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Filicide in 2025: a recurrent curse in Hong Kong

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To the Editor—We read with interest the article by Tang et al¹ about filicide in Hong Kong, published in the April 2025 issue of Hong Kong Medical Journal. The authors performed a retrospective study that provides the first comprehensive analysis of filicide in Hong Kong over a 15-year period. They note that maternal perpetrators were disproportionately responsible for infanticides, highlighting the protective legal provisions applied to mothers who kill their children aged below 1 year. Postnatal depression (PND) is a prevalent condition (10%-15%) among mothers in Hong Kong which may be linked to the observation that most infanticides are related to the mothers. To address PND complications, there has been universal screening using the Edinburgh Postnatal Depression Scale under the interdisciplinary programme of Comprehensive Child Development Service. Mothers screened to be at risk of PND will be assessed in Maternal and Child Health Clinics and followed up by medical colleagues accordingly. The authors rightly pointed out that understanding the local epidemiology of filicide and the mental health conditions of perpetrators may help identify at-risk populations and develop effective intervention strategies. They concluded that enhanced mental health screening and support for parents, particularly mothers, could potentially prevent cases of filicide.

Having followed filicides in Hong Kong over many years and reported similar findings,²⁻⁴ we note that many perpetrators with a psychiatric history had already been under psychiatric surveillance and care. Despite knowledge and understanding of this tragic and deadly act, new cases continue to occur. We note that on 27 July 2025, the media reported a young family of four involving two sons aged 3 years and 6 years in a suspected murder-suicide case in Hong Kong.⁵ The existing surveillance system provides inadequate support to at-risk families. Furthermore, given the existing psychiatric services as well as financial and social constraints in Hong Kong, it is very unlikely that additional resources will be allocated for early detection of risk factors and provision of support for these families.

The use of a stepped care model or framework is a highly valuable approach for safeguarding children and preventing various forms of child abuse, including the tragic act of filicide. By adopting this framework, professionals in healthcare, social services, and child protection can tailor interventions to the specific circumstances and risk levels faced by individuals and families.^{6,7} This

structured model acknowledges that not all cases require the same level of intervention, thereby ensuring that prevention efforts, early intervention, and treatment services are appropriately tailored to each case. It begins with broad prevention efforts and community education initiatives, progressing to targeted screening, early intervention strategies, and the development of comprehensive support systems. In more serious cases, secondary interventions that involve collaboration with specialised services to provide appropriate assistance should be available. This stepped care model is the only possible approach to prevent the loss of precious lives in the already resource-limited setting of Hong Kong.

The knowledge acquired from the retrospective study by Tang et al¹ and our proposed stepped care approach⁷ are not being applied in these recent tragic cases in our city. Rather than merely reporting filicide data in local literature, paediatricians and physicians should be encouraged to publicise these important Hong Kong data and apply it to practice.

Author contributions

All authors contributed to the concept or design, acquisition of data, analysis or interpretation of data, drafting of the manuscript, and critical revision of the manuscript for important intellectual content. All authors had full access to the data, contributed to the study, approved the final version for publication, and take responsibility for its accuracy and integrity.

Conflicts of interest

As an editor of the journal, KL Hon was not involved in the peer review process. Other authors have disclosed no conflicts of interest.

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