

Health Information Update

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Event Updated	Country	Hazard	Disease	Event Description	IHR Assessment
2019-01-22	United Kingdom	Infectious	Gonococcal Infection	<p>On 7 January 2019, the National IHR Focal Point for the United Kingdom of Great Britain and Northern Ireland notified WHO about two isolates of extensive drug resistant (XDR) <i>Neisseria gonorrhoeae</i> infections diagnosed in the United Kingdom. The two isolates are resistant to ceftriaxone (MIC 1.0mg/L) and have intermediate susceptibility to azithromycin (MIC 0.5mg/L). The isolates are also resistant to cefixime, penicillin, ciprofloxacin and tetracycline, but are susceptible to spectinomycin. These isolates differ from the case previously reported in March 2018 and the two cases reported by Australia in April 2018, which had high-level resistance to azithromycin. The first case is a heterosexual female who attended sexual health services in the United Kingdom in October 2018. She reported four casual male sexual contacts of UK nationality in Ibiza, Spain in September 2018. The case had not had antibiotic therapy between the sexual encounters with United Kingdom citizens in Ibiza and first attendance at sexual health services in the United Kingdom. The case was treated empirically with ceftriaxone 500mg and azithromycin 1g. A test-of-cure (TOC) was carried out and she was found to have cleared the pathogen. The second case is a heterosexual female who attended sexual health services in the United Kingdom in November 2018. She reported a casual male sexual contact in November 2018 who was known to be in the entertainment business and had been in Ibiza, Spain from June until September 2018. The case was treated empirically with ceftriaxone 1g. A TOC was carried out and she had not cleared the pathogen. She was then given gentamicin 240 mg (intramuscular) and azithromycin 2 mg (oral). She was given intravenous ertapenem for three days as the symptoms were not resolved. A TOC was carried out afterwards and she has cleared the pathogen.</p> <p>The United Kingdom authorities had set up an incident management team to coordinate the investigations and communication, ensure contacts are traced and spread contained. Since there is probable epidemiological link to sexual encounters with British citizens who have travelled to Ibiza, Spain, the United Kingdom authorities had informed the Spanish authorities about these cases.</p> <p>Authorities in the United Kingdom promptly initiated appropriate public health measures, including having incident management team for coordinating the response, outbreak investigations, contact tracing, surveillance and risk communication. Local health authorities have been informed about this public health alert related with British citizens infected with XDR <i>N. gonorrhoeae</i> who travelled to Ibiza. Treatment of STIs in Ibiza is included in services provided by Public Health facilities and diagnosis is carried out at</p>	Public Health Risk (PHR)



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				<p>the laboratory of the main public hospital in the island. Currently, there is no strain of <i>N. gonorrhoeae</i> isolated in Ibiza presenting the resistance pattern described by United Kingdom. Further public health control measures will be considered after information about possible sexual partners of United Kingdom contacts of the cases is made available by the United Kingdom Public Health Authorities.</p> <p>This is the third report of ceftriaxone-resistant <i>N. gonorrhoeae</i> infection in the United Kingdom. These current cases are resistant to ceftriaxone and have intermediate susceptibility to azithromycin, which increasingly threatens the dual therapy for gonorrhoea (ceftriaxone 500 mg and azithromycin 1g) recommended by WHO. Since the majority of gonorrhoea cases are asymptomatic, spread of resistant gonorrhoea strains is possible and can spread quickly in high risk populations. For these two cases there is an epidemiological link to sexual encounters with United Kingdom citizens in Ibiza, Spain, or United Kingdom citizens who have been in Ibiza, which indicates potential international spread of this gonorrhoea resistant strain. Further investigations are needed to confirm the epidemiological link, the source of transmission and identify sexual partners of contacts of the United Kingdom cases, both in United Kingdom and in Ibiza in order to implement appropriate public health measures to interrupt the transmissions including strengthen gonorrhoea AMR surveillance and ensuring timely reporting. Contract tracing and response measures including condom promotion have been taken by the UK authorities and the risk for potential onward transmission in the country by these two cases is currently considered to be low.</p> <p>To make a sustained difference in the continuing problem of multidrug-resistant <i>N. gonorrhoeae</i> infection, two overlapping goals must be met: broad-based control of drug resistance, and control of gonorrhoeae. Both should be approached in the wider contexts of global control of antimicrobial resistance.</p>	
2019-01-18	Oman	Infectious	Dengue Fever	<p>On 15 December 2018, the IHR national focal point for Oman notified WHO of three confirmed, locally acquired Dengue fever cases, in Al-Seeb district, Muscat governorate. Extensive entomological investigations were conducted by the Ministry of Health (MOH) for whole Muscat Governorate. Larvae and adults of <i>Aedes aegypti</i> were found in four districts [Al-Seeb, Bawsar, Muttrah and Muscat]. Immature stages as well as adult <i>Aedes aegypti</i> were identified from Al Seeb district while immature stages of <i>Aedes aegypti</i> were identified from Bawsar, Muttrah and Muscat districts. On 12 January 2019, Ministry of Health (MOH) reported a total of 48 indigenous dengue cases since the beginning of the outbreak on 12 December 2018 (38 Omanis and 10 expatriates). Further characterization of human samples in the national Central Public Health Laboratory (CPHL) identified DENV-2 serotype. At this stage, no information related to the clinical presentation, haemorrhagic symptoms or severity is available. Nevertheless, from 1 January through 12</p>	Public Health Risk (PHR)



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				<p>December 2018, there were 30 international travel associated dengue fever cases reported in Oman. It must be noted that the country reported its first imported dengue fever cases in 2001. From 2001 through 2017, the number of travel-related dengue cases ranged between 10 to 45 per year.</p> <p>Human and entomological surveillance were enhanced in whole Muscat Governorate; mosquitos and larvae were collected and sent to the entomological laboratory at Surveillance Department, Ministry of Health, for further identification and classification. Vector control activities, including door to door visits (source reduction) and fogging have been conducted as part of the integrated vector control plan. Public awareness programme has been initiated and a wide health education campaign for Elimination of <i>Aedes aegypti</i> was launched on 7 January 2019. WHO EMRO risk communication expert was deployed to help in campaign planning. WHO provided Case management guidelines and deployment of experts to assist in the development of national guidelines was offered. Also, Support to Central Public Health Laboratories (CPHL) to aid serotyping and gene sequencing of human and vector samples.</p> <p>These are the first reported locally-acquired dengue fever cases in Oman. <i>Previous cases have been in travellers returning from dengue endemic areas. Should dengue become established in Oman, there is a high risk of international spread, as the vector is present in some areas of neighbouring countries.</i> Enhancement of vector and human surveillance, integrated vector management strategies and community engagement should be scaled-up to reduce the risk of dengue disease transmission in Oman and other countries in the Region.</p> <p>There is no specific treatment for disease due to dengue; therefore, prevention is the most important step to reduce the risk of dengue infection. The main method to control or prevent the transmission of dengue virus is to combat the vector [mosquitoes]. Careful clinical detection and management of dengue patients can significantly reduce mortality rates from severe dengue.</p> <p><i>WHO does not recommend any general travel or trade restrictions be applied based on the information available for this event.</i></p>
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* A public health risk is something that is (or is likely to be) hazardous to human health or could contribute to a disease or an infectious condition in humans.