

## **Country Policy and Information Note** Bangladesh: Medical treatment and healthcare

Version 2.0 July 2022

## Preface

### Purpose

This note provides country of origin information (COI) for decision makers handling cases where a person claims that to remove them from the UK would be a breach of Articles 3 and/or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition.

It is not intended to be an exhaustive survey of healthcare in Bangladesh.

For general guidance on considering cases where a person claims that to remove them from the UK would be a breach of Article 3 and/or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition, see the instruction on Human rights claims on medical grounds.

#### **Country of origin information**

The country information in this note has been carefully selected in accordance with the general principles of COI research as set out in the <u>Common EU [European Union] Guidelines for Processing Country of Origin Information (COI)</u>, dated April 2008, and the Austrian Centre for Country of Origin and Asylum Research and Documentation's (ACCORD), <u>Researching Country Origin Information – Training Manual, 2013</u>. Namely, taking into account the COI's relevance, reliability, accuracy, balance, currency, transparency and traceability.

The structure and content of the country information section follows a terms of reference which sets out the general and specific topics relevant to this note.

All information included in the note was published or made publicly available on or before the 'cut-off' date(s) in the country information section. Any event taking place or report/article published after these date(s) is not included.

All information is publicly accessible or can be made publicly available and is from generally reliable sources. Sources and the information they provide are carefully considered before inclusion. Factors relevant to the assessment of the reliability of sources and information include:

- the motivation, purpose, knowledge, and experience of the source
- how the information was obtained, including specific methodologies used
- the currency and detail of information, and
- whether the COI is consistent with and/or corroborated by other sources.

Multiple sourcing is used to ensure that the information is accurate, balanced, and corroborated, so that a comprehensive and up-to-date picture at the time of publication is provided of the issues relevant to this note.

Information is compared and contrasted, whenever possible, to provide a range of views and opinions. The inclusion of a source, however, is not an endorsement of it or any view(s) expressed.

Each piece of information is referenced in a brief footnote; full details of all sources cited and consulted in compiling the note are listed alphabetically in the bibliography.

#### Feedback

Our goal is to continuously improve our material. Therefore, if you would like to comment on this note, please email the Country Policy and Information Team.

#### Independent Advisory Group on Country Information

The <u>Independent Advisory Group on Country Information</u> (IAGCI) was set up in March 2009 by the Independent Chief Inspector of Borders and Immigration to support him in reviewing the efficiency, effectiveness and consistency of approach of COI produced by the Home Office.

The IAGCI welcomes feedback on the Home Office's COI material. It is not the function of the IAGCI to endorse any Home Office material, procedures, or policy. The IAGCI may be contacted at:

### Independent Advisory Group on Country Information

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Information about the IAGCI's work and a list of the documents which have been reviewed by the IAGCI can be found on the Independent Chief Inspector's pages of the <u>gov.uk website</u>.

#### Official – sensitive: Start of section

The information in this section has been removed as it is restricted for internal Home Office use only.

#### Official – sensitive: End of section

## Contents

Country information		
1.	Sources and prices	5
	1.1 MedCOI	5
2.	Structure of the healthcare system	5
	2.1 General information	5
	2.2 Public (State) sector	7
	2.3 Private sector	8
	2.4 NGOs (non-governmental organisations)	9
	2.5 'Informal' sector	. 10
	2.6 COVID-19	. 11
	2.7 Pharmaceuticals	. 12
3.	Cost and access to medical treatment and drugs	. 13
4.	Cancer (oncology)	. 14
	4.1 Oncology treatment	. 14
	4.2 Breast cancer	. 15
	4.3 Other cancers	. 16
5.	Cardiology (heart conditions)	. 16
6.	Diabetes	. 19
7.	Eye treatment (ophthalmology)	. 20
8.	Hepatitis B	. 21
9.	HIV/AIDS	. 22
10.	Mental health	. 24
11.	Mosquito-borne diseases, including Kala-azar and malaria	. 26
12.	Neurology, including epilepsy	. 27
13.	Obstetrics	. 28
14.	Paediatrics	. 28
15.	Palliative care	. 29
16.	Orthopaedics	. 30
17.	Renal (kidney) failure and dialysis	. 30
	Tuberculosis	
Term	Terms of Reference	
Biblic	Bibliography	
	urces cited	
	Irces consulted but not cited	
Version control		. 37

## **Country information**

Section 1 updated: 30 June 2022

#### 1. Sources and prices

- 1.1 MedCOI
- 1.1.1 This note makes extensive use of medical country of origin information (COI) compiled by Project MedCOI, which was set up and operated by the immigration authorities in Belgium and the Netherlands until 31 December 2020, and since then by the European Asylum Support Office (EASO).
- 1.1.2 The EASO MedCOI sector website explains how the project has and currently operates:

'EASO MedCOI relies on a worldwide network of medical experts that provides up-to-date medical information in countries of origin. Based on this information and combined with desk research, the EASO MedCOI Sector produces responses to individual requests from EU+ countries, general medical country reports, and maintains a portal with a specific database where the information can be found... The <u>database</u> is only accessible to trained personnel in EASO and the EU+ countries' relevant administrations...

'The high quality and medical accuracy of the information is guaranteed by specifically trained medical advisors and research experts who also provide guidance to the users of the portal.

'The MedCOI Sector at EASO has incorporated all services that were previously delivered by project teams in Belgium and the Netherlands in an ERF/AMIF funded project until 31/12/2020 (MedCOI4).'<sup>1</sup>

- 1.1.3 The UK Home Office ceased to be able to make requests to or access the database of MedCOI on 31 December 2020.
- 1.1.4 The UK Home Office has, however, retained copies of all MedCOI documents referred to in this note should they be required in individual cases.

Back to Contents Section 2 updated: 30 June 2022

#### 2. Structure of the healthcare system

- 2.1 General information
- 2.1.1 In 2021, The Bangladesh Investment Development Authority (BIDA), noted that 'The Bangladesh healthcare sector comprises of hospitals, clinics, diagnostic centers, clinical trials, outsourcing, telemedicine, and medical devices and equipment.'<sup>2</sup>

<sup>&</sup>lt;sup>1</sup> EASO, 'EASO MedCOI' webpage, no date

<sup>&</sup>lt;sup>2</sup> BIDA, '<u>Healthcare</u>', 2021

- 2.1.2 Under the Constitution, the Government of Bangladesh is responsible for providing healthcare to all its citizens<sup>3 4</sup>.
- 2.1.3 There are four major components of the healthcare system in Bangladesh: the public (state) sector, private sector, non-governmental organizations (NGOs) and an 'informal' sector<sup>5</sup> <sup>6</sup>
- 2.1.4 According to the CIA World Factbook, the Current Health Expenditure (CHE), describes the share of spending on health in the country relative to the size of its economy, including expenditures corresponding to the final consumption of health care goods and services, was recorded as 2.5% in 2019<sup>7</sup>. In relation to CHE generally, CIA explained it '...shows the importance of the health sector in the economy and indicates the priority given to health in monetary terms.'<sup>8</sup>
- 2.1.5 The World Bank August 2021 report noted:

"...the three specific objectives of the Government of Bangladesh's (GoB's) National Health Policy (2011) which includes ensuring primary and emergency health care for all, enhancing equitable quality health care and accessibility, and promoting preventive health care services. Bangladesh is also committed to achieving ... achieving Universal Health Coverage (UHC), including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all by the year 2030."<sup>9</sup>

2.1.6 The Bertelsmann Stiftung's Transformation Index (BTI) Country Report 2022, which assesses the transformation toward democracy and a market economy in 137 countries, noted in its report for Bangladesh, that:

'To ensure universal healthcare by 2030, the government has implemented the 4th Health, Population, and Nutrition Sector Program from 2017 to 2022 at a cost of \$136.16 billion. [1 GBP = 113.877 BDT on 20 June 2022<sup>10</sup>] 84% of the program costs are borne by the government, while the rest is paid by development partners such as the World Bank.'<sup>11</sup>

2.1.7 According to the Centre for Research and Information (CRI) report in 2018, in Dhaka, there are over 600 hospitals in the country, including 482 primary care hospitals at sub-district level and below, 65 secondary hospitals at district level, 15 medical & dental college hospitals, and specialist facilities such as chest, infectious diseases and leprosy hospitals. The government has established 16,438 community clinic and health centres and 30,000 satellite clinics for child and maternal healthcare<sup>12</sup>.

<sup>&</sup>lt;sup>3</sup> MedCOI, 2015 Fact Finding Mission Report, 2016 'The Healthcare System in Bangladesh'.

<sup>&</sup>lt;sup>4</sup> World Bank, 'Bangladesh- Improving Hospital Services Quality ...' (page 5), 10 August 2021

<sup>&</sup>lt;sup>5</sup> MedCOI, 2015 Fact Finding Mission Report, 2016, 'The Healthcare System in Bangladesh'.

<sup>&</sup>lt;sup>6</sup> ADRA, 'Maternal and Child Health in Bangladesh' January 2022

<sup>&</sup>lt;sup>7</sup> CIA World Factbook, 'Bangladesh: People and Society', Last updated 18 April 2022

<sup>&</sup>lt;sup>8</sup> CIA World Factbook, <u>'Current Health Expenditure'</u>, no date

 <sup>&</sup>lt;sup>9</sup> World Bank, '<u>Bangladesh- Improving Hospital Services Quality ...</u>' (page 5), 10 August 2021
 <sup>10</sup> Xe.com, '<u>Currency Converter</u>', no date

<sup>&</sup>lt;sup>11</sup> BTI, '<u>BTI 2022 Country Report: Bangladesh</u>', 23 February 2022

<sup>&</sup>lt;sup>12</sup> CRI, 'Bangladesh Towards a Better Healthcare', September 2018

- 2.1.8 The World Health Organisation's (WHO) Global Health Workforce statistics database noted that in 2020 there were 6.67 medical doctors per 10,000 people<sup>13</sup>.
- 2.1.9 The World Bank noted in August 2021 that:

'Bangladesh is at the very early stages of undertaking health system and service delivery reforms that are common among middle-income countries... ...Bangladesh has a pluralistic health system, involving government, nongovernmental and private health services. There are many actors, including public (MoHFW [Ministry of Health and Family Welfare], Ministry of Local Government, Rural Development and Cooperatives, Ministry of Women and Children's Affairs, Ministry of Social Welfare etc.), private, NGOs, CSOs, etc. working for the betterment of the health of the population. While holding exclusive regulatory control over the functions of public, private and NGO providers, and including the responsibility for financing, functionaries, supplies, maintenance, and infrastructure development for service delivery, the MoHFW delivers services through both the Directorate General of Health Services (DGHS) and the Directorate General of Family Planning (DGFP) operating structure at different levels [...] mainly for rural populations.

'Other sectors also finance and operate their own health care services. In urban settings, provision of health services is the direct responsibility of the local governments. To add to the complexity, sectors such as railways, etc. run their own health service provision.'14

2.1.10 For further information, see lists of both public (government facility) and private medical facilities, in a document entitled 'Doctors and medical facilities' provided by the UK Government Foreign, Commonwealth and Development Office in 2021<sup>15</sup>.

Back to Contents

#### 2.2 Public (State) sector

- 2.2.1 According to a 2017 report by the World Bank, the Ministry of Health and Family Welfare (MOHFW) manages general health and family planning services through district general hospitals and smaller hospitals and clinics at sub-district and local community levels<sup>16</sup>.
- 2.2.2 BIDA noted that 'As of the end of 2019, there were 255 public hospitals... The number of hospital beds in public hospitals amounted to 54,660 [combined total with private sector beds was 143,394]'<sup>17</sup>
- 2.2.3 ADRA noted 'The government is the central actor in the country's health system and public health care service is foremost and stronger in the sense of infrastructure [than other actors; private, NGO and informal].' 18
- 2.2.4 In October 2021, the Universal Health Coverage Partnership (UHCP), which helps deliver the World Health Organisation's (WHO) support and technical

<sup>17</sup> BIDA, 'Healthcare', 2021

<sup>&</sup>lt;sup>13</sup> WHO, 'The Global Health Observatory', no date

 <sup>&</sup>lt;sup>14</sup> World Bank, '<u>Bangladesh- Improving Hospital Services Quality</u>...' (page 6), 10 August 2021
 <sup>15</sup> FCDO, '<u>List of medical facilities in Bangladesh</u>', Last updated, 28 February 2021

<sup>&</sup>lt;sup>16</sup> World Bank, 'Bangladesh Health Sector Development Program', 5 December 2017

<sup>&</sup>lt;sup>18</sup> ADRA, 'Maternal and Child Health in Bangladesh' January 2022

expertise in advancing universal coverage (UHC) through a primary health care (PHC) approach in 115 countries, noted in its report 'Stories from the field: Special series on the COVID-19 response- Bangladesh', that:

'Bangladesh has instituted an ambitious public health intervention, providing a community clinic for every 6,000 people. The Government has been able to establish more than 13,200 of these clinics all over the country, covering the whole population. They have become the people's first point of contact for essential health services in rural areas and means that everyone can access the services they need, closer to their homes, through community health clinics.'19

2.2.5 Bertelsmann Stiftung's Transformation Index (BTI) which assesses the transformation toward democracy and a market economy as well as the quality governance in 137 countries, noted in its 2022 report for Bangladesh:

'The revenue budget for health and family welfare in the 2019/20 fiscal year was \$1.70 billion. Since the expenditure related to health services increased due to the pandemic, the size of the annual development program was reduced to \$22.76 billion, from \$23.91 billion. Allocations to health and family welfare sector constitute 1.3% of GDP and 7.2% of total budget allocations. Foreign investment in the health and family welfare sector has been the lowest since the 2005/06 fiscal year, standing at \$173.6 million in 2018/19.<sup>20</sup>

2.2.6 The BTI 2022 report noted:

'The [government] revenue budget for health and family welfare in the 2019/20 fiscal year was \$1.70 billion. Since the expenditure related to health services increased due to the pandemic, the size of the annual development program was reduced to \$22.76 billion, from \$23.91 billion. Allocations to health and family welfare sector constitute 1.3% of GDP and 7.2% of total budget allocations. Foreign investment in the health and family welfare sector has been the lowest since the 2005/06 fiscal year, standing at \$173.6 million in 2018/19.<sup>21</sup>

#### Back to Contents

#### 2.3 Private sector

- 2.3.1 BIDA noted 'The healthcare industry is dominated by private sector with high growth in tertiary hospitals and diagnostics centers. As of the end of 2019, there were ... 5,054 private hospitals and clinics, and 9,529 diagnostic centers ... The number of hospital beds available ... in private [facilities] amounted to 91,537...<sup>22</sup>
- 2.3.2 ADRA noted '... the private sector is playing a supplementary and often competitive role in the health sector with the public one.'23
- 2.3.3 The Daily Star reported in December 2020 that 'Private sector entrepreneurship covers around 60 percent of the health sector in Bangladesh, having approximately 70,000 doctors and 100,000 hospital beds,

<sup>&</sup>lt;sup>19</sup> UHCP, '<u>Stories from the field ...</u>', 25 October 2021
<sup>20</sup> BTI, '<u>BTI 2022 Country Report: Bangladesh</u>', 23 February 2022

<sup>&</sup>lt;sup>21</sup> BTI, 'BTI 2022 Country Report: Bangladesh', 23 February 2022

<sup>&</sup>lt;sup>22</sup> BIDA, 'Healthcare', 2021

<sup>&</sup>lt;sup>23</sup> ADRA, 'Maternal and Child Health in Bangladesh' January 2022

providing employment to around 10 lakh [one million] people, and investment to the tune of USD 3,500 crore [1 GBP = 1.22775 USD on 21 June 2022<sup>24</sup>]<sup>25</sup>

2.3.4 Regarding private hospitals, clinics, dentistry and diagnostic centres, the Dhaka Tribune reported in July 2021 on the Bangladesh Bureau of Statistics (BBS) 'Survey of Private Healthcare Institutions' that

'Currently, a total of 4,452 registered [private] hospitals are providing healthcare services to the people of the country... NGOs operate 176 [of these] hospitals and ....

'Currently, a total of 1,397 [private] registered clinics are providing healthcare services to the people of the country. 255 clinics [of these] are being managed, controlled, and financed by Non-Government Organizations ...

'a total of 10,291 private diagnostic centers are providing healthcare services to people. .... NGOs run 86 diagnostic centres ...<sup>26</sup>

- 2.3.5 The Apollo Hospital Dhaka provides lists and contacts of specialist doctors and offers a broad range of specialist services<sup>27</sup>. The United Hospital also has a wide range of medical departments and services<sup>28</sup>. Madre Healthcare<sup>29</sup>, Thehospitalinfo.com<sup>30</sup>, and MyBangla24.Com<sup>31</sup> provide comprehensive lists of private facilities which provide treatments for medical conditions listed in the sections below.
- 2.3.6 See also <u>NGOs</u> (non-governmental organisations)

**Back to Contents** 

#### 2.4 NGOs (non-governmental organisations)

- 2.4.1 ADRA noted 'NGOs... have a significant role in providing primary, reproductive and family planning services and sometimes influencing the government's strategy in adopting models of health care delivery.'32
- 2.4.2 The Ad- din Foundation which is a non-profit organisation, runs a hospital, women's medical colleges, and social programs such as HIV awareness. Its hospitals are in three locations of Bangladesh- Moghbazar, Dhaka and Munshiganj<sup>33</sup>.
- 2.4.3 The Bangladesh Red Crescent Society (BDRCS) is an NGO:

'Providing emergency health care services... 56 Mother and Child Health Centers (MCH centers), 2 Eye Hospitals, 5 Mother and Child Care hospitals, 1 General hospital, and various health care centers, the Society has been providing health care services to the people from different remote and peripheral locations. As of 30th November 2019, including 433,001 women,

<sup>&</sup>lt;sup>24</sup> Xe.com, '<u>Currency Converter</u>', no date

<sup>&</sup>lt;sup>25</sup> The Daily Star (Bangladesh), '<u>How the private health sector ...</u>', 24 December 2020

<sup>&</sup>lt;sup>26</sup> Dhaka Tribune, 'Private healthcare facilities growing in number ...', 5 July 2021

<sup>&</sup>lt;sup>27</sup> Bestdoctorbd.com, 'Apollo Hospital Dhaka', no date

<sup>&</sup>lt;sup>28</sup> United Hospital, 'Departments', no date

<sup>&</sup>lt;sup>29</sup> Madre Healthcare, 'Bangladesh Private Hospitals Information', Last updated: 12 August 2021

<sup>&</sup>lt;sup>30</sup> The Hospitalinfo.com, '<u>10 Best Private Hospitals ...</u>', Last updated: 29 September 2020 <sup>31</sup> MyBangla24.Com, '<u>The 10 Best Private Hospitals ...</u>', Last updated: 29 September 2021

<sup>&</sup>lt;sup>32</sup> ADRA, 'Maternal and Child Health in Bangladesh' January 2022

<sup>&</sup>lt;sup>33</sup> Ad-din Foundation, 'Ad-din Foundation, Bangladesh', no date

117,827 men and 145,340 children the Society provided different health care services to a total of 696,168 persons for free or at less cost.<sup>34</sup>

#### Back to Contents

#### 2.5 'Informal' sector

2.5.1 MedCOI described the informal sector as comprising pharmacies, retail medicine (drug) shops and traditional healers. MedCOI noted:

'Accessibility is very high, with 80% of the population seeking medical care through this network. Healthcare providers in the informal sector are used by those who are unable to afford either the treatment or the cost of travel to health facilities further away, or by those who are terminally ill and seek alternatives to the general healthcare or are in need of counselling. The informal sector is the principal provider in rural areas.

'In the informal sector many drug vendors are not trained or qualified to dispense medicines. Qualitative shortcomings for medication were mentioned, such as counterfeit medication and the sale of expired medication, but according to most interviewees, this is not a general problem.

'[I]n...rural shops, training [in dispensing] was provided exclusively from the pharmaceutical companies.

'Although...not allowed under drug license regulations, additional clinical services such as giving injections, diagnostic services, burn and wound dressing and vaccinations are also provided in drug shops.

'[T]he majority of the clients buy medicines without prescription and...selfreferral is...common, especially in urban areas. Because of financial difficulties, poor people go directly to a pharmacy or drug vendor without consulting a doctor. Bangladesh has a tradition of self-medication.

'Availability of medication is not guaranteed and there is a wide variation in prices.'<sup>35</sup>

2.5.2 A research article published by BMC Health Services Research in June 2019 entitled 'Perceptions of appropriate treatment among the informal allopathic providers: insights from a qualitative study in two peri-urban areas in Bangladesh', authors Monaemul Islam Sizear and others noted that:

'In Bangladesh, the term [informal health care providers] refers to those who are not registered with any government regulatory body, therefore operate beyond government's oversight. They comprise of a range of providers including community health workers (CHWs), informal (unqualified) allopathic providers (e.g., village doctors and drugstore salespeople/ drug vendors), traditional healers, non-secular faith healers, traditional birth attendants and homeopaths. Generally, they do not receive any training from any recognized medical training institution; however, workshop, seminar, and apprenticeships are their typical learning platforms.'<sup>36</sup>

<sup>&</sup>lt;sup>34</sup> BDRCS, '<u>Health</u>', no date

<sup>&</sup>lt;sup>35</sup> MedCOI, 2015 Fact Finding Mission Report, 2016, 'The Healthcare System in Bangladesh'

<sup>&</sup>lt;sup>36</sup> M. Monaemul Islam Sizear and others, '<u>Perceptions of appropriate treatment...</u>', 26 June 2019

2.5.3 The same source further noted 'Informal providers lack the knowledge and skills for delivering appropriate treatment and care... they provide health services for substantial proportion of the population...<sup>37</sup>

Back to Contents

### 2.6 COVID-19

2.6.1 The World Bank noted in its August 2021 report that:

'The COVID-19 pandemic has created additional barriers for the delivery of essential health and nutrition services in Bangladesh. Bangladesh experienced the sharpest reductions in service delivery from March to May of 2020, with a decline in the number of expected outpatient consultations by 74 percent, of antenatal care consultations by 23 percent, institutional deliveries by 26 percent, childhood vaccinations by 56 percent and injectable family planning visits by 22 percent. Disruptions in essential health service delivery were observed to be significantly greater for hospitals and Upazila Health Complexes [Governmental healthcare services to people living in rural areas]

'Although there has been some recovery from the disruptions to essential health service delivery, as of March 2021, the provision of outpatient consultations continued to be nearly 25 percent lower than expected based on previous years.'<sup>38</sup>

2.6.2 In October 2021, UHCP further noted that:

'With the COVID-19 pandemic, the [community clinic] system was put under severe pressure...

'But community health workers made significant contributions in sharing information and advice on staying protected, while ensuring that essential health services continued...

'Community health workers have been playing an important role in the COVID-19 pandemic response. Since they remain close to the community, they are the first point of contact for people living in rural areas in Bangladesh. ... community health workers performed the essential function of working as ambassadors of the public health system.

'District health managers asked them to reach out to community members, raise awareness about public health and help revive trust in the health system. Community health workers also conducted contact tracing, facilitated home quarantine, isolation, referral and follow up in the rural and hard-toreach areas...

'WHO has been working closely with the central and district health systems of Bangladesh. ...WHO officials provided training on infection prevention and control; COVID-19 management, including contact tracing, quarantine, isolation, and referral; and evaluation and follow-up ... [and assisted in] providing medical goods and products such as quality masks, COVID-19

 <sup>&</sup>lt;sup>37</sup> M. Monaemul Islam Sizear and others, '<u>Perceptions of appropriate treatment...</u>', 26 June 2019
 <sup>38</sup> World Bank, '<u>Bangladesh- Improving Hospital Services Quality ...</u>' (page 5), 10 August 2021

testing machines, testing kits, personal protective equipment, respirators, oxygen supplies and more human resources.<sup>39</sup>

- 2.6.3 The World Health Organisation (WHO) in Bangladesh noted in its Morbidity and Mortality Weekly Update (MMWU) on 25 April 2022 that:
  - 'The COVID- 19 situation continues to improve with low reported cases, deaths, and test positivity rates.
  - 'As of 24 April 2022, more that 256 million doses (1<sup>st</sup>/2<sup>nd</sup> Booster) of COVID-19 vaccines have been administered representing at least 75.4% of total population coverage for the first dose and 68.1%% for the complete dose schedule...
  - 'As of 24 April 2022, there are 13 138 general beds dedicated to COVID-19 treatment countrywide, 0.8% (103) of which are occupied. General bed occupancy decreased in all divisions during the reporting period compared to the previous week except Barishal, Mymensingh, and Sylhet divisions. The Rajshahi Division experienced the overall highest 1.4% general bed occupancy.
  - 'There are 1 174 dedicated ICU [Intensive Care Unit] beds in the country, 1.5% (18) of which are occupied; 61.4% of the dedicated ICU beds are in Dhaka City and 5.5% in Chattogram city. There are 1 174 dedicated ICU beds in the country, 1.6% (19) of which are occupied; ICU occupancy decreased in all divisions in the same period. The highest ICU occupancy was observed in Rangpur (6%) division.<sup>40</sup>

**Back to Contents** 

#### 2.7 Pharmaceuticals

2.7.1 The International Trade Administration (ITA), led by the Under Secretary of Commerce for International Trade to strengthen the international competitiveness of U.S. industry, and foster economic growth and prosperity through global trade, noted in its Bangladesh country commercial guide on healthcare and pharmaceuticals in September 2021 that:

'Bangladesh is the only least developed country (LDC) that meets nearly 98 percent of its domestic demand for pharmaceutical products, with a market size of approximately \$3 billion [1 GBP = 1.22568 USD on 28 June 2022<sup>41</sup>]. ... the Bangladesh pharmaceutical industry is now heading toward selfsufficiency in meeting local demand. There are more than 300 small, medium, and large enterprises operating in the country producing pharmaceuticals...<sup>42</sup>

2.7.2 In an article entitled 'Top 10 Pharmaceutical Companies in Bangladesh' MyBangla24.Com reported on 27 October 2021 that:

'The pharmaceutical industry of Bangladesh plays an important role in the national economy compared to other domestic industries. At present, this industry meets 98% of the pharmaceutical needs of Bangladesh...

<sup>&</sup>lt;sup>39</sup> UHCP, '<u>Stories from the field ...</u>', 25 October 2021 <sup>40</sup> WHO, '<u>Covid- 19 Morbidity and Mortality Weekly Update (MMWU)</u>', 25 April 2022

<sup>&</sup>lt;sup>41</sup> Xe.com, '<u>Currency Converter</u>', no date

<sup>&</sup>lt;sup>42</sup> ITA, '<u>Healthcare and Pharmaceuticals</u>', 17 September 2021.

'The growth rate of the pharmaceutical industry is more than 9% in Bangladesh. Nowadays, there are more than 269 small and large pharmaceutical factories in Bangladesh out of which 169 factories are producing medicines regularly.'<sup>43</sup>

2.7.3 MedCOI, in a response dated 28 June 2020 indicated that general medication for pain relief, stomach; proton pump inhibitors (gastroenterology) was available at the following facility:

Tamanna Pharmacy 50, Habib Market, Gulshan Avenue, Gulshan-1, 1212, Dhaka (private facility):

[Note: Gastroenterology- stomach; proton pump inhibitors are the most prescribed class of medication for the treatment of heartburn and acid- related disorders<sup>44</sup>].

- Pantoprazole
- Lansozaprole
- Omeprazole<sup>45</sup>
- 2.7.4 Pain relief, from a MedCOI response dated 8 December 2020:
  - Paracetamol- pain medication: light
  - Ibuprofen- pain medication: NSAID [note: NSAIDs are non-steroidal antiinflammatory drugs, widely used to relieve pain, reduce inflammation, and bring down a high temperature<sup>46</sup>]
  - Diclofenac- pain medication: NSAID
  - Tramadol- pain medication: strong medication
  - Paracetamol + tramadol (combination) pain medication; analgesics<sup>47</sup>
- 2.7.5 Pain relief, from a MedCOI response dated 30 July 2020:
  - Naproxen- pain medication; analgesics<sup>48</sup>

#### Back to Contents

Section 3 updated: 30 June 2022

#### 3. Cost and access to medical treatment and drugs

3.1.1 This note includes the cost for various medications and treatments. These prices have been converted into British pounds whenever possible. The exchange rate as of 16 June 2022 was 1 GBP =112.958 BDT Bangladeshi Taka<sup>49</sup>.

<sup>&</sup>lt;sup>43</sup> MyBangla24.Com, '<u>Top 10 Pharmaceutical Companies in Bangladesh</u>', updated 27 October 2021

<sup>44</sup> IFFGD, 'About GERD', no date

<sup>&</sup>lt;sup>45</sup> MedCOI, 28 June 2020

<sup>&</sup>lt;sup>46</sup> NHS, '<u>NSAIDs</u>', Last reviewed 27 February 2022

<sup>&</sup>lt;sup>47</sup> MedCOI, 8 December 2020

<sup>&</sup>lt;sup>48</sup> MedCOI, 30 July 2020

<sup>&</sup>lt;sup>49</sup> Xe.com, '<u>Currency Converter'</u>, no date

- 3.1.2 See the <u>National Heart Foundation of Bangladesh (NHFB)</u> for cardiac operation hospital charges effective as from 1 November 2019<sup>50</sup>.
- 3.1.3 Worldbank.org noted in July 2020 that 'Currently, due to the relatively low allocation of budget to the [health] sector, individuals have to bear a large share of medical costs, with 67 percent of expenses borne by households through out-of-pocket payments.<sup>51</sup>
- 3.1.4 See <u>MedEx</u>, an independent online medicine information directory in Bangladesh for a list (undated) of medicines and the conditions they treat, brand names and unit prices<sup>52</sup>.

Back to Contents

Section 4 updated: 30 June 2022

#### 4. Cancer (oncology)

### 4.1 Oncology treatment

- 4.1.1 Information found on MedCOI indicated that Bangladesh has 16 cancer treatments centres, nine of which are government facilities which include the National Institute of Cancer Research and Hospital (NICRH) and the Dhaka Medical College Hospital<sup>53</sup>.
- 4.1.2 The Daily Star (Bangladesh) reported on 4 February 2021 that:

'In the past 10 years, pharmaceutical companies ...have come to manufacture more than 110 types of oncological drugs...

'Local companies manufacture 99 percent of the oncology drugs, but some patients still use imported drugs or unofficially import them... 'According to ...Beacon [Pharmaceuticals Limited] ...[it] manufactures oncology drugs, ... [and] provides support of BDT [Bangladesh taka] three crore per annum [1 GBP = 113.547 BDT on 28 June 2022<sup>54</sup>] to the poor patients and provides diagnostic support.'<sup>55</sup>

4.1.3 The same source added:

'Along with conventional chemotherapy drugs, local pharmaceutical companies manufacture the latest oncology products such as oral therapy, immunotherapy, monoclonal antibodies, oral targeted therapies, and liposomal technology products...

<sup>(</sup>Locally produced cancer drugs are of international standards and cheaper than imported ones, which is helping cancer treatment in Bangladesh, Md Azizul Islam, consultant physician general and specialist of medicine and oncology at Bangladesh Armed Forces, said ...<sup>56</sup>

4.1.4 The Daily Star further reported on 4 February 2021 that:

<sup>52</sup> MedEx (Bangladesh), 'List of Brand Names', no date

<sup>&</sup>lt;sup>50</sup> NHFB, '<u>Package Charge of Cardiac Operation</u>' no date

<sup>&</sup>lt;sup>51</sup> Worldbank.org, '<u>A case for building a stronger health care system in Bangladesh</u>', 26 July 2020

<sup>&</sup>lt;sup>53</sup> MedCOI, 24 October 2017

<sup>&</sup>lt;sup>54</sup> XE.COM, '<u>Currency Converter'</u>, no date

<sup>&</sup>lt;sup>55</sup> The Daily Star, '<u>Development of oncology drugs in Bangladesh: A success story</u>', 4 February 2021

<sup>&</sup>lt;sup>56</sup> The Daily Star, 'Development of oncology drugs in Bangladesh: A success story', 4 February 2021

'There are around 150 qualified clinical oncologists and 16 paediatric oncologists working in the different parts of the country. Regular cancer treatment is available in 19 hospitals and 465 hospital beds are attached as indoor or day-care facilities for chemotherapy in the oncology/radiotherapy departments.

'There are about 15 linear accelerators, 12 Co-60 teletherapy, and 12 brachytherapy units currently available. There are approximately 56 cancer chemotherapeutic agents in Bangladesh.'<sup>57</sup>

4.1.5 For a list of government and private hospitals that provide oncology treatment, see the <u>Cancer Awareness Foundation Bangladesh</u><sup>58</sup>.

#### **Back to Contents**

#### 4.2 Breast cancer

4.2.1 Information found on MedCOI indicated that treatment for breast carcinoma (example for multimodal treatment, surgery, radiotherapy, and chemotherapy which was followed up by being treated with anastrozole) treatment was available at the following facilities:

Bangabandhu Sheikh Mujib Medical University (BSMMU), Shahbagh Road, Dhaka (public facility):

• Outpatient treatment and follow up by first line doctor; for example, family doctor, general practitioner

The National Institute of Cancer Research Hospital, TB Gate, Mohakhali (public facility):

• Inpatient, outpatient and follow up treatment by an oncologist

Shaheed Suhrawardy Medical College Hospital, Shere Bangla Nagar, Dhaka (public facility):

• Inpatient, outpatient and follow up treatment by a gynaecologist

Bangabandhu Sheikh Mujib Medical University (BSMMU), Shahabagh Avenue, Dhaka (public facility):

- Diagnostic imaging by means of computed tomography (CT scan)
- Diagnostic imaging by scintigraphy (nuclear medicine)
- Diagnostic imaging by means of ultrasound
- Diagnostic imaging by means of mammography
- Diagnostic research: blood CEA (Carcino Embryogenic Antigen) marker
- Diagnostic research: cytological examination of biopsy material by pathologist

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

 <sup>&</sup>lt;sup>57</sup> The Daily Star, '<u>Development of oncology drugs in Bangladesh: A success story</u>', 4 February 2021
 <sup>58</sup> Cancer Awareness Foundation Bangladesh, 'List of cancer hospitals in Bangladesh', no date

- Inpatient, outpatient and follow up treatment by an internal specialist (internist)<sup>59</sup>
- 4.2.2 Information found on MedCOI indicated that medications used to treat breast carcinoma was available at the following clinics:

Tamanna Pharmacy, 50, Habib Market, Gulshan Avenue, Gulshan-1, 1212, Dhaka (private facility):

- Letrozole- oncology: anti-hormones; aromatase- inhibitors
- Trastuzumab- monoclonal antibodies<sup>60</sup>

#### **Back to Contents**

#### 4.3 Other cancers

4.3.1 Regarding prevalence of cancer types, and access to services, The Daily Star reported that:

'According to National Center for Biotechnology Information (NCBI), there are 13 to 15 lakh cancer patients in Bangladesh, with about two lakh [note: A lakh is a unit in the Indian numbering system equal to one hundred thousand] patients newly diagnosed with cancer each year.

'In women, cervix, uterus, and breast cancer are most prevalent. Other cancer types, which affect women, are mouth and oropharynx cancer, lung cancer, and oesophagus cancer.'<sup>61</sup>

4.3.2 Further examples of treatments for other cancers were not found on MedCOI. For information leading to the availability of other specific cancer treatments, refer to the general <u>oncology treatment</u> section.

> Back to Contents Section 5 updated: 30 June 2022

#### 5. Cardiology (heart conditions)

- 5.1.1 The <u>National Heart Foundation of Bangladesh (NHFB)</u> hospital '…provides free service to 30% poor patients and all investigations and treatment are done at lower charges [see costs and currency] than other hospitals.'<sup>62</sup>
- 5.1.2 The National Institute of Cardiovascular Diseases (NICVD) is a '...Institute for the treatment of cardiovascular diseases in Bangladesh.'<sup>63</sup>
- 5.1.3 NICVD Outpatient Services include:

'A Cardiology: Adult and Paediatric

- 'Consultation
- 'Non-invasive investigations such as:
  - 'Electrocardiogram (ECG)

<sup>&</sup>lt;sup>59</sup> MedCOI, 8 December 2020

<sup>&</sup>lt;sup>60</sup> MedCOI, 8 December 2020

<sup>&</sup>lt;sup>61</sup> The Daily Star, '<u>Development of oncology drugs in Bangladesh: A success story</u>', 4 February 2021

<sup>&</sup>lt;sup>62</sup> NHFB, '<u>Hospital and Patient Care</u>', no date

<sup>&</sup>lt;sup>63</sup> NICVD, '<u>Welcome to NICVD</u>', no date

- 'Echocardiography (transthoracic, transoesophageal and Stress Echo)
- 'Exercise Stress Testing
- 'Ambulatory ECG (Holter Monitoring)
- 'Non- invasive vascular Lan
- 'Pacemaker and ICD [Implantable Cardioverter Defibrillator] clinic
- 'Hypertension clinic
- 'RF [Rheumatoid Factor] and RHD [Rheumatic Heart Disease] clinic
- Physical Medicine
- 'B Cardiac Surgery: Adult and Paediatric
  - 'Pre- and post- surgical consultation
- 'C Vascular Surgery:
  - 'Pre- and post- surgical consultation.'<sup>64</sup>
- 5.1.4 NICVD Inpatient Services include:

'A Cardiology

- 'Inpatient wards:
- 'All the wards consisted of several six bedded cubicles. The cubicle opposite the nurse's centre in each ward is for patients transferred from CCU [Critical Care Unit] or ICU who needs special attention
- 'Five cardiac cath Labs equipped with the latest technology for invasive and interventional procedures
- 'Invasive diagnostic procedures
  - 'Cardiac catheterisation and angiography
  - 'Electrophysiological study (EPS)
- 'Therapeutic interventional procedures
- 'Percutaneous Coronary Intervention (PCI)
- 'Percutaneous Mitral Commissurotomy (PMC)
- 'Device closure of congenital heart disease
- 'Balloon Valvuloplasty (pulmonary and aortic)
- 'Coil Embolization
- 'Arrhythmia management and cardiac electrophysiology
  - o 'Diagnostic EPS
  - 'Therapeutic ablation of arrhythmias
  - 'Pacemaker and ICD implantation

<sup>&</sup>lt;sup>64</sup> NICVD, '<u>Outpatient Services'</u>, no date

'B Cardiovascular Surgery:

• 'Five operating theatres to perform open heart, closed heart and vascular surgery

'3 Intensive Care Units

'NICVD has three intensive care units:

- 'A 12- bedded Coronary Care Unit (CCU) for cardiac patients needing intensive care
- 'A 24 Bedded surgical ICU for surgical patients
- 'An 8 bedded paediatric intensive care unit (PICU) for paediatric patients below 12 years old and needs intensive care
- 'In addition, one 8 bedded high dependency units and a 12 bedded second CCU for cardiac patients will start functioning soon

'4 Emergency Services:

'Emergency department provides 24- hour service for cardiovascular emergencies and vascular injury. It is equipped with a 12-bed observation unit

'5 Support Services:

- 'Central Laboratory: consists of following sections:
  - 'Clinical Biochemistry
  - 'Pathology and Haematology
  - o 'Medical Microbiology
- 'Blood Bank- Provides whole blood and blood products
- 'Radiology- Undernakes [sic] radiographic requests from both outpatients and inpatients
- 'Nuclear Cardiology- Undertakes myocardial perfusion imaging
- 'Pharmacy- supplies and dispenses medicines and drugs to both outpatients and inpatients as prescribed by consultants or medical officers
- 'Physiotherapy and Cardiac Rehabilitation- provides physiotherapy and arrange cardiac rehabilitation programmes for post- surgical, post- MI, and heart failure patients
- 'Nutrition and Dietary Section- provides diet counselling to individual patients and groups.'<sup>65</sup>
- 5.1.5 Information found on MedCOI indicated that cardiology treatment was available at the following facilities:

BIRDEM, Kazi Nazrul Islam Avenue, Shahbagh, Dhaka (public facility):

• Inpatient, outpatient and follow up treatment by a cardiologist<sup>66,67</sup>

<sup>&</sup>lt;sup>65</sup> NICVD, '<u>Inpatient Services'</u>, no date

<sup>&</sup>lt;sup>66</sup> MedCOI, 19 July 2019

<sup>&</sup>lt;sup>67</sup> MedCOI, 20 August 2019

Dhaka Medical College Hospital, Secretariat Road, Dhaka (public facility):

• Inpatient, outpatient and follow up treatment by a cardiologist

Bangabandhu Sheikh Mujib Medical University (BSMMU), Shahbagh Road, Dhaka (public facility):

- Diagnostic imaging: ECG (electrocardiogram; cardiology)<sup>68</sup>
- 5.1.6 Information found on MedCOI indicated that medications used for cardiology treatment was available at the following facilities:

Apollo Hospital, Plot #81, Block #E, Bushundhara R/A, Dhaka (private facility):

- Acetylsalicylic acid (aspirin)- cardiology: anti blood clotting; antiplatelet aggregation
- Prasugrel- cardiology: anti blood clotting; antiplatelet aggregation
- Carbasalate calcium- cardiology: anti blood clotting; antiplatelet aggregation
- Clopidogrel- cardiology: anti blood clotting; antiplatelet aggregation
- Ticagrelor- cardiology: anti blood clotting; antiplatelet aggregation
- Bisoprolol- cardiology: anti hypertension; betablockers
- Atenolol- cardiology: anti hypertension; betablockers
- Metoprolol- cardiology: anti hypertension; betablockers
- Rosuvastatin- cardiology: lipid modifying/ cholesterol inhibitors
- Atorvastatin- cardiology: lipid modifying/ cholesterol inhibitors
- Simvastatin- cardiology: lipid modifying/ cholesterol inhibitors<sup>69</sup>

Tamanna Pharmacy, 50, Gulshan South Avenue, Gulshan-1, Dhaka (private facility):

- Fenofibrate- cardiology: lipid modifying/ cholesterol inhibitors
- Gemfibrozil- cardiology: lipid modifying/ cholesterol inhibitors
- Rosuvastatin- cardiology: lipid modifying/ cholesterol inhibitors
- Simvastatin- cardiology: lipid modifying/ cholesterol inhibitors<sup>70</sup>

Back to Contents

Section 6 updated: 30 June 2022

#### 6. Diabetes

6.1.1 Information found on MedCOI indicated that treatment for diabetes (for example, diabetes mellitus type 2, with diabetic retinopathy and diabetic nephropathy) was available at the following hospital:

<sup>&</sup>lt;sup>68</sup> MedCOI, 30 July 2020

<sup>&</sup>lt;sup>69</sup> MedCOI, 19 July 2019

<sup>&</sup>lt;sup>70</sup> MedCOI, 30 July 2020

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

- Inpatient, outpatient and follow up treatment by an endocrinologist (treatment of diseases related to problems with hormones)
- Laboratory research of blood glucose (incl: HbA1C/glyc. Hb)
- Laboratory research of renal/ kidney function (creatinine, ureum, proteinuria, sodium, potassium levels)
- Inpatient, outpatient and follow up treatment by an internal specialist (internist)
- Inpatient treatment by an ophthalmologist (eyes)
- Inpatient, outpatient and follow up treatment by a nephrologist (kidneys)
- 6.1.2 Information found on MedCOI indicated that medications used to treat diabetes was available at the following facility:

Tamanna Pharmacy, 50, Gulshan South Avenue, Gulshan- 1, Dhaka (private facility):

- Dapagliflozin- diabetes: oral/ tablets
- Metformin- diabetes: oral/ tablets
- Metformin + sitagliptin (combination) diabetes: oral/ tablets
- Sitagliptin- diabetes: oral/ tablets
- Acarbose- diabetes: oral/ tablets
- Canagliflozin- diabetes: oral/ tablets
- Empagliflozin- diabetes: oral/ tablets
- Glibenclamide- diabetes: oral/ tablets
- Gliclazide- diabetes: oral/ tablets
- Jentadueto (combination- metformin and linagliptin)- diabetes: oral/ tablets
- Linagliptin diabetes: oral/ tablets
- Saxagliptin + metformin- diabetes: oral/ tablets
- Vildagliptin- diabetes: oral/ tablets<sup>71</sup>
- 6.1.3 MedCOI advised, 'Treatment and medication in Bangladesh is also free of charge for Type 1 diabetes patients over the age of 18.'<sup>72</sup>

Back to Contents

Section 7 updated: 30 June 2022

### 7. Eye treatment (ophthalmology)

7.1.1 An article in Eye News entitled 'Ophthalmology in Bangladesh', published in September 2020 noted that 'Moulvibazar BNSB Eye Hospital, in the Sylhet

<sup>&</sup>lt;sup>71</sup> MedCOI, 5 June 2020

<sup>&</sup>lt;sup>72</sup> MedCOI, 2015 Fact Finding Mission Report, published 2016, 'Diabetes'

region of north- east Bangladesh, is one of the few dedicated ophthalmology hospitals in the country.<sup>73</sup>

- 7.1.2 Al Basar International Foundation is a Non-Profit Organization running several eye hospitals in Bangladesh including <u>Al Noor Eye Hospital</u><sup>74</sup>.
- 7.1.3 The <u>Bangladesh Eye Hospital</u> in Dhaka, a private facility, provides a broad range of ophthalmic services, including cornea and refractive surgery and laser treatment for diabetic retinopathy<sup>75</sup>.
- 7.1.4 The <u>Dhaka Medical College Hospital</u> (DMCH) '...is the oldest tertiary- level hospital located at the heart of Dhaka, Bangladesh.'<sup>76</sup>
- 7.1.5 Information found on MedCOI indicated that ophthalmology treatment was available at the Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):
  - Inpatient, outpatient and follow up by an ophthalmologist<sup>77</sup>

Back to Contents Section 8 updated: 30 June 2022

#### 8. Hepatitis B

- 8.1.1 In a research article entitled 'The prevalence of hepatitis B virus infection in Bangladesh: a systematic review and meta-analysis', authors Sujan Banik, and others noted on 14 February 2022 that there are '... major difficulties for hepatitis B elimination in Bangladesh, including a lack of reliable data to guide policy, low awareness and barriers to early diagnosis, transmission via infected blood products, unsafe injections and nosocomial transmission and a lack of treatment availability.'<sup>78</sup>
- 8.1.2 Information found on MedCOI indicated that treatment for hepatitis B (example: chronic viral hepatitis B and liver cirrhosis) was available at the following clinics:

Bangabandhu Sheikh Mujib Medical University (BSMMU), Shahabagh Avenue, Dhaka (public facility):

- Laboratory research: alkaline phosphatase
- Laboratory research: PTH (parathyroid hormone), calcium, phosphate
- Diagnostic imaging by means of an oesopho- gastro- duodenoscopy
- Laboratory research of liver function (PT, albumin, bilirubin, transaminases: ASAT (=SGOT), ALAT (=SGPT)
- Diagnostic research: transient elastography; test for liver fibrosis (e.g., Fibro scan)
- Diagnostic imaging by means of ultrasound

<sup>&</sup>lt;sup>73</sup> Eye News, '<u>Ophthalmology in Bangladesh</u>', September 2020

<sup>&</sup>lt;sup>74</sup> Al Noor Eye Hospital, '<u>About Us'</u>, no date

<sup>&</sup>lt;sup>75</sup> Bangladesh Eye Hospital, '<u>About Bangladesh Eye Hospita</u>l', no date

<sup>&</sup>lt;sup>76</sup> DMCH, '<u>Home</u>', no date

<sup>&</sup>lt;sup>77</sup> MedCOI, 20 August 2019

<sup>&</sup>lt;sup>78</sup> Sujan Banik, and others, '<u>The prevalence of hepatitis B virus infection...</u>', 14 February 2022

- Diagnostic imaging by means of MRI (Magnetic Resonance Imaging)
- Diagnostic research, in the form of liver biopsy
- Laboratory research of HBV DNA testing in case of Hepatitis B
- Inpatient, outpatient and follow up treatment by a gastroenterologist
- Inpatient, outpatient and follow up treatment by a hepatologist

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

- Laboratory research of renal/ kidney function (creatinine, ureum, proteinuria, sodium, potassium levels)
- Gastroenterological emergency treatment in case of rupture of oesophageal carices
- Laboratory research of antibody hep. B surface antigen (anti Hbs)
- Haematology: blood transfusion
- Laboratory research of alpha- fetoprotein (AFP)
- Laboratory research of blood; INR e.g., in case of acenocoumarol anticlotting
- Bangladesh Institute of Tropical and Infectious Disease, Chittagong Highway- Fauzderhat, Dhaka (public facility)
- Inpatient, outpatient and follow up treatment by an infectiologist
- 8.1.3 Information found on MedCOI indicated that medications used to treat hepatitis B was available at the following facility:

Tamanna Pharmacy, 125/A Bashundhara Residential Area, Baridhara, Dhaka (private facility):

- Ferrous fumarate- Haematology; against anaemia; iron deficiency
- Ferrous gluconate- Haematology; against anaemia; iron deficiency
- Entecavir- Infections; antivirals; Hepatitis B
- Tenofovir alafenamide- Infections; antivirals; Hepatitis B
- Tenofovir disoproxil- Infections; antivirals; Hepatitis B<sup>79</sup>

Back to Contents

Section 9 updated: 30 June 2022

#### 9. HIV/AIDS

9.1.1 Hira, F. A., Singh, H., Moshiul, A. M., & Shahriar, A. S.'s article 'How to Curb the HIV/AIDS Prevalence in Bangladesh?', published in the International Journal of Academic Research in Business and Social Sciences, 16 May 2021 noted:

'Nationwide, HIV/AIDS prevention programs are performed with management assistance from UNICEF (United Nations Children's Fund), WHO (World

<sup>&</sup>lt;sup>79</sup> MedCOI, 28 June 2020

Health Organization), and UNFPA (United Nations Fund for Population Activities). Approximately 400 NGOs are running several HIV/AIDS intervention programs through the quality of services are sometimes questionable as they have resource limitation.'80

9.1.2 An online news article, risingbd.com commented on 21 January 2022 that 'Bangladesh have

'... the field [number] of HIV infected patients has increased under the programmes taken by the government. Experts believe, 95 percent of HIV patients will come under treatment by 2030 in compliance with the tasks taken by the government...

'According to UNAIDS, the Joint United Nations Programme on HIV/AIDS, Bangladesh has so far registered more than 14,000 AIDS infected patients which is 0.1 percent of the total population. However, only 8,000 patients are currently under the treatment.

'DGHS Line Director Dr Md Khurshid Alam, also the project director and line director of Tuberculosis-Leprosy and AIDS STD Programme (TB-L & ASP), said, "The rate of HIV infection in the country is very low, only 0.1 percent...

'According to the Bangladesh Country Coordinating Mechanism (BCCM), the scope of treatment and services for AIDS in the country is enough than the need [sic].

'AIDS treatment is provided in Bangladesh by the government. There is no opportunity to take this service at private level yet. There are 27 AIDS detection centers across the country while medical services are provided at 11 centers.<sup>'81</sup>

- 9.1.3 Charity Be In the Know noted treatment for HIV in Bangladesh is:
  - 'Available in a limited number of health facilities, for adults and children
  - 'Dependent on CD4 count •
  - 'Not covered by annual health insurance, so can be expensive •
  - 'Not offered alongside viral load monitoring •
  - 'Available alongside adherence support (in some facilities).'82
- 9.1.4 The United States State Department (USSD) noted in its 2021 Country Reports on Human Rights Practices in Bangladesh published on 12 April 2022 that:

'In terms of physical health care, many practitioners expressed discomfort in discussing sexual activity, and shamed patients who discussed sexually transmitted infections. Neither PrEP [Pre-Exposure Prophylaxis] nor PEP [Post-Exposure Prophylaxis], pre- and post-exposure medications that prevent transmittal of HIV during sex, were available in the country. The government made HIV testing free of cost, but stigma regarding testing and seeking treatment remained strong. On October 19, the government

<sup>&</sup>lt;sup>80</sup> Hira et al.,, '<u>How to Curb the HIV/AIDS...</u>', 16 May 2021
<sup>81</sup> Risingbd.com, '<u>Bangladesh at high risk of HIV infection</u>', 21 January 2022

<sup>&</sup>lt;sup>82</sup> Be In the Know, 'At a glance: HIV in Bangladesh' (Treatment), no date

published national antiretroviral therapy guidelines to outline efforts to increase treatment availability around the country.<sup>83</sup>

Back to Contents Section 10 updated: 30 June 2022

#### 10. Mental health

- 10.1.1 USSD noted that 'Government facilities for treating persons with mental disabilities were inadequate.'<sup>84</sup>
- 10.1.2 Faruk, M, & Hasan, M's paper 'Mental health of indigenous people: is Bangladesh paying enough attention?' published in BJ Psych international journal on 3 March 2022 noted:

'Recent research has revealed that approximately 17% of adults and 14% of children in Bangladesh are experiencing poor mental health. Despite the widespread nature of these problems, most adults (approximately 92%) who are affected have not sought medical attention. The corresponding figure is even greater for children (only 5% receive help). The latest prevalence figures were published in 2019 [by the National Institute of Mental Health] .... The reasons those affected have not consulted a professional include widespread stigma around the subject of mental disorder, the lack of awareness of potential treatments and restricted access to mental healthcare in many parts of the country...

'At present, 270 psychiatrists work in Bangladesh, which amounts to a total of just 0.073 psychiatrists per 100 000 population...

'Bangladesh has about 500 clinical psychologists. The distribution of mental health professionals between urban and rural areas is grossly disproportionate.

'The capital city, Dhaka, has the highest proportion of professionals (e.g., psychiatrists and psychiatric nurses), five times greater than the rest of the country.11 Just 0.44% of the total healthcare budget is allocated to mental health and there is no provision of social insurance to cover expenses for mental healthcare. Out-patient facilities, community-based psychiatric inpatient units and community residential facilities are based in principal cities.

'There is very limited access to mental healthcare for indigenous communities, especially people living in the Chittagong Hill Tracts (CHT) region. This region, which borders both India and Myanmar in the south-east of the country, has a population of about 1.5 million people.'<sup>85</sup>

10.1.3 Information found on MedCOI indicated that psychiatric treatment for Post-Traumatic Stress Disorder (PTSD) was available at the following hospital:

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

• Inpatient, outpatient and follow up by a psychiatrist

 <sup>&</sup>lt;sup>83</sup> USSD, '<u>2021 Country Reports on Human Rights...</u>' (HIV and AIDs social stigma), 12 April 2022
 <sup>84</sup> USSD, '<u>2021 Country Reports on Human Rights...</u>' (Persons with disabilities), 12 April 2022

<sup>&</sup>lt;sup>85</sup> Faruk, M., & Hasan, M., 'Mental health...', 3 March 2022

- Psychiatric treatment of PTSD by means of cognitive behavioural therapy
- Psychiatric treatment of PTSD by means of EMDR (Eye Movement Desensitization and Reprocessing)
- Psychiatric treatment of PTSD by means of narrative exposure therapy
- Psychiatric crisis intervention in case of suicide attempt
- Inpatient, outpatient and follow up by a psychologist<sup>86</sup>
- 10.1.4 Information found on MedCOI indicated that medications used to treat PTSD was available at the following facilities:

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

- Bupropion- psychiatry: antidepressants
- Mirtazapine- psychiatry: antidepressants
- Duloxetine- psychiatry: antidepressants
- Fluvoxamine- psychiatry: antidepressants
- Zolpidem- psychiatry: anxiolytics
- Diazepam- psychiatry: anxiolytics
- Promethazine- psychiatry: anxiolytics

Al Madina Pharmacy, Zahed Plaza, Avenue Road, Gulshan Circle, Dhaka (private facility) and Islamia Pharmacy, Zahid Plaza, Gulshan- 2, Dhaka (private facility):

- Trazodone- psychiatry: antidepressants- available but currently experiencing supply problems- time of re-supply: unknown<sup>87</sup>
- 10.1.5 Information found on MedCOI indicated that psychiatric treatment for severe depressive episodes with psychotic symptoms (psychosis) was available at the following facilities:

Pabna Mental Hospital, Pabna (public facility):

- Inpatient, outpatient and follow up treatment by a psychiatrist
- Inpatient, outpatient and follow up treatment by a psychologist

National Institute of Mental Health, Sher-e- Bangla Nagar, Dhaka (public facility):

- Psychiatric long term clinical treatment (e.g., for chronic psychotic patients) by a psychiatrist and psychiatric long term outpatient treatment by a psychiatrist
- Psychiatric clinical treatment in a closed ward/ setting (not necessarily forced admittance)
- Psychiatric crisis intervention in case of suicide attempt

<sup>&</sup>lt;sup>86</sup> MedCOI, 20 February 2020

<sup>&</sup>lt;sup>87</sup> MedCOI, 20 February 2020

- Psychiatric forced admittance in case necessary
- Psychiatric treatment in the form of sheltered housing (e.g., for chronic psychotic patients)

Kurmitola General Hospital, Tongi Diversion Road, 1206, Dhaka (public facility):

- Outpatient and follow up by a general practitioner (GP)<sup>88</sup>
- 10.1.6 Information found on MedCOI indicated that medications used to treat psychiatric treatment for severe depressive episodes with psychotic symptoms (psychosis) was available at the following pharmacy:

Safabi Pharmacy, Shop No# 2,3, Zahed Plaza Gulshan 2, Dhaka (private facility):

- Fluoxetine- psychiatry: antidepressants
- Sertraline- psychiatry: antidepressants; SSRI (Selective Serotonin • Reuptake Inhibitors. Note: SSRIs can ease symptoms of moderate to severe depression by increasing levels of serotonin in the brain<sup>89</sup>)
- Venlafaxine- psychiatry: antidepressants; SSRI
- Quetiapine- psychiatry: antipsychotics; modern atypical/ sleeping disorder; sedatives<sup>90'91</sup>
- Olanzapine- psychiatry: modern atypical
- Risperidone- psychiatry: antipsychotics; modern atypical<sup>92</sup>
- Domipramine- psychiatry: antidepressants •
- Nortriptyline- psychiatry: antidepressants<sup>93</sup>

#### **Back to Contents**

Section 11 updated: 30 June 2022

#### 11. Mosquito-borne diseases, including Kala-azar and malaria

11.1.1 WHO noted in its world malaria report, 2021, that:

'In tracking progress against the disease, in the South-East Asia Region, firstline treatments for P. falciparum [which causes malaria] include AL [artemether- lumefantrine], AS-MQ, [artesunate- mefloquine] AS-PY [artesunate-pyronaridine], artesunate plus sulfadoxine-pyrimethamine (AS+SP) and DHA-PPQ [dihydroartemisinin-piperaguine]. [Therapeutic efficacy studies] TES of AL conducted in Bangladesh...between 2015 and 2020 found high efficacy with all treatments.'94

11.1.2 Médecins Sans Frontieres (MSF) noted on 14 July 2021 that 'Kala azar is the second-largest parasitic killer in the world. Only malaria causes more deaths.

<sup>&</sup>lt;sup>88</sup> MedCOI, 23 July 2019

 <sup>&</sup>lt;sup>89</sup> Mayo Clinic, '<u>Selective serotonin reuptake inhibitors (SSRIs)</u>', 17 September 2019
 <sup>90</sup> MedCOI, 27 July 2019

<sup>&</sup>lt;sup>91</sup> MedCOI, 17 June 2020

<sup>&</sup>lt;sup>92</sup> MedCOI, 27 July 2019

<sup>93</sup> MedCOI, 17 June 2020

<sup>&</sup>lt;sup>94</sup> WHO, 'World malaria report 2021', 6 December 2021

Also known as "visceral leishmaniasis", kala azar is found in 76 countries... With more opportunities for effective disease control, kala azar is expected to be eliminated in... Bangladesh ... by 2020.'95

11.1.3 In a research article published on 23 March 2021 entitled 'Efficacy and safety of single-dose liposomal amphotericin B in patients with visceral leishmaniasis in Bangladesh: a real-life experience', authors Md Rezaul Ekram, and others noted that 'Liposomal amphotericin B (LAmB) is the drug of choice in Bandladesh to eliminate the burden of visceral leishmaniasis, also known as kala-azar...'96

Back to Contents

Section 12 updated: 30 June 2022

#### 12. Neurology, including epilepsy

- 12.1.1 USSD noted that 'The Ministry of Health established child development centers in all public medical colleges to assess neurological disabilities.'97
- 12.1.2 The National Institute of Neurosciences & Hospital, in Dhaka, is a government run 350-bed hospital with departments of Neurology, Neurosurgery, Paediatric Neurology, Paediatric Neurosurgery, Neurophysiology, Neurointervention, Neurorehabilitation, Neuroradiology, Neuropathology, Transfusion Medicine and Critical Care Medicine, as well as laboratory services. According to its website, 'Patients get all these services almost free of cost or with minimum charges as per government schedule.'98
- 12.1.3 The National Institute of Neurosciences & Hospital, in Dhaka website stated outpatient, inpatient (including intensive care) and emergency neurological and neurotrauma treatment was available<sup>99</sup>.
- 12.1.4 Information found on MedCOI indicated that psychiatric treatment for neoplasm of uncertain or unknown behaviour of brain and central nervous system and other complications including unspecified symptoms and signs involving the nervous and musculoskeletal systems was available at the following facilities:

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka (public facility):

- Inpatient, outpatient and follow up by a neurologist
- Inpatient, outpatient and follow up treatment by a neurosurgeon
- Diagnostic means by means of MRI
- Diagnostic imaging by means of EEG (Electro Encephalo Gram)

National Institute of Neuroscience Hospital, Sher-e-Bangla Nagar, Dhaka, (public facility):

<sup>&</sup>lt;sup>95</sup> MSF, 'Five diseases you might not have heard of...', 30 January 2020

<sup>&</sup>lt;sup>96</sup> Md Rezaul Ekram, and others, '<u>Efficacy and safety of single-dose...</u>', 23 March 2021

 <sup>&</sup>lt;sup>97</sup> USSD, '<u>2021 Country Reports on Human Rights...</u>' (Persons with disabilities), 12 April 2022
 <sup>98</sup> National Institute of Neurosciences & Hospital, '<u>Home</u>', no date
 <sup>99</sup> National Institute of Neurosciences & Hospital, '<u>Services</u>', no date

- Neurology: rehabilitation clinic with 24/7 care (e.g., after CVA, i.e., a stroke, or accident)
- Inpatient, outpatient and follow up treatment by a rehabilitation medicine specialist
- Inpatient, outpatient and follow up by a rheumatologist
- Inpatient, outpatient and follow up by a physical therapist

National Institute of Traumatology and Orthopaedic Rehabilitation Hospital, Sayed Mahbub Morshed Road, Dhaka (public facility):

- Inpatient, outpatient and follow up by an orthopaedist/ orthopaedic surgeon
- Ortho Medical Bangladesh, 6/1-B, Ring Road, Shyamoli, Dhaka (private facility):
- Medical devices orthopaedics: walking aid such as a walker or a cane<sup>100</sup>
- 12.1.5 Information found on MedCOI indicated that medications used to treat neoplasm of uncertain or unknown behaviour of brain and central nervous system and other complications including unspecified symptoms and signs involving the nervous and musculoskeletal systems, and endocrine system (thyroid hormones) was available at the following pharmacy:

Tamanna Pharmacy, 125/ A, Bashundhara Residential Area, Baridhara, Dhaka (private facility):

- Amitriptyline- neurology: for neuropathic pain
- Levothyroxine (=L- thyroxine); synthetic version of thyroxine/ T4endocrinology: thyroid hormones
- Hydrocortisone- endocrinology: hormones: corticosteroids<sup>101</sup>

Back to Contents

Section 13 updated: 30 June 2022

#### 13. **Obstetrics**

13.1.1 WHO noted in a report dated 25 April 2022 that 'In March 2022, more than 85,000 Antenatal Care (ANC-1) services were provided by the public health facilities (excluding community clinics) in Bangladesh...<sup>102</sup>

Back to Contents

Section 14 updated: 30 June 2022

#### 14. Paediatrics

14.1.1 Bangladesh's Institute of Child and Mother Health (ICMH) '...Faculty of Paediatrics is running as the heart of the institute... offering services focused in the field of nutrition, gastro-enterology, respiratory medicine, cardiology, neurology and neonatology...

<sup>&</sup>lt;sup>100</sup> MedCOI, 17 June 2020

<sup>&</sup>lt;sup>101</sup> MedCOI, 17 June 2020

<sup>&</sup>lt;sup>102</sup> WHO, '<u>Covid- 19 Morbidity and Mortality Weekly Update (MMWU)</u>', 25 April 2022

'The inpatient workload comprises the full range of ward work and level-II care for neonates. The outpatient workload includes routine outpatient's services with well-equipped echo lab, asthma centre, disability management centre, ORT [Oral Rehydration Therapy] corner, EPI [Exocrine Pancreatic Insufficiency] corner, ECD [Early Childhood Development] centre, audiometry unit, physiotherapy unit and emergencies.'<sup>103</sup>

14.1.2 Information found on MedCOI indicated paediatric treatment for vesico- uretal reflux with hydronephrosis (urology and nephrology) was available at the following hospital:

Apollo Hospital, Dhaka Plot #81, Block #E, Bashundhara R/A (private facility):

- Inpatient, outpatient and follow up by a urologist and a paediatric urologist
- Inpatient, outpatient and follow up by a nephrologist and a paediatric nephrologist
- Diagnostic imaging by means of radioisotope renography
- Diagnostic imaging by means of ultrasound
- Diagnostic research: urine cytology
- Check up by cystoscopy<sup>104</sup>
- 14.1.3 Information found on MedCOI indicated that paediatric treatment for autism with associated speech and language development delays was available at the following facilities:

Dhaka Children Hospital, Sher-e- Bangla Nagar, Dhaka (public facility):

- Inpatient, outpatient and follow up by a paediatrician
- Inpatient, outpatient and follow up by a child psychologist
- Inpatient, outpatient and follow up by a child psychiatrist

CRP Hospital Mirpur, Plot A/5, Block A, Dhaka 1206, Dhaka (public facility):

- Inpatient, outpatient and follow up by an occupational therapist
- Outpatient and follow up by a speech therapist<sup>105</sup>

Back to Contents

Section 15 updated: 30 June 2022

#### **15.** Palliative care

15.1.1 Independent (private) palliative care services in Bangladesh include <u>Hospice</u> <u>Bangladesh</u><sup>106</sup>. The Cancer Care Centre at the private <u>Apollo Hospitals</u> (<u>Dhaka</u>) provides palliative care to its adult and child patients<sup>107</sup>.

<sup>&</sup>lt;sup>103</sup> ICMH, '<u>Paediatrics Department</u>', no date

<sup>&</sup>lt;sup>104</sup> MedCOI, 22 April 2019

<sup>&</sup>lt;sup>105</sup> MedCOI, 27 December 2019

<sup>&</sup>lt;sup>106</sup> Hospice Bangladesh, '<u>Professional Palliative Care Service ...</u>', no date

<sup>&</sup>lt;sup>107</sup> Apollo Hospitals Dhaka, '<u>Apollo Hospitals, Dhaka'</u>, no date

#### 16. Orthopaedics

16.1.1 Information found on MedCOI indicated that orthopaedics treatments and medical devices used for associated disabilities such as hypochondroplasia (a genetic disorder where mutation of cells results in the triggering of factors that slow cell growth) with permanent use of wheelchair, was available at the following facilities:

National Institute of Traumatology and Orthopaedic Rehabilitation, Sher e Bangla Naga, Dhaka (public facility):

- Inpatient, outpatient and follow up by a physical therapist
- Medical devices: wheelchair
- Medical devices: electric wheelchair
- Inpatient, outpatient and follow up by an orthopaedist/ orthopaedic surgeon

Neurogen Clinic, Solid point Karim Towers (5<sup>th</sup> floor) 44/7 A and 44/7 B West Panthapath, North Dhanmondi, Dhaka (private facility):

• Outpatient, diagnostics, and counselling by a clinical geneticist

Nursing Home Care, Gulshan- 2, Dhaka (private facility):

• Home assistance/ care at home by a nurse<sup>108</sup>

Back to Contents

Section 17 updated: 30 June 2022

#### 17. Renal (kidney) failure and dialysis

- 17.1.1 The Kidney Foundation of Bangladesh hospital in Mirpur '...has now become the largest hospital for treatment of kidney and Urological diseases, Dialysis and Transplantation in Bangladesh... People with little or no resources received treatment free.'<sup>109</sup>
- 17.1.2 Information found on MedCOI indicated that treatment for chronic kidney disease (nephrology) was available at the following facilities:

Dhaka Medical College Hospital, Secretariat Road, 1000, Dhaka:

- Nephrology- chronic haemodialysis
- Nephrology- haemodialysis
- Inpatient, outpatient and follow up by a nephrologist

Center for Kidney Diseases and Urology Hospital, Shaymoli Road, Road no 3, House No 32, Dhaka (private facility):

Transplantation for kidney including all pre- and aftercare<sup>110</sup>

<sup>&</sup>lt;sup>108</sup> MedCOI, 15 January 2020

<sup>&</sup>lt;sup>109</sup> Kidney Foundation, '<u>Welcome to Kidney Foundation</u>', no date

<sup>&</sup>lt;sup>110</sup> MedCOI, 20 August 2019

#### 18. Tuberculosis

- 18.1.1 MedCOI confirmed in 2018 that a range of drugs prescribed for the treatment of TB, such as ethambutol, linezolid, and moxifloxacin hydrochloride, was available. MedCOI also advised that the following, necessary for treating multi-drug resistant tuberculosis (MDR TB), were available at the National Institute of Chest Diseases & Hospital (NIDCH) in Dhaka, known locally as the 'TB Hospital': capreomycin, terizidone and clofazimine. Treatment, including medication, was provided to inpatients at NIDCH free of charge. This hospital had a specialized unit for MDR TB patients, who are required to stay in the hospital for between 9 months and 2 years<sup>111</sup>.
- 18.1.2 MedCOI, in the 25 April 2018 response noted outpatient treatment and follow up by a tuberculosis specialist and/or a pulmonologist was available for non-MDR TB patients [non- multi-drug resistant]. This was free of charge at public hospitals, except for an appointment charge of BDT 100. Laboratory tests for liver function (PT, albumin, bilirubin, transaminases: SGOT, SGPT etc.) and resistance for tuberculosis drugs are available<sup>112</sup>.
- 18.1.3 In a medical report entitled 'Sub-district level correlation between tuberculosis notifications and socio-demographic factors in Dhaka City corporation, Bangladesh', authors Youngli Jo and others in association with Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, USA, Challenge TB Project, Interactive Research & Development (IRD), Dhaka, Bangladesh, National Tuberculosis Control Program (NTP), Dhaka, Bangladesh, noted that, 'Bangladesh ranks sixth globally in terms of tuberculosis (TB) incidence, with 357 000 estimated cases (221 per 100 000 population) and 80 000 TB deaths in 2018...'<sup>113</sup>

<sup>&</sup>lt;sup>111</sup> MedCOI, 25 April 2018

<sup>&</sup>lt;sup>112</sup> MedCOI, 25 April 2018

<sup>&</sup>lt;sup>113</sup> Youngi Jo, Yeonsoo Baik and others, 'Sub-district level...', 2 September 2021

## **Terms of Reference**

A 'Terms of Reference' (ToR) is a broad outline of what the CPIN seeks to cover. They form the basis for the <u>country information section</u>. The Home Office's Country Policy and Information Team uses some standardised ToR, depending on the subject, and these are then adapted depending on the country concerned.

For this particular CPIN, the following topics were identified prior to drafting as relevant and on which research was undertaken:

- Sources and prices
  - o MedCOI
  - Costs and currency
- Structure of the healthcare system
  - General information
  - Public (State) sector
  - NGOs (non-governmental organisations)
  - o 'Informal' sector
  - o COVID-19
  - o Pharmaceuticals
- Cost and access to medical treatment and drugs
- Cancer (oncology)
- Cardiology (heart conditions)
- Diabetes
- Eye treatment (ophthalmology)
- Hepatitis B
- HIV/AIDs
- Mental health
- Mosquito- borne diseases, including Kala-azar and malaria
- Neurology, including epilepsy
- Obstetrics and reproductive health
- Paediatrics
- Palliative care
- Orthopaedics
- Renal (kidney) failure and dialysis
- Tuberculosis

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Back to Contents

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## Version control

### Clearance

Below is information on when this note was cleared:

- version **2.0**
- valid from 19 July 2022

#### Official – sensitive: Start of section

The information in this section has been removed as it is restricted for internal Home Office use only.

#### Official - sensitive: End of section

#### Changes from last version of this note

Updated country information