



Strategy and Management of Human Swine Influenza A H1N1 – Update

Department of Health

Last updated: 25 May 2010



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Department of Health

Outline

- ❖ Background
- ❖ The Disease
- ❖ Risk Assessment
- ❖ Public Health Strategies
- ❖ Health Advice for the Public



Background

- ❖ It was first reported to the World Health Organisation (WHO) on 24 April 2009 that a novel human swine influenza (Influenza A/H1N1) virus had infected humans in United States and Mexico. The WHO considered this outbreak as a public health emergency of international concern on 25 April 2009
- ❖ The human swine influenza (Influenza A/H1N1) viruses characterized in this outbreak have not been previously detected in humans
- ❖ On 30 April 2009 (Hong Kong time), WHO raised the alert level for influenza pandemic to Phase 5, signifying that a global pandemic is imminent
- ❖ On 1 May 2009, HK activated the “emergency” response level after the first confirmed case

The Disease

❖ Agent

☞ The Human Swine Influenza A/H1N1 infection is caused by a new virus containing genetic components of avian flu, human flu and swine flu

The Disease

❖ Clinical features

- ❧ Similar to seasonal flu i.e. fever, cough, sore throat and runny nose, muscle pain and headache
- ❧ Some may have nausea, vomiting and diarrhea

❖ Mode of transmission:

- ❧ Human-to-human
- ❧ By droplet, e.g. through coughing or sneezing of infected people
- ❧ By touching objects soiled with the virus and then touching mouth, nose or eyes

Risk Assessment

- ❖ HSI activity in HK has been steadily declining since its peak in September 2009 and has stayed low even during the recent winter flu season in March 2010
- ❖ The clinical severity of HSI has not changed during the past year
- ❖ Latest local situation available at <http://www.chp.gov.hk>
- ❖ Latest global situation available at <http://www.who.int/csr/disease/swineflu/en/index.html>

Public Health Strategies

- ❖ The Government has lowered the influenza response level under the Framework of Government's Preparedness Plan for Influenza Pandemic from “emergency” to “alert” response level from 24 May 2010
- ❖ Government and public hospital activities will gradually revert to a scale appropriate for the alert response level including:
 - ⌘ reversion of designated flu clinics to general outpatient clinics
 - ⌘ normalisation of infection control practices and services in hospitals and clinics, including visiting hours of hospitals
 - ⌘ updating of messages and information for the public and relevant stakeholders

Public Health Strategies

- ❖ Despite response activities are being scaled down, we will continue with our influenza surveillance and the HSI vaccination programme

Vaccination Strategy

- ❖ The Scientific Committees of CHP have recommended the following target groups to receive HSI vaccination:
 - (a) healthcare workers
 - (b) persons with chronic illnesses and pregnant women
 - (c) children between the age of 6 months and less than 6 years
 - (d) elderly persons aged 65 years or above
 - (e) pig farmers and pig-slaughtering industry personnel

Health Advice for the Public

- ❖ The public are advised to stay vigilant and maintain good personal and environmental hygiene habits including
 - ☞ wash hands frequently particularly after sneezing or coughing
 - ☞ maintain good indoor ventilation
 - ☞ build up good body immunity by having a balanced diet, regular exercise and adequate rest, and avoid smoking

End of Presentation

Thank you

