監測及流行病學處

衞生防護中心
Centre for Health Protection
保障市民健康
Protecting Hong Kong's health

Surveillance And Epidemiology Branch

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Dear Doctor,

Alert on Further Increase in Seasonal Influenza Activity in Hong Kong

I refer to our previous letter dated January 11, 2019, and would like to update you on the latest activity of seasonal influenza. Hong Kong has entered the winter influenza season in early January 2019 and the local seasonal influenza activity has continued to increase in the past two weeks. We anticipate that the influenza activity will remain at an elevated level for some time.

Among the respiratory specimens received by the Public Health Laboratory Services Branch of the Centre for Health Protection (CHP), the percentage tested positive for influenza viruses rose from 19.98% in the week ending January 5 to 24.97% in that ending January 12. The circulating influenza viruses were predominantly influenza A(H1N1)pdm09 (85% of all positive influenza detections).

Young children aged below six years were particularly affected in this season, as reflected by the high number of outbreaks in kindergartens/child care centres and hospitalisation rate among children aged below six years. The weekly number of institutional influenza-like illness (ILI) outbreaks reported to the CHP has sharply increased from six (affecting 28 persons) in the week ending January 5 to 121 (affecting 968 persons) in the week ending January 12, while 148 (affecting 989 persons) have been recorded in the first five days of this week (as of January 17). Majority of the outbreaks occurred in kindergartens/child care centres (KG/CCC) (70%), followed by primary schools (16%) and residential care homes for the elderly (4%).

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In public hospitals, the overall admission rate with principal diagnosis of influenza has increased from 0.88 admitted cases per 10,000 population in the week ending January 5 to 1.19 in that ending January 12. The influenza admission rate was highest among children aged below six years, which increased from 6.49 to 9.23 in the corresponding period, exceeding the peak rate which ranged from 6.18 to 9.07 recorded in major influenza seasons in the past three years.

So far, a total of 124 adult severe influenza cases (including 50 deaths)[1] have been recorded in this season (as of January 17). Of note, 37% of the adult severe cases affected persons aged 50-64 years, which was higher than 15% in the 2017 summer season predominated by influenza A(H3) and 20% in the 2017/18 winter season predominated by influenza B. Nonetheless, most of the deaths (86%) still affected elderly aged 65 years or above. For children, ten cases of paediatric influenza-associated severe complication have been recorded in this season (as of January 18, 5 pm).

In view of the sharp increase in the number of ILI outbreaks in KG/CCC in the past two weeks and the extraordinary high influenza-associated admission rate among children aged less than 6 years in public hospitals, the Government has convened an interdepartmental meeting yesterday to review the latest situation. The Government has recommended an enhanced measure that all KG/CCC with an ILI outbreak will be closed for a period of seven days to interrupt influenza transmission within the affected schools. Young children may not have the ability to observe strict personal and hand hygiene and they are prone to influenza infection and its complications. This additional measure is expected to reduce the risk of acquiring influenza infection in school settings. The Government will review the situation before the end of the Chinese New year holiday to see if this measure needs to be extended.

Please advise your patients who are aged six months or above especially the priority groups to receive the 2018/19 influenza vaccine as soon as possible for personal protection. Moreover, you may consider empirical treatment with neuraminidase inhibitor (e.g. oseltamivir) for your patients suspected to have influenza infection early based on clinical

[1] Defined as adult patients (aged ≥18 years) who (i) required intensive care unit admission or died; AND (ii) had any positive laboratory result of influenza infection

assessment, especially patients at higher risk of complications, such as young children, elders, people with chronic diseases, pregnant women, etc. Studies have shown that neuraminidase inhibitors can reduce severe outcomes of influenza. We would like to draw your attention to Hospital Authority's internal clinical guideline on "Use of neuraminidase inhibitors in out-patient settings" (available from: http://icidportal.ha.org.hk/Home/File?path=/Use%20of%20neuraminidase%20inhibitors%20fin%20out-patient%20settings.pdf).

The latest surveillance data on influenza are published in the "*Flu Express*", a weekly report available on the CHP website (https://www.chp.gov.hk/en/resources/29/304.html). Further information on influenza can be found from the following link: http://www.chp.gov.hk/en/view_content/14843.html. Please draw the attention of the healthcare professionals and supporting staff in your institution/ working with you to the above. May I take this opportunity to thank you for your continuous support in combating infectious diseases in Hong Kong.

Yours faithfully,

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