Early Warning and Reporting System (EWARS) Weekly Bulletin

(30th Epidemiological Week) 8 August 2016



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Section 1: The Early Warning and Reporting System (EWARS)

Highlights	
• A total of Fourty one confirmed Cholera (<i>Vibrio cholerae</i> Ogawa 01) cases have been reported till data and cases are from different areas of Kathmandu valley.	1 the
• Six cases of Measles and one case of Rubella is confirmed positive by National Public Health Laboratory, Teku cases are from Ghorahi Municipality-6, Dang and the samples were collected from Rapti Sub Regional Hospit	
• 35 cases has been reported ELISA positive for Scrub typhus from Chitwan Medical College, Bharatpur.	
• One cases of Malaria (<i>Plasmodium vivax</i>) is reported this week from Sukraraj Tropical and Infectious Dis Hospital, Teku and the case is from Parsa district.	ease
• Two cases of Kala-azar are reported this week, one each from Janakpur Zonal Hospital, Dhanusha and Dis Hospital, Siraha and the cases are from Mahottari and Siraha district respectively.	trict
• The cases of Enteric fever is in increasing trend from last few weeks so it is important to remain alert to d potential clusters and conduct investigation to identify potential common source of contamination.	etect

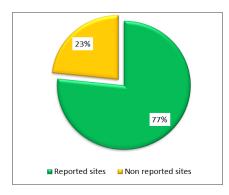
The EWARS was established in 1997 to strengthen the flow of information on vector-borne and other outbreak prone infectious diseases from the district to Epidemiology and Disease Control Division (EDCD) and Vector-Borne Disease Research and Training Center (VBDRTC), Hetauda. Rapid Response Teams (RRTs) can be mobilized at short notice to facilitate prompt outbreak response at Central, Regional and District level. They can also support local level health institutions for investigation and outbreak control activities.

This information system is hospital-based and is currently operational in 60 hospitals (out of 81 sites) throughout Nepal (Figure 1). So far, the EWARS mainly focuses on the **weekly reporting** of number of cases and deaths (including "zero" reports) of six priority diseases/syndromes—Malaria, Kala-azar, Dengue, Acute Gastroenteritis (AGE), Cholera and Severe Acute Respiratory Infection (SARI), and other epidemic potential diseases/syndromes (like enteric fever). It equally focuses on **immediate reporting** (to be reported within 24 hours of diagnosis) of one confirmed case of Cholera, Kala-azar severe and complicated Malaria and one suspect/clinical case of Dengue as well as 5 or more cases of AGE and SARI from the same geographical locality in one week period.



Reporting Status

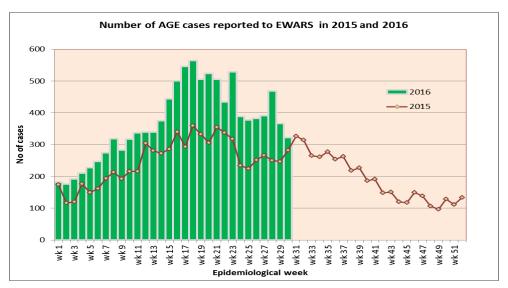
Out of 60 functional EWARS sentinel sites, report was received from 46 sentinel sites (75 percent) whereas 15 sentinel sites did not report in 30th Epidemiological week. The reporting coverage is same as compared to the previous week.



1.1 Acute Gastro-Enteritis and Cholera

322 cases of AGE are reported in 30th epidemiological week of 2016. Among 322 cases, the majority of cases are from Parsa (27 cases), Dolakha (26 cases), Dhading (26 cases), Lalitpur (22 cases), Bhaktapur (20 cases), Kathmandu (16 cases), Bardiya (15 cases), Doti (12 cases) and Kanchanpur (11 cases) district. The number of AGE cases reported in 30th week this year exceeds the number of AGE cases reported in the same week last year (283 cases).

No death from AGE is reported this week. Five deaths from AGE are reported so far this year.

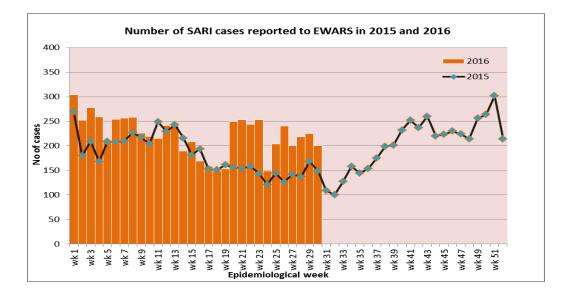


Cholera: A total of Fourty one Cholera cases have been reported till data. Thirteen new cases of Cholera (*Vibrio cholerae* Ogawa 01) are reported from Patan Hospital, Lalitpur this week. The sample is confirmed positive by National Public Health Laboratory and the cases are from different areas of Kathmandu valley. Epidemiological and environmental investigations along with water and sanitation activities are carried out in coordination with DPHO and partners.

1.2 Severe Acute Respiratory Infection (SARI)

200 cases of SARI are reported in 30th epidemiological week of 2016. The cases of SARI reported this week exceed the number reported in the same week last year (149 cases). Among 200 cases, the majority of cases are from Baitadi (29 cases), Gorkha (20 cases), Morang (15 cases), Jhapa (14cases), Parsa (14 cases), Saptari (11 cases), Kathmandu (8 cases), and Lalitpur (8 cases) district.

No death from SARI is reported this week. Fourty six deaths from SARI are reported so far this year.



1.3 Enteric Fever

125 cases of Enteric fever are reported this week. The majority of cases are from Nawalparasi (13 cases), Tanahu (12 cases), Lamjung (12 cases), Kaski (11 cases), Saptari (6 cases), Illam (6 cases), Surkhet (5 cases), Dhangadi (5 cases) and Gorkha (5 cases) districts. The cases of Enteric fever is high since last few weeks so it is important to remain alert to detect potential clusters and conduct investigation to identify potential common source of contamination.

1.4 Malaria

One cases of Malaria (*Plasmodium vivax*) is reported this week from Sukraraj Tropical and Infectious Disease Hospital, Teku and the case is from Parsa district.

Twenty four cases of malaria are reported so far this year. Ninety cases of Malaria were reported through EWARS in 2015.

1.5 Dengue

No case of Dengue is reported this week. Only three case of dengue is reported so far this year. Fifty-eight cases of Dengue were reported through EWARS in 2015.

1.6 Kala-azar

Two cases of Kala-azar are reported this week, one each from Janakpur Zonal Hospital, Dhanusha and District Hospital, Siraha and the cases are from Mahottari and Siraha district respectively.

Timeliness & completeness of reporting from sentinel sites:

Site Code	Sentinel Sites	Timeliness (this week)	Completeness (%)	Site code	Sentinel Sites	Timeliness (%)	Completen ess (%)
101	Mechi ZH, Jhapa	On time	100	130	DH, Rasuwa	On time	82
102	Koshi ZH, Morang	On time	100	131	DH, Sankhuwasabha	No reporting	0
103	DH, Sunsari	On time	100	132	AMDA Hosp., Jhapa	On time	100
104	BPKIHS, Dharan	No reporting	93	133	DH, Chautara	No reporting	96
105	DH, Dhankuta	On time	76	134	DH, Sarlahi	On time	100
106	SZH, Saptari	On time	100	135	DH, Sindhuli	Late reporting	100
107	RKUP, Lahan, Siraha	On time	100	136	DH, Illam	On time	100
108	DH, Siraha	On time	100	137	Dhulikhel H., Kavre	On time	100
109	JZH, Dhanusha	On time	100	138	DH, Solukhumbu	Late reporting	100
110	DH, Rautahat	No reporting	90	139	DH, Dolpa	No reporting	0
111	DH, Bara	No reporting	0	140	DH, Humla	No reporting	0
112	NSRH, Parsa	Late reporting	100	201	Lamjung Comm DH, Lamjung	On time	100
113	DH, Makawanpur	On time	100	202	DH, Dhading	On time	100
114	NZH, Chitwan	On time	93	203	DH, Ramechhap	On time	100
115	Kanti CH, Kathmandu	On time	90	204	Bhaktapur Hospital	Late reporting	23
116	STH, Kathmandu	On time	100	205	Patan Hospital, Lalitpur	On time	82
117	UMH, Palpa	No reporting	96	206	DH, Gorkha	On time	40
118	PCH, Nawalparasi	Late reporting	100	207	DH Trishuli , Nuwakot	No reporting	6
119	PBH, Kapilvastu	On time	100	208	Charikot PHCC, Dolakha	On time	90
120	LZH, Rupandehi	No reporting	86	209	Jiri H, Dolakha	No reporting	80
121	RSRH Dang	On time	100	210	DH, Syangja	On time	100
122	MWRH, Surkhet	On time	100	211	DH, Tanahun	Late reporting	100
123	BZH, Banke	No reporting	0	212	WRH, Kaski	On time	100
124	SZH, Kailali	Late reporting	70	214	DH, Gulmi	No reporting	60
125	MZH, Kanchanpur	On time	100	215	DZH, Baglung	On time	100
126	DH, Doti	On time	86	219	DH, Mustang	On time	100
127	DH, Bardiya	On time	100	220	DH, Pyuthan	On time	100
128	DH, Mahottari	No reporting	96	221	DH, Rolpa	On time	75
129	DH, Dadeldhura	No reporting	0	229	DH, Achham	On time	100
				230	DH, Baitadi	Late reporting	100
				237	DH, Bhojpur	On time	100
				240	DH, Udaypur	On time	100
					Excellent (>80)		

Excellent (>80) Satisfactory (50-79) Bad(<50)

Acknowledgement

The Epidemiology and Disease Control Division highly acknowledges the contribution from all the medical recorders, EWARS focal persons, rapid response team members and support from WHO and NHSSP for preparation of this bulletin.

Note: EWARS reporting form (in MS Excel format) is available at EDCD's official website <u>www.edcd.gov.np</u>. This bulletin is also available at the website.