

Chinese Notifiable Infectious Diseases Surveillance Report

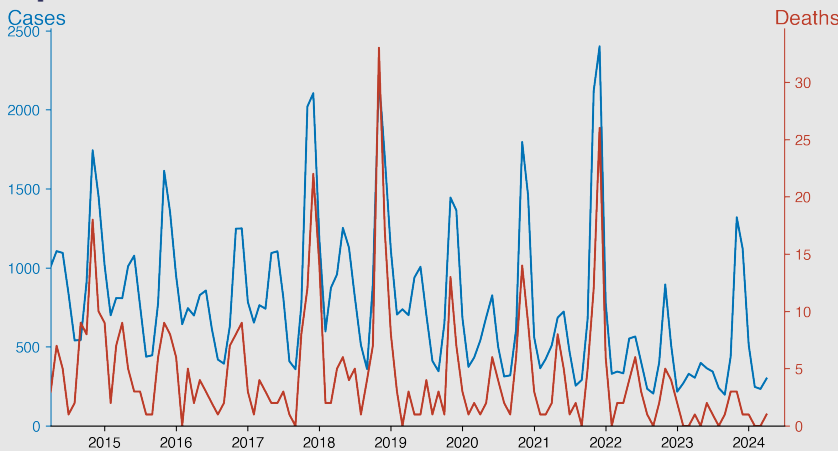
Epidemic hemorrhagic fever

April 2024

Introduction

Epidemic hemorrhagic fever is a severe infectious disease caused by hantaviruses. Primarily transmitted by rodents, it is characterized by sudden onset of fever, chills, headache, backache, and severe prostration, followed by symptoms including low blood pressure, acute shock, vascular leakage, and acute kidney failure. The disease is of primary concern in East Asian countries, though it has global prevalence. It requires immediate medical intervention to prevent mortality. There is currently no specific treatment or vaccine, hence prevention is dependent on controlling rodent populations and minimizing exposure.

Temporal Trend



Highlights

- A clear seasonal pattern is seen, with an annual peak in both cases and deaths of Epidemic Hemorrhagic fever in November-December, indicating these to be the high-risk months.
- The ten-year trend shows a general decline in reported cases and deaths, with the lowest recorded in 2024.
- Mortality rates across the years have remained fairly low, suggesting efficient case management or mild disease severity.
- As of April 2024, 300 cases with 1 death were reported on mainland China.

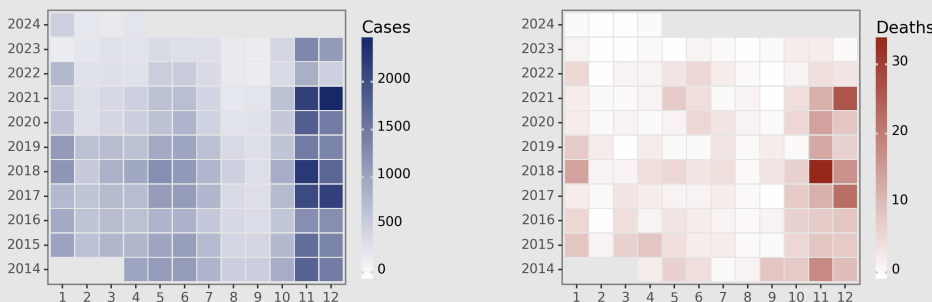
Cases Analysis

Epidemic Hemorrhagic Fever cases in the Chinese mainland significantly fluctuated from 2014 to 2024. The trend showed a recurrent seasonal pattern, with higher incidents usually observed from November to January each year. The highest case count was observed in December 2021 with 2402 cases. Conversely, the fewer cases were typically seen during August to October. The lowest was in September 2022 with only 205 cases. There's no clear long-term trend, but a slight decrease in cases can be noted in later years, suggesting possible effective interventions and control measures.

Deaths Analysis

The death counts varied between 0 and 33 over the years. Similar to the incidence cases, deaths from the disease also show a seasonal trend, with the highest numbers generally occurring in the winter-spring period (November to February), and the lowest during the summer period (June to September). However, the highest number of deaths was recorded in November 2018 with 33 deaths. Despite some fluctuations, the overall mortality rate remains low in comparison to the number of cases, indicating a low case fatality rate.

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