CHAPTER ONE

HEALTH OF THE COMMUNITY

Population Indices

The mid-year population of Hong Kong in 2009 was 6.97 million. The annual growth rate of the population averaged 0.5% over the period 2000 – 2009.

The crude birth rate in 2009 was 11.9 per 1 000 population with 82 906 registered live births. The crude death rate was 5.9 per 1 000 population, with 41 047 registered deaths.

As a result of increasing life expectancy, Hong Kong's population has been ageing steadily (Figure 1). In 2009, 12.9% of the population were aged 65 and above, the elderly dependency ratio being 172 per 1 000 population aged 15 to 64. The percentage of population aged 65 and above for 1989 was 8.3% and that for 1999 was 10.7%. By 2019 and 2029, the figures are estimated to be 17.4% and 24.7% respectively.

第一章

香港人的健康

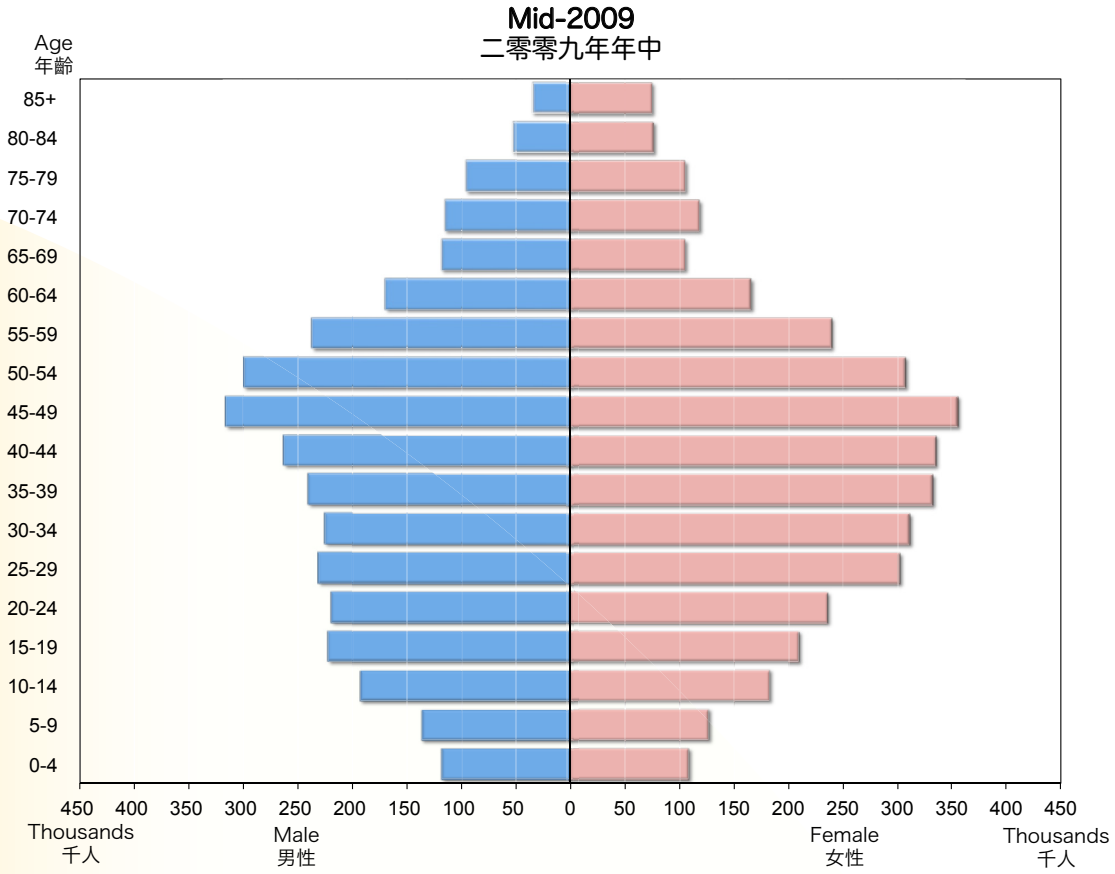
人口指數

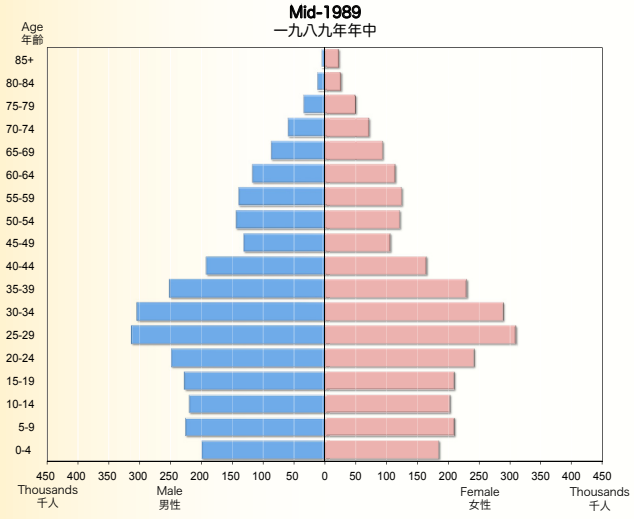
二零零九年年中的香港人口為697萬，二零零零年至二零零九年期間的人口按年增長率平均為0.5%。

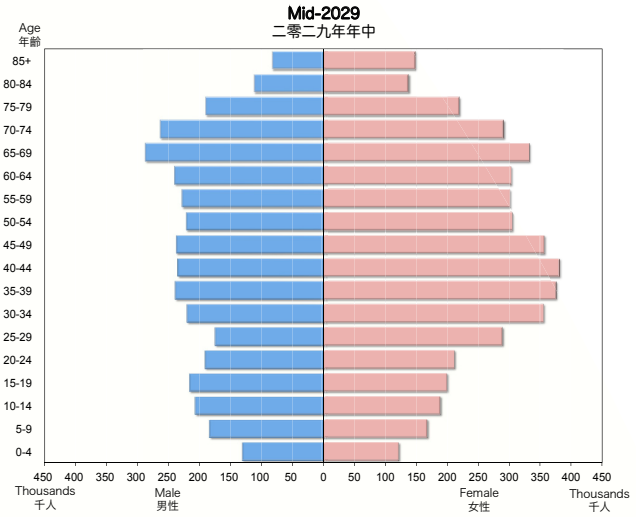
二零零九年的粗出生率按每千名人口計算有11.9人，登記活產嬰兒為82 906人；粗死亡率按每千名人口計算有5.9人，登記死亡人數為41 047人。

由於預期壽命增長，香港人口正持續老化(圖1)。二零零九年，65歲或以上人士佔香港人口的12.9%，老年撫養比率按每千名15至64歲人口計算為172人。一九八九年，65歲或以上人士佔香港人口的百分比為8.3%，於一九九九年則佔10.7%。預計至二零一九年及二零二九年，該百分比分別為17.4%及24.7%。

Figure 1 : Population Pyramid, 1989, 2009 and 2029
圖 1 : 一九八九年、二零零九年及二零二九年的人口金字塔







Health Indicators

The major health indicators reflect that people in Hong Kong are generally enjoying good health. On average, a baby boy born in Hong Kong in 2009 could expect to live 79.8 years and a baby girl 85.9 years. There has been a steady rise in the life expectancy of our population over the past two decades (Figure 2), and Hong Kong was among the best in the world (Table A).

The infant mortality rate and the under-five mortality rate in Hong Kong have been declining over the past two decades, and reached a level as low as 1.7 per 1 000 registered live births and 0.8 per 1 000 population aged under five respectively in 2009 (Figure 3). Our infant mortality rate ranked among the lowest in the world (Table B).

Maternal mortality ratio has remained low for the past two decades. In 2009, there were two cases of maternal death reported and maternal mortality ratio was 2.4 per 100 000 registered live births.

健康指標

主要健康指標顯示香港人一般都健康良好。平均而言，在二零零九年出生的男嬰預期可活到79.8歲，而女嬰則可活到85.9歲。本港人口預期壽命在過去20年來一直持續增長(圖2)，令香港處於世界上最高水平之列(表A)。

香港嬰兒死亡率及五歲以下兒童死亡率在過去20年來持續下降。二零零九年，按每千名登記活產嬰兒計算只有1.7宗嬰兒死亡，而五歲以下的兒童死亡率按每千名五歲以下兒童計只有0.8宗(圖3)。香港嬰兒死亡率居世界最低之一(表B)。

過去20年來，孕婦死亡比率持續低企。二零零九年錄得兩宗孕婦死亡的個案，而按每十萬名登記活產嬰兒計算，孕婦死亡比率為2.4人。

Figure 2 : Life Expectancy at Birth (Male and Female), 1990 - 2009
圖 2 : 一九九零年至二零零九年男性及女性出生時的平均預期壽命

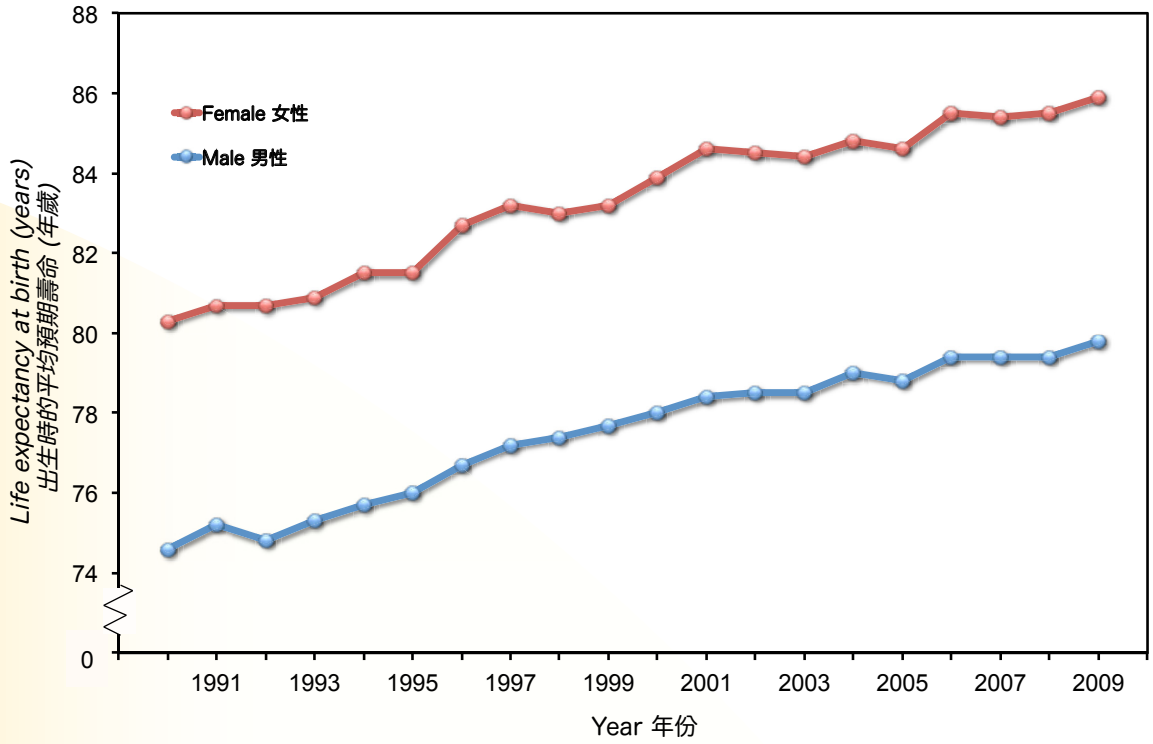


Table A : Life Expectancy at Birth in Hong Kong and Selected Countries
表 A : 香港及選定國家的人口出生時的平均預期壽命

Country國家 / Territory地區	Life Expectancy at Birth (years) 出生時的平均預期壽命(年歲)	
	Male 男性	Female 女性
Hong Kong 香港	79.8 (2009)	85.9 (2009)
Japan 日本	79.6 (2009)	86.4 (2009)
Singapore 新加坡	79.0 (2009)	83.7 (2009)
UK 英國	77.6 (2008)	81.7 (2008)
USA 美國	75.7 (2008)	80.7 (2008)

Note: Figure in brackets denotes the reference year of the respective figure.
註： 括弧內的數字代表個別數字的參照年份。

Figure 3 : Infant Mortality Rate (IMR) and Under-five Mortality Rate (MR), 1990 - 2009
圖 3 : 一九九零年至二零零九年的嬰兒死亡率及五歲以下兒童死亡率

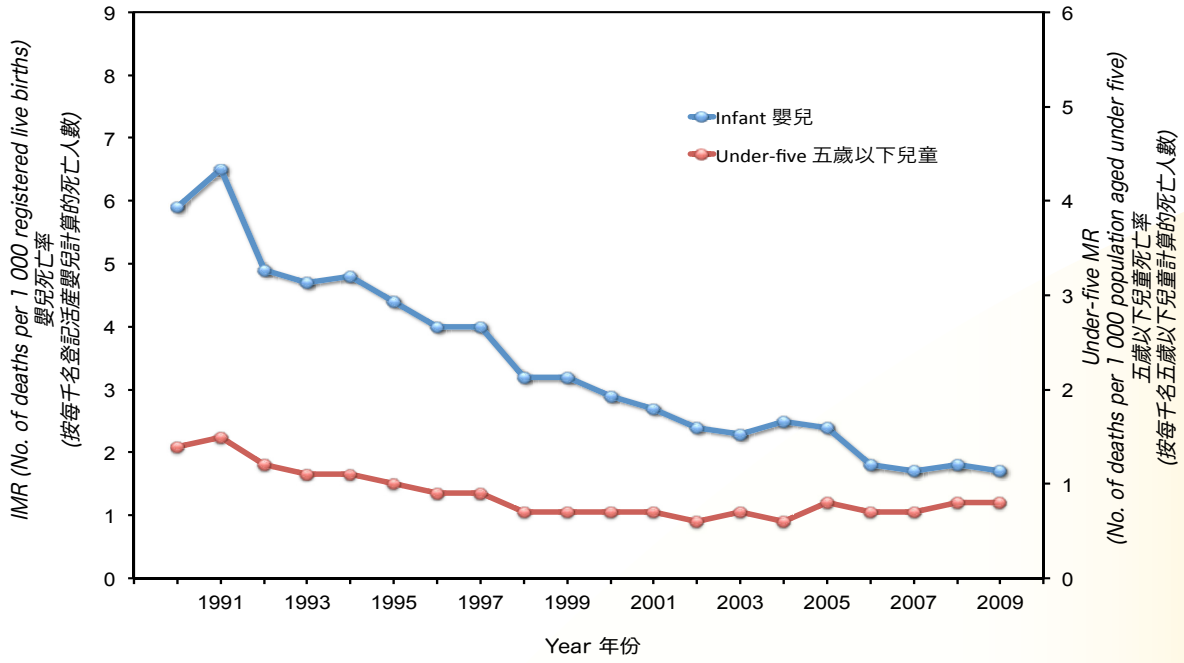


Table B : Infant Mortality Rate in Hong Kong and Selected Countries
表 B : 香港及選定國家的嬰兒死亡率

Country國家 / Territory地區	Infant Mortality Rate (No. of deaths per 1 000 live births) 嬰兒死亡率 (按每千名活產嬰兒計算的死亡人數)
Hong Kong 香港	1.7 (2009)
Japan 日本	2.4 (2009)
Singapore 新加坡	2.2 (2009)
UK 英國	4.6* (2009)
USA 美國	6.3* (2009)

Notes: * Provisional figure.
Figure in brackets denotes the reference year of the respective figure.
註： * 臨時數字。
括弧內的數字代表個別數字的參照年份。

Mortality Data

Mortality statistics provide useful information to monitor the trends of major diseases and other fatal conditions. The cause of every death is documented in the Medical Certificate of Cause of Death by the attending doctor. These data are collected by the Department of Health for coding and analysis.

死亡資料

死亡統計數字提供有用的資料，以監察主要疾病及其他致命情況的趨勢。主診醫生會把每名死者的死因記錄在死因醫學證明書內。衞生署收集這些資料作編碼和分析。

Mortality Rate

The crude death rate in 2009 was 5.9 per 1 000 population with 41 047 registered deaths (Figure 4). The age-standardised death rate has been dropping substantially (Figure 5), from 5.2 per 1 000 standard population in 1990 to 3.4 in 2009. Compared with 1990, the age-standardised death rates for males and females were reduced by 32.9% and 38.8% respectively.

死亡率

二零零九年的粗死亡率按每千名人口計算有5.9人，而登記死亡人數為41 047人(圖4)。年齡標準化死亡率大幅下降(圖5)，由一九九零年按每千名標準人口計算的5.2人下降至二零零九年的3.4人。與一九九零年比較，男性及女性的年齡標準化死亡率分別下降了32.9%及38.8%。

Figure 4 : Crude Death Rate by Sex, 1990 - 2009
圖 4 : 一九九零年至二零零九年按性別劃分的粗死亡率

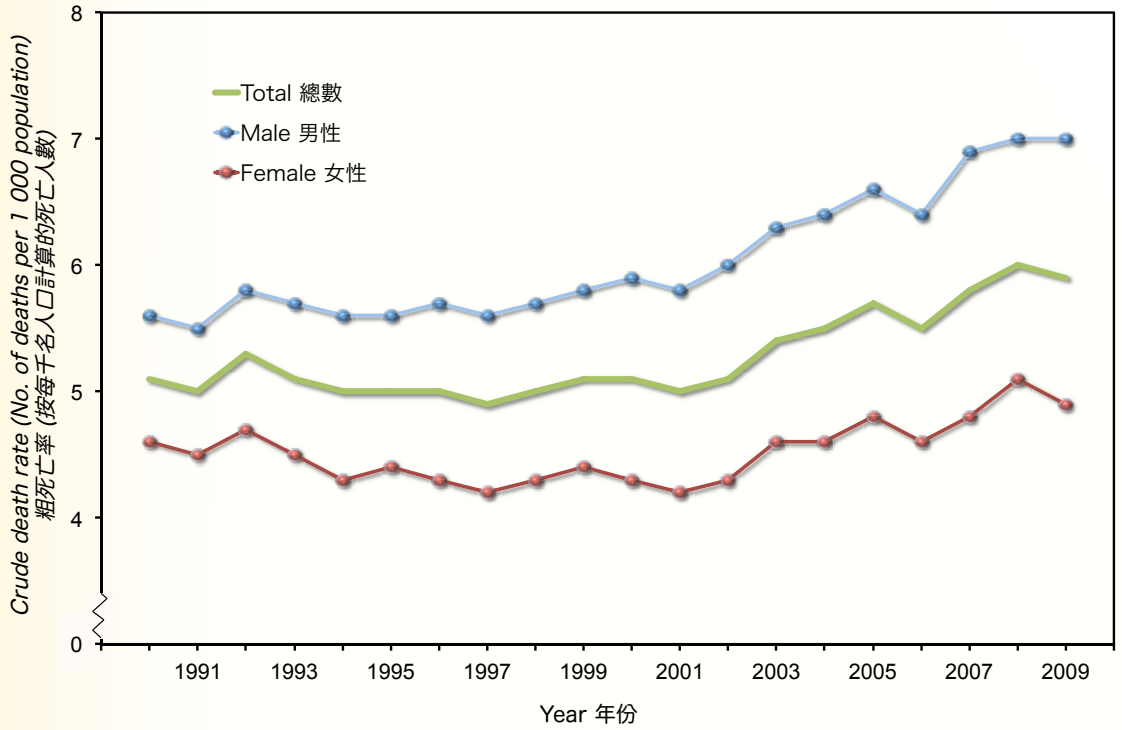
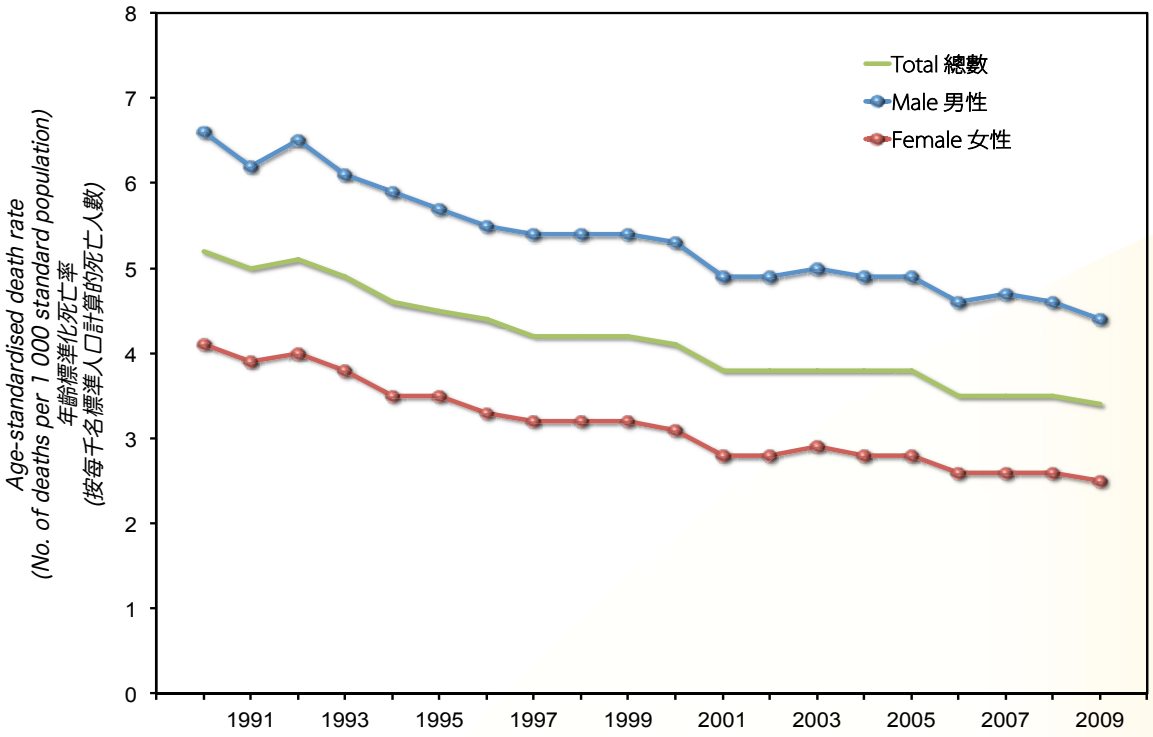


Figure 5 : Age-standardised Death Rate by Sex, 1990 - 2009
圖 5 : 一九九零年至二零零九年按性別劃分的年齡標準化死亡率



Note: Figures are compiled based on a new world standard population specified in GPE Discussion Paper Series: No.31, EIP/GPE/EBD, World Health Organization, 2001.
註: 數字是根據GPE Discussion Paper Series: No.31, EIP/GPE/EBD, World Health Organization, 2001刊載的新標準世界人口而編製。

Leading Causes of Death

From 2001 onwards, classification of diseases and causes of death is based on the International Statistical Classification of Diseases and Related Health Problems (ICD) 10th Revision; The disease groups for the purpose of ranking causes of death have also been redefined and new disease groups have been added. Hence, figures for 2009 may not be comparable directly with figures before 2001, which were compiled based on the ICD 9th Revision.

Chronic diseases remain the major causes of death in Hong Kong. Ranking for the top ten leading causes of death in 2009 (Figure 6) was similar to that in 2008. The top five leading causes of death in 2009 were malignant neoplasms (cancers)

主要死亡原因

由二零零一年起，疾病及死因分類是根據《疾病和有關健康問題的國際統計分類》(國際疾病分類)第十次修訂本。用作死因排次的疾病組別亦作重新界定，並加入新的疾病組別。因此，二零零九年的數字與二零零一年前根據國際疾病分類第九次修訂本編製的數字，未必可以直接比較。

在香港，慢性疾病仍然是死亡主因。二零零九年的十大致命病因(圖6)跟二零零八年相若，首五類致命疾病為惡性腫瘤(癌症)(31.3%)、心臟病(15.6%)、肺炎(12.9%)、腦血管病(8.4%)以及疾病及死

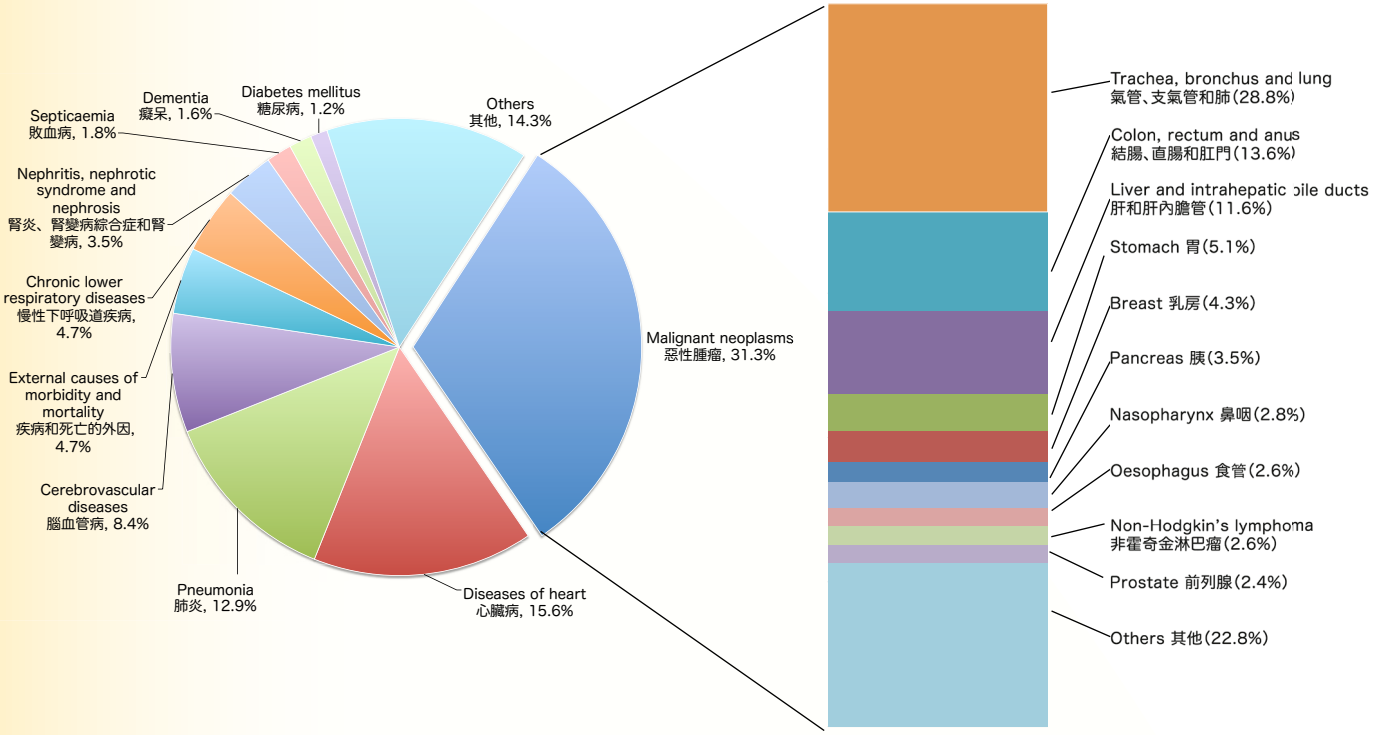
(31.3%), diseases of heart (15.6%), pneumonia (12.9%), cerebrovascular diseases (8.4%) and external causes of morbidity and mortality (4.7%).

亡的外因(4.7%)。

The next five killers in descending order were chronic lower respiratory diseases; nephritis, nephrotic syndrome and nephrosis; septicaemia; dementia; and diabetes mellitus.

餘下的五類致命疾病依次序為慢性下呼吸道疾病；腎炎、腎變病綜合症和腎變病；敗血病；癡呆；以及糖尿病。

Figure 6 : Ten Leading Causes of Death, 2009
圖 6 : 二零零九年十大致命病因



Note : The percentage may not add up to 100% due to rounding.
註： 由於進位關係，百分比的總和可能不等於100%。

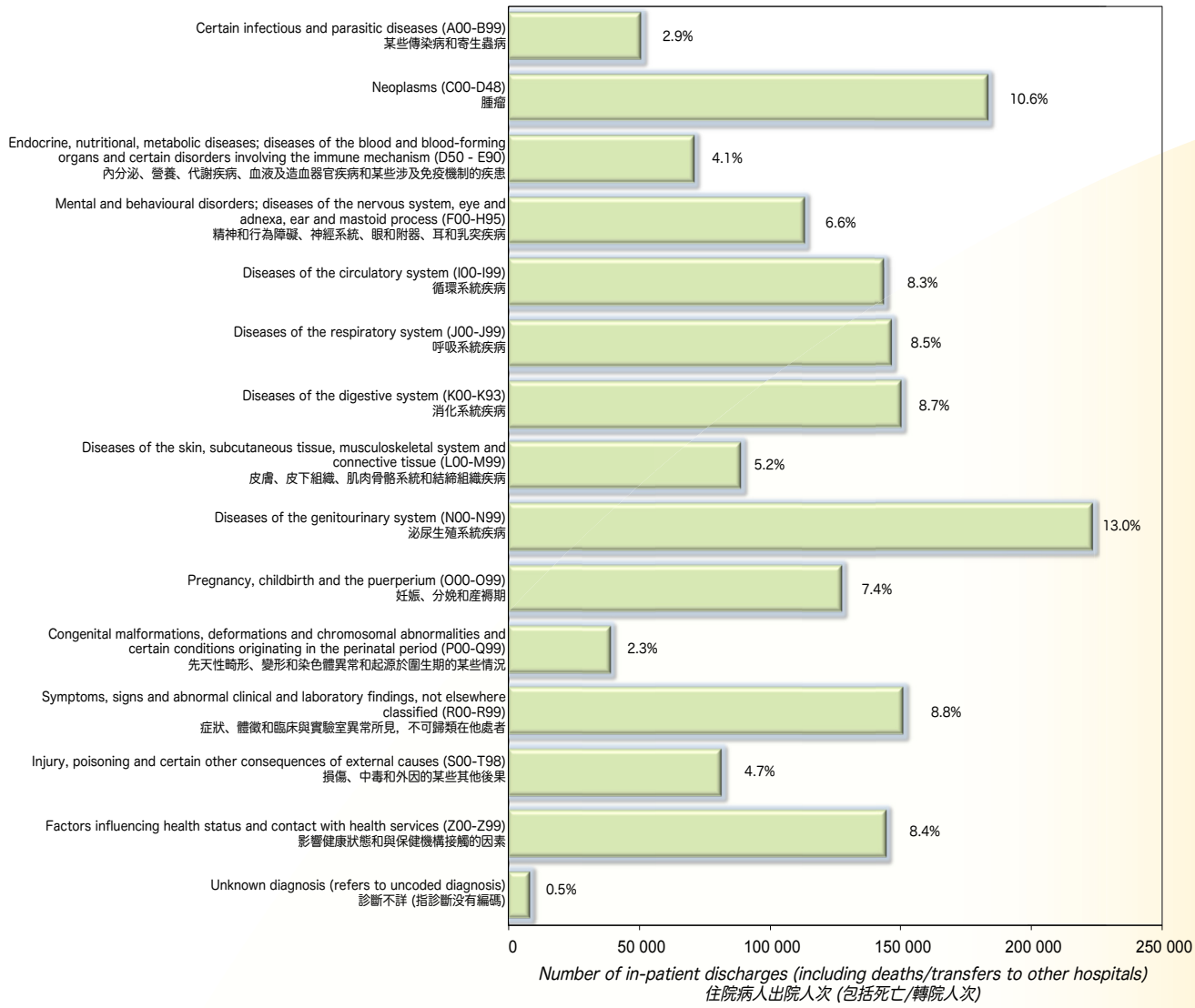
Hospitalisation Data

Information on hospitalisation collected from private and public hospitals is an important source of morbidity data. The total number of in-patient discharges (including deaths and transfers to other hospitals) in 2009 was 1 724 203. The leading causes of hospitalisation reported in 2009 (Figure 7) were similar to those of previous year.

住院資料

從私家醫院及公立醫院收集的病人住院數字，是重要的疾病數據來源。二零零九年的住院病人出院人次(包括死亡及轉院人次)為1 724 203。二零零九年病人住院的主要原因(圖7)與往年相若。

Figure 7 : Leading Causes of Hospitalisation, 2009
圖 7 : 二零零九年病人住院的主要原因



Note : Percentage refers to percentage in respect of the total in-patient discharges. The percentage may not add up to 100% due to rounding.
註： 此處所指的百分比是指住院病人出院總人次的百分比。由於進位關係，百分比的總和可能不等於100%。

Disease Surveillance

Disease surveillance enables the health authority to identify prevailing incidence and trends of diseases, to conduct timely investigation, and to formulate and implement intervention strategies. In Hong Kong, systematic disease surveillance for infectious diseases, occupational diseases and cancer is in place.

疾病監察

疾病監察有助衞生當局確定當前的疾病發病率及趨勢，從而作出適時調查，以及制定和推行針對策略。目前，香港對傳染病、職業病及癌病均已設立有系統的監察機制。

Infectious Diseases

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.

傳染病

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)。醫生均須向衞生署呈報懷疑及證實屬須呈報傳染病的個案，以便衞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# 甲型流行性感冒(H2)、甲型流行性感冒(H5)、甲型流行性感冒(H7)、甲型流行性感冒(H9) 、豬型流行性感冒#	Rubella and congenital rubella syndrome 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 鉤端螺旋體病	*Streptococcus suis* 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 *Staphylococcus aureus* 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
Escherichia coli 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
Haemophilus influenzae 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.

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%。

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.

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。

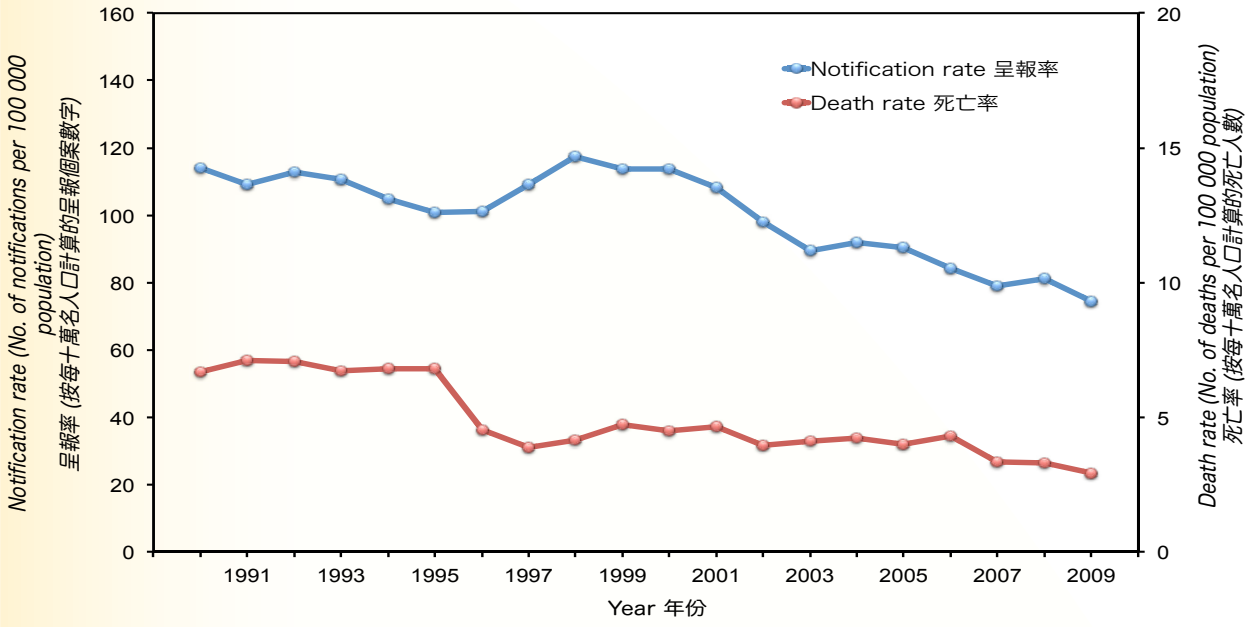
Tuberculosis

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).

結核病

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

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.

病毒性肝炎

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。

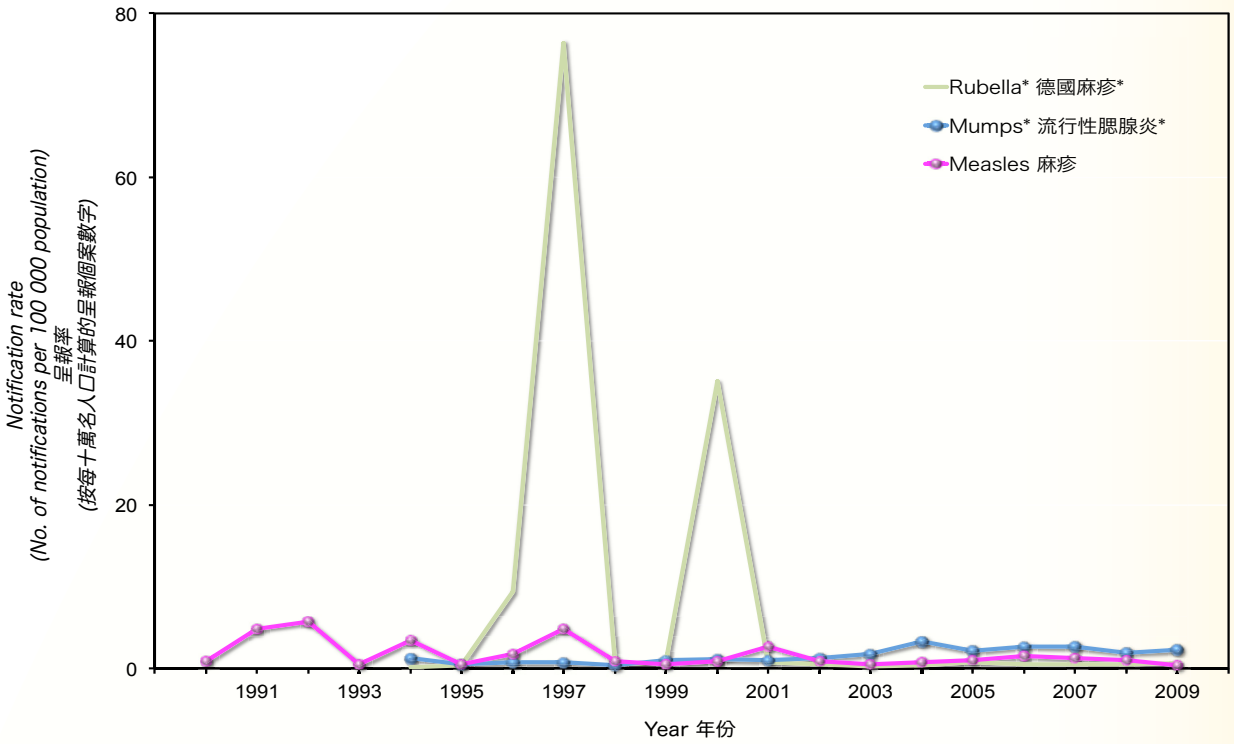
Vaccine preventable diseases

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.

疫苗可預防的疾病

二零零九年，衞生署共接報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的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

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.

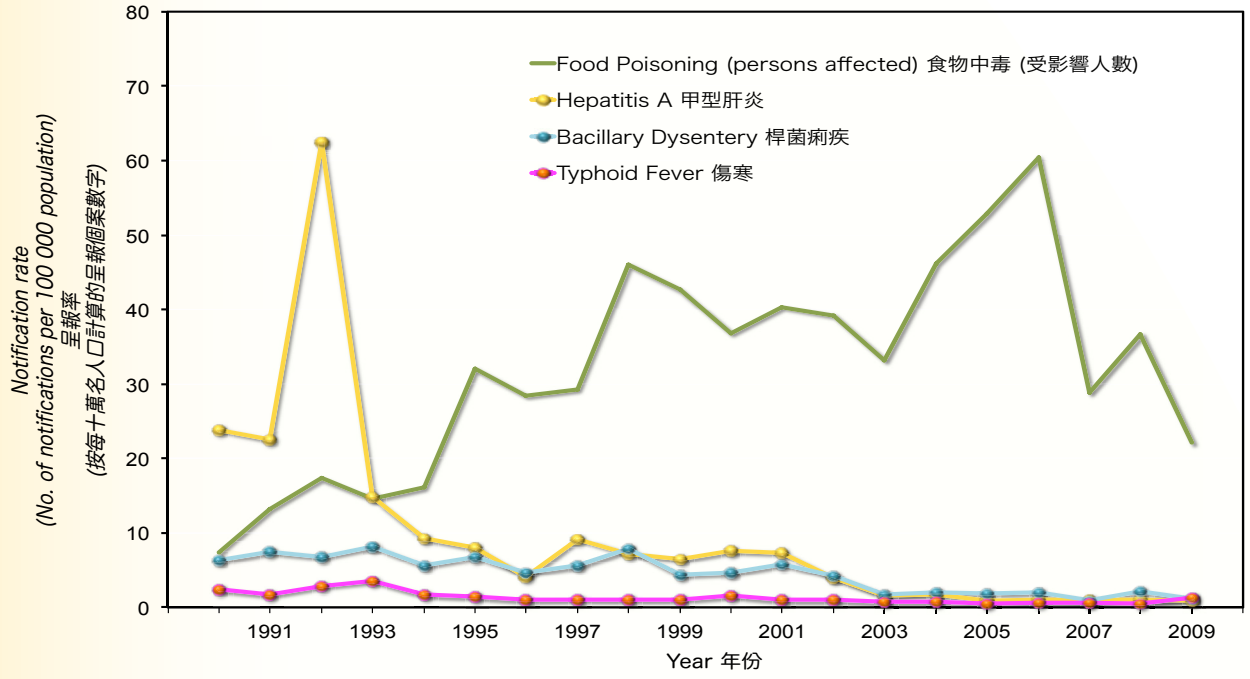
Bacteria remained the major cause of food poisoning outbreaks, accounting for 78.1% of all outbreaks. About 17.4% of all outbreaks were laboratory-confirmed and the three most common causative agents were *Salmonella species*, *Vibrio parahaemolyticus* and noroviruses. Food poisoning caused by chemicals 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.

食物傳播的疾病

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。

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，監控對公共衞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。

衞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.

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。

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.

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。

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.

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。

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.

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。

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

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。有關結果定期在衞生署及衞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.

供本港的醫生及牙醫參考。

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.

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，衞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。有關結果定期在衞生防護中心的網站公布，供各界人士參考。

Occupational Diseases

職業病

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.

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。

In 2009, there were 268 cases of confirmed occupational diseases, increasing by 64 cases as compared with 204 in 2008. The most common occupational diseases were silicosis, occupational deafness, tenosynovitis of the hand or forearm, and tuberculosis. The increase in the number of cases was mainly due to year-on-year fluctuation in the number of cases of chronic diseases such as silicosis and occupational deafness, and the prescription of mesothelioma as a new occupational disease under the Pneumoconiosis and Mesothelioma (Compensation) Ordinance in April 2008. Relevant figures are set out in Table D.

在二零零九年，經證實的職業病個案有268宗，較二零零八年的204宗增加了64宗。最常見的職業病是矽肺病、職業性失聰、手部或前臂腱鞘炎，以及結核病。個案數目增加主要是因為慢性疾病個案(如矽肺病及職業性失聰)數目在年度間有所變動，以及間皮瘤在二零零八年四月被列入《肺塵埃沉着病及間皮瘤(補償)條例》為新的職業病。有關數字載於表D。

Table D : Confirmed Cases of Occupational Diseases, 2008 and 2009
表 D : 二零零八年及二零零九年經證實的職業病個案數目

Disease 病歷	Number of Cases 個案數目	
	2008	2009
Silicosis 矽肺病	65	86
Occupational deafness 職業性失聰	58	77
Tenosynovitis of the hand or forearm 手部或前臂腱鞘炎	40	39
Tuberculosis 結核病	25	18
Mesothelioma 間皮瘤	1	15
Asbestos 石棉沉着病	5	5
Gas poisoning 氣體中毒	4	17
Occupational dermatitis 職業性皮膚炎	3	10
Streptococcus suis infection 豬型鏈球菌感染	3	0
Others 其他病症	0	1
Total 總數	**204**	**268**

Source: Occupational Health Service of the Labour Department.
資料來源: 勞工處職業健康服務部。

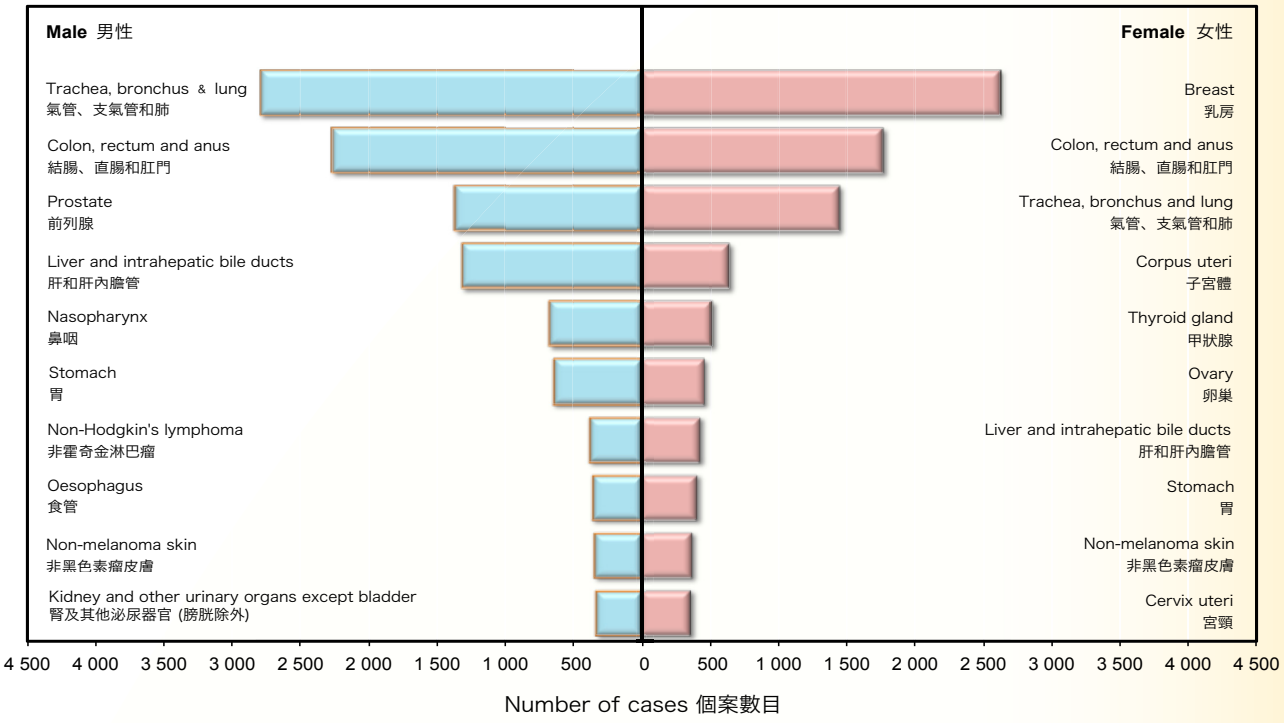
Cancer

The Hong Kong Cancer Registry under the Hospital Authority has provided population-based cancer incidence data. The types of cancers with the highest incidence in 2008 are shown in Figure 11. Lung cancer and breast cancer were the commonest cancers diagnosed in males and females respectively.

癌病

醫院管理局轄下香港癌病資料統計中心提供了全港性的癌病發病率數字。圖11列出於二零零八年發病最高的癌病類別。肺癌及乳癌分別是男性及女性最常患的癌病。

Figure 11 : Top Ten Cancer New Cases Notified to the Hong Kong Cancer Registry, 2008
圖 11 : 二零零八年香港癌病資料統計中心接報的首十類癌病新增個案



Source: Hospital Authority.
資料來源：醫院管理局。

Health Surveys Results

A Behavioural Risk Factor Survey was conducted in April 2009 to collect territory-wide data on health related behaviours among the Hong Kong adult population. The survey provided useful information to facilitate planning, initiating, supporting and evaluating health promotion and disease prevention programmes. The survey reported that about two-fifths (38.7%) of people aged 18-64 were overweight/obese; about four-fifths (79.0%) failed to meet the WHO's recommendation of having at least five servings of fruit and vegetables per day; about one-fifth (21.0%) were classified as having 'low' level of physical activity; and about one-twelfth (8.4%) of the respondents had binge drinking. In addition, according to the Thematic Household Survey Report No. 36 of the Census and Statistics Department, one in every eight persons (11.8%) aged 15 and above were daily smokers.

Report of Child Health Survey (CHS) 2005/2006 was published and this survey aimed to provide baseline data on the health and well-being of children aged 14 and below in Hong Kong. The survey reported that 92.2% children aged 0 to 5 and 91.9% of children aged 6 to 10 were rated to have 'excellent', 'very good', or 'good' general health status by their parents; 82.9% of children aged 11 to 14 rated their own general health as 'excellent', 'very good', or 'good'. This survey has provided a rich body of information on a number of health issues concerning the child population in Hong Kong.

健康統計調查結果

衞生署在二零零九年四月進行了「行為風險因素調查」，以收集本港成年人與健康有關的行為數據。調查提供了有助策劃、開展、支援及評估健康促進與疾病預防計劃的資料。調查顯示約五分之二(38.7%)年齡介乎18至64歲的人士屬超重或肥胖；約五分之四(79.0%)未能達至世衞建議每天最少進食五份蔬果的份量；約五分之一(21.0%)的體能活動屬「低度」；以及約十二分之一(8.4%)的受訪者曾暴飲。另外，根據政府統計處的《主題性住戶統計調查第三十六號報告書》，每八個15歲及以上人士當中，約有一個(11.8%)習慣每日吸煙。

發佈了「二零零五年至二零零六年兒童健康調查」的報告，調查目的為取得香港十四歲及以下兒童人口健康的基準數據。調查顯示92.2%的0至5歲兒童及91.9%的6至10歲兒童被家長評為健康概況「非常好」、「很好」或「好」，82.9%的11至14歲兒童認為自己的健康概況為「非常好」、「很好」或「好」。本調查提供了有關香港兒童人口多項健康問題的豐富資料。

Poisoning Incidents Notification

The Toxicovigilance Section received a total of 186 notifications in 2009. After investigation, 45.4%, 6.1% and 48.5% of established poisoning incidents were related to Chinese medicine related adverse events, heavy metals and other poisoning substances respectively. Other poisoning substances involved slimming products, products for treating erectile dysfunction and melamine tainted dairy product, etc.

中毒個案的呈報

在二零零九年，毒物安全監察組共接獲186宗中毒個案的呈報，經調查後與中藥、重金屬及其他毒物有關的個案分別為45.4%、6.1% 和 48.5%。而與其他毒物有關的個案主要涉及纖體產品、壯陽產品和受三聚氰氨污染的奶類產品等。