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Dr Henry Ng



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近月香港持續受到季節性流感、登革熱、中東呼吸綜合症等傳染病的威脅,但 大家同時亦不可忽略對非傳染病的防範, 尤其癌症是香港的頭號殺手。本期專題介 紹衞生署新一輪癌症預防和篩查的健康教 育推廣活動,希望提高市民預防癌疾的意 識,明白透過篩查、及早診斷,以接受更 有效的治療。

Despite the fact that Hong Kong continues to face the challenge of communicable diseases recently including influenza, dengue fever, Middle East Respiratory Syndrome, etc., we must not forget the threat of noncommunicable diseases. Amongst them, cancer remains the top killer in Hong Kong. In this issue, you will be introduced to the Department of Health's new health promotion campaign on cancer prevention and screening, which aims to raise public awareness on the prevention of cancer by screening, early detection and effective treatment.

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# 預防癌症宣傳教育運動 已經展開

Publicity Campaign on Cancer Prevention Launched

「正義聰明的防癌隊長帶領着健康聯盟,致力向地球人傳達防癌保健訊息。」

衛生署於2015年4月22日聯同學術界、醫學界及非政府組織召開記者會,展開新一輪推廣預防癌症的宣傳教育運動,以提高市民的第一級和第二級防癌意識,並為最快於2016年年中推出的「大腸癌節查先導計劃」作好準備。該記者會又介紹了衛生防護中心為宣傳預防癌症而設計的七個角色 - 「健康聯盟」。

'Being led by the righteous and smart Captain Anti-Cancer, the Healthy League strives to disseminate health-related cancer prevention messages to people on Earth.'

The Department of Health (DH), in collaboration with the academia, medical professionals and non-governmental organisations, launched a new publicity campaign on cancer prevention at a press conference held on 22 April 2015. The campaign aims to raise public awareness on primary and secondary prevention of cancer, as well as in preparation for the roll-out of the Colorectal Cancer (CRC) Screening Pilot Programme by mid-2016 the earliest. The press conference also featured the 'Healthy League', the seven mascots created by the Centre for Health Protection (CHP) to promote cancer prevention.



## 最少三成癌症死亡個案均可預防 At Least One Third of Cancer Deaths could be Prevented

全球及本港的癌症負擔正在增加,根據世界衞生組織(世衞),2012年全球共有1,400萬宗癌症發病個案及820萬宗與癌症相關的死亡個案。在香港,2013年共有13,589人因癌症死亡,佔全年登記死亡個案約三分之一。二零一二年本港五大主要的新確診癌症個案分別為肺癌、大腸癌、

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The cancer burden is increasing both globally and locally. According to the World Health Organization (WHO), there were 14 million new cancer cases and 8.2 million cancer-related deaths in 2012 worldwide. In Hong Kong, cancer accounted for 13,589 cases, about one-third of registered deaths in 2013. In 2012, the five major newly-diagnosed cancer cases were lung, colorectal, breast, liver



乳癌、肝癌及前列腺癌,而主要致命的癌症則為肺癌、大腸癌、 肝癌、胃癌及乳癌。

預防癌症可分為第一級和第二級癌症預防。

and prostate cancers, while the leading causes of cancer deaths were lung, colorectal, liver, stomach and breast cancers.

Cancer prevention includes primary and secondary prevention of cancer.

## 第一級癌症預防 - 健康生活

## Primary Prevention of Cancer through Adopting a Healthy Lifestyle

第一級預防是指藉着改變或避免主要風險因素來達致防癌的方法。超過30%的癌症死亡個案是可透過奉行健康生活模式來預防,例如多吃蔬果、少食紅肉及加工肉類、定時運動、避免煙酒等。

衛生防護中心早前進行的「二零一四年行為風險因素調查」顯示,在隨機抽樣訪問的18至64歲人士當中,81%的受訪者進食水果和蔬菜不足,39%的體重指數為23或以上,即超重或肥胖,另有62.5%的體能活動不足。煙酒方面,6.8%的被訪者曾經暴飲,即在過去一個月內最少一次過喝掉5杯/罐酒精飲品,10%每日吸煙1枝或以上。故此,各界仍須努力,做好第一級癌症預防。

Primary cancer prevention refers to cancer prevention through modifying or avoiding major risk factors. More than 30% of cancer deaths can be prevented by adopting a healthy lifestyle, such as eating more fruit and vegetables with less red meat and processed meat, exercising regularly, avoiding alcohol and refraining from smoking.

Behavioural Risk Factor Survey 2014 conducted by the CHP found that, among randomly sampled people aged 18 to 64, 81% of the respondents did not consume adequate fruit and vegetables, 39% had a Body Mass Index of 23 or above (i.e. overweight or obese), and 62.5% did not have an adequate amount of physical activity. Turning to alcohol and tobacco, it was found that 6.8% had binge drinking, that is drinking at least five glasses or cans of alcoholic drinks on one occasion over the past one month, and 10% were daily smokers of one or more cigarettes. All sectors hence need to do more for primary cancer prevention.

### 第一級和第二級癌症預防 Primary and Secondary Level of Prevention of Cancer

#### 第一級癌症預防包括:

- 實踐健康生活模式(包括不吸煙、不飲酒、多進行體能活動、 保持均衡飲食、維持適中體重及腰圍,和進行安全性行為);
- 接種疫苗預防感染(例如乙型肝炎病毒和人類乳頭瘤病毒); 以及
- 其他促進健康的行為(例如接受適量陽光照射但避免過度曝 曬、遵從職業安全及健康規定、女性於較年輕時生育,和延長 母乳餵哺期)。

#### 第二級癌症預防包括:

- 及早發現癌症;以及
- 篩查。

#### **Primary Prevention of Cancer involves:**

- adoption of a healthy lifestyle (including no smoking, no drinking, maintaining physical activeness, having a balanced diet, maintaining an optimal weight and waist circumference, and practising safe sex);
- vaccination against infections (such as hepatitis B virus and human papillomavirus); and
- other health promoting practices (such as having optimal sunlight exposure without excessive exposure, observing occupational safety and health rules, having childbirth at an earlier age and breastfeeding each child for a longer duration).

#### Secondary prevention of cancer includes:

- · early detection; and
- screening.

## 第二級癌症預防及篩查

## Secondary Prevention and Screening

第二級癌症預防是指透過及早發現和篩查,在徵狀出現前或疾病初期發現癌症,從而及早診斷和提供有效治療,以及預防病情惡化。

不過並非所有人均適合進行篩查,亦不是所有癌症都有合適的 測試。所有篩查測試都有局限,並不是百分百準確,亦會出現假 陽性和假陰性結果。假陽性結果是指實際上沒有癌症,但測試結 果卻錯誤地顯示患上癌症。這樣會引起不必要的焦慮,並促使接 受測試的人士進行潛在風險更高的檢查或治療。假陰性結果是指 實際上有癌症,但測試結果卻錯誤地顯示沒有患上癌症,這樣可 令患者誤以為沒有患病而延誤診斷和治療。 Secondary prevention of cancer includes early detection and screening to pick up cancer before signs or symptoms appear, or at early stages. Such prevention is important for early diagnosis, early and more effective treatment, and preventing illness progression.

However, screening may not be suitable for everyone and every cancer case. All screening tests have limitations and are not 100% accurate. There are false-positive and false-negative results. A false-positive result is a wrong indication of the presence of cancer despite that it does not exist. This may cause unnecessary anxiety and potentially risky investigations or treatment. On the other hand, a false-negative result indicates the failure of a screening test to detect an existing cancer. This can lead to false reassurance, hence delay in diagnosis and medical care.



此外,不是所有癌症篩查測試都是有幫助的,篩查對於生長快 速或已擴散的癌症未必有用。對一些生長緩慢的癌症,則可能會 引致過度診斷和過度治療的問題。

市民在考慮癌症篩查時,應徵詢醫生的意見,接受評估,多了 解篩查的好處和風險,從而作出知情的選擇。 Furthermore, not all cancer screening tests are helpful. Screening may not help if cancers are fast-growing or have already spread. For some slow-growing cancers, there are concerns of over-diagnosis and over-treatment.

Individuals considering cancer screening should consult a doctor for assessment and understand more on benefits and risks of screening to make an informed choice.

## 大腸癌篩查先導計劃即將推出

## CRC Screening Pilot Programme Expected to be Launched Shortly

另一方面,以人口為基礎的篩查是指政府在一大群沒有症狀 (表面看來健康)的人口中有系統地進行簡單測試,從而識別已 患癌或患癌風險較高的人士,以便及早安排適當治療。以人口為 基礎的篩查必須以事實、科學證據和公眾利益為基礎。政府須審 慎考慮和評估一系列本地因素,來判斷該篩查對社會而言是否利 多於弊。

自2004年3月8日起,衞生署透過與醫護專業人員合作,在全港推行「子宮頸普查計劃」,鼓勵全港25至64歲曾有性經驗的婦女定期接受子宮頸細胞檢驗。

此外,為應對本港日益增加的大腸癌疾病負擔,政府正籌劃最快將於2016年中推出「大腸癌篩查先導計劃」,在基層醫療和公私營協作下,政府將資助特定年齡組別人士接受兩層篩查程序。如接受篩查人士的大便隱血測試呈陽性,將獲轉介進行大腸鏡檢查。

#### 「健康聯盟 防癌有你」

為配合防癌宣傳活動,衞生防護中心設計了「健康聯盟」 七個角色,包括「防癌隊長」、「牙擦盾」、「小飛盾」、 「熱情盾」、「智慧盾」、「大力盾」及「開心盾」,冀以生 動、正面和活潑的手法,透過電視、電台、報紙、雜誌、海 報、網頁及社交網站等不同渠道,向年輕一代推廣和教育防癌 知識。

「防癌隊長」同時與兩位醫學院院長參與拍攝兩套全新的政府宣傳短片,在電視、電台及「預防大腸癌」網站(www.colonscreen.gov.hk/tc/videos)播出。歡迎大家瀏覽「健康聯盟」Facebook專頁(www.fb.com/HealthyLeague),「讚好」及分享至各友好。

此外,「二零一四年行為風險因素調查」摘要已上載衞生防護中心報告及刊物專頁(http://www.chp.gov.hk/files/pdf/brfs\_2014apr\_tc.pdf)。題目為「癌症篩查知多少」的《非傳染病直擊》網上期刊(http://www.chp.gov.hk/files/pdf/ncd\_watch\_apr2015\_chin.pdf)亦已於2015年4月出版。

On the other hand, population-based screening refers to the simple tests systematically offered by a government to a large group of asymptomatic population (people who appear healthy) to identify those with cancer or at higher risk for prompt and appropriate treatment. Population-based screening must be based on facts, scientific evidence and public interest. A number of factors of local significance should be carefully considered to determine whether benefits outweigh any harms for the society.

Currently, the territory-wide Cervical Screening Programme launched by the DH in collaboration with healthcare professionals since 8 March 2004 encourages women aged from 25 to 64 with sexual experience to receive regular cervical screening.

In addition, in response to the increasing burden of CRC in Hong Kong, the Government is planning to launch the CRC Screening Pilot Programme by mid-2016 at the earliest. It will build upon primary care and public-private partnership to subsidise specific age groups for a two-tier screening, initially by faecal immunochemical test (FIT) followed by colonoscopy if the FIT result is positive.

#### 'Let's Prevent Cancer Together with the Healthy League!'

To complement the publicity campaign on cancer prevention, the CHP has designed a group of seven mascots, namely, the 'Healthy League' to provide a vivid, positive and lively way to deliver health messages on cancer prevention: Captain AC (Captain Anti-Cancer), Greenie, Airy, Buddy, Bright, Sporty and Joy. These appealing 'Healthy League' characters will educate the younger generation on cancer prevention via various channels, including television, radio, newspapers, magazines, posters, website and social media.

Captain AC also joins the two Deans of the Faculty of Medicine to feature in two new Announcements in the Public Interest (APIs) premiered at the press conference. The APIs will be broadcast on television and radio as well as the thematic website (www.colonscreen. gov.hk/en/videos). Please visit, 'Like' and share the Healthy League Facebook fan page (www.fb.com/HealthyLeague) and the 'Prevent Colorectal Cancer' website (www.ColonScreen.gov.hk).

The executive summary of the Behavioural Risk Factor Survey 2014 has been uploaded to the CHP's publications webpage (http://www.chp.gov.hk/files/pdf/brfs\_2014apr\_en.pdf), and the article on 'To Screen or Not to Screen for Cancer' was published in April 2015 on the Non-Communicable Diseases Watch webpage (http://

www.chp.gov.hk/files/pdf/ncd\_watch\_apr2015.pdf).





# 世衞西太平洋區域辦事處就終止兒童期肥胖症舉辦首次區域意見聽取會和協商會 WHO Regional Office for the Western Pacific Held First Regional Consultation and Hearings on Ending Childhood Obesity

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衞生署署長陳漢儀醫生在2015年3月24和25日,以終止兒童 期肥胖症委員會委員的身分出席在菲律賓馬尼拉世界衞生組織西 太平洋區域辦事處舉辦的首次區域意見聽取會和協商會。

在3月24日的會議上,委員會聽取了來自區內11個國家及地區 代表對中期報告的看法,與會者亦介紹了各國有關針對兒童肥胖 問題的政策,並討論落實相關政策的促成因素和障礙。而在3月 25日,委員會與一眾非國家代表舉行了非正式意見聽取會,當中 包括區內非政府組織代表與私營機構。他們對中期報告和如何協 力在國家和地區層面上預防兒童肥胖發表意見。 Director of Health, Dr Chan Hon-yee, Constance attended the first regional consultation and hearings at the World Health Organization (WHO) Regional Office for the Western Pacific in Manila, the Philippines on 24 and 25 March 2015 in the capacity of the Commissioner for Ending Childhood Obesity.

On 24 March, the Commission heard country-specific perspectives on the proposed policy options outlined in the Interim Report from 11 countries/areas in the region. Participants presented their national policies related to tackling issues of childhood obesity, and discussed the enablers and barriers to the implementation of the relevant policies. On 25 March, the Commissioners held informal hearings with non-state actors, including regional non-governmental organisation representatives and private sector umbrella organisations, who also provided feedback on the Interim Report and how their sector or entity could contribute to the prevention of childhood obesity at a national and regional level.



陳漢儀醫生向主辦單位送贈了由舉世聞名的漢學家饒宗頤教授於2015年揮毫書就的墨寶。墨寶上寫有「治未病」三個漢字,乃供中華人民共和國香港特別行政區政府贈與世衞西太平洋區域辦事處藝術館而題寫。此語出自中國古醫典籍《黃帝內經·素問》,全句為:「聖人不治已病治未病。」

Dr Chan Hon-yee, Constance presented the calligraphy written in 2015 by Professor Jao Tsung-I, a world-renowned Sinologist, to the organiser. The calligraphy, comprising three Chinese characters '治未病', was specially written as a gift to the Art Gallery at the WHO Regional Office for the Western Pacific by the Government of Hong Kong Special Administrative Region, People's Republic of China. The phrase is contained in *Huangdi Nejing Suwen*, an ancient Chinese medical text. The entire sentence reads: *The sage did not treat those who were already ill, but treated those who were likely to fall ill.* 

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中央健康教育組再度於「開心『果』月」(四月)推廣多吃水果的好習慣。「開心『果』月」和「有『營』食肆」今年首次攜手合作推廣多吃水果,一起鼓勵市民養成進食水果的習慣。啟動典禮已於2015年3月30日舉行,由食物及衞生局局長高永文醫生、衞生署署長陳漢儀醫生及衞生防護中心總監梁挺雄醫生主禮。

高醫生於典禮當日致詞表示:「本學年參加『開心「果」 月』活動的中小學及學前機構總數已超過1,300間,數字再創 新高,而參與的學生人數更超過500,000,成績令人相當鼓 The Central Health Education Unit promoted fruit eating again in April's Joyful Fruit Month. Joyful Fruit Month and EatSmart Restaurants jointly promote fruit eating for the first time this year in order to encourage the public to adopt fruit-eating habit. An opening ceremony, held on 30 March 2015, was officiated by Secretary for Food and Health, Dr Ko Wing-man; Director of Health, Dr Chan Hon-yee, Constance and Controller of the CHP, Dr Leung Ting-hung.

Dr Ko, who spoke at the ceremony, said, 'The total number of secondary, primary and pre-primary institutions participating in the Joyful Fruit Month event in this school year has risen to more than 1,300 and reached a record high. The number of participating students has exceeded 500,000. These achievements were remarkable.'



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# Facebook 專頁和YouTube頻道 CHP Facebook Fan Page and YouTube Channel Launched

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衞生防護中心Facebook專頁(fb.com/CentreforHealthProtection)和YouTube頻道(youtube.com/c/ChpGovHkChannel)已於2015年2月5日開始運作,旨在進一步向市民,特別是年輕一代,傳遞有關促進健康,以及預防和控制疾病的資訊。

我們的Facebook專頁至今已發布了超過320個有關健康飲食、體能活動、冬季流感季節監測數據和預防傳染病的帖子;例如專頁在2015年4月份推出了一系列的「水果帖子」,由2015年4月1日起一連30天,每天發布一個帖子以介紹不同種類水果的營養價值或有趣資料。專頁在2015年7月底已獲得超過3,100個「讚好」。

我們的YouTube頻道亦已上載了接近100條政府電視宣傳短片及影片,為市民提供各種有關健康生活及預防傳染病的資訊。

The CHP has launched a dedicated Facebook Fan Page (fb. com/CentreforHealthProtection) and a YouTube Channel (youtube. com/c/ChpGovHkChannel) on 5 February 2015 with a view to further disseminating information on health promotion as well as disease prevention and control to members of the public, especially the younger generation.

Our Facebook Fan Page has already been issued with over 320 posts about healthy eating, physical activities, surveillance data in winter influenza and prevention of communicable diseases. This Page, for example, has been issued with a series of 'Fruit Posts' in April 2015. For 30 days in a row starting from 1 April 2015, the Page issued a post every day to introduce the nutrition values or fun facts of different types of fruits. The Page already got over 3,100 'Likes' by the end of July 2015.

Nearly 100 television Announcements in the Public Interest and videos have also been uploaded to our YouTube Channel to provide information on healthy lifestyle and prevention of communicable diseases to the public.





中央健康教育組一直致力在校園推廣健康飲食。本年度「健康飲食分享會暨至『營』學校認證計劃頒獎禮2015」已於2015年6月25日舉行,頒獎禮由衞生防護中心監測及流行病學處主任程卓端醫生和教育局副秘書長陳嘉琪博士主禮。

程醫生於典禮致辭時表示:「認證計劃自推出以來,已經有超過230間,即超過全港三分之一的小學參與。當中取得認證資格的學校共有108間,佔參與學校約四成六。在取得認證資格的學校中,更有90間獲最高水平的「至『營』學校」認證資格,成績令人鼓舞。」

The Central Health Education Unit has always been striving to promote healthy eating in schools. A Healthy Eating Forum cum EatSmart School Accreditation Ceremony 2015 was held on 25 June 2015. The ceremony was officiated by Dr Ching Cheuk-tuen, Regina, Head of the Surveillance and Epidemiology Branch of the CHP and Dr Chan Ka-ki, Catherine, Deputy Secretary for Education.

At the ceremony, Dr Ching said, 'A total of more than 230 primary schools, which accounted for over one-third of all primary schools in Hong Kong, had enrolled in the EatSmart School Accreditation Scheme. One hundred and eight schools had attained accreditation, representing about 46 per cent of those enrolled. Of all the accredited schools, 90 achieved the highest honour of EatSmart School. These accomplishments were encouraging.'







# 二零一五年世界免疫周: 「接種疫苗,保護社會,人人有責」

World Immunisation Week 2015: 'Vaccination is everyone's job. Protect your community'

世界衞生組織(世衞)將四月最後一星期訂為「世界免疫周」,每年透過全球和地區的宣傳活動,向不同年齡的人士推廣接種疫苗,以防感染相關疾病。為響應今年世衞西太平洋區域的主題「接種疫苗,保護社會,人人有責」,衞生防護中心於2015年4月24日舉行了一次記者招待會,呼籲市民加強免疫接種,以預防麻疹和其他疾病。

出席記者會的衞生防 護中心總監梁挺雄醫生、 確認全港消滅脊髓灰質 炎野株病毒委員會主席劉 宇隆教授和衞生防護中心 社會醫學顧問醫生(傳染 病)張竹君醫生均強調免疫 接種有效減低疾病發病率、 殘疾和死亡,對公共衞生有

重大影響,同時亦呼籲家長、旅客和市民注意以下預防措施, 保障兒童、家庭和社會健康:

- 為自己接種合適疫苗;
- 依時為子女接種疫苗;
- 安排外籍家庭傭工接種合適疫苗;及
- 外遊前留意旅遊地區疫情及注射合適疫苗。

World Health Organization (WHO) designated the last week of April as the World Immunisation Week (WIW). It takes place annually as a global and regional campaign to promote the use of vaccines to protect people of all ages against diseases. To echo the theme of the WHO Western Pacific Region for this year 'Vaccination is everyone's job. Protect your community', the CHP held a press conference on 24 April 2015 to call on members of the public to get vaccinated against measles

and other diseases.

Attending the press conference, Controller of the CHP, Dr Leung Ting-hung, Chairman of the National Committee for the Certification of Wild Poliovirus Eradication in Hong Kong Professor Lau Yu-lung, and Consultant Community Medicine (Communicable Disease) of the CHP, Dr Chuang Shuk-kwan, stressed the importance of immunisation to public health in reducing disease incidence, disabilities and deaths, and urged parents, travellers and members of the public to take preventive measures below to protect

children, families and communities:

- · Vaccinate yourself if necessary;
- Vaccinate your child on time;
- Arrange vaccination for your foreign domestic helpers if necessary; and
- Make sure your vaccinations are up-to-date when travelling abroad.

9





結核病(俗稱肺癆病)至今仍是世上其中一種對公衆衞生有 重大影響的傳染病。衞生署轄下的胸肺科診所為結核病病人提供 診治,並積極執行由世界衞生組織及國際防癆聯監推薦為最有效 控制結核病的「全監督治療」。 結核病病人須在醫護人員監督 下服用抗結核藥物,以防止治療失敗和產生耐藥性結核病。

每年的3月24日為「世界防癆日」,目的是希望提高市民大眾對結核病的警覺和抗癆工作的認識。今年「世界防癆日」的主題為「防癆服務齊響應,一起攜手齊參與」。為期兩日的開幕典體暨健康展覽於2015年3月21日及22日進行。活動包括有「防癆填詞創作比賽」、防癆展板及攤位遊戲,現場有醫護人員當值作即時解答及回應市民查詢。醫護人員亦會應邀到全港各中小學進行健康講座,藉以提高老師及學生對結核病的認識和預防。「世界防癆日」活動合辦單位為香港防癆心臟及胸病協會、衞生署及醫院管理局。



Tuberculosis (TB) today remains

an infectious disease with public health importance worldwide. The chest clinics of the Department of Health (DH) provide directly observed treatment service for TB patients who are required to receive anti-TB drug treatment under the supervision of nurses in the clinic. This is an important strategy recommended by the World Health Organization and the International Union Against Tuberculosis and Lung Diseases in the control of TB. It aims to prevent treatment failure and emergence of drug-resistant TB.

Twenty-fourth of March each year is designated as the World Tuberculosis Day (WTBD) to raise public awareness and understanding of the ongoing fight against the disease. The local theme of the 2015 WTBD campaign is 'Working together to control tuberculosis'. An opening ceremony for the WTBD, which was bundled with a two-day health exhibition, was held on 21 and 22 March 2015. The WTBD activities included a TB lyrics competition, exhibition boards display, game booth and healthcare consultations, where members of the public could ask questions regarding TB. School talks will also be arranged to raise the level of understanding amongst teachers and students of TB prevention. The event was jointly organised by the Hong Kong Tuberculosis, Chest and Heart Diseases Association, DH and the Hospital Authority.



為應付日益沉重的癌症負擔,衛生防護中心監測及流行病學 處開展了新一輪預防癌症和癌症篩查的宣傳活動,包括兩輯全新 製作的電視宣傳片和電台錄音聲帶,目的在於提高市民的防癌意 識,和強調在進行癌症篩查前先諮詢醫生的重要。

我們很榮幸能獲得香港大學李嘉誠醫學院院長梁卓偉教授和 香港中文大學醫學院院長陳家亮教授對這兩輯電視宣傳片和電台 錄音聲帶的支持,並邀請到他們參與演出。

歡迎大家登入預防大腸癌網站(www.ColonScreen.gov.hk)與兩位教授會面,並聆聽他們對預防癌症和癌症篩查的意見。

To address the increasing burden of cancer, Surveillance and Epidemiology Branch of the CHP has launched a publicity campaign to promote cancer prevention and screening, including two new Announcements in the Public Interest (APIs) that are being broadcast on television and radio channels. The APIs aim to raise public awareness on cancer prevention and stress the importance of seeking medical advice before screening.

The TV APIs are proudly supported by Professor Gabriel Leung, Dean of the Li Ka Shing Faculty of Medicine, The University of Hong Kong and Professor Francis Chan, Dean of the Faculty of Medicine, The Chinese University of Hong Kong. They also appeared in the two APIs.





















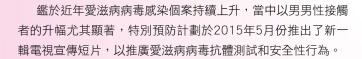






# 愛滋病病毒抗體測試及安全性行為宣傳短片

**Announcement in the Public Interest on HIV Antibody Testing and Safe Sex** 



拍攝的籌備工作早於2014年年中展開,製作團隊參考了本地愛滋病流行病學和行為監測數據,將目標受眾定為年輕的男男性接觸者,並邀請他們進行多次焦點小組討論,收集他們對宣傳片的關鍵訊息、風格、選角,以至其他細節的意見,以作參考。

宣傳短片內容描述一男一女如何透過社交網絡程式交友,帶出以下兩項重要訊息:「保護自己,要有一套」及「致電**愛滋熱線2780 2211或男同志測試愛滋熱線 2117 1069**,進行愛滋病病毒抗體測試」。片段已上載至YouTube (https://youtu.be/eB1JoM1hAKI)供公眾觀賞。

In view of the increasing number of HIV infection cases in recent years, particularly among men who have sex with men (MSM), the Special Preventive Programme has launched a new television Announcement in the Public Interest (API) in May 2015 to promote HIV antibody testing and safe sex.

Preparation works started in mid-2014. Having reviewed the local HIV epidemiology and behavioural surveillance data, the filmmaking team identified young MSM as the main target audience. Hence, multiple focus group sessions were conducted with young MSM and their views on the key messages, style and presentation, casting and other details were taken into account.

The resulting API shows a man and a woman looking for friendship with social networking applications and concludes with two important messages: 'To prevent HIV infection, always protect yourself with a condom' and 'call the AIDS Hotline 2780 2211 or Gay Men HIV Testing Hotline 2117 1069 for an HIV test'. The clip is now available on YouTube: https://youtu.be/IlbAmV5tciQ







愛滋病及性病科學委員會就 醫治愛滋病病毒與結核病菌 共同感染的建議 Recommendations on the Management of HIV and TB Coinfection by SCAS 感染控制科學委員會對 埃博拉〔伊波拉〕病毒病時 的個人防護裝備建議 Recommendations on Use of PPE in the setting of EVD by SCIC

愛滋病及性病科學委員會更新了2008年發表的「就醫治愛 滋病病毒與結核病菌共同感染的建議」(下稱「建議」)。

在全球層面而言,愛滋病與結核病能互相加強病況。共同 感染更是臨床管理上的一大挑戰。該委員會在建議上強調篩查 和醫治潛伏性結核的需要,並且對結核病的臨床診斷和治療、 同時或前後接續使用抗逆轉錄病毒藥物及抗結核藥物,以及其 他有關共同感染的重要範疇提出意見。

簡而言之,這些建議着墨於臨床管理的重要和實務層面, 為本地執業醫生提供有用的參考。

The Scientific Committee on AIDS and STI (SCAS) has recently updated its Recommendations on the Management of HIV and TB Coinfection previously published in 2008.

In global terms, HIV and TB can reinforce each other. In addition, coinfection presents a major clinical challenge. In its recommendations, the Committee addressed the need of screening for and treatment of latent TB, as well as expressed views on diagnosis and treatment of clinical TB, the concurrent or sequential use of antiretroviral and anti-TB medications, and other more important aspects of coinfection.

In essence, these recommendations highlighted the important and practical aspects of clinical management. They should regarded as the useful reference for local practitioners.

衞生防護中心轄下的「感染控制科學委員會」於2014年11 月召開會議,審視個人防護裝備在不同的本地環境下面對埃博 拉(伊波拉)病毒病時的建議。委員會認為,當醫護人員發現 疑似個案時,便應考慮加強感染控制措施。在此情況下,醫護 人員在照顧住院病人時應配備以下的個人防護裝備:防水頭 套、全面罩 / 護目鏡、N95 呼吸器、防水保護衣、雙手套及 長身鞋套 / 水靴等。此外,正確佩戴及卸除個人防護裝備、嚴 格遵守手部衞生、培訓及熟練使用個人防護裝備的演習皆不可 或缺。

The Scientific Committee on Infection Control (SCIC) of the CHP convened a meeting in November 2014 to review the Personal Protective Equipment (PPE) recommendations for Ebola Virus Disease (EVD) in different local settings. The Committee opined that escalation of infection control measures should be considered when suspicious signals are detected by healthcare workers. The PPE recommended for in-patient healthcare setting in escalated mode includes water-resistant head cover / hood, face shield / goggles, N95 respirator, water-resistant gown, double gloves and full length shoe covers/boots, etc. In addition, proper donning and doffing of PPE, strict hand hygiene, training and proficiency in the use of PPE with drills are also required.





談及「夾Band」,許多人會認為是年輕人的玩意,其實專業人士也會「夾Band」。衛生防護中心項目管理及專業發展處主任吳志翔醫生是成為醫生後才學習結他,並參與教會的敬拜樂隊。

吳醫生在學時曾學習中提琴及小提琴,亦有參與學校管絃 樂團的演出。約十年前,教堂開始組織樂隊,於是吳醫生由低 音結他學起,現已成為樂隊的中、低音結他手。

「以往聽外國樂隊的唱片,只覺得『夾band』是很遙遠的事,想不到自己已離別學堂十多載的當兒,仍可拿起結他嘗試跟年輕人一起『夾band』。」不過他認為參與樂隊不是為了表現自我,最重要的是為聚會凝造氣氛,以帶動會眾更投入參與崇拜。

吳醫生的隊友雖然是同屬教會的會友,但「夾 band」時也有意見分歧的時候,例如某些樂器太「搶聲」,影響了整體的演出等。然而大家都是抱著包容的心,加上領隊從中調和,使合奏出來的效果更理想。他也從中學習與不同年齡、背景的隊友溝通,漸漸建立了默契。

吳醫生現時除定期主持音樂崇拜外,亦不時參與教會外的 佈道活動。他說:「雖然戶外演出活動往往受到環境限制,但 卻能直接感受到參與者的反應,讓我們更投入演奏、提高水準 和帶出福音歌曲的意思。」

工餘時,吳醫生也會和兒子一起彈結他,而太太和女兒則負責唱歌。一家人一邊在家中練習,一邊享受家庭樂。

Playing in a band seems to be the young people's cup of tea. Nowadays, various professionals also get together to form their own bands. Dr Henry Ng, the Head of Programme Management and Professional Development at the CHP, only started to learn playing guitar after he became a doctor. He is now a member of the musical band in his church.

Dr Ng played viola and violin when he was young, and was a member of his school's orchestra. About 10 years ago, he joined a newly-formed musical worship group in his church and started to learn playing bass guitar. Now he plays both electric guitar and bass guitar in the band.

'I listen to the songs of many foreign bands, yet I never thought of playing in a band myself. How amazing it is that I learned how to play guitar together with a group of young people after leaving school over a decade.' He stressed that becoming a bandsman is not to show off. The most important thing is to create an atmosphere and help lead the congregation into worship.

Though sharing the same faith, the bandsmen sometimes argue among themselves. They complain that some instruments are not played in harmony, hence ruining the overall performance. With the coordination of the band leader and the tolerance to one another amongst the bandsmen, the band's performance becomes better and better. Dr Ng is glad that he has the chance to get along with members from different background and age groups, and the rapport amongst members gradually develops in the band.

Apart from leading music worship regularly in church, Dr Ng also participates in outside preaching activities. 'Environmental factors can sometimes affect our performance. Yet the positive feedback from the audience makes you feel more involved and focused, helps raise the band to an even higher standard, and brings out the true meaning of the gospel songs.'

In leisure time, Dr Ng and his son play guitar while his wife and daughter sing along. The whole family not only takes the opportunity to practise, but also enjoys the fun time together.





加坡國家皮膚科中心的首席護士長及資深護士應社會衞生科邀請,來港分享推行護士主導的皮膚科及性健康護士診所的經驗。

Head Nurse and Nurse specialists from National Skin Centre in Singapore were invited by Social Hygiene Service to exchange experience on running nurse led ward and sexual health clinic.





生防護中心總監梁挺雄醫生到深圳 出席「廣東省和深圳市與香港傳染 病防治座談會」,與有關當局討論登革熱 和其他傳染病的防控工作,並分享香港應 對冬季流感季節的經驗。會上雙方重申在 控制傳染病方面加強交流合作。

Dr Leung Ting-hung, Controller of the CHP, attended a meeting in Shenzhen with Guangdong and Shenzhen counterparts on prevention and control of dengue fever and other infectious diseases. At the meeting, Dr Leung shared the local experience of the winter influenza season. It was reaffirmed that mutual communication and co-operation are essential in combating infectious diseases.

區聯絡部為2015/16年度「我好『叻』社區健康推廣計劃」的參與機構舉辦工作坊,就計劃的主題 — 健康飲食、恆常活動及食品安全 — 分享有關資訊及實用小貼士。

Community Liaison Division organised workshops for organisations participating in the 'I'm So Smart' Community Health Promotion Programme 2015/16 to share information and practical tips related to the programme themes of healthy eating, regular physical activity and food safety.



區聯絡部舉辦「我好『叻』」社區健康推廣計劃 嘉許典禮,表揚2014/15年各協作機構及參與市 民在積極推廣健康飲食及恆常運動的貢獻。協作機構更 為典禮呈獻精彩的表演。

Community Liaison Division organised a recognition ceremony to commend organisations and community members participating in the 2014/15 'I'm So Smart' Community Health Promotion Programme, for actively promoting healthy eating and regular physical activity. Participating organisations also gave excellent performances at the ceremony.



生防護中心總監梁挺雄醫生聯同醫院管理局總行政經理(感染及應急事務)劉少懷醫生,以及衞生防護中心項目管理及專業發展處主任吳志翔醫生,公布「2015年南半球季節性流感疫苗注射計劃」的詳情。

The Controller of the CHP, Dr Leung Ting-hung, announced the launch of the 2015 Southern Hemisphere Seasonal Influenza Vaccination Programme with the Chief Manager (Infection, Emergency and Contingency) of the Hospital Authority, Dr Liu Shao-haei, and the Head of the Programme Management and Professional Development Branch of the CHP, Dr Henry Ng.



定文 染控制處於2015年度醫院管理局研討大會設立攤 位宣傳手部衞生。

The Infection Control Branch set up a booth to promote hand hygiene during the Hospital Authority Convention 2015.





區聯絡部舉行「防癌有你/(理)」健康促 進交流會,參加者分享了預防大腸癌的資 訊及在社區推廣健康生活預防癌症的經驗。

Community Liaison Division organised a Health Promotion Sharing Forum on Cancer Prevention. Participants shared information on colorectal cancer prevention and experiences about working with communities for promoting healthy life style to prevent cancer.