



# Epidemiological Highlights

Week 40 (25 September- 1 October) 2022



**World Health  
Organization**

# Highlights: COVID-19

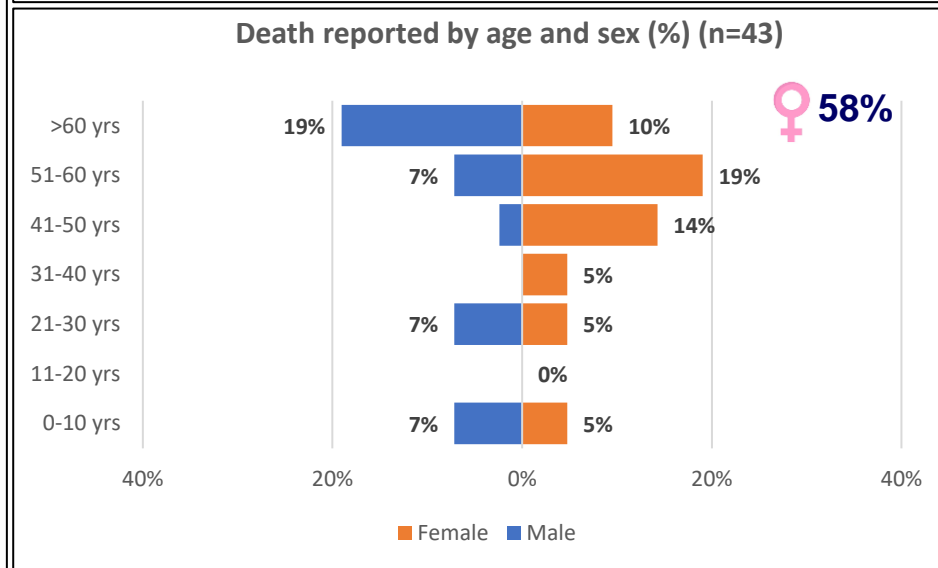
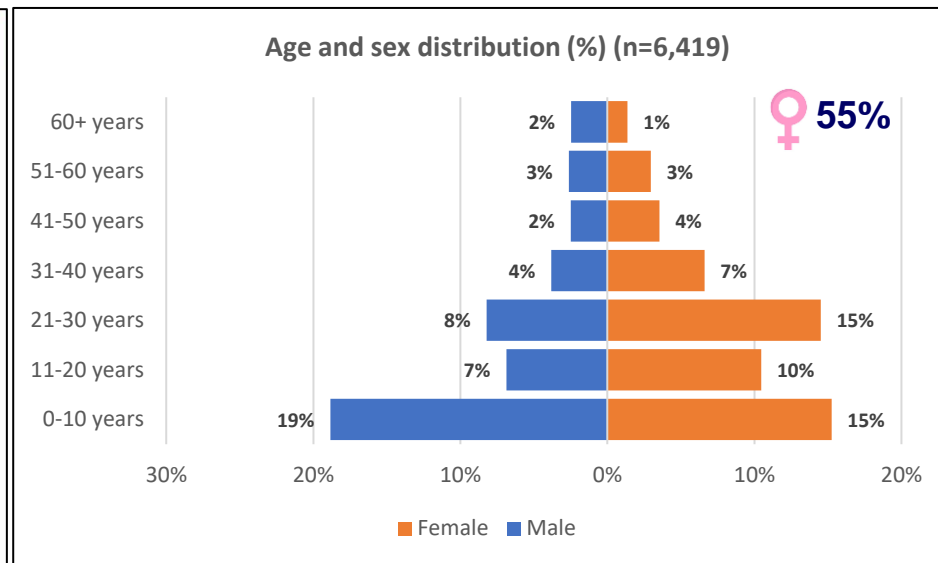
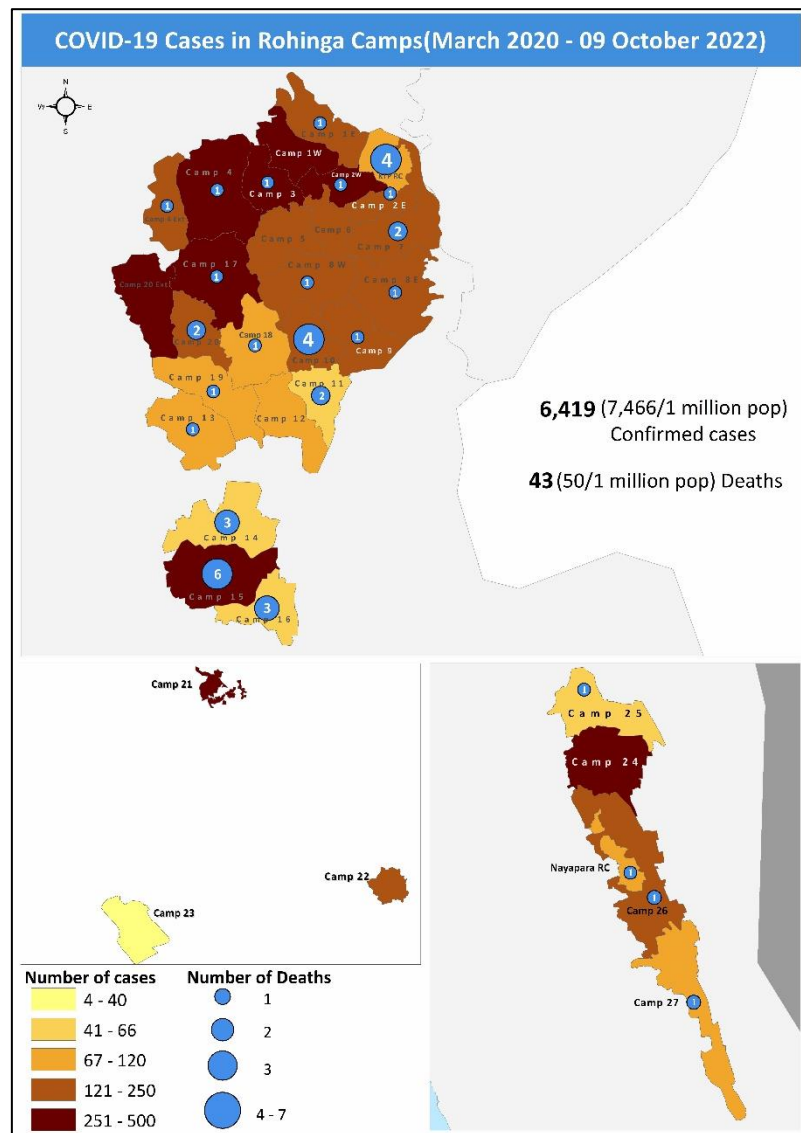
As of week 40, (3-9 Oct) 2022 there were **6,419 confirmed cases** of COVID-19 (SARS-CoV-2), out of 112,984 **samples** that had been submitted for testing. The **Total Positivity Rate (TPR)** now stands at **5.7%**

In the reporting week, 2 new confirmed cases were detected out of 462 total samples tested. This translated to a 0.4% TPR which is slightly lower than that of the previous week's 0.6%.

As of this week (week 40)

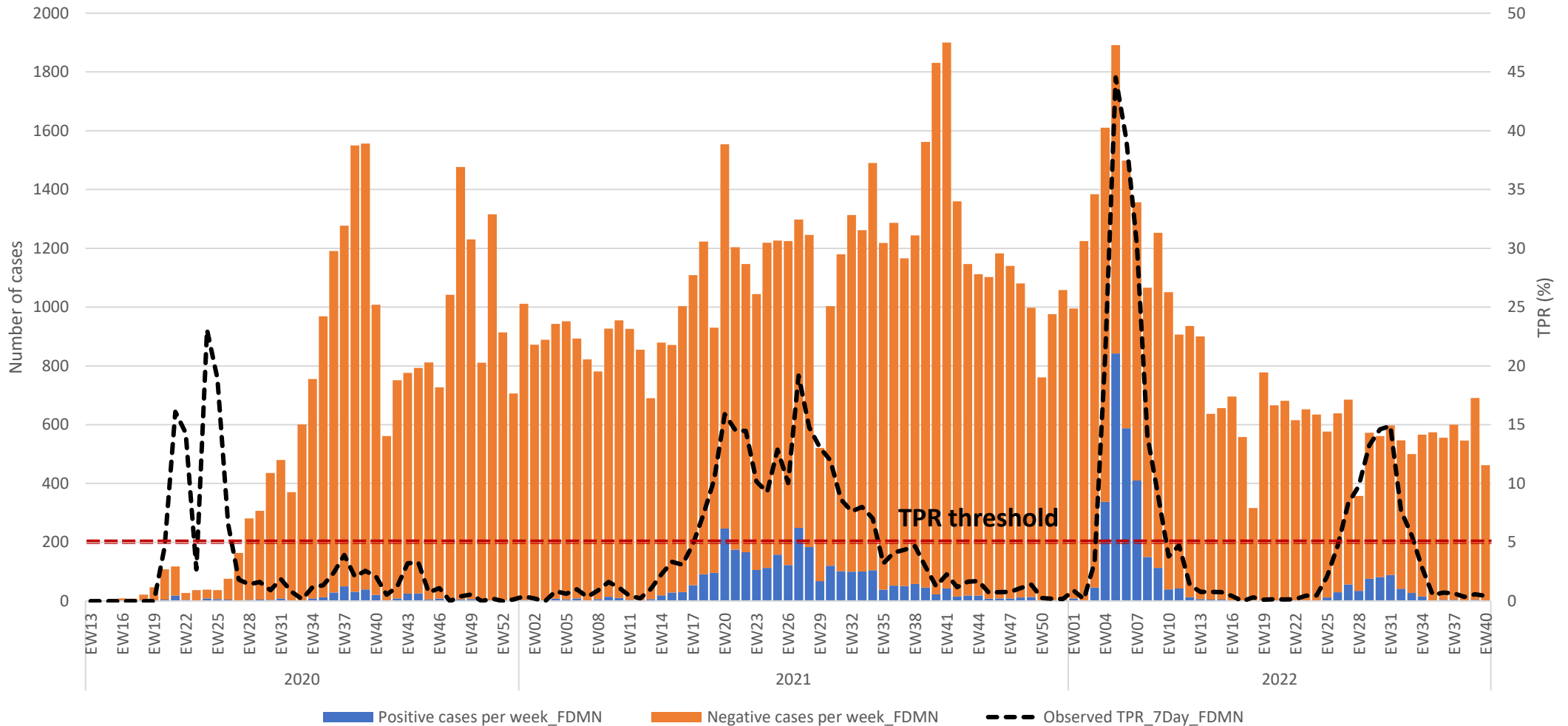
- **Median age** of tested and confirmed cases were 11 (0-120) and 20 (0-100) years respectively
- **Proportion of females** among tested and confirmed cases were 54% and 55% respectively
- **All 33 camps**, have so far reported confirmed cases since the outbreak began, while the five camps with the highest number of reported cases were; C24-478, C17-449, C2W-414, C4-396, and C3-344
- No new death was reported in this Epi week. The total confirmed COVID-19 deaths so far reported to date stands at 43 with an average **case-fatality ratio** of 0.7%
- The **weekly incidence** was 2.3 cases/1 million population in this Epi week which is slightly lower than that of the previous week's 4.7 cases/1 million population.

# Highlights: COVID-19



# Highlights: COVID-19

## Weekly observed TPR, FDMN/Rohingya Refugees, Cox's Bazar



# EWARS Reporting Updates

- Currently, a total of 169 health facilities are registered in EWARS
  - Only 142/169 weekly reports were received on time in week 40
  - Timeliness of reporting for this week was 84%
  - One hundred five (105) alerts were triggered
  - All alerts were reviewed and verified by the WHO EWARS team; this was more than the previous week (138 alerts in week 39, 2022).

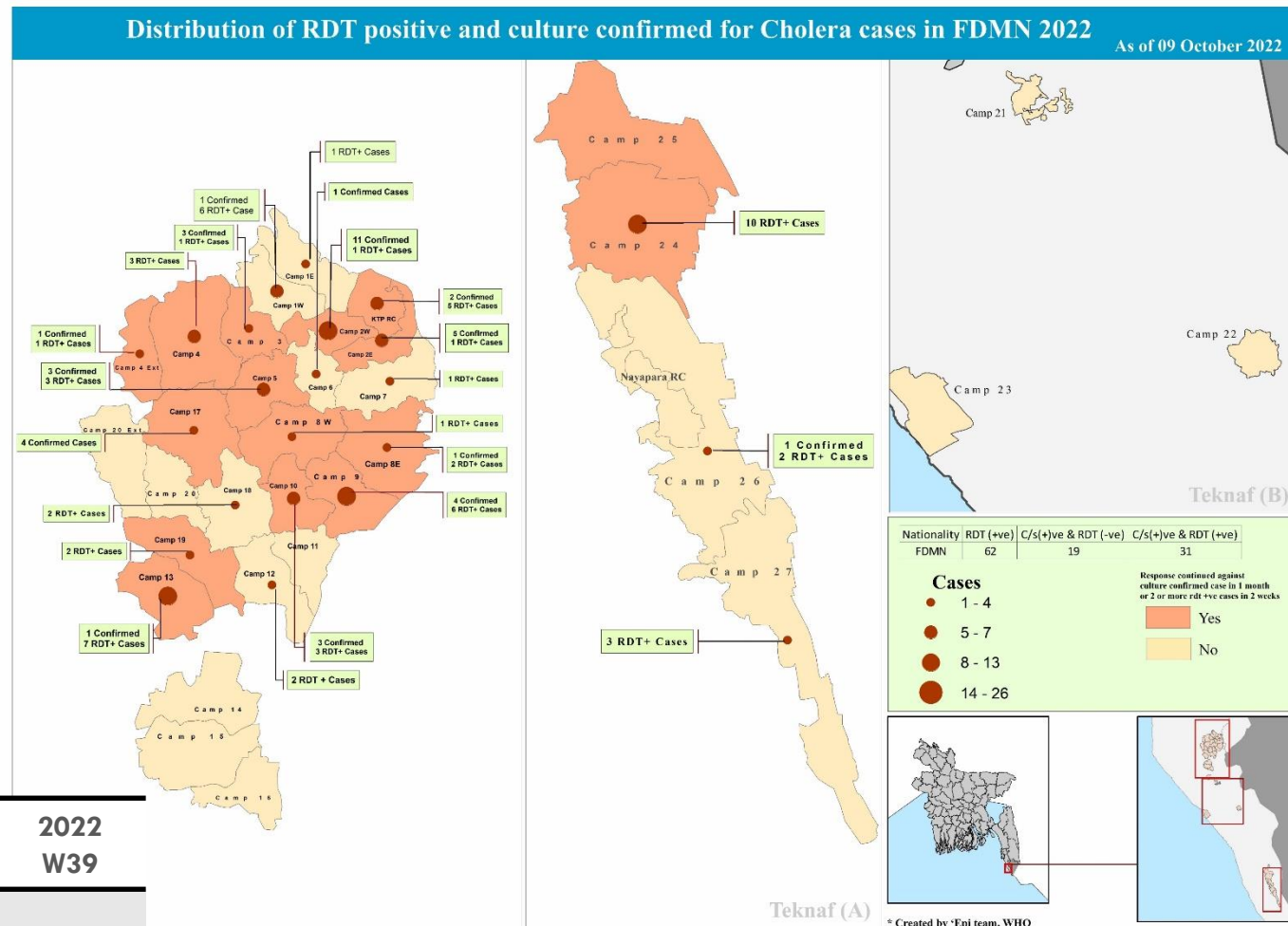
# Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (19.5%), Diarrheal Diseases (5.3%) & Injuries, and Wounds (1.5%) were the diseases and health conditions with the highest proportional morbidity in week 40.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020.
- This Epi week, one (1) new SARI death was reported as highlighted below:

Year	Suspected SARI death reported(current week)	Reclassified as death due to probable COVID-19
2022	108(1)	7
2021	96	15
2020	49	2

# Cholera/AWD Surveillance Updates

- In this week, there are fourteen (14) new RDT-positive AWD cases/Cholera Suspects reported, among samples sent for testing.
- So far In 2022 total of one hundred forty-eight (148) RDT-confirmed AWD Cases/ cholera suspects were reported as of W40 2022. Of these 55 were positive for culture, and 93 were negative for culture.
- Cumulatively there are 841 RDT and culture-confirmed cholera cases of which 387 cases were culture-confirmed since transmission in 2018



	2018	2019	2020	2021	2022 W39
<b>RDT positive/culture confirmed for Cholera</b>	49	258	28	357	148
<b>Culture confirmed for Cholera</b>	<b>7</b>	<b>184</b>	<b>5</b>	<b>136</b>	<b>55</b>

# Diphtheria Surveillance Updates

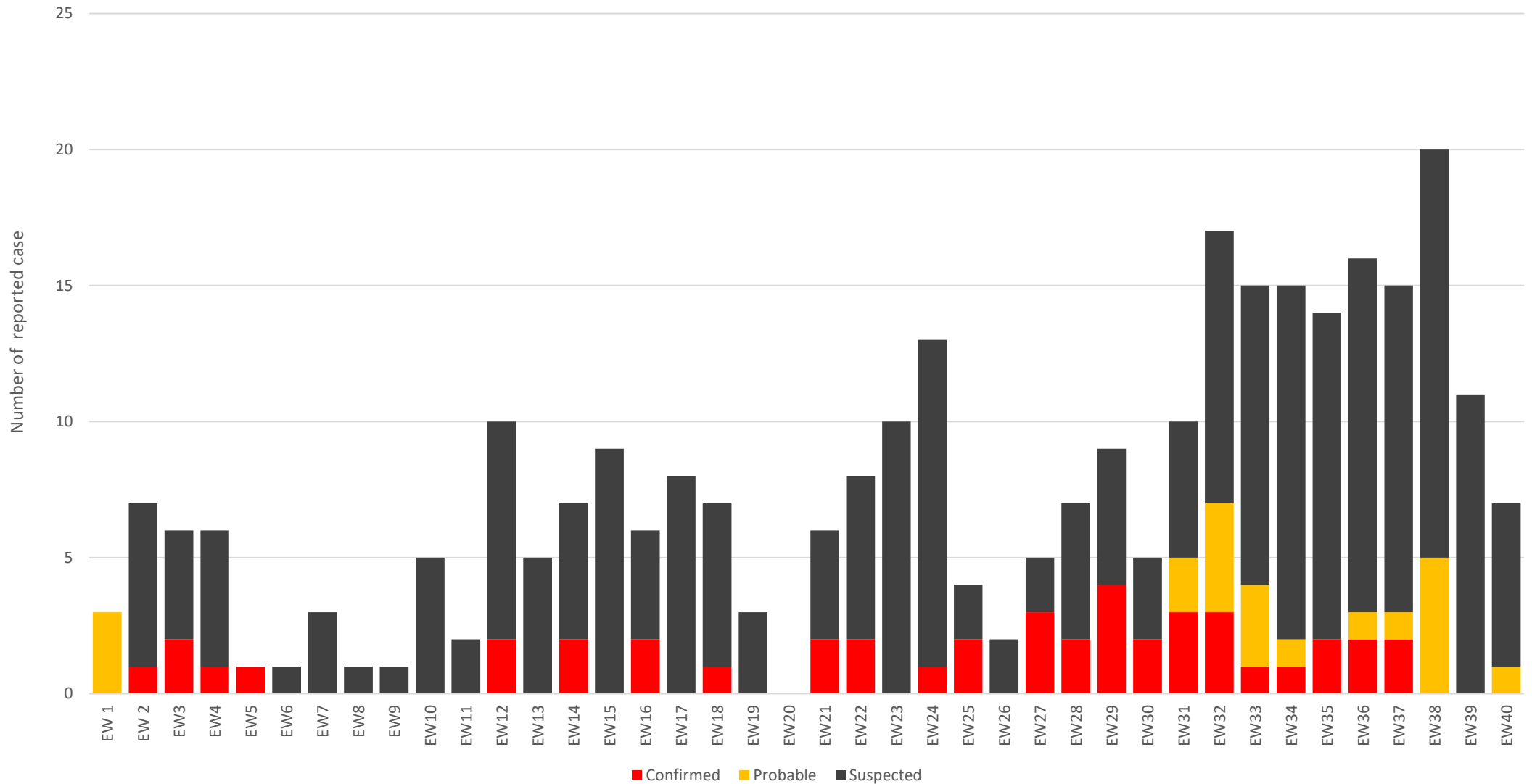
- One (1) probable and 6 suspected diphtheria cases were reported in go.data in this Epi week 40
- The last confirmed case was reported on 14 September 2022
- In total 53 deaths have so far been reported since 2017, with the last death reported on 25 April 2022

<b>Classification</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
<b>Confirmed</b>	66	226	31	19	30	<b>46</b>
<b>Probable</b>	1154	1555	60	9	29	<b>21</b>
<b>Suspected</b>	1796	3549	523	198	118	<b>235</b>
<b>Death</b>	30	14	3	0	5	<b>1</b>



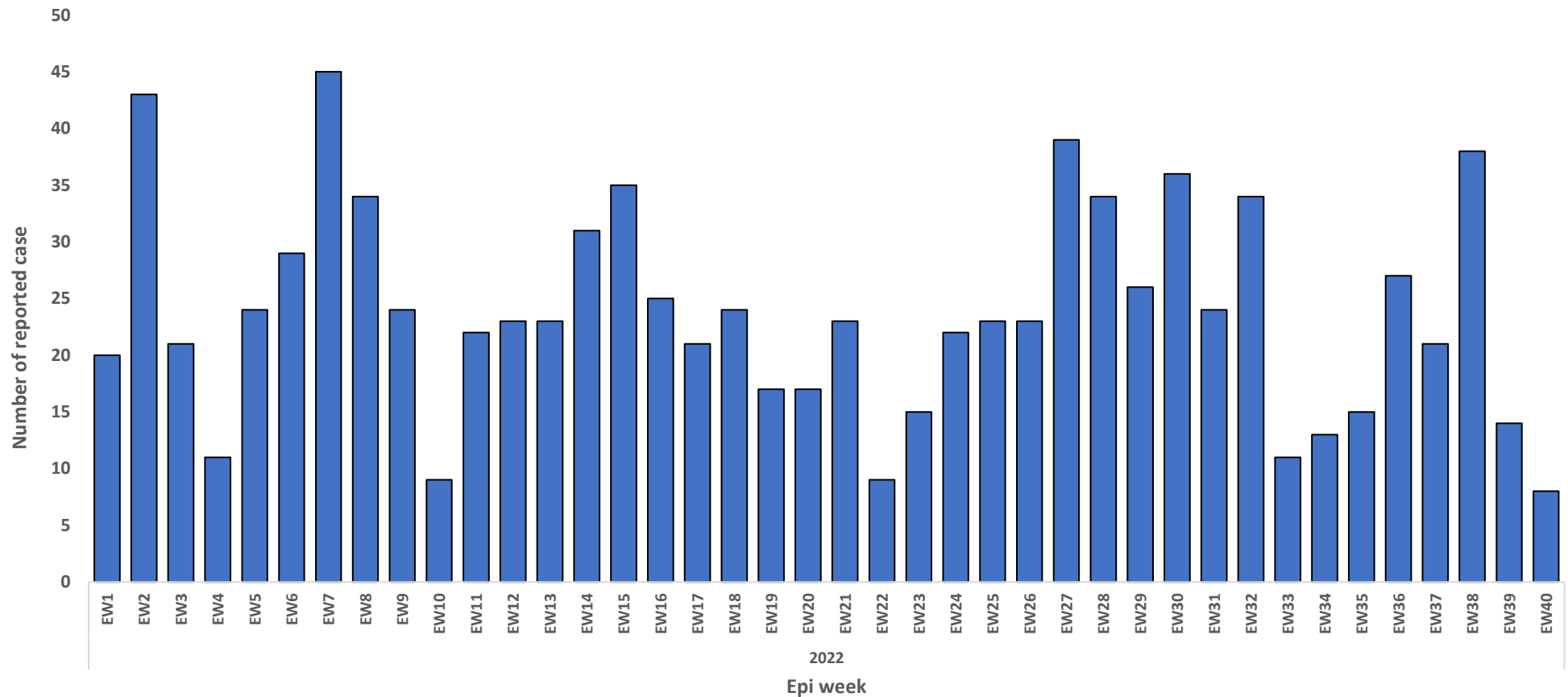
# Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from week 1-39, 2022



# Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from week 1-40, 2022



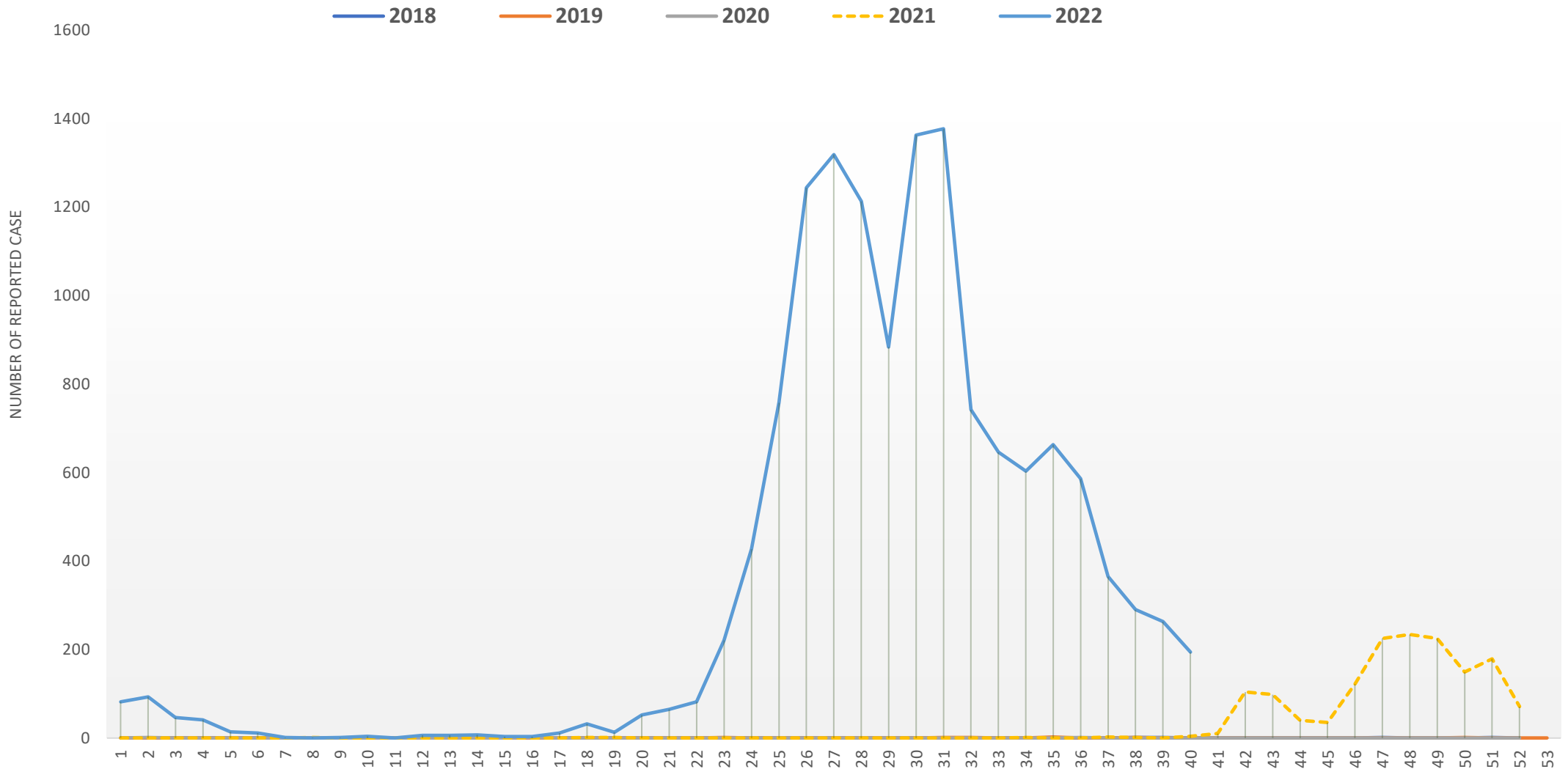
- > In week 40, 8 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 953 reported in 2022
- > About 55% (522/953) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

# Dengue Surveillance Updates

Year	Month/Epi Week	Confirmed case	Death	Confirmed case (cumulative)	Death (cumulative)
2022	Jan (Ew1-5)	276	0	276	0
	Feb (Ew6-9)	13	0	289	0
	March (Ew10-14)	23	0	312	0
	April (Ew15-18)	49	0	361	0
	May (Ew19-22)	212	0	573	0
	June (Ew23-27)	3,969	2	4,542	2
	July (Ew28-31)	4,837	8	9,379	10
	August (Ew 32-35)	2,654	5	12,033	15
	September (as of 1 Oct)	1,698	4	13,731	19

# Dengue Surveillance Updates

Yearly Trends of Dengue case trend from 2018 - Epi Week 40, 2022



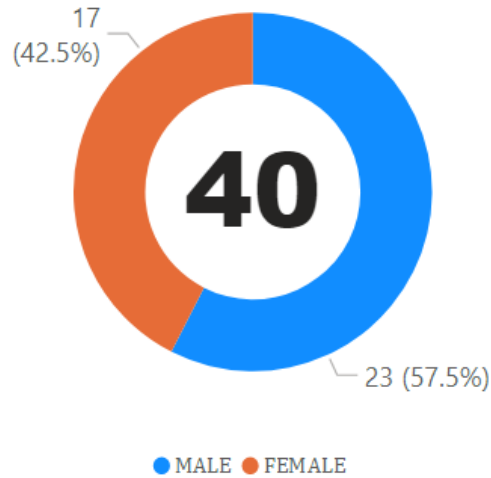
# Community-based Mortality surveillance updates Epi week 40

Probable causes of death	Epi week 40	In 2022
Still Birth	8 (20%)	161 (10%)
Neonatal Death (<28 days old)	4 (10%)	161 (10%)
Infectious Disease	2 (5%)	152 (10%)
Severe Acute Respiratory Infection (SARI)	1 (3%)	41 (3%)
Injury	2 (5%)	39 (2%)
Maternal Death	2 (5%)	34 (2%)
Acute Malnutrition	--	1 (0%)
Other	21 (53%)	1012 (63%)
<b>Total</b>	<b>40 (100%)</b>	<b>1601 (100%)</b>

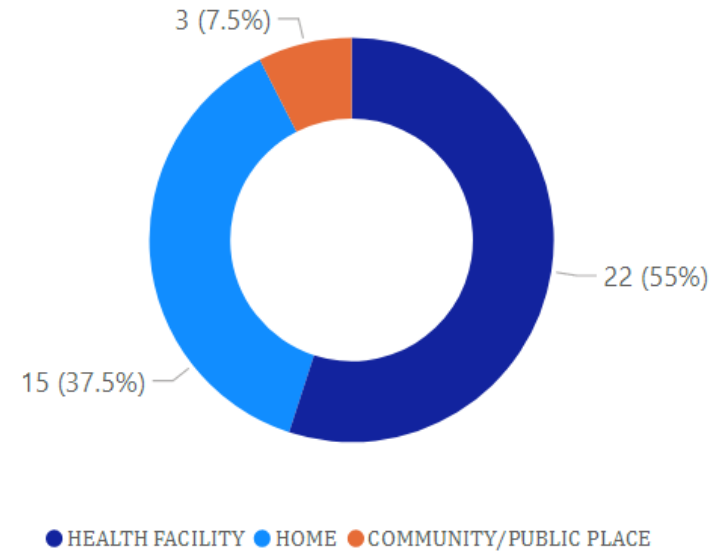
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

# Community-based Mortality surveillance updates Epi week 40

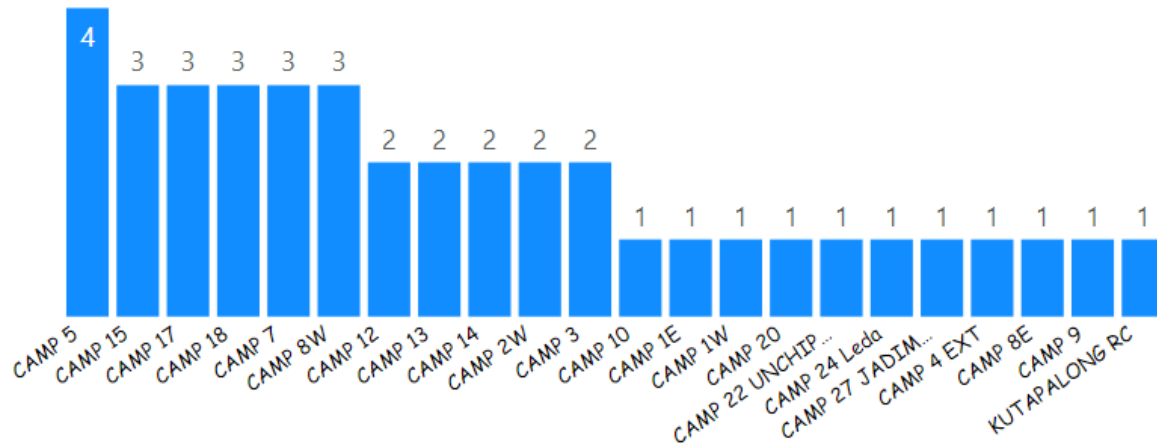
### Gender distribution



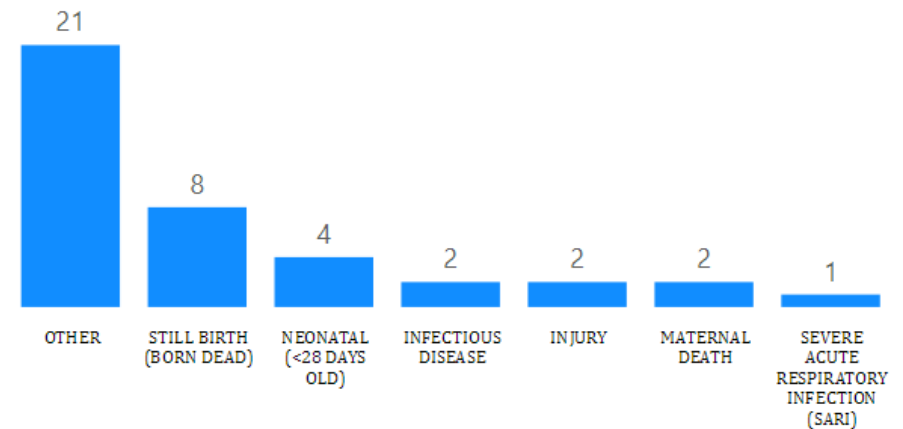
### Place of death



### Distribution of deceased Camp



### Distribution of Probable cause of death



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Epidemiological Bulletin W40 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



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# Contents

## Highlights

Slide 1	<b>Table 1</b> Coverage
	<b>Table 2</b> Early warning performance
	<b>Table 3</b> Alert performance

## Early Warning

Slide 2	<b>Map 1a</b> Ukhia completeness by site/zone
	<b>Map 1b</b> Teknaf completeness by site/zone
Slide 3	<b>Table 4</b> Ukhia (Northern group) performance by site/zone
	<b>Map 2</b> Ukhia (Northern group) completeness by site/zone
Slide 4	<b>Table 5</b> Ukhia (Southern group) performance by site/zone
	<b>Map 3</b> Ukhia (Southern group) completeness by site/zone
Slide 5	<b>Table 6</b> Teknaf performance by site/zone
	<b>Map 4</b> Teknaf completeness by site/zone
Slide 6	<b>Table 7</b> Performance by partner

## Alert

Slide 7	<b>Table 8</b> Ukhia (Northern group) alerts by site/zone
	<b>Map 5</b> Ukhia (Northern group) alerts site/zone
Slide 8	<b>Table 9</b> Ukhia (Southern group) alerts by site/zone
	<b>Map 6</b> Ukhia (Southern group) alerts site/zone
Slide 9	<b>Table 10</b> Teknaf alerts by site/zone
	<b>Map 7</b> Teknaf alerts site/zone
Slide 10	<b>Table 11</b> Performance by type of alert
	<b>Table 12</b> Risk Assessment

## Sources of data

1. Weekly EWARS Reporting Form
2. Mortality Case Report Form
3. Event-based Surveillance Form



**Table 1 | Coverage**

#	%	
<b>918,841</b>	-	Estimated total Rohingya population <sup>1</sup>
<b>902,066</b>	<b>98%</b>	Total population under surveillance
<b>175</b>	-	Total number of health facilities
<b>169</b>	<b>97%</b>	Number of EWARS reporting sites

**Table 2 | Early warning performance indicators**

W40	Cumulative (2022)	
<b>142</b>	<b>6413</b>	Number of weekly reports received
<b>86%</b>	<b>90%</b>	Completeness
<b>86%</b>	<b>90%</b>	Timeliness

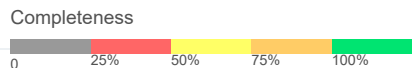
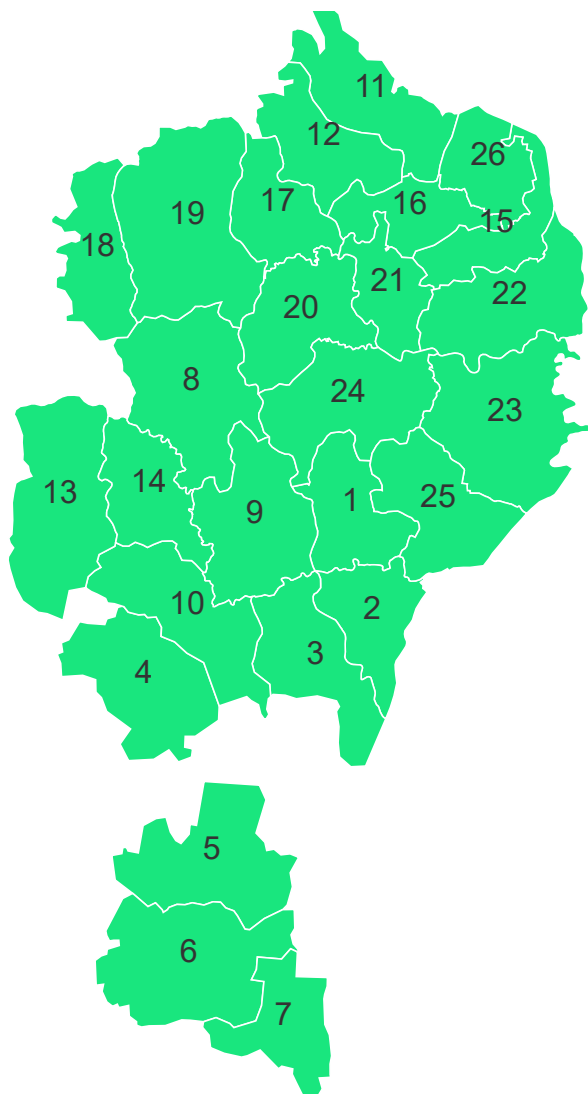
**Table 3 Alert performance indicators**

W40	Cumulative (2022)	
<b>105</b>	<b>3,698</b>	Total alerts raised
<b>100%</b>	<b>100%</b>	% verified
<b>0%</b>	<b>0%</b>	% auto-discarded
<b>0%</b>	<b>0%</b>	% undergoing risk assessment
<b>0%</b>	<b>0%</b>	% completed risk assessment

<sup>1</sup> Source: UNHCR. Bangladesh: Joint Government of Bangladesh- UNHCR Population Factsheet. 31 December 2021.

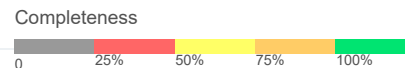
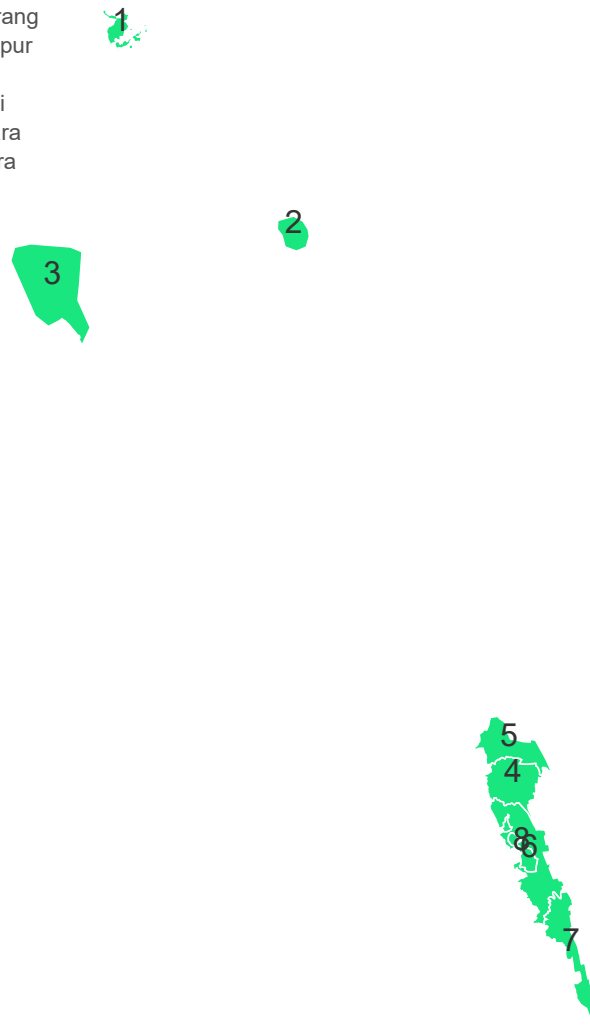
Map 1a | Ukhia completeness by camp

- 1 Camp 10
- 2 Camp 11
- 3 Camp 12
- 4 Camp 13
- 5 Camp 14
- 6 Camp 15
- 7 Camp 16
- 8 Camp 17
- 9 Camp 18
- 10 Camp 19
- 11 Camp 1E
- 12 Camp 1W
- 13 Camp 20 Ext
- 14 Camp 20
- 15 Camp 2E
- 16 Camp 2W
- 17 Camp 3
- 18 Camp 4 Ext
- 19 Camp 4
- 20 Camp 5
- 21 Camp 6
- 22 Camp 7
- 23 Camp 8E
- 24 Camp 8W
- 25 Camp 9
- 26 Kutupalong RC



Map 1b | Teknaf completeness by camp

- 1 Camp 21 Chakmarkul
- 2 Camp 22 Unchiprang
- 3 Camp 23 Shamlapur
- 4 Camp 24 Leda
- 5 Camp 25 Ali Khali
- 6 Camp 26 Nayapara
- 7 Camp 27 Jadimura
- 8 Nayapara RC



**Table 4 | Performance by camp (W40 2022)**

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	3	3	100%	0%
Camp 1W	5	4	60%	0%
Camp 2E	3	3	100%	0%
Camp 2W	3	3	100%	0%
Camp 3	5	5	100%	0%
Camp 4	5	3	100%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	5	100%	0%
Camp 6	3	3	100%	0%
Camp 7	6	6	100%	0%
Camp 8E	8	7	88%	0%
Camp 8W	4	4	100%	0%
Kutupalong RC	2	2	100%	0%

**Map 2 | Completeness by camp**

- 1 Camp 1E
- 2 Camp 1W
- 3 Camp 2E
- 4 Camp 2W
- 5 Camp 3
- 6 Camp 4 Ext
- 7 Camp 4
- 8 Camp 5
- 9 Camp 6
- 10 Camp 7
- 11 Camp 8E
- 12 Camp 8W
- 13 Kutupalong RC

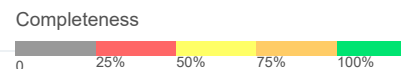
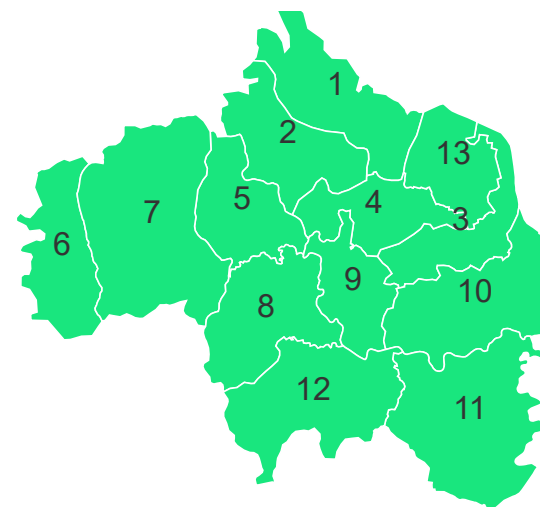


Table 5 | Performance by camp (W40 2022)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	3	75%	0%
Camp 11	8	6	75%	0%
Camp 12	6	4	83%	0%
Camp 13	10	8	90%	0%
Camp 14	7	5	86%	0%
Camp 15	9	8	89%	11%
Camp 16	7	7	86%	0%
Camp 17	5	5	100%	0%
Camp 18	5	4	80%	0%
Camp 19	5	4	80%	0%
Camp 20	4	3	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	5	83%	0%

Map 3 | Completeness by camp

- 1 Camp 10
- 2 Camp 11
- 3 Camp 12
- 4 Camp 13
- 5 Camp 14
- 6 Camp 15
- 7 Camp 16
- 8 Camp 17
- 9 Camp 18
- 10 Camp 19
- 11 Camp 20 Ext
- 12 Camp 20
- 13 Camp 9

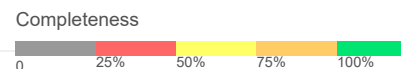
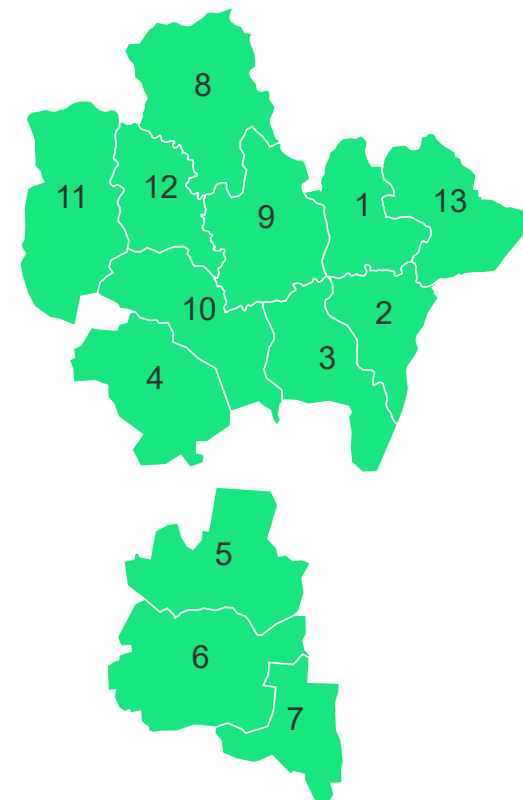
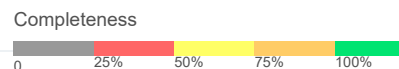
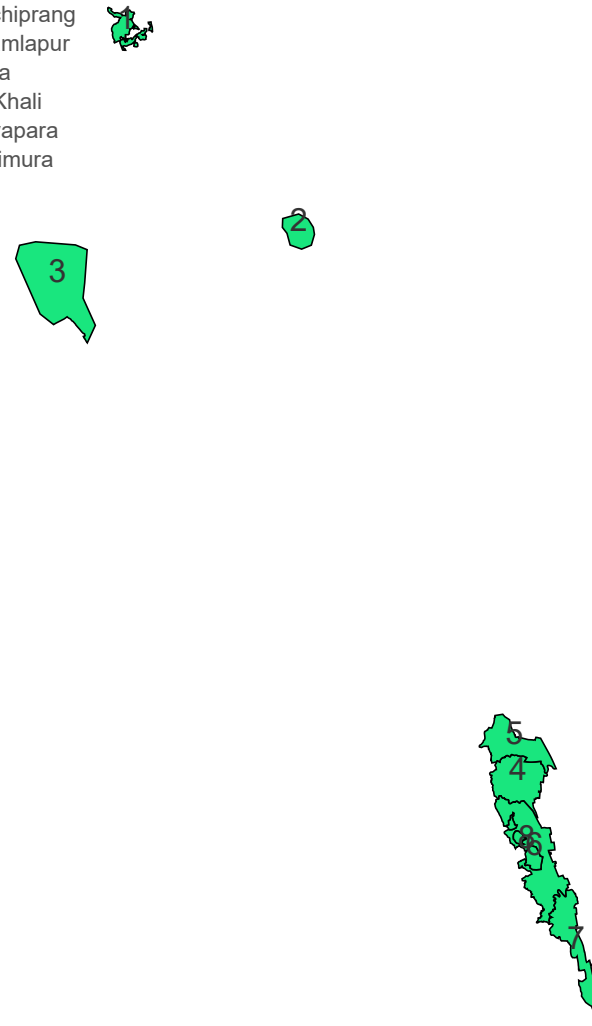


Table 6 | Performance by camp (W40 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	4	100%	0%
Camp 22 Unchiprang	5	3	60%	0%
Camp 23 Shamlapur	3	2	33%	0%
Camp 24 Leda	2	1	50%	0%
Camp 25 Ali Khali	3	2	100%	0%
Camp 26 Nayapara	5	5	100%	0%
Camp 27 Jadimura	2	2	100%	0%
Nayapara RC	2	2	100%	0%

Map 4 | Completeness by camp

- 1 Camp 21 Chakmarkul
- 2 Camp 22 Unchiprang
- 3 Camp 23 Shamlapur
- 4 Camp 24 Leda
- 5 Camp 25 Ali Khali
- 6 Camp 26 Nayapara
- 7 Camp 27 Jadimura
- 8 Nayapara RC



**Table 7 | Performance by partner (W40 2022)**

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	0	0%	0%	IRC	4	3	75%	75%
AWARD	6	6	100%	100%	MSF	9	7	78%	78%
BASHMAH	1	1	100%	100%	MoH	12	10	83%	83%
BDRCS	11	11	100%	100%	MHI	0	0		
BRAC	11	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	100%	100%
GH/CPI	1	1	100%	100%	PRANTIC	1	1	100%	100%
DBC	1	1	100%	100%	PULSE	1	0	0%	0%
DSK	1	1	100%	100%	QC	1	1	100%	100%
DCHT-PWJ	1	1	100%	100%	PHD	10	10	100%	100%
FRNDS	6	6	100%	100%	RPN	2	2	100%	100%
GK	10	10	100%	100%	RHU	3	3	100%	100%
Global One	1	1	100%	100%	RI	3	3	100%	100%
GUSS	1	1	100%	100%	RTMI	9	8	89%	89%
HAEFA	2	1	50%	50%	SALT	1	1	100%	100%
HAIB	8	0	0%	0%	SCI	7	7	57%	57%
HMBDF	2	2	100%	100%	DCHT-MM	1	1	100%	100%
HOPE	1	1	100%	100%	Turkish Government	1	1	100%	100%
ICRC	1	1	100%	100%	TdH	2	2	100%	100%
IOM	23	21	96%	96%					

Table 8 | Performance by camp

Northern group	W40		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	72	100%
Camp 1W	2	100%	187	100%
Camp 2E	12	100%	380	100%
Camp 2W	5	100%	123	100%
Camp 3	4	100%	173	100%
Camp 4	2	100%	145	100%
Camp 4 Ext	2	100%	55	100%
Camp 5	2	100%	119	100%
Camp 6	0	0%	96	100%
Camp 7	1	100%	80	100%
Camp 8E	2	100%	73	100%
Camp 8W	7	100%	197	100%
Kutupalong RC	2	100%	75	100%

Map 5 | Number of alerts by camp

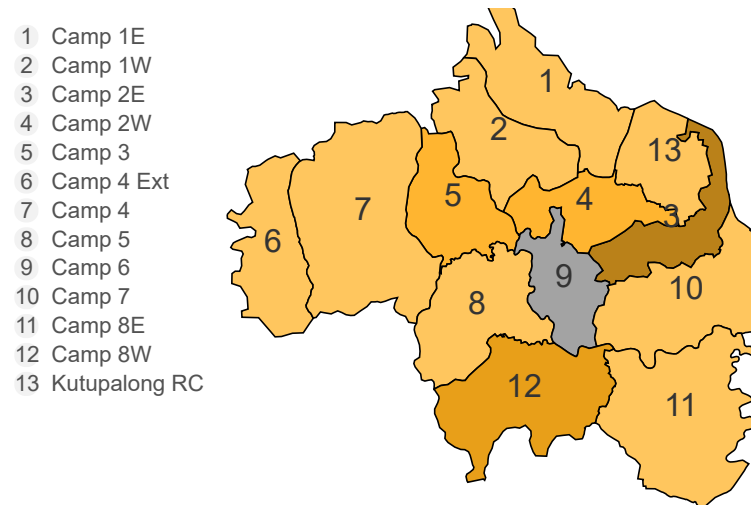


Table 9 | Performance by camp

Southern group	W40		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	3	100%	77	100%
Camp 11	5	100%	96	100%
Camp 12	3	100%	120	100%
Camp 13	4	100%	137	100%
Camp 14	2	100%	73	100%
Camp 15	5	100%	136	100%
Camp 16	4	100%	112	100%
Camp 17	3	100%	99	100%
Camp 18	6	100%	160	100%
Camp 19	4	100%	64	100%
Camp 20	2	100%	68	100%
Camp 20 Ext	2	100%	53	100%
Camp 9	6	100%	192	100%

Map 6 | Number of alerts by camp

- 1 Camp 10
- 2 Camp 11
- 3 Camp 12
- 4 Camp 13
- 5 Camp 14
- 6 Camp 15
- 7 Camp 16
- 8 Camp 17
- 9 Camp 18
- 10 Camp 19
- 11 Camp 20 Ext
- 12 Camp 20
- 13 Camp 9

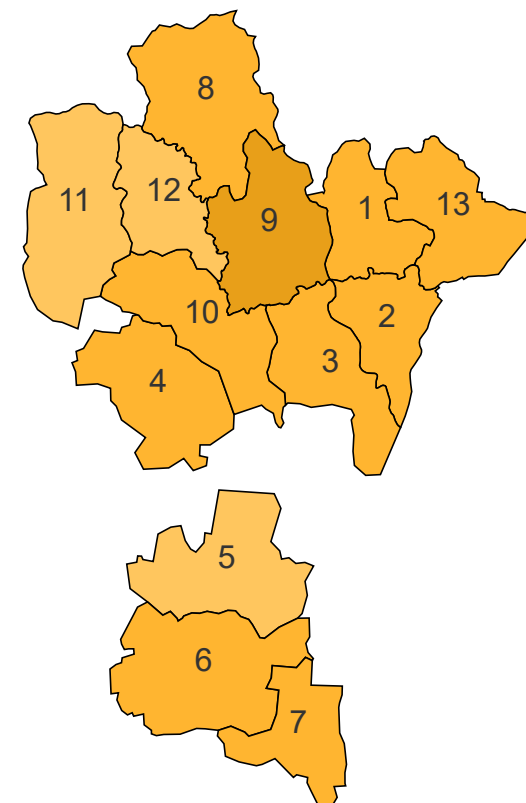




Table 10 | Performance by camp

Teknaf	W40		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	3	100%	49	100%
Camp 22 Unchiprang	2	100%	64	100%
Camp 23 Shamlapur	0	0%	16	100%
Camp 24 Leda	2	100%	92	100%
Camp 25 Ali Khali	1	100%	32	100%
Camp 26 Nayapara	3	100%	121	100%
Camp 27 Jadimura	1	100%	61	100%
Nayapara RC	1	100%	36	100%

Map 7 | Number of alerts by camp

- 1 Camp 21 Chakmarkul
- 2 Camp 22 Unchiprang
- 3 Camp 23 Shamlapur
- 4 Camp 24 Leda
- 5 Camp 25 Ali Khali
- 6 Camp 26 Nayapara
- 7 Camp 27 Jadimura
- 8 Nayapara RC

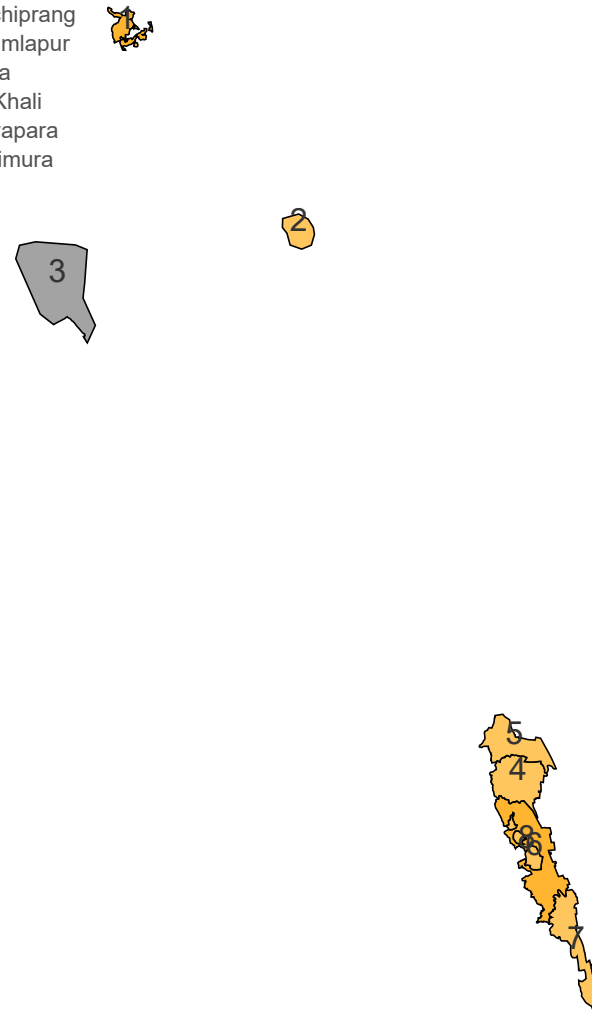


Table 11 | Performance by type of alert

Event	W40		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
<b>Indicator-based surveillance</b>				
Malaria	0	0%	3	100%
Measles	8	100%	410	100%
Bloody Diarr.	0	0%	0	0%
AFP	3	100%	28	100%
Meningitis	0	0%	22	100%
Haem. fever (susp.)	3	100%	32	100%
NNT	0	0%	3	100%
Unexp. fever	1	100%	115	100%
AWD	3	100%	192	100%
ARI	1	100%	173	100%
AJS	2	100%	94	100%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
<b>Event-based surveillance</b>				
EBS total	3	100%	195	100%

Table 12 | Risk assessment

W40	Cumulative (2022)	
0	9	Low risk
0	1	Moderate risk
0	0	High risk
0	0	Very high risk

## For more help and support, please contact:

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## Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

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Ministry of  
Health and  
Family  
Welfare  
Bangladesh



World Health  
Organization



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Annex W40 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



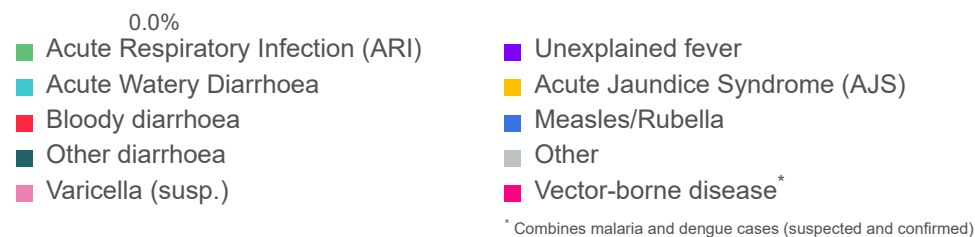
HEALTH SECTOR  
COX'S BAZAR



Printed: 10:46 Sunday, 09 October 2022 UTC

# Proportional morbidity

Figure 1 | Proportional morbidity (W40 2022)



Disease	W40		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	4,020	3.3%	110,448	2.7%
Bloody diarr.	267	0.2%	14,515	0.4%
Other diarr.	2,207	1.8%	43,280	1.0%
Susp. Varicella	26	0.0%	8,999	0.2%
ARI	23,602	19.5%	738,879	17.9%
Measles/Rub.	8	0.0%	895	0.0%
AFP	4	0.0%	63	0.0%
Susp. menin.	0	0.0%	156	0.0%
AJS	17	0.0%	1,049	0.0%
Susp. HF	36	0.0%	294	0.0%
Neo. tetanus	0	0.0%	9	0.0%
Adult tetanus	0	0.0%	14	0.0%
Malaria (conf.)	2	0.0%	364	0.0%
Malaria (susp.)	72	0.1%	52,911	1.3%
Dengue (conf.)	224	0.2%	18,069	0.4%
Dengue (susp.)	90	0.1%	7,820	0.2%
Unexpl. fever	1,000	0.8%	48,669	1.2%
Sev. Malnut.	70	0.1%	1,850	0.0%
Inj./Wounds	1,783	1.5%	86,305	2.1%
Other	87,612	72.3%	2,991,093	72.4%
<b>Total</b>	<b>120,113</b>	<b>100%</b>	<b>4,133,030</b>	<b>100%</b>

# Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W40)

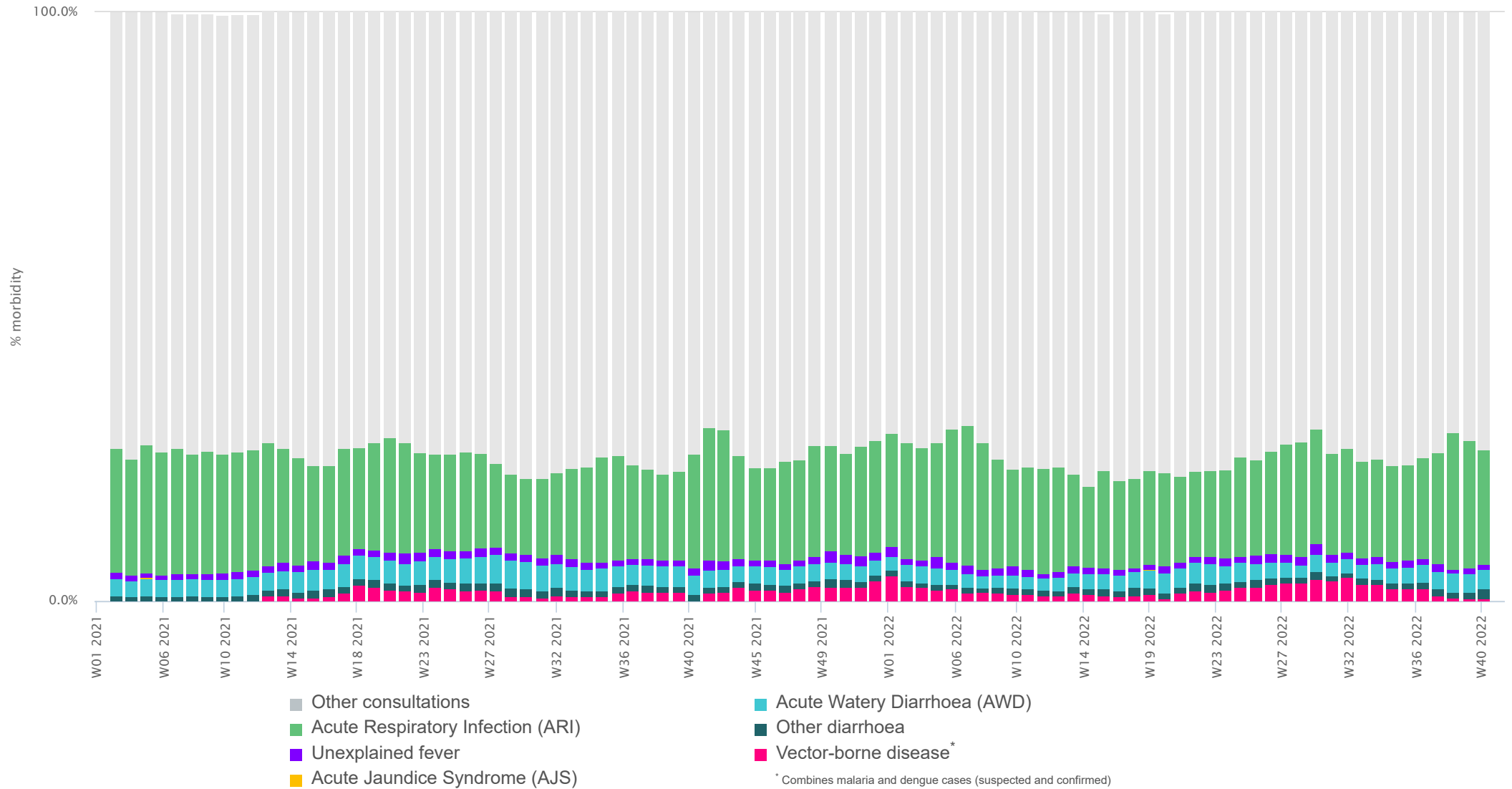
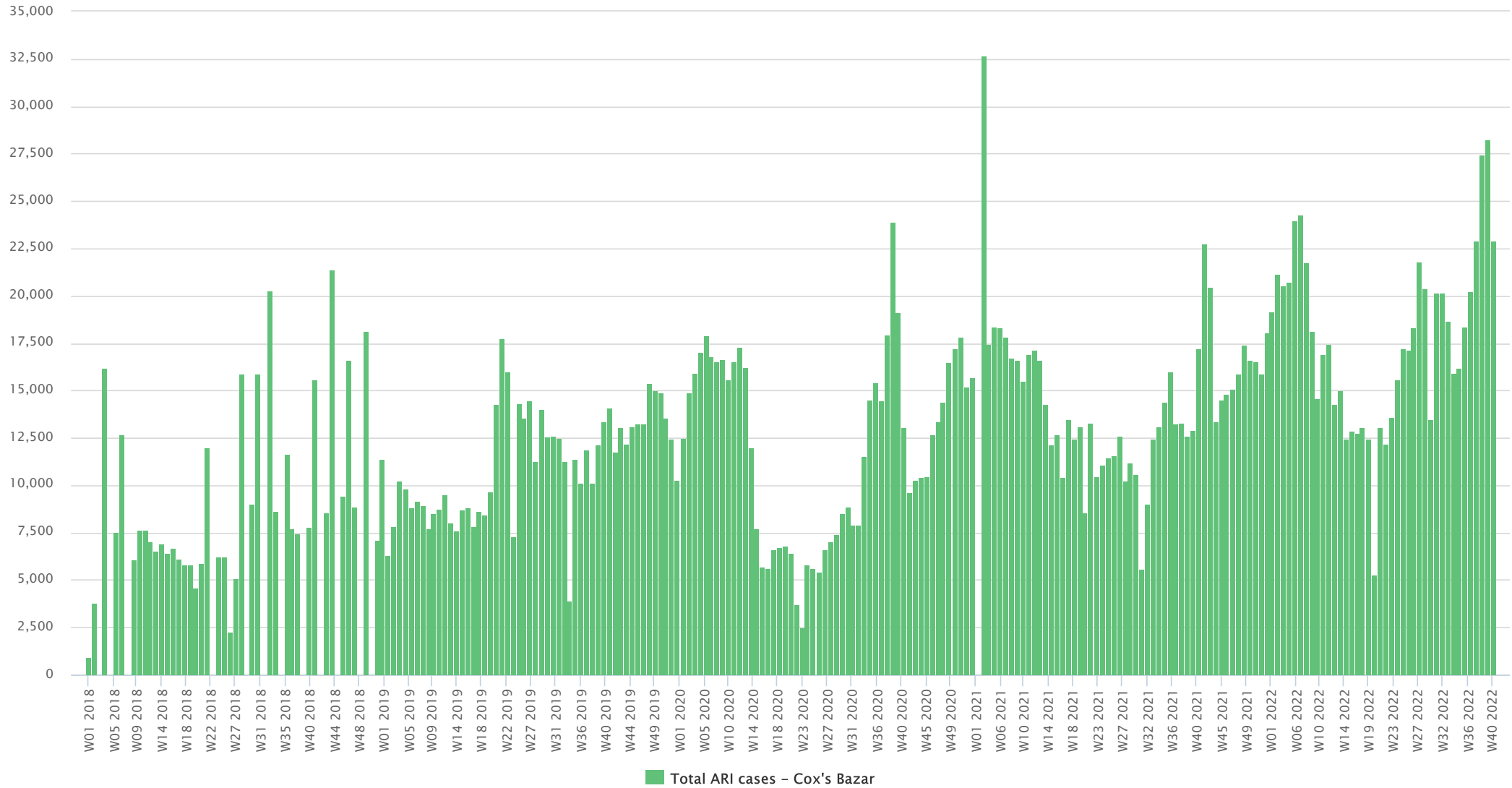
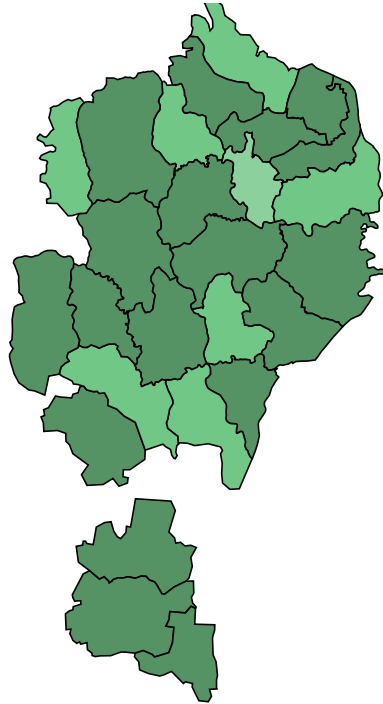


Figure 3 | Trend in number of cases over time (W38 2017 - W40 2022)

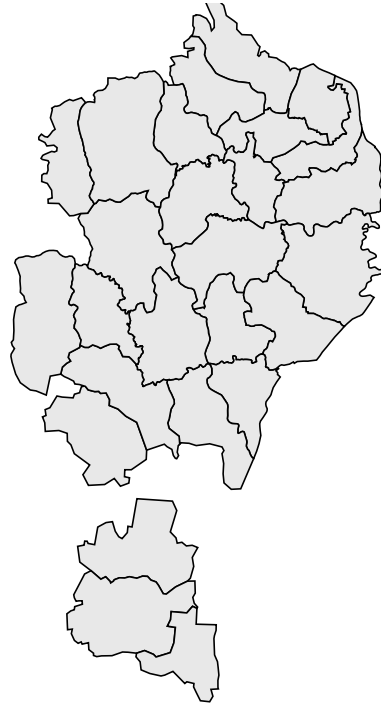


**Map 1** | Map of cases by camp (W40 2022)

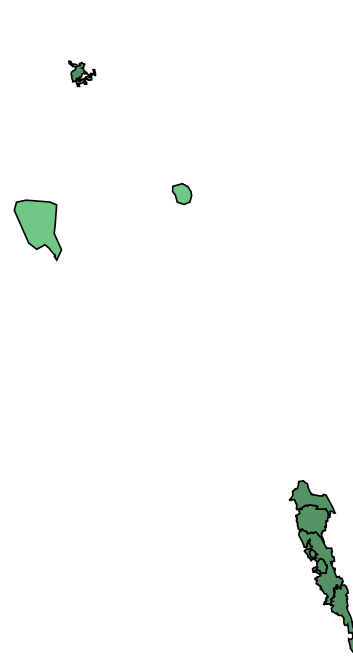
**a. Ukhia** | Number of cases



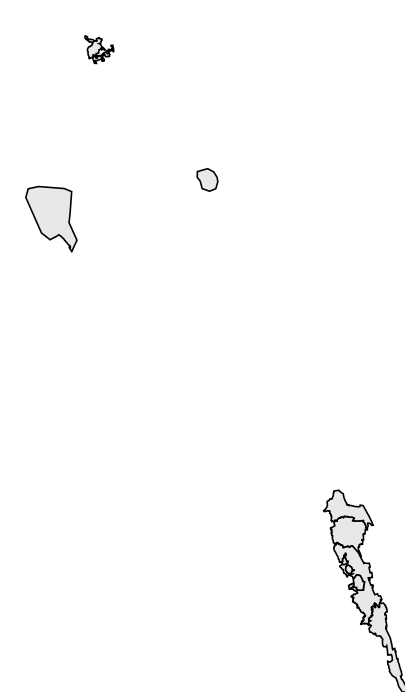
**b. Ukhia** | Number of alerts



**c. Teknaf** | Number of cases



**d. Teknaf** | Number of alerts



## Map legend

Number of cases



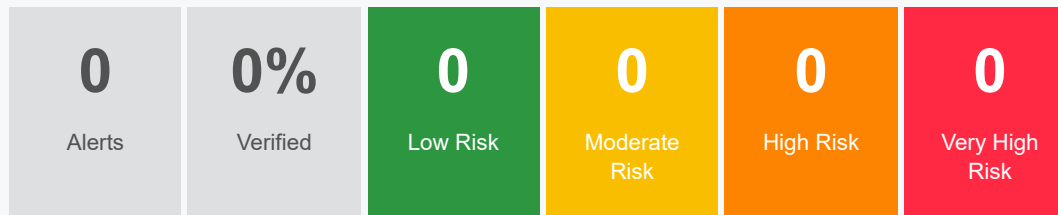
Number of alerts



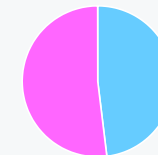
## Alert threshold

Twice the average number of cases over the past 3 weeks. *Source: IEDCR*

## Alert management (W40 2022)

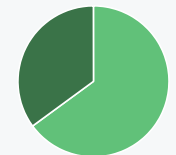


## Figure | % sex



Male Female

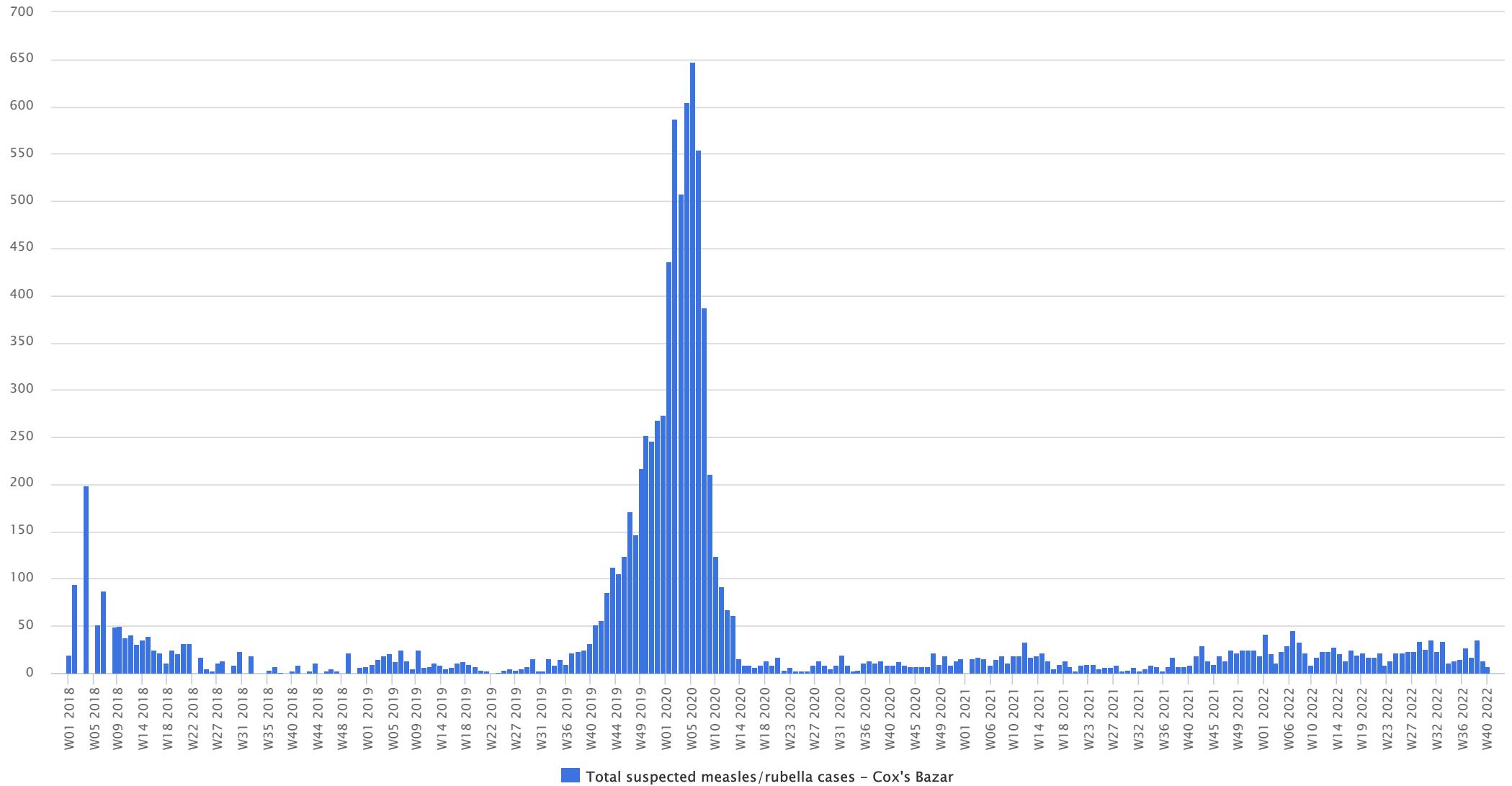
## Figure | % age



< 5 >= 5

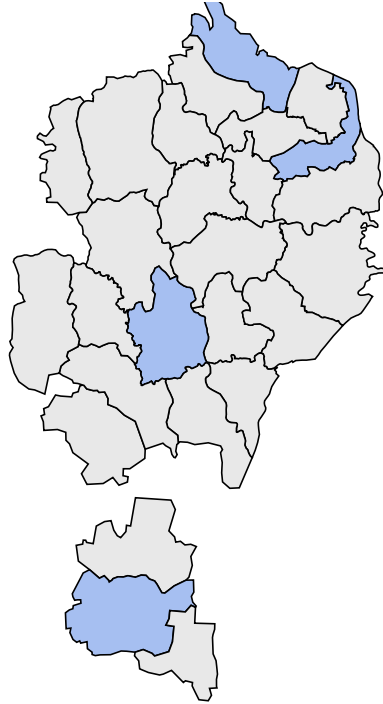


Figure 4 | Trend in number of suspected cases over time (W38 2017 - W40 2022)

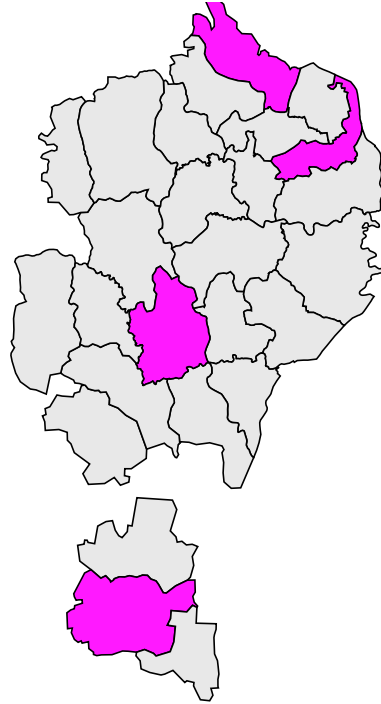


Map 2 | Map of cases by camp (W40 2022)

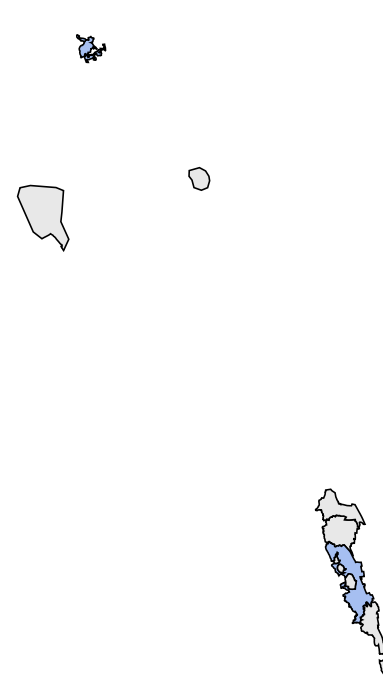
a. Ukhia | Number of cases



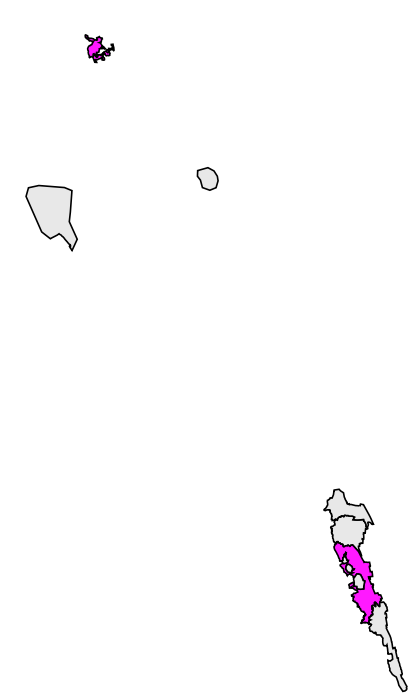
b. Ukhia | Number of alerts



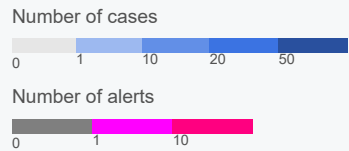
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold  
1 case. Source: IEDCR

Alert management (W40 2022)

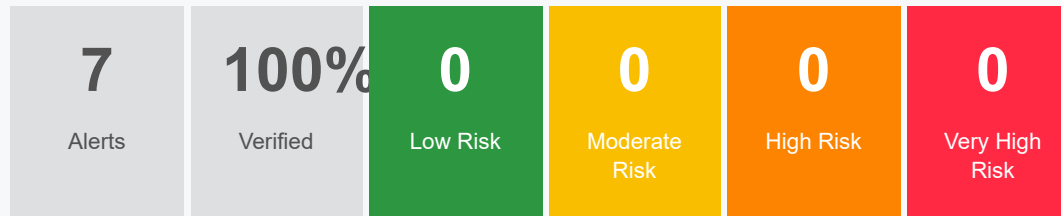


Figure | % sex

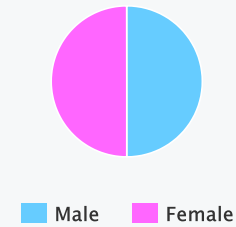
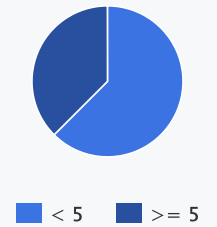
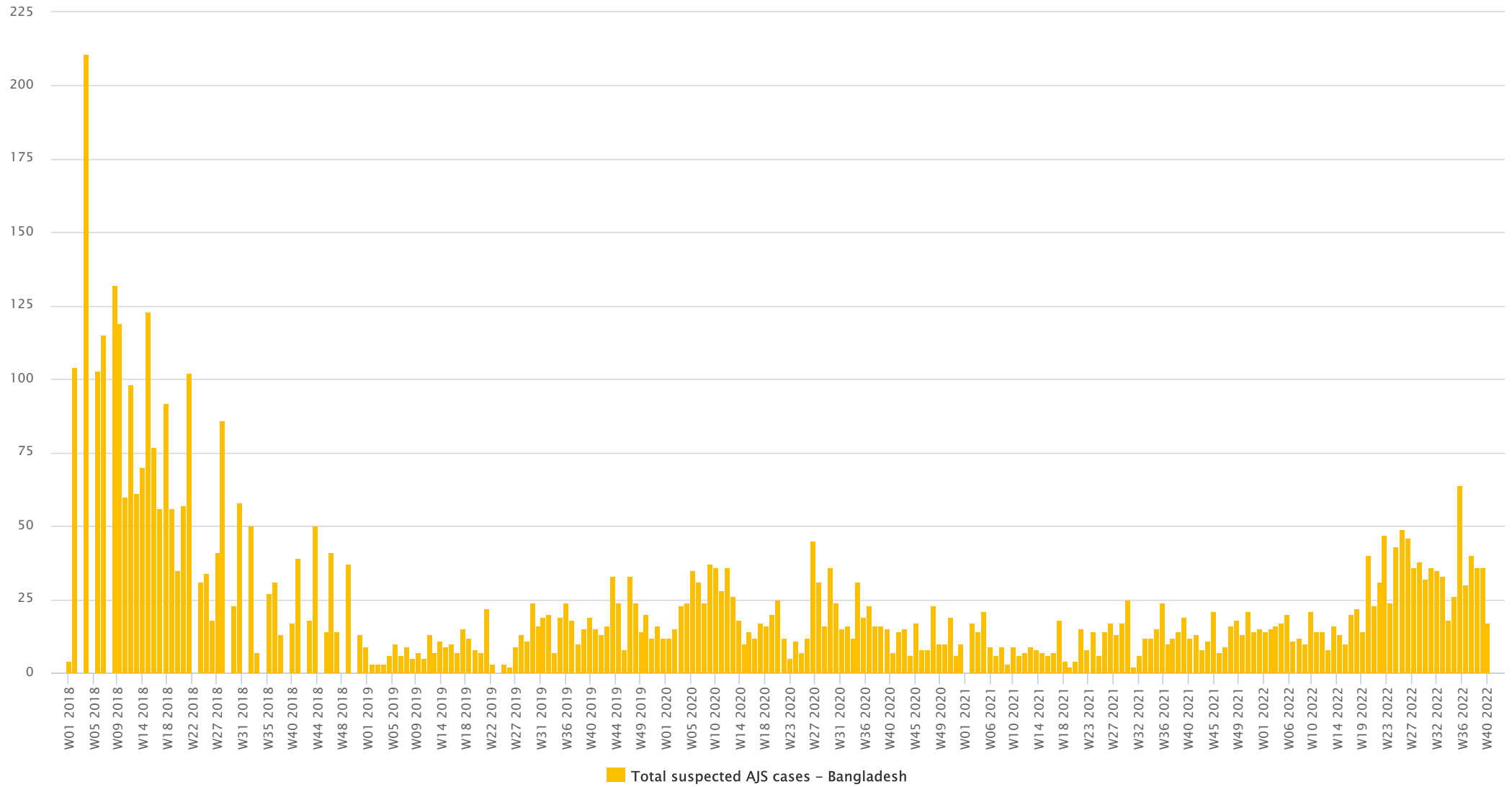


Figure | % age

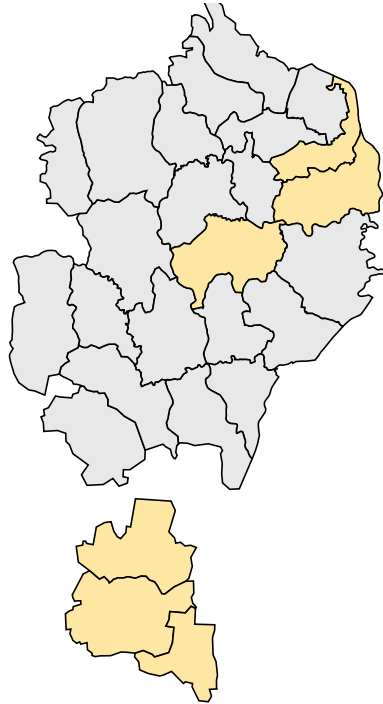


**Figure 5 |** Trend in number of cases over time (W38 2017 - W40 2022)

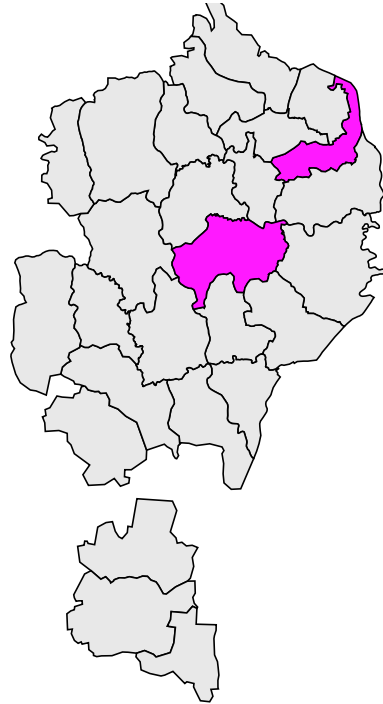


## Map 3 | Map of cases by camp (W37 2017 - W40 2022)

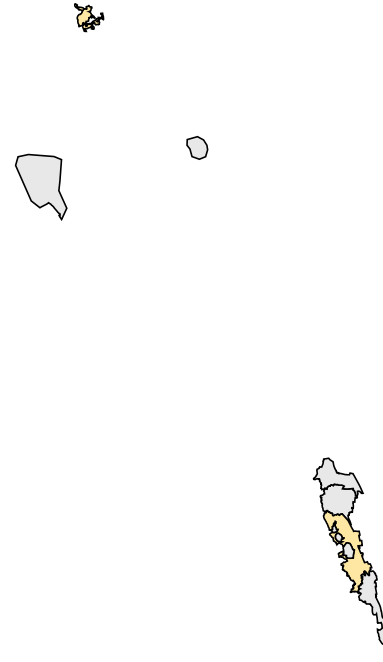
a. Ukhia | Number of cases



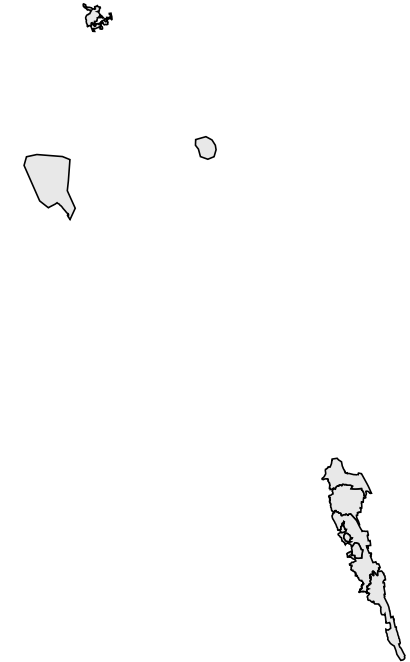
b. Ukhia | Number of alerts



c. Teknaf | Number of cases



d. Teknaf | Number of alerts



### Map legend

Number of cases



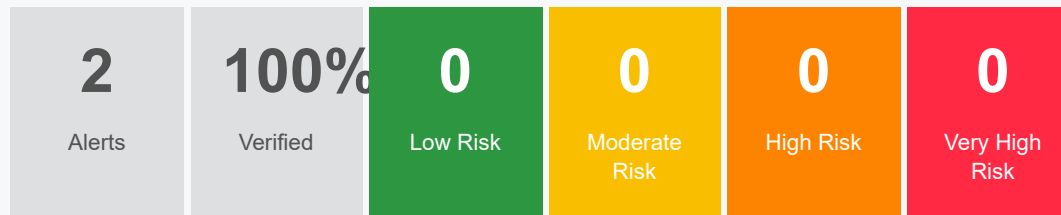
Number of alerts



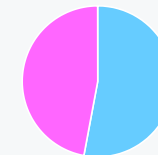
### Alert threshold

A cluster of 3 or more cases seen in a health facility. Source: IEDCR

### Alert management (W40 2022)

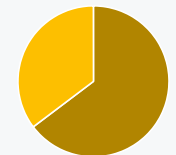


### Figure | % sex



Male Female

### Figure | % age



>= 5 < 5

Figure 6 | Trend in number of cases over time (W38 2017 - W40 2022)

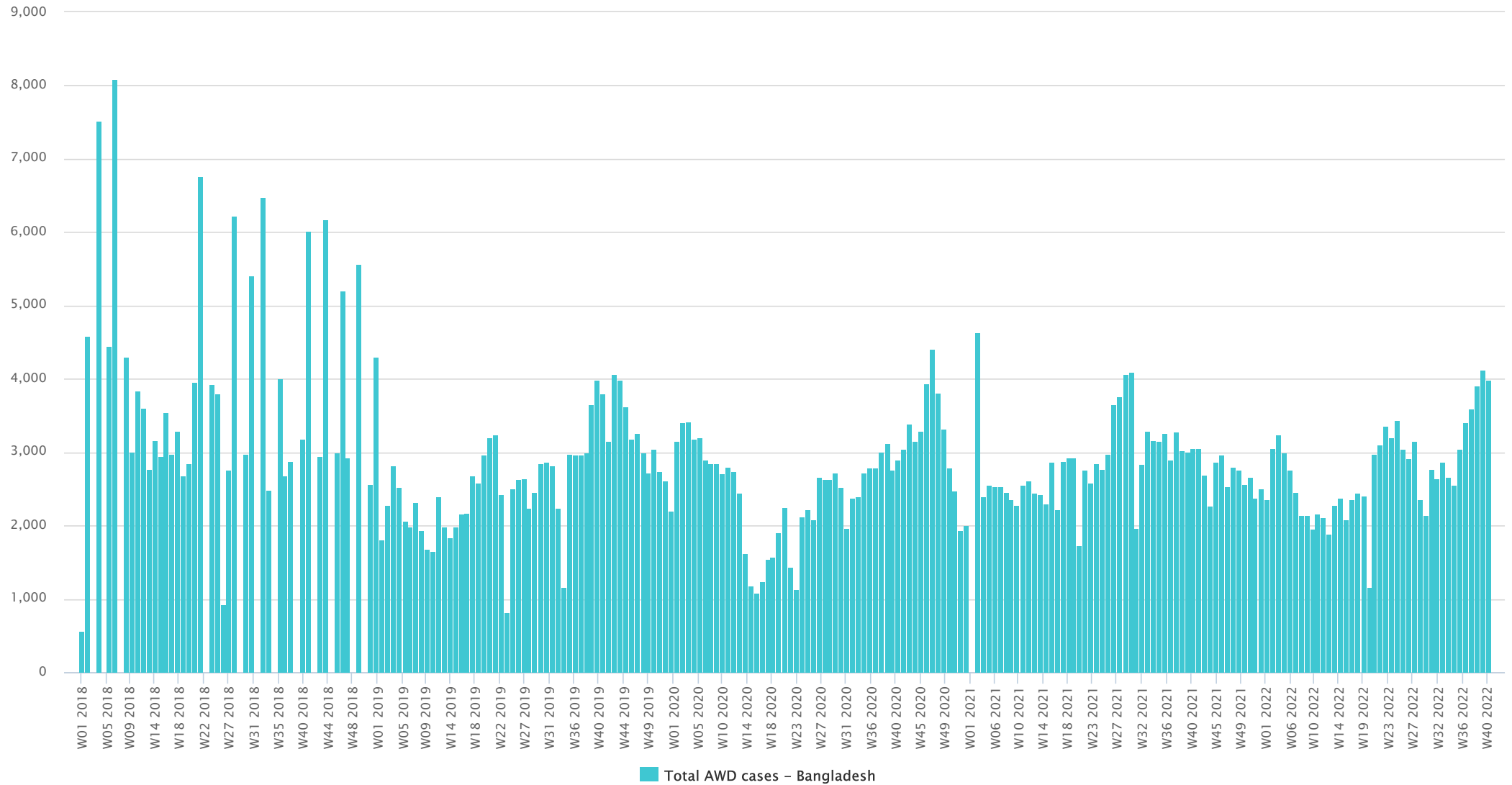
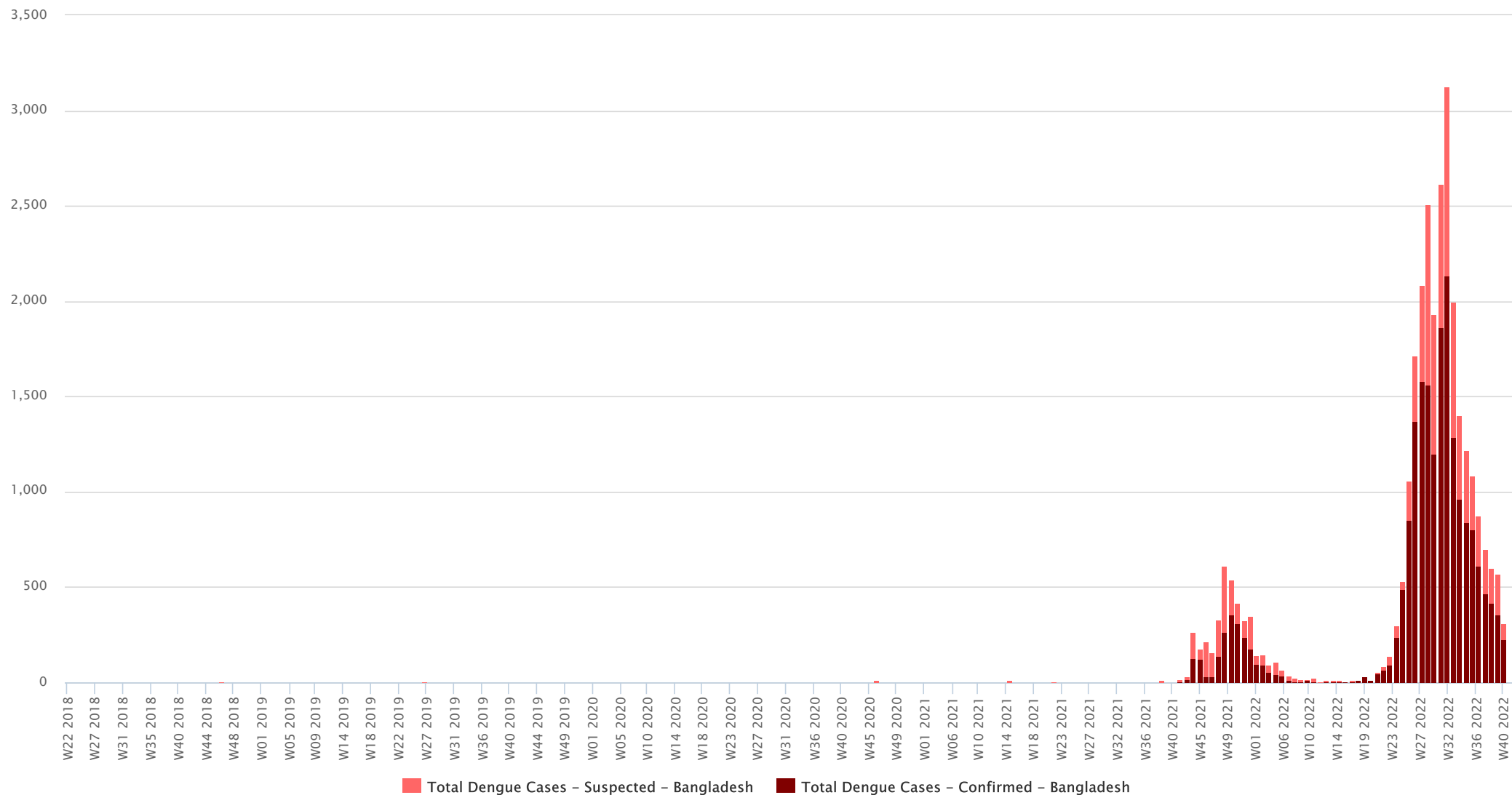
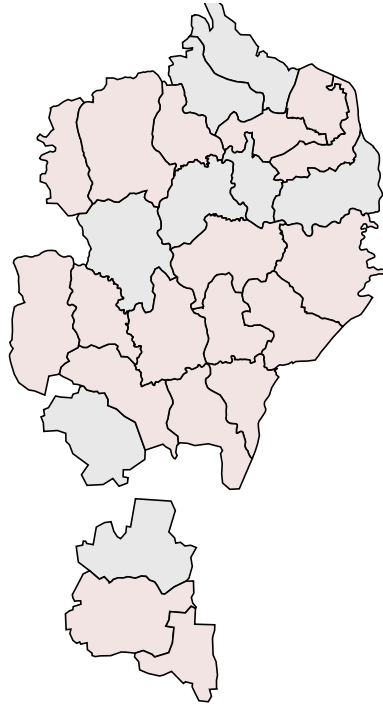


Figure 7 | Trend in number of cases over time (W38 2017 - W40 2022)

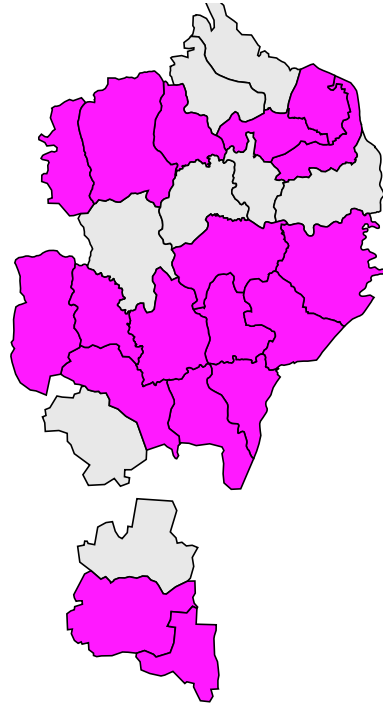


Map 4 | Map of cases by camp (W37 2017 - W40 2022)

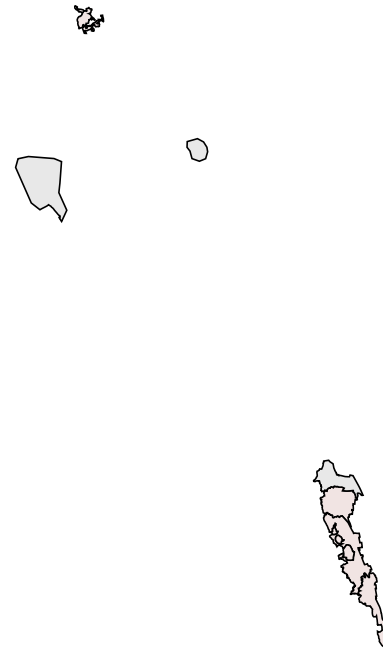
a. Ukhia | Number of cases



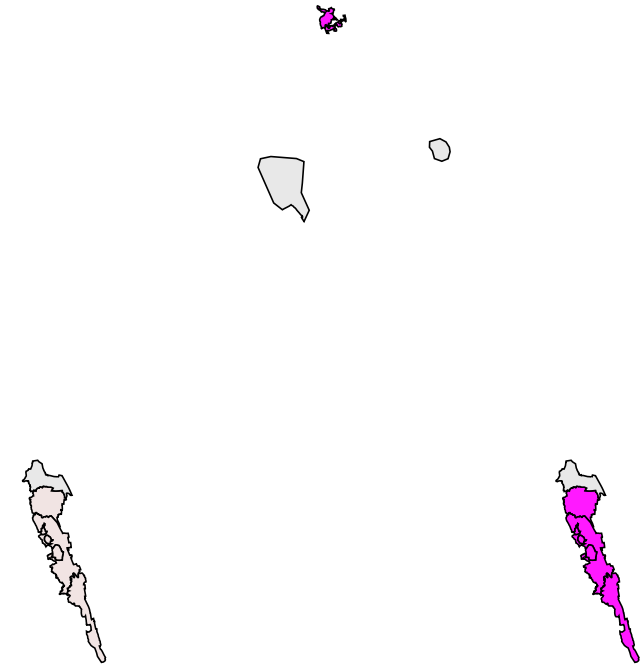
b. Ukhia | Number of alerts



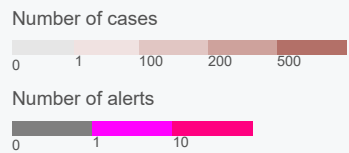
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

Twice the average number of cases over the past 3 weeks. Source: IEDCR

Alert management (W40 2022)

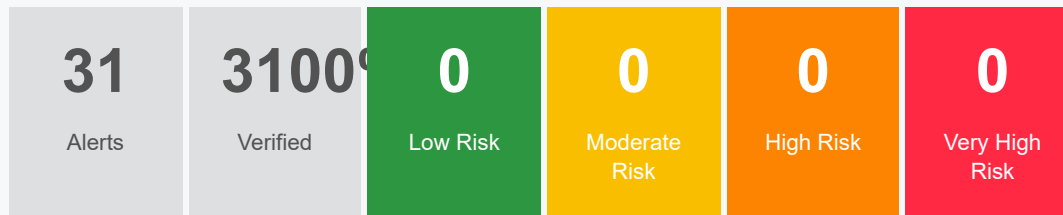


Figure | % sex

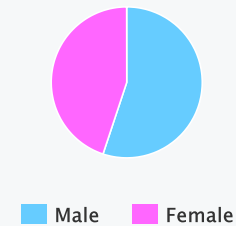


Figure | % age

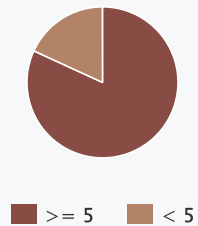
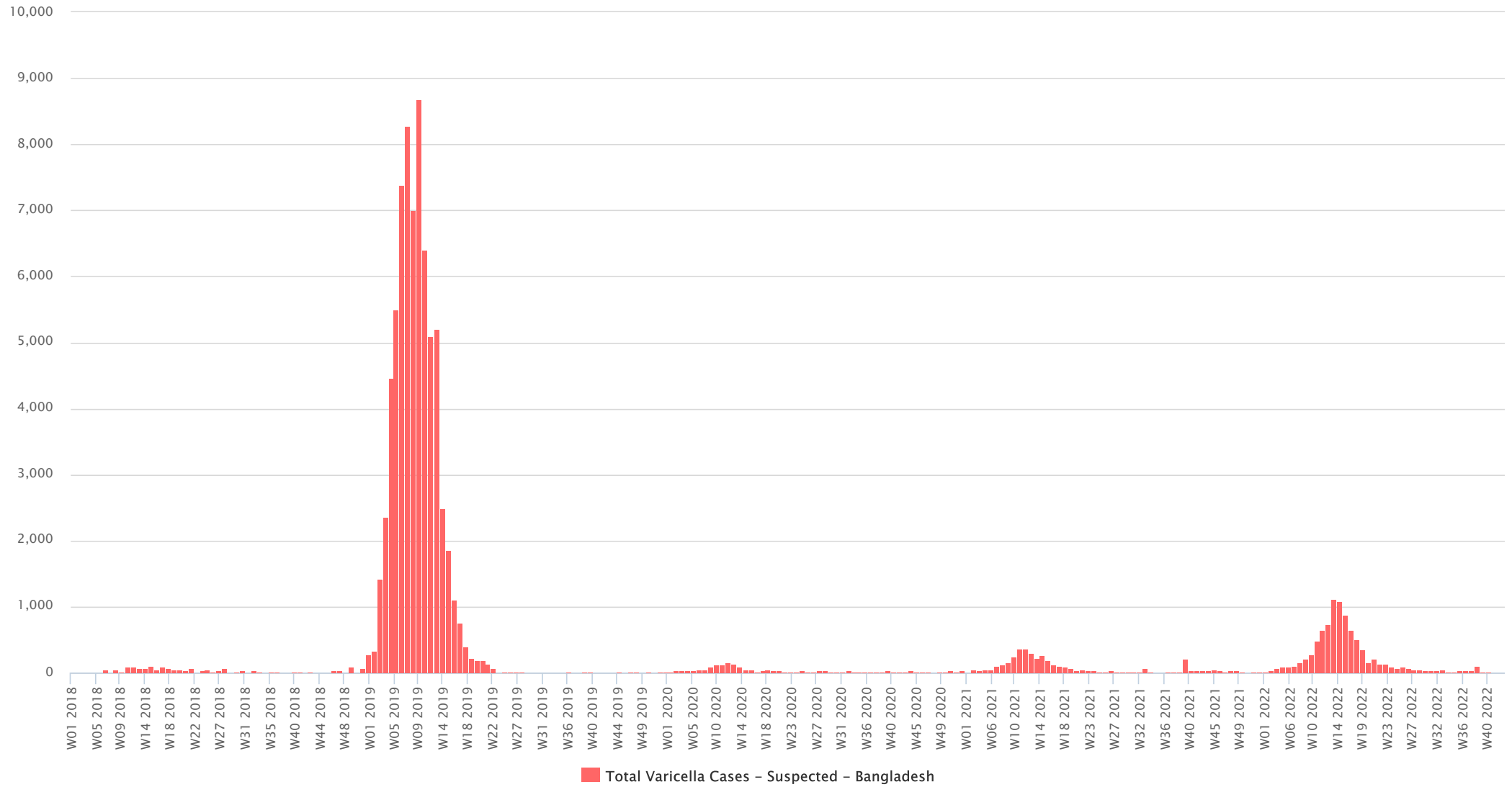


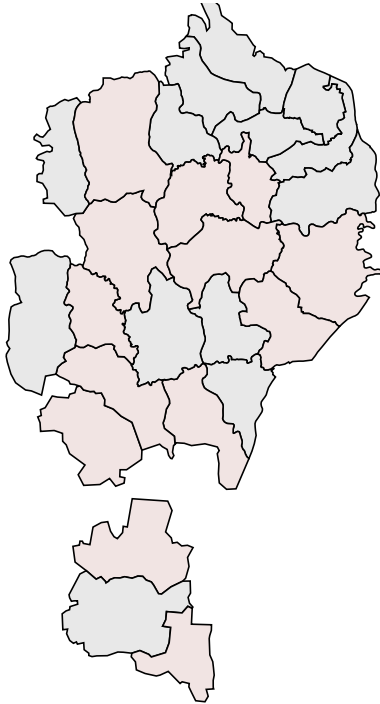
Figure 7 | Trend in number of cases over time (W38 2017 - W40 2022)



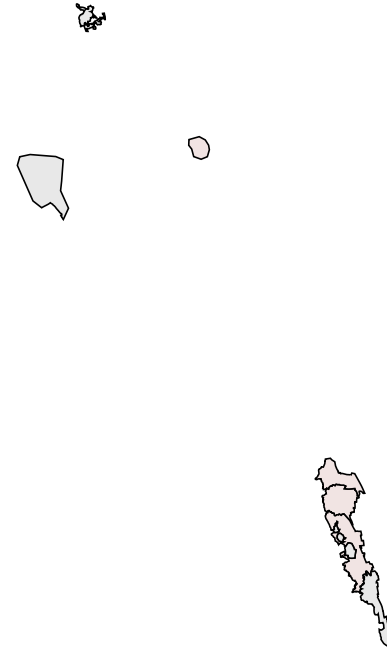


Map 4 | Map of cases by camp (W37 2017 - W40 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

Number of cases

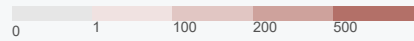
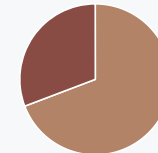


Figure | % sex



Male Female

Figure | % age



< 5 >= 5

## For more help and support, please contact:

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### Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

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