

Notifiable Infectious Diseases Reports

Reported Cases and Deaths of National Notifiable Infectious Diseases — China, October, 2021

Diseases	Cases	Deaths
Plague	0	0
Cholera	2	0
SARS-CoV	0	0
Acquired immune deficiency syndrome*	5,357	1,849
Hepatitis	118,664	43
Hepatitis A	940	0
Hepatitis B	95,942	33
Hepatitis C	19,157	10
Hepatitis D	24	0
Hepatitis E	1,846	0
Other hepatitis	755	0
Poliomyelitis	0	0
Human infection with H5N1 virus	0	0
Measles	88	0
Epidemic hemorrhagic fever	678	5
Rabies	19	10
Japanese encephalitis	39	1
Dengue	6	0
Anthrax	38	0
Dysentery	3,745	0
Tuberculosis	61,391	126
Typhoid fever and paratyphoid fever	655	1
Meningococcal meningitis	7	0
Pertussis	825	0
Diphtheria	0	0
Neonatal tetanus	3	0
Scarlet fever	1,634	0
Brucellosis	3,622	0
Gonorrhea	10,720	1
Syphilis	40,900	2
Leptospirosis	81	1
Schistosomiasis	6	0
Malaria	46	0
Human infection with H7N9 virus	0	0
COVID-19†	1,081	0
Influenza	53,346	1
Mumps	11,116	0

Continued

Diseases	Cases	Deaths
Rubella	101	0
Acute hemorrhagic conjunctivitis	1,994	0
Leprosy	21	0
Typhus	190	0
Kala azar	11	0
Echinococcosis	207	0
Filariasis	0	0
Infectious diarrhea [§]	74,343	0
Hand, foot and mouth disease	132,070	0
Total	523,006	2,040

* The number of deaths of Acquired immune deficiency syndrome is the number of all-cause deaths reported in the month by cumulative reported AIDS patients.

† The data were from the website of the National Health Commission of the People's Republic of China.

§ Infectious diarrhea excludes cholera, dysentery, typhoid fever and paratyphoid fever.

The number of cases and cause-specific deaths refer to data recorded in National Notifiable Disease Reporting System in China, which includes both clinically-diagnosed cases and laboratory-confirmed cases. Only reported cases of the 31 provincial-level administrative divisions in the mainland of China are included in the table, whereas data of Hong Kong Special Administrative Region, Macau Special Administrative Region, and Taiwan are not included. Monthly statistics are calculated without annual verification, which were usually conducted in February of the next year for de-duplication and verification of reported cases in annual statistics. Therefore, 12-month cases could not be added together directly to calculate the cumulative cases because the individual information might be verified via National Notifiable Disease Reporting System according to information verification or field investigations by local CDCs.

doi: [10.46234/ccdcw2021.257](https://doi.org/10.46234/ccdcw2021.257)