

本署檔號 Our Ref. : (124) in DH SEB CD/8/27/1 Pt.19

June 11, 2015

Dear Doctor,

**Hong Kong Enters Summer Influenza Season**

We would like to inform you that the local activity of seasonal influenza has continued to increase in the past few weeks, signaling the arrival of the summer influenza season. Among the respiratory specimens received by the Public Health Laboratory Services Branch (PHLSB) of the Centre for Health Protection (CHP), the percentage tested positive for influenza viruses rose from 6.32% in the week ending May 9 to 9.69% and 14.8% in the past two weeks. The circulating influenza viruses among positive influenza virus detections in the last week include influenza A(H3N2) (78.1%), B (21.3%) and C (0.6%).

Besides, the admission rates in public hospitals with principal discharge diagnosis of influenza have started to increase in the past few weeks. The rate among children aged below 5 years has increased from 0.42 (admissions per 10,000 population in the age group) in the week ending May 16 to 1.21 in the last week. The rate among elderly aged 65 years or above has increased from 0.47 to 1.06 in the corresponding period.

To monitor the influenza activity and the severity of influenza infections, the CHP will collaborate with the Hospital Authority (HA) and private hospitals to reactivate the enhanced surveillance system for monitoring influenza-associated intensive care unit (ICU) admissions and deaths starting on June 12, 2015. During the period between June 12 and July 31, 2015 (i.e., a total of eight weeks), **private doctors** should report patients aged 18 years or above requiring ICU admission or died AND with any positive laboratory results of influenza infection to the CHP through the infection control officer, infection control nurse or designated responsible officer in the respective hospital. For patients admitted to HA hospitals, the CHP will collaborate with the HA Head Office to exchange the data on ICU



admissions and/or deaths with laboratory confirmation of influenza infection.

The CHP will review the situation at the end of this period to see if this enhanced surveillance needs to be extended. We will then inform HA and private hospitals accordingly.

In addition, private doctors and HA doctors are reminded to continue to report any paediatric patients (aged below 18 years) who fulfill the reporting criteria for *severe paediatric influenza-associated with complication/death* to the Central Notification Office (CENO) of CHP by fax (2477 2770), by phone (2477 2772), or via CENO On-line website (<http://www.chp.gov.hk/ceno>). Please refer to Appendix for the reporting criteria. Outbreaks of respiratory illnesses occurring in institutional settings should also be reported to CENO for prompt epidemiological investigations and implementation of control measures. Please call our Medical Control Officer (pager: 7116 3300 call 9179) during non-office hours. The forms are available on the CENO On-line website.

The latest surveillance data on influenza and severe cases are published in the “*Flu Express*”, a weekly report available on the CHP website ([http://www.chp.gov.hk/en/guideline1\\_year/29/134/441/304.html](http://www.chp.gov.hk/en/guideline1_year/29/134/441/304.html)). You may wish to find further information on influenza from the following link: [http://www.chp.gov.hk/en/view\\_content/14843.html](http://www.chp.gov.hk/en/view_content/14843.html). May I take this opportunity to thank you for your continuous support in combating infectious disease in Hong Kong.

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'SK Chuang', is written over a light blue circular stamp.

(Dr. SK Chuang)  
for Controller, Centre for Health Protection  
Department of Health

## Appendix

### **Reporting criteria for severe paediatric influenza-associated complication/death**

An individual fulfilling all the following 3 criteria should be reported to the Centre for Health Protection for further investigation:

1. Children <18 years old on date of admission; AND
2. with fever and respiratory symptoms; AND
3. one of the following complications:
  - severe pneumonia (requiring admission to intensive care unit or assisted ventilation);  
OR
  - sepsis; OR
  - shock; OR
  - encephalopathy; OR
  - myocarditis; OR
  - death.