

Staphylococcus aureus food poisoning outbreak among primary religious school students in Bangi 2017

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ABSTRACT

Introduction: A food-borne disease outbreaks was reported among Integrated Primary Religious School students in Bangi on the 2nd May 2017. The students presented mainly with abdominal cramp, diarrhoea, vomiting and nausea. All the affected students (cases and contacts) had their meals from the school canteen. **Objectives:** The objectives of this study are to determine the source of infection, mode of transmission and the causative agent. **Methods:** A case control study was conducted. Food handlers and 116 affected school children were interviewed based on standard questionnaire. The kitchen for food preparation was inspected. Risks of food contamination from the food eaten were determined using attack rates. **Results:** A total of 116 respondents were interviewed in this study. Result showed that the incubation period range from two and half hours to twelve hours and the majority of the symptoms were mix of upper gastrointestinal tract and lower gastrointestinal tract as reported in Staphylococcus aureus food poisoning (abdominal cramps, nausea, diarrhoea and vomiting). The hygiene status of the food premise was acceptable (hygiene score at 82.8%). From the clinical presentation, cases history, epidemic curve and statistical analysis, the suspected food was beef curry (odd ratio=2.3; CI=1.09-4.9). The laboratory result on isolation of Staphylococcus aureus and Coliform from hand swab of food handlers indicates unsatisfactory hygiene practice of food handlers that had contributed to the outbreak. **Conclusion:** The suspected food in this outbreak is beef curry. The contributing factors was the unhealthy and unhygienic practice of the food handlers and operators. Basic principles of safe food handling should be emphasized.

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Sukh Initiative's strategic choices - Vertical Scale up of best practices

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ABSTRACT

Introduction: Vertical scaling up refers to the policy, political, legal, regulatory, budgetary or other health system changes needed for institutionalizing the innovation at national or sub-national level. Sukh Initiative vertically scaled four best practices by incorporating in the Population Welfare Department (PWD) Sindh Costed Implementation Plan (CIP). Sukh Initiative, a funded project aims to improve mCPR by 15% in 1 million population of Karachi, Pakistan. It increases Family Planning and Reproductive Health demand, improves services quality; reaching to MWRA, men and youth. Life Skill Based Education (LSBE) for youth aged 12 to 16 in selected schools of Sukh catchment area. **Method:** A MoU for collaboration was signed, allowing Sukh to improve the quality of services and rebranding FWCs. A resource team of sustainability and scalability advocates, technically guided by EXPANDNET- USA, strived on scaling up Sukh interventions. Family Health Days were conducted at FWCs to encourage family turnover and providing opportunity to women for uptake of FP services. **Results:** Involving PWD from Sukh inception ensured interest of the department and through displaying Sukh's proof of concept and implementation, PWD incorporated the practices in the CIP for scale up. **Discussion:** PWD provides community based services through its Family Welfare Centres (FWC). Sukh baseline revealed 4% FP clients use FWCs that are stigmatized of exclusive FP service outlets. Focused advocacy efforts result in best practices being vertically scaled up to benefit more people on a lasting basis beyond a project's life. PWD incorporated Sukh practices in the CIP, i) permission for mid-level providers for Implant insertions ii) 1st dose of injectable contraceptives by Lady Health Workers iii) Conducting Family Health Days at PWD facilities and iv) LSBE in the curriculum for nurses.

KEY WORDS:

Sustainability, Scale up, Resource Team