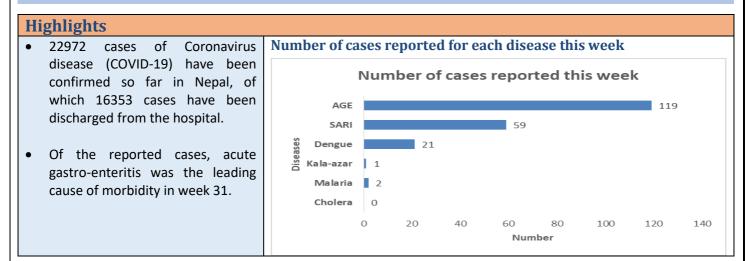
Early Warning and Reporting System (EWARS)- Weekly Bulletin: Nepal 31st Epidemiological Week 9 August 2020

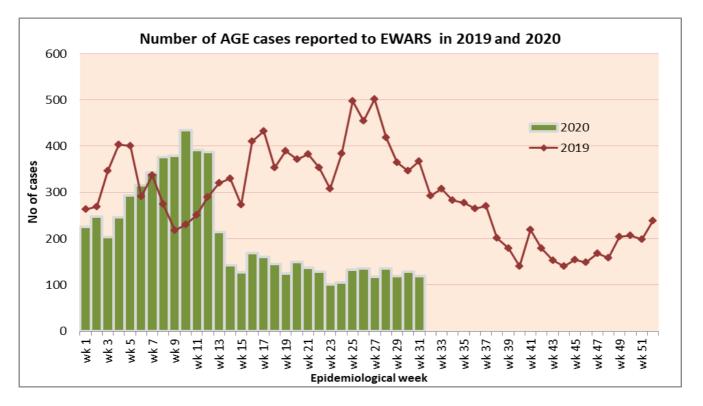


Note: This bulletin includes data since January 2020 till date, including comparison of the same period last year. Since May 2019, 36 new sentinel sites (including public hospitals, private hospitals, and medical colleges) were added and were gradually oriented and started reporting, thus increasing the number of reporting sites. The current number of sentinel sites is 118.

Morbidity

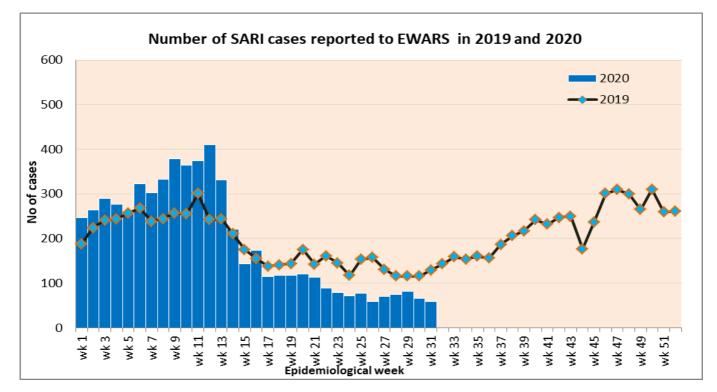
1. Acute Gastro-Enteritis (AGE) and Cholera

- 119 cases of AGE are reported this week. The majority of these cases are from Bhaktapur (13 cases), Dolakha (9 cases), Kailali (8 cases), Kapilbastu (7 cases) and Okhaldhunga (7 cases).
- 367 cases of AGE were reported this week in 2019.



2. Severe Acute Respiratory Infection (SARI)

- 59 cases of SARI are reported this week. The majority of these cases are from Kathmandu (11 cases), Rukum West (8 cases), Rupandehi (3 cases), Surkhet (3 cases) and Dolakha (3 cases).
- 129 cases of SARI were reported this week in 2019.



3. Malaria

- Two case of malaria are reported this week from Kailali
- Three cases of malaria were reported this week in 2019.

4. Dengue

- 21 cases of dengue are reported this week- Four from Myagdi, three from Lamjung, two each from Sindhuli, Rupandehi, Achham and Kailali.
- 63 cases of dengue were reported this week in 2019.

5. Kala-azar

- One case of kala-azar is reported this week from Kailali
- One cases of kala-azar were reported this week in 2019.

Other diseases

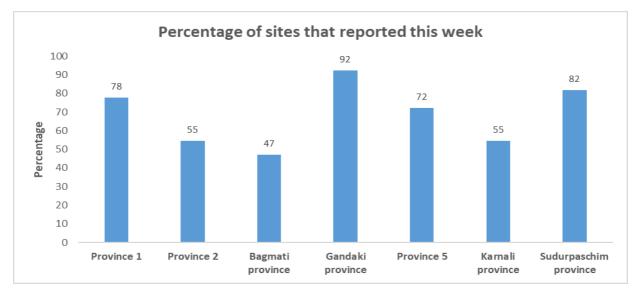
Scrub typhus

- 68 cases of scrub typhus are reported this week. The majority of the cases are from Kailali (24 cases), Dhading (8 cases), Palpa (5 cases), and Baitadi (5 cases).
- 16 cases of scrub typhus were reported this week in 2019.

Table: Comparison with previous week by diseases, 2020

Disease	Week 31	Week 30
AGE	119	129
SARI	59	66
Cholera	0	0
Malaria	2	4
Dengue	21	14
Kala-azar	1	1

Province wise reporting status



Acknowledgement: The Epidemiology and Disease Control Division (EDCD) highly acknowledges the contribution from all the medical recorders, EWARS focal persons, rapid response team members and technical support from WHO for preparation of this bulletin.

Note: This bulletin is also available at the EDCD website (please click <u>here</u>). Other information can also be accessed at the website <u>www.edcd.gov.np.</u> Thank you.



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