Bhutan’s Response to COVID-19 Pandemic

WHO information sharing session
30 April 2020
“We must exhibit the strength that comes out of our smallness, remain united and support one another. During such exceptional circumstances, the government will take the responsibility of alleviating any suffering to the people due to the virus.”
1st case: 5th March (Tourist – US)
2nd case: 19th March (Tourist – US)
3rd Case: 25th March (Bhutanese – UK)
4th Case: 28th March (Bhutanese – UK)
5th case: 1st April (Bhutanese – US)
6th Case: 20 April (Bhutanese-Middle East)
7th case: 22 April (Bhutanese-Middle East)
<table>
<thead>
<tr>
<th>Stage</th>
<th>COVID-19 status</th>
<th>Objective</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>• No confirmed case in Bhutan • COVID-19 outbreak is limited to few countries (subject to risk assessment)</td>
<td>• To prevent importation of COVID cases</td>
<td>• Active screening at POEs</td>
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<tr>
<td>Yellow</td>
<td>• No confirmed case in Bhutan • COVID-19 is reported in the multiple countries (subject to risk assessment)</td>
<td>• To prevent importation of COVID cases</td>
<td>• Active screening at POEs</td>
</tr>
<tr>
<td>Orange</td>
<td>• One or more isolated confirmed cases in Bhutan • without secondary transmission.</td>
<td>• Early detection, early containment, early treatment of COVID</td>
<td>• Partial Lockdown and quarantine of suspected cases</td>
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<tr>
<td>Red</td>
<td>• Multiple cases with local transmission</td>
<td>• Early case management and reduce fatality</td>
<td>• National Lockdown - Declare State of Emergency and scale up emergency response mechanism</td>
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</tbody>
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Key features of Bhutan’s response

- Under the leadership of His Majesty the King of Bhutan, whole of society and whole of government approach was followed to respond to this situation
- Unified and effective command system which is evidence-based
- In collaboration with the WHO country office, simulation exercise carried out at the international airport.
- National preparedness and response plan including worst-case scenario
- Medical surge plan: recruitment of retired health professionals, Mapping of health worker outside the health system and studying outside.
- Response plan focused on early detection, early reporting, early isolation and early treatment
- All Districts contingency plan aligned with the national plan
Challenges

- Limited health workforce (currently only 1 ICU physician with approximately, 109 specialists and 116 GDMOs)
- Disruption of supply of PPE, test kits and equipment including critical care equipment
- Clinical management expertise to manage critical cases with comorbid conditions
- Disruptions to regular health services which might have detrimental impact on primary health indicators (disruption of vaccine and essential drug supplies)
Way Forward

1. Humanitarian corridors for supply of equipment and drugs and human resources.
2. Strengthening regional collaboration for preparedness and responses including stockpiling of essential equipment and drugs
3. Exchange of knowledge, surveillance data and clinical experiences
4. Quality and efficacy of test kits currently flourishing in the markets.
5. Pool procurement system