

本署檔號 Our Ref. : (42) in DH SEB CD 8/91/9

25 September 2009

Dear Doctors,

**Revised Laboratory Testing Protocol
for Human Swine Influenza Infections in Designated Flu Clinics**

Latest laboratory surveillance data reveal that Human Swine Influenza (HSI) is the predominant influenza virus strain circulating in Hong Kong, representing over 80% of all circulating influenza viruses. Approximately 60% of patients with influenza-like-illness (ILI) attending Designated Flu Clinics (DFCs) under the Hospital Authority (HA) are tested positive to HSI. In other words, HSI now accounts for the majority of ILI. A patient with ILI has a 60-80% chance of being due to HSI and can be managed as such (please refer to HA's management guideline for DFCs at www.ha.org.hk). Testing of individual patients for HSI is not warranted except for special indications.

Furthermore, at this stage of the HSI pandemic, the number of laboratory confirmed HSI cases by itself is no longer useful as a surveillance indicator, as many infections are not detected due to their mild nature. The World Health Organization (WHO) recommends that for countries already experiencing community-wide transmission, the focus of surveillance activities may shift to reporting against the established indicators for the monitoring of seasonal influenza activity. Laboratories should perform a representative number of tests for further characterization and drug resistance monitoring depending on their national capacity. Following WHO's recommendation, overseas health authorities do not routinely test all patients with ILI for HSI. HSI activity is instead monitored by routine surveillance systems for influenza and HSI testing is limited to those patients who are clinically indicated or for the purpose of surveillance.



In view of WHO's recommendation and local epidemiology of HSI, **from 28 September 2009 onwards**, the current strategy of conducting HSI tests for patients attending DFCs, regardless of severity of clinical condition will be revised. Under the new HSI testing protocol, besides a small number of specimens reserved for surveillance, DFCs will offer testing to those patients who are clinically indicated, i.e., the following groups of patients:

1. Pregnant women;
2. Children at or under the age of 12 months;
3. Health care workers include staff from residential homes;
4. Patients live in residential homes without outbreak; and
5. Patients with persistent fever (over 38°C) or worsening of ILI symptoms 48 hours after treatment.

Please note that DFCs cannot be expected to provide HSI testing to patients whom you refer falling outside the above groups. The revised testing protocol will also apply to the Accident and Emergency departments in public hospitals.

As per WHO recommendation, beginning on 28 September 2009, CHP replace daily reporting of HSI laboratory confirmed cases with weekly update of HSI using a series of surveillance indicators. Latest influenza situation will be published weekly at our weekly publications "Swine and Seasonal Flu Monitor" at www.chp.gov.hk.

Thank you very much for your attention.

Yours sincerely,



(Dr SK CHUANG)

Consultant Community Medicine (Communicable Disease)
Centre for Health Protection
Department of Health

