

LEGISLATIVE COUNCIL BRIEF

Prevention and Control of Disease Ordinance (Chapter 599)

PREVENTION AND CONTROL OF DISEASE ORDINANCE (AMENDMENT OF SCHEDULE 1) NOTICE 2015

INTRODUCTION

On 9 January 2015, the Director of Health (“the Director”), in exercise of powers conferred by section 15 of the Prevention and Control of Disease Ordinance (Cap. 599) (“the Ordinance”), made the Prevention and Control of Disease Ordinance (Amendment of Schedule 1) Notice 2015 (“the Notice”) at the Annex.

JUSTIFICATIONS

2. The Ordinance and its subsidiary legislation provide a legislative framework for the prevention and control of communicable diseases of public health importance. The Prevention and Control of Disease Regulation (Cap. 599A) (“the Regulation”) provides for various control measures for infectious diseases.¹

3. Section 4 of the Regulation requires medical practitioners to notify the Director if they have reason to suspect the existence of a case of any of the infectious diseases specified in Schedule 1 to the Ordinance in a form as specified by the Director. The reporting of infectious diseases is an important element in the surveillance, prevention and control of spread of infectious diseases.

4. The Director regularly reviews the list of infectious diseases statutorily notifiable by medical practitioners in order to ensure maximal protection against infectious diseases. Under section 15 of the Ordinance, the Director may by notice published in the Gazette amend the Schedules to the Ordinance. At present, there are 48 infectious diseases listed in the Schedule 1 to the Ordinance.

¹ Under the Ordinance –

- “infected” means the presence of an infectious agent on the surface of or inside the body of, or in, a human being or an article; and
- “infectious agent” means a parasite, a fungus, a bacterium, a virus, a prion or any other agent that can cause an infectious disease.

Invasive pneumococcal disease

5. Invasive pneumococcal disease is a group of severe infectious diseases caused by the bacteria *Streptococcus pneumoniae*. The disease may present in various forms such as meningitis, sepsis or severe pneumonia and may be life-threatening.

6. The disease can occur in persons of any age but the mortality rate is substantially higher for people under 2 years of age and elders aged 65 years or above. Persons who have history of clinical invasive pneumococcal disease, are immunocompromised, have underlying chronic illnesses, or have cochlear implants, are also at a higher risk of severe invasive pneumococcal disease.

7. The disease can be caused by over 90 serotypes of pneumococci. From 2007 to June 2014, there were 1 108 cases of invasive pneumococcal disease recorded by the laboratory surveillance system in Hong Kong. The overall annual incidence per 100 000 population varied from 1.7 to 2.5. To prevent this disease, pneumococcal vaccination has been introduced into the Childhood Immunisation Programme in Hong Kong since September 2009. Moreover, pneumococcal vaccination has also been introduced into the Government Vaccination Programme and the Elderly Vaccination Subsidy Scheme for elders aged 65 years or above.

8. In consultation with the relevant professionals and the academia, the Director considers that there is a need to enhance surveillance of the disease so that we can monitor the situation more accurately thus leading to appropriate public health strategies. Invasive pneumococcal disease is also listed as one of the notifiable diseases in other developed countries such as Australia, Canada and New Zealand.

9. In view of the foregoing, we propose to include invasive pneumococcal disease in the list of Scheduled Infectious Diseases of the Ordinance.

THE NOTICE

10. The Notice amends Schedule 1 to the Ordinance by adding invasive pneumococcal disease as item 15A. under the Schedule. The Notice is gazetted on 9 January 2015 for commencement of operation on the same date.

LEGISLATIVE TIMETABLE

11. The legislative timetable is as follows –

Publication in the Gazette	9 January 2015
Tabling at Legislative Council	14 January 2015

IMPLICATIONS

12. The Notice is in conformity with the Basic Law, including the provisions concerning human rights. It will not affect the current binding effect of the Ordinance and have no economic, financial, civil service or family implications. It strengthens Hong Kong's capabilities in the prevention and control of disease and is in line with the sustainability principle of pursuing policies which promote and protect the health of the people of Hong Kong.

PUBLIC CONSULTATION

13. In view of the latest development and the severity of the disease, members of the public and health care professionals are expected to welcome the proposal which would strengthen our capability to enhance the surveillance of the disease in Hong Kong.

PUBLICITY

14. The Department of Health issued a press release on 7 January 2015 regarding the Notice. It has also informed medical practitioners in Hong Kong of the changes in notification requirements. A spokesman from the Department of Health is available to answer media enquiries.

OTHERS

15. For any enquiries on this brief, please contact Dr S K CHUANG, Consultant Community Medicine (Communicable Disease), Centre for Health Protection (tel: 2125 2200).

**Food and Health Bureau
Department of Health
January 2015**

**Prevention and Control of Disease Ordinance
(Amendment of Schedule 1) Notice 2015**

(Made by the Director of Health under section 15 of the Prevention and
Control of Disease Ordinance (Cap. 599))

1. Prevention and Control of Disease Ordinance amended

The Prevention and Control of Disease Ordinance (Cap. 599) is
amended as set out in section 2.

2. Schedule 1 amended (scheduled infectious diseases)

Schedule 1, after item 15—

Add

“15A. Invasive pneumococcal disease (侵入性肺炎球菌
病)”.



Director of Health

5 January 2015

Explanatory Note

The purpose of this Notice is to add “Invasive pneumococcal
disease” to the list of scheduled infectious diseases specified in
Schedule 1 to the Prevention and Control of Disease Ordinance
(Cap. 599).