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Weekly Bulletin: Integrated Disease Surveillance and Response (IDSR)

28th October 2021

Highlights of the Epi-Week 42 (18th - 24th October 2021)

Cumulative Information

- During this week, maximum cases reported were of ILI, Acute Diarrhea (Non Cholera), Malaria, SARI, ALRI <5 years, Typhoid, B. Diarrhea, suspected Cholera, Dengue & CL.
- In comparison with previous week i.e. Week-41, cases of ILI and ALRI <5 years have shown an upward trend while cases of remaining diseases depicted a downward or similar trend.
- Number of Dengue and Malaria cases increasingly reported from Sindh, Balochistan & KP which demand strong coordination among Health department & vector control program to carry out both human & vector surveillance and implement control measures accordingly.
- Cases of Measles, Chickenpox & Mumps reported from KP, Balochistan, ICT and Sindh and warrant immediate attention to control the spread of diseases.
- Cases of Gonorrhea have been reported from Balochistan, Sindh & KP which need urgent attention & follow up accordingly.

Figure 1: Most frequently reported cases during week 42, in comparison with pervious weeks, Pakistan

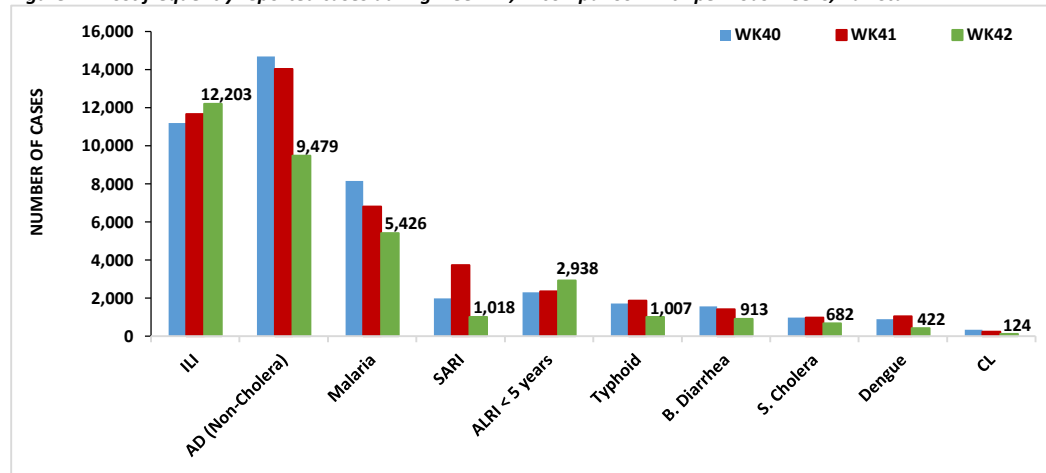


Table 1: Province/Area wise distribution of most frequently reported cases during week 42, Pakistan

Diseases	AJK	Balochistan	GB	ICT	KP	Sindh	Total
ILI	62	2,424	7	203	2,274	7,233	12,203
AD (Non-Cholera)	53	1,234	23	165	4,290	3,714	9,479
Malaria	4	767	0	19	1,539	3,097	5,426
ALRI < 5 years	2	168	20	128	767	1,853	2,938
SARI	0	152	7	35	755	69	1,018
Typhoid	0	183	4	13	455	352	1,007
B. Diarrhea	7	280	6	14	253	353	913
S. Cholera	0	195	9	0	193	285	682
Dengue	0	3	0	1	210	208	422
Rabies / Dog bite	0	27	0	0	26	117	170
CL	0	106	0	0	18	0	124
Mumps	1	11	0	0	37	14	63
Measles	0	21	0	3	16	14	54
Gonorrhea	0	23	0	0	3	19	45
Chickenpox	0	3	0	5	33	3	44

Points of Attention

- Dengue cases are on rise especially from KP and Sindh, to prevent further rise in cases in high burden districts, close monitoring of Dengue fever cases, larva density and implementation of public health response activities in hotspot areas is required.
- AD (Non-Cholera), suspected Cholera and Typhoid cases reported mostly from Balochistan, KP and Sindh. For timely response, strict surveillance is mandatory for identification of affected areas and risk factors is to prevent further spread of illness. Food regulatory authorities may play role in such food borne diseases.
- Vaccine preventable diseases (Measles, Mumps) cases are reporting each week. Vigilant monitoring, verification, investigation and coordination with EPI is required to reduce the cases
- Dog bite cases are regularly reported, and to reduce numbers community awareness sessions may be 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.
- Vigilant monitoring, and coordination with EPI needs to be strengthened to reduce the VPD cases.
- IDSR focal persons may share alert verification and outbreak investigation reports. This will help in furnishing details on disease burden, circulating pathogens and devising national strategies for prevention & control of diseases.
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices especially in diarrheal diseases and typhoid affected districts.

Sindh

- Sindh reported maximum cases of ILI (n=7,233), AD (Non Cholera) (n=3,714), Malaria (n=3,097), ALRI <5 Years (n=1,853), B. diarrhea (n=353), Typhoid (n=352), suspected Cholera (n=285), Dengue (n=208), VH (B, C & D) (n=194) & Rabies/ Dog bite (n=117).
- District Ghotki reported the maximum cases of ILI, ALRI <5 years, AD (Non Cholera), VH (B,C & D) & Malaria.
- District Hyderabad reported maximum cases of ILI, AD (Non Cholera), ALRI <5 years, suspected Cholera & Malaria.
- 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, ALRI <5 years & Typhoid at maximum.
- Shikarpur reported maximum cases of ALRI <5 years, AD (Non-Cholera) & Malaria.
- From Tharparkar, maximum cases of ILI, Malaria, AD (Non-Cholera), ALRI <5 years, B. Diarrhea & Dengue were reported.
- From Thatta, cases of Malaria, AD (Non-Cholera & ILI were at maximum.
- Umerkot reported maximum cases of Malaria, AD (Non Cholera) and ALRI <5 years.
- Cases of HIV/AIDS & AFP have been reported which need to be verified for contact tracing and further response activities.
- There is a need to strengthen routine immunization to decrease disease burden of VPDs.
- This week, a sharp incline in case trend observed for Dengue and ILI whereas AD (Non Cholera) cases showing a gradual decline as compared to previous week.

(Note: NR= Not Reported)

Figure 2: Most frequently reported cases during week 42, in comparison with pervious weeks, Sindh

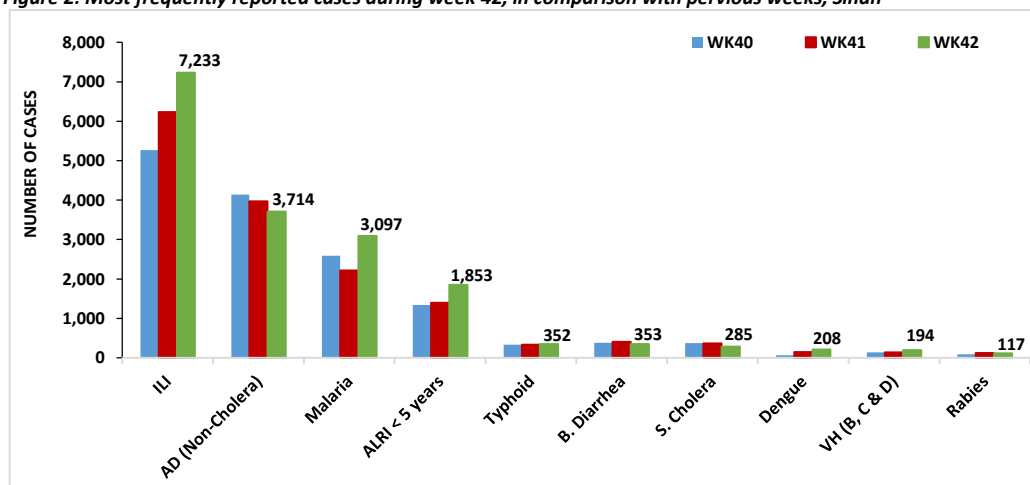
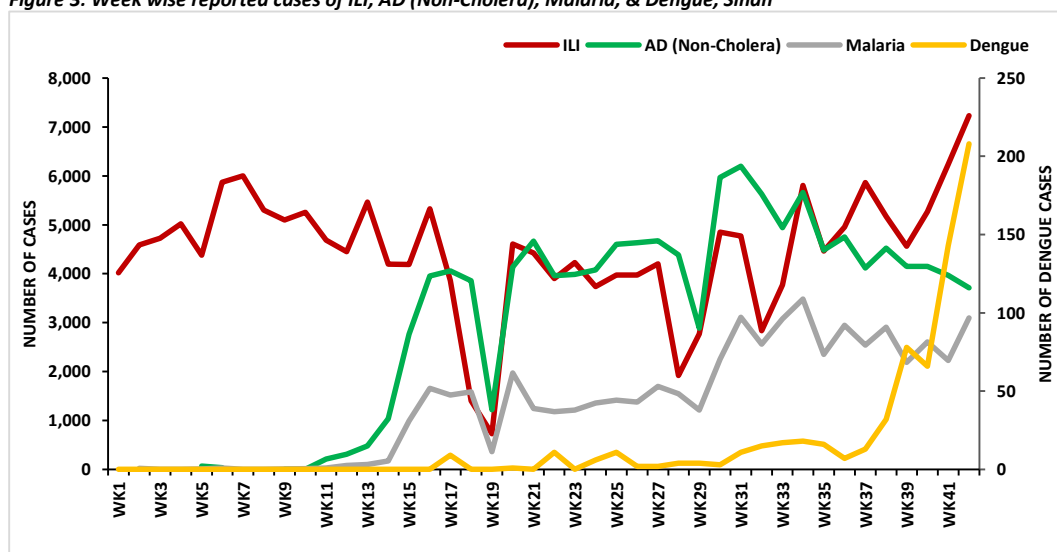


Table 2: District wise distribution of most frequently reported cases during week 42, Sindh

Diseases	Ghotki	Hyderabad	Karachi East	Karachi Malir	Naushahro Feroze	Shikarpur	Tharparkar	Thatta	Umerkot	Total
ILI	189	3,771	18	504	981	10	1,594	121	45	7,233
AD (Non-Cholera)	103	1,048	145	519	463	93	948	180	215	3,714
Malaria	56	104	34	54	337	62	1,464	338	648	3,097
ALRI < 5 years	124	448	3	356	165	96	472	64	125	1,853
B. Diarrhea	40	91	8	22	27	20	110	16	19	353
Typhoid	22	25	0	76	118	0	81	14	16	352
S. Cholera	37	187	0	17	10	0	0	11	23	285
Dengue	0	93	1	20	0	0	94	0	0	208
VH (B, C & D)	84	50	0	6	15	6	21	6	6	194
Rabies / Dog bite	47	0	0	28	3	22	11	6	0	117
SARI	0	25	0	0	12	7	21	2	2	69
Mumps	0	2	2	6	0	0	1	0	3	14
HIV/AIDS	0	4	0	1	0	0	0	0	0	5
AFP	0	0	0	0	0	0	2	1	0	3
Pertussis	0	0	0	2	0	0	0	0	0	2

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



Balochistan

- From Balochistan overall ILI (n=2,424), AD (Non Cholera) (n=1,234), Malaria (n=767), B. diarrhea (n=280), S. Cholera (n=195), Typhoid (n=183), ALRI <5 years (n=168), SARI (n=152), CL (n=106) and Rabies/Dog bite (n=27) remained at maximum.
- District Kech reported maximum cases of ILI, AD (Non-Cholera) & Malaria.
- District Khuzdar reported maximum cases of ILI, Malaria & AD (Non-Cholera).
- District Killa Abdullah reported maximum cases of ILI & AD (Non Cholera).
- District Lasbella reported maximum cases for Malaria, AD (Non-Cholera) & SARI.
- District Pishin reported more cases for ILI & AD (Non Cholera).
- District Quetta reported maximum cases for ILI & AD (Non-Cholera).
- Sibbi reported maximum cases of ILI, AD (Non Cholera) & Malaria.
- Cases of Pertussis, Measles, Diphtheria & NT have been reported, therefore needs strengthening of routine immunization system.
- Cases of Chikungunya should be thoroughly investigated and verified before reporting and further work up.
- In comparison with last week, ILI & AD (Non Cholera) cases have shown a downward trend.

Figure 4: Most frequently reported cases during week 42, in comparison with previous weeks, Balochistan

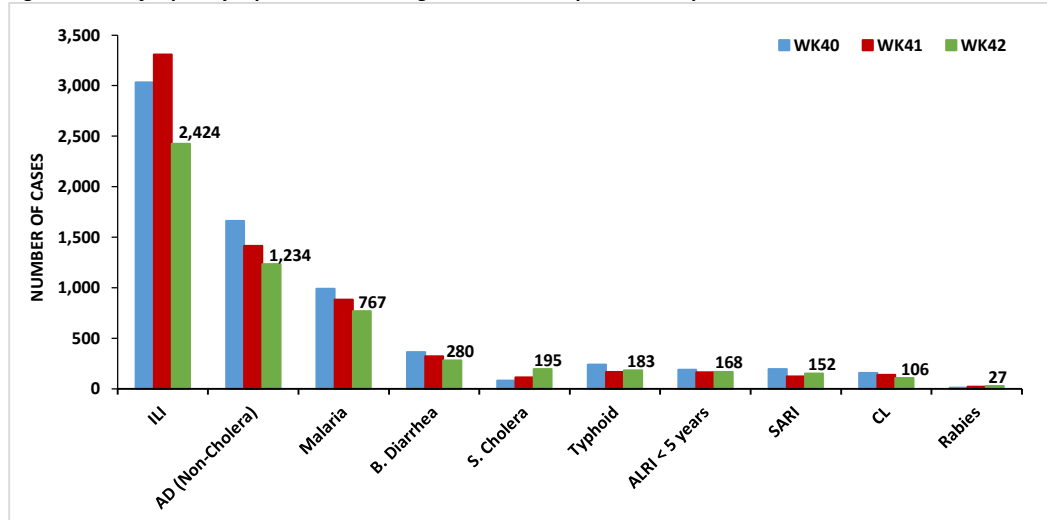
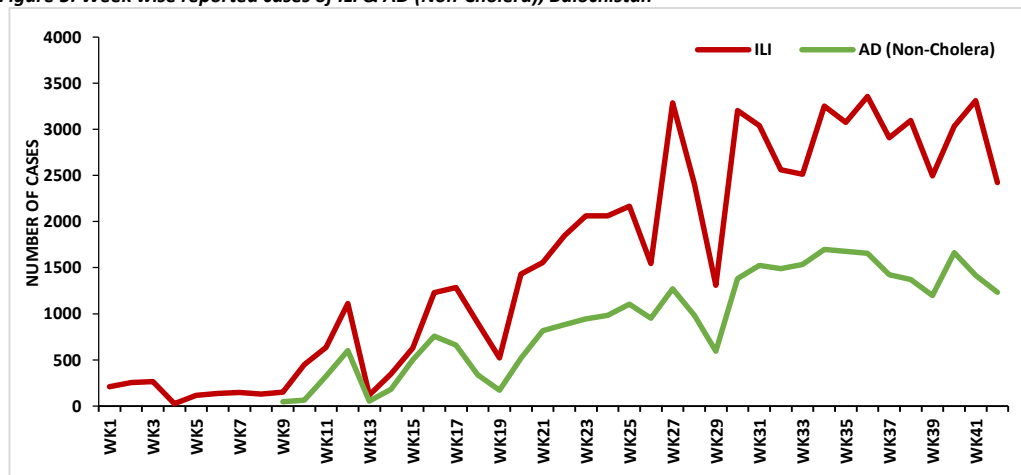


Table 3: District wise distribution of most frequently reported cases during week 42, Balochistan

Diseases	Kech Turbat	Khuzdar	Killa Abdullah	Lasbella	Pishin	Quetta	Sibi	Total
ILI	850	166	300	31	98	699	280	2,424
AD (Non-Cholera)	320	80	146	179	61	295	153	1,234
Malaria	199	98	10	340	19	11	90	767
B. Diarrhea	37	71	0	39	36	40	57	280
S. Cholera	0	29	0	39	11	48	68	195
Typhoid	16	24	12	27	25	37	42	183
ALRI < 5 years	25	18	0	63	18	0	44	168
SARI	39	19	0	75	0	0	19	152
CL	0	8	25	21	21	24	7	106
Rabies / Dog bite	0	12	0	9	3	0	3	27
Measles	0	13	3	0	2	2	1	21
Pertussis	0	3	0	0	1	0	7	11
Anthrax	0	0	0	0	0	0	0	0
Chikungunya	0	0	0	0	0	0	3	3
Diphtheria	0	0	0	0	0	0	2	2
Leprosy	0	0	0	1	0	0	0	1
NT	0	0	0	1	0	0	0	1

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



Khyber Pakhtunkhwa (KP)

- KP reported cases of AD (Non Cholera) (n=4,290), ILI (n=2,274), Malaria (n=1,539), ALRI <5 years (n=767), SARI (n=755), Typhoid (n=455), B. diarrhea (n=253), Dengue (n=210), suspected Cholera (n=193), & AVH (A&E)(n=93) at maximum.
- District Abbottabad reported maximum cases of AD (Non-Cholera) & SARI.
- District Charsadda reported maximum cases of AD (Non-Cholera), Malaria, SARI & Typhoid.
- District Haripur reported maximum cases of ILI, AD (Non-Cholera), Malaria, ALRI <5 years & Dengue.
- District Kohat reported maximum cases of AD (Non Cholera), ILI, SARI & Malaria.
- District Lakki Marwat reported maximum cases of Malaria, AD (Non-Cholera), SARI & ALRI <5 years.
- District Malakand reported maximum cases of AD (Non Cholera), ILI, ALRI <5 years & SARI.
- Weekly cases of AD (Non Cholera) have shown a sharp decline this week while ILI and Dengue cases show an incline in trend. Moreover, Malaria cases depicted the same trend as compared to last week i.e.41.
- Cases of Measles, Mumps, Pertussis & Chickenpox have been reported demanding vigilant action to reduce burden of VPDs.
- Cases of Brucellosis need close coordination among department of health and live-stock for further work up.
- Malaria and Dengue cases are on rise. Verification, epidemiological investigation and response action in terms of Multisector coordination is urgently required.
- Community awareness on water, sanitation and hygiene (WASH) practices required to address rise in diarrheal diseases and typhoid cases.

Figure 6: Most frequently reported cases during week 42, in comparison with previous weeks, KP

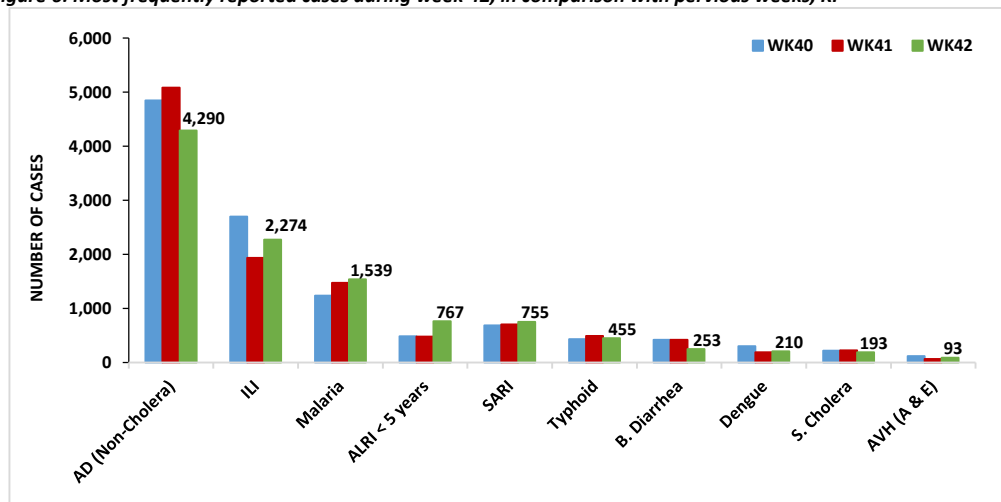
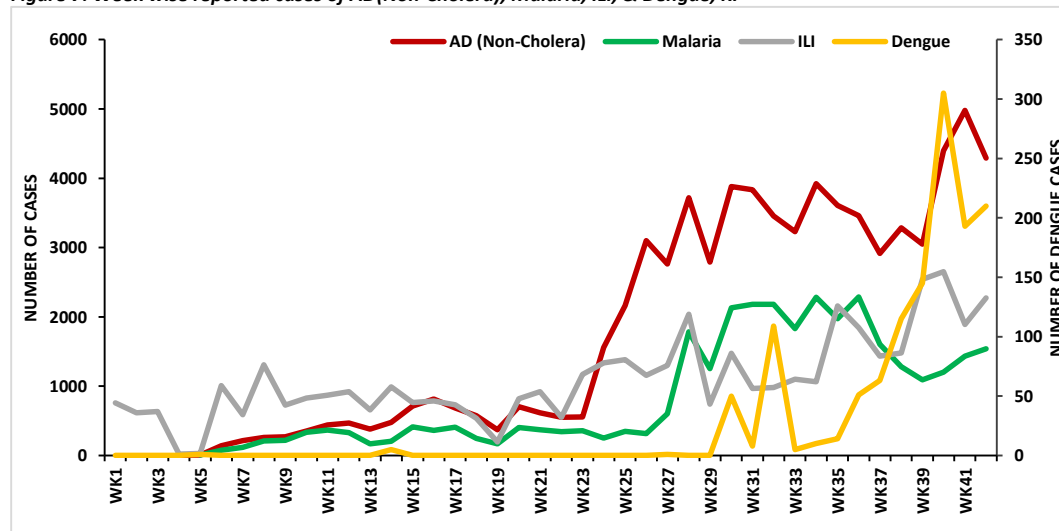


Table 4: District wise distribution of most frequently reported cases during week 42, KP

Diseases	Abbottabad	Charsadda	Haripur	Kohat	Lakki Marwat	Malakand	Swabi	Total
AD (Non-Cholera)	529	553	858	370	289	1,241	450	4,290
ILI	0	48	976	356	72	567	255	2,274
Malaria	3	98	101	211	853	182	91	1,539
ALRI < 5 years	13	2	132	75	78	390	77	767
SARI	46	96	54	275	114	38	132	755
Typhoid	22	88	102	43	68	49	83	455
B. Diarrhea	8	20	37	28	34	84	42	253
Dengue	0	0	123	6	13	8	60	210
S. Cholera	3	5	51	46	5	36	47	193
AVH (A & E)	0	0	31	1	21	12	28	93
VH (B, C & D)	1	0	0	0	7	3	46	57
Mumps	0	0	2	0	17	13	5	37
Chickenpox	0	0	16	0	0	17	0	33
Anthrax	0	0	0	0	0	30	0	30
Pertussis	0	0	0	13	5	0	0	18
Measles	0	0	4	0	0	12	0	16
Brucellosis	0	2	0	0	0	1	0	3

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



Islamabad (ICT)

- From ICT, the most frequent reported diseases were ILI (n=203), AD (Non-Cholera) (n=165), ALRI <5 years (n=128), SARI (n=35), Malaria (n=19), B. diarrhea (n=14), Typhoid (n=13), Chickenpox (n=05), Measles (n=03) & Dengue (n=01).
- During this week, an increase in trend was observed for cases of ILI & AD (Non Cholera) as compared to previous week i.e. week 41.

(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 42, in comparison with previous weeks, ICT

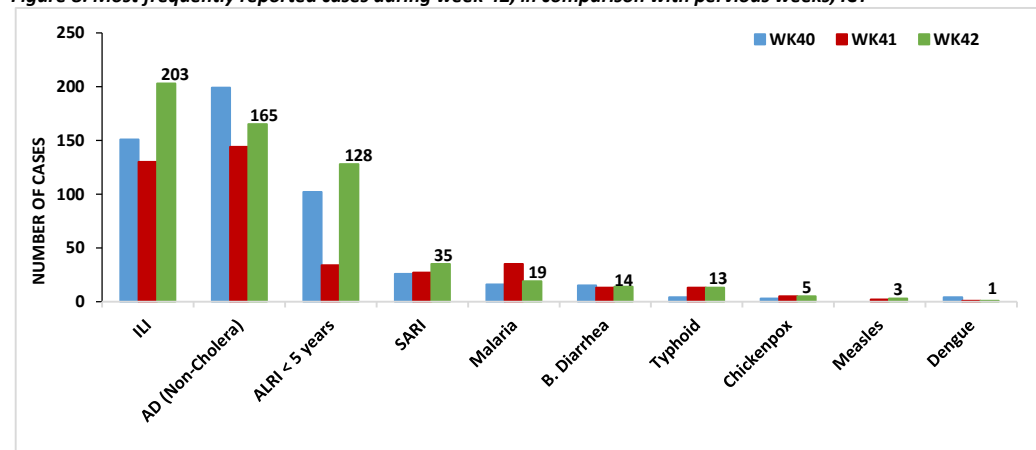


Figure 9: Week wise reported cases of ILI and AD (Non cholera), ICT

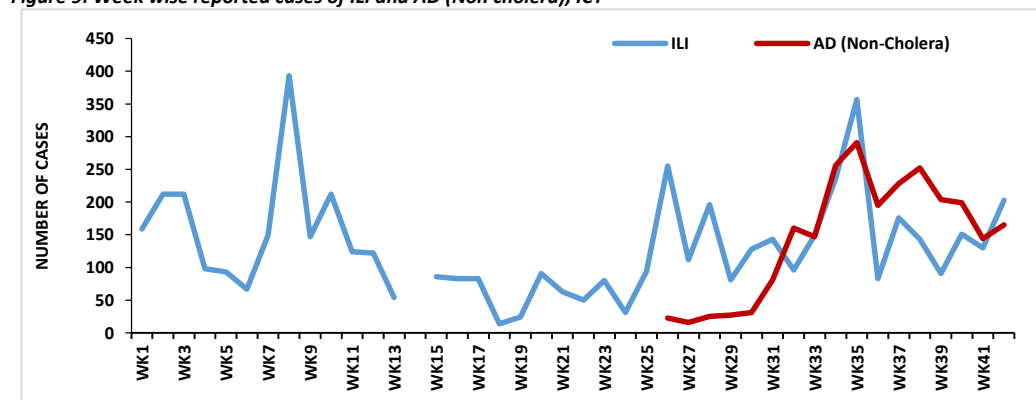


Figure 10: Most frequently reported cases during week 42, in comparison with previous weeks, GB

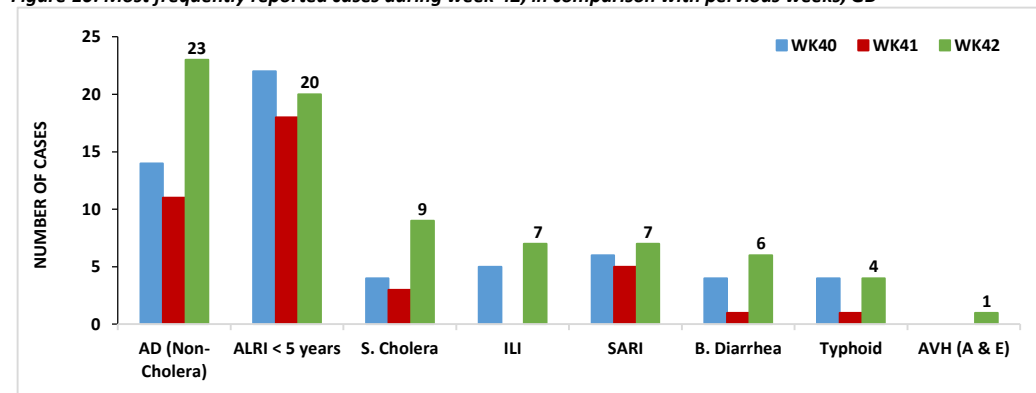
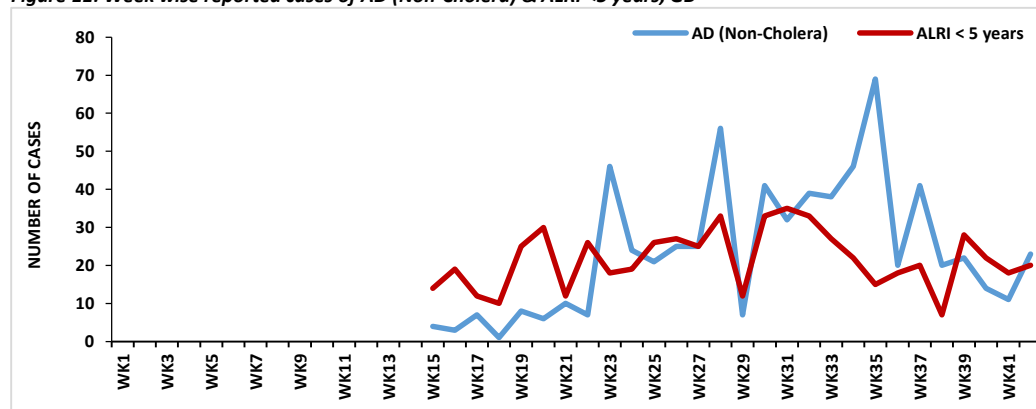


Figure 11: Week wise reported cases of AD (Non-Cholera) & ALRI <5 years, GB



Gilgit Baltistan

- Gilgit-Baltistan reported cases of AD (Non-Cholera) (n=23), ALRI <5 years (n=20), suspected Cholera (n=09), SARI (n=07), ILI (n=07), B. diarrhea (n=06), Typhoid (n=04) & AVH(A&E) (n=01) this week.
- Weekly trend for cases of ALRI <5 years remained same while cases of AD (Non Cholera) depicted a sharp rise as compared to previous week i.e. Week-41.

(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 a downward trend & ILI cases are consistent with incline as compared to previous week.

IDSR Participating Districts

- This week hundred percent (%) data was reported from districts Kohat, Lakki Marwat, Islamabad (ICT & CDA), Khuzdar, Killa Abdullah, Nagar, Karachi East, Tharparkar & Shikarpur.
- No data has been received from districts Swat, & Qambar.

Figure 12: Week wise reported cases of AD (Non-Cholera) & ILI, AJK

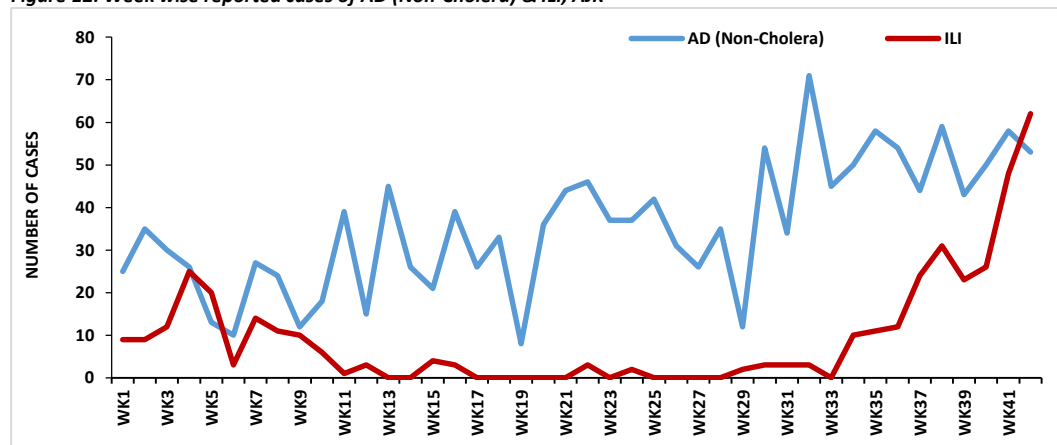


Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)
Khyber Pakhtunkhwa	Haripur	69/69	68(99%)
	Kohat	59/59	59(100%)
	Abbottabad	110/110	88(80%)
	Charsadda	61/61	52(86%)
	Lakki Marwat	48/48	48(100%)
	Swat	77/77	0
	Malakand	78/78	51(66%)
	Swabi	63/63	36(58%)
Azad Jammu Kashmir	Mirpur	37/37	26(71%)
Islamabad Capital Territory	ICT	18/18	18(100%)
	CDA	5/12	5(100%)
Balochistan	Gwadar	24/24	16 (67%)
	Kech	42/78	24 (58%)
	Khuzdar	19/136	19 (100%)
	Killa Abdullah	24/50	24 (100%)
	Lasbella	83/83	81 (98%)
	Pishin	23/118	17 (74%)
	Quetta	22/77	20 (91%)
	Sibi	42/42	41 (98%)
Gilgit Baltistan	Hunza	30/30	27(90%)
	Nagar	10/22	10 (100%)
Sindh	Hyderabad	63/63	51 (81%)
	Karachi-East	14/14	14(100%)
	Karachi-Malir	43/43	29 (68%)
	Ghotki	58/58	10 (18%)
	Umerkot	30/118	8 (27%)
	Naushahro Feroze	52/52	31 (60%)
	Tharparkar	85/236	85 (100%)
	Shikarpur	32/32	32 (100%)
	Thatta	27/50	8 (30%)
	Larkana	149/149	5 (3%)
	Qamber	101/101	0

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