

本署檔號 Our Ref. : (95) in DH CDB/8/76/1  
來函檔號 Your Ref :  
電話 Tel. :  
傳真 Fax No. :

7 August 2025

Dear Principal/Persons-in-charge,

**Three imported Chikungunya Fever cases - Stay Vigilant**

We would like draw your attention to three imported cases of chikungunya fever (CF) recorded by the Centre for Health Protection (CHP) of the Department of Health on 6 August 2025. We urge you to remain vigilant against the disease, and it is important to remind the staff/students to take precautionary and personal protection measures against mosquitoes, both locally and when travelling outside Hong Kong, especially travelling to affected areas. Avoiding mosquito bites and eliminating mosquito breeding sites are effective ways to prevent CF.

The first case involves a 79-year-old female who travelled to Foshan (佛山) in Guangdong Province between July 1 and 31. She developed fever and joint pain since August 4. She attended the Accident and Emergency Department (AED) of Queen Mary Hospital on August 5 and was admitted for treatment in a mosquito-free environment on the same day. The patient is now in stable condition. She has no travel collateral nor household contact.

The second and third case involve a 55-year-old man and his 10-year-old son with good past health. They travelled to Bangladesh between July 12 and August 3, and returned to Hong Kong on August 3. The 55-year-old man developed fever and joint pain in Bangladesh since July 27. After returning to Hong Kong, he sought medical attention at Tsing Yi Cheung Hong General Out-patient Clinic on August 4 and was referred to Princess Margaret Hospital (PMH) for admission on the same day. The 10-year-old boy developed similar symptoms in Bangladesh since August 1. He sought medical attention at the Hong Kong Adventist Hospital - Tsuen Wan on the day returning to Hong Kong and was admitted. He was transferred to PMH on August 6 for treatment. Their household contacts (including two travel collaterals) are currently asymptomatic and under medical surveillance.



all of which were imported cases. The Food and Environmental Hygiene Department (FEHD) is conducting vector investigations and targeted mosquito control operations and will intensify mosquito prevention and control measures at the residence of the patients, as well as locations visited after the onset of symptoms.

As of August 5, Guangdong Province has recorded over 8,200 CF cases. The majority of cases (6,837 cases) were concentrated in Shunde (順德) District of Foshan. All cases were mild, with no severe or fatal cases. Regarding Macao SAR, six imported cases and two local cases of CF were recorded so far this year.

Please note the CF outbreaks are occurring in many parts of the world in 2025. According to the World Health Organization, CF cases have been recorded in more than 110 countries/regions (mainly in South America, Africa, Indian Ocean countries, and Southeast Asia). As of July, approximately 240,000 cases had been reported in 16 countries/regions worldwide in 2025. Of these cases, about 90 were fatal. Please refer to the following webpage for details on areas with current outbreak or endemic areas ([https://www.chp.gov.hk/files/pdf/cf\\_imported\\_cases\\_and\\_overseas\\_figures\\_eng.pdf](https://www.chp.gov.hk/files/pdf/cf_imported_cases_and_overseas_figures_eng.pdf)).

CF is transmitted to humans through the bites of infective female *Aedes* mosquitoes. Patients may experience fever and debilitating joint pain. Other common signs and symptoms include muscle pain, headache, nausea, fatigue and rash. Symptoms usually last for a few days, while in some cases joint pain may persist for several months, or even years. Severe symptoms and deaths from CF are rare and usually related to other coexisting health problems. Most patients recover fully. Occasionally, CF can result in severe complications of the eye, heart and nerves. Newborns, the elderly, and persons with underlying medical conditions are at higher risk for severe disease.

We would like to seek your help in the prevention of CF by taking part in mosquito control actions and adopting personal protective measures against mosquito bites. The following preventive measures should be taken to prevent accumulation of stagnant water and eliminate mosquito breeding sites:-

- Thoroughly check all gully traps, roof gutters, surface channels and drains to prevent blockage;
- Scrub and clean drains and surface channels with an alkaline detergent compound at least once a week to remove any deposited mosquito eggs;
- Properly dispose of refuse, such as soft drink cans, empty bottles and boxes, in covered litter containers;
- Completely change the water of flowers and plants at least once a week. The use of saucers should be avoided if possible;
- Level irregular ground surfaces before the rainy season; and

- Avoid staying in shrubby areas.

Members of the public are also advised to take personal protective measures such as wearing light-coloured long-sleeved clothes and trousers and apply insect repellent containing DEET to clothing or uncovered areas of the body when doing outdoor activities.

Staff/students who return from affected areas should apply insect repellent for at least 14 days after arrival to prevent mosquito bites. If feeling unwell e.g. having a fever, the person should seek medical advice promptly, and provide travel details to the doctor. Members of the public are urged not to self-medicate, particularly with aspirin or non-steroidal anti-inflammatory drugs (such as ibuprofen), as these drugs may cause serious side effects, for example increasing the risk of haemorrhage.

For more information on CF, please visit the CHP website at <https://www.chp.gov.hk/en/healthtopics/content/24/6122.html>.

Yours faithfully,



(Dr. Albert AU)  
for Controller, Centre for Health Protection  
Department of Health