

# ASSESSING THE SENSITIVITY OF SURVEILLANCE FOR PNEUMONIA IN RURAL THAILAND

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**Abstract.** We conducted a household survey among Sa Kaeo residents to characterize self-reported health-seeking behavior for pneumonia and the proportion of individuals who seek care at a hospital to determine the coverage of a surveillance system. A 2-stage cluster sample was used to select households. A case of pneumonia was defined as a self-reported history of cough and difficulty breathing for at least 2 days or being given a diagnosis of pneumonia by a healthcare provider in the 12-month period beginning February 1, 2002, and ending January 31, 2003. Interviewers administered a structured questionnaire that asked about clinical illness and utilization of healthcare services. Among 1,600 households, 5,658 persons were surveyed, of whom 62 persons met the case definition. Of the 59 persons with complete data, 53 (90%, 95% CI: 79-96) sought medical care and 47 (80%, 95% CI: 67-89) sought care at a hospital facility in the province. Neither distance nor cost was reported as a barrier to seeking care. Most individuals with self-reported pneumonia sought care at the hospital level. Population-based surveillance can provide reliable estimates of hospitalized, chest radiograph-confirmed pneumonia in Sa Kaeo if adjustments are made to account for the proportion of individuals who access a hospital where radiologic assessment is available.

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