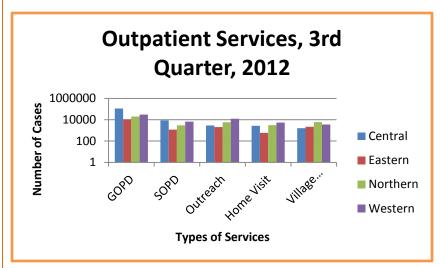
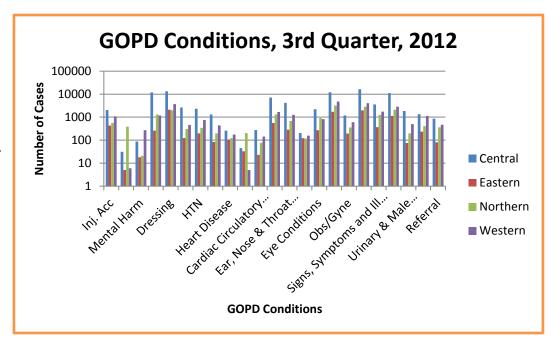


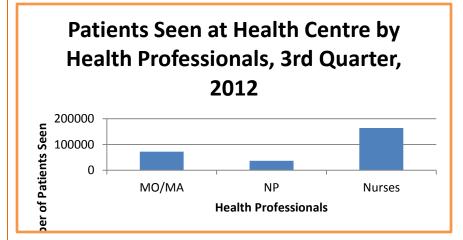
PUBLIC HEALTH INFORMATION SYSTEM (PHIS)



A total of 175,053 patients were seen through GOPD compared to 141,131 in the 2nd Quarter of this year. About 20,000 more patients were seen in 3rd quarter of 2012 compared to the same period last year. About 19,000 patients were seen at SOPD, 23,000 through outreach, 12,000 through home visits and 13,000 by village health workers. More patients were seen through outreach and home visits in the 3rd quarter compared to the second quarter.

Minor procedures dressings were carried out for majority of the patients visiting the GOPD particularly in the Central Division. Similar to the trends in the 2ndquarter of 2012 respiratory conditions, followed by musculoskeletal and skin conditions were the leading causes of morbidity.



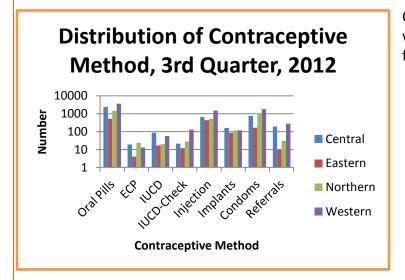


Nurses attended to about 160,000 patients, which is 20,000 more cases compared to the previous quarter. This was followed by Medical officers at about 72,000 and 37,000 by Nurse practitioners

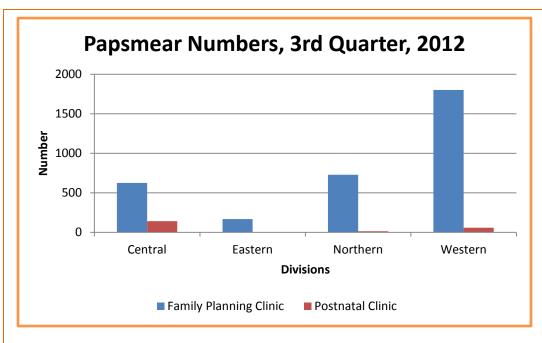
Maternal Health Services

At Antenatal Clinics there were a total of 1804 normal pregnancies seen compared to 1887 in the second quarter of 2012. Less at risk pregnancies were seen at ANC in the third quarter (1151) compared to the second quarter of 2012 (1647). Among the complications/risk factors were those outlined in the table as follows:

Risk	(% of at risk
Factor/Complication	pregnancies)
Anaemia at first visit	30.0
Multiple Preg.	15.6
Anaemia	8.3
Previous C-Section	6.7
Elderly Prim	2.8
VDRL Positive	2.3
HTN	2.1
Obesity	1.7
Cardiac	0.5
Obstructed Labour	0.3
Underweight	0.1



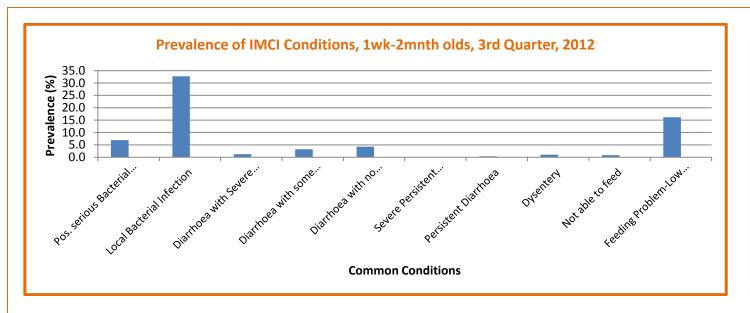
Oral pills, condoms followed by Provera Injections were the commonest contraceptive methods followed by condoms reported by all divisions.



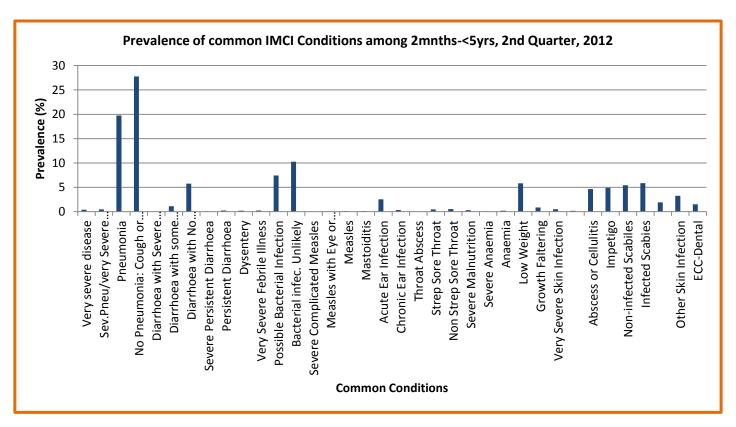
A total of 3320 papsmears were recorded through family planning clinics and 218 through postnatal clinics. About 800 more pap smears were done in the 3rd quarter compared to the 2nd quarter of this year.

DIVISION S	HepB 0	BCG 0	OPV0	DPT- HepB- Hib1	OPV1	DPT- HepB- Hib2	OPV2	DPT- HepB- Hib3	OPV3	MR1	MR2	TetTox>15yr	Tet Tox16
Central	7	7	6	1800	1801	1792	1804	1681	1664	1279	62	739	60
Eastern	17	17	13	125	123	198	198	204	203	189	16	147	23
Northern	11	11	13	710	710	763	762	796	797	571	53	97	64
Western	30	30	33	1723	1721	1798	1810	1738	1747	1318	217	60	216
TOTAL	65	65	65	4358	4355	4551	4574	4419	4411	3357	348	1043	363
Outside Area	7	6	7	434	436	398	396	333	333	350	16	181	25
total + OA	72	71	72	4792	4791	4949	4970	4752	4744	3707	364	1224	388

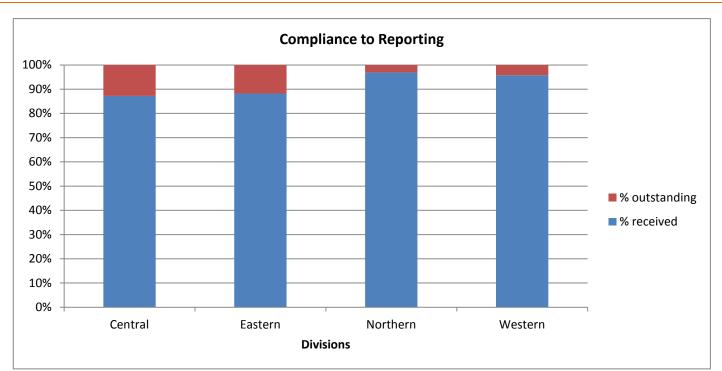
Based on the above figures, estimated coverage of MR1 was about 73%. Compared to the 2^{nd} quarter estimate, the coverage has declined from 85%. This has been estimated using $\frac{1}{4}$ of 2011 livebirths (20425) as denominator.



Among the 1 week to 2 month old children attending IMCI clinic, local bacterial infection particularly from the Western Division was most commonly reported. Likewise feeding problems such as low weight (16%) was also very common.



Among the 2 months to 5yr old children attending IMCI clinic, respiratory conditions (particularly those classified as no pneumonia – cough and cold) was most common – prevalence of 28%; Skin conditions such as infected scabies were also very common. Low weight was recorded among 6% of those attending IMCI.



The preceding analysis is based on 91% of reports from the Divisions - 87% of Central, 96% of Western, 97% of Northern and 87% of Eastern Divisions, which is similar to the compliance rate of 92% overall in the 2^{nd} quarter.

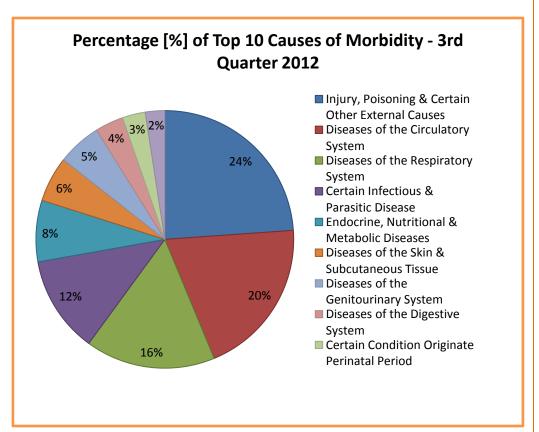
HOSPITAL INFORMATION SYSTEM

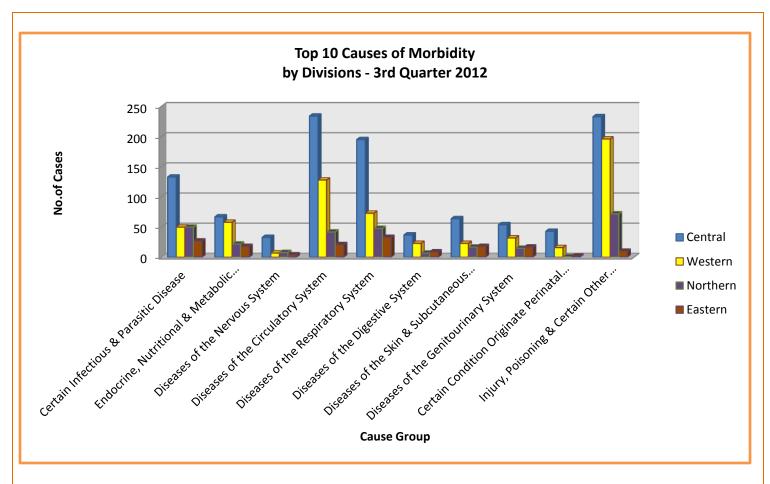
Central	Western	Northern	Eastern
CWM Hospital			
	Ba Mission Hospital	Labasa Hospital	Cicia Hospital
Korovou			
Maternity Hospital	Lautoka Hospital	Nabouwalu Hospital	Lakeba Hospital
Navua Maternity		Wainikoro Health	
Hospital	Nadi Hospital	Centre	Levuka Hospital
Tamavua	Naiserelagi Maternity	Wainunu Health	
Hospital	Hospital	Centre	Lomaloma Hospital
Vunidawa			
Hospital	Rakiraki Hospital	Waiyevo Hospital	Matuku Hospital
Wainibokasi			
Hospital	Tavua Hospital		Rotuma Hospital
			Vunisea Hospital

Data on hospital services has been obtained from the Hospital discharge data (patisplus) and from Manual tear offs (where Patisplus was not available) from the hospitals indicated in the table.

There were a total of 2726 admissions in the third quarter compared to 3103 in the 2nd quarter of 2012, comprising of 52% females and 48% males.

Injuries, Poisoning and external causes accounted for about 24% of the total admissions, followed by diseases of the circulatory system (20%) and diseases of the respiratory system (16%). Other causes for admission comprised less than 10% of total admissions.





Most admissions were reported in the Central Division followed by the Western and Northern Divisions in the second Quarter. Whilst admissions due to injury, poisoning and external causes were most common in the Central, Western and Northern Divisions, in the Eastern Division, majority of admissions were due to diseases of the respiratory diseases.

Hospital Utilisation

No	Institution	Number of	Number of	Total	Total	Occupancy	Daily Bed	Aver Length
	montuno.	Outpatient	Beds	Admission	Patient Days	Rate	State	of Stay
1	CWM Hospital	29,582	442	5,403	21,756	13.49	59.6	4.0
2	Navua Hospital		12			0.00	0.0	0
3	Vunidawa Hospital	1,943	23	112	372	4.43	1.0	3.3
4	Korovou Hospital	1,051	17	207	625	10.07	1.7	3.0
5	Nausori Hospital	6,260	17	595	679	10.94	1.9	1.1
6	Wainibokasi Hospital	8,350	12	248	1,102	25.16	3.0	4.4
	Sub-total	47,186	523	6,565	24,534	12.85	67.2	3.7
7	Lautoka Hospital	39,185	341	2,388	10,260	8.24	28.1	4.3
8	Nadi Hospital	16,526	75	835	2,649	9.68	7.3	3.2
9	Sigatoka Hospital	19,072	58	718	2,726	12.88	7.5	3.8
10	Ba Mission Hospital	3,577	55	214	592	2.95	1.6	2.8
11	Tavua Hospital	6,785	29	438	333	3.15	0.9	0.8
12	Rakiraki Hospital	2,318	24	466	1,264	14.43	3.5	2.7
	Sub-total	87,463	582	5,059	17,824	8.39	48.8	3.5
13	Labasa Hospital	21,411	161	1,599	7,356	12.52	20.2	4.6
14	Savusavu Hospital	2,173	56	297	257	1.26	0.7	0.9
15	Waiyevo Hospital	464	33	244	201	1.67	0.6	0.8
16	Nabouwalu Hospital	1,185	26	292	1,012	10.66	2.8	3.5
	Sub-total	25,233	276	2,432	8,826	8.76	24.2	3.6
17	Levuka Hospital	3,645	40	153	493	364.00	1.4	3.2
18	Vunisea Hospital	322	22	122	399	4.97	1.1	3.3
19	Lakeba Hospital	1,042	12	52	180	4.11	0.5	3.5
20	Lomaloma Hospital	502	16	10	19	0.33	0.1	1.9
21	Matuku		5			0.00	0.0	0
22	Rotuma Hospital	232	14	12	40	0.78	0.1	3.3
	Sub-total	5,743	109	349	1,131	2.84	3.1	3.2
	TOTAL	165,625	1,490	14,405	52,315	9.62	143.3	3.6
	GRAND TOTAL	167,393	1,733	14,536	54,131	8.56	148.3	3.7

SPECIALISED AND PRIVATE HOSPITALS

No	Institution	Number of	Number of	Total	Total	Occupancy	Daily Bed	Average Length
		Outpatient	Beds	Admission	Patient Days	Rate	State	of Stay
1	St Giles Hospital	1,332	136	89	1,713	5.94	8.1	19.2
2	Tamavua/Twomey Hospital		91			0.00	0.0	0
4	Military Hospital		9			0.00	0.0	0
5	Naiserelagi Maternity	436	7	42	103	4.03	0.3	2.5
	Sub-total	1,768	243	131	1,816	2.05	5.0	13.9

The average length of stay was 3.7 days. However, this is underreported as reports from Navua Hospital, Matuku,

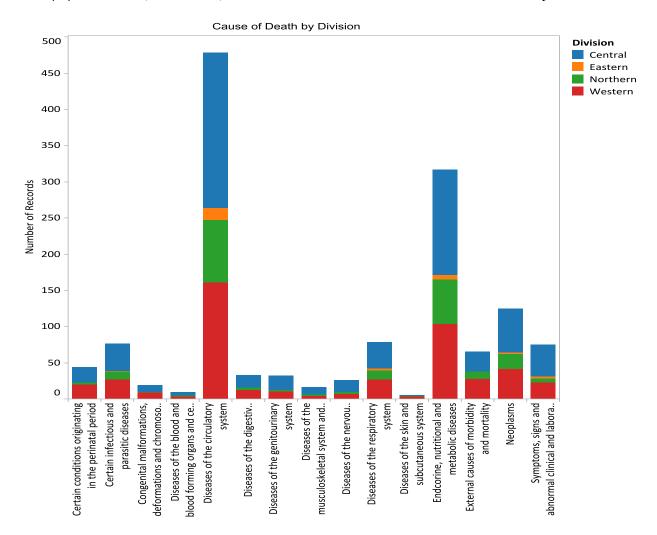
Tamavua/Twomev and Military Hospital were still pending

Compilation by the Division of Health Information Research and Analysis (HIU)

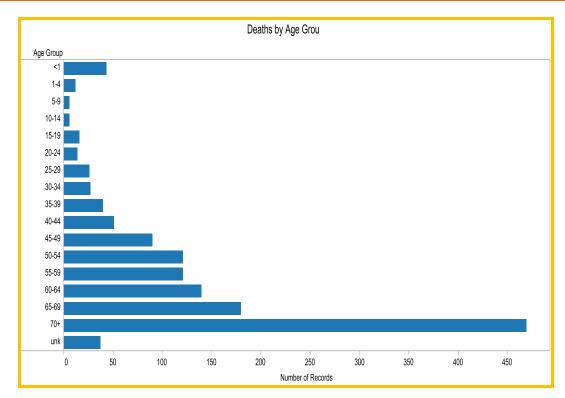
For any queries please contact Dr. Sheetal Singh on sheetal.singh@govnet.gov.fj or on ph: 3306177 ext 340171

MORTALITY

There were a total of 1399 deaths reported in the second quarter of 2012. Similar to the results of the second quarter, these constituted 58% males and 42% females. The major causes of death included: Diseases of circulatory system (34%), Endocrine, Nutritional and Metabolic disease (23%) and Neoplasms (9%).

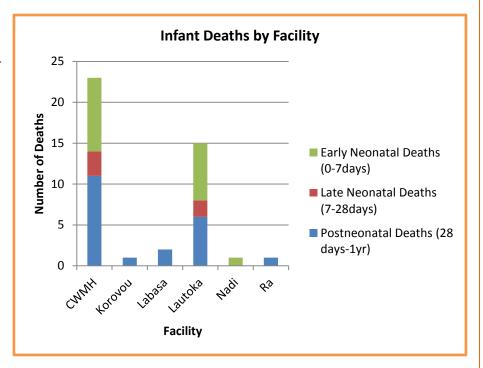


Diseases of circulatory system were the leading cause of death followed by endocrine, nutritional and metabolic disease in all the Divisions. Majority of deaths were reported from Central and Western Divisions, which is similar to the trends in the 2^{nd} quarter of 2012.



Most deaths reported among the 70+ age groups. A total of 55 deaths in the < 5 age group gives an estimated Under 5 mortality rate of about 11 per 1000 livebirths, which is lower the than numbers reported in the previous quarter of 2012.

There were a total of 43 infant deaths giving an estimated infant mortality rate of 8.4 per 1000 livebirths (using ¼ of 2011 livebirths as denominator). Majority of the deaths were reported in the post-neonatal period, followed by early neonatal period.

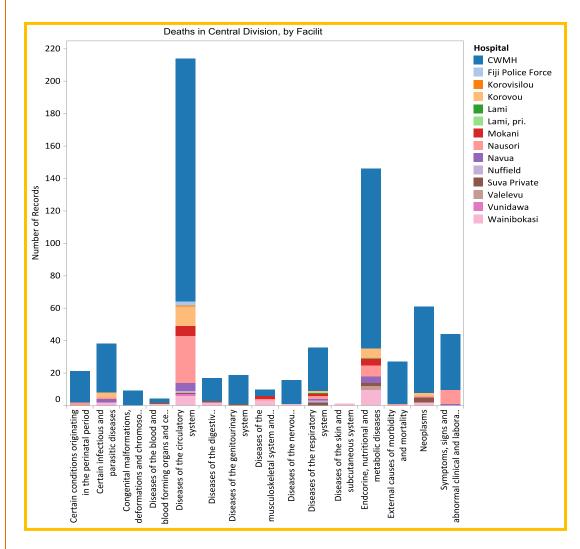


Causes of Death Among Male				
Description				
Certain conditions originating in the perinatal period	18			
Certain infectious and parasitic diseases	46			
Congenital malformations, deformations and chromosomal abnormalities	7			
Diseases of the blood and blood forming organs and certain disorders involving the	2			
Diseases of the circulatory system				
Diseases of the digestive system				
Diseases of the genitourinary system				
Diseases of the musculoskeletal system and connective tissue	4			
Diseases of the nervous system	16			
Diseases of the respiratory system				
Diseases of the skin and subcutaneous system				
Endcorine, nutritional and metabolic diseases	166			
External causes of morbidity and mortality				
Neoplasms	60			
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere class	42			

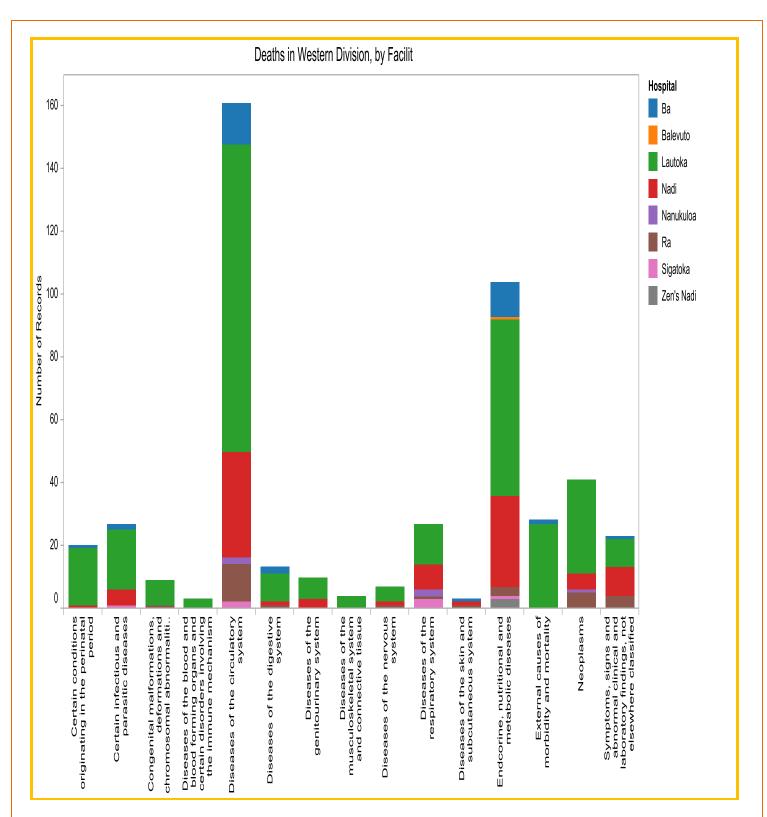
The commonest cause of deaths among both males and females were diseases of the circulatory system followed by endocrine, nutritional and metabolic disease (which includes Diabetes) and neoplasms.

There was twice the number of deaths due to diseases of the circulatory system among males compared to females. There were very similar number of deaths due to neoplasms and endocrine and nutritional disorders among males and females.

Causes of Death Among Female				
Description				
Certain conditions originating in the perinatal period	26			
Certain infectious and parasitic diseases	31			
Congenital malformations, deformations and chromosomal abnormalities	12			
Diseases of the blood and blood forming organs and certain disorders involving the	7			
Diseases of the circulatory system	164			
Diseases of the digestive system	9			
Diseases of the genitourinary system	12			
Diseases of the musculoskeletal system and connective tissue	12			
Diseases of the nervous system	10			
Diseases of the respiratory system	30			
Diseases of the skin and subcutaneous system	2			
Endcorine, nutritional and metabolic diseases	151			
External causes of morbidity and mortality				
Neoplasms	65			
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classi	33			



Similar to national level, in Central Division, majority of deaths were due to diseases of circulatory system followed by endocrine, nutritional and metabolic disease and neoplasms. Majority of deaths reported from CWMH followed by Nausori, Korovou and Wainibokasi Hospitals. The death rate is about 7.4 per 1000 population (using ¼ of 2011 Central Population), which is slightly more than the first quarter report (6.6).

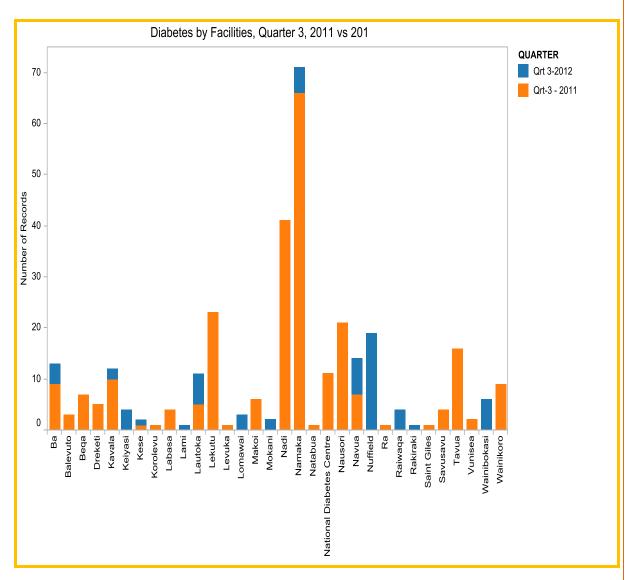


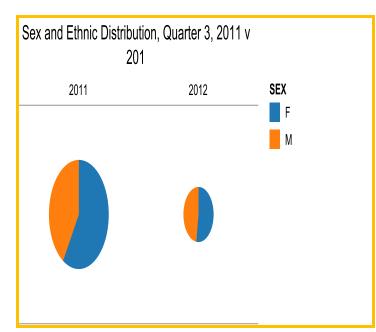
In the Western Division, diseases of circulatory system followed by endocrine, nutritional and metabolic disease and neoplasms also were the major causes of death. Majority of deaths reported from Lautoka Hospital. The death rate is about 5.3 per 1000 population (using ¼ of 2011 Western population). This is similar to the second quarter death rate of 5.8 per 1000 population.

NON-COMMUNIC ABLE DISEASES

Diabetes

A total of 65 new cases of Diabetes were reported in 2012 compared to 255 for the same period last year. 14 facilities had reported in the third quarter, compared to 15 facilities in the 2nd quarter. Among those facilities that reported, Nuffied had the highest number of new cases followed by Navua and Wainibokasi.



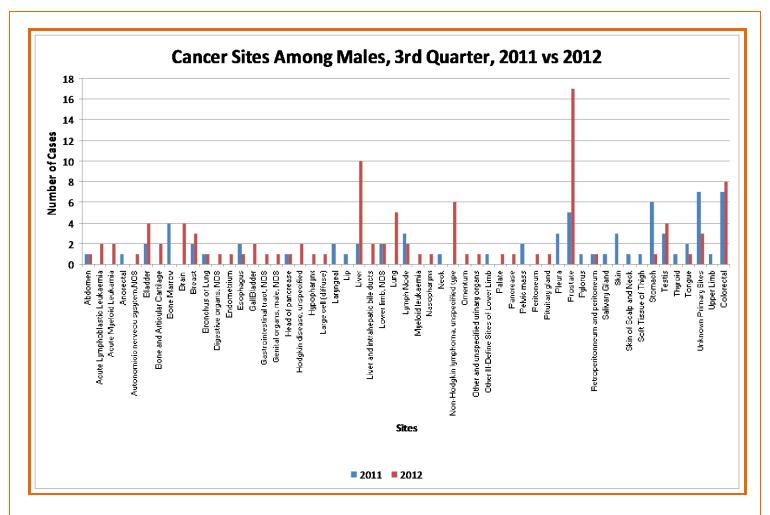


Age Distribution of Diabetes, Quarte 3, 2011 vs 201				
	Y	/R		
AGE GROUP	2011	2012		
20-24	-			
25-29	-	-		
30-34	-	-		
35-39		•		
40-44				
45-49		•		
50-54				
55-59				
60-64		•		
65-69		-		
70+		-		
unk		-		

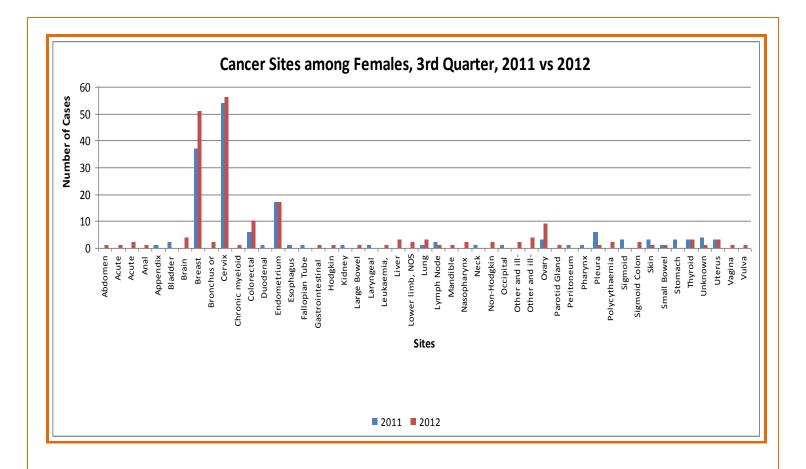
The age distribution of new cases has been similar to the pattern in the last quarter as well as for the same period last year, with most numbers of cases in the middle age population particularly 50-59 age group. In 2012 most cases were reported among Females of I-Taukei population compared to female Fijians of Indian descent last year.

Cancer

The statistics on cancer are presented using the ICD-O codes, compiled from histopathology, cytology reports, PATISPLUS reports and Death Certificates. A total of 298 cases of cancer were reported in 3rd quarter 2012 compared to 229 for the same period last year. Of these 69% were females and 31% were males. Majority of the cases were reported in the 55-59 age group which is similar to the 2nd quarter result this year.



Overall more cancers were reported in 2012 compared to the same period last year. Apart from unknown primary sites, Prostate, colorectal and liver cancers were the main cancer sites reported among males in the $3^{\rm rd}$ quarter for 2012. There were three times more prostate and liver cancers reported in 2012 in the $3^{\rm rd}$ quarter compared to the same period last year, especially from CWMH for prostate and Lautoka Hospital for liver cancers.

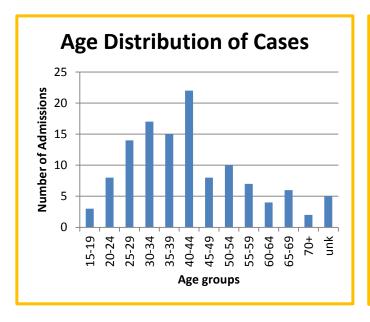


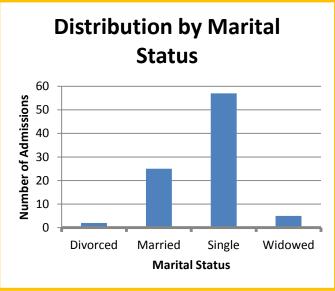
Similar to trends among males, there were in total more number of cancer cases in quarter 3 of 2012 compared to the same period last year. The main cancer sites among females in the 3rd quarter for 2012 include cervix, breast, ovary and endometrial cancers.

There were 7 cases in the paediatric population (0-14 years) in the third quarter of 2012 compared to 3 for the same period last year. These included: Polycythaemia vera (2), brain (3) and Lymphoblastic Leukaemia (2).

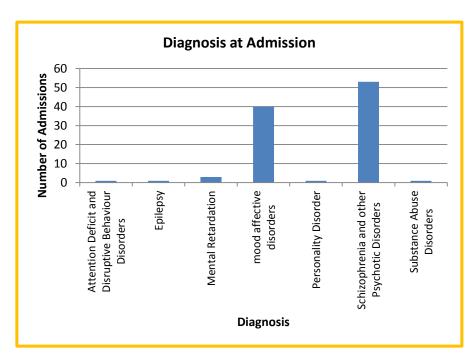
MENTAL HEALTH

The source of information on mental health was through the St. Giles Admissions Register. There were a total of 121 admissions in the third quarter, 2012 compared to 107 in the previous quarter. These cases comprised of 58% males and 41% females in the third quarter of 2012.





Majority of cases were in the 40-44 age group compared to 30-34 age group in the 2^{nd} quarter of 2012. Similar to 2^{nd} Quarter results, most admissions were among single individuals.



Apart from other causes for admission not specified, majority of admissions were due to Schizophrenia and other Psychotic Disorders. This was followed by mood affective disorders which comprised largely of Bipolar Affective Disorders.

Readmissions comprised 72% of the total admissions. The number of readmissions ranged between 2 and 56.

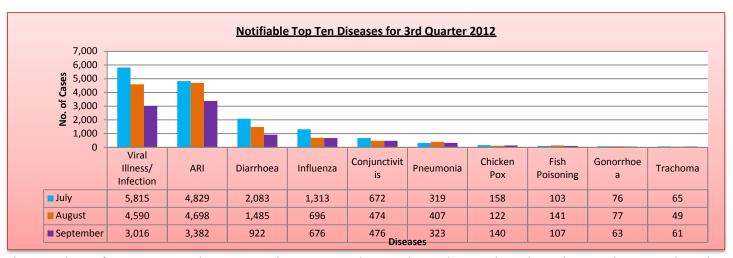
NOTIFIABLE DISEASES

Data for Notifiable Diseases are obtained from the Notifiable Diseases Certificates, every week - ending.

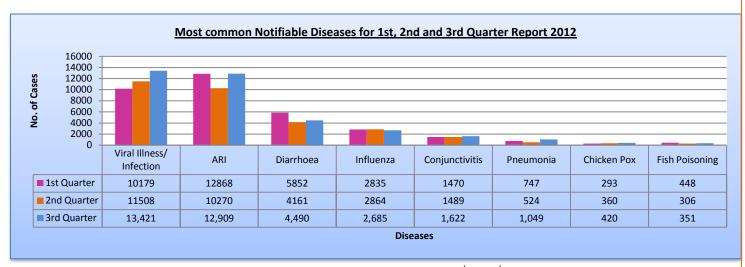
July recorded the highest number of cases, followed by August and September. This can be attributed to the timeliness of reports being sent by the facilities to HIU, hence reports still pending for the latter two months.

The leading diseases are Viral Illness, ARI, Diarrhoea, Influenza and Conjunctivitis.

Diseases	July	August	September	Total
ARI	4,829	4,698	3,382	12,909
Chicken Pox	158	122	140	420
Conjunctivitis	672	474	476	1,622
Dengue Fever	26	12	7	45
Diarrhoea	2,083	1,485	922	4,490
Dysentry - Amoebic	0	1	0	1
Dysentry - Bacillary	11	4	7	22
Typhoid Fever	27	24	10	61
Fish Poisoning	103	141	107	351
Ciguatera Fish Poisoning	0	13	0	13
Food Poisoning	9	9	0	18
Hepatitis	22	14	9	44
Influenza	1,313	696	676	2,685
Leptospirosis	37	7	3	47
Measles	2	0	1	3
Meningitis	5	3	2	10
Mumps	0	2	0	2
Pneumonia	319	407	323	1,049
Puerperal Pyrexia	1	0	1	2
Rheumatic Fever	3	0	0	3
Rubella	15	12	13	40
Trachoma	65	49	61	175
Viral Illness/ Infection	5,815	4,590	3,016	13,421
Whooping Cough	4	1	0	5
Gonorrhoea	76	77	63	216
Syphilis	42	39	20	101
Candidiasis	19	13	0	32
Chlamydia	2	0	0	2
Herpes Zoster	3	2	3	8
Trichomoniasis	0	1	0	1
Veneral Warts	0	0	1	1

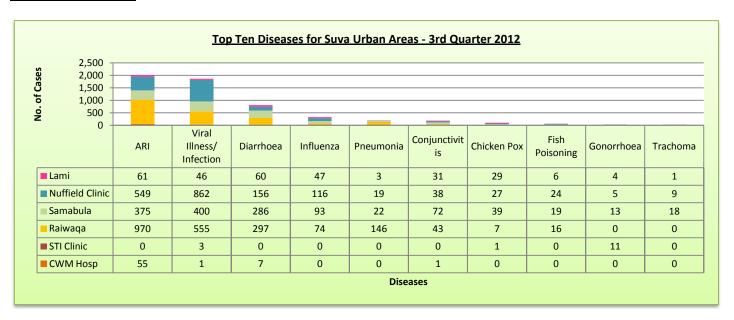


The number of cases reported in September is quite low and can be attributed to the timeliness and under reporting from the facilities in September.

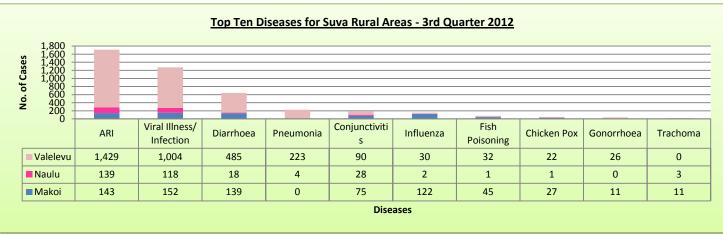


The graph shows the most common Notifiable diseases for the 1^{st} , 2^{nd} Quarter Reports 2012. It can be revealed that the disease trends are mostly in the same range for the 3 quarter reports.

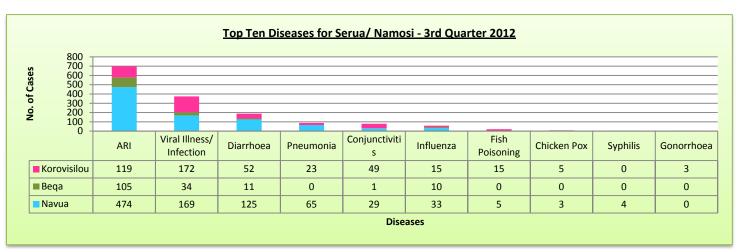
Central Division



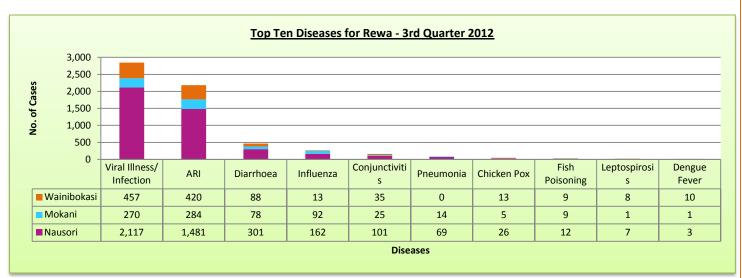
Graph showing the top ten diseases for Suva Urban Areas. The leading diseases are ARI, Viral Illness Diarrhoea, Influenza and Pneumonia. The facilities which reported the most number of cases were Raiwaqa, Nuffield Clinic and Samabula.



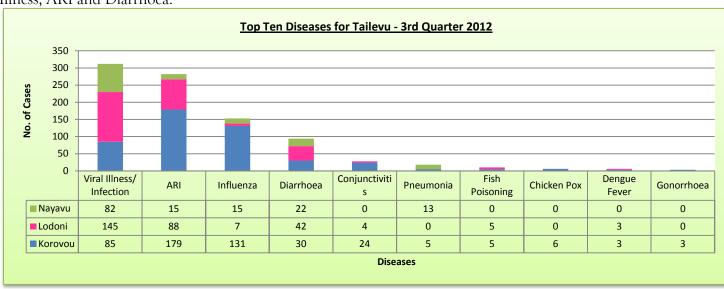
The most common diseases for Suva Rural Areas are ARI, Viral Illness and Diarrhoea. Valelevu has the highest number of diseases being reported, and can be attributed to the larger population catchment.



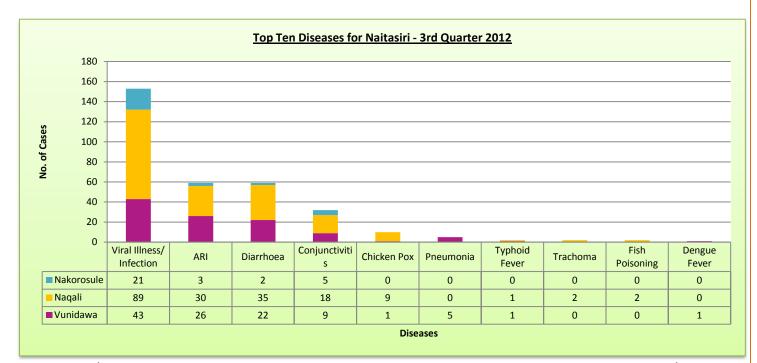
Among the facilities in the Serua/ Namosi subdivision, Navua has the highest number of cases. The most common diseases are ARI, Viral Illness and Diarrhoea.



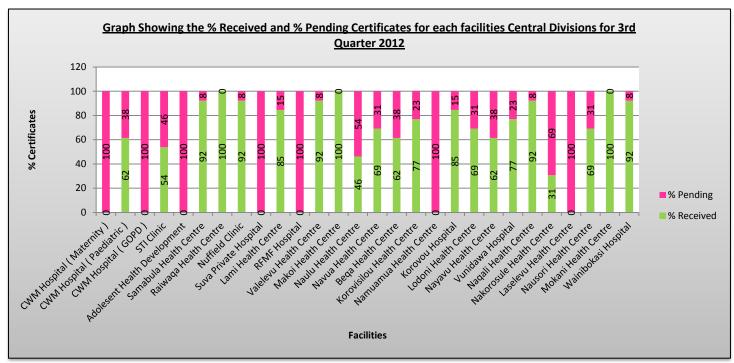
The highest number of cases recorded for Rewa Sub Division was reported from Nausori and included Viral Illness, ARI and Diarrhoea.



According to the Received Certificate Register for 2012 Nayavu Health Centre still pending with the 1st Quarter Reports and Lodoni has yet to submit the reports for January. The graph shows Viral Illness, ARI and Influenza are the most common diseases.

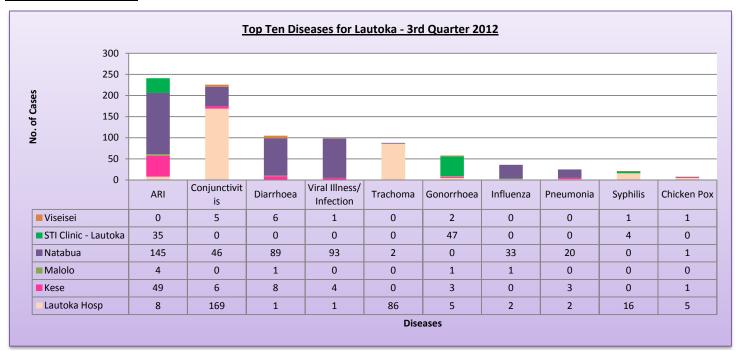


The 1st& 2nd Quarter Report indicated higher number of cases for Viral Illness as compared to 3rd Quarter Report. The above graphs for the Central Division illustrate trends for the different top ten diseases by sub division. Overall the most common diseases are Viral Illness, ARI and Diarrhoea. Many facilities have yet to submit their reports on time to HIU as illustrated by the graph below:

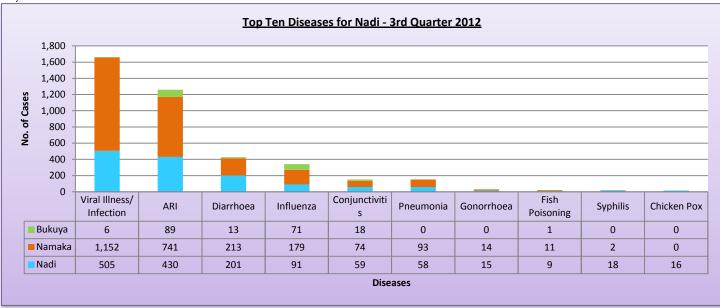


These reports are compiled in 1st week of October, still there are nearly 50% reports pending.

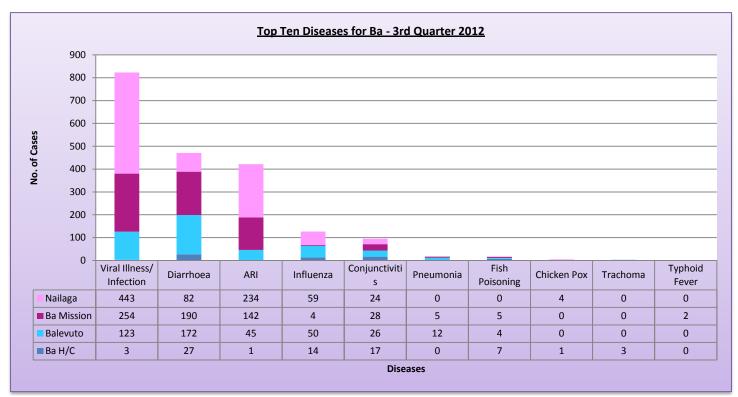
Western Division



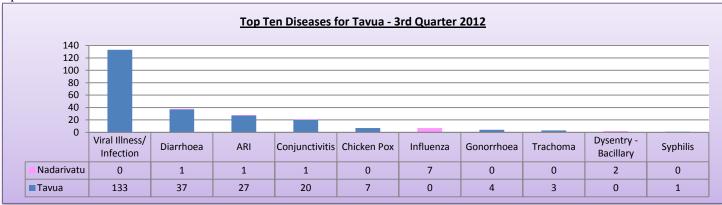
Lautoka Hospital and Natabua health centre reported the most number of Notifiable diseases. Conjunctivitis and Trachoma cases are high in Lautoka Hospital as these are being reported by the Lautoka eye department since July.



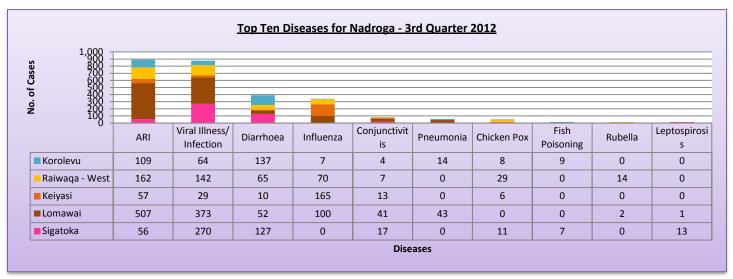
According to the Received Certificate Register for 2012 Nadi subdivision has submitted all the reports from January to date which were pending. Viral Illness is the leading disease reported from the Namaka Health Centre.



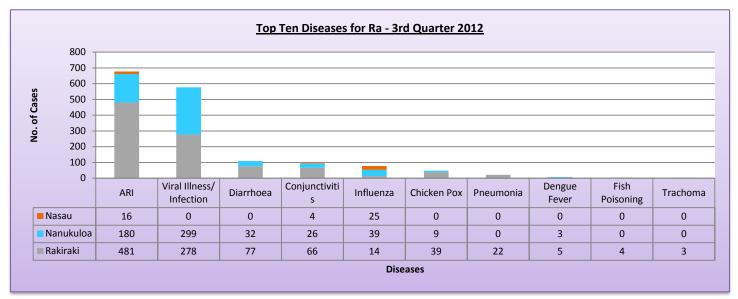
Viral Illness is the leading disease reported from Nailaga Health Centre in Ba Subdivision. Other common Notifiable Diseases from Ba sub division included Diarrhoea, ARI and Influenza and these were consistently reported from all facilities.



The graph shows that the leading disease is Viral Illness for Tavua Hospital.

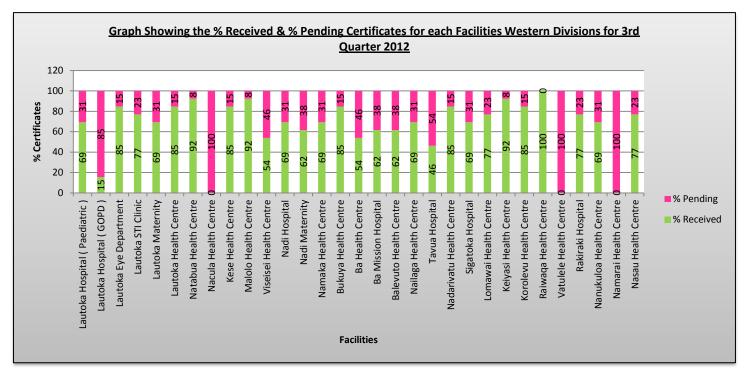


Of the top ten diseases for Nadroga subdivision the leading disease included ARI, Viral Illness and Diarrhoea.



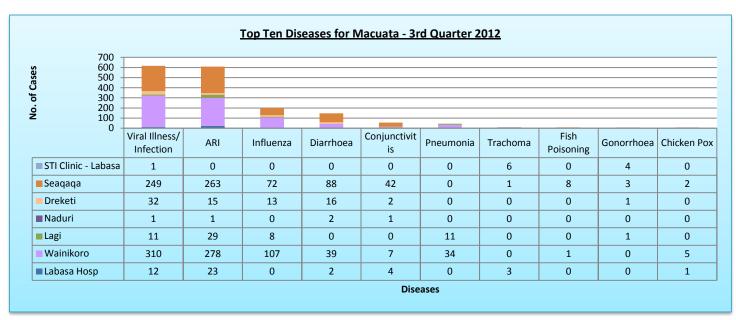
ARI and Viral Illness is the most common disease in Ra subdivisions. The highest number of cases is reported from Rakiraki and Nanukuloa.

For Western Division there were variations in the top ten diseases. However, overall the most common Notifiables in Western division are Viral Illness followed by ARI and Diarrhoea. Also noted is the poor reporting from the facilities which can influence accuracy of results and interpretation as illustrated below by the graph on reports received from the Western Division:

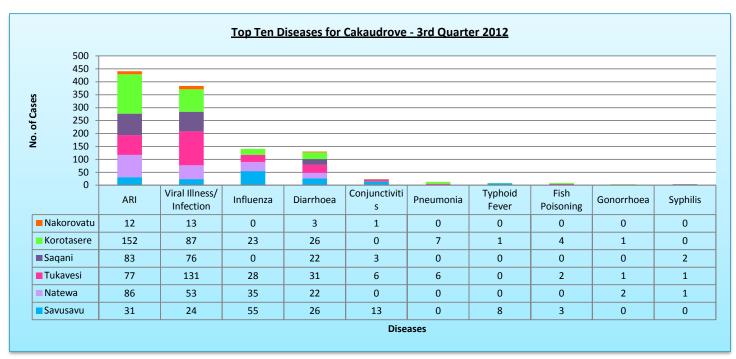


The graph shows that there are some facilities which did not submit reports on time and some failed to submit any reports at all.

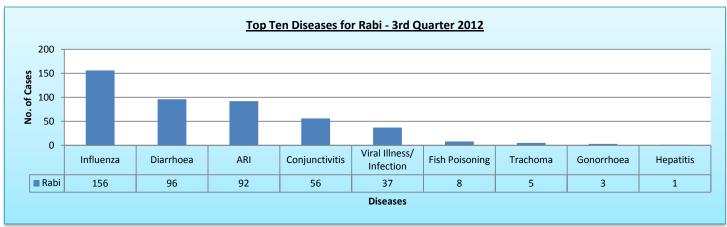
NORTHERN DIVISION



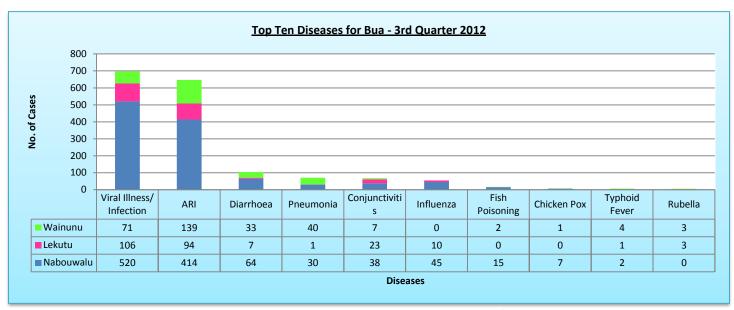
Of the top ten diseases from Macuata subdivision the leading diseases included Viral Illness, ARI and Influenza and are mostly reported from Wainikoro Health Centre and Seaqaqa Health Centre.



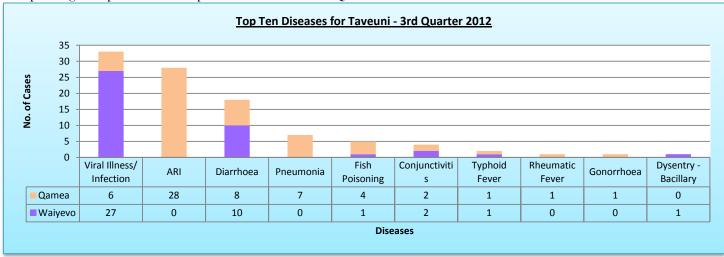
ARI and Viral Illness are the most frequent diseases reported from Cakaudrove. There is roughly equal distribution of cases among the various facilities in this subdivision.



The graph shows that the influenza was the most common disease reported from Rabi.

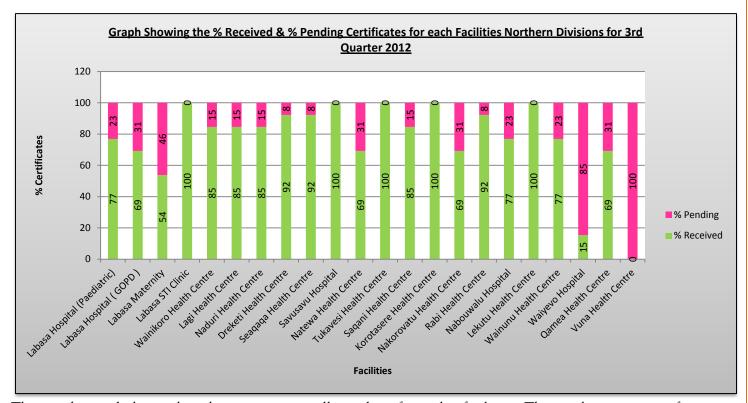


The leading diseases from Bua subdivision are Viral Illness and ARI. In the 3^{rd} Quarter Nabouwalu has improved its reporting compared to no reports received for 2^{nd} Quarter.



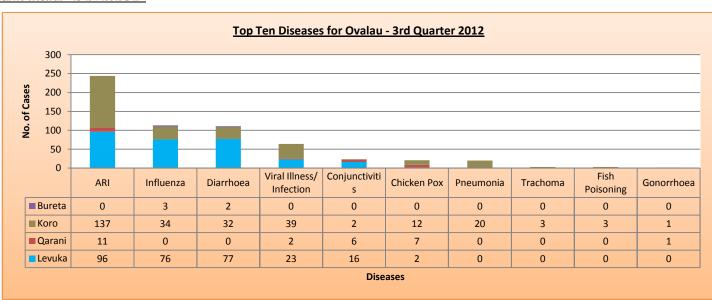
According to the received certificate register 2012, Taveuni subdivision did not submit all the reports. Qamea Health Centre reported till August only whereas, Vuna did not submit any report since June and Waiyevo Hospital did not submit their reports for 3rd Quarter.

In the Northern division the most common Notifiable diseases were Viral Illness and ARI. Some facilities did not report any diseases, and it is unclear if any cases were reported or this was due to failure to submit reports to HIU as shown by the graph below:

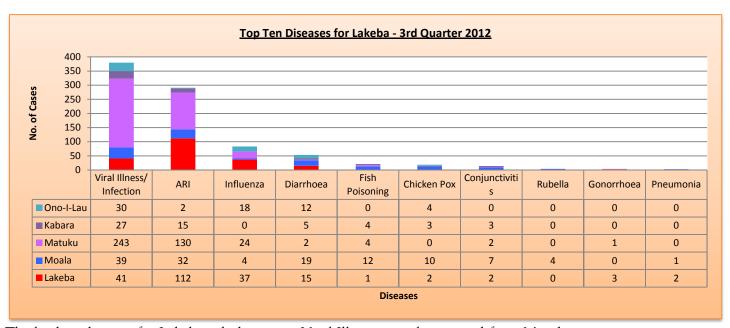


The graph trend shows that the reports are still pending from the facilities. The total percentage of reports received from Northern Division is 73%.

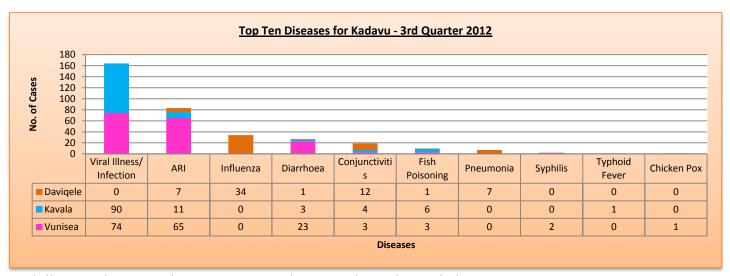
EASTERN DIVISION



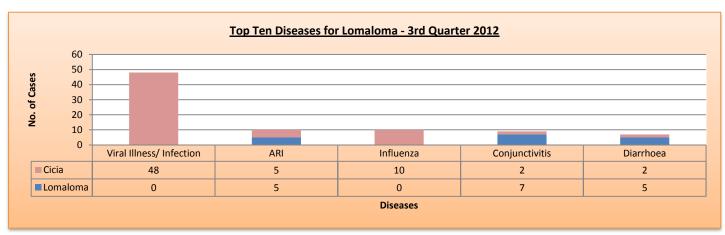
The leading disease for Ovalau is ARI. Most cases are reported from Levuka and Koro compared to other facilities.



The leading diseases for Lakeba sub division is Viral Illness, mainly reported from Matuku.

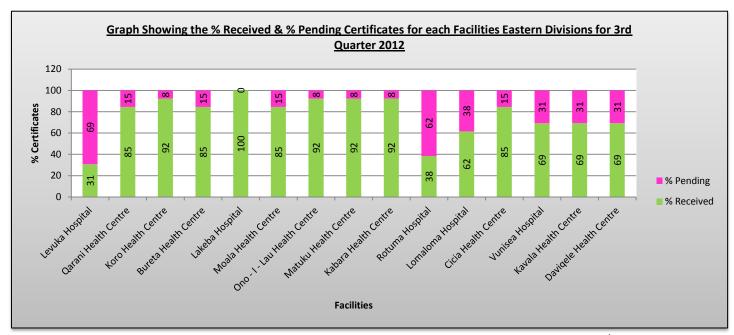


Viral Illness and ARI are the most common disease in the Kadavu sub division.

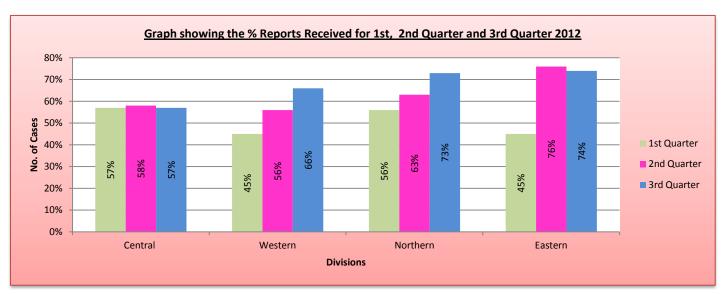


The leading disease for Lomaloma subdivision is Viral Illness.

In the 2nd Quarter, Rotuma only reported 3 cases of Fish Poisoning. Most of the reports are pending from this sub division as shown below:



Nevertheless, the reporting system for Eastern division has improved as compared to 1st and 2nd Quarter reports.

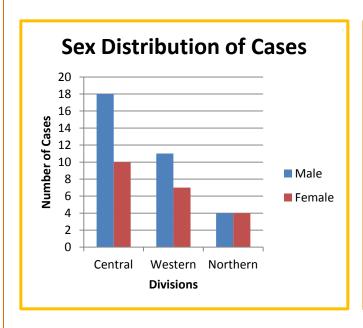


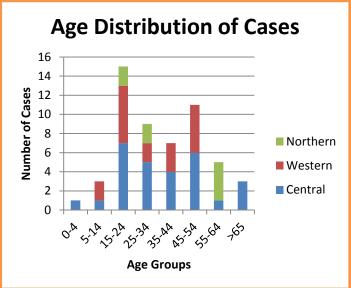
Source: NNDSS Forms 2012

It is apparent the submission of reports from health facilities throughout Fiji still has scope for improvement. In terms of reports received for 3rd Quarter 57% was received from central, 66% from Western, 73% from Northern and 74% from Eastern. It is encouraging to note that the compliance to reporting has improved compared to the 1st quarter and 2nd quarter report from all divisions, particularly in the Western and Eastern Divisions. Similar to the 1st quarter and 2nd quarter results, the leading Notifiable diseases for 3rd Quarter 2012 were Viral Illness, ARI, Influenza and Diarrhoea. Hence, appropriate strategies should be initiated to reduce the incidence of these diseases.

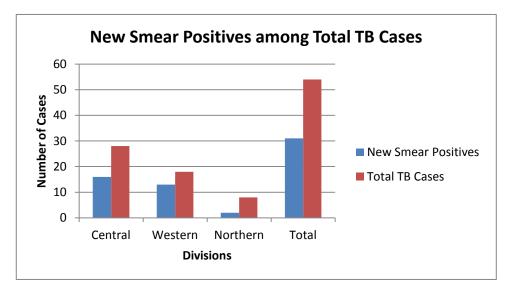
TUBERCULOSIS (TB)

Data on TB was obtained from the National TB Programme. A total of 54 new cases of TB reported in the third quarter compared to 53 in the 1st and 2nd quarters of 2012, which means a total of 160 cases registered in 2012. There were no relapse cases and 2 default cases in the third quarter. Extrapulmonary TB cases comprised of approximately 22% of all TB cases in the 3rd Quarter.

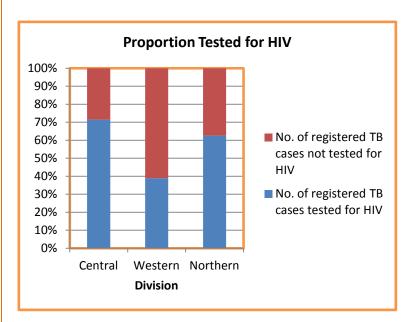




Overall more cases were recorded among males than females except in the Northern Division where equal numbers were reported. Majority of cases were among the 15-24 age group followed by 45-54 age group. There was no particular pattern in the age distribution among the different Divisions.



57% of the total TB cases were smear positive in the 3rd Quarter, 2012.



About 59% of the cases were tested for HIV at national level, with the highest proportion tested from the Central Division. NTP has noted a decrease in the percentage of HIV testings since VCT trainings were conducted and the programme has recognised the need to relook at the quality of the training and to conduct an evaluation on the main reasons for the decrease in order to recommend strategies for increasing HIV testing among TB patients. NTP is currently stressing on counseling and testing of both inpatients and outpatients.

Of the 29 patients who were evaluated for outcomes in the third quarter, the pie chart indicates that majority were cured (90%). This is a major improvement in the cure rates from 68% as reported in the 2nd quarter report. NTP attributes this to active default tracing and the gaps which have been identified in the process are being addressed in the Operational Plan

