

Chinese Notifiable Infectious Diseases Surveillance Project

Dysentery

November 2023

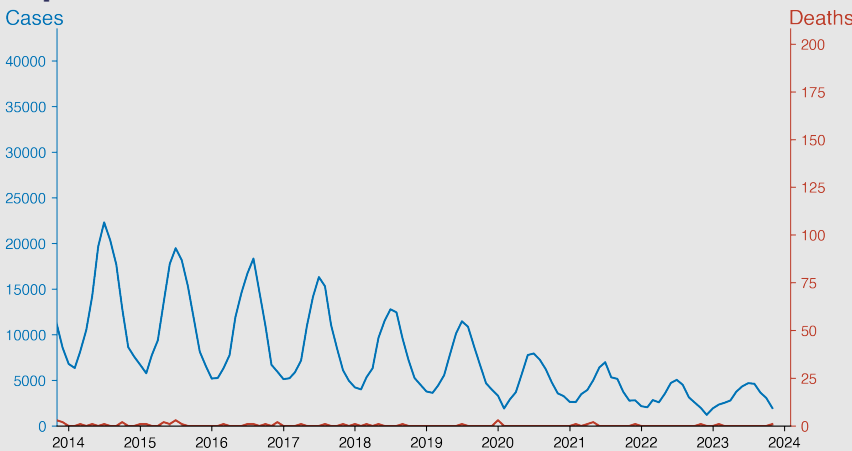
Introduction

Dysentery is an infectious disease characterized by inflammation of the intestines, primarily the colon. It is usually caused by shigella bacteria or amoebae. The primary symptom is severe diarrhea, often blood-streaked or mucus-filled, accompanied by abdominal pain, fever, and dehydration. It is transmitted through contaminated food and water or person-to-person contact where hygiene is poor. While dysentery can affect people of all ages, it is particularly severe in children. Treatment typically includes fluids and electrolyte replacement, and in severe cases, antibiotics.

Highlights

- A significant decline in dysentery cases from a peak of 41,507 in August 2010 to 1,963 cases in November 2023, indicating effective control measures.
- Seasonal peaks observed during summer months, suggesting climatic factors may influence transmission rates.
- Anomalously high death toll in September 2012 with 198 deaths, contrasting with generally low mortality associated with dysentery in other periods.
- Recent data show a maintained low transmission with occasional fatalities, maintaining dysentery as a controlled but persistent health concern on the Chinese mainland.

Temporal Trend



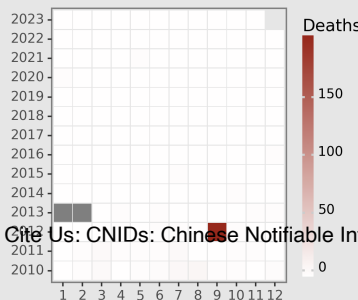
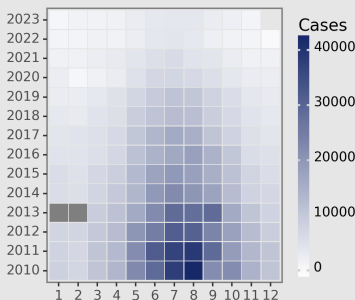
Cases Analysis

The case reports of dysentery on the Chinese mainland from 2010 to 2023 exhibit a seasonal pattern, peaking between June and August each year, which suggests a potential relationship with climatic factors favorable for transmission during warmer months. Initially, there is an annual increase in cases, reaching the highest count in August 2010 at 41,507 cases. From 2010 through 2023, there is a gradual decline in the number of cases, dropping to just 1,963 in November 2023. The overall trend indicates a successful reduction in dysentery incidence over the 14-year period.

Deaths Analysis

Dysentery-related deaths are considerably low compared to the case numbers, with most months reporting zero to three deaths. A notable spike occurred in September 2012 with 198 deaths, an outlier when compared to the overall data. Apart from this exception, the fatalities remained low throughout the years. The mortality data, coupled with the trend in cases, suggest effective clinical management and possible improvements in sanitation and public health measures. The consistently low number of deaths over the years also indicates a low case-fatality ratio for dysentery in the population.

Distribution



Cite Us: CNIDs: Chinese Notifiable Infectious Diseases Surveillance Project.

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Version: 2024-01-05 (UTC+)