

Media centre

Madagascar's plague epidemic is slowing, but we must sustain the response

News release

27 NOVEMBER 2017 | ANTANANARIVO, MADAGASCAR - Madagascar's unprecedented outbreak of pneumonic plague is slowing down but the response must be sustained, WHO cautioned on Monday (November 27).

"The worst of the outbreak is over, but we must stand ready to detect and respond to new infections until the end of the plague season in April 2018," said WHO Director-General Dr Tedros Adhanom Ghebreyesus.

According to data published by the Madagascar Ministry of Health, the number of new infections has been in steady decline in recent weeks. This indicates that measures taken to contain the outbreak have been effective, but more infections of both bubonic and pneumonic plague are expected until the end of the plague season in April 2018.

"I congratulate the Government of Madagascar for the way it has worked with partners to contain this outbreak. This is just the type of leadership needed to prevent outbreaks spiralling out of control," Dr Tedros added.

Between 1 August and 22 November, the Madagascar Ministry of Public Health reported a total 2348 cases, including 202 deaths. Nearly all identified plague patients and almost 7300 contacts were provided with treatment free of charge.

"It is a tragedy that a disease from the Middle Ages, that can be easily treated, could threaten an entire country and kill more than 200 people. There is far too little funding for plague research, prevention and preparedness, and this year thousands of people in Madagascar have suffered as a result," said Dr Peter Salama, Executive Director of the WHO Health Emergencies Programme.

Although plague is endemic to Madagascar, this outbreak is unprecedented in terms of speed and reach – occurring in non-endemic areas such as densely populated cities, with a higher proportion of pneumonic versus bubonic cases.

In response, WHO rapidly released US\$ 1.5 million in emergency funds, delivered more than 1.2 million doses of antibiotics, and trained more than 4400 people to work as 'contact tracers' to help prevent plague from spreading further in hard-hit areas.

WHO and partners are supporting the Government of Madagascar to coordinate the response, provide clinical guidance, identify and treat patients and their contacts, and strengthen exit screening at airports

and ports to reduce the risk of international spread.

More than 135 WHO and Global Outbreak Alert and Response Network (GOARN) staff have been reassigned or deployed to Madagascar to respond to the outbreak.

Ongoing support to sustain the response is required for comprehensive case finding, active contact identification and treatment, rodent and flea control, and ensuring safe and dignified burials.

WHO will continue to assist national health authorities to maintain surveillance and response capabilities and to effectively manage future outbreaks.

Note to editors

Through its Health Emergencies programme, financial support for WHO's response to the plague outbreak in Madagascar has been provided by the WHO Contingency Fund for Emergencies (CFE) and the governments of Italy, Norway and the Republic of Korea.

The International Federation of the Red Cross and Red Crescent Societies, as well as the Malagasy Red Cross, Institut Pasteur Madagascar, Médecins Sans Frontières (MSF), Medecins du Monde (MdM), the United Nations country team (including UNICEF, UNFPA, UNDP), USAID, Action Contre la Faim, the Global Outbreak Alert and Response Network (GOARN) partners, including the alumni network (EAN) of the European Programme for Intervention Epidemiology Training (EPIET), the Indian Ocean Commission (OIC), Public Health England, Robert Koch Institute, Santé Public France, and the United States Centers for Disease Control and Prevention (CDC), and other partners are actively supporting the government and health authorities in Madagascar.

WHO has provided technical and operational support in a range of areas from coordination and planning to surveillance, case management, community engagement, logistics, and more.

For more information, please contact:

Tarik Jasarevic
Mobile: +41 79 367 6214
Tel: +41 22 791 5099
Email: jasarevict@who.int

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