



**HKU  
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School of Clinical Medicine  
Department of Surgery  
香港大學外科學系



# ENT Masterclass 2024

New Frontiers in Laryngology

Program Book

10-11th May 2024

# Table of Contents

<b>Welcome Message</b>	<b>01</b>
<b>Organizing Committee</b>	<b>03</b>
<b>Program</b>	<b>05</b>
<b>Overseas Faculty</b>	<b>09</b>
<b>Local Faculty</b>	<b>14</b>
<b>Acknowledgement</b>	<b>22</b>

# Welcome Message

Dear friends and colleagues,

It is my great pleasure to welcome you to the ENT Masterclass 2024 on New Frontiers in Laryngology. We are honored to have renowned ENT surgeons, both from overseas and local, who will be sharing their expertise on the latest developments in laryngology, including the management of vocal cord paralysis, paediatric laryngology, and updates on the management of laryngeal and hypopharyngeal cancers.

We are particularly excited to announce that the highlight of the program will be the Wong Hau Yuen Visiting Professorship Lecture by Professor Andy Bertolin on Function Preserving Laryngectomy. We believe this will be an insightful and informative lecture that will provide new perspectives on laryngology.

The dissection workshop is a key highlight of the program, featuring sessions on endolaryngeal surgery, framework surgery on vocal cord palsy, and cancer surgery. The workshop is designed to provide you with hands-on experience using the latest techniques in laryngology. We hope that these practical sessions will allow you to further develop your skills and expertise in the field.

We extend a warm welcome to all the participants and hope that you find great enjoyment and fulfillment in attending the ENT Masterclass this year. We look forward to sharing this valuable educational experience with you and fostering a vibrant exchange of knowledge among all attendees.



Stephanie Nga-Sze Wong  
Course Director

# Welcome Message

Dear Friends and Colleagues,

Welcome to the ENT Masterclass 2024 on New Frontiers in Laryngology. The Masterclass will be conducted in 2 days. On day 1, we will have demonstration and cadaveric dissection workshop on endolaryngeal surgery, framework surgery for vocal cord palsy and total laryngectomy. On day 2, in-person symposium will be conducted in four sessions on recent advances in laryngology, management of vocal cord palsy, paediatrics laryngology and management of laryngeal carcinoma. This year, we are extremely honored to have invited Professor Andy Bertolin from Vittorio Veneto Hospital in Italy as the Wong Hau Yuen Visiting Professor. He will deliver the Wong Hau Yuen Visiting Professorship Lecture on 'Function Preserving Laryngectomy: transoral laser surgery and open partial horizontal laryngectomy'. Besides, we are greatly delighted to have the tremendous support from renowned overseas speakers including Professor Marina Mat Baki from Malaysia, Professor Wang Chen-Chi from Taiwan and Professor Raymond Tsang from Singapore and a team of local experts.

We cordially invite and welcome you to join our Masterclass in May.

Looking forward to seeing you!

Chief of Service  
Department of ENT  
Queen Mary Hospital



**Birgitta Yee-Hang Wong**  
Course Advisor

---

# Organizing Committee



Course Director

**Stephanie Nga-Sze Wong**

**Clinical Assistant Professor**

Department of Surgery  
School of Clinical Medicine  
Li Ka Shing Faculty of Medicine  
The University of Hong Kong



Co-Director

**Joseph Chun-Kit Chung**

**Consultant**

Department of Ear, Nose and Throat  
Queen Mary Hospital

**Honorary Clinical Associate Professor**

Department of Surgery  
School of Clinical Medicine  
Li Ka Shing Faculty of Medicine  
The University of Hong Kong



Co-Director

**Nikie Ho-Yee Sun**

**Associate Consultant**

Department of Ear, Nose and Throat  
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**Honorary Clinical Assistant Professor**

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Course Advisor

**Birgitta Yee-Hang Wong**

**Chief of Service** and **Consultant**

Department of Ear, Nose and Throat  
Queen Mary Hospital

**Honorary Clinical Associate Professor**

Department of Surgery  
School of Clinical Medicine  
Li Ka Shing Faculty of Medicine  
The University of Hong Kong

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# Organizing Committee



Member

**Ronald Man-Fung Chiang**

**Resident (Specialist)**

Department of Ear, Nose and Throat  
Queen Mary Hospital



Member

**Thomas Shi-Yeung Ho**

**Resident (Specialist)**

Department of Ear, Nose and Throat  
Queen Mary Hospital

**Honorary Clinical Tutor**

Department of Surgery  
School of Clinical Medicine  
Li Ka Shing Faculty of Medicine  
The University of Hong Kong



Member

**Alan Tsz-Lun Lau**

**Resident (Specialist)**

Department of Ear, Nose and Throat  
Queen Mary Hospital

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# Course Program

## Day 1 – Cadaveric Dissection

Surgical Skills Centre, 10/F, Laboratory Block  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

08:30 – 09:00	Registration	
09:00 – 10:20	<b>Endolaryngeal Surgery</b> Flexible Endoscopic Laryngeal Laser Laryngeal Augmentation Injection Airway Balloon Dilatation Botox Injection Laryngeal Suturing and Keeling	John Lee Peter Kwan Nikie Sun Yiu-Wing Ng
10:20 – 10:40	Tea Break	
10:40 – 12:00	<b>Endolaryngeal Surgery (continued)</b>	
12:00 – 13:00	Lunch	
13:00 – 14:30	<b>Framework Surgery for Vocal Cord Palsy</b> Open Thyroplasty Arytenoid Adduction	Yiu-Wing Ng Nikie Sun
14:30 – 14:50	Tea Break	
14:50 – 17:30	<b>Neck Dissection</b> Open Partial Horizontal Laryngectomy  Total Laryngectomy	Andy Bertolin  Raymond Tsang

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# Course Program

## Day 2 – Lectures

Lecture Theatre 3, Cheung Kung Hai Conference Centre, G/F, William MW Mong Block  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

08:30 – 08:45	Registration
08:45 – 09:00	Opening Remarks

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### Session I: What is New in 2024?

		Moderators:	Chi-Man Ngai Ki-Man Pai
09:00 – 09:20	Balloon Dilatation in Laryngology: Dysphagia and Airway Stenosis		Nikie Sun
09:20 – 09:40	Office Base Laryngology: Benign Lesion and Spasmodic Dysphonia		Marina Mat Baki
09:40 – 10:00	Transoral Robotic Surgery for Laryngeal and Hypopharyngeal Cancer		Chen-Chi Wang
10:00 – 10:15	Q&A		
10:15 – 11:00	<b>Wong Hau Yuen Visiting Professorship Lecture</b> Function Preserving Laryngectomy: Transoral Laser Surgery and Open Partial Horizontal Laryngectomy		Andy Bertolin
11:00 – 11:15	Q&A		
11:15 – 11:30	Tea Break		



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# Course Program

## Day 2 – Lectures

Lecture Theatre 3, Cheung Kung Hai Conference Centre, G/F, William MW Mong Block  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### Session II: Vocal Cord Palsy

Moderators: Iris Leung  
Yiu-Wing Ng

11:30 – 11:50	Transoral Injection Laryngoplasty	Peter Kwan
11:50 – 12:10	Laryngeal Electromyography Guided Injection Laryngoplasty	Chen-Chi Wang
12:10 – 12:30	Nonselective Laryngeal Reinnervation: Indications and Techniques	Marina Mat Baki
12:30 – 12:50	Speech Therapist for Hoarseness: Vocal Analysis and Voice Therapy	Ripley Wong
12:50 – 13:00	Q&A	
13:00 – 14:00	Lunch	

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### Session III: Paediatrics Laryngology

Moderators: Thomas Ho  
Peter Kwan

14:00 – 14:45	Management of Paediatric Airway and Laryngology	Birgitta Wong
14:45 – 15:05	Paediatric Voice and Swallowing	Yoyo Yiu
15:05 – 15:25	Recurrent Respiratory Papillomatosis: Prevention and Management	Yiu-Wing Ng
15:25 – 15:40	Q&A	
15:40 – 16:00	Tea Break	

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# Course Program

## Day 2 – Lectures

Lecture Theatre 3, Cheung Kung Hai Conference Centre, G/F, William MW Mong Block  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### Session IV: Update on Management of Laryngeal and Hypopharyngeal Carcinoma

Moderators: Nikie Sun  
Ping-An Wu

16:00 – 16:20	Early Detection and Endoscopic Laryngopharyngeal Surgery for Early Malignancy	Ian Wong
16:20 – 16:40	Advances in Oncological Treatment for Laryngeal and Hypopharyngeal Carcinoma: Chemotherapy and Immunotherapy	Victor Lee
16:40 – 17:00	Management of Neck in Primary and Recurrent Laryngeal Carcinoma	Stephanie Wong
17:00 – 17:20	Pearls and Pitfalls in Managing Laryngectomy Complications	Raymond Tsang
17:20 – 17:35	Q&A	
17:35 – 17:45	Closing Remarks	

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# Wong Hau Yuen

## Visiting Professor

**ANDY BERTOLIN**

**Director**

Department of Otolaryngology  
Vittorio Veneto Hospital  
Italy

## Overseas Faculty

### Overview

**MARINA MAT BAKI**

**Deputy Dean** (Industry & Community Partnerships Affairs)

Course Director of Laryngology Fellowship  
Department of Otorhinolaryngology head and Neck Surgery  
Faculty of Medicine, Universiti Kebangsaan Malaysia  
Hospital Canselor Tuanku Muhriz, UKM  
Malaysia

**RAYMOND KING-YIN  
TSANG**

**Associate Professor**

Department of Otolaryngology  
Yong Loo Lin School of Medicine  
National University of Singapore

**Senior Consultant**

Department of Otolaryngology - Head & Neck Surgery  
National University Hospital  
Singapore

**CHEN-CHI WANG**

**Director**

International Medical Service Center  
Department of Otorhinolaryngology-Head Neck Surgery  
Taichung Veterans General Hospital

**Professor**

Medical School of National Yang-Ming Chiao-Tung University  
Taipei  
Taiwan

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# Orator, Wong Hau Yuen Visiting Professor and Overseas Faculty

## Biography

### Andy Bertolin



Professor Andy Bertolin obtained a degree in Medicine and Surgery from the University of Padua in 2004. He became a specialist in Otolaryngology in Padua in 2009. Professor Bertolin is Director of the Department of Otolaryngology, Vittorio Veneto Hospital and Adjunct Professor at the University of Padua. He performed more than 1000 laryngeal surgery operations as chief surgeon.

In addition to being author and co-author of more than 50 publications in international journals, Professor Bertolin is speaker of over 100 national and international courses and conferences.

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# Overseas Faculty

## Biography



### Marina Mat Baki

Professor Dr. Marina Mat Baki is a Senior Consultant of otorinolaryngology who subspecialized in laryngology. She was awarded PhD in laryngology of the University College London in November 2014. The title of the PhD research is “Laryngeal reinnervation: feasibility studies and development of trial outcome measures”.

Professor Dr. Mat Baki’s special interests are laryngotracheal stenosis, laryngeal paralysis, voice disorders, phonosurgery, laryngeal carcinoma and sleep apnoea. She works closely with neurologists in Hospital Canselor Tuanku Muhriz (HCTM) in providing laryngeal electromyography test services at the neurology lab. She also collaborates with endocrine surgeons in managing cases of upper airway infiltration by thyroid carcinoma and actively manage iatrogenic acute recurrent laryngeal nerve injury by providing primary intervention in treating this complication. Professor Dr. Mat Baki has published 83 papers in Web of Science (WOS) and Scopus.

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# Overseas Faculty

## Biography

### Raymond King-Yin Tsang



Dr. Raymond Tsang graduated from the Chinese University of Hong Kong in 1994 and underwent otolaryngology training at Prince of Wales Hospital, affiliated with the same University. In 2001, he obtained his specialist qualification in otolaryngology and Fellowship of the Royal College of Surgeons of Edinburgh. He then sub-specialised in head and neck surgery. In 2015, Dr. Tsang received his Master of Surgery degree from the University of Hong Kong. He further pursued specialized training in robotic head and neck surgery at the University of Pennsylvania, working under the supervision of Professor Gregory Weinstein, and at the University of Texas MD Anderson Cancer Center, where he trained with Professor Chris Holsinger.

Before relocating to Singapore, Dr. Tsang held the position of Clinical Associate Professor in the Department of Surgery at the University of Hong Kong. Since 2023, he has been serving as Associate Professor in the Department of Otolaryngology - Head and Neck Surgery at the National University of Singapore and Senior Consultant at the National University Hospital.

Dr. Tsang's clinical research focuses on various aspects of head and neck surgery, including the application of robotic surgery, minimally invasive techniques, endoscopic surgery for anterior skull base lesions and management of swallowing disorders in patients after head and neck cancer treatment. He also has an extensive publication record, with over 100 peer-reviewed papers and book chapters. Notably, in 2017, Dr. Tsang was part of the team that conducted the first clinical trial utilizing the next generation of flexible robots for transoral head and neck surgery.

Dr. Tsang has held leadership roles in several professional institution and organizations. He was President of the Hong Kong Society of Otorhinolaryngology - Head and Neck Surgery, President of the Hong Kong Head and Neck Society, and Chairman of the Head and Neck Subspecialty Board of the Hong Kong College of Otorhinolaryngologists.

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# Overseas Faculty

## Biography

### Chen-Chi Wang



Professor Chen-Chi Wang is currently Director of the International Medical Service Center (IMSC) and attending physician in the Department of Otorhinolaryngology-Head and Neck Surgery at Taichung Veterans General Hospital (TCVGH). Additionally, he is Professor at the Medical School of National Yang-Ming Chiao-Tung University in Taipei.

Professor Wang is actively involved in various professional societies and organizations, including serving as President of the Taiwan Voice Society, Member of the Collegium Oto-Rhino-Laryngologicum Amicitiae Sacrum (CORLAS), Board Member of the Asia-Oceania Association of Oto-Rhino-Laryngological Societies, Standing Director of the Taiwan Head & Neck Society, and Executive Member of the Asia-Pacific Society of Thyroid Surgery and the International Guild of Robotic & Endoscopic Head Neck Surgery (IGReHNS).

Professor Wang's major research interests encompass Da-Vinci robotic surgery, the application of laryngeal electromyography, laryngology, as well as head and neck surgery.

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# Local Faculty

## Overview

### PETER KWAN

#### Chief of Service and Consultant

Department of Ear, Nose and Throat

Pamela Youde Nethersole Eastern Hospital

#### Honorary Clinical Associate Professor

Department of Surgery, School of Clinical Medicine

Li Ka Shing Faculty of Medicine, The University of Hong Kong

### JOHN LEE

#### Associate Consultant

Honorary Clinical Assistant Professor

Department of Otorhinolaryngology, Head and Neck Surgery

The Chinese University of Hong Kong

### VICTOR LEE

#### Chairperson and Clinical Associate Professor

Department of Clinical Oncology, School of Clinical Medicine

Li Ka Shing Faculty of Medicine, The University of Hong Kong

### YIU-WING NG

#### Honorary Clinical Assistant Professor

Department of Surgery, School of Clinical Medicine

Li Ka Shing Faculty of Medicine, The University of Hong Kong

### NIKIE SUN

#### Associate Consultant

Department of Ear, Nose and Throat

Queen Mary Hospital

#### Honorary Clinical Assistant Professor

Department of Surgery, School of Clinical Medicine

Li Ka Shing Faculty of Medicine, The University of Hong Kong



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# Local Faculty

## Overview

### **BIRGITTA WONG**

#### **Chief of Service and Consultant**

Department of Ear, Nose and Throat  
Queen Mary Hospital

#### **Honorary Clinical Associate Professor**

Department of Surgery, School of Clinical Medicine  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### **IAN WONG**

#### **Clinical Assistant Professor**

Department of Surgery, School of Clinical Medicine  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### **RIPLEY WONG**

#### **Manager**

Speech Therapy Department  
Queen Mary Hospital

#### **Honorary Assistant Professor**

Department of Surgery, School of Clinical Medicine  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### **STEPHANIE WONG**

#### **Clinical Assistant Professor**

Department of Surgery, School of Clinical Medicine  
Li Ka Shing Faculty of Medicine, The University of Hong Kong

### **YOYO YIU**

#### **Pediatric Speech Therapist**

Head of the Speech Therapy Unit  
Hong Kong Children's Hospital

---

# Local Faculty

## Biography



### Peter Ka-Chung Kwan

Dr. Peter Kwan graduated from the University of Hong Kong in 2007 and completed his specialist training in otorhinolaryngology in 2014. He underwent overseas training in laryngology in the University of Pittsburgh Voice Centre in 2016.

Dr. Kwan is currently Chief of Service and Consultant in the Department of Ear, Nose and Throat in Pamela Youde Nethersole Eastern Hospital and Honorary Clinical Associate Professor in the Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, the University of Hong Kong. He also serves as Council Member of the Hong Kong College of Otorhinolaryngologists.

His special interests in laryngology include office-based laryngological procedures and difficult airway management.



### John Lee

Dr. John Lee graduated from the Faculty of Medicine of the Chinese University of Hong Kong (CUHK) and had his specialist training in otorhinolaryngology under New Territories East Cluster (NTEC) and Kowloon East Cluster hospitals. He then underwent further training in facial plastic surgery and laryngology at Bizet Clinique Paris, University of Virginia, University of California San Francisco, Medical Voice Center and Helsinki University Hospital.

Dr. Lee currently holds the position of Associate Consultant in both Prince of Wales Hospital and Alice Ho Miu Ling Nethersole Hospital. He is also Honorary Clinical Assistant Professor of the Department of Otorhinolaryngology, Head and Neck Surgery, CUHK.

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# Local Faculty

## Biography

### Victor Lee



Professor Victor Lee is currently a Clinical Associate Professor in the Department of Clinical Oncology at The University of Hong Kong. He graduated at the University of Hong Kong in 2002. Following his internship, he pursued post-graduate residency training in clinical oncology at Tuen Mun Hospital in Hong Kong. In 2008, Professor Lee joined the Department of Clinical Oncology and obtained his Fellowship in Clinical Oncology from the Royal College of Radiologists in 2010. To further enhance his expertise, Professor Lee underwent specialized training in interstitial brachytherapy for head and neck cancers and sarcoma at Institut Gustave Roussy in Paris, France. He also received training in novel radiation techniques such as stereotactic radiosurgery and stereotactic ablative radiotherapy at Stanford University in the USA. In 2013, he received further training on stereotactic body radiation therapy for liver tumors at Princess Margaret Hospital in Toronto, Canada. In 2015, Professor Lee was awarded the HKCR 15A Traveling Fellowship. He also pursued subspecialty training in image-guided brachytherapy for cervical cancer and pediatric oncology.

Professor Lee's current research interests include clinical and genetic studies on nasopharyngeal cancer, head and neck cancers, lung cancers, liver cancers, and gastrointestinal cancers. He has published extensively in these areas. Besides, he has special interest in dosimetric studies on intensity-modulated radiation therapy, stereotactic radiosurgery, and selective internal radiation therapy with Yttrium-90 microspheres for liver tumors.

### Yiu-Wing Ng



Dr. Yiu-Wing Ng is currently a private practicing otorhinolaryngologist in Hong Kong. He also holds the position of Honorary Consultant in Hong Kong Sanatorium & Hospital and Honorary Clinical Assistant Professor at the Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, the University of Hong Kong. In addition, he serves as Secretary of the Hong Kong Society of Otorhinolaryngology, Head and Neck Surgery.

Dr. Ng received his training in the Department of Otorhinolaryngology at Queen Mary Hospital. Upon completion of his sub-specialty training, he further pursued elective training at several prominent ENT centers, including the University of Pittsburgh, Massachusetts General Hospital in Boston, Mount Sinai Hospital in New York, and the University of Springfield.

His focus lies in the field of laryngology, which includes the management of vocal cord paralysis, vocal cord laser microsurgery, and thyroid surgery.

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# Local Faculty

## Biography

### Nikie Ho-Yee Sun



Dr. Nikie Sun graduated from the Chinese University of Hong Kong. She has been Fellow of the Hong Kong College of Otorhinolaryngologists since 2021. During her training, she received the College Medal for best trainee research presentation competition and the Thomas Cheung Education Fund Scholarship. Dr. Sun currently holds the position of Associate Consultant at Queen Mary Hospital and Honorary Clinical Assistant Professor in the Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, The University of Hong Kong.

Dr. Sun's subspecialty interests focus on head and neck surgery and laryngology. She is undergoing the post-fellowship training program in head and neck surgery.

### Birgitta Yee-Hang Wong



Dr. Birgitta Wong is currently Chief of Service and Consultant of the Department of ENT, Queen Mary Hospital and Honorary Clinical Associate Professor of the Division of ENT, Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, the University of Hong Kong. She is also Vice President of the Hong Kong College of Otorhinolaryngologists and COC Chairman of ENT, Hospital Authority.

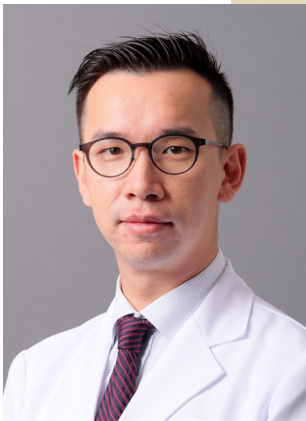
Dr. Wong graduated from the University of Hong Kong and obtained ENT specialist training in Queen Mary Hospital. She then received overseas training in the field of paediatric otorhinolaryngology at the Great Ormond Street Hospital for Children in London and the Hospital for Sick Children in Toronto.

Dr. Wong's clinical and research interests include paediatric airway diseases, obstructive sleep apnoea and allergy.

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# Local Faculty

## Biography



### Ian Yu-Hong Wong

Professor Ian Wong graduated from The University of Hong Kong in 2007 and attained his Fellowship in General Surgery from the Royal College of Surgeons of Edinburgh and the College of Surgeons of Hong Kong in 2014. Under the influence of his mentor Professor Simon Law at The University of Hong Kong, he has aspired to become a foregut surgeon. In 2015, he received further training from Dr. John Pandolfino and Dr. Nathaniel Soper of Northwestern University, Chicago, USA on function esophageal and esophageal motility disorder; Dr. Marco Patti of University of Chicago, USA on foregut surgery; and Professor Han-Kwang Yang of Seoul National University, South Korea on gastric cancer management. He became Associate Consultant at Queen Mary Hospital in 2017. He is currently Clinical Assistant Professor in the Division of Esophageal and Upper Gastrointestinal Surgery, Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, The University of Hong Kong.

Professor Wong specialises his research interest on esophageal and gastric cancer management; diagnosis and management of esophageal motility disorder and gastroesophageal reflux disease. In particular, he is collaborating with Grantham Hospital, Tuberculosis and Chest Unit, in the investigation on post-lung transplant gastroesophageal reflux disease.

He is currently the Secretary General of The International Society of Digestive Disease – Asian Pacific and International Committee of the Esophageal Cancer Education Foundation, International Society for Disease of the Esophagus. He is also a member of various different local and international scientific societies including the Society for Surgery of the Alimentary Tract and European Society for Diseases of the Esophagus and International Society for Disease of the Esophagus.

Professor Wong has been a seasoned contributor to high-impact international journals. He is also a regular reviewer of international peer reviewed journals, e.g. Diseases of the Esophagus and Journal of Clinical Gastroenterology. He is regularly invited to deliver lectures both locally and internationally.

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# Local Faculty

## Biography

### Ripley Wong



Ms. Ripley Wong is an experienced speech therapist in medical speech-language pathology. She is currently the Speech Therapy Department Manager of Queen Mary Hospital, Duchess of Kent Children's Hospital, TWGHs Fung Yiu King Hospital, Grantham Hospital, MacLehose Medical Rehabilitation Centre, and TWGHs Tung Wah Hospital.

Ms. Wong is active in teaching and has been appointed as Honorary Assistant Professor of the Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine of the University of Hong Kong since 2002. She also serves as Honorary Clinical Supervisor of the Department of Speech and Hearing Sciences, the University of Hong Kong; Division of Speech Therapy, Department of Otorhinolaryngology, Head and Neck Surgery, Faculty of Medicine, The Chinese University of Hong Kong; Department of Chinese and Bilingual Studies, The Hong Kong Polytechnic University and the Education University of Hong Kong.

Ms. Wong's clinical interest includes voice rehabilitation and rehabilitation of patients after head and neck cancer management. She works closely with these patients in the past thirty years. Ms. Wong is also co-author of various researches on voice, speech, hearing and swallowing rehabilitation. She currently serves an Honorary Advisor of the New Voice Club of Hong Kong.

### Stephanie Nga-Sze Wong



Professor Stephanie Wong graduated from the Chinese University of Hong Kong in 2010 and received her training in otolaryngology in the New Territories West Cluster of Hospital Authority. She obtained her specialist qualification in otolaryngology and Fellowship of the Royal College of Surgeons of Edinburgh in 2018 and sub-specialised in the field of head and neck surgery.

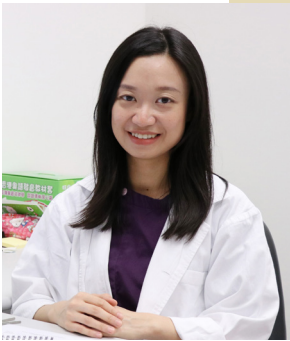
Currently, Professor Wong is the Clinical Assistant Professor in the Department of Surgery, School of Clinical Medicine, LKS Faculty of Medicine, the University of Hong Kong and the Honorary Associate Consultant in the Department of Surgery and the Department of Ear, Nose and Throat, Queen Mary Hospital.

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# Local Faculty

## Biography

### Yoyo Yiu



Miss Yoyo Yiu is a pediatric speech therapist and the Head of the Speech Therapy Unit at the Hong Kong Children's Hospital. With a master's degree in Pediatric and Adolescent Medicine from HKU and training at renowned international medical centers, including the Children's Hospital of Philadelphia and Chang Gung Memorial Hospital, Miss Yiu specializes in managing voice and swallowing problems in children.

Miss Yiu's clinical interests lie in the management of communication and swallowing disorders associated with conditions such as brain tumors, congenital heart disease, and cleft palate. She feels fortunate to be one of the few therapists in the field who have the opportunity to utilize advanced instruments such as Fiberoptic Endoscopic Evaluation of Swallowing and Ultrasound, specifically tailored for the pediatric population, in collaboration with the ENT team.

Miss Yiu actively contributes to research, with her findings being published in peer-reviewed journals and presented at scientific conferences. She is also passionate about professional training. In addition to conducting teaching sessions for speech therapists and students, she provides inter-professional training to professionals in fields such as radiology, dentistry and nursing, expanding her commitment to knowledge sharing and collaboration across various disciplines.

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# Acknowledgements

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- (1) Haugen et al., 2015 American Thyroid Association Management guidelines for adult patients. *Thyroid*, 2016
- (2) Gonzalez et al., A 10-Genes Classifier for Indeterminate Thyroid Nodules: Development and Multicenter Accuracy Study. *Thyroid*, 2017
- (3) Zafereo et al., A Thyroid Genetic Classifier Correctly Predicts Benign Nodules with Indeterminate Cytology: Two Independent, Multicenter, Prospective Validation Trials. *Thyroid*, 2020
- (4) Olmos et al., ThyroidPrint®: clinical utility for indeterminate thyroid cytology. *End Rel Cancer*, 2023

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\*ThyroidPrint® LDT currently available as a Laboratory Developed Test in GeneproDx' CAP accredited laboratory in Santiago de Chile (Chile).

\*\*Idylla™ ThyroidPrint® is currently under development and planned to be released as an assay for Research Use Only, not for use in diagnostic procedures.

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# TAKE CONTROL OF RECURRENT NASAL POLYPS WITH NUCALA<sup>1</sup>



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**THE ONLY BIOLOGIC EXCLUSIVELY STUDIED IN PATIENTS WITH ≥1 PREVIOUS NASAL SURGERY<sup>1,3-5</sup>**

- Over 5X reduction in median nasal obstruction VAS score vs. placebo (-0.82 vs -4.41, treatment difference -3.14, 95% CI -4.09 to -2.18, adjusted  $p < 0.0001$ )\*.<sup>1</sup>
- 69% reduction in need for surgery vs. placebo in patients with  $\geq 300$  eosinophils/ $\mu\text{L}$ .<sup>5</sup>
- 73% (n=150) of patients experienced improvement in HRQoL.<sup>1</sup>



**NUCALA**   
mepolizumab

HRQoL, health-related quality of life; VAS, visual analogue scale

SYNAPSE was a randomized, double-blind, placebo-controlled, parallel-group, multicenter phase 3 trials enrolling 407 adults with recurrent, refractory, severe, bilateral nasal polyp symptoms assigned to receive either mepolizumab or placebo. The co-primary endpoints, change from baseline in total endoscopic nasal poly score at 52 week and mean nasal obstruction VAS score during weeks 49-52, were met ( $p < 0.0001$  for both endpoints). Treatment-related AEs were reported in 15% and 9% of patients receiving mepolizumab and placebo, respectively.<sup>1</sup>

Nucala (mepolizumab) for injection in pre-filled pen is indicated as an add-on therapy for adult patients with inadequately controlled hypereosinophilic syndrome (HES) without an identifiable non-haematologic secondary cause. Nucala is also indicated as an add-on therapy for severe eosinophilic asthma (SEA), adults with severe CRSwNP for whom therapy with systemic corticosteroids and/or surgery do not provide adequate disease control, and eosinophilic granulomatosis with polyangiitis (EGPA).<sup>2</sup>

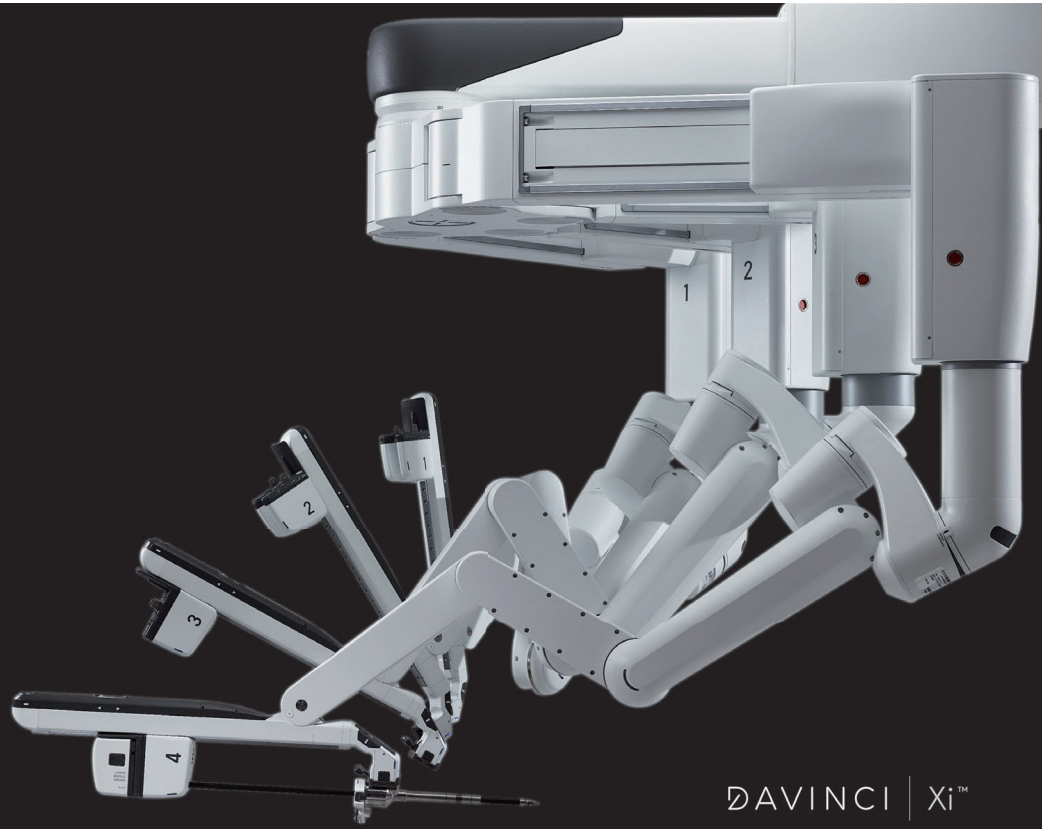
**Important Safety Information<sup>2</sup>** • Nucala (mepolizumab) 100 mg solution for injection in pre-filled pen **Contraindications:** • Hypersensitivity to the active substance or to any excipients of Nucala solution for injection. **Warnings and Precautions:** • Not to be used to treat acute asthma exacerbations. Asthma-related adverse symptoms or exacerbations may occur during treatment. • Abrupt discontinuation of corticosteroids after initiation of Nucala therapy is not recommended. • Acute and delayed systemic reactions, including hypersensitivity reactions (e.g. anaphylaxis, urticaria, angioedema, rash, bronchospasm, hypotension), have occurred following administration of Nucala. • In the event of a hypersensitivity reaction, appropriate treatment as clinically indicated should be initiated. • Pre-existing helminth infections should be treated before starting Nucala. • Nucala has not been studied in patients with organ threatening or life-threatening manifestations of EGPA • Nucala has not been studied in patients with life-threatening manifestations of HES. **Adverse Events:** Most commonly reported adverse reactions in: • Severe eosinophilic asthma: headache, injection site reactions and back pain. • CRSwNP: headache and back pain. • EGPA: headache, injection site reactions and back pain • HES: headache, urinary tract infection, injection site reactions and pyrexia.



**REFERENCES:** 1. Han JK, Bachert C, Fokkens W, et al. Mepolizumab for chronic rhinosinusitis with nasal polyps (SYNAPSE): a randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet Respir Med.* 2021;9(10):1141–1153. 2. Nucala (mepolizumab) 100mg solution for injection in pre-filled pen Hong Kong Full Prescribing Information. Version HK112021 (GDS14/EMA20211112) 3. Bachert C, Han JK, Desrosiers MY, et al. Efficacy and safety of benralizumab in chronic rhinosinusitis with nasal polyps: A randomized, placebo-controlled trial. *J Allergy Clin Immunol.* 2022;149(4):1309–1317.e12. 4. Gevaert P, Omachi TA, Corren J, et al. Efficacy and safety of omalizumab in nasal polyposis: 2 randomized phase 3 trials. *J Allergy Clin Immunol.* 2020;146(3):595–605. 5. Bachert C, Han JK, Desrosiers M, et al. Efficacy and safety of dupilumab in patients with severe chronic rhinosinusitis with nasal polyps (LIBERTY NP SINUS-24 and LIBERTY NP SINUS-52): results from two multicentre, randomised, double-blind, placebo-controlled, parallel-group phase 3 trials. *Lancet.* 2019;394:1638–1650.

Please read the full prescribing information prior to administration.

**The material is for the reference and use by healthcare professionals only.** Unless noted, images and patient profiles are for illustrative purposes only. For adverse event reporting, please call GlaxoSmithKline Limited at (852) 3189 8989 (Hong Kong), or send an email to us at HKAdverseEvent@gsk.com. Full prescribing information is available upon request. Trade marks are owned by or licensed to the GSK group of companies. ©2023 GSK group of companies or its licensor.



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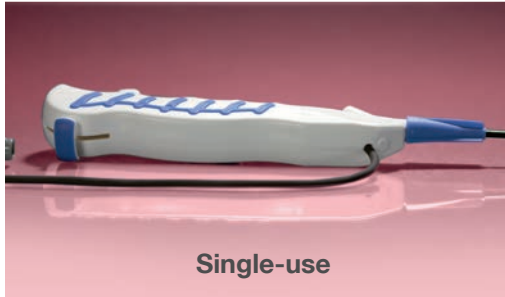
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Prevention of **OROPHARYNGEAL**  
and other HPV-related

**HEAD AND NECK  
CANCERS** <sup>1\*</sup>

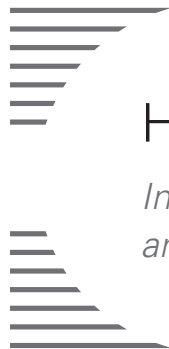
**OROPHARYNGEAL<sup>2</sup>**  
**HYPOPHARYNGEAL<sup>2</sup>**  
**LARYNGEAL<sup>2</sup>**  
**TONGUE<sup>2</sup>**

\*caused by HPV types 16, 18, 31, 33, 45, 52 and 58, from the age of 9 through 45 years

References: 1. Hong Kong Product Circular (GARDASIL 9 MSD) 2. Centers for Disease Control and Prevention. Head and Neck Cancers. <https://www.cdc.gov/cancer/headneck/index.htm> Accessed on: April 13, 2023.

**Selected Safety Information Indications:** GARDASIL 9 is indicated for active immunisation of individuals from the age of 9 years against the following HPV diseases: Penile Intraepithelial Lesions and cancers affecting the cervix, vulva, vagina and anus caused by vaccine HPV types: Cervical warts (Condyloma acuminata) caused by specific HPV types: GARDASIL 9 is indicated for active immunisation of individuals from the age of 9 through 45 years against the following HPV diseases: Cancers affecting the oropharynx and other head and neck sites caused by HPV types 16, 18, 31, 33, 45, 52, and 58. **Contraindications:** Hypersensitivity to the active substances or to any of the excipients. Individuals with hypersensitivity after previous administration of GARDASIL 9 or Gardasil should not receive GARDASIL 9. **Precautions:** The decision to vaccinate an individual should take into account the risk for previous HPV exposure and potential benefit from vaccination. As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of rare anaphylactic reactions following the administration of the vaccine. Vaccines should be observed for approximately 15 minutes after vaccination. It is important that procedures are in place to avoid injury from fainting. Vaccination should be postponed in individuals suffering from an acute severe febrile illness. However, the presence of a minor infection, such as a mild upper respiratory tract infection or low-grade fever, is not a contraindication for immunisation. As with any vaccine, vaccination with GARDASIL 9 may not result in protection in all vaccine recipients. The vaccine will only protect against diseases that are caused by HPV types targeted by the vaccine. Therefore, appropriate precautions against sexually transmitted diseases should continue to be used. The vaccine is for prophylactic use only and has no effect on active HPV infections or established clinical disease. The vaccine has not been shown to have a therapeutic effect. The vaccine is therefore not indicated for treatment of cervical, vulvar, vaginal, and oropharyngeal and other head and neck cancers, high-grade cervical, vulvar, vaginal and dysplastic lesions or genital warts. It is also not intended to prevent progression of other established HPV-related lesions. GARDASIL 9 does not prevent lesions due to a vaccine HPV type in individuals infected with that HPV type at the time of vaccination. Vaccination is not a substitute for routine cervical screening. Routine cervical screening remains critically important and should follow local recommendations. There are no data on the use of GARDASIL 9 in individuals with impaired immune responsiveness. Safety and immunogenicity of a HPV vaccine have been assessed in individuals aged from 7 to 12 years who are known to be infected with human immunodeficiency virus (HIV). Individuals with impaired immune responsiveness, due to either the use of potent immunosuppressive therapy, a genetic defect, Human Immunodeficiency Virus (HIV) infection, or other causes, may not respond to the vaccine. This vaccine should be given with caution to individuals with thrombocytopenia or any coagulation disorder because bleeding may occur following an intramuscular administration in these individuals. There are no safety, immunogenicity or efficacy data to support interchangeability of GARDASIL 9 with bivalent or quadrivalent HPV vaccines. **Adverse events:** The most common adverse reactions observed with GARDASIL 9 were injection site adverse reactions and headache. These adverse reactions usually were mild or moderate in intensity. Very common (≥1/10) or common (≥1/100 to <1/10) side effects include headache, injection site pain, swelling or erythema, dizziness, nausea, pyrexia, fatigue, injection site pruritus or bruising, etc. For detailed adverse events, please consult the full prescribing information. **Before prescribing, please consult the full prescribing information.**

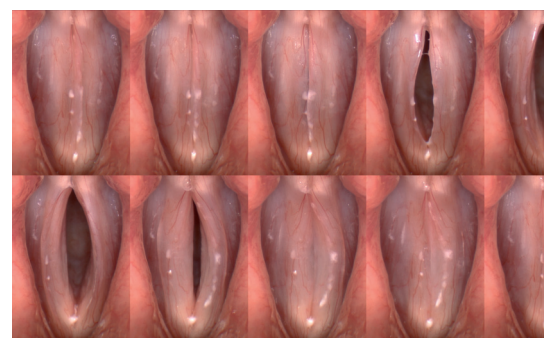
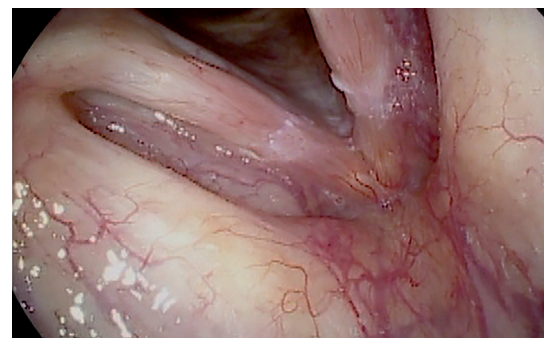




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(dupilumab)

DUPIXENT targets IL-4 and IL-13, key and central drivers of type 2 inflammation, in CRS with nasal polyps<sup>1,3,4</sup>

50%

reduction in nasal congestion<sup>1,a</sup>



83%

fewer patients required surgery or revision surgery<sup>1</sup>



74%

fewer patients required systemic steroids<sup>1</sup>



>2 point

improvement in polyp burden<sup>1,b</sup>



2 out of 3

patients were able to smell again<sup>1,2,c</sup>



<sup>a</sup> -1.35 improvement at Week 52 (compared to a baseline score of 2.48) vs -0.37 improvement with placebo (compared to a baseline score of 2.38) (LSM difference: -0.98 [95% CI: -1.17, -0.79]). -1.25 improvement at Week 24 (primary endpoint) from a baseline score of 2.46 with DUPIXENT 300 mg Q2W + INCS (n=295, pooled DUPIXENT arms) vs -0.38 improvement from a baseline score of 2.38 with placebo + INCS (n=153) (LSM difference: -0.87 [95% CI: -1.03, -0.71]).<sup>1</sup>

<sup>b</sup> -2.24 from a baseline score of 6.07 (secondary endpoint) with DUPIXENT 300 mg Q2W + INCS (n=150) vs 3% worsening with placebo + INCS (n=153) (0.15 from a baseline score of 5.96) (LSM difference: -2.40 [95% CI: -2.77, -2.02]). -1.71 improvement at Week 24 (primary endpoint) from a baseline score of 6.18 with DUPIXENT 300 mg Q2W + INCS (n=295, pooled DUPIXENT arms) vs 0.10 worsening from a baseline score of 5.96 with placebo + INCS (n=153) (LSM difference: -1.80 [95% CI: -2.10, -1.51]).<sup>1</sup>

<sup>c</sup> Anosmia, UPSIT score ≤ 18: 79% (n=228/287) of patients in the pooled arm taking DUPIXENT 300 mg Q2W + INCS had anosmia at baseline, which was reduced to 30% (n=84/280) as per UPSIT score at Week 24.

CRS, chronic rhinosinusitis; INCS, intranasal corticosteroids; LSM, least squares mean; Q2W, once every 2 weeks; UPSIT, University of Pennsylvania Smell Identification Test.

References: 1. DUPIXENT Hong Kong Prescribing Information. 2. Bachert C, et al. Lancet. 2019 Nov 2;394(10209):1638-1650. 3. Gandhi NA, et al. Nat Rev Drug Discov. 2016 Jan;15(1):35-50. 4. Schleimer RP. Annu Rev Pathol. 2017 Jan 24;12:331-357.

**Presentation:** Dupilumab solution for injection in a pre-filled syringe with needle shield.

**Indications:** Atopic Dermatitis (AD): Moderate-to-severe AD in adults and adolescents ≥12 years who are candidates for systemic therapy; severe atopic dermatitis in children 6 to 11 years old who are candidates for systemic therapy. Asthma: In adults and adolescents ≥12 years as add-on maintenance treatment for severe asthma with type 2 inflammation characterised by raised blood eosinophils and/or raised FeNO, who are inadequately controlled with high dose ICS plus another medicinal product for maintenance treatment. Chronic rhinosinusitis with nasal polyps (CRSwNP): As an add-on therapy with intranasal corticosteroids for the treatment of adults with severe CRSwNP for whom therapy with systemic corticosteroids and/or surgery do not provide adequate disease control (for 300mg) **Dosage & Administration:** Subcutaneous injection. AD adults: Initial dose of 600 mg (two 300 mg injections), followed by 300 mg every other week. AD adolescents (12-17y/o): Body weight <60 kg - initial dose of 400 mg (two 200mg injections), followed by 200 mg every other week. Body weight ≥60 kg - same dosage as adults. Dupilumab can be used with or without topical corticosteroids. Topical calcineurin inhibitors may be used, but should be reserved for problem areas only, e.g. face, neck, intertriginous and genital areas. Consider discontinuing treatment in patients who have shown no response after 16 weeks. AD Children (6-11y/o): Body weight 15kg - <60 kg - initial dose of 300mg on Day 1 followed by 300mg on Day 15, then 300mg every 4 weeks. Body weight ≥60 kg - same dosage as adults. \* The dose may be increased to 200 mg Q2W in patients with body weight of 15 kg ~ < 60 kg based on physician's assessment. Asthma: Initial dose of 400 mg, followed by 200 mg every other week. For patients with severe asthma and on oral corticosteroids or with severe asthma and co-morbid moderate-to-severe AD or adults with co-morbid severe CRSwNP - initial dose of 600 mg, followed by 300 mg every other week. Patients receiving concomitant oral corticosteroids may reduce steroid dose gradually once clinical improvement with dupilumab has occurred. The need for continued dupilumab therapy should be considered at least annually as determined by a physician. CRSwNP: for adult patients initial dose of 300 mg followed by 300 mg given every other week. Consideration should be given to discontinuing treatment in patients who have shown no response after 24 weeks of treatment for CRSwNP. Some patients with initial partial response may subsequently improve with continued treatment beyond 24 weeks. If a dose is missed, administer it asap and thereafter, resume dosing at the regular scheduled time. **Contraindications:** Hypersensitivity to dupilumab or any of the excipients. **Precautions:** Safety and efficacy in children <6 years or <15kg not been established. Not be used to treat acute asthma symptoms, acute exacerbations, acute bronchospasm or status asthmaticus. Do not discontinue corticosteroids abruptly upon start of dupilumab. Reduction should be gradual and performed under supervision of a physician; it may be associated with systemic withdrawal symptoms and/or unmask conditions previously suppressed by systemic corticosteroid therapy. Biomarkers of type 2 inflammation may be suppressed by systemic corticosteroid use. If systemic hypersensitivity reaction occurs, discontinue dupilumab and initiate appropriate therapy. Be alert to vasculitic rash, worsening pulmonary symptoms, cardiac complications, and/or neuropathy presenting in patients with eosinophilia. Treat pre-existing helminth infections before initiating dupilumab. If patients become infected while receiving dupilumab and do not respond to anti-helminth treatment, discontinue dupilumab until infection resolves. Patients who develop conjunctivitis and keratitis that does not resolve following standard treatment should undergo ophthalmological examination. AD patients with comorbid asthma should not adjust or stop asthma treatments without consultation with physicians. Carefully monitor patients after discontinuation of dupilumab. Do not give live and live attenuated vaccines concurrently with dupilumab. Patients should be brought up to date with immunisations before starting dupilumab. **Drug Interactions:** Immune responses to Tdap vaccine and meningococcal polysaccharide vaccine were assessed. Patients receiving dupilumab may receive concurrent inactivated or non-live vaccinations. **Pregnancy and lactation:** Should be used during pregnancy only if potential benefit justifies potential risk to foetus. Unknown whether dupilumab is excreted in human milk or absorbed systemically after ingestion. Decision must be made whether to discontinue breast-feeding or dupilumab taking into account benefit of breast feeding for the child and benefit of therapy for the woman. **Undesirable effects:** Most common adverse reactions reported - injection site reactions, conjunctivitis, oral herpes and eosinophilia. Safety profile observed in adolescents consistent with that seen in adults. For other undesirable effects, please refer to the full prescribing information. **Preparation:** 2 x 300mg/2ml in pre-filled syringe with needle shield, 2 x 200mg/1.14ml in pre-filled syringe with needle shield. **Legal Classification:** Part 1, First & Third Schedules Poison **Full prescribing information is available upon request.** Part 1, First & Third Schedules Poison **Full prescribing information is available upon request.** API-HK-DUP-22.06

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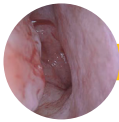
The 1788 Platform

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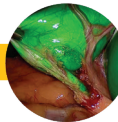
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Level 6



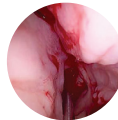
ICG SPY Overlay mode

Utilize tone mode, designed to balance lighting across the field of view by enhancing posterior lighting without compromising foreground detail.



### High Dynamic Range (HDR)

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62.5x more visible colors may enable enhanced ability to detect subtle differences in color variation of tissues and structures.



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REFERENCES: 1. Turnbull RS. J Can Dent Assoc. 1995 Feb;61(2):127-34. 2. Schoenwald RD, et al. Int J Tissue React. 1987;9(2):93-7. 3. Simard-Savoie S, Forest D. Curr Ther Res 1978;23:734-745.

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# Notes

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# Notes

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# Notes



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