Tsan Yuk Hospital: a century of dedicated obstetrical service

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For over a century, Tsan Yuk Hospital (TYH) has embodied excellence in clinical service, training, and research. It is synonymous with maternity care for many in Hong Kong. Its mission is best summarised by its Chinese name 贊育 醫院, meaning to support and nurture newborns, and its slogan 好生之謂德 保赤以為懷 (outside the old TYH), which refers to safeguarding precious new lives.

Foundation

Prior to the establishment of TYH in 1922, many local women gave birth at home, with minimal support from untrained grannies. Safety and hygiene were great concerns. Pregnancies and deliveries were associated with significant morbidities and mortalities.

With the foresight of Dr Alice Hickling (Hong Kong's first female doctor) and generous support from Dr Seen-Wan Tso (chairman of the Chinese Public Dispensary), the government, and various charitable organisations, TYH opened on 17 October 1922 (Figure 1). It aimed to provide much-needed maternity services and train local girls to be midwives¹⁻⁷.

The original TYH was situated at the junction of Western Street and Third Street, on the slope between Queen's Road West and Bonham Road (Figures 2-4). The building consisted of four storeys and a basement, with 30 beds donated by Tung Wah Hospital. In its first year of operation, there were 436 admissions.

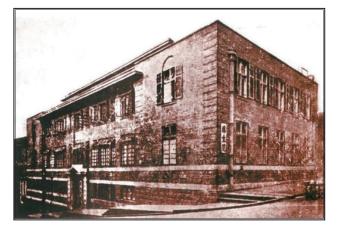


Figure 1. The old Tsan Yuk Hospital when it was established in 1922.



Figure 2. The slogan 好生之謂德 保赤以為懷 at the entrance of the old Tsan Yuk Hospital.



Figure 3. The main entrance of the old Tsan Yuk Hospital.

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Figure 4. Pregnant women gathering at the entrance of the old Tsan Yuk Hospital.

Development

Following his appointment as The University of Hong Kong's first professor of obstetrics, Prof Richard Edwin Tottenham performed the first-ever Caesarean section in Hong Kong in June 1925. He recognised TYH's potential as a teaching hospital and subsequently transferred the teaching of both obstetrics and gynaecology there.

According to Prof Daphne Wai-Chan Chun's article published in 1972 to celebrate the hospital's golden jubilee¹, TYH changed from a charitable institution to a government hospital in 1934 and doubled its number of beds to 60. With the addition of neonatologists and anaesthetists, TYH could provide care for both pregnant women and newborns. This progress could not have been accomplished without leadership of the many visionaries.

Dr Doraisamy Kumara Samy and then Prof William Charles Wallace Nixon succeeded Prof Tottenham as Heads of Obstetrics and Gynaecology at The University of Hong Kong. In 1938, Prof Gordon King took up the headship and led the Department for the next 18 years, during which the demand for maternity services and training facilities grew exponentially, driven by an influx of refugees from mainland China. Unfortunately, TYH closed in September 1944 during the Japanese occupation, and many of its records were lost. After the war ended in September 1945, the hospital resumed its services.

TYH always experienced bed shortages, as the number of admissions grew to 1000 within 5 years. Even after gynaecological services were moved to Queen Mary Hospital in 1937 and TYH was entirely devoted to obstetric patients, the number of annual admissions soared after the war, peaking at 7000. With a pressing need for more beds and more trainings for midwives and obstetricians, a new TYH building was commissioned at 30 Hospital Road and opened on 13 June 1955 (Figure 5), thanks to Prof King's efforts and the Hong Kong Jockey Club's generosity.

The seven-storey building housed 200 beds. It had accommodations for medical officers, midwives, and medical students. The antenatal clinic was on the ground floor, where it remains to this day. Obstetric wards, for both antenatal and postnatal patients, were located over four floors, each with its own delivery suite. The wards were named after famous obstetricians such as the Barnes ward (for first-stage labour) on the first floor and the Smellie ward in the west wing of the first floor (Figures 6 and 7).

The number of annual admissions continued to increase and reached 10 865 in 1957. Therefore, in 1958, admissions were strictly limited to higher-risk patients including primigravidae, grand multiparae, and patients



Figure 5. The new Tsan Yuk Hospital opened in June 1955.



Figure 6. The setting of a labour ward.

with medical or obstetrical complications. The labour ward was centralised over six rooms on the first floor, and the adjacent ward was converted to a first-stage labour ward. The second floor was renovated into three postnatal wards, and the third floor was used to prepare for Caesarean sections (Figure 8). The fourth floor was converted into a nursery for low-birthweight babies and a neonatal intensive care unit (Figure 9).

In 1957, Prof Daphne Wai-Chan Chun was appointed Head of the Department of Obstetrics and

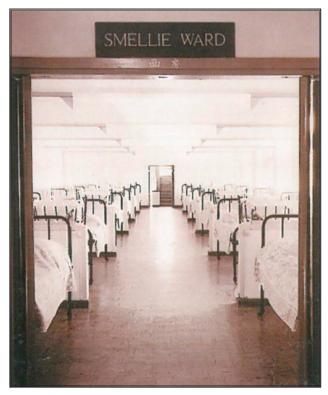


Figure 7. The Smellie ward, named after Scottish obstetrician Dr William Smellie.



Figure 8. The setting of an operating theatre.



Figure 9. The setting of a nursery unit with incubators.

Gynaecology. She pioneered a system of obstetric audit at TYH. Under her leadership, despite the soaring number of deliveries, the low maternal and perinatal mortality rates gained international recognition⁸⁻¹⁰. Additionally, the number of midwives trained increased substantially; graduated midwives could safely handle births at homes and in private maternity centres in Hong Kong. In 1956, the postgraduate training at TYH was formally accredited by the Royal College of Obstetricians and Gynaecologists.

Throughout the 1960s, TYH served as a backup for a number of maternity homes in both the public and private sectors. Its 'Flying Squad' (comprising medical doctors, housemen, and medical students) was dispatched to maternity centres to help labouring women with complications. In addition, Dr Kin-Hung Lee pioneered intrapartum foetal monitoring, which was a cutting-edge procedure in those days.

Transformation

In 1972, Prof Ho-Kei Ma took the headship of the Department of Obstetrics and Gynaecology. She identified the need to improve the diagnosis of congenital anomalies and genetic counselling for fetal chromosomal and structural anomalies. To this end, Prof Ma supported Dr Vivian Wong in training in ultrasonography with Prof John Hobbins at Yale University, and supported Dr Joseph Woo in training in obstetric ultrasound and cytogenetics in Glasgow. With a donation from Mrs Wu Chung, the prenatal diagnostic laboratory commenced service in March 1981 (Figure 10). It was the first public laboratory in Hong Kong to perform prenatal cytogenetic analysis.

In collaboration with Prof Vivian Chan from The University of Hong Kong's Department of Medicine and



Figure 10. Opening ceremony of the Mrs Wu Chung Prenatal Diagnostic Laboratory in 1981.

Prof Yuet-Wai Kan from the University of California, San Francisco, TYH (led by Dr Arabinda Ghosh) steered the genetic diagnosis of thalassemia, haemophilia, muscular dystrophies, and spinal muscular atrophy. TYH became a pioneer in obstetric research and prenatal diagnosis services and provided a strong foundation for training subspecialists in maternal-fetal medicine in Hong Kong.

TYH was reorganised for more efficient utilisation. In the years when TYH was still offering a full maternity service, the ground floor housed the outpatient clinic and university departmental office. The first floor housed the first-stage labour ward (Barnes Ward), the labour ward, and an operating theatre. The prenatal diagnosis laboratory and clinic were on the second floor and in the north wing of the fourth floor, whereas the antenatal ward (Ballantyne Ward) and postnatal ward (Simpson Ward) were on the third floor. The neonatal unit and a semi-private ward were located on the fourth floor.

The present day

TYH has adapted to the ever-changing needs of our society. It has transformed into a comprehensive



Figure 11. Drawing to commemorate Tsan Yuk Hospital's centenary.

ambulatory centre, incorporating services in family medicine, psychiatry, and physiotherapy, in addition to offering state-of-the-art prenatal and genetic diagnosis research and services.

The last delivery on 3 November 2001 marked the end of TYH as a standalone maternity hospital. Since then, the obstetric and newborn inpatient services have moved to Queen Mary Hospital. However, the antenatal booking clinic and the prenatal diagnostic clinic remain. The prenatal diagnostic laboratory has expanded the genetic and genomic development into chromosome microarray, whole exome sequencing, and whole genome sequencing. As a subspeciality training centre accredited by the Royal College of Obstetricians and Gynaecologists since 2000 and the Hong Kong College of Obstetricians and Gynaecologists since 2008, TYH has nurtured many renowned obstetricians and maternal-fetal medicine subspecialists for Hong Kong.

Celebration

Year 2022 marked TYH's centenary (Figure 11), an occasion commemorated by Hong Kong's obstetric and gynaecological community, with the slogan 贊譽百載 育護未來. A centennial album and song entitled 愛、生 命、同行 Love, Life, Keep Going was produced by staff members of the obstetric team¹¹. It represents how TYH safeguards the wellbeing mothers and babies through the 40-week journey from conception to birth, as it has for the past 100 years. TYH will continue to cherish new lives and be a beacon of excellence in the development of obstetrics and gynaecology in Hong Kong and worldwide.

Happy 100 years young to TYH!

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