

CNIDs: Chinese Notifiable Infectious Diseases Sensing Project

A Dynamic Sensing Report of Notifiable Infectious Diseases Data in Mainland, China

2023 July

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Monthly Report -- 2023 July

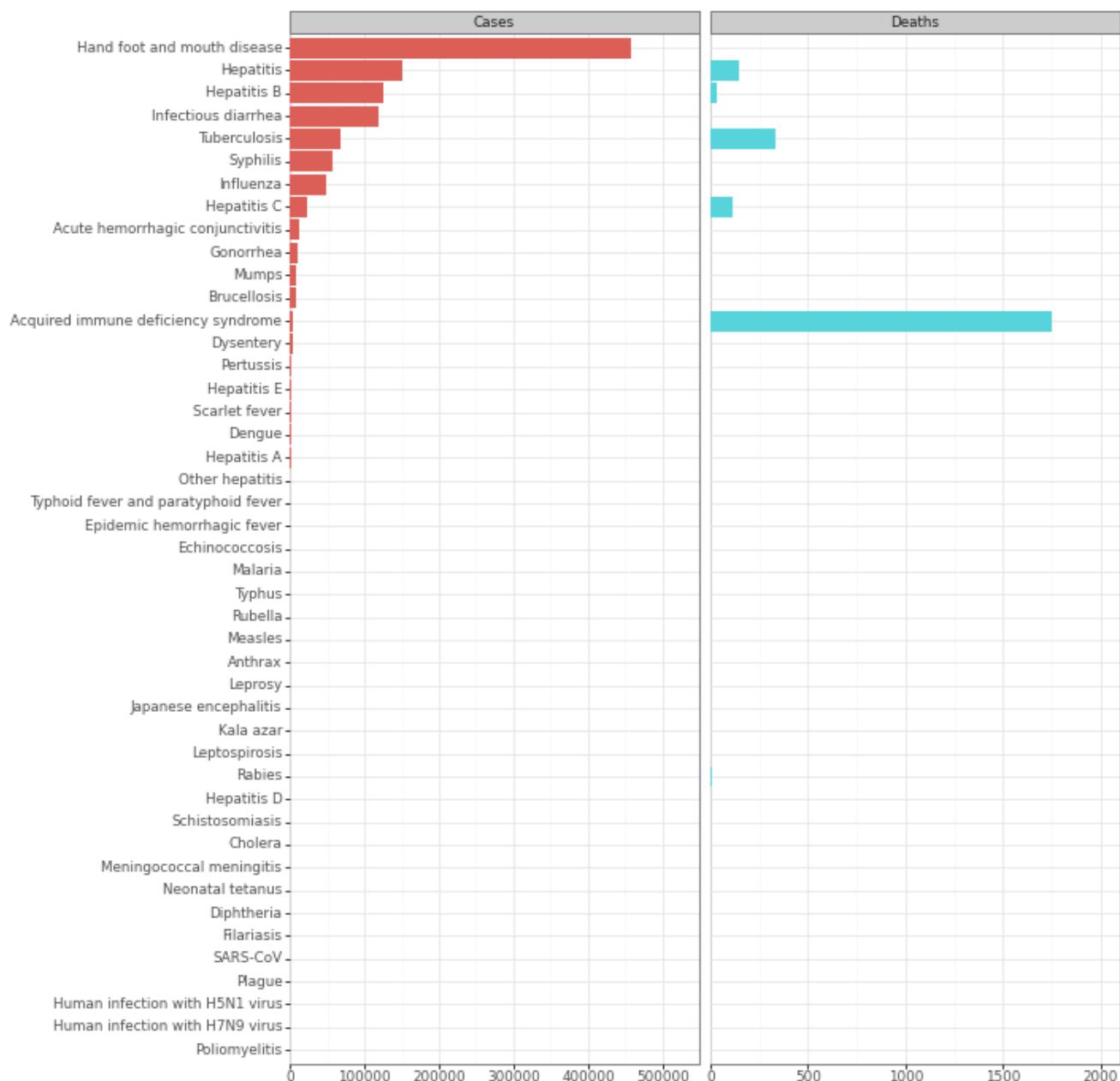


Figure 1: Monthly Notifiable Infectious Diseases Reports in 2023 July

The data presented in the table represents the monthly incidence and death rates of various diseases in July 2023. These numbers are compared with the previous month (June 2023) and the same month in the previous year (July 2022). The data provides insights into the changes in disease burden and mortality rates over time.

Hand foot and mouth disease (HFMD) had the highest number of cases in July 2023, with 457,212 reported cases. This represents a 5.57% increase compared to June 2023 and a significant 319.56% increase compared to July 2022. However, no deaths were reported for HFMD during this period.

Hepatitis had a high incidence rate in July 2023, with 151,809 cases reported. Compared to June 2023,

there was a 13.39% increase in cases, while compared to July 2022, there was a 9.65% increase. The number of deaths related to hepatitis in July 2023 was 148, with a decrease of 28.16% compared to June 2023 but an increase of 244.19% compared to July 2022.

Hepatitis B also showed a high incidence rate in July 2023, with 125,116 cases reported. This represents a 13.68% increase compared to June 2023 and an 11.07% increase compared to July 2022. The number of deaths related to Hepatitis B was 34, with a 70.00% increase compared to June 2023 and a 47.83% increase compared to July 2022.

Infectious diarrhea had 119,375 reported cases in July 2023, with a 10.08% increase compared to June 2023 and a 15.37% decrease compared to July 2022. There were no reported deaths related to infectious diarrhea during this period.

Tuberculosis had a total of 66,989 cases in July 2023. This represents a 3.40% increase compared to June 2023 and a 6.21% decrease compared to July 2022. The number of deaths related to tuberculosis was 330, with a 1.85% increase compared to June 2023 and a 10.08% decrease compared to July 2022.

Syphilis had a total of 58,247 cases in July 2023, with a 12.00% increase compared to June 2023 and a 13.34% increase compared to July 2022. There were two reported deaths related to syphilis during this period, representing a 100.00% increase compared to June 2023 and a 66.67% decrease compared to July 2022.

Influenza showed a decrease in cases in July 2023, with 48,848 reported cases. This represents a 25.18% decrease compared to June 2023 and a significant 92.47% decrease compared to July 2022. No deaths were reported for influenza during this period.

Hepatitis C had a total of 22,326 cases in July 2023, with a 13.54% increase compared to June 2023 and a 2.10% increase compared to July 2022. The number of deaths related to hepatitis C was 114, with a 38.71% decrease compared to June 2023 and a 533.33% increase compared to July 2022.

The data also includes information on other diseases such as acute hemorrhagic conjunctivitis, gonorrhea, mumps, brucellosis, Acquired Immune Deficiency Syndrome (AIDS), dysentery, pertussis, hepatitis E, scarlet fever, dengue, hepatitis A, and others. These diseases show varying levels of incidence and mortality rates in July 2023 compared to previous months and years.

Overall, the data highlights the dynamic nature of disease patterns and the importance of monitoring changes in disease incidence and mortality rates. These findings can guide public health interventions and policies aimed at prevention, control, and management of various diseases.

Table 1: Monthly Notifiable Infectious Diseases Cases in 2023 July

Diseases	Cases	Comparison with 2023 June	Comparison with 2022 July
Plague	0	0 (/)	-1 (-100.00%)
Cholera	4	1 (33.33%)	-6 (-60.00%)
SARS-CoV	0	0 (/)	0 (/)
Acquired immune deficiency syndrome	4,854	-905 (-15.71%)	187 (4.01%)
Hepatitis	151,809	17,921 (13.39%)	13,360 (9.65%)
Hepatitis A	1,053	109 (11.55%)	-16 (-1.50%)
Hepatitis B	125,116	15,053 (13.68%)	12,468 (11.07%)
Hepatitis C	22,326	2,662 (13.54%)	459 (2.10%)
Hepatitis D	14	-9 (-39.13%)	-2 (-12.50%)
Hepatitis E	2,620	91 (3.60%)	395 (17.75%)
Other hepatitis	680	15 (2.26%)	56 (8.97%)
Poliomyelitis	0	0 (/)	0 (/)
Human infection with H5N1 virus	0	0 (/)	0 (/)
Measles	97	8 (8.99%)	5 (5.43%)

Epidemic hemorrhagic fever	344	-21 (-5.75%)	-60 (-14.85%)
Rabies	9	-2 (-18.18%)	-8 (-47.06%)
Japanese encephalitis	33	30 (1000.00%)	20 (153.85%)
Dengue	1,604	1,549 (2816.36%)	1,601 (53366.67%)
Anthrax	51	20 (64.52%)	-13 (-20.31%)
Dysentery	4,684	331 (7.60%)	-371 (-7.34%)
Tuberculosis	66,989	2,201 (3.40%)	-4,433 (-6.21%)
Typhoid fever and paratyphoid fever	657	30 (4.78%)	-84 (-11.34%)
Meningococcal meningitis	3	-6 (-66.67%)	-2 (-40.00%)
Pertussis	2,767	1,255 (83.00%)	-1,467 (-34.65%)
Diphtheria	0	-1 (-100.00%)	-1 (-100.00%)
Neonatal tetanus	2	1 (100.00%)	0 (0.00%)
Scarlet fever	2,237	-447 (-16.65%)	479 (27.25%)
Brucellosis	9,164	838 (10.06%)	-519 (-5.36%)
Gonorrhea	10,104	1,241 (14.00%)	841 (9.08%)
Syphilis	58,247	6,240 (12.00%)	6,856 (13.34%)
Leptospirosis	25	16 (177.78%)	1 (4.17%)
Schistosomiasis	5	-2 (-28.57%)	-1 (-16.67%)
Malaria	289	25 (9.47%)	210 (265.82%)
Human infection with H7N9 virus	0	0 (/)	0 (/)
Influenza	48,848	-16,441 (-25.18%)	-599,617 (-92.47%)
Mumps	9,280	-1,430 (-13.35%)	-111 (-1.18%)
Rubella	99	-11 (-10.00%)	-7 (-6.60%)
Acute hemorrhagic conjunctivitis	13,425	8,440 (169.31%)	10,796 (410.65%)
Leprosy	36	12 (50.00%)	1 (2.86%)
Typhus	169	38 (29.01%)	-10 (-5.59%)
Kala azar	30	5 (20.00%)	1 (3.45%)
Echinococcosis	342	90 (35.71%)	26 (8.23%)
Filariasis	0	0 (/)	0 (/)
Infectious diarrhea	119,375	10,933 (10.08%)	15,907 (15.37%)
Hand foot and mouth disease	457,212	24,128 (5.57%)	348,239 (319.56%)
Total	962,794	56,087 (6.19%)	-212,100 (-18.05%)

Table 2: Monthly Notifiable Infectious Diseases Deaths in 2023 July

Diseases	Deaths	Comparison with 2023 June	Comparison with 2022 July
Plague	0	0 (/)	0 (/)
Cholera	0	0 (/)	0 (/)

SARS-CoV	0	0 (/)	0 (/)
Acquired immune deficiency syndrome	1,749	-43 (-2.40%)	187 (11.97%)
Hepatitis	148	-58 (-28.16%)	105 (244.19%)
Hepatitis A	0	0 (/)	0 (/)
Hepatitis B	34	14 (70.00%)	11 (47.83%)
Hepatitis C	114	-72 (-38.71%)	96 (533.33%)
Hepatitis D	0	0 (/)	0 (/)
Hepatitis E	0	0 (/)	-1 (-100.00%)
Other hepatitis	0	0 (/)	-1 (-100.00%)
Poliomyelitis	0	0 (/)	0 (/)
Human infection with H5N1 virus	0	0 (/)	0 (/)
Measles	0	0 (/)	0 (/)
Epidemic hemorrhagic fever	1	-1 (-50.00%)	-2 (-66.67%)
Rabies	11	2 (22.22%)	-1 (-8.33%)
Japanese encephalitis	0	0 (/)	-1 (-100.00%)
Dengue	0	0 (/)	0 (/)
Anthrax	1	1 (/)	1 (/)
Dysentery	0	0 (/)	0 (/)
Tuberculosis	330	6 (1.85%)	-37 (-10.08%)
Typhoid fever and paratyphoid fever	0	0 (/)	0 (/)
Meningococcal meningitis	0	0 (/)	0 (/)
Pertussis	0	0 (/)	0 (/)
Diphtheria	0	0 (/)	0 (/)
Neonatal tetanus	0	0 (/)	0 (/)
Scarlet fever	0	0 (/)	0 (/)
Brucellosis	1	1 (/)	1 (/)
Gonorrhea	0	0 (/)	-1 (-100.00%)
Syphilis	2	1 (100.00%)	-4 (-66.67%)
Leptospirosis	0	0 (/)	0 (/)
Schistosomiasis	0	0 (/)	0 (/)
Malaria	1	-1 (-50.00%)	0 (0.00%)
Human infection with H7N9 virus	0	0 (/)	0 (/)
Influenza	0	-1 (-100.00%)	-4 (-100.00%)
Mumps	0	0 (/)	0 (/)
Rubella	0	0 (/)	0 (/)
Acute hemorrhagic conjunctivitis	0	0 (/)	0 (/)
Leprosy	0	0 (/)	0 (/)
Typhus	0	0 (/)	0 (/)

Kala azar	0	0 (/)	0 (/)
Echinococcosis	0	0 (/)	0 (/)
Filariasis	0	0 (/)	0 (/)
Infectious diarrhea	0	0 (/)	-1 (-100.00%)
Hand foot and mouth disease	0	0 (/)	-2 (-100.00%)
Total	2,244	-93 (-3.98%)	241 (12.03%)

History Data Analysis 2023 July

Total

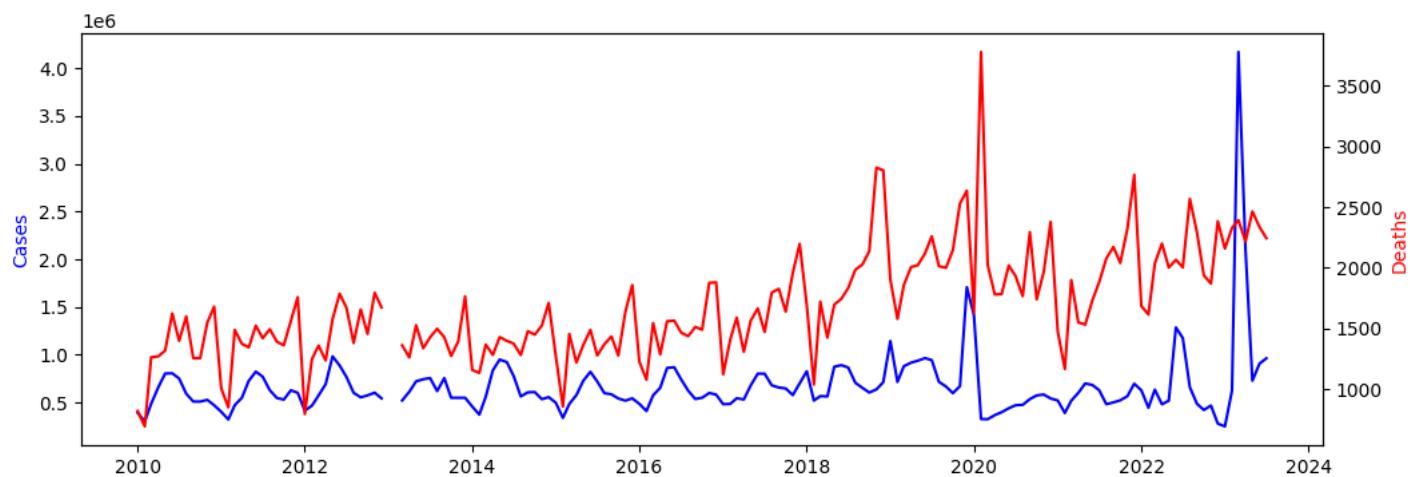


Figure 2: The Change of Total Reports before 2023 July

The provided data represents the monthly incidence and death rates for different diseases from January 2010 to July 2023. The data is categorized by year, month, type (cases or deaths), and the corresponding value.

Analyzing the monthly incidence of cases, we observe fluctuations in disease occurrence over the study period. From 2010 to 2013, there is a general upward trend in the number of cases reported each month. This trend is interrupted in January and February of 2013, where negative values are recorded. It is important to investigate the reasons behind these negative values, as they may indicate data errors or anomalies.

After 2013, the number of cases continues to fluctuate, with some months showing higher incidence rates compared to others. Notably, the highest number of cases is reported in March 2023, with a value of 4,171,295. This peak requires further investigation to understand the reasons behind such a spike in disease incidence.

Examining the monthly death rates, we observe a similar pattern to the incidence rates, with fluctuations over time. The number of deaths tends to follow the same trends as cases, suggesting a correlation between disease incidence and mortality. However, it is important to note that deaths generally occur with a lag after the onset of disease, so any changes in mortality rates may reflect the impact of previous months' incidence.

Additionally, it is worth mentioning that there are sporadic negative values recorded for deaths in January and February of 2013. Similar to the negative values in incidence, these anomalies should be further investigated for data accuracy.

Overall, these data provide insights into the temporal patterns of disease occurrence and mortality. The fluctuations observed highlight the dynamic nature of disease epidemiology and the need for continuous monitoring and analysis. Further research is necessary to understand the underlying factors contributing to the observed trends and anomalies in order to inform public health interventions and improve disease prevention and control strategies.

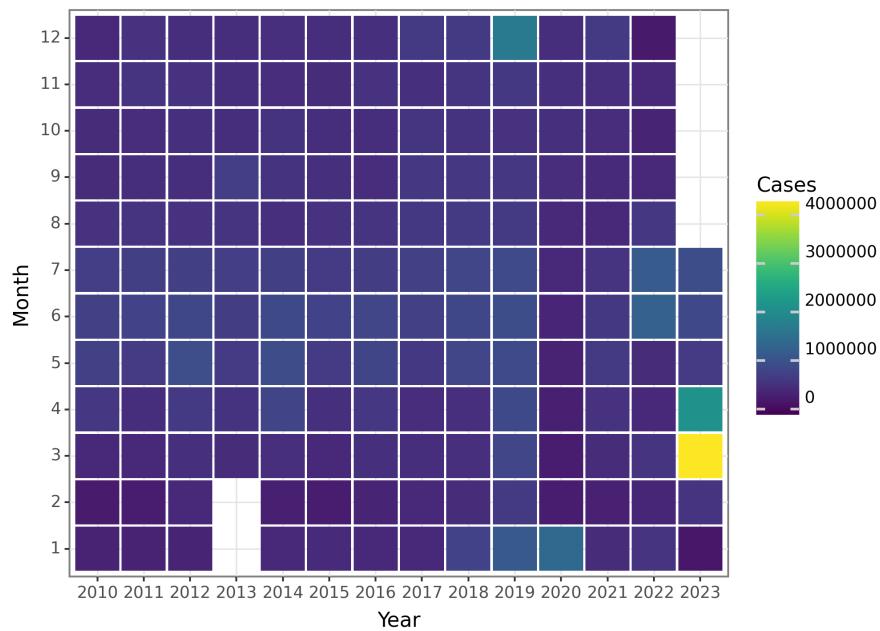


Figure 3: The Change of Total Cases before 2023 July

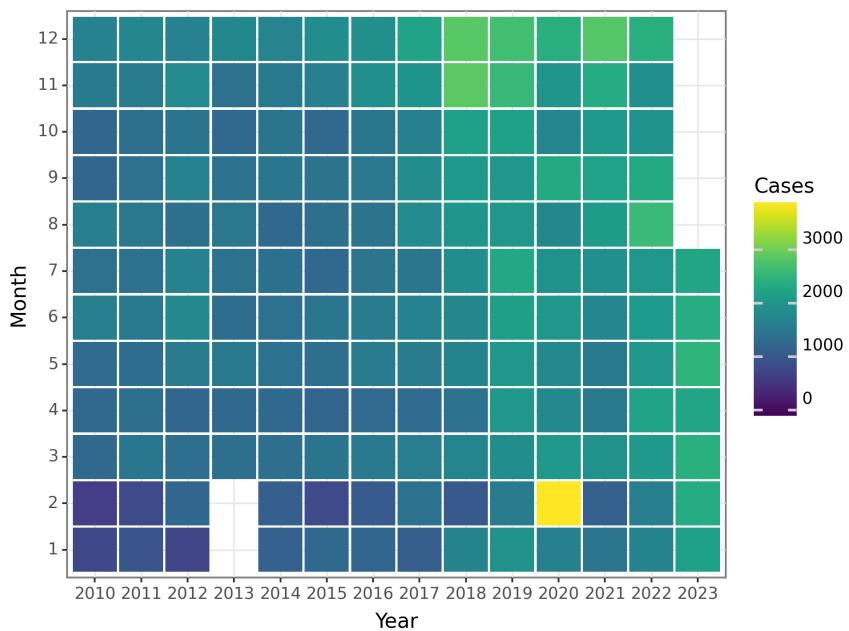


Figure 4: The Change of Total Deaths before 2023 July

Plague

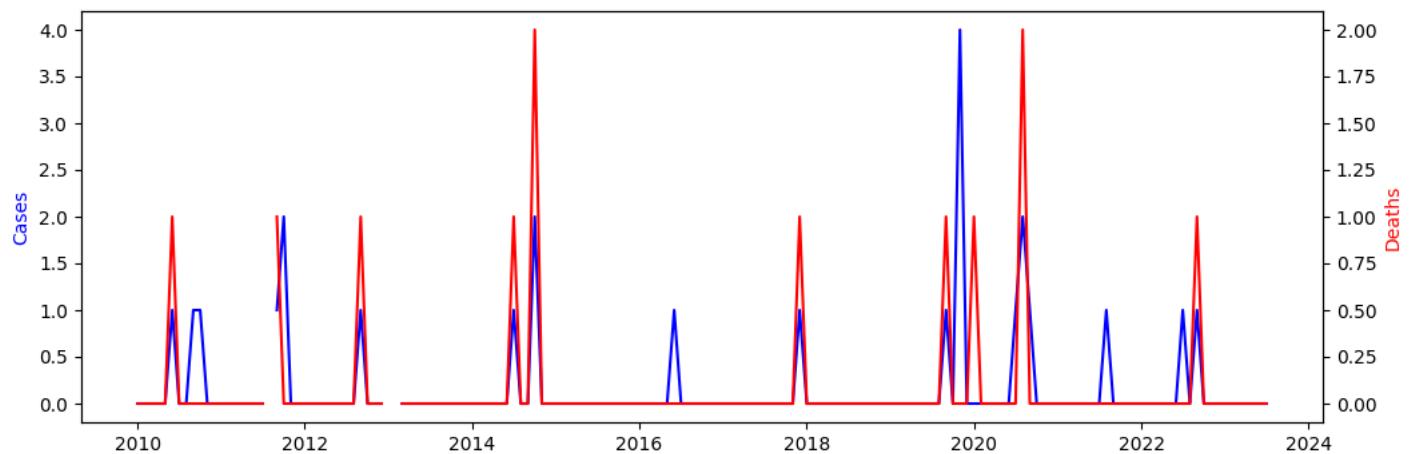


Figure 5: The Change of Plague Reports before 2023 July

Based on the provided data on the monthly cases and deaths of Plague in July 2023, we can observe the following trends:

For the cases: - In the year 2010, there were no reported cases of Plague in January, February, March, April, May, July, and August. However, there was one case reported in June and September, and two cases in October. - In 2011, there were no reported cases from January to June. However, in August, there was a decrease of 10 cases, suggesting a possible error in data recording. There was one case reported in September and two cases in October. - In 2012, there were no reported cases from January to August. However, there was one case reported in September. - In 2013, there was a decrease of 10 cases reported in January and February. No cases were reported from March to December. - In 2014, there were no reported cases from January to June. However, there was one case reported in July and two cases in October. - In 2015, there were no reported cases throughout the year. - In 2016, there was one case reported in June. No cases were reported from July to December. - In 2017, there were no reported cases throughout the year. - In 2018, there was one case reported in December. No cases were reported in the other months. - In 2019, there was one case reported in September and four cases in November. - In 2020, there was one case reported in July, two cases in August, and one case in September. No cases were reported in the other months. - In 2021, there was one case reported in August. No cases were reported in the other months. - In 2022, there was one case reported in July and one case in September. No cases were reported in the other months. - In 2023, there were no reported cases in January, February, March, April, May, June, and July.

For the deaths: - In the year 2010, there were no reported deaths in January, February, March, April, May, July, and August. However, there was one reported death in June and September. - In 2011, there were no reported deaths from January to June. However, in August, there was a decrease of 10 deaths, suggesting a possible error in data recording. There was one reported death in September. - In 2012, there were no reported deaths from January to August. However, there was one reported death in September. - In 2013, there was a decrease of 10 deaths reported in January and February. No deaths were reported from March to December. - In 2014, there were no reported deaths from January to June. However, there was one reported death in July and two deaths in October. - In 2015, there were no reported deaths throughout the year. - In 2016, there were no reported deaths throughout the year. - In 2017, there were no reported deaths throughout the year. - In 2018, there were no reported deaths throughout the year. - In 2019, there was one reported death in September. - In 2020, there was one reported death in January, two deaths in August, and no deaths in the other months. - In 2021, there were no reported deaths throughout the year. - In 2022, there was one reported death in September. - In 2023, there were no reported deaths in January, February, March, April, May, June, and July.

Overall, the data suggests that there have been sporadic cases of Plague over the years, with some years having no reported cases. It is important to note that the data may contain errors, as indicated by the

sudden decreases in cases and deaths in certain months. Further analysis and verification of the data are required to draw more accurate conclusions.

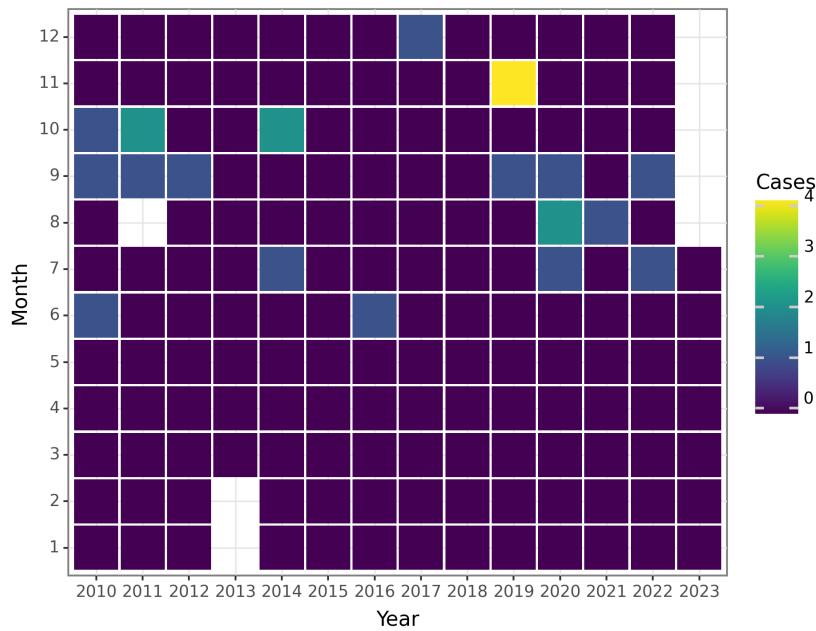


Figure 6: The Change of Plague Cases before 2023 July

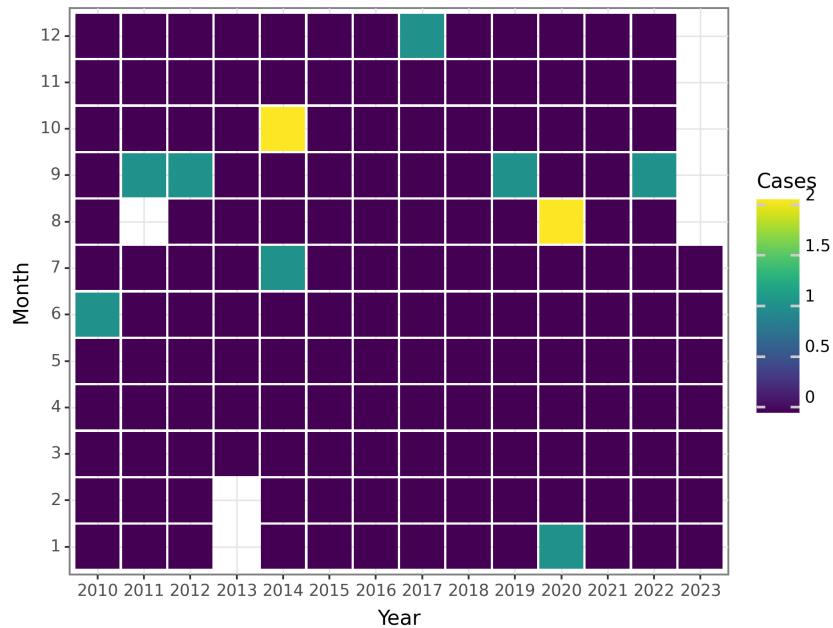


Figure 7: The Change of Plague Deaths before 2023 July

Cholera

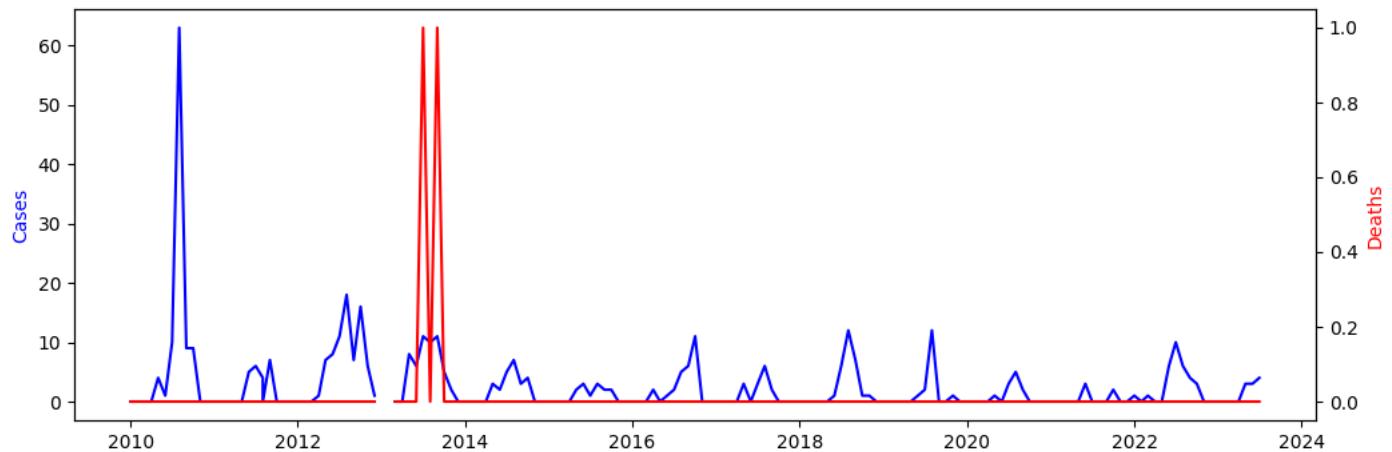


Figure 8: The Change of Cholera Reports before 2023 July

Based on the provided data, which represents the monthly incidence and deaths of Cholera from January 2010 to July 2023, we can observe several trends and patterns.

Firstly, in terms of the monthly incidence of Cholera cases, there is a notable variation throughout the years. From 2010 to 2012, the number of cases remained relatively low, with sporadic increases in certain months. However, from 2013 onwards, there was a general upward trend in the number of Cholera cases reported. The highest peak occurred in August 2018, with a total of 12 cases reported. Following this peak, there was a fluctuation in the number of cases, with some months reporting zero cases.

Furthermore, it is important to note that there were certain months where negative values were recorded for Cholera cases. These negative values may indicate data entry errors or anomalies in the reporting system. It is crucial to investigate and rectify these discrepancies to ensure the accuracy of the data.

In contrast to the incidence of Cholera cases, the data for Cholera deaths remained consistently low throughout the entire period. There were no reported deaths from Cholera for any month across the years, suggesting that the disease was not fatal within the studied population during this time frame.

In summary, the data indicates an overall increase in the incidence of Cholera cases from 2013 onwards, with some fluctuations and anomalies in reporting. However, it is important to interpret these findings with caution and consider potential data issues or limitations. Further analysis and investigation are necessary to understand the underlying factors contributing to the observed trends in Cholera incidence.

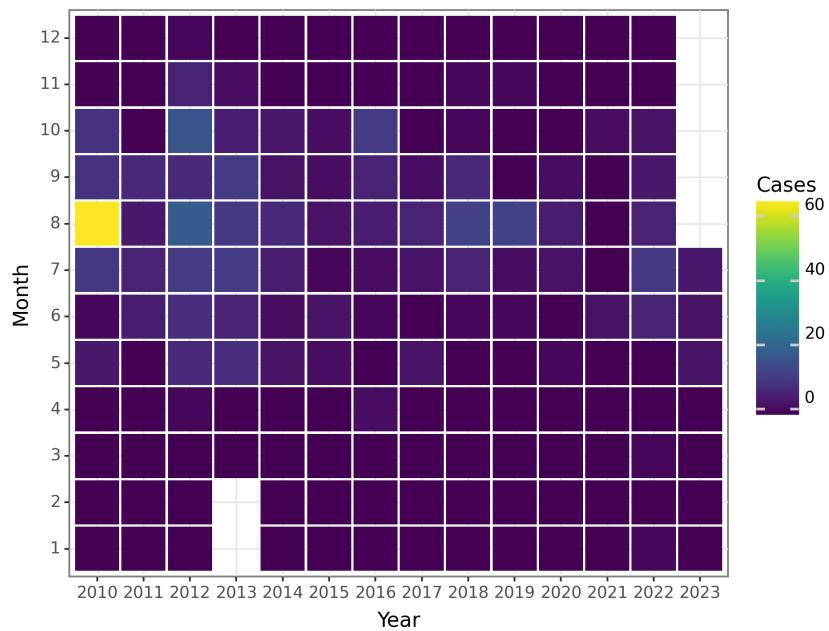


Figure 9: The Change of Cholera Cases before 2023 July

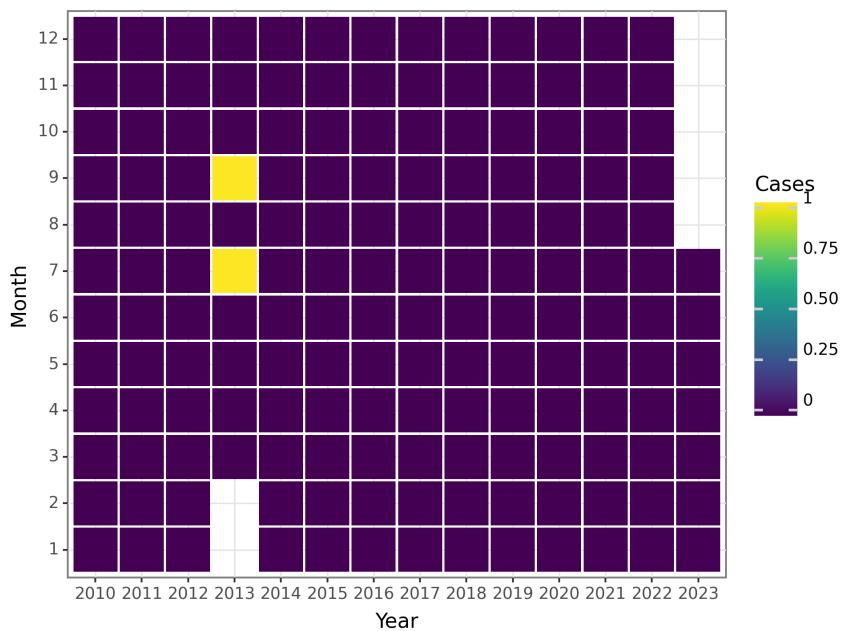


Figure 10: The Change of Cholera Deaths before 2023 July

SARS-CoV

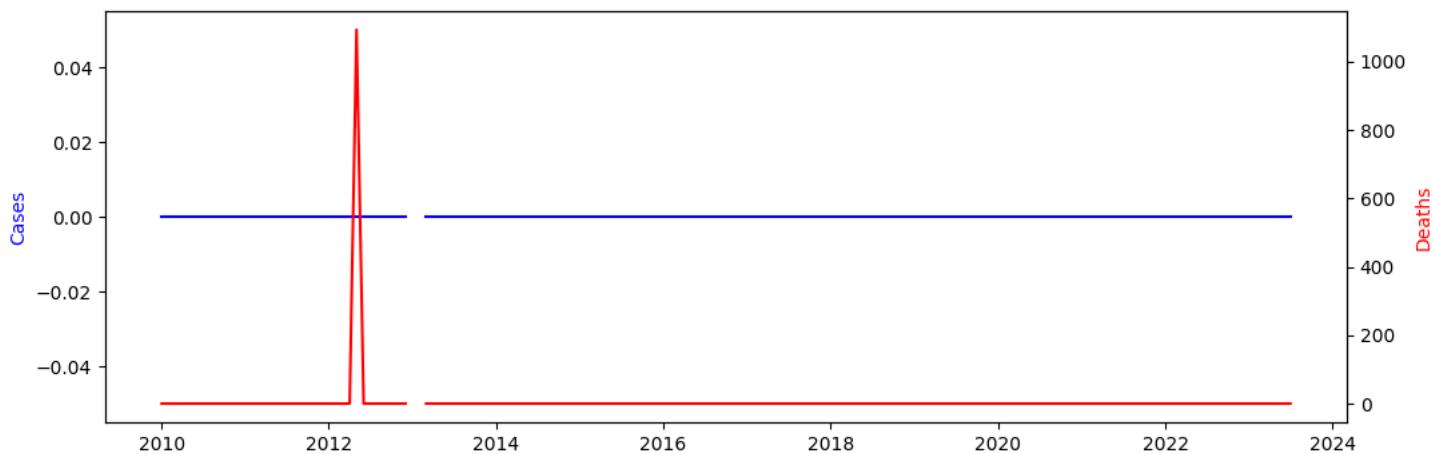


Figure 11: The Change of SARS-CoV Reports before 2023 July

The data provided represents the monthly incidence and death cases of SARS-CoV for the period between January 2010 and July 2023. It is noteworthy that there were no reported cases or deaths throughout this entire period.

This data suggests that there has been a complete absence of SARS-CoV cases and deaths in the study population during the specified timeframe. This could be attributed to several potential factors, such as effective public health measures, vaccination efforts, or low prevalence of the disease in the population. The absence of reported cases and deaths indicates a successful control and prevention strategy against SARS-CoV. This could be attributed to robust surveillance systems, early detection and isolation of cases, efficient contact tracing, and effective public health interventions.

It is important to note that the data includes negative values for cases and deaths in some months of 2013 and 2012, which might be due to data reporting errors. These negative values should be further investigated and rectified to ensure the accuracy of the data.

Overall, the data suggests that the efforts made in controlling the spread of SARS-CoV have been successful, resulting in a lack of reported cases and deaths. This highlights the importance of continued vigilance and adherence to public health measures to prevent future outbreaks and maintain the low incidence and mortality rates of SARS-CoV.

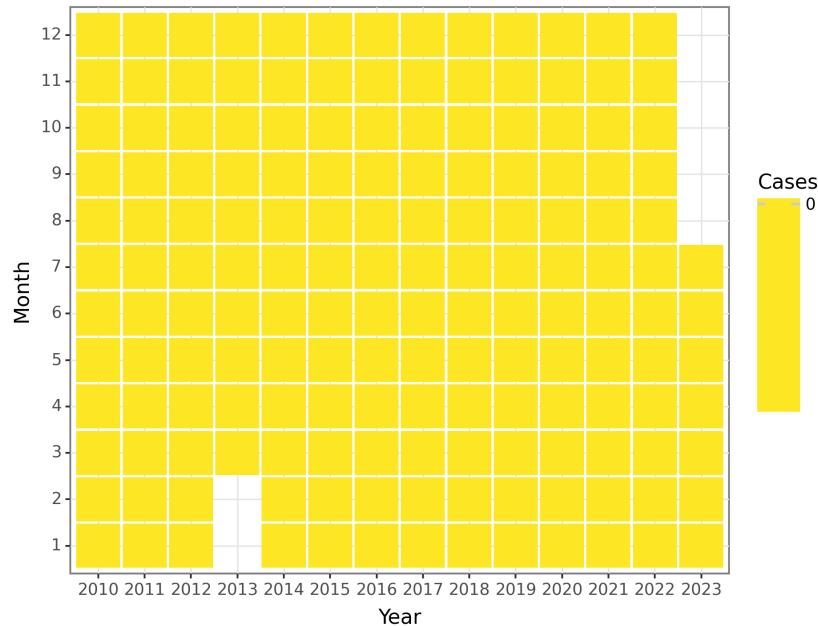


Figure 12: The Change of SARS-CoV Cases before 2023 July

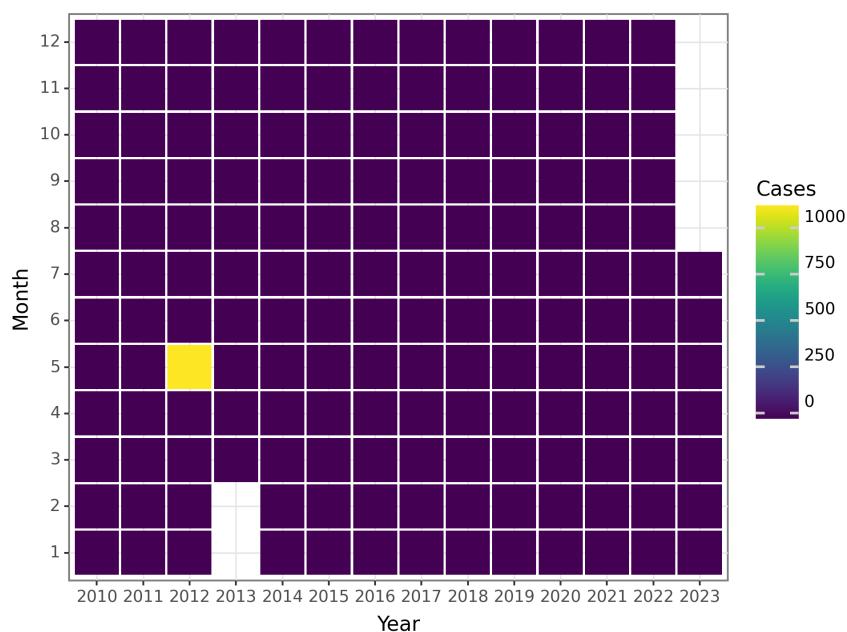


Figure 13: The Change of SARS-CoV Deaths before 2023 July

Acquired immune deficiency syndrome

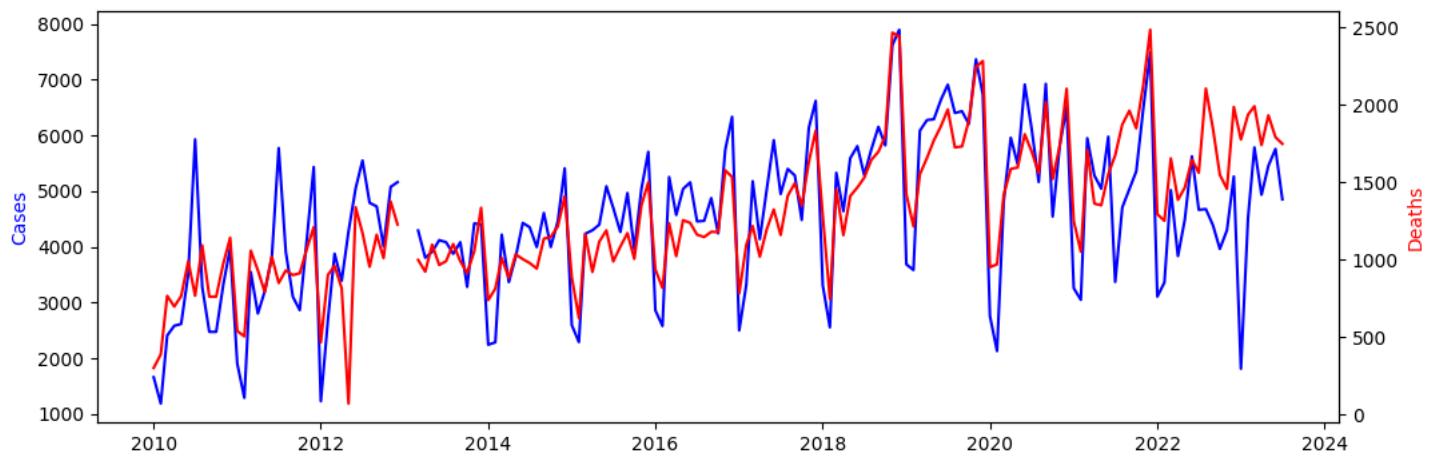


Figure 14: The Change of Acquired immune deficiency syndrome Reports before 2023 July

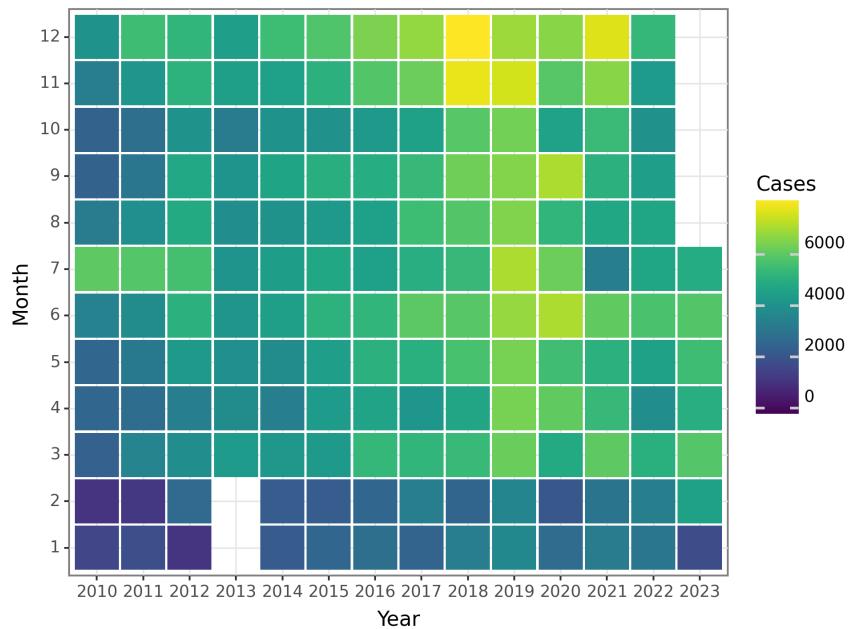


Figure 15: The Change of Acquired immune deficiency syndrome Cases before 2023 July

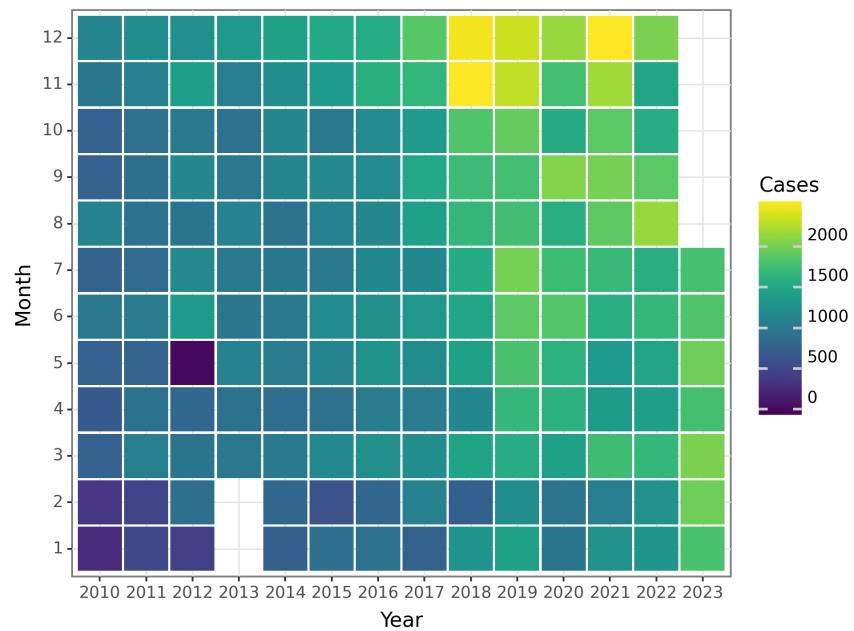


Figure 16: The Change of Acquired immune deficiency syndrome Deaths before 2023 July

Hepatitis

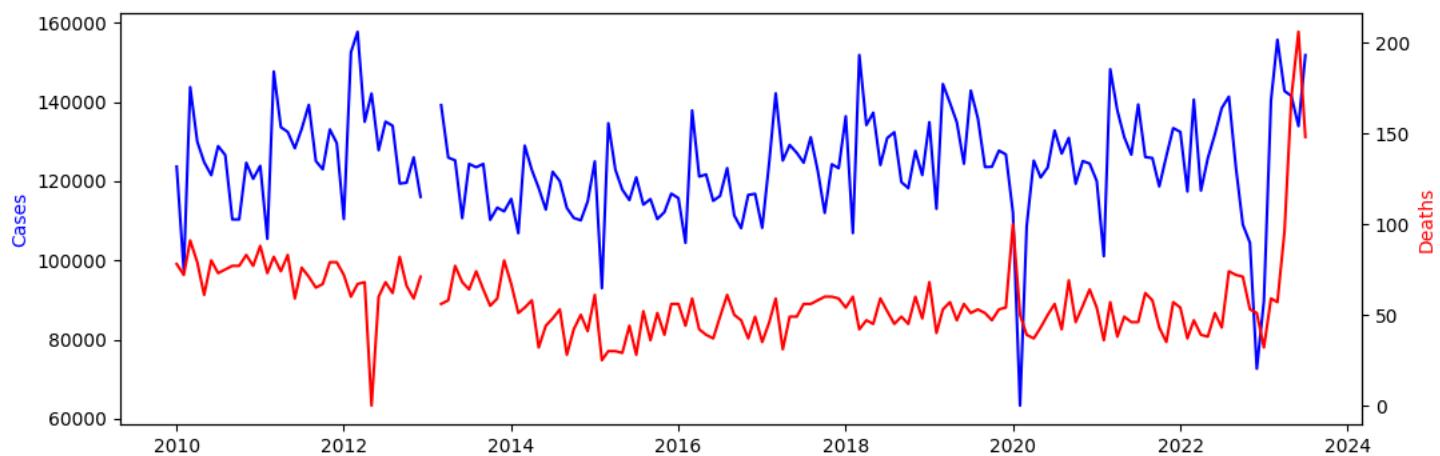


Figure 17: The Change of Hepatitis Reports before 2023 July

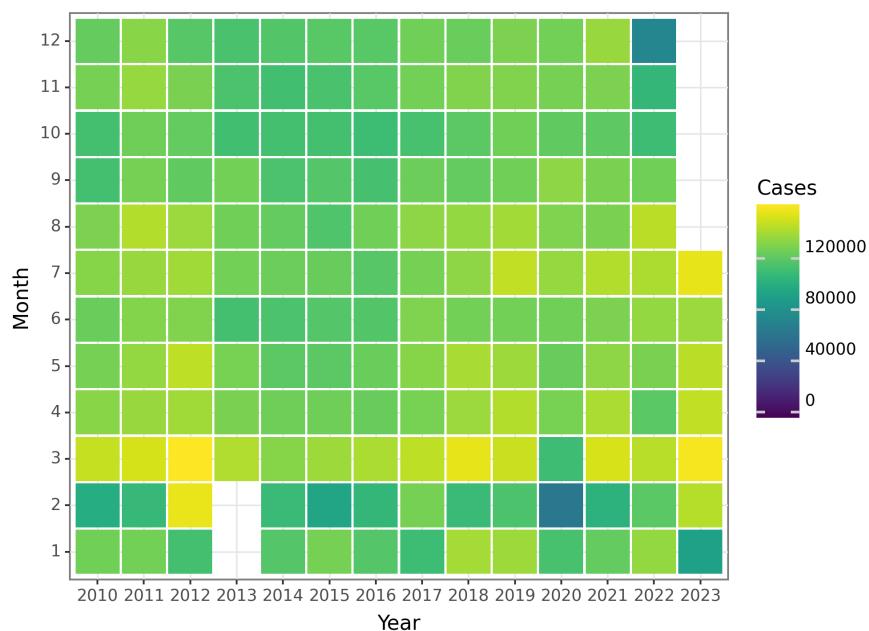


Figure 18: The Change of Hepatitis Cases before 2023 July

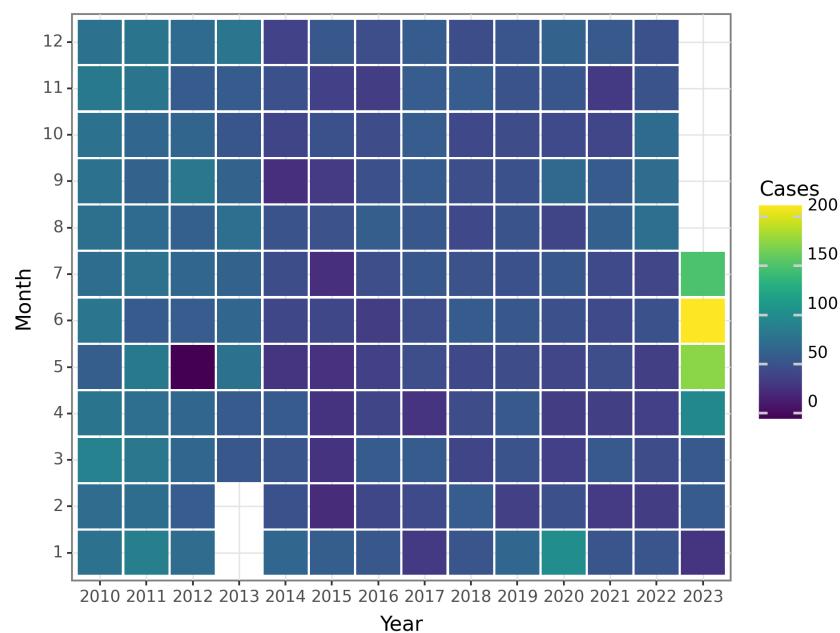


Figure 19: The Change of Hepatitis Deaths before 2023 July

Hepatitis A

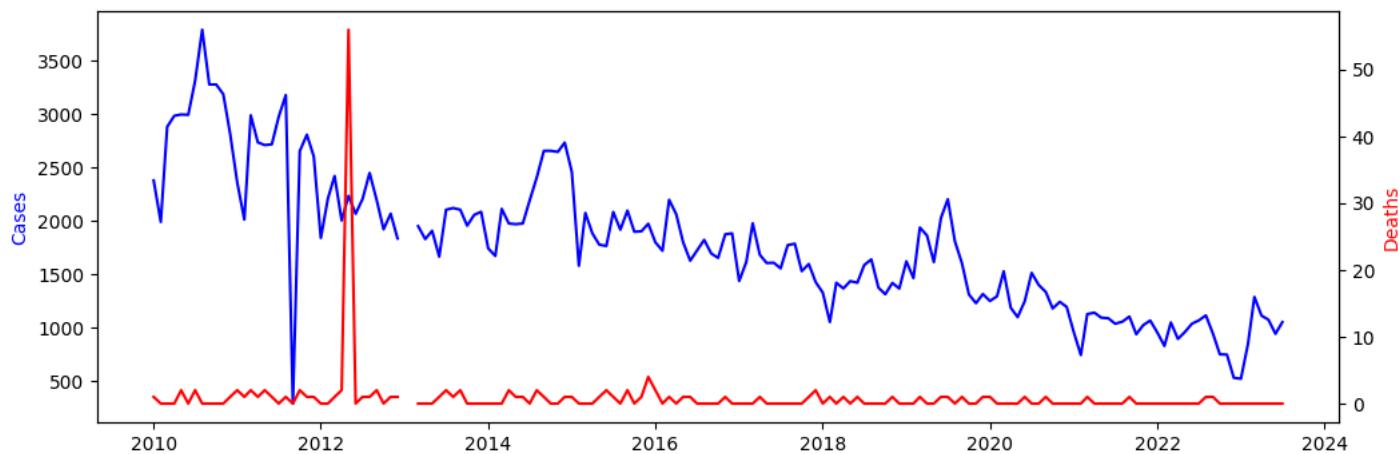


Figure 20: The Change of Hepatitis A Reports before 2023 July

The data provided represents the monthly cases and deaths of Hepatitis A from January 2010 to July 2023. The number of cases fluctuated throughout the years, with some months experiencing higher numbers of cases compared to others.

From January to August 2010, the number of cases increased steadily, reaching a peak of 3789 in August. However, the number of cases started to decline from September 2010 to November 2010, with 291, 2653, and 2807 cases respectively. The trend continued in December 2010, with 2606 reported cases.

In 2011, there was a slight increase in cases during the first three months, with 2359, 2013, and 2988 cases in January, February, and March respectively. The number of cases then decreased in April and May, with 2735 and 2710 cases respectively. However, the number of cases increased again in June and July, reaching 2717 and 2975 cases respectively.

The pattern of fluctuating cases continued in the following years, with some months experiencing higher numbers of cases compared to others. For example, in 2012, the number of cases peaked in March with 2421 reported cases, while in May, there were only 2235 cases.

In 2013, there were some discrepancies in the data, with negative values reported for January and February. These anomalies may be due to data entry errors or other factors that require further investigation. However, from March to December 2013, the number of cases remained relatively stable, with a peak of 2105 cases in September.

In subsequent years, the number of cases fluctuated, with some months experiencing higher numbers of cases compared to others. For example, in 2014, the number of cases peaked in September and October, with 2656 cases reported for both months.

The data also includes information on the number of deaths related to Hepatitis A. The number of deaths varied over the years, with some months reporting no deaths while others reported multiple deaths. For example, in May 2012, there were 56 reported deaths, while in October 2014, there were no reported deaths.

It is important to note that the data provided is specific to Hepatitis A and does not encompass other diseases or conditions. Therefore, the analysis and conclusions drawn from this data should be limited to Hepatitis A only.

In conclusion, the data on the monthly cases and deaths of Hepatitis A from January 2010 to July 2023 shows fluctuations in the number of cases and deaths over the years. Further analysis and investigation are required to identify any underlying factors or trends that may have contributed to these fluctuations.

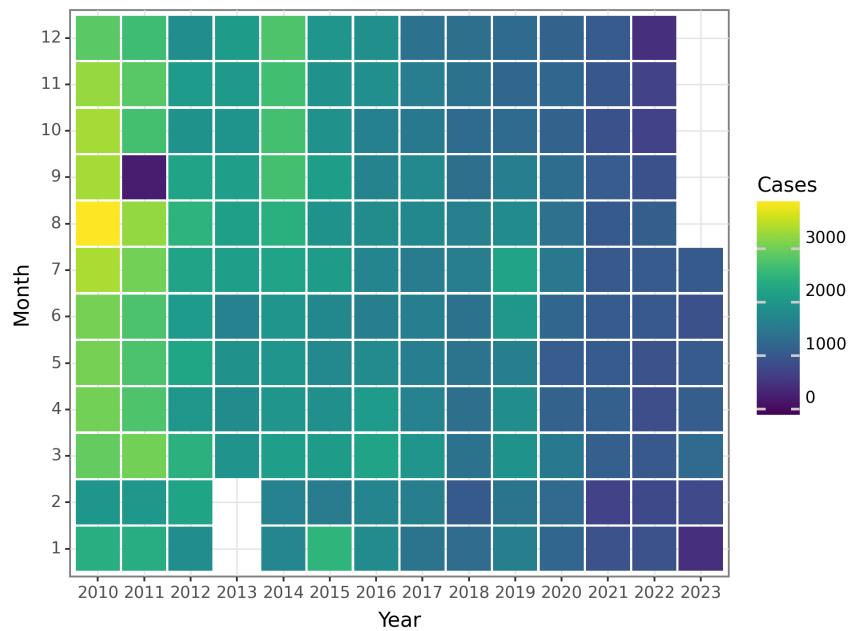


Figure 21: The Change of Hepatitis A Cases before 2023 July

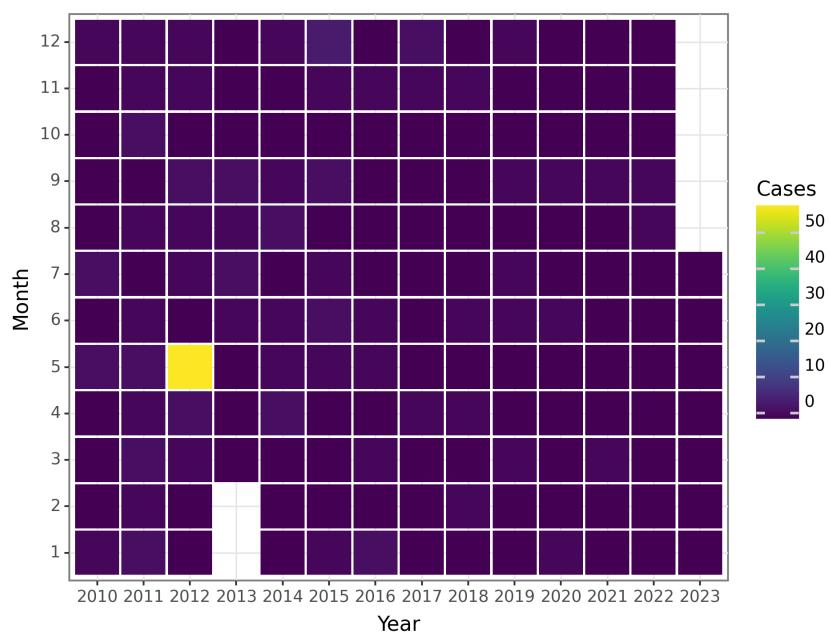


Figure 22: The Change of Hepatitis A Deaths before 2023 July

Hepatitis B

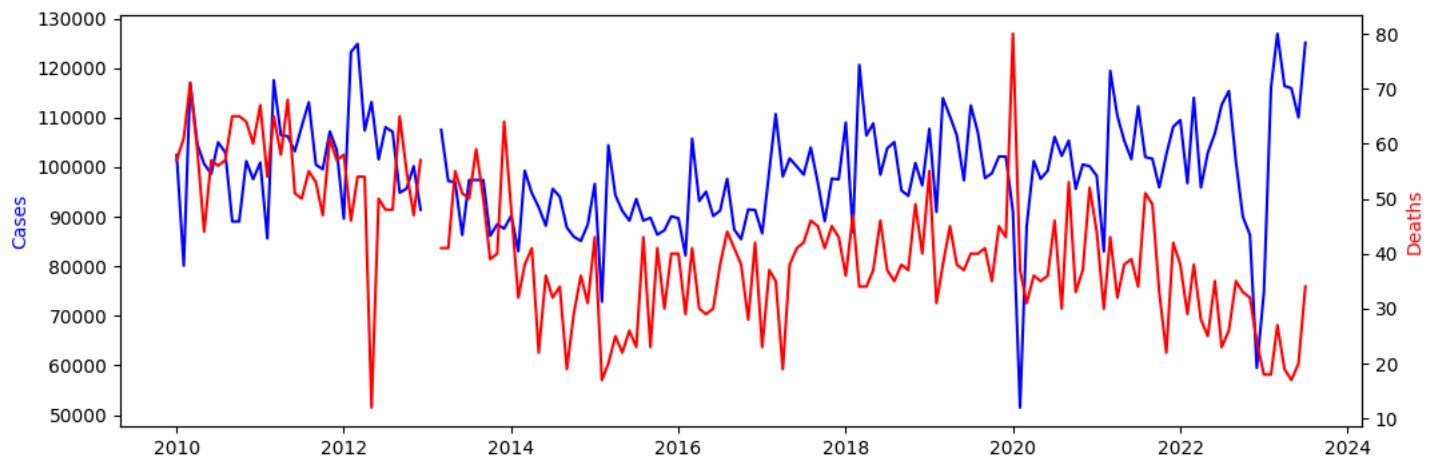


Figure 23: The Change of Hepatitis B Reports before 2023 July

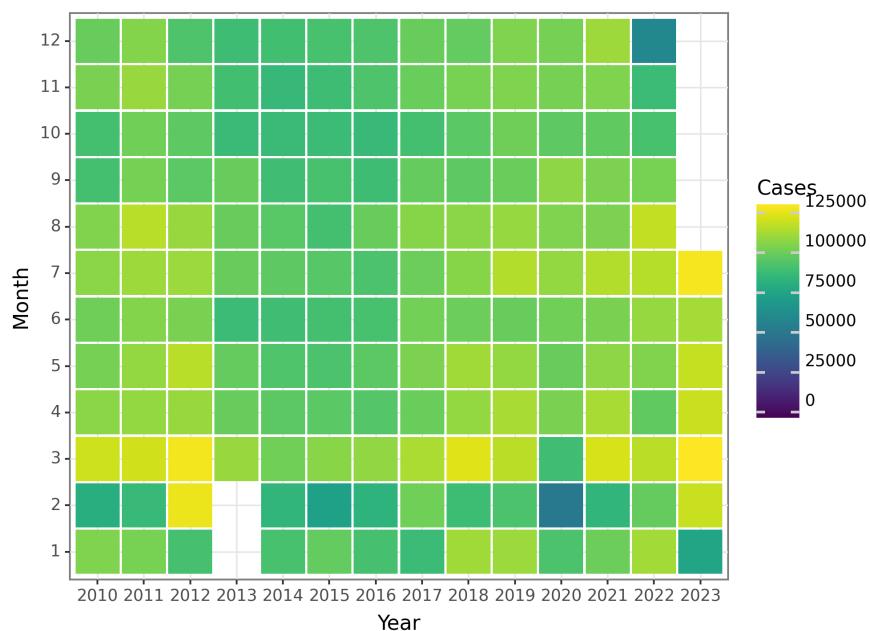


Figure 24: The Change of Hepatitis B Cases before 2023 July

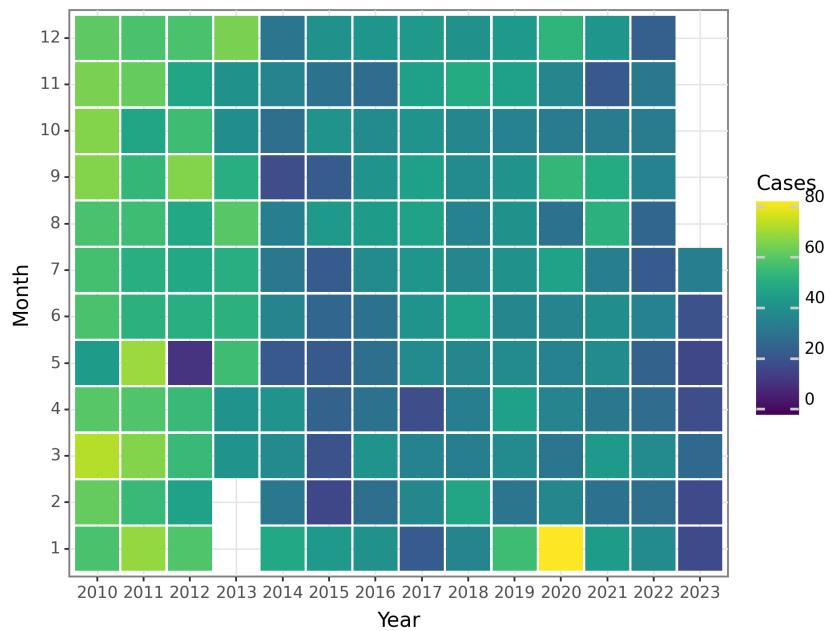


Figure 25: The Change of Hepatitis B Deaths before 2023 July

Hepatitis C

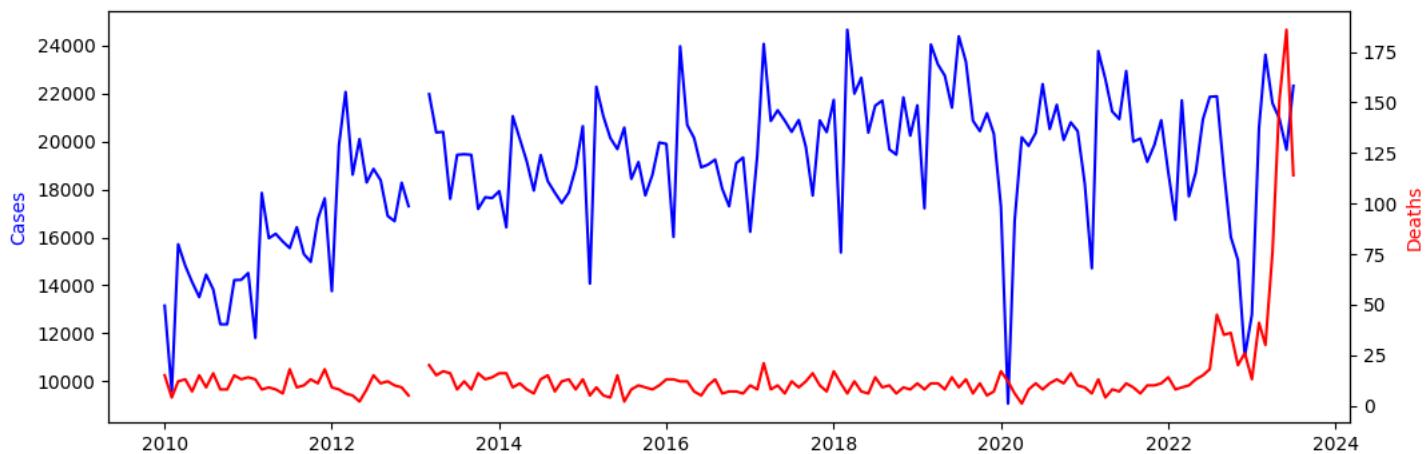


Figure 26: The Change of Hepatitis C Reports before 2023 July

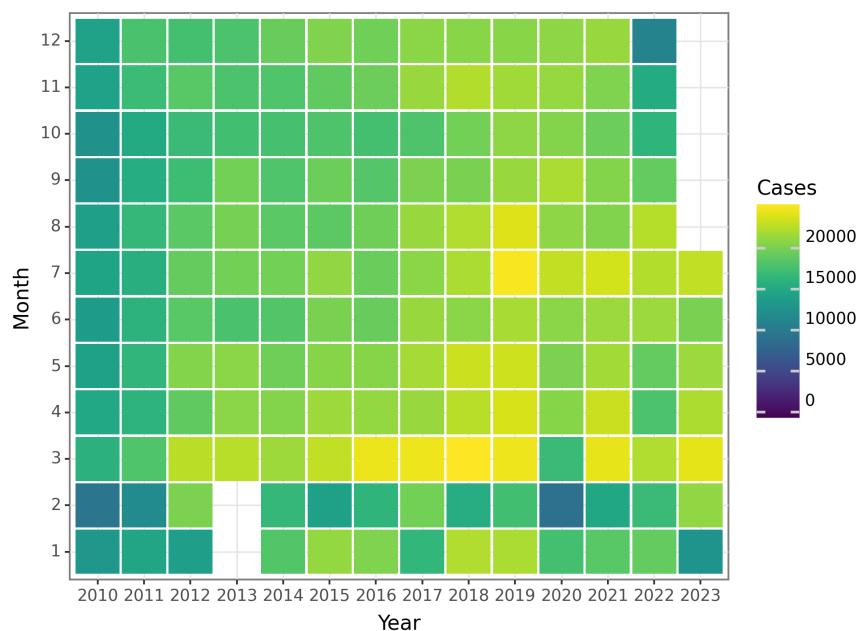


Figure 27: The Change of Hepatitis C Cases before 2023 July

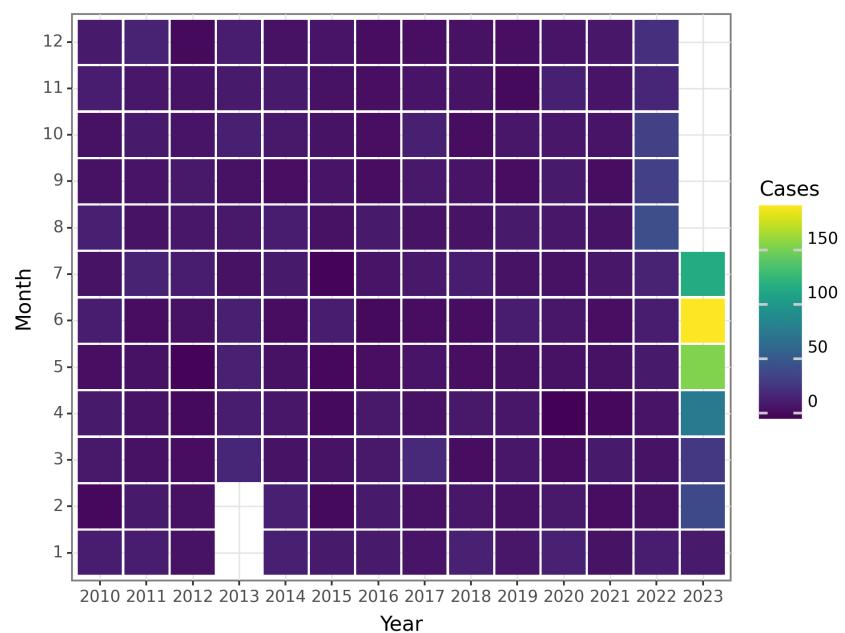


Figure 28: The Change of Hepatitis C Deaths before 2023 July

Hepatitis D

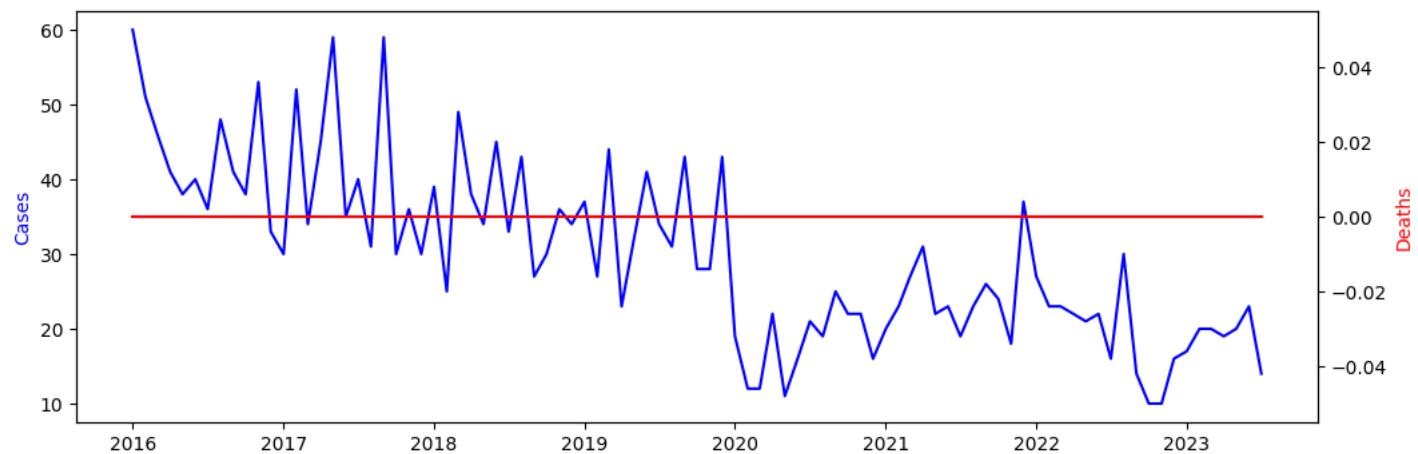


Figure 29: The Change of Hepatitis D Reports before 2023 July

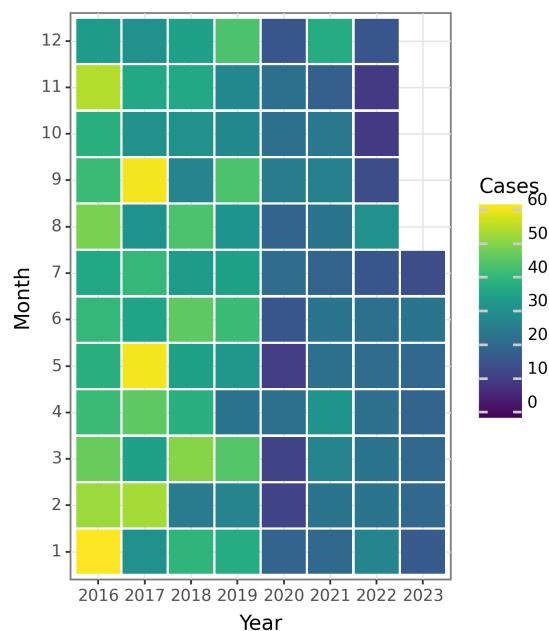


Figure 30: The Change of Hepatitis D Cases before 2023 July

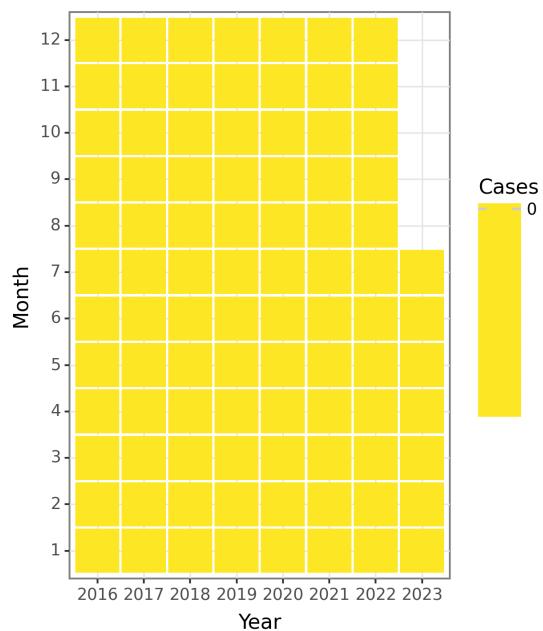


Figure 31: The Change of Hepatitis D Deaths before 2023 July

Hepatitis E

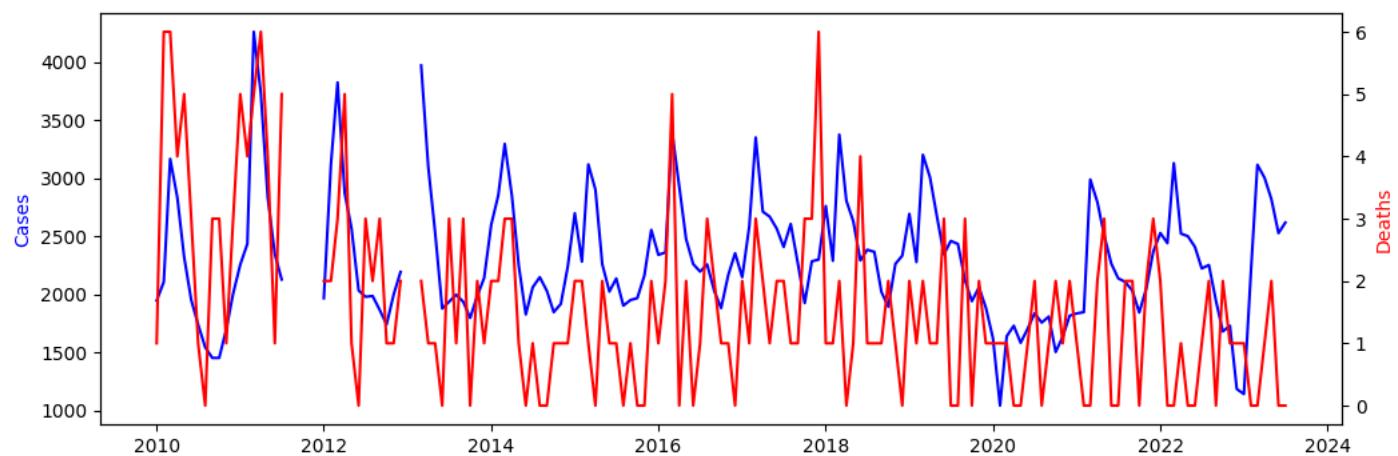


Figure 32: The Change of Hepatitis E Reports before 2023 July

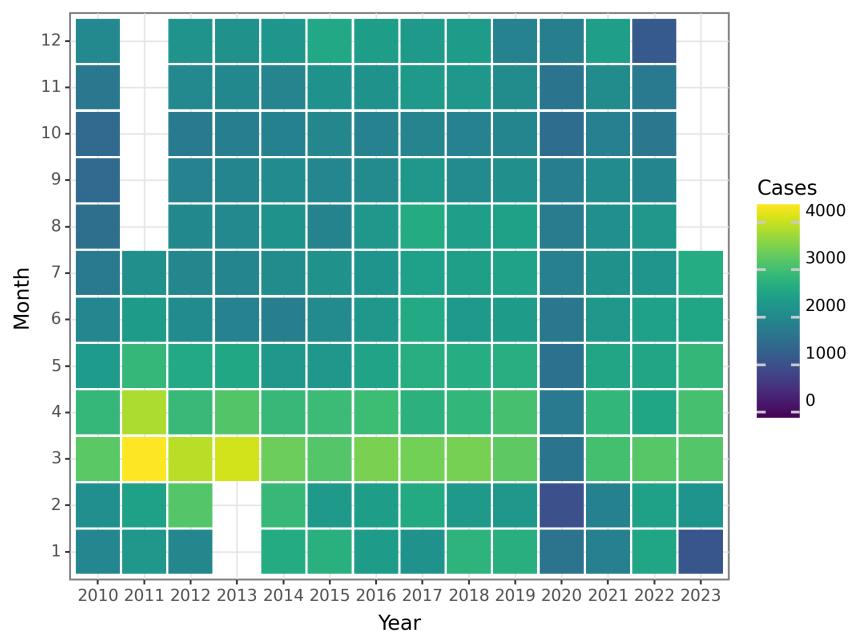


Figure 33: The Change of Hepatitis E Cases before 2023 July

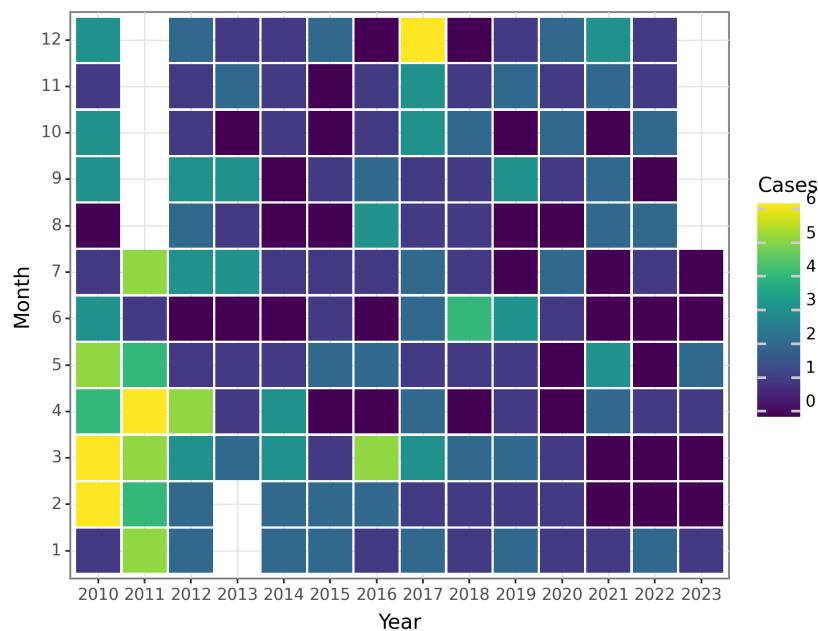


Figure 34: The Change of Hepatitis E Deaths before 2023 July

Other hepatitis

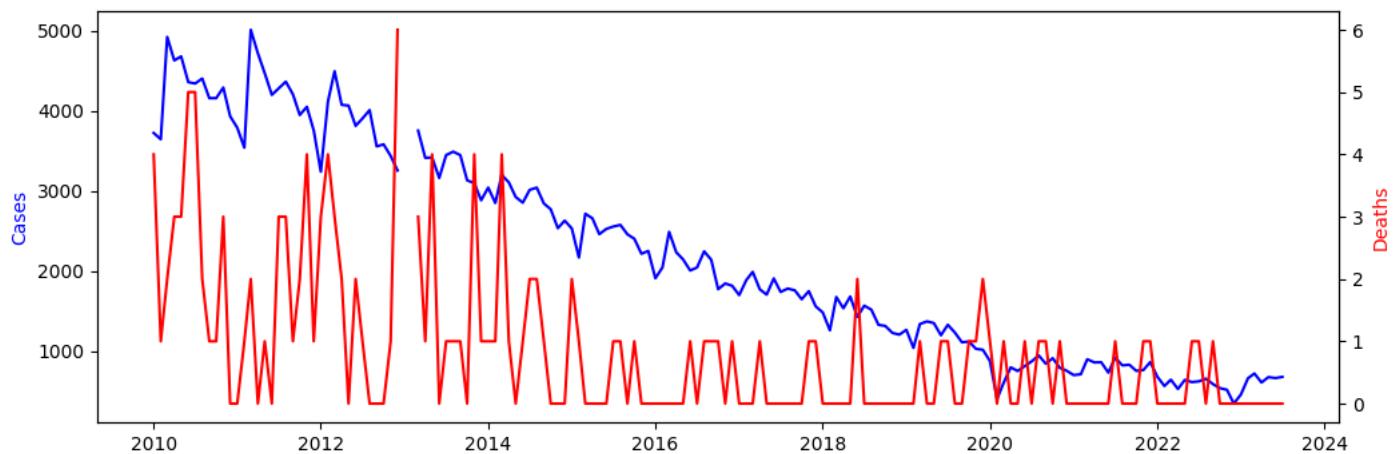


Figure 35: The Change of Other hepatitis Reports before 2023 July

The data provided presents the monthly incidence and death cases of Other hepatitis from January 2010 to July 2023. The cases of Other hepatitis show some fluctuations over time, with varying numbers of cases reported each month.

Looking at the trend, there appears to be a general pattern of fluctuation in the number of cases reported. From 2010 to 2013, there is a gradual increase in the number of cases, peaking in March 2011 with 5,010 cases reported. However, there is a sudden drop in cases in January and February 2013, where the reported number of cases is negative, which might indicate a data reporting error.

After 2013, the number of cases continues to fluctuate, with some months showing higher numbers and others showing lower numbers. The highest number of cases reported after 2013 is in March 2023, with 722 cases.

In terms of deaths, the data shows a generally low number of deaths throughout the entire period. There are some months where no deaths are reported. The highest number of deaths reported in a single month is in December 2012, with 6 deaths.

It is important to note that the data provided only covers the monthly incidence and death cases of Other hepatitis. Further analysis is needed to understand the factors contributing to the fluctuations in the number of cases and deaths, such as demographic information, risk factors, and preventive measures.

Additionally, it would be useful to compare these numbers with previous years or other regions to gain a better understanding of the overall trend and impact of Other hepatitis.

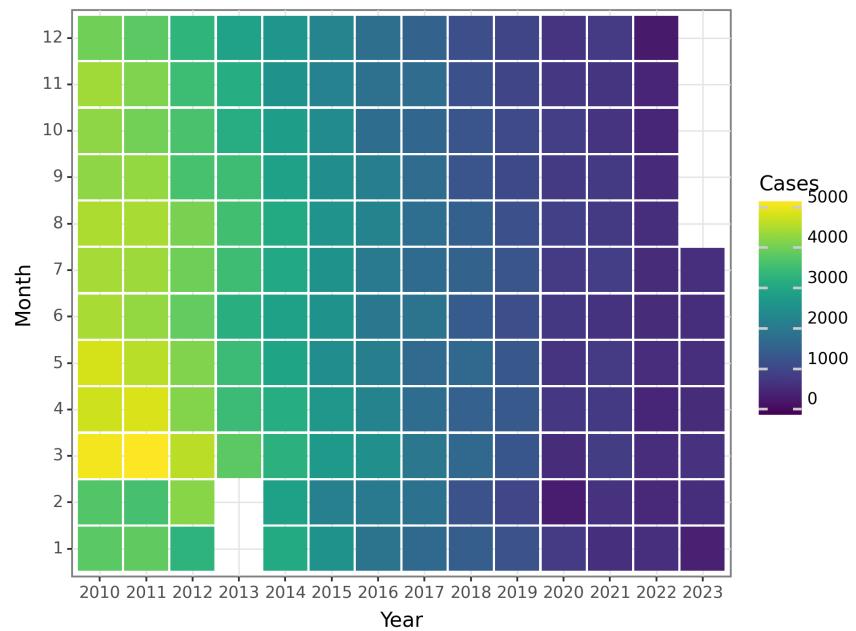


Figure 36: The Change of Other hepatitis Cases before 2023 July

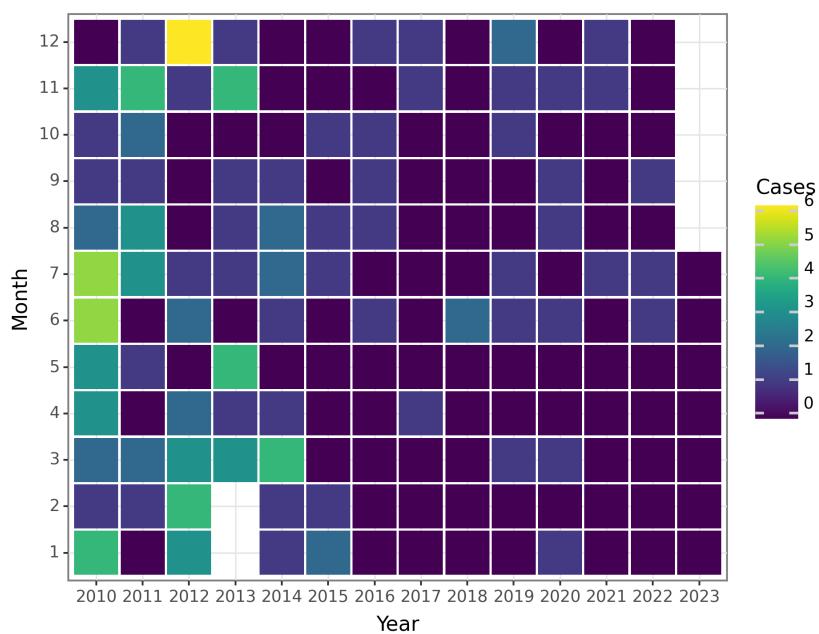


Figure 37: The Change of Other hepatitis Deaths before 2023 July

Poliomyelitis

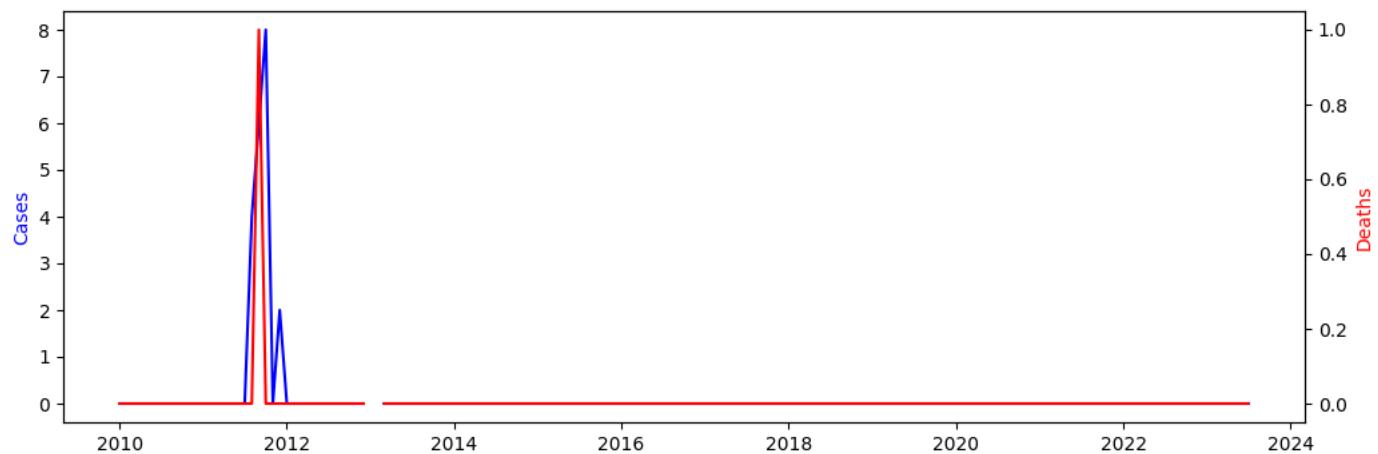


Figure 38: The Change of Poliomyelitis Reports before 2023 July

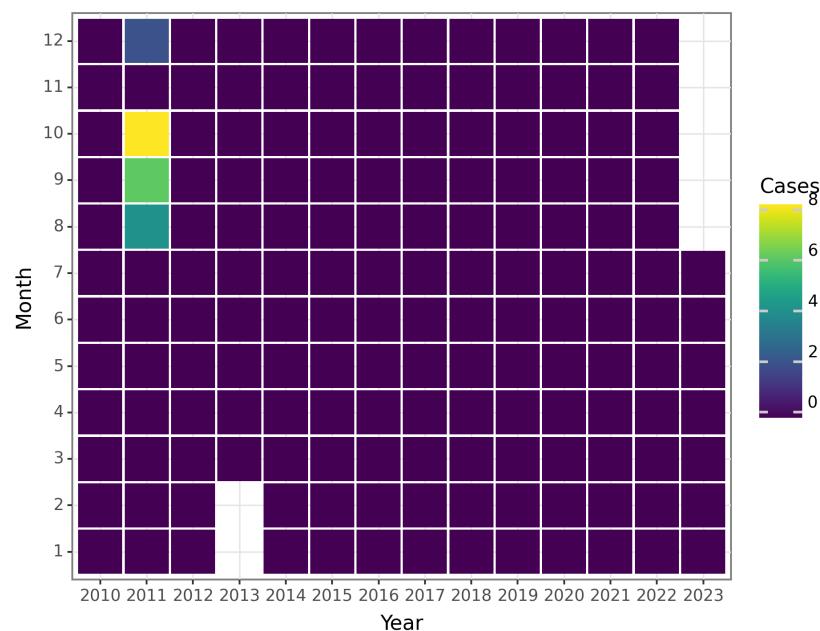


Figure 39: The Change of Poliomyelitis Cases before 2023 July

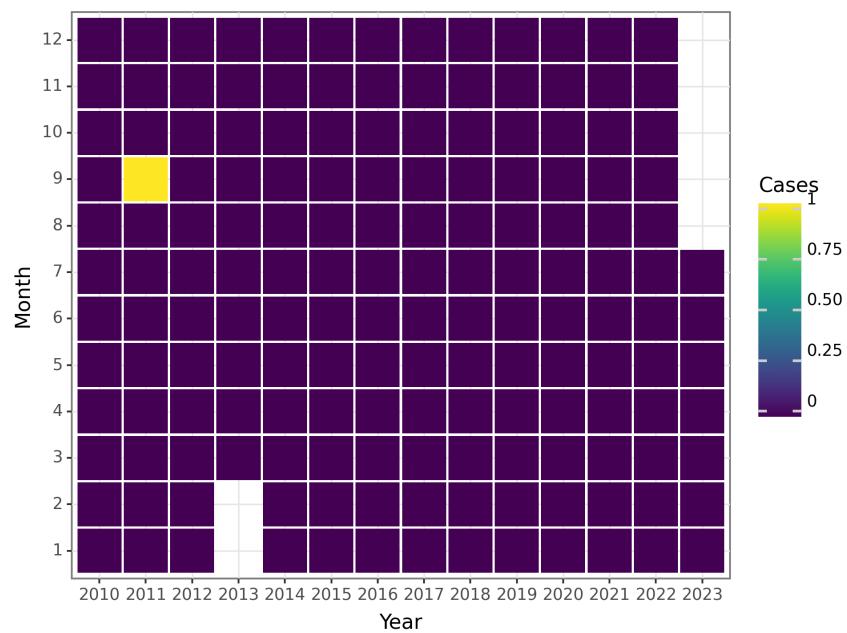


Figure 40: The Change of Poliomyelitis Deaths before 2023 July

Human infection with H5N1 virus

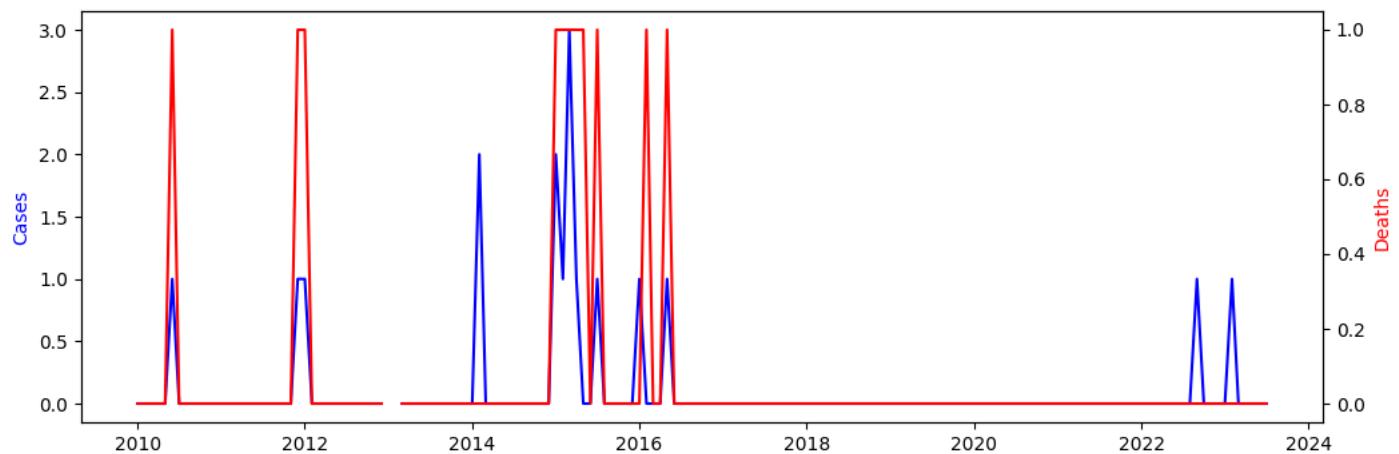


Figure 41: The Change of Human infection with H5N1 virus Reports before 2023 July

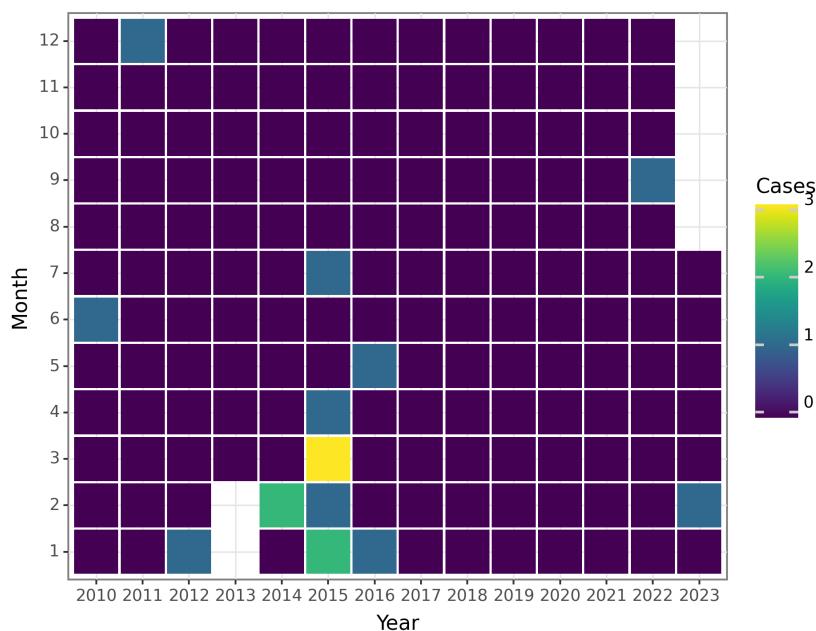


Figure 42: The Change of Human infection with H5N1 virus Cases before 2023 July

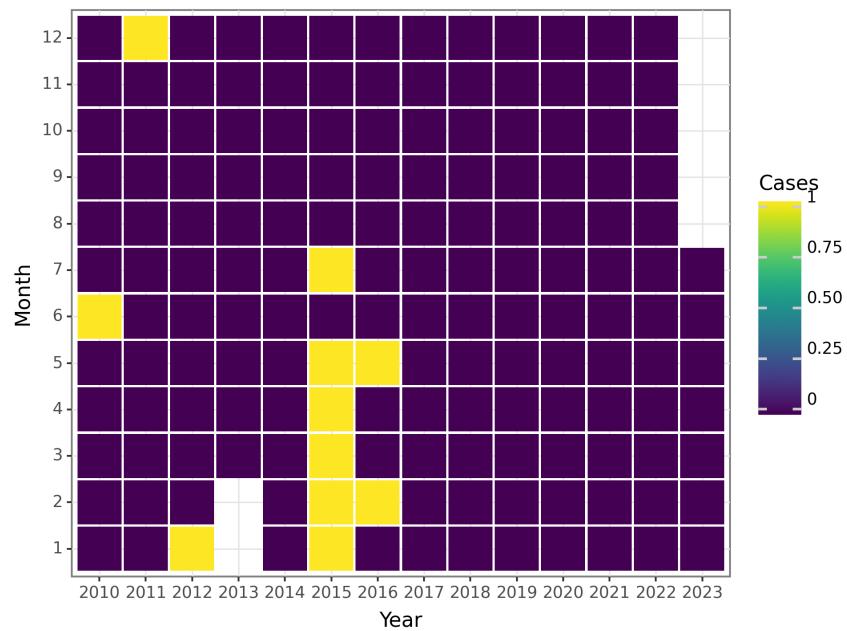


Figure 43: The Change of Human infection with H5N1 virus Deaths before 2023 July

Measles

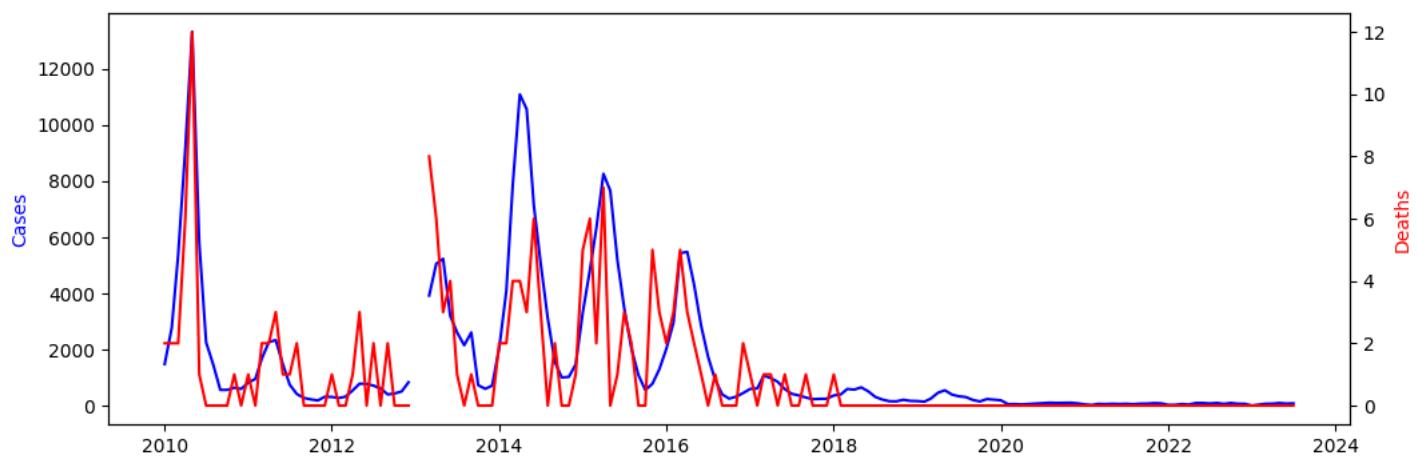


Figure 44: The Change of Measles Reports before 2023 July

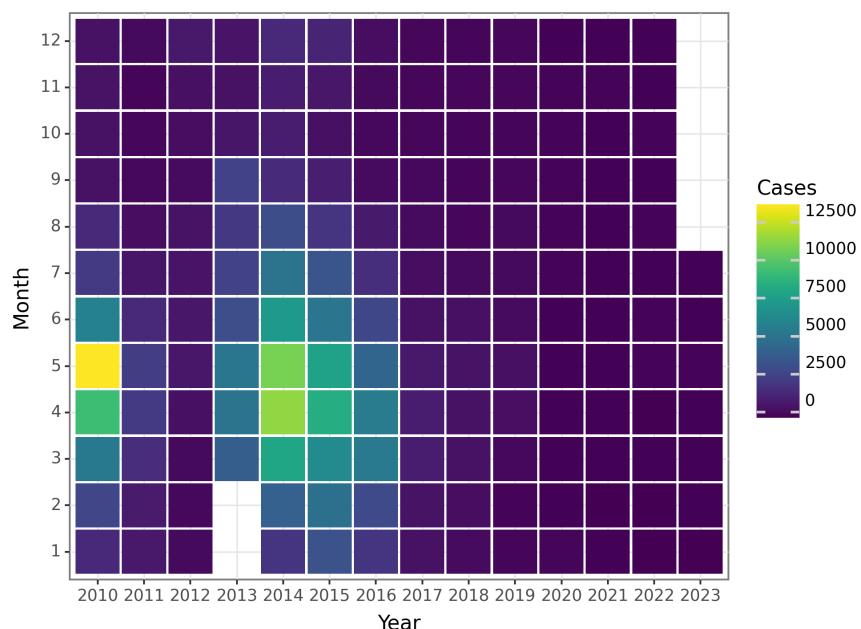


Figure 45: The Change of Measles Cases before 2023 July

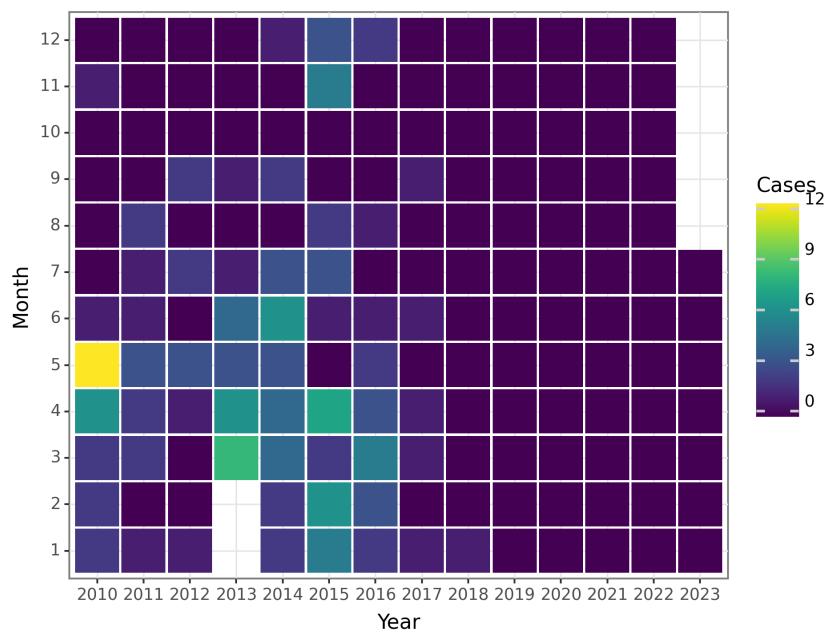


Figure 46: The Change of Measles Deaths before 2023 July

Epidemic hemorrhagic fever

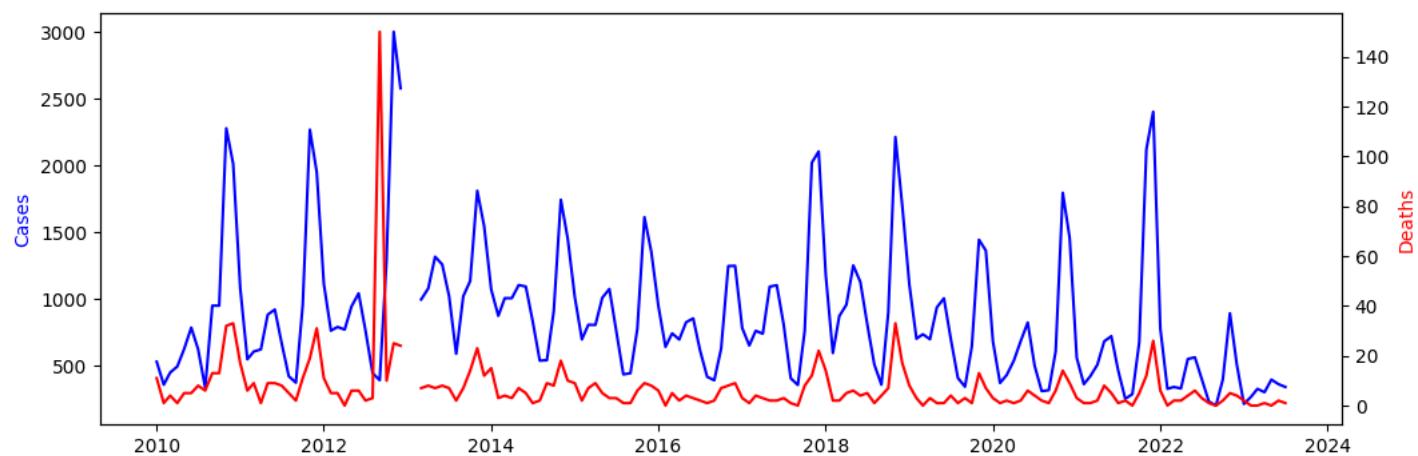


Figure 47: The Change of Epidemic hemorrhagic fever Reports before 2023 July

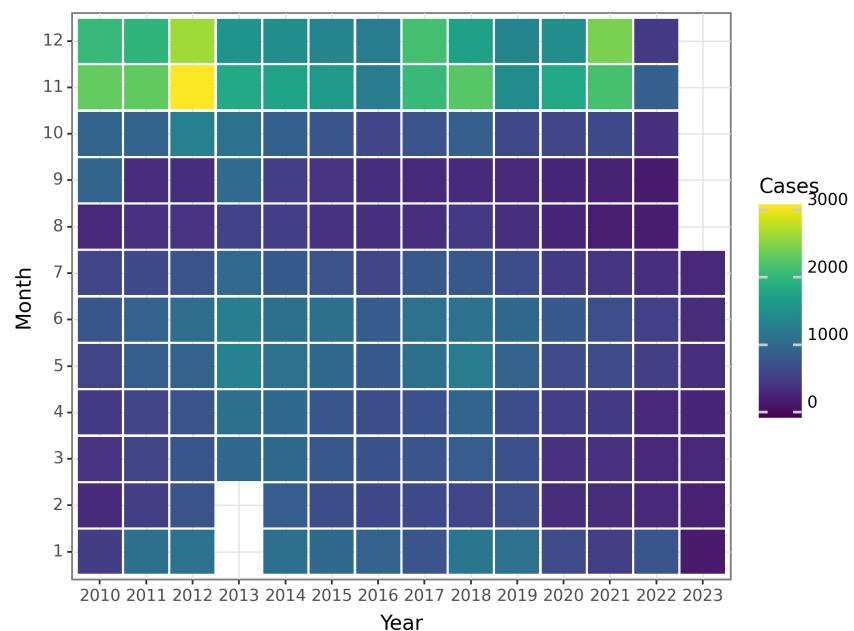


Figure 48: The Change of Epidemic hemorrhagic fever Cases before 2023 July

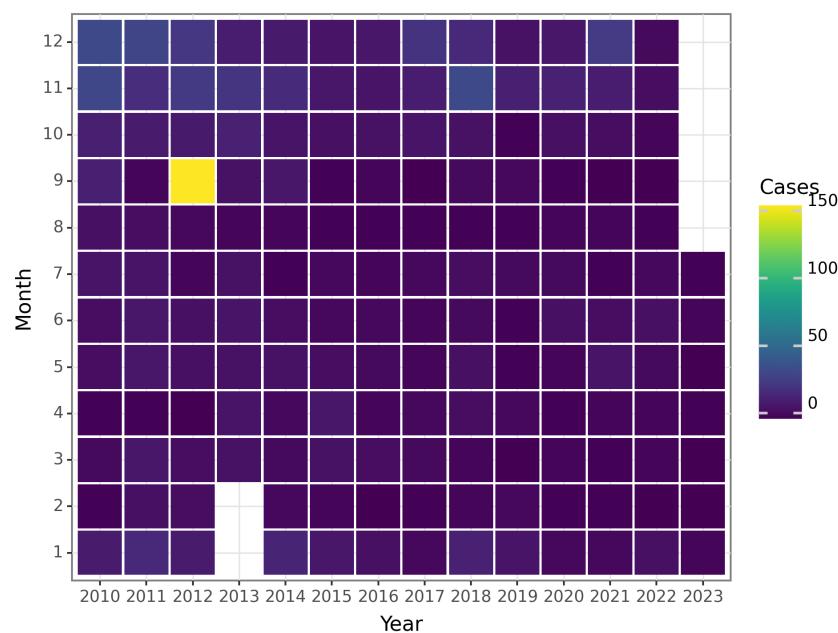


Figure 49: The Change of Epidemic hemorrhagic fever Deaths before 2023 July

Rabies

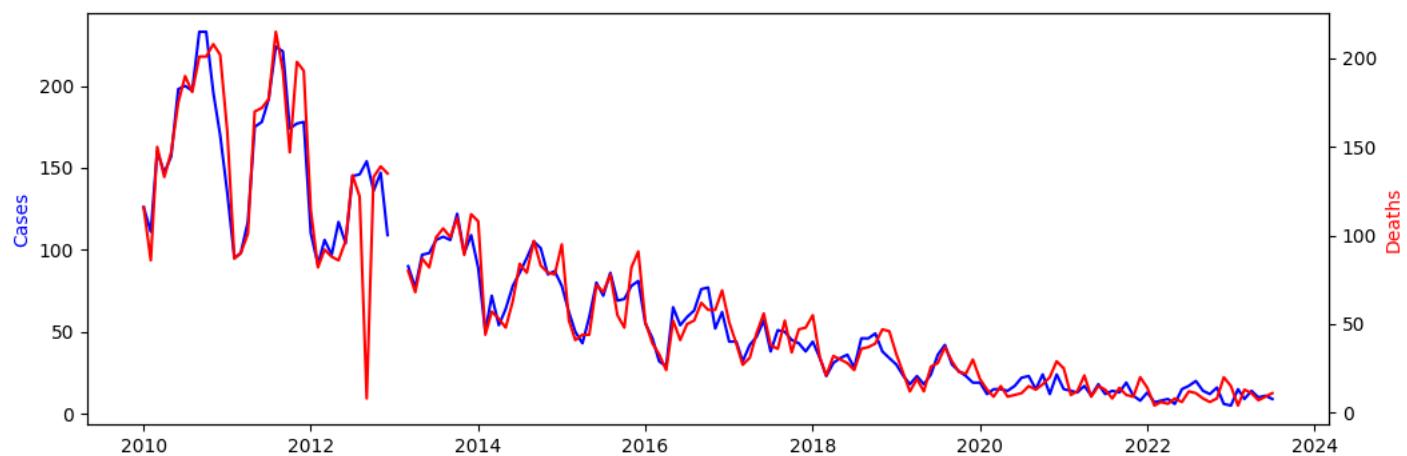


Figure 50: The Change of Rabies Reports before 2023 July

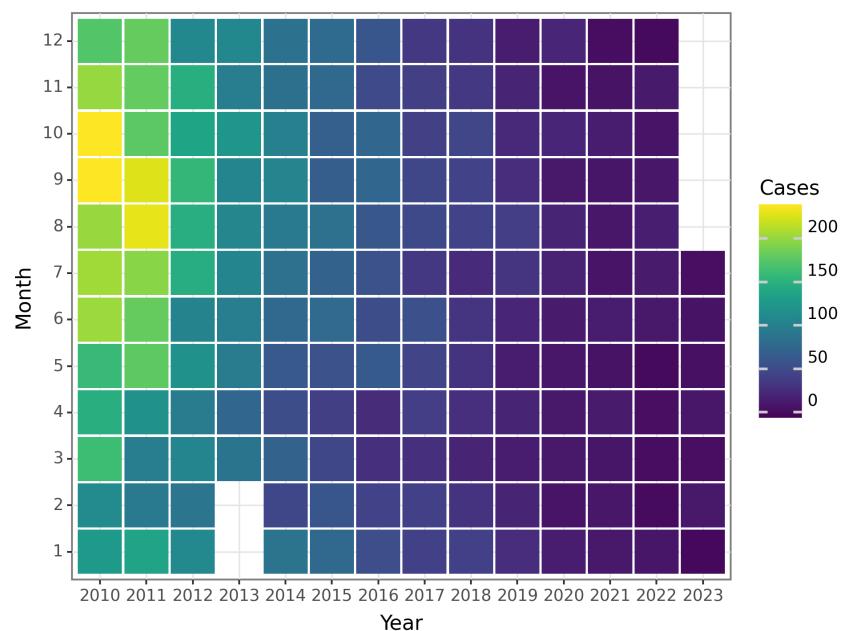


Figure 51: The Change of Rabies Cases before 2023 July

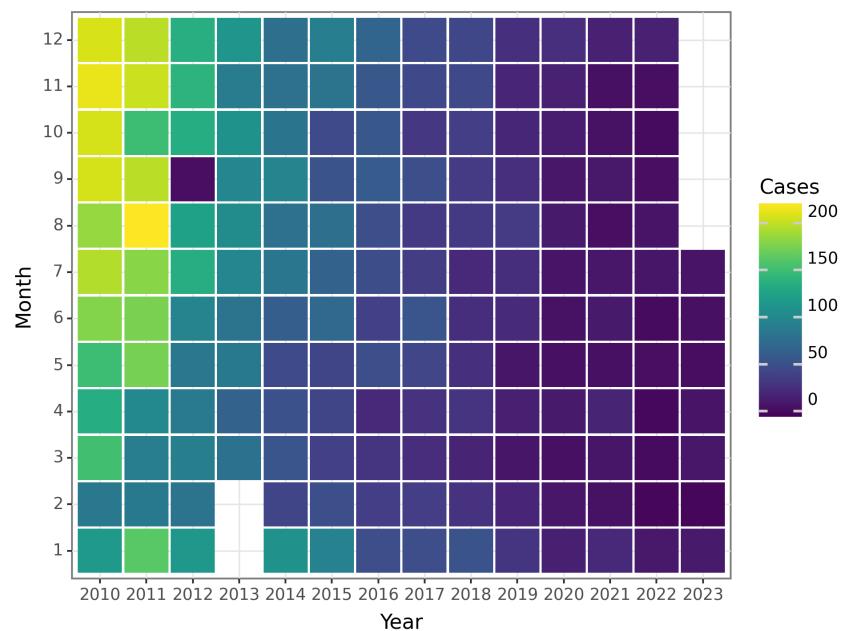


Figure 52: The Change of Rabies Deaths before 2023 July

Japanese encephalitis

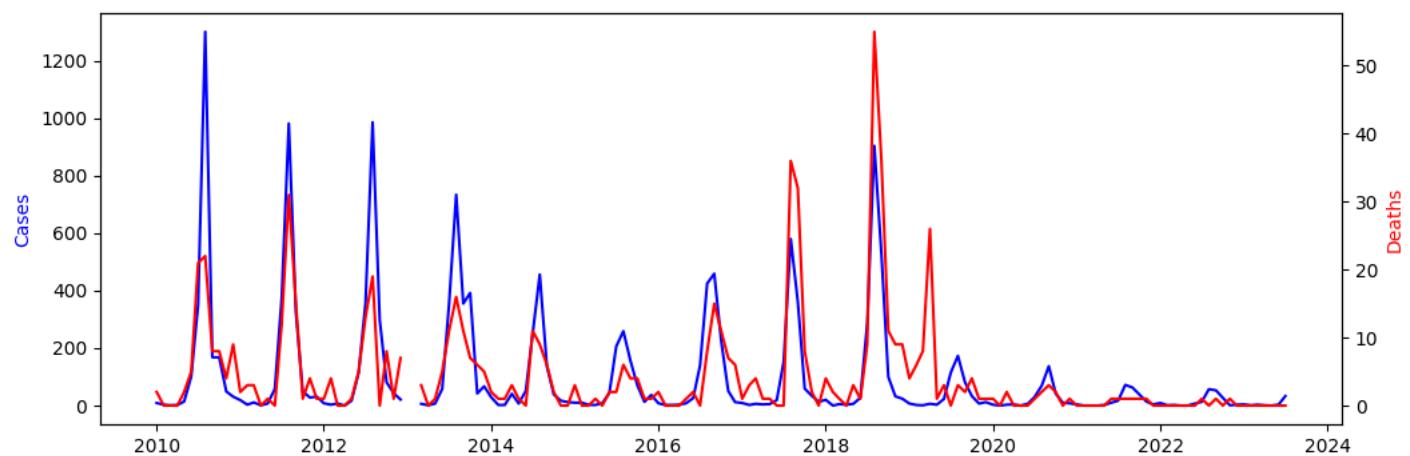


Figure 53: The Change of Japanese encephalitis Reports before 2023 July

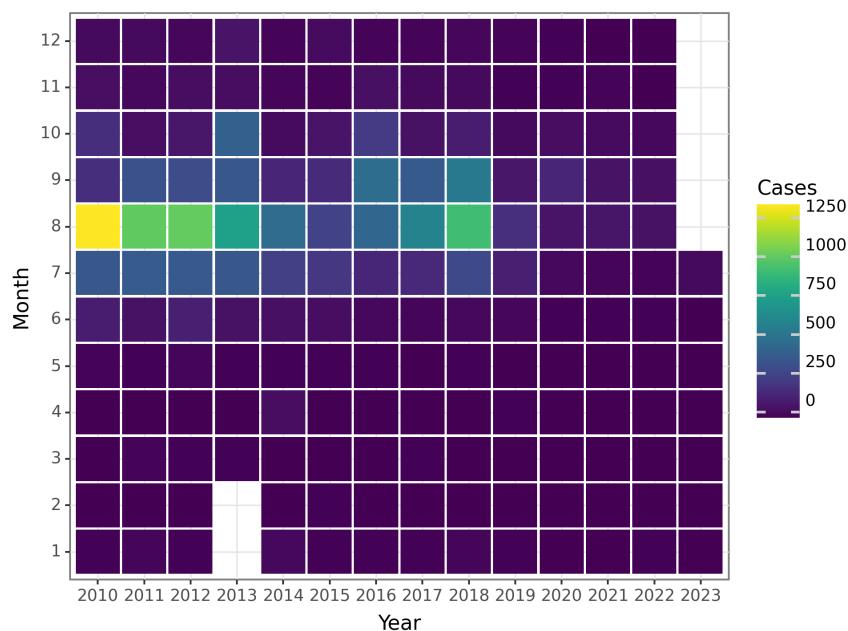


Figure 54: The Change of Japanese encephalitis Cases before 2023 July

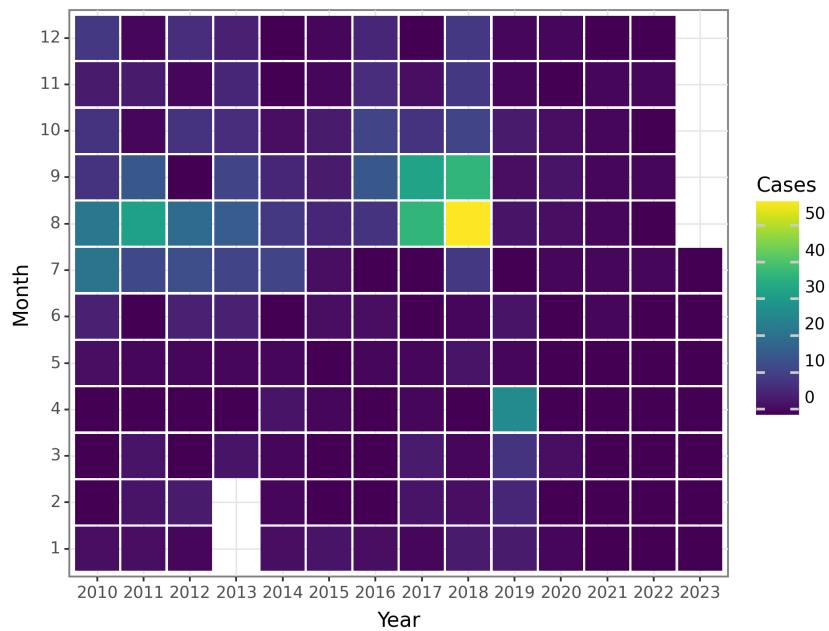


Figure 55: The Change of Japanese encephalitis Deaths before 2023 July

Dengue

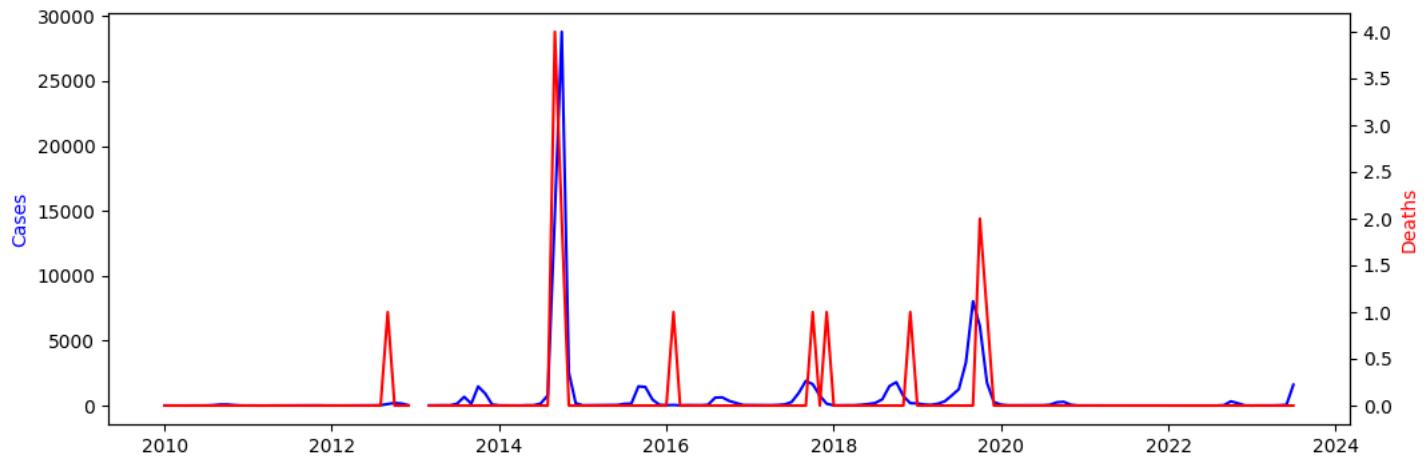


Figure 56: The Change of Dengue Reports before 2023 July

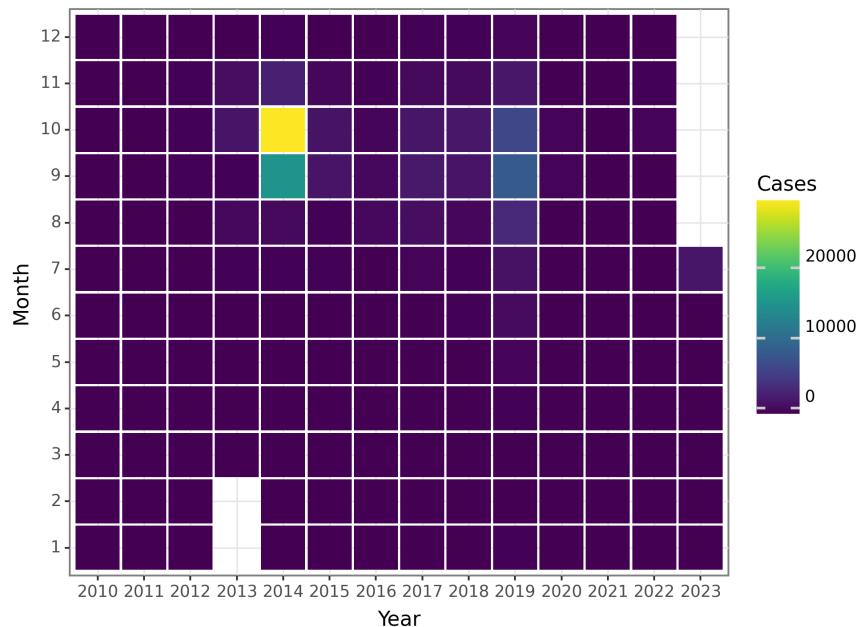


Figure 57: The Change of Dengue Cases before 2023 July

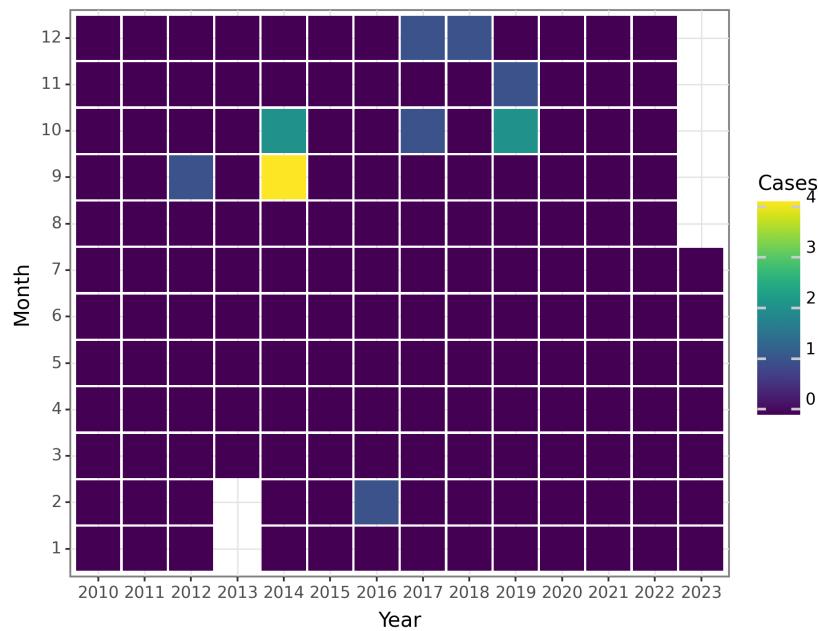


Figure 58: The Change of Dengue Deaths before 2023 July

Anthrax

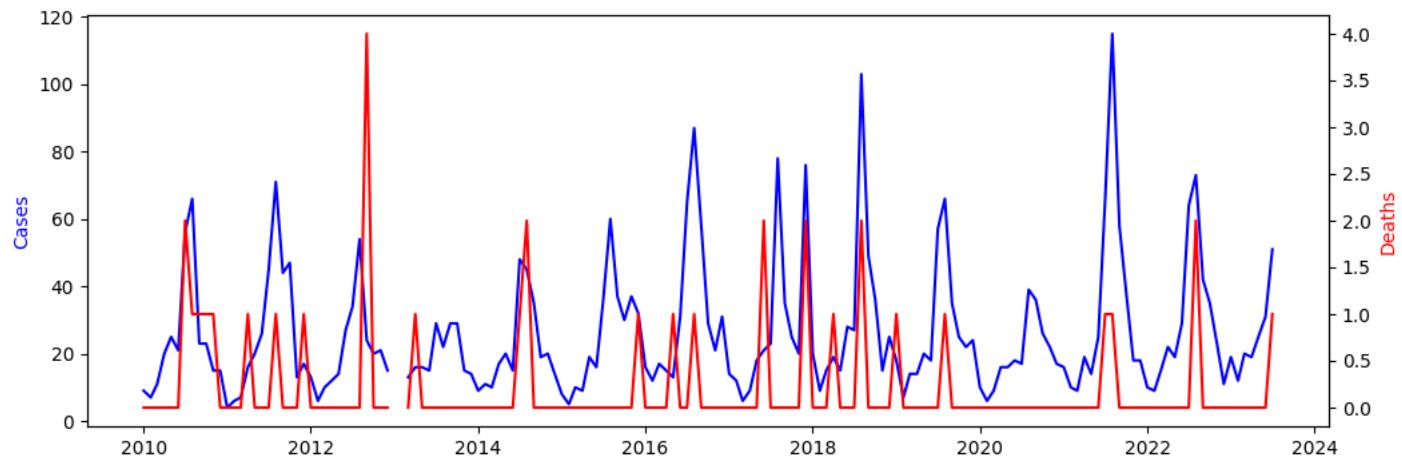


Figure 59: The Change of Anthrax Reports before 2023 July

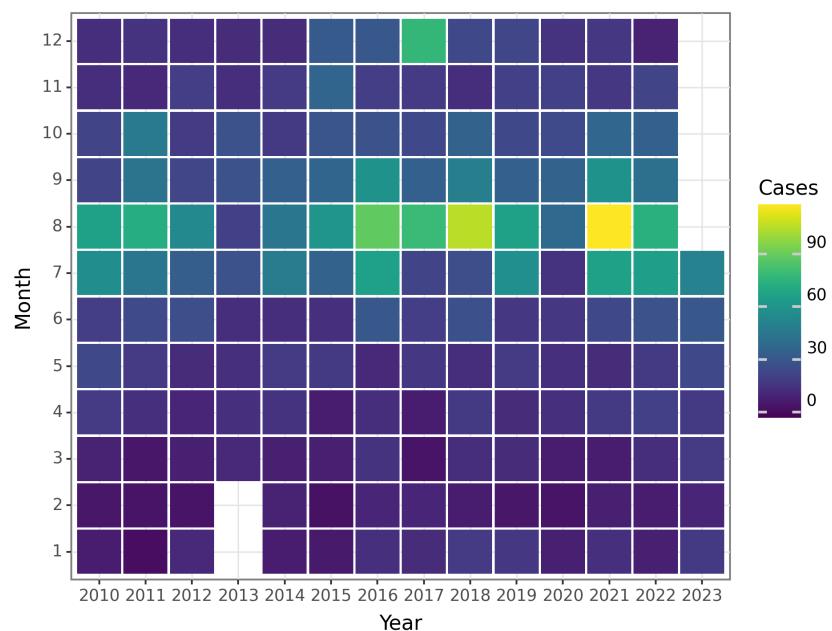


Figure 60: The Change of Anthrax Cases before 2023 July

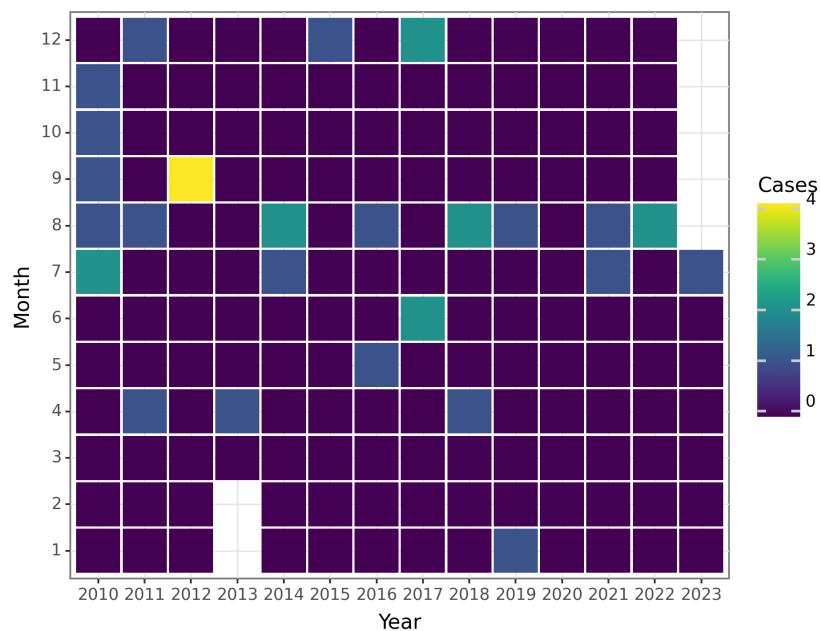


Figure 61: The Change of Anthrax Deaths before 2023 July

Dysentery

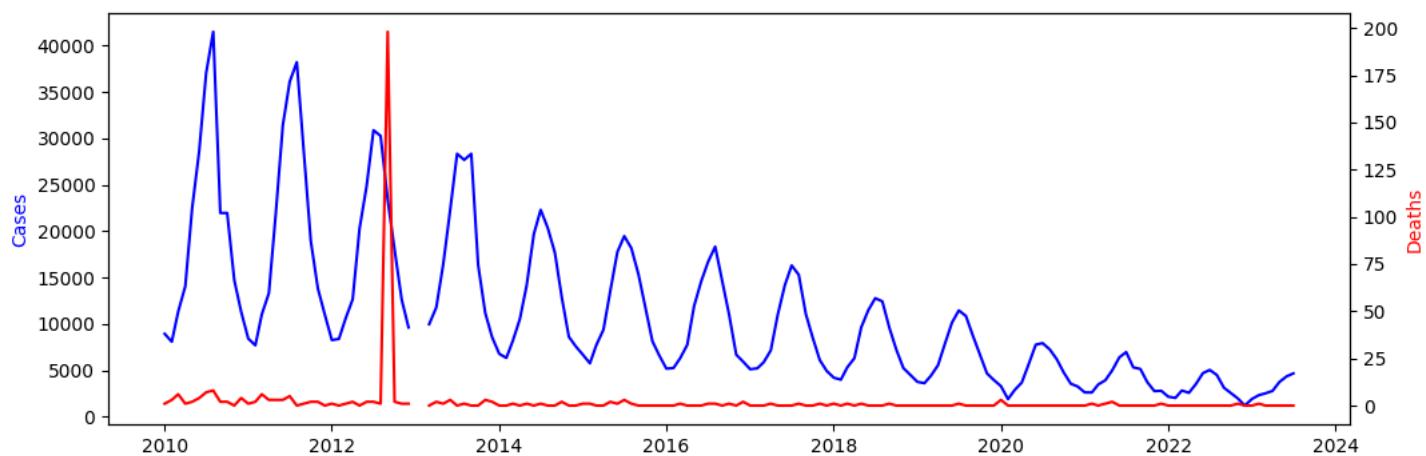


Figure 62: The Change of Dysentery Reports before 2023 July

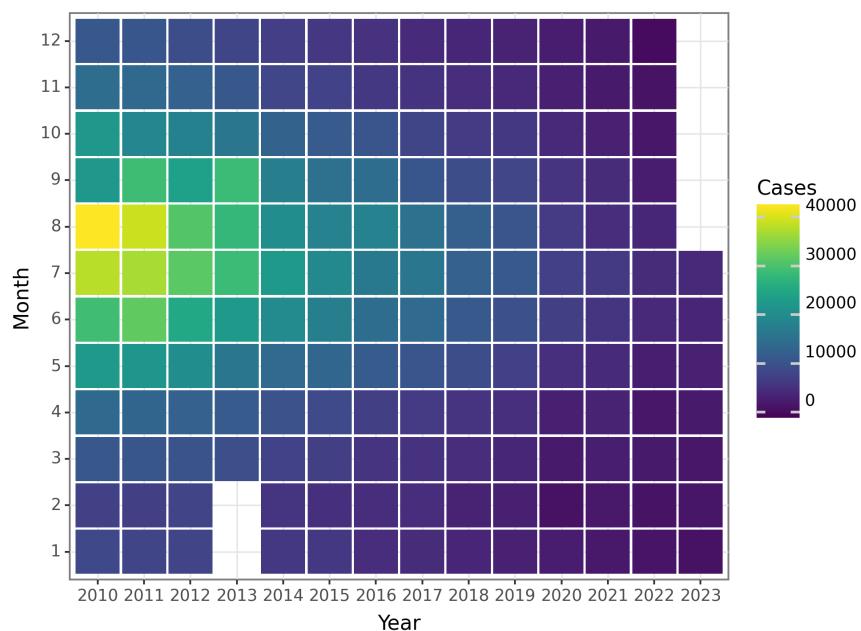


Figure 63: The Change of Dysentery Cases before 2023 July

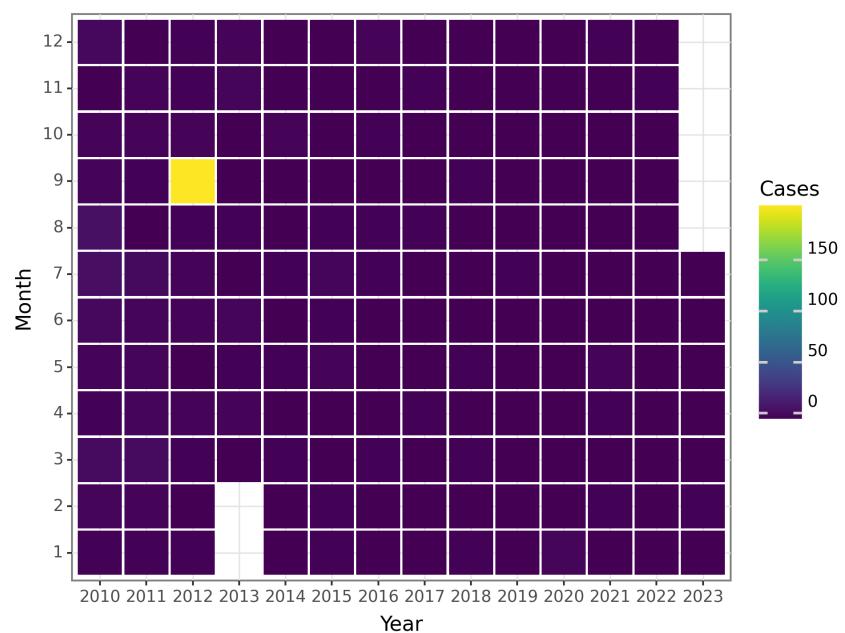


Figure 64: The Change of Dysentery Deaths before 2023 July

Tuberculosis

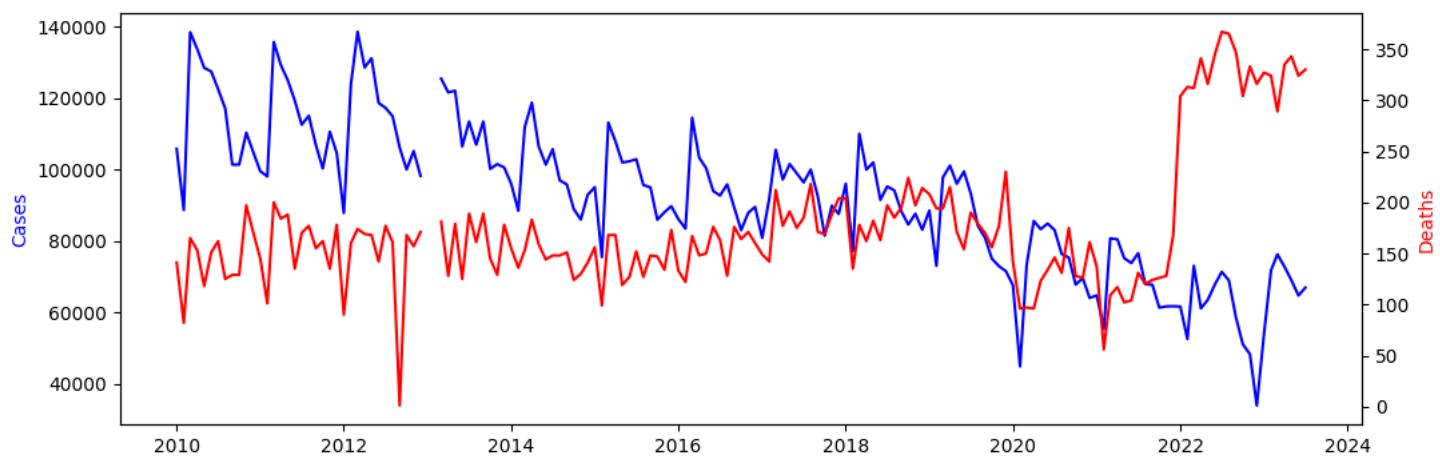


Figure 65: The Change of Tuberculosis Reports before 2023 July

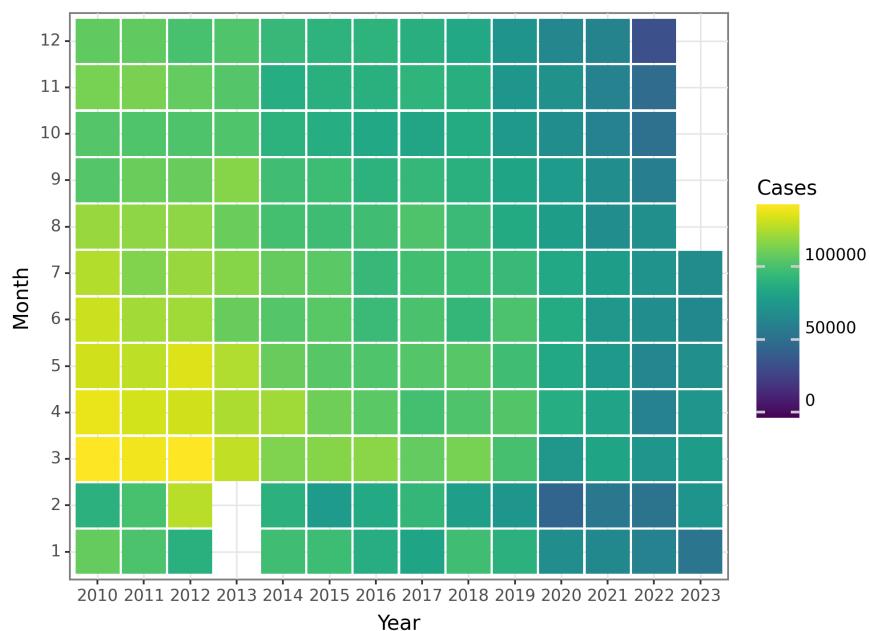


Figure 66: The Change of Tuberculosis Cases before 2023 July

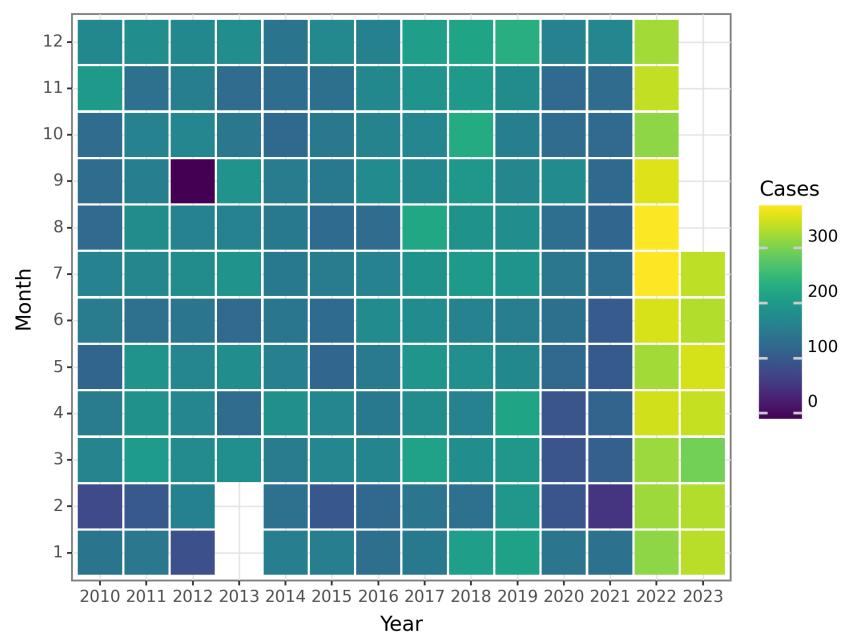


Figure 67: The Change of Tuberculosis Deaths before 2023 July

Typhoid fever and paratyphoid fever

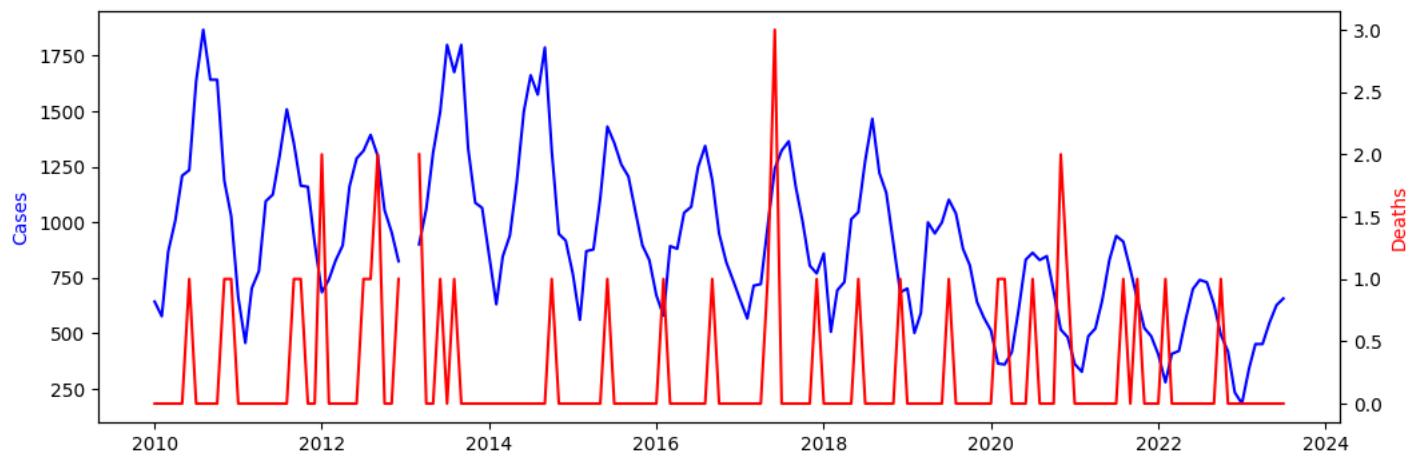


Figure 68: The Change of Typhoid fever and paratyphoid fever Reports before 2023 July

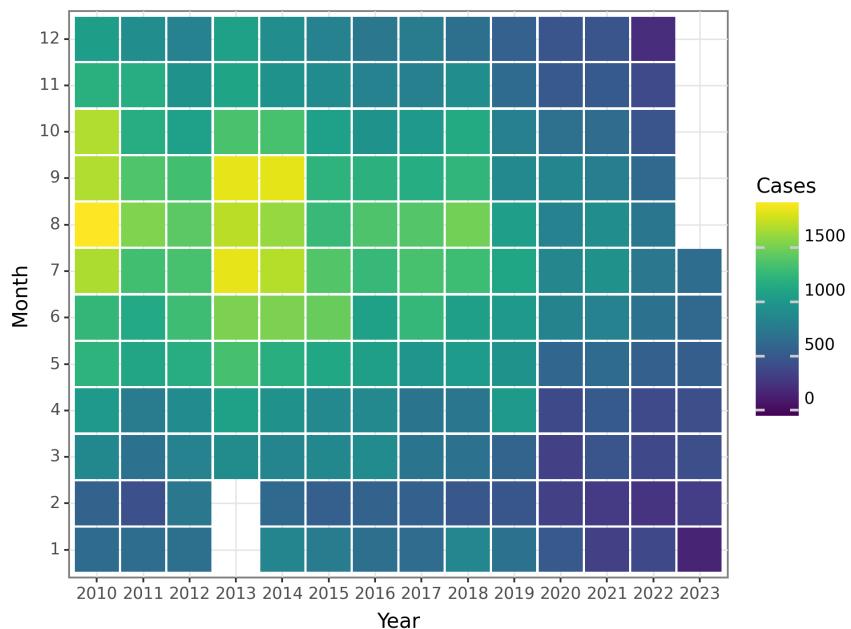


Figure 69: The Change of Typhoid fever and paratyphoid fever Cases before 2023 July

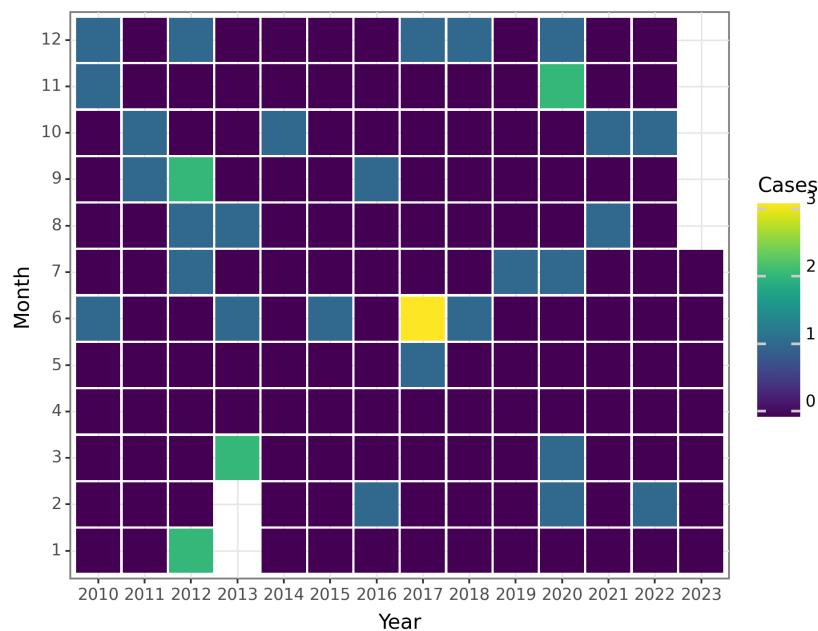


Figure 70: The Change of Typhoid fever and paratyphoid fever Deaths before 2023 July

Meningococcal meningitis

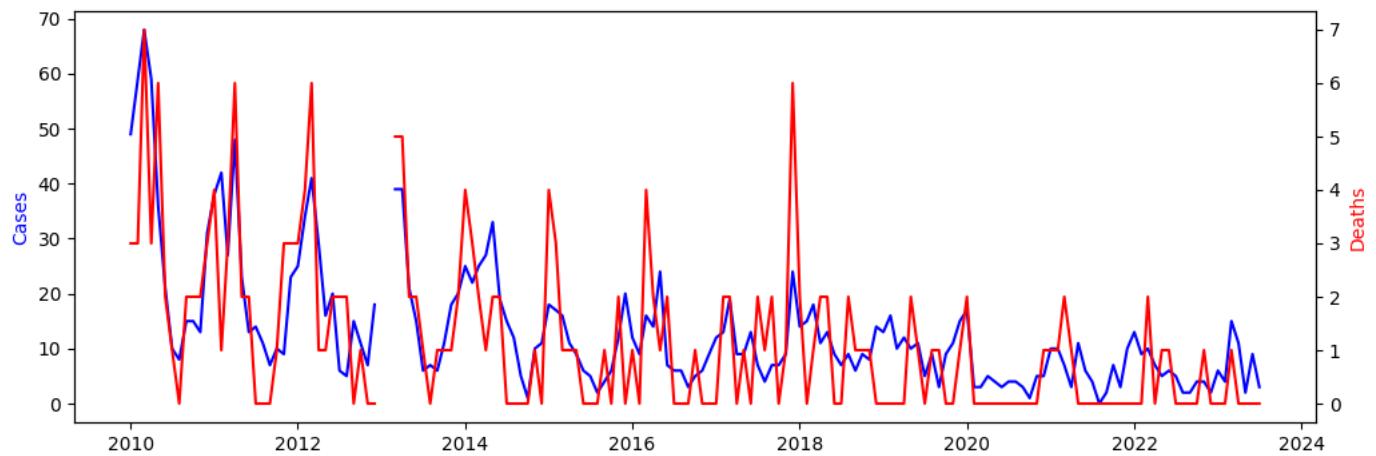


Figure 71: The Change of Meningococcal meningitis Reports before 2023 July

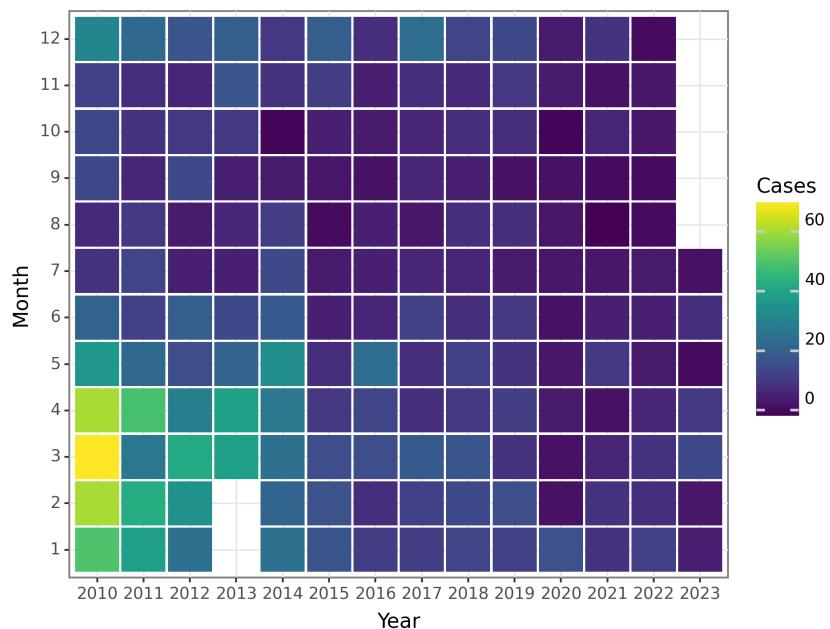


Figure 72: The Change of Meningococcal meningitis Cases before 2023 July

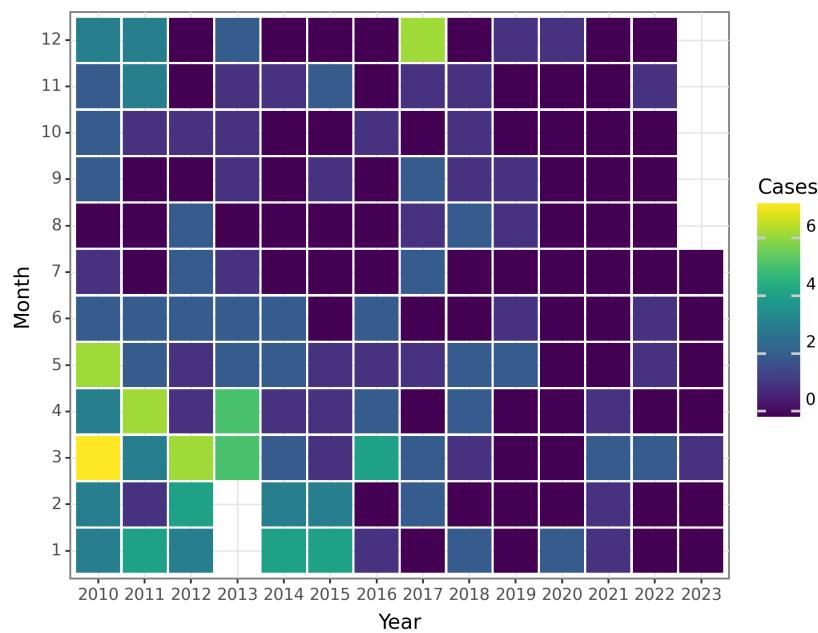


Figure 73: The Change of Meningococcal meningitis Deaths before 2023 July

Pertussis

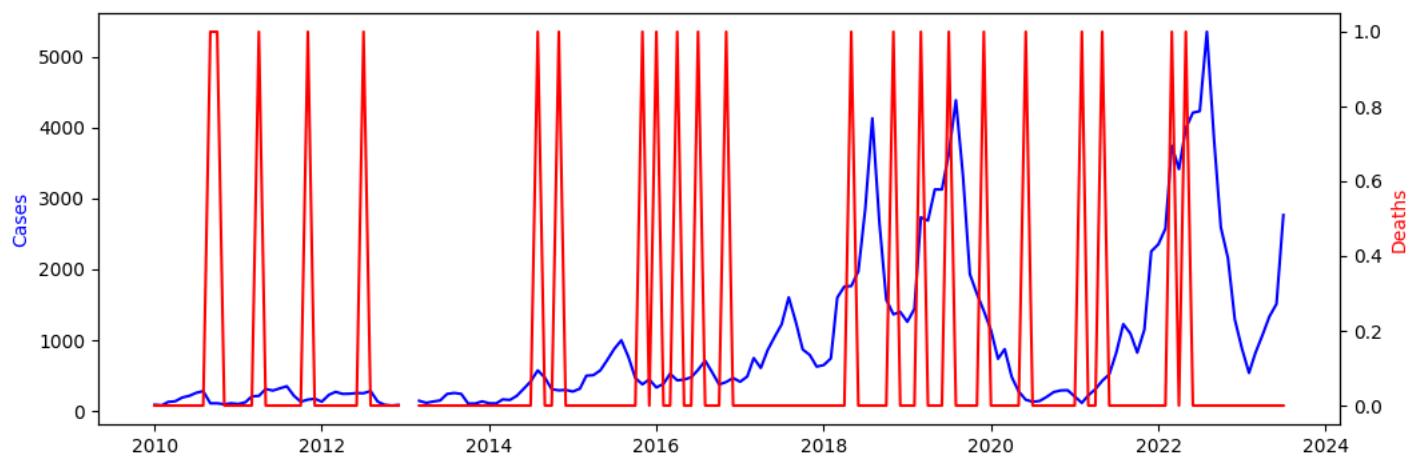


Figure 74: The Change of Pertussis Reports before 2023 July

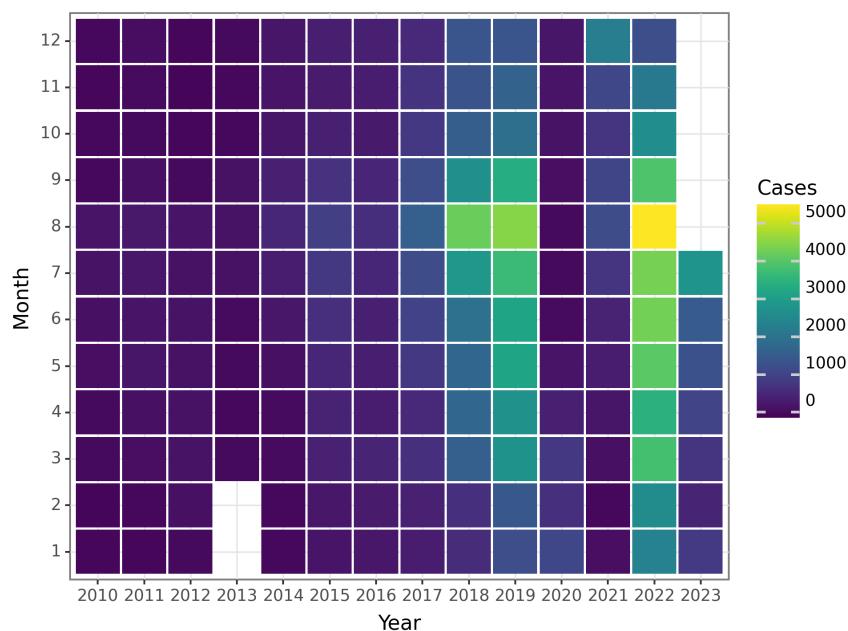


Figure 75: The Change of Pertussis Cases before 2023 July

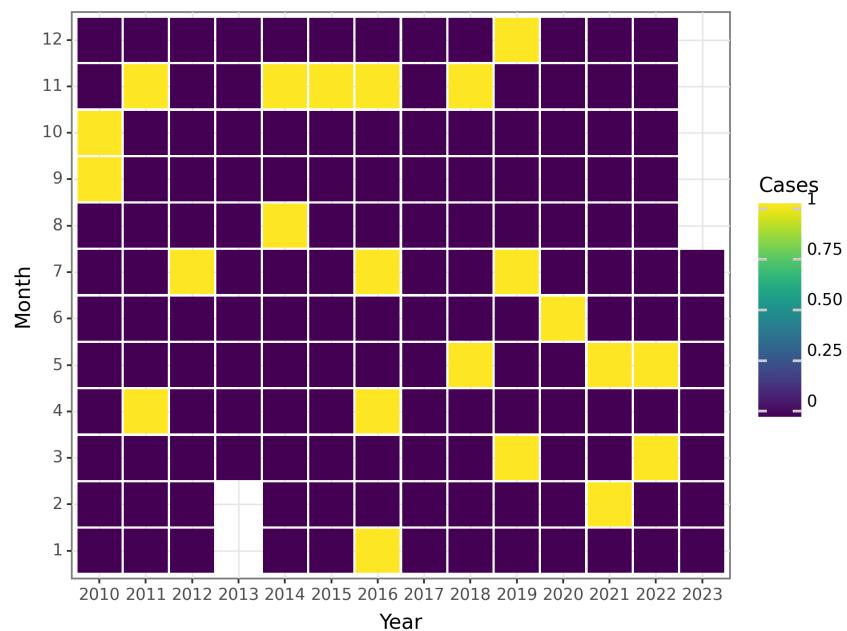


Figure 76: The Change of Pertussis Deaths before 2023 July

Diphtheria

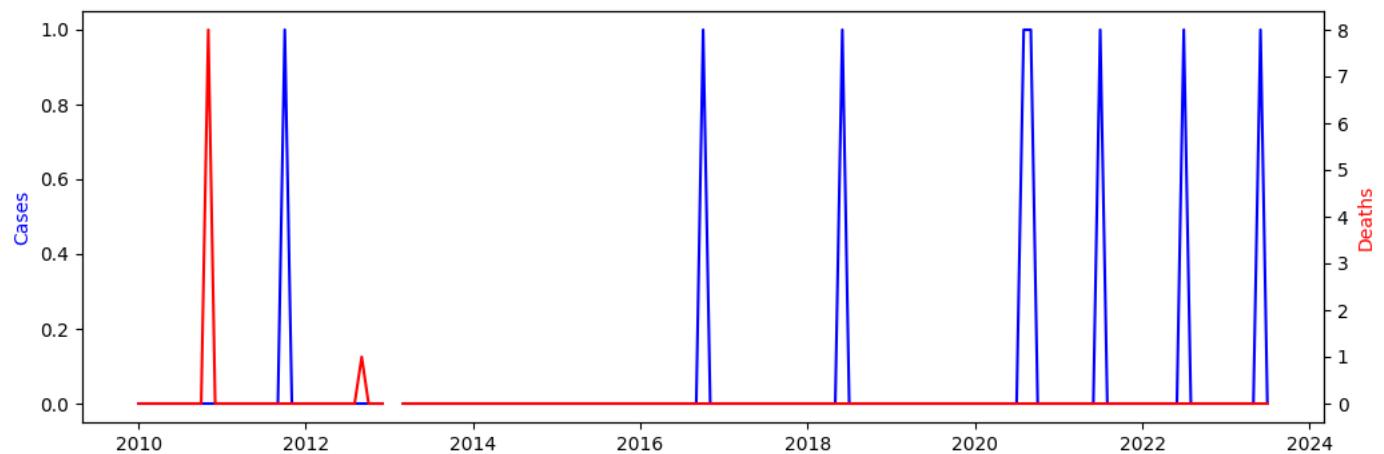


Figure 77: The Change of Diphtheria Reports before 2023 July

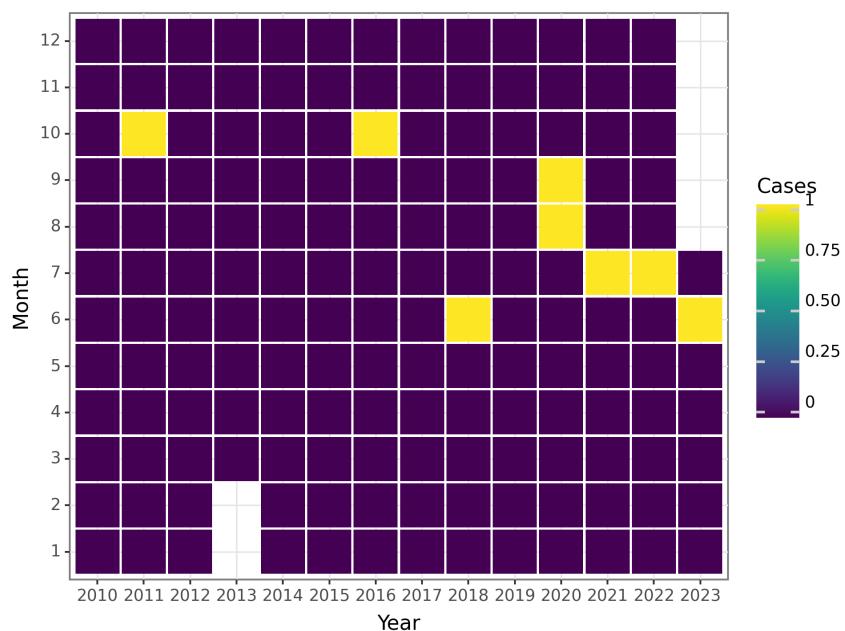


Figure 78: The Change of Diphtheria Cases before 2023 July

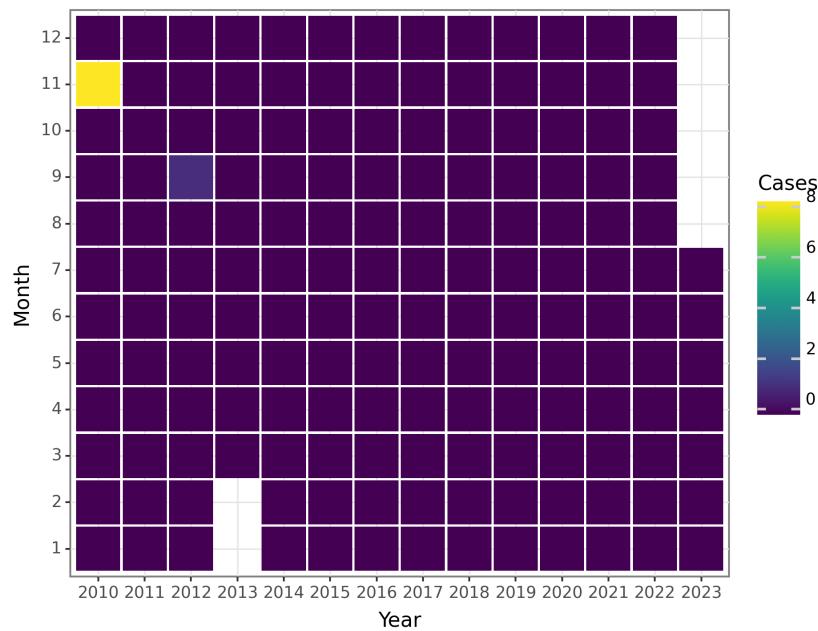


Figure 79: The Change of Diphtheria Deaths before 2023 July

Neonatal tetanus

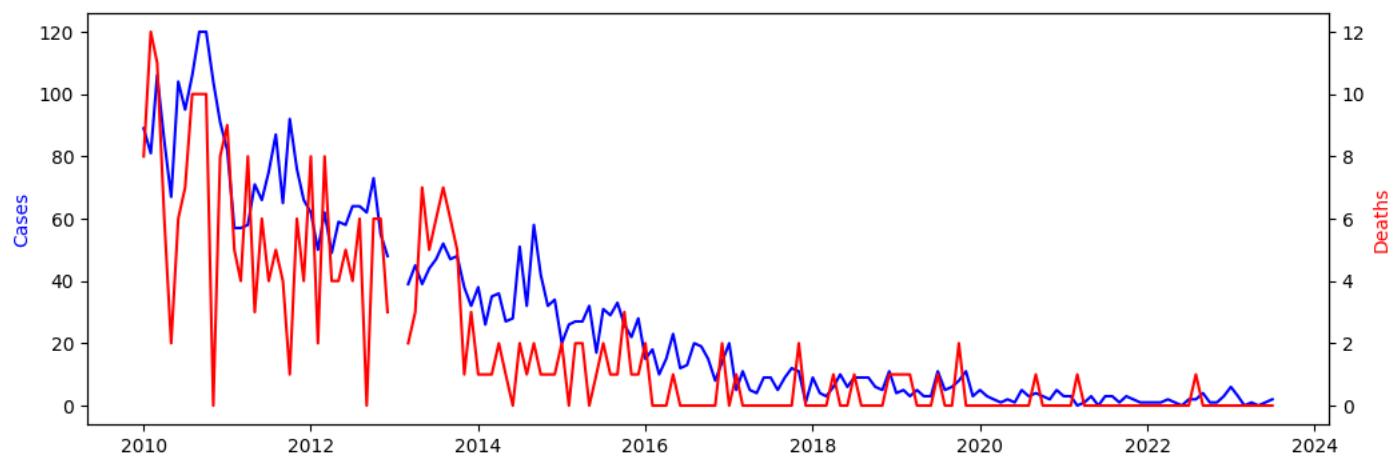


Figure 80: The Change of Neonatal tetanus Reports before 2023 July

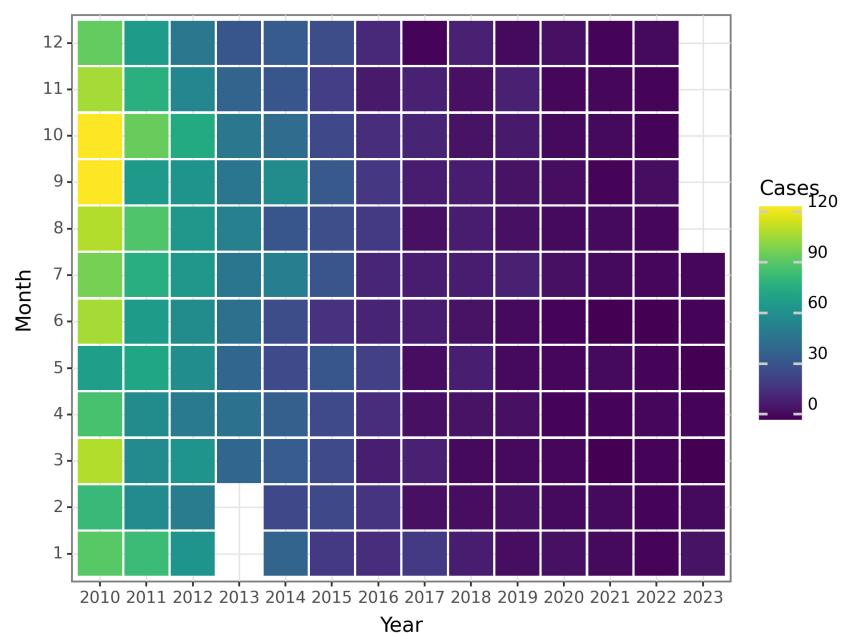


Figure 81: The Change of Neonatal tetanus Cases before 2023 July

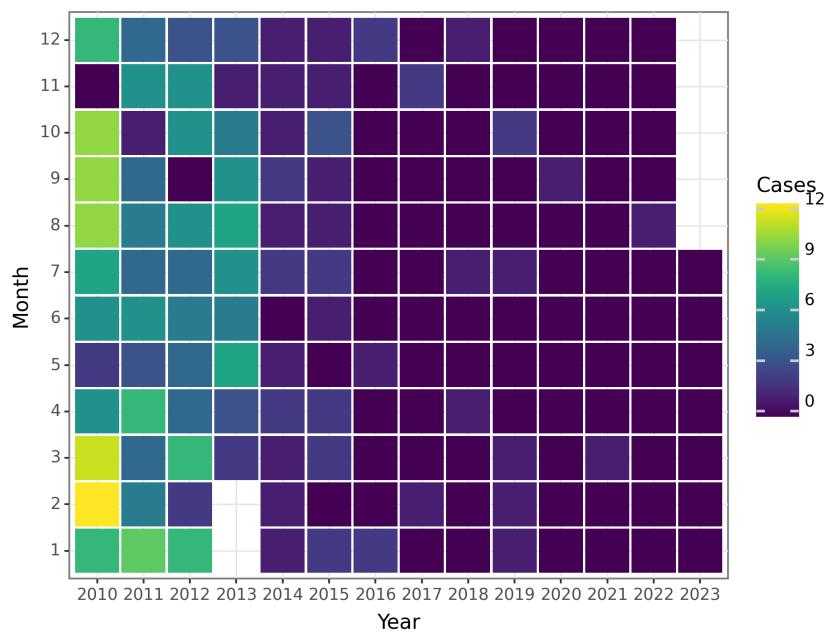


Figure 82: The Change of Neonatal tetanus Deaths before 2023 July

Scarlet fever

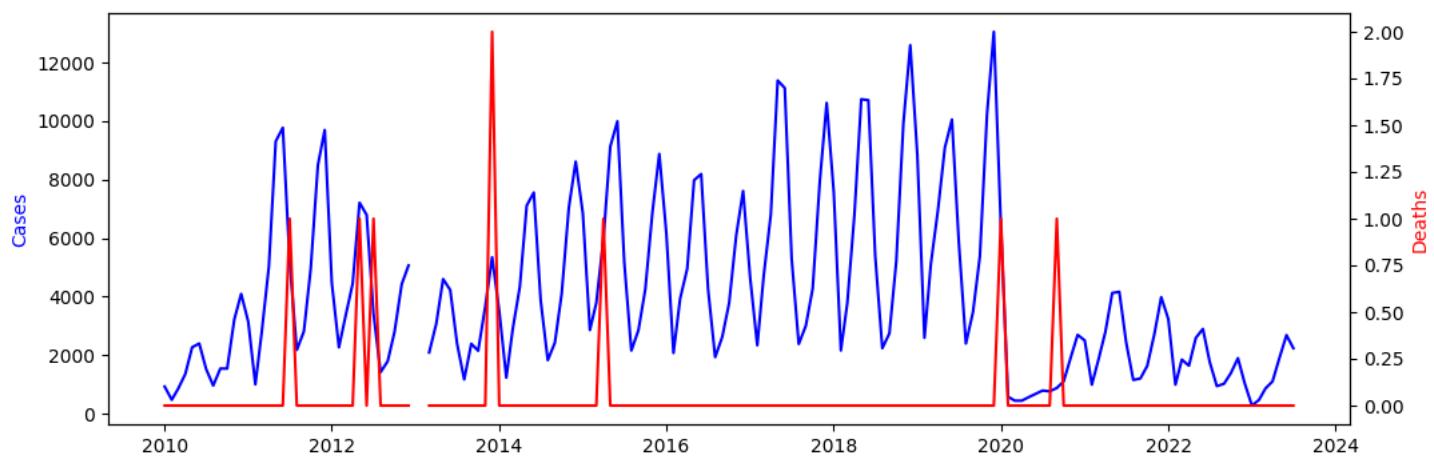


Figure 83: The Change of Scarlet fever Reports before 2023 July

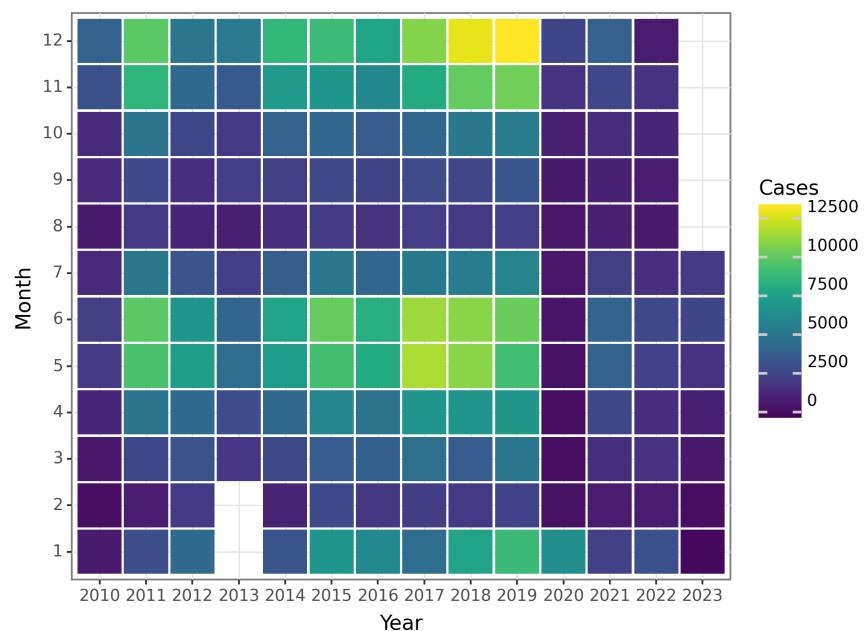


Figure 84: The Change of Scarlet fever Cases before 2023 July

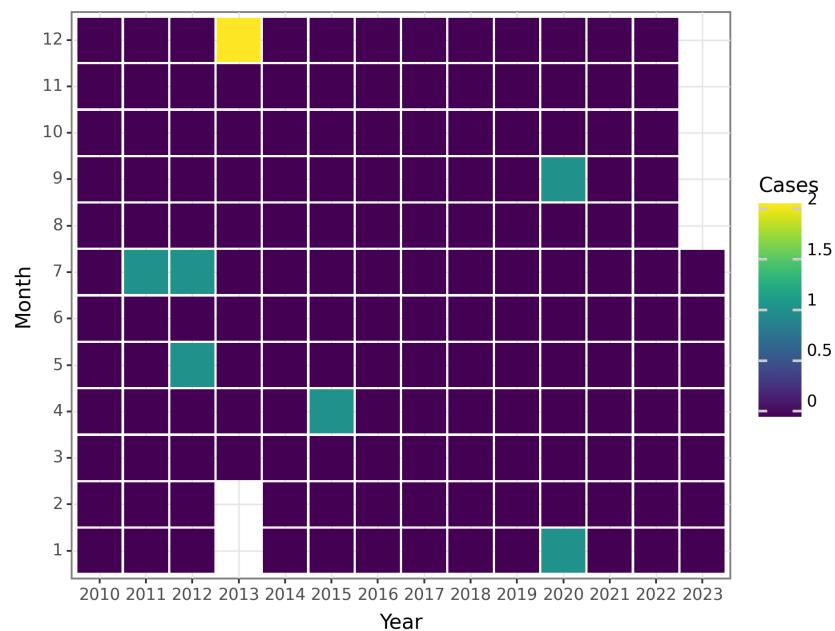


Figure 85: The Change of Scarlet fever Deaths before 2023 July

Brucellosis

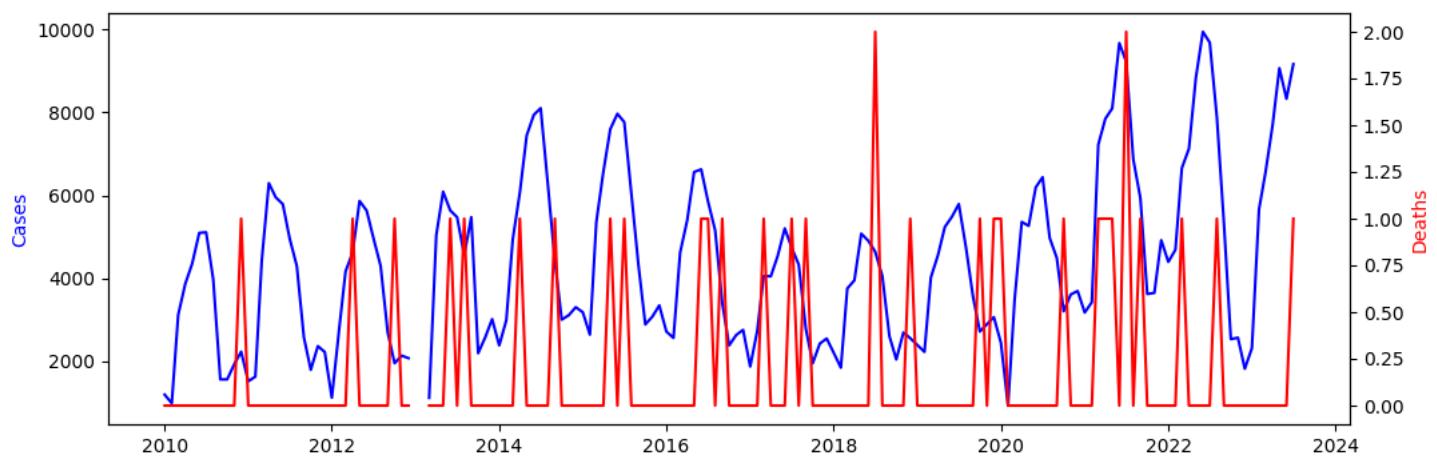


Figure 86: The Change of Brucellosis Reports before 2023 July

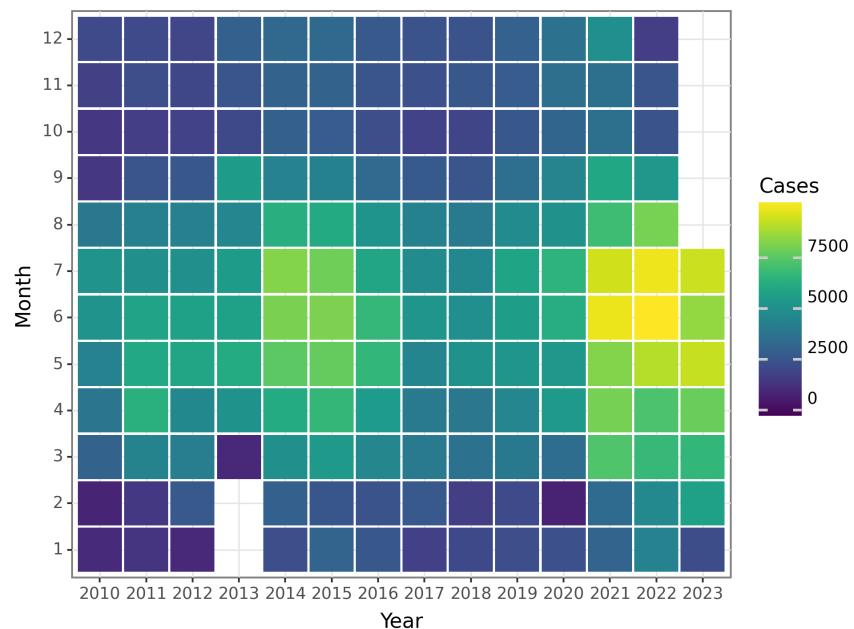


Figure 87: The Change of Brucellosis Cases before 2023 July

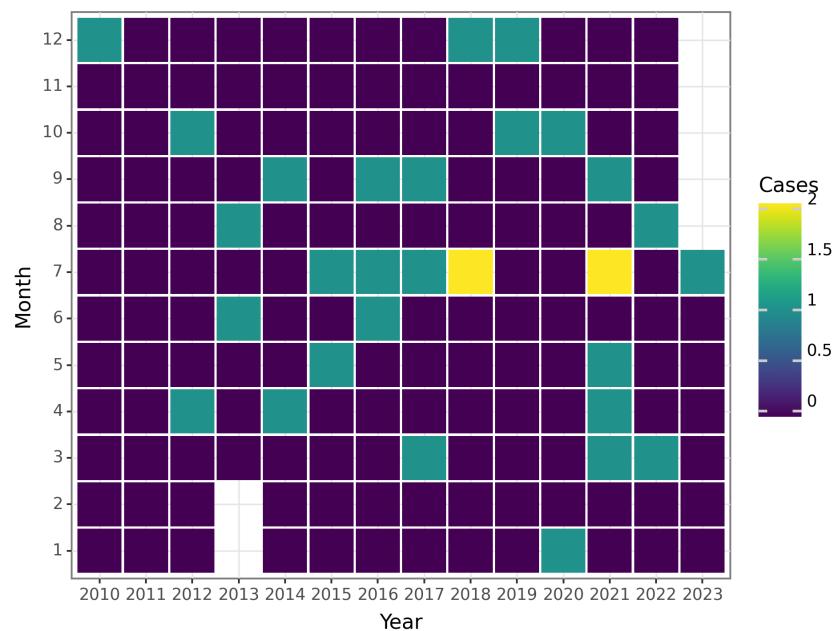


Figure 88: The Change of Brucellosis Deaths before 2023 July

Gonorrhea

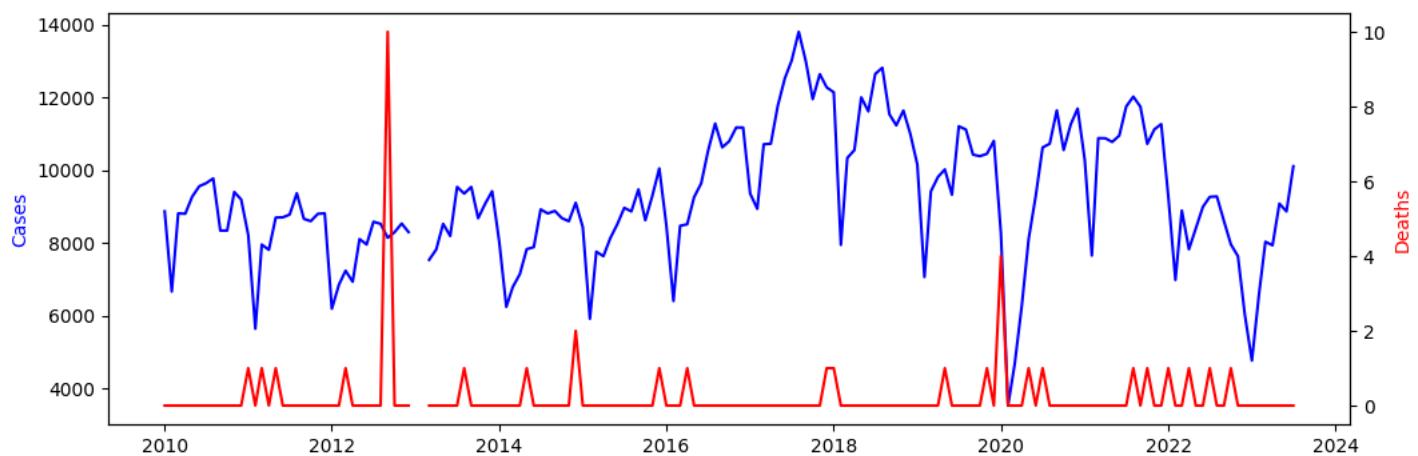


Figure 89: The Change of Gonorrhea Reports before 2023 July

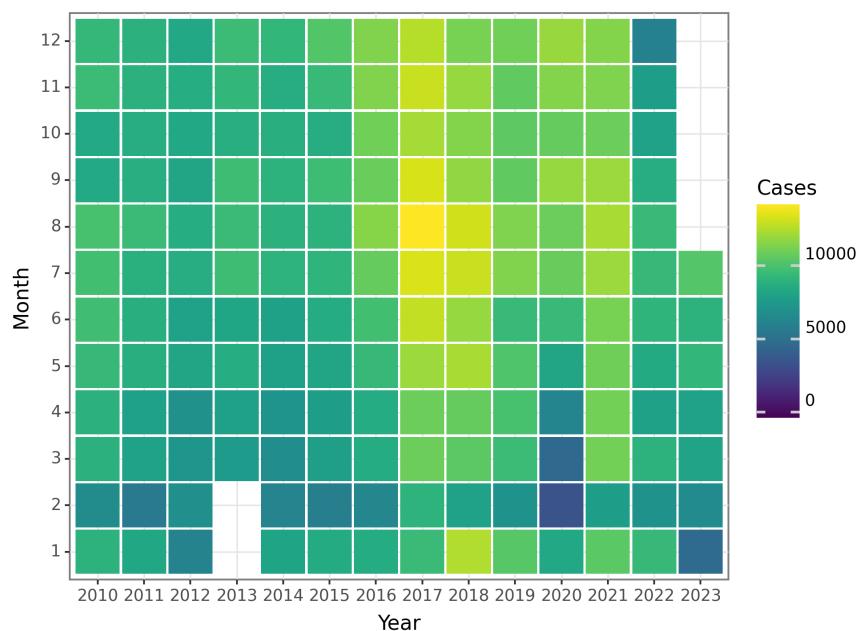


Figure 90: The Change of Gonorrhea Cases before 2023 July

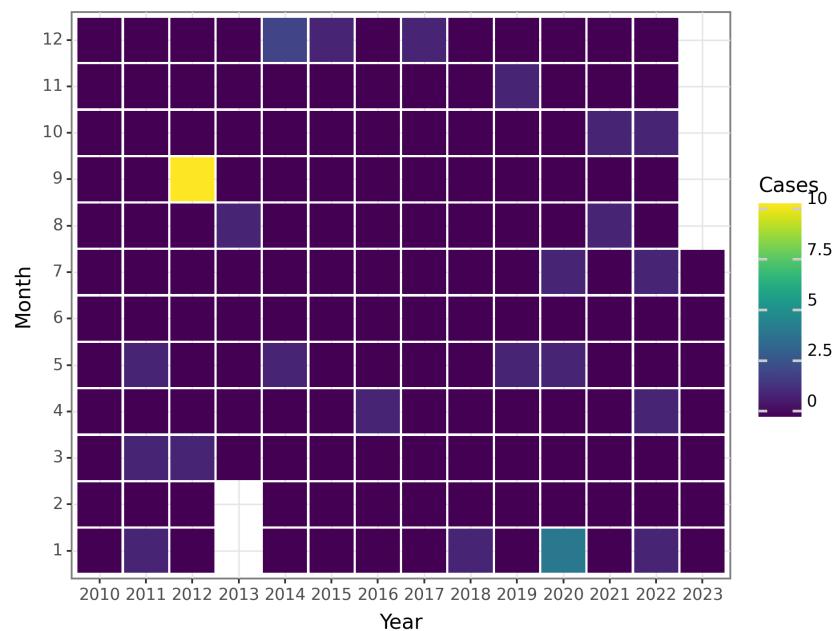


Figure 91: The Change of Gonorrhea Deaths before 2023 July

Syphilis

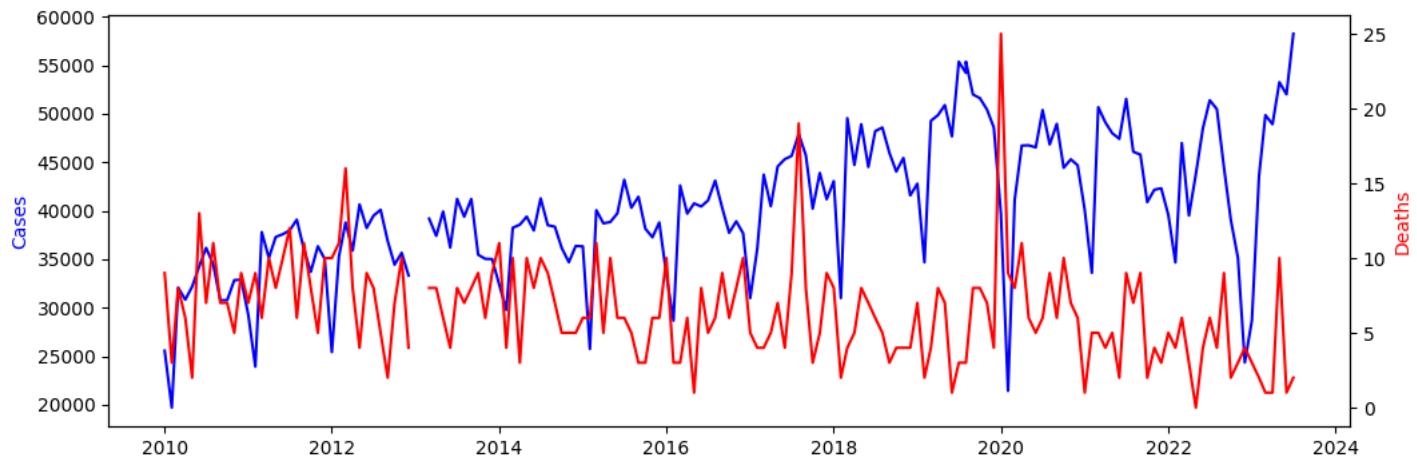


Figure 92: The Change of Syphilis Reports before 2023 July

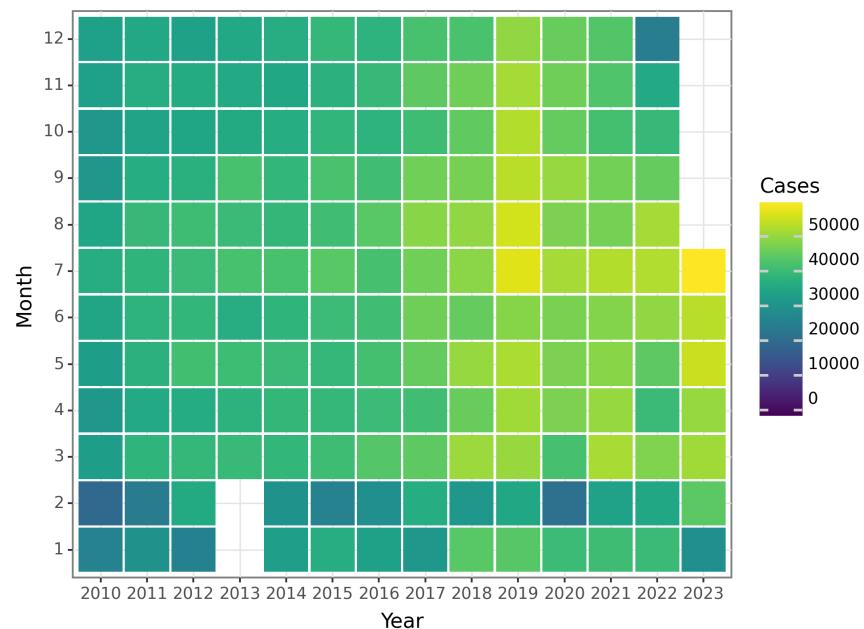


Figure 93: The Change of Syphilis Cases before 2023 July

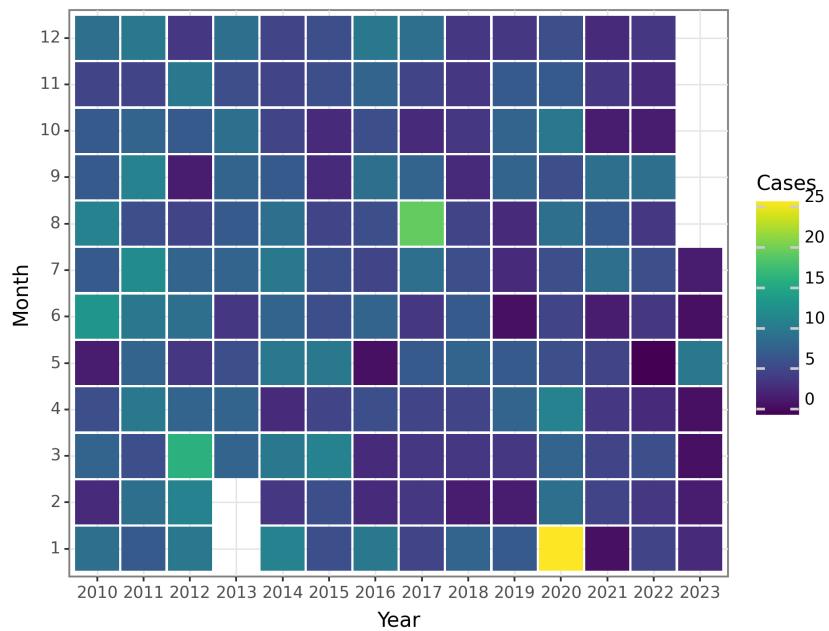


Figure 94: The Change of Syphilis Deaths before 2023 July

Leptospirosis

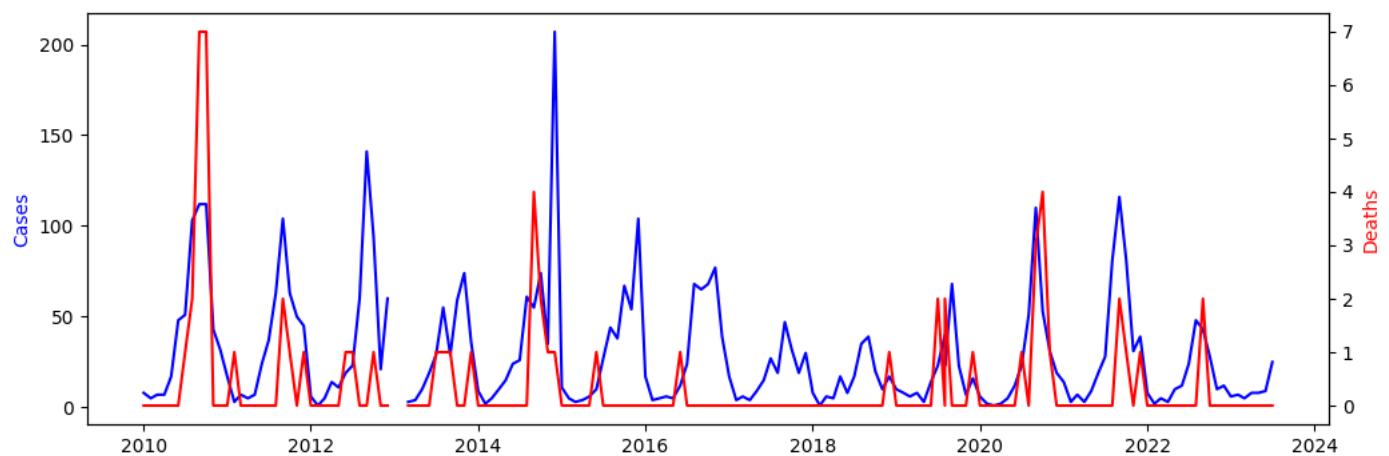


Figure 95: The Change of Leptospirosis Reports before 2023 July

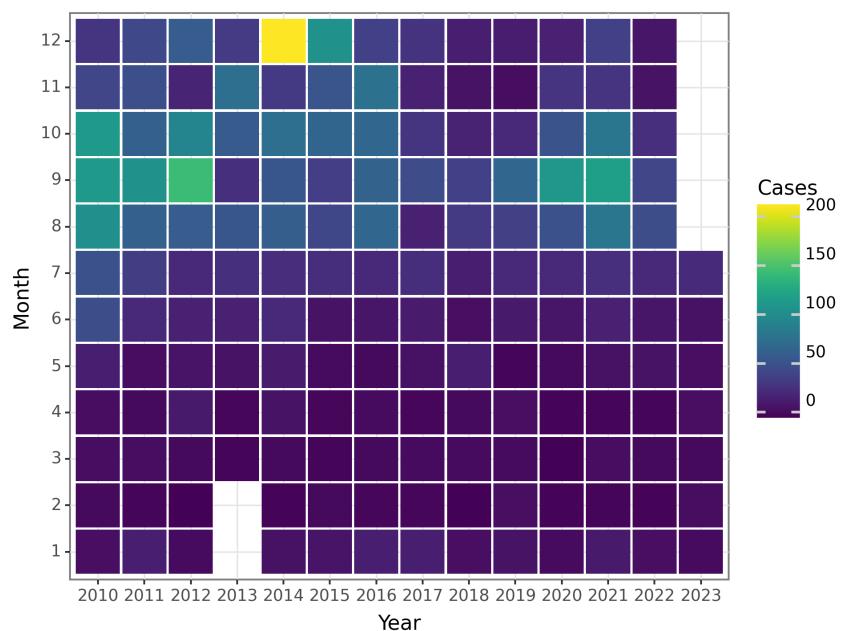


Figure 96: The Change of Leptospirosis Cases before 2023 July

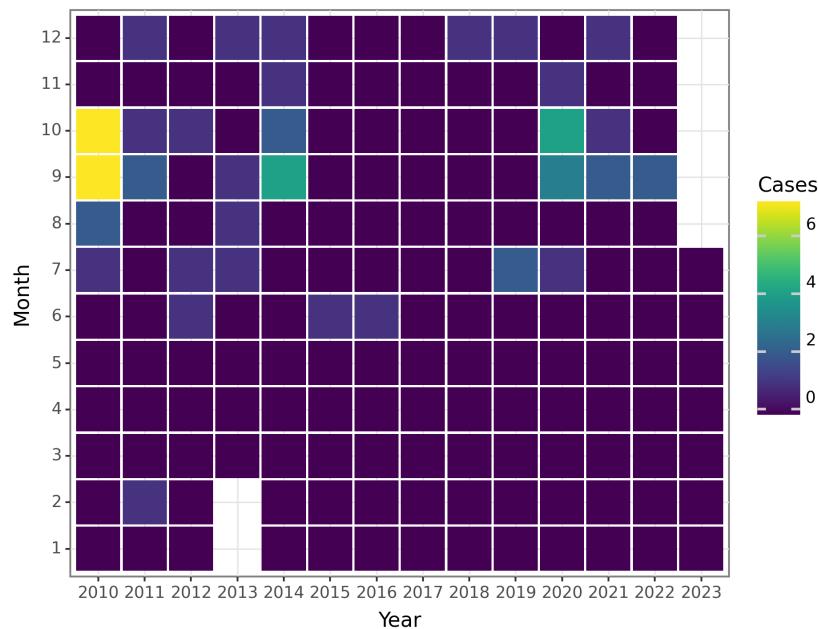


Figure 97: The Change of Leptospirosis Deaths before 2023 July

Schistosomiasis

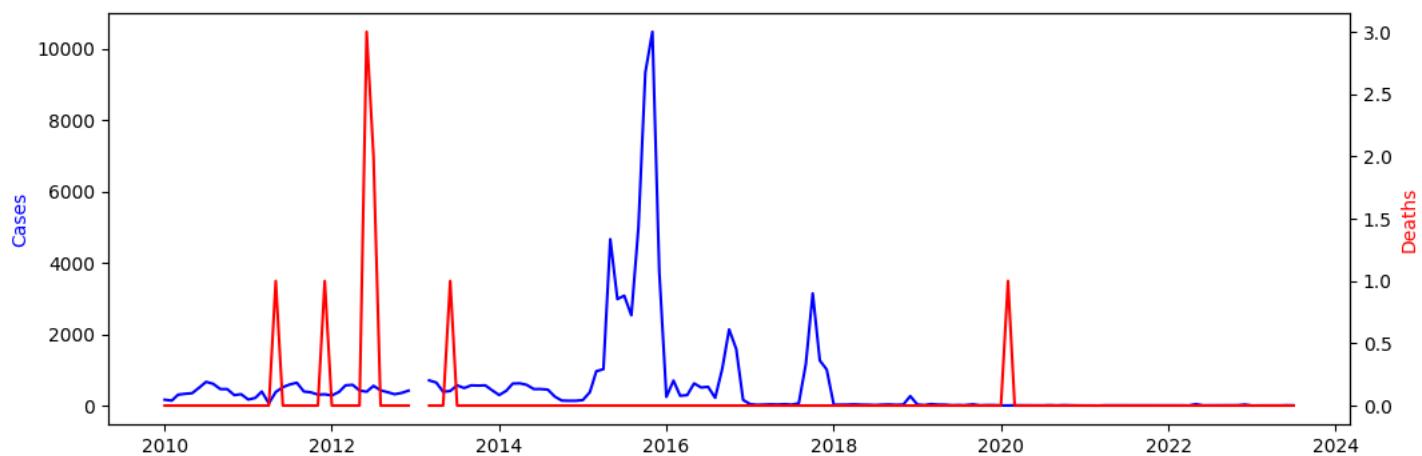


Figure 98: The Change of Schistosomiasis Reports before 2023 July

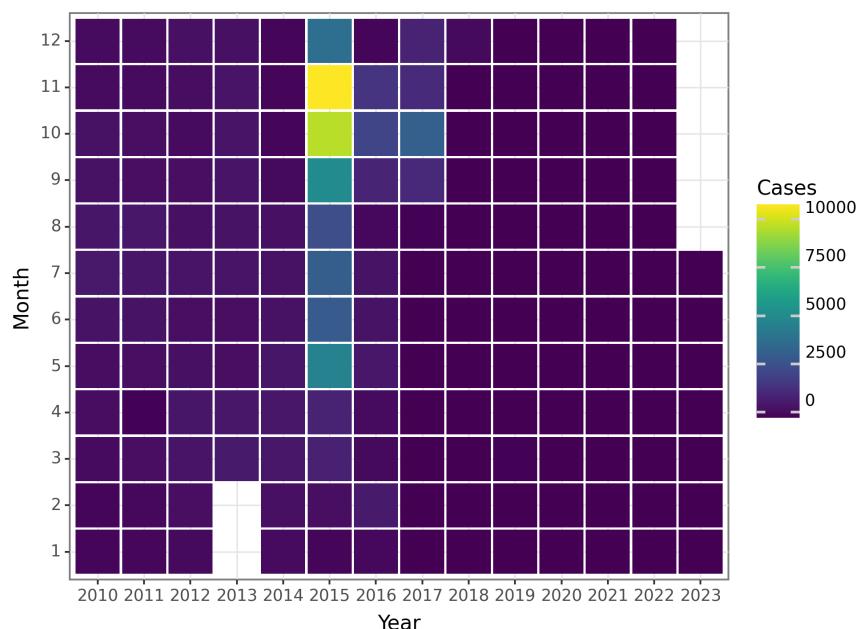


Figure 99: The Change of Schistosomiasis Cases before 2023 July

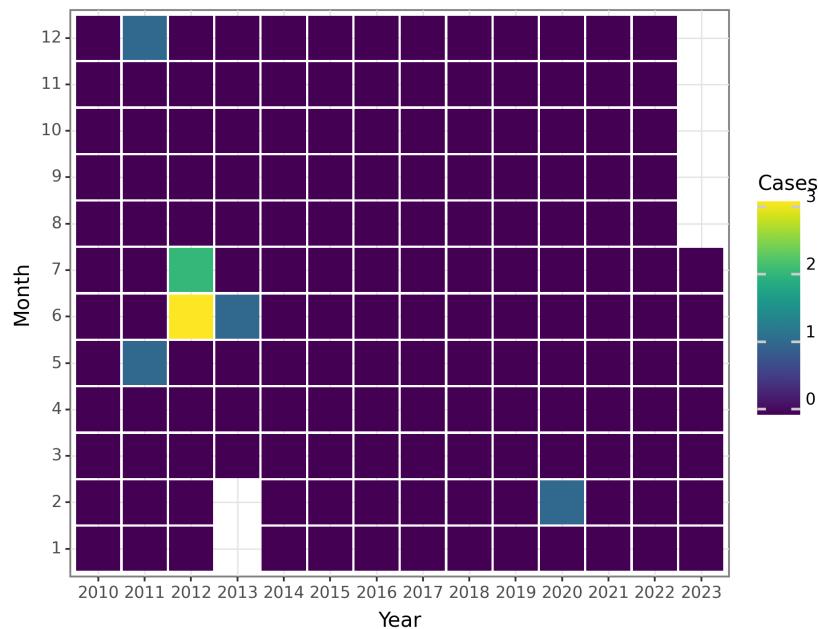


Figure 100: The Change of Schistosomiasis Deaths before 2023 July

Malaria

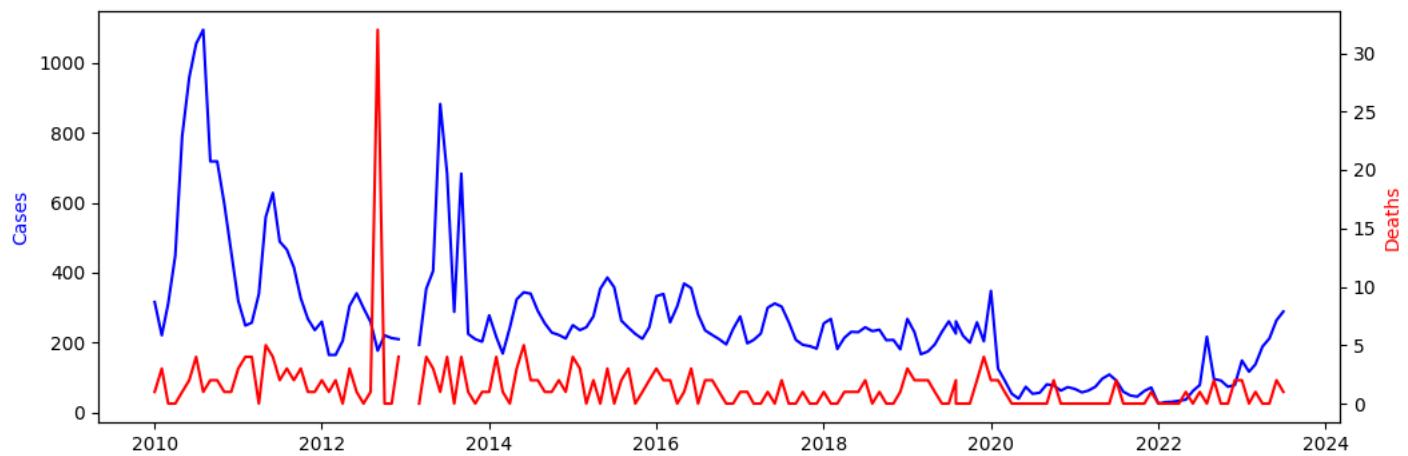


Figure 101: The Change of Malaria Reports before 2023 July

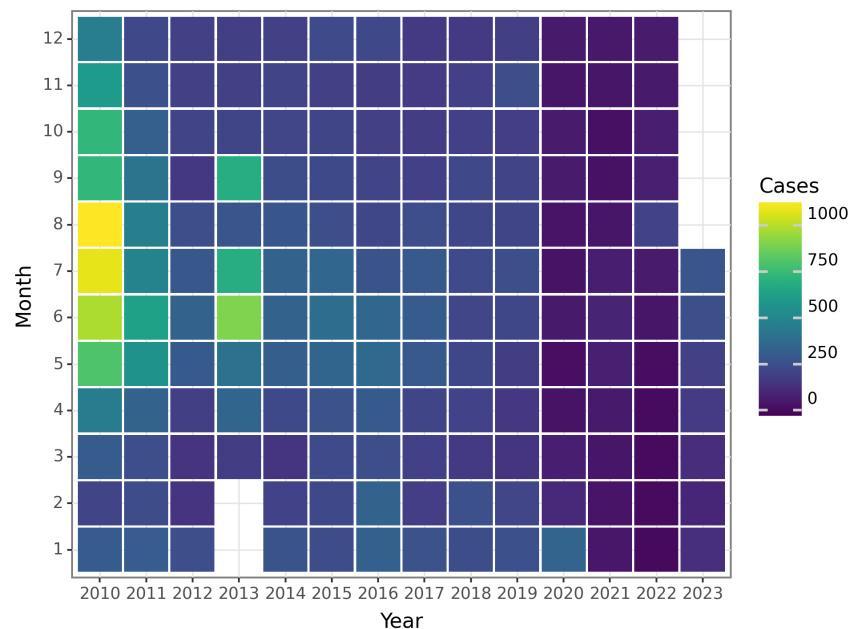


Figure 102: The Change of Malaria Cases before 2023 July

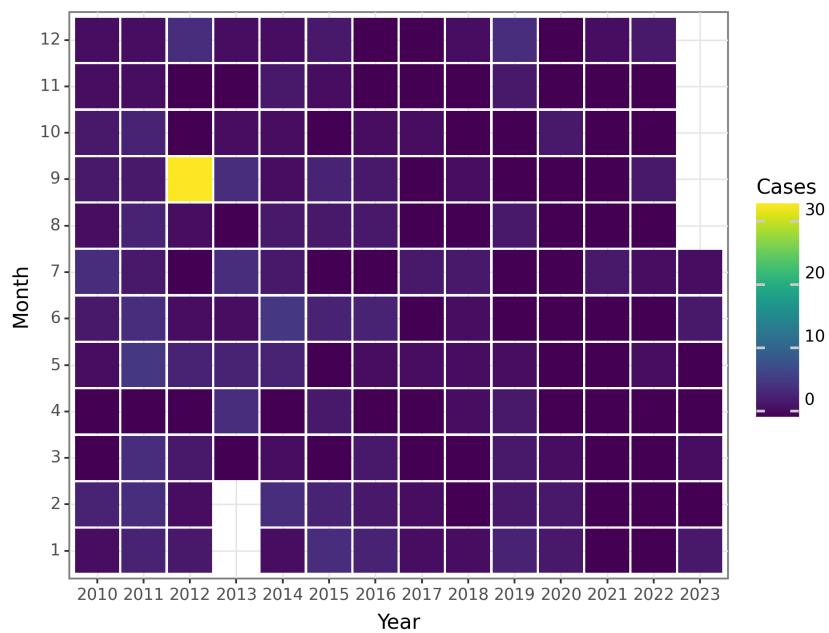


Figure 103: The Change of Malaria Deaths before 2023 July

Human infection with H7N9 virus

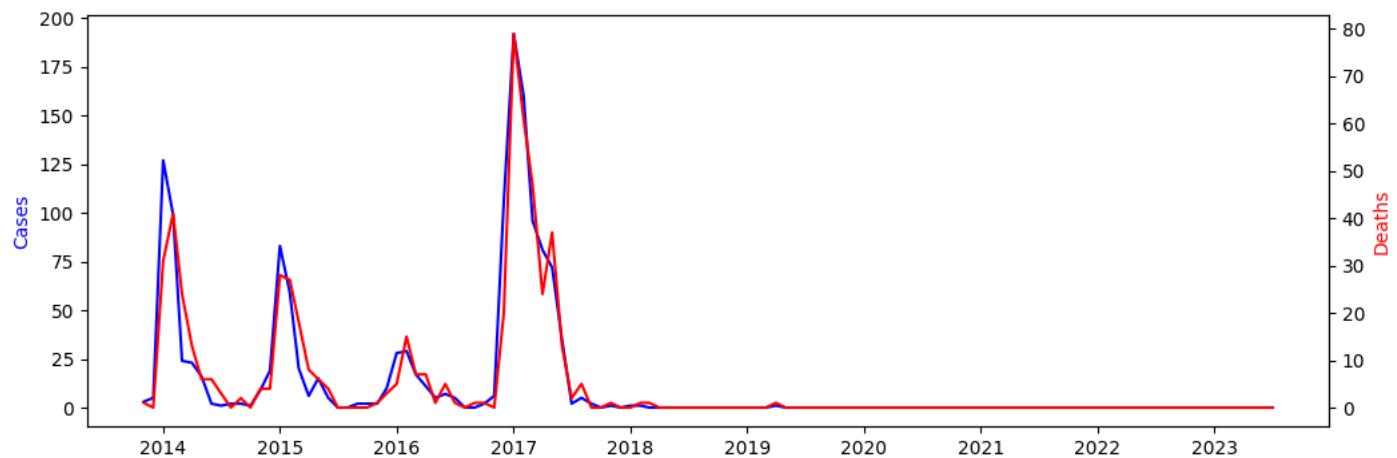


Figure 104: The Change of Human infection with H7N9 virus Reports before 2023 July

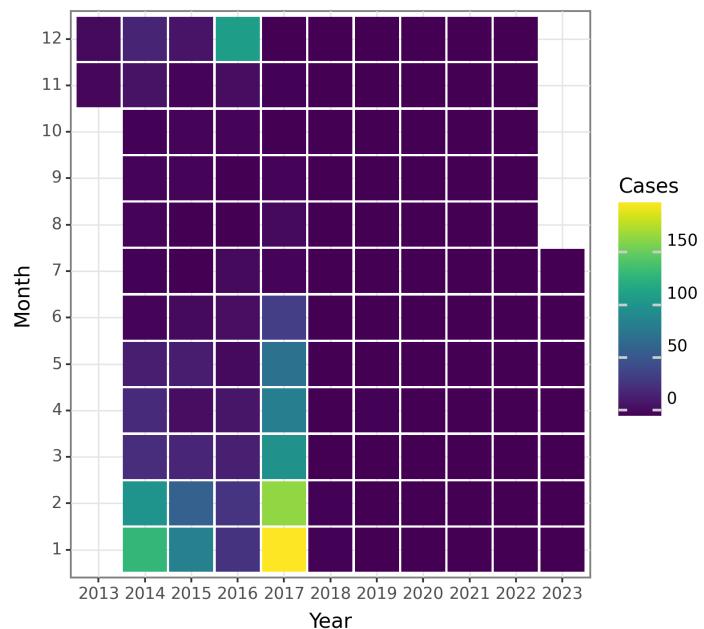


Figure 105: The Change of Human infection with H7N9 virus Cases before 2023 July

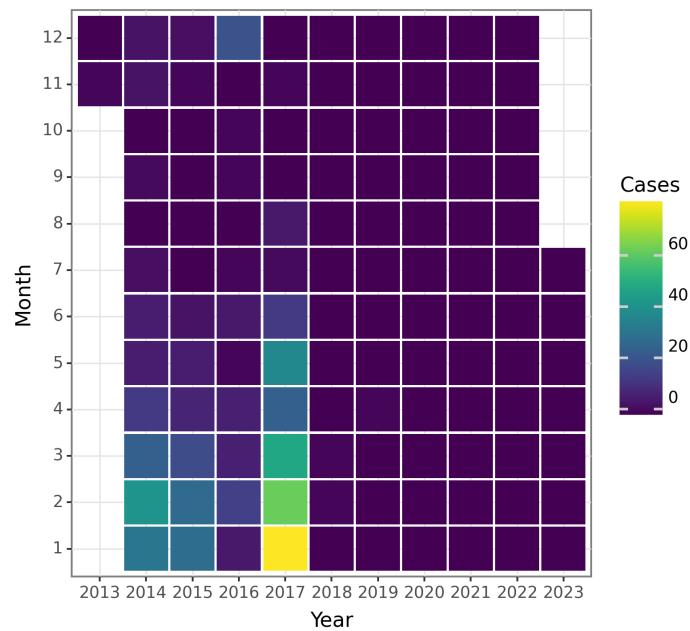


Figure 106: The Change of Human infection with H7N9 virus Deaths before 2023 July

Influenza

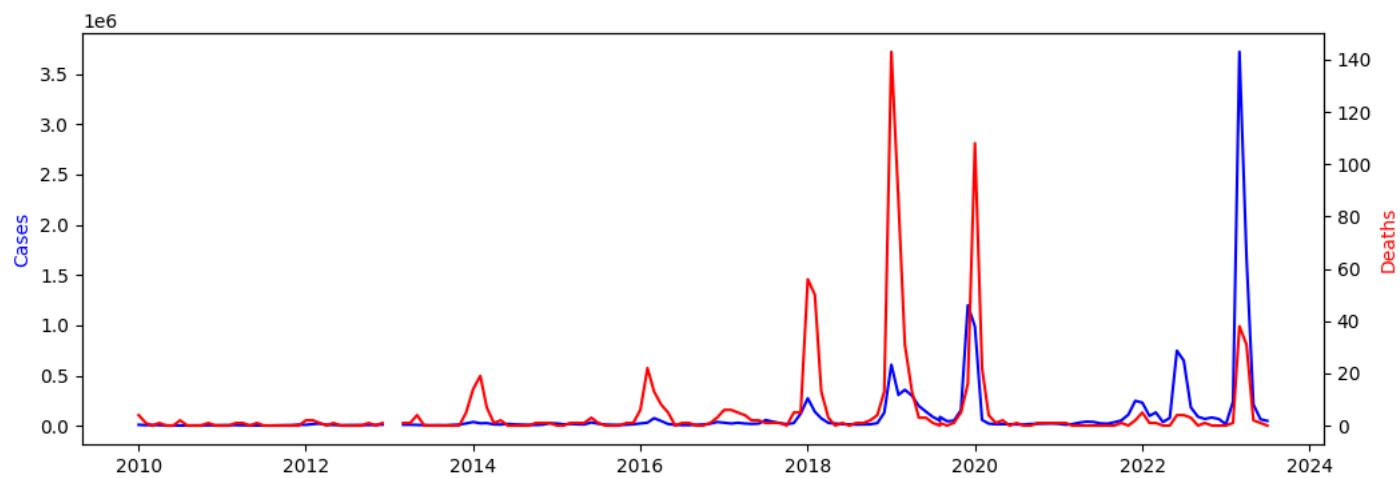


Figure 107: The Change of Influenza Reports before 2023 July

The monthly incidence and death data for Influenza in July 2023 are as follows:

- In July 2023, there were 48,848 reported cases of Influenza. - In the same month, there were no reported deaths due to Influenza.

The monthly incidence of Influenza cases has varied over the years. From 2010 to 2013, the number of cases remained relatively stable, ranging from around 2,500 to 23,833 cases per month. However, there was a significant increase in cases from 2014 to 2019, with numbers ranging from 9,938 to 1,195,771 cases per month. The highest number of cases was reported in December 2019, with 1,199,771 cases. In 2020, there was a noticeable decrease in the number of Influenza cases, likely due to the implementation of preventive measures and restrictions related to the COVID-19 pandemic. The number of cases fluctuated between 5,915 and 986,543 per month during this period.

In 2021, there was a slight increase in cases, ranging from 10,894 to 110,691 per month. The highest number of cases in this period was reported in November 2021.

In 2022, there was a significant surge in Influenza cases, with numbers ranging from 37,567 to 747,038 per month. The highest number of cases was reported in June 2022.

In March 2023, there was a substantial increase in the number of cases, with a staggering 3,721,370 reported cases. This sharp increase could be attributed to various factors, including changes in the strain of the virus, lower vaccination rates, or other epidemiological factors.

Regarding deaths, the number of reported deaths due to Influenza has generally been relatively low. From 2010 to 2013, the number of deaths remained stable, ranging from 0 to 10 deaths per month. However, there was a slight increase in deaths from 2014 to 2019, with numbers ranging from 0 to 143 deaths per month. The highest number of deaths was reported in January 2019.

In 2020 and 2021, the number of reported deaths due to Influenza remained relatively low, ranging from 0 to 108 deaths per month. However, in March 2022, there was an increase in deaths, with 38 reported deaths. This increase in deaths could be associated with the surge in cases during that period.

In summary, the monthly incidence and death data for Influenza in July 2023 indicate a significant number of cases but no reported deaths. The data also reveal variations in the number of cases and deaths over the years, with some notable increases and decreases. These trends could be influenced by various factors, including changes in the virus strain, vaccination rates, and other epidemiological factors. It is essential to continue monitoring and implementing preventive measures to mitigate the impact of Influenza outbreaks.

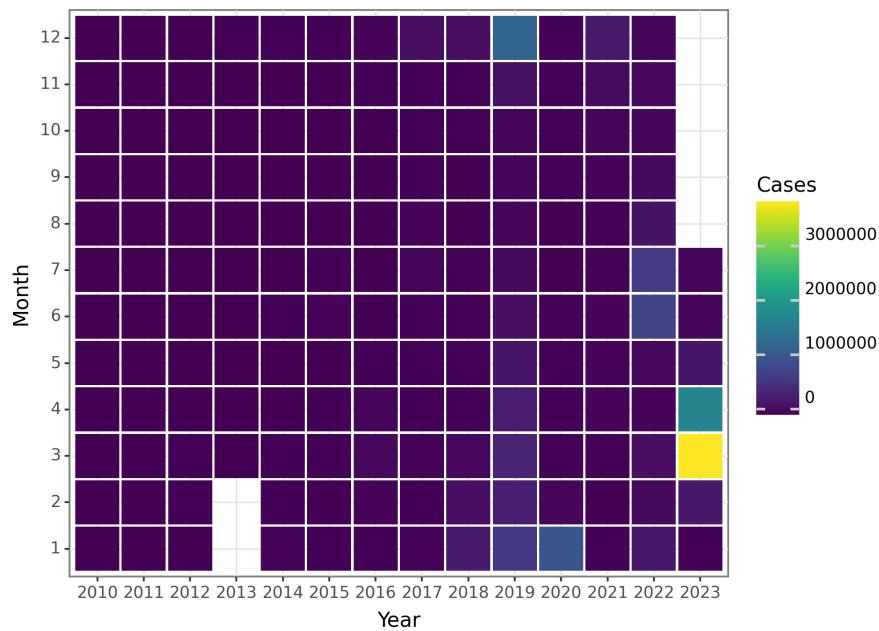


Figure 108: The Change of Influenza Cases before 2023 July

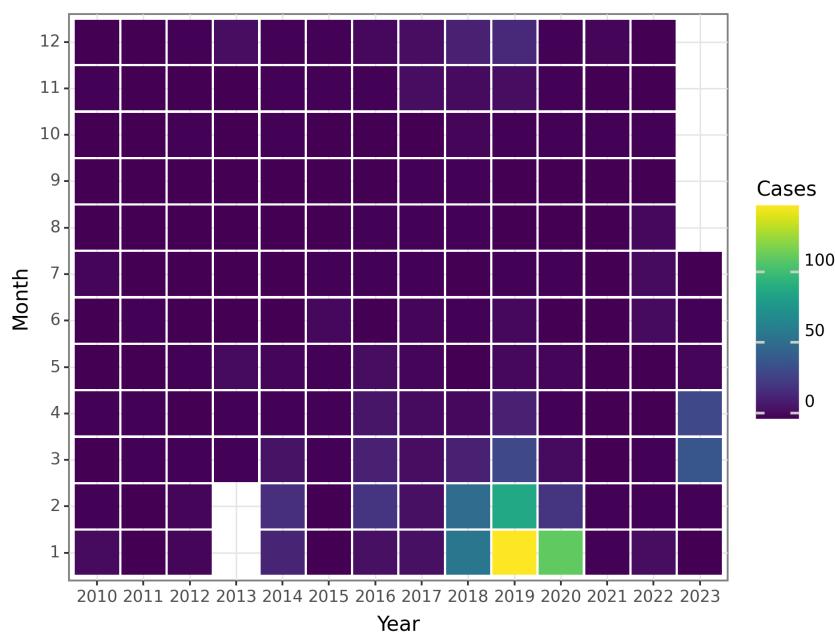


Figure 109: The Change of Influenza Deaths before 2023 July

Mumps

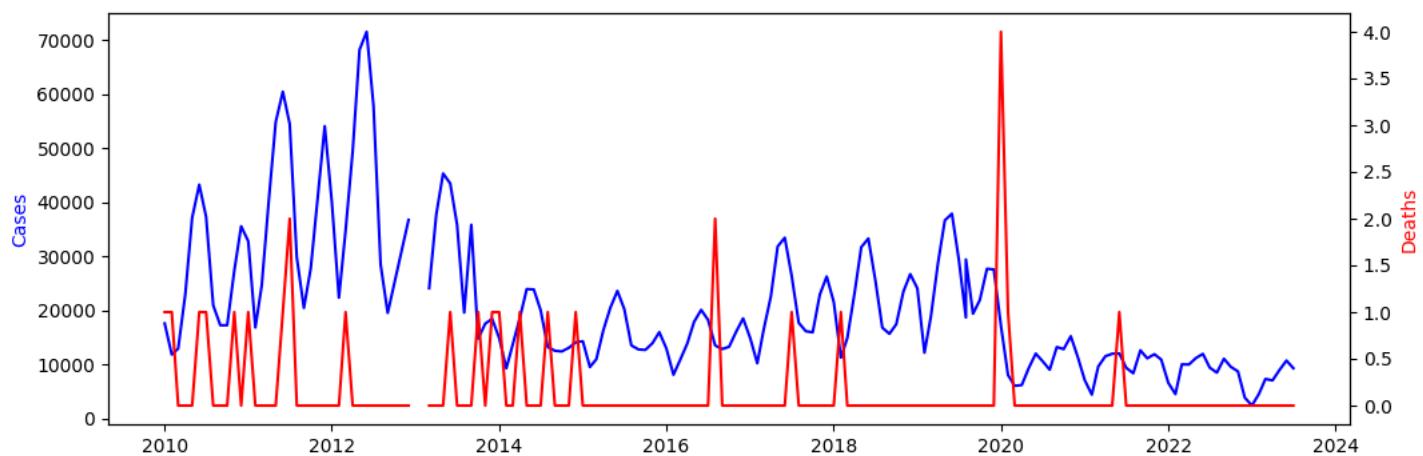


Figure 110: The Change of Mumps Reports before 2023 July

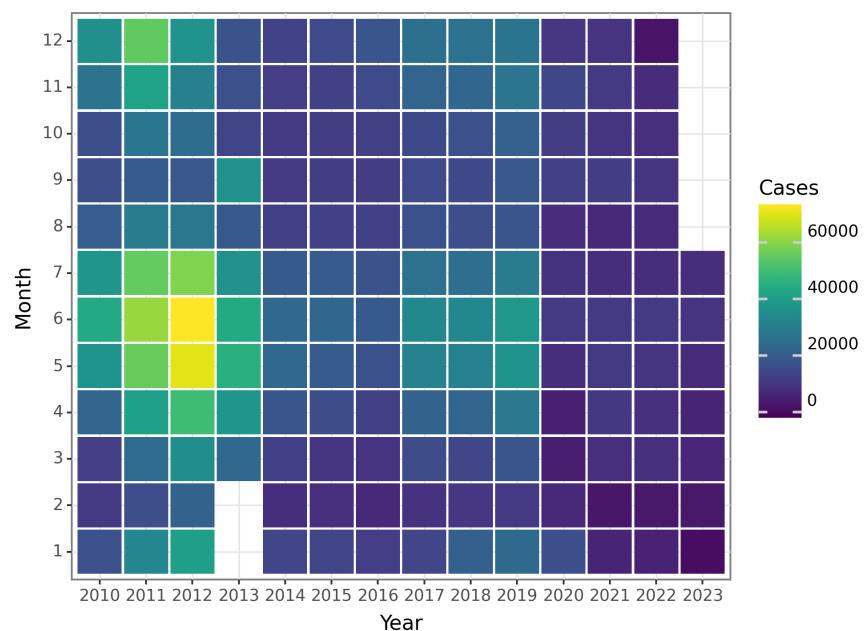


Figure 111: The Change of Mumps Cases before 2023 July

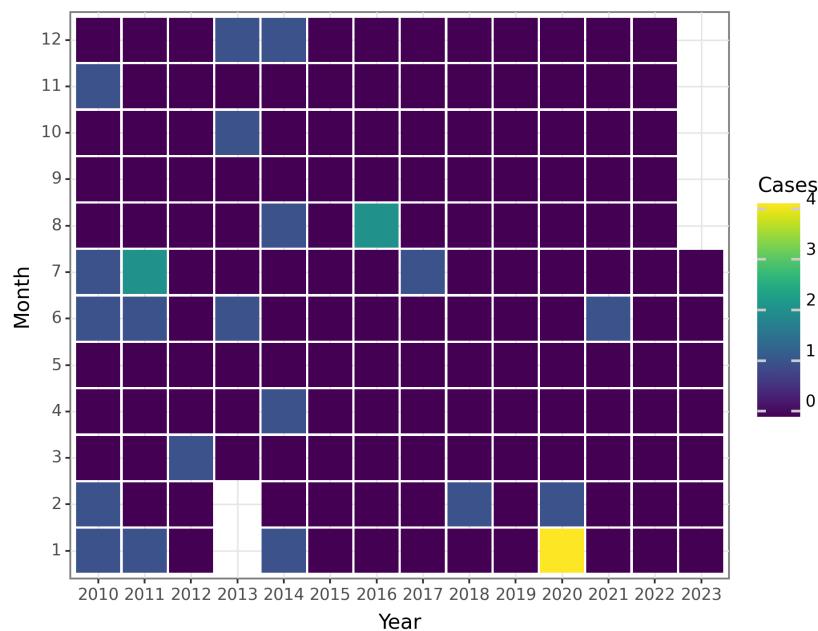


Figure 112: The Change of Mumps Deaths before 2023 July

Rubella

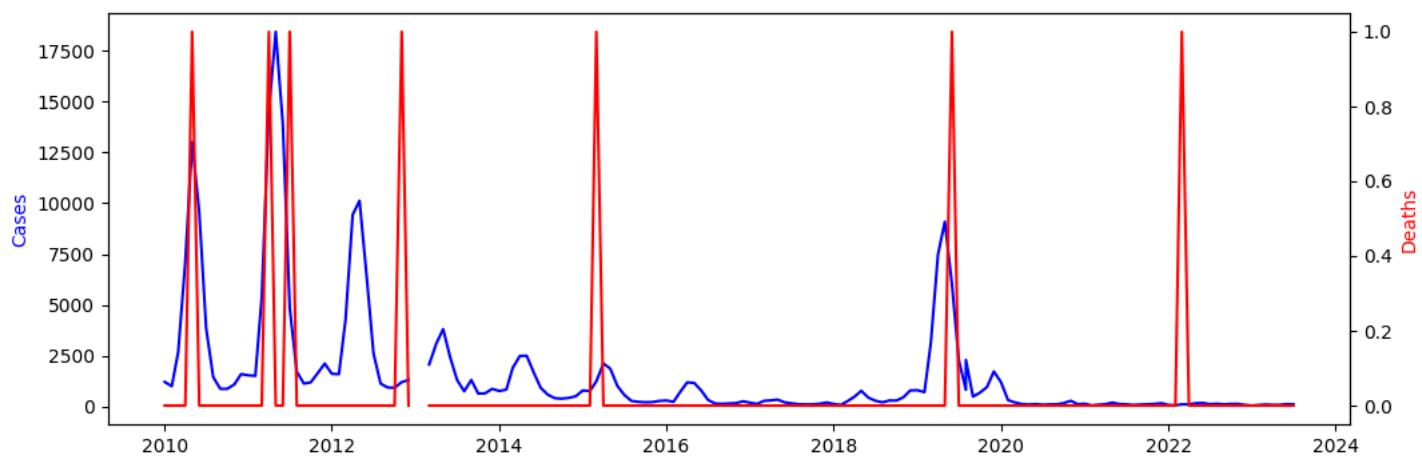


Figure 113: The Change of Rubella Reports before 2023 July

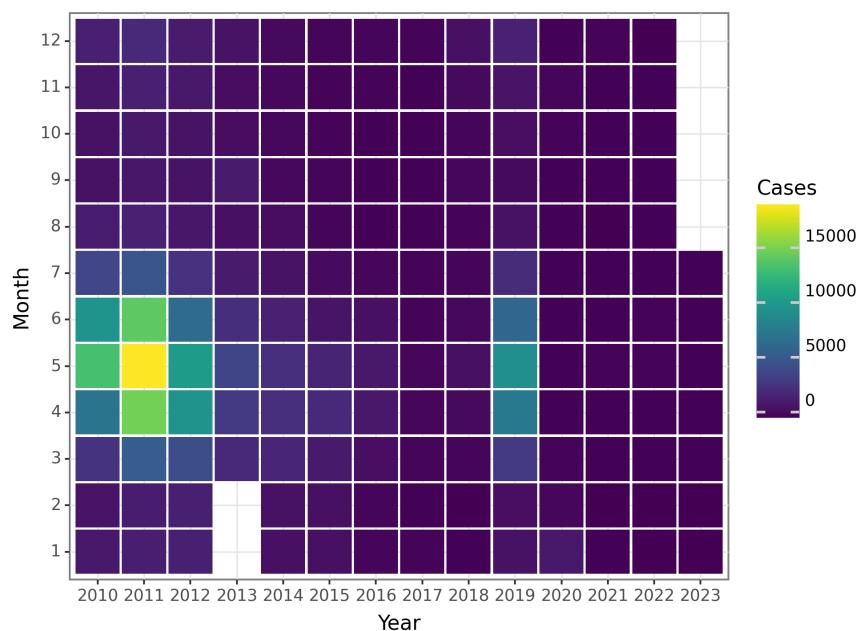


Figure 114: The Change of Rubella Cases before 2023 July

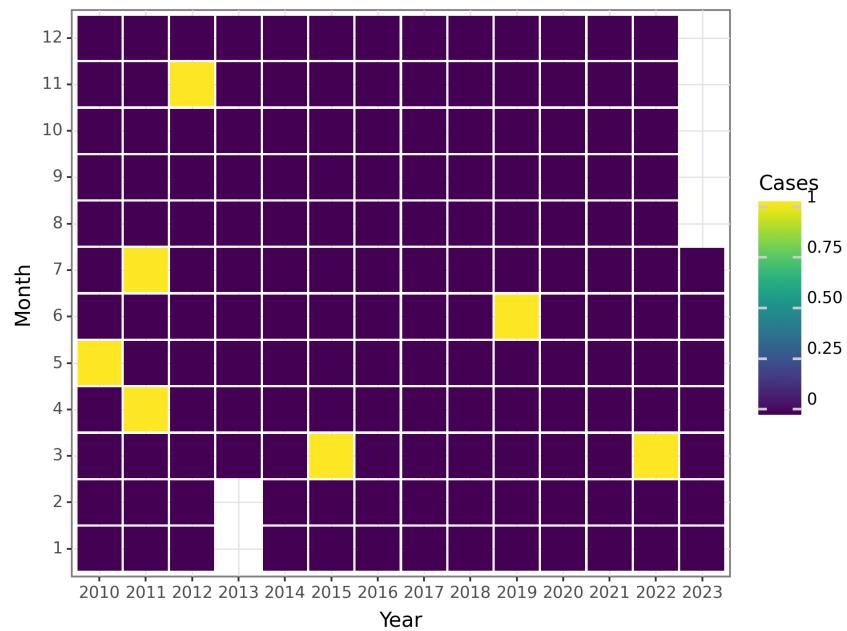


Figure 115: The Change of Rubella Deaths before 2023 July

Acute hemorrhagic conjunctivitis

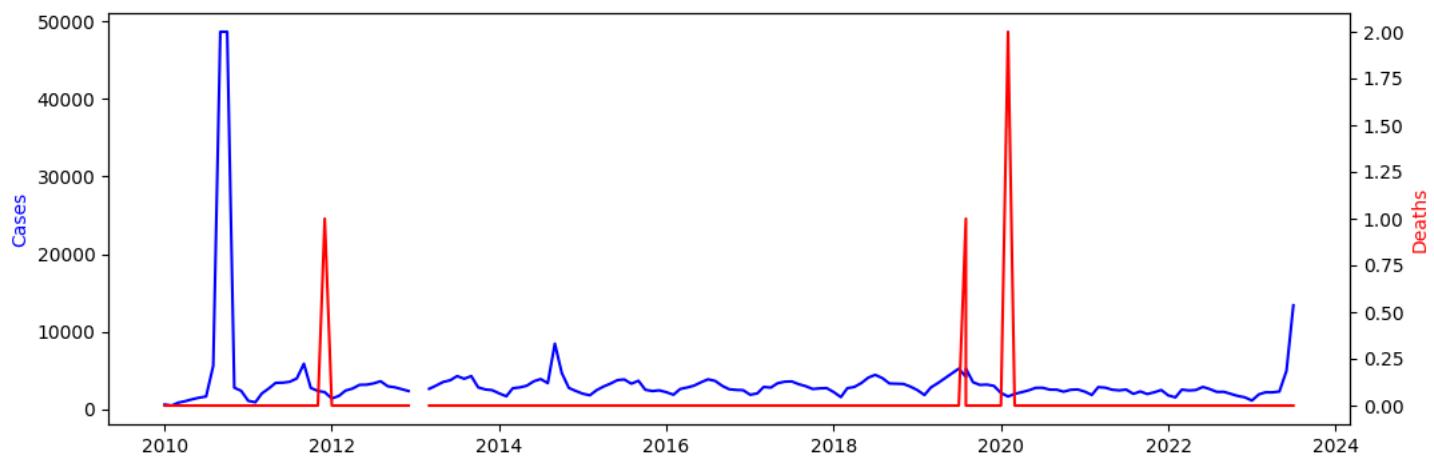


Figure 116: The Change of Acute hemorrhagic conjunctivitis Reports before 2023 July

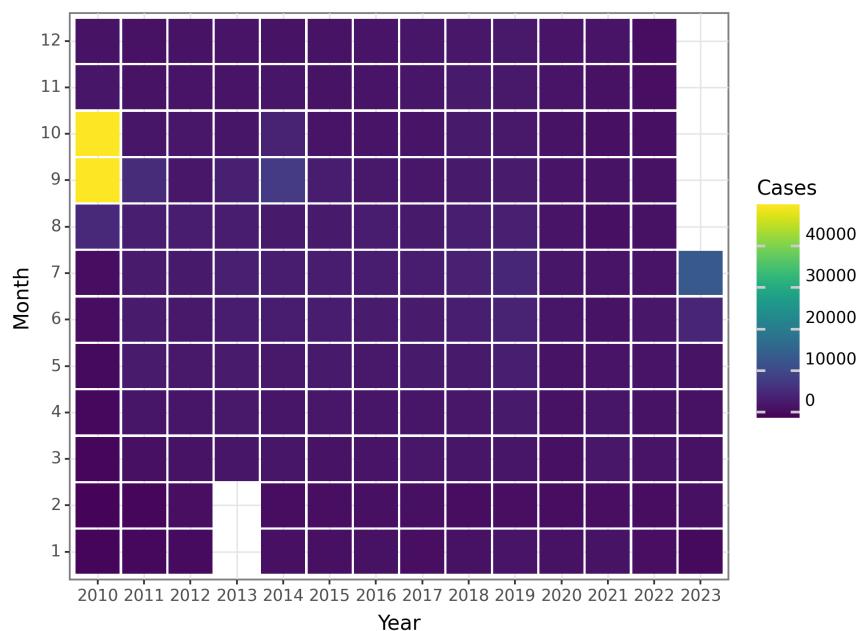


Figure 117: The Change of Acute hemorrhagic conjunctivitis Cases before 2023 July

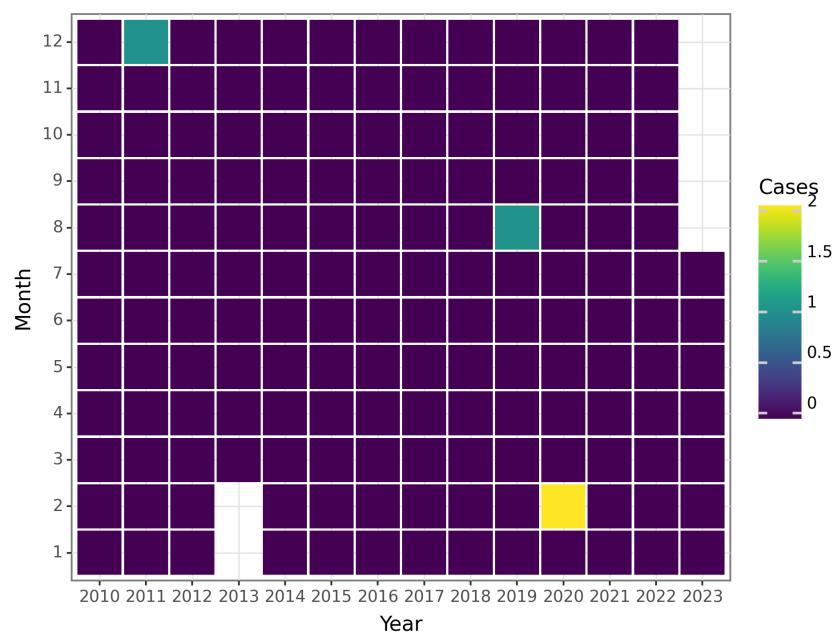


Figure 118: The Change of Acute hemorrhagic conjunctivitis Deaths before 2023 July

Leprosy

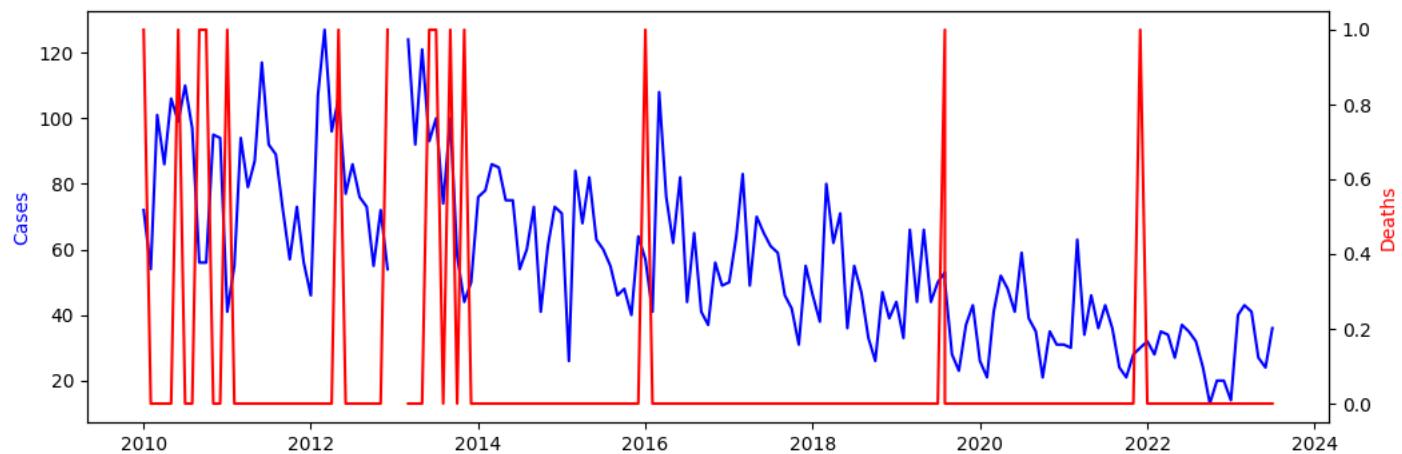


Figure 119: The Change of Leprosy Reports before 2023 July

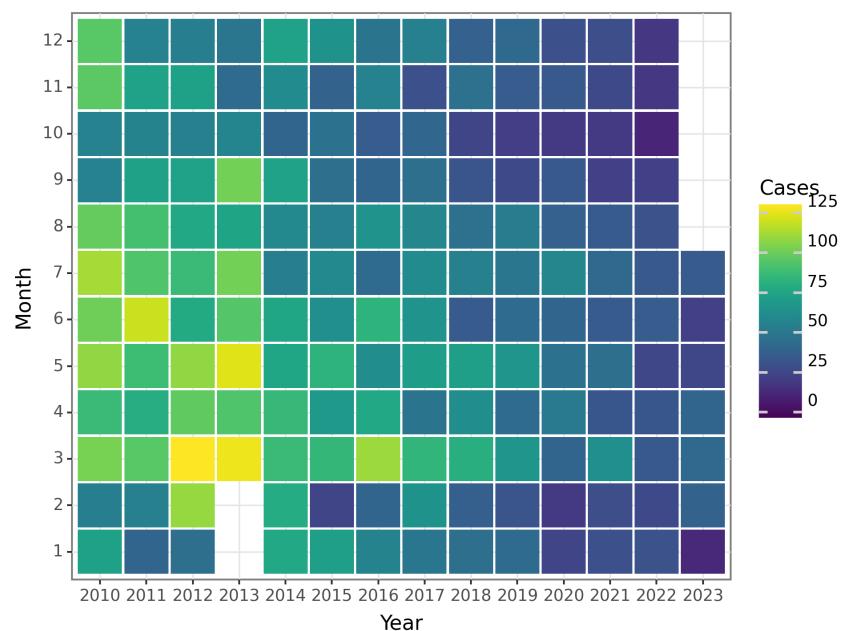


Figure 120: The Change of Leprosy Cases before 2023 July

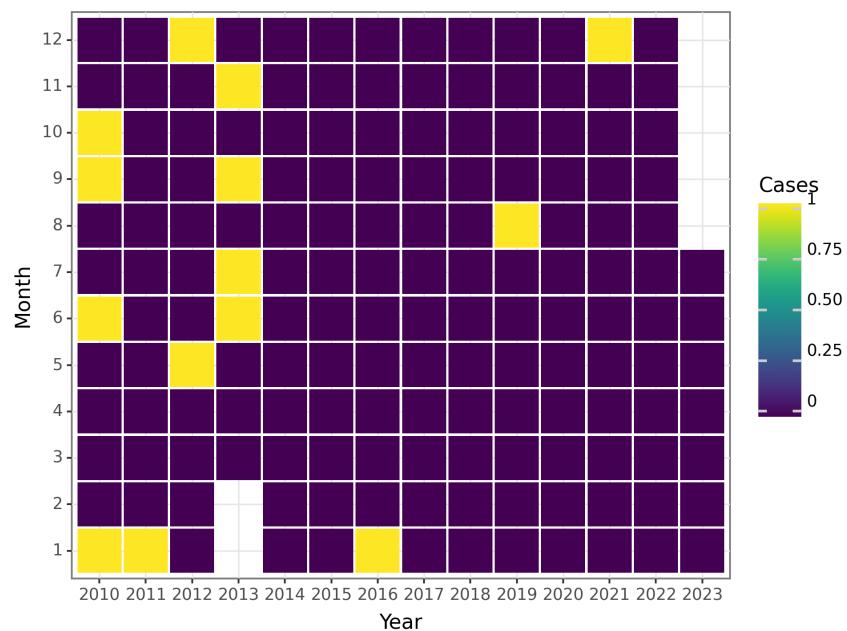


Figure 121: The Change of Leprosy Deaths before 2023 July

Typhus

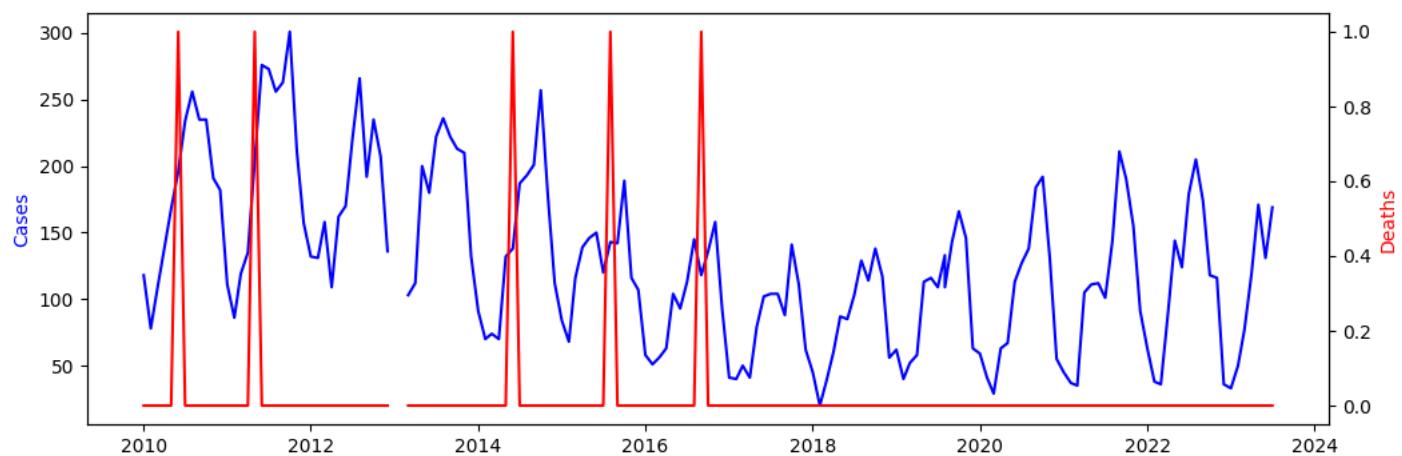


Figure 122: The Change of Typhus Reports before 2023 July

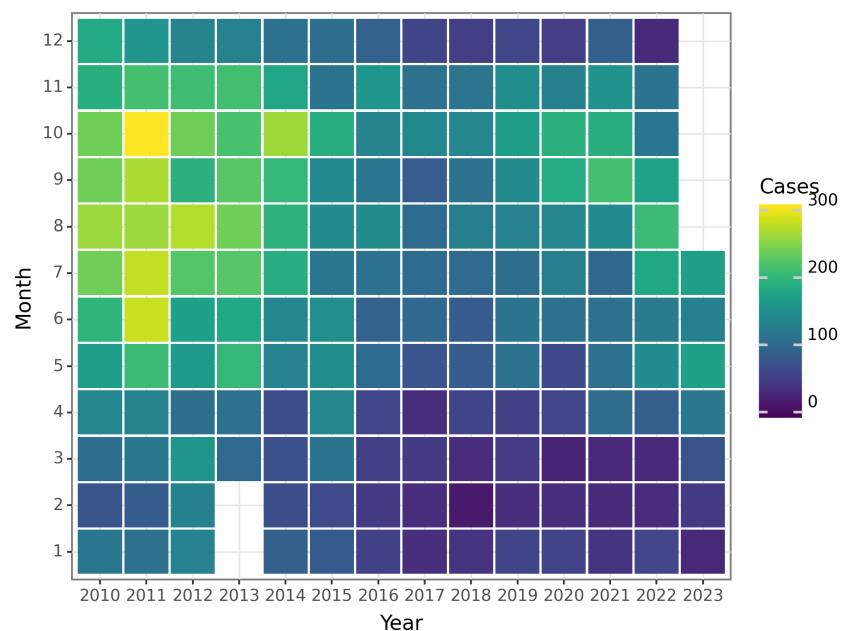


Figure 123: The Change of Typhus Cases before 2023 July

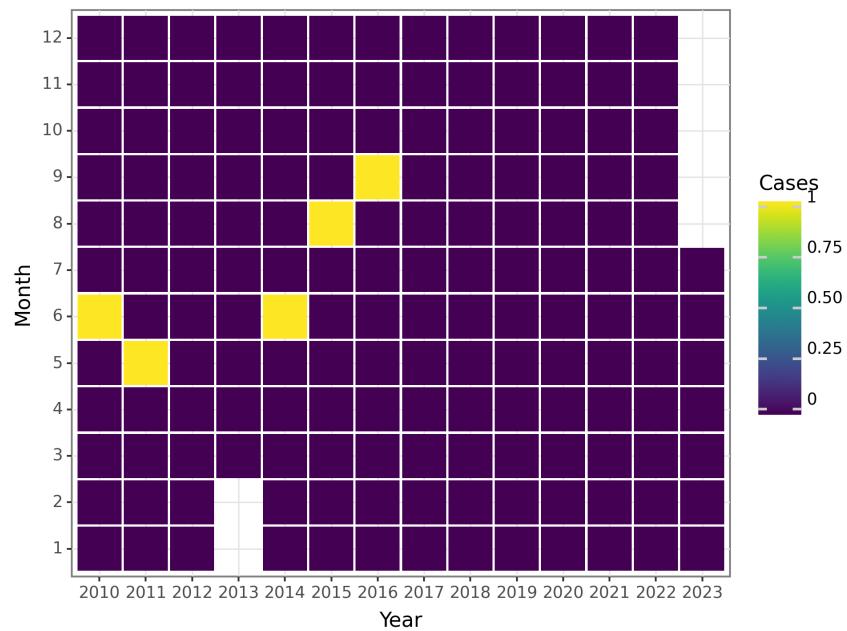


Figure 124: The Change of Typhus Deaths before 2023 July

Kala azar

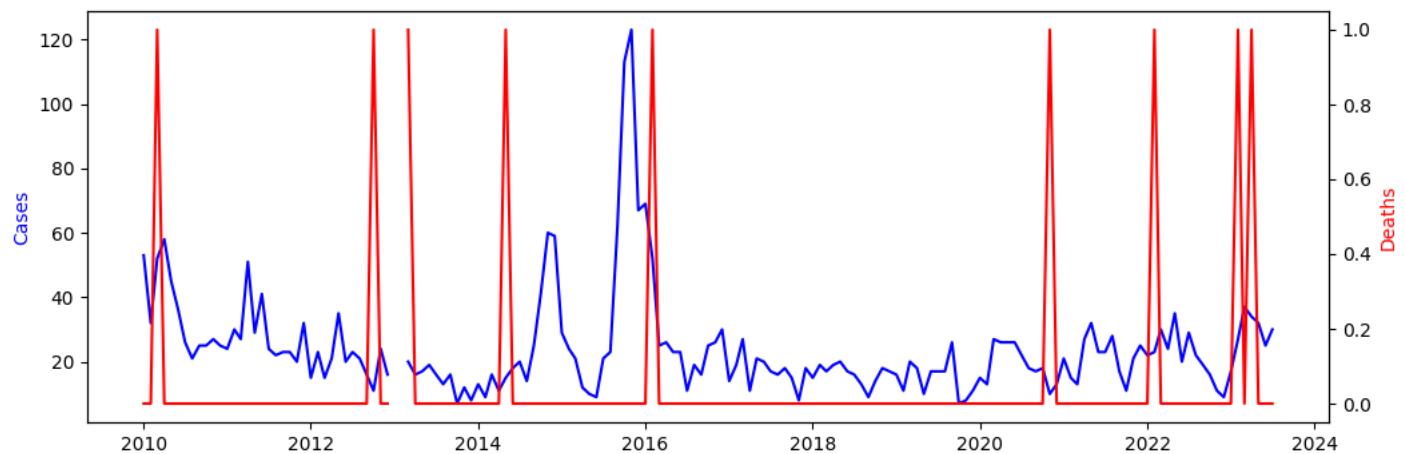


Figure 125: The Change of Kala azar Reports before 2023 July

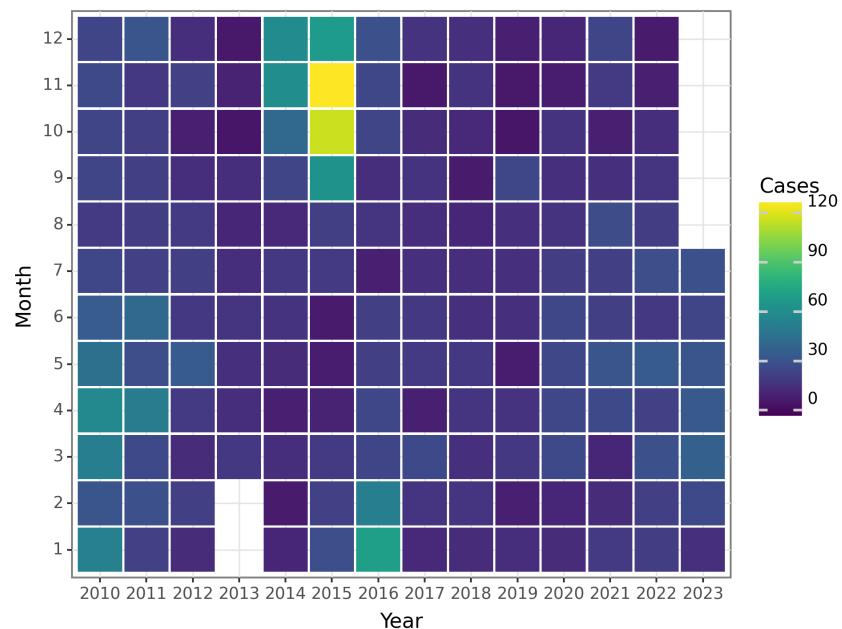


Figure 126: The Change of Kala azar Cases before 2023 July

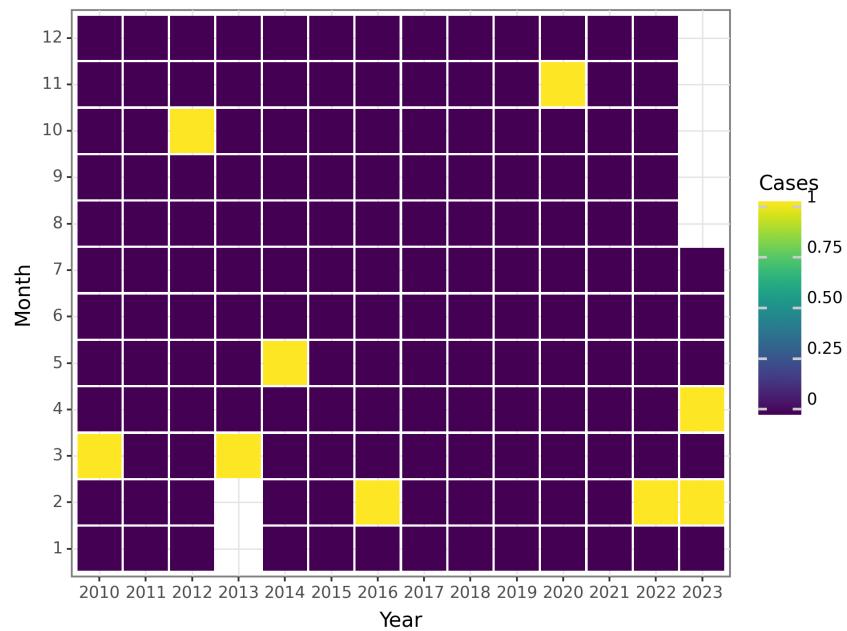


Figure 127: The Change of Kala azar Deaths before 2023 July

Echinococcosis

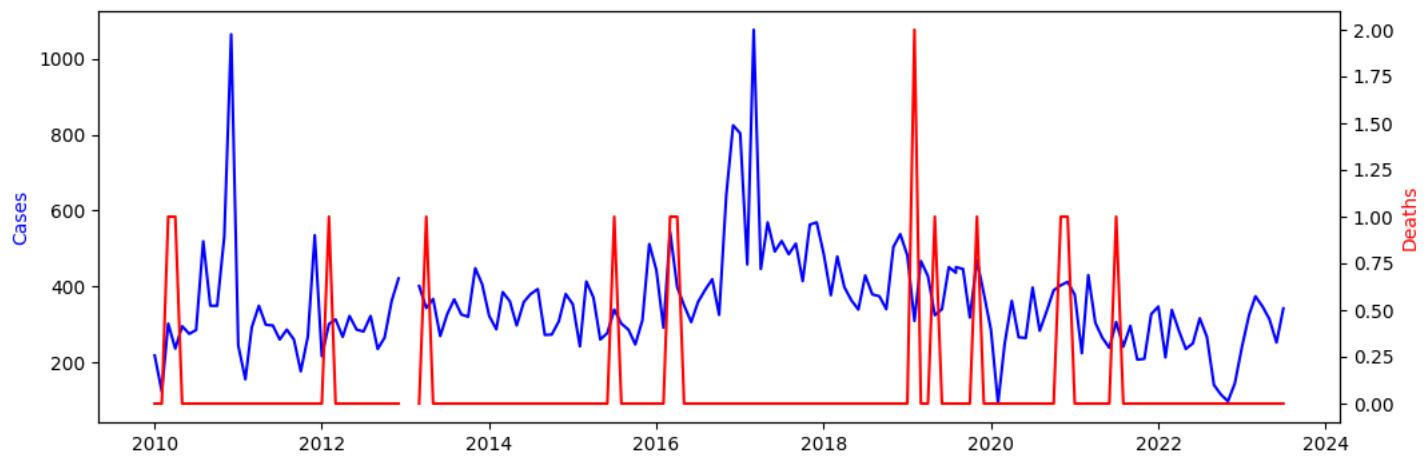


Figure 128: The Change of Echinococcosis Reports before 2023 July

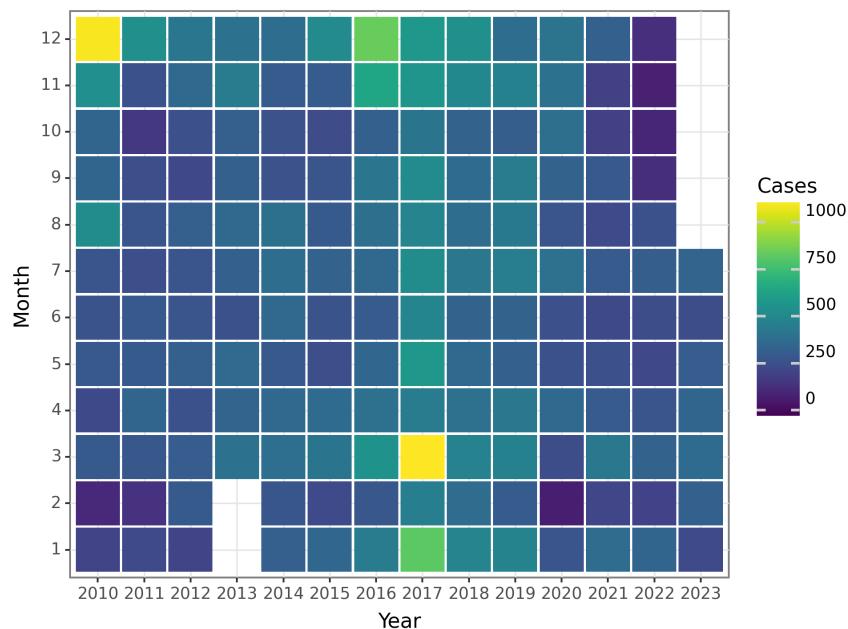


Figure 129: The Change of Echinococcosis Cases before 2023 July

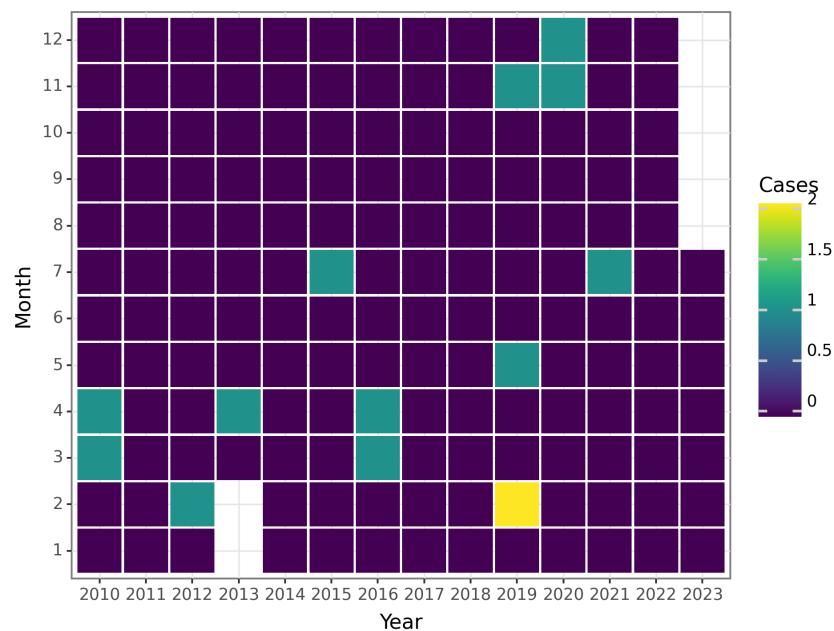


Figure 130: The Change of Echinococcosis Deaths before 2023 July

Filariasis

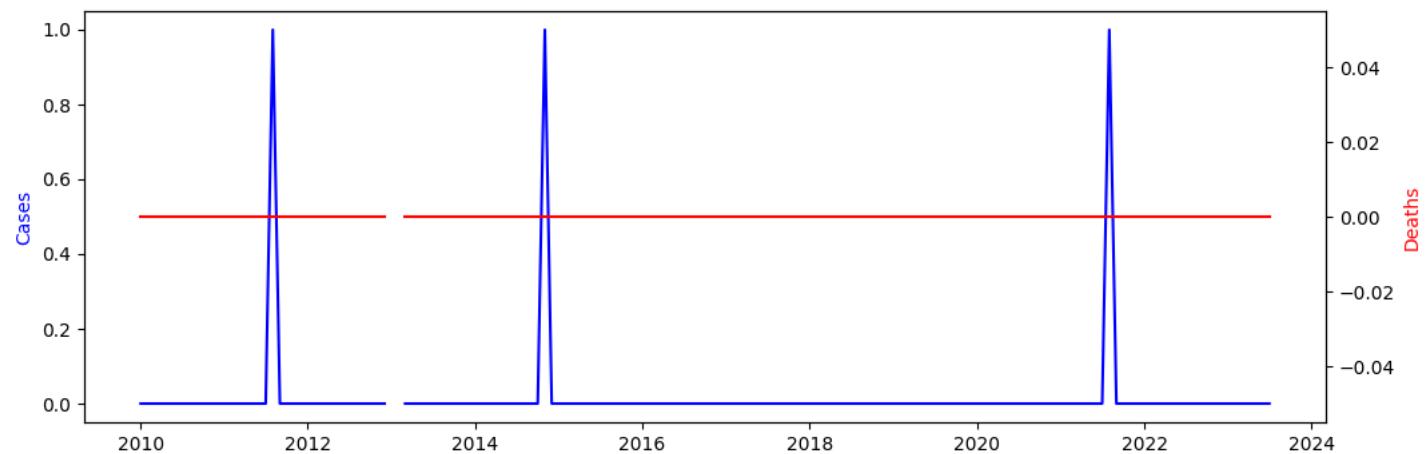


Figure 131: The Change of Filariasis Reports before 2023 July

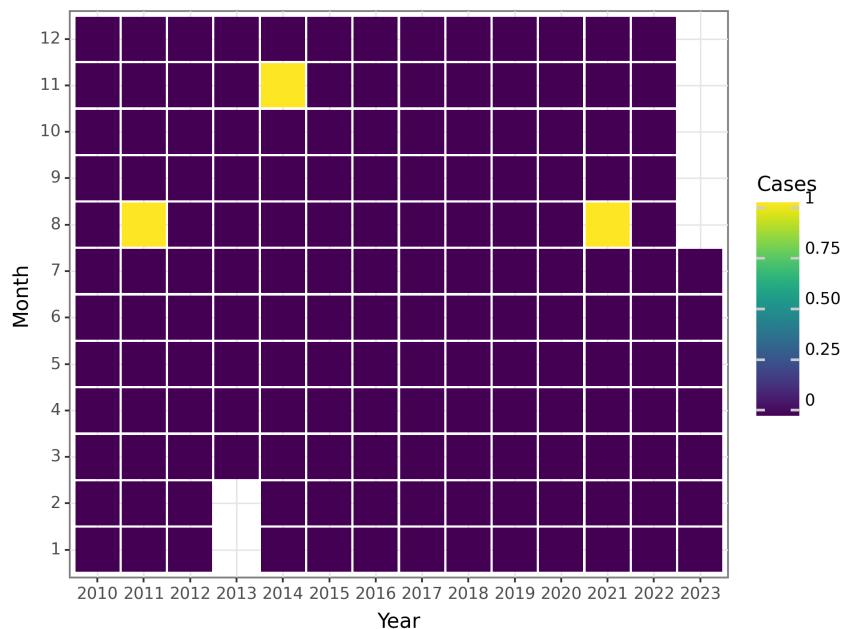


Figure 132: The Change of Filariasis Cases before 2023 July

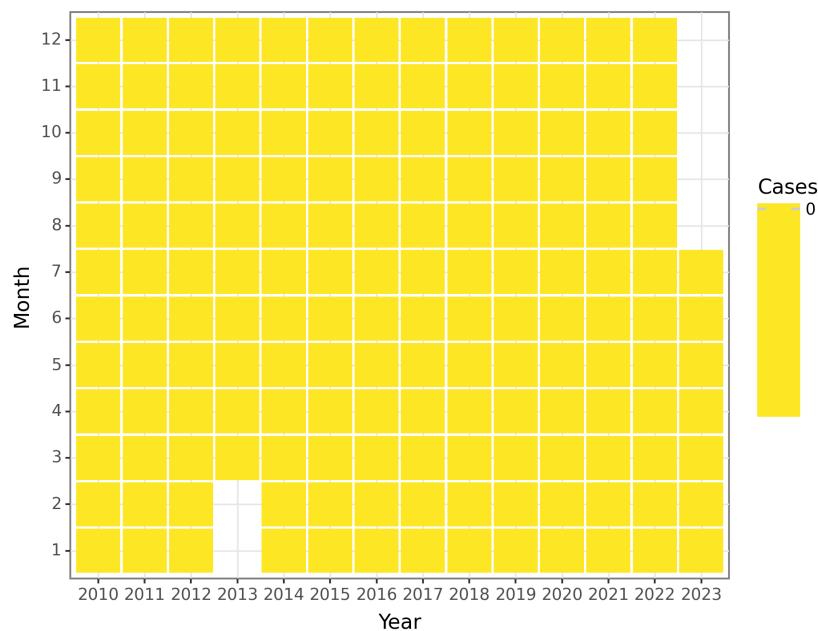


Figure 133: The Change of Filariasis Deaths before 2023 July

Infectious diarrhea

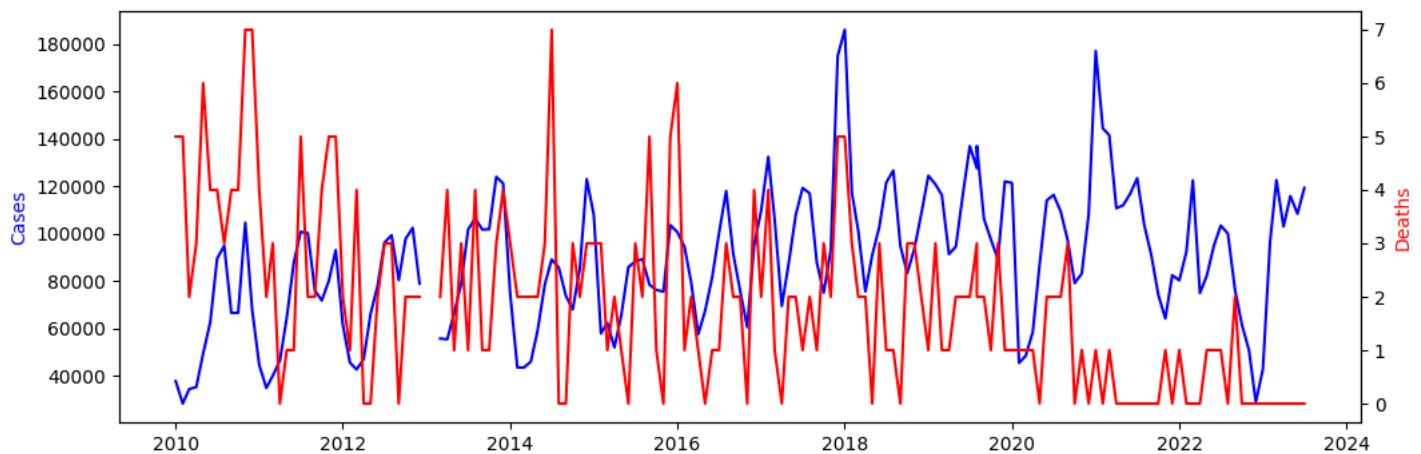


Figure 134: The Change of Infectious diarrhea Reports before 2023 July

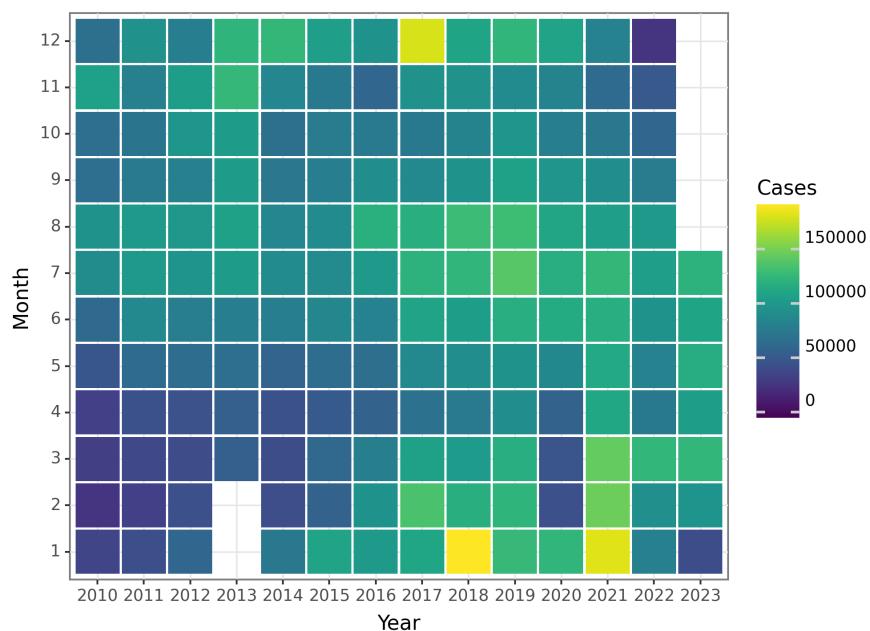


Figure 135: The Change of Infectious diarrhea Cases before 2023 July

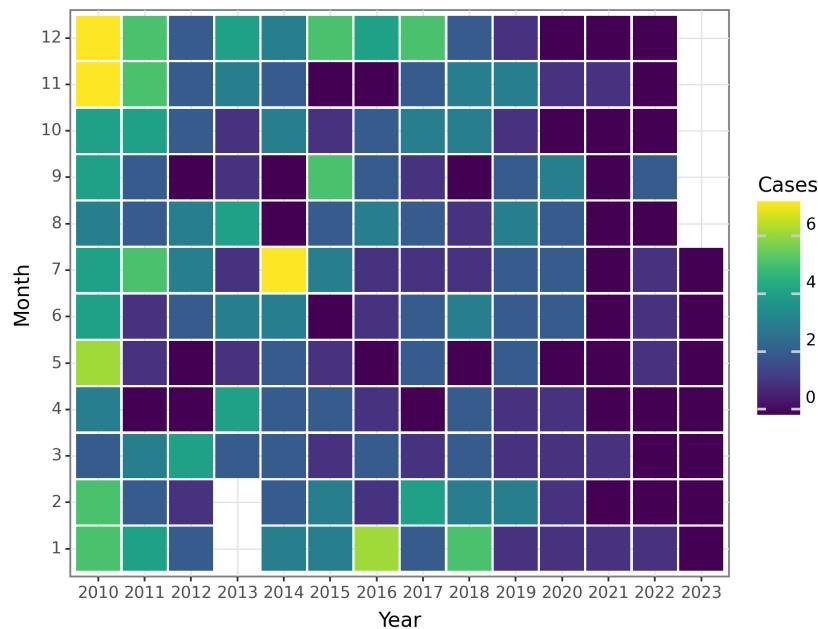


Figure 136: The Change of Infectious diarrhea Deaths before 2023 July

Hand foot and mouth disease

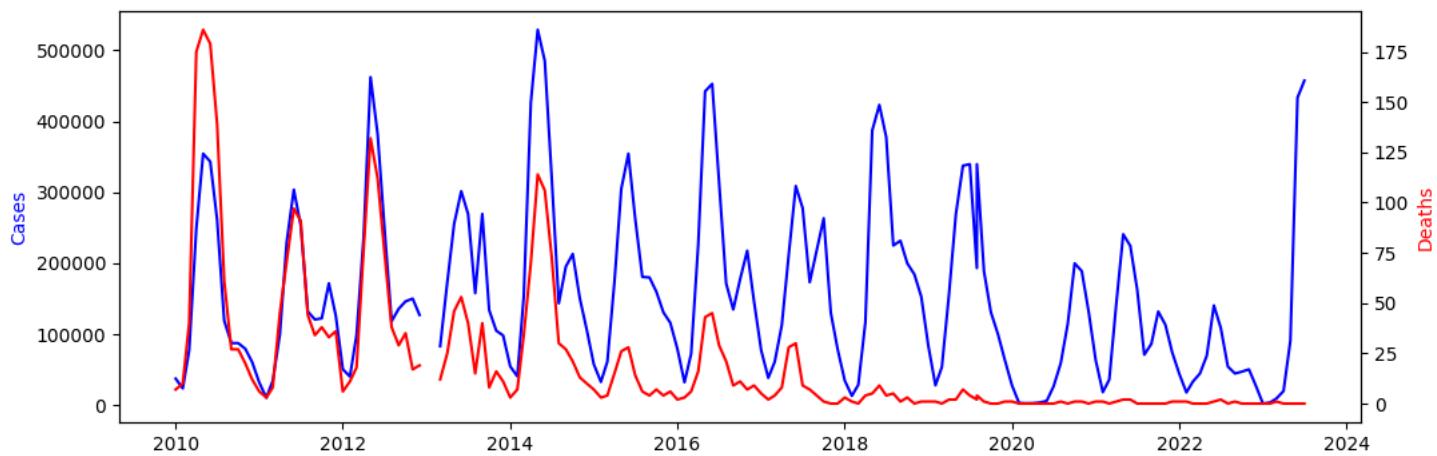


Figure 137: The Change of Hand foot and mouth disease Reports before 2023 July

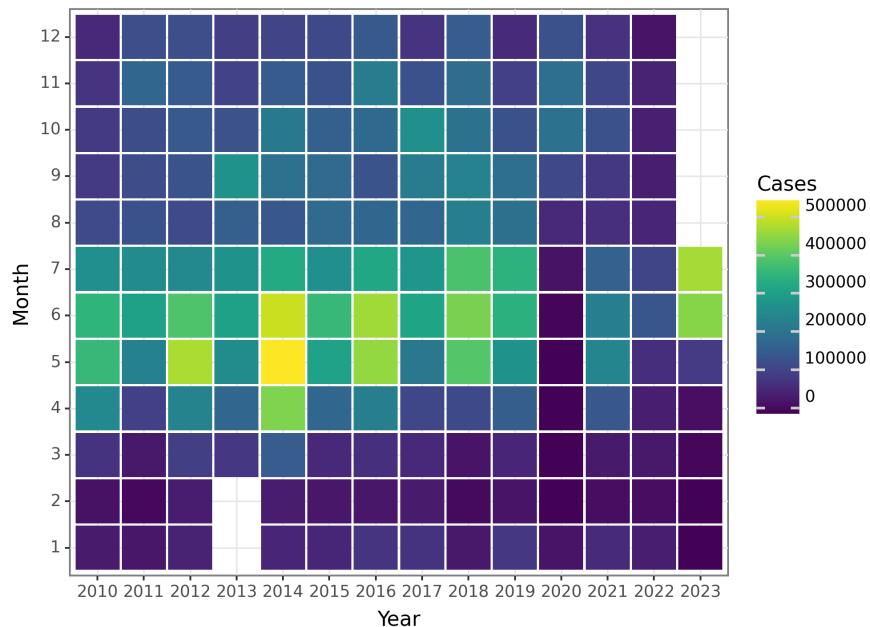


Figure 138: The Change of Hand foot and mouth disease Cases before 2023 July

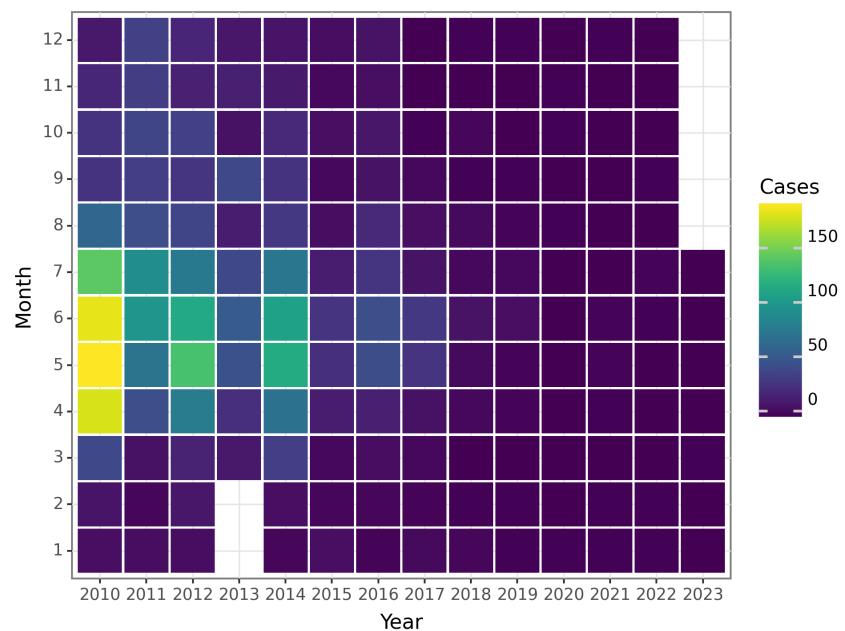


Figure 139: The Change of Hand foot and mouth disease Deaths before 2023 July