

Source: South China Morning Post



Coronavirus: Hong Kong reliving Sars nightmare as outbreak spreads

<https://www.scmp.com/news/hong-kong/health-environment/article/3050029/coronavirus-hong-kong-sars-victims-and-frontline>

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Published: 9:00am, 12 Feb, 2020; updated: 11:23am, 12 Feb, 2020

Learning Steps:

- 1. Read the article and answer the questions.**
- 2. Highlight the important phrases.**

Questions to ponder before the video lesson:

- 1. What kind of negative effects have been brought by SARS?**
- 2. What kind of method has been used for choosing medical staff to take care of the patients who have caught coronavirus?**
- 3. Survivors from SARS have given advice to Hongkongers. What is it about and what does it mean?**

Tuesday's evacuation of residents from a Tsing Yi housing estate, after two of them contracted the deadly coronavirus, has awakened memories of one of Hong Kong's darkest chapters.

Health officials cautioned against comparisons between the case at Cheung Hong Estate and 2003's Sars outbreak at Amoy Gardens in Kowloon Bay, but the overnight evacuation brought a sense of déjà vu, and a reminder of residents being moved to quarantine camps 17 years earlier.

Back then, the 19-block estate became ground zero for the deadly disease when a sick Shenzhen man visited his brother at block E. The entire block was later sealed off.

Sars – severe acute respiratory syndrome – ripped through the city, killing 299 of the 1,755 people it infected. Among the fatalities were eight medical staff.

Surgical masks served as the first line of defence against virus-carrying coughs and sneezes, and for months were considered essential daily attire.

Recently they have become sought-after once again, as desperate parents, housewives and elderly people queue for hours trying to get hold of some overpriced masks, in the hope of fending off the coronavirus, believed to have originated in Wuhan, Hubei province.

Sars, a close relative of the new coronavirus, rocked Hong Kong almost two decades ago after a 64-year-old mainland medical professor, Liu Jianlun, introduced the pathogen to the city.

Later dubbed “patient zero”, Liu, a doctor from the nearby Chinese city of Guangzhou, had treated Sars patients north of the border before he checked into the Metropole Hotel in Mong Kok on February 21, 2003, on a trip to visit family friends. He soon fell ill and subsequently died.

In no time, the contagious virus had spread like wildfire, infecting medical officers and hotel guests, who also took it to other countries such as Vietnam and Canada.

Another Sars epicentre in Hong Kong was ward 8A of Prince of Wales Hospital in Sha Tin, whose accident and emergency department was at one point closed, after dozens of staff fell ill.

Some of those who survived have suffered lingering effects of all sorts, from psychological trauma to bone pain. The ominously familiar signs have in recent weeks brought back nightmares some of them have been fighting to bury for years.

A few survivors feel the urge to share their experiences again, reminding Hong Kong why it is better to be safe than sorry.

Nearly two decades on, memories of colleagues infected, one by one, by the unknown virus were still vivid for Professor David Hui Shu-cheong, an expert in respiratory medicine who was an associate professor in 2003 and cared for patients on ward 8A of Prince of Wales Hospital, a teaching hospital of the university.

“Many of my patients were actually my colleagues,” Hui said. “There was a little bit of pressure to find out what was going on.”

He recalled how health care staff at wards 8A and 8B started to develop fever and respiratory illness after someone infected by “patient zero” Liu was admitted on March 4, 2003.

About a week later, around 50 members of hospital staff were on sick leave.

“We realised that there might be something wrong around the ward, because all these workers, they were like cardiologists, hepatologists and haematologists, and also some general physicians ... also 16 medical students,” he said.

Eventually, 20 doctors, or 40 per cent of health care staff in Hui’s department, were infected.

Those who remained healthy were divided into the “dirty team”, who took care of Sars patients, and the “clean team”, who looked after patients with other illnesses.

He said many workers were keen to take on the riskier jobs.

“People from other departments – like surgery, ophthalmology and orthopaedics – they actually volunteered to join the ‘dirty team’,” he said.

During the current outbreak, some hospital staff have reportedly drawn lots to decide who takes care of the suspected or confirmed patients, something Hui said did not happen in 2003.

But he agreed that the overall situation was “more complicated” in the recent case.

“Before the outbreak ... Hong Kong went through a lot of political turmoil,” he said, noting the social unrest sparked in 2019 by the government’s since-withdrawn extradition bill.