

### Main Caregivers' Knowledge and Behavior of Influenza Prevention for Preschoolers in Central Taiwan

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#### Abstract

Recently influenza causes various scales of epidemic situation in Taiwan every year. Data from Taiwan Centers for Disease Control indicated that 0-6 year-old children had the highest emergency department visits for influenza-like illness. The objective of this research is to confer the situation of influenza vaccination for preschoolers and the state of the main caregivers' knowledge and behavior of prevention of influenza for preschoolers.

A questionnaire was delivered to and collected from 944 main caregivers for children ages 3-6 year-old in public and private preschools. The rate of influenza vaccination for preschoolers is 62.0%. The three major reasons for children receiving the influenza vaccine are: (1) their immunity is too weak and might be infected (36.0%); (2) there are widespread influenza activities (24.0%); and (3) the vaccine is effective (11.4%). Major reasons for not vaccinating children are: (1) Being concerned about the side effects (48.4%); and (2) being concerned about the safety of vaccine ingredients (29.2%). Most caregivers (39.9%) received information of influenza vaccination from television. The main caregivers' knowledge of influenza illness was above the intermediate level (68.1%), and their knowledge of prevention of influenza was at upper-intermediate level (83.0%).

In conclusion, to assist the prevention and control of influenza, we recommend the main caregivers for children should improve their knowledge of influenza. Preschool and the government agencies should promote it through various channels.

**Keywords** : Main caregiver ; Situation of the vaccination against influenza for preschoolers ; Cognition of influenza ; Prevention of influenza

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# The Impact of the Newly Revised Habeas Corpus Act on Isolation of Patients with Communicable Diseases

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## Abstract

The newly revised Habeas Corpus Act permits any person who is arrested or detained by any administration by any cause to challenge the legality of his or her detention before a court. Public health officials who use measures involving arrest and detention, particularly the routinely implemented tuberculosis isolation, would have to comply with specific due process protections required by the new law. To assist public health practitioners to fulfill the requirements of the new Habeas Corpus Act, this article analyzes the content of the new law, what control measures constitute arrest and detention, and how public health officials should comply with the legal requirements when using isolation measure on patients with communicable diseases.

**Keywords** : Isolation ; Personal Liberty ; Habeas Corpus Act

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## A Cluster of Indigenous Acute Hepatitis A in HIV Patients, Taipei, Taiwan, 2015

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### Abstract

From mid-June to July 26, 2015, six cases of acute hepatitis A infection were reported to the Taipei Regional Center, Taiwan Centers for Disease Control (TCDC). The hepatitis A viruses from cases were with 94.5%–99.5% similarity in genotyping. Epidemiologic investigation revealed that all six cases were human immunodeficiency virus (HIV) infected males of active sexual-behavior age, and suggested that the route of transmission of this cluster of acute Hepatitis A was likely to be person-to-person transmission, or possibly unprotected sex including oral and anal sex. We suggest cross-departmental cooperation within health authorities are critical to timely mobilize both case management experts and infectious disease control personnel to jointly implement preventive measures. Health education, personal hygiene and hepatitis A vaccination are the most effective ways to reduce the acute hepatitis A infection risk among high-risk and general population.

**Keywords :** Acute hepatitis A ; HIV infection ; Sexual transmission

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

Classification	Disease Diagnosed <sup>1</sup>	Case diagnosis week		Week 1–37	
		2015	2014	2015	2014
Category I	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	0	0	11	28
	Acute Viral Hepatitis type A	7	0	87	80
	Amoebiasis	8	4	255	188
	Anthrax	0	0	0	0
	Chikungunya Fever	0	0	4	7
	Cholera	1	0	7	4
	Dengue Fever	3689	344	13078	1998
	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	1	1
	Malaria	0	2	7	13
	Measles	1	1	28	20
	Meningococcal Meningitis	0	0	2	3
	Paratyphoid Fever	0	0	2	6
	Poliomyelitis	0	0	0	0
	Rubella	0	0	6	5
	Shigellosis	3	0	127	101
Typhoid fever	0	0	22	16	
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	3	2	89	82
	Acute Viral Hepatitis type C <sup>5</sup>	6	5	150	124
	Acute Viral Hepatitis type D	0	0	1	1
	Acute Viral Hepatitis type E	0	0	2	8
	Acute Viral Hepatitis untype	0	1	2	4
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	0	0	4	6
	Haemophilus Influenza type b Infection	0	0	1	2
	Japanese Encephalitis	0	0	28	15
	Legionellosis	3	2	121	94
	Mumps <sup>2</sup>	6	28	575	622
	Neonatal Tetanus	0	0	0	0
	Pertussis	3	3	65	43
	Tetanus <sup>2</sup>	0	0	7	3
	Category IV	Botulism	0	0	2
Brucellosis		0	0	2	0
Complicated Influenza		7	4	793	1732
Complicated Varicella <sup>4</sup>		0	0	38	39
Endemic Typhus Fever		0	1	24	19
Herpesvirus B Infection		0	0	0	0
Invasive Pneumococcal Disease		10	4	384	434
Leptospirosis		3	7	52	56
Lyme Disease		0	1	2	2
Melioidosis		1	3	23	23
Q Fever		1	0	30	41
Scrub Typhus		0	7	255	310
Toxoplasmosis		1	0	9	8
Tularremia	0	0	0	0	
Category V	Ebola Virus Disease	0	0	0	0
	Ebola-Marburg Hemorrhagic Fever	0	0	0	0
	Novel Influenza A Virus Infections <sup>6</sup>	0	0	0	0
	Lassa Fever	0	0	0	0
	Rift Valley Fever	0	0	0	0
	Middle East Respiratory Syndrome Coronavirus	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. Since 2014/1/1, "Varicella" was modified to "Complicated Varicella".

4. Since 2014/3/6, the case definition for confirmed Acute hepatitis C was changed from "meet the clinical **and** laboratory conditions" to "meet the clinical **or** laboratory conditions".

5. Since 2014/7/1, various subtypes of human cases of avian influenza are reported as "novel influenza A virus infections", a Category V Notifiable Infectious Disease. The original "H5N1 flu" and "H7N9 flu", which were respectively listed as a Category I Notifiable Infectious Disease and a Category V Notifiable Infectious Disease were removed from the list on the same day.

### Suspected Clusters

- Thirteen clusters were reported, including 6 diarrhea clusters, 4 tuberculosis clusters, 2 varicella clusters, and 1 influenza-like illness cluster.

### Imported Infectious Diseases

- 24 confirmed cases were imported from 9 countries during Week 37 of 2015.

Country Disease	Philippines	Thailand	Indonesia	Malaysia	Australia	Myanmar	Cambodia	Vietnam	China	Total
Dengue Fever	7	4	4	2	1	1	1	1		21
Amoebiasis				2						2
Measles									1	1
Total	7	4	4	4	1	1	1		1	24

Note: The statistics listed in this table include imported cases that were either confirmed or updated\* in the previous week.

- A total of 515 confirmed cases were imported from 30 countries in 2015.
- Top 3 imported diseases : Dengue fever (219), Amoebiasis (147), Shigellosis (63)..
- Top 3 countries responsible for most imported cases : Indonesia (262), Philippines (48), Vietnam (36).

### Summary of Epidemic

- **Dengue Fever** : Dengue activity has not fluctuated, and has entered the peak of the epidemic season. 87% of the indigenous dengue cases reported thus far this summer were confirmed in Tainan City. 95% of the districts in Tainan City have reported dengue cases. On the other hand, the epidemic has continued to increase in Kaohsiung City, the number of new cases reported during Week 37 is 1.4 times higher than that reported during Week 36. Although the number of cases reported this year is lower than that during the same period last year, it is the second highest since 2003. Sporadic indigenous cases and clusters have continued to be reported in Pingtung County. Since May 1, 2015, a total number of 13,871 cases of indigenous dengue cases have been confirmed in 21 cities and counties in the nation. 98.7% of the cases were reported in southern Taiwan.
- **Enterovirus** : Enterovirus activity has peaked. During Week 37, the ER consultation rate for enterovirus infection was higher than the epidemic threshold, and the numbers of visits to outpatient services was slightly lower than that during Week 36. Coxsackie A6 virus and Coxsackie B5 virus are currently the dominant strains circulating in the community, and one case of Enterovirus 71 infection was been detected. Taiwan CDC will continue to closely monitor the outbreak.

● **Diarrhea** : Diarrhea activity has increased slightly. The number of cases reported is higher than that during the same period last year. According to the RODS surveillance system, the incidence rate has increased in the population aged under 18. The increase is especially significant among children aged between 0-6. Norovirus is currently the dominant strain in the recently confirmed clusters that occurred mainly in schools.

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

Classification	Case diagnosis week Disease Diagnosed <sup>1</sup>	Week 38		Week 1—38	
		2015	2014	2015	2014
Category I	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	12	28
	Acute Viral Hepatitis type A	3	1	90	81
	Amoebiasis	6	4	261	192
	Anthrax	0	0	0	0
	Chikungunya Fever	0	0	4	7
	Cholera	0	0	7	4
	Dengue Fever	4389	543	17460	2541
	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	1	0	2	1
	Malaria	0	0	7	13
	Measles	0	0	28	20
	Meningococcal Meningitis	0	0	2	3
	Paratyphoid Fever	0	0	2	6
	Poliomyelitis	0	0	0	0
	Rubella	0	0	6	5
	Shigellosis	5	1	132	102
Typhoid fever	0	3	22	19	
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	2	2	91	84
	Acute Viral Hepatitis type C <sup>5</sup>	4	6	154	130
	Acute Viral Hepatitis type D	0	0	1	1
	Acute Viral Hepatitis type E	0	0	2	8
	Acute Viral Hepatitis untype	0	0	2	4
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	0	0	4	6
	Haemophilus Influenza type b Infection	0	0	1	2
	Japanese Encephalitis	0	0	28	15
	Legionellosis	4	4	125	98
	Mumps <sup>2</sup>	11	34	586	656
	Neonatal Tetanus	0	0	0	0
	Pertussis	1	4	66	47
	Tetanus <sup>2</sup>	0	1	7	4
Category IV	Botulism	0	0	2	0
	Brucellosis	0	0	2	0
	Complicated Influenza	5	8	798	1740
	Complicated Varicella <sup>4</sup>	0	1	38	40
	Endemic Typhus Fever	1	1	25	20
	Herpesvirus B Infection	0	0	0	0
	Invasive Pneumococcal Disease	9	9	393	443
	Leptospirosis	3	3	55	59
	Lyme Disease	0	0	2	2
	Melioidosis	1	1	24	24
	Q Fever	2	1	32	42
	Scrub Typhus	14	6	269	316
	Toxoplasmosis	0	0	9	8
Tularemia	0	0	0	0	
Category V	Ebola Virus Disease	0	0	0	0
	Ebola-Marburg Hemorrhagic Fever	0	0	0	0
	Novel Influenza A Virus Infections <sup>6</sup>	0	0	0	0
	Lassa Fever	0	0	0	0
	Rift Valley Fever	0	0	0	0
	Middle East Respiratory Syndrome Coronavirus	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. Since 2014/1/1, "Varicella" was modified to "Complicated Varicella".

4. Since 2014/3/6, the case definition for confirmed Acute hepatitis C was changed from "meet the clinical **and** laboratory conditions" to "meet the clinical **or** laboratory conditions".

5. Since 2014/7/1, various subtypes of human cases of avian influenza are reported as "novel influenza A virus infections", a Category V Notifiable Infectious Disease. The original "H5N1 flu" and "H7N9 flu", which were respectively listed as a Category I Notifiable Infectious Disease and a Category V Notifiable Infectious Disease were removed from the list on the same day.

## Suspected Clusters

- Twelve clusters were reported, including 9 diarrhea clusters, 2 varicella clusters, and 1 pertussis cluster.

## Imported Infectious Diseases

- 27 confirmed cases were imported from 10 countries during Week 38 of 2015.

Country Disease	Indonesia	Malaysia	Vietnam	Thailand	Myanmar	Philippines	Australia	India	China	Cambodia	Total
Dengue Fever	2	5	4	3	2	3		1	1	1	22
Amoebiasis	3										3
Hepatitis C							1				1
Shigellosis	1										1
<b>Total</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>27</b>

Note: The statistics listed in this table include imported cases that were either confirmed or updated\* in the previous week.

- A total of 545 confirmed cases were imported from 30 countries in 2015.
- Top 3 imported diseases : Dengue fever (241), Amoebiasis (150), Shigellosis (64).
- Top 3 countries responsible for most imported cases : Indonesia (270), Philippines (50), Vietnam (41).

## Summary of Epidemic

- **Dengue Fever** : Dengue activity has not fluctuated, and has entered the peak of the epidemic season. The epidemic has slowed down and 86% of the indigenous dengue cases reported thus far this summer were confirmed in Tainan City. 97.3% of the districts in Tainan City have reported dengue cases. On the other hand, the epidemic has not fluctuated in Kaohsiung City and the number of new cases reported during Week 38 is close to that reported during Week 37. Although the number of cases reported this year is lower than that during the same period last year, it is the second highest since 2003. Sporadic indigenous cases have continued to be reported in Pingtung County. Since May 1, 2015, a total number of 18,635 cases of indigenous dengue cases have been confirmed in 21 cities and counties in the nation. Among them, 14,439 cases have recovered. 98.7% of the cases were reported in southern Taiwan. The number of imported cases reported is the highest than that during the same period in the last five years.



- **Enterovirus** : Enterovirus activity has peaked. During Week 38, although the ER consultation rate for enterovirus infection remained the same as that during Week 37, it was still higher than the epidemic threshold. The numbers of visits to outpatient services was slightly lower than that during Week 37, but it was the highest during the same period in the last four years. Coxsackie A6 virus is currently the dominant strain circulating in the community, and three cases of Enterovirus 71 infection have been detected. Taiwan CDC will continue to closely monitor the outbreak.
- **Diarrhea** : Diarrhea activity has increased slightly. The number of cases reported is higher than that during the same period last year. According to the RODS surveillance system, the incidence rate has increased in the population aged under 18. The increase is especially significant among children aged between 0-6. Norovirus is currently the dominant strain in the recently confirmed clusters that occurred mainly in schools.

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

Case diagnosis week		Week 39		Week 1—39	
Classification	Disease Diagnosed <sup>1</sup>	2015	2014	2015	2014
Category I	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	1	13	29
	Acute Viral Hepatitis type A	5	0	95	81
	Amoebiasis	13	8	274	200
	Anthrax	0	0	0	0
	Chikungunya Fever	0	0	4	7
	Cholera	1	0	8	4
	Dengue Fever	3174	592	20625	3133
	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	2	1
	Malaria	1	0	8	13
	Measles	0	0	28	20
	Meningococcal Meningitis	0	0	2	3
	Paratyphoid Fever	0	0	2	6
	Poliomyelitis	0	0	0	0
	Rubella	0	0	6	5
	Shigellosis	4	2	136	104
Typhoid fever	1	0	23	19	
West Nile Fever	0	0	0	0	
Category III	Acute Viral Hepatitis type B	3	5	94	89
	Acute Viral Hepatitis type C <sup>5</sup>	5	4	159	134
	Acute Viral Hepatitis type D	0	0	1	1
	Acute Viral Hepatitis type E	0	2	2	10
	Acute Viral Hepatitis untype	0	0	2	4
	Congenital Rubella Syndrome	0	0	0	0
	Enteroviruses Infection with Severe Complications	0	0	4	6
	Haemophilus Influenza type b Infection	1	0	2	2
	Japanese Encephalitis	0	0	28	15
	Legionellosis	2	1	127	99
	Mumps <sup>2</sup>	11	26	597	682
	Neonatal Tetanus	0	0	0	0
	Pertussis	4	4	70	51
	Tetanus <sup>2</sup>	0	0	7	4
Category IV	Botulism	0	0	2	0
	Brucellosis	0	0	2	0
	Complicated Influenza	1	6	799	1746
	Complicated Varicella <sup>4</sup>	2	1	40	41
	Endemic Typhus Fever	1	1	26	21
	Herpesvirus B Infection	0	0	0	0
	Invasive Pneumococcal Disease	10	4	403	447
	Leptospirosis	3	5	58	64
	Lyme Disease	0	0	2	2
	Melioidosis	1	0	25	24
	Q Fever	3	1	35	43
	Scrub Typhus	8	7	277	323
	Toxoplasmosis	0	0	9	8
Tularremia	0	0	0	0	
Category V	Ebola Virus Disease	0	0	0	0
	Ebola-Marburg Hemorrhagic Fever	0	0	0	0
	Novel Influenza A Virus Infections <sup>6</sup>	0	0	0	0
	Lassa Fever	0	0	0	0
	Rift Valley Fever	0	0	0	0
	Middle East Respiratory Syndrome Coronavirus	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, Gonorrhoea, HIV Infection, AIDS, Hansen Disease and Creutzfeldt-Jakob Disease.

2. Reported cases.

3. Since 2014/1/1, "Varicella" was modified to "Complicated Varicella".

4. Since 2014/3/6, the case definition for confirmed Acute hepatitis C was changed from "meet the clinical and laboratory conditions" to "meet the clinical or laboratory conditions".

5. Since 2014/7/1, various subtypes of human cases of avian influenza are reported as "novel influenza A virus infections", a Category V Notifiable Infectious Disease. The original "H5N1 flu" and "H7N9 flu", which were respectively listed as a Category I Notifiable Infectious Disease and a Category V Notifiable Infectious Disease were removed from the list on the same day.

## Suspected Clusters

- Twenty-two clusters were reported, including 16 diarrhea clusters, 3 tuberculosis clusters, 2 varicella clusters, and 1 pertussis cluster.

## Imported Infectious Diseases

- 25 confirmed cases were imported from 8 countries during Week 39 of 2015.

Country Disease	Indonesia	Malaysia	Vietnam	India	Thailand	Myanmar	Central African Republic	China	Total
Amoebiasis	10		1	1					12
Dengue Fever		3	1		2	1		1	8
Shigellosis	3								3
Malaria							1		1
Typhoid fever				1					1
<b>Total</b>	13	3	2	2	2	1	1	1	25

Note: The statistics listed in this table include imported cases that were either confirmed or updated\* in the previous week.

- A total of 568 confirmed cases were imported from 31 countries in 2015.
- Top 3 imported diseases : Dengue fever (246), Amoebiasis (162), Shigellosis (67).
- Top 3 countries responsible for most imported cases : Indonesia (282), Philippines (51), Vietnam (43).

## Summary of Epidemic

- **Dengue Fever** : Dengue activity has slowed down, and has entered the peak of the epidemic season. The public is urged to clean up and remove any vector breeding site. Doctors are advised to stay vigilant for suspected cases to ensure the epidemic prevention. The epidemic has slowed down and the number of new cases reported during Week 39 is 30% less than that reported during Week 38 in Tainan City. On the other hand, the epidemic has increased slightly in Kaohsiung City and the number of new cases reported during Week 39 is 1.1 times higher than that reported during Week 38. Sporadic indigenous cases have continued to be reported in Pingtung County. Since May 1, 2015, 56 deaths were confirmed to be caused by dengue infection, while 63 deaths are waiting to be reviewed. As of now, 59 dengue cases are still being treated in the intensive care unit (ICU), and 86.3% of the reported cases have recovered. The number of imported cases reported is the highest compared to the same period in the last five years.

● **Enterovirus** : Enterovirus activity has peaked. During Week 39, the ER consultation rate for enterovirus infection is slightly higher than that during Week 38, and it is the highest during the same period in the last four years. Two cases of Enterovirus 71 infection have been reported in the community. Taiwan CDC will continue to closely monitor the outbreak.

● **Diarrhea** : According to the RODS surveillance system, the ER consultation rate for diarrhea has increased significantly during Week 39. The incidence rate has increased in all age groups, especially among children aged between 0-6.

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