

# Epidemiological Highlights

Week 31 (30 July- 5 August) 2023

Currently, a total of **141 health facilities** are registered in EWARS

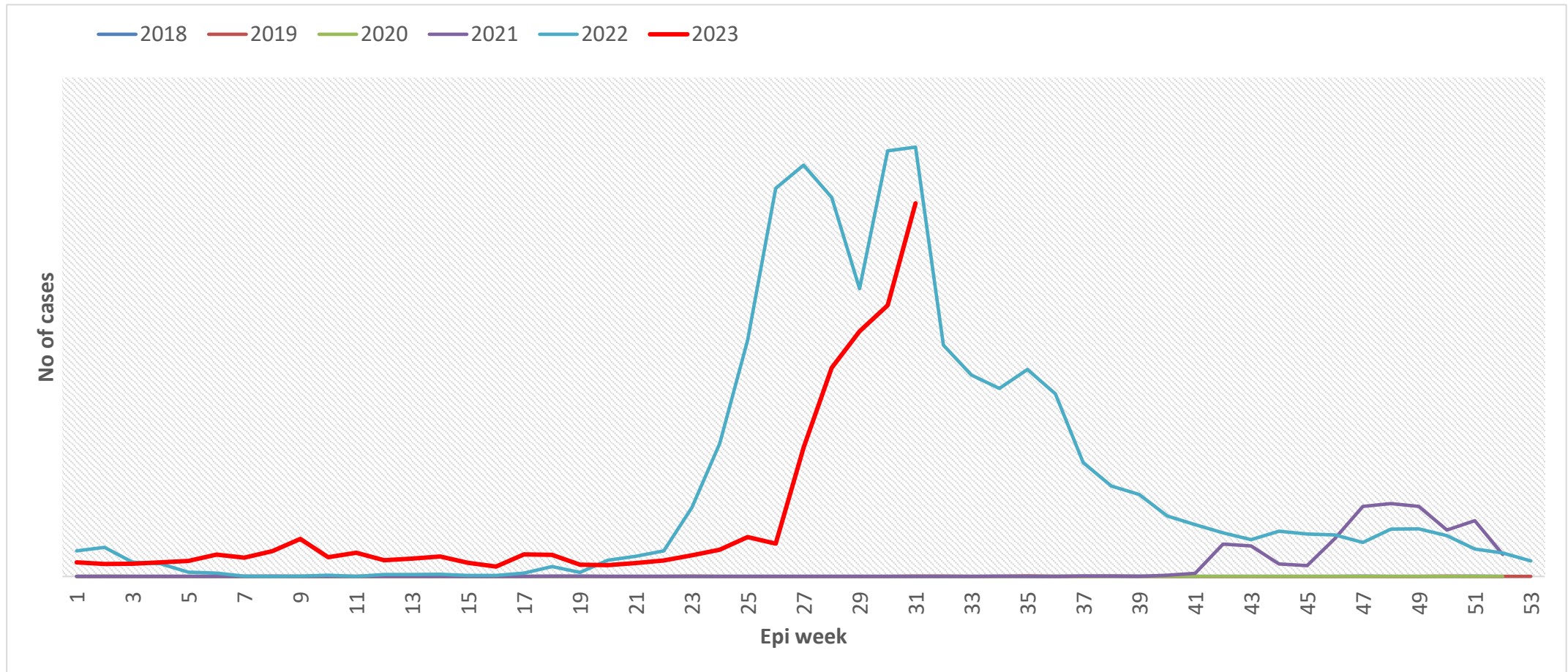
- Of those 120 weekly reports were received on time this week
- Timeliness and completeness of weekly reporting were 85% which is above the global and national weekly threshold
- Eighty-nine (89) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this is a 44% increase from the previous week (62 alerts in week 30, 2023)

# Weekly Proportionate Morbidity and SARI Mortality among the FDMN population from 2020-Epi 1-31, 2023

- Acute Respiratory Infections (19.4%), Acute Watery Diarrhoea (2.3%), and Injury and wounds (2.5%) were the diseases and health conditions with the highest proportional morbidity this week.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. So far, 26 cases of which none is probable COVID-19 Death, have been reported in 2023
- This Epi week, no new SARI death was reported, and upon investigation, none met reclassification as probable COVID-19 death as highlighted:

Year	Suspected SARI death reported (current week)	Reclassified as death due to probable COVID-19
2023	27 (0)	0
2022	136	8
2021	96	15
2020	49	2

# Annual trends of confirmed Dengue cases among FDMN and host population in Cox's Bazar from 2018 to Epi Week 31, 2023

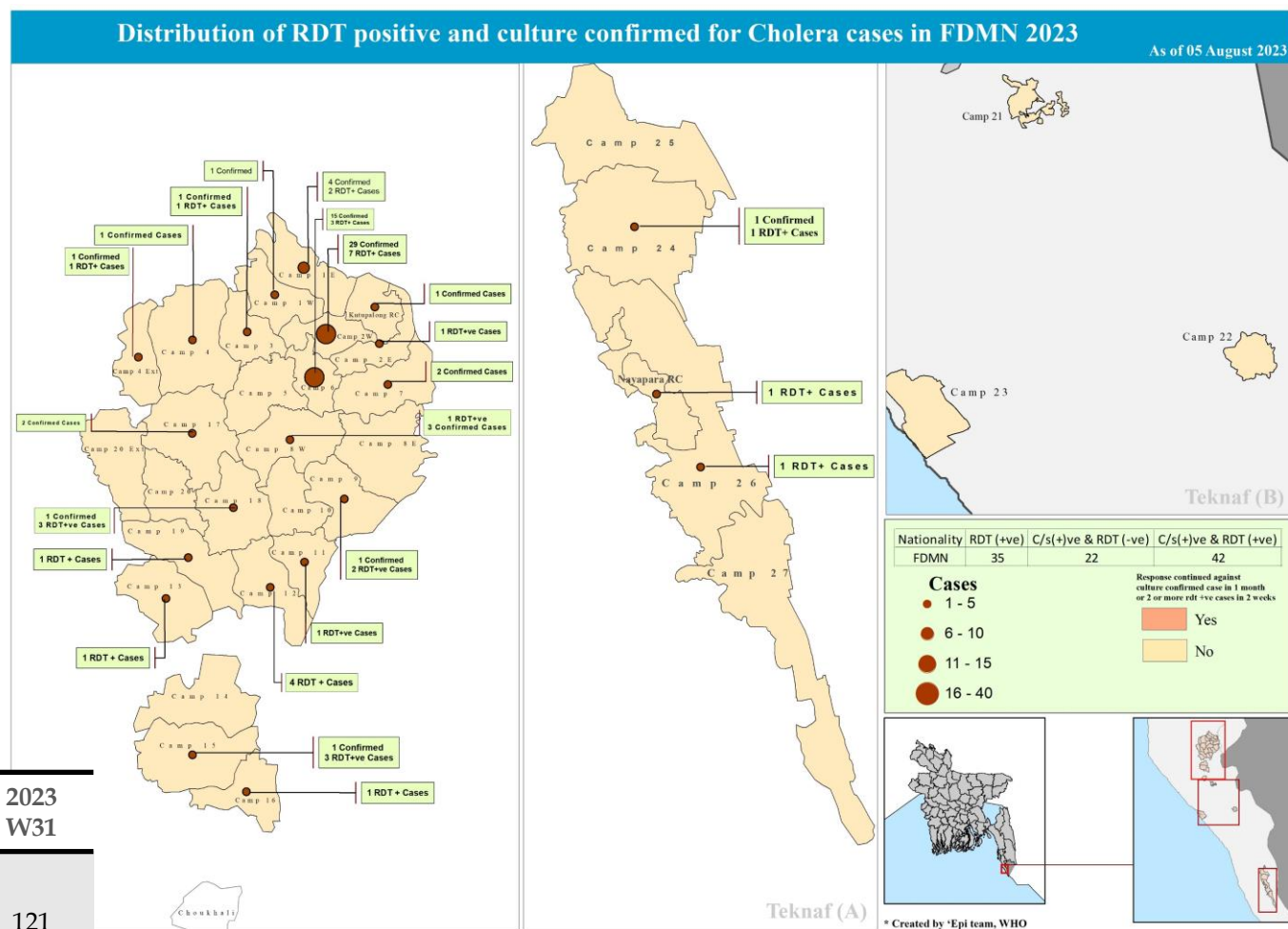


- ❑ Cumulative of 5,567 confirmed dengue cases including six (6) deaths (CFR 0.1%) have so far been reported in 2023
- ❑ The current transmission is a continuation of that for 2021 and 2022 (possible endemic transmission established)
- ❑ Camp 3 and the surrounding camps continue to bear the greatest burden of the cases so far reported in 2023 similar to 2022

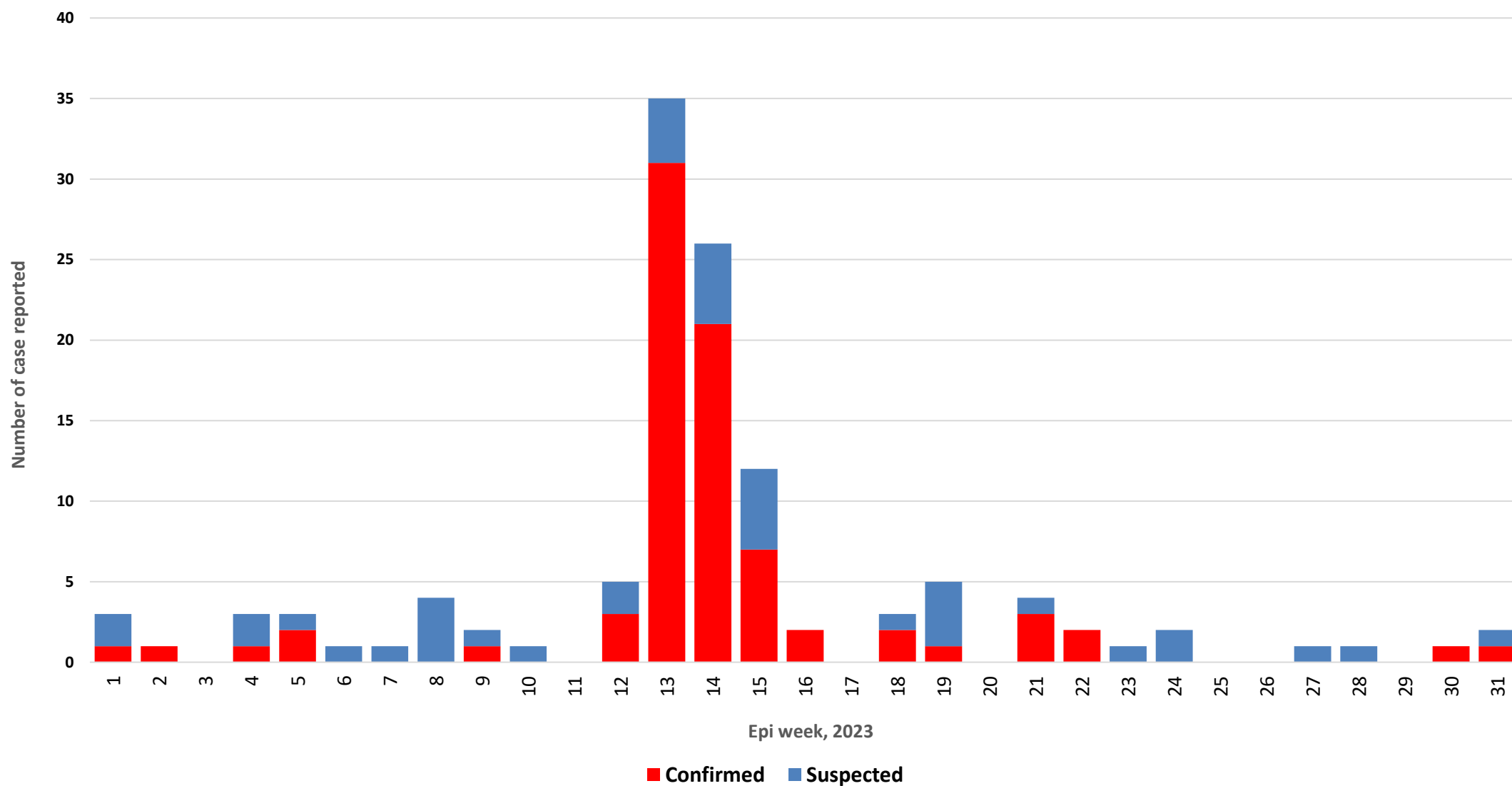
# Cholera/AWD Surveillance Updates

- In this week, one (1) new confirmed and 1 suspected cholera case was reported
- A total of 121 cases of which 41 RDT-positive AWD/cholera suspected cases and 80 culture-confirmed Cholera cases have so far been reported in (Epi week 1-31) 2023.
- Cumulatively there are 981 RDT AWD cases/Cholera suspects reported while 482 cases were culture-confirmed since transmission in 2018.

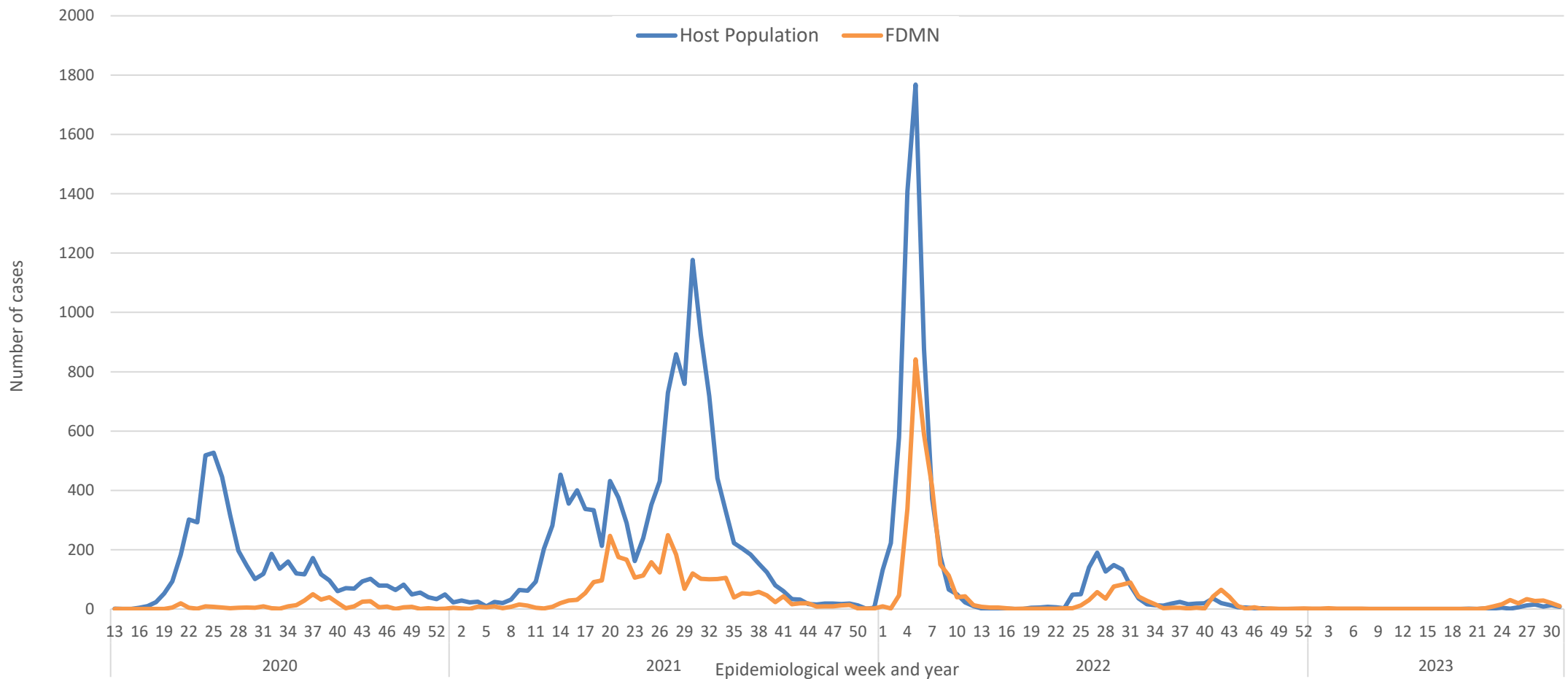
	2018	2019	2020	2021	2022	2023 W31
RDT positive AWD cases/Cholera suspects	49	258	28	357	170	121
Culture confirmed for Cholera	7	184	5	136	70	80



# Weekly trends of suspected and confirmed cholera cases from Epi Week 1-31



# Weekly Trends of COVID-19 Cases among FDMN and Host Population in Cox's Bazar District from Epi Week 13, 2020- Epi Week 31, 2023



**FDMNs: Ten (10)** new confirmed cases were reported this week from FDMN Camps, weekly TPR is 6.5% and case incidence was 10.8 cases/1 million pop.

**Host Population: Seven (7)** new confirmed cases were reported this week from the Host community, weekly TPR is 7.4% and case incidence was 2.5 cases/1m pop.

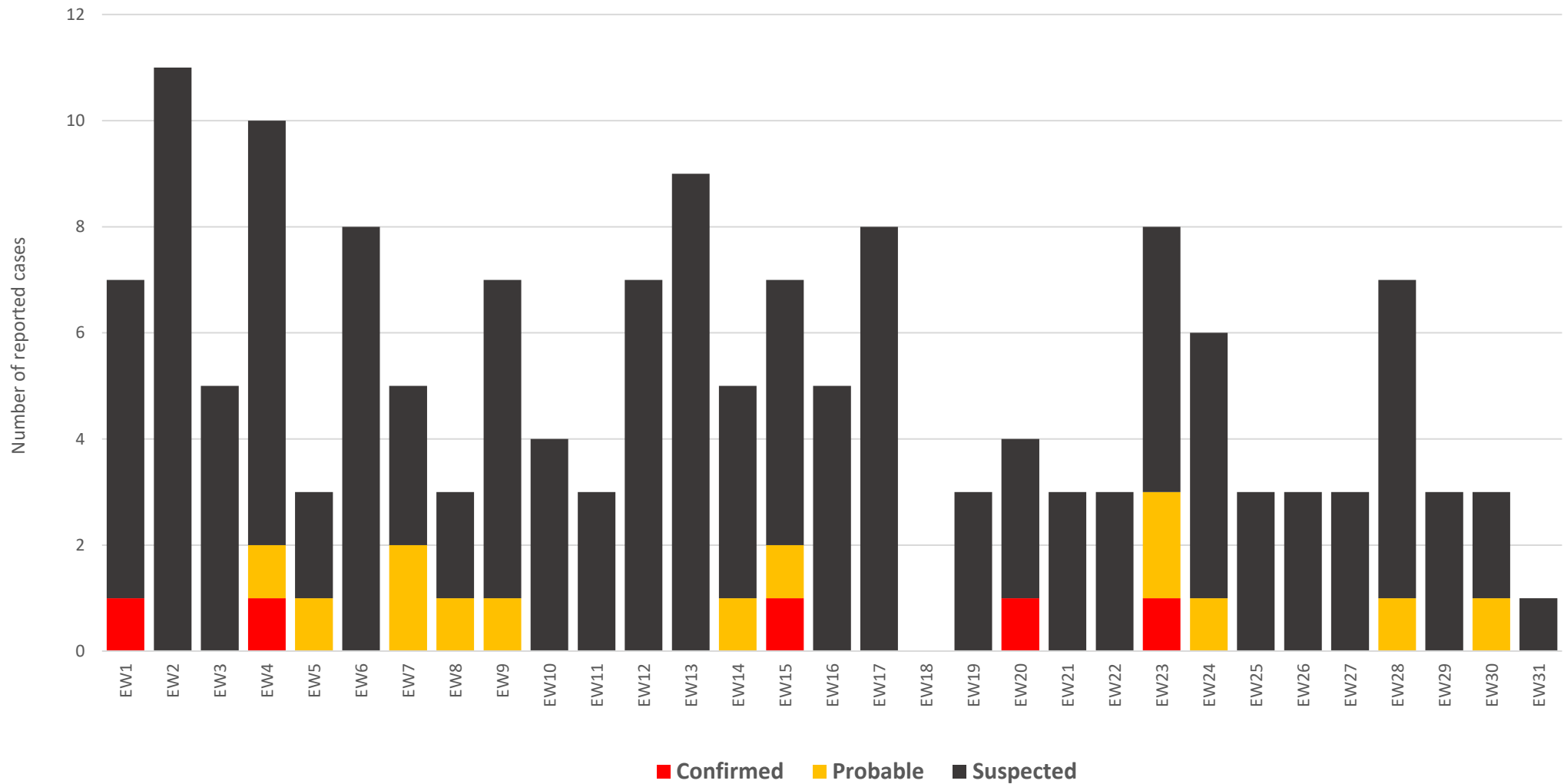
# Weekly and annual Diphtheria Surveillance Updates from 2017- Epi week 31, 2023

- One (1) suspected diphtheria cases were reported in go.data in this Epi week
- The last confirmed case was reported on 6 June 2023
- About 157 cases (5 confirmed, 13 probable and 139 suspected) of which there was one (1) death reported so far reported in 2023.
- In total 54 deaths have so far been reported since 2017, with the last death reported on 18 October 2022

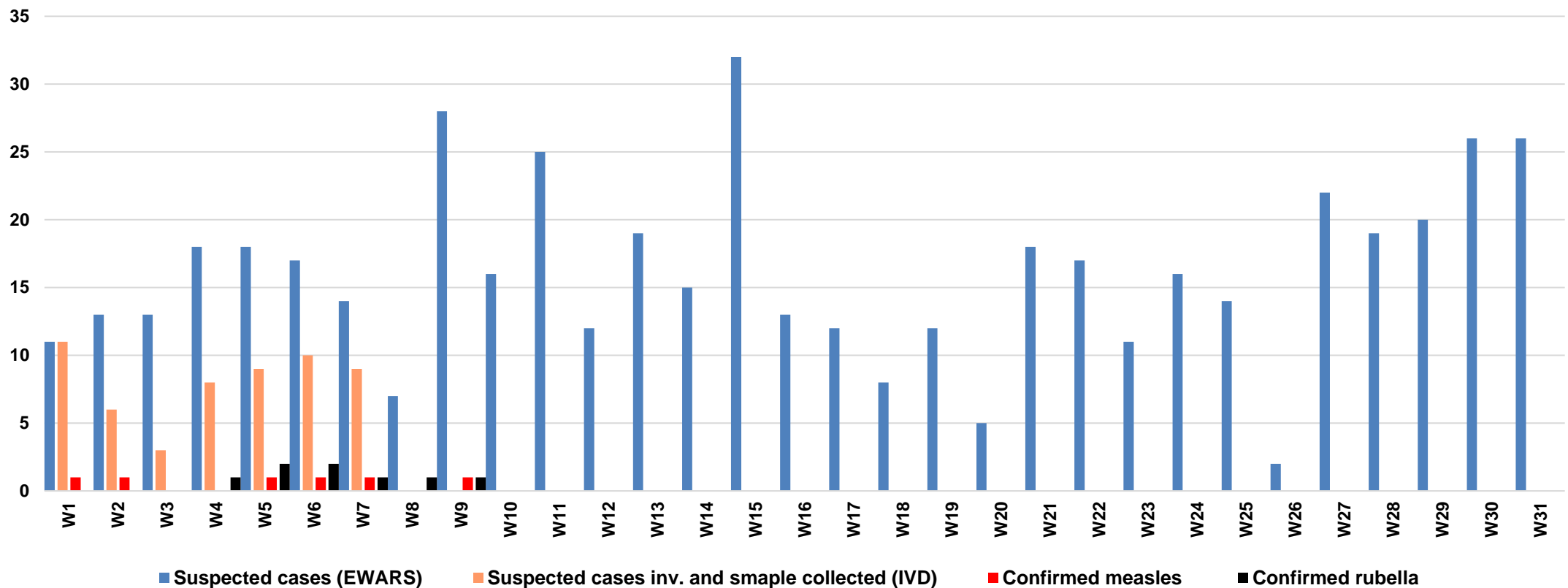
Classification	2017	2018	2019	2020	2021	2022	2023
Confirmed	66	226	31	19	30	56	5
Probable	1154	1555	60	9	29	3	13
Suspected	1796	3549	523	198	118	349	139
Death	30	14	3	0	5	2	1

# Weekly trends of Diphtheria cases from Epi weeks 1-31 2023

Total number of diphtheria case reported in EWARS from week 1-31, 2023



# Epi Curve of Weekly Suspected Measles Cases week 1-31, 2023



- Twenty-six (26) suspected measles cases were reported this Epi week
- Total of 499 cases were reported through EWARS, 58 cases were reported through IVD case-based surveillance of which 14 were confirmed through the lab (IgM positive)
- Six (6) confirmed cases were measles and 8 were rubella confirmed
- Epidemiology and IVD units undertaking investigations

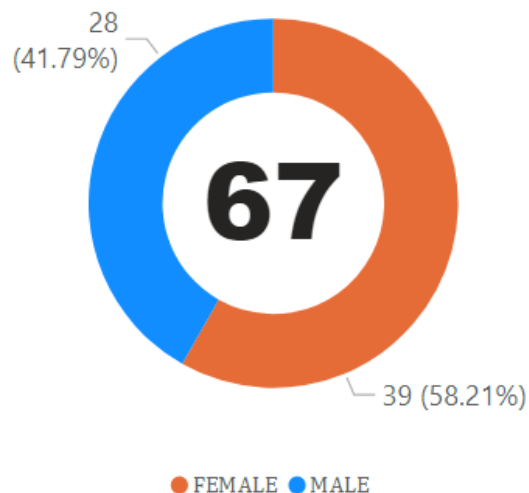
## Proportionate Mortality updates Epi week 31, 2023

Probable causes of death	Epi week 31	In 2023
Still Birth	7 (17%)	193 (12%)
Neonatal Death (<28 days old)	5 (7%)	168 (11%)
Infectious Disease	4 (6%)	45 (3%)
Severe Acute Respiratory Infection (SARI)	--	20 (1%)
Injury	1 (3%)	36 (2%)
Maternal Death	2 (3%)	30 (2%)
Acute Malnutrition	--	2 (0%)
Other	48 (72%)	1121 (69%)
<b>Total</b>	<b>67 (100%)</b>	<b>1615 (100%)</b>

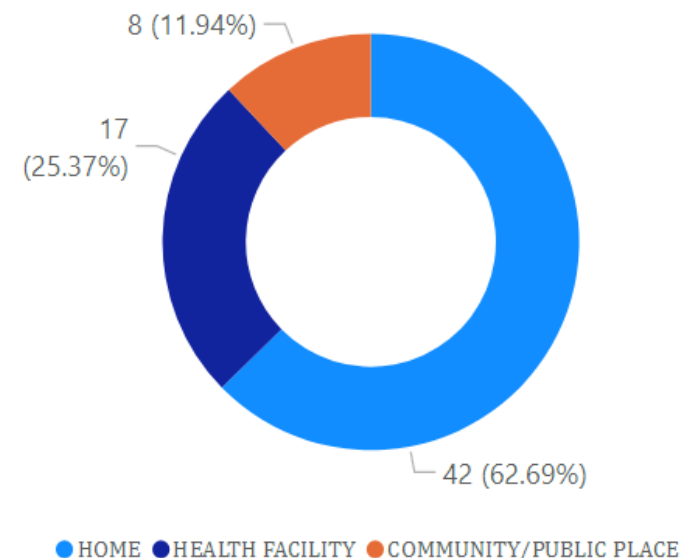
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

# Community-based Mortality Surveillance updates Epi week 31, 2023

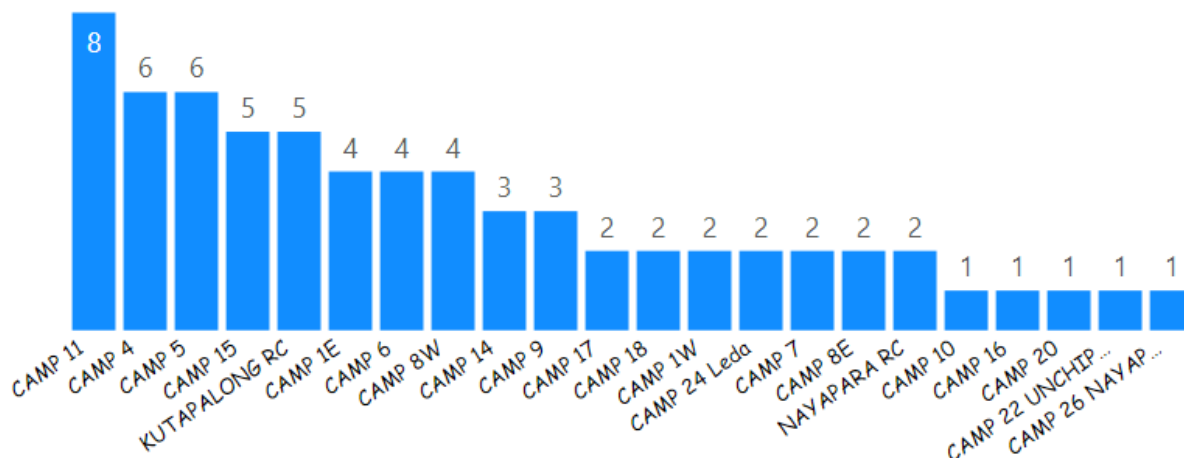
**Gender distribution**



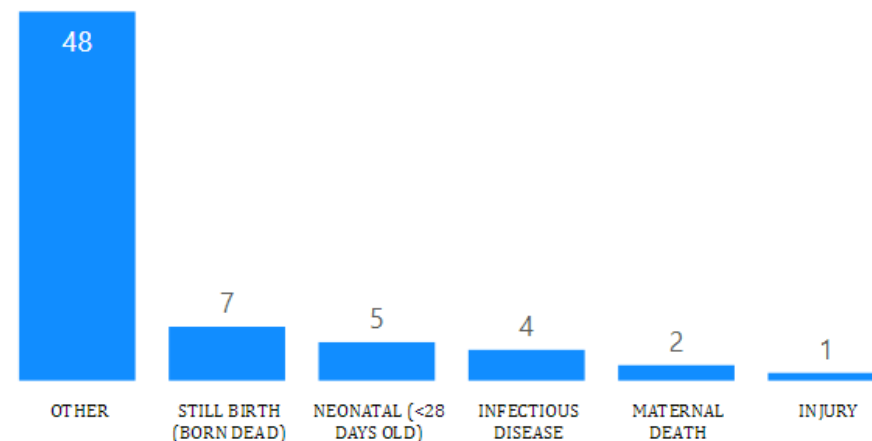
**Place of death**



**Distribution of deceased Camp**



**Distribution of Probable cause of death**



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Epidemiological Bulletin W31 2023



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



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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 <sup>1</sup>
923,358	97%	Total population under surveillance
152	-	Total number of health facilities
141	93%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

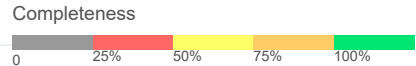
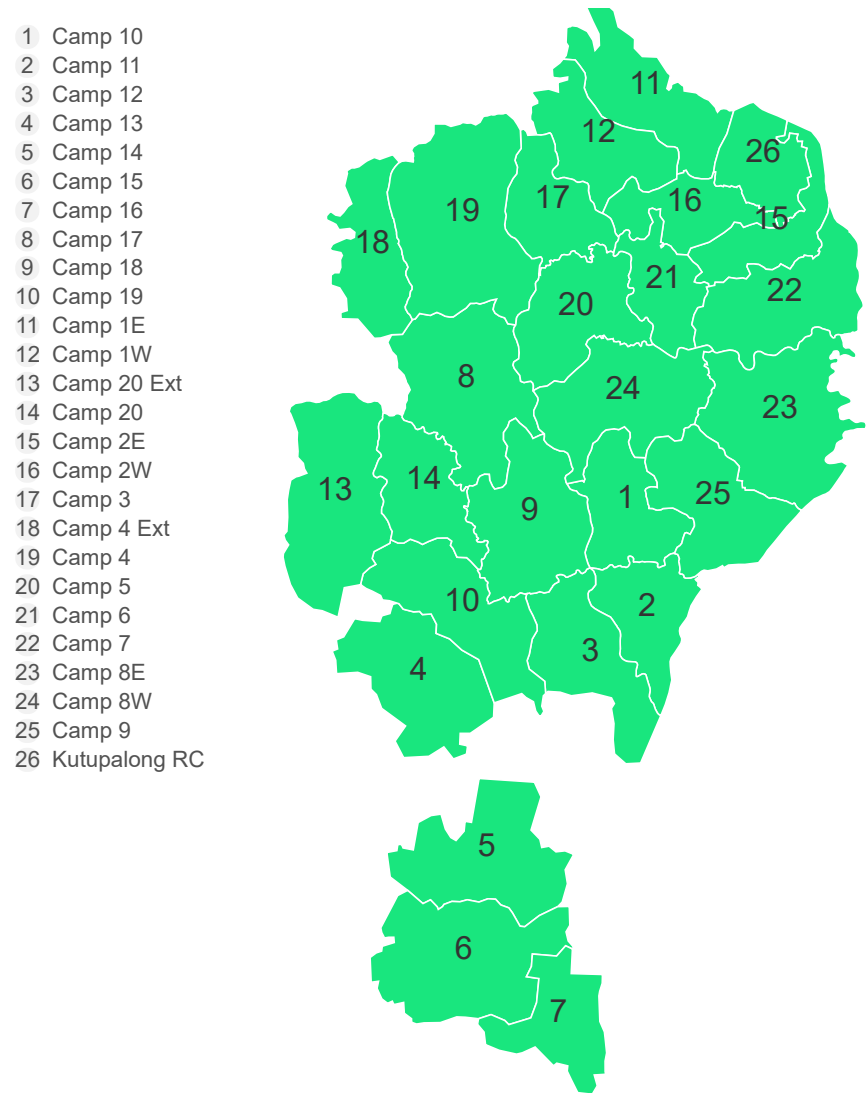
W31	Cumulative (2023)	
120	4483	Number of weekly reports received
85%	95%	Completeness
85%	87%	Timeliness

Table 3 Alert performance indicators

W31	Cumulative (2023)	
89	2,271	Total alerts raised
100%	100%	% verified
0%	0%	% auto-discarded
0%	0%	% undergoing risk assessment
0%	0%	% 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

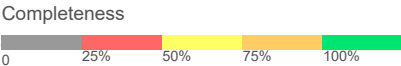
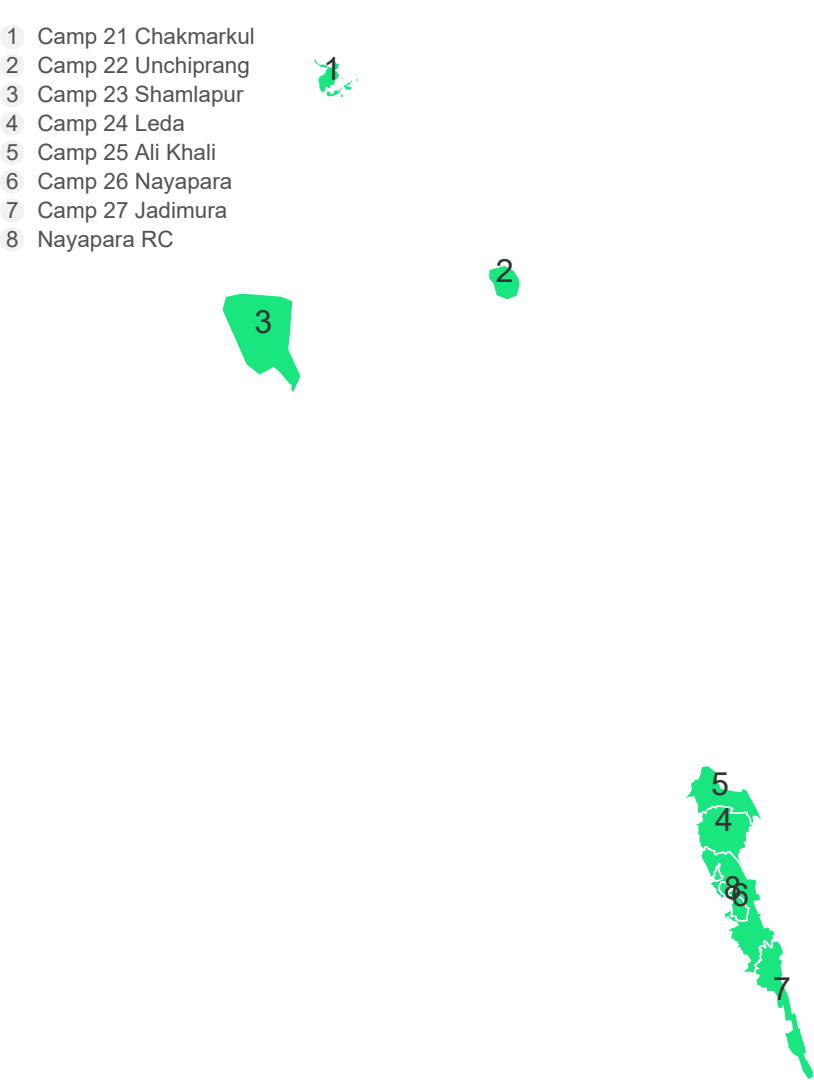


Table 4 | Performance by camp (W31 2023)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	4	4	100%	100%
Camp 1W	4	4	100%	100%
Camp 2E	3	3	100%	100%
Camp 2W	4	3	75%	75%
Camp 3	3	3	100%	83%
Camp 4	5	5	100%	100%
Camp 4 Ext	1	1	100%	100%
Camp 5	4	4	100%	100%
Camp 6	2	2	100%	100%
Camp 7	4	4	75%	88%
Camp 8E	9	8	88%	88%
Camp 8W	3	3	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

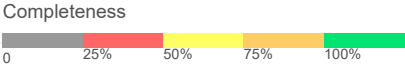
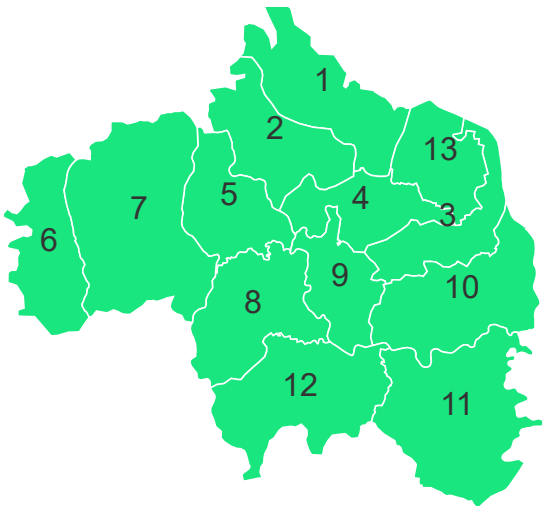
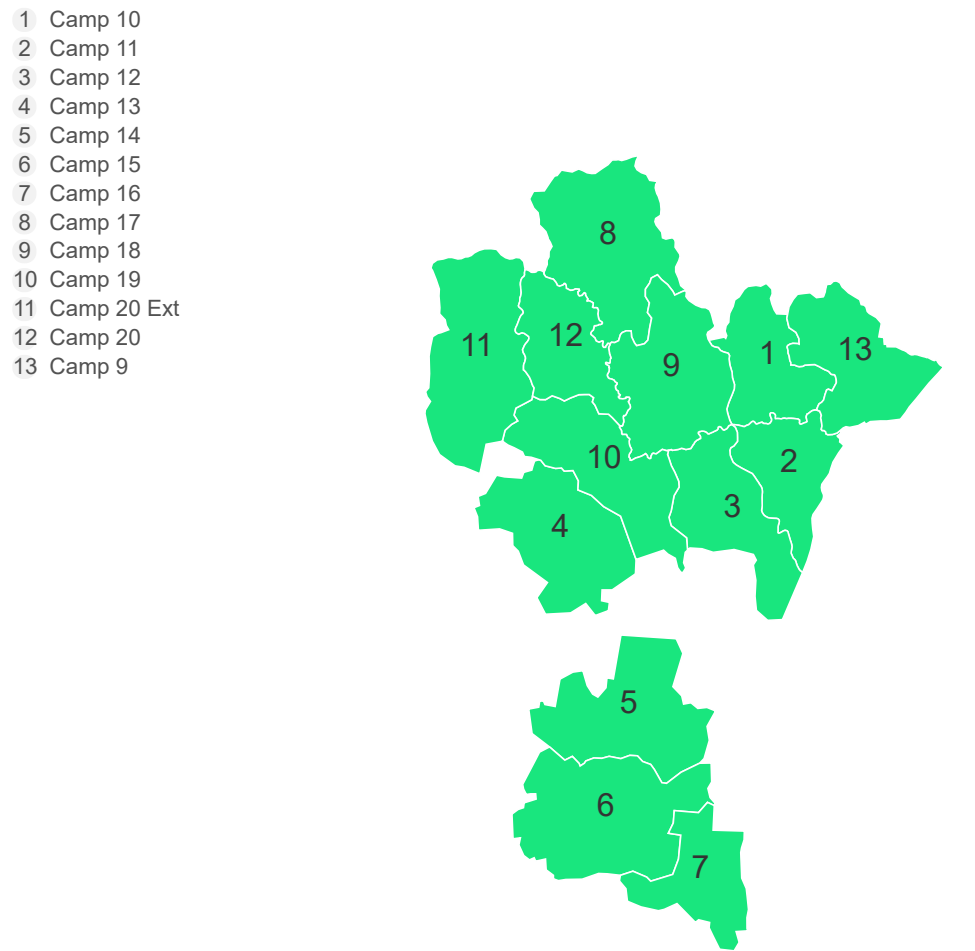


Table 5 | Performance by camp (W31 2023)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	4	100%	100%
Camp 11	3	3	100%	100%
Camp 12	5	2	60%	50%
Camp 13	7	5	86%	79%
Camp 14	6	5	50%	67%
Camp 15	8	7	75%	81%
Camp 16	7	6	71%	79%
Camp 17	3	2	100%	67%
Camp 18	4	3	75%	75%
Camp 19	3	3	100%	100%
Camp 20	3	3	133%	83%
Camp 20 Ext	2	2	100%	100%
Camp 9	5	5	80%	90%

Map 3 | Completeness by camp



Completeness

0

25%

50%

75%

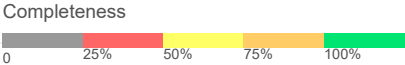
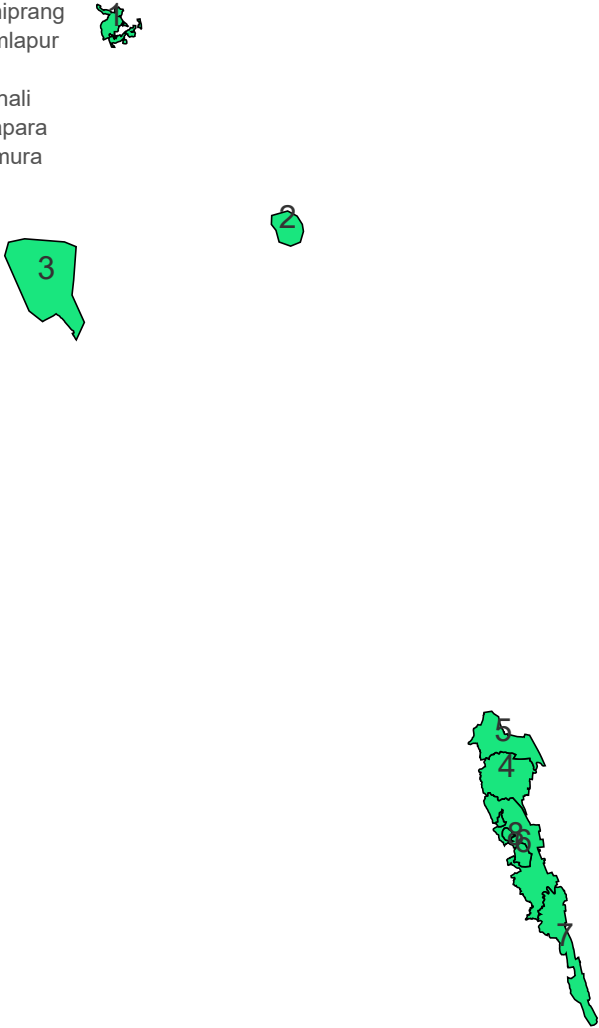
100%

Table 6 | Performance by camp (W31 2023)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	3	1	100%	67%
Camp 22 Unchiprang	4	3	75%	75%
Camp 23 Shamlapur	2	2	100%	75%
Camp 24 Leda	2	2	100%	100%
Camp 25 Ali Khali	3	3	100%	100%
Camp 26 Nayapara	4	4	75%	88%
Camp 27 Jadimura	2	2	100%	100%
Nayapara RC	2	2	100%	100%

Map 4 | Completeness by camp

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



**Table 7** | Performance by partner (W31 2023)

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	2	1	50%	50%	IRC	6	3	100%	100%
AWARD	12	0	0%	0%	MSF	16	6	88%	88%
BASHMAH	2	0	0%	0%	MoH	24	9	58%	58%
BDRCS	18	9	50%	50%	MHI	2	1	100%	100%
BRAC	10	10	50%	50%	Medair	0	0		
CARE	8	0	0%	0%	FH/MTI	8	4	100%	100%
GH/CPI	2	1	50%	50%	PRANTIC	2	1	50%	50%
DBC	2	1	50%	50%	PULSE	2	1	50%	50%
DSK	2	0	0%	0%	QC	2	1	50%	50%
DCHT-PWJ	2	1	50%	50%	PHD	16	7	75%	75%
FRNDS	8	4	100%	100%	RPN	4	2	50%	50%
GK	20	10	90%	90%	RHU	6	3	50%	100%
Global One	0	0			RI	0	0		
GUSS	2	1	50%	50%	RTMI	14	7	100%	100%
HAEFA	4	2	50%	50%	SALT	2	2	100%	50%
HAIB	0	0			SCI	12	6	100%	100%
HMBDF	4	2	100%	100%	DCHT-MM	2	1	50%	50%
HOPE	2	1	50%	50%	Turkish Government	2	1	50%	50%
ICRC	0	0			TdH	3	2	100%	100%
IOM	38	19	95%	95%					

Table 8 | Performance by camp

Northern group	W31		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	2	100%	75	99%
Camp 1W	4	100%	107	100%
Camp 2E	11	73%	276	98%
Camp 2W	4	100%	131	99%
Camp 3	3	100%	108	100%
Camp 4	7	100%	104	99%
Camp 4 Ext	0	0%	22	100%
Camp 5	4	100%	56	100%
Camp 6	2	100%	48	100%
Camp 7	1	100%	45	100%
Camp 8E	1	100%	67	100%
Camp 8W	5	100%	119	100%
Kutupalong RC	3	100%	35	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

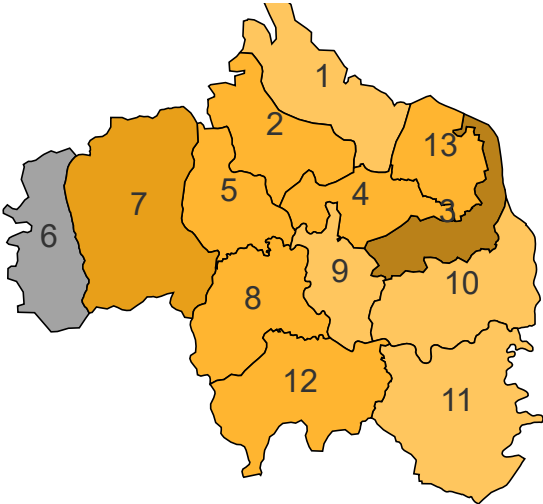


Table 9 | Performance by camp

Southern group	W31		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	1	100%	43	98%
Camp 11	4	100%	38	100%
Camp 12	2	100%	54	100%
Camp 13	0	0%	77	100%
Camp 14	3	100%	73	99%
Camp 15	3	100%	81	98%
Camp 16	3	100%	65	100%
Camp 17	2	100%	38	95%
Camp 18	6	100%	102	100%
Camp 19	0	0%	13	100%
Camp 20	2	100%	45	100%
Camp 20 Ext	1	100%	14	100%
Camp 9	0	0%	69	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

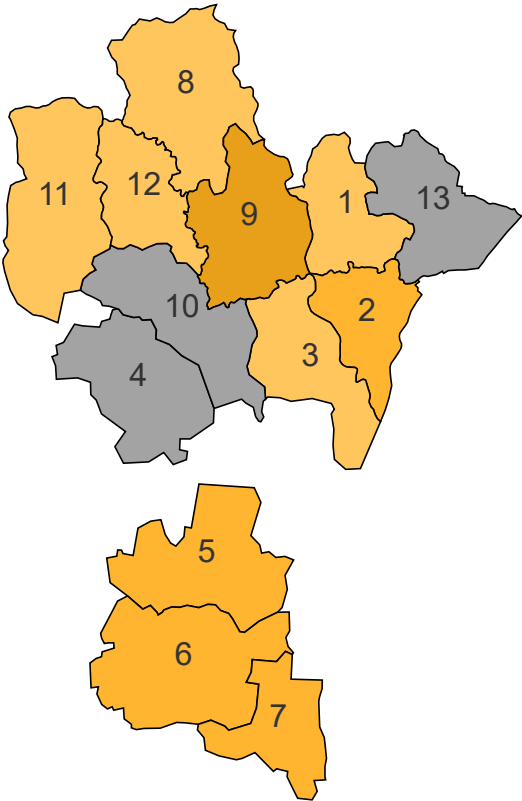


Table 10 | Performance by camp

Teknaf	W31		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	5	100%	62	100%
Camp 22 Unchiprang	2	50%	61	98%
Camp 23 Shamlapur	1	100%	4	100%
Camp 24 Leda	5	100%	145	99%
Camp 25 Ali Khali	0	0%	12	100%
Camp 26 Nayapara	0	0%	20	100%
Camp 27 Jadimura	0	0%	7	100%
Nayapara RC	2	100%	35	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

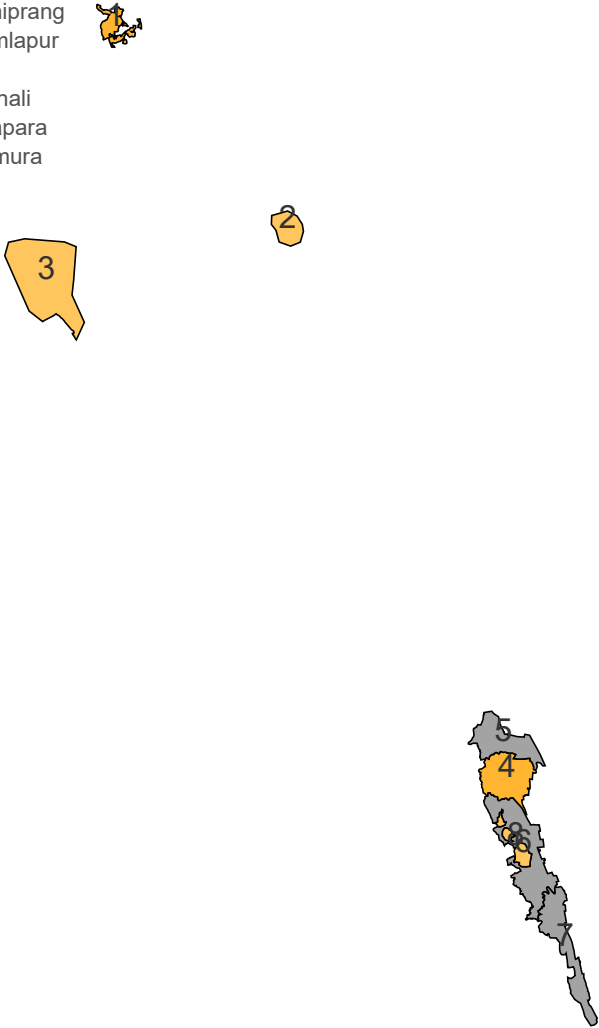


Table 11 | Performance by type of alert

Event	W31		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
<b>Indicator-based surveillance</b>				
Malaria	0	0%	0	0%
Measles	1	100%	66	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	10	100%
Meningitis	1	100%	13	100%
Haem. fever (susp.)	0	0%	10	100%
NNT	0	0%	1	100%
Unexp. fever	0	0%	33	100%
AWD	0	100%	34	100%
ARI	0	100%	27	100%
AJS	0	0%	21	100%
Varicella (Susp.)	0	0%	92	100%
Suspected COVID-19	0	0%	0	0%
<b>Event-based surveillance</b>				
EBS total	4	100%	170	100%

Table 12 | Risk assessment

W31	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:

Dr. Imrul Kayes  
Medical Officer - Civil Surgeon Office (MO-CS)  
Ministry of Health and Family Welfare  
Cox's Bazar, Bangladesh  
Telephone: +88 01726296025  
Email: mailkayesk65@gmail.com

Dr. David Odhiambo Otieno  
Team Lead\_Epidemiology  
World Health Organization  
Cox's Bazar, Bangladesh  
Telephone: +88 017 01202994  
Email: otienod@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 W31 2023



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Welfare Bangladesh



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Organization



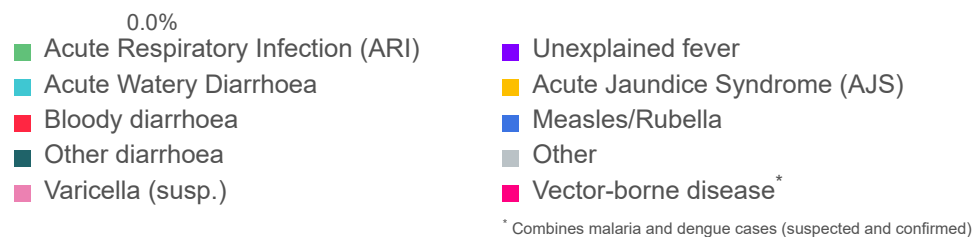
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# Proportional morbidity

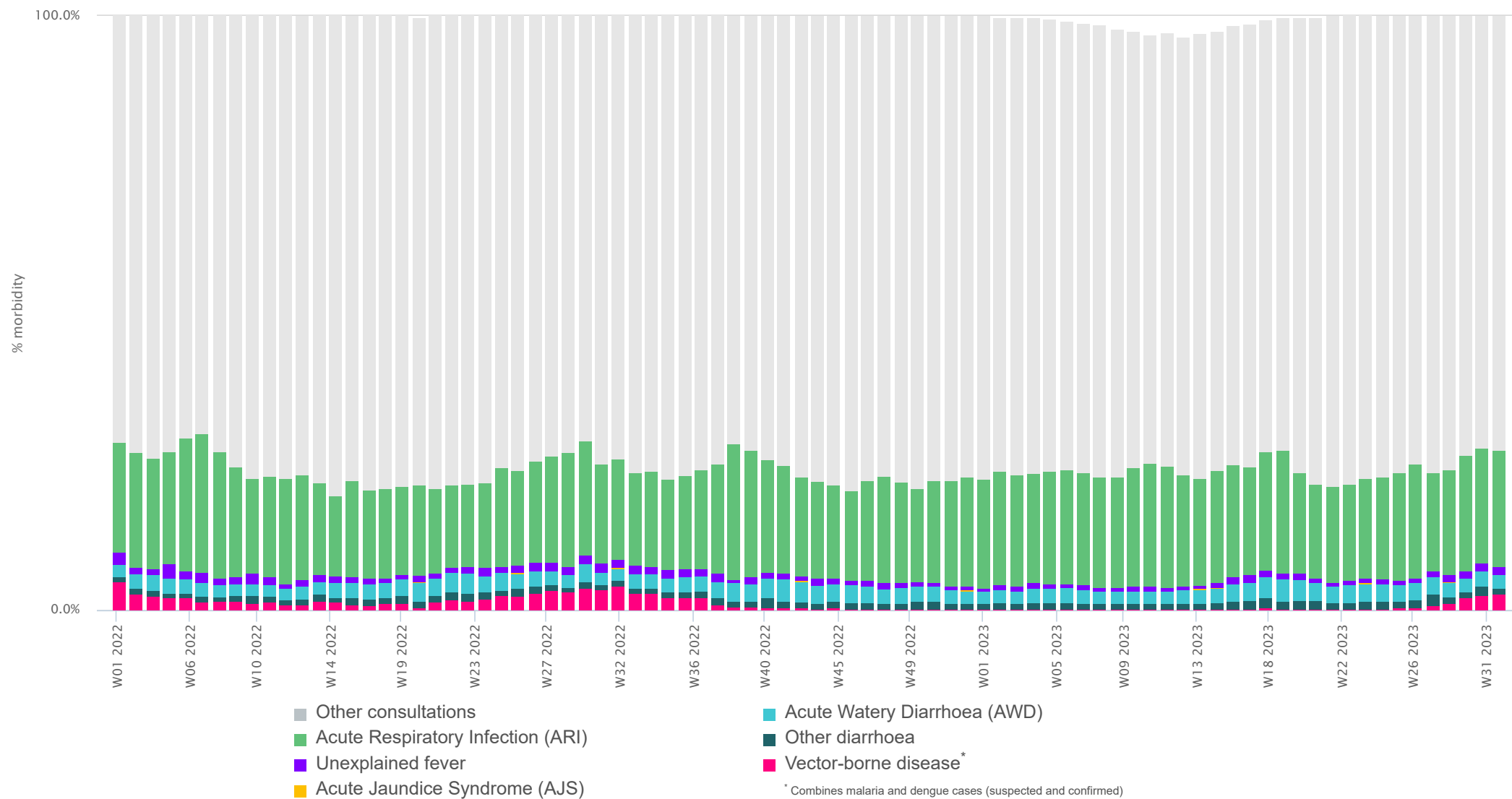
**Figure 1 |** Proportional morbidity (W31 2023)



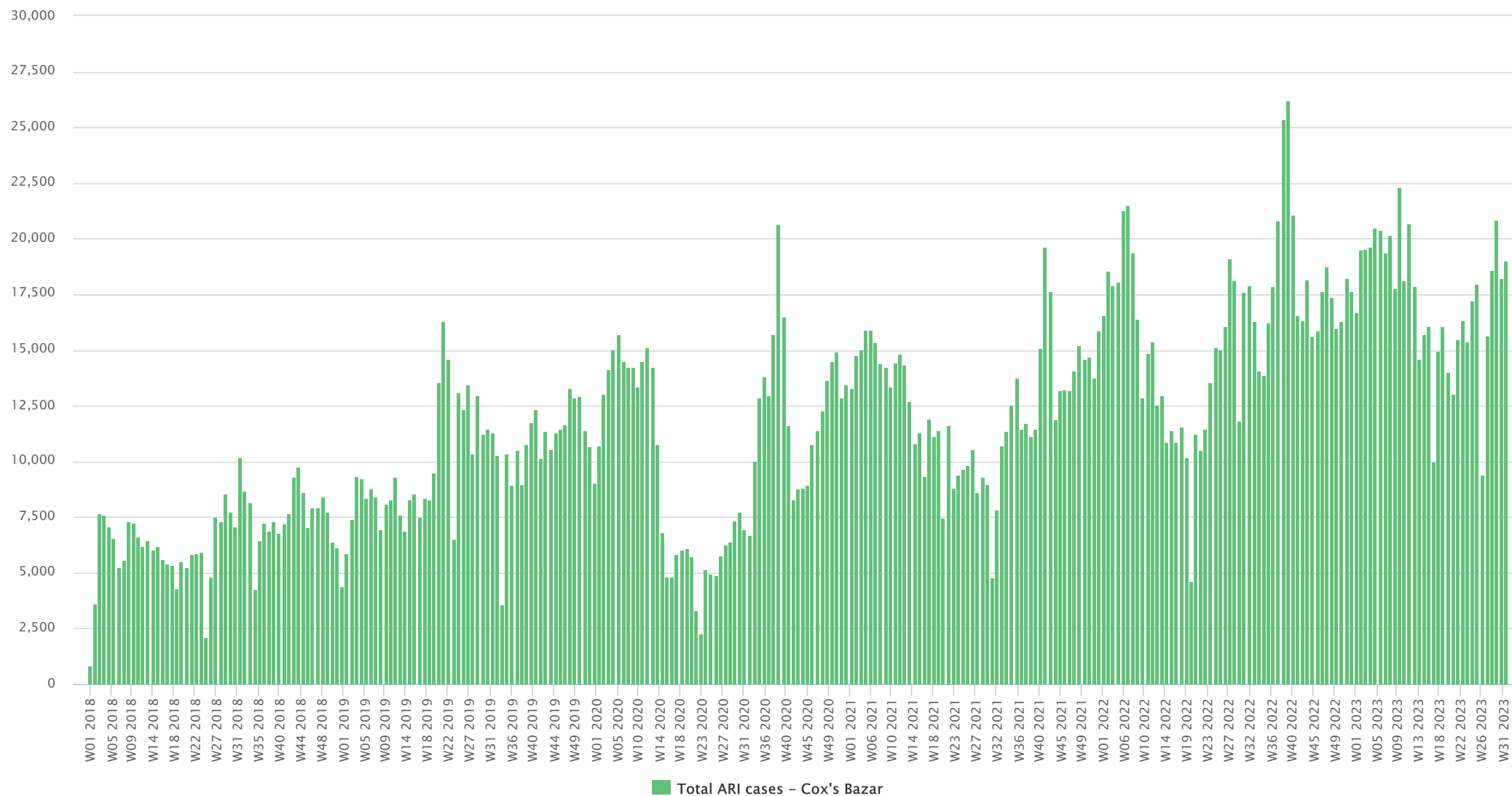
Disease	W31		2023	
	# cases	% morbidity	# cases	% morbidity
AWD	2,273	2.3%	76,353	2.6%
Bloody diarr.	138	0.1%	7,424	0.2%
Other diarr.	973	1.0%	36,809	1.2%
Susp. Varicella	66	0.1%	28,945	1.0%
ARI	19,483	19.4%	552,995	18.5%
Measles/Rub.	26	0.0%	493	0.0%
AFP	7	0.0%	135	0.0%
Susp. menin.	3	0.0%	142	0.0%
AJS	8	0.0%	526	0.0%
Susp. HF	45	0.0%	252	0.0%
Neo. tetanus	0	0.0%	3	0.0%
Adult tetanus	1	0.0%	8	0.0%
Malaria (conf.)	5	0.0%	119	0.0%
Malaria (susp.)	158	0.2%	2,368	0.1%
Dengue (conf.)	1,867	1.9%	8,419	0.3%
Dengue (susp.)	767	0.8%	3,311	0.1%
Unexpl. fever	1,460	1.5%	26,103	0.9%
Sev. Malnut.	63	0.1%	1,990	0.1%
Inj./Wounds	2,475	2.5%	74,918	2.5%
Other	70,482	70.2%	2,161,788	72.4%
<b>Total</b>	<b>98,931</b>	<b>100%</b>	<b>2,986,730</b>	<b>100%</b>

## Trend in consultations and key diseases

**Figure 2** | Trend in proportional morbidity for key diseases (W31)

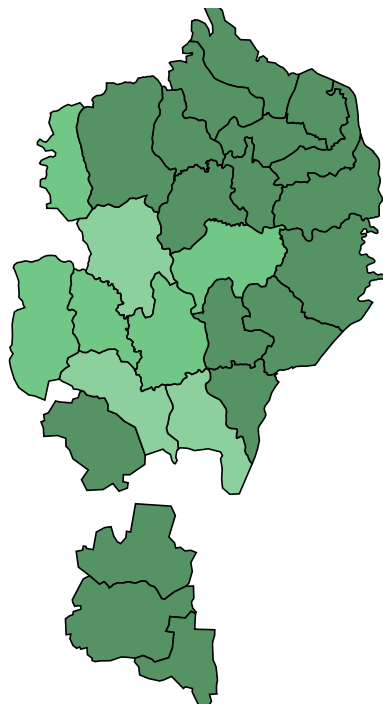


**Figure 3** | Trend in number of cases over time (W38 2017 - W31 2023)

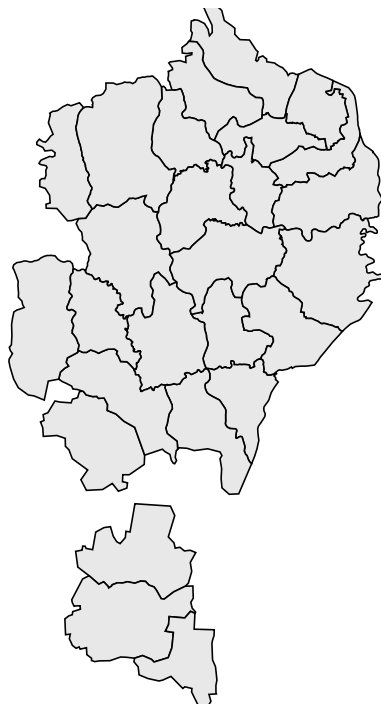


**Map 1** | Map of cases by camp (W31 2023)

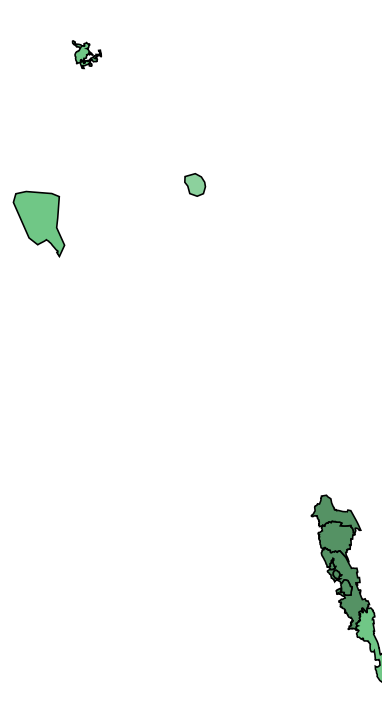
**a. Ukhia** | Number of cases



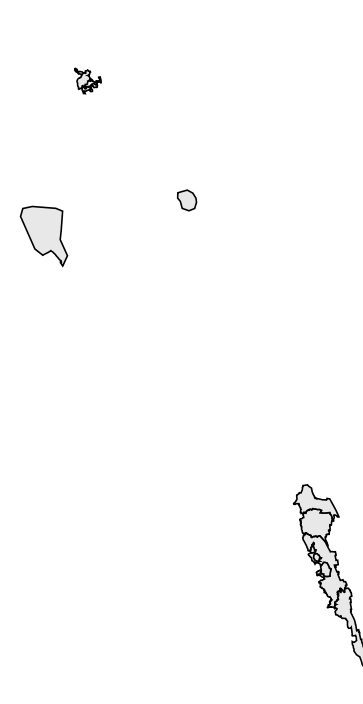
**b. Ukhia** | Number of alerts



**c. Teknaf** | Number of cases



**d. Teknaf** | Number of alerts



## Map legend

Number of cases



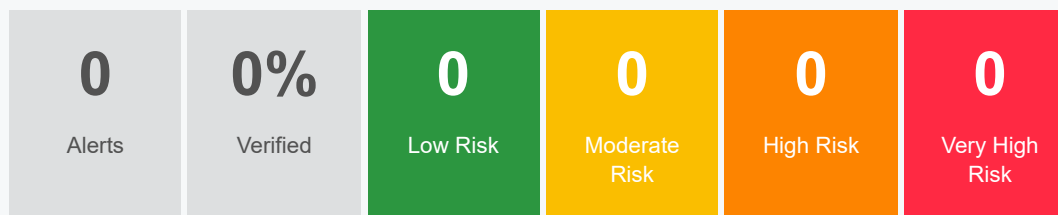
Number of alerts



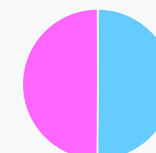
## Alert threshold

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

## Alert management (W31 2023)

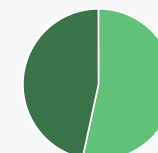


## Figure | % sex



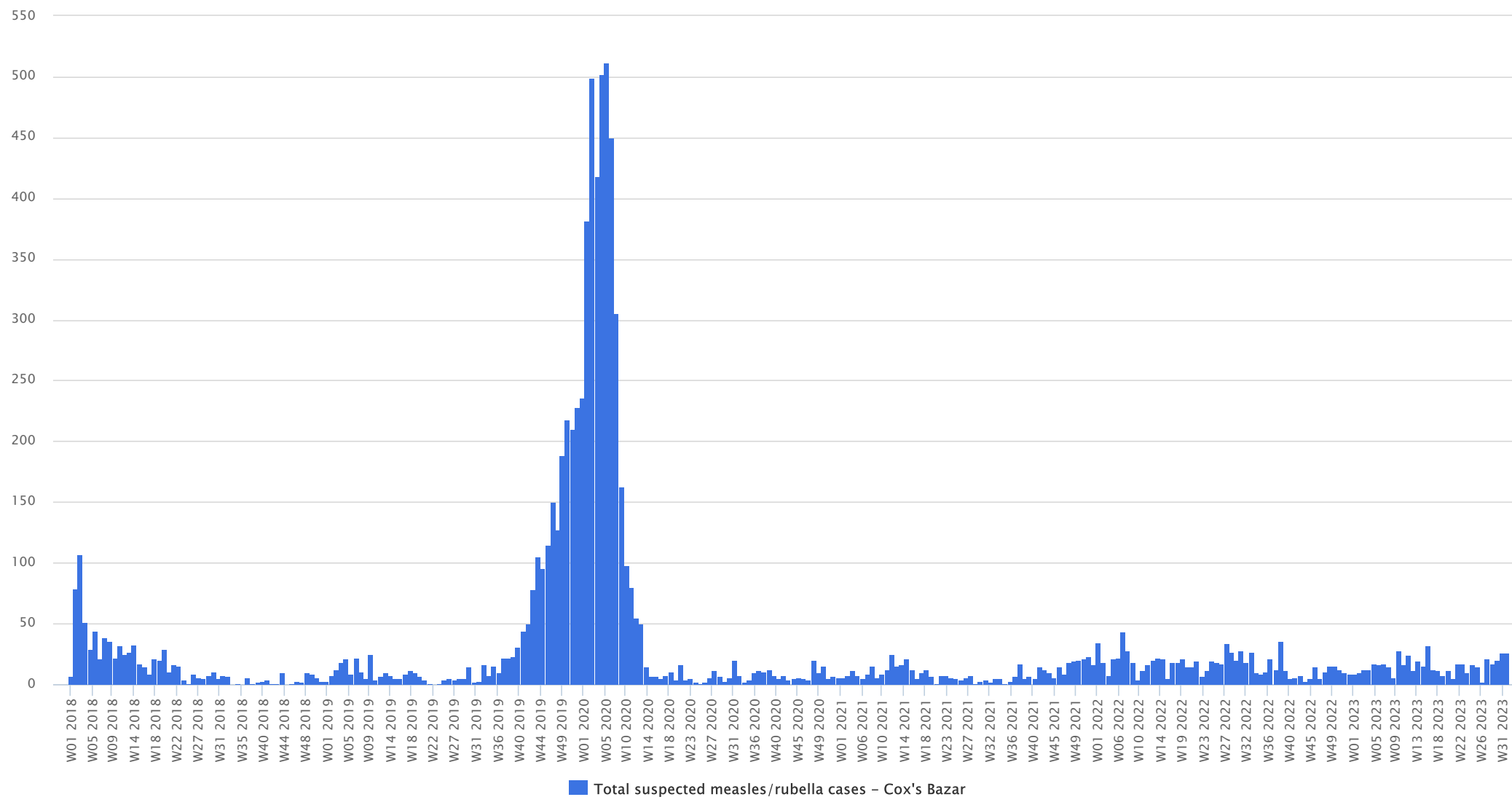
Male Female

## Figure | % age



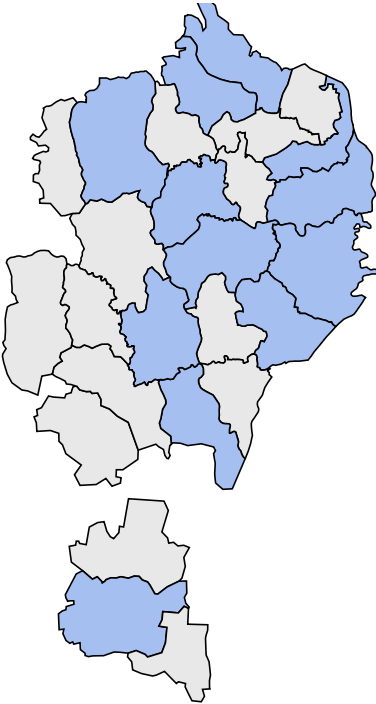
< 5 >= 5

**Figure 4** | Trend in number of suspected cases over time (W38 2017 - W31 2023)



Map 2 | Map of cases by camp (W31 2023)

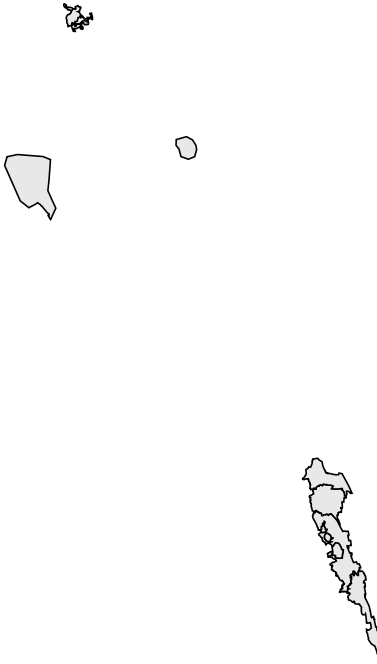
a. Ukhia | Number of cases



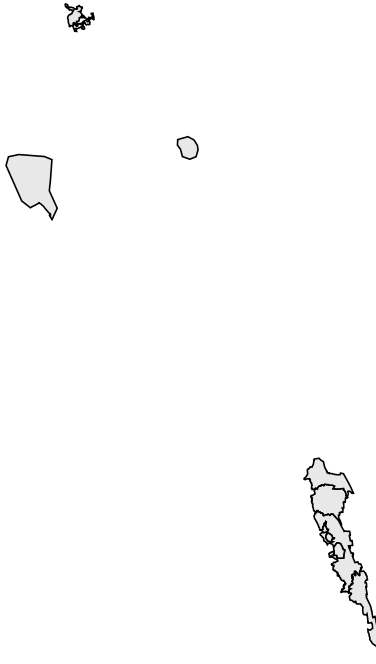
b. Ukhia | Number of alerts



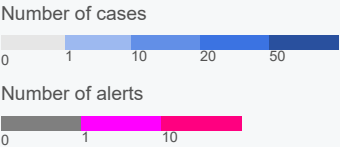
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold  
1 case. Source: IEDCR

Alert management (W31 2023)

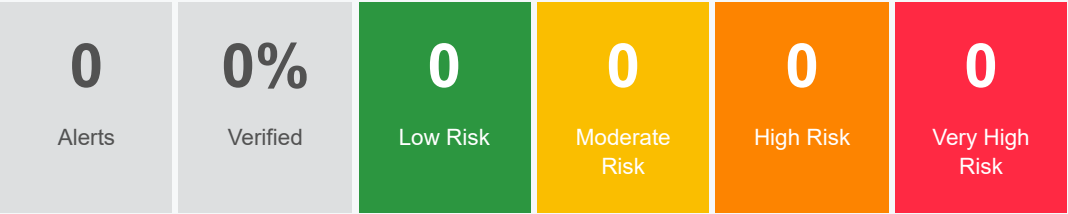


Figure | % sex

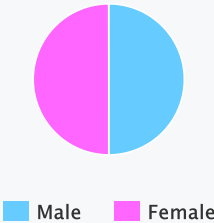
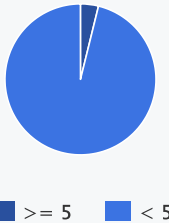
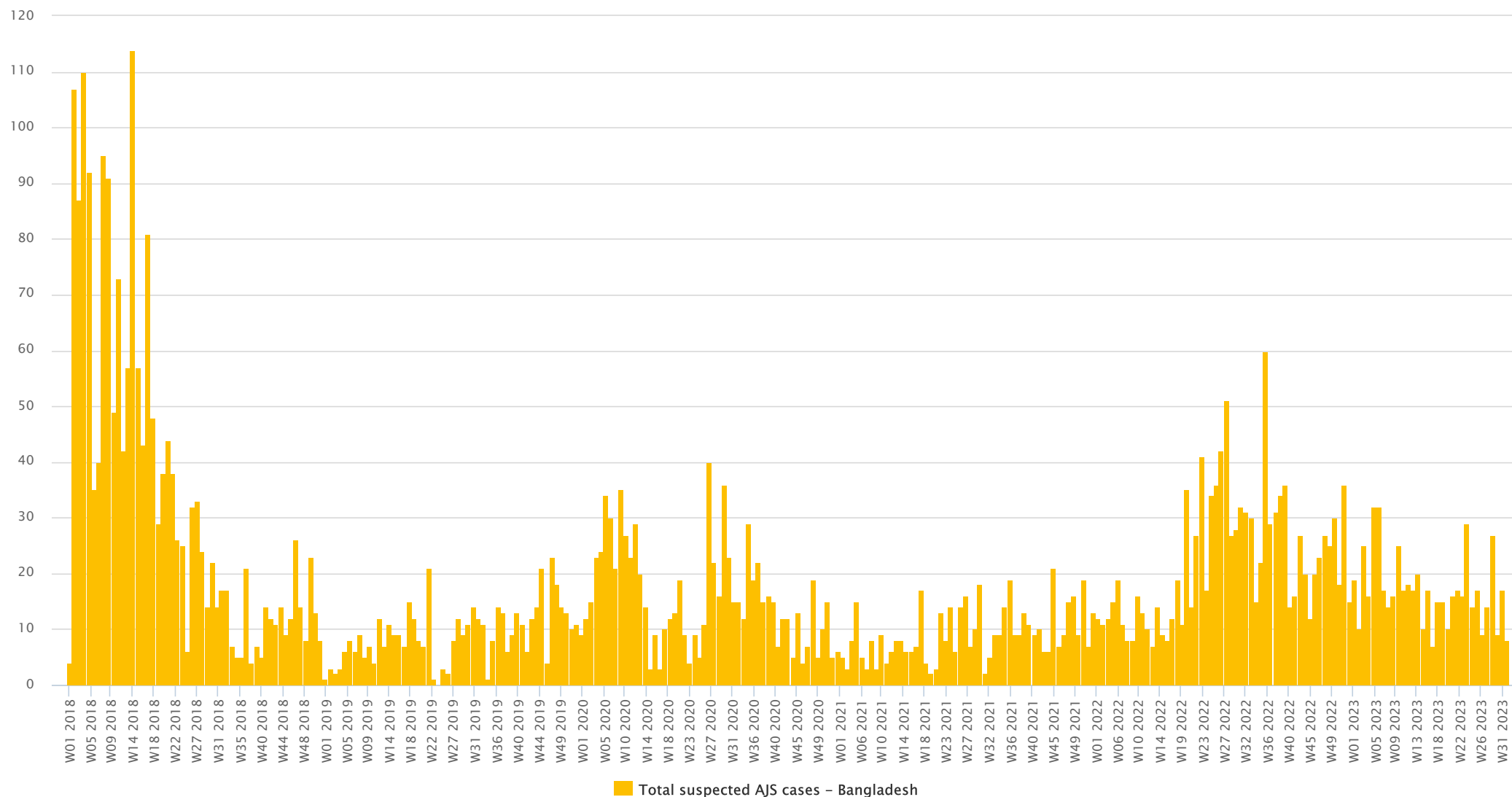


Figure | % age

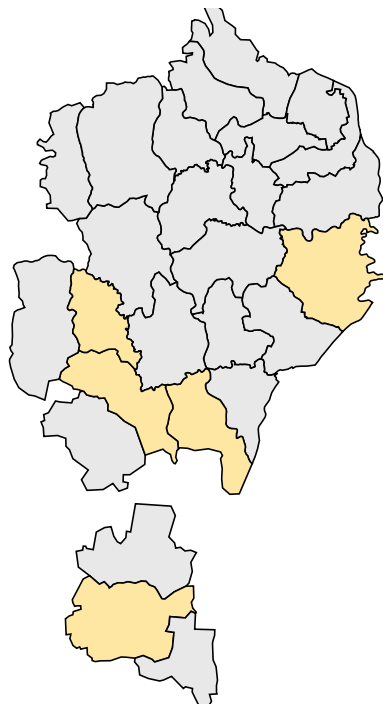


**Figure 5** | Trend in number of cases over time (W38 2017 - W31 2023)

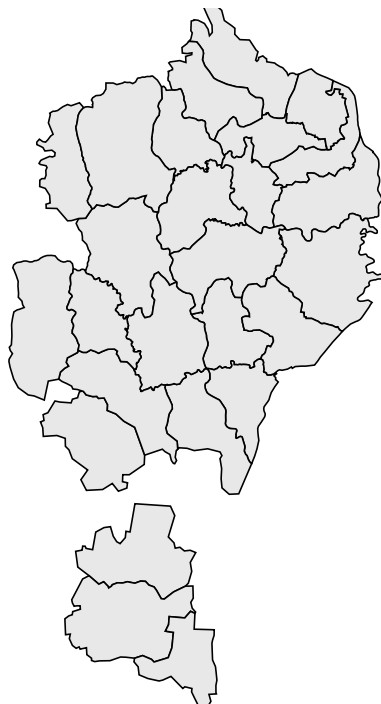


**Map 3 | Map of cases by camp (W37 2017 - W31 2023)**

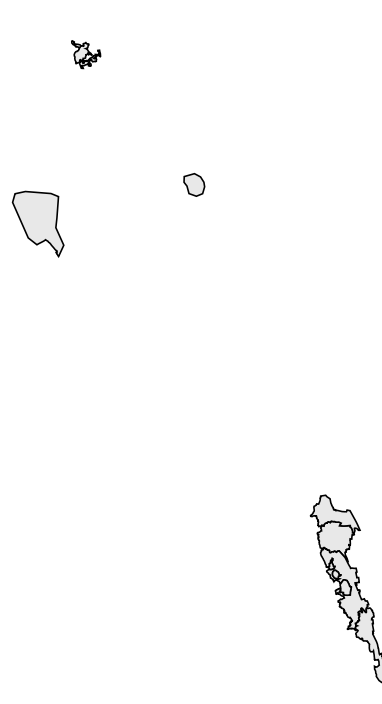
**a. Ukhia | Number of cases**



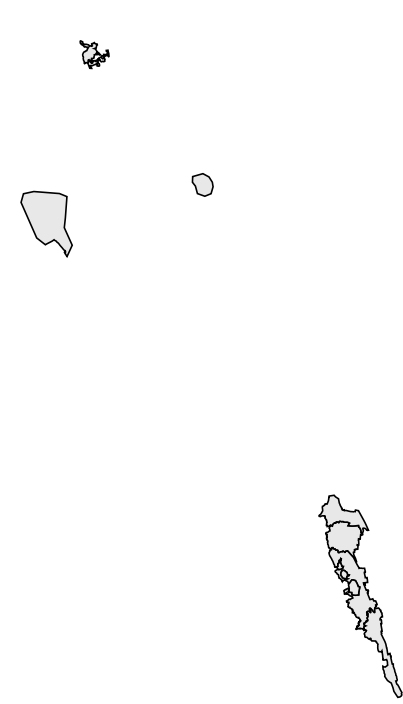
**b. Ukhia | Number of alerts**



**c. Teknaf | Number of cases**

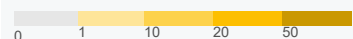


**d. Teknaf | Number of alerts**



## Map legend

Number of cases



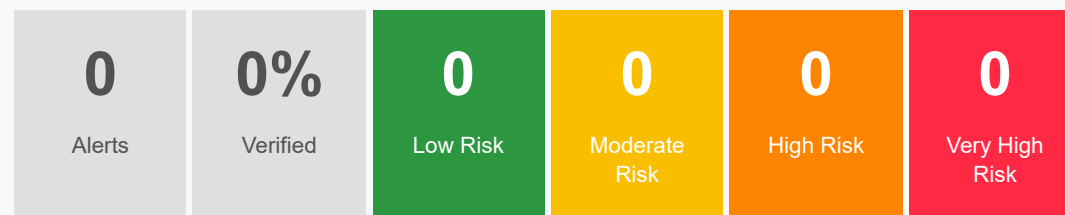
Number of alerts



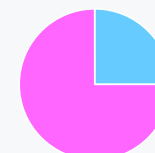
## Alert threshold

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

## Alert management (W31 2023)

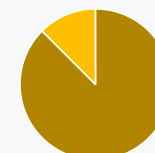


## Figure | % sex



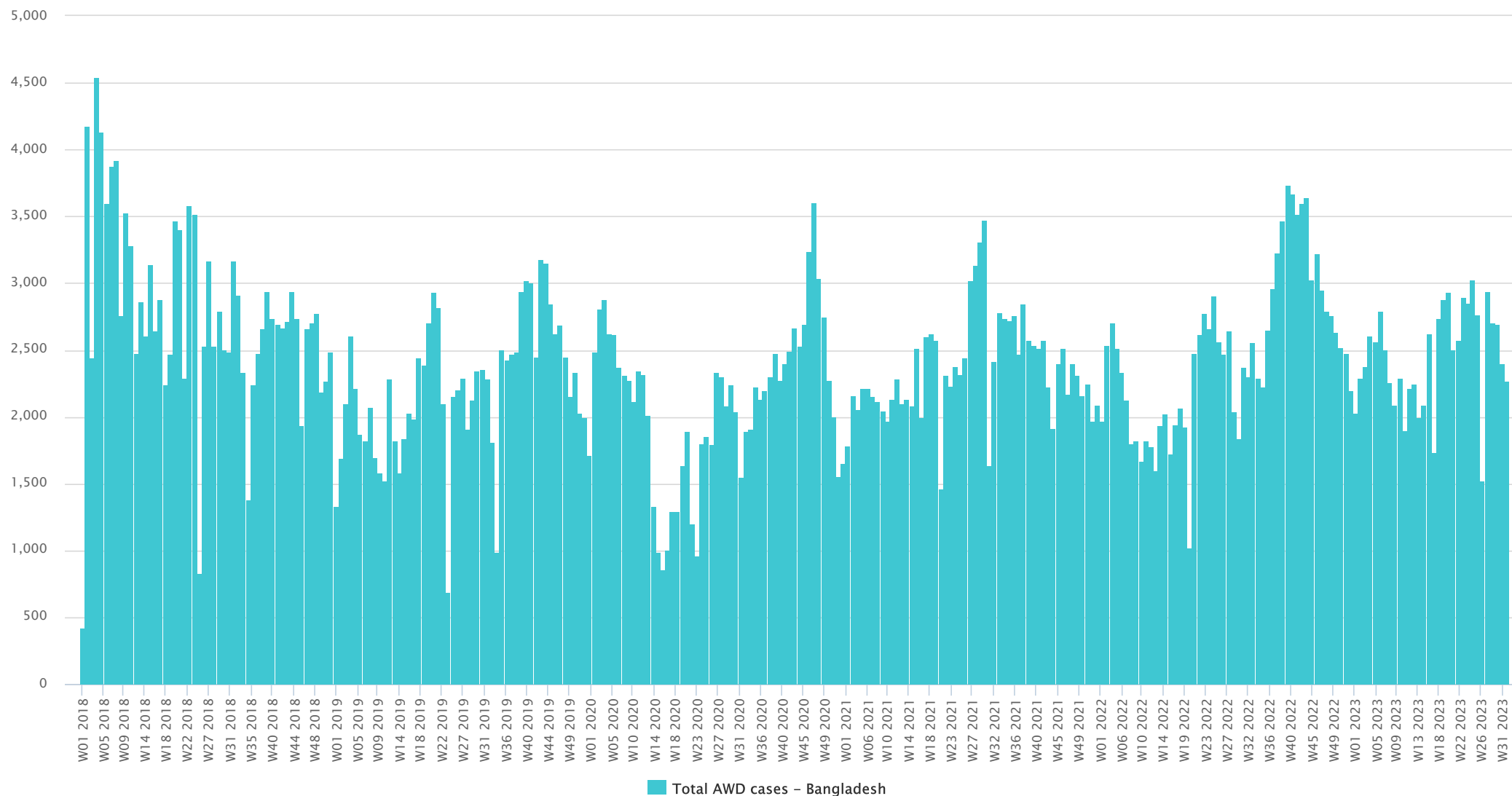
Male Female

## Figure | % age

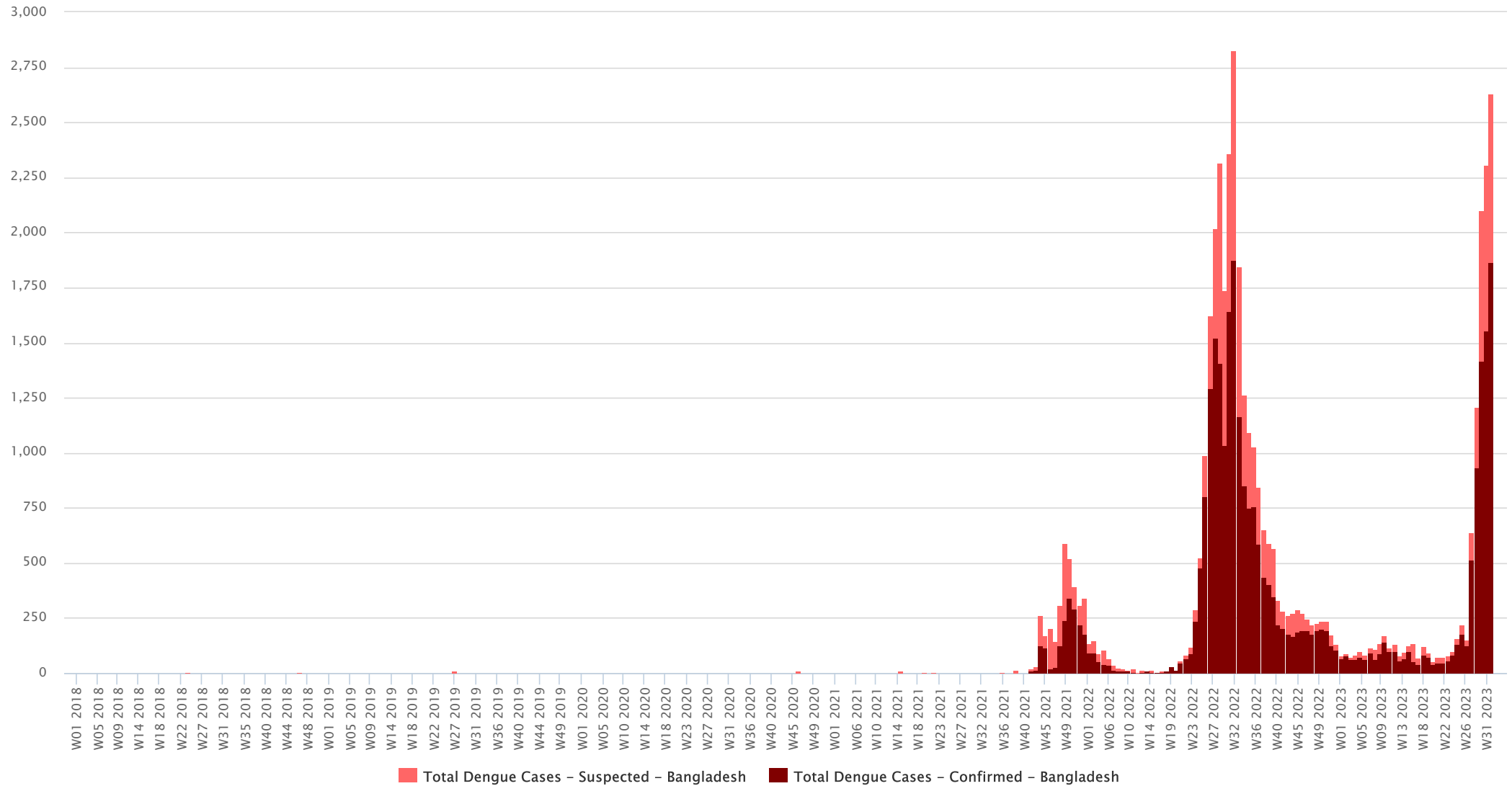


>= 5 < 5

**Figure 6** | Trend in number of cases over time (W38 2017 - W31 2023)

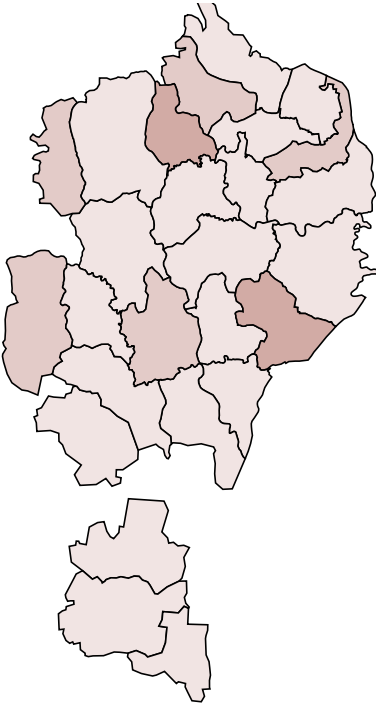


**Figure 7** | Trend in number of cases over time (W38 2017 - W31 2023)



Map 4 | Map of cases by camp (W37 2017 - W31 2023)

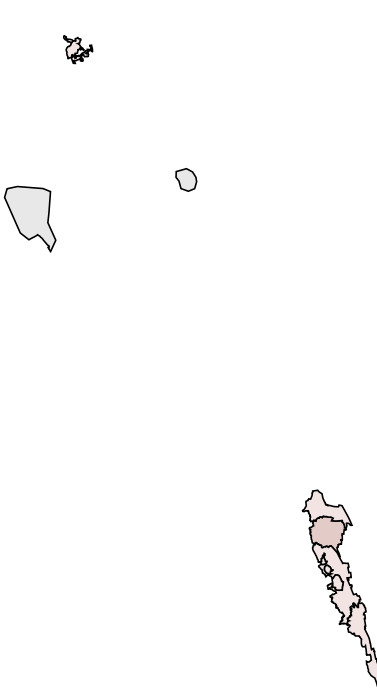
a. Ukhia | Number of cases



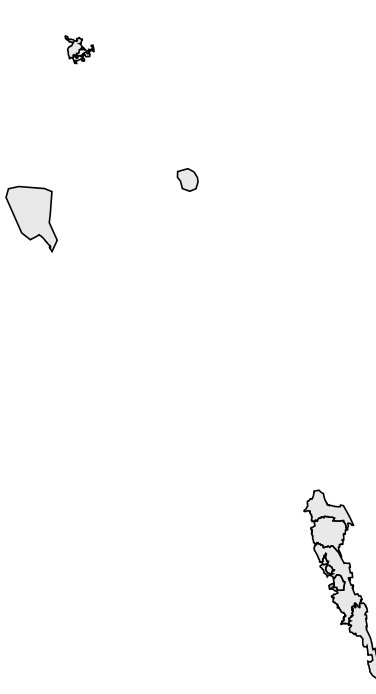
b. Ukhia | Number of alerts



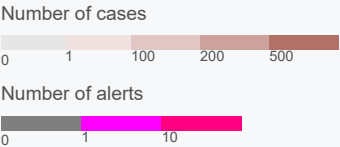
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

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

Alert management (W31 2023)

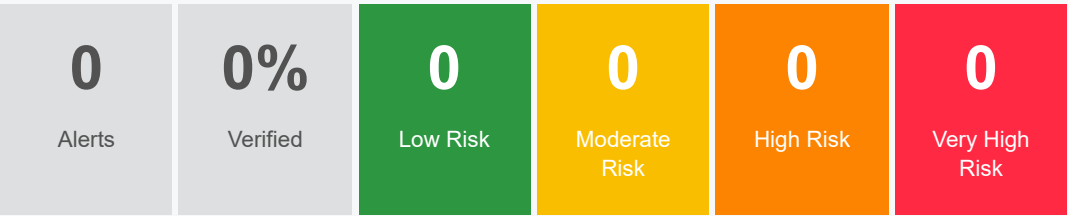


Figure | % sex

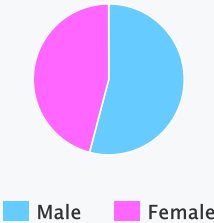
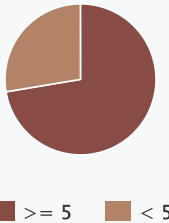
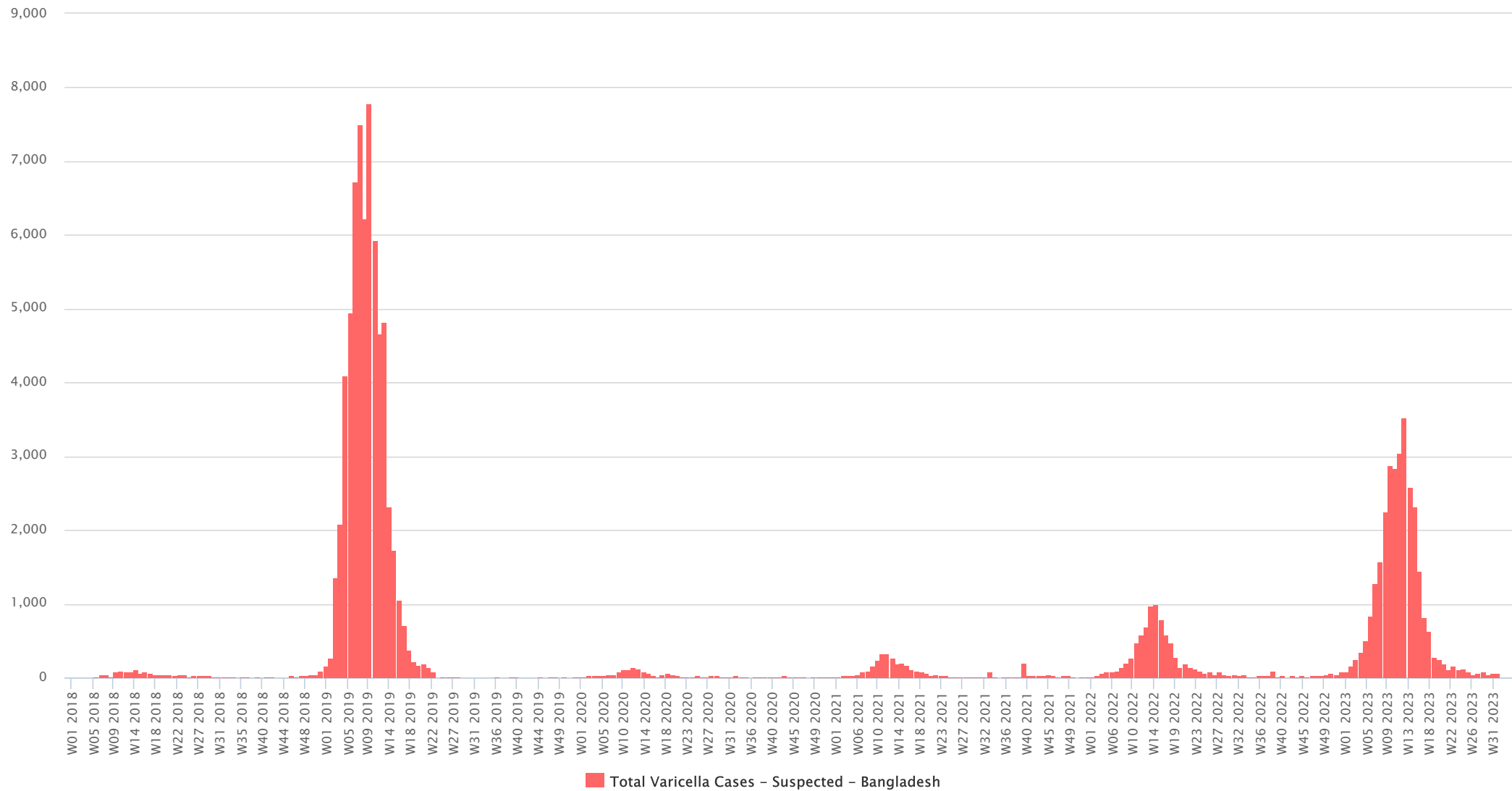


Figure | % age

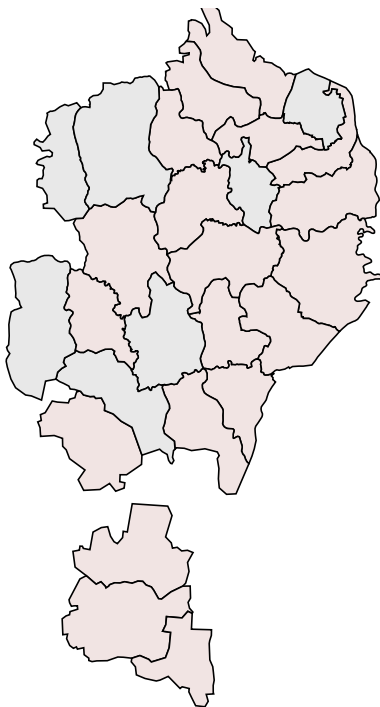


**Figure 7** | Trend in number of cases over time (W38 2017 - W31 2023)

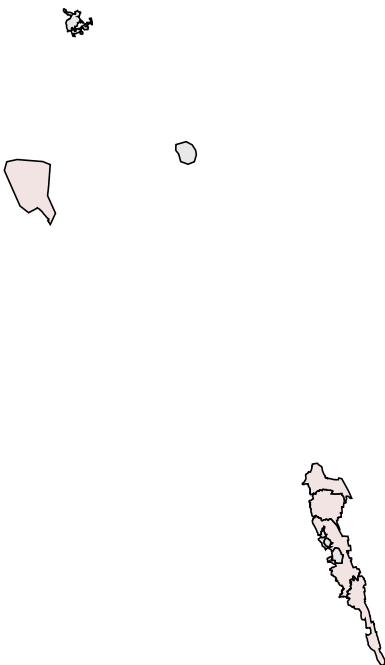


Map 4 | Map of cases by camp (W37 2017 - W31 2023)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

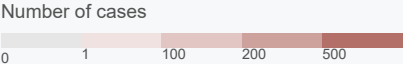


Figure | % sex

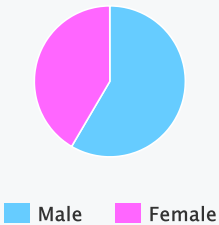
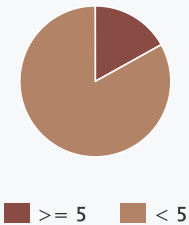


Figure | % age



## For more help and support, please contact:

Dr. Imrul Kayes  
Medical Officer - Civil Surgeon Office (MO-CS)  
Ministry of Health and Family Welfare  
Cox's Bazar, Bangladesh  
Telephone: +88 017826296025  
Email: mailkayesk65@gmail.com

Dr. David Odhiambo Otieno  
Team Lead\_Epidemiology  
World Health Organization  
Cox's Bazar, Bangladesh  
Telephone: +88 017 01202994  
Email: otienod@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>

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