

Social Hygiene Symposium 1999

reported by Dr. T. Y. Ho

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 Organizer: Social Hygiene Service, DH

Leprosy in Hong Kong

Speaker: Dr. C. K. Ho

The incidence of leprosy in Hong Kong had decreased from 2.8 per 100,000 population in 1974 to 0.16 in 1997 (Figure 1). Tuberculoid leprosy accounted for 45% of the new cases, borderline leprosy 25% and lepromatous leprosy 30%. WHO Multi-drug therapy (WHO-MDT) was introduced in Hong Kong in 1982. There had been 56 relapses during 1990 to 1997 (relapse rate 4.6%) in which 35 cases were lepromatous leprosy, 12 borderline leprosy and 9 tuberculoid leprosy. Leprosy is well controlled in Hong Kong but continued surveillance is needed.



Figure 1: Incidence of leprosy in Hong Kong 1977-1997

Sexually Transmitted Disease Control in Hong Kong

Speaker: Dr. K. Y. Chow

According to the annual return of the Government Social Hygiene Service (SHS), the incidence of sexually transmitted diseases (STDs) in Hong Kong has been increasing since their trough in the early 90's (Figure 2). In 1998, there were a total of 26,765 new cases, with 7,247 cases of non-gonococcal urethritis (NGU), 5,549 cases of non-specific genital tract infection (NSGI), 3,641 cases of genital wart (GW), 2,775 cases of gonorrhoea (GC), 1,343 cases of genital herpes (HG) and 1,053 cases of syphilis.

STD control should be a public health priority. Population based measures include increasing public awareness, promoting condom use and targeting high-risk groups. The provision of prompt, effective treatment is important and a syndromic approach can be adopted in the private sector where laboratory investigations may not be feasible or appropriate. The continuous surveillance of both STDs and high-risk behaviours is essential. Collaboration with health authorities in Mainland China will be useful in view of the ever-increasing cross-border activities.

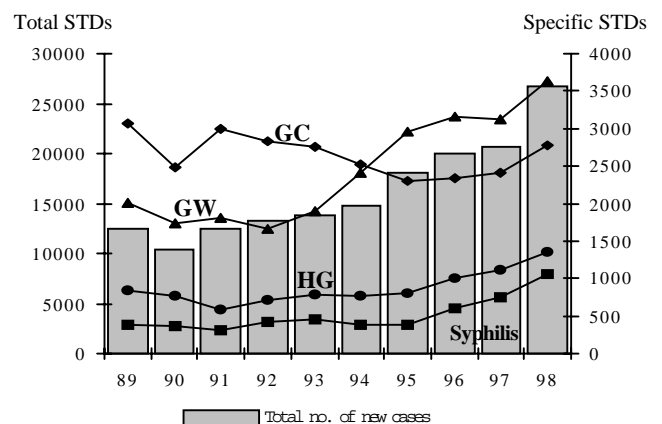


Figure 2: New cases of STDs at SHS (89-98)