

Experience sharing : Influenza A (H1N1) pandemic in Thailand

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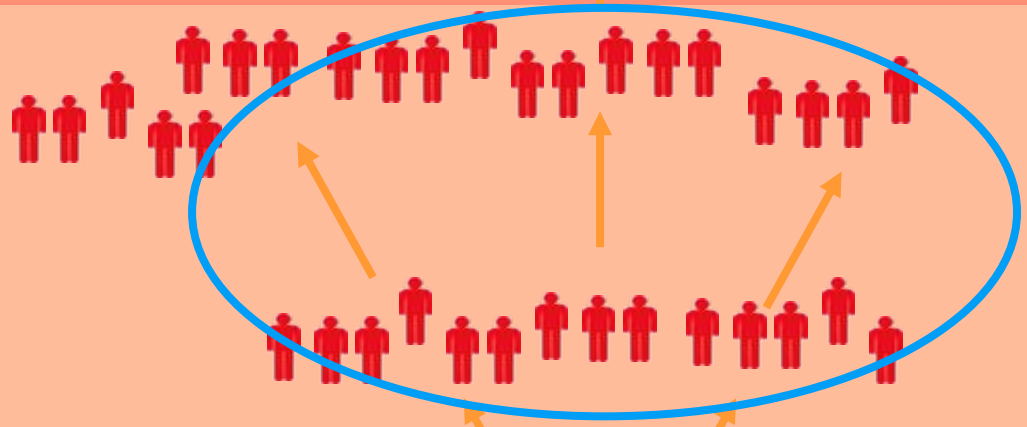
Sharing points

- Effort to delay the imported cases
- Driving force of the epidemic
- Mortality and risk factors
- Mitigation strategies

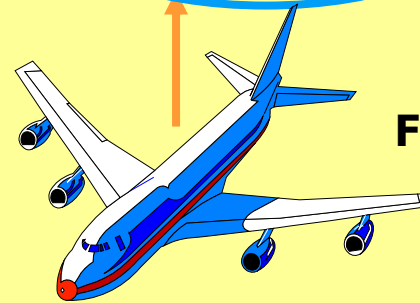
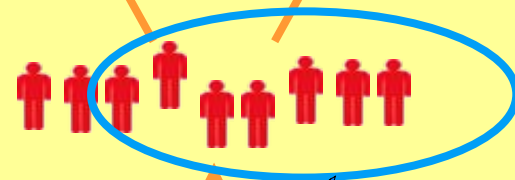


Widespread community

Localized indigenous Spreading (Early June)

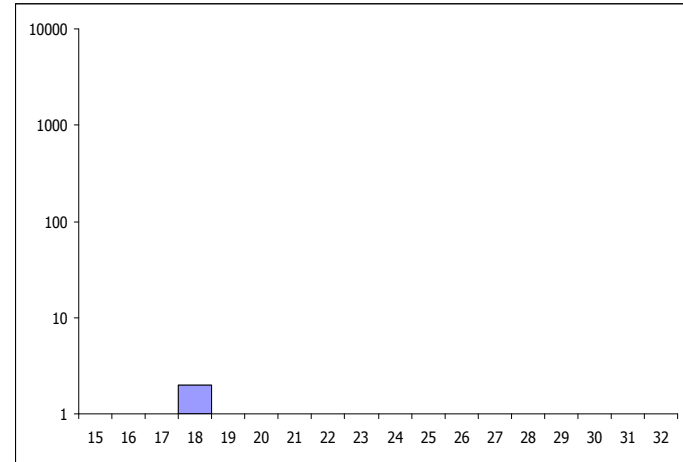
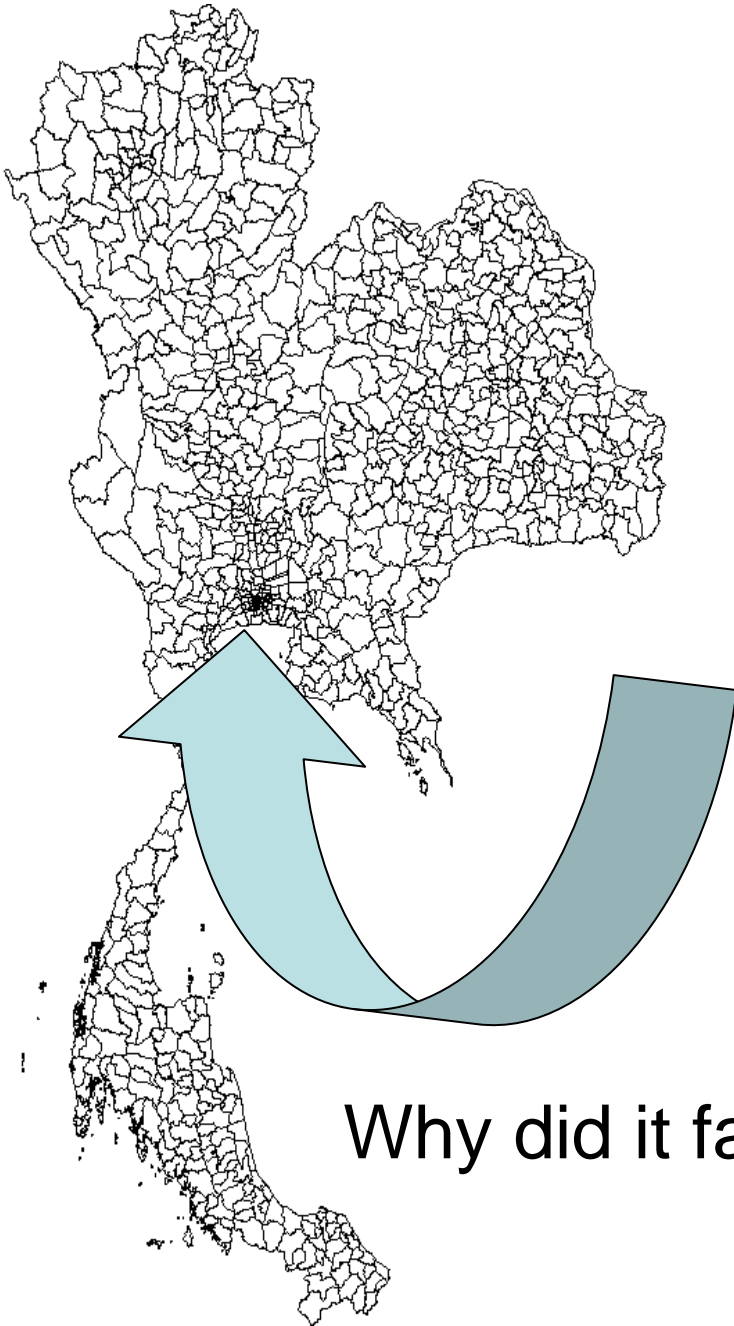


Imported phase (Late April to end of May)



Thais who returned From Mexico, USA

May : Imported cases

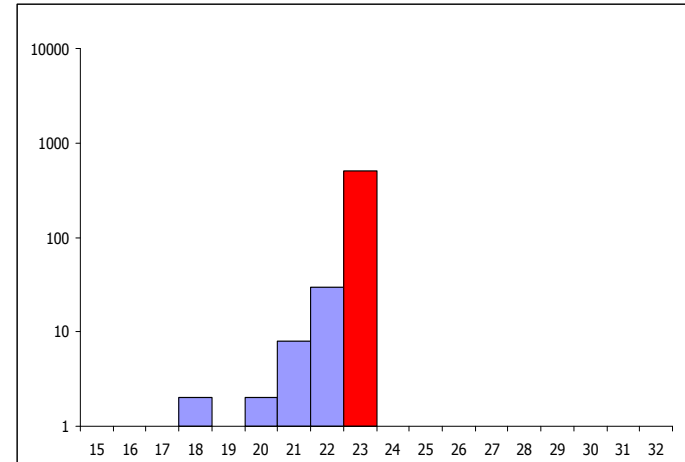
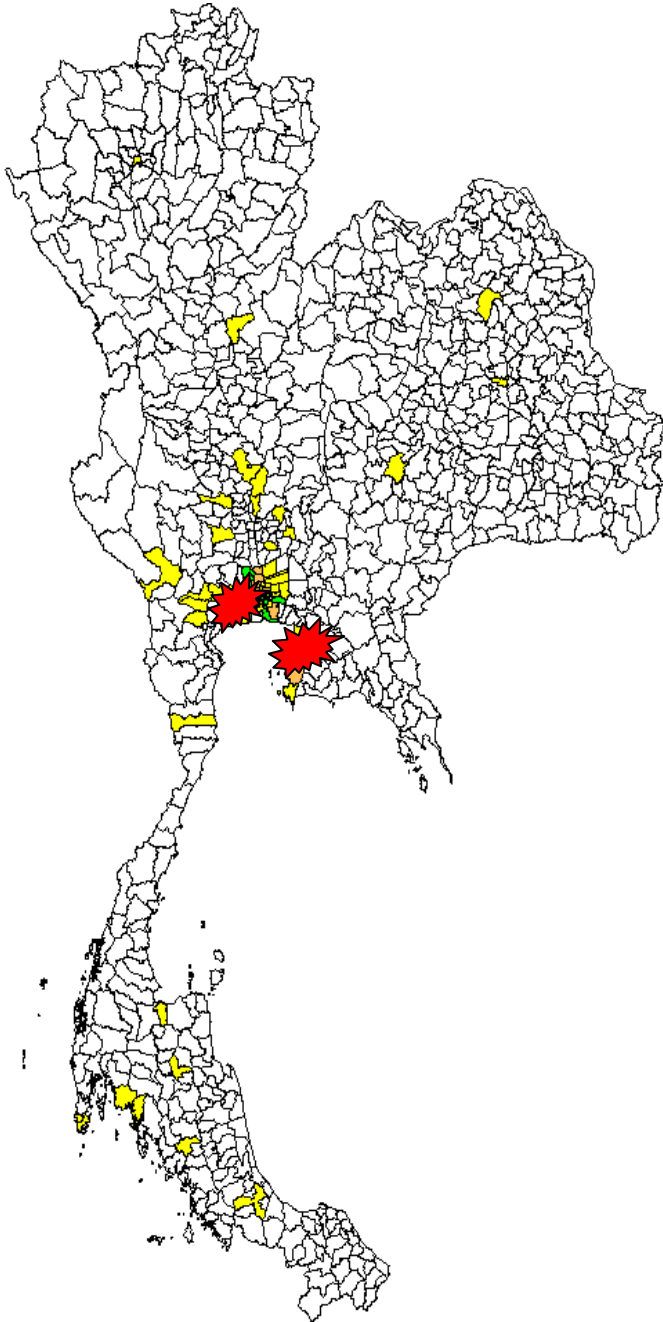


Why did it fail ?

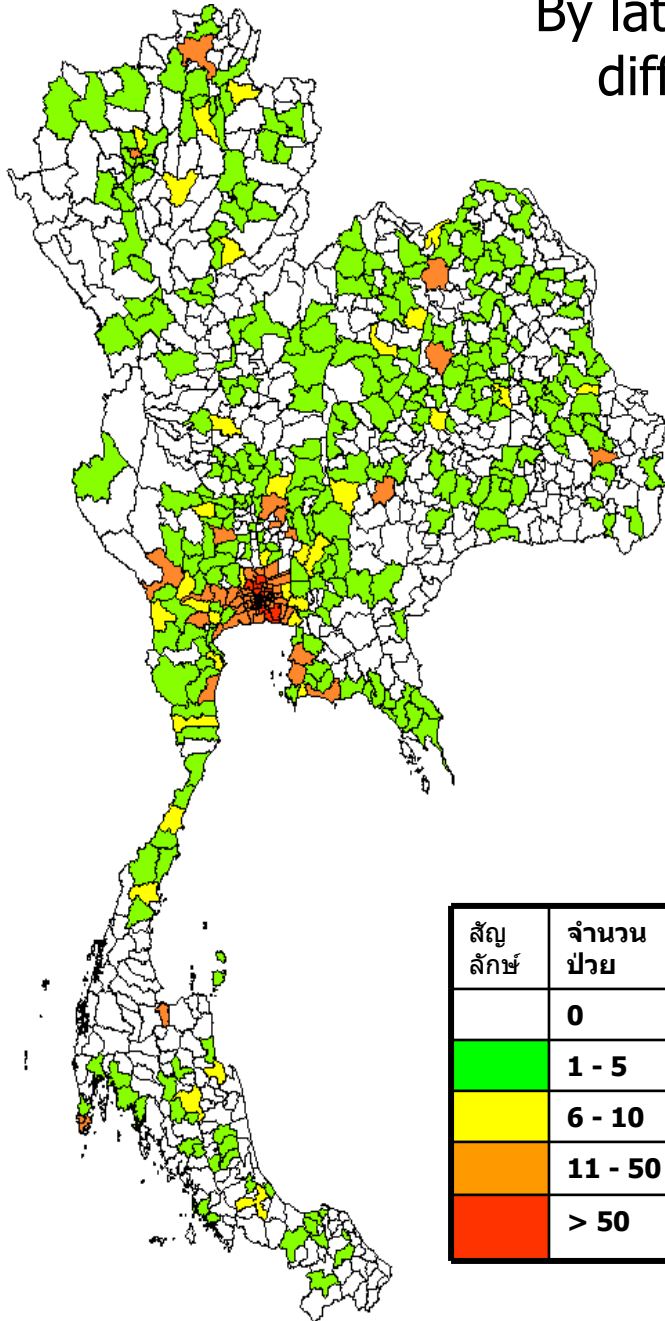


Note ใช้มาตราส่วน Log

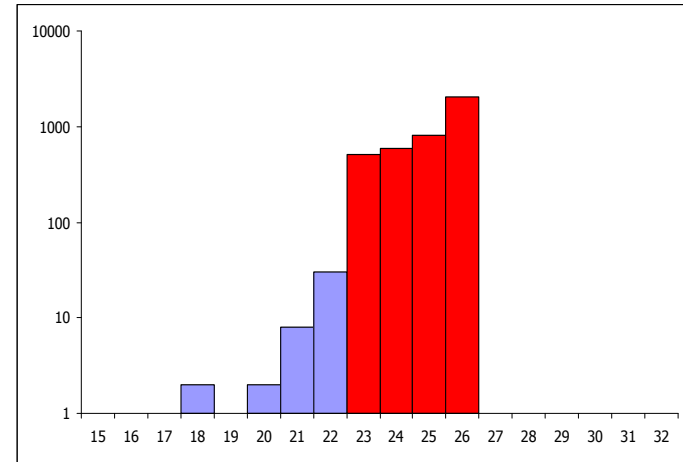
Early June: Simultaneously clusters in entertainment employees and students



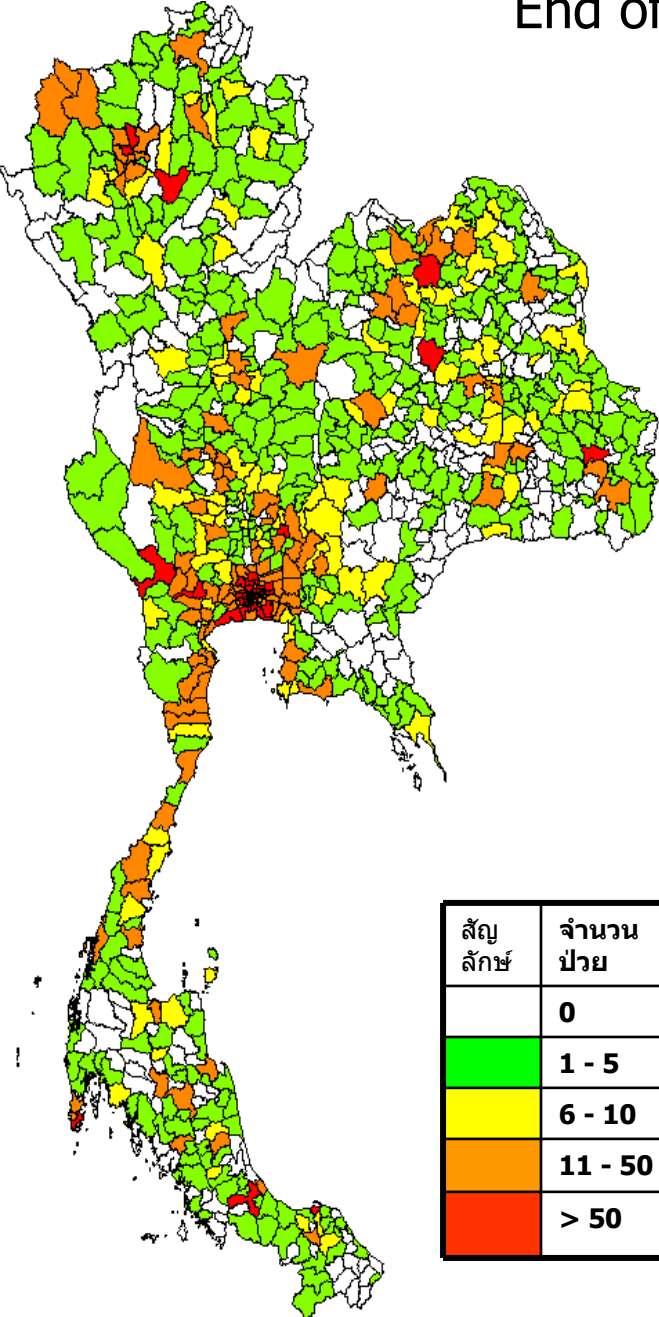
By late June : Outbreaks in multiple schools in different provinces and starting of death.



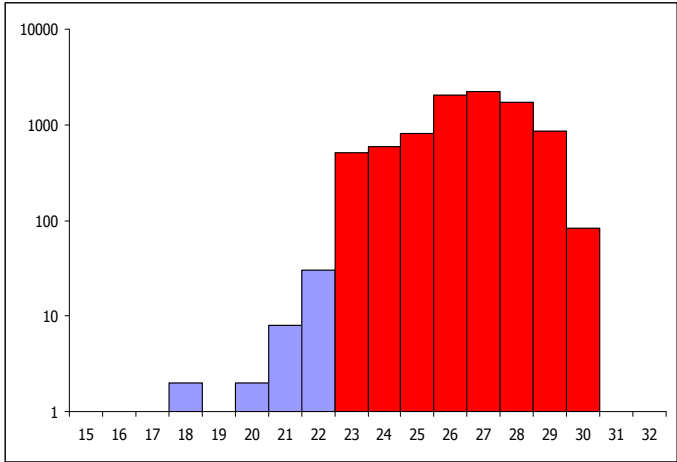
สีสัญลักษณ์	จำนวนป่วย
White	0
Green	1 - 5
Yellow	6 - 10
Orange	11 - 50
Red	> 50



End of July: All provinces has confirmed cases



สัญลักษณ์	จำนวนป่วย
	0
Green	1 - 5
Yellow	6 - 10
Orange	11 - 50
Red	> 50

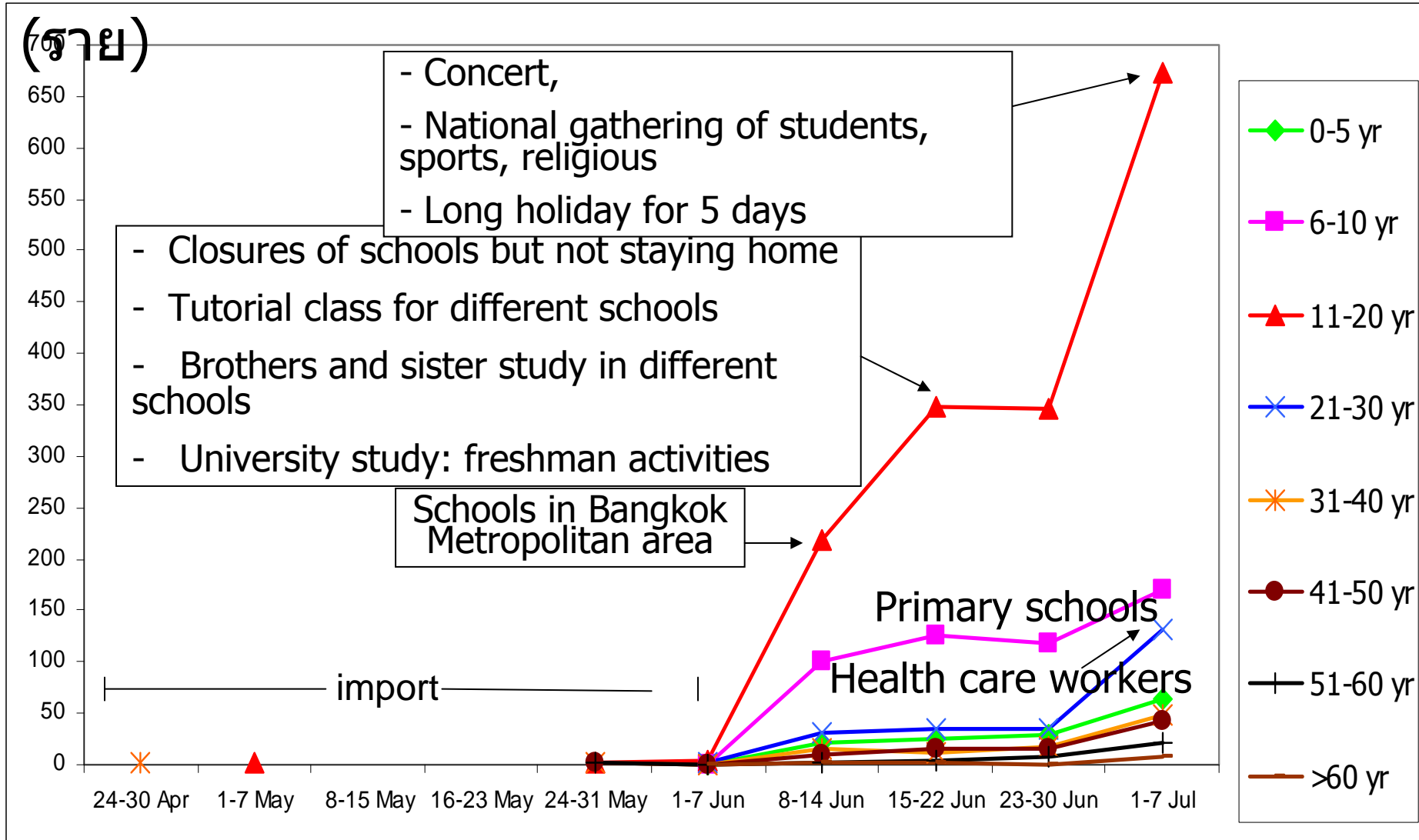


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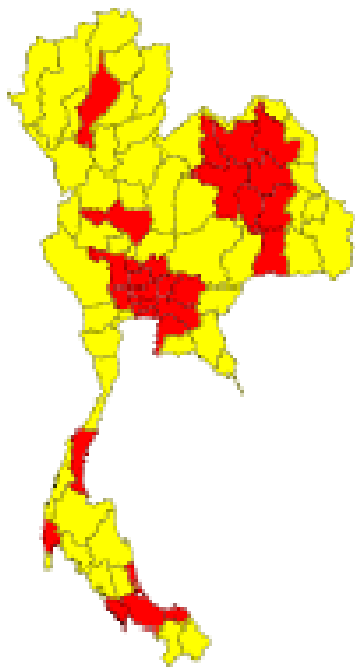
Transmission dynamic from Bangkok to other provinces

จำนวน

(ราย)



Upto mid August

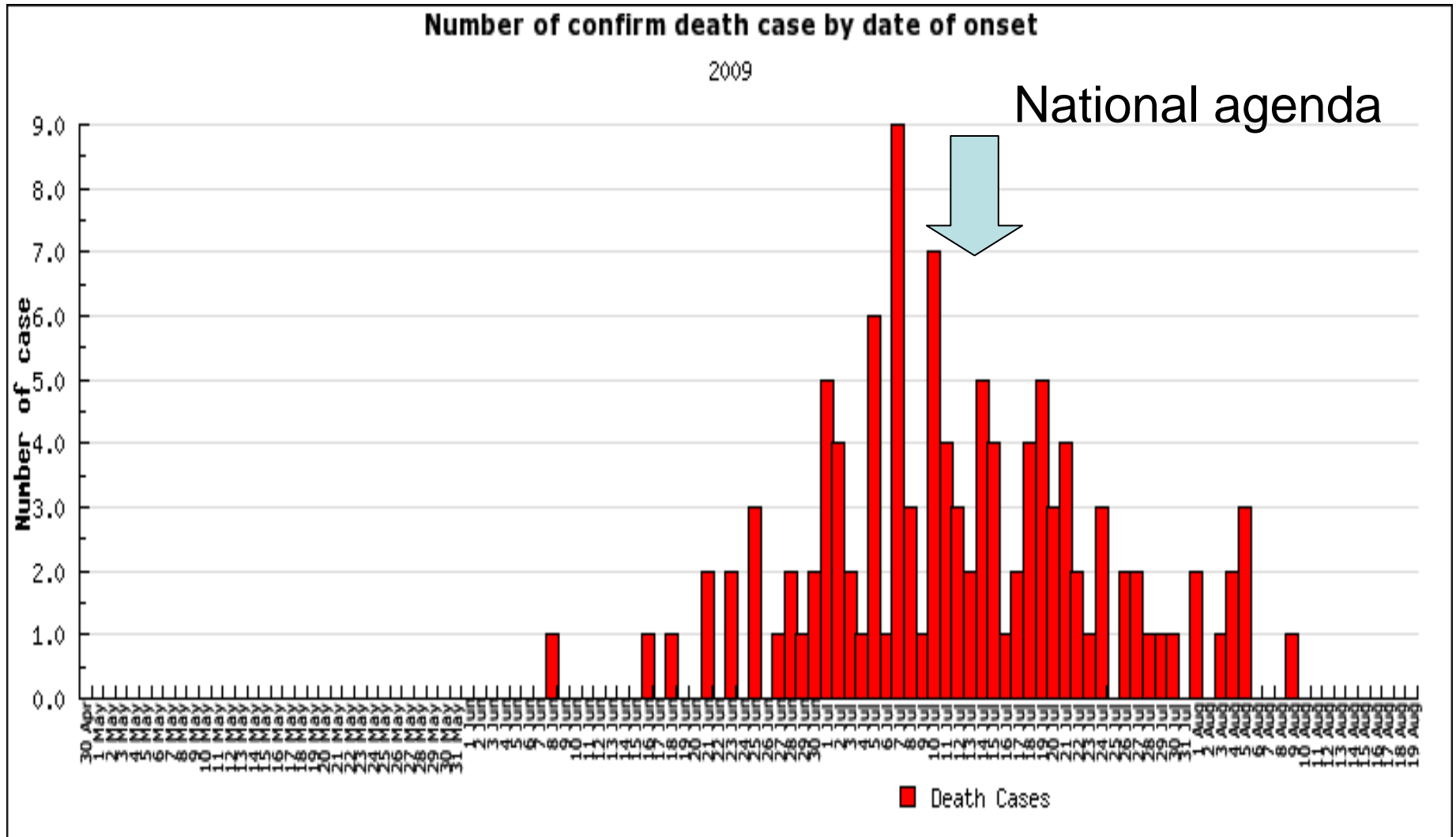


- 13,737 laboratory confirmed case
- 111 confirmed dead
- 29 out of 76 provinces with new confirmed case in past 7 days.
- First wave may last until the end of year

■ onset 1-7 วัน ย้อนหลัง

■ onset > 7 วัน ย้อนหลัง

Epidemic curve of death from H1N1 pdm by date of onset

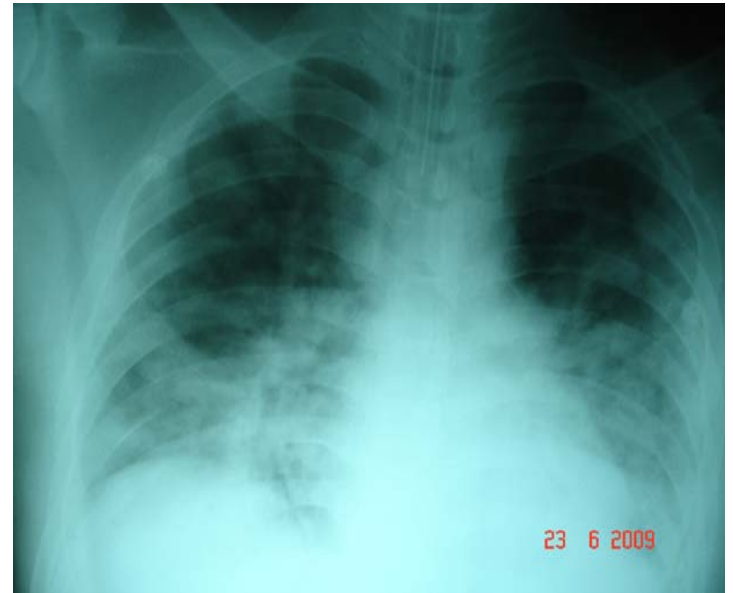


Priority groups to prevent mortality:

Total analysis 109

A) History of underlying diseases (n= 74)

- **Cardiovascular diseases 21**
- **Diabetes 18**
- **Lung diseases 16**
- **Severe Obesity 15**
- **Renal diseases 7**
- **Blood diseases 5**
- **Immunosuppression 5**
- **Pregnancy 4**

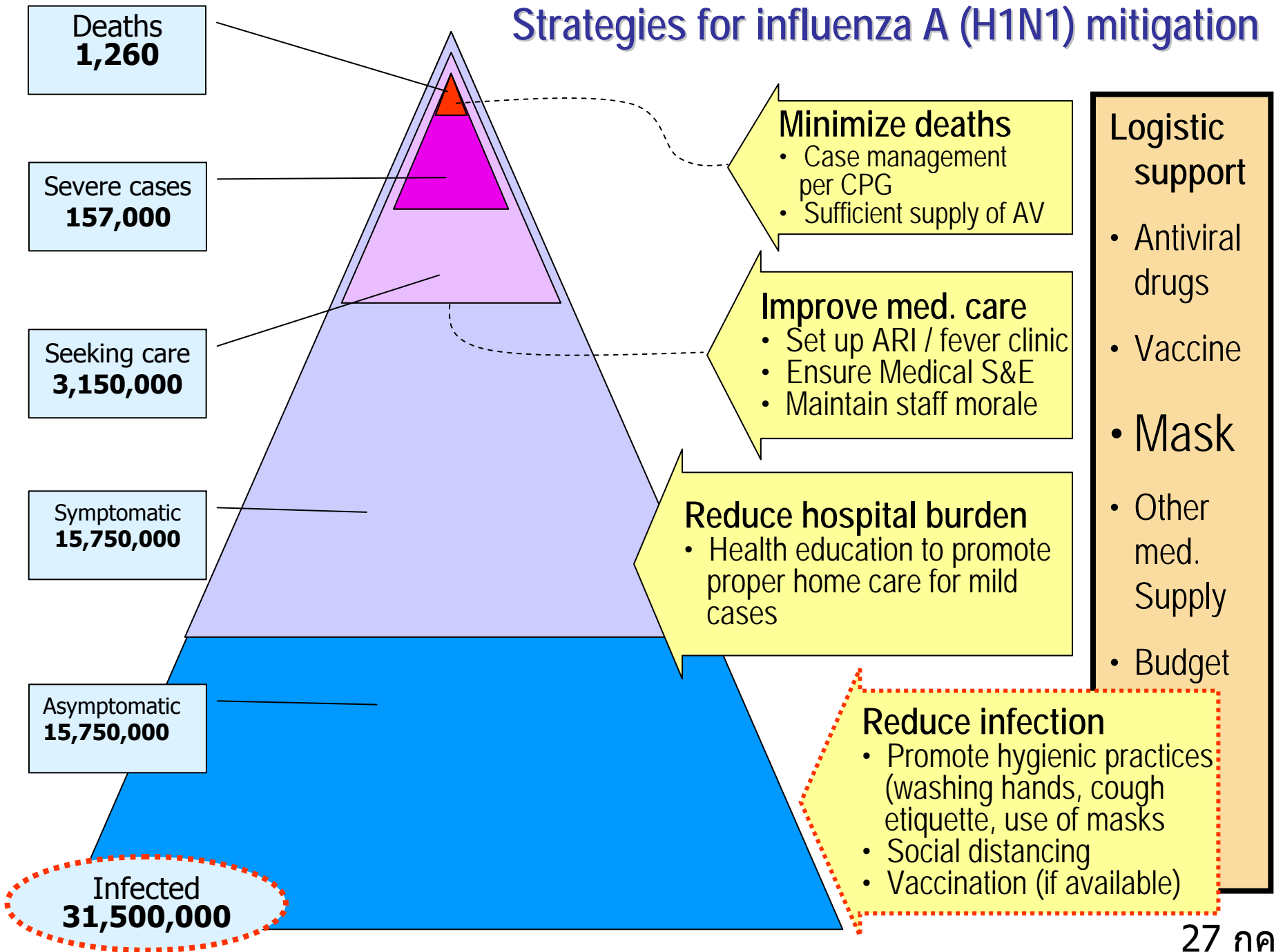


B) No underlying diseases or undocumented (n= 35)

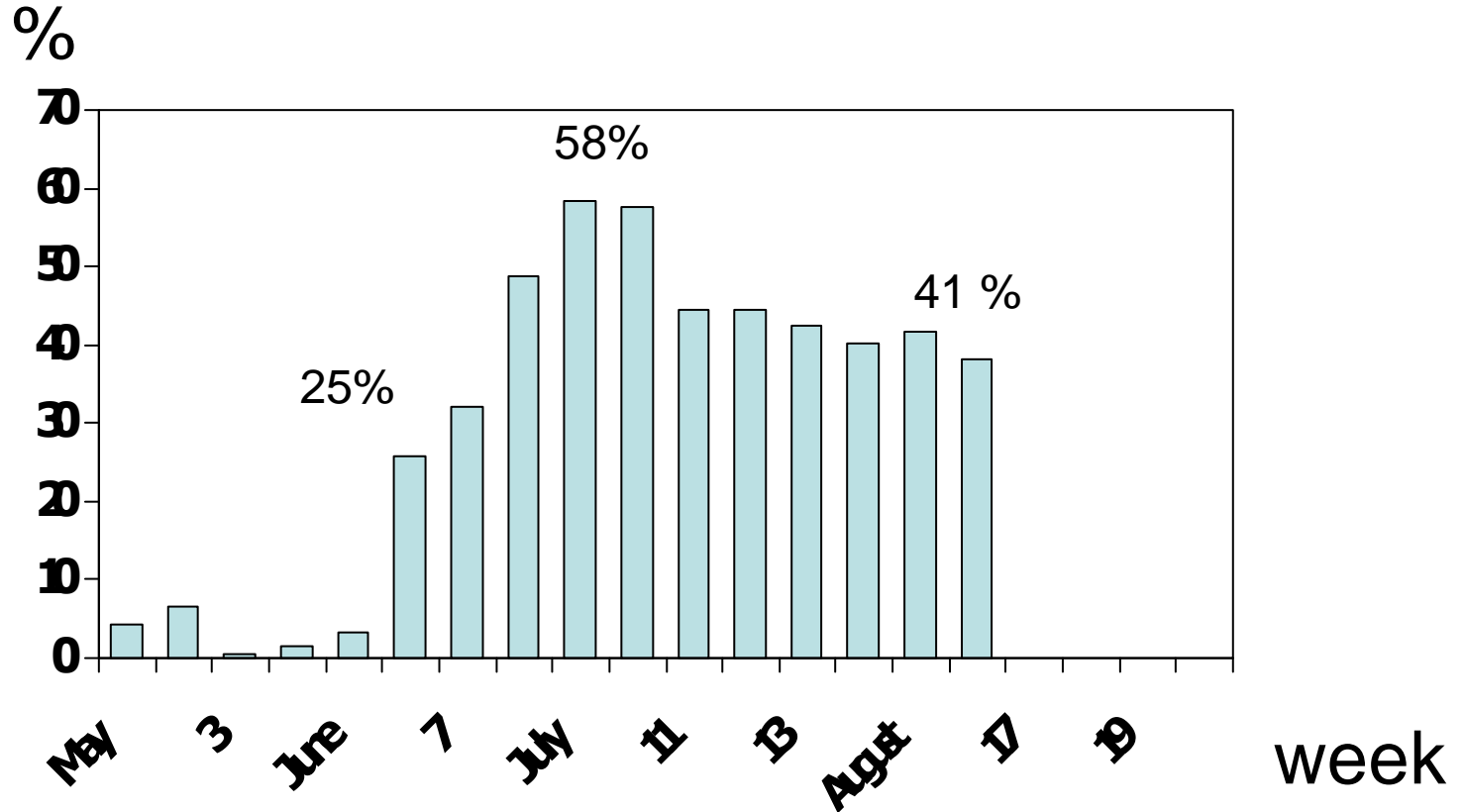
Characteristics of dead cases in Thailand (n=109)

Characteristics	Underlying diseases	
	Yes (74)	No/ non-document (35)
Male : Female	38 : 36	19 : 16
Onset to seek medical care	2 (0-9)	2 (0-7)
Onset to hospitalization	4 (0-9)	4 (0-10)
With Oseltamivir treatment(%)	66 (89%)	32 (91%)
Onset to Oseltamivir treatment	5 (0-12)	6 (0-11)

Strategies for influenza A (H1N1) mitigation



Positive Rate of H1N1 pdm among suspect influenza patients by national laboratory network



Summary

- Thailand experience widespread community spreading
- Schools children are most affected and is the main driving force.
- Certain gatherings such as weekend class, concert, youth activities, etc, and long holidays has contributed to widespread.
- The country is implimenting mitigation strategy emphasized on prevention of infection and care of patient: self-isolation, cough and hand hygiene.
- Give treatment priority to people with underlying disease, pregnancy and obesity. Starting oseltamivir earlier for those who didn't recover by 48 hours
- Situation is getting better with good cooperation from all sectors.

Thank you for your kind attention