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Weekly Bulletin: Integrated Disease Surveillance and Response (IDSR)

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Highlights of the Epi-Week 39 (27th September–3rd October 2021)

Cumulative Information:

- During this week, maximum cases reported were of ILI, Acute Diarrhea (Non Cholera), Malaria, ALRI <5 years, Typhoid, B. Diarrhea, suspected Cholera, SARI, Dengue & Rabies/ Dog bite.
- In comparison with previous week i.e. Week-38, cases of all diseases have shown downward trend.
- Dengue and Malaria cases have been reported from Sindh & KP which need immediate verification. Health department in coordination with vector control program should carry out vector surveillance and control measures accordingly.
- Measles cases are mostly reported from Balochistan, Sindh & KP, therefore, routine immunization needs to be strengthened in order to decrease the disease burden of VPDs.
- There is surge in Dog bite cases in Sindh, KP and Balochistan which requires follow up and response at human-animal interface.

Figure 1: Most frequently reported cases during week 39, in comparison with previous weeks, Pakistan

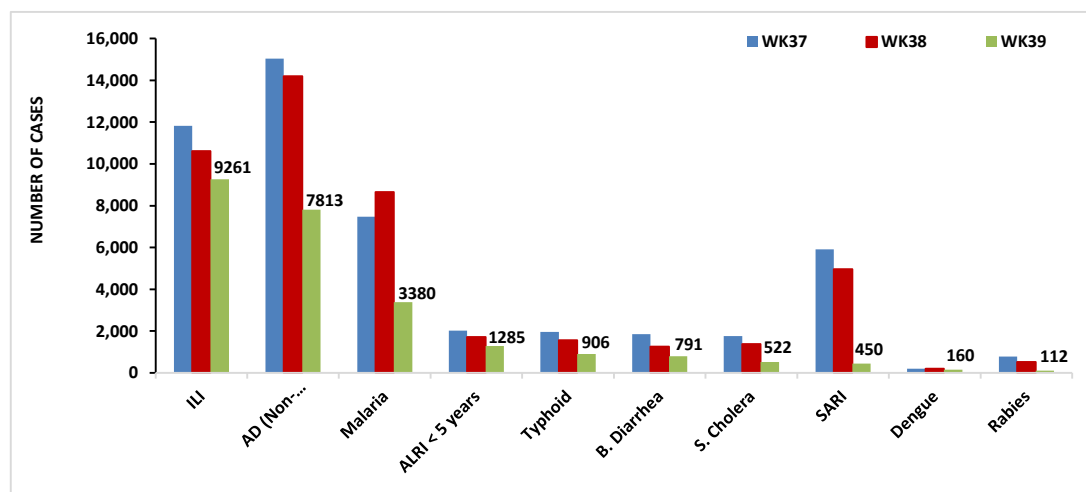


Table 1: Province/Area wise distribution of most frequently reported cases during week 39, Pakistan

Diseases	AJK	Balochistan	GB	ICT	KP	Sindh	Total
ILI	23	2,075	11	91	2,541	4,520	9,261
AD (Non-Cholera)	43	1,007	22	204	3,051	3,486	7,813
Malaria	3	638	0	16	1,092	1,631	3,380
ALRI < 5 years	35	134	28	84	207	797	1,285
Typhoid	2	193	20	8	364	319	906
B. Diarrhea	9	315	3	8	178	278	791
S. Cholera	0	73	6	6	94	343	522
SARI	2	95	6	19	278	50	450
VH (B, C & D)	0	14	0	0	7	139	160
Dengue	0	1	0	0	81	78	160
Rabies/Dog bite	0	16	1	0	31	64	112
Measles	1	23	0	2	48	12	86
Mumps	1	4	0	1	7	4	17

Point of Attention

- AD (Non-Cholera), suspected Cholera and Typhoid cases reported from all over the country which 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 Measles and Mumps 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, to reduce numbers, 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=4,520), AD (Non Cholera) (n=3,486), Malaria (n=1,631), ALRI <5 Years (n=797), suspected Cholera (n=343), Typhoid (n=319), B. diarrhea (n=278), VH (B, C & D) (n=139), Dengue (n=78) & Rabies/ Dog bite (n=64).
- District Ghotki reported the maximum cases of ILI, AD (Non Cholera), ALRI <5 years & suspected Cholera.
- District Hyderabad reported maximum cases of ILI, AD (Non Cholera), suspected Cholera, ALRI <5 years, suspected Cholera, Malaria & 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.
- Naushahro Feroze reported cases of ILI, AD (Non Cholera), Malaria & Typhoid at maximum
- Shikarpur reported maximum cases of AD (Non-Cholera), Malaria and ALRI <5 years.
- From Tharparkar, maximum cases of AD (Non-Cholera), Malaria, ILI, ALRI <5 years, B. Diarrhea & Typhoid were reported.
- Cases of Meningitis, Measles & AFP were reported, hence there is a need of strengthening routine immunization to decrease disease burden of VPDs.
- This week, a sharp decline in case trend observed for Malaria, ILI & AD (Non Cholera) as compared to previous week.

(Note: NR= Not Reported)

Figure 2: Most frequently reported cases during week 39, in comparison with pervious weeks, Sindh

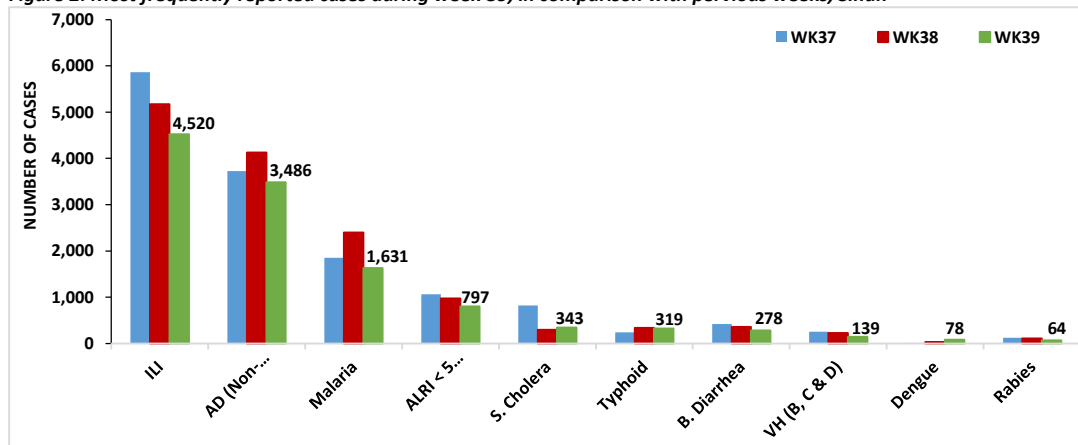
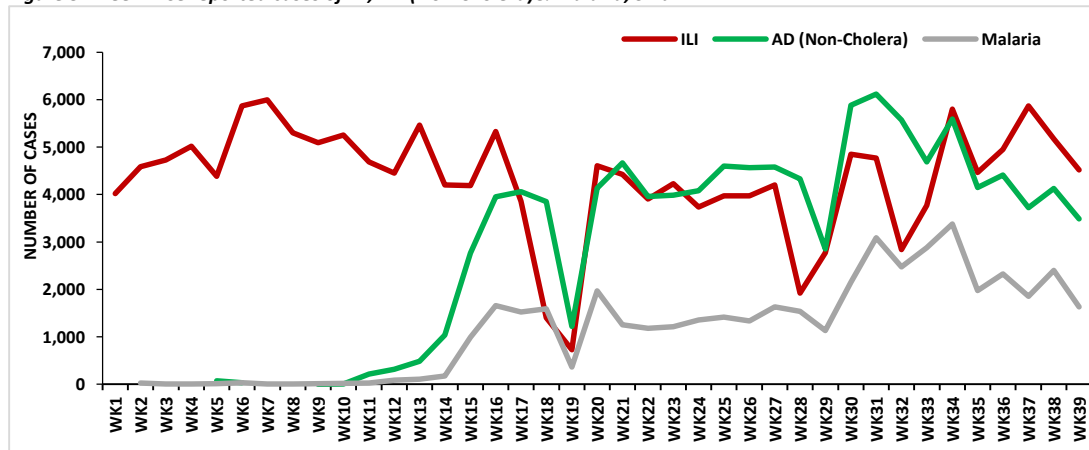


Table 2: District wise distribution of most frequently reported cases during week 39, Sindh

Diseases	Ghotki	Hyderabad	Karachi East	Karachi Malir	Naushahro Feroze	Shikarpur	Tharparkar	Total
ILI	213	2,839	9	274	467	0	718	4,520
AD (Non-Cholera)	109	1,041	160	557	305	196	1,118	3,486
Malaria	32	99	54	46	282	56	1,062	1,631
ALRI < 5 years	84	117	7	110	76	48	355	797
S. Cholera	64	270	0	8	1	0	0	343
Typhoid	20	14	0	85	122	0	78	319
B. Diarrhea	32	86	2	11	44	6	97	278
VH (B, C & D)	40	58	1	1	11	12	16	139
Dengue	0	10	0	1	0	0	67	78
Rabies/ Dog bite	33	NR	0	2	3	17	9	64
SARI	1	27	0	1	5	2	14	50
AVH (A & E)	0	7	0	0	3	0	32	42
Measles	6	NR	0	5	0	1	0	12
Meningitis	0	NR	0	0	0	0	10	10
AFP	0	NR	0	0	0	0	3	3

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



Balochistan

- From Balochistan overall ILI (n=2,075), AD (Non Cholera) (n=1,007), Malaria (n=638), B. diarrhea (n=315), Typhoid (n=193), ALRI <5 years (n=134), CL (n=114), SARI (n=95), S. Cholera (n=73), and Gonorrhea (n=33) remained at maximum.
- District Gwadar reported maximum cases of ILI, AD (Non Cholera), Malaria & B. diarrhea.
- District Kech reported maximum cases of ILI, AD (Non-Cholera) & Malaria.
- District Khuzdar reported maximum cases of ILI, Malaria, AD (Non-Cholera), B. diarrhea & Typhoid.
- District Lasbella reported maximum cases for Malaria, AD (Non-Cholera), and ALRI <5 years.
- District Pishin reported more cases for AD (Non-Cholera) & B. diarrhea.
- District Quetta reported maximum cases for ILI, AD (Non-Cholera), B. diarrhea & CL.
- Most cases of Measles have been reported from district Khuzdar so need to strengthen the routine immunization to decrease the burden of VPDs.
- In comparison with last week, ILI & AD (Non Cholera) cases have shown decrease in trend.

Khyber Pakhtunkhwa (KP)

- KP reported cases of AD (Non Cholera) (n=3,051),

Figure 4: Most frequently reported cases during week 39, in comparison with previous weeks, Balochistan

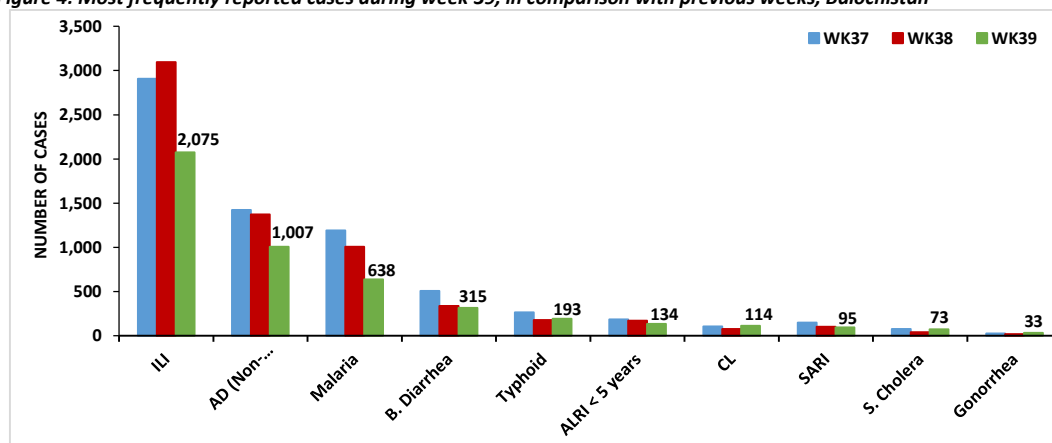
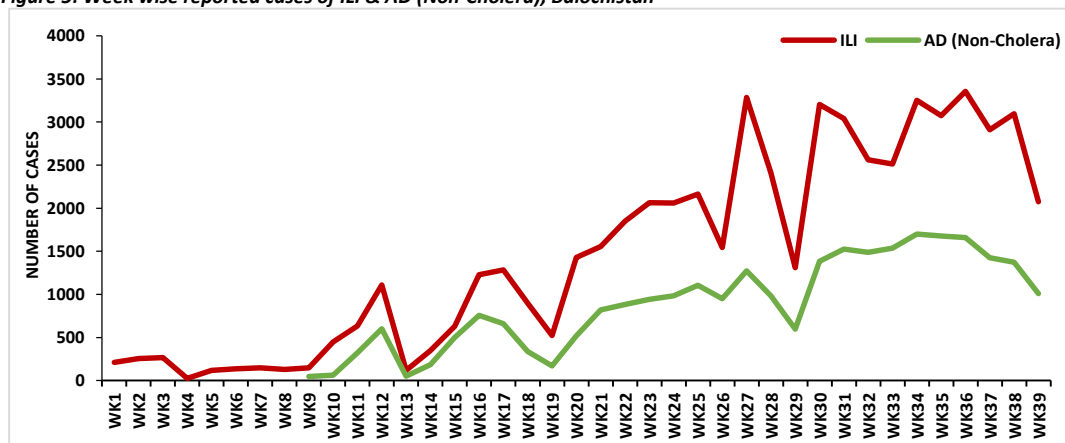


Table 3: District wise distribution of most frequently reported cases during week 39, Balochistan

Diseases	Gwadar	Kech (Turbat)	Khuzdar	Lasbella	Pishin	Quetta	Total
ILI	463	694	227	17	46	628	2,075
AD (Non-Cholera)	187	265	78	157	66	254	1,007
Malaria	106	137	96	254	36	9	638
B. Diarrhea	61	30	75	28	57	64	315
Typhoid	18	13	65	20	45	32	193
ALRI < 5 years	7	22	15	79	11	0	134
CL	NR	0	11	12	30	61	114
SARI	NR	32	14	49	0	0	95
S. Cholera	7	0	20	42	0	4	73
Gonorrhea	NR	0	33	0	0	0	33
Measles	NR	4	15	4	0	0	23
Rabies	NR	0	14	2	0	0	16
VH (B, C & D)	NR	4	6	4	0	0	14

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



ILI (n=2,541), Malaria (n=1,092), Typhoid (n=364), SARI (n=278), ALRI <5 years (n=207), B. diarrhea (n=178), S. Cholera (n=94), Dengue (n=81) and Measles (n=48).

- District Abbottabad reported maximum cases of AD (Non-Cholera) & SARI.
- District Charsadda reported maximum cases of AD (Non-Cholera), Malaria, Typhoid & SARI.
- District Haripur reported maximum cases of ILI, AD (Non-Cholera) & Dengue.
- District Kohat reported maximum cases of AD (Non-Cholera), ILI & SARI.
- District Lakki Marwat reported maximum cases of Malaria, AD (Non-Cholera), ALRI <5 years and Typhoid.
- District Malakand reported maximum cases of ILI, AD (Non-Cholera), Malaria & Typhoid.
- Weekly cases of ILI have shown a sharp incline while Malaria cases depicted an abrupt decline in trend as compared to previous week. However, cases of AD (Non-Cholera) have followed the similar pattern.
- Cases of Measles, Mumps, Diphtheria & Pertussis have been reported demanding vigilant action to reduce burden of VPDs.
- Dengue 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.

Figure 6: Most frequently reported cases during week 39, in comparison with pervious weeks, KP

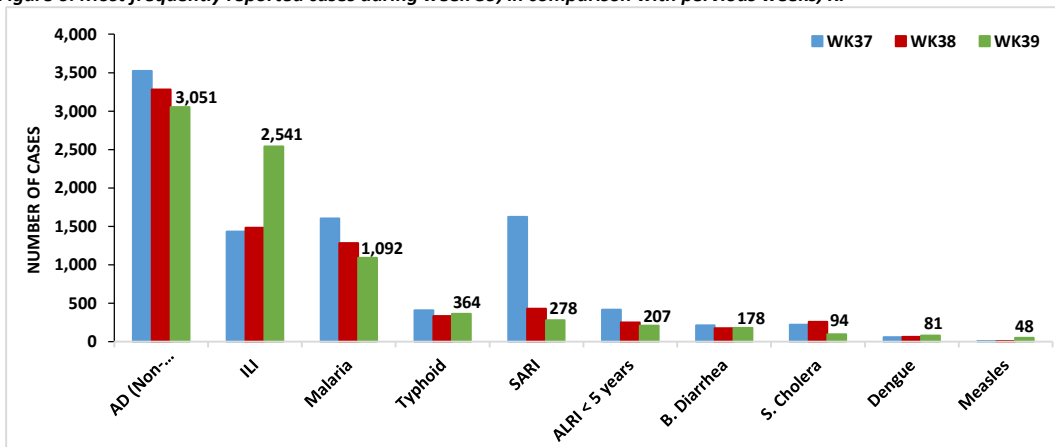
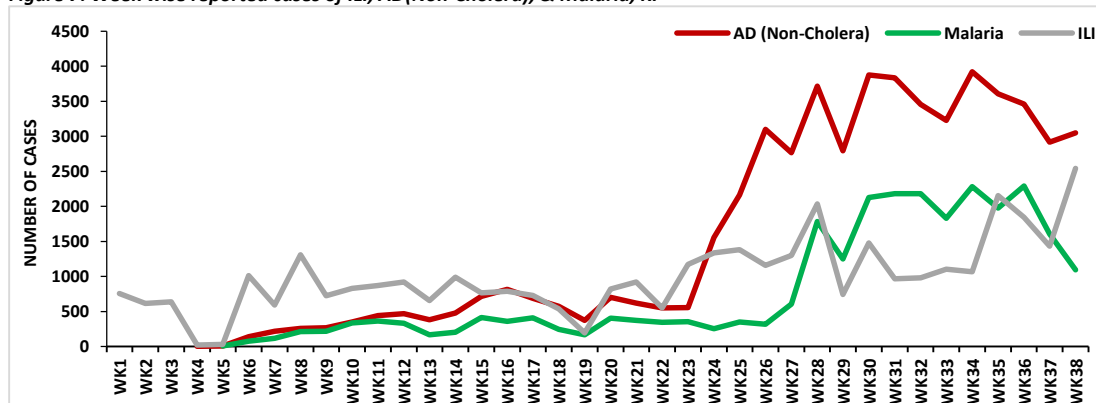


Table 4: District wise distribution of most frequently reported cases during week 39, KP

	Abbottabad	Charsadda	Haripur	Kohat	Lakki Marwat	Malakand	Total
AD (Non-Cholera)	492	732	553	162	371	741	3,051
ILI	0	50	973	124	34	1,360	2,541
Malaria	0	345	26	40	618	63	1,092
Typhoid	22	149	32	35	69	57	364
SARI	44	119	39	69	4	3	278
ALRI < 5 years	20	2	42	0	99	44	207
B. Diarrhea	7	61	43	5	34	28	178
S. Cholera	4	36	19	15	1	19	94
Dengue	8	0	67	2	4	0	81
Measles	0	31	4	1	3	9	48
AVH (A & E)	0	0	24	0	0	0	24
Mumps	0	0	0	0	7	0	7
Pertussis	0	0	0	0	6	0	6
AFP	0	0	3	0	2	0	5
Diphtheria	0	0	0	0	2	0	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=204), ILI (n=91), ALRI <5 years (n=84), SARI (n=19), Malaria (n=16), B. diarrhea (n=8), Typhoid (n=8), suspected Cholera (n=6), Chickenpox (n=2) & Measles (n=2).
- During this week, a sharp decline was observed for cases of AD (Non Cholera) & ILI as compared to previous week i.e. week 38.

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

Figure 8: Most frequently reported cases during week 39, in comparison with previous weeks, ICT

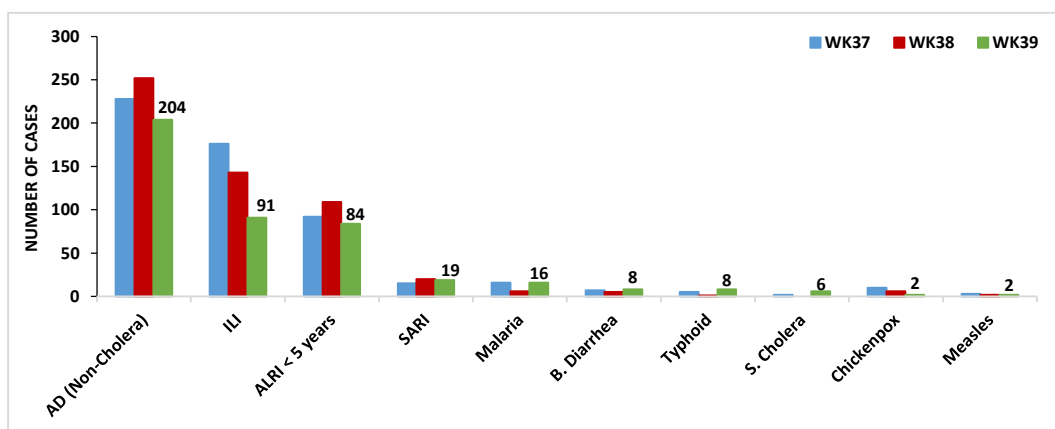


Figure 9: Week wise reported cases of ILI and AD (Non cholera), ICT

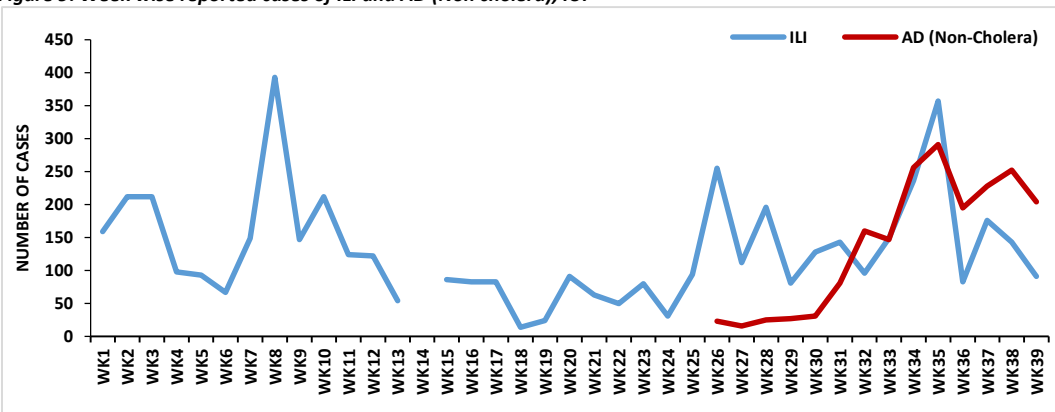


Figure 10: Most frequently reported cases during week 39, in comparison with previous weeks, GB

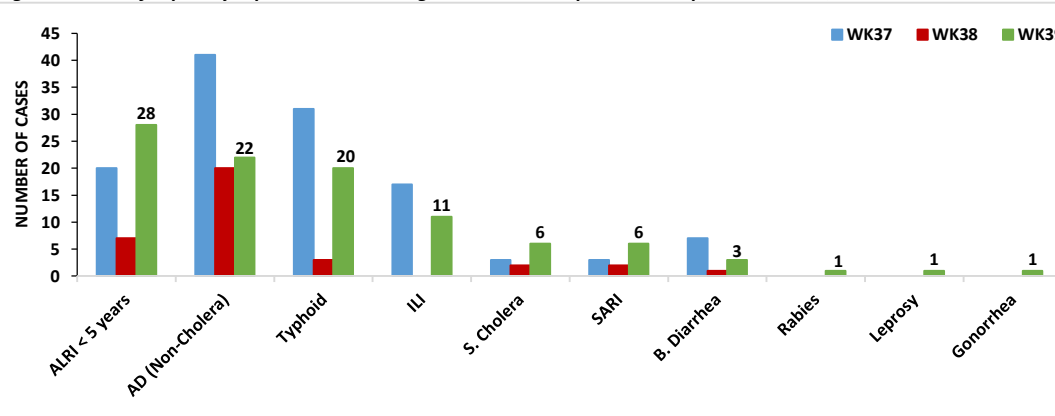
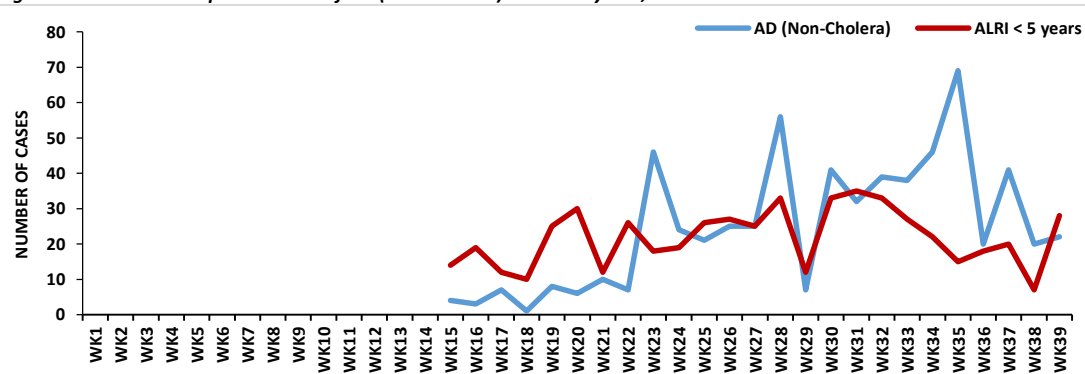


Figure 11: Week wise reported cases of AD (Non-Cholera) & ALRI <5 years, GB



Gilgit Baltistan

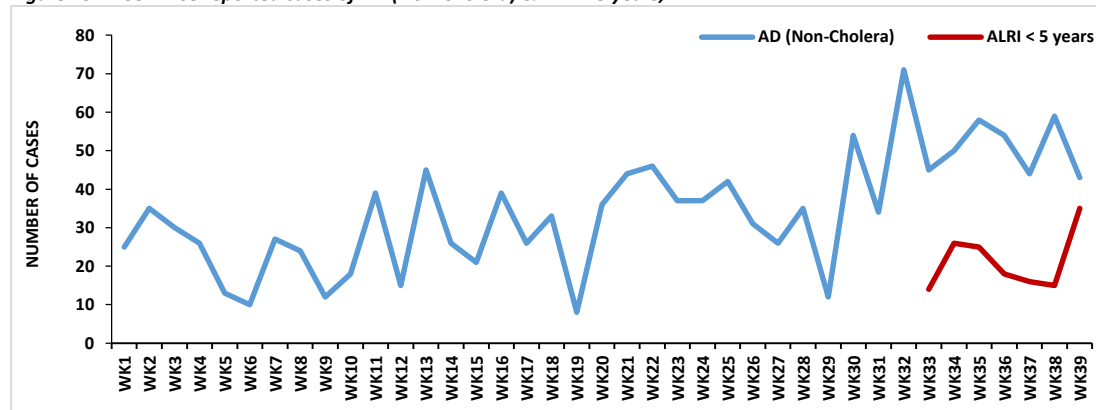
- Gilgit-Baltistan reported cases of ALRI<5 years (n=28), AD (Non-Cholera) (n=22), Typhoid (n=20), ILI (n=11), SARI (n=6), suspected Cholera (n=6), SARI (n=6), B. diarrhea (n=3), Rabies/Dog bite (n=01), Leprosy (n=01) and Gonorrhea (n=01) this week.
- Weekly trend shows a sharp incline in cases of ALRI <5 years whereas cases of AD (Non Cholera) have shown a similar trend as compared to previous week i.e. Week-38.

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

Azad Jammu & Kashmir

- From AJK, Mirpur reported AD (Non-Cholera) cases showing an abrupt decline while cases of ALRI <5 years have depicted a sharp incline as compared to previous week.

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



IDSR Participating Districts

- This week hundred percent (%) data was reported from districts Lakki Marwat, Islamabad (CDA, ICT) & Karachi East.
- No data has been received from districts Swat, Killa Abdullah, Thatta & Umerkot.

Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)
Khyber Pakhtunkhwa	Haripur	69/69	26(38%)
	Kohat	59/59	48(81%)
	Abbottabad	110/110	88(80%)
	Charsadda	61/61	51(84%)
	Lakki Marwat	48/48	48(100%)
	Swat	77/77-	0
	Malakand	78/78	40(51%)
Azad Jammu Kashmir	Mirpur	37/37	26(70%)
Islamabad Capital Territory	ICT	18/18	18(100%)
	CDA	5/12	5(100%)
Balochistan	Gwadar	24/24	17(71%)
	Kech	42/78	21(50%)
	Khuzdar	19/136	18(95%)
	Killa Abdullah	24/50	0
	Lasbella	83/83	82(99%)
	Pishin	23/118	20(87%)
	Quetta	22/77	20(91%)
Gilgit	Hunza	30/30	29(97%)
	Nagar	22/22	05(23%)
Sindh	Hyderabad	63/63	55 (87%)
	Karachi-East	14/14	14(100%)
	Karachi-Malir	43/43	28(65%)
	Ghotki	58/58	8 (14%)
	Umerkot	30/118	0
	Naushahro Feroze	52/52	24(46%)
	Tharparkar	85/236	80(94%)
	Shikarpur	18/21	9(50%)
	Thatta	27/50	0
	Larkana	149/149	0

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