DENGUE FEVER IN PAKISTAN: WHAT TO DO NOW?

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Dengue strikes again Pakistan targeting Sindh province where 248 cases were reported in the third week of September out of which 244 were from Karachi according to Sindh Dengue Control Program (SDCP).¹ Since January 2015, a total of 1630 cases were reported including 1585 from Karachi with three deaths, all from the provincial capital. Early in September, it was Rawalpindi that was struck with 81 cases reported by September.² The figures in Khyber Pakhtunkhwa (KPK) Province show a sharp decline since 2013 when over 11,600 persons were affected by the deadly virus. Out of these, 9,038 cases were reported from Swat alone where 37 people succumbed to the virus.³ As compared to above by October 22, 2015, only 1700 cases had been detected in KPK, 483 from Mansehra, 421 from Abbottabad and 331 from Malakand Division. The toll remained on the lower side in Swat, Lower Dir and Charsadda with 25, 13 and 2 cases respectively. Only one case was tested positive for dengue virus in Upper Dir, Shangla and Kohat each.⁴

Although eradicating dengue virus from Pakistan appears to be a distant dream yet at least we can adopt preventive measures and control its spread. We can learn from the success story in Swat Valley where a large scale dengue outbreak occurred in 2013 with 9038 cases and 37 deaths. In 2014 with the combined effort of district administration, government departments, community based organizations, non-governmental organizations (NGOs) and the Lady Health Workers (LHWs) of Health Department, the figure was brought down to 307 cases with no deaths. The number of cases were further lowered to 36 in 2015 which is a remarkable achievement.⁵

How this success story began? The Swat district administration started larvicidal activities in the high risk union councils by covering all the drains and ponds with pesticides in April 2014, when the larvae hatch. An awareness campaign was launched to educate people to keep themselves safe from dengue infection in which mosques and local members of provincial assembly were also involved. The campaign included display and distribution of banners, posters, leaflets and vehicle-mounted projectors to show videos to the public for creating awareness about dengue.⁵

The above mentioned methods to control dengue epidemic were suggested in our July-September 2011 editorial which went unheeded until we were engulfed by the epidemic in 2013. Then we wrote again reminding Health Department at Provincial and Federal levels to adopt preventive measures for avoiding future dengue fever epidemics.⁶,⁷

Now we are writing again to remind the nation that if dengue virus can be successfully controlled in Swat District so why not in the rest of the country? It’s easy with integrated effort and almost impossible if we get distracted and act in different directions. We are in dire need of Unity, Faith and Discipline advocated by the founder of Pakistan Quaid-e-Azam Muhammad Ali Jinnah in 1947.

In the absence of a vaccine and non-availability of specific treatment the management of patients with dengue fever is entirely supportive. Therefore preventive measures and vector control especially during their breeding season are of prime importance. These targets can be easily achieved by a massive public awareness campaign organized at district level through community based programs and combined efforts of all government departments and NGOs.

In a study carried out at Karachi about knowledge, attitude and practice regarding dengue fever in adults it was found that knowledge of preventive measures about dengue fever and its vector were inadequate in the low socioeconomic class.⁸ In another study from Karachi it was concluded that the overall knowledge about dengue fever was poor especially among illiterate people. The same study pointed out that the preventive measures were

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predominantly focused on prevention of mosquito bites (78.3%) rather than the eradication of mosquito population (17.3%). These findings can provide helpful guidelines for future awareness campaigns.

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CONFLICT OF INTEREST
Authors declare no conflict of interest.

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