

**Fiji Communicable Disease Bulletin .**  
**Issue 2: October 2008**

Table 1: Fiji Syndromic surveillance

Syndrome	MONTH OF ONSET			
	July	August	September	2008 YTD (Sept)
Diarrhoea <sup>1</sup>	812	720	577	10,185
Diarrhoea with blood <sup>2</sup>	9	6	6	137
Influenza-like illness <sup>3</sup>	504	486	495	10,345
Acute respiratory infection. <sup>4</sup>	1611	1535	1351	19,825
Acute fever & rash <sup>5</sup>	0	1	3	9
Acute flaccid paralysis <sup>5</sup>	1	0	2	5

Notes :

- 1 Source: Fiji National Notifiable Diseases Surveillance System (NNDSS); reported as "acute gastroenteritis", "enteritis", "gastroenteritis", "infective diarrhoea", "mild gastroenteritis", or "infective enteritis".  
2 Source: NNDSS; reported as "dysentery amoebic & bacillary"  
3 Source: NNDSS; reported as "influenza", or "influenza-like illness".  
4 Source: NNDSS; reported as "acute respiratory infection", "acute respiratory illness", "upper respiratory tract infection".  
5 Source: Hospital Based Active Surveillance System (HBAS)

Table 2: Laboratory confirmed new cases from Fiji Centre for Communicable Disease Control (FCCDC) and divisional laboratories.

2008				
Selected Diseases	Tests requested Sept.	Tests performed Sept.	Positive Sept.	2008 YTD (Sept.)
Measles <sup>1</sup>	1	0	0	0
Rubella <sup>1</sup>	0	0	0	0
Dengue Fever <sup>1</sup>	273	78	69	183
Influenza <sup>1</sup>	0	0	0	0
Leptospirosis <sup>1</sup>	23	0	0	45
HIV/AIDS <sup>1</sup>	64	64	n.a.	12
Typhoid fever <sup>2</sup>	n.a.	n.a.	n.a.	445
Cholera <sup>2</sup>	0	0	0	0

Notes :

- N.A : Not available  
Data Source : 1 : FCCDC Laboratory (Mataika House) 2: Divisional Laboratories CWMH, Labasa & Lautoka Nb: HIV : As reported in the last quarter

Editorial team :

A. Dawainavesi, E. Rafai, J. Kool, I. M. Kama, U. Rabuatoka.

For any inquiries or suggestions, please contact the centre on the number listed above.

Fiji NNDSS (Table 1)

Correction for September Issue 1: ARI figures do not include "pneumonia" as reported within NNDSS.

**Note with Table 1:** A slight increase was recorded in reported influenza-like illness cases for September while acute respiratory infection cases declined. The number of diarrhoea and dysentery cases have also decreased noticeably since early March 2008. This may be due to the end of the rotavirus season which is thought to be early within the year.

**Hospital-Based Active Surveillance System (HBAS):**

One possible measles case was reported in September in the Central Division in an 11 month old male. Ministry of Health staff investigated urgently but concluded that the clinical signs did not suggest measles. Samples were taken and sent to a reference lab. Results are pending. *HBAS case definition for Acute fever and rash (AFR) is any child <15yrs that presents with acute febrile illness with acute non-vesicular rash. This may also be used as a marker for measles, rubella and possibly dengue.*

**Laboratory data (Table 2).**

Samples received for measles, rubella, and leptospirosis will be tested and reported once the relevant kits are available at the centre. 30% of serum samples from patients with suspected dengue were tested to monitor the outbreak. The high (88%) positivity rate of Panbio Dengue Capture EIA IgM indicates the persistence of the outbreak. Influenza sentinel sites are encouraged to recommence forwarding of nasopharyngeal swabs for testing at the virus laboratory.

**Epi notes: Dengue fever update for Fiji**

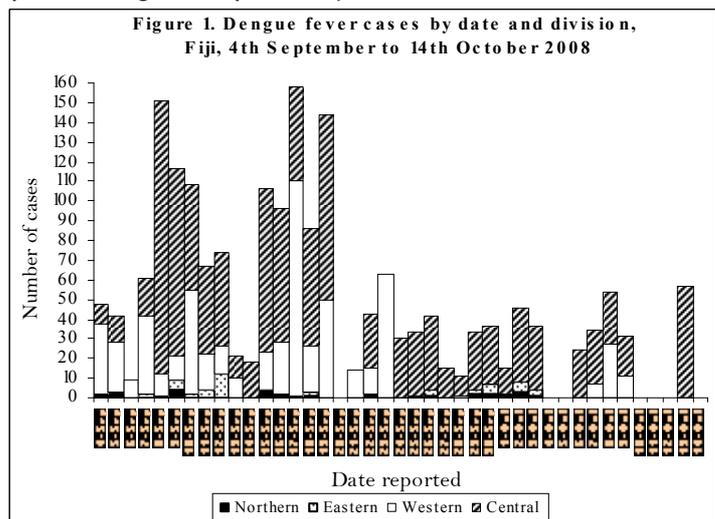


Figure 1 above shows the number of reported cases of dengue fever in Fiji over the period of September 4th—October 14th. The highest number of cases (n=139) was recorded on the 8th September in the Central Division, which overall accounts for approximately 66% of total number of cases reported. The Western Division 30% while Northern and Eastern Division each represent less than 2.5% as at the 14th October. This outbreak was caused by the dengue virus serotype 4. No fatalities due to dengue were reported. However, whilst the number of dengue fever cases are declining, large parts of the Fiji population remain susceptible to both serotype 1 & 4, which still are circulating in other Pacific countries. All health facilities are therefore urged to remain alert and vigilant.

Table 3 below is a summary of the above graph indicating the number of reported cases over the 41 days (4th September -14th October).

Date range: 4/09/08-14/10/08	Number of reported cases	%
Northern	36	1.9
Eastern	46	2.4
Western	563	29.6
Central	1255	66.1
<b>Total number of cases</b>	<b>1900</b>	<b>100</b>

**Other Pacific island countries:**

French Polynesia has confirmed Dengue 1 serotype with 159 cases confirmed as at the 30th of September. Vanuatu reported total number of 21 cases by rapid tests on the 20th October.

**Acknowledgements**

We would like to thank all divisional laboratories CWMH, Lautoka, Labasa, statistics department MoH, as well as all physicians and nurses who report clinical data. In addition, we thank WHO for their continued technical and financial support in making this surveillance bulletin possible.