

Infectious Diseases

傳染病

Notifiable Infectious Diseases

According to the Prevention and Control of Disease Ordinance (Cap. 599), there were 47 notifiable infectious diseases in 2009 (Table C). Medical practitioners are required to notify the Department of Health of all suspected and confirmed notifiable infectious diseases. The Department of Health will conduct surveillance and initiate control and prevention of the infectious diseases.

須呈報的傳染病

根據《預防及控制疾病條例》(第599章)，在二零零九年本港共有47種須呈報的傳染病(表C)。醫生均須向衛生署呈報懷疑及證實屬須呈報傳染病的個案，以便衛生署進行傳染病監察及防控工作。

Table C : List of Notifiable Infectious Diseases, 2009

表 C : 二零零九年須呈報的傳染病

| | | |
|--|--|---|
| Acute poliomyelitis 急性脊髓灰質炎(小兒麻痺) | Hantavirus infection 漢坦病毒感染 | Relapsing fever 回歸熱 |
| Amoebic dysentery 阿米巴痢疾 | Influenza A(H2), Influenza A(H5), Influenza A(H7), Influenza A(H9), Swine Influenza# 甲型流行性感胃(H2)、甲型流行性感胃 (H5)、甲型流行性感胃(H7)、甲型流行 性感胃(H9)、豬型流行性感胃# | Rubella and congenital rubella syn- drome 風疹(德國麻疹)及先天性風疹綜合症 |
| Anthrax 炭疽 | Japanese Encephalitis 日本腦炎 | Scarlet fever 猩紅熱 |
| Bacillary dysentery 桿菌痢疾 | Legionnaires' Disease 退伍軍人病 | Severe Acute Respiratory Syndrome 嚴重急性呼吸系統綜合症 |
| Botulism 肉毒中毒 | Leprosy 麻風 | Smallpox 天花 |
| Chickenpox 水痘 | Leptospirosis 鈎端螺旋體病 | <i>Streptococcus suis</i> infection 豬鏈球菌感染 |
| Chikungunya fever* 基孔肯雅熱* | Listeriosis 李斯特菌病 | Tetanus 破傷風 |
| Cholera 霍亂 | Malaria 瘧疾 | Tuberculosis 結核病 |
| Community-associated methicillin- resistant <i>Staphylococcus aureus</i> infection 社區型耐甲氧西林金黃葡萄球菌感染 | Measles 麻疹 | Typhoid fever 傷寒 |
| Creutzfeldt-Jakob disease 克雅二氏症 | Meningococcal infection (invasive) 腦膜炎雙球菌感染(侵入性) | Typhus and other rickettsial disease 斑疹傷寒及其他立克次體病 |

Table C : (Cont'd) List of Notifiable Infectious Diseases, 2009
表 C : (續) 二零零九年須呈報的傳染病

| | | |
|---|--------------------------|---------------------------------------|
| Dengue fever 登革熱 | Mumps 流行性腮腺炎 | Viral haemorrhagic fever 病毒性出血熱 |
| Diphtheria 白喉 | Paratyphoid fever 副傷寒 | Viral hepatitis 病毒性肝炎 |
| Enterovirus 71 infection* 腸病毒71型感染* | Plague 鼠疫 | West Nile Virus Infection 西尼羅河病毒感染 |
| <i>Escherichia coli</i> O157:H7 infection 大腸桿菌O157:H7感染 | Psittacosis 鸚鵡熱 | Whooping cough 百日咳 |
| Food Poisoning 食物中毒 | Q fever 寇熱 | Yellow fever 黃熱病 |
| <i>Haemophilus influenzae</i> type b infection (invasive) 乙型流感嗜血桿菌感染(侵入性) | Rabies 狂犬病 | |

Notes : * From 6 March 2009.

From 27 April 2009.

註 : * 自二零零九年三月六日起。

自二零零九年四月二十七日起。

In 2009, a total of 48 000 cases of infectious diseases were notified. The top three diseases in terms of the number of notifications in 2009 were human swine influenza (34 174 cases), chickenpox (6 777 cases), and tuberculosis (5 193 cases) constituting 96.1% of these notifications. Excluding human swine influenza, there were a total of 13 826 cases recorded, which decreased by 16.6% as compared with 16 579 cases in 2008.

Chickenpox

There were 6 777 notifications of chickenpox in 2009. The number decreased by 24.1% as compared with 8 927 cases in 2008. Similar to previous years, the majority (70.8%) of cases occurred among children aged under ten.

二零零九年，共有48 000宗須呈報傳染病個案。以呈報宗數計，首三類傳染病為豬型流行性感冒(34 174宗)、水痘(6 777宗)、結核病(5 193宗)，合共佔所有呈報個案的96.1%。扣除豬型流行性感冒，共有13 826宗須呈報傳染病個案，較二零零八年的16 579宗減少16.6%。

水痘

二零零九年，呈報的水痘個案有6 777宗，較二零零八年的8 927宗減少24.1%。一如往年，大部分個案(70.8%)的病患者均為十歲以下的小童。

Tuberculosis

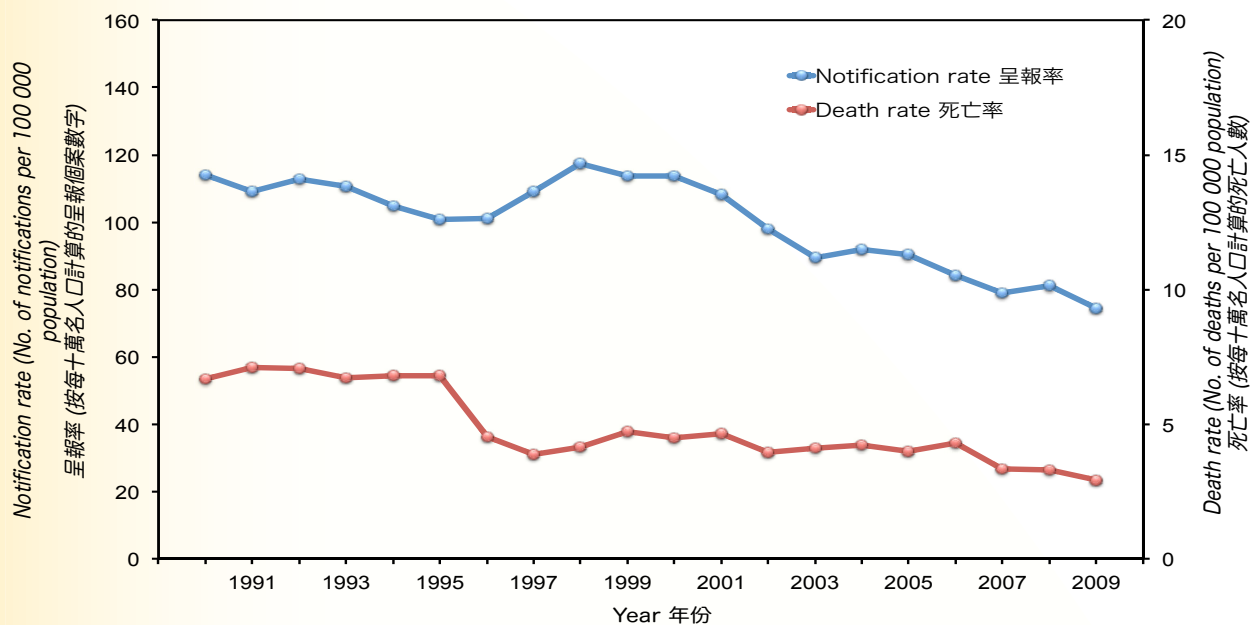
結核病

In 2009, the number of tuberculosis notifications was 5 193 and the notification rate was 74.5 per 100 000 population. Compared with 2008, the number of notifications decreased by 7.8% and the notification rate decreased by 6.5% (Figure 8).

二零零九年，呈報的結核病個案有5 193宗，而呈報率是每十萬名人口有74.5宗。跟二零零八年比較，呈報個案數字下降了7.8%，而呈報率則下降了6.5% (圖8)。

Figure 8 : Notifications and Death Rates of Tuberculosis, 1990 - 2009

圖 8 : 一九九零年至二零零九年結核病呈報率及死亡率



Viral hepatitis

病毒性肝炎

There were 220 notifications of viral hepatitis in 2009, of which 64 were hepatitis A, 80 were hepatitis B, three were hepatitis C, 73 were hepatitis E. Compared with 2008, the number of notifications for hepatitis A, hepatitis B and hepatitis E decreased by 9.9%, 3.6% and 18.9% respectively. There was no change for Hepatitis C notification.

二零零九年，病毒性肝炎呈報個案有220宗，其中64宗為甲型肝炎，80宗為乙型肝炎，三宗為丙型肝炎，73宗為戊型肝炎。跟二零零八年比較，甲、乙及戊型肝炎的呈報個案數字分別下降了9.9%、3.6%及18.9%。而丙型肝炎個案呈報則沒有改變。

Vaccine preventable diseases

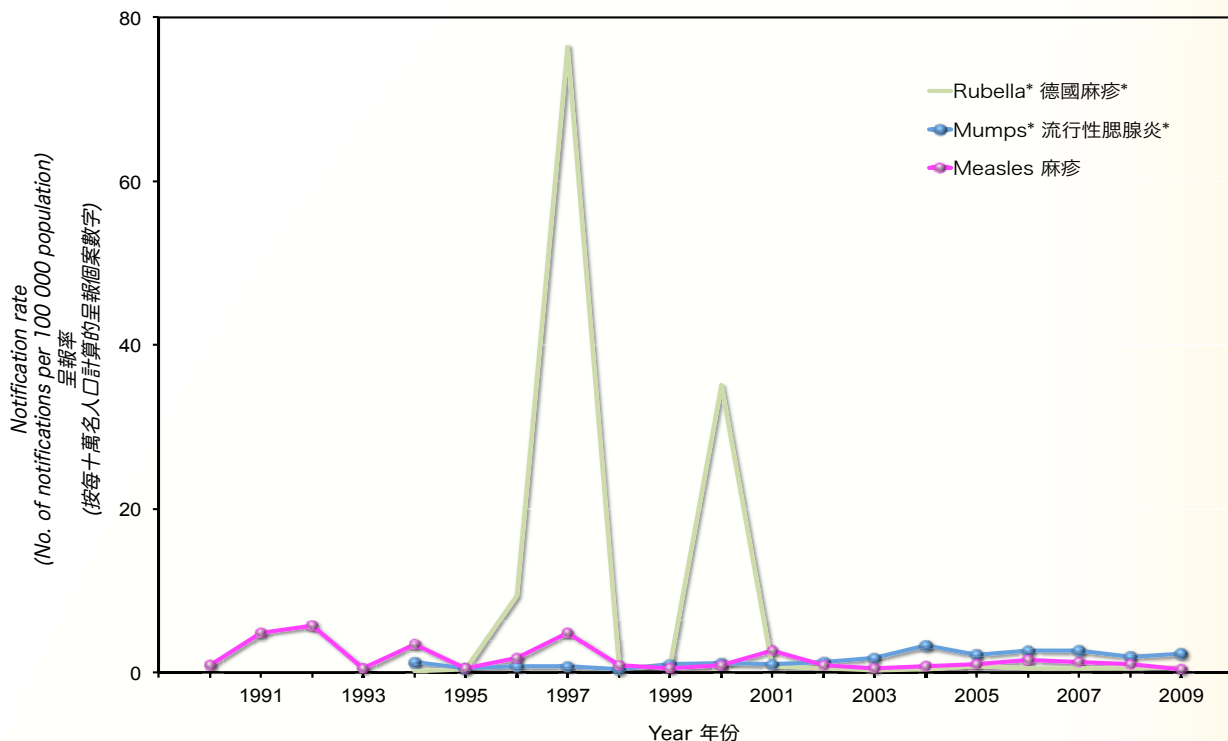
疫苗可預防的疾病

There were 155 cases of mumps, 26 cases of measles, 42 cases of rubella, one case of tetanus and 15 cases of whooping cough notified to the Department of Health in 2009. There was no notification for congenital rubella syndrome in 2009. The number of notifications of vaccine preventable diseases remained low in 2009. The coverage rates of vaccines included in the childhood immunisation programme were very high. The trends of some vaccine preventable diseases are shown in Figure 9.

二零零九年，衛生署共接報155宗流行性腮腺炎、26宗麻疹、42宗德國麻疹、一宗破傷風及15宗百日咳呈報個案。二零零九年並沒有接獲先天性風疹綜合症個案。該年，疫苗可預防疾病的呈報數字維持在低水平。而在兒童免疫接種計劃中，各疫苗的覆蓋率均處於非常高的水平。圖9顯示一些疫苗可預防疾病的趨勢。

Figure 9 : Notification Rates of Some Vaccine Preventable Diseases, 1990 - 2009

圖 9 : 一九九零年至二零零九年一些疫苗可預防疾病的呈報率



Notes: Case definition for mumps has been changed in 2003.

* Notifiable since 1994.

註：流行性腮腺炎於二零零三年採用新的病例定義。

* 由一九九四年起須呈報的疾病。

Foodborne diseases

食物傳播的疾病

In 2009, there were 407 notifications of food poisoning outbreak, with 1 540 persons affected, 86 cases of bacillary dysentery, 89 cases of typhoid fever and 27 cases of paratyphoid fever. There was no notification for cholera in 2009.

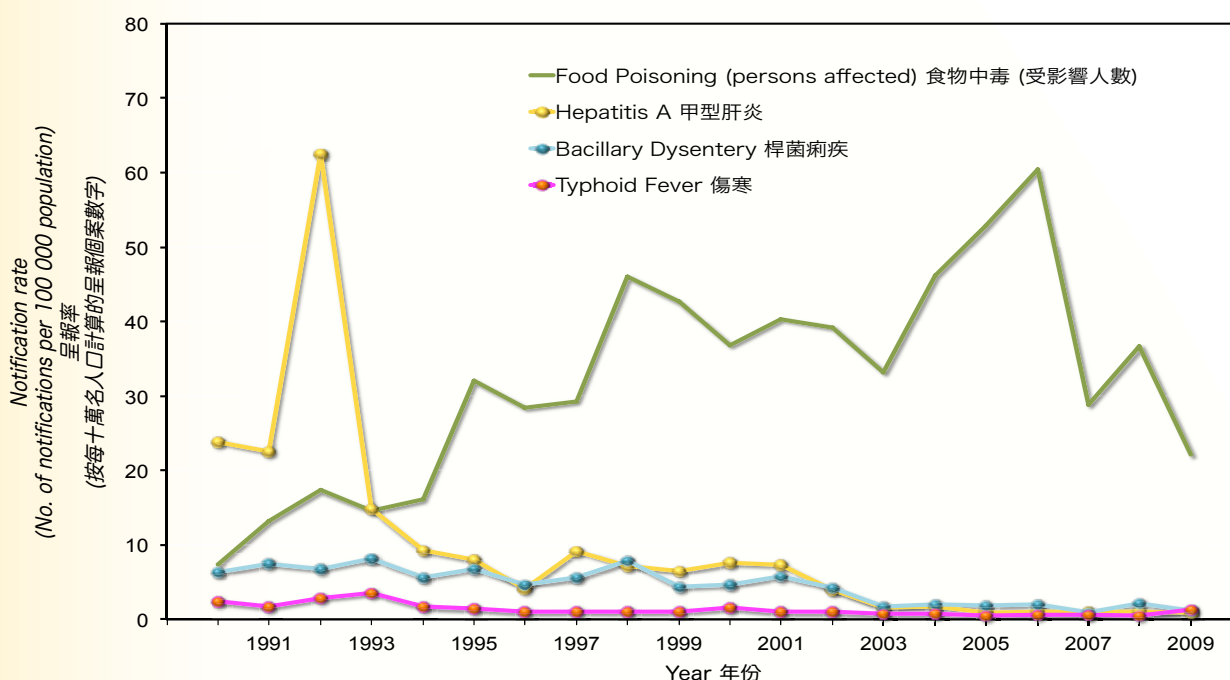
二零零九年，共有407宗食物中毒呈報個案，涉及1 540人；另有86宗桿菌痢疾、89宗傷寒及27宗副傷寒的呈報個案。二零零九年並沒有接獲霍亂個案。

Bacteria remained the major cause of food poisoning outbreaks, accounting for 78.1% of all outbreaks. About 17.4% of all outbreaks were laboratory-confirmed and the three most common causative agents were *Salmonella species*, *Vibrio parahaemolyticus* and noroviruses. Food poisoning caused by chemicals or biotoxins was also reported. There were 11 outbreaks (21 persons affected) caused by ciguatera toxin. Figure 10 shows the trends of common foodborne diseases.

細菌仍然是引致食物中毒的主因，佔所有呈報個案的78.1%。經由實驗室證實的個案約佔所有呈報的17.4%。最常見的三種致病原是沙門氏菌、副溶血性弧菌及諾如病毒。另外，呈報個案中亦有由化學物或生化毒素引起的。由雪卡毒引起的爆發個案有11宗(涉及21人)。圖10顯示常見的食物傳播疾病的趨勢。

Figure 10 : Notification Rates of Common Foodborne Diseases, 1990 - 2009

圖 10 : 一九九零年至二零零九年常見的食物傳播疾病的呈報率



Vector-borne diseases

There were 43 dengue fever cases reported in 2009. All were imported mainly from Asian countries, with cases from Thailand, Indonesia and the Philippines together contributed 67.4% of the total.

As for malaria, 23 cases were reported in 2009. Twelve cases were caused by *Plasmodium vivax*, nine were by *Plasmodium falciparum* and two were by *Plasmodium malariae*. All malaria cases in 2009 were imported from Asia (16 cases) and Africa (seven cases).

In 2009, there were 40 reported cases of “typhus and other rickettsial diseases” with 20 scrub typhus, 13 spotted fever, five urban typhus and two unclassified cases.

Other Infectious Diseases

Surveillance systems have also been set up to monitor other infectious diseases or conditions with public health importance such as human immunodeficiency virus (HIV) infection, influenza-like illness, hand, foot and mouth disease, acute conjunctivitis and acute diarrhoeal diseases, as well as antibiotic resistance.

The HIV surveillance programme of the Department of Health has an important role in monitoring the trend of HIV infection for formulating healthcare and prevention programme. The programme collects data regularly through voluntary reporting, sero-prevalence monitoring of selected groups and unlinked anonymous screening. All personal information is kept confidential. At the end of 2009, the number of reported HIV and Acquired Immune Deficiency Syndrome (AIDS) cases were

傳病媒介傳播的疾病

在二零零九年，登革熱呈報個案有43宗。全為外地傳入個案，主要由亞洲國家傳入，而泰國、印尼及菲律賓佔所有傳入個案的67.4%。

至於瘧疾，二零零九年的呈報個案有23宗，其中12宗由間日瘧原蟲引起，九宗由惡性瘧原蟲引起，兩宗由三日瘧原蟲引起。二零零九年的所有個案均由外地傳入，並源自亞洲(16宗)及非洲(七宗)。

二零零九年，斑疹傷寒及其他立克次體病呈報個案有40宗，其中20宗為叢林斑疹傷寒，13宗為斑疹熱，五宗為城市斑疹傷寒及兩宗為未能分類個案。

其他傳染病

政府亦設立監察系統，監控對公共衛生有重要影響的其他傳染病及疾病，例如愛滋病病毒感染、流感類病症、手足口病、急性結膜炎(紅眼症)和急性腸道傳染病，以及細菌抗藥性。

衛生署愛滋病監察計劃對當局監察愛滋病病毒感染的趨勢，從而制定護理和預防計劃十分重要。這項計劃透過自願呈報、監察選定組別人士血清中帶有病毒抗體的普遍率和非聯繫不記名檢查，定期搜集有關資料。所有個人資料均會保密。至二零零九年底，已呈報的愛滋病病毒感染個案有4 443宗，愛滋病個案則有1 106宗。性接觸傳染仍然是最重要的傳播模式。

4 443 and 1 106 respectively. Sexual transmission continues to be the most important mode of spread of the infection.

A sentinel surveillance system is in place in Hong Kong to monitor influenza-like illness, hand, foot and mouth disease, acute conjunctivitis, acute diarrhoeal diseases and antibiotic resistance. The system operates through the support of a network of 64 General Out-patient Clinics in the public sector and some 40 doctors in the private sector.

Results of the influenza-like illness sentinel surveillance system showed that the most prevalent strains of influenza viruses during the year 2009 were human swine influenza, seasonal influenza A H1N1, influenza A H3N2 and influenza B viruses. The peak months in 2009 were around February to March and July to October.

The hand, foot and mouth disease sentinel surveillance programme was established in 1998 to monitor the trend of hand, foot and mouth disease in Hong Kong. In 2009, the disease activity was lower during the traditional peak season of May to July, compared with the corresponding period in the past three years.

Sentinel surveillance on acute conjunctivitis and acute diarrhoeal diseases was implemented in July 2001 to monitor the disease trend and identify the causative agents of these two diseases. For acute conjunctivitis, consultation rates remained stable in 2009.

Sentinel surveillance on antibiotic resistance was established in 1999 to monitor the trend of antibiotic resistance at the community level. Nasal swabs, throat swabs, mid-stream urine and stools are collected. The results are regularly released

香港設立了定點監測系統，以監察流感類病症、手足口病、急性結膜炎（紅眼症）、急性腸道傳染病及細菌的抗藥性。這個系統是通過64間公營的普通科門診診所和約40名私家醫生的網絡運作。

流感類病症定點監測系統的監察結果顯示，二零零九年最常見的流感病毒類型為人類豬型流感、季節性甲型(H1N1)流感病毒、甲型(H3N2)流感病毒及乙型流感病毒，發病高峰期大致為二月至三月及七月至十月。

手足口病定點監測計劃於一九九八年設立，以監察手足口病的發病趨勢。在二零零九年，手足口病在五至七月的高峰期較過去三年同期較為輕微。

急性結膜炎(紅眼症)及急性腸道傳染病定點監測計劃於二零零一年七月推行，以監察這兩種疾病的趨勢，並確定其病原體。在二零零九年，急性結膜炎(紅眼症)的求診率保持平穩。

細菌的抗藥性定點監測計劃在一九九九年設立，以監察在社區層面細菌的抗藥性趨勢。樣本包括鼻腔分泌物、喉嚨分泌物、中段尿液和糞便。有關結果定期在衛生署及衛生防護中心的網站公布，

at websites of the Department of Health, as well as the Centre for Health Protection, for reference by medical and dental practitioners in Hong Kong.

Apart from General Out-patient Clinics and private medical practitioners, three other sentinel surveillance systems have been set up since 2005 to monitor various syndromes so as to strengthen surveillance of infectious diseases. A surveillance system based at 57 elderly homes was established to monitor trends of fever, diarrhoea and vomiting and related hospitalisation among institutionalised elders. Another system based at some 40 child care centres was set up to detect trends of syndromes (including fever, cough, diarrhoea and vomiting) and absenteeism, as well as monitoring trends of acute conjunctivitis and hand, foot and mouth disease. In 2009, this system was extended to over 120 kindergartens and child care centres. In 2007, the sentinel surveillance system based at about 50 Chinese medicine practitioners was implemented for monitoring the trends of influenza-like illness and acute diarrhoeal disease in the community. The results of all these surveillance systems are regularly released at websites of the Centre for Health Protection, for reference by all sectors.

Occupational Diseases

Under the Occupational Safety and Health Ordinance (Cap. 509), all medical practitioners are required to notify the Labour Department of cases of occupational diseases specified in Schedule 2 of the Ordinance. The Occupational Health Service of the Labour Department will, upon receipt of such notifications, investigate the causes of the occupational diseases and advise the employers and employees on necessary remedial and preventive measures.

供本港的醫生及牙醫參考。

為加強傳染病監測，自二零零五年起，除普通科門診及私家醫生的定點監測系統外，衛生署更設立安老院舍及幼兒中心的定點監測系統。前者通過57間院舍監測安老院舍長者出現發燒、急性腹瀉及嘔吐的情況及因該病徵而入院的趨勢；後者則透過約40間幼兒中心，監測幼童病徵(發燒、咳嗽、腹瀉及嘔吐)及因病缺席的趨勢，並監測急性結膜炎及手足口病的趨勢。在二零零九年，此系統擴展至超過120幼稚園及幼兒中心。在二零零七年，更透過約50位中醫師設立中醫師定點監測系統，以監測流感類病症和急性腸道傳染病在社區的趨勢。有關結果定期在衛生防護中心的網站公布，供各界人士參考。

職業病

根據《職業安全及健康條例》(第509章)，所有醫生須向勞工處呈報條例附表2中訂明職業病的個案。勞工處的職業健康服務部在接獲呈報後，會調查導致職業病的原因，並向僱主及僱員提出所需補救及預防措施的建議。