



## Highlight of Diseases and Events in March 2018

### Situation of Influenza in Thailand

During 1 January to 17 April 2018, total 39,982 influenza cases and 7 fatalities were reported to the (R 506) national disease surveillance system in Thailand, and the attack rate was 60.73 per 100,000 population. Out of seven deaths, three were from Nakorn Ratchasima Province, and one each from Udon Thani, Pattalung, Roi-Et and Ranong Provinces. Five of them died from influenza A virus, with one from A/H1N1 (2009) and one from unknown type.

The number of Influenza cases started to decline since week 7, and the influenza case were likely to be 5361 in April and 4583 in May 2018.

The attack rate of influenza case was found to be highest among children under five years (237.82 per 100,000 population) while the attack rate among children 5-14 years of age was 128.72 per 100,000 population and 44.77 per 100,000 persons of infection was detected among 25-34 years old.

The attack rate was the highest in the north of Thailand (16.21 per 100,000 population), followed by the central (15.49 per 100,000 population), south (6.19 per 100,000 population) and northeastern (5.47 per 100,000 population) parts of the country.

Similarly, the province with the highest attack rate per 100,000 population was Uttaradit (34.96), followed by Nakorn Pathom (30.50, Chiang Mai (30.44), Bangkok (30.33), Samut Prakarn (23.42), Ang Thong (23.07), Nan (22.71), Rayong (21.96), Lampang (21.80) and Chachoengsao (21.64).

Surveillance on influenza-like illness (ILI) cases revealed that ILI cases were decreasingly reported from 3.32% in week 7 to 2.35% in week 15.

Influenza outbreaks usually occur during January to March and June to September. Currently, the disease situation tends to decline in April, and is predicted to report about 5,361 cases. Influenza A/H1N1 2009 was the most commonly reported, followed by influenza A/H3. The type of vaccine that will be imported by the Ministry of Public Health in April 2018 is the trivalent vaccine which is now being utilized in southern hemisphere countries and targets at three virus types of A/Michigan/45/2015(H1N1)

pdm09-like virus, A/Singapore/ INFIMH-16-0019/2016 (H3N2)-like virus, and B/Phuket/3073/2013-like virus.

**Recommendations:** Public awareness on influenza should be raised, especially in high risk groups. If someone is suspected of having influenza, they should consult a physician immediately to have the correct diagnosis, early treatment, and influenza vaccination in order to prevent severe and fatal complications. People in high risk groups should avoid going to the crowded places and places with potential influenza infection such as hospitals. People should wear masks as needed, wash hands frequently and stay away from the people with influenza.

Source of information: Outbreak Verification Summary of 15<sup>th</sup> week during 16-22 April 2018