



Surveillance  
And  
Epidemiology  
Branch

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8 January 2014

Dear Medical Superintendent of private hospital,

### **Vigilance against acute gastroenteritis**

I would like to draw your attention to the prevention of acute gastroenteritis in your hospital as we are entering into the traditional peak season of the disease.

The Centre for Health Protection (CHP) recorded 5 institutional outbreaks of acute gastroenteritis in week ending 4 January 2014 as compared with one outbreak each in the past three weeks (8 - 28 December 2013). The communicable diseases surveillance system based at the Accident & Emergency Departments of public hospitals showed an increasing trend in consultation rate of the acute gastroenteritis syndrome group. The consultation rate increased from 121.8 (per 1000 cases) in the week ending 28 December 2013 to 127.7 (per 1000 cases) in the week ending 4 January 2014. Besides, the sentinel surveillance system based at childcare centres and kindergartens (CCC/KG) also showed a recent increase in the activity of diarrhoea. The percentage of CCC/KG with children affected by diarrhoea increased from 10.9 in the week ending 29 November 2013 to 16.1 in the week ending 20 December 2013. Meanwhile a gradual increase in AGE activity is observed for the weekly consultation rates of acute diarrhoeal diseases (ADD) based at sentinel General Out-patient Clinics (GOPCs). From the week ending 30 November 2013 to 4 January 2014, the consultation rate of ADD based at sentinel GOPCs increased from 2.2 to 3.8 (per 1000 consultations).



Acute gastroenteritis is usually caused by norovirus or rotavirus infection. It is highly contagious and can be transmitted by consumption of contaminated food, contact with the vomitus or excreta of the infected persons, contaminated objects and aerosol spread with contaminated droplets of splashed vomitus. Symptoms include nausea, vomiting, diarrhoea, abdominal pain, fever and malaise. Although infections are usually mild and self-limiting, they are highly infectious and may result in outbreaks that are difficult to control. It is a frequent cause of outbreaks in institutions. Such outbreaks may occur throughout the year but are known to occur more frequently in winter months.

We would like to seek your assistance in advising your staff and patients to take precautions against viral gastroenteritis. In particular,

1. Apply standard and contact precautions for suspected cases. Put on gloves, gown, surgical mask, eye protection during close contact with patients or when handling potentially contaminated articles;
2. Practice scrupulous hand hygiene. After gloves are removed, hands should be routinely washed with soap and water, or disinfected with alcohol hand rub if not visibly soiled;
3. Isolate or cohort suspected cases until symptoms have subsided for 48 hours;
4. Clean and disinfect contaminated areas or items promptly and thoroughly with 1 in 49 diluted household bleach (by adding 1 part of household bleach containing 5.25% sodium hypochlorite to 49 parts of water);
5. Educate patients on personal hygiene and hand hygiene, e.g. wash hands thoroughly using liquid soap before meals and after using the toilet.

Staff who present with vomiting or diarrhoea and may be epidemiologically linked to an outbreak should be advised to refrain from work until 48 hours after recovery. If you notice an increase in the number of patients or staff of your hospital with symptoms of viral gastroenteritis, please report to the Central Notification Office of CHP as soon as possible via fax (2477 2770) or phone (2477 2772) during office hours, or call our Medical Control Officer (pager: 7116 3300 call 9179) outside office hours. CHP will provide advice in the management of such cases and control measures.

Yours faithfully,



(Dr SK CHUANG)

for Controller, Centre for Health Protection  
Department of Health