Situation Report: 03
Date: 28 July 2017
Emergency type: Sri Lanka Dengue Outbreak

KEY HIGHLIGHTS

- Sri Lanka is reporting an increased number of dengue cases. From 1 January to 28 July 2017, the Epidemiology Unit of the Ministry of Health, Nutrition and Indigenous Medicine (MoH) Sri Lanka reported 110,372 dengue cases. This is approximately 4 times higher than the average number of cases for the same period between 2010 and 2016.
- 110,372 dengue cases and 301 deaths have been reported from the Epidemiology Unit, MoH.
- WHO presented an intensified strategic and operational plan to rapidly reduce dengue morbidity and mortality in Sri Lanka. The Plan was accepted by the Minister of Health.
- The Entomologist and Technical Officer deployed by WHO SEARO have conducted trainings for entomologists and public health inspectors in vector control.
- A media workshop was held by WHO, MOH and UNICEF on 27 July to seek the continued support of the media in spreading awareness on the importance of vector control and personal protection in curtailing the spread of dengue.

SITUATION OVERVIEW

Situation update

- Approximately 44.5% of cases and 53% of deaths were reported from the Western province. The most affected areas are the Colombo district (23,574) followed by Gampaha (19,046), Ratnapura (6,583), Kalutara (6,525) and Kandy (6,475).
- The highest numbers of dengue cases thus far were reported during June 30, 2017 – July 7, 2017.
Public health concerns

- Approximately 30% of dengue patients are children between the ages 5 -19, according to the National Dengue Control Unit.
- Current entomological reports from the National Dengue Control Unit indicate about 40% of Aedes mosquitoes, the vector for dengue, breed in discarded containers and utensils. Additionally, construction sites, schools, religious places and other institutions also contain large numbers of mosquito breeding sites.

Figure 1: Age distribution of dengue patients, 2017.

Health needs, priorities and gaps

- Vector control activities are needed to reduce the number of potential mosquito breeding sites in the affected areas.
- Community mobilization programmes aimed at removal of mosquito breeding sites will be critical to halting further spread of dengue.
- Maintenance of a proper solid waste management system is needed to support vector control efforts.
- Health care facilities are increasingly overwhelmed as a large number of patients are being admitted to hospitals. There is a need to strengthen capacity in hospitals to diagnose and manage dengue patients.

Ministry of Health response and WHO action

Ministry of Health response

- The National Dengue Control Unit in collaboration with the Presidential Task Force developed an Intensive Inter-sectoral Programme for the Prevention and Control of Dengue.
• The Programme includes specific action plans targeting removal of mosquito breeding sites from various premises such as schools, homes, private and public institutions, places of worship, harbors and construction.

• H.E. President Maithripala Sirisena declared a continuous three month dengue control programme starting from the 1st of June 2017.

• A three day dengue prevention campaign targeting schools began on Friday 28 July; school authorities and students were requested to clean school premises to remove mosquito breeding sites.

• The MoH will continue regular activities to eliminate breeding sites enlisting the support of police and tri-force where necessary.

• Monitoring and evaluation of current dengue control efforts will be maintained to assess progress and scale up efforts as needed.

WHO action

• WHO in collaboration with MoH and partners developed an intensified strategic and operational plan to rapidly reduce dengue morbidity and mortality. The plan was accepted by the Minister.

• The plan aims to reduce transmission of dengue and thereby the number of cases by more than 50% over a period of 4 weeks in high risk districts of the country and to reduce mortality of dengue by enhancing current case management strategies.

• It calls for a concerted and strategic community mobilization campaign to scale up vector control activities with a whole of society approach.

• An evidence-based action plan for case management by scaling up infrastructure in hospitals and developing clinical management training programmes is presented in the action plan.

• WHO SEARO Entomologist conducted training for entomologists, public health field staff, Public health Inspectors and Medical Officers of Health on identification and elimination of mosquito breeding sites.

• WHO vector control experts assisted with field inspections for mosquito breeding sites and provided technical input to improving inspection and correct elimination of breeding sites.

• A media workshop on dengue prevention and control was held on 27 July to brief the media on the current situation, and to enlist their support in disseminating credible and actionable information to the general public on how they can protect themselves against dengue.

Resource mobilization

• Government of Sri Lanka

• WHO Country Office, SEARO, HQ

Contacts

WHO Country Office
Dr Sugandhika Perera
National Professional Officer, Emergency Risk Management
Email: pereras@who.int  Tel: +94 769 603 517

WHO South-East Asia Regional Office
Dr Arturo Pesigan
Programme Area Manager, Emergency Operations
Email: pesigana@who.int  Tel: +81 78 2303128