

**Progress Report on the Motion on “Preventing Cancer”  
moved by Hon LI Kwok-ying,  
as amended by Dr Hon KWOK Ka-ki, Hon CHEUNG Hok-ming,  
Hon Andrew CHENG Kar-foo and Hon CHOY So-yuk,  
at the Legislative Council meeting on 21 November 2007**

**Purpose**

This Report sets out the follow-up actions taken by the Government to follow up the captioned Motion. The Motion passed by the Legislative Council is enclosed at Annex.

**To launch a community-wide cancer screening programme and encourage the public to undergo regular medical check-ups**

2. In deciding whether to introduce a screening programme for a specific disease, the Government needs to consider a number of factors, including the prevalence of the disease in Hong Kong, the accuracy and the safety of the test, the feasibility of launching the screening programme, its acceptance by the public and the effectiveness in reducing mortality rates of the disease. The Cancer Expert Working Group on Cancer Prevention and Screening under the Cancer Coordinating Committee will make detailed assessment and deliberation based on the latest scientific findings and formulate appropriate recommendations.

3. Physical check-ups should have a clear purpose and with a specific outcome. It should also accurately and reliably identify the changes of the body so that early treatment can be provided. At present, the health and medical field does not support regular physical check-ups that have no clear purpose. Besides, screening has certain limitations, as it may give a “false-positive” or a “false-negative” result. If the test result fails to detect a condition despite the fact that it is present (i.e. “false-negative”), this may delay the necessary medical treatment. On the other hand, if the test result gives a wrong indication of the presence of a condition despite the fact that it does not exist (i.e. “false-positive”), this may cause anxiety, and lead to unnecessary investigation and medical intervention.

## **To introduce a vaccination programme for cervical cancer**

4. Before introducing a vaccination programme, we must consider the prevalence of the disease, the efficacy and the safety of the vaccine, the acceptance of vaccine among women and parents, as well as the cost-effectiveness of the programme. As there are still new scientific developments regarding the vaccine for cervical cancer, the Department of Health (DH) will keep track of such developments and the Scientific Committee of the Centre for Health Protection will consider the scientific evidence and make recommendations on the application of the vaccine in local setting. At this stage, there has yet to be plans for implementing a cervical cancer vaccination programme.

## **To strengthen public education about cancers**

5. To reduce the risk of contracting cancer, the DH will make use of a variety of measures to educate the public and encourage them to develop healthy lifestyles. With the successful launching of the “Eatsmart@school.hk Campaign” in primary schools, the DH will formally launch the “Eatsmart@restaurant.hk Campaign” this year to encourage restaurants to provide more healthy dishes for their customers.

6. Smoking is also one of the factors leading to cancer. To reduce the number of smokers and promote a smoke-free culture, the DH has encouraged the public to participate in smoking cessation activities through various channels. In addition, the DH has set up a smoking cessation hotline to provide counselling and referral services. In 2007, the number of people using the cessation hotline has increased by over 40% when compared with that in 2006. The DH has organised talks and workshops on smoking cessation. It also produces Smoking Cessation Information Kits for distribution to doctors, dentists and pharmacists, and encourages them to give advice to smokers on smoking cessation.

## **To expedite the collation of data on cancer and conduct surveys on risk factors**

7. At present, the Hong Kong Cancer Registry (the Cancer Registry) of the Hospital Authority (HA) has shortened the lead-time between the detection and confirmation of a new case and the release of its relevant data from 27 months to 23 months. The Cancer Registry is the first web-based enquiry system in Asia with comprehensive cancer data. The system enables the Government, universities, medical professionals and members of the public to have access to comprehensive cancer data,

which is of great importance to the promotion of research in oncology and serves as useful reference for policy planning. On the other hand, the DH will continue to conduct periodic surveys on behavioural risk factors, in order to facilitate the planning and evaluation of health promotion and cancer prevention.

### **To strengthen collaboration between Chinese and Western medical medicine**

8. To tie in with the development of collaboration between Chinese and Western Medicine in public hospitals, the HA is actively investigating the feasibility and clinical efficacy of joint consultation by Chinese and Western medical practitioners. The HA has also strengthened training, integration of information systems as well as research. Such development will enable more choices for patients.

### **To strengthen the promotion of primary care**

9. Promotion of primary care will help to prevent and reduce the incidence of cancer. Health care professionals will assess the risk factors of individuals and their families, so as to provide suitable preventive check-ups and health care services. This will ultimately improve the lifestyle of individuals and their families and in turn reduce the risk factors and incidence rate of cancer. We will continue to promote the concept of family medicine.

### **To review the policies on drug management and subsidy under the current medical system**

10. At present, hospital maintenance fees and out-patient consultation fees in public hospitals and clinics are highly subsidised and the fees of public medical services in Hong Kong are affordable by the public. No one will be denied adequate medical treatment through the lack of means.

11. The Government also offers medical fee waivers to needy patients. Currently all recipients of Comprehensive Social Security Assistance are already exempted from payment of public medical fees. The HA has made special arrangements to make the medical fee waiver mechanism more accessible to elderly patients. Besides, the Government allocated an additional grant of \$300 million to the Samaritan Fund in 2007 for provision of financial assistance to needy patients to meet expenses on self-financed medical items or new

technologies which are not covered by hospital maintenance fees or outpatient consultation fees in public hospitals or clinics, such as drugs, prosthesis and consumables, as well as home use equipment like wheelchairs and home use ventilators.

**Food and Health Bureau**  
**January 2008**

**Motion on “Preventing cancer”  
moved by Hon LI Kwok-ying  
as amended by Dr Hon KWOK Ka-ki, Hon CHEUNG Hok-ming,  
Hon Andrew CHENG Kar-foo and Hon CHOY So-yuk**

“That, as early diagnosis can reduce the death rates of cancer, yet cancer has become the number one cause of death of Hong Kong people, and they generally know very little about cancer and neglect the importance of improving their life style, taking injections of effective vaccines and undergoing regular screening tests to prevent and detect cancer at an early stage, thus causing delay in treating the disease and affecting the efficacy of treatment, this Council urges the Government to:

- (a) launch a community-wide cancer screening programme for colorectal and breast cancers, etc;
- (b) study the offer of financial incentives, such as medical check-up vouchers and tax concessions, to encourage and help people to undergo regular medical check-ups;
- (c) introduce a vaccination programme for cervical cancer to reduce its incidence rate;
- (d) promote education on different types of cancers, in order to change people’s life style and achieve results in prevention;
- (e) expedite the collation of data on cancer to effectively monitor the development trend of this disease, and research on the cancer-causing risk factors so that the Government, the medical sector and the general public can grasp in a timely manner the relevant information, which may serve as reference in the formulation of policies and enhance public awareness of cancer; and
- (f) allocate more resources to promote the use of Chinese medicine in preventing and fighting cancer and strengthen the co-operation between Chinese and Western medical fields to enhance the efficacy of cancer prevention, as well as to train family doctors and enhance the promotion of family medicine concept, so that the public can know more about cancer and receive diagnosis at an early stage through family doctors in the community, thereby greatly increasing the chance of curing cancer; and

(g) comprehensively review the work in cancer prevention, education, screening and reporting, including reviewing the popularity of the existing Cervical Screening Programme, and in light of the relevant experience, launching a community-wide cancer screening programme for colorectal and breast cancers, etc; promoting education on cancer to reduce cancer-causing factors such as smoking and overweight, and educating people on how to detect early symptoms of cancer, so as to achieve results in prevention and early detection of this disease; and improving the statistical information system on cancer and encouraging the participation of the private medical sector; and

(h) review the policies on drug management and subsidy under the current public medical system, so that people will not be deprived of the chance of receiving timely and proper diagnosis, taking injections of vaccines against cancer, and undergoing medical check-ups, etc, due to the lack of financial means, so as to assist them in preventing cancer.”