



WEEKLY EPIDEMIOLOGICAL REPORT

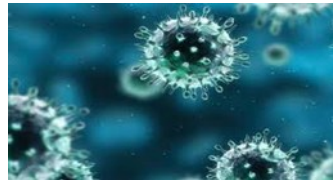
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Ministry of Health, Nutrition & Indigenous Medicine

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Middle East respiratory syndrome corona virus (MERS-CoV)



Fourteen (14) cases of MERS – Cov infection including three deaths have been reported from Saudi Arabia. These cases have been reported in different provinces in January 2019. From 2012 through to 31 January 2019, the total number of laboratory-confirmed MERS-CoV cases reported globally to WHO under IHR (2005) is 2, 298 with 811 associated deaths. Hence, it is still an activated infection which may cause the risk of getting the infection to Sri Lanka, due to trade, tourism and pilgrimage activities.

Background:

The 1st case of a novel coronavirus (MERS-CoV) was identified in a patient with acute pneumonia & renal failure in the Kingdom of Saudi Arabia on June 2012. The total number of lab-confirmed MERS-CoV cases to date in Saudi Arabia is 205, including 71 deaths (CFR 35%).

The countries affected during outbreak period were Middle East (Jordan, Kuwait, Oman, Qatar, and Saudi Arabia), United

Arab Emirates, France, Germany, Greece, Italy, United Kingdom, United State and North Africa. Malaysia has reported the 1st victim in Asia for MERS-CoV (Middle East Respiratory Syndrome-Corona virus).

MERS-CoV infection:



It is a viral (Coronavirus) infection which is suspected as a zoonotic disease. Coronaviruses are a large family of viruses that can cause diseases ranging from the common cold to Severe Acute Respiratory Syndrome (SARS).

Its signs and symptoms are fever, cough and shortness of breath. Some may be having gastrointestinal symptoms such as nausea, vomiting and diarrhoea. Complication leads to pneumonia and kidney failure. Some show mild symptoms (like cold) or no symptoms at all. People having pre-existing medical conditions show severe infection. An incubation period is the time between when a person comes in contact with a

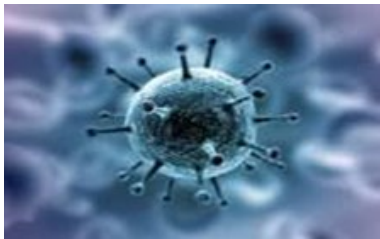
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germ and when they start to have symptoms. Based on information available to date, the incubation period for MERS is usually about 5 or 6 days but can range from 2 to 14 days.

Transmission:



MERS-CoV transmission is identified as a human to human transmission in a health care setting, but some scientific evidence suggests that dromedary camels are a major reservoir host for MERS-CoV and an animal source of MERS infection in humans. It is a debatable fact and the exact role of dromedaries in the transmission of the virus and the exact route(s) of transmission are unknown.

MERS-CoV, like other coronaviruses, likely spreads from an infected person's respiratory secretions, through coughing. MERS-CoV has spread from ill people to others through close contacts, such as caring for or living with an infected person. Infected people have spread MERS-CoV to others in healthcare settings, such as hospitals.

Prevention and Treatment:

Currently, there is no vaccine to prevent MERS-CoV infection. Basic sanitary practices should be strengthened. Hand washing with soap and water for 20 seconds, and help young children to do the same. If soap and water are not available, alcohol-based hand sanitizer can be used. Avoid touching eyes, nose and mouth with unwashed hands. Avoid personal contact, such as kissing, or sharing cups or eating utensils, with sick people. Clean and disinfect frequently touched surfaces

and objects, such as doorknobs.

There is no specific Antiviral treatment against this infection. Hence, treatment is symptomatic. If there is a suspected case that needs to get admitted to a hospital.

Precaution for travellers expecting to visit Middle East countries:

- Avoid overcrowded places as much as possible
- Cover coughs and sneezes (Using a handkerchief/tissue/ your elbow) and discard the tissues safely/ wash handkerchief when dirty
- Wash hands frequently with soap and water
- Eat well-cooked food
- Wash well if eating raw vegetables and fruits
- Avoid unnecessary contact with the farm, domestic and wild animals
- If a person is suffering from a chronic disease (Diabetes, Kidney, or Lung disease etc..) seek proper medical attention to control the disease before setting off on Middle East pilgrimage or employment

Compiled by

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Table 1: Selected notifiable diseases reported by Medical Officers of Health 27th - 02nd Aug 2019 (31st 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	401	7661	1	34	1	8	0	14	13	47	5	138	0	8	0	6	0	0	16	319	2	34	0	3	48	100
Gampaha	318	5590	0	25	0	5	0	3	0	25	1	65	0	3	0	6	0	1	8	294	0	15	0	123	51	98
Kalutara	196	3224	0	51	0	6	0	14	2	54	10	346	0	4	0	4	0	1	11	463	2	74	0	3	62	88
Kandy	154	2194	3	72	0	10	0	3	1	14	0	47	1	66	0	3	1	2	9	185	1	45	2	34	63	100
Matale	16	350	0	18	0	3	0	0	1	6	1	38	0	5	1	6	0	2	1	63	0	4	7	154	57	99
NuwaraEliya	7	143	1	89	0	2	1	7	0	2	0	35	0	54	0	7	0	0	3	86	1	29	0	0	26	100
Galle	246	3819	2	32	0	7	0	3	0	5	16	274	0	30	0	36	0	0	9	300	1	34	0	2	61	99
Hambantota	53	950	0	9	0	3	0	1	0	5	4	79	2	84	0	3	0	1	1	227	1	27	11	552	74	100
Matara	223	1786	2	15	0	4	0	2	0	13	7	247	1	26	0	16	0	0	7	205	1	12	14	361	59	100
Jaffna	20	2075	4	147	0	13	0	20	1	44	0	23	1	263	0	4	0	0	2	219	0	15	0	0	24	93
Kilinochchi	2	118	1	15	0	1	0	9	0	0	0	18	1	25	0	1	0	0	0	6	0	7	0	9	48	100
Mannar	2	78	0	3	0	1	0	8	0	1	0	1	0	8	0	0	0	0	0	0	0	1	0	1	56	100
Vavuniya	4	204	1	15	0	10	0	23	0	11	1	48	0	4	0	0	0	0	1	63	0	9	0	1	58	97
Mullaitivu	0	107	0	6	0	0	1	10	0	2	2	20	0	6	0	0	0	0	0	5	0	6	0	4	30	88
Batticaloa	19	1010	9	91	0	2	0	12	3	22	2	41	0	1	0	0	0	1	3	194	0	21	0	0	51	100
Ampara	3	156	2	49	0	2	0	0	0	8	2	31	0	1	0	10	0	0	18	202	0	7	0	4	58	100
Trincmalee	15	900	1	11	0	0	0	0	0	55	0	10	0	18	0	3	0	1	0	185	0	6	0	1	29	100
Kurunegala	47	1190	1	52	2	15	0	6	0	30	0	116	0	14	0	20	0	2	6	442	3	70	8	527	59	100
Puttalam	32	514	0	20	0	2	0	1	0	6	0	29	1	10	0	1	0	0	0	113	3	39	1	8	61	100
Anuradhapura	12	390	1	34	1	8	0	4	0	7	1	94	0	31	0	19	0	2	5	394	2	63	13	351	41	100
Polonnaruwa	9	225	4	21	0	2	0	1	0	1	2	59	0	4	0	16	0	2	3	234	0	14	8	193	61	100
Badulla	36	543	1	52	0	5	1	8	0	73	4	142	4	86	0	13	0	0	7	212	3	136	1	12	64	100
Monaragala	11	333	1	36	0	4	0	0	1	79	3	189	5	82	0	41	0	0	3	212	0	112	0	22	60	100
Ratnapura	85	1740	1	70	0	24	0	8	0	13	11	596	2	26	1	20	0	4	3	254	4	114	8	108	45	99
Kegalle	48	995	1	31	2	16	0	2	5	27	5	151	2	39	0	84	0	0	3	325	2	38	1	27	67	100
Kalmune	6	558	4	51	0	1	0	1	0	38	2	25	0	3	0	4	0	0	3	169	1	16	0	0	64	100
SRI LANKA	1965	36853	41	1049	6	154	3	160	27	588	79	2862	20	901	2	323	1	19	122	5371	27	948	74	2500	54	99

Source: Weekly Returns of Communicable Diseases (WRCD).

*T=Timeliness refers to returns received on or before 02nd August, 2019 Total number of reporting units 353 Number of reporting units data provided for the current week: 335 C**=Completeness
A = Cases reported during the current week. B = Cumulative cases for the year.

Table 2: Vaccine-Preventable Diseases & AFP

27th – 02nd Aug 2019 (31st 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*	00	00	00	00	00	00	00	00	00	00	00	47	38	23.6 %
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0 %
Mumps	02	01	00	01	03	01	02	00	02	12	05	218	213	2.3 %
Measles	01	00	01	00	01	01	01	00	00	05	04	215	81	165.4 %
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	01	00	00	00	00	01	00	13	15	- 13.3 %
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	09	19	- 52.6 %
Whooping Cough	00	00	00	00	00	00	00	00	00	00	00	36	34	5.8 %
Tuberculosis	96	44	17	15	13	35	00	09	24	243	197	5117	5031	1.7 %

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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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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