



Event-based Surveillance and Response Monthly Report for December, 2018

December 2018 Summary of Captured Health Events

- From the 212 captured health events, 78 (37%) were verified as true
- Region I had the most number (31, 15%) of captured health events followed by Region XIII (28, 13%)
- The most number of verified health events were Vaccine Preventable Diseases (29, 37%) followed by Zoonotic Diseases (13, 17%)
- Most (35, 45%) of the status of health events were ongoing

CAPTURE			VERIFICATION of TRUE HE ¹			VERIFICATION (cont'd)		
No.	%		No.	%		No.	%	
Total no. of HE¹ captured:	212		Verified by Central ESR	0	0%	Status:		
Source:			Verified by RESUS ²	74	95%	Ongoing	35	45%
DOH	208	98.8%	Verified by IHR ³ focal units	4	5%	Closed	24	31%
Others	4	1.9%	Total	78	100%	Controlled	19	24%
Internet	0	0%	Disease Classification:			Total	78	100%
Total	212	100%	Vaccine Preventable Diseases	29	37%			
Regions with most no. of captured HE¹:			Zoonotic Diseases	13	17%	ASSESSMENT	No.	%
Region I	31	15%	Food and Waterborne Diseases	12	15%	Level of Concern:		
Region XIII	28	13%	Maternal Death	11	14%	PHELC ⁷	67	86%
NCR	27	13%	Others	5	6%	PHERC ⁸	7	9%
Means of Capture:			Vector-borne Diseases	4	5%	PHENC ⁹	4	5%
Active	0	0%	Chemical-Related	3	4%	PHEIC ¹⁰	0	0%
Passive	212	100%	Meningococcal	1	1%	Total	78	100%
Total	212	100%	AIDS ⁵ -Related Disease	0	0%			
			EREID	0	0%	RESPONSE	No.	
FILTER	No.	%	Total	78	100%	No. of HE ¹ with local response	78	
True health event	78	37%	Top regions with verified HE¹:			No. investigated by FETP ¹³ Fellows	2	
Discarded	134	63%	Region XII	15	19%	FEEDBACK	No.	
FYI	0	0%	NCR	9	12%	This month	212	
Total	212	100%	Region III	9	12%	YTD ¹²	3702	

Regional Distribution of Captured Health Events

Region	No. captured (Dec 2018)	VERIFIED AS TRUE HEALTH EVENTS						STATUS (this month)			ASSESSMENT (this month)				Total no. of HE ¹ responded locally (this mo.)	Total no. of HE ¹ with feedback to RO ¹¹ (this mo.)
		2018			2017											
		Dec	Past 3 mos.	YTD ¹²	This mo.	Past 3 mos.	YTD ¹²	Closed	Con- trolled	On-going	PHELC ⁷	PHERC ⁸	PHENC ⁹	PHEIC ¹⁰		
Passive																
Region 1	31	2	21	97	1	10	140	2	0	0	2	0	0	0	2	31
Region 2	9	1	11	57	2	12	68	0	0	1	1	0	0	0	1	9
Region 3	17	9	24	234	19	39	147	2	5	2	5	4	0	0	9	17
Region 4A	6	5	26	338	13	28	97	0	2	3	3	2	0	0	5	6
Region 4B	2	2	5	35	5	11	47	0	1	1	2	0	0	0	2	2
Region 5	9	6	18	100	5	22	119	3	2	1	6	0	0	0	6	9
Region 6	23	6	36	200	19	36	242	6	0	0	6	0	0	0	6	23
Region 7	12	7	4	45	6	9	142	0	1	6	7	0	0	0	7	12
Region 8	7	2	23	82	3	17	64	1	0	1	2	0	0	0	2	7
Region 9	9	4	10	52	2	29	104	3	1	0	4	0	0	0	4	9
Region 10	0	0	5	26	0	2	20	0	0	0	0	0	0	0	0	0
Region 11	5	2	5	25	1	15	41	0	1	1	2	0	0	0	2	5
Region 12	23	15	26	135	4	53	312	5	2	8	15	0	0	0	15	23
Caraga	28	4	17	26	5	23	114	1	2	1	4	0	0	0	4	28
CAR	0	0	5	36	1	2	45	0	0	0	0	0	0	0	0	0
ARMM	0	0	0	81	0	1	12	0	0	0	0	0	0	0	0	0
NCR	27	10	58	1100	50	59	350	1	2	7	8	1	1	0	10	27
IHR	4	3	7	30	3	9	31	0	0	3	0	0	3	0	3	4
Others	0	0	4	2	0	0	0	0	0	0	0	0	0	0	0	0
Sub-total	212	78	305	2701	139	377	2095	24	19	35	67	7	4	0	78	212
Active	0	0	0	7	0	0	1	0	0	0	0	0	0	0	0	0
Total	212	78	305	2708	139	377	2096	24	19	35	67	7	4	0	78	212

Legend:

- Health Event
- Regional Epidemiology and Surveillance Unit
- International Health Regulations
- Emerging and Re-emerging Infectious Diseases
- Vaccine Preventable Diseases
- Acquired Immune Deficiency Syndrome
- Public Health Event of Local Concern
- Public Health Event of Regional Concern
- Public Health Event of National Concern
- Public Health Emergency of International Concern

- Regional Office
- Year to date
- Field Epidemiology Training Program

Featured Event-based Surveillance and Response (ESR) Report for this month

Measles Outbreak in a Cruise Ship

- On December 24, 2018, the Director of the Epidemiology Bureau (EB) received a report from the Bureau of Quarantine regarding suspected Measles cases on-board of a cruise ship docked at Manila Bay Port
- On the same day, FETP fellows conducted an epidemiologic investigation
- A total of 12 suspect cases were identified, all were crew members
- Cases started to appear on December 19, 2019 and peaked on December 21-25, 2018
- No death was reported
- Ten (83%) of cases were females
- Age range: 20 to 28 years old (Median= 23 years old)
- Seven (58%) among the cases were Chinese, two (17%) Indonesians, two (17%) Filipinos and one (8%) Vietnamese
- Signs and symptoms: fever and rash (23, 100%), cough (5, 38%), coryza (3, 23%) and body malaise (3, 23%)
- Four (31%) cases were admitted at RITM.
- Two (15%) cases tested positive for Measles virus on PCR

Schistosomiasis Outbreak in a Previously Non-Endemic Area in Baybay City, Leyte

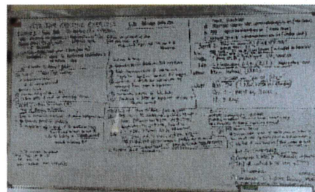
- On November 26, 2018, the Event-Based Surveillance and Response (ESR) Unit of the Epidemiology Bureau (EB) received a report from RESU VIII regarding an outbreak of Schistosomiasis cases in, Brgy. Villa Solidaridad and Brgy. Mailhi, Baybay City, Leyte
- On December 3, 2018, a team from the Field Epidemiology Training Program (FETP) conducted an epidemiologic investigation
- Schistosomiasis is endemic in 25 municipalities in Leyte but Baybay is not identified to be an endemic area because there was no reported case for the last 5 years
- A total of 58 cases were identified
- Cases started to appear on August 15, 2018 and peaked on November 19-25, 2018
- Twenty-nine (50%) were males
- Age range: 5 to 73 years old (Median=48 years old)
- 736 *Oncomelania quadrasi* snails were collected. Of these, 19 (3%) tested positive for *S. japonicum* infection
- Schistosomiasis egg was found through Kato-Katz Technique in nine (5%) out of 166 stool samples collected
- Four (17%) out of 24 blood specimens tested positive for schistosomiasis antibodies through Precipitin Test (COPT)



Featured Event-based Surveillance and Response (ESR) Activity for this month

IHR Crystal Exercise

- On December 4, 2018, the Epidemiology Bureau participated in the annual IHR Crystal Exercise
- IHR Crystal Exercise is a functional exercise to test IHR event communication among the National Focal Point (NFP) and WHO contact points
- Injects were sent via email through the simulators and controllers to facilitate communication between NFP and their relevant sectors NFPs were expected to conduct risk assessment, event communication, and Event Information Site posting after receiving the injects information
- The scenario was based on disease outbreaks due to the deliberate use of a biological agent during mass-gathering event.



Prepared by:

Aena Mari C. Besilia

Aena Mari C. Besilia, RN
ESR Officer, AEHMD

Noted by:

Mariz Zheila C. Blanco

Mariz Zheila C. Blanco, RN
Senior Health Program Officer, AEHMD

Herdie L. Hizon

Herdie L. Hizon
Supervising Health Program Officer, AEHMD

Vikki Carr D. de los Reyes, MD, PHSAE
FETP Training Officer, AEHMD

Ma. Nemia L. Sucaldito

Ma. Nemia L. Sucaldito, MD, PHSAE
Chief, Applied Epidemiology and Health Management Division

Approved by:

Ferchito L. Avelino

Ferchito L. Avelino, MD, MPH, PHSAE
Officer-in-Charge, Epidemiology Bureau