

Current major event

Mass Psychogenic illness in Afghanistan

On 23/5/2012 the DEWS officer of Takhar province in Afghanistan was alerted to a massive poisoning incidence in a girls' school in Taluqan district. A DEWS team visited the school and the hospital where the cases were admitted. A total of 103 cases, all school girl from Bibi Hajerah High School were admitted with symptom of weakness, nausea, dizziness and syncope. Some reported smelling a stench odour. Clinical assessment by the attending physicians and similar past history ruled out an organic cause. The cases were considered as a mass psychogenic illness given treatment and discharged home.

Editorial note

This is the fourth year where episodes of suspected mass poisoning of school girls is reported from Afghanistan. Like in the previous years the events are triggered off with one girl developing symptoms of headache, weakness, dizziness, nausea and fainting. Often these outbreaks were believed to be the work of political elements in the country who oppose girls education. Reports of stench smells preceding the appearance of symptoms have given credit to the theory of mass poisoning (chemical/bioterrorism). However, investigations into the causes of these outbreaks have yielded no such evidence so far. In the last four years over 1634 cases from 22 schools have been treated for Mass Psychogenic Illness (MPI) in Afghanistan. There are no related deaths reported.

These outbreaks tend to follow a seasonal pattern. According to the Afghan authorities, the events start around April/May and close to the examination period. Doctors treating these cases believe that this is a Mass Psychogenic Illness (MPI), a form of Mass Hysteria. However, these coincidences should be interpreted with caution, in that genuine complaints may be missed out and the consequences may be catastrophic.



Year	Episodes	Cases	Deaths
2009	5	297	0
2010	8	370	0
2011	5	119	0
2012	6	848	0

According to psychologists, mass psychogenic illness (MPI), also known as mass sociogenic illness is a rapid spread of signs and symptoms of illness affecting a close group. It originates from a nervous system disturbance involving excitation, loss or alteration of function. The physical complaints that are exhibited unconsciously and have no corresponding organic cause. MPI is distinct from other collective delusions that are also included under the term Mass Hysteria, in that MPI causes symptoms of disease without any organic cause. Females (girls in particular) are most affected. The diagnosis of mass hysteria is still contentious.

MPI is poorly understood and presents special difficulties to clinicians and researchers. Since this is a recurrent problem in Afghanistan, the MOPH needs to focus attention on MPI. Better preparedness and a systematic approach to data collection for making informed decision is needed. Psychological and sociological services including psycho-education of students, counseling of effected persons and training of school teachers should be provided.

Update on outbreaks

in the Eastern Mediterranean Region

MPI in Afghanistan; CCHF in Pakistan and Iran; Measles in Afghanistan, Yemen and Somalia; Chikungunya/Dengue in Yemen

Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza

China	[42(28), 66.7%]
Egypt	[167 (60), 35.9%]
Indonesia	[189 (157), 83 %]
Viet Nam	[123(61), 49.5%]
Cambodia	[21(19), 90.4%]
Bangladesh	[6(0), 0%]
Global total	[604(357), 59.1%]

Measles

Afghanistan	[261 (0), 0%]#
Somalia	[1046 (na), na%)]#
Yemen	[3800(124), 3.3%] #

Mass Psychogenic Illness (MPI)

Afghanistan	[1634(0), 0%]#
-------------	----------------

Chikungunya/Dengue

Yemen	[112(2), 1.2%]
-------	----------------

Crimean Congo Hemorrhagic Fever

Pakistan	[11(3), 27.3%]
----------	----------------

CFR=Case-Fatality Rate;
Suspected cases only
MPI Mass Psychogenic illness