

Bulletin Epidemiologia

Ministério da Saúde
República Democrática de Timor-Leste
Gabinete Sistema Informasaun Saúde e Vijilansia Epidemioloigia

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Publikasaun Bulletin Epidemiologia

Buletin Epidemiologi Publication

MoH has implementing Integrated Disease Surveillance (IDS) since July 2005. The main objective of IDS are to immediately identify, investigate and response to unusual health events; and monitor the trend and burden of priority communicable diseases in the country.

IDS has weekly reporting system for notifiable diseases and monthly reporting system. In addition, suspected outbreak of any health conditions must be reported to the district and national level within 24 hours, and investigation and response should be performed within 24 hours after report received.

IDS has flexibility to accommodate emerging diseases and other health conditions not in the reporting format, such as Influenza A(H1N1).

The publication of epidemiological bulletin was initiated in 2005. However the publication was discontinued since 2007 due to several reasons.

Surveillance unit is in the process of re-establishing the publication of epidemiological bulletin. In this new publication, the epidemiological data is presented in absolute number as well as rate; and disaggregated by sex, age group and district. Incidence rate computed to allow comparison between districts and age groups.

The data presented in this reports are from CHCs, Health Post, and Private Clinic. Due to the inconsistency of diagnosis coding and hospital information, at the moment, the hospital data

Ministerio da Saude implementa Vigilancia moras integrado, hahu Julho 2005. Objetivo principal, atu identifika, investiga no responde imediatu situasaun saude nebe persisa intervesaun, no monitorisa trend no impakto hosi moras daet nebe prioridade iha Nasaun laran.

Vigilancia moras integrado iha sistema relatorio semanal no mensal hodi relata moras nebe obrigatorio atu relata. Iha adisional kondisaun saude nebe iha potencia hamosu outbreak tenke relata dentro de 24 horas ba nivel Distrito no Nacional no resposta no investigasaun tenke hala'o iha 24 horas depois de simu tiha relatorio.

Vigilancia moras integrado, iha flexibilidade akomoda relatorio ba kazu no kondisaun saude emergencia seluk nebe la mensiona iha formato relatorio, hanesan Influenza A (H1N1).

Publikasaun Bulletin Epidemiologia hahu aktivo iha tinan 2005. Mesmo nune'e to,o tinan 2007, publikasaun parado, tamba iha relasaun ho rasoens important balun

Unidade Vigilancia Epidemiologia, hahu stabelese fali proseso Publikasaun Bulletin Epidemiologia. Iha publikasaun foun, data epidemiologia apresenta numero absoluta nune'e mos taxa (rate); no disagregasaun tuir sexo, grupo idade no tuir distrito. Kontagen taxa (rate) incidencia atu kompara situasaun entre distrito no grupo idade.

Data nebe apresenta iha relatorio ne'e, fornece hosi Centro da Saude, Posto de Saude no Clinica Privado.

included in this bulletin is only vaccine preventable disease data which is collected through hospital based surveillance.

Timeliness, completeness, accuracy of data quality are still problematic the IDS. For this reason, we cautioned the data users to use the results presented with the problems of data quality in mind

Relasiona ho inkonsistenci kode diagnostico no sistema informasaun hospital, iha momento ne'e data hospital nebe inclui iha bulletin ne'e foti deit maka moras nebe prevene ho imunizasaun nebe kolecta liu hosi vigilancia nebe base iha hospital.

Pontualidade, completo, akurasaun hosi qualidade data sei sai hanesan problema iha vigilancia moras integrado. Ho rasaun ne'e, ami kontinua huso ba entidade hotu nebe persisa data ne'e, atu usa resultado nebe apresenta ho problema iha qualidade data.

Tabela 1: Numero moras selecionado, relata tuir Sexo, Janeiro-Junho 2008 no 2009.
Number of Reported Selected Diseases by Sex, January – June 2008 and 2009

Moras	Janeiro - Junho 2008				Janeiro - Junho 2009			
	M	F	Total	Mate	M	F	Total	Mate
Infesaun Respiratorio Superior Akuta	90,237	101,128	191,365	0	121,053	136,549	257,602	0
Malaria Total:	40,474	45,372	85,846	2	39,559	43,512	83,071	8
· Malaria klinika	28,112	30,740	58,852	1	26,321	28,701	55,022	3
· Malaria Falciparum	8,887	11,071	19,958	0	9,344	10,334	19,678	4
· Malaria Vivax	3,411	3,495	6,906	1	3,871	4,451	8,322	1
· Malaria Mix	64	66	130	0	23	26	49	0
Pneumonia	12,221	12,381	24,602	2	14,292	15,843	30,135	17
Diareia simples	15,054	14,917	29,971	5	14,096	13,923	28,019	7
Scabies	5,566	5,451	11,017	0	6,506	6,246	12,752	0
Kanek nebe kausa hosi acidente seluk	5,439	3,899	9,338	11	5,612	4,939	10,551	2
Diareia ho Ran	2,728	2,604	5,332	0	2,670	2,617	5,287	1
Kanek nebe iha relasaun ho acidente trafico	565	351	916	0	703	380	1,083	0
Urethral Discharge	294	10	304	0	368	0	368	0
DHF	24	29	53	0	23	17	40	0
Cholera	0	0	0	0	0	0	0	
AFP	0	0	0	0	0	0	0	0
Measles	0	0	0	0	0	0	0	0
Diphtheria	0	0	0	0	0	0	0	0
Pertussis	0	0	0	0	0	0	0	0
Neonatal Tetanus	0	0	0	0	0	0	0	0
HIV+/AIDS	0	0	0	0	0	0	0	0
Meningitis/Encephalitis	2	1	3	0	0	0	0	0
Anthrax	0	0	0	0	0	0	0	0
Rabies	0	0	0	0	0	0	0	0

Total Konsultasaun	269,636	308,758	578,394		314,790	378,542	693,332	
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Kompleto Relatorio Mensal, Januario-Junho 2009 kompara ho tinan 2008
Completeness of Monthly Report, January – June 2009 compare to 2008

Unidade nebe Relata	Presentagem kompleto hosi relatorio mensal	
	Jan - Jun 2008	Jan - Jun 2009
Centro da Saude	93 %	81 %
Posto da Saude	80 %	74 %
Clinico Privado	33 %	38 %
Total	76 %	69 %

Tabela 2: Taxa incidencia (/1,000 pop) hosi moras Prioridade, tuir distrito, Jan – Jun 2009
Incidence Rate (/1,000 pop) of Priority Communicable Diseases by District, Jan – Jun 2009

Disease	Aileu	Ainaro	Baucau	Bobonaro	Covalima	Dili	Ermera	Lautem	Liquica	M
Infesaun Respiratorio superior akut	464.8	170.7	230.6	193.9	293.6	359.7	74.3	128.8	167.9	
Malaria (konfirmado no la konfirmado)	133.2	18.1	22.0	16.8	184.7	65.5	42.3	137.6	26.9	
Pneumonia	17.6	19.9	23.9	18.8	101.5	41.3	6.4	9.0	7.0	
Diareia Simples	49.7	22.2	19.6	27.4	33.9	23.9	12.1	17.1	25.9	
Scabies	28.7	22.9	16.4	13.8	24.6	4.9	1.8	7.9	4.1	
Diareia ho Rana	6.5	1.0	6.5	5.2	10.2	5.0	1.3	1.2	0.5	
Urethral Discharge	0.0	0.0	0.0	0.0	4.8	0.2	0.0	0.0	0.0	
DHF	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	
Cholera	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
AFP	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Measles	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Diphtheria	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Pertussis	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Neonatal Tetanus	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
HIV+/AIDS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Meningitis/ Encephalitis	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Anthrax	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Rabies	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

There were 693,332 consultations during the period of January – June 2009 which is higher compare to the same period of time in 2008 (578,394 consultations). The number of female consultation is slightly higher compare to male. Except for injury due to traffic accidents, there were no significant differences between the number male and female cases.

Respiratory infections, malaria and diarrhoea are three major communicable diseases in Timor Leste. In term of vaccine preventable diseases, there were 1 AFP cases and 4 neonatal tetanus cases reported. No other vaccine preventable

Hamutuk 693,332 konsultasaun durante periodo Janeiro-Junho 2009 nebe boot liu kompara ho periodo hanesan iha tinan 2008 (578,394 konsultasaun) Numero konsultasaun fetu boot liu oitoan kompara ba mane. Exepto kanek nebe iha relasaun ho acidente trafico, la iha deferentes nebe signifikante entre numero kazu iha mane no fetu.

Moras infesaun respiratorius, Malaria, no Diareia nudar moras daet tolu nebe principal iha Timor Leste. In termos moras nebe prevene ho imunizasaun, relata kazu AFP 1 (ida) no kazu Neonatal tetanus 4 (hat). la iha moras seluk hosi moras nebe prevene ho

diseases reported during January – June 2009.

imunizasaun relata durante Janeiro-Junho 2009.

Diarrhoeal Diseases

Total 28,019 acute watery diarrhoea and 5,287 bloody diarrhoea reported during January – June 2009. More than 50% of acute diarrhoea and 40% of bloody diarrhoea cases were children under 5 (table 3).

The temporal distribution of acute watery diarrhoea and bloody diarrhoea in 2009 was similar to 2008. First seven weeks of 2009 were the peak of acute watery diarrhoea and bloody diarrhoea cases (fig 1 and 2). However, number of reported bloody diarrhoea cases slightly lower in the first 19 week of 2009 compare to the same period of time in 2008

The incidence rate per 1,000 population of acute watery diarrhoea and bloody diarrhoea by district are varied from 12.1 to 49.7 and from 1.2 to 13.4 respectively (table 2)

Tabela 3. Numero no Taxa Incidencia (/1,000 Pop.) hosi Moras Diareia tuir Grupo idade iha Timor Leste, Janeiro-Junho 2009
Number and Incidence Rate (/1,000 pop'n) of Diarrhoeal Diseases by Age Group in Timor Leste, January – June 2009

Moras	< 1		1 – 4		5 – 14		15+		TOTAL	
	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)
Moras Diareia										
Diareia Simples	5,595	133.9	10,381	67.3	4,801	15.8	7,242	11.8	28,019	25.1
Diareia ho Ran	701	16.8	1,439	9.3	1,098	3.6	2,049	3.3	5,287	4.7
Cholera	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Respiratory Infections

During January – June 2009, there were 257,602 acute respiratory infections and 30,135 pneumonia cases reported. Incidence rate of acute upper respiratory tract infections and pneumonia among children under 5 are much higher compare to the population 5 years and above (table 4).

The temporal distribution of acute upper infections and pneumonia in 2009 was similar to 2008. The number of reported acute upper respiratory infections and pneumonia in the first three months of 2009 compare to the same period of time in 2008 (fig 3 and fig 4)

The incidence rate per 1,000 acute upper respiratory infections and pneumonia by district are greatly varied from 74.3 to 464.7 and from 6.4 to 101.5 respectively (table 2)

Tabela 4. Numero no taxa Incidencia (/1000 pop) moras infesaun respiratorius, tuir Grupo idade iha Timor Leste, Jan-Jun 2009
Number and Incidence Rate (/1,000 pop'n) of Respiratory Infections by Age Group in Timor Leste, Jan – June 2009

Moras	< 1		1 – 4		5 – 14		15+		TOTAL	
	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)	Kazu	Taxa (IR)
Infesaun Respiratorio										

Moras Diareia

Hamutuk 28,019 diareia simples no 5,287 diareia ho ran maka relata durante Janeiro-Junho 2009. Liu 50% diareia akut no 40% kazu diare ho ran iha labarik idade <5 anos (tabela 3).

Distribuisaun temporario diareia simples no diare ho ran iha tinan 2009 hanesan ho tinan 2008. Semana hitu premeiro tinan 2009, nudar tempo nebe numero as liu hosi kazu diareia simples no diareia ho ran (fig 1 no 2). Mesmo nune'e numero hosi relatorio kazu diareia ho ran menus liu iha semana 19 premeiro tinan 2009 kompara ho periodo hanesan iha tinan 2008.

Taxa (rate) incidencia por 1,000 populasaun hosi diareia simples no diareia ho ran tuir distrito variadu hosi 12.1 to'o 49.7 no hosi 1.2 to'o 13.4 tuir-tuir malun (tabela 2)

Infesaun Respiratorios

Durante Janeiro-Junho 2009, iha 257,602 infesaun respiratorios akut no 30,135 kazu pneumonia nebe relata. Taxa incidencia ou infesaun respiratorios superior akut no pneumonia entre labarik idade <5 anos as tebes kompara ba populasaun idade 5 anos ba leten. (tabela 4).

Distribuisaun temporario infesaun respiratorios superior akut no pneumonia iha tinan 2009 hanesan ho tinan 2008. Numero relatorio infesaun respiratorios superior no pneumonia iha fulan tolu premeiro tinan 2009 hanesan kompara ho periodo hanesan tinan 2008. (fig 3 no fig 4).

Taxa incidencia por 1,000 infesaun respiratorios superior no pneumonia tuir distrito variado tebes hahu 74.3 to'o 464.7 no hahu 6.4 to'o 101.5 tuir-tuir malun. (tabela 2).

Infesaun respiratorio superior akut	31,195	746.4	52,561	340.5	51,085	167.8	122,761	200.0	257,602	231.1
Pneumonia	5,499	131.6	8,048	52.1	5,424	17.8	11,164	18.2	30,135	27.0

Vaccine Preventable Diseases

Among all communicable diseases, only 2 cases of neonatal tetanus were reported by HNGV, all of them were from Dili district.

MoH has implemented case based reporting for vaccine preventable diseases. In the first two quarter of 2009 there were 12 (twelve) number of reported suspected measles (unconfirmed) cases and all of them were negative for measles and two positive for rubella after confirmation by National Laboratory and Public Health Laboratory Surabaya.

AFP surveillance is still not achieving minimum international standard for polio eradication. In January – June 2009, there was only one AFP case reported and the stool specimens were not adequate.

Moras nebe prevene ho Imunizasaun

Entre moras hotu nebe iha, iha deit kazu neonatal tetanus nebe relata hosi HNGV, mayoria mai hosi distrito Dili.

Ministerio da Saude implementa ona base relatorio ba kazu nebe prevene ho imunizasaun. Iha trimestre rua premeiro tinan 2009, hamutuk 12 (doze) numero kazu nebe relata hanesan suspeito sarampu (seidauk konfirmadu) no kazu 2 (rua) positivo rubella depois halo konfirmasaun ho Laboratorium Nacional no Laboratorium saude publico Surabaya.

Atingimento Vigilancia AFP sei minimu hosi standar internacional ba eradikasaun polio. Iha Janeiro-Junho 2009, iha deit kazu AFP ida (1) maka relata no specimento la adekuadu.

Tabela 5. Numero hosi relatorio moras nebe prevene ho imunizasaun tuir Grupo idade, Jan - Jun 2009

Number of Reported Vaccine Preventable Diseases by Age Group, January – June 2009

Moras	< 1		1 – 4		5 – 14		15+		TOTAL	
	Kazu	Mate	Kazu	Mate	Kazu	Mate	Kazu	Mate	Kazu	Mate
AFP	0	0	0	0	1	0		0	1	0
Measles	0	0	0	0	0	0	0	0	0	0
Neonatal Tetanus	2	2		0		0		0	2	2
Diphtheria	0	0	0	0	0	0	0	0	0	0
Pertussis	0	0	0	0	0	0	0	0	0	0

Indicadores Eradikasaun Polio	Targeto	Atingimento
Taxa (rate) AFP	≥ 2/100,000 population < 15 years	0.4/100,000 population < 15 years
Taxa (rate) Non-Polio AFP	≥ 1/100,000 population < 15 years	0.00
AFP ho specimento adekuadu	≥ 80%	0%

Malaria

There were 83,071 Malaria (confirmed and unconfirmed) cases reported during January – June 2009. The number of female malaria cases (43,512) is slightly higher compare to the male cases (39,559) – (table 1).

Five district (Aileu, Covalima, Manatuto, Lautem, Viqueque) has high malaria incidence compare to

Malaria

Hamutuk 83,071 kazu Malaria (konfirmado no la konfirmado) relata durante Janeiro-Junho 2009. Numero kazu malaria iha grupo feto (43,512) nebe as liu kompara ba kazu iha grupo mane (39,559) (tabela 1).

Distrito lima (Aileu, Covalima, Manatuto, Lautem, Viqueque) incidencia malaria as kompara ho distrito

other districts (table 2).

The slide positivity rate (SPR) was 54.9%. only one districts, (Viqueque), has the more than 70% (SPR).

Malaria falciparum accounts for more than 70% of malaria cases; and malaria falciparum are predominant in nine out of 13 districts in Timor Leste.

seluk (tabela 2).

Taxa slide positive (SPR) maka 54.9%. distrito ida deit, (Viqueque), hetan boot liu 70% taxa slide positive.

Malaria falciparum konta ho persentagem boot liu 70% hosi kazu malaria; no malaria falciparum nudar kazu nebe domina iha novi (9) hosi trezi (13) distrito iha Timor Leste.

Tabela 6. Numero Kazu Malaria tuir Distrito no Grupo idade, Janeiro-Junho 2009

Number of Malaria Cases by District and Age Group, January – June 2009

Distrito	Kazu Klinika				Kazu konfirmadu				Total Klinika no Konfirmado			
	Grupo idade hotu	<5	5+	Inan Isin Rua	Grupo idade hotu	<5	5+	Inan Isin Rua	Grupo idade hotu	<5	5+	Inan Isin Rua
AILEU	4,305	1,380	2,925	0	1,733	577	1,156	0	6,038	1,957	4,081	0
AINARO	990	310	680	0	159	51	108	0	1,149	361	788	0
BAUCAU	2,414	884	1,530	0	66	36	30	0	2,480	920	1,560	0
BOBONARO	1,497	580	917	0	77	22	55	0	1,574	602	972	0
COVALIMA	7,305	2,050	5,255	0	4,538	1,588	2,950	0	11,843	3,638	8,205	0
DILI	5,773	2,115	3,658	9	9,991	4,090	5,901	11	15,764	6,205	9,559	20
ERMERA	4,040	1,177	2,863	0	1,043	360	683	0	5,083	1,537	3,546	0
LAUTEM	6,394	2,069	4,325	0	2,597	1,068	1,529	0	8,991	3,137	5,854	0
LIQUICA	1,551	544	1,007	0	394	153	241	0	1,945	697	1,248	0
MANATUTO	4,749	1,260	3,489	0	958	333	625	0	5,707	1,593	4,114	0
MANUFAHI	2,148	561	1,587	0	830	237	593	0	2,978	798	2,180	0
OECUSSE	1,363	514	849	6	168	27	141	0	1,531	541	990	6
VIQUEQUE	12,493	3,751	8,742	0	5,495	2,418	3,077	0	17,988	6,169	11,819	0
TIMOR LESTE	55,022	17,195	37,827	15	28,049	10,960	17,089	11	83,071	28,155	54,916	26

Tabela 7. Konfirmado Laboratorium (Microscopy no RDT) hosi Kazu Malaria, Jan-Jun 2009

Laboratory Confirmation (Microscopy and RDT) of Malaria Cases, January – June 2009

Distrito	Total Kazu Malaria	Slide examinaun ran (Microscopys ou RDT)	Slide Ran Positivo Malaria	
			Numero	SPR (%)
AILEU	6,038	3,143	1,733	55.1
AINARO	1,149	727	159	21.9
BAUCAU	2,480	145	66	45.5
BOBONARO	1,574	551	77	14.0
COVALIMA	11,843	7,878	4,538	57.6

DILI	15,764	16,441	9,991	60.8
ERMERA	5,083	1,904	1,043	54.8
LAUTEM	8,991	6,361	2,597	40.8
LIQUICA	1,945	690	394	57.1
MANATUTO	5,707	2,262	958	42.4
MANUFAHI	2,978	2,974	830	27.9
OECUSSE	1,531	257	168	65.4
VIQUEQUE	17,988	7,726	5,495	71.1
TIMOR LESTE	83,071	51,059	28,049	54.9

Tabela 8. Distribuisaun specifiko Kazu Malaria, tuir Distrito, Janeiro-Junho 2009

Distribution of Parasite Specific Malaria by District, January – June 2009

Distrito	Total Kazu Malaria Konfirmadu	P. Falciparum		P. Vivax		Mix	
		Numero	%	Numero	%	Numero	%
AILEU	1,733	781	45.1	944	54.5	8	0.4
AINARO	159	132	83.0	27	17.0	0	0.0
BAUCAU	66	40	60.6	26	39.4	0	0.0
BOBONARO	77	75	97.4	2	2.6	0	0.0
COVALIMA	4,538	3,134	69.1	1,403	30.9	1	0.0
DILI	9,991	8,972	89.8	1,013	10.1	6	0.1
ERMERA	1,043	298	28.6	744	71.3	1	0.1
LAUTEM	2,597	2,564	98.7	33	1.3	0	0.0
LIQUICA	394	261	66.2	133	33.8	0	0.0
MANATUTO	958	191	19.9	767	80.1	0	0.0
MANUFAHI	830	743	89.5	87	10.5	0	0.0
OECUSSE	168	114	67.9	41	24.4	13	7.7
VIQUEQUE	5,495	2,373	43.2	3,102	56.4	20	0.4
TIMOR LESTE	28,049	19,678	70.2	8,322	29.6	49	0.2

For Further Information Please Contact:

Atu hatene klaru informasaun, halo favor kontaktu:

1. Joao PH da Silva: 726-3853,
email : rentaujoao_phd@yahoo.com

2. Francisco Abel Viana: 725-0501
email : mouloi_25@yahoo.com

Gabinete Sistema Informasaun Saude-Vigilansia
Epidemiologia
Email: tls_epid@yahoo.com

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