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6 September 2022

Dear doctors,

Detection of the First Case of Monkeypox in Hong Kong

We would like to inform you that Hong Kong confirmed the first case of monkeypox today and the **alert response level** under the “Preparedness and Response Plan for Monkeypox” of the Hong Kong SAR Government has been activated.

This is an **imported case** involving a 30 year-old Chinese male with good past health who presented to a public hospital due to worsening of sore throat and dysphagia at night of 5 September 2022. He first developed two penile ulcers on 30 August, followed by development of vesicles over face, neck, trunk and limbs. He also had non-specific numbness, inguinal lymphadenopathy and myalgia. With recent travel covering the US, Canada and the Philippines, he arrived Hong Kong alone in the morning of 5 September and was transferred to a designated quarantine hotel. He has been admitted to the isolation ward and his current condition is stable. No close contact has been identified upon epidemiological investigation. Vesicular fluid samples were tested PCR positive by the Public Health Laboratory Services Branch (PHLSB) of the Centre for Health Protection. He reported no contact with known monkeypox cases but had high risk activities when staying overseas.

We would like to take this opportunity to remind you to watch out for patients presenting with atypical symptoms like unexplained genital, ano-genital or oral lesion(s) (for example, ulcers, nodules) or proctitis. Under the enhanced laboratory surveillance on monkeypox, private medical practitioners could collect swab specimens for monkeypox testing from patients **without** relevant travel history while having compatible skin lesions and other risk factors, and submit them to the PHLSB for free testing. Details could be referred to our earlier letter to private medical practitioners dated 2 August 2022 accessible via https://www.chp.gov.hk/files/pdf/letter_to_doctors_on_enhanced_laboratory_surveillance_20220802.pdf



Worldwide, according to the World Health Organization as at 2 September 2022, a total of 52015 laboratory confirmed cases including 18 deaths had been reported from 102 countries or areas since 1 January 2022. Generally, severity has been low, with few reported hospitalisations and deaths. The vast majority of cases with available data (98.2%) were males, and the median age was 36 years. Among cases with known data on sexual orientation, 95.2% were identified as men who have sex with men, and 44.9% of cases with known HIV status were positive for HIV. WHO remarked that some countries in Europe and North America had a sustained decline in cases that reflected the effectiveness of public health interventions and community engagement to track infections and prevent transmission. While the global risk was assessed to be moderate, WHO continued to regard the risk of monkeypox in the Western Pacific region as low to moderate.

Last but not least, should you identify patients with suspected monkeypox fulfilling the case definition for reporting, please isolate the patient from other clients and report as soon as possible to CENO of CHP via fax (2477 2770), phone (2477 2772) during the office hour, or call our Medical Control Officer (pager: 7116 3300 call 9179) outside office hours.

Thank you for your continuous support in combating infectious diseases.

Yours faithfully,



(Dr. SK CHUANG)

for Controller, Centre for Health Protection
Department of Health