

For information
on 28 March 2003

LegCo Panel on Health Services

Atypical Pneumonia Incident

Background

A number of health care workers in the Prince of Wales Hospital (PWH) were found to be infected with severe acute respiratory syndrome on 10 March 2003. The Government has attached paramount importance to the situation. A Steering Group, headed by Dr. E.K. Yeoh, Secretary for Health, Welfare and Food, is now in full operation to provide guidance to, and coordinate, measures taken by various parties to prevent and contain the disease as well as to facilitate the exchange of information. The Director of Health is also leading an expert panel to follow up and conduct thorough investigation into the matter.

Overall strategies

2. The overall strategies of the Government are to: contain the spread of the disease and take more stringent preventive measures; conduct virus tests to identify the cause of the outbreak of infection with a view to working out appropriate treatment protocol and contingency plans; and step up close liaison with the World Health Organization (WHO) and neighbouring regions.

(1) Contain the spread of the disease

The Department of Health (DH) has in place a sophisticated disease surveillance system. Since the outbreak of the disease, DH has been following up every single case and tracing the source of the disease and the contacts made in a bid to identify the origin of the infection as well as those who have come into close contact with the patients. The objective is to reinforce infection control measures and identify the area of potential transmission. Follow-up actions will then be taken to contain the potentially infectious areas.

(2) Step up preventive measures

Since the reports of infections in the PWH, the Hospital Authority

(HA) has coordinated among all hospitals to step up infection control measures and issued guidelines to health care workers on proper preventive measures to be taken when treating patients with respiratory tract infections. HA has also arranged talks on infection control for its staff. Meanwhile, DH has strengthened education and prevention efforts for the benefit of the private medical sector and the community. A series of health talks have been held in various districts to raise public awareness of preventive measures. Meanwhile, government departments have issued various guidelines and conducted publicity campaigns to enhance the public and different sectors' understanding of the disease and the precautionary measures to be taken.

(3) Follow up on virus tests to identify the source and treatment of the disease

Virus tests conducted by the Faculty of Medicine of both the Chinese University of Hong Kong and the Hong Kong University have already identified the possible cause of the disease and the rapid diagnostic test to detect the virus. This has facilitated the development of appropriate treatment protocol. Most of the patients have responded positively to the new treatment protocol and medication and their conditions show signs of improvement.

(4) Contingency measures by hospitals

Contingency measures have been taken by PWH to suspend the operation of its accident and emergency service, outpatient service and other non-emergency services. Health care workers are now pulled together to treat infected patients. HA has also formulated contingency plans on treatment of infected patients and overall service provision in the event of further spread of the disease.

(5) Enhance liaison with WHO and neighbouring regions

The Government has been maintaining close contact with WHO. In fact, experts from WHO have been in Hong Kong to offer advice on the infection cases. A notification system has been set up between Hong Kong and the Mainland, through which we liaise closely and exchange information with the Ministry of Health in Beijing as well as the Guangdong authorities concerned.

Present Situation

3. On 27 March 2003, 370 people were hospitalized with 367 confirmed to be severe acute respiratory syndrome cases. Among the

infected cases, 148 cases involve health care workers or medical students while the rest of the 219 cases include patients, patients' family members and visitors who have come into contact with the patients. By now, 19 patients have been discharged. Apart from 11 patients who received treatment only at a later stage or suffered from other illnesses and died afterwards, most of the other patients are in stable conditions and show improvement after treatment. There are 45 patients under treatment in the intensive care unit.

4. DH has followed up on each case and tried to track down the source of the disease. Thorough investigation has confirmed that an index patient was linked to a hotel in Kowloon. The virus should now have been removed from the hotel after thorough cleansing and disinfection. There are also cases where persons were infected at home, work premises, private clinics, care homes and schools. Most of the infected persons were found to have had close contact with the patients or to be kin of the patients. DH is taking follow up actions on every case.

5. Members of the public are very concerned about preventing the spread of the disease in school. Up to 27 March 2003, 18 infection cases involving students/staff members of schools were reported, of whom 14 were students, at least 9 of them have been confirmed to be relatives of infected health care workers or patients. So far there has been no report of cases involving cross-infection among school children. DH has investigated into the cases, identified the infected persons and arranged to place them under surveillance with a view to minimizing the spread of infection. For the safety of students, the Government has also issued guidelines to schools on how to prevent the spread of the disease.

Latest Developments

6. We have observed an increasing trend of reported cases of severe acute respiratory syndrome. In order to contain the spread, the Government has stepped up coordination work and announced the implementation of the following measures -

(1) To allocate more resources

The Government will seek the approval of the Legislative Council's Finance Committee for an allocation of \$200 million to strengthen infection control and treatment as well as public health education.

(2) To raise the awareness of the public on disease prevention

Bureaux and departments have been driving home the same

messages. They will enhance public awareness through Announcement of Public Interest on television and radio, leaflets, posters and health talks. Government departments with extensive interface with the public and private sector have issued special guidelines, and kept in touch with the related sectors to ensure that appropriate precautionary measures are taken. We have also issued guidelines to, among others, schools, public transport operators, social service centres, catering operators, entertainment establishments and housing estates. All government departments have issued internal guidelines to alert their staff of the problem and require them to take necessary preventive measures against the disease. The Government will launch a territory-wide cleansing and disinfection campaign this weekend. In addition to cleaning public places and government properties, members of the public and different sectors of the community are encouraged to clean their environment so as to prevent the spread of the disease by improving environmental hygiene.

(3) To strengthen disease surveillance system

On 27 March 2003, the Director of Health made the Quarantine and Prevention of Disease Ordinance (Amendment of First Schedule) Order 2003 and the Prevention of the Spread of Infectious Diseases Regulations (Amendment of Form) Order 2003 to include “Severe Acute Respiratory Syndrome” as one of the notifiable infectious diseases for which medical practitioners are required to report to the Director of Health all suspected cases. Such measure would enable DH to better monitor cases of severe acute respiratory syndrome, thereby containing the spread of the disease.

(4) To cut off the route of disease transimission

The Director of Health will use her powers under the Quarantine and Prevention of Disease Ordinance (Cap. 141) to require people who have come into close contact with those suffering from atypical pneumonia to attend medical assessment at a designated clinic on a daily basis for 10 days. If they have developed symptoms of the disease, they will be admitted to hospital for treatment. They should stay at home as far as possible and should not go out unless absolutely necessary. DH will contact these persons directly to inform them about the detailed arrangements as well as stop them from going to work and schools.

People who have social contact with infected persons, especially

those who have visited Ward 8A of the Prince of Wales Hospital and the 9th floor of the Metropole Hotel, are asked to contact DH directly. DH will provide them with the relevant information and a hotline number for consultation.

(5) Contingency measures in hospitals

HA will designate the Princess Margaret Hospital as the primary receiving hospital for new severe acute respiratory syndrome cases to better co-ordinate infection control and prevent inter-hospital transmission. To prevent the disease from spreading to the community through members of the public visiting hospitals, HA has stopped people from visiting their relatives or friends who are infected with severe acute respiratory syndrome. Telephone services will be provided in the wards to allow infected patients to communicate with their relatives and friends.

(6) Declaration of health status at entry points

We will institute quarantine declaration measures to avoid the import of virus from abroad. We plan to require all persons arriving at Hong Kong to fill out a health declaration form. DH staff will be stationed at all control points to handle people who have symptoms of atypical pneumonia. In addition, DH will issue guidelines to airline operators requesting them to pay attention to the health status of persons departing Hong Kong and not to allow travelers with signs of atypical pneumonia to board the planes.

(7) To suspend classes

In response to parents' concerns, the Education and Manpower Bureau (EMB) will, with effect from March 29, suspend classes in all secondary schools, primary schools, kindergartens, special schools and day classes of the Vocational Training Council until April 6. Taking into account the development of the disease, EMB will review the situation during this period to decide if the suspension should be extended. During the suspension period, school campuses will remain open and maintain certain degree of operation. Schools should arrange their teaching staff to be on duty to take care of those students who are without a caretaker at home. Learning materials should also be arranged so that students could make better use of this period.

(8) To strengthen the communication and cooperation mechanism with the Ministry of Health in the Mainland

Given the frequent contacts between people in Hong Kong and in

the Mainland, it is necessary for us to strengthen our cooperative work with the Central Government and the Guangdong Province in the area of information exchange and sharing in order to combat atypical pneumonia and other contagious diseases more effectively. In light of the atypical pneumonia incident, the Central Government has already agreed that a mechanism be quickly set up between Hong Kong and the Mainland, with the involvement of Guangdong, to strengthen the flow of information about the trend of communicable diseases, clinical treatment, experience of quarantine control and the study of causes of diseases.

7. Members are invited to note the contents of the paper.

Health, Welfare and Food Bureau
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