**Highlights**

- **Number of reporting sites:** One hundred and nine (109) reporting sites including (85% of the total EWARN reporting sites) forty (40) in Internally Displaced People’s (IDP) camps, seven (7) in refugee camps and sixty-two (62) mobile clinics submitted their weekly reports timely and completely.
- **Total number of consultations:** 32,172 (Male=14,726 and Female=17,446) marking a decrease of 360 since last week.
- **Leading causes of morbidity in the camps:** Acute Respiratory Tract Infections (ARI) (n=12,252), Skin Diseases (n=1,405) and Acute Diarrhea (AD) (n=849) remained the leading causes of morbidity in all camps during this reporting week.
- **Number of alerts:** Eleven (11) alerts were generated through EWARN following the defined thresholds, all of which were from IDP camps (two of them from mobile clinics) during this reporting week. All these alerts were investigated within 72 hours, of which nine were verified as true; they were further investigated and appropriately responded by the respective Governorates Departments of Health, WHO and the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).
Morbidity Patterns

IDP camps:

During Week 13, the proportions of Acute Respiratory Tract Infections (ARI) showed a slight decrease from the previous 2 weeks. The proportions of Acute Diarrhea in IDP camps also decreased compared to last week (Week 13 =2.6% and Week 12 =3.6%). The proportion of skin diseases including scabies showed a decrease since last week (see graph below).

![Graph showing trends of ARI, Scabies, and AD in IDP camps from Week 1 to 13, 2016](image)

**Figure II: Trend of proportion of cases of ARI, Scabies and AD in IDP camps Week 1–13, 2016**

Refugee camps:

During Week 13, the proportion of Acute Respiratory Tract Infections (ARI) indicated a slight increase compared to last week. An increase in the proportions of Acute Diarrhea trend in refugee camps was reported compared to the last 2 weeks. Proportion of skin infestations including scabies increased from 2.2% to 4.2% (see graph below).

![Graph showing trends of ARI, Scabies, and AD in refugee camps from Week 1 to 13, 2016](image)

**Figure III: Trend of proportion of cases of ARI, Scabies and AD in IDP camps Week 1–13, 2016**
Trends of Diseases by Proportion and location for IDP Camps

The graph below indicates the proportion of cases of Acute Respiratory Tract Infections, Acute Diarrhea, and Skin Infestations including scabies which comprises the highest leading causes of morbidity in IDP camps for Week 13, 2016.

Trends of Diseases by Proportion and location for Refugee Camps

The graph below indicates the proportion of Acute Respiratory Tract Infections cases, Acute Diarrhea, and Skin Infestations including scabies which comprises the highest leading causes of morbidity in Refugee camps for Week 13, 2016.
Trend of Diseases by proportion and location for off camp IDPs covered by Mobile Clinics

The below graph indicates the proportion of Acute Respiratory Tract Infection cases, Acute Diarrhea, and Skin Infestations including scabies which comprises the highest leading causes of morbidity in off camp IDPs covered by mobile clinics for Week 13, 2016.

Trends of Upper and Lower ARI as leading communicable disease

Acute Respiratory Tract Infection (ARI) has been further divided into upper and lower respiratory tract infections. Compared to Week 12, the proportion of upper ARI in Week 13 has increased by 1% from 95% to 96% while the Lower ARI proportion has decreased from 5% to 4% during the same time period. Furthermore, the other graph below indicates the proportion of lower and upper ARI cases by each reporting site for Week 13.
**Trends of Waterborne Diseases in IDP camps**

The graph below shows the trends of waterborne diseases (Acute Diarrhea, Bloody Diarrhea and Acute Jaundice Syndrome) reported from IDP camps and which indicated a decrease in waterborne diseases comparing to last week (please see graph below).

![Graph showing trends of waterborne diseases in IDP camps](image)

**Figure VIII: Trend of Waterborne diseases from IDP camps, Week 1—13, 2016**

**Trends of Waterborne diseases in Refugee camps**

The graph below shows the trends of waterborne diseases (Acute Diarrhea, Bloody Diarrhea and Acute Jaundice Syndrome) from refugee camps indicates an increase of the trend compared to the last two weeks. Furthermore, no clustering has been reported for any of the waterborne diseases cases during this period.

![Graph showing trends of waterborne diseases in Refugee camps](image)

**Figure IX: Trend of waterborne diseases from Refugee camps, Week 1—13, 2016**
Eleven alerts were generated through EWARN following the defined thresholds. All of these alerts were from IDP camps (two of them from mobile clinics) during this reporting week. All the alerts were investigated within 72 hours, of which nine of them verified as true and were further investigated and appropriately responded by the respective Governorates Departments of Health, WHO and the relevant health cluster partners. The acute watery diarrhea case has been excluded after verification and investigation because it did not meet the case definition of suspected cholera. The same occurred for the suspected meningitis case reported in Erbil (Details: see Alerts and Outbreaks Section).

<table>
<thead>
<tr>
<th>Sn</th>
<th>Alert</th>
<th>Location</th>
<th>Governorate</th>
<th>District</th>
<th>IDP/Refugee Camp</th>
<th># of cases</th>
<th>Run by</th>
<th>Investigated and Response within 72 hours</th>
<th>Sample Taken Yes/No</th>
<th>Alerts Outcome True/False</th>
<th>Public Health Intervention Conducted</th>
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<tr>
<td>1</td>
<td>Mumps</td>
<td>Harshm</td>
<td>Erbil</td>
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<td>Anbar</td>
<td>Ameriyat Al-Fallujah</td>
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<td>Duhok</td>
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### Trends of Alerts

The graph below shows the numbers of alerts generated through EWARNs per week, which have been verified, investigated and responded accordingly by the Ministry of Health, WHO and health cluster partners.

![Figure X: Alerts generated through EWARN surveillance Week 1, 2015—Week 13, 2016](image)

For comments or questions, please contact

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- **WHO EWARN Unit** emacoirqewarn@who.int

EWARN Dashboard Link: http://who-iraq-ewarn.github.io/