

TUESDAY, 20 FEBRUARY, 2018

MINISTERIAL STATEMENT

ON THE OUTBREAK OF CHOLERA IN THE COUNTRY

The Minister of Health (Dr Chilufya)

Mr Speaker, thank you very much for granting me this opportunity to update the House and the nation at large on the fight against the outbreak of cholera in the country, and to indicate the measures that the Government has taken to stop the further spread of the outbreak, prevent deaths, treat the sick and rehabilitate them as well as mitigate against the potential catastrophic effects of this disease.

Mr Speaker, I wish to inform the House that the current cholera outbreak has affected seven of our ten provinces and these are Lusaka, Central, Eastern, Southern, Copperbelt, North-Western and the Western Provinces with a cumulative total of 4,202 cases and eighty-five deaths between 4th October, 2017 and 19th February, 2018.

Sir, from the outset, it must be emphasised that the prevention of such an outbreak and the catastrophic after-effects are not beyond the realm of our collective capability. As civic or community leaders, elected representatives, the church, the Government and non-governmental organisation (NGOs) actors as well as individual and collective agents of fortitude and behaviour transformation, we are called upon to recognise the potential hazards of our contemporary existence, living conditions and social behaviour to refuse the status quo and with solidarity and mutual respect, uphold key values such as cleanliness and responsibility.

Mr Speaker, cholera is a diarrhoeal disease caused by vibrio cholerae mainly spread through contaminated food and water. It thrives in dirty environments, particularly, where access to clean water is compromised by sustained indiscriminate waste disposal and environmental soiling. By and large, the conditions that cause the outbreak of cholera can be mitigated.

Sir, when cholera strikes an individual, symptoms will include the rapid onset of diarrhoea vomiting, abdominal pains, muscle cramps and body weakness. If untreated, the infection can result in rapid, severe dehydration and death within twenty four hours. Within a very short

TUESDAY, 20 FEBRUARY, 2018

period of time, the affected individuals would have spread the disease to their contacts, who would be family members, neighbours, fellow employees or indeed employers, customers or fellow church congregants.

Mr Speaker, we declared a cholera outbreak on 6th October, 2017, and it has pre-dominantly affected Lusaka Province. Lusaka Province has recorded a total of 4,036 cases, which represents 96.1 per cent, and seventy-five deaths. Nationwide, the number of deaths is eighty-five.

Sir, as at 06:00 A.M on 19th February, 2018, 4,080 patients had been treated successfully and discharged. In Lusaka Province, the districts that have been worst affected are Lusaka, with 3,907 cases followed by Chongwe with forty seven cases, Chilanga has had twenty seven cases, Kafue recorded nineteen cases, Rufunsa recorded five cases and Chirundu recorded one case. The Central Province has recorded a total of ninety one cases and three deaths in eight districts. Shibuyunji District recorded thirty cases, Mumbwa recorded twenty fours cases, Kabwe also recorded twenty four cases while Chobombo recorded sixteen cases. Serenje recorded fifteen cases, Mkushi recorded four cases, Chisamba recorded four cases, Kapiri Mposhi recorded three cases and Itezh-Tezhi recorded one case.

Sir, a total of thirty cases and two deaths have been recorded in five districts of the Eastern Province. These are as follows:

<i>District</i>	<i>No. of Cases Recorded</i>
Lundazi	20
Petauke	4
Katete	3
Sinda	2
Chipata	1

TUESDAY, 20 FEBRUARY, 2018

Sir, in the Southern Province, seven districts have been affected with a total of twenty six cases. However, there have been no deaths. The districts affected are as follows:

<i>District</i>	<i>No. of Cases Recorded</i>
Chikankata	11
Mazabuka	6
Kalomo	4
Sinazongwe	2
Siavonga	2
Livingstone	1
Pemba	1

Mr Speaker, on the Copperbelt, two districts were affected with the outbreak resulting in a total number of thirteen cases and one death. Ndola had seven cases while Kitwe recorded six cases.

Sir, in the North-Western province, two cases were recorded. However, there was no mortality. The districts affected were Mwinilunga one and Solwezi one. The Western Province recorded only one case.

Mr Speaker, like I said earlier on, we had eighty-five deaths. Seventy-five deaths were within the capital city whilst we encountered one each in Chongwe, Shibuyunji, Kafue, Mumbwa, Kabwe, Kapiri-Mposhi, Lundazi, Petauke and Ndola.