



World Health Organization

Bangladesh

Weekly Situation Report # 33

Date of issue: 5 July 2018

Period covered: 27 June – 3 July 2018

Location: Bangladesh

Emergency type: Rohingya Refugee Crisis



918,936

Rohingya
refugees in
Bangladesh



706,364

new arrivals since
25 Aug 2017



879,273

Rohingya and host
community members
vaccinated during the last
OCV campaign



734,176

Rohingyas being
monitored for diseases



1.3 million

people targeted for health
assistance

HIGHLIGHTS

- Since 11 May, monsoon rains have affected 29,650 people, with 2,909 individuals displaced, 33 injured and 1 killed.

SITUATION OVERVIEW

- The health sector has received US \$15.2 million (13%) out of the \$113.1 million requested through the Rohingya Refugee Crisis Joint Response Plan 2018 (<https://fts.unocha.org/appeals/656/summary>) as of 27 June 2018. Additional funding is required to attend to the health needs of the Rohingya community as well as strengthening the health system in Cox's Bazar.

MONSOON UPDATES

- Since 11 May, 166 landslides/erosion and 119 wind/storms were reported.
- WHO alerted health partners to the temporary closure of a health facility as part of its routine monitoring of health service availability. The sector also gave live updates of roads made inaccessible due to monsoons.
- WHO helped train 30 Mobile Medical Team members in a WHO-funded workshop.

EPIDEMIOLOGICAL UPDATE

- Currently, 152 health facilities are registered as active Early Warning Alert and Response System (EWARS) reporting sites, which brings approximately 85% of the Rohingya population under surveillance.
- EWARS received 96 weekly reports from health facilities (56% of participating health facilities) as of 4 July 2018.
- Sixty alerts were triggered in week 26 with the WHO epidemiology team is monitoring 12 of them. The WHO epidemiology team completed initial verification of all the alerts.
- Four new cases of Rohingya patients with suspected measles were reported in week 26. The total number of cases reported from week 1 through this reporting week is 1,414. WHO is asking health partners to complete case report forms for all new measles cases.
- 171 new patients with Acute Jaundice Syndrome (AJS) were reported in week 26. The average weekly number in 2018 of new AJS cases is 94.
- In this reporting week, health facilities reported 4,335 patients with Acute Watery Diarrhea (AWD). This brings the total number of AWD patients to 125,565 in 2018.
- Acute respiratory infections (ARI), acute watery diarrhoea (AWD) and bloody diarrhea are the three leading syndromes with the highest morbidity rates (13.2%, 6.2%, and 0.4% respectively). These syndromes could become outbreaks during the monsoon season and are being monitored by WHO. Samples are taken regularly to investigate pathogens that may cause outbreaks of public health significance.

DIPHTHERIA UPDATE

- Health facilities reported 7,888 diphtheria patients through EWARS between 1 January and 4 July, and 65 new cases during this reporting week.

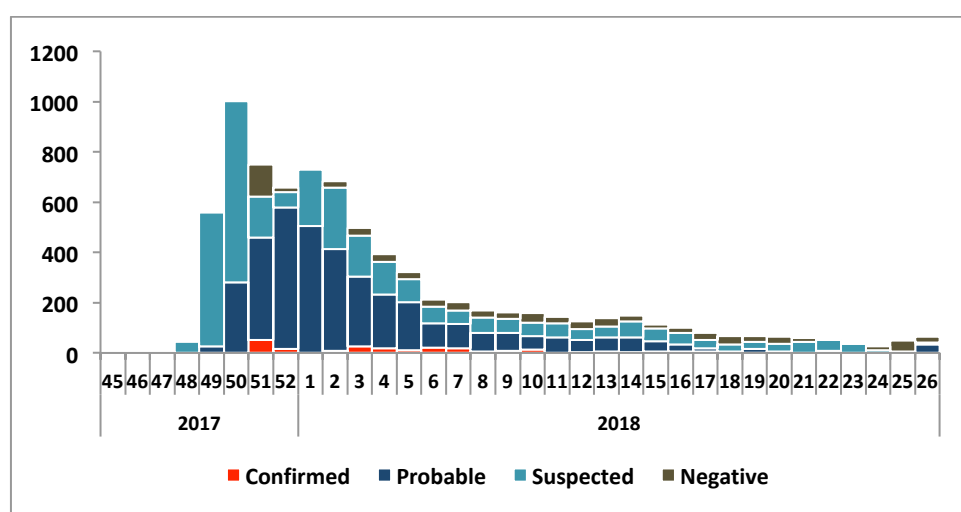


Figure 1: Epidemic curve of diphtheria cases by age groups, W49 2017 to W22 2018, Cox's Bazar

- During week 26, the number of diphtheria cases reported in EWARS was 65. Out of that, 32 were probable, seven were suspected, two were laboratory-confirmed and 24 came out negative in laboratory tests.
- One girl in week 26 died who had been clinically diagnosed with diphtheria.

- The only diphtheria-related death in week 26 was of a 6-year-old girl who was clinically diagnosed with a probable case of the disease.
- Health facilities have reported 44 diphtheria deaths to EWARS (case-fatality rates <1%) since the outbreak began.
- One new diphtheria patient was reported in the host community during this reporting week 26, which brings the total number of diphtheria patients in the host community this year to 66. Among those, 20 were laboratory-confirmed, 30 were probable and 19 were suspected. No diphtheria deaths have been reported from the host community.

HEALTH OPERATIONS

- Beginning 3 June, routine immunization expanded to cover 90% of Rohingya children and pregnant women. Earlier phases of this immunization initiative occurred in February and March in Ukhia and Teknaf.
- Planning was finalized for training Diarrheal Treatment Centers (DTCs) staff on the “Use of Dipstick Test and Cary-Blair Transport Medium.” The workshop is scheduled for 9-12 July 2018 in Ukhia and will be facilitated by ICDDR,B faculty members coming from Dhaka. Trainees are expected to gain knowledge on AWD sample collection techniques and proper handling of specimens during transportation.
- WHO provided one central cholera kit that includes 10 diarrheal beds, essential medicines and supplies to Sadar Hospital.
- WHO has provided 51 community water filters and 829 family water filters to partners and trained recipients in their use and maintenance.
- WHO is collaborating with the WASH Cluster to harmonize water quality monitoring data.
- WHO continued to assess DTCs and provided recommendations on infection prevention and control and waste management.
- Assessed locally produced snake anti-venom.
- Cholera kits were delivered to seven upazila health complexes.

COORDINATION

- The field coordination team met with the Bangladeshi Civil Surgeon in Cox’s Bazar to deepen collaboration with the government and discuss the upcoming health facility assessment.
- Team members attended district and camp-level coordination meetings to further explore WHO support for host communities and make sure that partners know about prepositioned health supplies they can utilize for host and Rohingya communities.

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