



WEEKLY EPIDEMIOLOGICAL REPORT

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

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Dengue Part IV

This is the fourth part of the series of five articles.

Dengue Prevention

- Prevention of mosquito breeding:
 - Preventing mosquitoes from accessing egg-laying habitats by environmental management and modification;
 - Disposing of solid waste properly and removing artificial man-made habitats that can hold water;
 - Covering, emptying and cleaning of domestic water storage containers on a weekly basis;
 - Applying appropriate insecticides to water storage outdoor containers;
 - Personal protection from mosquito bites:
 - Using of personal household protection measures, such as window screens, repellents, coils and vaporizers. These measures must be observed during the day both inside and outside of the home (e.g.: at work/school) because the primary mosquito vectors bites throughout the day;
 - Wearing clothing that minimises skin exposure to mosquitoes is advised;
 - Community engagement:
 - Educating the community on the risks of mosquito-borne diseases;
 - Engaging with the community to improve participation and mobilization for sustained vector control;
 - Active mosquito and virus surveillance:
 - Active monitoring and surveillance of vector abundance and species composition should be carried out to determine effectiveness of control interventions;
 - Prospectively monitor prevalence of virus in the mosquito population, with active screening of sentinel mosquito collections;
 - Vector surveillance can be combined with clinical and environment surveillance.

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- Research:
 - novel tools and innovative strategies that will contribute in global efforts to interrupt transmission of dengue.
- Integration of vector management approaches. This is encouraged by the World Health Organization to achieve sustainable, effective locally adapted vector control interventions.

Pathophysiology and Spectrum of Disease

Dengue is caused by a flavivirus with 4 serotypes; DEN-1, DEN-2, DEN-3, and DEN-4. Of the four serotypes of DENV, DENV2 viruses have most commonly been associated with DHF/DSS, followed by DENV1, DENV3 and DENV4, although DENV4 infection is mostly clinically mild in severity. DENV1 and DENV3 appear to cause more severe disease during the primary infection whereas DENV2 and DENV4 seem to be associated with the severe disease during secondary infection²¹.

Dengue virus infections in humans can range from sub-clinical infection to Dengue fever (DF), Dengue Haemorrhagic fever (DHF) and Dengue Shock Syndrome (DSS)

DF is a generally self-limiting, flu-like undifferentiated or exanthematous illness that affects infants, young children and adults. The typical symptoms are; sudden onset high fever (102 ° F-105 ° F), with fluctuation; associated with severe frontal headache, retro-orbital pain, arthralgia, myalgia, nausea, anorexia, and rash for 2-7 days. The intrinsic incubation period is 3-14 days (average 4-7) from the bite of an infected mosquito. Towards convalescence, intense pruritus with subsequent desquamation of the palms and soles may occur. Leucopenia and thrombocytopenia and elevated serum liver enzyme levels may be seen in the blood investigation reports.

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**Table 1 : Water Quality Surveillance
 Number of microbiological water samples October 2021**

District	MOH areas	No: Expected *	No: Received
Colombo	15	90	NR
Gampaha	15	90	NR
Kalutara	12	72	NR
Kalutara NIHS	2	12	NR
Kandy	23	138	NR
Matale	13	78	NR
Nuwara Eliya	13	78	NR
Galle	20	120	NR
Matara	17	102	NR
Hambantota	12	72	NR
Jaffna	12	72	NR
Kilinochchi	4	24	NR
Manner	5	30	NR
Vavuniya	4	24	NR
Mullatvu	5	30	NR
Batticaloa	14	84	NR
Ampara	7	42	NR
Trincomalee	11	66	NR
Kurunegala	29	174	NR
Puttalam	13	78	NR
Anuradhapura	19	114	NR
Polonnaruwa	7	42	NR
Badulla	16	96	NR
Moneragala	11	66	NR
Rathnapura	18	108	NR
Kegalle	11	66	NR
Kalmunai	13	78	NR

* No of samples expected (6 / MOH area / Month)
 NR = Return not received

Table 1: Selected notifiable diseases reported by Medical Officers of Health 13th-19th Nov 2021 (47th Week)

RDHS	Dengue Fever		Dysentery		Encephaliti		Enteric Fever		Food Poi-		Leptospirosis		Typhus		Viral Hep-		Human		Chickenpox		Meningitis		Leishmania-			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	A	T*	C**
Colombo	20	5079	1	11	0	1	0	5	0	3	10	197	1	2	0	2	0	3	0	22	0	12	0	1	46	100	
Gampaha	20	2807	0	5	1	7	0	1	0	0	14	321	0	8	0	4	0	5	0	26	1	15	0	13	23	74	
Kalutara	41	1332	0	12	0	2	0	3	0	5	11	630	0	3	0	1	0	1	1	71	0	23	0	0	34	92	
Kandy	32	748	0	21	0	1	2	5	0	8	17	252	3	41	0	3	0	0	0	37	1	18	0	29	57	100	
Matale	7	220	0	13	0	4	0	0	0	0	4	85	0	6	0	2	0	1	0	12	0	7	4	251	50	100	
NuwaraEliya	5	53	1	16	0	2	0	4	0	0	4	67	0	40	0	4	0	0	0	28	0	7	0	1	28	100	
Galle	20	435	0	10	0	1	0	5	0	7	23	702	1	28	0	2	0	0	0	57	0	35	0	2	38	100	
Hambantota	4	337	2	16	0	2	0	2	0	6	5	254	0	75	0	7	0	0	1	52	0	34	8	472	68	100	
Matara	20	507	0	6	0	1	0	1	0	0	6	311	0	17	0	3	0	0	0	58	0	11	8	301	43	100	
Jaffna	4	137	0	45	0	3	0	15	0	27	2	20	6	452	0	0	0	6	1	33	0	3	0	2	21	88	
Kilinochchi	0	25	0	25	0	0	0	2	0	10	0	56	0	83	0	1	0	0	0	10	0	0	0	1	51	100	
Mannar	1	30	1	8	0	1	0	4	0	0	0	28	0	2	0	0	0	0	0	6	0	19	0	1	34	100	
Vavuniya	3	41	0	4	0	2	0	1	0	2	0	23	0	2	0	1	0	0	0	6	0	2	0	1	37	100	
Mullaitivu	0	7	0	3	0	0	0	0	0	1	0	33	0	9	0	0	0	0	0	9	0	6	0	0	21	100	
Batticaloa	9	3033	0	35	1	7	1	4	0	36	1	47	0	0	0	1	0	0	0	14	0	24	0	0	47	100	
Ampara	1	45	0	10	0	0	0	1	0	7	2	58	0	1	0	3	0	0	2	43	0	17	0	14	56	100	
Trincomalee	6	152	1	1	0	0	0	0	0	2	0	4	0	0	0	2	0	0	1	19	0	2	1	1	25	100	
Kurunegala	53	1214	0	19	0	4	0	0	1	11	11	467	1	31	0	4	0	2	2	54	4	91	10	367	36	100	
Puttalam	12	331	0	2	0	1	0	0	0	0	0	26	0	16	1	2	0	1	0	19	2	36	1	10	39	96	
Anuradhapur	4	208	1	14	1	2	0	1	0	3	1	227	1	26	0	6	0	0	0	33	1	48	13	288	23	91	
Polonnaruwa	2	78	0	8	0	1	0	3	0	9	0	124	0	3	0	3	0	0	0	31	0	3	10	462	36	100	
Badulla	50	455	0	12	0	0	0	3	0	0	13	311	2	47	3	40	0	0	1	45	0	19	1	21	42	100	
Monaragala	4	138	0	15	0	0	0	3	0	6	11	369	1	36	1	101	0	1	1	27	0	61	1	41	51	100	
Ratnapura	18	515	0	31	0	8	0	0	0	5	22	777	0	22	0	9	0	1	0	52	0	86	0	110	34	95	
Kegalle	26	453	0	4	0	11	0	0	0	2	52	486	0	13	1	2	0	0	0	88	2	33	3	30	41	100	
Kalmune	7	296	0	28	0	2	0	4	0	4	0	21	0	1	0	2	0	2	1	17	1	18	0	2	44	100	
SRILANKA	74	18676	7	374	3	63	3	67	1	154	20	5896	16	964	6	20	0	23	11	869	12	630	60	2421	40	97	
																										41	

Source: Weekly Returns of Communicable Diseases (esurveillance.epid.gov.lk). T=Timeliness refers to returns received on or before 19th Nov , 2021 Total number of reporting units 361 Number of reporting units data provided for the current week: 349 C**:-Completeness

Table 2: Vaccine-Preventable Diseases & AFP

13th– 19th Nov 2021 (47th Week)

Disease	No. of Cases by Province									Number of cases during current week in 2021	Number of cases during same week in 2020	Total number of cases to date in 2021	Total number of cases to date in 2020	Difference between the number of cases to date in 2021& 2020
	W	C	S	N	E	NW	NC	U	Sab					
AFP*	01	00	00	00	00	00	01	01	00	02	00	62	38	63.1,%
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Mumps	01	00	00	00	00	00	00	00	00	00	01	65	160	- 59.3 %
Measles	00	00	00	00	00	00	00	00	00	00	02	13	50	- 74 %
Rubella	00	00	00	00	00	00	00	00	00	00	00	00	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	01	05	07	-28.5 %
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	04	31	- 87 %
Whooping Cough	00	00	00	00	00	00	00	00	00	00	00	00	09	- 100%
Tuberculosis	86	12	03	04	08	05	00	04	09	131	73	4612	5610	- 17.7 %

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

Influenza Surveillance in Sentinel Hospitals - ILI & SARI							
Month	Human				Animal		
	No Total	No Positive	Infl A	Infl B	Pooled samples	Serum Samples	Positives
November							

Source: Medical Research Institute & Veterinary Research Institute

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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