



Epidemiological Alert: Update on the Cholera Situation

(23 November 2010)

Epidemiological Situation

Haiti

In epidemiological week (EW) 42¹, the Ministère de la Santé Publique et de la Population (MSPP) of Haiti reported the laboratorial confirmation of the first cholera cases in Haiti after *Vibrio cholerae* O:1 serotype Ogawa was isolated in samples from hospitalized patients in the department of Artibonite. From then to EW 46², the MSPP has reported on its web page a total of 60,240 hospital visits, 25,248 hospitalizations, and 1,415 deaths due to cholera³ at the national level. By EW 46, the MSPP had already recorded cholera cases in all 10 Haitian departments.

Starting in EW 46, the MSPP began including in its reports – in addition to hospitalizations and deaths – data on hospital visits due to cholera. The information provided by the MSPP integrates the data obtained by the partners of the Health Cluster⁴.

Given that the data on hospital visits due to cholera were recently included in the MSPP reports, the only trend that can be observed is one based on the registered daily hospital admissions. The hospital admissions curve has a bimodal pattern.

From the recording of the first cholera cases in Port-au-Prince and its metropolitan area⁵ in EW 45⁶ to EW 46, the total number of hospital visits due to cholera has increased to 5,778, including 2,140 hospitalizations and 95 deaths (87 at the health services level and 8 at the community level), which represent an in-hospital case fatality rate of 4.1%.

With respect to the number of deaths at the national level, of the 1,415 deaths recorded by the MSPP, 67% occurred at the health services level, and 33% at the community level. The in-hospital case fatality rate at the national level is 2.3%.

¹ On 20 October 2010, the first cholera cases in hospitalized patients were laboratory confirmed in the Department of Artibonite.

² Data from the MSPP, updated as of 19 November 2010.

³ On 17 November, the MSPP began including data on hospital visits due cholera in its daily reports.

⁴ Health Cluster: conformed by organizations which are currently working in response to the cholera outbreak in Haiti and which include ICRC, MSF, MDM, Merlin, International Medical Corps, PIH, Save the Children as well as UN agencies and bilateral organizations. Health Cluster is coordinated by PAHO/WHO.

⁵ Carrefour, Cité Soleil, Delmas, Kenscoff, Pétiion-Ville, Port-au-Prince, Tabarre and Croix des Bouquets.

⁶ The first hospitalizations due to cholera were reported by the MSPP on 7 November 2010.

This week, response activities in the department of Nord were affected by violent protests and by the blocking of routes in Cap Haitien, as well as in other areas of this department. Meanwhile, response activities continued in other departments, and they included:

- 1) Awareness activities in schools in Saint Marc, Artibonite.
- 2) Distribution of hygiene kits and of information on cholera prevention measures by health promoters in the department of Ouest.
- 3) Distribution of material on cholera prevention and diagnosis to health workers from Bosquet and Fond Parisien.

The Health Cluster's partners informed that currently, the available human resources are not sufficient to provide treatment to patients with cholera. All partners of the Health Cluster are working together to expand this capacity as soon as possible. PAHO/WHO is contributing with additional personnel in the areas of logistics, risk assessment, and case and surveillance management.

A map with the location of the 31 CTCs and 56 CTUs, which are currently operational, is available at:

http://new.paho.org/hq/images/Atlas_IHR/CholeraOutbreak/atlas.html

A detailed report, updated as of 19 November, on the response activities conducted by the Health Cluster, at the national and departmental levels, is available at:

http://new.paho.org/hq/index.php?option=com_content&task=view&id=4404&Itemid=3487

Dominican Republic

In EW 46⁷ the Dominican Republic's IHR National Focal Point reported a confirmed imported cholera case in a 32-year-old male who was hospitalized after presenting an acute diarrheal syndrome. Later, other two cases were confirmed, all of them in Santo Domingo.

The Ministry of Public Health is leading a national cholera contingency plan which aims at reducing the health damage in the population. The main areas of action include, inter alia, epidemiological surveillance; risk communication; water and environmental sanitation; and the organization of health services networks.

Note: Also in EW 46, the United States of America reported an imported cholera case in a patient from the state of Florida.

⁷ On 16 November, the Dominican Republic's National Reference Laboratory reported a confirmed case of *Vibrio cholerae* O: 1 serotype Ogawa in a 32-year-old patient.

The Pan American Health Organization would like to remind Members State the need to strengthen surveillance measures, update response and preparedness plans, and implement appropriate prevention and promotion measures. Also the current guidelines on travel and international trade should be implemented accordingly:

- Measures such as quarantines to limit movement of people and the embargo of merchandise are infective and unnecessary in controlling the spread of cholera.
- Restricting the movement of people is unjustified as well as imposing restrictions on imports of foods produced under adequate manufacturing practices, based solely on the fact that cholera is epidemic or endemic in a country.

References

1. Préliminaire data Ministère de la Santé Publique et de la Population de Haiti. Available at: http://www.mspp.gouv.ht/site/index.php?option=com_content&view=article&id=57&Itemid=1
2. Bulletin Journalier #1. Centre d'Operation d'Urgence Nationale (COUN). Available at: http://www.mspp.gouv.ht/site/index.php?option=com_content&view=article&id=57&Itemid=1
3. Health Cluster Bulletin N° 2, November 16, 2010. Available at: http://new.paho.org/hq/index.php?option=com_content&task=view&id=4404&Itemid=3487