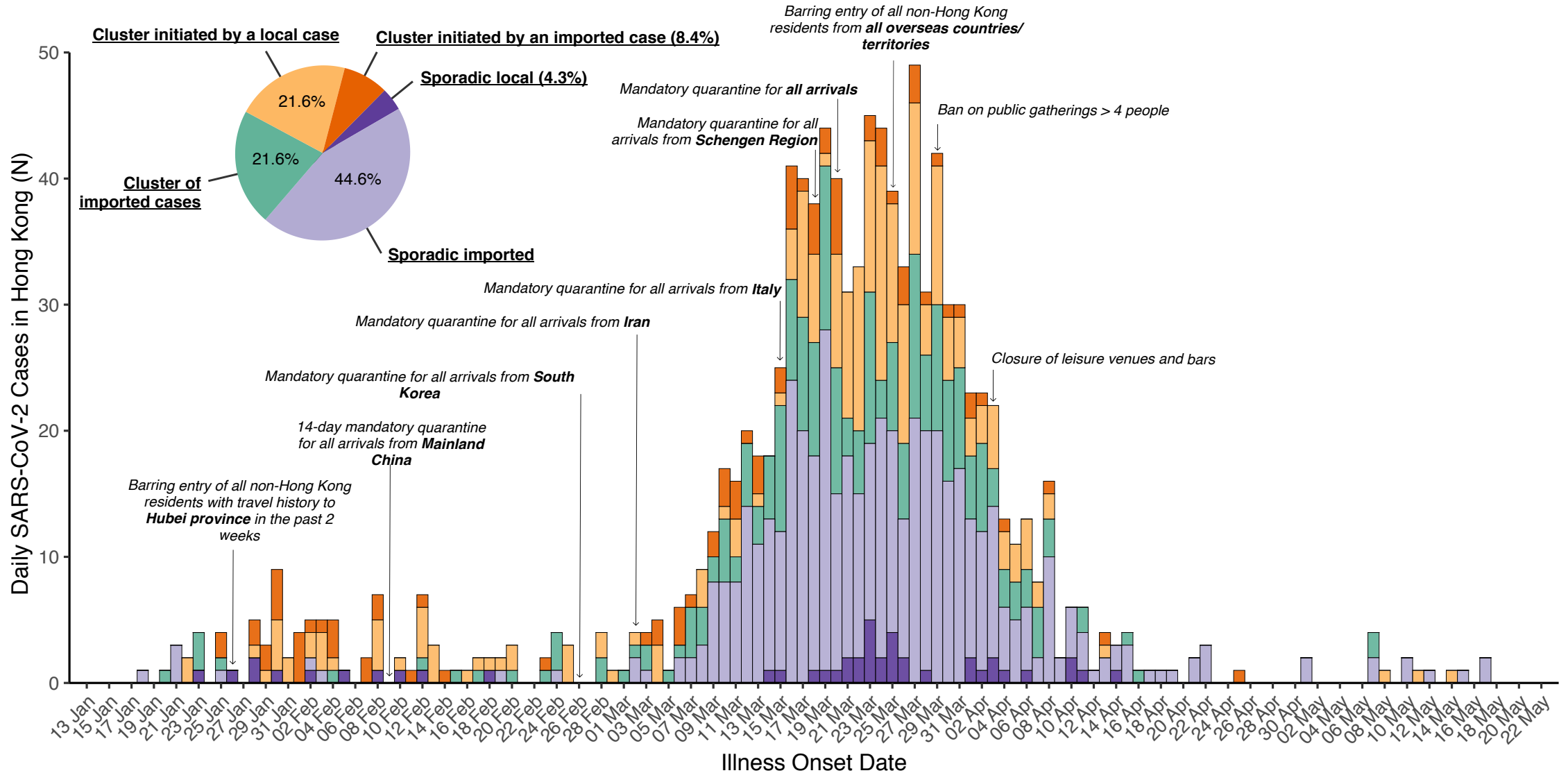




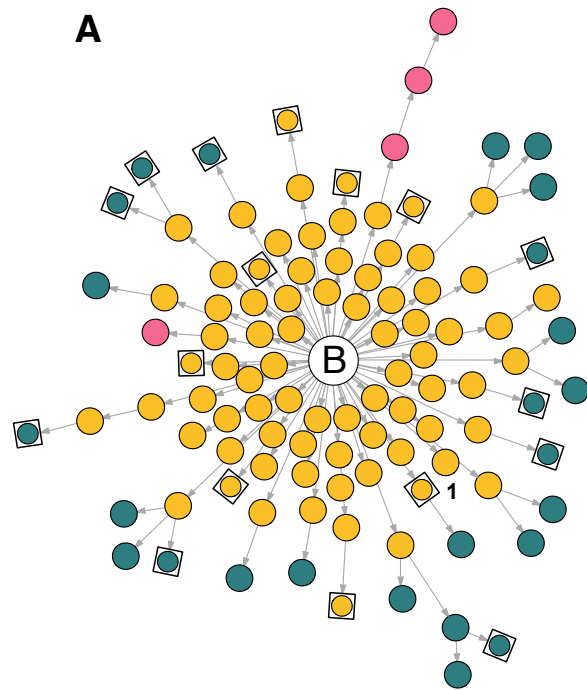
HKUMed WHO Collaborating Centre for Infectious Disease Epidemiology and Control releases Superspreading and Latest Epidemiologic Update of COVID-19

港大醫學院世衛傳染病流行病學及控制合作中心發表有關
新型冠狀病毒（COVID-19）超級傳播及流行病學最新概況

Clustering of local infections – but majority of infections imported

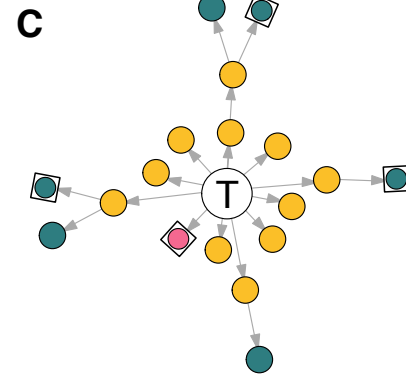
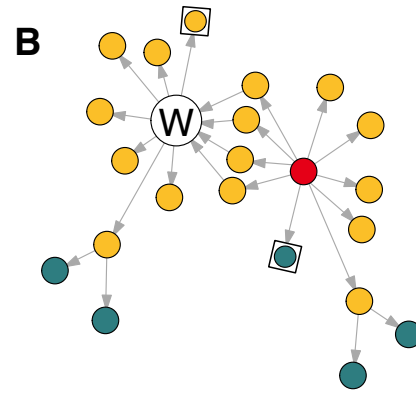


Clustering of COVID-19 infections



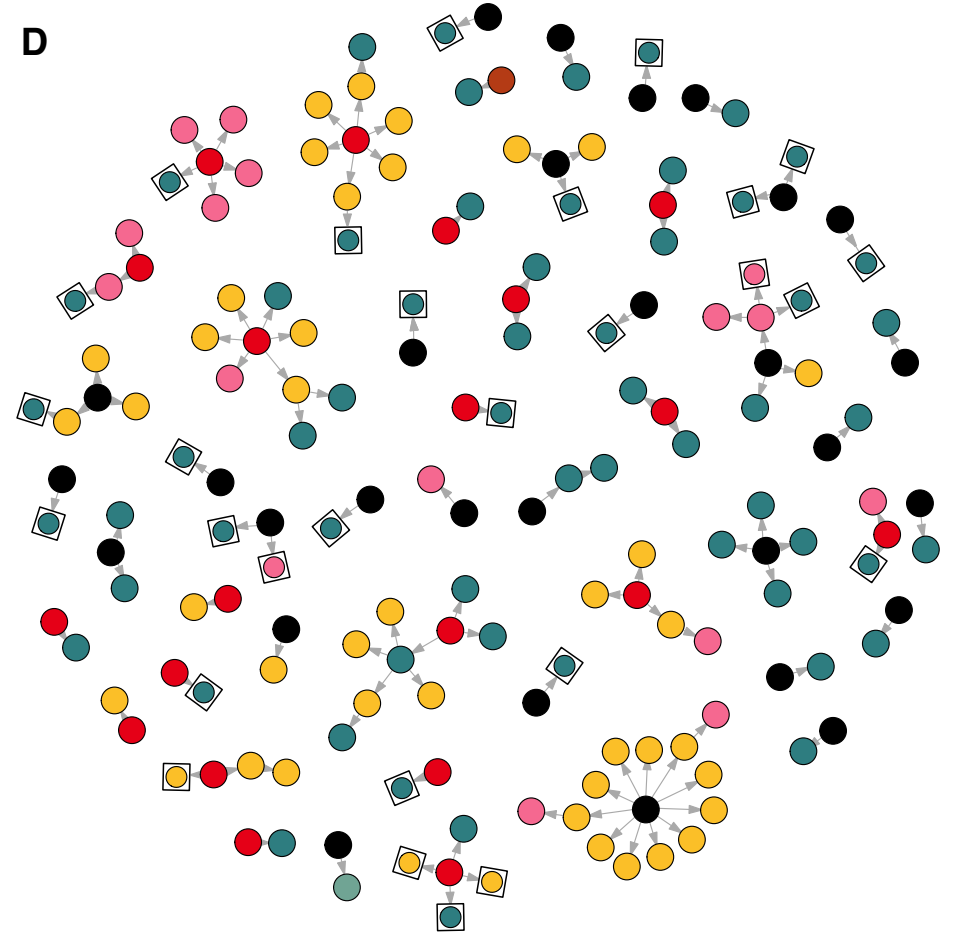
Bar and band cluster

Wedding cluster

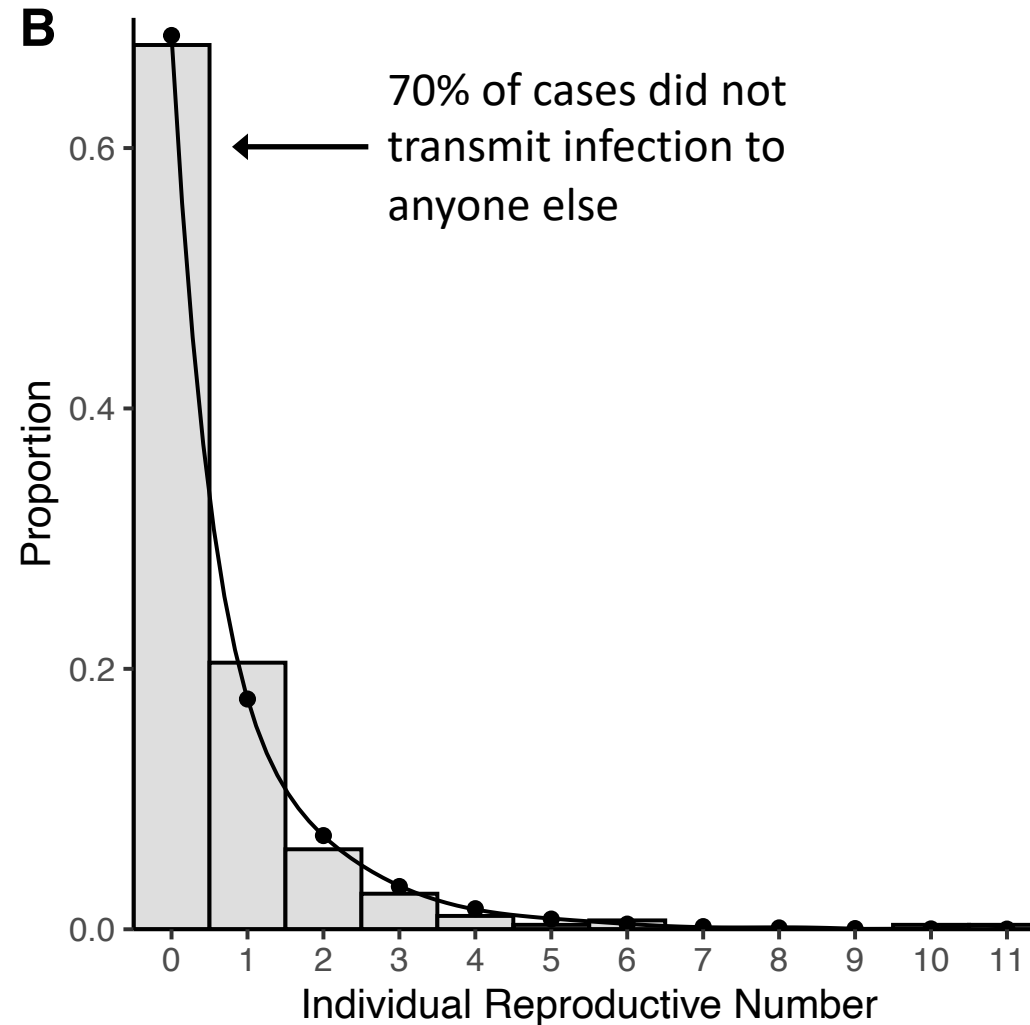


Temple cluster

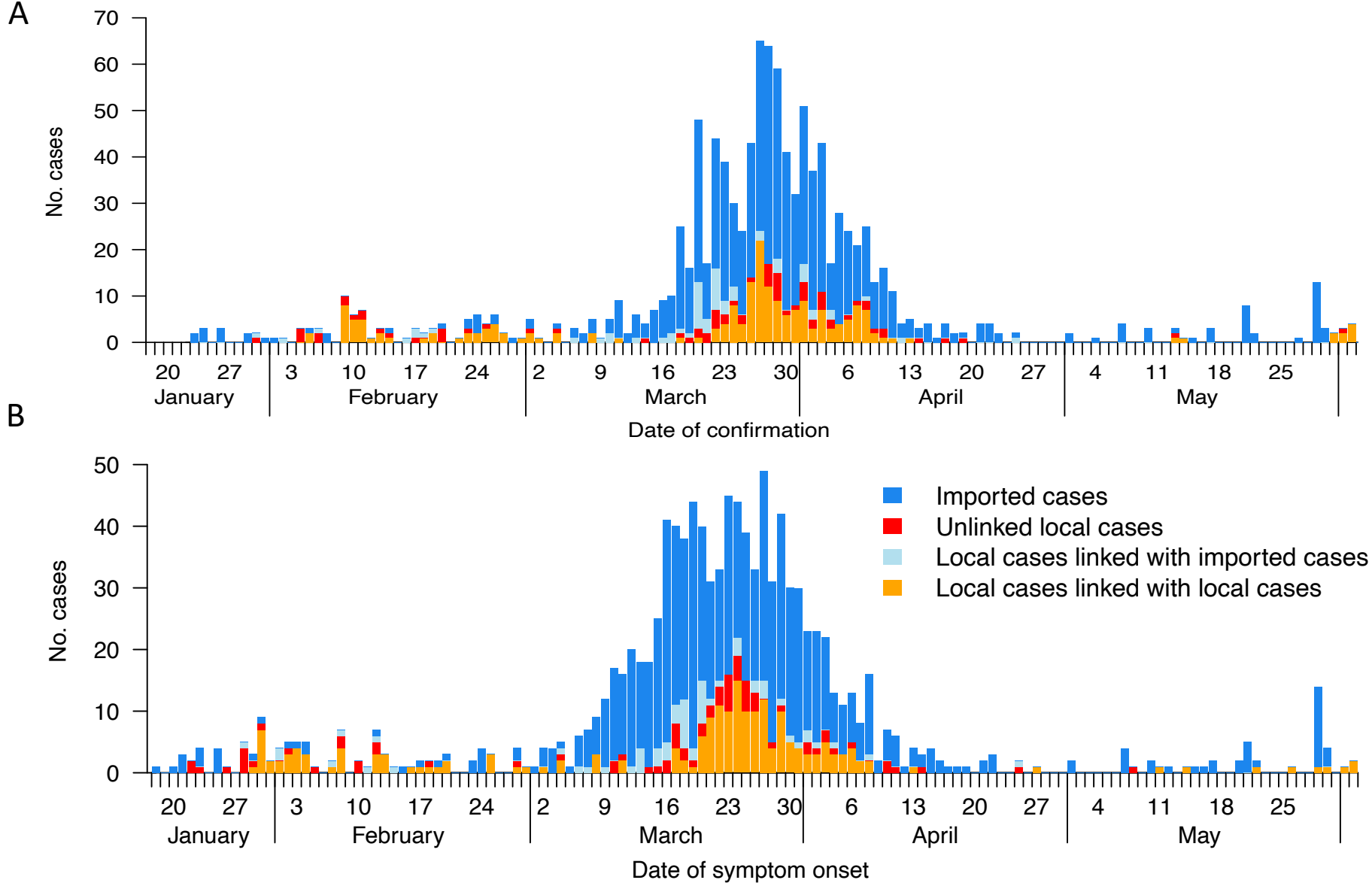
Other clusters



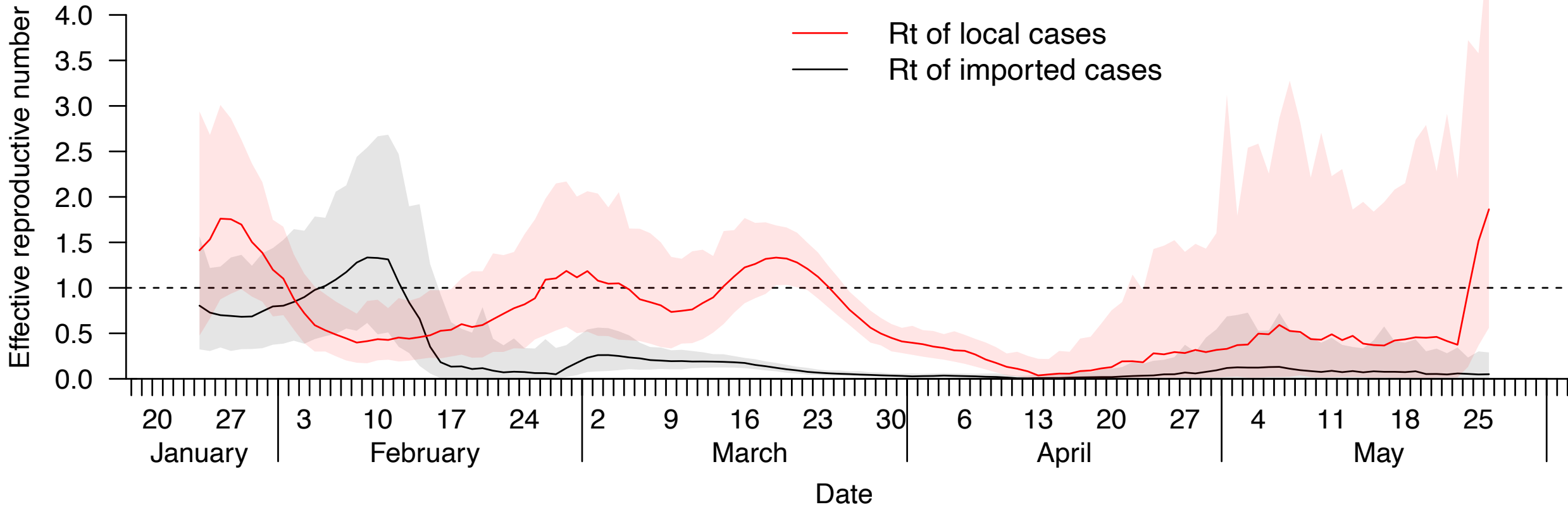
20% of cases responsible for 80% of transmission events



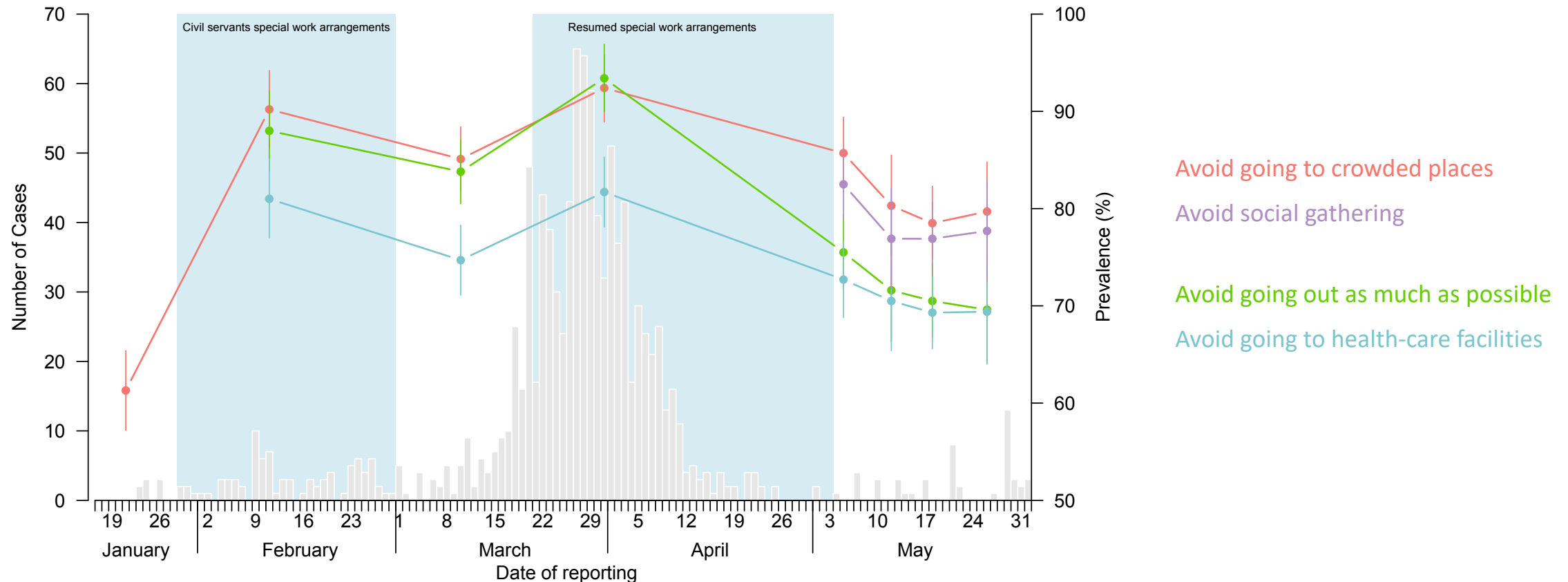
Current situation



Effective R_t in Hong Kong today



Findings from telephone surveys on preventive measures taken at individual level

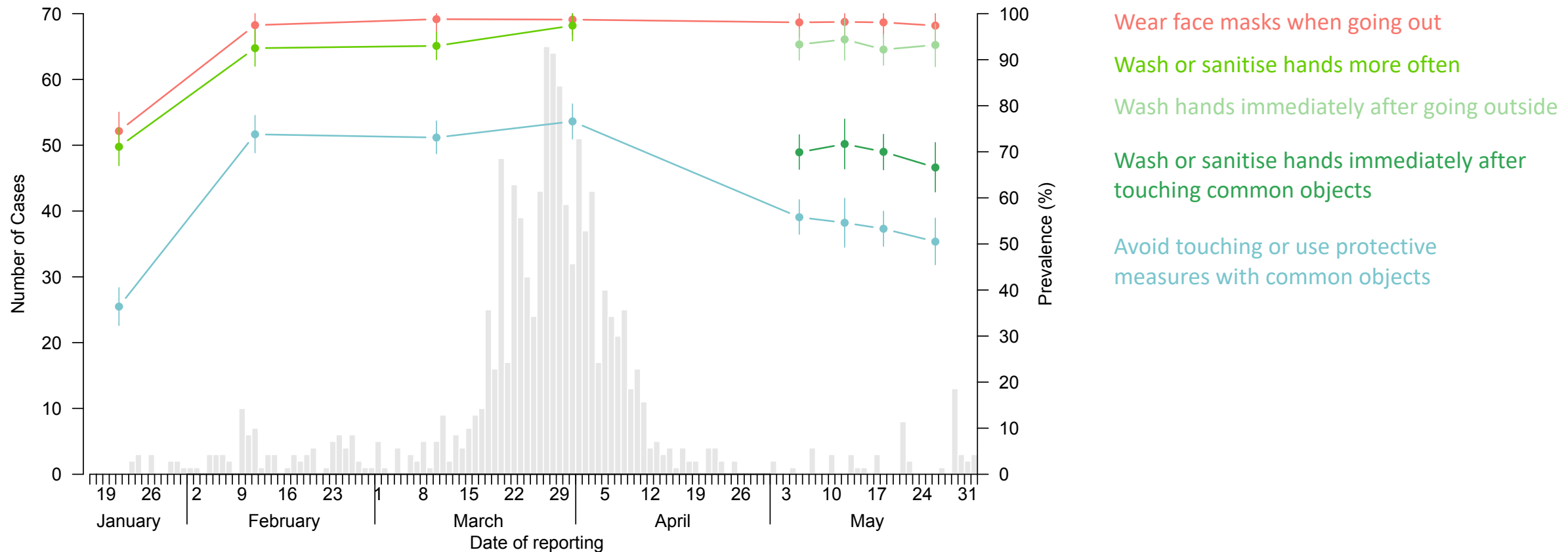


Physical distancing behaviours against COVID-19 overlaid on COVID-19 epidemic by date of reporting

Abbreviation: CI = confidence interval

Telephone surveys were conducted among Hong Kong adults aged 18 years or above. Participants were recruited using random-digit dialling of both landline and mobile telephone numbers. Proportions were weighted by age, sex and socioeconomic status distributions to the adult population in Hong Kong.

Findings from telephone surveys on preventive measures taken at individual level

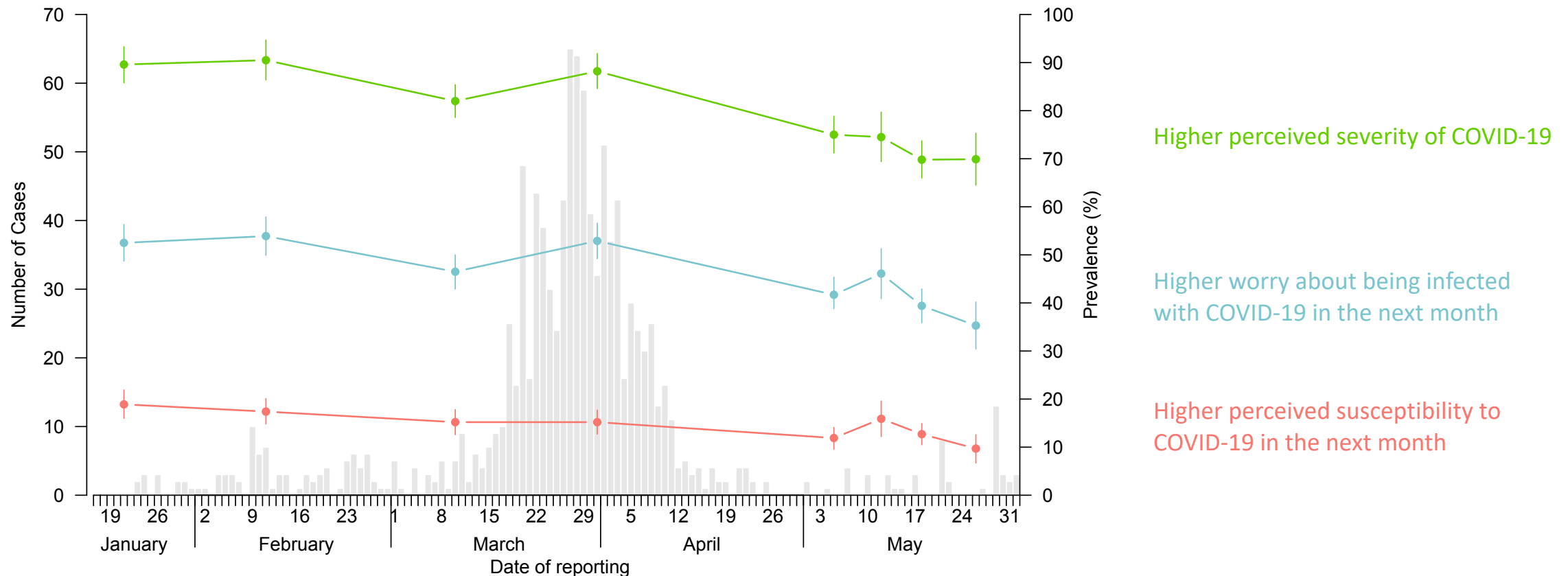


Personal hygiene practices against COVID-19 overlaid on COVID-19 epidemic curve by date of reporting

Abbreviation: CI = confidence interval

Telephone surveys were conducted among Hong Kong adults aged 18 years or above. Participants were recruited using random-digit dialling of both landline and mobile telephone numbers. Proportions were weighted by age, sex and socioeconomic status distributions to the adult population in Hong Kong.

Findings from telephone surveys on risk perception towards COVID-19

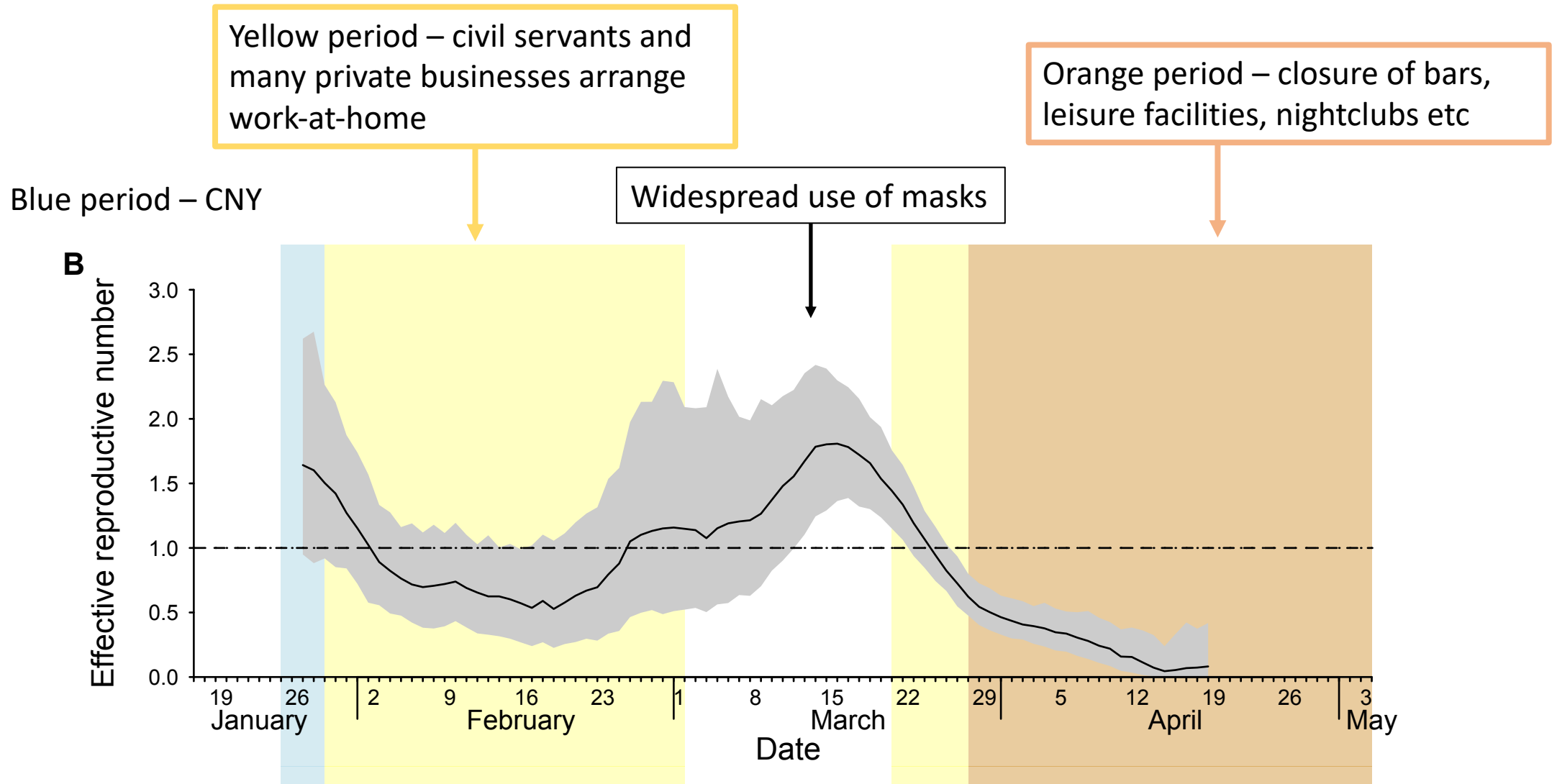


Risk perception towards COVID-19 overlaid on COVID-19 epidemic curve by date of reporting

Abbreviation: CI = confidence interval

Telephone surveys were conducted among Hong Kong adults aged 18 years or above. Participants were recruited using random-digit dialling of both landline and mobile telephone numbers. Proportions were weighted by age, sex and socioeconomic status distributions to the adult population in Hong Kong.

Masks are necessary but insufficient



Next steps

1. Risk that a second wave will develop
2. Masks help but are insufficient to stop transmission
3. Need to improve testing in primary care
4. Need to scale up contact tracing capacity
5. Need to co-ordinate of the 3 sets of outbreak control measures:
 - Travel/border measures
 - Test and isolate cases, trace and quarantine contacts
 - Physical distancing and general preventive measures in the community
6. Advance procurement of vaccines

Appendix

Reproductive number

- Basic reproduction number (R_0): The average number of secondary cases per one case in a population where all individuals are susceptible to infection
 - Inherent to pathogen but can vary by location because of population density and contact patterns
- Effective reproductive number at time t (R_t): The average number of secondary cases per one case in a population over time
 - Will vary over time and indicates real-time transmissibility
- Reasons for R_t to change – (1) immunity after infection; (2) reduction in transmission because of effective control measures and behavioral changes

HKU COVID-19 dashboard

- Our estimates of the effective reproductive number shown at <https://covid19.sph.hku.hk>
- We estimate R_t with a 7-day lag. We cannot estimate how much transmission is occurring today because we only have information on infections that occurred in the past.
- We pause R_t estimation when there were no local cases, resume when local cases occur

