

VIJILANSIA NO RESPOSTA INTEGRADU BA MORAS
INTEGRATED DISEASE SURVEILLANCE AND RESPONSE
(IDSR)

Matadalan ba implementasaun iha Timor-Leste



Republica Democratica de Timor-Leste
Ministerio da Saude

VIJILANSIA NO RESPOSTA INTEGRADU BA MORAS INTEGRATED DISEASE SURVEILLANCE AND RESPONSE (IDSR)

Matadalan ba implementasaun iha Timor-Leste



**Republica Democratica de Timor-Leste
Ministerio da Saude**

suporta husi



**World Health
Organization**

Timor-Leste

**World Health Organization
Country Office for Timor-Leste**



STRONG TL

Surveillance Training
Research Opportunities
National Guidelines
for communicable disease control in Timor-Leste

**Menzies School of Health Research and
STRONG TL project**

Governu Australia



Australian Government



Governu Australia liu husi Departamentu Negocius Estranjeirus no Komersiu kontribui ba desenvolve publikasaun ida ne'e. Opiniaun nebe expresa iha publikasaun ida ne'e husi autor mesak no opiniaun sira laos nesesariamente opiniaun Governu Australia.

Revisaun Setembru 2022

Konteúdu

Prefásiu	7
Introdusaun	9
Doencas prioridade iha Timor-Leste	11
Investigasaun surtu.....	12
Definisaun kazu no responde ba saude publika	13
Acute flaccid paralysis (AFP).....	14
Anthrax	16
Asidente trafiku - <i>Traffic accident</i>	17
Campylobacteriosis.....	18
Chikungunya virus infeksaun	19
Moras virus corona 2019 - (COVID-19)	20
Dengue virus infeksaun.....	22
Diarea ho ran/ Te'ben ho ran - <i>Bloody diarrhoea</i>	24
Diareia simples/ Te'ben agudu - <i>Simple diarrhea</i>	25
Difteria – <i>Diphtheria</i>	26
<i>Dog bite</i> – Asu tata	28
Frambuzia - <i>Yaws</i>	29
Gripe - <i>Influenza</i>	30
<i>Haemophilus influenza</i> (invasivu)	31
Hepatitis A	32
Hepatitis B	34
Hepatitis C	35
Síndroma ikterísia agudu - Hepatitis/Viral (Acute jaundice syndrome).....	36
Human immunodeficiency virus (HIV)	37
Infeksaun Respiratorio Superior Aguda - <i>Influenza Like Illness (ILI)</i>	38
Isin manas ho rash - <i>Fever with rash</i>	40
Japanese encephalitis virus (JEV).....	42
Kolera - <i>Cholera</i>	43
Lepra - <i>Leprosy</i>	45
Malaria	46
Meningitis ka encephalitis - <i>Meningitis/encephalitis</i>	47
Monkeypox virus infection – <i>Infeksaun monkeypox</i>	49
Moras fuan reumatika - <i>Rheumatic heart disease (RHD)</i>	51
Papeira - <i>Mumps</i>	52
Pertusis - <i>Pertussis</i>	54
Plague.....	56

Pneumonia (<5 anos) - <i>Pneumonia (<5 years old)</i>	57
Polio	58
Rabies - <i>Rabies</i>	59
Rotavirus	61
Rubella	62
Congenital rubella syndrome (CRS)	64
Salmonellosis	66
Sarampo – <i>Measles</i>	67
Skabies - <i>Scabies</i>	69
<i>Severe Acute Respiratory Infection (SARI)</i>	70
<i>Severe Acute Respiratory Syndrome (SARS)</i>	72
Shigellosis	74
Smallpox	75
<i>Streptococcus pneumoniae</i> (invasiv) - <i>Streptococcus pneumonia</i> (invasive)	76
Tetanus neonatorum - <i>Neonatal tetanus</i>	77
Tetanus (idade boot liu loron 28).....	78
Typhoid	79
Tuberculosis (TB) - <i>Tuberculosis</i>	80
Ulsera genital/ Ulkun genital - <i>Sexually Transmitted Infections (STI)</i>	81
Varisela - <i>Chicken pox (zoster)</i>	82
Viral haemorrhagic fevers (Ebola, Lassa fever, Marburg, Crimean Congo).....	83
Yellow fever.....	85
Zika virus infeksaun.....	86
Akronimu no simbolu	87
Referensias.....	88

Prefásiu

IDSR (Vijilansia no Resposta Integradu ba Moras – i.e. *Integrated Disease Surveillance and Response*) hanesan estratéjia ida iha sistema vijilansia epidemiolojia hodi indentifika, rekolla, no relata kazu moras sistematika no kontinuantemente. Iha Timor-Leste iha Sistema vijilansia 2 (rua) ne'ebé uza daudaun iha nível nasional no municipiu. Ida maka Sistema Vijilansia Bazeia ba Indikador (*Indicator-Based Surveillance* [IBS]), ne'ebe inklui vijilansia sindroma (sintomas), vijilansia sentinela no vijilansia bazeia ba rezultadu laboratorium. Dadus agregadus vijilansia IBS relata kada semana no kada fulan husi facilidade saude sira hotu iha Timor-Leste. Sistema vijilansia ida seluk maka Vijilansia Bazeia ba Eventu (*Event-Based Surveillance* [EBS]), ne'ebe relata diretamente ba Ministériu da Saúde informasaun kona ba eventu (surtu) ka rumor sira kona ba eventu ne'ebé afeta saude publika.

Iha Timor-Leste Departementu Vijilansia Epidemiolojia no Departementu Kontrolu Moras Hadaet (CDC), Ministériu da Saúde iha kapasidade atu responde no halo prevensaun ba moras sira ne'ebé tama iha lista prioridade, nomós moras iha vijilansia nia ókos. Ministériu Saúde mós halao nia obrigasaun tuir *International Health Regulations 2005* (IHR) no planu estratéjiku nasional sira ne'ebé relevante.

Matadalan ba IDSR ida ne'e iha foka ba aspetu 4 (ha'at):

1. Moras risku ne'ebé konstitui perigu endémiku,
2. Moras ne'ebé ba eliminasaun no eradikasaun,
3. Moras sira ne'ebé presiza finansiamentu ka programa espesial, no
4. Moras importante sira ne'ebé governu presiza monitora no kontrola.

Atu bele responde ba ejizensia atu fó resposta adekuada, Diresaun Jeral Prestasoens iha Saúde, Ministériu Saúde, fo instrusaun ba estrutura saúde tomak iha nível servisu saúde munisipiu, sentru saúde komunitáriu, postu saúde, ospital sira no klinika privada sira hotu atu identifika no relata kazu suspeitu ba moras prioritarius sira ne'ebé deskreve ka tama iha lista IDSR, no rekolla amostra atu halo investigasaun hodi determina etiolojia no resposta ne'ebé adekuada.

Esforsu atu bele prevene no kontrola moras prioridade sira tuir lista IDSR presiza sosializasaun matadalan IDSR ida ne'e ba pesoal saude hotu iha Timor-Leste.

Iha 2020, moras COVID-19 hadaet ba nasaun hotu. Desde 2022, estratejia vijilansia ba COVID-19 sei tuir Estrategia Vijilansia Integradu Moras Respiratoriu (*Integrated Surveillance of Respiratory Pathogens in Timor-Leste*).

Apoi u atu desenvolve matadalan ida ne'e mai husi Organizasaun Mundial Saúde (OMS/WHO) no projeitu STRONG TL (*Surveillance, Training, Research Opportunities and National Guidelines* ba moras hadaet iha Timor-Leste).

Matadalan ida ne'e disponível mós iha lian Tetum no agora daudaun tama ona edisaun daruak, desenvolve husi Departementu Vijilansia Epidemiolojia. Ami hein katak matadalan ida ne'e bele sai instrumentu ne'ebé fortifika programa vijilansia no epidemiolojia atu bele hetan susesu iha esforsu atu kontrola moras hadaet iha Timor-Leste.

Ikus liu, hau hein katak maluk sira sei uza matadalan ida ne'e durante halao imi nia knar nudar professional saude iha Timor-Leste, atu servi ita nia maluk Timor oan tomak iha area saúde.

Obrigada barak.


Dra. Odete da Silva Miegas, Dermatologista
General Director Of Health Services, Ministry Of Health, RDTL

Introdusaun

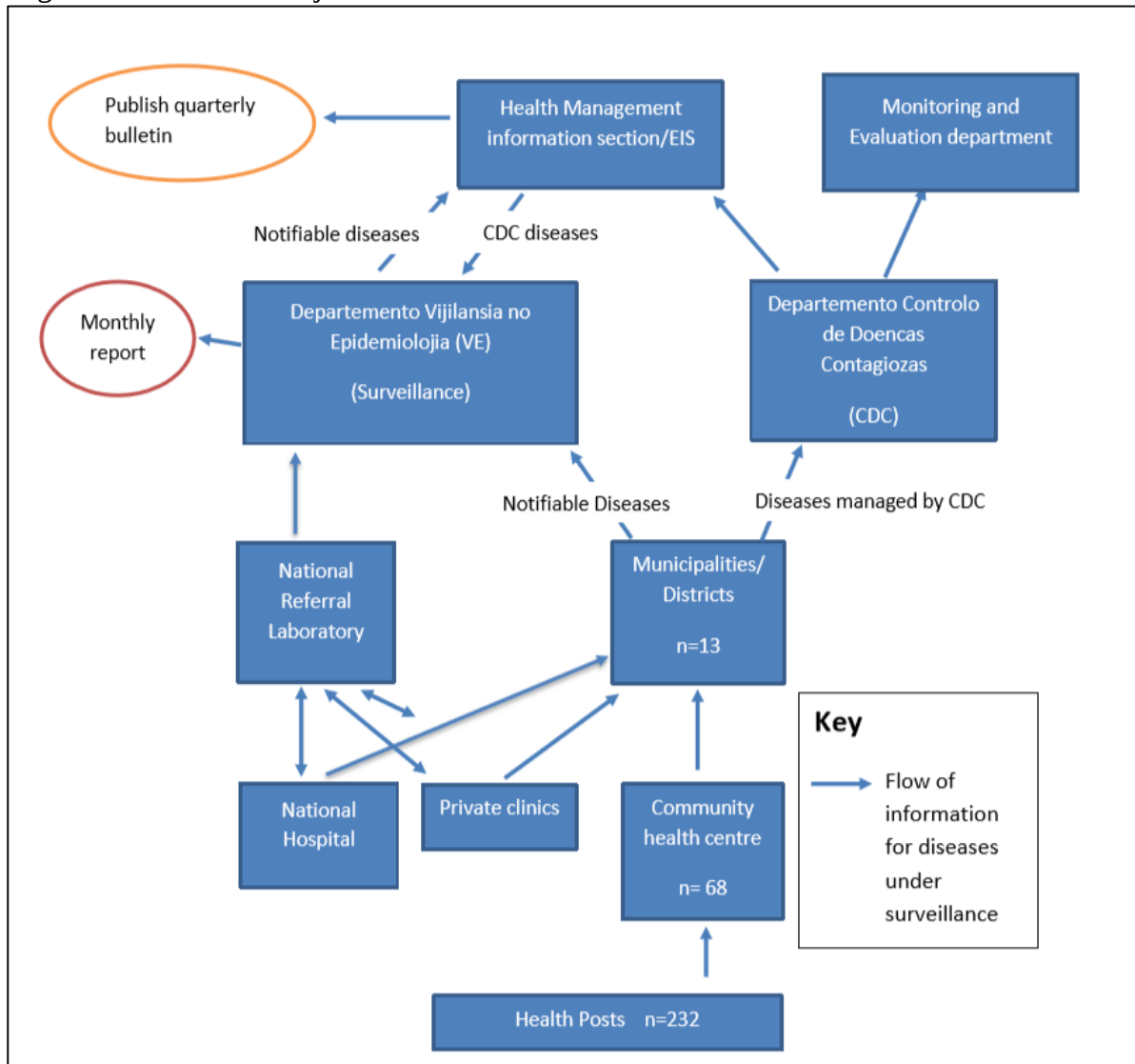
Vijilansia iha Timor-Leste

Atividade vijilansia saúde pública defini nu'udar “kolesaun sistemátiku kontinua, analiza, no interpretasaun dadus no diseminasaun apropriadu hosi dadus hirak-ne'e ba sira ne'ebé responsável ba prevensaun no kontrola moras no injúria” (Thacker and Berkelman, 1988). Sistema vijilansia saúde pública establese ona iha Timor Leste. Sistema vijilansia primeru iha Timor-Leste maka *indicator-based surveillance* (IBS), ne'ebe inklui vijilansia sindroma (sintomas), vijilansia sentinel no vijilansia laboratorium. Dadus vijilansia IBS relata kada semana no kada fulan husi facilidade saude sira hotu iha Timor-Leste. Sistema vijilansia segundu maka *event-based surveillance* (EBS), ne'ebe informasaun relata kona ba eventu sira bele afeta saude publica. Informasaun ida ne bele formal (liu husi sistema vijilansia) ka informal (exemplu. media, relata liu husi departamentu seluk, husi povu/komunidade). Informasaun kona ba EBS tenki investiga atu hapara risku ba saude publica (World Health Organization, 2008).

Departamentu Vijilansia Epidemiolojia (*Surveillance and Epidemiology Department* – ‘VE’) no Departamentu Controlo de Doencas Contagiosas (*Communicable Disease Control Department* – ‘CDC’) iha Ministério da Saúde (*Ministry of Health* -MdS) maka *focal point* kona ba vijilansia moras no resposta iha nivel nasional. CDC halo vijilansia no responde ba malaria, *human immunodeficiency virus* (HIV), tuberkulosis (TB), moras negligensiadu tropikal (*neglected tropical disease* - NTD) no eventu *International Health Regulation* (IHR). VE halo vijilansia no responde ba doencas seluk. Iha futuru, kapasidade laboratorium iha Timor-Leste sei desenvolve. Atividade vijilansia sei muda husi vijilansia sintomas ba vijilansia laboratorium.

VE no CDC reportajem ba Diretor Servicos de Saude no Diretor Nacional Controlo Doencas. Dadus IBS no dadus EBS relata husi municipio no centro de saude sira. Dadus uza atu halo *Quarterly Bulletin*. Sistema Informasaun no Jestaun Saude (SIJS) ka *Health Management Information System* (HMIS), Unidade Monitorizasaun no Evaluasaun iha Departamento Politika no Planeamento, Ministerio da Saude. Desde 2018, VE no *World Health Organization* (WHO), kolabora atu halo kada fulan, *Timor-Leste Epidemiological Bulletin*. Iniciativu iha ona atu desenvolve sistema informasaun saude elektronika (DHIS2), no sistema ida ne moos bele haforsa liu tan IDSR.

Fugir 1 hatudu sistema vijlansia iha Timor-Leste.



Fugir 1: Sistema vijlansia iha Timor-Leste.

Atu implementa IDSR, VE no CDC iha nivel nasional, no officer sira iha nivel municipiu (DPHO-CDC) tenki analisa no interpreta dados ne'be relata husi facilidade saude sira, no relatoriu bainhira iha indikasaun surtu. IDSR sei haforsa kapisidade atu responde ba moras perigu ne'be bele risku epidemiku no haforsa kapisidade atu responde ba moras prioridade seluk. Prevensaun, kontrolo no eliminaun ba moras prioridade importante loos atu desenvolve saude publika iha Timor-Leste.

Doencas prioridade iha Timor-Leste

Iha Timor-Leste, doencas contagiosas iha tipo 4: 1. Moras perigu ne'ebe bele risku epidemiku; 2. Moras ne'ebe programa atu responde iha ona; 3. Moras ne'ebe programa iha atu hetan eliminaun ho eradikasaun; 4. Moras seluk nudar governu presiza informasaun atu kontrolu. Moras ne'ebe tenki relata iha oras 24 nia laran maka iha Tabel 1.

Tabela 1. Doencas contagiosas iha Timor-Leste ne'ebe tenki relata iha oras 24 nia laran (imediata).

Doencas ne'ebe tenki relata iha oras 24 nia laran		
▪ Acute flaccid paralysis ▪ Anthrax ▪ COVID-19 (desde 2020) ▪ Kolera ▪ Infeksaun dengue virus ▪ Diphtheria ▪ Iisin manas ho rash ▪ Japanese encephalitis virus ▪ Malaria ▪ Sarampo ▪ Meningitis/Enkefalitis ▪ Monkeypox (desde 2022) ▪ Pertusis	▪ Tetanus neonatorum ▪ Poliomyelitis ▪ Plague ▪ Severe acute respiratory syndrome (SARS) ▪ Smallpox ▪ Typhoid ▪ Viral haemorrhagic fevers (Ebola, Lassa fever, Marburg, Crimean Congo) ▪ Yellow fever ▪ Zika ▪ Monkeypox (desde 2022) ▪ Ravies	

Investigasaun surtu

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Tabela 2: Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel). 2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR). 3. Prepara planu komunikasaun. 4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin). 5. Buka tuir kazu no investiga (uza formulariu nebe apropiadu investigasaun kazu, ou bele develope formulariu espesifiku ba investigasaun). 6. Hala'o investigasaun ambiental no kolekta amostra/sampel. 7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karakteristiku, etc.). Sempre halo epicurve. 8. Develope ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiologikal). 9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun). 10. Hakerek relatoriu no fahe ba entidade relevantes. * Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun	
--	---

Definisaun kazu no responde ba saude publika

Matadalan IDSR ida ne'e guia atu halo vijilansia ba doencas 54 iha Timor-Leste, iha 2022. Doencas balu hanesan bain-bain, balu nunka iha Timor-Leste. Doencas ida-ida maka iha definisaun kazu, resposta apropiada no fontes informasaun bainhira ita hakarak buka informasaun liu tan. Bainhira matadalan nasional ka internasional iha ona, referensia atu tuir, moos iha.



Simbolu mikroskopiu ida ne'e indika laboratorium tenki relata ba VE ka CDC tamba diagnosis tuir resultadu laboratorium.

Acute flaccid paralysis (AFP)



Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia sintomas deit.

Evidensia sintomas

- Labarik ho idade <15 nebe hetan paraliza ida ka liu iha ekstremitas nebe mosu derpenti no karakteristik paralizadu flaccida agudu (AFP)* (inklui *Guillain-Barré syndrome*)

ka

- Ema ida ne'be identifika tuir mediku nudar suspeitu polio

* AFP moras nebe ema bele hetan sintomas hanesan ekstremitas (ain ka liman) nebe mosu mamar, dada iis no tolan araska. Liu loron 1 to 10, ema bele hetan moras grave hanesan paraliza ka mate.

Responde ba saude publika

Refere ba matadalan AFP nian.

Relata kazu ba VE imediata. Tenke relata keda iha oras 24 nia laran tuir hirarkia servisu nian, bainhira identifika kazu suspeitu ba AFP.

Investiga kazu hotu para bele konfirma kazu polio ka eksklui, tuir definisaun kazu polio ne'ebe lo'os.

Uza "Formulariu Investigasaun AFP"

Kolekta amostra/sampel *feces* husi kazu no kontaktu - haruka ba laboratorium hodi teste ba poliovirus.

Buka informasaun sira inklui demográfiku, istória imunizasaun, data onset sintoma primeiru, rezultadu laboratóriu, rezultadu moras (moris, mate, transfere sai, falla atu follow up), klasifikasaun final (posível, provável, konfirmadu, hasai tiha tanba falla atu atinji definisaun kazu), data notifikasaun (fasilidade saúde notifika servisu saúde munisípu), data haruka formatu bazeia-kazu ba servisu saúde munisípu, identifikador úniku ba rejistu, identidade hosi ema ne'ebé kompleta formatu ne'e (naran, funsau, asinatura), no identidade supervisor hosi ema ne'ebé kompleta formatu ne'e.

Acute flaccid paralysis kontinua iha pájina tuir mai

Acute flaccid paralysis (AFP) – kontinua...

Formatu investigasaun bazeia-kazu tenki inklui dados;

- Demografiku (sexo, idade, hela fatin, etc.);
- Status vasinasaun ba polio (kuando nia simu vasina ona – relata fatin, tempo, tipo, etc.);
- Sintomas, inklui bainhira sintomas komesa, komplikasaun buat ruma iha ka lae (inklui mate), no doencas seluk iha bele halo kazu nia sistema imunidade fraku;
- Resultado laboratorium;
- Kazu konhece/hasoru ema seluk hanesan estranjeiru, ka ema risku iha ba polio, ka nia sai Timor-Leste; no
- Kuando kazu ba eskola ka hela iha institusaun (hanesan orphanage, eskola, etc.)

Kuandu ita investiga AFP, diagnose seluk bele inklui (list ne hirak tuir mai ne'e la kompletu)

- Polio paralitiku
- *Guillain-Barre syndrome*
- *Non-polio enteroviruses* moos bele halo moras paralitiku
- Infeksaun seluk (infeksaun raro/jarang), hanesan infeksaun ba koluna vertebral
- Tumor, bubuk
- Venenu
- *Stroke*

Hala'o jestau ba kontaktu

Verifika status imunizasaun ba polio. Bainhira la iha, promove imunizasaun.

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizazaun; 2018. Departamento Vigilancia Epidemiologia Diresaun Nasional Saude Publiku, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region (2017). Poliomyelitis.
http://www.searo.who.int/immunization/documents/sg_module3_polio.pdf

Anthrax



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: sintomas hanesan tipu/modelu anthrax NO identifikasaun (kultur ka detesaun liu PCR) ba *Bacillus anthracis* hosi sampel klíniku.

Kazu suspeitu: sintomas hanesan tipu/modelu anthrax, laiha evidénsia laboratóriu NO evidénsia epidemiológiku relasiona ho anthrax.

Moras agudu nebe bele akontese ho tipu/modelu hirak tuir mai, hanesan:

- a) **Cutaneus:** lesi nebe iha kulit laran hahu husi loron 1 – 6, bele moris husi tipu papular, vesikular, no kanek nebe akompaina ho bubu (edema)



- b) **Gastro-intestinal:** kabun moras nebe akompaina ho laran sa'e, mutah, vontade atu han laiha ka isin manas.
- c) **Pulmonar:** sinal inisio hanesan moras respiratorio agudu nomo'os bele mosu hipoksia, dyspnea no isin manas maka'as.
- d) **Meningeal:** isin manas maka'as derpentia akompania ho istika an, la bok an, koma ka mo'os bele mate.

*** Anthrax la hanesan ho fisur, diferença mak: anthrax nia kanek matan iha kor metan, maibe fisur nia kanek matan kor mean.**

Responde ba saude publika

Investiga no relata imediata!

Investiga kazu konfirmadu no kazu suspeitu hotu – Kontaktu Oficial unidade zoonotiku iha Dept. VE tuir hirarkia ne'ebe hanesan. **(Rekomenda tebes atu relata imediata mai iha nivel nasional).** Konsidera mos atu husu ajuda husi OMS.

Hala'o jestaun ba kazu

Investiga kazu/maluk atu identifika *exposure* (eg. Animal, produto animal nia, terrorismu, etc). bainhira ita identifika ona fontes nebe ita suspeitu, relata informaun tuir hirarkia servisu saúde nian no ministriu relevantes.

Hala'o jestaun ba kontaktu

Buka tuir ema seluk ne'ebe bele hetan (*exposure*) hanesan kazu.

Fontes informasaun

- World Health Organization (WHO). Guidelines for the Surveillance and Control of Anthrax in Human and Animals. 3rd Edition.
<https://www.who.int/csr/resources/publications/anthrax/whoemczdi986text.pdf?ua=1>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association

Asidente trafiku - *Traffic accident*

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia sintomas deit.

Evidensia sintomas

Ema ne'be hetan kanek ka mate liu husi asidenti trafiku.

E.g Karreta, motor, bemo, biis, trek shoke malu ka shoke ema.

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida.

Campylobacteriosis

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium:

Detesaun ka isolasaun ba *Campylobacter* iha sampel klinikal (e.g. feces).

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Presiza fo hano in ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seida uk premiti (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk) Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
3. Prepara planu komunikaun.
4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
5. Buka tuir kazu no investiga (uza formulariu nebe apropriadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
6. Hala'o investigasaun ambiental no kolekta amostra/sampel.
7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karaktaristiku, etc.). Sempre halo epicurve.
8. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiolojikal).
9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
10. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun

Fontes informasaun

- World Health Organization (WHO). *Campylobacter* (2019). <https://www.who.int/news-room/fact-sheets/detail/campylobacter>
- World Health Organization (WHO). Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008). https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1
- Northern Territory Government, Australia. Campylobacteriosis (2016). <https://nt.gov.au/wellbeing/health-conditions-treatments/digestive-health/bowel-infection>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association

Chikungunya virus infeksaun

Definisaun kazu



Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmado: presiza evidensia laboratoriu.

Evidensia laboratoriu

- Detesaun ba chikungunya virus liu *nucleic acid testing* (PCR);
KA
- Detesaun ba chikungunya-specific IgM, no la iha IgM ba dengue ka flavivirus seluk;
KA
- IgG seroconversion ka titre IgG chikungunya (CHKV-IgG) nia'n sa'e aas (liu dala4) iha *paired serology* (sampil tuir malu semana 3).

Responde ba saude publika

Relata kazu kazu konfirmadu ba Departamento VE imediata. Fo hatene VE iha nivel nasional.

Investiga no responde ba kazu hotu (suspeitu no konfirmadu). Officer surveillance iha CdS nia responsabilidade. Uza formulario investigasaun dengue nia. Bainhira liu kazu 1, halo *line-list* iha municipiu atu haruka ba Dept. VE iha nivel Nasional. Kolekta infomasaun demografiku, sintomas, data mosu, no fatin sira kazu visita iha tempu semana 2 moluk nia mosu sintomas.

Fo hatene Saude Ambiental, kazu nia hela fatin moos fatin kazu akontehse susuk.

Iha nivel municipio, DPHO-CDC no surveillance officer analisa dadus depois nia haruka dadus ba nivel nasional. Nia moos tenki fo hatene Saude Ambiental iha nivel Municipio atu ba halo intervensaun, tuir sira nia prosesu, atu kontrolu susuk.

Fontes informasaun

- World Health Organization Regional (WHO). Emergency Preparedness, Response - Publications, technical guidance on Zika virus.
<https://www.who.int/csr/resources/publications/zika/en/>

Moras virus corona 2019 - (COVID-19)

Definisaun kazu



Relatoriu: Kazu konfirmadu tenki relata.

1. Kazu konfirmadu:

Presiza evidensia detesaun SARS-CoV-2 virus liu husi nucleic acid testing (PCR) hosi specimen respiratorio;

ka

Detesaun SARS-CoV-2 virus nia antigen husi specimen respiratorio NO evidensia sintomas ILI ka SARI

ka

Detesaun SARS-CoV-2 virus nia antigen husi specimen respiratorio NO evidensia epidemiologiku (ie. *close contact*)

Evidensia sintomas

Desde 2022, estratejia vijilansia ba COVID-19 atu tuir Estrategia Vijilansia Integradu Moras Respiratoriu (Integrated Surveillance of Respiratory Pathogens in Timor-Leste).

Ema ne'ebe tuir definisaun kazu ILI ka SARI presiza koleta amostra teste be COVID-19.

Tuir nia hanoin, ema mediku bele kolleta amostra husi ema ida-ida, se mediku deskonfia ema bele iha sintomas COVID-19. ex. isin-manas, me'ar, sente fraku/kolen, ulun-moras, mialjia (isin moras), kakorok laran moras, coryza, dyspnoea, anorexia/laran-sa'e/muta, tebeen, mudansa ba kondisaun mental, lakon sentidu ba horon, lakon sentidu ba kokon sabor hahan.

Responde ba saude publika

Presiza responde ba kazu ida-ida. Tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Atu investiga kazu moras respiratoriu hotu (ILI/SARI/ARI/COVID-19/Influenza) uza formulariu "CASE INVESTIGATION FORM FOR INTEGRATED RESPIRATORY SURVEILLANCE (ILI, SARI, ARI, COVID-19, Influenza and RSV)".

Halo resposta tuir fali "Matadalan Nasional Konaba Vijilansia no Jestaun Kontaktu ba COVID-19 ba Timor-Leste".

Fo hanoin ba ema moras atu deskansa iha uma to'o nia mear para, no hatoman-an fase liman no takaibun bainhira me'ar, atu nune'e bele prevene transmisaun moras ba ema seluk.

Tempu grippe no surtu moras respiratoriu (surtu COVID-19 ka surtu grippe)

Halo sosializasaun iha comunidade atu promove aktividade prevensaun, espesialamente vasinasaun ba COVID-19, inklui *booster*. Fo hanoin ba ema moras atu deskansa iha uma to'o nia mear para, no hatoman-an fase liman no takaibun bainhira me'ar, atu nune'e bele prevene transmisaun moras ba ema seluk.

Tratamentu antiviral rekomena ba ema sira ho risku boot. Halo rekomendasaun bae ma sira risku boot ba fasilidade saude nian atu simu tratamentu apropiadu.

Bainhira iha indikasaun surtu:

- Kontaktu imediata ba responsavel Vijilansia Epidemiolojia tuir hirarkia servisu nian.
- Komesa halo *line-list*.

IMPORTANTE

Kazu COVID-19 tenki relata ba OMS, tuir Regulamentu Saúde Internacional ka *International Health Regulations (IHR) 2005*.

Immunizasaun efektivu tebes. Fase liman ho sabaun, moos uza maskra nudar aktividade efektivu liu hodi prevene transmisaun.

Fontes informasaun

- Matadalan Nasional Konaba Vijilansia no Jestaun Kontaktu ba COVID-19 ba Timor-Leste (Ver. 6, Atualizadu 22 Fev. 2021).
- “Timor-Leste Ministerio da Saude. Operational protocol for influenza-type illnesses (ILI) and Severe Acute Respiratory Infection (SARI) Surveillance for Influenza in Sentinel Sites in Timor-Leste (2018) - (Draft).”
- World Health Organization (WHO) Coronavirus 2019 (2022)
https://www.who.int/health-topics/coronavirus#tab=tab_1



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium; **KA**

Presiza evidensia sintomas **NO** evidensia epidemiologiku.

Kazu suspeitu: presiza evidensia sintomas deit.

* Dengue virus infeksiun INKLUI klasifikasaun 3; kmaan, natoon no grave. Klasifikasaun importante ba mediku sira atu fo tratamentu apropiadu. Vijiliansia nia responsabilidade atu konta kazu tuir definisaun kazu iha leten, moos relata dadus kona ba mortalidade no hospitalizasaun.

Evidensia laboratorium

- Detesaun ba dengue virus liu husi *nucleic acid testing* (PCR) **KA**
- Detesaun ba dengue *non-structural protein 1* antigen (NS1Ag), **KA**
- Detesaun ba dengue IgM, **KA**
- IgG seroconversion ka titre IgG dengue virus nia'n sa'e aas iha paired serology

Evidensia sintomas

Isin manas ($>38^{\circ}\text{C}$) **NO** buat-rua ka liu (≥ 2) tuir mai ne'e:

- Ulun moras
- Moras *retro-orbital* (iha matan nia kotuk)
- *Myalgia* (isin moras) ka *arthralgia* (fukun moras),
- Rash
- Manifestasaun hemorragiku
- Leukopaenia

Evidensia epidemiologika

Ema ne'be akontese sintomas iha fatin no oras hanesan tuir kazu dengue konfirmadu seluk.

Dengue kmaan (la iha sinais alerta sira)

Lla iha sinais alerta sira

A-1 La iha fator risiko sira

A-1 Isin-manas kmaan, kontajem normal ba platelet, la iha komplikasaun oi-oin, la iha evidensia husi extravasamento capilar

A-2 Fator risiko siha

- A1 + prezensa husi co-morbidade sira no fator risiko sira seluk.

Dengue moderado (natoon)

Ho sinais alerta no co-morbidade)

B-1. Isin-manas Dengue nian ho sinais alerta no sintoma sira

- Muta beibeik
- Senti moras/kii iha kabun
- Fraku/kolen/deskansa la diak
- Effusion/ascite pleural kmaan
- Hepatomegalia/aten boot
- Hct aumenta $>20\%$, ho sangramentu (ran fakar) kmaan

B-2. Ho risiko boot no kondisaun co-morbidade iha

- Bebe/labarik kikuan
- Katuas no Ferik

- Diabetes
- Tensaun ass
- Isin-rua
- CAD / CAD
- Hemoglobopatias
- Pasiente imunocomprometido
- Pasiente ne'ebe uza ka konsumu esteroides, antikoagulantes ka imunossuppressores.

Dengue grave

C-1. Soke kompensadu

C-2. Soke deskompensadu

C3- Hemorrojia makaas, envolvimentu orgaun grave desordem ne'ebe grave (Acidose, diseletrolitemia, etc).

Responde ba saude publika

Relata kazu konfirmadu ba Departamento VE imediata tuir hirarkia servisu ne'ebe iha ona.

Koleta amostra/sampel husi kazu suspeitu atu teste ba dengue. Bainhira positif – ne'e kazu konfirmadu.

Investiga no responde ba kazu hotu (suspeitu no konfirmadu). Officer surveillance iha CdS nia responsabilidade. Uza formulario investigasaun dengue nia. Halo *line-list* iha municipiu atu haruka ba Dept. VE iha nivel Nasional. Kolekta infomasaun demografiku, sintomas, data mosu, no fatin sira kazu visita iha tempu semana 2 moluk nia mosu sintomas.

Fo hatene Saude Ambiental, kazu nia hela fatin moos fatin kazu akontehse susuk.

Iha nivel municipio, DPHO-CDC no surveillance officer analisa dadus depois nia haruka dadus ba nivel nasional. Nia moos tenki fo hatene Saude Ambiental iha nivel Municipio atu ba halo intervensaun, tuir sira nia prosesu, atu kontrolu susuk.

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Comprehensive Guidelines for Prevention and Control of Dengue and Dengue Haemorrhagic Fever (2011). http://apps.searo.who.int/pds_docs/B4751.pdf
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Neglected Tropical Diseases – Dengue (2019). http://www.searo.who.int/entity/vector_borne_tropical_diseases/topics/dengue/en/
- Timor-Leste Guidelines for Clinical Management of Dengue Fever, 2022 (Draft).
- Timor-Leste Outbreak Guidelines, 2021 (Draft).
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.

Diarea ho ran/ Te'ben ho ran - *Bloody diarrhoea*

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia sintomas deit.

Evidensia sintomas: Te'ben agudu maka ida ne'ebé ho te'ben dala 3 ka liu iha oras 24 nia laran, ho raan vizivél iha feses.

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Presiza fo hanoin ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seidaun premiti (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk) Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
3. Prepara planu komunikasaun.
4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
5. Buka tuir kazu no investiga (uza formulariu nebe apropriadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
6. Hala'o investigasaun ambiental no kolekta amostra/sampel.
7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karakteristiku, etc.). Sempre halo epicurve.
8. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiologikal).
9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
10. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun

Fontes informasaun

- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO) Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008).
https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1
- World Health Organization (WHO) Guidelines for the control of shigellosis, including epidemics due to *Shigella dysenteriae* type 1 (2005).
<https://apps.who.int/iris/bitstream/handle/10665/43252/9241592330.pdf?sequence=1>

Diareia simples/ Te'ben agudu - Simple diarrhea

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia sintomas deit.

Evidensia sintomas

Te'ben agudu maka ida ne'ebé ho te'ben dala 3 ka liu iha oras 24 nia laran, no la iha raan.

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Presiza fo hanoin ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seidak premite (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk) Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
3. Prepara planu komunikaun.
4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
5. Buka tuir kazu no investiga (uza formulariu nebe apropriadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
6. Hala'o investigasaun ambiental no kolekta amostra/sampel.
7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karakteristiku, etc.). Sempre halo epicurve.
8. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiologikal).
9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
10. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun.

Fontes informasaun

- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO) Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008).
https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1

Difteria – Diphtheria



Definisaun kazu

Relatoriu; Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratoriu definitivu; **KA**

Presiza evidensia laboratoriu sugestivu no evidensia sintomas; **KA**

Presiza evidensia sintomas no evidensia epidemiologiku.

Kazu suspeitu: Presiza evidensia sintomas no diagnosis seluk la iha.

Evidensia laboratoriu definitivu

Detesaun ba toxigenic *Corynebacterium diphtheriae* liu husi inus ka gargantua.

Evidensia laboratoriu sugestivu

Detesaun ba *Corynebacterium diphtheriae* liu husi sampel respiratorio tract nia'n (*toxin production unknown*).

Evidensia sintomas

- Infeksaun *upper-respiratory tract* nia'n

NO

- Membrane (knalus) belit iha inus KA faringe (tatolan-kotan) KA tonsil (amigdala) KA larinje (kakorok-hun).



Evidensia epidemiologika

Ema nain 2 konhece/hasoru malu iha tempo kuando;

- a) Ema 1 maka **kazu konfirmadu** ba difteria **NO** bele contagioza (bain-bain semana 2 to semana 4 liu nia akontese/mosu sintomas)

NO

- b) Ema 1 tuir fali ho **evidensia sintomas** ba difteria, no sintomas komesa loron 2 to loron 5 liu nain 2 konhece/hasoru malu.

Difteria kontinua iha pájina tuir mai

Responde ba saude publika

Relata kazu suspeitu no konfirmadu ba Departamento VE imediata. Fo hatene VE tuir hirarkia servisu saúde ne'ebé mak iha.

Investiga kazu suspeitu no kazu konfirmadu difteria – uza formulariu ivestigasaun kazu difteria, grupu idade hotu.

Kolekta amostra/sampel *swab* husi *larynx*/garganta hodi teste ba *Clostridium Diphteria* iha Laboratoriu Nasional (hein resultadu).

Hala'o jestaun ba kazu

Isolamentu ba paciente – paciente tenki deskansa no dook husi ema seluk, to'o nia hemu aimoruk liu oras 48 tiha ona, ka liu semana 2 mosu sintomas.

Hala'o jestaun ba kontaktu

Identifikadu kontaktu sira iha uma laran.

Kontaktu ida ne'ebe ita identifika, foin kontaktu malu ho kazu iha loron 5 nia laran tenki hemu antibiotika, tuir matadalan OMS nian. Kontaktu sira presiza hetan vasina booster, karik sira la simu vasina difteria iha tinan 5 nia laran, no mos presiza vasina bainhira sira nunka simu ona vasina difteria nian.

Refere ba programa EPI (*extended program* Imunizasaun) atu fo vasina ba kontaktu sira. Buka tuir kazu seluk iha comunidade.

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizazaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Diphtheria (2017).
http://www.searo.who.int/immunization/documents/sg_module4_diphtheria.pdf

Dog bite – Asu tata

Definisaun kazu

Relatoriu: Tenki relata kazu hotu.

Evidensia

Ema ne'be asu tata.

Responde ba saude publika

Sedauk iha matadalan iha Timor-Leste.

Sumariu

La iha responde espesifiku ba kazu ida, bainhira asu tata ema (asu tata bainbain). Relata ba Departamento VE.

Ema kliniku tenki fo tratamentu tuir nia protokol (eg, fase moos, fo antibiotika, fo vasina tetanus)

Bainhira ita suspeitu asu tata iha ravies, ka ita suspeitu ema mosu ravies, ita tenki tuir matadalan ravies nia husi nasaun seluk (tuir fali iha kraik).

IMPORTANTE

Kazu provavel ravies: Ema ne'be mosu ensefalite agudu, ka sindroma paralitiku, ka la bok an, ka lakon sentidu, ka tauk be'e, ka mangame, NO animal siak tata ka naklees nia.

Kazu suspeitu ravies: Ema ne'be mosu ensefalite agudu (e.g sindroma paralitiku, ka la bok an, ka lakon sentidu, ka tauk be'e, ka mangame), NO dupois mate iha loron 10 nia laran (evidensia animal siak tata la iha).

Fontes informasaun

- World Health Organization (WHO). Animal bites (2019). <https://www.who.int/news-room/fact-sheets/detail/animal-bites>
- World Health Organization (WHO). Rabies (2019). <http://www.searo.who.int/india/topics/rabies/en/>
- Timor-Leste Rabies Guidelines (in development).

Frambuzia - Yaws

Definisaun kazu

Relatoriu: Relata kazu konfirmadu, kazu provavel no kazu suspeitu hotu.

Kazu konfirmadu: Presiza evidensia sintomas no evidensia laboratoriu definitivu.

Kazu provavel: Presiza evidensia sintomas no evidensia laboratoriu sugestivu.

Kazu suspeitu: Presiza evidensia sintomas deit.

Evidensia laboratoriu definitivu

Dual positive serology (a positive treponemal and non treponemal antibodies test) no:

- Dual path platform (DPP);

KA

- *Treponema pallidum* haemagglutination assay (TPHA) or *Treponema pallidum* particle agglutination assay (TPPA) **NO** Rapid plasma regain (RPR) positive.

Evidensia laboratoriu sugestivu

- Treponemal antibodies test positif

Evidensia sintomas

- Ema ho idade menus husi tinan 15;

NO

- Iha lesi iha kulit ka ruim sugestivu ba frambuzia hanesan; papilloma, ulkus, papilloma, papule, macule



Responde ba saude publika

Relata ba CDC (programa *Neglected Tropical Diseases*).

Programa sei resposta kazu ida-ida tuir nia matadalan.

Bainhira indikasaun surtu iha (kazu liu 1), konsidera buka kazu aumenta iha comunidade mo'os konsidera for tratamentu ba comunidade hotu.

Fontes informasaun

- World Health Organization (WHO). Eradication of Yaws: A guide for program managers (2018).
<http://apps.who.int/iris/bitstream/handle/10665/259902/9789241512695-eng.pdf;jsessionid=466C24E38ED859C8902587602C744891?sequence=1>

Gripe - Influenza

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia laboratorium.



Evidensia laboratorium

2. Detesaun influenza virus liu husi nucleic acid testing (PCR) hosi specimen respiratorio; **KA**
3. Detesaun influenza virus nia antigen hosi specimen respiratorio; **KA**
4. IgG seroconversion ka titre influenza virus sa'e aas iha paired serology; **KA**
5. Antibody titre aas liu hosi CFT or HAI ba influenza virus; **KA**
6. Isolasaun influenza virus hosi specimen respiratorio.

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Fo hanoin ba ema moras atu deskansa iha uma to'o nia mear para, no hatoman-an fase liman no takaibun bainhira me'ar, atu nune'e bele prevene transmisaun moras ba ema seluk.

Tempu gripe no surtu gripe

Halo sosializasaun iha comunidade atu promove aktividade prevensaun. Fo hanoin ba ema moras atu deskansa iha uma to'o nia mear para, no hatoman-an fase liman no takaibun bainhira me'ar, atu nune'e bele prevene transmisaun moras ba ema seluk.

Tratamentu antiviral rekomenda ba ema sira ho risku boot, maibe agora (2019), sedauk iha Timor-Leste.

Bainhira iha indikasaun surtu:

- Kontaktu imediata ba responsavel Vijilansia Epidemiolojia tuir hirarkia servisu nian.
- Bainhira ita deskonfia pasiente ne'e iha kontaktu ho animal, kontaktu direita ba ministriu relevante sira.
- Komesa halo *line-list*.

IMPORTANTE

Kazu SARS (*Severe acute respiratory syndrome*) tenki relata ba OMS, tuir Regulamentu Saúde Internacional ka *International Health Regulations (IHR) 2005*.

Kazu influenza subtype foun tenki relata ba OMS, tuir fali *International Health Regulations (IHR) 2005*.

Imunizasaun efektivu tebes maibe seidauk implementa iha Timor-Leste. Fase liman ho sabaun nudar aktividade efektivu liu hodi prevene transmisaun.

Fontes informasaun

- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO) Influenza (2019). <https://www.who.int/influenza/en/>

Haemophilus influenza (invasivu)

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium

Detesaun ka isolasaun ba *Haemophilus influenzae* iha sampel konsidera baibain sterila (e.g. raan, blood culture, CSF, etc).

Responde ba saude publika

Relata ba Departamento VE tuir hirarkia servisu ne'ebe mak iha (VPD).

Uza formulariu AES (*Acute encephalitis syndrome*) para investiga. Tenki hatene nia status imunizasaun ba HiB. Iha Timor-Leste, imunidade HiB liu husi vasina naran “Penta”. Fo hatene ba programa imunization (ba HiB vasina).

Hala'o jestaun ba kazu

Fo antibiotika apropiada ba *H. influenza* infection no fo rifampicin para elimina *H. influenza* iha inus nia laran.

Hala'o jestaun ba kontaktu

Identifika kontaktu vulnaravel (ema ne'ebe iha risku) iha uma laran ka eskola laran hanesan ne;

1. Labarik ida ho idade menus fulan 7 (la depende status imunizasaun), ka
2. Labarik ida ho idade fulan 7 to tinan 5, status imunizasaun ba HiB la kompletu, ka
3. Ema ne'ebe (la depende idade) ho sistema imunidade fraku, ka ema la iha ate-bok (*asplenic*), la depende status imunizasaun.

Fo kontaktu vulnaravel antibiotika rifampicin, maibe kuando ema isin rua ka la bele hemu rifampicin, fo ceftriaxone – tuir fali referencia².

Promove immunisazaun ba HiB (“Penta”) ba kontaktu sira hotu.

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Invasive Bacterial Disease (*Haemophilus influenza*). (2017). http://www.searo.who.int/indonesia/topics/immunization/module_7_-_ibd.pdf
- World Health Organization (WHO). Immunizations, Vaccines and Biologicals. Pneumococcal disease (2018). <https://www.who.int/immunization/diseases/pneumococcal/en/>
- Australian Government Department of Health. Series of National Guidelines (SoNGs) – *Haemophilus influenzae* type b invasive infection (2017). <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-hib.htm#contact>
- Centres for Disease Control and Prevention. Global pneumococcal disease and vaccine (2018). <https://www.cdc.gov/pneumococcal/global.html>
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Accelerating introduction of new vaccines and related technologies (2019). Available from http://www.searo.who.int/immunization/topics/new_vaccines/en/

Hepatitis A

Definisaun kazu



Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidénsia laboratorium NO evidensia sintomas.

Evidensia laboratorium

- Detesaun ba hepatitis A virus liu husi *nucleic acid testing* (PCR)

KA

- Detesaun ba hepatitis A IgM, iha eme ne'ebe, se ema la simu ona vasina foin dadauk

Evidensia sintomas

Sintomas hanesan **Síndroma ikterísia agudu**

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida.

Tenki for avisu ba ema kazu nia kontaktu sira (hanesan ne familia uma laran, labarik ba eskola hamutuk etc) – bainhira kontaktu mosu sintomas hanesan hepatitis A (kulit kinur), la bele ba servisu, ba eskola, ka prepara hahan, ka serve ema seluk (inklui troka popo).

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Kolekta amostra/sampel ran atu test iha NHL (hepatitis A).

Bainhira indikasaun surtu, uza formatu apropriadu atu investiga kazu sira. Maibe, hepatitis A nia tempu inkubasi naruk (tempu akontese virus to mosu sintomas bele loron 15 to loron 50). Transmisiaun hepatitis A *oral-faecal*. Bainbain liu husu kontaktu besik ema moras, kontaktu/hemu be'e foer, hahan hanesan chipu (*shellfish*), moos hahan fresku hanesan ai fuan ka modo matak. Ema moos bele hetan moras bainhira ema la fase liman iha darpur depois kontamina hahan (Ex. Iha festa ka ristorante).

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Hepatitis A continua iha pájina tuir mai

Responde ba indikasaun surtu

11. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
12. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
13. Prepara planu komunikasaun.
14. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
15. Buka tuir kazu no investiga (uza formulariu nebe apropiadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
16. Hala'o investigasaun ambiental no kolekta amostra/sampel.
17. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karaktaeristiku, etc.). Sempre halo epicurve.
18. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiolojikal).
19. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
20. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun

Ema ne'ebe mosu hepatitis A konsidera bele transmiti moras ba ema seluk, semana 1 nia mosu sintomas to semana 1 liu nia mosi kulit kinur (hamutuk semana 2). Durante bele transmiti, kazu sira la bele:

- Fo donasaun ran
- La bele prepara hahan ba ema seluk
- La bele aktividade sexual
- La bele atende labarik sira
- La bele ba servisu, inklui eskola
- La bele fahe sasan personal hanesan garfu, tudik, kanulu, toalia, eskova kose nehan etc

Fontes informasaun

- World Health Organization (WHO). Immunization, Vaccines and Biologicals. Hepatitis A (2019). <https://www.who.int/immunization/diseases/hepatitisA/en/>
- Australian Government Department of Health. Hepatitis A. Response for public health units. Communicable Disease Network of Australia (2018). www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-hepa.htm
- World Health Organization South East Asian Region (WHO-SEARO). Surveillance and outbreak alert. Viral Hepatitis (2019). http://www.searo.who.int/entity/emerging_diseases/topics/Hepatitis/en/
- Pacific Public Health Surveillance Network. Pacific outbreak manual (2016). https://www.pphsn.net/Publications/Pacific_Outbreak_Manual_Mar_2016.pdf

Hepatitis B

Definisaun kazu



Relatoriu: Kazu konfirmadu tenki relata.

Kazu komfirmadu: presiza evidensia laboratorium deit.

Evidensia laboratorium

- Detesaun ba hepatitis B surface antigen (HBsAg) ka hepatitis B IgM, iha eme ne'ebe, se ema la simu ona vasina foin dadauk

NO

- Resultado negativ ba hepatitis A IgM (se ema koko karik) no resultado negativ ba hepatitis E IgM (se ema koko karik).

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Relata ba CDC. Koordena ho CDC.

Fontes informasaun

- Timor-Leste Ministry of Health. Draft National Strategic Plan HIV and STIs, 2017-2021 (2016).
- World Health Organization (WHO). Hepatitis B (2018). <https://www.who.int/news-room/fact-sheets/detail/hepatitis-b>
- World Health Organization South East Asian Region (WHO-SEARO). Hepatitis B (2018). http://apps.searo.who.int/PDS_DOCS/B4752.pdf
- World Health Organization South East Asian Region (WHO-SEARO) (2019). Guidelines for verification of achievement of hepatitis B control target through immunization in the WHO South-East Asia Region (2019). <http://www.searo.who.int/immunization/highlights/verification/en/>

Hepatitis C

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu komfirmadu: presiza evidensia laboratorium deit.



Evidensia laboratorium

- Detesaun ba hepatitis C antibodies
KA
- Detesaun ba hepatitis C virus liu husi *nucleic acid testing* (PCR)

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Relata ba CDC. Koordena ho CDC.

Fontes informasaun

- Timor-Leste Ministry of Health. Draft National Strategic Plan HIV and STIs, 2017-2021 (2016).
- World Health Organization (WHO). Hepatitis C (2018).
<https://www.who.int/hepatitis/topics/hepatitis-c/en/>
- World Health Organization (WHO). WHO guidelines for the screening, care and treatment of persons with chronic hepatitis C infection (2016).
<https://www.who.int/hepatitis/publications/hepatitis-c-guidelines-2016/en/>
- World Health Organization South East Asian Region (WHO-SEARO). Hepatitis (2018).
<http://www.searo.who.int/entity/hepatitis/en/>

Síndroma ikterisia agudu - Hepatitis/Viral (Acute jaundice syndrome)

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia sintomas deit.

Evidensia sintomas

Labarik idade menus tinan 5 (exklui ikterisia neonatorum)

KA

Ema ne'be hetan moras agudu inklui sintomas 2 ka liu (≥ 2) hirak tuir mai ne'e:

- Isin manas;
- Senti mal geral (*malaise*);
- Kabun moras/dulas;
- Vontade atu han la iha;
- Laran-sa'e



NO

1 hirak tuirmae ne'e:

- Beku (*jaundice* – *penyakit kuning*, kulit kinur, matan kinur);
- Mii kor sugestivu beku;
- Nível serum aminotransferase ne'ebé elevadu (ALT ka AST)

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Koordena ho CDC.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Kolekta amostra/sampel ran atu test iha NHL (hepatitis A).

Fontes informasaun

- World Health Organization (WHO). WHO-recommended surveillance standard of acute viral hepatitis (2019).
https://www.who.int/immunization/monitoring_surveillance/burden/vpd/surveillance_type/passive/hepatitis_standards/en/

Human immunodeficiency virus (HIV)

Definisaun kazu



Relatoriu: Tenki relata kazu konfirmadu deit tuir informasaun tuirmae.

Ema boot no labarik idade boot liu fulan 18

Infeksaun HIV konfirmadu

- Resultadu positif ba HIV antibody (rapid or laboratory-based enzyme immunoassay). Tenki konfirma uza teste seluk (uza antigen diferente ka metodolojia diferente).

NO/KA;

- *Virological* teste positif ba HIV ka HIV nia components (HIV-RNA ka HIV-DNA ka *ultrasensitive* HIV p24 antigen). Tenki kolekta no teste amostra ida tan atu konfirma.

Labarik ho idade menus fulan 18

Infeksaun HIV konfirmadu

Virological teste positif ba HIV ka HIV nia components (HIV-RNA ka HIV-DNA ka *ultrasensitive*.

HIV p24 antigen). Tenki kolekta no teste amostra ida tan atu konfirma (la bele kolekta sampel atu konfirma husi labarik ho idade menus semana 4).

* HIV antibody testing la rekomende atu halo diagnosis infeksaun HIV (definitivu ka konfirmadu) iha labarik sira ho idade menus fulan 18.

Responde ba saude publika

Relata ba programa iha CDC atu koordena responde. Programa iha CDC sei tuir nia prosesu atu responde. Iha matadalan.

Fontes informasaun

- Timor-Leste Ministry of Health. Draft National Strategic Plan HIV and STIs, 2017-2021 (2016).
- World Health Organization (WHO). HIV (2019). <https://www.who.int/hiv/en/>

Infeksaun Respiratorio Superior Aguda - Influenza Like Illness (ILI)

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata

Kazu konfirmadu: Presiza evidensia sintomas deit.

Evidensia sintomas: Isin manas makas $\geq 38^{\circ}\text{C}$;

NO

Mear ka garganta moras;

NO

Ataka iha loron 10 ikus nia laran;

Responde ba saude publika

Desde 2022, estratejia vijilansia ba COVID-19 atu tuir Estrategia Vijilansia Integradu Moras Respiratoriu (Integrated Surveillance of Respiratory Pathogens in Timor-Leste). Tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Atu investiga kazu moras respiratoriu hotu (ILI/SARI/ARI/COVID-19/Influenza) uza formulariu “CASE INVESTIGATION FORM FOR INTEGRATED RESPIRATORY SURVEILLANCE (ILI, SARI, ARI, COVID-19, Influenza and RSV)”.

Ema ne’ebe tuir definisaun kazu ILI ka SARI presiza koleta amostra teste be COVID-19 no Influenza.

Tuir nia hanoin, ema mediku bele koleta amostra husi ema ida-ida, se mediku deskonfia ema bele iha sintomas COVID-19. ex. isin-manas, me’ar, sente fraku/kolen, ulun-moras, mialjia (isin moras), kakorok laran moras, coryza, dyspnoea, anorexia/laran-sa’e/muta, tebeen, mudansa ba kondisaun mental, lakon sentidu ba horon, lakon sentidu ba kokon sabor hahan.

Halo resposta tuir fali “Matadalan Nasional Konaba Vijilansia no Jestaun Kontaktu ba COVID-19 ba Timor-Leste”.

Fo hanoin ba ema moras atu deskansa iha uma to’o nia mear para, no hatoman-an fase liman no takaibun bainhira me’ar, atu nune’e bele prevene transmisaun moras ba ema seluk.

Tempu gripe no surtu moras respiratoriu (surtu COVID-19 ka surtu gripe)

Halo sosializasaun iha comunidade atu promove aktividade prevensaun, espesialamente vasinasaun ba COVID-19, inklui *booster*. Fo hanoin ba ema moras atu deskansa iha uma to’o nia mear para, no hatoman-an fase liman no takaibun bainhira me’ar, atu nune’e bele prevene transmisaun moras ba ema seluk.

Tratamentu antiviral rekomenda ba ema sira ho risku boot. Halo rekomendasaun bae ma sira risku boot ba facilidade saude nian atu simu tratamentu apropiadu.

Bainhira iha indikasaun surtu:

- Kontaktu imediata ba responsavel Vijilansia Epidemiolojia tuir hirarkia servisu nian.
- Komesa halo *line-list*.

IMPORTANTE

Kazu COVID-19 tenki relata ba OMS, tuir Reglamentu Saúde Internasional ka *International Health Regulations (IHR) 2005*.

Imunizasaun ba moras COVID-19 efetivu tebes. Fase liman ho sabaun, moos uza maskra nudar aktividade efetivu liu hodi prevene transmisaun. Imunizasaun efetivu tebes maibe seidauk implementa iha Timor-Leste. Fase liman ho sabaun nudar aktividade efetivu liu hodi prevene transmisaun.

Fontes informasaun

- Timor-Leste Ministerio da Saude. Operational protocol for influenza-type illnesses (ILI) and Severe Acute Respiratory Infection (SARI) Surveillance for Influenza in Sentinel Sites in Timor-Leste (2018) - (Draft).
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO) Influenza (2019). <https://www.who.int/influenza/en/>
- Matadalan Nasional Konaba Vijilansia no Jestaun Kontaktu ba COVID-19 ba Timor-Leste (Ver. 6, Atualizadu 22 Fev. 2021).
- World Health Organization (WHO) Coronavirus 2019 (2022) https://www.who.int/health-topics/coronavirus#tab=tab_1

Isin manas ho rash - *Fever with rash*



Definisaun kazu

Relatoriu: Kazu Konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia sintomas deit.

Evidensia sintomas

- Rash (makulopapular, non-vesikular) **NO** isin manas makas (aas liu 38°C)

KA

- Ema ruma ne'ebé médiku suspeitu infesaun sarampu



Responde ba saude publika

Matadalan iha. Refere ba “*Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste*” no “*Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016)*”

Relata kazu ba Departamento VE imediata (relata ba programa VPD iha nivel Nasional).

Hala'o jestau ba kazu

Investiga kazu imediata – uza formatu “Measles/Rubella case investigation form” atu buka informasaun demografiku, sintomas, data mosu, nia istoria pasiar ba rai seluk, mo'os istoria kontaktu ema husi rai seluk.

Determinu nia status imunizasaun. Buka data nia simu ona vasina.

Foti sampel swab (PCR) ka serology (IgM) para bele konfirma sarampo ka rubella.

Fo avisu ba kazu – isolar no atu deskansa iha uma no la bele sai no besik ema seluk, la bele ba eskola no servisu atu la bele hada'et moras ne'e ho ema seluk.

Hala'o jestau ba kontaktu

Buka ema sira hotu ne'ebe liga/kontaktu malu ho kazu iha tempu loron 4 moluk kazu mosu sintomas to loron 7 liu kazu mosu sintomas. Buka ema nia status imunizasaun. Bainhira ema la iha evidensia imunizasaun, tenki fo atu prevene sarampo/rubella (exklui feto isin rua).

Explika sintomas sarampo/rubella ba kontaktu sira no fo avisu ba nia, bainhira nia mosu sintomas, deskansa iha uma, la bele habesik hoe ma, no moos ba buka ajuda medikal. Bainhira ema ba klinik, diak liu taka ohin ho mask para bele menus transmisaun. Bainhira kontaktu sira dezvoltar sintomas, tenki foti sampel atu test.

Bainhira ita suspeitu rubella iha feto isin rua, tenki tuir feto to nia partus atu hatene nia oan nia kondisaun.

Bainhira akontese surtu boot – promove programa imunizasaun rapidu atu kontrola.

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Immunizasaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- Ministeru da Saude Timor-Leste. Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016).
- Ministeru da Saude Timor-Leste. Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Measles and Rubella (2017).
http://www.searo.who.int/immunization/documents/sg_module1_measles_rubella.pdf
- Australian Government Department of Health. Measles. National guidelines for public health units. Communicable Disease Network of Australia (2015).
<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-measles.htm>

Japanese encephalitis virus (JEV)

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium

- Detesaun ba JEV liu husi nucleic acid testing (PCR)
KA
- Detesaun ba JEV IgM iha CSF, no la iha IgM ba flavivirus seluk
KA
- Detesaun ba JEV IgM iha serum, no la iha IgM ba flavivirus seluk, no ema la simu vasina ba JEV foin dadauk.
KA
- JEV IgG sa'e maka'as dala 4 ka liu (≥ 4), se ema la simu vasina foin dadauk
KA
- Isolasaun ba Japanese encephalitis virus (JEV)

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE imediata. Fo hatene VE iha nivel nasional.

Investiga no responde ba kazu hotu (suspeitu no konfirmadu). Officer surveillance iha CdS nia responsabilidade. Uza formulario investigasaun *Acute Encephalitis Syndrome* (AES). Bainhira liu kazu 1 (>1), halo *line-list* iha municipiu atu haruka ba Dept. VE iha nivel Nasional. Kolekta infomasaun demografiku, sintomas, data mosu, no fatin sira kazu visita iha tempu semana 2 moluk nia mosu sintomas.

Fo hatene Saude Ambiental, kazu nia hela fatin moos fatin kazu akontese susuk. Iha nivel municipio, DPHO-CDC no surveillance officer bele analyza dados depois haruka dados ba nivel nasional. Nia mo'os tenki fo hatene Saude Ambiental iha nivel Municipio atu ba halo intervensaun, tuir sira nia prosesu, atu kontrolu susuk.

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Japanese Encephalitis (2017).
http://www.searo.who.int/indonesia/topics/immunization/module_9_-_je.pdf
- World Health Organization Regional (WHO). Japanese Encephalitis (2015).
<https://www.who.int/news-room/fact-sheets/detail/japanese-encephalitis>
- World Health Organization (WHO). Japanese Encephalitis. Vaccine-preventable diseases: surveillance standards (2019).
https://www.who.int/immunization/monitoring_surveillance/burden/vpd/WHO_SurveillanceVaccinePreventable_10_JE_R2.pdf?ua=1
- United States Centers for Disease Control and Prevention (CDC). Japanese Encephalitis (2019). Available at <https://www.cdc.gov/japaneseencephalitis/index.html>

Kolera - Cholera



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu komfirmadu: Presiza evidensia laboratorium definitivu; KA

Presiza evidensia laboratorium sujestivu **NO** evidensia sintomas

Kazu suspeitu: Presiza evidensia sintomas deit

Evidensia laboratorium definitivu

Detesaun ba *Vibrio cholerae* 01 or 0139

Evidensia laboratorium sujestivu

Detesaun *Vibrio cholera* (sei resultado *typing* la iha).



Evidensia sintomas

Ema ho idade tinan 5 ka liu, ne'be hetan desidratasaun (bee-mukit) grave ka mate tamba diarréia/tee-been ma'kas (te'ben ne hanesan fase foos dala tolu).

KA

Iha área ne'ebé iha epidemia kólera,

- Labarik ida ho idade kiik liu tinan 5, hetan desidratasaun (bee-mukit) grave ka mate tamba diarréia/tee-been agudu (sei kauzu seluk la iha).

KA

- Ema ho idade tinan 5 ka liu ne'be hetan tee-been agudu.

* Iha labarik sira, desidratasaun (bee-mukit) grave presiza inklui sintomas 2 ka liu (≥ 2) hirak tuir mai ne'e: la bok an, lakon sentidu, la hader; mata tama fali ulun; lakoi hemu/susu ka la bele hemu/susu; kulit kamutis.



Responde ba saude publika

Investiga no relata imediata!

Investiga kazu konfirmadu no kazu suspeitu hotu. Relata dados ba VE.

Fo hatene ba Ministerio, Organizasaun Mundial Saude (OMS/WHO) no Saude Ambiental kedas.

Uza "Formatu Relatoriu Imediata, Loron Hanesan (Iha oras 24 nia laran)".

Identifika:

- Kazu importadu husi nasaun ka area ne'ebe endemika ho kolera, ka hetan surtu kolera;
- Kontaktu ho ema ne'ebe hetan te'e been agudu
- Fontes ba bee mos (be uza atu han hemu, fase, tein, etc)
- Ema han hahan tasi nian, espesialmente *shellfish* (*tipu de siput*), relata informasaun ba parte Saude Ambiental.
-

Kolera kontinua iha pájina tuir mai

Hala'o jestaun ba kazu

Halo isolasaun kazu konfirmadu no kazu suspeito para bele hapara transmisaun.

Fo informasaun ba kazu kona ba kolera nia transmisaun (*faecal-oral*). Kazu no nia familia tenki kompriende kona-ba importansia ijiene nian, espesialamente fase liman ho sabaun depois de sintina, la bele uza hamutuk ropa, hena kama no toalia – tenki fase ketak. Kuandu moras hela, la bele ba servisu lai, la bele prepara hahan ba ema seluk, ka la bele hare labarik ka vizita ema seluk.

Hala'o jestaun ba kontaktu

“Kontaktu”: ema ne'ebe hela hamutuk iha uma ida ho kazu kolera, ka ema ne'ebe fahe hahan ka hemu ho kazu kolera, ema hemu ka han aihan kontaminadu hanesan kazu kolera konfirmadu. Tenki fo hatene kontaktu sira, saida maka sintomas kolera, tamba sira mos iha risku hetan sintomas liu loron 5 depois de kontaktu ho kazu, ka aihan kontaminadu. Kuandu mosu sintomas, tenki ba facilidade saúde ne'ebé besik ka buka ajuda medikal imediata.

IMPORTANTE

Kazu kolera ida bele progresu sai surtu kolera ho lais liu (*epidemic prone*).

Bainhira indikasaun surtu, husu ajuda antes husi OMS.

Fontes informasaun

- World Health Organization (WHO). Global Task Force on Cholera Control (GTFCC) Surveillance Working Group. Interim Guidance Document on Cholera Surveillance (2017). https://www.who.int/cholera/task_force/GTFCC-Guidance-cholera-surveillance.pdf?ua=1
- World Health Organization (WHO). Global Task Force on Cholera Control (GTFCC) - Prevention and control of cholera outbreaks: WHO policy and recommendations. <https://www.who.int/cholera/technical/prevention/control/en/>
- World Health Organization (WHO). Cholera Outbreak. Assessing the outbreak response and improving preparedness (2004). <https://www.who.int/cholera/publications/final%20outbreak%20booklet%20260105-OMS.pdf>
- World Health Organization (WHO). First steps for managing an outbreak of acute diarrhoea (2010). http://apps.who.int/iris/bitstream/handle/10665/70538/WHO_CDS_CSR_NCS_2003.7_R ev.2_eng.pdf?sequence=1
- United Nation International Children's Emergency Fund (UNICEF). Cholera Toolkit (2013). <https://www.unicef.org/cholera/Cholera-Toolkit-2013.pdf>
- Pacific Public Health Surveillance Network. Pacific outbreak manual (2016). https://www.pphsn.net/Publications/Pacific_Outbreak_Manual_Mar_2016.pdf

Lepra - Leprosy

Definisaun kazu

Relatoriu: Kazu Konfirmadu tenki relata.

Kazu konfirmadu: Presiza **evidensia sintomas** NO **evidensia laboratorium**.

Evidensia laboratorium

- Detesaun ba *acid fast bacilli* iha amostra kulit ka nervu kulit, bainhira uza *Fite stain*, no *Mycobacteria* la moris iha *culture-medium* bain-bain (bainhira laboratorium maka kulture).

KA

- Identifikasaun ba *non-caseating granulomas* ne'be involmente ho nervu periferál, no *Mycobacteria* la moris iha *culture-medium* bain-bain (bainhira laboratorium maka kulture).

Evidensia sintomas

Moras kroniku ne'be involve kulit, nervu no mukosa iha vias respiratorias superior. Sintomas lepra bele diferente depende ema ida ida nia resposta imuna ba bacterium *Mycobacterium leprae*. Karakteristika lepra hirak tuir mai ne'e;

- *Tuberculoid*: Lesi kulit 1 ka liu 1, ho sensaun menus ka la iha.
- *Lepromatous*: Ohin, tilun liman no ain bele bubu. Kulit bele sai mahar no ema ne'be hanesan ne moos bele lakon sentidu iha nia kulit.
- *Borderline (dimorphous)*: lesi kulit nia ho karakteristiku hanesan forma *tuberculoid* moos forma *lepromatous*
- *Indeterminate*: Hena mutin ou manu kidung ne'be la katar, la senti buat ida ou maten.

Responde ba saude publika

Koordena ho CDC (iha matadalan)

Sumariu

Relata ba Departamento CDC. Responde tuir fali matadalan (*Timor-Leste Lepra Guidelines*).

Fontes informasaun

- MoH Timor-Leste. Lepra guidelines
- World Health Organization (WHO). The Guidelines for the Diagnosis, Treatment and Prevention of Leprosy (2018). <https://www.who.int/lep/resources/9789290226383/en/>

Malaria



Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona (iha 24 oras nia laran).

Kazu konfirmadu: Presiza evidensia laboratorium.

Evidensia laboratorium: ema ne'be resultado positif liu husi

1. Microskopia - detesaun parazita *Plasmodium falciparum* iha *peripheral blood film* mahar ka mihis.
2. Testu diagnóstiku rápido (*rapid diagnostic test - RDT*); ka
3. *Polymerase chain reaction (PCR)*.

Responde ba saude publika

Relata ba programa iha CDC atu koordena responde. Programa iha CDC sei tuir nia prosesu atu responde. Iha matadalan.

Fontes informasaun

- Timor-Leste Ministry of Health. National Strategic Plan for Malaria Elimination, 2017-2021 (2016). <http://ram.rawcs.com.au/wp-content/uploads/2017/12/National-Malaria-Strategic-Plan-for-Malaria-Elimination-Timor-Leste-2017-2021.pdf>
- World Health Organization (WHO). HIV (2019). <https://www.who.int/malaria/en/>
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Malaria (2019). <http://www.searo.who.int/entity/malaria/en/>

Meningitis ka encephalitis - Meningitis/encephalitis



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: presiza evidensia laboratorium definitivu.

Kazu suspeitu: presiza evidensia sintomas **KA** evidensia laboratorium sugestivu.

Evidensia laboratorium definitivu

- Detesaun (liu hosi kultur, PCR ka detesaun antigen) ba organismu pathogeniku liu husi sampel CSF

KA

- Detesaun (liu husi kultur, PCR, gram stain ka antigen detection) ba organism pathogeniku liu husi raan (*blood culture*) **NO** evidensia sintomas iha.

Evidensia laboratorium sugestivu

Examinaun CSF hatudu ida hosi hirak tuir mai ne'e:

- Nia kor malahuk (turbid); **KA**
- Leukosytosis (> 100 cells/mm³); **KA**
- Leukosytosis (10-100 cells/mm³) **NO** karik proteina elevadu (> 100 mg/dl) ka glukosa tuun (< 40 mg/dl)

Evidensia sintomas

Isin manas makas ($> 38^{\circ}\text{C}$) **no** sintomas

1 hirak tuir mai ne'e:

- Kakorok rigidu/to'os; ka
- La bok an, lakon sentidu, konsiensia alterada; ka
- Sinal meningeal seluk (eg. rash petechial/purpural rash) – i.e mediku suspeitu meningitis ka encephalitis.



Responde ba saude publika

Relata ba VE.

Uza formatu AES (*acute encephalitis syndrome*). La iha resposta espesifiku ba kazu ida-ida exceto bainhira laboratorium deteta *Neisseria meningitidis* (*Meningococcal disease*).

Hala'o jestau ba kontaktu

Interview kazu (ka nia maluk) atu hatene informasaun demografiku, data mosu sintomas (*onset date*), deskreve sintomas no hatene kontaktu iha ka lae. Konsidera kontaktu ema hela iha uma hamutuk kazu, ka toba iha uma hanesan kazu, labarik iha klasa eskola hamutuk ho kazu ka nia namorado/a ka kaben (ema kontaktu proximo hanesan rei malu). Atu konsidera ema "kontaktu", ema moos tenki liga/besik malu ho kazu, loron 7 antes nia mosu sintomas. Fo informasaun ba ema "kontaktu" kona ba sintomas meningitis/enkefalitis no dehan sira, kuandu nia mosu, ba doctor langsung.

Fo kontaktu aimoruk para bele prevene moras (ema isin2 bele simu ceftriaxone).

Meningitis ka encephalitis continua iha pájina tuir mai

Meningitis ka encephalitis – kontinua...

Antibiotiku uza ba kontaktu meningococcal – Husi avisu husi doktor.

Antibiotiku	Ciprofloxacin	Ceftriaxone	Rifampicin
Apropriada ba →	Idade hotu. Feto ne'ebe hemu <i>oral contraceptive pill</i> (OCP)	Feto isin rua Situasaun ne'ebe acesu ba rifampicin la diak.	Small children
Dose →	Ema boot ka labarik ≥12 anos: 500 mg orally, 1 dose Labarik ho idade 5–12 anos: 250 mg stat Labarik <5 anos: 30mg/kg maibe la bele liu 125 mg stat dose. *Ciprofloxacin suspensaun iha laran 250mg/5ml	Labarik < 12 anos: 125 mg IM - 1 dose Ema boot: 250 mg IM, 1 dose	Bebe ho idade <1 mês: 5 mg/kg orally, 12-hourly for 2 days Labarik ho idade ≥ 1 mês: 10 mg/kg up to 600 mg orally, 12- hourly for 2 days. Adult: 600 mg orally, 12-hourly for 2 days

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Invasive Bacterial Disease.
http://www.searo.who.int/indonesia/topics/immunization/module_7_-_ibd.pdf
- Australian Government Department of Health (2017). Invasive Meningococcal Disease. Communicable Disease Network of Australia National Guidelines for Public health units.
[http://www.health.gov.au/internet/main/publishing.nsf/Content/0A31EEC4953B7E6FCA257DA3000D19DD/\\$File/IMD-SoNG.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/0A31EEC4953B7E6FCA257DA3000D19DD/$File/IMD-SoNG.pdf)
- World Health Organization (WHO). Meningococcal disease (2019).
<https://www.who.int/ith/diseases/meningococcal/en/>



Urgent



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu provavel tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium definitivu.

Kazu provavel: Presiza evidensia sintomas NO evidensia laboratorium sugestivu; ka Presiza evidensia sintomas NO evidensia epidmeiolojika

Evidensia laboratorium definitivu

- Detesaun ba monkeypox virus DNA husi PCR no/ka *sequencing*

Evidensia laboratorium sugestivu

La iha vasinasaun foin lalais ne'e hala'o ba smallpox/monkeypox, ka eventu/exposure seluktan ba orthopoxvirus (OPXV), iha periodu loron 4-56 hafoin mosu rash

- Detesaun anti-orthopoxvirus (OPXV) IgM antibody; ka
- IgG titre sa'e aas (dala4) kuandu ita kompara nivel IgG iha amostra ne'ebe ita koleta iha loron 5-7 hafoin mosu rash (tempo moras agudu), ho nivel IgG iha amostra ne'ebe ita koleta iha loron 21 liu rash mosu (convalescent serology)

Evidensia sintomas

Ema ne'ebe iha rash ne'ebe la iha diagnose seluk, no lesion kulit 1 ka liu;

NO

Sintomas ida ka liu, hanesan tuir mai:

- Ulun fatuk moras
- Isin manas ne'ebe agudu ($> 38.5^{\circ}\text{C}$)
- Lymphadenopathy (swollen lymph nodes)
- Myalgia (isin moras/isin kole)
- Kotuk moras
- Asthenia (Isin fraku tebes)



NO

La iha kauza komún hirak ne'ebé akontese hanesan rash. Exemplu: varicella zoster, herpes zoster, sarampo, herpes simplex, infeksaun kulit husi bakteria, *disseminated gonococcus infection*, sifilis, chancroid, lymphogranuloma venereum, granuloma inguinale, molluscum contagiosum, allergia; no kauza komún hirak seluk ne'ebé relevante ba rash vesikular ka papular.

N.B. La presija atu hetan resultadu negativu husi laboratoriu ba kauza husi kazu rash atu klasifika ba kazu suspeitu. Ema bele "co-infection" ho monkeypox no moras seluk-tan. Wainhira mediku diskonfia infeksaun monkeypox tamba iha istoria ka sintomas, ka liga ho kazu konfirmadu ka kazu provavel, diak liu mediku hasai amostra no teste nafatin ba monkeypox.

Evidensia epidemiolojika

Ema ne'be iha kontaktu kleur ho kazu konfirmadu ka kazu provavel, iha loron 21 nia laran, antes sintomas mosu. Exemplu ema ne'ebé kontaktu hanesan tuir mai ne'e;

- kontaktu ho kulit ka rash, inklui relasaun sexual; ka kontaktu ho rounpa, kama ne'ebe kontamina; ka uza garfu/tudik/kanuru/bikan
- kontaktu hasoru malu direita ho distansia besik (face-to-face), inklui pesoal saude ne'ebe la uza PPE apropiadu (luvas, rounpa, oklu no respirator); ka
- ema ne'ebe iha relasaun sexual ho ema barak.

Responde ba Saude Publika

Wainhira mediku diskonfia monkeypox, presija identifika lalais/imediata no halo investigasaun ba kontaktu. La bele hein to status troka ba kazu konfirmadu ka kazu provavel.

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE imediata.

Tuir matadalan naran “*National Guideline for Prevention, Care and Treatment of Monkeypox Virus Infection in Timor-Leste, Version 1.0*”.

Prinsipiu bázikú ba jestaun kazu;

- Konsidera posibilidade kazu bele isola iha uma ka isola/baixa iha ospital
- Proteje ema nia kulit no *mucus membranes*
- Mantein hidrasaun ne'ebé adekuaú – terapia oral ka parenteral no nutrisaun
- Fo tratamentu no monitorizasaun ba sintomas no hare mos ba komplikasaun
- Kuidadu saude mental ba pasiente sira ne'ebé moras monkeypox
- Opsaun ne'ebe dezenvolve-seidauk desponivel no/ka sei iha peskiza nia laran- karik bele uza antivirals, ka fo Post Exposure Prophylaxis (PEP)

Prinsipiu bázikú ba jestaun kontaktu;

- Monitor ba sintomas monkeypox nian, to'o loron 21 hafoin exposure ikus no kazu konfirmadu ka kazu provavel. Monitor buka sintomas hanesan rash, ka lesion hanesan jerawat ka isin manas.
- Wainhira sintomas monkeypox mosu, isola imediata, koleta amostra no halo teste.

Fontes informasaun

- Timor-Leste Ministry of Health. Vaccine-preventable diseases: surveillance standards (2022).
- WHO. Surveillance, case investigation and contact tracing for monkeypox, interim guidance, 24 June 2022 <https://www.who.int/publications/i/item/WHO-MPX-Surveillance2022>
- WHO. Clinical management and infection prevention and control for monkeypox: Interim rapid response guidance <https://www.who.int/publications/i/item/WHO-MPXClinical-and-IPC-2022>
- Australia CDNA Interim National Guidelines for Public Health Units for Monkeypox virus <https://www.health.gov.au/resources/publications/monkeypox-virus-infection-cdna-national-guidelines-for-public-health-units>

Moras fuan reumatika - Rheumatic heart disease (RHD)

Definisaun kazu

Relatoriu: Kazu konfirmadu (*Definite RHD*) no kazu suspeitu (*Borderline RHD*) tenki relata.

Kazu konfirmadu (*Definite RHD*)

Presiza ida ka liu ida (≥ 1) tuir mai ne;e:

- *Pathological mitral regurgitation*, no rua ka liu rua (≥ 2) karakteristika morfologika RHD ni'an iha *mitral valve*.
- *Mitral stenosis mean gradient* > 4 mmHg
- *Pathological aortic regurgitation* no rua ka liu rua (≥ 2) karakteristika morfologika RHD nian iha *aortic valve*.
- *Borderline disease* iha *aortic valve* no *mitral valve*.

Kazu suspeitu (*Borderline RHD*)

Presiza ida ka liu ida (≥ 1) tuir mai ne;e:

- Rua ka liu rua (≥ 2) karakteristika morfologika RHD nia'n iha *mitral valve*, no *pathological mitral regurgitation* la iha, no *mitral stenosis* moos la iha.
- *Pathological mitral regurgitation*
- *Pathological aortic regurgitation*

Responde ba saude publika

Relata kazu ba programa CDC para bele inklui iha dadus vijilansia nian.

Ema ida maka halo diagnose kazu tenki husu kazu (ka nia inan/aman), bele fo nia numero telfone ba organisaun naran Maluk Timor (ph: +6703311122). Maluk Timor bele organiza kardiologo/a halo *follow up assessment* atu determina kazu presiza operasi ka lae, mo'os atu aranje antibiotiku profilaktiku kada fulan atu prevene progresu ba moras grave. Maluk Timor moos bele fo informasaun kona ba RHD ba kazu no dotor sira.

Fontes informasaun

- Rheumatic Heart Disease Australia. The Australian guideline for the prevention, diagnosis and management of acute rheumatic fever and rheumatic heart disease – 2nd Edition (2012). <https://www.rhdaustralia.org.au/arf-rhd-guideline>
- World Health Organization (WHO) Rheumatic fever and rheumatic heart disease – report by the director general (2018).
- http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_25-en.pdf
- World Heart Foundation. Rheumatic Heart Disease (2018). <https://www.world-heart-federation.org/programmes/rheumatic-heart-disease/>

Papeira - Mumps

Definisaun kazu

Relatoriu: Kazu suspeitu no kazu konfirmadu tenki relata.

Kazu suspeitu: Presiza evidensia sintomas deit.

Kazu konfirmadu: Presiza evidensia sintomas **NO** evidensia laboratorium.

Evidensia laboratorium

- Detesaun ba mumps virus liu husi *nucleic acid testing* (PCR), hosi sampel klinikal appropriada;

KA

- Detesaun ba mumps virus IgM (se ema la simu vasina foin dadauk);

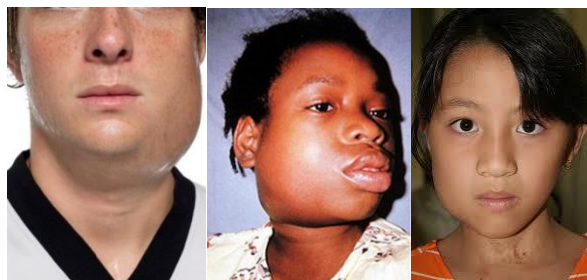
KA

- IgG *seroconversion* ka nivel mumps IgG sa'e aas nafatin dala 4 ka liu (≥ 4).

Evidensia sintomas

Ema ne'be hetan moras agudu bele inklui sintomas karakteristika sujestivu. Sintomas baibain inklui inflamasaun iha glandulas parótidas, glandulas sublinguais no glandulas submaxilar.

Baibain mosu derepente; hasan bubu no mamar iha sorin 1 deit ou bele mos iha parte rua hotu. Ne'ebe dala ruma akompaña ho isin manas. Simtoma ne'e bele akontese to'o semana 1.



Responde ba saude publika

Relata ba Departamentu VE (Vaccine Preventable Disease) tuir hirarkia servisu saúde ne'ebé mak iha.

Agora iha Timor-Leste, seidauk iha vasina moos sedauk iha matadalan nasional.

Uza formulariu investigasaun papeira – buka hatene nia status imunizasaun (maibe iha TL seidauk implementa).

Fo hanoin ba paciente atu deskansa iha uma no la bele sai no besik ema seluk, la bele ba eskola no servisu atu la bele hada'et moras ne'e ho ema seluk, to'o nia di'ak. La presiza kolekta amostra/sampel hodi konfirma. Liu loron 5 desde mosu parotitis, sira bele halo fali aktividade hanesan babain (tempu eksklui hotu ona).

Fo hatene ERR atu koordena ho médiku sira hodi halo tratamentu.

Fontes informasaun

- World Health Organization (WHO). Mumps. Vaccine-preventable diseases: surveillance standards (2019).
https://www.who.int/immunization/monitoring_surveillance/burden/vpd/WHO_SurveillanceVaccinePreventable_13_Mumps_R2.pdf?ua=1
- United States Centers for Disease Control and Prevention (CDC). Mumps.
<https://www.cdc.gov/mumps/hcp.html>
- Northern Territory Government, Australia. Mumps (2016).
<https://nt.gov.au/wellbeing/health-conditions-treatments/viral/mumps>

Pertusis - *Pertussis*

Definisaun kazu

Relatoriu; Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium no evidensia sintomas.

Kazu suspeitu: Presiza evidensia sintomas deit, no diagnosis seluk la iha.

Evidensia laboratorium

- Detesaun ba *Bordetella pertussis* liu PCR, **KA**
- *Seroconversion* iha *paired serology* ba *Bordetella pertussis*, **KA**
- Isolasaun ba *Bordetella pertussis*.

Evidensia sintomas

Mear liu semana 2 ona ho buat1 ka liu, sintomas hirak tuir mai ne'e;

- Me'ar paroksismal; **KA**
- Dada iis hanesan *whoop*; **KA**
- Muta tuir kedas bainhira me'ar (la iha kauzu seluk ne'be klaru)

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE.

Uza formatu “investigasaun kazu pertusis”.

Hala'o jestau ba kazu

Isolar kazu – fo hanoin ba pasiente atu deskansa iha uma no la bele sai no besik ema seluk, la bele ba eskola no servisu atu la bele hada'et moras ne'e ho ema seluk, to'o nia la kontajiozu. Kazu maka bele fahe moras to mear durante semana 3, ka antes nia hemu antibiotiku apropiadu loron 5 ona. Kazu la bele ba servisu, eskola, ka kontaktu ema barak bainhira nia bele transmit. Atu hare antibiotiku apropiadu, refere ba informasaun iha kraik ne'e.

Hala'o jestau ba kontaktu

Buka kontaktu iha uma laran ka klasse nia laran ne'be risku boot. Ne hanesan ne feto isin rua liu fulan 6, mo'os labarik sira sedauk simu ona vasina pertusis nian.

Fo refere kontaktu ba programa EPI (*expanded program* Immunizasaun) para ema bele simu vasina.

Bainhira rekursus iha, konsidera fo antibiotika ba kontaktu para bele prevene infeksaun.

Pertusis kontinua iha pájina tuir mai

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene Ho Imunizazaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia. Pertussis (2017).
http://www.searo.who.int/immunization/documents/sg_module5_pertussis.pdf

- Australian Government Department of Health. Pertusis. Response for public health units. Communicable Disease Network of Australia (2015).
<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-pertussis.htm>

Plague



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: presiza evidensia laboratorium.

Kazu suspeitu: presiza evidensia sintomas deit.

Evidensia laboratorium

Isolasaun ka detesaun ba *Yersinia pestis*.

Evidensia sintomas

Moras *plague* ne moras agudu. Ne kauza husi bacteria liu husi asu-kutun tatan. Sintomas liu tipo 3; *bubonic*, *pneumonic* no *septicaemic*.

Sintomas primeiru bele inklui isin-manas, isin-malirin, isin-moras, ulun-fatuk moras no senti kole demais.

Iha mundial, *bubonic plague* maka barak liu bainhira kompara ho *plague* tipo seluk. Nia sintomas karakteristika inflamasaun no bubu iha *lymph nodes* besik siti ne'be asuk-kutun tatan ka mo'os bele iha siti seluk. Lymph nodes bele senti to'os e bele raan-mutin bele sa'e. *Pneumonic plague* bele kauza liu husi transmisaun respiratorio ka mo'os bele komplikadu tuir bubonic plague. Ne moras agudu – derepente ema mosu pneumonia hamutuk ho isin-manas maka'as, no ulun-fatuk moras no fuan moras (*tachycardia*). Ema ne'ebe komensa me'ar iha loron 1 nia laran. Kabe'en tasak primeiru kor matak dupois troka ba kor mean no sa'e furin. Ema nia X-rays baibain sei hatudu presensia pneumonia.

Plague tipo 2 bele progresu ba *septicaemic plague*. Sepsis ne'be bakteria tama ema nia raan no bele lao to organ seluk iha isin laran, hanesan meninges. *Disseminated intravascular coagulation* (DIC) bele tuir sepsis.

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE imediata. Fo hatene VE iha nivel nasional (RRT).

Investiga no responde ba kazu hotu (suspeitu no konfirmadu).

Tuir OMS nia matadalan.

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Operational Guidelines on Plague Surveillance, Diagnosis, Prevention and Control (2009).
http://www.searo.who.int/entity/emerging_diseases/documents/ISBN_9789_92_9022_37_6_4/en/

Pnewmonia (<5 anos) - Pneumonia (<5 years old)

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia sintomas deit.

Labarik ho idade <5 no;

Evidensia sintomas:

1. mear ka dada iis araska

NO

2. Respirasaun rapido* ka *chest in-drawing* (hirus matan nia okos naksobu) ka sinál perigu geral (exemplu letargia, la bok an, lakon sentidu).

* respirasaun 50 ka liu por minutu ba infantil idade fulan 2 to'o tinan 1
respirasaun 40 ka liu por minutu ba labarik ki'ik tinan 1 to'o tinan 5

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Bainhira labarik baixa iha hospital, foti sampel respiratoriu tract (kabeen tasak ka nasopharyngeal aspirate [NPA]) husi kazu no haruka ba NHL atu test ba kultur no *respiratory pathogen* PCR (depende iha ka lae).

Fontes informasaun

- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO) Influenza (2019). <https://www.who.int/influenza/en/>
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Invasive Bacterial Disease. http://www.searo.who.int/indonesia/topics/immunization/module_7_-_ibd.pdf

Polio



Definisaun kazu

Relatoriu: Kazu konfirmadu **no** kazu provavel tenki relata.

Kazu konfirmadu: presisa evidensia laboratorium **NO** evidensia sintomas.

Kazu provavel: presisa evidensia sintomas **NO** kazu sedauk disklu liu husi expert panel nasional.

Evidensia laboratorium

Wild poliovirus infeksaun

1. Isolasaun ka detesaun ba wild poliovirus

Vaccine-associated poliomyelitis

1. Isolasaun ka detesaun ba Sabin-like poliovirus

Vaccine-derived poliomyelitis

1. Isolasaun ka detesaun ba poliovirus, ne'ebe nia karakteristika hanesan *vaccine derived poliovirus* depende *current definition of the World Health Organization*.

Evidensia sintomas

Labarik ho idade <15 nebe hetan paraliza ida ka liu iha ekstremitas nebe mosu derpentini no karakteristika paralizadu flaccida agudu (AFP)* (inklui Guillain-Barré syndrome)

* AFP moras nebe ema bele hetan sintomas hanesan ekstremitas (ain ka liman) nebe mosu, dada iis no tolon araska. Liu loron 1 to 10, ema bele sae moras grave tan hanesan paraliza ka mate.

Responde ba saude publika

Refere ba matadalan AFP nian.

- Relata ba VE imediata.
- Halo interview ho kazu ka nia familia – uza “Formatu Investigasaun AFP”¹
- Foti amostra/sampel feces 2, iha loron 14 nia laran tuir data ema mosu paralis. Sampel tenki tuir malu liu 24 oras. Bele foti sampel feces to loron 60 maibe iha loron 14 nia laran diak liu. Refer aba ‘Vigilancia Moras Ne’ebe Prevene ho Immunizasaun’ para requisito de transporte sampel.¹
- Fo hatene no husu avisu (WHO) para implementa aktividade imunizasaun imediata no apropiada.
- Fo hatene ba Sentru de Saude no Poste de Saude iha area besik kazu para ema bele alert aba kazu AFP. AFP kazu tenki relata imediata ba Departamento Vijilancia Epidmeiologia.
- Iha loron 60 liu data mosu paralis, kompleta formatu “60-day case investigation form”.¹

Fontes informasaun

- ¹Vigilancia Moras Ne’ebe Prevene ho Imunizasaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- WHO SEARO. Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Poliomyelitis (2017).
http://www.searo.who.int/immunization/documents/sg_module3_polio.pdf



Definisaun kazu

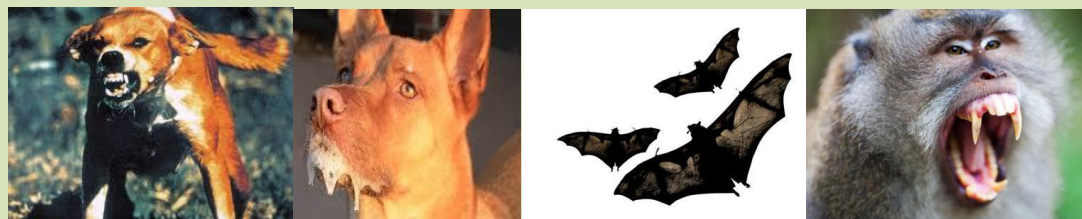
Relatoriu

Kazu konfirmadu no kazu provavel tenki relata.

Kazu konfirmadu: detesaun ka isolasaun ba rabies virus; ka detesaun ba rabies-neutralizing antibody iha serum ka CSF ka kaguduk, iha ema ne'be nunka simu vasina rabies nian.

Kazu provavel: Ema ne'be mosu ensefalite agudu, ka sindroma paralitiku, ka la bok an, ka lakon sentidu, ka tauk be'e, ka mangame, NO animal siak tata ka naklees nia.

Kazu suspeitu: Ema ne'be mosu ensefalite agudu (e.g sindroma paralitiku, ka la bok an, ka lakon sentidu, ka tauk be'e, ka mangame), NO dupois mate iha loron 10 nia laran (evidensia animal siak tata la iha).



Responde ba saude publika

Relata imediata kazu suspeitu hotu ba Departamento VE tuir hirarkia servisu nian ne'ebe iha no ministeriu relevante sira.

Pessoal saude tenki fo tratamentu tuir nia protokolu (eg, fase mos kanek fatin, fo antibiotika, fo vasina tetanus)

Imediata fase kanek fatin ho sabaun no be'e moos, ne konsidera tratamentou efetivu tebes atu prevene moras raiva/rabies.

Matadalan ba moras raiva nian sedauk iha no dezenvelope hela (under development) – refere ba fontes informasaun sira iha kraik:

- Informa imediata ba OMS hodi husu ajuda.
- Informa imediata ba Ministeriu Relevantes (hanesan: Ministeriu Akrikultura no Peskes (MAP))



Rabies kontinua iha pájina tuir mai

Fontes informasaun

- World Health Organization (WHO). Rabies (2019). <http://www.searo.who.int/india/topics/rabies/en/>
- World Health Organization (WHO). WHO Guide for Rabies Pre and Post Exposure Prophylaxis in Humans (2014). https://www.who.int/rabies/PEP_Prophylaxis_guideline_15_12_2014.pdf
- World Health Organization (WHO). Rabies in the South East Asian Region. http://www.searo.who.int/about/administration_structure/cds/CDS_rabies.pdf.pdf
- Australian Government Department of Health. Rabies Virus and Other Lyssavirus (Including Australian Bat Lyssavirus) Exposures and Infections Response for public health units (2018). <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-abvl-rabies.htm>
- World Health Organization (WHO). Animal bites (2019). <https://www.who.int/news-room/fact-sheets/detail/animal-bites>
- United States Centers for Disease Control and Prevention (CDC). Rabies. Available at <https://www.cdc.gov/rabies/index.html>
- Timor-Leste Rabies Guidelines (2019 – under development).

Rotavirus	
Definisaun kazu Relatoriu: Relata deit kazu ne'ebe konfirmadu ona. Kazu konfirmadu: Presiza evidensia laboratorium.	
Evidensia laboratorium Detesaun ba rotavirus iha sampel klinikal (feces).	



PUBLIC HEALTH RESPONSE

*** Vasina ba rotavirus foin maka implementa iha Timor-Leste iha 2019. Durante 2019-2022, responde ba rotavirus tuir fali matadalan “*Manual for enhanced rotavirus surveillance in children <5 years hospitalized for diarrhoea in Timor-Leste (2019-2022)*” ***

Rotavirus maka *vaccine preventable disease*. Relata ba Departamento VE, VPD. Resposta espesifiku ba kazu ida-ida make ne'e deit - hare to'ok status imunizasaun ba rotavirus.

Maibe, Durante 2019-2022, responde ba rotavirus tuir fali matadalan “*Manual for enhanced rotavirus surveillance in children <5 years hospitalized for diarrhoea in Timor-Leste (2019-2022)*”.

Pessoal saude nian tenki for hanoin ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seidauk permiti (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk). Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Fontes informasaun

- World Health Organization (WHO). Immunizations, Vaccines and Biologicals. Rotavirus (2018). <https://www.who.int/immunization/diseases/rotavirus/en/>
- Timor-Leste Ministerio da Saude (2019). *Manual for enhanced rotavirus surveillance in children <5 years hospitalized for diarrhoea in Timor-Leste (2019-2022)*.
- WHO. Vaccine Preventable Diseases Surveillance Standards. Rotavirus (2018). https://www.who.int/immunization/monitoring_surveillance/burden/vpd/WHO_SurveillanceVaccinePreventable_19_Rotavirus_R1.pdf?ua=1
- WHO Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008).
- https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1
- Northern Territory Government, Australia. Rotavirus (2016). <https://nt.gov.au/wellbeing/health-conditions-treatments/viral/rotavirus>

Rubella

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium deit; **KA**

Presiza evidensia sintomas **NO** evidensia epidemiolojiku.

Evidensia laboratorium

Se ema la simu ona vasina foin dadauk, buat 1 tuir mai ne'e:

- Detesaun ba rubella virus liu *nucleic acid testing* (PCR); ka
- Detesaun ba rubella virus nia antigen; ka
- Detesaun ba rubella IgM; ka
- IgG seroconversion ka rubella IgG sa'e aas iha paired serology
- Isolasaun ba rubella virus.

Evidensia sintomas

- Rash (makulopapular, non-vesikular) **no** isin manas makas (aas liu 38°C)

KA

- Ema ruma ne'ebé médiku suspeitu infesaun rubella

Evidensia epidemiolojiku

Ema nain 2 konhece/hasoru malu iha tempo kuando;

- i. Ema 1 maka **kazu konfirmadu** ba rubella no bele contagioza

NO

- ii. Ema 1 fali tuir ho **evidensia sintomas** ba rubella, no sintomas komesa loron 7 to loron 18 liu nain 2 konhece/hasoru malu.

Responde ba saude publika

Matadalan iha. Refere ba “*Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste*” no “*Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016)*”

* Hanesan responde ba **Isin manas ho rash** (*Fever with rash*) *

Relata kazu suspeitu no konfirmadu ba Departamento VE imediata (relata ba programa VPD iha nivel Nasional).

Hala'o jestau ba kazu

Investiga kazu imediata – uza formatu “Measles/Rubella case investigation form” atu buka informasaun demografiku, sintomas, data mosu, nia istoria pasiar ba rai seluk, mo'os istoria kontaktu ema husi rai seluk.

Fo avisu ba kazu – isolar iha uma. Fo hanoin ba kazu atu deskansa iha uma no la bele sai no besik ema seluk.

Determinu nia status imunizasaun. Buka data nia simu ona vasina.

Bainhira kazu rubella moos feto isin rua, tenki tuir feto to nia partus ona, atu buka hatene nia oan nia kondisaun.

Rubella kontinua iha pájina tuir mai

Rubella – kontinua...

Responde ba saude publika (kontinua...)

Hala'o jestau ba kontaktu

Buka ema sira hotu ne'ebe liga/kontaktu malu ho kazu iha tempu loron 4 moluk kazu mosu sintomas to loron 7 liu kazu mosu sintomas. Buka ema nia status imunizasaun. Bainhira ema la iha evidensia imunizasaun, tenki fo atu prevene sarampo/rubella (exklui feto isin rua – la bele simu vasina).

Explika sintomas rubella ba kontaktu sira no fo avisu hanesan ne - bainhira nia mosu sintomas, deskansa iha uma, la bele habesik ema no buka ajuda medical iha klinik. Bainhira sira ba klink, diak liu taka ohin ho mask para bele menus transmisaun. Bainhira kontaktu dezenvelope sintomas, kolekta amostra/sampel atu test ba sarampo/rubella.

Bainhira ita suspeitu rubella iha feto isin rua, tenki tuir feto to nia partus ona, atu buka hatene nia oan nia kondisaun.

Bainhira akontese surtu boot – promote programa imunizasaun rapidu atu kontrola.

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizasaun; 2018. Departamento Vigilancia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- Ministeru da Saude Timor-Leste. Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016).
- Ministeru da Saude Timor-Leste. Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Measles and Rubella (2017).
http://www.searo.who.int/immunization/documents/sg_module1_measles_rubella.pdf
- Australian Government Department of Health. Measles. National guidelines for public health units. Communicable Disease Network of Australia (2015).
- <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-measles.htm>

Congenital rubella syndrome (CRS)

Definisaun kazu

Reporting: Kazu konfirmadu no kazue suspeitu CRS tenki relata.

Confirmed case: Presiza evidensia laboratorium **NO** ida iha LIST (a).

Suspected case: Presiza evidensia sintomas deit.

Evidensia laboratorium

- Detesaun ba rubella IgM;

KA

- Nivel rubella IgG sa'e aas nafatin dala 2 (sampil tuir malu fulan 2 liu) no labarik nia idade fulan 6 to fulan 12.

KA

- Isolasaun ba rubella virus ka detesaun liu *nucleic acid testing* (PCR) hosi sampil appropriada (*throat/garganta swab, nasal/inus swab, blood/raan, urine/mii ka CSF*).

Evidensia sintomas

- Iha labarik ida ne'be mediku hetan buat-rua ka liu (≥ 2) tuir mai ne'e iha *LIST (a)*;

KA

- Ida iha LIST (a) no ida iha LIST (b);

NO

- La iha kauzu seluk ne'be klaru

LIST (a)	LIST (b)
• <i>cataract,</i> • <i>congenital glaucoma,</i> • <i>congenital heart disease,</i> • <i>hearing impairment,</i> • <i>pigmentary retinopathy</i>	• <i>purpura,</i> • <i>splenomegaly,</i> • <i>microcephaly,</i> • <i>developmental delay,</i> • <i>meningocephalitis,</i> • <i>radiolucent bone disease,</i> • <i>jaundice</i> (isin kinur) komesa <24 tuir fali labarik foin moris.

Laboratory confirmed congenital rubella syndrome (CRS): Labarik ida ne'be kazu suspeitu CRS no moos iha sintomas ida liu husi LIST (a) no evidensia laboratorium iha.

Congenital rubella infection (CRI): Labarik ida ne'be evidensia laboratorium iha maibe sintomas liu husi LIST (a) la iha. Labarik ida ne nia klassifika - CRI.

**Congenital rubella syndrome kontinua iha
pájina tuir mai**

Responde ba saude publika

Matadalan iha. Refere ba “*Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste*” no “*Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016)*”

Relata kazu suspeitu no konfirmadu ba Departamento VE imediata (relata ba programa VPD iha nivel Nasional).

Hala’o jestau ba kazu

Tuir fali matadalan iha kraik.

Fontes informasaun

- Vigilancia Moras Ne’ebe Prevene ho Imunizazaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- Ministeru da Saude Timor-Leste. Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016).
- Ministeru da Saude Timor-Leste. Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Measles and Rubella (2017).
http://www.searo.who.int/immunization/documents/sg_module1_measles_rubella.pdf

Salmonellosis

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: presiza evidensia laboratorium.



Evidensia laboratorium

Detesaun ka isolasaun ba *Salmonella* iha sampel klinikal (e.g. feces, raan, mii).

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Presiza fo hanoin ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seidauk premiti (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk) Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
3. Prepara planu komunikaun.
4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
5. Buka tuir kazu no investiga (uza formulariu nebe apropriadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
6. Hala'o investigasaun ambiental no kolekta amostra/sampel.
7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karakteristiku, etc.). Sempre halo epicurve.
8. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiolojikal).
9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
10. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun

Fontes informasaun

- World Health Organization (WHO) *Salmonella* (2019). [https://www.who.int/news-room/fact-sheets/detail/salmonella-\(non-typhoidal\)](https://www.who.int/news-room/fact-sheets/detail/salmonella-(non-typhoidal))
- World Health Organization (WHO) Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008). https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1
- Northern Territory Government, Australia. *Salmonella* (2016). <https://nt.gov.au/wellbeing/health-conditions-treatments/digestive-health/salmonellosis>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.

Sarampo – Measles



Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium **NO** evidensia sintomas; ka
Presiza evidensia sintomas **NO** evidensia epidemiolojika.

Evidensia laboratorium

La iha vasinasaun foin dadauk (iha semana 4 ikus nia laran) no;

- Detesaun measles virus liu hosi *nucleic acid testing* (PCR); ka
- Detesaun measles virus nia antigen; ka
- Detesaun measles specifika IgM; ka
- IgG seroconversion ka IgG sa'e aas iha paired serology
- Isolasaun measles virus.



Evidensia sintomas

- Rash (makulopapular, non-vesikular) **NO** isin manas makas (aas liu 38°C)

KA

- Ema ruma ne'ebé médiku suspeitu infesaun sarampu 1

Evidensia epidemiolojiku

Ema nain 2 konhece/hasoru malu iha tempo kuando;

- a. Ema 1 maka **kazu konfirmadu** ba sarampo no bele contagioza

NO

- b. Ema 1 fali tuir ho **evidensia sintomas** ba sarampo, no sintomas komesa loron 7 to loron 18 liu nain 2 konhece/hasoru malu.

Responde ba saude publika

Matadalan iha. Refere ba “*Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste*” no “*Strategies and operational guidelines on Measles Eliminatio and Rubella/CRS Control (2016)*”

* Hanesan responde ba **Isin manas ho rash (Fever with rash)** *

Relata kazu konfirmadu ba Departamento VE imediata (relata ba programa VPD iha nivel Nasional).

Amostra/sampel positif tia ona ba sarampo (Measles PCR positif ka Measles IgM positif).

Sarampo continua iha pájina tuir mai

Responde ba saude publika (kontinua...)

Hala'o jestau ba kazu

Investiga kazu imediata – uza formatu “Measles/Rubella case investigation form” atu buka informasaun demografiku, sintomas, data mosu, nia istoria pasiar ba rai seluk, mo'os istoria kontaktu ema husi rai seluk.

Determinu nia status imunizasaun. Buka data nia simu ona vasina.

Foti sampel swab (PCR) ka serology (IgM) para bele konfirma sarampo ka rubella.

Fo avisu ba kazu – isolar no deskansa iha uma. Fo hanoin ba kazu la bele sai no la bele besik ema seluk.

Hala'o jestau ba kontaktu

Buka ema sira hotu ne'ebe liga/kontaktu malu ho kazu iha tempu lora 4 moluk kazu mosu sintomas to lora 7 liu kazu mosu sintomas. Buka ema nia status imunizasaun. Bainhira ema la iha evidensia imunizasaun, tenki fo atu prevene sarampo/rubella (eksklusi feto isin rua).

Explika sintomas sarampo/rubella ba kontaktu sira no fo aviso ba nia, bainhira nia mosu sintomas, deskansa iha uma, la bele habesik hoe ma, no moos ba buka ajuda medikal.

Bainhira ema ba klinik, diak liu taka ohin ho mask para bele menus transmisaun. Bainhira kontaktu sira deenvolve sintomas, tenki foti sampel atu test.

Bainhira ita suspeitu rubella iha feto isin rua, tenki tui feto to nia partus atu hatene nia oan nia kondisaun.

Bainhira akontese surtu boot – promove programa imunizasaun rapidu atu kontrola.

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizasaun; 2018. Departamento Vigilancia Epidemiologia Diresaun Nasional Saude Publika, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- Ministeru da Saude Timor-Leste. Strategies and operational guidelines on Measles Elimination and Rubella/CRS Control (2016).
- Ministeru da Saude Timor-Leste. Post Elimination Sustainability Plan. Measles, Rubella. Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Measles and Rubella (2017).
http://www.searo.who.int/immunization/documents/sg_module1_measles_rubella.pdf
- Australian Government Department of Health. Measles. National guidelines for public health units. Communicable Disease Network of Australia (2015).
<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-measles.htm>

Skabies - Scabies

Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu suspeitu: Ema ne'be mosu isin katar makas no iha musan iha isin kulit ne'e hanesan karakteristika skabies. Ne'e geralmente mosu entre liman fuan, ain fuan or iha isin parte seluk.

Kazu konfirmadu: Detesaun ba *Sarcoptes scabiei* liu husi sampel kulit (konfirmadu liu husi mikrosopia); ka detesaun liu husi dermataskopia.



Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Relata ba Departamento CDC (CDC koordena).

Fontes informasaun

- World Health Organization (WHO). Neglected Tropical Diseases – Scabies (2018). https://www.who.int/neglected_diseases/diseases/scabies/en/

Severe Acute Respiratory Infection (SARI)

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: presiza evidensia sintomas deit.

Sintomas: Isin manas makas $\geq 38\text{ C}^\circ$;

NO

- mear ka garganta moras

NO

- ataka iha loron 10 ikus nia laran

NO

- presiza baixa iha sala observaun (hospital)

Responde ba saude publika

Iha SARI vijilansia sentinel sites

Patienti hotu ne'ebe tuir fali definisaun kazu SARI nian tenki relata ba linha reportagem (VE) nebe defini tiha ona.

Desde 2022, estratejia vijilansia ba COVID-19 atu tuir Estrategia Vijilansia Integradu Moras Respiratoriu (Integrated Surveillance of Respiratory Pathogens in Timor-Leste).

Atu investiga kazu moras respiratoriu hotu (ILI/SARI/ARI/COVID-19/Influenza) uza formulariu "CASE INVESTIGATION FORM FOR INTEGRATED RESPIRATORY SURVEILLANCE (ILI, SARI, ARI, COVID-19, Influenza and RSV)".

Kolekta amostra/sampel (*Throat swab/swab garganta, nose swab/swab inus*) husi kazu SARI sira no haruka ba Laboratoriu Nasional atu teste ba COVID-19 PCR no moos influenza PCR.

Amostra/Sampel: Foti swab husi inus ka garganta. Haruka ba Laboratoriu atu teste ba COVID-19 PCR no influenza PCR. Teste ba *respiratory syncytial virus* (RSV).

Ba ema ne'ebe iha sintomas SARI no *pneumonia*, presiza kolekta amostra kaben tasak (*sputum*). Haruka sampel ba laboratorium mikrobiolojia atu kultur.

Tempu no surtu gripe ka surtu COVID-19

Halo sosialisasaun iha comunidade atu promove aktividade prevensaun, espesialamente vasinasaun ba COVID-19, inklui *booster*. Fo hanoin ba ema moras atu deskansa iha uma to'o nia mear para, no hatoman-an fase liman no takaibun bainhira me'ar, atu nune'e bele prevene transmisaun moras ba ema seluk.

Tratamentu antiviral rekomenda ba ema sira ho risku boot. Halo rekomendasaun bae ma sira risku boot ba facilidade saude nian atu simu tratamentu apropiadu.

Bainhira iha indikasaun surtu:

- Kontaktu imediata ba responsavel

Bainhira iha indikasaun surtu:

- Kontaktu imediata ba responsavel Vijilansia Epidemiolojia tuir hirarkia servisu nian.

- Bainhira ita deskonfia pasiente ne'e iha kontaktu ho animal, kontaktu direita ba ministeyru relevante sira.
- Komesa halo *line-list*.

Immunizasaun ba moras COVID-19 efektivu tebes. Fase liman ho sabaun, moos uza maskra nudar aktividade efektivu liu hodi prevene transmisaun. Immunizasaun ba Influenza efektivu tebes maibe seidauk implementa iha Timor-Leste. Fase liman ho sabaun nudar aktividade efektivu liu hodi prevene transmisaun.

Importante

Kazu SARS (Severe acute respiratory syndrome) tenki relata ba OMS, tuir Reglamentu Saúde Internacional ka International Health Regulations (IHR) 2005.

Kazu influenza subtype foun tenki relata ba WHO, tuir fali International Health Regulations (IHR) 2005.

Fontes informasaun

- Timor-Leste Ministerio da Saude. Operational protocol for influenza-type illnesses (ILI) and Severe Acute Respiratory Infection (SARI) Surveillance for Influenza in Sentinel Sites in Timor-Leste (2018) - (Draft).
- World Health Organization (WHO) Influenza (2019).
<https://www.who.int/influenza/en/>
- World Health Organization (WHO) Clinical management of severe acute respiratory infections when novel coronavirus is suspected: What to do and what not to do (2005).
https://www.who.int/csr/disease/coronavirus_infections/InterimGuidance_ClinicalManagement_NovelCoronavirus_11Feb13u.pdf
- World Health Organization (WHO) Middle Eastern Respiratory Syndrome – MERS-CoV (2019). <https://www.who.int/emergencies/mers-cov/en/>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- Matadalan Nasional Konaba Vijilansia no Jestaun Kontaktu ba COVID-19 ba Timor-Leste (Ver. 6, Atualizadu 22 Fev. 2021).
- World Health Organization (WHO) Coronavirus 2019 (2022)
https://www.who.int/health-topics/coronavirus#tab=tab_1

Severe Acute Respiratory Syndrome (SARS)



Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium NO evidensia sintomas.

****** Kazu suspeitu/alertu tenki fo hatene WHO.

Evidensia laboratorium definitivu

- Detesaun ba Severe Acute Respiratory Syndrome-coronavirus (SARS-CoV) liu husi nucleic acid testing (PCR) liu husi sampel klinika tipo 2 (eg nasopharyngeal no feces) **KA** sampel klinika hanesan (e.g nasopharyngeal x 2) no ema foti sampel tuir malu iha moras lao nia laran **KA** sampel positif liu husi metodolojia rua ka liu PCR kuando ema uza RNA extract foun husi sampel original.

KA

- IgG seroconversion ka nivel SARS-CoV antibodies sa'e aas dala 4 ka liu (≥ 4), ne'be sampel mo'os *tested parallel* ba enzyme-linked immunosorbent assay ka immunofluorescent assay.

KA

- Isolasaun ba SARS-CoV **NO** detesaun ba SARS-CoV liu husi nucleic acid testing, ne'be uza metodolojia validadu.

Evidensia sintomas

Ema ne'be moras ho sintomas tuir mai:

- Isin manas ($\geq 38^{\circ}\text{C}$).

NO

- Ida ka liu ida (≥ 1) tuir mai: me'ar; dada-iis araska.

NO

- Evidensia radiolojika hatudu pus, raan, ka proteina iha pulmao sugestivu pnwmonia ka Acute Respiratory Distress Syndrome (ARDS) iha; ka tuir autopsia, patolojia hatudu pnwmonia ka ARDS iha.

Kazu suspeitu/alertu

Bainhira kauza seluk klaro la iha:

- Pessoal de Saude* nain rua ka liu rua (≥ 2) husi servisu fatin hanesan, akontese sintomas SARS no sintomas tuir malu iha loron 10 nia laran.

KA

- Ema nain tolu ka liu (≥ 3) hetan moras liu hospital nia laran (nosocomial), bele inklui trabalhadores, pasiensa ka ema visita deit, no iha hospital hanesan, no akontese sintomas SARS, no sintomas tuir malu iha loron 10 nia laran.

* eg. Pessoal de Saude, dotor, enfermeiru/a, sientistu/a, ema hamoos, etc.

Definisaun kazu suspeitu/alertu iha tamba WHO hakarak hatene sedu kuando SARS tama fali – hanesan “early warning” para ema bele prevena surto mundial.

SARS continua iha pájina tuir mai

Responde ba saude publika

Investiga imediata atu hatene infeksaun husi ne'ebe.

Baixa kazu iha fatin isolasaun iha hospital. Pessoal de saude iha hospital tenki uza PPE no tuir fali *respiratory precautions*.

Fo hatene informasaun ba kontaktu sira. Tuir kontaktu sira durante loron 10, kada loron dala 2, atu check kontaktu mosu sintomas ka lae.

Fo hatene OMS no Ministru/a da Saude.

Fontes informasaun

- World Health Organization. WHO Guidelines for the Global surveillance of SARS Updated Recommendations (2004).
http://www.who.int/csr/resources/publications/WHO_CDS_CSR_ARO_2004_1.pdf?ua=1 (Page 18; Section 3.5 Public health management of a SARS alert)
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.

Shigellosis

Definisaun kazu

Relatoriu; Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium

Detesaun ka isolasaun ba *Shigella* iha sampel klinikal (e.g. feces, raan, mii).

Responde ba saude publika

La iha responde espesifiku ba kazu ida-ida. Maibe tenki relata tuir linha reportagem (VE) nebe defini tiha ona.

Presiza fo hanoin ou konsola ba ema ne'ebe moras ho te'ben agudu – atu limita atividades wainhira nia kondisaun seidaun premiti (Ex. Labele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk) Sira presiza hein to te'ben para, liu 24 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Bainhira iha indikasaun surtu ruma, tenki relata imediata ba Ekipa Responde Rapidu (ERR) iha munisipiu (iha 24 oras nia laran), atu inisia investigasaun no responde.

Bainhira akontese surtu, uza “Formulariu Investigasaun Kazu ”.

Responde ba indikasaun surtu

1. Konfirma surtu duni ka lae? Konfirma diagnosis no doencas (kolekta amostra/sampel).
2. Forma ekipa investigasaun (uza ekipa nebe eziste tiha ona /ERR)
3. Prepara planu komunikaun.
4. Halo definizaun kazu ba surtu (tempu, ema, moras, fatin).
5. Buka tuir kazu no investiga (uza formulariu nebe apropriadu investigasaun kazu, ou bele dezenvolve formulariu espesifiku ba investigasaun).
6. Hala'o investigasaun ambiental no kolekta amostra/sampel.
7. Deskreve surtu (kona ba tempu, fatin iha ne'ebe, ema nain hira, ema nia karaktaristiku, etc.). Sempre halo epicurve.
8. Dezenvolve ipoteza (hypothesis) no teste (i.e. konsidera halo peskiza epidemiolojikal).
9. Hala'o intervensaun atu prevene aumenta kazu (hakotu transmisaun)
10. Hakerek relatoriu no fahe ba entidade relevantes.

* Notas: wainhira akontese surtu la presiza tuir nia ordem, depende ba situasaun

Fontes informasaun

- WHO Foodborne Disease Outbreaks: Guidelines for Investigation and Control (2008). https://apps.who.int/iris/bitstream/handle/10665/43771/9789241547222_eng.pdf;jsessionid=2512A5B6860FFA991748683E8C90A9A5?sequence=1
- WHO Guidelines for the control of shigellosis, including epidemics due to *Shigella dysenteriae* type 1 (2005). <https://apps.who.int/iris/bitstream/handle/10665/43252/9241592330.pdf?sequence=1>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association. Northern Territory Government, Australia. Shigellosis (2016). <https://nt.gov.au/wellbeing/health-conditions-treatments/digestive-health/shigellosis>

Smallpox



Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata deit.

Kazu konfirmadu: presiza evidensia laboratorium NO evidensia sintomas.

Evidensia laboratorium: Detesaun ka isolasaun ba variola virus

Evidensia sintomas

- Ema ne'be ho isin manas maka'as ($\geq 38.3^{\circ}\text{C}/101^{\circ}\text{F}$), no *malaise* (senti mal), *severe prostration* (isin kole/todan, la bele hamrik) no ulun-fatuk moras, no kotuk moras, ne'be sintomas komensa moluk rash sa'e (bainbain, liu loron 2 to 4, rash tuir)

NO

- Rash tuir. Rash ne makulopapula, komensa iha ohin no liman, dupois nia sa'e isin hotu inklui kabun, kotuk no ain. Liu oras 48, lesi troka nia forma atu sa'e to'os, ketak-ketak

NO

- Lesi maka stilo hanesan sa'e hamutuk (i.e. hotu hotu maka vesikula ka hotu hotu maka burbulho) iha isin nia situi hotu (e.g. ohin ka liman)

NO

- Kauzu seluk klaru la iha



Responde ba saude publika

* Doencas ida ne konsidera eradikadu ona *

Relata kazu imediata ba Departamento VE imediata tuir servisu saude ne'ebe mak iha (relata ba programa VPD iha nivel Nasional).

Hala'o jestau ba kontaktu

Investiga imediata atu konfirma mo'os determina nia infeksaun liu husi ne'be.

Isolar kazu imediata.

Fo hatene WHO no Ministru/a da Saude imediata.

Hala'o jestau ba kontaktu

Identifika kazu nia kontaktu sira imediata. Kontakto ne'ebe ema hela iha uma hamutuk kazu konfirmadu, ka ema liga malu ho kazu besik (iha 2 metres nia laran), liu 15 minutu ho kazu, kuandu kazu kontagioza mo'os la uza PPE. Kontakto hanesan ne bele inklui ema servisu hamutuk, familia, kolega, etc. Kazu konfirmadu smallpox konsidera kontajiosa desde mosu isin manas to kanek isu liu hamaran sa'e ona. Kontakto sira tenki kuarantina loron 17 desde kontakto ikus ho kazu konfirmadu. Check to'ok kontakto kada loron dala rua kona ba sintomas.

Fo hatene ba WHO para WHO bele order smallpox vaccine atu fo kontakto sira. Konsidera programa vasina iha comunidade.

Fontes informasaun

- Communicable Diseases Network Australian. Smallpox guidelines, public health (2017). [http://www.health.gov.au/internet/main/publishing.nsf/Content/33B47F135C9E299ACA2583520007D6F1/\\$File/smallpox-SoNG2018.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/33B47F135C9E299ACA2583520007D6F1/$File/smallpox-SoNG2018.pdf)
- WHO Smallpox vaccines (2018). <http://www.who.int/csr/disease/smallpox/vaccines/en/>

***Streptococcus pneumoniae* (invasivu) - *Streptococcus pneumonia* (invasive)**

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium

Detesaun ka isolasaun ba *Streptococcus pneumoniae* iha sampel konsidera baibain sterila (e.g. raan, blood culture, CSF, etc).

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Relata ba Departamento VE.

Fontes informasaun

- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Invasive Bacterial Disease (*Streptococcus pneumonia*) (2017). http://www.searo.who.int/indonesia/topics/immunization/module_7_-_ibd.pdf
- World Health Organization (WHO). Immunizations, Vaccines and Biologicals. Pneumococcal disease (2018). <https://www.who.int/immunization/diseases/pneumococcal/en/>
- Centres for Disease Control and Prevention (CDC). Global pneumococcal disease and vaccine (2018). <https://www.cdc.gov/pneumococcal/global.html>
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Accelerating introduction of new vaccines and related technologies (2019). http://www.searo.who.int/immunization/topics/new_vaccines/en/

Tetanus neonatorum - Neonatal tetanus



Definisaun kazu

Relatoriu: Kazu suspeitu no kazu konfirmadu tenki relata.

Kazu suspeitu no kazu konfirmadu hotu presiza evidensia sintomas deit.

Kazu konfirmadu

- Bebé foin-moris ho abilidade normal atu xupa/susu no tanis durante loron rua primeiru moris nian; **NO**
- Ida ne'ebé tama idade loron 3 to loron 28, komesa xupa/susu araska ka labelle duni; **NO**
- Isin hotu komesa sai to'os/rigidu ka akontese/mosu konvulsaun.



Kazu suspeitu

- Bebé foin tama idade loron 3 to loron 28 mate, no kauzu mate la klaru (la bele kauzu husi moras seluk); **KA**
- Bebe foin tama idade loron 3 to loron 28 no mediku suspeitu tetanus-neonatorum.

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE. Tuir matadalan.

Investiga kazu suspeitu no kazu konfirmadu hotu. Uza formatu “Neonatal tetanus case investigation form” atu hatene informasaun demografiku, sintomas, data mosu, nia inan nia status imunizasaun, etc.

Hala'o jestau ba kontaktu

Bainhira nia inan nunka simu vasina tetanus nia, fo vasina imediata. Depois, tuir fali fulan 1, fo vasina dose 1 tan.

Fo hatene ba programa EPI (*expanded program* Imunizasaun) para EPI bele halo aktividade iha comunidade, para fo vasina ba feto sira ho idade bele isin rua (hanesan tinan 15 to tinan 45).

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizasaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publiko, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Neonatal Tetanus (2017).
http://www.searo.who.int/immunization/documents/sg_module6_nt.pdf

Tetanus (idade boot liu loron 28)

Definisaun kazu

Relatoriu: Kazu suspeitu no kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium.

Kazu suspeitu: Presiza evidensia sintomas deit.

Evidensia laboratorium

Isolasaun ka detesaun ba *Clostridium tetani* liu husi kanek, hosi ema ne'be sujestivu tetanus no *prevention of positive tetanospasm in mouse test from such an isolate using specific tetanus antitoxin*.

Evidensia sintomas

Ema ne'be ho evidensia sintomas no kauzu seluk la klaru.

Sintomas primeiro bele inklui:

- Espasmo maka'as maka halo ema ne'be takaibun metin lo'os (*lock jaw*)
- Kakorok to'os, kabas to'os, kotuk to'os.
- Tolan araska
- Isin hotu bele espasmu maka'as.
- Konvulsaun
- Dada iis araska



Ema ne'be ho tetanus mo'os bele mosu isin manas no fuan tuku-tuku la diak. Komplikasaun tuir tetanus bele inklui pnemonia, ruin toha, dada iis la hetan, infarte/ateka-fuan no matet.

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE.

Fo hatene ba programa EPI (*expanded program* imunizasaun) para EPI bele halo aktividade iha comunidade, atu aumenta *vaccine coverage*.

Bainhira kazu liu 2, buka droga kontaminadu ka aimoruk kontaminadu (hanesan aimoruk sona).

Fontes informasaun

- Vigilancia Moras Ne'ebe Prevene ho Imunizazaun; 2018. Departamento Vigilansia Epidemiologia Diresaun Nasional Saude Publiko, Ministerio Da Saude, Republika Demokratika Timor-Leste.
- World Health Organization Regional Office for South-East Asia (WHO SEARO). Surveillance Guide for Vaccine-Preventable Diseases in the WHO South-East Asia Region. Neonatal Tetanus (2017).
http://www.searo.who.int/immunization/documents/sg_module6_nt.pdf
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association. Public health response

Typhoid

Definisaun kazu

Relatoriu: Relata deit kazu ne'ebe konfirmadu ona.

Kazu konfirmadu: Presiza evidensia laboratorium.



Evidensia laboratorium

Detesaun (PCR ka kultur) ba *Salmonella typhi* iha sampel klinikal.

Responde ba saude publika

Relata kazu suspeitu no konfirmadu ba Departamento VE imediata. Investiga kazu hotu imediata.

Hala'o jestau ba kazu

Interview kazu atu buka hatene informasaun demografiku, sintomas, data mosu sintomas, istoria pasiar ba rai liu, ka istoria ema mai husi rai liu visita, ka informasaun kona ba nia hetan nia moras liu husi ne'ebe.

Fo informasaun ba kazu kona ba hygiene. Kazu moras ho typhoid la bele ba servisu, ka eskola, ka prepara hahan, ka serve ema seluk. Sira tenki hein to moras hotu ona, liu 48 oras, depois bele fila fali ba aktividade hanesan bain-bain.

Fo hatene Saude Ambiental. Investiga infeksaun nia orijin iha ne'ebe. Konsidera hahan ka be'e, ka ema seluk prepara hahan ba kazu moluk nia hetan infeksaun.

Hala'o jestau ba kontaktu

Fo informasaun ba kazu nia kontaktu iha uma laran ka kontaktu pasiar ho kazu, kona ba sintomas. Dalaruma, bainhira sira mosu sintomas, tuir fali jestau ba kazu.

Fontes informasaun

- World Health Organization (WHO). Typhoid and other invasive salmonellosis. Vaccine-preventable diseases: surveillance standards.
https://www.who.int/immunization/monitoring_surveillance/burden/vpd/WHO_SurveillanceVaccinePreventable_21_Typhoid_R1.pdf?ua=1
- Australian Government Department of Health. Typhoid and Paratyphoid fevers. CDNA national guidelines for public health units (2017).
<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-typhoid-paratyphoid.htm>
- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association. Public health response

Tuberkulosis (TB) - *Tuberculosis*

Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu kliniku tenki relata.

Kazu konfirmadu: presiza evidensia laboratorium.

Kazu kliniku: presiza evidensia sintomas deit.

Evidensia laboratorium

Kazu konfirmadu ba tuberkulosis (TB) ema ne'ebe amostra positif ba *smear microscopy*, Xpert MTB/RIF, ka kulture. Kazu sira konfirmadu tenki register no relata.

Evidensia sintomas

Kazu TB kliniku la iha resultadu laboratorium. Ne ema ne'be doktor maka konsidera kazu TB tuir fali nia sintomas. Definisaun ida ne moos inklui ema ne'be x-ray sugestivu ba TB ka histolojia sugestivu ba TB. Bainhira amostra husi kazu kliniku positif ba TB, ita tenki troka kazu nia klasifikasaun ba kazu konfirmadu.

Klasifikasaun ba kazu TB

Programa iha CDC tuir nia matadalan.

Responde ba saude publika

Relata kazu hotu ba CDC para programa relevante bele tuir nia prosesu.

Iha matadalan no estratejia nasional.

Fontes informasaun

- Timor-Leste Ministry of Health. NTP Manual, 4th Edition (2014).
- World Health Organization (WHO). WHO Guidelines on Tuberculosis Infection prevention and control (2019 update).
<https://apps.who.int/iris/bitstream/handle/10665/311259/9789241550512-eng.pdf?ua=1>
- World Health Organization (WHO). Tuberculosis (TB) (2019).
<https://www.who.int/tb/en/>

Ulsera genital/ Ulkun genital - *Sexually Transmitted Infections* (STI)

Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia sintomas deit.

Evidensia sintomas

1. Iha mane - ulsera iha penis, skrotum, ka rektum ka raan mutin sae

2. Iha fetu - ulsera iha labia, vagina, ka rektum iha

(Sintomas ne'e bele kauza husi sifilis, chancroid, limfогranuloma venereum, granuloma inguinale, ka kazu herpes genital atropik)

Responde ba saude publika

La iha resposta espesifiku ba kazu ida-ida. Relata ba CDC.

Fontes informasaun

- Timor-Leste Ministry of Health. Draft National Strategic Plan HIV and STIs, 2017-2021 (2016).
- World Health Organization (WHO). HIV (2019). <https://www.who.int/hiv/en/>

Varisela - Chicken pox (zoster)

Definisaun kazu

Relatoriu: Kazu suspeitu no kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium.

Kazu suspeitu: Presiza evidensia sintomas deit.

Evidensia laboratorium

Detesaun ba varicella-zoster virus liu *nucleic acid testing* (PCR) husi kulit (swab) ka CSF.

Evidensia sintomas

Moras varisela bainhira kona ema, nia sintomas karakteristika ampolas ki'ik no be'en iha laran. Ema bele senti katar ka balu bele mosu kulit senti moras maka'as.

Musan mean ho ben mosu iha kualker ema nia isin, sente moras, dala ruma akompaña ho katar no isin manas no sei aumenta barak bainhira tarde hetan tratamentu.



Responde ba saude publika

Relata ba Departamentu VE (Vaccine Preventable Disease) tuir hirarkia servisu ne'ebé mak iha.

Agora iha Timor-Leste, seidauk iha vasina moos sedauk iha matadalan nasional.

Fo hanoin ba pasiente atu deskansa iha uma no la bele sai no besik ema seluk, la bele ba eskola no servisu atu la bele hada'et moras ne'e ho ema seluk, to'o nia di'ak.

Fontes informasaun

- World Health Organization (WHO). Immunizations, Vaccines and Biologicals. Varicella (2018). <https://www.who.int/immunization/diseases/varicella/en/>
- World Health Organization (WHO). Varicella. Vaccine-preventable diseases: surveillance standards (2019). https://www.who.int/immunization/monitoring_surveillance/burden/vpd/WHO_SurveillanceVaccinePreventable_22_Varicella_R1.pdf?ua=1
- United States Centers for Disease Control and Prevention. Strategies for the Control and Investigation of Varicella Outbreaks Manual, 2008 (2008). <https://www.cdc.gov/chickenpox/outbreaks/manual.html>

Viral haemorrhagic fevers (Ebola, Lassa fever, Marburg, Crimean Congo)



Definisau kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratorium definitivu.

Kazu suspeitu: Presiza evidensia laboratorium sugestivu NO evidensia sintomas NO evidensia epidemiolojika.

Evidensia laboratorium definitivu

Evidensia laboratorium definitivu presiza konfirmasau liu husi Victorian Infectious Diseases Reference Laboratory (VIDRL), Melbourne AUS, * ka Special Pathogens Laboratory, CDC, Atlanta USA, ka Special Pathogens Laboratory, National Institute of Virology (NIV), Johannesburg RSA.

- Isolasaun ba virus espisifika; **KA**
- Detesaun ba virus espisifika liu husi *nucleic acid testing* (PCR) ka *antigen detection assay*; **KA**
- IgG *seroconversion*, ka nivel virus espesifika IgG sa'e aas dala 4 ka liu (≥ 4).

Evidensia laboratorium sugestivu

- Isolasaun ba virus espisifika, maibe konfirmasau sedauk liu husi VIDRL, Melbourne ka CDC, Atlanta ka NIV, Johannesburg; **KA**
- Detesaun ba virus espisifika liu husi *nucleic acid testing* (PCR), maibe konfirmasau sedauk liu husi VIDRL, Melbourne ka CDC, Atlanta ka NIV, Johannesburg; **KA**
- IgG *seroconversion*, ka nivel virus espesifika IgG sa'e aas dala 4 ka liu (≥ 4), maibe konfirmasau sedauk liu husi VIDRL, Melbourne ka CDC, Atlanta ka NIV, Johannesburg; **KA**
- Detesaun ba virus espisifika nia IgM.

Evidensia sintomas

Presiza sintomas karakteristika moras haemorrhagic fever, depende mediku suspeitu. Sintomas bele inklui isin-manas, myalgia (isin-moras) no prostration (isin hotu fraku, atu hamriik la bele), hamutuk ho ulun-fatuk moras, gargantuan moras, *conjunctival injection* (matan-mean), isin kor mean, ka sintomas gastrointestinal. Komplikasaun ruma bele inklui raan-suuli be-beik, *petechiae*, hypotensaun, *oedema* no sintomas neurolojika.

Evidensia epidemiolojika

- Ema ne'be foin sa'e nasaun konsidera endemika ka epidemika iha, iha loron 9 ikus nia laran (≤ 9 loron = Marburg virus), iha loron 13 ikus nia laran (≤ 13 loron = Crimean Congo virus), ka iha loron 21 ikus nia laran (≤ 21 loron = Lassa virus ka Ebola virus), moluk ema ne'be mosu moras; **KA**
- Ema ne'be kontakto ho kazu konfirmadu; **KA**
- Ema ne'be kona raan, mukosa, sperm etc., ne'be buat ida infeksiuzu ba viral haemorrhagic fever(s) (VHF).

Viral haemorrhagic fevers continua iha pájina tuir mai

Responde ba saude publika

Kazu konfirmadu no kazu suspeitu tenki investiga ka relata ba VE imediata, tuir hirarkia servisu ne'ebe mak iha.

Hala'o jestaun ba kazu

Isolamentu ba kazu. Pessoal saúde treinadu TENKE uza PPE (Ekipamentus Protesaun Pessoal) apropriada no tuir nia matadalan tratamentu.

Investiga lalais atu konfirma kazu (Kolekta amostra/sampel atu teste iha laboratorium apropriada). Foti informasaun kona ba sintomas, data sintomas mosu, istoria viajen, no determina kontaktu iha ka lae.

Fo hatene Ministeriu da Saude no OMS. Husu akonselamentu husi espesialista/peritu sira.

Hala'o jetau ba kontaktu

Husu ajuda/akonselamentu husi espesialista/peritu sira.

Fontes informasaun

- Heymann, D. 2015. Control of Communicable Diseases Manual. 20th Edition. American Public Health Association.
- World Health Organization (WHO). Ebola publications: surveillance, contact tracing, laboratory. (2019). <https://www.who.int/csr/resources/publications/ebola/surveillance/en/>
- World Health Organization (WHO). Technical guidance on Lassa Fever. (2019). <https://www.who.int/emergencies/diseases/lassa-fever/technical-guidance/en/>
- World Health Organization (WHO). Technical guidance on Marburg Virus Disease. (2019). <https://www.who.int/csr/disease/marburg/technical-guidance/en/>
- World Health Organization (WHO). Early detection, assessment and response to acute public health events. (2005). https://apps.who.int/iris/bitstream/handle/10665/112667/WHO_HSE_GCR_LYO_2014.4_eng.pdf;jsessionid=6C406A8AE187C8BA336E3D0696851EBB?sequence=1

Yellow fever



Definisaun kazu

Relatoriu: Kazu konfirmadu no kazu suspeitu tenki relata.

Kazu suspeitu: presiza evidensia sintomas **NO** evidensia laboratorium sugestivu/hatudu los.

Kazu konfirmadu: presiza evidensia laboratorium definitivu.

Evidensia laboratorium definitivu

- Detesaun ba yellow fever virus liu husi *nucleic acid testing* (PCR); **KA**
- Detesaun ba yellow fever IgM ka, yellow fever IgG sa'e maka'as dala 4 ka liu (≥ 4) se ema la simu vasina foin dadauk; **KA**
- Isolamentu ba yellow fever virus.

Evidensia laboratorium sugestivu

Detesaun yellow fever IgM, no la iha IgM ba flavivirus seluk, no se ema la simu ona vasina foin dadauk (iha fulan 3 nia laran).

Evidensia sintomas

- Ema ne'ebe mai husi nasaun ida ne'be yellow fever konsidera endimiku (seidauk to'o semana 1).

NO

- Sintomas: Ema derepente mosu isin manas, isin malirin, ulun-fatuk moras, kotuk moras, isin moras, laran-sa'e/laran beik no muta. Ema bele progresu to moras grave hanesan ne beku (matan kinur, kulit kinur), manifestasaun hemorajiku (matan mean, muta ho ran, ran sai husi inus no ibun), no moos bele mate iha semana 3 nia laran. Atu diagnoze yellow fever deficil oitoan tamba sintomas la spesifika no kuaze hanesan ho moras seluk. Exp. hepatitis, malaria, dengue, typhoid fever, leptospirosis, moras ebola, no lassa fever. Evidensia laboratorium importante atu diagnoze yellow fever ho lolos.

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE imediata. Fo hatene VE iha nivel nasional (RRT).

Investiga no responde ba kazu hotu (suspeitu no konfirmadu). Kolekta infomasaun demografiku, sintomas, data mosu, no fatin sira kazu visita iha tempu moluk nia mosu sintomas.

Fo hatene ba Saude Ambiental.

Fontes informasaun

- World Health Organization Regional (WHO). Yellow Fever – Prevention and Control (2019). <https://www.who.int/csr/disease/yellowfev/en/>
- World Health Organization (WHO). List of countries, Territories and Areas – Yellow fever vaccination requirements and recommendations; malaria situation; and other vaccination requirements (2019). https://www.who.int/ith/ith_country_list.pdf
- Pan American Health Organization (PAHO). Yellow Fever: Guidelines (2019). https://www.paho.org/hq/index.php?option=com_topics&view=rdmore&cid=5053&item=yellow-fever&cat=scientific_technical&type=guidelines-5053&Itemid=40784&lang=en

Zika virus infeksaun



Definisaun kazu

Relatoriu: Kazu konfirmadu tenki relata.

Kazu konfirmadu: Presiza evidensia laboratoriu definitivu; **KA**
Presiza evidensia laboratoriu sugestivu **NO** evidensia sintomas.

Evidensia laboratoriu definitivu

- Detesaun ba Zika (ZIKV) virus liu husi *nucleic acid testing* (PCR); **KA**
- Detesaun ba ZIKV IgM iha sampel CSF ka serum, no ema ne'be la iha dengue ka flavivirus seluk; **KA**
- IgG seroconversion ka titre IgG zika virus (ZIKV-IgG) nia'n sa'e aas iha paired serology, no ema ne'be la iha dengue ka flavivirus seluk.

Evidensia laboratoriu sugestivu

Detesaun ba Zika (ZIKV) virus IgM, no ema ne'be la iha dengue ka flavivirus seluk; ka la iha vasinasaun foin dadauk (iha semana 3 ikus nia laran) ba flavivirus seluk

Evidensia sintomas

Presiza rua ka liu (≥ 2) tuir mai ne'e:

- | | |
|---------------|---|
| • Isin manas, | • <i>Myalgia</i> (isin moras) ka <i>arthralgia</i> (fukun moras), |
| • Ulun moras, | • Matan mean ne'be maran (<i>non-purulent conjunctivitis</i>). |
| • Rash | |

Responde ba saude publika

Relata kazu suspeitu no kazu konfirmadu ba Departamento VE imediata. Fo hatene VE iha nivel nasional.

Investiga no responde ba kazu hotu (suspeitu no konfirmadu). Officer surveillance iha CdS nia responsabilidade. Uza formulario investigasaun dengue nia. Bainhira liu kazu 1, halo *line-list* iha municipiu atu haruka ba Dept. VE iha nivel Nasional. Kolekta infomasaun demografiku, sintomas, data mosu, no fatin sira kazu visita iha tempu semana 2 moluk nia mosu sintomas.

Fo hatene Saude Ambiental, kazu nia hela fatin moos fatin kazu akontehse susuk. Iha nivel municipio, DPHO-CDC no surveillance officer analisa dadus depois nia haruka dadus ba nivel nasional. Nia moos tenki fo hatene Saude Ambiental iha nivel Municipio atu ba halo intervensaun, tuir sira nia prosesu.

Fontes informasaun

- World Health Organization Regional (WHO). Emergency Preparedness, Response - Publications, technical guidance on Zika virus.
<https://www.who.int/csr/resources/publications/zika/en/>

Akronimu no simbolu

Akronimu	
AES	Acute encephalitis syndrome
AFP	Acute flaccid paralysis
CDC	Departemento Controlo de Doencas Contagiosas, Ministério da Saúde, Timor-Leste
CFT	Complement fixation test
CNS	Central nervous system
COVID-19	Coronavirus Disease 2019
CRS	Congenital rubella syndrome
CRI	Congenital rubella infection
CSF	Cerebral spinal fluid
DPHO-CDC	District (Município) public health office
EPI	Expanded program Immunizasaun
ERR	Ekipa Responde Rapidu – <i>Rapid Response Team</i>
HAI	Hemagglutination inhibition test
HiB	<i>Haemophilus influenza</i> type B
HIV	Human immunodeficiency virus
IDSR	Integrated disease surveillance and response guideline
IgG	Immunoglobulin G
IgM	Immunoglobulin M
IHR	Regulamentu Saúde Internasional/International health regulations
IM	Intramuscular
ILI	Infesaun Respiratorio Superior Aguda /Influenza like illness
JEV	Japanese encephalitis virus
MAP	Ministru Agrikultura no Peskas
MoH	Timor-Leste Ministry of Health
NHL	National health laboratory
OMS	Organizasaun Mundial Saude/World Health Organisation
PCR	Polymerase chain reaction
RHD	Moras fuan reumatika - Rheumatic heart disease
SARI	Severe acute respiratory illness
SARS	Severe acute respiratory syndrome
SARS-CoV-2	Severe acute respiratory syndrome coronavirus-2
STI	Ulsera genital/ Ulkun genital
TB	Tuberkulosis
VE	Departamentu Vijilansia Epidemiolojia, Ministério da Saúde, Timor-Leste.
VPD	Moras Ne'ebe Prevene ho Imunizasaun/Vaccine preventable disease
WHO	Organizasaun Mundial Saude/World Health Organisation
WHO SEARO	World Health Organization Regional Office for South-East Asia
ZIKV	Zika Virus
Simbolu	
≥	Hanesan ka aas/boot liu
>	Aas/boot liu

$\leq$	Hanesan ka sedauk to'o/menus liu
$<$	Sedauk to'o/Menus liu

Referensias

- Thacker SB, Berkelman RL. 1988. Public health surveillance in the United States. *Epidemiology Review*. 10:164–90.
- World Health Organization, Western Pacific region (WHO). 2008. A guide to establishing event- based surveillance. [Accessed 21 May 2019]. Available at <https://apps.who.int/iris/rest/bitstreams/920897/retrieve>



Palácio das Cinzas, Caicoli, Dili

República Democrática de Timor-Leste