



SITUATION REPORT ON DENGUE IN NEPAL- 2024

1-Jan to 5-Aug

Reported Dengue Cases **2365**

Verified Deaths* **1**

Affected Districts **73**

No. of Districts with >500 cases **0**

*Dengue with Other Disease

DENGUE: SYMPTOMS AND CARE

डेङ्गीका मुख्य लक्षणहरू



डेङ्गीका लक्षणहरू देखिएमा के गर्ने ?

स्वास्थ्य संस्थामा गई चिकित्सक वा स्वास्थ्यकर्मीको सल्लाह लिने ।

घरमै बसेर उपचार गर्ने सल्लाह दिएमा ज्वरो घटाउनका लागि र जीउ पुत्तेको कम गर्नको लागि प्यारासिटामोल बाहेक इबुफेन र एस्किन जस्ता अन्य औषधीको सेवन नगर्ने ।

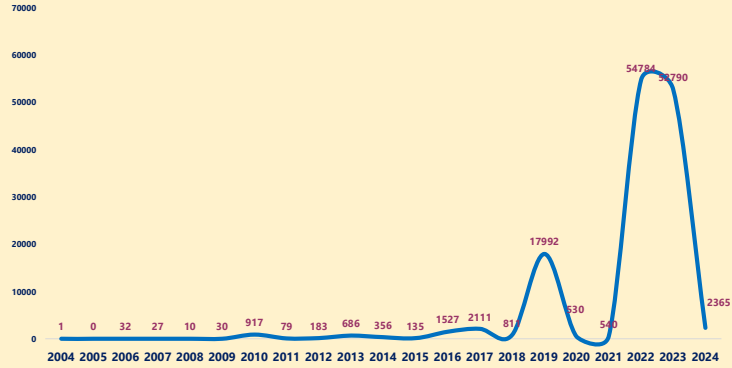
अस्पताल भर्ना हुन सल्लाह दिएमा तुरुन्त भर्ना हुने ।

(*चिकित्सकको सल्लाह नलिईकन कुनै पनि औषधी सेवन नगर्ने)

लामखुटेले फुल पार्न सक्ने संभावित घर भित्र र वरपरका पानी जम्ने ठाउँहरू र पानी राख्ने भाँडाहरू खोजी खोजी सफा गरी र लामखुटेको फुल नष्ट गरी ।

ANNUAL TRENDS OF DENGUE CASES (2004-2024)

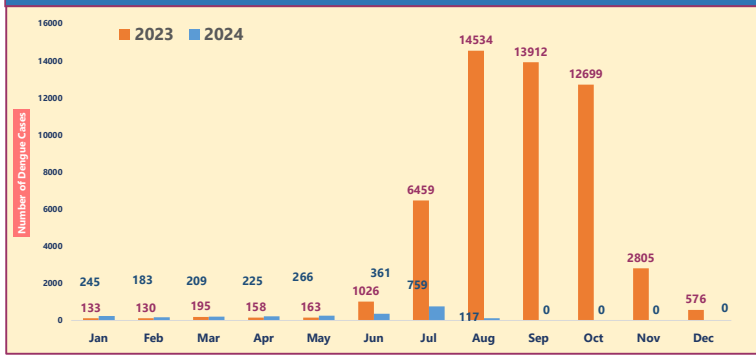
Trends in Number of Dengue Cases in Nepal 2004-2024



DENGUE CASES BY PROVINCE

Province	No. of Dengue Cases	% of National Burden
KOSHI	537	22.7%
MADHESH	46	1.9%
BAGMATI	747	31.6%
GANDAKI	508	21.5%
LUMBINI	247	10.4%
KARNALI	38	1.6%
SUDURPASCHIM	242	10.2%

MONTHLY TREND OF DENGUE CASES



TOP TEN DISTRICTS

District	No. of Dengue Cases	% of National Burden
306 KATHMANDU	287	12.1%
405 KASKI	137	5.8%
111 JHAPA	133	5.6%
313 CHITAWAN	116	4.9%
407 TANAHU	110	4.7%
312 MAKWANPUR	82	3.5%
106 BHOJPUR	66	2.8%
309 KAVREPALANCHOK	65	2.7%
102 SANKHUWASABHA	62	2.6%
104 OKHALDHUNGA	62	2.6%

डेङ्गीबाट बच्न लामखुटेको टोकाईबाट जोगिऔं, व्यक्तिगत सुरक्षाका उपायहरू अपनाऔं !!

CONTACT US

Government of Nepal
Ministry of Health and Population
Epidemiology and Disease Control Division
Teku, Kathmandu

Email: ewarsedcd@gmail.com
Web: www.edcd.gov.np
Phone: 014255796



डेङ्गी रोग डेङ्गी भाईरसबाट संक्रमित एडिज जातका लामखुटेको टोकाईबाट सर्दछ । एडिज जातका लामखुटे पानी जम्मा भएको जूनसुकै भाँडोमा पनि हुर्कन सक्दछ ।

पानी राख्ने भाँडाहरू जस्तै दयाकी, झुम, बाटा, बास्टिन आदिलाई लामखुटे नछिने गरी राम्ररी छोपेर राख्ने । साथै पानी जम्न सक्ने ठाउँमा पानी जम्न नदिन नियमित सफा गरी ।

कोला भित्र लामखुटे मगाउने छुपे बाले र लामखुटेको टोकाईबाट बच्ने मलम लगाऔं ।

पुरै शरिर ढाक्ने लुगा लगाऔं ।

काम नलाने र पानी भरिन सक्ने सामानहरू जस्तै बोटल, टायर, प्लास्टिकका बस्तुहरू पानी जम्न नमिल्ने गरि विसर्जन गर्ने ।

घर/विद्यालयको अर्बोरा कुना-काप्चा, जस्तै: पर्दा पछाडी, खाटमुनि, शौचालय भित्र, सेस्क/बिन्स मुनि आदि जस्ता छाईसक्नेमा कितनासक औषधि छर्कने गरी ।

कम्पिमा हप्ताको एक पटक एर कुलर, पानी दयाकी, फूलदानो, गमलामा राखिएको फ्लोडल राम्ररी सफा गरी ।

हामी सबै मिलेर मात्र डेङ्गी रोकथाम गर्न सक्छौं ।

लामखुटेले फुल पार्न सक्ने संभावित घर र विद्यालय भित्र र वरपरका पानी जम्ने सबै ठाउँहरू र पानी राख्ने भाँडाहरू खोजी खोजी सफा गरी र लामखुटेको फुल नष्ट गरी ।

SITUATION OF CHOLERA IN NEPAL

(Lalitpur, Kathmandu, Kailali, Pyuthan)

Situation Report #06

05 August 2024



Ministry of Health and Population
Department of Health Services
Epidemiology and Disease Control Division
Kathmandu, Nepal

HIGHLIGHTS

As of 05 August 2024, a total of **30 cases** of Cholera has been identified from Lalitpur (**19**), Kathmandu (**1**), Kailali District (**8**) and Pyuthan (**2**) of Nepal.

New culture confirmed cases in the last 24 hours: **3 cases (Lalitpur)**

Total admission in last 24 hours: **2**

No deaths associated with Acute Watery Diarrhea or Cholera has been reported as of today. Four districts have reported Cholera. Each district has separate focal outbreaks that are not linked to each other. Active case finding by RRT mobilization and community engagement for WASH ongoing in affected areas.

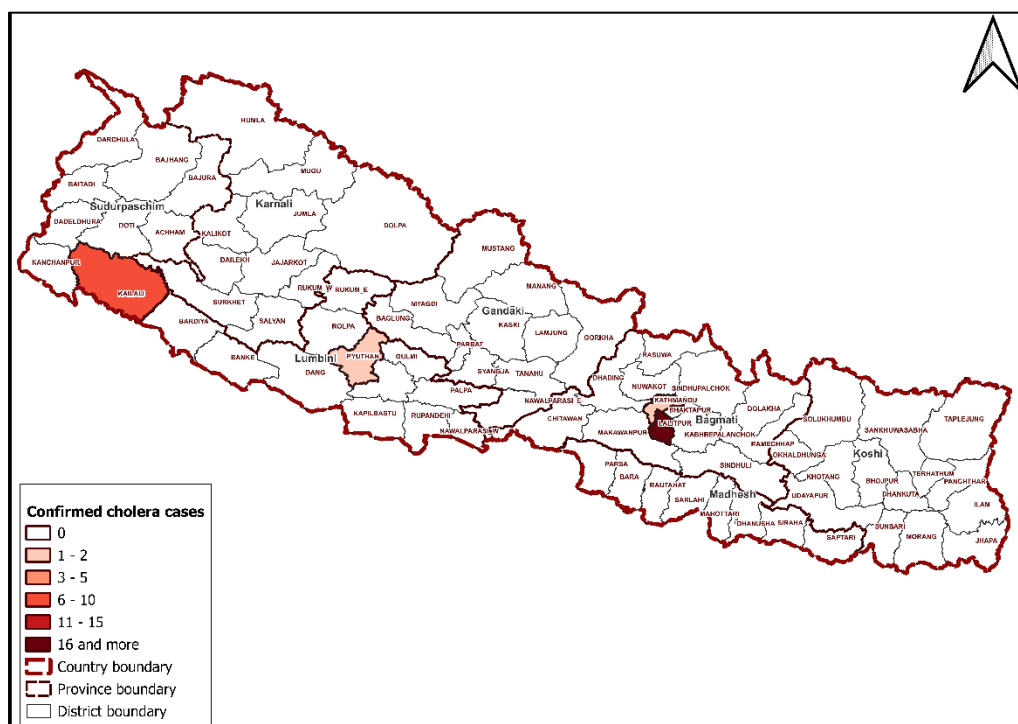
Lalitpur: 19 July 2024: 16-year-old male with suspected diarrhea and vomiting was confirmed as cholera on 22 July 2024. Additional 10 cases have been reported with links to the first case all residing in Rehab center (with inhabitants-67) in Godawari Municipality, ward-14. 9 separate cases not linked to rehab center identified and reported

Kailali: 25 July 2024: 2 cases of culture confirmed Cholera was reported from Dhangadhi Sub-Metropolitan, Ward-1, Kailali. Additional investigation identified 6 culture confirmed cases in a congregated household with 6 families. Health authorities have been monitoring the reported site.

Kathmandu: 29 July 2024: 1 stool confirmed case of Cholera reported from Tokha Municipality. Active case finding for additional cases completed.

Pyuthan: 4 July 2024: 2 new culture confirmed cases of Cholera has been reported from Gaumukhi Rural Municipality, ward-5 from Lumbini Province. A total of 10 suspected cases from same family had symptoms of AWD since 1 August. 4 cases were admitted in Pyuthan hospital and tested for RDT and Stool Culture. Member of family have travel history to India.

Figure 1: Reported Confirmed Cholera Cases as of 05 August 2024



IN NUMBERS

As of 05 August 2024

1. Lalitpur

19

Confirmed cases

0

Hospitalized cases

0

Death

2. Kathmandu

1

Confirmed cases

0

Hospitalized cases

0

Death

3. Kailali

8

Confirmed cases

0

Hospitalized cases

0

Death

4. Pyuthan

2

Confirmed cases

2

Hospitalized cases

0

Death



CONTEXT AND CHALLENGES

- In Nepal, Cholera has been endemic with numerous sporadic outbreaks in the past.
- Majority of the cases gets reported as an large outbreak of Acute Watery Diarrhea (AWD) and sporadically gets reported through national EWARS system as Acute Gastroenteritis (AGE) or culture confirmed cases of Cholera.
- The country is at high risk for outbreaks due to a steady increase in urban population density accompanied by an inadequate supply of safe drinking water and pre-existing sanitation and sewage infrastructure concerns.
- Also, some contributing factors are:
 - Chlorine untreated community supply water used for drinking
 - Heavy rainfall and drainage overflow causing contamination of water sources
 - Lack of proper Food hygiene monitoring mechanism
 - Rapid in and out migration and rapid urbanization
 - Insufficient resources to conduct effective response activities in hot spots.



EPIDEMIOLOGICAL UPDATE

- In Nepal, as of 5 August 2024, a total of 30 culture confirmed cases of cholera have been reported, of which all were screened by RDT as per the national RDT testing protocol. Three separate foci have been reported from Lalitpur, Kailali and Pyuthan.
- Cases continue to be confirmed by culture in reference laboratory of the country, indicating active circulation of *Vibrio cholerae* O:1 Ogawa. Based on the achieved report, among 30 reported cases 18 are male, 12 are female and 8 are aged 14 years of younger (figure 3).
- Majority of the cases reported some and severe signs of dehydration requiring hospital admission and antibiotic treatment.
- No deaths of cholera confirmed case have been reported (Case fatality Rate - 0%) from reported districts
- Cluster outbreak was reported in Lalitpur (n=10, 14.9%) from a drug rehab center (with 67 inhabitants) in Godawari Municipality, ward 14. All cases in rehab centers had common exposure. One caretaker in treating hospital was confirmed for cholera after 3 days of exposure. Remaining sporadic cases are being notified from Mahalaxmi Municipality in Lalitpur
- Similarly, Kailali reported 8 confirmed cases (28.6%) from a same household with 6 families (28 member) residing on Dhangadhi-1, Tribeni Chowk.
- Similarly, Pyuthan District reported 2 confirmed cases (20%) from a single family (10 member) in Gaumukhi Rural Municipality, ward-5 from Lumbini Province. Two members have travel history to India in last seven days.
- There are no epidemiological linkages between reported districts.

Figure 2. Distribution of confirmed cases of cholera by districts in Nepal as of 05 August 2024

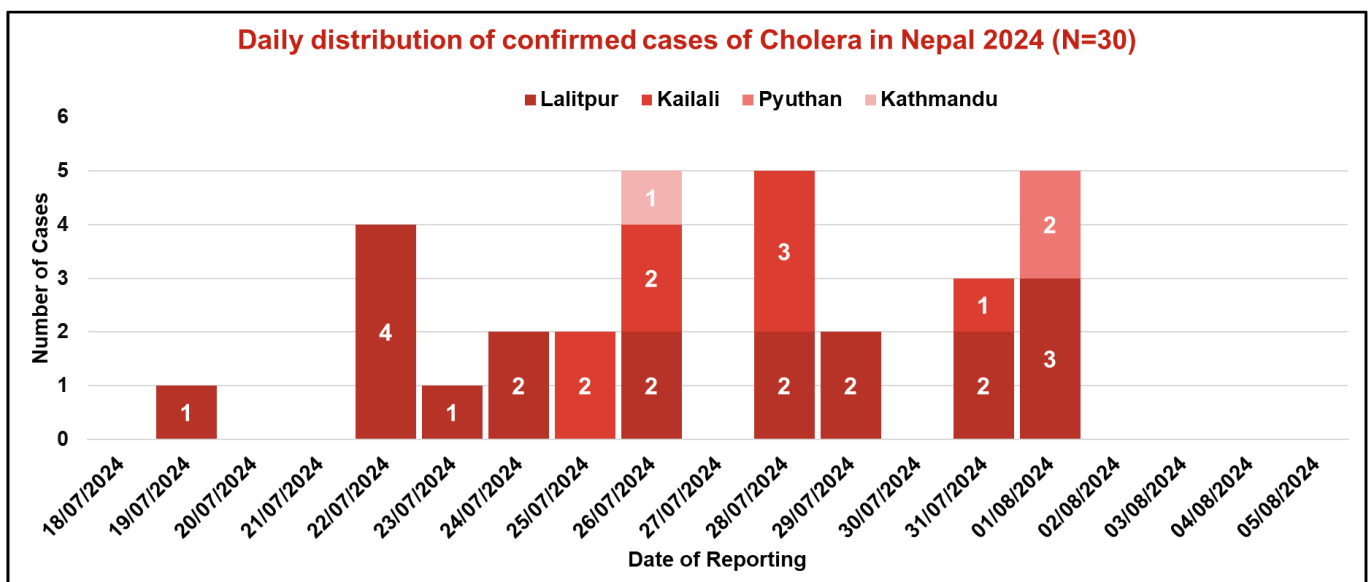
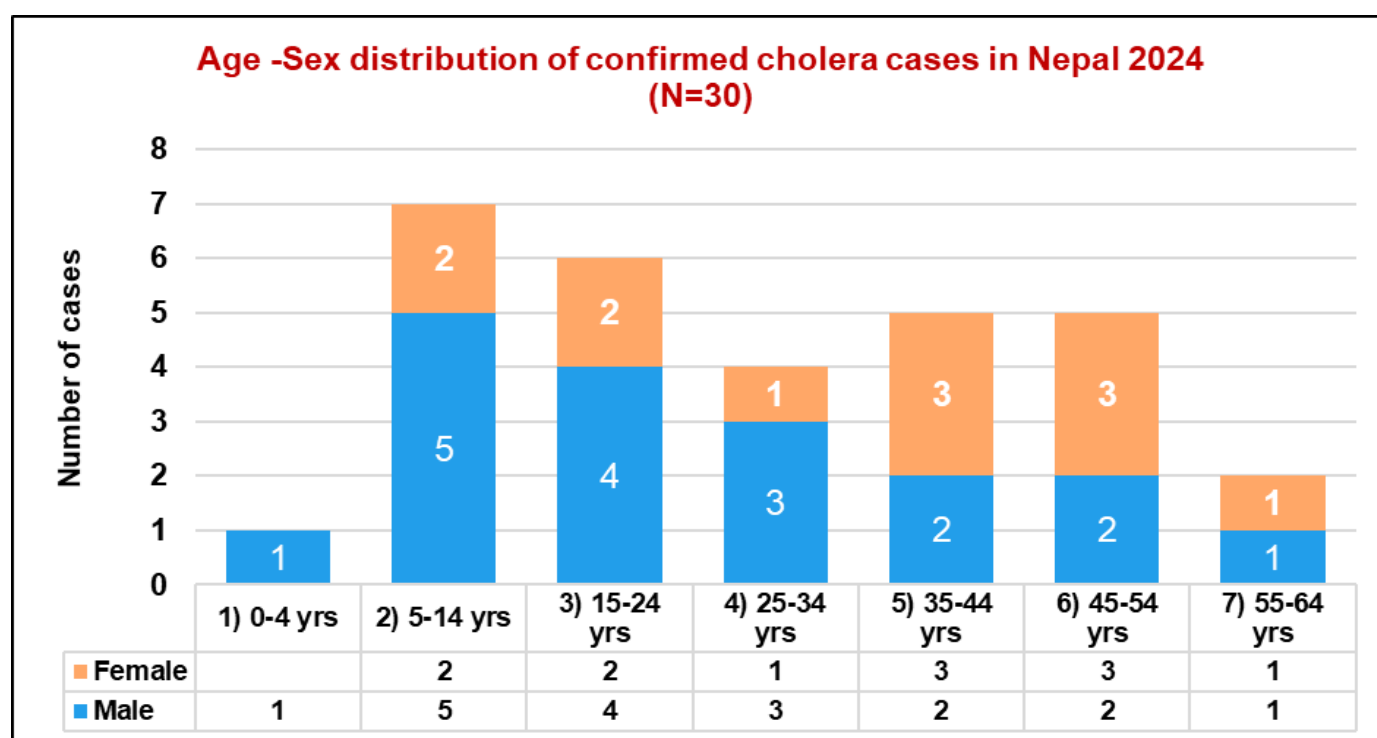


Figure 3. Distribution of suspected cases of cholera by age - sex in Nepal as of 05 August 2024



RESPONSE

EDCD continues to support national health authorities and operational partners in prioritizing the cholera response in the departments and municipalities most affected based on the epidemiological situation as follows:

Coordination and leadership

- EDCD is coordinating with all three provincial health directorates, PHEOCs, District Administrative offices, provincial public health labs, National reference laboratory (NPHL) and health facilities daily for enhanced responses.
- Weekly coordination meeting is held to discuss and strategize the cholera response.
- EDCD called WASH cluster meetings involving all stakeholders to channelize responses at provincial and local municipality levels.
- Open communication and collaboration with all partners involved in the response including WHO, UNICEF and other NGOs.
- EDCD called an expert meeting involving past directors and director generals to discuss on the current situation and seek expert advice.
- Presentation of the disease's epidemiological situation at coordination meetings at central, departmental, and WASH cluster meetings.

Epidemiological and laboratory surveillance

- EDCD is coordinating with the Rapid Response focal person from districts and local municipalities for active case finding and testing for laboratory confirmation of cases.
- In addition, EDCD continues to monitor and support the rapid investigation of cholera alerts and response activities including supporting alignment of trained Field Epidemiologists to support surveillance and alert investigation activities.
- Investigation and response were carried out with 100% of alerts were investigated within 48 hours by the RRT teams
- EDCD coordinated the collection and transportation of samples to Kathmandu for initial confirmation. Also, coordinated testing of water samples from various sites for E. Coli detection.
- EDCD coordinating with sentinel sites to meet the need of RDTs.
- Call center (1115) mechanism being used for active follow up of cases and signal detection

Case management

- All health facilities have been alerted by the provincial and district offices to prepare for case management and referral services.
- Logistic supplies like ORS, IV fluids and stock of doxycycline is assessed from nearby outbreak health facilities.

WASH

Awareness activities:

- Dissemination of WASH and cholera-related messages through social media platforms such as Facebook and Instagram.
- Orientation on cholera prevention and control for the ward elected members and the community disaster management committee of Kathmandu.
- Orientation on WASH and cholera prevention and control for the youth at School in Kathmandu Metropolitan City.
- Orientation on WASH and cholera prevention and control for youth club members, women's groups, and FCHVs.
- Dissemination of WASH and cholera-related flyers during the orientations.

Response activities:

Godawari Municipality

- Demonstration of preparing 1% chlorine solution using bleaching powder and FRC test methods for the members of the Rehabilitation Center.
- Support of 5 liters of 1% chlorine solution to the members of the Rehabilitation Center at Godawari Municipality, Ward No. 14.
- Provided orientation on preparing a 1% chlorine solution using bleaching powder, mass chlorination, and FRC test methods to the water users and sanitation committees of Godawari Municipality.
- Provided Piyush Plus to Godawari Municipality, Ward No. 14, for distribution to the necessary households.

Lalitpur Metropolitan City

- Orientation on hand hygiene and Point-of-Use (PoU) options provided to the community members in Lalitpur Metropolitan City, Ward No. 8.
 - Water quality testing using P/A vials for three different water sources in the same area.
-

Risk communications and community engagement

- Cholera awareness brochures were distributed by local RRTs and district Offices.
- Public Service Announcement (PSA) have been developed and disseminated in coordination with National Health Information.
- Health Directorate in the provinces rolling out risk communication and community engagement activities by activating WASH cluster.
- Cholera awareness messages is being circulated via MOHP Viber group.

Vaccination

- Initiation on discussion on use of reactive vaccination campaign
- Since 2020, Ministry of Health and Population in collaboration with International Vaccine Institute's Enhancing Cholera control in Nepal (ECHO-N) with a specific objective to prevent and control cholera epidemics and strengthen capacities of local public health service to sustainably conduct cholera and diarrheal disease surveillance and control.

Supplies and Logistics

- EDCD continues to support the cholera response in Lalitpur, Kathmandu, Kailali and Pyuthan districts in coordination with the management division (MD) and Provincial Health Logistic Management Committee (PHLMC).



Orientation on Mass Chlorination and FRC test methods to the Water User and Sanitation Committee (WUSCs) of Godawari Municipality