



# WEEKLY EPIDEMIOLOGICAL REPORT

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

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## World Immunization Week

At the 65<sup>th</sup> World Health assembly held in 2012 ministers of health from 194 countries endorsed the Global Vaccine Action Plan (GVAP) to achieve the "Decade of Vaccines" 2011 to 2020. The GVAP roadmap was to prevent millions of deaths by 2020 through more equitable access to vaccines for people in all communities regardless of where they are born, who they are or where they live. The vision was to deliver universal access to immunization.

The GVAP reiterates existing goals, sets new goals for the decade, and proposes strategic objectives and the actions that support their achievement. The GVAP planned to avert between 24.6 to 25.8 million deaths by the end of the decade, billions of dollars in productivity to be gained, and immunization will greatly contribute to achieving the Millennium Development Goal 4 target to reduce by two-thirds the under-five mortality rate.

The health assembly also designated the last week of April as the World Immunization Week. World Immunization Week aims to highlight the collective action needed to ensure that every person is protected from vaccine-preventable diseases.

opportunity to underscore the importance of immunization in saving lives and to encourage families to vaccinate their children against deadly diseases. It was under the theme "Immunization saves lives".

Through its convening power, WHO worked with countries across the globe to raise awareness of the value of vaccines and immunization and ensures that governments obtain the necessary guidance and technical support to implement high quality immunization programmes.

This worldwide collaboration provides an opportunity to boost momentum and focus on specific actions such as:

- raising awareness on how immunization saves lives;
- increasing vaccination coverage to prevent vaccine preventable disease outbreaks;
- reaching underserved and marginalized communities — particularly those living in remote areas, deprived urban settings, fragile states and strife-torn regions — with existing and newly available vaccines; and
- reinforcing the medium- and long-term benefits of immunization, giving children a chance to grow up healthy, attend school and improve their life prospects.



### First World Immunization Week

The first World Immunization Week took places from 21-28 April 2012. This was an

Post this each World Immunization Week which was held, was focused on a theme. The themes have included the following  
2013: "Protect your world – get vaccinated"  
2014: "Are you up-to-date?"  
2015-2016: "Close the immunization gap"  
2017: "Vaccines Work"

Contents	Page
1. Leading Article – World Immunization Week	1
2. Summary of selected notifiable diseases reported (20 <sup>th</sup> – 26 <sup>th</sup> April 2019)	3
3. Surveillance of vaccine preventable diseases & AFP (20 <sup>th</sup> – 26 <sup>th</sup> April 2019)	4

WEB SRI LANKA 2019

2018: "Protected Together"

### World Immunization Week 2019

World Immunization Week celebrated in the last week of April from 24 to 30 April 2019 aims to promote the use of vaccines to protect people of all ages against disease. The theme this year is *Protected Together: Vaccines Work!*, and the campaign will celebrate *Vaccine Heroes* from around the world – from parents and community members to health workers and innovators – who help ensure we are all protected through the power of vaccines.

### Vast progress

In 2017, the number of children immunized was 116.2 million which was the highest ever reported. Since 2010, 113 countries have introduced new vaccines, and more than 20 million additional children have been vaccinated.

Despite gains, all of the targets for disease elimination including measles, rubella, and maternal and neonatal tetanus are behind schedule globally. However Sri Lanka has been certified polio free state in 2014 and Maternal and Neonatal tetanus (MNT) free state in 2016. Country is planning to eliminate Measles and Rubella/CRS (Congenital Rubella Syndrome) and achieve the elimination states by 2020.

Over the last two years the world has seen multiple outbreaks of measles, diphtheria, whooping cough and various other vaccine-preventable diseases. Most of the children missing out are those living in the poorest, marginalized and conflict-affected communities.

In order for everyone, everywhere to survive and thrive, countries must intensify efforts to ensure all people receive the life saving benefits of vaccines. Additionally, those countries that have achieved or made progress towards the goals must work to sustain the progress they have made.

### 2019 campaign objectives : “*Protected Together: Vaccines Work!*”

The main goal of the campaign is to raise awareness about the critical importance of full immunization throughout life

As part of the 2019 campaign, WHO and partners aim to:

- Highlight the need to build on immunization progress while addressing gaps and through increased investment.
- Show how routine immunization is the foundation for strong, resilient health systems and universal health coverage.

### Immunization matters

Expanding access to immunization is vital for achieving the Sustainable Development Goals, poverty reduction and universal health coverage. Routine immunization provides a point of contact for health care at the beginning of life and offers every child the chance for a healthy life from the earliest beginnings to old age.

Immunization is also a fundamental strategy in achieving other health priorities, from controlling viral hepatitis, to curbing antimicrobial resistance, and providing a platform for adolescent health and improving antenatal and newborn care.

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### Sources

**World Health Organization -World Immunization Week 2019** <https://www.who.int/news-room/events/detail/2019/04/24/default-calendar/world-immunization-week-2019>

**World Health Organization - World Immunization Week** <https://www.who.int/westernpacific/news/events/world-immunization-week>

**World Health Organization - World Immunization Week 2012** [https://www.who.int/immunization/newsroom/events/immunization\\_week/2012/further\\_information/en/](https://www.who.int/immunization/newsroom/events/immunization_week/2012/further_information/en/)

Table 1: Selected notifiable diseases reported by Medical Officers of Health 20<sup>th</sup> - 26<sup>th</sup> April 2019 (17<sup>th</sup> 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	178	3411	0	14	0	2	0	5	0	22	5	61	0	7	0	4	0	0	9	184	1	20	0	2	48	100	
Gampaha	114	2053	0	8	0	1	0	3	1	15	3	38	0	2	0	1	1	1	11	133	0	8	0	28	55	94	
Kalutara	70	994	1	29	0	3	0	6	0	28	11	198	0	3	0	2	0	0	9	277	5	46	0	3	61	93	
Kandy	61	940	1	24	0	5	0	1	1	9	3	26	2	32	0	2	0	1	6	99	2	21	0	12	64	100	
Matale	3	190	0	11	0	2	0	0	0	1	1	22	0	4	0	3	0	1	4	34	0	3	1	102	53	100	
NuwaraEliya	2	62	2	20	0	1	0	2	0	0	0	13	2	29	0	4	0	0	8	27	0	17	0	0	25	100	
Galle	50	535	1	26	0	4	1	2	0	1	8	116	0	18	1	3	0	0	9	172	1	26	1	2	63	97	
Hambantota	42	392	0	3	0	0	0	0	0	5	5	37	1	59	0	1	0	0	12	143	1	15	15	268	71	100	
Matarra	38	559	0	4	0	4	0	1	1	3	9	100	0	15	1	9	0	0	4	124	0	4	10	208	59	100	
Jaffna	44	1783	9	62	0	5	1	8	8	11	0	21	3	250	0	2	0	0	4	119	0	6	0	0	24	93	
Kilinochchi	2	83	0	7	0	1	0	9	0	0	0	16	0	20	0	1	0	0	0	3	0	2	3	7	46	99	
Mannar	4	65	0	2	0	1	0	7	0	1	0	0	0	6	0	0	0	0	0	0	0	0	0	1	46	93	
Vavuniya	7	158	0	6	0	4	0	15	0	3	2	36	0	4	0	0	0	0	1	41	0	8	0	1	50	100	
Mullaitivu	0	87	0	6	0	0	0	4	0	1	0	11	0	6	0	0	0	0	0	0	0	0	2	0	1	36	71
Batticaloa	25	721	5	42	0	0	1	10	0	2	1	17	0	1	0	0	0	1	14	91	2	5	0	0	53	98	
Ampara	5	91	0	11	0	0	0	0	0	4	1	16	0	1	0	6	0	0	4	62	0	3	0	4	54	98	
Trincomalee	13	493	0	5	0	0	0	0	0	4	0	3	0	3	0	1	0	0	4	87	0	4	0	1	36	83	
Kurunegala	25	624	0	23	0	5	1	4	1	5	2	78	0	10	0	13	0	0	19	277	2	24	10	311	58	99	
Puttalam	6	220	1	12	0	2	0	1	1	1	1	13	0	8	0	1	0	0	7	80	0	17	0	5	63	100	
Anuradhapura	7	195	1	10	0	5	0	3	1	2	2	76	0	22	0	12	0	1	13	238	5	40	20	202	42	96	
Polonnaruwa	6	100	0	7	0	1	0	1	0	0	1	32	0	3	0	7	0	0	14	139	0	11	4	88	59	99	
Badulla	15	265	4	20	0	2	0	4	0	55	6	79	4	45	0	11	0	0	5	99	8	68	0	9	64	100	
Monaragala	21	186	1	24	1	3	0	0	0	73	11	128	5	49	0	31	0	0	23	117	6	64	0	9	63	100	
Ratnapura	75	719	3	35	0	19	0	6	1	9	24	248	2	14	0	10	0	3	6	166	6	61	1	56	44	99	
Kegalle	48	445	2	16	1	11	0	0	0	20	4	59	0	20	2	66	0	0	15	198	0	13	0	13	63	99	
Kalmune	9	377	0	20	0	0	0	1	0	3	0	17	0	1	0	1	0	0	6	90	1	8	0	0	63	98	
<b>SRILANKA</b>	<b>870</b>	<b>15748</b>	<b>31</b>	<b>447</b>	<b>2</b>	<b>81</b>	<b>4</b>	<b>93</b>	<b>15</b>	<b>278</b>	<b>10</b>	<b>1461</b>	<b>19</b>	<b>632</b>	<b>4</b>	<b>191</b>	<b>1</b>	<b>8</b>	<b>207</b>	<b>3000</b>	<b>40</b>	<b>496</b>	<b>66</b>	<b>1333</b>	<b>54</b>	<b>97</b>	

Source: Weekly Returns of Communicable Diseases (WRCD).

\*T=Timeliness refers to returns received on or before 26<sup>th</sup> April, 2019 Total number of reporting units 353 Number of reporting units data provided for the current week: 311 C\*\*\_Completeness  
A = Cases reported during the current week. B = Cumulative cases for the year.

**Table 2: Vaccine-Preventable Diseases & AFP**

20<sup>th</sup> – 26<sup>th</sup> April 2019 (17<sup>th</sup> Week)

Disease	No. of Cases by Province									Number of cases during current week in 2019	Number of cases during same week in 2018	Total number of cases to date in 2019	Total number of cases to date in 2018	Difference between the number of cases to date in 2019 & 2018
	W	C	S	N	E	NW	NC	U	Sab					
AFP*	01	00	00	00	00	00	00	00	00	01	01	31	18	72.2%
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0 %
Mumps	01	01	01	00	02	00	00	00	00	05	01	125	123	1.6 %
Measles	03	02	00	00	00	01	00	00	00	06	01	73	48	52.0 %
Rubella	00	00	00	00	00	00	00	00	00	00	00	00	04	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	01	06	10	- 40 %
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	08	14	- 42.8%
Whooping Cough	00	00	01	00	00	00	00	00	00	01	00	26	15	73.3 %
Tuberculosis	119	18	00	00	00	09	00	00	14	164	258	2685	2521	6.5 %

**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

**Number of Malaria Cases Reported During the Month of April 2019,**

**03**

**All are Imported!!!**

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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](mailto: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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