



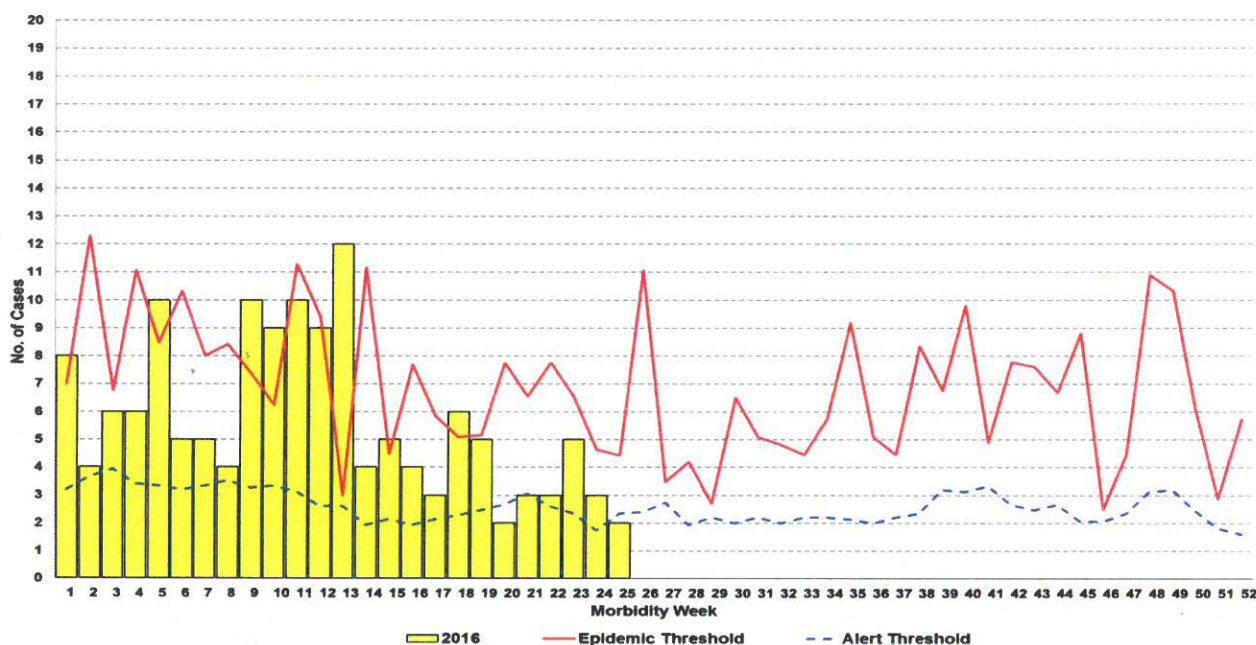
Morbidity Week 25: January 1 - June 25, 2016

Epidemiology Bureau
Public Health Surveillance Division

TRENDS IN THE PHILIPPINES

A total of 143 pertussis cases were reported nationwide from January 1 – June 25, 2016. This was 60.28% higher than the same period last year. Figure 1 shows the distribution of the reported pertussis cases in the country by morbidity week. It can be noted that there is an increase in the number of cases reported this year with reaching beyond the epidemic threshold during MW 1, 5, 9, 10, 13, 15 and 18.

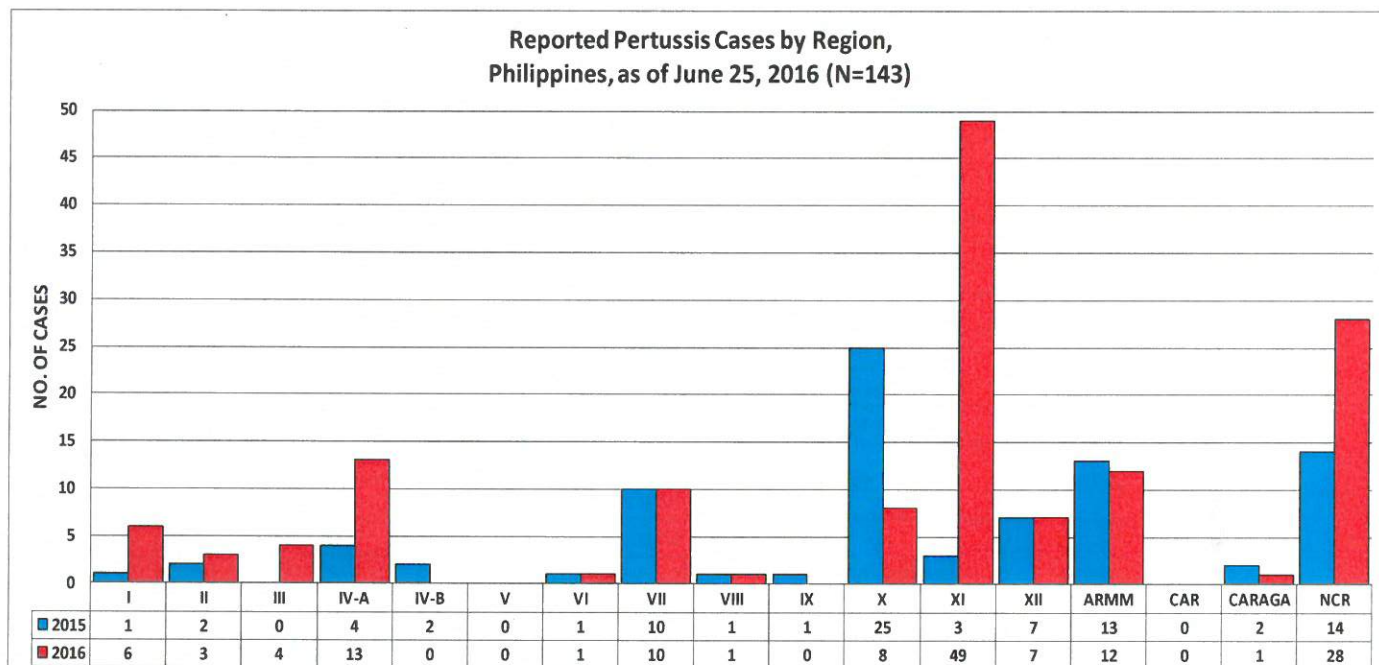
Figure 1. Alert and Epidemic Threshold and Reported Pertussis Cases by Morbidity Week, Philippines, as of June 25, 2016 (Morbidity Week 25) (N=143)



GEOGRAPHIC DISTRIBUTION

The number of pertussis reports vary by region. Figure 2 shows the distribution of reported pertussis cases by region in comparison to the same time period last year. Majority of the cases came from Region 11 (49 cases). An increase in reported cases can also be seen in regions 1, 2, 3, 4A and NCR.

Reported Pertussis Cases by Region, Philippines, as of June 25, 2016 (N=143)





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Table 1 indicates the reported pertussis cases by region in the Philippines. Majority of the reported pertussis cases came from Region XI. There are several cities/municipalities that reported 2 or more Pertussis cases from January 1 – June 25, 2016 as shown in Table 2. Majority of the reported cases are from **Davao City**, **Quezon City** and **Manila City**. Among these, clustering⁽¹⁾ of cases were noted in Davao City and Marawi City (Table 3). Clusters are defined as 2 or more pertussis cases from the the same barangay reported within 4 consecutive weeks.

Table 4 further shows the distribution of pertussis cases in Region 11, by case classification and outcome.

Table 1. Reported Pertussis Cases by Region, Philippines as of June 25, 2016 (N=143)

REGION	Case Classification			Total Reported Cases	Died	CFR %
	Clinically-Confirmed Cases	Probable Cases	Confirmed Cases			
I	3	1	2	6	2	33.33
II	3	0	0	3	0	0.00
III	4	0	0	4	1	25.00
IV-A	13	0	0	13	0	0.00
IV-B	0	0	0	0	0	0.00
V	0	0	0	0	0	0.00
VI	1	0	0	1	0	0.00
VII	10	0	0	10	0	0.00
VIII	0	0	1	1	0	0.00
IX	0	0	0	0	0	0.00
X	8	0	0	8	0	0.00
XI	36	0	13	49	2	4.08
XII	7	0	0	7	1	14.29
ARMM	12	0	0	12	0	0.00
CAR	0	0	0	0	0	0.00
CARAGA	1	0	0	1	0	0.00
NCR	24	0	4	28	2	7.14
PHL	122	1	20	143	8	5.59

Table 2. Cities/ Municipalities with 2 or more Reported Pertussis Cases Philippines, as of June 25, 2016

REGION	PROVINCE	CITY/MUNICIPALITY	NO. OF CASES
1	Pangasinan	Mangaldan	2
2	Cagayan	Alcala	2
3	Bataan	Orani	2
4A	Laguna	Biñan City	2
	Rizal	San Mateo	3
7	Cebu	Cebu City	2
		Minglanilla	2
10	Lanao del Norte	Iligan	3
11	Davao del Sur	Davao City	46
	Davao del Norte	Tagum City	2
12	Sultan Kudarat	Sen. Ninoy Aquino	2
ARMM	Lanao del Sur	Ditsaan-Ramain	2
		Marawi City	3
NCR	Metro Manila	Manila	6
		Parañaque City	3
		Quezon City	9

⁽¹⁾Clustering Definition: 2 or more pertussis cases from the same barangay, reported within 4 consecutive weeks.



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Table 3. Barangays with Clustering⁽¹⁾ of Pertussis Cases, Philippines, as of June 25, 2016

MORBIDITY WEEK	REGION	PROVINCE	MUNCITY	BARANGAY	NO. OF CASES
1-5	11	Davao del Sur	Davao City	Matina Aplaya	5
				Matina Pangi	3
6-8	11	Davao del Sur	Davao City	Santi Niño	2
9	ARMM	Lanao del Sur	Marawi City	Poblacion	2
10-12	12	Davao del Sur	Davao City	Ma-a	2

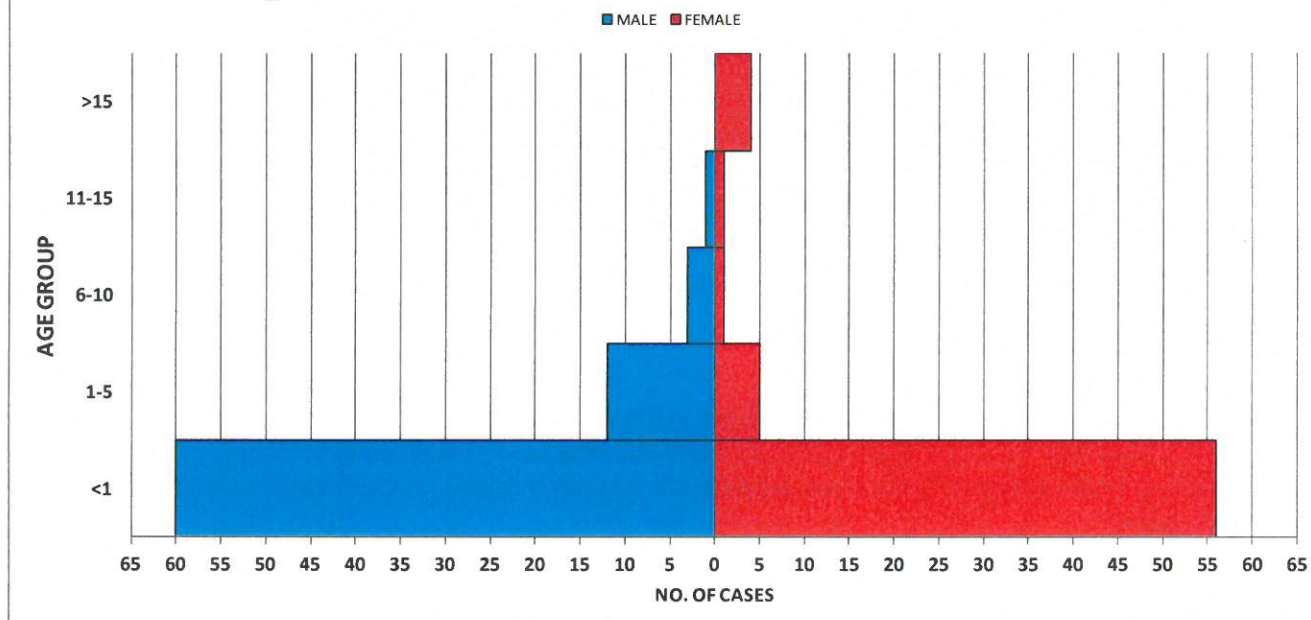
Table 4. Reported Pertussis Cases in Region 11, as of June 25, 2016

PROVINCE	CITY/ MUNICIPALITY	REPORTED	CONFIRMED	DIED	CFR%
Davao del Sur	Davao City	46	13	2	4.35
	Malita	1	0	0	0.00
Davao del Norte	Tagum City	2	0	0	0.00

PROFILE OF CASES

Majority of the reported diphtheria cases are male (53.15%) and most of them belong to the <1 year old age group (81.12%) as seen in Figure 3. More than half (56.64%) of the reported cases have zero (0) dose of DPT/Pentavalent vaccine. Moreover, 14 cases (9.79%) of the reported cases have completed three (3) primary doses of DPT/Pentavalent vaccine (Figure 4). Eight (6%) cases died (Figure 5).

Figure 3 Reported Pertussis Cases by Age Group and Sex, Philippines, as of June 25, 2016 (N=143)



⁽¹⁾Clustering Definition: 2 or more pertussis cases from the same barangay, reported within 4 consecutive weeks.



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Figure 4 Reported Pertussis Cases by DPT Doses and Region, Philippines, as of June 25, 2016 (N=143)

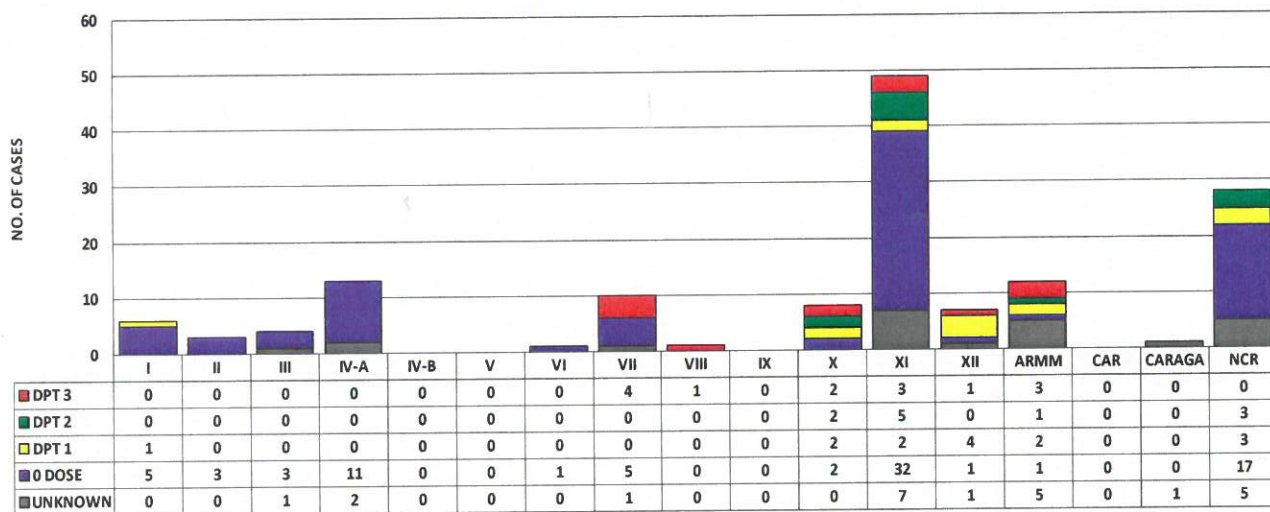
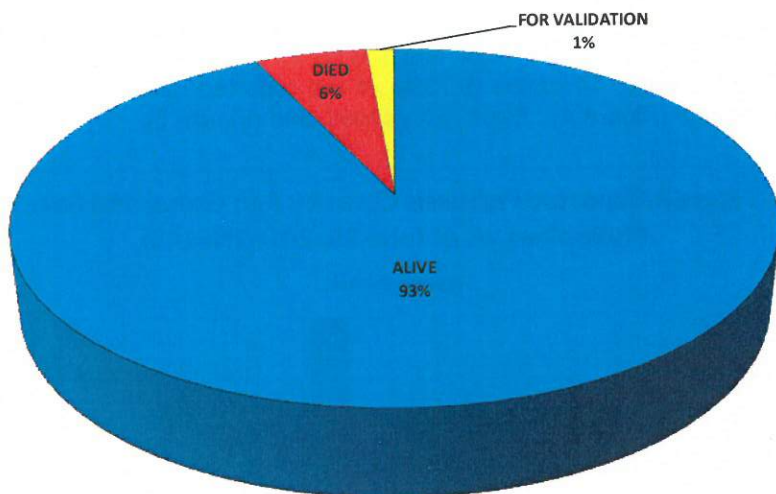


Figure 5 Reported Pertussis Cases by Outcome, Philippines, as of June 25, 2016 (N=143)



ACTIONS TAKEN

Local Government Units

1. Identified close contacts and/or secondary cases in the community.
2. Collected specimen from new suspected cases and submitted to RITM for confirmation.
3. Prophylaxis treatment and booster immunization (for eligible children) for close contacts in coordination with EPI Program.

Regional Health Offices

1. Provided support to Local Government Unit in strengthening surveillance and case investigation.

Epidemiology Bureau

1. Provided technical assistance in the conduct of investigation.

RECOMMENDATIONS

1. High routine vaccine coverage with effective vaccine is the mainstay of prevention.
2. Immunizations should be completed for those whose schedule is incomplete.
3. Active surveillance in all health facilities would greatly help in getting all pertussis cases.



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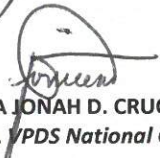
4. Contact tracing of confirmed pertussis cases. Provision of prophylaxis and booster immunization for close contacts and in the community.
5. Weekly data analysis for the alert and epidemic threshold of reported pertussis cases. The Epidemiology and Surveillance Unit, as well as areas where there is an increase in the number of reported cases, shall be immediately notified for appropriate actions.


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