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Media alert from the Media Scanning & Verification Cell, IDSP-NCDC.



| Alert ID                        | Publication Date  | Reporting Date | Place Name           | News Source/Publication Language  |
|---------------------------------|---|----------------|----------------------|---|
| 3677                            | 26.09.2016  | 26.09.2016     | Malkangiri<br>Odisha | <a href="http://www.newindianexpress.com/English">www.newindianexpress.com/English</a><br><a href="http://www.newindianexpress.com/states/odisha/Japanese-Encephalitis-scary-in-Malkangiri/2016/09/26/article3630105.ece">http://www.newindianexpress.com/states/odisha/Japanese-Encephalitis-scary-in-Malkangiri/2016/09/26/article3630105.ece</a> |
| <b>Title:</b>                   | <b>Japanese Encephalitis scare in district Malkangiri, Odisha</b> |                |                      |   |
| Action By<br>CSU, IDSP<br>-NCDC | Information communicated to DSU- Malkangiri, SSU-Odisha           |                |                      |   |

Death of 14 children, aged between 2 and 15, in one fortnight in Malkangiri district has put the health authorities on tenterhooks. While it is suspected that the children might have died in Japanese Encephalitis (JE), health officials claimed they were suffering from acute encephalitis syndrome (AES).

The deaths have been reported from Kalimela, Pandripani and Korkunda blocks of the district which had first witnessed the incidence of AES and JE in 2012. At least four children have died in Koimetla village in one week spreading panic among the residents.

Sources said of the 15 children who were undergoing treatment in district headquarters hospital (DHH), six have been shifted to MKCG Medical College and Hospital at Berhampur. The children showed symptoms of AES like fever, vomiting and fatigue.

Hospital authorities have started precautionary measures to check the menace. Blood samples of these children have been sent to Regional Medical Research Centre (RMRC) for tests to ascertain whether they were infected by JE.

**Save Water- Save Life, Save a tree- Don't print unless it's really necessary!**

**Disclaimer:- This is a media alert subject to verification.**

**Integrated Disease Surveillance Programme (IDSP), National Centre for Disease Control,  
Ministry Of Health & Family Welfare, Government of India**

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Meanwhile, a team of health officials has visited the affected villages in three blocks of the tribal-dominated district. The team comprised Director (Public Health) Dr Kailas Chandra Dash, Joint Director of National Vector Borne Disease Control Programme (NVBDCP) Dr MM Pradhan and experts from Animal Disease Research Institute (ADRI).

Deputy Director of NVBDCP Dr Rajendra Mallick said population in the affected villages belonged to tribal communities with low socio-economic status who lived on cultivation and daily wages. "They live in unhygienic condition and raise pigs which are major carrier of the virus," he said.

The outbreak of AES and JE usually coincides with the monsoon and post-monsoon period when the density of mosquitoes increases. As precautionary measure, awareness drive as well as measures to curb mosquito menace has been started in all affected areas of the district.

Paddy fields close to houses, high pig to cattle ratio, high density of Culex vishnui mosquitoes, low socio-economic status and low health awareness in tribal population have been cited as reasons behind the spurt in AES cases.

Dr Mallick said house-to-house survey was undertaken to record the suspected cases and information on clinical presentations. "The blood samples have also been collected by the ADRI team. The reports are awaited," he added.

Sudden deaths in children due to AES were first reported in the district during September-November, 2012 when 272 suspected cases with 24 deaths were observed.

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