

本署檔號 Our Ref. : (74) in DH SEB CD/8/97/1 Pt.4

11 March 2016

Dear Medical Superintendent,

The Government Activates the Alert Response Level of the Preparedness and Response Plan for Zika Virus Infection

I write to inform you that today the Government has launched the ***Preparedness and Response Plan for Zika Virus Infection*** (the Plan). The Plan aims to provide a framework of response system for agreed and coordinated efforts among relevant government departments and organisations with a view to reducing the public health impact on Hong Kong population due to Zika virus infection (ZVI). It adopts a three-tier response level system, including Alert, Serious and Emergency, with each level representing a graded risk of Zika virus affecting Hong Kong and its health impact on the community. It defines corresponding command structures and public health response measures, and serves as a tool for clear communication of the level of risk to the public. According to the risk assessment of the latest situation of ZVI, the “Alert” response level has been activated today.

Moreover, I would like to take this opportunity to provide you with updates on the latest situation of ZVI. According to the World Health Organization (WHO), an increasing number of countries and territories have reported cases of ZVI. As of 10 March 2016, a total of 52 countries and territories have reported autochthonous (local) transmission or indication of transmission of Zika virus since 2007, of which 41 countries and territories have been involved since 2015 while five countries and territories had reported a Zika virus outbreak that is now over. In addition, three countries (France, Italy and the United States) have reported locally acquired infection in the absence of any known mosquito vectors, probably through sexual transmission. In Mainland China, 12 imported cases have been confirmed so far. Please refer to the following webpage for latest information on the affected areas:

http://www.chp.gov.hk/en/view_content/43209.html.

The suspected association of ZVI with microcephaly and other neurological disorders is of public health concern. An increase in microcephaly cases and other



neonatal malformations have been reported in Brazil and French Polynesia whereas nine countries and territories, namely Brazil, Colombia, El Salvador, French Polynesia, Martinique, Panama, Puerto Rico, Suriname and Venezuela, have reported an increased incidence of Guillain-Barré syndrome (GBS) and/or laboratory confirmation of ZVI among GBS cases.

A recently published cohort study in Brazil shows an increased risk of microcephaly and other congenital abnormalities associated with ZVI during pregnancy and provides further information to support the possible causal relationship between ZVI and microcephaly and other congenital abnormalities.¹ According to WHO, Zika virus is not yet proven to be a cause of the increased incidence of microcephaly in Brazil so far. However, given the temporal and geographical associations between ZVI and microcephaly, the repeated discovery of virus in fetal brain tissue, and in the absence of a compelling alternative hypothesis, a causal role for Zika virus is a strong possibility which is under active investigation. Similarly, Zika virus is yet to be proved to be the cause of the increased GBS incidence in Brazil, Colombia, El Salvador, Suriname or Venezuela, though strongly suspected given the recent findings in French Polynesia. Further investigations are needed to identify the potential role of other factors known to be associated, or potentially associated, with GBS.

In the second meeting of the Emergency Committee on Zika virus convened on 8 March 2016, the Committee advised that the clusters of microcephaly cases and other neurological disorders continue to constitute a Public Health Emergency of International Concern, and that there is increasing evidence for a causal relationship with Zika virus. Regarding clinical care, it recommended that pregnant women who have been exposed to Zika virus should be counselled and followed for birth outcomes based on the best available information and national practice and policies. Please refer to the following webpage for the full recommendations by the Committee:

<http://www.who.int/mediacentre/news/statements/2016/2nd-emergency-committee-zika/en>.

Due to extensive international travel, Hong Kong has a high risk of importation of cases of ZVI. As asymptomatic infection is very common and the potential vector, *Aedes albopictus*, is present locally, there is also risk of local spread if Zika is introduced to Hong Kong. To prevent the disease, prevention of mosquito proliferation and mosquito bites among at-risk individuals, especially pregnant women, are the two major preventive measures in the absence of a vaccine. Please refer to the Centre for Health Protection (CHP)'s mini website (http://www.chp.gov.hk/en/view_content/43086.html) for updated information and detailed health advice on ZVI.

¹ Brasil P, Pereira JP Jr, Raja Gabaglia C, et al. Zika Virus Infection in Pregnant Women in Rio de Janeiro - Preliminary Report. N Engl J Med. 2016 Mar 4. [Epub ahead of print]

For travellers returning from affected areas and presenting with symptoms compatible with ZVI (such as fever, rash and conjunctivitis) which cannot be explained by dengue fever, chikungunya fever or other medical condition(s), doctors are advised to consider further investigations of ZVI. Laboratory tests for ZVI can be arranged with the Public Health Laboratory Services Branch (PHLSB) for a clinically suspected case upon consultation with PHLSB. ZVI has become a notifiable disease with effect from 5 February 2016. Doctors should report **confirmed** cases immediately to the Central Notification Office (CENO) of CHP via fax (2477 2770) using the reporting form, phone (2477 2772) or CENO On-line (https://cdis.chp.gov.hk/CDIS_CENO_ONLINE/ceno.html). If doctors report any case outside office hours, they should call our Medical Control Officer at 7116 3300 a/c 9179 for prompt investigation.

Please draw the attention of the healthcare professionals and supporting staff in your institution/ working with you to the above. Thank you for your continuous support in combating infectious diseases.

Yours faithfully,

A handwritten signature in red ink, appearing to read 'SK CHUANG', is positioned above the printed name.

(Dr. SK CHUANG)

for Controller, Centre for Health Protection
Department of Health