



Cholera

Last update: 2024-05-22

Key facts

Transmission

- Cholera is transmitted by ingestion of water or food contaminated with faeces/poop.
- Water or food can be contaminated by people or animals through faeces directly or indirectly by unwashed hands or food washed/prepared with contaminated water.
- Cholera can also be transmitted through contact with body fluids of a person contaminated with cholera.

Most vulnerable to severe symptoms

- Children under five years old
- Malnourished people, especially children
- Pregnant women
- People who do not have easy access to rehydration therapy and health services
- People with weakened immune system

Most vulnerable to contracting the disease

- People living in areas that have poor water, sanitation and hygiene facilities and services
- People on the move with poor access to water, sanitation and hygiene facilities and services

Symptoms

(** People show symptoms with different levels of severity. Some people become very sick. Most people develop mild symptoms, while serious cases develop acute watery diarrhoea with severe dehydration. Some people do not show any symptoms, but they can still transmit the disease. This is why prevention and control are so important. **)

- Watery/rice water diarrhoea
- Vomiting (sometimes)
- Abdominal cramps (sometimes)
- Dehydration (often happens quickly)
- Confusion, seizures, unconsciousness (sometimes)

What can you do to prevent and control an epidemic?

Monitoring the community and identifying sick people

- Identify possible source or point of contamination
- Identify possible cases in the community based on the community case definition

Treatment and management

- People with acute watery diarrhoea need to be referred to a health facility:
 - Children younger than six months of age regardless of their dehydration status
 - Children younger than five years of age and pregnant woman with some (mild) signs of dehydration and all people with severe dehydration
- Refer pregnant women, children and adults exhibiting signs of malnutrition to cholera treatment centres
- Manage cases with no or mild dehydration and no malnutrition in the community by providing oral rehydration (ORS)
- Manage mild cases in the community by providing zinc supplementation (only children below the age of five years should receive zinc)
- Support safe and dignified funeral and burial practices
- Provide psychosocial support to the sick person and their family members

Sanitation and waste management

- Promote use of appropriate sanitation and waste facilities (toilets / latrines)
- No open defecation

Hand hygiene

- Promote good hand hygiene (handwashing with soap)

- BEFORE: preparing food, eating, feeding a child, caring for people with cholera
- AFTER: using the toilet or cleaning a baby; touching faeces

Water hygiene and safety

- Collect water from a known safe source (where quality is being monitored on a frequent basis). Even if it looks clear, water can contain the bacteria causing cholera.
- Boil water for at least one minute or add drops or tablets of chlorine to it before drinking or using it to wash vegetables or food preparation items.
- Keep drinking water in a clean, covered pot or bucket or other container with a small opening and a cover. It should be used within 24 hours of collection.
- Pour the water from the container; do not dip a cup into the container. If dipping into the water container cannot be avoided, use a cup or other utensil with a handle to scoop the water.

Food hygiene and safety

- Cover and store food safely (protected from insect/animal contamination)
- Use clean utensils and storage containers
- Cook raw food thoroughly
- Eat cooked food immediately, while it is still warm
- Reheat cooked food thoroughly before eating
- Avoid contact between raw food and cooked food
- Wash vegetables thoroughly with soap and safe water before eating
- Eat fruit and vegetables you have peeled yourself
- Wash your cutting board especially well with soap and safe water
- Wash your utensils and dishes with soap and safe water
- Encourage exclusive breastfeeding for the first six months of life, and complementary breastfeeding until the age of two years (especially when a child is sick)

Safe burials

- Find out the specific advice being given by health and other relevant authorities concerning safe and dignified funeral and burial practices
- Follow your supervisor's guidance concerning safe and dignified funeral and burial practices, including personal protective measures

Social mobilization and health promotion

- Try to gain an understanding about if and why health practice advice is not being followed
- With the advice of your supervisor and health authorities, work with communities to overcome barriers to

following health advice and recommended practices

Immunization

- Support mass vaccination campaign

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
 - How many people have fallen sick with cholera? Where?
 - How many people have died? Where? When?
 - Who and where are the vulnerable people?
 - Where are the local health facilities and services? (include traditional healers)
 - Where do people obtain their drinking water?
- Record the following information on the back of the map:
 - When did people start to fall sick with cholera?
 - How many people live in the affected community? How many are children under five years?
 - Are children in the community generally well-nourished?
 - Do people always have enough food?
 - Is breastfeeding common?
 - Is the water source safe?
 - Do people know how to treat water?
 - How do they do it?
 - What sanitation facilities are available? put communal toilets/latrines on map)
 - Do people use them?
 - What handwashing facilities are available? (put communal handwashing stations on map)
 - Do they have soap? What are the community's habits, practices and beliefs about caring for and feeding sick people? Consider any differences in roles and responsibilities between men and women.
 - When babies and infants are sick, do women continue to breastfeed them?
 - Is a social mobilization or health promotion programme in place?
 - What are the roles, responsibilities, specific needs, and priorities of women and girls, men and boys, and people with disabilities in handling, storing and treating water? Make sure you think about cultural and social traditions and perceptions, household decision-making, livelihoods such as agriculture and livestock raising etc.
 - What are the barriers people face in accessing water points and sanitation and hygiene facilities, of all gender identities, ages, disabilities and backgrounds?
 - Which sources do people use/trust the most for information?
 - Are there rumours or misinformation about cholera? What are the rumours?
 - Can people identify the signs and symptoms of dehydration?

- Do people know how to make oral rehydration solution (ORS)?
 - Do they have resources at hand to make it?