



Nearly half a million children being vaccinated against diphtheria in Cox's Bazar

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14 January 2018, Cox's Bazar, Bangladesh – As part of an intensified response to the current diphtheria outbreak, WHO, UNICEF and health sector partners are working with the Bangladesh Ministry of Health and Family Welfare to vaccinate more than 475,000 children in Rohingya refugee camps, temporary settlements and surrounding areas.

“All efforts are being made to stop further spread of diphtheria. The vaccination of children in the Rohingya camps and nearby areas demonstrates the health sector’s commitment to protecting people, particularly children, against deadly diseases,” said Dr Bardan Jung Rana, ai WHO Representative to Bangladesh.

Nearly 150,000 children aged six weeks to seven years received pentavalent vaccine (that protects against diphtheria, tetanus, pertussis, haemophilus influenza type b and hepatitis B), and nearly 166,000 children aged 7 to 17 years were given tetanus and diphtheria (Td) vaccine, during a three-week vaccination campaign that ended on 31 December. Two more rounds of vaccination with a diphtheria-containing vaccine, at intervals of one month, are planned to fully protect the children in camps and surrounding areas.

“Children are particularly vulnerable to diphtheria. Volunteers are making door-to-door visits in the Rohingya settlements to ensure all children receive vaccination. The massive influx within a very short time has heavily affected basic services in the settlement areas. They have no choice but to live in a very congested environment, which is impacting their health and quality of life. We are making continued efforts to improve conditions of the camps. At the same time, diphtheria vaccination is vital to reducing the risk of further outbreak,” said the UNICEF Country Representative Mr. Edouard Beigbeder.

To limit the spread of diphtheria to communities living near the Rohingya camps and settlements, nearly 160,000 children in 499 schools of Teknaf and Ukhiya sub-districts are also being vaccinated. This initiative began on 1 January. Vaccination was initiated on a day when children attend school in large numbers to avail themselves of free books provided by the government at the start of the academic year.

WHO, UNICEF and other health partners are working with the Ministry of Health and Family Welfare to establish fixed locations for immunization in the Rohingya camps to continue to provide life-saving vaccines to children, in line with Bangladesh’s childhood immunization programme.

About the diphtheria outbreak in Cox's Bazar

Between 8 November 2017 and 11 January 2018, as many as 31 deaths and 3,954 suspected cases of diphtheria have been reported from Cox's Bazar. Nearly 10,594 contacts of these suspected cases have been put on diphtheria preventive medication.

WHO has released US\$1.5 million from its Contingency Fund for Emergencies to scale up the response to diphtheria among the Rohingya population in Cox's Bazar, Bangladesh, over the next six months.

The funds are being used to support immunization; provide essential medicines and supplies; improve capacities for laboratory testing, case management and contact tracing; and engage with communities.

Diphtheria

Diphtheria is an infectious disease caused by a bacterium which primarily infects the throat and upper airways, and produces a toxin affecting other organs. The diphtheria toxin causes a membrane of dead tissue to build up over the throat and tonsils, making breathing and swallowing difficult. The disease is spread through direct physical contact or from breathing in the aerosolized secretions from coughs or sneezes of infected individuals.

Vaccination against diphtheria has dramatically reduced deaths and disease, however diphtheria is still a significant child health problem in countries with poor EPI coverage. In countries endemic for diphtheria, the disease occurs mostly as sporadic cases or in small outbreaks. Diphtheria is fatal in 5 – 10% of cases, with a higher mortality rate in young children. Treatment involves administering diphtheria antitoxin to neutralize the effects of the toxin, as well as antibiotics to kill the bacteria.

Diphtheria vaccine is a bacterial toxoid, i.e. a toxin whose toxicity has been inactivated. The vaccine is normally given in combination with other vaccines as DTP vaccine or pentavalent vaccine. For adolescents and adults the diphtheria toxoid is frequently combined with tetanus toxoid in lower concentration (Td vaccine).

WHO recommends a 3-dose primary vaccination series with diphtheria toxoid, followed by a booster dose.

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