

Early Warning and Reporting System (EWARS)

Weekly Bulletin

(9th Epidemiological Week)

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This bulletin includes the updates from two surveillance systems:

1. The Early Warning Reporting System (EWARS) includes data since January 2015 till date, including comparison of same period during last year.
2. Post-earthquake hospital based syndromic surveillance system covering public and private hospitals in the 14 districts highly affected by the April 2015 Earthquake.

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

Highlights
<ul style="list-style-type: none"> • Few cases of Influenza Like Illness (ILI) from Lagam VDC of Surkhet district has been reported. Health team from DHO Surkhet has already been mobilized for the further investigation and control. • One death from AGE is reported this week from Lumbini Zonal Hospital, Rupandehi and the case is from Butwal Municipality. • Three deaths from SARI are reported this week, two from United Mission Hospital, Palpa and one from Mahakali Zonal Hospital, Kanchanpur. The cases are from Parbat, Palpa and Kanchanpur districts. Thirteen deaths from SARI were reported so far this year. • Last year, the cases of AGE started to peak from week 9, so it is important to remain alert for new outbreak. • No case of Dengue, Malaria and Kala-azar is reported this week.

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 48 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.

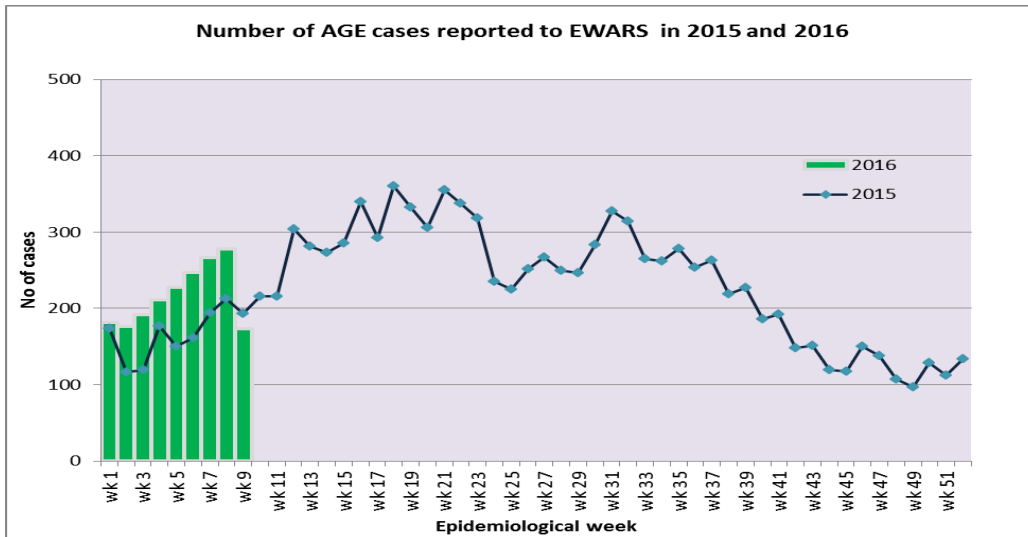


1.1 Acute Gastro-Enteritis and Cholera

173 cases of AGE are reported in 9th epidemiological week of 2016. Among 173 cases, the majority of cases are from Rupandehi (27), Jhapa (24 cases), Dhading (22 cases), Kanchanpur (15 cases) and Ramechhap (9 cases) districts. The number of AGE cases reported in 9th week this year did not exceed the number of AGE cases reported in the same week last year (193 cases). Last year, the cases of AGE started to peak from week 9, so it is important to remain alert for new outbreak.

One death from AGE is reported this week, from Lumbini Zonal Hospital, Rupandehi and the case is from Butwal Municipality. Five deaths from AGE are reported so far this year.

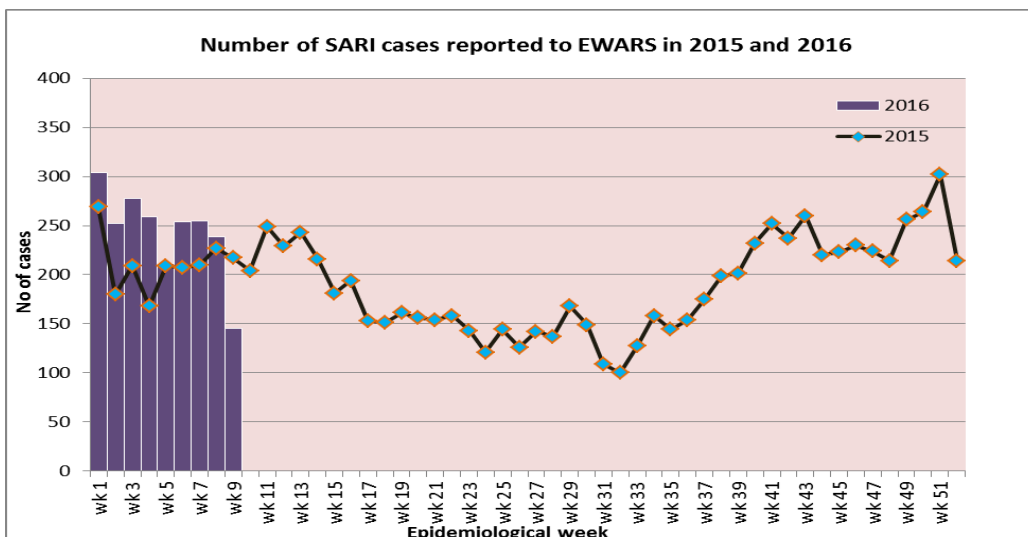
Cholera: No cholera cases are reported through the EWARS system this year.



1.2 Severe Acute Respiratory Infection (SARI)

145 cases of SARI are reported in 9th epidemiological week of 2016. The cases of SARI reported this week did not exceed the number reported in the same week last year (217 cases). Among 145 cases, 25 are from Rupandehi, 14 from Jhapa, 12 from Palpa, 11 each from Saptari and Kanchanpur and 9 from Dhankuta district.

Three deaths from SARI are reported this week, two from United Mission Hospital, Palpa and one from Mahakali Zonal Hospital, Kanchanpur. The cases are from Parbat, Palpa and Kanchanpur districts. Thirteen deaths from SARI are reported so far this year.



1.3 Enteric Fever

13 cases of enteric fever are reported this week including 4 from Kapilvastu district and 2 each from Kavre and Tanahu district. The number of cases of enteric fever was peaked in week 37 in 2015 (71 cases).

1.4 Malaria

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

1.6 Kala-azar

No case of Kala-azar is reported this week. Eighteen cases of Kala-azar are reported so far this year. 135 cases were reported through EWARS in 2015.

Section 2: Post-Earthquake Hospital Based Syndromic Disease Surveillance

Epidemiology and Disease Control Division (EDCD) has been continuing post-earthquake hospital based syndromic surveillance system. The system covers 38 hospitals and primary health care centers in 14 earthquake affected districts; however 9 districts reported in last two weeks.

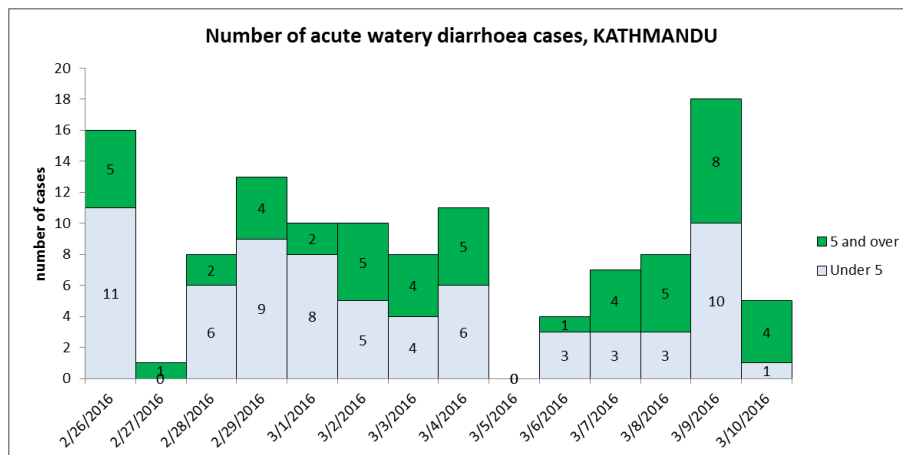
The objective of hospital based syndromic surveillance is to rapidly identify any increase in a number of outbreak prone syndromes. It helps us to ensure that outbreaks are not missed. The number of syndromes crossing the threshold level (doubling of the average of the previous 7 days, with a minimum of 5 cases) triggers an alert. But only one case triggers the alert for suspected cholera and fever with rash. Similarly, more than 5 cases in a 7 days' period trigger an alert for fever with jaundice.

The surveillance includes 8 syndromes: **Influenza like illness (ILI), severe acute respiratory infection (SARI), acute watery diarrhoea, acute bloody diarrhoea, suspected cholera, fever with rash, fever with jaundice and fever without rash and jaundice.** In this report, the data analysis was done for last 14 days.

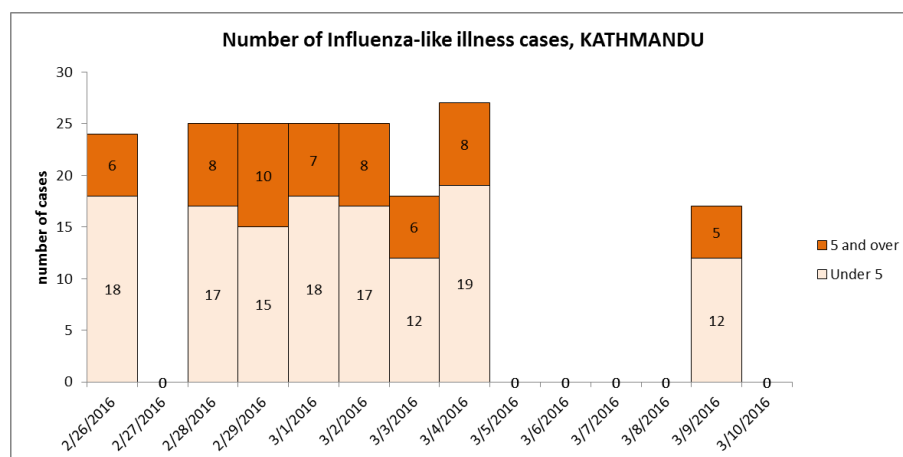
Highlights
<ul style="list-style-type: none">▪ The number of Acute watery diarrhoea peaked on 26th February with 32 cases.▪ Three cases of Acute bloody diarrhoea were seen in last two weeks.▪ The number of Influenza like Illness (ILI) peaked on 1st March with 30 cases.▪ The number of Severe Acute Respiratory Infection (SARI) peaked on 3rd March with 26 cases.▪ No cases of Fever with jaundice were seen in last two weeks.▪ The number of Fever with rash peaked on 10th March with 5 cases.▪ The number of Fever without rash and jaundice peaked on 26th February with 32 cases.

Analysis of information on 8 syndromes collected from hospitals in the earthquake affected 14 districts within 14 days shows that except in Kathmandu districts, no remarkable observations (increase or decrease) of outbreak prone syndromes were noticed. Reports were received from Gorkha, Kavre, Lalitpur, Makwanpur, Okhaldhunga, Ramechhap, Rasuwa and Sindhupalchok districts, while Bhaktapur, Dhading, Dolakha, Nuwakot and Sindhuli districts did not report in last weeks.

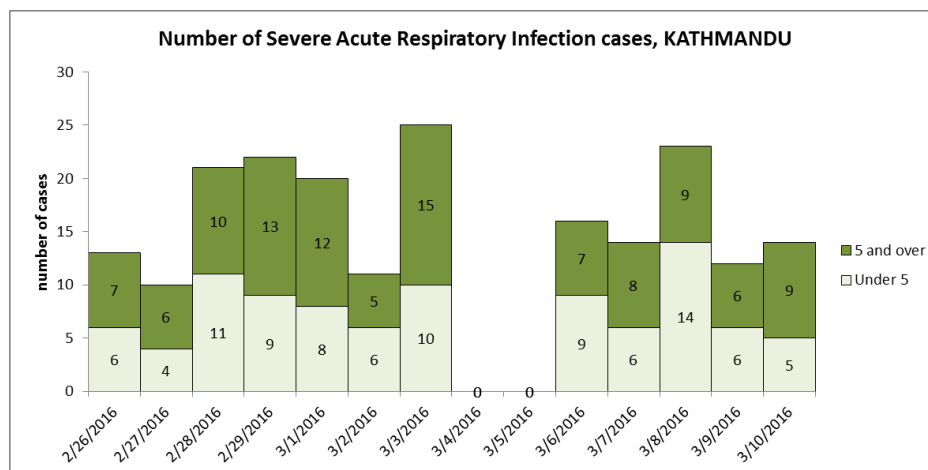
In Kathmandu, the highest number of acute watery diarrhoea was reported on 9th March with 18 cases.



In Kathmandu, the highest number of influenza like illness was reported on 4th March with 29 cases.



In Kathmandu, the highest number of severe acute respiratory infection was reported on 3rd March with 25 cases. The daily cases reported seem to be fluctuating over the weeks.



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.

Timeliness & completeness of reporting from sentinel sites:

Site Code	Sentinel Sites	Timeliness (%)	Completeness (%)	Site code	Sentinel Sites	Timeliness (%)	Completeness (%)
101	Mechi ZH, Jhapa	96	100	125	MZH, Kanchanpur	100	100
102	Koshi ZH, Morang	98	88	126	DH, Doti	94	100
103	DH, Sunsari	100	100	127	DH, Bardiya	96	88
104	BPKIHS, Dharan	92	100	128	DH, Mahottari	92	100
105	DH, Dhankuta	100	100	129	DH, Dadeldhura	0	0
106	SZH, Saptari	98	100	130	DH, Rasuwa	94	100
107	RKUP, Lahan, Siraha	94	88	131	DH, Sankhuwasabha	0	0
108	DH, Siraha	100	100	132	AMDA Hosp., Jhapa	100	100
109	JZH, Dhanusha	0	0	133	DH, Chautara	100	100
110	DH, Rautahat	88	88	134	DH, Sarlahi	84	44
111	DH, Bara	0	0	135	DH, Sindhuli	92	88
112	NSRH, Parsa	90	77	136	DH, Illam	98	100
113	DH, Makawanpur	92	88	137	Dhulikhel H., Kavre	98	100
114	NZH, Chitwan	88	77	138	DH, Solukhumbu	0	0
115	Kanti CH, Kathmandu	88	100	139	DH, Dolpa	0	0
116	STH, Kathmandu	98	100	140	DH, Humla	0	0
117	UMH, Palpa	98	100	201	Lamjung Comm DH, Lamjung	94	88
118	PCH, Nawalparasi	94	100	202	DH, Dhading	100	100
119	PBH, Kapilvastu	98	100	203	DH, Ramechhap	98	100
120	LZH, Rupandehi	100	100	209	Jiri H, Dolakha	86	11
121	RSRH Dang	0	0	211	DH, Tanahun	94	75
122	MWRH, Surkhet	96	88				
123	BZH, Banke	0	0				
124	SZH, Kailali	96	88				

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

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