



GOVERNMENT OF KARNATAKA

No: HFW 264 ACS 2021

Karnataka Government Secretariat
Vikasa Soudha
Bengaluru, Dated 07.09.2021

ADVISORY

Subject: Nipha Virus (NiV) infection –Preparedness, Strengthening
the surveillance, Prevention and Control : Regarding

Human Nipah Virus (NiV) infection is an emerging zoonotic disease. In India, during 2001 and 2007 two outbreaks in human were reported from West Bengal and neighboring Bangladesh. Further, confirmed cases and deaths were also reported from Kerala during the outbreak in 2018. Large fruit bats of *Pteropus* genus are the natural reservoir of NiV. Nipah cases tend to occur in a cluster or as an outbreak. In general, the case–fatality rate is estimated at 40–75%; However, this rate can vary by outbreak and can be upto 100%.

Therefore, in view of confirmed cases of Nipha virus (NiV) infection being reported recently in the neighboring State of Kerala, it is imperative to strengthen the surveillance and preparedness in the larger interest of Public Health in Karnataka also, with special focus in the districts bordering Kerala, i.e, **Dakshina Kannada, Udupi, Mysore, Kodagu and Chamarajanagara.**

The following instructions should be implemented by district administration to ensure the well being of the community.

1. The arrivals from Kerala should be monitored for symptoms like Fever, Altered mental status, severe weakness, Headache, Respiratory distress, Cough, Vomiting, Muscle pain, Convulsion, Diarrhea.
2. Necessary Public Awareness should be spread among Public in this regard.
3. A systematic surveillance system is a necessary method to identify clusters of encephalitis cases resulting early detection of Nipah outbreaks.

4. Suitable samples to be collected with all necessary precautions from Suspected, Probable and contacts and sent to NIV, Pune for Laboratory confirmation.
5. As there is no known treatment or vaccine available , Ribavirin,an antiviral may have a role in reducing mortality among patients with encephalitis caused by Nipah virus disease. Intensive supportive care with treatment of symptoms is the main approach for managing the infection in people. The District Authorities are instructed to send the daily reports if NIL also in the attached format, to the Commissioner, Health and Family Welfare Services, Arogya Soudha, Bengaluru.

The detailed interim guidelines issued by Govt. of India, are attached as Annexure. It is therefore, reiterated that the District Authorities shall take all the necessary measures as instructed above and as per local situation .


(Jawaid Akhtar)

Additional Chief Secretary to Govt.,
Department of Health and Family Welfare

To:

1. The Special Commissioner – Health, BBMP, Bengaluru
2. The Deputy Commissioners of all districts
3. CEO, ZP of all districts
4. The District Health and Family Welfare officers of all districts
5. The District Surveillance Officers of all districts

Copy for kind information to:

1. Chief Secretary, GoK
2. Additional Chief Secretary to Hon'ble Chief Minister
3. Additional Chief Secretary, Home Department
4. The Chief Commissioner – BBMP, Bengaluru
5. The Commissioner, Health & F W Services, Bengaluru
6. Mission Director-National Health Mission
7. The Director, Health & Family Welfare Services
8. PS to Hon'ble Minister for HFW and Medical Education.