

PERSONAL FROM YOUR CHIEF EDITOR

It is apt, in this time of the year, when Caduceus begins a new volume, to discuss and contemplate upon the various aspects of her role in the Medical Society and of her significance to medical students. I shall not dwell in detail on all facets, as so many are established firmly enough to have taken their place in the connotations carried by the word Caduceus.

Caduceus shall endeavour to whip up interest among medical students of their society which is plagued by capito-colonialism, of their country (China, if you still have any doubt) which is marred by ideological differences, and of this world which is torn by superpower politics. This may come as a shock to the medical profession in general and medical students in particular, for, intoxicated by the false divinity of the knowledge they have good command of, they have, from time immemorial, displayed a fierce

identification with their art to the extent that they have lost their perspective in society. They consider themselves medical men first and last, that their responsibility to society ends, with all sincerity, in the curing of the ill. The idea of being a member of society never lives more than a fleeting existence in their mind.

Out of human love we come to this Medical School to be apprenticed to the art of healing and we cannot afford to defeat our own purpose by adopting a worldview as narrow as that, and thus losing sight of our position as a man, not only as a physician, in society, particularly in the grim face of social injustice in this Colony, and during the critical period of reconstruction of our fatherland, China. The whole medical profession needs desperately a reassessment of its role in society, in its reforms and betterment. We must recognize the importance of the traditional so-

cial role of the medical profession to serve the people, to ameliorate their plight and to better their welfare, so that when we claim contribution to our brothers we shall be modest. We must also recognize the cruel fact that the traditional medical profession as a social force, quite contrary to the aspirations of its many individual members, constitutes a major preservative for the system, so that when we set out to change the system, we must first overhaul the medical hierarchy.

The fuming lines of above will no doubt raise the eyebrows of a formidable number of medical students who see virtue only in academic studies, sports events, social activities, etc., etc. They will find the new emphasis unpalatable, which is only natural and which I cannot care less.

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A newspaper, and Caduceus is doubtlessly a newspaper though the interval be-

tween issues is protracted to one month, rests on the tripod of editors, readers and contributors. Caduceus is blessed with the fact that the three are but one: we are all fellow students in the same Medical School. It is truly your newspaper. Caduceus shall not bar anyone is an Editorial Board to see to it that it remains in circulation, but because of your active participation, each and everyone of you, as editors, readers and contributors. Yes, as editors. Caduceus shall not bar anyone genuinely interested from taking part. At any time in the year when you feel like it, you can always turn up and work with us for a couple of issues and then quit as you please. There is no obligation for you to last the whole term, no awkward elections, no formal meetings, no past experience needed. What matters is the zest to work, the fervour to devote and the will to persevere. It is the truest of democracy, participatory democracy, one of the dearest fruits of the American New Left experience.

Our editors shall not be (or should I say, should not be) monstrosities hidden in some distant closed closet churning out four pages every month for you to throw into the wastebasket. They all are your fellow students and I shall instruct them to be talent scouts to mix with you soliciting arti-

cles and other contributions. People, people. It is the common people that make things work. And it is the common medical student that Caduceus is for.

Apathy breeds bureaucratism. Bureaucratism engenders apathy. The two among themselves form a vicious cycle. Whether or not Caduceus shall indeed be your newspaper, whether or not Caduceus shall be just another printed sheet thrown at you by some mysterious who-knows-from-where busters depend on your active participation. And I beg of you. Write! Contribute to Caduceus! I dread to think of receiving no support from you: your indifference and detachment will turn me into another bureaucrat, which is the last thing I want to be. Please, have mercy on me, and on yourself.

* * * *

When next year this time another Chief Editor is writing his 'Personal', when next year this time I am packing my bags and find that all my avowed objectives have fallen through, I shall not be sad as I have known enough failure to be saddened. And if you are already laughing at my naivete, I do not care as I know I have made the right start. You may say I'm a dreamer. But I'm not the only one. And I hope someday you will join us

—John Lennon

A new product of British Research

Ventolin INHALER

(Salbutamol)

Trade Mark

MORE SELECTIVE · LONGER ACTING · MORE EFFECTIVE



A NEW STANDARD IN BRONCHODILATOR THERAPY

Previously available β -adrenergic stimulants such as isoprenaline and orciprenaline act on the β_1 receptors of heart muscle as well as on the β_2 receptors of bronchial muscle. Consequently, undesirable increases in heart rate and pulse pressure sometimes occur when these drugs are used to produce bronchodilation. Ventolin is different: first, because it is highly selective in its action, affecting primarily β_2 receptors; second, because it is more effective than existing bronchodilators; and third, because it is longer acting.

MORE EFFECTIVE

Clinical trials have shown that Ventolin Inhaler is a more effective bronchodilator than isoprenaline or orciprenaline when given by inhalation.

LONGER ACTING

Ventolin is long-acting, its effect persisting for at least four hours. By contrast, isoprenaline, even in large doses, has a characteristically intense but much shorter effect. In a study using whole-body plethysmography, inhalation of 100 μ g of Ventolin produced an almost immediate maximal increase in airway conductance which was sustained for four to six hours.

MORE SELECTIVE

No side effects have been reported with therapeutic doses of Ventolin Inhaler. In studies comparing Ventolin with isoprenaline, a major difference found was that Ventolin did not stimulate the heart or affect the blood pressure, even after inhalation of a relatively large dose.

MORE ACCEPTABLE TO PATIENTS

Patients expressed a marked preference for Ventolin Inhaler in double-blind studies comparing Ventolin with aerosols containing isoprenaline or orciprenaline.

SAFETY IN USE

Past experience suggests that misuse of aerosol bronchodilators by asthmatic patients may lead to dangerous effects on the heart or give a false sense of security to patients with incipient status asthmaticus. Ventolin Inhaler has no effect on the heart in therapeutic dosage and has a long duration of action. Both these properties provide additional margins of safety: the lack of cardiac effects should reduce any likelihood of deaths due to ventricular fibrillation and the long duration of action makes it possible for patients to realise in time if the drug is becoming less effective. Because an effective treatment with Ventolin Inhaler should last for at least four hours, patients have been advised to consult their doctor immediately if the effect lessens for less than three hours, so enabling the doctor to take timely action.

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蔡定國

The views expressed by our contributors are not necessarily those of the Editorial Board.

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SECOND QUADRENNIUM

Even as the University is going through its first quadrennium, the University authority is already planning ahead and a second quadrennium will follow the first when the first ends in 1973.

These quadrennium planings will determine how the University will expand, revise its curriculum, and reform its structure. In view of this the Students Union has appointed a University Affairs Committee to look

into this matter, to present the students' views in various pertinent aspects.

For our part, the Medical Society in an Emergency Council Meeting on Jan. 13, has determined to set up a commission to make possible recommendations regarding the Medical Curriculum, the proposed B.Sc. (Medical Degree), and the University Quadrennium Plan in general.

**"Christmas has come and christmas has gone, but
may the lovings thoughts it's brought
linger on and on and on."**

Hospital wards usually remind me of what hell is like — the mournful faces of the sick; the apathetic expressions of the healthy; the unmistakable stink which can drive you trembling. Boy! What more can hell offer!

However, if you are fortunate enough to be admitted into the hospital at the right time, things may be very different. When I stepped into the wards on the 20th December, I was simply shocked — it was the warmth there! The rooms were fully decorated for Christmas — Christmas trees, Christmas lamps, colourful paper ribbons, silver angles flying around (also some of the red, blue and white ones). And the people there, they looked so different! The sick looked less deadly while the healthy appeared so much more humane, though it might be the Christmas parties they were thinking of. Anyway, it was real "impressive".

For all those who agree with me that love is all we need, here is a little song especially dedicated to you, "It's Time For Love".

The little birds
Together they fly
Fly so high
High up the sky
It's time for love
It's time for them
It's time for us
And here I am
Waiting
Waiting

It's Christmas time
I'm on my knees
Lord, let there be love
And let there be peace
It's time for love
For the universe
Let love be his
And let it be hers
It's so heavenly
heavenly

It's time for love we're old enough to see that
love should grow
But you've to love and I've to love before love will
Let's start loving
Loving

See that little bird
Lost her mate in flight
What's she gonna do
This chilly Christmas night
Hey little birdie
I pity you
But love is all around
I'm sure you'll get theo'
Just keep waiting
waiting

A ROMANTIC SCENE AT ST. CHRISTOPHER HOME!

By MO.

His glance swept through the room and stopped suddenly.

I noticed that he was looking at me attentively. Of course, rapture surged up in me. (He's a handsome guy!) I would have blushed to the root of my hair if somebody gazed at me in that way. But for this time, I did not.

I've never seen such a pair of charming eyes. They fascinated me.

I smiled. (Seducing!)

He smiled back, dreamily. (Response is important in the course of human interaction.)

His eyes sparkled with excitement. (Love at first sight.)

I looked around. People were drifting aimlessly by. No one seemed to notice our little flirting affair. (Lucky for us. Further action will not be interrupted.)

I felt the yearning in him.

Subconsciously I walked closer to him. The temptation to have a chat with him was irresistible.

He cocked his head to one side. (A lovingly posture!)

He was so handsome, so virile and so smart that he might be a future Mr. World in the year 19XX.

"Hello," I said softly.

He grasped my hands with his right, smoothed my hair and touched my cheeks lightly with his left. (Wow! too quick, isn't it?) But his sincerity, his tenderness moved me.

Under his gentle caressing, there was indescribable joy. Something in him attracted me like no other person in that room.

* * * *

The instant of departure had come when we were still enjoying the enchantment of secret we shared in our exchanged glance. (Time is always running out in those wonderful moments.) A feeling of dreadful uneasiness was aroused inside me; something precious I wanted to possess seemed close to destruction.

I said bye-bye sadly to him and gave him a farewell kiss. (Gee — soft as jelly! I was breathless. Excuse me for peppering with too many exclamations.) He was still smiling innocently and giggling chirpily, wondering when and in which corner of this world would we ever meet again.

* * * *

The baby was wriggling happily in his bed as I left, his tiny fingers playing around with the little toy gun I brought him.

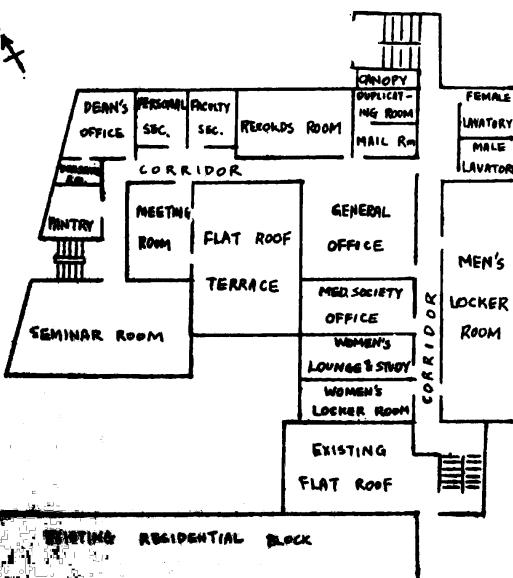
I like babies and I like children till they begin to grow and acquire adults' abilities to lie, to cheat, to hate, to hurt, to be jealous and above all, the power to assume perfect masks over their faces.

My heart ached as I saw these sweet little darlings lying in their beds never ever discovering in life whom they belonged to. (Is it of real importance for one to have any identification?)

Editor's Note:

Sail on, silver girl
Sail on by
Your time has come to shine
All your dreams are on their way.

— Paul Simon



EXTENSION TO MEDICAL STUDENTS CENTRE

