



# **MSF and OCV 2018: Emergency response – few examples**

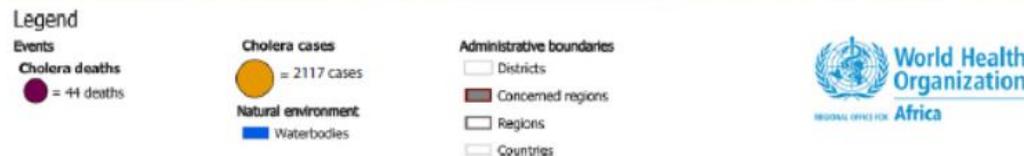
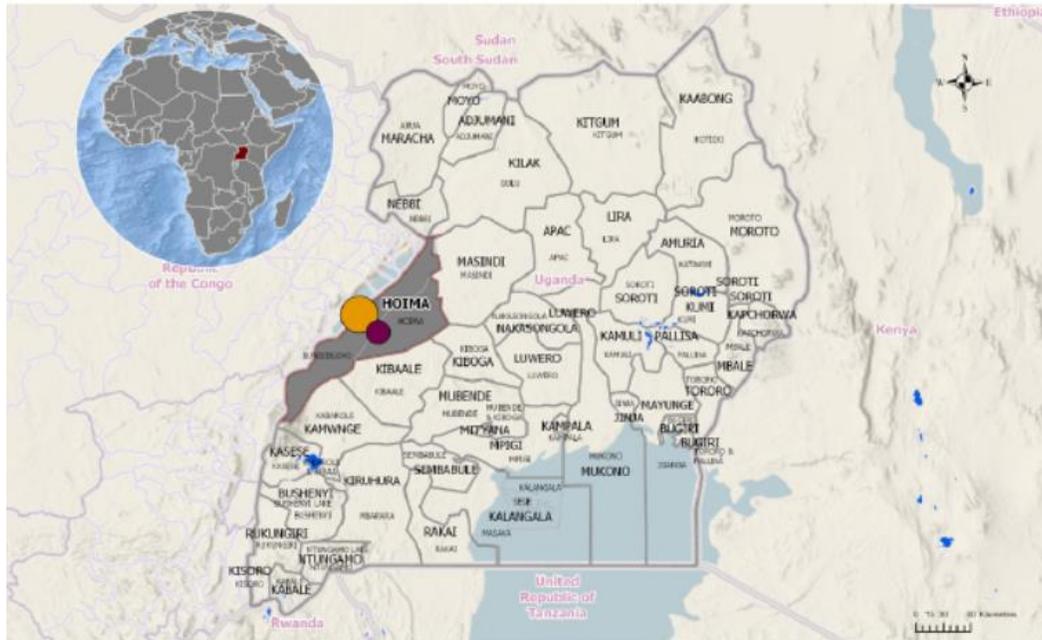
OCV working group, GTFCC

December 2018

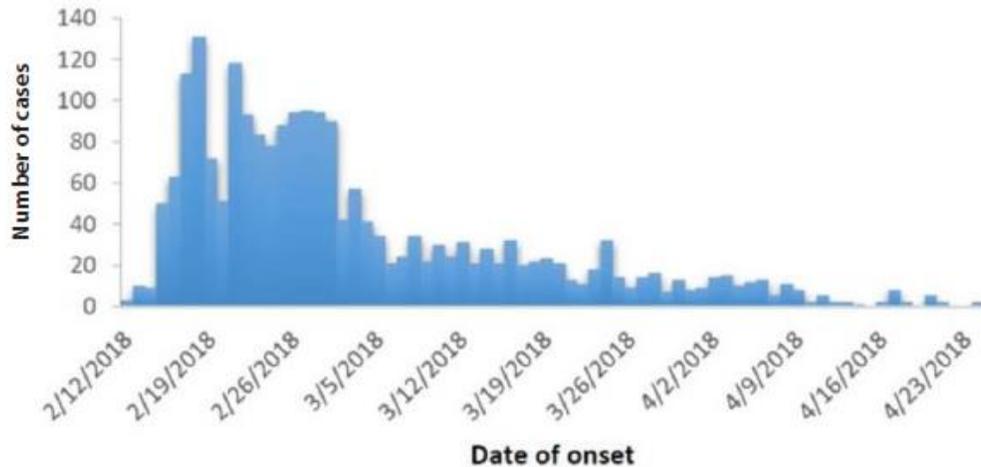
Tanja Ducomble & Myriam Henkens & Iza Ciglencecki

# Hoima, Uganda

- Lake Albert – cholera hotspot
- Hoima district:
  - 42'000 refugees from DRC in Feb
  - 60'000 refugees in August
  - New arrivals continue to arrive

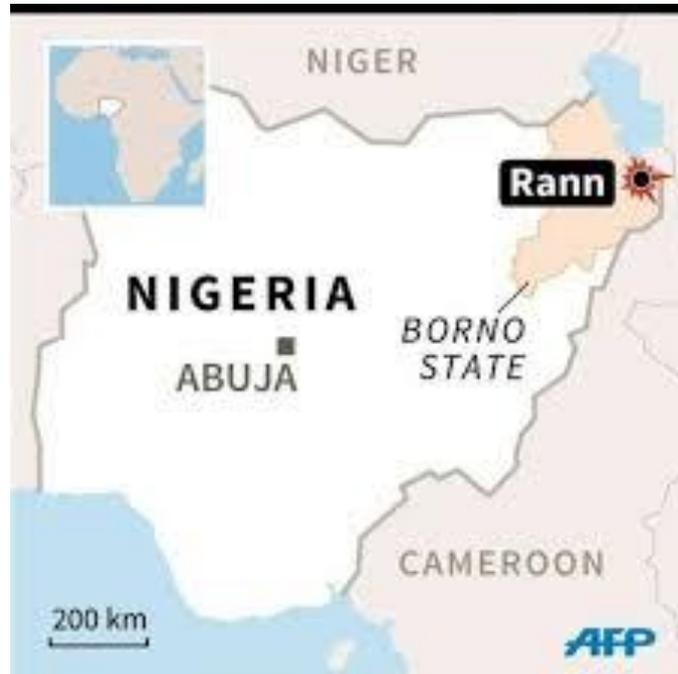


# Hoima, Uganda



- Cholera outbreak declared 15/2/2018
- OCV use:
  - Not pre-emptively
  - GTFCC request just launched at time of the outbreak declaration – redirected)
- 11/2 – 24/4 – 2117 cases, 44 deaths
- First round OCV: 2/5/2018
- Now: cases reported again

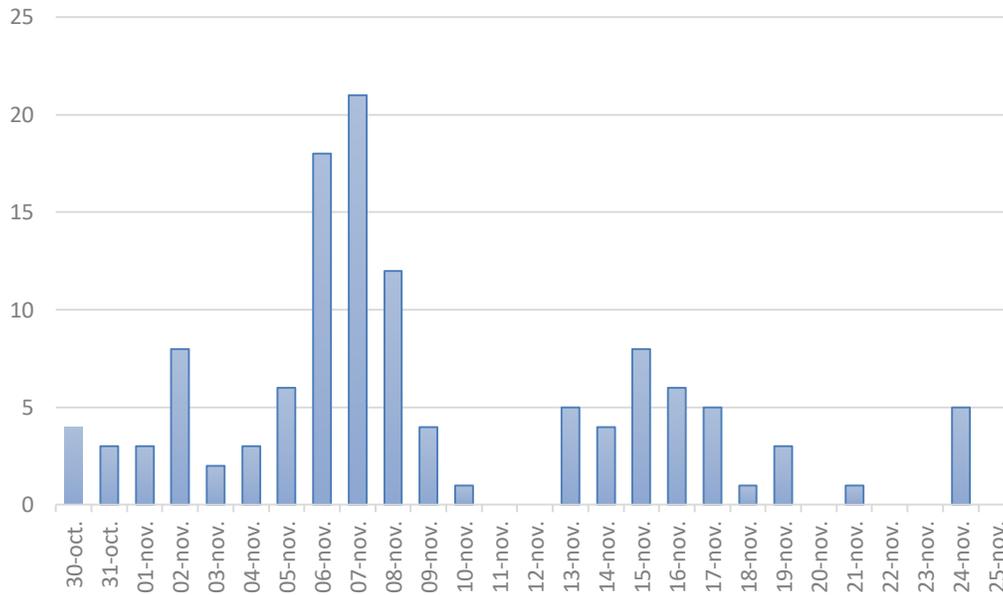
# Rann, Borno State, Nigeria



- Around 48'000 people
- Difficult access+++
  - (arial bombing, insecurity)



# Rann, Borno State, Nigeria

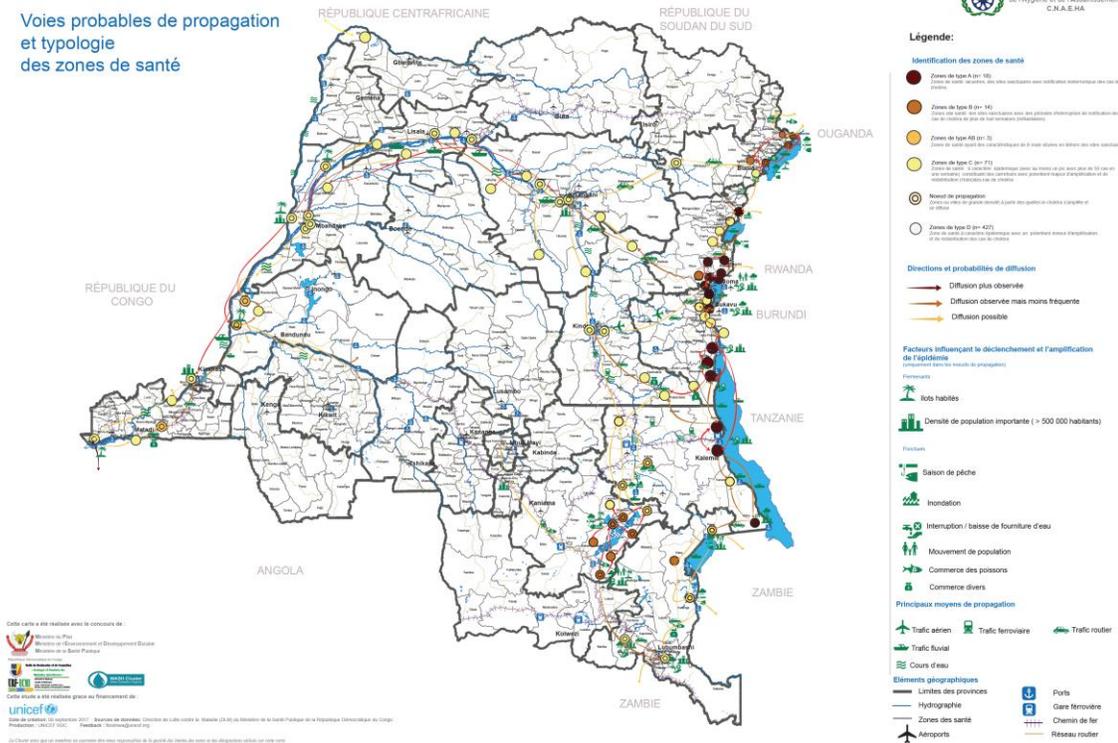


- Short explosive outbreak:
  - 129 cases, 13 deaths (half in community) – 10% CFR
- OCV not used
  - Not pre-emptively
  - Other camps currently vaccinated, Rann not initially planned

# Lumumbashi, DRC

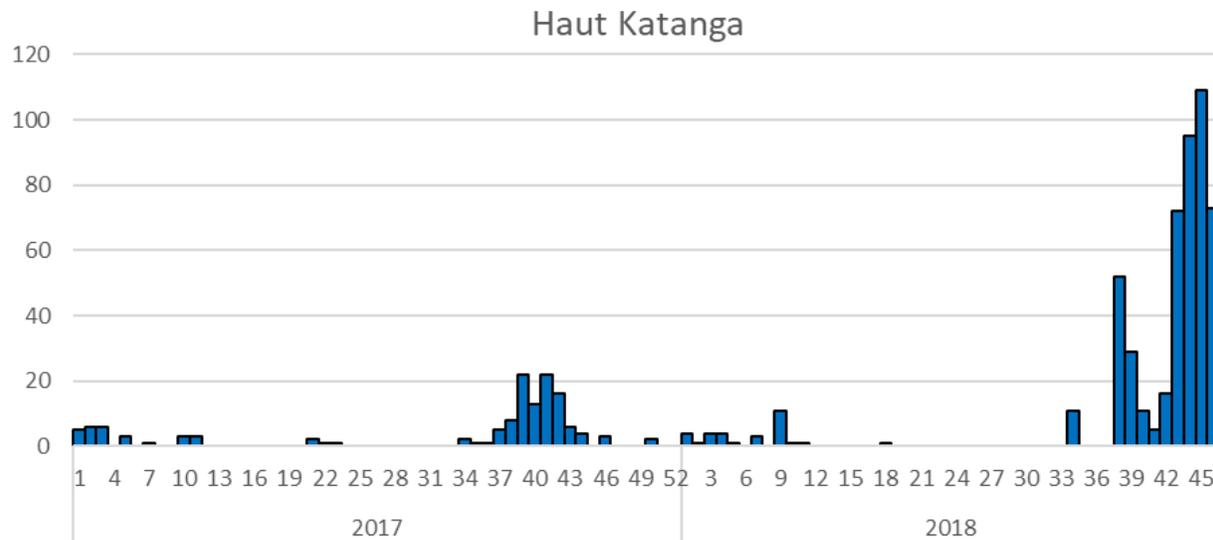
## Cartographie du cholera en RDC:

Voies probables de propagation  
et typologie  
des zones de santé



- Not «typical» hotpost
- But several large scale epidemics (2014, 2008, 2004, 2002...
- Peaking in January at peak of rainy season

# Lumumbashi, DRC



- Current decrease of cases, but increase expected early next year
- Large outbreak expected:
  - Cases early in rainy season
  - Several years without cases
- OCV strategy?
  - Outside of elimination strategy targets
  - Emergency request before expected peak?
  - Trying to redirect / within new GTFCC request?
  - Nothing?

# Key issues

- Place for emergency use of vaccines (vs or within long-term control strategies, overlapping «terminology»), including pre-emptive campaigns in humanitarian settings
- Need for clear separate mechanisms/channels for outbreak (example of other vaccine preventable disease control programs (men A, yellow fever))
- Control of small clusters – early & tail of outbreaks, hotspots post campaigns, etc (role of case centered approaches?)