



DIRECTORATE GENERAL HEALTH SERVICES PUNJAB LAHORE



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DHIS-2 Weekly Bulletin Week 43 October (21~27) 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 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:

During the 43rd week of 2024, a comprehensive data analysis was conducted, revealing significant trends and key insights through detailed tables and graphs. Across all 36 districts, the reporting compliance for Week 43 was commendable at 88%. The total number of OPD (Outpatient Department) visits during this week reached 2,339,437, marking 1% increase from the previous week, Week 42, which recorded 2,316,684 visits. Notably, new OPD patients constituted 96% of the visits, with follow-up visits accounting for the remaining 4%.

In terms of facility types, the average daily OPD visits were notably higher in THOS, with 1,406 visits per day. The highest number of OPD visits were reported in District Lahore which led with 273,533 visits, closely followed by Faisalabad (190,241) and Multan (118,589) in terms of patient footfall.

In the analysis of OPD visits during Week 43, there was a slight shift in gender distribution, with females representing 55% of visits and males 45%. Interestingly, the age distribution remained consistent, with the majority of visits coming from individuals aged between 15 and 49 years old.

This week, DHIS-2 documented a total of 68 diseases, encompassing 52% of all patient cases. Among the reported illnesses, communicable diseases constituted 54%, showcasing a slight increase, whereas non-communicable diseases accounted for 46%.

Regarding healthcare procedures, this week saw a total of 110,177 indoor admissions recorded, with 60% of patients admitted due to specific diseases. 22,407 Surgeries conducted with anesthesia saw a varied distribution: General Anesthesia (GA) was used in 19% (4,152), Local Anesthesia (LA) in 51% (11,322), Spinal Anesthesia in 27% (5,983), and alternative anesthesia methods in 4% (950).

Within the maternal health domain, ANC visits totaled 189,669 in Punjab for Week 43, with ANC-1 (n= 63,021) reporting 17% (10,734) with Hb<10g/dl. Deliveries numbered 22,382, comprising 77.2% Normal deliveries, 22% C-Section, and 0.34% Vacuum/Forceps. Among the live births (22,547), 2% (346) babies were born with LBW <2.5 kg, and 0.4% (96) were Premature Births. Tragically, 2% (546) of the babies faced specific complications and did not survive. We've also tabulated data regarding Kangaroo Mother Care (KMC) for newborns to monitor its implementation and impact.

Family Planning (FP) visits tallied 44,407 this week. The largest share, comprising 74% of the total visits, took place in BHUs. The week-wise comparison is shown in the chart. District Chakwal Faisalabad and Rahim Yar Khan maintained their leading positions with 3,399, 3,101, and 2,998 FP visits, respectively, demonstrating consistent engagement.

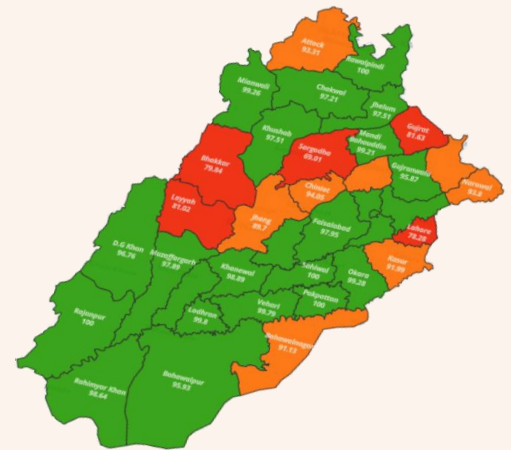
In Week 43, several key indicators showed a downward trend compared to the previous week. There was a decrease in antenatal care (ANC-1) visits, deliveries and family planning visits. These downward trends highlight challenges in healthcare services that need to be addressed. The data from this week emphasizes the need for continued efforts and innovations to improve public health outcomes in the future.

Diseases on high alert in Punjab during the week-43, 2024

Dengue	Pneumonia (SARI)
Diphtheria	Scabies
Meningitis	Seasonal Influenza
MERS-COV	Neonatal tetanus

Reporting Rate (OPD, IPD & RMNCH)

Punjab Map - OPD Compliance Reporting Rate



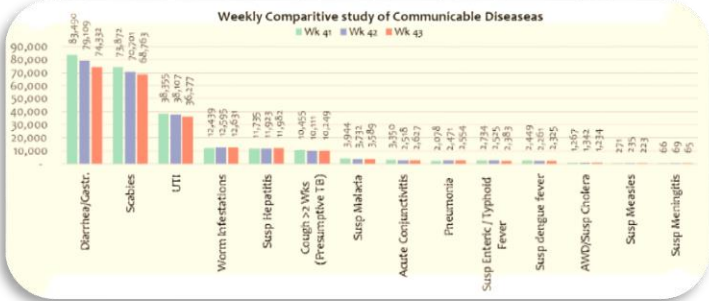
Punjab Map - IPD Compliance Reporting Rate



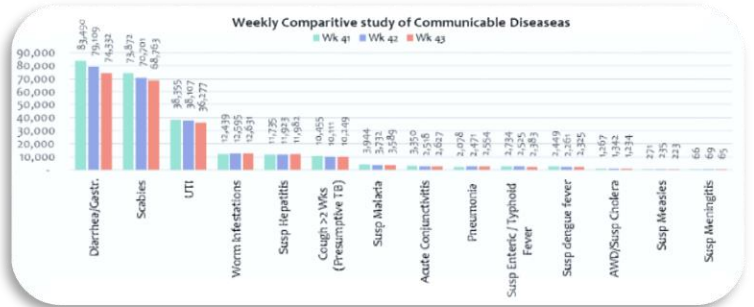
Punjab Map - RMNCH Compliance Reporting Rate



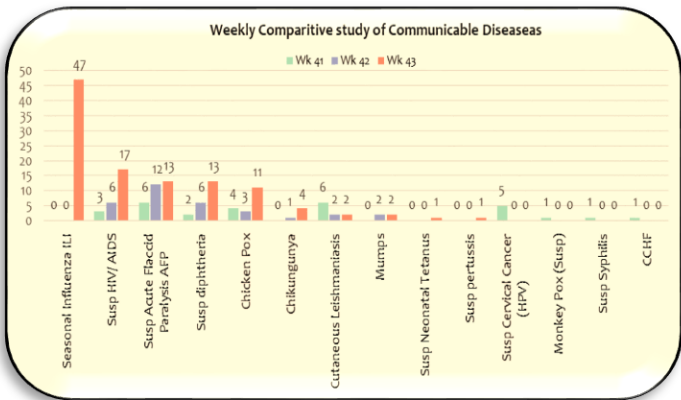
Week wise Comparison of Communicable Diseases:



Week wise Comparison of Communicable Diseases:



Tabulation of Suspected OPD



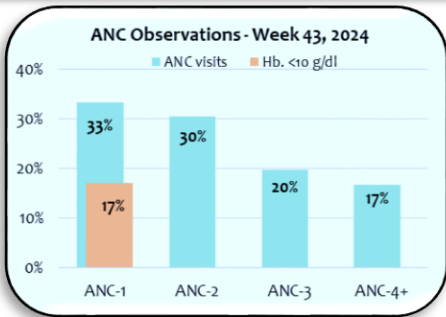
Suspected INDOOR diseases

DISEASE WISE INDOOR ADMISSION WEEK 43 OF YEAR 2024			
Sr.	Medicine	Vaccine Preventable diseases/hepatitis	Neurological/Neurosurgical
1	Diarrhea	9,623	45
2	Pneumonia	1,419	24
3	Bloody Diarrhea/Dysentery	107	23
4	Acute Watery Diarrhea / Cholera	336	16
5	Asthma	1,368	27
6	Chronic Obstructive Airways	634	28
7	Pulmonary Tuberculosis	464	29
8	Extra Pulmonary Tuberculosis	136	16
9	Sus Enteric / Typhoid Fever	1,639	30
10	Diabetes Mellitus	5,904	31
11	Chronic Liver Disease	1,482	32
12	Chronic Renal Disease	3,485	33
13	Fibroid Uterus	166	33
14	Inflam. Diseases of Female Pelvic Organs (PID)	351	35
15	Uterine Prolapse	31	37
16	Vesico-Vaginal Fistula	16	38
17	Acu Appendicitis	569	39
18	Burns	301	40
19	Cholelithiasis / Cholecystitis	452	41
20	Hernias	394	41
21	Hypertrophy of Prostate	23	42
22	Urolithiasis	51	43
23	Arthropathies	1,273	39
24	Fractures	1,273	40
25	Cataract	504	41
26	Chronic Renal Disease	3,485	42
27	Glaucoma	20	43
28	Allergic Conjunctivitis	6	44
29	Neonatal Tetanus	102	45
30	Acu flaccid Paralysis (AFP)	12	46
31	Measles	128	47
32	Malaria	130	47
33	Viral Hepatitis A	67	48
34	Viral Hepatitis B	6	49
35	Viral Hepatitis C	46	49
36	Postpartum Hemorrhage (PPH)	136	50
37	Pre-Eclampsia/Eclampsia	163	51
38	Prolonged/Obstructed Labour	219	52
39	Puerperal Sepsis	103	53
40	Rupture Uterus	65	54
41	Other Obstetric Complications	2,490	55
42	Arthropathies	1,273	39
43	Fractures	1,273	40
44	Cataract	504	41
45	Chronic Renal Disease	3,485	42
46	Glaucoma	20	43
47	Allergic Conjunctivitis	6	44
48	CVA Stroke	269	49
49	Head injury	191	50
50	Diphtheria	12	51
51	Peritussis	1	52
52	Meningitis	88	53
53	Rabies	20	54
54	Probable Monkey Pox	1	55
55	Confirmed Monkey Pox	1	56
56	Congestive Cardiac Failure (CCF)	820	57
57	Hypertension	2,828	58
58	Ischemic Heart Disease (IHD)	2,821	59
59	Valvular Heart Dis	234	60
60	Breast Cancer	31	61
61	Prostate Cancer	2	62
62	Psychiatric Diseases	96	63
63	Drug Abuse	79	64
64	Psychiatric Disorder	79	65
65	Other Diseases	79	66

RMNCH Detail:

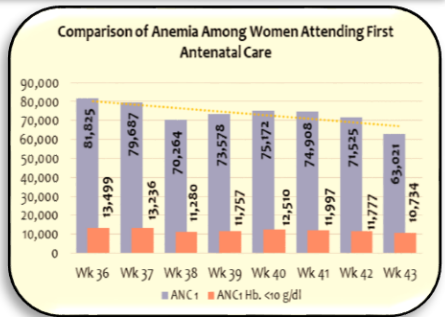
ANC Detail:

Total ANC 189,669 visits were conducted during this week, out of which 33% (63,021) were ANC-1 visits with 17% (10,734) of Hb<10g/dl, ANC-2 30% (57,782), ANC-3 20% (37,270) and ANC-4 17% (31,596).



Weekly Comparative Analysis of Anemia in ANC-1 Women coming for Antenatal care:

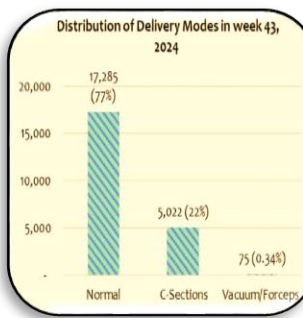
The trend analysis of ANC-1 visits indicates a noticeable decrease compared to previous weeks. Week 36 stood out with the highest recorded ANC-1 visits. However, in the current Week 43, there has been a clear 12% decline in ANC-1 visits as compared to the week 42.



Delivery Modes:

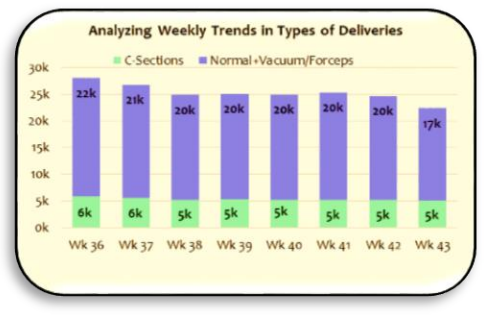
During the current week in Punjab, a total of 22,382 deliveries were recorded. Of these, 77.2% (17,285) were normal deliveries, 22% (5,022) were C-sections, and a very small proportion 0.34% (75) involved vacuum/forceps.

The highest number of normal deliveries occurred in District Lahore (n= 1,207), Rahimyarkhan (n= 1,104) and Faisalabad (n= 983). Meanwhile, C-sections were primarily performed in Lahore (n= 1,200), Bahawalpur (357) and Rawalpindi (n= 315). However, vacuum/forceps-assisted deliveries were notably fewer, with Districts Mianwali reporting 38 cases.



Analyzing Weekly Trends in Deliveries:

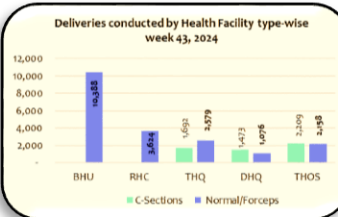
Weekly Delivery Trends Analysis: The bar chart illustrates the week-by-week comparison of delivery methods. Week 36 has the highest number of deliveries across all weeks, while Week 43 records the lowest, showing a 9% decrease from the previous week.



Deliveries conducted in health facilities

Type wise:

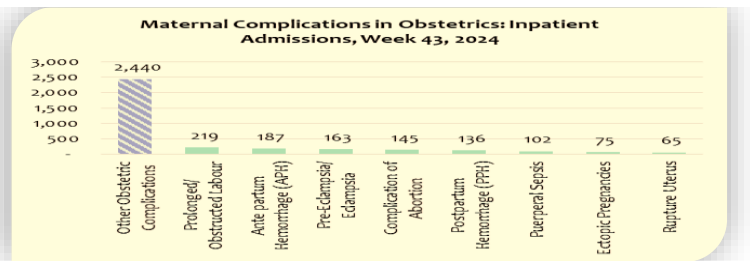
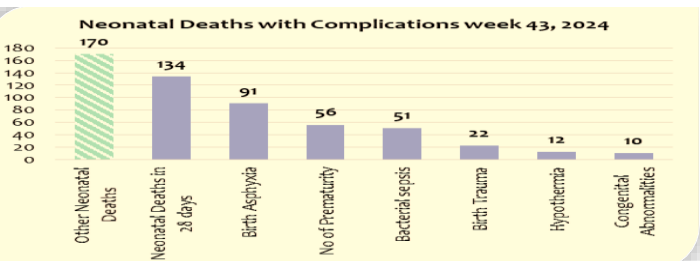
According to HF types, BHU accounted for 46% (10,388) of normal/forceps deliveries, while THOS handled 10% (2,209) of C-sections. It's important to note that these percentages are based on deliveries within healthcare facilities.



Maternal and Neonatal Deaths

Total Live Births	Premature Births	Live Births LBW <2.5kg	Intra Uterine Death (IUD)	Still Births	Neonatal Deaths by (Complications)	Maternal Deaths
22547	96	346	276	43	546	10

Throughout this week, there were 10 reported cases of maternal deaths only one mother died due to Puerperal Sepsis. Additionally, complications led to 546 neonatal deaths, which is 2% of the total 22,547 live births.



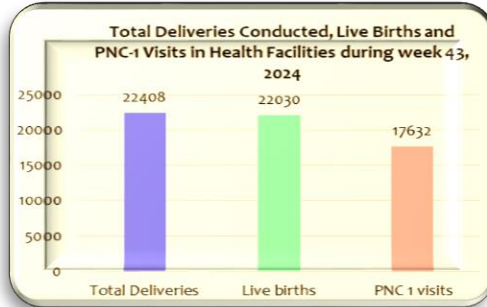
Kangaroo Mother Care (KMC) Newborn Indicators:

Kangaroo Mother Care (KMC) Newborn Indicators , week 43, 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	51	1	No. of Babies received KMC & discharge as per protocol	26	1	No. of Babies received 1st follow-up	33
2	No. of Babies born in Facility initiated KMC Services	59	2	No. of Babies received KMC & discharge on request	22	2	No. of Babies received 2nd follow-up	19
3	No. of Babies born outside the Facility received KMC Services	39	3	No. of Babies initiated KMC & referred / discontinued due to complication	11	3	No. of Babies received 3rd follow-up	10
			4	No. of Babies die during KMC	9	4	No. of Babies received 4th follow-up	9

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

Total Deliveries Conducted, Live Births and PNC-1 Visits in Health Facilities:

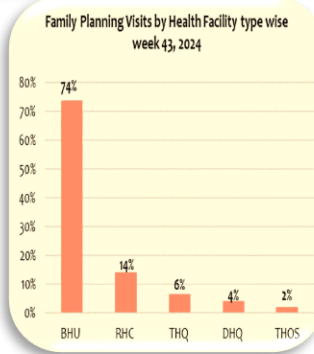


Family Planning:



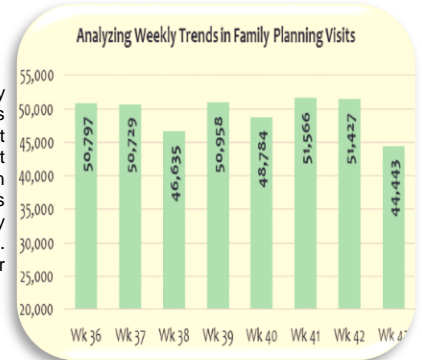
In the 43rd week of 2024, there were 44,407 family planning visits. Of these, 2% (987) were by women under 25, and 66% (29,334) were new clients. Counseling visits accounted for 21% (9,158), with 87% being new clients and 13% returning. Referrals by LHWs made up 8% (3,413), postpartum visits 6% (2,465), and post-abortion visits 1% (401).

Regarding the methods used during family planning visits, condoms were the most common 51% (17,986), followed by COC cycles 25% (8,734). Less popular methods included POP cycles (1%), implants (0.11%) and tubal ligation (0.08%).



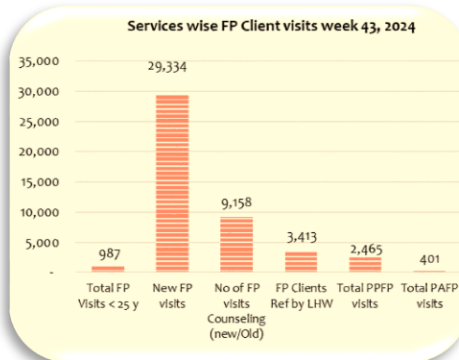
Week wise Family Planning Visits:

In Week 41, Family Planning (FP) visits reached their highest point at 51,566. The lowest recorded visits were in Week 43, where visits dropped by approximately 14% compared to Week 42. The graph provides a clear view of these fluctuations.



Family Planning by Health Facility type wise:

This graph illustrates the distribution of FP visits across different Health Facility types. The largest share, comprising 74% of the total visits, took place in BHUs, followed by RHCs at 14%, THQs at 6%, DHQs and THOS both at 4% and 2% respectively.



Maternal and Child Health Metrics Overview:

The bar graph illustrates key maternal and child health indicators. The data represents a comprehensive assessment of healthcare utilization and outcomes across various stages of the maternal and child health field.

