



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

本函檔號 Our Ref: FHB/H/16/31
來函檔號 Your Ref: CB2/PS/1/17

電話號碼 Tel: 3509 8955
傳真號碼 Fax: 2840 0467

24 June 2019

Clerk to Subcommittee
Subcommittee on Issues Relating to the Support for Cancer Patients
Legislative Council Complex
1 Legislative Council Road
Central, Hong Kong
(Attn.: Ms Maisie Lam)

Dear Ms Lam,

**Panel on Health Services
Subcommittee on Issues Relating to the Support for Cancer Patients**

**Follow-up actions required of the Administration
arising from the discussion at the meeting on 20 May 2019**

Thank you for your letter of 31 May 2019. In consultation with the Department of Health, our response is at **Annex**.

Yours sincerely,

(Ronald Ho)

for Secretary for Food and Health

Encl.

c.c.

Director of Health (Attn.: Dr Rita Ho)

Secretary for Food and Health's Office (Attn.: Ms Eppie Cheng)

Government's Response

Question (a)

The Government accords high importance to cancer prevention and control. As early as 2001, the Government established the Cancer Coordinating Committee ("CCC"), chaired by the Secretary for Food and Health. The Cancer Expert Working Group on Cancer Prevention and Screening ("CEWG") under the CCC regularly reviews and discusses local and international evidence and makes recommendations on cancer prevention and screening applicable to the local setting. At present, the CEWG has made recommendations on prevention and screening for nine selected cancers, namely cervical, colorectal, breast, prostate, lung, liver, nasopharyngeal, thyroid and ovarian cancers (details on recommendations on screening at **Annex 2 of LC Paper No. CB(2)1433/18-19(01)**).

2. The CEWG adopted a list of criteria promulgated by the World Health Organization as guiding principles in considering introducing population-based screening programmes¹ –

- (a) the condition sought should be an important health problem;
- (b) there should be an accepted treatment for patients with recognised disease;
- (c) facilities for diagnosis and treatment should be available;
- (d) there should be a recognisable latent or early symptomatic stage;
- (e) there should be a suitable test or examination;
- (f) the test should be acceptable to the population;
- (g) the natural history of the condition, including development from latent to declared disease, should be adequately understood;
- (h) there should be an agreed policy on whom to treat as patients;
- (i) the cost of case-finding (including diagnosis and treatment of patients diagnosed) should be economically balanced in relation to possible expenditure on medical care as a whole; and

¹ https://www.chp.gov.hk/files/pdf/overview_of_cewg_recommendations_professional_hp.pdf

- (j) case-finding should be a continuing process and not a “once and for all” project.

3. Based on the above considerations, not all screening methods (including screening tools and frequency mentioned in the questions) are justified with evidence for a population-based screening programme. Besides, all screening tests have their limitations as they are not 100% accurate. From the public health perspective, the Government must carefully assess a number of factors when considering whether to introduce a population-based screening programme for a specific cancer including local prevalence, accuracy and safety of the screening tests, effectiveness in reducing incidence and mortality rates, the feasibility of implementation of a screening programme, the capacity of the healthcare system with respect to resources, manpower and infrastructure, and public acceptance. The overriding principle is whether screening does more good than harm to the society. Based on the above principles, the Government has launched territory-wide screening programmes for cervical cancer and colorectal cancer.

Breast cancer screening

4. At present, the CEWG is of the view that there is insufficient scientific evidence to recommend for or against population-based mammography screening for asymptomatic women at average risk in Hong Kong. Women are advised to be breast aware (be familiar with the normal look and feel of their breasts) and visit doctors promptly if suspicious symptoms appear. Individuals considering breast cancer screening should be adequately informed by doctors about the benefits and harms.

5. With a view to gathering more research findings and data to formulate the future strategies for breast cancer screening in Hong Kong, the Government has commissioned The University of Hong Kong to conduct a study on risk factors associated with breast cancer for local women. The study is expected to be completed in the latter half of 2019. The Government will then review and consider what type of screening is to be adopted for women of different risk profiles, having regard to the scientific evidence and the outcome of the study.

Liver cancer screening

6. Chronic hepatitis B virus (“HBV”) infection (also known as chronic hepatitis) is a major cause of liver cancer in Hong Kong. The most cost-effective

strategy for preventing primary liver cancer is universal vaccination with hepatitis B vaccine which has been part of the Hong Kong Childhood Immunisation Programme since 1988.

7. Regarding population-based liver cancer screening, the CEWG considers that routine screening with alpha-fetoprotein (“AFP”) or ultrasonography (“USG”) for asymptomatic persons at average risk is not recommended. People with chronic HBV or hepatitis C virus (“HCV”) infection, or liver cirrhosis, regardless of the cause, are at increased risk of hepatocellular carcinoma. Depending on certain criteria such as age, family history, presence of cirrhosis and other clinical parameters, some groups are at higher risk and should consider receiving periodic cancer surveillance (e.g. every six to 12 months) with AFP and USG. People with chronic HBV or HCV infection, or liver cirrhosis, should seek advice from doctors to determine their need for and approach of cancer surveillance.

8. To draw up local strategy to effectively prevent and control viral hepatitis, the Steering Committee on Prevention and Control of Viral Hepatitis (“SCVH”) was set up in July 2018. The Government will continue to keep in view the recommendations made by the SCVH and the CEWG.

Prostate cancer screening

9. After taking into account emerging scientific, international practices and local epidemiology, the CEWG considers that there is insufficient scientific evidence to recommend for or against population-based prostate cancer screening in asymptomatic men by Prostate Specific Antigen and/or Digital Rectal Examination and encourages asymptomatic men to discuss with their doctor about individual circumstances and make informed decisions on whether or not to go for prostate cancer screening. The CEWG will continue to keep in view the latest developments on this subject.

Question (b)

10. The scientific evidence and justifications of the latest recommendations for the nine selected cancers made by the CEWG are available on the website of the Centre for Health Protection of the Department of Health at the following links -

- (a) Recommendations on Prevention and Screening for Cervical Cancer
https://www.chp.gov.hk/files/pdf/cervical_cancer_professional_hp.pdf
- (b) Recommendations on Prevention and Screening for Colorectal Cancer
https://www.chp.gov.hk/files/pdf/cewg_crc_professional_hp.pdf
- (c) Recommendations on Prevention and Screening for Breast Cancer
https://www.chp.gov.hk/files/pdf/breast_cancer_professional_hp.pdf
- (d) Recommendations on Prevention and Screening for Prostate Cancer
https://www.chp.gov.hk/files/pdf/prostate_cancer_professional_hp.pdf
- (e) Recommendations on Prevention and Screening for Lung Cancer
https://www.chp.gov.hk/files/pdf/lung_cancer_professional_hp.pdf
- (f) Recommendations on Prevention and Screening for Liver Cancer
https://www.chp.gov.hk/files/pdf/liver_cancer_professional_hp.pdf
- (g) Recommendations on Prevention and Screening for Nasopharyngeal Cancer
https://www.chp.gov.hk/files/pdf/npc_hp_version_hp.pdf
- (h) Recommendations on Prevention and Screening for Thyroid Cancer
https://www.chp.gov.hk/files/pdf/thyroid_cancer_professional_hp.pdf
- (i) Recommendations on Prevention and Screening for Ovarian Cancer
https://www.chp.gov.hk/files/pdf/ovarian_cancer_professional_hp.pdf