



SARAWAK STATE HEALTH DEPARTMENT EPIDEMIOLOGICAL NEWS

**VOLUME 15/FOLIO 3/February, 2007
2007, 25TH YEAR**

ERRATUM

In the January issue of this publication, the Table for the Immunisation Schedule was wrongly printed. We regret the error. Below is the corrected Table.

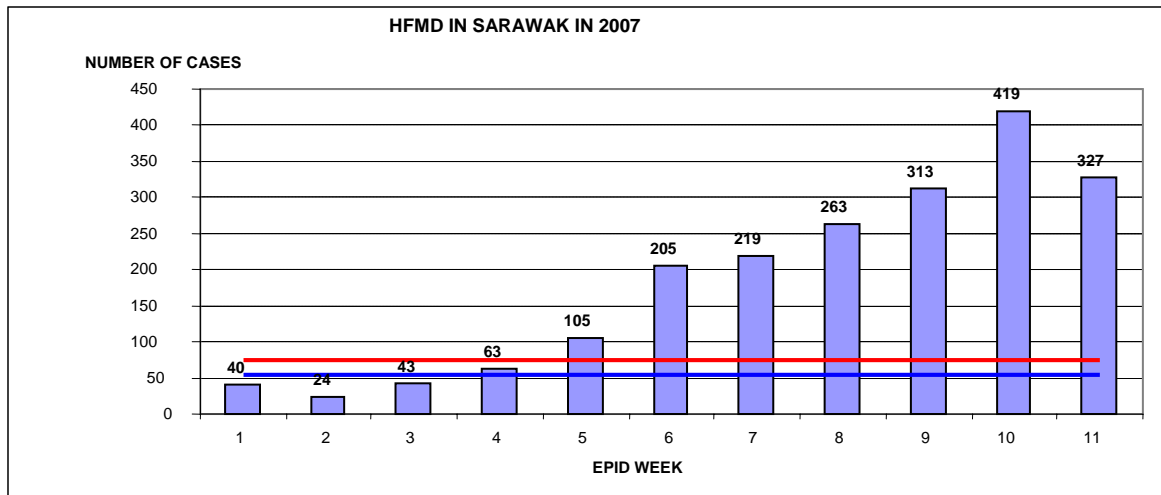
Table 1 Immunisation Schedule in Sarawak

Vaccine	Age (months)												Age (years)					
	0	1	2	3	4	5	6	7	8	9	10	11	12	1½	4½	7	12	15
BCG	■																	
Hep B	■		■	■		■												
DPT			■	■		■								■				
OPV			■	■		■								■		■		
Hib			■	■		■												
MMR													■			■		
DT																■		
Tetanus																		■
JE										■	■			■	■			

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HAND FOOT MOUTH DISEASE (HFMD)

Since the last update on HFMD in last month's EPINEWS, the number of cases of HFMD crossed the warning level in epid week 4, crossed the alert level the following week, continued to rise till epid week 10 and showed a decline in epid week 11. Although the cases remain above the alert level, the number constitutes only 38% of the total number of cases in the same time period last year.



Melioidosis

Melioidosis is an infectious disease caused by the bacteria *Burkholderia pseudomallei*. Melioidosis is predominantly a disease of tropical climates, especially in Southeast Asia, and is endemic in Sarawak. The bacteria causing melioidosis is found in contaminated water and soil and is spread to humans and animals through direct contact with the contaminated source.

Clinical presentations of melioidosis vary and could mimic presentations of many other diseases. Illness from melioidosis can cause localised infection, lung infection and bloodstream infection. In localised infection, it is generally localised as a nodule and results from inoculation through a break in the skin and it can produce fever and general muscle aches, and may progress rapidly to infect the bloodstream. When melioidosis affects the lungs, the onset is typically accompanied by a high fever, headache, anorexia, general muscle ache, chest pain and cough. In bloodstream infection of melioidosis, the symptoms are respiratory distress, severe headache, fever, diarrhoea, development of pus-filled eruptions on the skin, muscle tenderness, and disorientation.

There is no vaccine for melioidosis. Prevention of the infection in endemic-disease areas can be difficult since contact with contaminated soil is so common. Persons with diabetes and other medical conditions causing low immunity with skin eruptions or wound should avoid contact with soil and standing water especially in areas with high incidence of melioidosis, avoid swimming in rivers and avoid engaging in activities involve with exposure to soil.

Persons engaged in outdoor activities should take simple precautionary measures such as covering all open wounds with waterproof dressings and wearing boots and gloves when in contact with water-logged soil.

Melioidosis is not in the list of notifiable diseases under the CDC Act. However, because of its endemicity in Sarawak, administrative notification for melioidosis was implemented through a letter to all medical practitioners in Sarawak on 3 January 2003. From year 2002 to 2004, there were 353 admissions due to melioidosis in government hospitals in Sarawak with a total of 7 deaths. However, from 2004 till 2006, only 16 cases were investigated by the health offices, eight of them by the Kapit Divisional Health Office, out of which five were related to the Bakun Hydroelectric Project.

Syndromic notification

Syndromic notification is the notification of a “health event” under surveillance in which the case definition is based on a syndrome, not on a specific disease. The syndromes under surveillance in Malaysia include:

1. National Acute Flaccid Paralysis Surveillance when Malaysia started its polio eradication drive in 1993.
2. National Acute gastroenteritis surveillance as a proxy for cholera.
3. National conjunctivitis surveillance & national acute respiratory infection surveillance as haze-related diseases after the severe haze in 1997.
4. Sentinel hand-foot and mouth disease surveillance after the outbreak in 1997

Syndromic notification in Malaysia was expanded in 2002 to include the following syndromes:

1. Acute neurological syndrome
2. Acute respiratory syndrome
3. Acute dermatological syndrome
4. Acute haemorrhagic syndrome
5. Acute jaundice syndrome
6. Acute diarrhoeal syndrome

These syndromes are to be notified to the nearest health office if they are of acute onset (defined as a period of 3 weeks or less), clinically severe (at least one of the following: hospital admission, major organ failure, altered state of consciousness, circulatory collapse, death) and in the absence of known underlying diseases or other factors (e.g. drugs) which can explain the occurrence of the syndrome.

Further details can be obtained from the “Syndromic Notification and Laboratory Investigation Manual” which is available at the nearest health office and can be accessed electronically from the Department of Public Health, Ministry of Health (MOH) Malaysia at <http://www.dph.gov.my>.

In preparation for the avian flu pandemic, another syndrome has been added to the list of syndromic notification in 2005, which is “influenza-like illness” or ILI. ILI is defined¹ as ABRUPT ONSET of high grade fever (axilla >38 C or oral >38.5 C) with dry cough within 48 hours AND with any of the following symptoms;

- Nasal congestion / blockage
- Sore throat / irritation
- Myalgia
- Convulsion (infants)
- Vomiting (infants)

All clinics are to notify ILI but only 23 sentinel clinics in Sarawak, including one private clinic each from Kuching, Sibul and Miri, are monitored at the state and national level to see the trend of ILI as an early warning alert for flu.

Only 3 clinics in Sarawak, namely, Sentosa Polyclinic in Kuching, Miri Polyclinic in Miri and Jln. Oya Polyclinic in Sibu, have been selected to send virology specimens to the National Public Health Lab as part of the national influenza virus surveillance.

For this year only the outpatient clinics in Kanowit and Limbang hospitals have reported 20 or more cases, as of Epid week 10, as shown in *Table 2* below.

Table 2: Sentinel Surveillance of ILI, Sarawak, Epid week 1-10, 2007

No.	Sentinel Clinics	Epidemiology Week										Total	
		1	2	3	4	5	6	7	8	9	10		
1	Jln. Masjid Polyclinic, Kuching	0	0	0	0	0	0	0	0	0	0	0	0
2	Kota Sentosa Polyclinic, Kuching	0	0	0	0	0	0	0	0	0	0	0	0
3	Tony Sim Clinic, Kuching	1	0	0	1	0	1	0	0	1	1	5	
4	OPD Bau Hospital	0	0	0	0	0	0	0	0	0	0	0	
5	OPD Lundu Hospital	0	0	0	0	0	0	0	0	0	0	0	
6	Polyclinic Sri Aman	0	0	0	1	4	0	0	0	0	0	5	
7	OPD Betong Hospital	0	0	0	0	2	0	0	0	0	0	2	
8	OPD Saratok Hospital	0	0	0	0	0	0	0	0	0	0	0	
9	Polyclinic Jln Oya, Sibu	0	0	0	0	0	0	0	0	0	0	0	
10	Wong's Medical Clinic, Sibu	0	0	0	0	0	0	0	0	0	0	0	
11	OPD Mukah Hospital	0	0	0	0	0	0	0	0	0	0	0	
12	OPD Kanowit Hospital	12	12	0	0	0	0	0	0	0	0	24	
13	Miri Polyclinic	0	0	0	0	0	0	0	0	0	0	0	
14	Columbia Asia Med. Centre, Miri	0	0	0	0	0	0	0	0	0	0	0	
15	OPD Marudi Hospital	0	0	0	0	0	0	0	0	0	0	0	
16	OPD Limbang Hospital	0	2	3	4	3	3	2	3	0	3	23	
17	Lawas Polyclinic	0	0	0	0	0	4	0	3	4	0	11	
18	Sarikei Polyclinic	0	0	0	0	0	0	0	0	0	0	0	
19	Daro Polyclinic	0	0	0	0	0	0	0	0	0	0	0	
20	Kapit Polyclinic	0	0	0	0	0	0	0	0	0	0	0	
21	Bintulu Polyclinic	0	0	0	0	0	0	0	0	0	0	0	
22	OPD Serian Hospital	0	0	0	0	0	0	0	0	0	0	0	
23	OPD Simunjan Hospital	0	0	0	0	0	0	0	0	0	0	0	
Total		13	14	3	6	9	8	2	6	5	4	70	

¹ MOH/K/EPI/32.02(HB) 2nd Edition Jan 2006: *Case Definitions for Infectious Diseases in Malaysia*

**NOTIFIABLE DISEASE IN SARAWAK
BY DISTRICT
FEBRUARY 2007**

DISTRICTS	AIDS	Cholera	Dengue Fever	Dengue H. Fever	Dysentery	Food Poisoning	Gonorrhoea	Hand, Foot & Mouth	Leprosy	Malaria	Whooping Cough	Measles	Syphilis, Congenital	Syphilis (All Forms)	Tuberculosis (All forms)	Typhoid & Paratyphoid Fever	Typhus, Scrub	Hepatitis A	Hepatitis B	Other Hepatitis	Viral Encephalitis	TOTAL
Lundu	0	0	1	0	0	0	0	16	0	2	0	0	0	0	2	0	0	0	0	0	0	21
Bau	0	0	5	0	0	0	0	54	0	2	0	0	0	0	0	0	0	0	0	0	0	61
Kuching	1	0	47	0	1	3	11	168	0	2	0	3	0	7	27	0	0	0	5	0	0	275
Samarahan	0	0	8	0	0	0	1	7	0	0	0	0	0	1	5	0	0	0	0	0	0	22
Serian	1	0	6	0	1	0	1	6	0	3	0	0	0	2	6	0	0	0	0	0	0	26
Simunjan	0	0	0	0	0	0	0	2	0	0	0	0	0	2	2	0	0	0	0	0	0	6
Sri Aman	0	0	4	0	0	0	1	12	0	0	0	0	0	1	0	0	0	0	1	0	0	19
L/ Antu	0	0	0	0	0	0	0	6	0	0	0	0	0	1	7	0	0	0	0	0	0	14
Betong	0	0	5	1	0	0	0	5	0	1	0	0	0	0	0	0	0	0	0	0	0	12
Saratok	0	0	1	0	0	0	0	3	0	0	0	0	0	0	1	0	0	0	1	0	0	6
Sarikei	0	0	12	0	0	0	0	68	0	5	0	0	0	0	2	0	0	0	0	0	1	88
Julau/Pakan	0	0	0	0	0	0	0	15	0	1	0	1	0	0	3/2	0	0	0	0	0	0	22
Meradong	0	0	1	0	0	0	0	12	0	0	0	0	0	0	1	0	0	0	0	0	0	14
Daro	0	0	15	0	0	0	0	4	0	0	0	0	0	0	2	0	0	0	0	0	0	21
Sibu/Selangau	0	0	25	0	0	0	0	366	0	0	0	0	0	0	8/3	2	0	0	0	0	1	405
Kanowit	0	0	0	0	0	0	0	12	0	0	0	0	0	2	1	0	0	0	0	0	0	15
Mukah	0	0	0	0	0	0	0	6	0	0	0	0	0	0	1	0	0	0	0	0	0	7
Dalat	0	0	1	0	0	0	0	2	0	0	0	1	0	0	3	0	0	0	0	0	0	7
Kapit	0	0	2	0	0	0	0	12	0	8	0	0	0	0	6	0	0	0	0	0	0	28
Song	0	0	0	0	0	0	0	3	0	0	0	1	0	0	2	0	0	0	0	0	0	6
Belaga	0	0	5	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	7
Bintulu	0	0	9	0	1	0	9	77	0	1	0	0	0	8	8	0	0	0	1	0	0	114
Tatau	0	0	6	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	1	0	0	9
Miri	0	0	11	0	0	1	6	80	1	3	0	5	0	6	18	0	0	0	1	0	3	135
Marudi	0	0	1	0	1	0	0	3	0	0	0	0	0	1	1	0	0	0	0	0	0	7
Limbang	0	0	4	0	0	0	5	2	0	1	0	0	0	4	7	0	0	0	0	0	0	23
Lawas	0	0	0	0	0	0	0	2	0	0	0	0	0	0	4	0	0	0	0	0	0	6
TOTAL	2	0	169	1	4	4	34	944	1	31	0	11	0	35	123	2	0	0	10	0	5	1376

ICD CODE	DISEASES	Median 2002-2006	Month Ending		Cumulative Total	
			28/02/2006	28/02/2007	2006(Annual)	2007
B20 - B24	HIV/AIDS (Death)	0	3	2	114/69(1)(20)	4
A57	Chancroid	0	0	0	0	0
A00.9	Cholera	0	0	0	0	0
A90	Dengue Fever	42	169	169	1799	525
A91	Dengue Haemorrhagic Fever	4	4	1	22	6
A36.0-A36.9	Diphtheria	0	0	0	0	0
A06.0,A09	Dysentery All Types	9	4	4	86	18
A05,T61-T62	Food Poisoning	30	10	4	187	199
A54.0-A54.9	Gonococcal Infections(All Forms)	40	60	34	383	96
A54.3	Ophthalmia Neonatorum	0	0	0	0	0
A30.9	Leprosy	0	0	1	16	4
B54	Malaria	81	56	39	1371	146
B05	Measles	8	14	11	182	27
A20	Plague	0	0	0	0	0
A80.9	Poliomyelitis, acute	0	0	0	0	0
A82	Rabies	0	0	0	0	0
A68	Relapsing Fever	0	0	0	0	0
A50	Congenital Syphilis	0	0	0	0	0
A51-A53	Syphilis(All forms)	24	25	35	296	69
A33	Tetanus Neonatorum	0	0	0	2	0
A35	Tetanus (adults)	0	0	0	2	2
A16-A19	Tuberculosis(All forms)	91	140	123	1632	252
A01	Typhoid and Paratyphoid fevers	1	1	2	14	3
A75	Typhus, epidemic	0	0	0	0	0
A75.2	Typhus, flea-borne	1	1	0	8	2
A75.3	Typhus, scrub	0	0	0	0	0
A83,A84,A85,A86	Viral Encephalitis	1	2	5	35	10
B15.0-B15.9	Viral Hepatitis A	0	0	0	2	0
B16.0 - B 16.9	Viral Hepatitis B	4	0	10	34	29
B19.0 - B19.9	Viral Hepatitis (unspecified)	0	0	0	1	0
A37	Whooping cough	0	0	0	8	0
A95	Yellow Fever	0	0	0	0	0

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ⁱ MOH/K/EPI/32.02(HB) 2nd Edition Jan 2006: *Case Definitions for Infectious Diseases in Malaysia*