

【デング熱情報】

当地で流行中のデング熱に関し、最新（12月1日付）のマーシャル政府状況報告と、これを踏まえ出された保健省による渡航勧告（12月5日付）について以下のとおりお知らせします。

依然としてマジュロ環礁を中心に流行は拡大傾向にある模様ですので、十分ご留意ください。また、流行地域やマーシャル政府による予防対策などは、状況に応じて変化する可能性があります。引き続きラジオ、新聞等の最新情報に留意して頂くとともに、万が一、罹患の疑いがある場合には、直ぐに病院で医師に相談してください。

1 12月1日付マーシャル政府状況報告

6月25日から12月1日までの期間、マーシャル全体で1,395件のデング熱と疑わしき症状が報告され、検査の結果、このうち431件（この内訳：イバイ島272件、マジュロ環礁1061件、ウトリック環礁42件、アウル環礁20件）がデング熱と確認された。現時点までに死亡者1名。

2 12月5日付当地保健省発表の渡航勧告

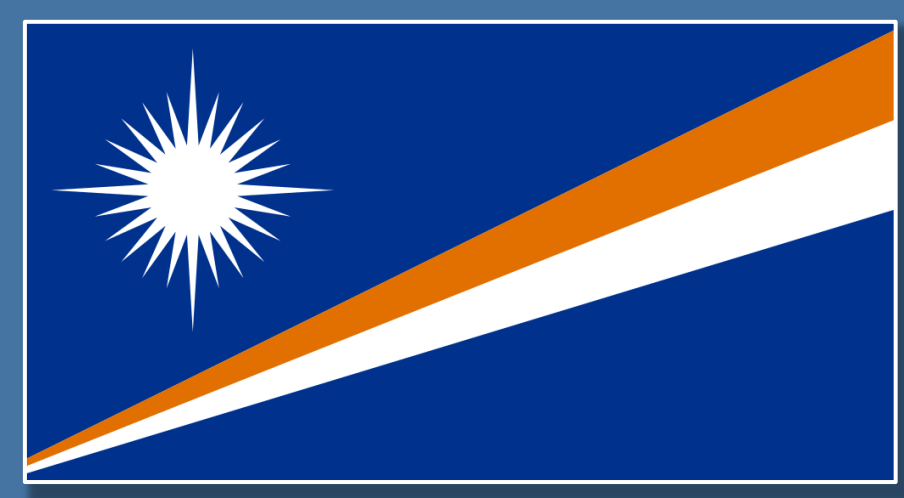
- （1）11月28日付閣議決定をもって、離島への渡航制限が解除された。
- （2）この決定に基づき、保健省としての渡航勧告は以下のとおり。

ア 離島地域からマジュロ環礁及びイバイ島への渡航制限なし。

イ アルノ環礁、アウル環礁、ミリ環礁、リブ環礁、ナム環礁及びクワジェリン環礁の小島からの移動に係る10日間の隔離を解除。マジュロ環礁及び（または）イバイ島からの海上及び航空機による移動可。

ウ エボン環礁、キリ島、ナムリック環礁、ジャルート環礁、アイリンラップ環礁、ジャバット島、ウジャエ環礁、ラエ環礁、ウォト環礁、マロエラップ環礁、ウォッジェ環礁、リキエップ環礁、マジット島、アイルック環礁、ウトリック環礁、ロンゲラップ環礁、ビキニ環礁及びエネウエタック環礁への移動は10日間の隔離制限あり。また、渡航は海上移動のみ。

在マーシャル日本国大使館



Dengue-3 Outbreak in Republic of the Marshall Islands, June 25–December 1, 2019

Situation Report Date: December 1, 2019



Outbreak Overview

Cases: To date there have been 1,395 dengue like illness of which 431 have been lab confirmed. This is outbreak week #29 in Ebeye, #17 in Majuro, #7 in Utrik and #6 in Aur. Symptom and age profile of cases is typical for dengue fever. One death and one severe dengue patient evacuated out-of-country to date. .

Organization of Response: EpiNet team in Ebeye and the RMI national EpiNet teams were both activated on July 16, with 3x a week meetings currently. Presidential Declaration of Health Emergency and activation of multi-ministry and NGO National Emergency Operations Center on August 6 with weekly meetings. RMI Dengue Response Plan finalized Aug 6. Bi-weekly conference calls with technical assistance partners also being held.

Case Definitions (based on PPHSN):

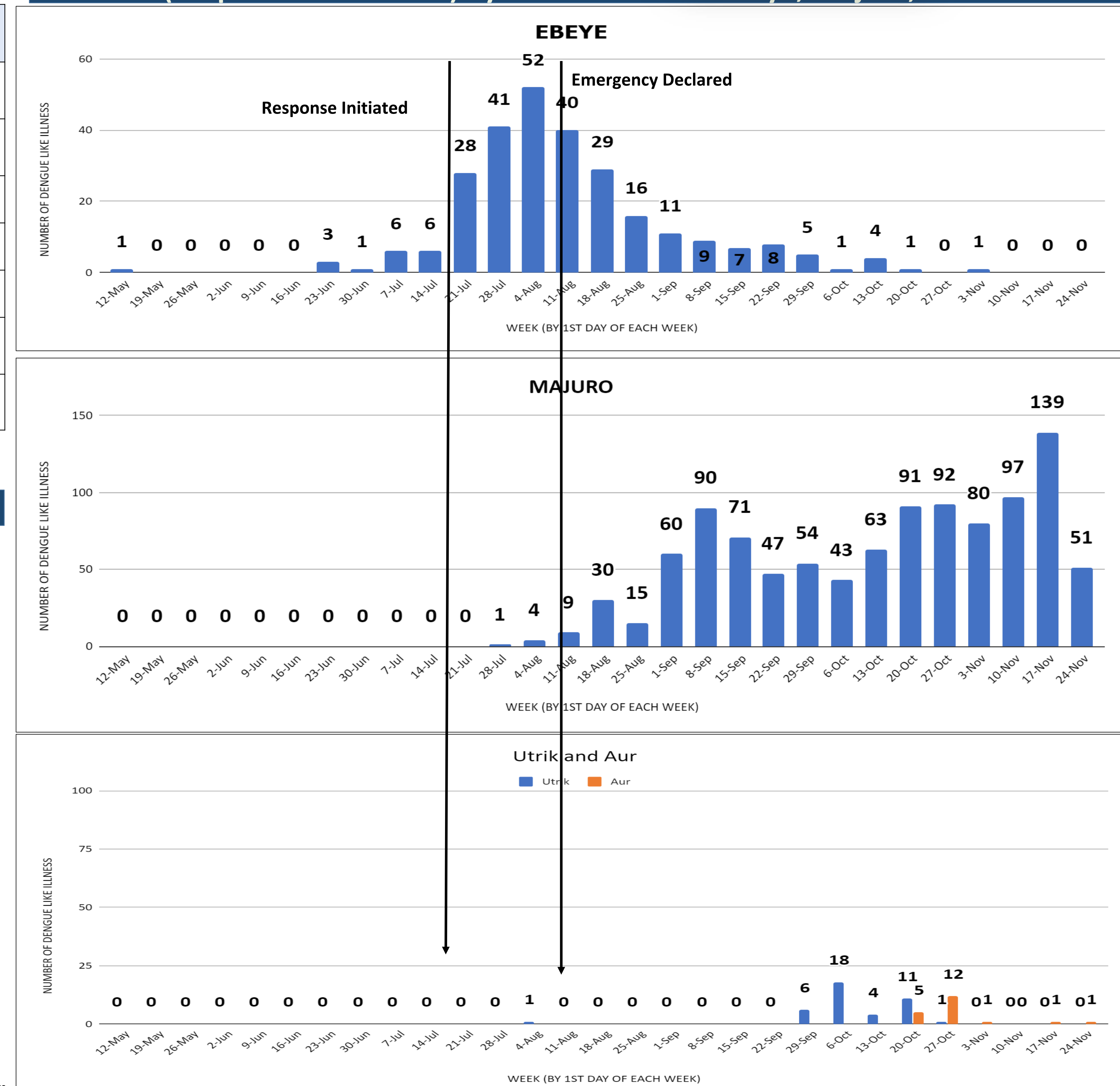
Suspected case: Acute fever > 2 days with **two or more** of the following: anorexia and nausea; aches and pains; rash; low white blood cell count; tourniquet test positive; warning signs (*abdominal pain or tenderness; persistent vomiting; mucosal bleeding; liver enlargement >2 cm; fluid accumulation; lethargy, restlessness; increase in hematocrit with decrease in platelets*).

Confirmed case: Suspected case with lab confirmation (+Rapid test (for NS1 or IgM) or +PCR test)

Summary of Cases

	Ebeye	Majuro	Utrik	Aur
# Dengue Like Illness cases	272	1061	42	20
# New in Past 7 Days	0	53	0	1
# Hospitalized	139	280	9	3
# in Hosp Now	0	8	0	0
# Died	0	1	0	0
# NS1 or IgM+ (# Tested)	122 (176)	285(1017)	9(13)	15(18)
# PCR+ (# Tested)	15 (17)	9 (17)	3(3)	0(2)

Cases (Suspect & Confirmed) by Week of Onset- Ebeye, Majuro, Utrik & Aur



Response Summary*

Current Response Goals:

WASH CLUSTER: As of October 30, 2019

The WASH Cluster has been meeting regularly (1-2 a week) to support the Dengue Fever State of Health Emergency Response since August 21, 2019. The WASH Cluster is responsible, in coordination with the National Disaster Management Office (NDMO) and Health Emergency Operations Center (HEOC) for Water and Sanitation related activities. These include:

- Closure of unregistered dump sites around Majuro Atoll to decrease the potential for mosquito breeding and spread of Dengue and other arboviral viruses.
- Increased efforts to control spread of Dengue and other arboviral viruses at a household level by providing outreach programs in coordination with implementation of control mechanisms (survey and screening of rainwater harvesting tanks).
- Limit the spread of Dengue and other arboviral viruses by eliminating breeding sites and reducing the number of mosquito through an island wide clean up.

Progress: Screening rainwater harvesting tanks to prevent the breeding of mosquito 98% completed with private schools in the DUD area remaining, continues to address unregistered dumps to reduce breeding ground, V7AB, NDMO Facebook page and look for 6366 mass text for daily information on WASH cluster activities to assist your community in preventing the spread of dengue fever.

Fumigation update: * All churches, schools and dump sites fumigated, * Additional 5 fumigation technicians trained, * Fumigation of patient homes and essential sea and air transport ongoing

MOHHS EPINET:

- Slow spread in affected atolls; & prevent spread to outer atolls,
- Assure excellent clinical care to minimize deaths.

Surveillance: Daily Active surveillance continues Majuro, Ebeye, and Outer islands with some communication challenges.

Community Engagement

- Vigorous community engagement, ongoing with help from partners- Red Cross, WUTMI, Kalgov, Malgov. Ebeye complete for community clean-up and spraying of hospital, schools and churches. Community awareness by mass phone texts, radio, posters and public seminars. Ebeye: homes of most recent case and neighbors have been sprayed; patient kept home with bed nets use; repellent distributed widely to the public. Weekly radio program with V7AB and 103.5 for dengue health awareness and health alert.

Vector Surveillance and Control:

- Mosquito Spraying: Completed in Majuro - 54/54 churches completed; 22/22 schools; 32/32 Air and Sea Vessel;. 16/16 identified Mosquito breeding sites; Continue to visit the patient's house; Other Islands: 3 (Ebeye, Utrik and Aur);

Surge Capacity:

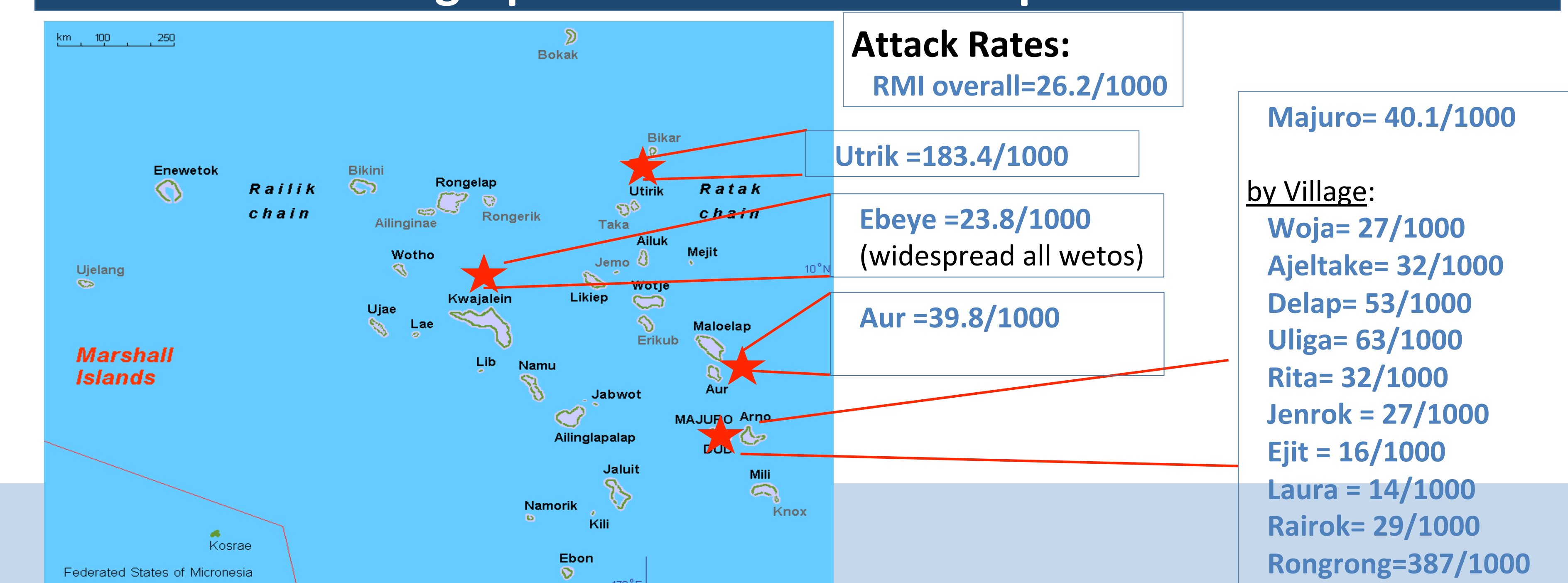
- Team Rubicon-Wave 1 arrived on 11/26/2019 consists of 5 Registered Nurses, 1 Logistician and 1 Team Leader. There will be three waves/batches of Team Rubicon that will assist in Majuro Hospital Dengue Ward.
- College of the Marshall Islands provided volunteers to Logistics, Surveillance and Medical Records.

Rongrong: Dengue Fever response measures continues with 1 Nurse Practitioner and 1 Health Assistant. The last number of confirmed case was seen 11/20/2019. 41/85 (48%) of the dengue like illness were admitted while 44 were seen as Outpatient.

Utrik: Response measures continues. The last case was seen on 10/29/2019.

Aur Dengue Response: Last confirmed Dengue Fever case was encountered on 11/29/19. 13 y/o Category A. Response measures continues. Updates on outbreak, prevention of further spread of Dengue fever, and PHC Profiling data were presented to the traditional and government leaders, and the community on 11/28/19. The Surge Capacity Team returned to Majuro 12/1/19. Aur, Aur Health Assistant was trained on assessment and management of Dengue Fever and performing the Dengue rapid test.

Geographic Distribution of Suspect Cases



EpiNet Outbreak Team Members:

Ebeye: Dr Chocho Thein, Allen Capelle, Dr. Joaquin Nasa, Rose Bobo, Mela Ratu, Neal Hitchfield, Glorine Jeadrik

Majuro: Dr. Helentina Garstang, Secretary Jack Niedenthal, Deputy Secretary Mailynn Konelios-Lang, Dr Tom Jack, Deputy Secretary Francyne Wase-Jacklick, Edlen J. Anzures, Paul Lalita, Linda Chutaro, Philmar Mendoza, Dr. Robert Maddison, McGyver Takia

External Partners: RMIEPA, Director Moriana Phillip MalGov- Russell Langrine, WUTMI, WASH, NDMO

PIHOA: Dr Mark Durand

Contact:

Edlen Anzures- Data Officer (eanzures@gmail.com)



REPUBLIC OF THE MARSHALL ISLANDS
OFFICE OF THE SECRETARY
MINISTRY OF HEALTH & HUMAN SERVICES
P.O. Box 16 ~ Majuro ~ Marshall Islands ~ 96960
Tel. No. (692) 625-5327 Email: sechhs.rmi@gmail.com



Wednesday, December 5, 2019

To: All Ports of Entry, GRMI Ministries, Agencies, SOEs, Air Marshall Islands, Marshall Islands Shipping Corporation, MIMRA, All Private Vessels, Small Boat Traffic and General Public

From: The Secretary of Health & Human Services

Re: **UPDATED Travel Advisory on Dengue Fever Outbreak for RMI Outer Atolls and Islands per “CM 264 2019”**

Since August 2019, an estimated 1,900 outer atoll/islands residents have been stranded on Majuro and Ebeye due to the enforcement of the travel advisory restricting travel from the dengue affected areas of Majuro and Ebeye to the outer atolls/islands. On November 28, 2019, the Cabinet approved, through CM 264-2019, the returning of stranded individuals back to their homes in the outer atolls/islands. The Ministry of Health and Human Services, therefore, issues this updated Travel Advisory as follows:

- Lifting the travel restriction and allowing movement of people from the affected areas of Majuro and Ebeye, via sea and/or air, back to the outer atolls/islands. There is no travel restriction from outer atolls/islands to Majuro and or Ebeye.
- Lifting the 10-day quarantine requirement from Arno, Aur, Mili, Lib, Namu and the islets of Kwajalein. Travel can be either by sea and/or air from either Majuro and/or Ebeye.
- Requiring the 10-day quarantine requirement to the other remaining outer atolls/islands of Ebon, Kili, Namdrik, Jaluit, Ailinglaplap, Jabat, Ujae, Lae, Wotho, Maloelap, Wotje, Likiep, Mejit, Ailuk, Utrok, Rongelap, Bikini and Enewetak. Travel is by sea only.
- However, prior to travel, there are essential requirements that must be adhered to as outlined in the Outer Islands Protocol, as shown in Annex 1.

The Dengue Outbreak is still ongoing and the cases on Majuro continue to increase. The goal of this advisory is to minimize and halt Dengue Fever transmission to the outer atolls/islands and to ensure the safest return of stranded individuals. Align to this travel advisory is the Outer Islands Protocol outlining the requirements and procedures that must be followed prior to travel.

Protocol on Returning Stranded Residents Back to Outer Islands per CM264-2019

I. Atolls/Islands that have been lifted from the 10-day Quarantine Requirement

1. Arno
2. Aur
3. Mili
4. Namu
5. Lib
6. All islets inside Kwajalein

II. Atolls/Islands that will require the 10-day Quarantine

- | | |
|-----------------|--------------|
| 1. Ebon | 10. Maloelap |
| 2. Kili | 11. Wotje |
| 3. Namdrik | 12. Likiep |
| 4. Jaluit | 13. Mejit |
| 5. Ailinglaplap | 14. Ailuk |
| 6. Jabat | 15. Utrok |
| 7. Ujae | 16. Rongelap |
| 8. Lae | 17. Bikini |
| 9. Wotho | 18. Enewetak |

III. Dengue Clearance Requirements for all Transporting Vessels (Sea and Air)

- Air transportation is only allowed for people leaving Majuro and or Ebeye to Aur, Mili, Namu and the islets of Kwajalein.
- All transporting vessels will need fumigation 24 hours prior to departure
- All persons to be dengue screened 1 hour prior to departure
- All persons to apply mosquito repellents prior to departure and to continue upon arrival to final destination
- All children ages 1-5 must be updated on their MMR and flu vaccines **unless contraindicated by a doctor.**
- All adults are required to get flu vaccination **unless contraindicated by a doctor.**
- Each passenger will need to show proof of MMR and flu vaccination prior to departure.
- Vaccination and certificate can be provided at the Immunization Clinics at Majuro and/or Ebeye Hospitals with no fee.
- Vaccinations recommended 3-5 days prior to departure due to possible side effects.

Procedures for the 10-day Quarantine for Atolls/Islands

- 10-days quarantine at sea in Majuro or Ebeye
- The only mode of transportation for the 10-day quarantine is by sea.

I. Prior to Boarding Sea Vessel

- One NP (Nurse Practitioner) and one police officer will be assigned to each vessel.
- Transporting vessel will need fumigated 24 hours prior to departure. Vessel to be anchored one mile off of land.
- Captain, Crew, NP, Police Officer, Passengers - briefing and dengue screening one hour prior to departure.
- All passengers and crew must adhere to the conditions/requirements set out below.

II. 10 Days of Quarantine at Sea in Majuro or Ebeye

- Vessel to be anchored one mile off of Majuro and Ebeye.
- No one is allowed to come off the vessel once the quarantine starts unless medically required. Once a passenger goes off the quarantine vessel, he/she will not be allowed to reboard. Re-boarding is not allowed.
- NP to conduct daily vital signs and ensure everyone on board apply mosquito repellents 6-8 hours. NP to require passengers to continue applying mosquito repellent until the outbreak subsides.
- Police Officer to ensure safety of passengers and monitor that no other ships/boats are approaching the quarantine vessel.
- Only MoHHS boat, once fumigated, is allowed to transport passengers requiring medical assistance. Captain and crew to apply repellent and wear long sleeves/pants.
- Upon completion of the 10-day quarantine, both the NP and the Police Officer will get off the vessel.

III. What to do if a crew or passenger becomes ill during transit?

- If a crew member or passenger becomes sick and experiences dengue-like symptoms during the trip, the Captain on board must immediately isolate and put under a mosquito net the sick crew member or passenger to avoid mosquito bites. The Captain will then report back to Majuro or Ebeye to request for further instructions. In no event should the sick crew member or passenger disembark from the vessel onto an outer island/atoll unless instructed to do so by a Public Health official.



Jack Niedenthal
Secretary of Health & Human Services