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SRI LANKA

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CONTENTS

PAGE NO

1. Surveillance of Poliomyelitis	02
2. Surveillance of Measles	03
3. Surveillance of Leptospirosis	04
4. Surveillance of Human Rabies & Control activities	04
5. Surveillance of Viral Hepatitis	04
6. Surveillance of Enteric Fever	04
7. Surveillance of Dysentery	05
8. Surveillance of Malaria	05
9. Surveillance of Japanese Encephalitis	05
10. Surveillance of Dengue Fever	07
11. Surveillance of Rubella and Congenital Rubella Syndrome	07
12. Surveillance of Cholera	07
13. Surveillance of Tetanus	07
14. Surveillance report on A E F I	08
15. Surveillance of Tuberculosis	10
16. Surveillance at Sea Port	10
17. Surveillance at Air Port	10
18. Surveillance of Leprosy	11
19. Sexually Transmitted Diseases	12
20. Pattern of Enteric Pathogens isolated	13
21. Surveillance of Meningitis	13
22. Influenza Surveillance	14
23. Special Report Human Influenza Surveillance	16
24. Summary of Notifiable Diseases	17



1. POLIOMYELITIS

Twenty-seven patients with acute flaccid paralysis were notified to the Epidemiology Unit during the 4th quarter of 2023, while the expected number for the quarter was 28 (as per the annual surveillance target of 2 AFP patients:100,000 under 15-year population). Therefore, the non-polio AFP rate among under 15-year population for the second quarter of 2023 was 1.96:100,000.

Notification of AFP patients from hospitals

Upon detection, all AFP patients should immediately be reported to the Epidemiology Unit and to the Regional Epidemiologist of the respective district of the patient's residence, in addition to notifying to the MOH of the patient's residence.

The highest number of AFP patients for quarter was notified from the Lady Ridgeway Hospital, Colombo, which had reported a total of seven patients, followed by the Sirimavo Bandaranaike Specialized Children's Hospital (n=4), and Teaching Hospital Karapitiya and aching Hospital Anuradhapura (n=3).

Table 1: Distribution of reported AFP patients by hospital, 4th quarter 2023

Hospital	No: of patients reported
LRH	07
SBSCH	04
TH Karapitiya	03
TH Anuradhapura	03
CNTH Ragama	02
TH Kurunegala	02
TH Peradeniya	01
CSTH	01
TH Kandy	01
Ashrof Memorial Hospital (Kalubowila)	01
DGH Badulla	01
TH Batticaloa	01
Total	27

Seasonal Distribution of AFP Cases

A significant seasonal variation in reporting AFP patients was not observed during the period.

Distribution of AFP patients according to the province, district & MOH area

Gampaha district had reported the highest number of patients (n=4), while Kurunagala and Monaragala districts had reported three patients each. The distribution of AFP patients according to the province, district and MOH area is given in table 2.

Table 02 : Geographical distribution of AFP cases 4th quarter 2023

Province	District	MOH Area	Number of AFP cases	
Western	Colombo	CMC	1	
	Gampaha	Ragama	1	
		Gampaha	2	
		Wattala	1	
Central	Kalutara	Beruwala	1	
		Ingiriya	1	
	Kandy	Hasalaka	1	
		Digana	1	
		Matale	Dambulla	1
			Ukuwela	1
Nuwara Eliya			1	
Southern	Galle	Induruwa	1	
		Morawaka	1	
	Hambantota	Tangalla	1	
		Eastern	Trincomalee	Kantale
Batticaloa	1			
Kalmunai	Samanthurai		1	
North Western	Kurunegala	Galgamuwa	1	
		MC Kurunegala	1	
		Giribawa	1	
North Central	Anuradhapura	Nochchiyagama	2	
		Uva	Moneragala	1
Kataragama	1			
Buttala	1			
Sabaragamuwa	Kegalle	Yatiantota	1	
Total			27	

Age and Sex Distribution of AFP cases

The proportion of males was higher than females, with 19 out of 27 patients being males (70%). The age and sex distribution are given in Table 3.

Table 03. Distribution of AFP cases by Age and sex: 4th Quarter 2023.

Age Group	Male	Female	Total	%
<1 year old	00	00	00	00.00
1-4 year old	03	01	04	15.00
5-9 year old	10	03	13	48.00
10-15 year old	06	04	10	37.00
Total	19	08	27	100.0

Final diagnoses of AFP cases

For majority of patients, the final diagnosis was Guillain-Barre Syndrome (n=19, 70%), while Acute tranverse Myelitis (n=3 11%), acute demyelinating polyneuropathy, myeline oligodentritis associated disease were diagnosed in one patient each.

One child was presented to Lady Ridgeway Hospital with AFP, 18 days following vaccination with first dose of OPV vaccine, who was diagnosed with Vaccine Associated Paralytic Poliomyelitis following investigations.

Laboratory surveillance of AFP cases

The exclusion of poliovirus requires two stool samples collected within 14 days of the onset of the symptoms. These samples should be sent to the virology laboratory at the Medical Research Institute (WHO regional reference laboratory for poliomyelitis) for the exclusion of poliovirus. According to WHO criteria these samples should be collected in a timely manner and be in 'good condition' upon receipt to the laboratory. A sample is determined to be in 'good condition' if it fulfills the following criteria: available in correct quantity (8 - 10g), sent in a leak proof container with no evidence of spillage or leakage, and presence of ice in the container on receipt to the lab. In order for the samples to be considered timely, the two samples should be collected within 14 days of onset of paralysis and the two samples should be collected 24 hours apart. Accordingly, in the majority of patients both stool samples had been collected on time and sent in 'good condition' to the MRI for polio virology (n=20, 74%).

Sentinel site monitoring

Any hospital where the services of a Consultant Paediatrician is available is considered a sentinel site for AFP surveillance. Currently, a total of 104 hospitals function as sentinel sites. These hospitals send a weekly report of all AFP, measles, rubella, CRS patients reported from the hospital for the given week, including zero reporting. This is considered a complementary measure to the routine surveillance.

2. Surveillance of Measles 4th quarter 2023

A total of 459 suspected measles/rubella cases, meeting the surveillance case definition of "fever and maculopapular rash" were reported. The first case of the current measles outbreak was detected in May 2023. During the fourth quarter, 229 laboratory-confirmed measles cases were identified.

Western Province reported the highest number of suspected cases with fever and maculopapular rash cases (247). Colombo district reported the highest number of laboratory confirmed Measles cases (63).

Laboratory investigations were conducted at the WHO-accredited National Reference Laboratory of the Medical Research Institute (MRI) for measles and rubella IgM testing on 459 patients with fever and maculopapular rash. The program achieved a laboratory IgM testing rate of 96.29%, well exceeding the monitoring target of >80%.

Table 04: Number of Fever rash cases tested for Measles: 4th Quarter 2023

District	Notified fever and rash cases	Laboratory confirmed Measles cases	District	Notified fever and rash cases	Laboratory confirmed Measles cases
Colombo	143	63	Batticaloa	3	2
Gampaha	75	51	Ampara	2	0
Kalutara	29	14	Trincomalee	1	0
Kandy	32	13	Kurunegala	25	12
Mannar	0	0	Puttalam	7	4
Kalmunai	1	1	Anuradhapura	19	8
Galle	31	21	Polonnaruwa	3	3
Hambantota	9	2	Badulla	4	0
Matara	13	4	Moneragala	2	0
Jaffna	24	16	Rathnapura	7	6
Vavuniya	0	0	Kegalle	5	1
Kilinochchi	0	0	Nuwaraeliya	14	6
Matale	9	2	Mullativu	0	0

3. LEPTOSPIROSIS

During the 4th Quarter of 2023, 2852 cases and 39 deaths (CFR 1.3) due to Leptospirosis were notified to the Epidemiology Unit compared to **1825** cases and **33** deaths in the previous quarter and **2668** cases and **58** deaths during the corresponding quarter of 2022.

The age and sex distribution of patients, revealed by the special surveillance data is given in Table 06.

Table 05: SELECTED CHARACTERISTICS OF LEPTOSPIROSIS PATIENTS(%)- 4th QUARTER 2023.

Age Group	Sex	
	Male	Female
0 - 9 years	05	00
10 - 19 years	45	02
20 - 29years	138	10
30 - 39years	215	25
40 - 49years	261	43
50 - 59 years	200	48
>60years	201	58
Total	84.65%	14.71%

4. HUMAN RABIES

Two cases of Human Rabies were reported to the Epidemiology Unit in the 4th quarter of 2023 compared to four cases both in the previous quarter and the corresponding quarter of the year 2022. All reported cases were laboratory-confirmed.

Animal Rabies 4th quarter 2023

Animal Rabies

During this quarter, 55 dogs were reported positive for rabies, compared to 71 in the previous quarter and 86 positives in the same period in the last year.

Rabies Control Activities 4th quarter 2023

Dog vaccination - 469846 dogs were vaccinated during the Quarter under review compared to 448533 in the previous quarter and 258526 in the corresponding Quarter of the last year.

Animal Birth control

Chemical- Discontinued

Surgical– 7544 female dogs were subjected to sterilization by surgical method during the quarter review compared to 7815 in the previous quarter and 11221 in the corresponding quarter of last year.

5. VIRAL HEPATITIS

In the 4th Quarter 2023, a total of 63 cases of Viral Hepatitis were reported to the Epidemiology Unit. This was in comparison to the 59 cases in the previous quarter and 80 cases in the corresponding quarter of 2022. Badulla district (15 cases) reported the highest number of cases followed by Monaragala district (12 cases).

6. ENTERIC FEVER

In the 4th Quarter 2023, a total of 9 cases of Enteric fever were reported to the Epidemiology Unit, compared to 11 cases in the previous quarter and 1 case in the corresponding quarter of 2022. Jaffna district reported the highest number of cases (2).

7. DYSENTERY

In the 4th Quarter 2023, a total of 303 cases of Dysentery were reported to the Epidemiology Unit, in comparison to 253 cases in the previous quarter and 121 cases in the corresponding quarter of 2022. Batticaloa district (52 cases) and Jaffna (43 cases) reported the highest number of cases.

8. MALARIA

There were no indigenous malaria cases reported during the 4th quarter of 2023. Twenty- imported malaria cases reported in the 4th quarter of 2023.

9. JAPANESE ENCEPHALITIS (JE) 4TH QUARTER 2023

During the 4th quarter of 2023, 46 clinically suspected Encephalitis cases were reported to the Epidemiology Unit through the routine disease notification system. Out of these, 28 cases were epidemiologically confirmed by Public Health Inspectors during their field investigations.

There were 7 laboratory-confirmed JE cases for the year of 2023, out of which five cases were reported during the 4th quarter of 2023, while the 2 were reported during the 1st quarter of 2023.

Three out of 5 laboratory-confirmed JE cases were males. One of these 5 cases was from the 1 – 10-year age group compared to another from the 21 – 50-year age group while the other 3 were more than 50 years of age. Two out of these five cases were reported from the district of Colombo while another 2 were reported from the district of Gampaha and the from the district of Kalutara.

Table 06
Results of Blood smear examination for malaria parasites - 4th Quarter 2023

	4 th quarter 2022	4 th quarter 2023
No. of blood smears examined	205438	204284
No. of positives	7	20
No. of <i>P. vivax</i>	0	2
No. of <i>P. falciparum</i>	5	16
No. of mixed infections	2	00
No. of infant positives	0	00
Slide positivity rate (S.P.R.)	0	0.00
P.v. : P.f. ratio	0	1:8
Percentage of infant positives	0	0

Table 7

Number of blood smears examined by district RMO– 4th Quarter 2023

RMO	July	August	September	Total
Ampara	1974	2115	2247	6336
Anuradhapura	3530	3525	3597	10652
Badulla	2499	2302	2179	6980
Batticaloa	4064	4214	3608	11886
Colombo	9142	9046	8943	27131
Embilipitiya	3027	2816	2933	8776
Galle	2041	1850	2324	6215
Gampaha	3366	3245	2726	9337
Hambantota	2033	2019	1765	5817
Jaffna	1882	2244	2221	6347
Kalmune	2523	2868	2742	8133
Kalutara	1209	1131	7	2347
Kandy	5117	4453	5891	15461
Kegalle	1653	1548	1759	4960
Kilinochchi	803	935	927	2665
Kurunegala	5568	5487	5417	16472
Maho	1326	1341	1329	3996
Mannar	1059	940	885	2884
Matale	3005	3076	2440	8521
Matara	1517	2087	2602	6206
Monaragala	1837	1935	1766	5538
Mullathivu	1806	1404	1497	4707
Nuwara Eliya	579	1060	1039	2678
Polonnaruwa	1836	1766	1562	5164
Puttalam	2568	2250	2332	7150
Trincomalee	1149	1309	1316	3774
Vavuniya	1514	1318	1319	4151
SRI LANKA	68627	68284	67373	204284

Table 8

MORBIDITY AND MORTALITY DUE TO DF/DHF - 4TH QUARTER 2023

RDHS	No of Cases reported in 4 th Quarter 2023	%	Deaths	CFR
Western Province	9099	35.94	8	0.08
Colombo	5360	21.17	5	0.09
Gampaha	2752	10.87	2	0.07
Kalutara	987	3.90	1	0.10
Central Province	4488	17.73	3	0.06
Kandy	3683	14.55	2	0.05
Matale	669	2.64	1	0.14
Nuwara Eliya	136	0.54	0	0.00
Southern Province	2103	8.31	1	0.04
Galle	1464	5.78	0	0.00
Hambantota	267	1.05	0	0.00
Matara	372	1.47	1	0.26
Northern Province	2712	10.71	5	0.18
Jaffna	2409	9.52	4	0.16
Kilinochchi	64	0.25	1	1.56
Mannar	136	0.54	0	0.00
Vavuniya	55	0.22	0	0.00
Mulativu	48	0.19	0	0.00
Eastern Province	1551	6.13	0	0.00
Batticaloa	737	2.91	0	0.00
Ampara	65	0.26	0	0.00
Trincomalee	200	0.79	0	0.00
Kalmunai	549	2.17	0	0.00
North-Western Province	2026	8.00	4	0.19
Kurunegala	846	3.34	3	0.35
Puttalam	1180	4.66	1	0.08
North-Central Province	794	3.14	0	0.00
Anuradhapura	616	2.43	0	0.00
Polonnaruwa	178	0.70	0	0.00
Uva Province	1219	4.82	1	0.08
Badulla	1145	2.16	0	0.00
Moneragala	0	0.00	0	-
Sabaragamuwa Province	1324	5.23	2	0.15
Ratnapura	1568	2.96	3	0.19
Kegalle	1194	2.26	1	0.08
TOTAL	52902	100.00	74	0.14

10. DENGUE FEVER (DF) / DENGUE HAEMORRHAGIC FEVER (DHF) – QUARTER 4 of 2023

During the 4th quarter of 2023, 25,316 confirmed or clinically suspected DF / DHF cases were reported from all districts, with 24 deaths (CFR 0.09%), compared to 18,394 cases of DF/DHF, with 12 deaths (CFR 0.06%) in the 4th quarter of 2022.

Table 9

Month	Number of Cases	Proportion of cases
October	4010	15.84%
November	7995	31.58%
December	13311	52.58%

Table 10: The age distribution of DF/DHF cases for the 4th quarter of 2023 is as follows:

Quarter 4	<1yr	1-4yr	5-9yr	10-14yr	15-19yr	20-24yr	25-49yr	50-64yr	>=65yr
No of cases	114	871	1516	2013	3025	4015	9769	2846	1147
%	0.45	3.44	5.99	7.95	11.95	15.86	38.59	11.24	4.53

11. RUBELLA DISEASE AND CONGENITAL SYNDROME (CRS): 4th Quarter 2023

Measles and rubella surveillance is carried out through a combined "fever and maculopapular rash" surveillance system, utilizing this sensitive case definition to detect both measles and rubella cases. During the 4th quarter, 459 cases of fever and maculopapular rash were investigated for rubella and subsequently discarded.

Congenital Rubella Syndrome (CRS):4th Quarter 2023

In 4th quarter 2023, 202 suspected cases were investigated under TORCH screening and discarded as non-CRS cases.

12. CHOLERA

No confirmed cases of cholera were reported to the Epidemiology Unit during the 4th Quarter 2023. Last case of cholera was reported in the country in January 2003.

13. TETANUS

In 2023, six patients in the age group of 55-80 years with tetanus were notified and confirmed. Three deaths have been reported among these patients.

14. SURVEILLANCE REPORT ON AEFI

Surveillance of Adverse Events Following Immunization (AEFI) effectively continued in the 3rd quarter of 2023 the reporting has reached 98.3% of completeness of submitting monthly AEFI notification forms via the electronic AEFI system (e-AEFI), while 84.9% reports were submitted on time. Majority of the districts have submitted all three monthly AEFI notification forms (23 out of 26 health districts) (Table 1).

Surveillance of Adverse Events Following Immunization (AEFI) effectively continued in the 4th Quarter of 2023, with 98.2% of completeness of submitting monthly AEFI notification forms via the electronic AEFI system (e-AEFI), while 88% of the reports were submitted on time. All three-monthly forms were submitted by 23 of the 26 health districts. Hambantota and Mannar districts have completed all forms on a timely manner (100%), while Matara, Gampaha, and Matale ((98%, 97.8% and 97.4%) timeliness respectively (Table 1).

The highest rate (1223 per 100,000 doses given) of AEFI was reported from Vavuniya district, while Batticaloa reported the highest number of 551 AEFI cases in the 4th quarter of 2023.

For the fourth quarter, the highest number of AEFI (n=1997) was reported against the Pentavalent vaccine (PVV), whereas the highest rate of AEFI (1715.3 /100,000 doses administered) was reported against DTP vaccine. The rate of AEFI for PVV (01st, 02nd& 03rd doses) is 1268.3 per 100,000 doses administered. High Fever (1540), Nodules (528), and Allergic Reactions (500) are the leading AEFI reported. The highest numbers of fever cases reported were following PVV (1018 cases: 646.5 per 100,000 doses administered) and DPT (414 cases: 710.1 per 100,000 doses administered) vaccines. For Nodules, it was largely due to PVV (359 cases: 228 per 100,000 doses administered) and DPT (146 cases: 250.4 per 100,000 doses administered). Allergic reactions, were largely due to MMR (173 cases: 131.9 per 100,000 doses administered) DPT (127 cases: 217 per 100,000 doses administered, and PVV (115 cases: 73 per 100,000 doses administered).

Table 11

COMPLETENESS AND TIMELINESS OF MONTHLY REPORTS OF AEFI BY RDHS DIVISIONS - 4TH QUARTER 2023

Province	District	% Completeness	% Timely Returns	No. of AEFI	AEFI Rate (100,000 doses)
Western	Colombo	93	73.7	202	329.0
	Gampaha	100	97.8	179	185.7
	Kalutara	100	94.9	108	262.4
	NIHS	100	83.3	22	131.8
Central	Kandy	100	87.5	191	270.8
	Matale	100	97.4	171	614.9
	Nuwara Eliya	100	87.2	36	88.6
Southern	Galle	100	95	117	213.5
	Hambantota	100	100	110	200.7
	Matara	100	98	139	348.1
Northern	Jaffna	92.9	83.3	238	661.7
	Kilinochchi	100	91.7	46	480.9
	Mannar	100	100	49	504.1
	Vavuniya	100	75	150	1223.0
	Mullativu	100	94.4	83	112.7
Eastern	Batticaloa	100	92.9	551	1215.1
	Ampara	100	90.5	38	250.0
	Kalmunai	100	89.7	63	166.6
	Trincomalee	100	83.3	54	159.5
North Western	Kurunegala	100	94.3	238	284.6
	Puttalam	97.4	66.7	96	201.2
North Central	Anuradhapura	100	75.4	149	286.1
	Polonnaruwa	100	91.7	45	191.6
Uva	Badulla	100	83.3	141	299.7
	Moneragala	100	87.9	98	327.0
Sabaragamuwa	Ratnapura	100	96.7	170	297.3
	Kegalle	100	90.9	96	247.7
Sri Lanka		98.2	88	3599	335.7

Table 12 : Number of Selected Adverse Events by Vaccines – 4th Quarter 2023

	BCG	OPV	IPV	PPV ¹	DPT	MMR	LJE	DT	TT	HPV	aTd	Total number of AEFI reported
Total Number of AEFI Reported	4	19	21	1997	1000	308	80	115	23	10	9	3586 (334.5)
AEFI reporting rate/1,000,000 doses administered	(8.8)	(6.4)	(20.3)	(1268.3)	(1715.3)	(234.8)	(121.2)	(145.2)	(34.4)	(24.4.7)	(13.7)	
High Fever (>39°C)	0	9	9	1018	414	34	24	32	0	0	0	1540 (143.7)
Reporting rate/1,000,000 doses administered	(0)	(3.0)	(8.7)	(646.5)	(710.1)	(25.9)	(36.3)	(40.4)	(0)	(0)	(0)	
Allergic reactions	0	4	6	115	127	173	27	29	6	10	3	500 (46.6)
Reporting rate/1,000,000 doses administered	(0)	(1.3)	(5.8)	(73.0)	(217.8)	(131.9)	(40.9)	(36.6)	(9.0)	(24.4.7)	(4.6)	
Severe local reactions	0	0	0	3	9	2	0	1	0	0	0	15 (1.4)
Reporting rate/1,000,000 doses administered	(0)	(0)	(0)	(1.9)	(15.4)	(1.5)	(0)	(1.3)	(0)	(0)	(0)	
Seizure (Febrile/Afebrile)	0	0	0	35	42	5	10	3	1	0	0	96 (8.9)
Reporting rate/1,000,000 doses administered	(0)	(0)	(0)	(22.2)	(72.0)	(3.8)	(15.1)	(3.8)	(1.5)	(0)	(0)	
Nodules	0	0	2	359	146	2	1	17	3	0	0	528 (49.2)
Reporting rate/1,000,000 doses administered	(0)	(0)	(1.9)	(228.0)	(250.4)	(1.5)	(1.5)	(21.5)	(4.5)	(0)	(0)	
Injection site abscess	2	0	1	44	13	0	0	1	0	0	1	62 (5.8)
Reporting rate/1,000,000 doses administered	(4.4)	(0)	(0.9)	(27.9)	(22.3)	(0)	(0)	(1.3)	(0)	(0)	(1.5)	
HHE	0	0	0	6	0	1	0	0	0	0	0	7 (0.6)
Reporting rate/1,000,000 doses administered	(0)	(0)	(0)	(3.8)	(0)	(0.8)	(0)	(0)	(0)	(0)	(0)	

*PPV-PentaValent Vaccine

Note: Total given only for eleven vaccines listed in the table

15. Tuberculosis Report 4th quarter -2023

A total of **2328** TB patients were notified to the NPTCCD by H816A (TB Notification Form) for the 4th quarter of 2023, while **2302** patients were registered at chest clinics during the same quarter according to the quarterly report on case finding (TB 08). Of these **2127** TB patients (92.4%) were new TB cases, **175** (7.6%) were retreatment cases and no cases were identified for previous treatment history unknown category. (Please refer to Annex 2) Out of new TB cases, **1144** (53.8%) were bacteriologically confirmed TB, **381** (17.9%) were clinically diagnosed (sputum negative) TB and 602 (28.3%) were new extrapulmonary TB cases. Out of these **retreatment cases**, **105** (60%) patients **relapsed**, 33 (18.9%) patients were **treated after failure**, **26** (14.9%) patients were **lost to follow** and **11** (6.3%) patients were **previously treated**. A total of 2230 TB patients were screened for HIV; out of them **6** patients were **positive** for HIV. There were **3** patients with known positive HIV status at the time of TB diagnosis. A total of 9 patients were TB co-infection. **13** Multi-drug resistant TB patients were detected during the above quarter. The distribution of TB Patients by RDHS divisions is in the annexed table.

Table 13: TUBERCULOSIS PATIENTS BY RDHS DIVISIONS - 4th Quarter 2023

RDHS DIVISION	New				Retreat-ment & previous Hx unknown	Total
	PTB +VE	PTB sp-ve , Culture positive	EPTB	Total		
Colombo	305	78	136	519	0	580
Gampaha	157	76	73	306	0	341
Kalutara	83	34	33	150	0	158
Kandy	61	33	34	128	0	131
Matale	16	4	6	26	0	27
Nuwara Eliya	27	11	25	63	0	65
Galle	47	20	49	116	0	125
Matara	28	0	10	38	0	38
Hambantota	21	9	9	39	0	40
Jaffna	25	12	14	51	0	59
Vavuniya	6	1	6	13	0	13
Batticaloa	20	10	16	46	0	50
Ampara	10	2	6	18	0	20
Kalmunai	27	4	7	38	0	40
Trincomalee	26	7	8	41	0	47
Kurunegala	57	26	33	116	0	122
Puttalam	25	7	20	52	0	55
Anuradhapura	38	4	20	62	0	65
Polonnaruwa	21	9	10	40	0	40
Badulla	28	11	15	54	0	62
Monaragala	15	4	6	25	0	29
Rathnapura	46	10	30	86	0	87
Kegalle	38	6	25	69	0	73
Mannar	6	1	1	8	0	10
Mulathivu	4	2	2	8	0	8
Kilinochchi	7	0	8	15	0	17
Total	1144	381	602	2127	0	2302

PTB-Pulmonary Tuberculosis EPTB- Extra Pulmonary Tuberculosis 10
SP + ve - Sputum Positive SP - ve - Sputum Negative Data from
Central TB Register Source - National TB Register

Table 14: TB/HIV status

	Number
TB patients screened for HIV in the 4 th quarter	2230
No of patients found to be positive for HIV in the same semester	6
Known positive HIV patients in 4th quarter	3
Total HIV/TB co infection	9

16. SURVEILLANCE AT SEA PORT

Details of the vaccinations carried out by the Assistant Port Health Office during the 4th quarter 2023 is as follows; Table 15

	Total
A. Yellow fever	1435
B. Meningococcal meningitis	274
C. Oral polio	25

17. SURVEILLANCE AT AIRPORT

Surveillance activities carried out at the International Airport, Katunayake during the 4th quarter 2023 is given below.

Table 16:

Emerging and reemerging disease (Ebola/MERS CoV/ SARS.... Etc)	
Ebola	
No. Of passengers screened	0
No. Of suspected cases transferred	0
Zika	
No. Of passengers screened	0
No. Of suspected cases transferred	0
Malaria	
No. of passengers visited to Health office	04
No. of passengers drug issued	0
No. of blood films done (R.D.T.)	04
Referred to I.D.H./Other unit	0
Yellow Fever	
No. of yellow fever cards inspected	397
No. Invalid/without Yellow Fever cards	18
Referred to I.D.H./Other units	0

18. LEPROSY**QUARTERLY RETURN OF LEPROSY STATISTICS - 4TH QUARTER 2023****Table 17****1. National**

	At the end of the quarter			Cumulative for end of the quarter		
	4 th quarter 2023	4 th quarter 2022	Diff (%)	2023	2022	Diff (%)
New patients detected	408	393	+3.81	1520	1401	+8.49
Children	58	43	+34.88	180	155	+16.12
Grade 2 Deformities	29	25	+16.00	91	100	-9.00
Multi-Bacillary	250	226	+10.61	997	870	+14.59
Females	167	145	+15.17	597	538	+10.96

2. Districts

District	New patients	G2-Deformity	Children	MB	Females
Central	14	2	1	8	6
Kandy	7	2	0	2	4
Matale	4	0	1	3	0
NuwaraEliya	3	0	0	3	2
Eastern	61	1	7	34	37
Ampara	6	0	0	4	3
Batticaloa	37	1	5	17	26
Kalmunai	7	0	0	4	4
Trincomalee	11	0	2	9	4
Northern	18	6	3	10	6
Jaffna	9	3	1	6	3
Kilinochchi	0	0	0	0	0
Mannar	2	2	0	1	0
Vavuniya	5	1	1	2	3
Mullaitivu	2	0	1	1	0
North Central	35	2	5	28	12
Anuradhapura	20	0	3	13	6
Pollonnaruwa	15	2	2	15	6
North Western	30	1	5	13	12
Kurunegala	18	0	3	6	7
Puttalam	12	1	2	7	5
Sabaragamuwa	22	1	2	17	12
Kegalle	6	1	0	5	3
Rathnapura	16	0	2	12	9
Southern	52	3	5	35	16
Galle	13	3	1	12	3
Hambanthota	25	0	3	15	6
Matara	14	0	1	8	7
Uva	52	3	5	35	16
Baddulla	13	3	1	12	3
Monaragala	25	0	3	15	6
Western	163	11	28	93	64
Colombo	76	6	17	39	24
CMC	5	1	2	3	2
Gampaha	43	2	5	29	21
Kalutara	39	2	4	23	17
Sri Lanka	408	29	58	250	167

19. SEXUALLY TRANSMITTED DISEASES**Table 18****NEW EPISODES OF STD/HIV/AIDS REPORTED OR TREATED AT STD CLINICS IN SRI LANKA 4th Quarter 2023**

Disease	New cases or new disease episodes during the quarter			Total new cases or new episodes for the calendar year up to end of the quarter#		
	Male	Female	Total	Male	Female	Total
HIV Positives ¹	174	33	207	608	83	691
Early Syphilis ²	145	20	165	423	72	495
Late Syphilis ³	174	68	242	623	265	888
Congenital Syphilis ⁴	2	2	4	6	4	10
Gonorrhoea ⁵	279	55	334	927	201	1128
Ophthalmia Neonatorum ⁶	0	0	0	1	0	1
Non specific cervicitis/urethritis	185	593	778	868	2271	3139
Chlamydial Infection	2	12	14	12	15	27
Genital Herpes	382	435	817	1335	1742	3077
Genital Warts	34	313	347	1079	1110	2189
Pelvic inflammatory disease		27	27		95	95
Trichomoniasis	1	11	12	10	41	51
Candidiasis	359	580	939	1460	2058	3518
Bacterial Vaginosis		352	352		1557	1557
Other sexually transmitted diseases ⁷	128	44	172	467	155	622
Non-venereal ⁸	2095	981	3076	8407	3753	12160

Source: NSACP

* Central STD clinic Colombo and peripheral STD clinics of National STD/AIDS Control Programme of Sri Lanka

** - Includes adjustments for revised diagnosis, reporting delays or any other amendments

1 - Includes AIDS cases

2 - Diagnosed within 2 years of infection and considered to be infectious

3 - Diagnosed after 2 years of infection and considered to be non-infectious

4 - Includes both early and late cases

5 - Includes presumptive Gonorrhoea

6 - Includes both gonococcal and chlamydial conjunctivitis in neonatal period

7 - Includes Lymphogranuloma venerium, Granuloma inguinalae, Molluscum contagiosum, Scabies, Tinea, Hepatitis B etc.

8 - Number of STD clinic attendees who were not having sexually transmitted diseases.

20. BACTERIOLOGY REPORT, MEDICAL RE-SEARCH INSTITUT 4th QUARTER 2023

Table 19: Bacteriological report, MRI 4th Quarter 2023.

		4 th Quarter 2019		
		OCTO	NOVEM	DE-CEMBE R
(A) CHOLERA				
No. of stool specimens Examined		05	01	11
No. of positives El. Tor <i>Cholera</i>		0	0	0
<i>Ogawa</i>		0	0	0
<i>Inaba</i>		0	0	0
<i>Cholera O139</i>		0	0	0
(B) SALMONELLA				
Blood– No. Examined		0	0	0
<i>S.typhi</i>		0	0	0
<i>S.paratyphi</i>		0	0	0
Stools—No. examined		25	33	35
<i>S.typhi</i>		0	0	0
<i>S.paratyphi</i>		0	0	0
Others		02	03	0
(C) SHIGELLA				
No of specimens examined		25	33	35
<i>Sh.flexneri I</i>		0	0	0
<i>Sh.flexneri II</i>		0	0	0
<i>Sh.flexneri III</i>		0	0	0
<i>Sh.flexneri IV</i>		0	0	0
<i>Sh.flexneri V</i>		0	0	0
<i>Sh.flexneri VI</i>		0	0	0
<i>S. sonnei</i>		01	02	01
<i>S.dysenteriae</i>		0	0	0
(D) ENTEROPATHOGENIC				
E.COLI				
No.Examined		03	02	04
No.+ve		02	0	0
(E) CAMPYLOBACTER				
No.Examined		25	33	35
No. Positive		0	01	01
(F) SPECIAL				

21. SURVEILLANCE OF MENINGITIS

Meningitis has been a notifiable disease in Sri Lanka since 2005. During the 4th quarter of 2023, 434 suspected meningitis cases were reported to the Epidemiology Unit through the routine disease notification system.

Out of these 361 cases were clinically confirmed by the Public Health Inspectors during their field investigations. The highest number of meningitis cases were reported from the Kurunegala district (n=75) followed by Putlam (n=42) and Gampaha (n=31) districts.

46.70% (n=99) of the clinically confirmed meningitis cases belonged to the age group less than one year, another 13.68% (n=29) belonged to the age group 1- <5 years, and 14.15% (n=30) belonged to the age group 6 – <15 years. 58.02 % (n= 123)of the clinically confirmed cases were males, and 40.09% (n= 85) were females.

Table 20: Summary findings for special investigations carried out for clinically confirmed cases of Meningitis from 1st October to 31st December 2023

CSF Culture Report		
CSF Culture	Number	(%)
CSF results available	212	
• No Growth	57	26.8
Coliform	0	0
Listerine	1	0.6
Culture results not known	0	0
Not done	2	0.9
Information not available	152	71.7
Total	212	100
Final outcome of the patient		
Outcome	Number	(%)
Cured	178	83.9
Died	9	4.3
Information not available	25	11.8
Total	212	100
Final Diagnosis(based on clinical and lab findings)		
Diagnosis	Number	(%)
Culture confirmed	1	0.47%
Probable bacterial meningitis	27	12.74 %
Probable viral meningitis	27	12.74 %
Suspected Meningitis	148	69.81 %
Total	212	100%

22. INFLUENZA SURVEILLANCE-

4th quarter 2023

Human Influenza surveillance

Surveillance of human influenza is carried out under two main components; Influenza-like illness (ILI) surveillance and Severe Acute Respiratory Infections (SARI) surveillance. As for the ILI surveillance, epidemiological data and respiratory samples are collected from 19 sentinel hospitals throughout the country (GH Ampara, TH Karapitiya, GH Matara, LRH, NIID, NHSL, TH Kalubowila, TH Peradeniya, TH Ratnapura, TH Kurunegala, GH Vavunia, GH Nuwara Eliya, GH Badulla, TH Anuradhapura, GH Polonnaruwa, TH Ragama, GH Chilaw, TH Batticaloa, TH Jaffna). Under SARI surveillance epidemiological data and respiratory samples are collected from four sentinel hospitals (GH Matara, TH Peradeniya, TH Ragama and LRH). These respiratory samples are tested and analyzed at the National Influenza Centre (NIC), and Medical Research Institute (MRI). The Influenza testing facility is also available at TH Kandy, TH Karapitiya, and TH Anuradhapura.

Epidemiological Component

ILI Surveillance

In the 4th quarter of the year 2023, 18 sentinel sites (GH Ampara, TH Karapitiya, GH Matara, LRH, NIID, NHSL, TH Peradeniya, TH Ratnapura, TH Kurunegala, GH Vavuniya, GH Nuwara Eliya, GH Badulla, TH Anuradhapura, GH Polonnaruwa, TH Ragama, GH Chilaw, TH Batticaloa and TH Jaffna) reported ILI data with a reporting rate of 89.5%. A total of 42,671 ILI cases were reported, accounting for 6.3 % of all OPD visits (n=675,140). During the fourth quarter, the highest number of ILI cases were reported from TH Anuradhapura (n=7,574, 17.7%) and most of the patients were in the age group 15 — 49 years (n=15,885, 37.2%). For the 4th quarter, the highest proportion of infant ILI patients (n=880, 54.6%) was reported from TH Anuradhapura.

SARI Surveillance

A total of 1135 SARI cases were reported for the 4th quarter of 2023 from four sentinel hospitals. Out of 30,004 of admissions during the 4th quarter, to the medical and pediatrics wards in the relevant hospitals, 3.8 % were due to SARI. The highest number of SARI cases was reported from GH Matara (n=430, 37.9%).

Laboratory Component

ILI Surveillance

A total of 784 respiratory samples were received at the MRI, TH Kandy, TH Karapitiya and TH Anuradhapura during the 4th quarter of 2023. The months of October, November and December received 131, 277 and 376 samples respectively. 96 samples were positive for influenza A and 38 were positive for Influenza B during the 4th quarter of 2023. Therefore, influenza A was the predominant circulating Influenza viral strain identified.

TABLE 21: TYPES OF INFLUENZA VIRUSES ISOLATED IN ILI SAMPLES FOR THE 4th QUARTER OF THE YEAR 2023

Month	Total tested	Total positives	Influenza A	A (H1N1)	A (H3N2)	Not typed	Influenza B
October	131	8	2	0	1	1	6
November	277	32	22	3	12	7	10
December	376	94	72	12	25	28	22
Total	784	134	96	15	38	36	38

(Source: NIC/MRI), TH Kandy, TH Karapitiya, TH Anuradhapura)

The total positive rate for influenza A was 12.2% and was the predominant strain identified for the 4th quarter of 2023.

Bird Influenza Surveillance

Sri Lanka has been recognized as carrying a high risk for Avian Influenza (AI) making bird influenza surveillance an important component of the influenza surveillance system. This high risk is mainly due to its location in the South East Asian Region. The country's poultry industry with a significant proportion of people engaged in backyard poultry and the commercial level poultry industry adds to this risk. Also, the country being a hotspot for migratory birds, attracting over two hundred species of migratory birds annually in two migratory seasons, is another risk factor that makes bird influenza surveillance necessary. Bird surveillance is conducted by the Department of Animal Production and Health (DAPH) with serum samples collected from poultry farms every month and faecal samples collected from migratory bird hotspots during the two migratory seasons, where fifteen faecal samples are collected from each birding hotspot, pooled in bottles with five samples in each and analyzed at the virology laboratory at Polgolla.

TABLE 22: ANIMAL SAMPLES COLLECTED BY MONTH AND DISTRICT FOR THE 4th QUARTER OF THE YEAR 2023

Month	Pool samples for embryonated chicken egg passage	District samples collected from	Serum Samples for ELISA	District samples collected from
October	1883	Anuradhapura, Batticaloa, Chilaw, Dambulla, Galle, Homagama, Jaffna, Kegalle, Kilinochchi, Mullaitivu, Monaragala, Pannala, Trincomalee, Wariya Ola, Welisara, AQM, AQK	680	Anuradhapura, Batticaloa, Chilaw, Dambulla, Jaffna, Kaluthara, Kegalle, Mullaitivu, Monaragala, Pannala, Trincomalee, Wariyapola, Rathnapura, AQK
November	3576	Ampara, Anuradhapura, Badulla, Batticaloa, Chilaw, Dambulla, Homagama, Kaluthara, Kegalle, Kilinochchi, Mullaitivu, Monaragala, Polonnaruwa, Trincomalee, Vavuniya, Wariyapola, Wel-	664	Ampara, Anuradhapura, Badulla, Batticaloa, Chilaw, Kaluthara, Kegalle, Kilinochchi, Mullaitivu, Monaragala, Polonnaruwa, Trincomalee, Vavuniya, Wariyapola,
December	3423	Chilaw, Dambulla, Homagama, Jaffna, Kundasale, Monaragala, Pannala, Vavuniya, AQK	150	Dambulla, Pannala,
Total	8882		1494	

* VRI Veterinary Research Institute, AQM — Animal Quarantine office Matthala, AQK Animal Quarantine office Katunayaka (**Source: Department of Animal Production and Health**)

All samples were negative for AI virus isolation for the 4th quarter of 2023.

23. Special Reports –**SURVEILLANCE OF CHICKENPOX**

Of the 1608 notified Chickenpox cases, 1463 (90.9%) were confirmed for the 4th quarter of 2023. The highest district reporting was Kalutara (157) followed by Colombo (119), Galle and Kegalle reporting (110) cases each, Ratnapura (105) and Kurunegala (92), December was the highest month reporting (666) in the 4th quarter. According to the case-based investigation, the maximum presentation of cases was 21-40 years of age (46.5%) and male (51.9%). The majority (82.8%) was found as no complications. A secondary Bacterial infection (1) case was found as a complication.

SURVEILLANCE OF MUMPS

Of the 33 notified Mumps cases, 23 (69.6%) were confirmed for the 4th quarter of 2023. The highest district reporting was Gampaha (5), followed by Nuwara Eliya, Trincomalee and Anuradhapura reporting 4 cases each, and Kegalle (3). October (22) was the highest month reporting in the 4th quarter. According to the case-based investigation, the maximum presentation of cases was 11-20 years of age (26.6%) and male (86.6%). The majority (73.3%) was found as no complications.

SURVEILLANCE OF WHOOPING COUGH

Altogether seven patients were notified while only three cases were clinically confirmed as whooping cough-like illness during 2023. Their ages ranged from one month to two years.

No patients were reported during the fourth quarter of 2023

Surveillance of Leishmaniasis

Of 2537 notified Leishmaniasis cases, 1007 (39.7%) were confirmed for the 4th quarter of 2023. The highest district reporting was Anuradhapura (291) followed by Kurunegala (164) Matale (101) Hambantota (92) Matara (52). October was the highest month reporting (361) in the 4th quarter.

Table 23

24. SUMMARY OF NOTIFIABLE DISEASES - 4TH QUARTER 2023

RDHS	Dengue Fever	Dysentery	Enteric Fever	Enteric Fever	Food Poisoning	Lep-tospirosis	Typhus Fever	Viral Hepatitis	Human Rabies	Chicken pox	Measles	Mumps	Mumps	Mumps	Tetanus	Whooping Cough	Tuberculosis	Simple cold Fever
Colombo	4	7	2	0	0	114	93	0	0	0	1	0	346	502	119	0	19	1
Gampaha	3	5	6	25	0	156	48	0	0	3	5	0	181	233	91	5	31	5
Kalutara	11	3	0	4	0	204	23	0	0	0	0	0	727	105	168	0	31	3
Kandy	11	1	3	6	0	69	20	0	0	16	3	0	278	92	103	2	8	13
Matale	1	0	0	10	0	32	6	0	0	0	3	0	726	32	28	1	4	91
Nuwaraeliya	37	2	0	3	0	78	17	1	0	13	1	0	186	55	73	5	11	0
Galle	15	2	1	20	0	240	18	0	0	14	0	0	121	114	110	2	15	0
Hambantota	7	1	0	1	0	165	8	0	0	6	0	0	300	31	35	0	3	151
Matara	6	2	0	53	0	103	4	0	0	2	2	0	360	50	69	1	6	41
Jaffna	79	0	8	21	0	11	28	9	0	276	3	0	283	66	63	1	8	1
Kilinochchi	18	0	0	3	0	5	0	2	0	3	1	0	78	17	0	0	0	0
Mannar	6	0	0	0	0	5	0	0	0	5	0	0	89	10	1	0	3	0
Vavuniya	5	0	0	9	0	29	0	0	0	2	1	0	78	13	14	1	5	3
Mullativu	6	0	1	0	0	19	0	0	0	1	0	0	67	7	2	1	1	1
Batticaloa	69	4	0	10	2	43	1	0	0	1	3	0	595	52	71	1	21	0
Ampara	12	0	0	17	0	74	1	0	0	0	1	0	73	15	33	3	24	5
Trincomalee	10	1	1	2	0	50	1	0	0	0	2	0	177	42	27	4	7	4
Kurunegala	33	3	1	2	1	234	15	1	0	4	5	0	124	95	92	1	75	153
puttalam	20	2	1	0	0	70	4	1	0	2	0	0	751	33	41	2	42	8
Anuradhapura	8	1	0	4	0	131	12	0	0	9	2	0	205	31	44	4	13	225
Pol-onnaruwa	14	0	6	0	0	111	4	0	0	4	3	0	144	31	30	3	2	85
Badulla	11	2	0	1	0	92	2	0	0	19	16	0	106	54	81	0	21	7
Monaragala	6	0	0	0	0	186	1	0	0	7	13	0	247	25	18	1	27	37
Ratnapura	34	5	0	32	0	410	11	0	0	7	5	0	643	86	105	2	23	62
Kegalle	10	1	0	8	0	207	8	0	0	5	0	0	782	64	110	3	26	13
Kalmunai	10	4	0	4	0	14	2	0	0	1	4	0	166	30	80	0	12	0
ALI Island Total	446	46	3	235	3	285	327	14	0	400	74	0	208	188	1608	43	43	909
			0	0		2							30	5			8	

No polio cases. (from AFP surveillance system).

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