Greater Accra fails to achieve the AFP target for timeliness and adequacy of stool submission

Three regions score 100% each for timeliness and completeness
Acknowledgement

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Table 1: Ranking of Regional Performance based on selected Surveillance reporting indicators, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Timeliness (%) Week 19 A</th>
<th>Completeness (%) Week 19 B</th>
<th>Cum. AFP Cases Week 19</th>
<th>Annualized Non-Polio AFP Rate (%)</th>
<th>Measles % District reporting C</th>
<th>YF % District reporting D</th>
<th>Average Score % (A+B+C+D+E)/5</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper West</td>
<td>99.2</td>
<td>99.4</td>
<td>26</td>
<td>19.0</td>
<td>100</td>
<td>100.0</td>
<td>99.7</td>
<td>1st</td>
</tr>
<tr>
<td>Ashanti</td>
<td>98.4</td>
<td>99.1</td>
<td>28</td>
<td>2.6</td>
<td>100</td>
<td>90.0</td>
<td>86.7</td>
<td>94.8</td>
</tr>
<tr>
<td>Western</td>
<td>99.7</td>
<td>100</td>
<td>18</td>
<td>3.5</td>
<td>100</td>
<td>90.9</td>
<td>81.8</td>
<td>94.5</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>98.4</td>
<td>98.6</td>
<td>27</td>
<td>2.4</td>
<td>100</td>
<td>100.0</td>
<td>68.8</td>
<td>93.2</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>99.1</td>
<td>99.7</td>
<td>29</td>
<td>5.8</td>
<td>100</td>
<td>96.3</td>
<td>70.4</td>
<td>93.1</td>
</tr>
<tr>
<td>Eastern</td>
<td>100</td>
<td>100</td>
<td>20</td>
<td>2.9</td>
<td>100</td>
<td>100.0</td>
<td>61.5</td>
<td>92.3</td>
</tr>
<tr>
<td>Upper East</td>
<td>100</td>
<td>100</td>
<td>14</td>
<td>6.9</td>
<td>100</td>
<td>84.6</td>
<td>61.5</td>
<td>89.2</td>
</tr>
<tr>
<td>Northern</td>
<td>98.8</td>
<td>100</td>
<td>22</td>
<td>4.1</td>
<td>100</td>
<td>80.8</td>
<td>65.4</td>
<td>89.0</td>
</tr>
<tr>
<td>Volta</td>
<td>100</td>
<td>100</td>
<td>18</td>
<td>3.9</td>
<td>100</td>
<td>84.0</td>
<td>44.0</td>
<td>85.6</td>
</tr>
<tr>
<td>Central</td>
<td>97.2</td>
<td>98.7</td>
<td>16</td>
<td>3.3</td>
<td>100</td>
<td>65.0</td>
<td>40.0</td>
<td>80.2</td>
</tr>
<tr>
<td>Ghana</td>
<td>97.8</td>
<td>99.4</td>
<td>218</td>
<td>3.9</td>
<td>100</td>
<td>88.9</td>
<td>67.1</td>
<td>90.6</td>
</tr>
</tbody>
</table>

REGIONAL PERFORMANCE BASED ON REPORTING

Upper West region with a mean score of 99.7% was the best performing region whilst the Central region had the lowest mean score of 80.2%. All regions achieved the expected targets (29.2%) for percentage of districts reporting at least a suspected case of either Measles or Yellow Fever [Table 1].

Timeliness and Completeness of reporting for all notifiable conditions for the Week were 97.8% and 99.4% respectively. Three regions namely; Eastern, Upper East and Volta all scored 100% for both indicators.

Figure 1: Reported notifiable disease conditions, Ghana, Week 19, 2019
INFLUENZA-LIKE ILLNESS (IDSR Weekly Report)
A total of 524 cases with no deaths were reported through IDSR weekly reporting [Table 2]. Laboratory samples were sent from sentinel sites to Noguchi Memorial Institute for Medical Research (NMIMR).

Table 2: Reported Influenza-Like Illness cases by Region and District, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Districts</th>
<th>Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>Adansi South</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Asante Akim South</td>
<td>19</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Bekwai</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Bosomtwe</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ejisu Juaben</td>
<td>69</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>Ahafo-Ano North</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sanyani</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Central</td>
<td>Cape Coast</td>
<td>59</td>
<td>0</td>
</tr>
<tr>
<td>Eastern</td>
<td>New Juaben</td>
<td>78</td>
<td>0</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>Accra</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Adentan</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ga Central</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ga East</td>
<td>22</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ga West</td>
<td>42</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>La-Dade-Kotopon</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ledzokuk-Krowor</td>
<td>26</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Shai Osudoku</td>
<td>42</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Tema</td>
<td>98</td>
<td>0</td>
</tr>
<tr>
<td>Upper East</td>
<td>Bolgatanga</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Western</td>
<td>Sekondi-Takoradi</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>524</td>
<td>0</td>
</tr>
</tbody>
</table>

Sentinel Reporting
A total of 85 samples were taken from 14 Sentinel sites that included 62 samples from Influenza Like –Illnesses (ILI) and 23 from Severe Acute Respiratory Infection (SARI) patients [Table 3]. Two (2) of the ILI cases were confirmed. The confirmed cases were all H3N2 reported from Kumasi and Influenza B Yamagata from Sekondi-Takoradi [Table 4, Figure 2].

Table 3: Reported ILI and SARI cases by Region, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of Sentinel sites</th>
<th>ILI Confirmed</th>
<th>SARI Confirmed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>2</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Central</td>
<td>1</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Eastern</td>
<td>1</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>2</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>Accra</td>
<td>1</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Upper</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>East</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Upper West</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Voltta</td>
<td>2</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Western</td>
<td>4</td>
<td>14</td>
<td>1</td>
</tr>
<tr>
<td>Ghana</td>
<td>14</td>
<td>62</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 4: Confirmed cases of ILI & SARI by Location, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Town</th>
<th>Number of Cases</th>
<th>RT-PCR* Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>Kumasi</td>
<td>1</td>
<td>H3N2</td>
</tr>
<tr>
<td>Western</td>
<td>Sekondi-Takoradi</td>
<td>1</td>
<td>Influenza B</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yamagata</td>
</tr>
</tbody>
</table>

*Reverse transcription polymerase chain reaction

Figure 2: Number of positive Influenza by Subtyping, Ghana, Week 1 – 19, 2019
MEASLES
During the Week, 70 suspected cases of Measles were recorded across the country [Table 5]. Samples were taken and sent to the National Public Health and Reference Laboratory [NPHRL] for investigations with results pending due to lack of reagents. All regions achieved the district reporting target (29.2%) as at the end of Week 19 [Figure 3].

Table 5: Reported Suspected Measles cases by Region and District, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Districts</th>
<th>Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>Ahafo-Ano South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Amansie Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Asokore Mampong</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Atwima Nwabiagya</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Atwima Kwanwoma</td>
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<td>0</td>
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<tr>
<td></td>
<td>Kumasi</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sekyere Kwanwamu</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Asutifi North</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Jaman South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Kintampo South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Nkoranza North</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>Sunyani</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sunyani West</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Techiman South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Cape Coast</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Upper Denkyira East</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Atiwa</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Birim South</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Denkyembour</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>New Juaben</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Yilo-Krobo</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Greater Accra</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ga South</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ga West</td>
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<td>0</td>
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<tr>
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<td>La-Dade-Kotopon</td>
<td>1</td>
<td>0</td>
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<td>Ledzokuku Krowor</td>
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<td>0</td>
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<tr>
<td></td>
<td>Upper East</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kassena Nankana</td>
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<tr>
<td></td>
<td>Jirapa</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Upper West</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sissala East</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sissala West</td>
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<tr>
<td></td>
<td>Wa</td>
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</tr>
<tr>
<td></td>
<td>Volta</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kpando</td>
<td>2</td>
<td>0</td>
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<tr>
<td></td>
<td>Krachi West</td>
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<tr>
<td></td>
<td>South Dayi</td>
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<tr>
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<td>Bodi</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Sefwi Wiawso</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Sekondi Takoradi</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Shama</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Suaman</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Eastern</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>70</td>
<td>0</td>
</tr>
</tbody>
</table>

Figure 3: Percentage of Districts in Regions reporting at least One Suspected Case of Measles, Ghana 1-19, 2019
MENINGITIS
A total of 11 cases of meningitis were recorded with no deaths during the week under review [Table 6]. No district was in either alert or epidemic phase. Lumbar Puncture was done for all 11 cases [Table 6]. One confirmed case of meningitis (Neisseria meningitis C) was confirmed in the West Akim Municipality in the Eastern region.

<table>
<thead>
<tr>
<th>Region</th>
<th>Cases</th>
<th>Cerebrospinal Fluid (CSF)</th>
<th>Cerebrospinal Fluid (CSF) Lab Test Positive</th>
<th>Deaths</th>
<th>CFR (%)</th>
<th>District in Alert</th>
<th>District in Epidemic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>-</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>-</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Central</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Eastern</td>
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<td>4</td>
<td>1</td>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Greater Accra</td>
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<td>-</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Northern</td>
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<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Upper East</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Upper West</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Volta</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>-</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Western</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total (Ghana)</strong></td>
<td><strong>11</strong></td>
<td><strong>11</strong></td>
<td><strong>1</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
</tr>
</tbody>
</table>

YELLOW FEVER
Thirty-one suspected cases of Yellow Fever were reported across the country [Table 7]. Samples were sent to the National Public Health and Reference Laboratory for testing.

<table>
<thead>
<tr>
<th>Region</th>
<th>District</th>
<th>Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>Amansie Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Atwima-Kwanwoma</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sekyere Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>Dormaa Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Jaman South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Nkoranza North</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sene East</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Techiman North</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Techiman South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Greater-Accra</td>
<td>Ga South</td>
<td>1</td>
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<tr>
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<td>Ga West</td>
<td>2</td>
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</tr>
<tr>
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<td>Tema</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Eastern</td>
<td>Akwapim South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Atiwa</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Suhum</td>
<td>1</td>
<td>0</td>
</tr>
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<td>Upper East</td>
<td>Bulisa South</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>Nabdam</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Upper West</td>
<td>Jirapa</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ketu South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Volta</td>
<td>Ahanta West</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Bodi</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Nzema East</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sefwi-Akontombra</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sekondi-Takoradi</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>31</strong></td>
<td><strong>0</strong></td>
<td></td>
</tr>
</tbody>
</table>

CHOLERA
No cholera case was reported during the week.

NEONATAL TETANUS
No case of Neonatal Tetanus was recorded during the week.

HUMAN RABIES
No case of Human Rabies was recorded in Week 19

MATERNAL DEATHS
During the Week, three maternal deaths were reported from health facilities in the Upper West region [Table 8].

<table>
<thead>
<tr>
<th>Region</th>
<th>District</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper West</td>
<td>Nadawli-Kaleo</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Wa</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>3</strong></td>
</tr>
</tbody>
</table>
Summary on Acute Flaccid Paralysis (AFP) Indicators, Week 1 – 19, 2019
All regions achieved the annualized Non-Polio AFP rate of 2.0 per 100,000 population less than 15 years as at the end of Week 19. A total of 218 AFP cases have been recorded with 186 of them classified and discarded. Greater Accra (70.4%) failed to achieve timeliness and adequacy of stool received by the laboratory [Table 10].

Table 10: Summary on Acute Flaccid Paralysis Surveillance, Ghana, Week 1 – 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>Population Under 15 years</th>
<th>Expected Non-Polio AFP for the year</th>
<th>Reported AFP</th>
<th>Compatible</th>
<th>Discarded</th>
<th>Annualized Non-Polio AFP Rate</th>
<th>% Timely Stools</th>
<th>% Adequate Stools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>2,559,248</td>
<td>52</td>
<td>28</td>
<td>0</td>
<td>24</td>
<td>2.6</td>
<td>89.3</td>
<td>82.1</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>1,199,191</td>
<td>24</td>
<td>29</td>
<td>0</td>
<td>25</td>
<td>5.8</td>
<td>86.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Central</td>
<td>1,216,036</td>
<td>25</td>
<td>16</td>
<td>0</td>
<td>15</td>
<td>6.0</td>
<td>100.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>2,148,065</td>
<td>43</td>
<td>27</td>
<td>0</td>
<td>19</td>
<td>2.4</td>
<td>70.4</td>
<td>70.4</td>
</tr>
<tr>
<td>Northern</td>
<td>1,348,239</td>
<td>27</td>
<td>22</td>
<td>0</td>
<td>20</td>
<td>4.1</td>
<td>90.9</td>
<td>90.9</td>
</tr>
<tr>
<td>Upper East</td>
<td>498,068</td>
<td>10</td>
<td>14</td>
<td>0</td>
<td>13</td>
<td>6.9</td>
<td>100.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Upper West</td>
<td>353,090</td>
<td>7</td>
<td>26</td>
<td>0</td>
<td>25</td>
<td>19.0</td>
<td>100.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Volta</td>
<td>1,116,490</td>
<td>23</td>
<td>18</td>
<td>0</td>
<td>16</td>
<td>3.9</td>
<td>94.4</td>
<td>88.9</td>
</tr>
<tr>
<td>Western</td>
<td>1,204,310</td>
<td>24</td>
<td>18</td>
<td>0</td>
<td>15</td>
<td>3.5</td>
<td>83.3</td>
<td>83.3</td>
</tr>
<tr>
<td>Ghana</td>
<td>12,987,880</td>
<td>260</td>
<td>218</td>
<td>0</td>
<td>186</td>
<td>3.9</td>
<td>89.9</td>
<td>87.6</td>
</tr>
</tbody>
</table>

ACUTE FLACCID PARALYSIS (SUSPECTED POLIOMYELITIS)
Eighteen cases of Acute Flaccid Paralysis (AFP) were reported across the country in Week 19 [Table 9]. The stool specimens were tested at the Polio Laboratory at NMIMR and were negative for wild poliovirus.

Table 9: Suspected Poliomyelitis cases and deaths by Region and District, Ghana, Week 19, 2019

<table>
<thead>
<tr>
<th>Region</th>
<th>District</th>
<th>Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashanti</td>
<td>Amansie Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Afigya Kwabre</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Bosome-Fremo</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Ejura-Sekyedumase</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Offinso North</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Brong-Ahafo</td>
<td>Dormaa East</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Jaman South</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Central</td>
<td>Cape Coast</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>Accra</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Northern</td>
<td>Chereponi</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Upper East</td>
<td>Kassena-Nankana West</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Upper West</td>
<td>Nandom</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Volta</td>
<td>Adaklu-Anyigbe</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Western</td>
<td>Ahanta West</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Sekondi-Takoradi</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Wassa-Amenfi Central</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>18</td>
<td>0</td>
</tr>
</tbody>
</table>

DIARRHOEA AMONG FIVE YEARS AND ABOVE
A total of 1,401 diarrhoeal cases were recorded for Week 19 signifying an increase in the number of cases compared with the previous week [See Annex 1 and Figure 4]. On the average, 2019 has recorded the least number of cases compared to 2017 and 2018 [Figure 2].
**ANNEX 1: SUMMARY OF REPORTED CASES/ EVENTS: WEEK 19 (WEEK ENDING 12 MAY 2019)**

<table>
<thead>
<tr>
<th>Disease/Health Event (suspected/confirmed)</th>
<th>Week 18</th>
<th>Week 19</th>
<th>Cumulative to Week 19</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cases (susp)</td>
<td>Deaths</td>
<td>CFR (%)</td>
</tr>
<tr>
<td>AFP (suspected polio)</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Acute haemorrhagic fever syndrome</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Adverse events following immunization</td>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Anthrax</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Acute watery diarrhoea in persons aged &gt;5 years</td>
<td>1,173</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Cholera</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Dengue fever</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Diarrhoea with blood</td>
<td>48</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Dracunculiasis (Guinea worm)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Influenza-like illness</td>
<td>440</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Maternal deaths</td>
<td>-</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td>Measles</td>
<td>45</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Meningitis</td>
<td>10</td>
<td>1</td>
<td>10.0</td>
</tr>
<tr>
<td>Neonatal tetanus</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Plague</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Public health event of international concern (PHEIC)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Human rabies</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SARS</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Smallpox</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Yellow fever (suspected)</td>
<td>24</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>NATIONAL TOTAL</strong></td>
<td>1,747</td>
<td>5</td>
<td>0.1</td>
</tr>
</tbody>
</table>

*CFR does not include maternal deaths

*This report and subsequent ones should be shared with regional and district heads as well as heads of other agencies. A feedback addressed to the Editor-In-Chief is welcome*
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