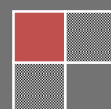


3rd Qtr
2018

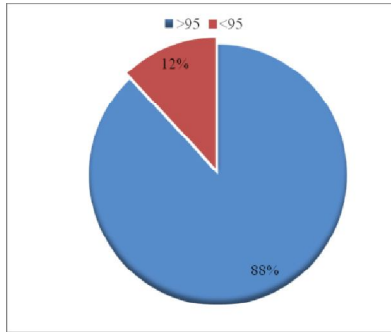
DHIS Khyber Pakhtunkhwa

District Health Information System 3rd
Quarter Report 2018



3rd Quarter Report 2018

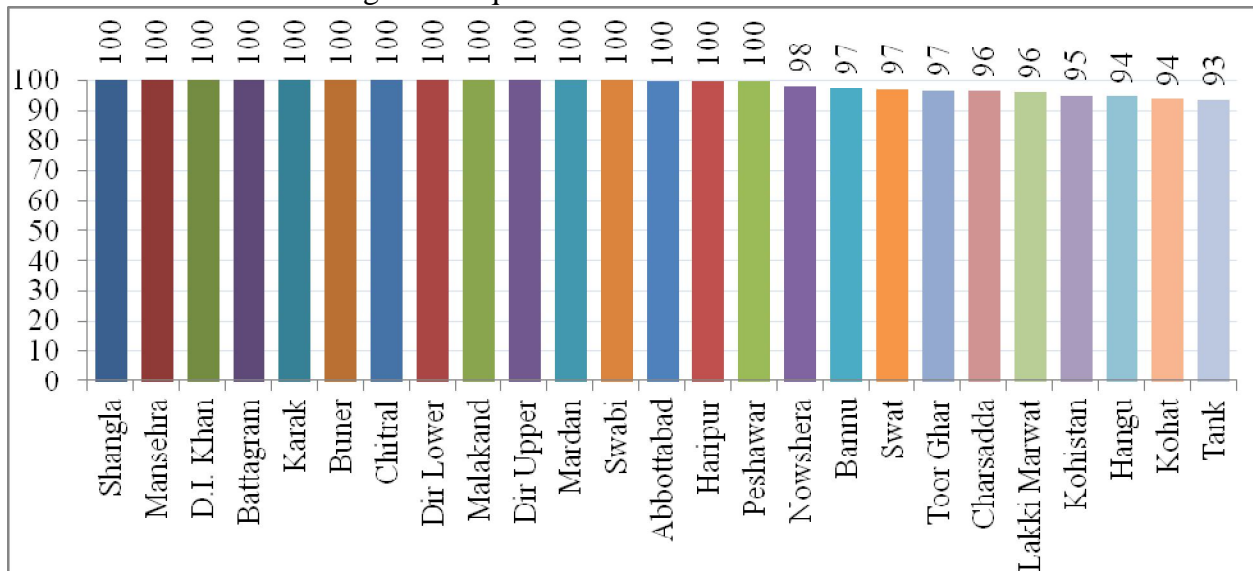
1. REPORTING COMPLIANCE



This indicator represents the percentage of public health facilities that have submitted monthly reports.

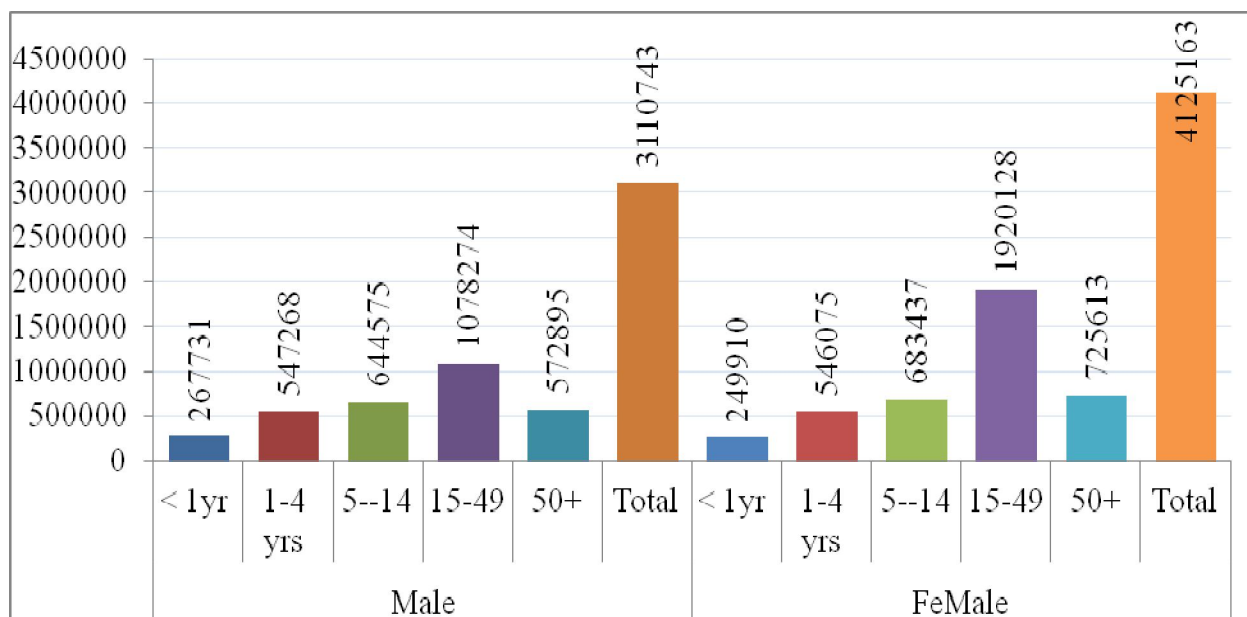
District Wise Percentage of Reporting Compliance.

Graph shows district-wise reporting compliance of all the districts of Khyber Pakhtunkhwa. Twenty four (24) districts (Shangla to Kohistan) among 25 districts achieved the target i.e reporting more than 95% facilities. Districts Hangu, Kohat and Tank reported 94%, 94% and 93% remained below the target in 3rd quarter 2018.



2. General OPD Attendance (Primary Health Care Facilities & Secondary Health Care Facilities)

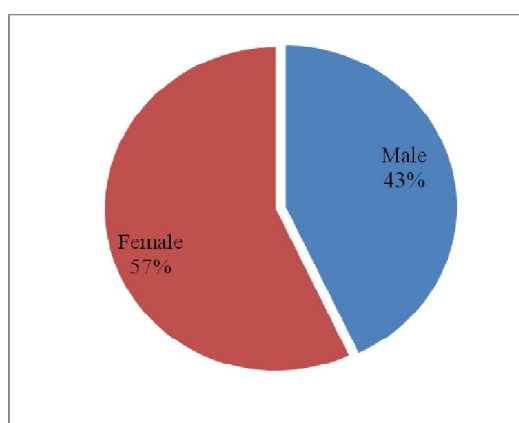
This is one of the key indicators to assess performance on the provision of health services in Province Khyber Pakhtunkhwa. It refers to the number of people attending and receiving services at health facilities during illness.



Graph shows the General OPD in primary and secondary care health facilities with gender wise breakup of male and female patients of the province.

Age wise breakup of patients visiting the OPDs is consistent in 3rd quarter 2018, the figures shows that in the case of male OPD attendance of age group from <1 to 14 years is **(1,459,574)**, which is **46.90%** of the total of male OPD **(3,110,743)**.

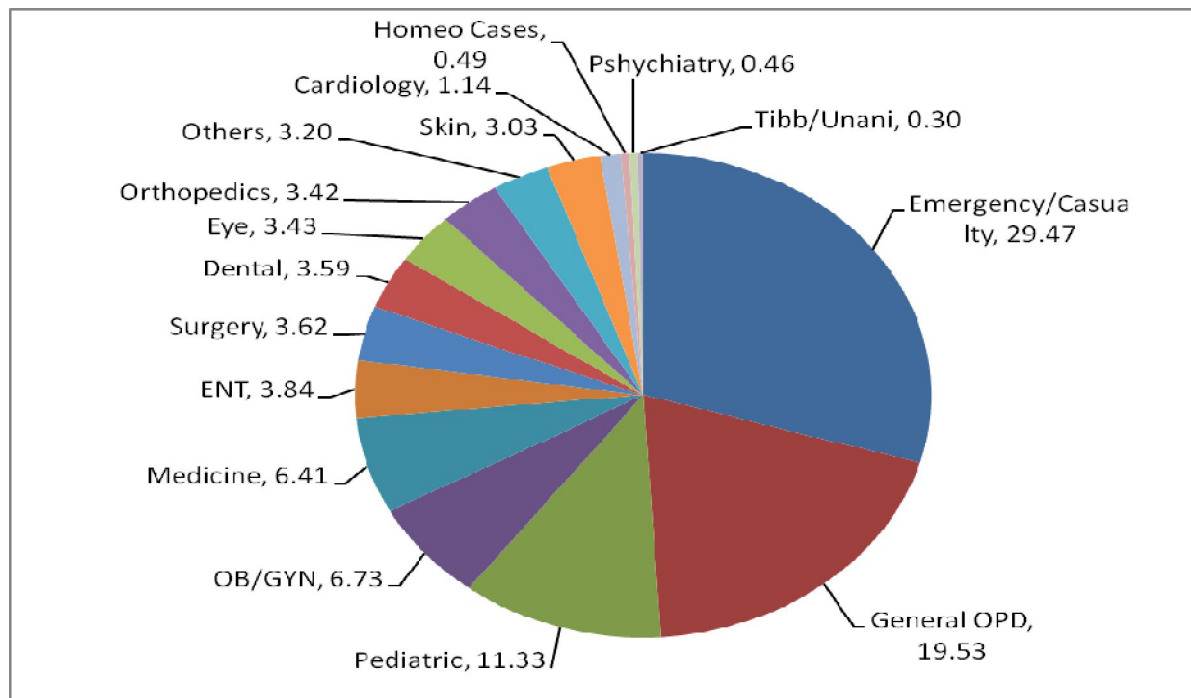
Similarly in case of female OPD attendance of age group from <1 to 14 is **(1,479,422)**, which is **43.14%** of the total female OPD attendance **(4,125,163)**.



In General OPD Attendance (Primary & Secondary Health Care Facilities) 57% female and 43% male patients visited.

3. Specialty Wise Break Up of Patients

The indicator gives us an idea about the distribution of patients to different specialties enabling the reader to broadly categorize and assess the flow of patients to different specialties available in the health facilities.



Graph of the indicator **OPD Attendance Specialty wise** shows the percentage of total new visits (Patients) of in the facility to different specialties (i.e General OPD, Medicine, Surgery, Pediatric etc).

Sr.#	Specialty	New Visits	%age
1	Emergency/Casualty	1348449	29.47
2	General OPD	893798	19.53
3	Pediatric	518452	11.33
4	OB/GYN	307833	6.73
5	Medicine	293344	6.41
6	ENT	175839	3.84
7	Surgery	165766	3.62
8	Dental	164223	3.59
9	Eye	157035	3.43
10	Orthopedics	156520	3.42
11	Others	146388	3.20
12	Skin	138649	3.03
13	Cardiology	52060	1.14
14	Homeo Cases	22546	0.49
15	Pshychiatry	20848	0.46
16	Tibb/Unani OPD Cases	13736	0.30

Under the specialty; emergency/casualty, the number and percentage of patients are on top and stands at **(1,348,449)** with **29.47%**, General OPD on second number and is **(893,798)** which is **19.53%**.

Number of patients in the specialty of Pediatric and OB/GYN are **518,452** and **307,833** which is **11.33%** and **6.73%**.

The disorder of Dental caries and the specialty Skin Diseases stands at **165,766** with **3.59%** and **138,649** with **3.03%**.

4. Diseases Pattern in Out Patient Department (of the total 43 priority diseases)

This indicator will help to understand which disease/cases were attended at the health facilities in a district.

The indicator can trigger a response in terms of additional resources allocation or redistribution of resources according to the disease pattern, or initiating specific preventive, promotive and or curative services at specific area/catchment population.

For the purpose of the DHIS 43 diseases have been selected as “Priority Diseases” in consultation the other stakeholders, the Government of Khyber Pakhtunkhwa has adopted these enlisted priority diseases in continuation to the national decision.

These diseases are listed in below table, which present the numbers of patients provided care at Primary and Secondary Level Health Facilities.

Total OPD 3rd Quartar (July To September 2018)			7,235,906
S.No	Disease	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	724562	10.01
2	Diarrhoea/Dysentery in under 5 yrs	351698	4.86
3	Diarrhoea/Dysentery in >5 yrs	297284	4.11
4	Fever due to other causes	274766	3.80
5	Urinary Tract Infections	252896	3.50
6	Hypertension	187432	2.59
7	Dental Caries	165354	2.29
8	Suspected Malaria	147491	2.04
9	Peptic Ulcer Diseases	130343	1.80
10	Diabetes Mellitus	109992	1.52
11	Worm infestation	99920	1.38
12	Scabies	96118	1.33
13	Dermatitis	76020	1.05
14	Road traffic accidents	71916	0.99
15	Depression	71143	0.98
16	Enteric / Typhoid Fever	70456	0.97
17	Otitis Media	63877	0.88
18	Asthma	63386	0.88
19	Pneumonia under 5 years	36152	0.50
20	Ischemic Heart Disease	31790	0.44
21	Pneumonia >5 years	27676	0.38
22	Fractures	27446	0.38
23	Suspected Viral Hepatitis	21722	0.30
24	TB Suspects	20504	0.28
25	Chronic Obstructive Pulmonary Diseases	20389	0.28
26	Cataract	19096	0.26
27	Dog bite	14387	0.20
28	Benign Enlargement of Prostrate	9019	0.12

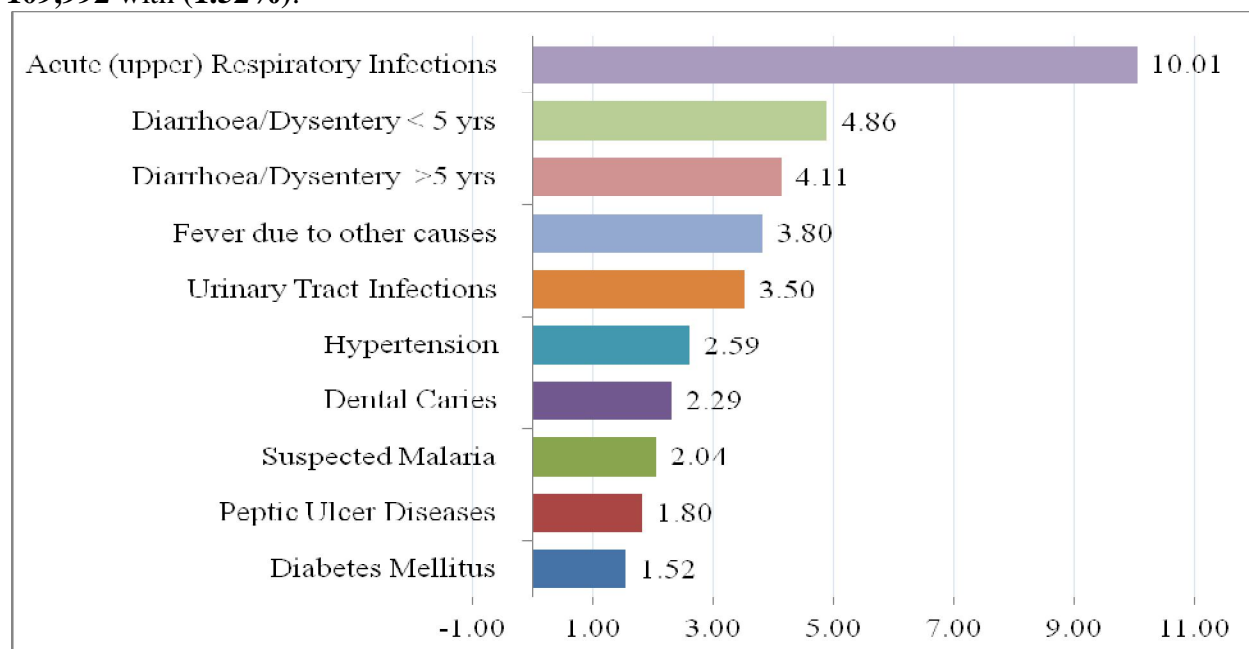
29	Trachoma	7392	0.10
30	Suspected Measles	6847	0.09
31	Drug Dependence	6517	0.09
32	Burns	5636	0.08
33	Epilepsy	5148	0.07
34	Cirrhosis of Liver	5034	0.07
35	Sexually Transmitted Infections	4455	0.06
36	Glaucoma	4385	0.06
37	Nephritis/Nephrosis	3557	0.05
38	Cutaneous Leishmaniasis	2113	0.03
39	Suspected Meningitis	1081	0.01
40	Snake bites (with signs/symptoms of poisoning)	683	0.01
41	Suspected Neonatal Tetanus	197	0.00
42	Acute Flaccid Paralysis	58	0.00
43	Suspected HIV/AIDS	0	0.00
Total		3,535,938	48.87

Top Ten Diseases (of the total 43 priority diseases) Khyber Pakhtunkhwa Province

Acute Respiratory Infections stands **724,562** which is **10.01%** of these patients. Diarrhoea/Dysentery under and over 5 years stands **351,998** with **4.86%** and **297,284** with **4.11%** of the total in 3rd quarter 2018. Fever due to other causes stands at **274,766 (3.80%)** patients.

Cases of Urinary Tract Infections and Hypertension disorders are **282,896** which are **3.50%** and **187432 (2.59%)** of the total patients. Dental Caries and Suspected Malaria are **165,354** with **2.29%** and **147,491** with **2.04%** in 3rd quarter 2018.

Peptic Ulcer and Diabetes Mellitus patients' in 3rd quarter 2018 stands **130,343** with **1.80%**. and **109,992** with **(1.52%)**.



5. COMMUNICABLE AND NON COMMUNICABLE DISEASE

Out of 43 priority diseases, 19 are communicable and 24 are non-communicable diseases. Subsequent analysis shows the most common diseases and disease-wise breakup.

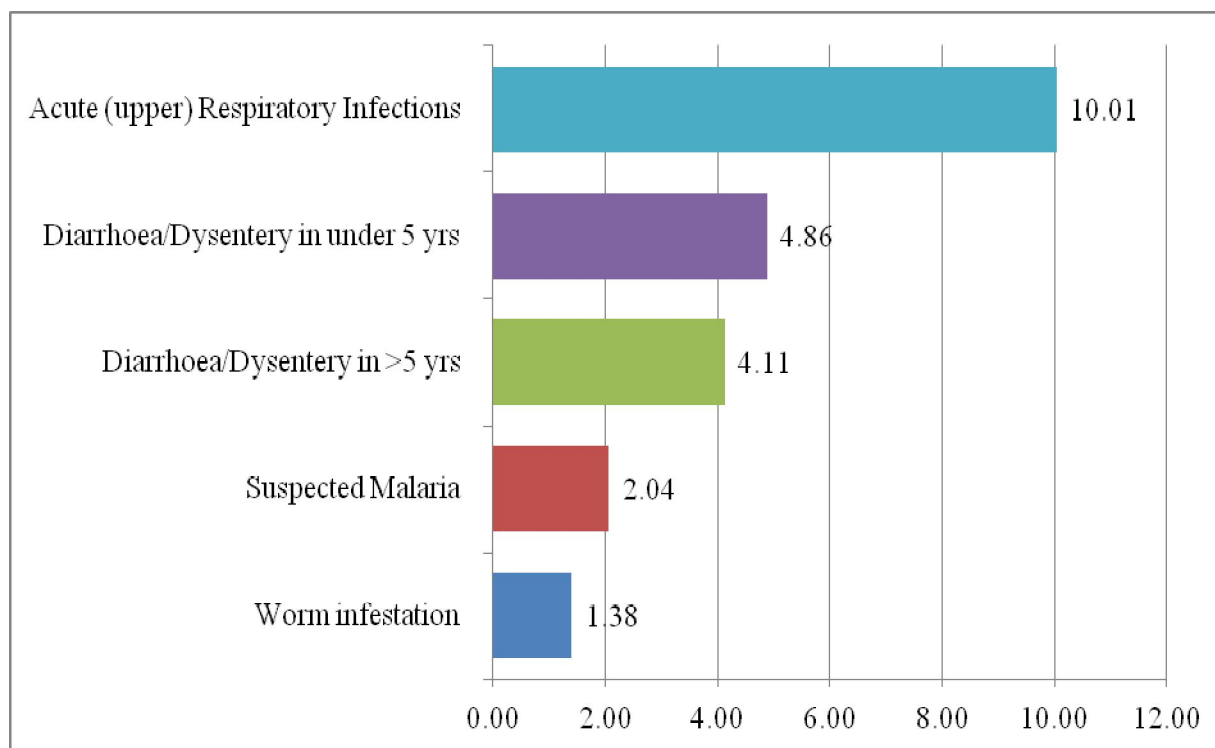
In 3rd quarter 2018, total numbers of communicable diseases are **1,915,726 (26.48%)**, whereas non-communicable diseases are **1,620,212 (22.39%)**.

a. COMMUNICABLE DISEASES

Communicable disease is an infectious **disease** transmissible (as from person to person) by direct contact with an affected individual or the individual's discharges or by indirect **means** (as by a vector) compare contagious **disease**.

Total OPD 3rd Quarter (July To September 2018)		7235906	
S.No	Disease	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	724562	10.01
2	Diarrhoea/Dysentery in under 5 yrs	351698	4.86
3	Diarrhoea/Dysentery in >5 yrs	297284	4.11
4	Suspected Malaria	147491	2.04
5	Worm infestation	99920	1.38
6	Scabies	96118	1.33
7	Enteric / Typhoid Fever	70456	0.97
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9	Pneumonia >5 years	27676	0.38
10	Suspected Viral Hepatitis	21722	0.30
11	TB Suspects	20504	0.28
12	Trachoma	7392	0.10
13	Suspected Measles	6847	0.09
14	Sexually Transmitted Infections	4455	0.06
15	Cutaneous Leishmaniasis	2113	0.03
16	Suspected Meningitis	1081	0.01
17	Suspected Neonatal Tetanus	197	0.00
18	Acute Flaccid Paralysis	58	0.00
19	Suspected HIV/AIDS	0	0.00
Total		1915726	26.48

Acute Respiratory Infections and diarrhea/dysentery under and over 5 years constitute **1373544 18.98%** of these patients. Suspected Malaria stands 147491 with **2.04%** patients in 3rd quarter 2018. Worm Infestation cases reported are **99920** in figures and **(1.38%)** in percent in 1st quarter 2018. The department should take/ adopt programmatic approach to control the disease.



b. NON-COMMUNICABLE DISEASES

A **non-communicable disease** (NCD) is a medical condition or **disease** that is not caused by infectious agents (**non-infectious** or **non-transmissible**). NCDs can refer to chronic **diseases** which last for long periods of time and progress slowly.

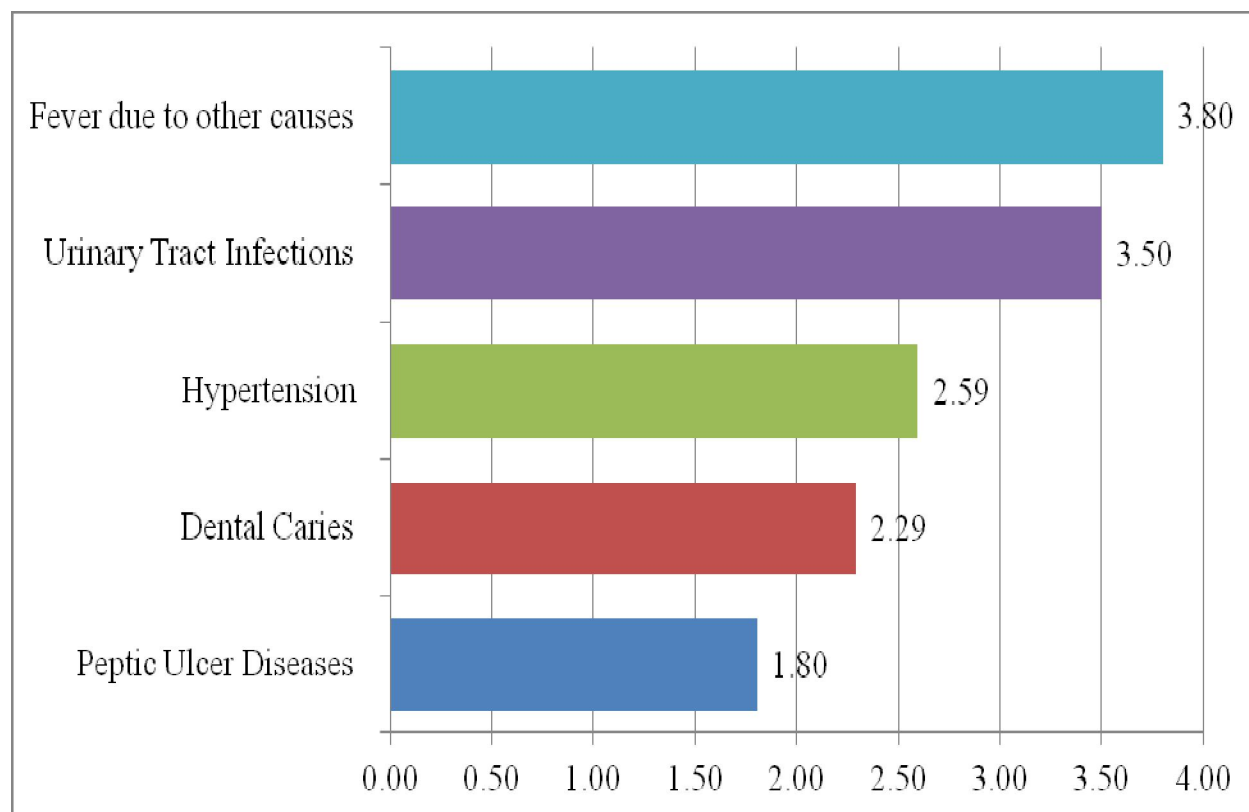
NCDs are the leading cause of death globally.

Total OPD 3rd Quartar (July To September 2018)			7235906
S.No	Disease	Total	%age
1	Fever due to other causes	274766	3.80
2	Urinary Tract Infections	252896	3.50
3	Hypertension	187432	2.59
4	Dental Caries	165354	2.29
5	Peptic Ulcer Diseases	130343	1.80
6	Diabetes Mellitus	109992	1.52
7	Dermatitis	76020	1.05
8	Road traffic accidents	71916	0.99
9	Depression	71143	0.98
10	Otitis Media	63877	0.88
11	Asthma	63386	0.88
12	Ischemic Heart Disease	31790	0.44
13	Fractures	27446	0.38
14	Chronic Obstructive Pulmonary Diseases	20389	0.28
15	Cataract	19096	0.26
16	Dog bite	14387	0.20
17	Benign Enlargement of Prostrate	9019	0.12

18	Drug Dependence	6517	0.09
19	Burns	5636	0.08
20	Epilepsy	5148	0.07
21	Cirrhosis of Liver	5034	0.07
22	Glaucoma	4385	0.06
23	Nephritis, Nephrosis	3557	0.05
24	Snake bites (with signs/symptoms of poisoning)	683	0.01
Total		162012	22.39

The fever due to other causes and Urinary Tract Infections in table are stands **274,766 (3.80%)** and **252,896 (3.50%)** in 3rd quarter 2018.

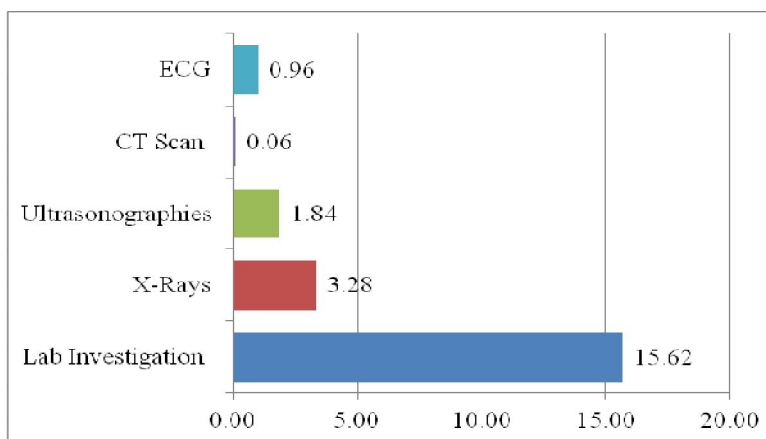
Table and Graph illustrates the trend of non-communicable diseases in Khyber Pakhtunkhwa province during 3rd quarter 2018.



6. Lab Services Utilization for Out Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of outdoor patients receiving diagnostic services from health facility.

No of OPD Patients 7249954	
Lab Investigation	15.62%
X-Rays	3.28%
Ultrasonographies	1.84%
CT Scan	0.06%
ECG	0.96%

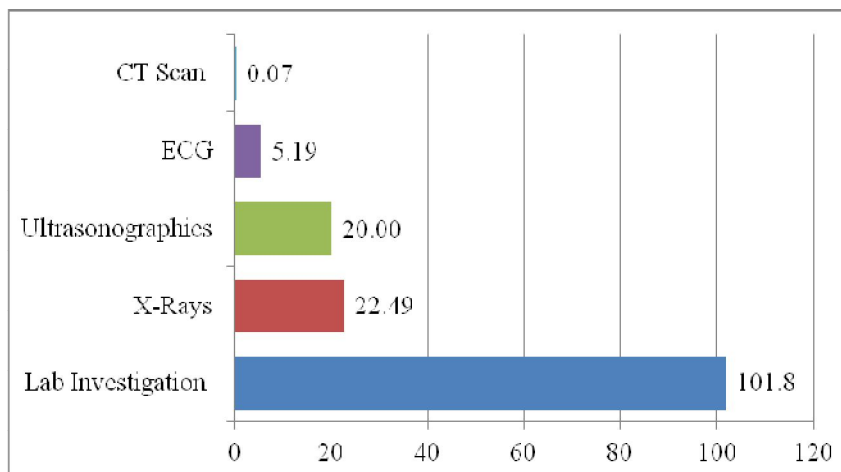


The graph reflects the figures and show quality of care in terms of utilization of investigation services.

7. Lab Services Utilization for In Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of indoor patients receiving lab services from the laboratory of the health facility. In addition statistics are gathered for other diagnostic investigations.

Total Admission 156902	
Lab Investigation	101.8%
X-Rays	22.49%
Ultrasonographies	20.00%
ECG	5.19%
CT Scan	0.07%



8. Average number of Antenatal Care Services in the Facility

Antenatal care is an indicator of access and utilization of health care services during pregnancy. It is a measure of the percent of pregnant women who utilize antenatal care services provided at the government health facility at least once during their current pregnancy.

This indicator indicates that how many pregnant women in the catchment area population are covered through the facility for antenatal care services. It reflects the integrity of referral linkages between LHW and the facility based health care providers, the extent of mobilization of pregnant women or their families to utilize maternal health services from the government health facilities and or the trust of the community on the public health facilities/providers. It will also provide information about the registration of pregnant women in health facilities for availing the ANC-1 services.

	District	Jul	Aug	Sep	Avg.
1	Swat	8810	7854	8979	8548
2	Haripur	6570	6765	6784	6706
3	Mansehra	4088	7829	6712	6210
4	Peshawar	7496	3652	6555	5901
5	Mardan	4549	4109	4782	4480
6	Dir Lower	3673	3346	4804	3941
7	Malakand	4006	3792	2962	3587
8	Battagram	2973	4221	3141	3445
9	Swabi	3223	3159	3525	3302
10	D.I. Khan	3836	2859	2696	3130
11	Dir Upper	3166	2503	2798	2822
12	Abbottabad	3643	2134	2070	2616
13	Shangla	3249	2234	2061	2515
14	Kohat	2805	2466	2188	2486
15	Charsadda	2403	1995	2662	2353
16	Karak	2472	2088	2087	2216
17	Chitral	2765	2160	1651	2192
18	Lakki Marwat	2120	1554	2257	1977
19	Buner	1614	1825	2312	1917
20	Nowshera	1730	1587	2333	1883
21	Tank	1996	1322	1988	1769
22	Bannu	1469	1076	1225	1257
23	Hangu	934	1716	999	1216
24	Tor Ghar	272	299	277	283
25	Kohistan	195	258	199	217
	Total	80057	72803	78047	76969

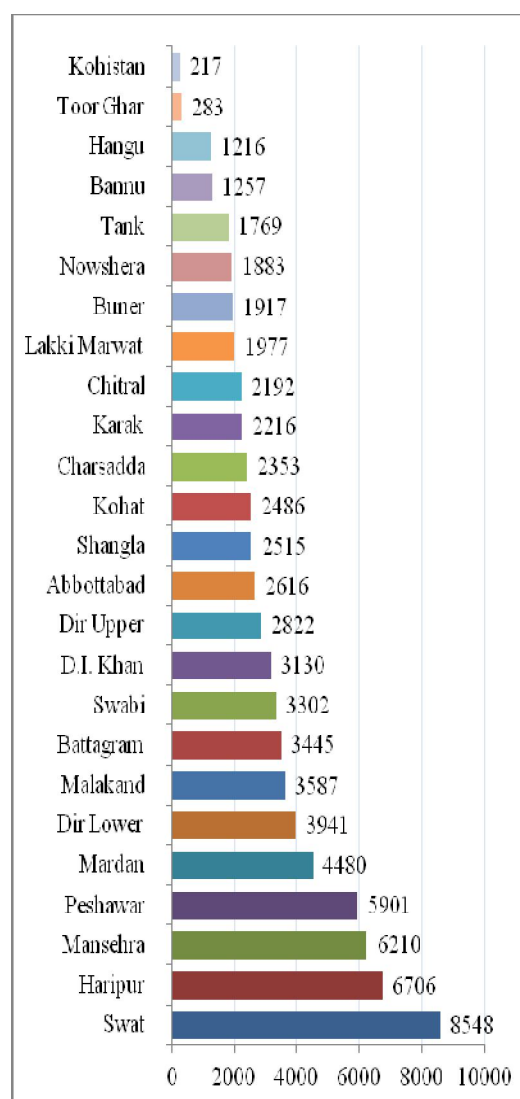


Table and Graph illustrates the statistical analysis about data regarding First Antenatal care services (ANC-1) in government health facilities. District Kohistan and Tor Ghar show worst performance with an **average 217** and **283** ANC-1 coverage in 3rd quarter 2018.

Swat, Mansehra, Haripur, Peshawar, and Mardan are the top performer among 25 districts.

9. District Wise Average Number of Deliveries in the government health facilities

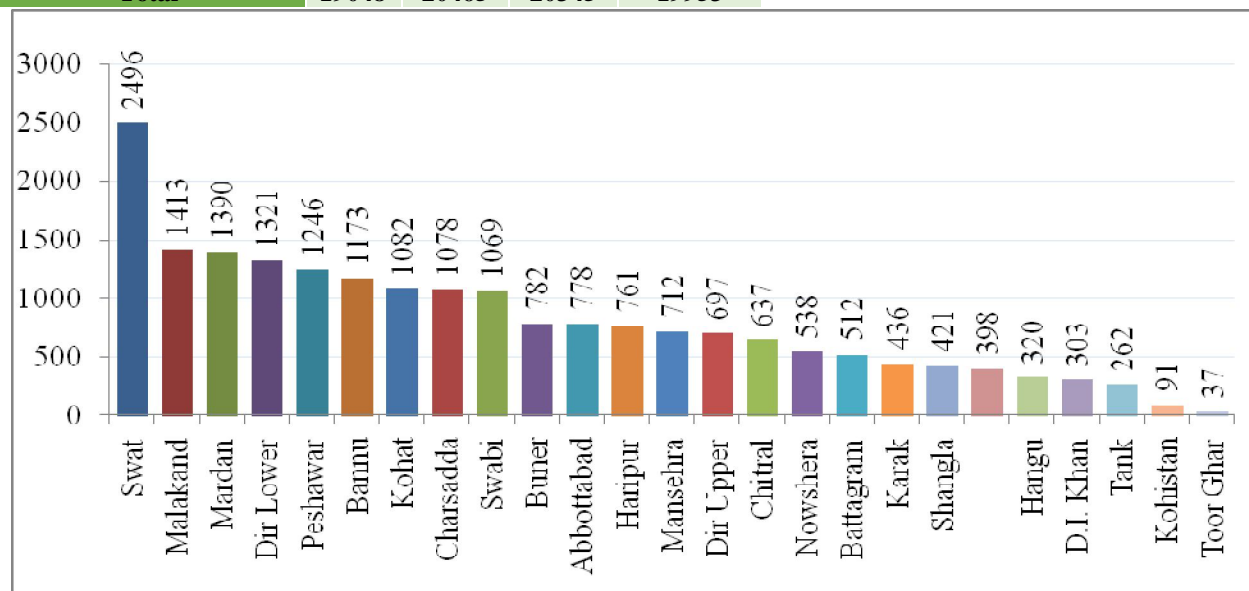
This indicator is reflective of the confidence shown by the general public in the government health facilities for carrying out normal deliveries.

S#	District	Jul	Aug	Sep	Average
1	Swat	2630	2501	2357	2496
2	Malakand	1390	1680	1170	1413
3	Mardan	1344	1433	1394	1390
4	Dir Lower	1293	1367	1302	1321
5	Peshawar	1217	1156	1365	1246
6	Bannu	105	1826	1587	1173
7	Kohat	1145	914	1186	1082
8	Charsadda	990	1181	1064	1078
9	Swabi	1059	1056	1092	1069
10	Buner	805	804	737	782
11	Abbottabad	843	746	745	778
12	Haripur	752	734	796	761
13	Mansehra	741	698	698	712
14	Dir Upper	741	694	656	697
15	Chitral	777	544	590	637
16	Nowshera	380	478	757	538
17	Battagram	524	591	421	512
18	Karak	432	381	494	436
19	Shangla	430	403	429	421
20	Lakki Marwat	495	200	498	398
21	Hangu	274	367	320	320
22	D.I. Khan	300	322	286	303
23	Tank	261	255	270	262
24	Kohistan	80	105	88	91
25	Toor Ghar	40	29	43	37
Total		19048	20465	20345	19953

District **Swat** is on top position of all 25 districts with number of average deliveries **2496** in government health facilities in the quarter. Districts Malakand, Mardan, Dir Lower, Peshawar and Bannu reported 1413, 1390, 1321, 1246 and 1173 average numbers of deliveries conducted in the government health facilities thereby giving best performance.

Primary and secondary health facilities needs further strengthening in government sector and tertiary care hospitals needs to be further improved as well. Figures from tertiary hospitals are not added to these figures; if added these figures will change significantly.

MTI Hospitals are not included in this list.

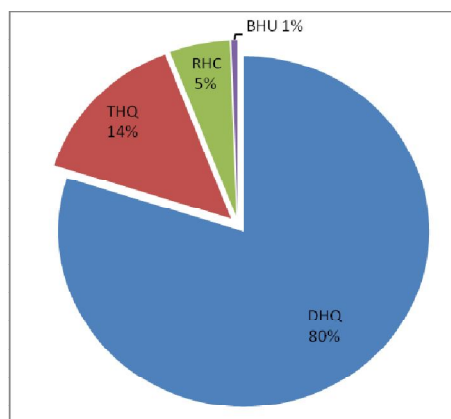


10. Health Facility-wise Number of Deliveries

This indicator reflects health facilities wise number of deliveries and the DHQ hospital stand **19,180**, which is **79%** of the total, THQ **3,995** (**16%**), RHC reports **1055** (**4%**), and BHUs reports only **162** (**1%**) deliveries.

DHQ	THQ	RHC	BHU
21698	3872	1420	153

W&C Hospital and DHQ Hospital (MTI) Bannu not reported data.

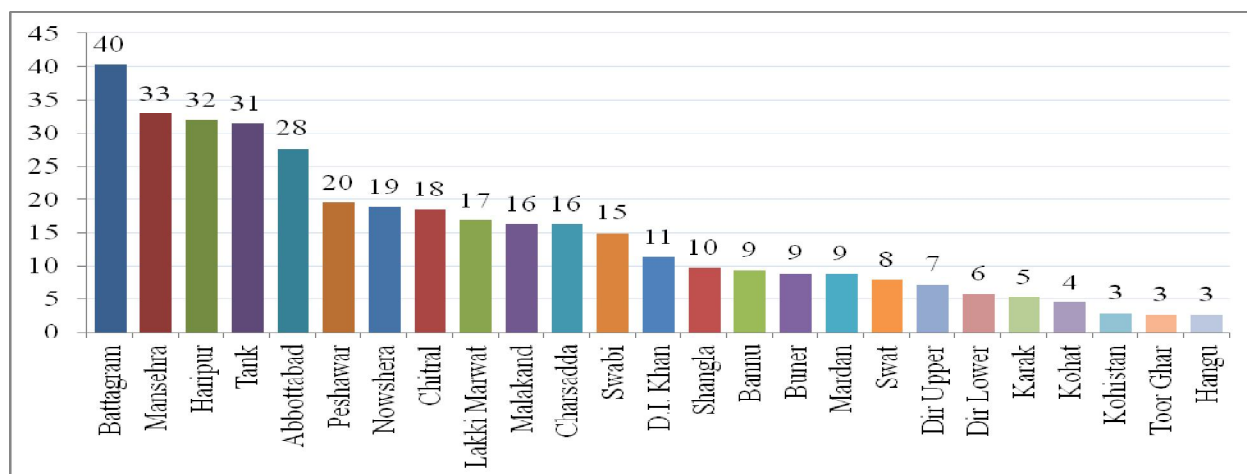


11. Anemia among Women Coming for ANC-1 in Govt: Health Facilities (in %age)

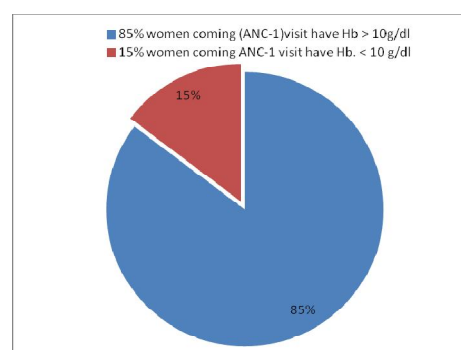
Pregnant women coming to the facility for antenatal care serve as a sample of women from the catchment population. The nutritional status among this sample of pregnant women is suggestive of the nutritional status of women in the catchment population.

S. No	DISTRICT	(ANC-1) visits in the facility	ANC-1 women with Hb. under 10 g/dl	%age
1	Battagram	10335	4174	40
2	Mansehra	18629	6139	33
3	Haripur	20119	6448	32
4	Tank	5306	1669	31
5	Abbottabad	7847	2177	28
6	Peshawar	17703	3462	20
7	Nowshera	5650	1069	19
8	Chitral	6576	1216	18
9	Lakki Marwat	5931	1000	17
10	Malakand	10760	1756	16
11	Charsadda	7060	1152	16
12	Swabi	9907	1487	15
13	D.I. Khan	9391	1063	11
14	Shangla	7544	738	10
15	Bannu	3770	351	9
16	Buner	5751	511	9
17	Mardan	13440	1182	9
18	Swat	25643	2039	8
19	Dir Upper	8467	608	7
20	Dir Lower	11823	688	6
21	Karak	6647	348	5
22	Kohat	7459	331	4
23	Kohistan	652	19	3
24	Tor Ghar	848	23	3
25	Hangu	3649	97	3
Total		230907	39747	17.21

Percent of pregnant women screened for hemoglobin levels at their first antenatal care visit to the facility with hemoglobin levels less than 10g/dl are reflected in **table and graph**.



This indicator shows the frequency of Anemia among women coming for ANC-1 in the government health facilities; 85% with greater than Hb per 10gm/dl and the women with Hb less than 10g/dl are 15%.

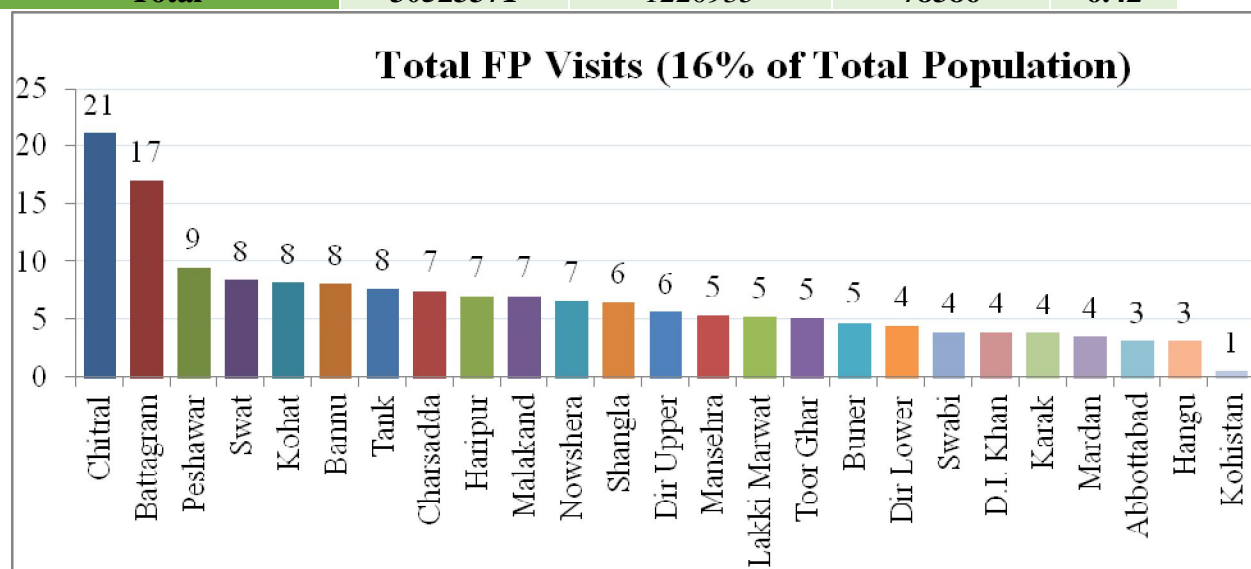


12. Family Planning Visits 16% of the Total Population

Family planning refers to the factors that may be considered by a couple in a committed relationship and each individual involved in deciding if and when to have children.

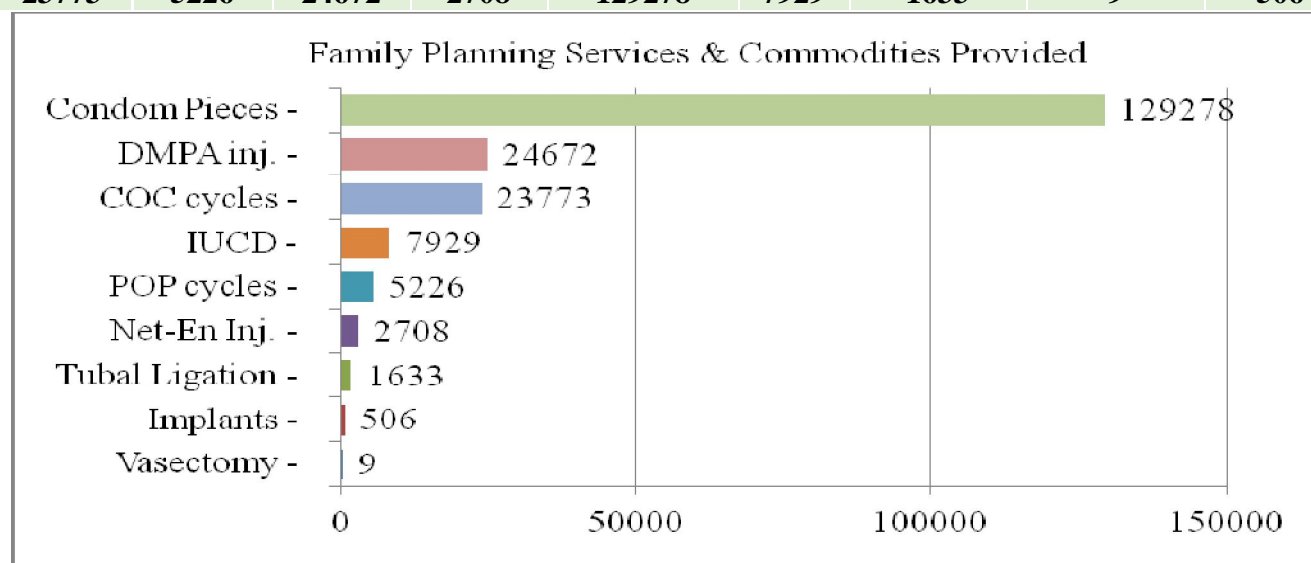
S.No	DISTRICT	Population	16% of Total Population	FP Visits	%age
1	Chitral	447362	17894	3776	21
2	Battagram	476612	19064	3235	17
3	Peshawar	4269079	170763	16135	9
4	Swat	2309570	92383	7747	8
5	Kohat	993874	39755	3234	8
6	Bannu	1167892	46716	3752	8
7	Tank	391885	15675	1195	8
8	Charsadda	1616198	64648	4826	7
9	Haripur	1003031	40121	2809	7
10	Malakand	720295	28812	1999	7
11	Nowshera	1518540	60742	3999	7
12	Shangla	757810	30312	1959	6
13	Dir Upper	946421	37857	2135	6
14	Mansehra	1556460	62258	3275	5
15	Lakki Marwat	876182	35047	1821	5

16	Toor Ghar	171395	6856	348	5
17	Buner	897319	35893	1688	5
18	Dir Lower	1435917	57437	2534	4
19	Swabi	1624616	64985	2559	4
20	D.I. Khan	1627132	65085	2539	4
21	Karak	706299	28252	1075	4
22	Mardan	2373061	94922	3336	4
23	Abbottabad	1332912	53316	1622	3
24	Hangu	518798	20752	631	3
25	Kohistan	784711	31388	157	1
Total		30523371	1220935	78386	6.42



13. Family Planning Services & Commodities Provided

COC cycles	POP cycles	DMPA inj.	Net-En Inj.	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
23773	5226	24672	2708	129278	7929	1633	9	506



DISTRICT	COC cycles	POP cycles	DMPA inj.	Net-En Inj.	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
Bannu	1431	368	1228	29	6810	231	0	0	0
D.I. Khan	748	578	926	51	5260	267	0	0	0
Lakki Marwat	772	91	653	134	1849	108	0	0	0
Tank	743	39	455	57	1361	168	2	0	0
Abbottabad	459	18	646	7	571	91	0	0	1
Haripur	1210	336	954	38	4981	196	3	0	0
Kohistan	57	10	79	24	115	0	0	0	0
Mansehra	1072	55	1359	54	7264	393	47	0	57
Battagram	1366	156	1127	470	5309	409	7	0	0
Toor Ghar	97	12	85	4	1192	8	0	2	0
Karak	258	135	325	0	1841	207	7	0	5
Kohat	864	673	1309	0	13423	637	98	0	85
Hangu	464	603	140	81	2658	65	0	0	0
Buner	427	298	700	314	4317	195	6	0	11
Chitral	791	319	1404	771	7771	100	0	0	0
Dir Lower	301	211	489	263	234	66	0	0	0
Malakand	522	36	894	6	3885	267	24	0	2
Swat	1835	267	3790	24	12618	949	20	0	0
Dir Upper	1418	227	715	18	280	164	1	4	3
Shangla	910	149	1098	38	17399	147	7	0	6
Mardan	1827	117	1129	101	4530	212	62		12
Swabi	891	145	678	50	15276	310	32	0	12
Charsadda	1982	85	1767	59	1620	955	1089	1	89
Nowshera	1704	14	1541	27	2393	1399	15	0	212
Peshawar	1624	284	1181	88	6321	385	213	2	11
Total	23773	5226	24672	2708	129278	7929	1633	9	506

The indicator District-wise Family Planning Services & Commodities Provided is one of the most important indicator in health services. This reflects the results of all of the districts and show that which family planning services has taken by the couple.

In the modern method of the family planning services, the condom is one of the most effective and simple method and couple preferred to take this services from health institutions.

Some of the couple preferred to take other family planning services i.e. COC cycles, POP Cycles or DPMA injections etc.

14. Immunization Status

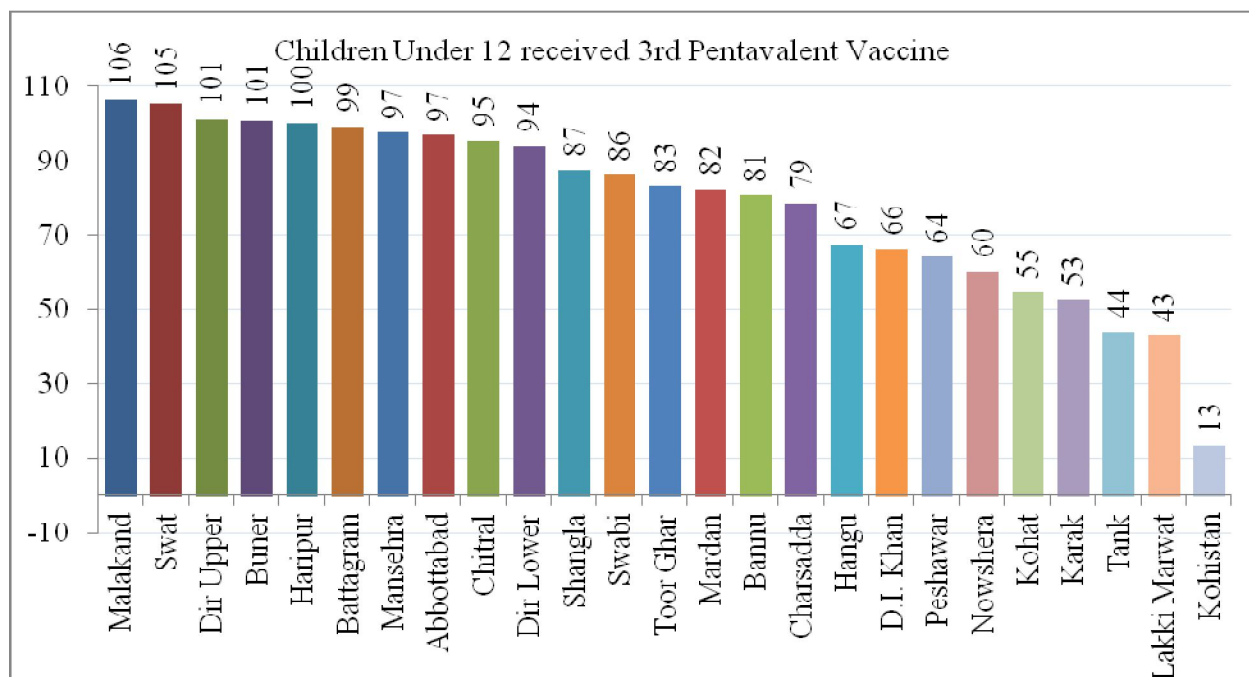
Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease.

Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases. It is one of the most cost-effective health investments, with proven strategies that make it accessible to even the most hard-to-reach and vulnerable populations. It has clearly defined target groups; it can be delivered effectively through outreach activities; and vaccination does not require any major lifestyle change.

a. Children under 12 m received 3rd Pentavalent vaccine

Pentavalent vaccine is five individual vaccines conjugated in one intended to actively protect infant children from 5 potentially deadly diseases: Haemophilus Influenza type B (a bacteria that causes meningitis, pneumonia and otitis), whooping cough, tetanus, hepatitis B and diphtheria.

S. No	DISTRICT	Population	Expected Children	Children under 12 m received 3rd Pentavalent vaccine	%age
1	Malakand	720295	5222	5541	106
2	Swat	2309570	16744	17583	105
3	Dir Upper	946421	6862	6942	101
4	Buner	897319	6506	6547	101
5	Haripur	1003031	7272	7271	100
6	Battagram	476612	3455	3428	99
7	Mansehra	1556460	11284	10995	97
8	Abbottabad	1332912	9664	9354	97
9	Chitral	447362	3243	3094	95
10	Dir Lower	1435917	10410	9765	94
11	Shangla	757810	5494	4804	87
12	Swabi	1624616	11778	10181	86
13	Toor Ghar	171395	1243	1033	83
14	Mardan	2373061	17205	14164	82
15	Bannu	1167892	8467	6834	81
16	Charsadda	1616198	11717	9207	79
17	Hangu	518798	3761	2536	67
18	D.I. Khan	1627132	11797	7805	66
19	Peshawar	4269079	30951	19813	64
20	Nowshera	1518540	11009	6619	60
21	Kohat	993874	7206	3932	55
22	Karak	706299	5121	2692	53
23	Tank	391885	2841	1241	44
24	Lakki Marwat	876182	6352	2715	43
25	Kohistan	784711	5689	752	13
Total		30523371	221294	174848	79

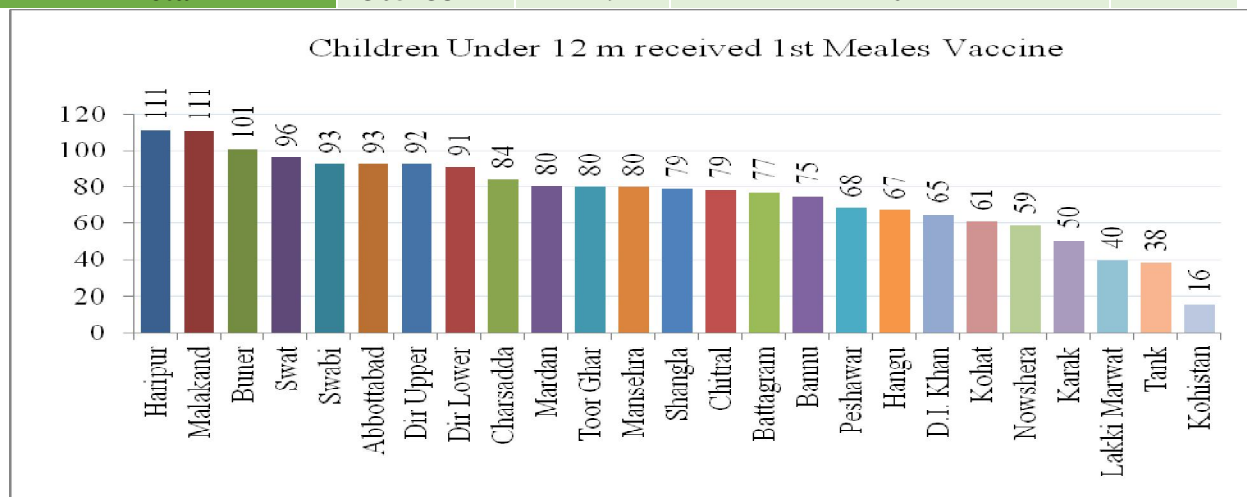


b. Children under 12 Months received 1st Measles vaccine

Measles, also known as morbilli, rubeola or red measles, is a highly contagious infection caused by the measles virus. Measles is an airborne disease which spreads easily through the coughs and sneezes of those infected. Testing for the virus in suspected cases is important for public health efforts.

Following data reflects children under 12 Months of age getting 1st Measles Vaccine. Percentage is also computed to rank the performance of districts.

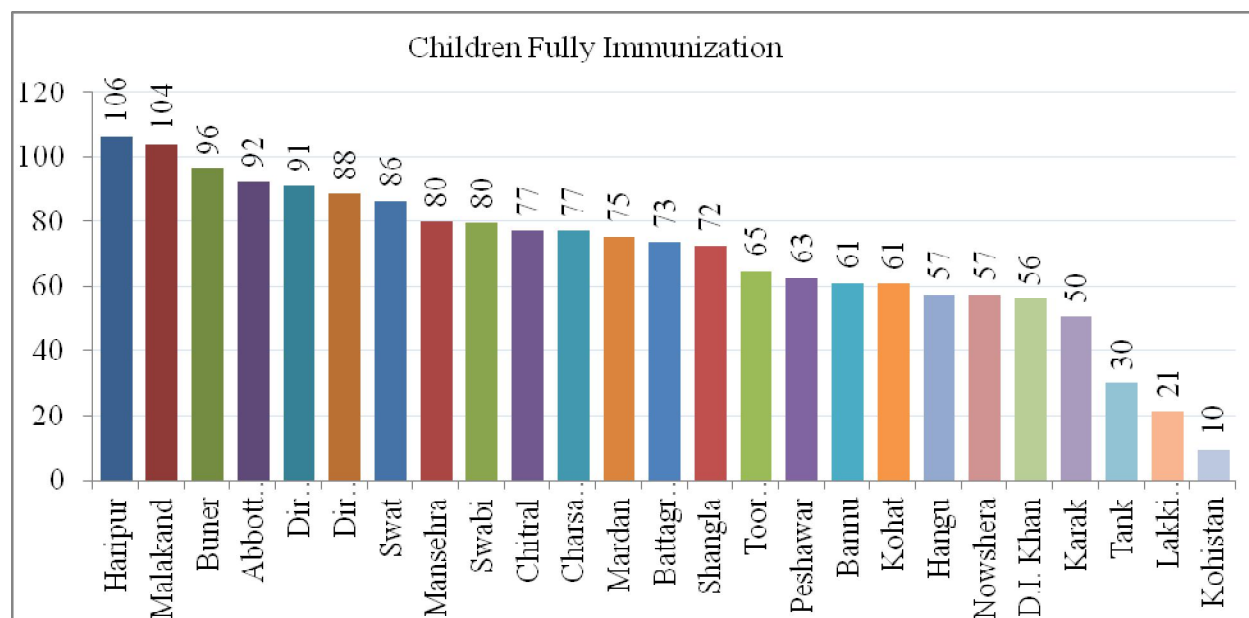
S. No	DISTRICT	Population	Expected Children	Children under 12 m received 1st Measles vaccine	%age
1	Haripur	1003031	7272	8093	111
2	Malakand	720295	5222	5781	111
3	Buner	897319	6506	6542	101
4	Swat	2309570	16744	16079	96
5	Swabi	1624616	11778	10925	93
6	Abbottabad	1332912	9664	8950	93
7	Dir Upper	946421	6862	6342	92
8	Dir Lower	1435917	10410	9481	91
9	Charsadda	1616198	11717	9860	84
10	Mardan	2373061	17205	13835	80
11	Toor Ghar	171395	1243	994	80
12	Mansehra	1556460	11284	9026	80
13	Shangla	757810	5494	4330	79
14	Chitral	447362	3243	2550	79
15	Battagram	476612	3455	2655	77
16	Bannu	1167892	8467	6332	75
17	Peshawar	4269079	30951	21118	68
18	Hangu	518798	3761	2525	67
19	D.I. Khan	1627132	11797	7667	65
20	Kohat	993874	7206	4391	61
21	Nowshera	1518540	11009	6474	59
22	Karak	706299	5121	2580	50
23	Lakki Marwat	876182	6352	2513	40
24	Tank	391885	2841	1076	38
25	Kohistan	784711	5689	892	16
Total		30523371	221294	171011	77



c. Children Under 12 Months Fully Immunized

Fully Immunization Coverage is the measure of the percentage of children under two year age who have received all doses of BCG vaccine, three doses of polio and pentavalent vaccines and 2 doses of measles vaccine in a given year.

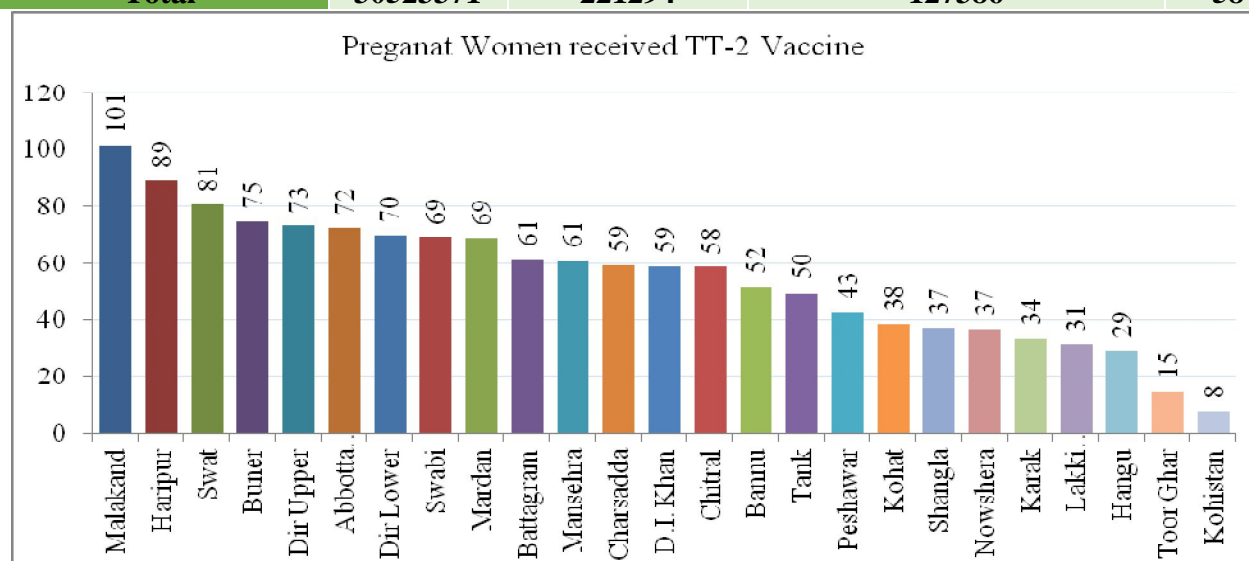
S. No	DISTRICT	Population	Expected Children	Children under 12 m fully immunized	%age
1	Haripur	1003031	7272	7708	106
2	Malakand	720295	5222	5426	104
3	Buner	897319	6506	6264	96
4	Abbottabad	1332912	9664	8920	92
5	Dir Upper	946421	6862	6247	91
6	Dir Lower	1435917	10410	9208	88
7	Swat	2309570	16744	14443	86
8	Mansehra	1556460	11284	9025	80
9	Swabi	1624616	11778	9375	80
10	Chitral	447362	3243	2497	77
11	Charsadda	1616198	11717	9004	77
12	Mardan	2373061	17205	12934	75
13	Battagram	476612	3455	2537	73
14	Shangla	757810	5494	3973	72
15	Toor Ghar	171395	1243	804	65
16	Peshawar	4269079	30951	19347	63
17	Bannu	1167892	8467	5159	61
18	Kohat	993874	7206	4382	61
19	Hangu	518798	3761	2158	57
20	Nowshera	1518540	11009	6310	57
21	D.I. Khan	1627132	11797	6594	56
22	Karak	706299	5121	2580	50
23	Tank	391885	2841	849	30
24	Lakki Marwat	876182	6352	1349	21
25	Kohistan	784711	5689	542	10
Total		30523371	221294	157635	71



d. Pregnant Women Received TT-2 Vaccine

During 3rd quarter 2018, out of **221,294** expected pregnant women, **127,387 (58%)** women received **TT-2** vaccination. Among districts there is a variation that ranges from **101% to 8%**. Most of the districts fall under **70% to 30%**.

S. No	DISTRICT	Population	Expected Births	Pregnant women received TT-2 vaccine	%age
1	Malakand	720295	5222	5282	101
2	Haripur	1003031	7272	6488	89
3	Swat	2309570	16744	13524	81
4	Buner	897319	6506	4856	75
5	Dir Upper	946421	6862	5012	73
6	Abbottabad	1332912	9664	6976	72
7	Dir Lower	1435917	10410	7249	70
8	Swabi	1624616	11778	8143	69
9	Mardan	2373061	17205	11819	69
10	Battagram	476612	3455	2113	61
11	Mansehra	1556460	11284	6854	61
12	Charsadda	1616198	11717	6950	59
13	D.I. Khan	1627132	11797	6935	59
14	Chitral	447362	3243	1895	58
15	Bannu	1167892	8467	4388	52
16	Tank	391885	2841	1407	50
17	Peshawar	4269079	30951	13194	43
18	Kohat	993874	7206	2763	38
19	Shangla	757810	5494	2043	37
20	Nowshera	1518540	11009	4067	37
21	Karak	706299	5121	1727	34
22	Lakki Marwat	876182	6352	1980	31
23	Hangu	518798	3761	1089	29
24	Toor Ghar	171395	1243	184	15
25	Kohistan	784711	5689	448	8
Total		30523371	221294	127386	58



15. Malaria Cases Slide Positivity Rate

As malaria control efforts intensify, it is critical to monitor trends in disease burden and measure the impact of interventions. A key surveillance indicator is the incidence of malaria. The slide positivity rate (SPR) has been used as a surrogate measure of malaria incidence, but limited data exist on the relationship between SPR and the incidence of malaria.

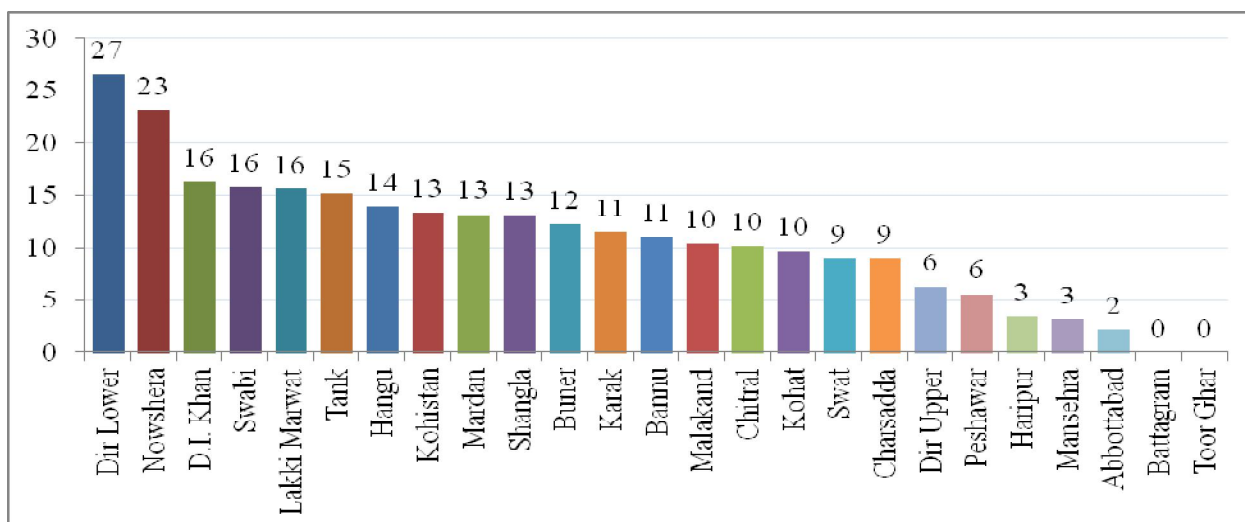
a. Malaria Parasite

This indicator measure the proportion of blood slides tested positive for Malaria.

The **malaria parasite** produces a molecule that affects red blood cells, luring mosquitoes to bite infected people, and may enhance the parasite's spread.

Malaria parasites are spread by bites from infected mosquitoes. **Mosquirix** (a recombinant protein-based malaria vaccine) relies on a single protein from the **malaria parasite** to induce immunity.

S.No	DISTRICT	Slides examined	Slides MP +ve	%age
1	Dir Lower	9219	2449	27
2	Nowshera	4934	1143	23
3	D.I. Khan	14402	2350	16
4	Swabi	2690	426	16
5	Lakki Marwat	6447	1009	16
6	Tank	4845	736	15
7	Hangu	3619	503	14
8	Kohistan	90	12	13
9	Mardan	15796	2084	13
10	Shangla	1819	239	13
11	Buner	11922	1465	12
12	Karak	5669	651	11
13	Bannu	8984	989	11
14	Malakand	1863	193	10
15	Chitral	3171	323	10
16	Kohat	6997	676	10
17	Swat	13457	1212	9
18	Charsadda	16068	1443	9
19	Dir Upper	6492	410	6
20	Peshawar	4364	243	6
21	Haripur	146	5	3
22	Mansehra	837	26	3
23	Abbottabad	275	6	2
24	Battagram	0	0	0
25	Tor Ghar	0	0	0
Total		144106	18593	13



b. Plasmodium Falciparum Rate

This indicator measure the proportion of Plasmodium Falciparum among blood slides tested positive for malaria.

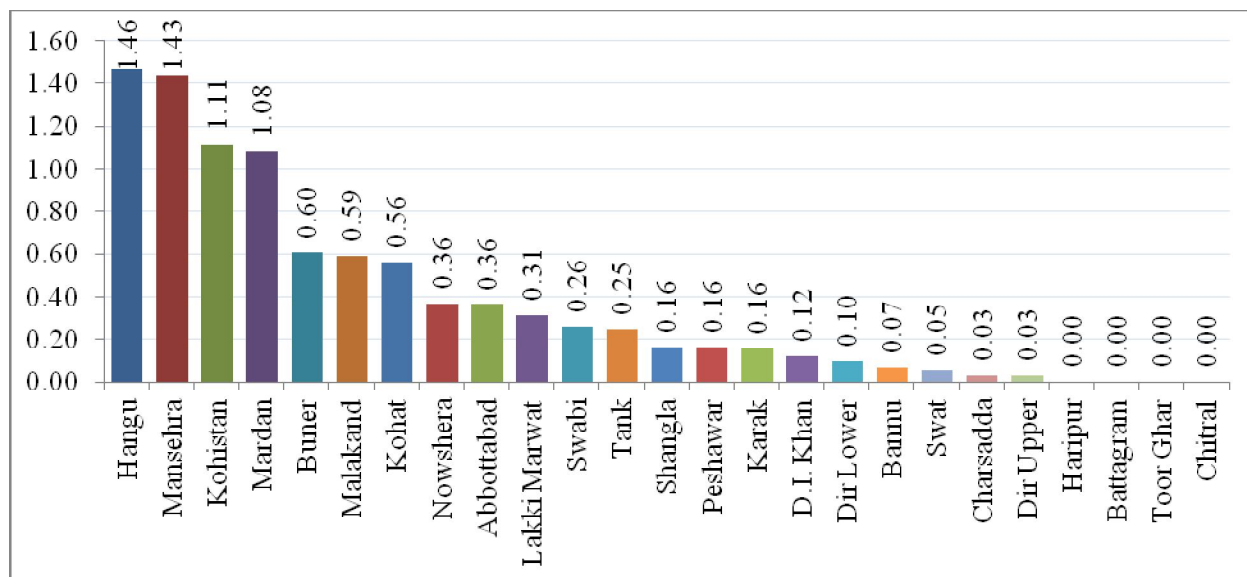
District **Hangu** is on top of the list in table and reflects the figures i.e **3619** slides have been examined and reported **53** with **1.46%** positive patients of **Malaria Plasmodium Falciparum**.

S.No	DISTRICT	Slides examined	Slides P. Falciparum +ve	%age
1	Hangu	3619	53	1.46
2	Mansehra	837	12	1.43
3	Kohistan	90	1	1.11
4	Mardan	15796	171	1.08
5	Buner	11922	72	0.60
6	Malakand	1863	11	0.59
7	Kohat	6997	39	0.56
8	Nowshera	4934	18	0.36
9	Abbottabad	275	1	0.36
10	Lakki Marwat	6447	20	0.31
11	Swabi	2690	7	0.26
12	Tank	4845	12	0.25
13	Shangla	1819	3	0.16
14	Peshawar	4364	7	0.16
15	Karak	5669	9	0.16
16	D.I. Khan	14402	17	0.12
17	Dir Lower	9219	9	0.10
18	Bannu	8984	6	0.07
19	Swat	13457	7	0.05
20	Charsadda	16068	5	0.03
21	Dir Upper	6492	2	0.03
22	Haripur	146	0	0.00
23	Battagram	0	0	0.00
24	Tor Ghar	0	0	0.00

25	Chitral	3171	0	0.00
Total		144106	482	0.33

Plasmodium falciparum is a protozoan parasite, one of the species of **Plasmodium** that cause **malaria** in humans. It is transmitted by the female Anopheles mosquito of the six malarial parasites.

Plasmodium falciparum causes the most-often fatal and medically severe form of disease.

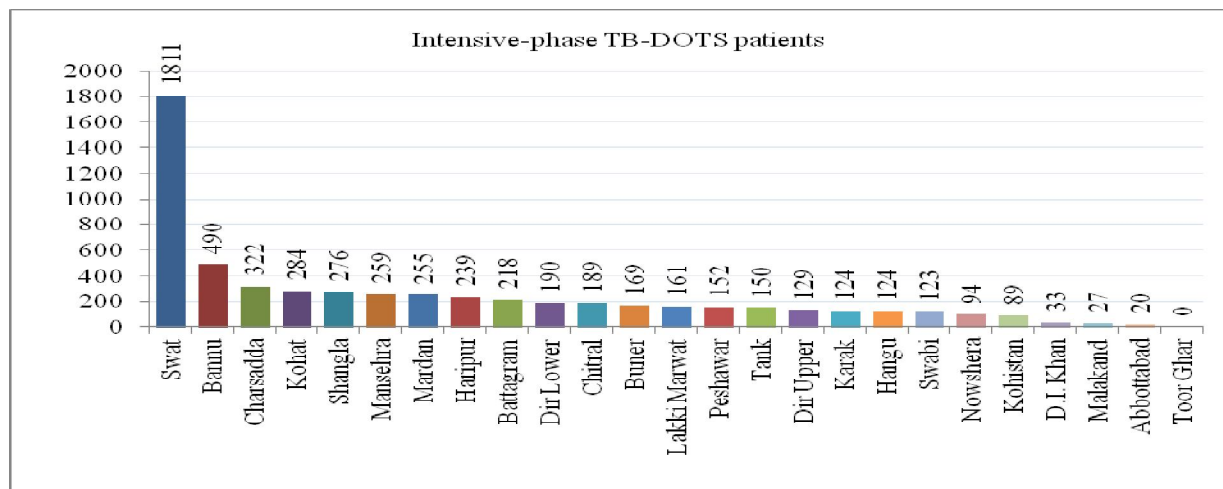


16. Intensive-Phase TB-DOTS Patients

Tuberculosis requires regular and uninterrupted treatment for a cure and a person missing the treatment poses a great threat for developing a resistant form of the disease; so the number of patients missing their treatment for more than a week needs to be actively traced and convinced to continue the treatment.

S.No	DISTRICT	Intensive-phase TB-DOTS patients
1	Swat	1811
2	Bannu	490
3	Charsadda	322
4	Kohat	284
5	Shangla	276
6	Mansehra	259
7	Mardan	255
8	Haripur	239
9	Battagram	218
10	Dir Lower	190
11	Chitral	189
12	Buner	169
13	Lakki Marwat	161
14	Peshawar	152
15	Tank	150
16	Dir Upper	129
17	Karak	124
18	Hangu	124
19	Swabi	123

20	Nowshera	94
21	Kohistan	89
22	D.I. Khan	33
23	Malakand	27
24	Abbottabad	20
25	Toor Ghar	0
Total		5928



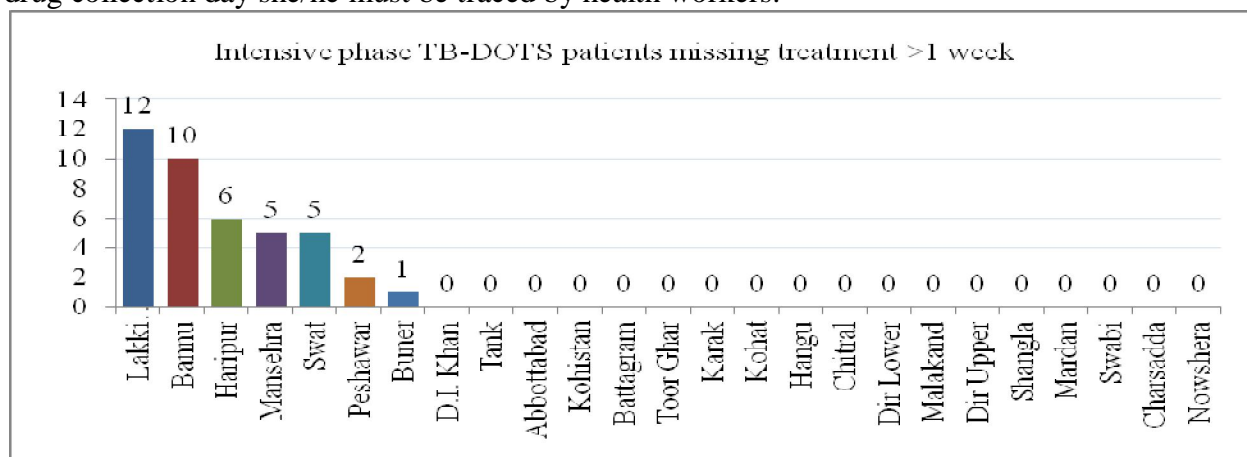
17. Proportion of Intensive phase TB-DOTS patients missing treatment >1 week

This indicator measures the proportion of TB-DOTS intensive phase patients missing treatment more than one week. This is the suggestive of the performance of the TB-DOTS treatment center and the associated treatment supporters.

S.No	DISTRICT	Intensive phase TB-DOTS patients missing treatment >1 week
1	Lakki Marwat	12
2	Bannu	10
3	Haripur	6
4	Mansehra	5
5	Swat	5
6	Peshawar	2
7	Buner	1
8	D.I. Khan	0
9	Tank	0
10	Abbottabad	0
11	Kohistan	0
12	Battagram	0
13	Toor Ghar	0
14	Karak	0
15	Kohat	0
16	Hangu	0
17	Chitral	0
18	Dir Lower	0
19	Malakand	0

20	Dir Upper	0
21	Shangla	0
22	Mardan	0
23	Swabi	0
24	Charsadda	0
25	Nowshera	0
Total		41

Under TB-DOTS, if a patient misses his/her treatment for more than 2 consecutive days during the initial intensive phase, he must be traced by the health worker or by the treatment supporter. In the continuation phase of treatment, if patient fails to collect his drugs within one week of drug collection day she/he must be traced by health workers.



18. Mortality Rate

Mortality rate or death rate is a measure of the number of deaths (in general, or due to a specific cause) in a particular population, scaled to the size of that population, per unit of time.

Through mortality rates there is an opportunity to get a clear picture of the preventable and the non-preventable causes, enabling the department to concentrate on the prevention of death due to avoidable causes.

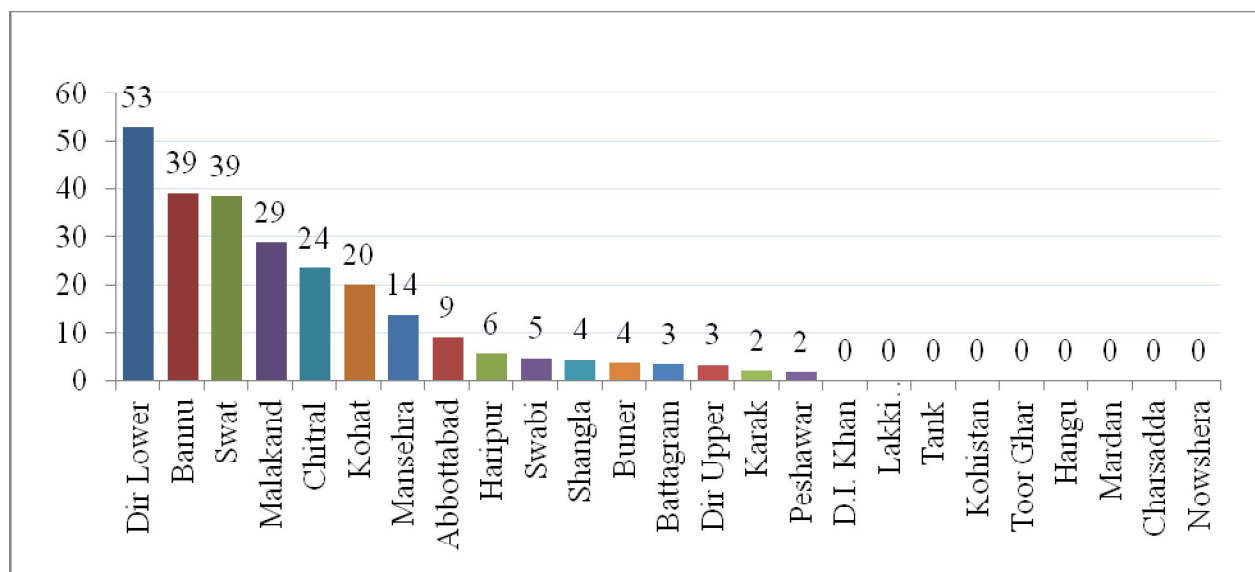
a. Neonatal Deaths in the Facilities

A neonatal death is the death of a baby within the first 4 weeks of life.

Number of Neonatal deaths due to various causes during the deliveries or immediately afterwards Two assumptions have to be made here, one is that this report includes deaths occurring in government health facilities only and the second is the non-availability of data on predispositions in the mother resulting in these fatalities.

S.No	District	Live Birth in the Facility	Neonatal Death in the Facility	NMR
1	Dir Lower	3952	209	53
2	Bannu	3470	136	39
3	Swat	7389	285	39
4	Malakand	4206	122	29
5	Chitral	1904	45	24
6	Kohat	3129	63	20

7	Mansehra	2101	29	14
8	Abbottabad	2325	21	9
9	Haripur	2268	13	6
10	Swabi	3169	15	5
11	Shangla	1125	5	4
12	Buner	2309	9	4
13	Battagram	1447	5	3
14	Dir Upper	2063	7	3
15	Karak	1305	3	2
16	Peshawar	3734	7	2
17	D.I. Khan	906	0	0
18	Lakki Marwat	1179	0	0
19	Tank	769	0	0
20	Kohistan	191	0	0
21	Toor Ghar	105	0	0
22	Hangu	822	0	0
23	Mardan	4122	0	0
24	Charsadda	3213	0	0
25	Nowshera	1605	0	0
Grand Total		58808	974	17



b. Maternal Mortality Rate per 100,000 Population (Reported by LHW)

The indicator Maternal Mortality Rate (Maternal Deaths Reported by LHW) illustrates the death rates of the mother during pregnancy or deliveries.

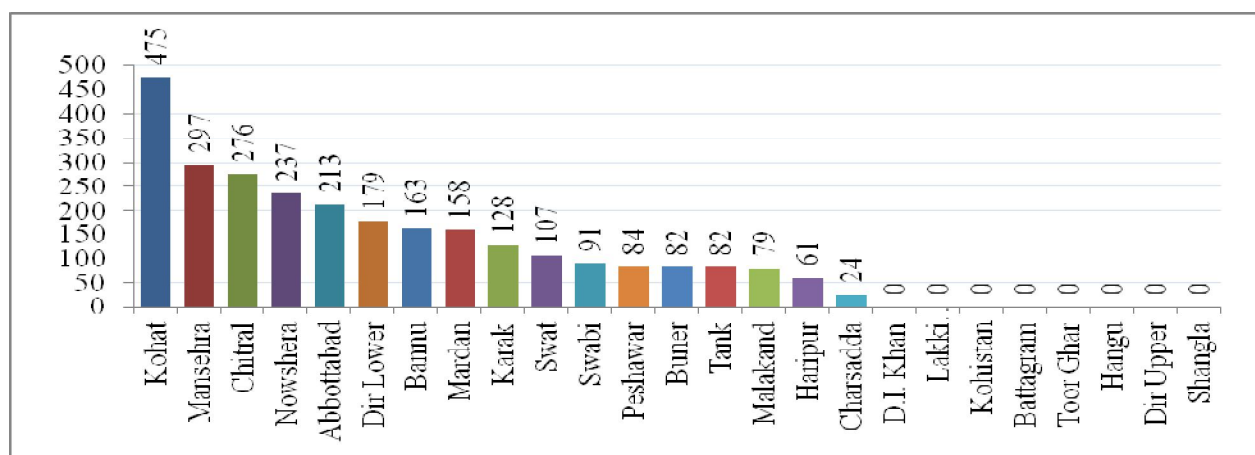
[Over Maternal Mortality Rate is 129 of the province]

S.No	DISTRICT	Delivery by skilled persons reported	Maternal deaths reported	%age
1	Kohat	842	4	475
2	Mansehra	4046	12	297

3	Chitral	1810	5	276
4	Nowshera	2957	7	237
5	Abbottabad	4228	9	213
6	Dir Lower	560	1	179
7	Bannu	2453	4	163
8	Mardan	5689	9	158
9	Karak	1568	2	128
10	Swat	6539	7	107
11	Swabi	3299	3	91
12	Peshawar	7141	6	84
13	Buner	1215	1	82
14	Tank	1217	1	82
15	Malakand	2523	2	79
16	Haripur	3298	2	61
17	Charsadda	4094	1	24
18	D.I. Khan	3459	0	0
19	Lakki Marwat	716	0	0
20	Kohistan	2	0	0
21	Battagram	330	0	0
22	Toor Ghar	0	0	0
23	Hangu	342	0	0
24	Dir Upper	451	0	0
25	Shangla	346	0	0
Total		59125	76	129

District **Kohat** is on top of the list and report **842** numbers of deliveries and **4** maternal deaths with **475** maternal mortality rate and District **Mansehra** reported **12** maternal deaths among **4046** deliveries and the maternal mortality rate is **297**. There is decreasing trend in 3rd quarter 2018 as compare with 2nd quarter 2018.

Districts DI Khan to Shangla reported zero (0) Maternal deaths in their respective districts in quarter.



c. Infant Mortality Rate per 1000 Population (Reported by LHW)

Infant mortality refers to deaths of children, typically those less than one year of age. It is measured by the infant mortality rate (IMR), which is the number of deaths of children under one year of age per 1000 live births.

The leading causes of infant mortality are birth asphyxia, pneumonia, term birth complications, diarrhea, malaria, measles and malnutrition.

[Over all Infant Mortality Rate is 16 of the province]

S.No	DISTRICT	Delivery by skilled persons reported	Infant deaths reported	IMR
1	Kohat	842	25	30
2	Swabi	3299	96	29
3	Tank	1217	35	29
4	Mansehra	4046	111	27
5	Haripur	3298	84	25
6	Buner	1215	29	24
7	Abbottabad	4228	100	24
8	Nowshera	2957	61	21
9	Dir Upper	451	9	20
10	Peshawar	7141	132	18
11	Karak	1568	27	17
12	Chitral	1810	27	15
13	Swat	6539	80	12
14	Battagram	330	4	12
15	Shangla	346	4	12
16	Bannu	2453	26	11
17	Lakki Marwat	716	6	8
18	Mardan	5689	45	8
19	Charsadda	4094	30	7
20	Malakand	2523	14	6
21	D.I. Khan	3459	1	0
22	Kohistan	2	0	0
23	Toor Ghar	0	0	0
24	Hangu	342	0	0
25	Dir Lower	560	0	0
Total		59125	946	16

