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16th September 2021

Highlights of the Epi-Week 36 (6th September – 12th September 2021)

Cumulative Information:

- During this week, maximum cases reported were of ILI, Acute Diarrhea (Non Cholera), Malaria, ALRI <5 years, Typhoid, SARI, B. diarrhea, suspected Cholera, Rabies/ Dog bite & Viral Hepatitis (B, C & D).
- In comparison with previous week i.e. Week-35, Malaria cases have shown an increasing trend whereas rest of all reported diseases shown decline in trend.
- Persistent reporting of suspected Cholera cases need urgent attention in terms of epidemiological investigations and response measures.
- Cases of Measles, Chickenpox and Mumps cases were reported from Balochistan, Sindh & KP, therefore routine immunization needs to be strengthened in order to decrease the disease burden of VPDs.
- Food and water borne disease have been reported. Therefore, water & sanitation departments, and food authorities may be taken on board for implementation of response measure, and prevention of further spread of disease.
- Dog bite cases need follow up, and proper clinical management/ vaccination. Response measures may be taken at human-animal interface.

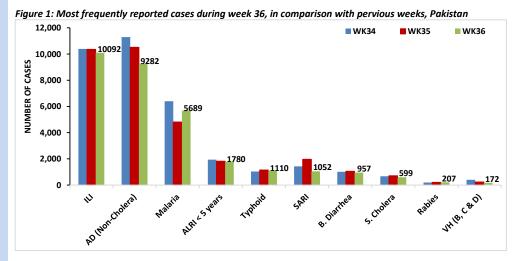


Table 1: Province/Area wise distribution of most frequently reported cases during week 36, Pakistan

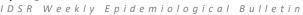
Diseases	AJK	Balochistan	GB	ICT	КР	Sindh	Total
ILI	0	3,304	3	83	1,842	4,860	10,092
AD (Non-Cholera)	9	1,657	20	195	3,462	3,939	9,282
Malaria	0	1,258	0	23	2,289	2,119	5,689
ALRI < 5 years	7	189	18	95	432	1,039	1,780
Typhoid	0	263	7	6	614	220	1,110
SARI	0	155	4	24	791	78	1,052
B. diarrhea	0	411	2	5	292	247	957
S. Cholera	0	75	2	6	246	270	599
Rabies / Dog bite	0	30	1	0	81	95	207
VH (B, C & D)	0	7	0	0	0	165	172
Measles	0	44	0	0	18	8	70
Chickenpox	0	3	1	0	45	1	50
Mumps	0	9	0	0	23	3	35

Point of Attention

- AD (Non-Cholera), suspected Cholera and Typhoid cases reported from Balochistan, KP, Sindh, and GB
 needs spot mapping for identification of affected areas, and implementation of response activities.
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices
 especially for food and water borne diseases which are regularly reporting from districts.
- 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.
- To prevent further rise in cases of Dengue fever across country, there is a need to closely monitor Dengue fever cases, larva density, and implement public health response activities in hotspot areas.
- Dog bite cases are regularly reported, therefore, community awareness sessions may arranged for wound management, importance of Rabies vaccine, and information about treatment centers. District health authorities in collaboration with animal health department and municipal corporations should devise strategies for control stray dogs. At provincial level a comprehensive Rabies control plan should be developed and implemented for control of Rabies.
- IDSR focal persons may share alert verification and outbreak investigation reports. This may help in furnishing
 details on disease burden, circulating pathogens and devising national strategies for prevention & control of
 diseases.









Sindh

- Sindh reported maximum cases of ILI (n=4,860), AD (Non Cholera) (n=3,939), Malaria (n=2,119), ALRI
 Years (n=1,039), suspected Cholera (n=270), B. diarrhea (n=247), Typhoid (n=220), VH (B, C & D) (n=165), Rabies/ Dog bite (n=95) & SARI (n=78).
- District Ghotki reported the maximum cases of ILI, VH (B, C & D), ALRI <5 years & AD (Non Cholera).
- District Hyderabad reported maximum cases of ILI, AD (Non Cholera), ALRI <5 years, suspected Cholera & B. diarrhea.
- 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, Typhoid & Malaria.
- Naushahro Feroze reported cases of ILI, AD (Non Cholera) & Malaria at maximum.
- Shikarpur reported maximum cases of AD (Non-Cholera) and Malaria.
- From Tharparkar, maximum cases of AD (Non-Cholera), Malaria, ILI, ALRI <5 years, B. Diarrhea &Typhoid were reported.
- From Thatta, maximum cases of Malaria, AD (Non-Cholera), ILI & ALRI <5 years were reported.
- Cases of Chikungunya were reported from Ghotki which need immediate verification, epidemiological investigation and vector surveillance response.
- Cases of Meningitis, Measles & NNT were reported, hence there is a need of strengthening routine immunization to decrease disease burden of VPDs.
- This week, a slight increase in case trend observed for Malaria & ILI while AD (Non Cholera) cases have depicted similar trend as compared to previous week.

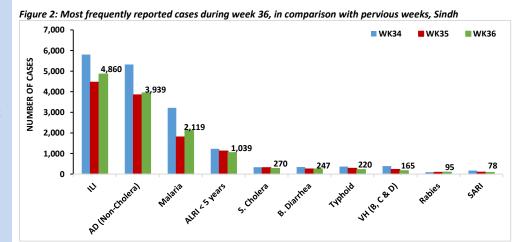
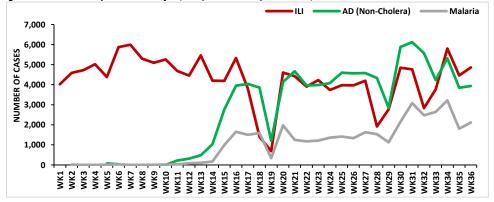


Table 2: District wise distribution of most frequently reported cases during week 36, Sindh

Diseases	Ghotki	Hyderabad	K. East	K. Malir	Naushahro Feroze	Shikarpur	Tharparkar	Thatta	Total
ILI	300	2,602	10	425	231	1	813	478	4,860
AD (Non- Cholera)	91	1,072	182	579	109	156	1,069	681	3,939
Malaria	22	43	45	66	107	22	832	982	2,119
ALRI < 5 years	96	204	14	124	20	5	283	293	1,039
S. Cholera	40	174	0	28	13	0	0	15	270
B. Diarrhea	21	46	2	22	14	3	114	25	247
Typhoid	23	3	0	69	15	0	98	12	220
VH (B, C & D)	101	22	0	5	0	14	12	11	165
Rabies / Dog bite	42	NR	0	0	0	18	10	25	95
SARI	2	23	0	8	7	1	22	15	78
Chikungunya	28	NR	0	0	0	0	0	0	28
Meningitis	0	NR	0	0	0	0	8	0	8
Measles	1	NR	0	0	0	0	6	1	8
AFP	0	0	0	0	0	0	3	0	3
NNT	0	NR	0	0	0	0	0	1	1

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



(Note: NR= Not Reported)





Balochistan

- From Balochistan overall ILI
 (n=3,304), AD (Non Cholera)
 (n=1,657), Malaria (n=1,258), B.
 diarrhea (n=411), Typhoid (n=263),
 ALRI <5 years (n=189), SARI
 (n=155), CL (n=106), S. Cholera
 (n=75), and Measles (n=44),
 remained at maximum.
- District Gwadar reported maximum cases of ILI, AD (Non Cholera), Malaria & B. diarrhea.
- District Kech reported maximum cases of ILI, Malaria, AD (Non-Cholera), B. diarrhea & ALRI <5 years.
- District Khuzdar reported maximum cases of ILI, AD (Non-Cholera), Malaria, B. diarrhea & Typhoid.
- District Killa Abdullah reported most cases of ILI & AD (Non-Cholera).
- District Lasbella reported maximum cases for Malaria, AD (Non-Cholera), SARI, and ALRI <5 years.
- District Pishin reported more cases for ILI, AD (Non-Cholera), B. diarrhea and Typhoid.
- District Quetta reported maximum cases for ILI, AD (Non-Cholera) & B. diarrhea.
- Suspected Cholera cases are regularly reported from most of the districts need immediate verification, epidemiological investigations, and response activities.
- Cases of Gonorrhea from districts Khuzdar & Pishin need urgent attention in terms of differential diagnosis from UTIs, and response measures accordingly.
- Cases of Anthrax from district
 Pishin need immediate verification,
 epidemiological investigation and
 response.
- In comparison with last week, ILI cases depicted an upward trend while cases of AD (Non Cholera) have shown the same pattern.

Figure 4: Most frequently reported cases during week 36, in comparison with previous weeks, Balochistan

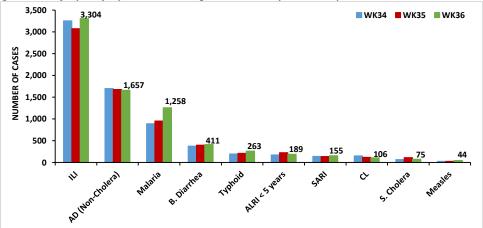
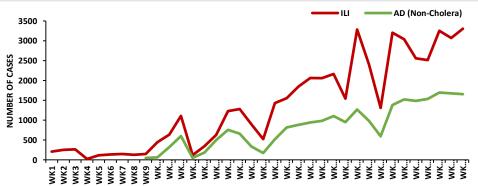


Table 3: District wise distribution of most frequently reported cases during week 36, Balochistan

Diseases	Gwadar	Kech (Turbat)	Khuzdar	Killa Abdullah	Lasbella	Pishin	Quetta	Total
ILI	458	1,423	167	273	38	196	749	3,304
AD (Non- Cholera)	198	475	123	187	187	160	327	1,657
Malaria	95	692	110	18	287	42	14	1,258
B. Diarrhea	45	98	87	NR	27	100	54	411
Typhoid	4	22	84	21	17	85	30	263
ALRI < 5 years	8	73	15	NR	56	37	0	189
SARI	2	47	19	NR	81	6	0	155
CL	NR	0	7	33	5	31	30	106
S. Cholera	NR	0	2	NR	36	7	30	75
Measles	17	2	7	18	0	0	0	44
Gonorrhea	NR	0	13	NR	0	13	0	26
Mumps	1	0	0	NR	1	6	1	9
Anthrax	NR	0	0	NR	0	9	0	9

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







Khyber Pakhtunkhwa (KP)

- KP reported cases of AD (Non Cholera) (n=3,462), Malaria (n=2,289), ILI (n=1,842), SARI (n=791), Typhoid (n=614), ALRI <5 years (n=432), B. diarrhea (n=292), S. Cholera (n=246), Rabies/ Dog bite (n=81) and Dengue (n=51).
- District Abbottabad reported maximum cases of AD (Non-Cholera), Typhoid & SARI.
- District Charsadda reported maximum cases of Malaria, AD (Non-Cholera), SARI, Typhoid, ILI, B. diarrhea, suspected Cholera & ALRI <5 years.
- District Haripur reported maximum cases of ILI, AD (Non-Cholera), ALRI <5 years, Malaria, SARI, Typhoid, B. Diarrhea, suspected Cholera & Rabies/Dog bite.
- District Kohat reported maximum cases of ILI, AD (Non Cholera), Malaria & SARI.
- District Lakki Marwat reported maximum cases of Malaria, AD (Non-Cholera), ALRI <5 years and Typhoid.
- Weekly cases of AD (Non Cholera) and ILI have shown a sharp decline while Malaria cases depicted a slight increase in trend as compared to previous week i.e. 35.
- Cases of Chickenpox, Measles, Mumps & Pertussis have been reported indicating to strengthen the routine immunization so that the disease burden of VPDs can be decreased.
- Cases of Brucellosis have been reported from district Charsadda which needs immediate verification, epidemiological investigation and public health response accordingly.
- Dengue and Malaria cases have been reported which need immediate verification. Health department in coordination with vector control program should carry out vector surveillance and control measures accordingly.

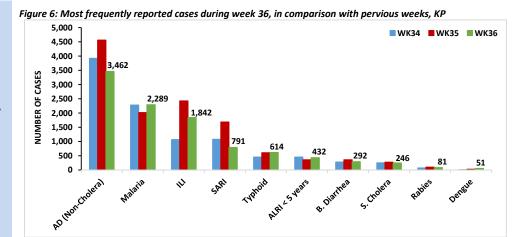
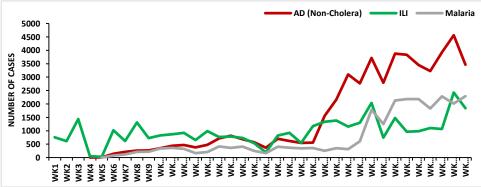


Table 4: District wise distribution of most frequently reported cases during week 36, KP

Diseases	Abbottabad	Charsadda	Haripur	Kohat	Lakki Marwat	Total
AD (Non-Cholera)	852	841	1,099	324	346	3,462
Malaria	0	1,657	87	181	364	2,289
ILI	0	166	1,214	420	42	1,842
SARI	112	390	85	165	39	791
Typhoid	227	191	85	47	64	614
ALRI < 5 years	31	101	141	36	123	432
B. Diarrhea	15	101	71	81	24	292
S. Cholera	28	101	61	53	3	246
Rabies / Dog bite	0	0	60	14	7	81
Dengue	20	0	31	0	0	51
Chickenpox	0	26	12	0	7	45
Mumps	0	6	7	0	10	23
Measles	0	6	5	0	7	18
AFP	1	1	0	0	4	6
Brucellosis	0	2	0	0	0	2
Pertussis	0	0	0	0	2	2

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







Islamabad (ICT)

- From ICT, the most frequent reported diseases were AD (Non-Cholera) (n=195), ALRI <5 years (n=95), ILI (n=83), SARI (n=24), Malaria (n=23), S. Cholera (n=06), followed by Typhoid (n=06) & B. diarrhea (n=05).
- During this week, a sharp decline was observed for cases of AD (Non Cholera) while cases of ALRI
 <5 years have shown an upward trend as compared to previous week i.e. week 35.

(Note: ICT started reporting data on new format, therefore, data before week-26 is not shown in trend graph).

Gilgit Baltistan

- Gilgit-Baltistan reported cases of AD (Non-Cholera) (n=20), ALRI <5 years (n=18), Typhoid (n=07), SARI (n=04), ILI (n=03), S. Cholera (n=02), B. diarrhea (n=02), Rabies/ Dog bite (n=01) and Chickenpox (n=01) this week.
- Weekly trend shows a sharp decline in cases of AD (Non Cholera) whereas cases of ALRI <5 years have shown a slight upward trend as compared to previous week i.e. Week-35.

(Note: GB started reporting data on new format, therefore, data before week-15 is not shown in trend graph)

Figure 8: Most frequently reported cases during week 36, in comparison with pervious weeks, ICT

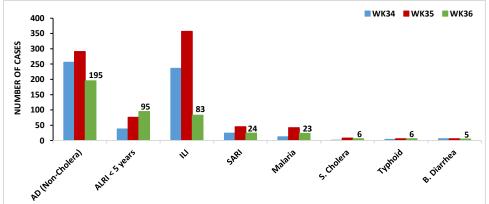


Figure 9: Week wise reported cases of ILI and AD (Non cholera), ICT

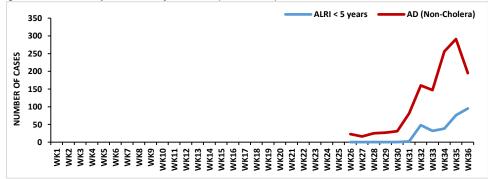


Figure 10: Most frequently reported cases during week 36, in comparison with pervious weeks, GB

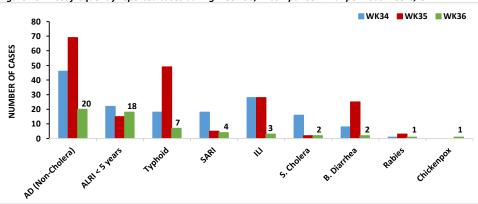
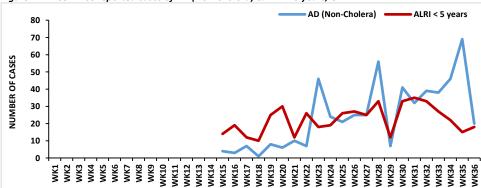


Figure 11: Week wise reported cases of AD (Non-Cholera) & ALRI <5 years, GB







Azad Jammu & Kashmir

 From AJK, Mirpur reported AD (Non-Cholera) and ALRI <5 years cases. which have shown an abrupt decline

IDSR Participating Districts

- This week hundred percent (%) data was reported from districts Haripur, Kohat, Lakki Marwat, CDA, Kech, Khuzdar, Killa Abdullah, Lasbella & Karachi East.
- No data has been received from districts Swat & Umerkot.

Figure 13: Week wise reported cases of AD (Non-Cholera) & ALRI <5 years, AJK

AD (Non-Cholera) ALRI < 5 years

AD (Non-Cholera) ALRI < 5 years

AD (Non-Cholera) ALRI < 5 years

Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)	
	Haripur	69/69	69(100%)	
	Kohat	59/59	59(100%)	
Mh. de an Dalalannal Janea	Abbottabad	110/110	92(84%)	
Khyber Pakhtunkhwa	Charsadda	61/61	51(84%)	
	Lakki Marwat	48/48	48(100%)	
	Swat	-	0	
Azad Jammu Kashmir	Mirpur	37/37	24(65%)	
Islamabad Capital	ICT	18/18	14(78%)	
Territory	CDA	5/12	5(100%)	
	Gwadar	24/24	18(75%)	
	Kech	42/78	42(100%)	
	Khuzdar	19/136	19(100%)	
Balochistan	Killa Abdullah	24/50	24(100%)	
	Lasbella	83/83	83(100%)	
	Pishin	23/118	21(91%)	
	Quetta	22/77	19(86%)	
Gilgit	Hunza	30/30	28(93%)	
	Nagar	22/22	01(4.5%)	
	Hyderabad	63/63	54 (86%)	
	Karachi-East	14/14	14(100%)	
	Karachi-Malir	43/43	30(70%)	
Sindh	Ghotki	58/58	8 (14%)	
Jiiuli	Umerkot	30/118	0	
	Naushahro Feroze	52/52	17(33%)	
	Tharparkar	85/236	84(99%)	
	Shikarpur	18/21	5(28%)	
	Thatta	27/50	7(26%)	

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



