

WEEKLY EPIDEMIOLOGY BULLETIN

NATIONAL EPIDEMIOLOGY UNIT, MINISTRY OF HEALTH & WELLNESS, JAMAICA

Weekly Spotlight

Oral Health



Oral health is a key indicator of overall health, well-being and quality of life. It encompasses a range of diseases and conditions that include dental caries, periodontal (gum) disease, tooth loss, oral cancer, orodental trauma, noma and birth defects such as cleft lip and palate. The Global

Burden of Disease Study 2019 estimated that oral diseases affect close to 3.5 billion people worldwide. According to the International Agency for Research on Cancer, cancers of the lip and oral cavity are among the top 20 most common cancers worldwide, with nearly 180 000 deaths each year.



Most oral diseases and conditions share modifiable risk factors with the leading noncommunicable diseases (cardiovascular diseases, cancer, chronic respiratory diseases and diabetes). These risk factors include tobacco use, alcohol consumption and unhealthy diets high in free sugars, all of which are increasing at the global level.

There is a proven relationship between oral and general health. It is reported, for example, that diabetes is linked with the development and progression of periodontitis. Moreover, there is a causal link between high consumption of sugars and diabetes, obesity and dental caries.

https://www.who.int/health-topics/oral-health#tab=tab_1

EPI WEEK 31



SYNDROMES

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SENTINEL SYNDROMIC SURVEILLANCE

Sentinel Surveillance in Jamaica



A syndromic surveillance system is good for early detection of and response to public health events.

Sentinel surveillance occurs when selected health facilities (sentinel sites) form a network that reports on certain health conditions on a regular basis, for example, weekly. Reporting is mandatory whether or not there are cases to report.

Jamaica's sentinel surveillance system concentrates on visits to sentinel sites for health events and syndromes of national importance which are reported weekly (see pages 2 -4). There are seventy-eight (78) reporting sentinel sites (hospitals and health centres) across Jamaica.

Table showcasing the Timeliness of Weekly Sentinel Surveillance Parish Reports for the Four Most Recent Epidemiological Weeks - 28 to 31 of 2022

Parish health departments submit reports weekly by 3 p.m. on Tuesdays. Reports submitted after 3 p.m. are considered late.

KEY:

Yellow - late submission on Tuesday

Red - late submission after Tuesday

Epi week	Kingston and Saint Andrew	Saint Thomas	Saint Catherine	Portland	Saint Mary	Saint Ann	Trelawny	Saint James	Hanover	Westmoreland	Saint Elizabeth	Manchester	Clarendon
2022													
28	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time
29	On Time	On Time	On Time	On Time	Late (W)	On Time	On Time	On Time	On Time	On Time	On Time	On Time	Late (T)
30	On Time	On Time	On Time	On Time	Late (W)	On Time	On Time	On Time	On Time	On Time	On Time	On Time	late (w)
31	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time	On Time

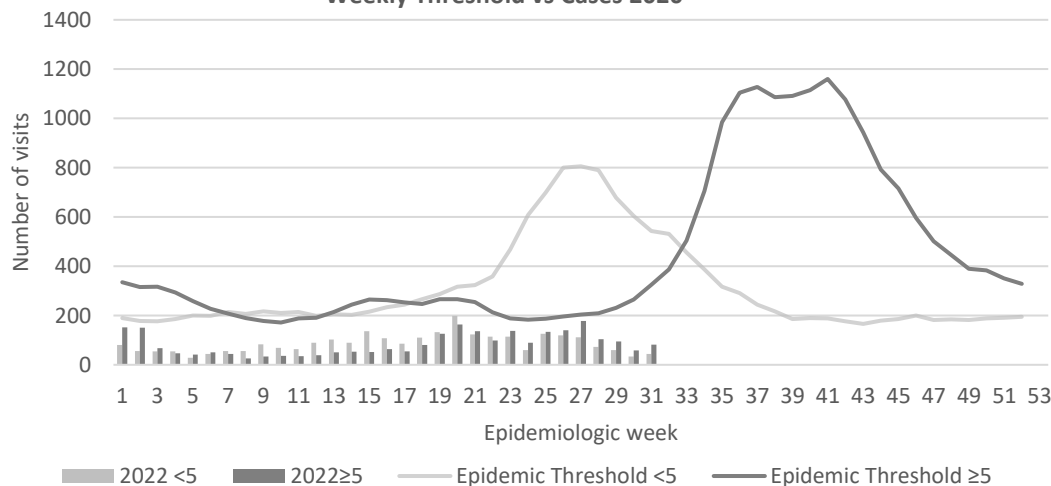
REPORTS FOR SYNDROMIC SURVEILLANCE

UNDIFFERENTIATED FEVER

Temperature of $>38^{\circ}\text{C}$ / 100.4°F (or recent history of fever) with or without an obvious diagnosis or focus of infection.



Weekly Visits to Sentinel Sites for Undifferentiated Fever All ages: Jamaica, Weekly Threshold vs Cases 2020



2 NOTIFICATIONS- All clinical sites



INVESTIGATION REPORTS- Detailed Follow up for all Class One Events



HOSPITAL ACTIVE SURVEILLANCE- 30 sites. Actively pursued



SENTINEL REPORT- 78 sites. Automatic reporting

FEVER AND NEUROLOGICAL

Temperature of $>38^{\circ}\text{C}$ / 100.4°F (or recent history of fever) in a previously healthy person with or without headache and vomiting. The person must also have meningeal irritation, convulsions, altered consciousness, altered sensory manifestations or paralysis (except AFP).

**FEVER AND HAEMORRHAGIC**

Temperature of $>38^{\circ}\text{C}$ / 100.4°F (or recent history of fever) in a previously healthy person presenting with at least one haemorrhagic (bleeding) manifestation with or without jaundice.

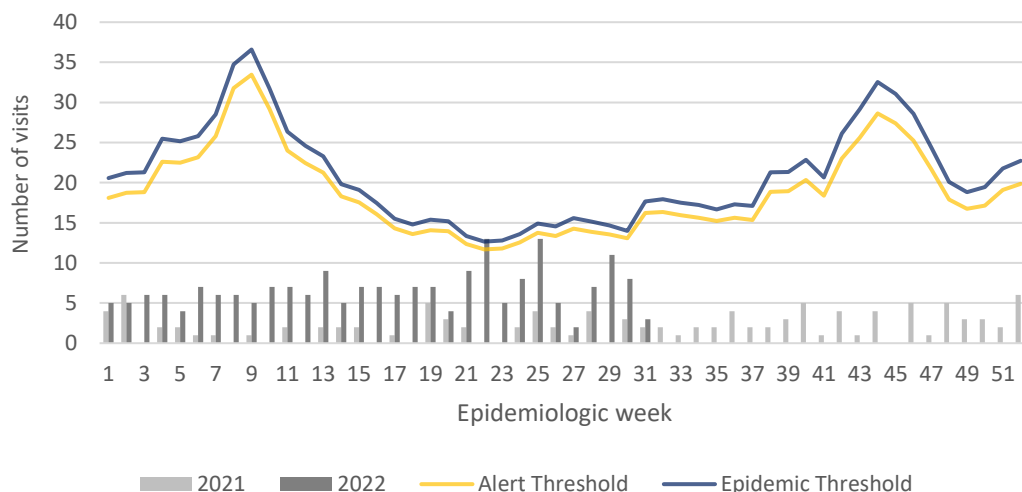
**FEVER AND JAUNDICE**

Temperature of $>38^{\circ}\text{C}$ / 100.4°F (or recent history of fever) in a previously healthy person presenting with jaundice.

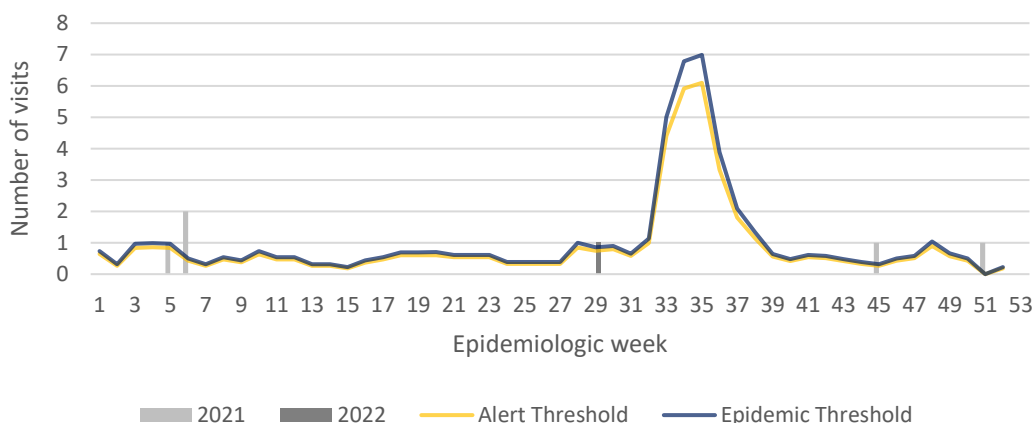
The epidemic threshold is used to confirm the emergence of an epidemic in order to implement control measures. It is calculated using the mean reported cases per week plus 2 standard deviations.



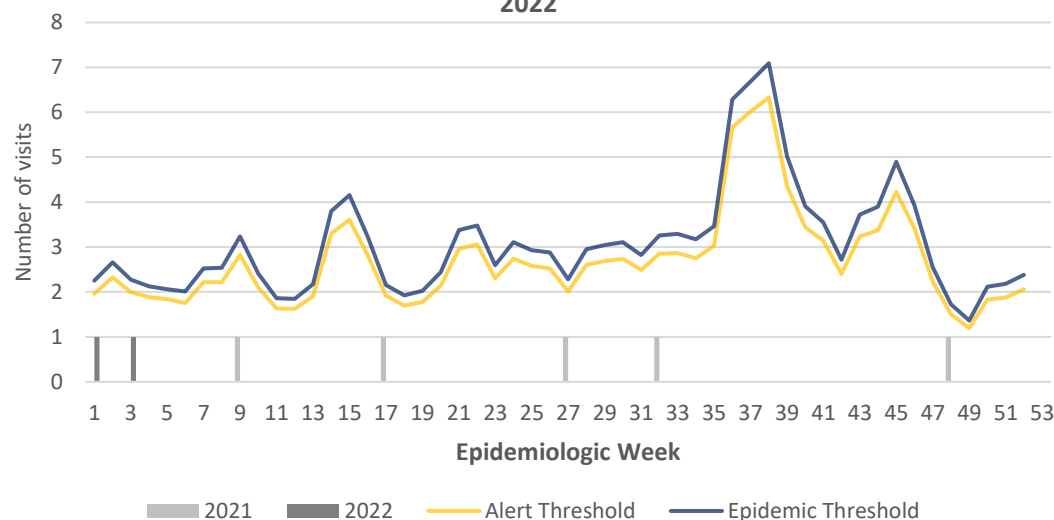
Weekly Visits to Sentinel Sites for Fever and Neurological Symptoms 2021 and 2022 vs. Weekly Threshold: Jamaica



Weekly visits to Sentinel Sites for Fever and Haemorrhagic 2021 and 2022 vs Weekly Threshold; Jamaica



Fever and Jaundice cases: Jamaica, Weekly Threshold vs Cases 2021 and 2022



3 NOTIFICATIONS-
All clinical sites



INVESTIGATION REPORTS- Detailed Follow up for all Class One Events



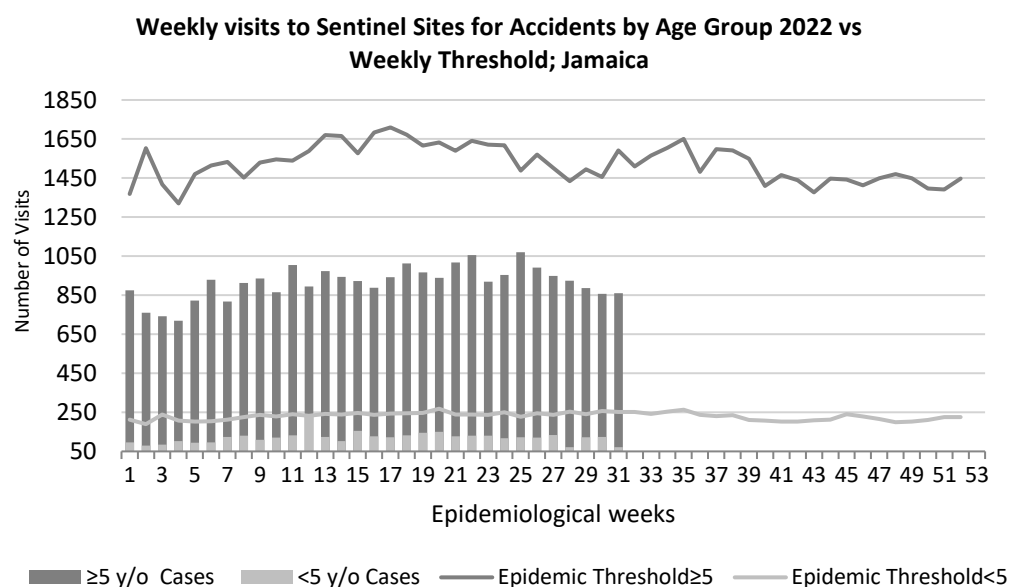
HOSPITAL ACTIVE SURVEILLANCE- 30 sites. Actively pursued



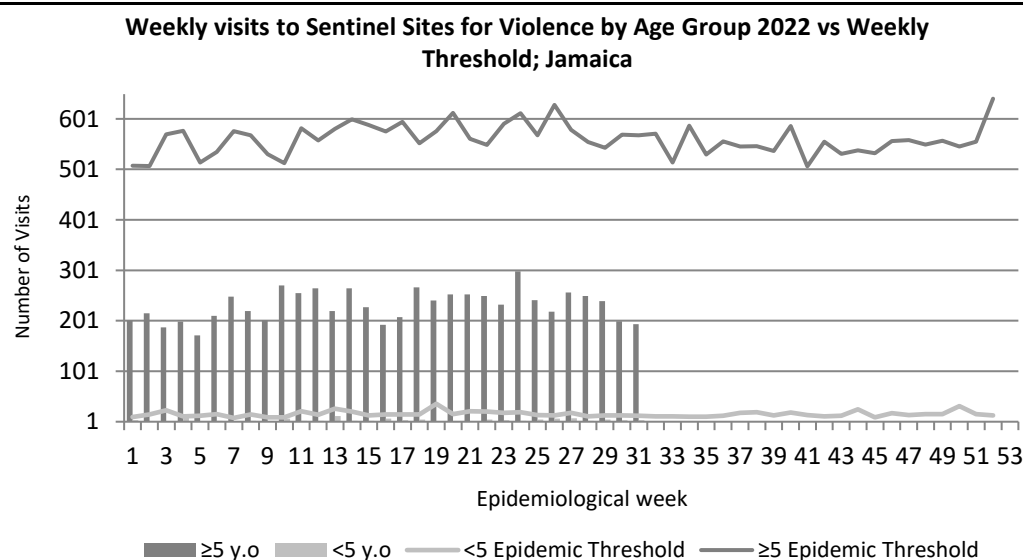
SENTINEL REPORT- 78 sites. Automatic reporting

ACCIDENTS

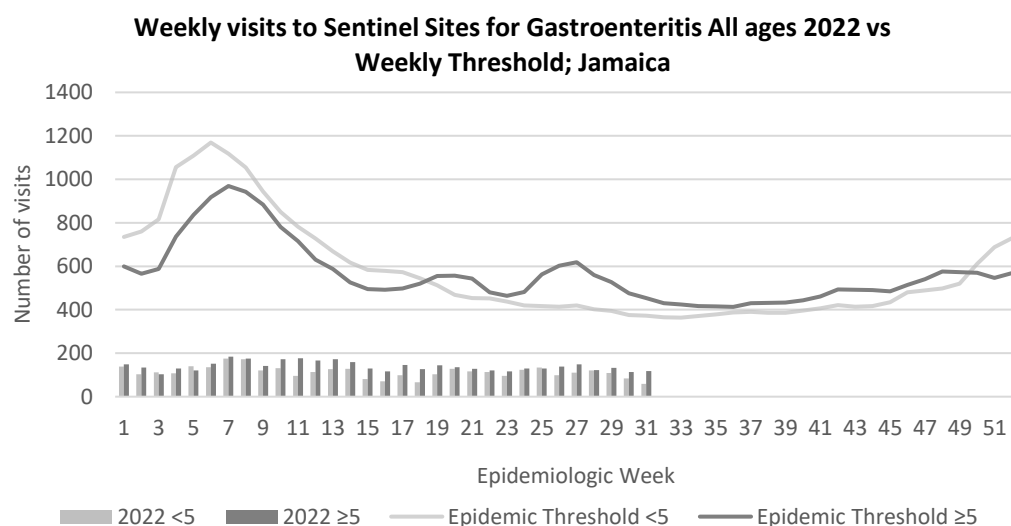
Any injury for which the cause is unintentional, e.g. motor vehicle, falls, burns, etc.

**VIOLENCE**

Any injury for which the cause is intentional, e.g. gunshot wounds, stab wounds, etc.

**GASTROENTERITIS**

Inflammation of the stomach and intestines, typically resulting from bacterial toxins or viral infection and causing vomiting and diarrhoea.



4 NOTIFICATIONS-
All clinical sites



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CLASS ONE NOTIFIABLE EVENTS				Comments
	CLASS 1 EVENTS	Confirmed YTD ^α		
		CURRENT YEAR 2022	PREVIOUS YEAR 2021	
NATIONAL /INTERNATIONAL INTEREST	Accidental Poisoning	122 ^β	114 ^β	AFP Field Guides from WHO indicate that for an effective surveillance system, detection rates for AFP should be 1/100,000 population under 15 years old (6 to 7) cases annually. Pertussis-like syndrome and Tetanus are clinically confirmed classifications. ^γ Dengue Hemorrhagic Fever data include Dengue related deaths;
	Cholera	0	0	
	Dengue Hemorrhagic Fever ^γ	See Dengue page below	See Dengue page below	
	COVID-19 (SARS-CoV-2)	50224	42436	
	Hansen's Disease (Leprosy)	0	0	
	Hepatitis B	8	6	
	Hepatitis C	2	4	
	HIV/AIDS	NA	NA	
	Malaria (Imported)	0	0	
	Meningitis (Clinically confirmed)	10	23	
EXOTIC/ UNUSUAL	Plague	0	0	^δ Figures include all deaths associated with pregnancy reported for the period.
HIGH MORBIDITY/ MORTALITY	Meningococcal Meningitis	0	0	
	Neonatal Tetanus	0	0	
	Typhoid Fever	0	0	
SPECIAL PROGRAMMES	Meningitis H/Flu	0	0	^ε CHIKV IgM positive cases ^θ Zika PCR positive cases ^β Updates made to prior weeks in 2020. ^α Figures are cumulative totals for all epidemiological weeks year to date.
	AFP/Polio	0	0	
	Congenital Rubella Syndrome	0	0	
	Congenital Syphilis	0	0	
	Fever and Rash	Measles	0	
		Rubella	0	
	Maternal Deaths ^δ	36	40	
	Ophthalmia Neonatorum	48	40	
	Pertussis-like syndrome	0	0	
	Rheumatic Fever	0	0	
	Tetanus	0	0	
	Tuberculosis	13	19	
	Yellow Fever	0	0	
	Chikungunya ^ε	0	0	NA- Not Available
	Zika Virus ^θ	0	0	



5 NOTIFICATIONS-
All clinical sites



INVESTIGATION
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NATIONAL SURVEILLANCE UNIT INFLUENZA REPORT

EW 31

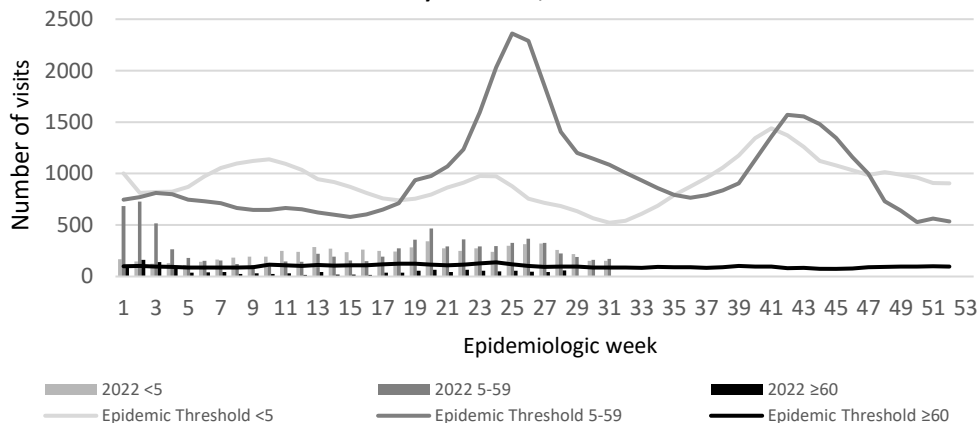
July 31– August 6, 2022 Epidemiological Week 31

	EW 31	YTD
SARI cases	4	268
Total Influenza positive Samples	0	16
Influenza A	0	16
H3N2	0	16
H1N1pdm09	0	0
Not subtyped	0	0
Influenza B	0	0
Parainfluenza	0	0

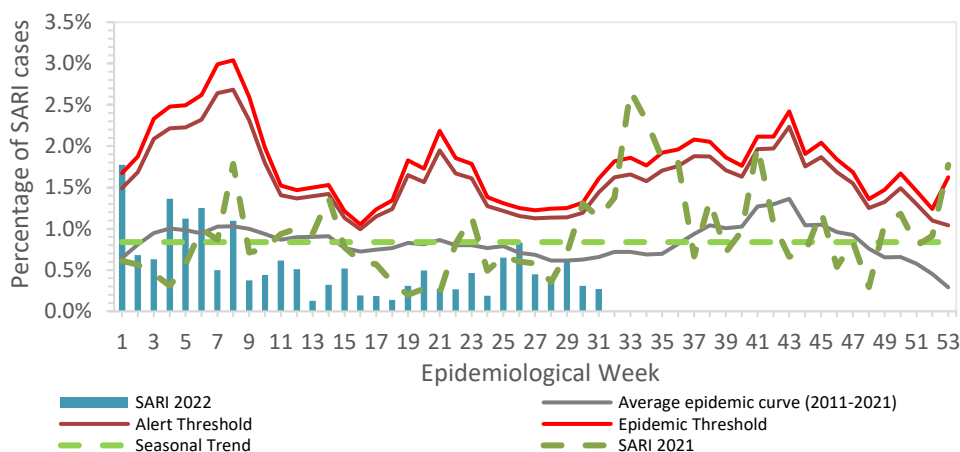
Epi Week Summary

During EW 31, four (4) SARI admissions were reported.

Weekly visits to Sentinel Sites for Influenza-like Illness (ILI) All ages 2022 vs Weekly Threshold; Jamaica



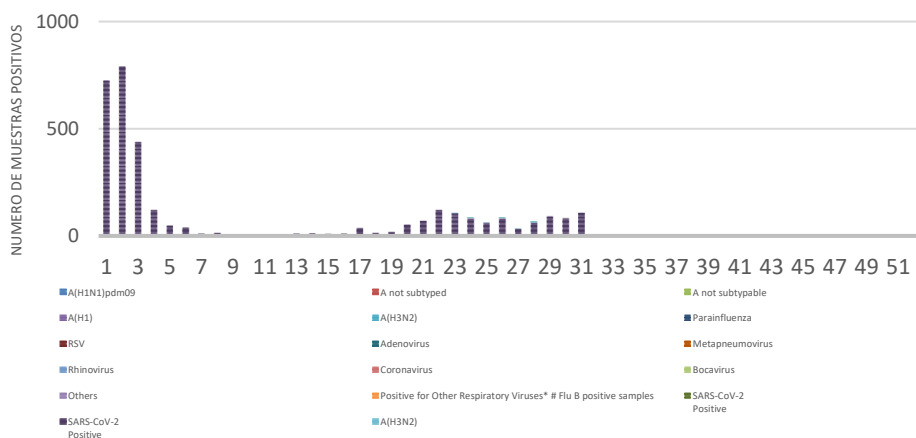
Jamaica: Percentage of Hospital Admissions for Severe Acute Respiratory Illness (SARI 2022) (compared with 2011-2021)



Caribbean Update EW 31

Caribbean: Influenza activity remained low, with the influenza A(H3N2) virus predominance in the sub-region. The Dominican Republic reported increased SARS-CoV-2 activity with SARI hospitalizations below the epidemic thresholds, while in Haiti, elevated SARS-CoV-2 and SARI activity were reported.

DISTRIBUTION OF INFLUENZA AND OTHER RESPIRATORY VIRUSES UNDER SURVEILLANCE BY EW, JAMAICA, 2022



6 NOTIFICATIONS-
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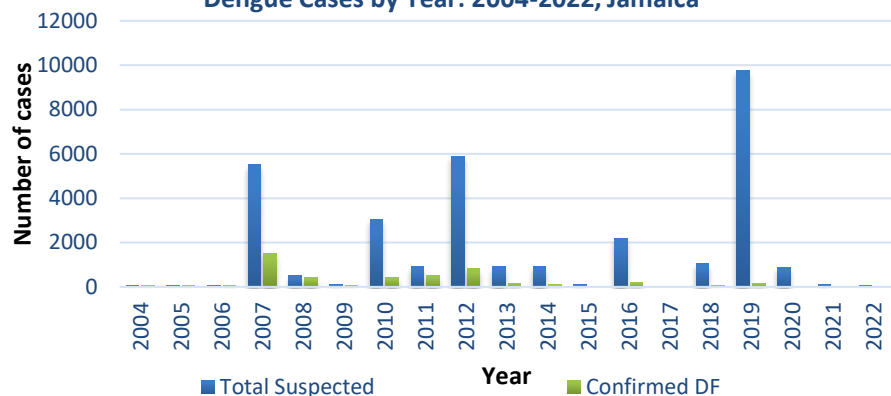
Dengue Bulletin

July 31 – August 6, 2022 Epidemiological Week 31

Epidemiological Week 31



Dengue Cases by Year: 2004-2022, Jamaica



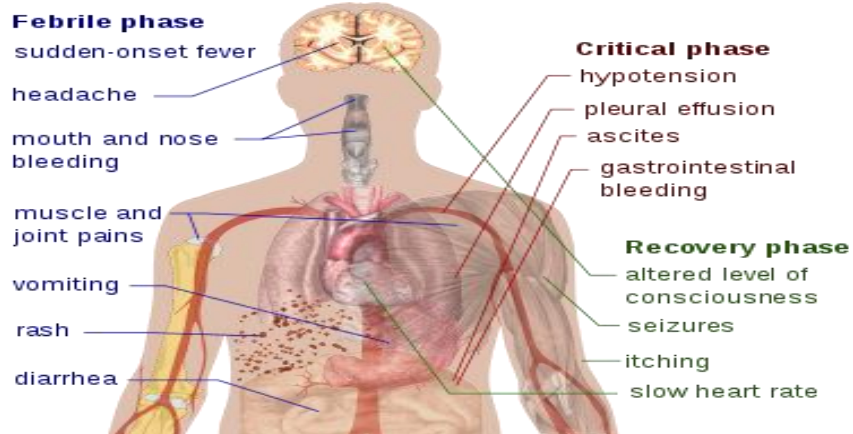
Reported suspected and confirmed dengue with symptom onset in week 31 of 2022

	2022*	
	EW 31	YTD
Total Suspected Dengue Cases	0	41
Lab Confirmed Dengue cases	0	0
CONFIRMED Dengue Related Deaths	0	0

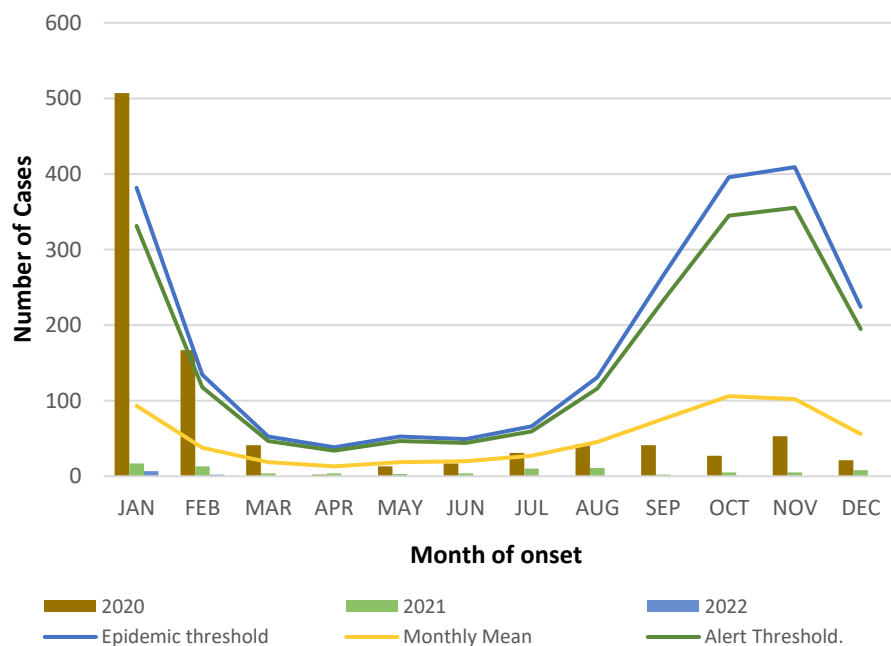
Points to note:

- *Figure as at Aug 12, 2022
- Only PCR positive dengue cases are reported as confirmed.
- IgM positive cases are classified as presumed dengue.

Symptoms of Dengue fever



Suspected dengue cases for 2020, 2021 and 2022 versus monthly mean, alert, and epidemic thresholds (2007-2021)



7 NOTIFICATIONS-
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RESEARCH PAPER

Title: Training Teachers to Help Students to Cope with Post-Traumatic Stress

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Abstract

Introduction. Exposure to trauma in children may result in mental health problems such as post-traumatic stress disorders (PTSD), anxiety disorder, depressive symptoms, dissociation, substance abuse, and delinquent and aggressive behaviors. The children who develop PTSD may later result in perpetrating violence on others. This study aimed to train a group of teachers in a primary school in Kingston, Jamaica with knowledge and skills to help students cope better with traumatic experiences. Research questions addressed were: What percentage of teachers know of the manifestations of and coping skills to manage PTSD prior to training? To what extent will there be a difference in the teachers' knowledge of symptoms and skills to cope with PTSD after training?

Methods. The mixed methods approach was used. All 20 (5 male & 15 female) teachers voluntarily participated in the study. The teachers were pre-tested to measure their knowledge of and ways of coping with PTSD in March 2019, and attended six training sessions, and were post-tested in June 2019.

Results. The results showed that the pre-test scores ($M = 1.95$, $SD = 2.19$) of 35% of the teachers knew some skills in managing PTSD before the training. The post-test scores ($M = 4.00$, $SD = 1.69$) of the 75% of the teachers learnt the skills after the training, while 50% retained their skills three months after the training. A feedback session was also conducted.

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8 NOTIFICATIONS-
All clinical
sites



INVESTIGATION
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