Chinese Notifiable Infectious Diseases Surveillance Report

IMPORTANT

The text in report is generated automatically by ChatGPT and Gemini.

Chinese Notifiable Infectious Diseases Surveillance Report
September 2023

Disease	Cases			Deaths		
	Reported	MoM*	YoY**	Reported	MoM*	YoY**
Plague	0	-4.0 (-100.00%)	-1.0 (-100.00%)	0	-1.0 (-100.00%)	-1.0 (-100.00%)
Cholera	9	1.0 (12.50%)	5.0 (125.00%)	0	0.0 (/)	0.0 (/)
SARS-CoV	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Acquired immune deficiency syndrome	5,121	-1.0 (-0.02%)	732.0 (16.68%)	1,693	-197.0 (-10.42%)	-154.0 (-8.34%)
Hepatitis	147,758	-18,848.0 (-11.31%)	24,440.0 (19.82%)	177	-13.0 (-6.84%)	105.0 (145.83%)
Hepatitis A	1,038	-73.0 (-6.57%)	93.0 (9.84%)	0	0.0 (/)	-1.0 (-100.00%)
Hepatitis B	123,495	-15,380.0 (-11.07%)	22,412.0 (22.17%)	20	-2.0 (-9.09%)	-15.0 (-42.86%)
Hepatitis C	20,022	-3,192.0 (-13.75%)	1,282.0 (6.84%)	157	-10.0 (-5.99%)	122.0 (348.57%)
Hepatitis D	15	-6.0 (-28.57%)	1.0 (7.14%)	0	0.0 (/)	0.0 (/)
Hepatitis E	2,550	-68.0 (-2.60%)	604.0 (31.04%)	0	-1.0 (-100.00%)	0.0 (/)
Other hepatitis	638	-129.0 (-16.82%)	48.0 (8.14%)	0	0.0 (/)	-1.0 (-100.00%)
Poliomyelitis	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Human infection with H5N1 virus	0	0.0 (/)	-1.0 (-100.00%)	0	0.0 (/)	0.0 (/)
Measles	78	-27.0 (-25.71%)	0.0 (0.00%)	0	0.0 (/)	0.0 (/)
Epidemic hemorrhagic fever	198	-42.0 (-17.50%)	-7.0 (-3.41%)	1	1.0 (/)	1.0 (/)
Rabies	8	-4.0 (-33.33%)	-6.0 (-42.86%)	7	-1.0 (-12.50%)	-1.0 (-12.50%)
Japanese encephalitis	62	-18.0 (-22.50%)	9.0 (16.98%)	1	0.0 (0.00%)	0.0 (0.00%)
Dengue	6,494	2,296.0 (54.69%)	6,466.0 (23092.86%)	1	1.0 (/)	1.0 (/)
Anthrax	61	-62.0 (-50.41%)	19.0 (45.24%)	1	1.0 (/)	1.0 (/)
Dysentery	3,658	-968.0 (-20.93%)	524.0 (16.72%)	0	0.0 (/)	0.0 (/)
Tuberculosis	61,859	-4,704.0 (-7.07%)	3,221.0 (5.49%)	324	21.0 (6.93%)	-23.0 (-6.63%)
Typhoid fever and paratyphoid fever	596	-82.0 (-12.09%)	-35.0 (-5.55%)	0	0.0 (/)	0.0 (/)
Meningococcal meningitis	5	-1.0 (-16.67%)	3.0 (150.00%)	0	0.0 (/)	0.0 (/)
Pertussis	4,517	-276.0 (-5.76%)	668.0 (17.36%)	0	-1.0 (-100.00%)	0.0 (/)
Diphtheria	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Neonatal tetanus	1	-1.0 (-50.00%)	-3.0 (-75.00%)	0	0.0 (/)	0.0 (/)
Scarlet fever	1,546	337.0 (27.87%)	526.0 (51.57%)	0	0.0 (/)	0.0 (/)
Brucellosis	5,987	-2,367.0 (-28.33%)	676.0 (12.73%)	2	2.0 (/)	2.0 (/)
Gonorrhea	10,147	-777.0 (-7.11%)	1,549.0 (18.02%)	0	0.0 (/)	0.0 (/)
Syphilis	55,767	-5,301.0 (-8.68%)	11,297.0 (25.40%)	5	2.0 (66.67%)	-4.0 (-44.44%)
Leptospirosis	71	14.0 (24.56%)	28.0 (65.12%)	0	0.0 (/)	-2.0 (-100.00%)
Schistosomiasis	3	2.0 (200.00%)	-5.0 (-62.50%)	0	0.0 (/)	0.0 (/)
Malaria	193	-41.0 (-17.52%)	97.0 (101.04%)	1	-1.0 (-50.00%)	-1.0 (-50.00%)
Human infection with H7N9 virus	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Monkey pox	80	/ (/)	/ (/)	0	/ (/)	/ (/)
Influenza	168,963	108,433.0 (179.14%)	78,874.0 (87.55%)	0	0.0 (/)	0.0 (/)
Mumps	10,867	2,948.0 (37.23%)	-174.0 (-1.58%)	0	0.0 (/)	0.0 (/)
Rubella	72	-31.0 (-30.10%)	-26.0 (-26.53%)	0	0.0 (/)	0.0 (/)
Acute hemorrhagic conjunctivitis	125,264	112,522.0 (883.08%)	122,991.0 (5410.95%)	0	0.0 (/)	0.0 (/)
Leprosy	23	0.0 (0.00%)	-1.0 (-4.17%)	0	0.0 (/)	0.0 (/)
Typhus	227	10.0 (4.61%)	53.0 (30.46%)	0	0.0 (/)	0.0 (/)
Kala azar	26	0.0 (0.00%)	7.0 (36.84%)	0	-1.0 (-100.00%)	0.0 (/)
Echinococcosis	367	15.0 (4.26%)	227.0 (162.14%)	0	0.0 (/)	0.0 (/)
Filariasis	0	0.0 (/)	0.0 (/)	0	0.0 (/)	0.0 (/)
Infectious diarrhea	102,559	-22,760.0 (-18.16%)	26,069.0 (34.08%)	0	0.0 (/)	-2.0 (-100.00%)
Hand foot and mouth disease	166,980	-26,558.0 (-13.72%)	122,108.0 (272.13%)	0	0.0 (/)	-1.0 (-100.00%)
Total	879,567	143,785.0 (19.54%)	393,238.0 (80.86%)	2,213	-187.0 (-7.79%)	-79.0 (-3.45%)

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

Epidemiological Report - Mainland China, September 2023

Overview:

During September 2023, Mainland China experienced notable variance in the prevalence of various infectious diseases, as observed through the National Notifiable Disease Reporting System. The total number of reported cases for diseases of public health significance amounted to significant figures, with particularly high figures noted in diseases like hand, foot, and mouth disease, infectious diarrhea excluding specific gastrointestinal conditions, and Hepatitis B, all suggesting active transmission in the population. The reported deaths were relatively low in comparison to the total number of cases, indicating either the less severe nature of many infections or effective clinical management. However, the high case numbers signal ongoing public health challenges that demand continued vigilance and intervention.

The all-cause mortality among AIDS patients remains a notable point of concern for the medical community, with a considerable number of deaths reported for the month. Acquired immune deficiency syndrome continues to be a significant contributor to the disease burden in terms of mortality. Contrastingly, other diseases like influenza and measles reported cases without associated fatalities, reflecting either successful vaccination efforts or less aggressive disease strains during the observed period.

Concerns:

Diseases with high incidence, such as hand, foot, and mouth disease, and infectious diarrhea, did not correspond with high mortality, indicating effective clinical management and perhaps less virulent pathogen strains. However, their high prevalence poses significant concerns for public health due to their potential disruptiveness, morbidity, and strain on healthcare resources. Hepatitis B, with its persistent high case numbers, presents a chronic challenge, requiring continued vaccination and monitoring efforts.

Public concern was particularly heightened around newly emerging or re-emerging infections, evidenced by the close monitoring and rapid inclusion of Monkeypox as a Class B infectious disease since September 20, 2023. While Monkeypox did not contribute to significant case numbers or mortality this month, the change in its reporting status reflects the public health priority to stay responsive to potential outbreaks.

Limitations:

The current data's scope has several limitations that must be recognized for a comprehensive understanding of disease prevalence and its impact. Monthly reported cases may lack precision due to potential underreporting, differences in regional surveillance capacity, and delays in data compilation. Furthermore, the reliance on both clinically-diagnosed and laboratory-confirmed cases introduces variability in case definition and detection, which could either overestimate or underestimate disease occurrence.

Additionally, the exclusion of data from the special administrative regions of Hong Kong and Macau, as well as Taiwan, means that the report does not encompass all Chinese territories, possibly skewing the national profile of disease spread and risk. It is also important to note that the annual verification process might adjust reported figures post hoc, as duplicate cases or misreporting are corrected in February of the following year.

Recommendations:

Given the present epidemiological insights, it is recommended that the general public in Mainland China remain keenly aware of the risks associated with infectious diseases and actively engage in preventive measures. Effective hand hygiene, adherence to vaccination schedules, and safe food handling practices are pivotal strategies for reducing the transmission of high-incidence diseases. High-risk individuals, including those with chronic liver diseases, should maintain regular health check-ups and consider Hepatitis B vaccination if not already immunized.

Public education campaigns should be ramped up to bolster awareness regarding newly included infectious diseases, like Monkeypox, and encourage reporting of suspected cases to authorities. The current data emphasizes the efficacy of disease management protocols and the need for sustained healthcare investments to handle both prevalent and emerging health threats. Collaboration with global health organizations will ensure that China stays at the forefront of infectious disease surveillance, outbreak response, and research initiatives.

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.

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 September 2023 in Chinese Mainland

Summary:
Since September 2023, mainland China has experienced a significant increase in respiratory diseases. Medical professionals and experts are not overly concerned as these cases are similar to common colds, coughing, and fever symptoms and are treatable. An uptick in respiratory ailments among children in Northern China has been reported by the World Health Organization (WHO) and China's National Health Commission, which corresponds with the lifting of COVID-19 restrictions and seasonal changes. There's no indication of new infectious disease pathogens emerging at this time.

Outbreaks of Known Diseases:
The recent surge in illnesses has primarily involved known pathogens, such as Influenza, Mycoplasma pneumoniae, Respiratory Syncytial Virus (RSV), and Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). These diseases have mostly affected children who are more susceptible than adults to these pathogens.

Emergence of Novel Pathogens:
Currently, there is no evidence of the emergence of new pathogens. Investigations by Chinese health authorities and the WHO into unexplained clusters of pneumonia in Beijing and Liaoning suggest that the cases are due to known pathogens rather than novel infectious disease agents. Experts believe the current situation may be due to reduced exposure to respiratory viruses in the past, leading to lower immunity to these endemic viruses.

In summary, while there has been an increase in respiratory diseases in mainland China, these are predominantly due to known pathogens, not new infectious agents. Health agencies and international organizations are closely monitoring the situation and taking measures to control the spread of diseases.

News information since September 2023 around world

Summary:
The global overview since September 2023 reveals multiple infectious disease events with varying impact, including established diseases in specific risk areas, the sources of infection, recent case updates, and notable outbreaks.
Outbreaks of Known Diseases:
Unfortunately, the provided text does not include specific details about known disease outbreaks during the mentioned period. For a complete report, details about the diseases, affected regions, and the number of cases would be necessary. Please provide the relevant information, so that a detailed accounting of known disease outbreaks can be furnished.
Emergence of Novel Pathogens:
The given text lacks information on the emergence of novel pathogens. To discuss any new pathogens that have appeared since September 2023, additional specific data would be required. Please provide the relevant excerpts or summaries that refer to the appearance of any new infectious agents.