



Disease Surveillance Express

Weekly Data of Notifiable Infectious Diseases

Classification	Case diagnosis week Disease Diagnosed ¹	Week 11		Week 1–11	
		2012	2011	2012	2011
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	1	2	8	11
	Acute Viral Hepatitis type A	3	4	28	26
	Amoebiasis	5	6	65	53
	Chikungunya Fever	0	0	0	0
	Cholera	0	0	0	0
	Dengue Fever	1	1	69	45
	Dengue Hemorrhagic Fever/Dengue Shock Syndrome	0	0	0	0
	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	0
	Malaria	0	0	0	4
	Measles	1	1	2	4
	Meningococcal Meningitis	0	0	1	1
	Paratyphoid Fever	0	0	1	0
	Poliomyelitis	0	0	0	0
	Rubella	0	3	2	14
Shigellosis	2	6	31	32	
Typhoid fever	1	0	5	4	
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	0	3	25	21
	Acute Viral Hepatitis type C	2	0	17	5
	Acute Viral Hepatitis type D	0	0	0	0
	Acute Viral Hepatitis type E	0	0	3	1
	Acute Viral Hepatitis untype	0	0	3	3
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	0	0	19	0
	Haemophilus Influenza type b Infection	0	0	3	5
	Japanese Encephalitis	0	0	0	0
	Legionellosis	2	3	16	17
	Mumps ²	17	21	155	193
	Neonatal Tetanus	0	0	0	0
	Pertussis	2	1	10	14
	Tetanus ²	0	0	2	0
Category IV	Botulism	0	0	0	2
	Cat-scratch Fever	0	1	7	3
	Complicated Influenza	36	7	1019	1070
	Endemic Typhus Fever	0	1	3	5
	Herpesvirus B Infection	0	0	0	0
	Invasive Pneumococcal Disease	24	23	232	271
	Leptospirosis	0	0	7	6
	Lyme Disease	0	0	0	0
	Melioidosis	0	0	3	4
	New Delhi metallo-β-lactamase -1 Enterobacteriaceae	0	0	0	1
	Q Fever	1	0	4	4
	Scrub Typhus	0	1	56	56
	Toxoplasmosis	0	0	2	2
	Tularremia	0	0	0	0
Varicella ²	152	202	1893	2519	
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

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.

3. The epidemiological week calendar established by the World Health Organization is adopted for calculating each week's cumulative total.



Suspected Clusters

- In regard to disease clusters, 6 outbreak events were reported, including 4 diarrhea clusters in the Taipei Area, the Central Area and the Kao-Ping Area, 1 influenza-like illness cluster in the Taipei Area and 1 upper respiratory infection cluster in the Kao-Ping Area.

Imported Infectious Diseases

- 9 confirmed infectious cases^{**} were imported from 6 countries during week 11 of 2012.

Country Disease	China	Unknown	Indonesia	Philippine	Vietnam	Myanmar	Cambodia	Total
Amoebiasis	1	1 [*]	1					3
Hepatitis				1			1	2
FluSC		1						1
Dengue fever					1			1
Typhoid fever						1 [*]		1
Measles	1							1
Total	2	2	1	1	1	1	1	9

Note: ^{*}One amoebiasis and one typhoid fever cases were confirmed on Mar. 2 and Mar. 9, but excluded from the statistics for week 11 (Mar. 11 – Mar. 17). ^{**}Cases were diagnosed or based on imported case data in the last week. The following cumulative number was statistical by the week of onset.

- A total of 92 infectious cases were imported from 12 countries in 2012.
- Top 3 imported diseases : Dengue fever (30), Amoebiasis (25), Shigellosis (19).
- Top 3 countries responsible for most imported cases : Indonesia (53), the Philippines (13), Vietnam (8).

Summary of This Week

- **Influenza** : The influenza type B virus is currently the dominant influenza virus strain circulating in the community. The proportion of type AH3 infections has been increasing gradually. The influenza epidemic reached the peak in week 2 (January 8 to January 14), and has been decreasing steadily.



- **Enterovirus** : The enterovirus 71 virus is currently the dominant virus strain circulating in the community. The ER consultation rate for hand-foot-and-mouth disease has increased and it is higher than that during the same period in the past five years. The threat of enterovirus 71 still persists as mild cases of enterovirus 71 and cases of enterovirus infection with severe complications have still been detected. Therefore, parents are reminded to pay attention to personal, child and infant hygiene in order to reduce the risk of enterovirus infection. If children develop precursor symptoms of enterovirus infection with severe complications, they should be immediately sent to a large hospital for medical attention in order to grasp the best treatment timing. 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

- **Travel Notification** : Taiwan CDC advises all people traveling abroad to pay attention to the public health status of their chosen destination. 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>

