

JULY 23rd 2012 (Feedback on data for 20, 21 and 22 July 2012)

General comment on reported syndromes:

A/ Evolution of raw number of cases for the 8 selected syndromes, starting one week before the beginning of the FOPA (June 25th) – see attached Charts

Graphs for All sites (all participating clinics in Honiara):

-Acute Fever & Rash: 6 cases reported during the week-end. The general decline in raw numbers indicates that the rubella outbreak in Honiara is getting under control. Since AFR cases are still reported it is advisable to take some samples to confirm the cause of the AFR.

-Watery Diarrhoea: 2 cases reported during the week-end and 5 on Friday (4 cases in Naha to be investigated). A single reported case of this syndrome should trigger (i) a follow-up by the surveillance and response teams (observance of case definition) and (ii) further laboratory and epidemiological investigations when clinical presentation is confirmed by the nurse practitioner.

-Non-Watery Diarrhoea: 17 cases reported during the week-end. The raw number is decreasing.

-Influenza-like-illness: 42 cases reported during the week-end with an unusual peak of 21 cases on Saturday in Kukum. Some Nasopharyngeal swabs have to be taken and sent to reference lab for further investigation. Reports from regional and global surveillance confirm that a new A(H3N2) virus has replaced the A(H1N1)2009 pandemic strain in Australia, New Zealand and possibly in other places of the Southern hemisphere. These reports stress that such a new virus could easily be spreading among the non-immunized population at the occasion of the mass-gathering happening during the Festival.

-Prolonged Fever: 9 cases reported during the week-end, most of them were linked with a positive Malaria Smear test. 11 cases reported on Friday in White River, dengue test are encouraged if malaria smear test is negative.

-Acute Fever & Neurological symptoms: no case reported since June 29. A single reported case of this syndrome should trigger (i) a follow-up by the surveillance and response teams (observance of case definition) and (ii) further laboratory and epidemiological investigations when clinical presentation is confirmed by the nurse practitioner (and malaria test is negative).

-Fever & Jaundice: no case reported during the last 3 days. A single reported case of either of these should trigger (i) a follow-up by the surveillance and response teams (observance of case definition) and (ii) further laboratory and epidemiological investigations when clinical presentation is confirmed by the nurse practitioner.

-Heat-related-illness: no case reported since July 4th.

B/ Number of cases by syndrome and by site for **July 20/21/22** – see attached Charts

-4 sites ran OPD clinics during the week-end

4 sites provided data and it is entered for Saturday 21

3 sites provided data and it is entered for Sunday 22

1 site (Matanika) provided the data but there were zero cases for Sunday 22

Conclusion/recommendations:

- All overseas and provincial delegations have now departed.
- Investigate the cases of watery diarrhoea at Naha
- Ensure that NSP swabs have been collected in Kukum, reinforce public health communication to reducing the spread of ILI.
- Share the pending lab results

From Monday, only the 9 HCC Health Clinics and NRH-GOPD will report.