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## Health system problems aggravate cholera outbreak in Zimbabwe

WHO setting up a cholera control centre, seeking US\$ 6 million in support

News Release

10 December 2008 | HARARE -- A widespread cholera outbreak, under-resourced and under-staffed health system, and inadequate access to safe drinking water and hygiene are threatening the wellbeing of thousands of Zimbabweans. As of 9 December, 16 141 suspected cases of cholera and 775 resultant deaths (case fatality rate of 4.8%) had been recorded since August in two-thirds of the country's 62 districts.

WHO is establishing a cholera control and command centre, in conjunction with the Ministry of Health and Child Welfare (MoHCW) and other health partners, to respond in a coordinated manner to Zimbabwe's health challenges. WHO is seeking donor support for a US\$ 6 million proposal for its cholera response plan.

Approximately half of cholera cases have been recorded in Budiriro, a heavily populated suburb on the western outskirts of the capital, Harare. Other major concentrations of reported cases include Beitbridge, on the South African border, and Mudzi, on the border with Mozambique.

The outbreak could surpass 60 000 cases, according to an estimate by the Zimbabwe Health Cluster, which is a group coordinated by WHO and comprising health providers, nongovernmental organizations and the MoHCW. The estimate is based on six million people, or half of Zimbabwe's 12 million population, potentially being at risk of contracting cholera, with an estimated 1% of those at risk of actually suffering from cholera. With the rainy season commencing and increased transit of people likely due to the Christmas season, there are risks for further spread of cholera if strong measures are not taken.

There are also serious regional implications, with cholera cases crossing into South Africa and Botswana. On 2 December, South African health authorities said the country had recorded 460 cholera cases and nine related deaths, mostly in border areas near Zimbabwe.

"This outbreak can be contained, but it will depend on many factors, in particular a coordinated approach between all health providers to make sure we are providing the right interventions where they are needed most," said Dr Custodia Mandhlate, WHO Representative to Zimbabwe. "Such interventions include prevention, quick case detection and control, and improved treatment."

The major cause of the cholera outbreak is the inadequate supply of clean drinking water and poor levels of hygiene. Shortages of medicines, equipment and staff at health facilities throughout the country are compounding the health challenges. WHO is advocating for improved access to oral rehydration salts for treating moderate dehydration, which is a symptom of cholera. This could help quickly reduce sickness and deaths.



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To help Zimbabwean authorities and partners respond to the health emergency, WHO has sent medical supplies to treat 50 000 people for common conditions for three months, as well as 3200 moderate cases of cholera. WHO has also sent epidemiologists, a water and sanitation expert and a logistician to Harare to strengthen response efforts on the ground.

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