

NMC SURVEILLANCE REPORT August 2023

NOTIFIABLE MEDICAL CONDITIONS SURVEILLANCE SYSTEM

Issued by the National Institute for Communicable Diseases

Introduction

This report summarises data from the National Notifiable Medical Conditions Surveillance System (NMCSS) on cases notified in **August 2023**. Additionally, this report includes information on the distribution of case notifications by sources, such as clinical or laboratory notifications, merged cases (**see Appendix no. 3**), and the number of reported deaths. It monitors the use of the electronic NMC Reporting Application (App) for notification, data quality, specifically the completeness and timeliness of clinical diagnosis and notifications over time, and back-captured cases notified in August 2023 (**see Appendices nos. 1 and 3**). Category 4 NMCs, COVID-19, and multi-system inflammatory syndrome (MIS-C) have been excluded from this report.

Highlights

- A total of 8 652 cases were notified in August 2023 and the majority were category 2 conditions.
- There were 397 average active users of the NMC App in August 2023.
- Category 1 cases were reported in median (IQR) of 1 (0, 3) days.

NMC Reporting application

NMC Reporting App is available on both web and mobile platforms.

- Use recommended browsers in order to access NMC reporting App for notifications, searching of cases and reports.
- Register if you have no NMC account and you can reset the password if you have not used the application over 12 months.

NOTES: For any additional information contact the NMC national technical team: NMCAppSupport@nicd.ac.za or NMC hotline 072 621 3805. Please refer to Appendices for NMC data flow, definitions and interpretation of epidemiology data in this report.

DATA IS CONTINUOUSLY CLEANED, DE-DUPLICATED, AND UPDATED, HENCE IS SUBJECT TO CHANGE. ALL NUMBERS REPORTED ARE PRELIMINARY UNLESS OTHERWISE STATED. DATE OF DIAGNOSIS IS USED FOR REPORTING.

NMC data summary, August 2023

A total of n=8932 cases were notified to the NMCSS in August 2023 (see Appendix no.3 for definitions). There were 8 652 current notifications and the majority were category 2 conditions (n= 7 906,91%). The provinces with the highest number of notifications were Gauteng (n=2 243, 26%), KwaZulu-Natal (n=2 180, 25%), and Western Cape (n=1 587, 18%). The provinces with the least number of notifications were North West (n=313, 3.6%), and Northern Cape (n=334, 3.9%). (Figure 1) There were n=280 back captured clinical notifications that were diagnosed between November 2017 and August 2023, and only notified in August 2023. The majority (n=198, 71%) of those notifications were TB cases (see Appendix no.1).

Table 1: Description of NMC notifications by case source

NMC Category	Overall , N = 8 652	Clinical notifications , n = 6277	Laboratory notifications , n = 2146	Merged Cases, n = 229
Category 1	654 (7.6%)	366 (5.8%)	209 (9.7%)	79 (34%)
Category 2	7 906 (91%)	5 911 (94%)	1 856 (86%)	139 (61%)
Category 3	92 (1.1%)	0 (0%)	81 (3.8%)	11 (4.8%)

App use

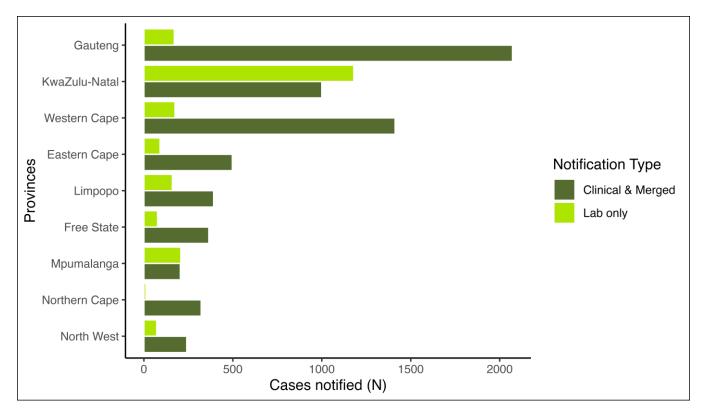


Figure 1: Distribution of notifications by province and notification type

There were n=650 (10.0%) clinical notifications from the private sector (i.e. private hospitals, private practice and mining industry) compared to n=5856 (90%) in the public sector. Clinical notifications using the NMC Reporting Application made up n=6180 (97%) (see Table 2).

Table 2: Clinical notifications notified by provinces, reporting platform, and sector

Province	Overall , N = 6 331	App - Private , n = 638	App - Public , n = 5531	Paper-based - Private , n = 12	Paper-based - Public , n = 150
GP	2 025 (100%)	213 (11%)	1 804 (89%)	1 (<0.1%)	7 (0.3%)
WC	1 377 (100%)	93 (6.8%)	1 208 (88%)	1 (<0.1%)	75 (5.4%)
KZN	934 (100%)	117 (13%)	805 (86%)	0 (0%)	12 (1.3%)
EC	491 (100%)	32 (6.5%)	442 (90%)	0 (0%)	17 (3.5%)
LP	388 (100%)	35 (9.0%)	351 (90%)	2 (0.5%)	0 (0%)
FS	365 (100%)	45 (12%)	314 (86%)	6 (1.6%)	0 (0%)
NC	322 (100%)	12 (3.7%)	303 (94%)	0 (0%)	7 (2.2%)
NW	241 (100%)	47 (20%)	172 (71%)	1 (0.4%)	21 (8.7%)
MP	188 (100%)	44 (23%)	132 (70%)	1 (0.5%)	11 (5.9%)

Table 3: Age distribution by gender, admission status, and patient outcome

		Gende	er		A	dmission State	JS			Vital Statu	s	
Age Category	Female	Male	Unknown	Discharged	Inpatient	Outpatient	Transferred	Unknown	Alive	Deceased	Unknown	Overall
0-4	347	406	3	59	275	212	5	205	555	9	192	756
5-9	142	190	0	20	63	67	1	181	156	2	174	332
10-14	143	402	0	20	60	89	0	376	169	1	375	545
15-19	226	352	0	25	60	175	3	315	270	1	307	578
20-24	260	259	0	26	99	238	5	151	373	6	140	519
25-29	354	356	0	32	131	372	6	169	556	4	150	710
30-34	441	532	0	56	202	492	11	212	788	7	178	973
35-39	403	645	0	53	258	512	9	216	840	11	197	1 048
40-44	306	538	0	39	206	424	10	165	693	14	137	844
45-49	235	426	1	39	181	320	4	118	553	11	98	662
50-54	198	303	0	37	119	270	4	71	436	6	59	501
55-59	117	250	0	28	118	177	1	43	328	7	32	367
60-64	99	178	0	26	88	134	4	25	243	10	24	277
65+	171	207	0	37	134	152	1	54	323	15	40	378
Unknown	58	104	0	3	19	15	0	125	39	2	121	162
Total	3 500	5 148	4	500	2 013	3 649	64	2 426	6 322	106	2 224	8 652

The majority of the notified cases were Males n=5 148 (60%). Notifications in the 35-39-year age group represented the majority n=1 048 (12%) of notified cases (**Table 3**). At the time of notification, n=2 013 (23%) of the notified cases were hospitalised, while n=64 (0.7%) were transferred to another healthcare facility. There were n=106 deaths notified during the reporting period with case fatality rate of 1.2%.

Hospital form completeness of known hospitalised patients with a category 1 notification

Table 4: Completion of hospitalisation form for patients diagnosed with category 1 conditions who were either admitted, discharged, or transferred out

	Disch	narged	Inpatient	Transferred			
Hospital Form Completed	No , n = 35 (61%)	Yes , n = 22 (39%)	Yes , n = 280 (100%)	No , n = 3 (43%)	Yes , n = 4 (57%)		
Acute Flaccid Paralysis	0 (0%)	1 (4.5%)	15 (5.4%)	0 (0%)	1 (25%)		
Cholera*	1 (2.9%)	0 (0%)	8 (2.9%)				
Congenital rubella syndrome	1 (2.9%)	1 (4.5%)	1 (0.4%)				
Food borne illness outbreak	2 (5.7%)	1 (4.5%)	15 (5.4%)				
Malaria	7 (20%)	4 (18%)	40 (14%)				
Measles	4 (11%)	3 (14%)	22 (7.9%)				
Pertussis	20 (57%)	12 (55%)	142 (51%)	2 (67%)	1 (25%)		
Acute rheumatic fever			1 (0.4%)				
Diphtheria			3 (1.1%)				
Enteric fever (typhoid or paratyphoid fever)			8 (2.9%)				
Listeriosis			1 (0.4%)	1 (33%)	1 (25%)		
Meningococcal Disease			19 (6.8%)	0 (0%)	1 (25%)		
Rabies			4 (1.4%)				
Rubella			1 (0.4%)				

^{*}notified on clinical suspicion and not confirmed cases

Distribution of category 1 NMCs by province and number of deaths

Table 5: Distribution of Category 1 NMC by Province

				Р	rovinc	es				Vital St	atus
Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Not Deceased , n(%)	Deceased , n(%)
Acute Flaccid Paralysis	0	0	4	5	3	0	0	0	5	17 (100%)	0 (0%)
Acute rheumatic fever	0	0	0	0	0	0	0	0	1	1 (100%)	0 (0%)
Cholera*	0	0	4	3	0	4	1	0	0	12 (100%)	0 (0%)
Congenital rubella syndrome	0	0	1	1	1	2	0	0	1	6 (100%)	0 (0%)
Diphtheria	0	0	1	2	0	0	0	0	0	3 (100%)	0 (0%)
Enteric fever (typhoid or paratyphoid fever)	0	1	12	4	0	0	0	1	2	20 (100%)	0 (0%)
Food borne illness outbreak	0	0	28	8	3	0	0	0	0	39 (100%)	0 (0%)
Listeriosis	1	0	3	3	0	0	0	0	1	7 (88%)	1 (13%)
Malaria	3	8	35	10	19	28	1	5	17	125 (99%)	1 (0.8%)
Measles	3	1	18	17	11	4	2	2	12	70 (100%)	0 (0%)
Meningococcal Disease	3	1	4	2	1	1	2	1	11	23 (88%)	3 (12%)
Pertussis	26	44	113	30	13	15	3	15	44	297 (98%)	6 (2.0%)
Rabies	1	0	3	4	0	0	0	0	0	6 (75%)	2 (25%)
Rubella	1	1	5	3	0	2	0	2	1	15 (100%)	0 (0%)
Waterborne illness outbreak - UNDEFINED	0	0	0	1	0	0	0	0	0	1 (100%)	0 (0%)

^{*}notified on clinical suspicion and not confirmed cases

The majority of category 1 notifications were for Pertussis n=303 (46%). The majority of Pertussis cases were notified in GP n=113 (37.3%).

Distribution of category 2 NMCs by province and number of deaths

Table 6: Distribution of Category 2 NMC by Province

				Provinces					Vital Status		
Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Not Deceased n(%)	Deceased n(%)
Agricultural or stock remedy poisoning	1	13	33	0	5	0	1	1	4	54 (93%)	4 (6.9%)
Bilharzia (schistosomiasis)	21	3	31	554	133	164	0	0	19	924 (100%)	1 (0.1%)
Congenital syphilis	3	0	4	10	1	1	0	2	7	28 (100%)	0 (0%)
Haemophilus influenzae type B	2	0	2	0	1	0	0	0	2	7 (100%)	0 (0%)
Hepatitis A	21	10	90	90	27	27	5	12	135	416 (100%)	1 (0.2%)
Hepatitis B	26	33	65	626	5	11	6	44	20	833 (100%)	3 (0.4%)
Hepatitis C	0	0	6	0	0	7	0	0	0	13 (100%)	0 (0%)
Hepatitis E	0	0	0	0	0	0	0	0	1	1 (100%)	0 (0%)
Legionellosis	0	0	2	0	0	1	0	1	3	6 (86%)	1 (14%)
Maternal death (pregnancy, childbirth and puerperium)	0	0	1	0	0	0	0	0	0	0 (0%)	1 (100%)
Soil transmitted helminths	0	0	1	0	0	0	0	0	0	1 (100%)	0 (0%)
Tetanus	0	1	0	0	0	0	0	0	0	0 (0%)	1 (100%)
Tuberculosis: extensively drug -resistant (XDR -TB)	0	0	0	1	4	1	0	0	3	9 (100%)	0 (0%)
Tuberculosis: multidrug- resistant (MDR -TB)	23	3	49	50	5	4	2	7	32	171 (98%)	4 (2.3%)
Tuberculosis: extra-pulmonary	61	74	528	115	64	16	37	63	173	1 103 (98%)	28 (2.5%)
Tuberculosis: pulmonary	392	248	1 369	657	270	127	282	160	1 070	4 526 (99%)	49 (1.1%)

The majority of category 2 notifications were for Tuberculosis: pulmonary n=4575 (56%). The majority of Tuberculosis: pulmonary cases were notified in GP n=1369 (29.9%).

The average active users on the NMC App

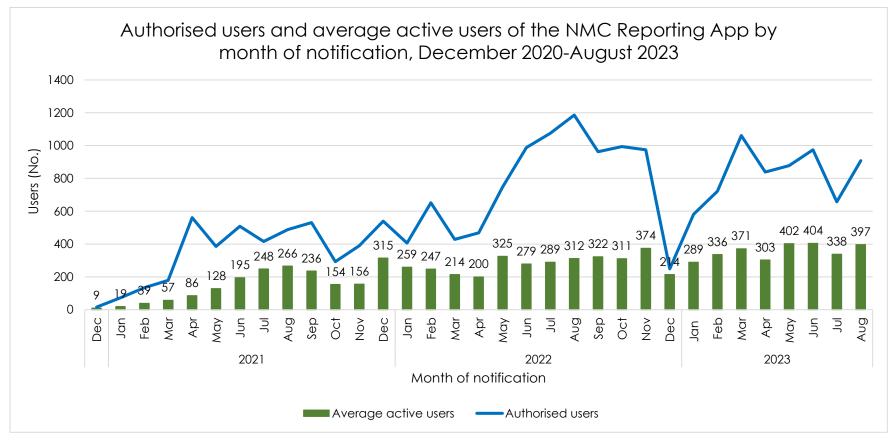


Figure 2: The average active users of the NMC reporting Application, December 2020 to August 2023

Data quality

Completeness refers to the proportion of complete data entries per variable in the dataset among clinical and merged notifications. In August 2023, there was an increase in completeness of date of diagnosis and patient folder number, while demographic details and patient vital status remain complete.

Timeliness is measured by the number of days from the time of diagnosis of the NMC to the time of notification. Overall, it took a median (IQR) of 1 (0, 3) days to report category 1 NMCs.

Table 7: NMC data completeness on both reporting platforms

	App , N = 6 169	Paper-based, N = 162
Folder Number	6 169 (100%)	162 (100%)
First Name	6 169 (100%)	162 (100%)
Surname	6 169 (100%)	162 (100%)
Symptom Onset Date	5 985 (97%)	154 (95%)
Date of Diagnosis	6 169 (100%)	162 (100%)
Outcome	6 169 (100%)	162 (100%)

ID number completeness

Table 8: Length of ID numbers inputted on NMC system

Length of ID number	Android , $N = 2 110^{1}$	Microstrategy/SDW, $N = 2321^{\circ}$	Paper-based, $N = 162^1$	Web , N = 3 686 ¹	iOS , N = 373 ¹
0	752 (36%)	2 297 (99%)	115 (71%)	1 152 (31%)	147 (39%)
5	0 (0%)	0 (0%)	0 (0%)	2 (<0.1%)	0 (0%)
6	0 (0%)	4 (0.2%)	0 (0%)	250 (6.8%)	26 (7.0%)
7	0 (0%)	0 (0%)	0 (0%)	1 (<0.1%)	1 (0.3%)
8	0 (0%)	0 (0%)	0 (0%)	48 (1.3%)	1 (0.3%)
9	0 (0%)	0 (0%)	0 (0%)	12 (0.3%)	2 (0.5%)
10	0 (0%)	0 (0%)	0 (0%)	84 (2.3%)	1 (0.3%)
11	0 (0%)	0 (0%)	0 (0%)	4 (0.1%)	0 (0%)
12	0 (0%)	0 (0%)	0 (0%)	22 (0.6%)	0 (0%)
13	1 358 (64%)	20 (0.9%)	47 (29%)	2 111 (57%)	195 (52%)
Unknown	0	0	0	0	0

¹n (%)

The length of the South African ID number is 13 digits and this is a useful variable to identify duplicate notifications, or to link clinical and laboratory information (making a merged case). Most of the notifications from Microstrategy/SDW n=2 297 (99%) have no ID number.

Symptomatology

Table 9: Symptoms of patients clinically notified and merged with lab notifications to the NMC

Characteristic	Overall , $N = 6506^{1}$	1 , N = 445 ¹	2 , N = 6 050 ¹	3 , N = 11 ¹
Cough	3 094 (48%)	28 (6.3%)	3 066 (51%)	0 (0%)
No Symptoms Reported	1 957 (30%)	171 (38%)	1 778 (29%)	8 (73%)
Loss of weight	1 845 (28%)	1 (0.2%)	1 844 (30%)	0 (0%)
Loss of appetite	1 344 (21%)	6 (1.3%)	1 338 (22%)	0 (0%)
Night Sweats	1 166 (18%)	1 (0.2%)	1 165 (19%)	0 (0%)
Chest pains	1 018 (16%)	0 (0%)	1 018 (17%)	0 (0%)
Fever	919 (14%)	65 (15%)	854 (14%)	0 (0%)
Shortness of breath	560 (8.6%)	0 (0%)	560 (9.3%)	0 (0%)
Weakness	473 (7.3%)	0 (0%)	473 (7.8%)	0 (0%)
Flu like symptoms	444 (6.8%)	5 (1.1%)	439 (7.3%)	0 (0%)
Other	412 (6.3%)	3 (0.7%)	406 (6.7%)	3 (27%)
Muscle weakness	393 (6.0%)	14 (3.1%)	379 (6.3%)	0 (0%)
Paroxysmal coughing	92 (1.4%)	92 (21%)	0 (0%)	0 (0%)
Vomiting	79 (1.2%)	79 (18%)	0 (0%)	0 (0%)
Maculopapular rash	47 (0.7%)	47 (11%)	0 (0%)	0 (0%)
nspirational whoop	36 (0.6%)	36 (8.1%)	0 (0%)	0 (0%)
Acute febrile illness	32 (0.5%)	32 (7.2%)	0 (0%)	0 (0%)
Headache	24 (0.4%)	24 (5.4%)	0 (0%)	0 (0%)
Conjunctivitis	19 (0.3%)	19 (4.3%)	0 (0%)	0 (0%)

Characteristic	Overall , N = 6 506 ¹	1 , N = 445 ¹	2 , N = 6 050 ¹	3 , N = 11 ¹
Tiredness / Body malaise	12 (0.2%)	12 (2.7%)	0 (0%)	0 (0%)
Rice-water stools	1 (<0.1%)	1 (0.2%)	0 (0%)	0 (0%)
Coryza (running nose)	0 (0%)	0 (0%)	0 (0%)	0 (0%)

¹n (%)

Conclusion

The majority of notifications were clinical notifications. The increase in average active users and newly registered users over time is an indication of an increase in the acceptance of the NMC App in the provinces. Application of mandatory fields on the NMC App have improved completeness of clinical details however ID numbers are not well captured among notifications from Microstrategy/SDW.

Recommendations

- We recommend the expedition of NMC App "whitelisting" on the provincial departmental intranet to make the electronic notification platform more accessible to health facilities.
- NMC Trainers to emphasise the importance of timeous reporting of Category 1 and 2 NMCs, in order to ensure real-time availability of data for public health action.
- We encourage both paper-based and app notifiers to fill out the symptom onset.
- We recommend completion of the hospitalisation form for patients who were admitted in hospital.
- We recommend that clinicians edit existing laboratory notifications to improve completeness of notifications.
- We encourage clinicians and data capturers to report the full ID number of patients on laboratory forms and when capturing
 electronically.

Appendices

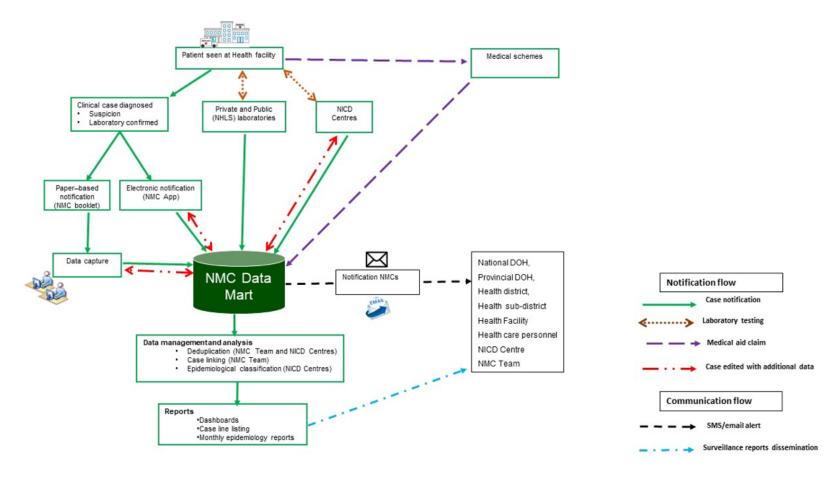
Appendix no.1: Back captured clinical notifications Table 10: Back captured notifications by reporting province

	Overall				P	rovince	9					Case Sou	rce	
Condition	Overall , n = 280	EC , n = 12	FS , n = 2	GP , n = 180	KZN , n = 22	LP , n = 15	MP , n = 3	NC , n = 10	NW , n = 4	WC , n = 32	Android, n = 68	Paper- based, n = 3	Web , n = 206	iOS , n = 3
Enteric fever (typhoid or paratyphoid fever)	1 (0.4%)	0	0	1	0	0	0	0	0	0	0	0	1	0
Hepatitis B	1 (0.4%)	0	0	0	1	0	0	0	0	0	0	0	1	0
Tuberculosis: extensively drug - resistant (XDR -TB)	2 (0.7%)	0	0	0	0	2	0	0	0	0	2	0	0	0
Tuberculosis: multidrug- resistant (MDR -TB)	12 (4.3%)	1	0	7	2	0	0	0	1	1	3	0	9	0
Tuberculosis: extra-pulmonary	66 (24%)	0	0	56	0	2	1	0	2	5	14	0	52	0
Tuberculosis: pulmonary	198 (71%)	11	2	116	19	11	2	10	1	26	49	3	143	3

Table 11: Back captured notifications by reporting case source

	Overall		Case Source		
	N = 280	Android, N = 68	Paper-based, $N = 3$	Web , N = 206	iOS , N = 3
Enteric fever (typhoid or paratyphoid fever)	1 (0.4%)	0	0	1	0
Hepatitis B	1 (0.4%)	0	0	1	0
Tuberculosis: extensively drug -resistant (XDR -TB)	2 (0.7%)	2	0	0	0
Tuberculosis: multidrug- resistant (MDR -TB)	12 (4.3%)	3	0	9	0
Tuberculosis: extra-pulmonary	66 (24%)	14	0	52	0
Tuberculosis: pulmonary	198 (71%)	49	3	143	3

Appendix no.2: Summary of NMCSS Data Flow



Appendix no.3: NMC Categories, and Case Classification definitions

NMC categories

Category 1: NMCs notified by the most rapid means available upon diagnosis, followed by a written or electronic notification to the Department

of Health within 24 hours of diagnosis by healthcare providers, private health laboratories or public health laboratories. These conditions must

be notified based on clinical suspicion irrespective of laboratory confirmation.

Category 2: NMCs notified through a written or an electronic notification to the Department of Health of clinical or laboratory diagnosis within

7 days by healthcare providers, private health laboratories or public health laboratories.

Category 3: NMCs notified through a written or electronic notification to the Department of Health within 7 days of diagnosis by public and

private health laboratories.

Category 4: NMCs notified through a written or electronic notification to the Department of Health within 1 month of diagnosis by public and

private health laboratories.

Case Classification definitions

Clinical case: are cases reported to the NMC by health care providers at facilities, either through completion of a paper form that is faxed,

emailed to National Institute of Communicable Diseases (NICD), or by direct data entry into the NMC application on a PC, laptop or mobile

device. The diagnosis is made by the clinician on the basis of case definitions published on the NICD website.

Laboratory case: are cases that are downloaded into the NMC database directly from the National Health Laboratory Services (NHLS)

laboratory information system. The NMC application applies the case definitions that are published on the NICD website. Private sector data is

being sourced.

Merged cases: are cases where a case was notified by health care provider at the facility (a 'clinical case') AND the laboratory issued a report

with a positive result for the same case (a 'laboratory case). The NMC App is set up to automatically detect and link clinical and laboratory

case notifications. The NICD specialist Centres and NMC data team review all cases and manually link any remaining clinical and laboratory

cases

Notification capture times definitions

Current notification: All cases diagnosed and notified in the current month

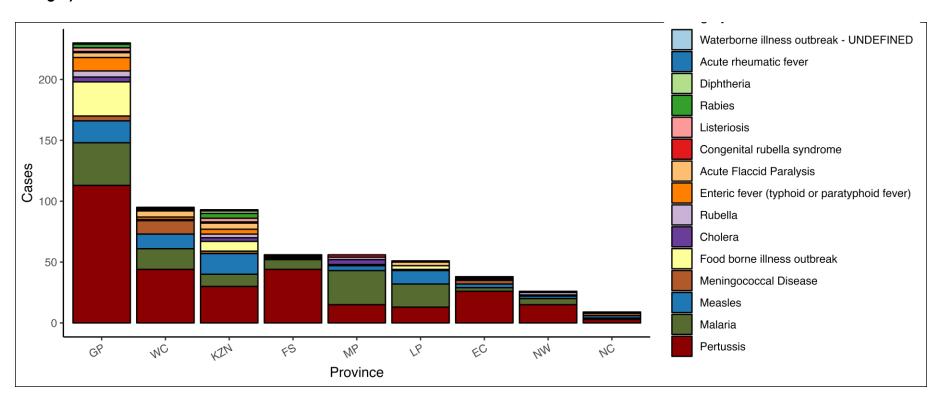
Delayed notification: All cases diagnosed in the last 14 days from the previous month

Back capture notification: All cases diagnosed in previous months and before the last 14 days of the previous month.

Incidence of notified NMC conditions

Methodological note: Population estimates are taken from Stats SA. A multiple linear regression model with natural splines (4 degrees of freedom) to estimate the population for the reporting month was implemented for incidence calculations. Incidence is taken as the number of notifications reported to the NMC after cleaning and deduplication. Case definitions are not strictly applied.

Cases and incidence by province



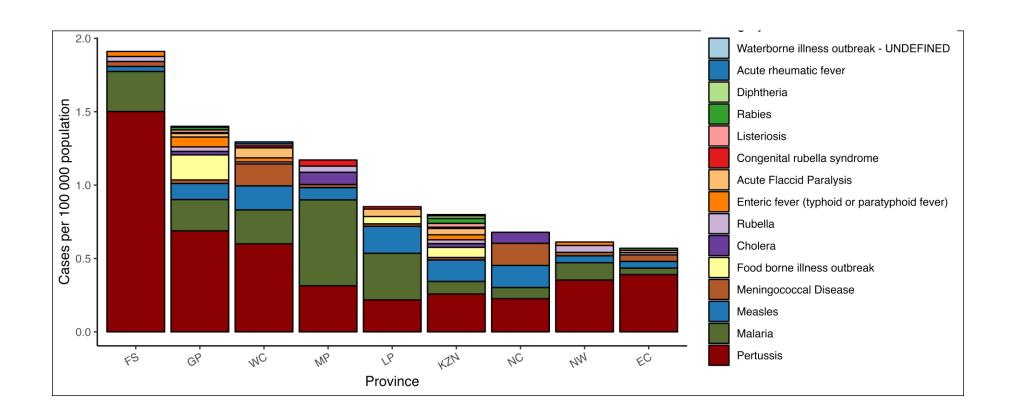
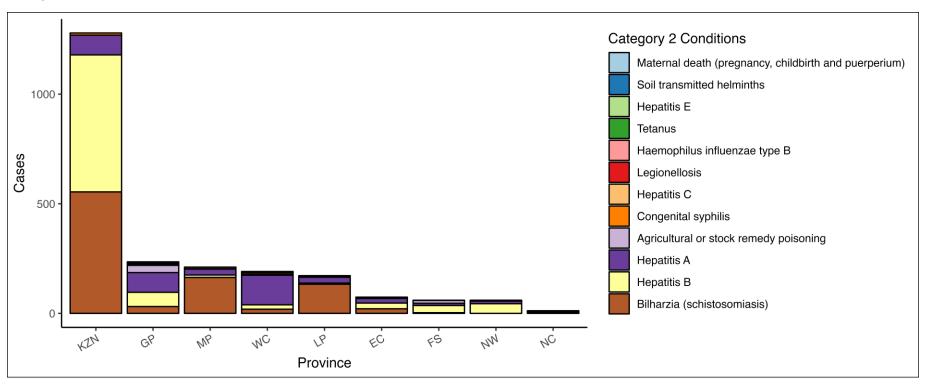


Table 12:

		pop = 23 724		pop = 39 072		l pop = 38 800	FS 2 9	pop = 31 142	MP 4 7	pop = 81 724	LP 5 9	pop = 78 246	EC 6 6	pop = 70 808		pop = 46 673		pop = 326 036
Condition ¹	c ¹	i¹	c ¹	i¹	c 1	i¹	c 1	i¹	c 1	i¹	c 1	i¹	c 1	i¹	c ¹	i¹	c ¹	i¹
Waterborne illness outbreak - UNDEFINED		-		-	1	0.01		-		-		-		-		-		-
Acute rheumatic fever		-	1	0.01		-		-		-		-		-		-		-
Diphtheria	1	0.01		-	2	0.02		-		-		-		-		-		-
Rabies	3	0.02		-	4	0.03		-		-		-	1	0.01		-		-
Listeriosis	3	0.02	1	0.01	3	0.03		-		-		-	1	0.01		-		-
Congenital rubella syndrome	1	0.01	1	0.01	1	0.01		-	2	0.04	1	0.02		-		-		-
Acute Flaccid Paralysis	4	0.02	5	0.07	5	0.04		-		-	3	0.05		-		-		-
Enteric fever (typhoid or paratyphoid fever)	11	0.07	2	0.03	4	0.03	1	0.03		-		-		-	1	0.02		-
Rubella	5	0.03	1	0.01	3	0.03	1	0.03	2	0.04		-	1	0.01	2	0.05		-
Cholera	4	0.02		-	3	0.03		-	4	0.08		-		-		-	1	0.08
Food borne illness outbreak	28	0.17		-	8	0.07		-		-	3	0.05		-		-		-
Meningococcal Disease	4	0.02	11	0.15	2	0.02	1	0.03	1	0.02	1	0.02	3	0.04	1	0.02	2	0.1
Measles	18	0.11	12	0.16	17	0.15	1	0.03	4	0.08	11	0.18	3	0.04	2	0.05	2	0.13
Malaria	35	0.21	17	0.23	10	0.09	8	0.27	28	0.59	19	0.32	3	0.04	5	0.12	1	0.0
Pertussis	113	0.69	44	0.60	30	0.26	44	1.5	15	0.31	13	0.22	26	0.39	15	0.35	3	0.2

¹c = cases, i = incidence



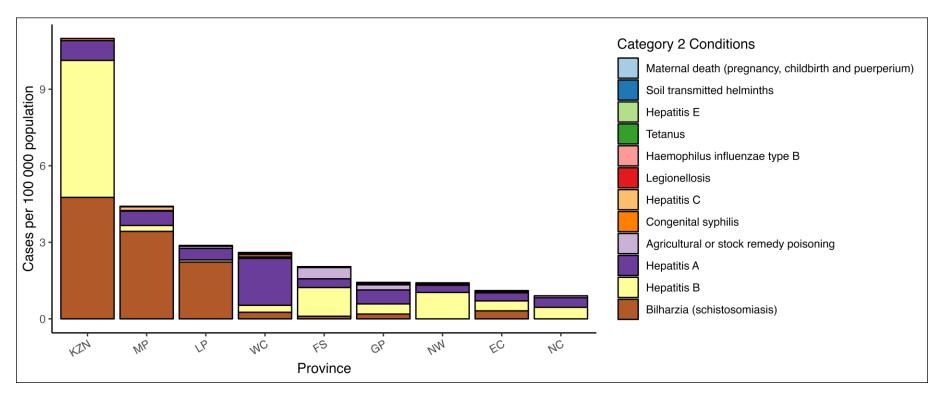


Table 13:

	KZN p 11 63	oop = 8 800		pop = 423 724		pop = 31 724		pop = 9 072		oop = '8 246		pop = 70 808		pop = 31 142		pop = 46 673		pop = 26 036
Condition ¹	c ¹	i l	c 1	i ı	c 1	i ı	c 1	i 1	c 1	i i	c 1	i ¹	c 1	i,	c 1	i,	c 1	i¹
Maternal death (pregnancy, childbirth and puerperium)		-	1	0.01		-		-		-		-		-		-		-
Soil transmitted helminths		-	1	0.01		-		-		-		-		-		-		-
Hepatitis E		-		-		-	1	0.01		-		-		-		-		-
Tetanus		-		-		-		-		-		-	1	0.03		-		-
Haemophilus influenzae type B		-	2	0.01		-	2	0.03	1	0.02	2	0.03		-		-		-
Legionellosis		_	2	0.01	1	0.02	3	0.04		_		_		_	1	0.02		

		pop = 38 800		pop = 23 724		pop = 31 724		pop = 39 072		op = 8 246		pop = 70 808		pop = 31 142		pop = 46 673		pop = 26 036
Condition ¹	C1	i i	C 1	i i	c 1	i,	c 1	i ı	c 1	i 1	c 1	i i	c 1	i,	C 1	i,	C 1	i¹1
Hepatitis C		-	6	0.04	7	0.15		-		-		-		-		-		-
Congenital syphilis	10	0.09	4	0.02	1	0.02	7	0.10	1	0.02	3	0.04		-	2	0.05		-
Agricultural or stock remedy poisoning		-	33	0.20		-	4	0.05	5	0.08	1	0.01	13	0.44	1	0.02	1	0.08
Hepatitis A	90	0.77	90	0.55	27	0.56	135	1.8	27	0.45	21	0.31	10	0.34	12	0.28	5	0.38
Hepatitis B	625	5.4	65	0.40	11	0.23	20	0.27	5	0.08	26	0.39	33	1.1	44	1.0	6	0.45
Bilharzia (schistosomiasis)	554	4.8	31	0.19	164	3.4	19	0.26	133	2.2	21	0.31	3	0.10		-		-

¹c = cases, i = incidence

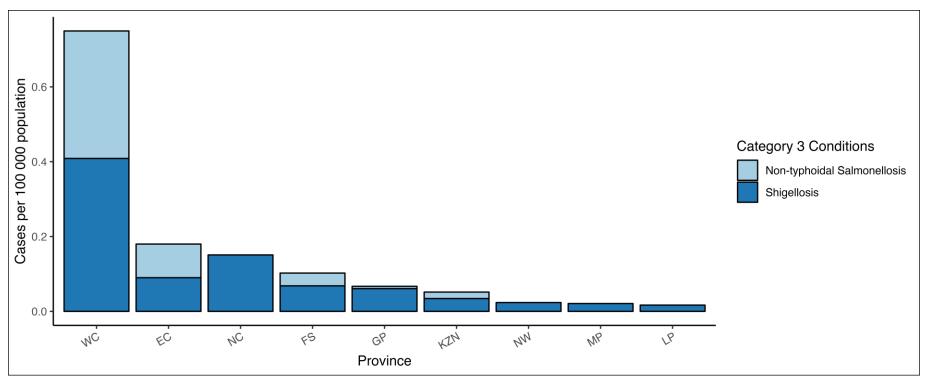
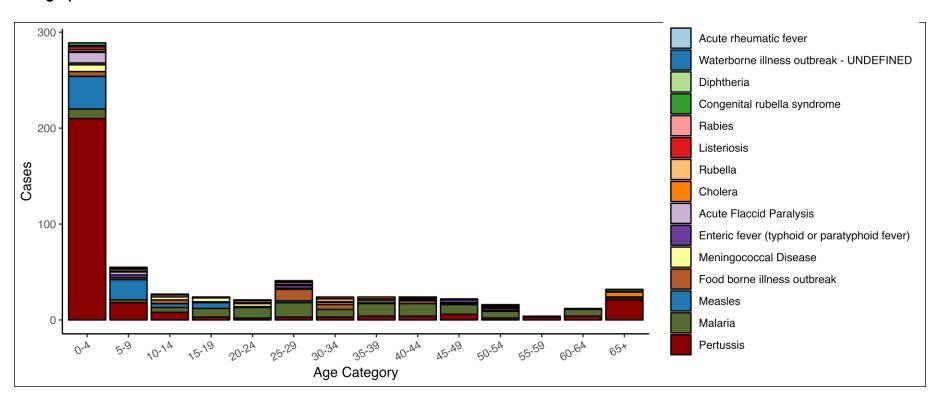


Table 14:

		pop = 39 072		pop = 70 808		pop = 123 724		l pop = 338 800		pop = 31 142		pop = 26 036		pop = 78 246		pop = 31 724		pop = 46 673
Condition ¹	c 1	i 1	c 1	i ı	c ¹	i 1	c 1	i i	c 1	i,	c 1	i	c 1	i ı	c 1	i ¹	c 1	i,
Non-typhoidal Salmonellosis	25	0.34	6	0.09	1	0.01	2	0.02	1	0.03		-		-		-		-
Shigellosis	30	0.41	6	0.09	10	0.06	4	0.03	2	0.07	2	0.15	1	0.02	1	0.02	1	0.02

¹c = cases, i = incidence

Cases and incidence by age category



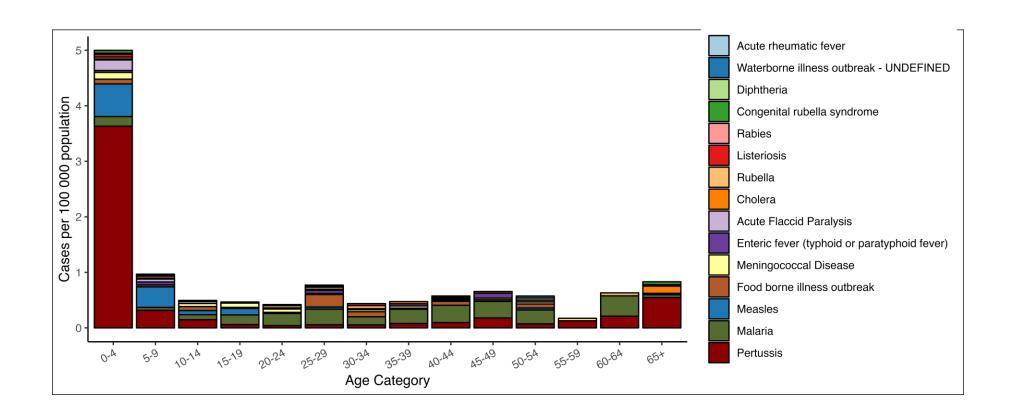
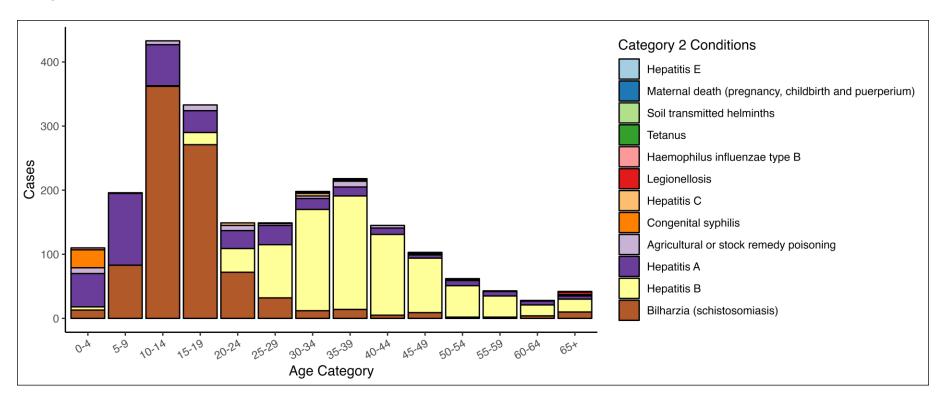


Table 15:

	c)-4		5-9	1	0-14	1	5-19	2	0-24	2	5-29	3	0-34	3	5-39	4	0-44	4	5-49	5	0-54	5	5-59	6	0-64		65+
Condition ¹	c 1	i l	c 1	i 1	c 1	i1	c 1	i,	c 1	i 1	c 1	i¹1	c 1	i 1	c 1	i 1												
Acute rheumatic fever		-	1	0.02		-		-		-		-		-		-		-		-		-		-		-		-
Waterborne illness outbreak - UNDEFINED		-		-		-		-		-		-		-		-		-		-	1	0.04		-		-		-
Diphtheria		-		-		-	1	0.02		-	1	0.02		-		-		-		-		-		-		-		-
Congenital rubella syndrome	3	0.05	1	0.02		-		-		-		-		-		-		-		-		-		-		-	2	0.05
Rabies	1	0.02	2	0.04	1	0.02		-	1	0.02		-		-		-	1	0.02		-		-		-		-		-
Listeriosis	3	0.05		-		-		-		-	1	0.02	2	0.04		-	1	0.02		-		-		-		-	1	0.03
Rubella	2	0.03		-		-		-	2	0.04	2	0.04	3	0.05		-		-		-	1	0.04		-	1	0.05		-
Cholera	1	0.02	1	0.02		-		-		-	1	0.02		-	2	0.04	1	0.02	1	0.03		-		-		-	5	0.13
Acute Flaccid Paralysis	11	0.19	3	0.05	2	0.04		-		-		-		-		-		-		-		-		-		-		-
Enteric fever (typhoid or paratyphoid fever)	2	0.03	3	0.05		-		-	1	0.02	3	0.06	1	0.02	2	0.04		-	3	0.09	1	0.04		-		-		-
Meningococcal Disease	7	0.12		-	3	0.05	4	0.08	3	0.06	1	0.02	2	0.04	2	0.04	1	0.02	1	0.03	1	0.04	1	0.04		-		-
Food borne illness outbreak	5	0.09	2	0.04	4	0.07	1	0.02	1	0.02	12	0.23	5	0.09	1	0.02	3	0.07	1	0.03	2	0.07		-		-		-
Measles	34	0.59	21	0.37	4	0.07	6	0.12		-	2	0.04		-		-		-		-	1	0.04		-		-	1	0.03
Malaria	10	0.17	3	0.05	5	0.09	9	0.17	11	0.22	15	0.28	8	0.15	13	0.26	13	0.31	10	0.30	7	0.25		-	7	0.37	2	0.05
Pertussis	210	3.6	18	0.32	8	0.15	3	0.06	2	0.04	3	0.06	3	0.05	4	0.08	4	0.10	6	0.18	2	0.07	3	0.13	4	0.21	21	0.55

¹c = cases, i = incidence



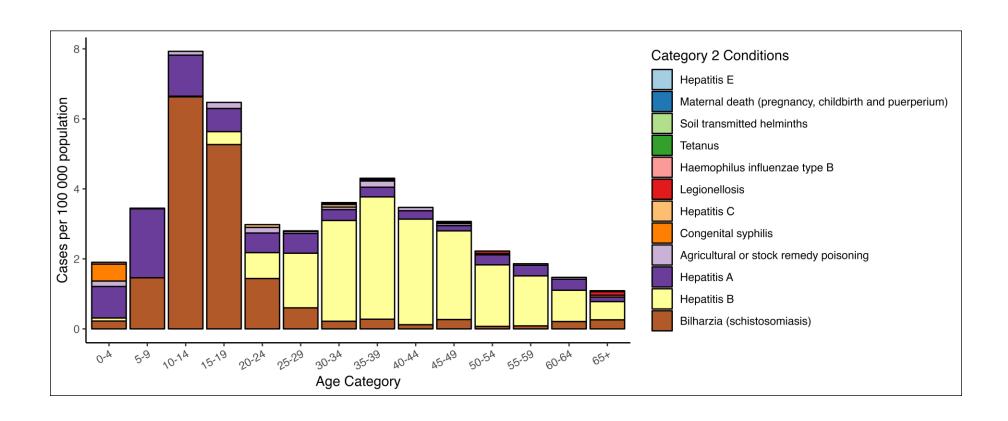
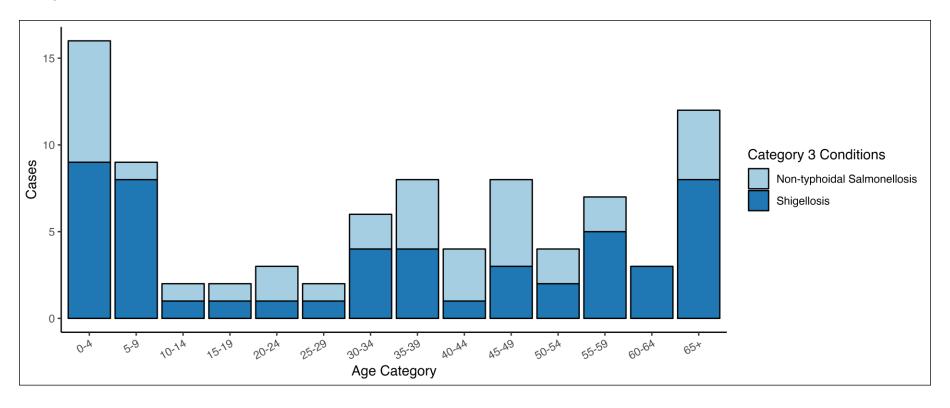


Table 16:

		0-4	5	5-9	10)-14	1.5	5-19	2	0-24	2	5-29	30	-34	35	5-39	40	-44	4	5-49	5	0-54	5	5-59	60	0-64		65+
Condition ¹	c 1	i 1	c 1	i 1	c 1	i l	c 1	i l	c 1	i l	c 1	i 1	c 1	j ì	c 1	i 1	c 1	ľı	c 1	j1								
Hepatitis E		-		-		-		-		-		-		-	1	0.02		-		-		-		-		-		-
Maternal death (pregnancy, childbirth and puerperium)		-		-		-		-		-		-	1	0.02		-		-		-		-		-		-		-
Soil transmitted helminths		-		-		-		-		-		-		-	1	0.02		-		-		-		-		-		-
Tetanus		-		-		-		-		-		-		-		-		-		-		-		-		-	1	0.03
Haemophilus influenzae type B	3	0.05		-		-		-		-		-	2	0.04	1	0.02		-	1	0.03		-		-		-		-
Legionellosis		-		-		-		-		-		-		-	1	0.02		-		-	2	0.07		-		-	4	0.10
Hepatitis C		-		-		-		-	4	0.08	1	0.02	4	0.07		-		-	1	0.03	1	0.04		-		-	2	0.03
Congenital syphilis	28	0.48		-		-		-		-		-		-		-		-		-		-		-		-		-
Agricultural or stock remedy poisoning	9	0.16	1	0.02	6	0.11	9	0.17	8	0.16	3	0.06	4	0.07	9	0.18	4	0.10	2	0.06		-	1	0.04	1	0.05		-
Hepatitis A	52	0.90	112	2.0	64	1.2	34	0.66	28	0.56	30	0.56	17	0.31	14	0.28	10	0.24	5	0.15	8	0.29	7	0.30	6	0.32	5	0.13
Hepatitis B	5	0.09		-	1	0.02	19	0.37	37	0.74	83	1.6	158	2.9	177	3.5	126	3.0	85	2.5	49	1.8	33	1.4	17	0.89	20	0.52
Bilharzia (schistosomiasis)	13	0.22	83	1.5	362	6.6	271	5.3	72	1.4	32	0.60	12	0.22	14	0.28	5	0.12	9	0.27	2	0.07	2	0.09	4	0.21	10	0.26

¹c = cases, i = incidence



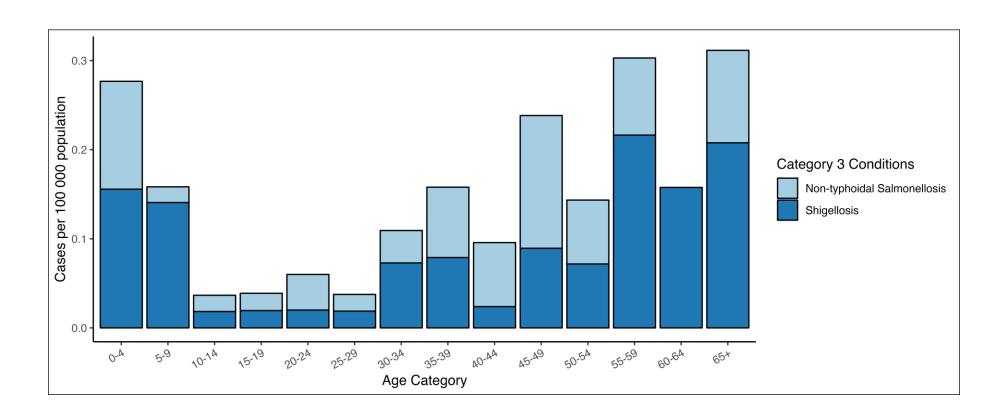


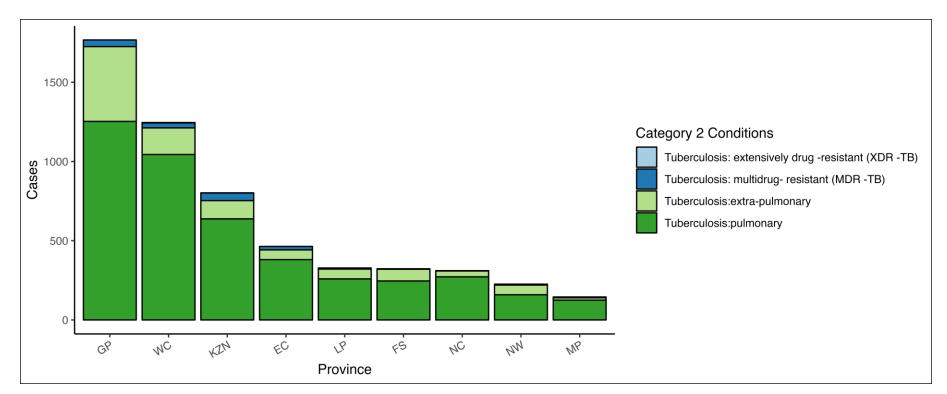
Table 17:

		0-4		5-9	1	0-14	1	5-19	2	0-24	2	5-29	3	0-34	3	5-39	4	0-44	4	5-49	5	0-54	5	5-59	6	0-64		55+
Condition ¹	c 1	i l	c 1	i 1	c 1	i 1	c 1	i 1	c 1	i ¹	c 1	i 1	c 1	i ¹	c 1	i 1	c 1	i 1	c 1	i 1	c 1	i ¹	c 1	i 1	c 1	i ¹	c 1	i ¹
Non-typhoidal Salmonellosis	7	0.12	1	0.02	1	0.02	1	0.02	2	0.04	1	0.02	2	0.04	4	0.08	3	0.07	5	0.15	2	0.07	2	0.09		-	4	0.10
Shigellosis	9	0.16	8	0.14	1	0.02	1	0.02	1	0.02	1	0.02	4	0.07	4	0.08	1	0.02	3	0.09	2	0.07	5	0.22	3	0.16	8	0.21

¹c = cases, i = incidence

Tuberculosis

Cases and Incidence by province



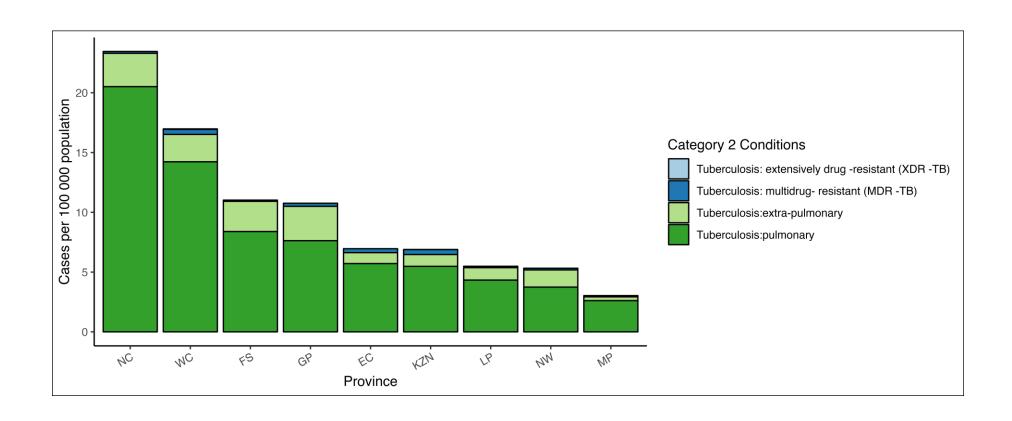
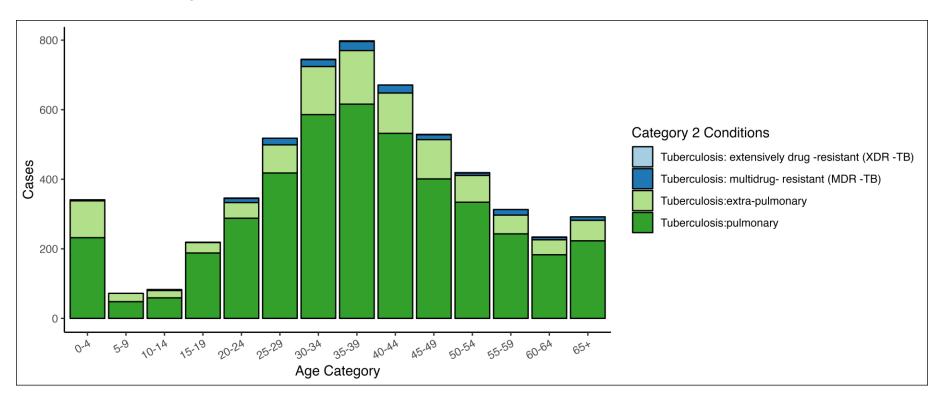


Table 18:

		pop = 23 724		pop = 9 072		pop = 38 800		oop = 0 808		op = 8 246		oop = 1 142		oop = 6 036		pop = 6 673		pop = 1 724
Condition ¹	c ¹	i¹	c ¹	i¹	c 1	i ¹	c 1	i ¹	c 1	i¹	c ¹	i¹	c ¹	i¹	c ¹	i¹	c ¹	i ¹
Tuberculosis: extensively drug -resistant (XDR -TB)		-	3	0.04	1	0.01		-	2	0.03		-		-		-	1	0.02
Tuberculosis: multidrug- resistant (MDR -TB)	42	0.26	31	0.42	48	0.41	22	0.33	5	0.08	3	0.10	2	0.15	6	0.14	4	0.08
Tuberculosis: extra- pulmonary	472	2.9	168	2.3	115	0.99	61	0.91	62	1.0	74	2.5	37	2.8	61	1.4	15	0.31
Tuberculosis: pulmonary		7.6		14	638	5.5	381	5.7	259	4.3	246	8.4	272	21	159	3.7	125	2.6

¹c = cases, i = incidence

Cases and incidence by Age



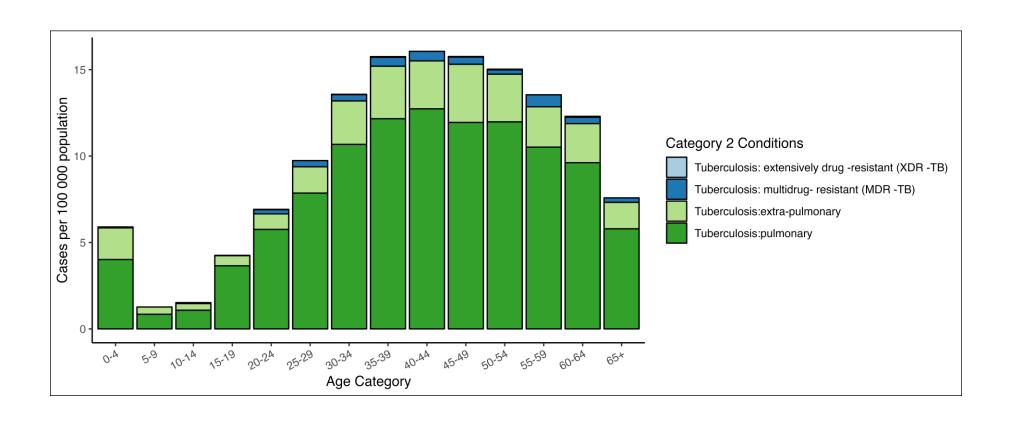


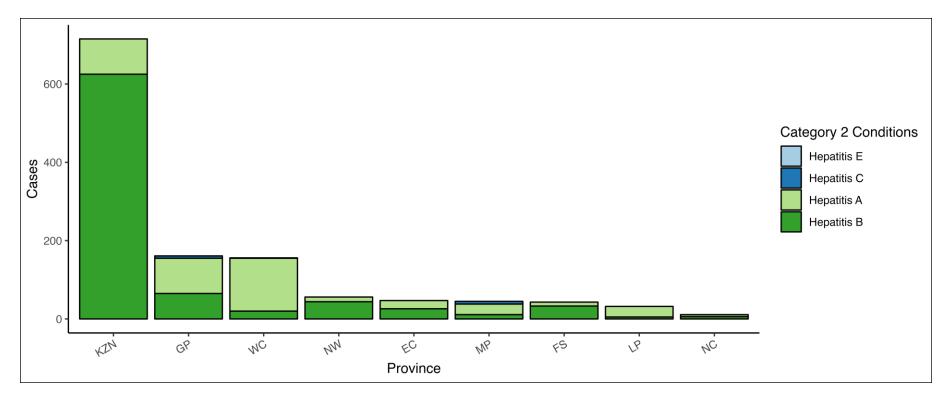
Table 19:

	0)-4		5-9	1	0-14	15	5-19	20)-24	25	5-29	30)-34	35	5-39	40	-44	45	5-49	50	0-54	55	-59	60	0-64	6	5+
Condition ¹	c 1	i i	c 1	i 1	c 1	i 1	c 1	i 1	c 1	i l	C 1	i 1	c 1	j 1	c 1	iı	c 1	i 1	c 1	j ì	C 1	i,						
Tuberculosis: extensively drug -resistant (XDR -TB)		-		-		-		-	1	0.02		-	1	0.02	2	0.04		-	1	0.03	1	0.04		-	1	0.05		-
Tuberculosis: multidrug- resistant (MDR -TB)	3	0.05		-	3	0.05	1	0.02	12	0.24	19	0.36	20	0.36	26	0.51	23	0.55	14	0.42	7	0.25	16	0.69	7	0.37	10	0.26
Tuberculosis: extra- pulmonary	106	1.8	24	0.42	21	0.38	30	0.58	45	0.90	81	1.5	138	2.5	154	3.0	116	2.8	113	3.4	77	2.8	54	2.3	43	2.3	59	1.5
Tuberculosis: pulmonary	232	4.0	48	0.84	59	1.1	188	3.7	288	5.8	418	7.9	586	11	616	12	532	13	401	12	334	12	243	11	183	9.6	223	5.8

¹c = cases, i = incidence

Hepatitis

Cases and incidence by Province



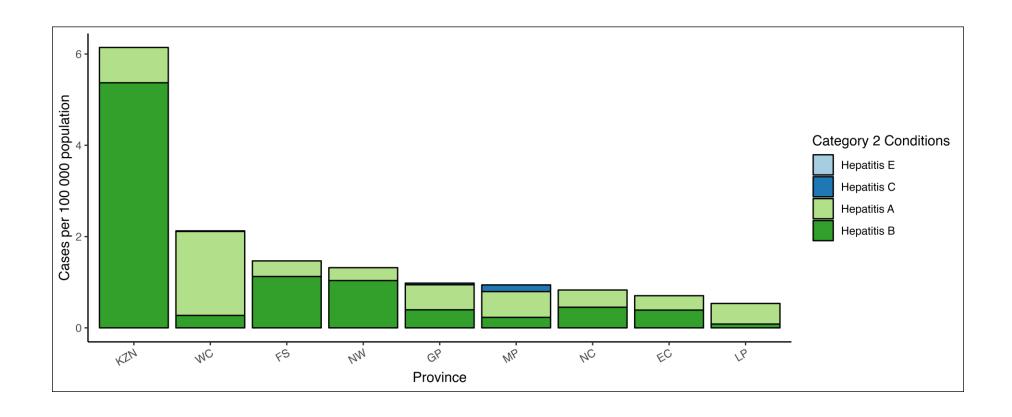
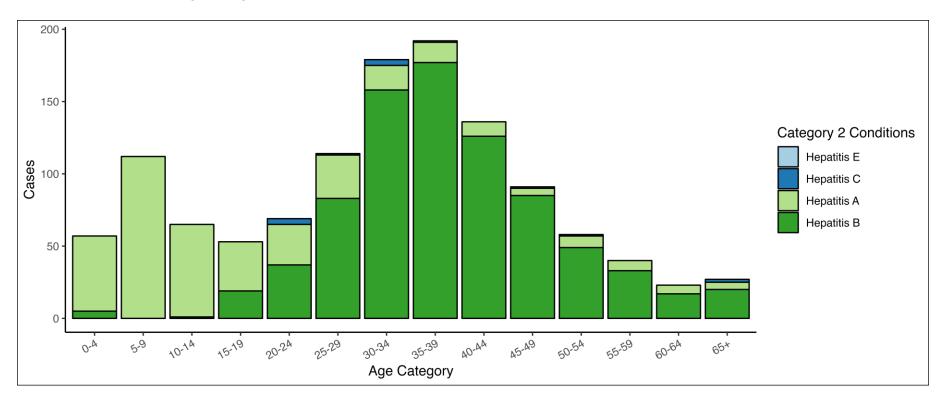


Table 20:

	KZN pop = 638	11 800		= 16 3 724		= 7 7 072	NW pop	= 4 6 673	11-	= 6 70 808	MP pop	= 4 31 724		: 2 1 142		5 B 246	NC pop 32	= 1
Condition ¹	c ¹	i¹	c 1	i¹	c ¹	i ¹	c ¹	i ¹	c ¹	i¹	c ¹	i ¹	c ¹	i ¹	c ¹	i¹	c ¹	i¹
Hepatitis E		-		-	1	0.01		-		-		-		-		-		-
Hepatitis C		-	6	0.04		-		-		-	7	0.15		-		-		-
Hepatitis A	90	0.77	90	0.55	135	1.8	12	0.28	21	0.31	27	0.56	10	0.34	27	0.45	5	0.38
Hepatitis B	625	5.4	65	0.40	20	0.27	44	1.0	26	0.39	11	0.23	33	1.1	5	0.08	6	0.45

¹c = cases, i = incidence

Cases and incidence by Age category



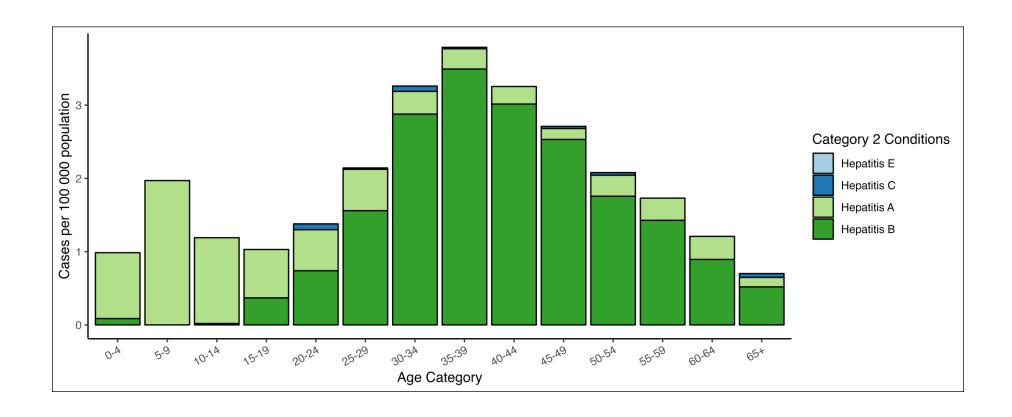


Table 21:

		0-4	5-	.9	10	0-14	1.	5-19	2	0-24	2	5-29	30)-34	35	-39	40	-44	4	5-49	5	0-54	5	5-59	60	0-64	6	55+
Condition ¹	c 1	i 1																										
Hepatitis E		-		-		-		-		-		-		-	1	0.02		-		-		-		-		-		-
Hepatitis C		-		-		-		-	4	0.08	1	0.02	4	0.07		-		-	1	0.03	1	0.04		-		-	2	0.05
Hepatitis A	52	0.90	112	2.0	64	1.2	34	0.66	28	0.56	30	0.56	17	0.31	14	0.28	10	0.24	5	0.15	8	0.29	7	0.30	6	0.32	5	0.13
Hepatitis B	5	0.09		-	1	0.02	19	0.37	37	0.74	83	1.6	158	2.9	177	3.5	126	3.0	85	2.5	49	1.8	33	1.4	17	0.89	20	0.52

¹c = cases, i = incidence

END