**Proportional morbidity**

**Figure 1 | Proportional morbidity (W3 2018)**

<table>
<thead>
<tr>
<th>Disease</th>
<th>W3</th>
<th></th>
<th>2018</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># cases</td>
<td>% morbidity</td>
<td># cases</td>
<td>% morbidity</td>
</tr>
<tr>
<td>AWD</td>
<td>6,184</td>
<td>10.3%</td>
<td>15,705</td>
<td>8.2%</td>
</tr>
<tr>
<td>Bloody diarrhoea</td>
<td>3,233</td>
<td>5.4%</td>
<td>7,046</td>
<td>3.7%</td>
</tr>
<tr>
<td>Other diarrhoea</td>
<td>1,930</td>
<td>3.2%</td>
<td>5,003</td>
<td>2.6%</td>
</tr>
<tr>
<td>ARI</td>
<td>11,442</td>
<td>19.1%</td>
<td>30,137</td>
<td>15.8%</td>
</tr>
<tr>
<td>Measles/Rubella</td>
<td>93</td>
<td>0.2%</td>
<td>428</td>
<td>0.2%</td>
</tr>
<tr>
<td>AFP</td>
<td>1</td>
<td>0.0%</td>
<td>10</td>
<td>0.0%</td>
</tr>
<tr>
<td>Suspected meningitis</td>
<td>4</td>
<td>0.0%</td>
<td>10</td>
<td>0.0%</td>
</tr>
<tr>
<td>AJS</td>
<td>131</td>
<td>0.2%</td>
<td>337</td>
<td>0.2%</td>
</tr>
<tr>
<td>Susp. haem. fever</td>
<td>9</td>
<td>0.0%</td>
<td>25</td>
<td>0.0%</td>
</tr>
<tr>
<td>Neonatal tetanus</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Adult tetanus</td>
<td>0</td>
<td>0.0%</td>
<td>9</td>
<td>0.0%</td>
</tr>
<tr>
<td>Malaria (conf.)</td>
<td>6</td>
<td>0.0%</td>
<td>11</td>
<td>0.0%</td>
</tr>
<tr>
<td>Malaria (susp.)</td>
<td>901</td>
<td>1.5%</td>
<td>1,772</td>
<td>0.9%</td>
</tr>
<tr>
<td>Unexplained fever</td>
<td>3,089</td>
<td>5.2%</td>
<td>24,387</td>
<td>12.8%</td>
</tr>
<tr>
<td>Severe Malnutrition</td>
<td>203</td>
<td>0.3%</td>
<td>566</td>
<td>0.3%</td>
</tr>
<tr>
<td>Injuries/Wounds</td>
<td>1,297</td>
<td>2.2%</td>
<td>3,421</td>
<td>1.8%</td>
</tr>
<tr>
<td>Other</td>
<td>31,344</td>
<td>52.4%</td>
<td>31,344</td>
<td>53.4%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>59,867</td>
<td>100%</td>
<td>190,834</td>
<td>100%</td>
</tr>
</tbody>
</table>
Figure 2 | Trend in proportional morbidity for key diseases (W3)
Figure 3 | Trend in number of cases over time (W38 2017 - W3 2018)
Acute Respiratory Infection | Maps and Alert Management

Map 1 | Map of cases by site/zone (W3 2018)

**a. Ukhia | Number of cases**

**b. Ukhia | Number of alerts**

**c. Teknaf | Number of cases**

**d. Teknaf | Number of alerts**

---

Map legend

<table>
<thead>
<tr>
<th>Number of cases</th>
<th>0</th>
<th>1</th>
<th>10</th>
<th>100</th>
<th>200</th>
<th>500</th>
</tr>
</thead>
</table>

| Number of alerts | 0 | 1 | 10 |

Alert threshold

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

Alert management (W3 2018)

<table>
<thead>
<tr>
<th>Alerts</th>
<th>Verified</th>
<th>Low Risk</th>
<th>Moderate Risk</th>
<th>High Risk</th>
<th>Very High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Figure | % sex

Figure | % age

Male | Female | > 5 | < 5
Figure 4 | Trend in number of suspected cases over time (W38 2017 - W3 2018)
Measles | Maps and Alert Management

Map 2 | Map of cases by site/zone (W3 2018)

- **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
1 case. Source: IEDCR

Alert management (W3 2018)
- **30** Alerts
- **97%** Verified
- **0** Low Risk
- **0** Moderate Risk
- **0** High Risk
- **0** Very High Risk

Figure | % sex
- Male
- Female

Figure | % age
- > 5
- < 5

Source: IEDCR
Figure 5 | Trend in number of cases over time (W38 2017 - W3 2018)

| Total suspected AJS cases - Bangladesh |

Acute Jaundice Syndrome | Trend
Acute Jaundice Syndrome | Maps and Alert Management

Map 3 | Map of cases by site/zone (W37 2017 - W3 2018)

- **Ukhia** | Number of cases
- **Ukhia** | Number of alerts
- **Teknaf** | Number of cases
- **Teknaf** | Number of alerts

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

**Map legend**

<table>
<thead>
<tr>
<th>Number of cases</th>
<th>Number of alerts</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>50</td>
<td>50</td>
</tr>
</tbody>
</table>

**Alert management (W3 2018)**

- **Alerts**
  - Male: 15
  - Female: 0

- **Verified**
  - Male: 100%
  - Female: 0%

- **Low Risk**
  - Male: 0
  - Female: 0

- **Moderate Risk**
  - Male: 0
  - Female: 0

- **High Risk**
  - Male: 0
  - Female: 0

- **Very High Risk**
  - Male: 0
  - Female: 0

**Figure | % sex**

**Figure | % age**

Source: IEDCR
Acute Watery Diarrhoea | Trends

Figure 6 | Trend in number of cases over time (W38 2017 - W3 2018)
Acute Watery Diarrhoea | Maps and Alert Management

Map 4 | Map of cases by site/zone (W37 2017 - W3 2018)

- **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
  - 0
  - 1
  - 10
  - 200
  - 500
- Number of alerts
  - 0
  - 1
  - 10

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

**Alert management (W3 2018)**
- **1** Alerts
- **100%** Verified
- **0** Low Risk
- **0** Moderate Risk
- **0** High Risk
- **0** Very High Risk

**Figure | % sex**
- Male
- Female

**Figure | % age**
- > 5
- < 5
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