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Panel on Health Services

**Background brief prepared by the Legislative Council Secretariat
for the meeting on 11 May 2009**

Prevention and control of human swine influenza infection in Hong Kong

Purpose

This paper gives an account of the discussions by the Panel on Health Services (HS Panel) and the Panel on Food Safety and Environmental Hygiene (FSEH Panel) on prevention and control of human swine influenza infection in Hong Kong.

Background

2. Human cases of a new strain of swine influenza A (H1N1) virus infection have been identified in April 2009 in Mexico, the United States and Canada. According to the World Health Organization (WHO), the swine influenza A (H1N1) viruses characterised in this outbreak had not been previously detected in pigs or humans. Owing to the occurrence of human cases associated with an animal influenza virus, the multiple community outbreaks and mostly healthy young adults affected, WHO considers this events to be international concern and has recommended the enhancement of surveillance activities by all countries.

3. Swine influenza is a respiratory disease of pigs caused by type A influenza virus that regularly causes outbreaks of influenza in pigs. The H1N1 swine influenza viruses are antigenically different from human H1N1 viruses and thus swine influenza viruses do not normally infect humans. However, sporadic human infections with swine influenza had occurred and there have been documented cases of limited human-to-human spread of swine influenza. Person-to-person transmissions have been observed the recent cases occurring in Mexico and the United States. However, it is not known how easily this virus spreads between humans.

4. Two local sporadic cases of human swine influenza were reported in 1999 and 2001. The case in 1999 was a 10-month-old girl who had fever and influenza-like illness. She recovered uneventfully and no secondary level spread was identified. The case in 2001 involved a 4-month-old girl who had bronchiolitis and also made uneventful recovery. Both cases had no known history of exposure to pigs. Since 2001, no further case of swine influenza has been reported in Hong Kong.

5. On 27 April 2009, the Administration gazetted the Prevention and Control of Disease Ordinance (Amendment of Schedule 1) (No. 2) Notice 2009 and the Prevention and Control of Disease (Amendment) Regulation 2009 to include "Swine influenza" as one of the statutorily notifiable disease, for commencement of operation on the same date.

Deliberations of HS Panel and FSEH Panel

6. The HS Panel and FSEH Panel held a joint meeting on 2 May 2009 with the Administration, following the confirmation of the first human swine influenza in Hong Kong at about 8 pm on 1 May 2009 which involved a 25-year-old Mexican man (the index patient). Upon the confirmation of the first human swine influenza case, the Director of Health issued an isolation order on the Metro Park Hotel in Wan Chai, where the index patient had stayed after arriving Hong Kong, for a period of seven days until 8 pm on 8 May 2009 to prevent the spread of the disease to the community. Major views/concerns expressed by members and the Administration's responses are set out in the ensuing paragraphs.

Disease surveillance

7. Hon Fred LI pointed out that the fact that the Administration had failed to detect the index patient upon his arrival in Hong Kong demonstrated that merely measuring the body temperature of passengers arriving in Hong Kong was not enough, as the incubation period of human swine influenza was up to seven days. To better protect the community against human swine influenza infection, the Administration should require all inbound passengers from affected areas, such as Mexico, to undergo medical assessment at the airport and border control points before allowing them to enter Hong Kong.

8. The Administration explained that in addition to body temperature screening, all incoming passengers were required to complete and submit health declaration forms upon arriving at the Hong Kong International Airport. Passengers who indicated in the forms that they came from affected areas and/or had flu-like symptoms, such as coughing or sneezing, would be sent to the medical posts set up at the airport to undergo medical assessment. To enhance the preventive measures against human swine influenza infection, Immigration Department staff at the airport had been instructed to send all Mexican passport holders to undergo medical assessment at the medical posts set up at the airport. If a Mexican visitor was assessed to have no flu-like symptoms, he would be asked to leave his contact address and/or number to enable Department of Health (DH) staff to check on his health condition daily and for a period of seven days. On the other hand, if a Mexican visitor was suspected to have flu-like symptoms, he would be placed under quarantine for seven days.

9. Hon Andrew CHENG considered it more effective if all incoming passengers were required to remain inside the airplane after landing in Hong Kong to facilitate checking by DH staff to see if these passengers had flu-like symptoms, and if so, to take down the names of the passengers sitting three rows in front of and three rows behind the suspected passenger and where they would be staying in

Hong Kong for tracing later on if required.

10. The Administration pointed out that if no passenger displayed or developed any flu-like symptoms, neither measuring body temperature nor dispatching DH staff to check the health conditions of passengers onboard a plane would be useful in screening suspected passengers. Hence, airlines had been advised that their cabin crew should inform the authority concerned of any suspected case, prior to the airplane's landing in Hong Kong.

11. Hon Tommy CHEUNG and Hon Vincent FANG were of the view that the Hong Kong Special Administrative Region Government should require all airline and cross-boundary bus and vessel operators to take the body temperature of their passengers bound for Hong Kong as a condition for allowing their passengers to enter Hong Kong.

12. The Administration advised that to do so would be at variance with WHO's recommendation that imposing travel restrictions would have very little effect on stopping the virus from spreading, but would be highly disruptive to the global community. Moreover, not every place outside Hong Kong considered taking body temperature of all incoming and departing travellers at airport and border control points an effective means to prevent outbreak of communicable disease, as had been practised by Hong Kong since the SARS outbreak in Hong Kong in April 2003. The Administration, however, pointed out that it could not be ruled out that WHO would later recommend affected countries to require all airlines to take the body temperature of their passengers before allowing passengers with no fever to board the plane.

13. Hon Albert HO suggested placing all incoming travellers from Mexico under isolation or quarantine for seven days. Hon Audrey EU was also of the view that Mexican visitors should at least be subject to medical surveillance for seven days upon their arrival at Hong Kong.

14. The Administration explained that under Cap. 599A, only persons whom a health officer had reason to suspect to be infected with a specified infectious disease could be placed under isolation and only persons whom a health officer had reason to believe to have had contact with a person suspected to be infected with a specified infectious disease could be placed under quarantine. The Administration supplemented that the Consul General of Mexico had been informed that Hong Kong would not rule out prohibiting people from Mexico to enter Hong Kong if WHO recommended imposing travel restrictions on Mexico related to the outbreak of the influenza A(H1N1) virus.

Naming of human swine influenza

15. Hon WONG Kwok-hing and Hon James TO asked the Administration whether it would change "Swine influenza" in Schedule 1 to Cap. 599 to "Influenza A (H1N1)" used by WHO when referring to the new virus affecting humans as from 30 April 2009.

16. The Administration replied that it would not consider doing so for the time being, as "Swine influenza" had been widely used by local and overseas media and health authorities to refer to the new virus affecting humans prior to 30 April 2009. Moreover, the term "Influenza A (H1N1)" might still be subject to change later by WHO, as there were differing views among experts on the appropriateness of the term when referring to the new virus affecting humans.

Suspension of classes of schools

17. Some members, including Hon Andrew CHENG, Hon KAM Nai-wai and Dr Hon LEUNG Ka-lau, urged the Administration to suspend classes of schools to prevent the spread of human swine influenza to the community. The Administration advised that the decision on suspending classes of schools would depend on the health risk posed by the human H1N1 virus.

Wearing of face masks by air cabin crew

18. Hon WONG Kwok-hing urged the Administration to require airlines to allow cabin crew to wear face masks while on duty as the crew members saw fit. The Administration responded that it was incumbent upon airlines to safeguard the health of their staff. Nevertheless, the Administration agreed to take the matter up with local airlines to ensure such.

Latest developments

19. The Education Bureau announced in the evening of 2 May 2009 that there was as yet no scientific evidence to justify suspension of classes of schools.

20. Cathay Pacific Airways Limited and Hong Kong Dragon Airlines Limited promulgated on their respective websites that for personal considerations, staff choosing to wear face masks may do so.

21. The arrangements of health declaration by in-coming travellers were made at boundary control points in phases between 30 April and 5 May 2009.

22. Four Mexican travellers, comprising two who have been quarantined in Metro Park Hotel and another two in Princess Margaret Hospital, left the territory for Mexico on a chartered flight early in the morning of 6 May 2009.