Hong Kong Institute of Allergy Executive Summary

The unmet provision of allergy services in Hong Kong impairs capability for allergy prevention – implications for the Asia Pacific region.

Dr Tak Hong Lee and Dr Marco Ho

- There is a high and rising prevalence of allergic diseases in Hong Kong and the rest of Asia Pacific. The increasing clinical burden is unmatched by an adequate provision of allergy services.
- In the last 3 years the profile of allergy in Hong Kong has increased with more public engagement, frequent educational activities, significant scientific outputs and publication of management guidelines for allergy management. Two new drug allergy clinics have been created in public hospitals.
- Hong Kong has 1 Allergy specialist serving 1.17 million head of population as compared to 1: 1.46 million population 3 years ago. This is comprised of 1 specialist: 2.8 million adult population and 1: 540,000 paediatric population. Unless the difference between adult and paediatric care is re-balanced, future transitional care as allergic children grow into adults will be an increasing problem. This is far short of the numbers of specialists in other main medical disciplines in Hong Kong which is one specialist:<100,000 heads of population.</p>
- Hong Kong ranks 6th out of 7 countries in the Asia Pacific and Australia and 30th out of 36 countries in the rest of the world in allergists per head of population.
- Hong Kong does not have the necessary network of allergy expertise to test comprehensively,
 or to take advantage of, the new discoveries to prevent allergies and improve public health.
- One way to grow the specialty is to recruit specialists from overseas but the long delay in assimilating foreign doctors into Hong Kong's health service presents an obstacle for recruitment.
- Another way to create new allergy services is to realign resources. This can be difficult
 because of competing priorities. However it is notable that some allergy treatments, e.g.
 allergen-specific immunotherapy, actually save money for the health service.
- It is encouraging that two public hospitals have established new drug allergy services in 2017.
- In a long overdue development Hong Kong has its first trainee in adult allergy in 20 years. However he has to train for a period overseas because there are no registered trainers locally. More consideration should be given to how to maximise training opportunities in Hong Kong.
- Hong Kong is well supported by allergy related professional societies and patient organisations.
- It is recommended that Hong Kong creates at least two multi-disciplinary Allergy Centres of Excellence to provide the leadership to drive towards a goal of having about 1 allergy

- specialist: 100,000 head of population. This requires a minimum target of 16 paediatric allergists and 54 adult allergists in Hong Kong.
- Centres of Excellence in allergy are not intended to compete with specialists in other
 disciplines who also look after patients with allergic diseases. To the contrary, successful
 Centres are trans-disciplinary and should be collaborating with colleagues to provide
 integrated and holistic care for complex patients who are often characterised by multisystem
 involvement.
- Future interactions between Allergy Centres with other disciplines could be facilitated
 by defining the types of patients that would require specialised intervention and
 management by a Centre of Excellence in allergy.
- Finally educating the profession and engaging the public about allergy and its prevention is fundamental to improving allergy service provision and training in Hong Kong.