



China coronavirus: partial border closures into Hong Kong are not enough, say doctors

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As the novel coronavirus (2019-nCoV) outbreak rapidly expands across the border in mainland China, healthcare workers in Hong Kong are bracing for a potential explosion of cases locally and have urged the government to severely restrict arrivals from mainland China or even to close the border completely.

Eight cases were confirmed in Hong Kong as of 27 January, and 38% of the 663 beds in the negative pressure wards, which are used to isolate patients at public hospitals, were already in use, said officials. They expressed concern that the public health system might be overwhelmed if a local “super-spreader” event occurs or by people from mainland China coming into Hong Kong to seek treatment.

Partial closures

On 28 January Carrie Lam, Hong Kong chief executive, announced a partial border closure, halting all cross border rail routes from midnight on 30 January, as well as a suspension of six border checkpoints, suspension of ferries, gradual reduction of cross border flights from 480 a week to 240 until further notice, and a reduction of cross border buses. However, some major border control points will remain open.¹

However, doctors warned that these measures did not go far enough to protect public health in the city. So far, the government has barred only those people who self-declare that they have been in Hubei province during the past 14 days, and fears have arisen of an influx of people from mainland China seeking treatment in the city.

The government backtracked on an earlier decision to waive medical charges for non-residents treated for 2019-nCoV infection or put into isolation for observation, saying that it did not want to exert additional pressure on the local healthcare system by luring sick people from across the border. The reason for the move was not cost but access, said Arisina Ma Chung-yee, president of the Hong Kong Public Doctors’ Association.

She said, “People come from mainland China to Hong Kong to seek medical attention for a number of reasons. For the recent novel coronavirus pneumonia crisis, it’s a matter of whether you can get treatment or not in China. The health system there has already collapsed under the epidemic.

“We have seen news reports that in some provinces they have started to not treat or not do any diagnosis, so some mainlanders

just come down to Hong Kong, desperately seeking any kind of treatment or test.”

Although shutting the border entirely may be impractical because it would leave people stranded on either side and unable to return home, many other administrative measures are available to the government, said Ho Pak-Leung, president of the Carol Yu Centre of Infection at the University of Hong Kong.

“All persons entering Hong Kong from China should fill in health declaration forms and should undergo 14 days of self-isolation under the direction of medical professionals,” he said, in a joint statement with the Hong Kong Public Doctors’ Association and the Frontline Doctors’ Union.

Quarantine

Neighbouring Macau—which, like Hong Kong, is a Special Administrative Region of China—has been far more proactive, said Ho. On 27 January the Macau authorities started searching hotels for visitors from Hubei province and deported those who were unwilling to enter quarantine camps.

Similarly, a statement on the Facebook page of the Chinese University of Hong Kong’s Faculty of Medicine called for restrictions on movement of people into the city. It said, “Although tightening the immigration policy cannot completely prevent cross-border transmission, it can effectively reduce the opportunity for invisible patients to enter, reduce the number of infected people, and thus reduce the load on the local medical system.”²

The Hospital Authority Employees Alliance, a newly formed union for healthcare workers in the public sector, went further, calling for a closure of the border and better protection for healthcare workers—threatening to take industrial action from 3 February, including going on strike, if authorities failed to deal with their demands.

Doctors and other medical staff in the city’s public hospitals have drawn lots to determine who will join the “dirty teams” to care for infected patients. The team members will not return home, instead staying in hospital provided accommodation for the duration of their six weeks’ service. However, the Hospital Authority has reported difficulty in finding hotels that are willing to take staff who are afraid to go home in case they are infected.³

The government was forced to back down from converting a new, partially occupied public housing estate in a crowded

residential area to house medical staff and quarantined members of the public, after roads were blocked by residents and the apartment buildings' lobbies were firebombed. The government has been urged instead to find other options in less densely populated areas, such as government run holiday camps, which were used for this purpose during the SARS outbreak in 2003.

- 1 Government of the Hong Kong SAR. HKSAR government announces enhanced measures for disease prevention and control. 29 Jan 2020. <https://www.info.gov.hk/gia/general/202001/29/P2020012900006.htm>.
- 2 CUHK Medicine. Facebook post. 27 Jan 2020. https://m.facebook.com/story.php?story_fbid=1782965278505931&id=489667057835766. (In Chinese; page translatable to English.)
- 3 Hotels reject hospital staff too scared to go home. *RTHK News* 2020 Jan 24. <https://news.rthk.hk/rthk/en/component/k2/1504619-20200124.htm>.

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