For Discussion on 9 January 2006

Legislative Council Panel on Health Services

Notification of Infectious Diseases between the Mainland and Hong Kong

Purpose

This paper updates Members on the developments of the notification mechanisms in respect of human and animal/plant infectious diseases between the Mainland and Hong Kong.

Background

2. To protect public health, the Administration has been operating several communication networks with relevant Mainland authorities. In particular, since the outbreak of Severe Acute Respiratory Syndrome (SARS) in 2003, the Department of Health (DH) has put in place a series of notification mechanisms on human infectious diseases with the Mainland Ministry of Health (MoH) and the Health Department of the Guangdong Province (HDGP). Moreover, to ensure food safety and prevent transmissible diseases of plants and animals from spreading across the border, the Administration has set up a notification mechanism with the State General Administration of Quality Supervision, Inspection and Quarantine (AQSIQ) and the Ministry of Agriculture (MoA). These mechanisms have been functioning effectively.

Notification Mechanisms for Human Infectious Diseases

3. The SARS outbreaks in the Mainland and Hong Kong in 2003 called for urgent actions to ensure prompt and timely exchange of important information about infectious disease outbreaks and incidents between the two places. Therefore, since 2003, DH has been maintaining close contact with the MoH, which provides Hong Kong with a monthly summary of information on infectious diseases as well as information on important outbreak situation in other parts of the Mainland. The notification mechanism covers diseases of significant public health concern, for example, the avian influenza in the Hunnan Province and the Anhui Province in the

past two months, cholera cases in the Zhejiang Province in October 2005 and Streptococcus suis infection in the Sichuan Province in July and August 2005, etc.

- 4. Moreover, the Administration has been closely liaising with the MoH to strengthen the above notification system on a continuous basis. These efforts have led to, for example, timely reports on seven confirmed cases of human infection of avian influenza in the Mainland since November 2005, offering relevant epidemiological information. Furthermore, not only has Hong Kong been notified of outbreaks in the Mainland on a timely basis, we have also been involved in the investigations for significant outbreaks. Examples include the following -
 - (a) in July 2005, a Hong Kong expert team was sent to the Sichuan Province to take part in the investigations of Streptococcus suis outbreak. The expert team met and examined the patients with local doctors and gained first-hand knowledge of the outbreak directly;
 - (b) in November 2005, a Hong Kong team participated in a workshop on prevention and control of human avian influenza organized by the Chinese Centre for Disease Control and Prevention;
 - (c) in November 2005, a Hong Kong expert team made a trip to the Hunnan Province and the Anhui Province coordinated by the MoH to learn more about the epidemiological situation and the management of human avian influenza cases in the Mainland. During the visit, exchanges were made with the epidemiologists of Hunnan and Anhui Centres for Disease Control and Prevention as well as relevant hospital physicians; and
 - (d) in November 2005, a consultant from the Centre for Health Protection (CHP) of DH participated as an honourary consultant in a World Health Organization expert team to help establish the diagnosis of pneumonia patients with unknown causes in the Hunnan Province and to update Mainland experts with the latest technical information in relation to diagnosis of influenza A H5N1 and related laboratory activities.
- 5. In addition, the signing of the "Cooperation Agreement on Response Mechanism for Public Health Emergencies" by the MoH, Hong

Kong and Macao in October 2005 represents another important milestone of our cooperation with the MoH on notification and emergency response. Under the Cooperation Agreement, in case of serious public health emergencies in the three places, a mutual co-ordination and support mechanism in terms of manpower, technologies and resources would be in place. Moreover, if cross-boundary public health emergencies occur among the three places or between any two, the concerned places would immediately notify the other parties, activate their respective emergency mechanism and coordinate joint response actions as appropriate.

- 6. Furthermore, in view of Guangdong's proximity to Hong Kong as well as the close economic ties and heavy cross-border traffic between the two places, the Guangdong Province and Hong Kong agreed in April 2003 that it was necessary to institutionalize the SARS notification channels between the two places for direct, regular exchange of latest information, including statistics, clinical treatment and progress of epidemiological research. The arrangement was subsequently extended to cover Macao in May 2003.
- 7. The Tripartite Meeting of the Guangdong-Hong Kong-Macao Expert Group on Prevention and Control of Communicable Diseases was also set up in May 2003 under the above agreement. The Tripartite Meeting has met several times since then and agreed to enhance cooperation in respect of infectious diseases in the following areas
 - (a) exchanging information on notifiable diseases on a monthly basis and infectious diseases of concern as and when necessary (see <u>Annex</u> for lists of notifiable diseases);
 - (b) promptly reporting to each other sudden upsurge of infectious diseases of unknown nature or of public health significance;
 - (c) establishing point-to-point communication amongst health authorities, e.g. HDGP, the Center for Disease Control and Prevention of the Guangdong Province, the CHP of DH and the Health Department of Macao; and
 - (d) arranging visits and short-term exchange programmes to deepen mutual understanding of public health work on infectious diseases.
- 8. Under this mechanism, Hong Kong has been notified promptly of

incidents with public health impacts, for example, occurrences of sporadic cases of meningococcal meningitis and influenza outbreak affecting a group of Hong Kong travelers in the Guangdong Province. Moreover, the Tripartite Meeting has also made significant joint efforts in enhancing infectious disease controls, including the following -

- (a) **Enhanced cooperation in scientific research.** Guangdong, Hong Kong, and Macao have initiated joint research projects on AIDS, influenza and dengue fever. A comparative study on influenza and influenza surveillance systems was carried out yielding valuable information on the epidemiology of influenza in the Pearl River Delta Region.
- (b) Regular mutual visits and short-term training programmes of healthcare professionals. During 2004 and 2005, more than 20 training programmes on epidemiological investigation, laboratory work, disease prevention, project and media management as well as emergency response were arranged.
- (c) Strengthen contingency planning of infectious diseases. In view of the global threat posed by avian influenza and influenza pandemic, public health experts of the three places have been meeting and working closely to strengthen cooperation on surveillance as well as maintaining alertness and responsiveness against the disease, with a view to minimizing the possible impacts of influenza pandemic on the three places.
- 9. The above notification mechanisms are also supplemented by our comprehensive surveillance system which aims to detect infectious disease outbreaks and incidents with public health significance occurring both locally and in other places. In particular, CHP regularly surveys media reports of cases of infection occurring in the Mainland and overseas, and seeks verification and details from the MoH, relevant health authorities, and the World Health Organization as appropriate. In cases of such incidents, risk assessment will be performed in regard of the risk to Hong Kong so as to formulate appropriate responses.

Notifications for Transmissible Diseases of Plants and Animals

10. On food safety and transmissible diseases of plants and animals, the Administration has also set up a notification mechanism with the AQSIQ

and the MoA. Under the mechanism, the authorities concerned will inform their counterparts in case of outbreaks of plant/animal diseases or major food safety incidents.

- 11. With regard to outbreaks of animal/plant diseases, the Health, Welfare and Food Bureau (HWFB) has set up an exchange mechanism since mid-2005 to facilitate communication on major outbreaks of animal/plant diseases across the border. The mechanism also covers exchanges and collaboration between veterinary laboratories across the border, quality management of agricultural products, management of invasion of alien species as well as exchanges and liaison on the development and management of fisheries industry of both Hong Kong and the Mainland.
- 12. As regards the outbreak of avian influenza among the poultry and birds in the Mainland, HWFB has been keeping in close touch with the MoA. Since mid-2005, the MoA has made timely reports on 27 confirmed cases of avian influenza, offering details on the place of infection, date of confirmation, number of animals involved and culled as well as infection control measures implemented to enable Hong Kong to take appropriate measures to protect public health.

High Level Liaison

13. Senior health and food hygiene officials of the Mainland, Hong Kong and Macao also meet on a regular basis to exchange latest information and enhance collaboration in respect of the prevention and control of infectious diseases as well as food safety. For example, at the Fourth Joint Meeting of Senior Health Officials of the Mainland, Hong Kong and Macao (the Joint Meeting has been held on an annual basis) held in Kunming, the Yunnan Province in October 2005, the three places conducted constructive discussions and shared their work experience in public health, prevention of infectious diseases, and monitoring of food safety.

Way Forward

14. The Administration is keenly aware of the importance of maintaining close liaison with the Mainland authorities so that it can respond swiftly to any potential outbreak situations, and will keep its communication network with the Mainland under close review. Relevant arrangements will be fine tuned for the protection of public health as appropriate in the light of operating experience.

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Annex

Statutory notifiable infectious diseases of the Mainland

- 1. Plague
- 2. Cholera
- 3. Severe Acute Respiratory Syndrome (SARS)
- 4. HIV/AIDS
- 5. Viral Hepatitis
- 6. Poliomyelitis
- 7. Human Infection of Highly Pathogenic Avian Influenza
- 8. Measles
- 9. Epidemic Hemorrhagic Fever
- 10. Rabies
- 11. Japanese Encephalitis
- 12. Dengue Fever
- 13. Anthrax
- 14. Dysentery: Bacillary Dysentery and Amebic Dysentery
- 15. Tuberculosis of Lungs
- 16. Typhoid Fever and Paratyphoid Fever
- 17. Meningococcal Meningitis
- 18. Whooping Cough
- 19. Diphtheria
- 20. Neonatal Tetanus
- 21. Scarlet Fever
- 22. Brucellosis
- 23. Gonorrhea
- 24. Syphilis
- 25. Leptospirosis
- 26. Schistosomiasis
- 27. Malaria
- 28. Influenza
- 29. Mumps
- 30. Rubella
- 31. Acute Hemorrhagic Conjunctivitis
- 32. Leprosy
- 33. Typhus
- 34. Kala-Azar
- 35. Echinosis
- 36. Filariasis
- 37. Infective diarrhoea (excluding Cholera, Dysentery, Typhoid and

Paratyphoid fever)

Statutory notifiable infectious diseases of Hong Kong

- 1. Tuberculosis
- 2. Acute Poliomyelitis
- 3. Amoebic Dysentery
- 4. Bacillary Dysentery
- 5. Chickenpox
- 6. Cholera
- 7. Dengue Fever
- 8. Diphtheria
- 9. Food Poisoning
- 10. Legionnaires' Disease
- 11. Leprosy
- 12. Malaria
- 13. Measles
- 14. Meningococcal Infections
- 15. Mumps
- 16. Paratyphoid Fever
- 17. Plague
- 18. Rabies
- 19. Relapsing Fever
- 20. Rubella
- 21. Scarlet Fever
- 22. Tetanus
- 23. Typhoid Fever
- 24. Typhus
- 25. Viral Hepatitis
- 26. Whooping Cough
- 27. Yellow Fever
- 28. Severe Acute Respiratory Syndrome (SARS)
- 29. Influenza A(H5), Influenza A(H7) or Influenza A(H9)
- 30. Japanese Encephalitis
- 31. Streptococcus suis Infection

Other reportable infectious diseases to Guangdong and Macao

- HIV/AIDS
- Influenza

Statutory notifiable infectious diseases of Macao

- 1. Cholera
- 2. Plague
- 3. Yellow Fever
- 4. Ebola Virus Infection
- 5. Severe Acute Respiratory Syndrome (SARS)
- 6. Typhoid Fever and Paratyphoid Fever
- 7. Other Salmonella Infection (excluding Typhoid Fever and Paratyphoid Fever)
- 8. Shigellosis (including Bacillary Dysentery)
- 9. Enterohemorrhagic Escherichia coli Infection
- 10. Amoebiasis (including Acute Amoebic Dysentery)
- 11. Viral Intestinal Infection
- 12. Tuberculosis (all types)
- 13. Anthrax
- 14. Leprosy
- 15. Diphtheria
- 16. Whooping Cough
- 17. Scarlet Fever
- 18. Meningococcal Infections (with or without Meningitis)
- 19. Syphilis
- 20. Gonococcal Infections
- 21. Lymphogranuloma Venereum
- 22. Other STD (excluding Syphilis, Gonococcal Infections, Lymphogranuloma Venereum and HIV Diseases)
- 23. Acute Poliomyelitis
- 24. Creutzfeldt-Jakob Disease (CJD)
- 25. Rabies
- 26. Dengue Fever (including Dengue Haemorrhagic Fever)
- 27. Varicella (Chickenpox)
- 28. Measles
- 29. Rubella (German Measles) (all types)
- 30. Enterovirus Infection
- 31. Viral Hepatitis (all types)
- 32. HIV Diseases (including Asymptomatic HIV Infection and AIDS)
- 33. Mumps
- 34. Acute Hemorrhagic Conjunctivitis
- 35. Malaria (all types)
- 36. Influenza
- 37. Bacterial Food Intoxication

- 38. Leptospirosis
- 39. Legionnaires' Disease
- 40. Typhus
- 41. Tetanus (all types)
- 42. Japanese Encephalitis
- 43. Viral Infection of Central Nervous System
- 44. Epidemic Hemorrhagic Fever (Hantaan Virus Infection)
- 45. Hemophilus influenzae Infection (with or without Meningitis)