

監測及流行病學處

Surveillance  
And  
Epidemiology  
Branch

本署檔號 Our Ref. : (188) in DH SEB CD/8/93/1 Pt.5

致各位校長/幼兒中心負責人：

### 提高警覺 預防中東呼吸綜合症

我現特函通知閣下中東呼吸綜合症最新發展。根據韓國衛生當局的資料，截至二零一五年六月一日，韓國共錄得 17 宗中東呼吸綜合症的確診個案，此外，另一宗個案則從韓國輸往中國內地。所有錄得個案均與韓國曾於四月十八日至五月三日前往巴林，沙特阿拉伯王國，卡塔爾和阿拉伯聯合酋長國的六十八歲男子（第一宗個案）有關。他經卡塔爾回到韓國，於五月四日抵達仁川國際機場，並於五月十一日出現症狀。

根據相關衛生當局的資料，初步流行病學調查顯示，韓國第三宗中東呼吸綜合症個案（七十六歲男子）的一名四十四歲男性密切接觸者於五月二十六日從韓國抵達香港。他乘搭韓亞航空 OZ723 航班於下午約一時抵達香港國際機場，其後乘搭永東直巴經營的巴士於同日下午三時出發前往惠州。他於廣東留院，並於五月二十九日經中國疾病預防控制中心化驗確診。

作為預防措施，衛生防護中心已展開跟進調查，並正追蹤該名旅客的接觸者。衛生防護中心會繼續聯絡相關衛生當局跟進最新情況。到目前為止，衛生防護中心已隔離該確診病例的 18 名密切接觸者，以防止進一步蔓延。目前，所有密切接觸者至今均無症狀。

世界衛生組織至今接獲全球通報 1,152 宗中東呼吸綜合症確診個案，其中至少 434 人死亡。今年首季，中東地區特別是沙特通報的中東呼吸綜合症個案數目上升，很可能是由動物源頭如駱駝或駱駝產品傳播至人類的情況增加，再於醫院內進一步人傳人。有科學研究支持駱駝屬人類感染中東呼吸綜合症冠狀病毒主要來源的分析，亦有研究進一步提出，人類可經密切接觸受感染的駱駝而出現中東呼吸綜合症冠狀病毒感染。韓國多宗有關連的個案亦顯示，中東呼吸綜合症冠狀病毒人傳人的情況可在醫療機構及密切接觸者中出現。



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為預防中東呼吸綜合症，學校及院舍應提醒學生及院友於外遊時不應安排旅客騎駱駝，或參與直接接觸駱駝的活動，因為此乃感染中東呼吸綜合症的已知風險因素。外遊人士應避免到農場、農莊或有駱駝的市場，亦應避

免接觸動物特別是駱駝、雀鳥、家禽或病人。

為預防感染中東呼吸綜合症及其他呼吸道疾病，建議應採取以下措施：

- 避免到訪農場、農莊或有駱駝的市場；
- 旅程中避免接觸動物（特別是駱駝）、雀鳥、家禽或病人；
- 一旦到訪農場或農莊，接觸動物前後均應經常洗手；
- 不應飲用或食用未經處理或未經煮熟的動物產品（包括鮮奶和肉類），或可能被動物分泌物、排泄物（例如尿液）或產品染污的食物，除非已經煮熟、洗淨或妥為去皮；
- 若感到不適，應立即求醫；
- 避免到中東呼吸綜合症病人入住的醫護環境；
- 觸摸眼、鼻及口前，打噴嚏、咳嗽或清潔鼻子後均應洗手；及
- 進食或處理食物前、如廁後洗手。

此外，衛生防護中心亦已向學校就預防感染新型冠狀病毒方面發放指引，如欲參考相關文件，可瀏覽以下網址 ([http://www.chp.gov.hk/files/pdf/advice\\_to\\_school\\_on\\_prevention\\_of\\_middle\\_east\\_respiratory\\_infection\\_chi.pdf](http://www.chp.gov.hk/files/pdf/advice_to_school_on_prevention_of_middle_east_respiratory_infection_chi.pdf))

衛生署衛生防護中心總監



(張竹君醫生代行)

二零一五年六月一日

監測及流行病學處



衛生防護中心  
Centre for Health Protection

保障市民健康  
Protecting Hong Kong's health

Surveillance  
And  
Epidemiology  
Branch

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1 June, 2015

Dear Principal / Person-in-charge,

### Vigilance against Middle East Respiratory Syndrome

I would like to update you on the latest development of Middle East Respiratory Syndrome (MERS). According to information from the health authority of Korea, a total of 17 laboratory-confirmed cases of MERS have been identified so far (as of June 1), plus an additional case who had travelled to mainland China via Hong Kong. All of these cases were linked to the first case (68-year-old man) who had travelled to several countries in the Middle East (including Bahrain, the Kingdom of Saudi Arabia, Qatar and United Arab Emirates) from April 18 to May 3. He returned to Korea via Qatar and arrived at the Incheon International Airport on May 4 and developed symptoms on May 11.

According to relevant health authorities, epidemiological investigations revealed that a male close contact aged 44 of the third MERS case in Korea (male aged 76) had travelled from Korea to Huizhou, Guangdong via Hong Kong on May 26. He arrived at Hong Kong International Airport (HKIA) at around 1 pm by OZ 723 of Asiana Airlines and arrived in Huizhou by coach. He was hospitalized in Guangdong and was laboratory-confirmed by the Chinese Center for Disease Control and Prevention on May 29.

As a precautionary measure, the Centre for Health Protection (CHP) of the Department of Health (DH) has commenced follow-up investigations and contact tracing of the above case. So far, CHP has put 18 close contacts of the confirmed case under quarantine to prevent the possibility of further spread in case these close contacts develop symptoms during the incubation period. Currently, all the close contacts are so far asymptomatic.



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To date, 1152 laboratory-confirmed MERS cases have been reported to the WHO globally, including at least 434 deaths. MERS cases reported by the Middle East, the Kingdom of Saudi Arabia (KSA) in particular, increased in the first

quarter of 2015, most likely due to increased transmission from a primary animal source, such as camels or camel products, to humans, and further human-to-human transmission in hospitals. Scientific studies support the premise that camels serve as the primary source of MERS-CoV infecting humans. A study further suggested that human MERS-CoV infections could be transmitted through close contact with infected camels. The cluster of MERS cases in Korea also signifies that human-to-human transmission of MERS Coronavirus (MERS-CoV) in health-care settings and among close contacts can occur.

We would like to remind you to remain vigilant against MERS, and remind your students or clients not to arrange camel rides and activities involving camel contact, which may increase the risk of infection. Travellers should avoid going to farms, barns or markets with camels, and avoid contact with animals, especially camels, birds, poultry or sick people during travel. Please be reminded to take heed of personal, food and environmental hygiene:

- Avoid going to farms, barns or markets with camels;
- Avoid contact with animals (especially camels), birds, poultry or sick people during travel;
- Wash hands regularly before and after touching animals in case of visits to farms or barns;
- Do not consume raw or undercooked animal products, including milk and meat, or foods which may be contaminated by animal secretions, excretions (such as urine) or products, unless they have been properly cooked, washed or peeled;
- Seek medical consultation immediately if feeling unwell;
- Avoid visits to health-care settings with MERS patients;
- Wash hands before touching the eyes, nose and mouth, and after sneezing, coughing or cleaning the nose; and
- Wash hands before eating or handling food, and after using the toilet.

You may wish to note that the CHP has issued guidelines to school on prevention of MERS which can be accessed at:

[http://www.chp.gov.hk/files/pdf/advice\\_to\\_school\\_on\\_prevention\\_of\\_middle\\_east\\_respiratory\\_infection.pdf](http://www.chp.gov.hk/files/pdf/advice_to_school_on_prevention_of_middle_east_respiratory_infection.pdf)).

Yours faithfully,



(Dr. SK CHUANG)

for Controller, Centre for Health Protection  
Department of Health