



Disease Surveillance Express

Weekly Data of Notifiable Infectious Diseases

Classification	Case diagnosis week Disease Diagnosed ¹	Week 5		Week 1-5	
		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	0	6	2
	Acute Viral Hepatitis type A	0	2	6	9
	Amoebiasis	2	3	26	27
	Chikungunya Fever	0	0	0	0
	Cholera	0	0	0	0
	Dengue Fever	7	2	54	26
	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	3
	Measles	0	0	0	0
	Meningococcal Meningitis	0	0	0	1
	Paratyphoid Fever	0	0	0	0
	Poliomyelitis	0	0	0	0
	Rubella	0	1	1	3
Shigellosis	1	5	15	14	
Typhoid fever	0	0	2	0	
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	5	3	11	5
	Acute Viral Hepatitis type C	3	1	7	4
	Acute Viral Hepatitis type D	0	0	0	0
	Acute Viral Hepatitis type E	0	1	1	1
	Acute Viral Hepatitis untype	0	1	1	1
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	4	0	13	0
	Haemophilus Influenza type b Infection	0	0	3	2
	Japanese Encephalitis	0	0	0	0
	Legionellosis	1	6	11	9
	Mumps ²	14	12	62	70
	Neonatal Tetanus	0	0	0	0
	Pertussis	1	2	2	7
	Tetanus ²	0	0	2	0
Category IV	Botulism	0	0	0	1
	Cat-scratch Fever	1	0	4	2
	Complicated Influenza	129	227	672	610
	Endemic Typhus Fever	1	0	1	2
	Herpesvirus B Infection	0	0	0	0
	Invasive Pneumococcal Disease	41	17	128	109
	Leptospirosis	1	1	5	4
	Lyme Disease	0	0	0	0
	Melioidosis	1	0	3	2
	New Delhi metallo-β-lactamase -1 Enterobacteriaceae	0	0	0	1
	Q Fever	0	0	0	3
	Scrub Typhus	14	3	31	41
	Toxoplasmosis	1	0	2	0
	Tularremia	0	0	0	0
Varicella ²	214	144	912	1113	
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, 5 outbreak events were reported, including 3 diarrhea clusters in the Taipei Area and the Central Area, 1 dengue fever cluster in the Central Area, and 1 pertussis cluster in the South Area.

Imported Infectious Diseases

- 9 confirmed infectious cases^{*} were imported from 4 countries during week 5 of 2012.

Disease \ Country	Country				Total
	Indonesia	Philippines	Thailand	Bhutan	
Dengue Fever	5		1		6
Shigellosis		1			1
Hepatitis A		1 [*]			1
Syphilis				1 [*]	1
Total	5	2	1	1	9

Note: ^{*}One syphilis and one hepatitis A cases were confirmed on Dec. 6, 2011 and Jan. 26, 2012, but excluded from the statistics for week 5 (Jan. 29 – Feb. 4). ^{*}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 30 infectious cases were imported from 5 countries in 2012.
- Top 3 imported diseases : Dengue fever (17), Shigellosis (7), Amoebiasis (5).
- Top 3 countries responsible for most imported cases : Indonesia (20), Vietnam (5), the Philippines (3).

Summary of This Week

- **Influenza** : The influenza type B virus is currently the dominant influenza virus strain circulating in the community. The influenza epidemic reached the peak in week 2 (January 8 to January 14), and has been gradually decreasing.
- **Enterovirus** : The enterovirus 71 infection epidemic has been on the rise. The ER consultation rate for hand-foot-and-mouth disease in week 5 is lower than that in week 3. 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

- **Diarrhea** : As the viral gastroenteritis season has approached, the out-patient visit rate and the ER consultation rate for diarrhea have been on the rise. Since week 40 of 2011, 12 diarrhea clusters caused by norovirus or rotavirus have been reported and they primarily occurred in schools. As all schools will reopen soon, the public is urged to pay attention to dietary and personal hygiene.
- **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>

