

INFORMATION BULLETIN



International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

CAMBODIA - DENGUE FEVER

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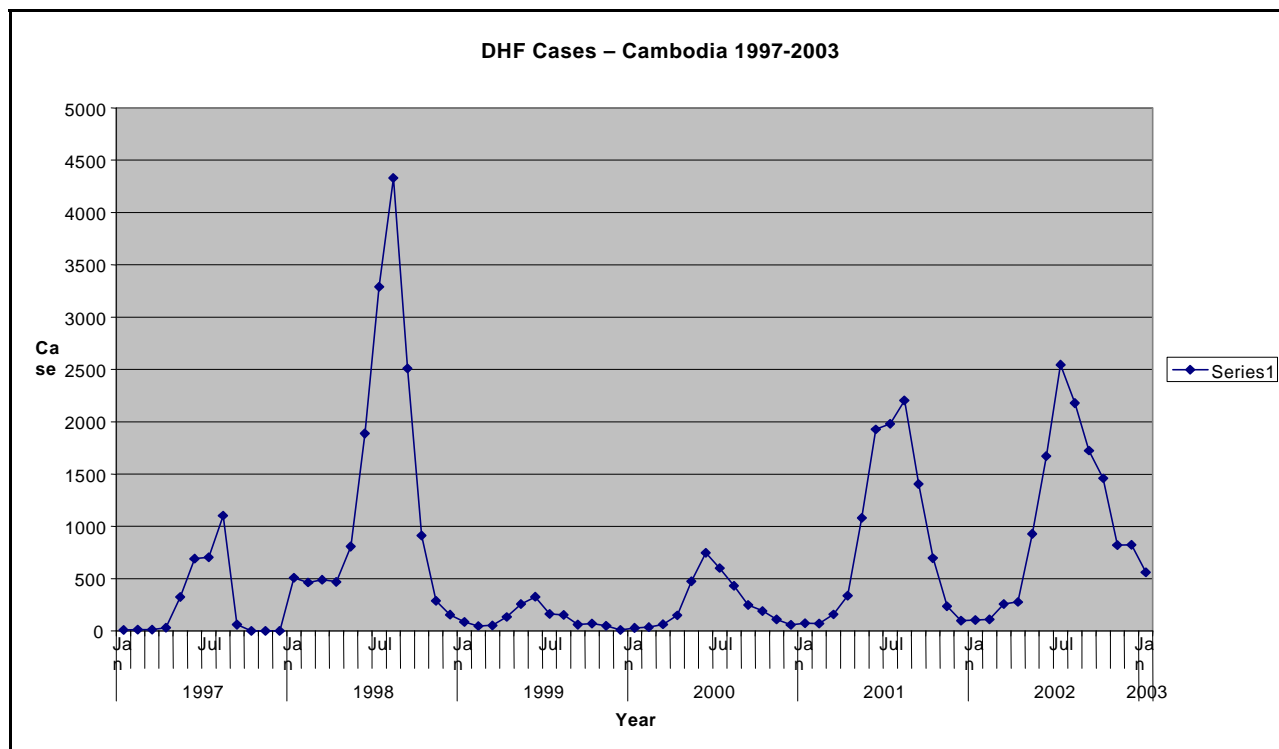
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The Situation

Since the beginning of 2003 a higher than usual level of dengue fever/dengue haemorrhagic fever (DF/DHF) cases is being reported in Cambodia. Although it is too early in the year to accurately predict the scale of the outbreak, experts at the World Health Organisation (WHO) and the National Centre for Parasitology, Entomology and Malaria Control (CNM) of the Ministry of Health acknowledge that the epidemiological pattern in 2003 is alarming. The number of cases reported during January/February in 2003 - largely from Phnom Penh and Kandal province - are significantly higher than during the same period in 1998, 2001 and 2002 (see graph below).

Dengue fever, which is a viral disease caused by a virus transmitted through the bite of mosquitoes, has seasonal and cyclical epidemic patterns; major outbreaks occur typically in three year intervals. The peak season for the disease is usually between June and August. The last major outbreak in Cambodia was in 1998 and further epidemics were expected in 2001 or 2002. In 2002, in readiness for a potential outbreak of DF/DHF, the Ministry of Health, in collaboration with WHO, launched a major campaign to control the disease.

The Cambodian Red Cross, with support from the Federation, joined the campaign by mobilising communities in clean up campaigns - in Cambodia, the ideal breeding sites for the *Aedes aegypti* mosquito is stagnant water in jars/containers, coconut shells and used tyres - and organising health education in remote areas. A major outbreak in 2002 was averted. However, there was a significant increase in the number of cases, particularly during the peak season, with 12,441 cases and 153 deaths.



Source: Ministry of Health, Cambodia

Red Cross/Red Crescent Action

Since 1998 the Cambodian Red Cross (CRC), with support from the Federation, has, on an annual basis, not only mobilised its volunteers to carry out health education and community clean up campaigns, but harnessed resources (largely through the European Commission Humanitarian Office) to procure larvicide for distribution by the Ministry of Health.

In January 2003, with the support from the Federation and in full co-ordination with WHO and CNM, a Red Cross long term strategy for prevention/preparedness has been developed and presented to all key partners. With the support from the New Zealand Red Cross, CRC is now able to take the initial steps to implement the strategy and will begin by targeting the province of Kandal.

On 14 February 2003, CRC and the International Federation attended a Ministry of Health review workshop to consider the DF/DHF situation. The meeting recognised that as the wet season is some months away, the mass application of mosquito larvicide Temephos (Abate) would not be appropriate at this stage, however, all steps should be taken to control the breeding of mosquitoes and to raise awareness among the population.

Following this initial meeting, on 18 February, a team composed of representatives from CNM, WHO and CRC travelled to Kandal province to discuss possible emergency measures with the provincial authorities and the Red Cross branch. It was agreed that the national society take the lead role in community mobilisation and in health education. In high risk villages where there are no Red Cross volunteers, the branch will recruit new volunteers to carry out this intensive campaign.

Given that early indications suggest a major DF/DHF outbreak in 2003 and that in previous years resources for community based prevention activities were largely made available somewhat late in the season, CRC will be looking for further resources to both implement its DF/DHF strategy on a wider basis and to respond to the needs of this potential epidemic. Since the WHO/CNM have in 2003 been provided with additional resources for the distribution of larvicide, Cambodian Red Cross, complementing the work of CNM, will take a lead role in health education and community clean up campaigns. Should trends in DF/DHF cases continue to rise, the Federation

would be prepared to launch an emergency appeal to support CRC in its work to reduce the impact of this potential disaster on the people of Cambodia.

For a full description of the National Society profile, see www.ifrc.org

For further details please contact :

- *Men Neary Sopheak (CRC Director of Communications) in Phnom Penh; Phone +855 23 212876; Mobile: +855 12 810854; Fax +855 23 212875; email: sopheak.MenNeary@crc.org.kh*
- *Antony Spalton (Head of Delegation); Phone +855 12 901400 (mobile); Fax +855 23 210 163; email ifrcckh01@ifrc.org*
- *Charles Eldred-Evans/Sandra Rosner, Phone +41 22 730 4320/4456 number; Fax 41 22 733 0395; email eldred@ifrc.org or rosner@ifrc.org*

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For support to or for further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>

For longer-term programmes, please refer to the Federation's Annual Appeal.

John Horekens
Director
External Relations

Simon Missiri
Head
Asia Pacific Department