

Launching Ceremony of World Breast Feeding Week and Nutrition Promotion Weeks 2014

Acting WHO Representative to Myanmar, Dr Krongthong Thimasarn gives vitamin A capsules to pre-school child at the launching ceremony of World Breast Feeding Week and Nutrition Promotion Weeks 2014 in Nay Pyi Taw.



The Launching Ceremony of World Breast Feeding Week and Nutrition Promotion Weeks 2014 was conducted at the Ministry of Health in Nay Pyi Taw on 1 August 2014. The opening speech was delivered by H.E. Union Minister for Health, Dr Than Aung followed by an address by Dr Krongthong Thimasarn, Acting WHO Representative to Myanmar and by Mr Cliff Meyers, Chief of Education section, UNICEF.

It was attended by Representatives from Myanmar Maternal and Child Welfare Association and Myanmar Women's Affairs Federation, Directors General of Departments under the Ministry of Health, staff from the Ministry of Health, Ministry of Agriculture and Irrigation, Ministry of Mines, Ministry of Education, and from other related ministries and departments, representatives from the UN system and from national and international non-governmental organizations.

After the launching ceremony, the guests viewed the mini-exhibition administered vitamin A capsules to pre-school children, provided iron

tablets to adolescent girls, pregnant and lactating mothers. World breast feeding week is celebrated every year from 1-7 August.

This year's World Breast Feeding week (WBW) theme 2014 is: BREAST FEEDING: A Winning Goal - For Life. The plan stipulates that by 2025, at least 50% of babies around the world should be exclusively breast fed. Currently only about 38% of infants under six months of age are exclusively breast fed.

The Regional nutrition strategy is intended to assist member states in developing a multi-sectoral approach and adopt measures for the promotion of nutrition among all population groups following a life course approach and identify and prioritize nutrition action in their countries in all relevant sectors.

Nutrition promotion month has now been conducted for successive years continuously, since 2003 which takes place in the first week of August every year. The activities are conducted not only at central, but also at state-regional, township and community levels. ■

Myanmar Family Planning Best Practices Conference

30 June 2014-1 July 2014



Frontline workers report back on the group discussions at the Myanmar Family Planning Best Practices Conference in Nay Pyi Taw.

On June 30, 2014, more than 160 guests from Myanmar and around the world gathered at the Mingalar Thiri Hotel in the capital city of Nay Pyi Taw to discuss best practices in family planning. The conference, follows Myanmar's November 2013 commitment to Family Planning 2020 (FP2020) and its goal of enabling 120 million more women and girls to use contraceptives by 2020.

Hosted by Myanmar's Ministry of Health, with support from international and local partners, the three-day Family Planning Best Practices Conference was a groundbreaking event that provided township representatives an opportunity to share experiences and develop localized action plans around family planning and related reproductive health services. Contributing partners that supported the Ministry of Health to make this conference a success included Pathfinder International with financial support from the David and Lucile Packard Foundation, WHO, UNFPA, the 3MDG Fund, and FP2020/UN Foundation, National

and International Non-governmental Organizations were also involved in conference planning and agenda-setting.

The Minister of Health, together with all participants, signed the FP2020 commitment Banner as a pledge of their commitment to the improved health of women and children through family planning practices. On the first day, attendees took part in discussions with international experts on effective practices in family planning to learn from global experiences. Representatives from several organizations and institutions were present.

As Myanmar increases its support for the advancement of women and children's health, the country's future progress in the public health sector becomes increasingly promising. The joint efforts of public and private sector providers to ensure adequate supplies of reproductive health commodities, combined with the continued support of global and local technical experts, inspire hope—that the unmet need of millions of Myanmar women and men will be fulfilled in the next five years. ■

What is Ebola Hemorrhagic Fever?

Ebola Hemorrhagic fever (Ebola HF) is one of many Viral Hemorrhagic Fevers. It is a severe, often fatal disease in humans and nonhuman primates (such as monkeys, gorillas, and chimpanzees). Ebola HF is caused by infection with a virus of the family Filoviridae, genus Ebola virus. When infection occurs, symptoms usually begin abruptly. The first Ebola virus species was discovered in 1976 in what is now the Democratic Republic of the Congo near the Ebola River. Since then, outbreaks have appeared sporadically, the current outbreak in 2014 in West Africa is the largest outbreak reported.

The natural reservoir host of ebola viruses remains unknown. However, on the basis of available evidence and the nature of similar viruses, researchers believe that the virus is zoonotic (animal-borne) with bats being the most likely reservoir.

Symptoms include: fever, headache, joint and muscle aches, weakness, diarrhoea, vomiting, stomach pain, lack of appetite, and abnormal bleeding. Symptoms may appear anywhere from 2 to 21 days after exposure to ebola virus though 8-10 days is most common.

Transmission: Because the natural reservoir of ebola viruses has not yet been proven, the manner in which the virus first appears in a human at the start of an outbreak is unknown. However, researchers have hypothesized that the first patient becomes infected through contact with an infected animal. When an infection does occur in humans, there are several ways in which the virus can be transmitted to others. These include:

- Direct contact with the blood or secretions of an infected person
- Exposure to objects (such as needles) that have been contaminated with infected secretions

The viruses that cause Ebola HF are often spread through families and friends because they come in close contact with infectious secretions when caring for ill persons. During outbreaks of Ebola HF, the disease can spread quickly within health care settings (such as a clinic or hospital). Exposure to ebola viruses can occur in health care settings where hospital staffs are not wearing appropriate protective equipment, such as masks, gowns, and gloves.

Proper cleaning and disposal of instruments, such as needles and syringes, is also important. If instruments are not disposable, they must be sterilized before being used again. Without adequate sterilization of the instruments, virus transmission can continue and amplify an outbreak.

Prevention: For prevention of Ebola there are few established primary prevention measures.

When cases of the disease do appear, there is increased risk of transmission within health care settings. Therefore, health care workers must be able to recognize a case of Ebola HF and be ready to employ practical viral hemorrhagic fever isolation precautions or barrier nursing techniques. They should prepare samples for shipping and testing.

Barrier nursing techniques include:

- Wearing of protective clothing (such as masks, gloves, gowns, and goggles)
- The use of infection-control measures (such as complete equipment sterilization and routine use of disinfectant)
- Isolation of Ebola HF patients from contact with unprotected persons

The aim of all of these techniques is to avoid contact with the blood or secretions of an infected patient. If a patient with Ebola HF dies, it is equally important that direct contact with the body of the deceased patient be prevented. World Health Organization has developed a set of guidelines to help prevent and control the spread of Ebola HF "Entitled Infection Control for Viral Hemorrhagic"

For more information: <http://www.who.int/csr/disease/ebola/en/>

TRAVEL TO AND FROM EBOLA-AFFECTED COUNTRIES IS LOW-RISK HERE IS WHAT YOU NEED TO KNOW





World Health
Organization

Workshop for Development of IEC materials for Myanmar Epilepsy Initiative



*Opening Address by
Yangon Regional Health
Director, Dr Aye Ko Ko*

A workshop for Development of Information, Education and Communication (IEC) materials for Myanmar Epilepsy Initiative was held on 28th August, 2014 at the National Health Museum, Yangon which was inaugurated by Dr. Aye Ko Ko, Yangon Regional Health Director. The Project Manager, Prof. Dr. Win Min Thit explained that the joint collaboration between the WHO and Department of Health aims to reduce the treatment gap and ensure access to treatment for people living with Epilepsy through training Medical Officers, Basic Health Staff and voluntary health workers

regarding epilepsy in the 5 project townships of Hlegu, Hmawbi, Thanlyn, Kawhmu and Lewe. IEC materials are necessary to raise awareness of the public on the issue of epilepsy, to correct misconceptions regarding epilepsy, reduce stigma and discrimination and to inform and educate the public that epilepsy can be treated and with proper treatment it will enable people with epilepsy to live normal and productive lives. The participants were divided into 3 groups to develop draft posters, pamphlets and public service announcements targeted to the general public, people with epilepsy, their families and the community. ■

Book Reviews



Progress on drinking water and sanitation: Joint Monitoring Programme update 2014. Geneva: WHO/UNICEF, 2014. 78p.

Overview

Section 1 presents the status of and trends in access to improved drinking water sources and sanitation. Section 2 provides a snapshot of inequalities in access to improved drinking water sources and sanitation. Section 3 presents efforts to strengthen monitoring of access to safe drinking water and sanitation services under a post-2015 development agenda, as well as the challenges associated with these efforts.

http://apps.who.int/iris/bitstream/10665/112727/1/9789241507240_eng.pdf

important dates

9 October 2014	World Sight Day
10 October 2014	World Mental Health Day
14 November 2014	World Diabetes Day
1 December 2014	World AIDS Day
3 December 2014	International Day of Persons with Disabilities