

Surveillance

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Learning Objectives



At the end of this lecture, you will be able to:

- 1 Define surveillance
- 2 Know the aims and uses of surveillance system
- 3 Understand the different types of surveillance systems
- 4 Recognize the elements of surveillance system
- 5 Be able to assist in establishing and evaluating a surveillance system

Session Overview

- > Definition
- ≻The Uses
- ≻Aims
- ≻Types
- ➢ Elements
- ➢ Evaluation
- ► National Examples



What is Surveillance?



The Centres for Disease Control and Prevention (CDC) defined Public Health Surveillance as

"Ongoing systematic collection, analysis, interpretation and dissemination of data regarding a health related event for use in public health action to reduce morbidity and mortality and to improve health"



What is Surveillance?



- It is the eyes (and ears) of public health
- It is a network of people and activities to keep this process
- Functions at local to international levels.



Describing Surveillance?



Surveillance systems provide descriptive
 information regarding when and where health
 problems are occurring and who is affected (the
 basic epidemiologic parameters of time, place, and
 person)

The Uses of Surveillance System

1. For diseases:

- Monitoring infectious (Communicable) diseases
 - Influenza, HIV/AIDS, sexually-transmitted infections
- Disease outbreaks
 - Food poisoning, cholera
- Non-communicable diseases
 - Lead poisoning, cancer, hypertension, diabetes.
 Congenital malformation
- Risk factors
 - Tobacco use, physical exercise

The Uses of Surveillance System

2. For emergencies

Bioterrorism, chemical, radiation, natural disasters

3. For hospitals

Nosocomial infections.

4. In the industry:

Occupational disorders, injuries, disability pensions

5. In the military

Diseases of the recruits



Aims of Surveillance



➤ Main aim → disease control and prevention

- > Monitoring incidence and prevalence of diseases
- Detect outbreaks of new or old diseases.
- Descriptive epidemiology of health problems (Who, Where, When)
- Detect and quantifies the occurrence of important or potentially important health risks or outcomes (distribution, incidence and prevalence)



Aims of Surveillance



Provides evidence and data for health program planning, intervention and evaluation

- > monitor changes in infectious and environmental agents,
- evaluate control measures, and
- describe the natural history of a health event in a community that will generate hypotheses and stimulate applied research



Features of a Surveillance System



- 1. Practical, clear case definitions for each disease
- 2. Workable, uniform and continuous data collection methods
- 3. Rapidity of collection, analysis, interpretation and dissemination of data.

Types of Surveillance



- 1. Passive surveillance
- 2. Active Surveillance
- 3. Sentinel surveillance

Passive surveillance



WHO Definition

 Regular reporting of disease data by all institutions that see patients (or test specimens) and are part of a reporting network.

- There is no active search for cases.
- Relies on the cooperation of health-care providers laboratories, hospitals, health facilities and private practitioners
- This is the most common type of surveillance.

Passive surveillance Cont.



- In this type of surveillance criteria are established for reporting diseases, risk factors or health-related events then health practitioners are notified of the requirements and they report events as they come to their attention.
- In most countries with a passive surveillance system, every health facility is required to send a monthly (sometimes weekly/daily) report of all cases on a standard form.

Passive surveillance Cont.



Advantages

- Simple to conduct
- Inexpensive
- Covers wide areas (whole countries or provinces)

Disadvantages

- It can be difficult to ensure completeness and timeliness of data (because it relies on an extensive network of health workers)
- Usually underestimate the true illness burden

Active Surveillance



Definition

- Collection of data from healthcare providers or institutions.
- In active surveillance the organization conducting the surveillance actively seeks the relevant information (healthcare providers are contacted and asked to provide details of any cases they have seen).

Uses of Active Surveillance



1. Active surveillance is used when there is an indication that something unusual is occurring

Example

- During outbreaks of food of food-borne pathogens
- During outbreak of measles
- 2. Regular outreach to potential reporters, to stimulate the reporting of specific diseases or injuries.

Active Surveillance Cont.



Advantages

Produce complete data of a good quality

Disadvantages

high use of resources (For this reason, when it is used, it is for a limited time period)

Sentinel Surveillance



Definition

- Reporting of cases of specific diseases or risk factors that may indicate that the particular preventive or therapeutic activity is not working as planned.
- It is used when high-quality data are needed about a particular disease that cannot be obtained through a passive system.

Sentinel Surveillance



It involves only a limited network of carefully selected reporting sites

Data collected in a well-designed sentinel system can be used to

- 1. signal trends
- 2. identify outbreaks
- 3. monitor the burden of disease in a community

Sentinel Surveillance



Advantages

- 1. Rapid
- Economical alternative to other surveillance methods (Because it is conducted only in selected locations

Disadvantages

 May not be as effective for detecting rare diseases or diseases that occur outside the catchment areas

Elements of Surveillance system



- 1. <u>Case definition</u>: (possible, probable, confirmed)
- 2. <u>Population</u> under surveillance (hospitals, prisons, schools, factories, national, international)
- **3.** <u>Cycle of surveillance (recognizing health event,</u> notifying it, information transfer, networks, action)
- 4. <u>Confidentiality</u> (e.g. HIV+ve)
- 5. <u>Ethics</u> (when research is involved)
- 6. <u>Laws</u> (as a service component governed by law in USA; e.g. disease notification)

Case Definition



A set of uniform criteria used to define a disease for public health surveillance

- Enable public health officials to classify and count cases consistently across reporting areas.
- It is not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient's health needs
- Refer to standard definitions stated by WHO and CDC
- Every year, case definitions are updated

Case Definition Gradient



Low Specificity

Suspected

Probable

High Specificity

Confirmed

Example of Case Definition



Smallpox

- **Clinical Description**
- An illness with acute onset of fever >101 $^{\circ}$ F followed by a rash characterized by vesicles or firm pustules in the same stage of development without other apparent cause.
- Laboratory Criteria for Confirmation
- Isolation of smallpox (variola) virus from a clinical specimen, or
- Polymerase chain reaction (PCR) identification of variola DNA in a clinical specimen, or
- Negative stain electron microscopy (EM) identification of variola virus in a clinical specimen (Level D laboratory or approved Level C laboratory)



Probable Case of Smallpox

A case that meets the clinical case definition that is not laboratory confirmed but has an epidemiological link to another confirmed or probable case.

Confirmed Case of Smallpox

A case of smallpox that is laboratory confirmed.

Working Case Definition



Smallpox Outbreak

- Anyone who meets original case definition
- Anyone with fever (>101 ° F) or rash who was in a confirmed exposed area during the Bioterrorism (BT) event or came in contact with a confirmed or probable case should be considered a case. (until confirmed; if not confirmed; will be under observation and could be classified as "case"; and others as "confirmed cases")

Disease Notification



Who should do it?

- 1. Physicians
- 2. Laboratories
- 3. Hospitals
- 4. Countries to CDC, WHO

Disease Notification



- Instituted for rapid application of prevention measure
- List of diseases vary by country
- Information on form includes diagnosis, date of onset, age, sex, and place of residence; may contain symptoms, Treatment given, and precautions

Validity of notification data



- Seeking of medical care is not constant
- Distance to the nearest hospital
- Cost and distance to travel
- Media reports will increase the number of people reporting to the hospital e.g. dengue fever
- Public awareness will increase the incidence



Steps in Surveillance Analysis



- Data quality
- Descriptive analysis
 - Time
 - Place
 - Persons
- Generate hypothesis
- Test hypothesis

Descriptive Analysis of Time



- Graphical analysis
- Requires aggregation on appropriate time unit
- Choice of the time variable
 - Date of onset
 - Date of notification
- To describe trend, seasonality, and residuals
- Use of rates when denominator changes over time

Evaluation of Surveillance System



1. Is the system detecting what it is supposed to detect?

The surveillance system data need to be compared with data produced by another detection mechanism

2. Is the system producing data in time for appropriate responses?

3. Can the system cope with changes?

The disease or our knowledge may be changing quickly. A surveillance system should adopt to such changes (flexibility)

Evaluation of Surveillance System Cont.



4. Is the system as simple and cheap as possible?

5. Are the public health responses timely and appropriate?

Any system that does not lead to appropriate responses is flawed.

Example of National Surveillance Systems



 Health Electronic Surveillance Network" (HESN) to control and manage infectious diseases and epidemics online

HESN

• It includes 7 modules they are:



Investigations
Outbreaks
Immunization
Family Health

Work ManagementInventoryAdmin

HESN dashboard



Work Management

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Administration							

Investigation

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Immunization

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Inventory

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Administration



System Administration

System administration tasks are grouped into categories. Click on a text link to navigate to the area of interest.

INDICES

- Manage Organizations
- Manage Providers
- Manage Service Delivery Locations
- Risk Factor Categories

TERMINOLOGY

- Manage Vocabulary Domains
- Manage Value Sets
- Manage Code Sets

SECURITY MANAGEMENT

- Manage Permissions Sets
- Manage Permissions
- Manage Roles
- · Manage System Accounts
- Upload User Accounts
- Manage User Accounts
- View Audit Log

GENERAL / MISCELLANEOUS

- Manage Reference Links
- · Manage Batch Schedule
- Config. Services Properties List

TEMPLATES

Manage User Defined Forms

Example of National Surveillance Systems



Influenza Surveillance In Saudi Arabia (ISSA)

•Objectives of influenza surveillance

The goal of influenza surveillance is to minimize the impact of the disease by providing useful information to public health authorities, which will help in planning appropriate control and intervention measures, allocate health resources, and make case management recommendations

Case definition UL case Definition: beginning at the last 10 days, did the national superior at the estimate way to be a structure of the second seco														
LI case Definition: beginning at the last 10 days, did the patient experience: Does the patient meet ILI case definition														
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Vaccination for influenza in the last 6 months	5:													
Specimen Collection														
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Flu A: seasonal H3N2	Pos (+) 🛛] N	Neg (-)	hPIV	1	□ Pos (+) □ Neg (-)								
Flu A: A(H1N1)pdm09	Pos (+)		leg (-)	hPIV	2	□ Pos (+) □ Neg (-)								
Flu A: H5N1	Pos (+)		leg (-)	hPIV	3	П Pos (+) П Neg (-)								
Flu A: Unsubtypeable/Novel	Pos (+)	Jeg (a)	hMPV	7										
Eh D	Pos (+)	log()	MED	CoV	$=$ $\operatorname{Pos}(+)$ $=$ $\operatorname{Nog}(-)$									
	Pos (+)		veg (-)	Other	s:	ros (+)Neg (-)								
Date results reported:/_/														
Comments:														

Appendix 2: ILI Data Collection set

Appendix 3: ILI Line List Data Collection set

حا*لات مشتبهة* الأنفلونزا (_{ILI}) المسجلة بالمركز

رقم الأسبوع:

التاريخ:

اسم المركز:

کحهٔ Cough	حرارة Temp 38°	نس Gen	الجذ Ider			رقم الهوية ID Number	الإسم Name	ريخ NO				
		انئی F	ذکر M	65+	65<50	50<15	15<5 5<2 2<0					

المراقب الصحي:

رقم الأسبوع:

HBIST	D						Г	Т	T				Γ	۲	lospite	i name:	T													Π
						•	•	1.			De	part	men	it (N	Aedicir	e=1; Pediatri	ics=	2)	Date									\neg		
Comp	Year	Month		Hospit	₽	ŀ	Unit (Inpatient=1; Outpatient=2)												Time (use 24 hr. time format)							\neg				
Name		•			Τ	-		•											Age (YY-MM)							Ē	Ť			
House	hold head				╈											Sex (Male=1; Female=2)							Ť	\neg						
Villag	e / Para / N	lahali	la		╈											Health care worker (Yes=1; No=2)								┦	\neg					
Union	/ Ward				╡														Poult	try work	er (Y	(es=1;	No=	2)						
Upazi	la / Thana				Τ														Poult	try raisir	ng (Y	es=1;	No=3	2)						
Distric	t						Loca											Local Tr	avel wi	ithin 7 d	lays (Yes=	L; No	=2)						
Phone	number						Where										Where?													
Intern	ational tra	vel wi	ithin	30 da	rs (1	res=	1;1	Vo=2])								T	Where?												
Date of	of admissio	n (DD	-MM	-111)				Τ		Γ	Τ	T		Γ		Date of d	lisc	harge (DD	-MM-	vi)			Г	Τ	T			Γ	Τ	
Provis	ional diagn	osis														•									-			Γ		
Outco	me				F	ully	rec	overe	-d=:	1; Pa	artia	lly re	cove	red	I=2; Re	mains hospit	alize	ed=3; Tra	instern	ed=4; De	ath	5; Ur	knov	vn=9	•			-		
					•			Т								Was fever subjective or measured? (Subjective=1, Measured=2)														
Sympt	toms (Ye=1	; No=2,	Unik	nown=	:9)			•	Date	e of	ons	et			If measured, record in (in *F):															
																Other sym	pto	ms (Yes=1	=1; No=2) Date of onset											
Fever						Т				Т				Γ	0	hers 1							ľ	Γ	Τ	Т	Т			
Cough	•					╈									0	hers 2										\top	\top			
Difficu	ilty breathi	ng												Γ	0	hers 3									Τ	\top	\top			
Sore t	hroat					Τ				Τ					sy	mptoms for	<51	rs. (Yess)	L; No=2)			Da	te of	onse	t					
Runni	ng nose					Τ				Τ					G	est indrawin	6								Τ	Т				
Heada	che														St	ridor in a calı	m cł	nild							Τ					
Diamh	ca														Be	ing unable to	o dri	ink							Τ	Т				
Chills						Τ									Le	thargy or und	com	sciousnes	44						Τ	Τ	\top			
Bodys	sche														Ve	mits everyth	ing									Τ				
Hemo	ptysis														Hi	story of conv	ulsi	ons												
Pleurit	ic chest pair	•																												
Medic	al History								-						•	ias any docto	er to	id you he	ave lun	g diseas	e? (1	e=1;1	No=2)							
Do yo	u smoke? (F	Reguli	arly=1	1; Som	etir	nes	2;	In pa	st=3	3; Ne	ver	=4)		Τ	^	re you pregn	ant	t (Wome	en only) (Yes=1;1	Nic=2))					\top			
Has an	ny doctor to	old yo	u hav	e hea	rt di	seas	se?	(1100	L; Nk	o=2)					`	isited OPD w	rith	currentil	Iness?	(IPD on)	iy) (H	es=1;	40=2)							
Histor D Hyp	y of underly pertension o	ying o D Can	cer 🗆	onic ill othe	nes r un	s (Cr deri)	hec yin	k all t g or c	hat	t app mic i	ilne	D As ss (S	thm pecif	a o i Y	Malari	a 🗆 HIV/AIDS)		Diabetes	5 - CO	PD(Chro	mic b	rond	hitis/	empl	hyse	ma)				
Histor	y of pneum	ionia i	in the	prior	30 (days	: 1>	Yes;	2=1	No; S	9=UI	nkno	wn														+			

Appendix 5: Hospital Data Collection Form (Detailed form)



- Surveillance is an important tool for public health
- It is <u>defined</u> as an "Ongoing systematic collection, analysis, interpretation and dissemination of data regarding a health related event for use in public health action to reduce morbidity and mortality and to improve health"
- Routine surveillance data are available in regular reports by national and international sources all over the world



- Three main types of Surveillance:
 - 1. Passive (Common)
 - 2. Active
 - 3. Sentinel
- <u>Main aim</u> → disease control and prevention

