

Project Title: Surveillance of severe syndromic cases in Taiwan

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Executing Institute: Center for Disease Control, Department of Health, The Executive Yuan, R.OC

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Abstract:

In the past decades, the threatening emerging disease and infectious disease were constantly emerged and challenged our surveillance system which based only on disease reporting. Once the physician do not know what is the likely disease to report, the timelines and completeness will be harmed greatly. The notifiable reporting system although can enhance the correction rate of detecting pathogens, but it might be restricted to the origin of the disease type leading to inability of surveying disease with similar symptoms and the quality of specimen collecting and exam. In order to meet the preliminary goal of catching emerging infectious diseases at the earliest moment and participating in the global outbreak alert and response system, the syndromic reporting and surveillance system then established in year 2000 and practiced in five medical centers at the early stage. It was then practiced constantly and nationally in Taiwan. Currently, there are 182 regional and above hospitals involving in this program. The system classified the syndromes into four categories including acute hemorrhagic syndrome (AHS), acute respiratory syndrome (ARS), acute neural syndrome (ANS) and acute jaundice syndrome (AJS).

Up to 3rd of November (week44) 2007, the total of reported cases are 369, 267 cases were accepted, 90cases were excluded and 12 cases were under assessment. Most of the cases were reported as acute respiratory syndrome (ARS) with total of 159 cases. The reported cases for ANS, AJS and AHS are 122, 80 and 8 respectively. The sex ratio between male and female is about 1.8:1, 15.2% death rate was noticed. The positive rate of pathogens from the lab result assay is around 9.2% (56/369). The diagnosis period of notifiable disease can be shortened approximately 0.5 to 1.0 days via time effect analysis. According to the surveillance report up to this year, there is no observation of 2 or more reported, infectious cases from the same region within one week. Thus, it might be predicted and concluded that there is no occurrence of aggregation.

Keyword: emerging infectious disease, syndromic surveillance