

[Fraudulent website related to Bank Julius Baer & Co. Ltd.](#)

The following is issued on behalf of the Hong Kong Monetary Authority:

The Hong Kong Monetary Authority (HKMA) wishes to alert members of the public to a press release issued by Bank Julius Baer & Co. Ltd. relating to a fraudulent website, which has been reported to the HKMA. A hyperlink to the press release is available on the [HKMA website](#).

The HKMA wishes to remind the public that banks will not send SMS or emails with embedded hyperlinks which direct them to the banks' websites to carry out transactions. They will not ask customers for sensitive personal information, such as login passwords or one-time password, by phone, email or SMS (including via embedded hyperlinks).

Anyone who has provided his or her personal information, or who has conducted any financial transactions, through or in response to the website concerned, should contact the bank using the contact information provided in the press release, and report the matter to the Police by contacting the Crime Wing Information Centre of the Hong Kong Police Force at 2860 5012.

[LCQ16: Coronavirus disease 2019 vaccines](#)

Following is a question by the Hon Paul Tse and a written reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (November 30):

Question:

Last year, the authorities allocated funding to subsidise the University of Hong Kong to research and develop a nasal vaccine against the coronavirus disease 2019 (COVID-19) which is pioneered in Hong Kong with relatively less side effects (the research and development (R&D) project), but so far it is still "all thunder but no rain". It has been reported that in Shanghai, scientific research institutes have taken the lead in launching an "inhaled" COVID-19 vaccine booster, and the Jiangsu Provincial Center for Disease Control and Prevention has even pointed out that the immune effect of the inhaled COVID-19 vaccine booster is significant. In this connection, will the Government inform this Council:

- (1) of the up-to-date progress of the R&D project;
- (2) of the accumulated amount of subsidy provided by the Government for the R&D project since last year;
- (3) whether it has estimated how much time and capital still need to be committed to the R&D project before its vaccine can be put on the market for use by members of the public;
- (4) as the inhaled COVID-19 vaccine booster researched and developed by the Mainland scientific research institutes has been given consent for emergency use on the Mainland, whether the Government will continue to subsidise the aforesaid R&D project which is pioneered in Hong Kong but is still at the R&D stage; if so, whether it has assessed if it is cost-effective to do so;
- (5) regarding the aforesaid R&D project which is pioneered in Hong Kong but has not yet been able to "bear fruit", whether the authorities have explored and assessed if the reasons for its longer R&D period are related to the inadequacy of the research subsidy and R&D support received by it; and
- (6) whether the authorities will consider procuring the aforesaid inhaled COVID-19 vaccine boosters from the Mainland, with a view to providing an additional option for those members of the public who are afraid of receiving invasive intramuscular vaccination; if so, of the details; if not, the reasons for that?

Reply:

President,

Research and development to market use of a new vaccine generally take considerable time. In response to the COVID-19 pandemic, drug manufacturers around the world have raced against time and pooled together resources to develop vaccines, with a view to compressing the development timeline for effective vaccines on the premise that safety and quality are ensured. Currently, there are 11 COVID-19 vaccines listed for emergency use by the World Health Organization (WHO) and being used around the world. Furthermore, according to information by the WHO, there are more than 170 types of COVID-19 candidate vaccines worldwide still in clinical development stage, and there are nearly 200 of them still in pre-clinical development stage.

The reply to the various parts of the question raised by the Hon Paul Tse is as follows:

(1) to (5) The Government has all along welcomed vaccine development by research institutions in Hong Kong. Since April 2020, the Health and Medical Research Fund (the Fund) under the Health Bureau has supported four COVID-19 vaccine-related research projects undertaken by two local universities with a total commitment of \$29.5 million. Among them, the Department of Microbiology of the Faculty of Medicine of the University of Hong Kong has partnered with Xiamen University and Wantai Biopharmaceutical Company to develop a nasal

spray COVID-19 vaccine ("VectorFlu™ ONE"). The development of this vaccine has received funding of around \$20 million from the Fund to support the first phase safety and Phase II clinical trials so as to evaluate the safety and immunogenicity of the vaccine. The Phase I clinical trial has been completed in 29 volunteers aged 18 to 55 with no major adverse effects reported, showing the vaccine is safe for human use. Also, the Phase II clinical trial of the vaccine as a booster has been conducted in more than 100 volunteers aged 18 to 75. The project team is currently collecting the immune response data for analysis, which is expected to be completed by first quarter of 2023. It is learnt that the Phase III clinical trial of this vaccine is being carried out by the Wantai Biopharmaceutical Company. The Fund will continue to provide resources in a timely manner to support local research so as to tie in with the Government's anti-epidemic efforts.

(6) The COVID-19 Vaccination Programme led by the Government was launched in February last year to provide members of the public with two safe and effective COVID-19 vaccines, namely the Sinovac and Comirnaty vaccines. The relevant vaccines have been authorised for emergency use. The two vaccines are respectively developed from the inactivated virus and mRNA technology platforms. Since the launch of the vaccination programme, the Government has procured a total of around 9.46 million doses of the Sinovac vaccine and around 14.3 million doses of the Comirnaty vaccine (comprising about 12.3 million doses of the adult formulation, 19 000 doses of the paediatric formulation, 96 000 doses of the toddler formulation, and 1.9 million doses of the Original/Omicron BA.4-5 bivalent vaccine adult formulation). According to the recommended vaccination doses for different groups by the Joint Scientific Committee and the Chief Executive's expert advisory panel, the quantity of vaccines procured is expected to be sufficient for providing the first to third dose vaccine to all citizens of Hong Kong under the COVID-19 Vaccination Programme led by the Government, and to provide the fourth dose as a booster dose to a portion of persons aged 50 or above who have not been infected with COVID-19 and persons aged 18 to 49 who are at a higher risk of COVID-19 exposure and have not been infected with COVID-19. The Government will closely monitor the demand for the fourth dose and consider purchasing additional doses should the need arise. For the time being, the Government has no plan to supply and authorise COVID-19 vaccines other than the Sinovac and Comirnaty vaccines for emergency use. The Government will continue to monitor the overall situation of research and development of COVID-19 vaccines and the global epidemic development, as well as keep close liaison with various drug manufacturers. Having regard to scientific evidence, clinical data and expert advice, the Government does not rule out the possibility of purchasing newly developed COVID-19 vaccines of other technology platforms on a trial basis. The Government has also amended the relevant legislation to facilitate and encourage drug manufacturers to register in Hong Kong and supply their COVID-19 vaccines which are mature for roll-out in the market for the purpose of general vaccination, with a view to providing members of the public with different vaccine choices.

Public hospitals prepare for winter service surge

The following is issued on behalf of the Hospital Authority:

As the temperature drops gradually, public hospitals are anticipating the challenges from the winter service surge and COVID-19 simultaneously. The Hospital Authority (HA) will launch a series of response measures tomorrow (December 1) to cope with the increase in demand for Accident and Emergency (A&E) Departments and inpatient services. Meanwhile, the HA appeals to members of the public to get vaccinated early for seasonal flu and COVID-19, to reduce their and their family's risk of being infected.

The HA Chief Manager (Cluster Performance), Dr Michael Wong, said that the HA has allocated over \$700 million to all clusters to arrange facilities and manpower for preparedness, in order to enhance service for patients during the service surge. "Public hospitals have reserved resources for opening temporary beds, and planning for manpower, such as encouraging and facilitating healthcare staff to join the Special Honorarium Scheme, and the ongoing recruitment of locum and part-time healthcare staff."

Dr Wong stressed that the HA will strengthen its gate-keeping to lessen unnecessary hospital admissions. The Emergency Operation Command is able to mobilise facilities and resources at any time to cope with rising service demand. Hospitals will continue to reinforce laboratory services, ward rounds of clinicians, supporting service for hospital discharge and transfer; geriatrics support to A&E, as well as night shift nursing and supporting staff manpower in order to enhance patient service.

Community support is also very important during a service surge. Dr Wong said that the HA will keep collaborating with private hospitals by transferring suitable patients for treatment, and maintain other Public-Private Partnership Programmes.

Dr Wong also appealed to the public for their understanding and co-operation. Non-urgent patients are advised to avoid using A&E Departments and to seek consultation at general out-patient clinics (GOPC), private doctors or the 24-hour clinics of private hospitals. To choose a suitable family doctor and related clinic service, members of the public are welcome to browse the Primary Care Directory of the Food and Health Bureau at www.pcdirectory.gov.hk.

"General out-patient clinics service will be enhanced by an addition of 18 000 service quotas, including around 3 500 quotas during the long holidays. More clinics will provide service during Christmas, Chinese New Year and Easter long holidays, to cover more districts," Dr Wong added.

To facilitate public understanding of the public hospital service

situation during the winter surge, the HA will display key service statistics, A&E waiting times and medical consultation information at the designated website www.ha.org.hk/goto/wintersurge/en and in "Service Surge Online" on the "HA Go" mobile application from tomorrow onwards.

Scientific Committee updates recommendations on HPV vaccination in Hong Kong

The Scientific Committee on Vaccine Preventable Diseases (SCVPD) under the Centre for Health Protection of the Department of Health (DH) convened an online meeting yesterday (November 29) to discuss the use of the human papillomavirus (HPV) vaccine in Hong Kong. The updated recommendations were published today (November 30).

Currently, eligible female primary school students of suitable ages will be provided with HPV vaccine under the Hong Kong Childhood Immunisation Programme (HKCIP) to prevent cervical cancer. The first dose of HPV vaccine is given via outreach by the DH's School Immunisation Teams to Primary Five female students at their schools, and a second dose is given to the girls when they reach Primary Six in the following school year.

The SCVPD, upon reviewing up-to-date overseas and local scientific evidence and taking into account the World Health Organization (WHO)'s updated recommendations as well as overseas practices, recommends that the Government provide mop-up HPV vaccination for secondary school female students or older girls (18 years or below).

Experts also appraised data from overseas studies and the local situation. Noting the high HPV vaccination coverage of over 80 per cent in girls under the HKCIP, the SCVPD expected that there would be minimal incremental benefit from adding HPV vaccine to the routine HKCIP for boys. Together with a lack of local cost-benefit and acceptability data, the SCVPD does not recommend including HPV vaccine in the HKCIP for boys at this juncture. On the other hand, parents may choose to vaccinate their boys for better personal protection, and they could seek advice from family doctors on the benefits and limitations of vaccination.

In addition, regarding the number of doses of HPV vaccine required, upon reviewing the WHO recommendations, overseas practice and scientific evidence, the SCVPD recommends maintaining a two-dose schedule for immunocompetent individuals aged 9 to 14 years. For immunocompetent individuals aged 15 years or above, the current three-dose schedule can be changed to two doses. Nevertheless, SCVPD recommends maintaining a three-dose schedule for individuals who are immunocompromised.

The recommendations have been uploaded to the SCVPD webpage www.chp.gov.hk/en/static/24008.html.

Transcript of remarks by S for Housing at media session

Following is the transcript of remarks by the Secretary for Housing, Ms Winnie Ho, at a media session after attending an event this morning (November 30):

Reporter: (Questions on construction cost of Light Public Housing)

Secretary for Housing: The cost, as I have just said, is not a simple arithmetic of dividing the total cost by number of units. The Light Public Housing and the transitional housing are similar and the costs are similar. Now, the Light Public Housing, we are building taller buildings, much taller than the average height of the transitional housing. They are of 16 to 18 metres (should be storeys) tall. For tall buildings, we have to take care of the wind load, we have to take care of the structure, we have also to provide lifts and escalators to the top floors; and also the electrical and mechanical, water pumps and all the provisions are different. So we are dealing with a very different situation. And I have just explained about the location, the attention is more to the remote site in Lin Tong Mei. The two Tuen Mun sites, although they are smaller in size but we are building much higher, we are building up to 16 to 18 storeys. So, for those sites, we will provide a total of 7 000 units. For the Lin Tong Mei site, we will provide, say, 1 000 units. So, much more units will be produced in these sites of much better locations and one of the Tuen Mun sites is actually next to the light rail station, Ching Chung Station. So it's very convenient and Tuen Mun is what we called extended New Territories area. So it is not really a New Territories area, it's a mature area with more community support and facilities.

We hope that you will support the project. We are trying to help those people who are now in the subdivided units, living in very poor conditions. So we have the need and we have to maintain the speed to go to LegCo (Legislative Council) as soon as possible to get the funding approved. Thank you.

(Please also refer to the Chinese version of the transcript.)