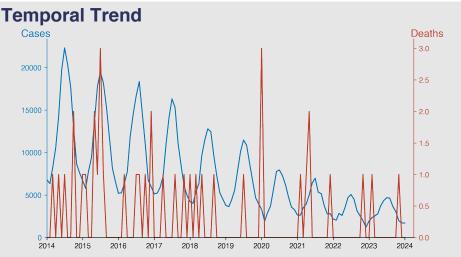
Chinese Notifiable Infectious Diseases Surveillance Report

Dysentery
January 2024

Introduction

Dysentery is an inflammatory disease of the intestine, particularly of the colon, which results in severe diarrhea containing blood and mucus in the feces. It is caused by several types of infectious pathogens including bacteria, viruses, parasitic worms, or protozoa. The condition is often spread through contaminated food or water and is more prevalent in areas with poor sanitation. Symptoms include abdominal pain, fever, and urgent need to defecate. Treatment varies based on the cause but often includes fluid replacement and, in bacterial cases, antibiotics. Good hygiene practices can help prevent transmission.



Highlights

- A consistent decline in reported cases of Dysentery from a peak in 2014 to the lowest in January 2024, indicating an effective control over the spread.
- Despite fluctuations, the fatality rate remains extremely low, with many months reporting zero deaths, highlighting improved medical management and intervention strategies.
- The seasonal pattern shows higher incidence rates during the warmer months (May to August), suggesting a potential link between temperature and the transmission of Dysentery.
- The significant reduction in cases post-2020 may reflect the impact of enhanced public health measures introduced during the COVID-19 pandemic.

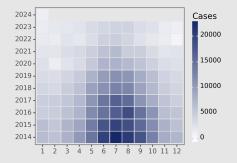
Cases Analysis

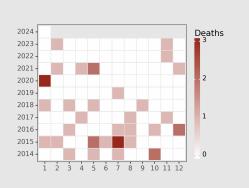
The data indicates a notable seasonal trend in dysentery cases in China, with peaks typically occurring in the warmer months, from May to August, and a gradual decrease towards the cooler months. The highest number of cases was recorded in July 2014, with 22,311 cases. Over the years, there has been a general decline in the number of cases, with a significant drop observed from 2020 onwards, likely due to heightened hygiene and public health measures during the COVID-19 pandemic. This trend continues into 2024, showing a persistent decrease in cases.

Deaths Analysis

Despite the fluctuating number of dysentery cases, the death toll remains remarkably low throughout the observed period, with several months recording no deaths at all. This low mortality rate could reflect effective healthcare response, including timely treatment with antibiotics and rehydration solutions, advancements in medical care, and increased public health awareness. However, occasional spikes in deaths, albeit small, underscore the potential severity of outbreaks and the need for continued vigilance in disease prevention and control measures.

Distribution





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