

REPORT DISEASE AND HEALTH HAZARD NEWS OF INTEREST ALONG THE BORDER

May 26 - June 1, 2022

WEEKLY EVENTS

- On May 30, 2022, the Than Lwin Times reported that in Mon State, Myanmar a 5-year-old boy had symptoms similar to monkeypox with rashes and blisters on his torso and limbs. He was admitted to Theinzayat District Hospital, diagnosed with hand, foot, mouth disease (HFMD), and has since recovered.
- On May 29, 2022, the Thai Food and Drug Administration (FDA) cautioned people not to consume coffee products that contain ingredients that claim to treat erectile dysfunction and sexual performance, according to information from the Singapore Health Science Agency. It was found that the Prime Kopi Pejuang 3-in-1 brand, sold online, contains a level of Tadalafil that is more than 10 times higher than the normal dose. The FDA reported that it is not registered in Thailand, but is distributed through online channels. An order was issued to suspend sales immediately.
- On June 9, 2022, marijuana will be declassified as a controlled substance according to the signing of a Memorandum of Understanding on Cooperation for the Use of Cannabis and Hemp for medical purposes based on research of the Ministry of Public Health and the Ministry of Agriculture and Cooperatives, Thailand on May 19, 2022.

BE CAREFUL OF HAND, FOOT, AND MOUTH DISEASE DURING THE RAINY SEASON

There has been an increase in the number of patients reported with hand, foot and mouth disease during the late summer and early rainy season. The highest risk group consisted of children under 5 years of age. The Division of Epidemiology, Department of Disease Control, confirmed 865 cases from January 1 to May 23, 2022. Infants one year old and younger accounted for 29.02% of all cases, while children two years old and younger followed by children three years old and younger made up 19.88% and 9.83% of cases, respectively. Outbreaks tended to occur in nurseries, kindergartens and crowded residences. When an outbreak lasts a long time, the disease can spread to older children and adolescents, and the severity of the disease may increase.

The disease is spread through direct contact with contaminated mucus, saliva, rashes, fluid from blisters or scabs, and feces of an infected patient. It can also be spread through indirect contact, such as touching contaminated objects and surfaces, like a child's toy. Symptoms can occur about 3-5 days after infection. Some patients may have fever, or small blisters on their palms and soles of their feet. Some may experience mouth sores on the soft palate, bulges of the cheeks, or tongue. If the symptoms worsen (high fever, convulsion, shortness of breath, and vomiting), patients should be taken to see a doctor immediately, because if they are infected with a severe type of hand, foot and mouth disease, it can be fatal.



RECOMMENDATIONS FOR OFFICIALS

Health volunteers should educate the community about the disease symptoms and transmission, as well as prevention practices like proper personal hygiene. Schools and childcare centers should be notified if a child is reported to have the disease, and separate them from other children as soon as possible. Parents should take their sick children to see a doctor immediately and to keep them separate from other children until they recover. Personal belongings of the infected children should also be separated from healthy children. They should refrain from going to crowded places in the community. These practices can prevent hand, foot and mouth disease, COVID-19 and other respiratory diseases.

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Multisectoral Capacity Development Program for Public Health Emergency Detection and Response in Border Areas

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SOURCES

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