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WEEKLY EPIDEMIOLOGICAL REPORT

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Ministry of Health

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Road Traffic Accidents in Sri Lanka

This is the 2nd article of three in a series on "RTA in Sri Lanka"

Transport related Injuries in Sri Lanka

A wealth of data can be acquired in regard to transport injuries via the Acute NCD report published by the Non-Communicable Disease unit of the Ministry of Health in 2018.

In 2018, information on 37500 Transport Injuries (TI) victims admitted for inward care of government hospitals was reported through the National Injury Surveillance System. According to the report published in 2018, one of the leading mechanisms of injury among inpatients, was transport injuries (17.7%). Of all the places where injuries occurred, 28.6% were commonly seen in streets/ road/highways, with most injuries occurring while travelling (25%). Of all transport accidents, 99.1% occurred on street/road/highways while 0.9% occurred in transport areas such as water and air.

Transport related injuries were commonly seen among adolescents, youth and young adults, with 76% of victims being males (male: female ratio was 3:1). However, transport injury related deaths were common among children <5 years, youth aged between 21-25 years and adults between 66-70 years of age.

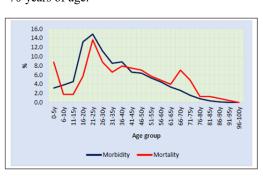


Figure 2: Morbidity & mortality pattern due to TI acc. to age group by % (Acute NCD report 2018)

Of transport related injuries, almost 98% were unintentional. Most affected body region from transport injuries, were the lower limbs (32.2%), followed by upper limbs (25.6%), head (17.6%) and face (9.0%).



Figure 3: Common body region affected due to TI (Acute NCD report, 2018)

Nature of injuries arising from transport related injuries included mostly superficial injuries (55.5%), followed by open wounds (19.1%) and fractures (15.4%).

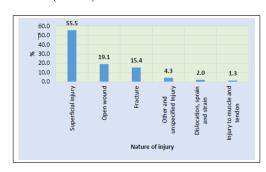


Figure 4: Common nature of TI by % (Acute NCD report, 2018)

It was also seen that around 6.5% & 1.7% of transport injuries were associated with alcohol use & substance use respectively. 80% of alcohol related TI occur from 12 noon to 12 midnight. Of this, most occur (43%) from 6pm - 12 midnight.

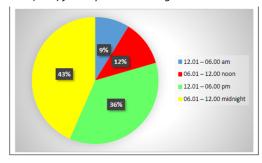


Figure 5: Association of alcohol with TI according to time of occurrence of TI (Acute NCD report, 2018)

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Over 87% of transport injuries were associated with some form of disability. Most transport injuries tended to occur on Sundays while majority (68%) occurred during the day time from 6am to 6pm.

The National Council for Road Safety by the Ministry of Transport & Highways also lists out updated statistics pertaining to road accidents. Over the course of four years (2019-2022), there was a slight but steady decline in deaths, fatal, minor & critical accidents, and damages (only) associated with road accidents.

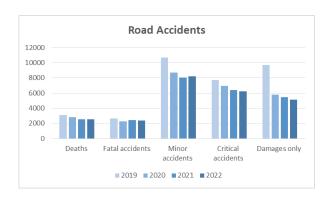


Figure 6: Data taken from National Council for Road Safety, Ministry of Transport & Highways

However, when considering the number of persons killed in road accidents in 2022, majority included motor cyclists (n=820) & pedestrians (n=792), followed by passengers (n=314).

Number of Persons killed in Road Accidents												
Pedestrians	792											
Motor Cyclist	820											
Drivers	189											
Passengers	314											
Bicyclists	226											
Rear Riders	189											
Others	06											

Figure 7: Data taken from National Council for Road Safety, Ministry of Transport & Highways

The highest number of a vehicular type involved in road accidents includes motorcycles with them also contributing to the highest number of fatal injuries in comparison to other vehicles (e.g. lorries, buses, dual purpose vehicles, three wheelers, motor cars etc).

According to the Police Department of Sri Lanka, several causes of RTAs were elucidated. According to the study by Kodithuwakku et al (2022), these causes were classified into seven variables: overtaking, speed driving, diversion, alcohol consumption of driver, mechanical faults of vehicle, negli-

gence of pedestrians and others. Of these, overtaking (16.5%), diversion (14.5%), speed driving (13.3%) & alcohol consumption of the driver (4.5%) were prominently noted, while 'others' were totaling 48%; considering data from 2002-2019. Thus, Road Traffic Accidents (RTAs) are subject to the influence of several factors.

Compiled by:

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Page 2. to be continued.....

Table 1: Selected notifiable diseases reported by Medical Officers of Health 03rd-09th Feb 2024 (06th Week)

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Encephali	В	0	0	0	0	0	0	-	0	0	<u></u>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	
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	4	2555	992	612	1070	203	118	929	242	195	3709	190	151	95	138	624	99	235	992	445	213	92	397	219	451	562	339	15332	
Dengue Fever	В																					6							
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RDHS		Colombo	Gampaha	Kalutara	Kandy	Matale	Nuwara Eliya	Galle	Hambantota	Matara	Jaffna	Kilinochchi	Mannar	Vavuniya	Mullaitivu	Batticaloa	Ampara	Trincomalee	Kurunegala	Puttalam	Anuradhapura	Polonnaruwa	Badulla	Monaragala	Ratnapura	Kegalle	Kalmunai	SRILANKA	

Source: Weekly Returns of Communicable Diseases (esurvillance.epid.gov.ik). T=Timeliness refers to returns received on or before 09th Feb, 2024 Total number of reporting units 358 Number of reporting units data provided for the current week. B = Cumulative cases for the year.

Table 2: Vaccine-Preventable Diseases & AFP

03rd-09th Feb 2024 (06th Week)

Disease	No.	of C	ases	by P	rovin	ice		Number of cases during current	Number of cases during same	Total number of cases to date in	Total num- ber of cases to date in	Difference between the number of cases to date		
	W	С	S	N	Е	NW	NC	U	Sab	week in 2024	week in 2023	2024	2023	in 2024 & 2023
AFP*	00	01	01	00	00	00	00	00	00	02	01	10	10	0 %
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0 %
Mumps	01	02	02	00	00	00	01	02	00	08	04	30	18	66.6 %
Measles	04	00	02	00	00	00	01	00	00	07	00	109	00	0 %
Rubella	00	00	00	00	00	00	00	00	00	00	00	01	00	0 %
CRS**	00	00	00	00	00	00	00	00	00	00	00	00	00	0 %
Tetanus	00	00	00	00	00	00	00	00	00	00	00	00	01	-100 %
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	00	00	00	0 %
Whooping Cough	00	00	00	00	00	00	00	00	01	01	00	01	01	0 %
Tuberculosis	89	36	13	12	04	12	09	07	17	199	105	1049	897	16.9%

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

Take prophylaxis medications for leptospirosis during the paddy cultivation and harvesting seasons.

It is provided free by the MOH office / Public Health Inspectors.

Comments and contributions for publication in the WER Sri Lanka are welcome. However, the editor reserves the right to accept or reject items for publication. All correspondence should be mailed to The Editor, WER Sri Lanka, Epidemiological Unit, P.O. Box 1567, Colombo or sent by E-mail to chepid@sltnet.lk. Prior approval should be obtained from the Epidemiology Unit before publishing data in this publication

ON STATE SERVICE

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