

# Iraq: EWARN & Disease Surveillance Bulletin

2017 Epidemiological Week: 03

Reporting Period: 16 – 22 Jan , 2017

## Highlights

- ◆ **Number of reporting sites in Week 3 :** (190) reporting sites (96% of the total EWARN reporting sites) including (107) sites in internally displaced people's (IDPs) camps, (7) sites in refugee camps and (70) mobile clinics and (6) hospitals submitted their weekly reports timely and completely.
- ◆ **Total number of consultations in Week 3:** 115,392 (Male=50,864 and Female=44,271 for the reporting communicable diseases) marking an increase of 19,580 since last week, (Total consultations in Week 02: 95,812).
- ◆ **Leading causes of morbidity in the camps in Week 3:** Acute respiratory tract infections (ARI) (n=42,623), acute diarrhea (AD) (n=3,737) and skin diseases (n=1473) remained the leading causes of morbidity in all camps and displaced population areas served by health clinics during this reporting week.
- ◆ **Number of alerts in Week 3:** (4) alerts were generated through EWARN. all the alerts were reported from IDPs camps during this week. The alerts were investigated within 72 hours, of which one verified as true, They were responded to by the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).

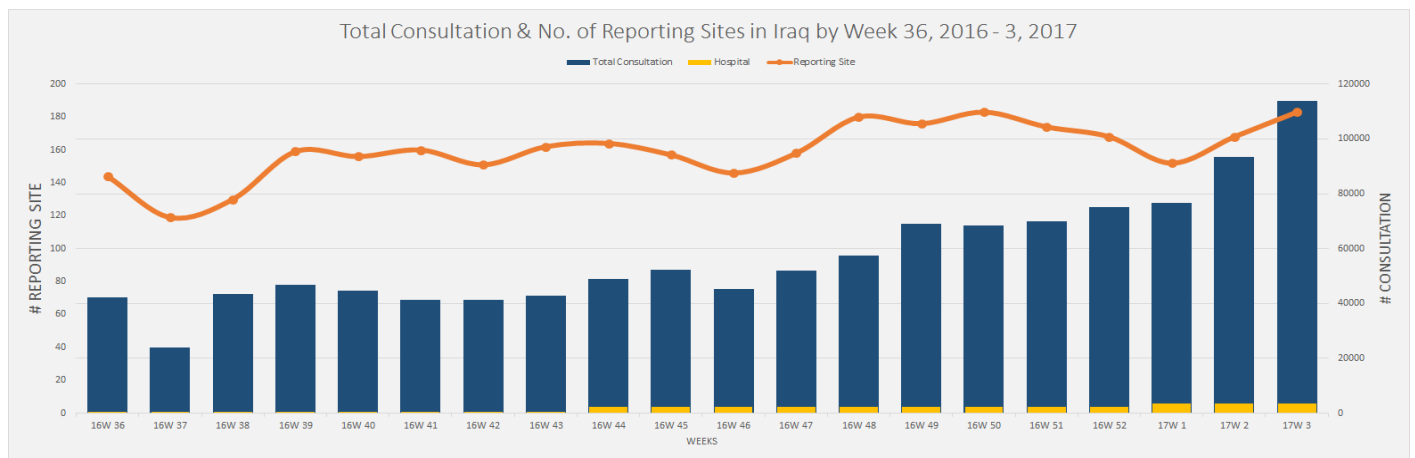


Figure I: Distribution of total consultations and number of reporting health facilities by weeks 36, 2016 – 03, 2017

## Highlights

- **Number of reporting sites** increased from 84 health clinics at the end of 2015 to 189 end of 2016 .
- **The cumulative number of consultations** From week 1 in 2016 to week 3 in 2017 was 2,144,983.
- **Static and mobile Health clinics** from the departments of health and 29 I/L partners (NGOs) reported to the EWARN.
- **The common reported disease event** was acute respiratory infections, followed by acute diarrhea and scabies (please see Figure II).

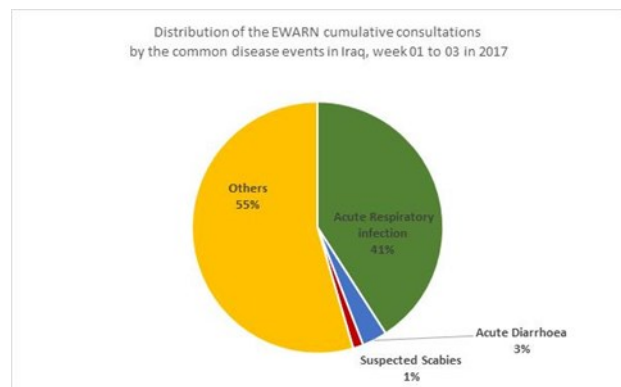


Figure II: Trends of waterborne diseases from EWARN sites, Week 01—Week 03,2017.

# Ninewa Governorate

## Highlights:

- ◆ In week 03, Forty six (46) reporting sites including 14 medical mobile clinics and 31 static health facilities and one hospital submitted their EWARN timely and completely.
- ◆ The total consultations in Ninewa Governorate in week 03/2017 was 41,555.
- ◆ No alert reported this week.
- ◆ UIMS PHC in Gayyara airstrip camp and DAMA/MALTESER mobile clinic in Hassansham M2 camp submitted EWARN reports for the first time.

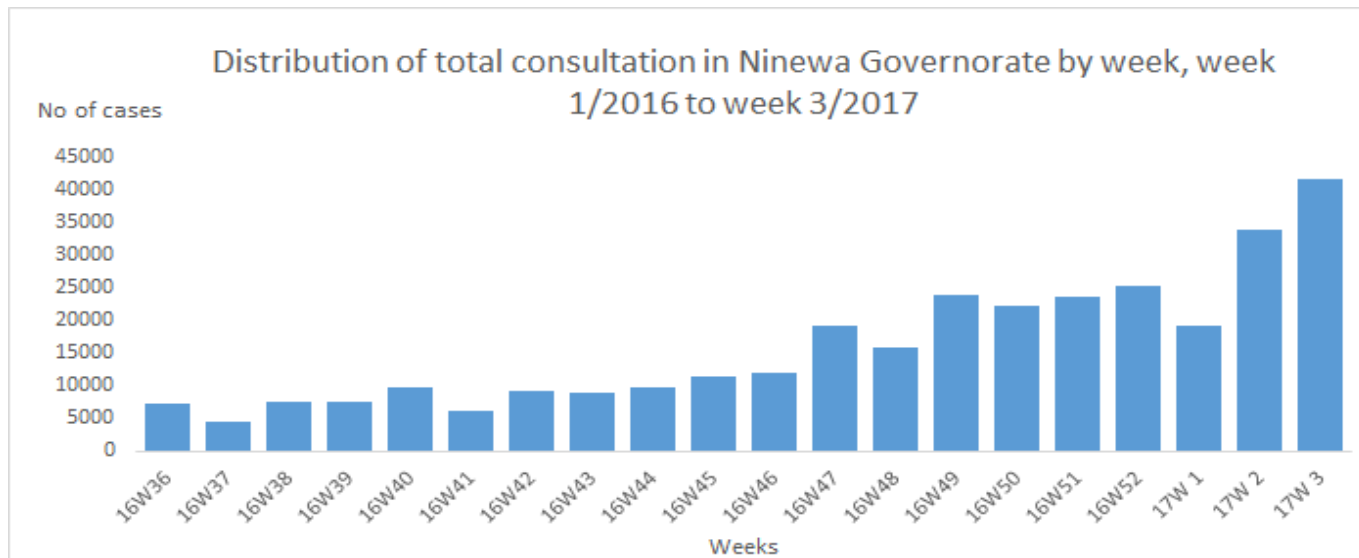


Figure III: Distribution of total consultations in Ninewa Governorate by week, week 1/2016 to week 03/2017

## Common reported events:

The most common reported disease events/ syndrome during week 03 in Ninewa department of health were acute respiratory infections (43%), acute diarrhea (5%), cutaneous Leishmaniasis (2%), and suspected scabies (1%) (please see the below table).

Table I: Distribution of the common reported disease events in Ninewa Governorate in week 01, 2017

Health Sector	Acute Respiratory Infection	Acute Diarrhoea	Suspected Leishmaniasis	Suspected Scabies	Other Disease
Al-Hamdaniya	1907	101	1	112	2932
Al-Shikhan	1346	115	2	63	3408
AYSER	702	34	0	6	1561
BARDARASH	298	24	0	9	901
GAYARA	6892	1187	445	186	17781
Makhmur	3145	261	6	93	4638
Sinjar	302	5	123	0	752
Telafar	1725	66	96	13	6019
Tilkaif	1232	40	1	10	2570
<b>Grand Total</b>	<b>17549</b>	<b>1833</b>	<b>674</b>	<b>492</b>	<b>40562</b>

# Morbidity Patterns

## IDPs camps:

During Week 03, the proportions of acute respiratory tract infections (ARI), acute diarrhea and skin infestations including scabies in IDP camps decreased compared to the previous week (please see Figure IV below).

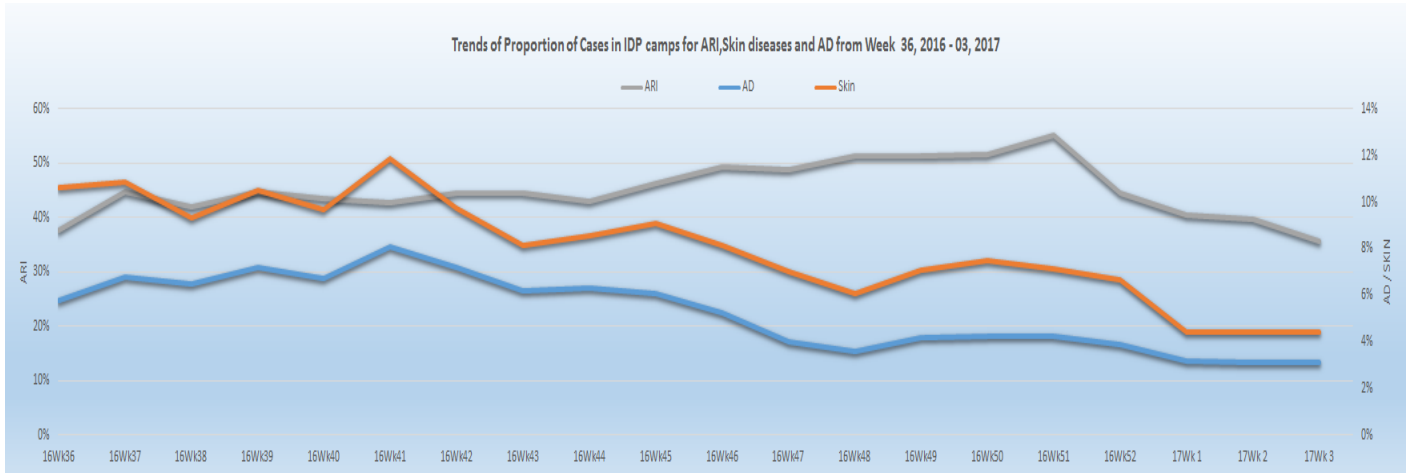


Figure IV: Distribution of the acute respiratory infection, scabies and acute diarrhea in IDP camps, Week 36, 2016 – 03, 2017

## Refugee camps:

During Week 03, the proportions of acute respiratory tract infections (ARI) decreased, while the proportion of acute diarrhea and skin infestations including scabies increased from the previous week (please see Figure V below).

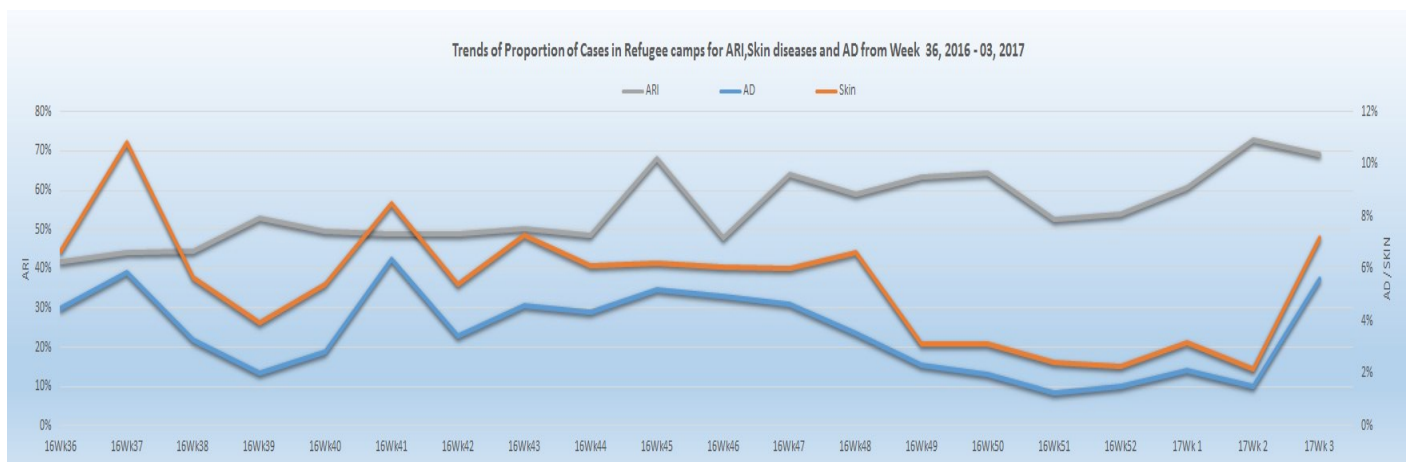


Figure V: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps, Week 36, 2016–03, 2017

**Distribution of the common diseases by proportion and location for IDPs camps**

Figure VI below indicates the proportions 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 03, 2017.

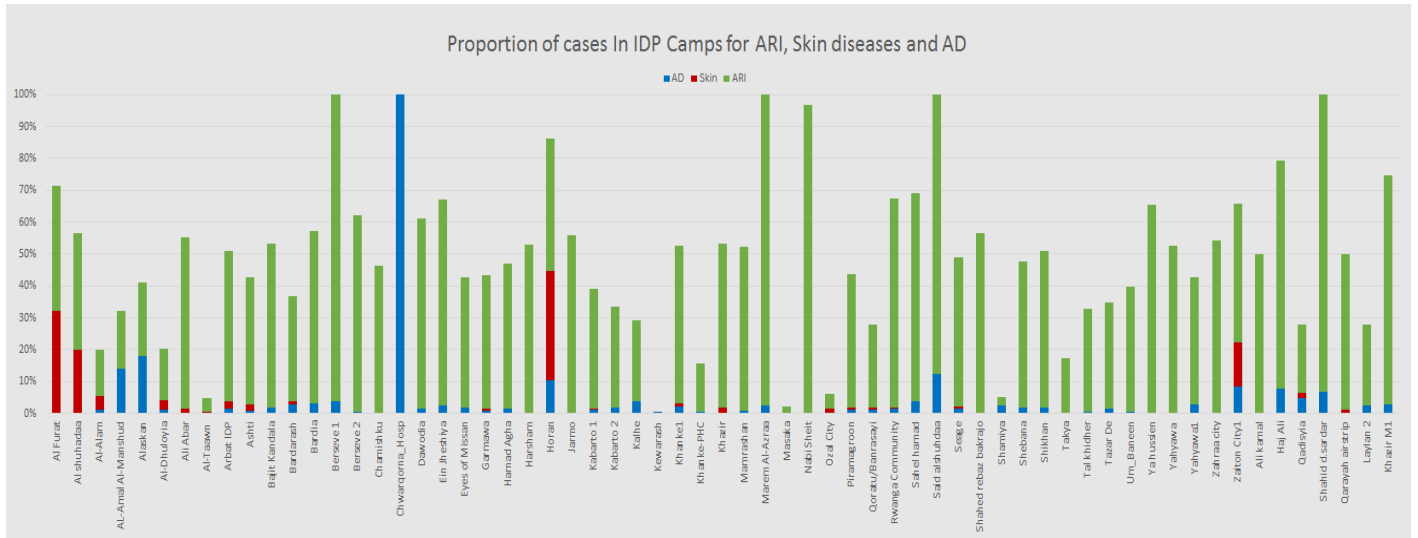


Figure VI: Proportion of cases of ARI, scabies and AD in IDPs camps for Week 03, 2017

**Distribution of the common diseases by proportion and location for refugee camps**

Figure VII below indicates the proportions of acute respiratory tract infections, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity in the refugee camps for Week 03, 2017.

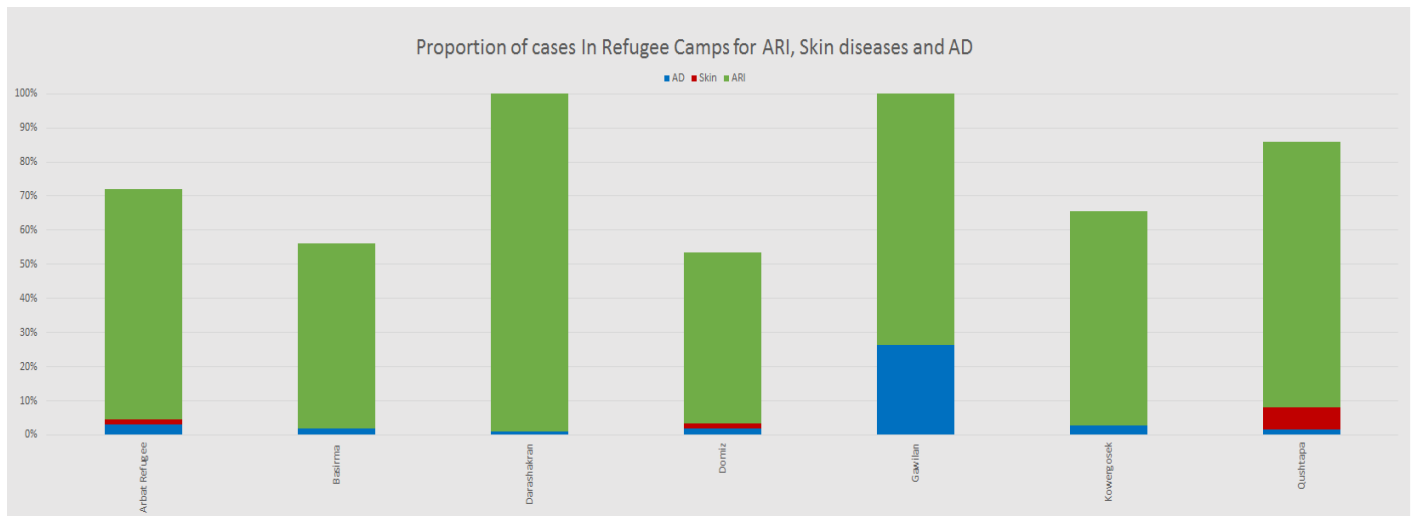


Figure VII: Trend of proportions of cases of ARI, scabies and AD in Refugee camps for Week 03, 2017

**Distribution of the common diseases by proportion and location for IDPs covered by mobile clinics**

Figure VIII below indicates the proportions of acute respiratory tract infection, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity of IDPs covered by mobile clinics for Week 03, 2017.

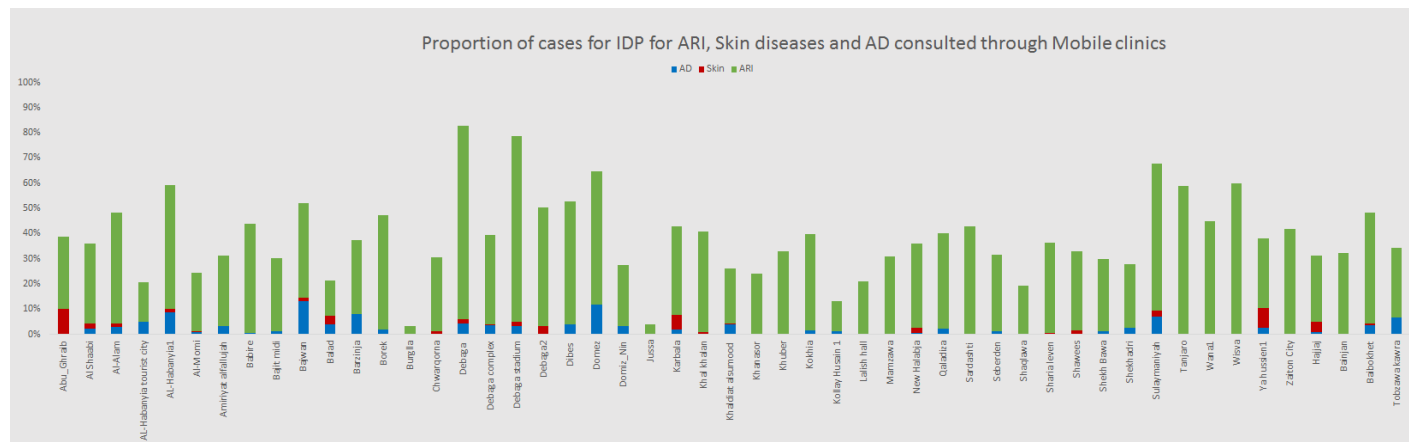


Figure VIII: Distribution of ARI, scabies and AD covered by mobile clinics for the IDPs, Week 03, 2017

**Trends of Acute Diarrhea**

Figure IX below shows the trends of acute diarrhea reported in the period from Week 01 to Week 25 in 2015, 2016 and week 01 to week 3 in 2017 through the EWARN system. This week showed an increasing trend of the AD compared to last weeks. In 2016, the trend of the disease showed a peak in Week 24 (3387 cases). From Week 31 there was a decrease in the reporting of AD through all the EWARN reporting governorates

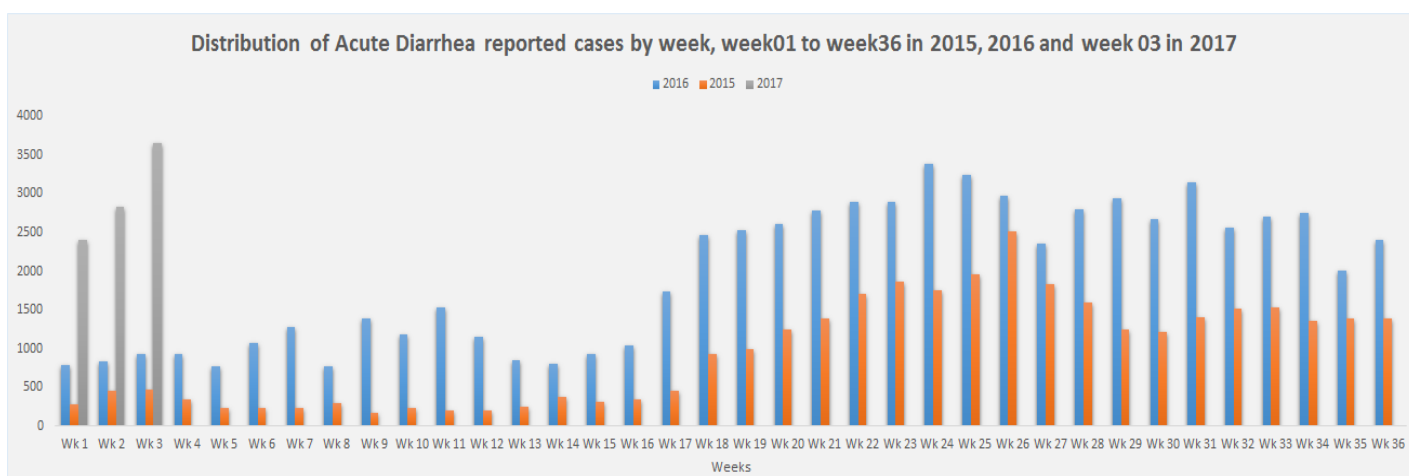


Figure IX: Distribution of acute diarrhea reported cases by week, Week 01–Week 36, 2015-2016 & 2017

## Trends of waterborne diseases in IDP camps

Figure X below shows the trends of waterborne diseases (acute diarrhea, acute bloody diarrhea and acute jaundice syndrome) reported from IDP camps indicating a slightly increase in waterborne diseases.

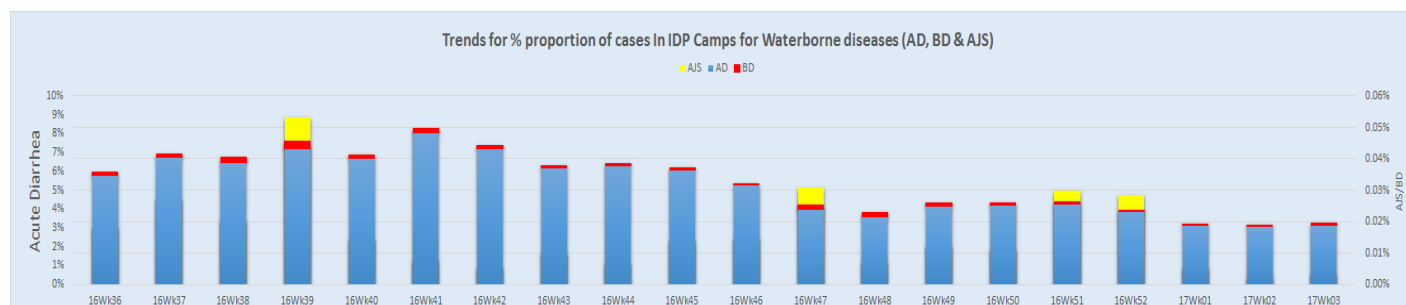


Figure X: Trend of waterborne diseases from IDP camps, Week 36/2016 –03/2017

## Trends of waterborne diseases in refugee camps

Figure XI below shows the trends of waterborne diseases (acute diarrhea, acute bloody diarrhea and acute jaundice syndrome) reported from refugee camps, and indicated an increase in waterborne diseases.

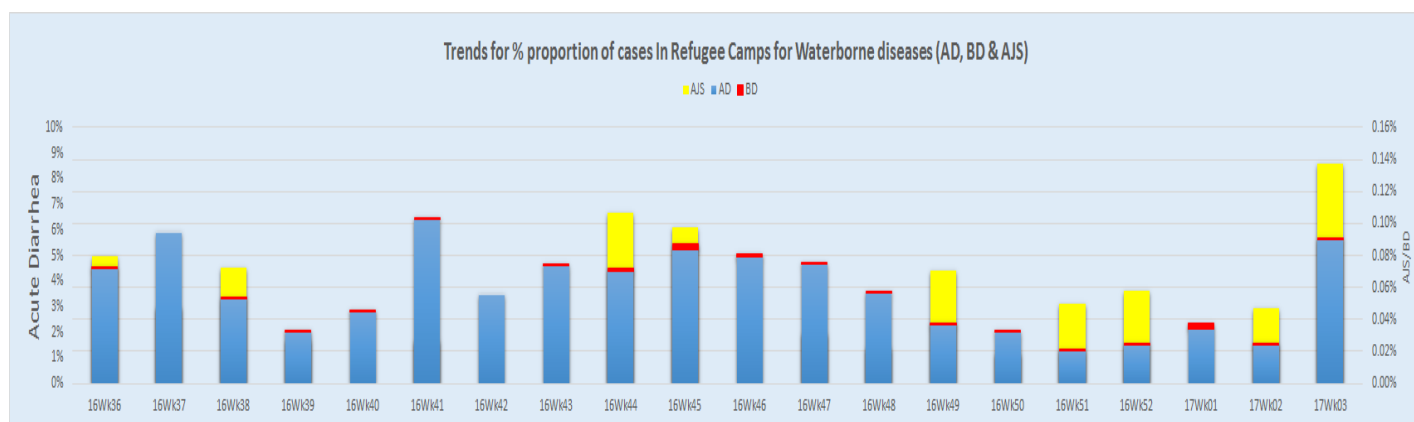


Figure XI: Trends of waterborne diseases from refugee camps, Week 36/2016 -

## Alerts & Outbreaks

(4) alerts were generated through EWARN. was were reported from IDPs camp during this week. The alerts were investigated within 72 hours, of which was one verified as True, They were responded by the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).

Sn	Alert	Location	Governorate	District	IDP/Refugee Camp	# of cases	Run by	Investigation and Response within/48-72Hrs DOH/WHO/NGO	Sample Taken Yes/No	Alerts Outcome True/False	Public Health Interventions Conducted
1	Suspected Chicken pox	Laylan2	Kirkuk	Daqq	IDPs	1	MC-Medair	Yes	No	TRUE	Yes
2	Suspected Meningitis	Al Rayan	Anbar	AL-Habanyia tourist city	IDPs	1	UIMS	Yes	Yes	FALSE	Yes
3	Suspected visceral leishmaniasis	Lalish hall	Dahuk	Zako	IDPs	1	MC-Dorcac	Yes	No	FALSE	No
4	Suspected cutaneous anthrax	Bajet Kandala	Dahuk	Sumel	IDPs	1	PU-AMI	Yes	No	FALSE	No

## Trends of alerts

The below Figure No. XII shows the number of alerts (True & False) generated through EWARNs per week which have been investigated and responded accordingly by the Ministry of Health, WHO and health cluster partners.

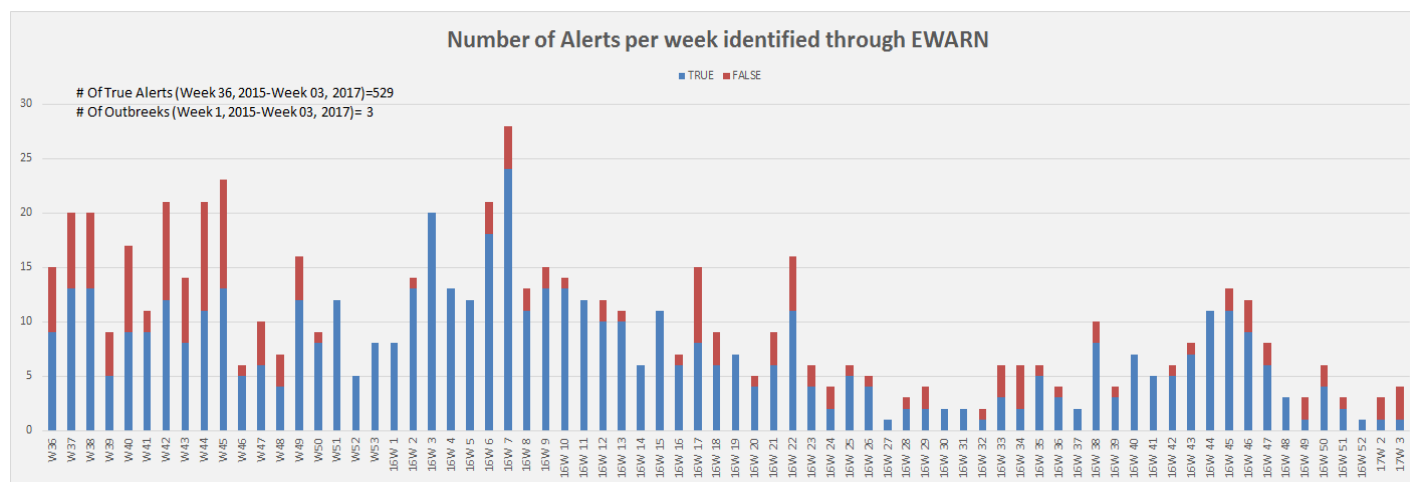


Figure XII: Alerts generated through EWARN surveillance week 36, 2016 –week 03. 207

### For comments or questions, please contact

- **Dr. Adnan Nawar Khistawi** | 07901948067 | [adnannawar@gmail.com](mailto:adnannawar@gmail.com), Head of Surveillance Section, Federal MOH
- **Dr. Renas Omar** | 07504482798 | [renas.sadiq@yahoo.com](mailto:renas.sadiq@yahoo.com) Head of Preventive Department, MOH-KRG
- **Dr. Muntasir Elhassan** | 07809288616 | [elhassanm@who.int](mailto:elhassanm@who.int), EWARN Coordinator, WHO Iraq
- **WHO EWARN Unit** [emacoirqewarn@who.int](mailto:emacoirqewarn@who.int)

EWARN Dashboard link: <http://irq-data.emro.who.int/ewarn/>

EWARN reporting health facilities: [http://irq-data.emro.who.int/ewarn/reporting\\_sites](http://irq-data.emro.who.int/ewarn/reporting_sites)

Early warning and response network bulletins: <http://emro.who.int/irq/ewarns/index.html>