

HEALTH CLUSTER BULLETIN

CHOLERA OUTBREAK IN HAITI – TUESDAY, NOVEMBER 23, 2010 – #4

SITUATION OVERVIEW

The situation in Haiti is urgent and will only become worse over the coming weeks. One month after the initial cases of cholera, 24 Non-Governmental Organizations (NGOs) are now providing cholera response health services in Cholera Treatment Centers (CTCs) and Cholera Treatment Units (CTUs). Throughout Haiti, 36 CTCs are operational with a total bed capacity of roughly 2,830. These centers and their current capacity will not be sufficient to meet the population's needs as the outbreak grows.



A serious concern has become ever increasing pressure on CTCs to treat patients. Renewed emphasis must be placed on implementing the first two components of the National Cholera Response Plan, which aims to protect families at the community level and strengthen primary health centers already operating across the nation.

CTUs, which are smaller than CTCs and are attached or near an existing health center, have not scaled-up their capacity quick enough. Increasing the number of CTUs throughout the country is essential for triaging patients and relieving the burden of care on CTCs. The operational role of the CTU also prevents primary health centers from becoming overwhelmed with cholera patients, which results in neglect of those with non-cholera conditions.

The Ministère de la Santé Publique et de la Population (MSPP) and Pan American Health Organization (PAHO/WHO) coordinate the Health Cluster.

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Health Cluster partners are asked to contribute to this bulletin with information on needs and activities as well as corrections to content, by emailing haiclsan@paho.org (subject heading: Health Cluster Bulletin). For useful information on meetings, guidelines, and health facility locations, visit: <http://haiti.humanitarianresponse.info>.

At the community level, points for Oral Rehydration Centers need to be increased rapidly and promoted widely. These centers can serve as a community level point of contact for referral and have the resources to treat non-life threatening cases. In Port-au-Prince, the issue of referral of patients has not been resolved and there is still a need to increase training of facilitators of health promotion activities.

Médecins du Monde-France has developed a model structure for cholera response in Port-au-Prince. They are currently running 7 CTUs and have 70 hygiene promotion leaders working in the community surrounding those sites to reduce cholera spread and accelerate treatment of sick patients. For severe cases, MDM-F has an ambulance service that can take patients from their CTUs to nearby CTCs.

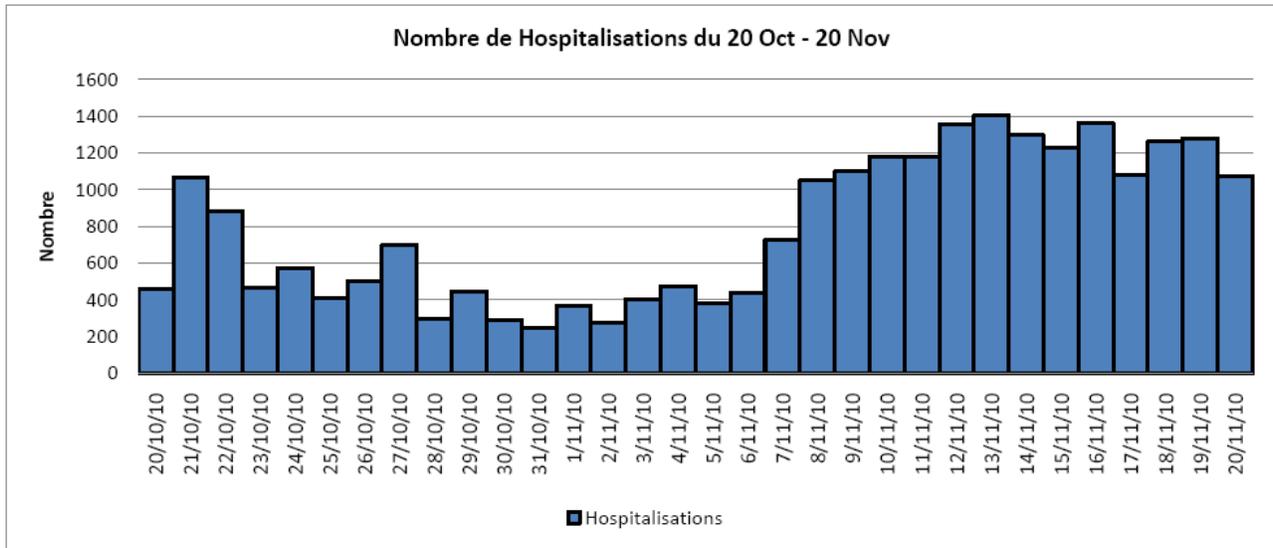
Between November 19 and November 22, PAHO/WHO, in coordination with the MSPP and WFP, distributed 87 tons of essential medicines and supplies. This operation, which included all nine departments outside the West, replenished medicines in areas already affected and prepositioned supplies for treatment of roughly 30% of the potential caseload over the coming months. This week, medical supplies are being distributed to 23 hospitals and health centers in metropolitan Port-au-Prince.

Taking into account stockpiles at the PAHO/WHO warehouse PROMESS, as well as other agency warehouses, there appears to be sufficient supplies for treatment today. However, in many health facilities throughout the country, medical professionals are only using IV fluids when patients present with cholera symptom. In most cases, simple rehydration salts are enough for treatment and the over use of IV fluids is depleting supplies more rapidly than is necessary. Extensive and regular training activities need to be undertaken to address this issue.

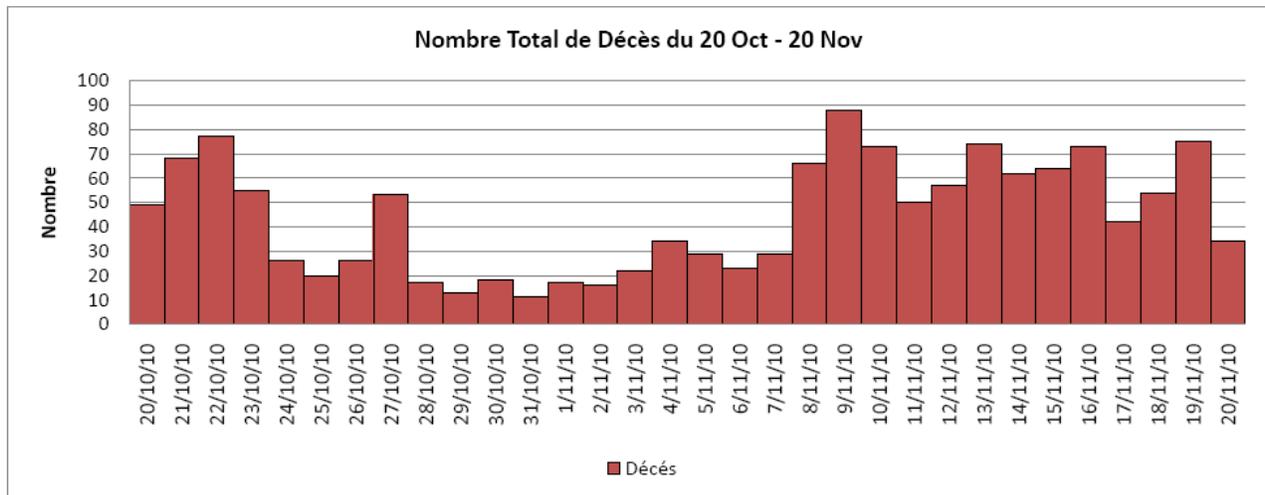
The most affected departments in terms of higher numbers of cases and deaths are: Artibonite, Nord, Nord-Ouest, Ouest (including Port-au-Prince) and Nord-East. Over the last three days reports from health partners in Artibonite department indicate the following rural areas outside of Gonaïve are seeing an increase in case activity: Lalomas (Saint Michel), Gros Morne, Cator, Odige, Bayonnais, Marmelade, Platon, as well as Bassin and Vieux Cordes. In Petite Rivière de l'Artibonite, reports are of an elevated number of cases from the rural areas in Perodin (60 cases) and Medor (105 cases with 22 deaths). In the North, Cap-Haïtien is in need of supplies and human resources with the number of cases increasing. Substantial increase of cases is reported in Le Borgne.

EPIDEMIOLOGY

As of Tuesday, November 23, 2010, the the Ministère de la Santé Publique et de la Population (MSPP) reported an accumulative of 60,240 hospital visits, 25,248 hospitalizations, and 1,415 deaths due to cholera at the national level. Cholera cases are registered in the ten departments Haiti is divided in.



Total number of hospitalized cases (20 October – 20 November)



Total number of deaths (20 October – 20 November)

In Port-au-Prince and metropolitan area (Carrefour, Cite Soleil, Delmas, Kenscoff, Petion Ville, Port-au-Prince, Tabarre and Croix des Bouquets) the total hospital visits has increased to 5,778 with 2,140 hospitalization and 95 deaths (87 at the health services level and 8 at the community level) which represent an in-hospital case fatality rate of 4.1%.

With respect to the number of deaths at the national level, of the 1,415 deaths recorded by the MSPP, 67% occurred at the health services level and 33% at the community level. The in-hospital case fatality rate at the national level is 2.3%.

DEPARTMENT RESPONSE ACTIVITIES

North

The situation in Cap Haitien has improved, making it easier for health professionals to move and support cholera response operations. Over the weekend PAHO/WHO shipped IV fluids to the WFP warehouse and MSPP will help in its strategic distribution. On November 22, health training was provided by a PAHO/WHO doctor in Quartier Morin which focused on treatment of patients. In particular, the training emphasized that IV fluids are not the only method for treatment of patients presenting symptoms.

The CTC established at the Cap Haitien gymnasium continues to see a range of 150-200 new patients each day. The overall capacity of the facility has been increased to 400 beds. In Quartier Morin a new CTC is being planned and is anticipated to be opened within the next few days.

Due to the security situation and the upcoming elections, the health cluster in Cap Haitien will be postponed until next week.

North East

In the North East department, Ouanaminthe is the most affected area. Health leaders would like to establish a CTC and more CTUs. With 13 communes, the North East department is prepared to have up to one CTU per commune. Currently, there are 4 CTUs functional with 4 more expected by the end of the week. One of them is working in Fort Liberte. MERLIN has been appointed to run the CTC in Ouanaminthe and the CTU in Fort Liberte. Other partners on the ground include: Plan C, Haitian Red Cross, Caritas, MINUSTAH, and UNDP as OCHA focal point.

Areas in need of support for the department are disinfection procedures, waste management, and isolation measures. Provision of WASH technical documents and procedures to the Health Director and proposed training for the 6 staff in Fort Liberte and staff to be appointed in Ouanaminthe will be undertaken to support department health authorities.

There is a need for an urgent assessment of water quality in this department.

Artibonite

In L'Estere the Haitian Red Cross /Spanish Red Cross continues to support the CTC run by the Cuban Brigade. At the moment 115.000 water liters have been provided to the CTC for patients, family and staff. Average consumption per patient is 60 L/day. 500 cholera pamphlets have been delivered to the CTC. The number of latrines in the CTC was increased for a total of 8.

In Marchand Dessalines the Haitian Red Cross/Spanish Red Cross is supporting the CTC with a disinfection team and assessing water facility options with MSF Spain, which is managing the CTC.

In Dessalines Save the Children is reinforcing prevention messaging, hygiene promotion and distributing aquatabs, soap, and ORS to 3000 vulnerable households with hospital Claire Heureuse and a network of community health agents and volunteers.

Central

Save the Children is working in Maissade - supporting the MSPP health center in Cholera Case Management and set-up of a CTU with 20 bed capacity and 24/7 function. To date, more than 120 cases have been treated. High mortality is reported in villages near Forge in the Zabriko mountainous area immediately west of Hinche (capital of the Centre department).

West

The French Red Cross (FRC) is working in the West department to rehabilitated 30 Primary Health Centers all of which will have a CTU. The FRC will provide support at different levels (human resources, equipment, training of the staff, management, etc.) which will help with short and long-term health services.. A cholera treatment unite will be installed in each center and the objective is to install specific zones to receive sick people. It represents a capacity of 120 beds (between 3 and 5 in each center) and the most serious cases will be referred to the Cholera Treatment Centers (CTC). As of today, 10 cholera treatment units have been installed and are ready to receive patients in Port-au-Prince.

MDM-F is operating seven (7) Cholera Treatment Units (CTUs) in Port-au-Prince and has established a system of ambulances for transfer of severe cases to Cholera Treatment Units. They also have a network of 70 health promoters who work in neighborhoods around these CTUs to provide education and health promotion.

Save the Children is managing two, 24/7 functional CTUs in Gaston Margon (Carrefour) and Delmas 56 with bed capacity of 10. Hygiene promotion is ongoing in 20 camps and surrounding areas through a WASH program. CHF has 10 mobilizers that have been trained using UNICEF methodology to deliver hygiene promotion messages to prevent cholera in Delmas 32, Ravine Pintade, Ave Poupelard, and Ft. National. Mobilizers are educating individuals, families, and communities in the steps to take to prevent cholera, including detailed instructions on how to properly wash hands.

The French Red Cross has preventive activities in 18 camps and 6 neighborhoods in Delmas for the security of 85 000 persons. The hygiene promotion team, supported by a cholera expert in water and sanitation, has worked on the production of technical documents for the training of its teams, in coordination with IFRC and the Red Cross Movement. 28 specialized hygiene promoters and 40 disinfection staff work non-stop at their sites.

In Carrefour, MDM-F has organized two training sessions on cholera chlorination procedures for a total of 80 health workers. This was at the request of the municipal health office. In addition two training sessions on cholera CEP chlorination for 80 health workers of the town of Carrefour at the request of the municipal health office.

In the town of Jeremiah, MDM-F will be opening a CTC with 40 beds and expects completion of the facility by the end of the week. Training of health care providers and hospital staff will also be undertaken by MDM to support the MSPP.

Finally, in partnership with community leaders, MDM-F will increase health promotion, education and epidemiological surveillance, as well as open 10 CTUs, in the following municipalities: Carrefour Charles, Grand Vincent, Previla, Pestel, Moron, Bonbon, Roseau, Apricots, Lopineau, Anse du Clerc. In the same towns, they will also work with community.

In Leogane Save the Children is training health personnel and community health agents on case management and public health prevention measures is ongoing and cases are currently being referred to CTC. Preventive measures and hygiene promotion messages are being conducted throughout Leogane commune through 6 static clinics and mobile medical team of Save the Children.

In Petit Goave, 3 Primary Health Centers, rehabilitated and supported by French Red Cross, are being prepared and staff is being trained to receive cholera cases (Violet, Madeleine and Arnoux). It is important to note that while these cholera facilities may be moving in the coming months, the health centers themselves will remain and serve as an important first line of service.

South

Save the Children is setting up three CTUs with inpatient bed capacity of 20 per unit in the communes of Baintet, Belle Anse, and Thiotte - there are confirmed cases in Jacmel, La Valle, and Baintet. Hygiene Promotion Message in IDP camps in Jacmel and in the communes of Baintet, Bella Anse, and Thiotte is being conducted by community health agents along with provision of enabling supplies like soap and aquatab.

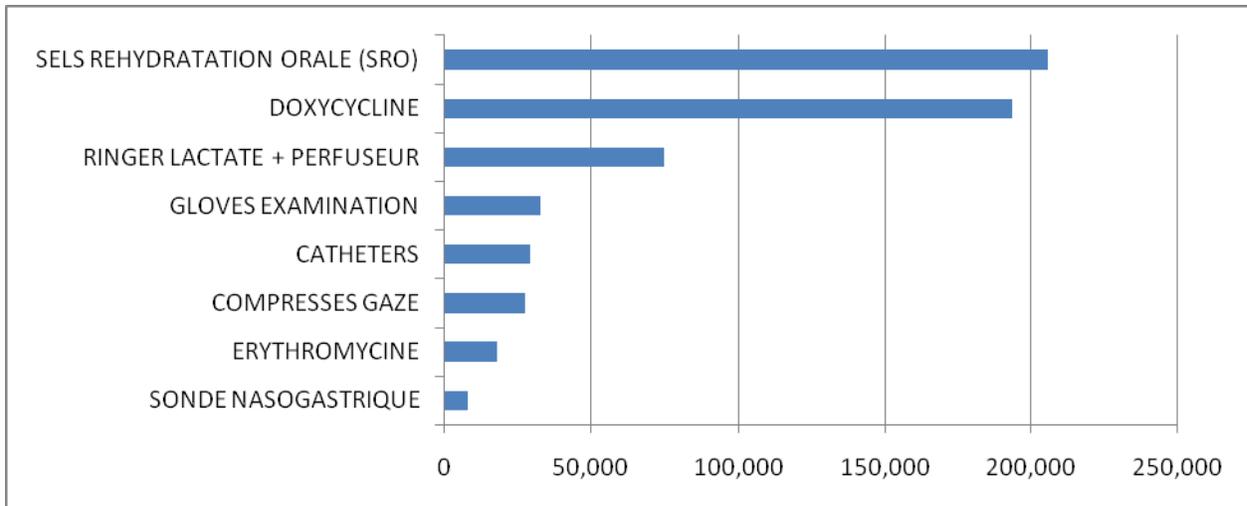
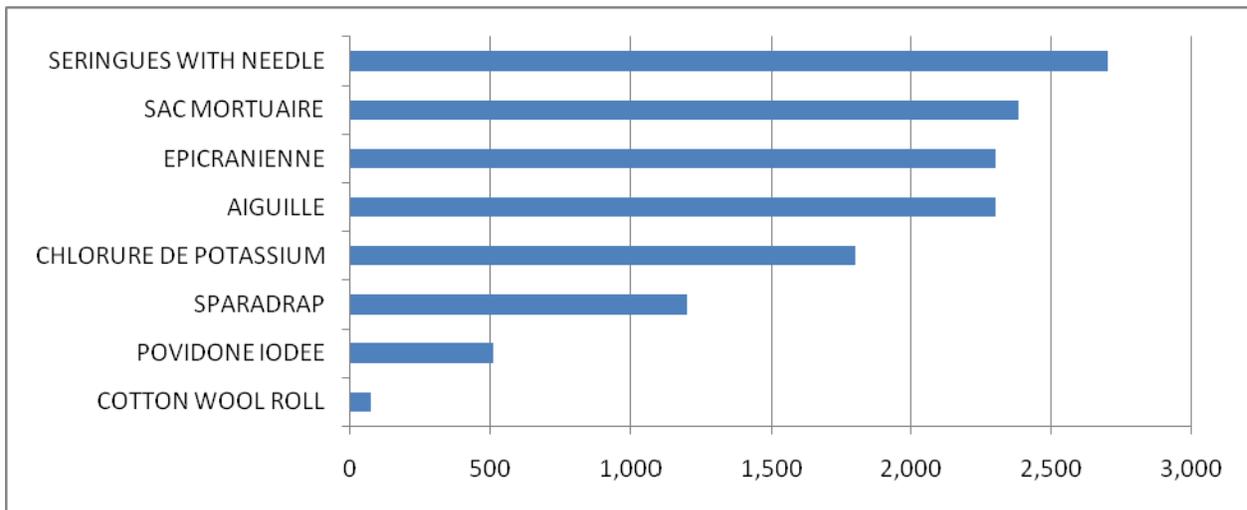
SUPPLIES

The Spanish Agency for International Cooperation Development (AECID) is sending 40 tons of medical rehydration supplies as part of the contingency plan initiated to respond to the cholera outbreak. To date, AECID has completed four shipments: three by air (with 34 tons of medicine and equipment for water and sanitation) and one by a sea cargo (with 17 tons of rehydration salts). This material will be used to support the work of several NGOs (MSF, Red Cross/Spain, and Medecins du Monde) and PROMESS.

In addition to 11.5 million water purification tablets, 7.8 tons of HTH, 43,810 units of soap, and 2,200 kg of oral rehydration salts previously shipped by AECID, the agency provided DINEPA with a supply of 88 million water purification tablets.

SUMA LOGISTICS SUPPLIES SYSTEM

The following charts summarize the units of medical supplies delivered by PROMESS during the last week:



NGOs are invited to use SUMA to monitor their inventories and consolidate their supplies information. Implementing the SUMA system in an emergency facilitates the preparation of reports.

A special list of key items which are important for dealing with the cholera outbreak has been drawn up. Staff can normally be trained in a day, and the software is provided [free-of-charge](#) to all organizations wishing to use it.

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REFERENCES

- [Health Cluster](#) website.
- [Ministère de la santé publique et de la population](#) (MSPP).
- [Pan American Health Organization](#) (PAHO/WHO).