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## 先進數據分析 做好衛生決策 梁卓偉醫生專訪 Advanced Data Analysis for Better Decisions Interview with Dr Gabriel LEUNG

衛生署每天都會收到很多有關醫學、生物學及病毒排列等數據，如果將這些數據進行科學性的分析，便可變成有用的公共衛生情報，方便有關部門作出有理據的決定。而這個需要高科技與學術研究支持的重要工作，就落在衛生防護中心數據分析及疾病模型科學委員會以及一群學術伙伴的身上。

數據分析及疾病模型科學委員會主席梁卓偉醫生表示：「利用數學模型及統計學，作為數據分析的工具，參考外國的範例，以本地臨床醫學證據互相引證，便可得出香港的疾病模型。衛生防護中心就是透過定點監測及有關的數據分析，準確地偵測到傳染病的爆發源頭。」尋求更精確的方法監

The Department of Health (DH) receives a lot of medical, biological and viral sequencing data on a daily basis. With statistically robust analysis, such data can be turned into highly relevant public health intelligence that facilitates Government departments in making evidence-based decisions. The technically demanding task of translating such information rests on the Scientific Committee on Advanced Data Analysis and Disease Modelling (SCADADM) and a group of academic partners of the CHP.

Dr Gabriel Matthew LEUNG, Chairman of the SCADADM, said, "To develop useful projections, simulate the impact of interventions and understand transmission dynamics of different diseases in Hong Kong, we need to make use of mathematical models and statistical tools while drawing reference from overseas experience and local clinical evidence. Through surveillance and

控疾病，保障市民健康，是衛生防護中心的重要任務。

梁醫生說：「在沙士(SARS)以前，不是太多人從事這方面的工作，很多醫生也未認識到數據分析及疾病模型的重要性。現在，數據分析及疾病模型科學委員會的工作，就是推介這些數據分析工具的用處，應用於各種疾病的預防及醫療決策之上。我們亦希望透過講座及傳媒，增加業界同事及大眾對此工具的認識。」

## 跨界別融合

身為香港大學社會醫學系及公共衛生學院副教授，梁醫生說醫療服務與醫學研究是不可分割的。例如，當本港出現一些已知的疾病時，或可參考外國的研究報告，可是當遇有新的疾病，卻沒書可查，而且外國的疾病研究也可能因環境不同而不適用於本港，所以政府與醫學界進行本地的研究實在重要。

「公共衛生須靠跨界別承先啟後地推動。在英國，醫療界早已與學界及其他公共衛生界別合作，公開地分享數據及思維。」作為防護中心科學委員會的一員，梁醫生肯定衛生防護中心的方向。他稱讚衛生防護中心極具效率，短短一年之內所做到的，在某些國家可能需時十年。

## 關注公共衛生

曾於英國、加拿大求學長達15年、肄業於美國哈佛大學公共衛生碩士課程的梁醫生，99年回港工作，他熱切關注本港的醫療衛生問題。「香港實在很少人對公共衛生進行學術性的研究，沙士之後，公共衛生的議題越來越受到重視，但大部份人目前對此的意識仍很薄弱。由於這界別的專家太少，更加需要致力培訓下一代的人才。」談到醫療衛生，梁醫生如數家珍，他因應本港公共衛生的需要而作出廣泛的研究，如沙士、流感、各類癌症及慢性疾病，以至醫療政策及融資模式。

## 實戰經驗 有助研究

醫生的背後，原來還另有天地。曾在英國及加拿大修讀音樂的他，精通鋼琴及指揮，在前年的一個兒童音樂會，他還擔任了客席指揮。年少時，他也曾面臨抉擇，但是在音樂家與醫生之間，他選擇了後

analysis of related data, the Centre for Health Protection (CHP) can for example accurately track down the source of a communicable disease outbreak in a timely fashion." To constantly strive for ever better ways of monitoring diseases and protecting Hong Kong's health is the primary task of the CHP.

"Before SARS came in 2003, data analysis and disease modelling was a field where few would engage, a discipline attached with less importance than it deserved. The job of SCADADM is to promote the use of advanced data analytic tools in the prevention of disease by providing robust evidence for policy deliberations. We also hope to broaden the field's appeal, introduce and explain these tools to fellow colleagues and the public through the media, educational activities and public forums," he said.

## Cross-sectoral collaboration

Dr LEUNG is Associate Professor in Translational Public Health at the Department of Community Medicine and School of Public Health, the University of Hong Kong. He maintained that service and research are two sides of the same coin. For example, we may reference investigative reports from abroad when a well-documented disease strikes Hong Kong; but if a novel disease is found locally, there would be no books to refer to, and overseas findings may not be applicable to the Hong Kong scenario due to the unique local circumstances. This possible shortcoming in the medical literature is a key reason why local

research, performed jointly by the Government and the academic medical sector, is important.

"Public health is inherently a multidisciplinary enterprise. In countries such as the United Kingdom (UK), the service sector has for a long time collaborated closely and unreservedly with academia and other partners in realising a collaborative approach to public health. Data and ideas are always shared openly." As a member of the Scientific Committee, Dr LEUNG supports the CHP's movement towards in this direction. He regards the CHP as a highly competent and efficient organisation that has achieved in one year what other countries would have taken a decade or more to accomplish.

## Devotion to public health

Dr LEUNG is a graduate and visiting fellow of the Harvard School of Public Health as well as adjunct faculty at the University of Pennsylvania. After living and studying in the UK and Canada for 15 years, Dr LEUNG chose to return to his native Hong Kong in 1999 because of his deep passion for local health and health care. "Too few of us in Hong Kong are pursuing full-time academic research in public health medicine and related sciences. Although public health has gained prominence after SARS, most in the medical fraternity remain indifferent to or even sceptical about what we do. There are simply too few pairs of hands working in the discipline, and this is why I devote considerable time and energy to training up the next generation of public health specialists." Dr LEUNG was elected Vice



梁卓偉醫生於2006年1月5日至7日為衛生防護中心講學，闡釋傳染病數學模型。


Dr Gabriel LEUNG gave talks for the Centre for Health Protection from 5-7 January 2006, elaborating Mathematical Modelling in Infectious Diseases.





者；身為老師，他又如何指導學生在前線醫護與學術研究之間選擇合適的路？

「醫生始終必須接受臨床醫療訓練，時至今日，逢星期四下午我都會在醫管局轄下的家庭醫學門診為病人診症。與病人正面接觸，可增加實戰經驗，在擬定政策時，也能更了解前線醫護人員的感受。」梁醫生建議學生可先從前線醫療工作汲取一定經驗，然後才考慮是否適合做醫學研究。「別以為只有做前線醫護才可幫到人，從事公共衛生的工作可能惠及更多人。」

梁醫生亦向全港市民寄語，表示衛生防護中心的政策必須靠每位市民支持和合作，才可真正做到捍衛健康。 

President of the Hong Kong College of Community Medicine and also served as its Censor in Public Health Medicine. He is conducting extensive research on public health subjects that are of high priority for Hong Kong. These include SARS, influenza, cancer and other chronic diseases, and health economics and policy.


### Practical experience facilitates research

There was more to the world of this doctor than medicine and research. Dr LEUNG was an accomplished pianist and conductor specialising in children's choral music. Prior to focusing full time in medicine, he received formal musical training in the UK and Canada, and still regularly undertakes guest conducting engagements.

What would be his advice, as a medical professor today, for the students who are torn between the paths of frontline medical practice and academic research?

"Doctors must first and foremost be competent


clinicians, regardless of what discipline they eventually specialise in. At the end of the day, clinical observations and applications underpin all medical and public health research in the bedside-bench-population trinity. For instance, I still see patients at the Hong Kong West Cluster Family Medicine Specialist Outpatient Clinic every week. Participating in patient care enriches my work immeasurably. The experience also enables me to understand the concerns and feelings of frontline colleagues and patients first-hand when recommending policy decisions," said Dr LEUNG. He also advised medical students to gain sufficient hands-on clinical experience before deciding whether medical research is the way to go. He added, "not only do frontline clinicians make a real difference to patients' well-being, public health practitioners also save and improve lives, thousands at a time!"

Dr LEUNG believes strongly in partnering with the community when developing and implementing public health policy. Private citizens are very much a key collaborator in protecting Hong Kong's health. 

## 科學委員會天地 Scientific Committees Corner

衛生防護中心於2006年1月5日至7日期間，在數據分析及疾病模型科學委員會的支持下，舉辦了為期三天的培訓課程。這個名為「傳染病數學模型短期課程」的培訓項目，旨在加深本地醫護專業人士對數學模型作為公共衛生工具的認識，以及刺激他們對其實際應用的興趣。

這個為期三天的課程包括兩個環節。首兩天半是通過互動的專題研討會，向參加者介紹數學模型的基本概念、背後的假設、優點和不足之處。課程的第二部份是半天的小組活動，學員通過團隊合作的模式，為模擬爆發案例尋求解決方法。

這個課程獲約200名醫護專業人士踴躍參加，包括醫生、感染控制護士以及科研人員。 


The CHP organised a three-day training course from 5 to 7 January 2006 with the support of the Scientific Committee on Advanced Data Analysis and Disease Modelling (SCADADM). The short course, entitled 'Short Course in Mathematical Modelling in Infectious Diseases', was designed to promote understanding of mathematical modelling as a public health tool, and to stimulate interest in its practical application among local healthcare professionals.

There were two parts to this three-day programme. The first two and a half days were comprised a series of interactive seminars to introduce basic concepts of mathematical models, their underlying assumptions, strengths and weaknesses. The second part of the programme was a half-day Outbreak Team Exercise in which participants were engaged in teamwork to derive solutions for managing hypothetical outbreak scenarios.



來自倫敦大學的Dr Azra GHANI於2006年1月5日至7日舉辦的「傳染病數學模型短期課程」中講學。

Dr Azra GHANI from the Department of Infectious and Tropical Diseases, the London School of Hygiene and Tropical Medicine presented in the Short Course in Mathematical Modelling in Infectious Diseases held from 5 to 7 January 2006.

The course was well received by about 200 health care professionals, including medical doctors, infection control nurses and research personnel. 


## 時代見證：流動胸肺科診所

### Witness of the Times - Mobile Chest Clinic

成立於1947年的流動胸肺科是一隊包括醫生、護士、文員、放射師及工友組成的醫療隊伍，結構與一般全日固定胸肺科診所無異。最大的分別是流動胸肺科必須於兩小時內完成半天的門診，準時交還地方及趕往數公里外的另一診所開診。如有遲緩，可能會引起混亂及投訴。故此，每一個流動胸肺科的醫護人員都要對胸肺科病人的處理和診所的運作有透徹認識，以便隨時作出正確及快捷的反應。

1947年第二次世界大戰剛完結，胸肺科為照顧偏遠居民，每星期一次由中環夏慤結核病診所健康中心派送醫護人員到偏遠地方如香港仔、大埔、西貢及元朗為肺病人診症。及後全日胸肺科診所所在港九各地陸續建立，流動胸肺科主要在新界提供服務，基地亦於1989年由中環搬到油麻地。為了節省交通時間及資源，流動胸肺科基地再於1993年搬到圓洲角胸肺診所。新界流動胸肺科現今有18名成員，一輛16座位小巴及一輛X光照肺車。每天早上，各員工由基地出發到上水石湖墟診所、元朗賽馬會診所、西貢方逸華診所及東涌健康中心開診。每隔一星期的星期四會到青山醫院為胸肺病人診症。

隨着新界的急速變化，流動胸肺科同時要照顧新界區不同的人士：早上，會到沒有門牌的圍村做家訪，下午，可能要在機場為世界各地到港旅客做接觸追查。

從一個公務員角度來看，59歲應該是準備退休的時候；可是已59歲的的新界流動胸肺科仍每天為新界居民勤奮服務，並見證了新界的發展。 

Established in 1947, the Mobile Chest Clinic has been serving Hong Kong with a team equivalent to that of a full-time stationary chest clinic, which comprises doctors, nurses, clerical staff, radiographers and workmen. The only difference is that the team has to finish its work for the half day within a two-hour session and be kilometers away in another clinic on time. Thorough understanding and




knowledge of the management of tuberculosis patients is very important to maintain the operation of the clinic. Furthermore, precise decision-making, fast action and good team spirit are necessary.

Back in 1947, Hong Kong was just recovering from the Japanese occupation after World War II. The Mobile Team was set up to take care of citizens living in remote areas. Once a week, health care workers were sent from the Tuberculosis Clinic at the Harcourt Health Centre to subsidiary clinics at Yuen Long, Tai Po, Sai Kung and Aberdeen. With the opening of more and more full-time chest clinics in Kowloon and Hong Kong Island, the base of Mobile Chest Clinic was moved from Harcourt Health Centre to Yau Ma Tei Chest Clinic in 1989. It was further moved to Yuen Chau Kok Chest Clinic in 1993 to reduce the travelling time to remote areas in the New Territories.

Today, the New Territories Mobile Team has 18 staff members. Every morning, all team members will gather at Yuen Chau Kok Chest Clinic and travel to various clinics in a 16-

seater van together with the X-ray mobile truck. At present, the Mobile Chest Clinic runs from the base to the Sheung Shui Chest Clinic in Shek Wu Hui Jockey Club Health Centre, Yuen Long Chest Clinic in Yuen Long Jockey Club Health Centre, Sai Kung Chest Clinic in Mona Fong Health Centre and Tung Chung Chest Clinic in Tung Chung Health Centre. Every alternate Thursday, it will go to Castle Peak Hospital for medical consultation of patients with chest problems.


With the rapid development of the New Territories, the Mobile Chest Clinic has taken on new tasks. It is now serving a much more diverse clientele, from villagers in the rural areas to tourists from around the world at the airport.

For a civil servant, 59 years old is the age preparing for retirement. However, the mobile team still works diligently every day to serve the population in the New Territories as it had witnessed the development there. 



## 接受愛滋病人 提倡安全性行為

### Acceptance to HIV patients and safer sex practice

為響應2005年12月1日的世界愛滋病日，公共衛生服務處轄下的特別預防計劃：紅絲帶中心推出了一連串項目，務求令各界更接受愛滋病人，並提倡安全性行為。紅絲帶中心贊助人及行政長官夫人曾鮑笑微女士在12月2日探訪紅絲帶中心以示支持，曾太對過往愛滋病活動的相片深感興趣。12月18至19日，麥懷禮醫生和歐家榮醫生代表衛生防護中心赴北京出席全國愛滋病綜合防治資訊交流暨媒體報導研討會，介紹愛滋病資訊管理和交流的策略，二人順道探訪聯合國愛滋病規劃署駐華辦事處。與港口衛生處商議後，紅絲帶中心更於06年1月假香港國際機場展出「做個健康旅遊者」展覽攤位，向旅客宣揚安全性行為。 


In response to the World AIDS Day on 1 December 2005, the Red Ribbon Centre under the Special Preventive Programme (SPP) of Public Health Services Branch (PHSB), has produced a series of programmes on promotion of acceptance to HIV patients and safer sex practice. Mrs Selina TSANG, Patron



麥懷禮醫生(右二)於北京全國愛滋病綜合防治資訊交流暨媒體報導研討會中演說。

Dr Darwin MAK (right 2nd) presented on the National HIV/AIDS Integrating Prevention Information Communication & Media Training Workshop in Beijing.

of Red Ribbon Centre and wife of the Chief Executive, visited the Red Ribbon Centre to express her support of their work on HIV prevention on 2 December. She was interested in the photos of past events. Two Medical Officers also attended the National HIV/AIDS Integrating Prevention Information Communication & Media Training Workshop

held in Beijing from 18 to 19 December. Dr Darwin MAK represented CHP to present the communication strategies and information management on HIV/AIDS. They also visited the Joint United Nations Programme on HIV/AIDS (UNAIDS) China Office. In liaison with the Port Health Office of DH, RRC has organized the exhibition "Be a healthy traveller" at the airport in January 2006 to promote safer sex to travellers. 




麥懷禮醫生(左一)及歐家榮醫生(右二)與聯合國愛滋病規劃署駐華辦事處職員會面。

Dr Darwin MAK (left 1st) and Dr Albert AU (right 2nd) of SPP met staff in UNAIDS China Office.

## 預防禽流感及流感大流行的風險傳達工作


### Risk communication on prevention of avian and pandemic influenza

作為政府預防禽流感及流感大流行宣傳運動的一部分，政府印發了兩份分別名為《香港流感大流行的應變準備—預防及保護措施》及《香港流感大流行緊急應變措施》的文件，以闡明政府就流感大流行準備工作及應變措施所制定的策略方向及行動。有關文件亦已上載至衛生署及衛生防護中心的網頁，以供市民參考。

此外，我們也為不同組織，包括醫護專業人員、地區領袖、商會、領事館、公用事業機構、銀行及金融界、藥物供應業等，舉辦了有關流感大流行應變對策及業務持續計劃的研討會及簡報會。 

As part of the Government's publicity campaign on prevention of avian and pandemic influenza, two publications on Government's strategic

directions and actions for influenza pandemic preparedness and response have been published and uploaded onto the websites of the DH and the CHP for public information. They are: (i) Hong Kong's preparedness for influenza pandemic - Prevention and Protection; and (ii) Emergency Preparedness for Influenza Pandemic in Hong Kong,

Besides, forums and briefings on influenza pandemic preparedness and business continuity planning have also been organised for various groups and sectors including health care professionals, community leaders, chambers of commerce, embassies, public utilities, banking and financial sectors, drug supply industry, and etc. 



政府為宣傳預防禽流感及流感大流行而印發的文件。 Publications as part of the Government's publicity campaign on prevention of avian and pandemic influenza.

# 項目巡禮 Programmes in Focus

## 「楊木行動」 Exercise POPLAR

鑑於全球流感大流行的威脅，和鄰近國家出現人類感染禽流感個案，衛生防護中心於2005年11月24日舉行了代號「楊木行動」的跨部門通報演習，測試在世界衛生組織（世衛）宣布在海外出現禽流感在人與人之間容易傳播的情況下，香港處理禽流感爆發的應變能力。來自30多個政府決策局、部門及機構，超過250多人參與是次演習。

是次演習模擬一名香港市民，從一個有41人證實感染H5N1禽流感的區內虛構國家回港，之後出現流感病徵作為序幕，該名病人其後證實感染H5N1禽流感。

在收到醫院管理局的通知後，衛生署的應變計劃隨即全面展開，署內各個單位進入應變狀態並採取適當措施，務求減低疾病傳入本港及在本港蔓延的機會。行政長官亦主持緊急應變級別督導委員會會議，制訂整體疾病控制策略，並決定採取一些對社區有廣泛影響的主要措施。

是次演習反應良好。它為參與的決策局、部

門及機構提供了寶貴的機會，讓他們檢視本身應變計劃的成效，並在實際環境中預演緊急情況下所須擔任的角色。 (HP)

In view of the global threat of influenza pandemic and human cases of avian influenza in neighbouring countries, the CHP launched an inter-departmental communication exercise, code-named "Exercise POPLAR", on 24 November 2005 to test Hong Kong's response to an outbreak of avian influenza in the event that the World Health Organization (WHO) announced efficient human-to-human transmission of the disease in a place outside Hong Kong. More than 250 players from over 30 government bureaux, departments and organisations took part in the exercise.

The exercise started with a situation in which a Hong Kong resident had developed symptoms of influenza after visiting a fictitious country in the region where 41 people were confirmed to have been infected with avian influenza (H5N1). The patient was later confirmed as being infected with the disease.

Having received notification from the Hospital



行政長官(中)在演習中主持緊急應變級別督導委員會會議。

The Chief Executive (middle) convened the Emergency Response Level Steering Committee during the exercise.

Authority, the DH's contingency plan immediately swung into full action with various units moving into their response modes and taking appropriate measures to minimise the chance of the disease getting into Hong Kong. The Chief Executive also convened the Emergency Response Level Steering Committee to give directives on the overall disease control strategy and decide on major stringent measures with a wide impact on the community.

Exercise POPLAR was well received. It afforded players the opportunity to review their contingency plans and rehearse their roles in an emergency in a realistic environment. (HP)



衛生福利及食物局局長(左一)與各署主管商議緊急應變策略。

The Secretary for Health, Welfare and Food (left 1st) convened meeting with Department Heads to discuss on emergency responses and strategies.

署內各單位進入應變狀態並採取適當措施，務求減低疾病傳入本港及在港蔓延的機會。

Various units of the DH moving into their response modes and taking appropriate measures to minimize the chance of the disease getting into and spreading in Hong Kong.

## 組織志願隊伍 提升應變能力 Mobilising volunteers to build surge capacity

由於過往的經驗顯示，流感大流行會對公共醫療及衛生界別造成沉重的壓力，因此有需要提升應變能力。為此，衛生防護中心正與私家醫生協會、護理人員協會、藥劑師協會及非政府機構緊密合作並設立一個機制，擬備志願人員名單，以便在發生緊急公共衛生事故期間可動員在私營及志願界別的志願人員提供協助。同時，當局亦正為公營及私營

界別的醫護人員提供感染控制及流行病學培訓，務使他們做好抗疫準備。(HP)

As past experience shows that influenza pandemic will overload the public medical and health sector, there is a need to build the surge capacity of the health care sector. To this end, CHP is working closely with the private doctors associations, nursing

associations, pharmacists associations and non-governmental organisations to establish a mechanism for mobilising volunteers in the private and voluntary sectors during public health emergencies. Meanwhile, training on infection control and epidemiology is being provided to health care workers in both the public and private sectors to enhance their preparedness. (HP)



# 活動快拍 Snapshots of Events

6.11.2005

自2005年10月起，社區聯絡部與各界攜手合作，在社區舉辦超過70次健康教育活動，向市民宣傳「防備流感大流行」的訊息。

Since October 2005, the Community Liaison Division has collaborated with various sectors to deliver over 70 health education activities at district level to step up public education on "Influenza Pandemic Preparedness".



16.11.2005

衛生防護中心總監梁柏賢醫生與助理政府資訊科技總監(項目管理及應用系統整合)馬錦霖先生於2005年11月16日主持切燒豬儀式，慶祝公共衛生資訊系統完滿竣工。

A roast pig cutting ceremony to celebrate

the successful completion of the Public Health Information System (PHIS) was officiated by Dr PY LEUNG, Controller, Centre for Health Protection and Mr Alex MA, Assistant Government Chief Information Officer (Programme Management and Application Integration).



19.11.2005



衛生署署長林秉恩醫生(左四)、世界衛生組織西太平洋區域辦事處Dr Linda MILAN(左五)及香港中文大學醫學院社區及家庭醫學系李紹鴻榮譽教授(左六)出席衛生署主辦的「共創香港健康城市」研討會。Dr PY LAM, Director of Health (left 4th), Dr Linda MILAN, Director, Building Healthy Communities and Populations, World Health Organization Western Pacific Regional Office (left 5th) and Prof S H LEE, Emeritus Professor, Community and Family Medicine, School of Public Health, Chinese University of Hong Kong (left 6th) attended the seminar on "Building Healthy Cities in HKSAR" organised by the Department of Health.

5.12.2005



香港中文大學25位醫學院四年級學生到訪參觀衛生防護中心。25 Year-4 students from the Faculty of Medicine of the Chinese University of Hong Kong visited the CHP.

11.12.2005

本署與深水埗區議會、明愛醫院及非政府機構於深水埗海麗村合辦「健康安全社區海麗中嘉年華」，並設有典禮、比賽和遊戲攤位。

The "Healthy & Safe Community Carnival" at Shamshuipo Hoi Lai Estate was co-organised with Shamshuipo District Council, Caritas Medical Centre and local Non-Governmental Organisations. It consisted of a ceremony, competition and game booths.



10.12.2005



衛生署聯同香港紅十字會在屯門區合辦「每日二加三」水果蔬菜推廣活動。Department of Health and Hong Kong Red Cross jointly organised the "2 Plus 3 A Day" Fruit and Vegetable Promotion Programme in Tuen Mun.

# 活動快拍 Snapshots of Events

15-17.12.2005



馬來西亞政府衛生部門代表及聯合國兒童基金代表探訪衛生防護中心公共衛生服務處轄下的特別預防計劃。

A delegation from the Ministry of Health of the Malaysian Government and UNICEF visited the Special Preventive Programme of Public Health Services Branch, the CHP.

16.12.2005



南京衛生代表團來港參觀衛生防護中心。

A Nanjing Health Delegation visited the CHP.

7.1.2006

為推動健康生活，衛生署與香港醫學會、其他政府部門、推廣運動的團體及非政府組織合辦「運動處方計劃」，開展儀式與「運動處方證書課程」畢業典禮同時舉行。

Department of Health joins hands with Hong Kong Medical Association, relevant Government departments, sports facilitators and community organisations to launch the Exercise Prescription Project. The launching ceremony of the Project was held alongside the graduation ceremony of the Exercise Prescription Certificate Course for medical practitioners.



## 編者的話 Words from the Editor


狗年剛至，編者謹祝各位身體健康，心想事成！

今期喜獲胸肺科來稿，講述了歷史悠久的新界流動胸肺科診所的來由及日常工作點滴，見證了新界59年來的發展。

預防及監測疾病，改善風險傳達，是衛生署衛生防護中心的重任。新年伊始，衛生防護中心會繼續為市民提供服務，宣揚注意衛生、預防疾病之重要性；亦會致力與本地、國內及海外團體合作。而「CHP通訊」將繼續見證防護中心各部門是如何積極地向以上目標進發。

此外，今期訪問了衛生防護中心數據分析及疾病模型科學委員會主席梁卓偉醫生。到底數據分析及疾病模型是什麼？它怎樣協助疾病監控及改善公共衛生？快快細閱內文吧！

大家如對「CHP通訊」有任何意見，可傳真或

電郵至本刊編輯部。傳真號碼為2591 6127，  
電郵地址為 [rcag@dh.gov.hk](mailto:rcag@dh.gov.hk)。 

The Lunar New Year has just begun. The CHP wishes you good health and may all your dreams come true in the Year of the Dog!

This issue features an article from the Tuberculosis and Chest Service about the Mobile Chest Clinic in the New Territories. The article tells of the background and daily work of this clinic, which witnessed the development of the New Territories in the past 59 years.

The essential role of the CHP is to achieve effective prevention and surveillance of diseases and to enhance its risk communication capacity. The CHP of the Department of Health will continue to serve the local people by promoting

the importance of hygiene and health protection, as well as making efforts to co-operate with local, Mainland and overseas organisations in the coming year. The CHP newsletter will also continue to witness how enthusiastic every unit of the CHP is forging ahead to achieve these goals.

Moreover, we interviewed Dr Gabriel Matthew LEUNG, the Chairman of Scientific Committee on Advanced Data Analysis and Disease Modelling. What is advanced data analysis and disease modelling after all? How does it help to control diseases and improve public health? Find out more from the feature interview.

We welcome suggestions. Please fax them to our Editorial Board at 2591 6127 or email to [rcag@dh.gov.hk](mailto:rcag@dh.gov.hk). 