Measles outbreaks are still here to stay

Hong Kong Med J 2020;26:551

https://doi.org/10.12809/hkmj198319

To the Editor-Measles outbreaks have been reported in the Hong Kong Medical Journal in the past 2 years.^{1,2} Such outbreaks occur worldwide, including in countries where measles was previously considered eliminated. In March 2019, there was a measles outbreak at Hong Kong International Airport involving airport workers, some with documented evidence of at least two doses of measles vaccinations.³ Fortunately, the patients were all relatively young adults who experienced with mild symptoms, and the basic reproduction number of these cases was not high. In response to this outbreak, control measures at the airport included a vaccination programme and measles antibody testing for airport staff. The Hong Kong childhood immunisation schedule was also revised, so that the second dose of the MMRV (measles, mumps, rubella and varicella) vaccination is given at age 18 months (previously given at age 6 years) to enhance protection against measles.

Measles vaccination uptake rate is declining due to pockets of unvaccinated communities and anti-vaccination movements, both of which might have contributed to the recent outbreaks. To eliminate measles, a continuously high (>95%) level of vaccination coverage is required in all areas. Most recent outbreaks of measles in developed countries have been imported cases; thus, they are closely linked to the aviation industry. Early recognition of disease outbreak could prevent a global pandemic. Therefore, it is crucial to have contingency plans at every airport to prevent the spreading of contagious diseases. Travellers should ensure their vaccination status is up-to-date with two doses of measles vaccination; infants from 6 months of age should receive a supplementary dose of measles vaccine if they are travelling to areas with measles outbreaks.⁴ Affected patients, especially school-age children, should be isolated and quarantined at home for at

least 4 days from the appearance of rash.

The 2019 measles outbreak saw a substantial increase in the number of measles cases reported worldwide relative to 2018. Such outbreaks will occur again if we do not learn from the past. The only hope to truly defeat measles is for humankind to work together.

Author contributions

The authors had full access to the data, contributed to the study, approved the final version for publication, and takes responsibility for its accuracy and integrity.

Conflicts of interest

As an Editor of the Journal, KL Hon was excluded from the review process for this letter. The other author has disclosed no conflicts of interest

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Taking a multidisciplinary team approach to better healthcare outcomes for society

Hong Kong Med J 2020;26:551-2

https://doi.org/10.12809/hkmj209133

To the Editor—Globally, healthcare has become including population ageing, health inequality, social more diverse and complex. A broad range of sustainability, long-term conditions, and coronavirus increasing and emerging challenges are facing people disease 2019. This calls for an integrated provision and communities in an unprecedented manner, of prevention, treatment, and care that extends beyond the conventional boundaries of individual disciplines to deal with the wider determinants of health and wellbeing. The importance of a teambased approach in healthcare decision-making and problem-solving has been widely recognised in many countries worldwide. The family doctor teams in China and the multidisciplinary teams in Scotland, United Kingdom, for example, are currently being implemented to conceptualise care regimens as well as coordinate the delivery of complex care across different levels of the healthcare system. In Hong Kong, the multidisciplinary team approach built upon medico-social collaboration has also demonstrated positive impacts in supporting endof-life patients in residential care homes,¹ reducing the clinical and economic burden of geriatric hip fracture,² and improving medication safety for chronic disease management.³ It is essential to have community participation in these services as this may lead to coproduction of health, giving the most optimal health promotion services.4,5

The 'Healthcare for Society', which started as 'Doctor for Society' in August 2012, is a popular section in the Hong Kong Medical Journal.⁶⁻⁸ Medical students serve as interviewers to report various activities and outstanding achievements of medical doctors and medicine-related professionals who have made substantial voluntary contributions to Hong Kong society. These community services are unconditional and most are dedicated to vulnerable groups.9-11

In view of the change in healthcare delivery and the need to prepare healthcare professionals for tackling the ever-increasing complexity of challenges, it is time to consider expanding the scope of this inspirational showcase from individual exemplars to all members in the team as a whole from a multidisciplinary perspective. The stories 7. Lai EC, Wong MC. Doctor for Society: paying tribute to of these exemplary teams would convey farreaching messages to encourage our colleagues and students who are the next generation of healthcare 8. Wong MC, Lai EC. "Healthcare for Society"-a column professionals to dedicate themselves to healthcare community. The collections of informative showcases shall substantially contribute to novel models of care delivery to improve population wellbeing beyond the realms of clinical encounters and medical practices. Meanwhile, community services play a role in medical education.¹² Student interviewers could greatly benefit from learning how professionals from varying disciplines work cohesively, communicate efficiently, and share resources cooperatively across sectors and disciplines under strengthened leadership to improve population health outcomes and achieve excellence in healthcare for the community at large.

Author contributions

The author had full access to the data, contributed to the study, approved the final version for publication, and takes responsibility for its accuracy and integrity.

Conflicts of interest

As an Editor of the Journal, HHX Wang was not involved in the review of this letter. The author has disclosed no other conflicts of interest.

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