# Myanmar Acute Watery Diarrhea / Cholera Outbreak External Situation Report

EMERGENCIES programme

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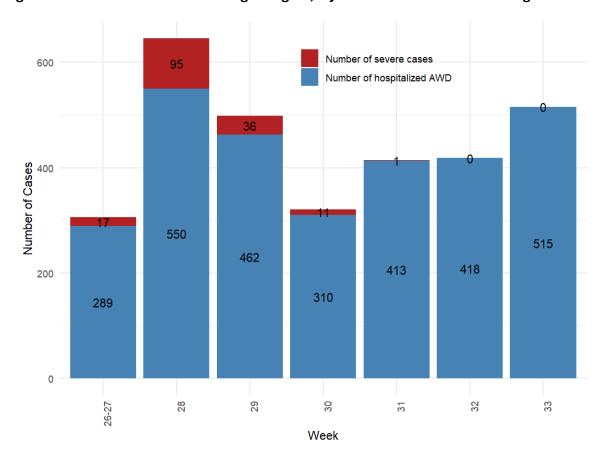
This report summarizes the situation as of 25 August 2024.

#### **Situation Overview**

#### Yangon

- According to the ministerial authorities for health,
  - As of 18 August 2024, a total of 2 957 hospitalized cases of acute watery diarrhea (AWD) including 160 cases with severe dehydration were reported in Yangon Region, since 24 June 2024.
  - Since week 31 (starting on 28 July 2024) more than 400 hospitalized AWD cases have been reported every week, with a total of 515 hospitalized AWD cases reported in the week 33 (12 18 August 2024). No new cases with severe dehydration were reported after 4 August 2024.
- As per information from open sources, it has been reported that cases are on the rise again in some townships.

Figure 1. Trend of AWD cases in Yangon region, Myanmar from 24 June to 17 August 2024

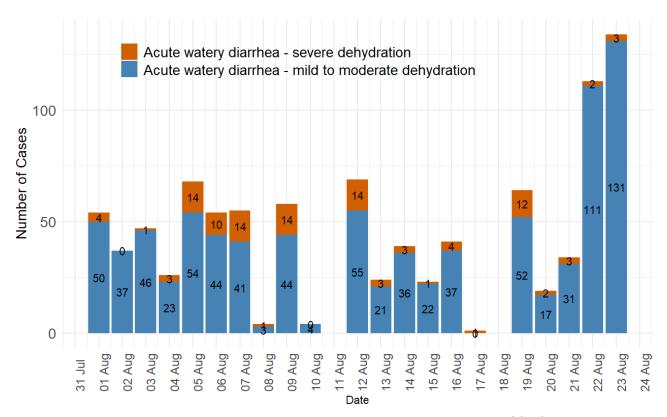


Source: The ministerial authorities for health

#### Rakhine

- According to the early warning and response systems (EWARS) supported by the Health Cluster in Myanmar, an increase of AWD cases has been observed in Sittwe in Rakhine State. A notable surge of cases, including those with severe dehydration, has been observed since late July. Cholera infection is confirmed in some of those AWD cases.
- During the most recent epidemiological week (week 34, from 18 to 24 August), a total of 364 new AWD cases were reported, including 22 AWD cases with severe dehydration. This represents an increase compared to the 197 AWD cases reported in the previous week (week 33, from 11 to 17 August). The AWD cases were reported from both camps and residential areas in Sittwe.
- Out of 22 AWD cases with severe dehydration, four were among children under the age of five, and 18 cases were children aged 5 years and older.

Figure 2. Trend of AWD cases in Rakhine state, Myanmar from 1 to 25 August 2024



Source: Health Cluster in Myanmar

### **Public Health Response**

#### **Vaccination**

- A total of 2,451,847 doses of oral cholera vaccine (OCV) to implement a reactive vaccination campaign in 34 townships in Yangon region have been approved by the International Coordinating Group (ICG) on Vaccine Provision <sup>1</sup>. The vaccines are expected to be delivered in Myanmar by 4 September.
- Within the OCV application, the ministerial authorities for health categorized the townships in Yangon Region into 4 tiers, based on epidemiological trend and other risk factors (such as population density, health facilities availability and capacity for severe case management).
- The ICG has approved the first three tiers, including all wards/areas in the first priority area (1,657,988 people in 16 townships) and the second priority area (576,447 people in 10 townships), and selected wards/areas in the third priority area (217,412 people in 8 townships).
- The townships in the fourth priority area have been excluded from the approved reactive OCV campaign plan in consideration of morbidity trends (cases not confirmed, no recent reporting, or very low caseload or risk).
- While the reactive OCV campaign is expected to limit the spread of the ongoing outbreak, it should
  not been seen as the sole solution to stop the transmission of cholera. OCVs should be used along
  with other interventions to promote clean water, adequate sanitation and good personal hygiene.
  Sustaining health facility and community-based surveillance for rapid detection, early and
  appropriate treatment, and risk communication and community engagement remain key priorities
  to stop the transmission.

#### Planning and coordination

- Following the meeting with Director-General (DG) of the European Civil Protection and Humanitarian Aid Operations (ECHO) on joint Plan of Action for AWD, WHO and UNICEF had a meeting with Humanitarian Donor Group including the DG ECHO on 21 August 2024, to share the updates of cholera situation in the conflict areas and to respond to the queries of DG ECHO on the AWD response plan.
- Continued coordination with the ministerial authorities for health and partners to optimize the ongoing AWD/cholera control efforts in Yangon and prevent potential spill over to other neighboring States/Regions.
- WHO conducted the second field visit to the charity clinics in Thaketa Township on 20 August 2024.

#### **Surveillance and Laboratory**

- The ministerial authorities for health have resumed publication of weekly AWD data on their website.
- WHO is facilitating international procurement of additional laboratory supplies for cholera culture and sensitivity tests (for 500 tests) in addition to the following supplies already delivered to National Health Laboratory and hospitals: cholera laboratory test kits (for 500 tests), five cholera investigation kits and 2,480 cholera rapid diagnostic tests.

#### Risk communication and community engagement (RCCE)

 A three-day capacity building workshop for RCCE partners was conducted on 13-15 August 2024 with the focus on overview of disease outbreaks in Myanmar, health education in camps of

<sup>&</sup>lt;sup>1</sup> International Coordinating Group (ICG) on Vaccine Provision

- internally displaced persons (IDPs), case scenarios of AWD/cholera for community engagement and social/community listening.
- WHO continue sharing the <u>cholera RCCE materials</u> to stakeholders, targeting communities in Yangon through various communication channels and platforms.

#### Case management and infection, prevention and control (IPC)

- Training on cholera surveillance, laboratory detection, case management and IPC has been conducted on 14 August for the partners who are currently supporting AWD response in Sittwe, Rakhine.
- WHO has provided job aid on case management and IPC for civil societies organizations which are working actively to support AWD response in Yangon.
- WHO continues active discussion with a partner for AWD case management in Yangon.
- Most civil society organizations, in collaboration with Township Health Departments, are implementing IPC activities, such as chlorination of water sources, disinfection of cholera patients' households, and awareness raising among households for AWD and cholera.

#### Supply of health commodities

- WHO has provided the following health commodities to support responses to ongoing AWD/ cholera events.
  - 500 sachets of oral rehydration salt (ORS) and 21 drums (40kg) of bleaching powder to civil society organization network in Yangon.
  - o 180 drums (40 kg) of bleaching powder and 150,000 water purification tablets to the ministerial authorities for health.
  - Interagency Emergency Health Kits (IEHK), including Basic Renewable Kits (200), Cholera central kit (1), Cholera community kit (14) and water purification tablets (544,000) to the ministerial authorities for health.

## **Challenges**

- Lack of access to the real-time disaggregated data for the actual ongoing cholera situation has been a
  challenge for effective planning of resources and informed response actions. WHO has requested the
  Ministerial authorities to continue communicating detailed public health information on AWD and
  cholera to WHO as per the requirements under the International Health Regulations (2005).
- The reactive OCV campaign can support the containment efforts; however, effective and efficient public health measures are required in the longer-term, along with more sustained investments, both in health and water, sanitation and hygiene (WASH).

## **Way forward**

 The implementation of WHO-UNICEF joint plan of action for AWD/cholera response continues, focusing on preparation and implementation of OCV campaign; capacity building of health care workers and volunteers; WHO field visits to key public hospitals in Yangon; and strengthening RCCE efforts to engage communities in the OCV campaign.