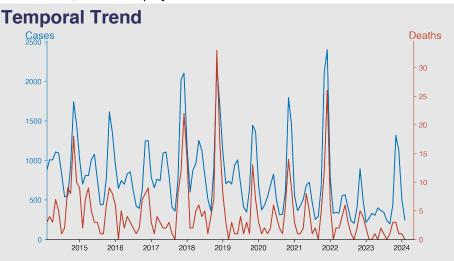
Chinese Notifiable Infectious Diseases Surveillance Report

Epidemic hemorrhagic fever

February 2024

Introduction

Epidemic hemorrhagic fever is a group of viral diseases characterized by fever, bleeding disorders, and often kidney damage. These diseases can be caused by several distinct families of viruses like Arenaviridae, Bunyaviridae, Filoviridae, and Flaviviridae. Notable examples include Ebola, Dengue, Yellow Fever, and Hantavirus. Transmission varies, encompassing vectors like mosquitoes and ticks or contact with infected animal excreta. Outbreaks can cause severe public health challenges, with certain forms having high fatality rates. Control measures hinge on vector control, improved sanitation, and in some cases, vaccine deployment.



Highlights

- There's a seasonal pattern in the Epidemic Hemorrhagic Fever cases and deaths in the Chinese mainland, with peaks occurring primarily in winter months, specifically between November and January of each year.
- From 2014 to 2024, there is a general trend towards the reduction in both cases and deaths, demonstrating the efficacy of control and prevention measures.
- The mortality rate remained low across the years, indicating effective clinical management for most cases.
- As of February 2024, there are 247 cases with no reported deaths, showing a good prognosis for current cases.

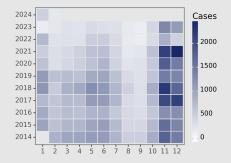
Cases Analysis

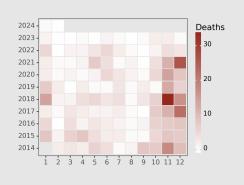
The data indicates a seasonal pattern for Epidemic hemorrhagic fever with peaks typically in November and lower incidence in late summer. The highest number of cases occurred in November 2021 (2120 cases), followed by a smaller, yet significant, surge in November 2014 (1744 cases). Notably, the overall trend in cases seems to peak in late autumn with a decrease seen towards the early months of the following year. A potential outlier is observed in December 2017, with cases rising to 2105. Patterns suggest a correlation with agricultural activities and rodent population dynamics.

Deaths Analysis

Although there has been a significant number of reported cases, the death rate remained relatively low throughout the decade. Deaths generally followed the pattern of cases, with more deaths occurring during peak months. However, there were instances where the death toll deviated significantly from the number of cases - September 2014, November 2018, and December 2021 are such examples. Overall, despite increases in reported cases during specific periods, advances in healthcare or improved reporting may be contributing to the relatively low and stable mortality rates.

Distribution





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