

Morbidity Week 26 - June 28 - July 4, 2015

Epidemiology Bureau Public Health Surveillance Division

Introduction

Dengue fever and the more severe form, dengue hemorrhagic fever, are caused by any of the four serotypes of dengue virus (types 1, 2, 3 and 4). An infected day-biting female *Aedes* mosquito transmits the viral disease to humans.

In the Philippines, *Aedes aegypti* and *Aedes albopictus* are the primary and secondary mosquito vectors, respectively. The mosquito vectors breed in the small amount of water collected in storages such as tanks, cisterns, flower vases, plant axils and backyard litter.

The incubation period is from 3 to 14 days, commonly 4-7 days.

Signs and Symptoms

- Sudden onset of high fever which may last from 2 to 7 days.
- Joint and muscle pain and pain behind the eyes.
- Weakness
- Skin rashes
- Nosebleeding when fever starts to subside
- Abdominal pain
- Vomiting of coffee-colored matter
- Dark-colored stools
- · Difficulty breathing.

Trend in the Philippines

A total of **36,284** suspect dengue cases were reported nationwide from January 1 to July 4, 2015. This is **1.61%** higher compared to the same time period last year **(35,708)**.

Philippines, as of July 4, 2015

14000
12000
10000
6000
4000
2000
1 4 7 10 13 16 19 22 25 28 31 34 37 40 43 46 49 52

Fig. 1 Distribution of Suspect Dengue Cases by Morbidity Week

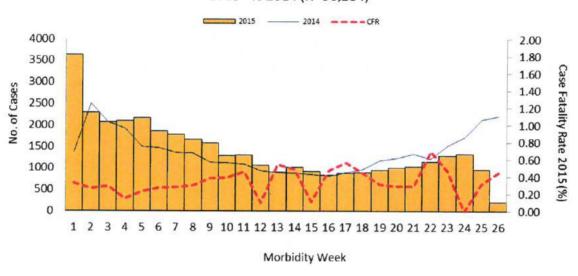
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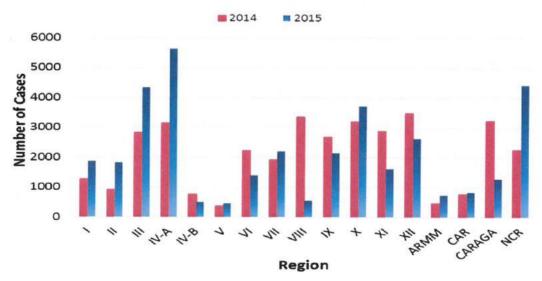
Fig. 2 Suspect Dengue Cases by Morbidity Week, Philippines, as of July 4, 2015 2015* vs 2014 (N=36,284)



Geographic Distribution

Most of the cases were from the following regions: Region IV-A (15.6%), NCR (12.2%), Region III (12%), Region X (10.3%) and Region XII (7.3%).

Fig. 3 Suspect Dengue Cases by Region Philippines, 2015 vs 2014



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Fig 4. Suspect Dengue Cases as of January 1 to July 4, 2015

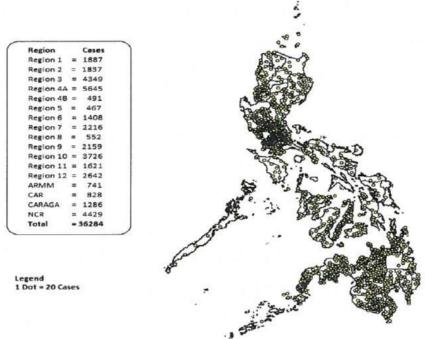
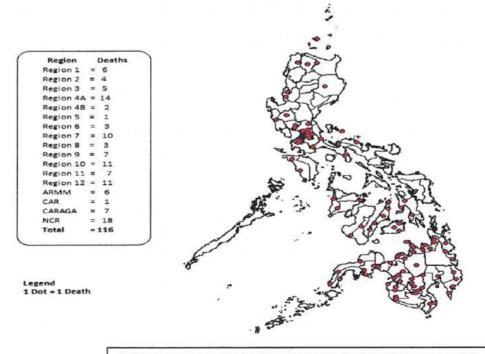


Fig 5. Suspect Dengue Deaths as of January 1 to July 4, 2015





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Profile of Cases

Ages of cases ranged from less than 1 month to 97 years old (median = 13 years). Majority of cases were male (53.9%). Most (37.6%) of the cases belonged to the 5 to 14 years age group (Fig. 6). There were 116 deaths (CFR = 0.32%).

Fig.6 Suspect Dengue Cases by Agegroup and Sex Philippines, as of July 4, 2015 (N=36,284)

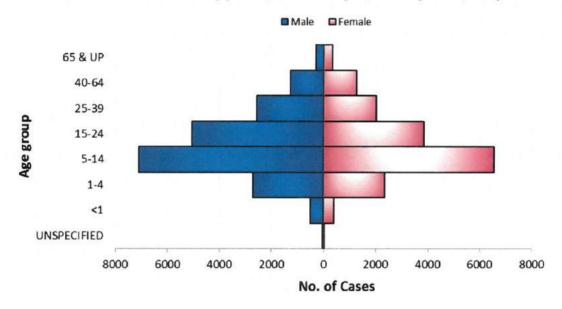
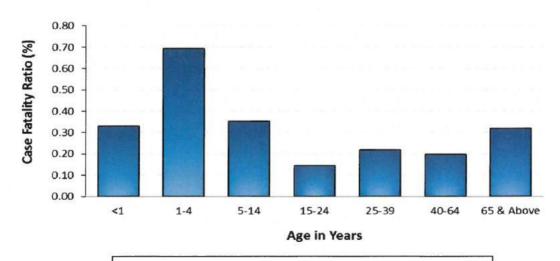


Fig. 7 Suspect Dengue Case Fatality Rate (CFR) by Age Group, Philippines, as of July 4, 2015





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Dengue Virus Serotype Distribution in the Philippines

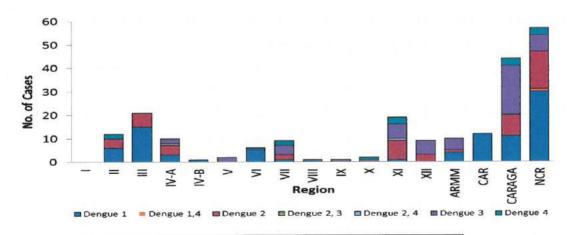
Dengue Fever/Dengue Hemorrhagic Fever has emerged as a major public health problem in the past 20 years, with an increasing incidence and expanding geographical distribution in both the vector and the disease (Gubler, 2002). Increased human migration and travel, climate change, urbanization and social changes have all contributed to this resurgence. These factors will continue to increase in the future, thus, an effective prevention and control program needs to be in place in order to predict and prevent epidemics.

Dengue is considered a Category II notifiable disease in the syndromic based Philippine Integrated Disease Surveillance and Response (PIDSR) of the country lead by the Epidemiology Bureau. Dengue cases from health facilities nationwide are reported to the NEC on a weekly basis. However, laboratory confirmation of these cases has been limited. An active surveillance obtained from a smaller percentage of cases on a sentinel basis may provide a more detailed serotype-specific incidence data. Using the data from both systems, disease burden estimates could be determined.

The Research Institute for Tropical Medicine (RITM) served as the National Reference Laboratory for Dengue and other arboviruses together with NEC has started laboratory confirmation of Dengue cases in 2008, thus providing the serotype incidence over the years. With that, the Epidemiology Bureau – Philippine Integrated Disease Surveillance and Response (PIDSR), in collaboration with the Research Institute for Tropical Medicine (RITM), has developed a guideline entitled, "Interim Guidelines on the Sentinel-based Active Dengue Surveillance" (DM 2014-0112).

Dengue serotype data are based on samples systematically collected from 20 sentinel site hospitals in all regions of the Philippines. Based from the Sentinel Based Active Dengue Surveillance, there were 216 laboratory confirmed dengue cases in the Philippines, in which all four DENV serotypes were present from January 1 to July 4, 2015. The predominant serotype is DENV-1 (41.7%) followed by DENV-3 (25.5%), mostly occurring in the NCR region (26.4%).

Fig. 8 Confirmed Dengue Cases by Region and Serotype Philippines, as of July 4, 2015 (n=216)



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Fig. 9 Dengue virus serotype distribution in the Philippines, as of July 4, 2015 (n=216)

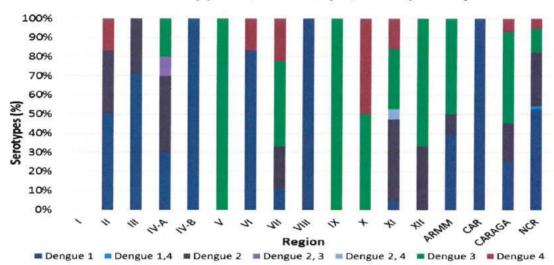


Table 1. Dengue Cases & Deaths by Region

Philippines, 2015* vs 2014

Region		Cases		Deaths				
	2015	2014	% Change	2015	CFR (%)	2014	CFR (%)	
ı	1887	1266	1 49.1	6	0.32	2	0.16	
II	1837	905	1 03.0	4	0.22	7	0.77	
III	4349	2820	1 54.2	5	0.11	4	0.14	
IV-A	5645	3138	1 79.9	14	0.25	8	0.25	
IV-B	491	764	-35.7	2	0.41	4	0.52	
V	467	360	1 29.7	1	0.21	2	0.56	
VI	1408	2221	-36.6	3	0.21	10	0.45	
VII	2216	1924	1 5.2	10	0.45	9	0.47	
VIII	552	3351	-83.5	3	0.54	13	0.39	
IX	2159	2684	-19.6	7	0.32	12	0.45	
Х	3726	3198	16.5	11	0.30	17	0.53	
XI	1621	2878	-43.7	7	0.43	14	0.49	
XII	2642	3474	-23.9	11	0.42	27	0.78	
ARMM	741	461	1 60.7	6	0.81	3	0.65	
CAR	828	776	1 6.7	1	0.12	1	0.13	
CARAGA	1286	3231	-60.2	7	0.54	16	0.50	
NCR	4429	2257	1 96.2	18	0.41	4	0.18	
Total	36284	35708	1.61	116	0.32	153	0.43	



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Table 2. Weekly Dengue Summary Report by Region

Philippines, as of July 4, 2015

Region	Morbidity Week				26th Morbidity Week		Cumulative Total 1st wk to 26th wk	
	1	94	148	162	106	9	95	1887
П	94	85	107	96	6	56	1837	905
III	103	104	146	61	11	116	4349	2820
IV-A	138	155	164	145	41	100	5645	3138
IV-B	40	35	41	18	13	53	491	764
V	23	22	15	15	4	17	467	360
VI	49	64	63	42	1	209	1408	2221
VII	35	55	50	42	3	100	2216	1924
VIII	5	13	10	7	5	101	552	3351
IX	82	61	54	17	0	253	2159	2684
Х	159	145	137	117	50	245	3726	3198
ΧI	62	80	70	50	5	284	1621	2878
XII	99	90	84	46	12	233	2642	3474
ARMM	34	31	29	14	8	43	741	461
CAR	19	65	77	73	29	48	828	776
CARAGA	18	38	20	17	1	217	1286	3231
NCR	91	103	105	98	22	42	4429	2257
Total	1145	1294	1334	964	220	2212	36284	35708

*NOTE: Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.

Treatment

- Do not give aspirin for fever.
- · Give sufficient amount of water or rehydrate a dengue suspect.
- If fever or symptoms persist for 2 or more days, bring the patient to the nearest hospital.

Prevention and Control

Follow the 4-S against Dengue:

- 1. Search and Destroy
 - Cover water drums and pails.
 - Replace water in flower vases once a week.
 - Clean gutters of leaves and debris.
 - Collect and dispose all unsuable tin, cans, jars, bottles and other items that can collect and hold water.
- 2. Self-protection Measures
 - Wear long pants and long sleeved shirt.



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- · Use mosquito repellant every day.
- 3. Seek Early Consultant
 - Consult the doctors immediately if fever persist after 2 days and rashes appears.
- 4. Say Yes to Fogging When There is an Impending Outbreak or a Hotspot.

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