



DIRECTORATE GENERAL HEALTH SERVICES PUNJAB-LAHORE



24-Cooper Road, Lahore
Ph. 042 -99200990; email: hmis.pb@yahoo.com



DHIS2 Weekly Bulletin Week 37 (Sep 09 ~ Sep 15), 2024



It is a matter of great pleasure for me to write this message. The importance of data planning and implementation is immense. DHIS is a decision support system that will help managers at all levels to make evidence based decisions. It will help in planning & development, strategy management, Budgeting and forecasting about future needs. The MIS team is praiseworthy to implement the system in the whole province and bring reporting regularity to more than 97%.

The performances of the district management teams and health facilities of the province are available for scrutiny and evaluation on DHIS. The issues of data validity and data accuracy needs more efforts and hard working. The doctors and paramedics should pay heed to the plight of data quality and accuracy, so that correct and valid figures may be made available for the decision makers.

Dr. Muhammad Ilyas Gondal
Director General Services Punjab



The weekly Bulletin would have not been possible without support, guidance, and expertise of Dr. Muhammad Ilyas Gondal, Director General Health Services Punjab. The regular reviews, discussion, and modification of methodological framework used to ensure that the Weekly Bulletin meets the most rigorous statistical standards and accurately reflects the status of our Provincial health system.

On behalf of MIS team, Dr. Khalid Mehmood (Director MIS), Dr. Muhammad Mohsan Wattoo (ADHS-MIS) Mr. Farooq Ahmed (CPO MIS) and Miss Rukhsana Fawad (Data Analyst) thank to the focal persons of Districts and public health professionals who worked to improve our provincial health information system with their tireless efforts and collaboration and deserve deepest appreciation for continuing efforts, to be better orientation to address the public health challenges of today and tomorrow.

Dr. Khalid Mehmood
Director Health Services (P&D and MIS)

Key Findings: Health Indicators Analysis:

In the thirty-seventh week of 2024, a meticulous analysis of our data report provided critical insights. Utilizing a combination of charts and graphs, this analysis shed light on notable patterns and essential metrics. Across all 36 districts, the adherence to reporting for Week 37 stood at an impressive 91%, though it marked a slight decrease compared to the previous week.

The cumulative Outpatient Department (OPD) visits for this period totaled 2,388,577, representing a 2% decline compared to the preceding week's 2,437,350 visits in Week 36. Notably, 96% of these visits comprised new OPD cases, highlighting a sustained influx of patients seeking initial consultations despite the decrease.

Regarding disease documentation in DHIS-2 during Week 37, a comprehensive array of 68 diseases were meticulously recorded, encapsulating 55% of total patient cases. Among these conditions, communicable diseases constituted 55%, showcasing a slight increase from the previous week, while non-communicable ailments comprised the remaining 45%. Visual aids such as graphs and charts were employed to illustrate the prevalence of the top 10 communicable and non-communicable diseases.

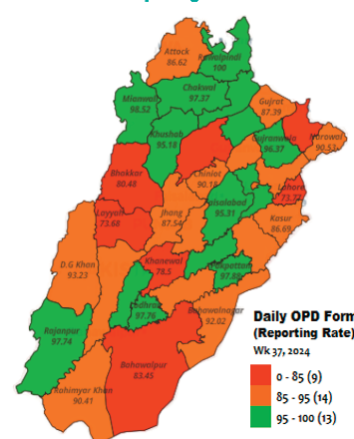
Indoor admissions during this week amounted to 134,024, with 54% of admissions attributed to specific illnesses. A total of 23,224 surgeries were performed, utilizing various types of anesthesia.

In the realm of Maternal and Child Health, Week 37 witnessed a notable surge in Antenatal Care (ANC) visits, with a total of 221,549 visits recorded. Out of 75,773 women attending ANC, 17% reported hemoglobin levels below 10g/dl during ANC-1. Out of 25,524 deliveries, the majority (78%) were normal, while (21%) were C-sections, reflecting a consistent trend observed in recent weeks. Noteworthy complications during childbirth were visualized through a comprehensive bar graph. Among the 25,641 live births, 2% exhibited low birth weight (<2.5 kg), while 0.5% were premature births, and 3% encountered complications leading to infant mortality.

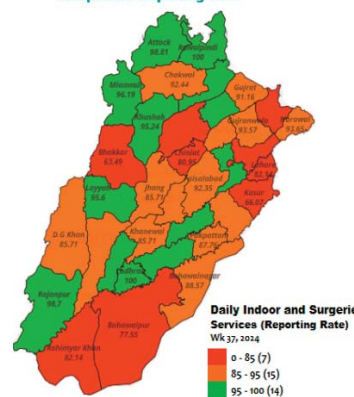
Additionally, 49,106 Family Planning (FP) visits were recorded during Week 37, with a significant 75% of these visits taking place in Basic Health Units (BHUs).

Overall, the indicators for Week 37 showed a downward shift, with declines observed across reporting compliance, OPD visits, ANC consultations, family planning services, and deliveries. This week's data highlights areas of concern in the current healthcare landscape and underscores the need for strategic interventions to address these declines and improve public health outcomes moving forward.

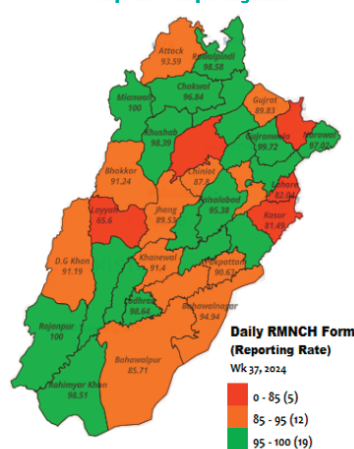
Punjab Map - OPD Compliance Reporting Rate



Punjab Map - IPD Compliance Reporting Rate

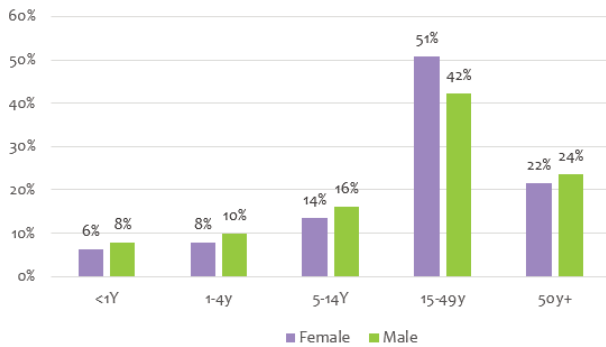


Punjab Map - RMNCH Compliance Reporting Rate

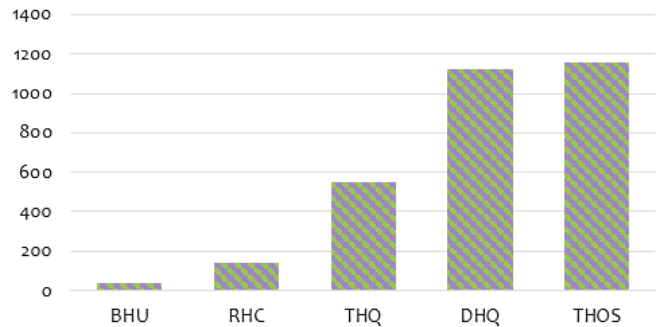


DHIS2 Weekly Bulletin Week 37 (Sep 09 ~ Sep 15), 2024

Distribution of OPD Visits by Age and Gender, Week 37, 2024



Average OPD perday Visits during week 37, 2024



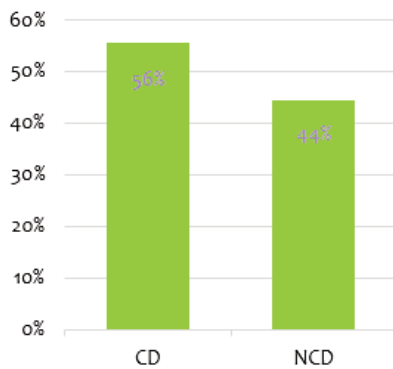
Age and Gender Wise Analysis:

Total OPD 2,388,577 visits were recorded in this week there were more females (55%) visits than that of males (45%). The majority of patients in this context fell within the age range of 15 to 49 years old.

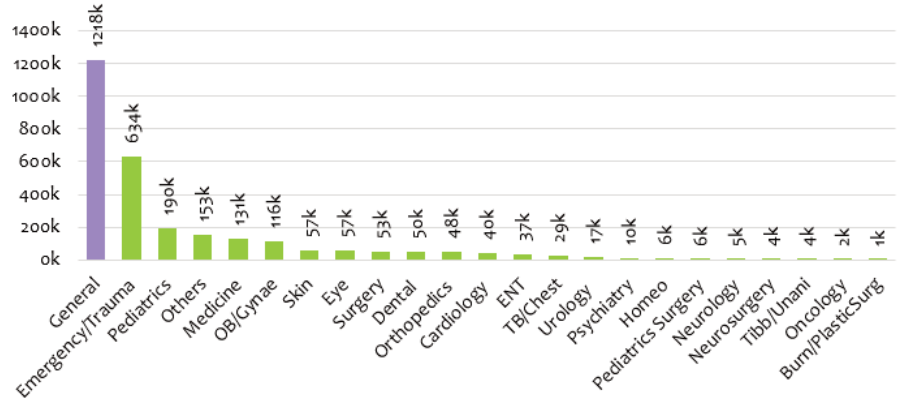
Average OPD per day visits:

In the assessment for week 37, the analysis showcased that, according to the bar chart, THOS facilities stood out with the highest daily average of 1,156 OPD visits among various facility type.

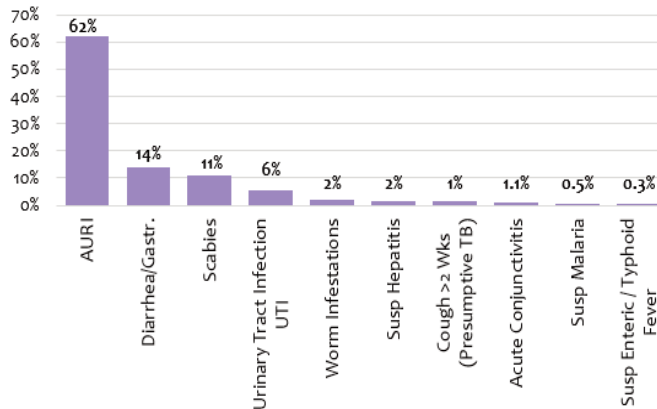
Classification of Patients by Disease Transmission: (CD vs NCD) Week 37, 2024



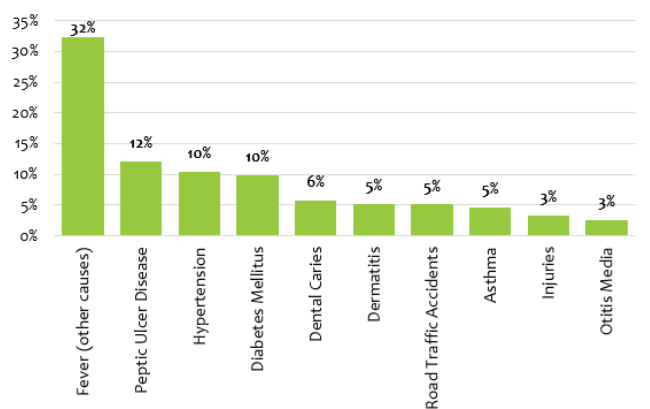
Speciality wise OPD new cases during week 37, 2024



Week 37, 2024: Leading Communicable Diseases



Week 37, 2024: Leading Non-Communicable Diseases

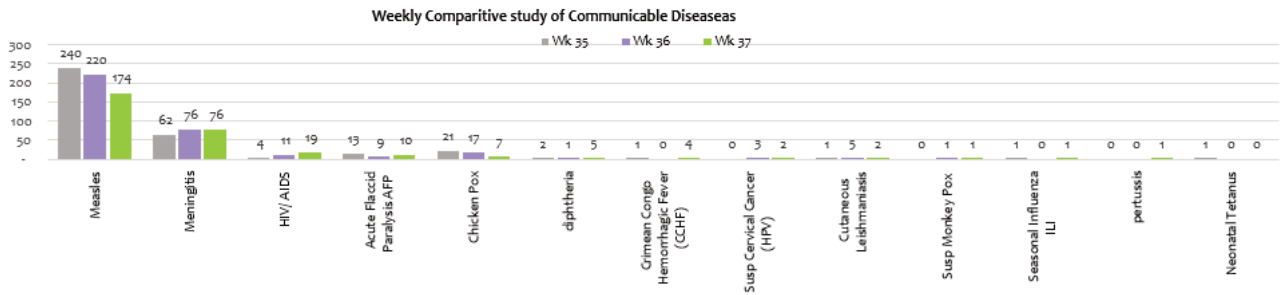
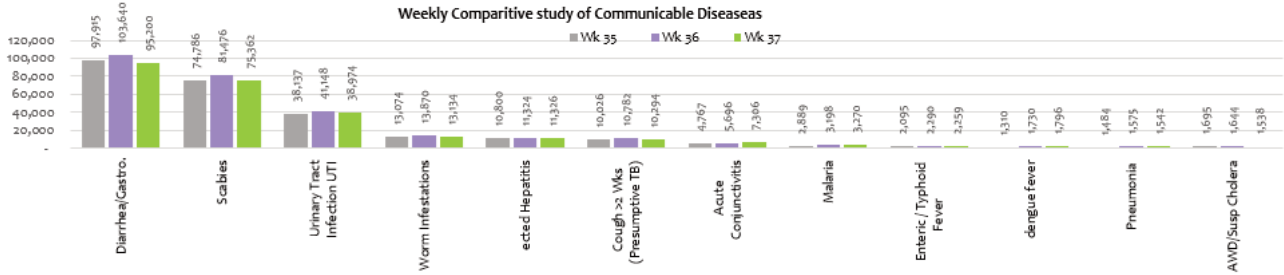


Communicable and Non-Communicable Diseases:

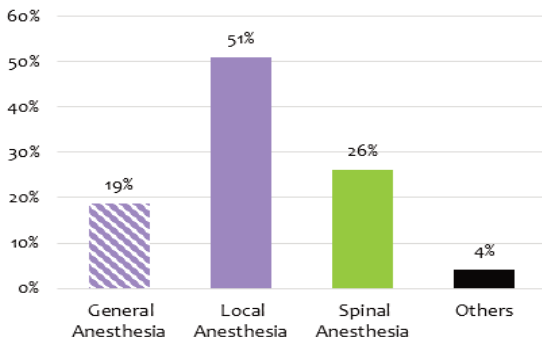
In Week 37 of 2024 in Punjab, there was a notable incidence of major communicable diseases. Acute Upper Respiratory Infections (AURI) accounted for a significant 62% of cases, indicating a concerning trend. Following closely behind were cases of Diarrhea/Gastroenteritis and Scabies, each making up 14% and 11% of the total, respectively. Conversely, among Non-Com-

municable Diseases, the major issue was Fever of unknown origin, comprising 32% of cases. This was followed by incidents of Peptic Ulcer and Hypertension, both contributing 12% and 10% to the total caseload, respectively. These insights were gathered from patients seeking medical attention in outpatient departments for both communicable and non-communicable diseases during this period.

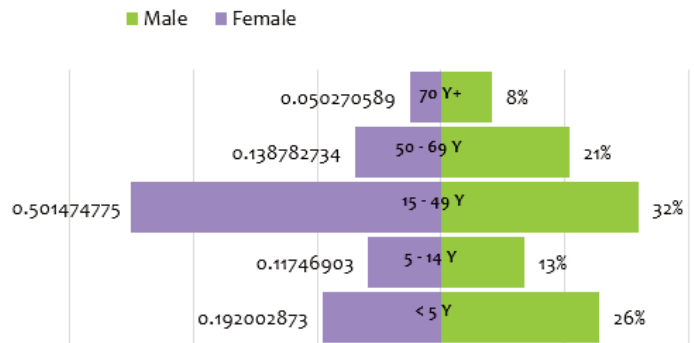
DHIS2 Weekly Bulletin Week 37 (Sep 09 ~ Sep 15), 2024



Surgeries Categorized by Anesthesia Type: Week 37, 2024

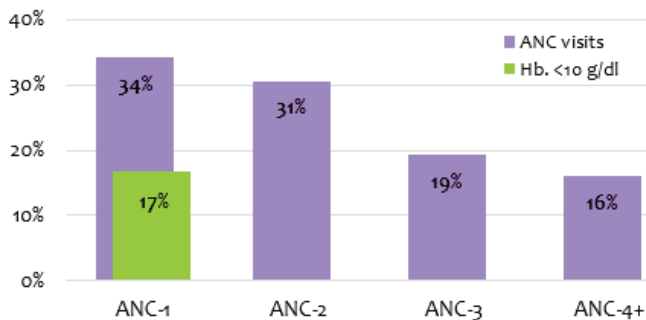


Age and Gender wise Indoor Admission week 37, 2024

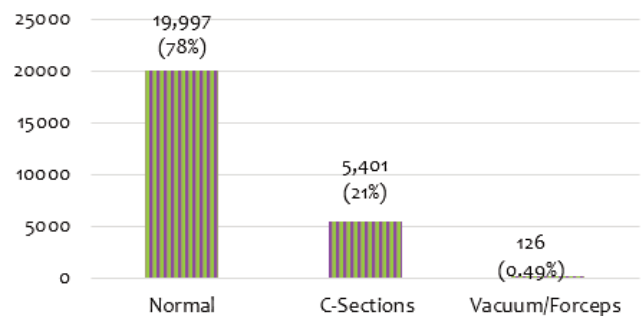


MNCH Services

ANC Observations - Week 37, 2024



Distribution of Delivery Modes in week 37, 2024



ANC Detail:

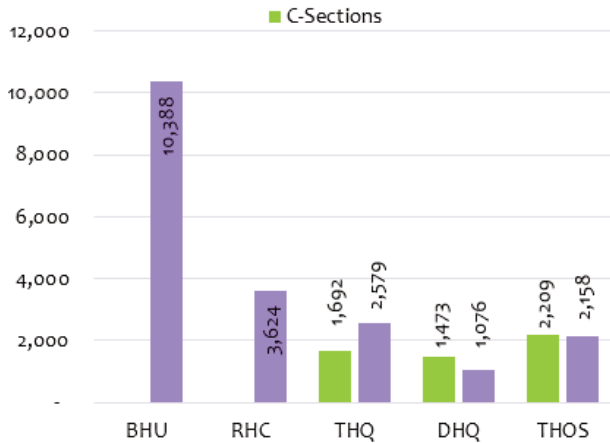
Among the total 221,549 ANC visits in this week, ANC-1 constituted 34% (75,773) with 17% (12,734) showing Hb<10g/dl, while ANC-2, ANC-3, and ANC-4 comprised 31% (67,714), 19% (42,612), and 16% (35,450) respectively.

Delivery Modes:

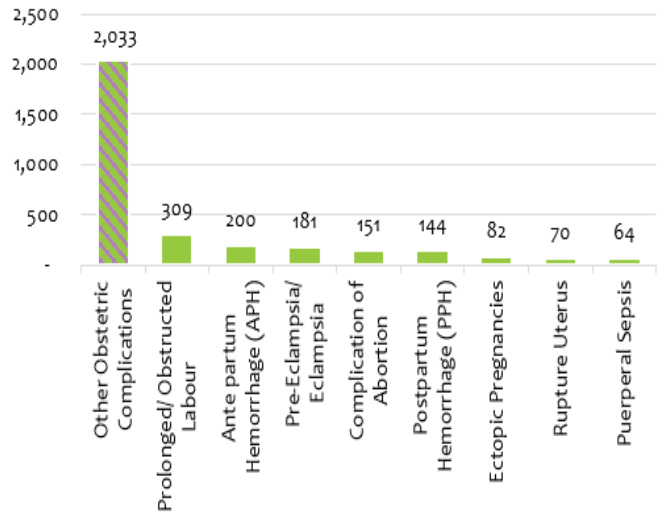
During the current week in Punjab, a total of 25,524 deliveries were recorded. Of these, 78% (19,997) were normal deliveries, 21% (5,401) were C-sections, and a very small proportion 0.49% (126) involved vacuum/forceps.

DHIS2 Weekly Bulletin Week 37 (Sep 09 ~ Sep 15), 2024

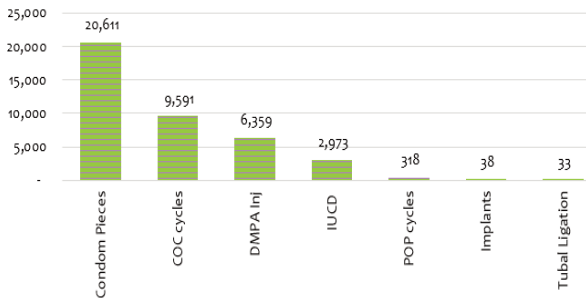
Deliveries conducted by Health Facility type-wise week 37, 2024



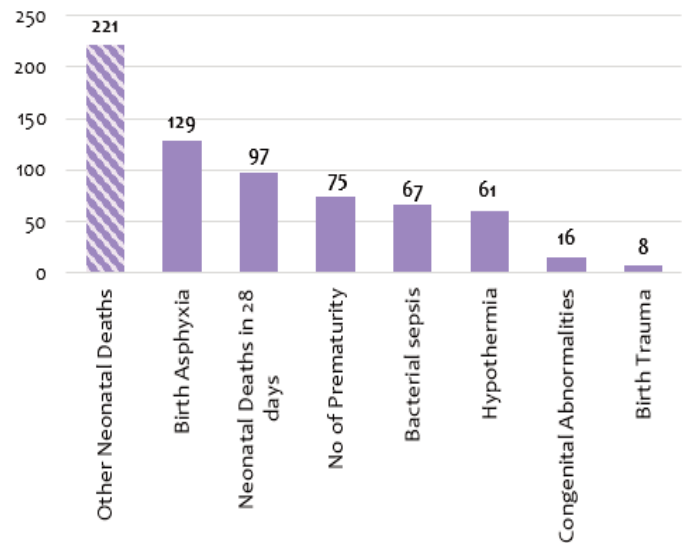
Maternal Complications in Obstetrics: Inpatient Admissions, Week 37, 2023



Method wise Family Planning Clients Visits week 37, 2024



Neonatal Deaths with Complications week 37, 2024



Family Planning:

In the 37th week of 2024, there were 49,106 family planning visits. Of these, 2% (965) were by women under 25, and 66% (32,608) were new clients. Counseling visits accounted for 19% (9,275), with 84% being new clients and 16% returning. Referrals by LHWs made up 7% (3,623), postpartum visits 5% (2,422), and post-abortion visits 1% (482).

Regarding the methods used during family planning visits, condoms were the most common 52% (20,611), followed by COC cycles 24% (9,591). Less popular methods included POP cycles, tubal ligation, and implants.

Kangaroo Mother Care (KMC) Newborn Indicators , week 37, 2024

| Sr | Babies Initiated with KMC Services | Total | Sr | Information on KMC Outcome | Total | Sr | Information on KMC Follow-up | Total |
|----|---|-------|----|---|-------|----|--------------------------------------|-------|
| 1 | No. of Babies Initiated with KMC Services | 55 | 1 | No. of Babies received KMC & discharge as per protocol | 32 | 1 | No. of Babies received 1st follow-up | 39 |
| 2 | No. of Babies born in Facility initiated KMC Services | 66 | 2 | No. of Babies received KMC & discharge on request | 39 | 2 | No. of Babies received 2nd follow-up | 37 |
| 3 | No. of Babies born outside the Facility received KMC Services | 40 | 3 | No. of Babies initiated KMC & referred / discontinued due to complication | 21 | 3 | No. of Babies received 3rd follow-up | 21 |
| | | | 4 | No. of Babies die during KMC | 21 | 4 | No. of Babies received 4th follow-up | 19 |

* Note: This Section is Only for DHQ's where KMC Project is implemented

Kangaroo Mother Care (KMC):

We've also tabulated data regarding Kangaroo Mother Care (KMC) for newborns to monitor its implementation and impact.