Cholera in the Americas - Situation summary

Between epidemiological week (EW) 1 and EW 38 of 2016, a total of 29,630 cholera cases were reported in four countries of the Americas: the Dominican Republic (1,069), Ecuador (1), Haiti (28,559), and Mexico (1). Of the total cases, 96.4% were reported in Haiti. Table 1 shows the number of cholera cases reported in selected countries between 2010 and 2016.

In the Dominican Republic, a total of 1,069 suspected cholera cases, including 18 related deaths (case fatality rate: 1.7%), were reported from EW 1 to EW 38 of 2016. As shown in Table 1, this is almost twice the number of cases reported in 2014 (603 cases, including 11 deaths) and 2015 (546 cases, including 15 deaths), although the case fatality rate is lower than those registered in 2014 (1.8%) and 2015 (2.7%).

In Haiti, a total of 28,559 suspected cholera cases, including 267 related deaths (case fatality rate: 0.9%), were reported from EW 1 to EW 37 of 2016. The number of cases and deaths reported up to EW 37 of 2016 exceeds the number of cases reported in 2014 and the national case fatality rate remains as high as reported in 2015; note, the case fatality rate in 2014 was higher (1.1%).

In October 2016, Hurricane Matthew seriously affected the departments of Grand’Anse, Ouest, Nord-Ouest, and Sud; this could result in an increase of cholera cases. A statement issued by the Haiti Ministry of Public Health and Population (MSPP), following the hurricane, reported that as of 9 October 2016, there is a total of 117 (including 17 deaths) cholera cases in the Sud department and 166 cases (including 3 deaths) in the Grand’Anse department.3

Information on the cholera situation and the impact of Hurricane Matthew is updated periodically by the Haiti MSPP and is available at:

Detailed information on the support the Pan American Health Organization / World Health Organization (PAHO/WHO) is providing in response to Hurricane Matthew in Haiti is available at:

On 23 September 2016, Mexico4 reported a confirmed case of cholera in the state of Nayarit. The case was laboratory confirmed as Vibrio cholerae toxigenic serogroup O:1, serotype Ogawa. Fifty-nine (59) suspected cases were identified through an active case search carried

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1 Isolated cholera case, Vibrio cholerae serogroup O1, serotype Ogawa, biotype El Tor no toxigenic
2 Preliminary data subject to change as new information is received.
4 Data reported by the Mexico International Health Regulations National Focal Point.

out at homes in the surrounding blocks of the case’s domicile. Samples were taken and analyzed and all resulted negative for V. cholerae. Local and state health authorities carried out prevention and control activities including coordination between areas of Protection Against Health Risks to measure residual chlorine in drinking water networks, take food samples, carry out surveillance using the Moore swab, and establish health promotion measures.

Table 1. Cholera cases in selected countries in the Americas, 2010-2016.

<table>
<thead>
<tr>
<th>Year</th>
<th>Cuba</th>
<th>Dominican Republic</th>
<th>Haiti</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cases</td>
<td>Deaths</td>
<td>Cases</td>
</tr>
<tr>
<td>2010†</td>
<td>0</td>
<td>0</td>
<td>191</td>
</tr>
<tr>
<td>2011†</td>
<td>0</td>
<td>0</td>
<td>20,851</td>
</tr>
<tr>
<td>2012†</td>
<td>417</td>
<td>3</td>
<td>7,919</td>
</tr>
<tr>
<td>2013†</td>
<td>181</td>
<td>0</td>
<td>1,954</td>
</tr>
<tr>
<td>2014†</td>
<td>76</td>
<td>0</td>
<td>603</td>
</tr>
<tr>
<td>2015</td>
<td>65</td>
<td>0</td>
<td>546</td>
</tr>
<tr>
<td>2016</td>
<td>0</td>
<td>0</td>
<td>1,069**</td>
</tr>
</tbody>
</table>

* Data presented in this Epidemiological Update differ from those presented in the Epidemiological Update of 21 July 2016 due to retrospective adjustments made by the Ministry of Public Health and Population. Available at: http://mspp.gouv.ht/site/downloads/Profil%20statistique%20Cholera%2027eme%20SE%202016.pdf
** Data up to EW 38 of 2016
*** Data up to EW 37 of 2016

Advice to national authorities

Given the cholera situation on the island of Hispaniola, the PAHO / WHO recommends that Member States strengthen active surveillance systems for early detection of suspected cases and conduct rapid diagnostic laboratory confirmation of cases, in order to provide adequate treatment and prevent the spread of cholera. PAHO/WHO encourages Member States to continue with their efforts to ensure and maintain adequate sanitation and access to safe drinking water, in order to reduce the impact of cholera and other waterborne diseases.
References


Related links:


- PAHO cholera health topic: www.paho.org/cholera

- Information on WHO’s statement relating to international travel and trade to and from countries experiencing outbreaks of cholera: http://www.who.int/cholera/technical/prevention/choleratravelandtradeadvice231110.pdf

