



Highlights of Diseases and Event in July 2016

Hand, Foot and Mouth Disease

Total 41,725 cases and 2 deaths of hand, foot and mouth disease (HFMD) were reported from 77 provinces in the surveillance data from the R506 reporting system during 1 January to 26 July 2016, with attack rate of 73.77 per 100,000 population. One death was reported from Bangkok and one was from Chiang Mai. Case fatality rate was 0.01%. Since 16th week, the number of HFMD cases was increasingly reported about 3 times higher than that of the previous year and the median of last 5 years.

The age group with the highest attack rate was 0-4 years old (980.78 per 100,000 population), with 80.52% in 1-3 years old, followed by 5-14 years old (51.68 per 100,000 population) and 15-24 years old (1.21 per 100,000 population).

The laboratory surveillance data in Bureau of Epidemiology revealed that more HFMD cases were identified during 1 January and 9 July 2016. The highest number of HFMD virus was found in July 2016, including 60% of coxsackie virus A16, 33.33% of other types of enterovirus and 6.67% of enterovirus 71.

During the previous 4 weeks, the highest attack rate was found in the northern part (46.66 per 100,000 population), followed by the central part (27.08 per 100,000 population), the northeastern part (18.09 per 100,000 population) and the southern part (13.21 per 100,000 population).

Close monitoring should be continued in provinces with high risk and attack rate 2 times higher than the mean, which included Phayao, Phrae, Mae Hong Son, Sukhothai, Uthai Thani, Kamphaeng Phet, Phichit, Tak, Phitsanulok and Uttradit Provinces in the northern part; Samut Songkram, Saraburi, Bangkok, Nakhon Nayok, Kanchanaburi, Sakaew, Ayuthaya, Nakhon Pathom, Lopburi, Trat, Suphanburi, Phetchaburi, Chainat, Pathum Thani, Ang Thong and Prachuap Khiri Khan Provinces in the central part; Nakhon Phanom, Nongkhai, Mukdaharn, Amnat Charoen and Yasothon Provinces in the northeastern part; and Ranong, Chumphon, Phatthalung, Satun, Surat Thani, Yala, Krabi, Pattani, Songkhla, Phuket, Narathiwat, Trang and Phang Nga Provinces in the southern part.

Since the current time is the outbreak period of HFMD and young children are with the highest risk of infection, surveillance on HFMD should be closely carried out at childcare centers and kindergartens.

Influenza

From 1 January to 26 July 2016, total 60,664 cases and 6 deaths of influenza infection were reported from 77 provinces, with attack rate of 92.72 per 100,000 population and case fatality rate of 0.01%. Five deaths included 2 from Phetchaburi, 2 from Nakhon Ratchasima, 1 from Pattani and 1 from Nong Bua Lamphu Provinces.

As the seasonal influenza outbreaks are occurring in the rainy season, the number of cases reported was higher than that of last year and the median. Proportion of influenza-like illness (ILI) cases (4.5%) increased when compared with the previous week.

The analyzed data of ILI and pneumonia patients from sentinel hospitals in Department of Medical Science during 28th week (10-16 July 2016)

showed that 2 (4.08%) out of 49 cases were tested to have influenza infection, including 50% of influenza A H1 (2009) and 50% of influenza A(H3N2). During 19th week, no specimen was sent in. Since more cases of influenza A H1 (2009) were identified, there might be outbreak happening in this rainy season. The outbreaks of influenza B were occurring since the beginning of this year and currently decreasing.

The age group of 0-4 years old revealed the highest attack rate (368.06 per 100,000 population), followed by 5-14 years old (245.79 per 100,000 population), 25-34 years old (73.70 per 100,000 population) and 15-24 years old (61.71 per 100,000 population).

During the previous month, the highest attack rate was found in the central part (8.39 per 100,000 population), followed by the northern part (7.48 per 100,000 population), the southern part (7.32 per 100,000 population) and the northeastern part (4.81 per 100,000 population).

Surveillance should be closely carried out in Ayuthaya, Chanthaburi, Rayong, Samut Sakhon, Bangkok, Chiang Mai, Phuket, Chumphon and Nakhon Ratchasima Provinces.

As the seasonal outbreaks of influenza are occurring, awareness raising, health education on prevention and screening of the infection in the gathering events.

Meanwhile, Middle East Respiratory Syndrome (MERS) are reported in the Middle East and many people in Thailand are traveling to Umrah. Hence, surveillance of MERS should be strictly conducted. Patients with severe symptoms or died of acute lungs inflammation should be tested for MERS infection as well.

Dengue hemorrhagic fever

Situation of dengue in Thailand from 1 January to 16 July 2016 revealed that total 24,047 cases and 20 deaths were reported for dengue infection, with attack rate of 36.75 per 100,000 population, death rate of 0.02 per 100,000 population and crude death rate of 0.08%. The 5-14 years old age group showed the highest attack rate of 94.79 per 100,000 population, followed by 15-24 years old with 62.40 per 100,000 population. Five provinces with the highest attack rate per 100,000 population were Mae Hong Son (117.25), Rayong (70.85), Bangkok (66.86), Phang Nga (65.85) and Phuket (65.62) Provinces.

During the previous 4 weeks, Mae Hong Son, Chiang Mai, Krabi, Chanthaburi and Chiang Rai Provinces showed the highest attack rate per 100,000 population.

When compared with the same period of previous years, the disease situation in 1-13th weeks showed higher than that of 2015 as well as the median of last 5 years (2011-2015). Since then, the number of cases decreased. However, in 23rd week, the cases were slightly increased.