



सत्यमेव जयते  
Government of India



# Media Scanning & Verification Cell

Media alert from the Media Scanning & Verification Cell, IDSP-NCDC.



Alert ID	Publication Date	Reporting Date	Place Name	News Source/Publication Language
3814	29/11/2016	29/12/2016	Tamil Nadu	<a href="http://www.timesofindia.com/English">www.timesofindia.com/English</a> <a href="http://timesofindia.indiatimes.com/city/chennai/japanese-encephalitis-cases-rise-in-tamil-nadu/articleshow/56208981.cms">http://timesofindia.indiatimes.com/city/chennai/japanese-encephalitis-cases-rise-in-tamil-nadu/articleshow/56208981.cms</a>
<b>Title:</b>	<b>Japanese encephalitis cases rise in Tamil Nadu</b>			
Action By CSU, IDSP -NCDC	Information communicated to SSU-Tamil Nadu			

The mosquito menace is acute and, apart from dengue-causing aedes and malaria-causing anopheles, public health experts are worried about the 'culex' which causes Japanese encephalitis (JE). National Vector Borne Disease Control programme data shows that the number of people testing positive for JE, a viral disease, is rising — from 11 cases in 2011 to 53 in 2015. The entire data for this year is not available, but the number of cases collected from different districts so far is 36. "What is more worrying is the number of people with acute encephalitis syndrome being tested positive for JE, despite the massive vaccination programme," pointed out a senior public health official refusing to be named.

Acute Encephalitis Syndrome (AES) is a group of neurological diseases caused by wide range of viruses, bacteria, fungus, parasites, chemicals and toxins. Those tested for AES are also tested for JE. In 2010, 2.3% of people with AES tested positive for JE; in 2016, it is 6%, he said. The number is worrying because the disease, which causes mental disturbances, paralysis, seizures, coma and death, can be prevented by vaccines. JE occurs across many countries in Asia, where about 68,000 cases are reported annually, according to the World Health Organization, though the number of cases is thought to be vastly underreported. In India, the virus is concentrated in Assam, Bihar, Uttar Pradesh, West Bengal and Tamil Nadu.

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**Disclaimer:- This is a media alert subject to verification.**

**Integrated Disease Surveillance Programme (IDSP), National Centre for Disease Control,  
Ministry Of Health & Family Welfare, Government of India**

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There is no cure and health officials can only try easing the symptoms, providing drugs to treat fevers and convulsions or inserting feeding tubes when children become unconscious. In 2013, the Union health ministry launched a mass vaccination drive in select districts of the five states. In Tamil Nadu, 13 districts, including Tiruvallur, Tiruvannamalai, Trichy, Madurai and Virudhunagar, were chosen. While all children between 9 months and 15 years get the vaccine at the launch, follow-up vaccines are given to those under 2 years. "The vaccination programme is working well," said state director of public health Dr K Kolandaisamy. "We have been reporting an increase only because our quality of surveillance is better than many other states. We are aware of the increasing numbers. In a large state like ours, it is not unusual.

What is important is that the state and several other agencies are continuously monitoring it," he said. In high-prevalence districts, health officials test people with symptoms. "The mosquitoes are ground and tested for viral content. Besides JE, we are working on controlling other encephalitic and waterborne diseases such as hepatitis," he said. But doctors, particularly paediatricians say it is important to ensure every case of AES is notified. "We see a lot of AES cases but many aren't sent for testing JE because it is not treatable," said Dr S Balasubramanian, head of the department of paediatrics at Kanchi Kamakoti Childs Trust Hospital. "It is not mandatory to report this, but it is certainly underreported. If we make reporting of this disease mandatory we will be able to increase surveillance

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