

Notifiable Infectious Diseases Reports

Reported Cases and Deaths of National Notifiable Infectious Diseases — China, August 2022

Diseases	Cases	Deaths
Plague	0	0
Cholera	6	0
SARS-CoV	0	0
Acquired immune deficiency syndrome [*]	4,679	2,106
Hepatitis	141,324	74
Hepatitis A	1,116	1
Hepatitis B	115,375	26
Hepatitis C	21,891	45
Hepatitis D	30	0
Hepatitis E	2,255	2
Other hepatitis	657	0
Poliomyelitis	0	0
Human infection with H5N1 virus	0	0
Measles	112	0
Epidemic hemorrhagic fever	235	1
Rabies	20	11
Japanese encephalitis	57	0
Dengue	1	0
Anthrax	73	2
Dysentery	4,505	0
Tuberculosis	69,019	365
Typhoid fever and paratyphoid fever	730	0
Meningococcal meningitis	2	0
Pertussis	5,355	0
Diphtheria	0	0
Neonatal tetanus	2	1
Scarlet fever	940	0
Brucellosis	7,887	1
Gonorrhea	9,275	0
Syphilis	50,482	4
Leptospirosis	48	0
Schistosomiasis	4	0
Malaria	217	0
Human infection with H7N9 virus	0	0
COVID-19 [†]	13,855	0
Influenza	183,345	3
Mumps	8,472	0

Continued

Diseases	Cases	Deaths
Rubella	128	0
Acute hemorrhagic conjunctivitis	2,267	0
Leprosy	32	0
Typhus	205	0
Kala azar	22	0
Echinococcosis	267	0
Filariasis	0	0
Infectious diarrhea [§]	100,107	0
Hand, foot and mouth disease	54,528	0
Total	658,201	2,568

* The number of deaths of acquired immune deficiency syndrome (AIDS) 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, China 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/ccdcw2022.183](https://doi.org/10.46234/ccdcw2022.183)