

**For information  
10 January 2005**

**Legislative Council Panel on Health Services**

**Government's Influenza Vaccination Program 2004/05 and  
Anti-Viral Drugs Stockpiling**

At the last Panel meeting, Member requested information about the progress of the implementation of the Government's Influenza Vaccination Programme 2004/05, as well as the efforts in stockpiling anti-viral drugs in preparation for Avian Influenza outbreak. This note provides Members with the relevant information.

**Influenza Vaccination Programme**

2. The Government's Influenza Vaccination Programme for 2004-05 commenced in October 2004. The programme was developed in accordance with recommendations of the Scientific Committee on Vaccine Preventable Diseases (SCVPD) established under Centre for Health Protection (CHP) of the Department of Health (DH). It covers three categories of people.

3. The first category includes six groups of people who are at higher risk of morbidity and mortality due to influenza infection:

- Elderly persons living in Residential Care Home for the Elderly (RCHE);
- Long-stay residents of Residential Care Home for the Disabled (RCHD);
- In patients of infirmary, psycho-geriatric, mentally ill and mentally handicapped units/wards, and hospitalized patients with chronic diseases under Hospital Authority (HA);
- Elderly patients over 65 with chronic diseases attending public clinics;
- Paediatric in- and out-patients of HA with chronic diseases or long term aspirin;
- Patients with chronic diseases attending public clinics who are under 65 and are recipients of Comprehensive Social Security Assistance (CSSA).

4. The second category covers health care staff of HA and DH. The purpose is to reduce the risk of transmitting influenza to patients who are at high

risk of complications from influenza.

5. The third category includes poultry workers and staff who may be involved in poultry culling operations. This is to minimise the chance of co-infection of avian and human influenza, in view of the avian influenza situation in neighboring countries.

6. Comparing with last year's vaccination programme, the scope of this year's programme was extended to cover elderly people aged 65 or above with chronic diseases but who may not be on CSSA, and CSSA-recipients aged below 65 who are suffering from chronic diseases.

### *Publicity*

7. DH conducted a press conference and issued press release jointly with HA on 27 September 2004 to promulgate the recommendations by SCVDP and vaccination programme. Besides, the DH promoted the programme by displaying posters at prominent locations at hospitals, clinics, and other DH service points, issuing a Standing Circular to all staff members to inform them of public and private sector arrangements so they could advise clients accordingly, and attending interviews on TV and radio programmes. Furthermore, letters were sent to health care workers, including medical doctors, dentists, pharmacists, nurses and midwives, chiropractors, occupational therapists, optometrists, physiotherapists, radiographers, dietitians, clinical psychologists and health care workers in elderly homes, encouraging them to receive influenza vaccination.

### *Progress*

8. As of 19 December 2004, 159 231 doses of influenza vaccine were given. The breakdown by different target groups is set out at Annex. Vaccination for residents in RCHEs, RCHDs was completed. The provisional coverage rates for these two target groups (88.1% and 88.8% respectively) are similar to those of the previous years.

9. DH and HA will continue with their efforts in implementing the vaccination programme in the remainder of the flu season in order to achieve a high coverage for the target clients.

### **Stockpiling of Anti-viral Drugs**

10. DH and HA currently have a stock of 1.7 million doses of Tamiflu. To ensure sufficient anti-viral drugs for influenza are available during contingency situations, the Government is making reasonable endeavour to

increase the stockpile. In this connection, DH is actively liaising with Government bureaux/departments and private medical practitioners, as well as the relevant drug supplier. DH has also been actively following on developments in connection with the World Health Organization's Influenza Pandemic Preparedness Plan which is being updated.

11. Members are invited to note the above information.

**Health, Welfare and Food Bureau**  
**January 2005**

**Provisional Statistics on Government Influenza Vaccination Programme 2004/05 (as of 19 December 2004)**

<b>Category</b>	<b>Target Groups</b>	<b>Number of influenza vaccines given</b>
<b>I</b>		
(a)	RCHE residents †	53 100‡
(b)	RCHD residents †	8 896
(c)	Long-stay patients of selected HA specialties	2 997
(d)	Non-institutionalized elderly with chronic illnesses*	59 030
(e)	Paediatric in- and out-patients of HA with chronic diseases and long term aspirin	1 073
(f)	Patients <65 years with chronic disease and on CSSA	5 588
<b>II</b>		
(a)	Healthcare workers at DH	4 280
(b)	Healthcare workers at HA	16 684
<b>III</b>		
(a)	Poultry workers	837
(b)	Staff to be included in mass culling	6 746
<b>Total</b>		<b>159 231</b>

† The figures only cover those institutions which have submitted their returns.

‡ The figure also include approximately 22 000 vaccines which were supplied to RCHEs manned with nurses. It is expected that a small amount of vaccines will be returned at the end of the programme.

\* This group includes 2 520 CSSA-receiving elderly people who may not have chronic diseases but were also given vaccination on the basis on clinical assessment.