



中華人民共和國香港特別行政區政府總部食物及衛生局
Food and Health Bureau, Government Secretariat
The Government of the Hong Kong Special Administrative Region
The People's Republic of China

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30 July 2019

Ms Maisie Lam
Clerk to Panel
Panel on Health Services
Legislative Council Complex
1 Legislative Council Road
Central

Dear Ms Lam,

**Panel on Health Services
Follow-up to the meeting on 15 April 2019**

During the discussion on obstetric services in public hospitals at the meeting of the Legislative Council Panel on Health Services held on 15 April 2019, Members requested that supplementary information be provided. Having consulted the Hospital Authority (“HA”), we provide the relevant information as follows.

(a) *Information on the respective numbers of patients who underwent medical procedure for termination of pregnancy in the approved public hospitals in each of the past three years, with a breakdown by age group (i.e. aged 24 or below and aged 25 or above)*

2. The total numbers of medical abortions carried out in public hospitals in 2015 to 2017 are set out in the table below. HA does not maintain statistics on the breakdown of medical abortions by age.

Year	Number of Medical Abortions*
2015	892
2016	858
2017	732

*Note: The number of medical abortions is calculated based on the number of inpatient discharges and deaths in hospitals by disease group. The number of medical abortions in public hospitals in 2018 is not readily available in HA.

(b) The weekly consultation time slots available at the obstetrics and gynaecology specialist outpatient (clinical) services of Queen Mary Hospital for assessment related to and the performance of the medical procedure for termination of pregnancy

3. Queen Mary Hospital provides one morning session at the Obstetrics and Gynaecology Specialist Outpatient Clinic for assessment related to termination of pregnancy and one afternoon session for surgical termination of pregnancy per week.

(c) The respective numbers of drills on emergency response to post-partum haemorrhage conducted by the obstetric units of Queen Mary Hospital, Queen Elizabeth Hospital and Tuen Mun Hospital since 2017

4. The number of drills on emergency response to post-partum haemorrhage conducted in Queen Mary Hospital, Queen Elizabeth Hospital and Tuen Mun Hospital since 2017 were 7, 13 and 2 respectively.

(d) Whether arrangement would be made for high-risk pregnant women, such as those already had a child with Down syndrome, to receive Non-invasive Prenatal Test (which was planned to be introduced in Hong Kong Children's Hospital within 2019) directly without having to first undergo the relevant first-tier prenatal screening test

5. In HA, all high-risk pregnant women will go through the routine screening arrangement, i.e. to undergo Down Syndrome screening, followed by Non-invasive Prenatal Test.

6. For high-risk pregnant women who have had children with Down syndrome, HA would make arrangements according to the underlying aetiology. For cases with hereditary Down Syndrome with a higher

recurrence risk, most of them would opt for invasive test to confirm the diagnosis without screening tests. On the other hand, if the cause is sporadic, the recurrence risk may not be high in young women under the age of 45 (around 1%). HA's Prenatal Diagnostic Counselling team would explain the limitations of screening tests to the patients to facilitate their decision on whether and what kind of tests should be conducted.

Yours sincerely,



(Clarissa WAN)

for Secretary for Food and Health

c.c. Chief Executive, Hospital Authority
(Attn.: Ms Dorothy Lam)