



WEEKLY EPIDEMIOLOGICAL REPORT

A publication of the Epidemiology Unit
Ministry of Health, Nutrition & Indigenous Medicine

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Influenza-related deaths investigation – 2018, Southern Province Part I

It was reported that a number of deaths had occurred among infants and young children who were admitted with respiratory symptoms to Teaching Hospital Karapitiya (THK) during the month of May, 2018. The numbers of patients with the same symptoms have been increased in the OPD as well as inwards in THK. These deaths and the respiratory disease have created a panic situation among the public and health staff in the hospital. The media also inquired the health officials regarding the rumour of the outbreak of respiratory illness in the Southern Province.

Detailed investigation on those deaths among children during the month of May and June were carried out by the Epidemiology Unit of the Ministry of Health. This is a retrospective investigation done during the months of June and July 2018.

There were 20 deaths among children reported from THK during the said period due to respiratory symptoms and signs.

Steps used for the outbreak investigation was as follows.

- The investigation team individually and in groups visited THK, and met the Director and Deputy Directors and inquired the prevailing situation regarding the outbreak of the respiratory tract infection.
- A meeting was held with Consultant Paediatricians, Consultant Physicians, Microbiologists, Virologists, Paediatric Intensivists, Provincial Epidemiologist, Regional Epidemiologists, Medical Officers, ward staff and Infection Control Nursing Officers (ICNOs).
- Individual discussions were held with the Director, Deputy Directors, Microbiologists, Virologist, JMO, MROs and

ICNOs. In addition, some information was gathered over the telephone.

- The team visited District General Hospital (DGH) Matara and met the Director, Deputy Director and discussed the situation. Discussions were held with Microbiologist, Paediatricians, Medical Officers, Nursing officers in the paediatric wards and ICNOs.
- Information was gathered from the hospitals where the patients were treated before being transferred to THK.
- Field situation was inquired from the Provincial Epidemiologist, Regional Epidemiologists and all MOOH in the Southern Province.
- First-hand information was collected from the bed head tickets and lab reports from THK and DGH Matara.
- Detailed field investigations were done by relevant MOOH and their teams by visiting the patients' houses with the guidance of Regional Epidemiologists.

Table 1: Number of deaths reported from

Year	J a n	F e b	M a r	A p r	M a y	J u n	J u l	A u g	S e p	O c t	N o v	D e c
2016	14	5	7	6	4	11	17	12	4	7	7	12
2017	4	9	16	6	11	11	7	13	7	9	11	9
2018	9	5	13	13	23	14						

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According to the previous data, the number of deaths due to all causes among children under five has been increased during the months of May and June 2018 in the THK (Table 1). These patients were reported from all three districts of the Southern Province and Table 2 shows the distribution of deceased children according to their districts of residence.

(1), Unawatuna (1) and Hikkaduwa (1).

Table 3: Distribution of time duration between onset of symptoms and first seeking medical advice

	RDHS	MOH Area	PHI Area
1	Galle (6 deaths, 30%)	Baddegama	
2		Habaraduwa	
3		Udugama	
4		Gonapinawala	
5		Hikkaduwa	
6		Karandeniya	
7	Hambantota (6 deaths, 30%)	Tangalle	
8		Angunakolapelessa	Uswewa
9		Angunakolapelessa	Hakuruwela
10		Walasmulla	
11		Lunugamwehera	
12	Matara (8 deaths, 40%)	Welipitiya	
13		Thihagoda	Thihagoda
14		Thihagoda	Yatiyana
15		Weligama	Weligama – South
16		Weligama	Weligama – North
17		Dickwella	Walasgala (residence is ½ Km from each other)
18		Dickwella	Walasgala
19		Kotapola	
20		Mulatiyana	

Table 2: Distribution of residences of the district, MOH areas and PHI areas among deceased children

The majority of the patients were reported from the Matara District. There were only two patients reported from the same MOH and PHI areas. Those two houses were ½ Km apart and there were no close contacts between the two families. Therefore, there was no obvious clustering of cases among these deaths.

Although these children had died in the THK, the majority of them had been transferred from other hospitals. Out of 20 patients, there was only one patient who had been directly admitted to THK once and died there. Seven patients had a single episode of illness and had been transferred from other hospitals. Twelve patients had another episode of illness earlier and had taken treatment either from THK or from another hospital and this time transferred to THK. Transferred patients were from DGH Matara (5), BH Tangalle (5), and direct admission to THK (4), BH Elpitiya (2), DGH Hambantota (1), Beddegama

From onset of symptoms	1 st Episode		2 nd Episode	
	No	%	No	%
1 st Day	10	50.0	6	50.0
2 nd Day	6	30.0	2	16.7
3 rd Day	3	15.0	3	25.0
4 th Day	1	5.0	1	8.3
Total	20	100.0	12	100.0

The majority of the parents (16, 80%) had taken treatment for their children within two days of illness from a qualified doctor. Eight patients (66%) were seen by a qualified doctor within two days out of 12 patients who had second admissions. Therefore, health-seeking behaviours of those parents were good. Type of doctors they have consulted in the first and second episode of the illness was assessed. Table no. 5 depicts that information.

Compiled by,

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Table 1: Selected notifiable diseases reported by Medical Officers of Health 27th-02nd Nove 2018(44th Week)

RDHS Division	Dengue Fever		Dysentery		Encephalitis		Enteric Fever		Food Poisoning		Leptospirosis		Typhus Fever		Viral Hepatitis		Human Rabies		Chickenpox		Meningitis		Leishmaniasis		WRCD	
	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	T*	C**
Colombo	133	8081	6	85	0	9	0	38	0	35	2	197	0	12	0	9	0	0	11	623	0	62	0	4	62	100
paha	72	4602	6	66	0	8	0	22	0	168	4	203	2	8	0	13	0	0	12	658	2	43	4	50	65	100
Kalutara	31	2603	3	81	0	5	1	13	1	55	21	565	0	6	0	15	0	0	15	609	1	89	0	9	54	100
Kandy	83	3216	7	107	0	6	0	4	3	25	7	90	2	95	0	20	0	1	5	297	0	39	3	32	59	100
Matale	8	811	0	22	0	1	0	4	1	41	0	83	0	3	0	8	0	0	1	46	0	13	5	137	60	100
NuwaraEliya	2	180	0	51	0	4	0	12	0	159	0	41	1	126	1	25	0	0	2	198	0	40	0	0	26	100
Galle	4	830	3	51	0	12	0	6	7	23	8	361	3	60	0	3	0	1	7	327	1	55	0	5	29	100
Hambantota	11	782	0	14	0	4	0	3	0	5	3	67	1	73	0	3	0	1	11	243	0	15	2	684	71	100
Matara	13	931	2	39	0	6	0	9	0	23	11	219	2	52	0	17	0	0	7	256	1	14	16	440	55	100
Jaffna	82	2684	11	159	1	6	3	47	0	223	0	11	4	263	0	1	0	2	1	258	0	10	0	3	37	93
Kilinochchi	2	285	2	31	0	1	3	20	0	5	0	5	0	16	0	0	0	1	1	32	0	2	0	1	51	100
Mannar	0	196	4	22	0	0	0	3	0	2	0	1	0	1	0	0	0	0	0	28	0	4	0	3	37	100
Vavuniya	6	516	2	17	0	4	1	43	0	12	1	36	0	7	0	0	0	1	1	46	0	5	0	12	56	100
Mullaitivu	0	101	0	7	0	0	0	10	0	11	0	8	0	7	0	0	0	1	0	11	0	1	0	2	26	100
Batticaloa	21	4420	7	161	0	5	1	9	0	29	0	43	0	3	0	4	0	3	4	170	2	21	0	0	65	100
Ampara	3	211	3	70	0	3	0	3	0	9	0	35	0	0	0	7	0	1	3	275	0	23	0	3	66	100
Trincormalee	7	949	0	36	0	2	0	5	0	13	1	50	0	22	0	2	0	0	4	188	0	9	0	18	30	100
Kurunegala	50	2098	4	120	0	17	0	13	1	6	46	180	1	22	1	23	0	2	13	505	0	82	9	371	61	100
Puttalam	65	1609	5	62	0	6	2	6	0	10	1	42	0	11	0	2	0	0	4	135	0	73	1	3	62	100
Anuradhapura	13	775	11	69	0	7	0	4	0	44	10	125	1	20	0	14	0	2	8	374	4	48	12	442	44	95
Polonnaruwa	1	268	1	36	1	5	0	0	0	19	1	102	0	0	0	4	0	1	9	264	0	20	4	229	56	88
Badulla	13	498	4	125	0	9	0	13	0	15	8	157	1	83	0	64	0	0	10	427	2	108	1	10	47	100
Monaragala	3	769	2	74	0	2	0	1	0	4	7	258	2	126	2	44	0	0	6	171	4	145	0	43	67	100
Ratnapura	21	1946	6	173	0	39	0	23	0	5	6	613	1	27	0	27	0	2	3	283	3	110	2	195	46	100
Kegalle	12	1252	0	51	0	12	0	8	0	91	7	265	2	71	1	16	0	0	15	361	1	44	0	14	64	100
Kalmune	12	1596	4	45	0	3	0	3	0	33	0	8	0	1	0	1	0	0	8	192	0	14	0	1	51	100
SRI LANKA	668	42209	93	1774	2	176	11	322	13	1065	14	3765	23	1115	5	322	0	19	161	6977	21	1089	59	2711	53	99

Source: Weekly Returns of Communicable Diseases (WRCD).

*T=Timeliness refers to returns received on or before 02nd November, 2018 Total number of reporting units 353 Number of reporting units data provided for the current week: 351 C**=Completeness
A = Cases reported during the current week. B = Cumulative cases for the year.

Table 2: Vaccine-Preventable Diseases & AFP

27th–02nd Nove 2018(44th Week)

Disease	No. of Cases by Province									Number of cases during current week in 2018	Number of cases during same week in 2017	Total number of cases to date in 2018	Total number of cases to date in 2017	Difference between the number of cases to date in 2018 & 2017
	W	C	S	N	E	NW	NC	U	Sab					
AFP*	00	00	00	00	00	00	00	00	01	01	00	55	61	- 9.8 %
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Mumps	02	02	00	00	00	02	00	02	00	08	03	297	266	11.6 %
Measles	00	00	00	00	00	00	00	00	00	01	00	106	180	- 41.1 %
Rubella	00	00	00	00	00	00	02	00	00	02	00	07	10	- 30 %
CRS**	00	00	00	00	00	00	00	00	00	00	00	00	01	0%
Tetanus	00	00	00	00	00	00	00	00	00	00	00	18	16	12.5 %
Neonatal Tetanus	00	00	00	00	00	00	00	00	00	00	00	00	00	0 %
Japanese Encephalitis	00	00	00	00	00	00	00	00	00	00	01	25	22	13.6 %
Whooping Cough	00	00	01	00	01	00	00	00	00	02	00	46	19	142.1 %
Tuberculosis	40	44	13	18	06	11	05	03	08	150	135	7191	7056	1.9 %

Key to Table 1 & 2

Provinces: W: Western, C: Central, S: Southern, N: North, E: East, NC: North Central, NW: North Western, U: Uva, Sab: Sabaragamuwa.
RDHS Divisions: CB: Colombo, GM: Gampaha, KL: Kalutara, KD: Kandy, ML: Matale, NE: Nuwara Eliya, GL: Galle, HB: Hambantota, MT: Matara, JF: Jaffna, KN: Killinochchi, MN: Mannar, VA: Vavuniya, MU: Mullaitivu, BT: Batticaloa, AM: Ampara, TR: Trincomalee, KM: Kalmunai, KR: Kurunegala, PU: Puttalam, AP: Anuradhapura, PO: Polonnaruwa, BD: Badulla, MO: Moneragala, RP: Ratnapura, KG: Kegalle.

Data Sources:

Weekly Return of Communicable Diseases: Diphtheria, Measles, Tetanus, Neonatal Tetanus, Whooping Cough, Chickenpox, Meningitis, Mumps., Rubella, CRS,

Special Surveillance: AFP* (Acute Flaccid Paralysis), Japanese Encephalitis

CRS** =Congenital Rubella Syndrome

NA = Not Available

Dengue Prevention and Control Health Messages

Look for plants such as bamboo, bohemia, rampe and banana in your surroundings and maintain them free of water collection.

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