## Updates and Perspectives on Cholera

Zanmi Lasante, Haiti

November 2018

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### Zanmi Lasante

- Founding organization of Partners In Health
- Over **30 years** in Haiti, partnering with MOH in 2 departments
- **12 clinical sites** integrating community-based care with hospitals and training
- One of the largest employers in Haiti: over 5000 employees—over 1000 at Hopital Universitaire de Mirebalais (HUM) alone
- One tertiary hospital and 2 secondary Hospitals



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#### Where Cholera began in Haiti (Mirebalais)

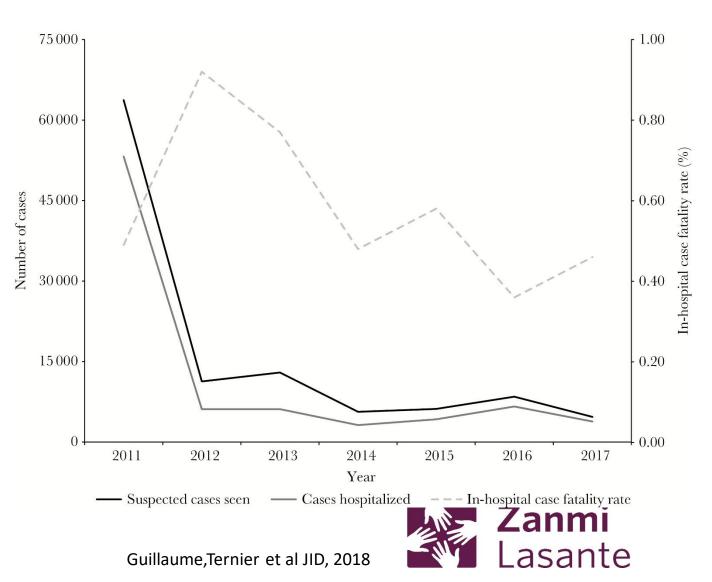






#### Zanmi Lasante - Fighting Cholera

- More than 115,000 diarrheal cases treated since 2010
- 12 PIH/ZL/Ministry of Healthsupported health facilities in the Artibonite and Central Plateau departments
- Low Fatality rate : < 0.5%
- Comprehensive approach, interventions at all levels:
  - Prevention : Vaccination and WASH
  - Treatment
  - Surveillance : 1 lab in Saint Marc (Artibonite) performing culture



#### Clinical presentation of 48 cholera cases compared to noncholera cases

	Cholera diarrhoea cases (n=48)	Non-cholera diarrhoea cases (n=41)*
Time from symptom onset to admission (days)	0 (0-1)	0 (0-1)
Serotype		
Ogawa	37 (77%)	NA
Inaba	11 (23%)	NA
Dehydration stage at presentation		
A (mild)	0 (0%)	10 (24%)
B (moderate)	22 (46%)	25 (61%)
C (severe)	26 (54%)	6 (15%)
Treatment received at clinic		
Oral rehydration solution	46 (96%)	39 (95%)
Intravenous fluids	46 (96%)	29 (71%)
Antibiotics	9 (19%)	2 (5%)
Volume of oral rehydration solution given in clinic (L)†	10 (6–14)	2 (2-5)
Volume of intravenous fluid given in clinic (L)‡	15 (9–20)	3 (2-6)
Admitted overnight to the cholera treatment unit	48 (100%)	29 (71%)
Duration of stay at cholera treatment unit (days)	3 (2-4)	1 (0-1)
Outcome		
Discharged	45 (94%)	38 (93%)
Transferred	1 (2%)	0 (0%)
Died	1(2%)	0 (0%)
Left against medical advice	1 (2%)	3 (7%)



#### Haiti National Cholera elimination plan

- 3 Stages: Emergency plan (2012-2015); mid-term(2016-2018); long-term (2019-2022)
- The mid-term plan includes a holistic coverage: treatment and case management; prevention in the form of vaccination, education, WASH (water treatment at household)
- The long term will involve investment in durable infrastructure to guarantee safe drinking water for example, adequate waste disposal...

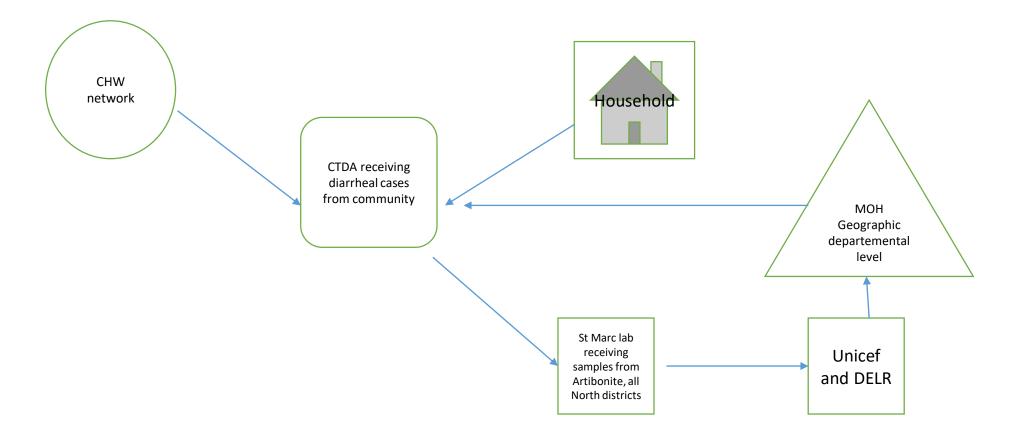


#### Situation in 2018

- All 12 clinical sites remain operational regarding diarrheal treatment
- Involved in Prevention: A cholera vaccination campaign was recently undertaken by PIH/ZL in the commune of Mirebalais targeting a population of over 90K inhabitants.
- We succeeded in reaching 73471 members of the community in Mirebalais, with both doses, over the course of 15 total days of relentless work.
- Partnered with UNICEF for WASH activities in Lascahobas and Mirebalais
- Aba Kolera Bill and Melinda Gates Foundation program 2017-2019 evaluating impact of integrated OCV and WASH activities

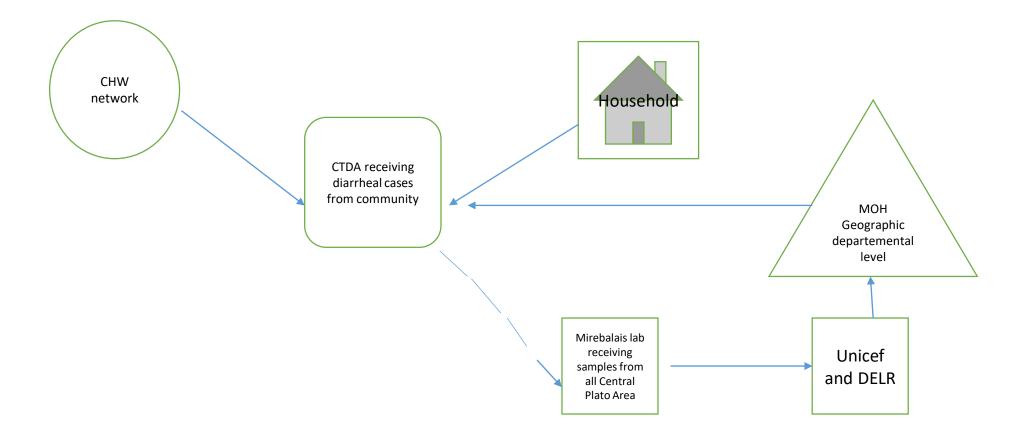


# Snapshot of Treatment and surveillance system in ZL(Artibonite Area)





Snapshot of Surveillance and treatment in ZL(Central Plato)- Functional in a few months





#### Challenges

- Integration of cholera activities not well adopted in some facilities
- Delay in communicating the lab results to the field in order to take actions
- Decrease of WASH funding/activities
- Lack of transformative change in WASH infrastructure after 8 years of epidemic
- Decrease of cholera / diarrhea- specific funding
- Recent political unrest
- Status quo at different high levels in actions to eliminate cholera

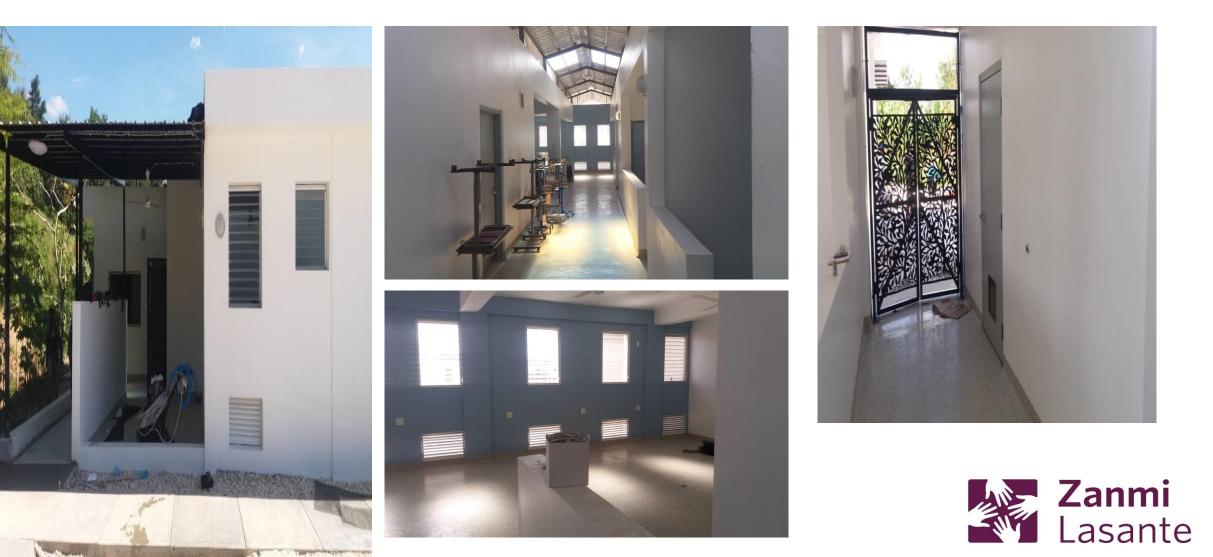


#### Perspectives/Opportunities

- Opening of a new CDTA in Mirebalais (December)
- Lab in Mirebalais operational
- Ongoing Case Control Study to evaluate status in the commune of Mirebalais in the wake of the vaccination campaign+WASH intervention
- Possibility in replicating WASH experience with Unicef in Hinche
- Provide support to the MOH in vaccinating the communes that are not yet covered in the Central and Artibonite department



#### Perspectives



### Thank you!

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