For information on
15 March 2007

Legislative Council Panel on Manpower

A Review of Occupational Diseases in Hong Kong in 2006

PURPOSE

This paper sets out the position of occupational diseases in Hong Kong in 2006, and the activities undertaken recently by the Occupational Health Service (OHS) of the Labour Department (LD) in promoting occupational health.

BACKGROUND

2. In Hong Kong, altogether 51 occupational diseases have been prescribed under the Employees' Compensation Ordinance, Cap 282, the Occupational Deafness (Compensation) Ordinance, Cap 469, and the Pneumoconiosis (Compensation) Ordinance, Cap 360. Where a disease is not prescribed in these Ordinances but can be proved in individual cases to be a personal injury by accident arising out of and in the course of employment, compensation may be claimed under section 36(1) of the Employees' Compensation Ordinance.

3. All the 51 compensable occupational diseases are also specified in Schedule 2 of the Occupational Safety and Health Ordinance, Cap 509, as notifiable occupational diseases. Medical practitioners are required to notify cases of these occupational diseases to the Commissioner for Labour.

CONFIRMED OCCUPATIONAL DISEASES IN 2006

4. In 2006, the number of confirmed occupational disease cases was 264, increasing slightly by 3.1% from 256 cases in 2005. The incidence rate in 2006 was 10.5 cases per 100,000 employed workers, as compared with 10.3 cases in 2005. From 1998 to 2006, however, the number of occupational disease cases and incidence rate had fallen markedly by 72% and 74% respectively. The most common occupational diseases confirmed in 2006 were silicosis, tenosynovitis of hand or forearm, occupational deafness and tuberculosis. The statistical details are at Annex.

Silicosis

5. Silicosis is a chronic disease that causes fibrosis of the lungs leading to impaired lung functions. In 2006, 109 cases were confirmed, as compared with 68 cases in 2005. Most of them were construction workers and many had been employed previously in hand-dug caisson work where they had been exposed to an extremely high level of silica dust. The use of hand-dug caisson has been restricted by the Buildings Department since 1995.

6. Despite the increase in the number of silicosis cases in 2006, it is important to note that the number of such cases had in fact fallen notably over the past decades: from 169 cases a year on average in the period 1986 – 1995 to 106 cases a year on average in the period 1996 – 2005. The increase in 2006 was largely due to year-on-year fluctuation in the figure, as the number of cases in the year was largely consistent with the average yearly figure in the past 10 years. Moreover, as the latent period of silicosis is as long as 10 to 20 years, all these cases were due to exposure to silica dust many years ago. Nevertheless, it is expected that the number of silicosis cases will continue to be on a decreasing trend in general, marked by occasional fluctuations, in the years to come.

Tenosynovitis of Hand or Forearm

7. Tenosynovitis is a traumatic inflammatory disease of tendons and the associated tendon sheath as a result of prolonged and repetitive movements or excessive exertion of the hands and forearms. In 2006, 63 cases were confirmed, as compared with 75 cases in 2005. The disease most commonly occurred for cleaners and housekeeping personnel, general labourers, catering workers, personal care workers as well as clerical and other office personnel.

Occupational Deafness

8. Occupational deafness is a permanent hearing loss owing to prolonged exposure to loud noise at work. In 2006, 51 cases were diagnosed and compensated, as compared with 60 cases in 2005. Most cases were related to rock grinding, chiselling, cutting or percussion, metal grinding and percussion as well as working near internal combustion engines, turbines, pressurised fuel burners or jet engines.

Tuberculosis

9. Tuberculosis is a prescribed occupational disease for those who have close and frequent contacts with a source of the infection by reason of employment, such as those employed in the medical treatment or nursing of persons suffering from tuberculosis. In 2006, 18 cases were confirmed, as compared with 30 cases in 2005. More than half of these cases were nurses and the remainder included doctors and allied health care workers. As Hong Kong currently still has a high endemicity of tuberculosis, it is expected that occupation-related cases will continue to occur. Nevertheless, health care institutions have been taking stringent infection control measures to prevent the spread of the disease in the workplace.

Other Diseases

10. The other more frequently reported occupational diseases included 8 cases of occupational dermatitis, 7 cases of asbestosis and 5 cases of gas poisoning, which altogether accounted for 8% of all the cases confirmed in 2006.

RECENT ACTIVITIES OF OCCUPATIONAL HEALTH SERVICE

Clinical Services

11. The Kwun Tong Occupational Health Clinic of LD, established in 1993, has been providing clinical occupational health services for workers in Hong Kong. Over the years, the demand for such clinical services has increased. To strengthen its clinical services in the New Territories, LD set up the new Fanling Occupational Health Clinic in June 2006. In 2006, the two clinics provided a total of 11,420 consultations, up 22% (or 2,025) on 2005.

Law Enforcement

12. In 2006, the OHS conducted focused inspections to office workplaces with a view to ensuring compliance with the Occupational Safety and Health (Display Screen Equipment) Regulation. Altogether, 321 inspections to office workplaces were conducted, with 82 warning letters and 16 improvement notices issued as well as 3 prosecutions taken out. Moreover, inspections to catering establishments were stepped up to ensure that appropriate measures were taken to prevent workers from contracting work-related musculoskeletal disorders. On this, 701 inspections were

conducted, and 121 warning letters and 17 improvement notices issued. This year, the OHS will enhance its enforcement to ensure adequate protection of drainage workers from gas poisoning.

Occupational Health Promotion

13. Work-related musculoskeletal disorders are common health problems among workers in specific occupations in Hong Kong. In 2006, the OHS strengthened its publicity efforts to promote the prevention of such disorders for office workers and workers in the catering industry. To this end, Announcements of Public Interest were broadcast on the radio and television and shown on mobile advertising media, feature articles published in newspapers, and occupational health talks and roving exhibitions staged in community halls and other public places. A new health guide entitled “Hints on Prevention of Musculoskeletal Disorders in Catering Industry” was also published. This year, apart from enhancing its publicity efforts to raise the awareness of drainage workers on prevention of gas poisoning, the OHS will publish a series of booklets on safety and health at work in relation to common diseases affecting the working population.

Labour Department
March 2007

Annex

Occupational Diseases Confirmed in Hong Kong from 1998 to 2006

Occupational disease	1998	1999	2000	2001	2002	2003	2004	2005	2006
Silicosis	104	137	105	122	110	74	69	68	109
Tenosynovitis of hand or forearm	71	54	81	90	35	34	43	75	63
Occupational deafness	631	388	206	121	114	74	52	60	51
Tuberculosis	39	57	39	41	29	30	42	30	18
Occupational dermatitis	34	21	17	24	29	10	7	10	8
Asbestosis	5	15	11	9	9	6	4	2	7
Compressed air illness	3	3	6	11	4	2	0	1	1
Gas poisoning	57	57	36	11	30	26	28	4	5
Others	4	2	3	1	4	2	6	6	2
Total：	**948**	**734**	**504**	**430**	**364**	**258**	**251**	**256**	**264**
Incidence rate (per 100,000 employed workers) :	**39.7**	**30.4**	**20.1**	**17.1**	**14.8**	**10.9**	**10.3**	**10.3**	**10.5**