

REPORT DISEASE AND HEALTH HAZARD NEWS OF INTEREST ALONG THE BORDER

February 29 - March 6, 2024

WEEKLY EVENTS

- On February 27, 2024, the World Health Organization reported two Nipah virus deaths from in Dhaka, Bangladesh. Laboratory test results confirmed Nipah virus infection in both deceased individuals. The first case was a 38-year-old male, and the second case was a 3-year-old female. They were from different districts. Both deceased individuals had a history of consuming fresh date palm sap, which is harvested between December and April each year during the date palm season. Currently, contact tracing and disease investigations are underway.
- On March 4, 2024, the Public Health Office of Sukhuma District, Champasak Province, Lao People's Democratic Republic, announced that there were three human cases of anthrax from consuming dead cattle of unspecified causes. Currently, details are being investigated, including tracing contacts and investigating the cause of the disease. However, the Agricultural and Forestry Office of Sukhuma District has urgently implemented measures to control the outbreak. They have announced a ban on buying, selling, or moving cattle and buffaloes in and out of Sukhuma District. Slaughtering of cattle and buffaloes in all slaughterhouses is suspended. Consumption of animals that died of unknown causes is prohibited. Owners of cattle and buffaloes must observe the health conditions of their animals. If there are any abnormal symptoms, they should separate them from the herd and immediately notify the District Livestock Office for treatment. Relevant agencies in Ubon Ratchathani Province have also prepared intensified measures to monitor the disease along the border.

THAILAND IS COMMITTED TO ELIMINATING TUBERCULOSIS BY 2035

The Department of Disease Control's Week 9 Disease Surveillance Report (February 26 to March 3, 2024) reported the confirmation of multiple extensively drug-resistant tuberculosis (XDR-TB) cases. Among the three identified cases, one is a 22-year-old female of Myanmar nationality. XDR-TB poses significant health, societal, and economic impacts on the country, particularly due to its complex treatment regimen and higher costs compared to standard TB treatment. XDR-TB can spread to other people through coughing, sneezing, and inhaling contaminated aerosolized droplets from the respiratory system of infected people, thus increasing the likelihood of community transmission. Factors contributing to the persistence of XDR-TB in Thailand include the influx of infected undocumented migrants and travelers and the prevalence of HIV/AIDS, which lowers patients' immunity, making them susceptible to other infections.

On September 22, 2023, the Department of Disease Control represented Thailand at the high-level United Nations General Assembly to discuss the fight against tuberculosis. Thailand is committed to eliminating tuberculosis by the year 2035, transitioning from a high-burden country to a low-burden one. The use of Artificial Intelligence (AI) in interpreting chest X-ray results for early TB patient screening has been effective. Abnormalities detected in chest X-rays are immediately followed by sputum collection for rapid and accurate diagnosis, facilitating early patient detection and treatment initiation, thereby reducing the risk of disease transmission to the community. Additionally, treatment guidelines have been adjusted according to the World Health Organization's recommendations to provide convenience for both healthcare providers and TB patients. Collaboration among healthcare personnel, the general public, and TB patients is essential to achieve Thailand's goal of tuberculosis elimination by 2035.



RECOMMENDATIONS FOR OFFICIALS

Public health officials and local authorities should coordinate to provide information to households, focusing on tuberculosis patients and family members, about the causes of drug-resistant tuberculosis. There should be training for healthcare personnel, as well as community health volunteers, in monitoring drug-resistant tuberculosis patients in the community. If a case is encountered, they should follow the "Guidelines for the Management of Latent Tuberculosis Infection, B.E. 2566," prepared by the Division of Tuberculosis, Department of Disease Control, Ministry of Public Health.

For households with tuberculosis patients, health officials should conduct home visits to encourage patients to take medication regularly according to the treatment plan and to see a doctor for follow-up appointments to monitor treatment progress. This is to prevent the spread of the disease to the community and provide knowledge about proper behavior for household members living with patients. Wearing masks remains essential, especially when patients enter public community spaces, and if household or community members show symptoms of tuberculosis, they should immediately notify local public health authorities.

INFORMATION COLLECTED AND ANALYZED BY

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

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Sources

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- https://today.line.me/th/v2/article/XY7eJql?utm_source=lineshare
- Information courtesy of: Office of Agriculture and Forestry, Sukhuma City, Champasak, Lao PDR, on March 4, 2024.
- Image courtesy of: <https://maesot.moph.go.th/photo/gallery/803>