



# The Hong Kong Society of Rheumatology Summit 2026

25 April 2026

Hong Kong East Cluster Training Centre  
Pamela Youde Nethersole Eastern Hospital

E-Programme Book



# **Welcome Message from the HKSR President**

**Thank you for your support of the HKSR Summit and for joining us to witness the first meeting of its kind in the history of the Hong Kong Society of Rheumatology. This Summit represents one of the most significant events for the Society this year.**

**The future of rheumatology in Hong Kong is shaped by you. Each of you plays an essential role in advancing our specialty, and your involvement is important to the progress we hope to achieve. We believe that the development of Special Interest Groups will provide an excellent platform for our rheumatology community.**

**The current Council is dedicated to supporting the SIG initiative, working closely with the ERF to build a structure that is inclusive, sustainable, and meaningful. We invite all HKSR members to participate and contribute, regardless of background or level of experience.**

**This Summit has been made possible not only through the efforts of the Council, but also through the contributions of colleagues from hospitals across Hong Kong. Every form of support, from active participation to simply sharing information with peers, is very much appreciated.**

**You're one of us. We're in one family. We're grateful for your.**

**Carrel Yu  
President  
The Hong Kong Society of Rheumatology**

# Organising Committee

## Core Team

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Carrel Yu

Ho So

Kitty Kwok

Priscilla Wong

Jonathan Au

Dennis Chan

Sam Tsoi

## Special Interest Group Convenors

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Natalia Ciang

Systemic Lupus Erythematosus

Lai-shan Tam

Spondyloarthritis

Stella Wong

Musculoskeletal Ultrasound

Kitty Kwok

Rheumatoid Arthritis

Ho So

Myositis

Ho-yin Chung

Magnetic Resonance Imaging

Kai-yiu Ma

Capillaroscopy

Grace Ho

Scleroderma

Louis Ho

Vasculitis

Jane Wong

Immunology

Tommy Cheung

Gout

Shirley Chan

Research Education

Iris Tang

Connective Tissue Disease-  
associated Interstitial Lung Disease

# Organising Committee

## Sub-teams

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### Programme Team

Jonathan Au  
Elvis Fok  
Carrel Yu  
Ho So

### Venue & Floor Management Team

Sam Tsoi  
Lydia Tam  
Joyce Young

### Promotion & Registration Team

Louis Ho  
Fung Lam  
Carmen Fok  
Ho Man Fok  
Kitty Kwok

### Multimedia & IT Team

Edward Lau  
Carrel Yu  
Steve Pang

### Programme Book Team

Dennis Chan  
Tracy Choi  
Joshua Yeung  
Natalia Ciang

### Social Gathering & Connection Team

Chris Cheung  
Anthea Chung  
Carmen Chan

# **HKSR Summit 2026**

## **PART ONE**

**Venue: Seminar Room 1**

**14:00 - 15:00**

**Round Table Meeting**

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**Chairperson: Dr Carrel Yu and Dr Ho So**

**Special Guest: Dr Carmen Ho**

**Participants: Special Interest Group Convenors**

# HKSR Summit 2026

## PART TWO

Venue: Lecture Theatre

Time	SIG	Topic/Speaker
15:00 - 15:05	Opening Ceremony	
15:05 - 15:20	MSUS	How MSUS is Rewriting the Patient Care in Rheumatology Dr Stella Wong
15:20 - 15:35	Myositis	Completed Exit Dissertation Projects and Potential Research Ideas Dr Ho So
15:35 - 15:50	CTD-ILD	CTD-ILD Registry Dr Iris Tang
15:50 - 16:10	Vasculitis	ANCA-Associated Vasculitis in Hong Kong: Confronting High Mortality Through Research Collaboration Dr Louis Ho
16:10 - 16:40	Break	

# HKSR Summit 2026

## PART TWO

Venue: Lecture Theatre

Time	SIG	Topic/Speaker
16:40 - 17:00	Immunology	<b>Immunology SIG; What's New?</b> Dr Jane Wong
17:00 - 17:10	Rheumatology Nurse	<b>The Capability of Rheumatology Nurses to Extend the Pre-assessment Clinic to Non-RA Rheumatic Diseases</b> Ms Amy Cheung
17:10 - 17:20	RA	<b>Logistics in Using Local Registry for Dissertation or Research Project</b> Dr Ada Leung
17:20 - 17:40	SLE	<b>CART in SLE and SLE SIG Recent Research Projects</b> Dr Natalia Ciang, Dr Shirley Chan
17:40 - 17:55	Research Education	<b>Be A Part of Rheumatology Research!</b> Dr Shirley Chan
17:55 - 18:00	Closing	

# HKSR Summit 2026

## PART THREE

Venue: Seminar Room 1

18:00 - 18:30

Featured Talk

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Speakers: Prof Lai-shan Tam and Dr Carrel Yu

# Abstracts

## How MSUS is Rewriting the Patient Care in Rheumatology

Dr Stella Wong

The application of ultrasound in medical field started about 80 years ago, at a time when diagnostic imaging was essentially dependent on plain X-rays. Newer diagnostic imaging modalities, such as computed tomography (CT) and magnetic resonance imaging (MRI), were subsequently invented, providing much higher-resolution information on various musculoskeletal pathologies. However, there are still limitations if we solely dependent on these imaging methods and clinical examination for diagnosing and monitoring of rheumatic diseases.

The introduction of musculoskeletal ultrasound (MSUS) as a diagnostic tool marked the beginning of a new chapter in the rheumatology field and has revolutionize many aspects of our daily medial practices, allowing it to provide various information that other diagnostic imaging modalities (namely XR, CT and MRI) cannot, as illustrated in this lecture. Today, MSUS has achieved the status of being an indispensable diagnostic imaging modality in the rheumatology field. Since 1999, there was a notable increase in the number of countries in both Europe and Asia in which MSUS is routinely performed by the rheumatologists, and consequently incorporated into rheumatology training. By developing more standardized local training programs, we hope that all rheumatologists can use their own 'stethoscope' to provide more holistic, accurate and timely care for rheumatic diseases in future.

# Abstracts

## Completed Exit Dissertation Projects and Potential Research Ideas

Dr Ho So

Idiopathic inflammatory myopathies (IIM) are a heterogeneous group of systemic autoimmune diseases that are uncommon yet debilitating. Because of the rarity, any individual rheumatologist will only have a handful of affected patients, so it will be difficult to generate the number of patients necessary for any meaningful observation from a single centre. Under the support of the Hong Kong Society of Rheumatology, the Hong Kong Myositis Registry (MyoHK) was created in 2020 to obtain uniform, systematic, and longitudinal data on myositis patients. Rheumatologists interested in myositis from multiple centers in Hong Kong recruited patients into the registry. The main aims of the registry are to increase our knowledge of disease courses, clinical characteristics, and prognosis of IIM. This also serves as a platform to encourage collaborative myositis research. Collection of standardized clinical data and disease outcome measures according to international consensus also have educational value. In addition, this could be used as a tool to assess patients during follow-ups. The ultimate goal is to improve the outcomes of patients with IIM in Hong Kong and beyond.

Throughout the years, aspiring and dedicated rheumatology trainees have leveraged data from MyoHK and completed various research studies contributing to the better understanding of IIM. Topics included patient reported outcomes, serological profiling, deep phenotyping, prognostic factors and various important complications (cardiovascular outcomes, bone health, cancer risks and interstitial lung diseases). In this presentation, the methodologies and results of the previous studies will be briefed. Prospective local, regional, and international collaborative projects will also be introduced which can provide great platforms for future research as well as ideas for exit dissertations.

# Abstracts

## CTD-ILD Registry

Dr Iris Tang

Connective tissue disease-associated interstitial lung disease (CTD-ILD) represents a significant complication affecting patients with systemic autoimmune conditions including systemic sclerosis, rheumatoid arthritis, and inflammatory myositis. ILD substantially increases morbidity and mortality in CTD patients, yet data on disease progression patterns remain limited, particularly in Asian populations.

The Hong Kong CTD-ILD Registry (CONNECT-ILD) was established to address critical knowledge gaps in understanding disease trajectories and progression patterns. This prospective multicenter registry systematically collects clinical, radiological, and functional data from CTD-ILD patients across major rheumatology centers in Hong Kong.

# Abstracts

## **ANCA-Associated Vasculitis in Hong Kong: Confronting High Mortality Through Research Collaboration**

**Dr Louis Ho**

**ANCA-associated vasculitis (AAV) comprises severe small-vessel autoimmune diseases with high mortality despite therapeutic advances. East Asian patients demonstrate microscopic polyangiitis predominance, increased renal involvement rates, and worse survival compared to Western populations. Asian representation remains limited in major trials including RAVE and RITAZAREM, hindering evidence applicability to regional practice.**

**The Hong Kong Society of Rheumatology Vasculitis Special Interest Group's 10-year territory-wide cohort (2013–2023) documented exceptionally high local mortality primarily attributable to infections rather than active vasculitis. Current treatment strategies—low-dose glucocorticoids (LoVAS/PEXIVAS), rituximab for maintenance, avacopan steroid-sparing, and trimethoprim-sulfamethoxazole prophylaxis—provide opportunities to address these challenges.**

**Updated British Society for Rheumatology guidelines advocate vasculitis expertise centers with multidisciplinary team input and specialist nurse support, which reduce serious infections, hospital admissions, and mortality through structured care delivery. Regional collaboration in Hong Kong is urgently required to establish prospective cohorts, identify poor prognostic factors, validate contemporary regimens in Asian patients, and develop networked expertise infrastructure including case conferences and shared multidisciplinary resources.**

# Abstracts

## Immunology SIG; What's New?

Dr Jane Wong

This session offers an engaging introduction to immunology tailored for rheumatologists, with a dual focus. The first half explores the role of an Immunology SIG. What is Immunology? How can it help my rheumatology? Attendees' opinions and experiences will be solicited to foster a dynamic discussion on future activities. We will discuss how our SIG can enhance interdisciplinary engagement, provide educational seminars, support research collaborations, and ultimately improve patient outcomes.

The second half provides a concise review of VEXAS syndrome, a recently identified autoinflammatory condition caused by somatic mutations in the UBA1 gene. This case-based overview will cover its pathophysiology, clinical features, and implications for rheumatology practice. For those who are having their examinations soon, this may be the most efficient way to study this topic in under 20 minutes! Overall, we hope participants can gain something from this session, and most importantly mark the start to a healthy immunology and rheumatology collaboration and community.

# Abstracts

## **The Capability of Rheumatology Nurses to Extend the Pre-assessment Clinic to Non-RA Rheumatic Diseases**

**Ms Amy Cheung**

The pre-assessment clinic effectively reduces waiting time, facilitates early diagnosis, and enables prompt treatment for rheumatoid arthritis (RA). Expanding this integrated model to non-RA rheumatic diseases requires rheumatology nurse specialists to accurately identify potential non-RA cases. Joint pain has a broad differential, ranging from inflammatory to mechanical causes, making effective triage essential to prioritize care and reduce unnecessary referrals.

A retrospective analysis of patients attending the rheumatology nurse clinic from January to September 2024 was conducted. Primary outcomes included diagnostic concordance between nurses and rheumatologists and time to treatment initiation. Secondary outcomes assessed patient trajectories following classification as non-rheumatological.

A total of 126 patients were included. Both nurses and rheumatologists diagnosed 57 patients with rheumatic diseases, of whom 49 (85.9%) initiated treatment at first consultation. Sixty-one patients had no rheumatological diagnosis; 13 defaulted their scheduled appointment, while 48 attended physician review after 8–18 months. Among these, 42 (87.5%) were discharged, including 31 after a single visit, reducing unnecessary follow-up and investigations.

The integrated model supports effective patient stratification and may improve resource utilization and service efficiency when expanded.

# Abstracts

## Logistics in Using Local Registry for Dissertation or Research Project

Dr Ada Leung

Treat-to-target (T2T) strategies applied within the early window of opportunity are crucial in the management of rheumatoid arthritis (RA) to prevent progressive joint damage and functional disability. Despite current treatment recommendations, there remains uncertainty regarding the best criteria for defining remission in RA and whether achieving remission is truly superior to maintaining low disease activity.

In this exit dissertation, we examined the structural outcomes of a T2T early RA cohort utilizing real-world data from the Clinical Rheumatology Systematic Treat-to-target in Asia Leadership (CRYSTAL) Registry in Hong Kong. To support this research initiative, the RA SIG collaborated with radiologists to deliver an educational X-ray workshop, training rheumatology trainees, nurses, and research assistants on the fundamentals of RA imaging and Sharp's scoring. We recruited 286 ERA patients with available baseline and 5-year radiographs from the CRYSTAL Registry and evaluated the impact of achieving different treatment targets in the first year on the 5-year structural outcomes. Serial radiographs at baseline, 2 years, and 5 years were scored using the Van der Heijde-modified total Sharp score (mTSS).

Our findings demonstrated that achieving sustained remission (sREM) within the first year—defined by either the Simplified Disease Activity Index (SDAI) or the Boolean 2.0 criteria—independently predicted significantly less radiographic progression at 5 years compared to their respective active disease groups. Conversely, achieving sREM via DAS28-ESR or sustained low disease activity via SDAI did not yield a statistically significant structural advantage over the active disease group. Smoking history and higher baseline disease activity (in terms of DAS28-ESR or SDAI) were other independent predictors of radiographic progression.

Ultimately, we hope to encourage rheumatology trainees to actively approach their respective special interest groups to utilize the wealth of real-world data available from local registries like CRYSTAL. By leveraging these established platforms, trainees can confidently conduct impactful future research, complete their exit dissertations, and contribute meaningfully to local patient care.

# Abstracts

## **CART in SLE and SLE SIG Recent Research Projects**

**Dr Natalia Ciang & Dr Shirley Chan**

The SLE Special Interest Group (SIG) of the Hong Kong Society of Rheumatology will present an update spanning emerging therapeutics and collaborative academic activities relevant to systemic lupus erythematosus (SLE).

First, the presentation will highlight chimeric antigen receptor T-cell (CAR T) therapy as a novel treatment modality in SLE. By targeting autoreactive B cells and reshaping immune dysregulation, CAR T therapy has shown promising early results in patients with severe, refractory disease, including the potential for deep remission and reduction of conventional immunosuppressive burden. Its emergence represents an important conceptual advance from chronic immune suppression toward precision immune reprogramming. The presentation will discuss the current evidence, potential clinical implications, safety considerations, and future role of CAR T therapy in the management of difficult-to-treat SLE.

Second, the SLE SIG will report its research projects and academic activities conducted in 2025. These include

1) Liaison with the APLAR SLE SIG to establish a multinational APLAR SLE cohort, which aims to strengthen regional collaboration and improve understanding of disease phenotypes and outcomes across Asia-Pacific populations.

In parallel, the SIG is participating in a validation study of the 2019 EULAR/ACR classification criteria for SLE using an APLAR cohort of patients, with the goal of assessing their applicability in regional clinical settings.

2) The SIG is also undertaking validation of the EULAR/ACR criteria for antiphospholipid syndrome (APS) in Chinese patients, addressing an important gap in population-specific evidence.

3) In addition, the SLE/Vasculitis Symposium held on 5 July 2025 featured three overseas speakers from Germany and Italy and was attended by 55 participants, reflecting the SIG's commitment to education, international exchange, and advancement of rheumatology practice.

# Abstracts

## Be A Part of Rheumatology Research!

Dr Shirley Chan

This presentation provides an overview of the current landscape of rheumatology research across various centers in Hong Kong. It highlights the ongoing clinical studies and pharmaceutical trials that are shaping the future of rheumatologic care in the region. By showcasing these active research initiatives, the talk aims to foster greater collaboration, encourage participation, and underscore the importance of local research efforts in advancing treatment options for patients with rheumatic diseases.

# Directions



# Directions



1. 主座大樓正門

2. 往詢問處右行電梯上2樓



3. 於2樓往右直行



4. 經過玻璃門往右行



5. 經過玻璃門出花園



6. 穿過花園及馬路



7. 由左邊或右邊入口，  
進入  
港島東醫院聯網醫療管理及  
臨床科技培訓中心

(HKEC Training Centre for Healthcare  
Management & Clinical Technology)

