



巫柏齡醫生
Dr. Gordon Moe

致力醫學研究與健康推廣 華裔心臟專科醫生巫柏齡的願景

今年稍早前，英文報章公佈一份多倫多臨床評估科學研究所 (Institute for Clinical Evaluative Sciences) 的研究報告指出，華裔移民在西方國家例如加拿大居住的時間愈久，身體愈不健康。華裔心臟專科醫生巫柏齡 (Dr. Gordon Moe) 對這份報告相當重視，多年來，他一直致力於中風與心臟病方面的醫學研究，同時對推廣健康不遺餘力。

出生加拿大 在香港成長 本地學醫

巫柏齡醫生1955年出生在加拿大，但他的中文水平不錯，能聽、能講、能寫，這要歸功於他的父母從小給他學習中文的機會，他是少數能懂華語的土生華裔心臟專科醫生。巫柏齡兩代懸壺濟世，他的父母親早年畢業於廣東嶺南大學醫學院，因戰亂離開家園，曾經到過英國、瑞士等地深造，50年代來到多倫多，在華埠掛牌行醫。父親是治療胸肺疾病的醫生，母親則專長婦產科，他和弟弟都在多倫多出生。1957年父母結束在多倫多診所的業務，雙雙返回香港重新開業，他跟隨父母回到香港，進入培正小學讀書，小學畢業後，他進入著名的「男拔萃」Diocesan讀中學，成績雖然不錯，但巫柏齡不喜歡香港那種「填鴨式」的教育體制，未讀完大學預科即通過進階考試，申請到西安大學 (Western Ontario University) 就讀。他因為從小就受父母的影響，早就打定決心學醫，頭兩年在西安大學攻讀科學 (Science)，「本來西安大學醫學院錄取了我，但是當多倫多大學醫學院也錄取了我時，我選擇了多大醫學院。」

選擇內科心臟科專科

在多大醫學院畢業後，巫柏齡選擇了內科範疇的心臟專科，「包括駐院實習、做研究、專科學習，我總共花了大約6年的時間。我曾在京斯頓皇后大學醫學院心臟專科學習，後來轉回多大醫學院的心臟專科繼續學習，也去過波士頓做研究，最後回到多倫多聖邁可醫院（St. Michael Hospital）。」從1987年開始，巫柏齡醫生就在聖邁可醫院心臟專科部門行醫，迄今已24年。他強調「預防勝於治療」。自從2001年開始擔任「華人中風及心臟基金會」主席，除了忙於醫學研究工作以外，他積極推廣移民過健康的生活。

巫柏齡表示，「華人新移民抵埗後如果改變生活作息和飲食習慣，久而久之，健康狀況與本地白人沒什麼太大的分別。」研究報告指出，長期定居本地的華裔和白人，與同樣族裔背景的新移民比較，患糖尿病的風險倍增。華裔加拿大人的心臟健康隨着時間衰退，程度最大，其次是白人、黑人和南亞裔。前述的研究報告顯示，北美地區居民群體的癆肥率偏高。定居加拿大15年以上的人，癆肥機率比新的移民高出30%到40%。

避免不健康飲食及生活習慣

中風和心臟病專家巫柏齡認為，社區應該盡量教育新移民戒除不健康的飲食及不良的生活習慣。在飲食健康方面，研究顯示，食用過量的鈉會引起血壓升高。目前在加拿大，幾乎每一個年齡層的人攝取鹽量都超過基本所需。若能根據專家建議，廣泛地降低飲食中鹽的攝取量，將可大大地減少罹患心血管疾病。心臟及中風基金會建議個人每日最高的鈉攝取量不多於2,300毫克或一茶匙鹽，患有高血壓或對鈉有過敏反應的人士則每日最高的鈉攝取量不多於1,500毫克或2/3茶匙。研究並顯示，心血管疾病的

主要危險因素與族裔背景有關。這項由安省心臟及中風基金會資助的全面研究，對不同族裔社群患上心血管疾病危險的概況作出調查，結果顯示加國四大族裔群有著明顯分別。雖然加拿大是全球匯聚最多不同族裔的國家之一，但其四大族裔群患心血管病的危險因素有何不同，人們對此知之甚少。巫醫生同意該份研究報告所提出的建議，即面對加拿大的多元化人口，在檢查和預防心血管疾病上，採取按個別族裔需要而定的方法，也許更為有效。

該項研究涉及154,653名白人、3,364名南亞裔人士、3,038名華人和2,742名黑人，他們於1996年至2007年間在安省居住。結果發現：南亞裔和黑人患糖尿病的風險，是白人和華人的一倍。白人的吸煙普及程度，幾乎是華人和南亞裔的三倍。過胖的情況在白人和黑人中較普遍，普遍程度是華人的五倍。總的來說，華人患心血管疾病的危險概況最為良好，只有4.3%的受訪者表示有兩種或以上的主要危險因素（即目前是吸煙者、過胖、有糖尿病和高血壓）；其後依次是南亞裔（7.9%）、白人（10.1%）和黑人（11.1%）。心血管疾病（心臟病或中風）在南亞裔人士中的普遍程度，幾乎是華人的一倍。吸煙行為在男性中較普遍，但在白人和黑人社區中，男女吸煙普遍程度的差別，遠較華人和南亞裔人士為少。63-75%的參與研究者並沒有每天進行至少15分鐘的運動，情況最壞的是南亞裔男性（70%）和女性（75%）、華裔男性（71%）和女性（75%），以及黑人女性（71%）。

稱讚加國醫療水平和健保制度

談到加拿大的醫療水平，巫柏齡醫生認為加國的醫療水平相當高，美國雖然在科研方面可能更為先進，但是美國缺乏全民健保的制度，平民百姓生不起病，加拿大一般人生病都不必擔心沒有錢醫不起；中國目前也不是全民健保，看病都得花錢。巫醫

生認為加拿大目前的問題是大城市醫生過剩，而鄉村及偏遠地區的醫生不足。聯邦政府應對於國外移民來加拿大的醫生，已放寬專業認證的尺度，這或許可以舒緩對醫生的需求。醫生是自由職業，沒有退休年齡的限制，只要通過「持續醫療教育-Continue Medical Education, 簡稱C.M.E」測試，自認為體力和腦力可以應付求診的病人，可以做到七、八十歲。

做為一名專科醫生，巫柏齡日常花在醫學研究和看病的時間大約各佔一半，但他解釋說，許多醫學上的研究亦與治病有關，因此，事實上花在看病方面的時間佔了大約70%。他除了在聖邁可醫院擔任心臟專科醫生以外，他同時也是多倫多大學的教授(Professor)，自執業迄今，他一直關心兩個核心領域：其一是醫學研究；其二是健康推廣。2001年接下「加拿大安省華人中風及心臟病基金會」會長以後，還要費心為基金會籌款。該基金會一批熱心的義工自1993年起發行『心聲-Heartbeat』季刊，提供健康資訊及最新醫學研究，讓社區大眾能活出健康的人生。每期的內容包括：頭條主題、專題報導、醫學小百科、健心食療篇及華人分會天地。『心聲』定期向加拿大華裔提供大量有關心血管疾病和預防中風的信息及健康生活的指南。由當初的半年刊發展至今日的季刊，最初發行量每期15,000份，現增至35,000份，可從www.heartandstroke.ca/heartbeat網上下載，每期『心聲』隨同中文報刊夾帶派發，同時可在很多安省指定的地點或安省心臟及中風基金會地區辦事處免費索取。

瞭解港加兩地差異及移民需要

巫柏齡生在加國，成長於香港，在加拿大接受醫學教育，父母和他兩兄弟都是醫生，這樣的背景及文化的薰陶，使他更容易瞭解兩個不同社會的需要。通過參與心臟病及中風基金會的義

工所得到的經驗，他開展更多面向少數族裔的研究及健康推廣，提供他們所需要的資訊。「目前在多倫多會說中文的華人心臟科專科醫生不多，現時大部份的健康推廣工作都是面向主流社會開展，忽略少數族裔的需求。因此，我認為有必要在華人社區加強對心臟健康及中風預防的重視程度。」他承諾要終生服務社區。最有效的方法就是提醒大家注意飲食和多運動，換言之，遵循健康的飲食方式，保持體能活躍，知道並控制自己的血壓和膽固醇、維持健康的體重、不吸煙、減少壓力、控制糖尿病、以及限制飲酒。巫柏齡兩夫婦經常到各處開會，順便旅遊，經常到中國，他看到中國大陸兒童過胖的情形很普遍，現代的兒童和年輕人普遍沉迷於電腦電玩，缺乏戶外活動，下一代人的健康令人擔憂。

巫柏齡醫生自1993年開始參與「華人中風及心臟病基金會」，今年是『心聲』發刊20週年，過去六年來全情投入為基金會的董事會做義工。出發點是希望減少華人中風的危險性。他給自己立下三個願景：首先是希望為「華人中風及心臟病基金會」籌得較充裕的款項，因為任何醫學方面的研究都需要經費，經費越充足，研究就能持續有進展；其次是教育推廣，教導大眾如何避免患上心臟病和中風，例如勸導青少年多參與戶外活動，不要整天盯著電腦、手機或掛著ipod聽音樂，減少吸煙和減少喝汽水；再其次是遊說政府，要求政府增加醫療和研究撥款。

他重申：「當我致力於為醫學研究籌款和推廣保健時，我是不求任何回報的。只要華人社區更重視健康的問題，而我的病人日漸康復，這就是我最大的回報。」



高中時的巫柏齡醫生(後排左三)。
Dr Gordon Moe (back row, 3rd left) with his high school classmates.



毛柏齡醫生與他的心臟科醫療及研究團隊
Dr Gordon Moe with his cardiology team which works with
and researches on heart failure.

2011年巫柏齡醫生在「安省心臟及中風基金會華人分會」知識講座上發表專題演講。Dr Moe delivering a keynote speech at a seminar organized by the Chinese Canadian Council of the Heart and Stroke Foundation in 2011.



2011年的「心聲慈善餐舞會」活動，巫柏齡醫生與陸即毅及中國駐多倫多副總領事張美芳合影。
Dr Moe with Chinese Deputy Consul General Zhang Meifang and volunteer Helen Lu at a charity function.



巫柏齡醫生夫婦遊覽大陸著名景點九寨溝。
Dr Moe and his wife visiting Jiuzhaigou Valley nature reserve in the north of Sichuan Province.



攝於多倫多心臟中心。
Pictured at the Toronto Heart Centre.



毛醫生在診斷病症。
Dr Moe working in his clinic.



巫柏齡醫生參加2005年「心聲慈善餐舞會」活動。
Dr Moe at the "Sing for Your Heart" gala in 2005.

Dr. Gordon Moe

Earlier this year, the Institute for Clinical Evaluative Sciences released a research report pointing out that the longer immigrants stay in western countries such as Canada, the less healthy they become. Dr. Gordon Moe, a cardiologist at St. Michael's Hospital, concurred with the findings of this report. For many years, he has dedicated himself to the study of heart diseases including the impact of ethnicity, and spent much of his time promoting health to the community.

According to this report, the risk of developing heart disease and stroke increases with the duration of time immigrants have resided in Canada. This is especially true for Chinese immigrants. The researchers have found that for those who have immigrated to Ontario for over fifteen years, when compared with those who have been here for fewer than fifteen years, their risk factors for heart disease and stroke (diabetes II, obesity, smoking and high blood pressure) are more prevalent and increase with the length of time they have been here. This pattern holds true no matter you are white, Chinese, South Asian, or black, although the actual risk does vary with ethnicity.

Dr. Moe concurs, 'If new immigrants adopt a western life style and eating habits after arriving in Canada, their risk for heart disease will not be much different from those Canadians born here.' The research report points out that for those who have been here for a long time,

their chances of incurring diabetes increase dramatically compared with new immigrants with the same ethnic background. The research indicates that obesity among North Americans is the highest, and those who have been in Canada for over 15 years is 30 to 40% higher than new immigrants.

Gordon was born in Canada in 1955, but his Chinese language skills are reasonably good. He can listen, speak and write in Chinese, all thanks to the opportunities his parents gave him in learning Chinese since he was young. Gordon's parents are also medical doctors, having graduated from the Medical School in Lingnan University in China. They left home after the Second World War and took further medical training in England and Switzerland. They came to Canada in the 1950's and started a medical practice in Toronto. Both Gordon and his brother were born in Toronto. In 1957, his parents decided to return to Hong Kong with their two children and started a practice there. Gordon entered the Chinese Pui Ching Primary School in Hong Kong, and the English Diocesan Boys' School later for secondary school. After passing the Advanced Level General Certificate of Education examination at the then lower Form 6, one year earlier than others, he was accepted by the University of Western Ontario in Canada for first year undergraduate studies. Since he was influenced by his parents from when he was very small, Gordon was already determined to go into the field of medicine. He was accepted by the University of Western Ontario Medical School after the first undergraduate year but

he chose to study for another year and was subsequently accepted by the University of Toronto Medical School after two years.

After completing internal medicine training, Dr. Moe chose to become a cardiologist. 'After graduation, I spent six years training in internship, residency in internal medicine and cardiology and research fellowship. I was trained in the Queen's University cardiology program initially, and transferred back to the University of Toronto later. I also did additional research training in Boston at the Harvard Medical School. I went on staff in St. Michael's Hospital in 1987.'

Since 2001, Dr. Moe has been the president of Chinese Canadian Council of the Heart and Stroke Foundation. In this position, he leads the Council in achieving the mission of the Foundation in Chinese and ethnic communities – raising much needed funds for research in heart disease and stroke, health promotion, and advocacy.

The Heart and Stroke Foundation has recently commissioned a study of different ethnic groups, and results indicate that these groups have different risk profiles. Overall, when compared to South Asians and blacks, Chinese Canadians have the lowest frequency of risk factors for heart disease and stroke. However, Dr. Moe does not think that one should be complacent with these findings and must continue to be vigilant in instituting preventive measures. For example, one of his own research projects has demonstrated that among Chinese Canadians,

there is very low awareness of the symptoms and risk factors for heart disease and stroke. According to Dr. Moe, these findings clearly call for health promotion efforts that are directed specifically to the Chinese community.

Dr. Moe is currently a Professor of Medicine at the University of Toronto. As an academic cardiologist, he spends most of his time in conducting research and the remaining time in treating patients and teaching. Dr. Moe is also the Director of the Heart Failure Program at St. Michael's Hospital. He attends a very busy Heart Failure Clinic in the hospital. This multidisciplinary clinic has evolved to be a very progressive management program that has benefited a great number of patients with heart failure.

Since he took over the presidency of the Chinese Canadian Council of the Heart and Stroke Foundation, he has helped the Foundation raise over three million dollars of funds for research and health promotion. The signature annual fund raising event, Sing-For-Your-Heart, is well known to the Chinese community as well as the main stream. Besides fund raising, health promotion is a very important mission that Dr. Moe has guided the Council in. Activities include the annual Chinese Health information Symposium on heart disease and stroke as well as the popular Heartbeat News published three times each year.

Dr. Moe was born in Toronto, Canada, but he grew up in Hong Kong,

and later received his medical education in Canada. Both his parents and his brother are doctors. With this kind of background and influence, Gordon understands the different needs of the two different societies. Through his volunteer experience with the Heart and Stroke Foundation, he is able to develop more research and health promotion among the minority groups.

Dr. Moe says, 'There are not too many Chinese-speaking cardiologists in Toronto, and health promotion has mostly involved the mainstream society, neglecting the needs of the minority groups. I feel that it is important to raise the level of awareness for stroke prevention and cardiovascular health within the Chinese communities.' Dr. Moe commits to serve his community all his life, and he feels the most effective method is to remind everyone to exercise more and to eat the right things. In other words, follow a healthy diet, keep an active life style, control risk factors such as high blood pressure and cholesterol levels, keep a healthy weight, do not smoke, and manage stress. His academic pursuits take him to different places in the world providing an opportunity to explore the world. He and his wife like to travel to China where he witnesses that with the increasing affluence of the Chinese in the mainland, obesity including childhood obesity has become a major problem. At present, raising the awareness of childhood obesity is an urgent mission for the Foundation.

A lot of the work that Dr. Moe does, particularly at the Heart and

Stroke Foundation, is as a volunteer. "I do not think of financial return when I try to raise funds for research and promote health. When the Chinese community becomes more aware of health issues and my patients get better, this will be my biggest achievement," says Dr. Moe.