



COMMUNICABLE DISEASE WEEKLY UPDATE
IDP Transit Sites & Relief Villages - Vavuniya District
Week ending: 12 June 2009



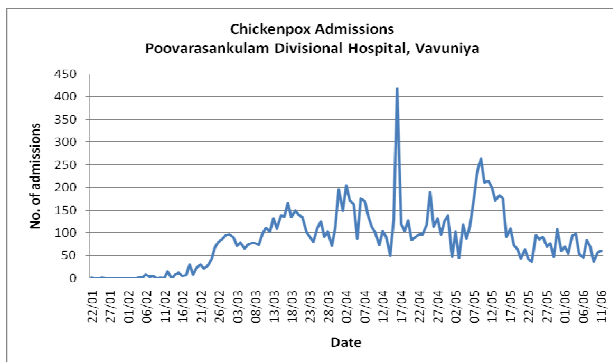
Disease surveillance

The disease surveillance activities in transit IDP sites are fairly satisfactory as they are carried out by the area PHI & reported to the MOH. However, the disease surveillance system in the transitional relief villages (Zone 0 - 4, Cheddikulam MOH area) needs further strengthening. Considering the practical issues, it has been decided to monitor the trend of priority communicable diseases with outbreak potential initially. Accordingly, notification registers are now maintained in all treatment centres located inside the zones.

As per the surveillance data available, the number of reported cases of notifiable diseases was relatively very small from the transit IDP sites.

Chickenpox

Morbidity: Chickenpox patients identified in both transit camps and relief villages are generally transferred to Poovarasankulam Hospital. The admission trend was shown below. However, the declining trend noticed lately, may not be reflecting the true situation as some doctors working in zones were not referring patients to Poovarasankulam. The cumulative total of admissions to this hospital was 12,195.

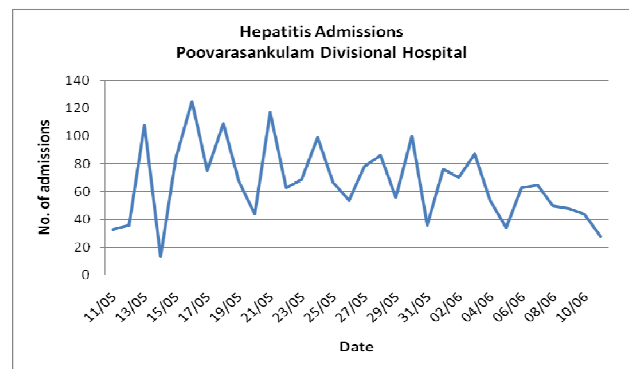


Mortality: Up to now, 3 deaths were reported among chickenpox patients.

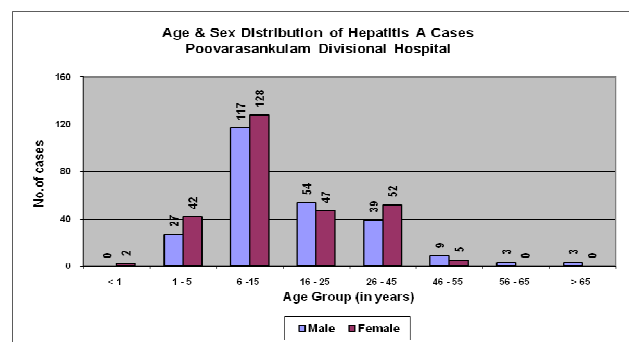
Hepatitis A

Laboratory confirmation: In collaboration with Epidemiology Unit, blood samples from 6 patients in Poovarasankulam sent to the Medical Research Institute, Colombo on 8th June. All 6 were positive for hepatitis A.

Morbidity: Hepatitis outbreak among IDPs started in later part of April 2009. A school located adjacent to the Poovarasankulam DH was identified as the treatment facility for them. The cumulative total of admissions was 2139. As for chickenpox, the declining trend seen in the epidemic curve may not reflect the true situation as some patients, especially detected in the zones, were not transferred to Poovarasankulam.



According to the analysis of admissions to Poovarasankulam during 01-08 June 2009, the sex ratio was M: F = 1.1: 1. About 46% were in the age group of 6 - 15 years, followed by 19% in the 16 - 25 years group.



Organized data from the relief villages (zones) is available from June 1st, 2009. Accordingly, the number of hepatitis notifications/ 1000 population during the period of analysis (10 days) was range from 3.1 to 4.4 i.e. distribution of hepatitis cases by zone is more or less the same.

Zone	No. of cases (01-10 June 2009)	Total Population	No. of patients /1000 population (01-10 June 2009)
Zone 0	66	21,602	3.1
Zone 1	203	46,458	4.4
Zone 2	279	75,564	3.7
Zone 3	151	45,000	3.4
Zone 4	148	43,693	3.4
Total	847	232,317	3.6

Mortality: Two deaths were reported due to hepatitis (1 each from Poovarasankulam & Cheddikulam Hospitals.

Dysentery/ Diarrhoea

As per the data available from the relief villages In Cheddikulam, during 01-08 June, 812 cases of dysentery and 1007 cases of diarrhoea were notified. The number of dysentery cases was peaked on June 2, 3 & 4, especially in zones 2 & 4. Recent reports show a marked reduction in the number of dysentery cases. However, there are significant numbers of diarrhoea cases reported especially from zone 4.

Typhoid fever

Laboratory confirmation: All the cases were diagnosed primarily clinically, and supported by the results of WBC/DC and SAT (Widal test).

In collaboration with Epidemiology Unit, blood samples of 4 suspected typhoid patients were sent for blood culture. Results are not yet available from Colombo.

Antibiotic sensitivity: According to the clinicians, most of the patients were not responding to generic preparations of ciprofloxacin (IV) and ceftriaxone (IV). They have made request for the supply of Rocephin

(original brand of ceftriaxone) and chloramphenicol IV. However, no antibiotic sensitivity test (ABST) results were available.

Morbidity: Regarding typhoid, there was no significant numbers of notifications from field. However, laboratory data from Cheddikulam Hospital shows that 105 patients were subjected to SAT (Widal test) used to diagnose typhoid fever during 21 May - June 10. At Vavuniya General Hospital, about 40 IDP children were treated/ currently undergoing treatment for typhoid during this month alone. Most of the patients were young children aged 5 - 10 years.

Mortality: There were no deaths reported due to confirmed typhoid. However, according to the data available, during the period of 05 February - 02 June 2009, there were 11 deaths with the cause of death given as "fever", among them 5 were below 10 years.

Malaria

Referral (Indian) Hospital in Zone 1 reported 3 cases of *Plasmodium vivex* malaria, diagnosed by using rapid test kits (later tests gave negative results). Regional Malaria Officer, Vavuniya has deployed field staff at hospitals and field. An active surveillance for malaria is currently undergoing. Up to no, no cases have been diagnosed.

Other diseases

There were significant number of patients getting treatment for acute upper respiratory tract and skin infections. An update on tuberculosis will be submitted next week.

Data sources: Vavuniya & Cheddikulam MOH Offices, RDHS Office Vavuniya, Cheddikulam Coordination Centre and Vavuniya, Cheddikulam & Poovarasankulam Hospitals

Compilation: WHO Field Unit, Vavuniya