

LC Urgent Q3: Immediate measures to prevent measles epidemic from spreading

Following is an urgent question by the Dr Hon Priscilla Leung under Rule 24(4) of the Rules of Procedure and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (March 27):

Question:

There is a recent outbreak of measles epidemic in Hong Kong. It has been reported that this year up to the present, 26 confirmed cases of measles infection have been recorded and the infected persons in nine of those cases are personnel working at the airport and for airline companies. In this connection, will the Government inform this Council:

(1) of the immediate measures adopted by the Government to increase the supply of measles vaccines, so as to provide measles vaccination for all persons having a higher risk of contracting the disease (including the personnel working at the airport and for airline companies, as well as healthcare workers); and

(2) whether it will immediately request airline companies to regularly notify the Centre for Health Protection of the cases of their staff members contracting measles, so as to minimise the risk of the epidemic spreading?

Reply:

President,

In my previous replies to the questions raised by the Dr Hon Elizabeth Quat and the Dr Hon Helena Wong, I have illustrated the immediate measures taken by the Centre for Health Protection (CHP) to cope with the cases of measles infection at the Hong Kong International Airport, and the arrangements of measles vaccination and the latest supply of measles vaccines in Hong Kong. I will now supplement the latest developments.

(1) Since a confirmed infection case emerged at the airport on March 22, the CHP has attached great importance to the infection control measures at the airport, particularly the measles vaccination for people working at the airport who are non-immune to measles. The CHP has all along been maintaining close liaison with the Airport Authority in order to improve the operation and arrangements of the measles vaccination stations at the airport to facilitate those who need to receive vaccination.

Since last Friday, the CHP has provided measles vaccination to over 1 650 people working at the airport. Starting from March 26, the CHP has deployed extra manpower and provided an additional time slot. It is expected that the daily service capacity would increase from 700 to 1 300

vaccinations. Besides, the private clinic at the airport will also provide vaccination to staff working at the airport shortly. The CHP will closely monitor and review the situation of measles vaccination for people working at the airport. The CHP will also continue to closely liaise with the Airport Authority to explore ways to further enhance the vaccination arrangements.

Besides, in view of the recent surge in measles cases, the Central Committee on Infectious Disease and Emergency Responses of the Hospital Authority (HA) convened early this week an ad hoc meeting, which was joined by representatives from the CHP, to discuss the risk assessment and preparedness of public hospitals. The meeting agreed that measures need to be implemented for early diagnosis and isolation of possible measles cases and to provide vaccinations to staff in need, including those who have never been vaccinated or those with inadequate immunity, to reduce the risk of nosocomial infections. Earlier the HA issued notifications, as well as updated information on measles, to remind frontline healthcare staff to be vigilant towards patients with symptoms of measles. Suspected cases will need to be reported and treated under isolation, with specimens sent to the CHP for testing.

Measles vaccination programme of the healthcare staff of the HA will commence next week. Vaccinations will be provided to staff working in high risk departments, such as paediatric, obstetrics and gynaecology, haematology, clinical oncology, intensive care units and isolation wards in the first phase.

The DH will maintain close liaison with two vaccines suppliers to strive for a steady supply to the children under the routine Hong Kong Childhood Immunisation Programme, people working at the airport, healthcare staff at the HA who have higher priority for measles vaccination.

(2) In view of the recent cases of measles infection at the Hong Kong International Airport, the CHP has immediately liaised with relevant airline company and confirmed that it has the established guidelines which stipulate sick staff should not go to work. The CHP has requested the relevant airline company to reinforce the education of relevant guidelines among staff to protect public health. According to the Prevention and Control of Disease Ordinance (Cap 599), measles is one of the 50 statutorily notifiable infectious diseases in Hong Kong. All registered medical practitioners are required to notify the CHP of all suspected or confirmed cases of these diseases for the purpose of disease control.

Lastly, I wish to appeal here that members of the public who are planning to travel to places with high incidence or outbreaks of measles should review their vaccination history and past medical history, especially people born outside Hong Kong who might not have received measles vaccination during childhood. Those who have not received two doses of measles-containing vaccines, with unknown vaccination history or with unknown immunity against measles are urged to consult their doctor for advice on vaccination at least two weeks before departure. Pregnant women and women preparing for pregnancy who are not immune to measles as well as children aged below one who are not due for the first dose of the Measles, Mumps and Rubella combined vaccine

under the Hong Kong Childhood Immunisation Programme are advised not to travel to places with outbreaks of measles.

The incubation period of measles ranges from seven days to up to 21 days. Contacts who are not immune to measles may develop relevant symptoms, such as fever, skin rash, cough, runny nose and red eyes, in the incubation period. They should observe if they develop such symptoms in the period. If symptoms arise, they should wear surgical masks, stop going to work or school and avoid going to crowded places. They should avoid contact with non-immune persons, especially persons with weakened immunity, pregnant women and children aged below one. They should also report their symptoms and prior travel history to the healthcare staff so that appropriate infection control measures can be implemented at the healthcare facilities to prevent any potential spread.

LC Urgent Q2: Immediately providing measles vaccination for persons with weaker immunity

Following is an urgent question by the Dr Hon Helena Wong under Rule 24(4) of the Rules of Procedure and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (March 27):

Question:

It has been reported that there is a recent outbreak of measles epidemic: this year up to the present, more than 20 confirmed cases of measles infection have been recorded, while the figure for the whole of last year was only 15. Persons such as young children below Primary One, those members of the public born between 1967 and 1985 in Hong Kong as well as new arrivals may have weaker immunity to measles as most of them have never received any measles vaccination or have received just one dose of such vaccination. As such, will the Government inform this Council whether it will immediately provide measles vaccination for such persons so as to reduce their chances of being infected with measles, thereby preventing the spread of the epidemic; if so, whether the existing measles vaccine stock is sufficient for providing such vaccination; if it is insufficient, of the solution for that?

Reply:

President,

I have briefly explained the background information concerning measles and the preventive and control measures in my previous reply to the Dr Hon

Elizabeth Quat.

First, I have to reiterate that the overall coverage rate of measles vaccination has been maintained at very high level in Hong Kong. There has been no outbreak in the community in recent years. The majority of people who were born on or after 1985 and studied in primary schools in Hong Kong have received two doses of measles-containing vaccines under the Hong Kong Childhood Immunisation Programme (HKCIP); therefore, the immunity to measles in the local population is very high.

Taken into consideration the target groups of the measles vaccination programme over the years, the current immunity of the local population, the supply of vaccines and the situation of measles infection at the airport, etc., we consider at this stage that there are three priority groups for measles vaccination, which are:

- (a) children under the routine HKCIP; and
- (b) staff of the airport who were either non-local born or born in Hong Kong from 1967 to 1984, and have not received two doses of measles vaccination; and have not been infected with measles before; and
- (c) healthcare staff of the Hospital Authority.

The currently available measles-containing vaccine in Hong Kong include combined Measles, Mumps and Rubella (MMR) vaccines and combined Measles, Mumps, Rubella and Varicella (MMRV) vaccines. Under the HKCIP, children in Hong Kong are given the first dose of MMR vaccine when they are one year old at Maternal and Child Health Centres (MCHCs) of the Department of Health (DH), followed by a second dose of MMR vaccine (Note 1) at Primary One by the School Immunisation Teams of the DH through outreach visits to schools. The DH has all along encouraged local children to receive measles vaccination under the HKCIP to ensure personal and community health.

The Scientific Committee on Vaccine Preventable Diseases (SCVPD) of the Centre for Health Protection (CHP) closely monitors the latest recommendations on the uses of vaccines made by the World Health Organization (WHO), and provides latest advice to the CHP for consideration. The WHO had published the position paper on measles vaccines in April 2017 with the following two recommendations:

- (a) in countries with low risk of measles transmission, the first dose of measles-containing vaccine (MCV1) may be administered at the age of 12 months, and the second dose of measles-containing vaccine (MCV2) be given at the age of 15 to 18 months or at the time of school entry; and
- (b) if the coverage of MCV1 is high (>90 per cent) and school enrolment is high (>95 per cent), MCV2 can be given at school entry to prevent outbreaks in schools.

In view of the latest recommendations by the WHO, the SCVPD further reviewed in 2018 the local and global epidemiology of measles, overseas experience and relevant scientific evidence, and made new recommendations on measles-containing vaccination for children.

The SCVDP noted that the practices on administration of MCV2 in overseas countries are diverse (Note 2) and there is no standard timing on MCV2, and Hong Kong is an area with low risk of endemic transmission, with a high coverage of MCV1. As measles outbreaks have been reported in various regions of the world (including some countries in Europe and Southeast Asia) in recent years, the SCVDP considered that those aged between one year and Primary One who received only one dose of MMR vaccine would have a higher risk of measles infection if they travel to places with high incidence or outbreak of measles.

After reviewing the latest epidemiological situation, the SCVDP recommended the second dose of MMRV vaccine to be advanced from Primary One to 18 months. The DH's MCHCs have already started planning, including arrangement of the tender process for vaccine procurement and other relevant logistics and manpower issues. It is estimated that the MCHCs will provide the second dose of MMRV vaccine to children aged 18 months from the first half of 2020.

In view of the measles outbreaks in many parts of the world in recent months, and the increasing trend in cases of measles among adults, the SCVDP will hold a meeting in early April to discuss the recommendations on measles-containing vaccination for non-immune adults. The CHP will take note of the recommendations of the SCVDP. Details will be announced in due course.

Regarding the vaccine supply, the DH has all along maintained close liaison with the two vaccines suppliers of measles-containing vaccines, and has signed contracts with them to ensure sufficient supply of the vaccines for the vaccination services. Regarding the private healthcare market, since measles vaccines are included in routine vaccination programme and the annual vaccination rate is relatively stable, the private market normally does not have a large quantity of measles-containing vaccines in stock. In view of the latest cases of measles infection at the Hong Kong International Airport, we consider that it is of utmost importance to ensure sufficient vaccines for children under the routine HKCIP, people working at the airport, and healthcare staff at the HA who have higher priority for measles vaccination. Meanwhile, the Government noted that there is an upsurge in demand for the two aforesaid vaccines in the private healthcare market. The DH noted that a new batch of measles-containing vaccines from one of the vaccine suppliers will arrive Hong Kong in early April. The Government has already requested the vaccine suppliers to import additional batches of measles-containing vaccines to meet local demands, and is pending for the suppliers' response. The DH continues to maintain close liaison with the vaccine suppliers.

Note 1: Varicella vaccine has been incorporated into the HKCIP and is applicable to children born on or after January 1, 2013. Children will receive MMRV vaccine as a second dose of measles-containing vaccine when they reach Primary One.

Note 2: The United Kingdom, the United States, New Zealand, Japan and Korea, etc. recommend the MCV2 to be given at an elder age (range

from three to seven years old), while Australia and Singapore, etc. recommend the MCV2 to be given at a younger age (15 to 18 months).

Mastermind and member of smuggling syndicate jailed for conspiracy to smuggle

One mastermind and one member of a smuggling syndicate were sentenced to 16 and 18 months' imprisonment at the District Court today (March 27) following conviction yesterday (March 26) for conspiracy to smuggle, in contravention of the Import and Export Ordinance (IEO).

Hong Kong Customs in June 2016 for the first time smashed a suspected carousel-smuggling syndicate that made use of false compartments in trailers of cross-boundary container trucks for two-way smuggling of precious metal and electronics products. During the operation, about 700 kilograms of silver and a large haul of electronic products, including computer central processing units, mobile phones and computer tablets with a total value of about \$6.6 million, were seized.

Customs welcomes the verdict. The sentences have a strong deterrent effect on smuggling activities and the case is significant in the context of Customs enforcement against smuggling syndicates.

Smuggling is a serious offence. Under the IEO, any person found guilty of importing or exporting unmanifested cargo is liable to a maximum fine of \$2 million and imprisonment for seven years.

Members of the public may report any suspected smuggling activities to Customs' 24-hour hotline 2545 6182 or its dedicated crime-reporting email account (crimereport@customs.gov.hk).

Traveller jailed for smuggling dried seahorses (with photos)

A traveller who smuggled dried seahorses was convicted for violating the Protection of Endangered Species of Animals and Plants Ordinance, and was sentenced to imprisonment today (March 27).

A spokesman for the Agriculture, Fisheries and Conservation Department (AFCD) said that the 58-year-old female passenger arrived on August 6, 2018, from Maputo, Mozambique, via South Africa. About 20 kilograms of dried seahorses were found in the passenger's baggage by Customs officers.

Subsequent to follow-up investigations, the AFCD charged the woman with illegal import of specimens of listed species in Appendix II to the Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES). She was convicted on March 11 at the District Court. Today, with six months' imprisonment as the starting point for sentencing, the defendant was sentenced to four months behind bars after a one-third reduction as she pleaded guilty.

Seahorses are listed in Appendix II to the CITES and regulated under the Ordinance in Hong Kong. The penalties under the Ordinance have been amended and drastically increased since May 1 last year. Any person importing, exporting or possessing specimens of endangered species not in accordance with the Ordinance will be liable to a maximum fine of \$10 million and imprisonment for 10 years. The specimens will also be forfeited upon conviction. Members of the public are urged not to break the law.

To enquire about the control of endangered species or to report suspected irregularities, the public can call the AFCD on 1823 or visit the website www.cites.hk.



[Cluster of Influenza A cases in Kwai Chung Hospital](#)

The following is issued on behalf of the Hospital Authority:

The spokesperson of Kwai Chung Hospital made the following announcement

today (March 27):

Three patients (aged 42 to 64) of a male psychiatric acute ward presented with respiratory symptoms since March 25. Appropriate viral tests were arranged for the patients and their test results were positive for Influenza A. The patients concerned are being treated under isolation with stable condition.

Admission to the ward and visiting have been suspended. Infection control measures have already been stepped up according to established guidelines. All other patients in the ward are under close surveillance.

The cases have been reported to the Hospital Authority Head Office and the Centre for Health Protection for necessary follow-up.