

Cholera Task Force-IRAQ

Update on Current Cholera Outbreak in Iraq.

SITREP – Situation Report – N° 1

13.09.2015 (Epi Week 37)

SUMMARY:

Ministry of Health Baghdad has announced verbally confirmed twelve Vibrio Cholera (VC) positive cases serotype Inaba tested at different public health laboratories between 8th – 12th Sept 2015.

The Central Public Health Laboratory (CPHL) has confirmed three positive stool samples, out of which one was taken of an internally displaced 56 years old male living in Ya Hussain Road in Najaf city.

Meanwhile other three positive cases of Vibrio Cholera were confirmed by culture in Abu-Ghraib Hospital, Baghdad. These samples have been sent to CPHL for official confirmation. All these three cases belong to Yousfia district, Baghdad west.

Furthermore another six positive cholera cases have been confirmed by culture through Najaf Laboratory and for further confirmation the stool samples have been sent to Central Public Health Laboratory in Baghdad. All these cases are admitted at Najaf Hospital but belonged to Diwaniya Governorate.

All these cases have been timely treated with Ringer lactate and other appropriate fluids and have been discharged.

WHO has been advised by the ministry of health officials that all details related to time, person, place in addition to demographical and geographical characteristics will be formally shared by with WHO by tomorrow 14th September 2015.

Incident Report.

Introduction:

During analysis of routine diarrheal cases trends from Ghamas PHCC/Al-Shamiya District located in Al-Qadisiyyah Governorate, roughly 147 km south of Baghdad on the Al-Shamiya river (branch of Euphrates), there was a clear increase of diarrheal cases during the last few days in epidemiological week 37.

On 8th Sept, 2015, Communicable Disease Control Directorate Baghdad was informed by Najaf Department of Health of a suspected cholera case. A male of 23 years old resident of Om Shwareef village in Shamiya district in Qadisiyah Governorate admitted at Al-Manathera Hospital in Najaf. Confirmation of the sample has been done at the DoH Public Health Laboratory of Najaf. More seven new suspected cases admitted to the same hospital from the same village. Samples sent to the Central public Health lab where three confirmed as cholera.

Public Health Department conducted a field visit to investigate the sudden increase in acute water diarrheal cases. The team consisted of a manager of Diwaniya public health department, enteric diseases MOH focal point, manager of surveillance unit Diwaniya DOH, lab personnel health education personnel and water and sanitation department representative. The following activities were done:

Field Visit to Ghamas PHCC – (Al-Qadisiyah):

- Field visit to Ghamas PHCC to evaluate the OPD and to ensure that the staff were following the case management in accordance with WHO case definitions for effective diarrheal diseases control.
- According to the OPD register, there was an increase of diarrheal cases above normal threshold.
- There was sufficient stock of Carry Blair transport medium for stool sampling for diarrhea specimens.
- There were less activities of health promotion and education for control diarrheal cases especially on topics of chlorine tablets usage.
- There is sufficient stock of ringer lactate for the time being; replenishment is urgently required.

Field Visit to Om Shwareef Village – (Al-Qadisiyah)

- There was no regular water supply from the local water station due to low water level in the river. Chlorine concentration is either 0% or 0.1% in the water supply
- The main source of drinking water by the residents was by reversed osmosis (RO) and underground water source.
- No chlorine tablets were distributed in areas.
- Low health education of people about methods of water purification especially the usage of chlorine tablets usage was noted.

Conclusion:

- There is a sudden increase in diarrheal cases more than normal threshold.
- There is low water supply to city and its remote villages.
- There are low level of health education activities to people about diarrheal diseases.
- There is an evidence for a limited sporadic outbreak of cholera

Recommendations:

- There is a need to monitor and evaluate the new diarrheal cases, conduct on-job refresher training on case definitions.
- There should be a daily reporting and maintaining line listing with effective emergency surveillance through EWARN.
- Cholera kits and reagents are required to be prepositioned at Al-Manathera Hospital and PHCC Ghamas
- There is a need to provide alternative safe water source to the village and surrounding areas.
- There is a need to enhance health education sessions and campaigns along with ORS and chlorine tablets distribution throughout the governorate.

Response:

- WHO is following up the situation very closely in coordination with MoH-Iraq.
- One WHO team has been dispatched to Baghdad already; another arrives tomorrow morning (14th Sept, 2015).
- An interagency meeting convened by WHO is planned for tomorrow Monday 14 September in Baghdad in the afternoon and will mainly involve the health as well as WASH clusters.
- WHO has prepositioned 17 cholera kits (each serving between 250 - 500 diarrheal cases, depending on severity).
- A National Training on Case Management and Laboratory Confirmation of Cholera and other Diarrhoeal diseases is currently being held in Erbil (12-14 September 2015).
- MOH has requested WHO for a cholera taskforce meeting at MoH premise on Tuesday 16th September to discuss the cholera outbreak response and an Ad-Hoc Health cluster meeting will be convened before Eid to discuss further the coordinated response with relevant partners including the WASH clusters.