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1 OCTOBER 2017 | GENEVA - WHO is rapidly scaling up its response to an outbreak of plague that has spread to the capital and port towns, infecting more than 100 people in just a few weeks.

On Saturday, the Malagasy Government confirmed that the death of a Seychellois national was due to pneumonic plague. The basketball coach died in hospital in Antananarivo on Wednesday (September 27) while visiting the island nation for a sports event.

Health authorities are tracing people with whom he came into contact in recent days and who may have become exposed to the illness. Once identified, they will be given antibiotics to prevent infection as a precautionary measure.

The incident brings the death count to 21 since the outbreak was identified in late August; at least 114 people have been infected.

"WHO is concerned that plague could spread further because it is already present in several cities and this is the start of the epidemic season, which usually runs from September to April," said Dr. Charlotte Ndiaye, WHO Representative in Madagascar.

"Our teams are on the ground in Madagascar providing technical guidance, conducting assessments, supporting disease surveillance, and engaging with communities," she added. "We are doing everything we can to support the Government's efforts, including by coordinating health actors."

Further deployments of WHO staff and through response partners in the Global Outbreak Alert and Response Network (GOARN) are underway, as well as increased supplies of antibiotics, personal protective equipment and other supplies.

WHO scales up response to plague in Madagascar

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WHO has released US\$300,000 in emergency funds, as well as critical medical supplies, to quickly scale up operational efforts, and is appealing for US\$1.5 million to support the response.

Plague is endemic to Madagascar, where around 400 cases of – mostly bubonic – plague are reported annually. Contrary to past outbreaks, this one is affecting large urban areas, which increases the risk of transmission. The number of cases identified thus far is higher than expected for this time of year.

Bubonic plague is spread by infected rats via flea bite, pneumonic by person-to-person transmission. The current outbreak includes both forms of plague. Nearly half of the cases identified so far are of pneumonic plague.

Plague is a disease of poverty. It thrives in places with poor sanitary conditions and inadequate health services. It can kill quickly if left untreated, but can also be cured by common antibiotics if delivered early.

The last reported outbreak in December 2016 was mainly bubonic plague occurring in remote areas.

http://www.who.int/mediacentre/news/releases/2017/response-plague-madagascar/en/