



Vaccine Preventable Disease (VPD) Surveillance

The goal of VPD surveillance is to improve the capacity of the health system to prevent and control through timely detection and appropriate response to vaccine preventable diseases with high level of morbidity, disability and mortality. This report provides data from the period of January 1 to September 29, 2018 or Morbidity Weeks 1 - 39 (Table 1).

Table 1. Summary of Reported Vaccine Preventable Diseases, Philippines, January 1 – September 29, 2018

Vaccine Preventable Diseases	Total No of Cases	Confirmed Cases		
		Cases	Deaths	CFR %
Measles	14,997	2,775	34	1.23
Rubella		105	0	-
Diphtheria	126	42	10	23.81
Pertussis	254	68	5	7.35
Neonatal Tetanus	41	41	25	60.98
Polio (AFP Surveillance)	284	-	-	-

PIDSR Case Definition for Vaccine Preventable Diseases

MEASLES	
Reported Measles Case (Suspect measles case)	Any person with fever and maculopapular (non-vesicular) rash and either cough, coryza (runny nose), or conjunctivitis (red eyes)
Measles compatible case (Clinical Measles)	A suspect case for which - no adequate blood specimen was taken, OR - is not an epidemiological link to a confirmed case of measles or rubella, OR - laboratory confirmation is still pending
Confirmed measles case	A suspect with positive laboratory for measles or epidemiologically linked cases
Epidemiologically Linked (Epi-linked)	A suspect case that has not been confirmed by laboratory but has close contact and temporally related to a laboratory confirmed case or to another epi-linked case during times of epidemic
Laboratory confirmed rubella	A suspect case with a positive laboratory test result for rubella-specific IgM antibodies or other approved laboratory test method
Discarded non-measles/rubella	A suspect case that meets the clinical case definition for measles and tested negative for both measles and rubella testing
NEONATAL TETANUS	
Clinically Confirmed Neonatal Tetanus	<ul style="list-style-type: none"> Any neonate (≤ 28 days of life) that sucks and cries normally during the first 2 days of life, and becomes ill between 3 to 28 days of age and develops both an inability to suck and diffuse muscle rigidity (stiffness) and spasms (jerkings of the muscles), which may include trismus, clenched fists or feet, continuously pursed lips, and/or curved back (opisthotonus); OR A neonate between 3 to 28 days of life, diagnosed as a case of tetanus by a physician.
DIPHTHERIA	
Probable case	A person with an illness of the upper respiratory tract characterized by laryngitis or pharyngitis or tonsillitis, and adherent membranes on tonsils, pharynx and/or nose.
Confirmed case	A probable case that is laboratory confirmed or linked epidemiologically to a laboratory-confirmed case.
Note: Persons with positive <i>Corynebacterium diphtheriae</i> cultures who do not meet the clinical description (i.e. asymptomatic carriers) should not be reported as probable or confirmed diphtheria cases.	
PERTUSSIS	
Clinical Case	A person with a cough lasting at least 2 weeks with at least one of the following: - paroxysms (i.e. fits) of coughing - inspiratory "whooping" - post-tussive vomiting (i.e. vomiting immediately after coughing) - without other apparent cause
Clinically-confirmed case	- A case that meets the clinical case definition but is not laboratory confirmed.
Probable case	Meets the clinical case definition, is not laboratory confirmed, and is not epidemiologically linked to a laboratory-confirmed case
Laboratory-confirmed case	<ul style="list-style-type: none"> A case of acute cough illness of any duration with a positive culture for <i>B. pertussis</i>; OR A case that meets the clinical case definition and is confirmed by PCR; OR A case that meets the clinical definition and is epidemiologically linked directly to a case confirmed by either culture or PCR.
ACUTE FLACCID PARALYSIS	
Reported AFP Case (suspect AFP case)	<ul style="list-style-type: none"> Any child less than 15 years of age who developed an acute onset of floppy paralysis OR A person of any age in whom poliomyelitis is suspected by the physician <p>AFP "hotcase" An AFP case with no or less than 3 OPV dose and had FEVER at onset of paralysis</p>

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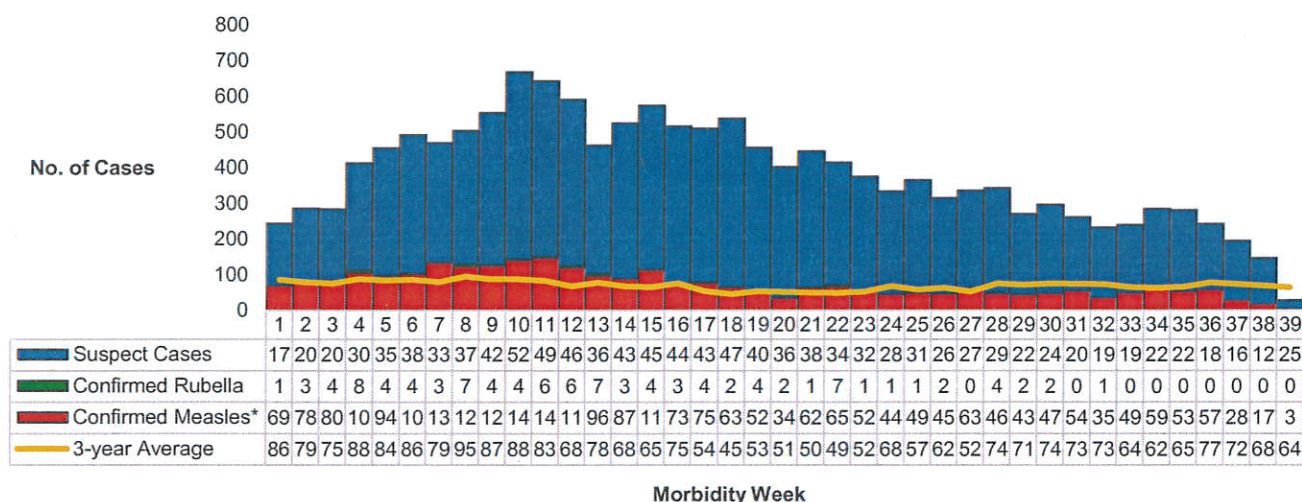
I. MEASLES-RUBELLA

Suspect Cases

Trend in the Philippines

A total of 14,997 suspect measles-rubella cases were reported from January 1 to September 29, 2018. The distribution of reported cases for 2018 compared to the 3-year average of cases from 2015-2017 is shown below (Figure 1).

Figure 1. Reported Measles-Rubella Cases by Case Classification and Morbidity Week, Philippines, January 1 to September 29, 2018 (N=14,997)



*laboratory-confirmed and epidemiologically-linked measles cases

Geographic Distribution

From January 1 to September 29, 2018 or morbidity weeks 1 to 39, cases are 384% higher than the number of cases reported during the same time period last year (3,099). Most of the reported cases were from the following regions: ARMM (3,888, 26%), NCR (2,201, 15%), Region XI (1,442, 10%), Region XII (1,393, 9%) and Region IX (1,305, 9%) (Table 1).

Table 1. Reported Measles-Rubella Cases by Region, Philippines, January 1 to September 29, 2018 (N=14,997) vs. January 1 to September 29, 2017

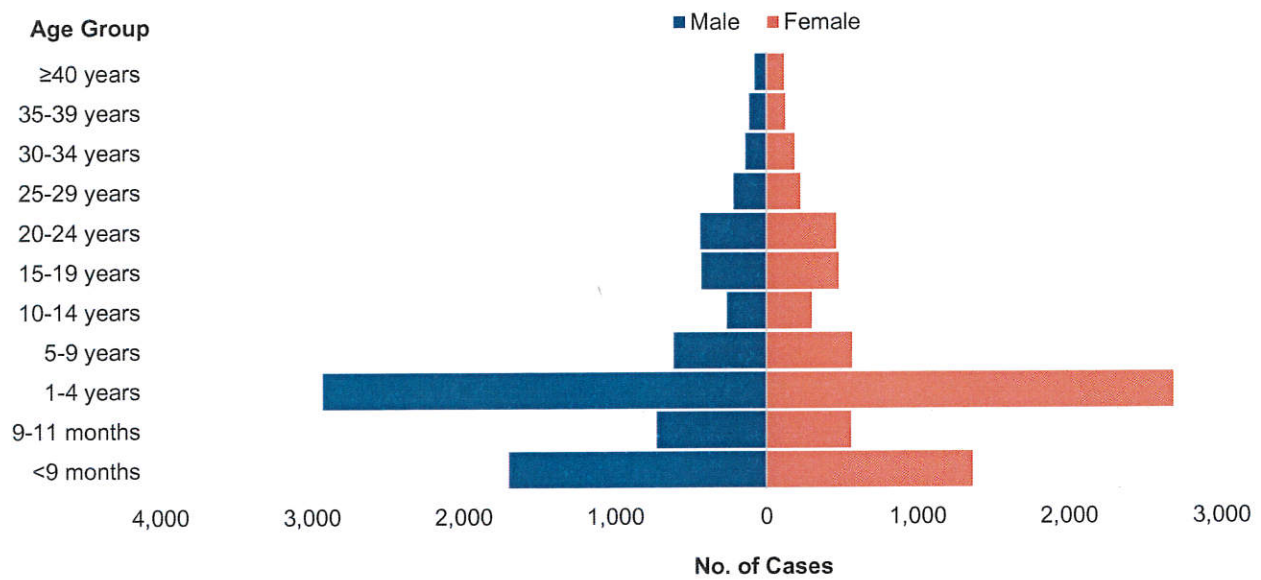
Region	2018		2017		% Change
	Cases	Deaths	Cases	Deaths	
PHL	14,997	133	3,099	17	↑ 384
I	318	0	373	1	↓ 15
II	66	0	49	0	↑ 35
III	585	9	313	2	↑ 87
IVA	1,108	9	520	3	↑ 113
MIMAROPA	61	0	51	0	↑ 20
V	244	5	61	0	↑ 300
VI	359	0	270	0	↑ 33
VII	283	1	44	0	↑ 543
VIII	141	5	75	0	↑ 88
IX	1,305	8	248	2	↑ 426
X	1,228	2	124	0	↑ 890
XI	1,442	20	56	0	↑ 2,475
XII	1,393	11	70	0	↑ 1,890
ARMM	3,888	30	334	8	↑ 1,064
CAR	98	0	177	0	↓ 45
CARAGA	277	1	41	0	↑ 576
NCR	2,201	32	293	1	↑ 651



Profile of Reported Cases

Majority (7,800 , 52%) of the reported cases were male. Ages of cases ranged from **less than 1 month to 87 years old** (median age of 2 years). Age groups with the most number of cases were: 1-4 years old (5,615, 37%), less than 9 months old (3,066, 20%) and 9-11 months old (1,284, 9%) (Figure 2).

Figure 2. Reported Measles-Rubella Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (N=14,997)*



*282 cases with unspecified age

Majority (9,989 , 67%) of the cases were not vaccinated (Figure 3). Top reasons for non-vaccination of measles-containing vaccine were: mother was busy (28%), not eligible for vaccination (26%) and child was sick (11%) (Figure 4).

Figure 3. Vaccination Status of Reported Measles-Rubella Cases, Philippines, January 1 to September 29, 2018 (N=14,997)

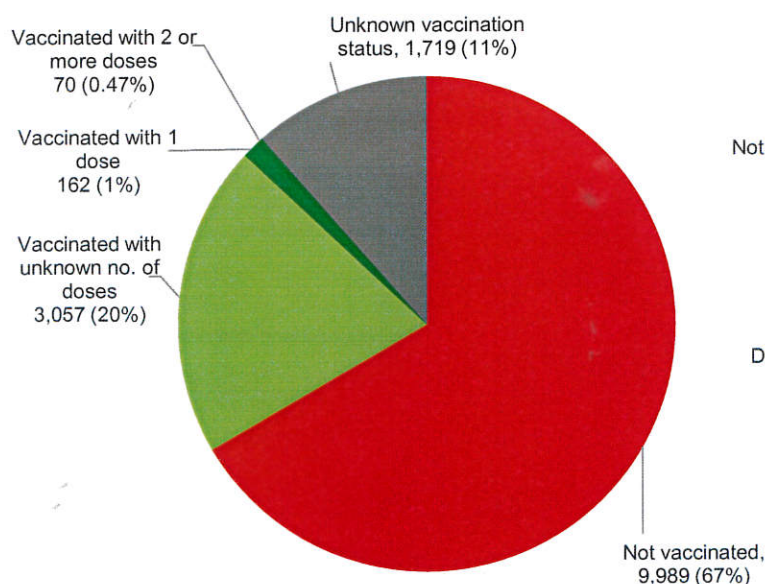
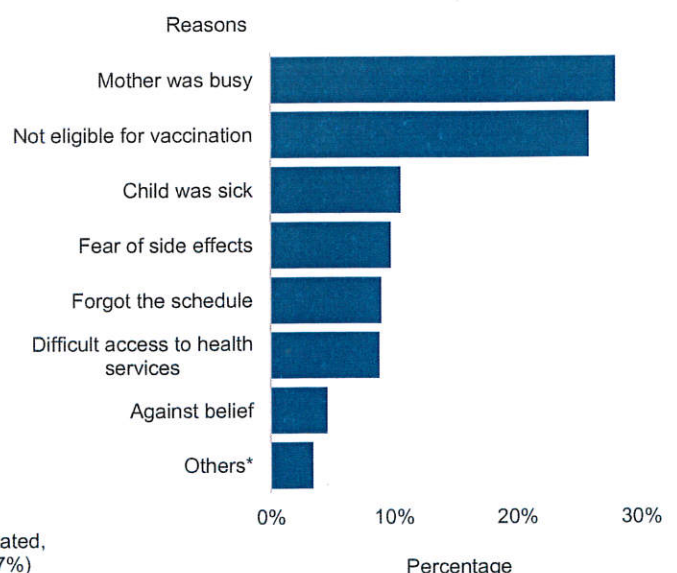


Figure 4. Reasons for Non-vaccination of Measles Vaccine*, Philippines, January 1 to September 29, 2018



*with data available

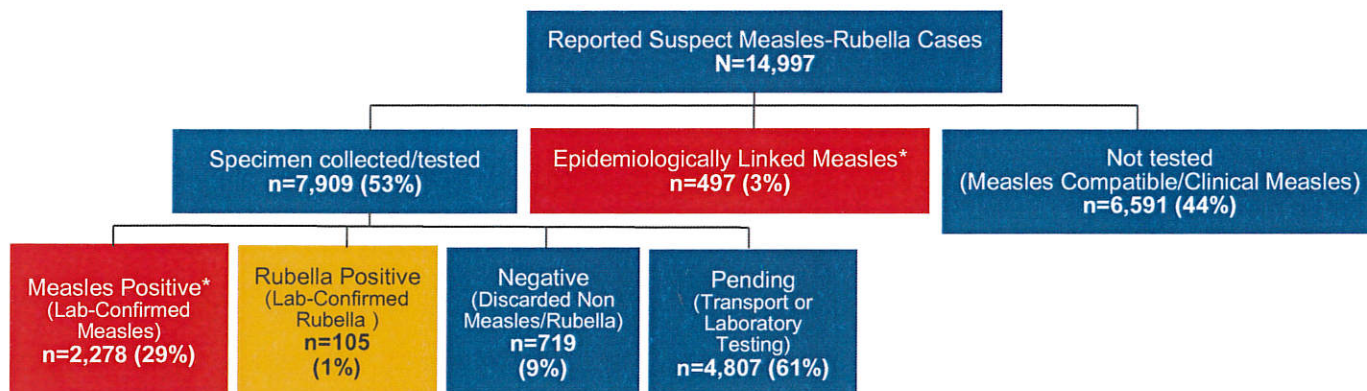
*other reasons: moves residence, lack of knowledge, parents refused, medical contraindication, history of travel, child was abandoned, war conflict, unavailable during vaccination



Case Classification

Among the 14,997 reported cases, a total of 7,909 (53%) cases had specimens collected/tested for measles/rubella IgM and/or PCR. Among the tested cases, 2,278 (29%) were positive for measles and 105 (1%) were positive for rubella. 497 (3%) cases were epidemiologically-linked to laboratory confirmed cases, hence also classified as confirmed measles cases (Figure 5).

Figure 5. Reported Measles-Rubella Cases by Case Classification, Philippines, January 1 to September 29, 2018, 2018 (N=14,997)



*Confirmed measles cases = laboratory-confirmed and epidemiologically-linked measles cases (N= 2,775)

Confirmed Measles Cases

Trend in the Philippines

There were 2,775 confirmed measles cases with 34 deaths (CFR=1.23%). The distribution of confirmed measles cases for 2018 compared to the 3-year average of cases from 2015-2017 is shown in Figure 6.

Geographic Distribution

Most of the confirmed measles cases were from the following regions: NCR (511, 18%), ARMM (471, 17%), Region XI (321, 12%), Region XII (281, 10%) and Region IX (218, 8%). Confirmed measles cases in 2018 increased by 1,101% compared to the same period in 2017 (Table 2).

Top 5 provinces with confirmed cases include: Lanao del Sur (293, 11%), Davao del Sur (232, 8%), Rizal (148, 5%), Maguindanao (142, 5%), and Zamboanga del Sur (120, 4%).

Top 5 municipalities with confirmed cases include: Davao City (218, 8%), Manila (112, 4%), Taguig City (102, 4%), Cotabato City (92, 3%), and Zamboanga City (91, 3%).

Figure 6. Confirmed Measles Cases by Morbidity Week, Philippines, January 1 to September 29, 2018 (n=2,775)

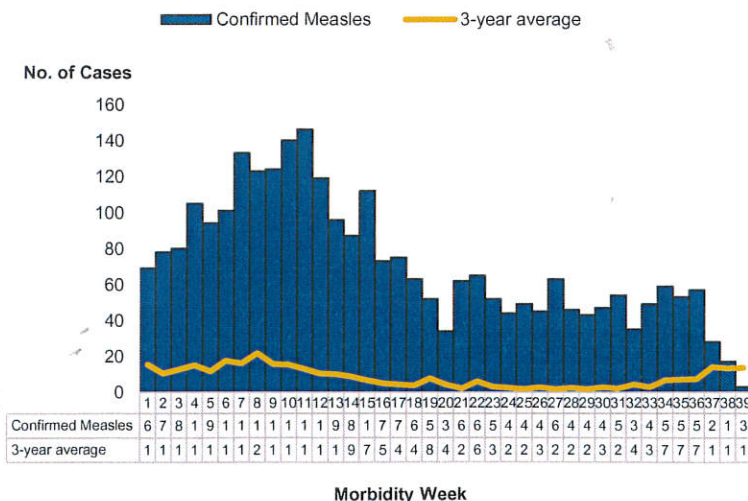


Table 2. Confirmed Measles Cases by Region, Philippines, January 1 to September 29, 2018 (n=2,775) vs. January 1 to September 29, 2017

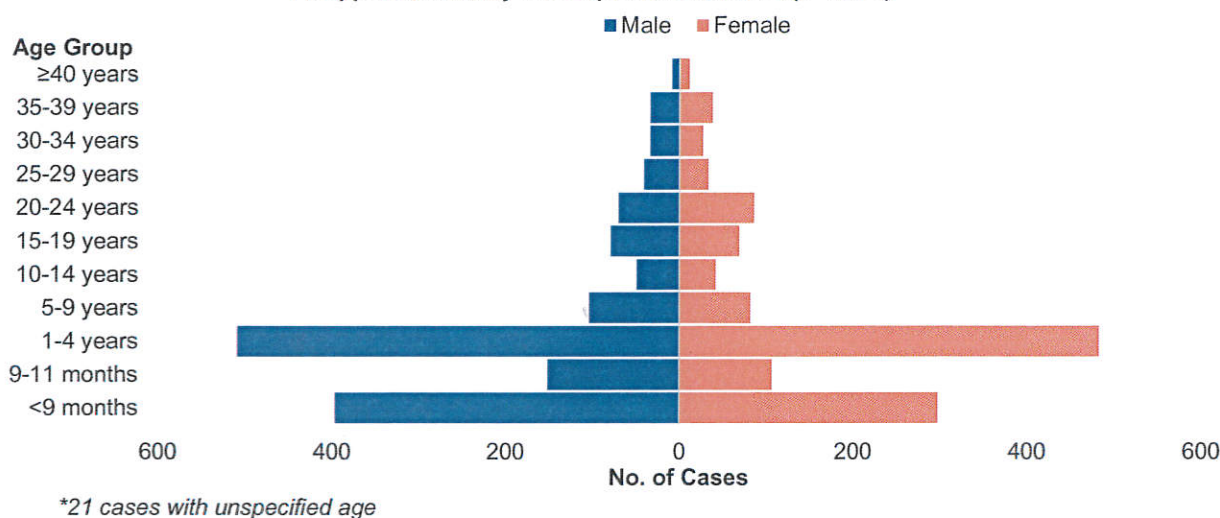
Region	2018		2017		Percent Change
	Cases	Deaths	Cases	Deaths	
PHL	2,775	34	231	6	↑ 1,101
I	30	0	3	0	↑ 900
II	7	0	0	0	-
III	132	3	25	2	↑ 428
IVA	213	1	11	0	↑ 1,836
MIMAROPA	6	0	0	0	-
V	108	2	0	0	-
VI	101	0	1	0	↑ 10,000
VII	118	0	1	0	↑ 11,700
VIII	19	1	0	0	-
IX	218	0	131	2	↑ 66
X	169	1	4	0	↑ 4,125
XI	321	9	1	0	↑ 32,000
XII	281	2	1	0	↑ 28,000
ARMM	471	2	47	1	↑ 902
CAR	15	0	0	0	-
CARAGA	55	0	1	0	↑ 5,400
NCR	511	13	5	1	↑ 10,120



Profile of Confirmed Measles Cases

Majority (1,495, 54%) of the confirmed measles cases were male. Ages of cases ranged from **less than 1 month to 46 years** old (median age of 2 years). Age groups with the most number of cases were: 1-4 years old (992, 36%), less than 9 months old (695, 25%) and 9-11 months old (259, 9%) (Figure 7).

Figure 7. Confirmed Measles Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (n=2,775)*



Majority (1,942, 70%) of the confirmed measles cases were not vaccinated (Figure 8). Top reasons for non-vaccination of measles-containing vaccine among confirmed cases were: not eligible for vaccination (30%), mother was busy (20%) and child was sick (13%) (Figure 9).

Figure 8. Vaccination Status of Confirmed Measles Cases, Philippines, January 1 to September 29, 2018 (n=2,775)

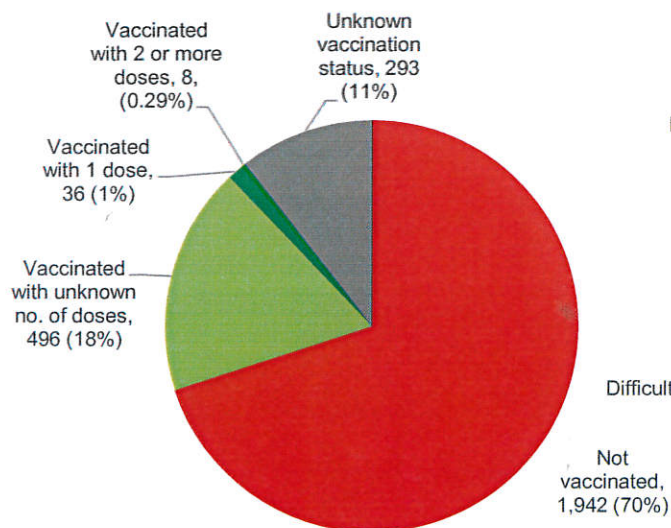
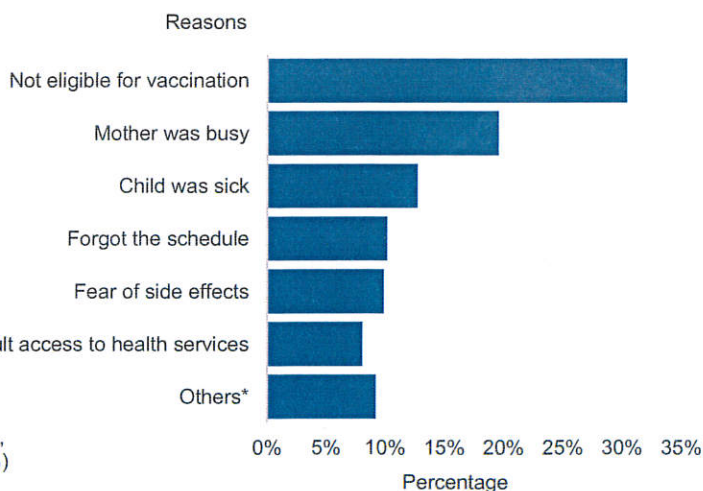


Figure 9. Reasons for Non-vaccination of Measles Vaccine among Confirmed Measles Cases*, Philippines, January 1 to September 29, 2018



*with available data

*other reasons: against belief, moves residence, lack of knowledge, parents refused, war conflict, medical contraindication, history of travel, child was abandoned

Profile of Confirmed Measles Deaths

There were 34 deaths (CFR=1.23%) out of the 2,775 confirmed measles cases. Ages of deaths ranged from **3 months to 24 years** old (median age of 9 months). Age groups of these deaths were: less than 9 months old (15, 44%), 9-11 months old (9, 26%), 1-4 years old (9, 26%), and 20-24 years old (1, 3%). Majority (21, 62%) of the deaths had pneumonia complications. All died in the hospital with 0 to 28 days (median hospital days of 3 days) interval from date of admission to date of death.



Confirmed Rubella Cases

Trend in the Philippines

There were 105 confirmed rubella cases from January 1 to September 29, 2018. The distribution of confirmed rubella cases for 2018 compared to the 3-year average of cases from 2015-2017 is shown in Figure 10.

Geographic Distribution

Most of the confirmed rubella cases were from the following regions: Region XI (23, 22%), Region IVA (14, 13%), Region XII (11, 10%), NCR (10, 10%) and Region I (8, 8%). Confirmed rubella cases in 2018 is 77% lower compared to the same time period in 2017 (451). No deaths were reported (Table 3).

Figure 10. Confirmed Rubella Cases by Morbidity Week, Philippines, January 1 to September 29, 2018 (n=105)

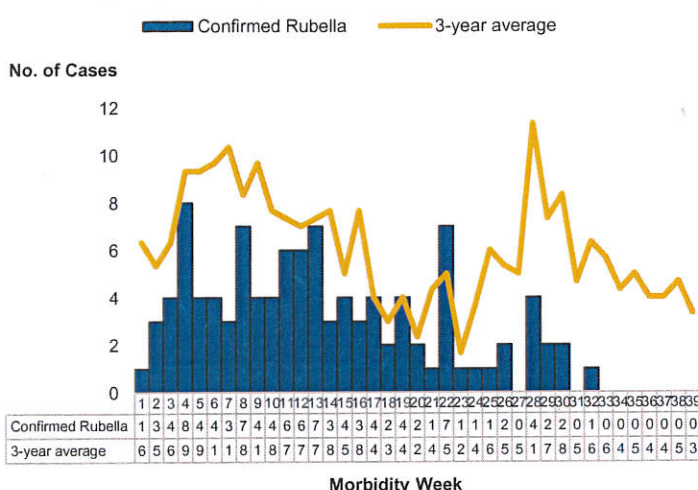


Table 3. Confirmed Rubella Cases by Region, Philippines, January 1 to September 29, 2018 (n=105) vs. January 1 to September 29, 2017

Region	2018		2017		Percent Change
	Cases	Deaths	Cases	Deaths	
PHL	105	0	451	0	↓ 77
I	8	0	34	0	↓ 76
II	2	0	6	0	↓ 67
III	6	0	43	0	↓ 86
IVA	14	0	100	0	↓ 86
MIMAROPA	2	0	3	0	↓ 33
V	1	0	3	0	↓ 67
VI	5	0	102	0	↓ 95
VII	6	0	5	0	↑ 20
VIII	1	0	40	0	↓ 98
IX	3	0	6	0	↓ 50
X	4	0	6	0	↓ 33
XI	23	0	5	0	↑ 360
XII	11	0	3	0	↑ 267
ARMM	1	0	1	0	0
CAR	2	0	58	0	↓ 97
CARAGA	6	0	1	0	↑ 500
NCR	10	0	35	0	↓ 71

Profile of Confirmed Rubella Cases

Majority (57, 54%) of the confirmed rubella cases were male. Ages of cases ranged from less than 1 month to 63 years old (median age of 12 years). Age groups with the most number of cases were: 1-4 years old (20, 19%) and 15-19 years old (17, 16%). There was one (1) reported pregnancy among the confirmed rubella cases, with an age of 26 years old (Figure 11).

Most (50, 48%) of the confirmed rubella cases were vaccinated but with unknown number of doses. Only 2 cases (2%) were reported to have 2 or more doses of measles-containing vaccine which may be MMR (measles-mumps-rubella), the vaccine with rubella component (Figure 12).

Figure 11. Confirmed Rubella Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (n=105)

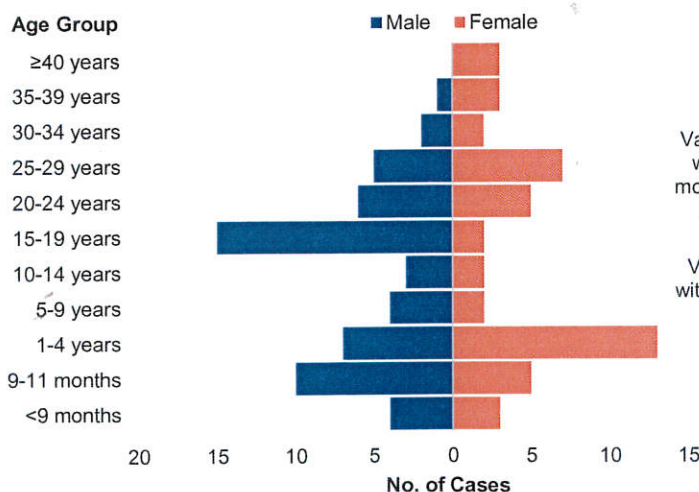
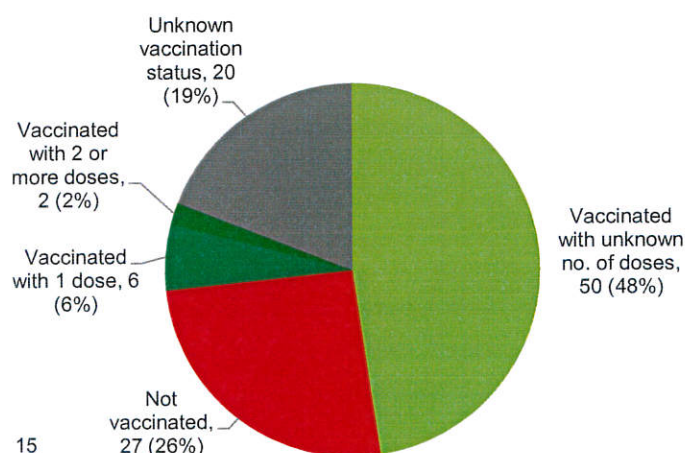


Figure 12. Vaccination Status of Confirmed Rubella Cases, Philippines, January 1 to September 29, 2018 (n=105)



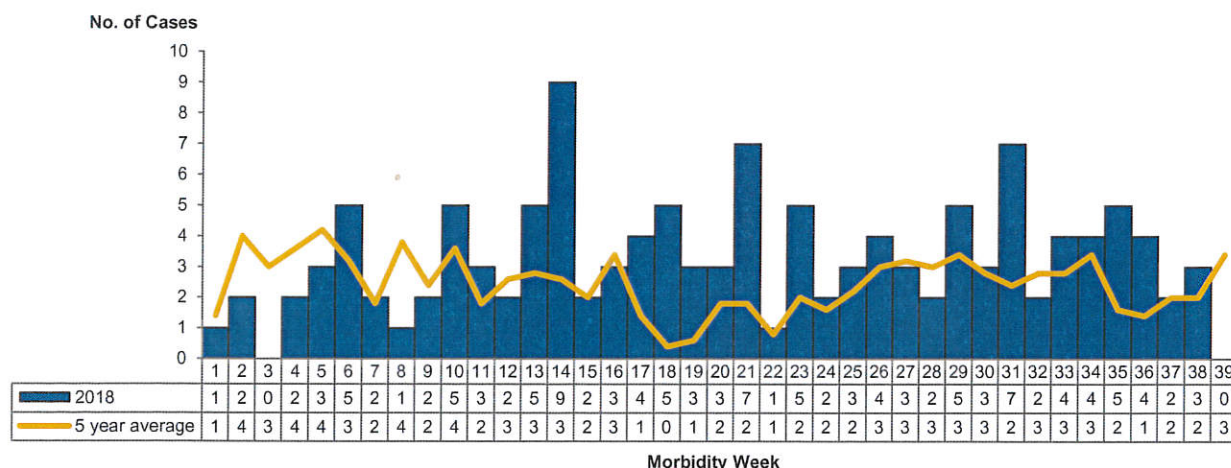


II. DIPHTHERIA

Trend in the Philippines

A total of **126** diphtheria cases were reported nationwide from January 1 to September 29, 2018. The distribution of diphtheria cases for 2018 compared to the 5-year average of cases from 2013 to 2017 is shown below (Figure 13).

Figure 13. Reported Diphtheria Cases by Morbidity Week, Philippines, January 1 to September 29, 2018 (N=126)



Geographic Distribution

There has been a **9%** decrease of diphtheria cases from 139 cases in 2017 to 126 cases in 2018, same time period. Most of the reported diphtheria cases came from NCR (42, 33%) followed by Region 4A (23, 18%) and Region 3 (16, 13%) (Table 5). Forty two (33%) cases were confirmed out of the reported cases. There were six diphtheria clusters identified as of September 2018. A cluster is defined as two or more diphtheria cases from the same barangay reported within four consecutive weeks (Annex A).

Table 5. Reported Diphtheria Cases by Region, Philippines, January 1 to September 29, 2018 (N=126) vs. January 1 to September 29, 2017

REGION	2018		2017		PERCENT CHANGE
	CASES	DEATHS	CASES	DEATHS	
PHILIPPINES	126	30	139	36	↓9
I	1	1	3	0	↓67
II	0	0	1	1	↓100
III	16	4	15	4	↑7
IVA	23	4	18	5	↑28
MIMAROPA	0	0	1	1	↓100
V	8	4	3	1	↑167
VI	2	0	10	3	↓80
VII	2	0	0	0	-
VIII	2	1	0	0	-
IX	3	1	21	8	↓86
X	1	0	1	0	0
XI	5	2	3	2	↑67
XII	1	0	1	0	0
ARMM	12	4	5	1	↑140
CAR	1	0	4	0	↓75
CARAGA	7	0	0	0	-
NCR	42	9	53	10	↓21

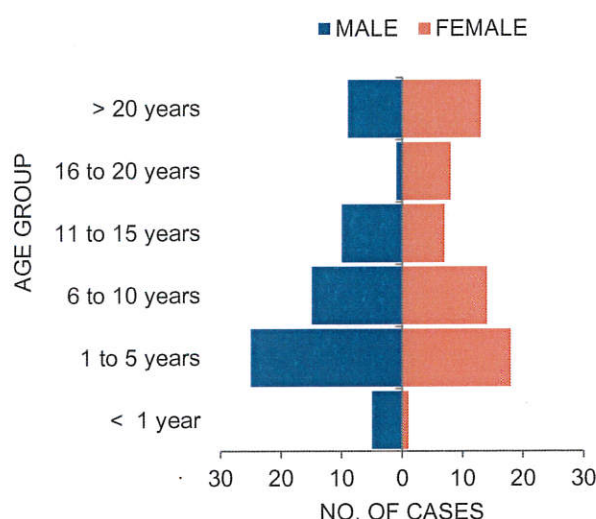


Profile of Cases

A. Suspect cases

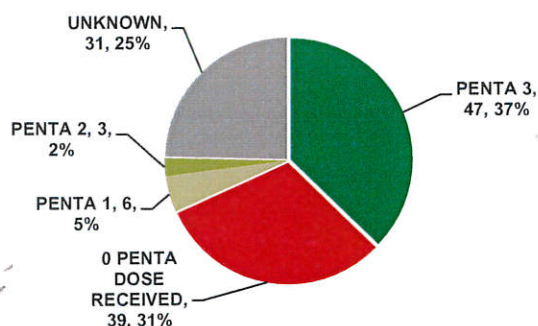
There were **65 males (52%)** and **61 females (48%)** among the reported diphtheria cases. Age of cases ranged from **3 months to 75 years old** (median age of 7 years). Age groups with the most number of cases were **1 - 5 years old (43, 34%)**, followed by 6-10 years old (29, 23%) and more than 20 years old (22, 17%) (Figure 14).

Figure 14. Suspect Diphtheria Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (N=126)



Vaccination status showed that majority (**47,37%**) of the reported cases received **complete 3 primary doses** of the DPT/Pentavalent vaccine. Thirty nine (31%) did not receive a dose of the DPT/Pentavalent vaccine, 31 (25%) had unknown vaccination status, 6 (5%) received 1 dose while 3 (2%) received only 2 doses of the vaccine (Figure 15).

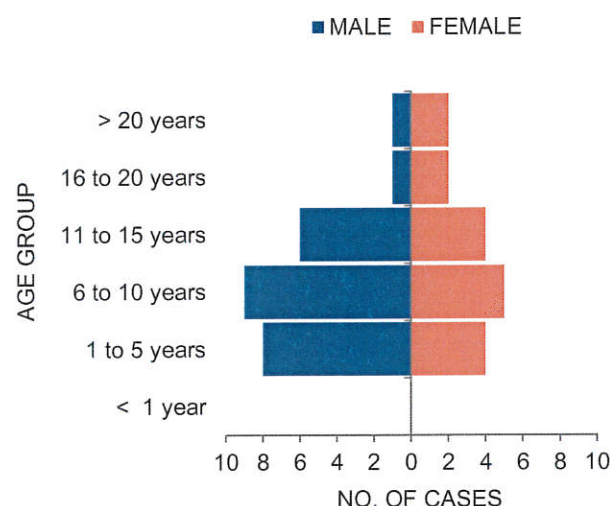
Figure 15. Reported Diphtheria Cases by DPT Dose Received, Philippines, January to September 29, 2018 (N=126)



B. Confirmed cases

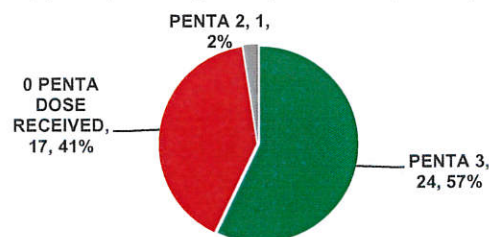
There were **17 females (40%)** and **25 males (60%)** among the confirmed diphtheria cases. Age of cases ranged from 1 to 32 years old (median age of 7 years). Age groups with the most number of cases were **6-10 years (14, 33%)** and **1-5 years (12, 29%)** (Figure 16).

Figure 16. Confirmed Diphtheria Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (n=42)



Majority (24,57%) of the confirmed cases received **complete 3 primary doses** of the DPT/Pentavalent vaccine while 17 or 41% did not receive a dose of the DPT/Pentavalent vaccine. One (2%) had unknown vaccination status (Figure 17).

Figure 17. Confirmed Diphtheria Cases by DPT Dose Received, Philippines, January to September 29, 2018 (n=42)



Profile of Confirmed Diphtheria Deaths

There were ten deaths (CFR=24%) among the 42 confirmed diphtheria cases. Ages of deaths ranged from **1 year to 8 years old** (median age of 5 years). Deaths came from the following age groups : 1-5 years old (5, 50%) and 6-10 years (5, 50%). Majority (6, 60%) did not receive a dose of the DPT/ Pentavalent vaccine while 4 (40%) received complete 3 primary doses of the vaccine.

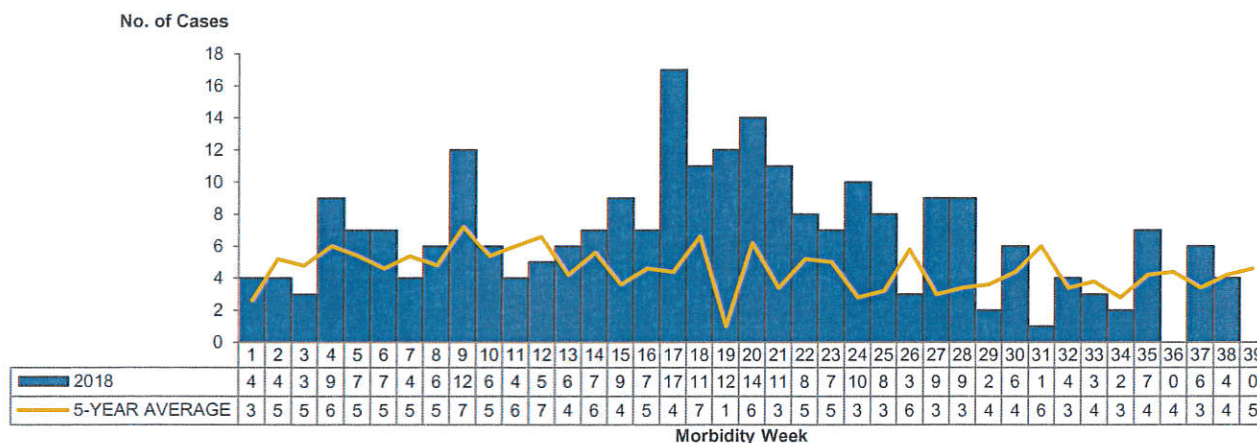


III. PERTUSSIS

Trend in the Philippines

A total of **254** pertussis cases were reported nationwide from January 1 to September 29, 2018. The distribution of pertussis cases for 2018 compared to the 5-year average of cases from 2013 to 2017 is shown below (Figure 18).

Figure 18. Reported Pertussis Cases by Morbidity Week, Philippines, January 1 to September 29, 2018 (N=254)



Geographic Distribution

There has been a **1%** decrease of reported pertussis cases from 256 cases in 2017 to 254 cases in 2018, same time period. Majority of the reported pertussis cases came from NCR (68, 27%) followed by Region III (35, 14%) and Regions IVA and XI (33 each, 13%) (Table 6). Sixty eight (27%) cases were confirmed out of 256 cases. Fourteen pertussis clusters were identified as of September 2018. A cluster is defined as two (2) or more pertussis cases from the same barangay reported within four (4) consecutive weeks (Annex B).

Table 6. Reported Pertussis Cases by Region, Philippines, January 1 to September 29, 2018 (N=254) vs. January 1 to September 29, 2017

REGION	2018		2017		PERCENT CHANGE
	CASES	DEATHS	CASES	DEATHS	
PHILIPPINES	254	9	256	16	↓ 1
I	5	1	3	0	↑ 67
II	4	2	9	1	↓ 56
III	35	1	32	4	↑ 9
IVA	33	1	57	7	↓ 42
MIMAROPA	1	0	1	0	0
V	2	0	3	0	↓ 33
VI	6	0	4	0	↑ 50
VII	23	1	11	0	↑ 109
VIII	2	0	2	0	0
IX	1	0	2	0	↓ 50
X	3	0	7	0	↓ 57
XI	33	2	33	1	0
XII	2	0	4	0	↓ 50
ARMM	5	0	3	0	↑ 67
CAR	25	1	4	0	↑ 525
CARAGA	6	0	7	0	↓ 14
NCR	68	0	74	3	↓ 8

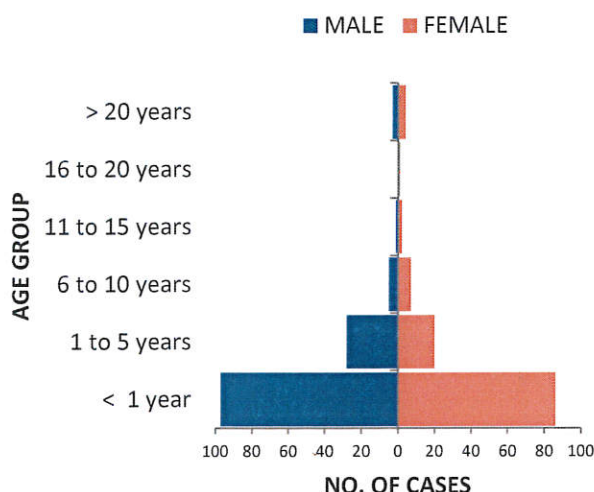


Profile of Cases

A. Suspect cases

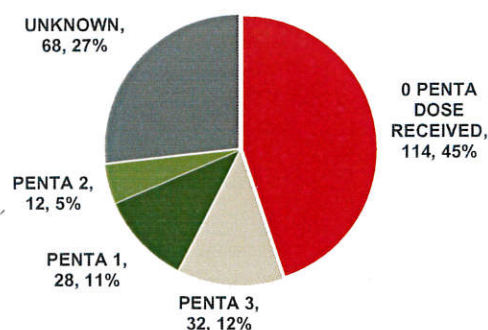
There were **134 (53%) males** and **120 (47%) females** among the reported pertussis cases. Age of cases ranged from **9 days to 77 years old** (median age of 3 months). Age groups with most number of cases were **less than 1 year** (183, 72%), followed by those from the 1 to 5 years (48, 19%), and 6 to 10 years old (12, 5%) group (Figure 19).

Figure 19. Reported Pertussis Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (N=254)



Majority of the reported cases (**114, 45%**) were **not vaccinated** with the DPT/pentavalent vaccine. Sixty eight cases (27%) had unknown vaccination status, 32 (12%) received complete 3 primary doses, 28 (11%) received only 1 dose while the remaining 12 cases (5%) received only 2 doses of the vaccine (Figure 20).

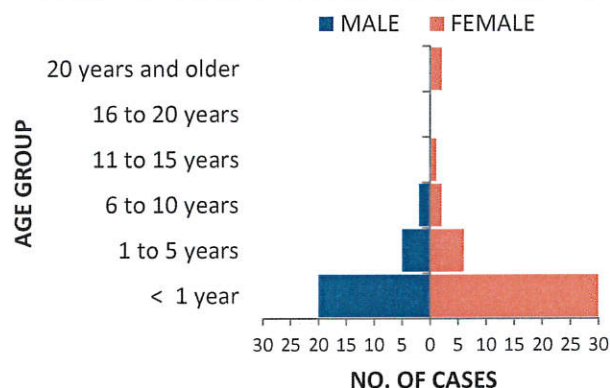
Figure 20. Reported Pertussis Cases by DPT Dose Received, Philippines, January 1 to September 29, 2018 (N=254)



B. Confirmed cases

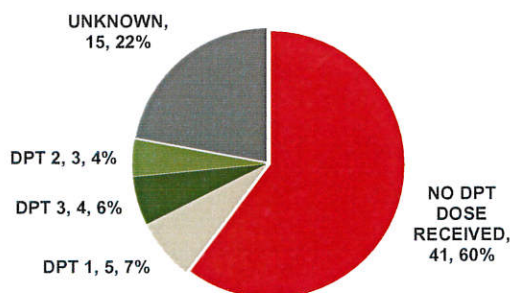
There were **41 females (60%)** and **27 males (40%)** among the confirmed pertussis cases. Age of cases ranged from **13 days to 34 years old** (median age of 2 months). Age groups with the most number of cases were **less than 1 year** (50, 74%), followed by those 1 to 5 years (11, 16%) and 6 to 10 years old (4, 6%) (Figure 21).

Figure 21. Confirmed Pertussis Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (N=68)



Majority (**41, 60%**) of the confirmed cases were **not vaccinated** with the DPT/Pentavalent vaccine. Fifteen (15) or 22% had an unknown vaccinated status, 5 (7%) received 1 dose, 4 (6%) received complete 3 primary doses while the remaining 3 cases (4%) received only 2 doses. (Figure 22).

Figure 22. Confirmed Pertussis Cases by DPT Dose Received, Philippines, January 1 to September 29, 2018 (N=68)



Profile of Confirmed Pertussis Deaths

There were 5 deaths (CFR=7.35%) among the 68 confirmed pertussis cases. Ages of deaths ranged from **1 month to 4 years old** (median age of 2 months). Deaths came from the following age groups : less than 1 year (3, 60%) and 1 – 5 years (2, 40%). Four (80%) of the confirmed pertussis deaths did not receive any dose of the DPT/pentavalent vaccine while 1(20%) had unknown vaccination status.

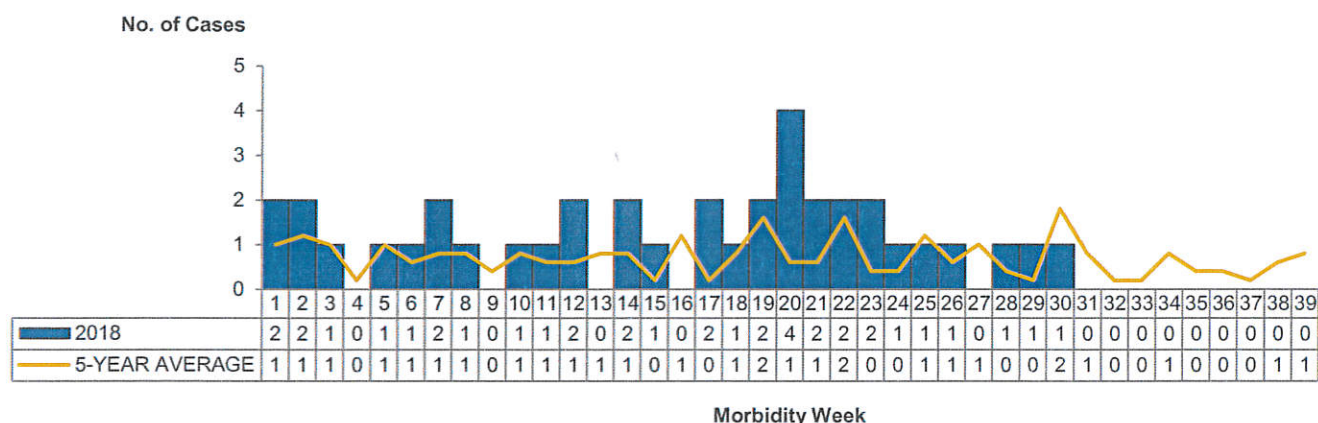


IV. NEONATAL TETANUS

Trend in the Philippines

A total of **forty one (41)** clinically confirmed neonatal tetanus (NT) cases were reported nationwide from January – September 2018. The distribution of neonatal tetanus cases for 2018 compared to the 5-year average of cases from 2013 to 2017 is shown below (Figure 23).

Figure 23. Neonatal Tetanus Cases by Morbidity Week, Philippines, January 1 to September 29, 2018 (N=41)



Geographic Distribution

There has been a **40%** decrease of reported neonatal tetanus cases from 68 cases in 2017 to 41 cases in 2018, same time period. **ARMM** reported the most number of cases (**13, 32%**), followed by Region XII with 8 cases (20%) (Table 7).

Table 7. Neonatal Tetanus Cases by Region, Philippines, January 1 to September 29, 2018 (N=41) vs. January 1 to September 29, 2017

REGION	2018			2017		
	Cases	NT rate (per 1,000 livebirths)	Deaths	Cases	NT rate (per 1,000 livebirths)	Deaths
PHL	41	0	25	68	0	43
I	1	0	0	0	0	0
II	1	0	0	3	0	3
III	1	0	1	4	0	3
IVA	2	0	2	4	0	2
MIMAROPA	0	0	0	8	0	6
V	0	0	0	2	0	2
VI	3	0	3	3	0	2
VII	1	0	1	2	0	2
VIII	2	0	1	2	0	2
IX	3	0	2	1	0	1
X	2	0	0	2	0	0
XI	0	0	0	1	0	0
XII	8	0	4	10	0	6
ARMM	13	0	8	21	0	10
CAR	0	0	0	0	0	0
CARAGA	2	0	2	2	0	2
NCR	2	0	1	3	0	2

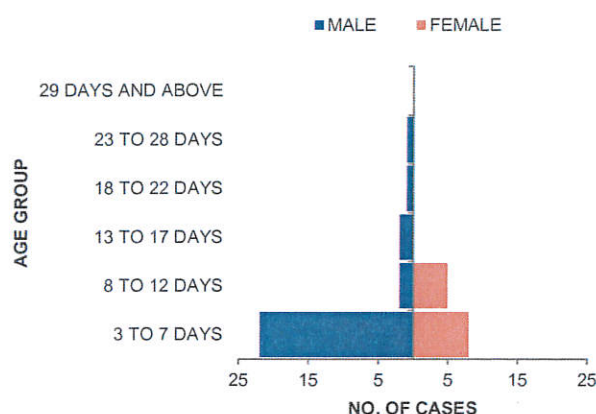


Profile of Cases

A. Age group and Sex

Among the clinically-confirmed NT cases, 28 (68%) were **male**. Age of the cases ranged from **3 to 24 days old** (median age of 6 days). More than half of the cases were from the **3 to 7 day age group** (30, 73 %), followed by cases 8 to 12 days old (7, 17%) (Figure 24).

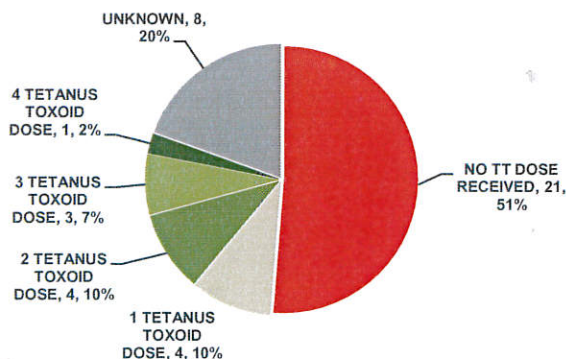
Figure 24. Clinically Confirmed Neonatal Tetanus Cases by Age Group and Sex, Philippines, January 1 to September 29, 2018 (N=41)



B. Vaccination Status

Twenty one (51%) of the mothers of clinically confirmed cases **did not receive any dose of the tetanus toxoid vaccine**, followed by those with unknown vaccination status (8, 20%). Four (10%) received only 1 dose, 4 (10%) received 2 doses, 3 (7%) received 3 doses while the remaining 1 (2%) case received 4 doses (Figure 25).

Figure 25. Clinically Confirmed Neonatal Tetanus Cases by Vaccination Status, Philippines, January 1 to September 29, 2018 (N=41)



C. Delivery Practices among Clinically Confirmed Neonatal Tetanus Cases

In terms of delivery practices, 36 (88%) of the neonatal tetanus cases were delivered at home. Twenty eight (68%) of the cases were attended by a hilot. Fifteen (37%) cases had scissors as the common cord cutting tool used. Umbilical stump treatment of majority of the NT cases was alcohol (22, 54%) (Table 8).

Table 8. Delivery Practices of Clinically Confirmed Neonatal Tetanus Cases, Philippines, January 1 to September 29, 2018 (N=41)

Delivery Practices	No. of Cases	Percentage
Place of Delivery		
Home	36	88%
Others	3	7%
Hospital/Lying-In/Clinic	2	5%
Delivery Attendant		
Hilot	28	68%
Lay Person	5	12%
Midwife	4	10%
Unknown	3	7%
Nurse	1	2%
Cord Cut Tool Used		
Scissors	15	37%
Blade	11	27%
Bamboo	10	24%
Unknown	5	12%
Stump Treatment Used		
Alcohol	22	54%
Unknown	13	32%
None	3	7%
Cooking Oil	1	2%
Powder	1	2%
Water	1	2%

Profile of Neonatal Tetanus Deaths

There were 25 deaths (CFR=61%) among the 41 neonatal tetanus cases. Ages of deaths ranged from 3 days to 18 days old (median age of 6 days). Deaths came from the following age groups : 3-7 days old (18, 72%), 8 – 12 days (4, 16%) and 13-17 days (2, 8%). Majority (16, 64%) did not receive a dose of the tetanus toxoid vaccine. Five (20%) had unknown vaccination status, 2 (8%) received 2 doses while those that received 1 dose, and 3 doses had 1 case each (4%).



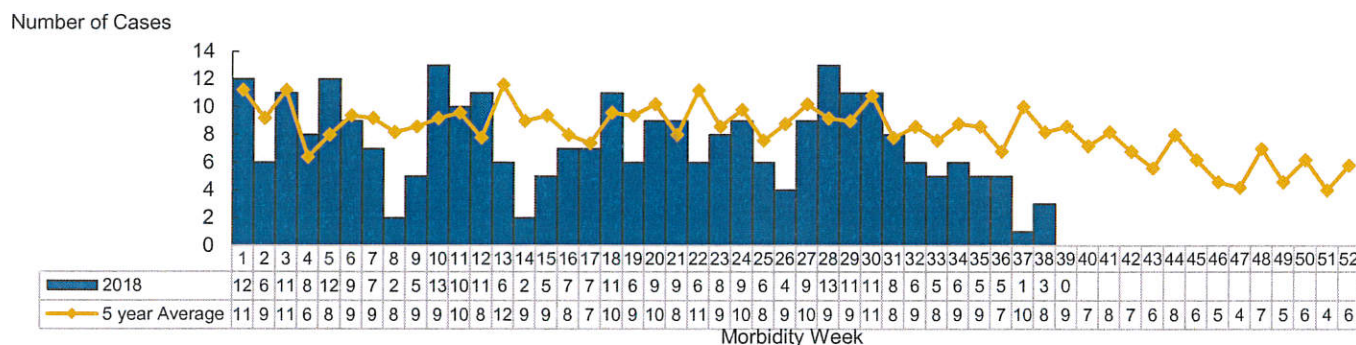
V. ACUTE FLACCID PARALYSIS

AFP surveillance is an essential strategy which aims to look for poliovirus circulation in the community by investigating all possible polio cases. Its role is to identify high risk areas or groups and certify that the Philippines is still polio-free.

Trend in the Philippines

A total of **284 AFP** cases were reported nationwide from January 1 to September 29, 2018. The distribution of AFP cases for 2018 compared to the 5-year average of cases from 2013 to 2017 is shown below (Figure 26).

Figure 26. Trend of Reported AFP Cases (N=284)
Philippines, January 1 to September 29, 2018



Geographic Distribution

A total of 284 AFP cases were reported from January to September 29, 2018; while 336 AFP cases were reported during the same time period last year. Among the 284 reported AFP cases, 165 (58%) were discarded as non-polio AFP, while 83 (29%) are still pending for 60 day follow-up, expert panel review and for official laboratory result. There were 36 (13%) reported cases that did not fit the case definition and were classified as *not AFP*. For this period, the non-polio AFP rate* is 0.73 which nearly reached the target indicator of 1/100,00 children under 15 years old (Table 9).

Table 9. Reported AFP Cases by Region and Classification
January 1 to September 29, 2018 vs. January 1 to September 29, 2017

Region	2018					2017	
	No. of Cases (A)	Discarded as non-polio (B)	Pending (C)	Not AFP (D)	Non-polio AFP Rate (E)	No. of Cases (F)	Non-polio AFP Rate (G)
PHL	284	165	83	36	0.73	336	1.05
I	16	8	5	3	0.75	50	3.15
II	6	3	3	0	0.41	19	1.61
III	42	26	13	3	1.08	39	0.98
IVA	38	21	7	10	0.67	36	0.70
MIMAROPA	4	3	1	0	0.41	5	0.50
V	20	15	3	2	1.02	23	1.25
VI	30	21	9	0	1.31	30	2.17
VII	20	10	9	1	0.60	11	0.69
VIII	15	7	5	3	0.66	10	0.67
IX	11	9	1	1	1.04	11	0.80
X	9	2	0	7	0.18	18	1.25
XI	12	6	4	2	0.53	25	1.50
XII	10	9	1	0	0.84	19	1.33
ARMM	5	2	3	0	0.18	6	0.30
CAR	11	8	3	0	2.00	7	1.29
CARAGA	7	5	2	0	0.83	5	0.68
NCR	28	10	14	4	0.41	22	0.40

Note: *Non-polio AFP Rate is an indicator which measures the sensitivity of surveillance. To meet the minimum level for a polio-free certification, at least one case of non-polio AFP should be detected annually per 100,000 population aged less than 15 years (1/100,000 of children under 15 years old). In endemic regions, to ensure even higher sensitivity, this rate should be two per 100,000. **Cases classified as NOT AFP are excluded from the non-polio AFP rate computation.**

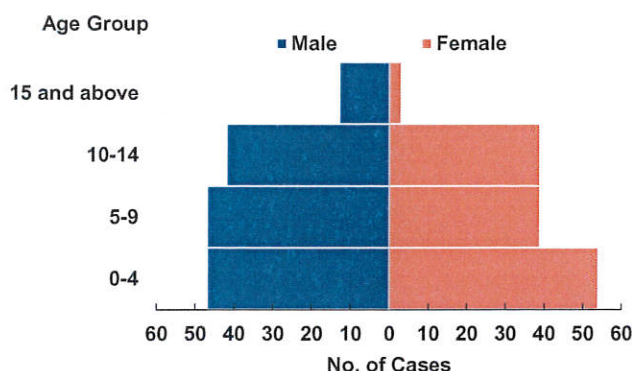


Profile of Cases

A. Age group and Sex

One hundred forty-nine (149,52%) are males. Age ranges from < 1 month to 55 years (median age of 7 years old). One hundred-one (101,36%) of the AFP cases reported belong to 0-4 age group (Figure 27).

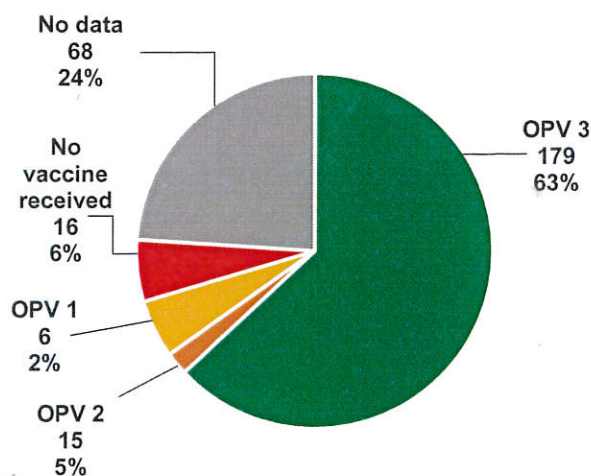
Figure 27. AFP Cases by Sex and Age Group (N=284)
Philippines, January 1 to September 29, 2018



B. Vaccination Status

Among the 284 reported AFP cases, 179 (63%) completed 3 doses of OPV. Sixty-eight (24%) had no data (Figure 28).

Figure 28. Vaccination Status of AFP Cases (N=284)
Philippines, January 1 to September 29, 2018



C. Laboratory Status

There were no isolated wild or vaccine-derived poliovirus from January 1 to September 29. Stool 1 was collected in 250 (88%) AFP cases and stool 2 in 225 (79%) of AFP cases. Three cases had poliovirus Sabin-like type 1 and 3 isolated (Table 10).

Table 10. Laboratory Status of Reported AFP Cases (N=284)
Philippines, January 1 to September 29, 2018

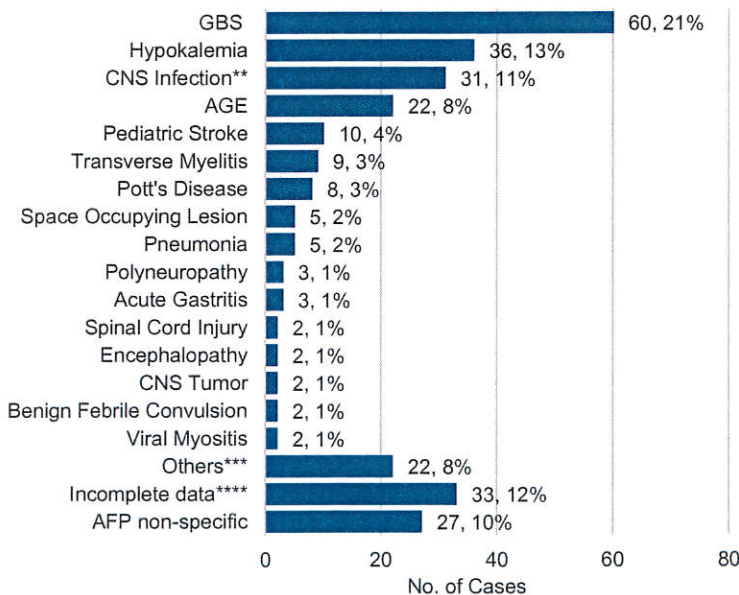
Stool Specimen Result	Stool Specimen 1	Stool Specimen 2
Total	250 88%	225 79%
Negative for poliovirus	208 83%	186 83%
Others		
Poliovirus (Sabin-Like)*	2 1%	3 1%
Non-polio enterovirus (NPEV)	10 4%	8 4%
Pending Lab Results	30 12%	28 12%

* PV Sabin like type 1,3 and Sabin like type 3

D. Differential Diagnosis

The top diagnosis among AFP cases reported were Guillain Barre Syndrome or GBS (60,21%), Hypokalemia* (36,13%) and CNS Infection** (31,11%) (Figure 29).

Diagnosis



*Includes Hypokalemic Periodic Paralysis and Electrolyte Imbalance

**Includes Bacterial Meningitis, TB Meningitis, Aseptic Meningitis

***Others : Acute Infarction, Acute Lower Motor Neuron Disease, Acute Tenosynovitis, Cardiac Arrhythmia, Cerebellar Ataxia, Epilepsy, Ileus, Azotemia, Suspect Leptospirosis, Lower Motor Weakness, Malnutrition, Rheumatic Fever, Juvenile Rheumatoid Arthritis, SVI, TB Arthritis, Urinary Retention, UTI

****For verification



ANNEX A. CLUSTER OF DIPHTHERIA CASES

MORBIDITY WEEK	REGION	PROVINCE	MUNCITY	BARANGAY	CASES	
					CONFIRMED	SUSPECT
14	4A	CAVITE	DASMARIÑAS	LUZVIMINDA I	0	2
14-15	NCR	METRO MANILA	MANILA	BARANGAY 533	2	0
16-17	NCR	METRO MANILA	CALOOCAN CITY	BARANGAY 166	2	0
17-19	ARMM	BASILAN	MALUSO	TOWNSITE (POB.)	0	3
25-26	5	ALBAY	LEGAZPI CITY	BGY. 53 - BONGA (BGY. 48)	0	2
30	NCR	METRO MANILA	QUEZON CITY	GULOD	2	1

ANNEX B. CLUSTER OF PERTUSSIS CASES

MORBIDITY WEEK	REGION	PROVINCE	MUNCITY	BARANGAY	CASES	
					CONFIRMED	SUSPECT
7-10	2	CAGAYAN	BALLESTEROS	FUGU	1	1
15-19	CAR	BENGUET	ITOGON	LOACAN	6	5
16-17	CAR	BENGUET	BOKOD	DACLAN	1	1
16-18	NCR	METRO MANILA	QUEZON CITY	COMMONWEALTH	1	2
18-20	8	LEYTE	PASTRANA	CALSADAHAY	0	2
19-22	NCR	METRO MANILA	QUEZON CITY	TATALON	0	2
19-22	CAR	BAGUIO	BAGUIO CITY	BAKAKENG CENTRAL	3	0
20	NCR	METRO MANILA	QUEZON CITY	HOLY SPIRIT	0	2
20	11	DAVAO DEL SUR	DAVAO CITY	BARANGAY 23-C (POB.)	0	2
22-23	CAR	BENGUET	LA TRINIDAD	BALILI	2	0
23	3	PAMPANGA	ANGELES CITY	CUTCUT	0	2
24-27	11	DAVAO DEL SUR	DAVAO CITY	TALOMO (POB.)	0	3
24	CAR	APAYAO	LUNA	CALABIGAN	2	0
28-31	11	DAVAO DEL SUR	DAVAO CITY	CABANTIAN	0	2