

Various Work on Cancer Prevention and Control

Surveillance

- The Hong Kong Cancer Registry (Registry) is responsible for local cancer surveillance, dedicated to recording, integrating, and analysing various cancer data. In recent years, the Registry has not only supported evaluating the current cancer screening programmes in Hong Kong (such as the Colorectal Cancer Screening Programme and the Breast Cancer Screening Pilot Programme), but has also strengthened the collection and compilation of more comprehensive cancer surveillance data. This includes providing complete and accurate staging data and survival analyses for ten common cancers in Hong Kong, as well as integrating and disseminating the most common biomarkers or prognostic indicators of various cancers to enable stakeholders to make accurate judgements, further enhancing cancer prevention and control efforts.
- Cancer has been defined as a chronic disease by the World Health Organization (WHO) in 2006. The Cancer Coordinating Committee (CCC) is concerned about the prevalence of cancer in Hong Kong and the long-term burden it places on public resources, and also recognised the importance of existing data. A comprehensive cancer database in Hong Kong not only provides reliable data as a key reference for cancer surveillance, but also serves as a crucial resource for the Government and stakeholders in formulating cancer prevention and control strategies and advancing healthcare development. The latest cancer data is available on the Registry's website for reference.

Prevention and Screening

- The Department of Health (DH) has been promoting a healthy lifestyle as the primary strategy for cancer prevention to enhance public understanding of cancer prevention and screening, especially among the ethnic minorities. Initiatives related to individual cancers are as

follow:

- (1) Cervical Cancer: The Government implemented the Cervical Screening Programme in 2004. The Maternal and Child Health Centres (MCHCs) under the DH offer subsidised cervical screening to eligible women aged 25 to 64. In the past three years, (from 2022 to 2024), the number of attendance for cervical screening service at MCHCs was over 180 000 and 4 248 individuals were referred to relevant specialists for further follow-up due to abnormal screening results (suspected precancerous lesions or cervical cancer).

In addition, Human Papillomavirus (HPV) vaccination is one of the most effective measures to prevent cervical cancer. In response to the WHO's recommendation, the DH provided free HPV vaccination to Primary Five and Primary Six school girls under the Hong Kong Childhood Immunisation Programme. In the school year 2023/24, the two-dose coverage rates of HPV vaccination for Primary Six school girls reached 92 per cent, which is much higher than the interim target (70 per cent) as stated in the Hong Kong Cancer Strategy. The DH further launched a one-off catch-up programme for HPV vaccination starting from December 2024, for girls aged 18 or below and not being covered by existing programme to receive vaccination.

- (2) Colorectal Cancer: The Colorectal Cancer Screening Programme (CRCSP) has been implemented since 2016. At present, the CRCSP subsidises asymptomatic Hong Kong residents aged 50 to 75 to undergo screening. As of December 2024, more than 510 000 eligible individuals joined the CRCSP. About 40 000 and 3 400 of these participants were diagnosed with colorectal adenoma and colorectal cancer respectively. Preliminary analysis showed that among the colorectal cancer cases detected under the CRCSP, more than 50 per cent were of an early stage, thereby leading to a more favourable prognosis.
- (3) Breast Cancer: Under the Phase I of the Breast Cancer Screening Pilot Programme (BCSPP) launched in 2021, three Woman Health

Centres (WHCs), four MCHCs and 18 Elderly Health Centres (EHCs) of the DH provided biennial mammogram (MMG) screening for women aged 44 to 69 with certain risk factors. In the two-year Phase I of the BCSPP, a total of 27 807 women have received breast cancer risk assessment. Among them, 7 785 (about 28 per cent) underwent the MMG screening on referral based on the risk assessment. Among the women with abnormal MMG results who had been referred to specialists for treatment, 409 cases were followed up in public hospitals, among which 68 (about 16.6 per cent) were confirmed to have breast cancer. The breast cancer detection rate per 1 000 MMG screenings was 8.7, which was comparable to the international standard of about 5 cases per 1 000 MMG screenings. Of the 68 breast cancer cases identified through the MMG screening, 97 per cent were at stage II or below.

Phase II of the BCSPP will provide subsidised screening services through public-private partnership programmes in collaboration with non-governmental organisations to female Hong Kong residents aged 35 to 74 who are at high risk of developing breast cancer starting from June 10 this year, with a view to enhancing the recovery rate of breast cancer patients through early detection and treatment.

To utilise resources more effectively and expand the multidisciplinary primary healthcare service network, the Primary Healthcare Commission will commence the integration of women's health services under the DH within this year in an orderly manner by offering women's primary healthcare services through three service points named Women Wellness Satellites (WWS). Among them, the WWS (Hong Kong) located in Chai Wan will commence operation in June this year.

Diagnosis, Treatment and Survivorship Care

- The Hospital Authority (HA) is committed to enhancing cancer diagnostic services to provide timely investigations and facilitate early diagnoses for suspected cancer patients. Following the pilot multidisciplinary diagnostic services for suspected lung cancer patients

in the Kowloon West Cluster, the service will be further extended to Hong Kong West Cluster and the New Territories East Clusters in 2025/26. The HA is also enhancing BRCA1/2 germline mutation testing and genetic counselling services for its breast cancer patients with a view to providing appropriate support to women in high risk of developing breast cancer.

- In terms of treatment, the HA has augmented the number of day beds and manpower in different clusters to enhance the capacity of chemotherapy services. The HA has also increased the number of attendances for radiotherapy services and specialist outpatient consultations in Oncology, as well as the number of sessions for breast surgeries. The HA will continue to provide personalised and multidisciplinary cancer care services, including the introduction of systemic anti-cancer therapy nurse clinics. The Cancer Case Manager Programme will also be expanded to cover lung cancer patients starting from 2025/26. Additionally, the HA has also regularly reviewed and enhanced the subsidised area of the Drug Formulary and the safety net through the prevailing mechanism, with a view to enhancing cancer treatment services. As for the support to cancer survivors, the HA will continue to address their multiple needs based on established service framework and implement personalised care programmes for specific groups of cancer survivors accordingly.

Research

- The Health Bureau has long been supporting researches related to cancer prevention, diagnosis, treatment and survivorship through the Health and Medical Research Fund (HMRF), so as to formulate evidence-based health policies in a bid to reduce morbidity and mortality of cancer as well as improve patients' conditions and their quality of life. Since the Government's promulgation of the Hong Kong Cancer Strategy, the HMRF has supported 269 investigator-initiated research projects, 14 health promotion projects and 34 Research Fellowship Scheme projects, as well as multiple commissioned researches related to cancer and its risk factors, such as those evaluating the effectiveness of the CRCSP and the BCSP.