



# WEEKLY EPIDEMIOLOGICAL REPORT

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

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#### Flashback 2019 (Part I)

The year 2019 was a successful yet challenging year for the Epidemiology unit. However, the functions of the unit, mainly the Expanded Programme on Immunization (EPI) and the disease surveillance (both vaccine-preventable and other important communicable diseases) - were carried out successfully with a team spirit.

Disease surveillance

Communicable disease control largely depends on the timely surveillance of the diseases. Epidemiology Unit along with the wide network of Medical Officer of Health Units spread throughout Sri Lanka collects, analyzes, interprets and disseminates data on communicable diseases on a weekly basis paving the path to control them.

Currently, the "e-Surveillance", the web-based disease surveillance system, is implemented to minimize the errors encountered in the paper-based system in all 355 Medical Officers of Health (MOH), divisions. The completeness of the system is near 100% and the timeliness is around 90%.

Monitoring and evaluation is an essential component of any programme to reach its

best results. Epidemiology Unit has successfully conducted EPI / VPD (vaccine-preventable programme) review programs in 2019 at district level which enabled the MOH teams to show their progress as well as to identify their shortcomings.

A well trained Regional Epidemiologist (RE) is a great asset to a country and Epidemiology Unit had successfully conducted the quarterly RE review meetings in 2019.

Mid-Level Manager (MLM) training on Expanded Programme of Immunization (EPI) for Public Health Personnel based on WHO MLM modules was another programme conducted by the Epidemiology Unit. In 2019, 6 such programmes were successfully conducted. Also the Unit had conducted two training programmes for Public Health Inspectors (PHI) on food and waterborne disease control.

### **National Immunization Programme**

National Immunization Programme (NIP) is one of the major responsibilities upon the Epidemiology unit. Currently, NIP protects the nation from 12 dreadful communicable diseases and 2 non-communicable diseases.

Contents	Page
1. Leading Article – Flashback 2019 (Part I)	1
2. Summary of selected notifiable diseases reported (21st – 27th December 2019)	3
3. Surveillance of vaccine preventable diseases & AFP (21st - 27th December 2019)	4

## **Measles elimination**

Sri Lanka has been certified as eliminated for indigenous measles in 2019, which is one year ahead of the country's planned year of measles elimination. Country target was to eliminate indigenous measles (zero cases) by 2020. However, due to the reason of the last indigenous case reported in 2016 and the ability of the surveillance system to detect possible imported cases and having shown successful outbreak control with maintaining high population immunity has helped in certifying indigenous measles elimination.

However, measles and rubella surveillance has been further strengthened with changing the surveillance case definition in to "fever and maculopapular rash" in 2017 based on the General circular 01-35/2017 and more awareness programmes for health care staff have been conducted in 2019. All fever and maculopapular rash cases are required to be investigated (blood samples for measles IgM and swabs in VTM samples for virus detection), in the National Measles and Rubella Reference laboratory (at MRI) for exclusion of fever and maculopapular rash cases as non-measles-non-rubella cases.

#### **Timor Twinning**

Timor-Leste – Sri Lanka Twinning Arrangement for "Institutional Strengthening in Immunization Programme Management in Timor-Leste" is a programme organized and funded by GAVI through WHO as a 2-year programme. Through this, it is expected to provide technical hands-on skill training on exposure to Sri Lanka's public health system under 5 thematic areas.

- Theme 1: Health policy development including immunization policy, budget allocation and execution, human resource development including recruitment pre/in-service training, basic/post-graduate training.
- Theme 2: Procurement, vaccines management and supply chain management
- Theme 3: EPI and VPD Data management and quality assurance
- Theme 4: Quality and safety assurance of vaccines and other related supplies (NRA and AEFI surveillance).
- Theme 5: Integrated communicable disease surveil-

lance system with special emphasis on VPD surveillance and laboratory surveillance and conducting special studies on disease burden.

The country has already supported with 2 thematic areas in 2018 and the 3rd thematic area was supported during 2019. Fourteen officials from the Ministry of Health, Timor-Leste operational at National, District and Divisional levels working on Statistics and Health Information and monitoring and evaluation of EPI programme visited Sri Lanka from 25th November to 8th December 2019. The objective of the visit was to develop skills on immunization programme strengthening under the thematic area three on the Expanded Programme on Immunization (EPI) and Vaccine-Preventable Diseases (VPD) data management and quality assurance.

The team visited pertinent central, district and divisional level public health institutions and the field immunization clinics to familiarize and develop skills on immunization data management and quality assurance at each level and to identify good practices for implementation in Timor Leste. Finally, a strategic action plan including objectives for each strategy, monitoring indicators, the outcome expected, and time plan was developed by the team and experts in the Epidemiology Unit for them to implement in Timor-Leste for the progress of the National Immunization Programme. Final deliberations were made towards strengthening the National Immunization Programme, Timor-Leste.

#### **Compiled By**

- Editor

Page 2 to be continued...

Table 1: Selected notifiable diseases reported by Medical Officers of Health 21st - 27th Dec 2019 (52nd Week)

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•T=Timeliness refers to returns received on or before 28th December , 2019 Total number of reporting units 356 Number of reporting units data provided for the current week: 334 C\*\*-Completeness A = Cases reported during the current week. B = Cumulative cases for the year. Source: Weekly Returns of Communicable Diseases (WRCD).

# Table 2: Vaccine-Preventable Diseases & AFP

21st - 27th Dec 2019 (52nd Week)

Disease	No. of	Cases b	y Province	е					Number of cases cases during during current same	Total number of cases to date in	Total num- ber of cases to date in	Difference between the number of cases to date in		
	W	С	S	N	Е	NW	NC	U	Sab	week in 2019	week in 2018	2019	2018	2019 & 2018
AFP*	00	01	00	00	00	00	00	00	00	01	01	80	70	14.2%
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Mumps	01	02	02	00	01	00	00	00	00	06	04	326	364	-10.4 %
Measles	00	00	00	00	00	00	00	00	01	01	01	292	129	126.3 %
Rubella	00	00	00	00	00	00	00	00	00	00	00	00	08	- 100 %
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	21	20	5 %
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	09	15	- 40 %
Whooping Cough	00	00	00	01	00	00	00	00	00	01	00	40	54	- 25.9 %
Tuberculosis	83	06	22	08	02	20	30	11	42	224	186	8413	8876	- 5.2 %

#### 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.

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

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