

Editorial

Dissemination reports are concise informative reports of health-related research supported by the Health and Medical Research Fund administered by the Health Bureau. In this edition, we present 11 dissemination reports of projects related to advanced technology, Chinese medicine, digital health, non-communicable diseases, and reproductive medicine. In particular, research findings of three projects may provide insights to enhance clinical practices and help inform health policy formulation in Hong Kong.

Recurrence of hepatocellular carcinoma (HCC) within 2 years of curative surgery is common. HCC is usually diagnosed with computed tomography (CT) or magnetic resonance imaging. Lee et al¹ developed a deep-learning model using preoperative CT images to predict HCC recurrence after curative surgery. The model was trained using CT scans from 536 consecutive adult Chinese patients undergoing hepatic resection for histologically confirmed HCC. Internal and external validity testing was conducted using images from 135 and 560 patients, respectively. The final model, termed Recurr-NET, demonstrated superior risk stratification, compared with histological microvascular invasion, in predicting early and late HCC recurrence and mortality within 5 years.

Diabetic kidney disease (DKD) is the major cause of end-stage kidney failure leading to dialysis or transplantation and is characterised by progressively increasing albuminuria and/or declining renal function. DKD is conventionally treated by controlling blood pressure, blood glucose, and proteinuria. Some forms of traditional Chinese medicine (TCM) have been found to reduce the risk

of end-stage kidney failure, but their effectiveness for DKD remains unclear. Chan et al² evaluated the effect of a 48-week course of add-on astragalus-based TCM, compared to usual care, among 118 Chinese DKD patients aged 35 to 80 years with stage 2 to 3 chronic kidney disease and macroalbuminuria. The results showed that the add-on TCM treatment significantly improved kidney function (ie, estimated glomerular filtration rate) and significantly lowered systolic blood pressure and gamma-glutamyl transferase levels (although not clinically significant) in these patients.

Knee osteoarthritis (OA) leads to reduced physical fitness, quality of life, and increased healthcare utilisation. Acupuncture has been shown to be an effective treatment for knee OA pain. Acupressure is a non-invasive variant of acupuncture in which fingers, hands, and elbows are used to stimulate the same acupoints. Yeung et al³ conducted a randomised controlled trial of 314 middle-aged and older Chinese adults to evaluate the short- and medium-term effects of a 12-week course of self-administered acupressure, compared with knee health education, on alleviating knee OA pain. The results showed that two 2-hour sessions of self-administered acupressure training were effective in alleviating knee pain and improving mobility in older adults with knee OA. Participants in self-administered acupressure reported significantly lower pain scores at weeks 4, 8, and 12, compared with participants receiving knee health education. The self-administered acupressure training programme showed high acceptability and compliance and was cost-effective.

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