

本署檔號    Our Ref.    : (111) in DH SEB CD/8/16/1/2 III

9 July 2015

Dear Doctor,

**Second local case of Japanese encephalitis**

The Centre for Health Protection (CHP) of the Department of Health writes to alert you to a local case of Japanese encephalitis (JE) confirmed on 9 July 2015. The patient is a 55-year-old man living in Sha Tau Kok, North District. He developed fever, drowsiness, vomiting and slurring of speech on 4 July 2015. He attended the Accident and Emergency Department of North District Hospital (NDH) on 6 July 2015 and was admitted to medical ward of NDH the same day. Cerebrospinal fluid (CSF) specimen collected on 7 July was tested positive for JE IgM. The serum specimen collected on 9 July was tested positive for JE IgM. The clinical diagnosis was meningoencephalitis. There was no travel history outside Hong Kong during the incubation period. According to the information from Agriculture, Fisheries and Conservation Department, there is no pig farm within two kilometres of the residence of the patient. As of today, he is in serious condition. This is the second local JE case recorded in 2015. The first case was recorded on 30 June 2015 living in Kwai Tsing and so far no epidemiological linkage has been found between these two cases.

JE is a viral disease transmitted by the bite of infective mosquitoes. The principal type of mosquito that transmits the disease is called *Culex tritaeniorhynchus* which breeds in water-logged fields, surface drainage channels, ponds, disused large water containers and sand pits. The mosquitoes become infected by feeding on pigs and wild birds infected with JE virus. Besides being widely distributed in rural areas, the vectors have also been found in urban areas in Hong Kong. The disease is not directly transmitted from person to person.

The incubation period of JE is usually 4 to 14 days. The disease may begin with non-specific prodromal symptoms lasting several days, followed by acute onset of high fever, severe headache, vomiting, photophobia, drowsiness, meningism and convulsion. Many infections are asymptomatic, but the case-fatality rate among those



with encephalitis can be as high as 30%. Permanent neurologic or psychiatric sequelae can occur in 30%–50% of those with encephalitis. To prevent contracting the disease, one should take general measures to prevent mosquito bites. For more information on JE, please visit our website at <http://www.chp.gov.hk>.

If you encounter patients with signs and symptoms suggestive of JE, please inform the Central Notification Office (CENO) of the CHP (Telephone: 2477 2772, Fax: 2477 2770) or CENO On-line at <http://www.chp.gov.hk/ceno>.

Please draw the attention of the healthcare professionals and supporting staff in your institution/ working with you to the above. Thank you for your unfailing support in prevention and control of communicable diseases.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'S.K. Chuang', written in a cursive style.

(Dr. S.K. CHUANG)

for Controller, Centre for Health Protection  
Department of Health