



### Food and Waterborne Diseases

Food and waterborne illnesses are conditions caused by eating or drinking food or water that is contaminated by microorganisms or the toxins they produce. It typically causes gastrointestinal symptoms such as abdominal pain, nausea, vomiting, and diarrhea. The mode of transmission is fecal-oral route. This summary report presents routinely collected FWBD data for the period of January 1 to May 26, 2018. (Table 1)

Table 1. Food & Waterborne Diseases  
Philippines, 2018\* vs 2017

FOOD/WATER-BORNE DISEASES	2018			2017	% Difference *2018 vs 2017
	Cases	Deaths	CFR (%)	Cases	
Acute Bloody Diarrhea	7,300	8	0.11	8,790	↓ -17
Confirmed Cholera	3	0	0.00	33	↓ -91
Confirmed Rotavirus	357	0	0.00	977	↓ -63
Hepatitis A	95	0	0.00	229	↓ -59
Typhoid Fever	6,922	15	0.22	9,023	↓ -23

### PIDSR Case Definition for Food and Waterborne Diseases

Acute Bloody Diarrhea (ABD)	
<b>Reported Case</b>	<ul style="list-style-type: none"> <li>A person with acute diarrhea with visible blood in the stool.</li> </ul>
Cholera	
<b>Suspected Case</b>	<ul style="list-style-type: none"> <li><b>Disease unknown in the area:</b> A person aged 5 years or more with severe dehydration or who died from acute watery diarrhea, <b>OR</b></li> <li><b>Disease endemic in the area:</b> A person aged 5 years or more with acute watery diarrhea with or without vomiting, <b>OR</b></li> <li><b>In an area where there is a cholera epidemic:</b> A person with acute watery diarrhea, with or without vomiting.</li> </ul>
<b>Confirmed Case</b>	<ul style="list-style-type: none"> <li>A suspected case that is laboratory-confirmed. Isolation of <i>Vibrio cholerae</i> 01 or 0139 from stools in any patient with diarrhea.</li> </ul>
Rotavirus	
<b>Suspected Case</b>	<ul style="list-style-type: none"> <li>A child &lt;5 years of age who undergoes treatment (means that the child received intravenous rehydration therapy while undergoing observation at the Emergency Room OR was admitted in a hospital ward) for acute diarrhea (passage of 3 or more watery stools within a 24-hour period for &lt; 14 days) in a participating hospital.</li> </ul>
<b>Confirmed Case</b>	<ul style="list-style-type: none"> <li>A suspected case that has been laboratory-confirmed as Rotavirus.</li> </ul>
Hepatitis A	
<b>Suspected Case</b>	<ul style="list-style-type: none"> <li>A person with acute illness characterized by acute jaundice, dark urine, loss of appetite, body weakness, extreme fatigue and right upper quadrant tenderness.</li> </ul>
<b>Confirmed Case</b>	<ul style="list-style-type: none"> <li>A suspected case that is laboratory confirmed (positive for IgM anti-HAV).</li> </ul>
Typhoid Fever	
<b>Suspected Case</b>	<ul style="list-style-type: none"> <li>A person with an illness characterized by insidious onset of sustained fever, headache, malaise, anorexia, relative bradycardia, constipation or diarrhea, and non-productive cough.</li> </ul>
<b>Probable Case</b>	<ul style="list-style-type: none"> <li>A suspected case that is epidemiologically linked to a confirmed case in an outbreak.</li> </ul>
<b>Confirmed Case</b>	<ul style="list-style-type: none"> <li>A suspected or probable case that is laboratory confirmed. (Isolation of <i>Salmonella enterica</i> from blood, stool, or other clinical specimen)</li> </ul>

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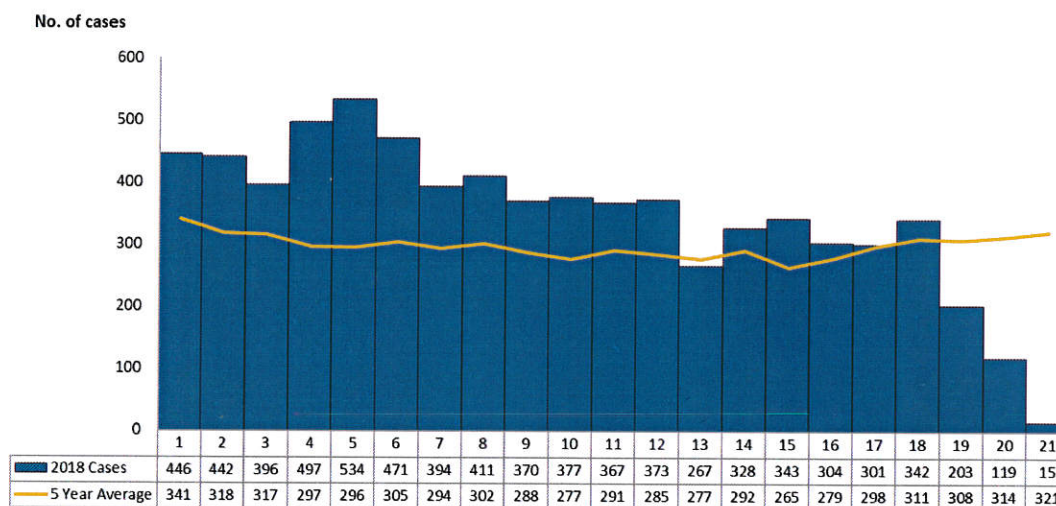


## I. Acute Bloody Diarrhea (ABD)

### Trend in the Philippines

A total of 7,300 acute bloody diarrhea cases were reported nationwide from January 1 to May 26, 2018. The distribution of cases for 2018 compared to the 5-year average of cases from 2013-2017 is shown below (Fig.1).

**Figure 1. Acute Bloody Diarrhea Cases by Morbidity Week (N=7,300)**  
**Philippines, January to May 2018 vs 5 Year Average Data**



\*same time period

### Geographical Distribution

There was a 17% decrease of reported ABD cases from 8,790 cases in 2017 to 7,300 cases in 2018. Most of the reported cases were from the following regions: Region VII (2,697, 37%), Region IX (1,108, 15%), CARAGA (806, 11%), CAR (657, 9%), and Region X (643, 9%) (Table 2).

**Table 2. Acute Bloody Diarrhea Cases & Deaths (N=7,300)**  
**Philippines, 2017 vs 2018\***

Region	2017		2018		% Change
	Cases	Deaths	Cases	Deaths	
<b>Philippines</b>	<b>8,790</b>	<b>37</b>	<b>7,300</b>	<b>8</b>	<b>↓17</b>
I	49	0	28	0	↓43
II	549	0	243	0	↓56
III	168	0	258	0	↑54
IV-A	262	2	354	0	↑35
MIMAROPA	63	0	43	0	↓32
V	51	0	16	0	↓69
VI	48	0	15	0	↓69
VII	3,146	28	2,697	7	↓14
VIII	301	1	177	0	↓41
IX	688	3	1,108	0	↑61
X	530	1	643	0	↑21
XI	138	2	69	0	↓50
XII	148	0	87	0	↓41
ARMM	70	0	74	0	↑6
CAR	761	0	657	0	↓14
CARAGA	1,759	0	806	1	↓54
NCR	59	0	25	0	↓58

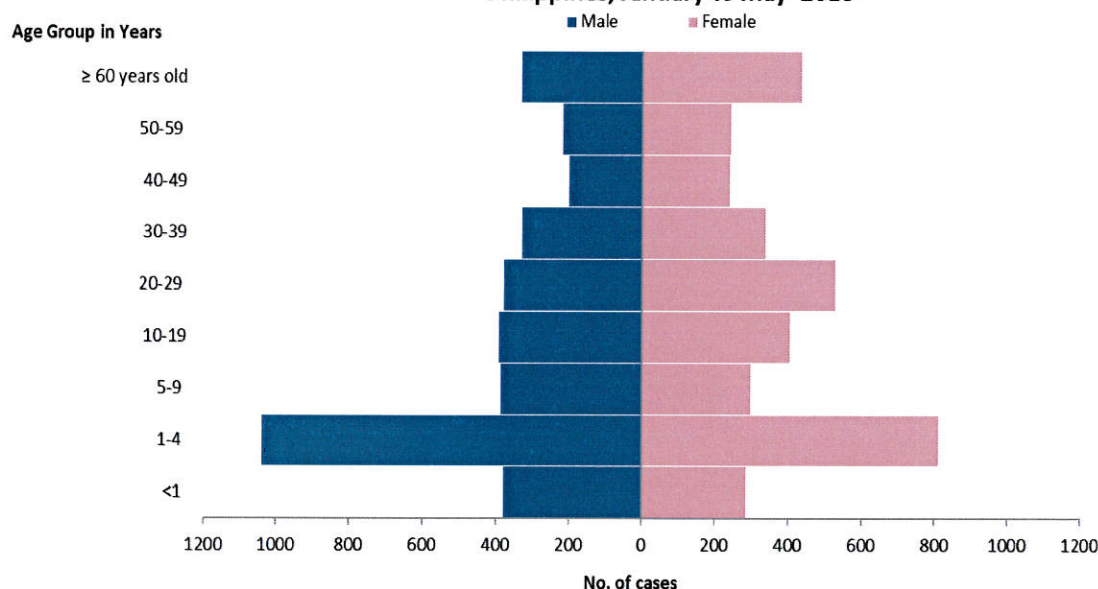
\*From the period of January 1 to May 26, 2018



### Profile of Cases

There was an equal distribution of males and females among reported ABD cases. Age of cases ranged from less than 1 month to 96 years old (median age of 15 years). The most affected age group were from 1 year to 4 years (1,854, 25%) (Fig.2).

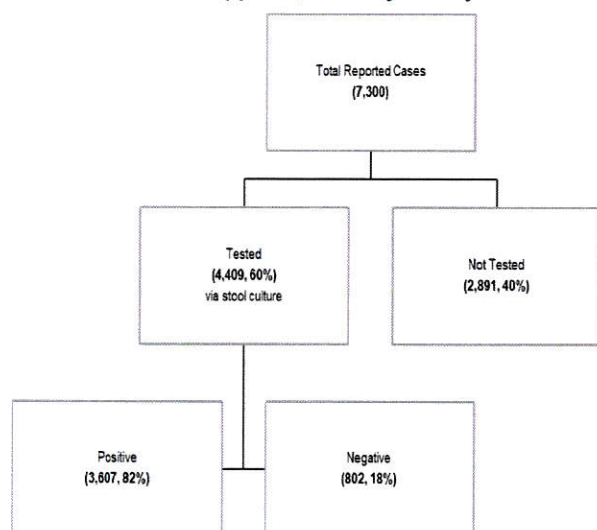
**Figure 2. Acute Bloody Diarrhea Cases by Age Group and Sex (N=7,300)**  
**Philippines, January to May 2018**



### Laboratory Results

A total of 4,409 (60%) samples were collected for laboratory testing (Fig. 3). Of these, 3,607 (82%) were tested for different organisms. The frequently identified organism was *Entamoeba histolytica* (3,091, 86%) (Table 3).

**Figure 3. ABD Cases by Laboratory Status (N=7,300)**  
**Philippines, January to May 2018**



**Table 3. Top 5 Organisms in ABD Cases\***  
**Philippines, January to May 2018**

Organism	Cases
<i>Entamoeba histolytica</i>	3,091
<i>Trophozoites</i>	143
<i>Escherichia Coli</i>	129
<i>Shigella</i>	121
<i>Amoeba</i>	32

\*multiple results and tested via stool culture

### Profile of Deaths

There were eight (8) deaths (CFR=0.10%) out of the 7,300 reported ABD cases. Age of deaths ranged from 1 to 64 years old (median age of 29 years). Age group of these deaths were: 1 to 4 years (2, 25%), 5 to 9 years (2, 25%), 50 to 59 years (2, 25%) and 60 years and above (2, 25%).



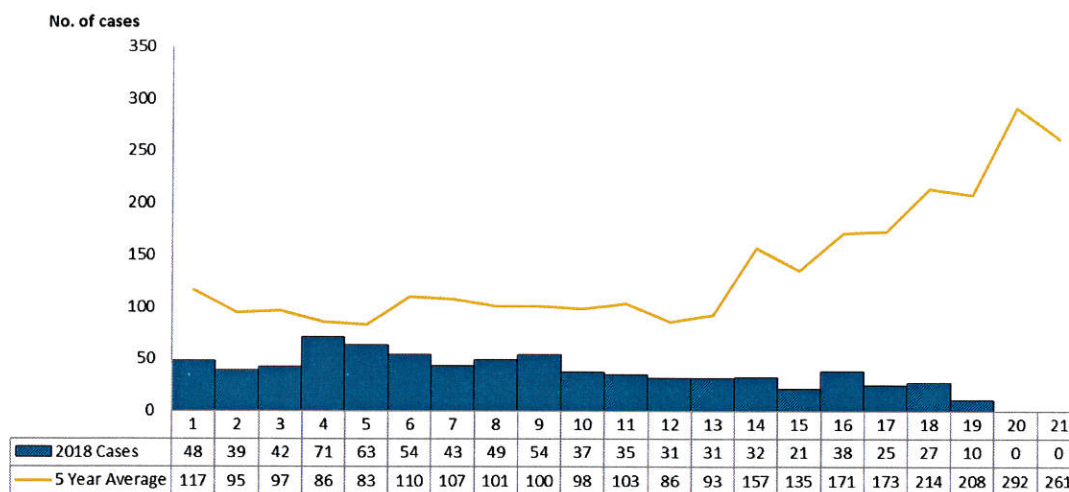


## II. Cholera

### Trend in the Philippines

A total of 750 reported cholera cases were reported nationwide from January 1 to May 26, 2018. The distribution of cases for 2018 compared to the 5-year average of cases from 2013-2017 is shown below (Fig.4).

**Figure 4. Cholera Cases by Morbidity Week (N=750)**  
**Philippines, January to May 2018 vs 5 Year Average Data**



\*same time period

### Geographical Distribution

There was a 59% decrease of reported cholera cases from 1,833 cases in 2017 to 750 cases in 2018. Most of the reported cases were from the following regions: CARAGA (360, 48%), Region V (280, 37%), Region X (88, 12%) and Region XI (15, 2%) (Table 4). There were four deaths (CFR of 0.5%) coming from Region V. Three laboratory confirmed were cases reported one each from regions VI, VII and XI (Fig. 6).

**Table 4. Reported Cholera Cases & Deaths by Region (N=750)**  
**Philippines, 2017 vs 2018\***

Region	2017		2018		% Change
	Cases	Deaths	Cases	Deaths	
<b>Philippines</b>	<b>1,833</b>	<b>15</b>	<b>750</b>	<b>4</b>	<b>↓59</b>
I	1	0	0	0	↓100
II	0	0	0	0	0
III	0	0	0	0	0
IV-A	42	0	3	0	↓93
MIMAROPA	7	4	0	0	↓100
V	643	4	280	4	↓56
VI	1	0	1	0	0
VII	256	1	2	0	↓99
VIII	10	1	0	0	↓100
IX	2	0	0	0	↓100
X	523	5	88	0	↓83
XI	3	0	15	0	↑400
XII	3	0	0	0	↓100
ARMM	1	0	1	0	0
CAR	0	0	0	0	0
CARAGA	340	0	360	0	↑6
NCR	1	0	0	0	↓100

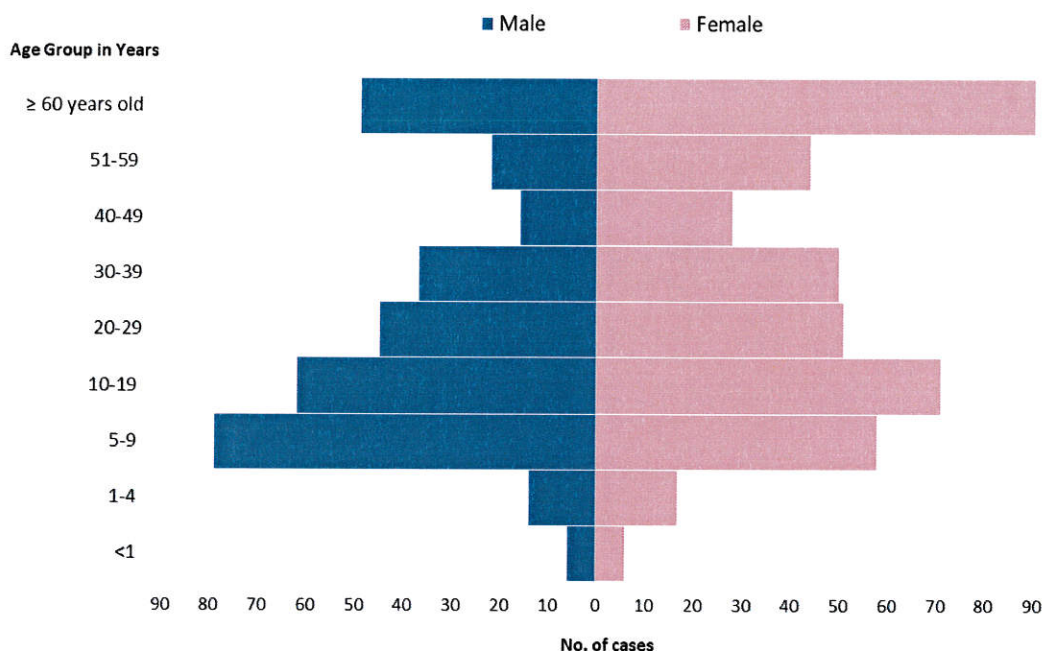
\*From the period of January 1 to May 26, 2018



### Profile of Cases

Majority of the suspect cases were female (419, 56%). Age of suspect cases ranged from 1 month to 95 years old (median age of 25 years). The most affected age group was from 60 years and above (140, 19%) (Fig. 5).

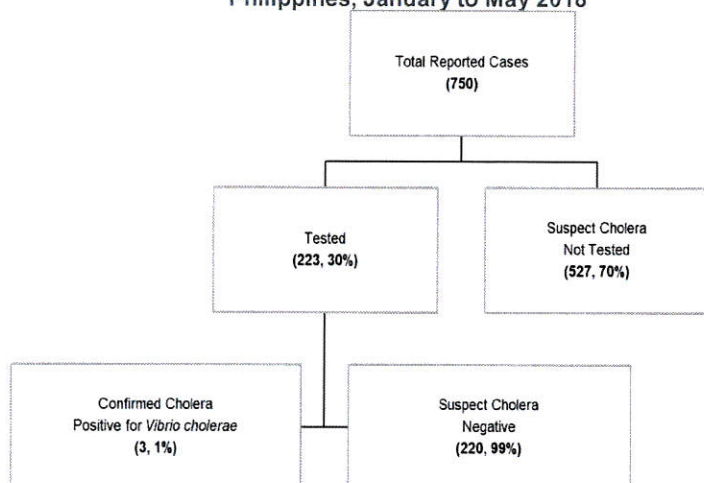
**Figure 5. Reported Cholera Cases by Age Group and Sex (N=750)**  
Philippines, January to May 2018



### Laboratory Results

A total of 223 (30%) specimens were tested (Fig. 6). Of these, 220 (99%) were negative and only 3 (1%) were positive for *Vibrio cholerae* (one *V. cholerae*, one *V. cholera* Ogawa, one *V. cholera* 0139) (Table 5). Three laboratory confirmed were reported from Region VI (one case), Region VII (one case) and Region XI (one case) (Fig. 6).

**Figure 6. Reported Cholera Cases by Laboratory Status (N=750)**  
Philippines, January to May 2018



**Table 5. Laboratory Status of Cholera cases (N=750)**  
Philippines, January to May 2018

Total Reported Cases	750
Tested	223 (30%)
Positive (stool culture)	3 (1%)
<i>Vibrio cholerae</i>	1
<i>Vibrio cholerae</i> Ogawa	1
<i>Vibrio cholerae</i> 0139	1
Negative	220 (99%)
Not Tested	527 (70%)

### Profile of Deaths

There were four deaths (CFR=0.5%) out of the 750 reported cholera cases. Ages of cases who died were: 8 years old, 20 years old, 58 years old and 77 years old. Among those who died, none was a confirmed cholera case.



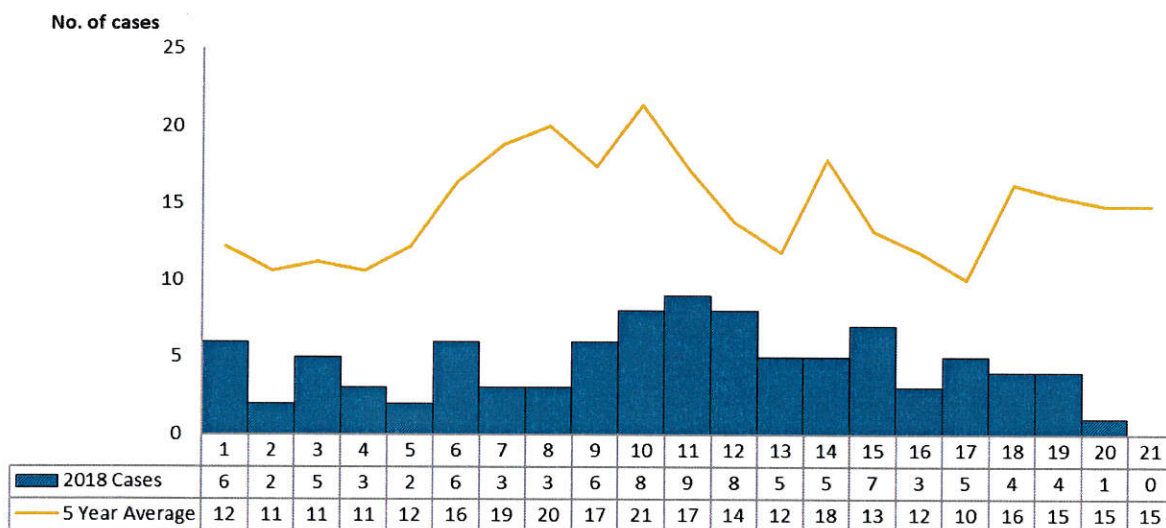


### III. Hepatitis A

#### Trend in the Philippines

A total of 95 Hepatitis A cases were reported nationwide from January 1 to May 26, 2018. The distribution of cases for 2018 compared to the 5-year average of cases from 2013-2017 is shown below (Fig. 7).

**Figure 7. Hepatitis A Cases by Morbidity Week (N=95)**  
**Philippines, January to May 2018 vs 5 Year Average Data**



\*same time period

#### Geographical Distribution

There was a 59% decrease of Hepatitis A cases from 229 cases in 2017 to 95 cases in 2018. Most of the cases were from the following regions: Region VII (41, 43%), Region VI (12, 13%), and NCR (10, 11%) each (Table 6). There were no reported deaths among cases.

**Table 6. Hepatitis A Cases & Deaths by Region (N=95)**  
**Philippines, 2017 vs 2018\***

Region	2017		2018		% Change
	Cases	Deaths	Cases	Deaths	
<b>Philippines</b>	<b>229</b>	<b>0</b>	<b>95</b>	<b>0</b>	<b>↓59</b>
I	10	0	0	0	↓100
II	1	0	3	0	↑200
III	11	0	1	0	↓91
IV-A	12	0	7	0	↓42
MIMAROPA	0	0	0	0	0
V	11	0	2	0	↓82
VI	31	0	12	0	↓61
VII	48	0	41	0	↓15
VIII	3	0	0	0	↓100
IX	13	0	6	0	↓54
X	29	0	7	0	↓76
XI	2	0	1	0	↓50
XII	8	0	0	0	↓100
ARMM	11	0	4	0	↓64
CAR	5	0	1	0	↓80
CARAGA	10	0	0	0	↓100
NCR	24	0	10	0	↓58

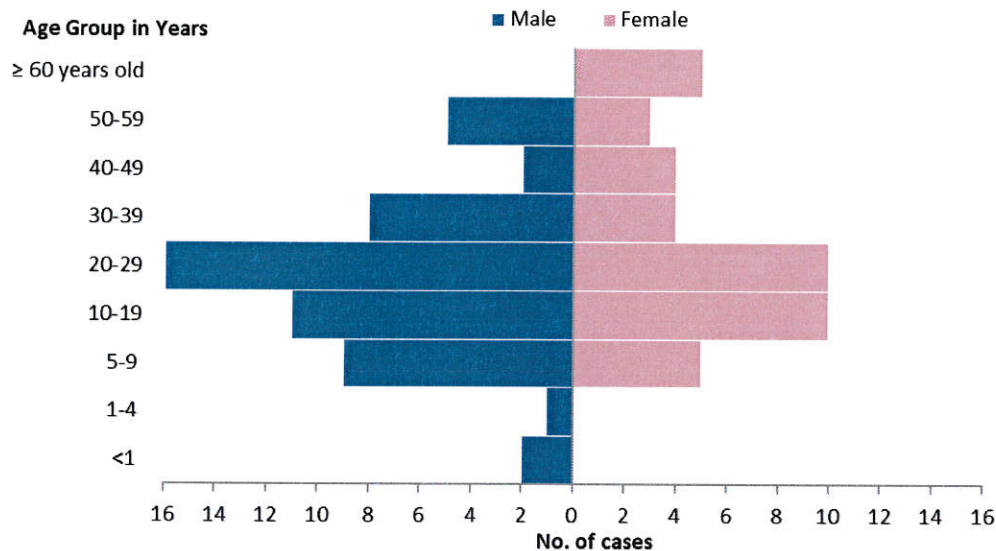
\*From the period of January 1 to May 26, 2018



### Profile of Cases

Majority of the cases were male (54, 57%). Age of cases ranged from 2 months to 82 years old (median age of 23 years). The most affected age group were from 20 to 29 years (26, 27%) (Fig. 9).

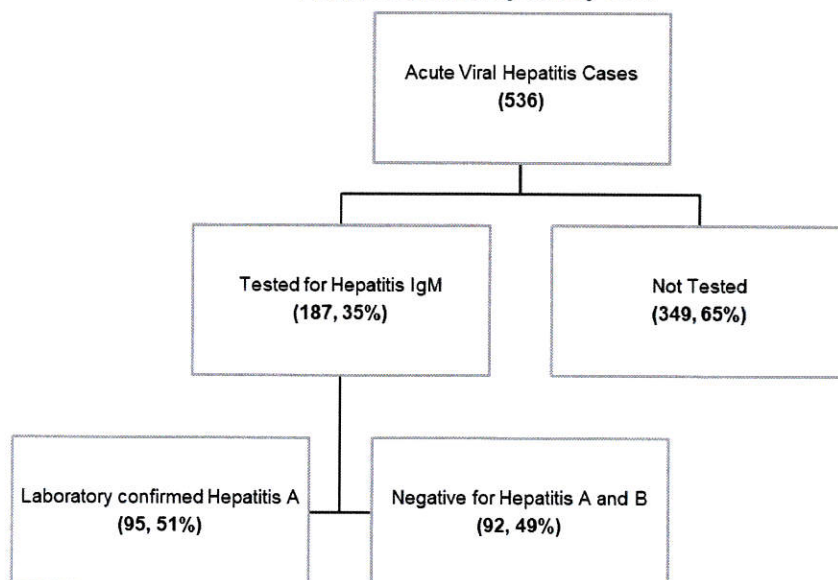
**Figure 8. Hepatitis A Cases by Age Group and Sex (N=95)**  
**Philippines, January to May 2018**



### Laboratory Status

A total of 536 reported cases of Acute Viral Hepatitis in the Philippines from January 1 to May 26, 2018, 187 (35%) were tested for Hepatitis A IgM. Among those tested, 95 (51%) were positive for Hepatitis A (Fig. 9).

**Figure 9. Acute Viral Hepatitis Cases by Case Classification (N=536)**  
**Philippines, January to May 2018**







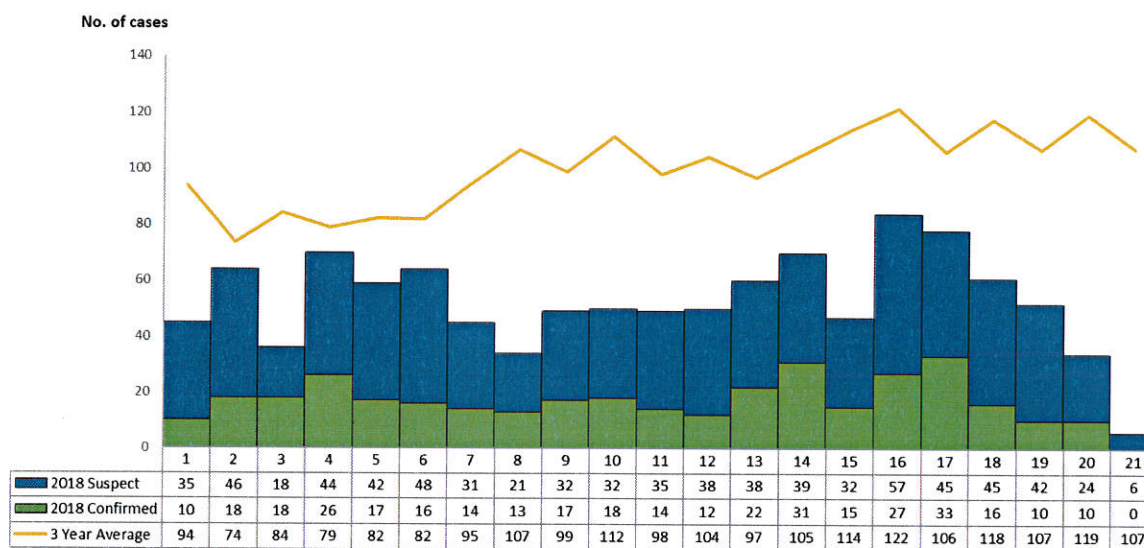
#### IV. Rotavirus

##### A. Reported Cases

##### Trend in the Philippines

A total of 1,107 reported rotavirus cases were reported nationwide from January 1 to May 26, 2018. The distribution of cases for 2018 compared to the 3-year average of cases from 2015-2017 is shown below (Fig. 10).

**Figure 10. Rotavirus Cases by Morbidity Week and Case Classification (N=1,107)**  
**Philippines, January to May 2018 vs 3 Year Average Data**



\*same time period

##### Geographical Distribution

There was a 49% decrease of reported Rotavirus cases from 2,177 cases in 2017 to 1,107 cases in 2018. Most of the reported cases were from the following regions: Region I (294, 27%), Region XII (171, 15%), Region V (166, 15%), ARMM (143, 13%) and Region VI (131, 12%) (Table 7).

**Table 7. Reported Rotavirus Cases & Deaths by Region (N=1,107)**  
**Philippines, 2017 vs 2018\***

Region	2017		2018		% Change
	Cases	Deaths	Cases	Deaths	
<b>Philippines</b>	<b>2,177</b>	<b>19</b>	<b>1,107</b>	<b>3</b>	<b>↓49</b>
I	559	8	294	2	↓47
II	0	0	1	0	0
III	1	0	3	0	↑200
IV-A	10	0	5	0	↓50
MIMAROPA	154	1	66	0	↓57
V	99	0	166	0	↑68
VI	321	4	131	0	↓59
VII	2	0	0	0	↓100
VIII	0	0	0	0	0
IX	0	0	0	0	0
X	0	0	1	0	0
XI	2	0	0	0	↓100
XII	327	2	171	0	↓48
ARMM	323	4	143	1	↓56
CAR	0	0	0	0	0
CARAGA	201	0	22	0	↓89
NCR	178	0	104	0	↓42

\*From the period of January 1 to May 26, 2018



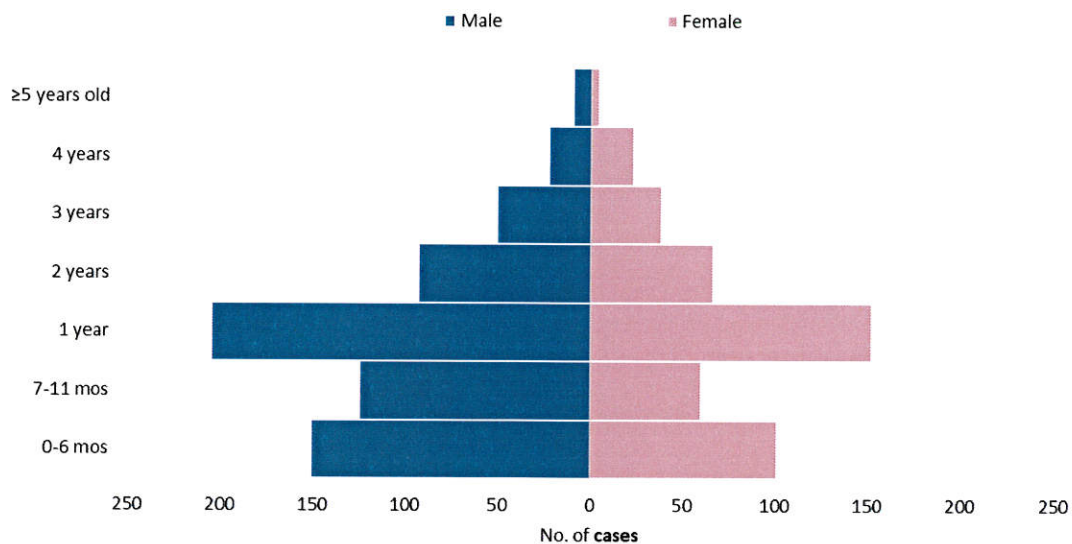


## Profile of Cases

### Age Group and Sex

Majority of the reported cases were male (661, 60%). Age of cases ranged from less than 1 month to 14 years old (median age of 1 year). Most of the cases were 1 year old (357, 32%) (Fig. 11).

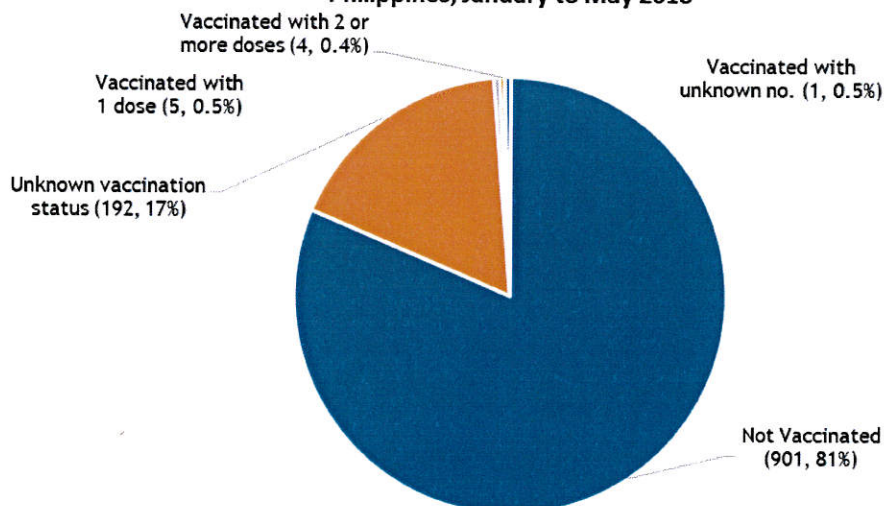
**Figure 11. Reported Rotavirus Cases by Age Group and Sex (N=1,107)**  
Philippines, January to May 2018



### Vaccination Status

Majority of the reported cases were not vaccinated with rotavirus (901, 81%) (Fig. 12).

**Figure 12. Vaccination Status of Reported Rotavirus Cases (N=1,107)**  
Philippines, January to May 2018

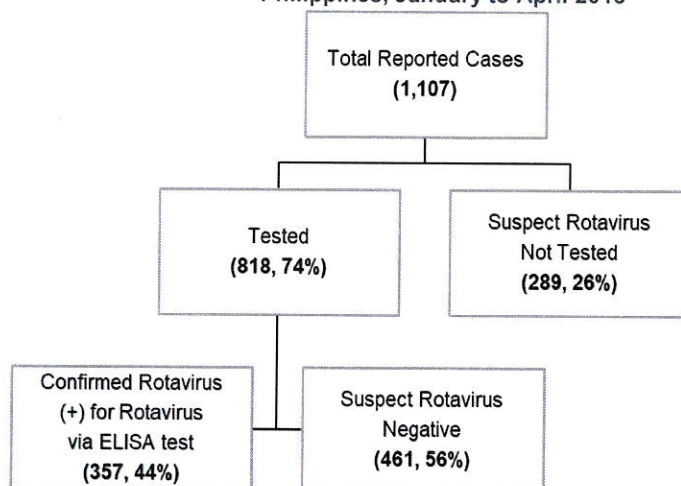




### Laboratory Results

A total of 818 (74%) samples were collected for laboratory testing. Of these, 357 (44%) were laboratory confirmed for rotavirus and 461 (56%) were negative (Fig. 13).

**Figure 13. Reported Rotavirus Cases by Laboratory Status (N=1,107)**  
Philippines, January to April 2018



### Profile of Deaths

Three deaths were reported (CFR=0.27%). Ages of deaths ranged from 6 months to 2 years old (median age of 8 years). Ages of cases who died were: 6 months old, 8 months old and 2 years old.





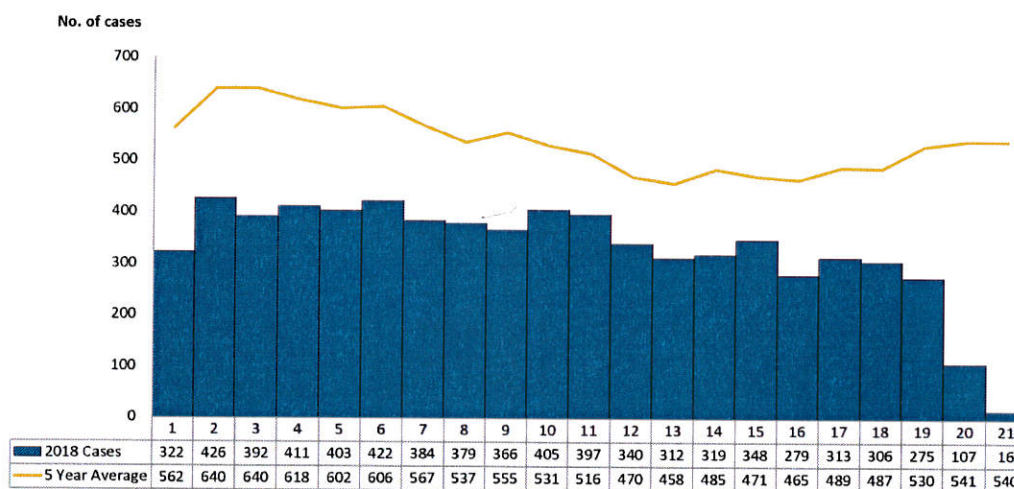
## V. Typhoid Fever

### A. Reported Cases

#### Trend in the Philippines

A total of 6,922 reported typhoid fever cases were reported nationwide from January 1 to May 26, 2018. The distribution of cases for 2018 compared to the 5-year average of cases from 2013-2017 is shown below (Fig.14).

**Figure 14. Reported Typhoid Fever Cases by Morbidity Week (N=6,922)**  
**Philippines, January to May 2018 vs 5 Year Average Data**



\*same time period

#### Geographical Distribution

There was a 23% decrease of reported typhoid fever cases from 9,023 cases in 2017 to 6,922 cases in 2018. Most of the reported cases were from the following regions: Region X (1,336, 19%), Region VI (702, 10%), Region IVA (647, 9%), Region XII (627, 9%), and ARMM (556, 8%) (Table 9.)

**Table 9. Reported Typhoid Fever Cases & Deaths by Region (N=6,922)**  
**Philippines, 2017 vs 2018\***

Region	2017		2018		% Change
	Cases	Deaths	Cases	Deaths	
<b>Philippines</b>	<b>9,023</b>	<b>11</b>	<b>6,922</b>	<b>15</b>	<b>-23</b>
I	464	0	236	0	-49
II	293	1	140	0	-52
III	267	0	157	0	-41
IVA	631	0	647	0	3
MIMAROPA	168	1	88	0	-48
V	197	1	122	2	-38
VI	806	2	702	2	-13
VII	481	3	379	3	-21
VIII	188	0	360	1	91
IX	692	2	501	1	-28
X	1,827	0	1,336	0	-27
XI	83	0	77	0	-7
XII	956	0	627	2	-34
ARMM	553	1	556	1	1
CAR	689	0	501	0	-27
CARAGA	520	0	323	0	-38
NCR	208	0	170	3	-18

\*From the period of January 1 to May 26, 2018

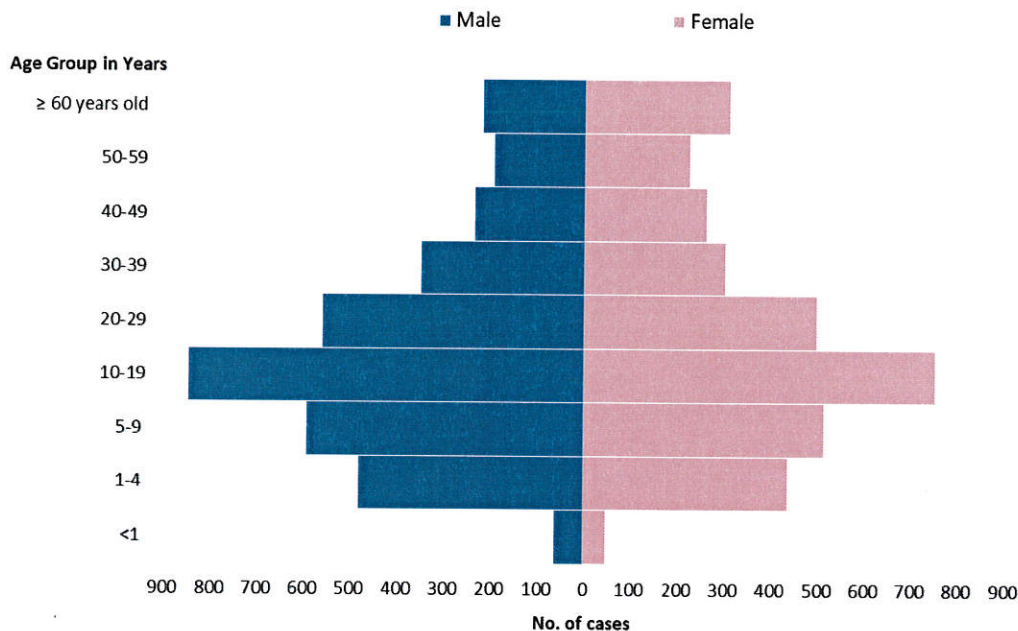
\*Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases. All 2017 data reflects partial data only of all regions. A PDF file of this report is available at [www.doh.gov.ph/statistics](http://www.doh.gov.ph/statistics).



### Profile of Cases

Majority of the reported cases were male (3,569, 52%). Age of cases ranged from less than 1 month to 97 years old (median age of 17 years). The most affected age group were from 10 to 19 years old (1,599, 23%) (Fig.15).

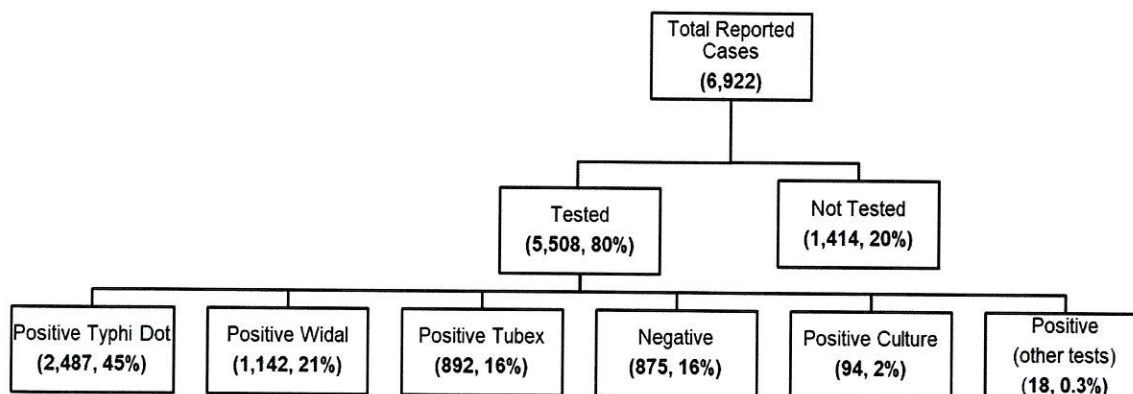
**Figure 15. Reported Typhoid Fever Cases by Age Group and Sex (N=6,922)**  
Philippines, January to May 2018



### Laboratory Results

A total of 5,508 (80%) specimens were referred for testing. Laboratory status of reported typhoid fever cases is shown below (Fig. 17).

**Figure 17. Reported Typhoid Fever Cases by Laboratory Status (N=6,922)**  
Philippines, January to May 2018



### Profile of Deaths

There were 15 deaths (CFR=0.22%) out of the 6,922 reported typhoid fever cases. Age of deaths ranged from 2 to 83 years old (median age of 24 years). Age group of these deaths were: 1 to 4 years (1, 7%), 5 to 9 years (1, 7%), 10 to 19 years (4, 27%), 20 to 29 years (2, 13%), 30 to 39 (2, 13%), 50 to 59 years (2, 13%) and 60 years and above (3, 20%).