

REPORT DISEASE AND HEALTH HAZARD NEWS OF INTEREST ALONG THE BORDER

July 18 - 24, 2024

WEEKLY EVENTS

- On July 19, 2024, the Office of International Cooperation, Department of Disease Control organized a workshop on international public health coordination (Thailand-Cambodia) for avian influenza in Surin Province. The purpose of this meeting was to enhance the international disease prevention and control network at the provincial level and to develop guidelines for coordination in the event of an outbreak along the border areas of Surin and Oddar Meanchey. The meeting summarized the future direction of operations, focusing on the following main issues: 1) International coordination should involve additional agencies related to avian influenza prevention; 2) The primary coordinator should be clearly designated and capable of effective implementation; 3) Use the Telegram program for communication and notification in case of outbreaks or to report weekly/monthly disease situations; 4) Develop and train risk assessment for diseases and health threats along the border; 5) Support the mechanism for cooperation in disease prevention and control between twin cities at the international level.
- According to Bluedot Event Alerts on July 21, 2024, the Ministry of Health in India confirmed a death from Nipah virus infection. The deceased was a 14-year-old male from Kerala, located in the southwestern part of India. He died from acute encephalitis. A total of 330 individuals who had close contact with the deceased have been quarantined and tested for the virus. Among these, 101 were identified as high-risk contacts. Additionally, a 68-year-old male patient with symptoms similar to Nipah virus infection has been admitted to an intensive care unit at a hospital. Investigation has revealed no connection to the previously identified risk group. Laboratory results are pending. Public health authorities have deployed mobile laboratory units to search for infected individuals in the area.

MELIOIDOSIS: WATCH OUT DURING THE RAINY SEASON

Data from the Department of Disease Control's Week 28-29 Surveillance Reports (July 8 - 21, 2023) revealed five deaths from melioidosis: two in Buriram Province, and one each in Chachoengsao, Mukdahan, and Chonburi Provinces. Most of the deceased were farmers and had high-risk behaviors, such as not wearing shoes and walking through muddy water. Over 50% of the deceased had diabetes as an underlying condition. Other underlying conditions included asthma, heart disease, and tonsil cancer. According to the Disease and Health Hazard Surveillance Report by the Department of Disease Control for July 2024, as of June 29, there have been 1,510 reported cases of melioidosis, with 39 fatalities. The majority of patients are aged 45 and above, with the highest number of cases reported in the northeastern region. Occupations at high risk for this disease include agriculture and jobs involving frequent exposure to water and mud. Individuals with underlying conditions such as diabetes, chronic kidney failure, and weakened immune systems are at higher risk of death.

It is expected that the number of cases will increase from July onwards due to the rainy season. Melioidosis is caused by the bacterium *Burkholderia pseudomallei*, which can enter the body through three routes: through the skin via wounds, through the respiratory system from dust, soil, or water contaminated with the bacterium, and through the digestive system from consuming contaminated food or water. The incubation period is about 1 to 21 days, though it can be longer in some cases. General symptoms include fever and abscesses on the skin or lymph nodes in the neck. Infections can also occur in internal organs such as the lungs, liver, spleen, and kidneys, and can lead to severe bloodstream infections, which can be fatal if not treated promptly.

Symptoms and severity of the disease depend on the patient's immune system and the bacterial dose. Those with underlying conditions are at increased risk of complications and death. The disease often starts with fever, similar to other common illnesses, making it difficult to diagnose. Laboratory tests are needed for confirmation. Therefore, individuals with symptoms, risk behaviors, and underlying conditions should see a doctor immediately.



RECOMMENDATIONS FOR OFFICIALS




Public health officers and local organizations should raise awareness melioidosis during the rainy season. They should provide information including its causes, transmission, initial symptoms, and preventive measures. Residents are advised to avoid walking through muddy water or direct contact with soil and water. If necessary, they should wear boots, rubber gloves, and long pants or protective suits. After contact with soil and water, individuals should clean their bodies with soap and clean water immediately. It is also recommended to eat properly cooked food and drink clean or boiled water. Residents should avoid exposure to dust, wind, and rain. Those experiencing high fever and who have a history of contact with soil and water, especially farmers and individuals with diabetes or other underlying conditions, should see a doctor immediately.

INFORMATION COLLECTED AND ANALYZED BY

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

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Supported by the Thailand MOPH - US CDC Collaboration on Public Health

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