



Highlights

*Epidemiological week no. 2
(6 to 12 Jan 2013)*

- **Measles:** 131 alerts investigated this week, responding to 30 outbreaks involving 820 measles cases and 35 deaths in 53 districts. Vitamin-A was provided to cases and EDOs-H took action to improve vaccination in affected areas.
- **80 districts** and 2190 health facilities have reported to DEWS this week 2, compared with 84 districts with 2308 health facilities shared weekly data in week 1, 2013 to the Disease Early Warning System (DEWS).
- **765,766** patients' consultations were reported in week 2, 2013 compared to **731,019** consultations reported in week 1, 2013.
- Altogether **156** alerts were investigated and response were provided to **35** outbreaks.

Figure-1: 80 districts reported to DEWS in week 2, 2013



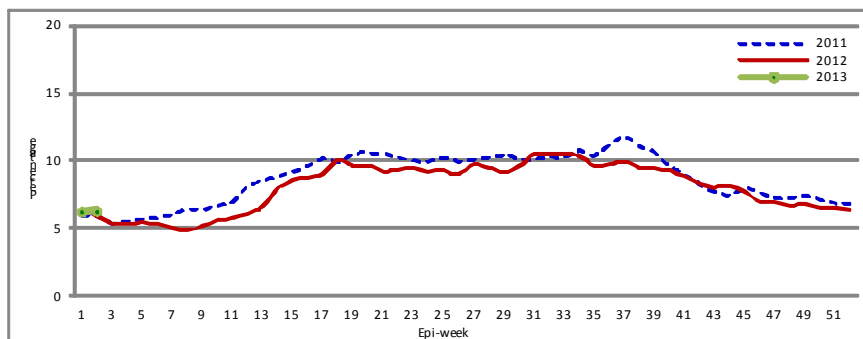
Priority diseases under surveillance in DEWS

- Pneumonia
- Acute Watery Diarrhoea
- Bloody diarrhoea
- Other Acute Diarrhoea
- Suspected Enteric/Typhoid Fever
- Suspected Malaria
- Suspected Meningitis
- Suspected Dengue fever
- Suspected Viral Hemorrhagic Fever
- Suspected Measles
- Suspected Diphtheria
- Suspected Pertussis
- Suspected Acute Viral Hepatitis
- Neonatal Tetanus
- Acute Flaccid Paralysis
- Scabies
- Cutaneous Leishmaniasis

Cumulative number of selected health events reported in Epi-week 1 to 2, 2013 (29 Dec 2012 to 11 Jan 2013)

Disease	# of Cases	Percentage
Acute diarrhoea	94,157	6%
Bloody diarrhoea	4,554	0.5%
ARI	437,449	29%
S. Malaria	70,478	5%
Skin Diseases	58,342	4%
Unexplained fever	48,559	3%
Total (All consultations)	1,496,785	

Figure-2: Weekly trend of Acute diarrhoea in Pakistan; Week-1, 2011 to week-2, 2013.



Major health events reported during the Epi-week - 2 (5 - 11 Jan 2013)

Disease	# of Cases	Percentage
Acute diarrhoea	48,255	6%
Bloody diarrhoea	2,111	<0.5%
ARI	223,567	29%
S. Malaria	36,072	5%
Skin Diseases	29,847	4%
Unexplained fever	22,889	4%
Total (All consultations)	765,766	

- The graph (Figure-2) shows the comparison of weekly trend of Acute diarrhoea as proportional morbidity (percentage of cases out of total consultations) reported to DEWS each week in year 2011; 2012 and 2013.
- Overall weekly trend of acute diarrhoea is stable in all provinces.

Current week's (2/2013) Outbreaks:

Date	Disease	Province	District	Area	<5M	>5M	<5F	>5F	Action Taken
11-Jan	Leishmaniasis	Balochistan	Killa Saifullah	Muslim Bagh town area, Tehsil Muslim Bagh	1	6	1	2	Alert for 10 cases of suspected Leishmaniasis, reported from THQ hospital. Patients were investigated and found lesion on face and arm. No travelling history. Health sessions taken and treatment as per WHO protocol was given.
10-Jan	Leishmaniasis	Balochistan	Sibi	DHQ Sibi	3	1	3	1	8 patients were reported from DHQ Sibi. No travelling history. Treatment up to WHO protocol was given. Community was sensitized. Matter was discussed with DHO. No other cases were found during field investigation.
11-Jan	Measles	Balochistan	Harnai	Belli, UC Spintangi, Tehsil Harnai	6	0	4	0	Alert for measles, received from HF in UC Spintangi. On investigation, found more cases of suspected measles as well. Total 10 cases were reported. All cases immunized during vaccination campaign. All information shared with district health team.
7-Jan	Measles	Balochistan	Jaffarabad	City, UC, Tehsil Usta Mohammad	3	1	3	0	Alert for 4 cases of measles with 1 death reported from private clinic. Vit A given to all reported cases with symptomatic treatment. Mop up activity done with the support of DoH team.
7-Jan	Measles	Balochistan	Jaffarabad	Goth Jhanda Talab, UC Nozband, Tehsil Sohbat Pur	3	1	2	0	Alert for 3 cases of measles reported. All cases were under symptomatic treatment and were vaccinated against BCG, but Measles was unknown. Vit A doses given. One blood sample was collected. During house to house surveillance 11 children were checked and 8 were immunized against BCG. guardians were sensitized regarding vaccination. Information shared with DoH and requested outreach immunization.
8-Jan	Measles	Balochistan	Killa Saifullah	Killi Kazha, UC Nasai, Tehsil Muslim Bagh	3	2	4	0	Alert for 9 cases of measles. Patients had fever and cough with rash. 4 patients have been expired. Vit A and symptomatic treatment was given along with health education. No more cases identified on door to door investigation. Immunization of the area had done during measles campaign. Information shared with DoH.
10-Jan	Measles	Balochistan	Killa Saifullah	Killi Mashowala, UC Batozai, Tehsil KSF	2	1	2	0	Alert for 5 cases of measles reported. Treatment was given and Vit-A provided. Cases were vaccinated. During field surveillance no more cases were identified. The area was vaccinated during the campaign.
10-Jan	Measles	Balochistan	Killa Saifullah	Killi Sami Khula, UC Batozai, Tehsil KSF	4	5	3	6	Alert for 18 suspected cases were reported. Cases were investigated and found with presentation of fever and rashes. Vit A and symptomatic medication given. All cases were immunized. Information shared with DHO. The children in the area were made vaccinated during current measles campaign.
7-Jan	Measles	Balochistan	Nasirabad	Word no, 4 Molvi Khuda Bakhs Solangi, Tehsil D.M. Jamali	7	0	5	0	Alert for 12 cases of measles was received from private clinic. Cases were checked and found with presence of suspected measles signs and symptoms. Affected area was checked and cumulatively 12 cases checked, most of the cases were found unimmunized. Vit-A, and health education were provided. Health teams sent for Mop up with the coordination of DHO, DSU.
10-Jan	Measles	Balochistan	Nasirabad	Ghot Sawali Khan Umrani, Tehsil Tamboo	3	0	2	0	Alert received by private clinic. 5 suspected measles cases were reported. Investigation with collaboration of DoH team was done. All cases presented with typical sign and symptoms of measles. Immunization status of the community was not satisfactory. Mop-up activity was planned.
11-Jan	Measles	Balochistan	Nasirabad	Lango Mahla, Word # 4, Town Gharbi	3	0	6	3	Measles outbreak was reported from private clinic. During investigation 6 cases with mild post Measles complication with history of 5 deaths found. All cases and deaths occurred in one family. Reporting children were provided treatment with health education. Routine immunization was checked. Only 1 out of 15 cases was immunized. Information shared with DHO and requested for mop-up activity.
8-Jan	Measles	Balochistan	Quetta	Pediatric Unit 1 BMCH (Killi Sanzar Khail, near Bakramandi Kuchlak, Quetta	0	3	0	3	Alert for 2 measles cases reported. Both the cases presented with post measles complications (Pneumonia). Cases already received Vit. A and supportive treatment. On further investigation it found that four other cases are also infected with measles and all the cases belong to same family. All the cases were unimmunized. Family was advised to vaccinate their children from nearby static centre. EPI, DHMT and PPHI also informed regarding vaccine status of the area.
9-Jan	Measles	Balochistan	Sibi	Aziz shaheed colony, Sibi city	1	1	2	1	Measles alert reported from community. During field visit found 4 suspected case and 1 death due to post measles complications was found. Immunization status checked in nearby houses found 22 unvaccinated children. Vit A given to suspected cases. Outbreak was brought in the notice of DHO for further action.
12-Jan	Measles	Balochistan	Sibi	BHU Sultan kot	0	1	2	1	5 post measles cases were admitted in the BHU and reported from village Imdad Goth. No Immunization history of the patients found. Vit A given to all the cases. Patients were under treatment. DHO was requested to send team for mop-up activity.
9-Jan	Pertussis	Balochistan	Nasirabad	Ghot Molvi Din M. Jhakrani, UC Quba Sher Khan, Tehsil Chatter	5	0	1	0	Alert for probable Pertussis cases reported from security compromised area. District health team was sent to the area for confirmation and mop-up. Investigation completed and cases were provided symptomatic treatment. Coordination made with notable of the area to put health awareness.
7-Jan	Leishmaniasis	FATA	Khyber Agency	Village Qambar, UC Janbaz Killi, Tehsil Bara	2	6	3	5	Alert for suspected Cutaneous Leishmaniasis cases were reported from BHU Janbaz killi. A total of 16 cases were identified and line list maintained. Health education was imparted. Injection Glucantime was provided. Bed nets were also provided from CH Jamrud warehouse. Report was shared with PPHI and Agency surgeon.
9-Jan	Measles	FATA	Khyber Agency	Village Abu khel, UC Mian Morcha, Tehsil Mulagori	4	3	6	2	Alert for suspected measles cases were reported from BHU Mian Morcha. On active surveillance 15 cases were found. Vitamin A was given to suspected measles cases. A blood sample was taken and sent to NIH PHLD. Health education was imparted. Mass measles vaccination of 63 children done. Report was shared with Agency surgeon and FSMO.
10-Jan	Measles	FATA	Khyber Agency	Village Allah Dosh, UC Lowara mina, Tehsil Mulagori	4	3	5	4	The suspected measles cases were reported from CH Lowara mina. On active surveillance 16 cases were identified. Vitamin A was given to suspected measles cases. Blood sample was taken from 2 suspected measles cases and were sent to NIH PHLD. Health education was imparted. Mass measles vaccination was of 110 children was done. Report was shared with Agency surgeon and FSMO.
10-Jan	Measles	Khyber Pakhtunkhwa	Dir Lower	village Enzaro Banda, UC Mian Kallay, Tehsil Samarbagh, Dir lower	3	0	6	1	5 suspected Measles cases reported from DHQ Hospital Dir Lower. WHO team investigated the cases detailed history was taken from the patients and blood sample was collected and sent to NIH Islamabad. Suspected case 6 years old female developed fever, ARI and followed by rash and brought to DHQ hospital. 5 suspected Measles cases from same family with symptoms of ARI, AD and mouth ulcer were admitted in MSF ward. BCG Scar present and 3 out of 10 children missed Measles vaccination. Health education session was conducted with the family and Vit. A drops given to the contacts and all suspected measles cases admitted and at home in UC Mian Kallay.
11-Jan	Measles	Khyber Pakhtunkhwa	Dir Lower	village Chalgozai, Enzaro Banda, UC Mian Kallay, Tehsil Samarbagh, Dir lower	2	0	4	0	2 suspected Measles cases reported from MSF measles ward DHQ Hospital Dir Lower. WHO team investigated the cases detailed history was taken from the patients and blood sample was collected and sent to NIH. Suspected case 4 years old female developed fever, ARI and followed by rash and brought to DHQ hospital. One suspected Measles case from same family was also admitted in DHQ with symptoms of Rash, Fever and ARI. BCG Scar present and 6 out of 6 children missed Measles vaccination. Health education session was conducted with the family and Vit.A drops given to the contacts and all suspected measles cases. Measles Mop up campaign has been started in UC Mian Kallay and 265 Children have been vaccinated so far and it will be continued for next three days in surrounding villages.

Cont'd current week's (2/2013) Outbreaks:

Date	Disease	Province	District	Area	<5M	>5M	<5F	>5F	Action Taken
8-Jan	Measles	Khyber Pakhtunkhwa	Shangla	UC Sarkool Tehsil Puran	7	2	12	2	Alert for suspected Measles cases reported from UC Sarkool. A team of Vaccinators of EPI sent to the area. On Active surveillance 23 suspected measles cases with 3 deaths reported from the area. All antigen mass vaccination is going on in UC Sarkool.
10-Jan	Measles	Khyber Pakhtunkhwa	Shangla	village & UC chakisar, Tehsil Puran	1	0	4	0	Alert for measles, belongs to UC Chakesar. Detailed history was taken from the patient, vitamin A drops provided and blood sample collected. Coordinator EPI Shangla was informed, during active surveillance found 4 more measles cases found. Mop-up done in the area by EPI Teams.
8-Jan	Measles	Khyber Pakhtunkhwa	Swabi	BMC Swabi, Ner Ghara Zaida	1	3	1	2	Alert for suspected cases of Measles were reported from BMC Swabi. During investigation 6 more cases were found in the same locality. Vit.A given, health education sessions conducted, EDO H and EPI coordinator Informed, EPI Tech of the relevant UC was also present and briefed by WHO EHA for Mop up activity.
10-Jan	Leishmaniasis	Punjab	Multan	Qila Qasim Bagh, UC Abid Colony, Shah Rukn-e-Alam Town	0	24	0	0	Alert for 20 patients of Cutaneous Leishmaniasis reported from Nishter Hospital Multan (NHM). All resident of Madrasa Khair-ul-Maud. Madrasa was visited and all students were examined. On Active Surveillance 4 more similar cases were found. EDOH was informed who arranged a trained doctor from Nishter Hospital Multan for intra lesional administration of Inj. Glucantime. Expert opinion was also sought from dermatology department NHM who clinically diagnosed CL. First intra lesion session of Glucantime was started, provided by WHO. HE session conducted for the community about prevention and management of this disease and measures to reduce exposure to disease by using mosquito nets, repellants, and cover the extremities. Follow up planned, EDO(H) informed.
7-Jan	Measles	Punjab	Bhakkar	Chak # 52-TDA,UC Notak, Tehsil Bhakkar.	3	3	5	3	Alert for 4 suspected cases of measles reported. On active surveillance 10 more cases were found. Out of 14 suspects 5 were found unvaccinated. Blood samples were collected and sent to NIH. Suspects were given single dose of Vitamin A and second dose was ensured after 24 hours. All children <5 years in neighborhood were given single dose of Vitamin A. Community was provided awareness through health education session for highlighting importance of vaccination of their children against all the EPI diseases. General hygiene and isolation measures were demonstrated to the community. Community was also provided awareness about importance of isolation of the cases from healthy children to halt the spread of disease .
6-Jan	Measles	Punjab	Lahore	Shad Bagh uc 23 Shad Bagh Shalimar Town	6	0	2	0	Alert for 4 cases were reported from Mayo hospital. The suspects has been given 1st dose of vitamin A at Mayo hospital while vaccinator and LHS were advised to deliver 2nd dose next day. Active surveillance done and 4 more cases were found. Religious Leaders and community leaders were motivated for EPI coverage up to 100%. 25 children were checked for routine EPI coverage where 6 children were found to have missed second dose of Measles. Vaccinator was requested to ensure 100% EPI vaccination in the area within this week along with Measles. Blood sample of the suspected case was drawn and Throat swabs were taken and dispatched to NIH for Measles. H. E to mothers in community was conducted with the help of LHW. Focal Person EPI and EDO (H) was informed.
7-Jan	Measles	Punjab	Lahore	Ravi Road uc 69 Kareem Park data Ganj Baksh Town	3	0	2	0	Alert for 3 cases of measles were reported from Mayo hospital. The suspects has been given 1st dose of vitamin A at Mayo hospital while vaccinator and LHS were advised to deliver 2nd dose next day. Active surveillance done and 3 more cases were found. 20 children were checked for routine EPI coverage where 5 children were found to have missed second dose of Measles. Blood sample of the suspected case was drawn and Throat swabs were taken and dispatched to NIH for Measles. H. E to mothers in community was conducted with the help of LHW. Focal Person EPI and EDO (H) was informed.
9-Jan	Measles	Punjab	Rahim Yar Khan	Sheikh Zayed Hospital; Ghotki	1	0	2	2	Alert for 5 cases of measles reported from SZ Hospital RY Khan. All cases belonged to different parts of District Ghotki (Sindh) mainly from Tehsil Dharki. Blood samples of all 4 cases were collected and sent to NIH for confirmation. EDOH office Ghotki duly informed about the cases and line list shared for further investigation and control measures. Vitamin A was given to all cases at SZ Hospital.
9-Jan	Measles	Punjab	Rajanpur	Basti Solgi, UC Wah Lashari, Tehsil Jampur	4	0	5	0	Alert for 9 cases of suspected measles with 2 deaths were reported by Save The Children (INGO). The cases were picked up during medical camp in Moza Tibbi Solgi, UC Wah Lashari. Blood samples were drawn from 3 of the cases and sent to NIH. The cases and contacts were given Vitamin. A. Vaccination status of 35 children was checked, only 4 had completed vaccination schedule, rest were not vaccinated. H. E session was conducted in the community about importance of vaccination against all EPI VPDs. EDOH, DSC and DDHO Jampur were requested to carry out Mop-up measles vaccination campaign in the area.
7-Jan	Measles	Sindh	Dadu	Village Sahah San, UC Chinni, taluka Johi	5	1	9	0	Alert for 1 Death due to Measles was reported by Media. Field investigation was carried out along with dispenser of DCD, where 14 more cases were found. Only 3 cases were Measles vaccinated. Vitamin (A) dose was given. Active surveillance was done. Health education imparted. Vaccination status of 31 children were assessed. BCG=17(54%), Penta-1=12(38%), Penta-2=9(29%), Penta-3=7(22%), Measles-1=21(57%), Measles-2=12(38%). Information shared with DSC and 4 blood samples collected and sent to NIH.
11-Jan	Measles	Sindh	Ghotki	Hafiz abad , UC Dharaki , Taulka Dharaki	2	1	1	2	Alert for 2 suspected measles cases reported from THQ Dharaki, upon filed investigation found 14 more suspected cases 5 children having BCG out of 10 and parents were not sure about other antigens. Vitamin A (two doses) were given, health education imparted regarding Importance of routine immunization, DHMT already done routine immunization in area for Prevention of further cases in area .
12-Jan	Measles	Sindh	Shaheed Benazir Abad	Village Gull shah gazi, near Jhalo Magsi, taluka Nawabshah	0	0	1	4	Alert for measles case was reported and investigated. Vitamin A provided, patient was found unvaccinated. Cluster for routine immunization taken from 10 houses and 12 children were checked. 7 have BCG scar +ve, 6 have penta-1, 5 have penta-2, 3 have penta-3, 0 have Measles-I. Information shared with DHMT.
10-Jan	Measles	Sindh	Shikarpur	Village Manik Lashari, UC Taib, Taluka Lakhi	2	0	5	0	Alert for 3 cases measles reported from Civil hospital. Upon field investigation along with vaccinator and UC MO 4 more suspected case found. Two doses of vitamin A given to the cases. One blood sample collected. Health education imparted to cases families and contacts on importance of routine immunization. Cases had BCG scar and were not vaccinated for Measles. Cluster of routine immunization was checked, out of 7 children BCG 100%, Measles-1- 71%-2=0% according to parents history. All Information shared with DHO and DHMT.
10-Jan	Measles	Sindh	Tando Muhammad Khan	Village Jaith, UC Dando, taluka Tando Ghulam Haider	7	1	5	3	Alert for suspected measles case was reported by RHC Dando. During active surveillance 15 cases were found, investigated and line listed. Only 3 cases were found vaccinated. Vitamin (A) dose was given. Health education imparted. vaccination status of 11 children were assessed. Measles-1=6(54%), Measles-2=4(36%). Information shared with EDOH office regarding the cases and 9 blood samples were collected and sent to NIH.

Figure-3: Number of alerts received and responded, week 51, 2012 to week 2, 2013

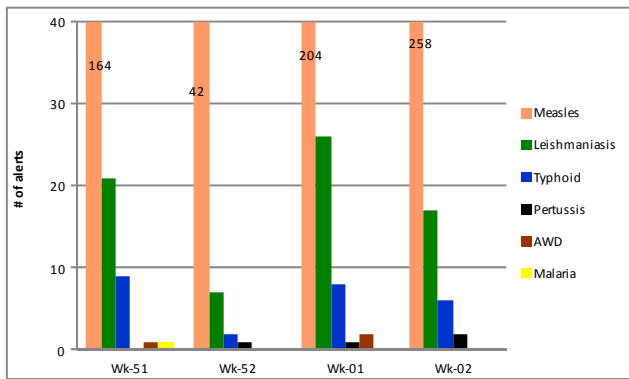
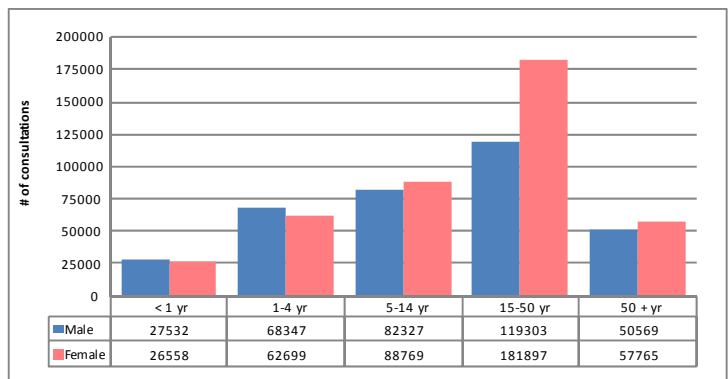


Figure-4: Number of consultations by age and gender, week 2, 2013



Province Khyber Pakhtunkhwa:

422 health facilities from 16 districts of Khyber Pakhtunkhwa sent reports to DEWS with a total of 98,591 patients consultations reported in week 2, 2013. Total 28 alerts were received and appropriate measures were taken. Altogether 22 alerts for Measles; 5 for Leishmaniasis; while 1 for ARI. Acute diarrhoea trend showing stability as compare with last week.

Figure-5: Trend of acute diarrhoea diseases, province Khyber Pakhtunkhwa

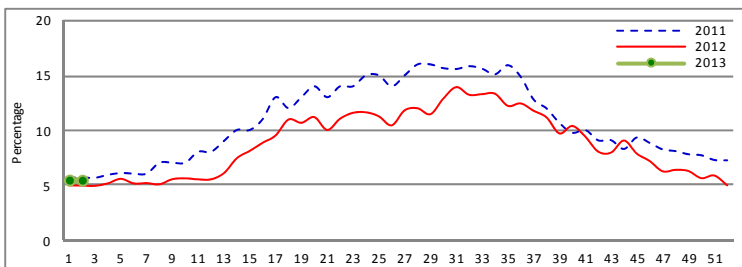
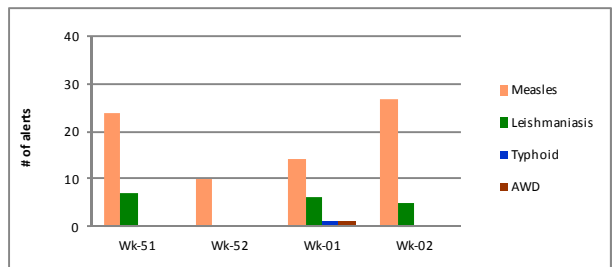


Figure-6: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



Province Sindh:

906 health facilities from 23 districts in Sindh province reported to DEWS with a total of 425,106 patients consultations in week 2, 2013. Total 11 alerts received while 5 outbreaks were identified and appropriate measures were taken. Altogether 8 alerts for Measles; while 1 each for Leishmaniasis, Pertussis and NNT. Acute diarrhoea shows minor decrease as compared with last week.

Figure-7: Trend of acute diarrhoea, province Sindh

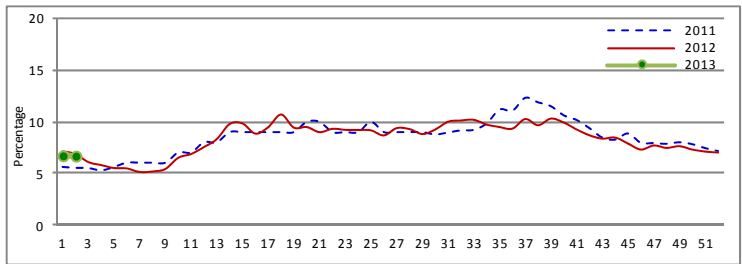
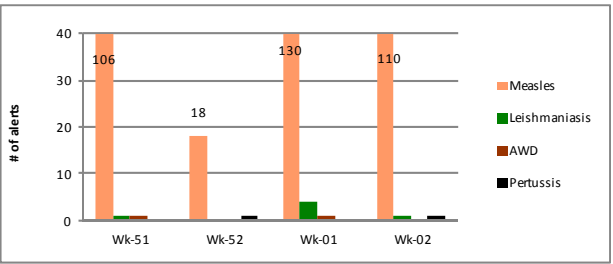


Figure-8: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



Province Punjab:

386 health facilities from 8 districts in province Punjab reported to DEWS with a total of 156,869 patients consultations in week 2, 2013. Total 41 alerts were received and appropriate measures were taken. Altogether 36 for Measles; 4 for Typhoid; and 1 for Leishmaniasis. AD shows a minor decrease as compare with last week.

Figure-9: Trend of acute diarrhoea, province Punjab

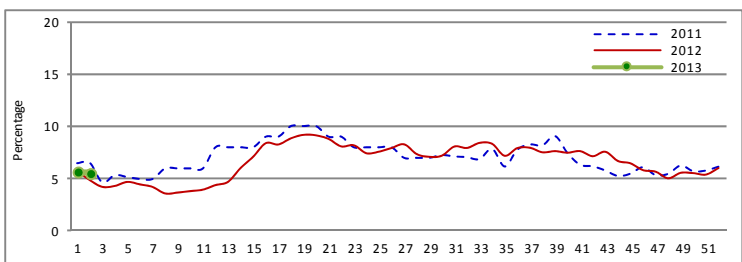
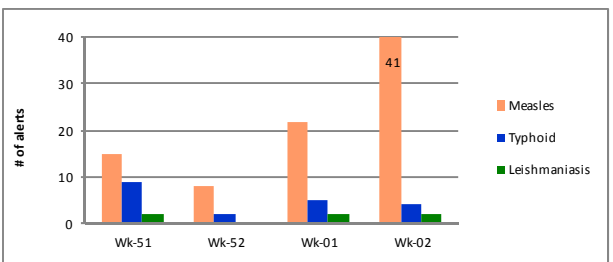


Figure-10: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



Province Balochistan:

325 health facilities from 18 districts in province Balochistan reported to DEWS with a total of 48,470 patients consultations in week 2, 2013. Total 60 alerts reported and appropriate measures were taken in week 2, 2013. Altogether 52 alerts were for Measles; 5 for Leishmaniasis; while 1 each for Pertussis, Typhoid and CCHF. AD showing a minor decrease as compare with last week.

Figure-11: Trend of acute diarrhoea, province Balochistan

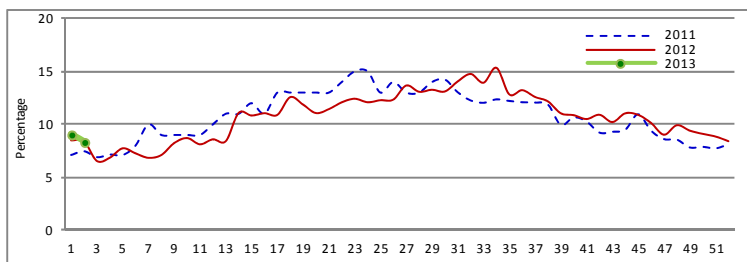
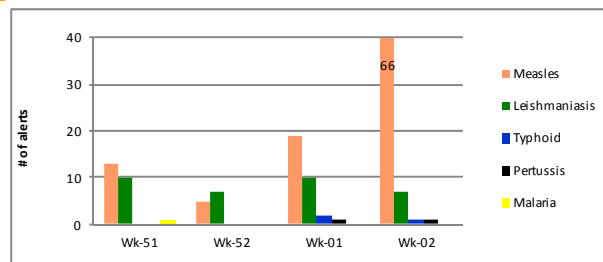


Figure-12: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



Province Gilgit Baltistan:

31 health facilities from 5 districts in Gilgit Baltistan reported to DEWS with a total of 11,294 patients consultations in week 2, 2013. No alert for any disease was reported in week 2, 2012. AD showing a minor increase as compared with last week.

Figure-13: Trend of acute diarrhoea, province Gilgit Baltistan

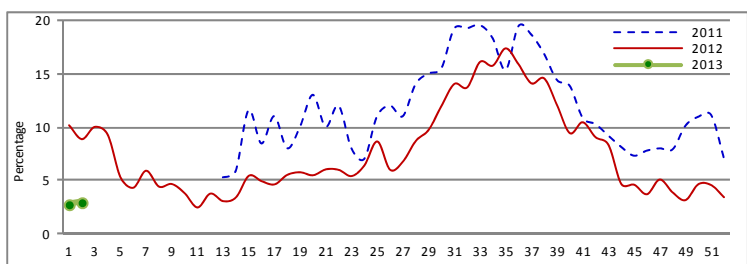
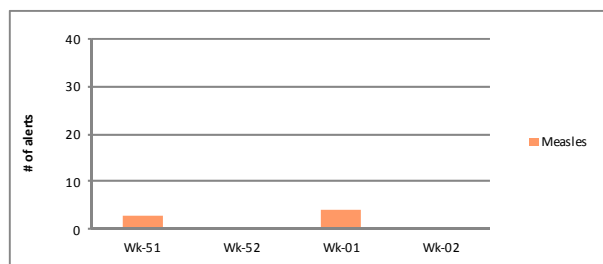


Figure-14: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



FATA:

55 health facilities from 3 agencies in FATA reported to DEWS with a total of 12,647 patients consultations in week 2, 2013. 10 alerts, 6 for Measles; 2 for NNT; while 1 each for Leishmaniasis and Typhoid were reported in week 2, 2012 and appropriate measures were taken. AD showing minor increase as compared with last week.

Figure-15: Trend of acute diarrhoea, FATA

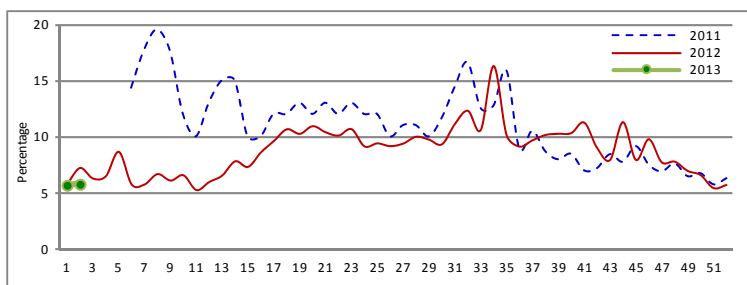
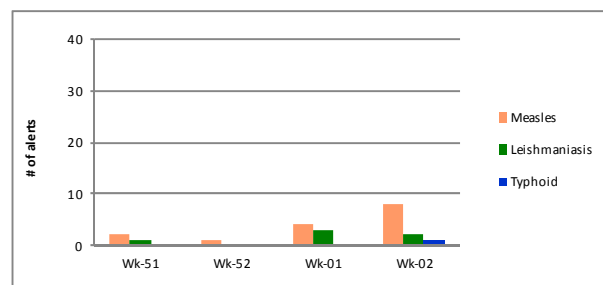


Figure-16: Number of alerts received and responded wk 51, 2012 to wk 2, 2013



State of Azad Jammu and Kashmir:

55 health facilities from 6 districts in AJ&K reported to DEWS with a total of 11,207 patients consultations in week 2, 2013. 4 alerts for Measles were received and appropriate measures were taken. AD showing an increase as compared with last week.

Figure-17: Trend of acute diarrhoea, AJ&K

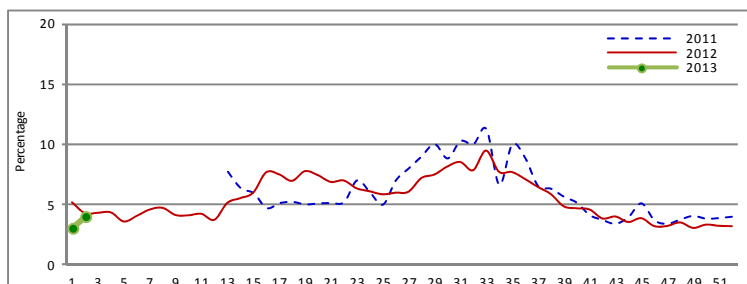


Figure-18: Number of alerts received and responded wk 51, 2012 to wk 2, 2013

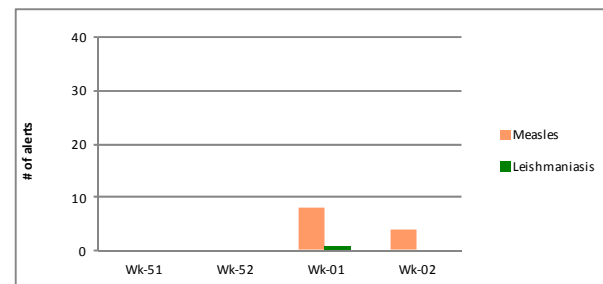


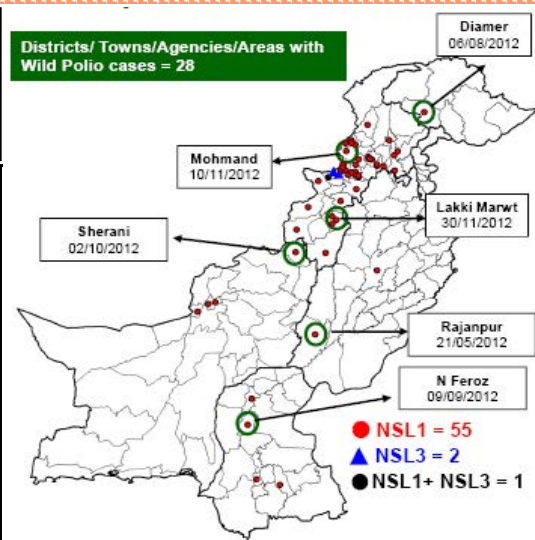
Table-1: Number of alerts and outbreaks reported and investigated with appropriate response

Disease	2012		Current week 2013 (week - 2)		2013 (Total up till week - 2)	
	A	O	A	O	A	O
Acute watery diarrhoea	635	171	0	0	2	0
Acute jaundice syndrome	113	22	0	0	3	0
Bloody diarrhoea	146	11	0	0	0	0
CCHF	68	41	1	0	1	0
Dengue fever	175	29	0	0	0	0
Diphtheria	60	16	0	0	0	0
Measles	5856	788	131	30	269	64
Pertussis	366	147	1	1	2	1
NNT + tetanus	560	0	3	0	7	0
Malaria	136	68	0	0	0	0
Leishmaniasis	898	78	13	4	38	5
Others	1524	58	7	0	23	0
Total	10537	1429	156	35	345	70

Distribution of Wild Polio Virus cases Pakistan 2011 and 2012

As of 11 January 2013, Pakistan has reported no new cases from any district. In year 2012, a total of 58 polio cases including 55 type-1; 2 type-3; and 1 mixture type-1 and 3 cases from 28 districts/tribal agencies .

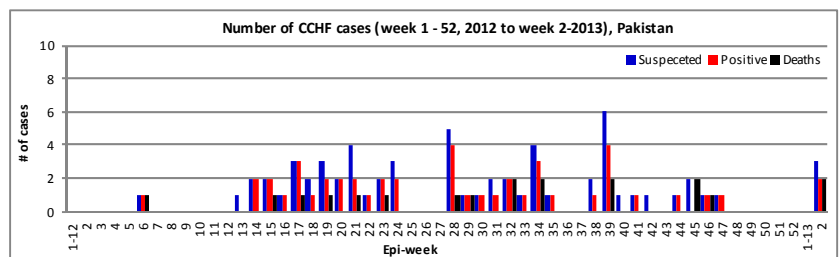
Province	2012			2013		
	P1	P3	P1+P3	P1	P3	P1+P3
Punjab	2	-	-	-	-	-
Sindh	4	-	-	-	-	-
Khyber Pakhtunkhwa	27	-	-	-	-	-
FATA	17	2	1	-	-	-
Balochistan	4	-	-	-	-	-
AJ&K	-	-	-	-	-	-
Gilgit-Baltistan	1	-	-	-	-	-
Islamabad	-	-	-	-	-	-
Total	55	2	1	-	-	-



Follow up of CCHF

CCHF:

CCHF is a serious viral hemorrhagic fever with up to 50% case fatality rate, caused by an RNA virus of family Bunyaviridae, genus Nairovirus, carried by Hyalomma species of ticks. Human beings become infected by tick bites or crushing the ticks, which are usually found on sheep, cattle, goats or camels, and their slaughtered skins. They may also be exposed to the virus in blood or tissues of a viremic animal during its slaughter and butchering; or by contact with infected blood or secretions of acute human cases in home or hospital setting.



In week 2, 2013, 3 new suspected CCHF cases were reported from Balochistan. In 2012, a total of 61 suspected cases have been reported throughout the country with 42 confirmed to date and 17 deaths; (CFR is 40.48%). 24 confirmed cases have been reported from Balochistan; 7 from Sindh; 6 from Khyber Pakhtunkhwa and 5 from Punjab. Chart at right illustrates current situation of CCHF cases in 2012.

Approximately all the cases have contact history with animal trading/handling, tick bite, contact with patient, tannery worker, butcher/animals slaughtering, a traditional practice of wearing fresh animal skin (post) to treatment ailment. These animals and their skins have continuous movement Intra Pakistan and between neighboring countries (Afghanistan and Iran).

Any contact of a CCHF patient should monitor his/her temperature for 14 days and see a doctor if fever develops. The anti viral medicine Ribavirin has been effective in saving lives of patients who report early to the health facility.

Focus on: Measles

Measles is a highly contagious viral disease, which affects mostly children. It is transmitted via droplets from the nose, mouth or throat of infected persons. Initial symptoms, which usually appear 10–12 days after infection, include high fever, runny nose, bloodshot eyes, and tiny white spots on the inside of the mouth. Several days later, a rash develops, starting on the face and upper neck and gradually spreading downwards. There is no specific treatment for measles and most people recover within 2–3 weeks. However, particularly in mal-nourished children and people with reduced immunity, measles can cause serious complications, including blindness, encephalitis, severe diarrhoea, ear infection and pneumonia.

Measles is a killer childhood disease but preventable through immunization. One in 15 people have complications with measles, and one in 1000 will die of it, but two doses of measles vaccine will protect people against the disease. WHO has set the target for measles elimination for 2015 which would require that more than 95% of the world children are covered by two doses of measles vaccine.

Proper case management during outbreaks:

It is imperative that during outbreak situations proper case management is ensured in order to minimize measles related deaths and measles related complications. The treatment of measles patients with Vitamin A will dramatically reduce their risk of deaths. Two doses of Vitamin A will be given to all identified cases (active and old) during house-to-house investigation, unless it was already received as part of the treatment in the health facility. One dose to be given by the health worker on the day of investigation and the 2nd dose provide to the parents advising to give on next day. The therapy will be given regardless of previous vitamin A prophylaxis. If the investigation team observes complications, the patient should be referred to the nearest health facility for specific treatment of these complications.

Measles Prevention:

Routine measles vaccination for children; combined with mass immunization campaigns in countries with high case and death rates, is key public health strategy to reduce global measles mortality rates. The measles vaccine has been in use for over 40 years. It is safe, effective and inexpensive. It costs less than one US dollar to immunize a child against measles. Measles vaccine is provided by the Pakistan EPI programme to children at 9 months and 15 months. Children who are vaccinated against measles before 9 months of age must receive a 2nd measles vaccination at 9 months age ensuring a gap of one month between both vaccinations. Moreover, any child who received measles vaccine should also receive OPV.

Priority should be placed to immunize children 6 months to 5 years old during outbreaks, regardless of vaccination status or history of disease. Auto destructible syringes and safety boxes are recommended and safe disposal of used sharps and safety of injection during immunization should be ensured. Let's remind all our neighbors, friends and colleagues to be sure their children are immunized against measles.

Table at the bottom summarizes the situation of measles in year 2012; and illustrates the alerts and outbreaks in 2013 up till week 2 (29 Dec 2012 to 11 Jan 2013).

Province	2012 (Week 1 - 52)				2013 (Up till week 2)			
	# of Alerts	# of Outbreaks	# of Cases	# of Deaths	# of Alerts	# of Outbreaks	# of Cases	# of Deaths
AJ&K	163	6	265	0	12	3	46	0
Balochistan	446	118	1810	30	85	18	278	24
FATA	211	31	559	13	12	3	53	0
Gilgit Baltistan	37	1	50	0	4		13	0
ICT	27	2	63	0	5	2	21	1
Khyber Pakhtunkhwa	1988	108	3539	38	41	6	120	0
Punjab	807	38	1318	16	63	12	147	4
Sindh	2177	484	7219	213	240	20	939	44
Total	5856	788	14823	310	462	64	1617	73

Alerts and outbreaks, week 2, 2013

