

Nipah Turns Nightmare

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People are still deserting their homes in panic while the local authorities shut down all primary schools at Hatiabandha Upazila, which has witnessed the recent outbreak.

"Even ambulance drivers fled the village. We are trying to convince people asking them not to panic and stop drinking raw palm or date sap," said Dr Farhana Haque, an investigator of the government's team dispatched to the Upazila on February 2 soon after the outbreak.

The government sent more scientists to the affected area soon after the cause behind what was being called 'mystery fever' was ascertained by the Institute of Epidemiology and Disease Control and Research (IEDCR).

But people's long-standing practice and beliefs are making the task of this team rather difficult.

"We have to keep an eye on everybody who drank raw sap in the last one month," said the team leader Subodh Kumar Kundo.

The virus usually takes eight to 12 days between exposure and manifesting symptoms — fever, altered mental status and seizure.

But sometimes it can take unusual time, said Kundo, adding that those who handled corpses are also under observation.

Tracking the history of Nipah virus in Bangladesh, bdnnews24.com found that it is highly contagious and may be passed on with minimal human-to-human contact.

Deaths in Faridpur in January 2010 showed that the victims were infected because they were not careful while caring for patients.

A joint investigation of the epidemiology institute and the diarrhoeal disease centre (ICDDR,B) showed a man, who cared for his infected friend and shared the bed, was found to have become infected.

A wife also got the virus while caring, feeding, comforting, transporting her husband. An uncle of a deceased got the virus as he hugged the corpse.

A neighbour who washed a Nipah affected corpse, cleaned the frothy discharge and excreta also got the virus.

An intern doctor in Faridpur Medical College Hospital also died as he conducted physical examination of the two confirmed Nipah cases.

But such infection can be prevented by washing hands frequently, not sharing the same food and remaining at least three feet away from patients while caring for them. The caregivers should also wear masks, say IEDCR director Prof Mahmudur Rahman .

"Health care providers should wash hands and use personal protective equipment while caring for severely ill patients in Nipah prone area."

Rahman said they would continue strong monitoring in Hatibandha even 21 days after the outbreak stops.

But he cautioned that 'over enthusiasm' can trigger further panic.

"School closure was not necessary as there is nothing related to school boys," the director said, adding that the virus had not begun spreading from person to person contact.

"Such a decision (school closure) can only generate panic among the people," he said urging local administration to take decision consulting with the government experts posted there.

Kundo said they are getting response from different organisations. Local NGOs, as well as development agencies joined hands in distributing leaflets with awareness messages.

He said as there is no specific treatment, medical attention could save patients that infuse negative impression among the people of the affected areas.

"We are disseminating general information and also trying to make them understand through different modes of communication."

"Our anthropologists are working to learn in-depth about their perception and beliefs. We are talking with community leaders, religious leaders, teachers, and families," he said.

Anthropologists say people generally believe that evil spirit has entered their community causing the illness.

They interpreted the illness as 'asmani bala' (divine burden). Some people of the community even have the perception that bats cannot contaminate raw date or palm sap. And do not believe it could be transmitted from person to person.

"We have to develop a rapport and earn their trust. We let them to talk first and give them space to express their emotions or complaints," said ICDDR,B anthropologist Shahana Parveen.

"With the respect of cultural norms and local practice, we make people understand what it actually is and what they should do."

"We held a courtyard meeting today to sensitise the idea that germs were responsible for the illness and deaths, using local terms and familiar examples," Farhana Haque said, adding that the participants responded positively after being given an explanation with evidence.

The first case of the recent outbreak was reported on January 31 with deaths from mystery fever.

Source: bdnews24.com