



Epidemiological Highlights

Week 3 (15-21 January) 2023



World Health
Organization

EWARS Reporting Updates

Currently, a total of **163 health facilities** are registered in EWARS

- About 128 of the expected 163 weekly reports were received from registered health facilities on time in week 3 in 2023
- Timeliness of reporting for this week was 79% which is below the 80% weekly threshold
- Weekly completeness of reporting was 79%
- Seventy-three (73) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this was more than the previous week (71 alerts in week 2, 2023)

Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (19.9%), Diarrheal Diseases (4.6%) & Injuries, and Wounds (2.2%) were the diseases and health conditions with the highest proportional morbidity in the third week of 2023.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. So far, 2 cases have been reported in 2023
- 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
2023	2 (1)	0
2022	136	8
2021	96	15
2020	49	2

Highlights: COVID-19

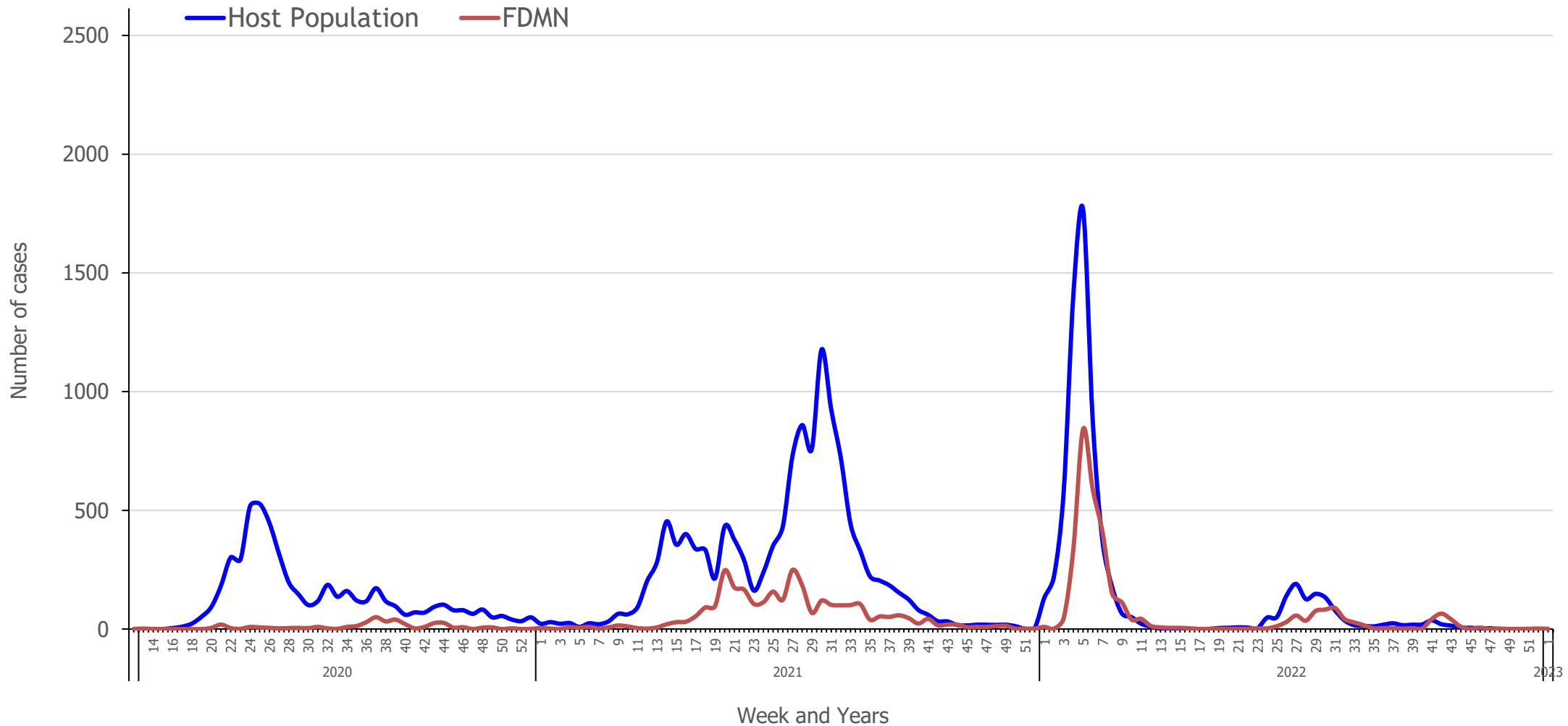
FDMN: Transmission under control

- One (1)** confirmed case was reported this week, the total cases so far reported are **6,590**
- Weekly TPR is **0.5** and incidence/new infections are **1.1** cases/1m population/week
- No new death reported, and total deaths stabilized at **45** (CFR of 0.7)
- Level of recovery continues to peak at **99%**

Host Population: Transmission under control

- No** new confirmed cases were reported this week similar to the last seven weeks, the total caseload remains at **24,643**
- Weekly TPR and case incidence stabilized at zero for the past seven weeks
- No new weekly death, total deaths stand at **269** (CFR-1.1%)
- Recovery level continues to peak at **99%**

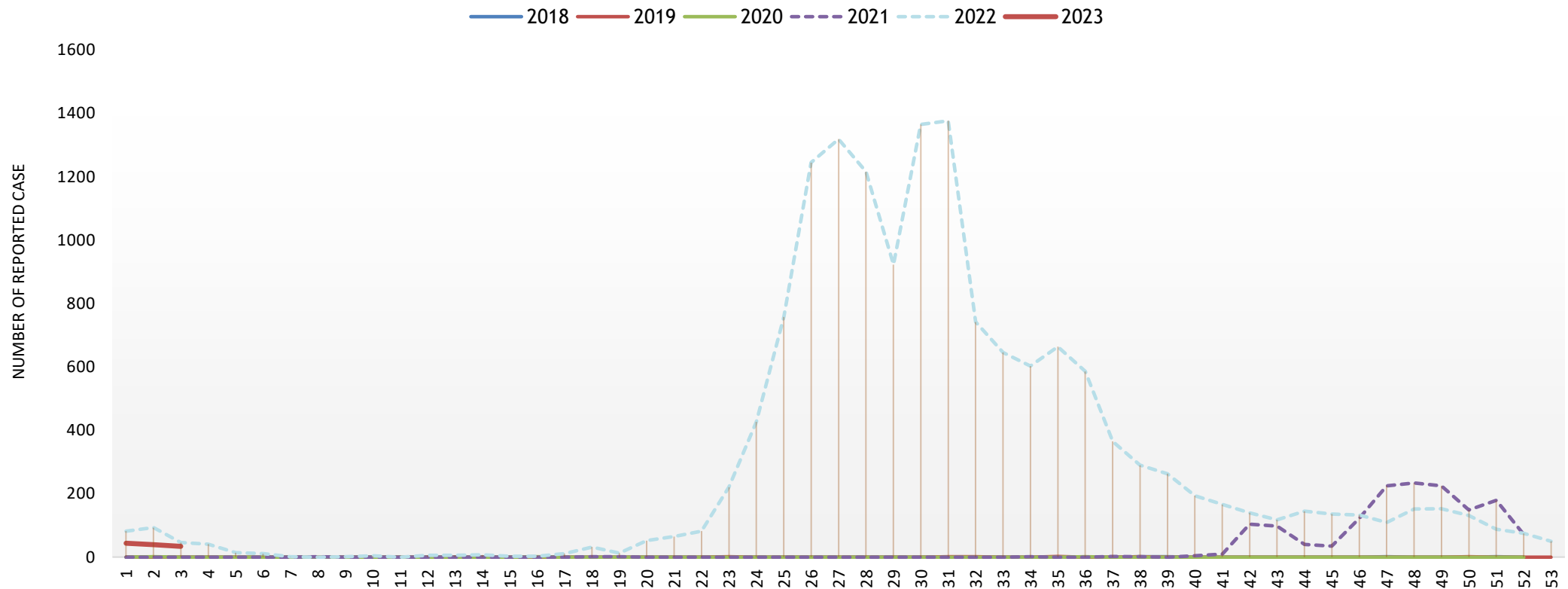
Highlights: COVID-19



FDMNs: One (1) new confirmed case was reported this week, and weekly TPR and case incidences are 0.5, and 1.1 cases/1 million/week respectively.
Host Population: No new cases were reported in the week, similar to the last seven weeks, weekly TPR and case incidence remained at zero.

Dengue Surveillance Updates

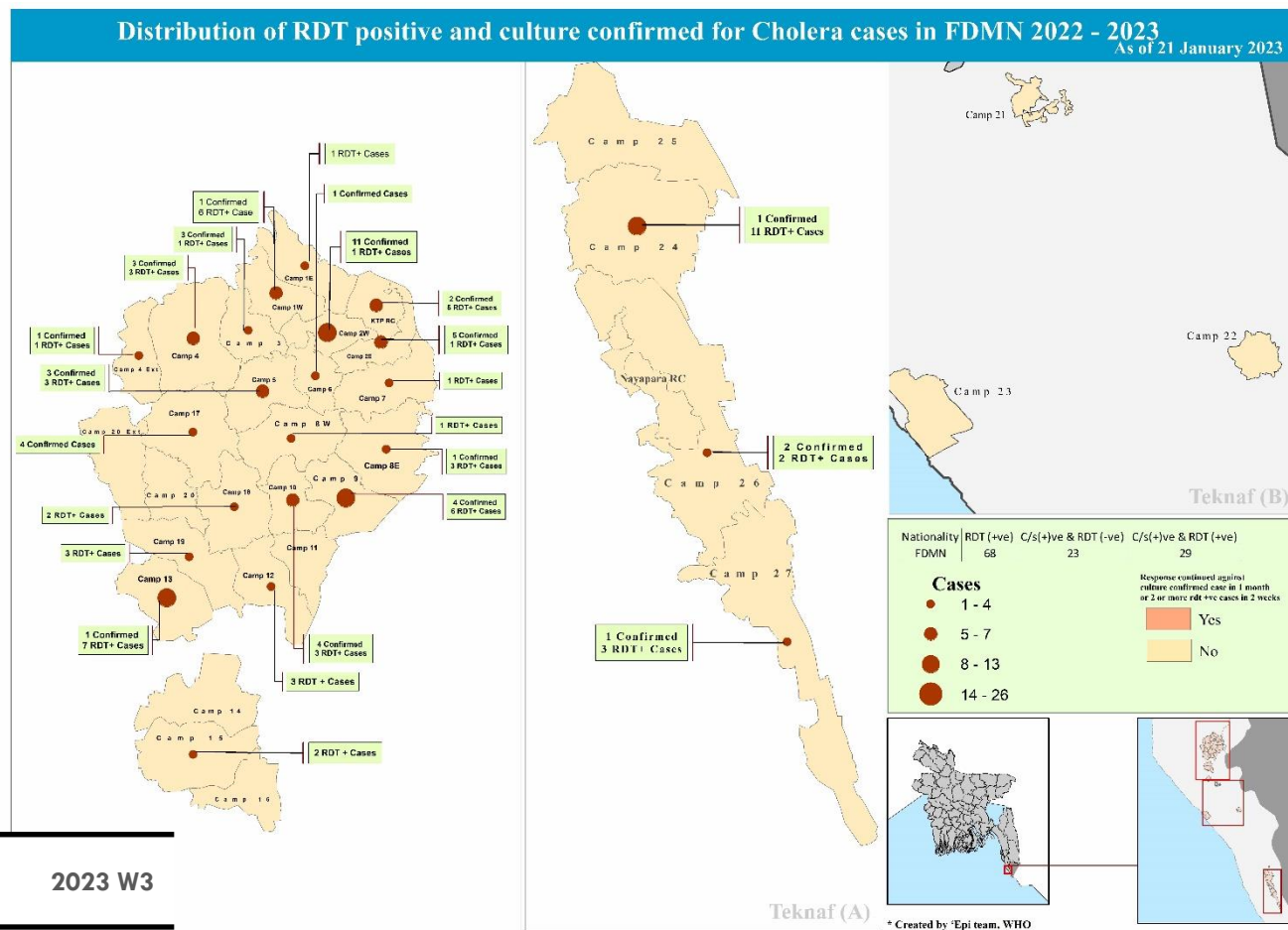
Yearly Trends of Dengue case trend from 2018 - 2023 week 3



- ❑ Overall level of infection continues to decline since October 2022 and transmission significantly reduced as weekly cases continue to drop
- ❑ In 2023 total of 117 cases were reported and no fatalities occurred

Cholera/AWD Surveillance Updates

- In this week, there is one (1) new suspected Cholera case was reported from samples sent for testing.
- In 2023, a total of four (4) RDT-positive AWD cases/ cholera suspected cases and two (2) culture-confirmed Cholera cases were reported as of Epi Week 3 2023.
- Cumulatively there are 866 RDT and culture-confirmed cholera cases of which 404 cases were culture-confirmed since transmission in 2018.



2018 2019 2020 2021 2022 2023 W3

RDT positive AWD cases & culture confirmed for Cholera cases

49 258 28 357 170 4

Culture confirmed for Cholera

7 184 5 136 70 1

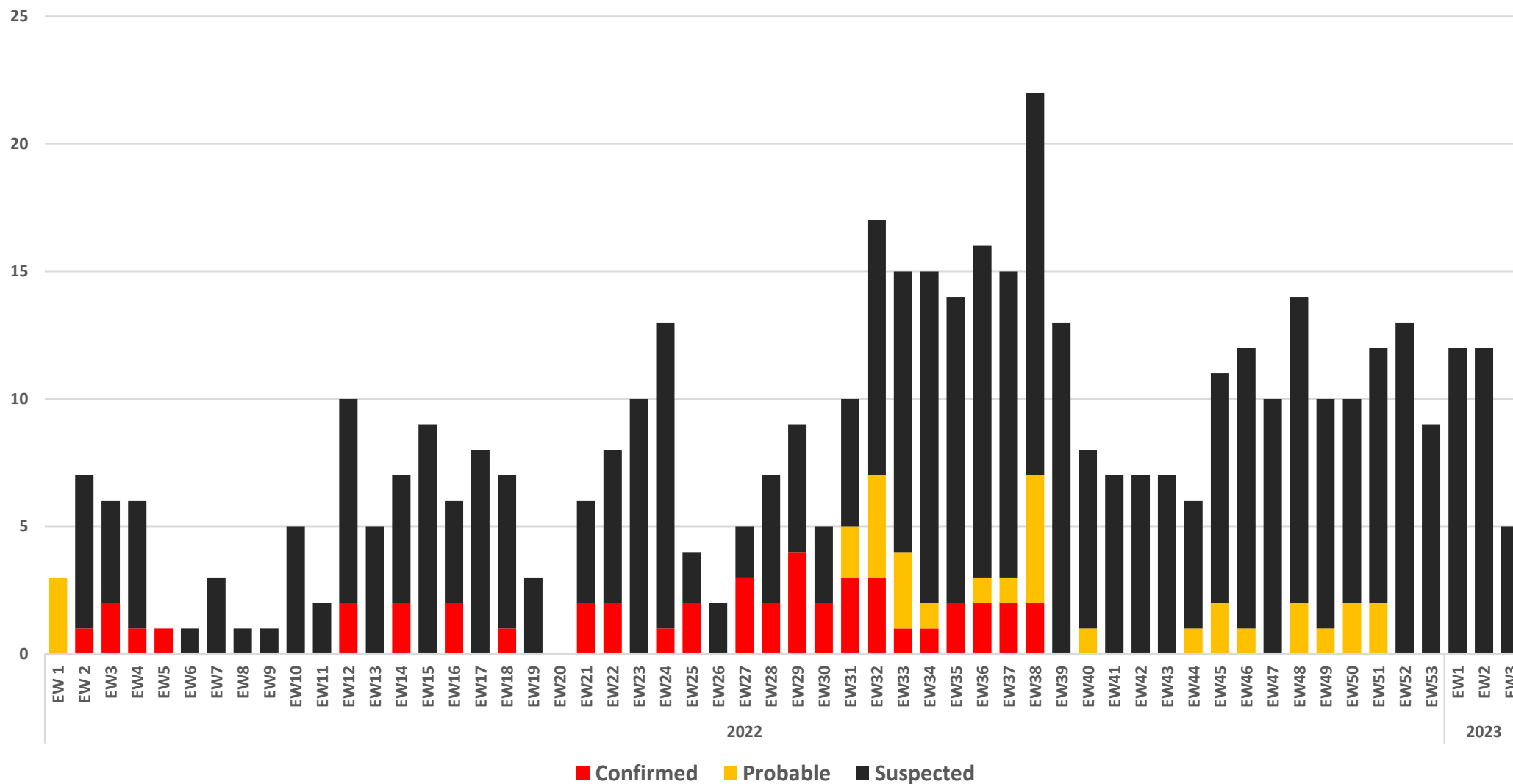
Diphtheria Surveillance Updates

- Five (5) suspected diphtheria cases were reported in go.data in this Epi week 3 in 2023
- The last confirmed case was reported on 14 September 2022 due to a shortage of PCR Test kits
- In total 54 deaths have so far been reported since 2017, with the last death reported on 18 October 2022

Classification	2017	2018	2019	2020	2021	2022	2023
Confirmed	66	226	31	19	30	46	0
Probable	1154	1555	60	9	29	32	0
Suspected	1796	3549	523	198	118	355	29
Death	30	14	3	0	5	2	0

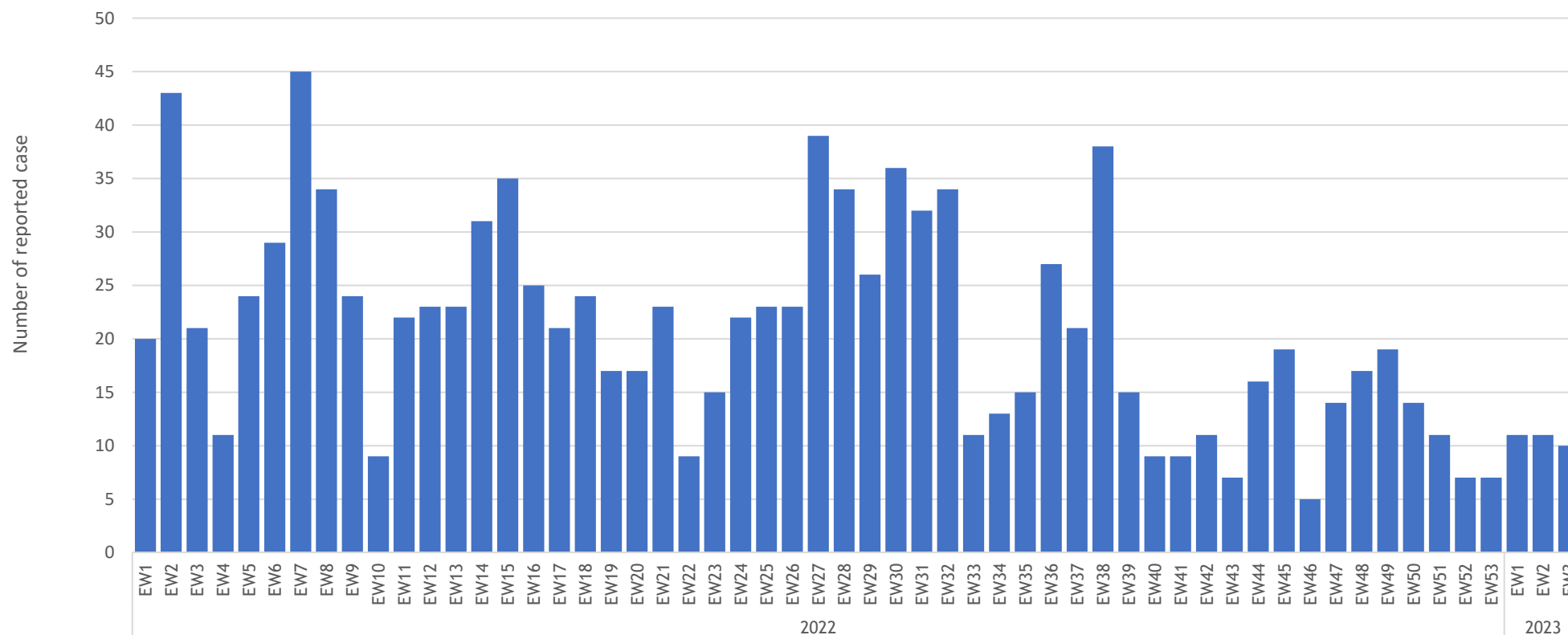
Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from 2022 - 2023 week 3



Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from 2022- week 3, 2023



- > In week 3, 10 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 32 reported in 2023
- > About 63% (20/32) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

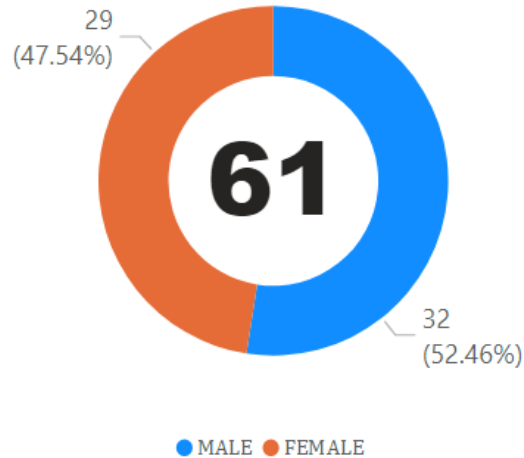
Community-based Mortality surveillance updates Epi week 3 2023

Probable causes of death	Epi week 3	In 2023
Still Birth	6 (10%)	23 (10%)
Neonatal Death (<28 days old)	7 (11%)	19 (9%)
Infectious Disease	3 (5%)	7 (3%)
Severe Acute Respiratory Infection (SARI)	1 (2%)	2 (1%)
Injury	1 (2%)	3 (1%)
Maternal Death	1 (2%)	5 (2%)
Acute Malnutrition	--	1 (0%)
Other	42 (69%)	163 (73%)
Total	61 (100%)	158 (100%)

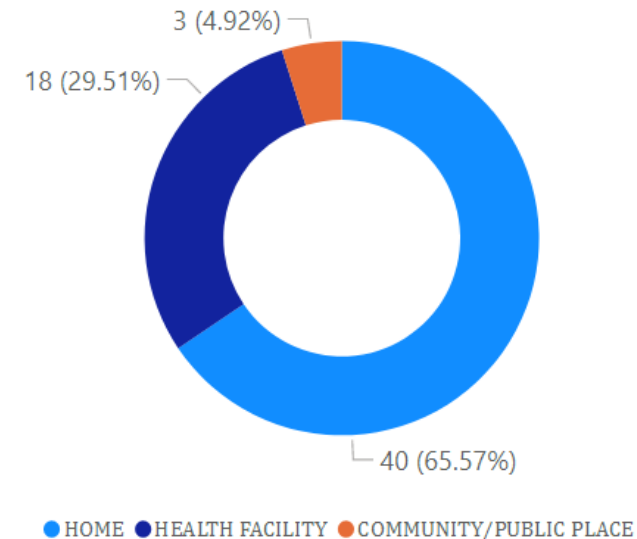
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

Community-based Mortality surveillance updates Epi week 3 2023

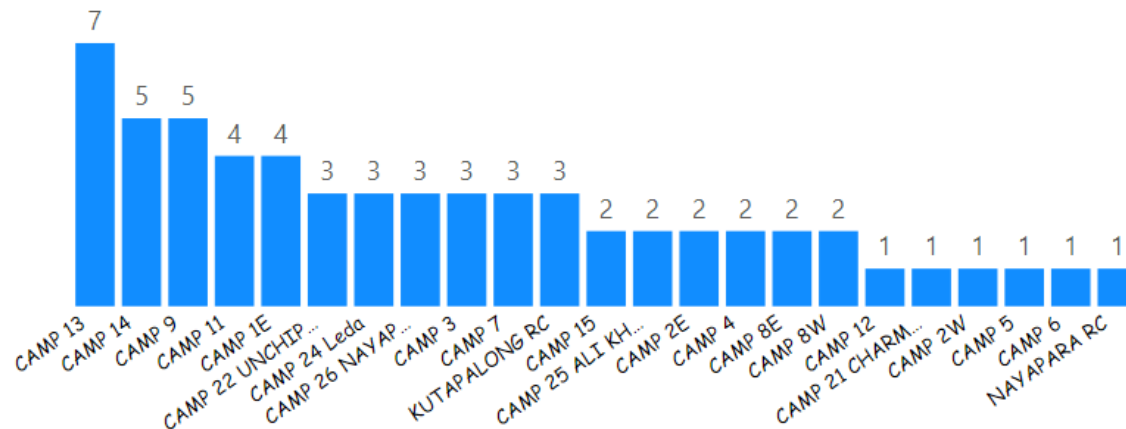
Gender distribution



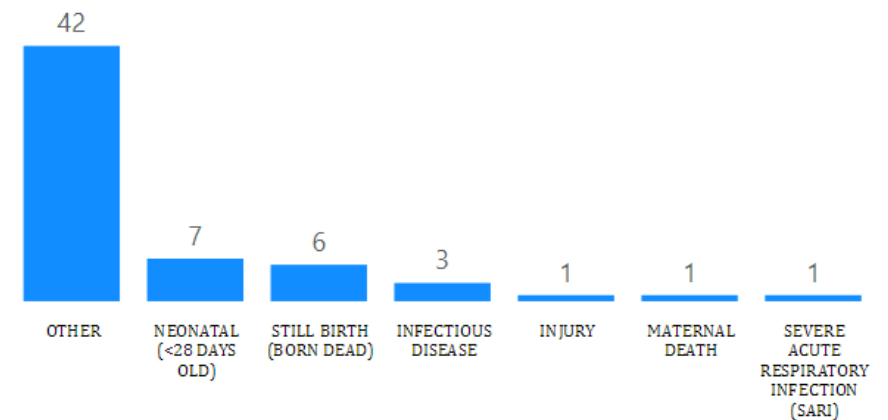
Place of death



Distribution of deceased Camp



Distribution of Probable cause of death



Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Epidemiological Bulletin W3 2023



Ministry of Health and Family
Welfare Bangladesh



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Sources of data

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

Table 1 | Coverage

#	%	
952,309	-	Estimated total Rohingya population ¹
923,358	97%	Total population under surveillance
165	-	Total number of health facilities
163	99%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

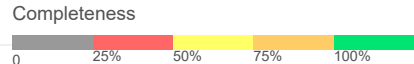
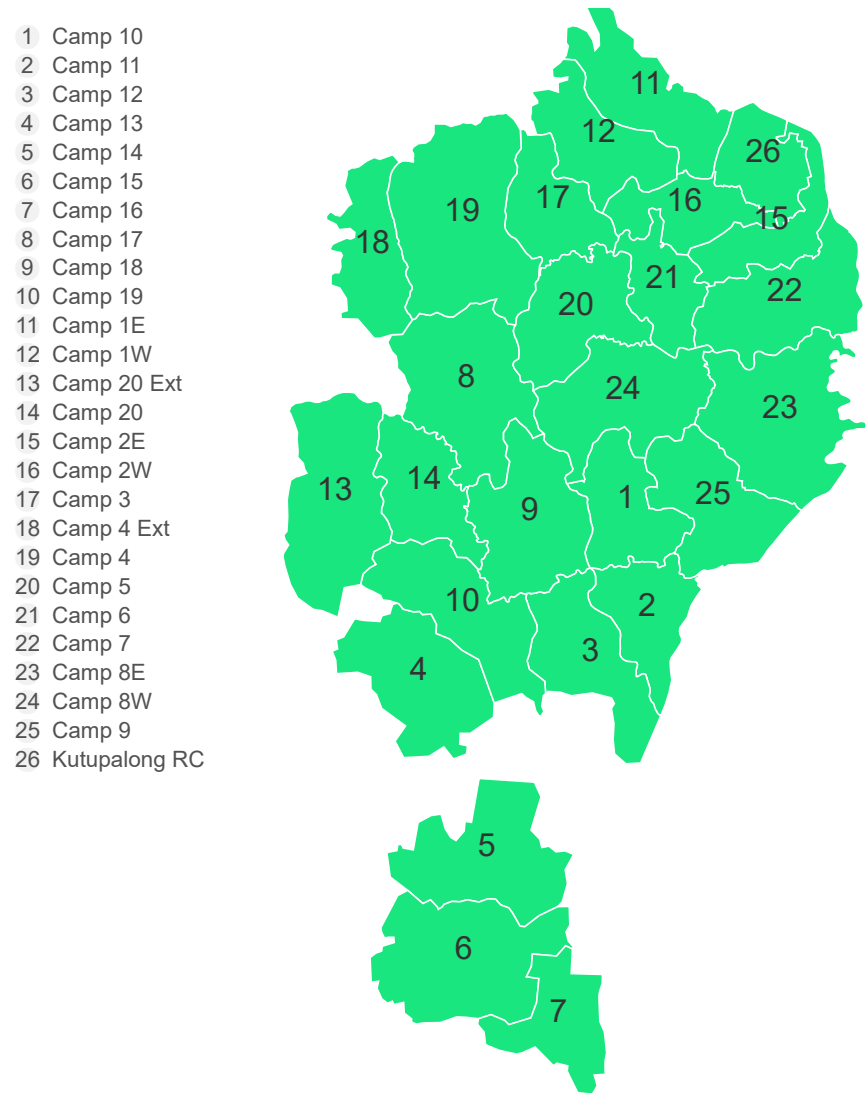
W3	Cumulative (2023)	
128	568	Number of weekly reports received
79%	86%	Completeness
79%	85%	Timeliness

Table 3 Alert performance indicators

W3	Cumulative (2023)	
73	258	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 2021.

Map 1a | Ukhia completeness by camp



Map 1b | Teknaf completeness by camp

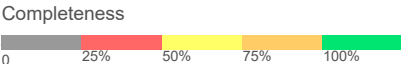
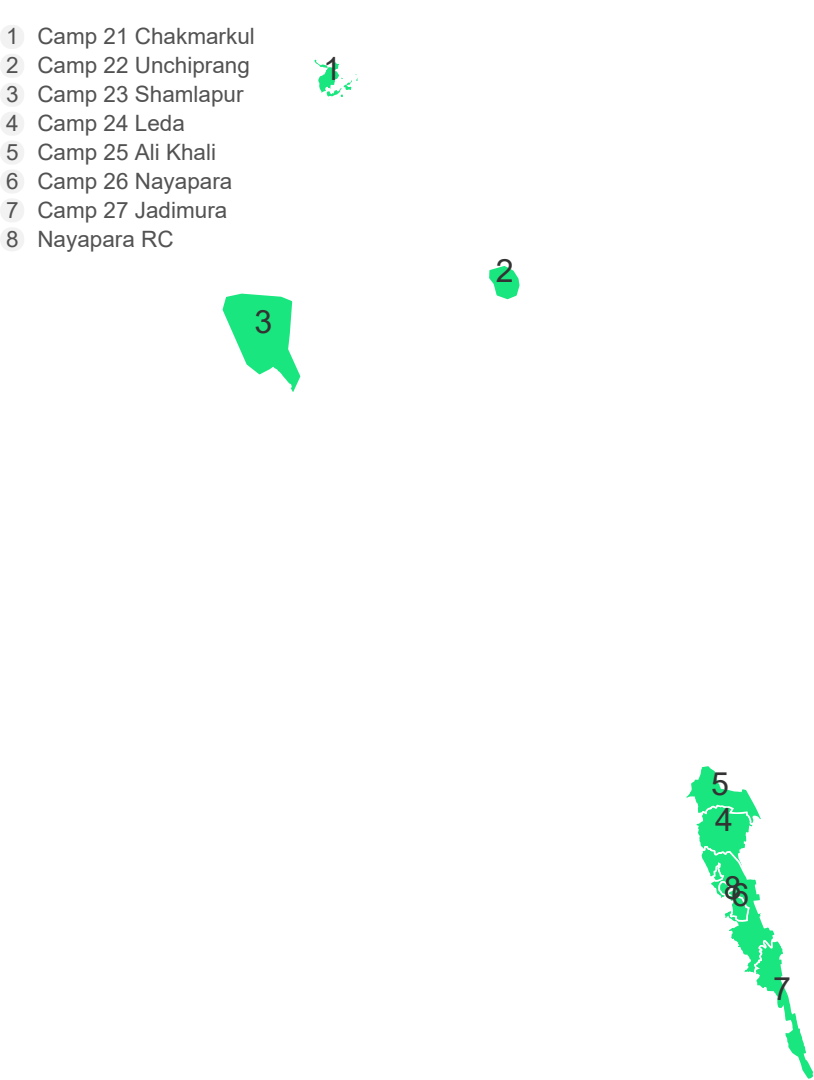


Table 4 | Performance by camp (W3 2023)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	4	4	100%	0%
Camp 1W	5	2	40%	0%
Camp 2E	3	3	100%	0%
Camp 2W	4	4	100%	0%
Camp 3	5	3	60%	0%
Camp 4	5	4	100%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	4	100%	0%
Camp 6	2	2	100%	0%
Camp 7	5	3	80%	0%
Camp 8E	9	8	100%	0%
Camp 8W	4	3	75%	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

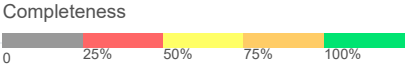
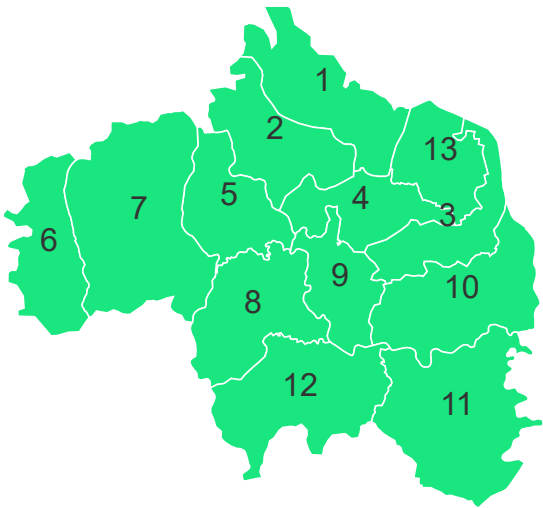


Table 5 | Performance by camp (W3 2023)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	3	100%	0%
Camp 11	6	5	83%	0%
Camp 12	6	4	100%	0%
Camp 13	9	7	89%	0%
Camp 14	6	4	100%	0%
Camp 15	8	6	75%	0%
Camp 16	7	5	86%	0%
Camp 17	5	5	100%	0%
Camp 18	4	4	100%	0%
Camp 19	4	4	100%	0%
Camp 20	4	4	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	3	83%	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

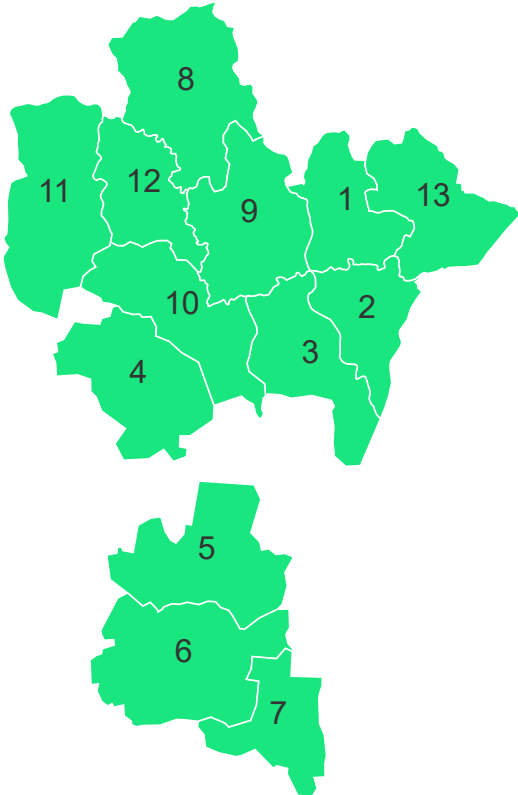


Table 6 | Performance by camp (W3 2023)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	3	75%	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	3	100%	0%
Camp 26 Nayapara	5	3	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 (W3 2023)

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	1	100%	100%	IRC	4	3	75%	75%
AWARD	6	6	100%	100%	MSF	9	7	78%	78%
BASHMAH	1	1	100%	100%	MoH	12	9	83%	83%
BDRCS	10	10	100%	100%	MHI	1	2	200%	200%
BRAC	11	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	100%	100%
GH/CPI	1	0	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	1	1	100%	100%	PHD	10	10	100%	100%
FRNDS	5	4	80%	80%	RPN	2	2	100%	100%
GK	10	9	90%	90%	RHU	3	3	100%	100%
Global One	1	1	100%	100%	RI	3	1	33%	33%
GUSS	1	1	100%	100%	RTMI	11	7	64%	64%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	0	0			SCI	7	6	86%	86%
HMBDF	2	2	100%	100%	DCHT-MM	1	0	0%	0%
HOPE	1	1	100%	100%	Turkish Government	1	1	100%	100%
ICRC	1	2	200%	200%	TdH	2	2	100%	100%
IOM	23	23	91%	91%					

Table 8 | Performance by camp

Northern group	W3		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	2	100%	9	100%
Camp 1W	0	0%	2	100%
Camp 2E	11	100%	25	100%
Camp 2W	3	100%	10	100%
Camp 3	5	100%	15	100%
Camp 4	2	100%	11	100%
Camp 4 Ext	0	0%	1	100%
Camp 5	1	100%	5	100%
Camp 6	1	100%	5	100%
Camp 7	1	100%	5	100%
Camp 8E	4	100%	16	100%
Camp 8W	2	100%	17	100%
Kutupalong RC	1	100%	4	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

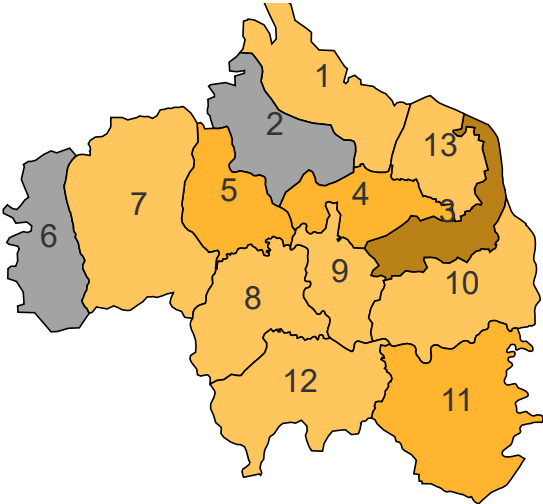


Table 9 | Performance by camp

Southern group	W3		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	1	100%	5	100%
Camp 11	2	100%	4	100%
Camp 12	2	100%	8	100%
Camp 13	6	100%	14	100%
Camp 14	4	100%	10	100%
Camp 15	2	100%	8	100%
Camp 16	3	100%	9	100%
Camp 17	0	0%	1	100%
Camp 18	2	100%	10	100%
Camp 19	0	0%	2	100%
Camp 20	2	100%	5	100%
Camp 20 Ext	0	0%	0	0%
Camp 9	4	100%	15	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

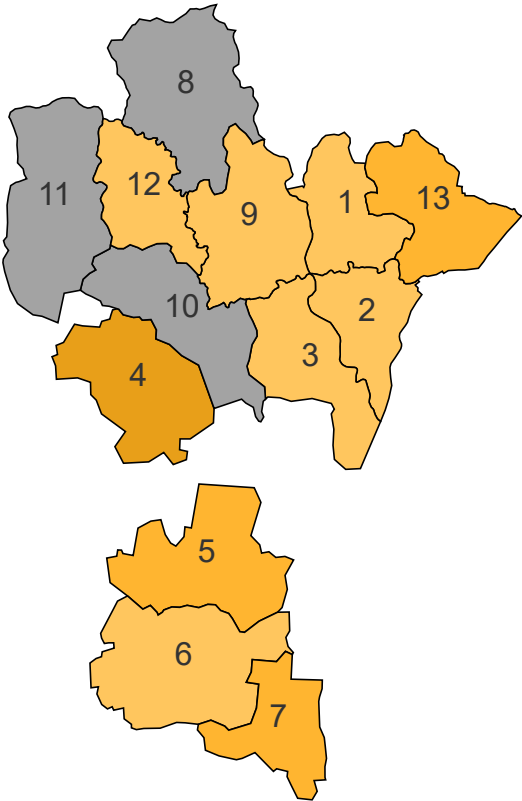


Table 10 | Performance by camp

Teknaf	W3		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	1	100%	3	100%
Camp 22 Unchiprang	2	100%	6	100%
Camp 23 Shamlapur	0	0%	1	100%
Camp 24 Leda	6	100%	18	100%
Camp 25 Ali Khali	2	100%	3	100%
Camp 26 Nayapara	0	0%	4	100%
Camp 27 Jadimura	0	0%	0	0%
Nayapara RC	1	100%	6	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

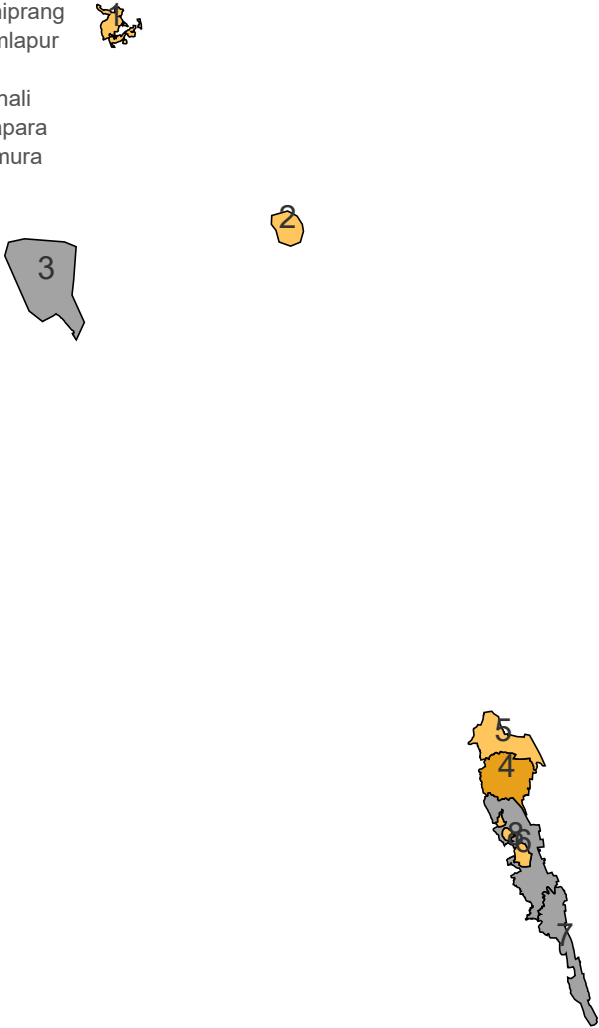


Table 11 | Performance by type of alert

Event	W3		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	0	0%
Measles	3	100%	5	100%
Bloody Diarr.	0	0%	0	0%
AFP	2	100%	2	100%
Meningitis	1	100%	2	100%
Haem. fever (susp.)	1	100%	2	100%
NNT	0	0%	0	0%
Unexp. fever	1	100%	2	100%
AWD	0	0%	3	100%
ARI	0	0%	1	100%
AJS	1	100%	4	100%
Varicella (Susp.)	0	0%	0	0%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	3	100%	22	100%

Table 12 | Risk assessment

W3	Cumulative (2023)	
0	0	Low risk
0	0	Moderate risk
0	0	High risk
0	0	Very high risk

For more help and support, please contact:

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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>

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



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Early Warning, Alert and Response System (EWARS)

Annex W3 2023



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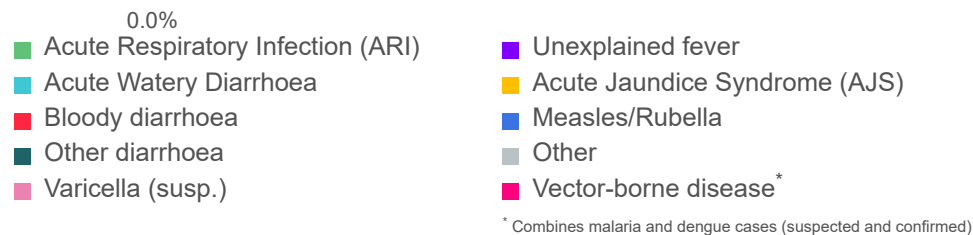
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Proportional morbidity

Figure 1 | Proportional morbidity (W3 2023)



Disease	W3		2023	
	# cases	% morbidity	# cases	% morbidity
AWD	2,435	2.5%	7,303	2.3%
Bloody diarr.	260	0.3%	852	0.3%
Other diarr.	1,271	1.3%	3,663	1.2%
Susp. Varicella	315	0.3%	703	0.2%
ARI	19,434	19.9%	61,233	19.4%
Measles/Rub.	10	0.0%	32	0.0%
AFP	2	0.0%	3	0.0%
Susp. menin.	6	0.0%	18	0.0%
AJS	15	0.0%	49	0.0%
Susp. HF	9	0.0%	33	0.0%
Neo. tetanus	0	0.0%	0	0.0%
Adult tetanus	1	0.0%	1	0.0%
Malaria (conf.)	1	0.0%	5	0.0%
Malaria (susp.)	44	0.0%	129	0.0%
Dengue (conf.)	65	0.1%	195	0.1%
Dengue (susp.)	19	0.0%	44	0.0%
Unexpl. fever	681	0.7%	2,189	0.7%
Sev. Malnut.	41	0.0%	118	0.0%
Inj./Wounds	2,172	2.2%	7,022	2.2%
Other	70,706	72.5%	231,361	73.4%
Total	96,886	100%	315,184	100%

Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W3)

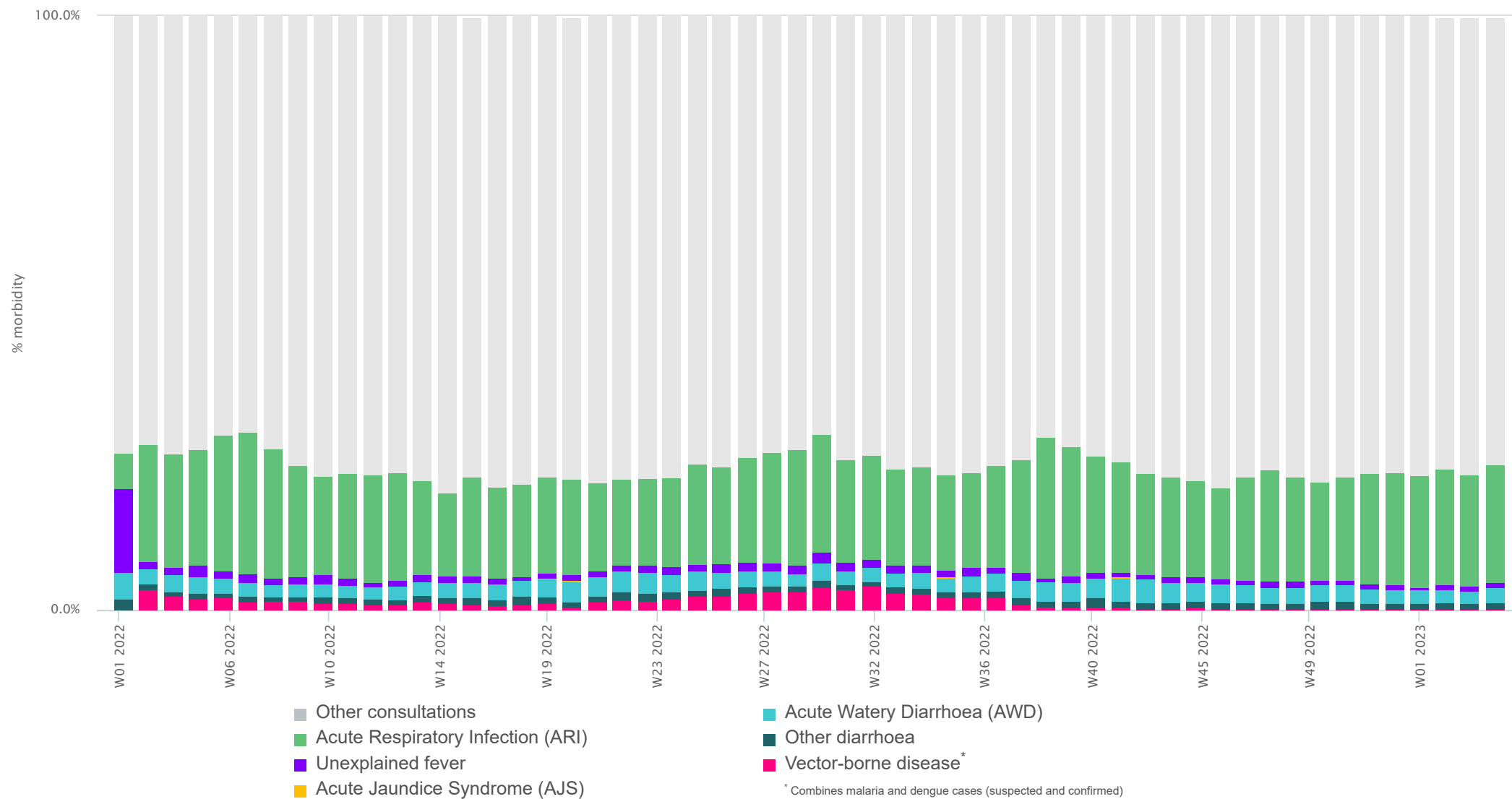
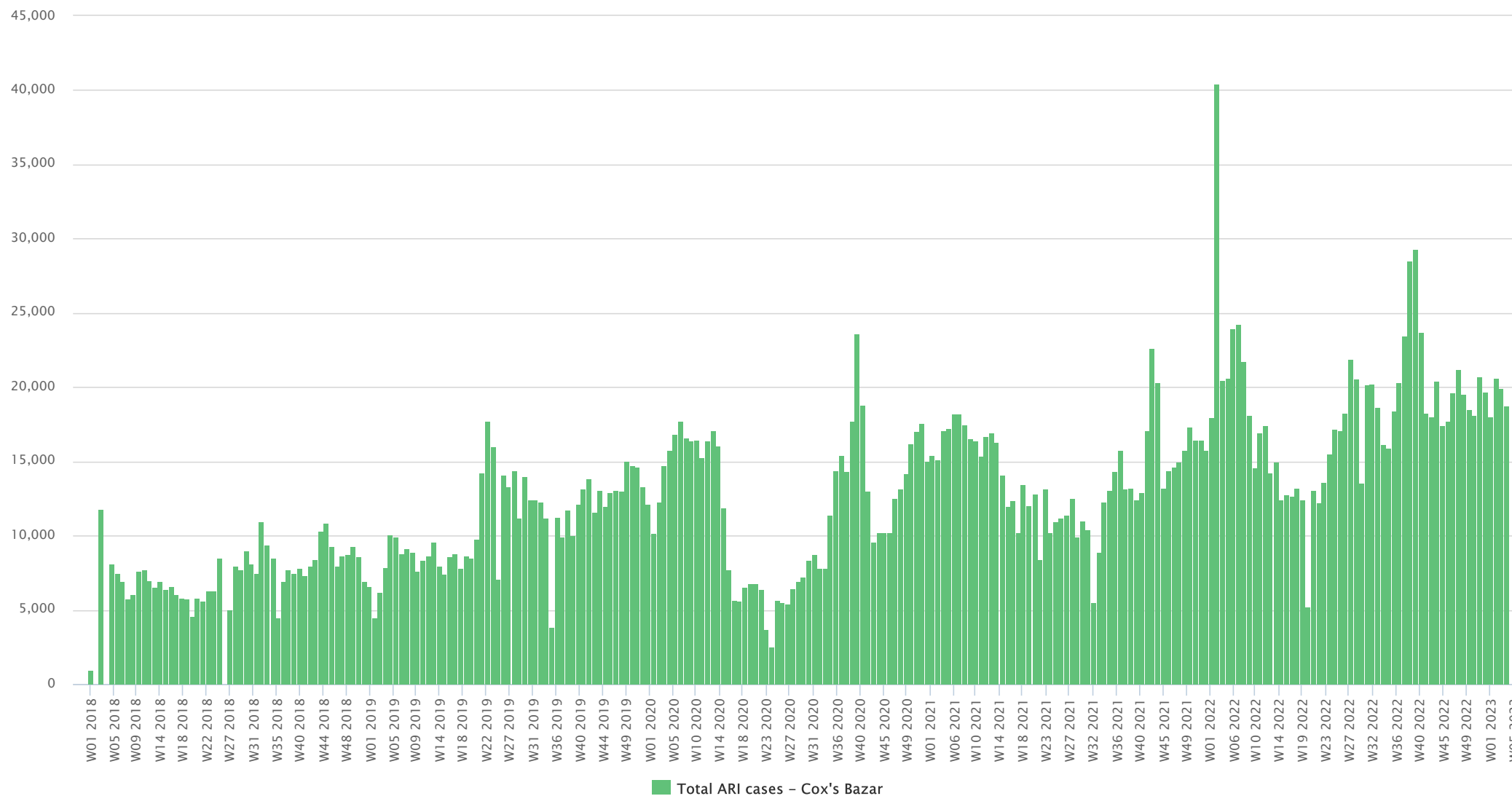
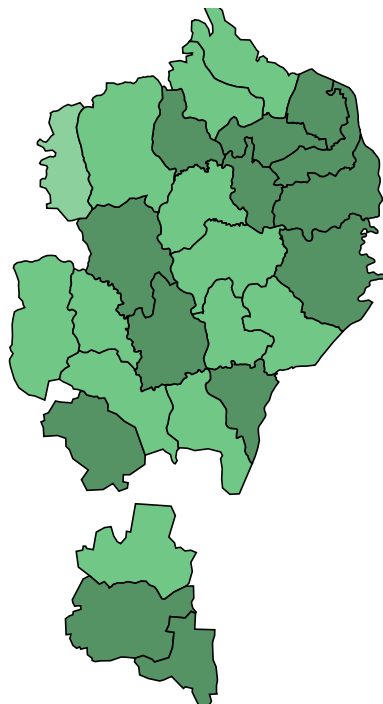


Figure 3 | Trend in number of cases over time (W38 2017 - W3 2023)

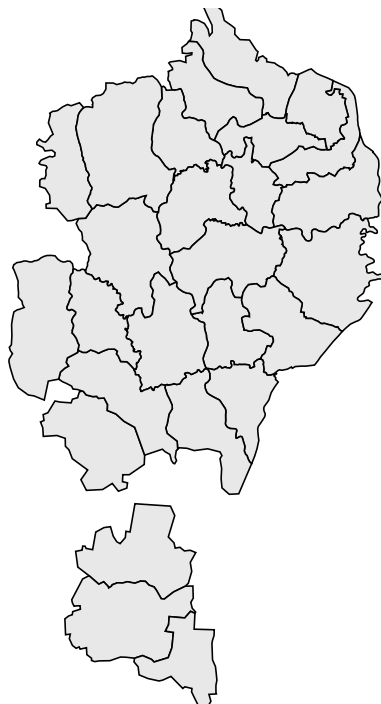


Map 1 | Map of cases by camp (W3 2023)

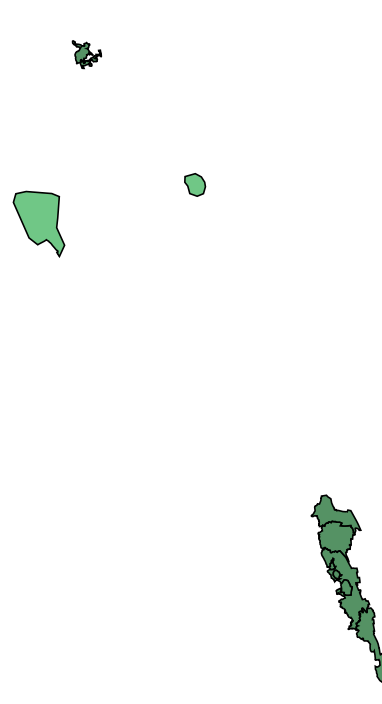
a. Ukhia | Number of cases



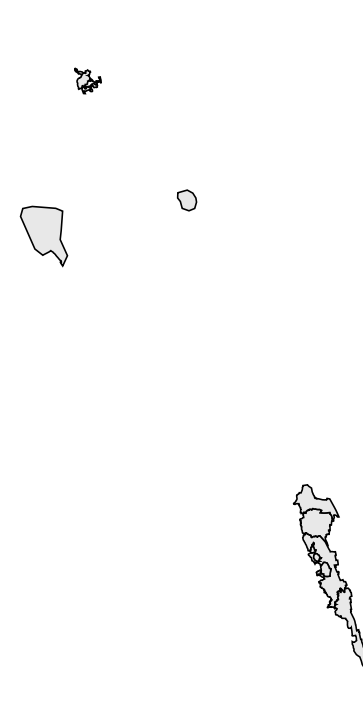
b. Ukhia | Number of alerts



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 (W3 2023)

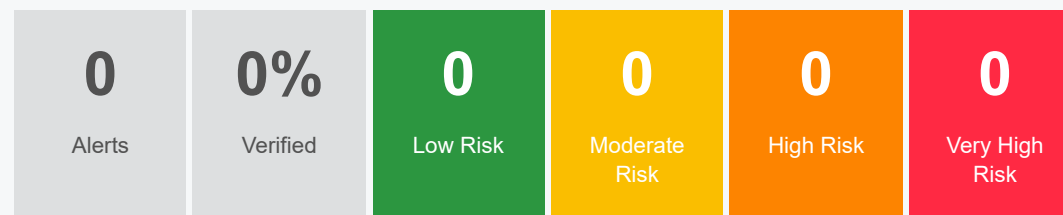
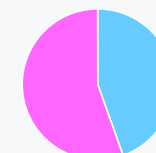
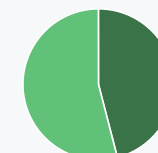


Figure | % sex



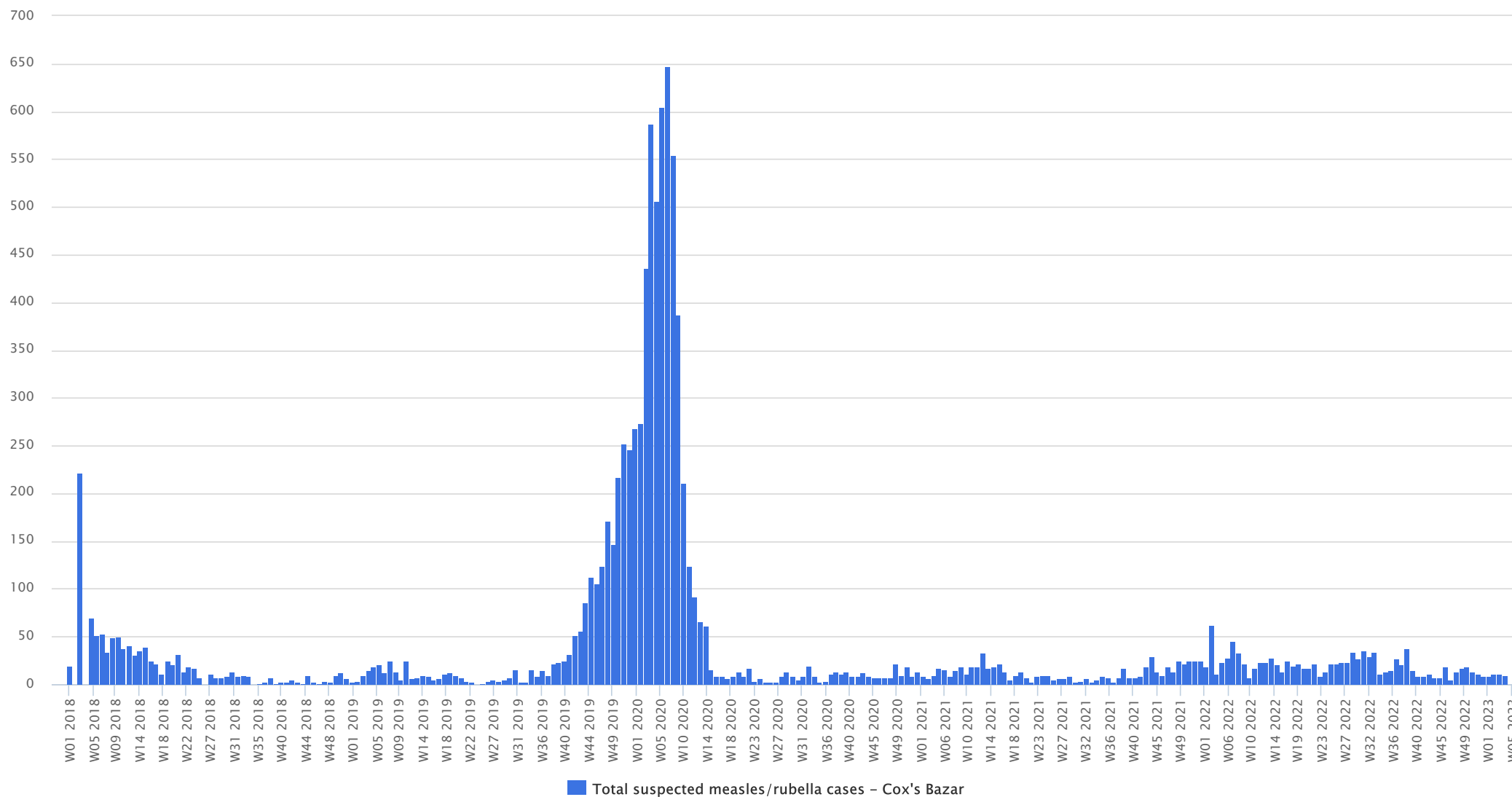
Male Female

Figure | % age



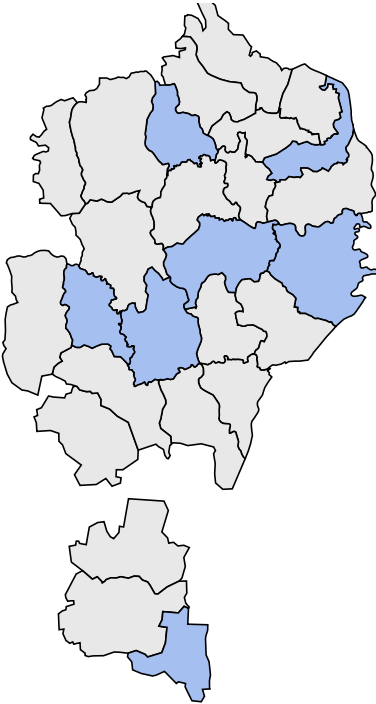
>=5 <5

Figure 4 | Trend in number of suspected cases over time (W38 2017 - W3 2023)

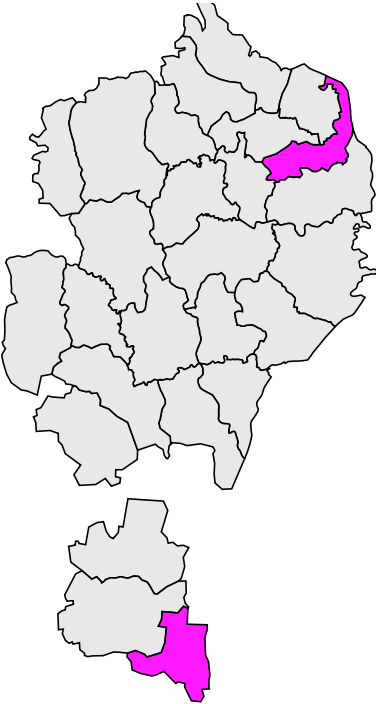


Map 2 | Map of cases by camp (W3 2023)

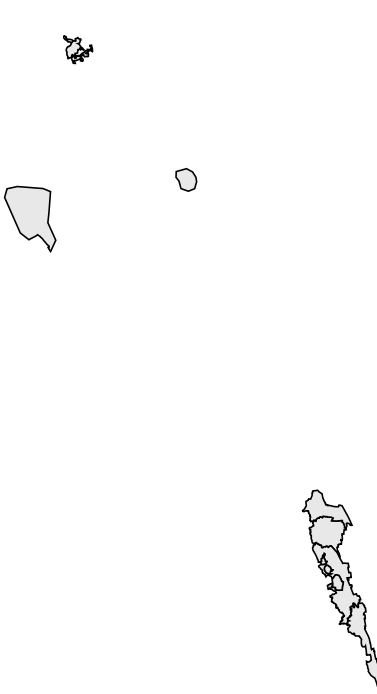
a. Ukhia | Number of cases



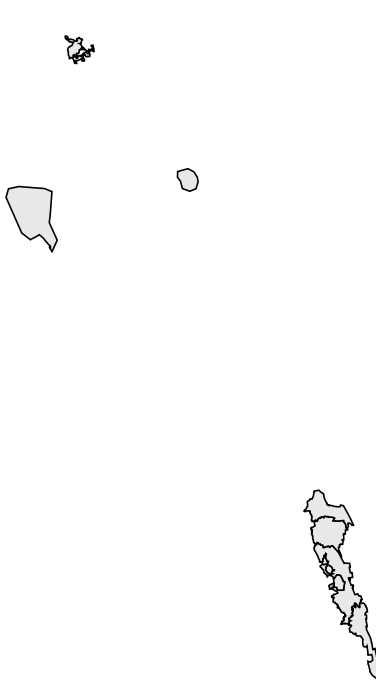
b. Ukhia | Number of alerts



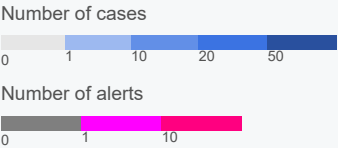
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold
1 case. Source: IEDCR

Alert management (W3 2023)

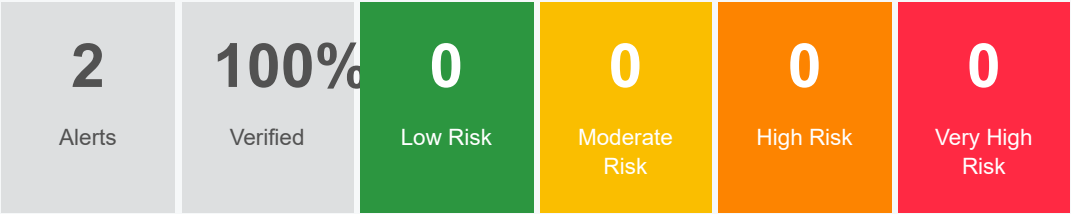


Figure | % sex

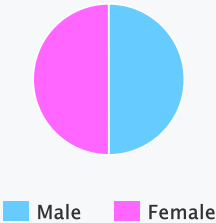


Figure | % age

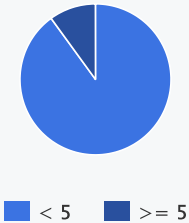
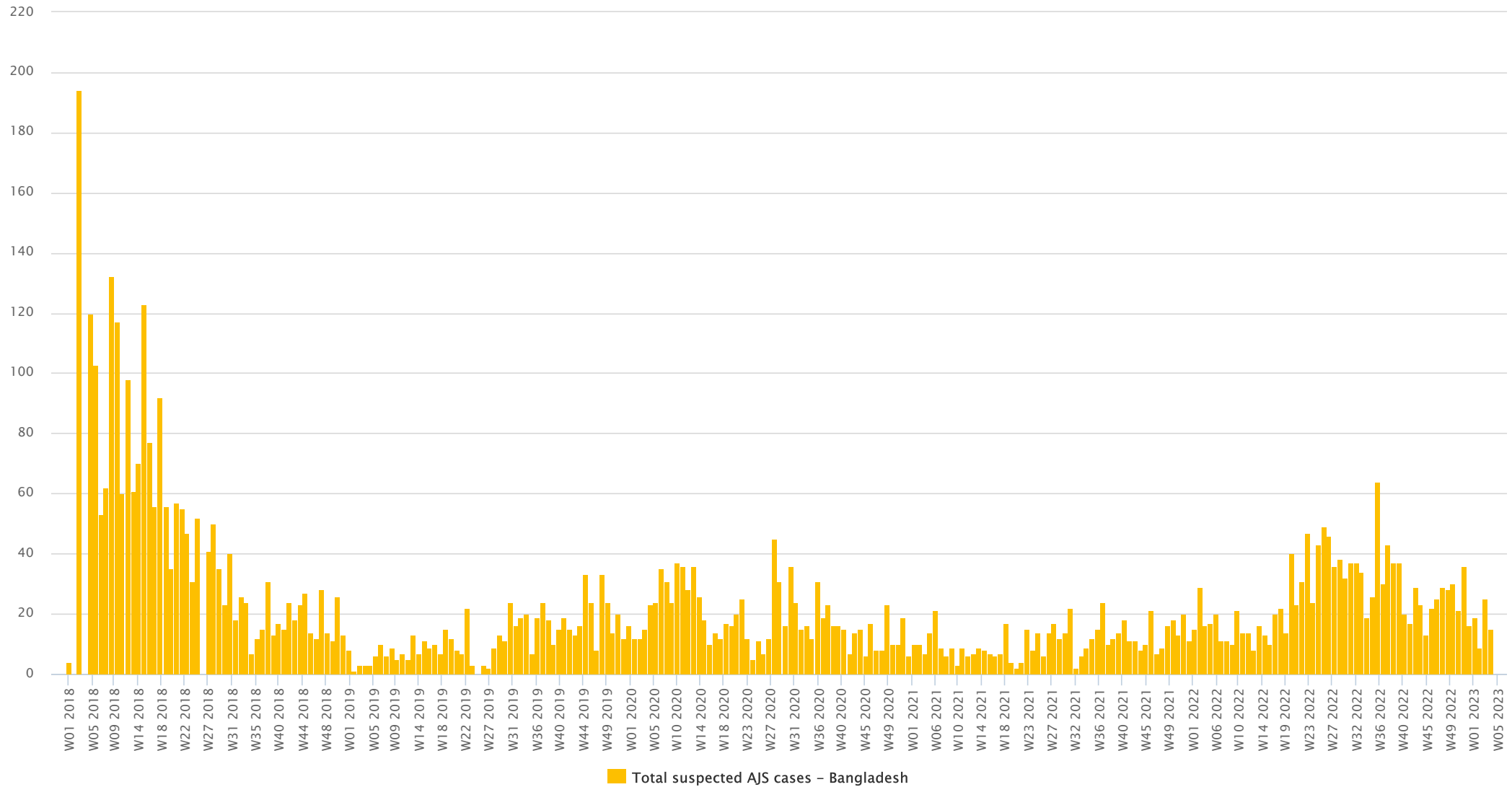
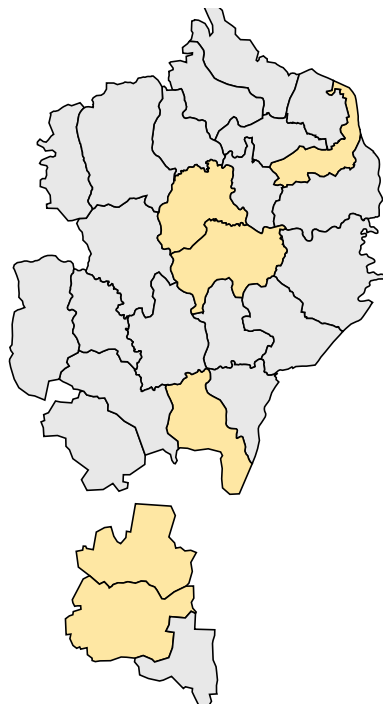


Figure 5 | Trend in number of cases over time (W38 2017 - W3 2023)

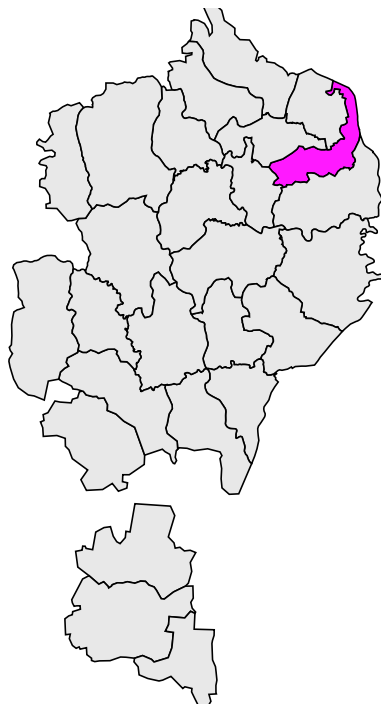


Map 3 | Map of cases by camp (W37 2017 - W3 2023)

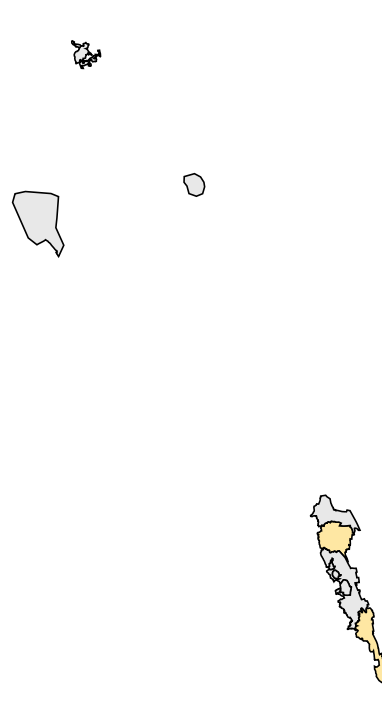
a. Ukhia | Number of cases



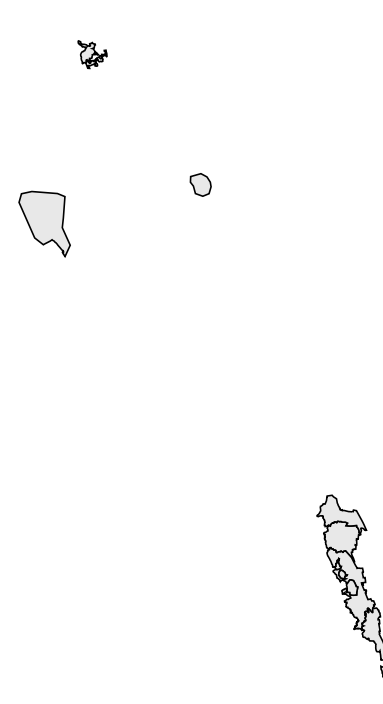
b. Ukhia | Number of alerts



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 (W3 2023)

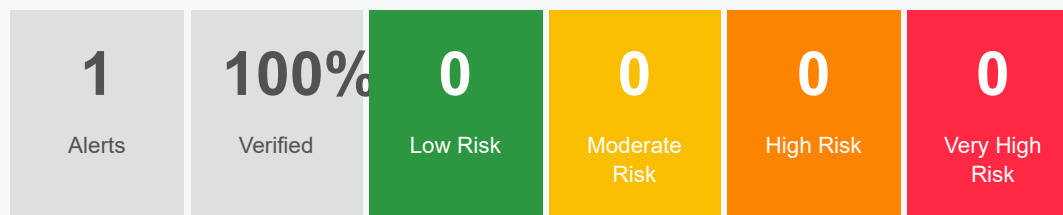
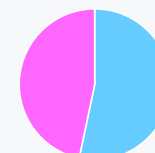
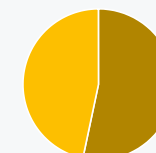


Figure | % sex



Male Female

Figure | % age



>= 5 < 5

Figure 6 | Trend in number of cases over time (W38 2017 - W3 2023)

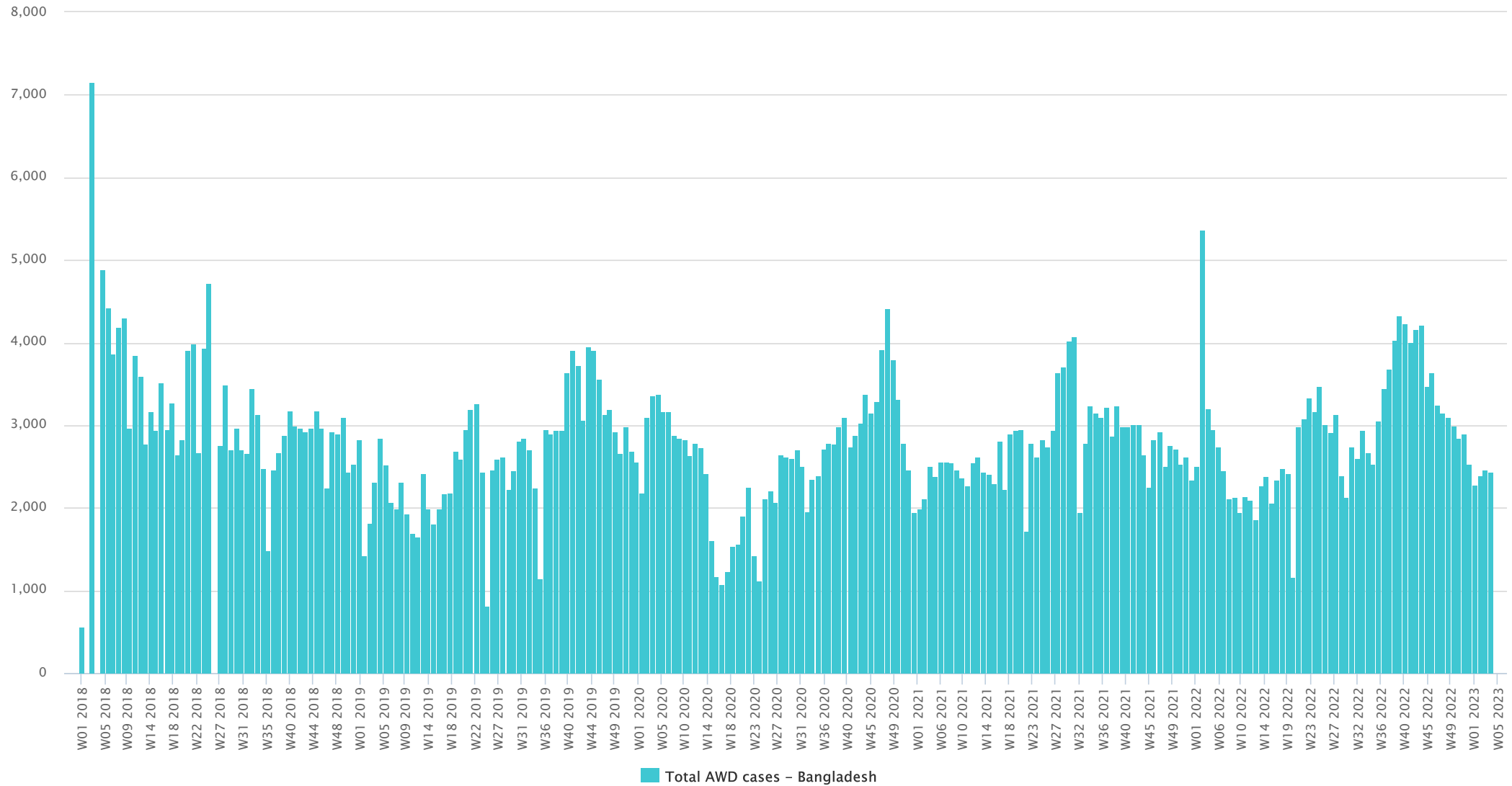
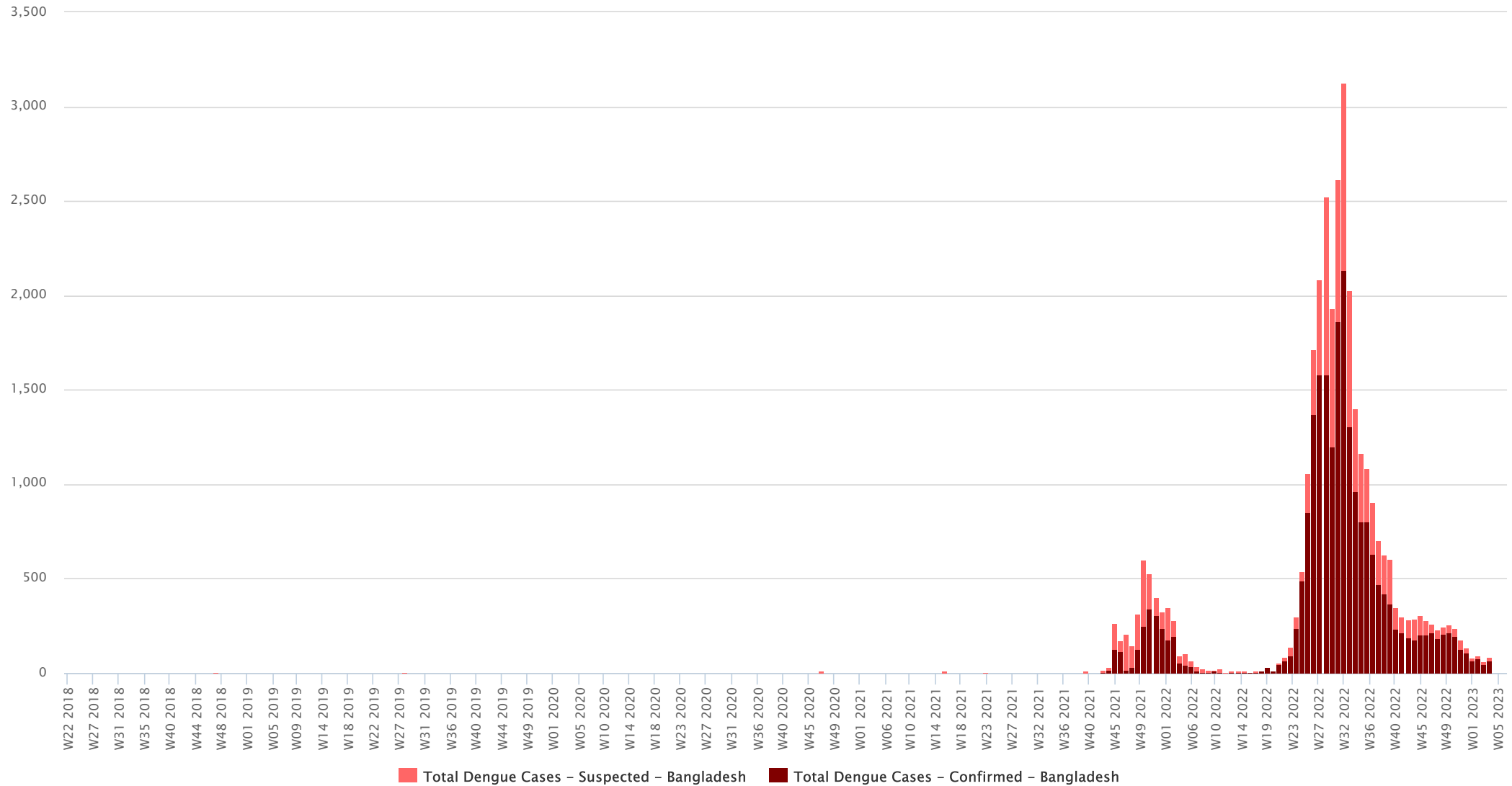
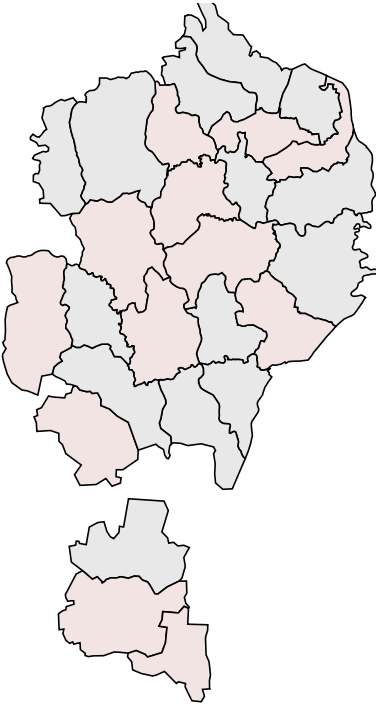


Figure 7 | Trend in number of cases over time (W38 2017 - W3 2023)

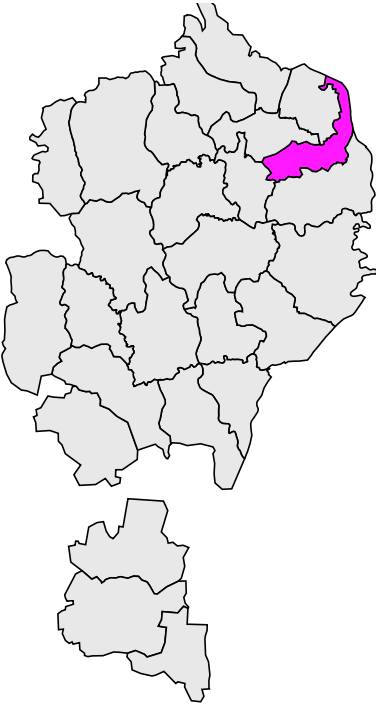


Map 4 | Map of cases by camp (W37 2017 - W3 2023)

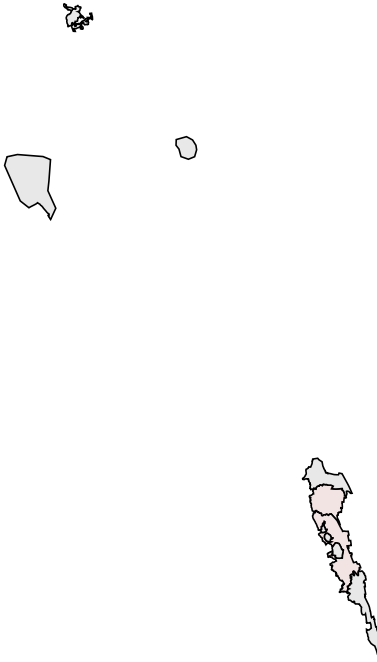
a. Ukhia | Number of cases



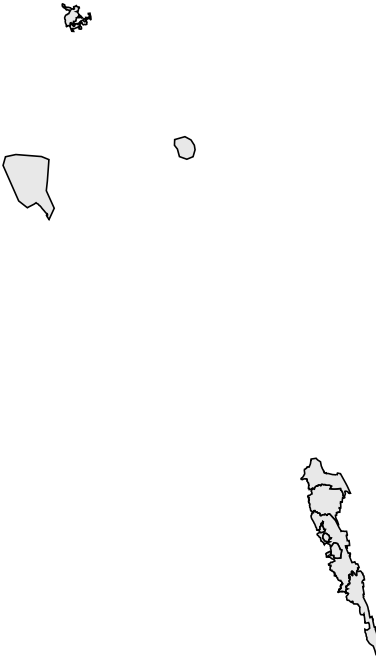
b. Ukhia | Number of alerts



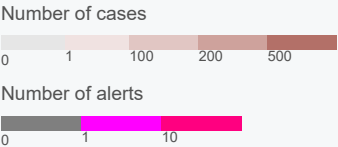
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

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

Alert management (W3 2023)

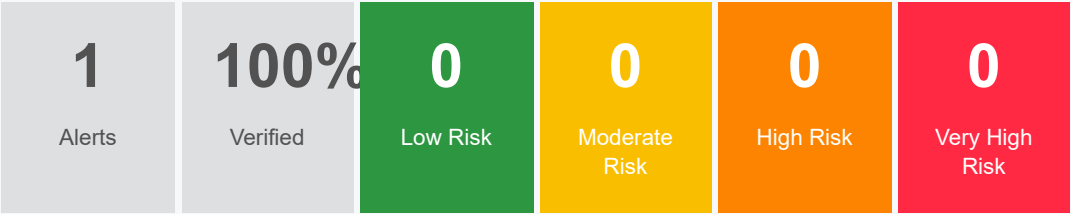


Figure | % sex

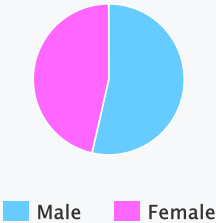


Figure | % age

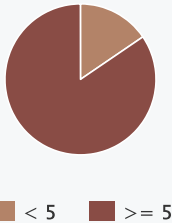
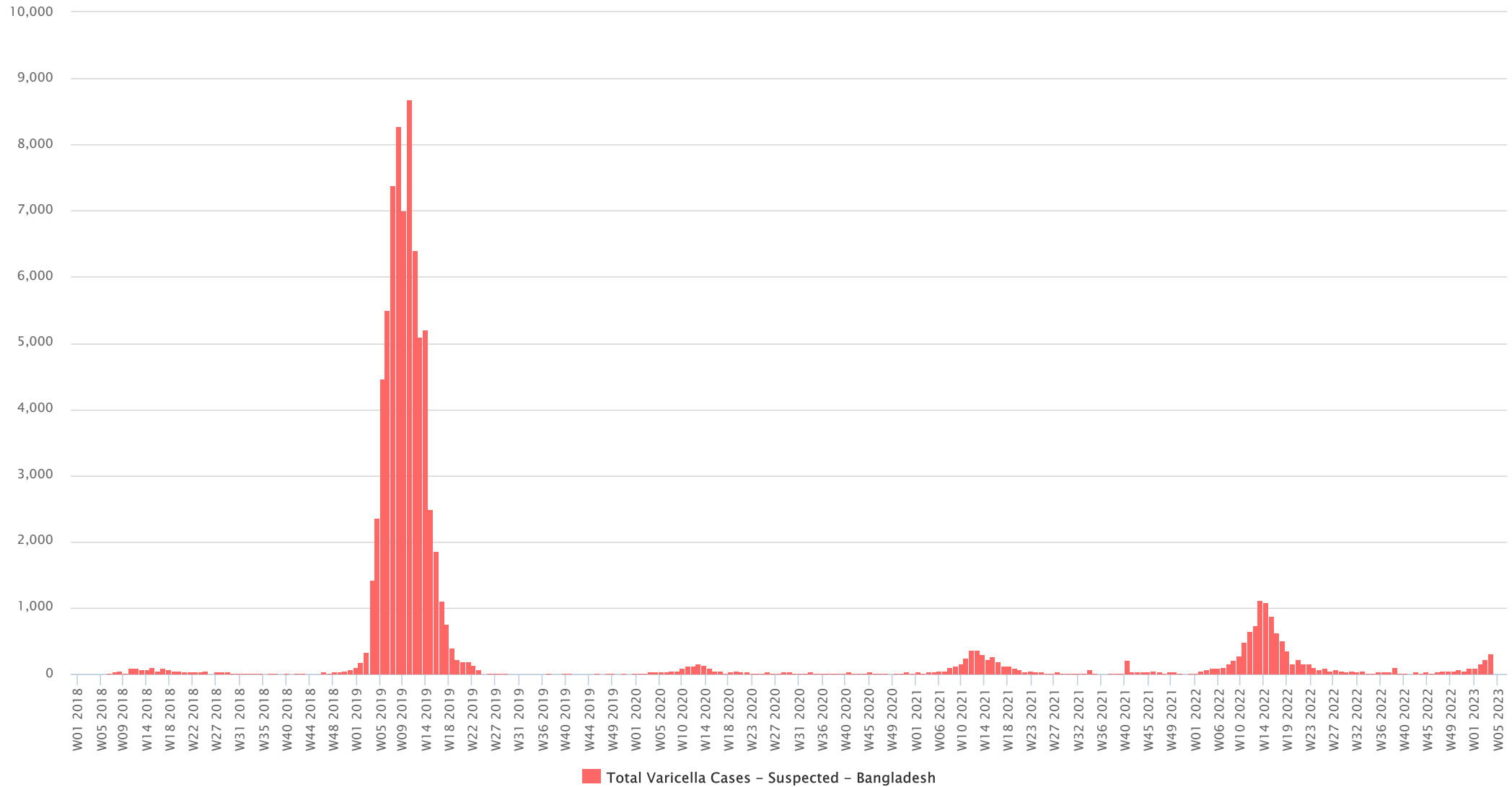
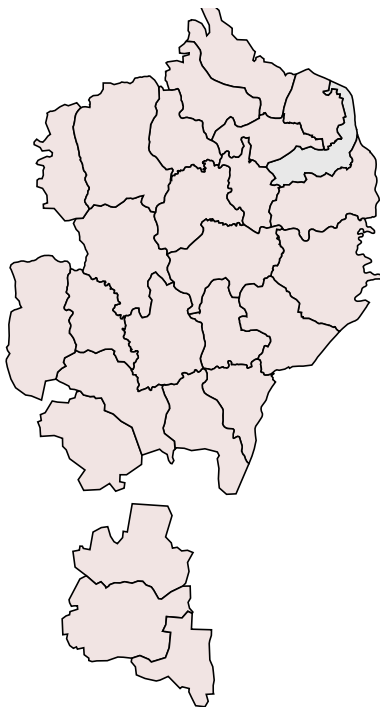


Figure 7 | Trend in number of cases over time (W38 2017 - W3 2023)

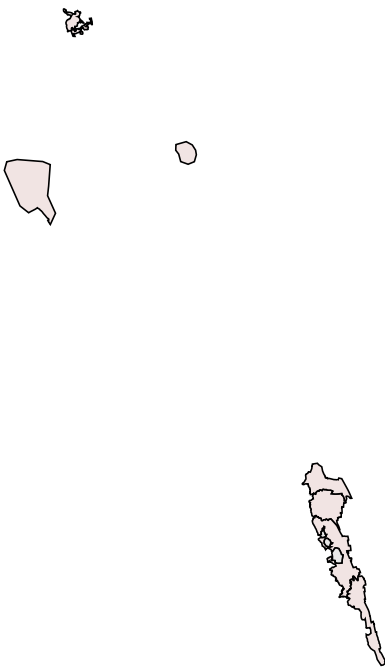


Map 4 | Map of cases by camp (W37 2017 - W3 2023)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

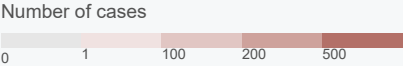


Figure | % sex

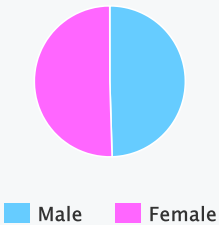
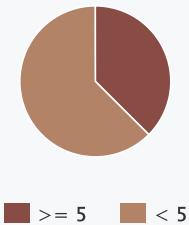


Figure | % age



For more help and support, please contact:

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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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