LCQ21: Using Chinese medicine to prevent and treat Coronavirus Disease 2019

Following is a question by the Hon Chan Han-pan and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (April 22):

Question:

In 2003, there was an outbreak of the Severe Acute Respiratory Syndrome (SARS) epidemic in Hong Kong. At that time, the Hospital Authority (HA) set up a Chinese Medicine Expert Panel on SARS Exploratory Treatment, whose members comprised local and Mainland experts in Chinese medicine. The Panel gave advice on the use of Chinese medicine in treating SARS patients and formulated protocols of prophylaxis Chinese medicine for use by HA for its frontline staff. Regarding the use of Chinese medicine in preventing and treating the Coronavirus Disease 2019 (COVID-19), will the Government inform this Council:

- (1) whether it will set up a Chinese medicine expert panel on COVID-19 exploratory treatment to study the feasibility of using Chinese medicine and adopting an integrated Western medicine/Chinese medicine approach in preventing and treating the disease; if so, of the details and timetable; if not, the reasons for that;
- (2) whether it will invite Chinese medicine practitioners to join the antiepidemic front line, so as to relieve the work pressure currently borne by healthcare personnel of the public healthcare system; if so, of the details and timetable; if not, the reasons for that; and
- (3) whether it will send Chinese medicine practitioners to the various quarantine facilities to help quarantined persons strengthen their bodies by Chinese medicine treatment under the Chinese medicine approach of "curing the illness while it is still obscure", in the hope that those quarantined persons who have been infected will not develop the disease or, should they develop the disease, their conditions will be mitigated; if so, of the details and timetable; if not, the reasons for that?

Reply:

President,

In consultation with the Department of Health (DH) and the Hospital Authority (HA), my consolidated reply to the three parts of the question is as follows:

The Government raised the response level under the Preparedness and Response Plan for Novel Infectious Disease of Public Health Significance to the Emergency Level on January 25, 2020. A "containment" strategy and a series of specific measures have been adopted by the Hong Kong Special Administrative Region (HKSAR) Government to achieve "early identification, early isolation and early treatment of the infected", with a view to effectively preventing the spreading of the disease in Hong Kong through isolation, quarantine and sanitisation. These measures have been proven effective in curbing local transmission since the outbreak began and Hong Kong, at present, can still continue the "containment" strategy for epidemic control.

As part of the healthcare system in Hong Kong, Chinese medicine (CM), in partnership with other healthcare professions, would jointly participate in the work on the prevention and control of the Coronavirus Disease 2019 (COVID-19). In this regard, the DH has been in liaison with Chinese medicine practitioners (CMPs), CMP associations, the Schools of CM of three local universities and CM clinics operated by non-governmental organisations (NGOs). Over the past three months or so, the DH issued letters to local CMPs on multiple occasions in light of the latest situation to provide the latter with updates on the epidemic, including how suspected cases are defined and to be handled as proposed by the Centre for Health Protection (CHP). To enhance the CMPs' understanding and participation in the disease prevention and control work, the CHP organised forums on COVID-19 on January 16, 2020 and January 20, 2020 and invited CMPs to attend. To further encourage the involvement of CMPs in the prevention and control of COVID-19, the CHP has also published and regularly updated the "Prevention of COVID-19 — Infection Control Measures for Chinese Medicine Clinics (Interim)" for the reference of CMPs.

The HA has been closely monitoring the development of the COVID-19 epidemic. In order to explore ways to involve CMPs in the disease prevention and control work, the HA invited CM experts from the Schools of CM of three local universities to set up a CM expert group in early February. Together with the CM Chiefs of Services of the Chinese Medicine Clinics cum Training and Research Centres (CM Clinics) (known as the Chinese Medicine Centres for Training and Research before March 1, this year), which are operating on a tripartite collaboration model in the 18 districts, they have collected information and literature on COVID-19 published by Mainland experts for multiple rounds of discussion and given advice on CMPs' involvement. The expert group has formulated relevant prevention protocols with the use of CM and provided the same to the CM Clinics for clinical reference. The HA has also encouraged the 18 CM Clinics to provide corresponding services for the public in response to the development of the epidemic, with a view to further leveraging on the strengths of CM in combating the epidemic.

To enhance the role of the CM sector in our anti-epidemic efforts, particularly in relation to prevention and rehabilitation treatment, and to raise the capability of CMPs in areas such as clinical work, disease prevention/control and infection control, the HKSAR Government has included "Novel Coronavirus Epidemic Related Projects" in the Chinese Medicine

Development Fund (CMDF) as a priority area open for application from February 27, 2020 for the sector to undertake related training, research and promotion projects. Through this initiative, we hope to raise the capability of CMPs in the areas of clinical work, prevention and control of epidemic and infectious disease, infection control, etc., facilitate relevant researches, as well as provide resources to the sector to encourage it to promote to the public through different channels correct information on disease prevention using CM. Moreover, the CMDF also launched the "CM Clinic Improvement Funding Scheme" on March 9, 2020 to subsidise the CM sector to improve facilities in CM clinics. Those project relating to enhancement of infection control facilities will be given priority consideration to safeguard the health of staff and patients of CM clinics and to provide quality CM services to the public. Details of these projects are available on the CMDF's website (www.cmdevfund.hk).

We are aware that the CM sector would like to enhance the involvement and role of CMPs in the anti-epidemic work. Since the beginning of the outbreak, the HA has taken an open attitude in combating COVID-19. February, the HA proactively contacted Mainland and local CM experts and set up the expert group to formulate preventive protocols within a short period of time. With full support and facilitation of the Food and Health Bureau and in consultation with the experts, the HA is planning to offer rehabilitation programme in some of the 18 CM Clinics for discharged COVID-19 patients on a trial basis, and is actively discussing the details with stakeholders with a view to launching the programme as soon as possible in April. We hope the sector could encourage relevant CM organisations and CMPs to proactively support and participate in the programme, thereby enabling CMPs to assume a more active role in the treatment phase of our anti-epidemic work. We are pleased to learn that some NGOs have made similar arrangements for providing services for discharged COVID-19 patients. The CM sector is encouraged to join the fight against the disease by drawing from the experience of these NGOs and providing appropriate CM services.

We appreciate that CMPs wish to participate in the front-line treatment of COVID-19 patients. The existing quarantine facilities are mainly used for the quarantine of asymptomatic close contacts of confirmed cases. Persons under quarantine in quarantine centres are under 24-hour medical surveillance by healthcare staff of the DH. Those found with relevant symptoms will be sent to hospital immediately to ensure prompt and proper isolation treatment for prevention of spreading of the virus.

According to the guideline under the Prevention and Control of Disease Ordinance (Cap. 599), all confirmed patients should be sent to public hospitals with infection control and isolation facilities for isolation and provided with treatments according to established clinical procedures. In light of the rapidly changing development of the epidemic, the HA's Task Force on Clinical Management on Infection has formulated treatment plans and relevant hospitals are working closely with the HA on contingency work. Engaging CMPs in in-patient treatment at this stage will require not only detailed discussions and co-ordination among CMPs and Western medical practitioners, but also an understanding of the interactions between CM and

Western medicine and the safety of their integrated use. Given the various existing constraints, treatment plans for isolated patients are still formulated mainly by the task force using Western medicine. Therefore, we are of the view that it is not the right time to change the current treatment plans and arrangements.

We will continue to explore the possibility of enhancing CMPs' involvement in anti-epidemic work in respect of in-patient care and clinical treatment. For example, they can be actively mobilised to provide appropriate services for discharged COVID-19 patients and implement complementary preventive measures so that CM can be better utilised in the control and prevention of diseases. The establishment of the CM Hospital will also significantly enhance the role of CM in in-patient treatments and give full play to the strengths of CM.