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**NATIONAL STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

GB 16007-2011

Replacing GB 16007-1995

Control of Kaschin-Beck disease areas

大骨节病病区控制

(English Translation)

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Foreword

All technical contents of this standard is mandatory.

This standard was drafted in accordance with GB/T 1.1-2009 given rules.

This standard replaces GB 16007-1995 "Kashin-Beck disease area control and examination and testing approaches." this standard and GB 16007-1995 "Kashin-Beck Disease Control and ward examination and testing approach" compared to the main changes are as follows.

--- Original name revised standard KBD ward control standards;

--- Remove the original standard 3.1 "no more than twice the past five years workup (including twice) Results significant difference" is defined;

--- X-ray positive rate control level is amended as $\leq 5.0\%$ positive rate by the X-ray $\leq 10.0\%$;

--- Clinical inspection object from the "7-year-old to 16 years old" to "7 years old to 12 years of age";

--- Delete the original standard "4 examination and testing approach";

--- Remove the original standards and "Appendix B sample survey sample selection rules" "A Kashin-Beck disease area control examination table appendix." this standard is proposed and administered by the People's Republic of China Ministry of Health.

This standard by the People's Republic of China Ministry of Health is responsible for interpretation.

This standard was drafted. Chinese Center for Disease Control and Prevention of Endemic Diseases Control Center, Inner Mongolia Autonomous Region Hulunbeier Institute of Endemic Disease Control the study, disease prevention and control center in Sichuan, Jilin Institute of Endemic Diseases Prevention second.

1 Scope

This standard specifies the KBD ward control targets.

This standard applies to KBD ward control situation assessment and acceptance of evaluation and control of the ward.

2 Normative references

The following documents for the application of this document is essential. For dated references, only the dated version suitable for use herein Member. For undated references, the latest edition (including any amendments) applies to this document.

WS/T 207 KBD diagnosis

3.1 Ward village (villages or villages) control targets

Ward village's condition have one of the following two indicators can be judged Ward village under control.

- a) a clinical examination of children age 7 to 12 years of age, screening rate > 95%, according to the WS/T 207 diagnosed cases of non I degree or above;
- b) X-ray examination for children age 7 to 12 years of age, screening rate > 95%, according to the WS/T 207 diagnostic, X-ray positive rate $\leq 5.0\%$, its the positive rate of bone ends $\leq 3.0\%$, and no phalangeal metaphyseal "" disease and "triad" cases.

3.2 Ward township (town) control targets

Township (town) under the jurisdiction of more than 95% of Ward village (villages or villages) to reach the village of ward control targets can be determined Ward Township under control.

3.3 Disease counties (cities, flag) control targets

Counties (cities, flags) under the jurisdiction of all ward and township (town) to achieve control targets rural wards, districts may determine disease under control.

3.4 Ward provinces (autonomous regions and municipalities) control targets

Provinces (autonomous regions and municipalities) counties under the jurisdiction of all disease (cities, flag) to achieve disease control targets counties, wards can determine the province under control.

3.5 National control targets

The country ward provinces (autonomous regions and municipalities) have reached the ward provincial control targets, may determine the country ward control.