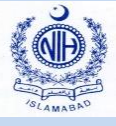




Field Epidemiology and Disease Surveillance Division (FEDSD)

National Institute of Health (NIH), Islamabad

Phone: 051- 9255237, Email: idsr-pak@nih.org.pk



Weekly Bulletin: Integrated Disease Surveillance and Response (IDSR)

06th January 2022

Highlights of the Epi-Week 52 (27th December 2021 – 02nd January 2022)

Cumulative Information

- During this week, maximum cases reported were of ILI, Acute Diarrhea (Non Cholera), SARI, ALRI <5 years, Malaria, B. Diarrhea, Typhoid, Rabies/Dog bite, suspected Cholera, & VH (B, C & D).
- In comparison with previous week i.e. Week-51, SARI, VH (B, C&D) & Rabies have shown an increase in trend while other diseases depicted a downward trend.
- Cases of VPDs (Pertussis, Measles, Chickenpox & Mumps) reported from KP, Balochistan, and Sindh warranting immediate attention of Immunization program to strengthen control the spread of VPDs.
- Cases of VH (B, C & D) and (A&E) are regularly reported from Sindh & KP province need urgent attention to confirm and to implement control measures accordingly.
- Cases of Rabies/Dog bite are on rise. An immediate attention is required to prevent morbidity and mortality from this fatal disease. Further Multisector approach should be adopted to tackle this issue.
- Bloody diarrhea, suspected Cholera and Typhoid cases are also reported from KP, Sindh and Balochistan. Public health measures need to be implemented on priority basis for control of these cases.
- There is persistent reporting of STI cases especially Gonorrhoea and Syphilis from Sindh & Balochistan which need investigation for differential diagnosis, proper follow up and treatment.

Figure 1: Most frequently reported cases during week 52, in comparison with previous weeks, Pakistan

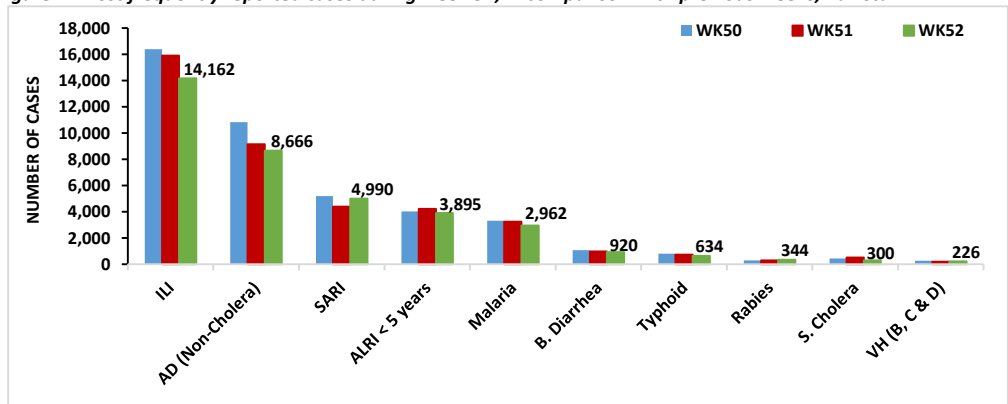


Table 1: Province/Area wise distribution of most frequently reported cases during week 52, Pakistan

Diseases	AJK	Balochistan	GB	ICT	KP	Sindh	Total
ILI	62	1,230	0	122	6,316	6,432	14,162
AD (Non-Cholera)	65	629	0	104	3,962	3,906	8,666
SARI	4	288	6	6	4,648	38	4,990
ALRI < 5 years	40	159	8	123	2,085	1,480	3,895
Malaria	0	297	0	0	1,236	1,429	2,962
B. Diarrhea	6	154	0	4	324	432	920
Typhoid	8	84	1	4	289	248	634
Rabies / Dog bite	0	8	0	0	226	110	344
S. Cholera	0	13	1	2	133	151	300
VH (B, C & D)	0	5	0	0	68	153	226
AVH (A & E)	0	0	0	0	129	13	142
Measles	0	9	0	0	66	11	86
Chickenpox	1	10	0	1	63	10	85
Mumps	0	8	0	0	47	10	65
Gonorrhoea	0	18	0	0	5	13	36
Dengue	0	1	0	0	3	17	21
Pertussis	0	9	0	0	8	1	18
Syphilis	0	0	0	0	0	4	4

Points of Attention

- Routine immunization is affected due to COVID-19 pandemic control activities, and regular Polio campaigns. Consequently, cases of vaccine preventable diseases (Measles, Mumps) are reported every week. **Therefore, vigilant monitoring, and coordination with EPI needs to be strengthened to reduce the VPD cases.**
- Malaria, and Typhoid cases are continuously reported especially from Balochistan and Sindh. It is emphasized that hotspots areas should be identified for epidemiological investigations and timely response.**
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices especially in diarrheal diseases and typhoid affected districts.
- STI cases especially Gonorrhoea, and Syphilis cases are regularly reported. This need to be epidemiologically investigated for confirmation and differential diagnosis. The public health response actions need to be implemented in the affected areas on priority basis.**
- Along-with infectious and non-infectious diseases, burden of Zoonotic diseases is increasing in Pakistan and Dog bite is amongst those diseases. To reduce cases, community awareness sessions may be arranged regularly. Moreover, at provincial level a comprehensive Rabies control plan should be developed on basis of One Health approach, and implemented accordingly.
- 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.

Sindh

- Sindh reported maximum cases of ILI (n=6,432), AD (Non Cholera) (n=3,906), ALRI <5 Years (n=1,480), Malaria (n=1,429), B. diarrhea (n=432), Typhoid (n=248), VH (B, C & D) (n=153), suspected Cholera (n=151), Rabies/ Dog bite (n=110), & SARI (n=38).
- District Ghotki reported the maximum cases of ILI, ALRI <5 years & AD (Non Cholera).
- District Hyderabad reported maximum cases of ILI, AD (Non Cholera), ALRI <5 years & B. diarrhea.
- From Kamber, AD (Non Cholera), Malaria & ALRI <5 years cases were at maximum.
- From Karachi East, maximum cases reported were of AD (Non Cholera).
- From Karachi Malir, maximum cases reported were of AD (Non Cholera), ILI & ALRI <5 years.
- From Larkana, cases of Malaria & AD (Non Cholera) were reported at maximum.
- Naushahro Feroze reported cases of ILI, AD (Non Cholera) & Malaria at maximum.
- District Shikarpur reported AD (Non Cholera) & Malaria cases at maximum.
- From Tharparkar, maximum cases of ILI, AD (Non-Cholera), ALRI <5 years & Malaria were reported.
- From Thatta, cases of AD (Non Cholera) were reported at maximum.
- Cases of HIV/AIDS have been reported from Larkana which need immediate verification and response accordingly.
- Cases of AFP from Larkana need immediate verification and public health response accordingly.
- There is a need to strengthen routine immunization to decrease disease burden of VPDs.
- This week, cases of ILI, ALRI <5 years & Typhoid declined as compared to previous week.

(Note: NR= Not Reported)

Figure 2: Most frequently reported cases during week 52, in comparison with previous weeks, Sindh

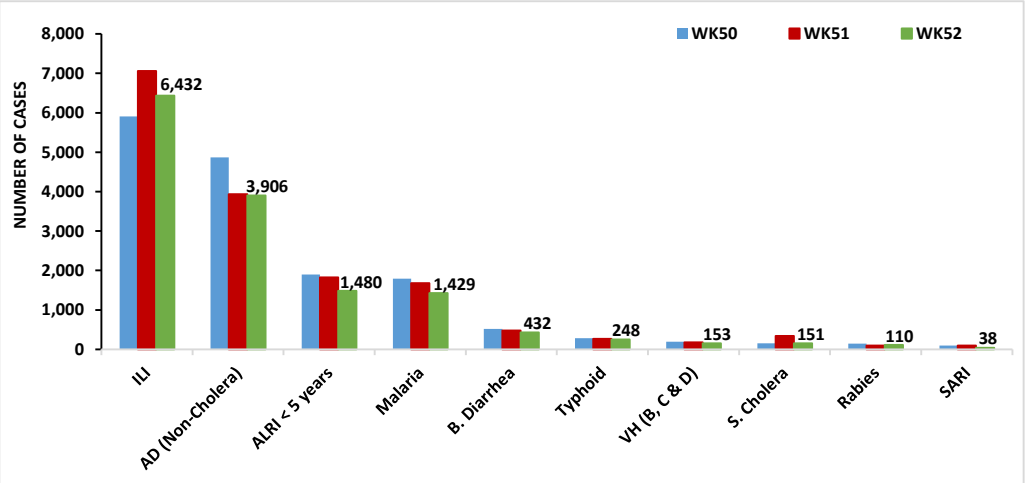
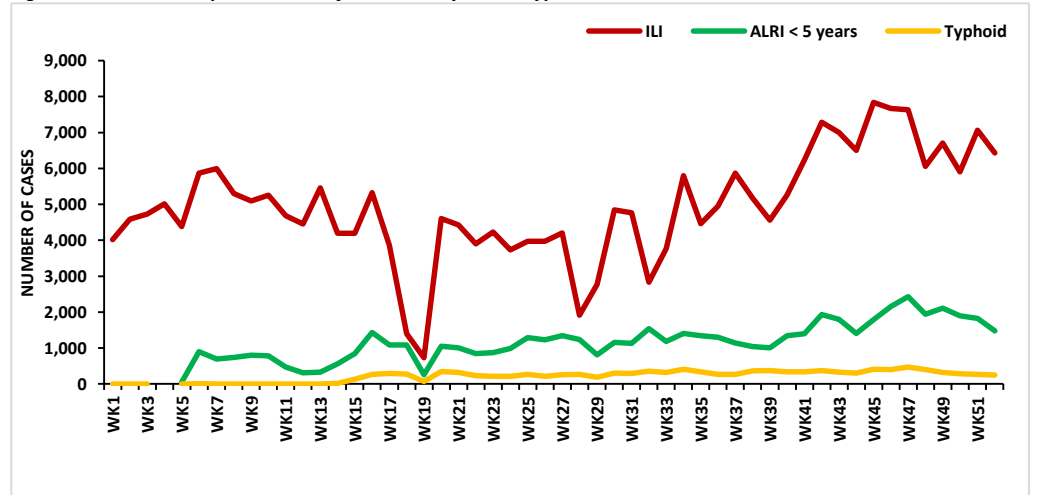


Table 2: District wise distribution of most frequently reported cases during week 52, Sindh

Diseases	Ghotki	Hyderabad	Kamber	Kar-East	Kar-Malir	Larkana	Naushahro Feroze	Shikarpur	Tharparkar	Thatta	Umerkot
ILI	530	3,139	0	0	411	0	632	2	1,694	24	0
AD (Non-Cholera)	119	1,286	236	149	536	266	138	192	871	80	33
ALRI <5 years	217	174	108	2	335	74	52	5	456	27	30
Malaria	32	23	197	13	54	528	102	80	344	34	22
B. Diarrhea	41	105	49	1	62	46	15	18	70	23	2
Typhoid	7	10	47	0	73	24	33	0	36	10	8
VH (B, C & D)	49	38	9	0	11	5	4	0	24	3	10
S. Cholera	50	50	0	0	49	0	0	0	0	2	0
Rabies / Dog bite	58	1	0	0	11	1	3	22	4	10	0
SARI	0	22	0	0	4	0	3	2	7	0	0
Dengue	0	4	0	0	0	0	0	0	13	0	0
AFP	0	NR	0	0	0	15	0	0	1	0	0
AVH (A & E)	0	4	0	0	0	0	1	0	4	4	0
Measles	3	1	1	0	0	0	0	0	6	0	0
Chickenpox	0	NR	0	4	4	0	0	0	2	0	0
Mumps	1	NR	0	0	9	0	0	0	0	0	0
HIV/AIDS	0	NR	0	0	0	4	0	0	0	0	0
Pertussis	0	NR	0	0	0	1	0	0	0	0	0

Figure 3: Week wise reported cases of ILI, ALRI <5 years & Typhoid, Sindh



Balochistan

- From Balochistan overall ILI (n=1,230), AD (Non Cholera) (n=629), Malaria (n=297), SARI (n=288), ALRI <5 years (n=159), B. diarrhea (n=154), Typhoid (n=84), CL (n=67), Gonorrhoea (n=18) & S. Cholera (n=13) remained at maximum.
- District Khuzdar reported maximum cases of ILI.
- District Killa Abdullah reported maximum cases of ILI & AD (Non Cholera).
- District Lasbella reported maximum cases for AD (Non-Cholera), Malaria, SARI & ALRI <5 years.
- District Pishin reported cases for ILI at maximum.
- District Quetta reported maximum cases for ILI & AD (Non-Cholera).
- Sibi reported maximum cases of ILI.
- District Zhob reported maximum cases of ILI & SARI.
- Cases of Anthrax, CRS and Leprosy have been reported from district Lasbella which need immediate verification and response accordingly.
- Cases of VPDs have been regularly reported, and therefore, needs strengthening of routine immunization system.
- In comparison with last week, cases of ILI, SARI & ALRI <5 years have been declined.

Figure 4: Most frequently reported cases during week 52, in comparison with previous weeks, Balochistan

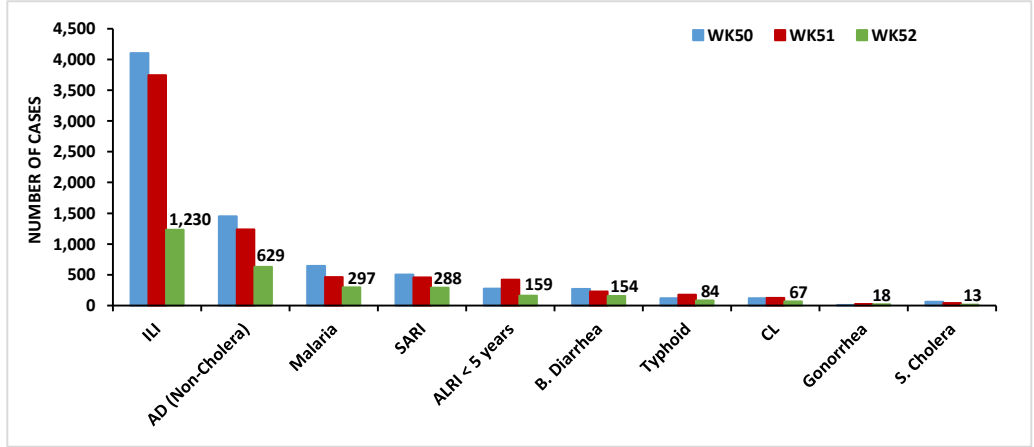
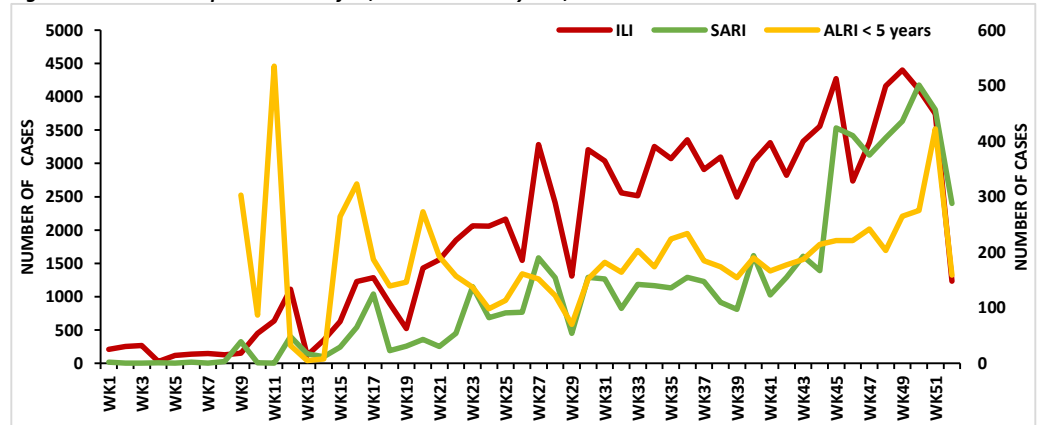


Table 3: District wise distribution of most frequently reported cases during week 52, Balochistan

Diseases	Khuzdar	Killa Abdullah	Lasbella	Pishin	Quetta	Sibi	Zhob	Total
ILI	62	62	37	325	447	81	216	1,230
AD (Non-Cholera)	37	48	247	43	180	46	28	629
Malaria	39	2	169	10	4	27	46	297
SARI	11	NR	105	6	0	7	159	288
ALRI < 5 years	11	NR	100	32	0	15	1	159
B. Diarrhea	32	NR	6	43	12	22	39	154
Typhoid	15	1	19	17	6	10	16	84
CL	1	8	11	9	35	3	0	67
Gonorrhoea	5	NR	0	13	0	0	0	18
S. Cholera	0	NR	7	0	0	3	3	13
Chickenpox	0	NR	6	0	0	2	2	10
Measles	2	1	6	0	0	0	0	9
Pertussis	3	NR	1	4	0	1	0	9
Rabies / Dog bite	1	NR	4	3	0	0	0	8
Mumps	2	NR	0	3	0	3	0	8
CRS	0	NR	5	0	0	0	0	5
Anthrax	0	NR	2	0	0	0	0	2
Leprosy	0	NR	1	0	0	0	0	1

Figure 5: Week wise reported cases of ILI, SARI & ALRI <5 years, Balochistan



Khyber Pakhtunkhwa (KP)

- KP reported cases of ILI (n=6,316), SARI (n=4,648), AD (Non Cholera) (n=3,962), ALRI <5 years (n=2,085), Malaria (n=1,236), B. diarrhea (n=324), Typhoid (n=289), Rabies/Dog bite (n=226), suspected Cholera (n=133) & AVH (A & E) (n=129) at maximum.
- District Abbottabad reported maximum cases of AD (Non-Cholera).
- District Charsadda reported maximum cases of Malaria, AD (Non-Cholera) & ILI.
- District Haripur reported maximum cases of ILI, AD (Non-Cholera) & ALRI <5 years.
- District Kohat reported maximum cases of ILI, SARI, AD (Non Cholera), & ALRI <5 years.
- District Lakki Marwat reported maximum cases of Malaria, AD (Non-Cholera) & ALRI <5 years.
- District Malakand reported maximum cases of ILI, ALRI <5 years, AD (Non Cholera) & SARI.
- District Swabi reported maximum cases of SARI, AD (Non Cholera), ILI & ALRI <5 years.
- District Swat reported maximum cases of ILI, SARI, AD (Non Cholera), Typhoid & Rabies/Dogbite.
- Weekly cases of ILI, SARI & ALRI <5 years cases depicted an abrupt increase in trend as compared to the last week i.e. week 51.
- Cases of Measles, Mumps, Pertussis, NT & Chickenpox have been reported, which need immediate actions to reduce burden of VPDs.
- Cases of AFP & Brucellosis need verification and further workup accordingly.

Figure 6: Most frequently reported cases during week 52, in comparison with previous weeks, KP

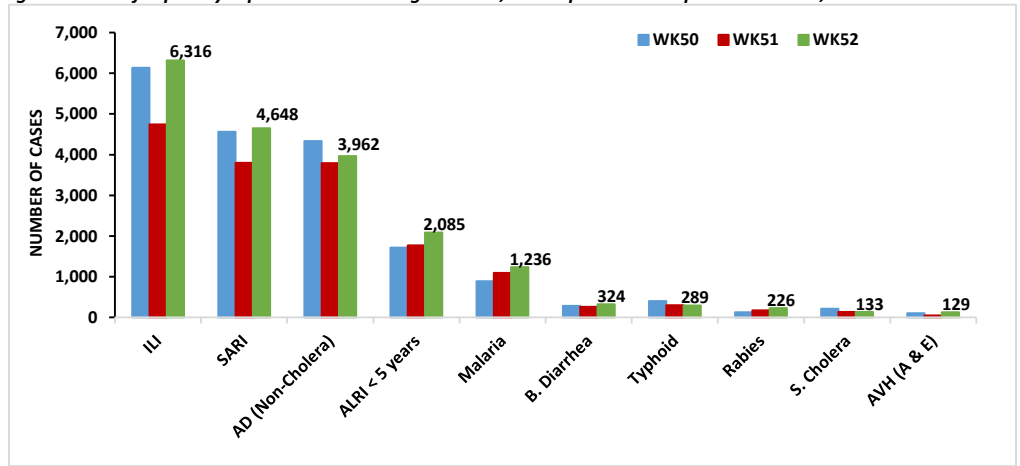
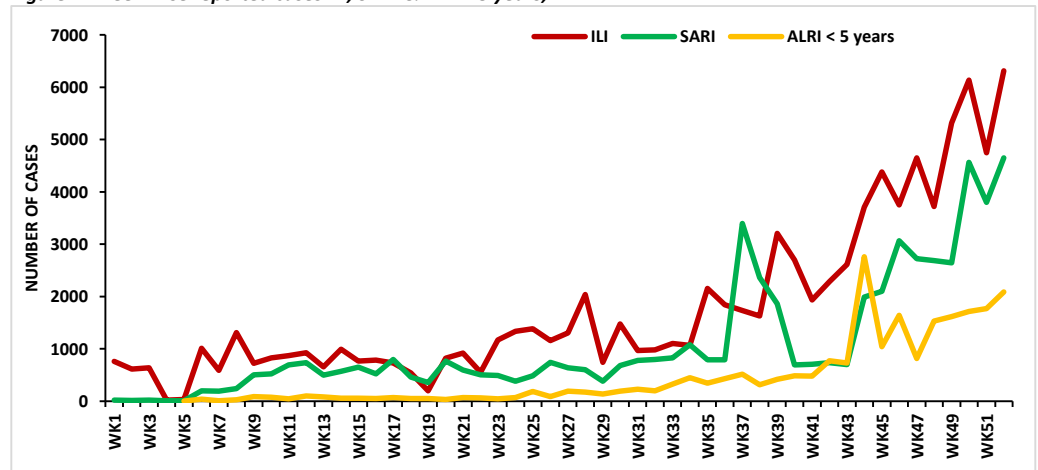


Table 4: District wise distribution of most frequently reported cases during week 52, KP

Diseases	Abbott-abad	Charsadda	Haripur	Kohat	Lakki Marwat	Malakand	Swabi	Swat	Total
ILI	1	171	1,019	600	72	2,090	362	2,001	6,316
SARI	22	86	69	367	22	195	1,484	2,403	4,648
AD (Non-Cholera)	333	454	516	329	308	517	454	1,051	3,962
ALRI < 5 years	6	10	345	122	290	1,074	203	35	2,085
Malaria	0	624	19	76	413	20	35	49	1,236
B. Diarrhea	3	31	98	34	23	45	0	90	324
Typhoid	8	50	48	12	10	21	31	109	289
Rabies / Dog bite	2	0	0	13	28	0	83	100	226
S. Cholera	0	0	56	9	3	15	34	16	133
AVH (A & E)	0	0	28	44	0	16	22	19	129
VH (B, C & D)	0	0	0	28	0	0	35	5	68
Measles	0	21	1	0	13	9	1	21	66
Chickenpox	0	0	12	4	3	19	22	3	63
Mumps	0	0	7	2	11	16	3	8	47
Pertussis	0	0	0	0	0	0	5	3	8
AFP	0	1	0	0	2	1	3	0	7
Brucellosis	0	0	0	0	0	0	0	2	2
NT	0	0	0	0	0	0	1	0	1

Figure 7: Week wise reported cases ILI, SARI & ALRI <5 years, KP



Islamabad (ICT)

- From ICT, the most frequent reported diseases were ALRI <5 years (n=123), ILI (n=122), AD (Non-Cholera) (n=104), SARI (n=06), B. diarrhea (n=04), Typhoid (n=04), suspected Cholera (n=02) & Chickenpox (n=01).
- During this week, a decrease in trend was observed for cases of ILI & ALRI <5 years as compared to last week i.e. Week 51.

(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 52, in comparison with previous weeks, ICT

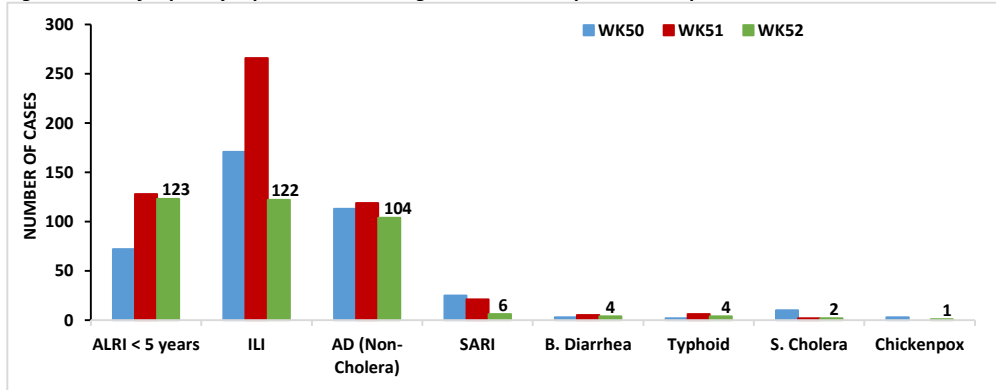


Figure 9: Week wise reported cases of ILI & ALRI <5 years, ICT

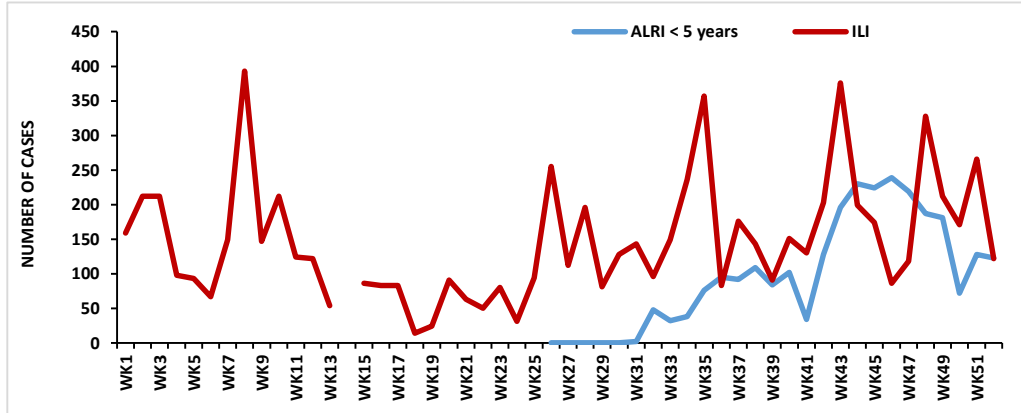
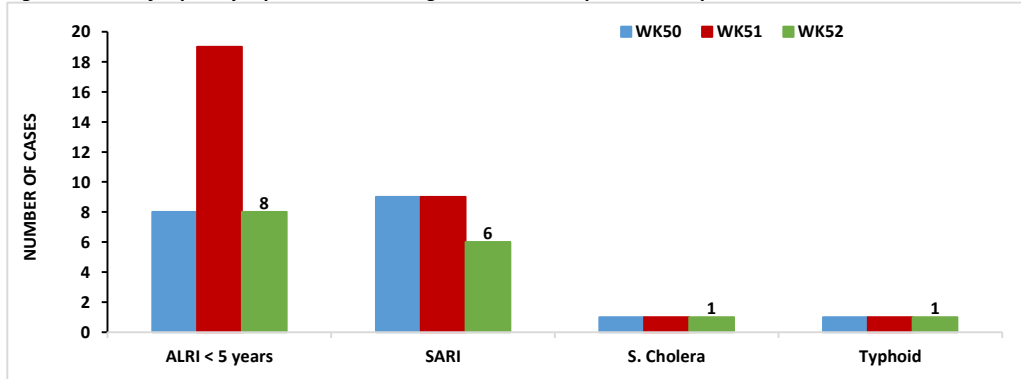


Figure 10: Most frequently reported cases during week 52, in comparison with previous weeks, GB

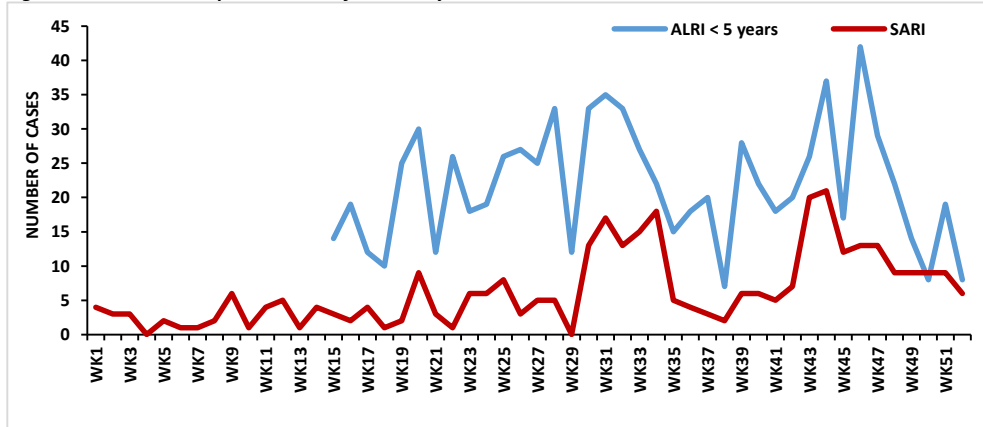


Gilgit Baltistan

- Gilgit-Baltistan reported cases of ALRI <5 years (n=08), SARI (n=06), suspected Cholera (n=01) & Typhoid (n=01) this week.
- Weekly trend cases of ALRI <5 years & SARI depicted an abrupt decline as compared to previous week i.e. Week-51.

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

Figure 11: Week wise reported cases of ALRI <5 years & SARI, GB



AJK

- District Mirpur reported cases of ILI & ALRI <5 years at maximum this week.
- Weekly trend of ILI cases showing a somewhat similar pattern whereas cases of ALRI <5 years are decreasing as compared to last week.

Figure 12: Week wise reported cases of ILI & ALRI <5 years, AJK

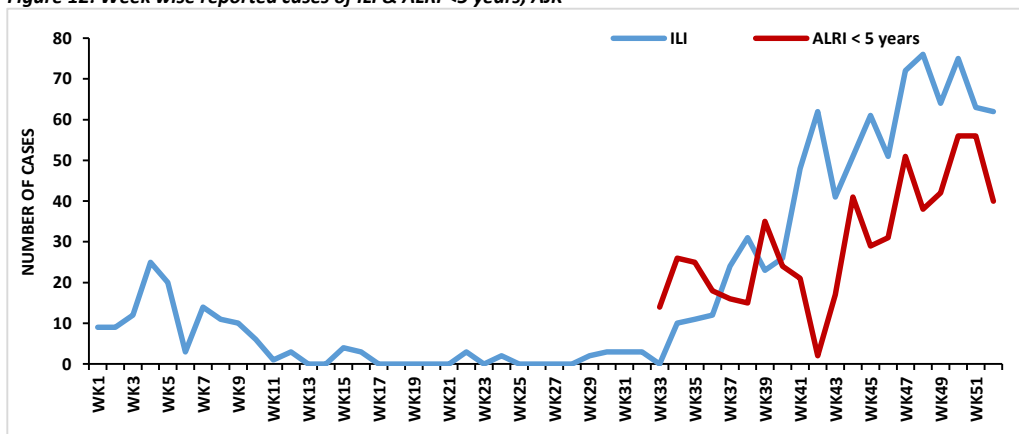


Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)
Khyber Pakhtunkhwa	Haripur	69/69	64 (93%)
	Kohat	59/59	59 (100%)
	Abbottabad	110/110	92 (84%)
	Charsadda	61/61	51 (84%)
	Lakki Marwat	49/49	49 (100%)
	Swat	77/77	62 (81%)
	Malakand	78/78	23 (30%)
	Swabi	63/63	60 (96%)
Azad Jammu Kashmir	Mirpur	37/37	23 (63%)
Islamabad Capital Territory	ICT	18/18	12 (67%)
	CDA	9/12	9 (100%)
Balochistan	Gwadar	24/24	0
	Kech	43/78	21 (49%)
	Khuzdar	20/136	19 (99%)
	Killa Abdullah	28/50	24 (86%)
	Lasbella	83/83	83 (100%)
	Pishin	23/118	11 (48%)
	Quetta	22/77	19 (87%)
	Sibi	42/42	37 (88%)
	Zohb	37/37	18 (49%)
Gilgit Baltistan	Hunza	30/30	29 (97%)
	Nagar	05/22	0
Sindh	Hyderabad	63/63	59 (94%)
	Karachi-East	14/14	13 (93%)
	Karachi-Malir	43/43	36 (84%)
	Ghotki	58/58	21 (37%)
	Umerkot	30/118	4 (14%)
	Naushahro Feroze	52/52	22(43%)
	Tharparkar	85/236	78 (92%)
	Shikarpur	32/32	10 (32%)
	Thatta	27/50	08 (30%)
	Larkana	149/149	37 (25%)
	Kamber	101/101	61 (61%)

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

IDSR Participating Districts

- This week 13% (04/32) of districts reported hundred percent (%) data. Districts are Kohat, Lakki Marwat, CDA (Islamabad) & Lasbella.
- District Kech reported data after the set timeline for reporting.
- Districts Gwadar & Nagar did not report data this week.