



Overview of CEU; Implementation of International Health Regulations (2005) at PoEs

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Deputy Director (Port Health/PHE)
Central Epidemiology Unit

Organization and Functions of CEU/PHE

Director General (Department of Public Health)

Deputy Director General (Disease Control)

Director (Epidemiology/PHE)

Deputy Director (Port Health /PHE)

IHR Coordination, JEE
PoEs Quarantine Team
GMS Health Security Project
Disaster Preparedness and Response
EOC

Deputy Director (Epidemiology)

Communicable Diseases Surveillance and Response
VPDS including Polio eradicating
FETP

Deputy Director
Zoonosis (Rabies)
One Health
Hepatitis

Deputy Director
Influenza
PIP
CD Law
Myanmar CDC

Improving Community Health

Supporting MOHS & DOPH Activities

Surveillance and Response

Diseases under
National
Surveillance

HMIS + 33
Sentinel Sites

Epidemic prone
Communicable
Diseases

Diarrhoea
Cholera
Meningitis
Food poisoning

Vaccine
Preventable
Diseases

Poliomyelitis
Measles
MNT
Diphtheria
Whooping Cough

Emerging
Infectious
Diseases

Influenza
(H1N1, H5N1)
Ebola
SARS
Nipah Virus

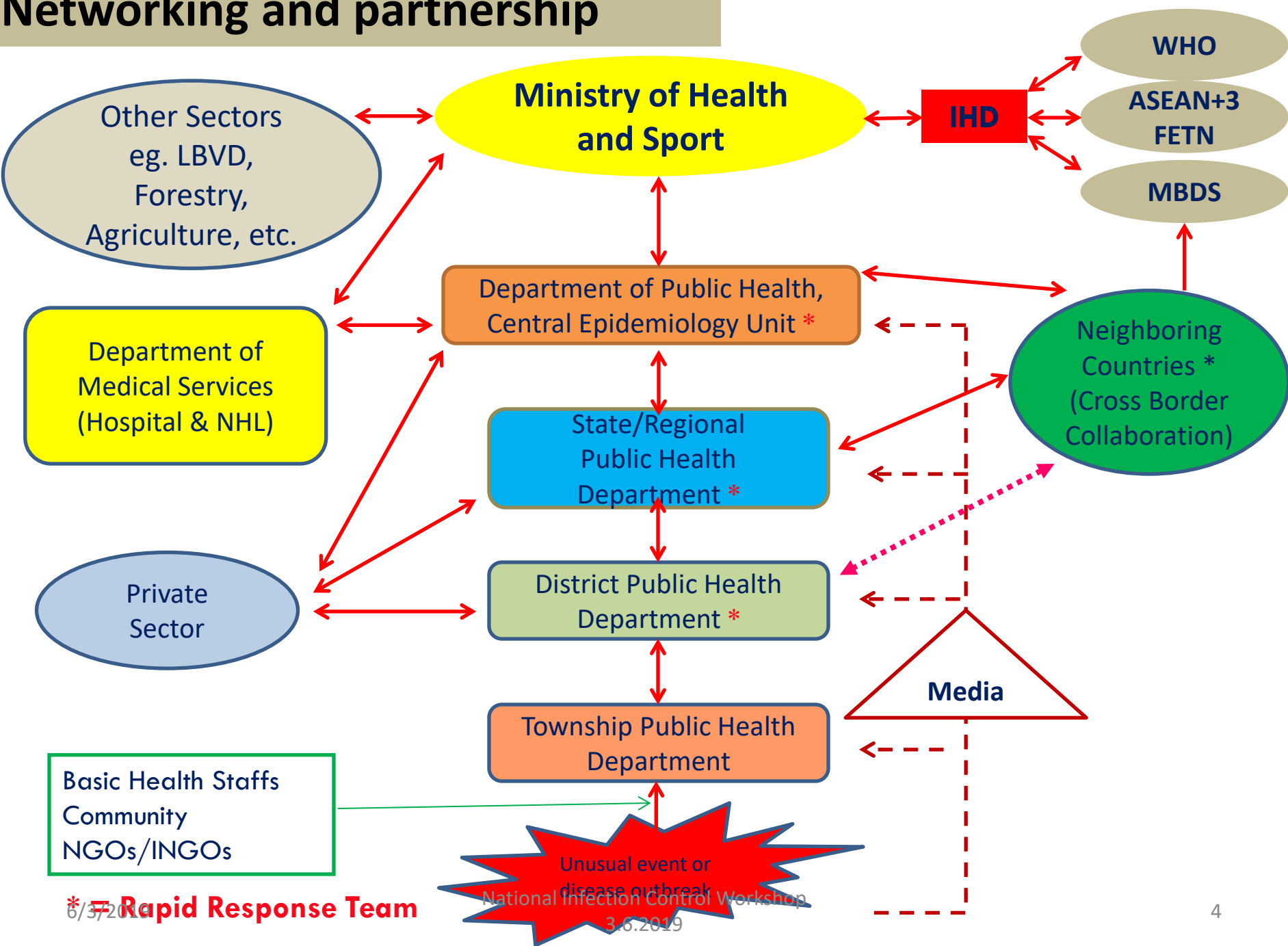
Zoonotic
Diseases

Plague
Leptospirosis
Anthrax

Disaster Management (esp. Early Warning Alert & Response System)

IHR Implementation (Port Health & Cross Border Surveillance)

Networking and partnership



6/3/2019

National Infection Control Workshop
3.6.2019



World Health
Organization

Regional Office for South-East Asia



WHO in South-East Asia

Regional Director

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Polio-free certification of the World Health Organization South-East Asia Region

WHO South-East Asia Region is officially certified polio-free



A quarter of the world population lives in the 11 countries of the Region – Bangladesh, Bhutan, Democratic People's Republic of Korea, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand and Timor-Leste. With this certification on 27 March 2014, 80% of the world's population now lives in polio-free certified Regions.

[Press release](#)

[Polio-free certification of the WHO South East Asia Region](#)

[Photo Story - How communities are being informed about immunization services](#)

[Photo Story - The journey of vaccination medical teams](#)

Recent events

WHO South-East Asia
Region is officially
certified polio-free

Bangladesh: home-
grown solutions helped
stop polio and keep this
country polio-free

Vigilance is key to
keeping polio out of
Nepal

Polio eradication in
Indonesia -
Surveillance,
immunization and
community support

cVDPV cases details

cVDPV type 1 cases (4 Cases)

Kayin State

Hpa Pun Township - 4

Sin Swei village – 3

Bo Loe Hta village - 1

	Hpa Pun Townships	Kayin State
Total population	131,845	1,721,795
Under 1 Year	3,356	38,113
Under 5 Years	14,923	187,307



Location of P1 VDPV case

1. MMR030319001

Katai Ti RHC

Baw Kyo Lae Sub RHC

Sin Swel village

Date of onset - 22 May 2019

2. MMR030319002

La Gun Pyo RHC

Bo Loe Hta village

Date of onset - 14 June 2019

Contact Cases

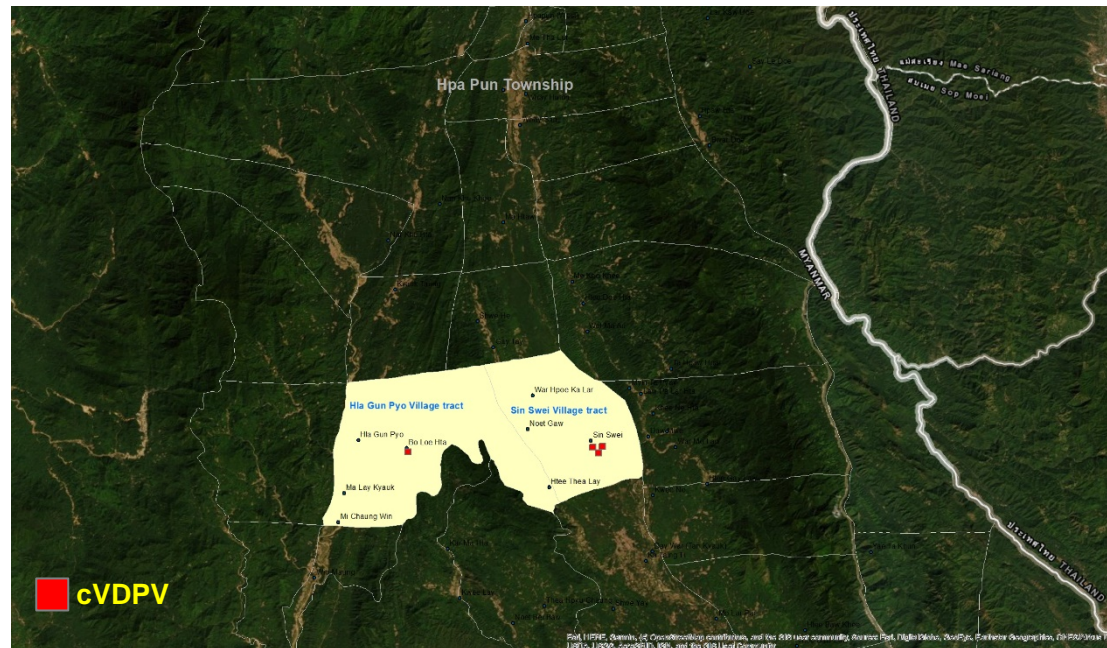
3. MMR030319001-C2

4. MMR030319001-C5

Katai Ti RHC

Baw Kyo Lae Sub RHC

Sin Swel village





Measles Outbreak in Naga Region (2016)





ရာသီတုပ်ကွေးရောဂါကို မိမိကစ၍ ကာကွယ်ပါ။



ကျန်းမာရေးနှင့်အားကစားဝန်ကြီးဌာန
(၂၀၁၇ခုနှစ်၊ ဇူလိုင်လ ၂၆ရက်)

- ရာသီတုပ်ကွေးရောဂါပိုးသည် အသက်ရှူလမ်းကြောင်းမှတစ်ဆင့် ကူးစက်နိုင်ပါသည်။
- အဆိုပါရောဂါသည် အချို့လူများတွင် ရောဂါလက္ခဏာများပိုမိုပြင်းထန်နိုင်ပါသည်။
- နှာချေတိုင်း၊ ချောင်းဆိုးတိုင်း ပါးစပ်နှင့်နှာခေါင်းကို သေချာစွာဖုံးအုပ်ပါ။
(လက်တိုင်ပုဝါ / တစ်ရှူး / တစ်ခါသုံးပါးစပ်နှာခေါင်းစည်း တို့ကို အသုံးပြုနိုင်ပါသည်။)
- မိမိအနီးတွင် နှာချေ၊ ချောင်းဆိုးခြင်းရှိပါကလည်း အထက်ပါနည်းအတိုင်းကာကွယ်ပါ။
- နှာချေ၊ ချောင်းဆိုးပြီးချိန်နှင့် ရောဂါလက္ခဏာရှိသူများအား ထိတွေ့ကိုင်တွယ်ပြီးချိန်တိုင်း ရေနှင့်ဆပ်ပြာတို့ဖြင့် သေချာစွာ လက်ဆေးပါ။
- မိမိတွင် တုပ်ကွေးရောဂါဖြစ်ပွားသည်ဟု သံသယရှိပါက အခြားသူများသို့ ကူးစက်မှုမှ ကာကွယ်ရန်- မိသားစုနှင့် နီးကပ်စွာနေထိုင်ခြင်း / ကျောင်း၊ ဈေး၊ လုပ်ငန်းခွင်နှင့် လူထုထပ်သောနေရာများသို့ သွားလာခြင်းတို့ကို ရှောင်ကြဉ်ပါ။

Field Epidemiology Training Program (FETP)

- CEU has been conducting FETP training for health staffs since 2008.
 - development of epidemiological skill of health staffs
 - on-the-job training on disease surveillance, outbreak investigation, disaster health management
- About 700 participants of doctors, veterinarian and basic health staff were trained for FETP as rapid respond team (RRT) members.



Greater Mekong Sub-region Health Security (GMS-HS) Project



- Health Security Project for GMS countries (CLMVs): \$125 Million loan from ADB on 22nd Nov 2016 (Cambodia, Laos, Myanmar, Vietnam)
- Myanmar had received a \$12 million loan

MBDS Cross Border TTX Exercises (2016)



Public Health Emergency Operations Center Plan



24/7 EOC Activation During Current 2019 Flooding

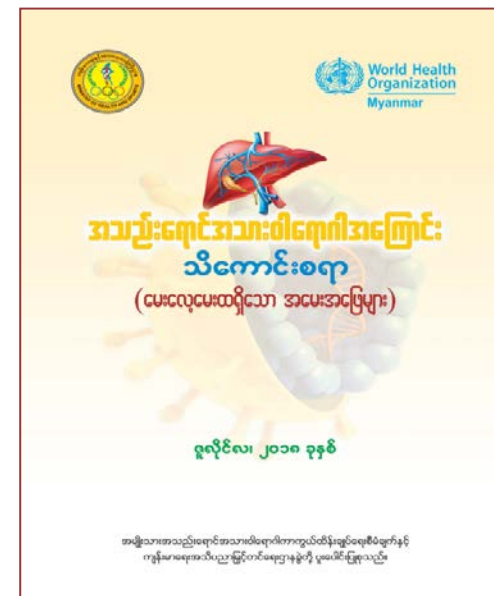
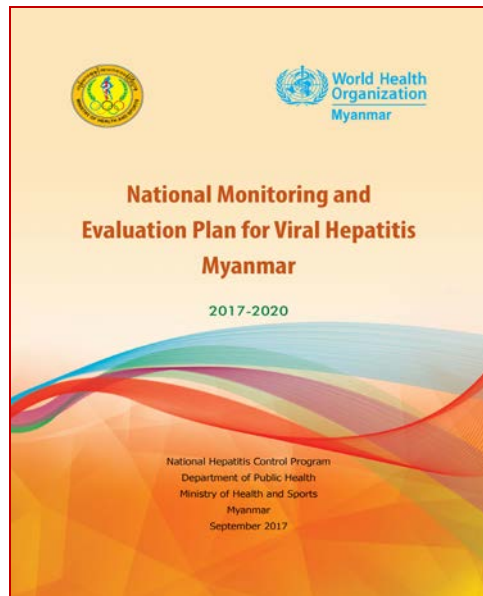
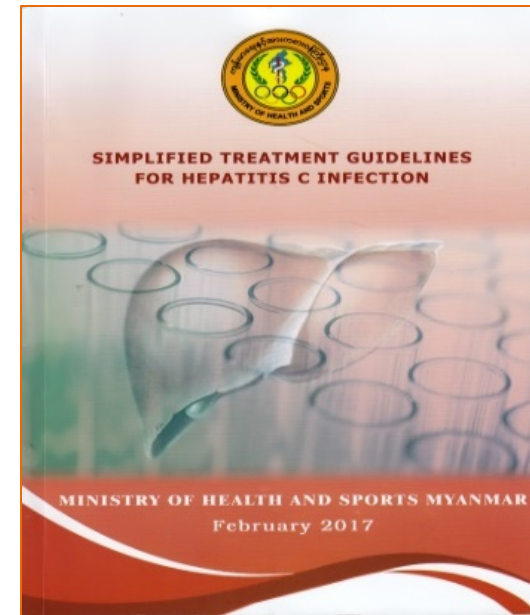
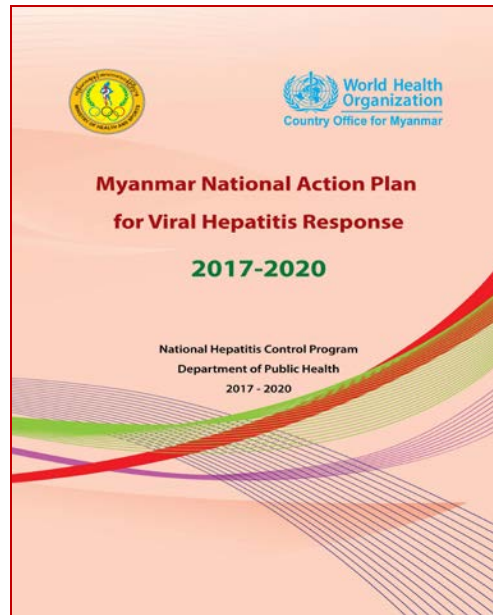
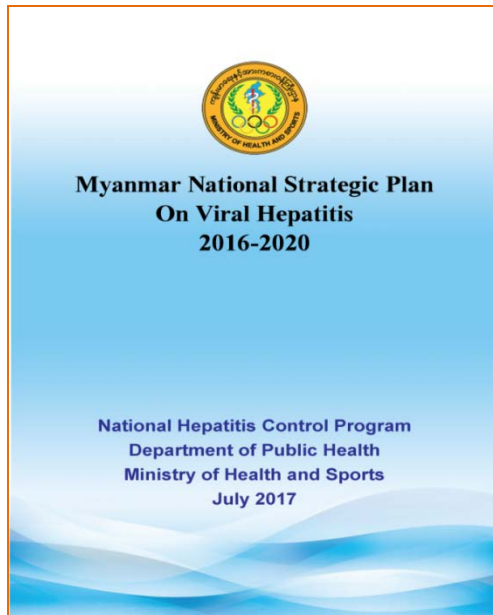
Flood Response Activities By MOHS (2019)



Rabies Prevention and Control



VH - related documents



Setting up of Dog Bite Treatment Center



Yangon General Hospital



Thingangyun Sanpya Hospital

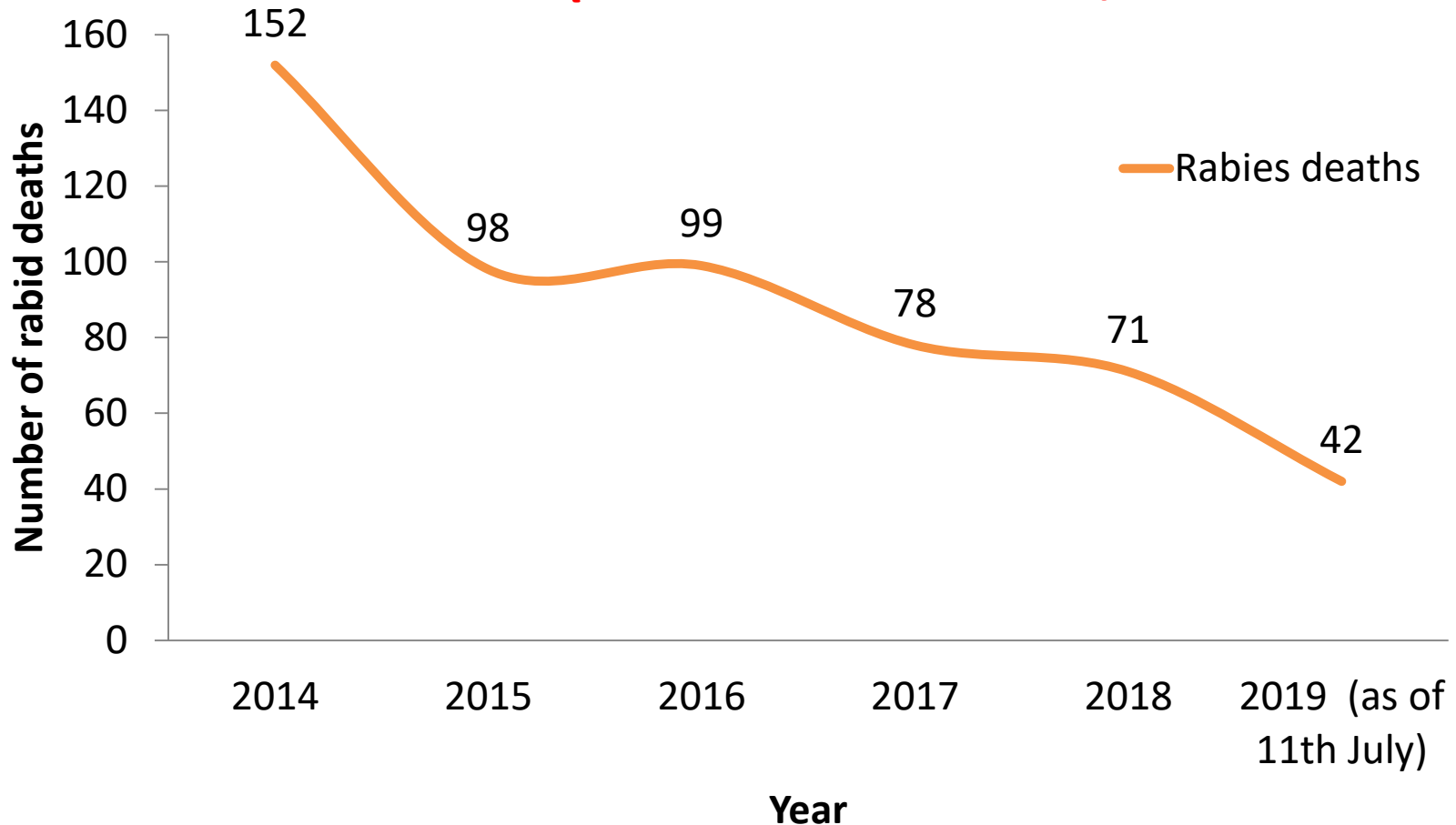


North Okkalapa General Hospital



Insein General Hospital

Rabies deaths in Myanmar (from 2014 to 2019, as of 11th July)



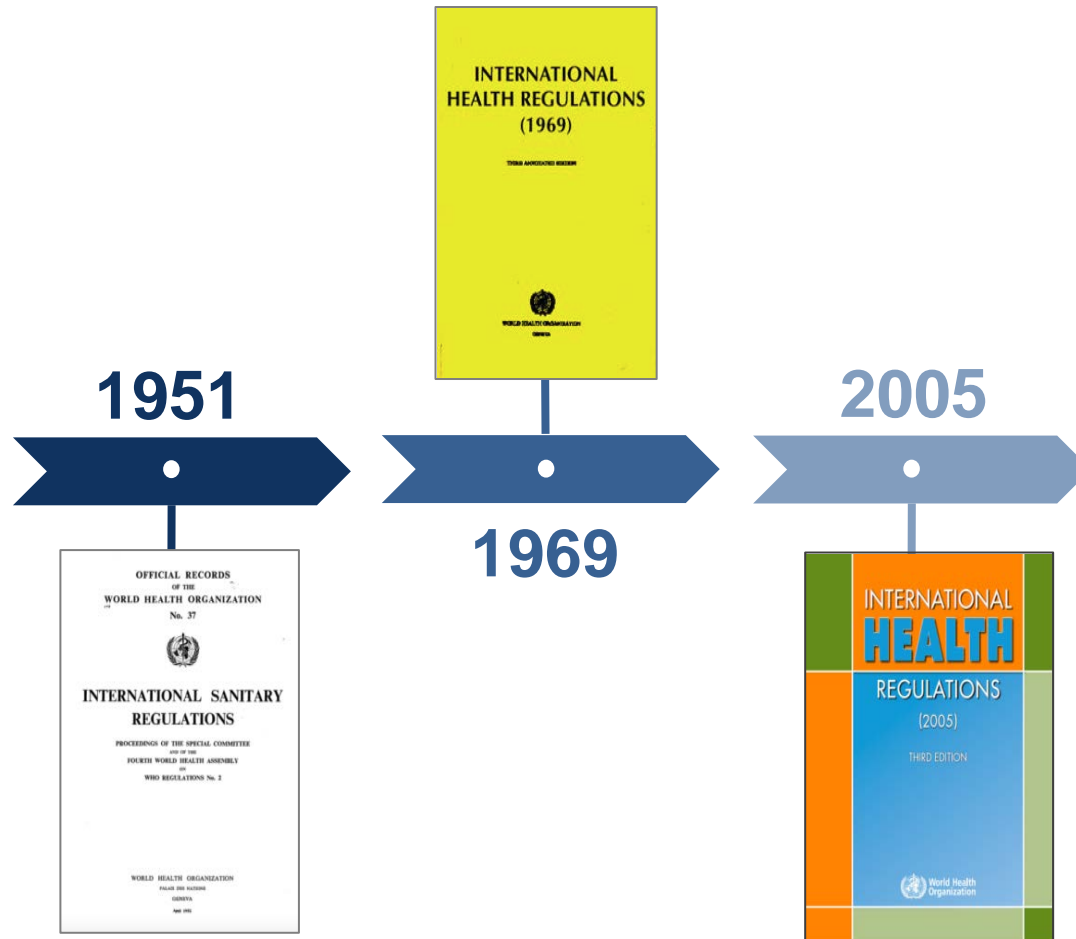
Data source - HMIS, MoHS (as of 11th July, 2019)

Surveillance legislation

- **International Health Regulations (2005)**
 - **Notifiable diseases**
 - 1) Smallpox
 - 2) poliomyelitis due to wild type poliovirus
 - 3) human influenza caused by a new subtype, and
 - 4) severe acute respiratory syndrome (SARS)
 - **Decision instrument in Annex 2 for PHEIC**
- **Communicable Diseases Law is being updated**
 - **Notifiable diseases**



International Health Regulations (IHR)



- A broader scope
- Mandate States Parties to notify WHO of potential public health emergency of international concern (PHEIC) and authorize WHO to consider unofficial reports
- Establish **IHR National Focal Points (NFP)** and **WHO IHR Contact Points**

International Health Regulations (IHR)

Global health security legal instrument to:

- Prevent
- Protect against
- Provide a public health response

...for ALL public health threats

INTERNATIONAL HEALTH REGULATIONS (IHR)

– from policy to people's health security

What are the IHR?

The IHR are legally binding and help countries work together to protect lives threatened by the spread of diseases and other health risks, including radiation and chemical hazards



5 reasons why the IHR matter

 <h4>HEALTH THREATS HAVE NO BORDERS</h4> <p>The IHR strengthen countries' abilities to control diseases that cross borders at ports, airports and ground crossings</p>	 <h4>TRAVEL AND TRADE ARE MADE SAFER</h4> <p>The IHR promote trade and tourism in countries and prevent economic damage</p>	 <h4>GLOBAL HEALTH SECURITY IS ENHANCED</h4> <p>The IHR establish an early warning system not only for diseases but for anything that threatens human health and livelihoods</p>	 <h4>DAILY THREATS ARE KEPT UNDER CONTROL</h4> <p>The IHR guide countries to detect, assess and respond to threats and inform other countries quickly</p>	 <h4>ALL SECTORS BENEFIT</h4> <p>The IHR prepare all sectors for potential emergencies through coordination and information sharing</p>
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A legally-binding global health security framework agreed to by 196 States Parties, including all World Health Organization (WHO) Member States.

First pandemic of this century : SARS (1 Nov 2002 to 31 July 2003)

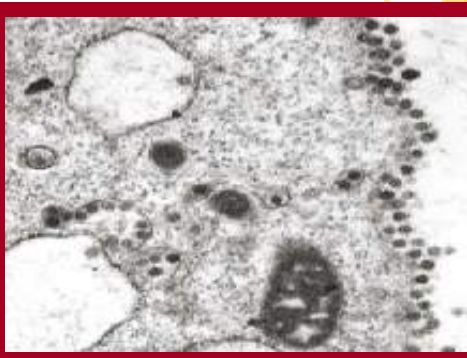
SARS

8096 cases

774 deaths

26 countries

A new
coronavirus



IHR Core Capacities

- **Eight “core capacities”**
 - National legislation, policy and financing.
 - Coordination and National Focal Point (NFP) Communications.
 - Surveillance.
 - Response.
 - Preparedness.
 - Risk communication.
 - Human resources.
 - Laboratory.
- **Points of Entry**
- **Capacities for IHR-relevant hazards (infectious diseases, zoonoses, food safety, chemical, radio-nuclear).**

Decision instrument (Annex 2) of IHR (2005) for Assessment and Notification

4 diseases that shall be notified
**polio (wild-type polio virus),
smallpox, human influenza new
subtype, SARS.**

Disease that shall always lead to
utilization of the algorithm: **cholera,
pneumonic plague, yellow fever,
VHF (Ebola, Lassa, Marburg), WNF,
others....**

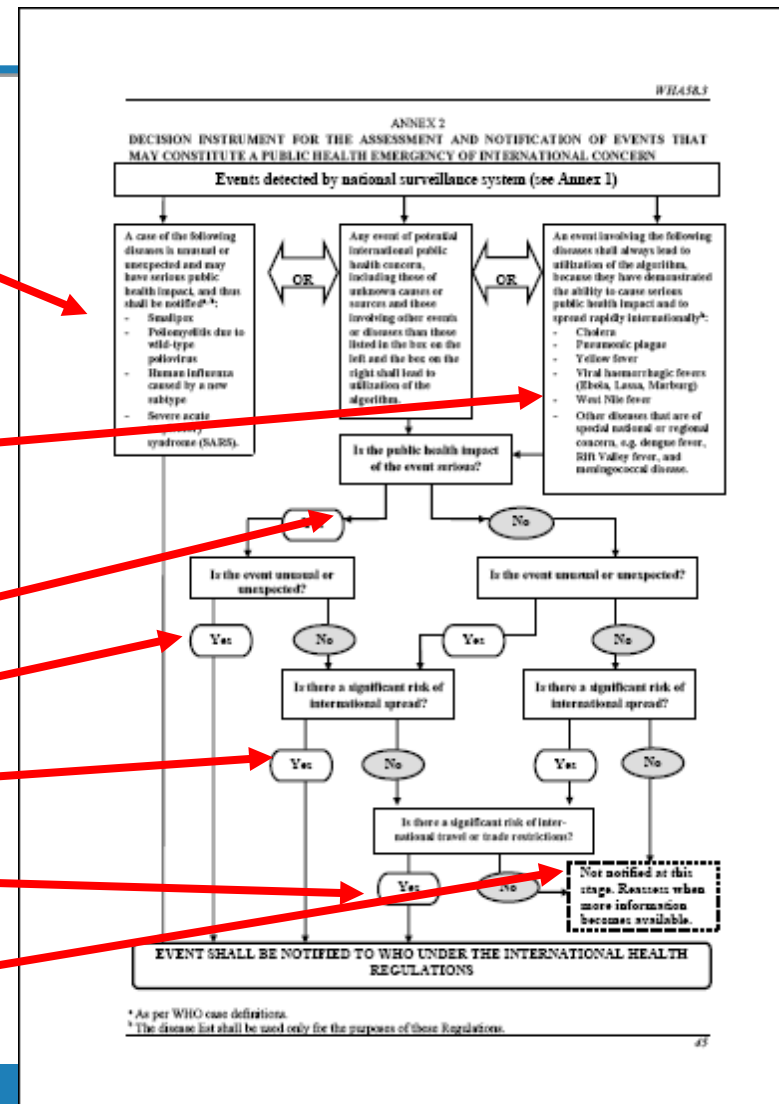
Q1: public health impact serious?

Q2: unusual or unexpected?

Q3: risk of international spread?

Q4: risk of travel/trade restriction?

Insufficient information: reassess

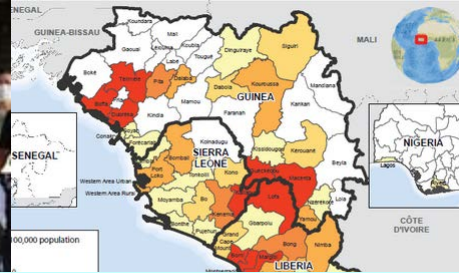


Public Health Emergency of International Concern

Events

Public Health Emergency of International Concern

- Small pox



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Statement on the meeting of the International Health Regulations (2005) Emergency Committee for Ebola virus disease in the Democratic Republic of the Congo

12 June 2019



U.S.-Burma Relations

Fact Sheet, Office of the Spokesperson, Washington, DC
September 14, 2016

President Obama & State Counselor Aung San Suu Kyi



External Team Assessment Mission on Joint External Evaluation



The 19 Technical Areas (TA)

The JEE Tool examines 19 technical areas in four categories: Prevent, Detect, Respond and Other Hazards.

PREVENT

1. National Legislation, Policy and Financing
2. IHR Coordination, Communication and Advocacy
3. Anti-microbial Resistance (AMR)
4. Zoonotic Disease
5. Food Safety
6. Biosafety and Biosecurity
7. Immunization

DETECT

8. National Laboratory System
9. Real-Time Surveillance
10. Reporting
11. Workforce Development

RESPOND

12. Preparedness
13. Emergency Operations Centres
14. Linking Public Health and Security Authorities
15. Medical Countermeasures and Personnel Deployment
16. Risk Communication

OTHER HAZARDS

17. Points of Entry (PoEs)
18. Chemical Events
19. Radiation Emergencies

Risk communication	R.5.1 Risk communication systems (plans, mechanisms, etc.)	1
	R.5.2 Internal and partner communication and coordination	3
	R.5.3 Public communication	3
	R.5.4 Communication engagement with affected communities	2
	R.5.5 Dynamic listening and rumor management	2
Points of entry	PoE.1 Routine capacities established at points of entry	2
	PoE.2 Effective public health response at points of entry	2
Chemical events	CE.1 Mechanisms established and functioning for detecting and responding to chemical events or emergencies	1
	CE.2 Enabling environment in place for management of chemical events	1



THE REPUBLIC OF THE UNION OF MYANMAR
Ministry of Health and Sports

NATIONAL ACTION PLAN FOR HEALTH SECURITY (NAPHS)

2018 ~ 2022



O C T O B E R 2 0 1 8

Points of Entry

All International Airports and Seaports



Designated Ground Crossing Points



Designated Points of Entry in Myanmar

Airports

1. Yangon International Airport
2. Nay Pyi Taw International Airport
3. Mandalay International Airport

Sea Port

1. Yangon International Seaport

Ground Crossings





1. Kawthaung – Ranaung(Thai)
2. Tarchilake – Mae Sai(Thai)
3. Myawady – Me sout(Thai)
4. Muse – Shwe Li(China)
5. Tamu-Moreh(India)

Tourism

1. Nyaung Oo Airport
2. Kawthaung Seaport
3. Ngapali Seaport
4. MawLamyaing Seaport



PoE Core capacity requirements at all times (routine)

	Capacity	JEE Score
	Medical services including diagnostic facilities for the prompt assessment and care of ill travellers and with adequate staff, equipment	Limited Capacity
	Equipment of ill travellers	Developed Capacity
	Inspection of conveyances	Demonstrated Capacity
	Trained personnel for the inspection of conveyances are available	Sustainable Capacity



Travel Health

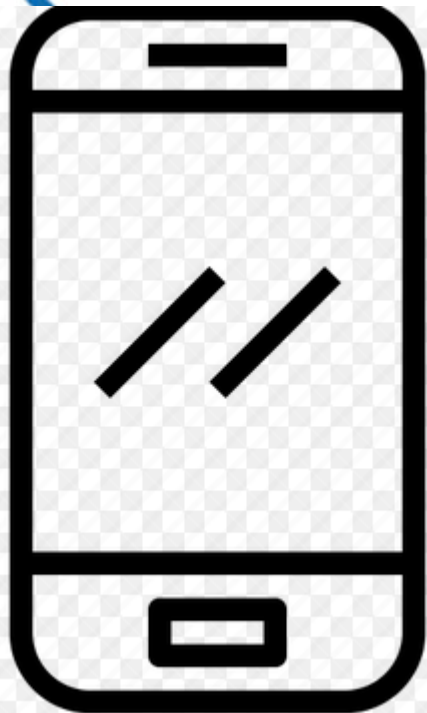
PoE Core capacity requirements during PHE



GOARN

Global Outbreak Alert and Response Network

Incident Management System (IMS)



Mekong Basin Disease Surveillance

MBDS



Yangon International Airport

Score	Indicators – Points of Entry (PoE)	
	PoE.1 Routine capacities are established at PoE.	PoE.2 Effective Public Health Response at Points of Entry
No Capacity – 1	No capacity at PoE for appropriate medical services	No National public health emergency contingency plan exists for responding to public health emergencies occurring at points of entry.
Limited Capacity – 2	Designated PoE have access to appropriate medical services including diagnostic facilities for the prompt assessment and care of ill travellers and with adequate staff, equipment and premises (Annex 1B, 1a)	National public health emergency contingency plan in place for responding to public health emergencies occurring at points of entry, integrated with other PH response plans, covering all relevant sectors and services at PoE developed and disseminated to all key stakeholders
Developed Capacity – 3	Designated PoE can provide access to equipment and personnel for the transport of ill travellers to an appropriate medical facility	Facilities for assessing potentially contaminated/ infected travellers and animals either onsite or through liaison with local PH services available as well as facilities for the assessment and quarantine of suspect travellers
Demonstrated Capacity – 4	Inspection program to ensure safe environment at PoE facilities functioning. A functioning programme for the control of vectors and reservoirs in and near PoE exists (Annex 1b, Art. 1e)	Referral system and transport for the safe transfer of ill travellers to appropriate medical facilities in place with regular updating and testing of national public health emergency contingency plan with published reports
Sustainable Capacity – 5	Trained personnel for the inspection of conveyances are available at designated PoE (Annex 1b, Art. 1c)	Evaluation and publication of effectiveness in responding to PH Events at PoE

Some Activity Photos (Ygn Int Airport & Waibergi Hospital) (15-3-2017)



Kawthaung Cross Border

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Demonstrated Capacity – 4	Inspection program to ensure safe environment at PoE facilities functioning. A functioning programme for the control of vectors and reservoirs in and near PoE exists (Annex 1b, Art. 1e)	Referral system and transport for the safe transfer of ill travellers to appropriate medical facilities in place with regular updating and testing of national public health emergency contingency plan with published reports
Sustainable Capacity – 5	Trained personnel for the inspection of conveyances are available at designated PoE (Annex 1b, Art. 1c)	Evaluation and publication of effectiveness in responding to PH Events at PoE

Some Activity Photos (Kawthaung) (20-3-2017)



INTERNATIONAL HEALTH REGULATIONS

(2005)

A guide for public health emergency
contingency planning at designated points of entry



ကျန်းမာရေးဝန်ကြီးဌာန

ကျန်းမာရေးဦးစီးဌာန

ဗဟိုကူးစက်ရောဂါတိုက်ဖျက်ရေးဌာနခွဲ

ရန်ကုန်အပြည်ပြည်ဆိုင်ရာလေဆိပ်နှင့် ရန်ကုန်ဆိပ်ကမ်းတို့တွင်
ကူးစက်မြန်ရောဂါများ (Ebola/ MERCOV/ H7N9 အပါအဝင်)
စောင့်ကြပ်ကြည့်ရှုခြင်းနှင့်
တုံ့ပြန်ဆောင်ရွက်ခြင်းလုပ်ငန်းစီမံချက်

နေပြည်တော် (၂၀၁၅)၊ ဩဂုတ်လ

Objectives of the Workshop

- To improve the awareness and concepts of International Health Regulations (2005) including capacity building at PoEs
- To improve the skills of health staff on management and referral of communicable diseases as well as BLS
- To strengthen the readiness of health staff on handling of highly contagious patients by PPE drill

*Thank
you*

