

本署檔號 Our Ref. : (29) in DH CDB/8/65/1  
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14 October 2022

Dear Doctor,

### Vigilance against melioidosis

We would like to draw your attention to the increase in cases of melioidosis in Hong Kong in recent months.

We received reports from Kowloon West Cluster of the Hospital Authority (HA) that 15 melioidosis cases living in Shum Shui Po have been admitted to hospitals from August to October. According to information from the HA, at least 29 melioidosis cases have been recorded in Hong Kong this year, involving 21 males and eight females, aged from 42 to 93 years, 20 of them live in Sham Shui Po and the other patients live in Kwun Tong, Wong Tai Sin, Sai Kung, Kwai Tsing, Eastern District and Yau Tsim Mong. Among them, six patients passed away, which involved four males and two females aged from 54 to 93 years, and all of them were known to have underlying diseases or immunodeficiency.

For the 15 cases reported by the Kowloon West Cluster, initial epidemiological investigations of the Centre for Health Protection (CHP) revealed that most patients were with underlying diseases and immunocompromised, and they had not visited any places in common. As the relevant patients all live in Sham Shui Po, the CHP has conducted investigations and collected relevant environmental samples in the area, and all samples were tested negative for melioidosis. Further epidemiological investigation and environmental sampling are ongoing.



Melioidosis is a disease caused by the bacterium *Burkholderia pseudomallei* prevalent in Southeast Asia and Northern Australia. Melioidosis cases have been recorded in Hong Kong each year, with 3 to 17 cases recorded annually in the past 5 years according to the records of the HA.

Melioidosis may present with localised infection (such as cutaneous abscess), pneumonia, meningoen­cephalitis, sepsis, or chronic suppurative infection. Depending on the site of infection, common symptoms include fever, headache, localised pain or swelling, ulceration, chest pain, cough, haemoptysis, and swelling of regional lymph nodes. According to overseas literature and local data, *Burkholderia pseudomallei* survives in the environment. Infection cases are more common after typhoons or storms. The bacteria in the soil and muddy water may expose to the ground after typhoons or storms, and would spread easier with strong wind and storms. High risk groups include those with underlying diseases or immunocompromised.

Melioidosis is a communicable disease of public health significance. The CHP has liaised with HA to closely monitor laboratory confirmed cases of melioidosis in response to the recent surge of disease. We would like to urge you to remain vigilant on melioidosis among patients with compatible symptoms and refer them to hospitals for further investigation and management as appropriate.

For more information about melioidosis and its prevention, please refer to the CHP website (<https://www.chp.gov.hk/en/healthtopics/content/24/101110.html>).

Thank you for your continuous support in combating infectious diseases.

Yours faithfully,



(Dr. SK CHUANG)

for Controller, Centre for Health Protection  
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