

Organización Panamericana de la Salud

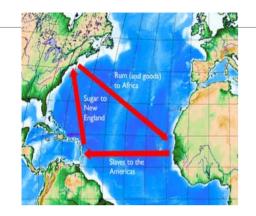
Oficina Regional de la Organización Mundial de la Salud

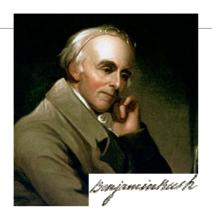
Dengue Situation in the American Region. Integrated Management Strategy for Dengue Prevention and Control.

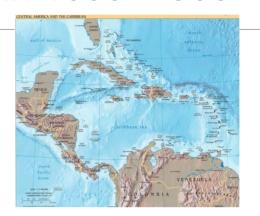
11th Meeting of the Caribbean National Epidemiologists and Laboratory Directors. Port of Spain May 9-13, 2011

Christian Frederickson PAHO/WHO Costa Rica.

Dengue has had a long history in the Americas with first outbreaks noted in 1600 -1900









1635: The first dengue epidemic reported in Martinique and Guadeloupe.

1780: Benjamin Rush described a large outbreak in Philadelphia, Pennsylvania in the United States. 1827 First multi
country outbreak
reported in Virgin
Islands, Cuba,
Jamaica,
Venezuela and
cities in the US.)

1912: Dengue
Epidemic in
Panama, Chile
and Argentina
North.

Dengue in the Americas 1940 - 2000







1939-1945 WORLD WAR II DEN-1, 2, 3, 4 circulated from tropical Asia to the rest of the world.

1947-1970 Eradication of *Ae. Aegypti*OPS – CD1.R1





1971-1990 DETERIORATION OF VERTICAL PROGRAMMES 1996 -1997:
CD39.R11
Continental
Plan for
expanding and
intensifying the
war against
Aedes aegypti

1940

1950

1960

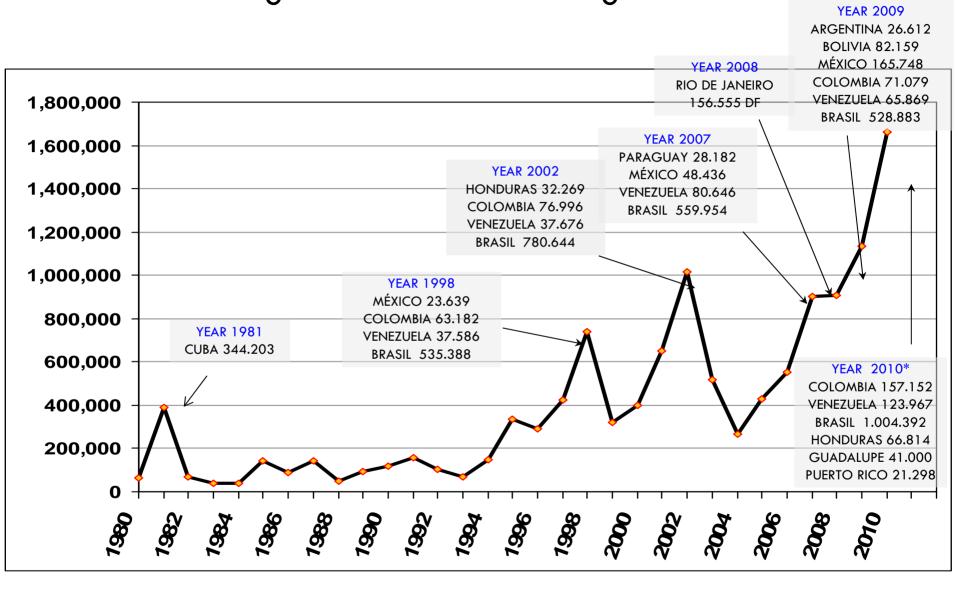
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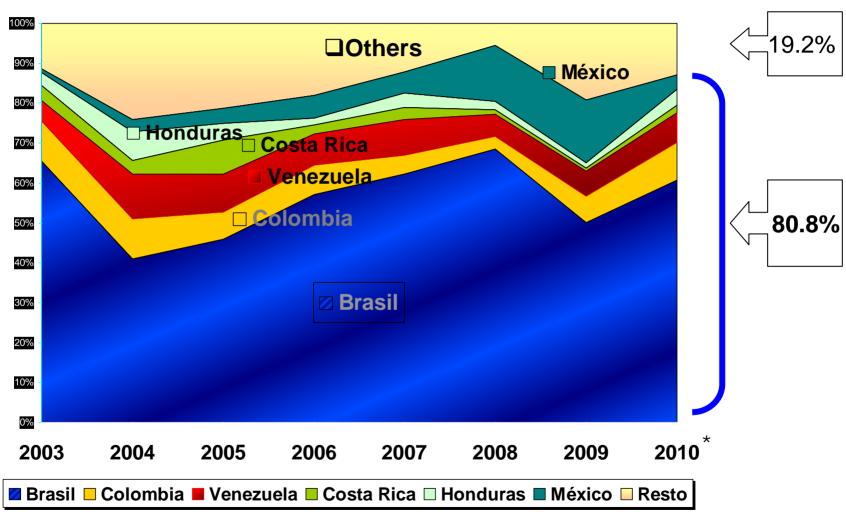
Evolution of Dengue in the America Region 1980-2010



Source: Countries repot. * 2010: preliminary data

Dengue Situation 2010

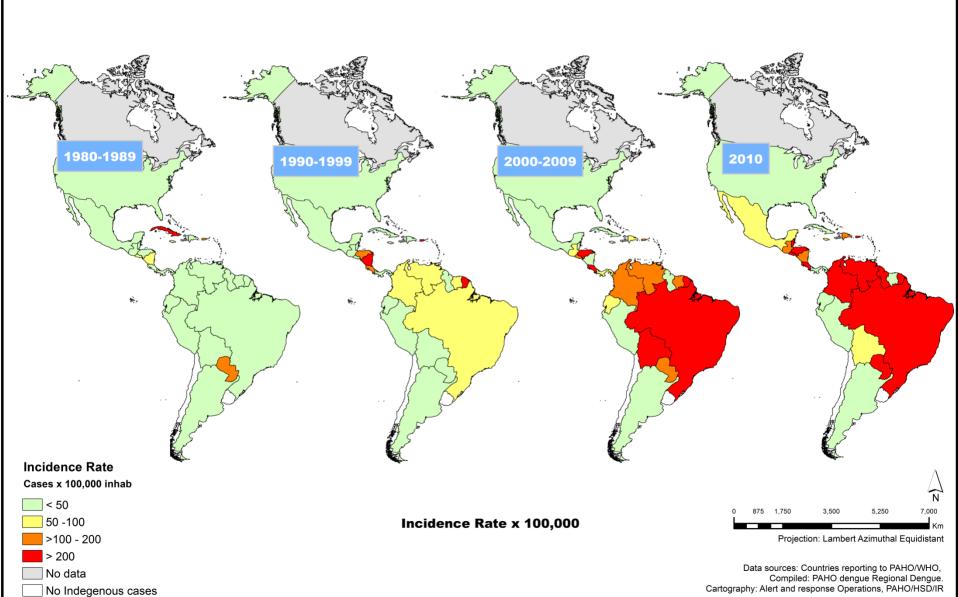
Countries Most Affected by Dengue Morbility. 2003-2010



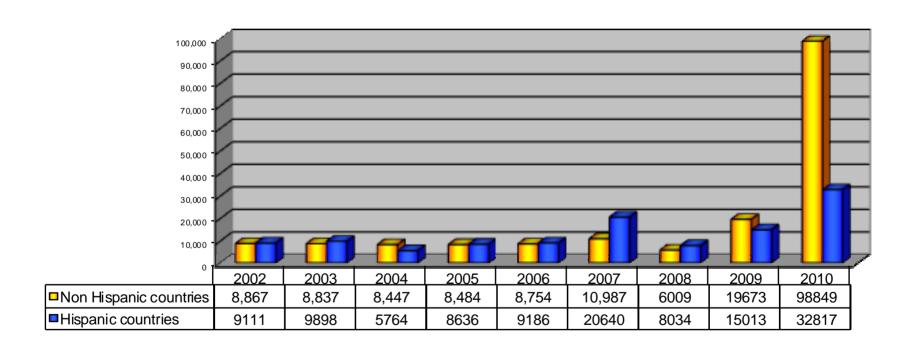
Source: Country reports to PAHO



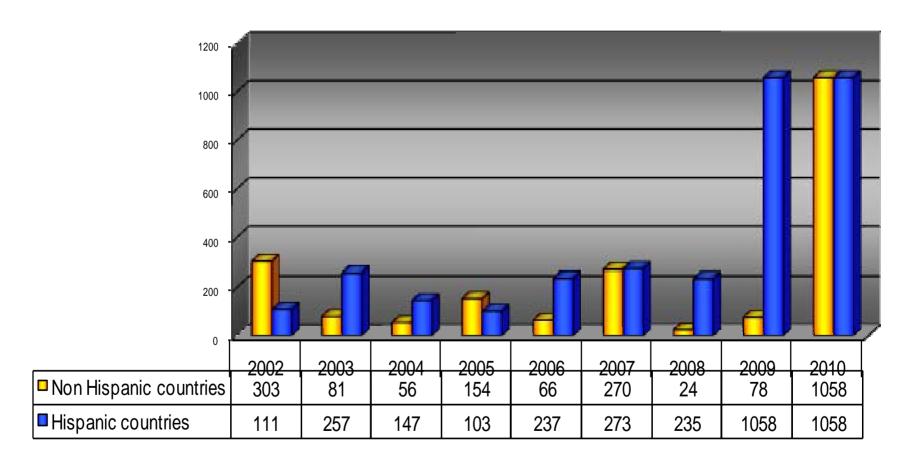
Dengue Incidence in the Americas, 1980-2010



Dengue Cases in the Caribbean 2002-2010

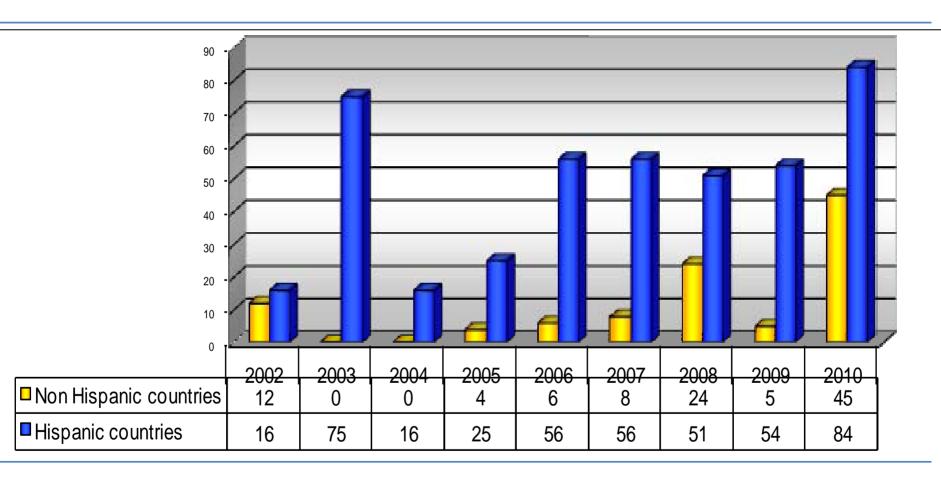


Dengue Haemorrhagic Fever in the Caribbean 2002-2010



■ Non Hispanic countries ■ Hispanic countries

Deaths due to Dengue in the Caribbean 2002-2010



□ Non Hispanic countries □ Hispanic countries

Dengue Situation 2011

Dengue in the Americas 2000-2010 PAHO/WHO country support. DENGUE GUIAS PARA EL DIAGNÓSTICO TRATAMIENTO, PREVENCIÓN Y INTERNATIONAL DENGUE GUIDELINES FOR DIAGNOSIS. **Epidemiologic** TREATMENT, PREVENTION AND CONTR Surveillance Social DENGUE NUEVA GENERACION Guías de atención par communicatio **REGULATIONS** enfermos en la región Y CONTROL DEL DENGUE de las Américas EN LAS AMERICAS New edition Strategy Laboratory **Integrated Vector Management** Patient care World Health Organization **PAHO** CE142.R9, 2008 2007 2010 2009 2003: CD44.R9 OPS Entry into force 2001 New guide New guide for IHR (2005) Integrated CD43.R4 diagnosis, the treatament management of patients with treatment, New strategy prevention and dengue generation of 2007 control of (EGI - Dengue) programmes CSP27.R15 dengue 2. GT - Dengue

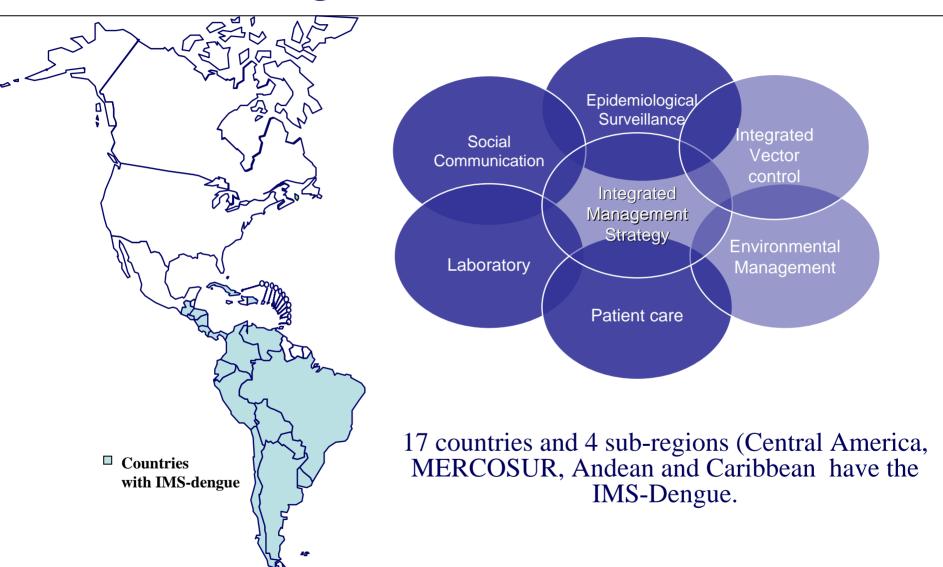
Factors that Affect Dengue Transmission



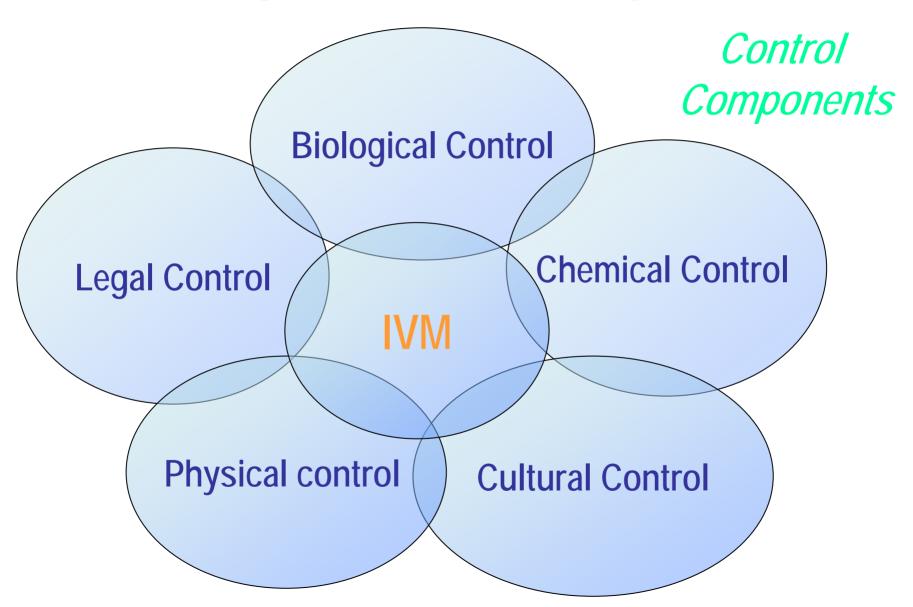
- 1. Unprecedented population growth (megacities)
- 2. Uncontrolled and unplanned urbanization
- 3. Inadequate environmental management
- 4. Migration and tourism
- 5. Climate change
- 6. Poverty and extreme poverty



Integrated Management Strategy (IMS-Dengue) for Dengue Prevention and Control.



Integrated Vector Management



Integrated Vector Management

Control Components

Biological Control

Fish, Bti, Bs

Legal Control

Legislative Support

IVM

Chemical Control

IRS, ITN, Space Spray, larviciding

Research, Analysis, Evaluation, Implementation for Judicious Use

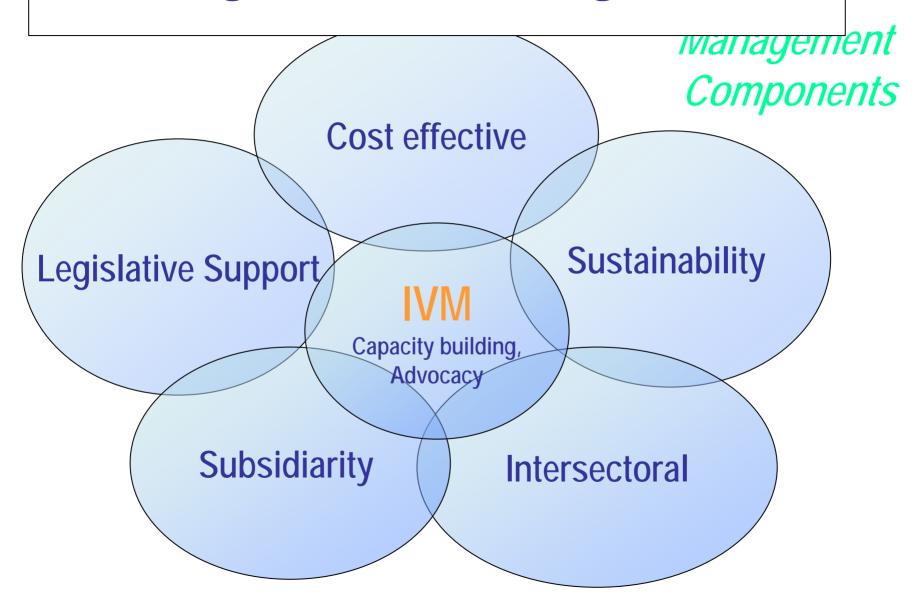
Physical control

Elimination of breeding sites, preventing man vector contact

Cultural Control

community participation

Integrated Vector Management



IMS-DENGUE ELABORATION IN THE REGION OF THE AMERICAS

CENTRAL AMERICA and the CARIBBEAN

ANDEAN REGION

SOUTHERN CONE

Country	Date of Preparation	
Subregional EGI for CA-DOR	Jan. Revise	2004 d 2005
Nicaragua	March	2004
Guatemala	August	2004
Honduras	Sept.	2004
Dominican Rep.	Nov	2004
Costa Rica	Dec.	2004
El Salvador	Feb.	2005
Panama	July	2005
Caribbean IMS	July	2009
Guyana	Feb	2011
Trinidad and Tobago	May?	2011

Country	Date of Preparation	
Venezuela	May	2004
Colombia	March	2006
Peru	Feb.	2007
Ecuador	Oct.	2007
Bolivia	Dec	2008

Country	Date of Preparation
Brazil	2003
Paraguay	May 2005
Subregional EGI for MERCOSUR	May 2007
Argentina	June 2007
Uruguay	April 2008
Chile	Sep 2008

NB: The resources devoted to the IMS-Dengue continue to be limited for its implementation and evaluation.

Monitoring and Evaluation of IMS-Dengue.

- OBJECTIVES:
- To promote the implementation process
- to provide practical recommendations in order to improve management issues,
- to make technical adjustments and
- to give greater emphasis on primary environmental care and extrasectorial actions.
- The Dengue International Working Group (GT-dengue)
 had been mobilized and the evaluation is done in
 accordance to the technical indicators and within all
 the EGI-dengue components.
- In 2008-2011 a total of 13 countries were evaluated.



Caribbean Dengue Activities 2002-2011

2011	➤ February and early 2011, Guyana and Trinidad and Tobago: Workshop for the elaboration of Integrated Management Strategy for dengue prevention and control (IMS-dengue).
	➤ September 2010, Puerto Rico: Workshop for the elaboration of Integrated Management Strategy for dengue prevention and control (IMS-dengue).

>February 2009 Aruba: Technical assistance for dengue outbreak response in IVM.
>October 2008, Trinidad and Tobago: Official mission for dengue outbreak response.

2009

2007

2004

2002

➤ September 2008, Puerto Rico: Mission for the evaluation of the National Dengue program.

➤ June 2009 Martinique: Workshop Elaboration of Integrated Management Strategy for dengue prevention and control (IMS-dengue) for the Non Hispanic Caribbean sub-region.

September 2007, Guyana: Technical assistance for dengue outbreak response in entomology and patient care.

➤ March 2007, Martinique and French Guyana: Visit to the French Departments Dengue programs.

➤ September 2004: Evaluation of COMBI Plans Barbados, Santa Lucía, Trinidad & Tobago.

➢ June 2004, Trinidad and Tobago: COMBI Plans Workshop for Barbados, Belize, Santa Lucía, Trinidad & Tobago

➤ September 2002, Trinidad and Tobago: Mission for the evaluation of the National Dengue programme.

Communication for Behavioural Impact (COMBI)

Progress in the Implementation of the COMBI methodology. Colombia, Peru, Paraguay





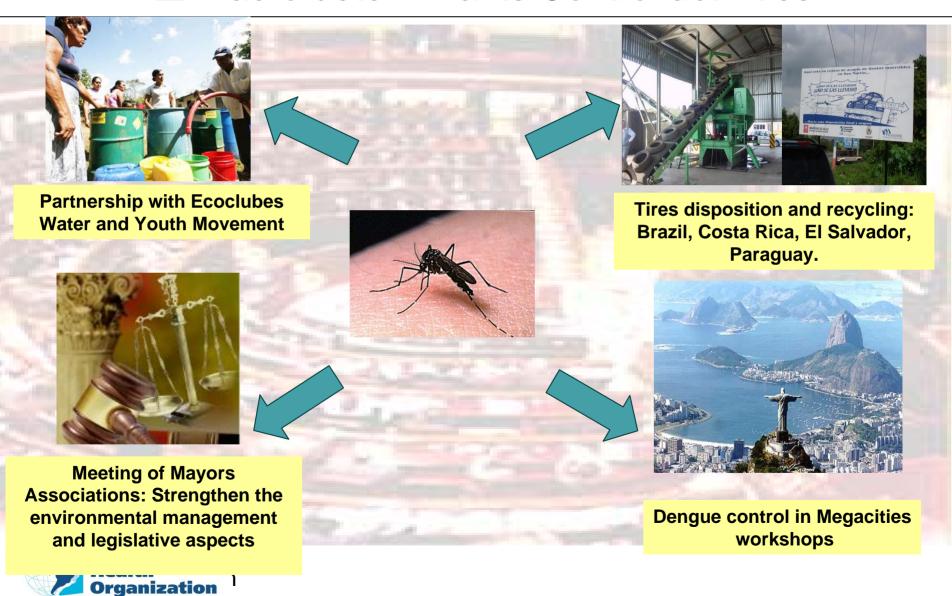


Mes: Enero





Resolution CSP27.R15 ☑ Macro determinants Control activities



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De la Salud

LESSONS LEARNED: National IMS-dengue

- ✓ Greater intrasectoral coordination (Technical and Management) and interprogrammatic efforts in order to guarantee the reduction of the fatality case and confront the increase of severe dengue cases.
- ✓ Greater coordination with other sectors: Environment, Education, Private Business, Municipal Government and Community groups.
- ✓ New programs at the local level: COMBI, Eco-Clubs, Eco-Health.
- ✓ Increased capacity for resource mobilization at the country level.
- ✓ New tools being used by programs: LIRA, Mosquito capture devices, GIS.
- Increased capacity to respond to outbreaks and the anticipation of outbreaks/epidemics.
- Criteria unifications: diagnostic of Dengue, patient care, entomological indexes







Recycling tires, Brazil

COMBI, Guatemala

Communication for Behavioral Impact Dengue COMBI Plans Caribbean region

Supported by:

- Centers for Disease Control and Prevention (CDC)
- WHO Mediterranean Centre for Vulnerability Reduction, Tunis
- Pan American Health Organization
- Caribbean Epidemiology Centre (CAREC)
- World Health Organization
- Ministry of Health, Trinidad and Tobago.

COMBI Objectives

- March 2004 Trinidad: Inspect the homes in order to collect and discard refuse and the containers in disuse.
- March 2004 Santa Lucia: Wash with brushes the barrels, store water in covered barrels, and/or anoint chlorine on the internal surface of the container, to place them mouth below.
- March 2004 Barbados: Ensure that the owners of businesses of tires send them to the spillway in a weekly pattern and/or keep them under ceiling.

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Priority for Dengue Control and Prevention

- Promote collaboration between Ministries to combat Dengue such as Ministry of Education Tourism, Water and Sanitation and Municipalities.
- Strengthen Clinical and patient care capacities to avoid deaths.
- Strengthen Laboratory Diagnostics training
- Implementation of Evidence based Control using Integrated Vector Management for effective Vector Control.
- Strengthen human resource capacities especially in the monitoring and control of the vector Aedes aegypti.
- Together with National and International Universities promote research in local solutions and the application of new methodologies for monitoring and control of Aedes aegypti.
- Strengthen Outbreak Response.

Our challenges



While We Live in a Tropical Paradise

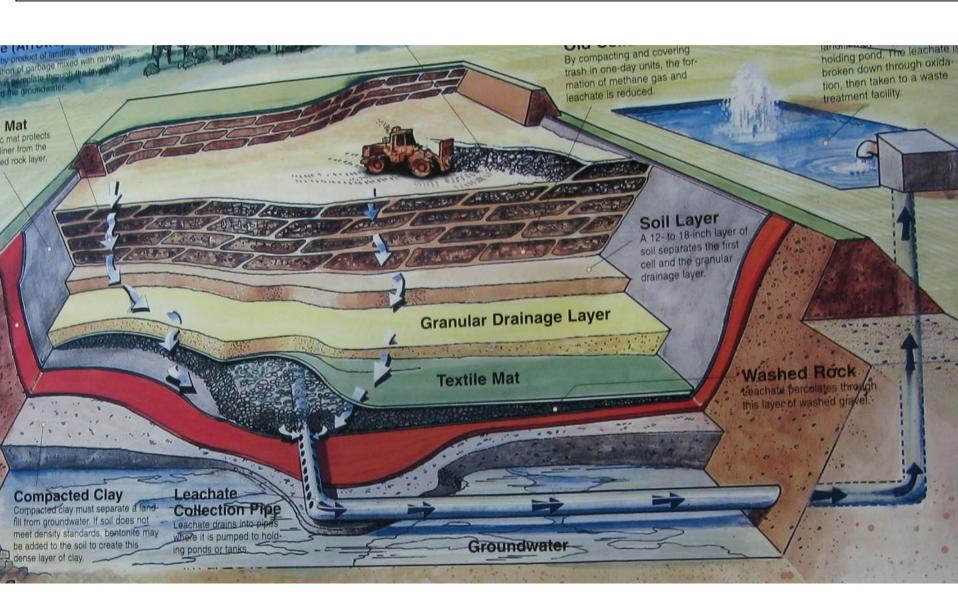


The Problem of Solid Waste Disposal is Universal





The solution will take time but must be done.



Thank you for your attention Ouestions?

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