Overseas briefs

Source: World Health Organization (WHO)
This material has been condensed from information
on the WHO Internet site. A link to this site can be
found under 'Other Australian and international
communicable diseases sites' on the CDI homepage.

Meningitis in Rwanda

An outbreak of suspected cerebrospinal meningitis has been reported in the areas of Kayenzi, Nyabikenke and Rutobwe (Gitarama and Kigali Rural prefectures). Health centres recorded 29 cases between 1 September and 6 October, and 11 deaths. In addition to these, 33 suspect deaths which did not occur in health centres have been reported in the affected areas. *Neisseria meningitidis* sensitive to chloramphenicol and ampicillin has been isolated in 2 samples.

An estimated population of around 40,000 is considered to be at risk, and the Ministry of Health has organised an immunisation campaign with the support of WHO, as well as providing health centres with supplies of oily chloramphenicol and ampicillin sufficient to treat all cases. New supplies of drugs and vaccines are being procured with the help of WHO and UNICEF. The situation is currently under control, and the numbers of cases and deaths are decreasing.

Meningococcal disease in Angola

During August-September 1999, an outbreak of meningococcal disease was reported in Yambala, a settlement difficult to access in the municipality of Cubal, province of Benguela. *Neisseria meningitidis* serogroup A was detected by latex test.

Due to the current security situation, an assessment team which visited the area in mid-October was not able to examine patients or collect samples for laboratory diagnosis. However, according to information sources considered to be reliable, clinical features observed by witnesses were compatible with cerebrospinal meningitis. The majority of cases occurred in the age group 18-25 years, with no sex distinction. Reports refer to 253 cases with 147 deaths. It should be noted that 92% of the cases reported had no access to municipal health.

Cholera in Zambia

Following reports of an outbreak of acute diarrhoeal syndrome in Chibombo District, North Central Province, a team from the Ministry of Health visited the district on 13 October 1999 to assess the situation. The outbreak had been laboratory confirmed as cholera on 7 October. The first case identified at the end of September was a person who had travelled to one of the many fishing camps in the area which are located along the Lukanga swamps. The person had become ill while returning to his home village. Further cases were identified who had also travelled to the swamp area.

A rapid response team was activated and requests for assistance and supplies were made. A health education campaign was also initiated in the areas affected. At the time of the visit there had been 9 cases including 3 deaths at health centres and another 3 cases, all fatal, in the community.

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Contributions

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