Global EWARS

Epidemiological Highlights

Week 4 (24-30 Jan 2022)

World Health Organization

As of week 4, (24-30 Jan 2022) there were 3,703 confirmed cases of COVID-19 (SARS-CoV-2), out of 86,201 samples that had been submitted for testing. The total positivity rate now stands at 4.3%.

In the reporting week, three hundred and thirty-eight (338) new confirmed cases were detected out of 1,610 total samples tested. This translated to a 21.0% Test positivity Rate (TPR) which is up from 3.3% reported the previous week.

As of this week (week 4)
- 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; C2W-237, C24-228, C3-222, C17-220, and Camp4-211.
- One new death was reported in this Epi week. Total confirmed COVID-19 deaths so far reported to date stands at 35 with the average case fatality ratio of 0.9%
- The weekly incidence was 393.1 cases/1 million population in this Epi week which is higher in comparison with the previous week's 53.5 cases/1 million population.
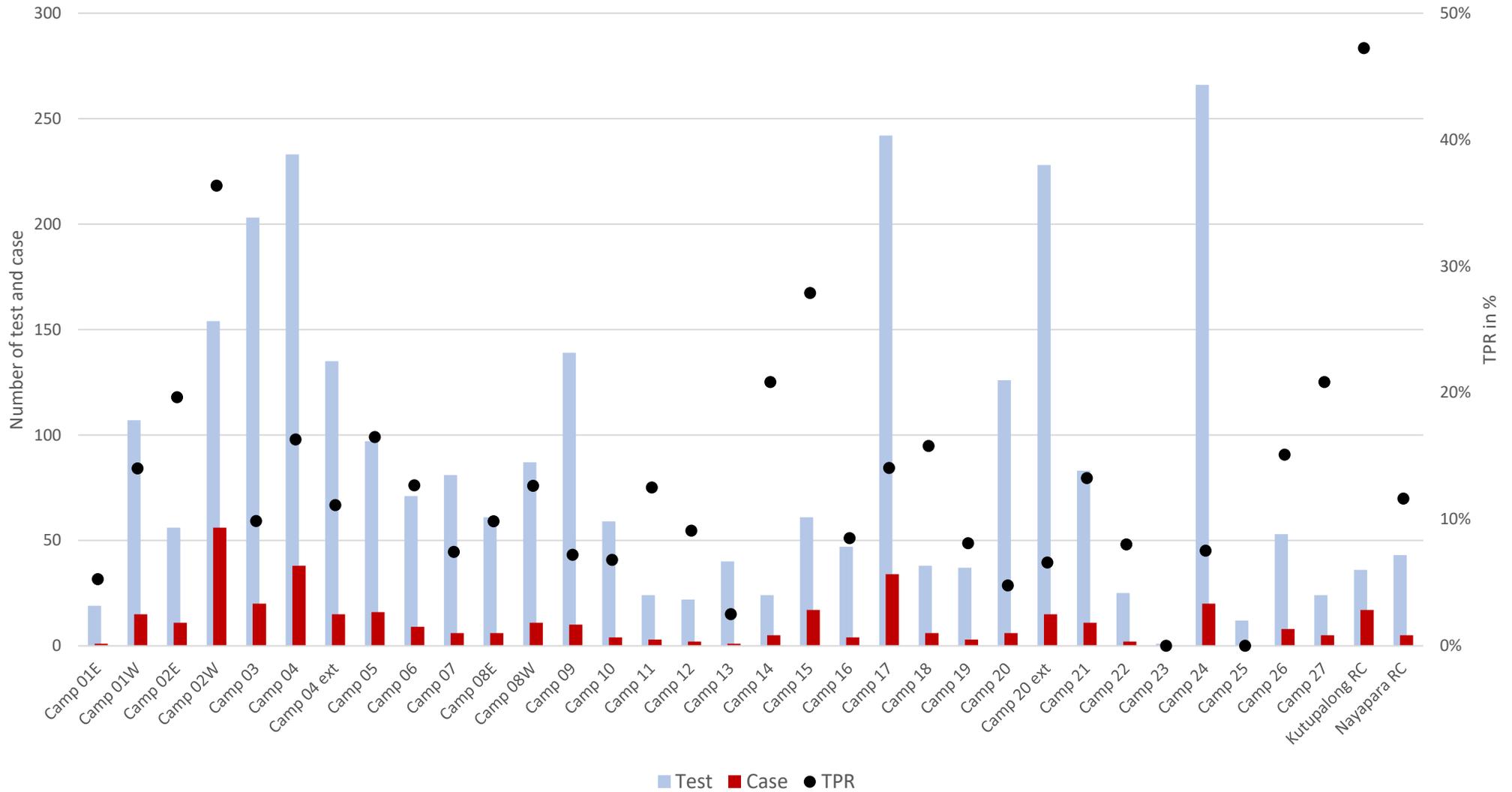
Highlights: COVID-19

COVID-19 positive cases (n=3,703) by epidemiological week by date of test

Male ■ Female ■

Epidemiological Highlights
Week 4, 2022
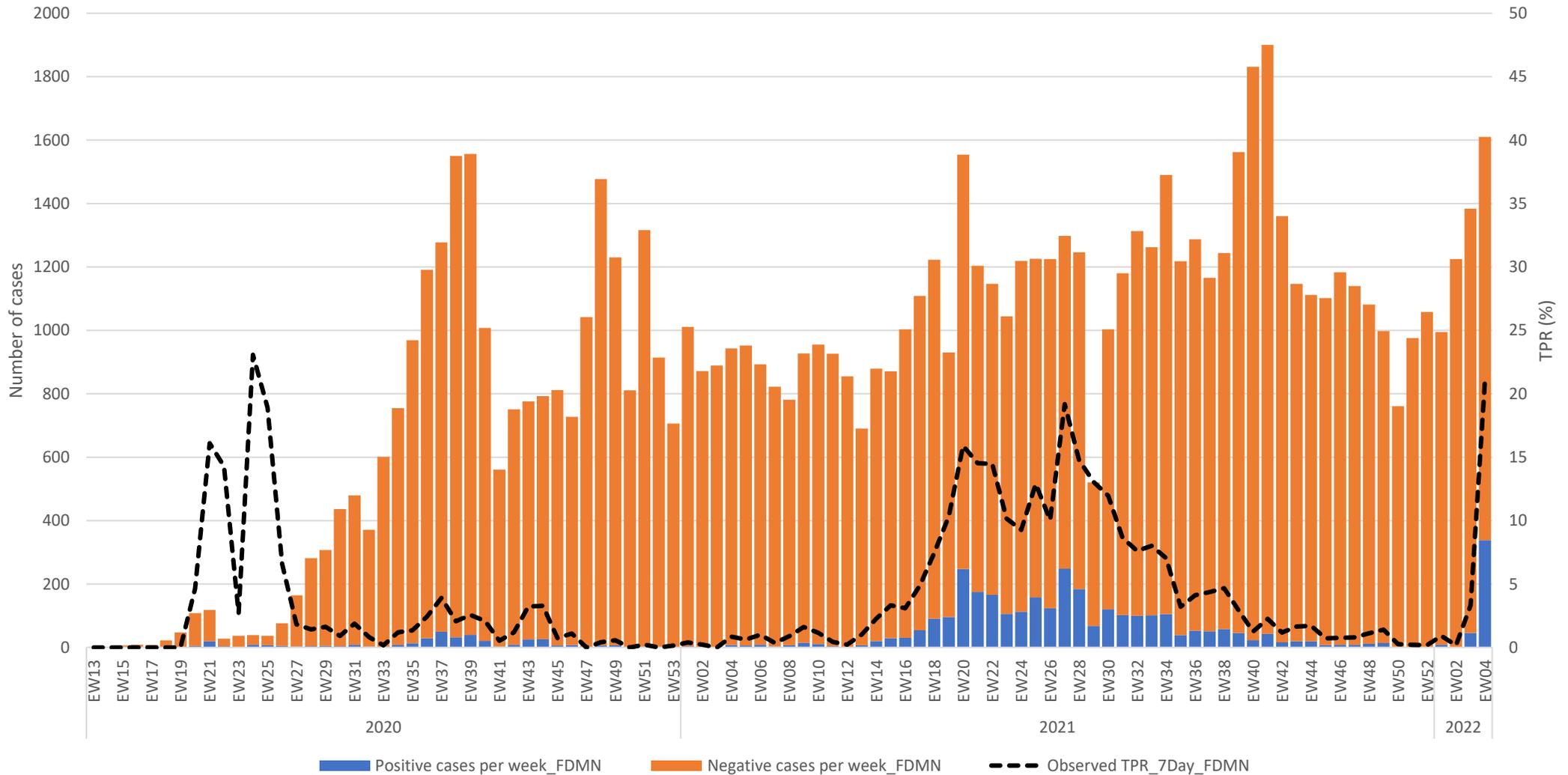
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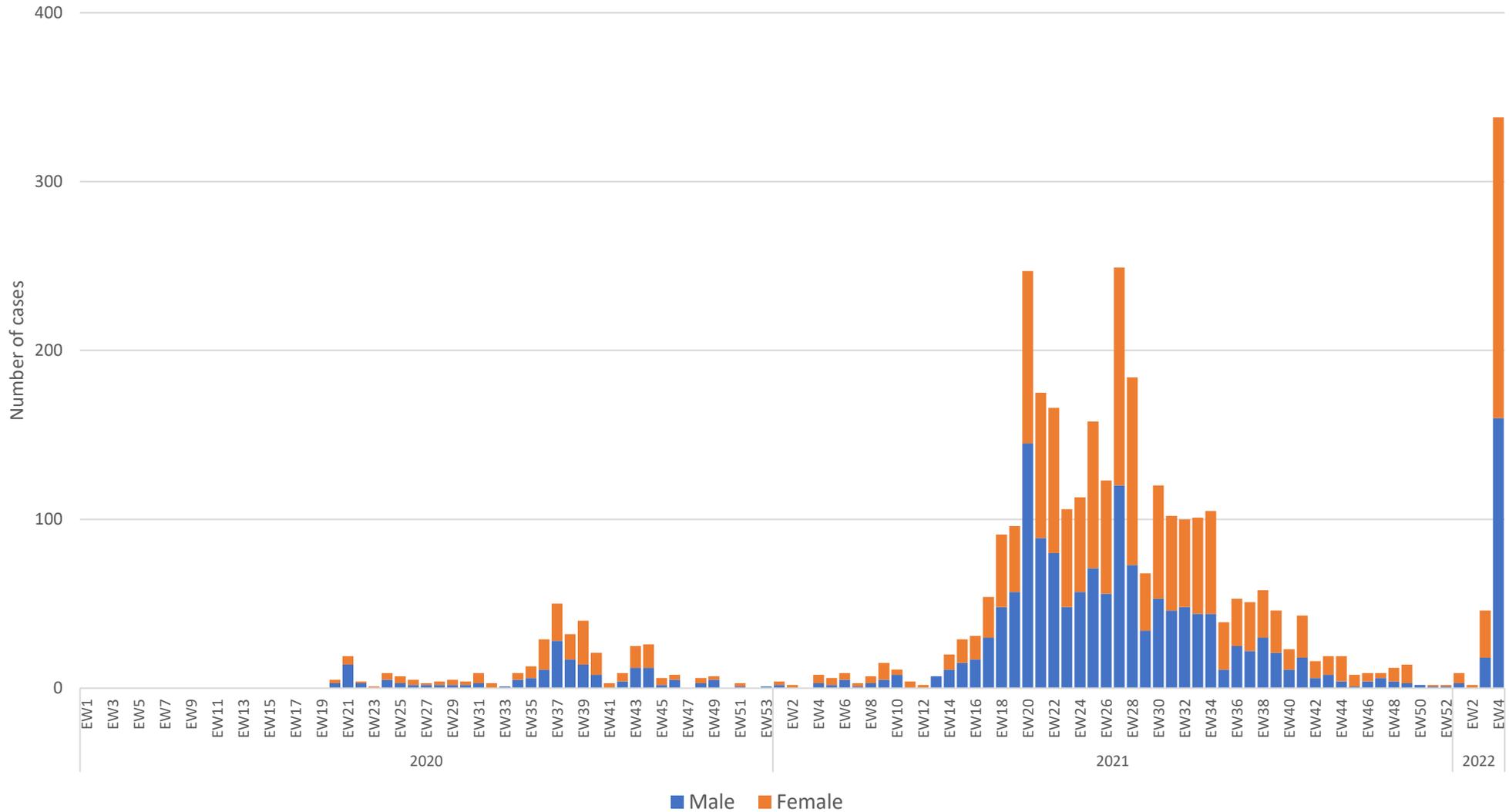
Highlights: COVID-19

COVID-19 test case and TPR per camp, week 03-04

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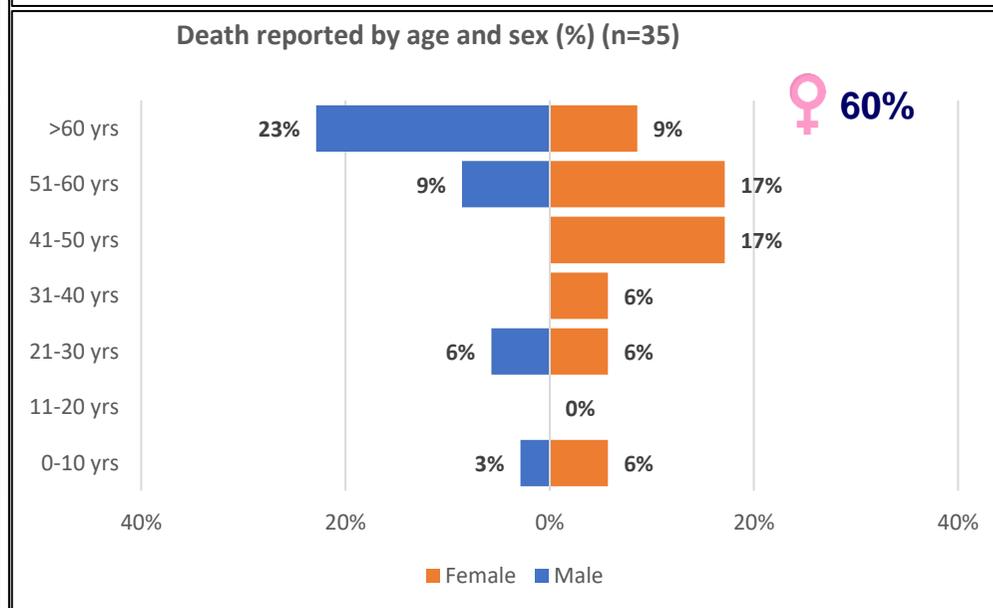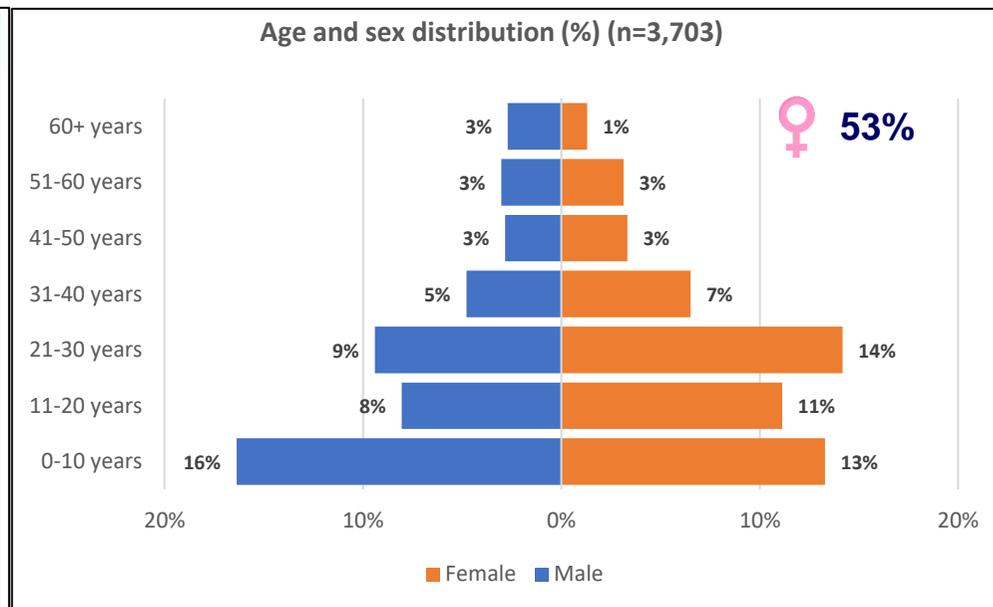
World Health Organization

Highlights: COVID-19

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

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Highlights: COVID-19

COVID-19 Cases in Rohinga Camps (March 2020 - 30 January 2021)

3,703 (4,307/1 million pop) Confirmed cases

35 (41/1 million pop) Deaths

Number of cases
- 4 - 40
- 41 - 66
- 67 - 97
- 98 - 145
- 146 - 237

Number of Deaths
- 1
- 2
- 3
- 4

Age and sex distribution (%) (n=3,703)

♀ **53%**

Age group	Male	Female
60+ years	3%	1%
51-60 years	3%	3%
41-50 years	3%	3%
31-40 years	5%	7%
21-30 years	9%	14%
11-20 years	8%	11%
0-10 years	16%	13%

Female ■ Male

Death reported by age and sex (%) (n=35)

♀ **60%**

Age group	Male	Female
>60 yrs	23%	9%
51-60 yrs	9%	17%
41-50 yrs		17%
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=3,316)

- Missing, 3.2%
- Severe, 1.8%
- Asymptomatic, 8.9%
- Moderate, 5.3%
- Mild, 80.8%
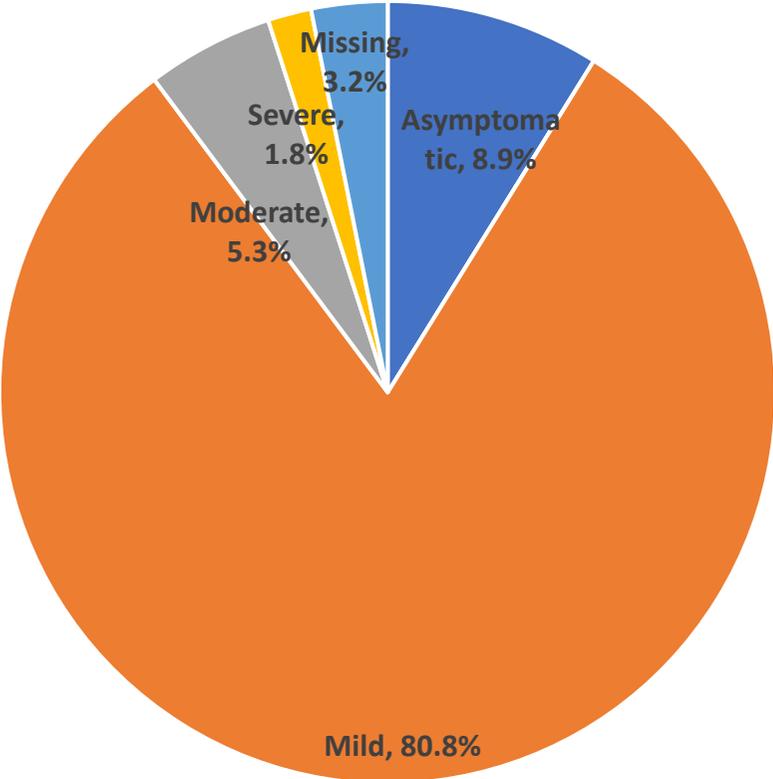
Did the case report at least 1 co-morbidity (n=3,316)

- Yes 4.3%
- No 95.7%

Source: Go.Data

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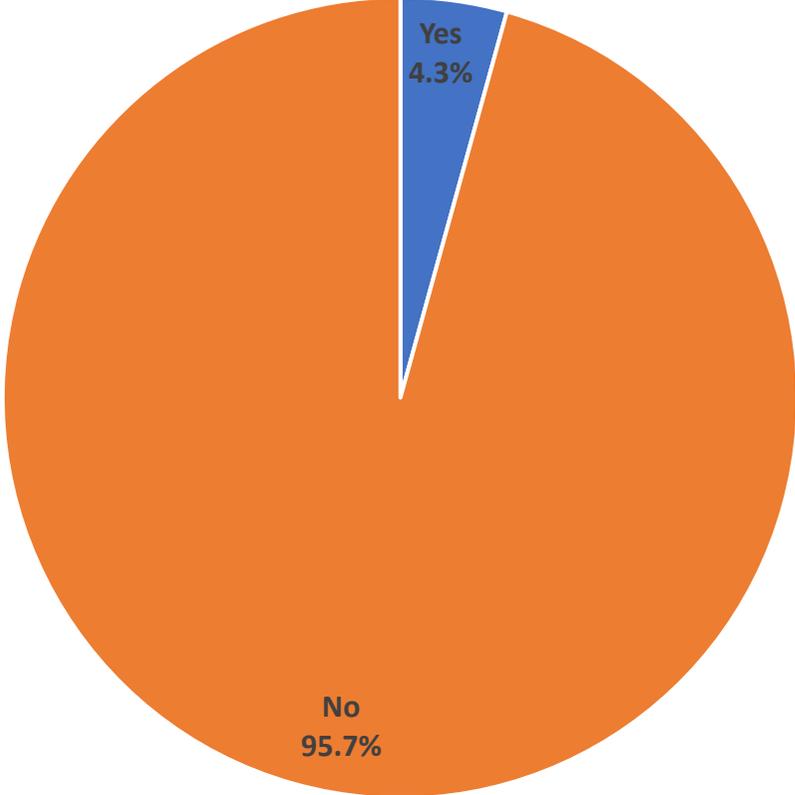
Highlights: COVID-19

- Total 3,316 (out of 3,703) 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 9,558 (79%) contacts registered for follow-up in the Go.Data out of 12,042 total contacts so far were identified during the field investigation.

- 7,613 (80%) contacts successfully accomplished the follow-up.

- 325 household contacts tested positive within the incubation period. This translates to a 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 168 health facilities are registered in EWARS

  – In week 4, 141/168 weekly reports were received on time

  – Timeliness of reporting for this week was 83%

  – Seventy-six (76) alerts were triggered in the reporting period

  – All alerts are reviewed and verified by the WHO EWARS team; the number is less than that of the previous week (94 alerts in week 3, 2022).

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Highlights: Morbidity and Mortality

- 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 4.

- 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, which stands in total 16 in 2022 and further details given below

Year	Suspected SARI death reported	Reclassified as probable death due to COVID-19
2022	16	1
2021	96	15
2020	49	2

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Diphtheria Surveillance Updates

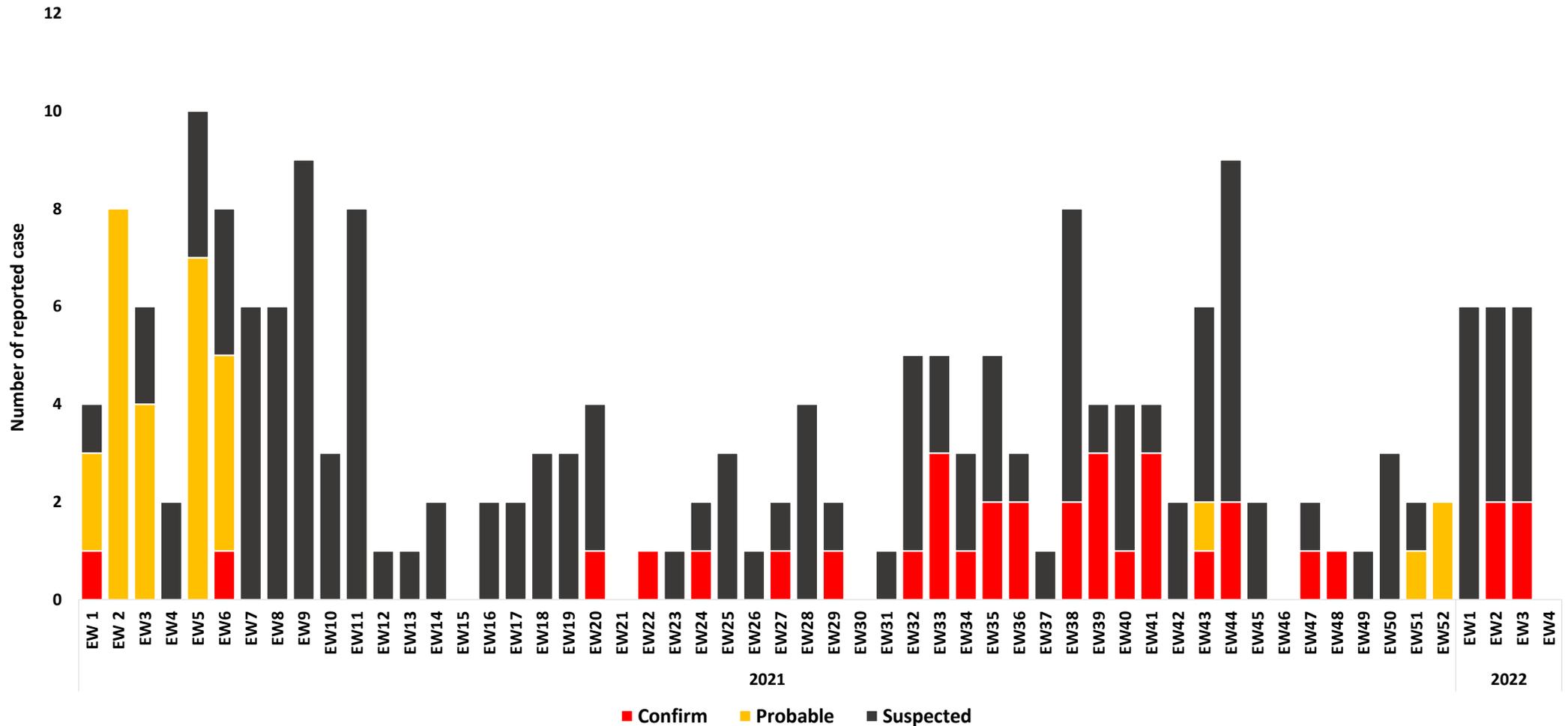Two (2) confirmed and 4 suspected diphtheria cases were reported in Go.Data in this week

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- EW4, 2022

Epidemiological Highlights
Week 4, 2022

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Diphtheria Surveillance Updates
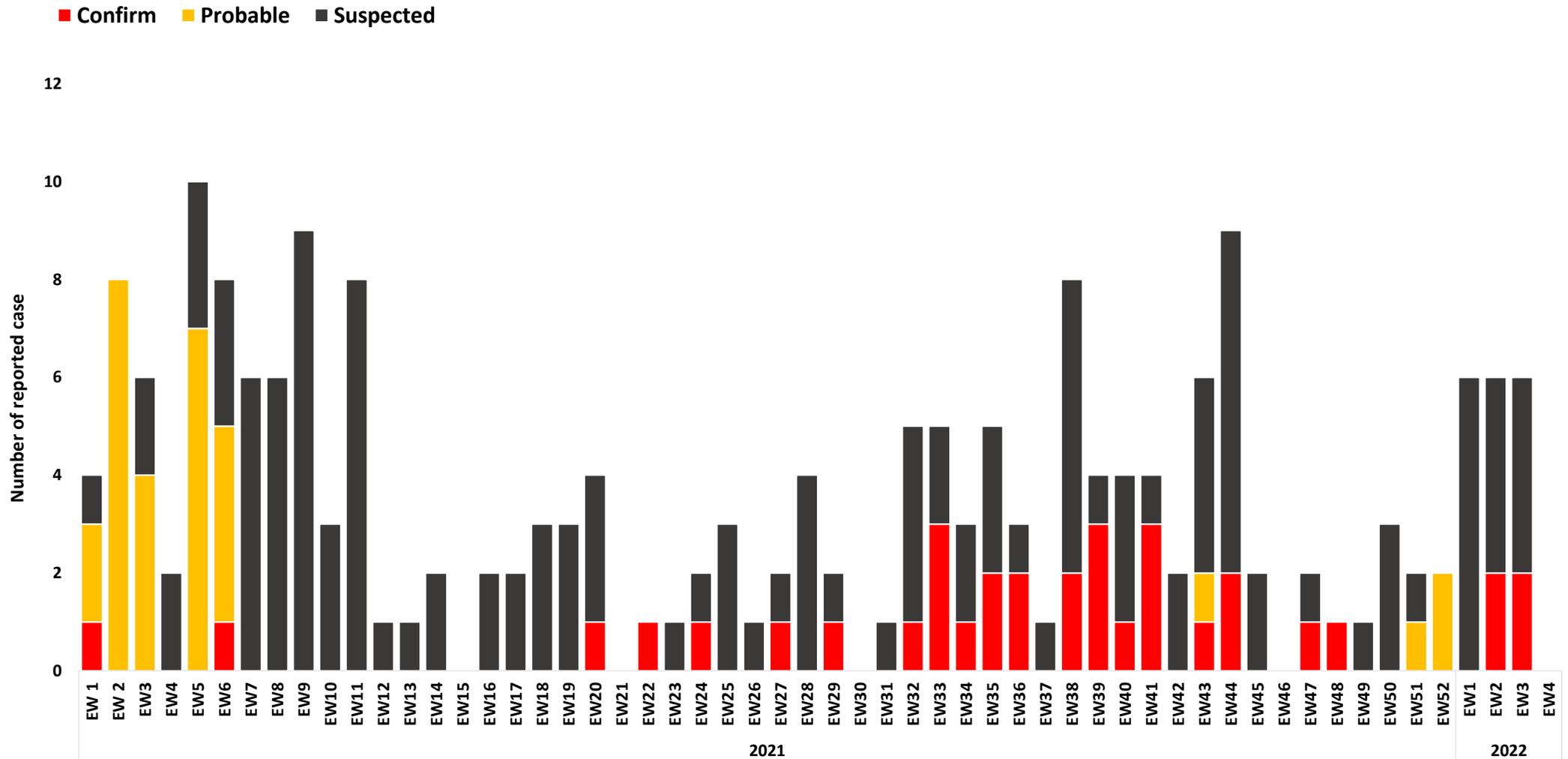
Dengue Surveillance Updates, 2021-22

Year	Month/Epi Week	Week/month		Cumulative	
		Confirmed case	Death	Confirmed case	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
	W3 (17-23 Jan)	41	0	1,686	3
	W4 (24-30 Jan)	13	0	1,699	3

Epidemiological Highlights
Week 4, 2022

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Dengue Surveillance Updates, 2021-22

Geographical distribution of Dengue confirmed cases (n=1,699)

Camp	Cases
CAMP 3	284
KUTUPALONG RC	229
NAYAPARA RC	210
NATIONAL	180
CAMP 2E	138
CAMP 1E	136
CAMP 2W	98
CAMP 1W	90
CAMP 5	82
CAMP 7	45
CAMP 26	37
CAMP 6	35
CAMP 4	21
CAMP 27	16
CAMP 8W	16
CAMP 18	10
CAMP 17	8
CAMP 11	7
CAMP 13	6
CAMP 24	6
CAMP 8E	5
CAMP 12	3
CAMP 9	3
CAMP 10	2
CAMP 22	2
CAMP 14	2
CAMP 20	2
CAMP 25	1

EWARS
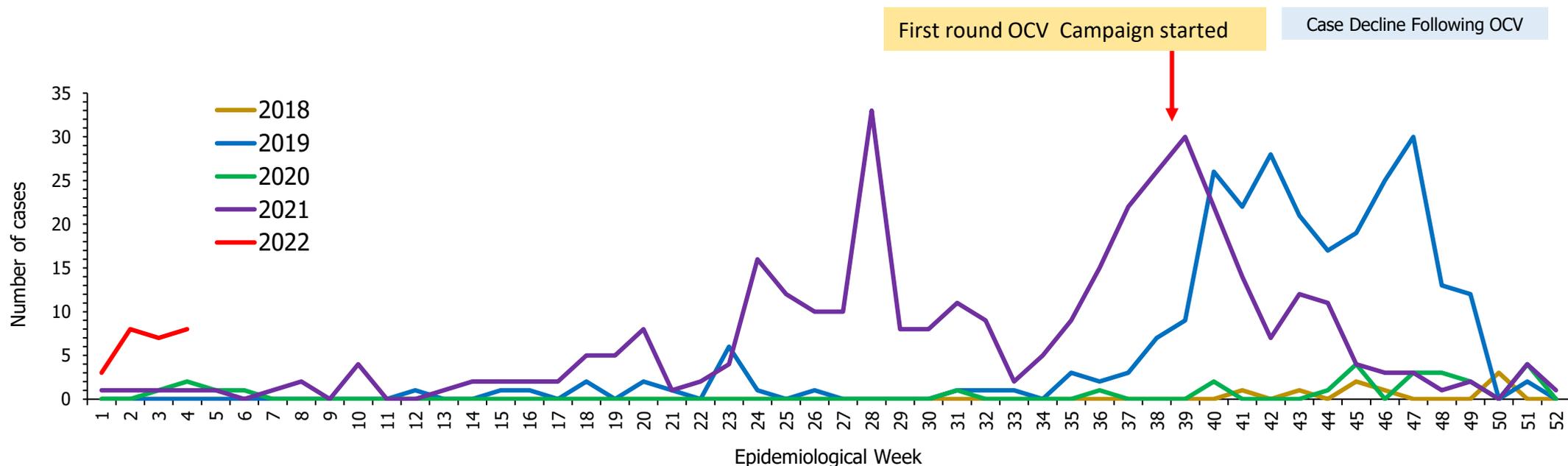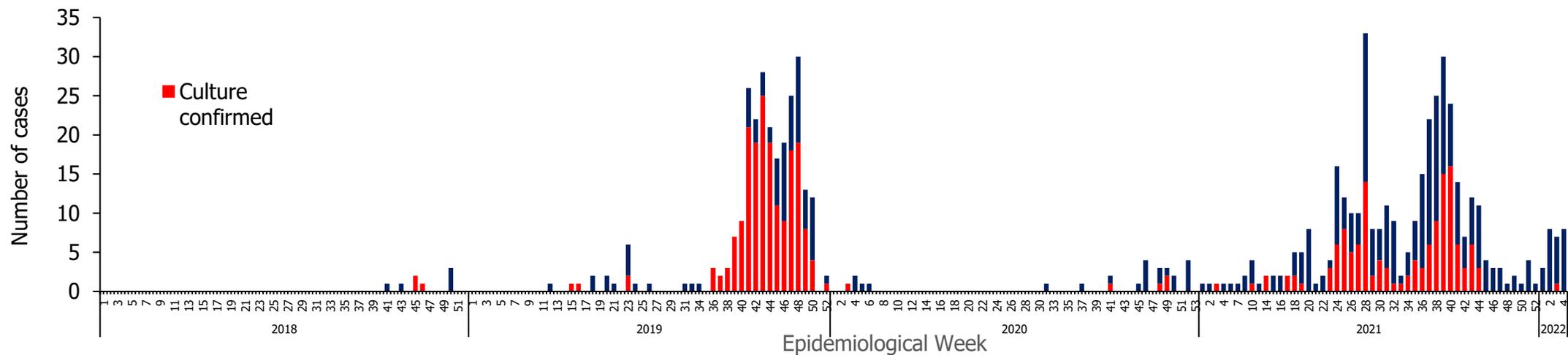Global

World Health Organization
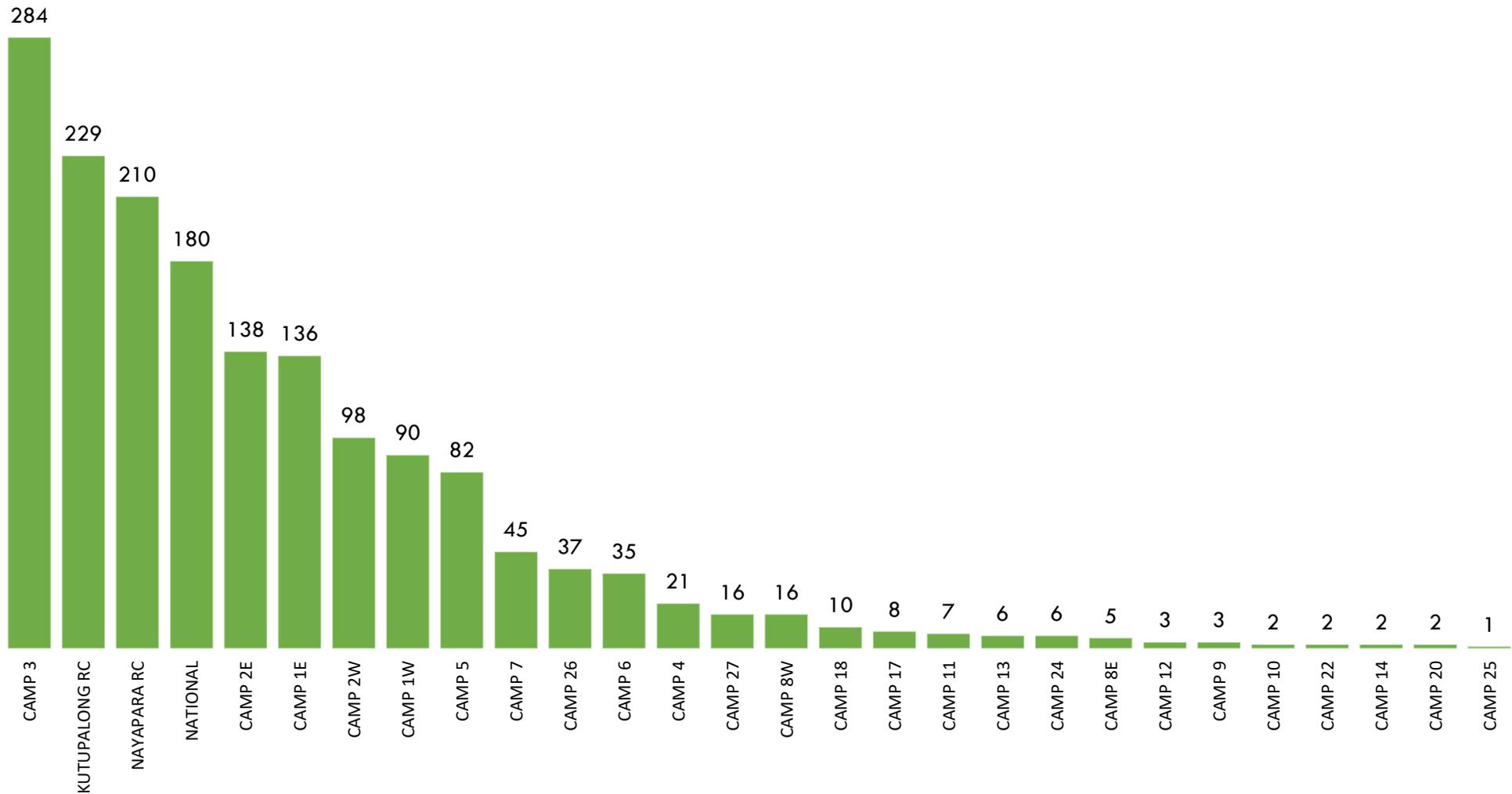
Cholera/AWD Surveillance Updates, 2017-2022 W4

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

- In 2022 total of twenty-six (26) cholera cases were reported as of W4 2022. Of these 1 was positive 16 were negative and 9 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
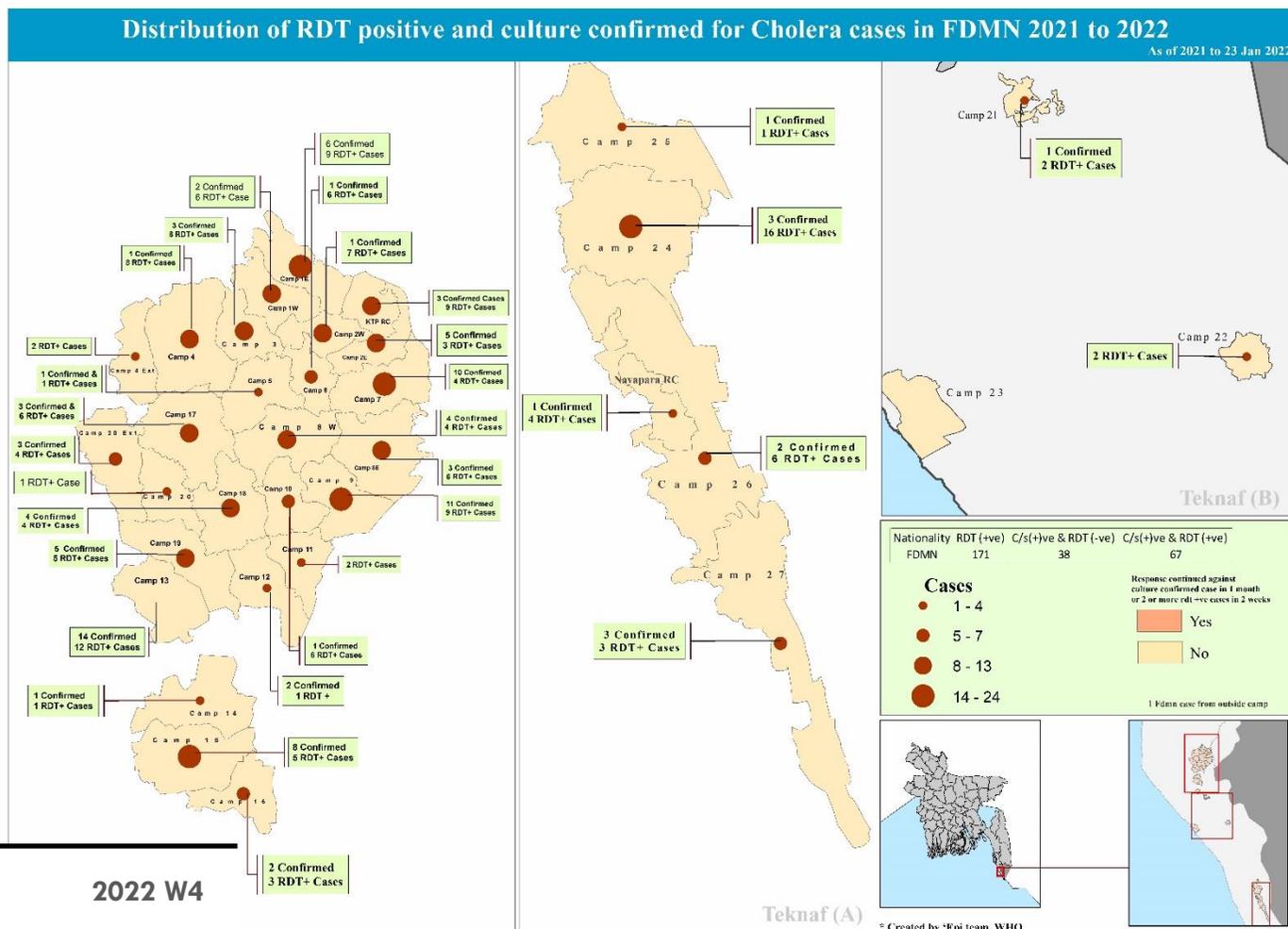
	2018	2019	2020	2021	2022 W4
RDT positive/culture confirmed for Cholera	49	258	28	357	26
Culture confirmed for Cholera	7	184	5	136	1

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Epidemic curve of cholera, Cox's Bazar District, 2017-Epi Week 4, 2022

First round OCV Campaign started

Case Decline Following OCV

Epidemiological Highlights
Week 4, 2022

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Measles Surveillance Updates, 2021-22

Total number of Measles case reported in EWARS from 2021- W4, 2022
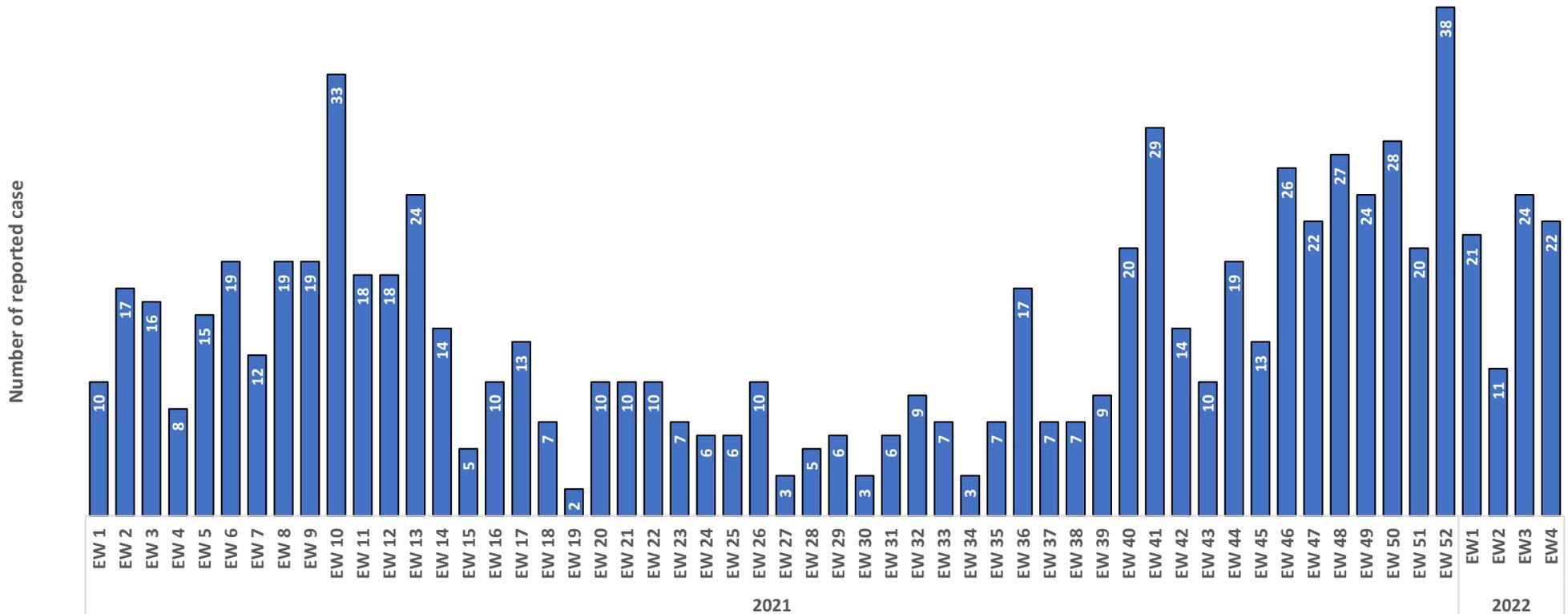
> In week 4, 22 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 78 reported in 2022.
> Sixty-eight (68%, 53/78) percent of the total reported suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation
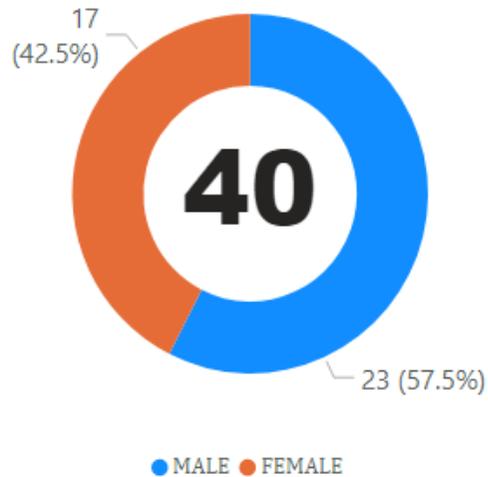
Epidemiological Highlights
Week 4, 2022

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Community-based Mortality Surveillance Updates

Probable Cause of Death	Week 4	In 2022
Still Birth	9 (23%)	25 (14%)
Neonatal Death (<28 days old)	3 (7%)	13 (7%)
Infectious Disease	1 (3%)	5 (4%)
Severe Acute Respiratory Infection (SARI)	--	5 (4%)
Injury	--	2 (1%)
Maternal Death	--	6 (3%)
Acute Malnutrition	--	--
Other	26 (64%)	118 (67%)
Total	**40 (100%)**	**174 (100%)**

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

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Community-based Mortality Surveillance Updates

Gender distribution

17 (42.5%)
40
23 (57.5%)

● MALE ● FEMALE

Place of death

17 (42.5%)
23 (57.5%)

● HOME ● HEALTH FACILITY
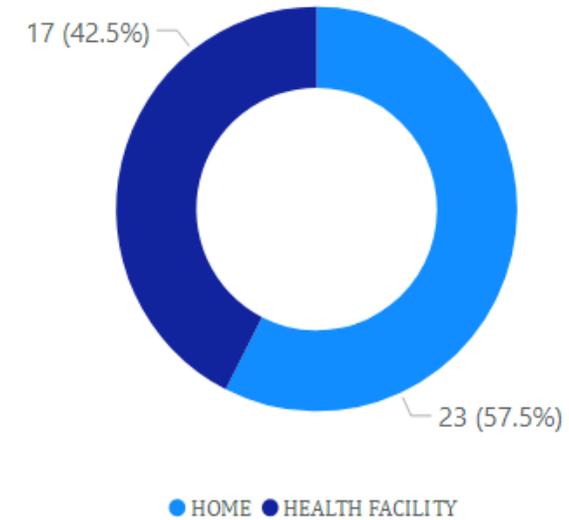
Distribution of deceased Camp

CAMP 5, CAMP 11 3, CAMP 15 2, CAMP 20 EXT 2, CAMP 24 Leda 2, CAMP 2W 2, CAMP 4 2, (Blank) 1, A-16 1, A3 1, A-4 1, B-11 1, B-2 1, B-30 1, CAMP 10 1, CAMP 13 1, CAMP 20 1, CAMP 22 UNCHIPRA 1, CAMP 25 ALI KHALI 1, CAMP 27 JADIMURA 1, CAMP 2E 1, CAMP 4 EXT 1, CAMP 6 1, CAMP 8W 1, CAMP 9 1, D 1, D-3 1, E-11 1, H-24 1
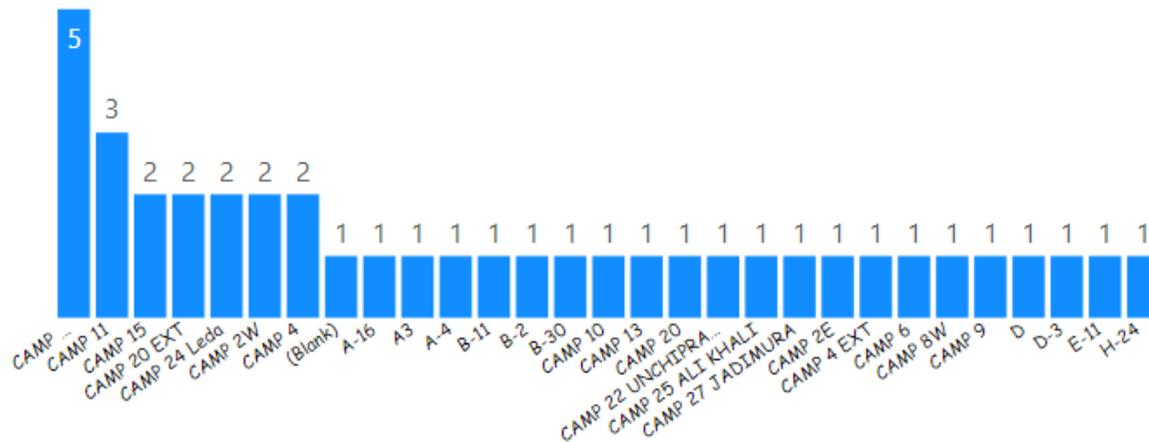
Distribution of Probable cause of death

OTHER 26, STILL BIRTH (BORN DEAD) 9, NEONATAL (<28 DAYS OLD) 3, INFECTIOUS DISEASE 1, SEVERE ACUTE RESPIRATORY INFECTION (SARI) 1

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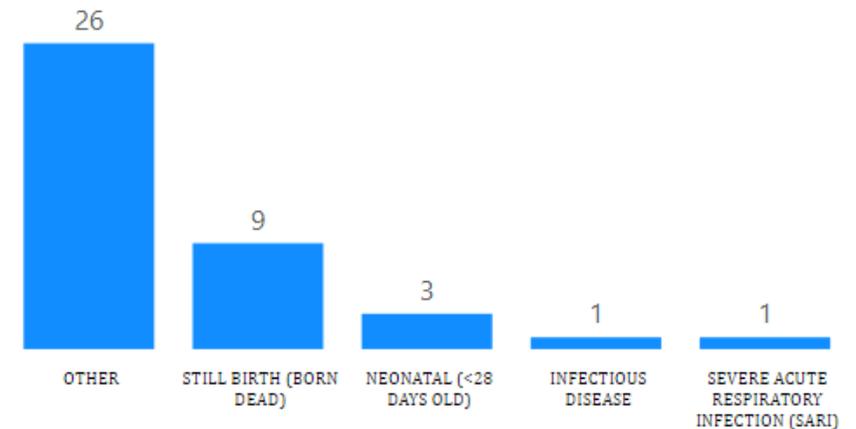
Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Epidemiological Bulletin W4 2022

Ministry of Health and Family Welfare Bangladesh

World Health Organization

HEALTH SECTOR
COX'S BAZAR

Contents

Sources of data

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

World Health Organization   HEALTH SECTOR COX'S BAZAR

Table 1 | Coverage

#	%	
918,841	-	Estimated total Rohingya population[1]
902,066	98%	Total population under surveillance
175	-	Total number of health facilities
168	96%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

W4	Cumulative (2022)	
141	778	Number of weekly reports received
83%	93%	Completeness
83%	88%	Timeliness

Table 3 Alert performance indicators

W4	Cumulative (2022)	
76	462	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 Government of Bangladesh- UNHCR Population Factsheet. 31 December 2020.

World Health Organization   HEALTH SECTOR COX'S BAZAR

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
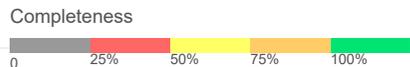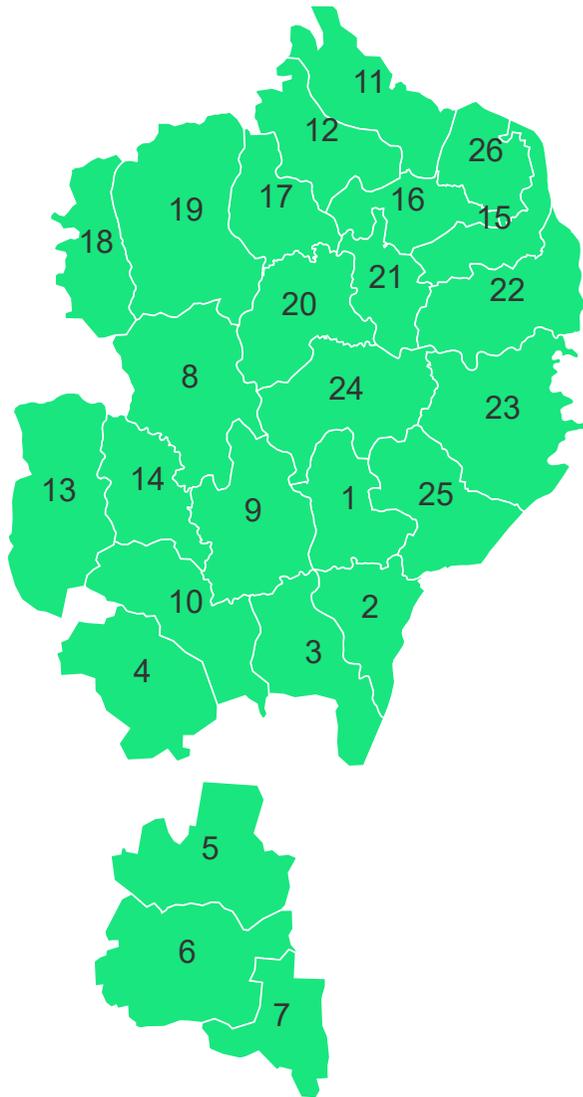
Map 1b | Teknaf completeness by camp

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

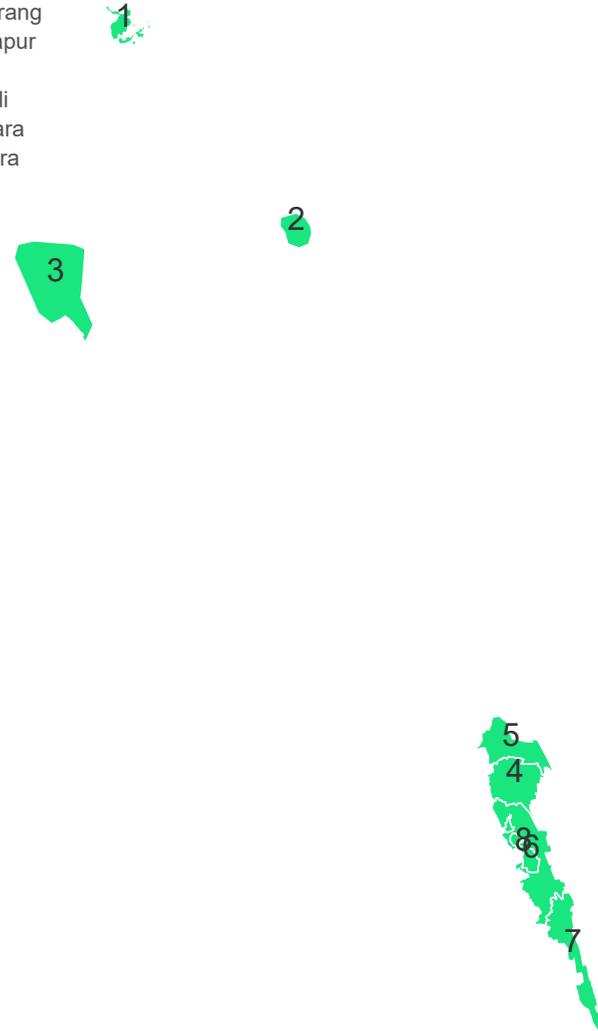Completeness

0   25%   50%   75%   100%

Completeness

0   25%   50%   75%   100%

World Health Organization

HEALTH SECTOR COX'S BAZAR

Table 4 | Performance by camp (W4 2022)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
	Ukhia Northern Group			
Camp 1E	4	3	75%	75%
Camp 1W	5	4	80%	80%
Camp 2E	3	2	67%	67%
Camp 2W	3	3	100%	100%
Camp 3	6	5	83%	83%
Camp 4	5	5	100%	100%
Camp 4 Ext	1	1	100%	100%
Camp 5	5	4	80%	80%
Camp 6	3	2	67%	67%
Camp 7	5	3	60%	60%
Camp 8E	7	6	86%	86%
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
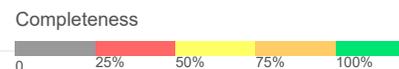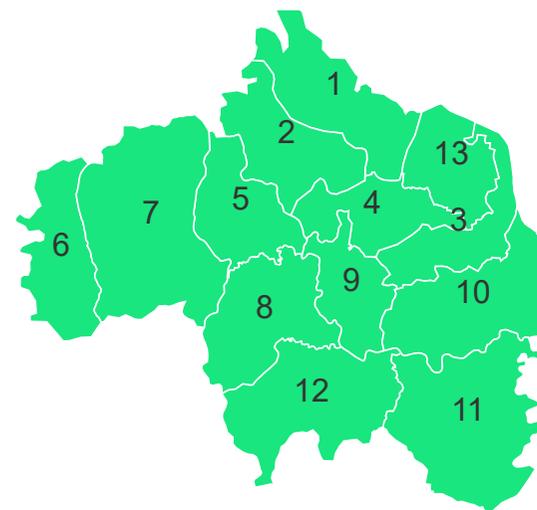9 Camp 6
10 Camp 7
11 Camp 8E
12 Camp 8W
13 Kutupalong RC

Completeness

0   25%   50%   75%   100%

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HEALTH SECTOR COX'S BAZAR

Table 5 | Performance by camp (W4 2022)

Map 3 | Completeness by camp

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	10	90%	90%
Camp 14	7	6	86%	86%
Camp 15	9	7	78%	78%
Camp 16	7	5	71%	71%
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	3	100%	100%
Camp 9	6	5	83%	83%

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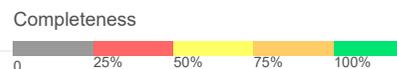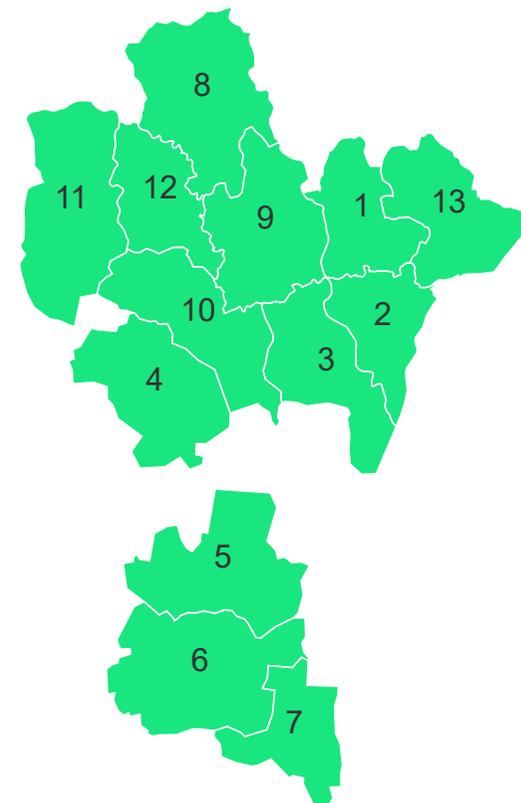9 Camp 18
10 Camp 19
11 Camp 20 Ext
12 Camp 20
13 Camp 9

Completeness

0   25%   50%   75%   100%

World Health Organization

HEALTH SECTOR COX'S BAZAR

Table 6 | Performance by camp (W4 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
		Ukhia Teknaf		
Camp 21 Chakmarkul	4	3	75%	75%
Camp 22 Unchiprang	5	3	60%	60%
Camp 23 Shamlapur	3	2	67%	67%
Camp 24 Leda	1	1	100%	100%
Camp 25 Ali Khali	3	3	100%	100%
Camp 26 Nayapara	4	2	50%	50%
Camp 27 Jadimura	2	1	50%	50%
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
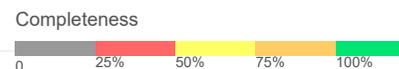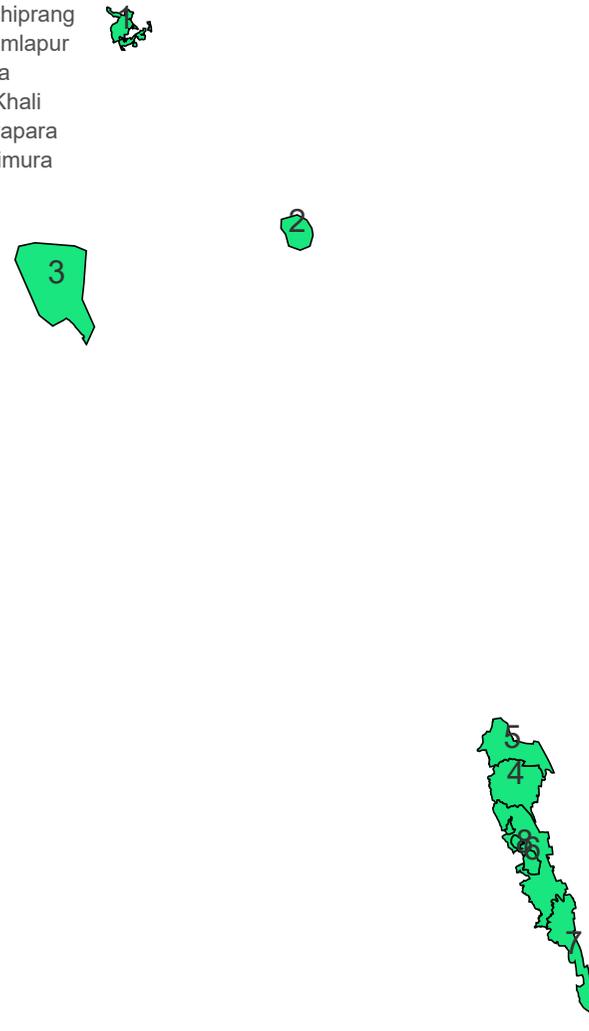6 Camp 26 Nayapara
7 Camp 27 Jadimura
8 Nayapara RC

Completeness

0   25%   50%   75%   100%

World Health Organization

HEALTH SECTOR COX'S BAZAR

Table 7 | Performance by partner (W4 2022)

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	0	0%	0%	IRC	2	2	100%	100%
AWARD	7	7	100%	100%	MSF	9	4	44%	44%
BASHMAH	1	0	0%	0%	MoH	18	14	78%	78%
BDRCS	12	9	75%	75%	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	0	0%	0%
DCHT-PWJ	0	0			PHD	10	10	100%	100%
FRNDS	6	0	0%	0%	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	7	100%	100%
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	0	0%	0%
IOM	18	17	94%	94%					

Table 8 | Performance by camp

Northern group	W4		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
	Alerts Northern group			
Camp 1E	2	100%	7	100%
Camp 1W	3	100%	19	100%
Camp 2E	10	100%	52	100%
Camp 2W	2	100%	15	100%
Camp 3	4	100%	28	100%
Camp 4	3	100%	17	100%
Camp 4 Ext	1	100%	4	100%
Camp 5	4	100%	22	100%
Camp 6	2	100%	9	100%
Camp 7	0	0%	13	100%
Camp 8E	1	100%	7	100%
Camp 8W	5	100%	27	100%
Kutupalong RC	0	0%	7	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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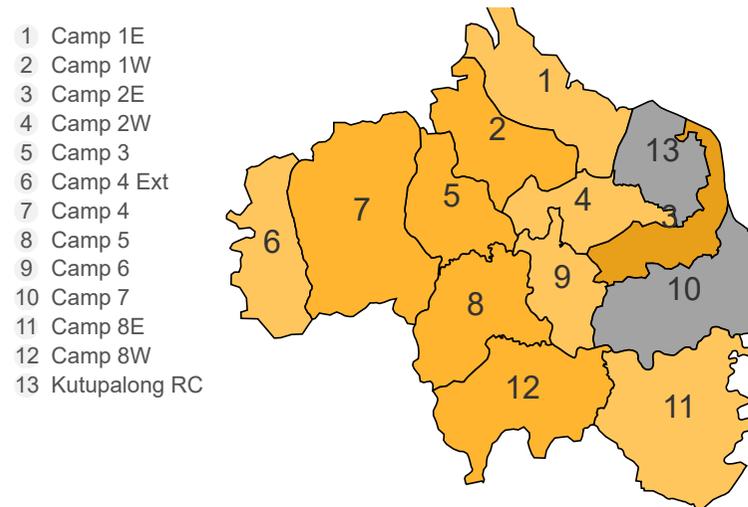
Table 9 | Performance by camp

Southern group	W4		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	5	100%	11	100%
Camp 11	5	100%	15	100%
Camp 12	2	100%	17	100%
Camp 13	4	100%	18	100%
Camp 14	2	100%	7	100%
Camp 15	0	0%	11	100%
Camp 16	1	100%	10	100%
Camp 17	0	0%	5	100%
Camp 18	3	100%	24	100%
Camp 19	1	100%	5	100%
Camp 20	1	100%	8	100%
Camp 20 Ext	3	100%	8	100%
Camp 9	3	100%	21	100%

Map 6 | Number of alerts 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

# of alerts
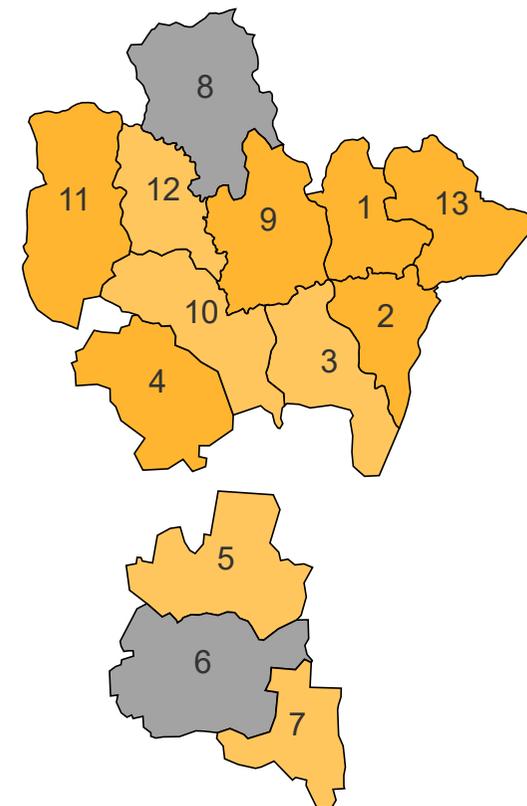
0   2   5   10

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Table 10 | Performance by camp

Teknaf	W4		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	0	0%	7	100%
Camp 22 Unchiprang	1	100%	9	100%
Camp 23 Shamlapur	0	0%	1	100%
Camp 24 Leda	2	100%	12	100%
Camp 25 Ali Khali	1	100%	6	100%
Camp 26 Nayapara	4	100%	19	100%
Camp 27 Jadimura	0	0%	6	100%
Nayapara RC	0	0%	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
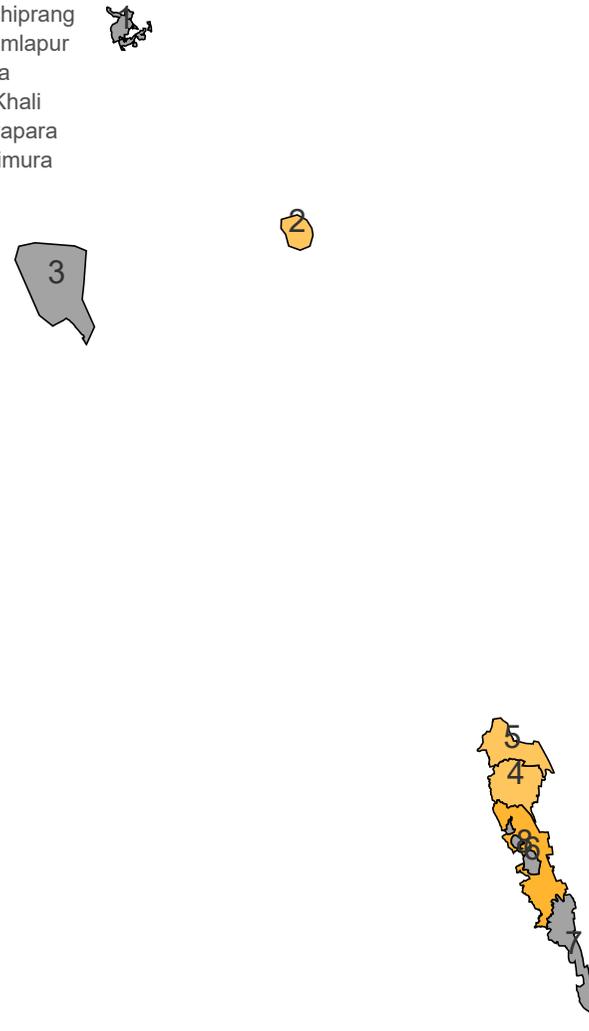6 Camp 26 Nayapara
7 Camp 27 Jadimura
8 Nayapara RC

# of alerts

0   2   5   10

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Table 11 | Performance by type of alert

Event	W4		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	1	100%
Measles	12	100%	61	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	1	100%
Meningitis	0	0%	1	100%
Haem. fever (susp.)	0	0%	0	0%
NNT	0	0%	2	100%
Unexp. fever	6	100%	23	100%
AWD	0	0%	42	100%
ARI	7	100%	44	100%
AJS	0	0%	7	100%
Varicella (Susp.)	0	0%	0	0%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	9	100%	35	100%

Table 12 | Risk assessment

W4	Cumulative (2022)	
0	0	Low risk
0	0	Moderate risk
0	0	High risk
0	0	Very high risk

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Ministry of Health and Family Welfare Bangladesh

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Global EWARS

Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Annex W4 2022

**Ministry of Health and Family
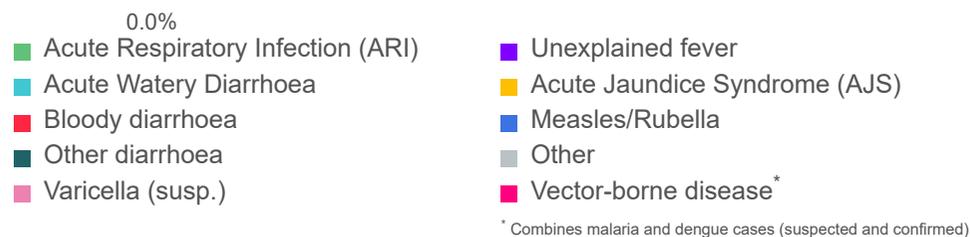Welfare Bangladesh**

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Organization

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COX'S BAZAR

Proportional morbidity

Figure 1 | Proportional morbidity (W4 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	W4		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	2,296	2.5%	13,739	2.6%
Bloody diarr.	320	0.3%	1,965	0.4%
Other diarr.	698	0.8%	4,898	0.9%
Susp. Varicella	68	0.1%	281	0.1%
ARI	20,735	22.4%	103,098	19.7%
Measles/Rub.	22	0.0%	121	0.0%
AFP	0	0.0%	5	0.0%
Susp. menin.	0	0.0%	4	0.0%
AJS	16	0.0%	77	0.0%
Susp. HF	0	0.0%	0	0.0%
Neo. tetanus	0	0.0%	4	0.0%
Adult tetanus	1	0.0%	1	0.0%
Malaria (conf.)	1	0.0%	204	0.0%
Malaria (susp.)	2,292	2.5%	13,740	2.6%
Dengue (conf.)	35	0.0%	330	0.1%
Dengue (susp.)	30	0.0%	223	0.0%
Unexpl. fever	1,065	1.2%	7,146	1.4%
Sev. Malnut.	37	0.0%	394	0.1%
Inj./Wounds	1,506	1.6%	9,652	1.8%
Other	63,150	68.4%	367,809	70.1%
Total	**91,326**	**100%**	**524,364**	**100%**

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Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W4)

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)

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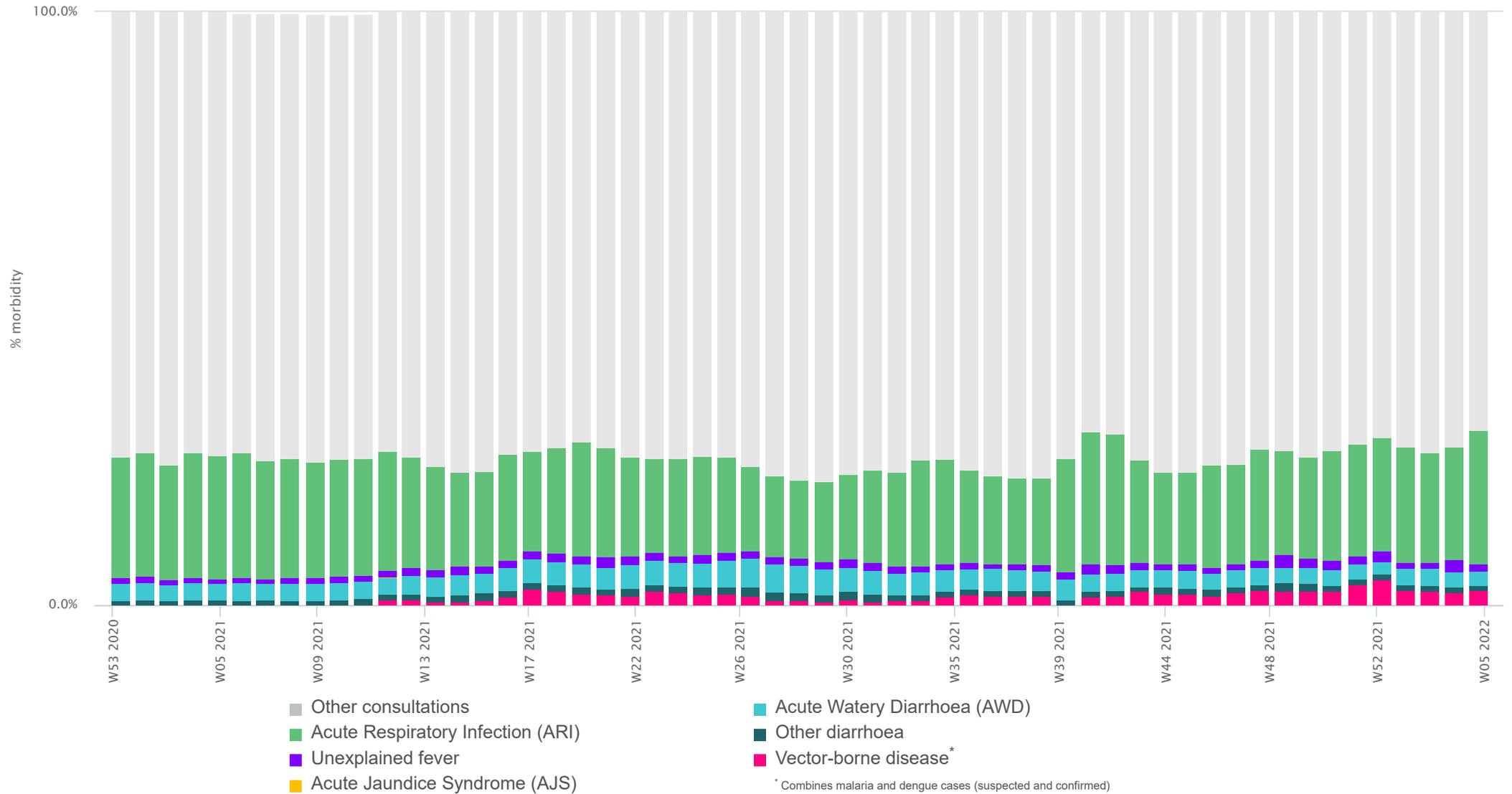
Figure 3 | Trend in number of cases over time (W38 2017 - W4 2022)
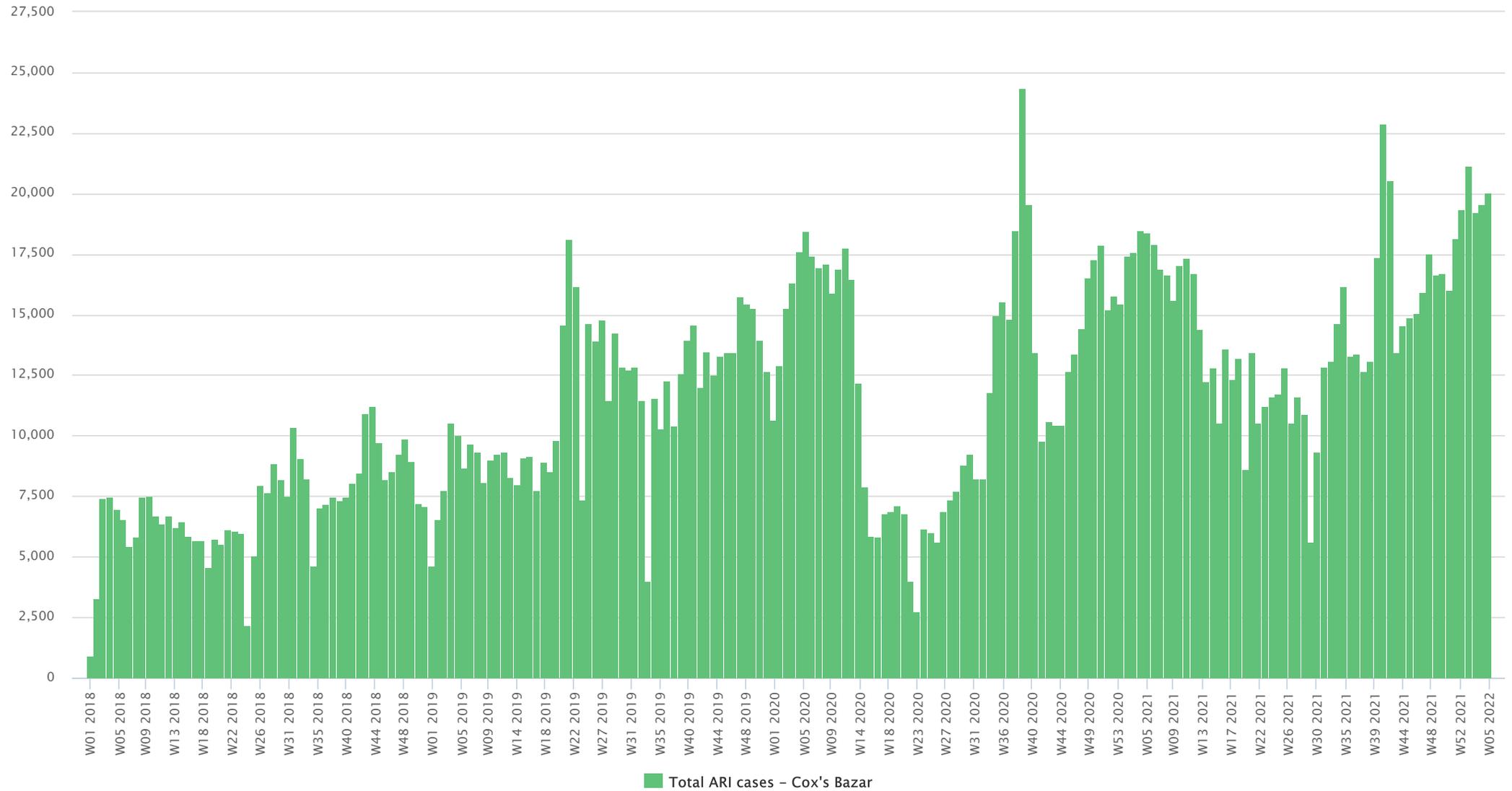
Total ARI cases – Cox's Bazar

Map 1 | Map of cases by camp (W4 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
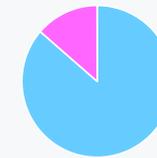
Number of cases

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 (W4 2022)

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

Figure | % sex

- Female
- Male

Figure | % age

- >=5
- < 5

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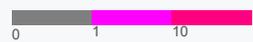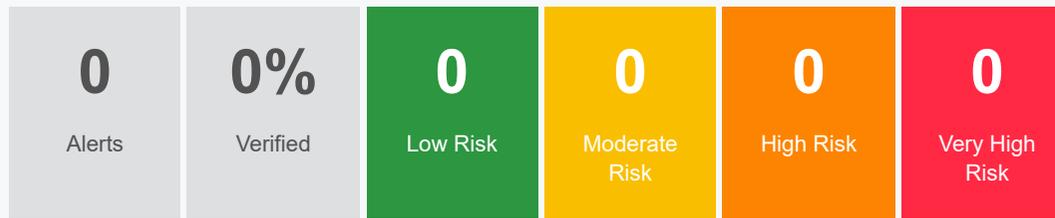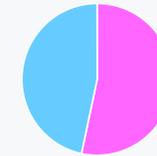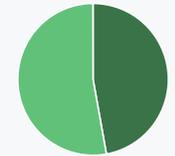
Figure 4 | Trend in number of suspected cases over time (W38 2017 - W4 2022)

Total suspected measles/rubella cases – Cox's Bazar
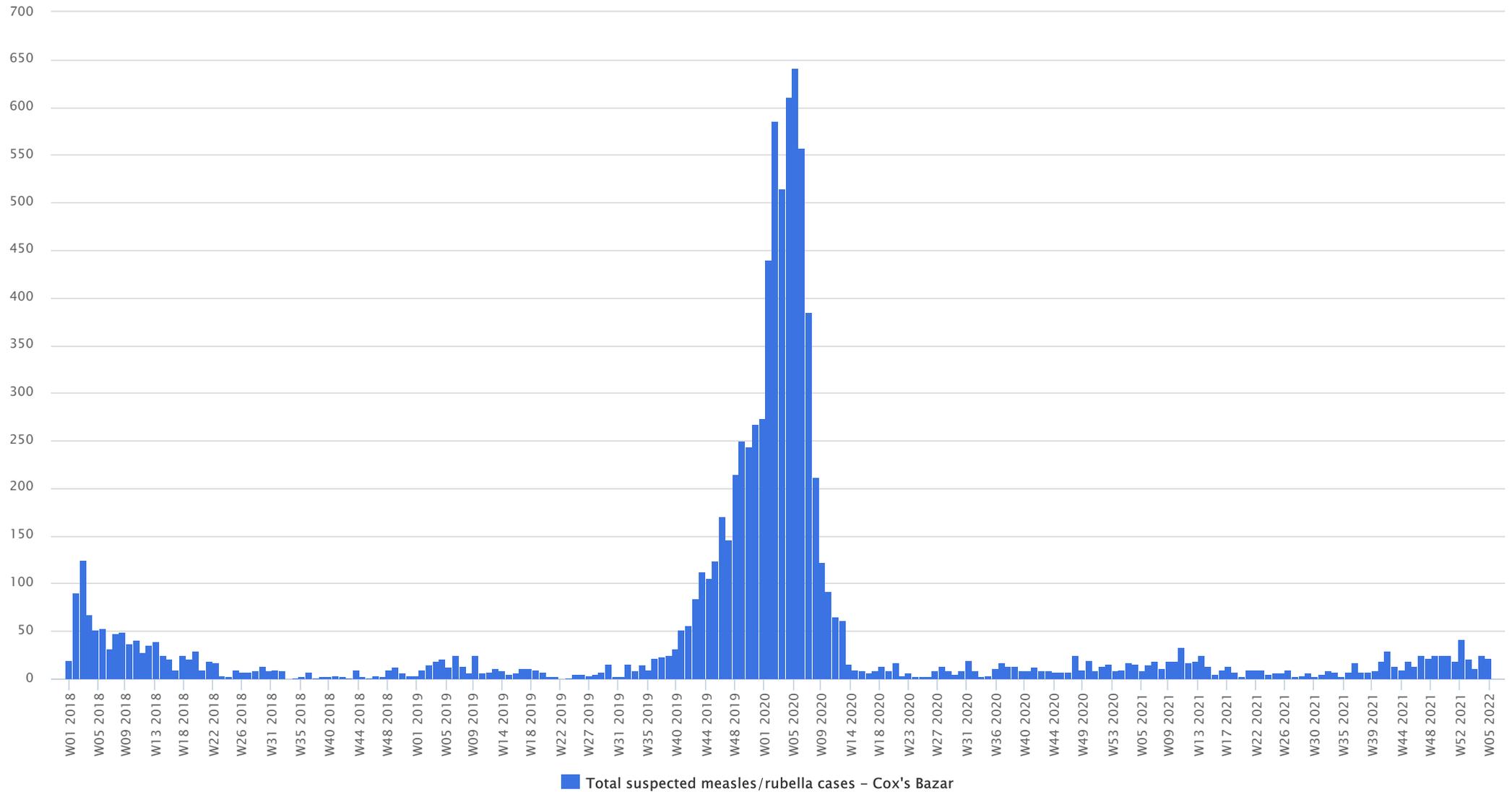
Map 2 | Map of cases by camp (W4 2022)

a. Ukhia | Number of cases
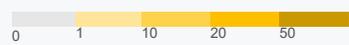Loading...

b. Ukhia | Number of alerts
Loading...

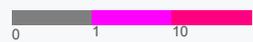**c. Teknaf** | Number of cases
Loading...

d. Teknaf | Number of alerts
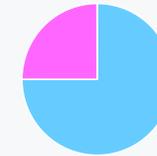Loading...

Map legend

Number of cases

| 0 | 1 | 10 | 20 | 50 | |

Number of alerts

| 0 | 1 | 10 | |

Alert threshold
1 case. *Source: IEDCR*

Alert management (W4 2022)

12	100%	0	0	0	0
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

■ Male ■ Female

Figure | % age

■ >= 5 ■ < 5

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Figure 5 | Trend in number of cases over time (W38 2017 - W4 2022)

Total suspected AJS cases – Bangladesh
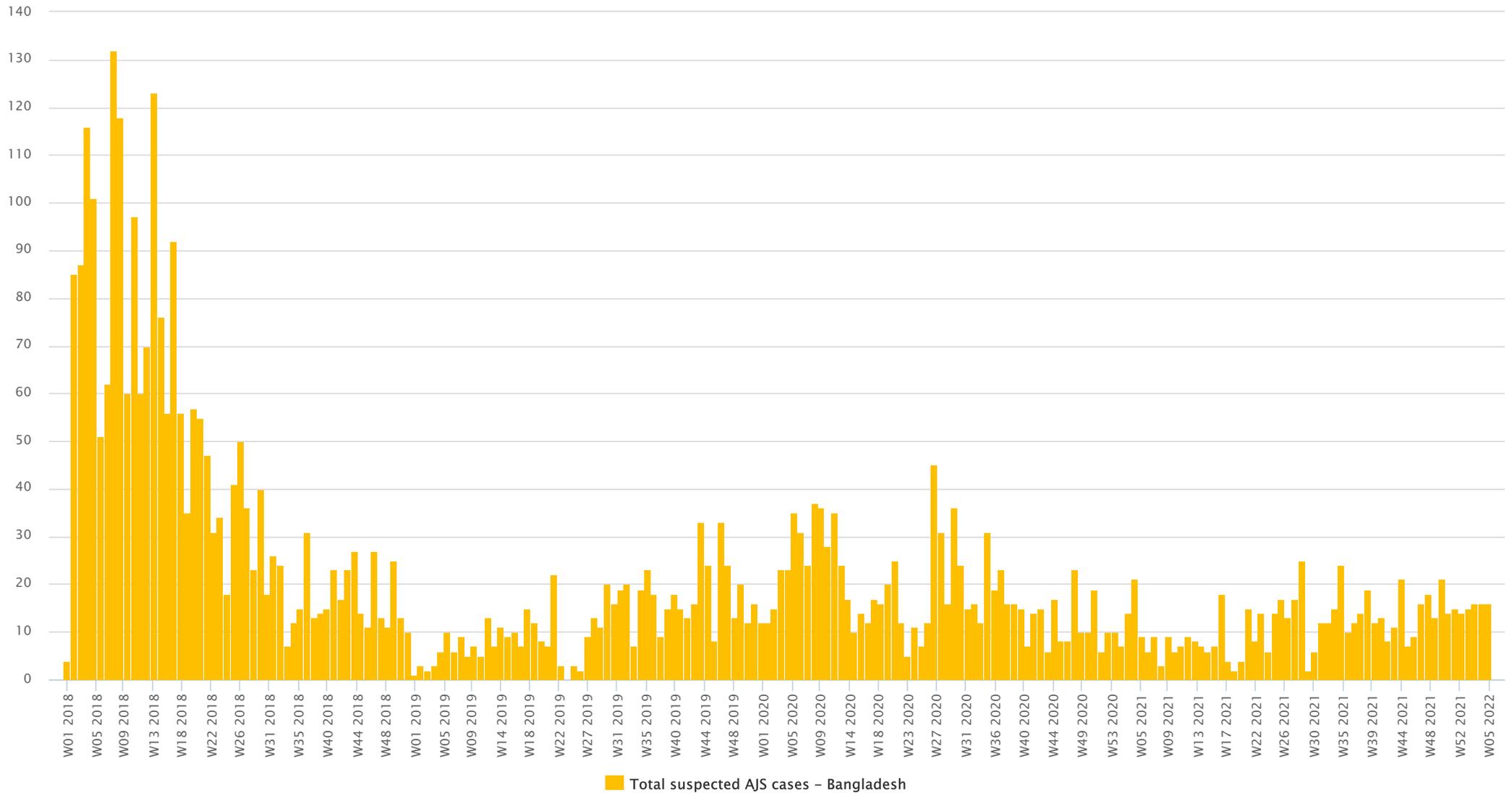
Map 3 | Map of cases by camp (W37 2017 - W4 2022)

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 | |

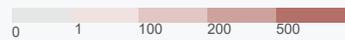**Alert threshold**
A cluster of 3 or more cases seen in a health facility. *Source: IEDCR*

Alert management (W4 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

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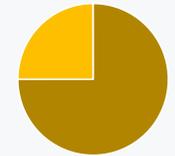
Figure 6 | Trend in number of cases over time (W38 2017 - W4 2022)
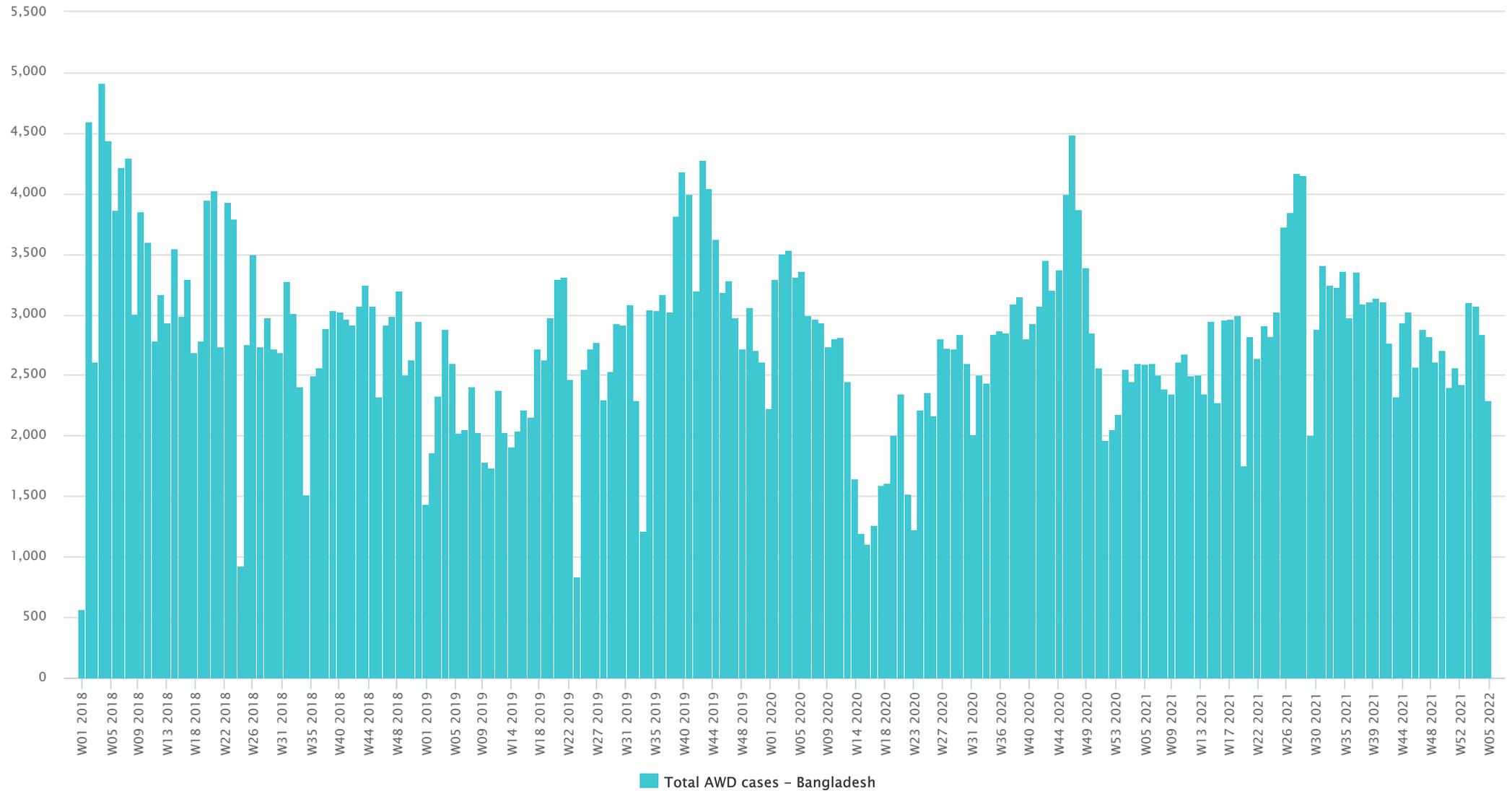
Total AWD cases – Bangladesh

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Figure 7 | Trend in number of cases over time (W38 2017 - W4 2022)

Legend: ▮ Total Dengue Cases – Suspected – Bangladesh ▮ Total Dengue Cases – Confirmed – Bangladesh

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Map 4 | Map of cases by camp (W37 2017 - W4 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*
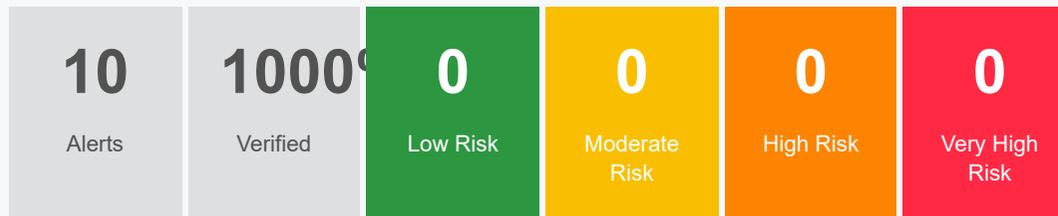
Alert management (W4 2022)

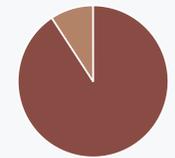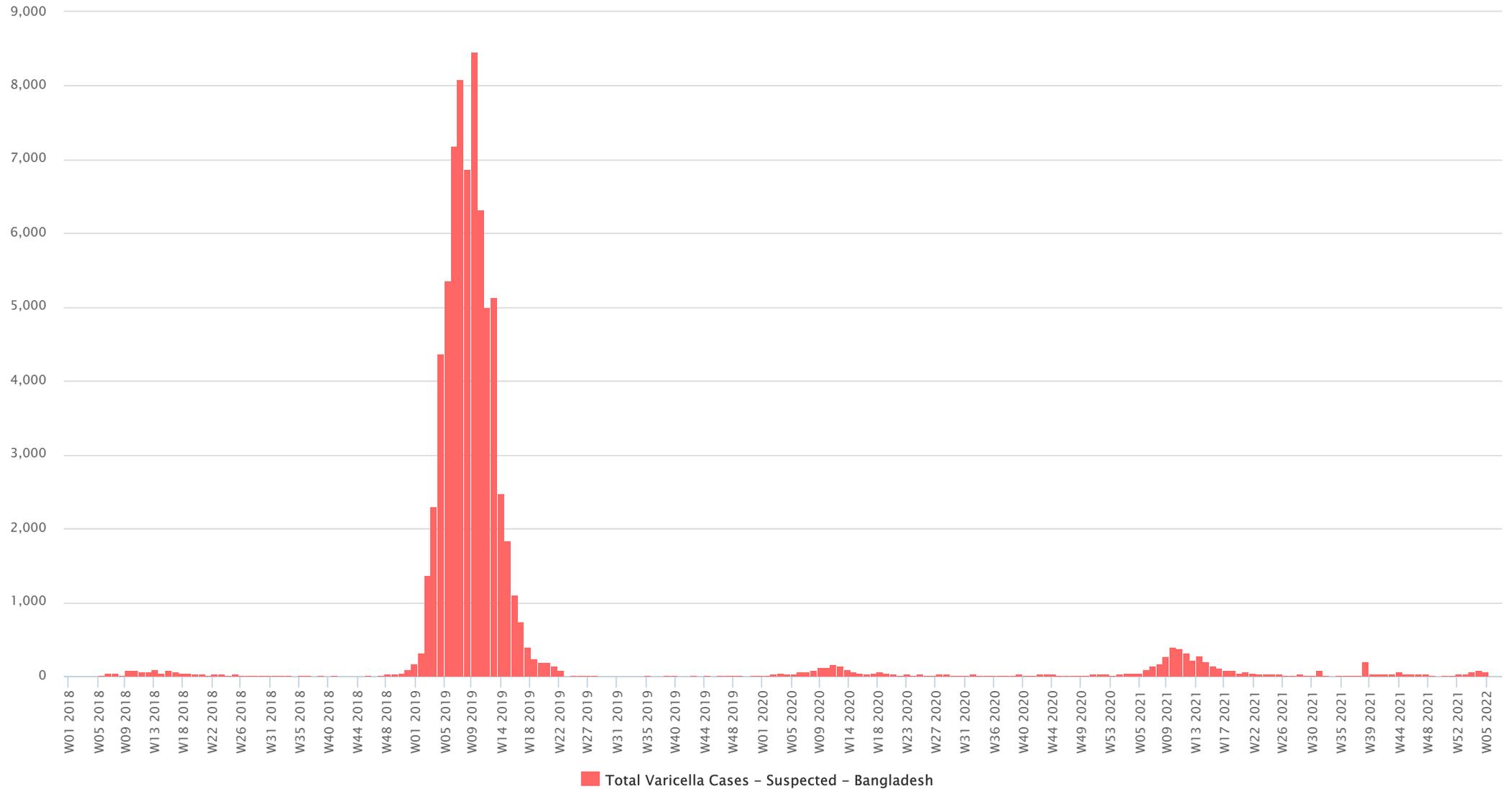| **10** Alerts | **1000%** Verified | **0** Low Risk | **0** Moderate Risk | **0** High Risk | **0** Very High Risk |

Figure | % sex

Female Male

Figure | % age

>= 5 < 5

Figure 7 | Trend in number of cases over time (W38 2017 - W4 2022)

Total Varicella Cases – Suspected – Bangladesh

World Health Organization

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Map 4 | Map of cases by camp (W37 2017 - W4 2022)

a. Ukhia | Number of cases

Loading...

c. Teknaf | Number of cases

Loading...

Map legend

Number of cases

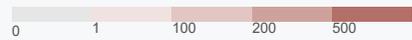0   1   100   200   500

Figure | % sex

■ Male   ■ Female

Figure | % age

■ < 5   ■ >= 5

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