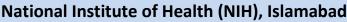


Field Epidemiology and Disease Surveillance Division (FEDSD)







24th June 2021

Highlights of the week 24 (14th June - 20th June 2021)

Cumulative Information:

- Maximum cases reported were; ILI (n=6843), Acute Diarrhea (Non Cholera) (n=5687), Malaria (n=1377), ALRI< 5 years (n=971), B. Diarrhea (n=599), Typhoid (n=531), SARI (n=492), suspected Cholera (n=433), Viral Hepatitis (VH B, C, & D) (n=140) and CL (n=108).
- In comparison with previous week
 i.e. WK23, the cases of AD, ALRI
 <5 years, Typhoid and S. Cholera
 increased whereas cases of ILI, SARI,
 VH and CL diseases decreased.
- Cases of Acute Viral Hemorrhagic fever reported from KP (n=30), Balochistan (n=15), and Sindh (n=13).
- Cases of Malaria reported from Sindh (n=694), Balochistan (n=423), KP (n=252), and AJK (n=08).
- Maximum cases of Cutaneous Lieshmaniasis (CL) reported from Balochistan (n=99).
- 04 cases of Neonatal Tetanus (NNT) reported from Pishin, and 11 cases of Meningitis reported from Killa Abdullah (Balochistan) this week. This need immediate verification, epidemiological investigations, and response activities.

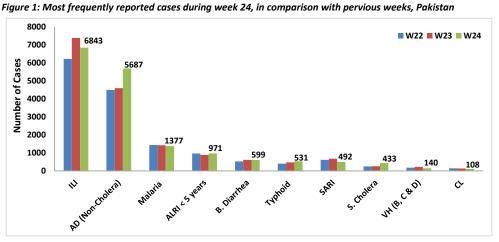


Table 1: Province/Area wise distribution of most frequently reported cases during week 24, Pakistan

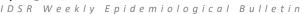
Diseases	AJK	Baloch.	GB	1CT	КР	Sindh	Total
ILI	2	2,056	18	31	1,335	3,401	6,843
AD (Non-Cholera)	49	976	24	96	1,556	2,986	5,687
Malaria	8	423	0	0	252	694	1,377
ALRI < 5 years	0	94	19	0	69	789	971
B. Diarrhea	0	204	2	0	101	292	599
Typhoid	0	164	24	0	197	146	531
SARI	0	72	6	0	381	33	492
S. Cholera	0	53	18	0	146	216	433
VH (B, C & D)	0	3	1	0	0	136	140
CL	0	99	0	0	4	5	108
AVH	0	15	2	0	30	13	60

Point of Attention:

- After break of 05 weeks, IDSR Weekly Teleconference resumed with the objective that all IDSRS districts
 focal persons will participate to discuss data flow challenges with NIH and ways to resolve those issues and
 scale up IDSR system in the country. However this week none of the focal person participated.
- There is a need to verify the alerts for early detection and response activities by the IDSR teams and other concerned departments in their respective provinces and areas.
- Acute viral hemorrhagic fever cases were reported more from KP, Balochistan and Sindh. This need verification, outbreak investigation and response activities at earliest.
- Neonatal Tetanus, Meningitis, Pertussis, Measles, and Chickenpox cases reported more from Balochistan.
 This need verification, outbreak investigation and response activities at earliest. Further, Vaccine Preventable Diseases (VPDs) need strengthening of routine immunization to prevent further outbreaks.
- Except for AJK, Typhoid cases are regularly reported from Balochistan, KP, Sindh, ICT and GB. Detailed timely
 is investigation and classification (i.e. MDR or XDR) is required followed by response activities accordingly.
- Malaria cases reported more from Sindh, Balochistan, KP and AJK. Verification, epidemiological investigation and response action is urgently required.
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices especially for diarrheal diseases and typhoid affected districts.









Sindh

- Sindh reported maximum cases of ILI (n=3401) followed by AD (Non Cholera) (n=2986), ALRI< 5 Years (n=789), Malaria (n=694), B. Diarrhea (n=292), S. Cholera (n=216), Typhoid (n=146), VH (B, C & D) (n=136), SARI (n=33) and Measles (n=23).
- District Ghotki reported the maximum cases of ILI, AD (Non Cholera), ALRI <5 years, Malaria and B. Diarrhea.
- District Hyderabad reported maximum cases of ILI, AD (Non-Cholera) and ALRI <5 years and S. Cholera.
- From Karachi East maximum cases reported as AD (Non-Cholera).
- From Karachi Malir, maximum cases reported are of ILI and AD (Non-Cholera).
- Noshero Feroz reported maximum cases of Malaria and AD (Non Cholera).
- Shikarpur reported maximum cases ALRI <5 years.
- From Tharparkar maximum cases of ILI and Malaria.
- This week, Decrease in case trend observed in ILI whereas for AD (Non-Cholera) and ALRI <5 years, it remains almost same.
- Cases of Measles, Chickenpox, VH
 (B, C & D) need immediate
 verification, epidemiological
 investigations, and response
 activities.

Figure 2: Most frequently reported cases during week 24, in comparison with pervious weeks, Sindh

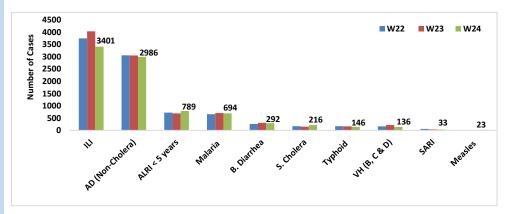
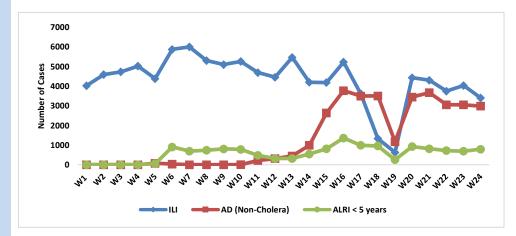


Table 2: District wise distribution of most frequently reported cases during week 24, Sindh

Diseases	Ghotki	Hyderabad	K.East	K.Malir	Naushero Feroze	Shikarpur	Thar- parkar	Total
ILI	453	2,577	0	215	72	18	66	3,401
AD (Non- Cholera)	732	1,156	140	407	95	56	400	2,986
ALRI < 5 years	250	268	0	87	27	76	81	789
Malaria	183	34	26	39	161	14	237	694
B. Diarrhea	190	28	3	20	7	6	38	292
S. Cholera	25	148	1	34	0	1	7	216
Typhoid	46	6	0	48	17	3	26	146
VH (B, C & D)	80	7	0	32	4	0	13	136
SARI	2	24	0	0	0	7	0	33
Measles	14	1	0	1	0	3	4	23
Chickenpox	4	1	0	0	0	1	0	6

Figure 3: Week wise reported cases of ILI, AD (Non-Cholera) & ALRI < 5 years, Sindh







Balochistan

- From Balochistan overall ILI
 (n=2056), AD (Non Cholera) (n=976),
 Malaria (n=423), B. Diarrhea (n=204),
 Typhoid (n=164), CL (n=99), ALRI <5
 years (n=94), SARI (n=72), S. Cholera
 (53), and Pertussis (n=20) remained
 at maximum.
- District Gwadar reported maximum cases of ILI and AD (Non Cholera).
- District Kech reported maximum cases of ILI, AD (Non-Cholera), and Malaria.
- District Killa Abdullah reported maximum cases for ILI, AD (Non-Cholera), and CL this week.
- District Lasbella reported maximum cases for Malaria followed by AD (Non-Cholera).
- District Pishin reported more cases for ILI and AD (Non-Cholera), B.
 Diarrhea, and Typhoid.
- District Quetta reported maximum cases for ILI followed by AD (Non-Cholera).
- In week24, increase trend observed for ILI and Malaria however for AD (Non-Cholera), it is almost the same as in week 23.
- Cases of NNT, Chickenpox, Meningitis, Measles and Pertussis need immediate verification, epidemiological investigation and response actions. Routine Immunization needs to be strengthened.

Figure 4: Most frequently reported cases during week 24, in comparison with previous weeks, Balochistan

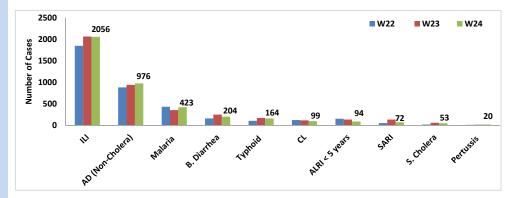
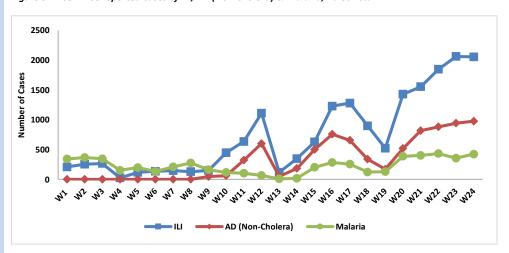


Table 3: District wise distribution of most frequently reported cases during week 24, Balochistan

Diseases	Gwadar	Kech (Turbat)	Killa Abdullah	Lasbella	Pishin	Quetta	Total	
ILI	414	409	308	15	175	735	2,056	
AD (Non- Cholera)	237	182	54	147	128	228	976	
Malaria	23	120	12	219	34	15	423	
B. Diarrhea	22	30	0	28	93	31	204	
Typhoid	20	0	6	11	88	39	164	
CL	0	0	53	1	12	33	99	
ALRI < 5 years	3	22	0	63	6	0	94	
SARI	4	4	0	64	0	0	72	
S. Cholera	0	0	0	23	30	0	53	
Pertussis	0	0	0	5	15	0	20	
Measles	0	0	5	0	0	10	15	
Meningitis	0	0	11	0	0	0	11	
Chickenpox	0	0	0	0	4	0	4	
N. Tetanus	0	0	0	0	4	0	4	

Figure 5: Week wise reported cases of ILI, AD (Non-Cholera) & Malaria, Balochistan







Khyber Pakhtunkhwa

- KP reported the maximum AD (Non Cholera) (n=1556), ILI (n=1335), SARI (n=381), Malaria (n=252), Typhoid (n=197), S. Cholera (n=146), B. Diarrhea (n=101), ALRI <5 years (n=69), AVH (n=30) and Mumps (n=12).
- District Kohat remained the most affected district and reported maximum cases of AD, ILI, SARI and Malaria.
- District Haripur reported maximum cases of ILI, AD and Typhoid Fever this week.
- Weekly trend of AD (Non Cholera) showed sharp rise followed by ILI, while SARI cases declined.
- Cases of AVH, Mumps and Measles need immediate verification, epidemiological investigation and response actions. Routine Immunization needs to be strengthened.

Figure 6: Most frequently reported cases during week 24, in comparison with pervious weeks, KP

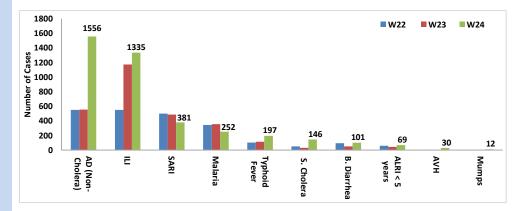
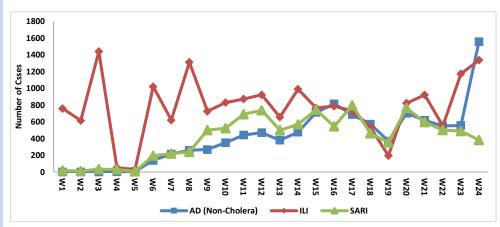


Table 4: District wise distribution of most frequently reported cases during week 24, KP

Diseases	Haripur	Kohat	Total
AD (Non-Cholera)	930	626	1,556
ILI	992	343	1,335
SARI	38	343	381
Malaria	79	173	252
Typhoid Fever	129	68	197
S. Cholera	77	69	146
B. Diarrhea	41	60	101
ALRI < 5 years	49	20	69
AVH	30	0	30
Mumps	12	0	12
Measles	1	3	4

Figure 7: Week wise reported cases of ILI, AD(Non-Cholera) & SARI, KP

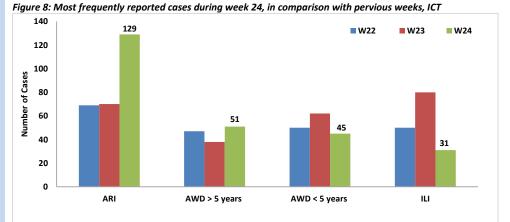






Islamabad (ICT)

- Form ICT, most frequent reported diseases were ARI (129) followed by AWD >5 years (n=51), AWD <5 years (n=45) and ILI (n=31).
- During week 24, decrease in trend observed AWD (both <5 & >5 years and slightly increased for ARI.





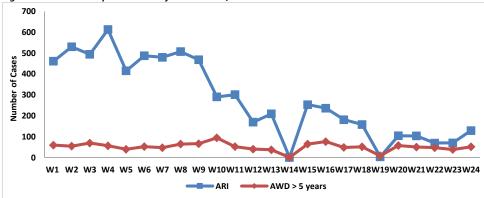
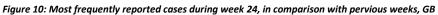
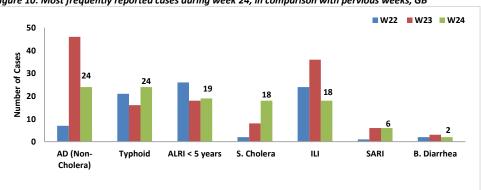


Table 5: District wise distribution of most frequently reported cases during week 24, GB

Diseases	Hunza	Nagar	Total
AD (Non-Cholera)	9	15	24
Typhoid	5	19	24
ALRI < 5 years	15	4	19
S. Cholera	15	3	18
ILI	0	18	18
SARI	3	3	6
Dengue	0	5	5
AVH	0	2	2
B. Diarrhea	0	2	2
Leprosy	0	1	1





Gilgit Baltistan

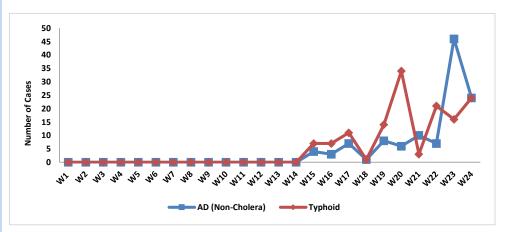
- From Gilgit Baltistan, maximum cases reported were of AD (Non-Cholera) (n=24), Typhoid (n=24), ALRI<5 years (n=19), S. Cholera (n=18), and ILI (n=18).
- District Hunza reported maximum cases for ALRI <5 years and S.
 Cholera.
- District Nagar reported maximum cases for Typhoid, AD (Non-Cholera), and ILI.

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 Weekly cases of AD went down sharply, while Typhoid cases increased this week in comparison with the previous week (WK 23).

Figure 11: Week wise reported cases of AD (Non-Cholera) & Typhoid, GB



Azad Jammu & Kashmir

- In AJK, ARI (n=64), AWD> 5 years (n=37), AWD<5 years (12), and Malaria (n=8) remained at maximum.
- Overall weekly cases of ARI increased in comparison with the previous week (WK 21).

Figure 12: Most frequently reported cases during week 24, in comparison with pervious weeks, AJK

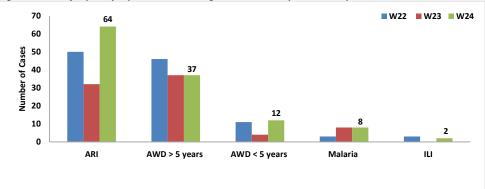
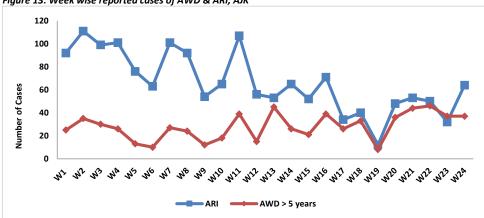


Figure 13: Week wise reported cases of AWD & ARI, AJK







IDSR Participating Districts

- 100% health facilities from Kohat, Karachi East & Tharparkar reported data.
- District Umerkot did not report data this week.

Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)	
Khyber Pakhtunkhwa	Haripur	70/70	66 (94%)	
Knyber Pakhtunkhwa	Kohat	59/59	59 (100%)	
Azad Jammu Kashmir	Mirpur	37/37	30 (81%)	
Islamabad Capital Territory	Islamabad	23/32	13(57%)	
	Gwadar	24/24	20 (83%)	
	Kech	34/78	16 (47%)	
	Killa Abdullah	18/50	17 (94%)	
Balochistan	Lasbella	82/82	72 (88%)	
	Quetta	20/77	15 (75%)	
	Pishin	23/118	17 (74%)	
ett 11	Hunza	30/30	27 (90%)	
Gilgit	Nagar	22/22	7 (32%)	
	Hyderabad	63/63	57 (90%)	
	Karachi-East	14/14	14 (100%)	
Sindh	Karachi-Malir	43/43	29 (67%)	
	Ghotki	94/94	58 (62%)	
	Umerkot	30/118	0 (0%)	
	NosheroFeroz	50/50	08 (16%)	
	Tharparkar	28/236	28 (100%)	
	Shikarpur	21/21	10 (48%)	

^{*}percentage ={Sites Reported data/Agreed Reporting Sites (ARS)}*100



