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URGENT

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Clerk to
Subcommittee to monitor the implementation of
the recommendations of the SARS Expert Committee and
the Hospital Authority Review Panel
on the SARS Outbreak
Panel on Health Services
Legislative Council Building
8 Jackson Road
Central, Hong Kong
Attn.: Ms Amy Lee

Dear Ms Lee,

Re: Panel on Health Services
Subcommittee to monitor the implementation of
the recommendations of the SARS Expert Committee and
the Hospital Authority Review Panel on the SARS Outbreak

I refer to your letter of December 2, 2003 inviting our views on the recommendations of the SARS Expert Committee and the Hospital Authority Review Panel on the SARS Outbreak.

I understand the focus of the Subcommittee is on the implementation of the recommendations made, so in giving our comments below, we consider it important to look forward and to do things right, right from the start of the implementation in order to capitalize on the lessons learned from the painful experience of the SARS outbreak in 2003. In this perspective I would like to pinpoint the following two issues:

Lack of a strong research foundation for the proposed Centre for Health Protection

One of the main recommendations of the SARS Expert Committee is for the Government to establish a Centre for Health Protection (CHP), which would have the responsibility, authority and accountability for the prevention and control of communicable diseases. We agree that this is the way forward for Hong Kong, for the CHP will be a new public health infrastructure for consolidating existing diseases control strategies and addressing new challenges. The Report of the SARS Expert Committee rightly pointed out that the SARS epidemic had exposed many weaknesses in the current system, including shortcomings in surveillance and information systems, problems with organizational coordination related to the current structure of the health system, and deficiencies in manpower and specialist expertise in field epidemiology and infectious disease control. However, we consider that the proposed CHP has missed *the* point, that is, for any such set-up to fill the gap in the existing healthcare system in the control and prevention of infectious diseases, it must be **research-based**.

We do support the proposed communicable diseases functions of the CHP as set out in the Report, which include, inter alia, surveillance, development and review of contingency plans, partnerships with local and international stakeholders, etc. However, without a strong foundation, emphasis and focus in research, the CHP may eventually become just another Government department in the bureaucracy, without a clear demarcation of any expertise and functions from the Department of Health.

The ability to handle disease outbreaks with strong research and a multi-disciplinary approach should be the core characteristic of the proposed CHP. It is beyond imagination how much worse off Hong Kong would have become if microbiologists in this University had not succeeded in identifying Coronavirus as the causal agent of SARS. This was achieved only within a few weeks of the SARS outbreak. The ensuing infection control measures, rapid diagnostics tests, treatment and therapeutics, research in vaccine development, etc would not have been possible without this world-renowned research achievement. They succeeded, HKU succeeded and Hong Kong succeeded in contributing to contain the SARS epidemic because of the strong research capabilities, both in terms of hardware and software here.

Whenever a new dangerous infection emerges, we face a mystery without any established knowledge; it spreads; people panic out of the common fear of the unknown. Only through research can we accurately identify the infectious agent, carry out sound epidemiologic investigation, design rapid diagnostic tests, develop innovative treatment regimens and novel vaccines, and finally eradicate the disease. A group of world-class research experts in the relevant areas, including infectious disease epidemiology, health communication, health information system, clinical medicine, bacteriology, virology, parasitology, mycology and immunology, is therefore required to form an effective team to deal with the outbreaks. This dedicated team of experts must be well prepared during the inter-epidemic period.

Another important dimension is that research experts are required to talk to their counterparts in the relevant international agencies, such as the World Health Organization (WHO) and the Chinese Center for Disease Control and Prevention (China CDC) in Beijing, etc for effective communication, dissemination of information, academic exchange and rapid actions. They therefore serve as national guards against emerging infectious diseases, protecting the health of Hong Kong people through strong global partnerships.

I would like to point out that our Vice-Chancellor has submitted a proposal for the establishment of the **Hong Kong Agency for Infectious Disease Control and Prevention (HKADC)** to the Chief Executive of the HKSAR Government and the Secretary for Health, Welfare and Food in May and June 2003 respectively. The principal objective of the HKADC is to provide the rapid response and surge capacity required to handle any disease outbreak in the region, especially those of threats to Hong Kong. It was proposed that the HKADC should establish its home base at HKU, which has an excellent medical school, state-of-the-art facilities, well developed and integrated research infrastructure, world-class researchers and extensive international collaborative network. However, it would not be a HKU-operated agency, but rather a Government-supported agency based at HKU. With a strong multi-disciplinary research base yet a minimal number of full-time staff, the agency will serve as a commanding unit to assemble rapidly a response team in short notice to control and prevent infectious disease outbreak. The function of the HKADC should fill the gap between the Hospital Authority and the Department of Health. The University has however not yet received a reply from the Government on this proposal.

A comment on the name of the CHP should be mentioned, which was raised even on one occasion from our overseas collaborators. While the emphasis on "health protection" may be broad and appropriate in the context of the Report, it is considered desirable to follow the nomenclature adopted by similar agencies across the world, e.g. CDC of the USA and China CDC. It is important to adopt a name for this important new structure which should be immediately recognizable internationally and regarded to be in the same league.

Fragmentation of funding support for research in infectious diseases

The Report of the SARS Expert Committee has recommended that resources (staff and funding) should be brought together to deal with a future outbreak on a population basis. The Faculty is extremely disappointed that the \$450 million earmarked by the Government for setting up of a Research Fund for the Control of Infectious Diseases (RFCID) to finance research for the control of infectious diseases has turned out to be a funding scheme for disbursement of small project grants. Under the RFCID, the normal cost ceiling for any one project for "Full Grants" is \$800,000, whereas there is a second category of "Mini-Grants" for mini research projects with a limit of \$80,000.

There is no doubt that infectious diseases and emerging infections are a global problem with enormous magnitude. Hong Kong is at a critical moment when our researchers, building on the track record in research in this area, especially SARS, will be able to make an impact in the international arena for the benefit of the people in Hong Kong and around the world. High impact research requires sophisticated, high throughput technologies and talented researchers, and hence, financial resources. However, the RFCID, instead of seizing this valuable opportunity to fund high impact research aiming for international breakthroughs, has become just another funding scheme. We do hold funding schemes such as the RGC CERG in high esteem, but the RFCID should essentially serve a completely different purpose. Its scope and operation should be strategic and focused. It should be injected with the courage to concentrate its funding to only a few big projects with enormous potential for ground-breaking deliverables and based on the investigators' track records. It is a pity that the RFCID in its present format is entirely not fit for purpose.

I hope the Subcommittee would find the above useful and consider our views seriously. Enclosed please also find the comments from the Department of Nursing Studies.

Yours sincerely,



Professor SK Lam
Dean

SKL/FA/

cc Vice-Chancellor
Professor Paul Tam, Acting Pro-Vice-Chancellor
Professor YL Lau, Associate Dean (Research)