

Reporting Criteria for Japanese encephalitis

(1) Definition

Acute encephalitis caused by Japanese encephalitis virus (JEV), a member of the family *Flaviviridae*. JEV is transmitted by *Culex tritaeniorhynchus* and other mosquitoes. Pigs are amplifying hosts.

(2) Clinical signs and symptoms

The incubation period is 1-2 weeks. Disease is characterized by sudden onset of fever and headache, which may be accompanied by general malaise, anorexia, nausea, vomiting or abdominal pain. Afterwards, condition deteriorates and the patient may develop stiff neck, photophobia, disturbance of consciousness, agitation, mask-like face, myotonia, head nerve paralysis, nystagmus, limb tremor, involuntary movement, ataxia, and/or pathological reflection. Sensory disturbance is rare. Fever reaches its peak 4-5 days after the disease onset and then declines. Case fatality among symptomatic patients is about 25%, and fifty percent of surviving patients have sequelae of the disease. Among fatal patients, death occurs about one week after disease onset.

(3) Reporting criteria

a) “Patients (confirmed cases)”

In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a patient with clinical signs or symptoms as described in (2), suspected Japanese encephalitis, and has made a diagnosis of Japanese encephalitis based on the results obtained by the laboratory method and specimen as described below, the physician shall notify the case immediately.

b) “Asymptomatic infections”

If a physician has examined a person without clinical characteristics listed in (2), but has diagnosed that the person was an asymptomatic carrier of JEV based on the results obtained by the laboratory method and specimen as described below, the physician shall notify the case immediately in compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law.

c) “Deceased person whose death was attributed to Japanese encephalitis”

In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a deceased person with clinical signs as described in (2), and, has diagnosed that the death was due to Japanese encephalitis based on the results obtained by the laboratory methods as described below, the physician shall notify the case immediately.

d) “Deceased person whose death was suspected to be due to Japanese encephalitis”

In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a deceased person with clinical signs as described in (2) and has suspected that the death was caused by Japanese encephalitis, the physician shall notify the case immediately.

Laboratory method	Specimen
Detection of the pathogen by isolation and identification	Blood, cerebrospinal fluid
Detection of the pathogen’s genome by PCR	
Detection of IgM antibody	Blood, cerebrospinal fluid
Detection of antibody by neutralization test, hemagglutination inhibition test, or complement fixation test (sero-conversion or significant increase in antibody titer using paired sera)	Serum