



澳門特別行政區政府  
Governo da Região Administrativa Especial de Macau  
衛生局  
Serviços de Saúde

- 中文版
- Versão Portuguesa
- English Version

澳門特別行政區

Região Administrativa Especial de Macau

Macao Special Administrative Region

強制性申報疾病臨時月報表

Relatório Provisório Mensal de Doenças de Declaração Obrigatória

Provisional Monthly Report of Notifiable Diseases

12/2013

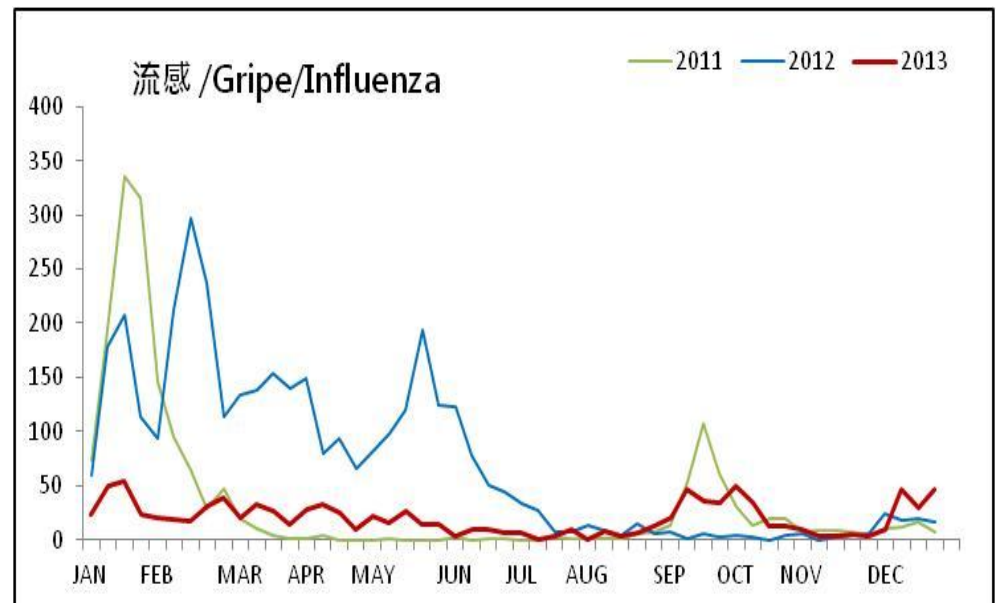
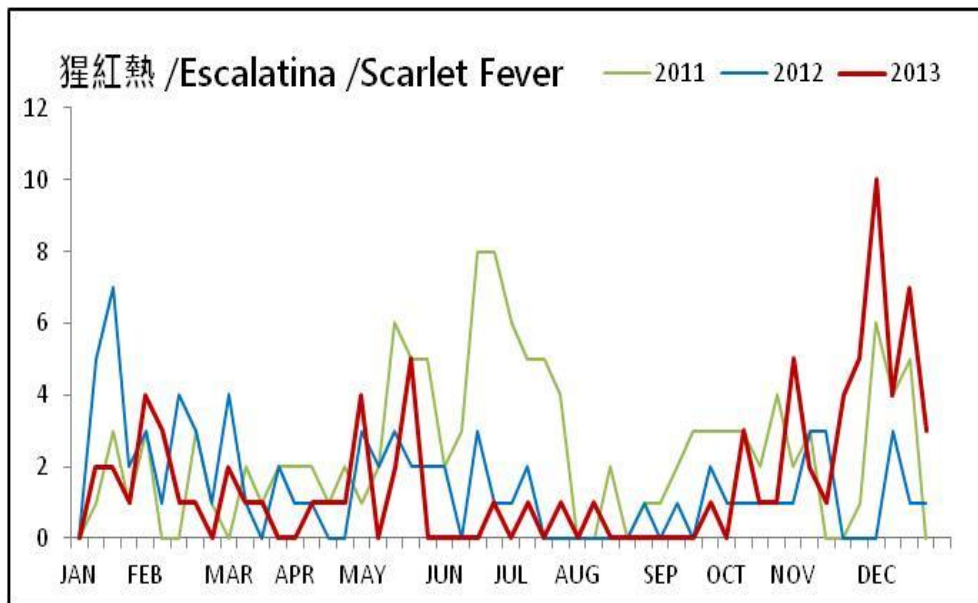
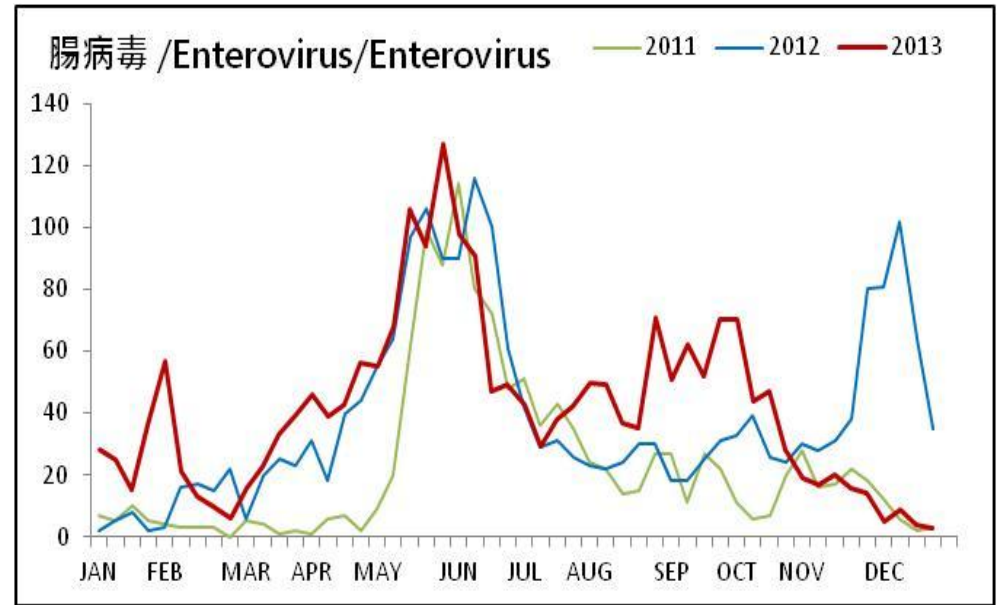
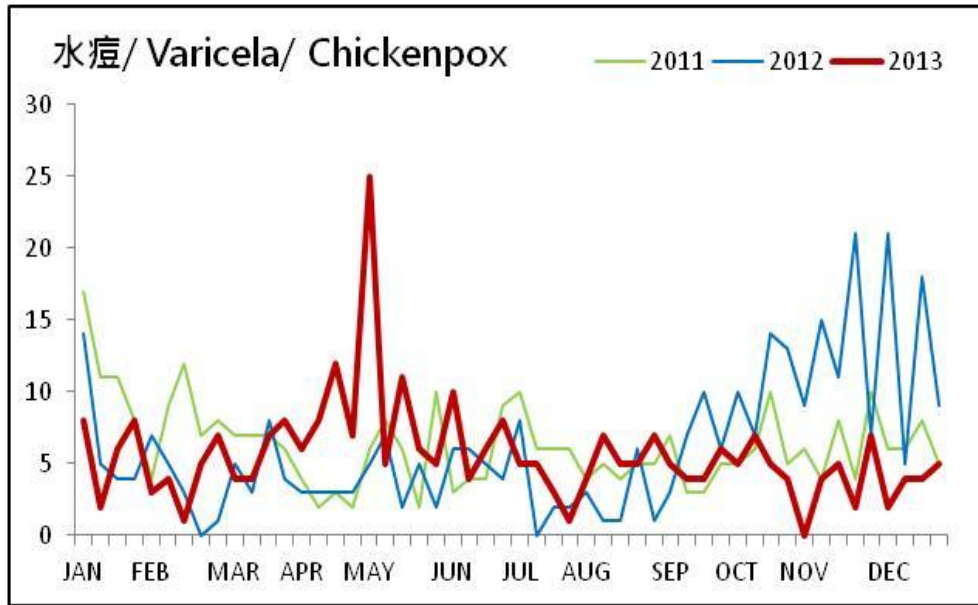
疾病預防控制中心-傳染病防治暨疾病監測部編制

Editado pelo NDIV, Centro de Controlo e Prevenção da Doença

Prepared by Unit for Communicable Diseases & Surveillance, CDC

# 部份強制性申報圖表 Tabela sobre uma parte das doenças de declaração obrigatória

## Summary of selected notifiable diseases notifications











# HEALTH BUREAU, MACAO SAR, CHINA

## PERIODIC REPORT OF NOTIFIABLE DISEASES

### Year 2013 , 12

2014/01/08

| DISEASES   |           |  | No. of Cases |              |                |                |                |                |                |                |                |                |                |                |                |                |                |              |                | DURING THE PERIOD |   |       | CUMULATIVE NUMBERS SINCE 1st OF JANUARY |         |             |             |                              |                              |    |     |    |     |     |    |
|------------|-----------|--|--------------|--------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|--------------|----------------|-------------------|---|-------|---|---------|-------------|-------------|------------------------------|------------------------------|----|-----|----|-----|-----|----|
|            |           |  |              |              |                |                |                |                |                |                |                |                |                |                |                |                |                |              |                | TOTAL CASES       |   |       | AVERAGE LAST 26 years 5 years           |         |             | TOTAL CASES |                              | AVERAGE LAST 26 years 5years |    |     |    |     |     |    |
| CID 10     | CID 9     | NAME   | (0-4)<br>M F | (5-9)<br>M F | (10-14)<br>M F | (15-19)<br>M F | (20-24)<br>M F | (25-29)<br>M F | (30-34)<br>M F | (35-39)<br>M F | (40-44)<br>M F | (45-49)<br>M F | (50-54)<br>M F | (55-59)<br>M F | (60-64)<br>M F | (65-69)<br>M F | (70-74)<br>M F | (>75)<br>M F | Ignored<br>M F | M                 | F | U MFU | 26 years                                | 5 years | TOTAL CASES | TOTAL CASES | AVERAGE LAST 26 years 5years |                              |    |     |    |     |     |    |
| A00        | 001       | Cholera  | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | .                            |    |     |    |     |     |    |
| A01.0      | 002.0     | Typhoid fever  | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | 8                            | 1  |     |    |     |     |    |
| A01.1-4    | 002.1-9   | Paratyphoid fever  | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | 2                            |    |     |    |     |     |    |
| A02.0-9    | 003.0-9   | Salmonella infections  | .            | 1            | .              | .              | .              | .              | .              | .              | .              | .              | .              | 1              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | 2           | 3                            | 84                           | 31 | 60  |    |     |     |    |
| A03.0-9    | 004.0-9   | Shigellosis  | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | 1                            |    |     |    |     |     |    |
| A04.0-4    | 008.01-09 | Intestinal E.coli Infections                                 | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | 2                            |    |     |    |     |     |    |
| A05.0-9    | 005.0-9   | Bacterial Foodborne Intoxication                             | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | 4           | 1                            | 92                           | 34 | 83  |    |     |     |    |
| A06.0      | 006.0     | Acute amoebic dysentery                                      | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | 1                            |    |     |    |     |     |    |
| A06.1-9    | 006.1-9   | Other Amoebiasis   | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | .                            | 1                            | .  |     |    |     |     |    |
| A08.0      | 008.61    | Rotaviral enteritis  | 33           | 20           | 5              | 3              | .              | .              | 1              | .              | 1              | .              | .              | .              | 1              | .              | 1              | 1            | .              | 1                 | . | .     | .                                       | .       | 43          | 25          | 68                           | 14                           | 71 | 225 | 41 | 204 |     |    |
| A08.1      | 008.63    | Acute gastroenteropathy due to Norwalk agent                 | .            | 2            | 5              | 4              | 4              | 4              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | 10          | 10                           | 20                           | 3  | 14  | 80 | 44  | 189 |    |
| A08.4      | 008.8     | Viral intestinal infection, unspecified                      | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | .                            | 2                            | .  | 5   | 1  | 4   |     |    |
| A15-A16(1) | 010.00-04 | Primary respiratory TB, confirmed by laboratory              | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | .                            | .  | 8   | .  |     |     |    |
| A15-A16(2) | 011.00-06 | Tuberculosis of lung   | .            | .            | .              | .              | 2              | 2              | 1              | 2              | 1              | .              | 1              | 3              | .              | 1              | 3              | 1            | .              | 4                 | 1 | 2     | .                                       | 1       | 1           | 1           | 1                            | 1                            | 1  | 1   | 1  | 20  | 7   | 27 |
| A15-A16(3) | 012.00-80 | Other resp TB, without mention of bact or histo confirmation | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 2                            | 2                            | 26 | 21  | 27 |     |     |    |
| A17.0      | 013.0     | Tuberculous meningitis                                       | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | 1                            | .                            | 1  | 1   | .  |     |     |    |
| A17.1-9    | 013.1-9   | Other TB of nervous system                                   | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | .                            | .                            | .  | .   | .  | .   | .   |    |
| A18.0-8    | 014-017.9 | TB of other specified organs                                 | .            | .            | .              | .              | .              | 1              | .              | 1              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | 1           | 1                            | 2                            | 2  | 2   | 33 | 21  | 31  |    |
| A19        | 018       | Miliary tuberculosis   | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | .                            | 1                            | .  | .   | .  | .   |     |    |
| A20        | 020       | Plague   | .            | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                 | . | .     | .                                       | .       | .           | .           | .                            | .                            | .  | .   | .  | .   | .   |    |









# SERVICOS DE SAUDE, MACAU SAR, CHINA

## DOENCAS DE DECLARACAO OBRIGATORIA CASOS NOTIFICADOS POR SEXO E IDADE

### MACAU, Ano de 2013, 12

2014/01/08

| DOENCA     |           |   | CASOS POR GRUPO ETARIO |              |                |                |                |                |                |                |                |                |                |                |                |                |                |              |                | NO PERIODO CONSIDERADC |   |       | ACUMULADO ATE AO FIM DO PERIODO CONSIDERADO |        |       |                |        |    |                        |    |     |   |    |
|------------|-----------|---|------------------------|--------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|--------------|----------------|------------------------|---|-------|---|--------|-------|----------------|--------|----|------------------------|----|-----|---|----|
|            |           |   |                        |              |                |                |                |                |                |                |                |                |                |                |                |                |                |              |                | TOTAL DE CASOS         |   |       | MEDIA DOS ULT. 26 anos                      |        |       | TOTAL DE CASOS |        |    | MEDIA DOS ULT. 26 anos |    |     |   |    |
| CID 10     | CID 9     | NOME  | (0-4)<br>M F           | (5-9)<br>M F | (10-14)<br>M F | (15-19)<br>M F | (20-24)<br>M F | (25-29)<br>M F | (30-34)<br>M F | (35-39)<br>M F | (40-44)<br>M F | (45-49)<br>M F | (50-54)<br>M F | (55-59)<br>M F | (60-64)<br>M F | (65-69)<br>M F | (70-74)<br>M F | (>75)<br>M F | Ignored<br>M F | M                      | F | U MFU | 26 anos                                     | 5 anos | CASOS | 26 anos        | 5 anos |    |                        |    |     |   |    |
| A00        | 001       | Colera  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | .  |                        |    |     |   |    |
| A01.0      | 002.0     | Febre Tifoide   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | 1              | 8      | 1  |                        |    |     |   |    |
| A01.1-4    | 002.1-9   | Febre paratifoide   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | 2  |                        |    |     |   |    |
| A02.0-9    | 003.0-9   | Infeccao por Salmoneloses   | .                      | 1            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | 1              | .              | .              | .            | .              | .                      | . | .     | 2   | .      | 2     | 2              | 3      | 84 | 31                     | 60 |     |   |    |
| A03.0-9    | 004.0-9   | Shigelose   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | 1  |                        |    |     |   |    |
| A04.0-4    | 008.01-09 | Infeccao intestinal por E.coli  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | 2  |                        |    |     |   |    |
| A05.0-9    | 005.0-9   | Intoxicacao alimentar bacteriana  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | 4              | 1      | 92 | 34                     | 83 |     |   |    |
| A06.0      | 006.0     | Disenteria amebiana aguda   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | 1  |                        |    |     |   |    |
| A06.1-9    | 006.1-9   | Outras amebiases  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | .      | .  | 1                      |    |     |   |    |
| A08.0      | 008.61    | Enterite por rotavirus  | 33                     | 20           | 5              | 3              | .              | .              | .              | .              | 1              | .              | .              | 1              | .              | .              | 1              | .            | 1              | .                      | 1 | .     | 1   | .      | 1     | .              | 43     | 25 | 68                     |    |     |   |    |
| A08.1      | 008.63    | Gastroenteropatia aguda pelo agente de Norwalk  | .                      | 2            | 5              | 4              | 4              | 4              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | 10  | 10     | .     | 20             | 3      | 14 | 80                     | 44 | 189 |   |    |
| A08.4      | 008.8     | Infeccao intestinal devid a virus, NOS  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 2      | 5  | 1                      | 4  |     |   |    |
| A15-A16(1) | 010.00-04 | TB resp primaria, conf. por lab   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 1      | .  | 8                      | .  |     |   |    |
| A15-A16(2) | 011.00-06 | TB Pulmonar   | .                      | .            | .              | .              | 2              | .              | 2              | .              | 1              | 2              | 1              | .              | .              | 1              | 3              | .            | 1              | 3                      | 1 | .     | .   | 4      | 1     | 2              | 1      | 1  | 1                      | 1  | 20  | 7 | 27 |
| A15-A16(3) | 012.00-80 | Outras formas de TB das vias respiratorias, sem mencao de confirmacao bacteriologica ou histologica | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | 2      | 2  | 26                     | 21 | 27  |   |    |
| A17.0      | 013.0     | Tuberculose das meninges  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | .      | 1  | 1                      | .  |     |   |    |
| A17.1-9    | 013.1-9   | Outras Tuberculose de nervoso   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | .      | .  | .                      | .  |     |   |    |
| A18.0-8    | 014-017.9 | TB de outras orgaos   | .                      | .            | .              | .              | .              | 1              | .              | .              | 1              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | 1   | 1      | .     | 2              | 2      | 2  | 33                     | 21 | 31  |   |    |
| A19        | 018       | Tuberculose miliar  | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | .      | 1  | .                      |    |     |   |    |
| A20        | 020       | Peste   | .                      | .            | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .              | .            | .              | .                      | . | .     | .   | .      | .     | .              | .      | .  | .                      |    |     |   |    |







| 附注  | Observação  | Note   |
|---|---|--|
| <p>1) 包括 A15.7(原發性呼吸道結核病，經細菌學及/或組織學證實者)和 A16.7(原發性呼吸道結核病，未經細菌學或組織學證實者)</p> <p>2) 包括 A15.0 – A15.3(肺結核病，經細菌學及/或組織學證實者)及 A16.0-A16.2 (肺結核病，未經細菌學或組織學證實者)</p> <p>3) 包括 A15.4-A15.6, A15.8-A15.9 (其它呼吸道結核病，經細菌學和組織學證實者)及 A16.3-A16.5, A16.8 及 A16.9 (其它呼吸道結核病，未經細菌學和組織學證實者)</p> <p>4) 2005 年前包括所有化驗顯示丙型肝炎感染者。2005 年開始包括轉氨 升高且化驗顯示丙型肝炎感染者。</p> <p>5) 包括 1999 年及之前的報告中編碼為 (ICD-9) 279.5 及 279.6 的所有疾病，只含首次發現即為愛滋病的病例，不含在過去已申報為 HIV 而於本年度轉變成愛滋病的病例</p> <p>6) 2008 年 7 月 30 日傳染病強制申報機制行政法規生效</p> <p>7) 1999 年及之前的報告中編碼為(ICD-9): 795.8 。</p> <p>8) 本分類中不含已出現症狀的愛滋病病例</p> | <p>1) Inclui A15.7 (Tuberculose Respiratória Primária, com confirmação da bacteriológica e/ou histológica) e A16.7 (Tuberculose Respiratória Primária, sem confirmação da bacteriológica e/ou histológica).</p> <p>2) Inclui A15.0 – A15.3 (Tuberculose Pulmonar, com confirmação da bacteriológica e/ou histológica) e A16.0 – A16.2 (Tuberculose Pulmonar, sem confirmação da bacteriológica e histológica).</p> <p>3) Inclui A15.4 – A15.6, A15.8 – A15.9 (Outras Tuberculoses Respiratórias, com confirmação da bacteriológica e histológica) e A16.3 – A16.5, A16.8 – A16.9 (Outras Tuberculoses Respiratórias, sem confirmação da bacteriológica e histológica).</p> <p>4) . Antes de 2005, inclui todos casos com infecção de vírus C de hepatite. No início. Em 2005, apenas os casos comprovados laboratorialmente com infecção de vírus C de hepatite e com um acréscimo de nível de AST e ALT, são incluídos.</p> <p>5) Inclui todas as doenças codificadas como (CID-9)279.5 e 279.6 no relatório, de 1999 e anteriores. Apenas inclui os casos que foram confirmados pela primeira vez de SIDA e não inclui os casos declarados anteriormente de HIV e que este ano evoluíram para casos de SIDA.</p> <p>6) O Regulamento Administrativo sobre o Mecanismo de declaração obrigatória de doenças transmissíveis entra em vigor em 30 de Julho de 2008.</p> <p>7) Inclui os códigos (CID-9)795.8 apresentados no relatório, de 1999 e anteriores.</p> <p>8) Este tipo de classificação não inclui casos com de sintomas de SIDA.</p> | <p>1) Includes A15.7(Primary respiratory tuberculosis, confirmed bacteriologically and histologically) and A16.7 (Primary respiratory tuberculosis, without mention of bacteriological and histological confirmation)</p> <p>2) Includes A15.0 – A15.3(tuberculosis of lung, confirmed bacteriologically and histologically) and A16.0-A16.2 (without bacteriological and histological confirmation )</p> <p>3) Includes A15.4-A15.6, A15.8-A15.9 (Other respiratory tuberculosis, confirmed bacteriologically and histologically) and A16.3-A16.5, A16.8 and A16.9 (Other respiratory tuberculosis, without mention of bacteriological and histological confirmation)</p> <p>4) Up till 2004, includes all cases with evidence of hepatitis C virus infection. From 2005 onwards, includes only those cases with increased AST and ALT levels as well as laboratory evidence of hepatitis C virus infection are counted.</p> <p>5) Includes all diseases coded as (ICD-9) 279.5 and 279.6 in previous reports up till the one of 1999, which only encompasses the cases that are diagnosed as AIDS at first notification, those that were notified as HIV in previous years and progressed to AIDS this year are not counted.</p> <p>6) The administrative Regulation on the Mechanism of Infectious Disease of Compulsory Declaration Came into Effect on 30 July 2008.</p> <p>7) Coded as (ICD-9) 795.8 in previous reports up till the one of 1999.</p> <p>8) This classification does not include cases with AIDS symptoms.</p> |