

Concurrent Measles Outbreaks among non-immunised indigenous community in Kg Kalong and Kg Tanjung, Pekan 2017: A challenge to strengthen Herd Immunity

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ABSTRACT

Introduction: Measles, a highly contagious vaccine-preventable disease, is on the road to elimination in Malaysia by the year 2020. However, susceptible populations such as non-immunized indigenous people are still at risk to be infected due to low herd immunity. Here we report 2 measles outbreaks among indigenous people in Kg Kalong and Kg Tanjung, Pekan 2017. **Methods:** All laboratory-confirmed measles and epidemiologically-linked suspected cases presented with fever and maculopapular rash were investigated in Kg Kalong and Kg Tanjung. Active case detection (ACD), contact tracing and alert letter of measles issuance were done promptly. **Results:** For the Kg Kalong outbreak, there were 2 adult cases involving indigenous people with unknown vaccination status. For the Kg Tanjung outbreak, 2 cases involving unimmunized postnatal mother and her infant were managed accordingly. Disinfection, health education and outbreak supplementary immunization activity (SIA) were carried out. For all healthcare practitioners, continuous medical education (CME) and measles risk assessment (RA) workshop were carried out, where RA for Pekan district was less than 30%. All contacts were free from the disease and no additional cases were detected until the end of the outbreak. There was increased number of notification of suspected measles due to improved surveillance activities, all of which were found to be measles negative. **Discussion:** Outbreaks were successfully controlled, due to combined and timely control measures. SIA was done even though RA was less than 30% to strengthen herd immunity. Measles seroprevalence study on the indigenous people is recommended to look for the actual burden of infection. Targeted SIA will be the cornerstone in achieving measles elimination in this country.

KEY WORDS:

Measles outbreaks, Indigenous people, Risk Assessment, Supplementary Immunization Activity, Measles elimination

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ABSTRACT

Introduction: Diabetics has a complex healthcare needs with a higher healthcare resource utilisation compared to non-diabetics. Patients with other co-morbid conditions have more specialist and allied healthcare provider visits. Half of all hospital out-patient visits and medication prescriptions incurred by people with diabetes are attributable to their diabetes. The objective of the study was to describe the hospital out-patient resource utilisation pattern at Hospital Putrajaya. **Methods:** Using the hospital's out-patient Hospital Information System data, healthcare resource utilisation pattern of adult diabetics over a period of 36 months (January 2009 to December 2011) were determined. The identification of patients with diabetes was based on prescription data of diabetes related drugs as proxy for clinical diagnosis. **Results:** Records of 5,324 eligible patients were identified in the study. Each patient had a mean of 9 out-patient visits per year, half of the visits were to the clinical specialty departments, at least one emergency department visit, and highest amongst patients with concomitant diabetes and cardiovascular diseases. Biguanides (35.6% - 3.89%) were the most common anti-diabetic agents (ADAs) prescribed, followed by insulin (34.4% - 37.8%) and sulfonylureas (17.7% - 19.3%). There was an increase in insulin utilisation seen from 2009 to 2011. Most patients were on oral anti-diabetic (OAD) monotherapy (28.4% - 29.2%), followed by combination of 2 OADs (20% - 20.8%) and 1 OAD plus insulin (16.1% - 20.5%). **Discussion:** The choice of treatment regime and its follow-up schedule depends on various factors including disease status, the availability of the drugs, patient compliance, and occurrence of side effects or drug intolerance, presence of other comorbid conditions and the preference of the attending physicians.