



South Asia Earthquake Health Situation Report # 28

19-27 December 2005

Health Cluster partners who wish to include information here should write to health@egpak.emro.who.int copied to southasiaearthquake@who.int

Highlights

- The number of acute respiratory infection cases is still the highest among reported diseases. The pattern of a steady increase in acute respiratory infections reflects the effects of cold weather in combination with the present shelter situation.
- To date all 36 primary health care centres providing TB care in AJK are functional out of which 30 are in tents. Twenty eight diagnostic centres for TB and 70 out of 96 treatment centres are functional in NWFP. Approximately 40% of patients are lost at the follow up
- The Ministry of Health/WHO mobile health teams that are deployed in five earthquake affected districts have treated almost 10,000 persons for mental health complaints over the past two months.
- The third phase of the mass immunization campaign launched by Ministry of Health expanded immunization programme (EPI) is now completed. In the period between 19 to 25 December, 111,256 vaccinations were carried out by 514 teams for children living in camps in AJK, NWFP and Islamabad.



Two girls reading in a camp in Balakot. Source: Omid Mohit

WHO response

Project 1: Revitalization of the system for delivery of primary health care services including immunization, vitamin A supplementation, maternal, child and neonatal health services, and prevention and treatment of disabilities for earthquake affected populations in northern Pakistan. Objectives: To assist the Government of Pakistan to revitalize and establish primary health care facilities and services in the affected areas in order to mitigate the impact on health of the earthquake and ensure continuity of pre-existing programs and services.

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- The six month project of support and re-establishment of TB services in the earthquake affected districts in AJK and NWFP is ongoing. Following the earthquake more than 80% of patients were estimated to be lost to follow up since 30 out of 36 centres providing TB care in AJK and 27 out of 35 in NWFP were either completely destroyed or severely damaged with loss of drugs, lab supplies and patient records. About 18,000 cases are estimated to be present in the earthquake affected areas, half of which could be smear positive and therefore highly contagious.
- Planned activities are: to continue the revitalization of TB care services, establish a referral system, actively retrieve TB patients for treatment and engage in community organization and mobilization.

Balakot

- WHO in collaboration with the District Health Officer is mobilizing support to establish a health post in the new Turkish camp, holding approximately 600 internally displaced persons.

- The Executive District Officer will recruit 30 doctors for the Mansehra district next week. Eight of these doctors will be assigned to Balakot: six to each one of the basic health units with prefabricated structures and two to the tehsil headquarter hospital.

Mansehra

- Together with UNHCR and the Islamic Relief, WHO has assessed the availability of primary health care in the eight camps of Nawas Sharif, Kashmir Colony, Mandihar, Jaba, Sandesar, Kashtra, Marcazi Jamiat-e-Ahle Hadees, (Shohal Maidan) and Pir Abdul Quayum Shah (Ghazi Kot. WHO observed that most of the essential drugs were available in sufficient quantity, that expiration dates were valid and that drugs were properly organized.

Muzaffarabad

- District Health Officer has identified that 89 % of the camp population (i.e. 412,007 persons) has access to health care. In order to the scope and possible gaps in health care services, UNICEF and WHO in cooperation other agencies will conduct a survey of all camps within the coming week.
- The Abbas Institute of Medical Sciences (AIMS) has requested WHO support in provision of technical guidance for safe blood transfusions, safe injection procedures, antenatal care and management of the hospital pharmacy.

Rawalakot

- Access to reproductive health services in Rawalakot is constrained by the severely damaged infrastructure and the lack of existing health facilities that can provide good quality basic antenatal care with referral to comprehensive emergency obstetric care. Moreover, there is a limited availability of female personnel within the established field hospitals.
- Following a recent assessment, WHO will support the Ministry of Health with expanded outreach for reproductive health and jointly developed strategies with partners in order to identify and address inadequacies in the primary and secondary reproductive health services.

Project 2: Revitalization of hospital care services on secondary level in regions affected by the earthquake. *Objectives: To ensure that basic comprehensive health services (system and structures) are available for affected populations including treatment of medical and surgical conditions and to prevent and treat physical disabilities, provide essential and emergency obstetric care as well as newborn and child care and ensure the availability of health human resources that can provide medical services.*

Bagh

- WHO will distribute three incubators to each of the following secondary health facilities: the district Headquarter Hospital in Bagh, the tehsil Headquarter Hospital in Kahuta and the rural health centre of Dhir Kot

Muzaffarabad

- In the period between 1 to 23 December, hospital admissions have remained at a constant level according to reports from seven hospitals in Muzaffarabad. The bed occupancy in the hospitals does not exceed 30 %. In the period between 12 to 22 December no increase in outpatient consultations have been reported.

Project 3: Increase access to health care for affected communities. *Objectives: Re-establish the essential primary health care services in areas where health facilities are destroyed through the provision of temporary or semi permanent health infrastructure and equipment.*

Battagram

- Discussions and coordination for the implementation of the seven prefabricated health facilities in Battagram district are ongoing.

Mansehra

- Medications have been transferred from WHO office in Mansehra to the World Food Programme (WFP) Rubb Hall to establish a warehouse for storing drugs and medical supplies.

Project 4: Emergency health relief operations including coordination and information management.

Objectives: To establish and lead a coordination mechanism together with Ministry of Health whereby a central office and five field offices (Muzaffarabad, Mansehra, Bagh, Balakot and Rawalakot) are operational in order to assess and monitor the evolving health situation, coordinate the health response, manage, analyse and disseminate essential health information and highlight the health priorities.

- The LSS/ Suma system has been installed for UNJLC. The cooperation will continue to compile data of supplies that are in the pipeline.

Balakot

- WHO is supporting the district health authorities in the assessment of quality and organization of health care in Balakot Field Hospital in Gari Habibullah and Narah. The conditions were found satisfactory but better isolation of x-ray facilities were recommended.
- During a visit to collect surveillance information WHO observed that Gari Habibullah Field Hospital needed a register clerk for setup of a health management information system. WHO will provide technical assistance to help the hospital to collect information, an activity which can also be implemented in other facilities with similar problems.
- The head of the WHO field office in Balakot tehsil joined the cluster meetings in Mansehr district. He has introduced the field office to the cluster and will start send data to Mansehra office to include in the cluster reports. Health actors in Mansehra will contact the office in Balakot for any issue regarding health in Balakot tehsil.

Mansehra

- The number of partners attending the health cluster meeting in Mansehra is increasing.
- WHO has visited Civil Hospital in Bafa. The hospital covers a population of about 50,000 and has a bed capacity of 20 beds. Following the assessment, WHO found a considerable need of reconstruction work for the building and improvement of the referral system.
- WHO, UNHCR and the Islamic Relief conducted a joint assessment during the period 22 to 24 December of camps in Nawas Sharif, Kashmir Colony, Mandihar, Jaba, Sandesar, Kashtra, Marcazi Jamiat-e-Ahle Hadees, (Shohal Maidan) and Pir Abdul Quayum Shah (Ghazi Kot). Some of the main findings were that the general medical ward in the district headquarter hospital is not functional and that this causes an unnecessary load on Abbotabad hospital. There is also a shortage of female doctors in the hospital and almost all pregnant women are referred to the government and NGOs hospitals.

Shangla/Kohistan

- While evaluating the feasibility of expanding its activities to Shangla and Kohistan, a WHO team conducted several visits to these areas.
- Shangla consists of 28 union councils out of which 11 are considered as earthquake affected. There are three main hospitals in the district, none of them are yet enrolled in the disease early warning system (DEWS).
- Kohistan is considered as a restricted area and the Beteria camp, situated eight kilometres from Bisham, is closed for UN-staff. According to UNHCR there are approximately 510 families with 5,016 people living in the camp.
- Executive district health officers are present in both Shangla and Kohistan
- UNHCR will share information with WHO headquarter in Islamabad and try to involve other NGO's when permission is given to open up the area for travel.

Project 5: Disease Surveillance and Early Warning System. *Objectives: To detect, investigate and respond to disease outbreaks in order to reduce morbidity and mortality due to epidemic prone diseases and provide the operational and technical support to Ministry of Health to set up and sustain an early warning surveillance system in all the affected areas as well as the local capacity to enter, process and analyse the epidemiological data and provide a prompt response to any outbreak.*

- The total number of consultations reported has increased by 11% from last week to this week (13448 to 14915 respectively). This reflects the increase in the number of reporting sites from 18 to 21.
- The number of acute respiratory infection cases is the highest for the reported diseases. The pattern shows a steady increase in acute respiratory infections which reflects the effects of cold weather in combination with the shelter situation. The diseases in this category include simple acute respiratory infections, like common cough and cold, and pneumonias.
- The weekly disease pattern shows that the proportion of bloody and watery diarrhea cases is becoming stable. The number of cases has consistently been increasing for the last three weeks.
- Six cases of suspected hepatitis have been reported this week. WHO is coordinating public health measures with NGOs and other UN agencies for provision of clean water and other activities to help rehabilitate the village.
- The increasing number of watery diarrhea and acute jaundice syndrome reflects the poor hygienic and unsafe drinking water in the affected population.

Balakot

- During the period 17 to 23 December, weekly surveillance reports were received from all the 18 sites.
- On 18 December one case of clinically confirmed measles was reported by the tehsil headquarter hospital.
- The most common communicable diseases reported were acute respiratory tract infections (26%), acute diarrhoea (13%), undifferentiated fever (13%) and bloody diarrhoea (2%).

Battagram

- Two cases of clinical measles (four years and seven years old girls) were found in Landain village of Battagram. However, the team evaluated vaccination coverage in the latest mass immunization campaign and found it to be >95 %.

Mansehra

- This week 90% of the reporting sites submitted their surveillance forms on time.
- Current main health concerns are: acute respiratory infections, scabies, diarrhoeal illnesses and post-trauma injuries.
- One case of meningitis and one case of acute flaccid paralysis (AFP) have been investigated in the past week. The meningitis case was diagnosed as staphylococcus positive and the sample of the AFP case is still pending.

Muzaffarabad

- Twenty three disease surveillance sites returned surveillance reports during the period 10 December - 16 December, reporting 16132 consultations and 1 death.
- The most common communicable diseases reported were acute lower respiratory tract infections (8%), acute watery diarrhoea (4%), unexplained fever (1%) and bloody diarrhoea (1%). The number of consultations dealing with injuries and wounds (12%) remained high.
- One fatal case of acute respiratory infection was reported from Humanity First Germany. The ten months old female from Old University camp in Muzaffarabad, already in a very poor condition at time of consultation, expired before she could be admitted to hospital.

- One suspected case of measles, an 18 months old female from Lamnian, was reported on 22 December from MSF-Holland and transferred to MASH hospital. Contact tracing and active case finding in the affected area has been initiated.

Project 6: Environmental Health Response. *Objectives: To improve the environmental health condition of affected populations and health facilities in order to reduce environment related diseases and deaths. To provide technical advice, partner on activities and strengthen the link between disease surveillance, focused environmental health interventions and outbreak prevention.*

Bagh

- Thirty five water samples have been taken from Lariyan in Bagh Teshil, close to Kharal Abassian following the reports of 16 suspected acute jaundice syndrome cases in this area. The samples were taken from three springs, one water tap and 31 households and sent to National Institute of Health in Islamabad. Results are pending.

Balakot

- Some 150 medical waste disposal boxes have been distributed to health facilities by WHO. Ten 250 gallon tanks are being filled daily by WHO from a water source provided by Oxfam for nearby spontaneous camps and villages with broken water supply.

Battagram

- WHO is currently investigating the feasibility of two options to solve the water shortage at the Cuban field hospital Thakot. The first would include collaboration with the German Red Cross to ensure water provision three days a week. The second would consist of a 1100 m pipeline that would connect the hospital to the main water supply of the city.
- In response to an assessment made by the French Red Cross (FRC), WHO conducted a visit to Kharrari where the FRC has installed a temporary basic health unit. The basic health unit was not supplied by any water source and WHO sketched the layout of a potential water system. Action Against Hunger (AAH) which is responsible for water supply and sanitation in the near by Banya camp was contacted and the NGO showed interest in carrying out the implementation of the water scheme. The basic health unit in Kharrari is now supplied with a submersible pump.
- WHO is planning to have a one day course on the topic "Environmental health in emergencies" together with Oxfam, UNICEF and the IFRC to health and hygiene promoters and lady health workers. The course will be conducted on 2 January 2006.

Mansehra

- WHO visited five camps in Sansesar, Mundhar, Dharyal, Jabba and Kashmir to assess the environmental health conditions. The camps had water supply and latrines but hygiene was not satisfactory. In addition to promotion of hygiene WHO brought recommendations on how to conduct comprehensive testing of water before chlorination.

Muzaffarabad

- The local Government Rural Development Department has agreed to conduct a rapid technical assessment focusing on health facilities of 50 villages in Muzaffarabad district with the support of WHO.
- The construction of the incinerator in Abbas Institute of Medical Sciences (AIMS) hospital has now been completed under the supervision of WHO. WHO has also completed a temporary fence of municipal waste collection site in the hospital.

Project 7: Coordination, policy formulation and provision of mental health and psychosocial actions.
Objective: To provide access to emergency related mental health care on all levels of care and ensure interagency coordination and quality assurance in the area of mental health and psychological support.

Mental health service provision up till 24 December:

S. No	Identification/ Diagnosis	MANSEHRA	BAGH	RAWALAKOT	MUZAFFAR-ABAD	BALAKOT	BATTAGRAM
1	Depression	458	520	473	1206	770	77
2	PTSD	60	104	73	471	352	161
3	Anxiety	342	109	451	502	568	18
4	Adjustment problems	26	61		124	57	
5	Epilepsy	49	32	71	69	17	4
6	Acute stress reaction	117	26	34	302	98	
7	Bipolar disorder	13	35	61	74	25	1
8	Phobias	4	37	1	60	85	
9	Schizophrenia	20	39	56	31	22	
10	Mental retardation	9	42	47	15	15	2
11	Behavioral disturbances	12	67		95	55	1
12	Conversion/dissociation	23	115	16	112	86	
13	Acute psychotic disorder		33	7		161	
14	Substance Abuse					4	
15	Nocturnal Enuresis					15	2
16	Deliberate Self Harm			2			
17	Postnatal Psychosis						1
18	Somatization Disorder			16			
19	ADHD	4					
20	Dementia	3					
21	OCD	1					
22	Mania	2					
23	Admitted		38	5		5	
24	Referred	14	6				
25	Known psychiatric patients	36	105	16	153	88	
	Total	1193	1364	1321	3214	2423	265
	Males	482	570	551	1485	862	216
	Females	439	523	601	1166	882	44
	Children	173	271	169	563	679	5

One third of the consultations for mental health have been found to suffer from depression. Another third presented with either anxiety or acute stress reaction. The ratio of females to males is nearly the same. It is worth noting that between 13% -20% of the cases were children except in Balakot where it was 28 % and , 21 % in Battagram.

Bagh

- Ministry of Health and WHO are carrying out an impact assessment on the mental health activities that has been provided by the teams operating in the district.

Balakot

- Approximately 500 consultations have been reported this week. Main causes of consultation are anxiety, depression and phobias. Some 22 cases were referred to Peshawar for psychiatric admission.
- The first session of a three months training program on management of mental illnesses at primary health care level, was conducted in Balakot on 23 December. The training is facilitated by IMC in assistance of WHO. Sixteen primary health care providers participated including staff from the tehsil headquarter hospital, basic health units, IMC and Spanish Red Cross.

Battagram

- The four member team of psychiatrists and psychologists in Battagram continues to carry out activities throughout the whole district. During this week the focus was on training health workers and medical staff. In total there has been three workshops dedicated to medical staff on district level.
- One of the workshops was dedicated to lady health visitors and female community leaders. The objective was to supply them with basic tools to help them provide better services.

Islamabad

- On the 19 December WHO conducted a workshop in Islamabad on mental health for media. The topic was drug abuse in the earthquake affected population. There is a need to highlight the risk of drug abuse and prevent its increase among adults and adolescents living in camps.

Mansehra

- The mental health team has conducted counselling of 94 individuals in Havellian camp. These counselling's were done in different sessions by groups of 15 people by one psychologist and one psychiatrist.