

LCQ11: Herpes Zoster

Following is a question by the Hon Chan Hoi-yan and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (May 4):

Question:

According to statistics, one in every three persons will contract Herpes Zoster (HZ) (commonly known as "shingles") in the lifetime, and the morbidity rate of the disease increases progressively after the age of 50. HZ causes patchy rashes on the patient's body and tingling pain in the affected areas. HZ may even trigger serious after-effects such as persistent neuralgia, encephalitis, blindness and hearing impairment. Some analyses have pointed out that in 2039, more than half of the population of Hong Kong will reach the age of 50 or above. By then, the number of HZ patients may increase. In this connection, will the Government inform this Council:

- (1) whether it knows the current morbidity rate of HZ in the population of Hong Kong;
- (2) of the respective total attendances of HZ patients seeking treatment in public hospitals and at the outpatient clinics under the Department of Health in the past five years, with a breakdown by the age and gender of such patients and the type of clinics (i.e. general or specialist clinics) they attended;
- (3) whether it knows the common complications suffered by HZ patients in Hong Kong in the past five years, with a breakdown of the number of such patients by the type of complications;
- (4) of the respective attendances of patients contracting HZ and with complications who used the accident and emergency, inpatient and outpatient clinic services of public hospitals in the past five years; the average length of stay of such patients using inpatient services and the average medical cost incurred by them; and
- (5) whether it will consider providing free HZ vaccination for members of the public; if so, of the details; if not, the reasons for that, and whether it will, by making reference to the practices in countries such as the United States, Canada and Australia of providing elderly nationals with subsidies for HZ vaccination, subsidise the elderly for receiving HZ vaccination?

Reply:

President,

The consolidated reply prepared in consultation with the Department of Health (DH) and the Hospital Authority (HA) to the Hon Chan Hoi-yan's

question is as follows:

Herpes Zoster (Shingles) is an infectious disease that causes localised belt-like, painful skin rash with blisters. It is caused by varicella-zoster virus which is also responsible for varicella (chickenpox). The virus resides in the nervous system of patients recovered from chickenpox and may reactivate in times of weakened immune system due to ageing or stress. Itch or slight pain with burning sensation typically precedes rash in the affected area for one to three days; the rash then develops into vesicles or blisters, which further spread in a belt-like pattern and can last from one to 14 days, during which pustules or trickle of blood may appear. This will be followed by bursting, collapse and drying up of the fluid-filled blisters and crusting over two to three weeks.

The DH normally maintains statistics on notifiable infectious diseases in accordance with the Prevention and Control of Disease Ordinance (Cap 599). As Herpes Zoster is not a notifiable infectious disease, the DH does not maintain statistics on the incidence of Herpes Zoster in the local population. Some of the Herpes Zoster patients will also seek medical advice from private doctors and currently the relevant information is not captured by any central system (e.g. Electronic Health Record Sharing System). The HA also does not keep breakdown on the number of Herpes Zoster patients among its overall attendance at its clinics at present. Therefore, statistics of relevant information and expenditure could not be provided.

A local academic research in 2014 (Note) showed that a quarter of patients hospitalised with Herpes Zoster between 1999 and 2014 suffered from various complications, such as post-herpetic neuralgia which could last between a couple of months to years after the skin lesions subsided. Other complications included skin pigmentation, skin turning black, and scarring in severe case. Ocular involvement may result in loss of vision.

Patients with symptoms of Herpes Zoster generally consult their family doctors, General Out-patient Clinics or Accident and Emergency Departments. Current antiviral drug can shorten the recovery time of Herpes Zoster patients and it is optimal to take it within three to five days of the onset of the disease. Therefore, patients should seek medical consultation as soon as possible and take the medicine according to doctor's instructions. Patients are advised to maintain a comfortable room temperature, keep the affected skin clean and dry, apply soothing ointment to the affected area or take analgesic drug as needed in order to alleviate the itch and pain. Patients should also avoid contacting frail persons, such as pregnant women and children, to prevent transmission of disease.

Regarding the Herpes Zoster vaccination, the Centre for Health Protection (CHP) of the DH has been keeping abreast of the latest position of the World Health Organization on immunisation and vaccination, the scientific evidence of new vaccines, the latest global and local epidemiology of vaccine preventable diseases, and the advice and practical experience of health authorities across the world. The Scientific Committee on Vaccine Preventable Diseases (SCVPD) under the CHP meets regularly to review and develop public

health strategies for handling of vaccine preventable diseases and their risk factors in the light of changing epidemiology and advances in medical science and provide science-based advice on vaccine use at population level to the Government. The SCVPD so far has not recommended on the use of Herpes Zoster vaccine in adults.

Note: The DH has not conducted any new study on the conditions of Herpes Zoster inpatients since the study in 2014.

LCQ17: Business situation of micro- and small-sized enterprises amid epidemic

Following is a question by the Hon Rock Chen and a written reply by the Secretary for Commerce and Economic Development, Mr Edward Yau, in the Legislative Council today (May 4):

Question:

In the light of the severity of the fifth wave of the coronavirus disease 2019 epidemic, the Government has tightened social distancing measures to reduce the flow of people in the street. It has been reported that quite a number of physical commercial activities have been greatly affected as a result, and some micro- and small-sized enterprises (MSEs) have even closed down or are facing winding up before receiving the subsidies disbursed under the new round of the Anti-epidemic Fund. In this connection, will the Government inform this Council:

(1) of the number of MSEs newly set up in each month since January of last year, with a breakdown by industry;

(2) of the number of MSEs in each industry dissolved in each month since January of last year, with a breakdown by (i) mode of dissolution (i.e. deregistration, striking off and winding up), (ii) number of employees by groups and (iii) reason for dissolution; and

(3) whether it has plans to introduce preferential policies after the epidemic has stabilised or ended, so as to encourage aspiring people to set up and run MSEs; if so, of the policies and measures targeting MSEs in different industries to be introduced; if not, the reasons for that?

Reply:

President,

Having consulted the Innovation and Technology Bureau (ITB) and the Census and Statistics Department (C&SD), our consolidated reply to the three parts of the question is as follows:

According to the Central Register of Establishments (Note 1) and the quarterly statistical information collected in 2021 by the C&SD, the estimated distribution of the number of micro-enterprises (i.e. enterprises engaging less than 10 persons) in Hong Kong in various major industries and the corresponding quarterly net changes are set out in the table below.

Industry category	Number of enterprises engaging less than 10 persons (Note 2) [net change in the number of enterprises as compared with the previous quarter]			
	Q1 2021	Q2 2021	Q3 2021	Q4 2021
Mining and quarrying; and electricity and gas supply, and waste management	356 [-4]	356 [0]	360 [+4]	366 [+6]
Manufacturing	6 909 [-71]	6 814 [-95]	6 762 [-52]	6 734 [-28]
Import/export trade and wholesale	94 757 [-1 378]	93 538 [-1 219]	93 092 [-446]	92 468 [-624]
Retail	42 675 [+160]	44 239 [+1 564]	44 755 [+516]	45 429 [+674]
Transportation, storage, postal and courier services	7 277 [+10]	7 222 [-55]	7 342 [+120]	7 385 [+43]
Accommodation and food services (Note 3)	9 282 [-150]	9 457 [+175]	9 557 [+100]	9 615 [+58]
Information and communications	14 674 [+49]	14 634 [-40]	14 804 [+170]	14 986 [+182]
Financing and insurance	30 138 [+272]	30 558 [+420]	30 975 [+417]	31 316 [+341]
Real estate	17 357 [+131]	17 806 [+449]	17 988 [+182]	18 115 [+127]
Professional and business services	49 753 [+87]	49 962 [+209]	50 456 [+494]	50 761 [+305]
Social and personal services	40 882 [+173]	40 767 [-115]	40 960 [+193]	42 246 [+1 286]
Total	314 060 [-721]	315 353 [+1 293]	317 051 [+1 698]	319 421 [+2 370]

The C&SD does not have statistics on the number of newly established and dissolved enterprises.

The Government is committed to supporting start-ups and small and medium

enterprises (SMEs) and enhancing various funding schemes to cater for the needs of SMEs, including:

(1) through the SME Financing Guarantee Scheme, the Government provides 80 per cent, 90 per cent or 100 per cent guarantees to help SMEs obtain commercial financing. Among them, the 90 per cent Guarantee Product is implemented specifically to help smaller-sized enterprises, businesses with relatively less operating experience and professionals seeking to set up their own practices obtain commercial financing;

(2) the current-term Government has kept on enhancing various funding schemes, including making multiple injections into the Dedicated Fund on Branding, Upgrading and Domestic Sales and the SME Export Marketing Fund under the Trade and Industry Department (TID); raising the funding ceiling per enterprise; and expanding the funding scope, with a view to helping start-ups conduct promotional activities to develop more diversified markets, enhance the competitiveness of enterprises and facilitate SMEs' business development;

(3) the four SME centres (i.e. the Support and Consultation Centre for SMEs (SUCCESS) under the TID, the SME Centre under the Hong Kong Trade Development Council, the SME One under the Hong Kong Productivity Council and the TecONE under the Hong Kong Science and Technology Parks Corporation) provide four-in-one integrated services, so that SMEs can receive one-stop consultation and referral services in any one of the aforementioned centres. Among them, the SUCCESS provides various business information and consultation services free of charge, such as providing information on government licences or permits required for starting a business and running different types of businesses in Hong Kong through the dedicated webpage on "Setting up your Business"; its "Meet-the-Advisors" Business Advisory Service helps arrange SMEs to meet with experts for free professional advice on specific areas (including setting up business, marketing and taxation); and organises seminars and workshops and answers enquiries related to start-ups;

(4) "SME ReachOut" is established by the TID to assist SMEs in identifying suitable funding schemes and addressing problems arising from applications;

(5) through its StartmeupHK programme, Invest Hong Kong provides one-stop services to global start-ups and actively assists them in using Hong Kong as a launch pad to grow their businesses; and

(6) the ITB has all along been promoting Hong Kong's innovation and technology (I&T) development through a series of measures and schemes. While the relevant measures and schemes aim to enhance the local I&T ecosystem, in fact many SMEs are among the beneficiaries. For example, the Innovation and Technology Commission launched the time-limited Distance Business Programme under the Anti-epidemic Fund to support enterprises to continue their business and provide services during the epidemic through the adoption of information technology solutions, with about 95 per cent among the over 25 700 approved applications which have proceeded to implementation coming from SMEs; the 17 funding schemes under the Innovation and Technology Fund provide comprehensive support for local I&T strengths with many SMEs being

the beneficiaries, including the Technology Voucher Programme which provides funding for local enterprises and organisations on a matching basis to use technological services and solutions, with about 95 per cent of the approved applications coming from SMEs; the Public Sector Trial Scheme supports public sector organisations to try out new technologies or products developed in Hong Kong by technological enterprises and organisations; and the Enterprise Support Scheme provides funding for private companies to carry out in-house research and development projects.

The Government will continue to review the various support measures to help enterprises cope with the challenges brought about by the epidemic.

Note 1: A computerised Central Register of Establishments, formed on the basis of feedback from various surveys of the C&SD and administrative returns from relevant government departments, contains information relating to some 420 000 active establishments in Hong Kong.

Note 2: The number of enterprises relates only to those industries covered by the Quarterly Survey of Employment and Vacancies. Industries not covered are mainly agriculture, forestry and fishing; construction; hawkers and retail pitches (other than market stalls); taxis, public light buses, part of goods vehicles, and inland freight water transport; monetary authorities and self-employed insurance agents with no business registration; renting and leasing of recreational and sports goods; public administration; work activities within domestic households, activities of extraterritorial organisations and religious organisations; and independent artists.

Note 3: Covering hotels, guesthouses, boarding houses and other enterprises providing short-term accommodation.

Hospital Authority announces positive patient cases detected via admission screening or testing and clusters of nosocomial COVID-19 infections

The following is issued on behalf of the Hospital Authority:

The Hospital Authority today (May 4) announced information regarding patients who tested positive via admission screening or testing with patients or staff members identified as close contacts and nosocomial COVID-19 infection cases.

The following are the statistics of patients who tested positive via admission screening or by testing in public hospitals with patients or staff

members identified as close contacts:

Hospital/clinic	Number of patients who tested positive	Number of patients identified as close contacts	Number of staff members without appropriate personal protective equipment identified as close contacts
Kwong Wah Hospital	1	2	–
Yan Chai Hospital	1	1	–

Thorough cleaning and disinfection operations have been performed in the affected areas by hospitals. The hospitals will continue to closely monitor the health condition of patients and staff members, and communicate with the Centre for Health Protection on the latest situation.

There have been no clusters of nosocomial infection cases reported in public hospitals today.

[Update on supplies from Mainland](#)

The Task Force of Supplies from the Mainland led by the Transport and Housing Bureau (THB) has been working closely with the Guangdong Provincial Government and the Shenzhen Municipal People's Government to explore various means to stabilise the supply of goods from the Mainland to Hong Kong. In addition to road transport arrangements, transportation of goods by water and railway is already in service.

A spokesperson for the THB said that the "Sea Express" water transportation service from the Mainland to Hong Kong has been fully launched and its capacity is rising to increase the supplies of fresh food, other daily necessities and manufacturing materials. The current supply of fresh food from the Mainland is stable.

Currently, there are three water transportation routes between Hong Kong and Shenzhen, namely (1) from Shenzhen Yantian International Container Terminals to Hong Kong Kwai Tsing Container Terminals (KTCT); (2) from Shenzhen DaChan Bay Terminals to KTCT; and (3) from China Merchants Port (South China) Management Center (Shenzhen Mawan, Shekou and Chiwan Container Terminals) to Hong Kong River Trade Terminal and elsewhere. Together with the water transportation routes from other cities in Guangdong Province, including the routes from Guangzhou Lianhuashan Port, Nansha Port, Huadu Port, Zhongshan Huangpu Port and Zhuhai Doumen Port to different terminals in

Hong Kong, the water transport capacity amounts to tens of thousands of tonnes daily.

The spokesperson said today (May 4) that Shenzhen operated 41 cargo vessel trips and transported around 3 420 twenty-foot equivalent units (TEUs) of cross-boundary supplies by water yesterday (May 3), equivalent to about 26 450 tonnes of goods, of which around 20 TEUs (about 140 tonnes) were fresh food and around 3 400 TEUs (about 26 310 tonnes) were non-fresh food, according to information from the Mainland authorities.

Since the launch of services from the three ports in Shenzhen since February 18 to yesterday, a total of around 296 730 TEUs of cross-boundary supplies have been transported, equivalent to about 1 571 310 tonnes of goods, of which around 1 570 TEUs (about 13 540 tonnes) were fresh food and around 295 160 TEUs (about 1 557 770 tonnes) were non-fresh food.

To further ensure a stable goods supply to Hong Kong through land transport, a trial run of cargo transfer was conducted by the THB at a yard situated on Kam Pok Road, San Tin, Yuen Long, and it was completed smoothly. The THB will continue to work with the Mainland authorities to fully take forward cargo transfer arrangements on the Hong Kong side. It is a contingency measure in response to the latest epidemic situation in the city so as to reduce the risk of epidemic transmission in both the Mainland and Hong Kong, ensuring both smooth cross-boundary land transport and a stable goods supply to Hong Kong.

Meanwhile, to avoid a spillover of the epidemic, the Transport Department (TD) has arranged for dedicated staff to conduct rapid antigen tests for cross-boundary goods vehicle drivers at various land boundary control points (BCPs) from February 28 onwards. Only drivers with a negative result are allowed to enter the Mainland. In order to further improve the accuracy of the tests, the TD has already switched to use rapid nucleic acid tests at the BCPs. Starting from April 21, the sampling method for rapid nucleic acid tests has been further changed to nasopharyngeal swabs. A total of 1 831 rapid nucleic acid tests were conducted yesterday in which 16 drivers preliminarily tested positive. The TD has passed the cases to the Department of Health for follow-up.

The THB will closely monitor the situation and co-operate with the Mainland authorities to facilitate and implement various measures to ensure a stable goods supply to Hong Kong, with a view to complementing the supply through road, water and railway transport, enhancing capacity and efficiency as well as optimising the flow of cross-boundary supplies.

Treatment Centre for COVID-19 (AsiaWorld-Expo) turned to standby mode

The following is issued on behalf of the Hospital Authority:

The Hospital Authority (HA) announced today (May 4) that, in view of the developments of the epidemic, the Treatment Centre for COVID-19 (AsiaWorld-Expo) has turned to standby mode and all the patients who were there have already been transferred to the North Lantau Hospital Hong Kong Infection Control Centre or discharged.

The HA Chief Manager (Integrated Clinical Services), Dr Larry Lee, said, "We would like to express our heartfelt gratitude to all the healthcare workers who have been deployed to the treatment centre for their tireless work and professionalism in taking care of patients during the epidemic peak in the past few months. Although we expected different challenges and colleagues were under enormous work pressure at the time, they were able to overcome difficulties one by one in a short period of time with a common goal to help patients. The HA also appreciates the Mainland medical support team for joining us in mid-March, which not only strengthened the admission capacity of the treatment centre for patients but also brought valuable anti-epidemic experience to the team.

"After turning the Treatment Centre for COVID-19 to a standby mode, we will closely monitor the development of the epidemic and maintain flexibility. If necessary, we can deploy manpower and hospital beds, and reactivate the treatment centre in a short period of time."

The Treatment Centre for COVID-19 has been reactivated since the beginning of January this year as an important facility for implementing multi-tiered triage measures for treatment. During the most severe period of the fifth wave of the epidemic, it helped to triage patients from public hospitals and allowed public hospitals to concentrate their manpower and resources on taking care of patients who needed more healthcare services.