# **OVERVIEW OF COMMUNICABLE DISEASE SURVEILLANCE SYSTEM IN BULGARIA**

# VIRAL HEPATITIS PREVENTION BOARD MEETING SOFIA, BULGARIA 24-25 MARCH 2011



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# BULGARIA - BACKGROUND INFORMATION (as of 31.12.2009)

Total population	7 563 710	Urban areas population	71.4%
Live births	81 572	Structure of the population by age:	
Birth rate	10.7 per 1 000	0-17 years of age	16.7%
Mortality rate	14.2 per 1000	18-64 years of age	65.8%
Infant mortality	<b>9.0 per 1000</b>	over 65 years	17.5%
Natural growth	-3.5 per 1000	Life expectancy at birth:	
		total population	73.43 years
		female	77.43 years
		male	<b>69.90</b> years

# LEGAL FRAMEWORK OF CD SURVEILLANCE AND CONTROL IN BULGARIA

- Law on health, effective from 1 January 2005 Section five: CD Control, Articles 57, 58, 59, 60, 61, 62, 63
- Regulation No 21 of the MoH from 18 July 2005 on the procedure for registration, notification and reporting of communicable diseases (State Gazette, No 62 of 29 July 2005), adopting the list of CD, case definitions and case classification (suspected, probable and confirmed case) for reporting CD
- Methodological Guideline No 9 of the MoH (September 25, 2000) for Surveillance and Control of Influenza
- Regulation of the MoH No 15 on Immunizations in Republic of Bulgaria (12 May 2005) and Guidelines for Surveillance of AEFI (7 April 2006)
- Regulation of the MoH No 2 on prevention and control of nosocomial infections (10 January, 2005)
- Regulation of the MoH on the conditions and procedures for carrying out border health control of the Republic of Bulgaria 274/ 9.10.2006 Published in the State Gazette N: 85 on 20.10.2006

# LIST OF COMMUNICABLE DISEASES FOR COMPULSORY

## **REPORTING (1)**

- 1. Amoebiasis
- 2. Anthrax
- 3. Ascariasis
- 4. Bacterial Meningitis and Meningoencephalitis
  - 4.1. specified:
  - 4.1.1. Pneumococcal
  - 4.1.2. Streptococcal
  - 4.1.3. H. influenzae type B
  - 4.1.4. other bacteria
  - 4.2. unspecified
- 5. Botulism
- 6. Brucellosis
- 7. Campylobacter infection
- 8. Chlamydia trachomatis, genital infection
- 9. Cholera
- 10. Cryptosporidiosis
- 11. Diphtheria
- 12. Echinococcosis
- 13. Escherichiosis (Colienteritis)
  - 13.1. VTEC infection

- 14. Gastroenteritis, enterocolitis
- 15. Giardiasis
- 16. Gonorrhea
- 17. Haemophilus influenzae type B, invasive infection
- 18. Hepatitis, viral:
  - 18.1. Acute viral hepatitis type A, B, C, D, unspecified
  - 18.2. Chronic viral hepatitis type B, C, D
- 19. Hymenolepiasis
- 20. HIV / AIDS
- 21. Influenza and ARD
- 22. Legionellosis
- 23. Leishmaniasis
- 24. Leptospirosis
- 25. Listeriosis
- 26. Lyme Disease
- 27. Malaria
- 28. Measles
- 29. Mediterranean Spotted Fever

# LIST OF COMMUNICABLE DISEASES FOR COMPULSORY REPORTING (2)

- 30. Meningococcal infection (meningococcal meningitis and sepsis)
- 31. Mumps
- 32. Pertussis
- 33. Plague
- 34. Poliomyelitis
  - 34.1. Acute Flaccid Paralysis
- 35. Psittacosis (Ornithosis)
- 36. Q-Fever
- 37. Rabies
- 38. Rubella
  - 38.1. Congenital Rubella
- 39. Salmonellosis
- 40. Scarlet Fever
- 41. Severe Acute Respiratory Syndrome (SARS)
- 42. Shigellosis
- 43. Smallpox
- 44. Streptococcus pneumoniae, invasive infection
- 45. Syphilis
- 46. Taeniarhynchiosis
- 47. Tetanus

- 48. Toxoplasmosis
- 49. Trichinellosis
- 50. Trichocephalosis
- 51. Tuberculosis
- 52. Tularemia
- 53. Typhoid / Paratyphoid Fever
- 54. Typhus exanthematicus (Epidemic louseborne typhus fever)
- 55. Variant Creutzfeldt-Jakob's disease
- 56. Varicella
- 57. Viral Haemorrhagic fevers:
  - 57.1. Ebola/Marburg fever
  - 57.2. Lassa fever
  - 57.3. Crimean-Congo Hemorrhagic Fever
  - 57.4. Hemorrhagic Fever with Renal Syndrome
- 58. Viral Meningitis and Meningoencephalitis
- 59. Yellow Fever
- 60. Yersiniosis

**Regulation No 21 of 18 July 2005 on the procedure for registration, notification and reporting of CD** (State Gazette, № 62,29.07.2005)

# CASE DEFININITIONS AND CASE CLASSIFICATION OF COMMUNICABLE DISEASES

*Possible case* is a case with a supportive clinical picture, which is neither confirmed, nor probable.

*Probable case* is a case with a compatible clinical picture or an epidemically linked case.

*Confirmed case* is a case confirmed by a laboratory examination.

REGULATION № 21 of 18 July 2005 on the procedure for registration, notification and reporting of communicable diseases promulgated in State Gazette, № 62 of 29.07.2005
COMMISSION DECISION of 19 March 2002 laying down case definitions for reporting communicable diseases to the Community network under Decision No 2119/98/EC of the European Parliament and of the Council (notified under document number C(2002) 1043) 2002/253/EC)

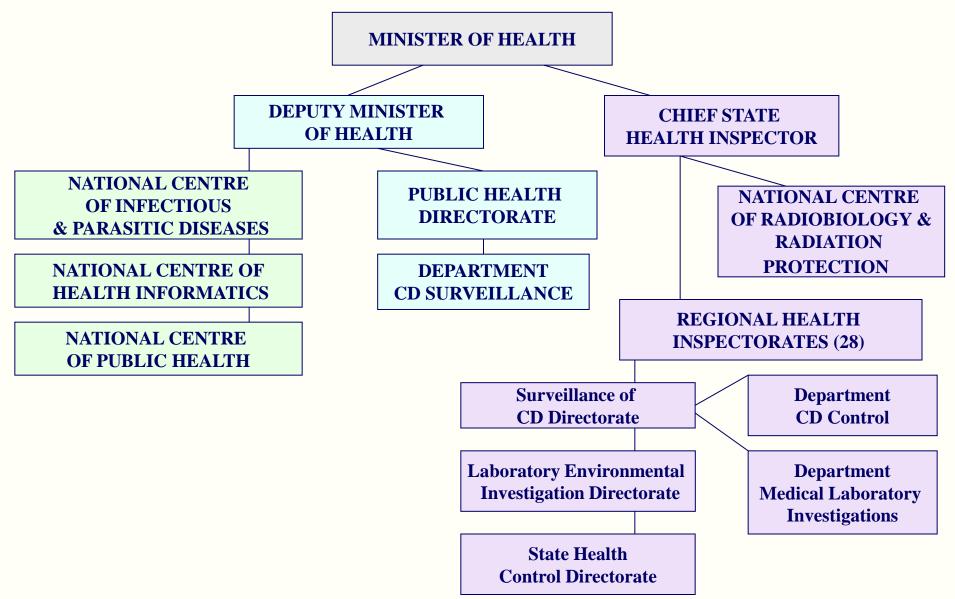
# **REPORTING FORMS USED FOR CD SURVEILLANCE**

- Rapid notification form
- Case investigation form
- Communicable disease reporting form (for reporting the aggregated number of CD from regional to the national level)

Specific **guidelines** for investigation and management of case/contact of CD

# INSTITUTIONAL FRAMEWORK OF CD SURVEILLANCE AND CONTROL IN BULGARIA

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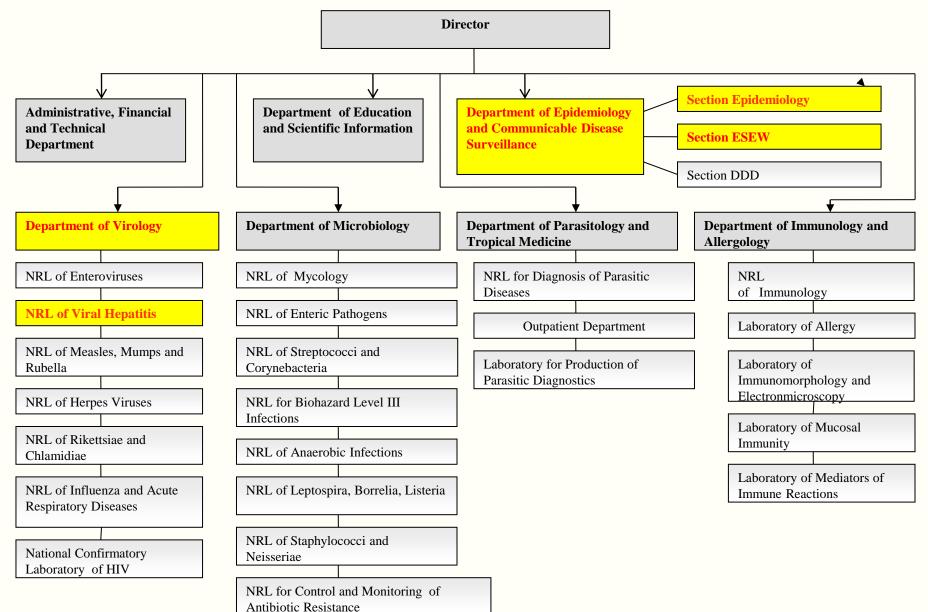


## NATIONAL CENTER OF INFECTIOUS AND PARASITIC DISEASES SOFIA, BULGARIA

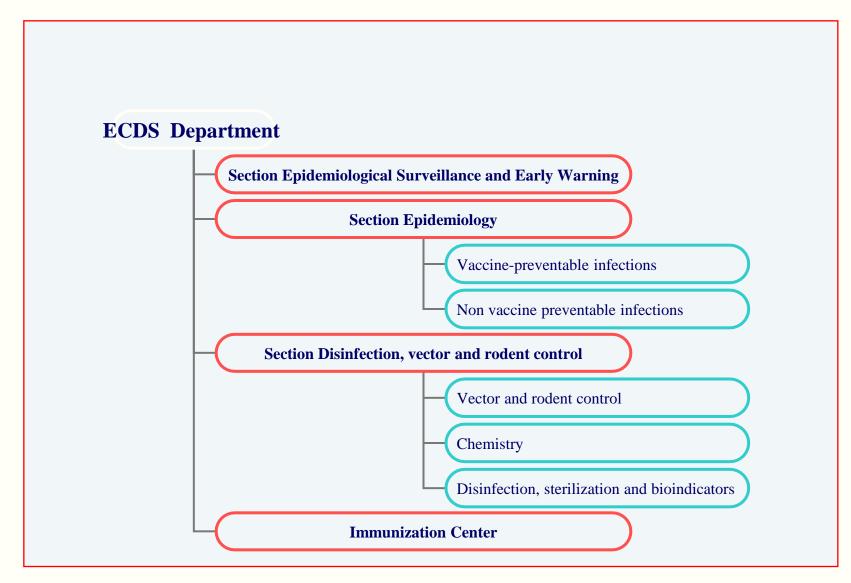


**ESTABLISHED 1881** 

# ORGANIZATIONAL CHART OF THE NATIONAL CENTER OF INFECTIOUS AND PARASITIC DISEASES (NCIPD)



## DEPARTMENT EPIDEMIOLOGY AND COMMUNICABLE DISEASE SURVEILLANCE AT NCIPD



# FLOW OF INFORMATION FOR CD SURVEILLANCE IN BULGARIA

**FIRST (PERIPHERAL) LEVEL - NOTIFIERS** GPS, LABS, PRIVATE PHYSICIANS, OUTPATIENT SPECIALIZED HEALTH CARE FACILITIES, HEALTH CENTERS, HOSPITALS (INCL. LABS)

**Responsibilities** To identify cases, complete and send reporting form Timing Within 24 hours Means of communication *Mail, phone, e-mail, fax* **Reporting form Rapid** notification form Institute receiving RHI reports

# **SECOND (INTERMEDIATE) LEVEL** REGIONAL HEALTH INSPECTORATE (RHI)

Responsibilities	To collect reports, send aggregated data for all reported CD cases to the NCHI	
	Epidemiological investigation of cases/contacts and outbreaks	
	Feedback to the 1-st level	
Timing	Daily, Monthly, Annually	
Means of communication Fax, mail, e-mail, web portals		
	Meetings, Press conferences	
<b>Reporting form</b>	Case investigation form	
	<b>CD Reporting form, Other Tabular forms</b>	
Institute receiving	NCHI, MoH (reports for outbreaks), NCIPD	
reports	1-st level structures, local media	

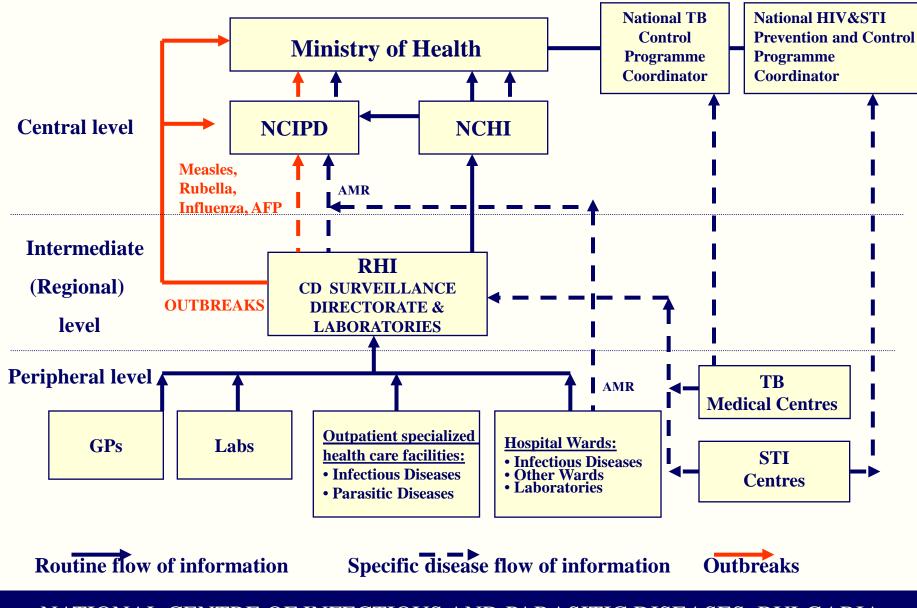
# **THIRD (CENTRAL) LEVEL** MoH, NCIPD, NCHI

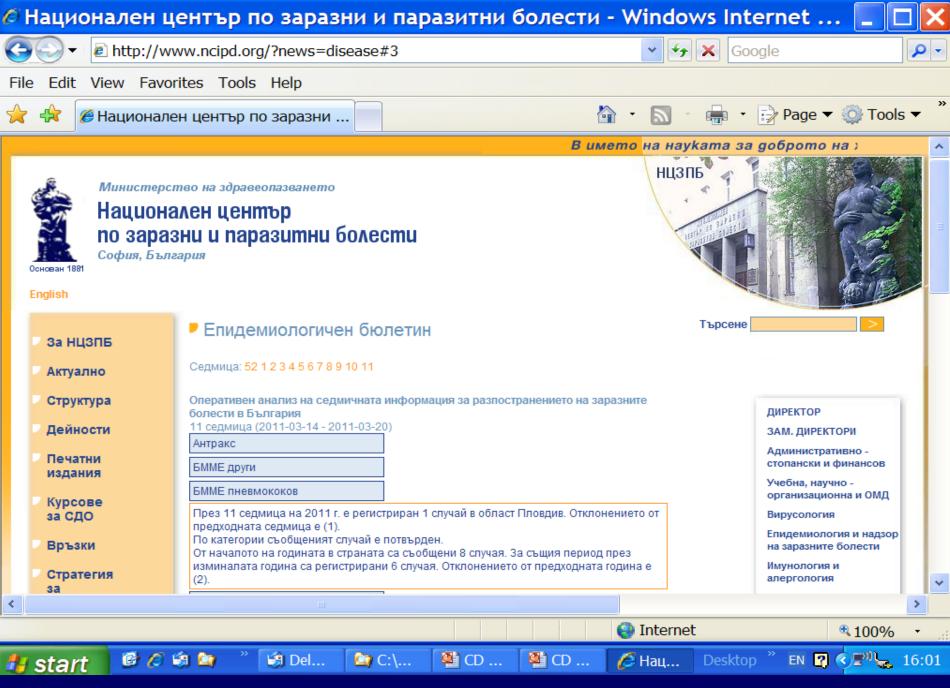
NCHI	
Responsibilities	Computerized data processing
Timing	Daily, Weekly, Monthly, Annually
Means of communication	Mail; e-mail
<b>Reporting form</b>	Tabular
Institute receiving reports	MoH, NCIPD, RHI

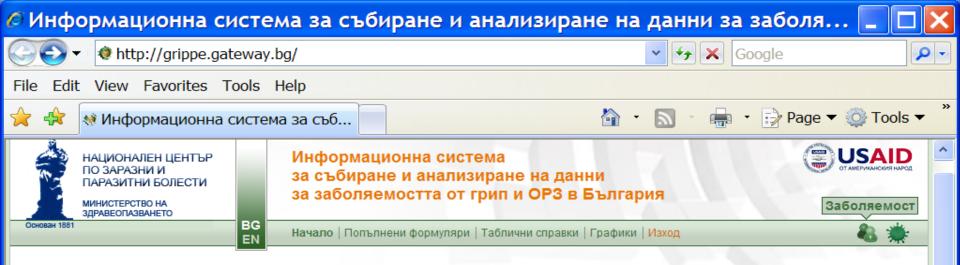
# THIRD (CENTRAL)LEVEL NCIPD $\rightarrow$ MoH

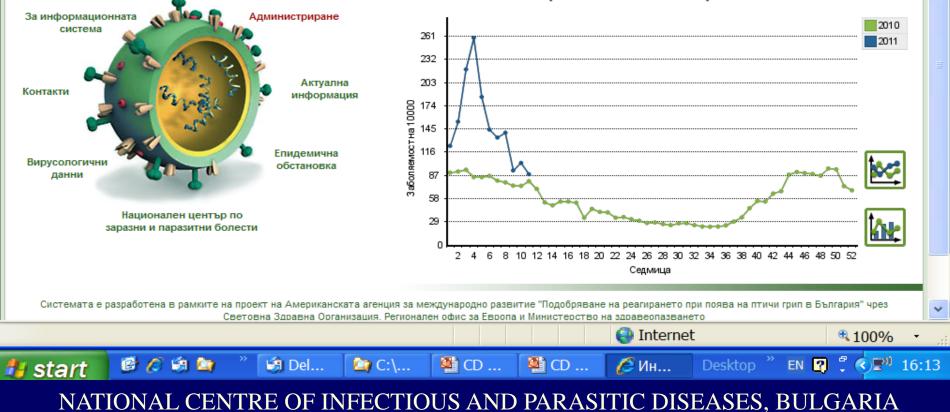
Responsibilities	Data analysis and interpretation Exchange of surveillance data Investigation of large-scale outbreaks and epidemics Feedback
Timing	Weekly, Annually
Means of communication	Annual CD Report presented on the National epidemiology meeting http://www.ncipd.org/; http://grippe.ncipd.org/ http://www.mh.government.bg/ NCIPD Bulletin, Press Conferences, Press Release (MoH)
Institute receiving reports	RHI, Media: TV, Radio, Newspapers

## FLOW OF INFORMATION FOR CD SURVEILLANCE IN BULGARIA









#### Заболяемост от грип и ОРЗ в България

