It is indeed my pleasure and honour to write a guest editorial for the second issue of the facelifted bulletin in 1998. Looking back to five years ago when the bulletin was born, its format was not attractive at all. However, I must really thank those who had made the effort to formulate and write the first volume of the bulletin published in 1993. Of course, wide circulation of the bulletin was not expected with the limited financial and human resources in those days. I must thank all those who had read the bulletin in detail when the presentation was primitive and simple, though the content was informative. The bulletin was read thoroughly by the trainees in Social Hygiene Service who needed to work hard to pass the annual assessment examination of Social Hygiene Service since 1994.

After five years, these previous trainees are still with us, but now they are key trainers shouldering the important task of training a new batch of trainees. The hard old days of burning the mid-night oil for the written annual assessment in Social Hygiene Service has been replaced by the formal assessment formulated by the Hong Kong College of Physicians. However, the bulletin is still an important reference for trainees taking part in the annual assessment in our specialty. It also highlights important information from the local and international dermatology and venereology scientific meetings, and this is especially useful for those colleagues who are too busy to attend all of them. Hence the target readers in 1998 will be very different from those in 1993. Not only the trainees will like to read the bulletin, but those colleagues who have an interest in dermatology and venereology will read it as well. Furthermore, with the inclusion of professionally printed colour photographs, well organised and proof-read format, the bulletin will surely make a successful breakthrough in its development.

The only problem that faced me before has posed the same difficulties to Dr. Chong now: there may be a lack of contribution from colleagues in the private sector. Colleagues in private sector are an important asset to our specialty. In the previous editorial, Dr. Chong had expressed that he would like to see more involvement and contribution from the colleagues of the private sector to the bulletin. Undoubtedly Dr. Chong has steered the bulletin in the right direction, though there may still be a long way to go before we will succeed to produce the first dermatology and venereology journal of our own. As we have started late as compared with many other specialties, extra effort would be needed in order to achieve our goal. The continual joint effort of all sectors, private, academic and public, is the only solution and hope that dermatology and venereology would prosper and thrive amongst the many other competing specialties.

Dr. K.K. Lo