善寧會訊 NEWSLETTER



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我們這一 HOME is Where we are

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生命中第二個**%** A Second Home in Life

在房間內,父親躺床上休息、母親坐梳化陪伴、女兒在書桌辦公。大家閒來交談幾句,悠然自得與尋常家庭無異,只是地點換上了病房。「有家人的地方,就是家。」能夠成為病人的第二個家、親屬的家居辦公室,寧養中心正是梁氏一家的家之所在。

It resembles a typical family moment — the father resting in bed, sharing joyful conversations with his wife and daughter. Yet, this warmhearted scene unfolds not at their home, but in a patient room at the Jockey Club Home for Hospice (JCHH). "As long as I am with my family, I am at home." JCHH has not only provided Mr. Leung a comfortable stay, but has also become his second home.

隨遇而安 度假寧養

梁國權先生 (梁Sir) 是退休教師和技術員,2017年確診肝癌,接受兩次手術及採取各種治療後,病情曾經受控。直至去年9月,他有朝起床突然「咔」一聲,盆骨好像有東西凸出,腳部劇痛至無法走路,檢查發現是癌症擴散,導致病理性盆骨骨折。他與家人商議後,決定接受紓緩治療:「我喜歡踩單車周圍去,試過由上水踩到黃石碼頭。起初知道要臥床,的確晴天霹靂,但既來之、則安之,盡了力便接受結果。」

梁Sir的獨生女兒梁小姐,已婚並育有一子,與家人感情深厚,經常三代同堂去旅行、踩單車。她早年來過「賽馬會善寧之家」參觀,還拍攝照片給家人看,心想日後或用得著服務。她說:「去年10月,我見到父親的痛楚急需處理,母親也難於照顧他,於是建議來這裡『度個假』,而由申請到入住約一星期時間。」為了多陪伴雙親,她向公司申請在家工作,每周一日在病房「辦公」。



Take Things as They Come

Mr. Leung Kwok-Kuen (Leung Sir), a retired teacher and technician, was diagnosed with liver cancer in 2017. His condition was initially under control after two surgeries and various treatments. However, in September of last year, he experienced a sudden, sharp pain in his pelvis while getting up and discovered a lump in the area. The pain became severe, making it difficult for Mr. Leung to walk and significantly impacting his daily life. Medical examinations revealed that cancer cells had spread, causing a pathological fracture in his pelvic bone. After discussing his options with his family, he decided to pursue palliative treatment.

"I love cycling; I've even cycled from Sheung Shui to Wong Shek Public Pier before. At first, learning that I would have to stay in bed felt like a bolt from the blue. But I'll take things as they come and try my best to cope with the situation."

Leung's only daughter, Ms. Leung, who is married with a son, shares a deep bond with her family, and the three generations often travel and cycle together. She had visited JCHH years ago and even shared the photos of the site with her family, thinking it might be useful in the future. 'Last October, my father's severing pain has to be immediately taken care of, and it would be a large burden for my mother to take care of him, so I suggested to bring my father to JCHH for a "vacation." Thanks to the facilitating staff, it took only about a week from application to admission.' In order to spend more time with her parents, she applied for work from home and worked in the patient room one day per week.

悉心照顧 仿如至親

以為梁Sir離家會有所不慣,怎料他爽朗道:「我入住 頭兩、三天已適應,『賽馬會善寧之家』是我生命中 的第二個家。」怕嘈的他直言需要一個靜養環境、回 顧人生,獨立套房的設計,享有私隱又方便探訪。夫 婦相依半生,病榻中更要守候在旁,知道病房有梳化 床歡迎陪宿,梁太亦樂做「跟得夫人」。

由於溶骨性問題嚴重,腳痛會突然來襲,令梁Sir苦不堪言。難得的是,醫護的貼心讓他感受到家的溫暖:「有一晚凌晨,我右腳劇痛得大叫『救命』,趕緊按鐘叫護士,進來的蔡姑娘嘗試給我加止痛藥但痛楚持

梁Sir和太太感情要好・不論患病前或後・ 兩人都如影隨形。

Leung Sir and his wife share a deep bond, they have always been with each other regardless of illnesses.

續。之後她聯絡醫生,提 議打止痛針,針後十分鐘 終於起到作用。



她全程沒有走開、與我保持談話,又安慰我說:『我會陪著你直至唔痛。』她這舉動令我感覺安穩,約半小時後痛楚消散,我便不自覺睡著了。」梁Sir連續兩晚右腳劇痛,值夜班的蔡姑娘沒有怠慢,一邊幫助他紓緩痛楚,一邊陪伴他直至痛楚不再。

「先生在家也經常腳痛,每次我都束手無策;在這裡 我雖然同樣做不了甚麼,但看見他由叫痛到止痛,心 情差天共地。」梁太説。

如常社交 開心生活

住院期間,醫護和社工均會提供支援,梁Sir沒有因為患病而謝絕社交活動,親友照樣可來探訪聯誼,維持生活質素。他又積極參與不同的活動,例如做冬、聖誕聯歡會、畫班、豎琴初體驗、義工探訪、與護理學生分享等。「病人都可以有自己的



Always by Your Side

While the family worried that Mr. Leung might struggle to adapt to being away from home, he surprisingly responded, "I quickly adapted within the first two to three days; JCHH is my second home now." Mr. Leung appreciates a quiet environment for reflection and relaxation, and the private suite provided an ideal and comfortable space for him. As lifelong partners, Mrs. Leung stayed by her husband's side, spending the night on the sofa bed specifically designed for overnight visitors.

Due to severe osteolysis, Mr. Leung suffered from sudden foot pain, causing him great distress. Fortunately, the close care from the medical staff made him feel at home. "One night, I was experiencing excruciating pain in my right foot, it was unbearable that I shouted for help and quickly called a nurse through the button in my room. Nurse Choi came in and gave me pain medication, but the pain persisted. She then contacted the doctor who suggested administering a pain relief injection, which finally took effect ten minutes later.

梁Sir的女婿(左一)和孫仔(左二)到院舍探望他,一家五口在大堂的聖誕樹前留影。

Leung Sir's daughter's husband (far left) and grandson (second from the left) came visit him, capturing the precious moment with a photo in front of the Christmas tree in the lobby.

"She stayed with me, talked to me, and comforted me, saying, 'I'll stay with you until you're feeling better' Her support relaxed and comforted me immensely. About half an hour later, the pain was relieved, and I fell asleep



quickly." Mr. Leung had endured severe pain in his right foot for two nights, and Nurse Choi, remained by his side until he felt better.

"My husband often experiences foot pain at home, and I don't know how to help him. Although I can't do much, I am grateful witnessing his transition from being in pain to finding relief at JCHH," said Mrs. Leung.

Socializing as Usual: Living Happily

During his stay, both the medical staff and social workers provided valuable support. Mr. Leung did not shy away from social activities despite his illness; friends and relatives visited him regularly, helping to maintain his quality of life. He actively participated in various events, including Christmas and winter

去年的聖誕聯歡會,梁Sir即興唱了首英文歌《 Edelweiss》,在旁的小朋友揮手拍和。 At last year's Christmas party, Leung Sir sang an English song, "Edelweiss," accompanied by children, clapping and waving their hands. solstice celebrations, painting classes, experiential harp sessions, volunteer visits, and sharing experiences with nursing students.

connection,我亦可按精神狀態而參與活動,好像聖誕聯歡會當日,我到大堂欣賞表演,有小朋友走來跟我說: 『聖誕快樂!』我即興跟他唱了首英文歌《Edelweiss》:

唱完後,他給了我一個 擁抱,感覺很窩心。」

一身小天使裝束的幼稚園學生 前往病房報佳音,梁Sir夫婦與 他們一起「派心」合照。

Kindergarten students dressed in angel costumes, came to sing carols. Leung Sir and his wife took a photo with 'heart hands' together.



出院返家 人生無憾

梁Sir因為骨質嚴重流失而影響站立和走動,住院主要是舒緩腳部痹痛。「賽馬會善寧之家」駐院醫生余偉明指出:「盆骨的神經線受壓,腳痛令病人不能站、不能睡,所以為他調校神經止痛藥物的種類和劑量,期間狀況平穩中偶有起伏。住院一個多月,他的徵狀逐步得到紓緩,痛楚和睡眠也有改善,可以回家休養。」

"Patients can have their own connections, and I can engage in activities based on my mental condition. For instance, at the Christmas party, I went to the lobby to watch a performance. A little child approached me and said, 'Merry Christmas!' I spontaneously sang the English song 'Edelweiss' to him. He gave me a hug after I finished singing, which was truly heartwarming."

Discharge and Return Home: No Regrets in Life

Due to severe sclerotin loss affecting his ability to stand and walk, Mr. Leung's hospitalization primarily focused on alleviating his foot pain. Dr. Yu Wai-ming, resident doctor at the Jockey Club Home of Hospice, explained, "The nerves in the pelvic region are compressed, causing foot pain that prevents the patient from standing or sleeping. We adjusted the type and dosage of nerve pain relief medication, which helped stabilize his condition, despite occasional fluctuations. After more than a month of hospitalization, his symptoms gradually improved, resulting in reduced pain and better sleep quality, allowing him to return home for further recovery."



余偉明醫生稱讚梁Sir正面樂觀,是個合作 的病人。

Dr. Yu Wai-ming commended Leung Sir for his positive and optimistic attitude, describing him as a cooperative patient.



「既來之、則安之。」一家人對往後安排已有共識,梁Sir捐驅成為「大體老師」、梁太打算學習丟下多年的日文,而女兒則承諾會照顧好媽媽。

"Take things as they come." The family has reached a consensus regarding future arrangements. Leung Sir donate his body to be a silent mentor, Mrs. Leung plans to learn the Japanese that she has put aside for many years, and their daughter has promised to take good care of her mother.



難得三代都有共同嗜好 — 踩單車,假期經 常相約出行。

All three generations share a common hobby—cycling, they often go out together during holidays, enjoying the valuable family moments.

環顧病房的玻璃窗和層架上佈滿旅行相、全家福,溫馨滿屋。梁Sir與妻女異口同聲表示,全家人都喜歡踩單車,足跡遍佈多個地方,締造了很多珍貴回憶,感覺十分滿足。「我們想做的都已做過,回顧這生精彩而無憾。」

梁Sir之後因病情反覆而再度入住善寧之家,最後在家 人陪伴下安詳離世。執慣教鞭的他早已簽署成為「大 體老師」,將遺體捐贈醫學院作教育用途,延續春風 化雨的精神。 The patient room were decorated with Leung Sir's travel photos and family portraits, the window and shelves were filled with travel pictures and family portraits, creating a warm atmosphere. Leung Sir, his wife and his daughter unanimously expressed that the whole family enjoys cycling, having traveled to many places together and created countless precious memories, feeling satisfied. "We have done everything we wanted to do. Looking back, this life has been wonderful and without regrets."

Mr. Leung was readmitted to JCHH due to his condition's fluctuations and passed away peacefully with family. A lifelong educator, he pledged to be a "Silent Mentor," donating his body to medical education, ensuring his legacy of wisdom endures like a spring breeze awakening knowledge.



臨別亦講得到再見 Farewell but not Goodbye





「前年疫情期間,母親由出現病徵到離世前幾天才確診有惡性腫瘤,還未開始治療已話別離,從此天人永隔。」曾任運動教練的Pinky説,母親離世後,內心十分自責,既逃避社交又沒節制飲食,為了弄清楚情緒是否異常而向善寧會尋求哀傷支援。經過臨床社工的漸進式輔導,她學懂欣賞自己、接受關心;更慶幸當日敢於求助,現已重投生活、活好當下。

"During the pandemic two years ago, my mother passed away shortly after showing symptoms and receiving a diagnosis of malignant tumors. We were separated by life and death even before starting the treatments," said Pinky, a former sports coach. Overwhelmed by guilt after her mother's passing, she avoided social interactions and lost control over her diet. Worried that her emotions and reactions towards grief were abnormal, she sought grief support from the Society for the

Promotion of Hospice Care (SPHC). Through progressive counseling from a clinical social worker, she learned to appreciate herself and accept care from others. Looking back, she is grateful for having reached out to SPHC, which helped her reintegrate into life, living in the present.

病情急轉直下

Pinky自幼與母親相依為命,感情深厚,兩人如閨密般無所不談。前年聖誕節之後,母親經常咳血絲,求醫後未見好轉,及後經醫生轉介,Pinky 生日當天陪母親到醫院照磁力共振,發現支氣管有陰影,需再進一步跟進。她説:「其實當時已有心理準備,辭退工作貼身照顧母親,和她並肩作戰。」

豈料,還未等及跟進, 母親便因心跳急速 、血 氧太低而送急症室,隨 後進入深切治療部,安 排抽取組織化驗。「媽 媽多年前患過鼻咽癌,



曾接受化療令口水分泌減少及聽力下降,是聽障人士。在深切治療病房,插上鼻胃喉的她聽和說都不行,只能與她用白板寫字溝通。望著她在白板寫上『死』字,我深切感受到她的絕望。」Pinky 霎時眼眶通紅。

The Sudden Drop in Health

Being each other's only support since childhood, Pinky and her mother had a deep bond. Two years ago, her mother began coughing up blood after Christmas. The frequent visits to the doctors have shown no improvement to the situation. Desperately, Pinky even accompanied her mother to the hospital for an MRI, where shadows in her bronchi were discovered, necessitating further investigation. "At that point, I was mentally prepared and even resigned from my job to take care of my mother, determined to fight alongside her."

Unexpectedly, her mother was rushed to the emergency room before any follow-up could be arranged. Due to rapid heart rate and low blood oxygen levels, she was subsequently admitted to intensive care for tissue tests. "My mother had nasal pharyngeal cancer years ago and underwent chemotherapy, which reduced her saliva production and made her hearing impaired. In the intensive care unit, she couldn't hear or speak with tubes inserted, we could only communicate by writing on a whiteboard. I remember vividly seeing her writing the word 'death,' on the board, visualizing her despair about the situation." Pinky's eyes filled with tears.

來生再做你女兒

母親頭幾天在深切治療部,整體指數穩定後轉往傳染病房,約一個月後出院。回家之後,母女角色互換,由Pinky擔任照顧者,給母親餵營養奶、沐浴更衣、清潔家居等。可惜母女親密相處的時光只有短短數天,母親便再度入院,這時終於知道化驗結果,確診支氣管惡性腫瘤。眼見母親臥病在床,百感交雜,但無奈仍需向母親了解她的意願。

最始料不及的是,第二天清晨突然接到醫院通知母親的血氧持續下降,她和丈夫匆忙趕到病房陪伴左右。「翌日凌晨時份,媽媽的氣息逐漸微弱,臨終時與她心痛告白:『再見!來生再做你女兒。』」不久之後,母親便與世長辭。

出現反常表現

在母親離世後,Pinky 情緒低落、逃避社交又不願外出。她之前在任職運動教練時會嚴格控制飲食,但現在吃得再多也不會在意;日常看到一瓶胡椒粉,亦會莫名感觸想起母親。「我還會翻看媽媽的手機資料,看著看著總是忍不住落淚,甚至傳送文字訊息和拍攝照片給她,覺得她會接收到。」Pinky 察覺到自己表現反常,希望弄清楚是否病態,於是上網搜尋喪親輔導服務,結果找到善寧會。

善寧會轄下「譚雅士杜佩珍安家舍服務中心」的臨床 社工陳麗茵説:「在見面前,我和 Pinky 通了一小時電 話,知道母親是她最信任的人,亦見證她成長,彼此 是依附關係。母親病逝令她失去安全感和社交動力, 她需要的是有人引導她釋放內心的哀傷情緒,重啟至 親離開後的人生。|



Let Me Be Your Daughter Again in the Next Life

After a few days in intensive care, Pinky's mother was stable enough to be moved to an infectious disease ward and was discharged about a month later. Once home, their roles reversed; Pinky became the caregiver, feeding her mother nutritional drinks, helping her bathe and change clothes, cleaning the house etc. Unfortunately, their time together was short-lived as her mother was readmitted to the hospital a few days after. It was then that they finally learned the test results confirming a malignant tumor in the bronchi. Seeing her mother bedridden stirred up a mix of emotions, but Pinky still had to talk to her mother about her plans and wishes.

Preparing to disclose the results to her mother the next morning, they received a call from the hospital notifying them that her mother's blood oxygen levels were continuously dropping, prompting Pinky and her husband to rush to the ward. "The next early morning (after receiving the results), my mother's breathing weakened gradually. At the very last moment, I confessed to her with a broken heart: 'Farewell! See you in the next life, let me be your daughter again.'" Shortly after, her mother passed away.

Unusual Briefing Behaviors

After her mother's death, Pinky was in deep agony, constantly avoided social interactions, and was reluctant to go out. Previously as a sports coach, she strictly controlled her diet, but then she had been eating uncontrollably. Even daily items like a bottle of pepper would trigger memories of her mother, causing her to dive deep into the abyss of grief. "I always find myself scrolling through my mother's phone, recalling the blissful memories with her and crying helplessly now that she's gone forever. I even sent her text messages and shared photos of my daily life on the phone, believing she would receive them." Pinky noticed her unusual behavior and wanted to know if it was pathological, hence she searched for bereavement counseling services online, leading her to the Hong Kong Bereavement Support Services.

Clinical social worker Chan Lai-yan from the Jesse and Thomas Tam Centre said, "Before we met, I spoke with Pinky for an hour on the phone. I learned that her mother was her most-trusted person, witnessing her growth, contributing to their attachment. Her mother's passing caused immense insecurity and lack of social motivation, she needed guidance to release her inner grief and restart her life after losing someone so close."

陳姑娘說輔導失喪父母的成年子女,關鍵是先檢視依附關係模式,其中一個方向是延續父母的愛和精神,了解有否完成逝者遺願或未完心結。

The key to counselling adult children whom parents have passed away is to examine their mode of attachment, one method of doing so is to look into unfinished wills or wishes of the deceased, and to continue the love and spirit of the parents.' Ms. Chan said.





Pinky除了接受輔導外, 還參加中心舉辦的遺物 整理講座和手工藝心靈 工作坊。

In addition to counseling, Pinky participated in the center's workshops on legacy organizing and therapeutic crafts—mending memories with her bands while healing her heart

寫信抒發情感

子女有內疚感,多是覺得照顧不足、無時間陪伴,過程中相處質素不理想,自己亦不夠體諒。陳姑娘指:「Pinky 感到愧疚、出現輕微抑鬱情緒可以理解。在輔導期間,我提議她數算為母親做過的事、回想承繼了母親甚麼特質,肯定自己在過程中的付出,感恩能支援病苦中的母親至人生終點。我又給她『四道人生』的練習,寫信向母親道謝、道愛、道歉、道別,藉著從記憶庫中搜索,建立與母親的感情連結。」

Pinky坦言:「最初因為逃避『回帶』而無法下筆,但想深一層,原來真的有道謝、道歉的心底話想表達,很自然地便寫得出來。」陳姑娘強調,在思緒沉澱的過程中,每個人都有自己的步伐,心窗打開的幅度亦各有不同,沒有既定時間表。

輔導後重啟人生

母親離開將近兩年,陳姑娘喜見Pinky重拾生活動力,發揮助人自助的精神:「善別輔導好比一個淨化解毒的過程,將抑壓情緒翻滾出來,經過自我調節或哭泣釋放,將心結拆牆鬆綁。」

Pinky在輔導中願意開放自己,由最初出現較多喪親後的身心反應,到後來逐步釋放情緒和心結。陳姑娘説:「我們持續見面,邀請她學習以不同方法表達感情和思念,見她較完整地經歷了喪親至復原的過程,所以邀請她參與同路人活動、善別小組等,又鼓勵有志服務弱勢社群的她接受工作上的新嘗試。」

現在轉職到校活動導師,Pinky自覺成長了很多:「慶幸當日主動尋求善別輔導,成為人生的轉捩點,最要感謝陳姑娘伴我走過喪親低谷。我的心窗原本因母親離世而緊閉,而對方就好像防銹潤滑劑,令這扇窗可有幅度地開啟。」

喪親路上不孤單,沿途處處是援手。只要願意求助,逆境定可跨過。

Pinky 笑言:「陳姑娘的作用就好像防銹潤滑劑,令我的心窗重新開啟。 Chan's help acted like a rust-proof lubricant, allowing that window to open once again," Pinky gladly said.

Letters of Emotional Release

After the passing of parent(s), children often feel guilty, mostly because they think that they spend insufficient time and care with their loved ones. Chan noted, "Pinky's feelings of guilt and mild depression are totally understandable. During our counselling sessions, I suggested she create a list of the warmhearted things she did for her mother, reflect on the valuable inherited qualities, and acknowledge her efforts while being grateful for the opportunity to support her mother until the end of her life. I also provided her with a 'Four Letters' exercise to write letters of thanks, love, apology, and farewell to her mother, helping her establish an emotional connection through memories."

Pinky admitted, "At first, I struggled to write because I wanted to avoid looking back, but upon deeper reflection, I realized I had heartfelt words of gratitude and apology to express, and it flowed naturally." Chan emphasized that everyone has their own pace in processing emotions, there is no set timeline.

Restarting Life after Counselling

Nearly two years after her mother's passing, Chan was pleased to see Pinky regain motivation for life, embodying the spirit of helping others to help themselves. "Bereavement counselling is akin to a detoxifying process, allowing suppressed emotions to surface. Through self-regulation or crying, emotional knots can be unraveled."

Pinky was willing to open up during counselling, moving from an initial state of grief to gradually releasing her emotions and resolving her inner conflicts. Chan said, "Throughout the counselling sessions, I continuously invited her to learn different ways to express her feelings and longing. Witnessing her journey from grief to recovery, I invited her to participate in peer support activities and bereavement groups, encouraging her to embrace new opportunities in her work that serve marginalized communities."

Now working as a school activity instructor, Pinky is proud of her significant growth, "I'm grateful that I reached out for bereavement counselling, as it became a turning point in my life. I owe a lot to Chan for accompanying me through my lowest moments of grief. My heart was initially closed off due to my mother's passing, but Chan's help acted like a rust-proof lubricant, allowing that window to open to some extent."

On the journey of grief, one is not alone; there are helping hands along the way. As long as one is willing to seek help, adversity can surely be overcome.



心有所依 媽媽無處不在 Connected in Heart: Surrounded by Mother's Love In



雋鈞2023年學士畢業,為了讓先母同場見證,因此特製人像易拉架在校園拍攝合照。 In 2023, Axel earned his bachelor's degree—and to ensure his late mother could "attend" the milestone, he crafted a life-sized standee of her, framing a bittersweet graduation portrait on campus.

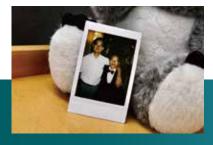
三十而立的蘇雋鈞,在七年間先後經歷父母病逝,彷彿失去人生支柱,情緒跌至谷底,甚至想過安樂死。憶起母親離世時,醫院給他善別輔導的單張,加上大學舍監的鼓勵而決心尋求專業輔導。現已走出陰霾的他,聽著母親的語音訊息,一臉滿足的說:只要我感覺到她,她就存在。」

30-year-old Mr. Axel So has experienced the loss of both parents over the past seven years, feeling as though he has lost the pillars of his life, his emotions hit rock bottom, and even considered euthanasia. Recalling at the time of his mother's passing, he received a brochure about bereavement counselling from the hospital; With encouragement from his university dorm supervisor, he decided to seek professional help. Currently emerged from the shadows, he contentedly says, "As long as I feel her presence, she is present."

日夜顛倒 難察患病

馬鈞家境清貧,有一個大他八歲、已搬離家的姐姐, 四口子甚少溝通。2011年父親病逝時,他才讀中四,家裡靠母親維持生計。

礙於經濟條件,一家人從沒做身體檢查。2016年母親突然咳血,起初以為喉嚨受損而不以為然,雋鈞心感不安,堅持陪伴母親到醫院求診,亦聽從醫生意見,做正電子掃描檢查,由他資助相關檢查的費用,及後母親證實患上肺癌三期。「那時媽媽任職通宵保安員,與我上學的時間日夜顛倒,自責沒有早點察覺她患病。到她病後相處時間多了,錄下大量語音訊息、日常生活影片,才知道她原來很疼惜我。」雋鈞帶點歉疚的說。



Undetected Illness: Masked by Reversed Day and Night Routines

Raised by a poor family, Mr. So's family seldom communicates, leaving him with a sister who is eight years his senior that has already moved out. When his father passed away in 2011, he was in his fourth year of secondary school, and the household relied solely on his mother for income.

Due to financial constraints, the family never had health check-ups. In 2016, when his mother suddenly coughed up blood, they initially thought it was throat damage and didn't take it seriously. However, Mr. So had an uneasy gut feeling and insisted on accompanying his mother to the hospital for a consultation and paying for the examination himself. He followed the doctor's advice to get a PET scan, which later confirmed that his mother had stage three lung cancer. "My mother worked as a night security guard, and our schedules were reversed. I regret not noticing her illness sooner. After she became ill, we spent more time together, I recorded a lot of voice messages and daily life videos, only to realize how much she cherished me," Mr. So said with a hint of guilt.

雋鈞自言一家人很少合照,這張即影即有是兩父子碩果僅存的相片。 "Our family rarely took photos together," Axel admits, cradling the solitary instant print—now a fragile relic of father and son, frozen in time.



連番打擊 生無可戀

在治療和藥物的幫助下,雋鈞母親由確診至離世經歷兩年,期間母子締造了很多人生第一次:遊覽海洋公園、乘坐過山車、兩手相牽。最想不到的是媽媽陪我玩過山車,坐下時我驚得全身發抖,她邊捉著我的手、邊安慰我說:『合上眼、不用怕』。」下車之後,我們開心得拍照留念,畫面至今仍然歷歷在目。

「爸爸病逝時,我還有媽媽相依為命;後來媽媽離世了,我最好的朋友當時亦將移民,感覺整個世界再無倚靠、無希望、無留戀。」內在情緒不斷積壓,令他萌生安樂死的念頭,甚至上網尋找相關資料,想就此了結人生。

母親擔任保安員的證件、公仔匙扣和 生日裝飾,雋鈞都妥善保存。

His mother's security badge, a whimsical keychain trinket, birthday decorations—each artifact preserved with the tenderness of unspoken goodbyes.

催眠治療 釋放情緒

雋鈞意識到自己情緒爆煲,遂聽取大學舍監的意見,接受專業輔導。

他向善寧會尋求協助,善別輔導員阮慧敏憶述兩人首次會面時氣氛凝重:「雋鈞見到我好像仇人般,充斥負面情緒。」得悉他童年生活匱乏,鮮有接觸玩具,我於是安排他到遊戲室接受輔導,藉著拍打不倒翁,釋放受困情緒,期間至少聽了他二十分鐘粗口。待盡情發洩後,我提議他在白板上用文字代替『精準的語言』(粗口),表達內心的憤怒,他最後也乖乖收口。」

除了導引式表達,阮姑娘又透過催眠治療,幫助雋鈞在感覺安全下,與母親建立情感連結。雋鈞描繪當時的情景:「我躺在遊戲室的軟墊上,望到窗外的雲,於是問阮姑娘:『媽媽是否在那處?』阮姑娘回答:『只要你感覺她在,到處也可是媽媽。』這一席話後,我好像找到一大情緒出口。」

Gradual Loss of the Reason to Live

Under the help of treatment and medication, Mr. So's mother lived for two years after her diagnosis. During this precious period of time, they created many first-time, mother-and-son experiences together-- visiting Ocean Park, riding roller coasters, holding hands etc. "I never imagined it was my mom who accompanied me on the roller coaster. I was so scared that I trembled all over, and she was holding my hand, reassuring me, saying, 'Close your eyes, need not to be afraid.' After getting off, we happily took photos together, and that moment is still vivid in my mind."

"When my father passed away, I still had my mother to rely on; after she passed away, my best friend was also immigrating at that time. My world instantly lost its colours, it felt like there was no support, no hope, and nothing to hold onto in this world." The mounting emotions led him to consider Euthanasia, and even searched online for related information to end his life.

Hypnotherapy: Releasing Emotions

Realizing that his emotions were boiling over, Axel heeded his university dorm supervisor's advice and sought professional counseling.

He reached out to the SPHC for assistance, and bereavement counselor Yuen Wai-man recalls the heavy atmosphere during their first meeting: "Axel looked at me as if I were his enemy, filled with negative emotions." Learning about his impoverished childhood and lack of exposure to toys, she arranged for him to receive counseling in a playroom, using a punching bag to release pent-up emotions. During this time, he expressed himself with at least twenty minutes of profanity. After he vented, I suggested he use words on a whiteboard to replace the "precise language" (profanity) to express his anger, and he eventually complied."

In addition to guided expression, Miss Yuen used hypnotherapy to help Axel establish an emotional connection with his mother in a safe environment. Axel described the experience: "I lay on a soft mat in the playroom, looking at the clouds outside, and asked Miss Yuen, 'Is Mom over there?' She replied, 'As long as you feel her, she could be anywhere.' After that, I felt like I found an emotional outlet."



馬鈞感謝阮姑娘做他的聆聽者和開導者,幫助他走過人生低谷。 To Miss Yuen, the counselor who lent him an ear and lit the way through his darkest valleys, Axel offers quiet gratitude: "She helped me breathe when grief stole my air."



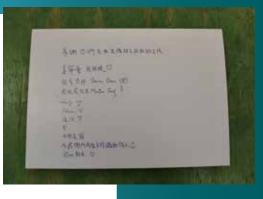
雋鈞説有很多人在他的哀傷路上給予支持, 並將名字逐一寫在感謝卡。

Names bloom across Axel's thank-you cards—a handwritten constellation of those who held him as sorrow rewrote his sky.



阮姑娘表示・母親患病期間仍關心和照顧雋鈞,這種慈愛 可透過重溫影像和聲音・令其在生命中繼續流動。

"Even in illness, his mother's love never wavered — it still flows," Miss Yuen reflects, "if we listen closely to echoes in photos and voice notes."



放棄執念 建立連結

在喪母後萬念俱灰, 雋鈞曾上網搜尋安樂死的資料, 後來發現手續繁複、收費不菲而放棄尋死念頭。對於 喪親者發出的危險警號, 阮姑娘強調必須正視:「當 我們覺得生存比死亡痛苦,又不知如何活下去,就會 想藉尋死來擺脱痛苦,其實並非真的想輕生。」

雋鈞前後接受了多次輔導。針對他長期抑壓而又無法 梳理的情緒,阮姑娘建議他把與母親的回憶,內化為 情感上的連結,著眼於「珍惜」而不是「失去」。

現在雋鈞思念母親時,便會重溫昔日影片或語音留言,令心靈得到依靠,例如母親在他19歲時仍叮囑「17度要穿冷衫、15度要穿厚褸」、「長大後做個對社會有用的人」;母親即使患病,在他實習期間仍每天為他準備餐盒。誠如阮姑娘所言:「雋鈞母親的説話就好像定期存款,只會滾存而不會透支。『守護』和『陪伴』可以由聲音、影像昇華為越超時地的感情連結。」

「因為自己淋過雨,所以總想替別人撐把傘。」 雋鈞 之前進行輔導碩士實習,為經歷哀傷的人士舉辦哀傷 工作坊和提供善別輔導,決心支援同路人。

Letting Go of Obsessions: Building Connections

After the loss of his mother, feeling utterly despondent, Axel searched online for information about assisted suicide but later abandoned the idea due to the complicated procedures and high costs. Regarding the dangerous signals given by bereaved individuals, Miss Yuen emphasized the need to confront the issue: "When we feel that living is more painful than dying but don't know how to continue, we may think of seeking death to escape the pain, but it doesn't mean we genuinely want to end our lives."

Axel underwent multiple counseling sessions. To address his long-suppressed emotions, Miss Yuen suggested he internalize his memories with his mother into an emotional connection, focusing on "cherishing" rather than "losing."

Now, when Axel misses his mother, he revisits old videos or voice messages, giving him emotional support. For instance, his mother used to remind him at 19 years old to "wear a sweater at 17 degrees, a thick coat at 15 degrees" and to "be a person useful to society" as he grew up. Even while ill, she would prepare lunchboxes for him daily during his internship. As Miss Yuen said, "Axel's mother's words are like a fixed deposit; they only accumulate and never deplete. 'Guarding' and 'accompanying' can transcend into timeless emotional connections through voice and images."

"Having experienced the rain myself, I always want to hold an umbrella for others." Axel pursued his master's in counseling and conducting grief workshops and individual counseling for those who have experienced loss, determined to support others on the same journey.





伸延的家 守護歸途 An Extended Home, Guarding the Return Journey

提起紓緩治療或寧養服務,許多人會聯想到放棄醫治、等待死亡。作為業界推手之一,香港老人科專科醫生勞思傑稱當中存在不少誤解:「寧養紓緩及老人科服務其實是積極的,晚期病人需要個人化的醫療。在未了解病人需要時,醫生只是去治理他的病;待了解病人想法後,醫生不單止可治理他的病,更可以去照顧他整個人及家庭。」誠然同理心比同情心重要,當醫護易地而處,與病人商討不同治療方案的利弊,讓他有選擇地改善生活質素及有尊嚴地延長壽命,就是善終的意義。

When it comes to palliative care or hospice services, many people immediately link the topics to halting medical treatment and waiting for death. As one of the industry's advocates, Hong Kong geriatrician Dr. Lo See-kit said the public has long misunderstood the field: "Palliative care and geriatric services are active methods of providing personalized medical care to terminally ill patients. Physicians must first treat patients based on their physical needs, then provide holistic care for them and their communities."

It does go to show that empathy overshadows sympathy in the field of palliative care. Physicians must put themselves in the patients' shoes and propose methods to improve their quality of life while providing them with the fundamental human right of dignity.

英國教學醫院啟蒙

勞思傑醫生80年代在英國讀醫,先後於老人科及腫瘤科擔任醫生。英國是紓緩治療的起源地之一,勞醫生曾在當地不同的教學醫院工作,而其中一間West Middlesex University Hospital,便是「老人科之母」Dr. Majory Warren的始創醫院。

「老人或紓緩科看似是毋須衝鋒陷陣的專科,但是亦有很多急症、重病,而晚期病者中也不乏年青人。記得有位十多歲患有血癌的非洲青年,由幫他治療血癌及紓緩徵狀直至離世,令我體會到不論任何年齡、階段的病人都需要適切照顧。能夠幫助他們安度餘生,絕對是一種現今社會必需的人文關懷。」勞醫生説。

Dr. Lo's Upbringing and Spark for Palliative Care

In the 1980s, Dr. Lo studied medicine in the UK, one of the first health systems to pioneer palliative care, where he worked as a physician in both geriatrics and oncology at various teaching hospitals. Notably, he worked at West Middlesex University Hospital, which was founded by Dr. Majory Warren, the "mother of geriatric medicine".

"At the surface, geriatric or palliative care may seem like a specialty that does not require immediate response and urgent attention, but there are many cases where immediate intervention is necessary. I recall treating a young African teenager for leukemia, when he passed away unexpectedly. This goes to show that all patients, no matter at any age or life stage, deserve appropriate care. Being able to help them spend the rest of their lives with dignity and respect is a form of quality care that should be valued in our society," Dr. Lo remarks.

從英國回香港後,勞醫生加入醫管局,及在中文大學醫學院 投入行醫、教學、研究等工作,其後私人執業,繼續服務社 會。早前,勞醫生更與一班有心人成立「晚期病患醫療及各界 關注聯盟」,推動紓緩治療及寧養服務的普及化。去年5月,

他曾加入「賽馬會善寧 之家」,擔任非牟利機 構的顧問醫生。

勞思傑醫生表示,人生不是一 遇挫敗便放棄,就如患病也並 非不戰而降。

Dr. Lo See-kit emphasizes that life is not about giving up in the face of setbacks; similarly, being ill does not equate to surrendering without a fight.



提升在病榻上的生活質素

晚期病人是指病情不能逆轉、生命進入有限階段的病人,涵蓋癌症、器官衰竭、年老體弱等。紓緩治療不是指醫生撒手不管,而是積極控制病情,幫助病人紓緩疾病併發的症狀不適、減輕痛楚,以提升在病榻上的生活質素。舉例來説,勞醫生總結多年的臨床及統查發現:「晚期癌症病人入院後,最常出現身體上的三大症狀是疼痛、氣喘、疲累,其他還有失眠、消瘦、嘔叶、食慾不振等。」

世界衞生組織的「止痛階梯」,將癌痛處理分為三級,並設定藥物療程作參考。勞醫生表示:「我和團隊設定了一個指標,在一至十的痛楚程度量表裡,病人入院三天內,需將痛楚控制在三度或以下。根據『止痛階梯』的指引,九成以上的痛都可以控制。」

外國有研究顯示,初期的急症、癌症、器官衰竭,若早點採取寧養紓緩治療兼顧並行,除了可以控制好症狀,生活質素得以提升外,壽命亦可以延長。勞醫生續指:「患有初期認知障礙的病人,已有藥物可減慢衰退,而在晚期出現的思維錯亂、驚恐、擔憂、大叫等都可以在肉體的痛楚得到減輕後,在適當的紓緩治療及心理支援下得到有效改善。」

After returning to Hong Kong from the UK, Dr. Lo joined the Hospital Authority and engaged in clinical practice, teaching, and research at the Chinese University of Hong Kong's medical school. He later built his private practice while continuing to serve the community. Recently, Dr. Lo established the "Alliance for the Medical Care of Terminally III Patients and Community Concerns" among like-minded individuals, to advocate for palliative and hospice services. Last May, he joined the Jockey Club Home for Hospice as a consulting physician.

Enhancing Quality of Life for Bedridden Patients

Terminally ill patients are those whose conditions are irreversible and whose days are limited, including patients suffering from cancer, organ failure, and old age. The false belief that doctors would deliberately abandon the patients under palliative care is inherently untrue; doctors in palliative care aim to actively alleviate the pain and discomfort caused by disease complications with the end goal of enhancing their ultimate quality of life. For example, Dr. Lo reflects among years of clinical practice and research findings: "Once terminal cancer patients are admitted to the hospital, the three most common physical symptoms are pain, asthma, and fatigue, often accompanied by insomnia, emaciation, vomiting, and anorexia."

The World Health Organization's "Analgesic Ladder" categorizes cancer pain management into three levels, used by doctors as a reference for prescribing medication. The Ladder illustrates that over 90% of pain can be effectively controlled given the right treatment and medication. Dr. Lo states that his team has set a target to have patients' pain controlled at a level of three or below on the 1-10 scale within 3 days of hospitalization.

Research from other countries shows that early initiation of palliative care, integrated with other treatments, not only helps control symptoms but is able to extend lifespans for patients of early-stage emergencies, cancer, and organ failure.

Dr. Lo further explains that existing palliative treatment and psychological support has been proven to slow the decline of mild cognitive impairment in patients, along with behaviors and symptoms including confusion, panic, anxiety, and shouting that are associated with end-stages.

舒緩服務團隊除了控制病人身體上的症狀外,也要照顧病人心靈、社交和家庭的需要。

The palliative care team not only focuses on managing the physical symptoms of patients but also prioritizes their emotional, social, and familial needs, ensuring that patients receive comprehensive support and maintain dignity and quality of life.





勞醫生說醫生和病人的關係很 微妙。他與英國的教授就先後 經歷師生、校友、同事、朋友 和醫患五種身份,而他背後的 油畫正是由對方親繪。

Dr. Lo emphasizes the nuanced doctor-patient relationship, reflecting on his multifaceted connection with a UK professor—teacher, student, alumnus, colleague, friend, and patient. The oil painting behind him, created by the professor, symbolizes their bond.



今年元宵節,有義工團來扭氣球送給院友和家屬 勞醫生亦一起到病房送暖。

This year during the Lantern Festival, a group of volunteers came to twist balloons and give them to the patients and their families. Dr. Lo also joined in to spread warmth by visiting the wards.

共同實踐全人關懷

隨著香港人口高齡化、癌症患者年輕化,醫療的需求亦相對大大提升,病人即使想在家休養或在家離世,各方環境或未必配合得到,而「賽馬會善寧之家」就是公、私營醫院以外一個很好的選擇。對病人來説,沒有地方好過熟悉的家。勞醫生強調寧養為一家:「休息養病的地方,就是病人伸延的家。我很欣賞賽馬會善寧之家『以家為本』的概念,套房內的獨立洗手間能保持病人如廁和沐浴的私隱,配備的梳化床又可供親友陪宿,而飼養的貓狗亦歡迎探訪。人性化的措施對病人家庭也是一種極為重要的全人關懷。心情與病況互為影響,親友陪伴有時勝過藥物幫助。」

在香港,寧養服務、紓緩治療的水平已經不錯,這有 賴整個團隊包括醫生、護士、社工、心理學家、職業 治療師、物理治療師、義工等共同努力,從身、心、 社、靈四方面為病人和家屬提供所需支援。當病人的 症狀受控、沒有抑鬱情緒,在生活質素改善後,生命 亦可延長,就能把握時間完成更多希望做的事情。 勞醫生不願那些快要走上歸於 的病人獨行。比起死亡,他們 或者更害怕在生命倒數的過程 中承受痛苦和喪失尊嚴。

Dr. Lo believes that those nearing the end of their journey should not have to face it alone. While the concept of death may be daunting, many fear the pain and loss of dignity that can accompany the final stages of life even more.



Collaborative Practice of Holistic Care

Due to population aging, and younger demographic of cancer patients in Hong Kong, there is a heightened demand for medical care. Even for patients who have indicated preferences to have a peaceful death at home, surrounded by loved ones and familiar environments, various barriers may stand. Therefore, the "Jockey Club Home for Hospice" is an excellent alternative for patients seeking palliative care outside of public and private hospitals. Dr. Lo emphasizes that palliative care is centered around families and communities, and remarks, "A haven tailored to rest and recovery can act as an extended home for the patient. I greatly appreciate the "home-centered" concept of the JCHH, which includes private lavatories to maximize patient privacy, and welcomes overnight family visits along with pets. These measures ensure optimized care being provided for the patient and their families. Since mood and health are very much interrelated, perhaps the warm support of loved ones may prove more effective than medication alone."

Thanks to the collective efforts of an entire team including doctors, nurses, social workers, psychologists, occupational therapists, physiotherapists, and volunteers, the quality of palliative care and services has greatly improved in Hong Kong. Meanwhile, comprehensive support for patients and their families from the perspectives of physical, mental, social, and spiritual well-being must be provided. When patients experience relief from their symptoms, their depressive moods may also improve. As their quality of life enhances, they may find their lifespan extended, providing them with the opportunity to achieve more of the things they wish to do.

勞醫生(左)聯同時任善寧會營運總監黃嘉然(中),在去年的《破●地獄》影後座談會上,就舒緩治療服務與觀眾交流。Dr. Lo (left), alongside Mr. Wong Karyin, the then SPHC's Chief Operation Officer (center), participated in a discussion with the audience about palliative care services during viral participated in The Last Dance "





勞醫生組隊參加今年3月舉辦的 | 登山 善行」,身體力行為晚期病人籌款。 Dr. to formed a team to participate in the "Hike for Hospice" held in March this year, actively raising funds for terminally ill patients.

活動回顧 Recent Event



「燃亮生命火花」聖誕音樂會 閃耀祝福 Sharing Blessings through "Light Up a Life" Christmas Carol Concert

第33屆「燃亮生命火花」聖誕音樂會於2024年12月3日在中環聖約翰座堂順利舉行,逾650位善長在悠揚樂韻和聖誕樹映照下,共度了一個溫馨的晚上。

座堂內擺放掛滿心意卡的「生命樹」(聖誕樹),讓參加者憑卡寄意,紀念已故或祝福病榻的親友。而活動後,「生命樹」已移師到沙田的「賽馬會善寧之家」,繼續燃點希望、傳送祝福。

音樂會所籌得的善款將用作支持善寧會的「住院資助計劃」,為晚期病人、家屬及照顧者提供全面的紓緩 治療和善別輔導服務。

The 33rd "Light Up a Life" Christmas Carol Concert was successfully held on the 3rd of December, 2024, at the Cathedral Church of Saint John the Evangelist (St John's Cathedral) in Central, with over 650 donators enjoying a warm evening with music, love and holiday blessings.

Decorated by heartfelt cards, the "Tree of Life" (Christmas tree) is filled with love and sentiment of participants, commemorating their deceased loved ones or sending blessings to ill friends and family. After the event, the "Tree of Life" was moved to the Society for the Promotion of Hospice Care (SPHC) in Sha Tin, spreading hope and love.

The funds raised from the concert will be used to support the "In-patient Hospice Care Subsidy Program" provided by the SPHC, offering comprehensive palliative care and bereavement counseling services for late-stage patients, their families, and caregivers.



《破 ● 地獄》影後座談會 參透生死 "The Last Dance" Post-Movie Forum: Insight into Life and Death

感謝「淨緣慈善基金」贊助,「一切從簡」與「善寧會」於2024年11月24日合辦了一場《破 • 地獄》慈善放映會及影後座談會,約有150人出席,包括購票善長、機構捐款人及友好夥伴。

放映會後,善寧會安排了一個有關「紓緩治療及安寧服務」的分享會,由時任的善寧會營運總監黃嘉然先生及「賽馬會善寧之家」顧問醫生勞思傑醫生擔任嘉賓,同場設有問答環節,跟觀眾互動交流。

電影《破•地獄》有幾句經典對白:「喃嘸負責超渡先人,殯儀經紀負責超渡生人。」「生人都要破地獄,生人都有好多地獄。」意味深長,發人深省。

死亡是人生必經階段,以宗教儀式送別亡者之餘,其實整個家庭也需要一個適切的身心過渡,否則活著的人受困更多。而善終服務常提及的「逝者善終、生者善別」就是以尊重生命的態度,幫助病人完成人生終站,並輔導家屬面對下一階段的生活。

On November 24, 2024, Rip88 and the Society for the Promotion of Hospice Care (SPHC), sponsored by the Jing Yuan Charity Foundation, hosted a charity screening of "The Last Dance" in Hong Kong, attended by approximately 150 people, including donors and participants. Following the film, SPHC led a discussion on palliative care and hospice services, featuring guest speakers Mr. Wong Kar-Yin, the then SPHC's Chief Operations Officer, and Dr. Lo See-Kit, a Consultant Doctor. A Q&A session engaged the audience, fostering meaningful dialogue.

The film's profound lines, such as "The Nam-Mo is responsible for guiding the deceased, while the funeral agent is responsible for guiding the living" and "The living has to break through 'hell' as well; There are many 'hells' in life," resonated deeply, prompting reflection on mortality. Death, an inevitable part of life, requires more than rituals; families need emotional support to transition and avoid prolonged suffering. Palliative care, emphasizing "a decent end for the deceased; and a heartfelt farewell for the living," reflects respect for life, aiding patients in completing their journey and guiding families toward healing and the next stage of life.



「我們這一『家』」發佈會成功舉行 Launch Event of "Home is Where We Are" Successfully Held

2024年12月7日, 善寧會於沙田「賽馬會善寧之家」舉辦「我們這一『家』」發佈會, 吸引眾多公眾參與, 場面溫馨感人。

活動邀請知名藝人許家傑先生(Jack)擔任親善大使,醫管局九龍西醫院聯網總監羅振邦醫生任主禮嘉賓,兩位於專題講座分享生死教育及晚晴關愛訊息。當日設多場工作坊,包括「心聲共鳴 — 預設照顧計劃」及「生命掌門人」,以及四場院舍導賞,讓參加者深入了解寧養服務。Jack真摯分享外,「狗狗大使」唐狗Queenie更友善現身,推廣寵物探訪安排。講座由許家傑、羅振邦醫生、時任善寧會營運總監黃嘉然、駐院醫生余偉明及服務使用者家屬馮景龍主講,分享紓緩治療及善別輔導心得,與觀眾互動熱烈。

活動獲嘉賓、義工及合作夥伴全力支持,參加者對內 容讚譽有加,期望未來舉辦更多類似活動,推動生死 教育,普及寧養服務。

On December 7, 2024, the Society for the Promotion of Hospice Care held a launch event—"Our Family" at the Jockey Club Home for Hospice in Sha Tin, attracting a large public audience, creating a warm and touching scene at the hospice centre.

The event invited well-known artist Mr. Jack Hui Ka Kit to serve as a goodwill ambassador, with Dr. Law Chun-bon, the Director of the Kowloon West Cluster of the Hospital Authority, as the guest of honor; both guests shared insights on death education and palliative care at a talk. There were multiple workshops held on the day, including "Echoes of the Heart – Advance Care Planning" and "Life Navigators," along with four guided tours of the care facilities, allowing participants to gain a deeper understanding of palliative services. Jack sincerely shared his experiences, and Queenie as a "dog ambassador" also made an appearance to promote pet visitation arrangements. The talks were led by Mr. Jacky Hui, Dr. Law, Mr. Wong Kar-yin, the then Chief Operation Officer of the Society for the Promotion of Hospice Care, Resident Doctor, Dr. Yu Wai-ming, and Mr. Fung King-long, family member of service user, sharing insights on palliative care and bereavement counseling, with enthusiastic interactions with the audience.

Supported by guests, volunteers, and partners, the event received positive feedback. Participants valued the content and hoped for more initiatives to advance death education and hospice care awareness.

第20屆香港紓緩照顧研討會 圓滿閉幕 20th Hong Kong Palliative Care Symposium Wraps Successfully

香港人口老化,社會對晚期照顧、寧養服務的需求持續攀升,為促進香港紓緩治療的發展和應對行業所需,善寧會與香港紓緩醫學學會、香港紓緩護理學會於2025年2月22日假香港青年協會大廈,順利舉辦「第20屆香港紓緩照顧研討會」。

今次大會主題為「Evolving Development in Palliative Care」(紓緩治療的發展與演變),榮幸邀得醫務衞生局副秘書長李力綱先生太平紳士擔任主禮嘉賓,香港中文大學醫學院精神科學系林翠華教授、靈實醫院顧問醫生(內科)林偉民醫生、香港紓緩醫學學會主席何俊榮醫生擔任講者。

當日研討會分上午和下午兩部份。上午是由三位講者 主持的多角度專題演講,設有觀眾問答環節;下午安 排了兩個工作坊:表達藝術治療和預設照顧計劃,以 及由醫護人員簡報入圍的論文,並即場選出得獎者。

全日共吸引約200名業界人士參與,彼此就紓緩照顧課題,發表及分享其研究成果,推動香港紓緩治療、 寧養服務的發展。期待明年再會!

Hong Kong's aging population has increased demand for end-of-life and hospice care. To address this, the Hong Kong Society for the Promotion of Hospice Care, with the Hong Kong Society of Palliative Medicine and Hong Kong Palliative Nursing Association, hosted the 20th Hong Kong Palliative Care Seminar on February 22, 2025, at the Hong Kong Youth Association Building. Themed "Evolving Development in Palliative Care," the event aimed to advance regional palliative care.

Guest of honor Mr. Lee Lik Kong Eddie, JP, Deputy Secretary for Health, joined speakers Prof. Lam Chiu Wa Linda (CUHK Psychiatry), Dr. Lam Wai-man (Haven of Hope Hospital), and Dr. Ho Chun Wing Jerry (Hong Kong Association of Palliative Medicine).

The seminar featured morning presentations with Q&A sessions and afternoon workshops on expressive art therapy and pre-planned care. Medical staff presented shortlisted papers, with winners selected on-site. Approximately 200 professionals attended, sharing research to enhance palliative and hospice services. The event fosters ongoing industry development.





「登山善行2025」 紓己寧人 "Hike for Hospice 2025" Put Your Best Foot Forward

善寧會自1992年開始,每年舉行重點籌款活動「登山善行」,而第32屆賽事剛於2025年2月16日在港島大潭郊野公園完美落幕。

我們很榮幸邀得時任醫務衛生局副局長李夏茵醫生JP擔任主禮嘉賓、香港女子武術運動員莫宛螢小姐擔任「登山善行」活動大使、善寧會名譽會長梁智鴻醫生GBM, GBS, OBE, JP、善寧會執行委員會主席汪國成教授 JP 及「登山善行2025」籌委會聯合主席詹康信先生GBS,聯同一眾出席嘉賓,共同鳴槍為今年賽事揭開序幕。

是次超過400人以個人或隊伍的形式報名參賽。健兒涵蓋不同年齡階層,包括青少年制服團、學生、各大機構的員工與朋友,以及活力充沛的長者們,更難得的是有服務使用者帶同親友一同參與,寓登山於慈善,惠澤社群。

我們希望通過公眾的參與,讓更多人了解善寧會的服務,並鼓勵親友共襄善舉。活動所籌得的善款,將支持善等會的晚晴服務,包括寧養紓緩治療及善別輔導服務。

The Society for the Promotion of Hospice Care (SPHC) has held the fundraising event "Hike for Hospice" every year since 1992. The 32nd "Hike for Hospice" was successfully held on February 16, 2025, at the Tai Tam Country Park on Hong Kong Island.

We are deeply privileged to welcome Dr. Libby Lee Ha-yun, JP, Former Under Secretary for Health, as our Guest of Honor, alongside Ms. Juanita Mok, Hong Kong's renowned Wushu athlete, who serves as Ambassador for this year's "Hike for Hospice." Together with Edward Leong Che-hung, GBM, GBS, OBE, JP, Honorary President of the Society for the Promotion of Hospice Care; Thomas Wong, JP, Chairman of the SPHC Executive Committee; and Mr. James E. Thompson, GBS, Co-Chair of the "Hike for Hospice 2025" Organizing Committee—they joined distinguished guests in firing the ceremonial starting gun, officially launching this year's event.

This year, over 400 participants registered for the event, joining either individually or as part of a team. Participants included youth uniformed groups, students, employees, and friends from various organizations, as well as enthusiastic seniors. Notably, some service users invited their friends and family to join, showcasing our mission of combining mountain climbing with charity to benefit the community.

We aim to raise awareness about the services offered by SPHC and encourage participants to invite their friends and family to join our charitable efforts. The funds raised from this event will support SPHC's initiatives, including palliative care and bereavement counseling services.















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