KEY HIGHLIGHTS

- As of 17th February 2018, a total of 5,764 suspected cases have been reported.
- The second round of vaccination campaign against diphtheria along with sweep activity concluded on 14th February 2018. 397,375 children up to 15 years immunized.

SITUATION OVERVIEW

Since 25 August 2017, an estimated 688,000 Rohingya have crossed over from Myanmar into Cox’s Bazar, Bangladesh, joining approximately 212,000 others who had fled in earlier waves of displacement. There were 801 new arrivals from 1-9 February. As of 21 February 2018 over 585,000 arrivals are in Kutupalong expansion site, 237,000 in other camps and settlements, and 79,000 arrivals in host communities, impacting the already congested health response. Pre-existing camps and settlements as well as new spontaneous settlements have expanded with the new influx.

RESPONSE

EPIDEMIOLOGICAL UPDATE

- To date, 149 health facilities out of 158 (94%) have been registered in EWARS. This provides surveillance for an estimated 728,786 people (84% of the estimated population).
- In week seven, 2018 a total of 101 alerts were triggered, of which 99% were verified and acted upon, and 3% are still undergoing risk assessment by a joint MOHFW- IEDCR-WHO response cell.
- As of 17 February 2018, a total of 5764 diphtheria case-patients were reported in EWARS, including 219 new case-patients in week 7, a decrease compared to 280 cases reported in week six.
- A total of 152 cases of Acute Jaundice Syndrome (AJS) were reported in week seven, compared to 97 cases in week six. The increase may be due to heightened awareness among health facilities following the

introduction of enhanced surveillance in week seven. As part of a more in-depth investigation, expanded laboratory testing will start in week 8.

- A total of 68 cases of suspected measles/rubella cases have been reported in week seven, a slight increase on the previous week (44).
- Reported numbers of AWD remain stable. There is no indication of severe disease, severe dehydration, or clustering of cases.
- Improved guidance for reporting through EWARS, particularly for event-based reporting, is being prepared for partners in reporting health facilities.
- WHO is currently working with partners to implement community based surveillance in the camps.
- EWARS bulletin for week seven was disseminated to all health sector partners.

**DIPHTHERIA UPDATE**

- As of 17 February 2018, a total of 5,764 suspected cases have been reported, including 119 laboratory confirmed, 3,100 probable and 2,545 suspected cases. A total of 219 cases were reported in the week of 11 – 17 Feb, a decreasing trend on previous weeks (280 cases were reported in week six).
- A total of 50 suspected cases have been reported from the host community since the start of the outbreak. Of these, six cases are laboratory-confirmed, 32 are probable and 12 are suspected. In week seven, two case-patients were reported. The risk for further spread in the host population has been assessed to be moderate as the routine vaccination coverage for DTP is high in the Bangladeshi community.
- A total of 38 deaths (case-fatality proportion <1%) were recorded as of 17 February, with no deaths reported since 02 February. No deaths have occurred in host communities.
- Contact tracing continues to improve, WHO is continuing to work with IECRDB to strengthen laboratory capacity
- Diphtheria bulletins are disseminated to relevant health sector partners.

**VACCINATION CAMPAIGNS AND ROUTINE IMMUNIZATION**

- The second round of vaccination campaign against diphtheria along with sweep activity concluded on 14 February 2018. 397,375 children under 15 years immunized. 171,382 children aged 6 weeks to 7 years were administered Pentavalent and bOPV vaccines. 225,993 children aged 7 years to 15 years were administered Td vaccine during the campaign with an overall coverage of 128% (25% more than the last campaign).
- Diphtheria campaign in the host community in Teknaf started on 17 February and will continue until 24 February 2018. Approximately 40,000 children between 1-5 years old are expected to be vaccinated with Pentavalent vaccine.
- Vaccination for close contacts of cases clinically suspected with diphtheria is continuing
- Routine EPI for Rohingya population started in 16 sites in Ukhiya Upazila. As of now there is a plan to expand fixed site EPI sessions in more than 70 health facilities.

**HEALTH OPERATIONS**

- Based on the findings of the joint water sanitation and hygiene (WASH) and infection prevention and control (IPC) survey conducted in January, a follow-up action plan to address issues identified through the survey is currently under development.
- The results of the 3rd round water quality monitoring were shared to WASH sector partners. A plan for the 4th round of water quality monitoring (surveillance strategy, refresher training on water sampling and sanitary survey, implementation of survey, analysis of survey data, result dissemination and follow-up plan) has been prepared and is expected to be implemented from 26 February.

- WHO in conjunction the Directorate General of Health Services supported a three-day refresher training (13 February – 15 February) on assessment and management of common mental disorders (mhGAP), following the previous mhGAP training conducted in November 2017. The training included 15 participants from government facilities and partner agencies. An mhGAP mobile application was introduced as a tool to use in clinical practice during the training. Onsite supportive supervision visits will provided to the trainees as a follow-up of the training.

- After review of existing evidence and consultation of technical experts both internationally and in the field, the antibiotic treatment protocol for diphtheria is being significantly shortened to reduce unnecessary side effects.

- The infrastructure of establishing the IEDCR based laboratory at Cox’s Bazar medical college is near completion. The Director of IEDCR signed the proposal for lab establishment on 18th February. The prospective lab will be composed of molecular testing area with dedicated spaces for DNA extraction, master mix preparation (clean room), template addition and PCR amplification. The serology will be operated as an independent wing.

LOGISTICS
- WHO logistics team is supporting the activation of the laboratory of the Cox’s Bazaar Medical College through procurement and installation of partitions and electrical equipment
- An urgent order for Hep A ELISA kit has been process and is expected to be received by 22 February
- In preparation for the monsoon season, WHO requested four containers of 20 feet in order to preposition medical kits. Two of the kits will be placed in Lombasia hub and while the site for the remaining two will be selected with support from the site management team
- The logistic assessment of all the CTC-DTC is ongoing and will be completed by the 22 February.
- WHO is supporting mapping of the main cholera supplies: ORS and Ringer Lactate in support of health sector partners and the office of the Civil Sergeant

COORDINATION
- Health Sector Partners were briefed by WHO on Business Continuity Planning for their respective organizations.
- Development of the Emergency Response Plan for the raining season is ongoing.
- Priority Health facilities at risk for floods were identified for relocation. Partners were approached for consent and coordination with site management sector is ongoing for relocation process
- A mapping of referral level health facilities was conducted and shared with partners.

CONTACTS

Dr Bardan Jung Rana
WHO Representative
WHO Bangladesh
Email: ranab@who.int

Dr Khalid el-Tahir
Incident Manager – WHO
Email: eltahirkh@who.int