



South Asia Earthquake Health Situation Report # 18

29 October 2005

Health Cluster partners who wish to include information here should write to health@whopak.org copied to southasiaearthquake@who.int.

Highlights

- Acute Respiratory Infection (ARI) is the most common diagnosis reported by almost all health facilities, field hospitals and mobile teams in Muzaffarabad, Bagh and Rawalakot. One child has died of an ARI in Muzaffarabad.
- WHO established in Abbas Hospital a Coordination Cell for the measles and tetanus vaccination campaign. The campaign is expanding with more mobile vaccination teams to cover remote areas around Muzaffarabad.
- There are no current reports of measles and no reported outbreaks of major communicable diseases. The total number of reported tetanus cases has increased from 104 to 113 in 3 days time, with related deaths now at 22.

Health impact

- The proportion of deaths due to injury reported in the affected areas remains high as seen in Figure 1. In Bagh, a larger number of consultations was due to ARIs than to injuries (see Figure 2).



The sanitary conditions of affected populations living in temporary shelters are in need of vast improvement. Source: Chris Black, WHO

Figure 1: Trend of proportional morbidity in Balakot from 24 to 26 October 2005

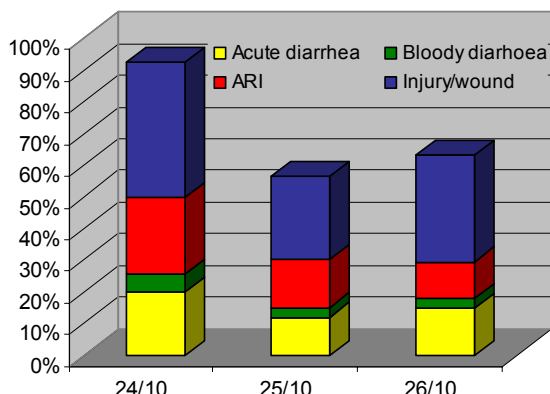
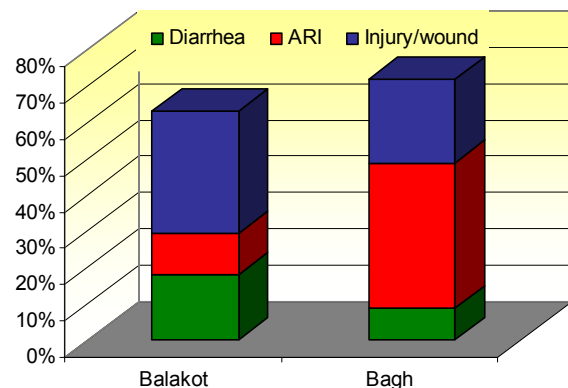


Figure 2: Percentage of patient diagnoses in Bagh and Balakot on 26 October 2005



Health response

Communicable disease control and surveillance and outbreak response

- One patient with suspected Crimean Congo Hemorrhagic Fever (CCHF) was airlifted from Bagh to the Pakistan Institute for Medical Sciences (PIMS) in Islamabad. Tests at PIMS confirmed the patient does not have CCHF. A blood sample has been sent to South Africa for a final diagnosis and results are expected in 4-5 days.
- The vaccination campaign against measles and tetanus in Muzaffarabad continues, with 24 teams; One is stationed at the Abbas Hospital and 23 are mobile.
- One case of suspected Acute Watery Diarrhoea was reported in Balakot and is currently being investigated.

Medical care and referral systems

- In Balakot, consultations increased from 2,339 (on 24 October) to 3,358 (on 25 October). The number of reporting health clinics decreased from 16 to 12 and the average number of consultations per clinic has increased from 145 to 279 (seen at Figure 3). This is due to people moving down from higher rural areas to Balakot.
- In Muzaffarabad, the number of consultations is increasing in some hospitals, while at others it remains stable. At the Abbas Institute for Medical Sciences (AIMS) the number of consultations increased from 294 on 24 October to 477 on 25 October, while at the Pakistan Islamic Medical Association (PIMA) Clinic the number increased from 607 to 643 (see Figure 4).

Figure 3: Number of total consultations and average number of consultations per clinic in Balakot

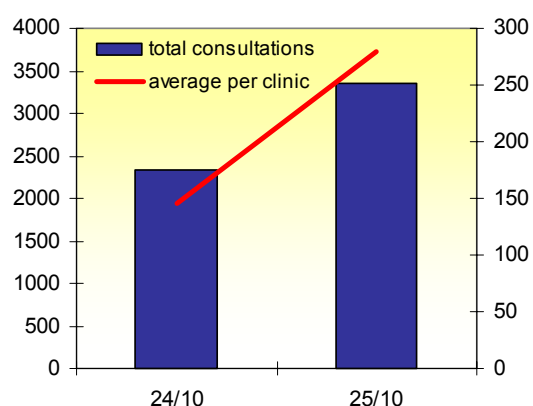
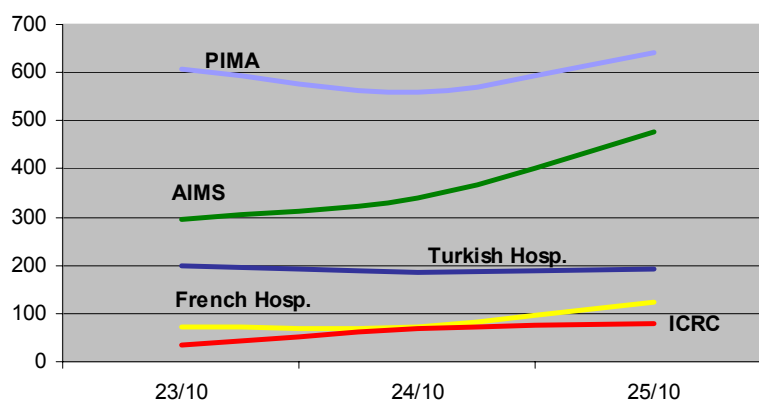


Figure 4: Number of total consultations per hospital in Muzaffarabad



- The Spanish Red Cross reported a drastic reduction from 150 to 95 consultations at their Out Patient Department on 26 October. No cases requiring inpatient services were received.
- The World Food Programme (WFP) is providing nutritional packages for patients, their attendants and all hospital staff run by NGOs.
- The WHO medical mobile teams in Bheri have treated over 300 patients per day. Medicine stocks have been replenished by the Pakistani authorities.
- The NGO International Medical Corps (IMC) examined more than 1,000 patients in two Basic Health Units (BHUs) in tent villages in Balakot and Ghari Habibullah. A third BHU will be set up in Batagram tent village.
- The NGO MDM has moved their mobile teams from Balakot to serve remote areas.

- WHO is supporting the TB Programme to re-establish TB DOTS at 29 locations by setting up large tents for temporary outpatients and microscopes to replenish destroyed equipment and facilities.

Environmental Health

- The NGO Action Against Hunger (ACF) established 8 water points in Balakot Town and will initiate an emergency latrine program for 400-500 latrines.

Urgent needs on behalf of the Health Cluster

- There are no additional urgent needs to report. Please refer to previous WHO situation reports for urgent needs that remain unfulfilled.

Donations to WHO

Reported donations as at 28 October 2005 against the WHO total requirement of US\$ 27,750,000. Donations to date currently meet 43.8% of WHO total requirements.

Donor	Funding intentions (in USD)	In-kind contributions
Australia	1,899,696	
Australia	379,939 for emergency health kits and their transportation & coordination of delivery	
Canada	1,483,050	
Denmark	483,870	
Ireland	120,192	
Italy	300,481	Kits - 12 Trauma A, 12 Trauma B, 15 New Emergency Health, 5 Diarrhoea Profile D and 5 Diarrhoea Profile F (total value: US\$ 351,000)
Japan	1,000,000 for kits and vaccines	
Monaco	120,192 for supplies	
Norway	250,000	
Slovak Republic	126,622	
Sweden	1,928,020	
Switzerland	100,000	
Turkey	500,000	
UK/DFID	246,913 for New Emergency Health and Trauma Kits and transport	
UK/DFID	864,197 for disease control	
United States	2,000,000	
Total	US\$ 11,803,172	US\$ 351,000