

Dengue Prevention Is A Governance Duty, Not A Seasonal Battle

When Bangladesh's hospitals began to fill up again this monsoon with dengue patients, many dismissed it as an “unavoidable” seasonal disaster. The 2025 dengue outbreak, however, tells a different story. Even though experts had warned that dengue would peak in August and September, Bangladesh faced its deadliest wave yet in October 2025, recording approximately 22,000 infections and 80 deaths. The overall situation has also raised concerns that it may continue through December. According to the Director General of the Directorate General of Health Services (DGHS), the number of dengue infections is higher than the previous year; however, the fatality rate remains low in 2025.

The dengue virus, unfortunately, spared no one, from ordinary citizens to national figures such as former Bangladesh cricket team captain Mahmudullah Riyad and three-time winner of the international Qur'an recitation champion Hafiz Saifur Rahman Taqi. Therefore, it is time to acknowledge that dengue is no longer a seasonal inconvenience confined to a few communities and/or localities. Instead, it has become a serious public health emergency across tropical and subtropical regions worldwide, and Bangladesh is no exception.

While the causes of this outbreak are complex, experts and researchers point to rapid and unplanned urbanization as a major driver. Dhaka, in particular, is densely populated and poorly planned, with inadequate drainage, scattered construction sites, and water-storage containers — all of which provide perfect breeding grounds for Aedes mosquitoes that transmit the dengue virus. Additionally, rising temperatures, prolonged rainy seasons, and high humidity make the conditions for dengue transmission dangerously favorable. Alongside these environmental factors, weak governance, slow responses, inadequate health infrastructure, and low public awareness have exacerbated this crisis. Although this outbreak could have been prevented, governance failures and public negligence have turned it into a recurring national emergency.

Dengue is a vector-borne disease, not one that spreads directly from person to person like flu or COVID-19. Only infected Aedes mosquitoes can transmit the virus. A female Aedes mosquito (mostly *Aedes aegypti*) bites an infected person with dengue, allowing the virus to multiply inside the mosquito for 8–12 days. When the mosquito later bites a healthy person, the virus enters the bloodstream, which can potentially trigger high fever, severe headache, eye pain, muscle and joint aches, nausea, vomiting, swollen glands, rash, and other symptoms. If treatment is delayed, the disease can escalate to life-threatening complications, especially among vulnerable groups.

Therefore, early detection, rapid testing, and affordable treatment must be prioritized — alongside community-led mosquito control — to break the human-to-mosquito-to-human transmission cycle.

The World Health Organization's Integrated Vector Management (IVM) offers a proven framework for controlling mosquitoes and reducing dengue transmission. Its execution, unfortunately, has been inconsistent in Bangladesh. Government agencies often focus on destroying mosquito larvae, while adult mosquitoes are left unchecked. Public awareness campaigns are scattered, leaving many people unaware of even basic steps to protect themselves.

Bangladesh can no longer treat dengue as a seasonal nuisance or something that happens naturally. The 2025 dengue outbreak is a clear warning that public health, urban planning, and governance cannot be treated in isolation.

Dengue is preventable, yet the country continues to suffer from mismanagement and a lack of accountability. Mosquitoes multiply where governance fails, and human lives pay the price.

The government must act decisively, plan carefully, and govern responsibly to prevent the next outbreak from causing even greater harm. Strong coordination between authorities, health experts, NGOs, and local communities is essential. Citizens must be educated to eliminate stagnant water and protect themselves from mosquito bites. Urban planning should prioritize proper drainage and sanitation, and health authorities must ensure timely monitoring and reporting of dengue cases.

[The root cause of repeated outbreaks is poor governance](#), not nature. If authorities acted responsibly, dengue would not return every year as a “battle”. Prevention is no longer optional; it is a duty the country must uphold right now. By doing so, Bangladesh can protect its people, including vulnerable groups, before the next mosquito bite.