



Disease Surveillance Express

Weekly Data of Notifiable Infectious Diseases (by week of diagnosis)

Case diagnosis week		Week 32		As of Week 32 (Cumulative Total)	
Classification	Disease Diagnosed ¹	2011	2010	2011	2010
Category I	Anthrax	0	0	0	0
	H5N1 Influenza	0	0	0	0
	Plague	0	0	0	0
	Rabies	0	0	0	0
	SARS	0	0	0	0
	Smallpox	0	0	0	0
Category II	Acute Flaccid Paralysis	2	0	26	33
	Acute Viral Hepatitis type A	2	4	83	86
	Amoebiasis	4	3	154	159
	Chikungunya Fever	0	0	0	10
	Cholera	0	0	1	1
	Dengue Fever	14	12	100	188
	Dengue Hemorrhagic Fever/Dengue Shock Syndrome	1	0	1	2
	Diphtheria	0	0	0	0
	Enterohemorrhagic E. coli Infection	0	0	0	0
	Epidemic Typhus Fever	0	0	0	0
	Hantavirus Pulmonary Syndrome	0	0	0	0
	Hemorrhagic Fever with Renal Syndrome	0	0	0	1
	Malaria	0	0	8	11
	Measles	0	0	33	12
	Meningococcal Meningitis	0	0	4	5
	Paratyphoid Fever	0	0	5	12
	Poliomyelitis	0	0	0	0
	Rubella	0	0	58	15
	Shigellosis	5	2	138	75
	Typhoid fever	0	0	17	25
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	5	5	88	110
	Acute Viral Hepatitis type C	0	0	12	10
	Acute Viral Hepatitis type D	0	0	0	1
	Acute Viral Hepatitis type E	0	1	6	5
	Acute Viral Hepatitis untype	1	0	8	7
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	0	0	3	15
	Haemophilus Influenza type b Infection	0	0	7	7
	Japanese Encephalitis	4	0	16	26
	Legionellosis	2	3	61	47
	Mumps ²	17	34	746	729
	Neonatal Tetanus	0	0	0	0
	Pertussis	0	2	40	44
	Tetanus	0	0	0	0
Category IV	Botulism	0	0	3	11
	Cat-scratch Fever	2	3	12	28
	Endemic Typhus Fever	0	1	20	28
	Herpesvirus B Infection	0	0	0	0
	Invasive Pneumococcal Disease	6	2	570	467
	Leptospirosis	3	4	18	35
	Lyme Disease	0	0	0	0
	Melioidosis	0	1	14	14
	New Delhi metallo-β-lactamase -1 Enterobacteriaceae	0	0	1	0
	Q Fever	0	0	24	71
	Scrub Typhus	16	15	203	202
	Severe Complicated Influenza Case	1	49	1136	394
	Toxoplasmosis	0	0	4	3
	Tularremia	0	0	1	0
Varicella ²	141	147	6659	5857	
Category V	Ebola Hemorrhagic Fever	0	0	0	0
	Ebola-Marburg Hemorrhagic Fever	0	0	0	0
	Lassa Fever	0	0	0	0
	Rift Valley Fever	0	0	0	0
	Yellow Fever	0	0	0	0

Note: 1. The following 8 chronic diseases are excluded from the table: MDR-TB, Tuberculosis, Syphilis, Gonorrhea, HIV Infection, AIDS, Hansen Disease and Creutzfeldt-Jakob Disease.

2. Reported cases.



Suspected Clusters

- In regard to disease clusters, 3 outbreak events were reported, including 1 diarrhea cluster in the North Area, and 2 dengue fever clusters in the Taipei Area.

Imported Infectious Diseases

- 24 new infectious cases were imported from 7 countries during week 32 of 2011.

Disease/Country	Philippines	Indonesia	Vietnam	China	Cambodia	Malaysia	Thailand	Unknown	Total
Dengue Fever	5	2	2		1	1	1		12
DHF/DSS	1								1
Amoebiasis	2*	3*							5
Shigellosis		3		1					4
Hepatitis type B				1				1	2
Total	8	8	2	2	1	1	1	1	24

Note: *Three amoebiasis cases were confirmed on July 22 and August 1, but they are excluded from the statistics for week 32 (August 7-August 13).

- A total of 324 infectious cases were imported from 28 countries in 2011.
- Top 3 imported diseases : Shigellosis (81), DF (72), Amoebiasis (70)
- Top 3 countries responsible for most imported cases : Indonesia (119), Vietnam (45), China (37)

Summary of This Week

- **Enterovirus** : The overall ER consultation rate for enterovirus infection decreased slightly. However, in the East Area, the Kao-Ping Area and the South Area of Taiwan, the rate continued to rise, and a total four cases of enterovirus infection with severe complications have been confirmed so far this year. Although coxsackie A is still the dominant enterovirus strain currently circulating in the community according to the respiratory virus surveillance data, detections of mild cases of enterovirus 71 gradually increased. Taiwan CDC advises the public to stay vigilant against enterovirus and the agency will continue to closely monitor the epidemic situation. All levels of schools will resume after two weeks, which presents an opportunity to increase interaction among students and the risk of enterovirus transmission among infants and young children. Hence, parents are reminded to pay attention to personal, child and infant hygiene and maintain good hand-washing habits in order to reduce the risk of enterovirus infection. For more detailed reports, please visit Enterovirus Weekly



Reports:

http://www.cdc.gov.tw/sp.asp?xdurl=disease/disease_content.asp&id=1662&mp=1&ctNode=1498#01.

- **Dengue Fever** : A total of five indigenous cases of dengue fever have been confirmed this summer. According to the past surveillance data, the epidemic season begins in August. Taiwan CDC advises the people to strengthen the removal of vector breeding sources in order to prevent transmission of the disease. On the other hand, the incidence of dengue fever in Southeast Asian countries continued to increase, and imported dengue fever cases gradually increased. Hence, Taiwan CDC advises all travelers visiting areas affected by dengue fever to take precautions against mosquito bites to prevent dengue fever and seek medical assistance as soon as possible when discomforts occur after returning to Taiwan to avoid further transmission of the disease.
- **Cholera** : Cholera is a kind of acute bacterial enteritis. It is primarily transmitted through consumption of food or drinking water contaminated with *Vibrio cholerae*. Over the recent years, only sporadic cases occurred in Taiwan as a result of good hygiene practices and proper environmental hygiene. Taiwan CDC advises all people to consume only fully cooked food, ensure right storage of food, avoid cross-contamination between raw and cooked foods during cooking and preparation process, and drink only properly boiled or bottled water to prevent cholera infection. In addition, elderly or high-risk groups should avoid eating raw fish or lettuce in order to reduce the risk of morbidity.
- **Travel Notification** : Taiwan CDC advises all people traveling abroad to pay attention to the public health status of their chosen destination, especially during this summer vacation. Taiwan CDC urges travelers experiencing discomfort during the trip or upon arrival to contact quarantine services at the airport and seek immediate medical attention. Informing doctors of the personal travel history does not only facilitate diagnosis, but also implementation of subsequent measures by the health authority to prevent further spread of diseases. For more information, please visit the health information for international travel website:
<http://www.cdc.gov.tw/sp.asp?xdurl=travel/travel00.asp&mp=1&ctNode=1448>

