Syndromic Surveillance Pilot Project in Dongcheng District of Beijing China

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Objective

The project has fund donated by World Bank under joint management of WHO and Ministry of Health of P.R.China , The target was try to build up a syndromic surveillance system in Beijing.

Background

Syndromic surveillance had been implemented in Dongcheng District with a view to probing into the feasibility of establishing a syndromic surveillance system in major Chinese cities, sieving syndromic surveillance indicators applicable to the eruption of infectious respiratory tract and digestive tract diseases, and attempting the operating method of data collection in different locations such as hospital and drug stores in Dongcheng of Beijing China.

Methods

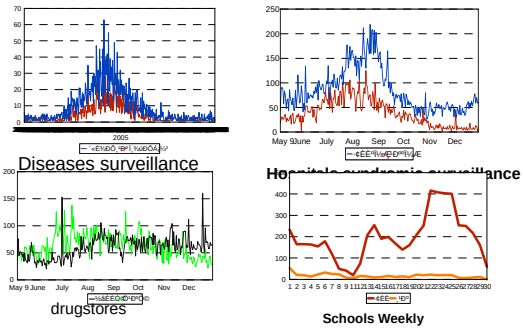
From May to December 2005, syndromic surveillance had been carried out in 11 hospitals, 30 schools and 20 drug stores in the administrative region of Dongcheng District. The indicators of syndromic surveillance in hospitals were the number of patients visiting doctors, and number of patients for fever, diarrhea, or cough. In schools, total number of people at school, number of absent people, number of people absent due to sickness, and number of people with the syndromes of fever, diarrhea or cough were under surveillance. In drug stores, the indicators were the daily sales of 3 categories of medicine(febrifuges, antidiarrheals and antitussives). .

68 unite have send data to project office through fax or internet on daily. A project office has been responsibly to collect those date from schools and hospitals and drugstore and analysis data .

Results

From May to Dec 2005 , national infectious diseases surveillance had been report 6103 infectious diseases cases (including 1624 bacterial dysentery , 3556 infectious diarrhea cases)(chart 1) . syndromic surveillance conducted in 30 schools totally reported 2,500,535 person-times were monitored , including 21,424 absent ,15436 due to illness , of which 5,400 absent due to fever , 436 due to diarrhea , 942 due to cough(chart4).11 hospitals have report 4,000,643 visits, including fever, 20,287(5.1%),cough,14,245(3.5%),diarrhea9,247,(2.3%)(chart2). 20 drugstore have sales totally 42,300 , including febrifuges 14,271(35%) ,antidiarrheals 14,883(34%)and antitussives 13,146(31%)(Chart3)

Integrate Surveillance



Conclusions

Multiple departments have participated in the practical operation of syndromic surveillance system, and carried out collaboration and exercise. Single symptom such as cough, diarrhea and fever is easily confused with common chronic diseases, therefore we think the selection of combined symptoms (fever+cough, fever+diarrhea) will be more sensitive for the early alert of infectious disease and emergent public health events. The clinicians may have slightly different judgment and description on the main complaint of the patients, so the data collected may not be so unified and standard. The questions on whether the judgment and description could be unified, and its influence on syndromic surveillance early alert remains to be probed into.

References

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