



GLOBAL TASK FORCE ON
CHOLERA CONTROL

Controlling Cholera in Bangladesh - Update

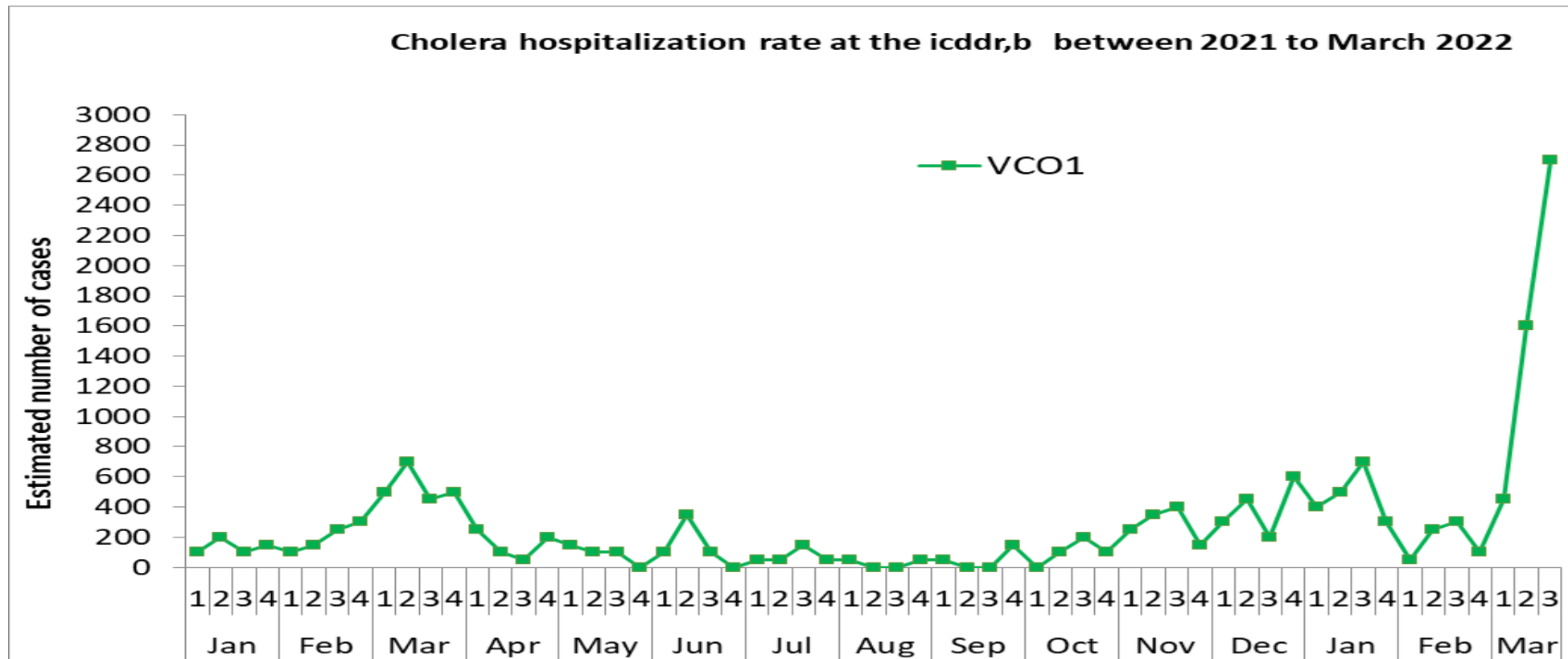
Prof Dr. Md. Nazmul Islam,
Director, Disease Control and
Line Director, CDC,
Directorate General of Health Services, Bangladesh
9th GTFCC Annual Meeting
27-28-29 June 2022

1. UPDATE ON CHOLERA SITUATION

- The number of diarrhoeal patients in Dhaka from March to May this year was higher than the past several years
- Several Core Working Group and multi-stakeholder meetings were held
- A reactive OCV campaign was planned for recent outbreak in the most affected 5 areas of Dhaka city based on patients hospitalization rate.
- Intersectoral Coordination Group (ICG) is providing fund for the OCV campaign (about 4.5 million doses) among the affected population
- The reactive vaccination has been launched from 26 June 2022. Inaugural was held in presence of Hon'ble Minister, Ministry of Health and Family Welfare, Bangladesh.
- The campaign is also supported by the National Expanded Programme on Immunization (EPI), World Health Organization, UNICEF, International Red Cross and Bangladesh Red Crescent Society, and MSF.

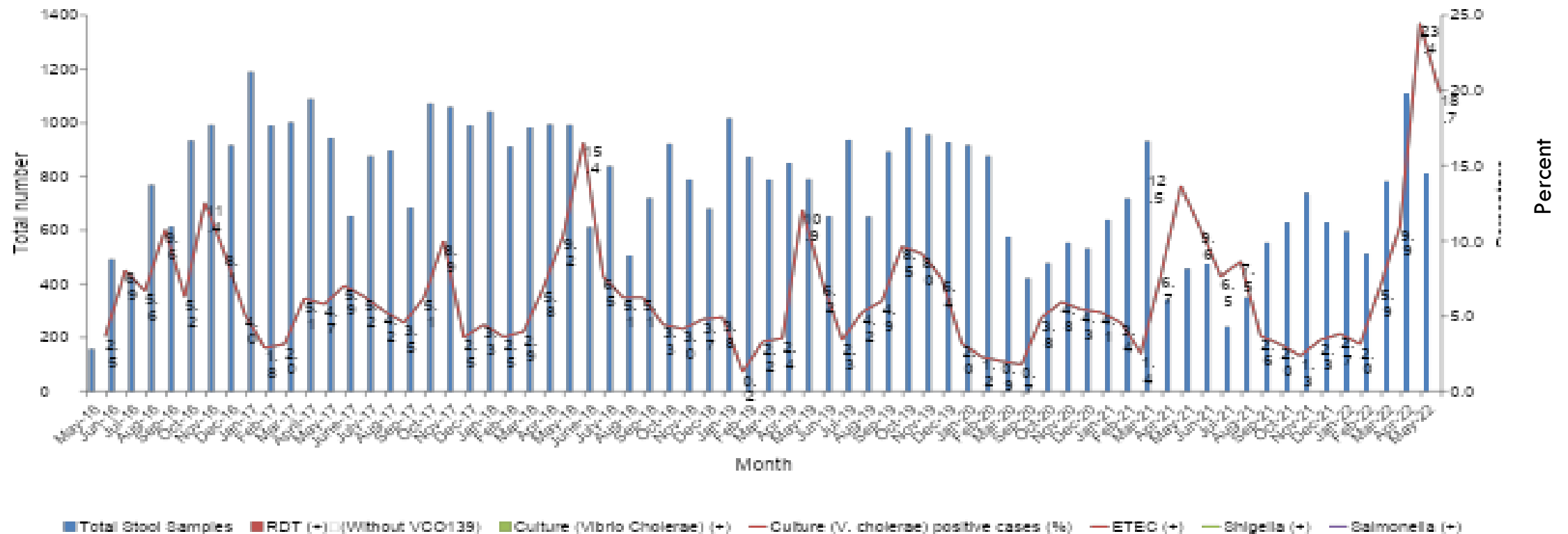
1. UPDATE ON CHOLERA SITUATION

Cholera hospitalization rate at the icddr,b between January 2021 to March 2022



1. UPDATE ON CHOLERA SITUATION

Month wise distribution of culture confirmed cholera (V. cholerae) cases in Bangladesh (May'16- May'22)



2. KEY ACHIEVEMENTS AND MAIN CHALLENGES

ACHIEVEMENTS AND GOOD PRACTICES	CHALLENGES AND SOLUTIONS
<p>WASH situation: Coverage of access to basic water facilities at the household level was 99.5%, sanitation 60.7% and hygiene 56.3%.</p>	<p>WASH for Cholera Control is not highest priority of all relevant departments. Need more policy level advocacy.</p>
<p>Several collaborating meetings took place with local administration, water sanitation authority, city corporations to improve WASH and to take measures to manage recent diarrhoeal outbreak</p>	<p>Inadequate manpower in national program. Need a separate National Diarrhoea Control Programme.</p>
<p>Approved National WASH strategy and Wash strategy for healthcare facilities are in place. IPC in healthcare facilities strengthened</p>	<p>Multisectoral involvement: coordination is difficult</p>

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Training of healthcare staffs of all tiers to strengthen case management is continuing according to recently developed diarrhoeal management guideline.	Updated management guidelines need to be incorporated in Medical curriculum.
Multi-stakeholder advocacy was held in 5 divisions out of 8 divisions after recent upsurge of diarrhoea	Climate change and natural disasters hampers sustainable WASH
Emergency intravenous saline, ORS and WPT were supplied to hospitals according to requirements	Case reporting and surveillance system need to be strengthened for a better sustainable plan.
Country support platform hosted by IFRC launched, bolstering multi-stakeholder coordination	

2. KEY ACHIEVEMENTS AND MAIN CHALLENGES



Training



Advocacy



OCV Campaign



Meeting

Inaugural of the Reactive OCV Campaign



3. PRIORITIES FOR 2022-23

- Multi-sectoral coordination mechanism among stakeholders and quarterly meeting on a regular basis.
- OCV demonstration campaign at cholera prone areas in Dhaka city
- Advocacy to relevant departments for strengthening of WASH intervention.
- Initiate Rapid Diagnostic Test (RDT) testing for cholera at primary, secondary and tertiary level health facilities.
- Capacity development for cholera detection at health facilities.
- Strengthen case management for cholera as per WHO guideline preferably through mobile application.
- Establish Early Warning and Response System (EWARS)
- Strengthen surveillance system
- Strengthen awareness development program for all communities through appropriate communication mechanism

Thank you

Together we can
#endcholera



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