

**For information on  
31 May 2021**

**Legislative Council Panel on Welfare Services  
Subcommittee on Issues Relating to the Silver Age Card**

**Health Status and Average Healthcare Expenditure of  
Persons Aged 60 to 64 in Hong Kong**

**Purpose**

This paper sets out the information provided by the Department of Health (“DH”) and the Hospital Authority (“HA”) on the health status and average healthcare expenditure of persons aged 60 to 64 in Hong Kong.

**Physical Health Status**

2. The Government has all along been promoting a healthy lifestyle in various aspects. To enhance surveillance on non-communicable diseases, the DH generally conducts a health behaviour survey (“HBS”) every two years and a population health survey (“PHS”) every four to six years to collect pertinent information on the patterns of health status, health-related lifestyles and other health parameters of the local population.

3. The Centre for Health Protection of the DH commenced the PHS 2020 early last November. The survey comprises household interviews and health examinations, targeting the land-based non-institutional population aged 15 or above in Hong Kong (excluding visitors, foreign domestic helpers, two-way exit permit holders from the Mainland and persons living in institutions). The last round of the PHS was conducted in 2014/15, with around 12 000 land-based non-institutional Hong Kong residents aged 15 or above (including 975 persons aged 60 to 64) successfully interviewed and around 2 300 respondents aged 15 to 84 attending health examinations. The relevant results are set out in paragraphs 4 to 6.

4. The overall obesity and overweight<sup>1</sup> rate of the population aged 15 to 84 was 50%. According to the survey, the obesity and overweight rate generally increased with age from 24.1% among those aged 15 to 24 to 57.5% and 62.0% among those aged 55 to 64 and 65 to 84 respectively, while the obesity and overweight rate among persons aged 60 to 64 was 56.3%. In addition, the prevalence of hypertension<sup>2</sup> that was self-reported or detected during health examination was 27.7% among those aged 15 to 84, with 47.5% of them being undiagnosed before the PHS. On the whole, the prevalence of hypertension increased with age, rising from 4.5% among those aged 15 to 24 to 46.4% and 64.8% among those aged 55 to 64 and 65 to 84 respectively, while the corresponding figure among persons aged 60 to 64 was 54.7%.

5. Among those aged 15 to 84, 49.5% were diagnosed with hypercholesterolaemia<sup>3</sup>, with around 70% of them being undiagnosed before the PHS. Analysed by age group, the prevalence of hypercholesterolaemia generally increased with age from 15.7% among those aged 15 to 24 to 72.0% and 68.7% among those aged 55 to 64 and 65 to 84 respectively. The percentage was 74.2% in the age group of 60 to 64.

6. The prevalence of diabetes mellitus (“DM”)<sup>4</sup> that was self-reported or detected during health examination was 8.4% among those aged 15 to 84, with over half of them being undiagnosed before the PHS. The prevalence of DM increased steadily with age from 0.2% among those aged 15 to 24 to 12.3% and 25.4% among those aged 55 to 64 and 65 to 84 respectively. The percentage was 16.7% in the age group of 60 to 64.

7. According to the latest statistics of the Hong Kong Cancer Registry of the HA, 34 028 new cancer cases were diagnosed in Hong Kong in 2018, among them, 4 554 cases (about 13.4%) were diagnosed between the age of 60 and 64. The five most commonly diagnosed cancers among this group

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<sup>1</sup> Obesity was defined as a Body Mass Index (“BMI”) greater than or equal to 25, whereas overweight was defined as a BMI ranging from greater than or equal to 23 to less than 25.

<sup>2</sup> Hypertension was defined as a systolic blood pressure higher than or equal to 140 mmHg and/or a diastolic blood pressure higher than or equal to 90 mmHg.

<sup>3</sup> Hypercholesterolaemia was defined as a total cholesterol of higher than 5.2 mmol/L.

<sup>4</sup> DM was defined as either a fasting plasma glucose of higher than or equal to 7.0 mmol/L or a glycated haemoglobin of higher than or equal to 6.5%.

were colorectal cancer, lung cancer, breast cancer, prostate cancer and liver cancer. The numbers of new cases of common cancer types in people aged between 60 and 64 in 2018 are set out at **Annex A**.

## **Mental Health Status**

8. Based on the recommendation of the Mental Health Review Report, the Food and Health Bureau (“FHB”) commissioned universities in 2019 to conduct three mental health surveys covering children, adolescents and elderly persons. Among these surveys, the target of mental health survey on elderly persons are those community-dwelling and institutional-based elderly persons aged 60 or above. Carers would also be invited to participate in the survey as appropriate. The survey targets the mental health problems of elderly persons including, but not limited to, dementia, depression, anxiety disorders, psychosis, etc. The survey will also estimate the age-specific disease prevalence, reveal any associated risk factors for various mental health problems, identify important factors supporting functional optimisation and ageing-in-place of elderly persons with mental health problems from the patients’ and general public’s perspectives. The data collected from the survey will facilitate the Government to formulate the long-term development of the mental health services according to the needs of the elderly persons. The survey is expected to complete within 2022.

9. As regards the support to elderly persons with dementia, FHB, in collaboration with the HA and the Social Welfare Department (“SWD”) launched a two-year pilot scheme named Dementia Community Support Scheme (“DCSS”) in February 2017. The DCSS provides community support services to elderly persons who are aged 60 or above with mild or moderate dementia, as well as their carers, through district elderly community centres (“DECCs”) based on a medical-social collaboration model. The DCSS was regularised in February 2019 and has been extended to all 41 DECCs in the territory since May 2019. It is estimated that more than 2000 elderly persons and their carers would be benefited from the DCSS annually.

10. Elderly persons who are recipients of Comprehensive Social Security Assistance (“CSSA”) or Normal/Higher Old Age Living Allowance (“Normal/Higher OALA”), or holders of medical fee waiver (not applicable to holders of one-off medical waiver) can receive free services under the DCSS. Those who are neither recipients of CSSA or Normal/Higher OALA, nor holders of medical fee waiver can pay a monthly fee of \$150 to join the DCSS.

### **Health-related Behaviours and Lifestyle Practices**

11. The DH conducted the HBS 2018/19 during the period from April 2018 to February 2019 to collect information on major health-related behaviours and lifestyle practices associated with the prevention and control of non-communicable diseases. About 5 900 Hong Kong residents aged 15 or above, including 499 persons aged 60 to 64, were successfully interviewed. The key findings of the survey are set out in paragraphs 12 to 13.

12. On smoking, the percentage of respondents with the habit of smoking (whether on a daily basis or less often, and regardless of the types of smoking products) was the highest among those aged 35 to 44, accounting for 18.7% of that age group. The percentage was 12.1% in the age group of 60 to 64. Also, the survey adopted a self-administered questionnaire to assess the pattern of alcohol consumption among persons aged 15 or above. Of the respondents, 8.8% drank regularly (i.e. at least once a week in the 12 months preceding the survey). While 12.0% of those aged 55 to 64 drank regularly, which was the highest rate among all age groups, 10.4% of those aged 60 to 64 also drank regularly.

13. The World Health Organization (“WHO”) recommended that adults aged 18 or above should perform at least 150 minutes of moderate-intensity aerobic physical activity, or 75 minutes of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate-and vigorous-intensity physical activity in a week for health maintenance. According to the survey, 16.8% of the respondents had insufficient physical activity according to WHO’s recommendation. Among them, those aged

85 or above had the highest rate of insufficient physical activity (42.8%), while that for those aged 60 to 64 was 14.6%.

## **Preventive Health Measures**

14. Hong Kong's public healthcare system is facing significant challenges due to an ageing population and the increasing prevalence of chronic and complex diseases. As such, the Government has rolled out various measures to help the public in the prevention, early identification and proper management of diseases.

15. As a result of ageing population and changes in lifestyle, new cases of colorectal cancer have continued to increase and is the most common cancer in Hong Kong. To tackle the increasing healthcare burden caused by colorectal cancer, the DH launched the Colorectal Cancer Screening Programme (the "Programme") on a pilot basis in September 2016, which was subsequently regularised in 2018 and fully implemented in 2020.

16. Under the Programme, asymptomatic Hong Kong residents aged 50 to 75 are subsidised to undergo faecal immunochemical test ("FIT") in the private sector. If the test result is positive, the participant will be referred to the private sector to receive a colonoscopy examination subsidised by the Government. If the result is negative, the participant will continue to receive subsidies to repeat the FIT screening every two years. As at 31 March 2021, about 223 000 persons participated in the Programme, of which some 41 000 were at the age of 60 to 64.

17. Besides, the DH's Family Health Service offers a comprehensive health promotion and disease prevention programme to all women at or below the age of 64 to cater for their changing needs in different life stages and roles. The programme, implemented in Maternal and Child Health Centres ("MCHCs") and Woman Health Centres, aims to help women make life choices that are conducive to their health and seek appropriate health care or social services when necessary through the provision of accurate and updated information on all woman health issues as well as relevant community resources.

18. Cervical cancer is one of the most common cancers among women in Hong Kong. A cervical screening service is offered at the MCHCs to women aged 25 to 64 who have ever engaged in sexual activity, with a view to achieving early detection and treatment of pre-cancerous changes and hence the prevention of cervical cancer. Over the past few years, women aged 60 to 64 who received the screening service at the MCHCs accounted for about 8% of women under all age groups.

### **Utilisation of Public Healthcare Services**

19. The HA provides subsidised public healthcare services to the public through public hospitals and clinics under its seven clusters. According to information provided by the HA, statistics on key services utilised by HA patients aged between 60 and 64 in 2019/20 are set out at **Annex B**.

### **Charges for Public Healthcare Services**

20. Public healthcare services provided by the HA are heavily subsidised by the Government such that the medical fees are affordable by the general public. In 2019/20, the average charges paid by patients aged 60 to 64 in the HA throughout the year was around \$1,180<sup>5</sup>. To ensure no one is denied adequate medical care due to lack of means, the HA has put in place a medical fee waiver mechanism to provide assistance to needy patients. Recipients of CSSA are waved from payment of their public

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<sup>5</sup> Including medical fee income for public services (including charges for inpatient and outpatient services, and self-financed drugs) provided to eligible persons aged 60 to 64 in the financial year and net of medical fee waiver. It does not include income from public services settled by institutions, private service and privately purchased medical items (such as Percutaneous Transluminal Coronary Angioplasty and other consumables for interventional Cardiology).

Persons meeting the following criteria are eligible for the rates of charges applicable to eligible persons as stipulated in the Gazette :

- (i) holders of Hong Kong Identity Card issued under the Registration of Persons Ordinance (Chapter 177), except those who obtained their Hong Kong Identity Card by virtue of a previous permission to land or remain in Hong Kong granted to them and such permission has expired or ceased to be valid;
- (ii) children who are Hong Kong residents and under 11 years of age; or
- (iii) other persons approved by the Chief Executive of the HA.

healthcare expenses. Besides, patients who could not afford medical expenses can apply for medical fee waiver at the Medical Social Services Units of public hospitals and clinics or the Integrated Family Service Centres or the Family and Child Protective Services Units of the SWD. Medical Social Workers/Social Workers would assess the application with due consideration given to the financial, social and medical condition of applicants on a household basis.

## **Conclusion**

21. Members are invited to note the information in this paper.

Food and Health Bureau  
Department of Health  
Hospital Authority

May 2021

**Ten Most Common Cancers in  
People aged between 60 and 64 in Hong Kong in 2018**

<b>Rank</b>	<b>Cancer types</b>	<b>Number of new cases</b>
1	Colorectum	874
2	Lung	740
3	Breast	589
4	Prostate	299
5	Liver	269
6	Stomach	166
7	Corpus uteri	147
8	Non-Hodgkin lymphoma	116
9	Thyroid gland	113
10	Non-melanoma skin	105
	<b>All types</b>	<b>4 554</b>

**Statistics on Key HA Services Utilised by  
HA Patients aged between 60 and 64**

<b>Delivery of services by the HA</b>	<b>2019/20<sup>(1)</sup></b>
<b>Inpatient Services<sup>(2)</sup></b>	
• No. of patient days (general (acute and convalescent))	519 161
• No. of patient days (overall) <sup>(3)</sup>	679 353
• No. of discharges and deaths (general (acute and convalescent))	82 827
• No. of discharges and deaths (overall) <sup>(3)</sup>	84 318
<b>Day Inpatient Services<sup>(2)</sup></b>	
• No. of discharges and deaths	95 178
<b>Accident &amp; Emergency (A&amp;E) Services</b>	
• No. of A&E attendances	157 882
<b>Specialist Outpatient Services</b>	
• Total no. of specialist outpatient (clinical) attendances <sup>(4)</sup>	906 863
<b>Primary Care Services</b>	
• No. of general outpatient attendances <sup>(5)</sup>	844 877

**Note :**

- (1) In view of the emergence of the Coronavirus Disease 2019 epidemic in Hong Kong since early 2020, HA has adjusted its services in response to the epidemic along with tightening up infection control measures. Hence, the service throughput across a wide range of services provided by HA might have been reduced when compared with that of previous years.
- (2) In HA, day inpatients refer to those who are admitted into hospitals for non-emergency treatment and who are discharged within the same day. Inpatients are those who are admitted into hospitals via A&E Department or those who have stayed for more than one day.
- (3) Overall figures include four categories, namely general (acute and convalescent), mentally ill, mentally handicapped and infirmary.
- (4) Total no. of specialist outpatient (clinical) attendances includes first attendances and follow-up attendances. It also includes attendances from nurse clinics in specialist outpatient setting.
- (5) General outpatient (GOP) attendances include attendances for doctor consultations, attendances from nurse clinic in GOP setting and attendances in related healthcare reform initiative programmes in primary care.