

MEDICAL REGISTRATION ORDINANCE (Chapter 161)

ORDER MADE BY THE MEDICAL COUNCIL OF HONG KONG  
DR CHAN TUNG FEI (REGISTRATION NO.: M10714)

It is hereby notified that after due inquiry held on 2 May 2017 in accordance with section 21 of the Medical Registration Ordinance, Chapter 161 of the Laws of Hong Kong, the Medical Council of Hong Kong found Dr CHAN Tung Fei (Registration No.: M10714) guilty of the following disciplinary offences:—

‘That, in or around May 2012, he, being a registered medical practitioner, disregarded his professional responsibility to his patient (‘the Patient’) in that:—

- (a) he failed to properly and adequately advise the Patient of the nature, procedures, all risks and complications of the ‘RF 射頻’ treatment (‘the Treatment’) before performing the Treatment; and
- (b) he failed to obtain informed consent from the Patient before performing the Treatment.

In relation to the facts alleged, either singularly or cumulatively, he has been guilty of misconduct in a professional respect.’

Dr CHAN was at all material times a registered medical practitioner. His name has been included in the General Register from 17 July 1996 to present. His name has been included in the Specialist Register under the Specialty of General Surgery since 4 August 2004.

The Patient first consulted Dr CHAN on 10 May 2012. The Patient was accompanied by her mother and she complained to Dr CHAN of excessive sweating with odour. On examination, Dr CHAN found that the Patient’s hands were dry and her axillae were mildly clammy. Dr CHAN made the diagnosis of axillary bromhidrosis. He told the Patient that the traditional method to treat axillary bromhidrosis would be by way of surgery but this treatment method could result in wound-related complications. He then recommended the Patient to undergo radiofrequency treatment [‘RF treatment’]. According to Dr CHAN, he also told her this involved the use of radiofrequency to heat up the underlying sweat glands to destroy them.

There is however no dispute that in recommending the Patient to undergo RF treatment, Dr CHAN did not warn the Patient that since she had received 8 previous laser treatments to axillary skin areas, the incidence of local wound complication by the radiofrequency ablation might be higher compared to those without previous laser treatments. Moreover, Dr CHAN failed to inform the Patient sufficiently about the limitations of RF treatment and that there was no medical literature at the material time to support the use of RF treatment for axillary bromhidrosis.

The Patient returned to Dr CHAN’s clinic for RF treatment on 14 May 2012 and a consent form was signed before RF treatment started.

The Patient complained of pain in the treatment area soon after RF treatment started. After discussion with the Patient, Dr CHAN put her on local anaesthesia and continued with RF treatment for a short while before she complained of pain again. According to Dr CHAN, he noted that there was some superficial skin epidermal sloughing compatible with burn injury to the treatment area. RF treatment was therefore abandoned. Wound dressing was done and anti-inflammatory analgesics were given to the Patient for pain control on the same day. The Patient was also asked to come again on the next day for review of her condition.

Thereafter, the Patient visited Dr CHAN’s clinic for review and treatment of her burn injury on various occasions. However, the Patient later lost confidence in Dr CHAN when she found the wound in her armpit did not improve. She decided not to return to see Dr CHAN again and sought treatment from government hospital and clinic instead. Meanwhile, her mother lodged this complaint against Dr CHAN with the Medical Council on 14 August 2012.

It is the unchallenged expert evidence of Dr LEE, the Secretary’s expert, that the use of radiofrequency to generate heat to treat axillary bromhidrosis by way of ablation of the axillary sweat glands was at the material time a new form of alternative treatment modality.

Dr CHAN might genuinely believe that RF treatment would yield better results than the conventional treatment by way of surgery. However, it was clearly stated in the Code of Professional Conduct (2009 edition) (the 'Code') that:—

- 22.1 Doctors ... in the private sector may apply new methods of treatment for appropriate patients under appropriate circumstances.*
- ...
- 22.3 Doctors when using NEW surgical procedures...on patients should give due consideration to the following:—*
- ...
- (b) The doctor should have good grounds, supported where necessary by experimental or trial results, to expect that such surgical procedures... would yield equal or better results than alternative methods of available treatment.*
- ...
- (d) The doctor should clearly explain to the patient the nature of the surgical procedure..., as well as alternative methods of available treatment. Informed consent from the patient is required for invasive procedures.*
- ...
- 22.5 Doctors are reminded that they may be asked to justify their action. Failure to adhere to the above principles may result in disciplinary action.*
- ...
- 24.1 A doctor utilizing complementary/alternative treatment modalities should ensure that:—*
- ...
- (c) informed consent has been obtained after the following have been properly explained to the patient:—*
- (i) the benefits of the procedure;*
  - (ii) the risks of the procedure;*
  - (iii) the fact that the procedure is a form of complementary/alternative treatment; and*
  - (iv) the prevailing conventional method available...'*

The Medical Council wished to emphasize that any explanation about the benefits and risks of the procedure should be balanced and sufficient to enable the patient to make an informed decision. In failing to properly and adequately advise the Patient of the lack of supporting medical literature at the material time as well as the limitations of RF treatment, Dr CHAN had failed to discharge his obligation to give a proper and balanced explanation of the proposed treatment to the Patient.

Indeed, Dr CHAN also accepted that the Patient had not been sufficiently advised of the risk of burn injury to the skin of the treatment area during RF treatment. In failing to do so, the Medical Council considered that Dr CHAN had deprived the Patient of necessary information to make an informed decision whether to proceed with the proposed treatment on an area which had been treated by laser 8 times before.

For these reasons, the Medical Council found Dr CHAN's conduct to have fallen below the standards expected of registered medical practitioners in Hong Kong. Accordingly, the Medical Council found Dr CHAN guilty of professional misconduct as charged.

Taking into account the whole circumstances and Dr CHAN's plea of mitigation, the Medical Council ordered that Dr CHAN's name be removed from the General Register for a period of one month and the removal order be suspended for a period of six months.

The orders are published in the *Gazette* in accordance with section 21(5) of the Medical Registration Ordinance. The full decision of the Medical Council is published in the official website of the Medical Council of Hong Kong (<http://www.mchk.org.hk>).