

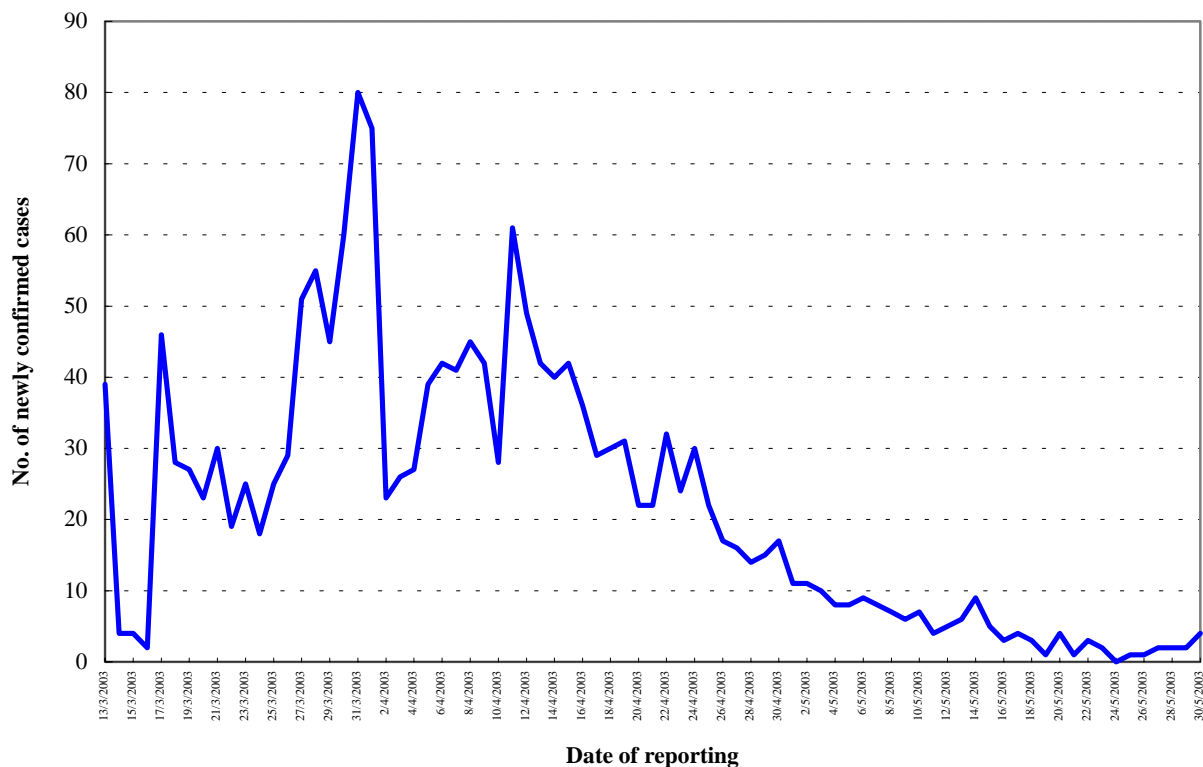
Health, Welfare & Food Bureau

SARS Bulletin

(31 May 2003)

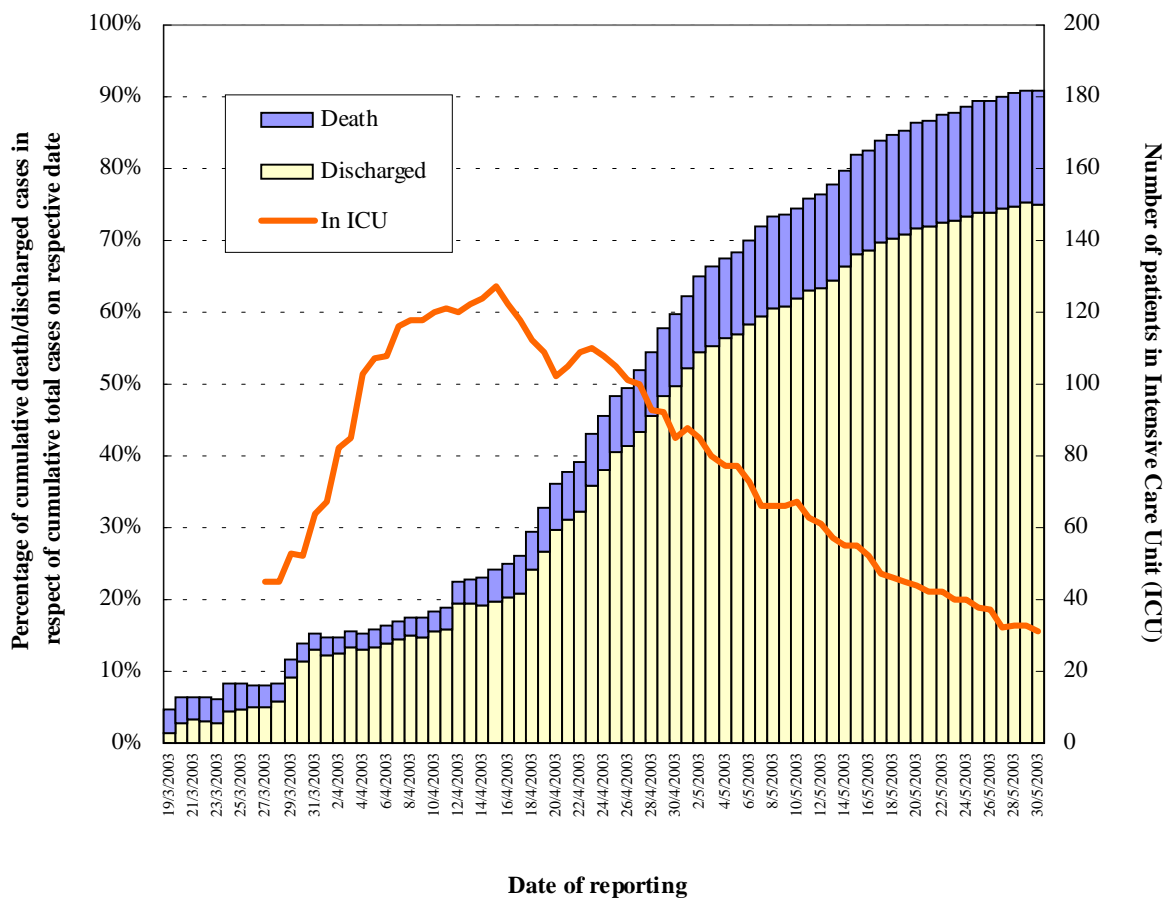
Summary of Cases

On 30 May, 4 more patients were confirmed to have Severe Acute Respiratory Syndrome (SARS), and the total number of SARS cases reached 1,736, including 381 health care workers or medical students. Since 16 May, the daily number of newly confirmed SARS cases has fallen below 5 for the 15th consecutive day. Although there was a decreasing trend in the number of new cases over the past 9 weeks (please refer to the following table) and the average number of newly confirmed cases in the past week was 2 per day, we still urge the public to continue their efforts to incorporate good hygienic practice into their living, and guard against lapses in personal and environmental hygiene.



2. On 30 May, 2 more patients with SARS had recovered from the disease and been discharged from hospitals, hence increasing the total number of recovered patients to 1,304. There were 158 SARS patients remaining in hospitals, in which 65 patients were undergoing convalescence before discharge and 31 patients were receiving treatment in the intensive care units. There were 12 suspected cases under treatment, and the cumulative total of fatal cases was 274.

3. The figure below shows the number of patients receiving treatment in the intensive care units, and the cumulative number of discharged cases and fatal cases as a percentage of the cumulative total cases on the respective reporting date. As at 30 May, 75% of the 1,736 SARS cases have recovered and been discharged from hospital, 16% have deceased and 9% remained in hospital. The number of SARS patients in the intensive care units reached a peak of 127 on 15 April and then decreased steadily to 31 on 30 May (i.e. less than a quarter of the peak value).



Latest Development

First tripartite meeting of Guangdong-Hong Kong-Macao Expert Group on Prevention and Treatment of Infectious Atypical Pneumonia

4. The first tripartite meeting of Guangdong-Hong Kong-Macao Expert Group on Prevention and Treatment of Infectious Atypical Pneumonia was attended by 40 health and medical professionals from the three places on 29 and 30 May in Hong Kong. During the meeting, experts from the three sides briefed their counterparts on their work and experience in the prevention of SARS. They also conducted in-depth discussion on areas including public health administration, clinical treatment, epidemiological investigations and pathological studies on the disease. Guangdong and Macao experts visited local medical and laboratory institutions to see the progress made on the clinical treatment and tracing of the source of infection.

5. In the two-day meeting, the three parties agreed on the following:

- To extend the present notification mechanism on SARS among Guangdong, Hong Kong and Macao. The existing point-to-point information exchange set-up between certain health units of Hong Kong and Guangdong will further be expanded to health administrative structures, disease surveillance and control as well as medical sectors of the three places.
- To enhance the information interflow on infection control in hospitals, data analysis on epidemic situation and clinical treatment of SARS.
- To strengthen the network of information flow on infectious diseases and expand the list of infectious diseases for notification among the three places to include AIDS, dengue fever, influenza, tuberculosis, cholera and malaria.
- To further enhance co-operation on scientific research and set up mutual visit programme for professionals and technical staff.

6. Experts of the three sides will continue to actively explore and study the characteristics of infectious diseases. This will serve as the basis and reference to the setting up of a medical facility for admission and treatment of patients with infectious

diseases. The three places also agreed to discuss in the next meeting the prevention and control of seasonal infectious diseases, like dengue fever.

Ongoing Development

Health Checks at Border Points

7. Since 29 March, medical posts have been set up at the airport, ports and border points to watch for travellers displaying symptoms of SARS, and all incoming passengers are required to complete a health declaration. Temperature checks for all arriving, departing and transit passengers at the Hong Kong International Airport have also been implemented since mid-April.

8. As regards other control points, arriving passengers via ports and land boundary crossings are subject to temperature screening in addition to health declaration with effect from 26 April. Since mid-May, departing passengers from the Hong Kong Macao Ferry Terminal and the China Ferry Terminal, and all passengers departing for the Mainland by through trains are required to undergo temperature checks before leaving Hong Kong. In addition, all close contacts of confirmed SARS patients are barred from leaving Hong Kong during their home confinement period.

9. As at 30 May, 2 passengers had been confirmed to have SARS since the implementation of all the above health checking measures.

Home Confinement

10. All household contacts of confirmed or suspected SARS patients are required to undergo home confinement for monitoring and treatment up to a maximum of 10 days. As at 30 May, 8 persons (from 6 households) were under this home confinement requirement. So far a total of 1,237 persons (from 486 households) had been affected by this requirement, of whom 33 of them were later confirmed to have SARS.

Health Advice/Further Information

Wearing Mask

11. SARS can be transmitted by respiratory droplets over a short distance or through direct contact with a patient's secretions. To prevent contracting the disease, it is important to observe good personal hygiene and build up body immunity by developing a healthy lifestyle. Wearing a mask properly offers satisfactory protection against SARS and other respiratory tract infections, and is one of the ways to prevent spread of the infection. Surgical masks, if properly worn, are effective in preventing the spread of droplet infections. The following people should wear a facemask:

- People with respiratory infection symptoms.
- People who care for patients with respiratory infection symptoms.
- People who have been in close contact with confirmed or suspected SARS patients should wear a mask for at least 10 days from the last contact.
- People visiting clinics or hospitals.
- Health care workers in clinical settings.
- Workers handling food.
- Public transport operational staff.
- People at crowded or poorly ventilated places.
- Pupils and staff at schools. (Except during physical education lessons or in a well-ventilated and spacious venue with no "short distance face-to-face activity" involved.)

12. As the list cannot be exhaustive, members of the public are reminded to exercise judgement in accordance with guidance given above. In general, anyone who feels the need to wear a mask is advised to do so, and please remember:

- Always keep a mask handy so that you can put one on as the need arises.
- Wash hands before putting on a facemask, before and after taking one off.

- Follow the instructions given by the supplier.

13. More information on wearing mask is available at the following web page: <http://www.info.gov.hk/dh/diseases/ap/eng/facemask.htm>.

Further Information

14. To empower the public in fighting against the SARS, DH has issued advices and guidelines on prevention of the disease for various sectors. Publicity programmes have been made to educate the public on all aspects of the disease, including the symptoms, the mode of transmission, the importance of seeking early treatment and various preventive measures namely personal and environmental hygiene. Health education information is available on the 24-hour pre-recorded hotlines (2833 0111) and has been uploaded onto a designated webpage of DH (<http://www.info.gov.hk/info/sars/eindex.htm>). A hotline (187 2222) has also been provided for public enquiries.

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Government of the Hong Kong Special Administrative Region