

本署檔號    Our Ref.    : (2) in DH SEB CD/8/16/1/2 Pt. 5

5 August 2017

Dear Medical Superintendent,

**Fourth local case of Japanese encephalitis in 2017**

The Centre for Health Protection (CHP) of the Department of Health writes to alert you the fourth local case of Japanese encephalitis (JE) recorded in 2017. The patient is a 59-year-old man with underlying illnesses and lives in Tin Shui (II) Estate in Tin Shui Wai. According to the attending physician, he has developed fever, headache, neck stiffness and vomiting since 30 July 2017. He attended the Accident and Emergency Department of Tin Shui Wai Hospital on 31 July and was admitted to Pok Oi Hospital for management. The clinical diagnosis was viral encephalitis. His cerebrospinal fluid specimen collected on 1 August and blood specimen collected on 2 August were tested positive for IgM antibodies against JE virus. He is now in stable condition. He had no travel history outside Hong Kong during the incubation period. According to information from the Agriculture, Fisheries and Conservation Department, there is one pig farm within two kilometres of the residence of the patient.

There is a total of four local cases of JE recorded in 2017 so far. Three of the cases were mosquito-borne and one blood-borne. Epidemiological investigation revealed that this patient lives in the same vicinity of previous case reported on 30 June who resided in Tin Shui (I) Estate as well as Kingswood Villas where the blood donor related to the first local blood-borne case reported on 20 July lives.

JE is a viral disease principally 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. Most JE infections are mild, with symptoms such as fever and headache or without apparent symptoms, but approximately 1 in 250 infections results in severe clinical illness. More severe infection is marked by quick onset of headache, high fever, neck stiffness, impaired mental state, coma, tremors, convulsions (especially in children) and paralysis. The case-fatality rate can be as high as 30% among those with symptoms. Of those who survive, 20%–30% suffer permanent intellectual, behavioural or neurological problems such as paralysis, recurrent seizures or inability to speak. 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/en/content/9/24/28.html>.

If you encounter patients with signs and symptoms suggestive of JE, please report to the Central Notification Office (CENO) of CHP via fax (2477 2770), phone (2477 2772) or CENO On-line ([https://cdis.chp.gov.hk/CDIS\\_CENO\\_ONLINE/ceno.html](https://cdis.chp.gov.hk/CDIS_CENO_ONLINE/ceno.html)).

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 be 'Yonnie LAM', with a horizontal line extending to the right.

(Dr. Yonnie LAM)

for Controller, Centre for Health Protection  
Department of Health