

LCQ17: Cross-boundary spread of infectious diseases

Following is a question by the Hon Wu Chi-wai and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (May 30):

Question:

Some members of the public are concerned that with contacts between residents of Hong Kong and the Mainland growing day by day, there is an increasing risk of cross-boundary spread of infectious diseases. In this connection, will the Government inform this Council:

(1) whether it knows the respective numbers of confirmed cases of infection with four types of multi-drug resistant bacteria (i.e. Vancomycin-resistant Enterococcus, Extended-spectrum beta-lactamase producing organisms, Multi-drug resistant Acinetobacter and Methicillin-resistant Staphylococcus aureus) in each of the past five years, with a breakdown by hospital cluster, hospital name and reason for the patients seeking treatment;

(2) whether it knows, among the cases in (1), the respective numbers of those where the routes of transmission were suspected to have involved (i) Mainland residents who sought medical treatment on the Mainland and (ii) Hong Kong residents who had settled on the Mainland and returned to Hong Kong for medical treatment, with a breakdown by hospital name;

(3) of the number of suspected cases of infectious diseases reported to the authorities by operators of cross-boundary conveyances and staff of the various port offices in each of the past five years, with a breakdown by name of the infectious disease, as well as the details of each case; and

(4) of the details concerning the exchange of information among the relevant authorities of Hong Kong, Macao and the Guangdong Province in each of the past five years under the infectious disease notification mechanism, including the name of diseases, number of cases, number of deaths, age group and causative agents; among such information, the respective numbers of cases involving the infectious diseases listed in Schedule 1 to the Prevention and Control of Disease Ordinance (Cap 599) and the infectious diseases caused by infectious agents listed in Schedule 2 to the same Ordinance?

Reply:

President,

(1) The Hospital Authority (HA) normally uses antibiotic resistance rate (i.e. the ratio of organisms showing antibiotic resistance) to indicate the situation of multi-drug resistant organisms (MDROs) in public hospitals. The

antibiotic resistance rates of MDROs in public hospitals in the past five years are listed at Annex 1. The HA does not keep statistical information on the causes of MDRO cases.

(2) The HA does not keep such statistical information.

(3) The Port Health Office of the Centre for Health Protection (CHP) of the Department of Health (DH) has been carrying out health surveillance at all boundary control points, including the Hong Kong International Airport, harbour ports and ground crossings, with the use of infrared thermal imaging systems for body temperature checks on inbound travellers. Passengers entering Hong Kong by cross-boundary transport are required to go through body temperature checking facilities at various boundary control points. Suspected cases of infectious diseases are referred by the CHP to healthcare facilities for follow-up, and among them, suspected cases of severe infectious diseases (e.g. avian influenza or Middle East Respiratory Syndrome) are directly referred by the CHP to public hospitals for follow-up.

The numbers of suspected cases of severe infectious diseases identified by Port Health officers at various boundary control points and referred to public hospitals during the period from 2014 to March 2018 are listed at Annex 2. None of them were confirmed cases.

(4) As early as 2005, the Government of the Hong Kong Special Administrative Region signed a Co-operation Agreement on Response Mechanism for Public Health Emergencies with the then State Ministry of Health and the Secretariat for Social Affairs and Culture of the Macao Special Administrative Region. The three places have enhanced collaboration and exchange in areas such as notification of information in response to major public health emergencies and infectious disease epidemics, co-ordinated effort in emergency response, as well as technical issues, training and scientific research regarding public health emergency response. In addition, DH signed an Agreement of Co-operation on Emergency Public Health Incidents in Hong Kong, Guangdong and Macao with the then Health Department of the Guangdong Province and the Health Bureau of Macao in 2006. The parties have since maintained co-operation in areas including notification of information, surveillance and alert in respect of infectious diseases, so as to enhance the capabilities of the three places in disease prevention and control.

The CHP has maintained close liaison and co-operation with the National Health Commission (formerly known as the National Health and Family Planning Commission), the Health and Family Planning Commission of the Guangdong Province and the Health Bureau of Macao under an established mechanism. The mechanism requires Hong Kong, the Mainland (especially the Guangdong Province) and Macao to notify one another of surveillance data on infectious diseases, emergency public health incidents and responses to major infectious diseases.

The three places exchange surveillance data on infectious diseases on a regular basis, including the statistics on 50 statutory notifiable infectious

diseases under the Prevention and Control of Disease Ordinance (Cap 599) shared with the Mainland and Macao authorities on a monthly basis, details of which are set out at Annex 3. As regards imported cases of infectious diseases from the Mainland and Macao (e.g. food poisoning, Legionnaires' disease, dengue fever and human infection of avian influenza), the CHP gives timely notification to the Mainland and Macao for follow-up investigation and implementation of necessary prevention and control measures, so as to enhance the capabilities of the three places in the prevention and control of infectious diseases. On the part of Hong Kong, follow-up investigation into cases notified by the Mainland and Macao that involve Hong Kong people is carried out by the CHP. In addition, the three places exchange information on major public health incidents and cases of severe infectious diseases, including human infection of avian influenza, Middle East Respiratory Syndrome, yellow fever, plague and Zika virus infection. The CHP also gives relevant information, such as press releases, to the Mainland and Macao in a timely manner to facilitate joint efforts in risk assessment for effective control of infectious diseases.

Hong Kong has maintained a stable and effective co-operation mechanism with the Mainland and Macao over the years, under which information on various infectious diseases can be shared through enquires and notification among the three places by telephone, email or fax. This has been part of the routine work of the CHP in its investigation and surveillance efforts in infectious disease control. There were about 180 to 760 notifications of cases of infectious diseases made with the Mainland and Macao each year between 2013 and 2017. Most of the cases involved were human infection of avian influenza, followed by cases of Legionnaires' disease and Zika virus infection.