LC Paper No. CB(2)260/12-13(06)

Submission to Legislative Council - Panel on Health Services on

Review on the Regulation of Private Healthcare Facilities and the Performance of High-risk Medical Treatments/Procedures 27 November 2012

(From the Association of Private Medical Specialists of Hong Kong)

(1) Background of the Association

The Association is a registered charitable society composed of medical practitioners who are also registered medical specialists who practice medicine in the private sector. Our members are from all types of specialties as defined by the Academy of Medicine of Hong Kong and the Hong Kong Medical Council. In the current review of private healthcare facilities and performance of high-risk medical treatment and procedures, our group is a major stakeholder in this regard.

(2) Recent development leading to the review

The well publicised adverse incident of one death and serious disability and sickness of a few other patients as a result of an intervention procedure involving a beauty services company and laboratory processing of health products has exposed the current situation of practice in the beauty business as grossly inadequate and potentially dangerous to the health of people. A review and some changes in the rules and regulations and the relevant policies should be in order to protect the public and our Association is in support of making suitable changes in the relevant policies and regulation framework.

(3) Our views

(3a) Delineation of medical as opposed to beauty procedures

There is an absolute need to differentiate medical versus simply beauty treatment or procedures. The current situation of lumping everything from simple application of ointment to needling of the skin to invasive procedures such as facelift and liposuction and even major reconstructive surgery as beauty services is inadequate because the involved risks to the consumers or patients vary widely from no risk to very high risk. We are of the opinion that all treatment and procedures that involved risks to the health of the receiving party should be classified under medical treatment or procedure and can only be delivered by medically trained personnel or under his or her guidance and supervision. We feel that all procedures that involved an injury to the body

would naturally carry risks. These would include all kinds of needling of the skin such as Botox injection, filler injection, blood taking and intravenous injection. The process of needling itself carries the risks of injuring the body and introduction of infection. The risks could be high depending on the amount of tissue involved and the parts of the body concerned. The only possible exceptions that we think practitioners other than medically trained practitioners can perform provided they are adequately trained in that respect are tattooing and ear lobe piercing.

Procedures using light or other energy emitting machines such as laser, ultrasound or others can pose risks of varying degree to the body especially skin and the risks depend on the depth of penetration to the skin. A deeply penetrated laser beam is akin to a deeply penetrated knife and can produce deep skin injury similar to a deep burn of the skin. Therefore we feel that if treatments that involved laser or other kinds of energy delivering device that can penetrate to the deep part of the skin should be classified medical.

In certain beauty treatments or procedures, some kinds of medication are used either before, during or after the application of the procedures, such as local anaesthetics and antibiotics. If drugs are used they should also be classified under medical since only medically trained personnel can fully understand the use of drugs and be responsible for that use.

A clear and absolute delineation of medical versus beauty treatment or procedures is important for the beauty sector to follow. A fully trained practitioner in various fields in the beauty sector should be allowed to practice procedures in the beauty section only and procedures which are totally medical or involving medical elements should be referred to a qualified medical practitioner for treatment. In the case of a medical practitioner carrying out medical procedures as defined, they should treat them like any other medical procedures or operations and informed consent should be duly obtained.

(3b) Regulation of aesthetic medical treatments or procedures

The list of medical treatments or procedures that can be classified as aesthetic are many and fall into many different medical specialties such as plastic surgery, general surgery, dermatology, gynaecology ophthalmology, otorhinolaryngology and others. It is of paramount importance that the practitioner carrying out the particular treatment or procedure is adequately trained and has the relevant experience. A list to recommend the required qualification and experience in the different procedures should be useful as a guide for the practitioners to follow. If all these risky procedures are already classified medical, it should be adequate for the relevant professional body to define the procedures and produce a guideline for the relevant professional to adhere to. In this situation, either the Academy of Medicine or the Medical

Council should be delegated this responsibility to maintain a guideline and implement it. The guidelines on aesthetic practices for doctors promulgated in Singapore should be a good one as a reference to start with.

(3c) Regulation of premises and devices

As most of these kinds of cosmetic procedures require devices or equipments of certain level of complexity and technology and they are in turn rapidly evolving in this technological age, suitable devices or equipments and appropriate management of these equipment set up are necessary in the provision of cosmetic services, the premises in which these procedures are carried out should also be regulated. Regulation should take the form of accreditation by appropriate and recognised professional organisation or through licensing process of relevant government offices.

There should also be a registry of approved devices and equipments for use on human in both the beauty sector and the medical sector. There should also be an approval process of new devices managed by a government office so that new innovative and effective treatments and procedures can be employed to the benefit of the public within reasonable time.

Majority ownership or directorship by medical practitioners in beauty centers undergoing medical procedures

The idea of requiring a majority ownership or directorship by registered medical practitioners is a good one but one must have a way to transfer responsibility of the consequences of the medical processes being conducted to the medical directorship in the beauty center concerned. It is a good idea because medical inputs are more or less guaranteed in the running of the beauty business. But how would the medical practitioner acting as a director or owner of the company could be made responsible to what was carried out by another person in the company is not well defined

(3d) Regulation of advertising of beauty products and procedures

A lot of people are drawn to receive beauty products or treatments/procedures by the continuing bombardment of the advertisement in multiple media. Concerning products or procedures that could pose significant risks to the consumers, appropriate measures should be taken to regulate the use of advertising in their promotion. The advertising should contain facts in their claim of efficacy. As medical practitioners are not allowed to advertise their services, those procedures being carried out by medical personnel should therefore not be advertised as such. If those treatment or procedures are necessary, they should be referred to a properly registered medical professional with appropriate credentials. For those procedures to be carried out, informed consent should be obtained by the doctor in case and he or she

would be responsible for the consequences of the procedure. Performance of those medical procedures without an identifiable personnel should not be allowed.

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