

## Actualités du Pharo 2022 – Session 3

### Organisation of care during the urban pneumonic plague epidemic in Madagascar: the case of Joseph Raseta Befelatanana University Hospital

Keywords: epidemic, plague, care, prevention, Madagascar

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Madagascar is a plague-endemic country, but in 2017, for the first time, an outbreak of pneumonic plague occurred in urban areas in the country's two largest cities.

The CHU Joseph Raseta Befelatanana in the capital is a large national referral hospital for medical specialties. It was the epicentre of plague case management during the epidemic. In addition, it was also responsible for the management of other non-plague patients. To ensure patient care and safety, the patient flow was reorganised within the hospital. This included a pre-triage, two triages and separate inpatient areas (suspected and confirmed plague, non-case)

All patients went through the pre-triage, all suspected and confirmed plague cases who met the case definition followed the predetermined circuit. Non-cases followed the usual route. All health care staff were trained in the diagnosis and treatment of plague and in infection prevention and control measures with a strong focus on pneumonic plague.

In the plague treatment and isolation areas, care was provided by trained teams wearing appropriate personal protective equipment. These teams were mainly composed of the hospital's own health workers, who all participated in the care according to established shifts. Children were cared for by the paediatric teams. Specialist advice (infectiologist or pneumologist) was always available. Obtaining rapid confirmation of the diagnosis was crucial for the acceptance of care by the patients and for the management of cases of death without conflict with the families.

The management of uninfected patients continued as normal on all wards.

Visits were prohibited in all areas of the hospital to avoid possible contamination of non-plague patients by visitors. Continuous adaptation and improvement of the organization in place was necessary. The logistical aspect was also important: rapid expansion of care areas, management of personal protective equipment and chemoprophylaxis.