group, ventilated patients tended to have lower ejection fraction which was related to the serum level of lactate dehydrogenase. Left ventricular function recovered among the survivors.

Many meetings were cancelled or postponed. The 11th Annual Scientific Session of the Hong Kong College of Cardiology, scheduled in June 2003, was initially postponed to August, and finally to October

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31-November 2, 2003. The organizing committee has made tremendous effort in liaising with the faculty and the industry to put together a meeting of very high standard. It will be one of the largest medical meetings after the SARS outbreak.

In summary, cardiologists in Hong Kong have suffered, made significant contributions and maintained their duties to their patients during the SARS outbreak. The hosting of the 11th Annual Scientific Meeting is a testimony of their commitment. This editorial is written as a tribute to all cardiologists who have served the

people of Hong Kong selflessly during the difficult SARS period.

References

1. Abstracts of the XII World Congress on Cardiac Pacing and Electrophysiology. Hong Kong, China, February 19-22, 2003. *Pacing Clin Electrophysiol* 2003;26(2 Pt 2):S1-S245.
2. Li SS, Cheng CW, Fu CL, et al. Left ventricular performance in patients with severe acute respiratory syndrome: a 30-day echocardiographic follow-up study. *Circulation* 2003;108:1798-803.