

# WHO Surveillance Programme for Control of Foodborne Infections and Intoxications in Europe 7th Report



### **BOSNIA and HERZEGOVINA (BIH)**

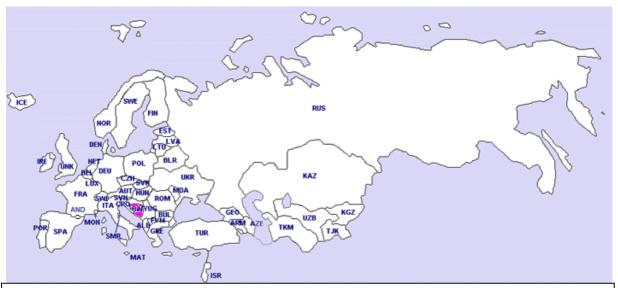
PROVISIONAL DATA

### I. Federation of Bosnia and Herzegovina (BA/FBIH)

Population: 2.2 million

### II. Republic of Srpsca (BA/RS)

Population: 1.4 million



The designations and the presentation of material on this map of the Member States of the WHO European Region (as at 31 July 1997) do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines represent approximate border lines for which there may not yet be full agreement.

#### 1. General information

### I. Federation of Bosnia and Herzegovina (BA/FBIH)

All cases and outbreaks of communicable diseases are reported to the "Cantonal Institutes for Public Health" after investigation of every case. There are 10 "Cantonal Institutes for Public Health" in the Federation of Bosnia and Herzegovina. The Reports on communicable diseases are summarized in the Federal Public Health Institute.

### II. Republic of Srpsca (BA/RS)

Republic of Srpsca has created the Department of Hygiene and Epidemiology at the Public Health Institute Republic of Srpsca. This Department is responsible for the prevention and control of communicable diseases including surveillance foodborne infections and intoxications at the entity level. The Department reports to the Main Sanitary Inspection of the entity Ministry of Health. In the six Regional Public Health Institutes there have been created Departments only for Hygiene or only for Epidemiology. The Community Sanitary Inspection is responsible at the local level. The flow of information goes in two directions at more than one level. For example:

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- From the Ministry of Health to the Public Health Institute
- From the Community Sanitary Inspection to the Public Health Institute
- From the General Practitioner to the Public Health Institute

The Public Health Institute has a very important role. Medical doctors are obliged to register every case of Communicable disease in a special book and to send a written announcement to the Public Health Institute-Department of Epidemiological. Every case of notifiable disease is epidemiologically investigated by a sanitary inspector or by an epidemiologist from the epidemiological department of the Public Health Institute (PHI). All informations are sent weekly from the Primary Health Sector to the Epidemiological Department at the PHI. From that department the information is sent to the epidemiological department- Main sanitary inspector in the Ministry of Health. The latter receives detailed and revised data (number, morbidity, mortality and case fatality ratios) of every communicable disease by regions on a monthly, quarterly and semi-annual basis. All these data are compared with the same data of the previous years.

Foodborne disease outbreaks are investigated by PHI and Veterinary Institute. Strains isolated from humans and foods are sent for confirmation to the National Laboratories (Chemistry laboratory and microbiological) of the PHI and animal strains to the laboratories of the Veterinary Institute.

In the event of major outbreaks, the Ministry of Health sends consultants for closer investigation. The Hygiene and Epidemiological Inspectorate should inform the Ministry by telephone and telex at the onset of an outbreak, give periodically information during the outbreak and to prepare a summary report at the end. Legislative regulations of common use are the Law for health, food control and nutrition.

#### 2. Statutory notification

Table BA/FBIH 1

#### **Notified cases of foodborne diseases** BOSNIA and HERZEGOVINA/FBIH 1995 – 1998

Disease	1995	1996	1997	1998
Salmonellosis	61	92	155	213
Incidence rate	2.8	4.2	7	9.7
Botulism	-	-	2	-
Brucellosis	-	-	1	-

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Table BA/RS 2

#### **Notified cases of foodborne diseases** BOSNIA and HERZEGOVINA/ RS 1993 – 1998

Disease	1993	1994	1995	1996	1997	1998
Salmonellosis	86	92	70	61	83	136
Incidence rate	6.1	6.6	5.0	4.4	5.9	9.7
Staphylococcosis	12	87	36	24	67	34
Incidence rate	0.9	6.2	2.6	1.7	4.8	2.4
Botulism	0	6	0	0	0	6
Incidence rate	0.0	0.4	0.0	0.0	0.0	0.4
Shigellosis	25	279	134	178	17	27
Incidence rate	1.8	19.9	9.6	12.7	1.2	1.9
E.coli enteritis	1760	1623	2215	2843	2538	2462
Incidence rate	125.7	115.9	158.2	203.1	181.3	175.9
Other bacterial foodborne	233	164	89	180	95	282
infections and intoxications						
Incidence rate	16.6	11.7	6.4	12.9	6.8	20.1
Hepatitis A	432	410	548	202	125	68
Incidence rate	30.9	29.3	39.1	14.4	8.9	4.9
Echinococcosis	0	1	1	3	2	3
Incidence rate	0.0	0.1	0.1	0.2	0.1	0.2
Trichinellosis	20	110	190	277	224	286
Incidence rate	1.4	7.9	13.6	19.8	16.0	20.4
Giardiasis	0	0	0	4	0	0

Figure BA/FBIH 1

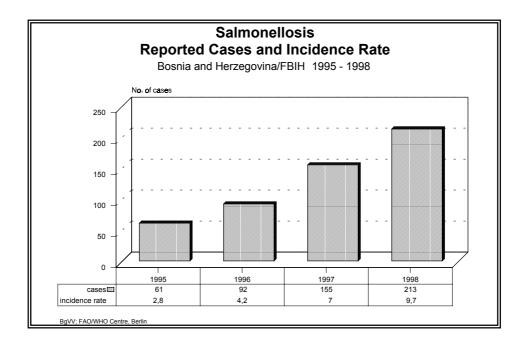
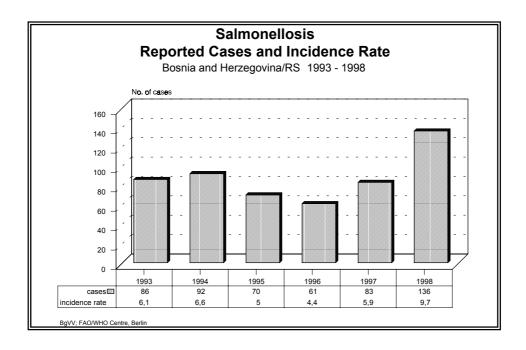


Figure BA /RS 2



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#### 3. Epidemiologically investigated incidents

Table BA/FBIH 3

# Foodborne disease outbreaks by causative agent incriminated food and place of consumption

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Causative agent	Incriminated food	Place of consumption		
E.coli	beans	restaurant		
S.Enteritidis	NA	NA		
Streptococcus	sausage	restaurant		
Trichinella	pork	home		

#### Table BA/RS 4

# **Salmonella cases by serotypes**BOSNIA and HERZEGOVINA /RS 1993 - 1998

Serotype	1996	1997	1998	1996-1998
S. Enteritidis	10	16	44	70
S. Typhimurium	-	1	-	1
S. Infantis	-	2	-	2
S. Virchow	-	1	-	1