

Chinese Notifiable Infectious Diseases Surveillance Report

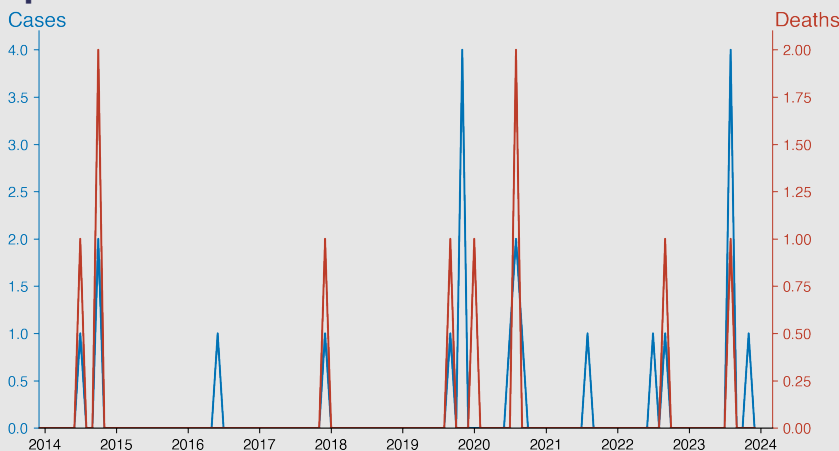
Plague

December 2023

Introduction

Plague is a severe, often deadly bacterial infection caused by the bacterium *Yersinia pestis*. The disease is primarily transmitted through the bites of infected fleas that have fed on infected rodents. There are three forms: bubonic, septicemic, and pneumonic. Symptoms include sudden fever, chills, headache, and swollen and painful lymph nodes. If not treated promptly, the bacteria can multiply and reach the bloodstream or lungs, leading to severe conditions. Antibiotics are effective against this disease if administered early. Vaccines are not widely available against the plague.

Temporal Trend



Highlights

- Plague in China shows sporadic cases from 2014 through 2023 with occasional fatalities, reflecting a continued but low-level risk.
- November 2019 recorded four cases, the most in a month, suggesting episodic increases in transmission or detection.
- August 2023 saw a small uptick of four cases and one death, indicating possible seasonality or localized outbreaks.
- Despite low incidence, the consistent presence of plague necessitates sustained surveillance and control measures.

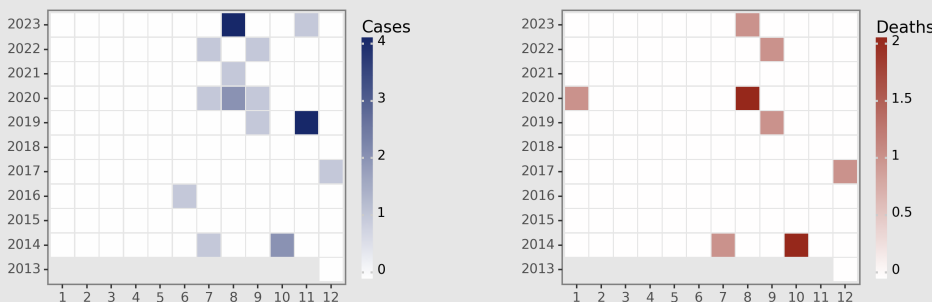
Cases Analysis

From December 2013 to December 2023, a total of 15 plague cases were reported in mainland China. The data suggest sporadic and infrequent occurrences of plague with a clear absence of sustained transmission, as evidenced by the zero-case reports in many months. Cases were reported singularly, with only four cases in 2019 constituting the highest monthly count. January and February seem to have no cases throughout the years, while the occurrences appear slightly more frequent from July to September, highlighting a possible seasonal pattern.

Deaths Analysis

Over the same period, there were 8 reported deaths associated with the plague, with a case fatality rate (CFR) of approximately 53%. The CFR indicates a high lethality of the disease when it does occur. Deaths mirror the sporadic pattern of the cases, with no deaths reported in most months. The months of July 2014, October 2014, September 2019, and August 2020 each recorded a death corresponding to the reported cases, while January 2020 and August 2023 reported deaths without concurrent cases, possibly indicating delayed reporting or death following recovery.

Distribution



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