



EPI Surveillance Bulletin



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Make 18th NID a Success

Bangladesh is committed to eradicate poliomyelitis and conducted 17 NIDs, 1 Sub-National Immunization Day (SNID) and 3 Mop-up campaigns from 1995–2009 to eradicate poliomyelitis. As a result of accelerated and intensified NIDs, the country interrupted wild poliovirus transmission in 2000 and in 2006. The last case of indigenous polio occurred in Bangladesh on 22 August 2000 and after more than five years without polio, Bangladesh detected outbreak of wild polio virus following an importation from India in March 2006. A total of 18 imported cases were detected and as for today the last case of polio in Bangladesh was detected on 22 November 2006. But the threat of new importation is still valid. As the country is surrounded by polio endemic India, in order to maintain the polio free status Government of Bangladesh has planned to observe 18th NID on 10 January 2010 followed by 4 days child to child search and Measles Vaccination (follow up) Campaign from 14-28 February 2010.

It was decided that two drops of OPV will be provided to all 0-59 months age children along with one Vitamin-A capsule to 12-59 months age children and one Anti-helminthic (Albendazole) tablet to 24-59 months age children in 18th NID. During measles follow-up campaign OPV will also be provided as second round of NIDs. This decision has been taken in the meeting of National Steering Committee on Polio Eradication and Measles Control (NSC-PE&MC). The Hon'ble Minister, Ministry of Health and Family Welfare, Dr. A. F. M. Ruhal Haque M.P. chaired the meeting. The meeting approved the calendar of events and schedules of 18th NID and Measles Vaccination (follow-up) Campaign.

For successful implementation of 18th NID and to achieve high coverage local initiative must be taken to address the following issues;

- Review and update the NID micro-plan
- Effective and quality training of field workers, supervisors and volunteers
- Registration of children determining the age for OPV, Vitamin A and Albendazole
- Effective interpersonal communication (IPC) during house visit for registration
- Strengthen supervision at all level including hard-to-reach and high-risk areas
- Adequate and strategic placement of teams for mobile population
- Strengthening mobile and mosque miking for NID message dissemination
- Organize the NIDs site in a visible place and involve institutional volunteers and assign them as team leader for NIDs sites
- Organize evening/night sessions for street children and children of working mothers
- Formation of mobile team and route map to visit the places where children might be found (Hospital, Clinic, Orphanage, Prison, Rice mill etc.).

Multi-sectoral participation is essential to make the 18th NID successful. For that reason the involvement of different public-private sectors should be ensured like as previous NIDs. NGOs, Teachers-students, Rotarians, Imams, Police, Ansar-VDP, Chowkidar, volunteers should work together along-with Health and Family Planning department. Extensive mass media campaign have been chalked out to build up people's awareness and to ensure their active participation. Printing of all training and communication materials from national level has been completed and already sent at different levels.

We hope that with all of our concerted efforts and contribution we can make the 18th NID successful and maintain polio free Bangladesh.

Schedule of 18th NID and Measles Vaccination (Follow-up) Campaign

Dates	Interventions	Target age group
NID: All fixed and outreach sites (1 day): 10 January 2010	OPV Vitamin A Albendazole	0-59 months 12-59 months 24-59 months
Child To Child Search: 11-14 January 2010	OPV	0-59 months
Measles Follow-up Campaign: All fixed and outreach sites, 14-28 February 2010	Measles immunization OPV	9-59 months 0-59 months

Surveillance Summary

Description	2001	2002	2003	2004	2005	2006	2007	2008	2009 ¹
Number of AFP cases	1287	1365	1128	1301	1458	1619	1844	1790	1405
No. of compatible cases according to virologic classification system	36	0	0	2	0	2	0	0	0
No. of cases with isolation of wild poliovirus	0	0	0	0	0	18	0	0	0
No. of discarded polio cases (i.e., non-polio AFP)	1251	1365	1128	1299	1458	1599	1844	1790	1345
No. of cases pending classification	0	0	0	0	0	0	0	0	60
Expected annual number of non-polio AFP cases (2/100,000 children <15 yr)*	533	549	556	563	1094	1114	1135	1153	1178

AFP Surveillance Performance Indicators

Indicators	Target	2001	2002	2003	2004	2005	2006	2007	2008	2009 ¹	
01 Annual Non-Polio AFP rate in children < 15 years old	≥ 2.0	2.34	2.49	2.03	2.31	2.66	2.87	3.25	3.10	2.38	
02 Completeness of passive reporting from facilities	≥ 90%	65%	62%	67%	82%	91%	89%	90%	93%	92%	
03 Timeliness of passive reporting from facilities	≥ 80%	38%	36%	62%	75%	84%	83%	85%	87%	86%	
04 Suspected AFP cases investigated within 48 hours of notification	≥ 80%	96%	96%	98%	98%	99%	100%	99%	99%	99%	
05 Confirmed AFP cases with 2 stool specimens collected within 14 days after paralysis onset	≥ 80%	80%	89%	90%	90%	92%	93%	92%	92%	94%	
06 Stool specimens arriving at laboratory within 3 days after collection	≥ 80%	97%	98%	99%	99%	98%	99%	100%	100%	100%	
07 Stool specimens arriving at laboratory in "good" condition "good" = 1. Presence of unmelted ice or temperature <8°C 2. Adequate volume (≥ 8 grams or size of ½ thumb) 3. No evidence of leakage 4. No evidence of desiccation (drying)	≥ 90%	100%	99%	100%	100%	100%	100%	100%	100%	100%	
08 Confirmed AFP cases receiving a follow-up exam at least 60 days after paralysis onset	≥ 80%	93%	99%	100%	98%	99%	100%	100%	99%	93% ²	
09 Stool specimens with laboratory results: - Within 28 days after specimen receipt (old algorithm)	≥ 80%	99%	100%	100%	100%	100%	98%	100%	-	-	
- Within 14 days after specimen receipt (new algorithm)	≥ 80%								80%	93%	95%
10 Stool specimens from which non-polio enterovirus (NPEV) was isolated	≥ 10%	29%	28%	23%	20%	20%	15%	15%	23%	20%	

¹ Data as of December 12, 2009; ² among cases occurring up to September 27, 2009; * Prior to 2005 NPAFP rate calculated as 1/100,000 under 15 children

AFP Surveillance Performance Indicators, 2008 - 2009

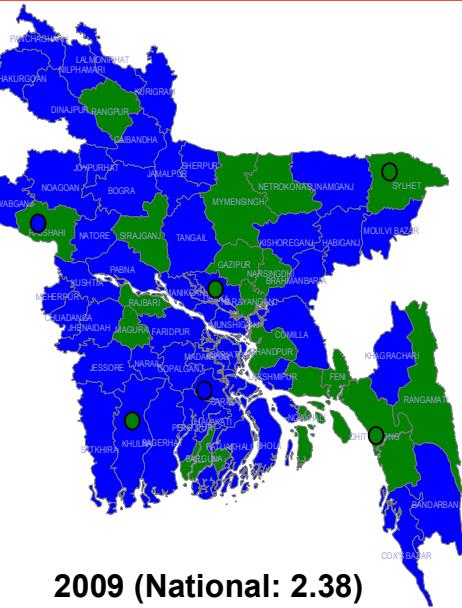
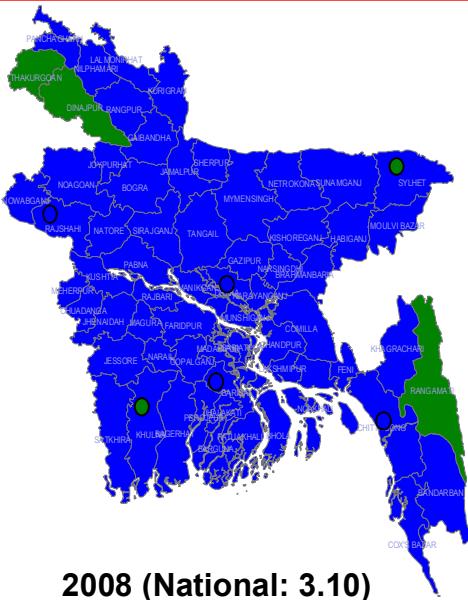
District	Minimum operational target of non-polio AFP		Total # AFP ¹		Wild polio-virus isolated		Compatible #		Non- Polio AFP cases ¹		Pending final classif. ¹		Annualized Non-polio AFP Rate ¹		Notification within 10 d after paralysis onset ¹		Investigation within 48 h after notification ¹		% with 2 stools within 14 days ¹		Stool sample arriving to lab within 72 hrs ¹		% with 60-day follow-up ²																
	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008	2009															
Barisal Division																																							
Barguna	7	7	12	8					12	7	0	1	3.23	1.94	100%	88%	100%	100%	88%	100%	100%	100%	100%	100%	100%	100%	100%												
Barisal (non BCC)	18	18	51	28					51	27	0	1	5.61	3.07	94%	100%	98%	100%	92%	100%	100%	100%	100%	100%	100%	100%	100%												
BCC only	2	2	4	3					4	3	0	0	3.80	2.91	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%												
Bhola	16	16	62	38					62	37	0	1	7.95	4.86	94%	100%	100%	100%	97%	97%	100%	100%	100%	100%	100%	100%	100%												
Jhalakati	6	6	13	13					13	12	0	1	4.42	4.23	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%												
Patuakhali	13	14	25	17					25	15	0	2	3.73	2.30	88%	100%	100%	100%	88%	94%	100%	100%	100%	100%	100%	100%	100%												
Perojpur	10	10	21	24					21	24	0	0	4.38	5.16	90%	96%	100%	100%	90%	96%	100%	100%	100%	100%	100%	100%	100%												
Total_BAR	72	73	188	131	0	0	0	0	188	125	0	6	5.21	3.56	94%	97%	99%	100%	94%	97%	100%	100%	100%	100%	100%	100%													
CTG Division																																							
Bandarban	3	3	4	5					4	5	0	0	2.71	3.43	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%											
Brahmanbaria	21	22	35	25					35	24	0	1	3.29	2.32	94%	92%	97%	97%	96%	100%	100%	100%	100%	100%	100%	100%	100%	100%											
Chandpur	22	23	34	21					34	21	0	0	3.04	1.89	94%	90%	100%	100%	88%	81%	100%	100%	100%	100%	100%	100%	100%	100%											
Chittagong (non CCC)	39	40	43	38					43	34	0	4	2.19	1.78	86%	92%	100%	100%	84%	92%	100%	100%	100%	100%	100%	100%	50%	50%											
CCC only	22	23	23	16					23	16	0	0	2.07	1.45	87%	100%	100%	100%	87%	100%	100%	100%	80%	100%	100%	100%	100%	100%											
Comilla	42	42	61	47					61	47	0	0	2.93	2.31	100%	98%	100%	98%	98%	98%	100%	98%	93%	82%	82%	82%	82%	82%	82%										
Cox's Bazar	17	17	20	21					20	19	0	2	2.35	2.27	95%	100%	100%	100%	95%	90%	100%	100%	100%	100%	100%	100%	67%	67%											
Feni	11	11	18	10					18	9	0	1	3.28	1.68	100%	90%	100%	100%	94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%										
Khagrachari	6	6	7	10					7	10	0	0	2.40	3.40	100%	90%	100%	100%	86%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%										
Lakshmpur	13	14	20	16					20	16	0	0	2.98	2.45	90%	100%	100%	100%	85%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%										
Noakhali	24	24	27	18					27	15	0	3	2.28	1.30	96%	83%	96%	94%	85%	78%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%									
Rangamati	5	5	3	7						3	5	0	2	1.13	1.91	67%	86%	100%	100%	67%	71%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								
Total-CTG	225	230	295	234	0	0	0	0	295	221	0	13	2.61	2.00	94%	94%	99%	98%	91%	92%	100%	100%	98%	87%	87%	87%	87%	87%	87%										
Dhaka Division																																							
Dhaka (non DCC)	28	30	46	41					46	38	0	3	3.23	2.64	89%	100%	100%	100%	87%	93%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%									
DCC only	71	74	88	70					88	65	0	5	2.50	1.83	86%	93%	100%	100%	90%	94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	82%									
Faridpur	16	16	34	18					34	17	0	1	4.25	2.18	88%	89%	97%	100%	88%	89%	100%	100%	100%	100%	100%	100%	100%	100%	100%	50%									
Gazipur	19	19	27	18					27	17	0	1	2.92	1.88	93%	83%	100%	100%	93%	83%	100%	100%	97%	100%	100%	100%	100%	100%	75%	75%									
Gopalganj	10	10	31	24					31	23	0	1	6.13	4.69	74%	83%	94%	100%	74%	88%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%									
Jamalpur	19	20	53	51					53	51	0	0	5.51	5.44	96%	98%	92%	98%	98%	94%	100%	99%	100%	88%	88%	88%	88%	88%	88%	88%	88%	88%							
Kishoreganj	23	23	40	32					40	30	0	2	3.51	2.71	93%	97%	100%	97%	95%	91%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								
Madaripur	10	10	20	15					20	15	0	0	4.08	3.16	100%	87%	100%	80%	95%	87%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								
Manikganj	12	12	18	21					18	21	0	0	3.11	3.73	94%	95%	100%	100%	95%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%							
Munshiganj	11	11	28	16					28	16	0	0	4.97	2.93	100%	100%	96%	94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%						
Mymensingh	40	41	47	34					47	31	0	3	2.34	1.58	83%	82%	98%	100%	87%	85%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	83%	83%							
Narayanganj	20	21	27	20					27	17	0	3	2.64	1.69	93%	100%	100%	100%	95%	93%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%						
Narsingdi	18	18	25	19					25	15	0	2	2.76	1.91	100%	95%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	80%					
Netrokona	18	18	28	18					28	16	0	2	3.13	1.83	89%	83%	100%	100%	96%	89%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	75%	75%						
Rajbari	9	9	14	8					14	8	0	0	3.24	1.90	86%	88%	93%	100%	86%	88%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
Sariatpur	10	10	29	14					29	14	0	0	5.91	2.93	86%	93%	97%	100%	93%	93%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
Sherpur	11	11	18	22					18	21	0	1	3.18	3.82	100%	95%	100%	100%	86%	86%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	89%	89%							
Tangail	29	29	46	38					46	36	0	2	3.21	2.59	87%	82%	100%	100%	91%	91%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Total-DHU	134	136	227	163	0	0	0	0	227	157	0	6	3.40	2.41	93%	96%	99%	99%	91%	96%	100%	100%	94%	94% </															

Disease Surveillance, 2008 - 2009

District	Neonatal Tetanus						Measles						AEFI			
	# of case reported by Active Surveillance	# of case reported by Passive Surveillance	# of case Investigated	# of case reported by Active Surveillance		# of case reported by Passive Surveillance		Outbreak*		Number of Outbreak (% Investigated)	# of cases	# of case Reported				
				2008	2009	2008	2009	2008	2009							
Barisal Division																
Barguna		1	1	1		2	1	18	21				15	6		
Barisal (non BCC)	2	2	7	3	2	2	2	22	5				46	25		
BCC only														2		
Bhola	3	1	8	3	6	3		5	2				14	2		
Jhalakhati	3	2	2	4	3	2	2	2	1				7	9		
Patuakhali		3		3		2	4	3	15	3			6	1		
Pirojpur				1			1		9	1			17	12		
Total BAR	8	9	19	14	11	12	9	71	33			0	0	105	57	
CTG Division																
Bandarban										1			6	4		
Brahmanbaria	5	6	5	7	7	7		1	18	18			25	10		
Chandpur			2		2		3	6	46	43			53	32		
Chittagong (non CCC)	1	1		3		1	4	10	2				10	11		
CCC only	2	2	3	2	2	2	8	2	6	3			7	3		
Comilla	1	1		1	1	1	1	12	7				10	7		
Cox's Bazar		2	1	2		2				1			5	5		
Feni								1	19	14			17	6		
Khagrachari	1	1	1					1	1	6			5	3		
Laxmipur	3	5	3	4	3	5		2	46	10			22	18		
Noakhali	4	6	3	7	4	6	2	2	9	27			12	5		
Rangamati									1					5		
Total-CTG	17	24	18	26	19	24	18	15	168	132			0	0	172	109
Dhaka Division																
Dhaka (non DCC)	2	2	2	1	1	2	1	63	10				41	22		
DCC only	2	5	4		5	4	25	12	594	246	1 (100%)	76	176	102		
Faridpur	1	1	1	2	1			29	7				85	62		
Gazipur	3		1	2	3		3		3	4			17	20		
Gopalganj	2	3	5	2	3	3	1	22	9				26	5		
Jamalpur	2		5	2	2			58	141				41	26		
Kishoreganj	7	6	9	4	3	5	13	13	31	16			46	27		
Madaripur	4		3		4		3	7	48	18			79	46		
Manikganj	2		1		1			2	89	9			45	28		
Munshiganj	2		1		1		2		176	44			69	48		
Mymensingh	4	7	5	6	5	9	1	3	73	65			83	46		
Narayanganj	1	1				1	1		68	11			39	18		
Narsingdi	4		2		3		3		3	3			11	24		
Netrokona	1		5	1	2			33	36				36	21		
Rajbari								40	50				109	44		
Shariatpur	1	3	1	1		3	2	3	23	16			63	35		
Sherpur		1	2	2		1		30	21				26	12		
Tangail	4	1	8		6	1	9	4	19	28			68	70		
Total-DHAKA	42	30	55	23	40	29	64	44	1,402	734	1 (100%)	0	76	1,060	656	
Khulna Division																
Bagerhat	3	2	5	2	2	1	2	51	7				41	28		
Chuadanga	1	2	1	2	1	2	2	31	2				22	23		
Jessore		4		4		3	14	3	63	16			23	25		
Jhenaidah								2	22	19			26	20		
Khulna (non KCC)	1	3	1	3	1	3	1	11	3				34	27		
KCC only	1				1		3		8	1			16	11		
Kushtia	3	2	1	1	3	2		2	45	11			26	15		
Magura		1				1	5	76	16				21	18		
Meherpur								6	11	25			6	9		
Narail	3	2	3	1	4	2	1	1	14	9			13	13		
Satkhira	2		1		3				7				26	18		
Total-KHU	14	16	12	13	15	14	28	16	339	109			0	0	254	207
Raj Division																
Bogra	2	3	3	1	3	3	2	4	24	22			121	89		
Dinajpur	4	1	4	1	4	1	6		19	13			56	56		
Gaibandha	1	2	2	3	4	1		1	3	2			44	33		
Joypurhat							2		14	4			25	15		
Kurigram		4		1		3	3	2	7	10			16	11		
Salmonirhat	2	1		2	1	1	1	2	1				24	19		
Natore	4		3	1	4		5	3	74	49	1(100%)	132	0	51	15	
Nilphamari	1		1	1	2			2		3			25	12		
Noagoan	2	1	3		2	1	7	4	90	48			43	25		
Nowabganj	2		2		2		4	5	38	17			24	19		
Pabna	3	2	1	1		20	18	65	84				44	27		
Panchagarh	1		2		1		2		5	2			19	14		
Rajshahi (non RCC)	3		3		3		8		31	30			43	36		
RCC only						3	3	64	68				48	47		
Rangpur	3	2		1	3	2	1	2	8				32	16		
Sirajganj		2				2			3	7			15	9		
Thakurgaon	1	2	1	4	1	2	4	1	5	4			35	28		
Total-RAJ	29	18	26	16	31	16	68	45	445	371	1(100%)	132	0	665	471	
Sylhet Division																
Habiganj	3	3	4	3	6	2		10	4				25	14		
Maulvibazar	7	4	6	5	5	4		4	15	14	1(100%)	48	10	7		
Sunamganj	8	7	7	7	8	1	28	4	40	7			20	13		
Sylhet (non SCC)	5	4	5	2	7	3	6	1	32	19			7	7		
SCC only	1	1		2		1	19	13	6	12			4	1		
Total-SYL	24	19	22	19	26	11	53	22	103	56	1(100%)	0	48	66	42	
National	134	116	152	111	142	106	240	145	2,528	1,435	1(100%)	2(100%)	132	124	2,322	1,542

For more information, contact the Office of the Vice President for Research and Economic Development at 319-273-2500 or research@uiowa.edu.

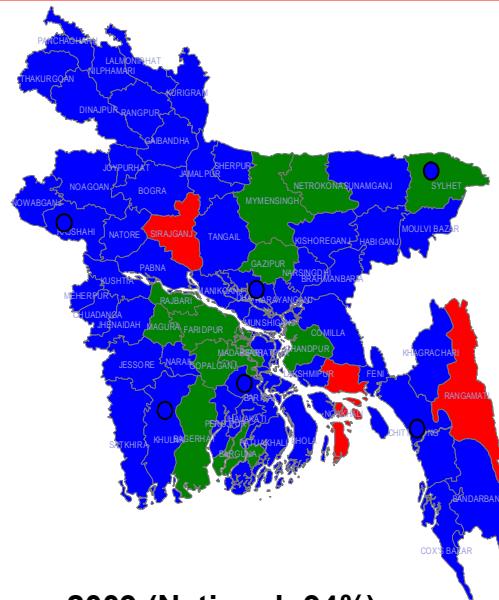
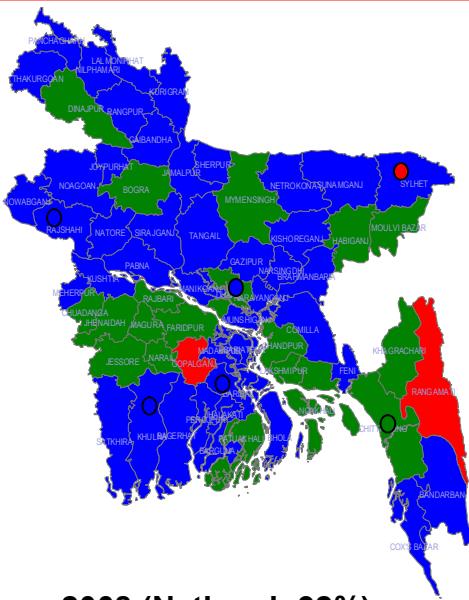
Annualized Non-Polio AFP Rate, by District, Bangladesh 2008-2009*



*Data as of 12 December 2009



Percentage of AFP Cases with Two Stool Samples Collected within 14 days of Paralysis Onset, by District, Bangladesh 2008-2009*



*Data as of 12 December 2009

International Developmental Partners for Polio Eradication in Bangladesh include Centers for Disease Control and Prevention, Atlanta, Governments of Japan, the Netherlands, USAID, Rotary International, U.K. DFID, UN Foundation, UNICEF and WHO