

REPORT DISEASE AND HEALTH HAZARD NEWS OF INTEREST ALONG THE BORDER

September 26 - October 2, 2024

WEEKLY EVENTS

- On September 30, 2024, the Ministry of Public Health reported an outbreak of H5N1 avian influenza in the United States. Data shows that the disease has continued to spread among poultry and dairy cattle up to the present. On September 27, there was news of an investigation involving a person who had been in contact with a confirmed H5N1 patient, as well as six healthcare workers at a hospital in Missouri where the patient was treated earlier in September 2024. These healthcare workers showed mild respiratory symptoms, and most have since recovered. Samples were collected from one of the symptomatic healthcare workers, but no viral genetic material was detected. Blood test results to check for H5N1 antibodies are currently pending from the U.S. Centers for Disease Control for further investigation. The Ministry of Public Health has urged the public not to panic, as Thailand has had a strong surveillance system for such diseases in both animals and humans since 2006, there have been no reported cases of avian influenza in Thailand.
- On September 26, 2024, the Ministry of Public Health held a virtual meeting to prepare medical and public health responses for flooding, storms, and landslides. The meeting included the Division of Public Health Emergency Management and provincial health offices in all flood-affected areas, where plans were made to assist areas where water levels are beginning to recede. The post-flood recovery plan includes improving environmental sanitation, assessing the mental health of community residents, monitoring for disease outbreaks, and surveying and restoring damaged health service facilities to normal operations as soon as possible. Provincial health offices and hospitals have been instructed to stockpile medicines and medical supplies for at least three months, based on the risk level of the affected areas. They are also required to report their medical and public health resource inventory and usage rates to central authorities every Friday.

SILICOSIS CANNOT BE CURED BUT IT CAN BE PREVENTED

According to the Week 39 Surveillance Report from the Department of Disease Control (September 23 - 29, 2024), a health check of factory workers in Chonburi Province revealed six cases of abnormal chest X-rays, diagnosed as silicosis. Among the cases, three individuals were Thai nationals and three were Cambodian nationals, with no symptoms observed in any cases. Both male and female workers were affected, aged between 33 and 57 years, with work experience in the factory ranging from 1 to 28 years. Their job roles included sandblasting, metal polishing, mixing paint, and painting. All of them resided within the factory premises. The cases are currently under investigation.

Silicosis is a respiratory disease caused by inhaling tiny particles of crystalline silica or sandstone dust, which leads to fibrosis of the lung tissue and reduced lung capacity. This disease is incurable. In its early stages, it may show no symptoms but can be detected through chest X-rays. Symptom onset varies for each individual; some may experience symptoms within a few weeks after silica exposure, while others may develop symptoms after 5-10 years or even decades. Early symptoms often include a chronic cough, phlegm, fatigue, and shortness of breath. As the disease progresses, it may lead to other symptoms like fatigue, weight loss, chest pain, sudden fever, leg swelling, cyanosis (blue lips), and night sweats.

Silicosis is a type of pneumoconiosis caused by inhaling silica crystals commonly found in sand, rock, or certain minerals. Over years of exposure, inhaled silica crystals accumulate in the respiratory tract, causing lung tissue damage, fibrosis, and scarring. Thickened scar tissue can impair lung function, resulting in various respiratory abnormalities, respiratory failure, and potentially death.

Occupations at risk include industrial sectors such as cement mixing, building construction, tunnel excavation, sandstone cutting and polishing, glass melting, ceramics glazing, and ceramic surface polishing. To prevent silicosis, workers in relevant industries should wear respiratory protection equipment that filters rock dust throughout their work shift. Reducing risk behaviors such as smoking, is also recommended. Annual health screenings, including chest X-rays and pulmonary function tests, can help reduce risk and detect the disease in its early stages.

For those diagnosed with silicosis, regular medical appointments are essential to receive ongoing treatment and lung rehabilitation, which helps alleviate symptoms and prevent complications. While the disease is incurable, following proper health practices can help patients live longer.



RECOMMENDATIONS FOR OFFICIALS

Officials should inform subdistrict health volunteers, public health officers, and relevant local organizations to work together to raise awareness and provide education on silicosis to residents, particularly in areas with industrial factories that may produce dust linked to the disease. Local organizations responsible for the area should organize educational activities for both factory managers, workers, and nearby residents on self-protection, proper environmental arrangements around the factory and worker housing, and recommend that residents regularly clean their homes to keep them dust-free. For factory workers, management should provide annual health check-ups, especially chest X-rays, and residents nearby should also have annual health screenings at local health service centers.

Those responsible for supervising industrial factories in the area should strictly monitor and assess the operations of these factories to ensure compliance with regulations to maintain a safe working environment, protecting both workers and the surrounding community from potential harm.

INFORMATION COLLECTED AND ANALYZED BY

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

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