

Quality and bravery are not characteristics you would automatically put together.

Yet when the *Hong Kong Medical Journal's* (HKMJ's) Editorial Board had to choose our inaugural Best Original Paper, it was the combination of those two things—quality and bravery—that marked out the winner: *Characteristics, management process, and outcome of patients suffering in-hospital cardiopulmonary arrests in a teaching hospital in Hong Kong* by HY Yap et al.

The field was excellent. The other two papers on the finalists' shortlist, *Universal antenatal human immunodeficiency virus (HIV) testing programme is cost-effective despite a low HIV prevalence in Hong Kong* by PM Lee and KW Wong; and *A study on body weight perception and weight control behaviours among adolescents in Hong Kong* by Patrick CH Cheung et al, were also outstanding.

It was not until the opinions of members of the HKMJ's International Editorial Advisory Board weighed in that a winner emerged. And it was the fact that Yap et al's paper, which found that survival rates after cardiopulmonary resuscitation in a Hong Kong hospital were well below international standards, did not shy away from exposing a failure of the system that gave their paper an edge over their rivals.

"The authors are courageous in pointing out their relatively poor results, and therefore what must be changed to make a difference. This approach can be copied and compared by others," said one of the International Editorial Advisory Board members.

Was it brave to point out that in a Hong Kong public hospital we are not meeting international standards when it comes to cardiac resuscitation? Or was it simply a mark of the maturity and sophistication of the clinical research now being conducted in our health service?

Florence HY Yap, an intensivist at the Prince of Wales Hospital and the paper's lead author, does not think there was any bravery involved, simply a desire to assess and improve how medicine is practised in Hong Kong.

"It never crossed my mind that the paper is 'brave,'" she said. "I thought it is 'mild', objective, factual, and neutral. There is nothing provocative, exaggerative, and challenging. Because I actually do not really have the answers to some of the problems, I do not pretend to have them in the paper."

"One message I do want to get across is that the results of in-hospital resuscitation are poor.



Dr Thomas ST Li, on behalf of the authors, receives the Best Original Paper Medal from Dr Richard Kay, Editor-in-Chief of the HKMJ, at the Conferment Ceremony of the Hong Kong Academy of Medicine on 13 December 2007

Prevention is better than cure, so always recognise the ill patient early and intervene early, to prevent deterioration to cardiac arrest."

In fact, said Dr Yap, the paper and the questions it asked and answered developed from a desire within the Prince of Wales Hospital to audit and improve the quality of cardiopulmonary resuscitation.

"To make a confession, this is not designed as a research topic. The project was in fact a quality improvement project in resuscitation. It so happens that I have a chance to help in the Hospital Resuscitation Committee in our hospital. I can see the problems and the difficulties. One has to understand the facts and what the problems are before one can improve on a service. So, as a quality improvement initiative, the audit was planned."

"However, once finished, we find the data quite interesting and original, different from the published literature. My mentor and good friend, Prof Gavin Joynt, encouraged me to write it up. I sent it to the HKMJ because I wanted to alert colleagues in other hospitals to the issue."

And have other those colleagues responded to it? "Most are surprised at the low rates of survival. How to improve it—people have different ideas on this. But yes, it has got people talking. I guess this type of awareness is a start. The more people who are aware of a problem, the more chance we will find the solutions. Medicine is a collaborative effort."

MARGARET HARRIS CHENG