

REPORT DISEASE AND HEALTH HAZARD NEWS OF INTEREST ALONG THE BORDER

February 8 - 14, 2024

WEEKLY EVENTS

- On February 12, 2024, the Ministry of Health of Cambodia reported the results of laboratory tests conducted by the National Institute of Public Health. A case involving a 16-year-old boy, residing in Kratie province, located in the northeastern part of Cambodia, has been confirmed to be infected with the H5N1 avian influenza virus. This marks the fourth case of the disease in 2024. The patient did not exhibit respiratory symptoms but is the older brother of a 9-year-old boy who succumbed to the avian influenza virus on February 8. Currently, health officials are investigating the source of the virus and conducting additional searches for more cases.
- On February 10, 2024, Bluedot Event Alerts reported the discovery of a case of bubonic plague in the state of Oregon, United States. This marks the first case in nearly a decade in the state. Initial disease investigations suggest that the patient contracted the infection from domesticated animals at home. The diagnosed patient received prompt diagnosis and treatment from the early stages of the disease, reducing the risk of its spread to the community. Regarding bubonic plague in Oregon, there have been only nine cases reported since 1995, with no reported fatalities. Currently, health officials are conducting disease investigations and searching for individuals who may have had contact with the patient, and providing guidance to the public to avoid contact with wild animals, particularly those with signs of illness or deceased. Furthermore, people are advised not to feed wild animals. For pet owners, it is recommended to keep pets away from wildlife to prevent the transmission of plague.

RAPID DIAGNOSIS OF FILARIASIS HELPS REDUCE THE SPREAD

The surveillance outbreak report in Thailand between February 5-11, 2024, stated that on January 25-26, health agencies began active surveillance of a group of 338 Burmese migrant workers for filariasis. The individuals worked at three factories in the Bang Phli district, Samut Prakan province. Initially, no symptoms of the disease were found in this group. Currently, the problem of filariasis has significantly decreased and is no longer a public health issue in the country. However, sporadic cases are still found in border provinces.

The World Health Organization aimed to eliminate filariasis from Thailand by 2020. Despite this, according to data from the Division of Epidemiology, Department of Disease Control, there were 30 cases of filariasis patients in the years 2022-2024, with one case reported in 2024. Filariasis is caused by parasitic roundworms that live in the lymphatic system of infected people. Although the disease is not directly transmitted from person to person, it is transmitted through mosquitoes. The initial symptoms may include fever and inflammation of the lymph nodes and lymphatic vessels in the kidneys, legs, or scrotum. If left untreated, the affected organs will permanently swell, and the skin will become thick and rough, leading to the characteristic appearance of an elephant. Current measures by the Department of Disease Control include active surveillance through blood sampling in the risk group to quickly detect and cover patients. If an infected individual is found, immediate treatment is administered to reduce the number of larvae and prevent further transmission through mosquitoes, thereby preventing the spread of the disease to the community.



RECOMMENDATIONS FOR OFFICIALS

The Provincial Health Office and local authorities should provide public information to the residents about basic knowledge of filariasis. This includes information about the causes of the disease, modes of transmission, initial symptoms, and self-protection measures against the disease, which is transmitted by mosquitoes. Protective measures involve avoiding mosquito bites by sleeping in mosquito nets or sealed rooms to prevent mosquito bites, applying mosquito repellent, eliminating mosquito breeding sites, such as stagnant water and areas around waste disposal sites, removing weeds and water plants in water sources, and improving the environmental conditions in and around living areas to allow good air circulation.

Health officials should conduct preliminary screenings, particularly in areas with a large number of migrant workers to quickly detect patients in the early stages. If patients are found, immediate treatment should be provided to prevent the spread of the disease. For residents in outbreak areas, they may request preventive medication by contacting the Ministry of Public Health-affiliated hospitals near their homes.

INFORMATION COLLECTED AND ANALYZED BY

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

Office of International Cooperation, Department of Disease Control, Ministry of Public Health, Thailand
Supported by the Thailand MOPH - US CDC Collaboration on Public Health

CONTACT
oic.ddc@gmail.com
02-5903832
www.ddc.go.th/oic

Sources

- <https://www.hfocus.org/content/2018/09/16341>
- <https://www.tropmedhospital.com/knowledge/lymphatic-filariasis.html>
- https://www.xinhuaathai.com/inter/418138_20240212
- <https://www.orientjornal.pt/a-pesto-bubonica-descoberta-pela-primeira-vez-no-oregon-ha-uma-decada-veio-de-um-gato/>
- Image courtesy of:
<https://www.facebook.com/supathasuwannakit/photos/a.206230839915718/1269461543592637/?type=3>
- Image courtesy of: <https://www.nahom.go.th/news/กิจกรรมรณรงค์กำจัดแหล่งเพาะพันธุ์ยุงลาย>