



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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15 July 2018

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 19 March 2018

During the discussion on the response measures for seasonal influenza at the meeting of the Legislative Council Panel on Health Services held on 19 March 2018, Members requested supplementary information relating to disposal of antiviral drugs by the Hospital Authority (HA), outreach seasonal influenza vaccination activities and the use of low-cost hospital beds. Having consulted the Department of Health (DH) and the HA, the requested supplementary information is provided in the ensuing paragraphs.

(I) The amount and cost of the stockpile of antiviral drugs which had been disposed of by HA in 2017 due to expiry of the shelf-life

2. HA does not stockpile antiviral drugs. All antiviral drug stocks are acquired for routine clinical use only. The following table sets out the total quantity and total cost of all unserviceable (including but not limited to expired) Oseltamivir (Phosphate) (i.e. Tamiflu) in HA in 2017.

Item Description	Unit	Total Quantity	Total Cost (HK\$)
Oseltamivir (Phosphate) Capsule 75mg	Capsule	91	1,319.50
Oseltamivir (Phosphate) Capsule 30mg	Capsule	15	110.03
Oseltamivir (Phosphate) Suspension 6mg/ml	65ml Bottle	213	18,574.17

(II) The measures to be introduced to facilitate the organisation of outreach seasonal influenza vaccination activities at primary schools, the estimated financial and manpower resources so required and the target vaccination rate

3. The DH has adopted a multi-pronged approach in improving the accessibility of seasonal influenza (SI) vaccination among school children, including a pilot programme which aims to facilitate primary schools to arrange outreach vaccination activities will be carried out. Under the pilot programme, the Government will arrange vaccination teams, either by the Government (the DH mode) or through Public-Private-Partnership (i.e. to partner with private doctors), to provide outreach vaccination services at selected primary schools. Other measures will include raising the subsidies and strengthening the support (e.g. additional guidelines and assistance) of outreach vaccination services provided by enrolled private doctors under the Vaccination Subsidy Scheme (VSS). This arrangement aims to improve participation rate at kindergartens/child care centres and primary schools. Meanwhile, the Government will step up publicity activities about the importance of timely vaccination of SI vaccines, its benefit to prevent influenza and its complications, and disease transmission.

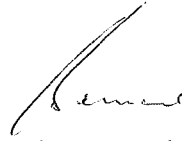
4. DH is in the process of preparing for the pilot outreach vaccination programme including the recruitment of extra manpower and purchase of sufficient vaccines for the programme. It will work out the manpower and financial resources required in the course of finalising the programme.

(III) The expenditure involved for transferring HA patients to private hospitals with low-cost hospital bed arrangement for completion of treatment

5. The collaboration with private hospitals to utilise low-charge beds for HA patients during 2017-18 winter influenza season commenced on 5 January

2018 and ended on 15 April 2018. 25 patients had been transferred to the private hospitals and the expenditure incurred was around \$148,000.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Bernard Lo', written in a cursive style.

(Bernard Lo)

for Secretary for Food and Health

c.c. Director of Health (Attn.: Dr K H Wong)
Chief Executive, Hospital Authority (Attn.: Ms Dorothy Lam)