



# **Conference Paper**

# The Spread of Dengue Hemorrhagic Fever in the Kolaka Regency, Southeast Sulawesi, Indonesia

Pipit Musdhalifa<sup>1</sup>, Ramadhan Tosepu<sup>2\*</sup>, Devi Savitri Effendy<sup>2</sup>

<sup>1</sup>Student of Postgraduate Program of Public Health, University of Halu Oleo, Indonesia <sup>2</sup>Faculty of Public Health University of Halu Oleo, Southeast Sulawesi Province, Indonesia

### Abstract.

Dengue fever is one of the public health problems happening around the world, especially in tropical and subtropical countries. Dengue fever may cause death to children and adults, and it has become an endemic in some parts of Indonesia. This study used various data sources from the Indonesian Government. The dengue cases data was obtained from the Kolaka Regency Public Health Office in the period 2015-2020. The conclusion is that the dengue patients were mostly men, and this statistics decreases year by year. In the year of 2017 and 2019 the cases increased. Most patients are in the 17-29 years old age range.

Keywords: Dengue hemorrhagic fever, Kolaka Regency, Indonesia

Corresponding Author: Ramadhan Tosepu; email: ramadhan.tosepu@uho.ac.id

Published: 13 Sepetmber 2022

### Publishing services provided by Knowledge E

© Pipit Musdhalifa et al. This article is distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use and redistribution provided that the original author and source are credited.

Selection and Peer-review under the responsibility of the ICASI Conference Committee.

# 1. INTRODUCTION

Dengue Hemorrhagic Fever (DHF) is an arbovirus disease transmitted by AedesAegypti and Ae. Albopictus. The Global Burden of Disease research revealed that during the period 2000-2013. DHF isincrease as the highest problems than other infectious diseases, which was 400%. [1] The disease spreads out to more than 100 countries, placing a huge burden on society and health care systems in tropical and sub-tropical regions. [2] It is estimated that there are 390 million dengue virus infections happens annually with 96 million severe cases worldwide. It was reported as increased sixfold from 2010 (<0.5 million) to 2016 (>3.34 million). Most of these cases were from three World Health Organization (WHO) regions, including Southeast Asia, the Western Pacific and the Americas. [3] Dengue has also been reported to be a health problem for the Indonesia people for the last 45 years. This disease has spread in 433 of 497 districts/cities in Indonesia.[4]

Southeast Sulawesi Province is one of DHF endemic province in Indonesia. [6] One of them is the Kolaka Regency where cases fluctuate year by year. In Kolaka Regency there was a decrease cases which is a 5-year cycle, it happen in the year 2015 as many

**□** OPEN ACCESS

as 761 cases to 753 cases in the year 2016, 243 cases in the year 2017, 213 cases in the year 2018 and in 2019. There was an increase to 250 cases and then decreased in 2020 to 60 cases. If the number of dengue cases in Kolaka is calculated, there has been a very significant decline. There was improving in the year 2019 and fairly low decline in the year 2020. This year DHF cases declined to 60 cases with an *Incidence Rate* of 22.4 per 100.000 population.

However, environmental conditions related to the exixtence of dengue vectors in Kolaka. The condition happen almost all areas in Kolaka Regency that may malaria transmission to occur. The causing factor of disease involves three aspects, namely the host, agent, and environment. The host in this case is humans who are sensitive to dengue virus infection. The causative agent of DHF is dengue virus from the genus Flavivirus (Arbovirus Group B) one of the Genus FamiliaTogaviradae. Geographical location, season, and environment are affects the incidence of dengue disease.

There are 12 sub-districts in Kolaka Regency and the most DHF sufferers is Kolaka sub-district. The total cases of DHF in Kolaka Regency by now show the death rate due to dengue cases is zero or not yet. Preventive strategy has been done by the Kolaka Health Office to decline the spread of DHF such as abatesasai or sprinkling abate powder in water reservoirs, eradicating mosquito nests and carrying out draining, closing, and burying (3M Plus) movements. Fogging the areas where dengue patients are found has been done

# 2. METHODOLOGY

Kolaka Regency is located in the Southeast of Sulawesi Island which includes land and islands. SE Sulawesi has a land area of 3,283.64 km<sup>2</sup> and an estimated water/sea area of  $\pm 15,000$  km<sup>2</sup>. Kolaka Regency is the capital city of Kolaka+170 km south of Kendari City. It is located between 02°00' and 05°00' South Latitude (SL) and 120°45' and 124°06' East Longitude (EL)

This study used various data from the Indonesian government. Case data from DHF was obtained from the Kolaka Health Office from 2015-2020. Data were taken from the annual health fact sheet published by the Kolaka District Health Office. The result of the study is presented as follow:

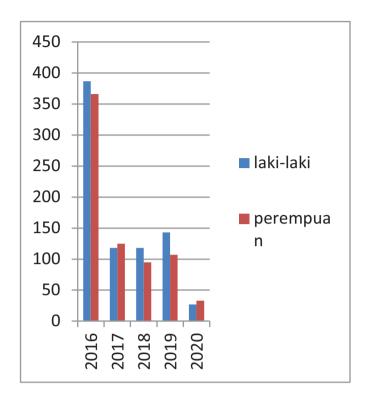


Figure 1: Number of DHF cases by gender in Kolaka Regency.

# 3. RESULT OF THE STUDY

The results showed that in year of 2016-2020 the distribution of DHF patients was more happen to men. In the year 2017 and 2020 DHF cases occurred in women. However, the frequency of sufferers from year by year is continuously to decline. It showed that the success of the government to overcome DHF in Kolaka Regency.

Based on the distribution of the incidence of DHF from year to year, the results of research show that DHF always fluctuate from year to year. In 2016 DHF cases tended to be high but in the following years, namely 2017 and 2018, it decreased significantly. The cases increase in the year 2019 but there was decline in 2020.

According to the Kolaka Regency data in 2016, 2019 and 2020 the highest DHF cases was in Kolaka District. In the year 2017 and 2018 the highest number was in Watubangga Regency.

# 4. DISCUSSION

The number of dengue cases in Kolaka is dominantly by male than the female. It is because Kolaka district's main livelihood is as a farmer. The male population group cultivates agricultural land. This condition cause them to get bitten by mosquitoes. Population

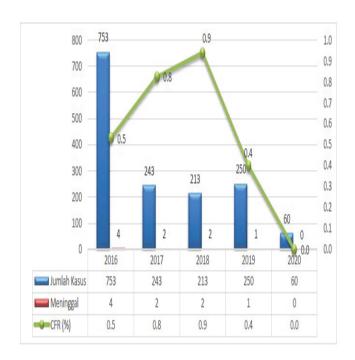


Figure 2: Number of DHF Cases per Year in Kolaka Regency.

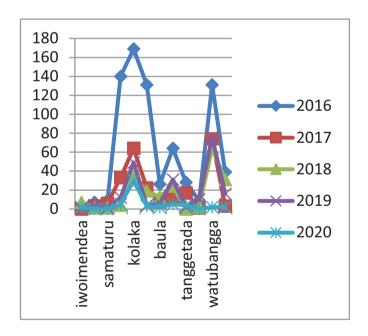


Figure 3: Number of DHF Cases by District in Kolaka Regency.

density in Kolaka Regency contributes to the DHF cases where from year by year the population increases. In addition, the geographical location cause dengue cases because most of Kolaka Regency is water (sea). The majority of those affected are people whom productive age, especially in the 17-29 year old.



### 5. CONCLUSION

The majority of DHF cases in Kolaka Regency are men that tend to decrease year by year. In the 2017 and 2019 there was an increase but not to be as same high as the previous year. The majority of DHF patients in Kolaka Regency are in the productive age namely 17-29 years old.

# References

- [1] WHO. (2019). Strong country capacity, Improved Tools and community engagement critical to enhancing dengue prevention and control.1-7
- [2] WHO. (2012). Strategi Global untuk Pencegahan dan Pengendalian Demam Berdarah, 2012–2020. Jenewa,.
- [3] Bhatt S, Geting PW, Brady OJ, Messina JP, Farlow AW, Moyes CL, dkk. (2013). Global distribusi dan beban dengue. Alam. 504-7.
- [4] Kementerian Kesehatan RI. (2018). Infodatin situasi demam berdarah dengue di Indonesia Tahun 2017.31, 1–8.
- [6] Upik Kesumawati, Hadi, F. S. (2020). Habitat Aedes aegypti dan Aedes albopictus sebagai Vektor Potensial Demam Berdarah Dengue di Kecamatan Ranomeeto Barat, Provinsi Sulawesi Tenggara. Diterbitkan oleh Loka Litbang Kesehatan Pangandaran. 12(2), 123 – 136.
- [6] Mistawati, M., Yasnani, Y., & Lestari, H. (2021). Forecasting prevalence of dengue hemorrhagic fever using ARIMA model in Sulawesi Tenggara Province, Indonesia. Public Health of Indonesia, 7(2), 75-86.
- [7] Tosepu, R. (2019). Dengue hemorrhagic fever in Konawe District, Southeast Sulawesi, Indonesia. Ethiopian Journal of Health Development, 33(3).
- [8] Ishak, N. I., & Kasman, K. (2018). The effect of climate factors for dengue hemorrhagic fever in Banjarmasin City, South Kalimantan Province, Indonesia, 2012-2016. Public Health of Indonesia, 4(3), 121-128.
- [9] Tosepu, R., Tantrakarnapa, K., Nakhapakorn, K., & Worakhunpiset, S. (2018). Climate variability and dengue hemorrhagic fever in Southeast Sulawesi Province, Indonesia. Environmental Science and Pollution Research, 25(15), 14944-14952.
- [10] Tosepu, R. (2017). Trends of dengue hemorrhagic fever in bau bau district, Southeast Sulawesi province, indonesia, 2009-2014. Public Health of Indonesia, 3(4), 147-151.
- [11] Alhamda, S. (2017). Relationships Of The Implementation Of A 3m Plus Program And The Existence Of Aedes Aegypti Larvae Towards The Number Of Dengue



Fever Cases In The Public Health Center Of Tigo Baleh Bukittinggi, West Sumatera, Indonesia. Public Health of Indonesia Alhamda S. Public Health of Indonesia, 3(3), 131-137.