

Early Warning and Reporting System (EWARS)- Weekly Bulletin: Nepal

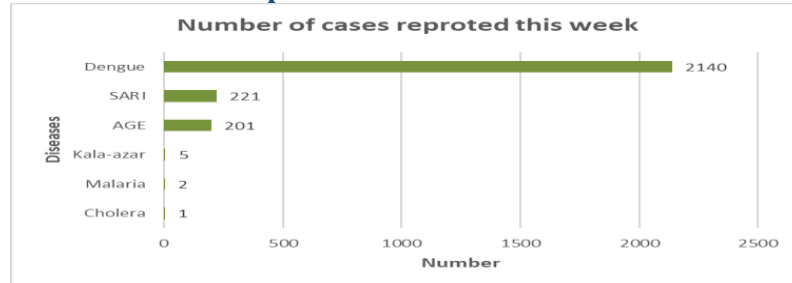
41st Epidemiological Week, 2022

23rd October, 2022

Highlights

- 1000455 cases of Coronavirus disease (COVID-19) have been confirmed in Nepal, of which 987741 cases have been recovered so far.
- Of the reported cases, Dengue is the leading cause of morbidity in week 41.

Number of cases reported for each disease this week

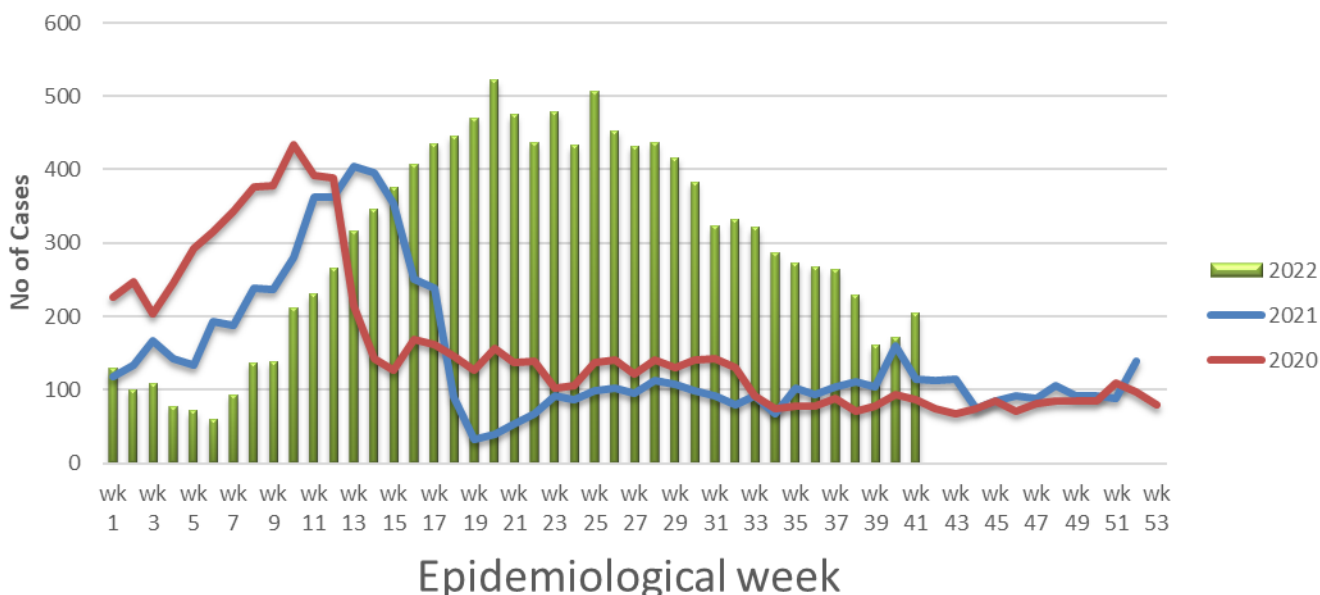


Note: This bulletin includes data since January 2021 till date, including comparison of the same period last two year. Since, May 2019, 36 new sentinel sites (including public hospitals, private hospitals, and medical colleges) were added and were gradually oriented and started reporting, thus increasing the number of reporting sites. The current number of sentinel sites is 118.

1. Acute Gastro-Enteritis (AGE)

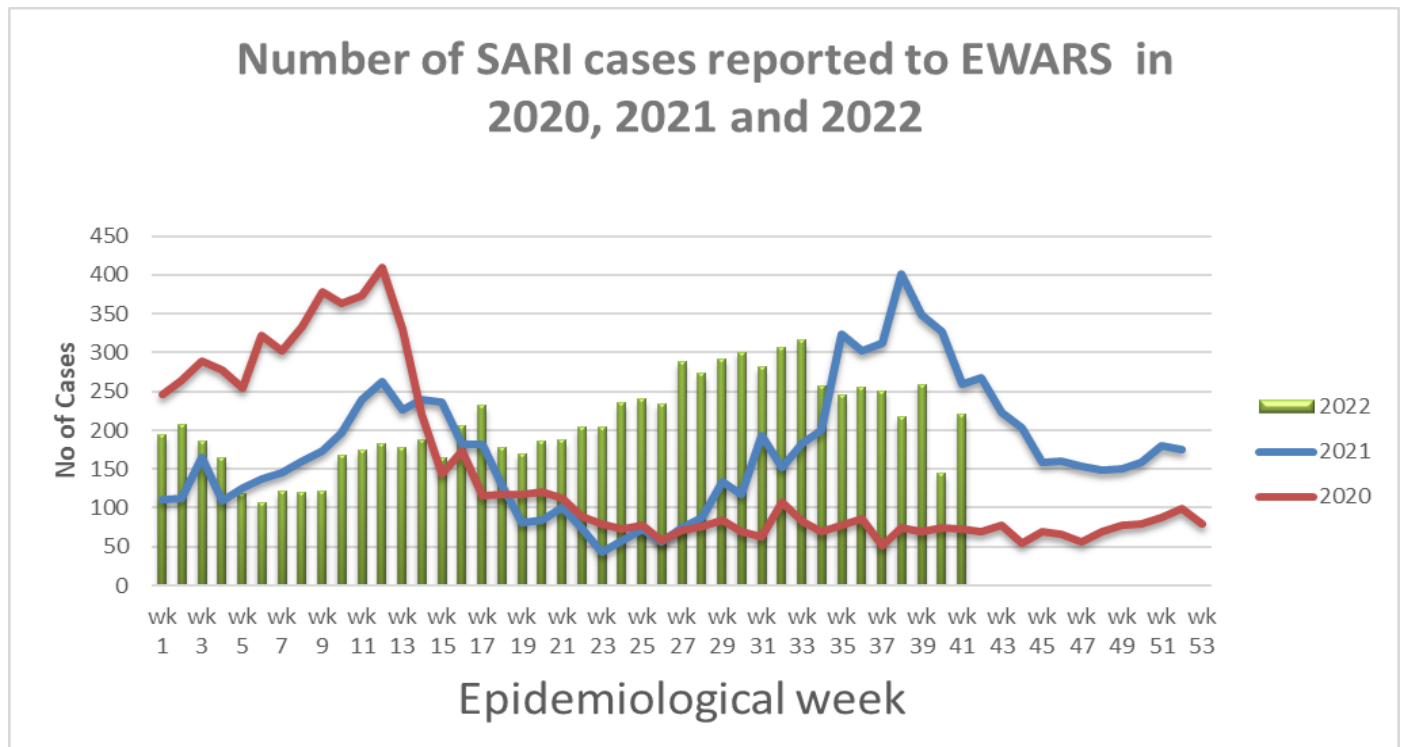
- 204 cases of AGE were reported this week. Most of these cases were reported from Parsa (30 case), Kathmandu (23 case), Nawalparasi West (20 case), Kapilbastu (12 case), Rupandehi (11 case), Sunsari (10 case), Bara (9 case), Lalitpur (6 case), Saptari, an Dhanusa (5 case from each district).
- 124 cases of AGE were reported this week in 2021.

Number of AGE cases reported to EWARS in 2020, 2021 and 2022



2. Severe Acute Respiratory Infection (SARI)

- 221 cases of SARI were reported this week. Most of these cases were reported from Kathmandu (27 case), Jhapa (22 case), Morang (20 case), Rupandehi (14 case), Sunsari (13 case), Palpa (8 case), Dhankuta, Parsa (7 case from each district), Bajhang, and Bardiya (6 case), Pyuthan (5 case).
- 264 cases of SARI were reported this week in 2021.



3. Malaria

- Two cases of malaria (*M. Vivax* – 2) was reported this week; one each case was reported from Bajhang, and Nawalparasi West districts.
- Five cases of malaria were reported this week in 2021.

4. Kala-azar

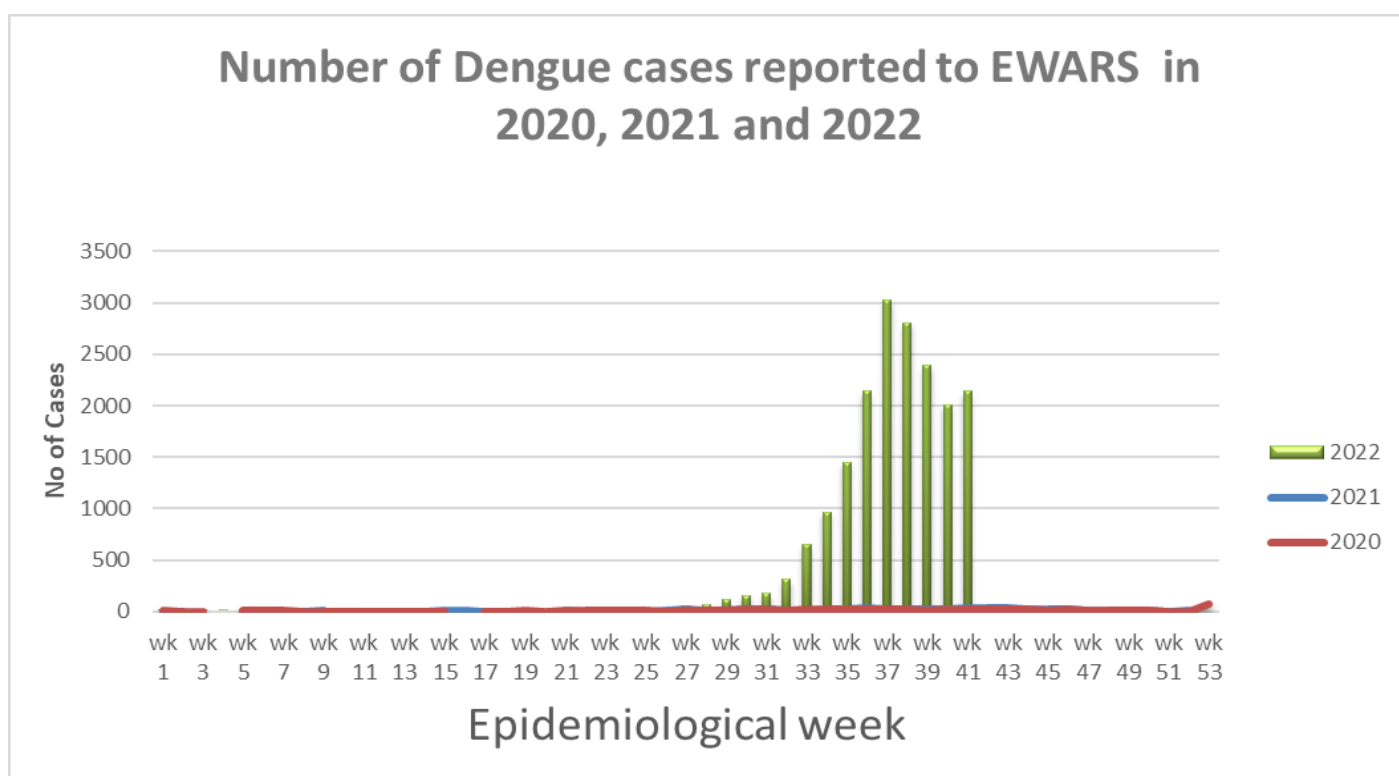
- Five cases of kala-azar were reported this week. Most of these cases were reported from Panchthar (2 case), Pyuthan, Palpa, and Kathandu (1 case from each district).
- Six cases of kala-azar were reported this week in 2021.

5. Cholera

- One case of Cholera was reported this week; one case was reported from Bhaktapur district.
- Zero case of Cholera was reported this week in 2021.

6. Dengue

- 2140 cases of dengue were reported this week. Most of these cases were reported from Kathmandu (846 case), Dhading (223 case), Lalitpur (104 case), Rupandehi (82 case), Khotang (69 case), Surkhet (43 case), Chitawan (42 case), Bhaktapur (41 case), Kavrepalanchok (34 case), Parbat (33 case), Bara (32 case), Makwanpur (26 case), Kaski, and Sankhuwasabha (25 case from each district), Dang, and Kailali (24 case from each district), Tanahu, and Sindhupalchok (23 case from each district), Palpa, and Nawalparasi East (21 case from each district), Bardiya, and Ilam (20 case from each district), Parsa, and Baglung (19 case from each district), Morang (18 case), Ramechhap (17 case), Sarlahi, and Arghakhanchi (14 case from each district), Sunsari (13 case), Bhojpur, and Rautahat (11 case from each district), Kapilbastu, Gulmi, Terhathum, and Myagdi (10 case from each district), Okhaldhunga, Kanchanpur, Nawalparasi West, Syangja, and Nuwakot (9 case from each district), Dhankuta, and Panchthar (8 case from each district), Jhapa, and Taplejung (7 case from each district).
- 30 cases of dengue were reported this week in 2021.



Other diseases

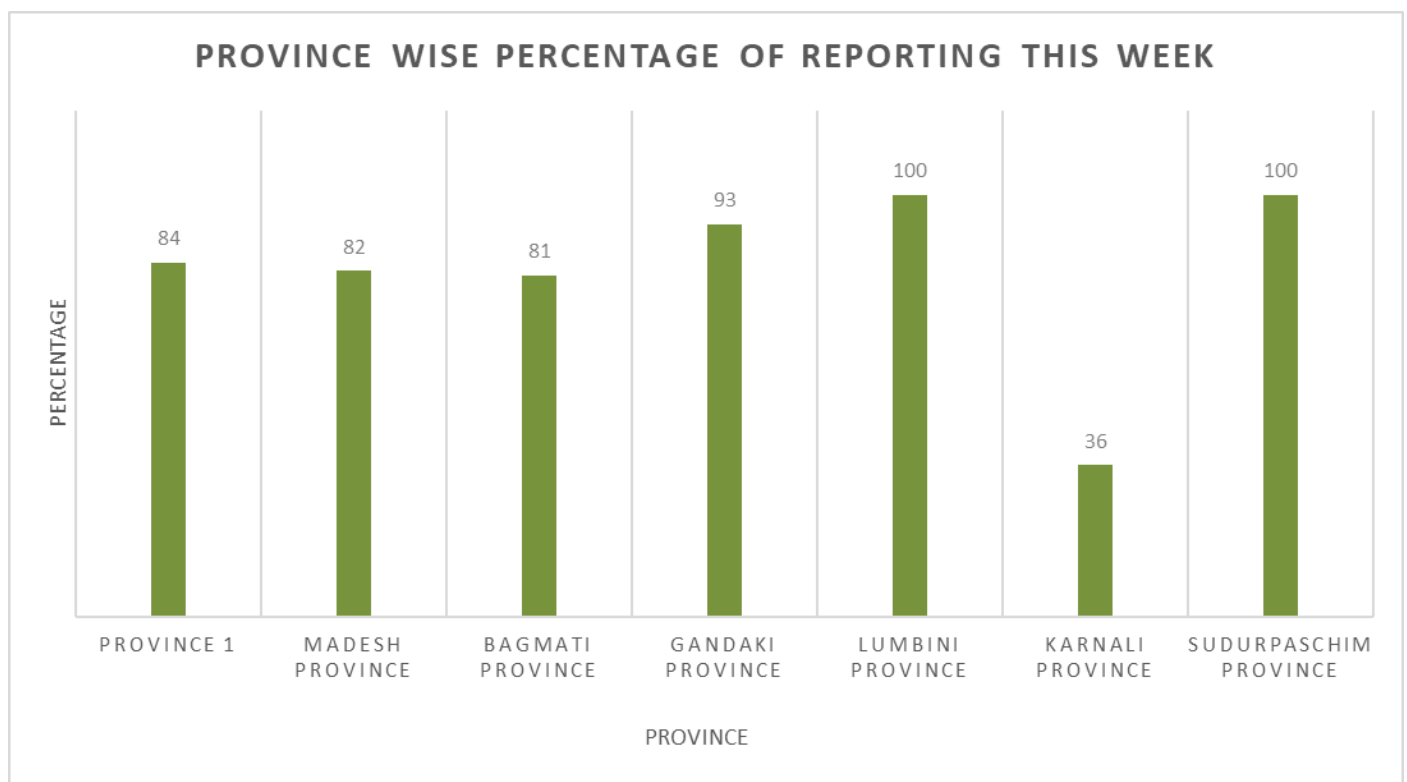
Scrub typhus

- 139 cases of scrub typhus were reported this week. Most of the cases were reported from Achham (16 case), Sankhuwasabha (13 case), Palpa (7 case), Rupandehi, and Kapilbastu (6 case from each district), Bhojpur, Dadeldhura, Kanchanpur, and Kailali (5 case from each district).
- 50 cases of scrub typhus were reported this week in 2021.

Table: Comparison with previous week by diseases, 2022

Disease	Week 41	Week40
AGE	204	171
SARI	221	144
Malaria	2	0
Kala-azar	5	3
Dengue	2140	2008
Cholera	1	0

Province wise reporting status:



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

Note: This bulletin is also available at the EDCCD website (please click [here](#)). Other information can also be accessed at the website www.edcd.gov.np. Thank you.



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