

尊敬的羅致光議員

我們是一班現職於威爾斯親王醫院內科及藥物治療部的醫生。近日閱報得知立法會沙士專責委員會準備點名批評沈祖堯教授。對此未經證實的報道，我們深感不安。

我們一向對貴委員會的調查報告寄予厚望。但觀乎聆訊過程，我們發現箇中可能存在一些誤導性問題，而引致調查及結論出現不公的情況。我們促請委員會能本著公平、公正、無私的原則，仔細研究沈教授呈交的報告，特別留意其中一些部門與院方權職上的問題，而不是單靠聆訊中的一些誤導性問題而得出這偏頗的結論。其實沈教授的報告已集合我們前線醫生的記憶及證供，並加以核實後撰寫出來的，盼委員會能多加重視。

現隨函附上一封我們發給傳媒的公開信，敘述我們對這未經證實的消息的關注。我們並懇請委員會能貫徹保密的原則，避免洩漏聯署信的簽名，引致我們不必要的壓力。

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副本呈香港各主要傳媒、各立法會 SARS 專責委員會成員、立法會主席范徐麗泰議員 (副本已略去聯署簽名)

編輯先生，

我們閱讀明報，得知立法會 SARS 專責委員會準備點名批評我們的前任部門主管沈祖堯教授。我們對這說法未知是否屬實，但如果真的如此，那麼我們對於委員會這個裁決，實在深感震驚以及遺憾，故藉此表達我們作為在 SARS 中的前線醫務人員的看法。

首先，自去年六月開始，特區政府及醫局分別進行 SARS 的調查，先不討論兩者的公信力及結論是否公允，至少在這兩次調查當中，各主要抗疫醫院的最前線醫護人員均有機會被邀出席，向各調查委員直接反映意見，我們的意見在某程度上也得到反映。我們得知立法會對 SARS 作出獨立調查，作為一眾前線醫務人員本來感到興奮，期望這個作為民意代表的調查能顯露事件的真相，但在聆訊的過程中，我們越發感到失望。在這漫長的聆訊過程中，我們一班 SARS 中的前線醫生，竟然一個也沒有受到傳召，反而是一眾遠離前線的管理人員才有機會發言。難道作為在 SARS 首當其衝，每天在生死邊緣掙扎的前線醫生，我們對事件真相的掌握就沒有價值嗎？難道就不應受到尊重嗎？對於這完全沒有前線醫生意見參與的聆訊，我們對它的公信力深感懷疑，這不禁令我們懷疑，這到底是事實的聆訊還是政治的聆訊。

至於聆訊的事先張揚的結論，作為前線醫務人員的我們實在也無法苟同。在 SARS 爆發的初期，沈教授在三月十日中午已決定關閉 8A 病房，並在病房門口放上謝絕探訪的牌子，這件事當時在 8A 附近工作以及出入的醫院工作人員皆有目共睹，而事件在南華早報也有報導，但遺憾的是在數小時後，院方作出相反的決定重開 8A，令我們一眾前線醫生痛心疾首，而更令人遺憾的是立法會的調查委員會對這重要的一點竟然視而無睹，而事實上，當日我們一眾醫務人員為了避免可能已受感染的醫生感染其它無辜病人，要求暫時不接觸病人，這決定當日雖得沈教授支持，但仍受院方高層否決，可幸的是沒有病人因此而受感染。在整個過程中，沈教授在關閉 8A 等決定都抱著正面的態度，但聆訊事先張揚的結論竟然把沈教授視為事件的負責人，令我們深感不公，更令我們懷疑這聆訊是在找真相還是找代罪羔羊。

至於病人 YY 出院事件，我們的決定是基於當時對這個新病缺乏認識，而當時的而且確該病人患有 influenza A，因而令判斷無可避免地出現問題。但這一點在立法會事先張揚的結論中，似乎也祇是用事後孔明的態度去看待，這一點也令我們深感有欠公允。

我們在 SARS 疫潮裏面，是受到最嚴重打擊的醫院。在疫症爆發的初期，看著一個個同事病倒、入院、惡化，試問誰能不心寒，誰能不膽怯？但沈教授身先士卒、捨己為人的精神深深地感動著我們，令我們在人手物資皆缺的情況下，無計個人安全地去打這場毫無把握的仗，去戰一個我們毫無所知、看不到、觸不著的敵人。這一切一切，可以說是全賴沈教授以人為本的過人類導才能，他可以說是居功至偉。但很諷刺的是，調查委員會竟把他定為事件的主要負責人，淪為千夫所指的罪人，這怎能不令人痛心疾首。

我們都是一班默默耕耘的醫生，祇希望能盡醫生的責任救死扶傷，不希望被捲入任何政治紛爭，但對著這不公平的結論，我們實在無法再保持緘默，寧願抱著影響前途的危險也要對大眾披露真相，希望能令公義得到彰顯。希望市民雪亮的眼睛會看清楚事件，為我們一班前線醫務人員討回公道。

Dear Editor,

We note with concern the recent article in Ming Pao, which reported that the Legislative Council SARS Enquiry Committee is planning to finger-point and criticize our previous Chief of Service Professor Joseph Sung on his handling of the SARS outbreak. While we do not know whether this is indeed the conclusion reached by the Committee, as a group of frontline medical staff who battled SARS, we feel shocked and dismayed by the suggestion, and feel compelled to express our views regarding this matter.

First of all, both the Hong Kong SAR Government and the Hospital Authority had previously conducted independent enquiries into the SARS outbreak starting from June 2003. During these enquiries, frontline healthcare workers from many affected hospitals were represented, so that their views could be presented directly to the various agencies. When we heard that the Legislative Council was planning to conduct an independent enquiry of the SARS outbreak, we hoped that this report, prepared by individuals elected to represent us, will be able to present all the facts of the events to the Hong Kong public. However, we were bitterly disappointed during the process of the recent Legislative Council hearing. During the long period of hearings, none of us, doctors who were on the frontline battling SARS, were summoned to give evidence. On the contrary, only the views of a selected group of administrators were represented. Is it that the views of frontline health care workers who were in the midst of the SARS crisis is not considered to be important, our views not worth hearing? We feel that this enquiry, having neglected the views of frontline healthcare workers, has failed to thoroughly examine all aspects of the outbreak, and therefore lacks credibility. It also makes us wonder whether the enquiry is set out to examine all the facts relating to the outbreak, or just the political issues?

We also strongly disagree with the leaked conclusions from the enquiry. When the SARS outbreak first occurred, Professor Sung made the decision to stop admissions into ward 8A, and a sign indicating that no visitors were allowed into ward 8A was already in place by midday on 10 March. This event was witnessed by most of the medical and nursing staff working in or around ward 8A at the time, and has already previously been reported in the South China Morning Post. Unfortunately, a few hours after ward 8A was placed under quarantine, the hospital administration decided to reverse that decision and re-open 8A ward to admission and visitors. Most of the frontline healthcare workers were very alarmed and concerned by this decision at the time. Even more disturbing is the fact that the recent Legislative Council Enquiry has deliberately ignored this incident. In fact, we were also concerned at the time about the possibility of potentially infected healthcare workers cross-infecting other patients, and requested that medical personnel who worked on ward 8A should not come into contact with other patients. This proposal was approved by Professor Sung at the time, but was again vetoed by the hospital administration. Fortunately, there were no patients infected as a result of this. During the entire decision-making process, Professor Sung was supportive of our decision to quarantine ward 8A. However, the leaked conclusions from the enquiry held him responsible for the failure to quarantine ward 8A. We feel this is most unfair, and make us wonder whether the purpose of the enquiry was to reveal the facts, or to identify a scape-goat.

The decision to discharge patient YY from Prince of Wales Hospital was based on the limited clinical information we had at the time, hampered by the lack of knowledge about this newly emergent infection. The patient did suffer from Influenza A, which distracted from the possibility of a co-existing infection with SARS. However, in the enquiry, this event was viewed with the benefit of hindsight, using information about SARS we did not have at the initial stages of the outbreak. We feel this also failed to do justice to the parties involved.

Among all the hospitals in Hong Kong, ours was the most severely affected by the SARS outbreak. At the initial stages of the outbreak, witnessing the increasing number of colleagues who fell ill, many of whom were in critical condition, most of us were terrified. But we were all deeply moved by our leader Professor Sung, who selflessly led by example, battling the crisis from the frontline. It was his example that enabled us to gather enough courage to fight the battle against a deadly, invisible enemy that we did not know much about, and to do so with such limited manpower and resources. All in all, it was the leadership of Professor Sung which enabled us to overcome the crisis in our hospital. How ironic it is that the enquiry should pinpoint him to be responsible for the outbreak. This is most unreasonable and unjust.

We are a group of hard-working doctors who simply want to get on with our job and help those who are sick. It is not our intention to be entangled in any political debate. However, we find that faced with such accusations, we can no longer remain silent. We have put our careers on the line, in order to reveal the facts to the public. We sincerely hope that the public will be able to examine the situation in a better light, and draw their own conclusions about the enquiry.