

2010

Injury Surveillance Report 傷害事故專題報告書



Kwai Tsing Safe Community and Healthy City Association
葵青安全社區及健康城市協會

Kwai Tsing Safety Promotion and Injury Prevention Centre
葵青安全促進及傷害預防中心



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Kwai Tsing District Council Sponsors
葵青區議會 贊助

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Injury surveillance report

Foreword

Kwai Tsing Safe Community and Healthy City project launched in 2000 aims at creating a platform to build a safe and healthy living environment by involving community stakeholders in the process. Through the settings approach, numerous safety and health projects have been successfully completed with high regards from many local and overseas organizations.

In order to monitor the injurious status in the community, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) joint hands with Princess Margaret Hospital (PMH) to pilot an injury surveillance system (ISS) in September 2003. Through collaborative efforts among the OSH Council, PMH and PolyU in 2005, a web system was designed to support electronic input at the triage station of the A&E of PMH. In 2007, with the support from the Kwai Tsing District Council and District Office, the system was further enhanced with Geographic Information System (GIS) and e-map of Hong Kong. With the new technology, more accurate record of the place, time, cause and context of the injuries was captured to form an injury database for the district. Furthermore, the GIS application is capable for better analysis and evaluation of injury prevention programs.

In 2007, the Kwai Tsing Safety Promotion and Injury Prevention Centre was set up in the Community Health Resource Centre of PMH. It is responsible to maintain the operations of the ISS; coordinate and manage various prevention programs: including research studies, statistical reports and liaison with government agencies in the areas of injury prevention and safety promotion.

Last year, the Kwai Tsing Injury Report 2009 was published to report the statistics of the injured cases attended the A&E of PMH in the year. This is the 2nd report for 2010 with detailed analysis of the common types of injuries and their comparison with the 2009 statistics. This could be the first of its type being published in Hong Kong and we hope that the report could be used as reference for setting safety policies by government departments, organizations and individuals in the community.

Our deepest gratitude is to Kwai Tsing District Council and Princess Margaret Hospital. Without their dedication and support, this report could not be completed and be useful in building up a safe and healthy community in Kwai Tsing.

Kwai Tsing Safety Promotion and Injury Prevention Centre Steering Committee
Co-chairmen, Dr. Nancy Tung and Mr. Chow Yick Hay
BBS JP

傷害監察系統報告

前言

葵青安全社區成立的目的是建立一個平台，讓社區機構可以參與，為社區共同建設一個安全健康的生活及工作環境。由 2000 年開始，很多安健計劃已成功地落實於社區人口聚集的地方；得到各方面的讚賞。

為了更有效地掌握地區意外受傷的情況，葵青安全社區及健康城市協會與瑪嘉烈醫院在 2003 年 9 月共同開展一個傷害監察系統的先導計劃。2005 年，在職安局的資助下，協會聯同香港理工大學及瑪嘉烈醫院進行研究，成功設計了一套意外傷害監測系統。其後在 2007 年得到葵青區議會的贊助，葵青民政事務處的協助採用地理電子系統，將受傷個案的原因、過程、地點等匯集成資料庫，透過電子地圖，將傷害數據進行分析及評估。

葵青區安全促進及預防傷害中心在 2007 年 12 月成立，設置於瑪嘉烈醫院社區健康資源中心。中心負責管理傷害監察系統的日常運作，統籌和推行各項預防傷害計劃及進行科研、分析、提交報告，並聯繫各政府機構以推動安全促進的工作。

繼「2009 年葵青區傷害報告書」出版後，本會特意再出版「2010 年葵青區傷害報告書」，除了繼續就葵青區發生在瑪嘉烈醫院急症室求診的受傷個案，針對受傷原因進行詳細分析，更將 2009 及 2010 的數據作出對比分析。相信這是香港首份有關的報告，希望這份報告可以提供有用的數據予有關的政府部門、機構及人士，作為制定改善社區安全政策的參考資料。

本會十分感謝葵青區議會的贊助，瑪嘉烈醫院的協助進行分析及編寫，使本報告書得以順利出版；為葵青構建一個安全和健康的社區。

葵青安全促進及傷害預防中心督導委員會聯席主席
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Kwai Tsing Safe Community and Healthy City Association

Safe Community

Safety is a fundamental human right as one of the guiding principles developed by the WHO, 1989) that deserves universal concern and concerted effort to promote globally. To be a safe community is not what has been achieved or the current status in safety issue, but a commitment to safety and a process and structure to achieve it continuously. Safe community is a long term development initiative that aims to promote and sustain safety for the population.

Kwai Tsing Safe Community

Starting from the inauguration of the Kwai Tsing Safe Community, a wide range of safety promotional programs had been implemented: including projects for occupational safety and health, for home safety, for road safety and 6 for crime prevention. Several surveys had also been conducted to assess and raise the community's perception on safety issues. As reflected in the injury data collected from A&E of PMH during 2001 to 2003, a nearly 50% reduction in injuries were achieved. After the site visit by WHO Official in November 2002, Kwai Tsing was designated as the 73rd Safe Community on 18 March 2003 and re-designated again on 26 November 2007.

Kwai Tsing Safe Community and Healthy City Association

In August 2002, the Kwai Tsing Safe Community and Healthy City Association was established as a charitable organization. It seeks to provide a sustainable structure to continue the work towards a Safe Community. The Association works alongside with the Kwai Tsing District Council to coordinate community development projects through partnership and amalgamation of resources from the government, local organizations, health services, educational institutions, enterprises and voluntary agencies. Through the collaboration of the community partners, many local projects can be implemented to achieve a safe and healthy living environment for the local residents.

Objectives of the Association:

1. To promote public health and public safety by establishing safe environments and healthy habits in daily living;
2. To recognize major public health and public safety issues and for such purposes to make innovative changes by the pooling of community resources and concerted efforts;
3. To create supportive environment that develop and sustain the public health and public safety of Kwai Tsing citizens through intersectoral participation and community partnership.
4. For the purpose of the Association, to promote equal right to access to health care regardless of one's race, religion, political belief, economic or social status;
5. To work in cooperation with World Health Organization and other international bodies to advance the objects of the Association.

葵青安全社區及健康城市協會

安全社區

根據世界衛生組織(世衛)於 1989 年訂定的原則，安全是人類基本人權並值得全球關注及推廣的議題。要被世衛確認為安全社區，不單是要達至安全的指標，更要有承擔及持續地建構社區成為一個長遠發展的項目，令居民有共同的理念與安全社區一起成長。

葵青安全社區

隨著葵青安全社區成立開始，安全促進的工作計劃亦陸續實行。其中包括針對不同年齡人士而設的安全促進活動；有關職業安全、預防家居意外、道路安全和防止罪案的活動亦成為安全社區的常設工作。與此同時，葵青區亦進行了多項調查，以剖析及提升居民對安全的意識和警覺性。在 2001 至 2003 年期間，在葵青區急症求診的意外傷亡數字大大減少近五成。於 2003 年 3 月 18 日及 2007 年 11 月 26 日經世界衛生組織正式獲確認及再確認為全球第七十三個「安全社區」。

葵青安全社區及健康城市協會

為持續發展安全社區，「葵青安全社區及健康城市協會」於 2002 年 8 月成立，並註冊成為非牟利團體。協會致力與葵青區內不同政府部門、地區組織、非政府機構、醫療服務、教育機構及工商企業，透過合辦不同的健康推廣計劃服務，持續為葵青區建立一個安全健康的生活及工作環境。

協會目標

1. 建立安全環境和文化以推廣公共健康及社區安全。
2. 匯集地區資源和力量，對公共健康及社區安全的議題作出改善。
3. 結合社區夥伴作為平台，以發展和維持葵青區居民大眾健康及安全。
4. 作為社區平台，讓不同種族、宗教、政治理念、經濟環境等各階層人士可獲得有關健康及安全訊息。
5. 與世衛及其他國際機構緊密合作推動安全社區。

1. Executive Summary

★ 1.1 Injuries, unintentional or intentional, constitute a major public health problem.¹ Nowadays, injuries are known to be preventable. Safe Community and Healthy City Project in Kwai Tsing has been a long-term development since Year 2000. To further plan and monitor the Safe Community movement, pioneering efforts were made to design and develop an injury surveillance system. The system was to capture data on injuries presented at the Accident and Emergency Department (AED) of Princess Margaret Hospital (PMH). Geographical analysis was produced to identify the prevalence of different types of injuries at different locations in the district. This report is the second attempt of the analyses by making use of the data from the injury surveillance system.

★ 1.2 A total of 22,339 cases were captured in 2010. Male contributed to over 57% (n=12,774) while female represented 43% (n=9,527) of the injury attendance. About 12.5% (n=2,749) were aged 14 or below, 66.8% (n=14,755) were aged 15-64, and 20.7% (n=4,569) were elderly aged 65 and above. The great majority of the injury cases were unintentional 85.4% (n=19,070). Nearly one-third of injury events occurred at home (n=6,772) (30.3%). 18.1% (n=4,045) happened on highway/street and 6.0% (n=1,337) in factory/workshop. 43.0% (n=9,607) of injury cases were caused by fall, 23.4% (n=5,222) by other blunt force, and 7.0% (n=1,561) by stab/cut.

★ 1.3 Further analyses on fall injuries, traffic injuries, work injuries, domestic violence and self-harm were explored. Over half (51.6%) of the fall injuries were happened to females while 48.4% to their male counterparts, representing a male:female ratio of 0.94:1. The percentages of fall injuries for infants aged 4 or below (578, 6.1%) and the elderly aged 75 and above (2,490, 26.4%) were higher. About 38.6% of injury events (3,711 fall) occurred at home. For traffic injuries, the majority of the traffic injuries were happened to males (69.1%, n=930). The percentages of traffic injuries for adults aged between 25 and 54 were higher. For work injuries, the percentage was large for males (74.4%, n=4,007). The percentages of work injuries for adults aged 20 to 59 were higher. 24.2% (n=1,305) of work injury occurred at factory/workshop. About 10% of work injuries occurred in highway/street (10.6%, n=572), airport (10.2%, n=551) and office/company (9.4%, n=505). Furthermore, 7.2% (n=390) of work injuries occurred in container port/wharf.

1. 行政概述

★ 1.1 故意或非故意的受傷是主要的公眾健康問題¹。現今所知，受傷是可以避免的。早於 2000 年，葵青安全社區及健康城市協會計劃已開始建立長期的市區健康發展，並為延續計劃和監察安全社區運動而開創設計和建立傷害監察系統。系統用作收集瑪嘉烈醫院急症室所公佈的受傷數據，並製作受傷地圖來顯示區內不同位置、不同類型的受傷事故率。這份報告是第二次嘗試利用傷害監察系統的數據分析。

★ 1.2 在 2010 年，共錄得 22,339 宗受傷個案，受傷者中男性佔 57% (n=12,774) 而女性則佔 43% (n=9,527)。大約 12.5% (n=2,749) 的傷者年齡為 14 歲或以下，66.8% (n=14,755) 受傷者年齡介乎 15-64 歲，而年齡在 65 歲或以上的長者佔 20.7% (n=4,569)。絕大部分的受傷個案都是非故意的 (85.4%) (n=19,070)。接近三分之一的受傷事故在家中發生 (n=6,772) (30.3%)，18.1% (n=4,045) 在公路或街道發生，及 6.0% (n=1,337) 在工廠 / 工場發生。因跌倒受傷的個案佔 43.0% (n=9,607)，撞傷的佔 23.4% (n=5,222) 及割傷佔 7.0% (n=1,561)。

★ 1.3 經進一步對跌倒受傷，交通意外受傷，工作受傷，家庭暴力及自我傷害作分析和探討，跌倒受傷的傷者女性佔大多數 (51.6%)，男性佔 48.4%，顯示男女比例為 0.94 : 1。四歲以下的嬰兒 (578, 6.1%) 及 75 歲或以上的長者 (2,490, 26.4%) 跌倒受傷的百分率較高。大約 38.6% 的受傷個案在家中發生 (3,711)。至於交通意外受傷的，傷者以男性居多 (69.1%, n=930)，而年齡介乎 25 至 54 歲的成年人的比率較大。此外，工作時受傷亦以男性居多 (74.4%, n=4,007)，年齡介乎 20-59 歲所佔的百分比比較高。工作時受傷的個案中，約 24.2% (n=1,305) 在工廠或工場發生，大約 10% 個案發生在公路或街道 (10.6%, n=572)、機場 (10.2%, n=551) 及辦公室或公司 (9.4%, n=505)，此外，7.2% (n=390) 發生在貨櫃港口或碼頭。

★ 1.4 42.3%, (n=2,249) of work injuries were happened to services workers, machine operators (6.5%, n=344) and elementary occupation (6.4%, n=340).

★ 1.5 Further research is suggested for conducting in-depth studies of different types of injuries as the analyses of injury surveillance system provide an overall picture instead of detail reference for policy making and solutions.

★ 1.4 約有 42.3% (n=2,249) 因工作受傷的傷者是服務人員、機械操作員 (6.5%, n=344) 及技工 (6.4%, n=340)。

★ 1.5 建議為不同種類的受傷進行更深入調查，因為傷害監察系統提供整體的情況，而不是供決策和解決方案的詳細資料。

¹ WHO, Injuries and Violence Prevention Department

¹ 世界衛生組織預防傷患及暴力處

2. Introduction

Background Information

★ 2.1 Kwai Tsing (KT) is one of the 18 Administrative Districts in Hong Kong, comprising of Kwai Chung District and Tsing Yi Island with a population of around 510,000. It is famous for its comprehensive transport network including the Tsing Ma Bridge, Route 3, Tsing Yi North Coastal Road, the MTR and Airport Railway, and a large container terminal in the district. It therefore attracted a large number of employed persons from within and outside the KT district. Thus, securing a health and safety environment in the area is a long-term endeavor and an important objective to be achieved.

★ 2.2 The Safe Community and Health City Project in KT has been a long-term development since 2000. Objectives of the project are promoting a safety culture, building a healthy and safe working and living environment for residents in KT.² The Kwai Tsing Community and Healthy City Association (a non-government organization) was formed in August 2002, which set up the Community Health Resource Centre in the Prince Mary Hospital (PMH) and Tsing Yi to sustain health and safety in the community. An Injury Surveillance System was developed³ to capture data on injuries presented in the Accident and Emergency Department (AED) of the PMH in order to facilitate focus prevention of injury.

The Injury Surveillance System

★ 2.3 The Injury Surveillance System was developed in 4 phases:

Phase 1 – All injured attendances to the AED were assessed by the triage nurses using a paper based injury surveillance record.

Phase 2 – An electronic system was developed to help capture the surveillance data at the triage station of emergency department.

Phase 3 – The system integrated with the current hospital database. These databases included the International Classification of Disease (ICD-9-CM). Also, Abbreviated Injury Scale (AIS) and Injury Severity Scale (ISS) are generated by matching tables.

Phase 4 – Incorporate interactive body mapping and geographical information technology to help capturing the location of event and facilitate injury coding.

² Source: <http://www.ktschca.org.hk>

³ Funded by the Occupational Safety and Health Council and assisted by Hong Kong Polytechnic University.

2. 緒言

背景資料

★ 2.1 葵青是香港十八區之一，包括葵涌區和青衣，有居民約 510,000 人，該區以全面的交通網絡，包括青馬大橋、三號幹線、青衣北岸公路、地鐵及機場快線及大型貨櫃碼頭而聞名，吸引大批區內外的僱員到葵青區。因此，在該地區建立一個健康及安全的環境是一項長期努力和要達成的重要目標。

★ 2.2 早於 2000 年，葵青安全社區及健康城市協會計劃已開始長期發展。該項目的目標是促進安全文化，為葵青居民建設一個健康和安全的工作和生活環境²。為此，葵青安全社區及健康城市協會（非政府組織）於 2002 年 8 月成立，在瑪嘉烈醫院及青衣成立了社區健康資源中心³，以維持社會上的健康和安全的，並建立傷害監察系統 用作收集瑪嘉烈醫院急症室的受傷數據。

傷害監測系統

★ 2.3 傷害監察系統的發展分為四個階段：

第一階段 – 護士會為所有到急症室求診的傷者進行分流。

第二階段 – 電子數據系統會為急症室的分流站紀錄相關的分流數據。

第三階段 – 此系統軟件會與醫院的資料庫連結，當中包括國際疾病分類 (ICD-9-CM)，簡易受傷個案評估 (AIS) 及受傷嚴重程度評估 (ISS)。

第四階段 – 配合互動的人體圖像及地理資訊科技，從而協助獲得事發地點及識別傷害程度。

² 資料來源：<http://www.ktschca.org.hk>

³ 由職業安全健康局 (Occupational Safety and Health Council) 資助及由香港理工大學協同設計。

★ 2.4 The Injury Surveillance Report 2010 is the second of the same series following the 2009 Injury Surveillance Report. The 2009 report explored potential leading causes of injury hospitalizations and association to deaths, and specific areas concerning fall injury, traffic injury, work injury, domestic violence and self-harm injury. As a consequence, contribution and determinations of causing injuries, and clustering were identified. These objectives remained valid in this study.

★ 2.5 In this report, due to numerous items in data classification, only categories with significant observation were presented. As a result, percentages in some tables do not add up to 100 in the presentation, or the number of cases does not add up to total. Furthermore, since unclassified cases existed in different categories and with different sizes, the number of injuries for compiling the percentages varied. In addition, in this report, comparison with statistics of 2009 was conducted where appropriate. However, caution should be taken when comparing figures since different sizes of unclassified cases existed in 2009 and 2010.

★ 2.4 2010 年的傷害監測報告是繼 2009 年同一系列的第二份報告。2009 年報告探討因受傷住院和導致死亡的關聯，並特別關注到跌傷、交通意外受傷、工作受傷、家庭暴力及自我傷害的潛在原因，並確定造成傷害及受傷熱點的集群。這些目標在 2010 年的研究中仍然有效。

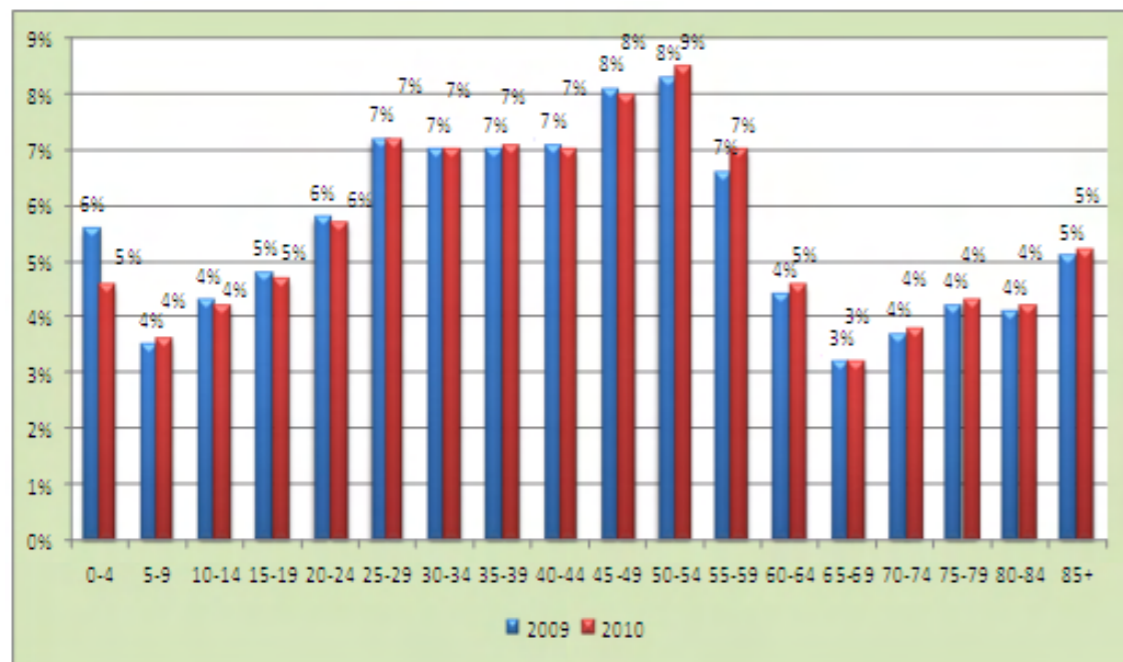
★ 2.5 在這份報告中，由於項目分類眾多，只有較為顯著的類別才作介紹。因此，統計表中個別組別的百分比總和未必等於 100，或總數可能不等於相加總和。此外，由於不同類別未能分類的個案情況大小不同，受傷數字的百分比亦可能略有不同。另外，在這份報告中，只有與 2009 年適當的數據才會作比較，但是，因為 2009 年與 2010 年不能分類的個案大小不同，所以需要小心處理比較數字。

3. General Analyses

Profile of Injured Persons

★ 3.1 In 2010, a total of 22,339 injury cases admitted to the AED were captured. Of those with gender recorded, 57% were males and 43% were females. Age distribution of injured persons was similar to 2009.

Age distribution of injuries, 2009 and 2010
圖一：受傷個案的年齡分佈，2009 及 2010 年



★ 3.2 In 2010, a total of 22,339 injury cases admitted to the AED were captured. Of those with gender recorded, 57% were males and 43% were females. Age distribution of injured persons became more smoothed compared to 2009. However, injuries still clustered at ages 20-64, with 27% of total cases for ages 20-39 and 35% for ages 40-64 with the mode at 25-29.

Table 1: Comparison of distribution by age group (%)
表一：年齡組別分佈之比較 (%)

年齡組別 Age group	2009	2010	增減百分率 Percentage change
0-4	5.6	4.6	-1.0
5-9	3.5	3.6	0.1
11-19	9.1	8.9	-0.2
20-39	27.0	26.9	-0.1
40-64	34.5	35.2	0.7
65或以上 and over	20.3	20.7	0.4

3. 一般分析

傷者概況

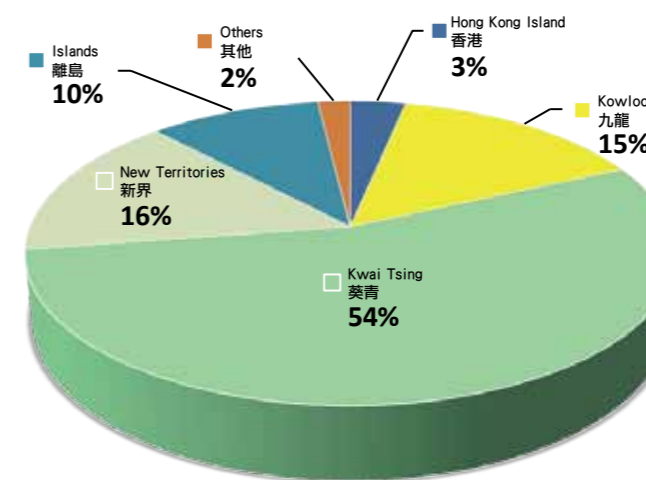
★ 3.1 2010 年，傷害監察系統合共錄得 22,339 宗受傷個案。根據有性別紀錄的個案，57% 為男性，43% 為女性。受傷者的年齡分佈與 2009 年相約。

★ 3.2 2010 年，傷害監察系統合共錄得 22,339 宗受傷個案。根據有性別紀錄的個案，57% 為男性，43% 為女性。受傷者的年齡分佈較 2009 年平均，不過，傷者依然較集中在 20-64 歲，其中 20-39 歲的傷者佔全部個案的 27% 及 40-64 歲的佔 35%，眾數組是 25-29 歲。

★ 3.3 In 2010, over half (54%) of the injured persons came from within KT district, and the remaining 46% from other areas such as Kowloon (15%), New Territories (16%) and Islands (10%).

★ 3.3 2010 年，超過一半 (54%) 的傷者來自葵青區，其餘 46% 來自其他地區，如九龍 (15%)、新界 (16%) 及離島 (10%)。

Chart 2: Injured persons by residential area
圖二：按住宅區域劃分的傷者



Analyses of Injuries

★ 3.4 Majority (85%) of the injured cases were unintentional while about 5% were intentional and less than 1% was self-harm. There was no significant change over the previous year 2009. Table below compared results of 2009 and 2010.

受傷分析

★ 3.4 大部分 (85%) 受傷個案是非故意的，只有大約 5% 的個案屬故意及少於 1% 屬自我傷害。與 2009 年比較沒有明顯改變。下表比較 2009 年和 2010 年的數據。

Table 2: Comparison of injuries by intention (%)
表二：受傷動機的比較 (%)

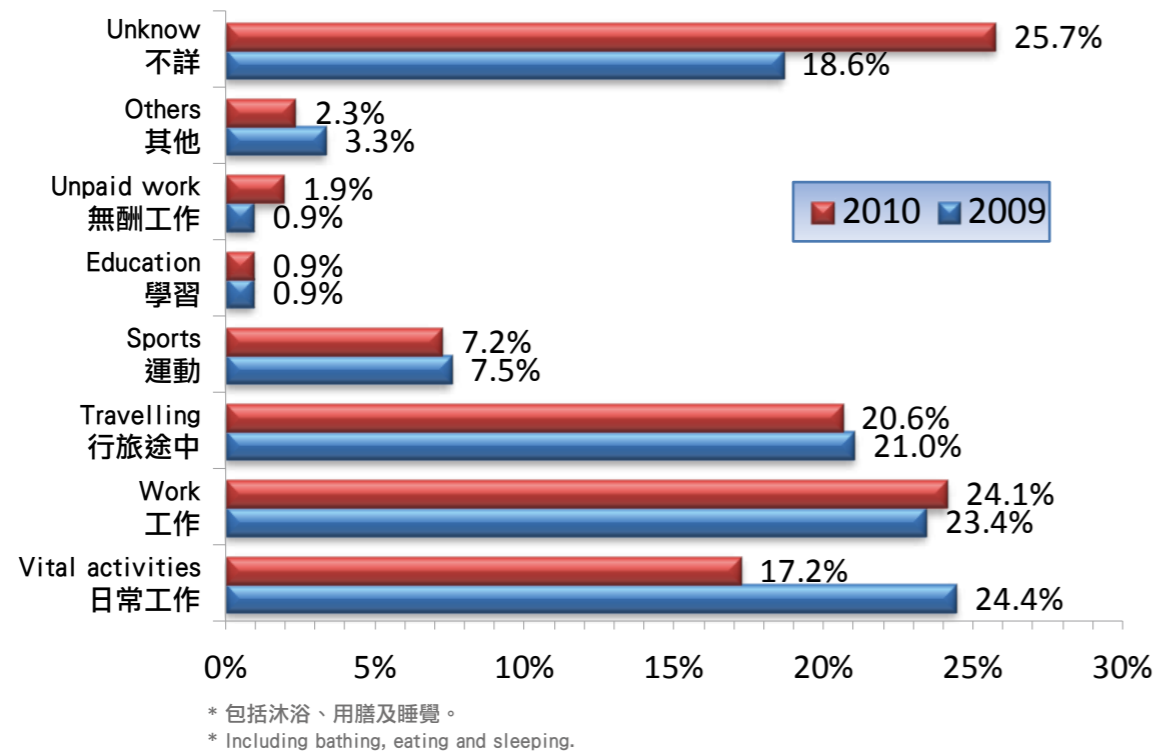
年齡組別 Age group	2009	2010	增減百分率 Percentage change
非故意 Unintentional	82.9	85.4	+2.5
故意 Intentional	5.8	4.8	-1.0
不詳 / 其他 Unknown/Others	10.5	9.1	-1.4

★ 3.5 In 2010, about one-quarter of the injuries occurred at work (24%) and another one-fifth during traveling (21%). Injuries occurred when doing daily work such as household chores accounted to 3,850 cases or 17% (including 111 cases happened during bathing, eating and sleeping). This compared to 24% in 2009, registered an apparent improvement.

★ 3.5 大在 2010 年，接近四分之一的受傷個案在工作時發生 (24%)，五分之一在行程途中 (21%) 發生。3,850 宗 (或 17%) 受傷個案在日常工作期間發生，如料理家務 (包括 111 宗個案發生在沐浴、用膳和睡覺的時候)。相對 2009 年的 24% 有顯著的改善。

Chart 3: Distribution of injuries by activity of occurrence

圖三：受傷時所進行活動的分佈

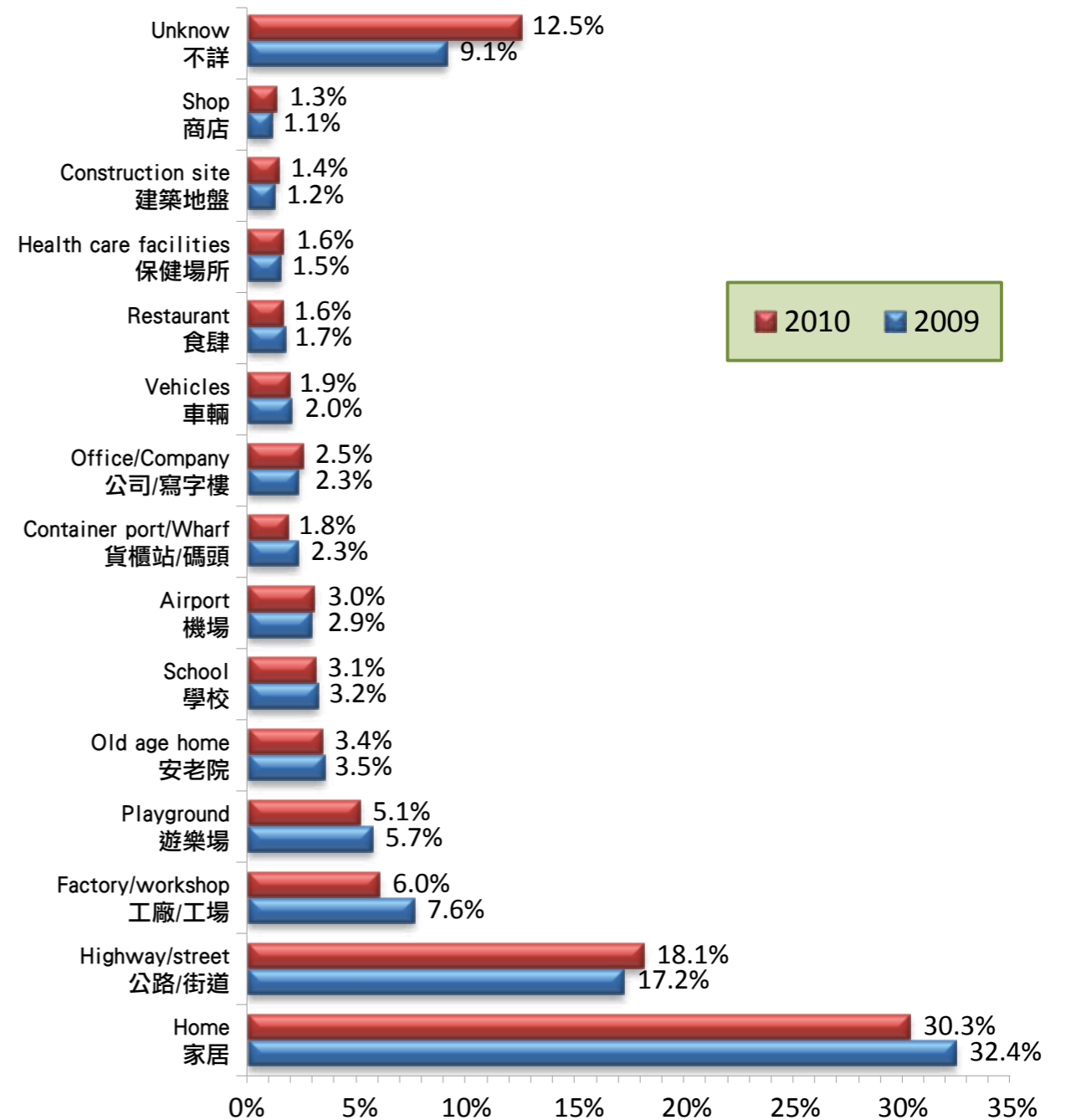


★ 3.6 Regarding places where injuries occurred, home was still the hotspot of most injuries, constituting for about one-third (30%) of the total cases. This was followed by highway/streets (18%). Compared to 2009, injuries both at home and in factory/workshop dropped by about 2 percentage points. On the other hand, injuries on highway/street increased by about 1 percentage point. For other locations, percentages of injuries were about the same level in 2010 as in 2009. The following chart compared injuries by place.

★ 3.6 根據傷害發生的地點，家居仍然是大部分傷害發生的熱點，佔所有個案的大約三分之一 (30%)，其次是公路 / 街道上 (18%)。相對 2009 年，在家中及工廠 / 工場的受傷個案下跌了大約 2 個百分點，而於公路 / 街道發生的個案則上升約 1 個百分點。至於其他地點，2010 年傷害發生的百分比與 2009 年大致相同。以下圖比較傷害發生的地點。

Chart 4: Distribution of injuries by place of occurrence

圖四：傷害發生的地點分佈



★ 3.7 34% of the injuries were resulted from domestic and 21% due to industrial. Percentage distribution of injuries by traumatic type in 2009 and 2010 were about the same, except a slight increase for domestic type.

★ 3.7 34% 的受傷個案是由於家居創傷引至，而 21% 是由於工業創傷。除了家居創傷類型有輕微上升外，2010 年創傷類型的百分比分佈大致與 2009 年相同。

Table 3: Injuries by traumatic type, 2009 and 2010 (%)

表三：2009 及 2010 創傷類型比較 (%)

創傷類型 Traumatic type	2009		2010	
	個案 Cases	%	個案 Cases	%
普通毆鬥 / 非禮 Common/indecent assault	856	4.6	844	3.8
配偶虐待 Spousal abuse	94	0.5	89	0.4
交通 Traffic	1,183	6.4	1,398	6.3
工業 Industrial	3,812	20.5	4,609	20.6
家居 Domestic	6,074	32.7	7,538	33.7
運動 Sports	1,223	6.6	1,379	6.2
其他 (包括未能分類) Others (incl. unclassified)	5,353	28.8	6,482	29.0
合共 Total	18,595	100.0	22,339	100.0

★ 3.8 Of the 22,339 injuries in 2010, large proportion of injuries was caused by fall (43% or 9,607) and other blunt force (23% or 5,222). 7% (1,561) was caused by stab/cut and 6% (1,346) due to traffic accidents.

★ 3.8 在 2010 年的 22,339 宗受傷個案中，大部分是跌倒受傷 (43% 或 9,607) 及撞傷 (23% 或 5,222)。7% (1,561) 由於割傷及 6% (1,346) 由於交通意外受傷。

★ 3.9 Compared to 2009, the number of injuries due to fall increased largely by 31% while that due to blunt force by 23%, larger than the overall increase of 20%. Distribution of other causes remained at about the same level as in 2009, in relative terms.

★ 3.9 相對 2009 年，跌倒受傷的個案數字大幅上升 31% 而撞傷亦上升了 23%，較整體升幅的 20% 多。其他創傷類型的比率則大致維持在 2009 年相若水平。

Table 4: Injuries by major cause, 2009 and 2010

圖四：傷害發生的地點分佈

傷害形成的途徑 Cause of injuries	2009		2010	
	個案 Cases	%	個案 Cases	%
交通意外受傷 Traffic	1,047	5.6	1,346	6.0
跌倒受傷 Fall	7,357	39.6	9,607	43.0
撞傷 Other blunt force	4,233	22.8	5,222	23.4
割傷 Stab/cut	1,369	7.4	1,561	7.0
燒傷 / 燙傷 Fire/heat	222	1.2	325	1.5
搬重物 Lifting	400	2.2	505	2.3
其他 (包括未能分類) Others (incl. unclassified)	3,967	21.3	3,773	16.9
合共 Total	18,595	100.0	22,339	100.0

4. Leading Causes of Injury Hospitalization and Association to Death

Analyses of Injury Mechanism

★ 4.1 Regarding mechanism of injuries, females were mostly injured due to fall (52%) and other blunt force (18%). Likewise, injuries due to fall and other blunt force were also often to men, with 36% and 28% respectively in 2010.

★ 4.2 Compared 2010 to 2009, in both absolute and relative terms, injuries caused by fall and other blunt force increased, both men and women alike. Fall and other blunt force injuries increased by 34% and 23% for men and 27% and 24% for women respectively.

Table 5: No. of injuries by major cause and sex, 2009 and 2010

表五：2009 及 2010 年按傷害形成的成因及性別比較

性別 Sex	年份 Year	成因 Causes					
		交通意外 受傷 Traffic injury	跌倒受傷 Fall	撞傷 Other blunt force	割傷 Stab/ cut	燒傷 / 燙傷 Fire/heat	搬重物 lifting
男性 Male	2009	779 (7.2%)	3,450 (32.1%)	2,860 (26.6%)	904 (8.4%)	106 (1.0%)	268 (2.5%)
	2010	930 (7.3%)	4,640 (36.3%)	3,508 (27.5%)	988 (7.7%)	158 (1.2%)	333 (2.6%)
女性 Female	2009	268 (3.4%)	3,907 (50.2%)	1,373 (17.6%)	465 (6.0%)	116 (1.5%)	132 (1.7%)
	2010	415 (4.4%)	4,955 (52.0%)	1,708 (17.9%)	573 (6.0%)	167 (1.8%)	169 (1.8%)
合共 Total	2009	1,047 (100.0)	7,357 (100.0)	4,233 (100.0)	1,369 (100.0)	222 (100.0)	400 (100.0)
	2010	1,346 (100.0)	9,607 (100.0)	5,222 (100.0)	1,561 (100.0)	325 (100.0)	505 (100.0)

註：括號內的數字為該年相對類別，即性別的百分比。

Note: Figures in brackets were percentage shares in corresponding category, i.e. gender in the year.

★ 4.3 Across all age groups <15, 15-60, and 60 and over, injuries caused by fall and other blunt force were higher. For the younger ages (<15) as well as the seniors aged 60 and over, fall was the major cause of injuries, with 50% and 74% respectively. For those aged 15-60, major causes of injuries were also fall and other blunt force (both at 29%) in 2010.

4. 受傷住院的主因及其與死亡的關係

按傷害形成的分析

★ 4.1 根據傷害形成的途徑，女性受傷的原因主要是跌倒 (52%) 及撞傷 (18%)。2010 年，同樣情況亦發生在男性身上，分別是 36% 及 28%。

★ 4.2 比較 2010 年和 2009 年，以絕對和相對項比較，男性和女性因跌倒受傷及撞傷的個案同樣有所增加。跌傷和撞傷的個案數字上升，男性方面分別上升了 34% 和 23%；而女性方面則上升了 27% 和 24%。

★ 4.3 2010 年對於所有年齡組別，<15、15-60 及 60 或以上，因跌倒和撞傷的個案數字較高。對於較年青的一群 (<15 歲) 和較年長的一群 (60 歲或以上)，受傷的主要原因是跌傷，分別為 50% 及 74%。對於 15-60 歲的一群，受傷的主要原因也是跌傷和撞傷 (兩者皆為 29%)。

★ 4.4 Compared to 2009, injuries due to fall for those aged 15-60 and 60+ increased largely by 35% and 27% (or by 1,061 and 850 cases) respectively. Traffic injuries in 2010 for the younger ages was more than a 2-fold of that in 2009 (133% or 53 cases) and other blunt force for the old ages (60+) increased by 41% (or 148 cases).

★ 4.4 與 2009 年比較，15-60 歲及 60 歲或以上跌倒受傷的個案錄得大幅增加，分別為 35% 及 27% (或 1,061 宗及 850 宗)。對於年青的一群，2010 交通意外受傷個案為 2009 年兩倍以上 (133% 或 53 宗)，長者 (60+) 撞傷亦增加了 41% (或 148 宗)。

Table 6: Injuries by major causes and age group, 2009 and 2010

表六：2009 及 2010 年傷害形成的成因及年齡組別的比較

年齡組別 Age group	年份 Year	成因 Causes					
		交通意外 受傷 Traffic injury	跌倒受傷 Fall	撞傷 Other blunt force	割傷 Stab/ cut	燒傷 / 燙傷 Fire /heat	搬重物 lifting
< 15	2009	40 (3.8%)	1,224 (16.6%)	586 (13.8%)	91 (6.6%)	31 (14.0%)	10 (2.5%)
	2010	93 (6.9%)	1,382 (14.7%)	676 (13.0%)	111 (7.1%)	48 (15.1%)	12 (2.4%)
15 - 60	2009	912 (87.1%)	3,024 (41.1%)	3,289 (77.7%)	1,129 (82.5%)	159 (71.6%)	358 (89.5%)
	2010	1,135 (84.6%)	4,085 (43.3%)	4,011 (77.2%)	1,299 (83.4%)	215 (67.8%)	449 (89.6%)
60+	2009	95 (9.1%)	3,109 (42.3%)	358 (8.5%)	149 (10.9%)	32 (14.4%)	32 (8.0%)
	2010	113 (8.4%)	3,959 (42.0%)	506 (9.7%)	148 (9.5%)	54 (17.0%)	40 (8.0%)
合共 (N) Total	2009	1,047 (100.0)	7,357 (100.0)	4,233 (100.0)	1,369 (100.0)	222 (100.0)	400 (100.0)
	2010	1,341 (100.0)	9,426 (100.0)	5,193 (100.0)	1,558 (100.0)	317 (100.0)	501 (100.0)

★ 4.5 Of the 5,394 injuries happened at work, 39% were caused by blunt force and 20% by fall. Of the 4,610 cases happened during travelling, 55% were caused by fall and 19% were traffic injuries. Those happened during vital activities (3,739 cases) were also largely caused by fall (56%) when doing daily work such as household chores.

★ 4.5 在工作中受傷的 5,394 宗個案中，撞傷及跌傷分別佔 39% 和 20%。在行程途中受傷的 4,610 個案中，跌傷佔 55%；交通意外受傷佔 19%。在日常生活中受傷的個案 (3,739 宗個案) 大多是做家務時跌傷 (56%)。

★ 4.6 Compared to 2009, injuries caused by blunt force at work increased by 32% (or 505 cases) and lifting by 31% (78 cases), while that by stab/cut dropped by 8% (54 cases). Of the injuries happened during vital activities, traffic injuries dropped apparently by 191 cases with only 3 cases reported. Blunt force caused injuries decreased by 12% during vital activity, and by 11% during travelling. Travelling caused drastic increases in traffic injuries, by 56% (321 cases), and fall by 15% (330 cases) over the year.

★ 4.6 與 2009 年比較，在工作中撞傷增加了 32% (或 505 宗)；因搬重物而受傷的增加了 31% (78 宗)，而割傷的則下跌 8% (54 宗)。在日常生活中受傷的個案中，因交通意外受傷的只錄得 3 宗個案，較去年明顯地減少 191 宗。而在日常生活中撞傷的下跌了 12%，行程途中受傷的亦下降了 11%。行程途中因交通意外受傷的大幅上升了 56% (321 宗)；而跌傷亦增加了 15% (330 宗)。

Table 7: Major causes of injuries by major activity, 2009 and 2010

表七：2009 及 2010 年按活動及主要原因劃分的傷害

活動 Activity	年份 Year	成因 Causes						合共 * Total *
		交通意外 受傷 Traffic injury	跌倒受傷 Fall	撞傷 Other blunt force	割傷 Stab/ cut	燒傷 / 燙傷 Fire / heat	搬重物 lifting	
工作 Work	2009	182 (4.1%)	859 (19.4%)	1,581 (35.7%)	705 (15.9%)	95 (2.1%)	251 (5.7%)	4,426 (100.0%)
	2010	252 (4.7%)	1,071 (19.9%)	2,086 (38.7%)	651 (12.1%)	124 (2.3%)	329 (6.1%)	5,394 (100.0%)
日常生活 Vital activities	2009	194 (4.3%)	1,984 (43.8%)	530 (11.7%)	206 (4.6%)	48 (1.1%)	65 (1.4%)	4,525 (100.0%)
	2010	3 (0.1)	2,089 (55.9%)	467 (12.5%)	210 (5.6%)	56 (1.5%)	27 (0.7%)	3,739 (100.0%)
運動 Sport	2009	19 (1.2%)	606 (39.8%)	510 (33.5%)	15 (1.0%)	2 (0.1%)	10 (0.7%)	1,524 (100.0%)
	2010	17 (1.1%)	674 (41.7%)	573 (35.5%)	19 (1.2%)	2 (0.1%)	16 (1.0%)	1,615 (100.0%)
行程途中 Travel	2009	572 (14.6%)	2,208 (56.3%)	706 (18.0%)	106 (2.7%)	18 (0.5%)	36 (0.9%)	3,921 (100.0%)
	2010	893 (19.4%)	2,538 (55.1%)	626 (13.6%)	92 (2.0%)	21 (0.5%)	23 (0.5%)	4,610 (100.0%)
合共 * Total*	2009	1,047	7,357	4,233	1,369	222	400	18,595
	2010	1,346	9,607	5,222	1,561	325	505	22,339

* 包括不詳及 / 或未分類的個案

* Total included unknown and/or unclassified cases.

Analyses by Place

★ 4.7 Analysed by place, injuries of females were common at home (39%), and 17% occurred on highway/street. For males, 24% of injuries occurred at home, and 19% on highway/street. Percentage of injuries in factory/workshop was higher for men than for women (8% for men and 3% for women).

★ 4.8 Compared to 2009, percentages of injuries at home dropped for both gender (decreased by about 1 and 4 percentage points for male and female respectively), and by 2 percentage points, both men and women alike, for injuries in factory/workshop. On the other hand, injuries on highway/street increased by 26% for males and 23% for females.

按發生地點分析

★ 4.7 按傷害發生地點分析，女性受傷普遍發生在家中 (39%) 及公路 / 街道 (17%)。而男性受傷方面，24% 發生在家中及 19% 發生在公路 / 街道。發生在工廠 / 工場的個案中，男性的比率較女性高 (男性 8% 而女性 3%)。

★ 4.8 按與 2009 年相比，兩性在家居受傷的百分比都下跌 (男性和女性分別減少了大約 1 及 4 個百分點)，兩性在工廠 / 工場受傷同樣減少了 2 個百分點。另一方面，男性在公路 / 街道受傷增加了 26%，而女性則增加了 23%。

Table 8: Injuries by major places and sex, 2009 and 2010

表八：2009 及 2010 年按傷害發生的地點及性別

地點 Place	個案 Cases %	2009			2010		
		男性 Male	女性 Female	合共 Total	男性 Male	女性 Female	合共 Total
地盤 Construction site	No.	218	9	227	286	17	303
	%	2.0	0.1	1.2	2.2	0.2	1.4
工廠 / 工場 Factory workshop	No.	1,101	324	1,425	1,076	257	1,333
	%	10.2	4.2	7.7	8.4	2.7	6.0
家居 Home	No.	2,695	3,322	6,017	3,026	3,739	6,765
	%	25.1	42.7	32.4	23.7	39.2	30.3
遊樂場 Playground	No.	919	218	1,137	910	223	1,133
	%	8.5	2.8	6.1	7.1	2.3	5.1
學校 School	No.	415	190	605	492	204	696
	%	3.9	2.4	3.3	3.9	2.1	3.1
公路 / 街道 Highway/street	No.	1,896	1,349	3,245	2,382	1,662	4,044
	%	17.6	17.3	17.5	18.6	17.4	18.1
安老院 Old age home	No.	193	452	645	244	508	752
	%	1.8	5.8	3.5	1.9	5.3	3.4
合共 * Total*	No.	10,785	7,810	18,595	12,774	9,527	22,301
	%	100.0	100.0	100.0	100.0	100.0	100.0

* 包括在其他地方發生的個案。

* Total included injuries happened at other places.

★ 4.9 The percentages of injuries happened at home were higher for younger ages (<15) and the elderly (60+), with 41% and 45% respectively, and higher on highway/street for adults aged 15-60 and 60+, with 20% and 18% respectively. Compared to 2009, injuries at home for the youngster (<15) and elderly (60+) dropped by 6 and 4 percentage points respectively compared to 2009. However, injuries on highway/street for those <15 ages went up by 2 percentage points in the year.

★ 4.9 在家居受傷的百分比，年青的 (<15 歲) 及年長的 (60+ 歲) 的一群佔大多數，分別佔 41% 及 45%；而在公路 / 街道受傷的，傷者大多數是年齡介乎 15-60 及 60+ 的成年人，分別佔 20% 和 18%。與 2009 年比較，在家居受傷的，年青人 (<15) 及長者 (60+) 分別下跌了 6 及 4 個百分點。但 15 歲以下的在公路 / 街道受傷的則上升了 2 個百分點。

Table 9: Injuries by major places and age group, 2009 and 2010

表九：2009 及 2010 年傷害發生的地點及年齡組別

地點 Place	個案 Cases	2009			2010		
		< 15	15-60	60+	< 15	15-60	60+
地盤	No.	-	220	7	-	288	15
Construction site	%	-	1.9	0.2	-	2.1	0.3
工廠 / 工場	No.	5	1,358	62	2	1,265	66
Factory/ workshop	%	0.2	11.6	1.4	0.1	9.0	1.2
家居	No.	1,169	2,735	2,113	1,139	3,063	2,382
Home	%	47.2	23.4	48.5	41.4	21.9	44.6
遊樂場	No.	295	772	70	310	761	62
Playground	%	11.9	6.6	1.6	11.3	5.4	1.2
學校	No.	356	248	1	447	245	3
School	%	14.4	2.1	0.0	16.3	1.8	0.1
公路 / 街道	No.	246	2,181	818	331	2,740	964
Highway/street	%	9.9	18.6	18.8	12.0	19.6	18.0
安老院	No.	-	84	561	1	92	659
Old age home	%	-	0.7	12.9	0.0	0.7	12.3
合共*	No.	2,473	11,705	4,366	2,749	13,733	5,591
Total*	%	100.0	100.0	100.0	100.0	100.0	100.0

* 包括在其他地點發生的個案。

* Total included injuries happened at other places.

★ 4.10 Analysed by place of occurrence and mechanism, traffic injuries mostly happened on highway/street (73%) and in vehicles (17%). In fact, significant number of injuries caused by fall (19%) and blunt force (15%) were also happened on highway/street. Home was the hotspot for injuries caused by stab/cut (41%), fall (39%), other blunt force (20%), and lifting (15%), and constituting for over 30% of the total injuries. Injuries happened in factory/workshop were caused mostly by lifting (14%), stab/cut and blunt force, both at about 12%.

★ 4.10 以傷害發生地點及途徑分析，交通意外大多發生在公路 / 街道 (73%) 及車輛上 (17%)。事實上，在公路 / 街道上亦錄得相當數量的跌傷 (19%) 及撞傷 (15%) 的個案。不過，家居仍是發生割傷 (41%)、跌傷 (39%)、撞傷 (20%) 及搬重物受傷 (15%) 的熱點，佔全部受傷個案超過 30%。發生在工廠 / 工場的傷害多是因搬重物 (14%)、割傷及撞傷引致的，兩者均佔大約 12%。

Table 10: Injuries by major place and mechanism of injury

表十：傷害發生的主要地點及途徑

地點 Place		途徑 Mechanism					合共 Total
		跌倒 受傷 Fall	撞傷 Blunt force	割傷 Stab/ cut	交通意外 受傷 Traffic	搬重物 Lifting	
工廠 / 工場	No.	223	556	185	2	71	1,337
Factory/ Workshop	%	2.3	10.6	11.9	0.1	14.1	6.0
公路 / 街道	No.	1,848	764	89	981	28	4,045
Highway/Street	%	19.2	14.6	5.7	72.9	5.5	18.1
家居	No.	3,711	1,022	646	-	76	6,772
Home	%	38.6	19.6	41.4	-	15.0	30.3
安老院	No.	603	73	15	-	6	754
Old age home	%	6.3	1.4	1.0	-	1.2	3.4
學校	No.	280	303	31	-	9	697
School	%	2.9	5.8	2.0	-	1.8	3.1
車輛	No.	82	58	3	228	4	424
Vehicle	%	0.9	1.1	0.2	16.9	0.8	1.9
辦工室	No.	138	215	84	-	49	558
Office	%	1.4	4.1	5.4	-	9.7	2.5
合共	No.	9,607	5,222	1,561	1,346	505	22,339
Total	%	100.0	100.0	100.0	100.0	100.0	100.0

★ 4.11 Comparing 2010 with 2009, hotspots of injuries were similar. Relatively, the percentage distribution of injuries by major place was slightly lower compared to 2009, except a slight increase of traffic injuries and stab/cut on highway/street. No injuries were recorded in theme park in 2010. This showed a great improvement in the year.

★ 4.11 2010年傷害發生的熱點與2009年相似，相對地，傷害發生的主要地點分佈，除了在公路/道路發生交通意外受傷及割傷錄得輕微上升外，其他大都較去年輕微下跌。2010年中，在主題公園沒有錄得任何傷害個案發生，這表示這年有很大的改善。

Table 11: Injuries by mechanism and place, 2009 and 2010 (%)

表十一：2009及2010年傷害形成的途徑及地點(%)

地點 Place	年份 Year	途徑 Mechanism			
		跌倒受傷 Fall	撞傷 Blunt force	割傷 Stab/ cut	交通意外受傷 Traffic
工廠 / 工場 Factory/Workshop	2009	3.1	10.1	16.2	0.7
	2010	2.3	10.6	11.9	0.1
公路 / 街道 Highway/Street	2009	19.5	16.3	5.3	69.2
	2010	19.2	14.6	5.7	72.9
家居 Home	2009	40.8	22.1	43.5	0.1
	2010	38.6	19.6	41.4	0.0
安老院 Old age home	2009	7.1	1.4	0.9	-
	2010	6.3	1.4	1.0	-
學校 School	2009	3.4	5.8	2.5	-
	2010	2.9	5.8	2.0	-
車輛 Vehicle	2009	0.8	0.7	0.2	19.7
	2010	0.9	1.1	0.2	16.9
合共 Total	2009	100.0	100.0	100.0	100.0
	2010	100.0	100.0	100.0	100.0

★ 4.12 Injuries occurred at home mostly happened when doing daily household work (2,919 cases or 43%). Those happened on highway/street mostly occurred during travelling (60% or 2,412 cases). 73% of injuries happened at playground occurred during sports. Likewise, 30% of injuries in school were also due to sports. Of the 1,337 cases happened in factory or workshop, great majority (98%) was caused at work. It was notable that 664 injuries occurred at airport, of which, 83% were injured at work.

★ 4.12 在家居造成的傷害多數是做家務時發生的(2,919宗個案或43%)，而在公路/街道上發生的傷害，主要是行程途中發生(60%或2,412宗個案)。73%的傷害是在遊樂場運動時造成的；同樣地，在學校發生的傷害，有大约30%是因運動而受傷的。在1,337宗發生在工廠/工場的受傷個案中，絕大部分(98%)是因工作而受傷；值得關注的是，在機場受傷的有83%是因工作造成。

Table 12: Injuries by major places and activity, 2010

表十二：2010年傷害形成的地點及發生時的活動

地點 Place	個案 Cases %	活動 Activity				合共 Total
		工作 Work	運動 Sports	行程途中 Travelling	日常生活 Vital activ- ity	
機場 Airport	No. %	551 83.0	- -	69 10.4	4 0.6	664 100.0
工廠 / 工場 Factory/ workshop	No. %	1,305 97.6	- -	- -	- -	1,337 100.0
家居 Home	No. %	104 1.5	25 0.4	861 12.7	2,919 43.1	6,772 100.0
遊樂場 Playground	No. %	29 2.6	827 72.9	89 7.8	54 4.8	1,135 100.0
學校 School	No. %	43 6.2	211 30.3	73 10.5	44 6.3	697 100.0
公路 / 街道 Highway/street	No. %	572 14.1	188 4.6	2,412 59.6	1 0.0	4,045 100.0
安老院 Old age home	No. %	52 6.9	3 0.4	157 20.8	229 30.4	754 100.0

★ 4.13 The hotspot of injuries happened during different activities varied. In 2010, work injuries occurred more often in factory/workshop (24.2%), highway/street (10.6%), airport (10.2%) and office (9.4%). On the other hand, injuries caused during sports occurred majorly at playground (51.2%) and travelling injuries on highway/street (52.3). Injuries during vital activities happened mostly at home (78.1). Compared to 2009, percentages of injuries at work in factory/workshop, and at home for most activities, except vital activity, dropped apparently. Injuries happened at home when doing vital activities increased largely by 16 percentage points. Injuries caused by sports in school also increased by 21% (or about 3 percentage points) over the year. Old age home recorded a 13% increase in number of cases during daily activities.

★ 4.13 不同類別的意外發生熱點皆有不同。2010年，工傷事故較常發生在工廠/工場(24.2%)，公路/街道(10.6%)，機場(10.2%)及辦公室(9.4%)。另一方面，運動引起的意外主要發生於遊樂場(51.2%)，行程途中發生的意外主要發生於道路/街道(52.3)。在日常生活活動而受傷主要發生於家居(78.1)。相比2009年，於工廠/工場受傷及家居受傷(除日常生活活動)顯著下跌。在家居進行日常生活活動受傷的百分比上升了16個百分點。在這年，在學校運動時受傷的個案亦增加了21%(或大約3個百分點)；另外，在安老院中進行日常活動時受傷亦錄得13%的升幅。

Table 13: Percentage distribution of injuries by place and activity, 2009 and 2010

表十三：2009及2010傷害形成的地點及發生時的活動分佈(%)

地點 Place	年份 Year	活動 Activity			
		工作 Work	運動 Sports	行程途中 Travelling	日常生活 Vital activity
工廠/工場 Factory/ workshop	2009	29.5	0.1	0.6	1.6
	2010	24.2	-	-	-
家居 Home	2009	5.4	6.1	25.6	61.9
	2010	1.9	1.5	18.7	78.1
遊樂場 Playground	2009	1.1	55.2	2.6	0.9
	2010	0.5	51.2	1.9	1.4
學校 School	2009	1.3	11.4	1.5	1.4
	2010	0.8	13.1	1.6	1.2
公路/街道 Highway/street	2009	9.8	10.4	49.2	4.8
	2010	10.6	11.6	52.3	0.0
安老院 Old age home	2009	1.1	0.2	4.5	4.5
	2010	1.0	0.2	3.4	6.1
其他 Others	2009	51.8	16.6	16.0	24.9
	2010	61.0	22.4	22.1	13.2
合共個案(N) Total cases (N)	2009	100.0 (4,426)	100.0 (1,524)	100.0 (3,921)	100.0 (4,525)
	2010	100.0 (5,394)	100.0 (1,615)	100.0 (4,610)	100.0 (3,739)

Analyses by Activity

★ 4.14 The percentage of injuries at work was higher for men (31%) than for women (15%) and vice versa when travelling (25% for women and 18% for men). Similarly, percentages of injuries at vital activity were higher for women (21%) than for men (14%). Compared to 2009, injuries for men at work increased by 25%. Significant decreases were recorded for injuries during vital activities, by 24% for males and 11% for females, while the overall percentage share dropped from 24% in 2009 to 17% in 2010.

按活動時受傷的分析

★ 4.14 在工作時受傷，男性的百分比(31%)較女性高(15%)，但在行程途中受傷的情況卻相反(女性25%；男性18%)。同樣地，女性在日常生活中受傷的百分比(21%)較男性(14%)高。與2009年比較，在工作中受傷的男性增加了25%；而在日常生活中受傷個案則顯著減少，男性減少24%，女性減少11%；整體所佔的比例由2009年的24%下降至2010年的17%。

Table 14: Injuries of major activities by sex, 2009 and 2010

表十四：2009及2010年按性別劃分的受傷時主要活動

活動 Activity		2009			2010		
		男性 Male	女性 Female	合共 Total	男性 Male	女性 Female	合共 Total
工作 Work	No.	3,206	1,220	4,426	4,007	1,377	5,384
	%	29.8	15.7	23.8	31.4	14.5	24.1
運動 Sports	No.	1,220	304	1,524	1,303	307	1,610
	%	11.3	3.9	8.2	10.2	3.2	7.2
行程途中 Travelling	No.	1,876	2,045	3,921	2,246	2,363	4,609
	%	17.4	26.3	21.1	17.6	24.8	20.7
日常生活 Vital activity	No.	2,290	2,235	4,525	1,743	1,994	3,737
	%	21.3	28.7	24.3	13.6	20.9	16.8
合共* Total*	No.	10,785	7,810	18,595	12,774	9,527	22,301
	%	100.0	100.0	100.0	100.0	100.0	100.0

* 包括其他活動的受傷個案。

* Total included injuries happened during other activities.

★ 4.15 Analysed by age, percentages of injuries were highest for the middle aged (15-60) at work (37%), when travelling and vital activity for the elderly, with 29% and 26% respectively. Injuries caused during daily routines were higher for those aged <15 (22%) and older people (26%).

★ 4.16 Compared to 2009, injuries for vital activity decreased across all age groups, by 17% for aged <15, 29% for aged 15-60 and 3% for aged 60+. This registered a remarkable improvement in the year. Injuries for the old aged during travelling also recorded a drop of 3 percentage points, though in absolute value, the number of cases went up by 11%.

Table 15: Injuries of major activity by sex, 2009 and 2010

表十五：2009 及 2010 年按年齡劃分的受傷時主要活動

活動 Activity		2009			2010		
		< 15	15-60	60+	< 15	15-60	60+
工作 Work	No.	10	4,224	192	-	5,148	235
	%	0.4	36.1	4.4	-	36.8	4.4
運動 Sports	No.	414	999	111	393	1,150	67
	%	16.7	8.5	2.5	14.3	8.2	1.3
行程途中 Travelling	No.	476	2,038	1,407	541	2,484	1,555
	%	19.2	17.4	32.3	19.7	17.8	29.1
日常生活 Vital activity	No.	714	2,397	1,414	595	1,692	1,366
	%	28.8	20.5	32.4	21.6	12.1	25.6

★ 4.15 按年齡分析，在工作中受傷的以中年人 (15-60 歲) 的百分比最高 (37%)，而長者在行程途中和日常生活中受傷所佔的百分比，分別為 29% 和 26%。15 歲以下 (22%) 及長者 (26%) 在日常生活中受傷的百分比比較高。

★ 4.16 與 2009 年比較，在日常生活中受傷的百分比在所有年齡組別都下降，15 歲以下的下跌 17%；15-60 歲下跌 29% 及 60 歲以上下跌 3%，表示這年有顯著的改善。雖然以個案數字計，長者在行程途中受傷上升了 11%，但以百分比計卻下跌了 3 個百分點。

★ 4.17 On the whole, injuries during sports increased by about 6% in 2010 over 2009, mainly brought about by the significant increase (15%) for the middle aged (15-60). For those classified cases, injuries occurred during sports were higher when playing football and basketball, both accounted for 26%. Next was cycling, at 10%. Since most injuries due to sports were unclassified by type, comparison was not made.

★ 4.17 2010 年運動時受傷的整體個案較 2009 年上升了 6%，主要由於中年人 (15-60 歲) 受傷的個案顯著上升 (15%) 所致。在已分類的個案中，踢足球和打籃球時受傷的個案較多，兩者均佔 26%，接著的是踏單車，有 10%。由於大部分於運動中受傷的個案都沒有分類，所以沒有進行比較。

Table 16: Sports injuries by type of sport and age group

表十六：按年齡及體育項目劃分的運動受傷

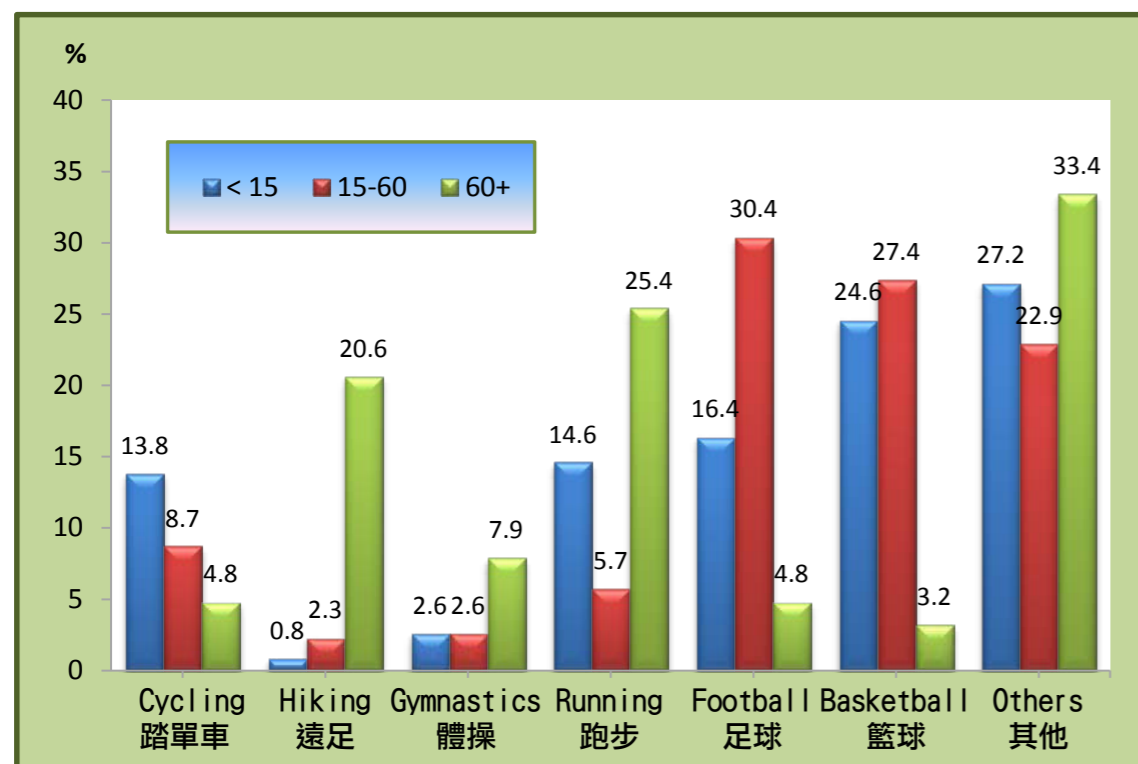
運動項目 Type	< 15	15-60	60+	合共 Total	%
單車 Cycling	54	99	3	156	9.8
遠足 Hiking	3	26	13	42	2.6
健身 Gymnastics	10	30	5	45	2.8
跑步 Running	57	65	16	138	8.7
釣魚 Fishing	2	16	2	20	1.3
棒球 Baseball	7	13	0	20	1.3
足球 Football	64	346	3	413	25.9
籃球 Basketball	96	312	2	410	25.8
其他 Others	97	232	19	348	21.9
合共 Total	390	1,139	63	1,592	100.0

★ 4.18 Sports injuries to the elderly aged 60 and over happened more often during running (25%) and hiking (21%) in 2010. Injuries to those aged 15-64 were more often when playing football (30%) and basketball (27%). Similarly, playing basketball also caused injuries to those younger ages (<15), with 24% in the age group.

★ 4.18 2010年因運動受傷的傷者，60歲或以上長者較常發生於跑步(25%)或遠足(21%)。年齡介乎於15-64歲的傷者較常發生於足球(30%)或籃球(27%)。同樣地，打籃球較常引致年輕人(<15)受傷，佔所屬年齡組別的24%。

Chart 5: Percentage distribution of sports injuries by type and age in 2010

圖五：2010年因運動受傷的種類及年齡分佈百分比



Analyses by Traumatic Type

★ 4.19 Distribution of injuries by traumatic type depicted similar pattern as 2009. Of the 18,860 reported injuries in 2010 with known traumatic type, 40% (7,538 cases) were traumatized at home (domestic), 24% (4,609 cases) were industrial type. Analysed by gender, males were traumatized mostly by industrial (31%) and domestic (31%) while females were traumatized mostly domestically (44%), followed by industrial (15%).

按創傷類型分析

★ 4.19 按創傷類型分析，2010與2009年的數據分佈相似。在2010年有創傷類型分類的18,860宗受傷個案中，40% (7,538宗) 為家居意外；24% (4,609宗) 為工業意外。按性別分析，男性受傷主要因工業意外(31%)及家居意外(31%)，而女性受傷主要是家居意外(44%)，其次是工業意外(15%)。

Table 17: No. of Injuries by traumatic type, 2009 and 2010

表十七：2009及2010年按創傷類型及性別劃分的個案數字

創傷類型 Traumatic		2009			2010		
		男性 Male	女性 Female	合共 Total	男性 Male	女性 Female	合共 Total
交通 Traffic	No.	851	332	1,183	940	458	1,398
	%	9.2	5.1	6.4	8.6	5.8	7.4
工業 Industrial	No.	2,860	952	3,812	3,425	1,184	4,609
	%	30.8	14.7	20.5	31.3	15.0	24.4
家居 Domestic	No.	2,681	3,393	6,074	3,336	4,202	7,538
	%	28.9	52.5	32.7	30.5	53.1	40.0
運動 Sports	No.	1,021	202	1,223	1,139	240	1,379
	%	11.0	3.1	6.6	10.4	3.0	7.3
普通毆鬥 Common assault	No.	608	248	856	604	231	835
	%	6.6	3.8	4.6	5.5	2.9	4.4
虐兒 Child abuse	No.	14	7	21	15	7	22
	%	0.2	0.1	0.1	0.1	0.1	0.1
配偶虐待 Spousal abuse	No.	15	79	94	12	77	89
	%	0.2	1.2	0.5	0.1	0.8	0.5

★ 4.20 Analysed by age group, injuries happened to adults aged 15-60 were mostly traumatized by industrial (37%), and another 25% at home (domestic). Majority of injuries of children aged below 15 were traumatized at home (58%) and 10% at sports. Old ages (60+) were mostly traumatized at home (70%).

★ 4.20 按年齡分析，年齡介乎15-60歲的傷者較多因工業意外而受傷(37%)，其次是因家居意外受傷，佔25%。15歲以下的兒童多數在家中受傷(58%)及10%在運動時受傷；60歲以上的長者多數在家居受傷(70%)。

★ 4.21 Compared to 2009, the distribution of injuries in relative terms was about the same. Injuries traumatized at home was higher for younger people (<15) (58%) and older people (60+)(70%). Injuries of those aged 15-60 were majorly traumatized at industrial (37%), and domestic (25%).

★ 4.21 與 2009 年比較，傷害的分佈大致相同。因家居受傷的以年輕的一群(<15 歲) (58%) 及長者(60 歲或以上) 較多(70%)；而年齡介乎 15-60 歲的一群，則主要因工業意外(37%) 及家居意外(25%) 受傷。

Table 18: No. of major injuries by traumatic type and age, 2009 and 2010

表十八：2009 及 2010 年按創傷類型及年齡劃分的個案數字

創傷類型 Traumatic type	個案 Cases %	2009			2010		
		< 15	15-60	60+	< 15	15-60	60+
交通	No.	45	1,005	133	87	1,167	139
Traffic	%	2.1	10.0	3.7	3.7	9.7	3.2
工業	No.	4	3,672	136	5	4,406	196
Industrial	%	0.2	36.5	3.8	0.2	36.7	4.6
家居	No.	1,258	2,324	2,492	1,368	2,994	3,012
Domestic	%	59.4	23.1	69.8	57.7	25.0	70.2
運動	No.	281	909	33	328	1,015	36
Sports	%	13.3	9.0	0.9	13.8	8.5	0.8
普通毆鬥	No.	89	717	50	78	694	62
Common assault	%	4.2	7.1	1.4	3.3	5.8	1.4
虐兒	No.	19	2	-	19	1	-
Child abuse	%	0.9	0.0	-	0.8	0.0	-
配偶虐待	No.	-	90	4	-	80	9
Spousal abuse	%	-	0.9	0.1	-	0.7	0.2

★ 4.22 Analysed traumatic type by activity, injuries traumatized domestically were higher during vital activity (64%), and travelling (44%). Injuries caused at work were mostly by industrial (78%). 74% (1,052 cases) caused during sport activities were traumatized at sport. It was notable that 83 cases (0.4%) occurred during sleeping, eating or bathing.

★ 4.22 按受傷時活動分析創傷類型，64% 的受傷個案是在家居進行日常生活時(64%) 及行程途中(44%) 受傷的；在工作中受傷的主要是工業意外(78%)；74% (1,052 宗) 個案是進行運動時受傷的。值得關注的是有 83 宗個案(0.4%)，受傷時正在睡覺、用膳或沐浴。

Table 19: Injuries by activity and traumatic type

表十九：按受傷時活動及創傷類型劃分的個案數字

創傷類型 Traumatic type		活動 Activity					合共 Total
		工作 Work	運動 Sports	行程 途中 Travel	日常生活 Vital activity	其他* Others*	
交通	No.	241	18	907	23	209	1,398
Traffic	%	5.2	1.3	24.7	0.7	3.6	7.4
工業	No.	3,611	15	144	316	523	4,609
Industrial	%	78.1	1.1	3.9	9.6	8.9	24.4
家居	No.	318	221	1,617	2,092	3,290	7,538
Domestic	%	6.9	15.6	44.0	63.8	56.0	40.0
運動	No.	11	1,052	98	93	125	1,379
Sports	%	0.2	74.4	2.7	2.8	2.1	7.3
普通毆鬥	No.	140	6	145	128	416	835
Common assault	%	3.0	0.4	3.9	3.9	7.1	4.4
其他*	No.	303	102	762	625	1,309	3,101
Others*	%	6.6	7.2	20.7	19.1	22.3	16.4
合共	No.	4,624	1,414	3,673	3,277	5,872	18,860
Total	%	100.0	100.0	100.0	100.0	100.0	100.0

* 包括資料不詳或未分類的個案。
因四捨五入的關係，個別數據的總和未必相等於總數。
* Included unknown or unclassified cases.
Percentages may not add up to total due to rounding.

Analyses by Intention

★ 4.23 Majority (85%) of the injuries were caused unintentionally. Less than 1% was self-harmed and 5% were injured intentionally. The percentage of unintentional injuries was higher for fall (47%), and by other blunt force (21%). Majority of the intentional injuries was by other blunt force (76%) while self-harm was highest for stab/cut (42%).

按受傷動機分析

★ 4.23 大部分 (85%) 傷害形成都是非故意的，少於 1% 為自我傷害及 5% 是故意的。在非故意受傷的個案中，較多是跌倒受傷 (47%) 及撞傷 (21%)；而故意受傷以撞傷 (76%) 較多；在自我傷害方面，最多是割傷 (42%)。

Table 20: Injuries by major mechanism and intention

表二十：按受傷的主要途徑及動機劃分的個案數字

途徑 Mechanism	個案 Cases %	非故意 Unintentional	自我傷害 Self-Harm	故意 Intentional (A/A)	合共 Total
交通意外受傷 Traffic injuries	No. %	1,161 6.1	3 2.0	1 0.1	1,346 6.0
跌倒 Fall	No. %	9,035 47.4	32 21.6	24 2.2	9,607 43.0
撞傷 Other blunt force	No. %	3,944 20.7	26 17.6	820 75.8	5,222 23.4
割傷 Stab/cut	No. %	1,365 7.2	62 41.9	44 4.1	1,561 7.0
燒傷 / 燙傷 Fire/heat	No. %	296 1.6	-	4 0.4	325 1.5
搬重物 Lifting	No. %	472 2.5	-	9 0.8	505 2.3
合共 Total	No. %	19,070 100.0	148 100.0	1,082 100.0	22,339 100.0

★ 4.24 In 2010, unintentional injuries by fall increased by 31%, while that caused by blunt force by 29% over 2009. Intentional injuries were majorly caused by other blunt force in both 2009 and 2010, with a slight drop of 3% in 2010. Self-harm injuries were mostly caused by stab/cut, at 42% in 2010, recording an increase of 17% over the preceding year. Similar distribution was observed for other causes as 2009.

★ 4.24 與 2009 年比較，2010 年在非故意受傷的個案中，跌傷增加 31%，而撞傷亦增加了 29%。在故意受傷的個案中，2009 及 2010 年主要都是因為撞傷，2010 年輕微下跌 3%。自我傷害受傷的個案中，主要成因是割傷，在 2010 年是 42%，較上年增加 17%。其他成因的分佈與 2009 年相似。

Table 21: Comparison of injuries by intention and major mechanism (%)

表二十一：傷害的動機和主要途徑的比較 (%)

途徑 Mechanism	年份 Year	非故意 Unintentional	自我傷害 Self-Harm	故意 Intentional (A/A)	合共 Total
交通意外受傷 Traffic injuries	2009 2010	6.3 6.1	1.5 2.0	0.0 0.1	5.6 6.0
跌倒 Fall	2009 2010	44.9 47.4	15.3 21.6	2.0 2.2	39.6 43.0
撞傷 Other blunt force	2009 2010	19.8 20.7	23.7 17.6	78.4 75.8	22.8 23.4
割傷 Stab/cut	2009 2010	7.9 7.2	40.5 41.9	3.8 4.1	7.4 7.0
搬重物 Lifting	2009 2010	2.4 2.5	3.1 0.0	1.1 0.8	2.2 2.3

★ 4.25 Across different kinds of intention in 2010, the percentages were higher at home, with 31% injured unintentionally, 49% self-harmed and 27% were intentional (A/A). This was followed by on highway/street (18% for unintentional, 8% for self-harm and 23% for intentional (A/A)).

★ 4.25 在 2010 年各不同動機類別的受傷個案中，傷害發生地點較高是在家中，31% 為非故意，49% 為自我傷害及 27% 為故意的；其次是在公路 / 街道發生 (18% 為非故意；8% 為自我傷害及 23% 為故意的)。

★ 4.26 Compared to 2009, absolute number of unintentional injuries increased except factory / workshop although the percentage shares in term of intention dropped.

★ 4.26 與 2009 年比較，除發生在工廠 / 工場，其他所有地點錄得的非故意傷害的個案都增加；縱使佔傷害動機的百分比卻減少。

Table 22: Injuries by intention and place, 2009 and 2010

表二十二：按傷害的動機及發生地點劃分的個案數字，2009 及 2010 年

地點 Place	個案 Case %	非故意 Unintentional		自我傷害 Self- Harm		故意 Intentional (A/A)	
		2009	2010	2009	2010	2009	2010
		No.	%	No.	%	No.	%
家居 Home	No. %	5,202 33.8	5,967 31.3	68 51.9	73 49.3	326 30.2	295 27.3
公路 / 街道 Highway/ Street	No. %	2,750 17.9	3,432 18.0	11 8.4	12 8.1	239 22.1	247 22.8
工廠 / 工場 Factory/ workshop	No. %	1,209 7.9	1,133 5.9	5 3.8	3 2.0	39 3.6	21 1.9
安老院 Old age home	No. %	578 3.8	675 3.5	6 4.6	9 6.1	16 1.5	26 2.4
遊樂場 Playground	No. %	1,024 6.7	1,041 5.5	6 4.6	0 0.0	29 2.7	23 2.1
學校 School	No. %	504 3.3	595 3.1	4 3.1	3 2.0	62 5.7	58 5.4

★ 4.27 Across different kinds of intention in 2010, the percentages of unintentional injuries were higher at work (25%), followed by travel (22%) and vital activity (18%). The percentages of self-harm and intentional injuries were higher during vital activity, both with 15%. 18% of injuries at work were caused intentionally.

★ 4.27 在 2010 年各不同動機的受傷個案中，非故意受傷的個案大多在工作時 (25%) 發生，其次是行程途中 (22%) 及日常生活中 (18%) 受傷；自我傷害及故意受傷的個案大多在日常生活中受傷，兩者皆是 15%。工作中受傷的個案中，有 18% 是故意的。

★ 4.28 Compared to 2009, injuries during vital activities across all intention dropped significantly (by 13% for unintentional, 37% for self-harm and 53% for intentional (A/A)).

★ 4.28 與 2009 年比較，在日常生活中受傷的個案數字，不論是故意、非故意或自我傷害，都有明顯的下降（非故意下跌 13%；自我傷害下跌 37% 及故意下跌 53%）。

Table 23: Injuries by intention and activity, 2009 and 2010

表二十三：按傷害動機及活動劃分的個案數字，2009 及 2010 年

活動 Activity	個案 Case %	非故意 Unintentional		自我傷害 Self- Harm		故意 Intentional (A/A)	
		2009	2010	2009	2010	2009	2010
		No.	%	No.	%	No.	%
工作 Work	No. %	3,955 25.7	4,757 24.9	16 12.2	4 2.7	151 14.0	195 18.0
運動 Sports	No. %	1,423 9.3	1,508 7.9	5 3.8	0 0.0	20 1.9	4 0.4
行程途中 Travel	No. %	3,611 23.5	4,247 22.3	17 13.0	11 7.4	139 12.9	169 15.6
日常生活 Vital activity	No. %	3,925 25.5	3,434 18.0	35 26.7	22 14.9	333 30.8	157 14.5
無薪工作 Unpaid work	No. %	241 1.6	360 1.9	1 0.8	7 4.7	9 0.8	16 1.5

★ 4.29 Analysed intention by traumatic type, the percentages of unintentional injuries were higher for domestic (43%), followed by industrial (26%). No injury was reported for self-harm by major traumatic type. For intentional injuries, majority was due to common assault (74%).

★ 4.29 按受傷動機及創傷類型分析，非故意受傷的個案大多是家居意外 (43%)，其次是工業意外 (26%)。沒有錄得因自我傷害而受傷的個案。而故意受傷的個案中，普通襲擊佔大多數 (74%)。

★ 4.30 Comparing 2010 with 2009, intentional injuries traumatized by common assault dropped by 3% while those by domestic increased by 33%.

★ 4.30 2010 年與 2009 年比較，故意受傷類別中，屬故意受傷的類別中，普通襲擊而受傷下跌了 3%，而家居受傷的卻上升了 33%。

Table 24: Injuries by intention and traumatic type, 2009 and 2010

表二十四：2009 及 2010 年按傷害動機及創傷類別劃分的個案

創傷類型 Traumatic type	個案 Case %	非故意 Unintentional		自我傷害 Self- Harm		故意 Intentional (A/A)	
		2009	2010	2009	2010	2009	2010
		No.	%	No.	%	No.	%
普通襲擊 Common assault	No. %	69 0.5	93 0.6	- -	- -	740 77.5	717 73.8
工業 Industrial	No. %	3,343 25.8	4,128 25.8	11 10.0	- -	37 3.9	40 4.1
交通 Traffic	No. %	1,059 8.2	1,204 7.5	2 1.8	- -	1 0.1	- -
家居 Domestic	No. %	5,341 41.2	6,828 42.6	25 22.7	- -	33 3.5	45 4.6
運動 Sports	No. %	1,086 8.4	1,271 7.9	4 3.6	- -	2 0.2	2 0.2

Analyses by Severity

★ 4.31 Severity of injuries was classified by Minor, Moderate and Serious. Of the injuries happened in 2010, about 91% were minor, slightly less than 5% were moderate and serious respectively. Among different levels of severity, the percentages were higher for fall (41% were minor, 68% moderate and 59% serious). Next was other blunt force (24% were minor, 16% moderate and 18% serious). Of the serious injuries, fall was the top mechanism (59%), followed by other blunt force (18%). Traffic injury was the third largest activity in serious cases (12%), and about 10% were serious, the highest ratio of serious injuries in all types.

★ 4.32 Compared to 2009, serious injuries due to fall increased largely by 57% and serious traffic injuries increased by 24%. On the other hand, moderate injuries due to other blunt force decreased by 19%.

按受傷嚴重程度分析

★ 4.31 受傷嚴重程度可分三級：輕微、中等和嚴重。發生在 2010 年的受傷個案當中，輕微的佔大約 91%；中等及嚴重的分別各佔略少於 5%。在各不同嚴重程度的個案中，跌倒受傷所佔的百分比比較高（輕微的佔 41%；中等的佔 68%；嚴重的佔 59%）；其次是撞傷（輕微的佔 24%；中等的佔 16%；嚴重的佔 18%）。在嚴重的個案中，跌倒受傷是最多的途徑（59%），接著是撞傷（18%），交通意外受傷是嚴重受傷類別中排最高第三位（12%），而且，大約 10% 屬嚴重受傷，是眾多傷害中比例最高的。

★ 4.32 與 2009 年比較，嚴重個案中，跌倒受傷大幅增加了 57%，而嚴重交通意外受傷的亦增加了 24%。另一方面，屬中等程度受傷的個案中，撞傷下降了 19%。

Table 25: Injuries by severity and causes
表二十五：按傷害的嚴重性及成因劃分的個案數字

個案 Causes		輕微 Minor	中等 Moderate	嚴重 Serious	合共 Total
交通意外受傷 Traffic injury	Case	1,159	58	129	1,346
	%	5.7 (5.3)	5.4 (4.4)	12.3 (14.8)	6.0
跌倒受傷 Fall	Case	8,259	725	623	9,607
	%	40.8 (37.5)	67.9 (67.3)	59.2 (56.5)	43.0
撞傷 Other blunt force	Case	4,861	171	190	5,222
	%	24.0 (23.0)	16.0 (23.2)	18.0 (18.3)	23.4
割傷 Stab/cut	Case	1,546	13	2	1,561
	%	7.6 (8.0)	1.2 (1.3)	0.2 (0.3)	7.0
搬重物受傷 Lifting	Case	482	2	21	505
	%	2.4 (2.3)	0.2 (0.6)	2.0 (1.1)	2.3
合共 Total	Case	20,218	1,068	1,053	22,339
	%	100.0	100.0	100.0	100.0

註：括號內的數字為 2009 年的百分比。
Note: Figures in brackets denote percentages in 2009.

★ 4.33 Analysed by place of injuries, the percentages of injuries were higher for home across all severity (30% were minor, 38% moderate and 21% serious), followed by highway/street (17% for minor, 22% for moderate and 28% serious). Of the injuries happened on highway/street, more than 7% were serious. 3% of injuries occurred at home were also serious. Percentages of serious injuries were lower for all major locations as compared to 2009.

★ 4.33 按受傷發生地點分析，家居意外所佔的百分率較高（30% 屬輕微；38% 屬中等及 21% 屬嚴重）；其次是公路/街道的意外（17% 屬輕微；22% 屬中等及 28% 屬嚴重）。在公路/街道上的傷害，超過 7% 屬嚴重傷害；在家居發生的傷害亦有 3% 屬嚴重傷害。屬嚴重個案所發生的主要地點的百分比都較 2009 年低。

Table 26: Injuries by severity and place
表二十六：按傷害的嚴重性及發生地點劃分的個案數字

地點 Place		輕微 Minor	中等 Moderate	嚴重 Serious	合共 Total
家居 Home	Case	6,141	410	221	6,772
	%	30.4 (32.5)	38.4 (37.3)	21.0 (26.0)	30.3
學校 School	Case	637	37	23	697
	%	3.2 (3.2)	3.5 (4.0)	2.2 (3.1)	3.1
公路/街道 Highway/street	Case	3,511	235	299	4,045
	%	17.4 (16.8)	22.0 (20.8)	28.4 (30.4)	18.1
安老院 Old age home	Case	609	106	39	754
	%	3.0 (3.0)	9.9 (11.0)	3.7 (4.7)	3.4
工廠/工場 Factory/ workshop	Case	1,264	34	39	1,337
	%	6.3 (8.0)	3.2 (5.3)	3.7 (4.1)	6.0
遊樂場 Playground	Case	1,044	40	51	1,135
	%	5.2 (6.2)	3.7 (4.4)	4.8 (6.1)	5.1
機場 Airport	Case	596	30	38	664
	%	2.9 (2.9)	2.8 (4.0)	3.6 (3.8)	3.0
合共 Total	Case	20,218	1,068	1,053	22,339
	%	100.0	100.0	100.0	100.0

註：括號內的數字為 2009 年的百分比。
Note: Figures in brackets denote percentages in 2009.

★ 4.34 Analysed by activity, 25% and 21% of injuries were serious when travelling and at work respectively. In addition, 31% of travelling injuries were moderately serious.

★ 4.34 在行程途中及工作中受傷的個案，分別有 25% 及 21% 屬嚴重，此外，在行程途中受傷的，屬中等嚴重程度的有 31%。

Table 27: Injuries by severity and activity

表二十七：按傷害發生時的活動及嚴重程度劃分的個案數字

活動 Activity		輕微 Minor	中等 Moderate	嚴重 Serious	合共 Total
工作 Work	Case	5,042	136	216	5,394
	%	24.9 (24.3)	12.7 (16.6)	20.5 (22.1)	24.1
運動 Sport	Case	1,500	41	74	1,615
	%	7.4 (8.5)	3.8 (4.2)	7.0 (7.2)	7.2
行程途中 Travelling	Case	4,020	326	264	4,610
	%	19.9 (19.9)	30.5 (36.9)	25.1 (30.1)	20.6
日常生活 Vital activity	Case	3,431	205	103	3,739
	%	17.0 (25.4)	19.2 (13.3)	9.8 (15.2)	16.7
合共 Total	Case	20,218	1,068	1,053	22,339
	%	100.0	100.0	100.0	100.0

註：括號內的數字為 2009 年的百分比。

Note: Figures in brackets denote percentages in 2009.

★ 4.35 Analysed by traumatic type, about 31% of serious injuries were traumatized at home, 16% at industrial and 12% at traffic. 4% of the injuries traumatized at home (321 cases or 31%), and 9% at traffic were serious. Of those moderate cases, large portion of injuries were traumatized at home (45%). The percentages of injuries at home decreased for all severity type, but still very serious. It is worth noting that compared to 2009, serious injuries traumatized at home increased by 62%, followed by industrial (55%), sports (36%), assaults (31%) and traffic (28%), though the relative terms, percentage proportions depicted decreases.

★ 4.35 按創傷類型分析，屬嚴重受傷的，家居意外佔大約 31%；工業意外佔 16% 及交通意外佔 12%。4% 是家居意外及 9% 是交通意外屬嚴重程度。屬中等程度的傷害的，家居佔大部分（45%）。雖然各種嚴重程度的家居意外受傷都下跌，但仍然是非常嚴重。值得關注的是，雖然在相對項中顯示百分比比較 2009 年減少，屬嚴重程度的家居意外個案上升了 62%，其次是工業意外（+55%）、運動意外（+36%）、普通襲擊（+31%）及交通意外（+28%）。

Table 28: Injuries by severity and traumatic type

表二十八：按傷害的嚴重程度及創傷類型劃分的個案數字

創傷類型 Traumatic	個案 Cases %	輕微 Minor	中等 Moderate	嚴重 Serious	合共 Total
普通襲擊 Common assault	Case	737	43	55	835
	%	3.6 (5.2)	4.0 (8.7)	5.2 (7.4)	3.7
交通 Traffic	Case	1,210	61	127	1,398
	%	6.0 (7.2)	5.7 (6.1)	12.1 (17.4)	6.3
工業 Industrial	Case	4,341	97	171	4,609
	%	21.5 (25.0)	9.1 (12.9)	16.2 (19.3)	20.6
家居 Domestic	Case	6,740	477	321	7,538
	%	33.3 (37.9)	44.7 (54.9)	30.5 (34.8)	33.7
運動 Sports	Case	1,289	30	60	1,379
	%	6.4 (8.0)	2.8 (2.6)	5.7 (7.7)	6.2
合共 Total	Case	17,113	854	893	18,860
	%	100.0	100.0	100.0	100.0

註：括號內的數字為 2009 年的百分比。

Note: Figures in brackets denote percentages in 2009.

Analyses by Time

★ 4.36 Analyzed mechanism by time, higher percentages of various injuries that occurred around the clock were related to fall (42.3% - 45.8%) and other blunt force (20.0% - 26.0%).

Table 29: Injuries by activity and time

表二十九：按意外發生的時間分析活動

活動 Activity	年份 Year	意外發生時間 Accident time				合共 Total
		06:00-11:59	12:00-17:59	18:00-23:59	00:00-05:59	
跌倒 Fall	2009	41.5% (4725)	40.8% (5073)	42.4% (3274)	44.9% (1562)	41.8% (14634)
	2010	43.1% (3060)	42.7% (3294)	42.3% (2152)	45.8% (1014)	43.0% (9520)
其他撞傷 Other Blunt force	2009	19.7% (2240)	23.3% (23.3%)	27.0% (2084)	26.4% (917)	23.2% (8138)
	2010	20.0% (1421)	24.6% (1896)	26.0% (1320)	24.6% (544)	23.4% (5181)

★ 4.37 Analyzed places of occurrence by time, higher percentages of various injuries that occurred around the clock happened at home (25.8% - 34.0%) and on highway/street (16.6% - 25.5%). The ranges in this year were smaller than that in last year (25.3% - 45.2% and 12.6% - 29.8% respectively).

★ 4.38 Analyzed activities by time, higher percentages of various activities that occurred around the clock were related to work (19.2% - 26.4%), travel (19.1% - 23.1%) and vital activity (12.4% - 22.7%). The ranges of this year were smaller than that in last year (15.0% - 28.4%, 13.2% - 36.1% and 8.6% - 36.7% respectively).

★ 4.39 Analyzed traumatic types by time, higher percentages of various traumatic types around the clock were related to domestics (38.0% - 44.3%) and industrial (18.0% - 27.4%) that the ranges of this year were smaller than the last year (34.2% - 47.5% and 13.1% - 28.5% respectively).

Analyses by Holidays

★ 4.40 Analyzed mechanism by holidays, higher percentages of injuries which occurred on holidays were related to fall (44.9%), other blunt force (19.2%) and traffic injury (6.8%) that were quite similar to last year (42.5%, 19.5% and 5.9% respectively).

★ 4.41 Analyzed places of occurrence by holidays, higher percentages of injuries which occurred on holidays happened at home (36.0%), on highway/street (18.8%) and in playground (6.8%) that were higher than those of last year (33.8%, 18.4% and 6.5% respectively).

按受傷時間分析

★ 4.36 以受傷時間為途徑作分析，在不同的傷害中，跌倒受傷 (42.3% - 45.8%) 和撞傷 (20.0% - 26.0%) 最經常發生。

★ 4.37 以受傷時間分析傷害發生地點，家居 (25.8% - 34.0%) 和公路 / 街道 (16.6% - 25.5%) 是最經常發生傷害的地點。今年的範圍較去年收窄了 (分別是 25.3% - 45.2% 及 12.6% - 29.8%)。

★ 4.38 以受傷時間分析受傷時活動，工作 (19.2% - 26.4%)、行程途中 (19.1% - 23.1%) 和日常生活 (12.4% - 22.7%) 是最經常的活動。今年的範圍較 2009 年收窄了 (分別是 15.0% - 28.4%, 13.2% - 36.1% 及 8.6% - 36.7%)。

★ 4.39 以受傷時間分析創傷類型，家居意外 (38.0% - 44.3%) 和工業意外 (18.0% - 27.4%) 是最經常的創傷類型。今年的範圍較去年收窄了 (分別是 34.2% - 47.5% 及 13.1% - 28.5%)。

按受傷與假日的分析

★ 4.40 以受傷與假日分析傷害形成的途徑，跌倒受傷 (44.9%)、撞傷 (19.2%) 及交通意外 (6.8%) 在假期間造成受傷的百分比比較高，這與去年的百分比相似 (分別是 42.5%、19.5% 及 5.9%)。

★ 4.41 以假日受傷與發生地點作分析，家中 (36.0%)、公路 / 街道上 (18.8%) 及遊樂場裡 (6.8%) 在假期間造成受傷的百分比比較高，且高於去年的百分比 (分別是 33.8%、18.4% 及 6.5%)。

★ 4.42 Analyzed activities by holidays, higher percentages of injuries which occurred on holidays were related to vital activity (22.3%), travel (21.5%) and work (17.6%) that were similar to those of last year (26.6%, 22.1% and 19.2%).

★ 4.43 Analyzed traumatic types by holidays, higher percentages of injuries which occurred on holidays were related to domestics (44.7%), industrial (17.2%) and sports (8.8%), similar to those of last year (41.2%, 18.5% and 9.4%).

Analyses by Seasons

★ 4.44 Analyzed mechanism by seasons, higher percentages of injuries which occurred whole year round were related to fall (41.6% - 44.6%) and other blunt force (18.3%-25.7%).

Table 30: Fall and blunt force injuries analysed by season

表三十：跌倒及撞傷與意外發生的季節分析

活動 Activity	年份 Year	季節 Seasons				合共 Total
		第一季 1 st quarter	第二季 2 nd quarter	第三季 3 rd quarter	第四季 4 th quarter	
跌倒 Fall	2009	44.3% (4,408)	41.5% (3,809)	40.4% (3,329)	40.4% (3088)	41.8% (14634)
	2010	44.6% (2,351)	41.9% (2,267)	41.6% (2,404)	44.1% (2,498)	43.0% (9520)
其他撞傷 Other Blunt force	2009	21.2% (2,107)	25.7% (2,364)	25.4% (2,092)	20.6% (1,575)	23.2% (8,138)
	2010	18.3% (963)	24.7% (1,336)	24.7% (1,423)	25.7% (1,459)	23.4% (5,181)

★ 4.45 Analyzed places of occurrence by seasons, higher percentages of injuries which occurred whole year round happened at home (25.1% - 40.0%), wider than preceding year (26.9% - 37.5%); and on highway/street (15.5% - 19.4%) which was smaller than last year (14.2% - 19.8%).

★ 4.46 Analyzed activities by seasons, higher percentages of injuries which occurred whole year round were related to work (20.7% - 26.7%) and travel (20.3% - 21.3%) that the ranges of 2010 were smaller than the previous year (26.9% - 37.5% and 17.7%-26.1% respectively).

★ 4.47 Analyzed traumatic types by seasons, higher percentages of injuries which occurred whole year round were related to domestics (38.1% - 41.3%) and industrial (22.2% - 26.6%) that the ranges of 2010 were smaller than the previous year (35.1% - 42.1% and 21.8% - 28.6% respectively).

★ 4.42 以假日受傷的活動分析，日常生活 (22.3%)、行程途中 (21.5%) 和工作 (17.6%) 在假期間造成受傷的百分比比較高。這與去年的百分比相似 (分別是 26.6%、22.1% 及 19.2%)。

★ 4.43 以假日受傷的創傷類型作分析，家居意外 (44.7%)、工業意外 (17.2%) 和運動 (8.8%) 在假期間造成受傷的百分比比較高。這與去年的百分比相似 (分別是 41.2%、18.5% 及 9.4%)。

按受傷與季節分析

★ 4.44 以季節來分析傷害途徑，跌倒受傷 (41.6% - 44.6%) 和撞傷 (18.3% - 25.7%) 整年的百分比都較高。

★ 4.45 以季節來分析發生地點，在家中受傷 (25.1% - 40.0%) 的，範圍較去年闊 (26.9% - 37.5%)；在公路 / 街道上受傷的 (15.5% - 19.4%)，範圍則較去年窄 (14.2% - 19.8%)，兩者受傷的百分比整年都比較高。

★ 4.46 以季節來分析受傷時活動，工作受傷 (20.7% - 26.7%) 和行程途中 (20.3% - 21.3%) 受傷的百分比整年都較高，範圍則較去年窄 (分別是 26.9% - 37.5% 及 17.7% - 26.1%)。

★ 4.47 以季節來分析創傷類型，因家居意外 (38.1% - 41.3%) 和工業意外 (22.2% - 26.6%) 而受傷的百分比整年都較高，範圍較去年窄 (分別是 35.1% - 42.1% 及 21.8% - 28.6%)。

Analyses by Crude Rate

★ 4.48 Crude rate is the number of events over the population per year. Analyzed the crude rate by mechanism, the rate for fall was particular high (75.0%) and traffic injury (12.5%) that were higher than those of last year (74.1% and 8.2% respectively).

★ 4.49 Analyzed by places of injury, the crude rates were higher for home (52.8%), highway/street (16.7%), and old aged home (8.3%). It is worth noting that the percentage for old aged home of this year is lower than last year (14.1%).

★ 4.50 Analyzed by activities, the crude rates were higher for vital activity (30.6%) and travel (26.4%), lower than those of last year (35.3% and 40.0% respectively).

★ 4.51 Analyzed by traumatic types, the crude rates were higher for domestics (59.6%) and traffic (17.3%), higher than those of last year (58.2% and 10.4% respectively).

Analyses by Years of Potential Life Lost (YPLL)

★ 4.52 Years of Potential Life Lost (YPLL) measures for a group of individuals the total number of years these people would have additionally lived up to some point in the future, would they not have died from a particular cause of death.⁴

★ 4.53 Measured with mechanism, the YPLL were longer for fall (210 years) and traffic injury (119 years) that were lower than those of the last year (278 years and 171 years respectively).

★ 4.54 Analyzed by places of injury, YPLL were longer for home (112 years) and highway/street (110 years) injuries, that were lower than those of the last year (181 years and 142 years respectively).

★ 4.55 Analyzed by activities, YPLL were longer for travel (129 years) and vital activity (62 years) that were lower than those of the last year (167 years and 194 years respectively).

★ 4.56 Analyzed by traumatic type, YPLL were longer for self-harm (150 years) and traffic (90 years) which was lower than that of last year (171 years).

按受傷率的分析

★ 4.48 受傷率是每年的事故除以該年人口。以傷害形成的途徑分析受傷率，跌倒受傷的比率特別高(75%)，接著是交通意外(12.5%)，兩者皆高於去年(分別是74.1%及8.2%)。

★ 4.49 以受傷地點分析，在家中(52.8%)、公路/街道(16.7%)及安老院(8.3%)的受傷率較高。值得關注的是，今年安老院的受傷率低於去年的受傷率(14.1%)。

★ 4.50 以受傷時活動分析，日常生活(30.6%)和行程途中(26.4%)的受傷率較高，這年的受傷率較去年低(分別是35.3%及40.0%)。

★ 4.51 以創傷類型分析，家居意外(59.6%)和交通意外(17.3%)的受傷率較高，這年的受傷率較去年高(分別是58.2%及10.4%)。

按潛在壽命損失年數分析 (YPLL)

★ 4.52 潛在壽命損失年數是用來量度一群人將來能活多某個額外時刻的總年數，不是因某些特定原因死亡⁴。

★ 4.53 以傷害形成的途徑計算，跌倒受傷(210年)和交通意外受傷(119年)的潛在壽命年數較長，較去年的(分別278年及171年)短。

★ 4.54 以受傷地點計算，在家中(112年)和公路/街道(110年)的潛在壽命年數較長，較去年的(分別181年及142年)短。

★ 4.55 以受傷時活動計算，行程途中(129年)和日常生活(62年)的潛在壽命年數較長，較去年的(分別167年及194年)短。

★ 4.56 以創傷類型分析，自我傷害(150年)和交通意外受傷(90年)的潛在壽命年數較長，較去年的(171年)短。

★ 4.57 Among 72 mortality cases out of 22,339 cases, the YPLL was 401 years which was lower than that of last year (507 years).

★ 4.57 在22,339宗受傷個案中，有72宗死亡個案，潛在壽命年數為401年，較去年的(507年)短。

Costs for General Wards

★ 4.58 Among the 28 districts in Kwai Tsing, the average costs for general wards were relatively higher for Cheung Hong (HK\$48,458), Tsing Yi South (HK\$45,956), Upper Tai Wo Hau (HK\$39,600) and Tai Pak Tin (HK\$37,243).⁵

普通病房收費

★ 4.58 在葵青的28個區中，普通病房平均費用以長康(48,458元)、青衣南(45,956元)、上大窩口(39,600元)和大白田(37,243元)較高。⁵

Table 31: Cost of general wards by location in Kwai Tsing (\$)

表三十一：按區劃分的普通病房平均費用(港元)

地點 Location	有效 數據 Valid N	平均值 Average	最多 Maximum	中位數 Median	標準差 Standard Deviation
長康 * Cheung Hong*	19	48,458	188,100	23,100	54,957
青衣南 * Tsing Yi South*	27	45,956	303,600	13,200	76,257
上大窩口 * Upper Tai Wo Hau*	5	39,600	125,400	13,200	51,389
大白田 Tai Pak Tin	70	37,243	1,042,800	13,200	124,135
荔華 Lai Wah*	27	36,422	171,600	16,500	44,080
長青 Cheung Ching	35	32,717	115,500	23,100	34,186
安蔭 On Yam	60	32,065	155,100	14,850	38,995
安浩 * On Ho*	10	31,020	66,000	24,750	23,137
石籬 Shek Lei	64	30,783	211,200	19,800	35,862
華荔 Wah Lai	52	29,890	237,600	16,500	46,872
葵芳 Kwai Fong	81	29,252	194,700	16,500	35,299
翠怡 Greenfield	50	28,776	148,500	14,850	34,411
葵盛東邨 Kwai Shing East Estate	54	28,600	161,700	11,550	34,628
石蔭 Shek Yam	55	28,320	227,700	16,500	38,045
新石籬 Shek Lei Extension	43	27,705	174,900	9,900	36,237
葵盛西邨 Kwai Shing West Estate	62	27,571	207,900	13,200	39,393

⁴ Discounting and mortality adjusting Years of Potential Life Lost (YPLL) - <http://www.quantitativeskills.com/sisa/papers/paper6.htm>

⁴ 扣除及調整死亡潛在壽命年數 (YPLL)- <http://www.quantitativeskills.com/sisa/papers/paper6.htm>

⁵ Valid count of 1 or below was not presented in the tables and readers should carefully interpret the findings as the valid count is small.

⁵ 有效數據是1或以下的，並沒有在表中顯示，由於有效數據較少，讀者應小心理解數據結果。

地點 Location	有效 數據 Valid N	平均值 Average	最多 Maximum	中位數 Median	標準差 Standard Deviation
青發 Ching Fat	37	27,559	188,100	9,900	39,898
祖堯 Cho Yiu	71	25,377	148,500	13,200	29,244
荔景 Lai King	82	25,032	287,100	9,900	46,368
葵興 Kwai Hing	38	25,011	122,100	14,850	26,362
長安* Cheung On*	27	23,222	89,100	13,200	23,054
葵涌邨* Kwai Chung Estate*	11	23,100	82,500	13,200	26,026
盛康 Shing Hong	42	23,021	112,200	9,900	26,415
長亨 Cheung Hang	40	22,688	181,500	9,900	35,481
青衣邨 Tsing Yi Estate	41	21,973	118,800	13,200	25,664
興芳 Hing Fong	134	20,514	181,500	9,900	24,409
下大窩口* Lower Tai Wo Hau*	2	19,800	36,300	19,800	23,335
偉海 Wai Hoi	38	17,716	145,200	6,600	30,665

* 有效數據較少，讀者應小心理解數據結果。

註：各分區的普通病房的最低收費為 3,300 元。

* Readers should carefully interpret the findings as the valid count is small.

The minimum cost of general wards in all locations was \$3300.

Costs for Intensive Wards

★ 4.59 The average costs for intensive wards were relatively higher for Kwai Shing West Estate* (HK\$236,300), Cho Yiu* (HK\$145,950) and Lai King* (HK\$143,633).⁶

加護病房收費

★ 4.59 葵盛西邨 (236,300 元)、祖堯 (145,950 元) 和荔景 (143,633 元) 的加護病房平均收費較高。⁶

Table 32: Cost of intensive wards by location in Kwai Tsing (\$)

表三十二：葵青各分區加護病房收費（港元）

地點 Location	有效數據 Valid N	最多 Maximum	平均值 Average	標準差 Standard Deviation
葵盛西邨* Kwai Shing West Estate*	1	236,300	236,300	--
祖堯* Cho Yiu*	2	278,000	145,950	186,747
荔景* Lai King*	3	319,700	143,633	158,077
偉海* Wai Hoi*	2	166,800	97,300	98,288
青衣南* Tsing Yi South*	5	222,400	91,740	87,691
葵盛東邨* Kwai Shing East Estate*	2	97,300	62,550	49,144
大白田* Tai Pak Tin*	3	97,300	46,333	44,682
翠怡* Greenfield*	5	55,600	36,140	21,080
安蔭* On Yam*	1	27800	27800	--
安浩* On Ho*	2	27800	27800	0
長康* Cheung Hong*	1	27800	27800	--
盛康* Shing Hong*	1	27800	27800	--
葵興* Kwai Hing*	2	13900	13900	0
石蔭* Shek Yam*	1	13900	13900	--
新石籬* Shek Lei Extension*	1	13900	13900	--
葵芳* Kwai Fong*	1	13900	13900	--
青衣邨* Tsing Yi Estate*	1	13900	13900	--
青發* Ching Fat*	1	13900	13900	--

⁶ Readers should carefully interpret the findings as the valid count is small. ⁶ 由於有效數據較少，讀者應小心理解數據結果。

Analyses of Costs for General Wards

★ 4.60 In 2010, total cost of hospitalization in KT district accounted for HK\$40.39 million. Analysed by place of occurrence, mean cost of injuries was highest for those happened in old age homes (HK\$10,565). Though majority of injuries during vital activity were minor, the mean cost was highest (at HK\$10,955) among all activities, even higher than traffic injuries (HK\$6,937). Analysed by traumatic type, the mean cost for child abuse was highest, at HK\$25,120, followed by domestics, at HK\$6,549.

★ 4.61 The table below showed the cost for injuries by location (locations were shown in descending order according to mean cost). The average total cost (mean) for general wards plus intensive wards was relatively higher for Tai Pak Tin (HK\$10,727) and On Yam (HK\$10,131). Hing Fong costed over HK\$ 3.31 million for its 806 injuries cases. This was followed by Tai Pak Tin, Kwai Fong, Lai King and Cho Yiu. The maximum cost also occurred at Tak Pak Tin.

按普通病房收費的分析

★ 4.60 在 2010 年，葵青區住院的總收費為 4,039 萬港元。按傷害發生地點分析，傷者的平均收費以安老院最高 (10,565 元)。雖然絕大部分在日常生活中受傷的只屬輕微嚴重，但平均收費是眾多活動中最高 (10,955 元)，較交通意外受傷 (6,937 元) 還要高。按創傷類型分析，虐兒的平均收費最高，為 25,120 元；其次是家居意外，為 6,549 元。

★ 4.61 下表按不同分區地點顯示普通病房及加護病房的收費（根據平均收費以降序顯示錄得受傷個案的地點）。大白田 (10,727 元) 和安蔭 (10,131 元) 的普通病房及加護病房的平均總收費（平均值）相對較高。興芳於 806 宗受傷個案收費超過 331 萬港元，其次為大白田、葵芳、荔景及祖堯。而大白田錄得最多的收費。

Table 33 : Total cost of general wards and intensive wards by location

表三十三：按地點比較普通病房及加護病房的總收費

地點 Location	個案 數目 Cases	收費 (港元) Total cost (HKD)			
		最多 Maximum	平均值 Mean	標準差 Standard Deviation	總收費 (平均 × 個案) Total cost (mean * Cases)
大白田 Tai Pak Tin	260	1,043,500	10,727	66,175	2,789,000
安蔭 On Yam	204	155,800	10,131	25,621	2,066,700
石籬 Shek Lei	229	211,900	9,303	23,388	2,130,400
長康 Cheung Hong	114	188,800	8,776	28,463	1,000,500
新石籬 Shek Lei Extension	155	175,600	8,386	22,649	1,299,800
葵盛東邨 Kwai Shing East Estate	204	162,400	8,271	21,750	1,687,200
上大窩口* Upper Tai Wo Hau*	27	126,100	8,033	25,534	216,900
石蔭 Shek Yam	216	228,400	7,911	22,726	1,708,800
青發 Ching Fat	144	188,800	7,781	23,383	1,120,500
荔華 Lai Wah	146	172,300	7,436	23,447	1,085,600
長青 Cheung Ching	176	116,200	7,206	19,964	1,268,300

地點 Location	個案 數目 Cases	收費 (港元) Total cost (HKD)			
		最多 Maximum	平均值 Mean	標準差 Standard Deviation	總收費 (平均 × 個案) Total cost (mean * Cases)
翠怡 Greenfield	240	149,200	6,695	19,491	1,606,800
長安 Cheung On	106	89,800	6,615	15,328	701,200
華荔 Wah Lai	269	238,300	6,478	23,620	1,742,600
青衣南 Tsing Yi South	226	304,300	6,190	29,919	1,399,000
葵芳 Kwai Fong	449	195,400	5,977	18,690	2,683,700
盛康 Shing Hong	198	112,900	5,583	15,305	1,105,500
葵盛西邨 Kwai Shing West Estate	357	208,600	5,488	19,372	1,959,300
葵興 Kwai Hing	199	122,800	5,476	15,066	1,089,700
青衣邨 Tsing Yi Estate	198	119,500	5,250	14,609	1,039,500
長亨 Cheung Hang	203	182,200	5,170	18,025	1,049,600
安浩 On Ho	73	66,700	4,949	13,500	361,300
偉海 Wai Hoi	176	145,900	4,525	15,882	796,400
葵涌邨 Kwai Chung Estate	74	83,200	4,134	12,698	305,900
興芳 Hing Fong	806	182,200	4,111	12,524	3,313,100
祖堯 Cho Yiu	641	149,200	3,511	12,533	2,250,500
荔景 Lai King	733	287,800	3,500	17,328	2,565,700
下大窩口* Lower Tai Wo Hau*	17	37,000	3,029	8,790	51,500
Grand total					40,395,000

* 有效數據較少，讀者應小心理解數據結果。

註：各分區的中位數及最低收費為 700 元。

* Readers should carefully interpret the findings as the valid count is small.

Note: The median and the minimum cost of all cases in all locations were \$700.

5. Further Analyses

5. 進一步分析

★ 5.1 The following discussion focuses on frequently happened injuries, namely fall injuries, traffic injuries, work injuries, domestic violence and self-harm injuries⁷.

★ 5.1 以下集中討論經常發生的受傷，即跌倒、交通意外、工作、家庭暴力和自我傷害⁷所造成的受傷。

Fall Injuries

跌傷

★ 5.2 Of the 9,607 fall injuries, 52% happened to female and 48% to males. The corresponding percentages in 2009 were 53% and 47% respectively. Great majority of fall injuries were unintentional, at 94%, same as in 2009.

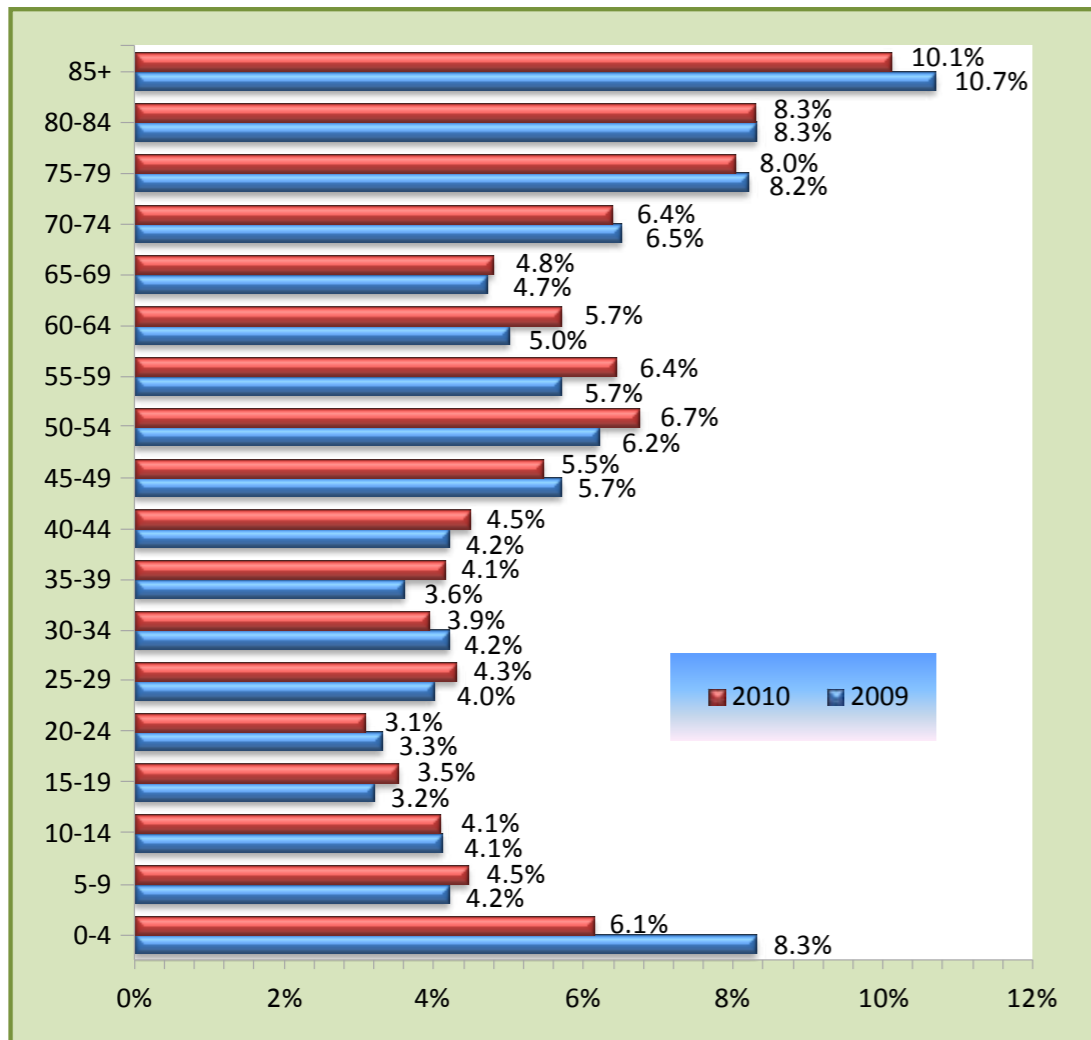
★ 5.2 在 9,607 宗跌傷個案中，52% 跌倒受傷的傷者是女性，48% 是男性。相對 2009 年的百分比分別為 53% 及 47%。絕大部份跌倒受傷都是非故意的，佔 94%，與 2009 年相同。

★ 5.3 The percentages of fall injuries for infants aged below 4 and the elderly aged 75 and above were higher (6% and 26% respectively). A slight improvement is depicted in the lower percentage shares compared to 2009.

★ 5.3 跌倒受傷個案中，四歲以下之嬰兒及 75 歲以上的長者較多（分別是 6% 和 26%），百分比比較 2009 年略低，顯示有輕微的改善。

Chart 6: Percentage distribution of fall injuries by age

圖六：跌倒受傷個案的年齡分佈

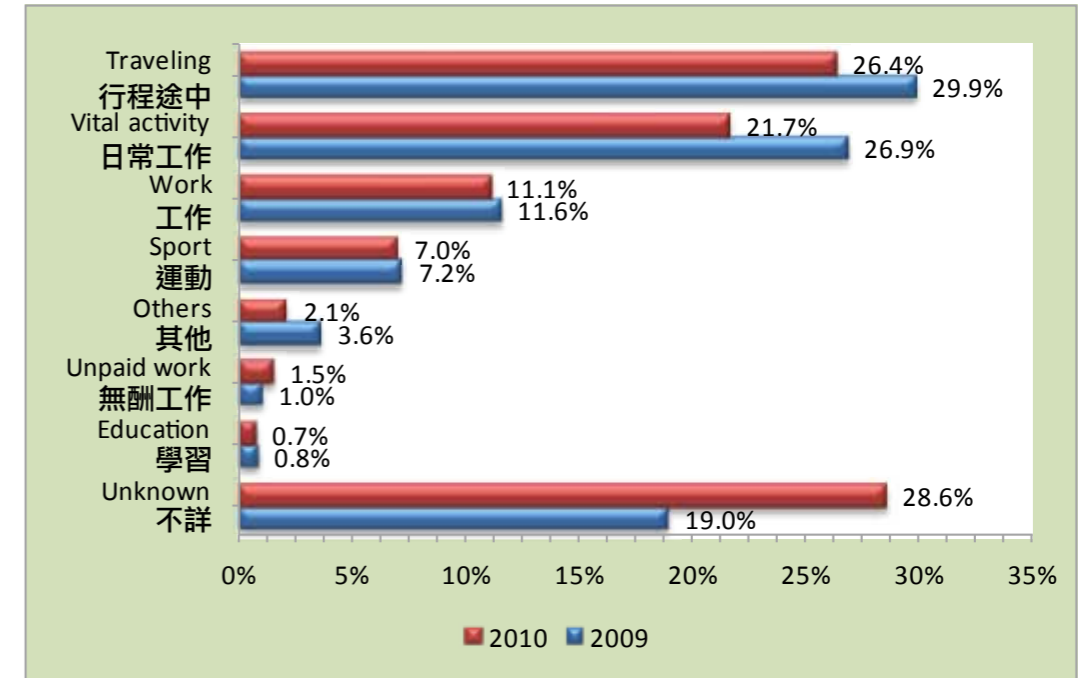


★ 5.4 Fall injuries occurred more often when travelling (26%), doing vital activities (22%) and at work (11%). The percentage shares were slightly lower than corresponding shares in 2009.

★ 5.4 跌倒受傷經常在行程途中 (26%)、日常生活 (22%) 及工作中 (11%) 發生，相對的百分比比較 2009 年略低。

Chart 7: Percentage distribution of fall injuries by activity

圖七：跌倒受傷時的活動分佈



⁷ Self-harm violence did not include poisoning.

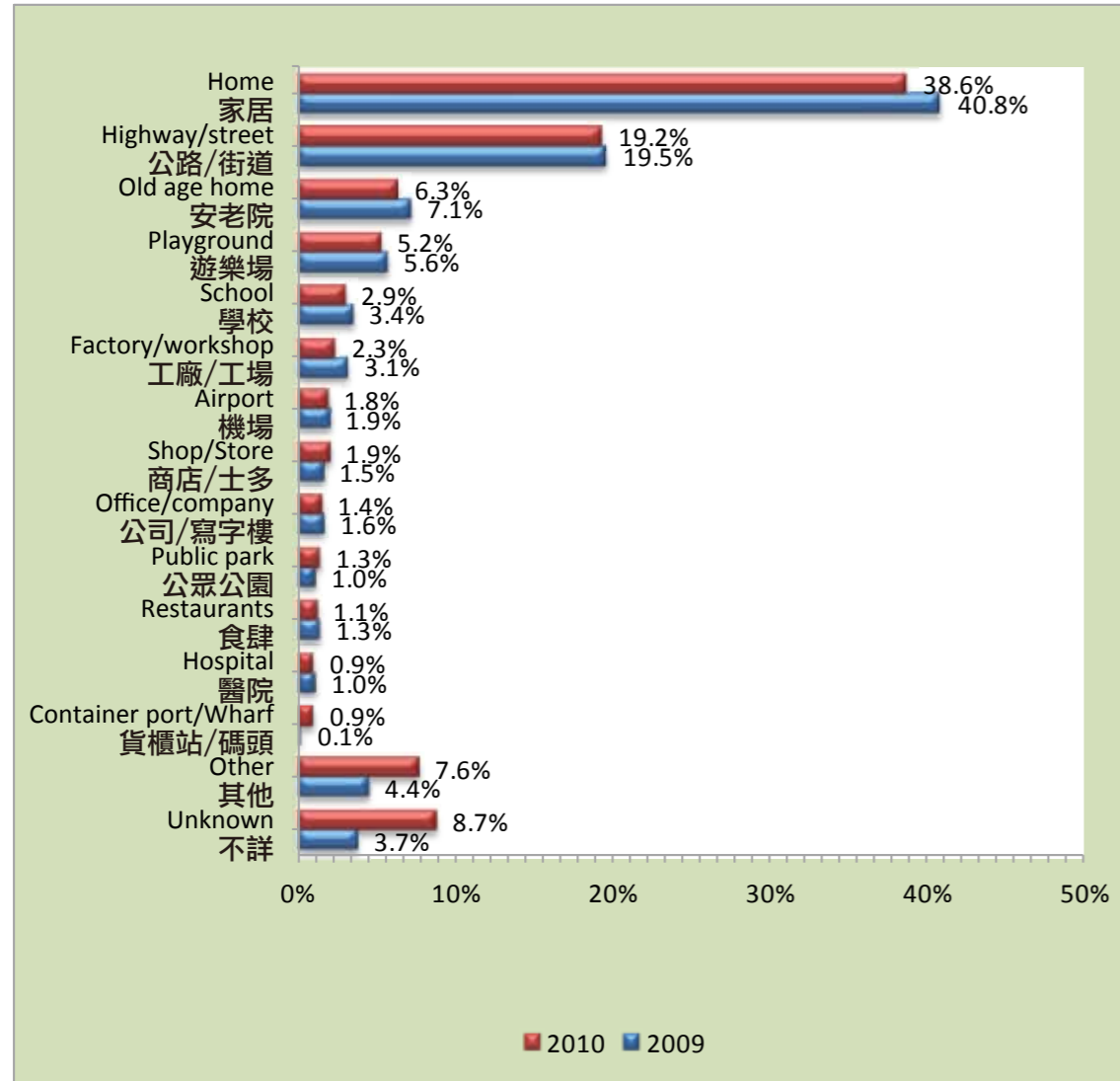
⁷ 自我傷害不包括中毒。

★ 5.5 39% and 41% of fall injuries occurred at home in 2010 and 2009 respectively. 19% of the fall injuries occurred on highway/street and 6% in old age home in 2010. The corresponding percentages for 2009 were 20% and 7%.

★ 5.5 在2010年及2009年，在家中發生的跌傷個案分別是39%和41%。在2010年，大約19%的受傷個案在公路/街道發生及6%在安老院發生，2009年的相對百分比是20%和7%。

Chart 8: Distribution of fall injuries by place of occurrence

圖八：跌倒受傷發生地點分佈

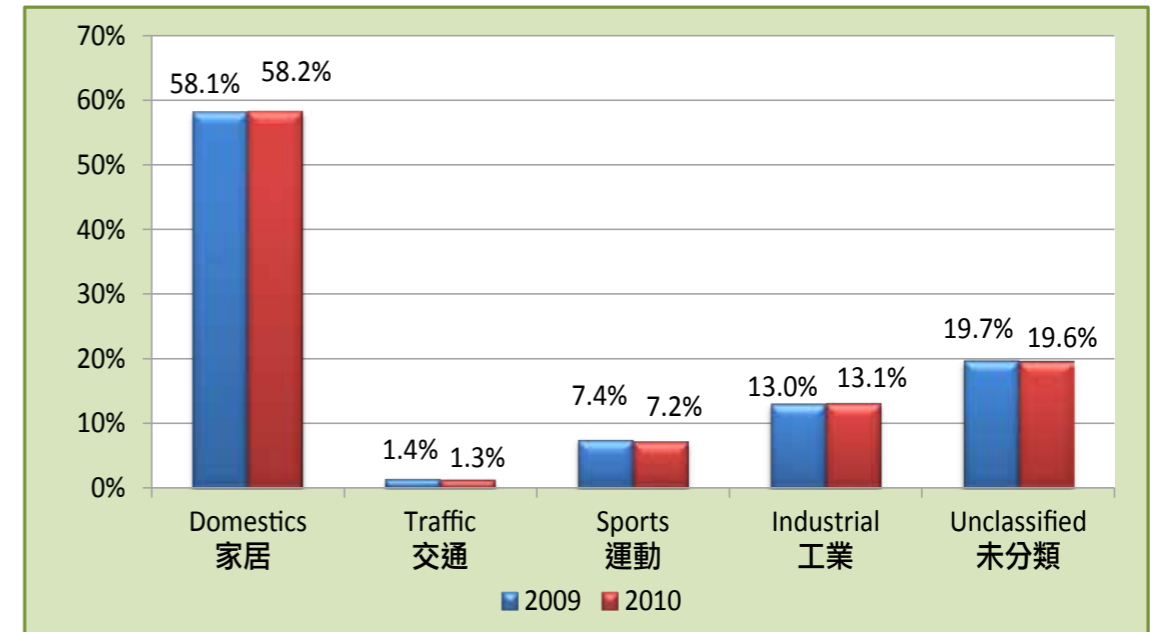


★ 5.6 In 2010, 58% of fall injuries resulted from domestic, 13% resulted from industrial operation and 7% from sports, similar to that in 2009.

★ 5.6 在2010年，58%跌倒受傷的個案是因家居意外所致、13%因工業意外、7%因運動，與2009年的情況相似。

Chart 9: Distribution of fall injuries by traumatic situation

圖九：跌倒受傷時創傷類型分佈



Traffic Injuries

★ 5.7 The majority of traffic injuries happened to males (69%) and about one-third (31%) to females. Majority (86%) of traffic injuries were caused accidentally, i.e. unintentional.

交通意外受傷

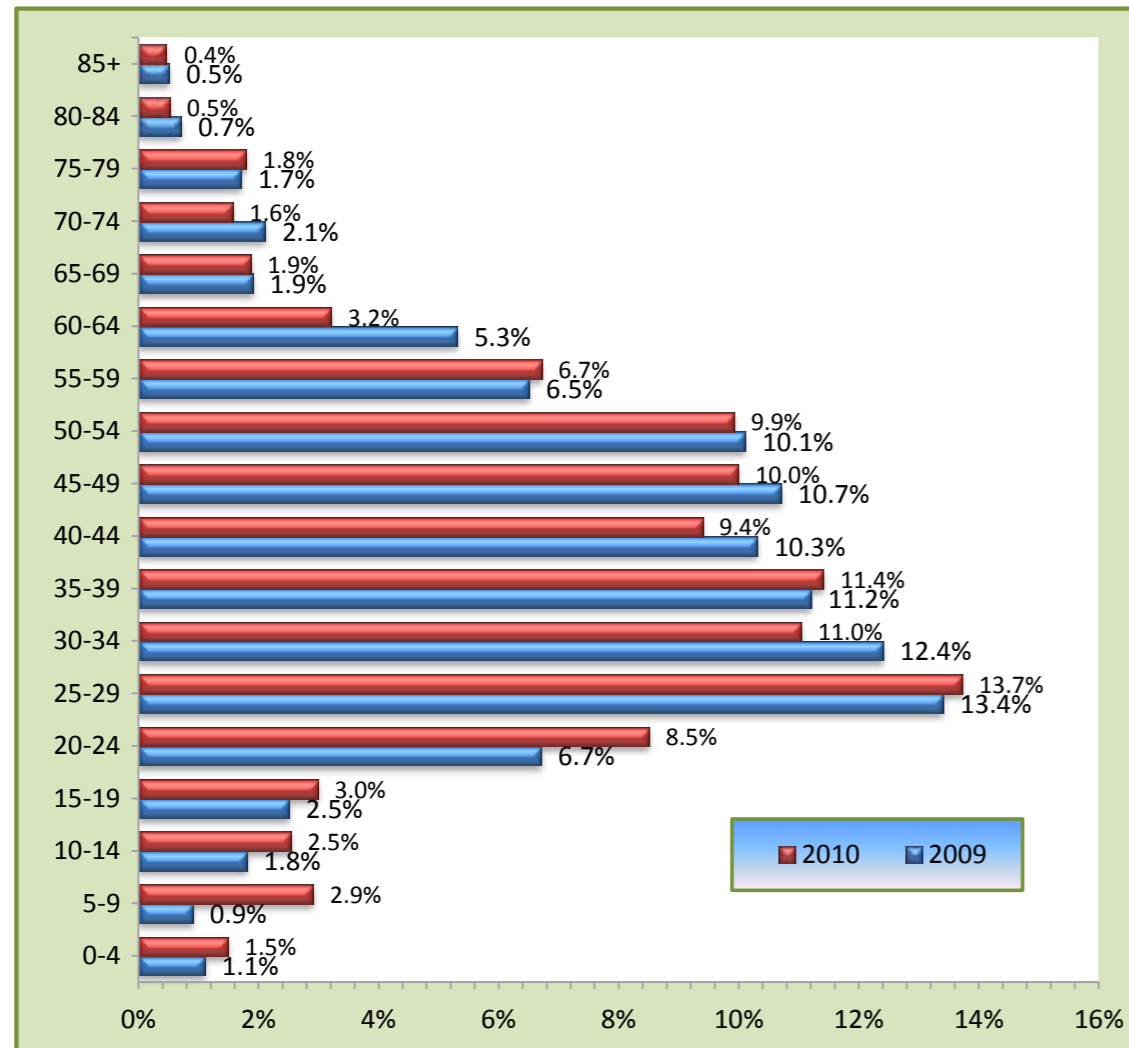
★ 5.7 交通意外受傷者大部分是男性(69%)，大約三分之一(31%)為女性。大部分(86%)交通受傷都是由于意外，即非故意的。

★ 5.8 Traffic injuries clustered at age groups 25-54. The percentages of some age groups were higher than those in preceding year, particularly age groups 5-9 and 20-24, both with an increase of about 2 percentage points.

★ 5.8 交通意外的傷者多集中在 25-54 歲，有些年齡組別的分比較去年高，尤其是 5-9 歲及 20-24 歲，兩者皆有 2 個百分點的升幅。

Chart 10: Distribution of traffic injuries by age

圖十：交通意外受傷者的年齡分佈

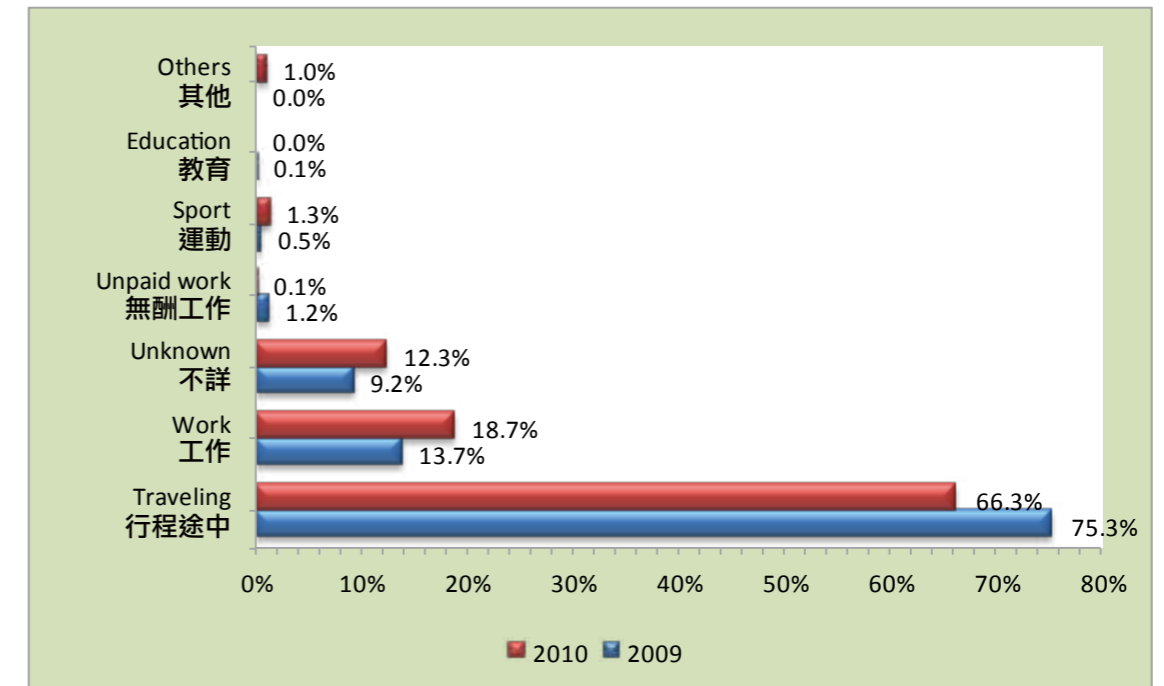


★ 5.9 Two-third (66%) of the traffic injuries happened during travelling and another 19% at work. Injuries happened during travelling decreased by 9 percentage points in 2010 over 2009. On the other hand, injuries happened during working increased from 14% in 2009 to 19% in 2010.

★ 5.9 三分之二 (66%) 的交通意外在行程途中發生，另 19% 在工作中發生。在行程途中受傷的，較 2009 年下降了 9 個百分點，另一方面，在工作中受傷的則由 2009 年的 14% 上升至 2010 年的 19%。

Chart 11: Distribution of traffic injuries by activity

圖十一：交通意外受傷時的活動分佈

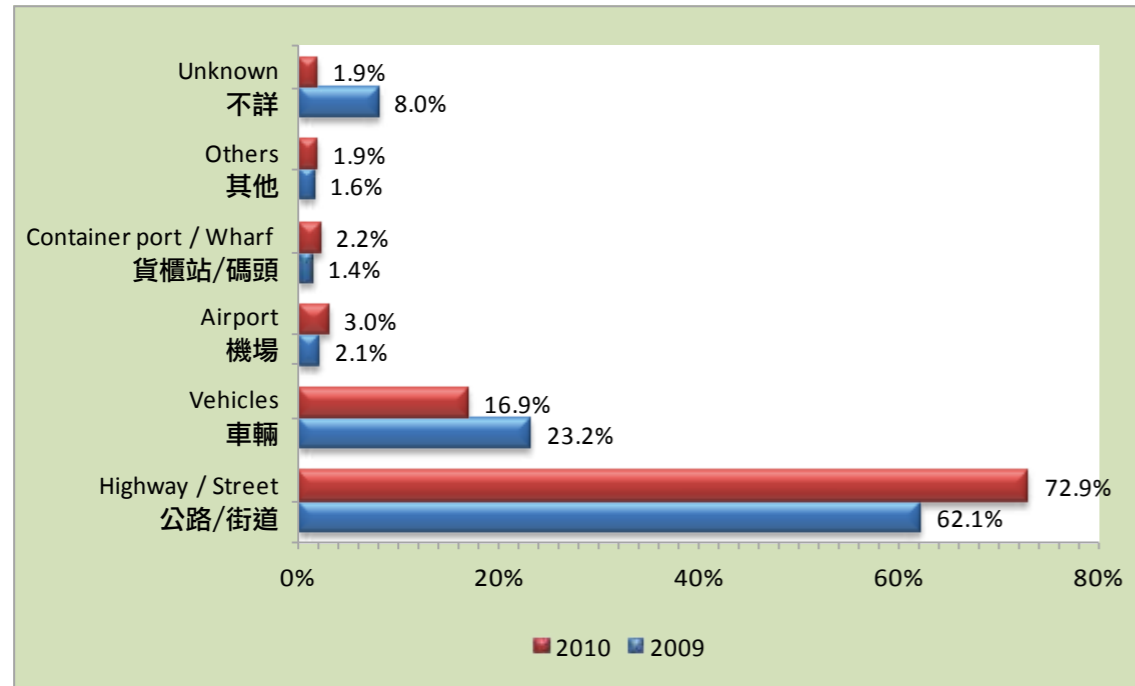


★ 5.10 Traffic injuries happened majorly on highway/street, with 73% of the total in 2010 and recorded an increase of 11 percentage points over 2009. Injuries in vehicles dropped from 23% to 17% in 2010 while that happened at airport increased by about 1 percentage point to 3% in the year.

★ 5.10 在 2010 年，交通意外主要發生在公路 / 街道，佔全年總數 73%，較 2009 年增加了 11 個百分點；發生在交通工具上的傷害由 23% 下降至 2010 年的 17%，而發生在機場的傷害卻增加 1 個百分點至今年的 3%。

Chart 12: Distribution of traffic injuries by place of occurrence

圖十二：交通意外的發生地點分佈



Work Injuries

★ 5.11 Work injuries happened to males more frequently than to females, with 74% to males and 26% to females in 2010. 88% of work injuries were unintentional.

工作受傷

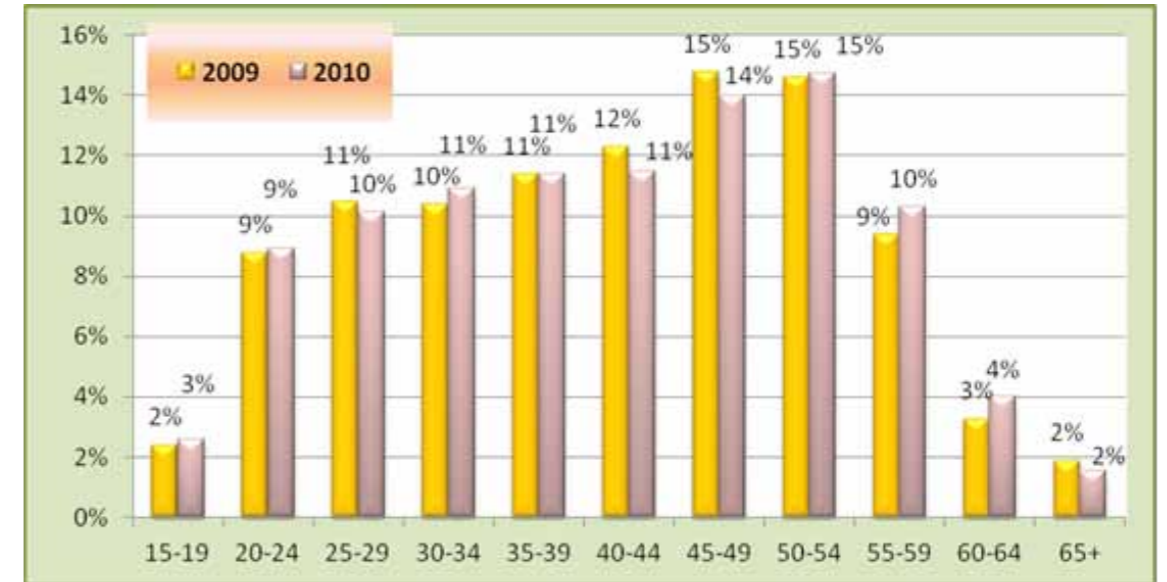
★ 5.11 2010 年，工作受傷者男性較女性多，達 74%，而女性為 26%。88% 的工作意外是非故意的。

★ 5.12 Work injuries clustered at age groups 20-59. The pattern of distribution is similar to that in 2009.

★ 5.12 工作時受傷的多集中在 20 至 59 歲的成年人，分佈模式與 2009 年相似。

Chart 13: Distribution of work injuries by age group

圖十三：工作受傷者年齡分佈

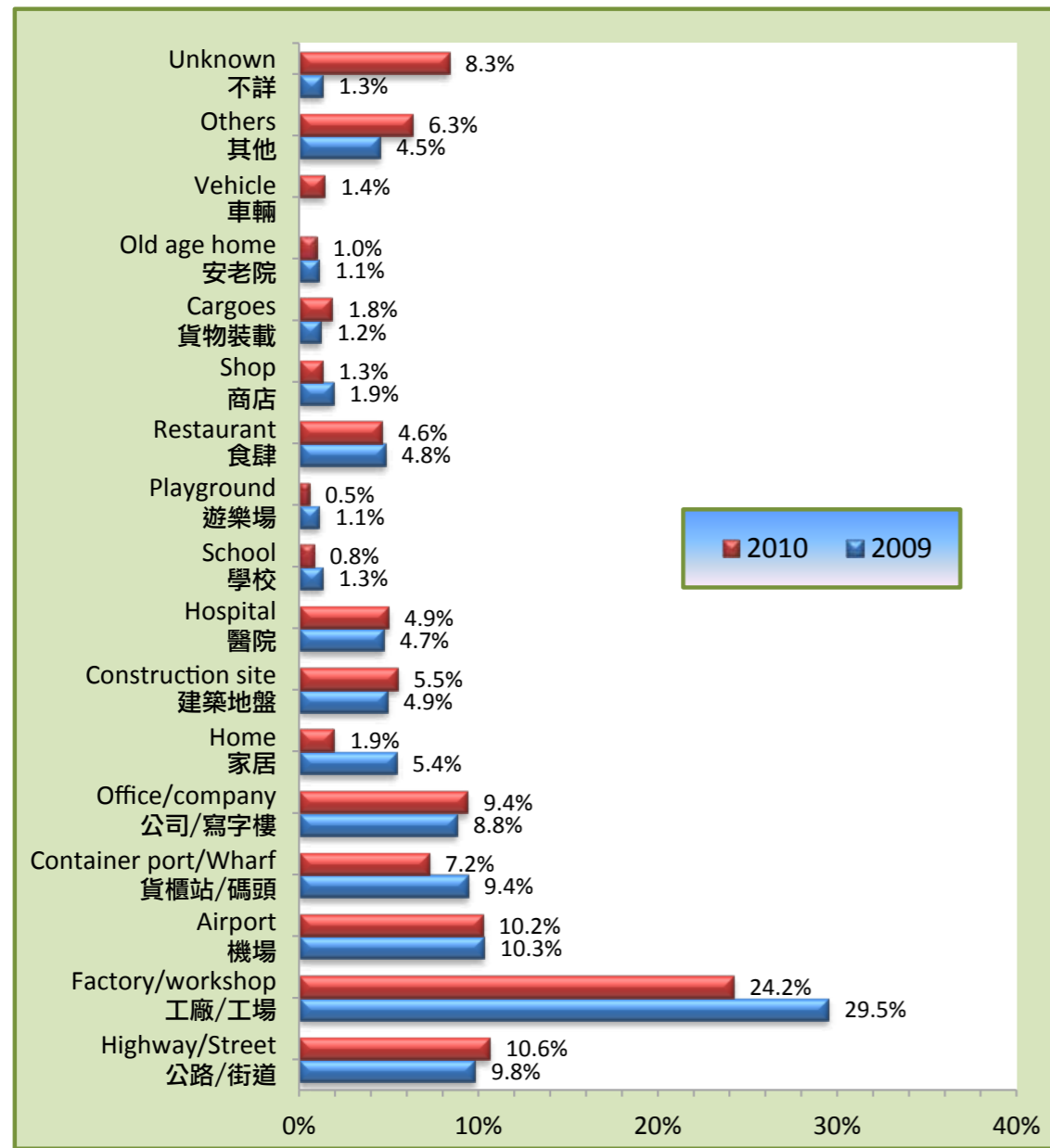


★ 5.13 24% of work injuries occurred at factory/workshop, dropped by about 5 percentage points from 2009. Around 10% or work injuries happened on highway/street (11%), airport (10%) and office (9%). The percentage distribution was similar with that in 2009.

★ 5.13 4% 的工作意外發生在工廠 / 工場，較去年下跌 5 個百分點；大約 10% 發生在公路 / 街道 (11%)、機場 (10%) 及辦公室 / 公司 (9%)，百分比分佈與 2009 年相似。

Chart 14: Distribution of work injuries by place

圖十四：工作受傷的發生地點分佈



★ 5.14 78% of work injuries were traumatized industrially, 7% domestically and 5% by traffic. The corresponding percentages in 2009 were 80%, 8% and 4% respectively. People injured at work were mostly service workers (41%), machine operators (7%), and workers of elementary occupation (6%). Percentage shares were similar with that in 2009.

★ 5.14 78% 於工作中發生的受傷屬工業創傷類型，7% 屬家居意外及 5% 屬交通意外，相對 2009 年的百分比，分別是 80%、8% 及 4%。因工作受傷的人士以服務員 (41%)、機械操作員 (7%) 及技術員 (6%) 較多，百分比分佈與 2009 年相似。

Domestic Violence Injuries

家暴受傷

★ 5.15 Domestic violence injuries included abuses to child, spouse and elderly. In 2010, a total of 116 injuries (22 child abuse, 5 elderly abuse and 89 spouse abuse) due to abuse were recorded. Great majority (over 91%) were intentional, higher than the 86% in 2009.

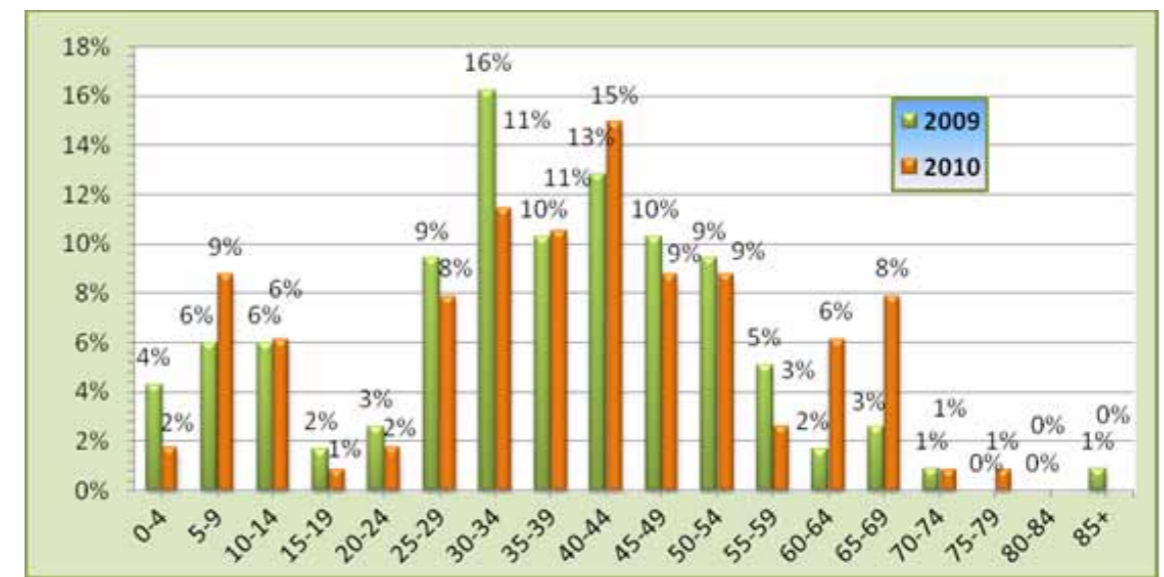
★ 5.15 家庭暴力包括虐待兒童、配偶及長者。在 2010 年，共錄得 116 宗個案 (22 宗虐兒；5 宗虐待長者及 89 宗虐待配偶)。大部分 (超過 91%) 是故意的，比 2009 年的 86% 高。

★ 5.16 Percentages of injuries caused by domestic violence for 25-54 were higher. The chart below showed that violence for ages 5-9, 40-44, 60-64 and 65-69 increased over 2009 while that for 30-34 dropped.

★ 5.16 家庭暴力中，受害者以 25 至 54 歲的人士居多。下圖顯示家庭暴力的受傷者，年齡介乎 5-9 歲、40-44 歲、60-64 歲及 65-69 歲較 2009 年增加，而介乎 30-34 歲的則減少。

Chart 15: Distribution of domestic violence injuries by age

圖十四：工作受傷的發生地點分佈



★ 5.17 30% of the domestic violence injuries occurred during vital activity. Compared to 42% in 2009, this depicted a drastic decrease of 12 percentage points. However, it is worth noting that activity of 56% of the domestic violence was not revealed by the injured people. 76% of violence injuries were caused by blunt force. Majority of injuries caused by domestic violence happened at home (84%), at the same level as 2009.

★ 5.17 家庭暴力事故中，大約 30% 是在日常生活的活動中受傷，較 2009 年的 42% 大幅度下跌了 12 個百分點。然而，值得關注的是，56% 的家庭暴力事故，受傷者沒有透露活動。76% 的家暴受傷是由於撞傷；絕大部份的家庭暴力受傷個案發生在家居 (84%)，與 2009 年相同。

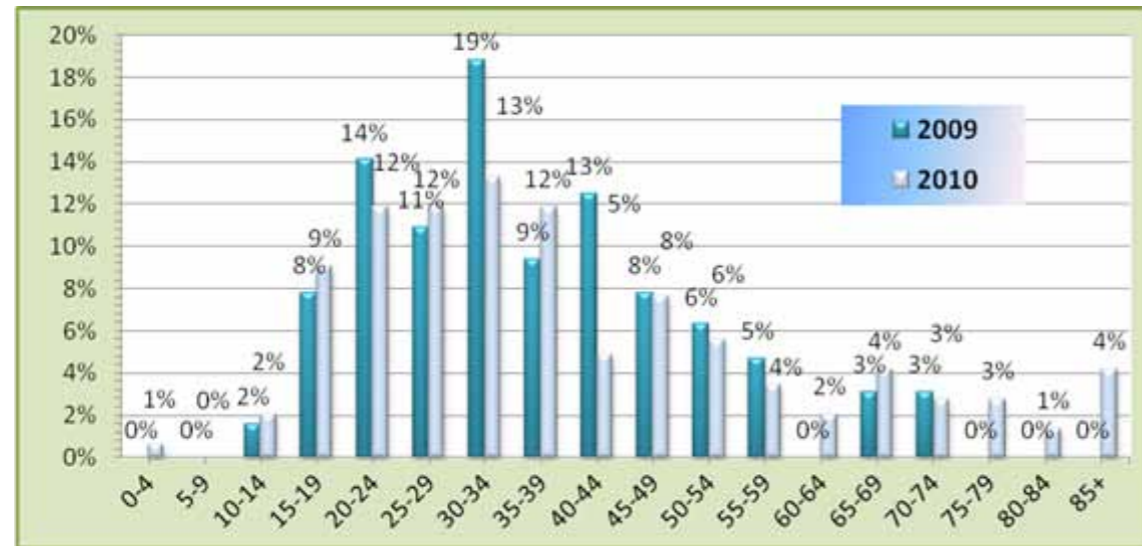
Self-harm Injuries

★ 5.18 A total of 88 injuries due to self-harm were captured in 2010, up by about 38% over 2009. Of the 88 self-harm injuries, 56% were female while the remaining 44% were male. Self-harm injuries clustered at ages 15-49. Percentages of injuries for age group 30-34 and 40-44 dropped significantly compared to 2009. It was notable that self-harm by elderly aged 60+ increased apparently compared to 2009. 12 injuries occurred in 2010 for aged 75 and over while none was recorded in preceding year.

自我傷害受傷

★ 5.18 2010年共錄得88宗的自我傷害個案，較2009年上升38%。這88宗個案當中，56%為女性，其餘的44%為男性。傷者主要集中在15至49歲。年齡介乎30-34歲及40-44歲的百分比比較去年明顯下跌。值得關注的是，60歲或以上的長者自我傷害的個案較去年明顯增加；有12宗個案的傷者是75歲或以上的，而去年並沒有錄得75歲或以上自我傷害的個案。

Chart 16: Distribution of self-harm injuries by age
圖十六：自我傷害受傷者的年齡分佈



★ 5.19 Self-harm mostly happened at home (52%), and about 5% in old age home as well as on highway/street. Percentage on highway/street in 2009 was 3% and that in old age home was less than 2%, thus 2010 recorded an increase in these places.

★ 5.19 自我傷害大多在家中發生(52%)，大約5%在安老院發生，公路/街道亦一樣。2009年發生在公路/街道的百分比是3%，而安老院則少於2%，顯示2010年略有增加。

★ 5.20 43% of self-harm was caused by stab/cut, 19% by fall and about 13% by blunt force. The following table compared percentage shares of self-harm injuries by causes.

★ 5.20 43%的自我傷害是因割傷受傷的，19%因跌傷及大約13%因撞傷。下表比較各原因的百分比。

Table 34 : Comparison of self-harm injuries by cause, 2009 and 2010
表三十四：比較因自我傷害而受傷的原因，2009及2010

原因 Causes	2009 (%)	2010 (%)	增減百分率 Percentage change (%)
割傷 Stab/cut	54.7	43.2	-11.5
撞傷 Other blunt force	14.1	12.5	-1.6
跌傷 Fall	6.3	19.3	13.0
其他 Others	10.9	4.5	-6.4
不詳 Unknown	14.1	12.5	-1.6

6. Exploration of Risk Factors

★ 6.1 After the discussion of above variables, this section would explore the associations and potential contribution of the risk factors to 7 aspects, namely: hospital admission, hospital admission for more than 3 days, fall injury, traffic injury, work injury, domestic violence and self-harm. In order to identify the contributing factors which may lead to the outcomes, several personal characteristics (gender and age), situation of patients admitted (Triage Category), Quarter of year, and date and time.

★ 6.2 Analyzing Crude Odds Ratio (Crude OR) between dependent variables as well as analyzing Adjusted Odds Ratio (Adjusted OR) among the variables in each of the following aspects, statistical models and significances were studied in order to identify the potential risk factors. In the analysis, the reference of the odds ratio of each variable is 1 for the purpose of comparison.

Hospital Admission

★ 6.3 It was found that the ratio of “female to male” for hospital admission was 1:0.91 that the chance for male admitted hospital was lower. For age, those aged 80 or above were 5.45 times more, and those aged 60-80 were 3.16 times more than those aged below 60 to be admitted hospital. Patients admitted in Quarter 2 of 2010 had lower chances to be admitted than that of the 4th quarter of 2010. Comparing the different time slots, the chances from midnight to 06:00 were higher.

Table 35: Crude Odd Ratios for hospital admission

表三十五：住院的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	0.91**(0.848,0.977)	1.15**(1.058,1.26)
女性 Female	9325	1	1
年齡 Age			
>80	1825	5.45***(4.912,6.05)	2.5***(2.212,2.827)
60-80	3464	3.16***(2.899,3.452)	2.2***(1.981,2.435)
<=60	16558	1	1

6. 探討影響因素

★ 6.1 討論過上述變量後，本章將探討影響因素與以下七個範疇的關係和可能潛在的促成作用，七個範疇包括住院、住院時間超過3天、跌倒受傷、交通意外受傷、工作受傷、家庭暴力和自我傷害。為了找出導致這些結果的促成因素，對個人特徵（性別及年齡）、所收病人的情況（分流類別）、季度、日期和入院時間作探討。

★ 6.2 為了探討影響因素，透過分析以下各方面的個別變數和其他因素的粗勝算比（Crude Odds Ratio (Crude OR)）、調整勝算比（Adjusted Odds Ratio (Adjusted OR)）及統計的模型和意義。在分析中，每一項變量的參考值為1，用作比較之用。

住院

★ 6.3 結果發現，女性對男性需住院的比率為1:0.91，即男性需住院的機會率較女性低。至於年齡，與60歲以下人士需住院的人士比較，80歲或以上人士為其5.45倍，60-80歲人士為其3.16倍。傷者在2010年的第二季較第四季住院的機會低；若比較不同時段，午夜到早上6時入院的機會較高。

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
分流類別 Triage Category			
危殆 Critical	175	740.85***(177.007,3100.805)	908.08***(214.024,3852.844)
危急 Emergent	199	1188***(280.837,5025.489)	1105.94***(260.213,4700.416)
緊急 Urgent	6635	133.88***(33.34,537.591)	98.79***(24.577,397.088)
半緊急 Semi-urgent	14442	9.9**(2.462,39.8)	8.9**(2.213,35.825)
非緊急 Non-urgent	396	1	1
季度 Quarter			
Q1	5195	1.05(0.95,1.158)	1.08(0.96,1.216)
Q2	5347	0.85**(0.771,0.946)	0.87*(0.776,0.985)
Q3	5690	1.01(0.919,1.117)	1.03(0.921,1.158)
Q4	5615	1	1
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	1.02(0.932,1.121)	1.02(0.918,1.143)
否 No	17987	1	1
入院時間 Time			
0600-1159	7037	0.85**(0.75,0.957)	0.82**(0.711,0.95)
1200-1759	7624	0.78***(0.688,0.877)	0.83***(0.716,0.955)
1800-2359	5006	0.77***(0.673,0.871)	0.85*(0.731,0.992)
0000-0559	2180	1	1

*** p-值 < 0.001 ; ** p-值 < 0.01 ; * p-值 < 0.05
 *** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★ 6.4 The Hosmer–Lemeshow (H & L) test is a statistical test for goodness of fit for logistic regression models.⁸ For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value⁹ of H&L test was 0.604 which indicated the model predicted values not significantly different from observations. Moreover, Nagelkerke R²¹⁰ was 0.366 and Cox & Snell R² was 0.217 that meant the model showed a fair model fitting.

Hospital Admission for More than 3 days

★ 6.5 The model found that the crude odds ratio of “female to male” was 1:0.66 that the chance for female was higher to stay longer than 3 days. For age, those aged more than 80 were 11.07 times more, and those aged 60-80 were 5.88 times more than those aged below 60 to stay longer than 3 days. Of course, higher urgent cases had higher chances to be admitted. Admission in Quarter 1 of 2010 had higher chances to stay longer than that in the 4th quarter of 2010 while the chance in evening from 1800-2359 was lower than the time after midnight.

★ 6.4 Hosmer-Lemeshow (H&L) 測試是羅吉斯迴歸模型配適度的統計測試。⁸ 排除混淆因素後，H & L 測試的 p-值⁹ 為 0.604，即表示模型預測的數值與觀察所得的結果沒有明顯分別。另外，當 Nagelkerke R²¹⁰ 是 0.366 及 Cox & Snell R² 是 0.217 時，即表示該模型配適欠佳。

住院多於三天

★ 6.5 模式得出女性對男性的粗勝算比是 1 : 0.66，即女性住院多於三天的機會較男性高。至於年齡，80 歲或以上人士住院多於三天的為 60 歲或以下人士的 11.07 倍；而 60-80 歲人士則為其 5.88 倍。當然，較多屬緊急個案的，住院的機會亦較高。2010 年第一個季度住院的機會較第四季高；而黃昏時段由 1800-2359 較午夜後入院的機會小。

Table 36: Crude Odd Ratios for hospital admission more than 3 days

表三十六：住院多於三天的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	0.66***(0.602,0.731)	0.96(0.854,1.073)
女性 Female	9325	1	1

⁸ The Hosmer–Lemeshow test is used frequently in risk prediction models. The test assesses whether or not the observed event rates match expected event rates in subgroups of the model population. The Hosmer–Lemeshow test specifically identifies subgroups as the deciles of fitted risk values. Models for which expected and observed event rates in subgroups are similar are called well calibrated. (http://en.wikipedia.org/wiki/Hosmer%E2%80%93Lemeshow_test)

⁹ P-value higher than 0.05 means that null hypothesis has not been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

¹⁰ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

⁸ Hosmer – Lemeshow 測試常用於風險預測模型。測試評估在模型總人口的子組別中，觀察所得的發生率與預計的是否吻合。Hosmer – Lemeshow 測試特別找出配適風險值為十分數的子組別。模型在子組別中預測和觀察的發生率相近時，稱為良好校準。(http://en.wikipedia.org/wiki/Hosmer%E2%80%93Lemeshow_test)

⁹ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p- 值大於 0.05，即表示不能拒絕虛無假設。

¹⁰ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
年齡 Age			
>80	1825	11.07***(9.739,12.591)	5.34***(4.602,6.188)
60-80	3464	5.88***(5.23,6.619)	4.16***(3.637,4.747)
<=60	16558	1	1
分流類別 Triage Category			
危殆 Critical	175	485.33***(66.814,3525.46)	539.44***(73.845,3940.6)
危急 Emergent	199	263.09***(36.245,1909.657)	233.89***(32.071,1705.731)
緊急 Urgent	6635	106.42***(14.942,757.98)	59.96***(8.399,428.061)
半緊急 Semi-urgent	14442	5.66(0.791,40.458)	4.94(0.689,35.383)
非緊急 Non-urgent	396	1	1
季度 Quarters			
Q1	5195	1.22**(1.063,1.393)	1.27**(1.091,1.485)
Q2	5347	1.01(0.877,1.159)	1.12(0.956,1.309)
Q3	5690	1(0.867,1.142)	1.03(0.884,1.205)
Q4	5615	1	1
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	0.95(0.832,1.076)	0.91(0.787,1.053)
否 No	17987	1	1
入院時間 Time			
0600-1159	7037	1.02(0.858,1.201)	0.98(0.807,1.185)
1200-1759	7624	0.85(0.718,1.008)	0.95(0.782,1.148)
1800-2359	5006	0.81*(0.672,0.966)	0.97(0.791,1.192)
0000-0559	2180	1	1

*** p- 值 < 0.001 ; ** p- 值 < 0.01 ; * p- 值 < 0.05
 *** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

Fall Injuries

★ 6.6 For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value¹¹ of H&L test was 0.177 which indicated the model was not significantly different. Moreover, Nagelkerke R²¹² was 0.354 and Cox & Snell R² was 0.153 that meant the model showed a poor model fitting.

★ 6.7 The model found that the crude odds ratio of “female to male” was 0.53 that the chance for male suffering from fall injuries was lower than female. For age, those aged 80 or above were 10.34 times more and those aged 60-80 were 4.63 times more than those aged below 60 to have fall injuries. Urgent and semi-urgent category had higher chances than non-urgent category. The second and third quarters of 2010 had lower chances than the fourth quarter of 2010. And the chances for the time from morning to evening were lower than that in midnight.

Table 37: Crude Odd Ratios for fall injuries

表三十七：跌倒受傷的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	0.53***(0.499,0.556)	0.65***(0.609,0.687)
女性 Female	9325	1	1
年齡 Age			
>80	1825	10.34***(9.111,11.739)	6.64***(5.812,7.578)
60-80	3464	4.63***(4.279,5.009)	3.73***(3.439,4.052)
<=60	16558	1	1

¹¹ P-value higher than 0.05 means that null hypothesis has not been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

¹² R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

跌倒受傷

★ 6.6 對於附有調整勝算比的模式，排除混淆因素後，其 H&L 測試的 p- 值¹¹ 為 0.177，顯示該模式沒有顯著差異。而且，Nagelkerke R²¹² 為 0.354 及 Cox & Snell R² 值是 0.153，即表示該模型配適欠佳。

★ 6.7 模式得出女性對男性的粗勝算比是 1：0.53，即男性因跌倒受傷的機會較女性低。至於年齡，80 歲或以上人士因跌倒受傷的為 60 歲或以下人士的 10.34 倍；而 60-80 歲人士則為其 4.63 倍。個案屬緊急及半緊急類別的比非緊急類別的機會高。2010 年第二季和第三季，跌倒受傷事故較第四季發生機會低；而由早上至黃昏時段，跌倒受傷的機會較午夜時段低。

¹¹ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p- 值大於 0.05，即表示不能拒絕虛無假設。

¹² R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
分流類別 Triage Category			
危殆 Critical	175	0.9(0.614,1.328)	0.73(0.476,1.117)
危急 Emergent	199	1.19(0.832,1.716)	0.99(0.67,1.464)
緊急 Urgent	6635	4.12***(3.308,5.138)	2.78***(2.203,3.513)
半緊急 Semi-urgent	14442	1.32*(1.065,1.645)	1.26*(1.001,1.584)
非緊急 Non-urgent	396	1	1
季度 Quarters			
Q1	5195	1.02(0.948,1.103)	1.04(0.955,1.129)
Q2	5347	0.92*(0.85,0.988)	0.94(0.863,1.019)
Q3	5690	0.91**(0.841,0.975)	0.9**(0.826,0.972)
Q4	5615	1	1
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	1.05(0.978,1.124)	1.04(0.963,1.124)
否 No	17987	1	1
入院時間 Time			
0600-1159	7037	0.9*(0.814,0.986)	0.84**(0.754,0.933)
1200-1759	7624	0.88**(0.802,0.97)	0.89*(0.797,0.983)
1800-2359	5006	0.87**(0.785,0.96)	0.92(0.824,1.028)
0000-0559	2180	1	1

*** p- 值 < 0.001 ; ** p- 值 < 0.01 ; * p- 值 < 0.05
*** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★ 6.8 For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value¹³ of H&L test was 0.000 which indicated the model was significantly different at 0.05. Moreover, Nagelkerke R²¹⁴ was 0.213 and Cox & Snell R² was 0.159 that meant the model showed a fair model fitting.

¹³ P-value less than 0.05 means that null hypothesis has been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

¹⁴ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

★ 6.8 排除混淆因素後，該模式在 H&L 測試中的調整勝算比的 p- 值¹³ 為 0.000，顯示該模式預測的值在 0.05 有顯著差異。而且，Nagelkerke R²¹⁴ 的值是 0.213 及 Cox & Snell R² 的值是 0.159，即表示該模型配適佳。

¹³ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p- 值少於 0.05，即表示拒絕虛無假設。

¹⁴ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

Traffic injuries

★ 6.9 The model found that the crude odds ratio of “male to female” was 1.57:1, indicating that the chance for male suffering from traffic injuries was 1.57 times higher than female. By age, those aged 80 or above were only 0.09 times, and those aged 60-80 were only 0.46 times of those aged below 60 to have traffic injuries. Critical and emergent category had higher chances than non-urgent category. And afternoon from noon to midnight had lower chances than the period after midnight.

交通意外受傷

★ 6.9 結果發現，男性對女性的粗勝算比是 1.57 : 1，即男性因交通意外導致受傷的機會為女性的 1.57 倍。比較 60 歲以下人士因交通意外受傷的個案，80 歲或以上的傷者只有 0.09 倍；60-80 歲的則只有 0.46 倍。屬危殆及危急類別的個案比非緊急的機會高。而且，由中午十二時至午夜十二時發生交通意外的機會較午夜後低。

Table 38: Crude Odd Ratios for traffic injuries

表三十八：交通意外受傷的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	1.57***(1.402,1.765)	1.29***(1.148,1.459)
女性 Female	9325	1	1
年齡 Age			
>80	1825	0.09***(0.056,0.16)	0.07***(0.044,0.128)
60-80	3464	0.46***(0.38,0.552)	0.4***(0.326,0.482)
<=60	16558	1	1
分流類別 Triage Category			
危殆 Critical	175	17.08***(9.941,29.357)	22.94***(13.029,40.397)
危急 Emergent	199	6.9***(3.948,12.043)	8.67***(4.878,15.414)
緊急 Urgent	6635	1.56(0.973,2.489)	2.34***(1.439,3.796)
半緊急 Semi-urgent	14442	1.11(0.698,1.773)	1.22(0.757,1.978)
非緊急 Non-urgent	396	1	1
季度 Quarters			
Q1	5195	1.06(0.91,1.244)	1.02(0.866,1.197)
Q2	5347	1.04(0.891,1.218)	1.02(0.868,1.196)
Q3	5690	1.11(0.95,1.287)	1.06(0.911,1.244)
Q4	5615	1	1
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	1.01(0.877,1.166)	1(0.866,1.163)
否 No	17987	1	1

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
入院時間 Time			
0600-1159	7037	0.86(0.719,1.027)	0.89(0.739,1.072)
1200-1759	7624	0.62***(0.514,0.742)	0.64***(0.526,0.768)
1800-2359	5006	0.75**(0.615,0.902)	0.75**(0.614,0.911)
0000-0559	2180	1	1

*** p-值 < 0.001 ; ** p-值 < 0.01 ; * p-值 < 0.05

*** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★ 6.10 For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value¹⁵ of H&L test was 0.22 which indicated the model was not significantly different at 0.05. Moreover, Nagelkerke R²¹⁶ was 0.087 and Cox & Snell R² was 0.033 that meant the model showed a poor model fitting.

★ 6.10 對於附有調整勝算比的模式，排除混淆因素後，其 H&L 測試的 p-值¹⁵ 為 0.22，顯示該模式在 0.05 沒有顯著差異。而且，Nagelkerke R²¹⁶ 值是 0.087 及 Cox & Snell R² 值是 0.033，即表示該模型配適欠佳。

¹⁵ P-value higher than 0.05 means that null hypothesis has not been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

¹⁶ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

¹⁵ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p-值大於 0.05，即表示不能拒絕虛無假設。

¹⁶ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

Work injuries

★6.11 The model found that the crude odds ratio of “male to female” was 2.71:1, indicating that the chance for male suffering from work injuries was 2.71 times higher than female. By age, those aged 80 or above were only 0.1 times, and those aged 60-80 were only 0.16 times of those aged below 60 to have work injuries. Critical and urgent category had lower chances than non-urgent category. When compared to the 4th quarter of 2010, admission in 1st quarter of 2010 had lower chances while admission in 3rd quarter of 2010 had higher chances. Holidays and Sundays had lower chances than weekdays. And noon to 6pm had higher chances than midnight while evening (6pm to 12pm) had lower chances than midnight.

工作受傷

★6.11 結果發現，男性對女性的粗勝算比是 2.71：1，表示男性因工作受傷的機會為女性的 2.71 倍。比較 60 歲以下人士因工作受傷的個案，80 歲或以上的傷者為其 0.1 倍；60-80 歲的則為其 0.16 倍。屬危殆及緊急類別的個案比非緊急類別的機會低。2010 年度，以第四季相比，工作受傷事故發生在首季的機較低，而第三季則較高。發生在公眾假期及星期日的工傷較平日少。由中午十二時至傍晚六時發生工傷的機會較午夜時多，而晚上（由六時至十二時）發生意外的機會較午夜低。

Table 39: Crude Odd Ratios for work injuries

表三十九：工作受傷的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	2.71***(2.527,2.896)	2.3***(2.136,2.467)
女性 Female	9325	1	1
年齡 Age			
>80	1825	0.01***(0.003,0.016)	0.01***(0.005,0.026)
60-80	3464	0.16***(0.137,0.181)	0.19***(0.168,0.223)
<=60	16558	1	1
分流類別 Triage Category			
危殆 Critical	175	0.6*(0.39,0.923)	0.66(0.416,1.041)
危急 Emergent	199	1.06(0.727,1.543)	1.29(0.865,1.931)
緊急 Urgent	6635	0.42***(0.335,0.532)	0.68**(0.534,0.868)
半緊急 Semi-urgent	14442	1.14(0.912,1.424)	1.31*(1.034,1.652)
非緊急 Non-urgent	396	1	1
季度 Quarters			
Q1	5195	0.83***(0.762,0.913)	0.79***(0.717,0.87)
Q2	5347	1.08(0.987,1.173)	1.05(0.961,1.156)
Q3	5690	1.16***(1.065,1.26)	1.18***(1.077,1.291)
Q4	5615	1	1

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	0.64***(0.59,0.704)	0.63***(0.574,0.691)
否 No	17987	1	1
入院時間 Time			
0600-1159	7037	1.1(0.98,1.224)	1.22**(1.082,1.376)
1200-1759	7624	1.15*(1.029,1.282)	1.16*(1.03,1.304)
1800-2359	5006	0.76***(0.675,0.859)	0.7***(0.616,0.795)
0000-0559	2180	1	1

*** p-值 < 0.001 ; ** p-值 < 0.01 ; * p-值 < 0.05
 *** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★6.12 For the model with adjusted OR, the p-value¹⁷ of H&L test was 0.000 which indicated the model was significantly different at 0.05. Moreover, Nagelkerke R² ¹⁸ was 0.201 and Cox & Snell R² was 0.135 that meant the model showed a poor model fitting.

★6.12 對於附有調整勝算比的模式，排除混淆因素後，其 H&L 測試的 p-值¹⁷ 為 0.000，則顯示該模式在 0.05 有顯著差異。而且，Nagelkerke R² ¹⁸ 值是 0.201 及 Cox & Snell R² 值是 0.135，即表示該模型配適欠佳。

Domestic Violence

★6.13 The model found that the crude odds ratio of “male to female” was 0.26:1, showing that the chance for male suffering from domestic violence was only 0.26 times lower than female.

家庭暴力

★6.13 結果發現，男性對女性的粗勝算比是 0.26：1，即男性因家庭暴力導致受傷的機會只有女性的 0.26 倍。

Table 40: Crude Odd Ratios for domestic violence

表四十：家庭暴力的勝算比

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
性別 Gender			
男性 Male	12522	0.26***(0.17,0.392)	0.22***(0.142,0.334)
女性 Female	9325	1	1

¹⁷ P-value less than 0.05 means that null hypothesis has been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

¹⁸ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

¹⁷ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p-值少於 0.05，即表示拒絕虛無假設。

¹⁸ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

	N	粗勝算比 Crude OR (95% CI)	調整勝算比 Adjusted OR (95% CI)
年齡			
Age			
>80	1825	-	-
60-80	3464	0.67(0.382,1.172)	0.56(0.317,1.004)
<=60	16558	1	1
分流類別 ^			
Triage Category^			
危殆	175	-	-
Critical			
危急	199	1.98(0.123,31.824)	2.8(0.173,45.445)
Emergent			
緊急	6635	1.44(0.194,10.666)	2(0.268,14.993)
Urgent			
半緊急	14442	2.5(0.348,17.996)	2.65(0.366,19.15)
Semi-urgent			
非緊急	396	1	1
Non-urgent			
季度			
Quarters			
Q1	5195	1.57(0.934,2.648)	1.62(0.947,2.765)
Q2	5347	1.62(0.968,2.712)	1.7*(1.008,2.872)
Q3	5690	0.78(0.425,1.419)	0.8(0.435,1.474)
Q4	5615	1	1
公眾假期及星期日			
Holidays and Sundays			
是	3860	0.92(0.563,1.509)	0.89(0.545,1.469)
Yes			
否	17987	1	1
No			
入院時間			
Time			
0600-1159	7037	0.75(0.408,1.367)	0.63(0.342,1.158)
1200-1759	7624	0.57(0.307,1.066)	0.47*(0.251,0.883)
1800-2359	5006	0.99(0.536,1.815)	0.82(0.443,1.519)
0000-0559	2180	1	1

^ 沒有家庭暴力受傷的個案屬危殆類別
 *** p-值 < 0.001 ; ** p-值 < 0.01 ; * p-值 < 0.05
 ^ No domestic violence cases were categorized as critical.
 *** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★ 6.14 For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value¹⁹ of H&L test was 0.184 which indicated the model was not significantly different. However, Nagelkerke R² ²⁰ was 0.074 and Cox & Snell R² was 0.005 that meant the model showed a poor model fitting.

Self-harm

★ 6.15 The model found that the crude odds ratio of “male to female” was 0.59:1, indicating that the chance for male suffering from self-harm was only 0.59 times of female. By age, adults aged 15-60 were 14.03 times more than those aged below 60 to perform self-harm behaviors. The chances of critical (621.54 times), emergent (233.52 times), and urgent (25.17 times) were much higher than non-urgent. And the chance in morning had lower chance than that in midnight.

★ 6.14 對於附有調整勝算比的模式，排除混淆因素後，其 H&L 測試的 p-值¹⁹ 為 0.184，顯示該模式沒有顯著差異。而且，Nagelkerke R² ²⁰ 值是 0.074 及 Cox & Snell R² 值是 0.005，即表示該模型配適欠佳。

自我傷害

★ 6.15 結果發現，男性對女性的粗勝算比是 0.59 : 1，即男性因自我傷害導致受傷的機會只有女性的 0.59 倍。按年齡，15-60 歲的成年人進行自我傷害行為為 60 歲或以上的一群的 14.03 倍。以非緊急類別比較，個案屬危殆 (621.54 倍)，危急 (233.52 倍) 及緊急 (25.17 倍)，遠高於非緊急事故；而發生在早上的機會較午夜低。

Table 41: Crude Odd Ratios for self-harm

表四十一：自我傷害的勝算比

	N	粗勝算比 Crude OR (95% CI)	被調整勝算比 Adjusted OR (95% CI)
性別			
Gender			
男性	12522	0.59** (0.389,0.903)	0.37*** (0.231,0.590)
Male			
女性	9325	1	1
Female			
年齡			
Age			
<15	5289	7.22 (0.949,54.939)	3.36 (0.046,0.482)
15 - 60	13836	14.03***(1.948,100.989)	13.48 ***(0.215,0.806)
>60	2722	1	1

¹⁹ P-value higher than 0.05 means that null hypothesis has not been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

²⁰ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

¹⁹ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p-值大於 0.05，即表示不能拒絕虛無假設。

²⁰ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

	N	粗勝算比 Crude OR (95% CI)	被調整勝算比 Adjusted OR (95% CI)
分流類別 Triage Category			
危殆 Critical	175	621.54***(215.059,1796.282)	999.53***(293.217, 3407.245)
危急 Emergent	199	233.52***(74.653,730.467)	429.82***(117.267,1575.429)
緊急 Urgent	6635	25.17***(9.05,70.018)	46.22***(14.276, 149.643)
非緊急 & 半緊急 Non-urgent & Semi-urgent	14838	1	1
季度 Quarters			
Q1	5195	0.73(0.38,1.414)	0.76(0.381,1.533)
Q2	5347	1.29(0.733,2.264)	1.36(0.744,2.475)
Q3	5690	0.94(0.515,1.706)	0.75(0.396,1.430)
Q4	5615	1	1
公眾假期及星期日 Holidays and Sundays			
是 Yes	3860	0.92(0.517,1.63)	0.79(0.424,1.462)
否 No	17987	1	1
入院時間 Time			
0600-1159	7037	0.42*(0.211,0.842)	0.42*(0.193,0.912)
1200-1759	7624	0.53(0.277,1.019)	0.77(0.376,1.595)
1800-2359	5006	0.81(0.421,1.55)	1.16(0.565,2.394)
0000-0559	2180	1	1

*** p-值 < 0.001 ; ** p-值 < 0.01 ; * p-值 < 0.05
 *** p-value < 0.001 ; ** p-value < 0.01 ; * p-value < 0.05

★ 6.16 For the model with adjusted OR after eliminating the factors which were not statistically significant, the p-value²¹ of H&L test was 0.769 which indicated the model was not significantly different. However, Nagelkerke R² ²² was 0.308 and Cox & Snell R² was 0.015 that meant the model showed a poor model fitting.

★ 6.16 對於附有調整勝算比的模式，排除混淆因素後，其 H&L 測試的 p-值²¹ 為 0.769，顯示該模式沒有顯著差異。而且，Nagelkerke R²²² 值是 0.308 及 Cox & Snell R² 值是 0.015，即表示該模型配適欠佳。

²¹ P-value higher than 0.05 means that null hypothesis has not been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

²¹ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p-值大於 0.05，即表示不能拒絕虛無假設。

²² R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

²² R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

7. Geospatial Distribution and Analysis

Geographical Distribution

★ 7.1 The following table presented injuries captured to the AED of PMH in 2010 and 2009 for selected geographical areas applied in geographical information system in descending order of cases.

Table 42 Injuries by constituency areas in Kwai Tsing District

表四十二：葵青區選區的受傷個案數字

地區	2010 年 Year 2010	2009 年 Year 2009
興芳 Hing Fong	806	606
荔景 Lai King	733	424
祖堯 Cho Yiu	641	435
葵芳 Kwai Fong	449	305
葵盛西邨 Kwai Shing West Estate	357	222
華荔 Wah Lai	269	140
大白田 Tai Pak Tin	260	243
翠怡 Greenfield	240	162
石籬 Shek Lei	229	151
青衣南 Tsing Yi South	226	146
石蔭 Shek Yam	216	199
葵盛東邨 Kwai Shing East Estate	204	143
安蔭 On Yam	204	112
長亨 Cheung Hang	203	95
葵興 Kwai Hing	199	162
盛康 Shing Hong	198	80
青衣邨 Tsing Yi Estate	198	177
長青 Cheung Ching	176	114

7. 地理空間分佈及分析

地理分佈

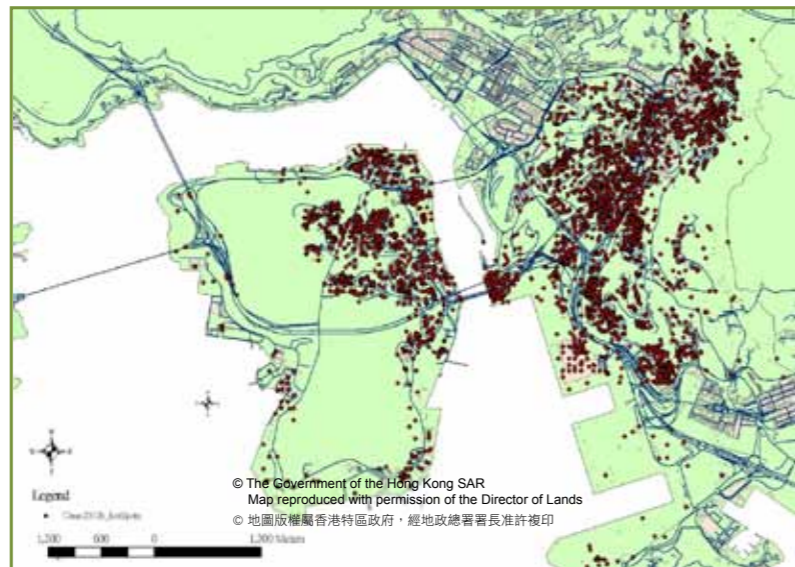
★ 7.1 下表依 2010 年的受傷個案以降序列出 2010 年及 2009 年於所選定地區在地理信息系統應用的情況下，從瑪嘉烈醫院急症室錄得的個案數字。

地區	2010年 Year 2010	2009年 Year 2009
偉海 Wai Hoi	176	146
新石籬 Shek Lei Extension	155	102
荔華 Lai Wah	146	90
青發 Ching Fat	144	96
長康 Cheung Hong	114	82
長安 Cheung On	106	76
葵涌邨 Kwai Chung Estate	74	59
安浩 On Ho	73	77
上大窩口 Upper Tai Wo Hau	27	17
下大窩口 Lower Tai Wo Hau	17	6

★ 7.2 Totally 6,840 cases were identified and matched geographically in Kwai Tsing district. The following map showed the distribution of the cases of Kwai Tsing.

★ 7.2 合共6,840宗個案以地區配對，葵青區共錄得4,667宗。下面地圖顯示葵青區受傷個案的分佈。

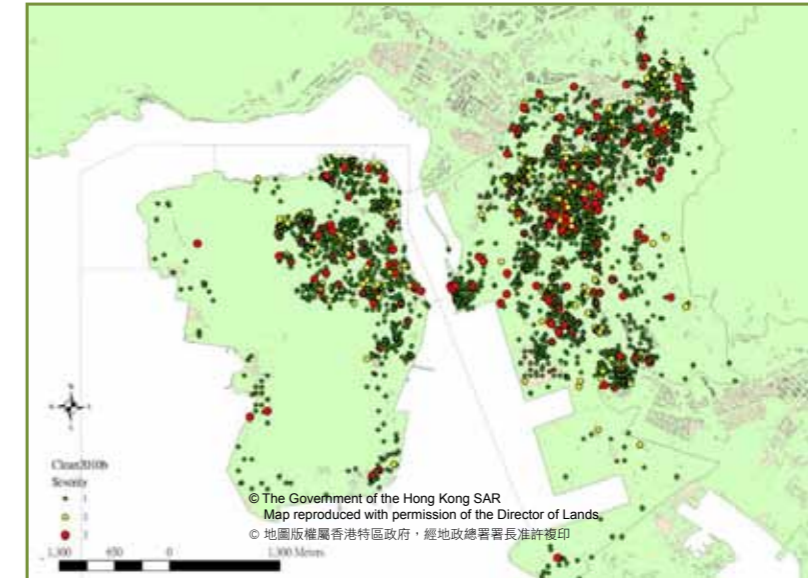
Chart 17: Distribution of injuries in Kwai Tsing
圖十七：受傷的分佈



★ 7.3 Severity was calculated on the situation of patients submitted to hospital. Three levels of severity were classified and each case was marked with level of severity individually. Analyzed by severity with 28 constitutional districts in Kwai Tsing, the severe cases were scattered over north east of Tsing Yi Island and in Kwai Fong, Hing Fong, Shek Lei and Tai Pak Tin.

★ 7.3 當傷者被送往醫院時，會按嚴重程度分流，嚴重程度主要分為三個級別，每一宗個案均會紀錄嚴重程度的級別。按嚴重程度對葵青區的28個行政分區作分析，嚴重個案主要集中在青衣東北、葵芳、興芳、石籬及大白田。

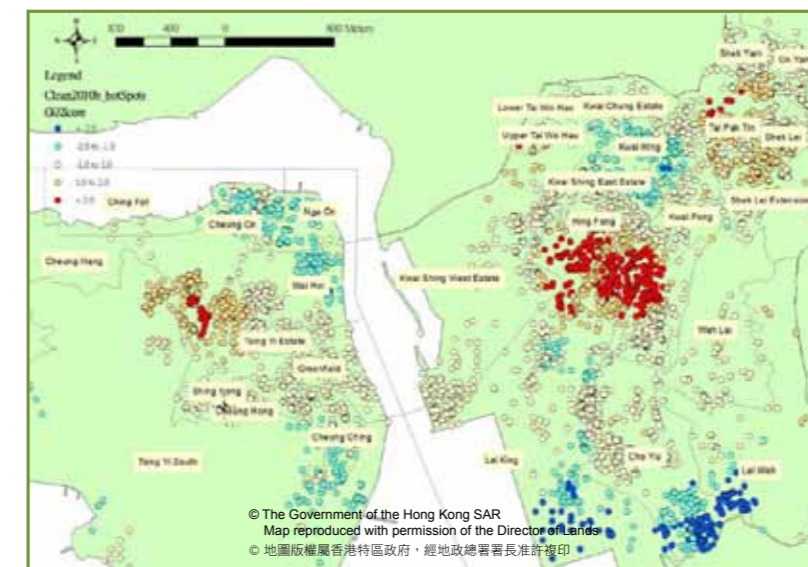
Chart 18: Distribution of injuries by severity in Kwai Tsing
圖十八：嚴重程度的受傷個案分佈



★ 7.4 By applying Hot Spot Analysis, an output of Z score was compiled for each feature with the higher the Z score, the more intense the clustering. The hotspots were mainly concentrated in Hing Fong and Kwai Fong on territory although some scattered hot spots in Tai Pak Tin and eastern Cheung Hung on Tsing Yi Island. On the other hand, the cold spots which Z scores were lower were mainly concentrated in southern Cho Yiu, Lai King and Lai Wah.

★ 7.4 使用黑點分析，對每個特點計算Z分數，Z分數越大，則黑點越集中。葵青區的黑點主要集中在興芳及葵芳，但也有些黑點零碎分佈在大白田及青衣的長亨東邨。另一方面，Z分數較低的冷點主要集中在祖堯南、荔景及荔華。

Chart 19: Identified hotspots of injuries in Kwai Tsing
圖十九：葵青區已紀錄的受傷黑點



Further Analysis on Traffic Accidents

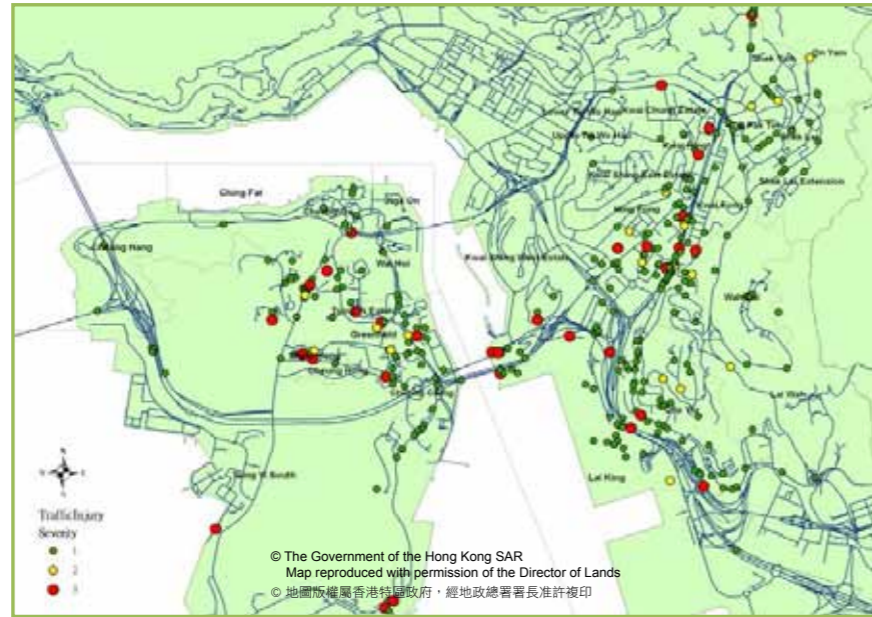
交通意外受傷的進一步分析

★ 7.5 Total 368 cases of traffic injuries were identified. Spatial patterns of traffic accidents were identified along the major road network. It was observed that the severe cases which were red scattered over the district.

★ 7.5 合共錄得 368 宗交通意外受傷。交通意外的空間模式沿主要道路網絡，從區內零散分佈的紅色點可觀察出嚴重事故發生的位置。

Chart 20: Distribution of traffic accidents in Kwai Tsing

圖二十：葵青區交通意外分佈



Fall Injuries of Elderly Aged 65 or Above

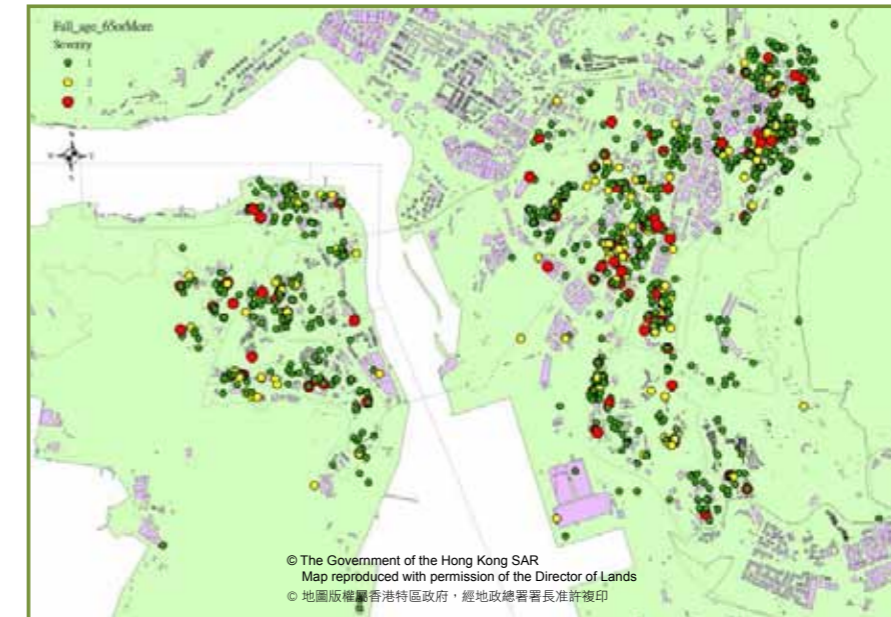
因跌倒而受傷的 65 歲或以上的長者

★ 7.7 The map below showed the distribution of cases by levels of severity. It was observed that the severe cases which were red scattered over old buildings or old estates in Kwai Tsing district.

★ 7.7 下圖顯示按受傷個案嚴重程度的分佈，可見到紅色標示的嚴重個案散佈在葵青區的舊大廈或舊屋邨。

Chart 22: Distribution of fall injuries of elderly in Kwai Tsing

圖二十二：葵青區長者跌傷意外分佈



Further Analysis on Fall Injuries

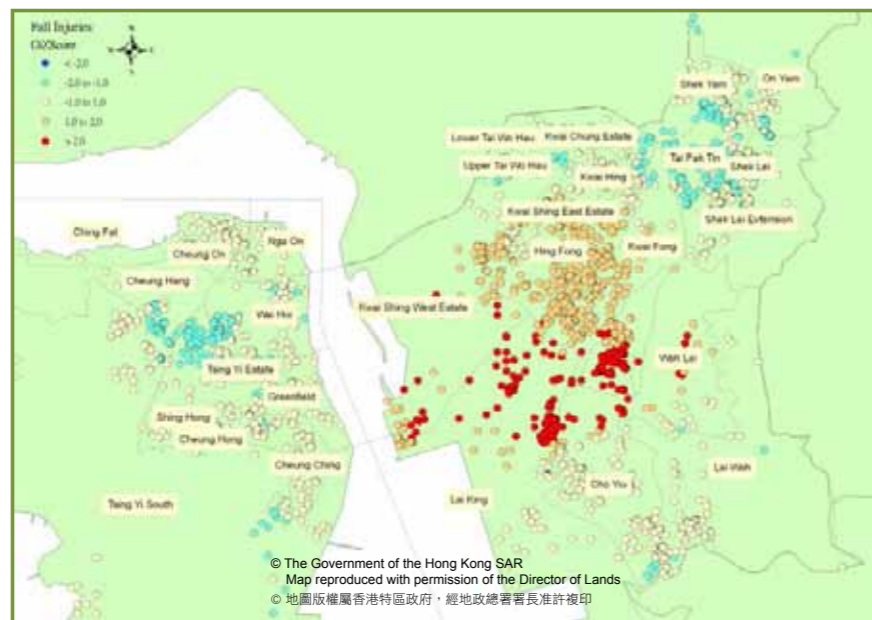
跌倒受傷的進一步分析

★ 7.6 Based on the severe cases which have Z scores of 2 or above, hotspots analysis was compiled and identified that hotspots occurred in northern parts of Lai King, Cho Yiu and Lai Wah.

★ 7.6 根據 Z 分數是 2 或以上為嚴重個案，黑點最大的群聚範圍包括荔景的北部、祖堯及荔華。

Chart 21: Distribution of fall injuries in Kwai Tsing

圖二十一：葵青區跌傷意外分佈



Fall Injuries of Infants and Toddlers Aged 4 or Below

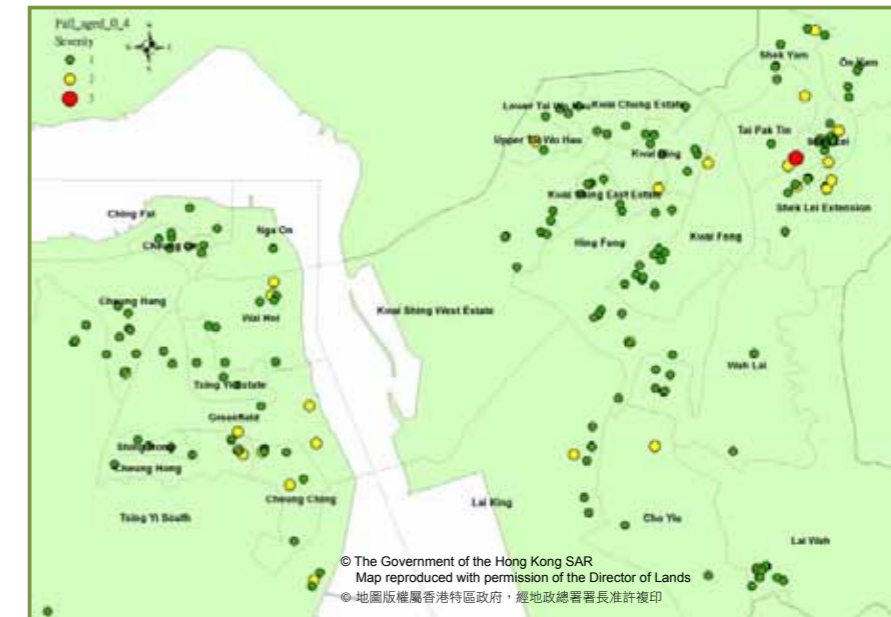
嬰兒及四歲以下的幼兒的跌傷個案

★ 7.8 Analyzed the spatial patterns of patients of fall injuries who were aged below 4, although no obvious spatial cluster was identified, the spatial distribution of toddler fall injuries by severity was also presented below.

★ 7.8 按年齡 0-4 歲跌倒受傷者的空間形態分析，雖然沒有明顯空間類聚，但以嚴重程度分析幼兒跌倒受傷的空間形態分佈如下。

Chart 23: Distribution of fall injuries of infants in Kwai Tsing

圖二十三：葵青區嬰兒跌傷意外分佈



Further Analysis on Domestic Violence

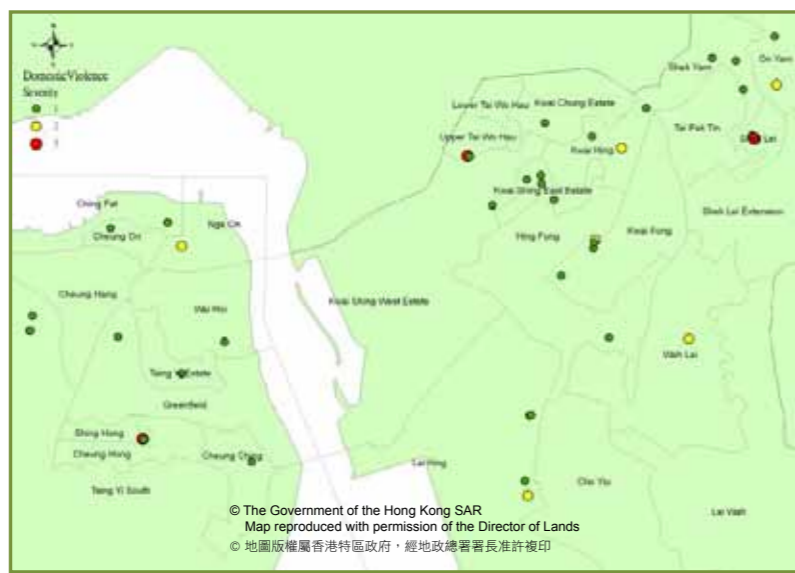
★ 7.9 Based on the geographically validated dataset, 42 violence cases were identified. Among them, 5 were child abuse, 2 were elderly abuse and 35 were spousal violence. Analyzed by levels of severity, 32 cases were low level of severity but there were also 4 cases were high level of severity.

家庭暴力的進一步分析

★ 7.9 根據地理上確認的數據，共錄得 42 宗暴力個案。其中 5 宗是虐待兒童，2 宗為虐待長者，35 宗為虐待配偶。按嚴重程度分析，32 宗嚴重程度屬低，但亦有 4 宗嚴重程度屬於高的個案。

Chart 24: Distribution of domestic violence in Kwai Tsing

圖二十四：葵青區家庭暴力個案分佈



Further Analysis on Self-harm

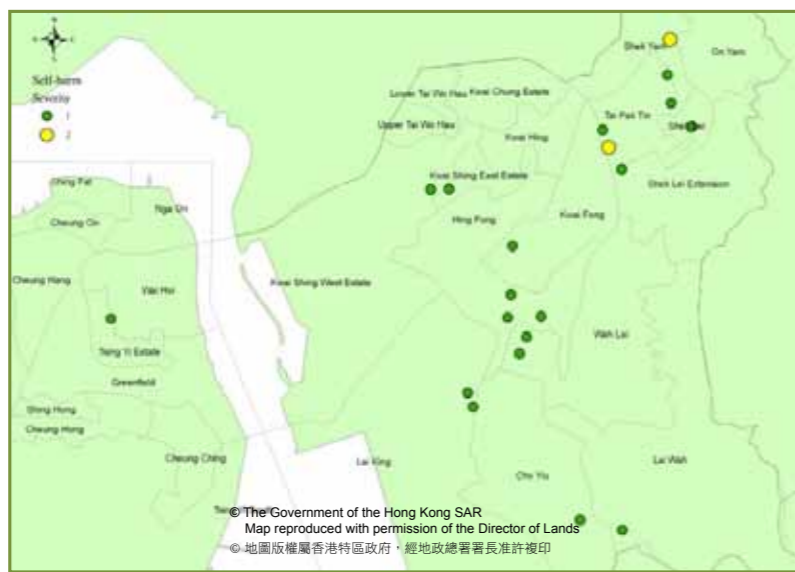
★ 7.10 Based on the geographically validated dataset, there were 21 self-harm cases were identified. Analyzed by levels of severity, 19 cases were low level of severity but there were also 2 cases were mid level of severity and no high level cases were found.

自我傷害的進一步分析

★ 7.10 根據地理上確認的數據，共錄得 21 宗自我傷害的個案。按嚴重程度分析，19 宗嚴重程度屬於低，但亦有 2 宗嚴重程度屬中等，並沒有嚴重程度高的個案。

Chart 25: Distribution of self-harm in Kwai Tsing

圖二十五：葵青區自我傷害個案分佈



8. Summary and Recommendations

Summary

★ 8.1 With supports of Community Health Resource Centre by Kwai Tsing Safe Community and Healthy City Association and Princess Margaret Hospital, the development of injury surveillance system captured data on injuries. This report was compiled by making use of injury data collected in 2010. A total of 22,339 injury cases admitted to the AED were captured. Of those with gender recorded, 57% were males and 43% were females. About 12.5% were aged 14 or below, 66.8% were aged 15-64, and 20.7% aged 65 and above.

★ 8.2 The great majority of the injury cases were unintentional (85.4%). Nearly one-third of injury events occurred at home (30.3%). About 18.1% happened on highway/street and about 6.0% in factory/workshop. About 43.0% of injury cases were caused by fall, 23.4% by other blunt force, and 7.0% by stab/cut.

★ 8.3 Regarding mechanisms of injuries, females were mostly injured due to fall (52%) and other blunt force (18%). Likewise, injuries due to fall and other blunt force were also more often to men, with 36% and 28% respectively in 2010. Across all age groups <15, 15-60 and, 60 and over, injuries caused by fall and other blunt force were higher.

★ 8.4 Analysed by place, injuries of females were common at home (39%), and 17% occurred on highway/street. For males, 24% of injuries occurred at home, and 19% on highway/street. Percentage of injuries in factory/workshop was higher for men than for women (8% for men and 3% for women). On the other hand, injuries on highway/street increased by 26% for males and 23% for females over the preceding year. The percentages of injuries happened at home were higher for younger ages (<15) and the elderly (60+), with 41% and 45% respectively, and higher on highway/street for adults aged 15-60 and 60+, with 20% and 18% respectively.

★ 8.5 Analysed by activity, the percentage of injuries at work was higher for men (31%) than for women (15%) and vice versa when travelling (25% for women and 18% for men). Similarly, percentages of injuries at vital activity were higher for women (21%) than for men (14%). Analysed by age, percentages of injuries were highest for the middle aged (15-60) at work (37%), and when travelling and vital activity for the elderly, with 29% and 26% respectively. Injuries caused during daily routines were higher for those aged <15 (22%) and older people (26%).

8. 總結及建議

總結

★ 8.1 在葵青安全社區及健康城市協會轄下的社區健康資源中心和瑪嘉烈醫院資助下，收集受傷數據傷亡監測系統得以建立。本報告由 2010 年所收集的數據編制而成。系統全年共錄得 22,339 宗個案。在有性別資料的傷者中，男性佔 57% 而女性佔 43%。年齡 14 歲或以下的佔 12.5%，15-64 歲佔 66.8%，65 歲或以上的長者則佔 20.7%。

★ 8.2 絕大多數的意外是非故意的 (85.4%)。接近三分之一的受傷事故在家居發生 (30.3%)，18.1% 在公路 / 街道發生及大約 6.0% 在工廠 / 工場發生。43.0% 的個案是因跌倒受傷的，23.4% 是撞傷及 7.0% 是割傷。

★ 8.3 根據傷害形成的途徑，女性傷者大多數是跌傷 (52%) 及撞傷 (18%)，同樣地，男性因跌傷和撞傷亦較多，2010 年分別佔 36% 和 28%。在所有年齡組別中，15 歲以下，15-60 歲及 60 歲以上，跌傷及撞傷的百分比比較高。

★ 8.4 按傷害發生地點分析，女性多數在家居 (39%) 及公路 / 街道受傷 (17%)；男性在家居受傷的為 24%，而在公路 / 街道上受傷的為 19%。在工廠 / 工場受傷的以男性較多 (8% 是男性，3% 是女性)。另一方面，與上年比較，2010 年男性在公路 / 街道受傷的增加了 26%，而女性則增加 23%。發生在家居的傷害以年青人 (<15 歲) 及長者 (60+ 歲) 居多，分別為 41% 及 45%；而發生在公路 / 街道的傷害則以 15-60 歲及 60 歲或以上的成年人居多，分別是 20% 和 18%。

★ 8.5 按受傷時活動分析，工作中受傷的百分比，男性 (31%) 較女性 (15%) 高；反之，行程途中受傷的則女性較男性高 (25% 為女性，18% 為男性)；同樣地，在日常生活中受傷的，女性 (21%) 較男性 (14%) 高。以年齡分析，在工作中受傷的 (37%)，以中年人 (15-60 歲) 最多；而在行程途中及日常生活中受傷的，長者的百分比最高，分別是 29% 和 26%。進行日常生活時受傷的，則 15 歲以下 (22%) 及長者 (26%) 較多。

★ 8.6 Analysed by traumatic types, distribution of injuries by traumatic type depicted similar pattern as 2009. Of the 18,860 reported injuries in 2010 with known traumatic type, 40% (7,538 cases) were traumatized at home (domestic), 24% (4,609 cases) were industrial type. Analysed by gender, males were traumatized mostly by industrial (31%) and domestic (31%) while females were traumatized mostly domestically (44%), followed by industrial (15%). Analysed by age group, injuries happened to adults aged 15-60 were mostly traumatized industrially (32%), and another 21% at home (domestic). Majority of injuries of children aged below 15 were traumatized at home (50%) and 12% at sports. Old ages (60+) were mostly traumatized at home (56%).

★ 8.7 Analysed by intention, majority (85%) of the injuries were caused unintentionally. Less than 1% was self-harmed and 5% were injured intentionally. The percentage of unintentional injuries was higher for fall (47%), and by other blunt force (21%). Majority of the intentional injuries was by other blunt force (76%) while self-harm was highest for stab/cut (42%).

★ 8.8 Analysed by severity, of the injuries happened in 2010, about 91% were minor, slightly less than 5% were moderate and serious respectively. Among different levels of severity, the percentages were higher for fall (41% were minor, 68% moderate and 59% serious). Next was other blunt force (24% were minor, 16% moderate and 18% serious). Of the serious injuries, fall was the top mechanism (59%), followed by other blunt force (18%). Traffic injury was the third largest activity in serious cases (12%), and about 10% were serious, the highest ratio of serious injuries in all types.

★ 8.9 Temporal analyses by time, holidays and seasons and evaluations on crude rate and YPLL (Years of Potential Life Lost) were performed. The prominent patterns showed that fall and traffic injury caught attention when analyzed by mechanism. The figures were high at home and on high/street when analyzed by place of occurrence. And the figures of work and travel injuries were relatively high when analyzed by activity. Domestic, industrial and traffic injuries were frequent when analyzed by traumatic types.

★ 8.10 This study also tried to estimate the cost of staying in wards by districts, the average total costs for general wards plus intensive wards were relatively higher for Tai Pak Tin (HK\$10,727), On Yam (HK\$10,1317), Shek Lei (HK\$9,303) and Cheung Hong (HK\$8,776).

★ 8.6 按創傷類型分析，分佈與 2009 年相似。在 2010 年在已有創傷類型分類的 18,860 宗個案中，40% (7,538 宗) 是家居意外，24% (4,609 宗) 是工業意外。按性別分析，男性主要因工業意外 (31%) 及家居意外受傷 (31%)；而女性則主要因家居意外受傷 (44%)，其次是工業意外受傷 (15%)。按年齡組別分析，年齡介乎 15-60 歲的成年人較多因工業意外受傷 (32%)，另外 21% 是因家居意外受傷。15 歲以下的兒童大多因家居意外受傷 (50%)，12% 是因運動受傷；60 歲或以上之長者亦多數因家居意外受傷 (56%)。

★ 8.7 以動機分析，大部分 (85%) 傷害是非故意的，少於 1% 是自我傷害及 5% 是故意的。非故意的傷害以跌傷 (47%) 及撞傷 (21%) 的百分比最高。故意的傷害大多數是撞傷 (76%)；而自我傷害以割傷 (42%) 的百分比最高。

★ 8.8 按嚴重程度分析，在 2010 年的傷害個案中，大約 91% 屬輕微，屬中等及嚴重的，兩者皆略低於 5%。在不同嚴重程度的傷害個案中，跌傷的百分比最高 (41% 屬輕微，68% 屬中等及 59% 屬嚴重)；其次是撞傷 (24% 屬輕微，16% 屬中等及 18% 屬嚴重)。屬嚴重受傷的個案中，主要的途徑是跌傷 (59%)，其次是撞傷 (18%)。在所有嚴重個案中，交通意外受傷 (12%) 是繼跌倒受傷 (59%) 及撞傷 (18%) 後排第三位高，大約 10% 交通意外屬嚴重受傷，在所有類別中比率最高。

★ 8.9 就入院時間、假期和節日、受傷率評估和潛在壽命年數進行了時態比較分析。明顯的形態顯示，若以傷害形成的途徑來分析，跌倒受傷和交通意外受傷最為顯著。若以發生地點來分析，則家居和公路 / 街道的數字較高。若以受傷時活動來分析，工作和行程途中的數據相對較高。若以創傷類型分析，家居、工業意外和交通意外受傷較頻繁。

★ 8.10 這項研究還嘗試以地區層面估計住院的費用，普通病房和加護病房的平均總收費，以大白田 (10,727 元) 和安蔭 (10,131 元)、石籬 (9,303 元) 及長康 (8,776 元) 較高。

★ 8.11 In order to depict the picture on specific issues, further analyses on fall injuries, traffic injuries, work injuries, domestic violence and self-harm²³ were performed.

★ 8.12 Of the 9,607 fall injuries, 52% happened to female and 48% to males. Great majority of fall injuries were unintentional, at 94%. The percentages of fall injuries for infants aged below 4 and the elderly aged 75 and above were higher (6% and 26% respectively). Fall injuries occurred more often during travelling (26%), doing vital activities (22%) and at work (11%).

★ 8.13 Majority of the traffic injuries happened to males (69%) and about one-third (31%) to females. Majority (86%) of traffic injuries were caused accidentally, i.e. unintentional. Traffic injuries clustered at age groups 25-54. Two-third (66%) of the traffic injuries happened during travelling and another 19% at work. Traffic injuries happened majorly on highway/street, with 73% of the total in 2010.

★ 8.14 Work injuries happened to males more frequently than to females, with 74% to males and 26% to females in 2010. 88% of work injuries were unintentional. Work injuries clustered at age groups 20-59. About 24% of work injuries occurred at factory/workshop. Around 10% of work injuries happened on highway/street (11%), airport (10%) and office (9%). 78% of work injuries were traumatized industrially. People injured at work were mostly service workers (41%), machine operators (7%) and workers of elementary occupation (6%).

★ 8.15 Domestic violence injuries included abuses to child, spouse and elderly. In 2010, a total of 116 injuries (22 child abuse, 5 elderly abuse and 89 spouse abuse) due to abuse were recorded. Great majority (over 91%) were intentional. Percentages of injuries caused by domestic violence for 25-54 were higher. 76% of violence injuries were caused by blunt force. Majority of injuries caused by domestic violence happened at home (84%).

★ 8.16 A total of 88 injuries due to self-harm were captured in 2010. Of the 88 self-harm injuries, 56% were female while the remaining 44% were male. Self-harm injuries clustered at ages 15-49. Self-harm mostly happened at home (52%), and about 5% in old age home as well as on highway/street.

★ 8.11 為描繪特定問題的情況，報告對跌倒受傷、交通意外受傷、工傷、家庭暴力和自我傷害²³進行了進一步的分析。

★ 8.12 在 9,607 宗跌倒受傷的個案中，女性佔 52%，而男性佔 48%。絕大多數的跌倒受傷都屬非故意的 (94%)。四歲以下的幼童及 75 歲或以上的長者比較容易跌倒受傷 (分別是 6% 和 26%)。跌倒受傷通常發生在行程途中 (26%)、日常生活 (22%) 及工作中 (11%)。

★ 8.13 交通意外受傷的，男性 (69%) 佔大多數，而女性約佔三分之一 (31%)。大多數 (86%) 的交通受傷為意外，即非故意的，且多聚集在年齡介乎 25-54 歲的成年人身上。大約三分之二 (66%) 的交通意外發生在行程途中，另外 19% 是發生在工作中，大部分發生在公路 / 街道上，佔 2010 年交通意外總數的 73%。

★ 8.14 在 2010 年，因工業意外受傷的以男性居多，74% 是男性，26% 是女性。88% 的工作受傷屬非故意的。工作受傷的大多介乎 20-59 歲。約 24% 的工傷事故在工廠 / 工場發生，約 10% 發生在公路 / 街道 (11%)、機場 (10%) 和辦公室 / 公司 (9%) 發生。78% 的工傷與工業有關，傷者多數為服務人員 (41%)、機械操作人員 (7%) 和非技術工人 (6%)。

★ 8.15 家庭暴力包括虐兒、虐待配偶及虐待老人。在 2010 年，共錄得 116 宗個案 (22 宗虐兒，5 宗虐待老人及 89 宗虐待配偶)。絕大多數是故意的 (超過 91%)。因家庭暴力受傷的，年齡介乎 25-54 歲所佔的百分比最高。76% 的家庭暴力傷害是由於撞擊造成，而大部分的傷害發生在家中 (84%)。

★ 8.16 2010 年錄得 88 宗自我傷害的個案，當中 56% 為女性而其餘的 44% 為男性。自我傷害主要集中在 15-49 歲的年輕人身。超過半數的受傷事件是在家中發生 (52%)，大約 5% 是在安老院發生，而同樣約 5% 發生在公路 / 街道。

²³ Self-harm did not include poisoning.

²³ 自我傷害不包括中毒。

★ 8.17 In order to explore the risk factors of injuries, 7 aspects, namely hospital admission, hospital admission for more than 3 days, fall injury, traffic injury, work injury, domestic violence and self-harm, were identified for explorations. Although different factors generating crude odds ratios and adjusted odd ratios with statistical significant difference were compiled to explain the construction of different models, the models of fall and work injuries were statistically significant.

★ 8.18 The model on fall identified with factors including gender, age, triage category, seasons (quarters) of a year, and time was significantly different at 0.05²⁴ with Nagelkerke R² ²⁵ was 0.213. The model on work injuries identified with factors including gender, age, triage category, seasons (quarters) of a year, holidays and sundays and time was significantly different at 0.05²⁶ with Nagelkerke R² ²⁷ at 0.201.

★ 8.19 Assisted with GIS applications, hot spots analyzed by levels of severity were identified in eastern Chung Hang and northern Tsing Yi Estate on Tsing Yi Island. Clusters in Hing Fong and Kwai Fong and some scattered hot spots in Tai Pak Tin were also found. Although analyses of GIS on domestic violence and self-harm were performed, the case number might not be large enough for addressing the cluster analysis. However, analyses on traffic accidents and fall should be of attention.

★ 8.20 Further analysis on traffic accidents indicated that clusters of traffic accidents were found all over Kwai Tsing districts.

★ 8.17 為了探索受傷的風險因素，找出了七個範疇作探討：住院、住院超過 3 天，跌倒受傷、交通意外受傷、工傷，家庭暴力和自我傷害，雖然不同的因素產生會導致粗勝算率和經調整勝算率有著統計上明顯差異，來編制解釋不同模式的建立，只有有關跌倒受傷及工作受傷的模型有顯著分別。

★ 8.18 有關跌倒受傷的模型包括性別、年齡、分流類別、季度和入院時間等因素在 0.05 的 P- 值²⁴ 是有顯著分別及其 Nagelkerke R² ²⁵ 為 0.213。有關工作受傷的模型包括性別、年齡、分流類別、季度、星期日及公眾假期和入院時間等因素在 0.05 的 P- 值²⁶ 是有顯著分別及其 Nagelkerke R² ²⁷ 為 0.201。

★ 8.19 憑著地理信息系統的輔助，以不同的嚴重程度來分析，在青衣的長亨邨東部及青衣邨北部發現了一些受傷黑點。在興芳及葵芳發現了群集的黑點，大白田亦發現了零星黑點。儘管對家庭暴力及自我傷害以地理信息系統進行了分析，個案數目未必足夠進行群集黑點的分析。然而，研究應注重交通意外及跌倒受傷的分析。

★ 8.20 按交通意外的進一步分析顯示，交通意外集中在葵青區。

★ 8.21 Further analysis on fall injuries indicated that hotspots occurred in northern parts of Lai King, Cho Yiu and Lai Wah.

Recommendations

★ 8.22 To understand the nature of injuries and prevent the occurrence of injuries, the performance of above analyses depicted the picture on different kinds of injuries in Kwai Tsing district. Continuous assessments and monitoring are advised to keep track of the changes. Meanwhile, the analyses identified several areas of concern which are worth addressed including fall injuries, traffic injuries, work injuries, domestic violence and self-harm behaviors.

★ 8.23 It is worth noting that the percentages of injuries happened in old age home increased in 2010 compared to 2009, by 17% (97 cases) unintentionally, 50% (3 cases) self-harm and 63% (10 cases) intentionally, constituting a total of 110 injuries in the year. Life of elderly in old age homes, especially those private old age homes is a concern of the community. It is recommended that government conducts more frequently spot checks to old age homes.

★ 8.24 Injuries caused during sports also increased in 2010 over 2009 (by 6%). Similarly, injuries during sport in school also increased. Educational training on safety should be conducted frequently by government department concerned and all schools.

★ 8.21 按跌倒受傷的進一步分析表明，荔景、祖堯及荔華都是意外發生的黑點。

建議

★ 8.22 以上分析的作用是描繪葵青區各種受傷，從而要了解傷害的性質及防止傷害的發生。建議進行持續的監察和評估，以記錄變更。同時，分析確認了一些值得關注的範疇，包括跌倒受傷、交通意外受傷、工作受傷、家庭暴力及自我傷害行為。

★ 8.23 值得一提的是，與 2009 年比較，2010 年在老人院內發生的傷害個案有所上升，意外受傷增加了 17% (97 宗)，自我傷害上升 50% (3 宗) 及蓄意傷害上升 63% (10 宗)，構成全年共 110 宗傷害個案。近來社會特別關注長者在老人院，尤其是私營老人院，的生活狀況，建議政府為老人院進行更頻密的巡查。

★ 8.24 2010 年與 2009 年比較，因運動受傷的整體個案有所增加 (6%)。同樣地，在學校因運動受傷亦增加了，政府部門和所有學校應經常就運動安全進行宣傳及教育。

²⁴ P-value less than 0.05 means that null hypothesis has been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

²⁵ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

²⁶ P-value less than 0.05 means that null hypothesis has been rejected at the p-value which is the probability of obtaining a test statistic at least as extreme as the one that was actually observed, assuming that the null hypothesis is true.

²⁷ R² expresses the improvement of the full model with all variables included over the Block 0 model. Nagelkerke R² should be between 0 and 1, with 0 denoting that model does not explain any variation and 1 denoting that it perfectly explains the observed variation while Cox & Snell R² can be larger than 1.

²⁴ 假設虛無假設為真，統計驗試所得及實質統計所得的或然率的 p- 值少於 0.05，即表示拒絕虛無假設。

²⁵ R² 表示整個模型包含所有的變數，是對 Block 0 model 的改良。Nagelkerke R² 應介乎 0 至 1，0 意指模型沒有說明任何差別，而 1 意指模型完全說出觀察所得的差別，而 Cox & Snell R² 可大於 1。

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