## Summary

According to the laboratory surveillance ${ }^{1}$ ，Coxsackie A was the predominant virus type in the past 4 weeks（Figure 1）．In general，both numbers of echovirus 11 （ECHO 11）and EV71 cases remained low，and most of these cases were sporadic with mild symptoms．During week 42 ，the total number of outpatient and ER visits for enterovirus infection was 7，332， which was similar to last week．It is likely that the epidemic has slowed down gradually （Figure 2）．

In week 42，one ECHO 11 infection with severe complications was newly confirmed．This brings the total case number of EVSC ${ }^{2}$ to 31 （Figure 3），including 8 deaths due to ECHO 11 （7 cases）and Coxsackie B1（1 case）infection．ECHO 11 and EV71 were the majority virus types of EVSC cases，and other virus types included Coxsackie A4，A9，A10，A16，B1，B2， B3 and B5．Among EVSC cases， $35.5 \%$ were newborns（Table 1）．Figure 4 showed the geographical distribution of EVSC cases according to their residential areas．

For further information，please visit the Taiwan National Infectious Disease Statistics System （NIDSS）website at https：／／nidss．cdc．gov．tw／en／


Figure 1．Trend of Enterovirus Isolates，2017－2018

1．In terms of the surveillance systems in Taiwan，please see：Jian，S．W．，Chen，C．M．，Lee，C．Y．，\＆Liu，D．P．（2017）．Real－ Time Surveillance of Infectious Diseases：Taiwan＇s Experience．Health security，15（2），144－153．
2．EVSC：Enteroviruses infection with Severe Complications


Figure 2．Trend of outpatient department and ER visits for enterovirus infection，2017－2018


Figure 3．Trend of EVSC，2017－2018

Table 1．Age and sex distribution of EVSC cases in 2018

| Age（year） | Male | Female | Total |
| :---: | :---: | :---: | :---: |
| $\leq 1$ month | 7 | 4 | 11 |
| $1-12$ month | 1 | 0 | 1 |
| 1 | 2 | 2 | 4 |
| 2 | 3 | 1 | 4 |
| 3 | 2 | 2 | 4 |
| 4 | 1 | 2 | 3 |
| 5 | 2 | 0 | 2 |
| 6 | 0 | 0 | 0 |
| $7-9$ | 1 | 1 | 2 |
| $\geqq 10$ | 0 | 0 | 0 |
| Total | 19 | 12 | 31 |
|  |  |  |  |



Figure 4．Geographical distribution of EVSC cases in 2018

