



Meeting to map needs and gaps at Ukhia Health Complex Hospital,
(14 August 2018)



World Health Organization

Bangladesh

Weekly Situation Report # 39

Date of issue: 16 August 2018

Period covered: 08 – 14 August 2018

Location: Bangladesh

Emergency type: Rohingya Refugee Crisis



919 000
total Rohingya
in Bangladesh



706 364
new arrivals since
25 Aug 2017



879 273
Rohingya people and the
host community were
vaccinated during OCV
campaign



728 786
people are being
monitored for diseases



1.3 million
people targeted for health
assistance

KEY HIGHLIGHTS

- Cumulatively 49 734 people have been affected by the Monsoon rains since 11 May 2018.
- The Mobile Medical Teams continue to deploy especially in Camp 4 Extension and Camp 20 Extension where most of the relocations are happening to provide surge support.

SITUATION OVERVIEW

- According to the Needs and Population Monitoring (NPM) exercise, there are an estimated 919 000 Rohingya refugees in Cox's Bazar as of 22 July 2018. Of these, 706 364 are new arrivals since 25 August 2017.
- Operations at Health Emergency Operations Center (HEOC) at Civil Surgeon's Office were scaled up to strengthen monitoring, feedback and response mechanism in the refugee camps and the affected host community.

MONSOON UPDATES

- The recent report by Inter Sector Coordination Group (ISCG) indicates that between 11 May and 6 August 2018, 49 734 people have been affected by the Monsoon rains. A total of 6 020 individuals have been displaced while over 40 people have been injured and one person reported dead in the camps.

- Operations at Health Emergency Operations Center (HEOC) at Civil Surgeon's Office were scaled up to strengthen monitoring, feedback and response mechanism in the refugee camps and the affected host community. A core team is currently being constituted to help achieve these goals.

RESPONSE

EPIDEMIOLOGICAL UPDATE

- To date, 149 health facilities have been registered as active Early Warning, Alert and Response System (EWARS) reporting sites. In week 32, 93 weekly reports (62%) were received by Tuesday 14th August 2018, resulting in a cumulative completeness of 74% for 2018.
- Twenty-eight EWARS alerts were triggered in week 32. Ten of which are being monitored.
- Acute respiratory infections (ARI), unexplained fever (UF) and acute watery diarrhoea (AWD) are the three leading illnesses. Those three diseases represented 16.7 %, 12.7 % and 5.1 %, respectively, of the total number of disease reports to EWARS. These syndromes are being monitored.
- The unexplained fever cases reported this week is 9 656, bringing the total number of unexplained fever cases to 305 201 in 2018. There has been a recent increase in unexplained fever, and the situation is carefully being monitored at the camp level. One field assessment has been carried out to investigate potential mosquito breeding sites in the area where case-patients cluster. Further assessments are needed to better understand the situation.
- Ten new suspected measles/rubella case-patients in under 5-year-old age group were reported in week 32, bringing the number of cases in under 5 age group to 1 196 in 2018. WHO, in collaboration with the Bangladesh Ministry of Health, is collecting samples from suspected measles cases as a part of routine measles surveillance. WHO is scaling up response to suspected clusters of measles. Currently, a cluster of 11 cases of measles from Camp 12 is under investigation from weeks 29-31
- Two cases of AFP (acute flaccid paralysis) are under investigation. Samples have been collected and sent to Dhaka.

AWD UPDATE

- AWD cases remained on a steady level with 3 840 case-patients reported in week 32. Another 35 cases were reported by Diarrhea Treatment Center (DTCs).
- A block/sub-block based approach to investigate AWD hotspots been created. Using this approach, two recent AWD upsurges from Camp 11 have been identified from EWARS and investigated. Risk factors identified included hilly areas with challenging access to drinking water (steep hill) and dysfunctional hand-pumps in some locations. These areas might benefit from more detailed assessment of drinking water, latrines and household hygiene.

DIPHTHERIA UPDATE

- The case definition was revised after the diphtheria consultation to follow the WHO case definition.
- As of 12 August 2018, there have been 8 122 diphtheria case-patients reported through EWARS including 268 with a positive lab test (PCR) and 986 with a negative lab test. Seventeen new case-patients were reported in week 32, which is lower than previous weeks (35-52 case-patients for preceding four weeks).

- Among the 17 case-patients, 7 were probable and 10 were suspected. The last confirmed case was reported on 3 August 2018. 76 % (13/17) of the case-patients were 15 years or older, which is consistent with previous weeks.
- No new deaths were reported this week. The total number of deaths reported due to diphtheria is 45 (case-fatality proportion <1.0%).
- Following the consultation meeting on diphtheria that took place in Cox's Bazar, several recommendations were provided by the participants including strengthening routine immunization to include all <5 year olds, mop-up campaigns, vaccination of all contacts of known cases, communication and mobilization efforts and immunization activities for new arrivals. There is also need to ensure that booster doses are given to both the Rohingyas and the host community.
- One new probable diphtheria case-patients was reported from the host community in week 32. Among host community case-patients since the beginning of the outbreak, 25 were laboratory-confirmed, 63 were probable and 91 were suspected. No diphtheria deaths have been reported from the host community. The number of diphtheria cases remain on a low level.

Diphtheria cases by week of reporting, 2017-2018

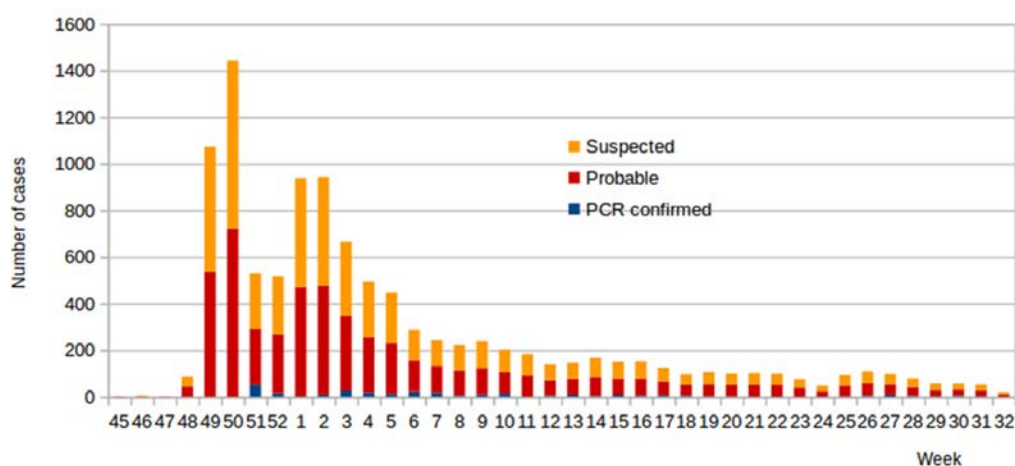


Figure 1: Epidemic curve of diphtheria case-patients by age group, W49 2017 to W32, 2018

HEALTH OPERATIONS

- The mapping of HIV services for Rohingya and host community at Sadar District Hospital, Ukhia and Teknaf complex hospitals is in the process, covering the availability of HIV tests and the Anti-Retroviral Treatment centers with Post Exposure Prophylaxis. A training on clinical management of HIV will be conducted in the coming weeks. Nurses, laboratory technician and peer counselors from Sadar District Hospital and Ukhya Upazila Health Complex are expected to participate.
- The distribution of water filters to health facilities and pregnant women is ongoing. So far about 1 000 family and community filters have been collected by partners. The communities living close to contaminated sources of water and areas where clusters of AWD suspected cases have been identified through EWARS, have benefited.
- The health risk communication task force, co-chaired by WHO, continued to work on a 'communicating to communities' campaign about vector-borne diseases, including creating flash cards on symptoms and

preventive measures that community health workers will use, and audio messages to be played through microphones.

COORDINATION

- WHO is planning one-day meeting on August 28 in Cox's Bazar for the health focal point from the camps together with the supporting partner agencies. The aim of the meeting is to strengthen health activities at camp level and improve information sharing.
- A meeting to map out partners' activities at the Ukhia Health Complex Hospital was held on 14 August. The mapping will help coordinate and harmonize partners' support to the hospital and identify gaps and overlaps.

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