



**Republic of Namibia**

**Ministerial Statement**

**To Parliament**

**On Viral Illness - Nujoma Senior Secondary and Oshikuku  
Junior Secondary Schools**

**By**

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Minister of Health and Social Services**

**27 October 2010**

**Windhoek**

Hon. Speaker,

Hon. Members,

Of lately, swine flu had been making headlines. Thus, I rise to give an update regarding the recent viral illness outbreak in the Omusati and Khomas regions. The Ministry of Health and Social Services has been monitoring the situation very closely. The surveillance team of the Ministry with the technical support of the WHO had been on the ground for both Oshikuku and Windhoek viral illness outbreaks. These outbreaks were investigated in line with WHO and that of the National H1N1 Preparedness and Response Guidelines which were published during May 2009.

As of this morning, 10h00, the Ministry can confirm the following:

A total of 970 learners from both Oshikuku and Windhoek had been seen having symptoms of flu-like illness. Swabs were carried out in line with the guidelines and specimens were sent to the WHO South African accredited laboratory and to Namibia Institute of Pathology. Of this figure, 31 samples were taken randomly and 29 were found positive of H1N1 with 2 negative. In this regard, we can conclude that all those who had the symptoms similar to H1N1 are assumed to be H1N1 positive. There have been no severe complications and no case fatality.

The confirmed cases are concentrated in a few isolated schools and hostels in Oshikuku district in Omusati region and Windhoek in Khomas region.

All learners were isolated and have responded very well to treatment and are recovering.

The Ministry has during the past days undertaken the following actions:

1. Rapid reponse teams continue to conduct outbreak investigation visits to affected schools.
2. Learners were isolated within hostels or sent home as a precautionary measure to prevent further spread of the virus
3. A small number of learners with severe illness were treated at their local hospitals.

Hon. Speaker,

Hon. Members,

You will recall that the Ministry conducted a mass Influenza A H1N1 2009 vaccination campaign in June and July 2010. This campaign on advice of WHO targeted selected groups, i.e. children aged six months to one year old; pregnant women; and health workers.

**O**n 12 August 2010, I informed the nation about the WHO Director General's announcement of the end of the Influenza A H1N1 2009 pandemic. At the same time, I pointed out that the virus will still continue to circulate as a seasonal flu virus for many years to come. WHO's original alert was related to the fact that there is and remains the possibility that Influenza A H1N1 2009 may mutate or change into a more virulent virus causing more severe disease and more deaths may occur. However, at this stage the virus which had been isolated is of the same strain as the Influenza A H1N1 2009 virus. Therefore, there is no reason for any alarm. In fact the illness caused by H1N1 2009 is very comparable to our annual seasonal flu and has no higher fatality at all.

**I**n order to respond to the current situation our main focus is on surveillance. The health authorities therefore will continue to be vigilant and are doing the following:

1. **D**istrict response teams will continue to conduct outbreak investigation visits to affected schools and communities;
2. **T**he Ministry is liaising with the Ministry of Education to provide information on prevention and referral information to health facilities for learners showing signs and symptoms of the viral illness;
3. **F**urther, the Ministry will provide messages to the media for the public regarding signs and symptoms, prevention and treatment information.

The information will include the following:

1. There will be no mass vaccination.
2. Mild cases should receive supportive treatment like any seasonal flu;
3. Special attention is required in severe cases (temperature above 38°C, prolonged illness, severe cough) and for high risk groups, such as pregnant women, people with chronic illnesses; children under the age of 5 years. These cases may be treated with Tamiflu.

Hon. Speaker

Once again, I would like to emphasize the importance of prevention measures including proper handwashing, coughing etiquette, room ventilation and staying at home when symptoms of H1N1 are experienced.

The Ministry will continue to keep you updated regarding key developments.

Thank you

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