## Overseas briefs

Source: World Health Organization (WHO)

## Influenza A(H5N1), Hong Kong

The total number of confirmed cases of influenza A(H5N1) remains at 18, of which 6 were fatal. Ten cases have recovered and two remain hospitalised. The date of onset of the last case was 28 December 1997.

The World Health Organization (WHO) team found no human case of influenza A(H5N1) virus infection in Guangdong province in southern China during its mission there from 16 to 22 January. However there is still a need to maintain intensified levels of surveillance for at least six months, because of the potential risk of adaptation of the H5N1 virus to humans.

# Rift Valley Fever, Kenya and Somalia

Rift Valley fever (RVF) is widely distributed in Kenya and Somalia, primarily in animals but also in humans. The estimated number of deaths in Kenya is now 350-400. These deaths are concentrated in Kenya's Northeastern Province and in southern Somalia, where, after a review of the data from Somalia, a revised count indicates that 80 deaths are suspected to be due to haemorrhagic fever. A task force consisting of representatives from the Kenvan ministries of health and agriculture, international organisations and non-government organisations has been established. WHO recommends that travellers do not cancel travel to Kenya. Travellers should however be aware that Rift Valley fever is transmitted by mosquitoes, and if travelling to areas near reported outbreaks should take appropriate preventive measures. These include wearing long-sleeved shirts and long trousers, and using mosquito repellant and bednets.

## Meningococcal meningitis, Democratic Republic of the Congo

Meningococcal meningitis group A has been confirmed in an outbreak in Tembo, Bandundu Region which is close to Lunda Norte Province in neighbouring Angola. Up to 25

January 114 cases, of which 32 were fatal (case fatality rate 28%), had been reported. The first case was reported on 2 January and coincided with the return of over 9,000 Congolese citizens from Angola. A team from the Ministry of Health, WHO and Médecins Sans Frontières has visited Tembo to assess the situation and plan control measures such as a vaccination campaign, training of health care staff, and public health education. Meningitis has also been reported in Kikwit and in Panzi health zones, in particular at Kingwangala and Kahemba. Eighty cases of meningitis were also hospitalised across the border in Angola.

### Cholera

Congo. Up to 5 February 1998, a total of 485 cases with 83 deaths had been reported since the outbreak began on 27 November 1997. Four areas of Pointe-Noire are currently affected, the worst being Arrondissements III and IV where water quality and sanitary conditions are extremely poor. Madingo-Kayes which is 80 kms north of Pointe-Noire on the coast, and Kaka Mueka 180 kms to the north-east in forest area, have also reported cholera outbreaks although figures are not yet available. The situation in neighbouring countries is being carefully monitored and WHO is facilitating the exchange of information with these countries.

Comoros Islands. Up to 7 February a total of 193 cases with 8 deaths had been reported on Grande Comore Island. Although the first cases were recorded in Mbéni, 77 of the 193 cases occurred in Moroni, and 12 districts and villages in and around the capital. Measures for treatment and prevention have been implemented by the cholera task force recently established by the Ministry of Health and WHO.

**Mozambique**. The outbreak which began in the port city of Beira two weeks ago has increased dramatically, and around 2,000 cases with 109 deaths had occurred up to 9 February according to reports from the national health authorities. Strict control measures are being implemented by the Ministry of Health in cooperation with other health organisations but are hampered by the very poor sanitary conditions prevailing in the city.

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