

# Overseas briefs

Source: World Health Organization (WHO)

## **Bubonic plague, Zambia**

As at 3 February 1997, 267 cases of bubonic plague had been reported in Namwala District in the Southern Province of Zambia. Among these, 26 (10%) died and 25 patients were still under treatment. All reported deaths occurred before 26 January. The clinical diagnosis established by the South West Regional Office has been confirmed by a team of experts from the University Teaching Hospital in Lusaka. The strain of *Yersinia pestis* which has been isolated has been shown to be sensitive to tetracycline and streptomycin. The outbreak could be linked to heavy rain and flooding causing rats to invade inhabited areas. Fleas are also abundant. The first human cases presented with inguinal, axillary and cervical abscesses in December and deaths began to occur in early January.

When the first reports of an unusual disease outbreak were received on 24 January, health authorities established treatment centres in the outbreak focus in Kantengwa and satellite centres in Makobo, Chilala and Kabulamwanda. Drugs, medical supplies and protective material have been dispatched to the affected area. All patient contacts are followed up and treated, infected households are disinfected and rodents and fleas destroyed. A team of health workers monitors the situation and intervenes when needed. Movements in and out of the area are also monitored.

Plague is endemic in many countries in southern Africa where natural foci still exist, including Angola, Malawi, Mozambique, Tanzania, Zimbabwe, Madagascar, Namibia and South Africa. The cases reported in Zambia are bubonic plague which is not an airborne infection as is the pulmonary form of plague. There are no restrictions for travellers visiting Zambia, or to transit in airports in the country.

## **Meningitis**

**Togo.** An outbreak of meningitis started in November 1996 in Togo, with 1,235 cases and 151 deaths reported up to 3 February. A team including an epidemiologist from the WHO Office for the Africa region is investigating the outbreak to assess the epidemiology of the outbreak and speed up laboratory confirmation. The work of this team will be further supported by technical experts and materials from non-government organisations. WHO is sending an additional 100,000 doses of vaccine and injection material.

On 7 February, an interagency appeal was issued to raise over US\$ 6 million needed to respond to the threat of epidemic meningitis in countries at risk in the African continent. The agencies behind the appeal are WHO, United Nations International Children's Emergency Fund, Médecins Sans Frontières, and the Federation of the Red Cross and Red Crescent Societies. The appeal is to establish a fund that will ensure the purchase and distribution of vaccine, antibiotics and autodestructible injection material for treatment during the 1997 meningitis season in Africa. WHO has advanced US\$ 1 million to ensure the availability of vaccine pending the outcome of the appeal.

**Burkina Faso.** As at 28 January, 461 cases with 64 (14%) deaths have been reported. Vaccine is available to start a vaccination campaign. Last year a large epidemic of meningococcal meningitis occurred in Burkina Faso with over 42,000 cases reported.

Other countries having reported cases of meningitis are **Ghana** (181 cases, 17 deaths) and **Mali** (180 cases, 26 deaths).

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Contributions covering any aspects of communicable disease are invited. Instructions to authors can be found in *CDI* 1997;21:9.

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