

As of 15 November 2023, globally, a total of 29 countries reported AWD/cholera outbreaks. In the Eastern Mediterranean Region of WHO, 9 countries namely, Afghanistan, Iraq, the Islamic Republic of Iran, Lebanon, Pakistan, Somalia, Sudan, Syria, and Yemen have reported acute watery diarrhoea (AWD)/ suspected cholera cases during 2022. In 2023, 8 out of these 9 countries continued to report AWD/ suspected cholera cases in 2023, however, cholera outbreak in Lebanon was officially announced as closed on 5th June 2023.

During the reporting period (epi week 44-45 2023), a total of 18,388 new AWD/suspected cholera cases – including 29 associated deaths- were reported from 7 Member States (figure 1). During the period of 1 January to 15 November 2023, a total of 389,083 AWD/suspected cholera cases-including 264 associated deaths- were reported from 8 Member States (figure 1).

Country	Indicator	Cumulative	Week 41	Week 42	Week 43	Week 44	Week 45	Trend
Afghanistan	Cases	203,905	4604	4470	4507	4372	4197	
	Deaths	94	0	3	5	0	1	
Pakistan	Cases	*145	3	6	4	2	4	
	Deaths	0	0	0	0	0	0	
Somalia	Cases	15171	308	216	219	279	266	
	Deaths	42	1	0	1	1	2	
Sudan	Cases	3300	279	393	472	324	517	
	Deaths	104	12	8	7	8	13	
Syria	Cases	161620	3472	3915	4071	4056	3747	
	Deaths	7	0	0	0	0	0	
Iraq	Cases	1302	121	73	21	20	12	
	Deaths	7	2	0	0	0	0	
Yemen	Cases	**2745	8	30	56	56	116	
	Deaths	10	0	0	0	0	0	
Lebanon	Cases	2197	Outbreak was officially announced as closed on 5 June 2023 in					
	Deaths	0						

Table 1: Number of cases, deaths and trend of AWD/suspected cholera cases reported from 8 member states in the EMR, January-November 2023

\*Pakistan reports only laboratory confirmed cases.

\*\*Data from Northern Yemen were not received.

While males and females seem to be almost equally affected by AWD/ suspected cholera in the Region, most of the AWD/ suspected cholera cases in Afghanistan (57%), Both Somalia and Syria (54%) are children under five years of age. In Lebanon and Yemen, children under five years represent 26% and 24% of the total suspected cases respectively. There are many drivers contributing to the resurgence of cholera in the Region, such as climate change, conflict and political instability, weak health systems, increased population movement, poor water and sanitation infrastructure, and low awareness among the public. With the support of WHO and other partners, all cholera-affected countries implemented multisectoral cholera response interventions, including coordination, early warning surveillance, water, sanitation, and hygiene, laboratory diagnosis, clinical case management, risk communication and community engagement, and oral cholera vaccination.

Considering that many countries in the Region are facing natural disasters, political and economic instability, and armed conflicts, it's critical to enhance the prevention, preparedness, and response capacities for AWD/cholera in the region. Therefore, the high-risk countries -with WHO support- need to work on strengthening coordination, building capacities for early detection, diagnosis, and rapid response to AWD/cholera outbreaks, in addition to enhancing the capacity for risk communication and community engagement.

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