## Medical Analysis of the Human Loss in Gorkha Earthquake

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## ネパールと日本の被災地の方々に心からお見舞い申し上げます We are with the people affected by the Nepal (Gorkha) Earthquake and all affected areas in Japan



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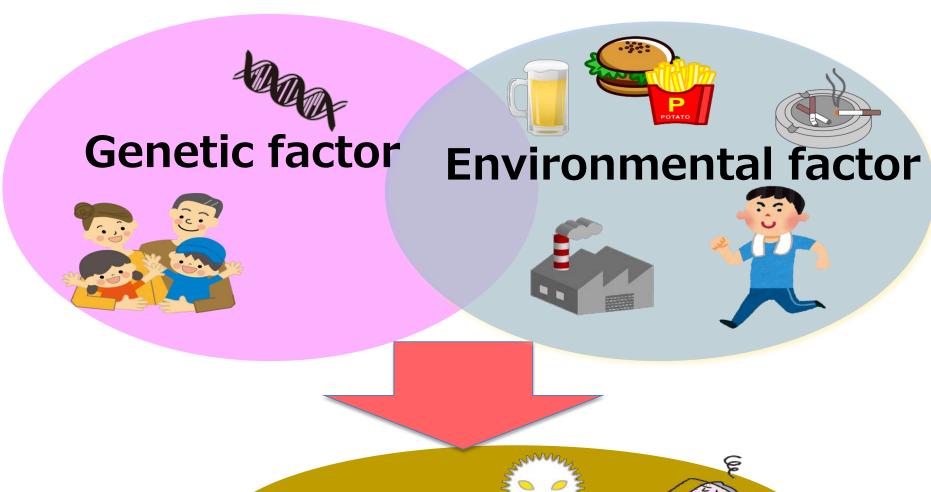
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# Concept Disaster Risk Reduction

#### Similarity of disease and disaster



**Disease** 

Courtesy of Prof. Masayuki Yamamoto Tohoku Medical Megabank Organization

> 大学科学国際研究所 「National Research Institute of Disaster Science





## Similarity of disease and disaster







# Vulnerability & Capacity

















# Disaster

- Life, Health
- Properties
- Family
- Community









### **Disaster Risk Reduction**

- Know your risk
- Reduce your risk
- Prepared to act

To reduce the disaster risk,

Hazard xu Verhier ability

Risk

Capacities







### Gorkha Earthquake

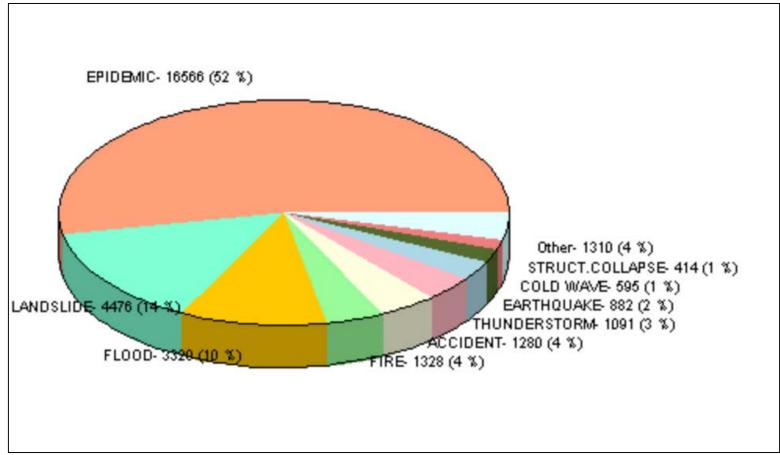
# Health Indicators and Preparedness in Nepal

### Cause of death in disaster









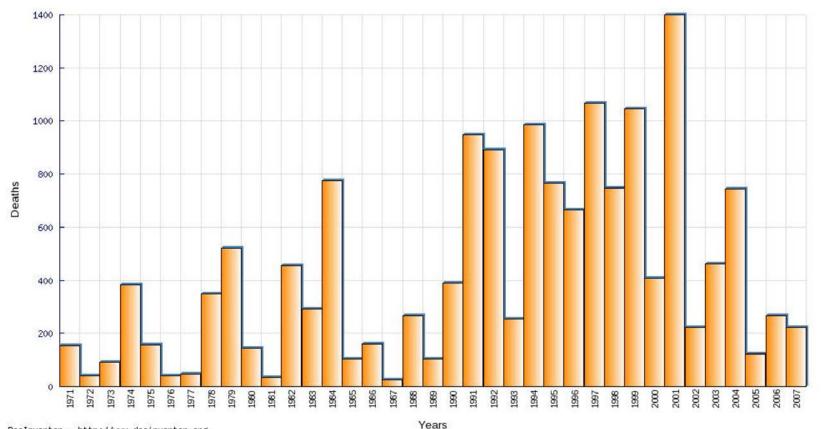


# Trend of death by epidemics









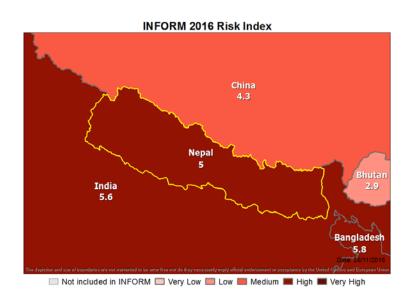
DesInventar - http://www.desinventar.org

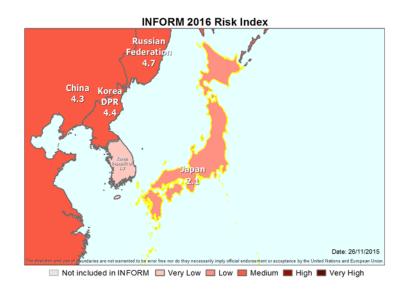






## INFORM risk and resilience assessment





#### Southern Asia Low income

	Value	Rank	Trend
INFORM	5.1	31	I
Hazard	4.2	48	ı
Vulnerability	5.1	50	1
Coping Capacity	6.1	53	-

Eastern Asia High income

	Value	Rank	Trend
INFORM	2	154	1
Hazard	6.2	26	1
Vulnerability	0.8	187	1
Coping Capacity	1.6	182	1







#### **INFORM** model

Risk	INFORM						
Dimensions	Hazard & Exposure		Vulnerability		Lack of Coping Capacity		
Categories	Natural	Human	Socio- Economic	Vulnerable Groups	Institutional	Infrastructure	
Components	Earthquake Tsunami Flood Tropical cyclone Drought	Current Conflict Intensity Projected Conflict Intensity	Development & Deprivation (50%) Inequality (25%) Aid Dependency (25%)	Uprooted People Other Vulnerable Groups	DRR Governance Communication	Physical Infrastructure Access to Health System	

Health promotion reduces

De Goreve T, Poliansek K, Vernacchini L. JRC Scientific and Policy Reports: Index for Risk Management - INFORM Concept and Methodology Version 2016 ISBN 978-92-79-52741-8







Deteriorates health

# Primary Health Care (PHC)

# Declaration of Alma-Ata 1978 International Conference on Primary Health Care

Health, which is a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity, is a fundamental human right.

The attainment of the highest possible level of health is a most important worldwide social goal whose realization requires the action of many other social and economic sectors in addition to the health sector.

http://www.who.int/publications/almaata\_declaration\_en.pdf



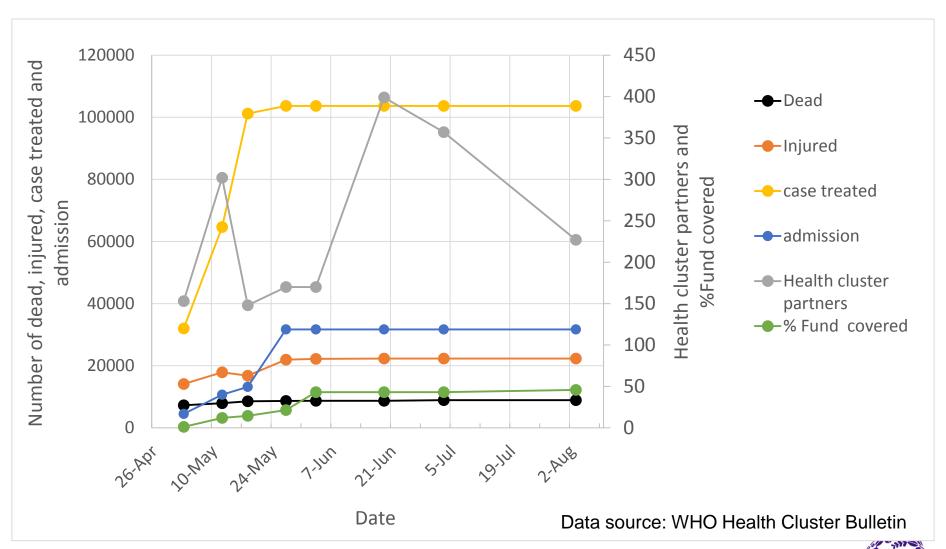




Gorkha Earthquake

# Medical and public health perspective of health damage

# Human damage in Nepal





#### Good practices and gaps

# 1. Dignity, autonomy and resilience of people in Nepal

- Constitution: 2015/9/20
- Relief aid through Nepali Government
- Recovery and reconstruction by people in Nepal

# 2. Preparedness and response in health sector was successful

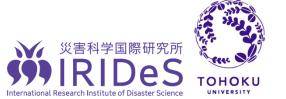
- HOPE program by Tribhuvan University
- Coordination of Emergency Medical Team by Ministry of Health and Population
- Prevention of infectious disease by hospitals and local governments
- Rapid establishment of sub-clusters
  - Trauma
  - · Care for mothers and Children
  - Rehabilitation
- Mental health care for affected people and relief providers

#### 3. Basic health level should be improved

- The biggest cause of death by disaster is Epidemics
- Prevalence of Water sanitation is still low
- Daily power outage
- Rapid urbanization in Kathmandu
- Health insurance coverage

# Safe hospitals and schools should be increased

- Seismic strengthening in big hospitals are improved
- Insufficient stockpile of emergency water and foods
- Discrepancy between Kathmandu and remote area



#### **HOPE:** Hospital Preparedness for Emergencies

- Overview of Disasters
- Disaster Risk Management
- Disaster Epidemiology and Patterns of Injury
- Hazards
- Structural Components
- Non Structural Components
- Functional Collapse of Hospitals
- Pre- Hospital Care
- TRIAGE
- Emergency Department
- Principles of Disaster Medicine
- Hospital Emergency Incident Command System (HEICS)
- Hospital Preparedness Planning
- Techno-Industrial Disasters

- Complex Emergencies
- Mass Casualty Incident
- Mass Gathering Event
- On-Site Medical Care
- Psychosocial Consequences of Disaster
- Inter-agency Coordination
- Hospital Internal Disaster
- Mass Fatality Management
- Disaster Risk Communications
- Resource Management
- Epidemics and Emerging Infections
- Return to Normal Health Operations



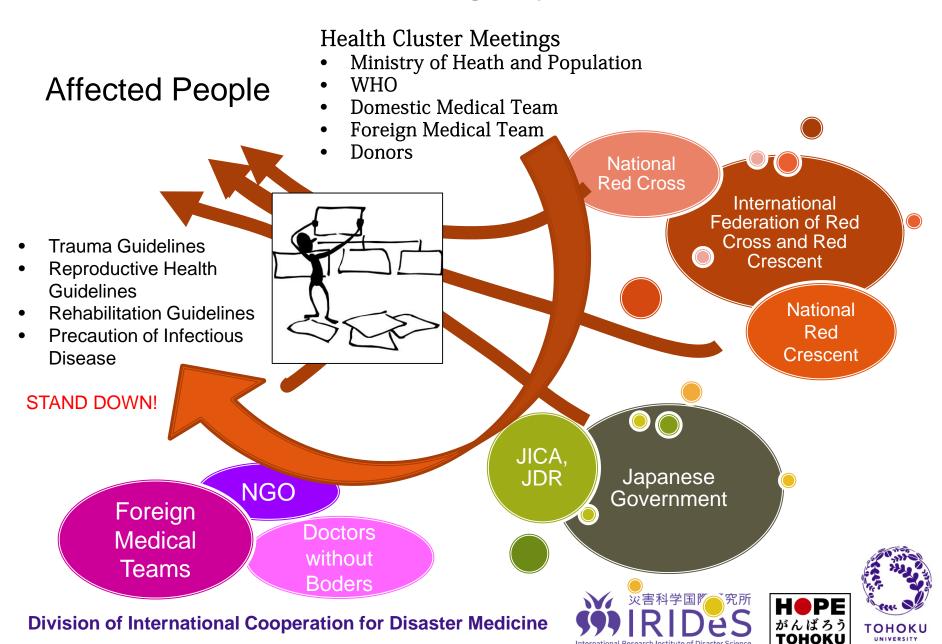
Program for Enhancement of Emergency Response (PEER)



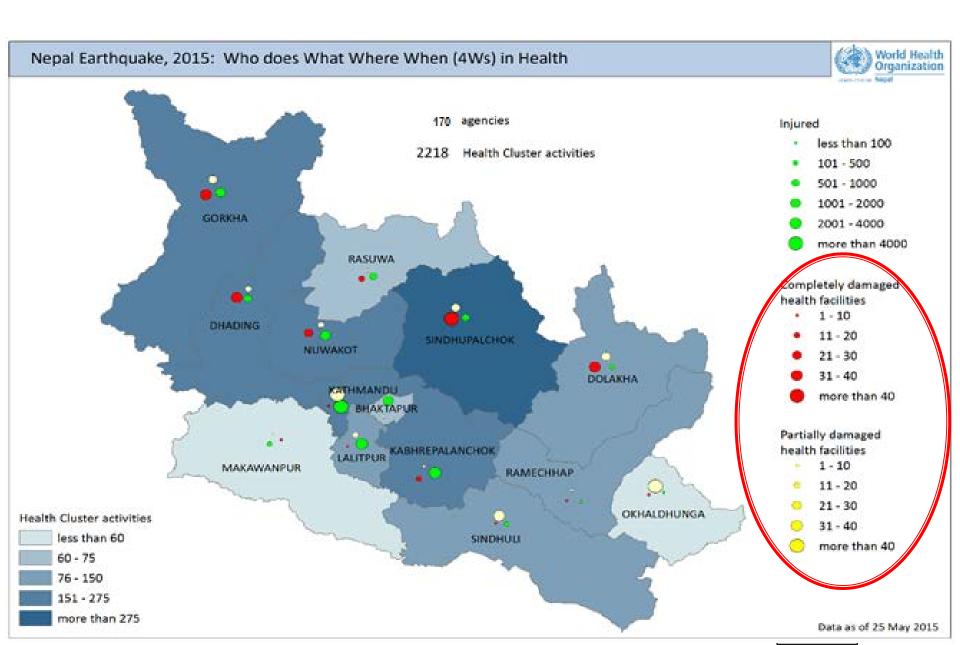




## Coordination of Emergency Medical Teams



### Result of coordination



# Socio-economic impact of injuries

- More than 20,000 injuries were treated according to the Trauma Guidelines.
  - No un-necessary amputation was performed
  - Children, youth (Age 6-18) and older citizens over 60 of years attributed one in six of trauma patients.
  - 60% Bone fracture
  - 13% Spinal cord injuries
  - 11% Head injuries



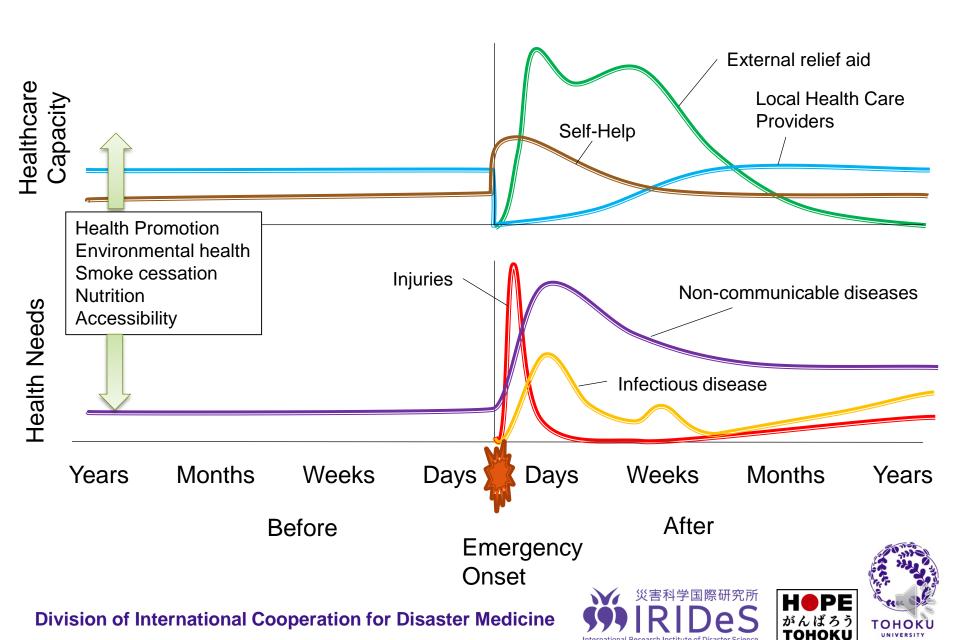
 Additional facilities and long-term care (step-down) are needed for rehabilitation and psychosocial support



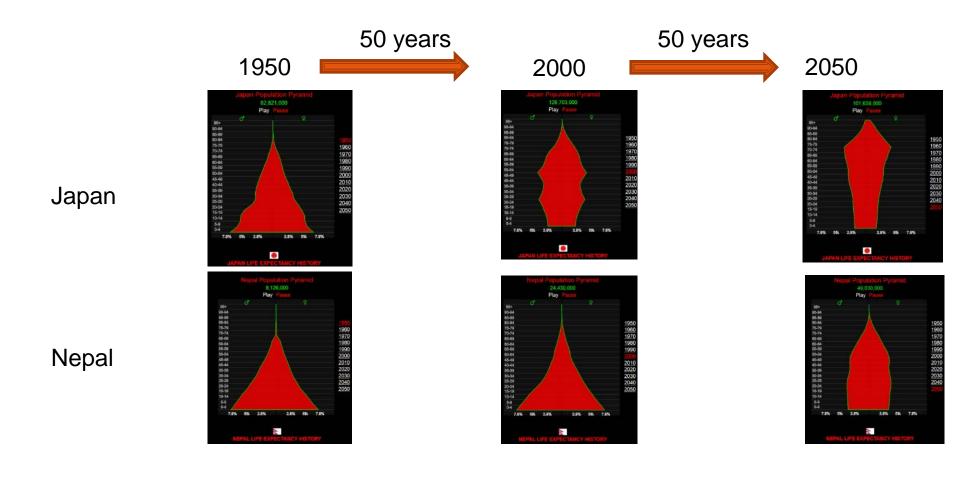




# Medical and public health needs and capacity



# Age distribution in Japan and Nepal











#### Change the concept of Risk Reduction

#### Needs

#### Top 3 priorities for communities (UN Survey)

- A good education
- Better healthcare

Community

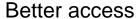
An honest and responsive government

#### Paradigm Shift



Climate Change Rapid urbanization Poverty Lack of resource Loss of biodiversity

#### Change of Risk



Resilient

Safe Hospital

Safe School

Mental and **Physical** 

Communication

**Effective** Response

Quality of Life

Development



Hazard-proof Structure

Early Warning







# International Workshop on Education of Disaster Medicine and Public Health Feb 9, 2016



