



# Epidemiological Highlights

Week 37 (4-10 September) 2022



World Health  
Organization

# Highlights: COVID-19

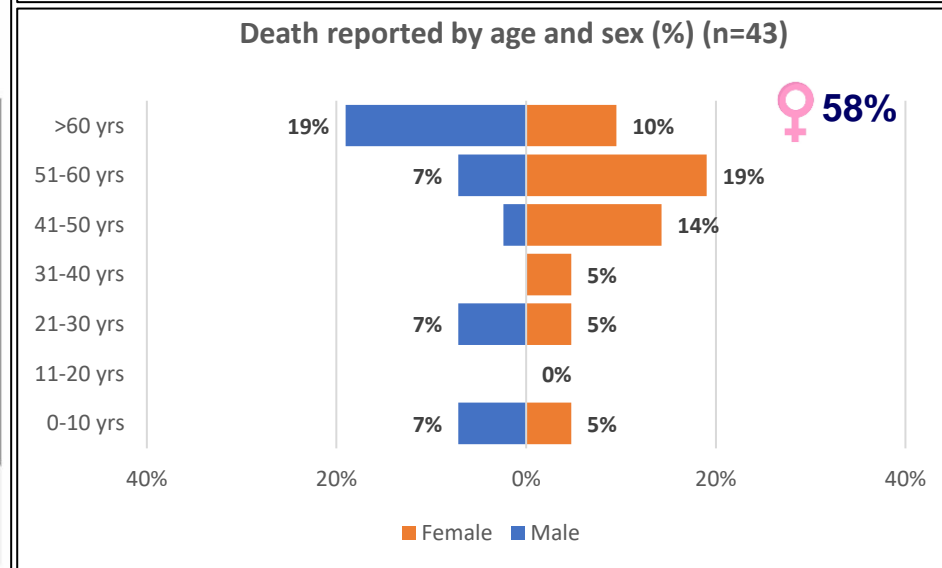
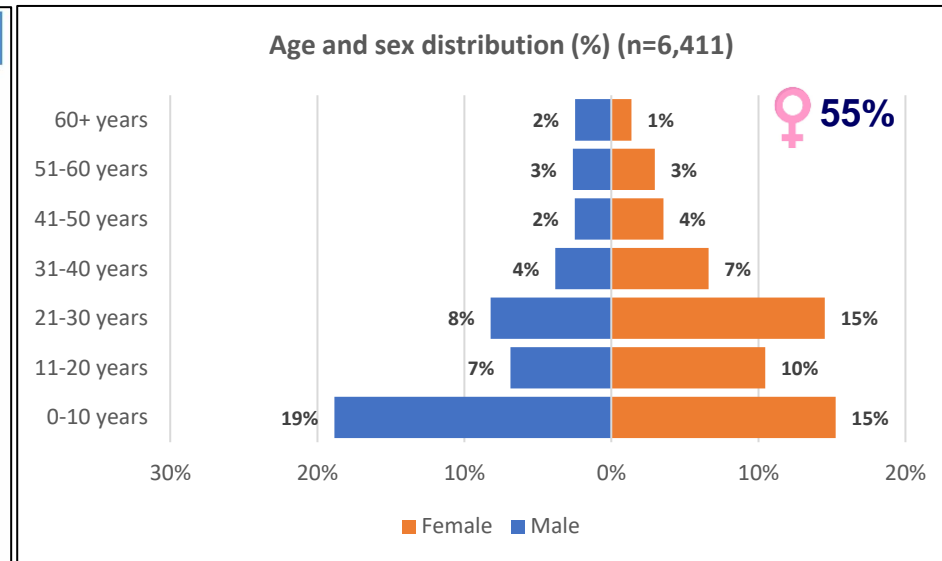
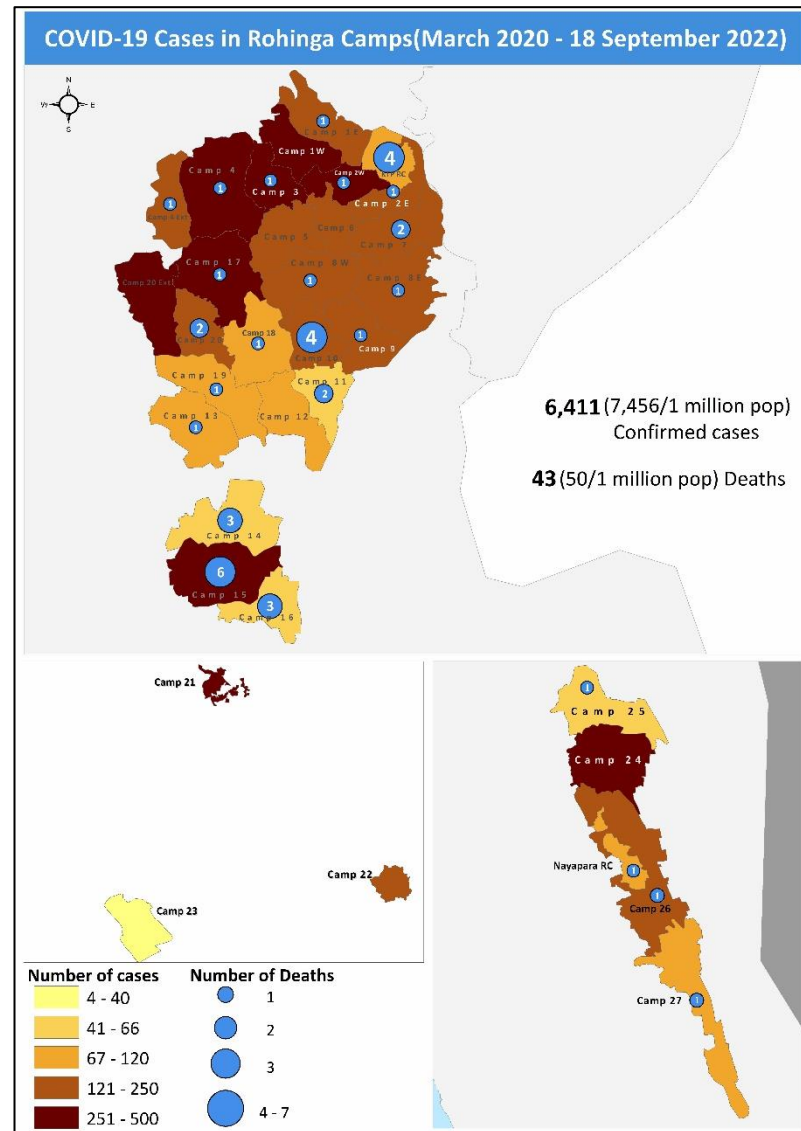
As of week 37, (12-18 Sep) 2022 there were **6,411 confirmed cases** of COVID-19 (SARS-CoV-2), out of 111,285 **samples** that had been submitted for testing. The **Total Positivity Rate (TPR)** now stands at **5.8%**

In the reporting week, again 4 new confirmed cases were detected out of 600 total samples tested. This translated to a 0.7% TPR which is like the previous week's 0.7%.

As of this week (week 37)

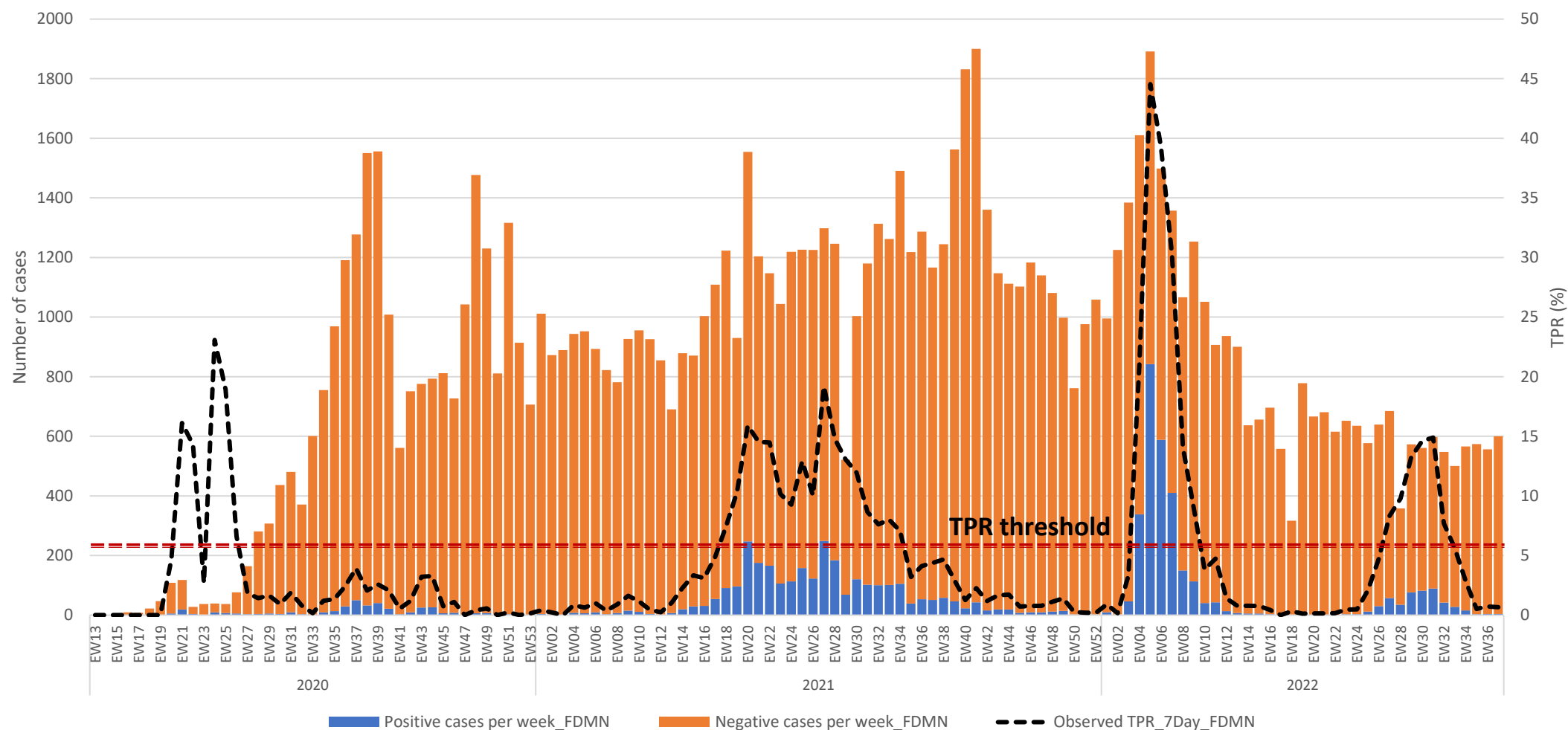
- **Median age** of tested and confirmed cases were 11 (0-120) and 20 (0-100) years respectively
- **Proportion of females** among tested and confirmed cases were 54% and 55% respectively
- **All 34 camps**, have so far reported confirmed cases since the outbreak began, while the five camps with the highest number of reported cases were; C24-478, C17-449, C2W-414, C4-394, and C3-344
- No new death was reported in this Epi week. The total confirmed COVID-19 deaths so far reported to date stands at 43 with an average **case-fatality ratio** of 0.7%
- The **weekly incidence** was 4.4 cases/1 million population in this Epi week which is like the previous week's 4.4 cases/1 million population.

# Highlights: COVID-19



# Highlights: COVID-19

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



# EWARS Reporting Updates

- Currently, a total of 169 health facilities are registered in EWARS
  - Only 147/169 weekly reports were received on time in week 37
  - Timeliness of reporting for this week was 87%
  - One hundred eleven (111) alerts were triggered
  - All alerts were reviewed and verified by the WHO EWARS team; this was less than the previous week (117 alerts in week 36, 2022).

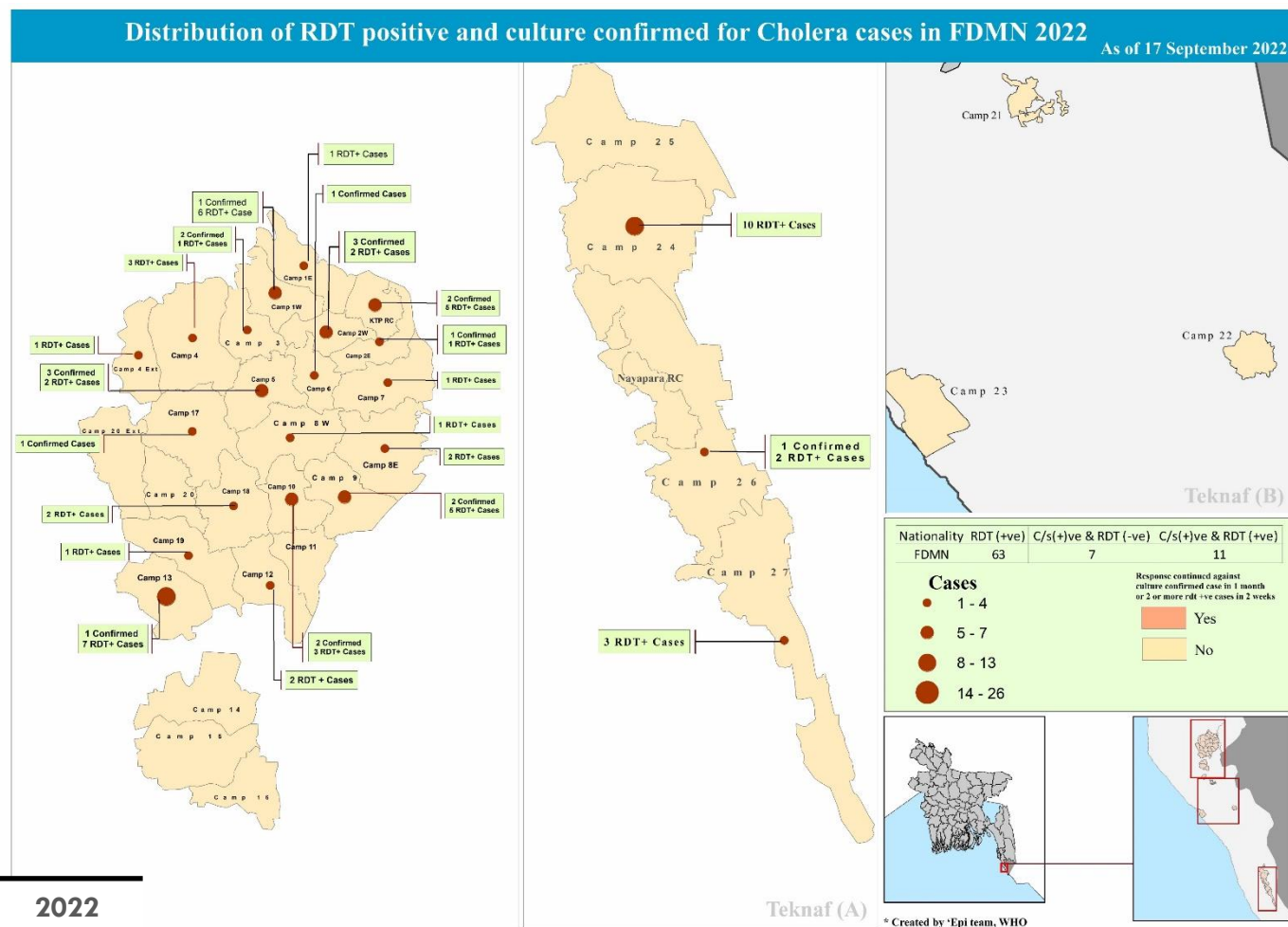
# Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (18.6%), Diarrheal Diseases (4.4%) & Injuries, and Wounds (1.6%) were the diseases and health conditions with the highest proportional morbidity in week 37.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. A total of 104 SARI deaths have so far been report in 2022 of which Seven (07) deaths upon investigation of all SARI deaths were reclassified as probable COVID-19 Deaths
- This Epi week, one (1) new SARI death was reported as highlighted below:

Year	Suspected SARI death reported (Current Week)	Reclassified as death due to probable COVID-19
2022	102(1)	7
2021	96	15
2020	49	2

# Cholera/AWD Surveillance Updates

- In this week, there is six (6) new RDT-positive AWD cases/Cholera suspects was reported, among samples sent for testing.
- In 2022 total of one hundred-nine (109) RDT Positive AWD cases/Cholera suspects were reported as of W37 2022. Of these 25 were culture confirmed Cholera cases while 84 cases were negative for culture.
- Cumulatively there are 801 RDT Positive AWD cases/Cholera Suspects and culture-confirmed cholera cases of which 357 cases were culture-confirmed since transmission in 2018



	2018	2019	2020	2021	2022 W37
RDT positive/culture confirmed for Cholera	49	258	28	357	109
Culture confirmed for Cholera	7	184	5	136	25

# Diphtheria Surveillance Updates

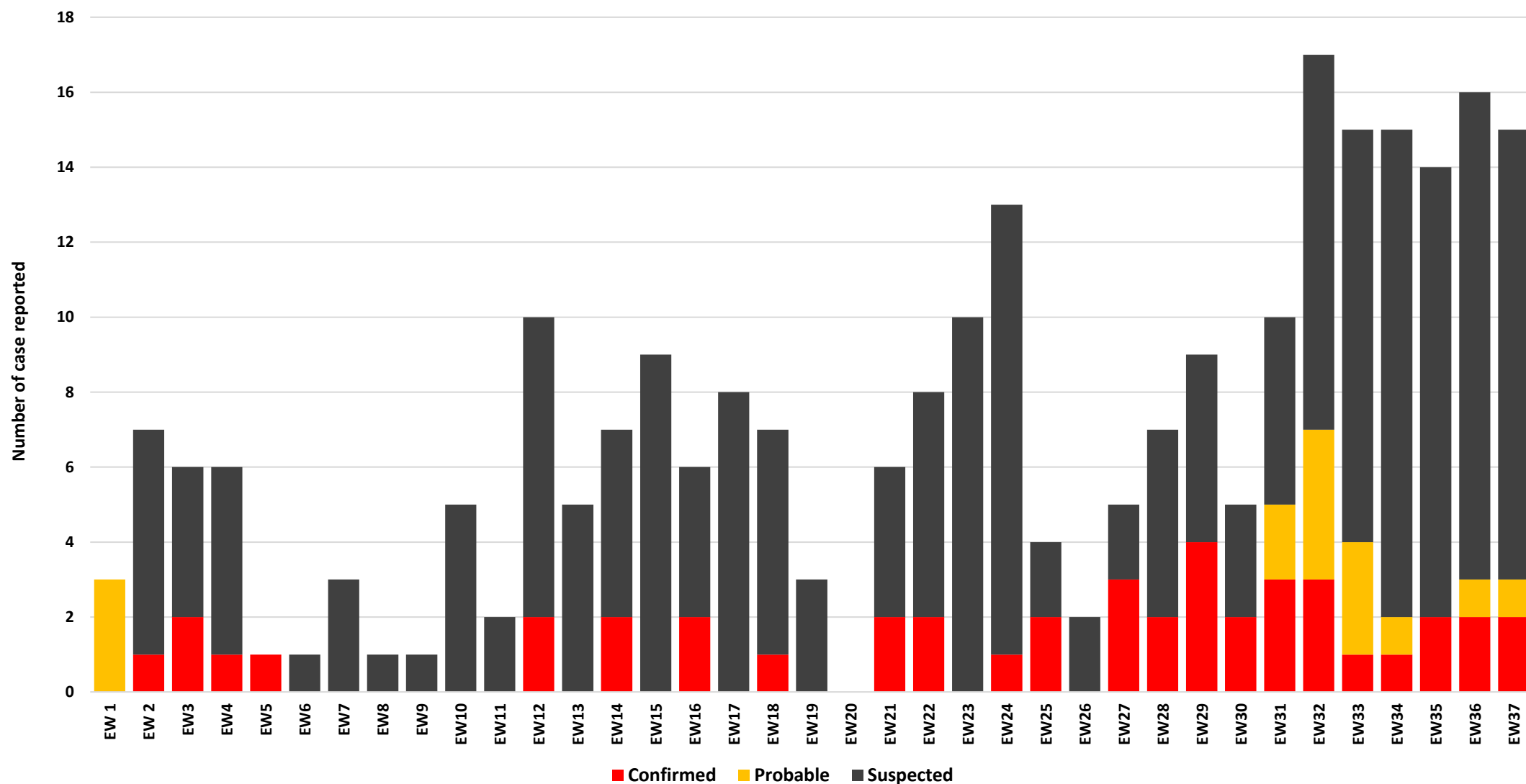
- Two (2) confirmed, 1 probable and 12 suspected diphtheria cases were reported in go.data in this Epi week 37
- The last confirmed case was reported on 7 September 2022
- In total 53 deaths have so far been reported since 2017, with the last death reported on 25 April 2022

Classification	2017	2018	2019	2020	2021	2022
Confirmed	66	226	31	19	30	44
Probable	1154	1555	60	9	29	15
Suspected	1796	3549	523	198	118	201
Death	30	14	3	0	5	1



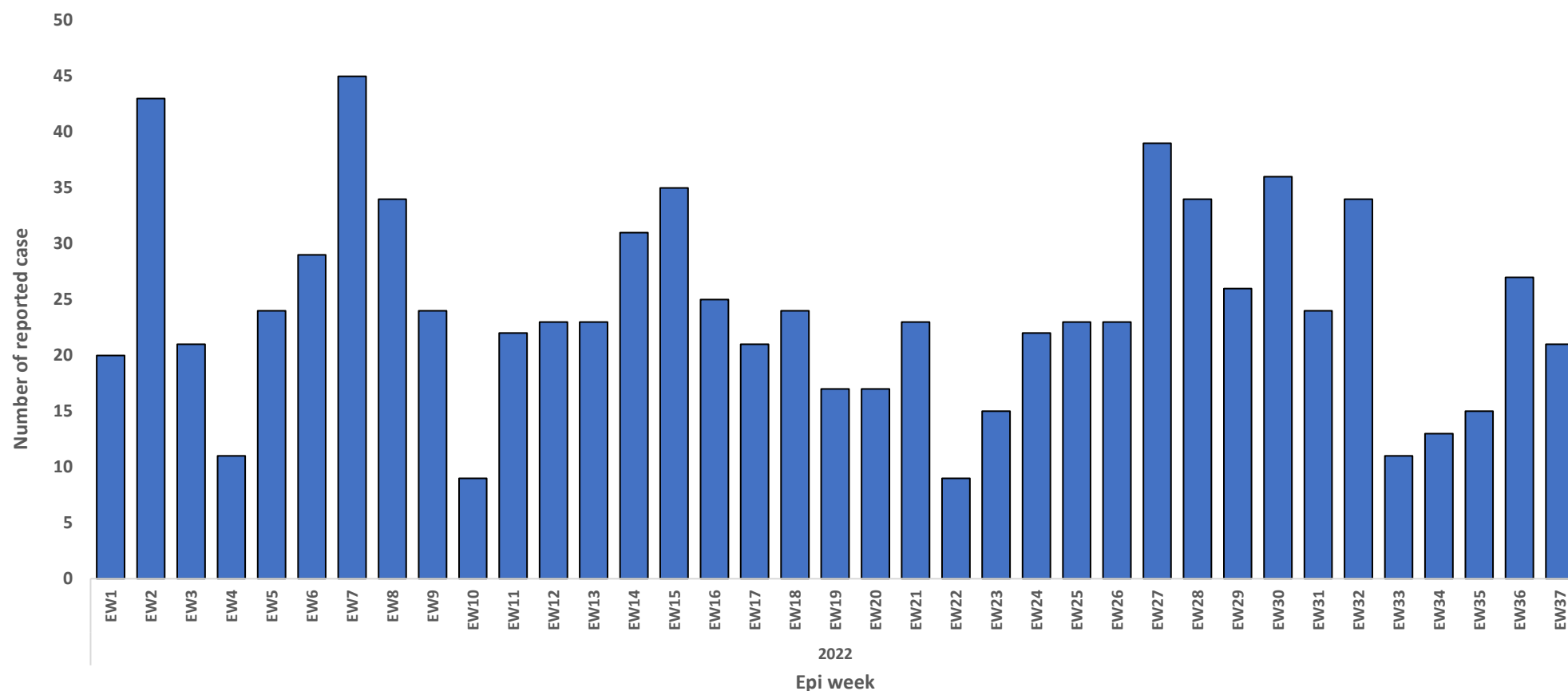
# Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from week 1-37, 2022



# Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from week 1-37, 2022



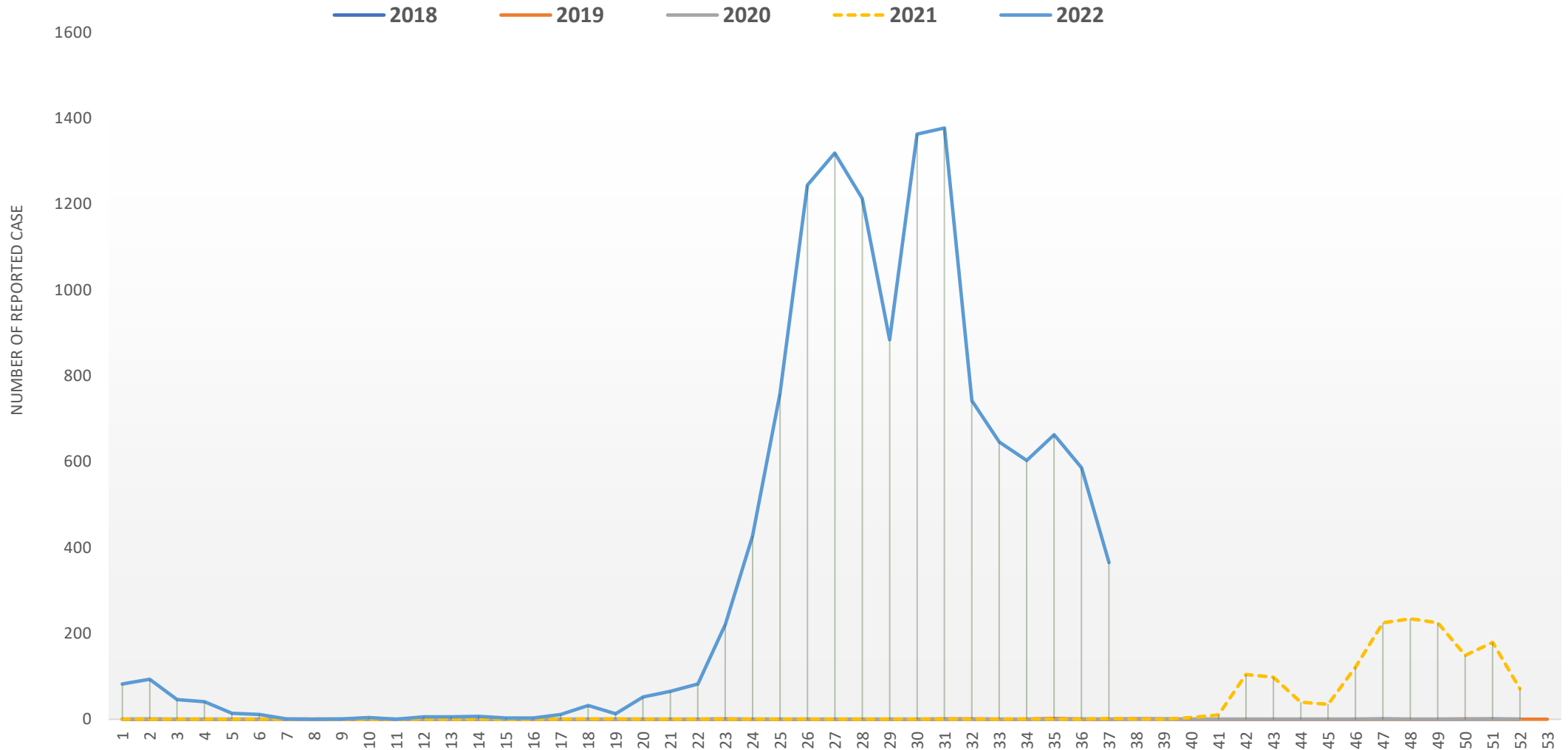
- > In week 37, 21 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 893 reported in 2022
- > About 55% (490/893) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

# Dengue Surveillance Updates

Year	Month/Epi Week	Confirmed case	Death	Confirmed case (cumulative)	Death (cumulative)
2022	Jan (Ew1-5)	276	0	276	0
	Feb (Ew6-9)	13	0	289	0
	March (Ew10-14)	23	0	312	0
	April (Ew15-18)	49	0	361	0
	May (Ew19-22)	212	0	573	0
	June (Ew23-27)	3,969	2	4,542	2
	July (Ew28-31)	4,837	8	9,379	10
	August (Ew 32-35)	2,654	5	12,033	15
	September (as of 10 Sep)	951	2	12,884	17

# Dengue Surveillance Updates

Yearly Trends of Dengue case trend from 2018 - Epi Week 37, 2022



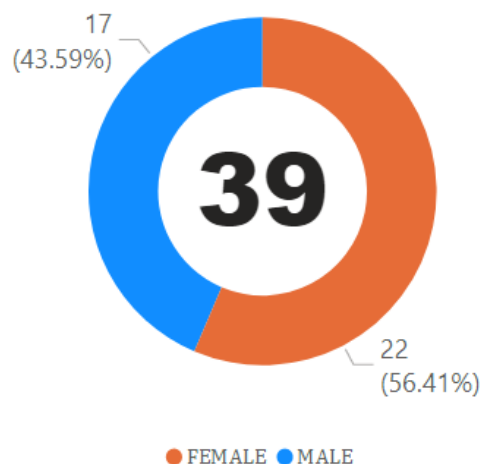
# Community-based Mortality surveillance updates Epi week 37

Probable causes of death	Epi week 37	In 2022
Still Birth	10 (26%)	144 (11%)
Neonatal Death (<28 days old)	1 (3%)	134 (9%)
Infectious Disease	1 (3%)	143 (10%)
Severe Acute Respiratory Infection (SARI)	1 (3%)	39 (3%)
Injury	1 (3%)	34 (2%)
Maternal Death	--	31 (2%)
Acute Malnutrition	--	1 (0%)
Other	25 (64%)	932 (64%)
<b>Total</b>	<b>39(100%)</b>	<b>1458 (100%)</b>

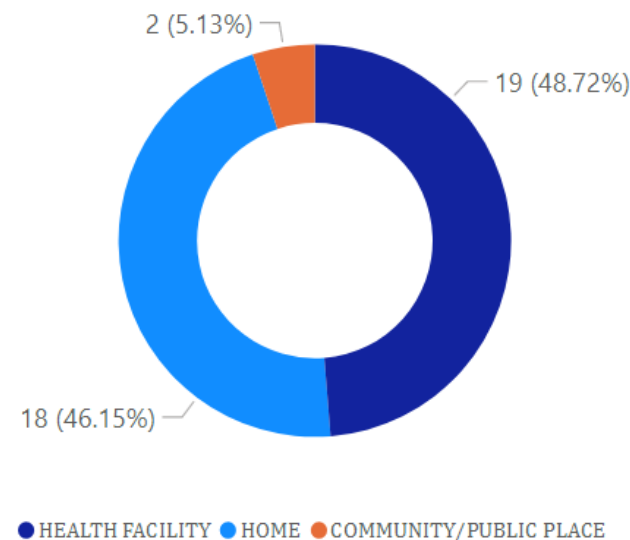
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

# Community-based Mortality surveillance updates Epi week 37

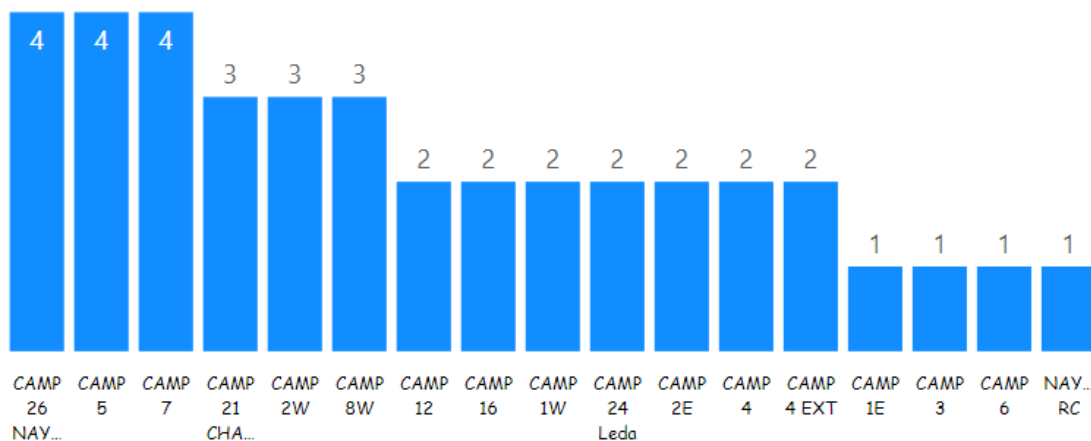
**Gender distribution**



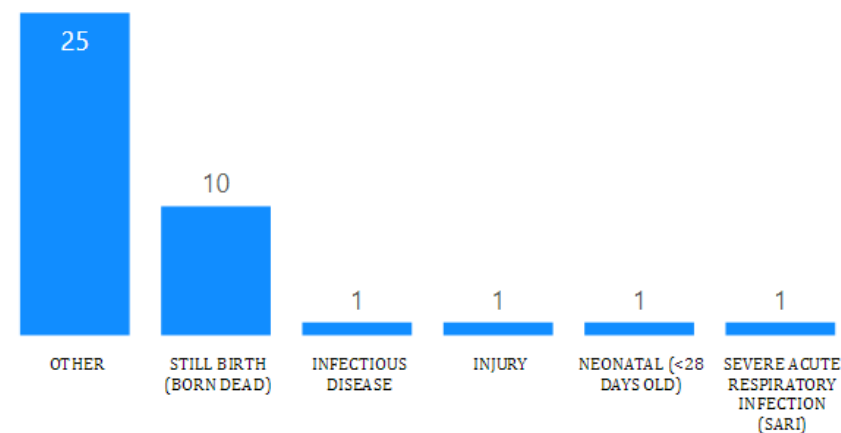
**Place of death**



**Distribution of deceased Camp**



**Distribution of Probable cause of death**



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Epidemiological Bulletin W37 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



Printed: 10:22 Wednesday, 14 September 2022 UTC

# Contents

## Highlights

Slide 1	<b>Table 1</b> Coverage
	<b>Table 2</b> Early warning performance
	<b>Table 3</b> Alert performance

## Early Warning

Slide 2	<b>Map 1a</b> Ukhia completeness by site/zone
	<b>Map 1b</b> Teknaf completeness by site/zone
Slide 3	<b>Table 4</b> Ukhia (Northern group) performance by site/zone
	<b>Map 2</b> Ukhia (Northern group) completeness by site/zone
Slide 4	<b>Table 5</b> Ukhia (Southern group) performance by site/zone
	<b>Map 3</b> Ukhia (Southern group) completeness by site/zone
Slide 5	<b>Table 6</b> Teknaf performance by site/zone
	<b>Map 4</b> Teknaf completeness by site/zone
Slide 6	<b>Table 7</b> Performance by partner

## Alert

Slide 7	<b>Table 8</b> Ukhia (Northern group) alerts by site/zone
	<b>Map 5</b> Ukhia (Northern group) alerts site/zone
Slide 8	<b>Table 9</b> Ukhia (Southern group) alerts by site/zone
	<b>Map 6</b> Ukhia (Southern group) alerts site/zone
Slide 9	<b>Table 10</b> Teknaf alerts by site/zone
	<b>Map 7</b> Teknaf alerts site/zone
Slide 10	<b>Table 11</b> Performance by type of alert
	<b>Table 12</b> Risk Assessment

## Sources of data

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



## Highlights W37 2022

**Table 1 | Coverage**

#	%	
<b>918,841</b>	-	Estimated total Rohingya population <sup>1</sup>
<b>902,086</b>	<b>98%</b>	Total population under surveillance
<b>175</b>	-	Total number of health facilities
<b>169</b>	<b>97%</b>	Number of EWARS reporting sites

**Table 2 | Early warning performance indicators**

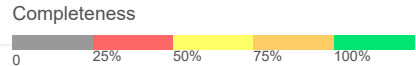
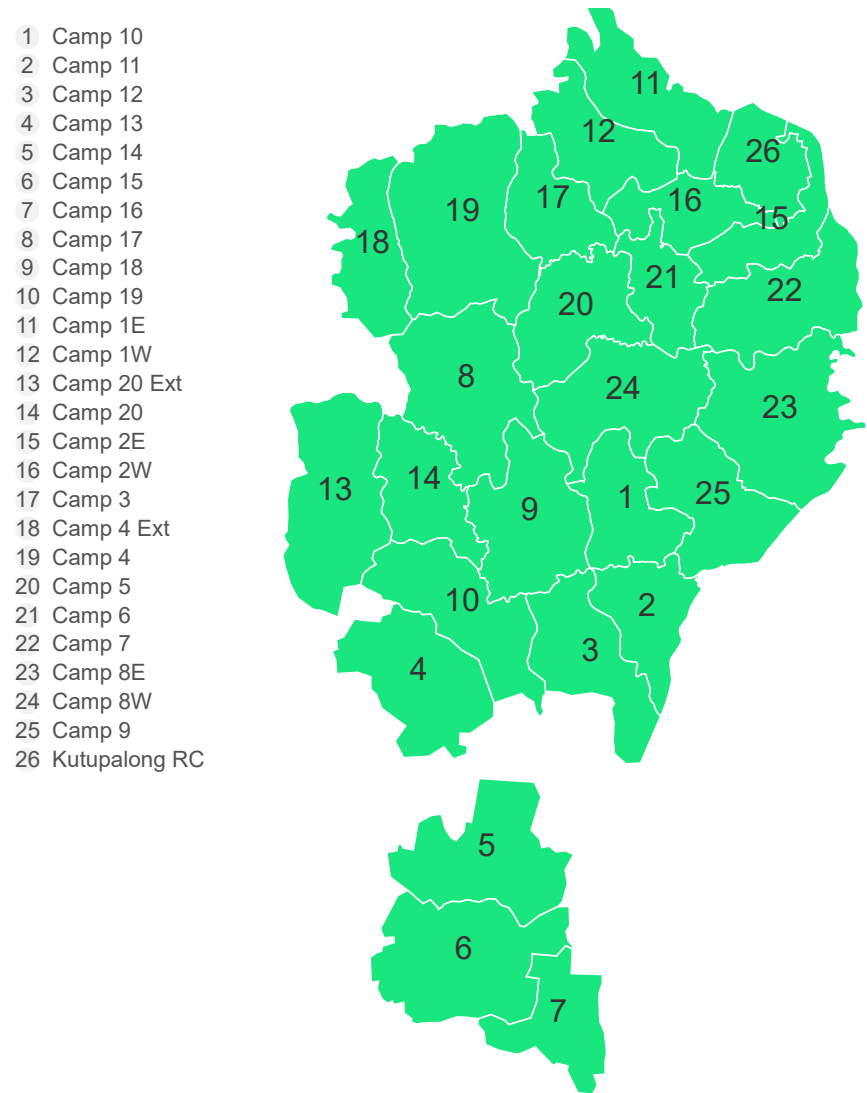
W37	Cumulative (2022)	
<b>147</b>	<b>5929</b>	Number of weekly reports received
<b>87%</b>	<b>92%</b>	Completeness
<b>87%</b>	<b>91%</b>	Timeliness

**Table 3 Alert performance indicators**

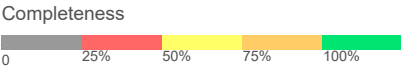
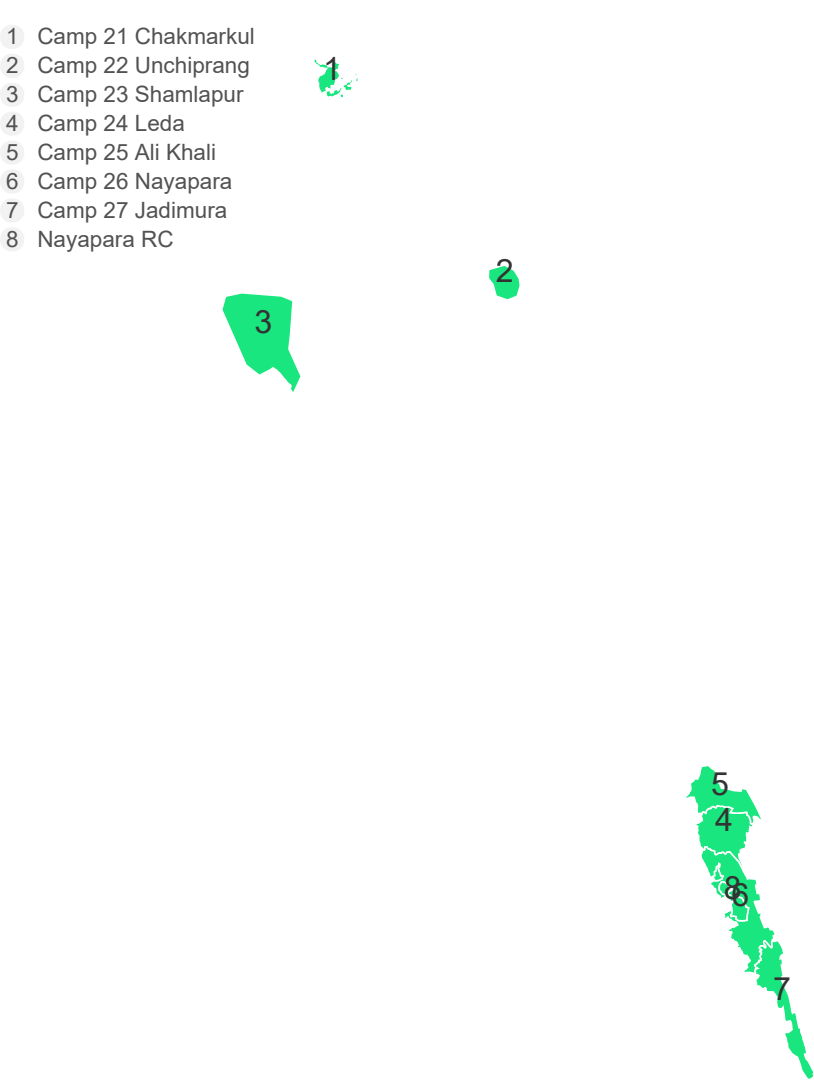
W37	Cumulative (2022)	
<b>111</b>	<b>3,311</b>	Total alerts raised
<b>100%</b>	<b>100%</b>	% verified
<b>0%</b>	<b>0%</b>	% auto-discarded
<b>0%</b>	<b>0%</b>	% undergoing risk assessment
<b>0%</b>	<b>0%</b>	% completed risk assessment

<sup>1</sup> Source: UNHCR. Bangladesh: Joint Government of Bangladesh- UNHCR Population Factsheet. 31 December 2021.

Map 1a | Ukhia completeness by camp



Map 1b | Teknaf completeness by camp

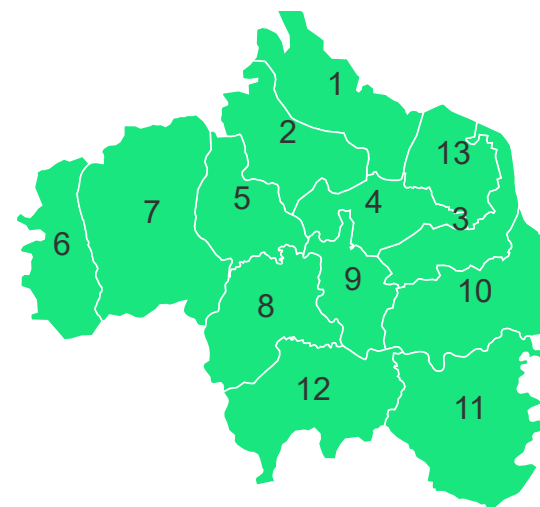


**Table 4 | Performance by camp (W37 2022)**

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	3	3	100%	0%
Camp 1W	5	4	80%	0%
Camp 2E	3	3	100%	0%
Camp 2W	3	4	100%	0%
Camp 3	5	5	100%	0%
Camp 4	5	5	100%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	5	100%	0%
Camp 6	3	3	100%	0%
Camp 7	6	6	100%	0%
Camp 8E	8	8	88%	0%
Camp 8W	4	4	100%	0%
Kutupalong RC	2	2	100%	0%

**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

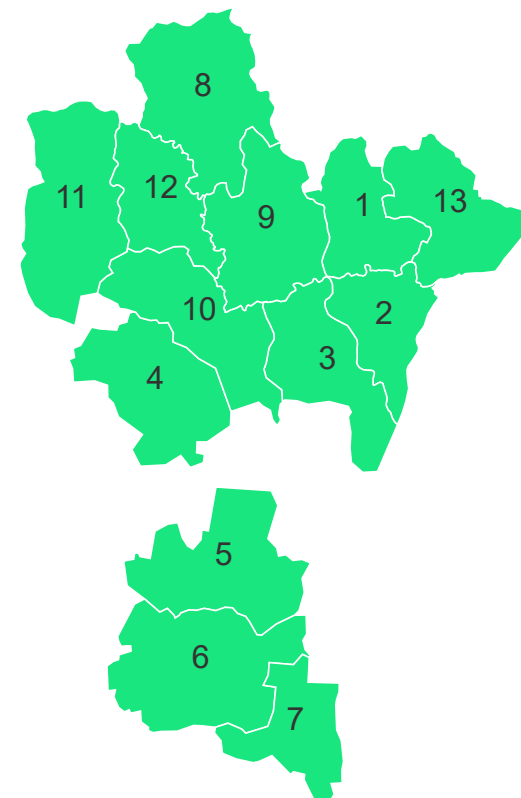


**Table 5 | Performance by camp (W37 2022)**

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	3	100%	0%
Camp 11	8	6	75%	0%
Camp 12	6	5	83%	0%
Camp 13	10	9	90%	0%
Camp 14	7	6	86%	0%
Camp 15	9	6	67%	11%
Camp 16	7	6	100%	0%
Camp 17	5	5	100%	0%
Camp 18	5	4	80%	0%
Camp 19	5	4	80%	0%
Camp 20	4	3	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	5	100%	0%

**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

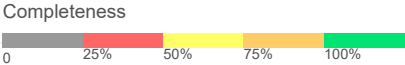
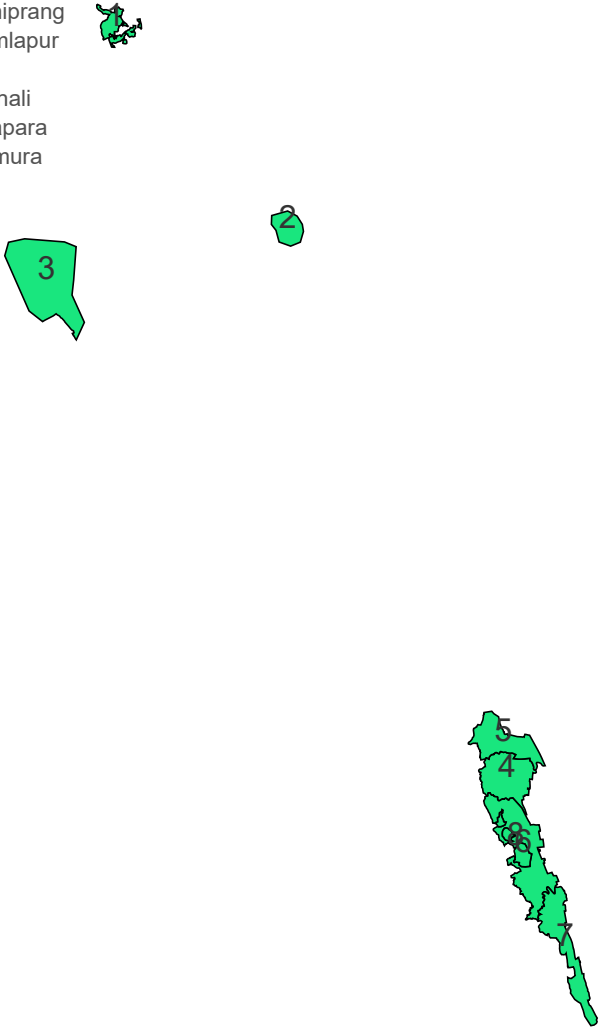


Table 6 | Performance by camp (W37 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	4	100%	0%
Camp 22 Unchiprang	5	3	60%	0%
Camp 23 Shamlapur	3	2	67%	0%
Camp 24 Leda	2	1	50%	0%
Camp 25 Ali Khali	3	2	100%	0%
Camp 26 Nayapara	5	5	100%	0%
Camp 27 Jadimura	2	2	100%	0%
Nayapara RC	2	2	100%	0%

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



**Table 7** | Performance by partner (W37 2022)

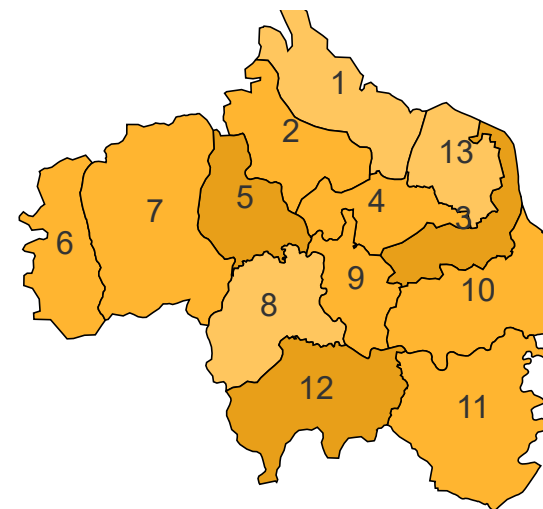
Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	0	0%	0%	IRC	4	3	0%	0%
AWARD	6	6	100%	100%	MSF	9	7	0%	0%
BASHMAH	1	1	100%	100%	MoH	12	9	0%	0%
BDRCS	11	10	91%	91%	MHI	0	0		
BRAC	0	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	0%	0%
GH/CPI	1	1	100%	100%	PRANTIC	1	1	100%	100%
DBC	1	1	100%	100%	PULSE	1	0	0%	0%
DSK	1	0	0%	0%	QC	1	1	100%	100%
DCHT-PWJ	1	1	100%	100%	PHD	10	10	0%	0%
FRNDS	6	6	0%	0%	RPN	2	2	100%	100%
GK	10	10	0%	0%	RHU	3	3	100%	0%
Global One	1	1	100%	100%	RI	3	3	0%	0%
GUSS	1	1	100%	100%	RTMI	9	8	0%	0%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	8	0	0%	0%	SCI	7	7	0%	0%
HMBDF	2	2	0%	0%	DCHT-MM	1	1	100%	100%
HOPE	1	1	100%	100%	Turkish Government	1	1	100%	100%
ICRC	1	1	100%	100%	TdH	2	2	0%	0%
IOM	23	23	0%	0%					

Table 8 | Performance by camp

Northern group	W37		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	70	100%
Camp 1W	3	100%	173	100%
Camp 2E	10	100%	347	100%
Camp 2W	4	100%	107	100%
Camp 3	6	100%	159	100%
Camp 4	3	100%	129	100%
Camp 4 Ext	3	100%	48	100%
Camp 5	2	100%	113	100%
Camp 6	3	100%	88	100%
Camp 7	3	100%	74	100%
Camp 8E	3	100%	67	100%
Camp 8W	6	100%	174	100%
Kutupalong RC	1	100%	71	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

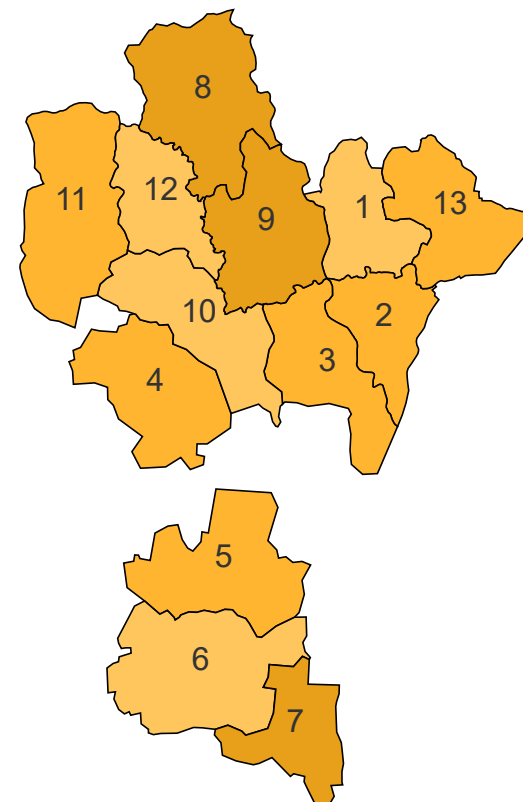


Table 9 | Performance by camp

Southern group	W37		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	1	100%	68	100%
Camp 11	4	100%	80	100%
Camp 12	4	100%	111	100%
Camp 13	3	100%	123	100%
Camp 14	3	100%	68	100%
Camp 15	1	100%	117	100%
Camp 16	6	100%	101	100%
Camp 17	7	100%	92	100%
Camp 18	6	100%	136	100%
Camp 19	2	100%	54	100%
Camp 20	2	100%	53	100%
Camp 20 Ext	3	100%	45	100%
Camp 9	4	100%	169	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



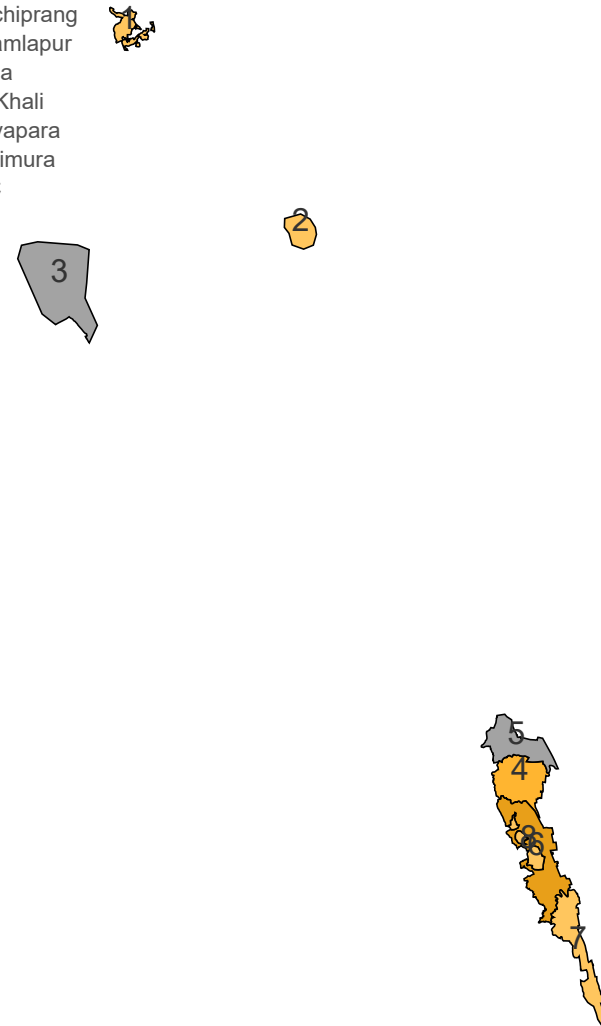


Table 10 | Performance by camp

Teknaf	W37		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	1	100%	40	100%
Camp 22 Unchiprang	1	100%	58	100%
Camp 23 Shamlapur	0	0%	16	100%
Camp 24 Leda	4	100%	81	100%
Camp 25 Ali Khali	0	0%	26	100%
Camp 26 Nayapara	7	100%	102	100%
Camp 27 Jadimura	1	100%	57	100%
Nayapara RC	1	100%	33	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



**Table 11** | Performance by type of alert

Event	W37		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
<b>Indicator-based surveillance</b>				
Malaria	0	0%	3	100%
Measles	8	100%	382	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	22	100%
Meningitis	0	0%	20	100%
Haem. fever (susp.)	1	100%	22	100%
NNT	0	0%	3	100%
Unexp. fever	3	100%	111	100%
AWD	5	100%	181	100%
ARI	11	100%	164	100%
AJS	4	100%	82	100%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
<b>Event-based surveillance</b>				
EBS total	5	100%	178	100%

**Table 12** | Risk assessment

W37	Cumulative (2022)	
0	8	Low risk
0	1	Moderate risk
0	0	High risk
0	0	Very high risk

## For more help and support, please contact:

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Cox's Bazar, Bangladesh  
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Email: khan@who.int

## Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

Sign up for an account with EWARS Bangladesh at <http://bd.ewars.ws>



Ministry of  
Health and  
Family  
Welfare  
Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



Global  
EWARS

# Bangladesh

## Rohingya Emergency Response

## Early Warning, Alert and Response System (EWARS)

Annex W37 2022



Ministry of Health and Family  
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World Health  
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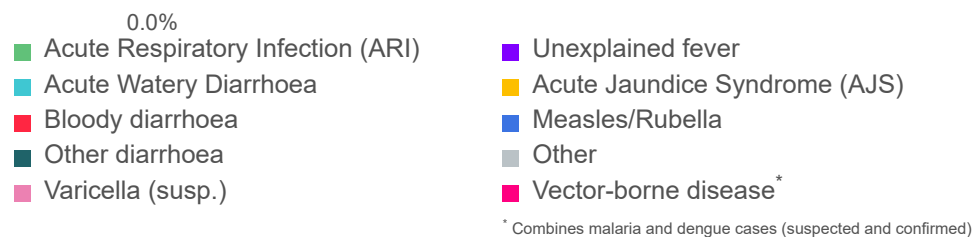
HEALTH SECTOR  
COX'S BAZAR



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# Proportional morbidity

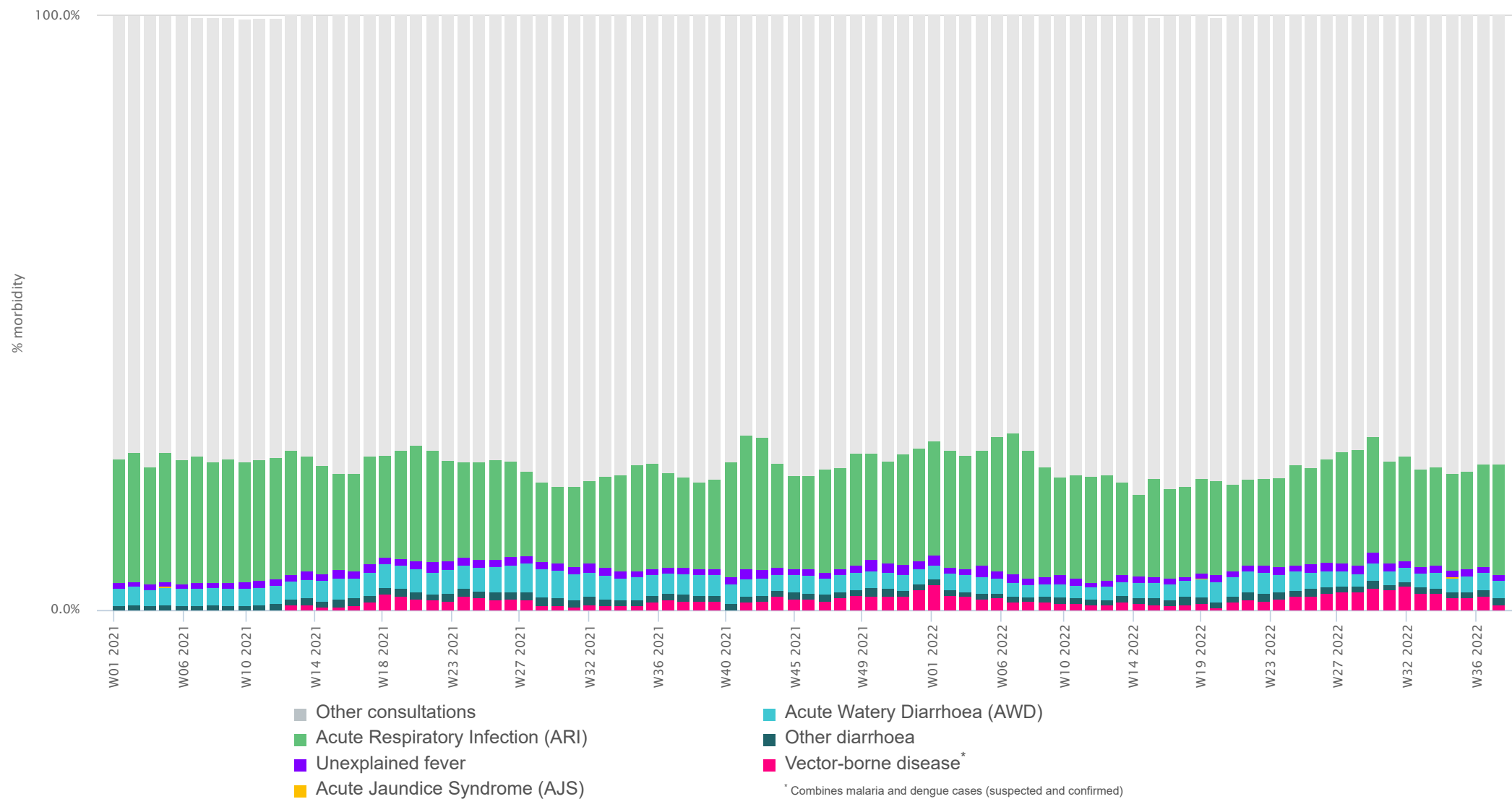
**Figure 1 | Proportional morbidity (W37 2022)**



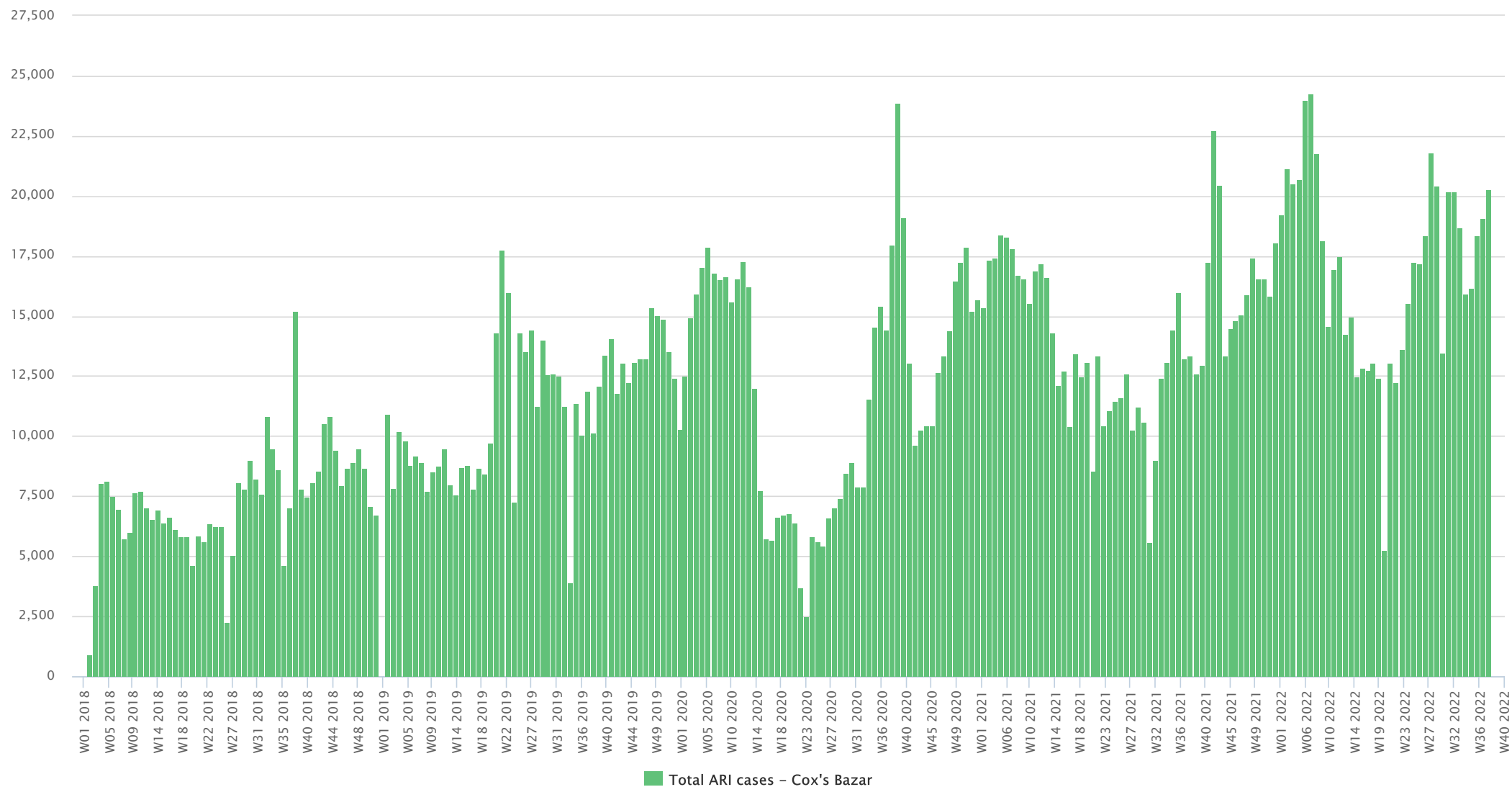
Disease	W37		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	3,333	2.9%	97,140	2.6%
Bloody diarr.	357	0.3%	13,437	0.4%
Other diarr.	1,326	1.2%	38,010	1.0%
Susp. Varicella	22	0.0%	8,845	0.2%
ARI	21,078	18.6%	651,456	17.5%
Measles/Rub.	15	0.0%	835	0.0%
AFP	0	0.0%	56	0.0%
Susp. menin.	7	0.0%	145	0.0%
AJS	34	0.0%	947	0.0%
Susp. HF	13	0.0%	152	0.0%
Neo. tetanus	0	0.0%	9	0.0%
Adult tetanus	1	0.0%	14	0.0%
Malaria (conf.)	4	0.0%	352	0.0%
Malaria (susp.)	453	0.4%	52,742	1.4%
Dengue (conf.)	449	0.4%	16,925	0.5%
Dengue (susp.)	200	0.2%	7,275	0.2%
Unexpl. fever	1,209	1.1%	44,750	1.2%
Sev. Malnut.	82	0.1%	1,587	0.0%
Inj./Wounds	1,847	1.6%	79,513	2.1%
Other	82,794	73.1%	2,695,012	72.5%
<b>Total</b>	<b>112,094</b>	<b>100%</b>	<b>3,716,291</b>	<b>100%</b>

## Trend in consultations and key diseases

**Figure 2** | Trend in proportional morbidity for key diseases (W37)

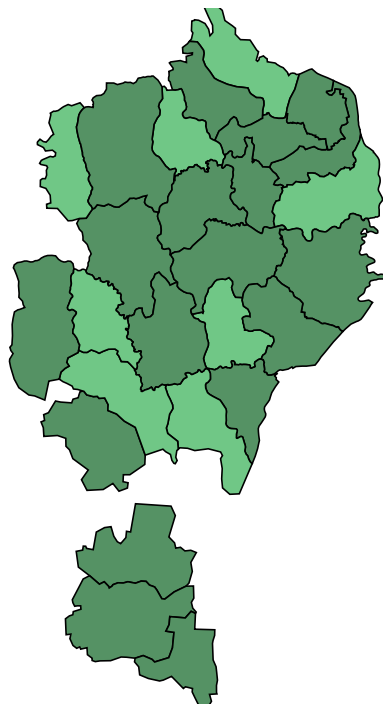


**Figure 3** | Trend in number of cases over time (W38 2017 - W37 2022)

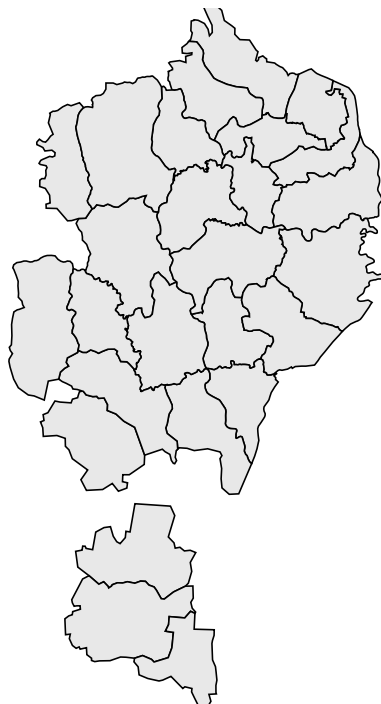


**Map 1** | Map of cases by camp (W37 2022)

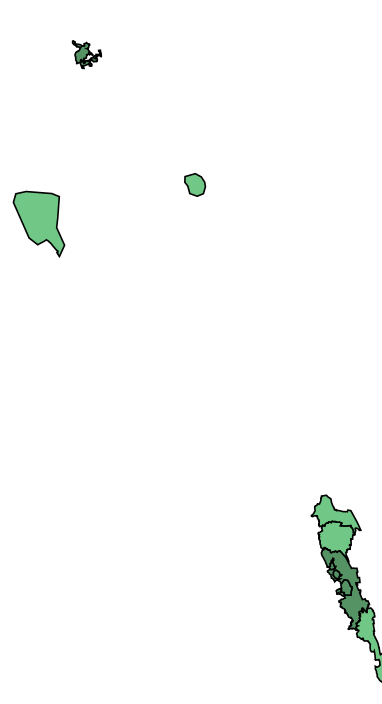
**a. Ukhia** | Number of cases



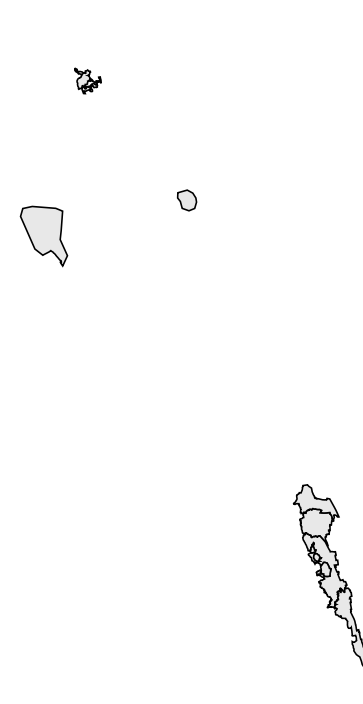
**b. Ukhia** | Number of alerts



**c. Teknaf** | Number of cases



**d. Teknaf** | Number of alerts



## Map legend

Number of cases



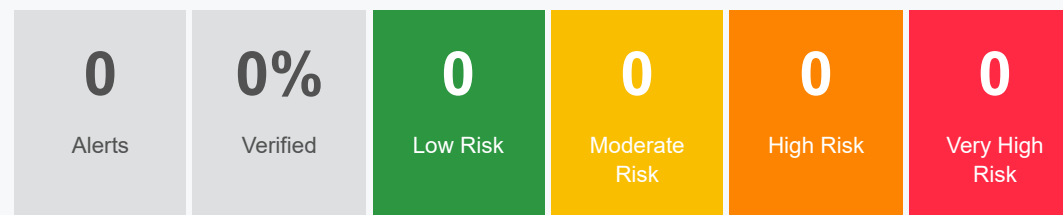
Number of alerts



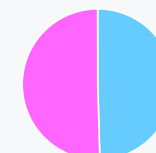
## Alert threshold

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

## Alert management (W37 2022)

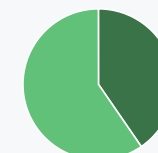


## Figure | % sex



Male Female

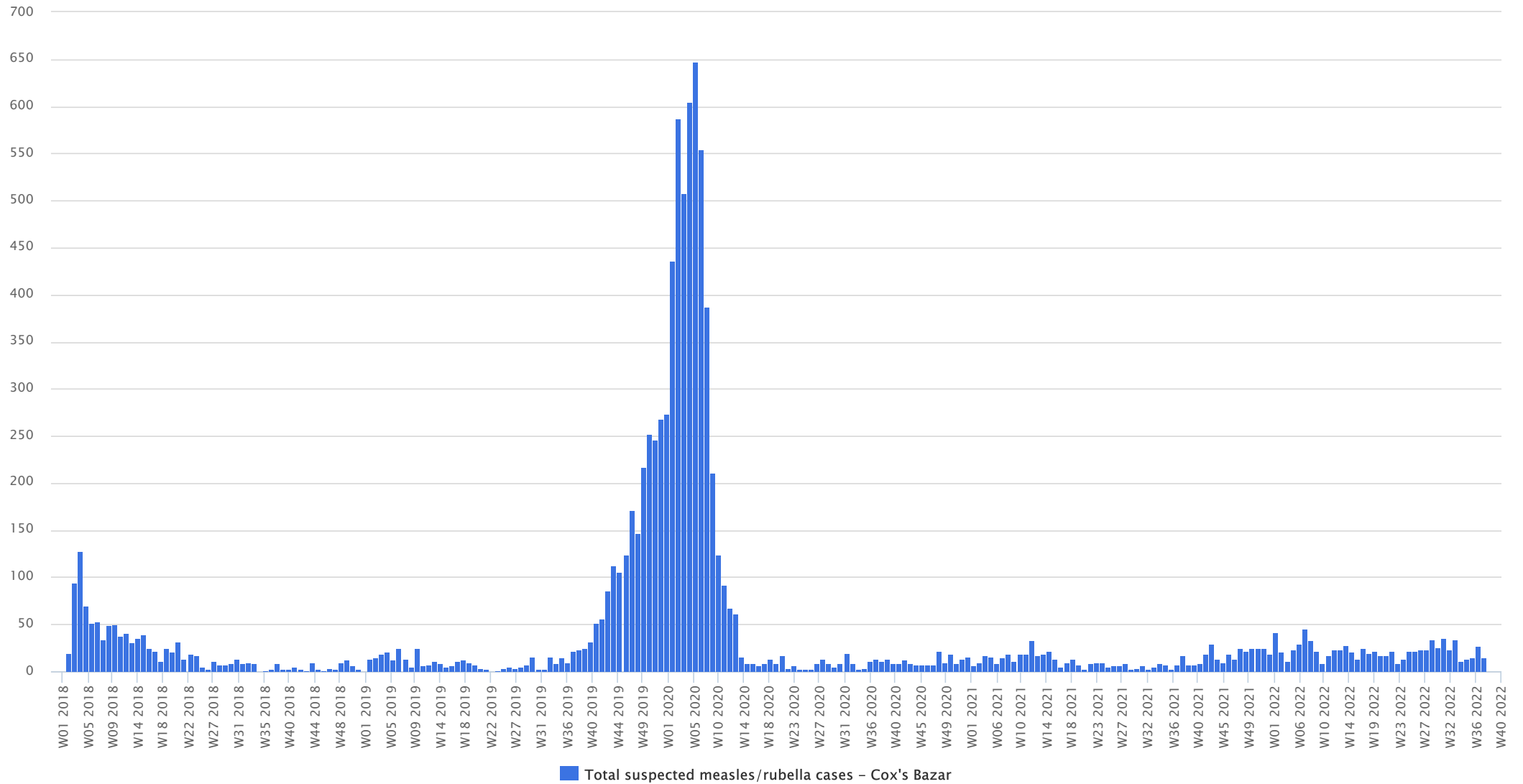
## Figure | % age



>=5 <5

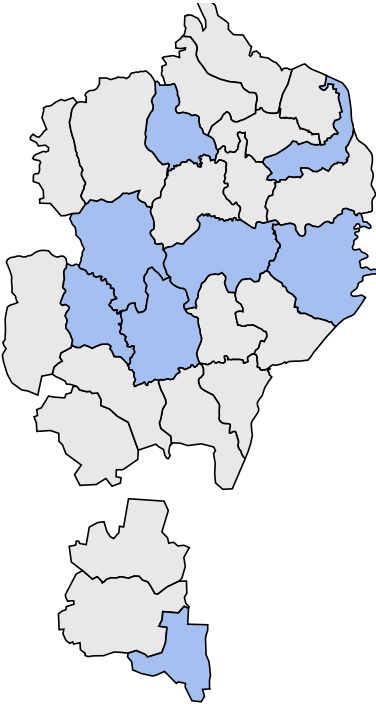


**Figure 4** | Trend in number of suspected cases over time (W38 2017 - W37 2022)

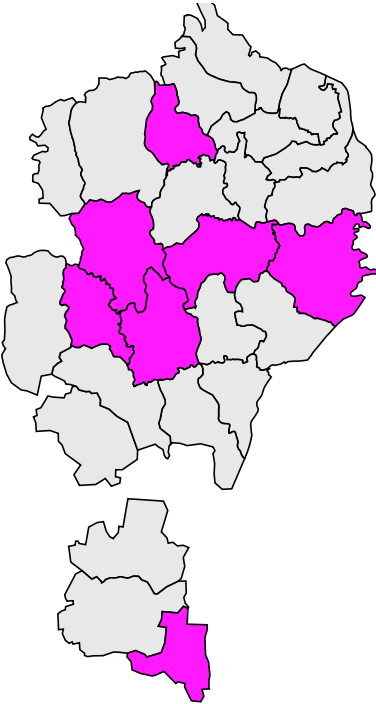


Map 2 | Map of cases by camp (W37 2022)

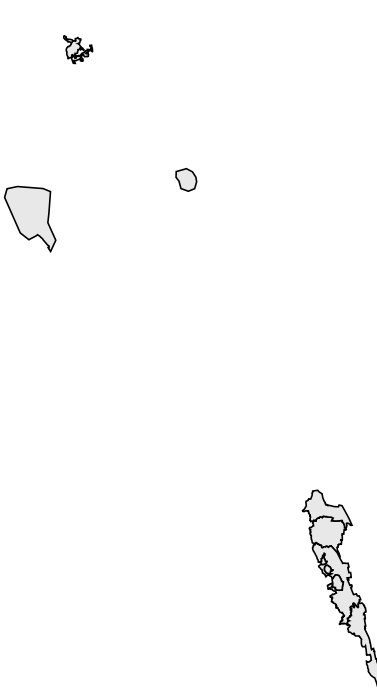
a. Ukhia | Number of cases



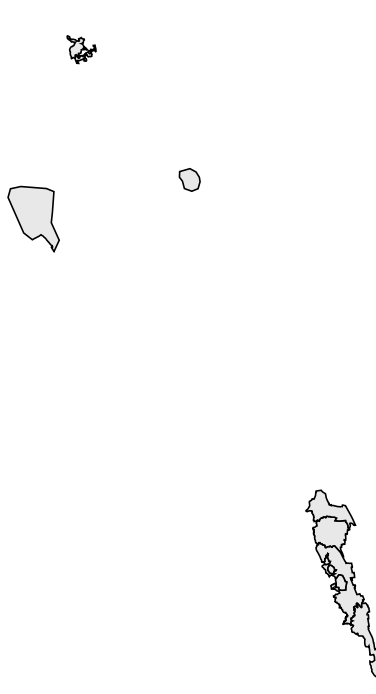
b. Ukhia | Number of alerts



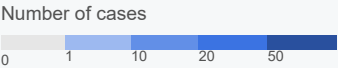
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold  
1 case. Source: IEDCR

Alert management (W37 2022)

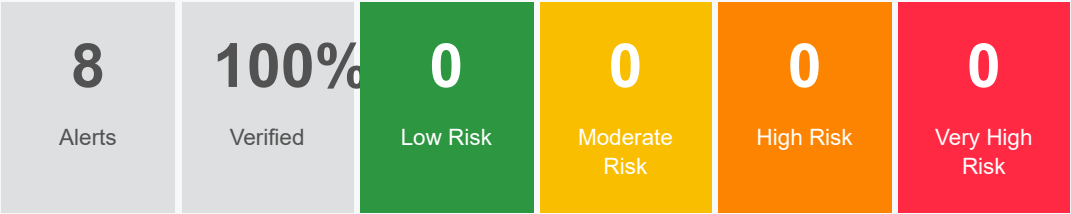


Figure | % sex

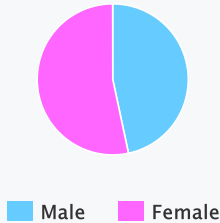
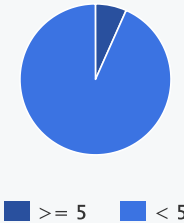
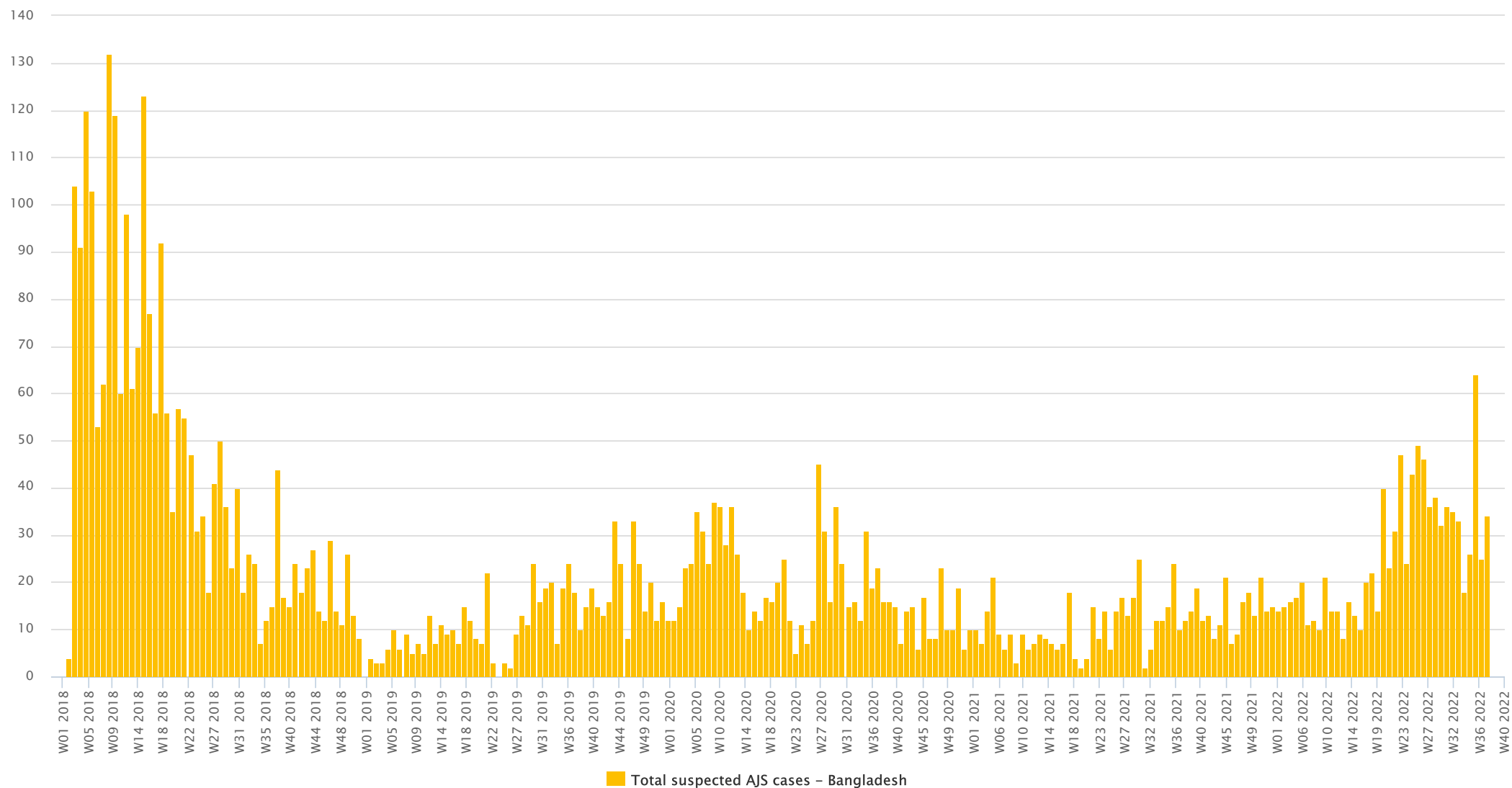


Figure | % age

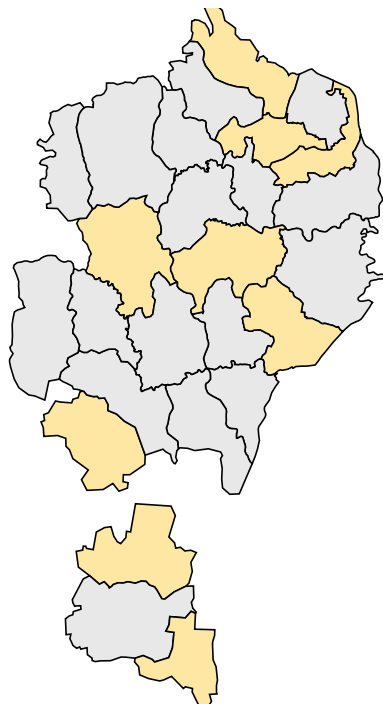


**Figure 5** | Trend in number of cases over time (W38 2017 - W37 2022)

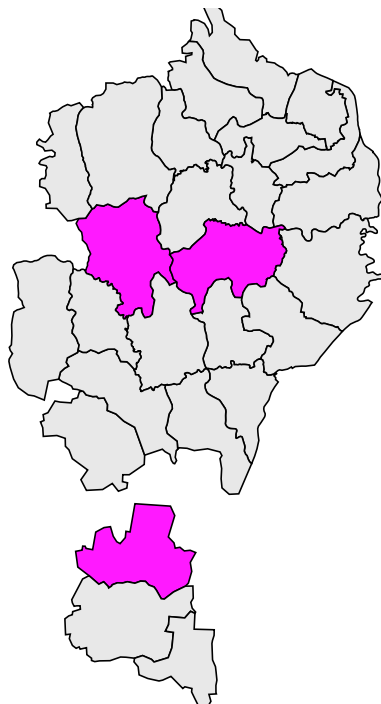


**Map 3 | Map of cases by camp (W37 2017 - W37 2022)**

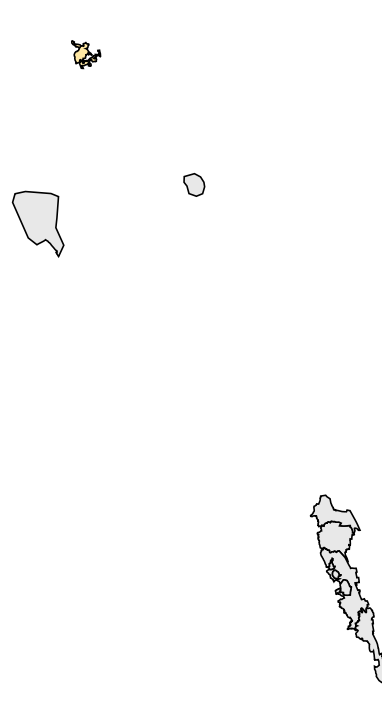
**a. Ukhia | Number of cases**



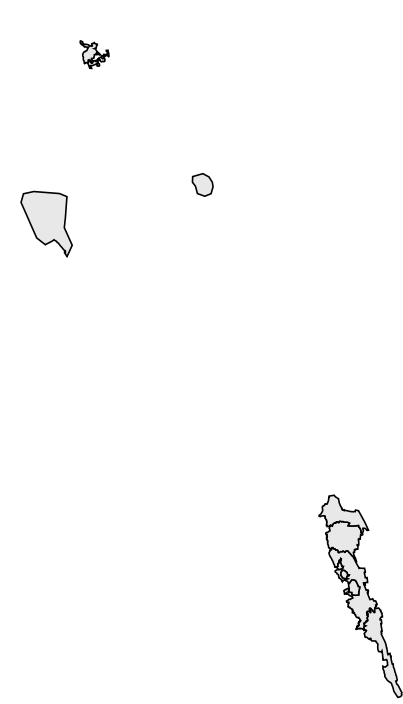
**b. Ukhia | Number of alerts**



**c. Teknaf | Number of cases**



**d. Teknaf | Number of alerts**



## Map legend

Number of cases



Number of alerts



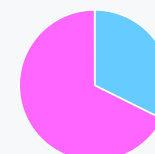
## Alert threshold

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

## Alert management (W37 2022)

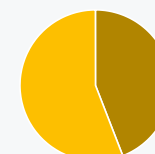


## Figure | % sex



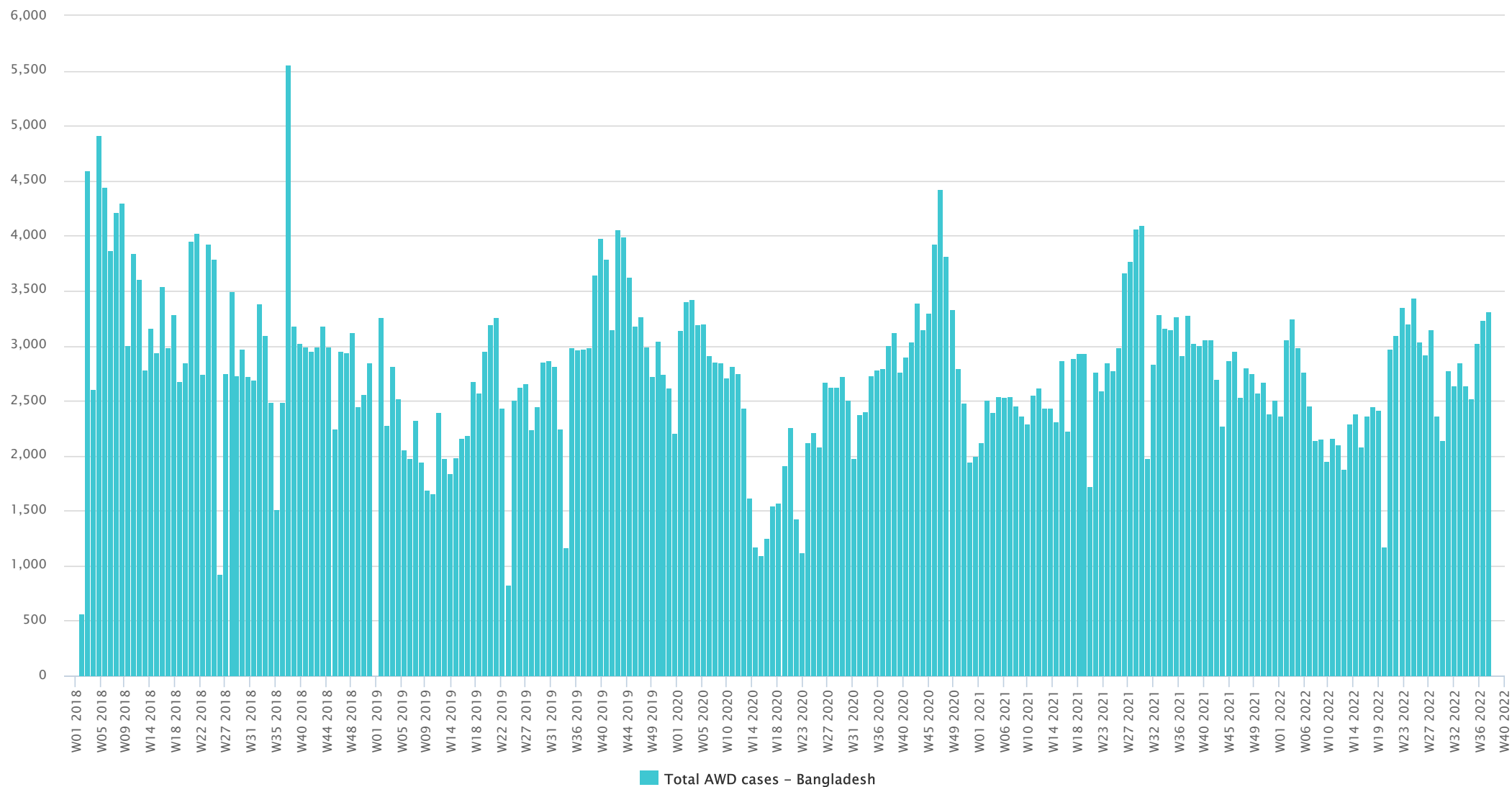
Male Female

## Figure | % age

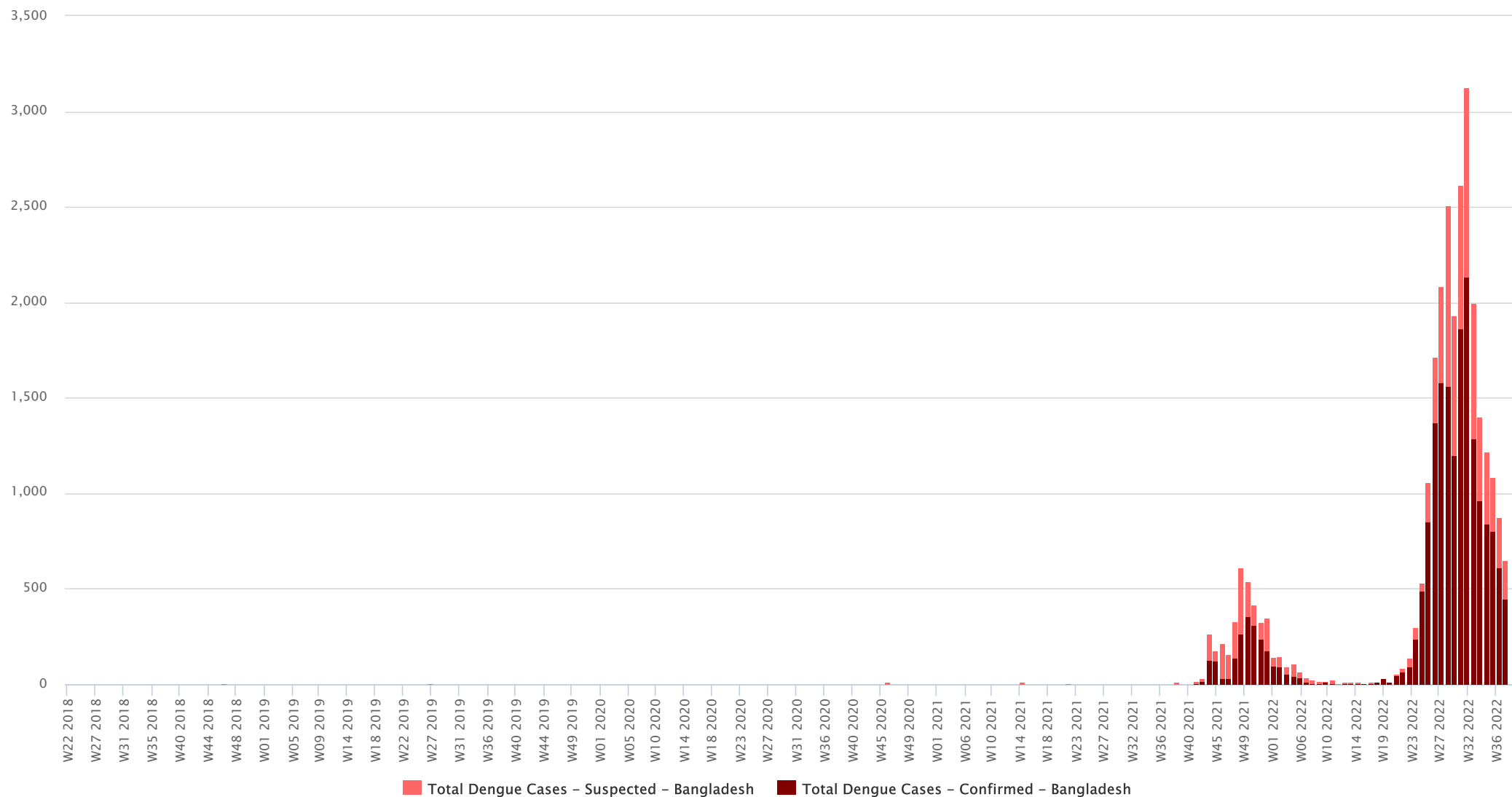


>= 5 < 5

**Figure 6** | Trend in number of cases over time (W38 2017 - W37 2022)

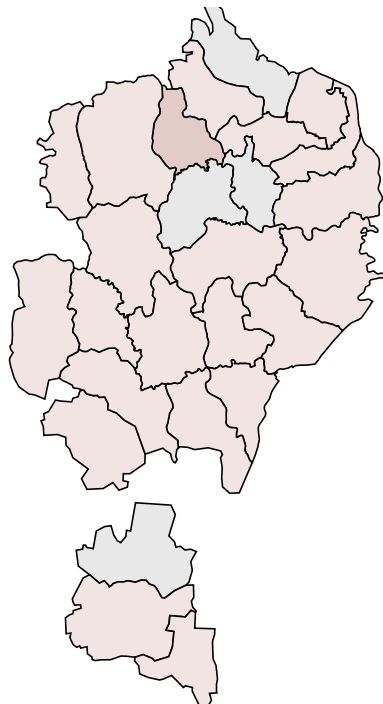


**Figure 7** | Trend in number of cases over time (W38 2017 - W37 2022)

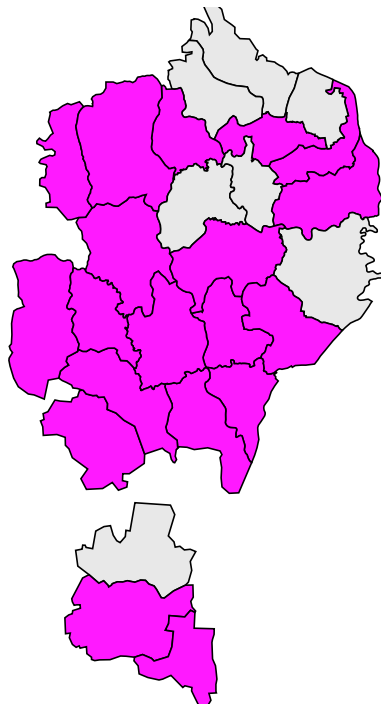


**Map 4 | Map of cases by camp (W37 2017 - W37 2022)**

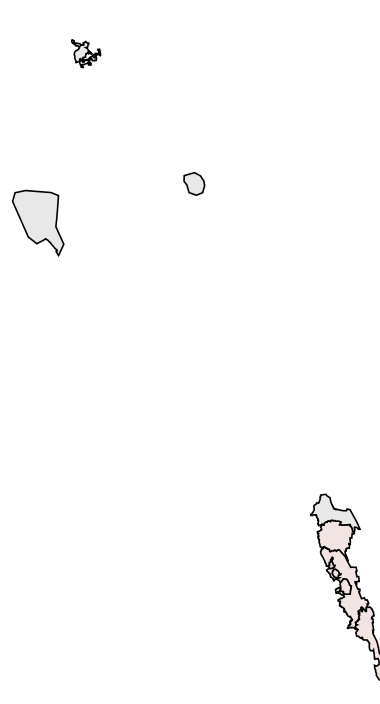
**a. Ukhia | Number of cases**



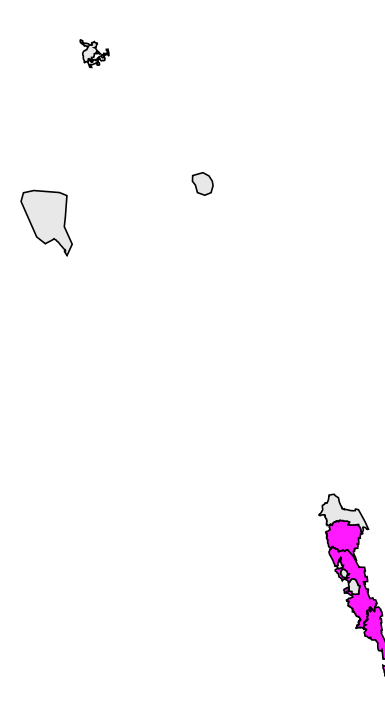
**b. Ukhia | Number of alerts**



**c. Teknaf | Number of cases**

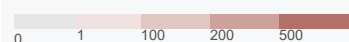


**d. Teknaf | Number of alerts**



## Map legend

Number of cases



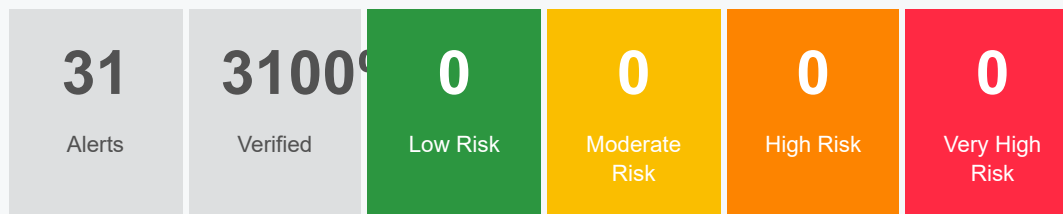
Number of alerts



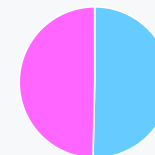
## Alert threshold

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

## Alert management (W37 2022)

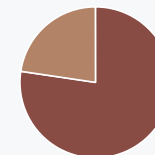


## Figure | % sex



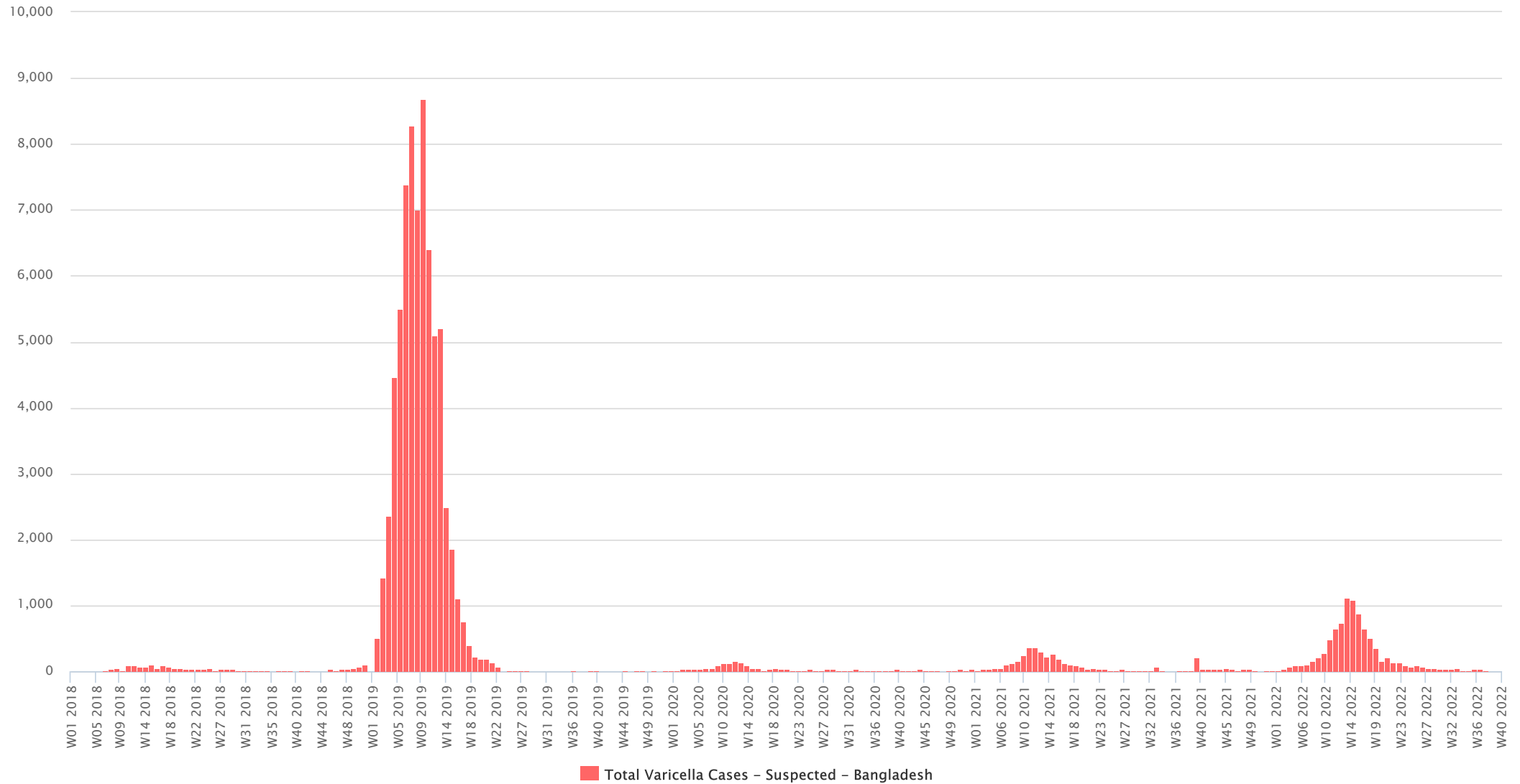
Male Female

## Figure | % age



>= 5 < 5

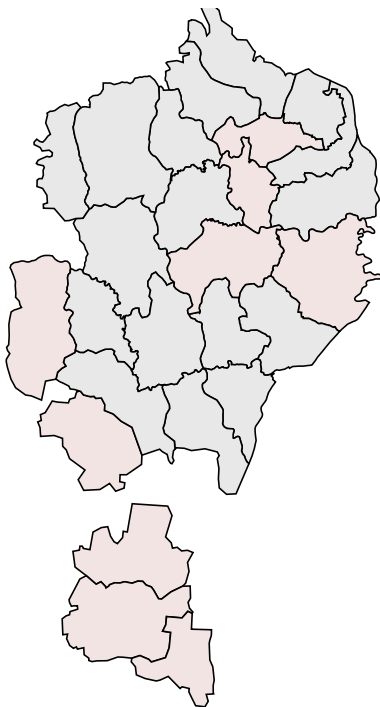
**Figure 7** | Trend in number of cases over time (W38 2017 - W37 2022)



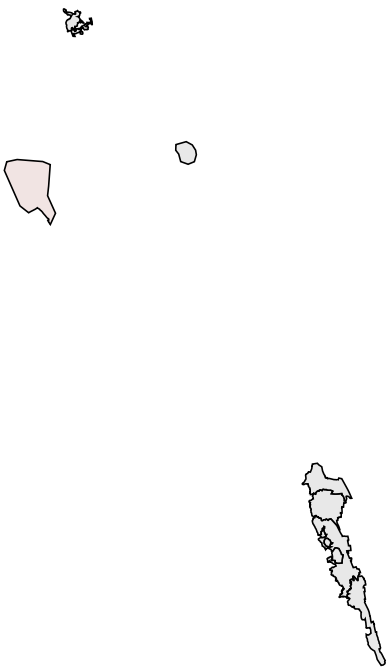


Map 4 | Map of cases by camp (W37 2017 - W37 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

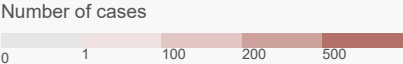


Figure | % sex

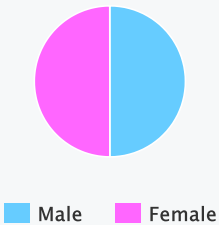
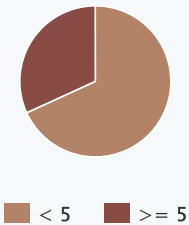


Figure | % age



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## Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

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