

本署檔號 **Our Ref.** : (5) in DH SEB CD/8/95/1

11 July 2016

Dear Medical Superintendent,

**Rise in hospital admission due to *Mycoplasma pneumoniae* infection in
Hong Kong**

We would like to alert you that the Centre for Health Protection (CHP) has noted a rise in hospital admission due to *Mycoplasma pneumoniae* infection recently. In the past, cyclical high activity of *M. pneumoniae* has been recorded every few years in Hong Kong, with the last periods of high activity occurring in 2005-2006 and 2010.

The weekly number of hospital admissions in public hospitals with diagnosis of Mycoplasma infection has increased from a range of 47 - 69 cases in May 2016 to 68 - 91 cases in June. This corresponds to hospitalisation rates (admissions per 100,000 population) of 0.64 ó 0.94 in May and 0.93 ó 1.25 in June. In the first four months of 2016, the weekly number of hospital admission with diagnosis of Mycoplasma infection ranged from 18 to 50. Among the hospital admissions recorded in May and June 2016, 96.2% were aged below 20 years (25.5% aged 0 - 4 years, 47.7% aged 5 - 9 years and 23.0% aged 10 - 19 years). Only 3.5% and 0.4% of the cases affected adults aged 20 - 64 years and elderly aged 65 years or above respectively.

Infections caused by *M. pneumoniae* usually manifest as a respiratory illness, including pneumonia. *M. pneumoniae* is transmitted through contact with droplets from the nose and throat of infected people especially when they cough and sneeze. Transmission may result in spread in families, schools or institutions. Children and young adults are mostly affected. The highest rate of infection is in individuals aged below 20 years.



The incubation period is about three weeks (range: 1 ó 4 weeks). Onset is

gradual and common symptoms include fever, malaise, headache, chills, dry cough and sore throat. The majority of patients present with upper respiratory tract infection and they usually recover fully. About 5 - 10% of the patients may develop pneumonia which is usually mild and rarely requires hospitalisation. It is recognised as one of the most common causes of community-acquired pneumonia in otherwise healthy patients younger than 40 years. The pneumonia often resolves without any serious complications. Mild cases may resolve spontaneously without specific treatment while targeted antibiotic therapy is required for more serious infections, especially those with pneumonia. As macrolides may be used to treat *M. pneumoniae* infection in children in normal circumstances, clinicians should note that around 40% of the *M. pneumoniae* detections from respiratory specimens tested by CHPO's Public Health Laboratory Services Branch in the first five months of 2016 were found to be resistant to macrolide. Vigilance is required because serious complications may potentially occur in paediatric cases with macrolide-resistant *M. pneumoniae*.

There is no vaccine against *M. pneumoniae*. As with any respiratory disease, good personal hygiene and infection control practices can effectively prevent transmission of *M. pneumoniae*. We would like to solicit your assistance to remind members of the public to take the following measures to prevent respiratory infections:

- To build up good body immunity by having a proper diet, regular exercise and adequate rest, reducing stress and avoiding smoking;
- To maintain good personal hygiene, such as:
 - Keep hands clean and wash hands properly.
 - Wash hands with liquid soap promptly if they are contaminated by respiratory tract secretions, e.g., after sneezing or coughing.
 - Cover nose and mouth when sneezing or coughing.
 - Always wrap nasal and mouth discharges with tissue paper, and dispose of the tissue paper properly in a lidded rubbish bin.
 - Wear mask when symptoms of respiratory tract infection or fever develop, refrain from work or school and seek medical advice promptly; and
- To maintain good ventilation of indoor areas and avoid visiting crowded places with poor ventilation.

The CHP will continue to monitor the situation. You are also reminded to report outbreaks of respiratory illnesses occurring in institutional settings to our Central Notification Office (Tel: 2477-2772; Fax: 2477-2770; CENO On-line at https://cdis.chp.gov.hk/CDIS_CENO_ONLINE/ceno.html) for prompt epidemiological investigations and control measures.

Yours faithfully,

A handwritten signature in dark ink, appearing to be 'SK Chuang', written in a cursive style.

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