

香港醫務委員會

The Medical Council of Hong Kong

DISCIPLINARY INQUIRY
MEDICAL REGISTRATION ORDINANCE, CAP. 161

Defendant: Dr HO Wing Keung (Reg. No.: M07067)

Date of hearing: 7 July 2020 (Tuesday)

Present at the hearing

Council Members/Assessors: Dr CHOI Kin, Gabriel
(Chairperson of the Inquiry Panel)
Dr LEUNG Chi-chiu
Dr LI Fan-lan, Florence Virginia
Ms HUI Mei-sheung, Tennessy, MH, JP
Ms WU Ka-lai, Cary

Legal Adviser: Mr Edward SHUM

Defence Solicitor representing the Defendant: Dr Bernard Murphy of
Messrs. Howse Williams

Senior Government Counsel representing the Secretary: Miss Vienne LUK

1. The charge against the Defendant, Dr HO Wing Keung, is:

“That on or about 20 May 2016, he, being a registered medical practitioner, disregarded his professional responsibility to his patient [REDACTED] (“the Patient”) in that he prescribed “Voltex Kool” gel to the Patient when he knew or ought to have known that the Patient was allergic, or was susceptible to adverse reaction, to Voltaren.

In relation to the facts alleged, he has been guilty of misconduct in a professional respect.”

Facts of the case

2. The name of the Defendant was at all material times and still is included in the General Register. His name has been included in the General Register from 1 September 1988 to present.
3. Briefly stated, the Patient consulted the Defendant on 20 May 2016 for amongst others, numbness over her index finger. During the consultation, the Defendant prescribed various medications including Voltex Kool topical gel 1% (“Voltex Kool”) to the Patient.
4. There is no dispute that the Patient consulted the Defendant on and off for a few years. And the Patient had previously told the Defendant that she was allergic to Voltaren.
5. According to the Patient, whose evidence is unchallenged by the Defendant, she developed allergic reactions after taking the medications prescribed by the Defendant including Voltex Kool. The Patient returned to see the Defendant in the morning of 21 May 2016. Having seen her skin rash, the Defendant told the Patient that this was due to allergy and advised her to stop taking the medications given to her the day before. The Defendant also told the Patient that these medications were not of the type for which she was known to be allergic. The Defendant then prescribed the Patient with some other medications.
6. According to the medical records obtained from the North District Hospital, the Patient attended its Accident & Emergency Department at 12:24 hours on 21 May 2016. Upon admission, the Patient complained of skin rash, increased shortness of breath and hoarseness of voice. The principal diagnosis was “Allergy”. The Patient was also diagnosed to be suffering from asthma. The Patient was hospitalized and treated with anti-allergy and anti-asthma medications before she was discharged home on 27 May 2016.
7. The Patient subsequently lodged this complaint against the Defendant with the Medical Council.

Burden and Standard of Proof

8. We bear in mind that the burden of proof is always on the Legal Officer and the Defendant does not have to prove his innocence. We also bear in mind that the standard of proof for disciplinary proceedings is the preponderance of probability. However, the more serious the act or omission alleged, the more inherently improbable must it be regarded. Therefore, the more inherently improbable it is regarded, the more compelling the evidence is required to prove it on the balance of probabilities.
9. There is no doubt that the allegation made against the Defendant here is a serious one. Indeed, it is always a serious matter to accuse any registered medical practitioner of misconduct in a professional respect. We need to look at all the evidence and to consider and determine the disciplinary charge against him carefully.

Findings of the Inquiry Panel

10. The Defendant admitted the factual particulars of the disciplinary charge against him but it remains for us to consider and determine on the evidence whether he is guilty of misconduct in a professional respect.
11. The Defendant ought to have known that the Patient was allergic to Voltaren. Nonetheless, the Defendant still prescribed her with Voltex Kool, which contained Diclofenac and should not be used by patients who are allergic to Voltaren, which also contained Diclofenac.
12. Patients are entitled to, and they often do, rely on doctors to exercise reasonable care and competence in avoiding prescription of drug to which they have a known allergy.
13. Allergic reaction to drug is not dose-dependent and can be triggered by even a small dose. Moreover, allergic reaction to drug can be very serious and potentially life-threatening. In a patient with a reported allergy to a particular drug, the risk of having an allergic reaction after taking the same drug again would be high.

14. Prescription of Voltex Kool to the Patient, whom the Defendant ought to have known was allergic to, or was susceptible to adverse reaction to Voltaren, was inappropriate and unsafe. In our view, if the Defendant had taken adequate note of the Patient's history of allergy, he ought to have considered whether there were safer alternatives than Voltex Kool.
15. In our view, the Defendant's conduct had fallen below the standards expected of registered medical practitioners in Hong Kong. We therefore find him guilty of misconduct in a professional respect as charged.

Sentencing

16. The Defendant has a clear disciplinary record.
17. In line with our published policy, we shall give him credit for his frank admission and full cooperation throughout this inquiry.
18. We bear in mind that the primary purpose of a disciplinary order is not to punish the Defendant but to protect the public from persons who are unfit to practise medicine and to maintain public confidence in the medical profession by upholding its high standards and good reputation.
19. We are told in mitigation that the Defendant had previously prescribed Advil (Ibuprofen) to the Patient to treat her severe headache, to which she had no allergic reaction. However, the Defendant had no Ibuprofen in stock and he prescribed Voltex Kool to the Patient on the wrong assumption that topical gel would be safer than orally taken Voltaren pills. In this regard, the Defendant had taken steps to improve on his knowledge of drug allergies and he also attended workshops to improve on his management of patients. Furthermore, the Defendant had since the incident set up a computerized clinical record system to ensure safe drug prescription and dispensation.
20. We accept that the Defendant had learnt his lesson. We also accept from reading the medical records obtained from the North District Hospital that the Patient's prolonged hospitalization was partly due to other pathological cause(s).

21. Taking into consideration the nature and gravity of this case and what we have heard and read in mitigation, we order that the Defendant be reprimanded.

Dr CHOI Kin, Gabriel
Chairperson of the Inquiry Panel
The Medical Council of Hong Kong