



# Field Epidemiology and Disease Surveillance Division (FEDSD)

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### Weekly Bulletin: Integrated Disease Surveillance and Response (IDSR)

17<sup>th</sup> June 2021

#### Highlights of the week 23 (07<sup>th</sup> June– 13<sup>th</sup> June 2021)

##### Cumulative Information:

- Maximum cases reported were; ILI (n=7041), Acute Diarrhea (Non Cholera) (n=4367), Malaria (n=1192), ALRI < 5 years (n=782), SARI (n=645), B. Diarrhea (n=545), Typhoid (n=391), suspected Cholera (n=248), Viral Hepatitis (B, C&D) (n=220) and Cutaneous Leishmaniasis (CL) (n=71).
- In comparison with previous week i.e. WK22, the cases of all above said diseases increased except CL.
- Cases of Suspected Cholera reported from, Sindh (n=151), Balochistan (n=58), KP (n=31) and GB (N=08).
- Cases of CL reported from Balochistan (n=61) and Sindh (n=10).
- Twenty one cases of Chickenpox and 08 cases of pertussis reported from Sindh.
- KP has reported 08 cases of Measles.

Figure 1: Most frequently reported cases during week 23, in comparison with previous weeks, Pakistan

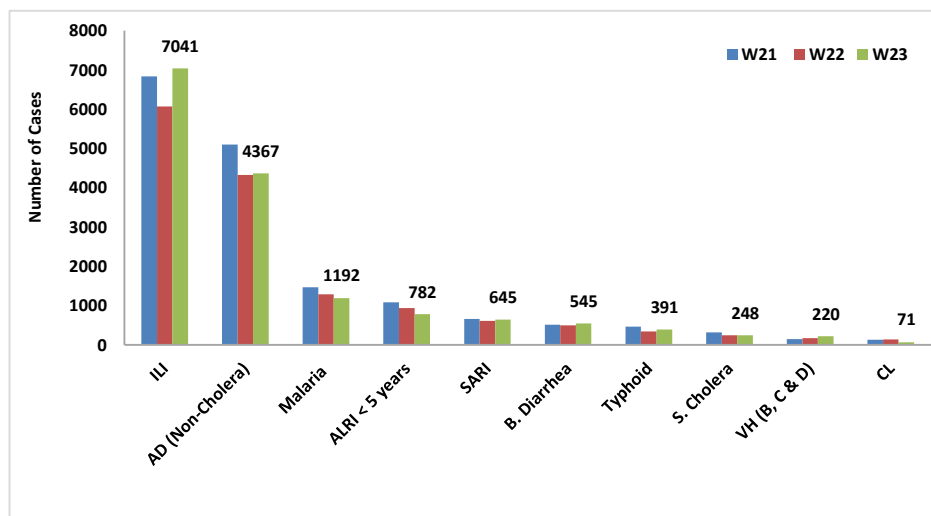


Table 1: Province/Area wise distribution of most frequently reported cases during week 23, Pakistan

Diseases	AJK	Baloch.	GB	KP	ICT	Sindh	Total
ILI	0	1,901	36	1,172	80	3,852	7,041
AD (Non-Cholera)	41	851	46	556	100	2,773	4,367
Malaria	8	284	0	356	0	544	1,192
ALRI < 5 years	0	124	18	45	0	595	782
SARI	0	114	6	488	0	37	645
B. Diarrhea	0	213	3	51	0	278	545
Typhoid	0	137	16	115	0	123	391
S. Cholera	0	58	8	31	0	151	248
VH (B, C & D)	0	4	0	0	0	216	220
CL	0	61	0	10	0	0	71

##### Point of Attention:

- Weekly IDSR Teleconference was resumed last week after break of 05 weeks. Focal persons from KP and AJK joined meeting. They updated on COVID-19 related activities in their districts and discussed progress on IDSR data flow and response.
- There is a need to verify the alerts for early detection and response activities by the IDSR teams and other concerned in their respective provinces and areas.
- Cases of AD, B. Diarrhea and S. Cholera are on rise from all reporting sites except for AJK which need to be verified, investigated, and responded.
- Maximum Typhoid cases reported from Balochistan, Sindh, KP, and GB. This need detailed investigation and classification (i.e. MDR or XDR) followed by response activities accordingly.
- Maximum Malaria cases reported from Balochistan, KP and Sindh. Verification, epidemiological investigation and response action in terms of Multisector coordination is urgently required.
- It is proposed to enhance community awareness on water, sanitation and hygiene (WASH) practices especially in diarrheal diseases and typhoid affected districts.
- Vaccine preventable diseases need immediate verification, epidemiological investigations, and response activities.
- Cases of leprosy from Balochistan required immediate verification, investigation and response.

## Sindh

- Sindh reported maximum cases of ILI (n=3852) followed by AD (Non Cholera) (n=2749), ALRI < 5 Years (n=595), Malaria (n=544), B. Diarrhea (n=277), VH (B, C & D) (n=216), S. Cholera (n=151), Typhoid (n=123), SARI (n=37) and Chickenpox (n= 21).
- District Ghotki reported the maximum cases of ILI, AD (Non Cholera), ALRI <5 years, Malaria and B. Diarrhea.
- District Hyderabad reported maximum cases of ILI, AD (Non-Cholera), ALRI <5 years, and S. Cholera.
- From Karachi Malir maximum cases reported as AD (Non-Cholera), ILI and ALRI <5 years.
- Karachi East reported maximum cases of AD (Non Cholera).
- From Tharparkar maximum cases of AD (Non-Cholera) and Malaria reported.
- Increase in case trend observed in ILI whereas AD (Non-Cholera) and ALRI <5 years remained same.

Figure 2: Most frequently reported cases during week 23, in comparison with pervious weeks, Sindh

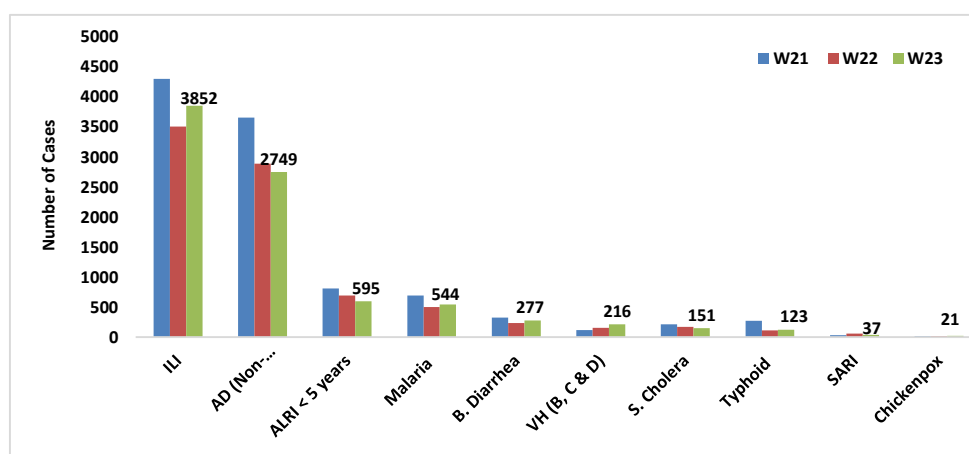
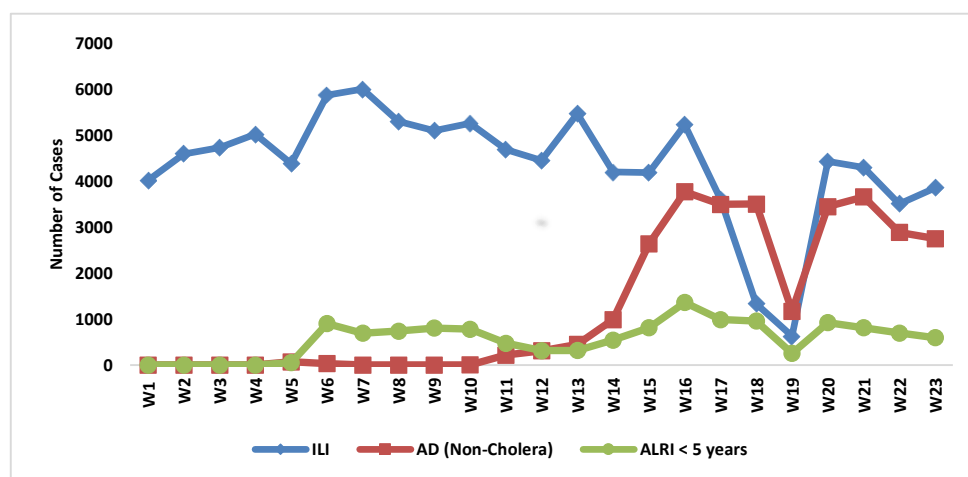


Table 2: District wise distribution of most frequently reported cases during week 23, Sindh

Diseases	Ghotki	Hyderabad	Karachi East	Karachi Malir	Shikarpur	Tharparkar	Total
ILI	767	2,671	0	336	0	78	3,852
AD (Non-Cholera)	737	924	111	607	16	354	2,749
ALRI < 5 years	177	219	2	108	0	89	595
Malaria	180	27	30	78	6	223	544
B. Diarrhea	176	41	0	32	0	28	277
VH (B, C & D)	143	20	0	23	0	30	216
S. Cholera	10	131	0	10	0	0	151
Typhoid	50	11	0	41	0	21	123
SARI	7	26	0	4	0	0	37
Chickenpox	5	5	4	7	0	0	21
Pertussis	1	0	0	7	0	0	8

Figure 3: Week wise reported cases of ILI, AD (Non-Cholera)& ALRI < 5 years, Sindh



## Balochistan

- From Balochistan overall ILI (n=1901), AD (Non Cholera) (n=842), Malaria (n=284), B. Diarrhea (n=213), Typhoid (n=137), ALRI <5 years (n=116), SARI (n=114), CL (n=61), S. Cholera (58), and Measles (n=03) remained at maximum.
- District Gwadar and Kech (Turbat) reported maximum cases for ILI and AD (Non-Cholera).
- District Lasbella reported maximum cases for Malaria followed by SARI.
- District Pishin reported more cases for ILI, AD (Non-Cholera), and B. Diarrhea
- District Quetta reported maximum cases for ILI followed by AD (Non-Cholera).
- In week 23, increase trend observed for ILI, AD (Non-Cholera) remained constant whereas Malaria declined.
- Cases of Leprosy, NNT, and Pertussis need immediate verification, epidemiological investigation and response actions.**

Figure 4: Most frequently reported cases during week 23, in comparison with previous weeks, Balochistan

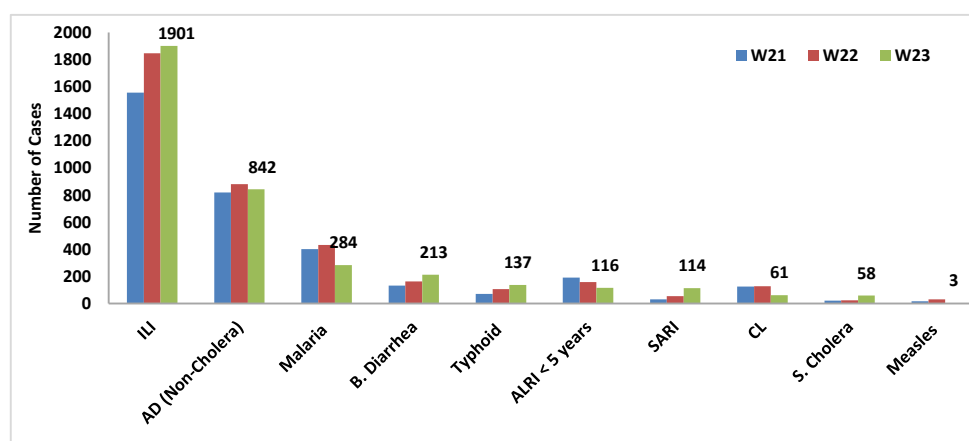
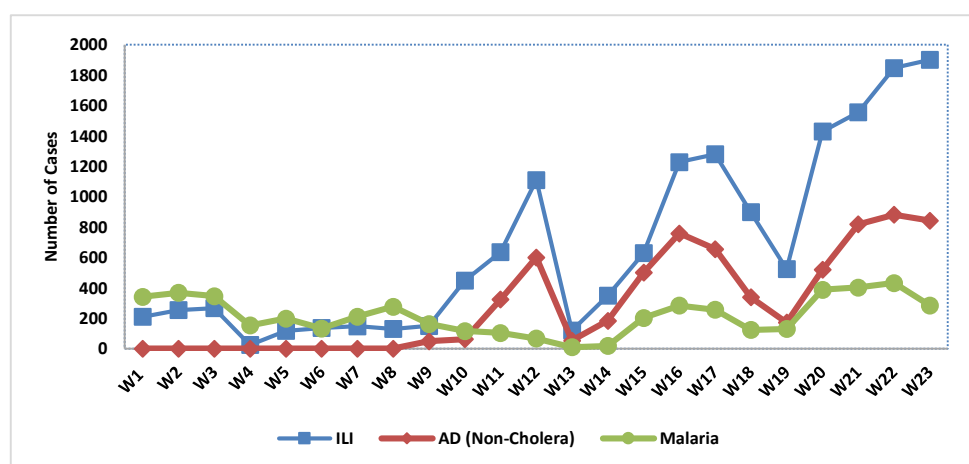


Table 3: District wise distribution of most frequently reported cases during week 23, Balochistan

Diseases	Gwadar	Kech (Turbat)	Lasbella	Pishin	Quetta	Total
ILI	510	419	1	213	758	1,901
AD (Non-Cholera)	236	156	44	132	274	842
Malaria	34	99	107	25	19	284
B. Diarrhea	30	30	6	111	36	213
Typhoid	19	0	2	83	33	137
ALRI < 5 years	1	40	42	19	14	116
SARI	1	1	80	0	32	114
CL	0	0	8	17	36	61
S. Cholera	0	0	23	26	9	58
Gonorrhea	0	0	0	28	0	28
Pertussis	0	0	3	11	0	14
Measles	0	0	0	0	3	3
Leprosy	0	0	0	0	2	2

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



## Khyber Pakhtunkhwa

- KP reported the maximum cases of ILI (n=1172), AD (Non Cholera) (n=556), SARI (n=488), Malaria (n=356), Typhoid (n=115), B. Diarrhea (n=51), ALRI<5years (n=45), S. Cholera (n=31), CL (n=10) and Measles (n=08).
- District Kohat remained the most affected district and reported maximum cases of all diseases except ILI
- District Haripur reported 107 cases of SARI and 01 case of Measles this week.
- Weekly cases of ILI showed upward trend whereas AD (Non Cholera) and SARI decreased in comparison with the previous week.
- **Cases Measles need immediate verification, epidemiological investigation and response actions**

Figure 6: Most frequently reported cases during week 23, in comparison with pervious weeks, KP

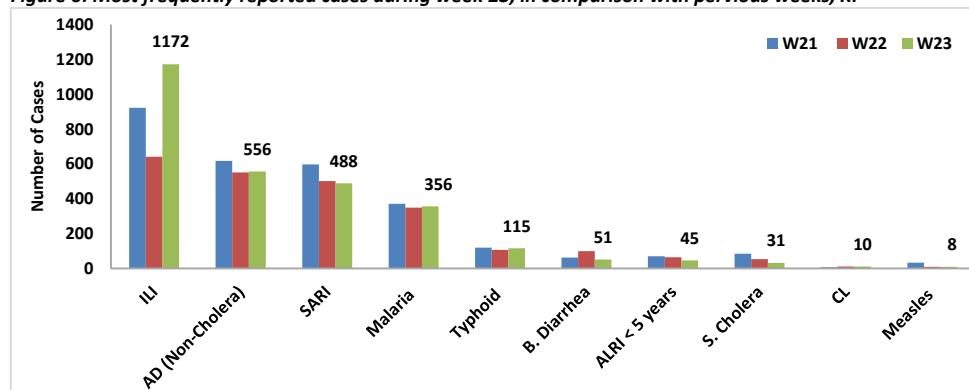
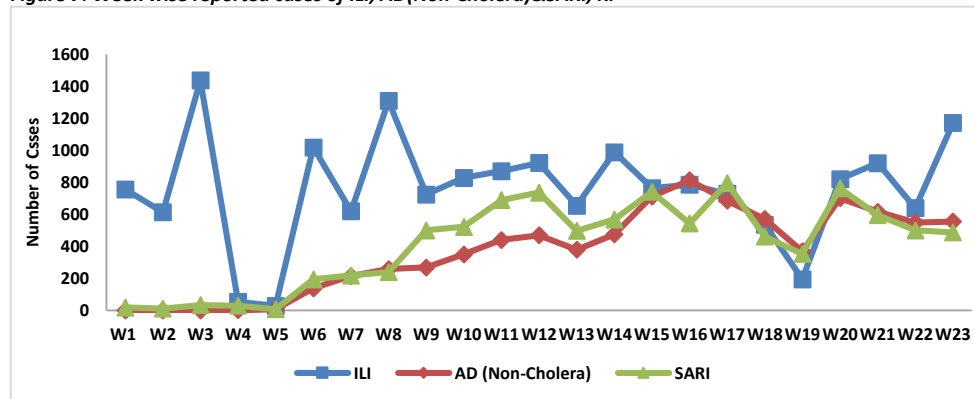


Table 4: District wise distribution of most frequently reported cases during week 23, KP

Diseases	Haripur	Kohat	Total
ILI	836	336	1,172
AD (Non-Cholera)	0	556	556
SARI	107	381	488
Malaria	0	356	356
Typhoid	0	115	115
B. Diarrhea	0	51	51
ALRI < 5 years	0	45	45
S. Cholera	0	31	31
CL	2	8	10
Measles	1	7	8

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



## Islamabad (ICT)

- From ICT, most frequent diseases were ILI (n= 80), ARI (70) followed by AWD <5 years (n=62), and AWD >5 years (n=38).
- In WK 23, decrease in trend observed for AWD (>5 years) and increased for ILI.
- Weekly cases of ILI and AWD <5 years are increasing in ICT.

Figure 8: Most frequently reported cases during week 23, in comparison with previous weeks, ICT

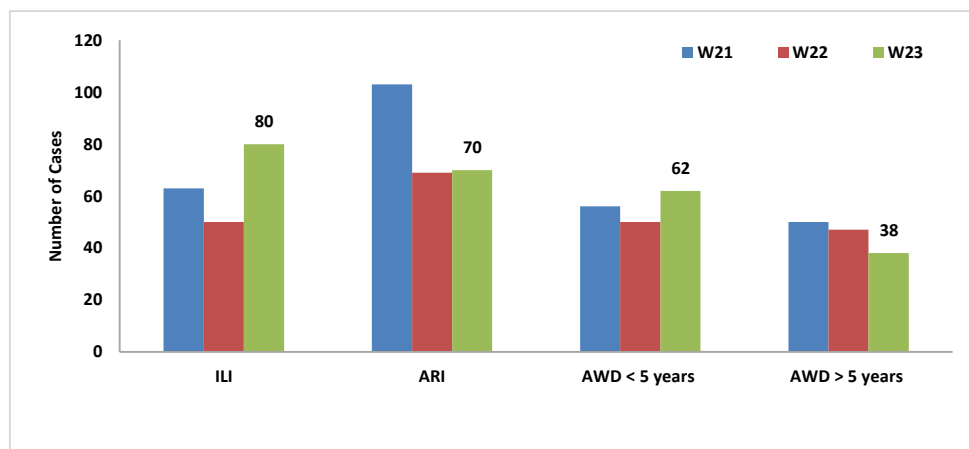
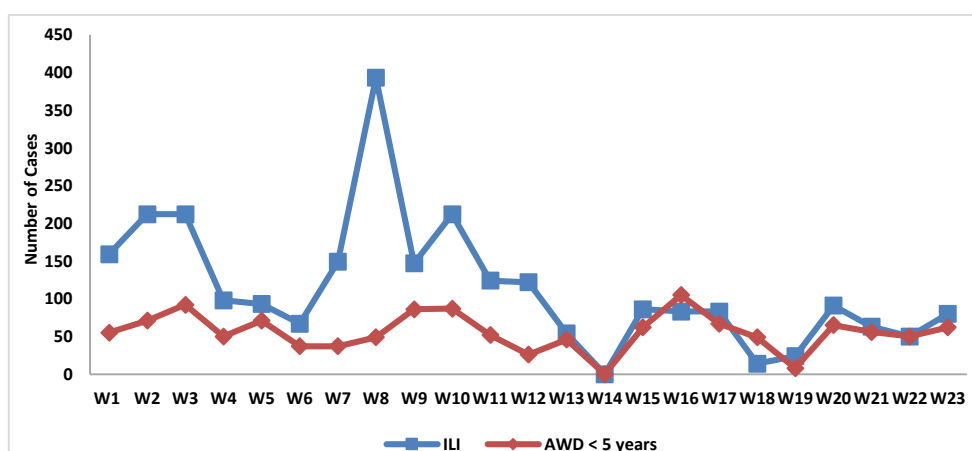


Figure 9: Week wise reported cases of ILI and AWD, ICT



## Gilgit Baltistan

- From Gilgit Baltistan, maximum cases reported were AD (Non-Cholera), ILI, ALRI < 5 years, Typhoid and S. Cholera, SARI and B. Diarrhea.
- Weekly cases of AD (Non-Cholera) and ILI increased this week in comparison with the previous week (WK 22)

Table 5: District wise distribution of most frequently reported cases during week 23, GB

Diseases	Hunza	Nagar	Total
AD (Non-Cholera)	9	37	46
ILI	0	36	36
ALRI < 5 years	14	4	18
Typhoid	9	7	16
S. Cholera	8	0	8
SARI	5	1	6
B. Diarrhea	0	3	3

Figure 10: Most frequently reported cases during week23, in comparison with pervious weeks, GB

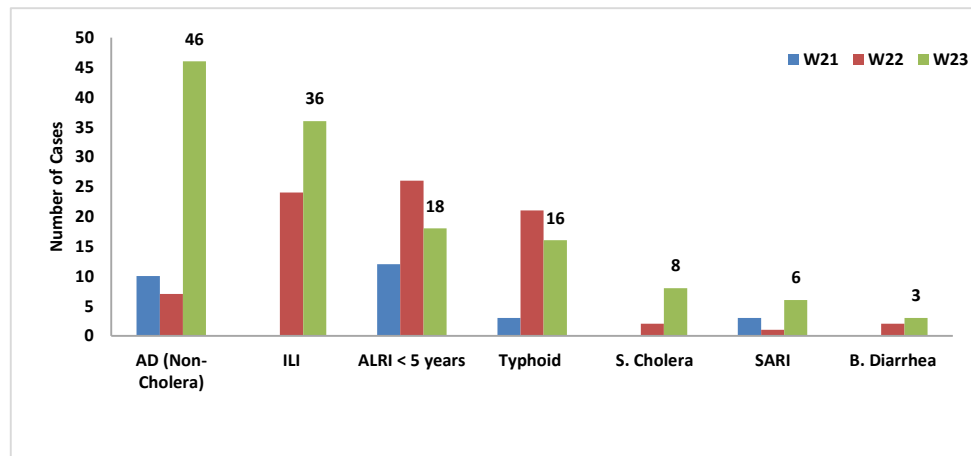
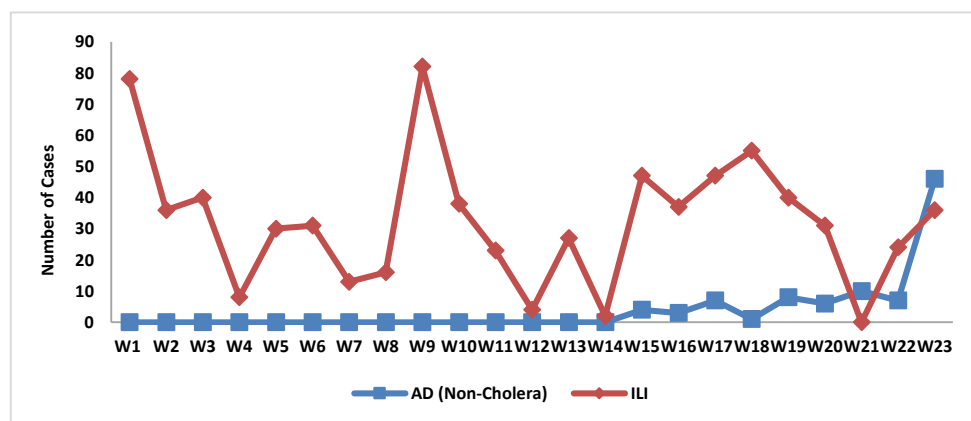


Figure 11: Week wise reported cases of AD (Non-Cholera) & ILI, GB



## Azad Jammu & Kashmir

- In AJK, except Malaria all rest of the diseases decreased this week.
- Overall weekly cases of AWD > 5 and ARI decreased in comparison with the previous week (WK 22)

Figure 12: Most frequently reported cases during week 23, in comparison with pervious weeks, AJK

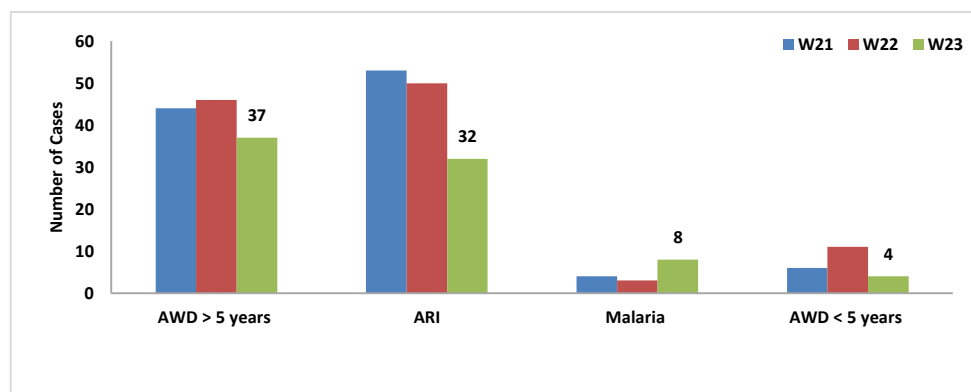
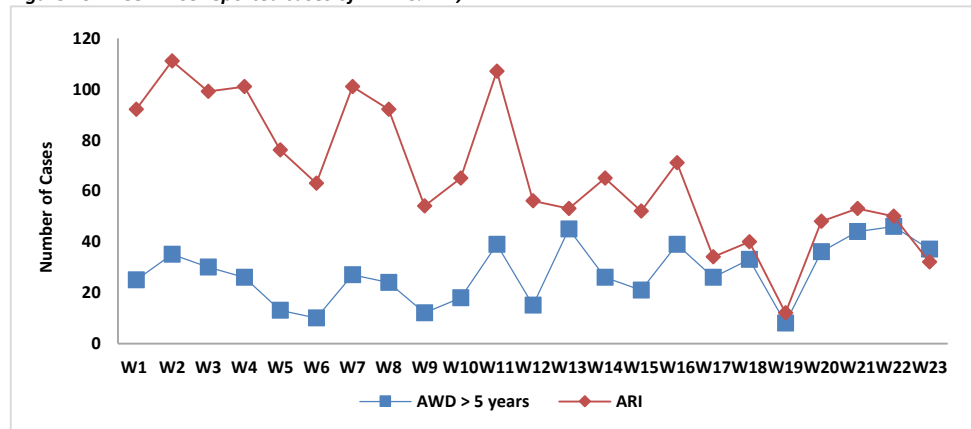


Figure 13: Week wise reported cases of AWD& ARI, AJK



## IDSR Participating Districts

- 100% health facilities from Kohat & Tharparkar reported data.
- Districts Killa Abdullah, NoshoroFeroz & Umerkot did not report data this week.

Table 5: IDSR reporting districts

Province	Districts	Total Number of Reporting Sites (ARS/Total)	Total Number of Sites that Reported (%)
Khyber Pakhtunkhwa	Haripur	70/70	69(99%)
	Kohat	59/59	59(100%)
Azad Jammu Kashmir	Mirpur	37/37	28 (76%)
Islamabad Capital Territory	Islamabad	23/32	12(52%)
Balochistan	Gwadar	24/24	20 (83%)
	Kech	34/78	19 (56%)
	Killa Abdullah	18/50	0 (0%)
	Lasbella	82/82	70 (85%)
	Quetta	20/77	17 (85%)
	Pishin	23/118	19(83%)
Gilgit	Hunza	30/30	25 (83%)
	Nagar	22/22	7 (32%)
Sindh	Hyderabad	63/63	56 (89%)
	Karachi-East	14/14	13 (93%)
	Karachi-Malir	43/43	30 (70%)
	Ghotki	94/94	58 (62%)
	Umerkot	30/118	0 (0%)
	NoshoroFeroz	50/50	0 (0%)
	Tharparkar	25/236	25 (100%)
	Shikarpur	21/21	6 (29%)

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