Global
EWARS

Epidemiological Highlights

Week 2 (10-16 Jan 2022)

World Health Organization

Highlights: COVID-19

As of week 2, (10-16 Jan 2022) there were 3,319 confirmed cases of COVID-19 (SARS-CoV-2), out of 83,207 samples that had been submitted for testing. The total positivity rate now stands at 4.0%.

In the reporting week, two (2) new confirmed cases were detected out of 1,225 total samples tested. This translated to a 0.2% Test positivity Rate (TPR) which is a decline from 0.9% reported the previous week.

As of this week (week 2)
- Median age of tested and confirmed cases were 11 (0-120) and 21 (0-100) years respectively
- Proportion of females among tested and confirmed cases were 54% and 53% respectively
- All the 34 camps, have so far reported confirmed cases since the outbreak began, while the five camps with the highest number of reported cases were; C24-208, C3-202, C17-186, C2W-181, and C21-179.
- No new death was reported in this Epi week hence weekly case fatality ratio remains 0 for the past nine weeks
- Total confirmed COVID-19 deaths so far reported to date stands at 34 with the average case fatality ratio of 1.0%
- The weekly incidence was 2.3 cases/1 million population in this Epi week which is lower in comparison with the previous week.
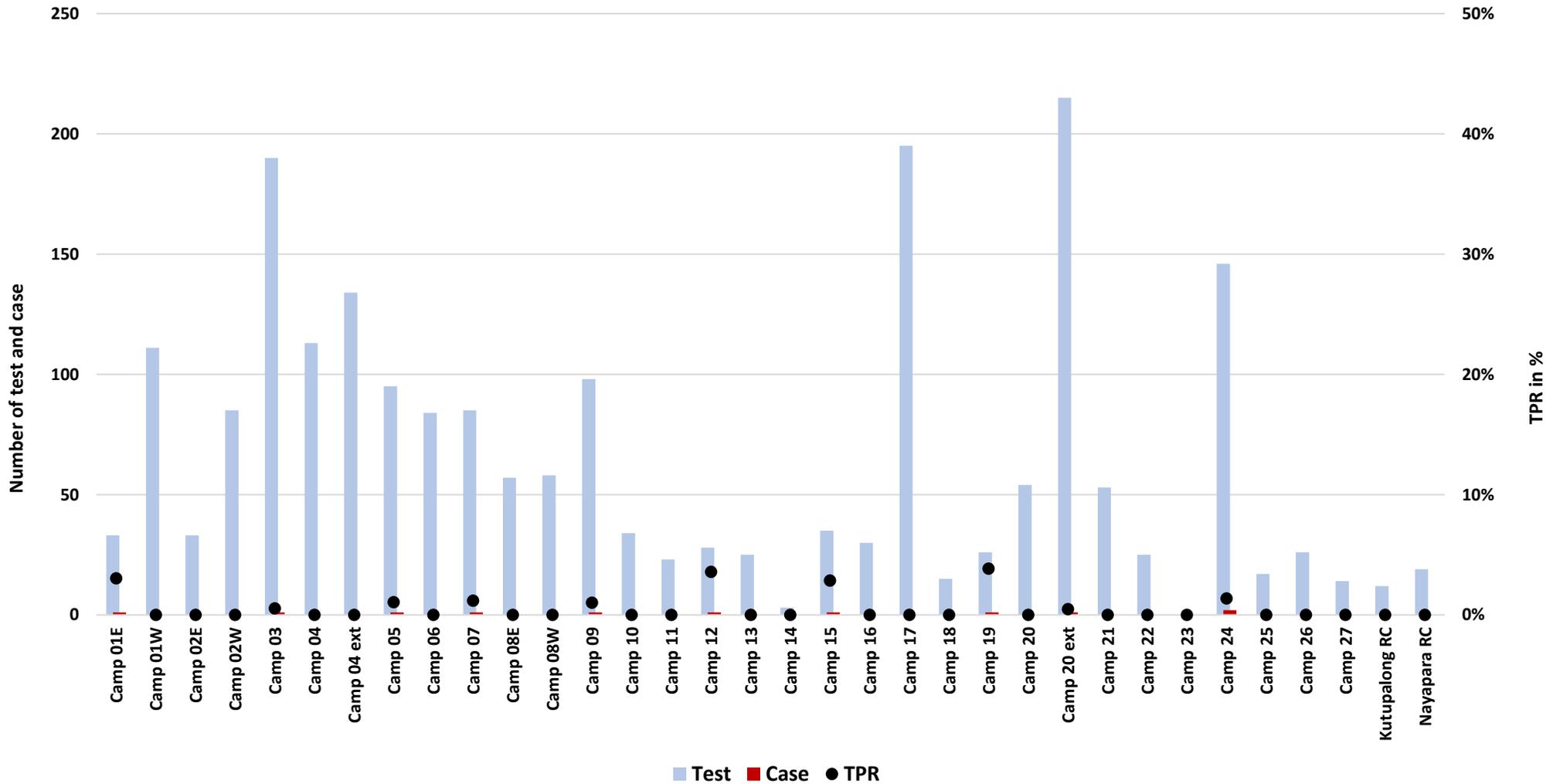
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Highlights: COVID-19

COVID-19 positive cases (n=3,319) by epidemiological week by date of test
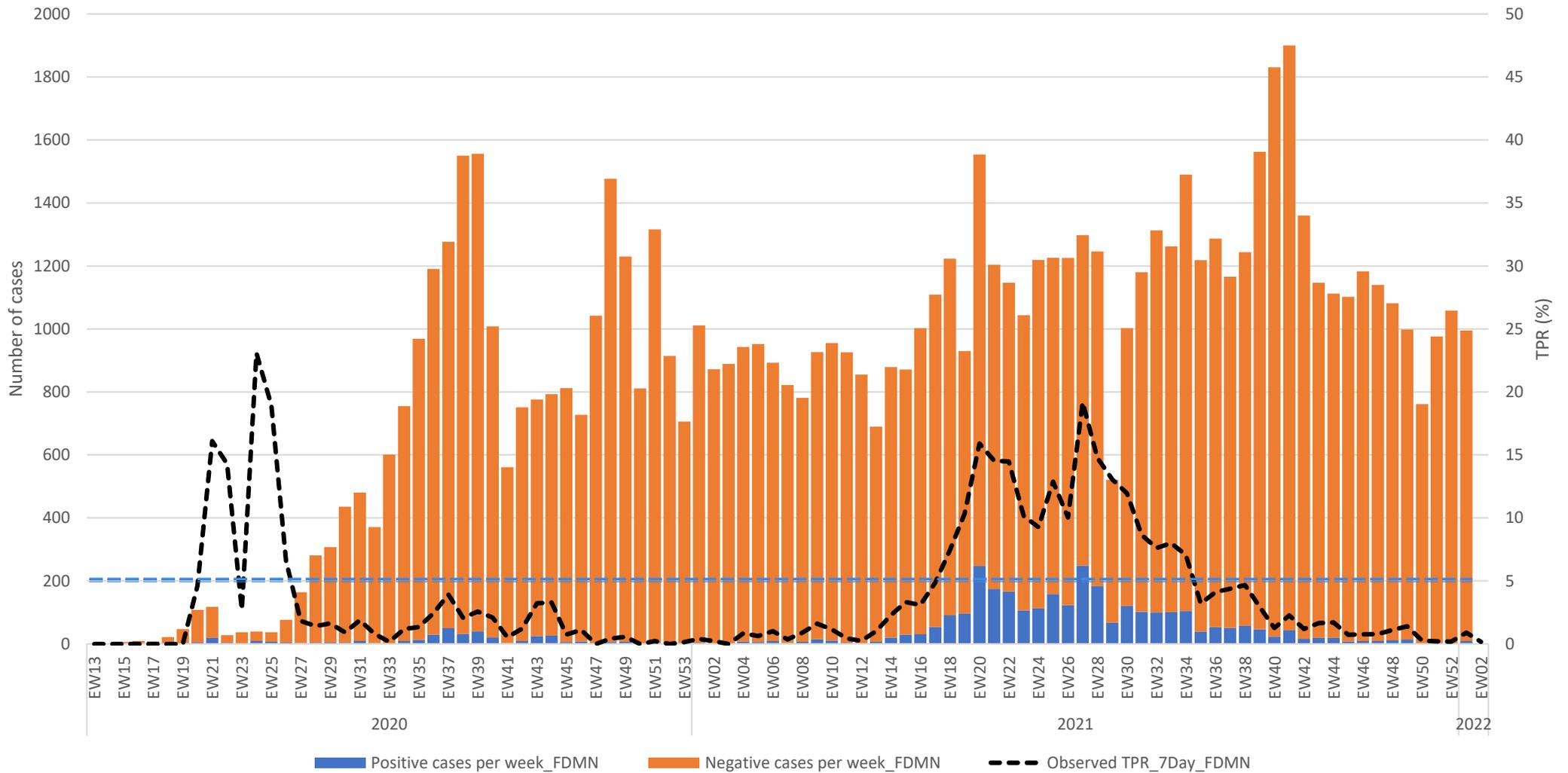
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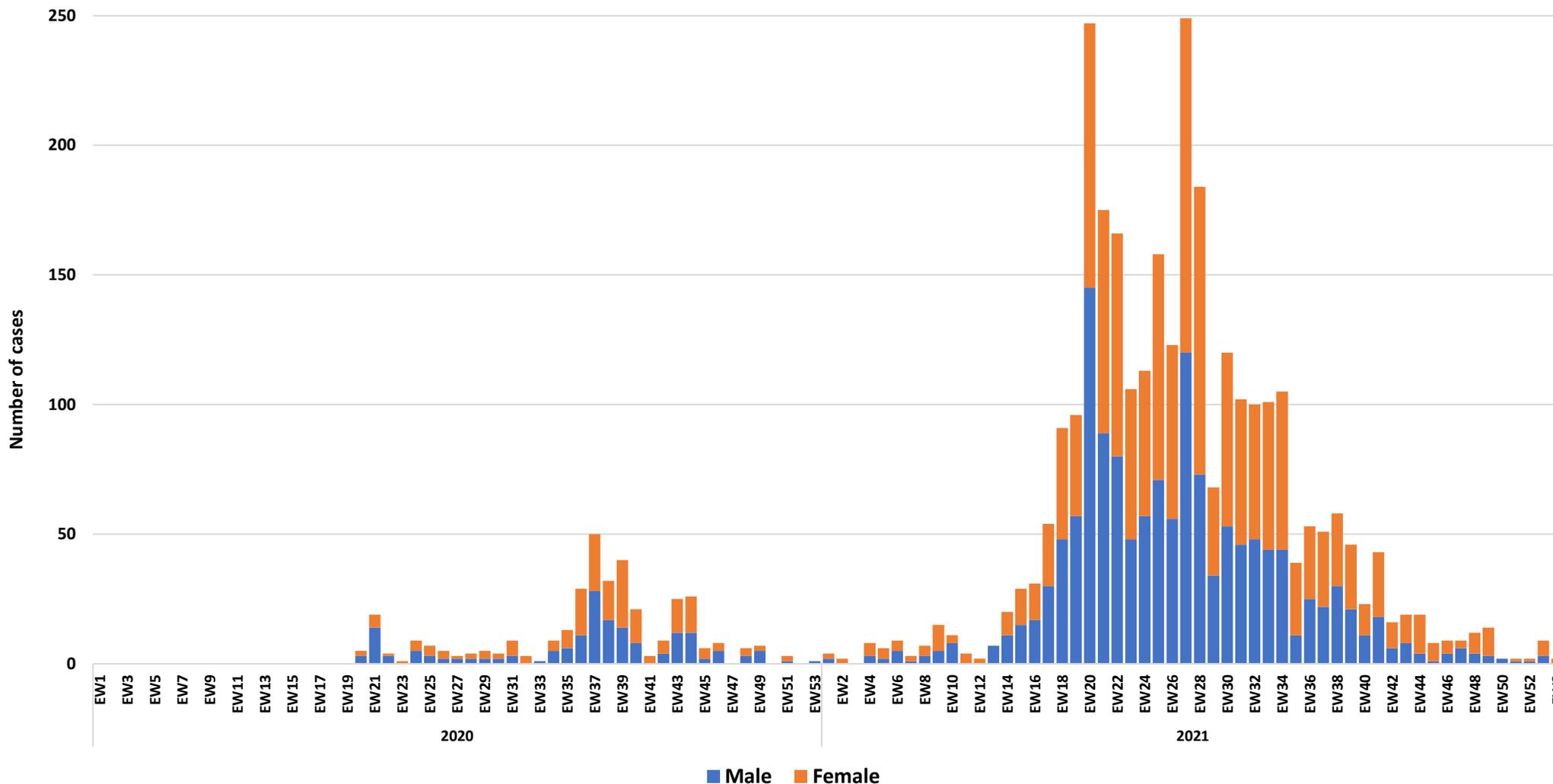
Highlights: COVID-19

COVID-19 test case and TPR per camp, WK_01-02

Epidemiological Highlights
Week 2, 2022

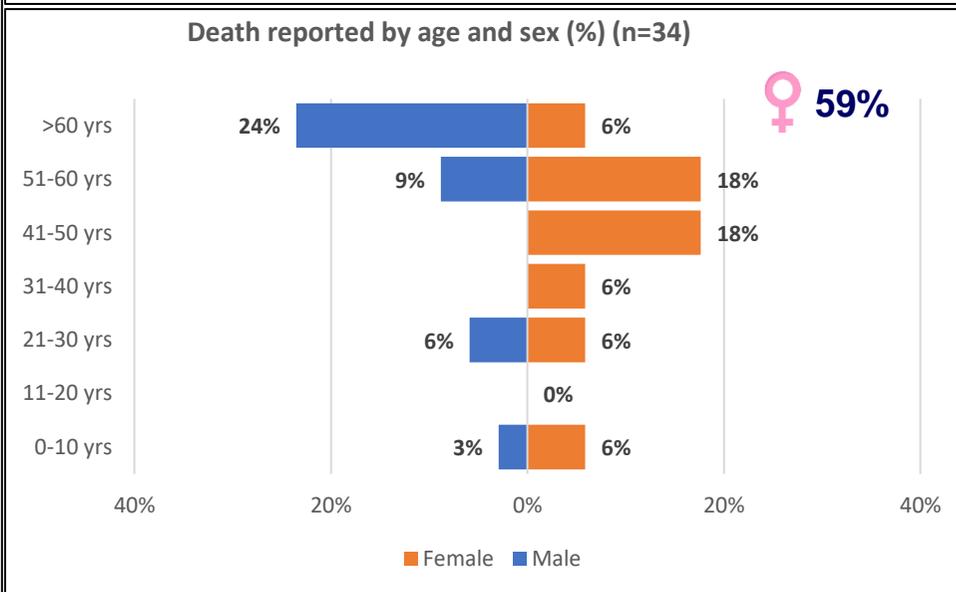Global EWARS

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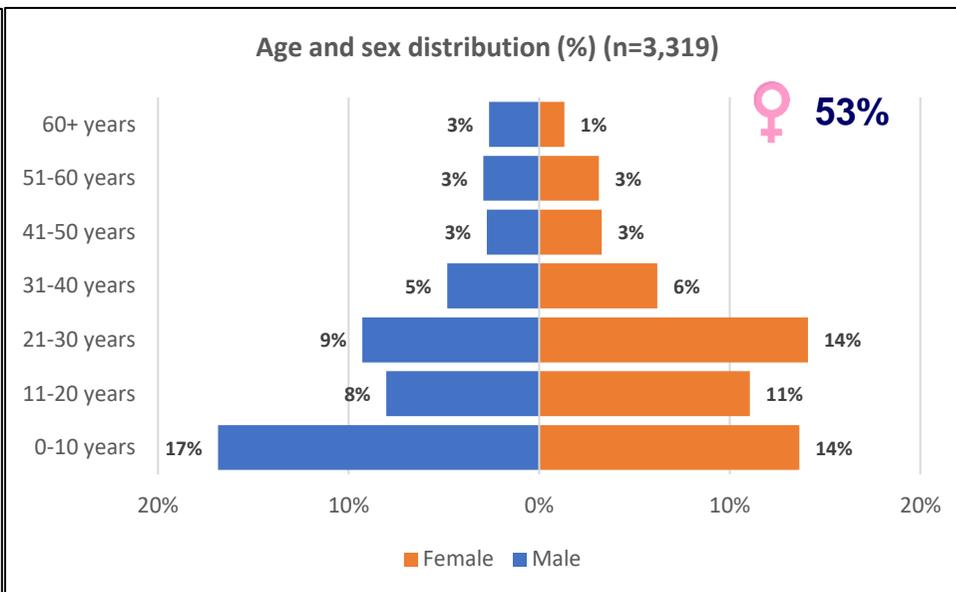# Highlights: COVID-19

Weekly observed TPR, FDMN/Rogingya Refugees, Cox's Bazar

Legend: Positive cases per week_FDMN · Negative cases per week_FDMN · Observed TPR_7Day_FDMN

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Highlights: COVID-19

COVID-19 Cases in Rohinga Camps(March 2020 - 16 January 2021)

3,319 (3,860/1 million pop) Confirmed cases

34 (40/1 million pop) Deaths

Number of cases
- 4 - 38
- 39 - 66
- 67 - 97
- 98 - 142
- 143 - 210

Number of Deaths
- 1
- 2
- 3
- 4

Age and sex distribution (%) (n=3,319)

♀ 53%

Age	Male	Female
60+ years	3%	1%
51-60 years	3%	3%
41-50 years	3%	3%
31-40 years	5%	6%
21-30 years	9%	14%
11-20 years	8%	11%
0-10 years	17%	14%

Female ■ Male

Death reported by age and sex (%) (n=34)

♀ 59%

Age	Male	Female
>60 yrs	24%	6%
51-60 yrs	9%	18%
41-50 yrs		18%
31-40 yrs		6%
21-30 yrs	6%	6%
11-20 yrs	0%	
0-10 yrs	3%	6%

Female ■ Male

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Highlights: COVID-19

Severity of reported cases at presentation (n=3,166)

Missing, 3.3%

Asymptomatic, 9.2%

Severe, 1.9%

Moderate, 5.4%

Mild, 80.2%
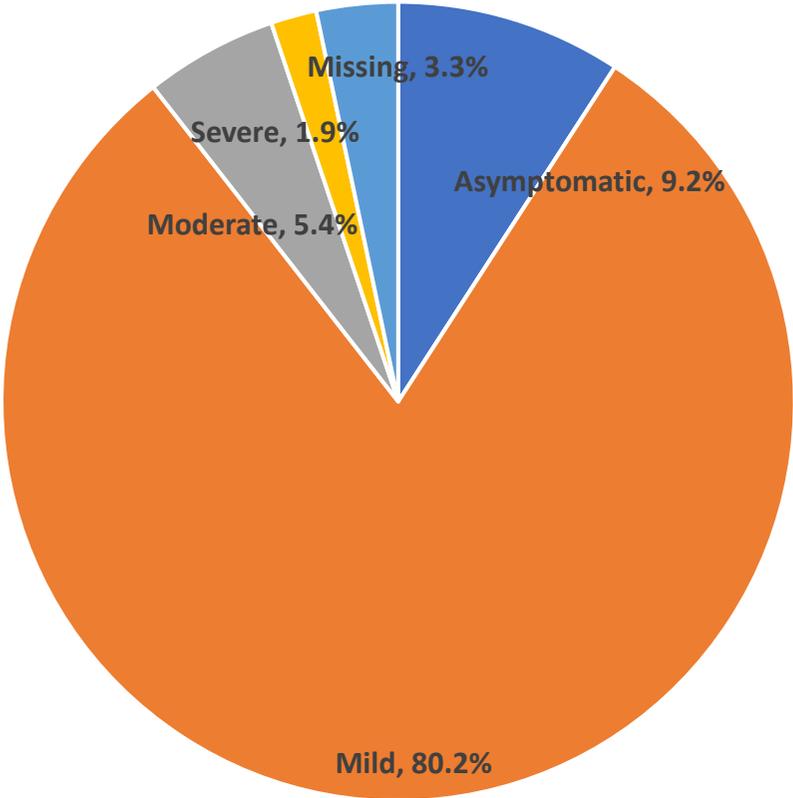
Did the case report at least 1 co-morbidity (n=3,166)

Yes 4.1%

No 95.9%

Source: Go.Data

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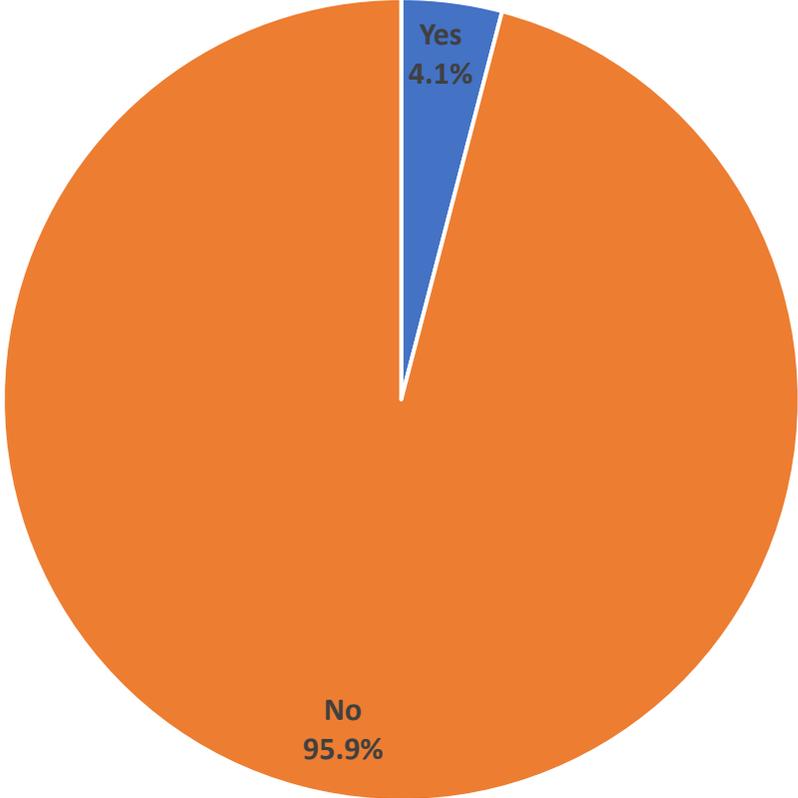
Highlights: COVID-19

- Total 3,166 (out of 3,319) of the confirmed cases have been investigated by the Rapid Investigation and Response Team(RIRTs)

- Contact tracing continues to be undertaken by CT supervisors with 9,429 (84%) contacts registered for follow-up in the Go.Data out of 11,280 total contacts so far identified during the field investigation.

- 7,212 (76%) contacts successfully accomplished the follow-up.

- 321 household contacts tested positive within the incubation period. This translates to 3.4% seroconversion rate based on contacts registered in go.data

Source: Go.Data

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EWARS Reporting Updates

- Currently, a total of 167 health facilities are registered in EWARS

  – Only 150/167 weekly reports were received on time in this reporting week

  – Timeliness of reporting for this week was 90%

  – Eighty-nine (89) alerts were triggered

  – All alerts were reviewed and verified by the WHO EWARS team; the number is less than that of the previous week (95 alerts in week 1, 2022).

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Highlights:

- Acute Respiratory Infections (18.0%), Diarrheal Diseases (4.1%) & Injury and wounds (1.8%) were the diseases and health conditions with the highest proportional morbidity in week 2.

- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020.

- This Epi week, there were two (2) suspected SARI death reported

Year	Suspected SARI death reported	# of Investigation conducted	Reclassified as probable COVID-19
2020	49	47	2
2021	96	89	15
2022	7	7	0

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Diphtheria Surveillance Updates

Two (2) confirmed and 4 suspected diphtheria case were reported in go.data in this Epi week

The last confirmed case was reported on 15 January 2022

In total 52 deaths have so far been reported since 2017, the last death reported on 5 November 2021

Classification	2017	2018	2019	2020	2021	2022
Confirmed	66	226	31	19	30	2
Probable	1154	1555	60	9	29	0
Suspected	1796	3549	523	198	118	10
Death	30	14	3	0	5	0

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Diphtheria Surveillance Updates

Total number of diphtheria case reported in EWARS from 2021- EW2, 2022

Legend: ■ Confirm ■ Probable ■ Suspected

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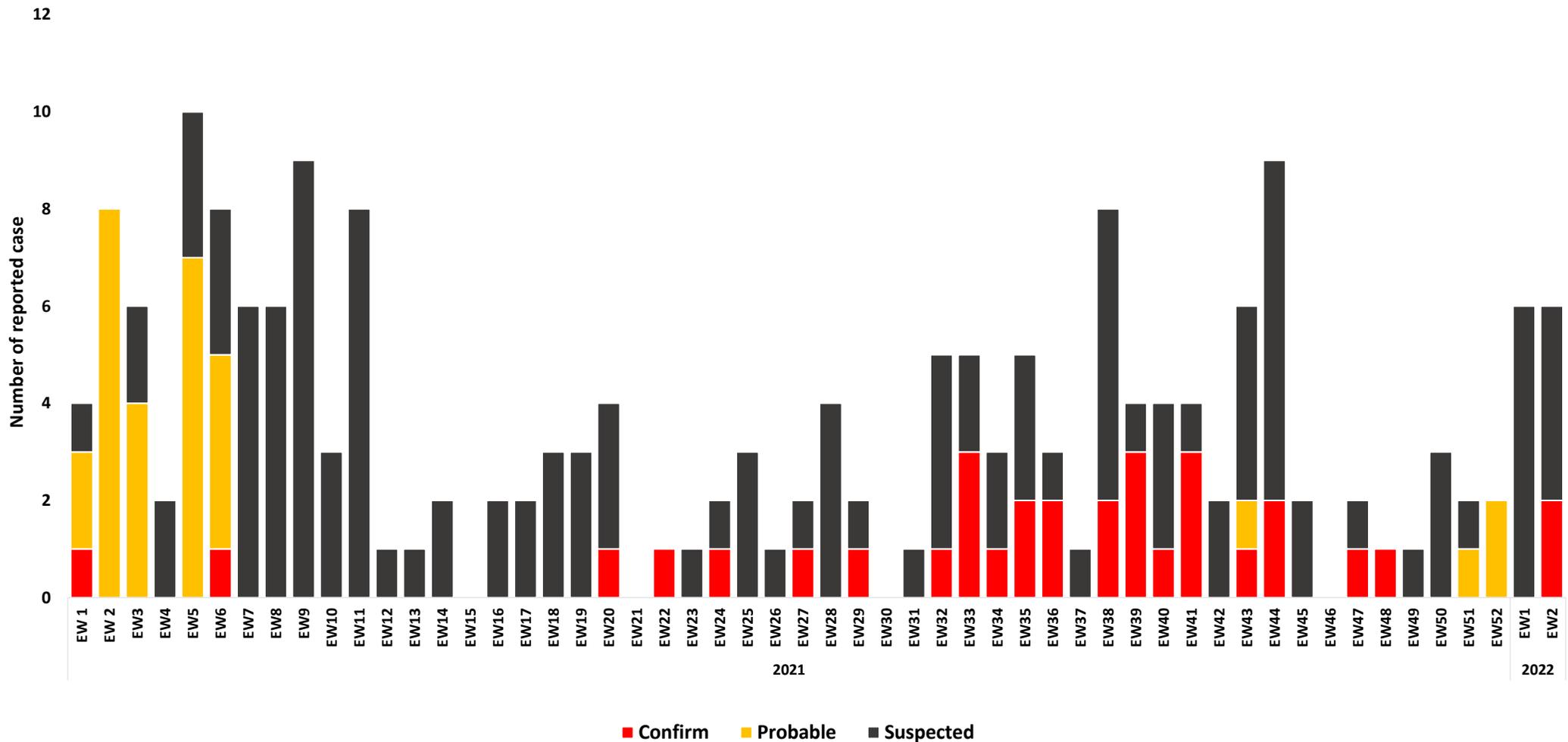
Dengue cases reported from 2021-2022 Epi, Week 2, 2022

| Year	Week/month			Cumulative	
	Month/Epi Week	Confirmed case	Death	Confirmed case	Cumulative Death
2021	Jan-Mar	1	0	1	0
	Apr-Jun	3	0	4	0
	Jul-Sep	6	0	10	0
	Oct-Dec	1,494	3	1,504	3
2022	W1 (3-9 Jan)	88	0	1,592	3
	W2 (11-17 Jan)	53	0	1,645	3

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Distribution of cases from 2021- Epi Week 2, 2022

Geographical distribution of Dengue confirmed cases (n=1,645)

CAMP	Cases
CAMP 3	265
KUTUPALONG RC	229
NAYAPARA RC	207
NATIONAL	178
CAMP 2E	139
CAMP 1E	135
CAMP 2W	98
CAMP 1W	87
CAMP 5	82
CAMP 7	46
CAMP 26	37
CAMP 6	34
CAMP 4	19
CAMP 8W	16
CAMP 27	16
CAMP 18	10
CAMP 17	8
CAMP 11	8
CAMP 24	6
CAMP 13	6
CAMP 8E	5
CAMP 12	3
CAMP 9	3
CAMP 14	2
CAMP 10	2
CAMP 20	2
CAMP 25	1

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- In this week, eight (8) RDT positive cases were reported, among samples sent for testing.

- In 2022 total of eleven (11)cholera cases were reported as of W2 2022. Of these 10 were negative and 1 awaiting laboratory confirmation.

- In 2020, a total of 28 RDT/Culture positive cases for Cholera were detected through sentinel testing. Specifically, 5 became confirmed by culture – 2 from Ukhiya Host, 1 from Teknaf host, and 2 from Refugees.
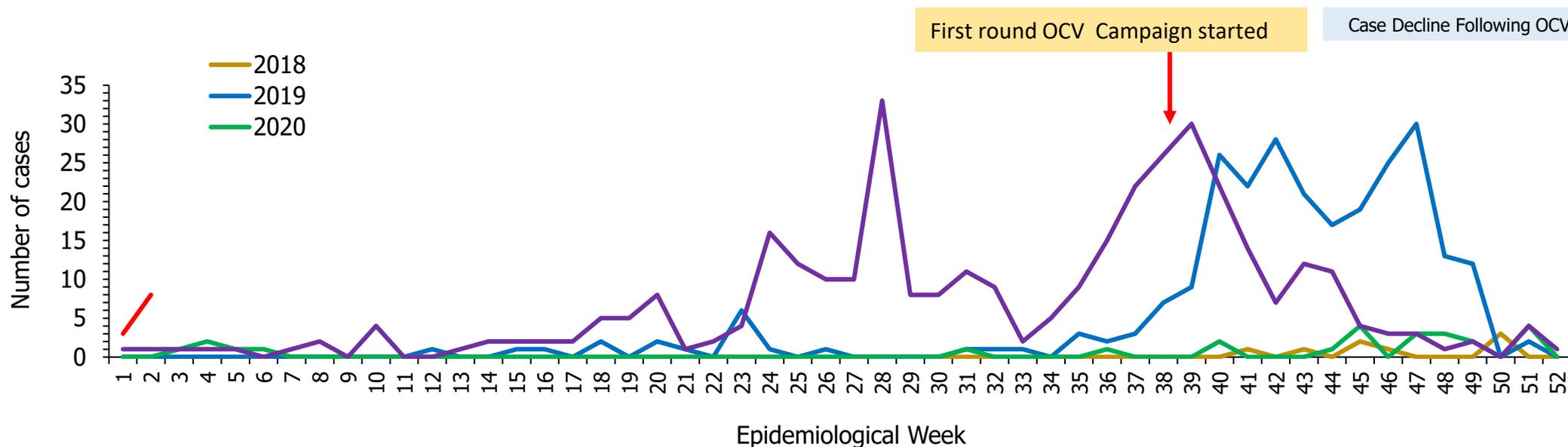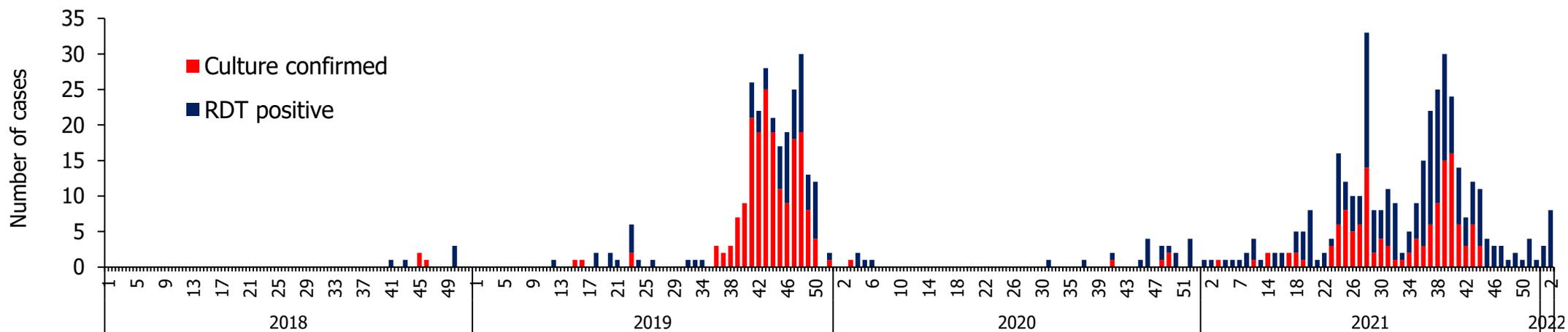

Distribution of RDT positive and culture confirmed for Cholera cases in FDMN 2021 to 2022
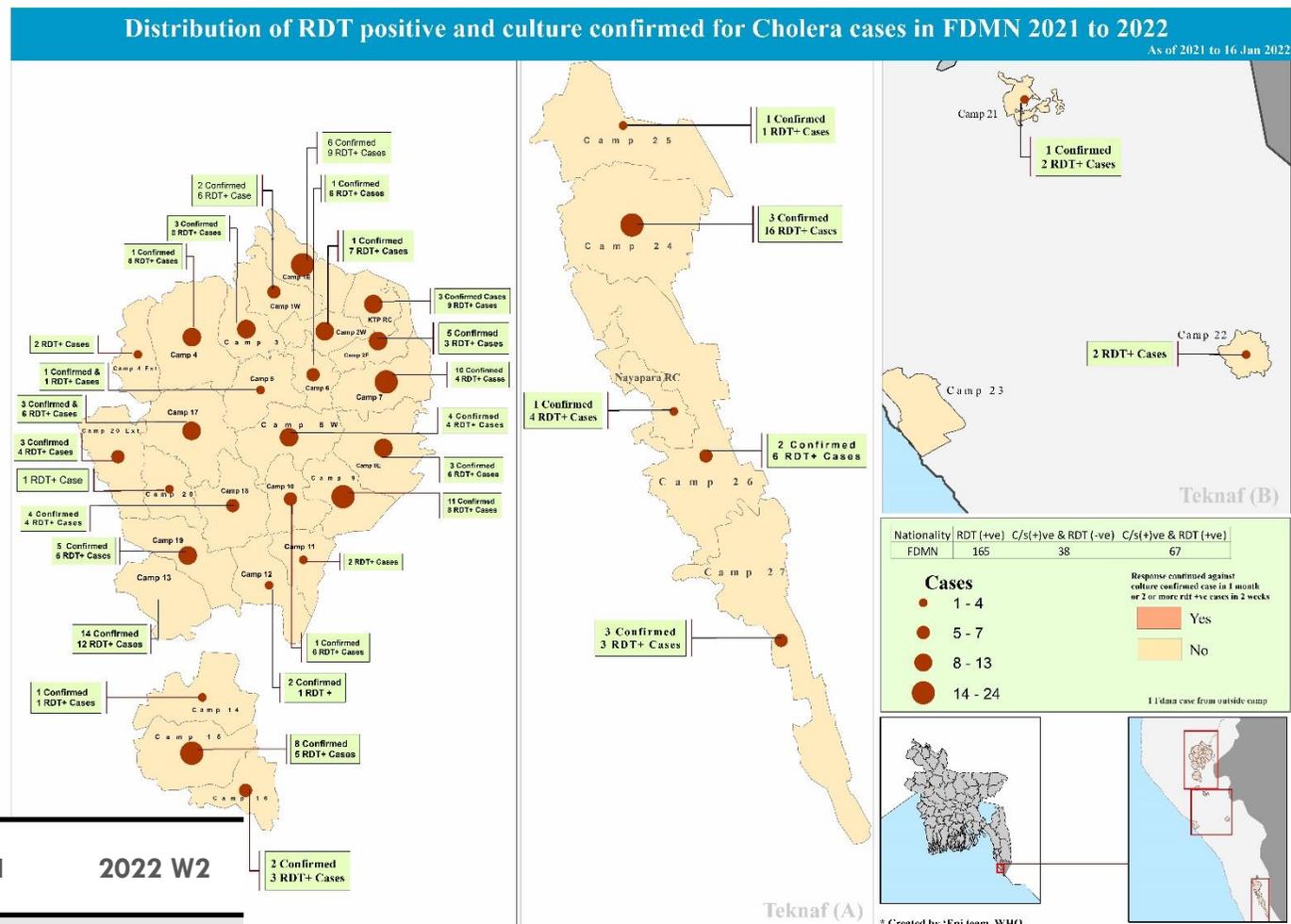
	2018	2019	2020	2021	2022 W2
RDT positive/culture confirmed for Cholera	49	258	28	357	11
Culture confirmed for Cholera	7	184	5*	136	0

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Epidemic curve of cholera, Cox's Bazar District, 2017-Epi Week 2,2022

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Week 2, 2022

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Measles Surveillance Updates

Total number of Measles case reported in EWARS from 2021- W2, 2022
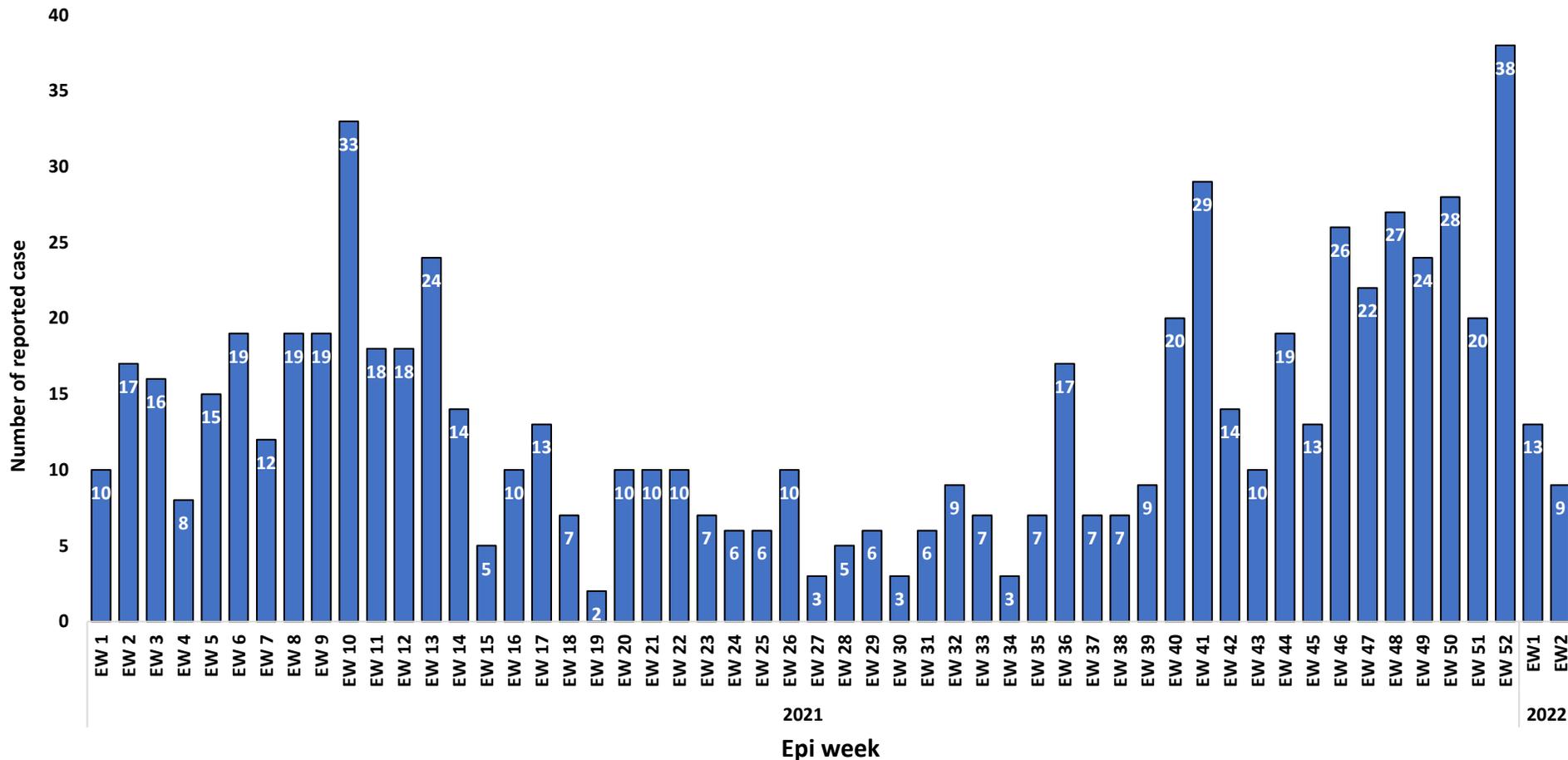
In week 2, 9 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 22 reported in 2022.
About 100% (22/22) of the total reported suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation
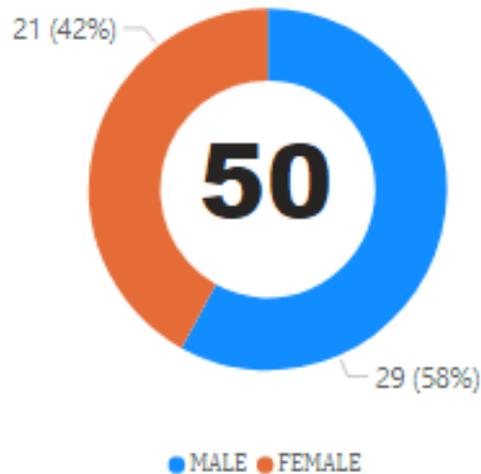
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Community-based Mortality surveillance Updates

Probable Cause of Death	Week 2	In 2022
Still Birth	7 (14%)	10 (11%)
Neonatal Death (<28 days old)	5 (10%)	7 (8%)
Infectious Disease	1 (2%)	2 (2%)
Severe Acute Respiratory Infection (SARI)	--	2 (5%)
Injury	--	--
Maternal Death	2 (4%)	4 (4%)
Acute Malnutrition	--	--
Other	35 (70%)	63 (70%)
Total	**50 (100%)**	**90 (100%)**

- Partners to report all mortalities into EWARS platform using both case and event-based reporting as applicable.
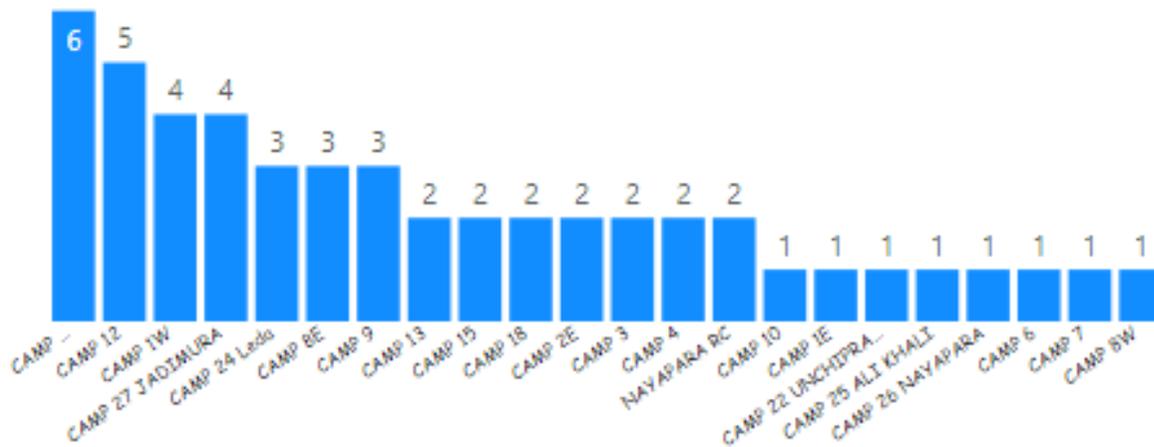
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Community-based Mortality Surveillance

Gender distribution

21 (42%)

50

29 (58%)

● MALE ● FEMALE

Place of death

1 (2%)

18 (36%)

31 (62%)

● HOME ● HEALTH FACILITY ● COMMUNITY/PUBLIC PLACE
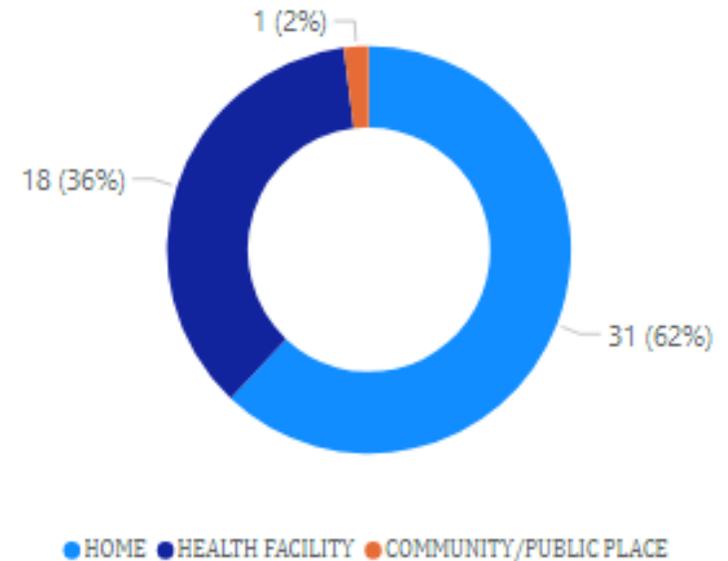
Distribution of deceased Camp

6 — CAMP
5 — CAMP 12
4 — CAMP 1W
4 — CAMP 27 3 ADIMURA
3 — CAMP 24 Leda
3 — CAMP 8E
3 — CAMP 9
2 — CAMP 13
2 — CAMP 15
2 — CAMP 18
2 — CAMP 2E
2 — CAMP 3
2 — CAMP 4
2 — NAYAPARA RC
1 — CAMP 10
1 — CAMP 1E
1 — CAMP 22 UNCHIPRA
1 — CAMP 25 ALI KHALI
1 — CAMP 26 NAYAPARA
1 — CAMP 6
1 — CAMP 7
1 — CAMP 8W

Distribution of Probable cause of death

35 — OTHER
7 — STILL BIRTH (BORN DEAD)
5 — NEONATAL (<28 DAYS OLD)
2 — MATERNAL DEATH
1 — INFECTIOUS DISEASE

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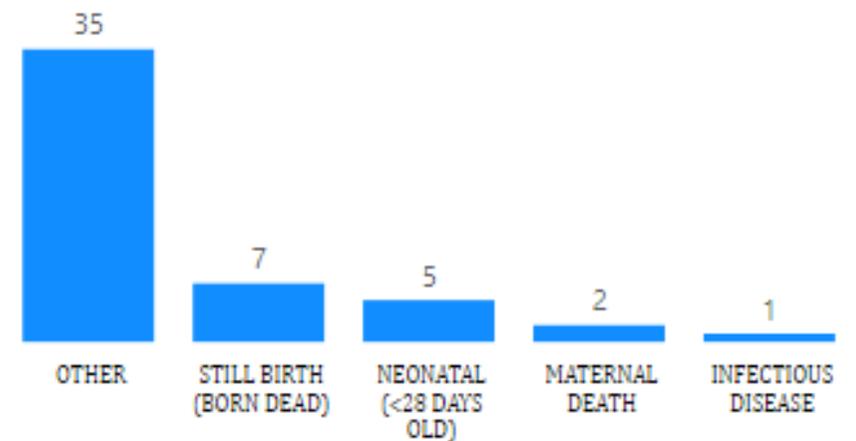
Bangladesh

Rohingya Emergency Response

Early Warning, Alert and Response System (EWARS)

Epidemiological Bulletin W2 2022

Ministry of Health and Family Welfare Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR

Contents

Highlights

Early Warning

Alert

Sources of data

1. Weekly EWARS Reporting Form
2. Mortality Case Report Form
3. Event-based Surveillance Form

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Highlights W2 2022

Table 1 | Coverage

#	%	
866,457	-	Estimated total Rohingya population[1]
868,096	100%	Total population under surveillance
175	-	Total number of health facilities
167	95%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

W2	Cumulative (2022)	
150	470	Number of weekly reports received
90%	93%	Completeness
90%	90%	Timeliness

Table 3 Alert performance indicators

W2	Cumulative (2022)	
89	286	Total alerts raised
100%	100%	% verified
0%	0%	% auto-discarded
0%	0%	% undergoing risk assessment
0%	0%	% completed risk assessment

[1] Source: UNHCR. Bangladesh: Joint Goverment of Bangladesh- UNHCR Population Factsheet. 31 December 2020.

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Map 1a | Ukhia completeness by camp

1 Camp 10
2 Camp 11
3 Camp 12
4 Camp 13
5 Camp 14
6 Camp 15
7 Camp 16
8 Camp 17
9 Camp 18
10 Camp 19
11 Camp 1E
12 Camp 1W
13 Camp 20 Ext
14 Camp 20
15 Camp 2E
16 Camp 2W
17 Camp 3
18 Camp 4 Ext
19 Camp 4
20 Camp 5
21 Camp 6
22 Camp 7
23 Camp 8E
24 Camp 8W
25 Camp 9
26 Kutupalong RC
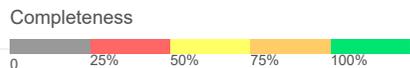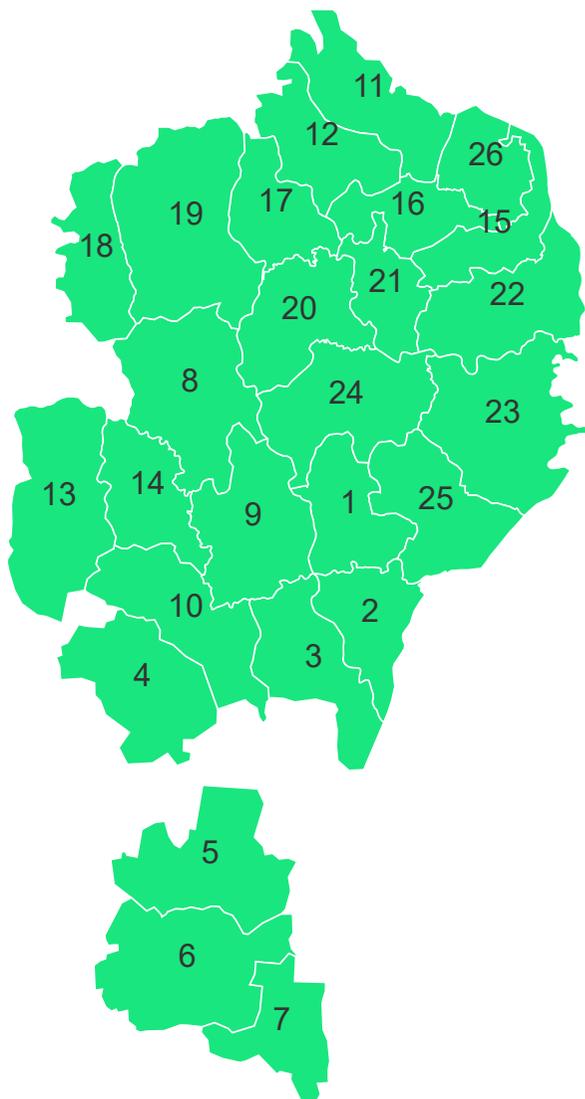
Map 1b | Teknaf completeness by camp

1 Camp 21 Chakmarkul
2 Camp 22 Unchiprang
3 Camp 23 Shamlapur
4 Camp 24 Leda
5 Camp 25 Ali Khali
6 Camp 26 Nayapara
7 Camp 27 Jadimura
8 Nayapara RC

Completeness
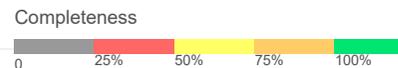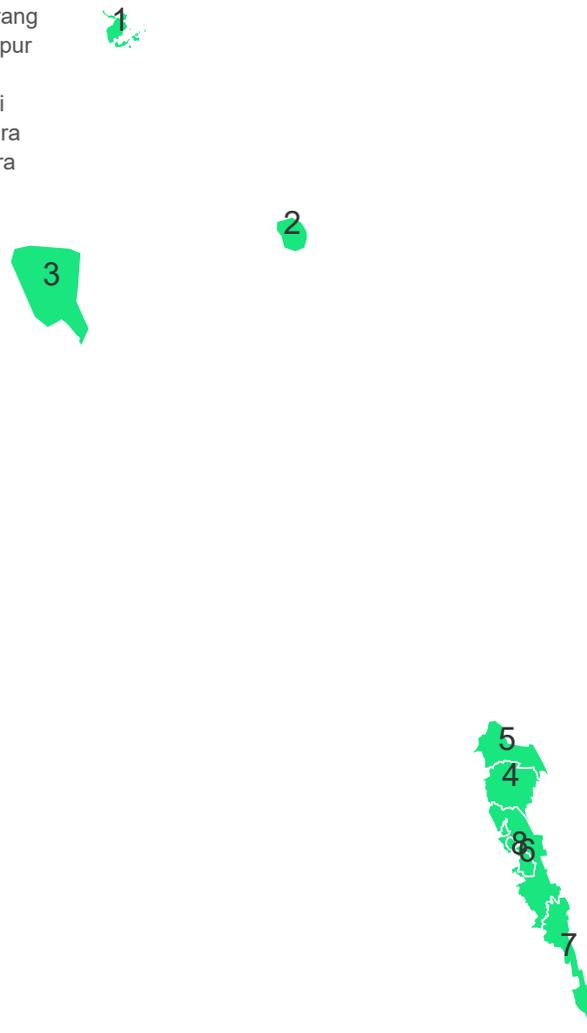
0   25%   50%   75%   100%

Completeness

0   25%   50%   75%   100%

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HEALTH SECTOR COX'S BAZAR

Table 4 | Performance by camp (W2 2022)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
	Ukhia Northern Group			
Camp 1E	4	4	100%	100%
Camp 1W	5	5	100%	100%
Camp 2E	3	3	100%	100%
Camp 2W	3	3	100%	100%
Camp 3	6	6	100%	100%
Camp 4	5	5	100%	100%
Camp 4 Ext	1	1	100%	100%
Camp 5	5	5	100%	100%
Camp 6	2	2	100%	100%
Camp 7	5	5	100%	100%
Camp 8E	7	7	100%	100%
Camp 8W	4	4	100%	100%
Kutupalong RC	2	2	100%	100%

Map 2 | Completeness by camp

1 Camp 1E
2 Camp 1W
3 Camp 2E
4 Camp 2W
5 Camp 3
6 Camp 4 Ext
7 Camp 4
8 Camp 5
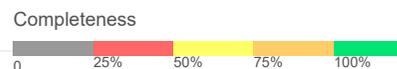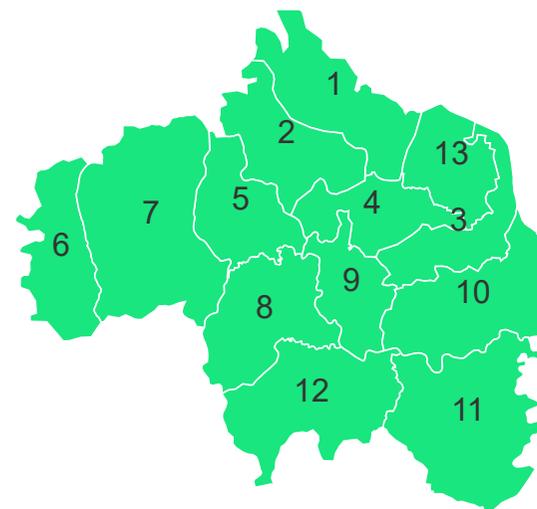9 Camp 6
10 Camp 7
11 Camp 8E
12 Camp 8W
13 Kutupalong RC

Completeness

0   25%   50%   75%   100%

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HEALTH SECTOR COX'S BAZAR

Table 5 | Performance by camp (W2 2022)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
	Ukhia Southern Group			
Camp 10	4	4	100%	100%
Camp 11	7	7	100%	100%
Camp 12	6	6	100%	100%
Camp 13	10	9	90%	90%
Camp 14	7	6	86%	86%
Camp 15	9	6	67%	67%
Camp 16	7	7	100%	100%
Camp 17	5	5	100%	100%
Camp 18	5	5	100%	100%
Camp 19	5	5	100%	100%
Camp 20	3	3	100%	100%
Camp 20 Ext	3	2	67%	67%
Camp 9	6	5	83%	83%

Map 3 | Completeness by camp

1 Camp 10
2 Camp 11
3 Camp 12
4 Camp 13
5 Camp 14
6 Camp 15
7 Camp 16
8 Camp 17
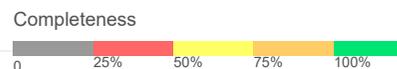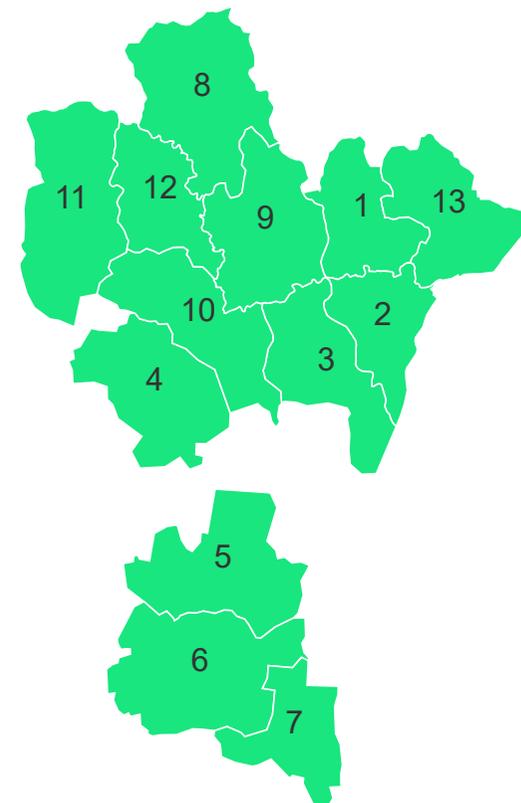9 Camp 18
10 Camp 19
11 Camp 20 Ext
12 Camp 20
13 Camp 9

Completeness

0   25%   50%   75%   100%

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Table 6 | Performance by camp (W2 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
		Ukhia Teknaf		
Camp 21 Chakmarkul	4	4	100%	100%
Camp 22 Unchiprang	5	3	60%	60%
Camp 23 Shamlapur	3	1	33%	33%
Camp 24 Leda	1	1	100%	100%
Camp 25 Ali Khali	3	2	67%	67%
Camp 26 Nayapara	4	3	75%	75%
Camp 27 Jadimura	2	2	100%	100%
Nayapara RC	2	2	100%	100%

Map 4 | Completeness by camp

1 Camp 21 Chakmarkul
2 Camp 22 Unchiprang
3 Camp 23 Shamlapur
4 Camp 24 Leda
5 Camp 25 Ali Khali
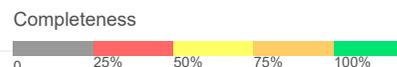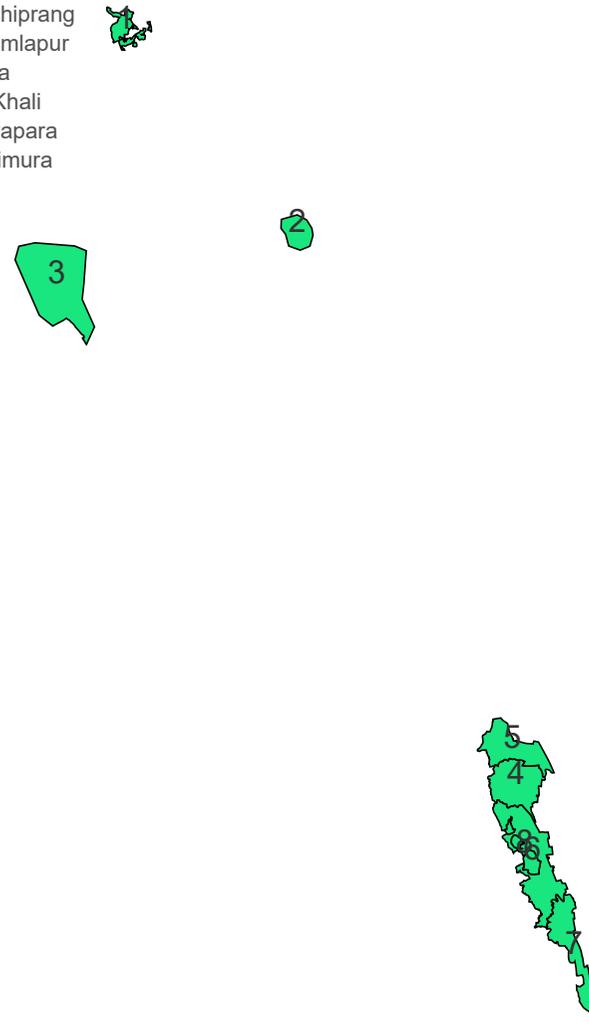6 Camp 26 Nayapara
7 Camp 27 Jadimura
8 Nayapara RC

Completeness

0   25%   50%   75%   100%

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Table 7 | Performance by partner (W2 2022)

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	1	100%	100%	IRC	2	0	0%	0%
AWARD	7	7	100%	100%	MSF	9	5	56%	56%
BASHMAH	1	0	0%	0%	MoH	18	14	78%	78%
BDRCS	11	11	100%	100%	MHI	0	0		
BRAC	11	11	100%	100%	Medair	2	2	100%	100%
CARE	4	4	100%	100%	FH/MTI	3	3	100%	100%
DAM	0	0			PRANTIC	1	1	100%	100%
DBC	1	1	100%	100%	PULSE	1	1	100%	100%
DSK	1	0	0%	0%	QC	1	1	100%	100%
DCHT-PWJ	0	0			PHD	10	10	100%	100%
FRNDS	6	6	100%	100%	RPN	2	2	100%	100%
GK	10	10	100%	100%	RHU	3	3	100%	100%
Global One	1	1	100%	100%	RI	3	3	100%	100%
GUSS	1	1	100%	100%	RTMI	9	8	89%	89%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	8	8	100%	100%	SCI	7	6	86%	86%
HMBDF	2	2	100%	100%	SHED	0	0		
HOPE	1	1	100%	100%	Turkish Government	1	1	100%	100%
ICRC	1	1	100%	100%	TdH	2	2	100%	100%
IOM	18	16	89%	89%					

Table 8 | Performance by camp

Northern group	W2		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
	Alerts Northern group			
Camp 1E	0	0%	2	100%
Camp 1W	5	100%	14	100%
Camp 2E	10	100%	32	100%
Camp 2W	2	100%	10	100%
Camp 3	6	100%	17	100%
Camp 4	2	100%	11	100%
Camp 4 Ext	0	0%	2	100%
Camp 5	6	100%	15	100%
Camp 6	2	100%	5	100%
Camp 7	1	100%	10	100%
Camp 8E	2	100%	5	100%
Camp 8W	6	100%	16	100%
Kutupalong RC	1	100%	6	100%

Map 5 | Number of alerts by camp

1 Camp 1E
2 Camp 1W
3 Camp 2E
4 Camp 2W
5 Camp 3
6 Camp 4 Ext
7 Camp 4
8 Camp 5
9 Camp 6
10 Camp 7
11 Camp 8E
12 Camp 8W
13 Kutupalong RC

# of alerts

0   2   5   10

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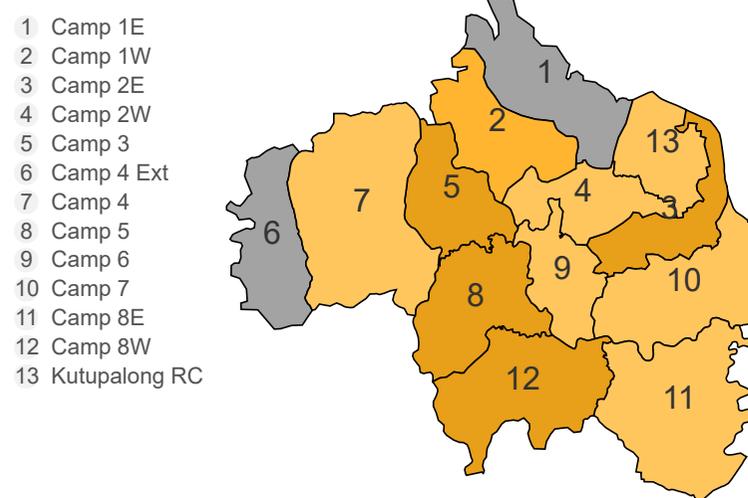
Table 9 | Performance by camp

Map 6 | Number of alerts by camp

Southern group	W2		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
		Alerts Northern group		
Camp 10	2	100%	3	100%
Camp 11	1	100%	6	100%
Camp 12	3	100%	13	100%
Camp 13	5	100%	11	100%
Camp 14	0	0%	2	100%
Camp 15	3	100%	9	100%
Camp 16	1	100%	7	100%
Camp 17	1	100%	5	100%
Camp 18	7	100%	15	100%
Camp 19	3	100%	3	100%
Camp 20	1	100%	5	100%
Camp 20 Ext	2	100%	5	100%
Camp 9	3	100%	11	100%

1   Camp 10
2   Camp 11
3   Camp 12
4   Camp 13
5   Camp 14
6   Camp 15
7   Camp 16
8   Camp 17
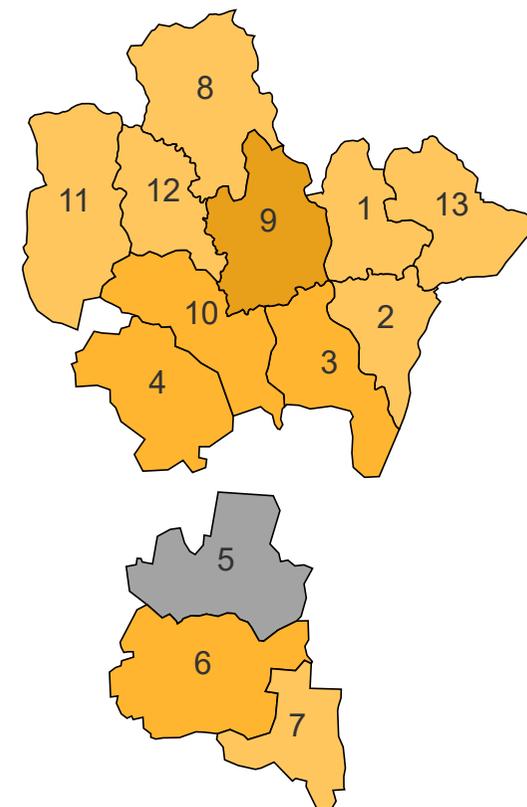9   Camp 18
10 Camp 19
11 Camp 20 Ext
12 Camp 20
13 Camp 9

# of alerts

0   2   5   10

World Health Organization   HEALTH SECTOR COX'S BAZAR

Table 10 | Performance by camp

Teknaf	W2		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
	Alerts Northern group			
Camp 21 Chakmarkul	1	100%	4	100%
Camp 22 Unchiprang	1	100%	8	100%
Camp 23 Shamlapur	0	0%	1	100%
Camp 24 Leda	4	100%	7	100%
Camp 25 Ali Khali	1	100%	3	100%
Camp 26 Nayapara	3	100%	10	100%
Camp 27 Jadimura	1	100%	2	100%
Nayapara RC	3	100%	5	100%

Map 7 | Number of alerts by camp

1 Camp 21 Chakmarkul
2 Camp 22 Unchiprang
3 Camp 23 Shamlapur
4 Camp 24 Leda
5 Camp 25 Ali Khali
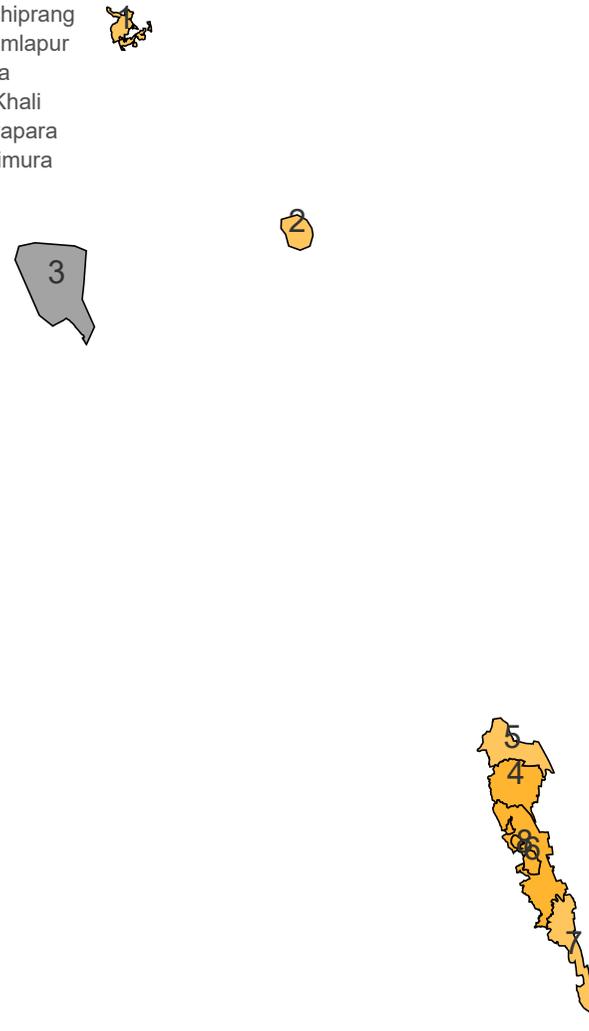6 Camp 26 Nayapara
7 Camp 27 Jadimura
8 Nayapara RC

# of alerts

0   2   5   10

World Health Organization

HEALTH SECTOR COX'S BAZAR

Table 11 | Performance by type of alert

Event	W2		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	1	100%
Measles	6	100%	33	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	1	100%
Meningitis	0	0%	0	0%
Haem. fever (susp.)	0	0%	0	0%
NNT	0	0%	2	100%
Unexp. fever	3	100%	10	100%
AWD	9	100%	35	100%
ARI	3	100%	30	100%
AJS	1	100%	4	100%
Varicella (Susp.)	0	0%	0	0%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	7	100%	20	100%

Table 12 | Risk assessment

W2	Cumulative (2022)	
0	0	Low risk
0	0	Moderate risk
0	0	High risk
0	0	Very high risk

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Bangladesh

Rohingya Emergency Response

Early Warning, Alert and Response System (EWARS)

Annex W2 2022

Proportional morbidity

Figure 1 | Proportional morbidity (W2 2022)

0.0%
- 🟩 Acute Respiratory Infection (ARI)
- 🟦 Acute Watery Diarrhoea
- 🟥 Bloody diarrhoea
- 🟩 Other diarrhoea
- 🟪 Varicella (susp.)

- 🟪 Unexplained fever
- 🟨 Acute Jaundice Syndrome (AJS)
- 🟦 Measles/Rubella
- ⬜ Other
- 🟥 Vector-borne disease[*]

[*] Combines malaria and dengue cases (suspected and confirmed)
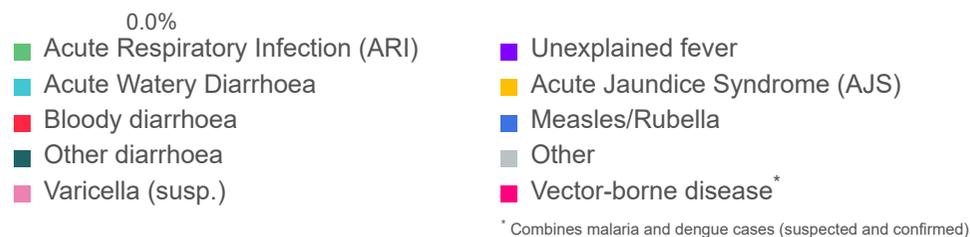
Disease	W2		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	2,766	2.7%	8,263	2.6%
Bloody diarr.	380	0.4%	1,201	0.4%
Other diarr.	1,056	1.0%	3,167	1.0%
Susp. Varicella	66	0.1%	125	0.0%
ARI	18,671	18.0%	60,184	18.8%
Measles/Rub.	9	0.0%	73	0.0%
AFP	0	0.0%	5	0.0%
Susp. menin.	1	0.0%	1	0.0%
AJS	11	0.0%	40	0.0%
Susp. HF	0	0.0%	0	0.0%
Neo. tetanus	0	0.0%	4	0.0%
Adult tetanus	0	0.0%	0	0.0%
Malaria (conf.)	1	0.0%	203	0.1%
Malaria (susp.)	2,432	2.3%	9,311	2.9%
Dengue (conf.)	56	0.1%	250	0.1%
Dengue (susp.)	38	0.0%	130	0.0%
Unexpl. fever	1,100	1.1%	3,881	1.2%
Sev. Malnut.	54	0.1%	312	0.1%
Inj./Wounds	1,821	1.8%	6,177	1.9%
Other	75,135	72.4%	226,284	70.7%
Total	**102,626**	**100%**	**320,031**	**100%**

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Figure 2 | Trend in proportional morbidity for key diseases (W2)

Legend:
- Other consultations
- Acute Respiratory Infection (ARI)
- Unexplained fever
- Acute Jaundice Syndrome (AJS)
- Acute Watery Diarrhoea (AWD)
- Other diarrhoea
- Vector-borne disease[*]

[*] Combines malaria and dengue cases (suspected and confirmed)

World Health Organization   HEALTH SECTOR COX'S BAZAR
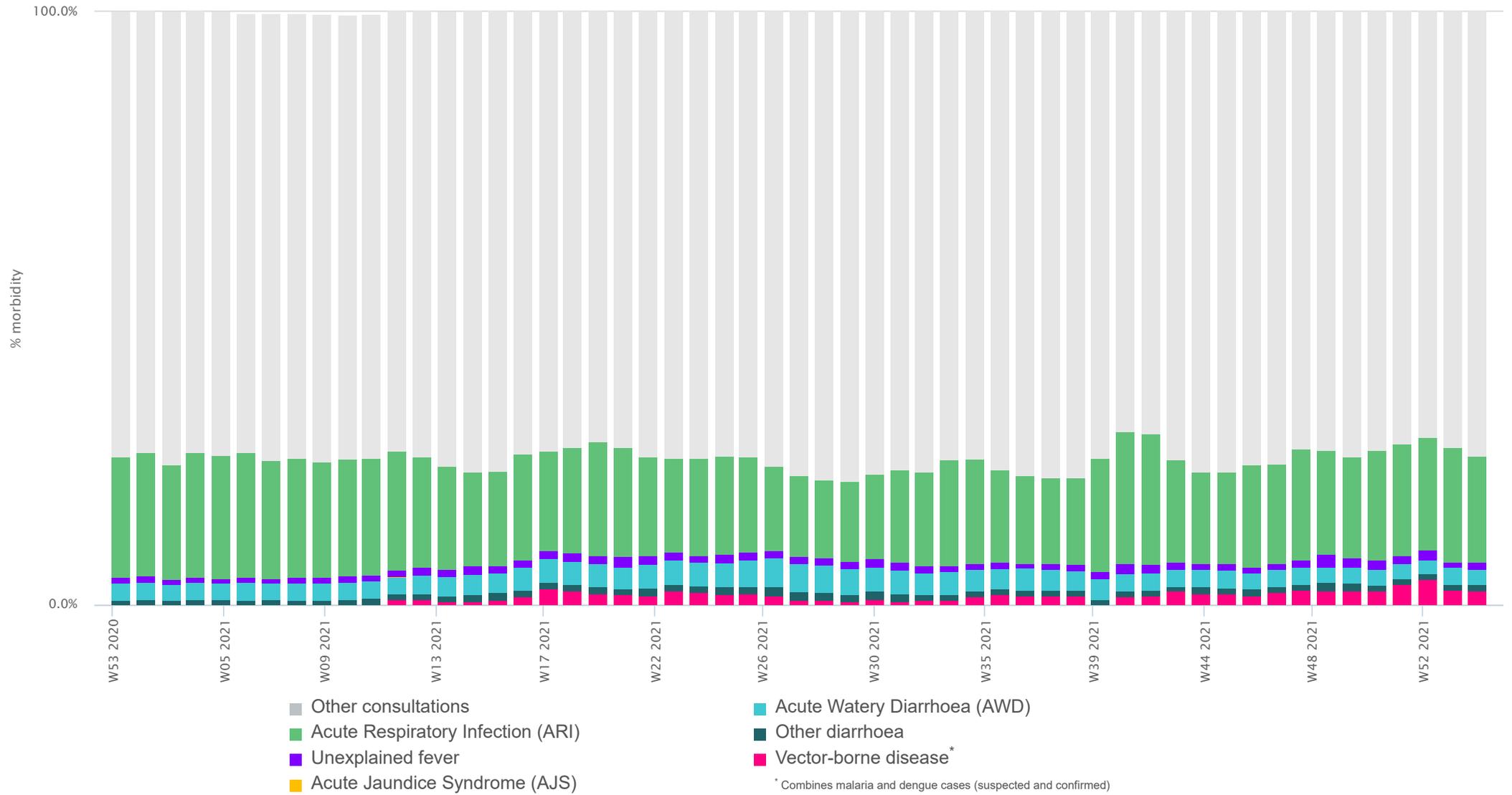
Figure 3 | Trend in number of cases over time (W38 2017 - W2 2022)
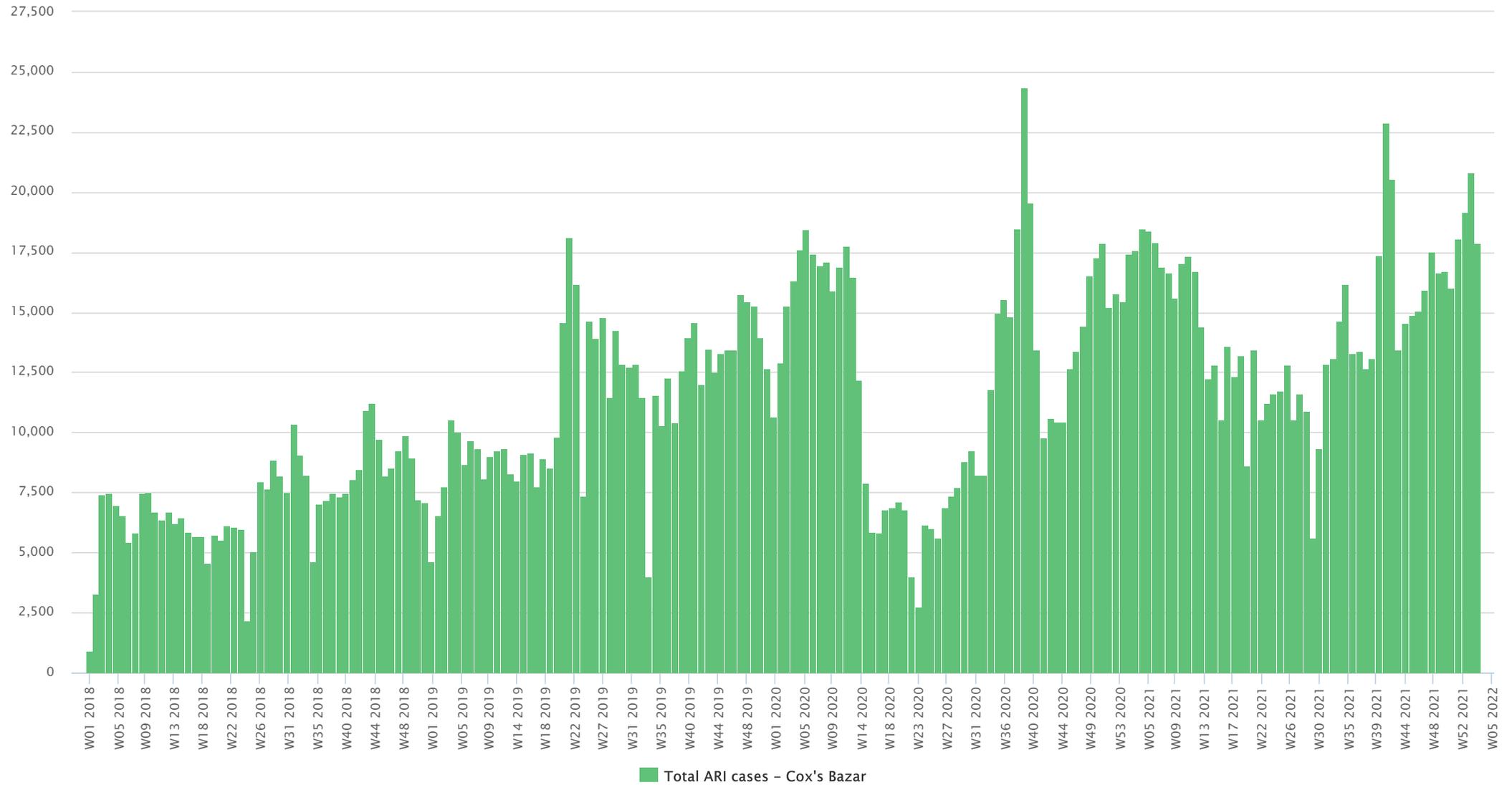
Total ARI cases – Cox's Bazar

World Health Organization

HEALTH SECTOR COX'S BAZAR

Map 1 | Map of cases by camp (W2 2022)

a. Ukhia | Number of cases
Loading...

b. Ukhia | Number of alerts
Loading...

c. Teknaf | Number of cases
Loading...

d. Teknaf | Number of alerts
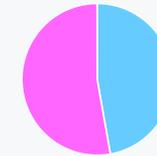Loading...

Map legend

Number of cases

0	1	100	200	500

Number of alerts

0	1	10

Alert threshold
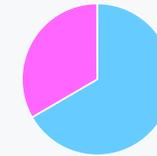Twice the average number of cases over the past 3 weeks. *Source: IEDCR*

Alert management (W2 2022)

0	**0%**	**0**	**0**	**0**	**0**
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

- Male
- Female

Figure | % age

- >=5
- < 5

World Health Organization

HEALTH SECTOR COX'S BAZAR
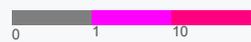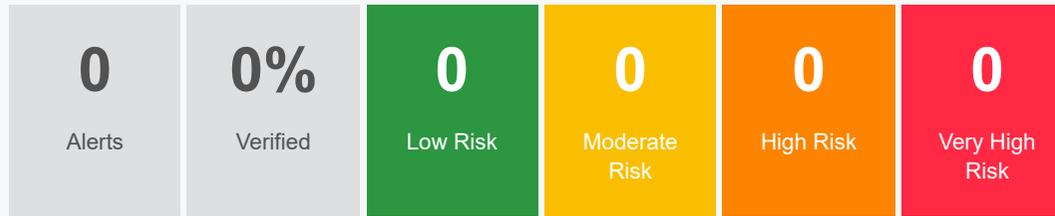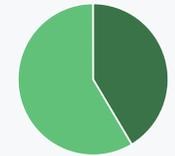
Figure 4 | Trend in number of suspected cases over time (W38 2017 - W2 2022)

Total suspected measles/rubella cases – Cox's Bazar

World Health Organization

HEALTH SECTOR COX'S BAZAR
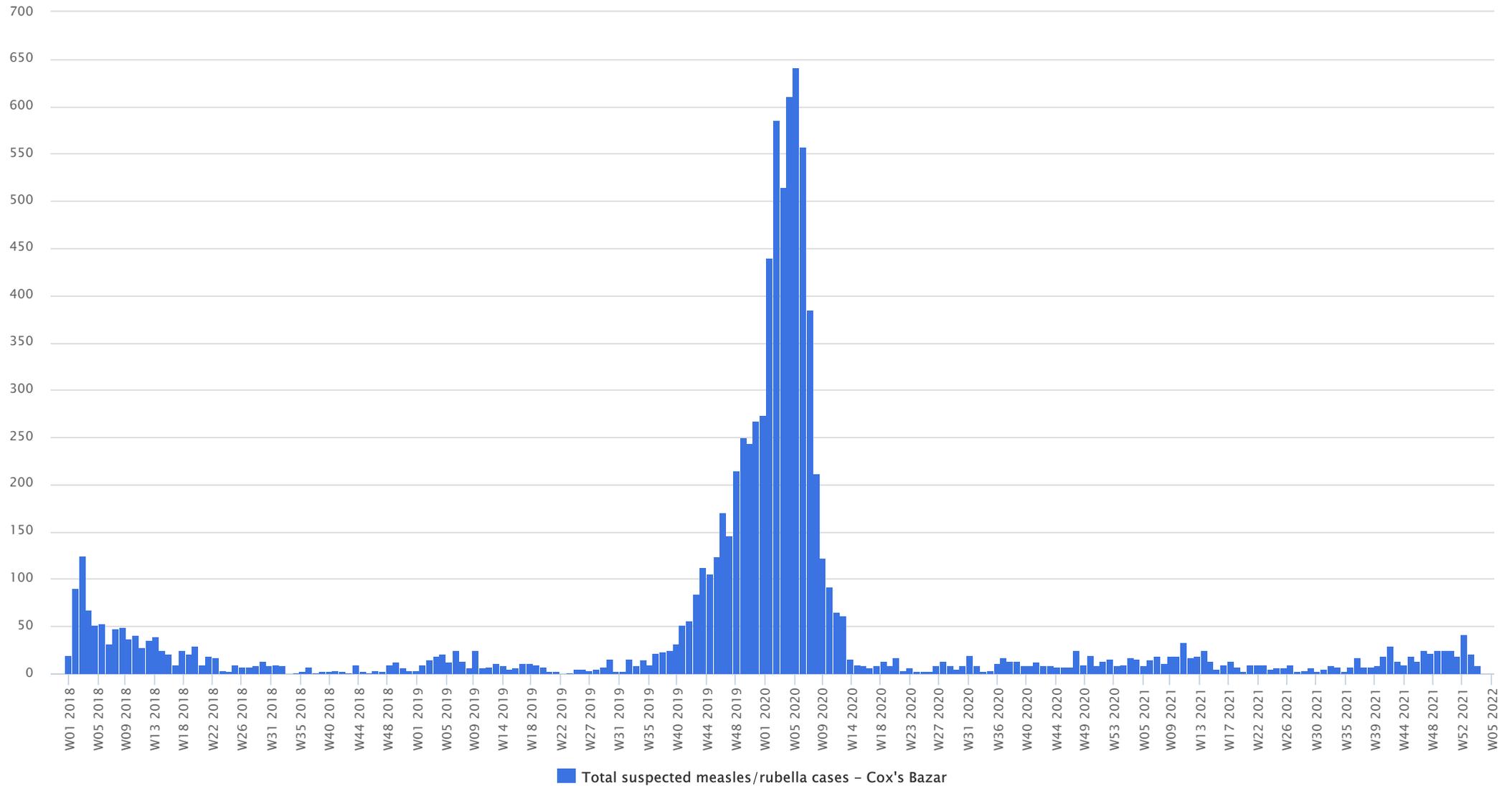
Map 2 | Map of cases by camp (W2 2022)

a. Ukhia | Number of cases
Loading...

b. Ukhia | Number of alerts
Loading...

c. Teknaf | Number of cases
Loading...

d. Teknaf | Number of alerts
Loading...

Map legend

Number of cases

0	1	10	20	50

Number of alerts

0	1	10

Alert threshold
1 case. *Source: IEDCR*

Alert management (W2 2022)

6	100%	0	0	0	0
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

■ Male ■ Female

Figure | % age

■ >= 5 ■ < 5

World Health Organization | HEALTH SECTOR COX'S BAZAR
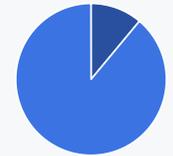
Figure 5 | Trend in number of cases over time (W38 2017 - W2 2022)

Total suspected AJS cases – Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR
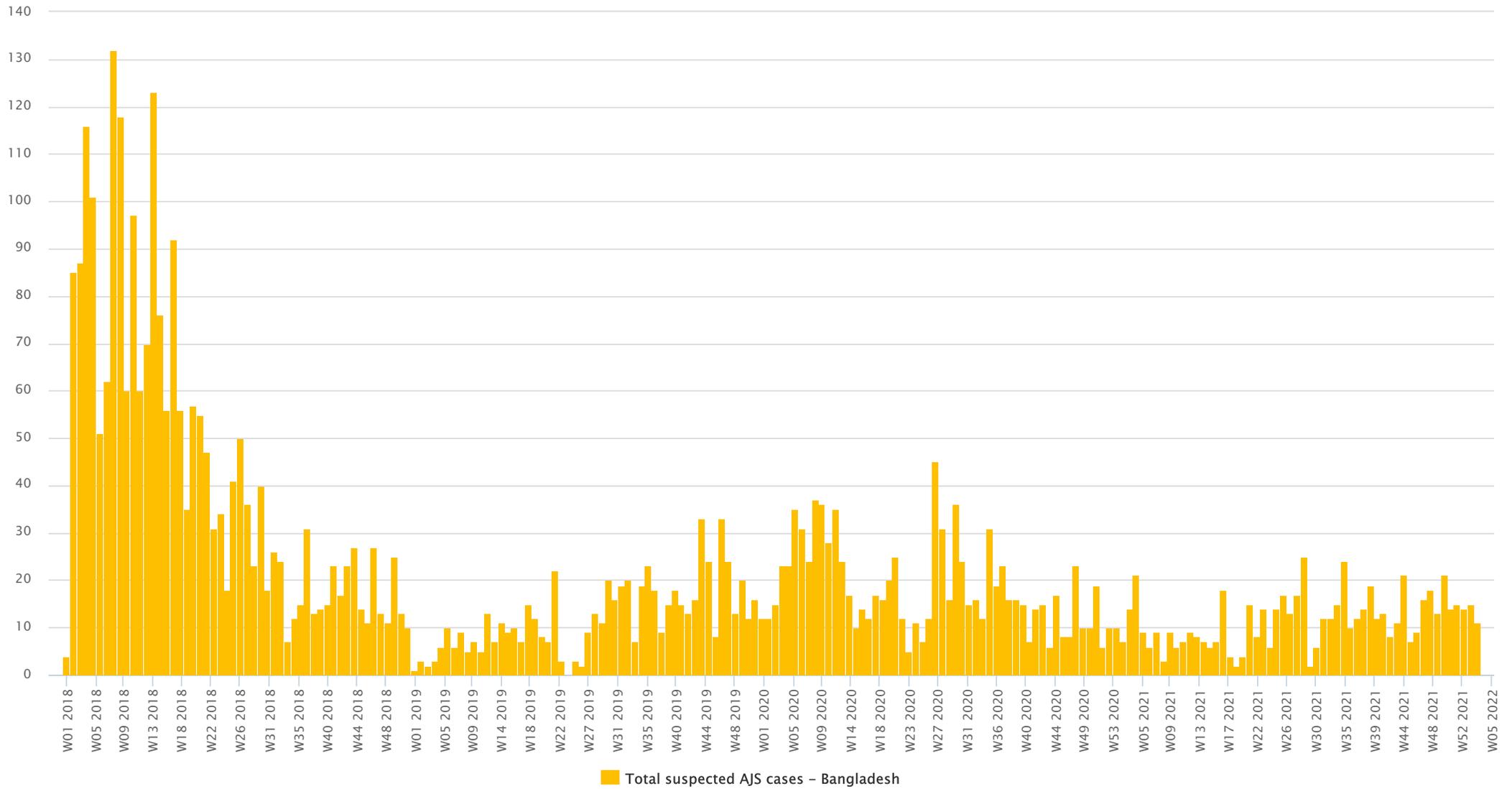
Map 3 | Map of cases by camp (W37 2017 - W2 2022)

a. Ukhia | Number of cases
Loading...

b. Ukhia | Number of alerts
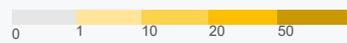Loading...

c. Teknaf | Number of cases
Loading...

d. Teknaf | Number of alerts
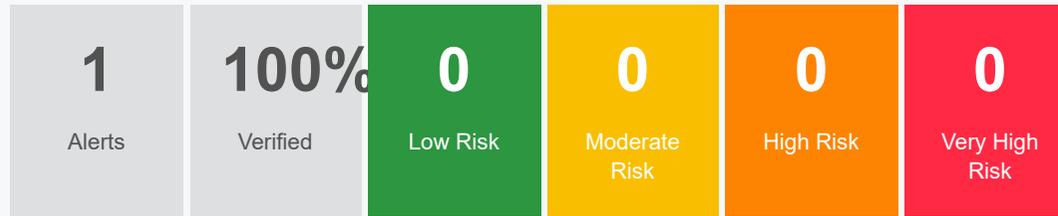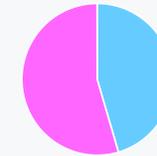Loading...

Map legend

Number of cases

0   1   10   20   50

Number of alerts

0   1   10

Alert threshold
A cluster of 3 or more cases seen in a health facility. *Source: IEDCR*

Alert management (W2 2022)

1	**100%**	**0**	**0**	**0**	**0**
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

■ Male   ■ Female

Figure | % age

■ >= 5   ■ < 5

World Health Organization   HEALTH SECTOR COX'S BAZAR

Figure 6 | Trend in number of cases over time (W38 2017 - W2 2022)
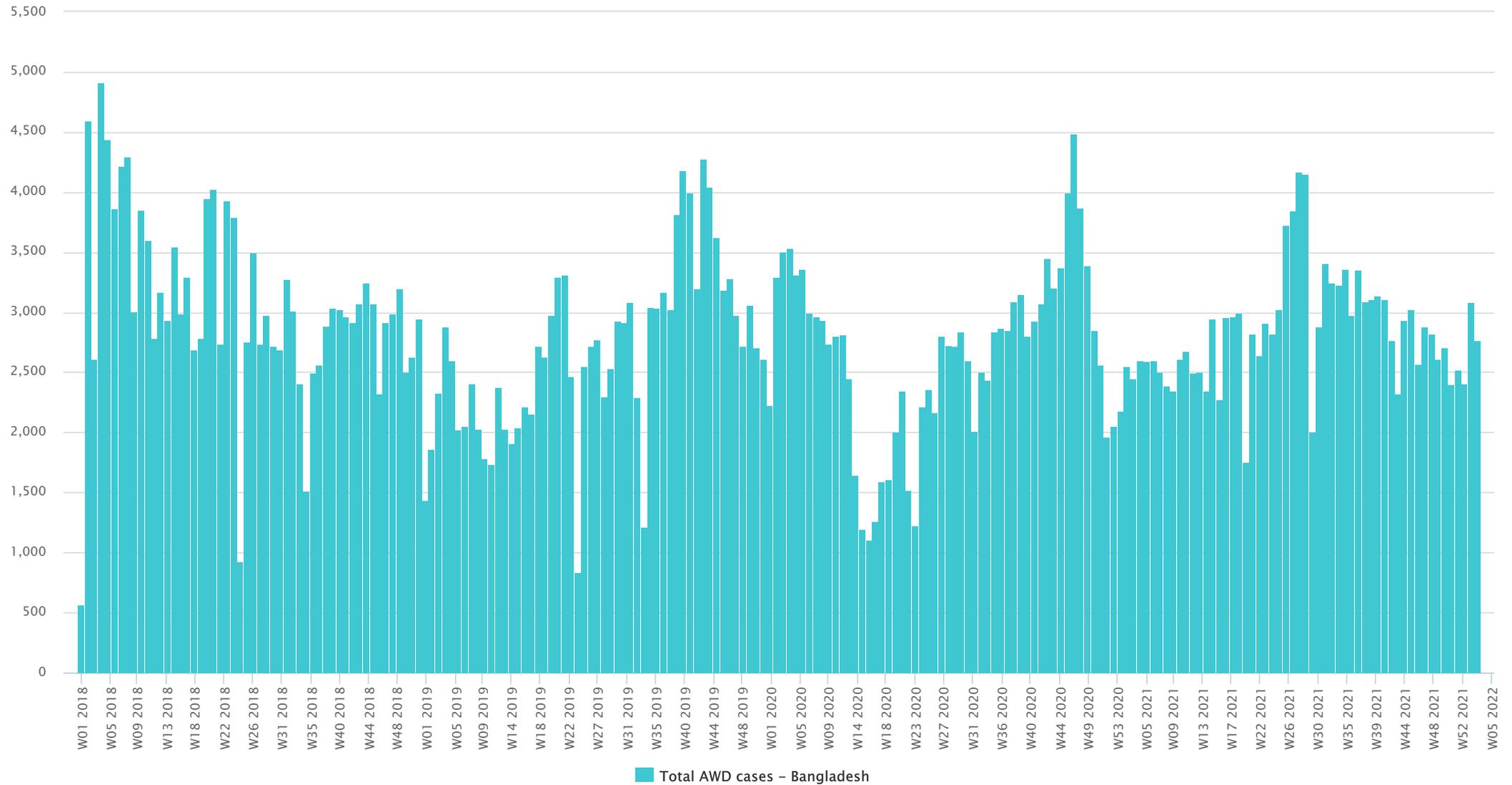
Total AWD cases – Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR

Figure 7 | Trend in number of cases over time (W38 2017 - W2 2022)

Total Dengue Cases – Suspected – Bangladesh ■ Total Dengue Cases – Confirmed – Bangladesh

Map 4 | Map of cases by camp (W37 2017 - W2 2022)

a. Ukhia | Number of cases
Loading...

b. Ukhia | Number of alerts
Loading...

c. Teknaf | Number of cases
Loading...

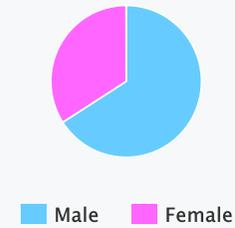**d. Teknaf** | Number of alerts
Loading...

Map legend

Number of cases

0   1   100   200   500

Number of alerts

0   1   10

Alert threshold
Twice the average number of cases over the past 3 weeks. *Source: IEDCR*
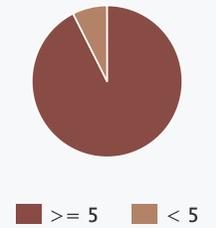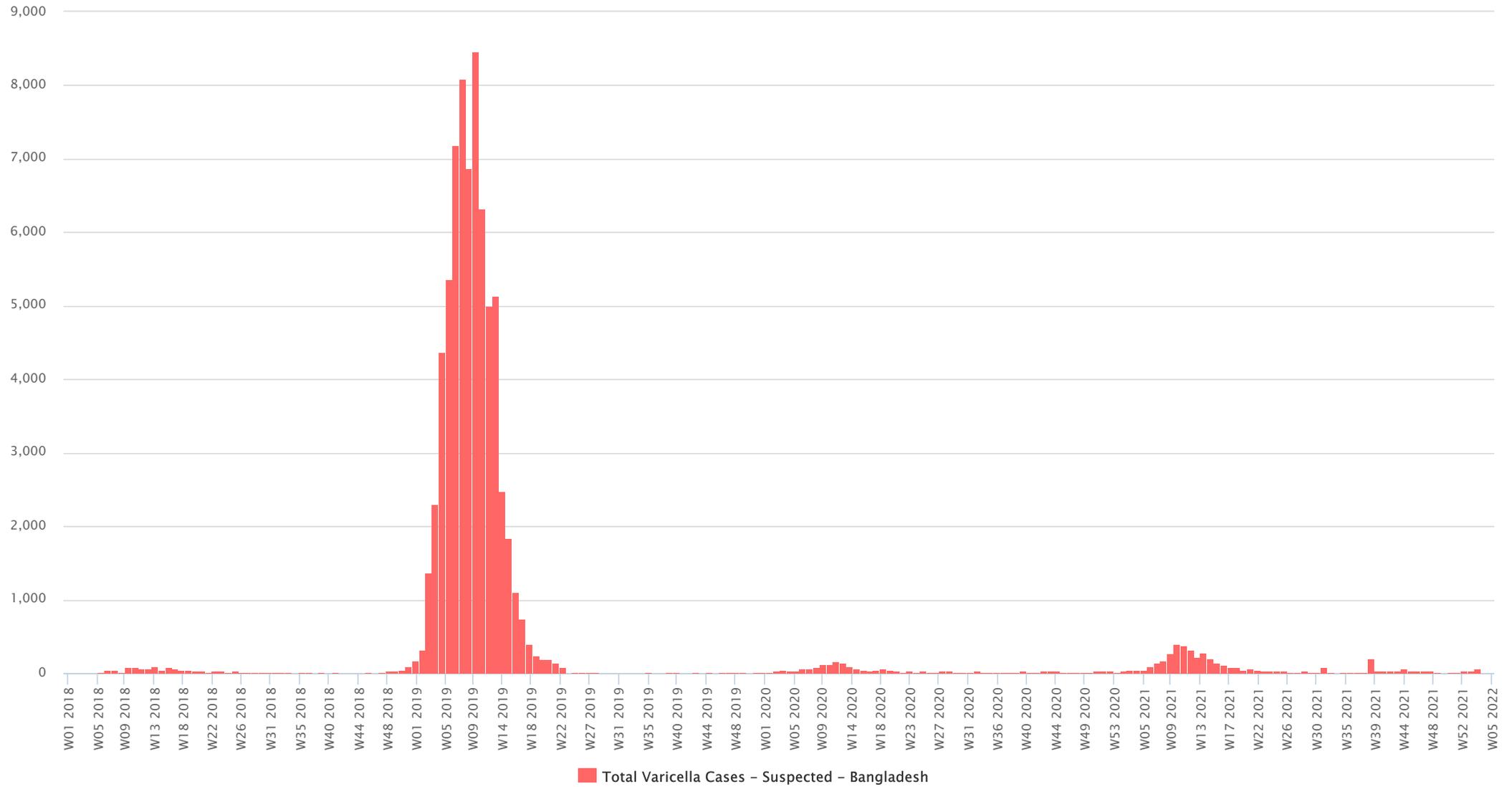
Alert management (W2 2022)

15	1500%	0	0	0	0
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

■ Male   ■ Female

Figure | % age

■ >= 5   ■ < 5

World Health Organization   HEALTH SECTOR COX'S BAZAR

Figure 7 | Trend in number of cases over time (W38 2017 - W2 2022)

Total Varicella Cases – Suspected – Bangladesh

World Health Organization   HEALTH SECTOR COX'S BAZAR

Map 4 | Map of cases by camp (W37 2017 - W2 2022)

a. Ukhia | Number of cases

Loading...

c. Teknaf | Number of cases

Loading...

Map legend

Number of cases
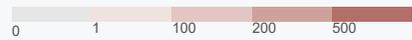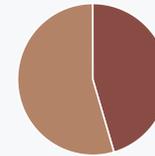
0   1   100   200   500

Figure | % sex

■ Male   ■ Female

Figure | % age

■ >= 5   ■ < 5

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Ministry of Health and Family Welfare Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR

Global EWARS