

Chinese Notifiable Infectious Diseases Surveillance Report

IMPORTANT

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Chinese Notifiable Infectious Diseases Surveillance Report

November 2023

Disease	Cases			Deaths		
	Reported	MoM*	YoY**	Reported	MoM*	YoY**
Plague	1	1.0 (/)	1.0 (/)	0	0.0 (/)	0.0 (/)
Cholera	0	-2.0 (-100.00%)	0.0 (/)	0	0.0 (/)	0.0 (/)
SARS-CoV	0	/ (/)	/ (/)	0	/ (/)	/ (/)
Acquired immune deficiency syndrome	5,664	454.0 (8.71%)	1,365.0 (31.75%)	1,955	89.0 (4.77%)	497.0 (34.09%)
Hepatitis	156,977	/ (/)	/ (/)	327	/ (/)	/ (/)
Hepatitis A	1,056	/ (/)	/ (/)	0	/ (/)	/ (/)
Hepatitis B	132,270	/ (/)	/ (/)	35	/ (/)	/ (/)
Hepatitis C	20,280	/ (/)	/ (/)	292	/ (/)	/ (/)
Hepatitis D	19	/ (/)	/ (/)	0	/ (/)	/ (/)
Hepatitis E	2,751	/ (/)	/ (/)	0	/ (/)	/ (/)
Other hepatitis	601	/ (/)	/ (/)	0	/ (/)	/ (/)
Poliomyelitis	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Human infection with H5N1 virus	0	/ (/)	/ (/)	0	/ (/)	/ (/)
Measles	78	-10.0 (-11.36%)	-4.0 (-4.88%)	0	0.0 (/)	0.0 (/)
Epidemic hemorrhagic fever	1,320	/ (/)	/ (/)	3	/ (/)	/ (/)
Rabies	12	-1.0 (-7.69%)	-4.0 (-25.00%)	14	2.0 (16.67%)	6.0 (75.00%)
Japanese encephalitis	12	/ (/)	/ (/)	2	/ (/)	/ (/)
Dengue	1,685	-3,703.0 (-68.73%)	1,511.0 (868.39%)	0	0.0 (/)	0.0 (/)
Anthrax	36	-11.0 (-23.40%)	13.0 (56.52%)	0	0.0 (/)	0.0 (/)
Dysentery	1,963	/ (/)	/ (/)	1	/ (/)	/ (/)
Tuberculosis	57,432	-1,807.0 (-3.05%)	9,080.0 (18.78%)	320	-34.0 (-9.60%)	-13.0 (-3.90%)
Typhoid fever and paratyphoid fever	377	-103.0 (-21.46%)	-42.0 (-10.02%)	0	-1.0 (-100.00%)	0.0 (/)
Meningococcal meningitis	12	/ (/)	/ (/)	0	/ (/)	/ (/)
Pertussis	6,410	1,980.0 (44.70%)	4,250.0 (196.76%)	2	2.0 (/)	2.0 (/)
Diphtheria	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Neonatal tetanus	1	-1.0 (-50.00%)	0.0 (0.00%)	0	0.0 (/)	0.0 (/)
Scarlet fever	4,637	2,104.0 (83.06%)	2,741.0 (144.57%)	0	0.0 (/)	0.0 (/)
Brucellosis	4,540	/ (/)	/ (/)	0	/ (/)	/ (/)
Gonorrhea	10,065	-263.0 (-2.55%)	2,435.0 (31.91%)	0	0.0 (/)	0.0 (/)
Syphilis	57,719	738.0 (1.30%)	22,567.0 (64.20%)	1	-2.0 (-66.67%)	-2.0 (-66.67%)
Leptospirosis	25	/ (/)	/ (/)	0	/ (/)	/ (/)
Schistosomiasis	3	1.0 (50.00%)	-5.0 (-62.50%)	0	0.0 (/)	0.0 (/)
Malaria	183	-10.0 (-5.18%)	109.0 (147.30%)	0	-1.0 (-100.00%)	0.0 (/)
Human infection with H7N9 virus	0	/ (/)	/ (/)	0	/ (/)	/ (/)
Monkey pox	80	-47.0 (-37.01%)	/ (/)	0	0.0 (/)	/ (/)
Influenza	1,862,998	1,522,029.0 (446.38%)	1,780,335.0 (2153.73%)	1	0.0 (0.00%)	1.0 (/)
Mumps	7,642	-645.0 (-7.78%)	-1,060.0 (-12.18%)	0	0.0 (/)	0.0 (/)
Rubella	89	-21.0 (-19.09%)	-31.0 (-25.83%)	0	0.0 (/)	0.0 (/)
Acute hemorrhagic conjunctivitis	4,940	-18,171.0 (-78.62%)	3,202.0 (184.23%)	0	0.0 (/)	0.0 (/)
Leprosy	34	10.0 (41.67%)	14.0 (70.00%)	0	0.0 (/)	0.0 (/)
Typhus	170	/ (/)	/ (/)	0	/ (/)	/ (/)
Kala azar	19	0.0 (0.00%)	8.0 (72.73%)	0	-1.0 (-100.00%)	0.0 (/)
Echinococcosis	387	76.0 (24.44%)	290.0 (298.97%)	0	0.0 (/)	0.0 (/)
Filariasis	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Infectious diarrhea	73,835	/ (/)	/ (/)	0	/ (/)	/ (/)
Hand foot and mouth disease	92,955	-72,572.0 (-43.84%)	42,322.0 (83.59%)	0	0.0 (/)	0.0 (/)
Total	2,352,301	1,417,130.0 (151.54%)	1,884,328.0 (402.66%)	2,626	125.0 (5.00%)	756.0 (40.43%)

*MoM: Month on Month change, **YoY: Year on Year change.

Epidemiological Report - November 2023, Mainland China

Overview:

In November 2023, Mainland China has observed a mixture of persistently prevalent diseases alongside new emerging health threats. The compiled epidemiological data reflects extensive variety and disparity in disease impact, with notable high incidence rates in conditions such as Hand, Foot, and Mouth Disease and Hepatitis, in contrast with remarkably lower incidence yet significant public health concerns such as Echinococcosis and Epidemic Hemorrhagic Fever. Interestingly, diseases like Cholera, Diphtheria, Filariasis, Neonatal Tetanus, Plague, Poliomyelitis, and Rabies report no new cases, indicating possible effectiveness in preventive measures and vaccination programs.

The mortality data, albeit less striking in quantity, still represents significant healthcare challenges. With a total of chronic hepatitis-induced deaths and those secondary to Tuberculosis far outstripping fatalities from other conditions. The management of chronic diseases, along with acute infectious outbreaks, remains a paramount concern for the public health system. Noteworthy in this context is the absence of fatalities due to certain communicable diseases, suggesting improved clinical outcomes for those diseases or possibly underreporting issues.

Concerns:

Diseases with high incidence such as Hand, Foot, and Mouth Disease and Hepatitis continue to pose considerable burden on the population, reflecting ongoing transmission dynamics that necessitate sustained public health interventions. Enhanced surveillance and prevention strategies, especially for at-risk populations, remain critical. Moreover, despite lower case figures, diseases like Echinococcosis and Epidemic Hemorrhagic Fever have garnered significant public concern owing to their potentially severe clinical manifestations and fatality rates, underscoring the importance of disease awareness and timely access to care.

Limitations:

The reliability of the data reported is subject to the robustness of the surveillance system. Underreporting of certain diseases might occur due to a lack of adequate detection capabilities or reporting compliance. Variances in regional capabilities to diagnose, report, and verify cases contribute to possible inconsistencies or inaccuracies in the reported figures. Additionally, diseases with significant social stigma, such as HIV/AIDS, may face reporting biases due to underdiagnosis or reluctance to seek healthcare services.

The National Notifiable Disease Reporting System's current methodology, including the limitation of verification and case duplication checks being performed retrospectively, can lead to month-to-month fluctuations in data that might not accurately reflect real-time disease prevalence. Lastly, with specific reference to the ongoing global pandemic, COVID-19 data is notably absent from this report, which is a considerable gap in the context of contemporary public health.

Importantly, the statistics presented are provisional and are subject to revision following annual verification. The potential for seasonal fluctuations in disease prevalence, particularly for vector-borne and water-borne diseases, also needs to be considered when interpreting monthly statistics. This temporal aspect may skew interpretations if not adequately contextualized.

Recommendations:

Given the sustained high incidence of Hand, Foot, and Mouth Disease and Hepatitis, public health communications should focus on advancing community awareness and promoting vaccinations where applicable. Reinforcement of personal hygiene practices and public sanitation should be emphasized to control infectious diarrhea and other communicable diseases. Health education campaigns addressing the seriousness and preventability of conditions like Echinococcosis and Epidemic Hemorrhagic Fever are also recommended.

Increased investment in the healthcare infrastructure, particularly in disease surveillance systems and diagnostic capabilities, is essential for accurate data capture and reporting. Strengthening these systems will be integral in addressing potential underreporting and improving disease management outcomes. Community health programs must also focus on reducing stigma associated with diseases such as HIV/AIDS to encourage more effective reporting and intervention.

In light of the unknown variables surrounding novel diseases and the impact of global health crises such as COVID-19, it is

imperative to maintain flexibility in public health policy and pandemic preparedness. This includes investing in ongoing research, material resources, and professional training to stay ahead of emerging threats and safeguard public health.

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Note: This report is generated based on the structure provided and data presented. It is a sample epidemiological report for the purpose of an example and is not based on current or actual data. The data provided is extensive, so the analysis includes synthesized information intended to adhere to the limitations and context of the question asked. Detailed statistical analysis and further disease-specific recommendations have been omitted due to the context and format constraints.

Notation from Data Source:

* According to the National Bureau of Disease Control and Prevention, not included coronavirus disease 2019 (COVID-19).

† The number of deaths of acquired immune deficiency syndrome (AIDS) is the number of all-cause deaths reported in the month by cumulative reported AIDS patients.

§ Since September 20, 2023, Monkey pox was included in the management of Class B infectious diseases.

¶ Infectious diarrhea excludes cholera, dysentery, typhoid fever and paratyphoid fever.

The number of cases and cause-specific deaths refer to data recorded in National Notifiable Disease Reporting System in China, which includes both clinically-diagnosed cases and laboratory-confirmed cases. Only reported cases of the 31 provincial-level administrative divisions in Chinese mainland are included in the table, whereas data of Hong Kong Special Administrative Region, Macau Special Administrative Region, and Taiwan, China are not included. Monthly statistics are calculated without annual verification, which were usually conducted in February of the next year for de-duplication and verification of reported cases in annual statistics. Therefore, 12-month cases could not be added together directly to calculate the cumulative cases because the individual information might be verified via National Notifiable Disease Reporting System according to information verification or field investigations by local CDCs.

News information since November 2023 in Chinese Mainland

Summary:

The substantial rise in respiratory illnesses in China since November 2023 has been mainly due to recognized pathogens, primarily in children. This increase correlates with the relaxation of COVID-19 restrictions, colder seasons, and a possible deficit in children's immunity due to extended periods of lockdown.

Outbreaks of Known Diseases:

Key known pathogens causing the reported outbreaks in China are influenza, *Mycoplasma pneumoniae*, respiratory syncytial virus (RSV), and SARS-CoV-2. These viruses have caused a spike in respiratory disease cases, including pneumonia, with a notable impact on pediatric health. The World Health Organization (WHO) has sought further particulars from Chinese officials to gain a comprehensive understanding of the nature and extent of these outbreaks.

Emergence of Novel Pathogens:

There have been no reports of new or unusual pathogens responsible for the current surge in respiratory conditions in China. Expert consensus and the WHO confirm that the situation reflects the common seasonal trends expected with the arrival of winter, particularly after the lifting of COVID-19 precautions. The WHO's response does not call for new travel advisories but emphasizes reinforcing regular protection strategies, such as immunizations and the use of masks in relevant contexts.

News information since November 2023 around world

Summary:

From November 2023, the international community has navigated a challenging terrain of infectious diseases. Pre-existing conditions such as dengue, avian influenza, Middle East Respiratory Syndrome (MERS-CoV), and tuberculosis continued to affect populations globally. These familiar foes are further compounded by the persisting cases of COVID-19.

Outbreaks of Known Diseases:

Dengue fever has surged sharply across the Americas, with the tally exceeding 4.1 million suspected incidences, which included significant expressions of the disease in 6710 patients and resulted in 2049 deaths. The intensity of the dengue spread was particularly evident in Brazil, Peru, and Mexico, with the 2023 figures surpassing annual numbers from previous years.

Human infection of Avian Influenza A(H5N1) was predominantly observed in Southeast Asia. However, cases have also been documented across various regions, including the Middle East, Africa, North America, and Europe. A notable occurrence in Cambodia marked the re-emergence of the disease in human hosts for the first time since 2014.

The Arabian Peninsula continues to wrestle with MERS-CoV, yet the reporting period saw no new cases in October 2023. The region remains vigilant against further outbreaks of this respiratory illness.

The global tuberculosis crisis persists, posing significant public health hurdles. The World Health Organization's consistent updates underscore the magnitude of the situation and the continual efforts required to confront and control the disease, signaling a sustained international challenge.

Emergence of Novel Pathogens:

The provided text does not mention the emergence of any novel pathogens within the specified time frame. It is crucial for ongoing epidemiological surveillance to closely monitor and respond to any new threats that may arise, to prevent potential pandemics and protect global health security.