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Weekly Bulletin: Integrated Disease Surveillance and Response (IDSR)

5th August 2021

Highlights of the Epi-Week 30 (26th July – 01st August 2021)

Cumulative Information:

- Maximum cases of Acute Diarrhea (Non Cholera), ILI, Malaria, ALRI <5 years, SARI, B. Diarrhea, Typhoid, S. Cholera, Acute Viral Hepatitis, Viral Hepatitis (B, C & D), Dog bite/ Rabies, Cutaneous Leishmaniasis, Measles and Dengue Fever are reported this week.
- In comparison with previous week i.e. WK-29, all diseases shown an increasing trend.
- High No. of suspected Cholera cases were reported from Sindh and KP which need urgent attention and response accordingly.
- Cases of dog bite are being reported consistently from Sindh, KP, and Balochistan, which need epidemiological investigations and response action in One-Health perspective. Rabies vaccine and immunoglobulins should be administered to dog bite cases as a part of their clinical management.
- Food and water borne diseases i.e. AD (Non-Cholera), Suspected Cholera, Typhoid and AVH are regularly reported across the country. Based on the ongoing rainy season there is a need to investigate and response accordingly.
- Most cases of Measles were reported from Balochistan which need verification, epidemiological investigations and response activities.

Figure 1: Most frequently reported cases during week 30, in comparison with previous weeks, Pakistan

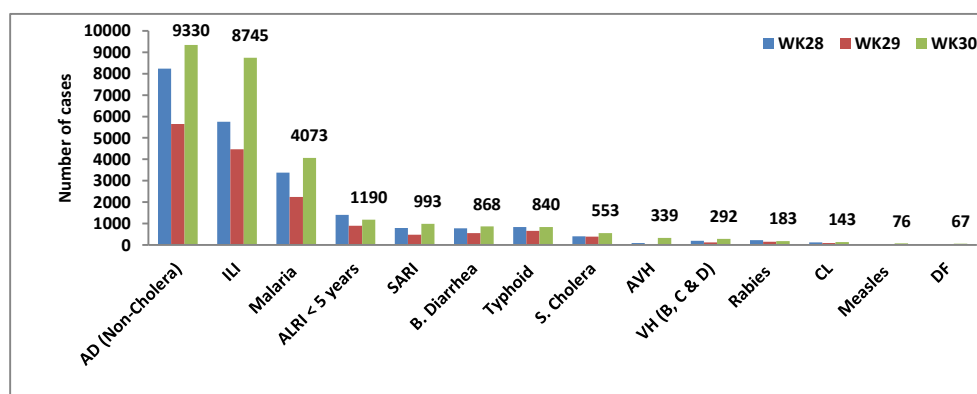


Table 1: Province/Area wise distribution of most frequently reported cases during week 30, Pakistan

Diseases	AJK	Balochistan	GB	ICT	KP	Sindh	Total
AD (Non-Cholera)	0	1,137	41	31	3,878	4,243	9,330
ILI	3	2,569	22	128	1,476	4,547	8,745
Malaria	0	478	0	0	2128	1467	4,073
ALRI < 5 years	0	152	33	0	189	816	1,190
SARI	0	143	13	5	668	164	993
B. Diarrhea	0	314	17	0	282	255	868
Typhoid	0	173	33	4	425	205	840
S. Cholera	0	38	19	0	208	288	553
AVH	0	1	13	0	65	260	339
VH (B, C & D)	0	13	0	0	5	274	292
Rabies / Dog bite	0	22	0	0	88	73	183
CL	0	139	0	0	4	0	143
Measles	0	34	0	0	27	15	76
DF	0	10	4	0	50	3	67

Point of Attention:

- There is a need to verify cases of ILI and ALRI <5 years country wide, and to initiate response activities.
- AD (Non-Cholera), S. Cholera and Typhoid cases are regularly reported from Balochistan, KP, Sindh, and GB. Spot mapping for identification of affected areas is required to identify the risk factors and implementation of response activities to minimize the spread of the diseases.
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices especially for food and water borne diseases reporting districts.
- Dog bite cases are regularly reported from Sindh, KP, and Balochistan. Awareness sessions should be conducted in health facilities for clinical management, and timely referral to tertiary care hospital (if required). Availability of Rabies vaccine and immunoglobulin should be ensured at health facilities level in high risk areas. Moreover, **strategies should be devised to reduce the rabies burden till 2030.**
- Cases of vaccine preventable diseases are being reported every week. Vigilant monitoring, alert verification, outbreak investigation, and coordination with EPI needs to be strengthened to reduce the cases.

Sindh

- Sindh reported maximum cases of ILI (n=4,547), AD (Non Cholera) (n=4,243), followed by Malaria (n=1467), ALRI <5 Years (n=816), S. Cholera (n=288), VH (B, C & D) (274), AVH (260), B. Diarrhea (n=255), Typhoid (n=205), SARI (n=164), Rabies (n=73), Leprosy (n=60), Chickenpox (n=18), Measles (n=15) and Mumps (n=8).
- District Ghotki reported the maximum cases of ILI, AD (Non Cholera), ALRI <5 years and Viral hepatitis (B, C, & D).
- District Hyderabad reported maximum cases of ILI, AD (Non-Cholera), ALRI <5 years and S. Cholera.
- From Karachi East, maximum cases reported were of AD (Non-Cholera) and Malaria.
- From Karachi Malir, maximum cases reported were of AD (Non-Cholera), ILI, ALRI <5 years and suspected Cholera.
- Shikarpur reported maximum cases of AD (Non-Cholera) and ALRI <5 years.
- From Thatta, maximum cases of ILI, AD (Non-Cholera), Malaria, ALRI <5, and B. Diarrhea were reported.
- From Tharparkar, maximum cases of AD (Non-Cholera), Malaria, AVH, and VH (B, C, & D) were reported.
- This week, increase in case trend observed for Malaria and AVH.
- Cases of Rabies/ Dog bite were reported from Ghotki (n=41), Tharparkar (n=22) and Karachi Malir (n=1) which need epidemiological investigations and response in One-Health perspective.
- Cases of vaccine preventable diseases were reported which need immediate verification, epidemiological investigations, and response activities. Routine immunization needs to be strengthened.

Figure 2: Most frequently reported cases during week 30, in comparison with pervious weeks, Sindh

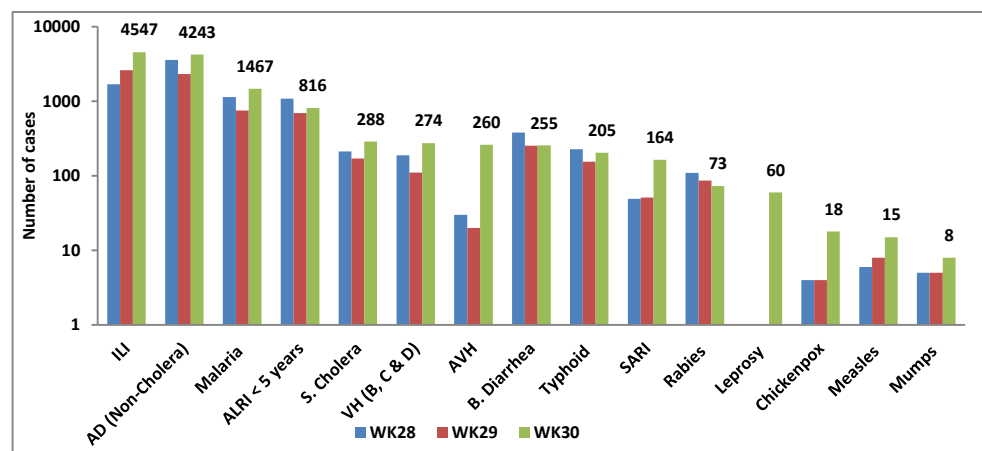
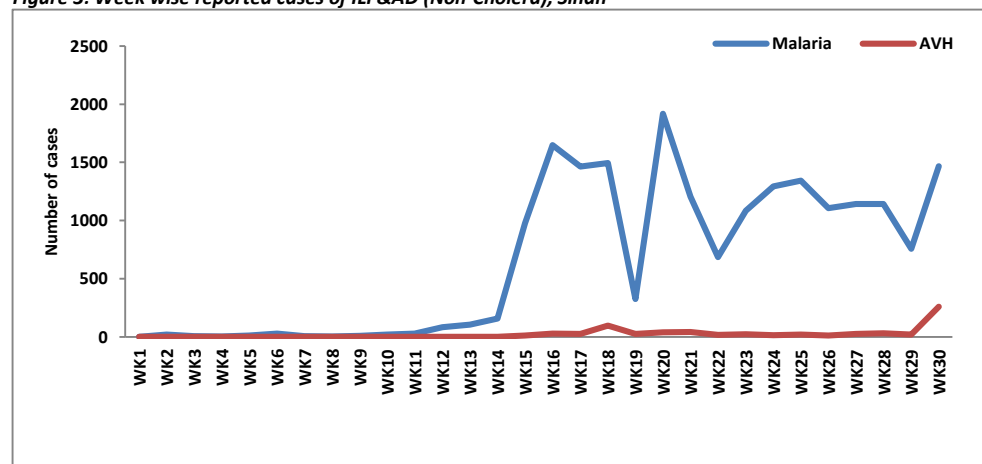


Table 2: District wise distribution of most frequently reported cases during week 30, Sindh

Diseases	Ghotki	Hyderabad	Karachi East	Karachi Malir	Shikarpur	Thatta	Tharparkar	Total
ILI	425	2614	4	413	0	1027	64	4547
AD (Non-Cholera)	126	1113	174	768	16	1178	868	4243
Malaria	15	43	33	50	7	995	324	1467
ALRI < 5 years	74	257	4	135	35	272	39	816
S. Cholera	41	125	0	115	0	0	7	288
VH (B, C & D)	122	42	0	1	0	15	94	274
AVH	0	5	0	0	0	9	246	260
B. Diarrhea	41	36	3	19	0	107	49	255
Typhoid	21	6	0	60	0	74	44	205
SARI	4	24	0	127	0	5	4	164
Rabies / Dog bite	41	0	0	1	0	9	22	73
Leprosy	0		0	0	0	0	60	60
Chickenpox	0	10	0	0	0	5	3	18
Measles	0	1	0	0	0	4	10	15
Mumps	0	1	0	1	1	4	1	8

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



Balochistan

- From Balochistan overall ILI (n=2,569), AD (Non Cholera) (n=1,137), Malaria (n=478), B. Diarrhea (n=314), Typhoid (n=173), ALRI <5 years (n=152), SARI (n=143), CL (n=139), suspected Cholera (n=38), Measles (n=34), Rabies/ Dog bite (n=22), VH (B, C, D & ED) (n=13), and Dengue fever (n=10) remained at maximum.
- District Kech reported maximum cases of ILI, AD (Non-Cholera), Malaria and B. Diarrhea.
- District Khuzdar reported maximum cases for ILI, AD (Non-Cholera), Malaria, and B. Diarrhea.
- District Killa Abdullah reported maximum cases for ILI, AD (Non-Cholera), and CL.
- District Lasbella reported maximum cases for AD (Non-Cholera), Malaria, B. Diarrhea, ALRI <5 years, and SARI.
- District Pishin reported more cases for ILI, AD (Non-Cholera), B. Diarrhea, Typhoid, and CL.
- District Quetta reported maximum cases for ILI, AD (Non-Cholera), B. Diarrhea, and CL.
- Cases of Dengue fever reported from Kech and Lasbella which need immediate verification, epidemiological investigation and response actions.
- Cases of Rabies/ Dog bite need immediate verification, epidemiological investigations, and response activities at human-animal interface.
- In comparison with last week, ILI, AD (Non Cholera), and Malaria shown increased trend.

Figure 4: Most frequently reported cases during week 30, in comparison with previous weeks, Balochistan

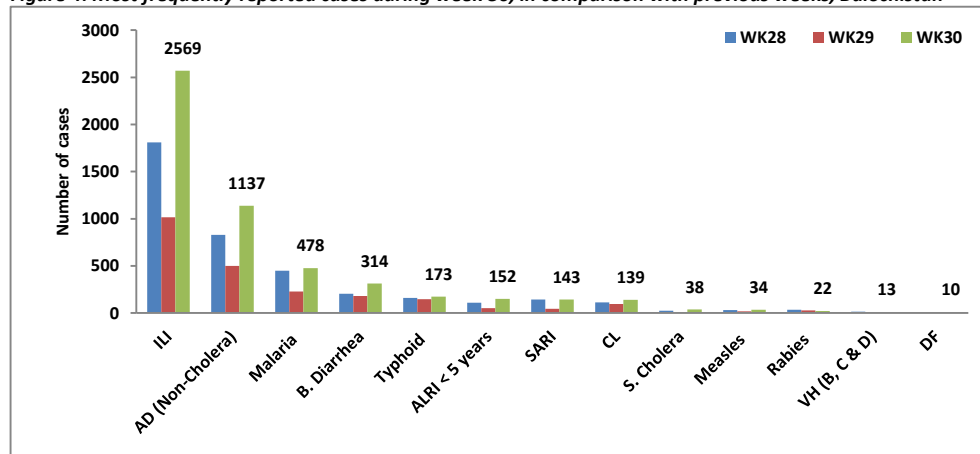
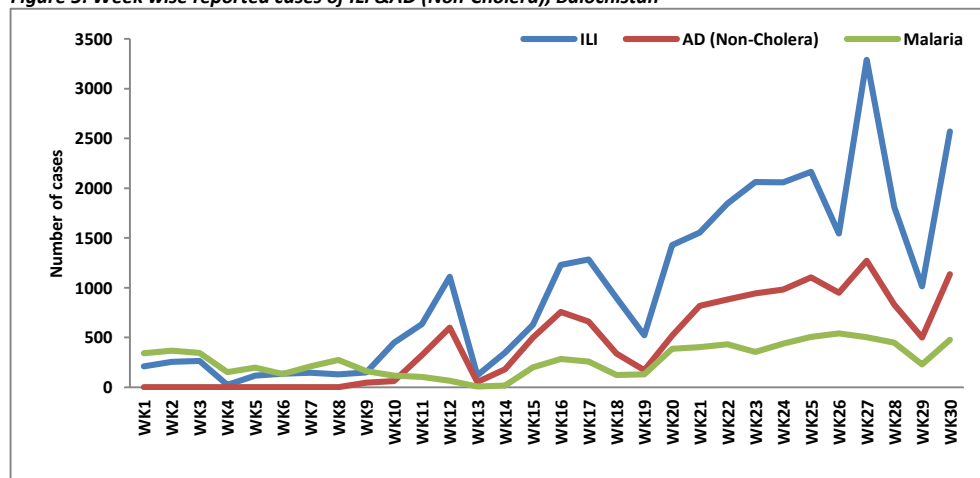


Table 3: District wise distribution of most frequently reported cases during week 30, Balochistan

Diseases	Kech (Turbat)	Khuzdar	Killa Abdullah	Lasbella	Pishin	Quetta	Total
ILI	1224	135	242	33	185	750	2569
AD (Non-Cholera)	382	90	163	166	41	295	1137
Malaria	153	119	12	169	20	5	478
B. Diarrhea	57	73	0	77	47	60	314
Typhoid	49	43	15	14	31	21	173
ALRI < 5 years	44	32	0	76	0	0	152
SARI	46	27	0	70	0	0	143
CL	0	4	50	5	34	46	139
S. Cholera	0	17	0	21	0	0	38
Measles	0	15	2	9	0	8	34
Rabies / Dog bite	0	3	1	6	12	0	22
VH (B, C & D)	6	1	0	6	0	0	13
DF	6	0	0	4	0	0	10

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



Khyber Pakhtunkhwa (KP)

- KP reported cases of AD (Non Cholera) (n=3,878), Malaria (n=2,128), ILI (n=1,476), SARI (n=668), Typhoid (n=425), B. Diarrhea (n=282), suspected Cholera (n=208), ALRI <5 years (n=189), Rabies/Dog bite(n=88), AVH (A&E) (n=65), DF (n=50), Measles (n=27), Chickenpox (n=24), and Mumps (n=11) at maximum.
- District Abbottabad reported maximum cases of AD (Non-Cholera), SARI, and suspected Cholera
- District Charsadda reported maximum cases of AD (Non-Cholera), Malaria, SARI, Typhoid, B. Diarrhea, and suspected Cholera
- District Haripur reported maximum cases of AD (Non-Cholera), ILI, Malaria, Typhoid, ALRI <5 years, and SARI.
- District Kohat reported maximum cases of AD (Non Cholera), ILI, Malaria, Typhoid, ALRI < 5 years, and SARI.
- Weekly cases of ILI and AD (Non Cholera) shown an increase trend as compared to week 29.
- Cases of Rabies/ Dog bite, Chickenpox, Measles, and Mumps need immediate verification, epidemiological investigation and response actions.
- Routine Immunization needs to be strengthened.

Figure 6: Most frequently reported cases during week 30, in comparison with pervious weeks, KP

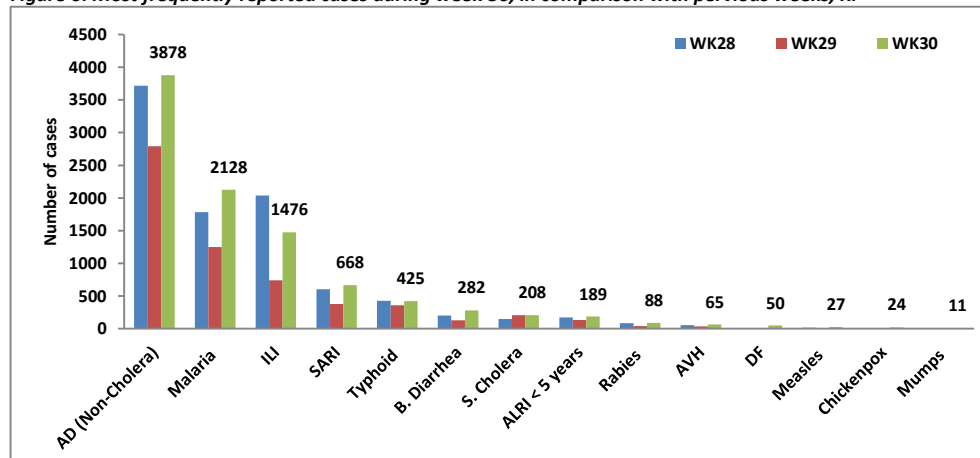
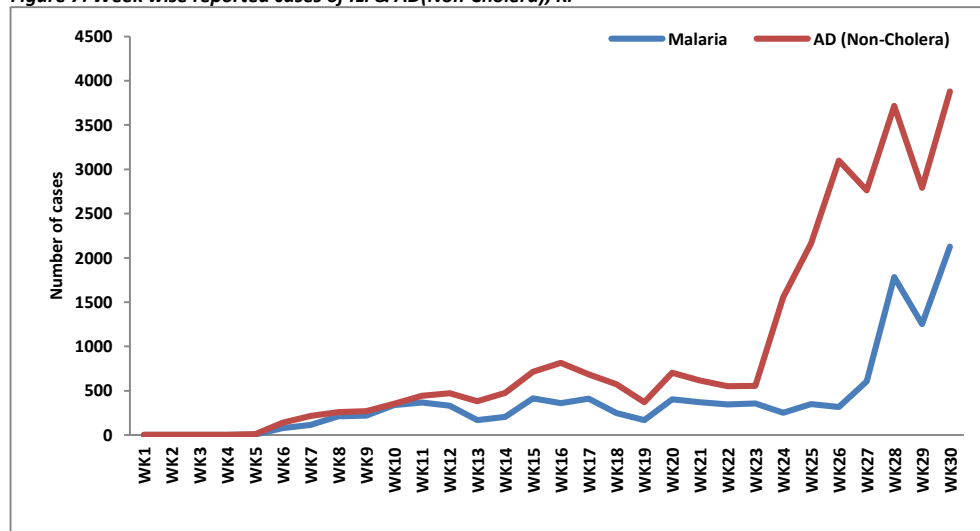


Table 4: District wise distribution of most frequently reported cases during week 29, KP

Diseases	Abbottabad	Charsadda	Haripur	Kohat	Laki Marwat	Total
AD (Non-Cholera)	1109	729	1430	403	207	3878
Malaria	6	1445	140	246	291	2128
ILI	0	63	961	445	7	1476
SARI	165	209	71	223	0	668
Typhoid	50	215	106	39	15	425
B. Diarrhea	19	163	56	33	11	282
S. Cholera	55	88	49	16	0	208
ALRI < 5 years	10	11	91	58	19	189
Rabies / Dog bite	0	0	69	11	8	88
AVH	0	7	58	0	0	65
DF	0	0	50	0	0	50
Measles	1	20	1	0	5	27
Chickenpox	0	9	15	0	0	24
Mumps	0	4	7	0	0	11

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



Islamabad (ICT)

- From ICT, the most frequent reported diseases are ILI (n=128), AD (Non-Cholera) (n=31), and SARI (n=5), followed by Typhoid (n=4) and Gonorrhea (n=1).
- During this week, an increase trend observed for cases of ILI while slight increase observed for AD (Non-Cholera) as compared to previous week i.e. week 29.
- One case of Gonorrhea was reported which need immediate verification, epidemiological investigation, and response measures.
- There is a need to be vigilant about cases of vaccine preventable diseases, and routine immunization should be strengthened to prevent these diseases.

Figure 8: Most frequently reported cases during week 30, in comparison with pervious weeks, ICT

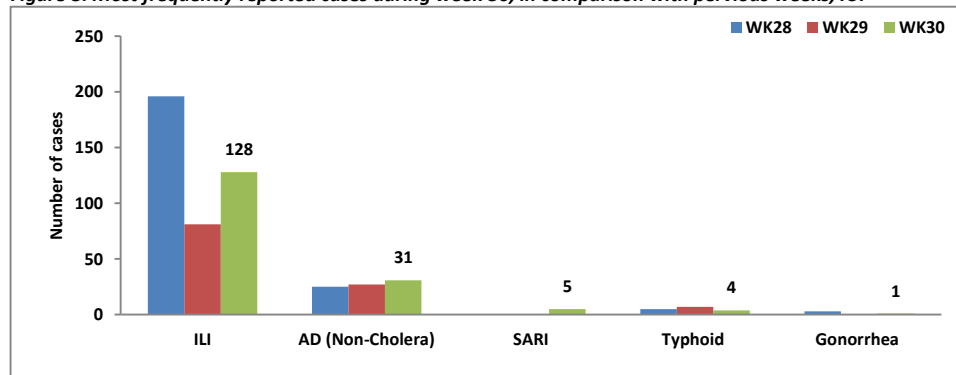


Figure 9: Week wise reported cases of ILI and ARI, ICT

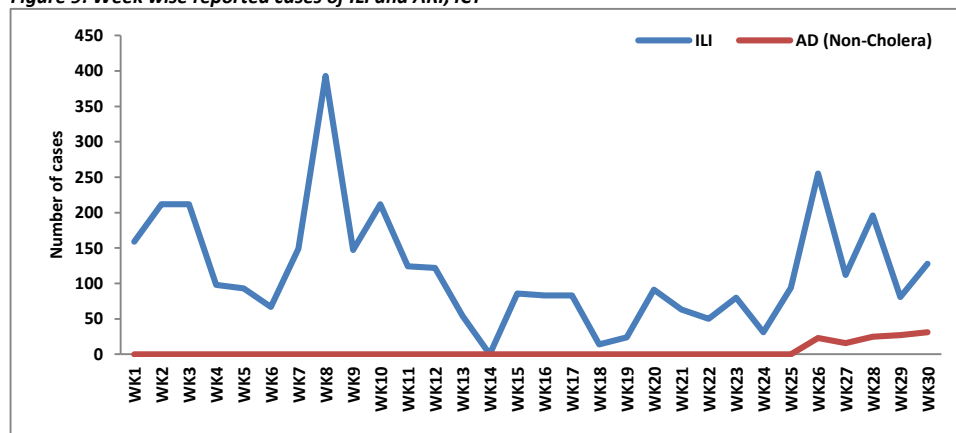


Figure 10: Most frequently reported cases during week 30, in comparison with pervious weeks, GB

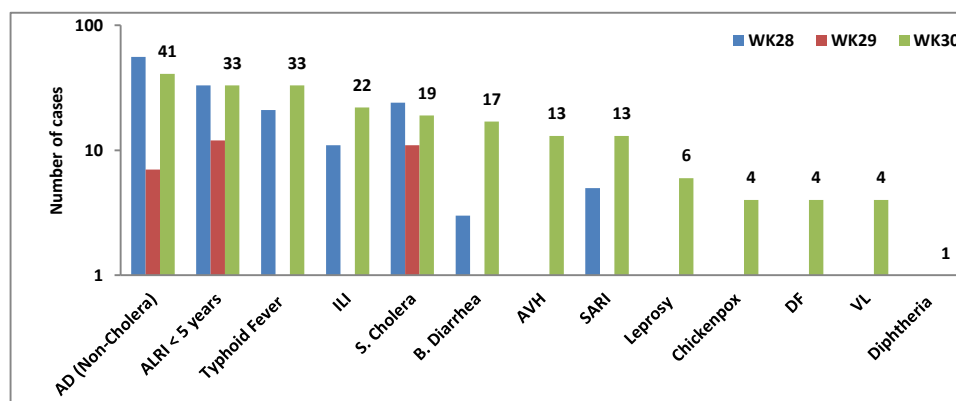
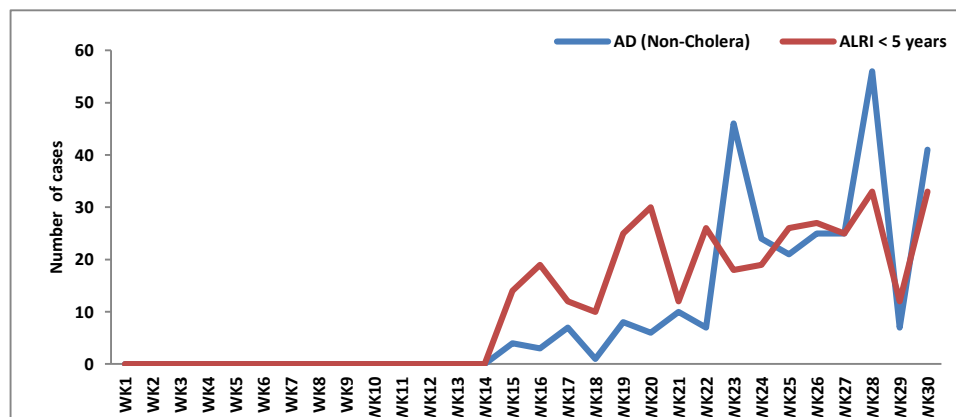


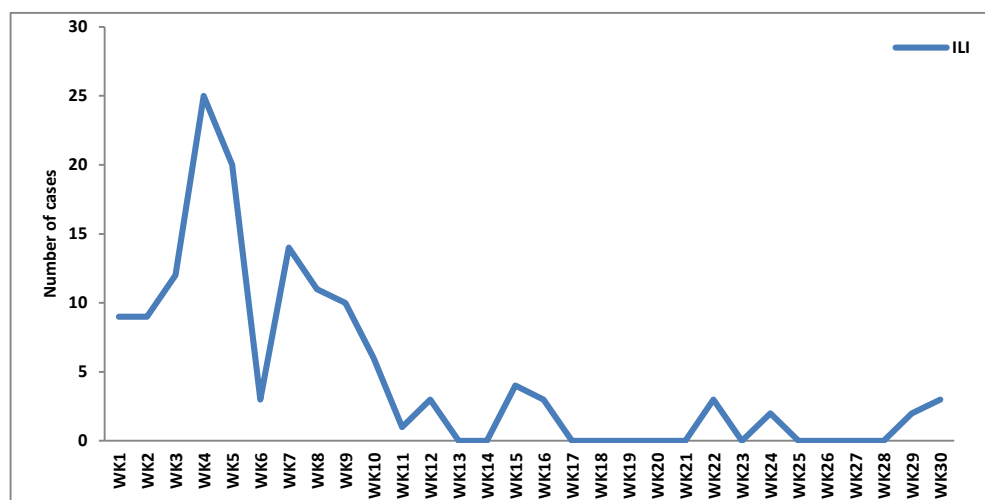
Figure 11: Week wise reported cases of S. Cholera and ALRI < 5 years, GB



Azad Jammu & Kashmir

- From AJK, Mirpur reported 03 cases of ILI.
- There was increase in ILI cases trend in this week as compared to the previous week.

Figure 12: Week wise reported cases of ILI, AJK



IDSR Participating Districts

- All (100%) health facilities from Haripur, Kohat, CDA, Killa Abdullah, Karachi East, Tharparkar, and Thatta reported data this week.
- No data reported from district Gwadar, Umerkot, and Naushero Feroze.

Table 6: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)
Khyber Pakhtunkhwa	Haripur	68/68	68 (100%)
	Kohat	59/59	59 (100%)
Azad Jammu Kashmir	Mirpur	37/37	30 (81%)
Islamabad Capital Territory	ICT	18/18	15 (84%)
	CDA	5/12	5(100%)
Balochistan	Gwadar	24/24	0 (0%)
	Kech	40/78	38 (95%)
	Khuzdar	19/136	17 (90%)
	Killa Abdullah	20/50	20 (100%)
	Lasbella	82/82	81(99%)
	Pishin	23/118	20 (87%)
	Quetta	22/77	18 (82%)
Gilgit	Hunza	30/30	25 (84%)
	Nagar	22/22	11(50%)
Sindh	Hyderabad	63/63	56 (89%)
	Karachi-East	14/14	12 (86%)
	Karachi-Malir	43/43	37 (86%)
	Ghotki	58/58	16 (28%)
	Umerkot	30/118	0 (0%)
	Naushero Feroze	52/52	0 (0%)
	Tharparkar	74/236	74(100%)
	Shikarpur	18/21	16(89%)
	Thatta	24/50	24(100%)

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