



In This Issue **Bioethics on Internet**  
本期主題 **生命倫理網上資訊**

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香港生命倫理學會網址 <http://logic.csc.cuhk.edu.hk/~B086712/bioethics.htm>

## FEATURE ARTICLES 專題文章

### Getting in touch with bioethics on the web - where to start?

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Browsing bioethics websites is simple, pick any search engine and enter "bioethics" as search word, and you will be presented with numerous websites. The real question is therefore: with so many to choose from, where to get started?

Many websites are operated from university philosophy / ethics departments or centres. Entering anyone will link you to other academic sites. A good point of entrance, I find, is the one at Center for Bioethics at University of Pennsylvania:

<http://www.med.upenn.edu/bioethics>

The site recently requires a brief registration (free) for first visitors. Upon entering, you will find some theme-based topics to browse, e.g. "bioethics for beginners" - quick reading, gives a favour of what the core materials are. Or try "cloning and genetics" - this is one of the most organised section with updates on this recently interesting field, including what is happening on legislation side, and what is in the mass media.

As with most other bioethics sites, there is a "bioethics resources" link to other major centres. Or you can look inside the section on "bioethics organisations and institutions" for a rather more comprehensive list.

An alternative to the University of Pennsylvania site is one operated by the Medical College of Wisconsin:

[www.mcw.edu/bioethics](http://www.mcw.edu/bioethics)

Exploration is quite similar to the procedures described above. This site has generous displays of transcripts of academic and information papers on bioethical topics written by its university faculty, available at

<http://www.mcw.edu/bioethics/smatic.html/>

For instance, here you may read a paper updating the situations of legalising physician-assisted suicide in Oregon.

If you don't have appetite for academic sites (who can digest all the

philosophies?) a very user-friendly and visually pleasant site is:

<http://www.midbio.com>

This is the site of the Midwest Bioethics Center. It is more community-oriented, offering for instance interesting cases for thoughts and debates. Under "what is bioethics" you can make connections to other sites of interest.

Suppose you are not a passive explorer and wish to participate interactively or do more specific searches, the following two sites are worthwhile:

<http://www.hsc.usc.edu/~mbernste/>

Here is a well-organised site of bioethics discussion pages. Discussion pages allow you to participate in streams of chit-chats and serious conversations on subjects of concern. Some discussion groups are "Thinking about ethics", "cloning of human", "physician-assisted suicide", among others.

Another site for active explorers:

<http://igm.nlm.nih.gov>

This is a site organised by the National Library of Medicine. The attraction is a free BIOETHICSLINE, analogous to the MEDLINE well-known for searching medical and health literature. With very simple keyword searches you have direct access to citations for journal abstracts, book titles etc. The particularly impressive feature is that you can specify whether your interest in search is from academic, popular, analytic, philosophical or other perspectives, rendering the citations much more likely to be relevant.

Finally, a site which I find quite special because it is hosted by the effort of one single individual yet has much useful contents:

<http://ethics.acusd.edu/>

The site is maintained by Prof. Lawrence M Hinman. It is a resource site for use by ethics instructors and students. References and literature are organised by themes. The interests are more in Philosophical Ethics and Applied Ethics. Under the latter are some bioethics themes such as (again) euthanasia, environmental ethics, reproductive technology.

The sites briefly introduced above are my preferred sites, not necessarily the best sites. You will have to decide what suits you best - take a few minutes (well, may be hours) to try the different site links to bookmark your favourites.





## Organ donation in Hong Kong and some useful websites

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### Introduction

This article aims to give an overview of organ donation in public hospitals in Hong Kong and describe the legal framework governing organ donation. Some useful website resource on organ transplantation will also be included.

### Organ donation in public hospitals in Hong Kong

Hong Kong had its first organ transplantation dated back to 1969, when the first kidney transplantation was performed. Today, transplant operations (kidney, liver, heart, lung, heart-lung, cornea, heart valves, skin, sclera, bone marrow and bone) are performed in Hong Kong with good survival rates comparable if not better than most overseas countries. Nevertheless, activities have been limited by lack of cadaveric donors. The Chinese tradition of keeping the dead body intact is the major cause.

The average waiting time for renal transplant now stands at 4.4 years with the longest waiting time at 21.5 years. Transplantation of other organs / tissues faced similar limitation. Table 1 gives a summary on organ/ tissue donation in public hospitals in Hong Kong.

We believe that promotion of organ donation requires continuous and concerted efforts by the community and health care professionals. Besides promoting the organ donation card, emphasis should also be put on encouraging discussions of organ donation amongst family members so that when the critical moment comes, the important decision 'to give life after death' could be promptly made.

### The Human Organ Transplant Ordinance in Hong Kong

In Hong Kong transplant activities are governed by the Human Organ Transplant (HOT) Ordinance which came into effect on 1 April 1998.

The Ordinance prohibits commercial dealings in human organ intended for transplant, restricts the transplanting of human organs between living persons not genetically related and regulates the import of human organs intended for the use of transplantation. The Ordinance instrumented the setting up of a Human Organ Transplant Board. Prior approval must be obtained from the HOT Board for removal or transplantation of organ(s) involving a living donor, unless the donor is related to the recipient either genetically or by marriage which has subsisted for at least 3 years.

**Table 1. TOTAL NUMBER OF ORGAN/TISSUE DONATION IN HOSPITALS**  
(from 1.1.1994 to 31.12.1998)

Organ/Tissue	1994	1995	1996	1997	1998	Waiting
<b>Kidney</b>						
Living	16	19	28	23	37	1,000
Cadaveric	44	44	58	47	33	
<b>Liver</b>						
Living	4	11	15	1	12	100
Cadaveric	8	12	12	14	15	
<b>Heart</b>	1	4	3	7	2	
<b>Lung</b>	0	1	0	1	1	20
<b>Heart-lung</b>	0	1	0	0	0	
<b>Heart-valve</b>	0	0	0	3	2	76
<b>Cornea (piece) *</b>	143	169	206	204	253	200
<b>Bone</b>	2	10	10	6	3	80
<b>Skin</b>	5	16	30	17	25	Uncertain
<b>Tendon and Ligament</b>	0	0	0	2	0	
<b>TOTAL</b>	<b>223</b>	<b>287</b>	<b>362</b>	<b>325</b>	<b>383</b>	

\* These figures include corneas procured by the Hong Kong Eye Bank in Hong Kong

Prescribed certificates and supporting documents must be submitted to the HOT Board before the transplant of imported organs, and information on all human organ removals, transplants and disposals must be submitted to the HOT Board after the relevant events have taken place. It is a criminal offence for any person to take part in organ trading in Hong Kong. For transplant operations involving living donors, the HOT Ordinance also requires both the donor and recipient to be interviewed by an independent medical practitioner and that each has understood the procedure, the risks involved and his entitlement to withdraw consent at any time. In view of the difficulties in complying with the above legal requirements for operations involving patients incapable of giving consent, such as young children and unconscious patients, the Government has recognised the need to amend the HOT Ordinance and has recently gazetted the Human Organ Transplant (Amendment) Bill 1999. The amendment will allow the HOT Board to give approval and for the transplant operation to proceed even if the recipient is incapable of giving consent under the following conditions:

- An independent medical practitioner has certified that the recipient is incapable of understanding the explanation as required by the law by reason of certain prescribed conditions, for example, the patient being unconscious.
- An independent medical practitioner has certified that it would not be in the best interests of the recipient to wait until he is capable of understanding the explanation.
- The transplant surgeon has kept a medical report in writing stating the reason why the legal requirement on getting consent from the recipient cannot be complied with.

It is expected that the HOT Ordinance would further be debated amongst the medical profession, patients, politicians and the public in the coming months. Besides the problems on patient's incapacity in understanding explanations, the issue of defining what constitutes an "organ", would also need to be addressed.

### Useful websites

- Transweb-Transplantation and Donation  
<http://www.transweb.org/>  
A very extensive and comprehensive site for transplantation and organ donation. It provides worldwide source of information and resources for transplant patients, families and clinicians on transplant information, medical advances, issues and problems.
- Website associated with Organ and Tissue Donation and Transplantation.  
<http://www.argonet.co.uk/body/lmks.html>  
A comprehensive and useful list of website addresses for patients, families, physicians and research workers.
- The Canadian Association of Transplantation  
<http://www.transplant.ca/>  
A useful website with resources for public & physicians including new publications.
- The transplantation Society of Australia and New Zealand Inc.  
<http://www.racp.edu.au/tsanz/>  
Useful website for professionals including scientific papers and transplant protocols.
- Legislation in Hong Kong - Bilingual Laws Information System by the Department of Justice.  
<http://www.justice.gov.hk/>
- British Organ Donor Society - BODY  
<http://www.argonet.co.uk/body/index.html>  
Information for families and professionals involved in organ donation and transplantations. An information source for the public and media as well. "Hot topics" for discussion will be found in the website.





## 淺談生命倫理的網上資源

自從七十年代發現分子克隆的方法後，經二十多年的發展，今天生物科技已滲透到人類生活的許多個層面；例如在醫學方面，基因診斷及基因治療將大大改變下一世紀醫療系統的面貌；在農業方面，遺傳工程能顯著地加強農作物的價值及適應環境的能力，使農作物無論在產量上或質素上皆有所提高。十多年前當作者在唸中學時，有關科技的文章通常只能在副刊中找到。到了今天，生物科技的報導往往佔據報刊的頭條位置。正因為生物技術新發現的曝光率大增，公眾人士對生物科技引發的關注也明顯增多。互聯網作為一個發展迅速的新媒體，自然成為各方對生命倫理發表意見及展開討論的理想園地。本文旨在推介一些較具規模的網上資源供讀者參考。

### (一) 人類基因組計劃 (Human Genome Project) 所引起的倫理、法律及社會問題

網址：[www.ornl.gov/hgmis/resource/elsi.html](http://www.ornl.gov/hgmis/resource/elsi.html)

這個與生命倫理有關的網址相信是全球最大的，因為自從人類基因組計劃在一九九〇年展開以來，美國國家衛生局及能源部每年從撥款中抽出百分之三至五作為研究此計劃引發的倫理、法律及社會問題的經費。在這八年裏，曾召開多次研討會及發表相當多文章及報告書。這些相關的資料完整及有系統地放在網頁裏供瀏覽者閱讀及下載。瀏覽者能輕鬆地獲得關於人類基因組計劃的寶貴資料；例如計劃的目標、背景及進度，基因診斷引起的公平、私隱權、可信度、心理衝擊、標籤效應、生殖抉擇及商品化等問題。

### (二) 美國國家生命倫理文獻參考中心

網址：[www.georgetown.edu/research/nrcbl/](http://www.georgetown.edu/research/nrcbl/)

此中心所收集的有關於生命倫理的文獻為全世界最多，通過此網頁可連接一個名為 BIOETHICSLINE 的資料庫。此資料庫是由超過五萬份文獻引述所組成，包括期刊、剪報、書籍、政府報告及法律文件等，其中不少還附有文獻的摘錄。運用網頁提供的免費搜尋服務，便可輕易地在網上搜集生命倫理課題的文獻資料。

### (三) 賓夕凡尼亞大學生命倫理中心\*

網址：[www.med.upenn.edu/bioethic/indexie.htm](http://www.med.upenn.edu/bioethic/indexie.htm)

此網址是一群大學生命倫理學家所建立，無論在設計及內容上也是上佳之選，其中一個為生命倫理初學者而設的網頁更曾於一九九七年獲得洛杉磯時報評選為優秀網頁。

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### (四) 亞洲及國際生物倫理期刊 (Eubios Journal of Asian and International Bioethics)

網址：[www.biol.tsukuba.ac.jp/~macer/EJAIB.html](http://www.biol.tsukuba.ac.jp/~macer/EJAIB.html)

此期刊創立於一九九〇年，自一九九五年起，期刊的編輯將已出版的文章的文字部份放於網上供瀏覽者參閱，當中不少文章提及亞洲區較獨特的生命倫理話題，例如優生學，使亞洲讀者瀏覽時平添一份親切感。

### (五) 複製的構思 (Conceiving a clone)

網址：[library.advanced.org/24355/](http://library.advanced.org/24355/)

相信生命倫理當中，複製技術所引起的討論一定是最多的了。此網址搜羅了複製技術的發展史、技術細節、引申含意、爭論焦點及最新消息等，用輕鬆及吸引的手法表達出來，並容許瀏覽者參與複製技術和生命倫理的討論。可算是一個互動的精彩網頁。

### (六) 遺傳工程食品的安全問題

網址：[www.psagef.org/indexgen.htm](http://www.psagef.org/indexgen.htm)

遺傳工程食品的安全性已引起公眾極大的關注。在英國，綠色和平人士更向首相貝理雅展開一連串的抗議行動。若讀者對食品的安全性問題有興趣的話，可瀏覽此網址。雖然此網頁的設計者對遺傳工程食品的安全性持保留態度，但他們所列舉的例証及論據頗具參考價值。

在搜集資料的過程中，作者發現互聯網上優秀的網頁其實相當多。限於篇幅，本文只能作重點推介，希望讀者利用以上的資料，連繫更多相關的網頁。

\*編者按：這個網頁在 D.K.S. Au 的文章也有提及。





## Environmental Ethics

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Ecology is the science examining the relationship of living things and their environment. The root 'co' means home. Environment does not only refer to the surroundings, but also the internal psychological and physiological conditions. Environmental ethics is therefore concerned with both the external and the internal well-being of a living organism. To preserve the environment, green groups emphasize on sustainable development, protection as well as restoration. Naturalists try to conserve the natural beauty and fight to save endangered species, with the concept that every organism should have the right to live on the earth. With the shrinking of natural resources, to reduce waste generation and to maximize resource utilization are becoming important issues of management. Many industries have established ISO standards to provide an environmental friendly working protocol. Yet, are you aware that these actions also provide us a peace and harmonious mind and increase our working efficacy?

Environmental concern seems to be a Western concept. Even in a cosmopolitan place like Hong Kong, the public awareness on environment is not high. The government has tried to educate the citizens but knowledge may not bring to action. How many of you would care to bring your shopping bags? Perhaps we need to overcome the human nature of selfishness and bear with some inconvenience. We also need to restrain our ego from feeling superior to other creatures. Beware that we are only part of the world. The environment is ours and we contribute to shape it, which in turn affects our lives.

Nowadays, there is a tendency of either overstate or underestimate important issues that have impact on environment, such as global warming, food supply and overpopulation. To act, we need to have objective information and not propaganda. With the development of Internet, there will be tremendous information for us to access and analyze.

Following are some useful websites on environmental issues and ethics:

*Site for the history of environmental ethics:*

<http://www.cep.unt.edu>

*A site of University of Georgia that links to other Environmental Ethics Resources:*

<http://www.phil.uga.edu/eande>

*A site of Texas A&M University with Forums and publications on ethics:*

<http://www.tamu.edu/cstpe>

*Site with rich resources on environmental ethics literature:*

<http://library.envirolink.org>

*A link to various environmental ethicists:*

<http://www.phil.uga.edu/eecp>

*Resources on Ethics in Science:*

<http://www-hpcc.astro.washington.edu/scied/ethics.html>

*Society for Ecological Restoration:*

<http://ser.org>

*Rainforest Action Network:*

<http://www.ran.org>

*Forest Service Employees for Environmental Ethics:*

<http://www.afseee.org>

*Environmental philosophy at the Department of Philosophy, University of Göteborg:*

<http://www.phil.gu.se/>

*Center for Applied Ethics, University of British Columbia, Environmental Ethics Resources:*

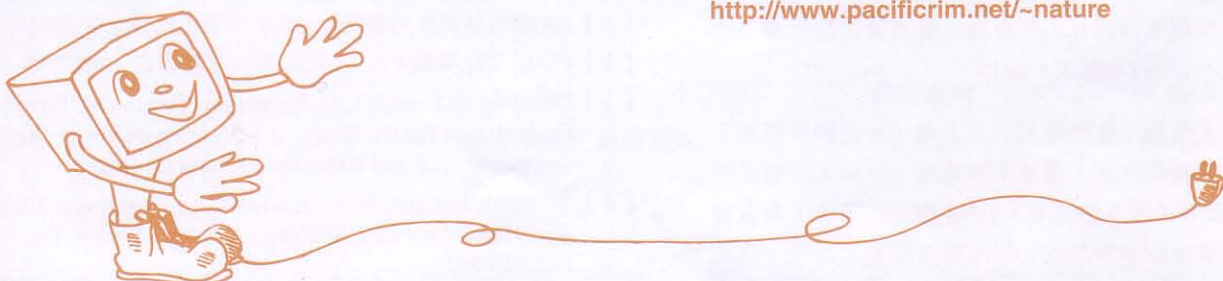
<http://www.ethics.ubc.ca/resources/environmental>

*Centre for Peace and Environmental Ethics:*

<http://www.kuleuven.ac.be/facdep/theology/en/peace.html>

*Institute of Global Education:*

<http://www.pacificrim.net/~nature>





## RESPONSE 回應

為何不討論「勿予復蘇」？

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**讀** 罷區結成醫生於《通訊》第二卷第一期《文化與生命倫理》「勿予復蘇？勿作討論？」一文，十分同意香港社會對 do not resuscitate (DNR) 應作更多討論，亦同意以儒家思想為本的「文化獨特性」不足以解釋香港為何遲遲不正面討論這問題。本文嘗試探討「勿作討論」之原因：

每個人對死亡都有不同程度的恐懼，但本人不覺得中國人比其他文化特別忌諱討論死亡。早在八十年代，聯合醫院已有雛型的DNR指引，並與員工工作公開討論，同事之參與很熱烈，迴避的態度不普遍。回顧傳統中國文化，雖然季路問死，孔子避而不答《論語·先進》，但儒家之道德觀，「殺身成仁」的智慧<sup>[1]</sup>，顯示儒家智者超越死亡之恐懼，又何來忌諱？莊子妻子死時，莊子鼓盆而歌《莊子·至樂》，更突出道家思想對死亡的豁達。現代哲學家李澤厚先生精髓地描述中國人的生死觀為「重生安死」<sup>[2]</sup>；他還引程頤說，佛家怕死，所以老談這個問題，接著解說「山還是山，水還是水」的三個境界。孔子謂「未知生，焉知死」，是否忌諱，可見仁見智了。

以上所述是聖賢之生死觀，不讀儒道哲學的普通老百姓又如何？社會學研究顯示<sup>[3]</sup>，中國人的重死並非表現為喋喋不休地談論死亡，而是表現為重喪的主張和行為。普通老百姓避諱言死，但不避諱言喪，老人家甚至為自己預先安排壽衣壽材，並舉行慶祝儀式。與外國相比，中國人不一定更迴避死亡。

要了解「勿作討論」之原因，首先要了解討論DNR的意義。討論DNR是：

1. 醫療倫理的討論：香港社會金錢掛帥，道德倫理沒有市場，很少討論，更何況醫療倫理？在香港醫學界，醫療倫理亦向不被重視，直至最近一兩年醫療事故軼起，討論才多起來。以往「勿作討論」的不祇是DNR。
2. 醫學系統以外的討論：傳統醫學訓練注重人體機能之科學分析，疾病的痛苦視為診斷的證據，生命個體變成研究治療成效的數目字，死亡是治療失敗。而DNR涉及的是對痛苦的關懷，和對生命與死亡的尊重。香港醫生缺乏全人治療的視野是不討論DNR之一原因。
3. 對醫學權威之挑戰：在醫管局成立之前，香港醫生高高在上，主宰一切治療決定，權威不容置疑；中國人的順民性格<sup>[4]</sup>，亦助長了醫生的權威。DNR則涉及與病人和家屬商討，更涉及承認治療無效，以及醫生能力之局限。有此

文化背景，醫生避談DNR是可理解的。

4. 要有面對死亡的勇氣和技巧：在香港兩所醫學院畢業的醫生，缺乏如何面對垂死病人的訓練。一個初畢業的醫生，即使還未受醫生權威文化所薰陶，亦可能因不懂怎樣與病者和家人溝通，而逃避DNR這問題。
5. 資訊不對稱的討論：DNR涉及複雜的醫學問題，普通市民理解不多，需要醫生或學者提供資料，才可明白和作有意義之討論。如果醫生迴避這問題，病人和家屬甚至可能不會知道有DNR這回事，更何況提出來討論？
6. 涉及資源分配的討論：DNR的決定，常是道德兩難情況。面對一個垂死的病人，如用公費給予昂貴而無實際效用的治療，會影響其他病人的資源，而做成不公平。但如果病人或家屬要求繼續治療，醫生應如何決擇？這是DNR之敏感地帶，美國在八十年代的討論亦不曾正面處理<sup>[5]</sup>，要到九十年代才建議如果治療是無效的(futile)<sup>[6]</sup>，醫生可決定DNR。在香港住院治療基本上是公費的，八十年代香港醫院資源十分短缺，那時討論DNR可能突出這個甚至美國也未敢面對的問題，所以醫學界出現「不提也罷」的態度。
7. 關乎「急救」的意義：DNR在香港通常解釋為「不作急救」，很容易令人感覺是「可以救活蘇醒而放棄」，有負面的含意，很難令人接受，尤其是重「孝」的中國人<sup>[4]</sup>。但實際上，考慮給病人DNR，是因為心肺復蘇(cardiopulmonary resuscitation)之後，雖然心臟回復跳動，但蘇醒的機會很微，延長的祇是死亡，而不是真正救活，DNR在某種意義是正面和尊重病者的態度。DNR如譯作「勿予心肺復蘇」，討論起來會較容易。

我覺得以上都是香港社會少討論DNR的原因。有趣的是，香港最近間中有人討論「安樂死」。正如區醫生文章所講，安樂死的討論遠比DNR複雜。香港人願談安樂死而避談DNR，可能是關乎「安樂」的正面含意。可惜，很多時安樂死的討論混淆了主動安樂死(active euthanasia)和DNR，這樣祇會引致混亂和誤解，而事倍功半。我希望香港生命倫理學會能在這方面帶領一個有效的討論。

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- 【5】Deciding to Forego Life-Sustaining Treatment, President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, 1983.
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## MESSAGES 消息

### The Homepage of Hong Kong Bioethics Association – an Update

The homepage of our association was launched last spring. Our homepage has now recorded the summaries of the last six issues of the Association newsletter and linked to many related sites, including websites mentioned in this issue. It is one of the very few sites of similar nature in the Mainland, Hong Kong and Taiwan, and we aim at providing a useful electronic resource in Bioethics to anyone interested. Suggestions for further improvement are always welcome.

### Bioethics Forum

A forum on "Assisted Fertilization – New Bill, New Ethical Issues" was organized by the Association on October 30, 1998 at the Kowloon Hospital. Speakers included Dr. Edward Loong from the Department of Obstetrics and Gynaecology, Chinese University and Dr. Athena Liu from the Department of Law, University of Hong Kong. The former speaker provided an account on the history and techniques on assisted fertilization while the latter speaker focused on the social and legal issues arisen from the practice and on the Human Reproductive Technology Bill being discussed by the Legislative Council of the Hong Kong SAR.

### Not Ready for Cloning Human

After a lot of publicity, the limitation of cloning from a mature cell begins to emerge. A calf cloned from a skin cell was found to suffer from severe anaemia and died after apparent normal development for several weeks. This may be linked to incomplete reprogramming of the adult cell nucleus and unless methods are found to ensure the reprogramming process is complete, the risk of using this approach for human reproduction will be too high.

### 刊登廣告

本通訊乃中、英雙語刊物，每年出版三期，讀者遍及香港、中國大陸、台灣和海外對生命倫理關注的教育、醫療、法律、社會學、哲學等專業人士。歡迎惠賜廣告，費用如下：四分之一版 HK\$700，二分之一版 HK\$1500，全版 HK\$4000。詳情請向執行編輯余錦波查詢。

### 《徵求會員》

香港生命倫理學會在九六年底成立，目的是推廣本地及華人社區對生命倫理的關注。學會現公開招收會員，誠邀對生命倫理有興趣的朋友加入。有興趣者，請與學會秘書余錦波聯絡。

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第四卷第三期	遺傳鑒証	阮嘉毅	1999年 10月
第五卷第一期	生命倫理學三十年	余錦波	2000年 2月