

Early Warning and Reporting System (EWARS)

Weekly Bulletin

(24th Epidemiological Week)

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Note: This bulletin includes data since January 2019 till date, including comparison of same period during last year. The current bulletin includes the data from the existing sentinel sites as well as from the the recently expanded 36 sentinel sites (including public hospitals, non public hospitals and medical colleges).

The Early Warning and Reporting System (EWARS)

Highlights

AGE: 324 cases of AGE are reported this week. The majority of these cases are from Kathmandu (34 cases), Dhading (28 cases), kanchanpur (27 cases), Dolakha (26 cases) and Rupandehi (15 cases).

SARI: 109 cases of SARI are reported this week. The majority of these cases are from Morang (13 cases), Kathmandu (11 cases), Dhankuta (10 cases), Lalitpur (8 cases) and Dolakha (6 cases).

Dengue: 12 cases of Dengue are reported this week. The majority of the cases are from Sunsari (8 cases) and one each from Rupandehi, Nuwakot, Morang and Bardiya.

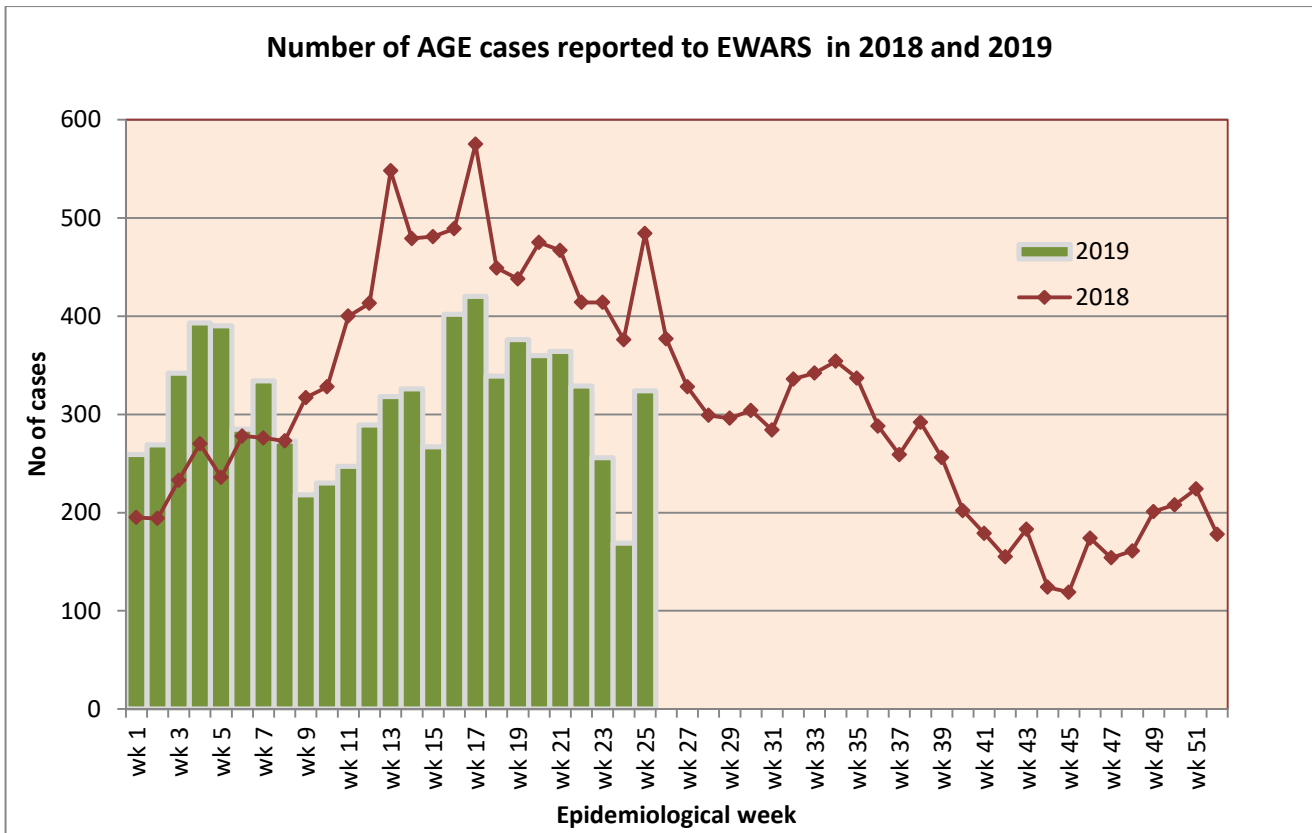
Kala-azar: Five cases of Kala-azar are reported this week, one each from Palpa, Bajura, Udayapur, Morang and Saptari.

The EWARS was established in 1997 to strengthen the flow of information on vector-borne and other outbreak prone infectious diseases from the district to Epidemiology and Disease Control Division (EDCD) and Vector-Borne Disease Research and Training Center (VBDRTC), Hetauda. Rapid Response Teams (RRTs) can be mobilized at short notice to facilitate prompt outbreak response at Central, Regional and District level. RRTs can also support local level health institutions for investigation and outbreak control activities.

This information system is hospital-based. So far, the EWARS mainly focuses on the **weekly reporting** of number of cases and deaths (including "zero" reports) of six priority diseases/syndromes—Malaria, Kala-azar, Dengue, Acute Gastroenteritis (AGE), Cholera and Severe Acute Respiratory Infection (SARI), and other epidemic potential diseases/syndromes (like enteric fever). It equally focuses on **immediate reporting** (to be reported within 24 hours of diagnosis) of one confirmed case of Cholera, Kala-azar severe and complicated Malaria and one suspect/clinical case of Dengue as well as 5 or more cases of AGE and SARI from the same geographical locality in one-week period.

1.1 Acute Gastro-Enteritis and Cholera

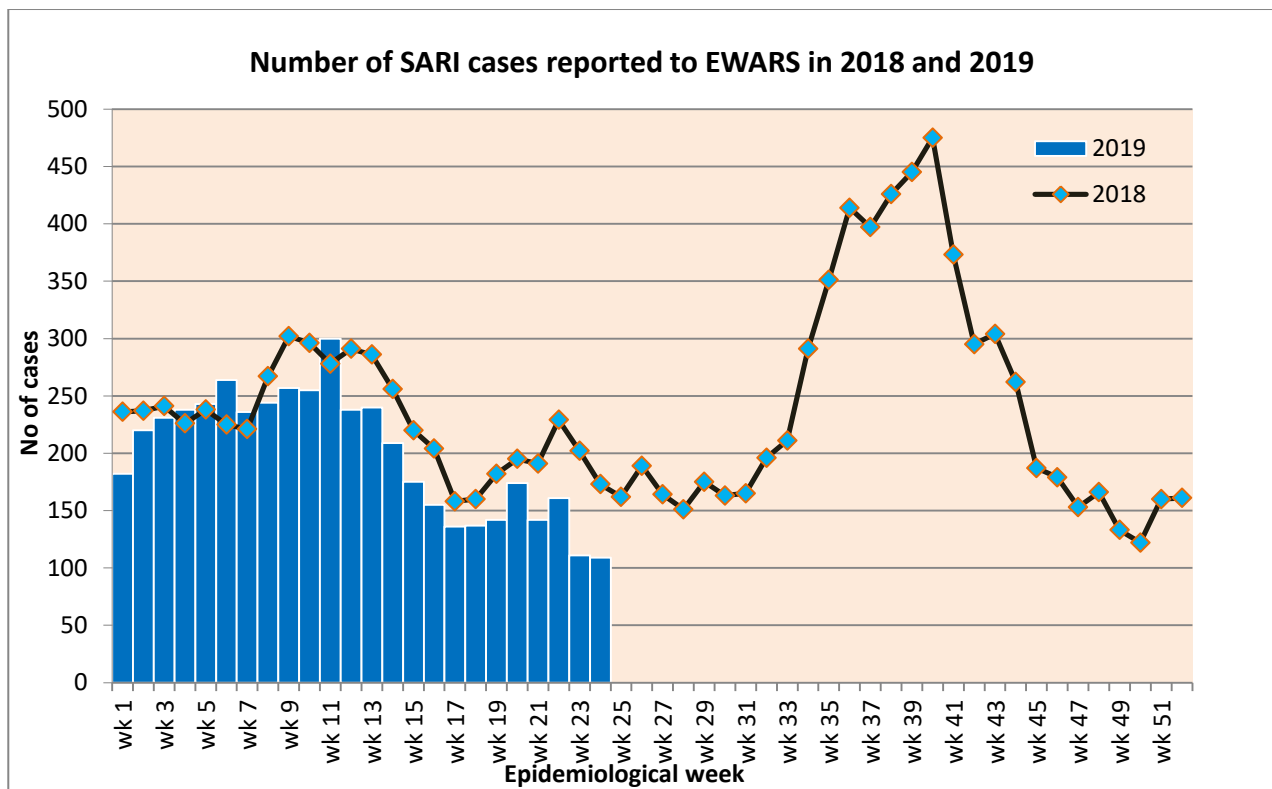
324 cases of AGE are reported in the 24th epidemiological week this year. The majority of these cases are from Kathmandu (34 cases), Dhading (28 cases), kanchanpur (27 cases), Dolakha (26 cases) and Rupandehi (15 cases). 376 cases of AGE were reported this week in 2018.



Cholera: One case of Cholera has been reported so far this year by Teku hospital, Kathmandu and the case was from Tahachal, Kathmandu.

1.2 Severe Acute Respiratory Infection (SARI)

109 cases of SARI are reported in the 24th epidemiological week this year. The majority of these cases are from Morang (13 cases), Kathmandu (11 cases), Dhankuta (10 cases), Lalitpur (8 cases) and Dolakha (6 cases). 173 cases of SARI were reported this week in 2018.



1.3 Enteric Fever

50 cases of Enteric fever are reported this week. The majority of the cases are from Kathmandu (12 cases), Lamjung (5 cases) and Sindhupalchowk (4 cases).

1.4 Malaria

No case of Malaria is reported this week. One case of Malaria was reported this week in 2018.

1.5 Dengue

12 cases of Dengue are reported this week. The majority of the cases are from Sunsari (8 cases) and one each from Rupandehi, Nuwakot, Morang and Bardiya. A total of 83 Dengue cases have been reported so far this year. Four cases of Dengue were reported this week in 2018.

1.6 Kala-azar

Five cases of Kala-azar are reported this week, one each from Palpa, Bajura, Udayapur, Morang and Saptari. Four cases of Kala-azar were reported this week in 2018.

1.7 Scrub typhus

No case of Scrub typhus is reported this week.

Timeliness and completeness of reporting from sentinel sites:

Timeliness and completeness of reporting will be updated in the subsequent bulletins.

Acknowledgement: The Epidemiology and Disease Control Division highly acknowledges the contribution from all the medical recorders, EWARS focal persons, rapid response team members and technical support from WHO for preparation of this bulletin.

Note: This bulletin is available at EDCCD's official website www.edcd.gov.np.