Activities of IEDCR 2014

**RESOURCES**

- Tuberculosis prevalence survey, Bangladesh
- Mitigating the impact of climate change to reduce the burden of climate sensitive illnesses
- Assessing prevalence and risk factors of mild/asymptomatic influenza A(H1N1) infections among persons exposed to influenza A(H1N1) infected poultry
- Estimating the risk of mild human infection among persons exposed to influenza A(H1N1) infected poultry
- Assessment of the impact of Hepatitis B vaccination in Bangladesh, a sero-prevalence study
- Dengue prevalence survey in Dhaka city corporation area
- A national serosurvey of dengue exposure in Bangladesh
- Surveillance of Influenza, Pneumonia and acute respiratory disease in Dhaka city corporation area
- Antibiotic medication and antimicrobial resistance of the bacteria causing upper respiratory tract infection
- Leptospirosis survey in Bangladesh
- Research on understanding of ecology of Vibrio cholerae in Bangladesh
- Assessment of the immunogenicity of three doses of bivalent, trivalent or type one monovalent oral poliovirus vaccines provided at 24 week intervals
- Investigation of anthrax outbreaks and risk factors for anthrax in humans and livestock in Bangladesh
- Piloting hospital infection control interventions for severe infections spread by respiratory droplet and direct contact routes
- Estimating the incidence of maternal and neonatal deaths from hepatitis E virus (HEV) in Bangladesh

**SURVEILLANCE**

- National Influenza Surveillance, Bangladesh (NISb) in 10 district hospitals
- Hospital based influenza surveillance in 14 sites (tertiary care hospitals)
- Nilphamari virus transmission surveillance
- Cell phone based Behavioral Risk Factor Surveillance System (BRFSS)
- Acute Meningo-Encephalitis Syndrome (AMES) surveillance focused on Japanese Encephalitis and Nilphamari
- Sero-prevalence of antibodies to avian influenza A viruses among Bangladeshi poultry market workers
- Surveillance for human infections with avian influenza A viruses among fowl bird market workers and their household members in Dhaka city corporation area, Bangladesh
- Community based Avian/Human Influenza surveillance among poultry workers in (H5N1) infected poultry farms
- High risk group surveillance in wet markets in Dhaka City corporation area
- Surveillance for hospital acquired respiratory infections in patients and health care workers in three tertiary care facilities
- Hospital based disease surveillance up to upazilla (sub-district) level
- Behavioral risk factor surveillance (BRFSS), Bangladesh through telephone interviews - pilot project completed
- Hospital based dengue surveillance
- Hospital Based Bacterial & Intussusception Surveillance (HUBS) in collaboration with icddr,b
- Surveillance of unintentional acute pesticide poisoning due to carbamate and organophosphate among young children in Bangladesh
- Post mass drug administration surveillance for lymphatic filariasis transmission
- Foodborne Illness Surveillance System Bangladesh with 4 components:
  - Web-based surveillance
  - Cell-Phone based surveillance
  - Laboratory based surveillance
  - Foodborne emergency response
- More in Applied Epidemiology, Dhaka University (Field Epidemiology Training Program)
- Masters of Public Health in One Health & Bio-Security (in collaboration with Massey University, New Zealand)
- Clinical Epidemiology course for Medical Professionals 2014
- Introduction to Epidemiology (short course prior to FEET/1)

**Outbreak Investigation and Response**

- Event based surveillance - outbreak investigation and response
  - Cutaneous Anthrax
  - Mass psychogenic Illness
  - Nilphamari
  - Suspected Middle East Respiratory Syndrome - Corona Virus (MERS-CoV)
  - Food poisoning with watermelon and cake consumption
  - Suspected Ebola Virus Disease

**Trainings and Workshops**

A total of 6,137 doctors, 1,417 nurses, 239 medical technologists, 592 statisticians and 581 other government officials were trained at IEDCR on different emerging, re-emerging communicable diseases, IHR 2005 and other health issues in 2014.

- Rapid Response Team Leaders from district and sub-district level (465) were trained on outbreak response on novel communicable diseases including Influenza A(H7N9), MERS-CoV, Nilphamari and Ebola Virus Disease.
- Doctors (428), nurses (1,296), medical technologists (152) and other officials (82) were trained on epidemiology, control and prevention and emergency response on MERS-CoV, influenza A(H7N9) and Nilphamari infection.
- After the Ebola Virus Disease emerged:
  - A total of 1639 doctors, 354 nurses and 86 other officials were trained on epidemiology, control and prevention and emergency response on EVD
  - Forty officials from GOB, national and international NGOs, partner organizations and stakeholders developed SOPs, Guidelines and Manuals for the detection, reporting, clinical management, infection control, contact tracing and waste management for Ebola virus disease.
- Training of health personnel of Hajaj Shahjada International Airport on Ebola and other emerging infectious disease and PPE
- Refresher training on tuberculosis like illness (ILI) and severe acute respiratory illness (SARI) for integrated disease surveillance (IDS) were conducted on 208 doctors, 93 nurses and 516 statisticians for the national influenza surveillance.
- A national consultation on comprehensive Japanese Encephalitis surveillance, followed by an orientation seminar held comprising 26 physicians and 28 nurses.
- Several International Health Regulations (IHR 2005) related activities took place including:
  - Awareness workshops on IHR 2005 with emphasis on issues for graduate and post graduate public Health teachers of public health private medical college and universities where 142 doctors participated.
  - Development of a port health action plan for IHR designated seaport (Chittagong).
  - Advocacy workshop on IHR for policy makers, health providers and stakeholders of all relevant implementation level comprising 313 doctors, NGO personnel, etc.
  - Workshop on capacity building of technical personnel under health, customs and immigration of IHR 2005 at designated point of entries comprising 460 officials from health, customs, immigration, etc.
- A total of 23 doctors were trained by IJA on biological sample packaging, shipping biological materials and cold chain at IEDCR.
- Medical technologist (152) were trained on emerging infectious disease and SOPs of laboratory biosafety and infection control.
- Refresher training on web based disease surveillance were conducted and 76 statisticians were trained on it.

**OTHERS**

- Inauguration of the Masters of Public Health in One Health & Bio-Security coursework in collaboration with the Massey University, New Zealand
- IEDCR officially affiliated with the Dhaka University