

# Pesticide residue exceeds legal limit in white string beans sample

The Centre for Food Safety (CFS) of the Food and Environmental Hygiene Department today (November 21) announced that a white string beans sample was found to contain pesticide residue at a level exceeding the legal limit. The CFS is following up on the case.

A CFS spokesman said, "The CFS collected the white string beans sample from an online shop for testing under its routine Food Surveillance Programme. The test result showed that the sample contained carbofuran at a level of 0.87 parts per million (ppm), exceeding the legal maximum residue limit (MRL) of 0.1 ppm.

"Based on the level of pesticide residue detected in the sample, acute adverse health impacts on high consumers cannot be ruled out. Symptoms include vomiting, nausea, abdominal cramps, sweating, diarrhoea, blurred vision, breathing difficulties and elevated blood pressure," he added.

Generally speaking, to reduce pesticide residues in vegetables, members of the public can rinse vegetables thoroughly under clean running water, and scrub produce with hard surfaces with a clean brush to remove dirt and substances including pesticides and contaminants from the surface and the crevices, when appropriate.

Any person who imports, manufactures or sells any food not in compliance with the requirements of the Pesticide Residues in Food Regulation (Cap 132CM) concerning pesticide residues commits an offence and is liable to a maximum fine of \$50,000 and to imprisonment for six months upon conviction.

Since the regulation came into effect on August 1, 2014, the CFS has taken over 162,300 samples at import, wholesale and retail levels for testing for pesticide residues. Together with the unsatisfactory sample announced today, a total of 239 food samples (including 231 vegetable and fruit samples) have been detected as having excessive pesticide residues. The overall unsatisfactory rate is less than 0.2 per cent.

The spokesman added that excessive pesticide residues in food may arise from the trade not observing Good Agricultural Practice, e.g. using excessive pesticides and/or not allowing sufficient time for pesticides to decompose before harvesting. The MRLs of pesticide residues in food set in the Regulation are not safety indicators. They are the maximum concentrations of pesticide residues to be permitted in a food commodity under Good Agricultural Practice when applying pesticides. In this connection, consumption of food with pesticide residues higher than the MRLs will not necessarily lead to any adverse health effects.

The CFS will follow up on the unsatisfactory result, including tracing the source of the food in question and taking samples for testing.

Investigation is ongoing.

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## **PMSA launches public consultation on licensing regime for property management companies and property management practitioners**

The following is issued on behalf of the Property Management Services Authority:

The Property Management Services Authority (PMSA) launched a public consultation today (November 21) on proposals regarding the licensing regime for property management companies and property management practitioners under the Property Management Services Ordinance (Cap. 626) (PMSO). The consultation will last six weeks until January 2, 2019.

Under section 15 of the PMSO, the Authority may, by regulation, prescribe the criteria and related matters for holding property management company and property management practitioner licences. The PMSA has been actively liaising with stakeholders on the details of the licensing regime to gauge views from various parties and to better understand the mode of operation of the industry for formulation of a practicable licensing regime which is beneficial to the industry and the public. Having considered the views of the industry and stakeholders, the PMSA formulated the proposals on the licensing regime as contained in the consultation document. Before establishing the licensing regime, the PMSA would like to seek the views of the public.

The consultation document can be downloaded from the PMSA's [website](#). Members of the public are welcomed to submit their views to the PMSA by email ([consultation@pmsahk.org.hk](mailto:consultation@pmsahk.org.hk)), fax (3696 1100) or post to the PMSA's office (Units 904-5, 9/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong) during the consultation period.

The PMSA is a statutory body established in accordance with section 42(1) of the PMSO and is tasked to regulate the provision of property management services by companies and practitioners in Hong Kong, and to promote professional development of the industry. Through formulating and implementing a licensing regulatory regime and other complementary measures that suit the situation in Hong Kong, the PMSA aims to encourage and assist the property management industry and its practitioners in striving for enhancement in quality and professionalism, so as to provide property owners, occupiers and users with professional property management services.

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# Hospital Authority sets up Root Cause Analysis Panel to enhance effectiveness of X-ray findings assessment

The following is issued on behalf of the Hospital Authority:

The Hospital Authority (HA) today (November 21) announced the establishment of a Root Cause Analysis (RCA) Panel following three cases of undue oversight of abnormal X-ray findings that happened recently.

The HA noted three incidents of undue oversight of abnormal X-ray findings reported by hospitals via the Advance Incident Reporting System recently. Due to the coincidence in reporting time and similarities in the nature of the incidents, the Quality and Safety Department decided to set up an RCA Panel at the Head Office level to collectively examine the three cases with a view to exploring means to better support healthcare workers and ensure that they can identify abnormalities in chest X-ray findings in a more timely manner.

In consideration of patients' and families' wishes of masking their individual particulars, below is the salient information of the cases concerned.

1) A patient was admitted to the surgical ward of Prince of Wales Hospital via the Accident and Emergency Department (AED) for cholecystitis in November this year. Chest X-ray examination was arranged and an opacity over the left upper zone of the lung was found. Upon reviewing the patient's previous chest X-ray films, the doctor noted that the patient had taken an X-ray examination at the hospital in March 2017 and the X-ray film also showed a shadow on the left lung. Computed tomography (CT) scanning of the thorax, the abdomen and the pelvis was then arranged and the report showed a left upper lobe lung mass highly suspected to be malignant. Further investigations confirmed that the patient has a metastatic lung tumour. The patient is receiving appropriate medical treatment as indicated.

2) A patient of Queen Mary Hospital (QMH) sought medical treatment at Ruttonjee Hospital in October this year due to epigastric discomfort. A chest X-ray was performed and the report showed a mass suspected to be malignant. The patient was referred to Grantham Hospital for further assessment from the Tuberculosis and Chest Medicine Unit. Upon reviewing the patient record, it was found that among the chest X-rays taken in QMH since 2016, the mass had not been detected three times. The hospital has now arranged follow-up examinations for the patient to establish the most

suitable treatment plan.

3) A patient attended the A&E of Princess Margaret Hospital in November this year due to a fall accident. The patient was suffering from dyspnea and was admitted to the Medicine and Geriatrics ward. Chest X-ray examination suggested massive pleural effusion and therefore a chest drain procedure was arranged to deal with the condition. A subsequent pleural fluid cytology finding confirmed that the patient has lung cancer. Upon reviewing patient's chest X-ray films taken in February 2017 and May 2018, it was found that a shadow in the right lung was unnoticed on both occasions. The patient is now being taken care of by the Medicine and Geriatrics Department as well as the Oncology Department. CT scanning has been arranged for further examination and devising a treatment plan.

Open disclosure has been conducted by the three hospitals concerned in addition to expressing apologies to the patients and their families. The three hospitals will continue to provide follow-up treatment according to the patients' clinical conditions and to provide assistance as necessary to the patients and their families. The hospitals have reminded front-line colleagues to be cautious in reviewing patients' examination findings to ensure timely diagnosis and treatment.

The HA attaches great importance to the quality and safety of patient services and has grave concern over the irregularities. The HA will invite representatives from Central Co-ordinating Committees of respective specialties to participate in the RCA Panel. The report will be completed and disclosed in eight weeks.

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## Managers of unlicensed guesthouses fined

Two men and a woman were charged with contravening the Hotel and Guesthouse Accommodation Ordinance at the Kowloon City Magistrates' Courts today (November 21). The woman was sentenced to one month's imprisonment, suspended for one year, and fined \$3,000. The two men were fined \$6,000 each.

The courts heard that in April this year, officers of the Office of the Licensing Authority (OLA), the Home Affairs Department, inspected three suspected unlicensed guesthouses on Shanghai Street, Portland Street and Mong Kok Road in Mong Kok. During the inspections, the OLA officers posed as lodgers and successfully rented rooms in these guesthouses on a daily basis.

According to the OLA's records, these guesthouses did not possess licences under the Ordinance on the days of inspection. The men and woman responsible for managing the premises were charged with contravening section

5(1) of the Ordinance.

A department spokesman stressed that operating or managing an unlicensed guesthouse is a criminal offence and will lead to a criminal record. Upon conviction, the offender is liable to a maximum fine of \$200,000 and two years' imprisonment.

The spokesman appealed to anyone with information about suspected unlicensed guesthouses to report it to the OLA through the hotline (Tel: 2881 7498), by email ([hadlaeng@had.gov.hk](mailto:hadlaeng@had.gov.hk)), by fax (2504 5805) using the report form downloaded from the OLA website ([www.hadla.gov.hk](http://www.hadla.gov.hk)), or through the mobile application "Hong Kong Licensed Hotels and Guesthouses".

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## **CHP investigates influenza A outbreak at primary school in Eastern District**

The Centre for Health Protection (CHP) of the Department of Health is today (November 21) investigating an influenza A outbreak at a primary school in Eastern District, and again reminded the public to maintain strict personal and environmental hygiene against influenza.

The outbreak involves 10 boys and nine girls aged 10 to 11, as well as one female staff member, who developed cough, sore throat and fever since November 13. All of them sought medical attention and none required hospitalisation. They are now in a stable condition.

The nasopharyngeal swab of four students tested positive for influenza A virus.

Officers of the CHP have conducted a site visit and advised the school to adopt necessary infection control measures against respiratory infections. The school has been put under medical surveillance.

A spokesman for the CHP said, "To prevent outbreaks of influenza and other respiratory infections, it is of prime importance that children with fever, regardless of the presence of respiratory symptoms, should not be allowed to attend school. They should seek medical advice and avoid school till 48 hours after the fever has subsided. Schools should also measure and record students' body temperature properly."

Schools are reminded to follow the [Guidelines on Prevention of Communicable Diseases](#) on preventive and control measures as well as management of outbreaks, which should be reported to the CHP for prompt follow-up.

"Influenza can cause serious illnesses in high-risk individuals and even healthy persons. Given that influenza vaccines are safe and effective, all persons aged 6 months or above, except those with known contraindications, are recommended to receive Seasonal Influenza Vaccine(SIV) for personal protection," the spokesman said.

Based on past epidemiological patterns, the winter influenza season usually occurs from January to March/April each year. As it takes about two weeks to develop antibodies, we urge eligible persons to receive SIV early for protection against seasonal influenza. Vaccination among family members is key to protecting their personal and family's health."

Besides receiving seasonal influenza vaccine for personal protection, the public should maintain good personal and environmental hygiene for protection against influenza and other respiratory illnesses. For more information, please visit the CHP's [influenza page](#) and weekly [Flu Express](#).