



Public health & hospital administration specialist. Government servant. Presently working as an Assistant Professor at National Institute of Preventive & Social Medicine (NIPSOM), Dhaka with additional charge as the Project Director of Expansion & Modernization of Dhaka Medical College Hospital. Immediate past posting was at Prime Minister's Office (PMO) as a Director; the responsibility there was bureaucratic coordination between PMO & Ministry of Health & Family Welfare, Ministry of Social Welfare & NGO Affairs Bureau.

Participated as a member of Bangladesh delegation in World Health Assemblies in Geneva (2009 & 2010), RC Meetings of SEARO in Thailand (2010) & Nepal (2009), United Nations General Assembly (2011), UN High Level Meeting on HIV/AIDS in USA (2011), International Family Planning Summit in UK (2012) & other summits. Also took part in several international conferences like Prince Mahidol Award Conference (2011) in Thailand, Flagship course on Universal Health Coverage (UHC) (2012) by World Bank Institute in France etc.

Scientific research papers published in several national & international journals. Assistant Managing Editor of the journal of Bangladesh Medical Research Council (BMRC) at present. Also served as Assistant Managing Editor of Bangladesh Medical Association Journal (BMJ). Fond of literature & cultural activities. Author of a number of books in literature titled 'Encyclopedia of Martyred Doctors of Liberation War of Bangladesh', 'Language Movement to Liberation War' etc. Composed several theme songs to build mass awareness on public health issues like immunization, malaria, HIV/AIDS, safe motherhood, child injury, breast feeding, autism etc. Won the prize of Best Orator in National Television Debate Competition (1989-90).

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Performs as a part time newscaster of national television channel BTV. Elected as the Vice President (1991-92) & Literary Secretary (1989-90 & 1990-91) of Mymensingh Medical College Students Union. Completed medical graduation from Mymensingh Medical College of Dhaka University. Qualified for Japanese Development Scholarship (JDS) of JICA & thereby achieved Masters degree in Medical Administration from Nagoya University, Japan.

ONE HEALTH APPROACH

to curb anthrax in Bangladesh

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KEY MESSAGE: *This study aimed to identify the gaps in responding to anthrax in Bangladesh. Ineffective institutionalization of one health approach was a barrier to curb the epidemic. The microplanning of EPI can be utilized to reform the animal vaccination strategy.*

INTRODUCTION

From August 2009, 21 outbreaks of human and animal anthrax reported from different districts were investigated from the national level. This study aimed to identify the gaps in responding to anthrax in Bangladesh.

risk, poverty, and social norms propagated these outbreaks. Poor vaccine production, acute shortage of animal vaccinators, and faulty vaccination planning grossly deficient to annually vaccinate 47 million susceptible animals, and immature institutionalization of one health approach were barriers to curb the epidemic.

METHODS

The results from the analysis of outbreak investigation reports and key informant interviews were triangulated to identify the strengths and challenges for anthrax prevention.

RESULTS

Multi-disciplinary teams from IEDCR, DLS, and icddr,b including epidemiologists, physicians, veterinarians, and anthropologists investigated these outbreaks. They identified *Bacillus anthracis* from human and animal samples and linked slaughtering/handling raw meat or meat products of sick animals with the disease. Lack of community awareness about transmission

CONCLUSION

Multi-sectoral outbreak investigations helped to understand the interrelated chains of the processes that led to anthrax outbreaks in Bangladesh. Effective institutionalization of the joint human, animal and environmental health concept could further strengthen the response by utilizing the combined synergy of relevant sectors. The experience of the Expanded Program on Immunization (EPI), its micro-planning, workforce and communication infrastructures can be utilized to improve animal vaccination coverage under the stewardship of DLS. Given the limited practical examples to operationalize one health worldwide, multi-sectoral outbreak investigation can be considered as a useful initial model.

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