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# 接種疫苗 預防肺炎球菌感染

Get Vaccinated for  
Protection Against  
Pneumococcal Infection



CHP  
NEWSLETTER 通訊

HP 衛生防護中心  
Centre for Health Protection

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工餘剪影 AFTERWORK

- 何理明醫生  
Dr Raymond HO



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## 編者的話 Editor's Note

任何年齡人士都有可能感染侵入性肺炎球菌病，但長者的風險明顯較高，衛生防護中心呼籲合資格長者接種肺炎球菌疫苗。

Invasive pneumococcal disease can occur in persons of any age but the risk is substantially higher in the elderly. The Centre for Health Protection (CHP) appeals to eligible elderly persons to get pneumococcal vaccination.

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衛生署衛生防護中心網頁  
Centre for Health Protection Website

[www.chp.gov.hk](http://www.chp.gov.hk)



# 接種疫苗 預防肺炎球菌感染 Get Vaccinated for Protection Against Pneumococcal Infection

## 為何長者需要接種肺炎球菌疫苗？

## 市民須接種多少劑肺炎球菌疫苗？

政府每年都呼籲市民接種季節性流感疫苗，在流感高峰期保障個人健康。近年，政府亦鼓勵長者接種肺炎球菌疫苗以預防肺炎球菌感染。衛生防護中心於去年10月展開了2017/18年度「疫苗資助計劃」及「政府防疫注射計劃」，分階段讓合資格人士獲資助或免費接種季節性流感疫苗和肺炎球菌疫苗。

## Why is it necessary for elderly people to receive pneumococcal vaccination?

## How many dose of pneumococcal vaccine does one need?

Every year, the Government appeals to members of the public to receive seasonal influenza vaccination for personal protection during the influenza seasons. In recent years, elderly people are also encouraged to receive pneumococcal vaccination for protection against pneumococcal infection in recent years. CHP launched the Vaccination Subsidy Scheme (VSS) and the Government Vaccination Programme (GVP) 2017/18 in October last year to offer eligible persons subsidised or free seasonal influenza vaccination and pneumococcal vaccination in phases.





## 肺炎球菌可引致多種疾病

肺炎球菌感染泛指由肺炎鏈球菌（肺炎球菌）引致的疾病。雖然肺炎球菌一般只會引起輕微疾病，例如鼻竇炎或中耳炎，但亦有機會引致嚴重甚至致命的侵入性肺炎球菌病，例如入血性肺炎、敗血病和腦膜炎。

流行病學經驗顯示，幼兒及長者患上侵入性肺炎球菌病後，情況通常較為嚴重。

肺炎球菌存活於人體的上呼吸道（鼻和咽喉），咳嗽的飛沫或口腔接觸直接傳播，或透過接觸受呼吸道分泌物污染的物品間接傳播。如與患者有親密接觸，或觸摸被此細菌污染的物件，便有機會受到感染。健康人士（尤其兒童）也可以是肺炎球菌的帶菌者，他們與長者和幼童接觸時，可能會傳播此細菌。



## Pneumococci Cause a Wide Range of Diseases

Pneumococcal infection represents a wide range of diseases caused by the bacterium *Streptococcus pneumoniae*, also known as pneumococcus (plural 'pneumococci'). While pneumococci are a common cause of mild illnesses such as sinus or middle ear infections, they may also cause severe or even life-threatening invasive pneumococcal disease (IPD) such as bacteraemic pneumonia, sepsis, and meningitis. Epidemiological experience shows that the infection of IPD is usually more severe among young children and elderly people.

Pneumococci are present in the upper respiratory tract (i.e. nose and throat) of human body. They are transmitted directly through droplets from a cough or oral contact, or indirectly through contact with articles soiled with respiratory discharges.

People who have close contact with the patients or contact with materials soiled with the bacteria are at high risk of infection. As healthy persons (particularly children) may be carriers of pneumococci, they may spread the bacteria when in contact with the elderly people and young children.





## 長者有較高患病風險

雖然任何年齡的人士都可能感染肺炎球菌，但資料顯示長者較易患上侵入性肺炎球菌病。在2007至2016年，侵入性肺炎球菌病在本港的每年發病率為每10萬人中有1.7至2.9個個案。發病率以5歲以下兒童和65歲或以上長者較高。

肺炎球菌感染一般以抗生素治療，但由於此病菌對抗生素的抗藥性逐漸增加，因此預防肺炎球菌感染更為重要，其中一種最有效的預防方法是接種肺炎球菌疫苗。現時，合資格幼童在二、四、六和十二個月大時，可透過「香港兒童免疫接種計劃」免費接種「十三價肺炎球菌結合疫苗」（十三價疫苗）。自2009年起，合資格長者亦可獲政府提供免費或資助接種「二十三價肺炎球菌多醣疫苗」（二十三價疫苗）。

## Elderly People are More Susceptible to Infection

While pneumococci affect people of any age, data shows that IPD is more common among elderly people. In Hong Kong, the annual incidence of IPD ranged from 1.7 to 2.9 cases per 100,000 population from 2007 to 2016. The incidence is higher in children aged below 5 and elderly people aged 65 or above.

The treatment of pneumococcal infections usually requires antibiotics. Since there is an increasing problem in the resistance of pneumococci to antibiotics, the prevention of pneumococcal infections has become more important. One of the most effective means is pneumococcal vaccination. Under the Hong Kong Childhood Immunisation Programme, eligible young children aged 2, 4, 6 and 12 months are provided with doses of 13-valent pneumococcal conjugate vaccine (PCV13) free of charge. Since 2009, the Government has also offered free or subsidised 23-valent pneumococcal polysaccharide vaccine (23vPPV) to eligible elderly people.

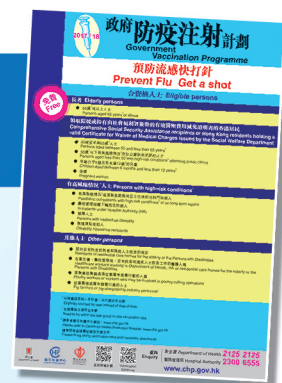


### 二十三價疫苗和十三價疫苗有甚麼分別？

### What is the difference between 23vPPV and PCV13?

二十三價疫苗和十三價疫苗均屬安全又有效預防侵入性肺炎球菌病的疫苗。十三價疫苗有效預防侵入性肺炎球菌病及肺炎球菌引致的非侵入性肺炎。另一方面，臨床研究顯示，二十三價疫苗對預防侵入性肺炎球菌病大致有效，但在預防肺炎球菌引致的非侵入性肺炎方面，效能則未如理想。值得注意的是，二十三價疫苗包含更多種血清型，理論上可提供額外保護。

Both 23vPPV and PCV13 are safe and efficacious against IPD. PCV13 is effective against both IPD and non-invasive pneumococcal pneumonia (NIPP). On the other hand, while clinical studies indicate that 23vPPV is generally effective in preventing IPD, its efficacy against NIPP is suboptimal. Nevertheless, it is noteworthy that 23vPPV contains more serotypes and theoretically offers extra protection.



## 預防勝治療 請接種疫苗

流感可令人更容易患上社區性細菌性肺炎，而繼發性細菌性肺炎是導致流感患者發病和死亡的主因之一。同時接種季節性流感疫苗和肺炎球菌疫苗，可減低長者入院及死亡的風險。

為加強長者對肺炎球菌感染的免疫力，政府為65歲或以上長者更新了接種肺炎球菌疫苗的安排。自2017年10月起，十三價疫苗已納入「疫苗資助計劃」及「政府防疫注射計劃」。詳情如下：

## Prevention is Better than Cure. Take the shot!

While influenza predisposes individuals to community-acquired bacterial pneumonia, secondary bacterial pneumonia is an important cause of morbidity and mortality for those infected with influenza. Dual vaccination with seasonal influenza vaccine and pneumococcal vaccine can lower the risk of hospitalisation and mortality among elderly people.

To strengthen the elderly people's immunity against pneumococcal infection, the Government has enhanced the arrangement of pneumococcal vaccination for elderly people aged 65 or above. From October 2017, PCV13 has been included in the VSS and GVP. Details are as follows:





i

有高風險情況而從未接種過肺炎球菌疫苗的長者，可免費或獲資助接種一劑十三價疫苗，一年後再接種一劑二十三價疫苗。

For elderly people with high-risk conditions who have not received pneumococcal vaccine, they are eligible for a free or subsidised dose of PCV13, followed by another dose of 23vPPV one year later.

ii

有高風險情況而只曾接種二十三價疫苗的長者，可於公營診所或安老院舍免費接種一劑十三價疫苗，或獲資助由已參與「疫苗資助計劃」的私家醫生接種一劑十三價疫苗。

For elderly people with high-risk conditions who have only received 23vPPV, they are eligible for a free dose of PCV13 in public clinic or residential care home or a subsidised dose of PCV13 from a private medical practitioner who has joined the VSS.

iii

沒有高風險情況和未曾接種肺炎球菌疫苗的長者，可獲資助接種一劑二十三價疫苗。

For elderly people without high-risk conditions who have not received pneumococcal vaccine, they are eligible for a subsidised dose of 23vPPV.



**長者如有以下任何一種高風險情況，可免費或獲資助接種十三價疫苗：**

**Elderly people are eligible for free or subsidised PCV13 if they have one of the following high-risk conditions:**



曾患侵入性肺炎球菌病、腦脊液滲漏或裝有人工耳蝸；

A history of IPD, cerebrospinal fluid leakage or cochlear implant;



患有長期心血管疾病（高血壓而沒有併發症除外）、肺病、肝病或腎病；

Chronic cardiovascular (except hypertension without complications), lung, liver or kidney diseases;



肥胖（體重指數30或以上）或新陳代謝疾病包括糖尿病；

Obesity (Body Mass Index 30 or above) or metabolic diseases including diabetes mellitus;



缺乏免疫力（因無脾臟、人類免疫力缺乏病毒感染／愛滋病或癌症／類固醇治療等情況所引致）；

Immunocompromised states (related to weakened immune system due to conditions such as asplenia, Human Immunodeficiency Virus infection/Acquired Immune Deficiency Syndrome or cancer/steroid treatment);



長期神經系統疾病致危及呼吸功能、難於處理呼吸道分泌物、增加異物入肺風險；或

Chronic neurological conditions that can compromise respiratory functions or the handling of respiratory secretions, or increase the risk of aspiration; or



欠缺自我照顧能力。

Lack of the ability to take care of themselves.

有謂「預防勝於治療」，衛生署除了通過不同途徑提醒長者接種肺炎球菌疫苗，亦已加強向長者、學童及家長推廣接種季節性流感疫苗的重要，以保障個人和家庭健康。此外，市民亦應維持良好的個人及環境衛生習慣、注意飲食均衡、恆常運動、休息充足及遠離煙草。如欲了解更多詳情，請致電衛生防護中心熱線（2125 2125）或瀏覽疫苗接種計劃專頁（[http://www.chp.gov.hk/tc/view\\_content/17980.html](http://www.chp.gov.hk/tc/view_content/17980.html)）。

Prevention is better than cure. Apart from promulgating the importance of pneumococcal vaccination to the elderly people through various channels, DH has stepped up its action to promote the importance of seasonal influenza vaccination among elderly people, students and parents for better protection of their personal and family health. In addition, members of the public should observe strict personal and environmental hygiene, have a balanced diet, exercise regularly, take adequate rest and refrain from smoking. For more information, please call CHP's hotline 2125 2125 or visit the thematic website of Vaccination Schemes at [http://www.chp.gov.hk/en/view\\_content/17980.html](http://www.chp.gov.hk/en/view_content/17980.html).



## 第十七次粵港澳防治 傳染病聯席會議

17<sup>th</sup> Tripartite Meeting on Prevention  
and Control of Infectious Diseases



由澳門衛生局主辦的「第十七次粵港澳防治傳染病聯席會議」於2017年7月6日及7日在澳門舉行。

超過六十名來自粵港澳三地的公共衛生和醫療專家出席了為期兩天的會議。與會者就三地最新的傳染病概況深入討論和交流，並回顧在傳染病防治及通報機制等方面的合作情況。

The 17<sup>th</sup> Tripartite Meeting on Prevention and Control of Infectious Diseases hosted by the Macao Health Bureau was held in Macau on 6 and 7 July 2017.

More than 60 public health and medical experts from Guangdong, Hong Kong and Macau attended the two-day meeting. The participants had in-depth discussion and experience sharing on the latest situation of infectious diseases in the three places. They also reviewed the collaboration in the prevention and control of infectious diseases and the notification mechanism.







衛生署  
Department of Health



香港糖尿聯會  
Diabetes Hongkong

項目巡禮  
IN FOCUS



世界糖尿病日  
11月14日



## 2017世界糖尿病日

### World Diabetes Day 2017



國際糖尿病聯合會和世界衛生組織於1991年將每年11月14日訂為「世界糖尿病日」，以關注糖尿病對健康日漸增加的威脅。衛生署基層醫療統籌處和香港糖尿聯會於去年的世界糖尿病日攜手舉辦宣傳教育活動，由衛生署署長陳漢儀醫生及香港糖尿聯會主席周榮新醫生主持開幕禮，並以「**女性與糖尿病 — 我們擁有健康未來的權利**」為主題，強調女性在家庭擔當重要角色，能幫助家人預防及控制糖尿病。

活動當日，內分泌科專科醫生到場講解如何預防及控制糖尿病，營養師亦與參加者分享閱讀營養標籤的心得，並帶領她們到超級市場了解如何選擇健康食材，烹調健康菜式。參加者亦與嘉賓齊齊學習簡單健身操，以便與家人一起練習，建立健康生活模式，預防糖尿病。

The International Diabetes Federation and the World Health Organization designated 14 November as the annual World Diabetes Day (WDD) in 1991 to address the growing concerns over the escalating health threat of diabetes. A publicity and educational event was jointly organised by the Primary Care Office of DH and Diabetes Hongkong (DHK) on last year's WDD. The Director of Health, Dr Constance CHAN and the President of DHK, Dr CHOW Wing-sun officiated at the opening ceremony. Under the theme '**Women and Diabetes — Our Right to a Healthy Future**', the WDD 2017 highlighted the important role of women in families in the prevention and control of diabetes.

On the event day, endocrinologists gave a presentation on ways to prevent and control diabetes while dietitians shared with participants some tips on reading food labels and took them on a supermarket trip to demonstrate how to make healthy food choices and prepare healthy dishes. Joined by the officiating guests, participants also learnt a simple workout which they could do with their family members and lead a healthy lifestyle for the prevention of diabetes.





## 「石榴石」演習測試政府應對 新型流感的能力

Exercise 'Garner' Tests Government's  
Response to Novel Influenza



衛生署衛生防護中心在2017年11月舉行了代號為「石榴石」的公共衛生演習，以評估政府部門和機構在處理新型人類流感個案的協調安排，並測試它們執行「流感大流行應變計劃」的能力。

是次演習分為兩部分。第一部分為11月15日舉行的桌面演習，模擬香港出現一宗新型人類流感確診個案時，相關部門和機構討論和統籌所需採取的傳染病應變措施。

第二部分為11月30日舉行的地面行動演習。演習模擬一名在禾輦廣場工作的電訊公司女職員證實對新型流感病毒呈陽性反應。初步流行病學調查顯示，該名女職員在本地沒有接觸禽鳥，但曾前往爆發新型流感的國家。一些與她有密切接觸的員工亦出現新型流感病徵。

衛生署隨即與相關政府部門和機構協調，制定及執行相應措施。衛生署除了安排公共衛生隊伍進行實地評估及流行病學調查外，亦向相關持份者提出有關感染控制措施的建議，為密切接觸者處方預防性抗病毒藥物，並指示商場營辦商及其清潔公司消毒受污染的地方。

是次演習為相關持份者提供寶貴機會，以測試和評估政府就傳染病制定的準備及應變計劃和程序的效用，亦有助提升政府在傳染病爆發時的應變能力。





In November 2017, the CHP of the DH organised a public health exercise code-named 'Garnet' with a view to assessing the interoperability of government departments and organisations in response to the detection of a case of novel human influenza, as well as testing their execution of the Preparedness Plan for Influenza Pandemic.

The exercise consisted of two parts. The first part was a table-top exercise conducted on 15 November, in which relevant departments and organisations discussed and co-ordinated the communicable disease response measures required in the simulated scenario of detection of a confirmed case of novel human influenza in Hong Kong.

The second part was a ground movement exercise conducted on 30 November. The exercise simulated that a female staff member of a telecommunications company working at Wo Che Plaza tested positive for novel influenza virus. Initial epidemiological investigations revealed that while the female staff member had no poultry contact locally, she had travelled to a country with a novel influenza outbreak. Some of the staff members who had close contact with her also developed symptoms of novel influenza.

The DH immediately co-ordinated with relevant departments and organisations to formulate and implement corresponding measures. In addition to conducting on-site assessment and epidemiological investigations by its Public Health Team, the DH also advised relevant stakeholders on infection control measures, prescribed antiviral prophylaxis for the close contacts, and instructed the shopping mall operator and its cleaning services company to disinfect the contaminated areas.

The exercise provided a valuable opportunity for relevant stakeholders to test and assess the effectiveness of the Government's preparedness and response plans as well as procedures for communicable diseases. It also helped enhance the Government's preparedness for any possible outbreak of communicable diseases.







## 「錫自己·愛健康」子宮頸癌預防及篩查的推廣活動

Publicity Campaign for Cervical Cancer Prevention and Screening:  
'LOVE Yourself! CHERISH Your Health!'



政府與公私營和非政府機構的專業醫護人員於2004年3月8日合作推出全港性的「子宮頸普查計劃」，鼓勵婦女定期進行子宮頸癌篩查。為進一步提高婦女對子宮頸癌預防及篩查的意識，衛生署自2017年第四季度起展開以「錫自己·愛健康」為主題的新宣傳運動，並製作全新政府宣傳短片和海報，透過電視、電台、報紙、橫額、網頁、社交媒體等不同途徑進行宣傳。

衛生署同時與社區合作夥伴協力推廣預防癌症的健康信息，於2017年12月10日與香港防癌會攜手舉行「香港癌症日2017」，活動嘉賓包括衛生署署長陳漢儀醫生。

此外，衛生署於2017年12月12日舉行記者會，宣布推行「資助合資格低收入婦女接受子宮頸癌篩查及預防教育先導計劃」。先導計劃為期三年，由關愛基金資助，目的是推廣子宮頸癌預防及篩查。

如欲了解更多詳情，請瀏覽「子宮頸普查計劃」的專題網站 <http://www.cervicalscreening.gov.hk>。

The Government launched the territory-wide Cervical Screening Programme on 8 March 2004 in collaboration with healthcare professionals in the public, private and non-governmental sectors to encourage women to have regular cervical cancer screening. To further promote awareness of cervical cancer prevention and screening among women, the DH has launched a new publicity campaign under the theme of 'LOVE Yourself! CHERISH Your Health!' since the fourth quarter of 2017. A new Announcement in the Public Interest and a new poster have been produced for publicity via various channels including television, radio, newspapers, banners, websites and social media.

The DH collaborates with community partners to promote health messages on cancer prevention. On 10 December 2017, the DH and the Hong Kong Anti-Cancer Society jointly held the Hong Kong Cancer Day 2017. The Director of Health, Dr Constance CHAN was one of the event guests.

In a press conference on 12 December 2017, the DH announced the launch of the Pilot Scheme on Subsidised Cervical Cancer Screening and Preventive Education for Eligible Low-income Women. The three-year Pilot Scheme, funded by the Community Care Fund, aims to promote prevention of and screening for cervical cancer.

For more details, please visit the thematic website of the Cervical Screening Programme at <http://www.cervicalscreening.gov.hk>.





## 第三階段大腸癌篩查先導計劃

### Phase 3 of Colorectal Cancer Screening Pilot Programme

衛生署於2017年11月27日推出第三階段大腸癌篩查先導計劃，擴展至1952至1955年期間出生約380,000個合資格香港居民，資助他們進行篩查，以預防大腸癌。首兩階段的合資格人士，即1946至1951年期間出生的香港居民，亦可參加先導計劃。

政府於2016年9月展開為期三年的先導計劃，分階段資助於1946至1955年間出生及沒有大腸癌症狀的香港居民接受大腸癌篩查。截至2017年11月17日，644名基層醫療醫生和154名大腸鏡醫生已登記加入先導計劃，期間約有42,000名合資格人士接受資助進行篩查。

在2017年11月20日舉行的記者會上，衛生署衛生防護中心監測及流行病學處主任程卓端醫生呼籲合資格人士儘早參加先導計劃。

如欲了解詳情，請瀏覽專題網站<http://www.colonscreen.gov.hk>或致電熱線（3565 6288），辦公時間內有專人接聽。

The DH rolled out the third phase of the Colorectal Cancer Screening Pilot Programme on 27 November 2017, extending the coverage to about 380,000 eligible Hong Kong residents born in the years 1952 to 1955, who will be provided with subsidised screening tests for the prevention of colorectal cancer. Eligible persons from phases one and two, i.e. Hong Kong residents born in the years 1946 to 1951, are also welcome to enrol in the Pilot Programme.

The three-year Pilot Programme was launched in September 2016 to subsidise asymptomatic Hong Kong residents born between 1946 and 1955 to undergo screening tests for colorectal cancer in phases. As of 17 November 2017, 644 primary care doctors and 154 colonoscopy specialists had enrolled in the Pilot Programme, with about 42,000 eligible persons having undergone subsidised screening tests.

In the press conference on 20 November 2017, the Head of the Surveillance and Epidemiology Branch of the CHP of the DH, Dr Regina CHING, called on eligible persons to join the Pilot Programme as soon as possible.

For details, please visit the thematic website at <http://www.colonscreen.gov.hk> or call the hotline on 3565 6288. Calls are answered by trained staff during office hours.





## 大專院校電影分享會 推廣愛滋病預防及測試

Promoting HIV Prevention and Testing in  
Film Sharing Sessions at Tertiary Institutions



鑑於近年愛滋病病毒感染個案持續上升，尤以年輕男性接觸者的升幅最為明顯，特別預防計劃轄下的紅絲帶中心於2017年9月至10月期間，再度於多間大專院校舉辦電影分享及座談會，向學生推廣預防愛滋病和盡早進行病毒測試。

紅絲帶中心與香港同志影展已是第三年攜手合辦此活動。活動吸引了八所大專院校的多個學系和學生組織參與，包括香港大學、香港公開大學、香港中文大學、香港科技大學、香港浸會大學、香港理工大學、香港教育大學及香港城市大學。每節放映會播放三至四部電影，內容講述男同志對人生和愛滋病議題的看法。電影播放完畢後，座談會的多位主持和嘉賓（包括教授、電影主角及傳媒名人）與學生分享他們對愛滋病議題的觀感。為推廣正確使用安全套，紅絲帶中心護士亦有到場，介紹安全套的不同種類及尺碼，並邀請學生即場示範如何使用安全套。

是次活動共有四百多人出席，反應理想，獲得參加者一致好評，更有院校要求加映。

In view of the increasing number of HIV infection cases in recent years, particularly among young men who have sex with men, the Red Ribbon Centre of the Special Preventive Programme launched another series of film sharing sessions and discussion forums at tertiary institutions in September and October 2017 to promote HIV prevention and early testing among students.

For the third year, the event was jointly organised by the Red Ribbon Centre and the Hong Kong Lesbian and Gay Film Festival. It attracted the participation of various university departments and student groups from eight tertiary institutions, including the University of Hong Kong, the Open University of Hong Kong, the Chinese University of Hong Kong, the Hong Kong University of Science and Technology, the Hong Kong Baptist University, the Hong Kong Polytechnic University, the Education University of Hong Kong and the City University of Hong Kong. Three to four short films depicting the views of gay men on their lives and HIV issues were shown in each screening session, which was followed by a discussion forum where hosts and guest speakers (including professors, protagonists in the films and media celebrities) shared with students their thoughts on HIV issues. To promote the proper use of condoms, nursing staff from Red Ribbon Centre were also in attendance to introduce different types and sizes of condoms. Students were invited to demonstrate how to put on a condom.

The event was well received with a total of over 400 viewers attending the screenings. Requests for additional screenings were raised by some institutions.







## 全球同抗愛滋病運動2017 — 「知多·滋少」愛滋病教育創意校園計劃嘉許禮

'Know AIDS • No AIDS' World AIDS Campaign 2017 - Creative School Projects on HIV/AIDS Prevention Award Presentation Ceremony

每年12月1日為「世界愛滋病日」，目的為提醒及團結世界各地的人攜手對抗愛滋病。紅絲帶中心聯同香港家庭計劃指導會（家計會）於2017年11月18日在國際廣場舉行「全球同抗愛滋病運動2017 —『知多·滋少』愛滋病教育創意校園計劃嘉許禮」，以支持「全球同抗愛滋病運動」。嘉許禮由食物及衛生局副局長徐德義醫生、衛生署署長陳漢儀醫生及家計會主席殷巧兒女士主持，其他出席嘉賓包括深圳市疾病預防控制中心副主任馬漢武醫生及澳門防治愛滋病委員會秘書長林松醫生。

「『知多·滋少』愛滋病教育創意校園計劃」由紅絲帶中心與家計會合辦，於去年中約有100名來自8間中學及兩間大學的學生大使參加。學生大使首先參與工作坊，了解愛滋病的知識和學習使用安全套的技巧，然後在校園自行設計創意教育活動，提高其他同學預防愛滋病的意識。嘉許禮上，同學進行無伴奏合唱及演唱原創歌曲，流行歌手林奕匡亦有到場獻唱。有關計劃的詳情，可瀏覽紅絲帶中心的Facebook專頁（<https://www.facebook.com/hkrrc>）。

World AIDS Day is commemorated every year on 1 December to raise awareness and bring people together from around the world to demonstrate international solidarity in the face of the HIV pandemic. To support the World AIDS Campaign, the Red Ribbon Centre and the Family Planning Association of Hong Kong (FPAHK) jointly held the World AIDS Campaign 2017 - 'Know AIDS • No AIDS' Creative School Projects on HIV/AIDS Prevention Award Presentation Ceremony at ISQUARE on 18 November 2017. Officiating at the ceremony were the Under Secretary for Food and Health, Dr CHUI Tak-yi; the Director of Health, Dr Constance CHAN; and the Chairman of the FPAHK, Ms Lina YAN. Other honourable guests included the Deputy Director of the Shenzhen Center for Disease Control and Prevention, Dr MA Hanwu and the Secretary General of AIDS Prevention and Control Commission of Macau, Dr LAM Chong.

Jointly organised by the Red Ribbon Centre and the FPAHK, 'Know AIDS • No AIDS' Creative School Projects on HIV/AIDS Prevention saw the participation of around 100 student ambassadors from eight secondary schools and two universities in mid-2017. They first attended workshops to acquire the knowledge of HIV/AIDS and learn about the use of condoms. After the training, they devised creative educational activities at school to enhance other students' awareness of HIV/AIDS prevention. Apart from an a cappella performance and an original song performance from students, the ceremony also featured a live performance from pop singer Phil LAM. For more details on the Projects, please visit the Red Ribbon Centre's Facebook Fanpage at <https://www.facebook.com/hkrrc>.







問答環節



## 學校教職員研討會 有關食水 所含重金屬對健康的影響

### Seminars for School Personnel on Health Effects of Heavy Metals in Drinking Water

衛生署於2017年10月派出代表參與水務署舉行的四場研討會，向幼稚園、小學及中學的教職員講解食水所含重金屬對健康的影響。研討會的目的是介紹政府的「提升香港食水安全行動計劃」組成部分。

在研討會上，非傳染病部的同事分享了醫學界在2015年食水含鉛超標事件的所得經驗。據觀察，為曾飲用鉛水的人士提供臨牀護理時，最重要的一環是避免他們再次飲用鉛水。經過一段時間，鉛會自然被排出體外。臨牀護理不會因血鉛篩查而有分別，因此沒有需要進行例行血鉛檢測。

至於其他五種金屬，即銻、鎘、鉻、銅和鎳，世界衛生組織已就這些物質訂下飲用水準則值，相關準則值相當嚴格，顯著低於可引致臨牀中毒的水平。一般而言，因飲用受這些金屬污染的食水而帶來嚴重健康影響的風險被評為十分低。

出席代表亦提醒研討會的參加者遵照水務署的建議，培養良好的用水習慣。從健康的角度而言，血鉛水平越低越好。會上還派發了衛生署製作的兩款小冊子，介紹鉛和另外五種金屬對健康的影響，以及在日常生活中減少接觸這些金屬的可行措施。如在飲用受鉛或另外五種金屬污染的食水後出現症狀或對健康狀況感到憂慮，可諮詢醫生的意見。

請掃描二維碼以查看小冊子：



鉛



五種金屬

Representatives from the DH attended four seminars conducted by the Water Supplies Department (WSD) in October 2017 to give information to staff of kindergartens, primary and secondary schools about the health effects of heavy metals in drinking water. The seminars aimed to introduce the components of the Government's Action Plan for Enhancing Drinking Water Safety in Hong Kong.

During the seminars, colleagues of the Non-communicable Disease Division shared the experience gained by the health sector from the incident of excess lead in drinking water in 2015. It was observed that cessation of further exposure to lead in water is the most important element of clinical management for people who have consumed lead-contaminated water. Over time, lead will pass out of the body. Screening of blood lead levels does not affect clinical management. Routine blood lead level testing is thus not necessary.

As for the other five metals, namely antimony, cadmium, chromium, copper and nickel, the World Health Organization has established guideline values for these substances in drinking water. The guideline values are set at stringent levels, which are substantially lower than those that may result in clinical poisoning. In general, the risk of suffering significant health effects due to consumption of drinking water tainted with these metals is assessed to be very low.

The participants of the seminars are also reminded to follow the WSD's advice on developing good habits of water use. From a health perspective, it is always good to keep the blood lead level as low as possible. During the seminars, two sets of pamphlets published by the DH were also given out to the participants to introduce the health effects of lead and the five metals, as well as some practical measures to minimise exposure to these metals in daily life. Persons who have any symptoms or concerns about their health conditions after consuming water contaminated with lead or the other five metals may consult a doctor for advice.

Scan the QR codes for the pamphlets:



LEAD



FIVE METALS





## 疫苗可預防疾病科學委員會就醫護人員 疫苗接種提出建議

Summary Statement on Vaccination Practice for Health Care Workers in Hong Kong published by Scientific Committee on Vaccine Preventable Diseases

醫護人員直接與病人接觸，有時需要處理其血液或體液，因而面對感染和傳播傳染病的風險。故此，保護醫護人員免受感染的措施尤其重要。

疫苗可預防疾病科學委員會（科學委員會）於2017年6月召開會議，審視海外相關建議後，發表《就醫護人員疫苗接種的建議》。科學委員會指出，接種疫苗是預防傳染病的其中一種最有效方法，建議醫護人員如未能證明對乙型肝炎、麻疹、德國麻疹及水痘有免疫力，應接種相關疫苗。此外，科學委員會建議，醫護人員每年均應接種季節性流感疫苗。

科學委員會亦建議，醫護人員應於入職時就其免疫狀況作出評估，醫護人員及其僱主均應保存醫護人員的疫苗接種及血清狀況記錄。

以上建議已上載至衛生防護中心網站，歡迎公眾查閱。

Health care workers are at potential risk for acquiring and transmitting infectious diseases since they involve in direct patient contact and sometimes need to handle patients' blood or body fluids. Hence, protection for health care workers is essential.

The Scientific Committee on Vaccine Preventable Diseases (SCVPD) met in June 2017. After reviewing overseas recommendations on vaccination of health care workers against infectious diseases, the SCVPD issued the 'Summary Statement on Vaccination Practice for Health Care Workers in Hong Kong'. The SCVPD points out that vaccination is one of the most effective means to prevent infectious diseases and recommends that health care workers without evidence of immunity against hepatitis B, measles, rubella, and varicella (chickenpox) should receive the relevant vaccines. In addition, the SCVPD recommends that health care workers should receive seasonal influenza vaccination annually.

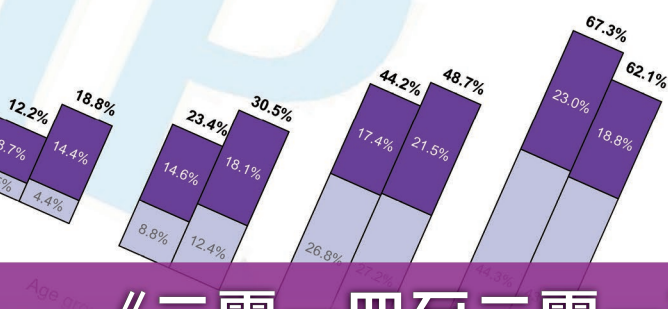
The SCVPD also recommends that health care workers' immune status should be assessed at the time of initial employment. The records of vaccination and serological status of health care workers should be kept by themselves and their employers.

The summary statement is available on the CHP website for public information.





# Hypertension



## 《二零一四至二零一五年度人口健康調查報告書》新聞發布會

Press Conference on Report of Population Health Survey 2014/15

《二零一四至二零一五年度人口健康調查報告書》已於2017年11月27日出版。衛生署於當日舉行新聞發布會，公布主要的調查結果。

2014/15年度人口健康調查的目的是加強政府在人口健康方面的數據基礎，協助制定以實證為本的衛生政策、資源分配、衛生服務及公共健康計劃。這項調查的範圍涵蓋全港，分為兩個部分，即住戶問卷實地調查和身體檢查（包括體格檢查、血液檢驗和24小時尿液檢驗）。

是次住戶問卷調查成功訪問了5,435個家庭住戶中12,022名15歲或以上的人士，整體住戶回應率為75.4%。在應邀參加身體檢查的受訪者當中，2,347人同意進行身體檢查，參與率為39.5%，其中1,976人完成體格檢查、血液檢驗和24小時尿液檢驗，另外371人僅接受了體格檢查和血液檢驗。

報告書已上載至衛生署及衛生防護中心的網站，歡迎公眾查閱。

Following the publication of the Report of Population Health Survey 2014/15 on 27 November 2017, a press conference was held on the same day to present the key findings.

The Population Health Survey 2014/15 aimed to strengthen the Government's information base on population health, thereby supporting the evidence-based decision-making in health policy, resource allocation and provision of health services and public health programmes. It is a territory-wide survey with two components, namely the fieldwork for a household questionnaire survey and a health examination (including physical measurements, blood tests and 24-hour urine tests).

A total of 12,022 persons aged 15 or above from 5,435 domestic households were successfully enumerated in the household survey, representing an overall response rate of 75.4%. Of all those who were invited to undergo the health examination, a total of 2,347 respondents accepted the invitation, representing a participation rate of 39.5%. While 1,976 of them completed the physical measurements, blood tests and 24-hour urine tests, 371 took only the physical measurements and blood tests.

The Report is available on the website of the DH and the CHP for public information.





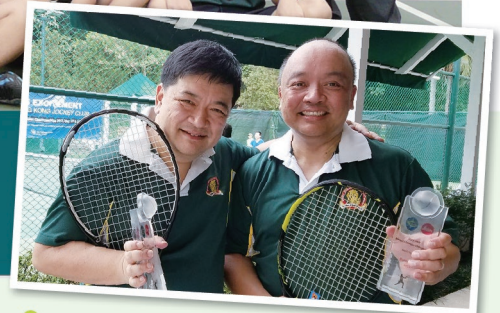


▼ 何醫生（後排右三）於九龍華仁書院（九華）紀念活動「方學良神父盃（2008）」中，代表九華舊生隊與九華網球隊合照。  
Dr HO (third right, back row) in an Father Finneran Cup (2008), an inaugural event that WYK Old Boys vs WYK Tennis Team held at WYK.

## 何理明醫生 Dr Raymond HO

何醫生（前排右二）與贏得第10次冠軍的九華網球隊（1980-81）於頒獎禮上合照。

Dr HO (second from the right, front row) with the winning 10<sup>th</sup> Championship WYK Tennis Team (1980-81) taken at the Awards Ceremony.



▲ 何醫生（左）與弟弟何施明醫生手持於2014年奪得的香港賽馬會網球比賽男子雙打亞軍的複製獎盃，重攝於2017年。

Dr HO (left) and his brother, Dr Simon HO, holding a replica trophy that they received from finishing Runners-Up in the Hong Kong Jockey Club Tennis Championship Masters Doubles in 2014. The photo was taken in 2017.

提起網球，港口衛生處總港口衛主任何理明醫生便會滔滔不絕。四十年前，何醫生還是九龍華仁書院的初中生時，便開始打網球，至今熱情仍然未減。

何醫生說：「我在中一時初次接觸網球，當時學校剛建成了四個全新的網球場，校內一位耶穌會的愛爾蘭神父為中一學生開辦了訓練班。我在中二時加入校隊，之後連續四年參加校際比賽。」神父熱心推廣網球，鼓勵同學參加校外比賽和觀看公開比賽。何醫生還記得，前世界第一的捷克網球名將蘭度曾來港作賽，當時神父帶領他和同學到剛落成的維園網球主場觀戰。

何醫生在校時，九龍華仁書院是校際網球勁旅。他就讀中二和中三時，校隊連奪兩屆校際網球比賽冠軍。學長畢業離校後，何醫生成為球隊主力。令他遺憾的是，校隊在他中四時只能屈居校際比賽的亞軍，未能取得三連霸。何醫生在英國進修和就業時，亦有參加當地的大學及球會比賽，夥拍胞弟在英國醫學界網球協會（British Medical Tennis Association）的男子網球雙打比賽中四度掄元。

何醫生現時亦有跟昔日校隊的師兄弟打網球，更經常與他們回到母校，與學弟切磋練習，並組隊參與本地賽事。他說網球讓他學懂面對得失勝負，更擴闊了視野及社交圈子。為保持身體健康，何醫生在晚上經常與太太在居所附近急步行，沿途不忘分享日常點滴。

When it comes to tennis, Dr Raymond HO, the Chief Port Health Officer of the Port Health Office, never runs out of things to say. Dr HO began playing tennis 40 years ago when he was a junior secondary student at Wah Yan College, Kowloon (WYK). His passion for the sport is still very much alive today.

Dr HO said, 'My first foray into tennis began in Form 1 when four brand new tennis courts were completed at school. An Irish Jesuit priest in my school organised a tennis training course for Form 1 students. I made the school team in Form 2 and went on to play in inter-school matches for the next 4 years.' The priest was enthusiastic in promoting tennis. He encouraged students to join competitions outside the school and watch tennis tournaments. Dr HO remembered that the priest took him and his classmates to the newly built Centre Court at Victoria Park for a game featuring Ivan Lendl, the Czech former world number one.

During Dr HO's time at school, WYK was a tennis powerhouse, winning the Inter-school Tennis Championship for two consecutive years when he was in Form 2 and Form 3. After the senior players graduated from the school, Dr HO became one of the leading players in the team. Yet to his regret, the team narrowly missed out on the treble when he was in Form 4, finishing as the runners-up in the inter-school competition. Dr HO continued to compete at university and club level while studying and working as a medical practitioner in the United Kingdom. He won the Men's Doubles four times with his younger brother in the tennis tournament organised by the British Medical Tennis Association.

Dr HO still plays tennis with other past members of the WYK tennis team. They often go back to school for practice with younger schoolmates and form teams to participate in local competitions. Dr HO said that it was through tennis that he learnt how to cope with highs and lows. The sport has also enabled him to broaden his horizons and social circle. To keep fit and stay healthy, Dr HO and his wife often go for a brisk walk in their neighbourhood in the evening. On the way, they share with each other how their day went.



22.8.2017



衛生防護中心總監黃加慶醫生頒發嘉許狀予2016/17年度員工接種季節性流感疫苗比率最高的五個衛生署服務單位，包括監測及流行病學處傳染病部、電子健康紀錄管理組、基層醫療統籌處、公共健康護理部總辦事處及感染控制處。

Dr WONG Ka-hing, the Controller of the CHP, presented Certificates of Appreciation to the top five DH service units with the highest rates of seasonal influenza vaccination among staff in 2016/17, namely the Communicable Disease Division of the Surveillance and Epidemiology Branch, the Electronic Health Record Management Team, the Primary Care Office, the Head Office of the Public Health Nursing Division and the Infection Control Branch.

24.8.2017

食物及衛生局局長陳肇始教授（左四）、食物及衛生局常任秘書長（衛生）謝曼怡女士（左三）和食物及衛生局副局長徐德義醫生（左二）視察衛生署衛生防護中心，了解部門有關防控傳染病的措施和工作。



The Secretary for Food and Health, Professor Sophia CHAN (centre left), the Permanent Secretary for Food and Health (Health), Ms Elizabeth TSE (third left), and the Under Secretary for Food and Health, Dr CHUI Tak-yi (second left), inspected the CHP of the DH regarding the measures and work adopted by the department to control and prevent communicable diseases.



9.9.2017

社區聯絡部在荃灣安全健康社區督導委員會舉辦的「荃灣安健社區日」設立攤位遊戲，向公眾推廣有關抑鬱症的健康信息。

The Community Liaison Division promoted health messages about depression to members of the public at its game booth on the 'Safe and Healthy Community Day in Tsuen Wan' organised by the Tsuen Wan Safe and Healthy Community Steering Committee.





13.10.2017

社區聯絡部及食物環境衛生署的代表在大埔出席「環境衛生與蚊患防治講座」，宣傳有關蚊傳疾病的健康資訊，以提高公眾預防蚊傳疾病的意識。該講座由大埔民政事務處舉辦，是大埔區「地區主導行動計劃」的其中一項活動。



To raise public awareness of the prevention of mosquito-borne diseases, representatives from the Community Liaison Division and the Food and Environmental Hygiene Department disseminated health information about mosquito-borne diseases at a seminar on environmental hygiene and mosquito prevention and control in Tai Po. The seminar was organised by the Tai Po District Office as one of the activities of the District-led Actions Scheme in Tai Po District.

30.10.2017



食物及衛生局局長陳肇始教授（左三）、衛生署署長陳漢儀醫生（左一）及醫院管理局主席梁智仁教授（右二）率先接種季節性流感疫苗。

The Secretary for Food and Health, Professor Sophia CHAN (third left), the Director of Health, Dr Constance CHAN (first left), and the Chairman of the Hospital Authority, Professor John LEONG (second right), took the lead to receive seasonal influenza vaccination.

15.11.2017

政務司司長張建宗（前排左三）聯同主要官員接種季節性流感疫苗。

The Chief Secretary for Administration, Mr Matthew CHEUNG (front row, centre left), received seasonal influenza vaccination with principal officials.







29.11.2017

社區聯絡部舉辦以「面對抑鬱症」為主題的健康促進交流會，讓參加者分享抑鬱症的資訊及交流在社區推廣精神健康的經驗。

The Community Liaison Division organised a Health Promotion Sharing Forum under the theme of 'Depression' for participants to share health information about depression and exchange their experience in promoting mental health in the community.

30.11.2017

衛生署應邀出席由香港中文大學賽馬會耆智園舉辦的「好心情@社區 — 心安你得樂頤年」計劃開幕禮暨研討會。此計劃是衛生署的「好心情@HK」計劃的一部分，在社區推廣長者精神健康。



The DH was invited to attend the kick-off ceremony cum seminar of a programme (「好心情@社區 — 心安你得樂頤年」) organised by the Jockey Club Centre for Positive Ageing of the Chinese University of Hong Kong. The programme is a part of the 'Joyful@HK' Campaign for the promotion of mental health among elderly persons in the community.



11.12.2017

國家衛生和計劃生育委員會「第十一期內地 — 港澳衛生應急管理幹部學習班」的學員到訪衛生防護中心，就傳染病防控及疾病爆發的應變措施等進行交流。

Participants of 'The 11<sup>th</sup> Workshop for Managerial Cadres on Public Health Emergencies' organised by the National Health and Family Planning Commission visited the CHP to share experience in the prevention and control of infectious diseases and emergency response to disease outbreak.

15.12.2017

中國疾病預防控制中心主任高福教授（前排左四）到訪衛生署，了解部門在疾病防控及科研培訓等工作。

Professor GAO Fu (front row, centre left), the Director-General of the Chinese Center for Disease Control and Prevention, visited the DH to understand more about the department's work on disease prevention and control, research and training.

