CHP closely monitors local situation of COVID-19

The Centre for Health Protection (CHP) of the Department of Health today (December 21) said that it is continuing to closely monitor the local situation of SARS-CoV-2 virus and assess the risk. The recent prevalence of XBB variant in Hong Kong has decreased comparing with the past few weeks, while there is an increased prevalence of BA.2.86 and its descendant lineages. With the weather becoming cool, an increasing trend in activity of respiratory viruses including SARS-CoV-2 virus is expected. The CHP reminds high risk persons to wear a surgical mask when visiting public places, and the public should also wear a surgical mask when taking public transportations or staying at crowded places. The high risk group should receive COVID-19 vaccines and booster dose at appropriate times.

The CHP has been monitoring the local situation of COVID-19 through ways such as sewage surveillance, institutions and schools outbreak report, number of severe/death cases in public hospital, and relevant laboratory figures on human infections etc. The CHP has also been monitoring the development of variants to understand the activity of the virus in Hong Kong and whether emergence of new variant strains would lead to unusual situations. The CHP will announce the latest surveillance data in its weekly ${\tt COVID-19~\&~Flu}$ ${\tt Express}$.

According to the latest surveillance data as of mid-December, although the activity of SARS-CoV-2 virus remained at a relatively low level, sewage surveillance and relevant positive specimens laboratory figures both showed a slight increase from the low level. The genetic characterisation result revealed that the proportion of XBB and its descendant lineages has decreased compared with that in last few weeks, while the proportion of variant BA.2.86 started to increase and the variant JN.1, which was designated by the World Health Organization (WHO) as a Variant of Interest (VOI) lately, also belongs to the descendant lineage of BA.2.86 variant.

Deriving from the sewage surveillance results as of yesterday (December 20), XBB and its descendant lineages still accounts for over 70 per cent, and BA.2.86 and its descendant lineages (including JN.1) accounts for 25 per cent, while JN.1 accounts for 15 per cent among all variants. For human infections, among the specimens from severe/death cases tested by the Public Health Laboratory Services Branch of the CHP, the proportion of specimens identified as XBB and its descendant lineages dropped from nearly 100 per cent in the past to 82 per cent recently, while that of BA.2.86 and its non JN.1 descendant lineages is 12 per cent, and that of JN.1 is 6 per cent.

According to information from the WHO, the earliest JN.1 sample can be traced back to late August this year. Although JN.1 has been transmitted in various places worldwide, there is no evidence that JN.1 poses additional public health risks at the global level as compared with other circulating variants (such as XBB and its descendent lineages) and as such the overall

risk of JN.1 is assessed to be low. Due to its strong growth advantage, the number of infections caused by JN.1 is expected to increase globally, though there have been no reported changes in disease severity to date. On the other hand, XBB vaccine is effective against JN.1.

A spokesman for the CHP said that dominant COVID-19 variant will change from time to time. The latest surveillance data revealed that JN.1 has been spreading in the local community. However, no evidence shows that JN.1 will cause more severe diseases when compared with XBB and its descendant lineages. Recently, the number of reported local severe and fatal COVID-19 cases are about the same as that earlier when approximately all of the cases concerned are XBB. With reference to local data and overseas epidemiological trend, the proportion of JN.1 is expected to increase gradually and possibly replace XBB as the dominant variant in Hong Kong.

The spokesman added that the activity of SARS-CoV-2 virus generally increase in winter. Taking into account the JN.1 has a higher transmissibility, and the chance for families and friends to get together or travel during Christmas, New Year's Eve and New Year holidays, local COVID-19 cases are anticipated to rise and reports on relevant severe cases and deaths will also increase with the increasing community infection.

The CHP reminds high risk groups to receive a COVID-19 booster as soon as possible. Regardless of the number of COVID-19 vaccines doses received previously, they could receive a booster dose to be given at least six months after the last dose or COVID-19 infection (whichever is later). The Government's free COVID-19 vaccination programme currently provides ample time slots to cater to scheduling requirements. High-risk groups should receive vaccination in a timely manner for enhanced personal protection. Furthermore, members of the public who have respiratory symptoms should refrain from work or attending classes at school, and seek medical advice promptly with a view to lowering the risk of transmission.

â€<For the latest information, please visit the latest weekly <u>COVID-19 & Flu Express</u> issued today. As for vaccination, the public may visit the <u>COVID-19 Vaccination Programme website</u>.