

WEEKLY EPIDEMIOLOGICAL REPORT

A publication of the Epidemiology Unit Ministry of Health

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Screening Guidelines for Chronic Kidney Disease in Sri Lanka - III

This is the last in a series of three articles on Screening Guidelines for Chronic Kidney Disease in Sri Lanka.

Monitoring and Evaluation

The programme would be continuously monitored and evaluated quarterly at district, provincial and national level.

The Regional Directors and the Provincial Directors should continuously monitor the implementation of the screening programme in the respective districts and provinces. At district level, monthly evaluation needs to be conducted before the 10th of the subsequent month and the evaluation report should be submitted to the office of the PDHS and the Chief Epidemiologist.

Quarterly review would be conducted at the Epidemiology Unit with the participation of PDHSS, RDHSS, REE, and MOO-CKD at the end of each quarter.

District level Indicator and targets

- Total number screened during the month
- Proportion of Screening Clinics conducted

Number of clinics conducted

Number planned for the same period × 100 = target 100%

Percent coverage of screening at field clinics

Number screened at field clinic Number planned × 100 = target 100%

Percent positive

 $\frac{Number\ positive}{Number\ screened} \times 100 = target\ 100\%$

- Number screened at the central clinic
- Percent screened at central clinic

Number screened	v 100 =	target 100%
Number planned for the same period	× 100 –	iui yei 100%

In addition, at district reviews, attention must be paid to any failures in conducting the total planned number of clinics for each month. Indepth fact finding analysis needs to be done as to the cause for failing to carry out the planned number of clinics. Remedial actions need to be identified to prevent further failures of similar nature.

Further, analysis needs to done to investigate into any other reasons for the gap between the target and the reported percent coverage of screening.

National level Indicators

- Total number screened
- Percent coverage
- Percent positive

National level indicators will be analyzed at quarterly reviews. In addition, the programmatic issues will be looked into.

Data Analysis and dissemination of information

Data will be compiled and analyzed at the Epidemiology Unit together with the statistics generated by the Sentinel Surveillance and information will be published in the Quarterly Epidemiological Bulletin.

List of Contributors

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Screening Guidelines

Chronic Kidney Disease Sri Lanka



Epidemiology Unit Ministry of Health



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Sources

 Screening Guidelines for Chronic Kidney Disease in Sri Lanka published by the Epidemiology Unit, Ministry of Health

Compiled by Dr. H. A. Shanika Rasanjalee of the Epidemiology Unit

Invasive Bacterial Disease surveillance in Sentinel Sites-1st & 2nd Quarters- 2014

No. of suspected meningitis cases	30					
No. of probable meningitis cases	8					
Percentage (%) of CSF samples tested positive for organisms	26.6%					
No. of children who met the pneumonia case definition	134					
Percentage (%) of Pneumonia cases with positive blood cultures	0%					
No. of sepsis cases	24					
Percentage (%) of Sepsis cases with positive blood cultures	0					
Source-LRH, Epidemiology Unit						

Rota virus surveillance in Sentinel Sites – 1st & 2nd Quarters- 2014

Number of acute diarrhoea hospitalizations in children <5 years	721
Number of stool specimen collected	246
Number of stool specimen tested positive for rotavirus	70
Percentage (%) of stool specimen tested positive for rotavirus	28.4%

Source-MRI, Epidemiology Unit

Table 1: Water Quality Surveillance Number of microbiological water samples - July/ 2014

District	MOH areas	No: Expected *	No: Received
Colombo	12	72	NR
Gampaha	15	90	NR
Kalutara	12	72	18
Kalutara NIHS	2	12	30
Kandy	23	138	NR
Matale	12	72	32
Nuwara Eliya	13	78	37
Galle	19	114	129
Matara	17	102	10
Hambantota	12	72	18
Jaffna	11	66	0
Kilinochchi	4	24	8
Manner	5	30	0
Vavuniya	4	24	16
Mullatvu	4	24	0
Batticaloa	14	84	0
Ampara	7	42	NR
Trincomalee	11	66	2
Kurunegala	23	138	109
Puttalam	9	54	43
Anuradhapura	19	114	18
Polonnaruwa	7	42	13
Badulla	15	90	39
Moneragala	11	66	112
Rathnapura	18	108	85
Kegalle	11	66	25
Kalmunai	13	78	0
* No of samples ex	nected (6 / MOI	Harea / Month)	

* No of samples expected (6 / MOH area / Month) NR = Return not received Table 1: Selected notifiable diseases reported by Medical Officers of Health 09th - 15th Aug 2014 (33rd Week)

Table	1.	SCI	ecte	u ne	JUIII	abit	; ui	seas	562	rep	Orte	a n	y ivi	eui	cai	OIII	Cer	5 01	пес	altri		09 ^{tr}	1 - 1:	o ^{tn} A	ug	ZU 1	4 (3	ال	. ۷۷
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Viral Hepatitis	ω	30	160	6	98	110	24	2	11	56	8	0	н	4	0	7	4	7	33	С	6	2	105	91	296	66	0	1140	
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Typhus Fever	Ф	П	6	2	29	7	52	99	53	36	265	17	23	72	11	2	12	15	37	20	27	2	70	121	73	45	0	1028	
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Dysentery	8	91	102	120	71	45	186	78	33	71	306	89	29	56	4	192	45	31	92	20	95	29	8	40	177	82	98	2286	seases (V
٥	⋖	4	7	Ж	4	7	Н	0	0	7	∞	0	0		П	7	т	7	3	0	0	П	4	7	4	2	7	28	able Di
Dengue Fever	ω	9418	4579	1850	975	307	200	269	436	354	749	45	43	86	78	637	115	480	1297	455	379	374	425	185	2163	1139	109	27585	f Communic.
Deng	∢	184	29	38	20	7	11	0	14	17	28	0	0	н	1	2	4	7	20	2	2	9	22	7	59	20	0	650	teturns of
RDHS Division		Colombo	Gampaha	Kalutara	Kandy	Matale	NuwaraEliya	Galle	Hambantota	Matara	Jaffna	Kilinochchi	Mannar	Vavuniya	Mullaitivu	Batticaloa	Ampara	Trincomalee	Kurunegala	Puttalam	Anuradhapura	Polonnaruwa	Badulla	Monaragala	Ratnapura	Kegalle	Kalmune	SRILANKA	Source: Weekly Returns of Communicable Diseases (WRCD).

Source: Weekly Returns of Communicable Diseases (WRCD).

-T=Timeliness refers to returns received on or before 15ⁿ August, 2014 Total number of reporting units 337 Number of reporting units data provided for the current week: 275 G**-Completeness A = Cases reported during the current week. B = Cumulative cases for the year.

Table 2: Vaccine-Preventable Diseases & AFP

09th - 15th Aug 2014 (33rd Week)

Disease			N	lo. of Cas	ses by P	rovince	ı	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	E	NW	NC	U	Sab	week in 2014	week in 2013	2014	2013	in 2013& 2014	
AFP*	00	01	02	00	00	00	00	00	00	03	04	56	57	-1.7%	
Diphtheria	00	00	00	00	00	00	00	00	00	00	-	00	-	%	
Mumps	00	00	00	01	01	05	01	00	01	09	27	477	1059	-55.0%	
Measles	19	03	19	02	00	05	02	02	03	55	141	2433	2144	+13.5%	
Rubella	00	00	00	00	00	00	00	00	00	00	00	14	21	-33.3%	
CRS**	00	00	00	00	00	00	00	00	00	00	00	04	06	-33.3%	
Tetanus	00	00	00	00	00	00	00	00	00	00	01	10	13	-68.7%	
Neonatal Teta- nus	00	00	00	00	00	00	00	00	00	00	00	00	00	0%	
Japanese En- cephalitis	01	00	00	00	00	00	00	00	00	01	00	20	64	-68.7%	
Whooping Cough	00	00	00	00	01	00	00	00	00	01	10	34	57	-40.3%	
Tuberculosis	67	32	07	03	10	04	10	03	29	165	341	6138	5547	+10.6%	

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

AFP and all clinically confirmed Vaccine Preventable Diseases except Tuberculosis and Mumps should be investigated by the MOH

Influenza Surveillance in Sentinel Hospitals - ILI & SARI												
NA II-	Human			Animal								
Month	No Received	ILI	SARI	Infl A	Infl B	Pooled samples	Serum Samples	Positives				
July	4186	62	43	18	0	583	505	0				

Source: Medical Research Institute & Veterinary Research Institute

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