5 July 2018 – The Ministry of Health of Somalia has announced 304 new cases of cholera, including three associated deaths for week 25 (18 to 24 June) of 2018. The number of reported cases has increased compared to the previous week (292 cases). The cumulative total of cases is 5 329, including 39 associated deaths (case-fatality rate 0.7%) since the beginning of the current outbreak in December 2017.

This week, the active transmission was reported in three regions: 12 districts in Banadir; four districts (Afgoye, Kurtunwarey, Merka, and Brava) in Lower Shabelle; and Kismayo district in Lower Jubba. 49 % of the cases (149 cases) were reported in the flood-affected regions (Lower Shabelle and Lower Jubba). In Kismayo, affected communities especially internal displaced persons (IDPs) in Farjano are using contaminated water due to floods. Also, 50% of the new cases (155) with a high CFR of 1.3 % are reported in Banadir where the highest concentration of IDPs reside in the camps. Banadir hospital has admitted the highest number of cholera admissions compared to other treatment facilities in the country.

Following the heavy rains in Ethiopia and Somalia that have led to the floods in the Juba land and Shabelle basins, an estimated 718 000 people have been affected by which 220 000 have been displaced. There has been an observed increase in the number of new cholera cases in the flood-affected areas, and the outbreak is expected to spread due to the floods that have led to contamination of water sources in the flood-affected regions. Floods have also led to blockage of access to health services which will contribute to delayed health-seeking by the affected populations.

WHO is coordinating the planning and implementation of response activities with the Ministry of Health, WASH and Health Cluster partners, and local health authorities. This includes support for: clinical care delivery; support for case management in cholera treatment centers; surveillance; deployment of rapid response teams; engagement of community health workers; provision and preposition of medical supplies; health and hygiene education in affected communities; and distribution of hygiene kits.

WHO continues to support enhancing the laboratory capacity. Stool samples are collected from six cholera treatment centers in four regions (Banadir, Hiraan, Lower Jubba and Middle Shabelle). Of 223 stool samples so far collected since the begging of this year, 70 tested positive for Vibrio cholera.

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