

立法會

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Panel on Health Services

Meeting on 14 June 2024

Background brief on seasonal influenza and response measures

Purpose

This paper provides background information and summarizes the concerns of Members of the Legislative Council (“LegCo”), including members of the Panel on Health Services (“the Panel”) on issues relating to seasonal influenza and response measures.

Background

2. Seasonal influenza is a common respiratory tract infection caused by human seasonal influenza viruses. In Hong Kong, seasonal influenza is usually more common in periods from January to March/April and from July to August. Three types of seasonal influenza viruses are recognized to cause human infection, namely A, B and C. Influenza A viruses can further be subtyped on the basis of two surface antigens: haemagglutinin (H) and neuraminidase (N). Currently, there are two subtypes of seasonal influenza A viruses circulating in humans, namely influenza A (H1N1) pdm09 and influenza A (H3N2).

3. According to the Administration, influenza vaccination is effective in preventing seasonal influenza and its complications together with reduction in influenza-associated hospitalization and death. The Department of Health (“DH”) has been administering the following vaccination programmes/schemes to provide free or subsidized seasonal influenza vaccination to eligible persons:

- (a) Vaccination Subsidy Scheme (“VSS”): which provides subsidized seasonal influenza vaccination to eligible persons, including persons aged 50 or above, pregnant women and children aged between 6 months and below 18 years of age through private doctors participating in VSS;

- (b) Seasonal Influenza Vaccination School Outreach (Free of Charge) Programme (“SIVSOP”)/VSS School Outreach (Extra Charge Allowed) Scheme (“VSS School Outreach Scheme”): which provides free or subsidized seasonal influenza vaccination to eligible school children through the public-private partnership outreach teams or DH’s outreach team; and
- (c) Government Vaccination Programme: which provides free seasonal influenza vaccination to eligible children, elderly and other target groups at clinics of DH and the Hospital Authority (“HA”).

4. The Administration advised in October 2023 that DH, HA and the Primary Healthcare Office (“PHO”) of the Health Bureau have put in place a series of measures to cope with the winter surge of influenza and COVID-19. Measures taken by DH include providing free vaccination to eligible groups which are generally at a higher risk through various Government vaccination programmes, promoting seasonal influenza vaccination to the public through publicity activities, educating the public on influenza prevention, and closely monitoring influenza activity in the community. Measures taken by HA include increasing the number of hospital beds and expanding service quotas in general outpatient clinics as and when necessary, and enhancing monitoring patient flow and service capacity of primary healthcare. PHO would actively promote the uptake of seasonal influenza vaccination in all districts through the District Health Centres (“DHCs”).

Major concerns of Members

5. Members’ major and recent discussions and concerns relating to seasonal influenza and response measures are summarized in the following paragraphs.

Vaccination

Nasal spray vaccines for young children

6. Some Members have enquired whether more nasal influenza vaccines would be made available to school children to address concerns of parental resistance due to panic or pain at the injection site encountered by their children.

7. The Administration has advised that DH conducts survey annually to gather feedback from enrolled doctors and schools on the school outreach programmes/schemes. According to the findings of the survey conducted in 2023, among the doctors and schools planning to participate in outreach activities in 2023-2024 season, the majority of respondents preferred injectable inactivated influenza vaccines (“IIVs”).¹

8. The Administration has further advised that, under the current arrangement, kindergartens and childcare centres (“KG/CCCs”) can choose between IIVs or nasal live attenuated influenza vaccines (“LAIVs”). While primary and secondary schools are provided with injectable IIVs under SIVSOP, schools can also arrange outreach vaccination activities through VSS School Outreach Scheme during which participating schools can discuss with doctors their preference for injectable IIVs or nasal LAIVs for vaccination of eligible students.² Private doctors under VSS may also decide whether they would use injectable IIVs or nasal LAIVs at their practices depending on their preference and stock. In the 2023-2024 season, DH procured 25 700 doses of LAIV for KG/CCCs, of which 21 400 doses were administered for 16 500 students.

9. The Administration has further point out that for 2024-2025 season, DH will take into account the survey result of 2024 and the updated recommendations and experience of overseas health authorities in drawing up the implementation plan, so as to come up with the best mode of operation and type of vaccine to be provided.

Expanding the subsidized age groups

10. Some Members are of the view that the Administration should consider a gradual expansion of the age range eligible for subsidized influenza vaccines to all age groups to reduce the number of severe cases of influenza, thereby alleviating the burden on public medical services.

¹ Nasal live attenuated influenza vaccines was only preferred by 26% of kindergartens and childcare centres.

² Persons suitable for receiving inactivated influenza vaccines and live attenuated influenza vaccines (“LAIVs”) vaccine are different. There are more restrictions for receiving nasal spray vaccines with more points to note, and the shelf-life is also shorter. Nasal LAIVs are not applicable to persons who are pregnant, immunocompromised or with other contraindications, e.g. children 2 years through 4 years who have asthma or who have had a history of wheezing in the past 12 months; and concomitant aspirin or salicylate-containing therapy in children and adolescents.

11. In response, the Administration has pointed out that the Scientific Committee on Vaccine Preventable Diseases (“SCVPD”) under the Centre for Health Protection (“CHP”) of DH issues recommendations on seasonal influenza vaccine composition, type of vaccine as well as the priority groups for receiving vaccine in regard to the influenza season in Hong Kong on an annual basis after reviewing scientific evidence, local data, latest recommendations of the World Health Organization and overseas practices. The Government would consider SCVPD’s recommendations, cost effectiveness, the financial affordability of the public and other public health considerations to assess the possibility of expanding the coverage of the subsidized target groups under influenza vaccination programmes/schemes.

Increasing the vaccination uptake rates among children and the elderly

12. Expressing concern about the seasonal influenza vaccination uptake rates in the two groups of children aged six months to under six and persons aged 65 or above are relatively low, some Members have enquired about the measures the Administration has in place to step up promotion among these groups, and whether vaccination targets would be set to reduce the impact of outbreaks of seasonal influenza.

13. The Administration has advised that it has already implemented targeted measures for the high-risk groups:

- (a) For children, CHP has solicited assistance from the Education Bureau, parent teacher associations and district-based school associations in encouraging more schools to participate in the school outreach vaccination, and also contacted schools that have not enrolled to provide targeted assistance;
- (b) As for the elderly living in the community, DH’s Visiting Health Teams has promoted the prevention of influenza and COVID-19 to the elderly and their carers. Fourteen designated Elderly Health Centres have been providing seasonal influenza vaccination for members as well as all the elderly aged 65 or above; and
- (c) As regards residents of residential care homes (“RCHs”) for the elderly and persons with disabilities, DH has adopted an opt-out approach for its outreach vaccination for those residents. The Social Welfare Department has also urged RCHs to proactively arrange vaccination by visiting medical officers for timely vaccination of residents. CHP also

launched a new round of the outreach vaccination service special programme for RCHs in December 2023 for door-to-door vaccination.

14. Besides, DHCs have held over 200 events since October 2023 to promote vaccination, providing members of the public with information on the list of private doctors enrolled in VSS, assisting vaccination booking, and providing seasonal influenza vaccination at their centres in collaboration with private doctors.

15. As for the target of vaccination rate, the Administration has advised that the relevant Scientific Committees have not set a specific target on the seasonal influenza vaccination rate. Nevertheless, the higher the vaccination rate among the high-risk groups, the better the results in preventing serious illnesses caused by influenza.

Prevention and control measures

16. A question has been raised on whether the Health Bureau has issued guidelines to other policy bureaux and government departments to assist them in preventing a large scale outbreak of respiratory tract infections on the front of public disease prevention and coping with the relevant situation.

17. The Administration has responded that CHP has been working with various government departments and stakeholders for better prevention and control of the risks of respiratory infectious diseases. Relevant measures include:

- (a) formulation of health guidelines on the prevention of and responses to seasonal influenza and COVID-19, etc, for reference of various sectors including schools, RCHs, employers and employees, etc;
- (b) issuance of a guideline on the prevention of influenza and COVID-19 in RCHs for the elderly and persons with disabilities in November 2023;
- (c) issuance of letters to schools, RCHs and healthcare organizations, etc, at the end of 2023 to remind them to take preventive measures and report outbreaks for prompt epidemiological investigation;

- (d) having held press conferences to appeal to and help the public heighten vigilance; and
- (e) dissemination of the latest information on the prevention of and responses to respiratory infectious diseases to the public through other departments, such as conveying information to the District Councils and stakeholders including Care Teams (District Services and Community Care Teams).

18. In addition, HA has formulated a phasic response plan, would review the service demand, and deploy manpower and resources in response, including providing comprehensive respiratory panel testing for paediatric patients, conducting COVID-19 admission screening for patients with higher risks, as well as ensuring adequate stock of antiviral drugs, etc.

Publicity

19. A question has been raised as to whether the Administration would consider setting up a one-stop platform to provide parents, school children and schools with information regarding seasonal influenza and enhance public education on that platform.

20. The Administration has advised that CHP disseminates information in a transparent and timely manner to ensure that up-to-date information was made available to the public. Influenza surveillance data is summarized in the weekly online publication “COVID-19 and Flu Express” and uploaded to the CHP’s website every week. CHP also issued letters to doctors, hospitals, kindergartens, child care centres, primary and secondary schools, as well as RCHs for the elderly and persons with disabilities, informing them of the latest seasonal influenza situation and reminding them to take preventive measures.

21. The Administration has further pointed out that CHP has created thematic webpages about seasonal influenza³ and vaccination programmes/schemes⁴ to provide the general public, parents and schools with the latest information. CHP has also been promoting health messages on personal and environmental hygiene as well as prevention of respiratory diseases including seasonal influenza through various channels, including thematic webpages, Announcements in the Public Interest on television and radio stations, social media, and newspapers. CHP also produces various health education materials, such as leaflets, posters, infographics and

³ <https://www.chp.gov.hk/en/features/14843.html>

⁴ <https://www.chp.gov.hk/en/features/17980.html>

guidelines, to enhance promotion. Relevant information is disseminated to parents and students through various channels, such as schools and parent-teacher associations. In addition, key health information is also available in ethnic minority languages for relevant parties' reference.

22. Pointing out that as schools are currently required to arrange for seasonal influenza vaccination administration for their students, which creates additional workload for teachers, some Members have enquired whether the Government would consider digitalizing the administrative procedures, such as the distribution of electronic forms to schools to enable parents to apply for in-school vaccination through an online platform.

23. According to the Administration, DH has a strong advocate for digitalization and has been actively assisting the Health Bureau in implementing the Electronic Health Record Sharing System ("eHealth"). In the 2023-2024 school year, registration consent forms for eHealth were distributed together with that for seasonal influenza vaccination at schools. Students could then sign up for eHealth in one go and start building up an electronic health record from an early age. Members of the public could store and access the vaccination record of various government vaccination programmes via the eHealth mobile application, saving the trouble of handling paper records.

Relevant papers

24. A list of the relevant papers on the LegCo website is in the **Appendix**.

Recent developments

25. At the Panel meeting on 10 May 2024, a concern was raised about a number of deaths of children from influenza recorded in the past month and the lack of a convenient channel (other than making telephone enquiries to individual clinics) to inform the public about the availability of vaccines at individual clinics. As such, the Panel agreed to discuss at its meeting on 14 June 2024 the latest situation of seasonal influenza and response measures.

Seasonal influenza and response measures

List of relevant papers

Committee	Date of meeting	Paper
Panel on Health Services	13 October 2023	Agenda Item III: Preparation for winter surge Minutes
Finance Committee	17 April 2024	Administration's written replies to Members' initial questions on the Estimates of Expenditure 2024-2025 (Reply serial numbers: HHB 210, 239, 277 and 299)

Council meeting	Paper
15 November 2023	Question 19 : Seasonal influenza vaccination
17 January 2024	Question 6 : Measures to cope with the peak period of respiratory tract infections
5 June 2024	Question 3 : Seasonal Influenza

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