



Iraq: EWARN & Disease Surveillance Bulletin

2017 Epidemiological Week: 34

Reporting Period: 21 – 27 August, 2017

HIGHLIGHTS

- ◆ **Number of reporting sites:** (197) reporting sites submitted timely and completely weekly reports through EWARN: (84) in Internally Displaced People’s (IDP) camps, (8) in refugee camps, (97) in mobile clinics and (8) in hospitals.
- ◆ **Total number of reporting sites decreased by 13% from Week 33= 223 to Week 34= 197.**
- ◆ **The cumulative consultations from Week 01-34 is 3,485,238.** (Figure I)
- ◆ **Total number of consultations in Week 34:** 123,748 (Male=71,774 and Female=51,974 (Figure II) consultations were reported during this week marking an increase of 6% when compared to last week, (Week 33=116,311).

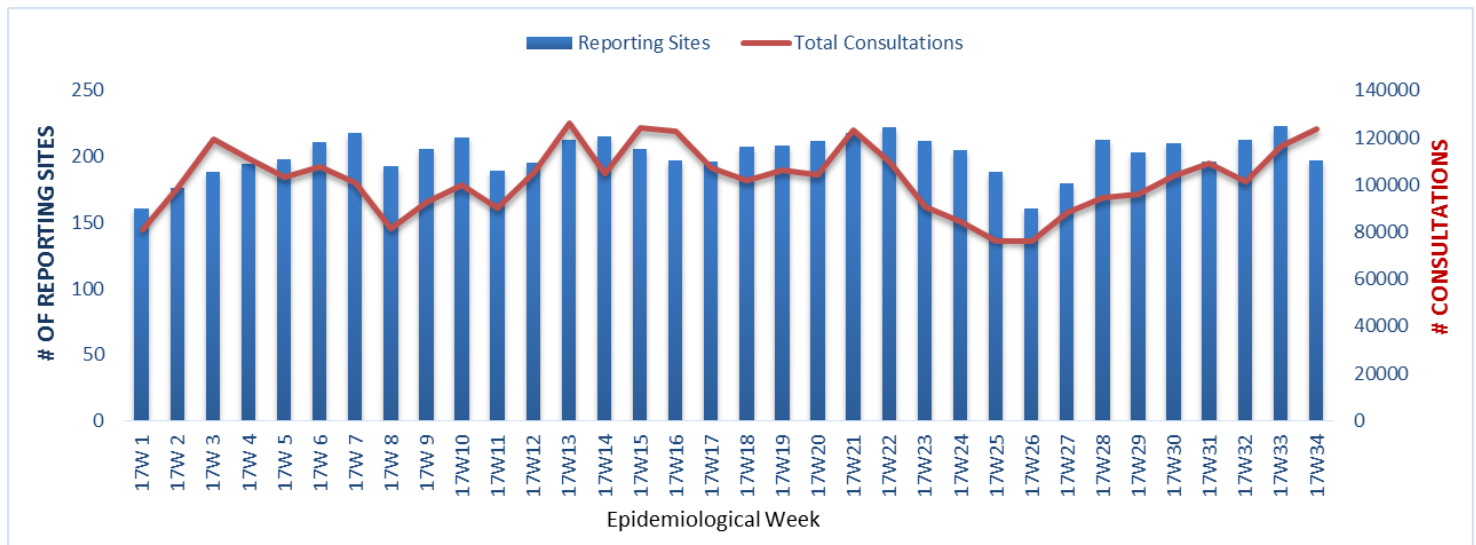


Figure I: Total number of consultations compared to number of reporting sites by week in Iraq, 2017 (Week 01 -34)

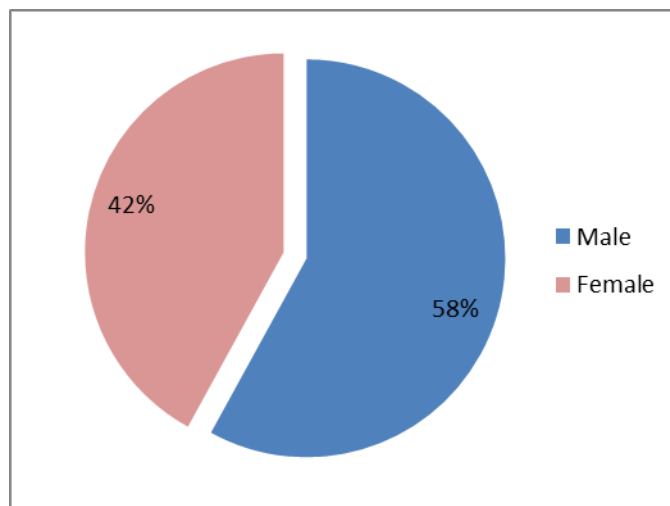


Figure II: Percentage of consultations by gender in Iraq, Week 34, 2017

- ◆ **Leading causes of morbidity:** Acute Respiratory Tract Infections (ARI) (n=27,021), Acute Diarrhea (AD) (n=6,427) and skin diseases including Scabies (n=2,071 (2%)) remained the leading causes of morbidity in all camps and displaced population areas during this reporting period. (Figure III).
- ◆ **Number of Alerts: 3 Alerts** (3 suspected measles cases) were received through EWARN.

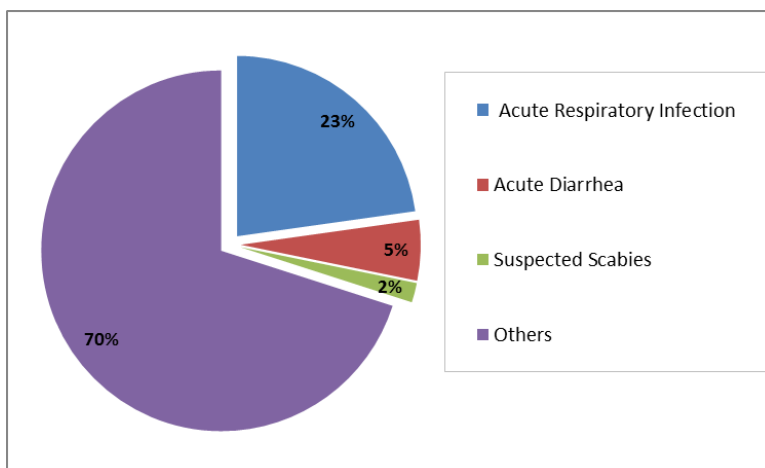


Figure III: Distribution of EWARN cumulative consultations by the common reported disease/events in Iraq, Week 34, 2017

Table I: Proportion of common reported disease/events in Iraq by Governorate in Week 34, 2017

Governorate	Total Consultations	Reporting Sites	Acute Diarrhea	Acute Respiratory Infection	Suspected Scabies	Others
Anbar	13,913	15	3%	19%	2%	75%
Baghdad	964	8	1%	26%	2%	71%
Basrah	5	1	0%	20%	0%	80%
Dahuk	8,623	22	3%	27%	2%	62%
Diyala	130	1	3%	3%	0%	94%
Erbil	4,326	15	4%	27%	7%	58%
Kerbala	970	1	2%	34%	2%	61%
Kirkuk	3,471	6	2%	18%	3%	75%
Najaf	438	2	3%	20%	12%	65%
Ninewa	73,514	84	7%	23%	1%	65%
Salah al-Din	7,680	19	6%	18%	3%	71%
Sulaymaniyah	9,714	23	2%	15%	1%	80%

*The proportion of the disease/event from the total consultation of the governorate

Morbidity Patterns

IDP camps

The proportion of Acute Respiratory Tract Infections (ARI) slightly increased from 20% in Week 33 to 21% in Week 34; and Acute Diarrhea (AD) slightly decreased from 6% in Week 33 to 5% in Week 34; whereas skin infestations including Scabies remained steady since last week (Weeks 33 and 34=2%). (Figure IV).

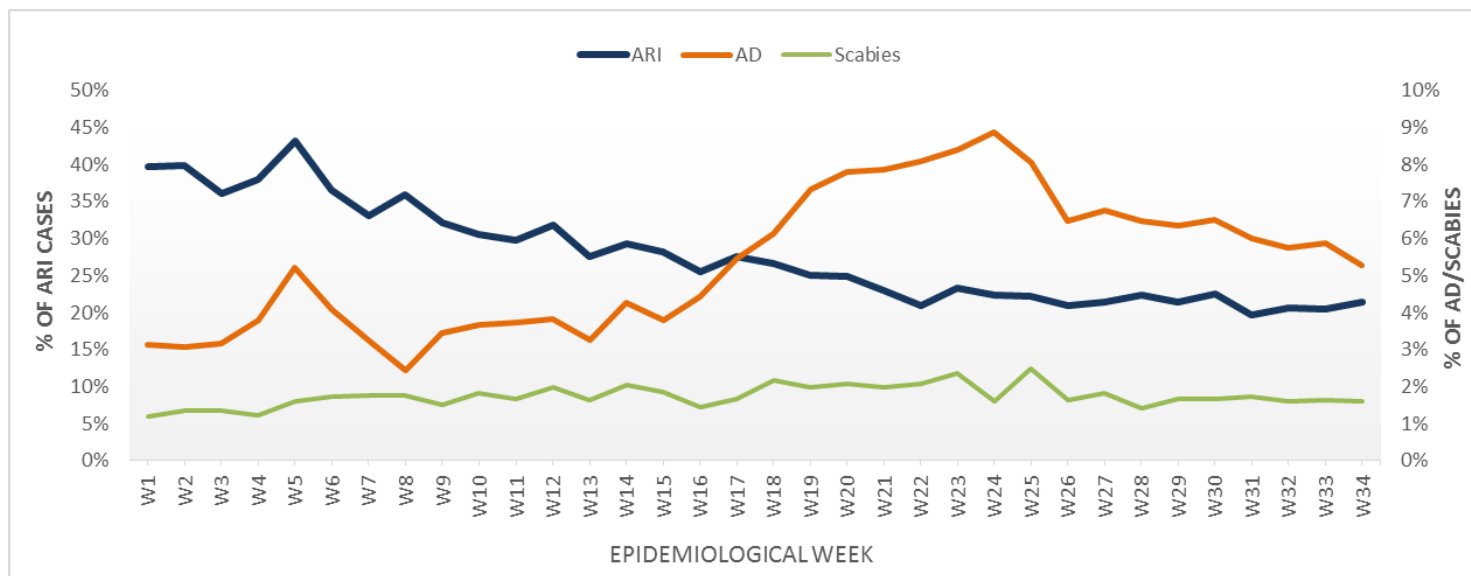


Figure IV: Trends of ARI, AD and Scabies in IDP camps in Iraq, Week 01-34, 2017

Refugee camps

The proportions of Acute Respiratory Tract Infections (ARI) decreased from 41% in Week 33 to 34% in Week 34; and skin infestations including Scabies increased from 5% in Week 33 to 10% in Week 34; whereas Acute Diarrhea (AD) remained the same since last week (Weeks 33 and 34=4%). (Figure V)

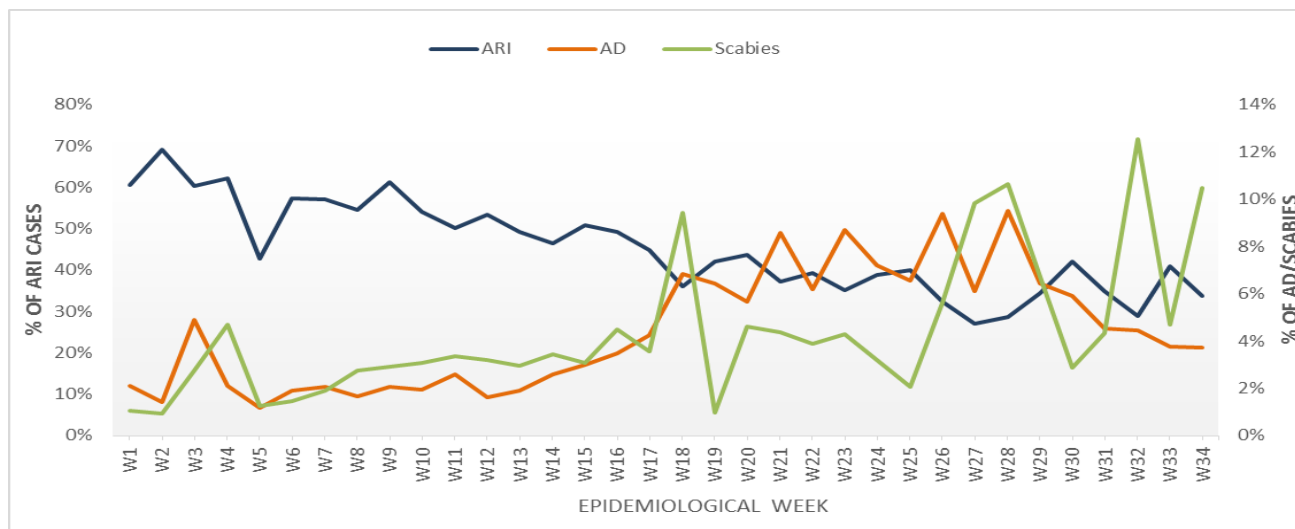


Figure V: Trends of ARI, AD and Scabies in Refugee camps in Iraq, Week 01-34, 2017

Distribution of the common diseases by proportion and location for IDP camps in Iraq

Figures VI and VII indicates the proportions and distribution of Acute Respiratory Tract Infection (ARI), Acute Diarrhea (AD) and skin infestations including Scabies, which comprises the highest leading causes of morbidity, reported through Static Health Facilities and Medical Mobile Clinics (MMCs) in IDP camps in Iraq, excluding Ninewa in Week 34.

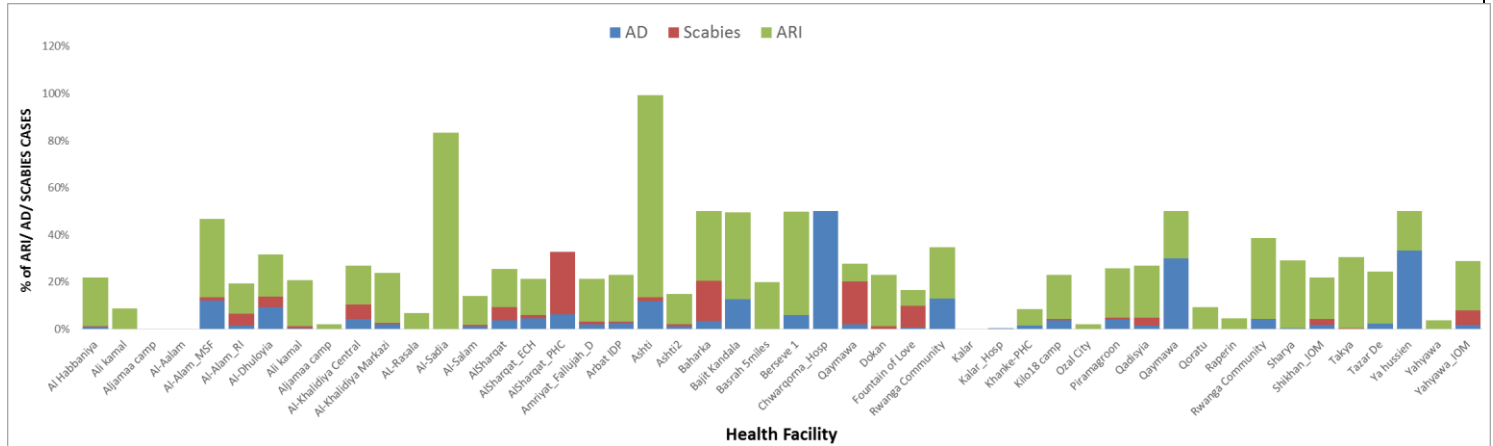


Figure VI: Proportion and distribution of ARI, AD and Scabies cases reported through Static Health Facilities in IDP camps in Iraq, excluding Ninewa

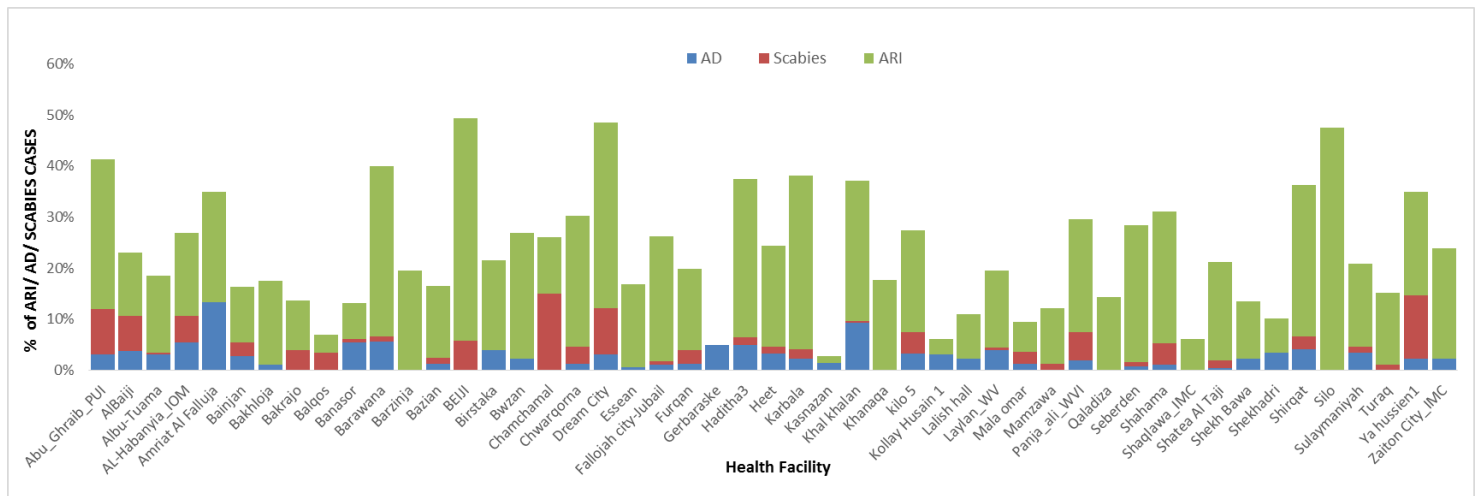


Figure VII: Proportion and distribution of ARI, AD and Scabies cases reported through MMCs in IDP camps in Iraq, excluding Ninewa

Distribution of the common diseases by proportion and location for IDP camps in Ninewa Governorate

Figure VIII and IX indicate the proportions and distribution of Acute Respiratory Tract Infection (ARI), Acute Diarrhea (AD) and skin infestations including Scabies, which comprises the highest leading causes of morbidity, reported through Static Health Facilities and Medical Mobile Clinics (MMCs) in IDP camps in Ninewa Governorate in Week 34.

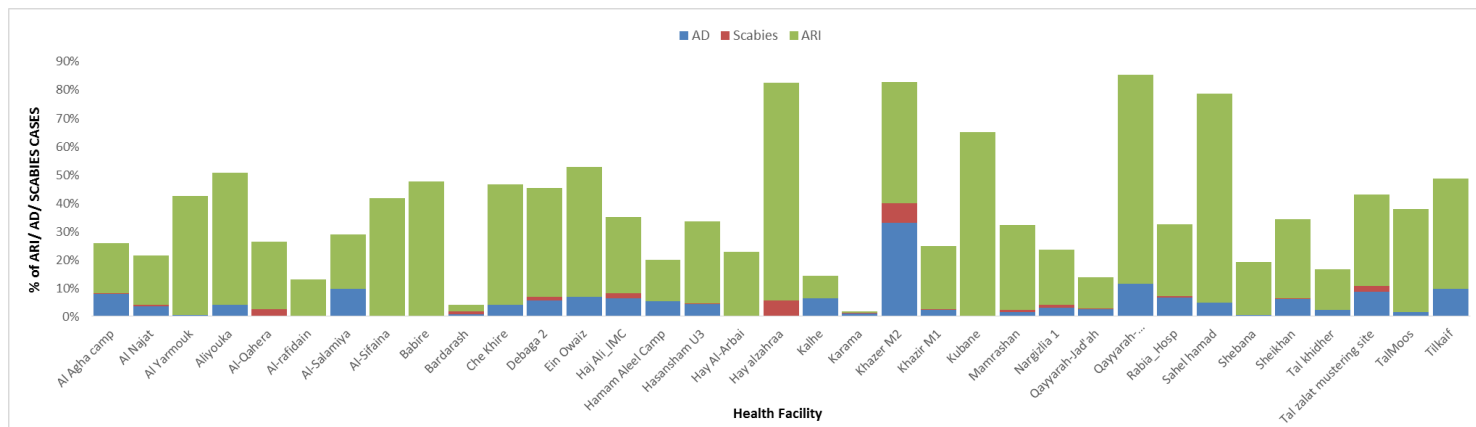


Figure VIII: Proportion and distribution of ARI, AD and Scabies cases reported through Static Health Facilities in IDP camps in Ninewa Governorate

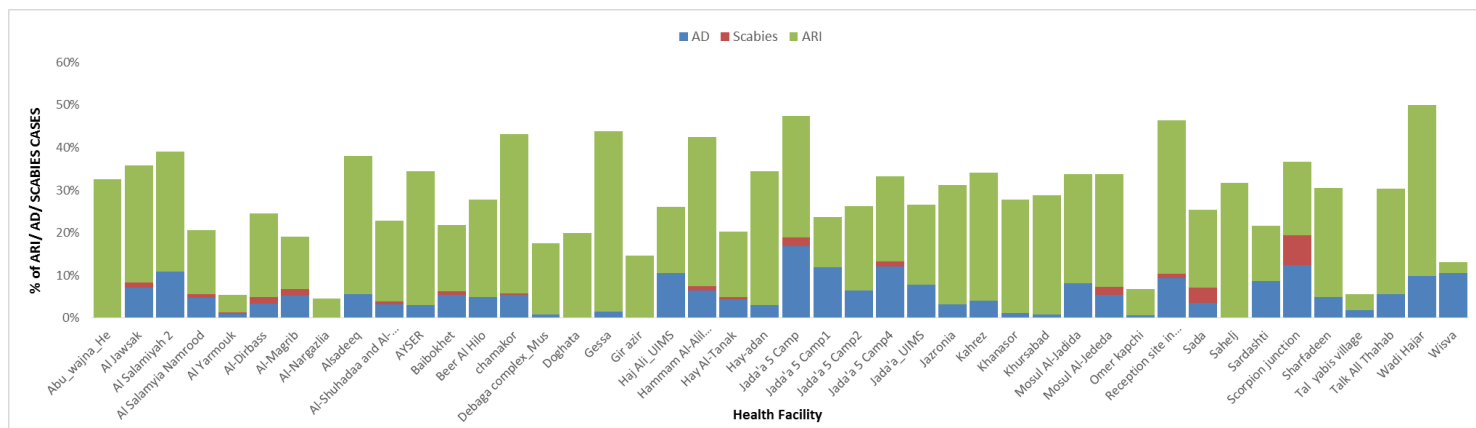


Figure IX: Proportion and distribution of ARI, AD and Scabies cases reported through MMCs in IDP camps in Ninewa Governorate

Trends of Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS) in IDP camps

Figure XII indicates the number of cases of Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS) reported in IDP camps by week, Week 01-34.

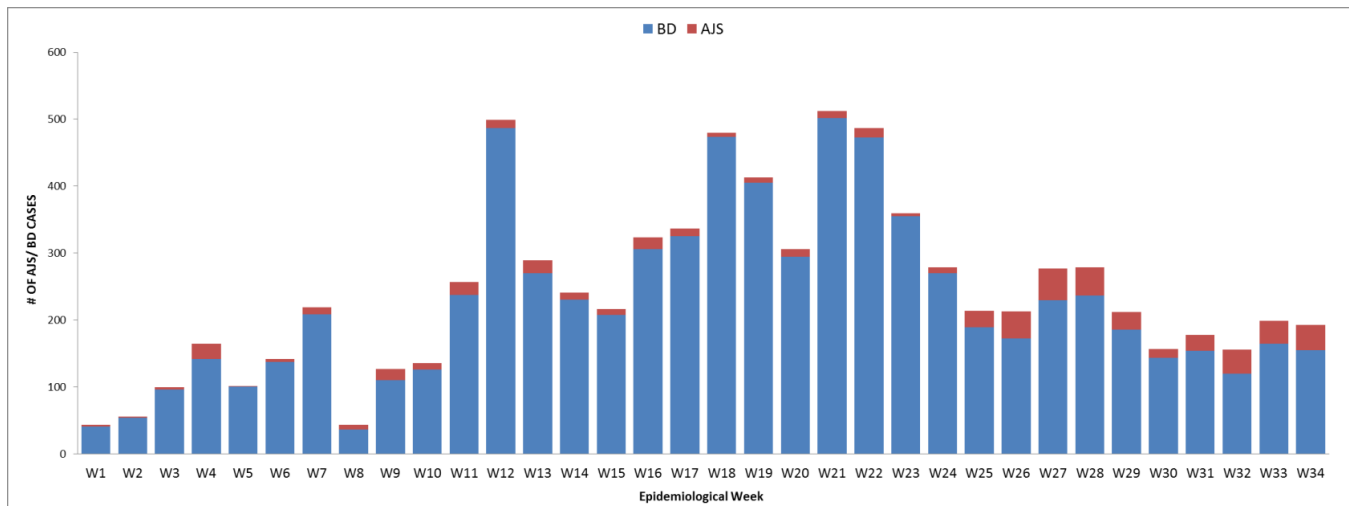


Figure XII: Distribution of waterborne diseases (BD and AJS) reported in IDP camps by week, Week 01-34, 2017

Trends of waterborne diseases in Refugee camps

Figure XIII indicates the distribution and proportion of waterborne diseases (Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS)) reported in refugee camps by week, Week 01-34.

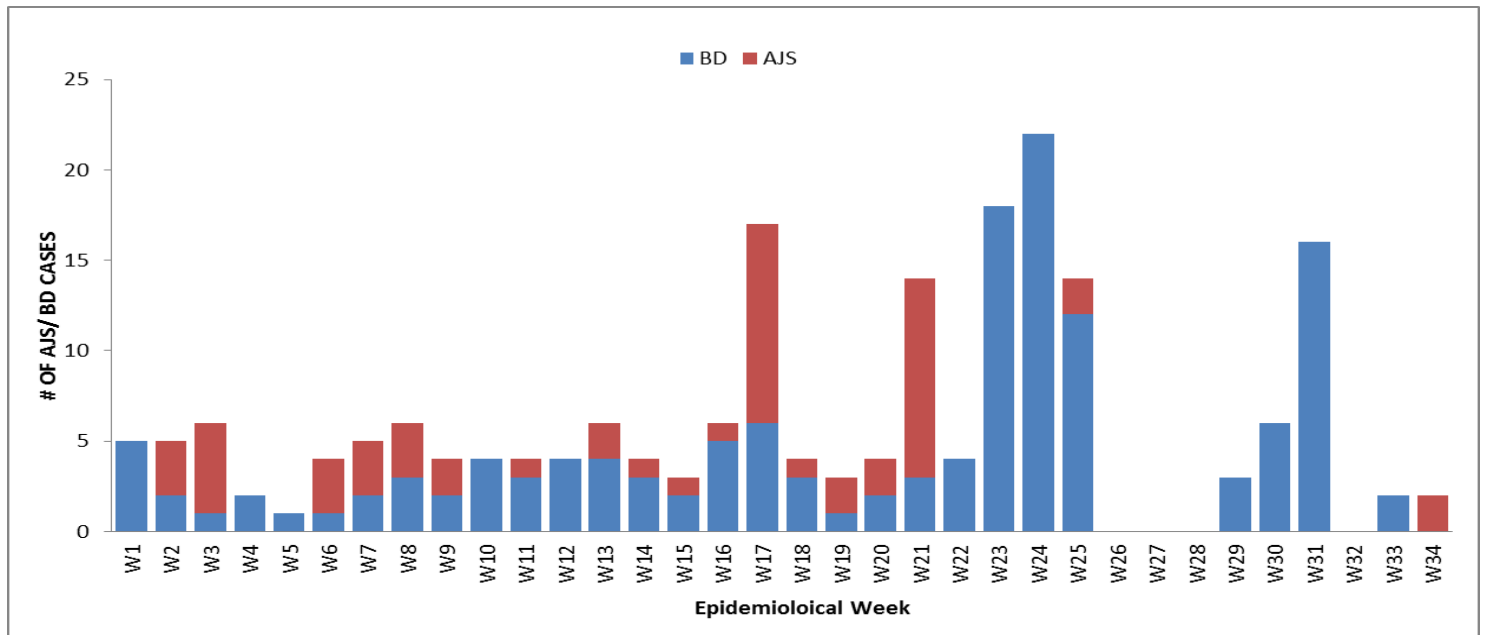


Figure XIV: Distribution of waterborne diseases reported in Refugee camps by week, Week 01-34, 2017

Alerts and Outbreaks

Two (2) alerts were generated during epidemiological Week 34 in Sulaymaniyah governorate. All alerts were investigated by Departments of Health, WHO and health partners in the field and responded to within 72 hours; The 2 suspected measles cases were verified as True.

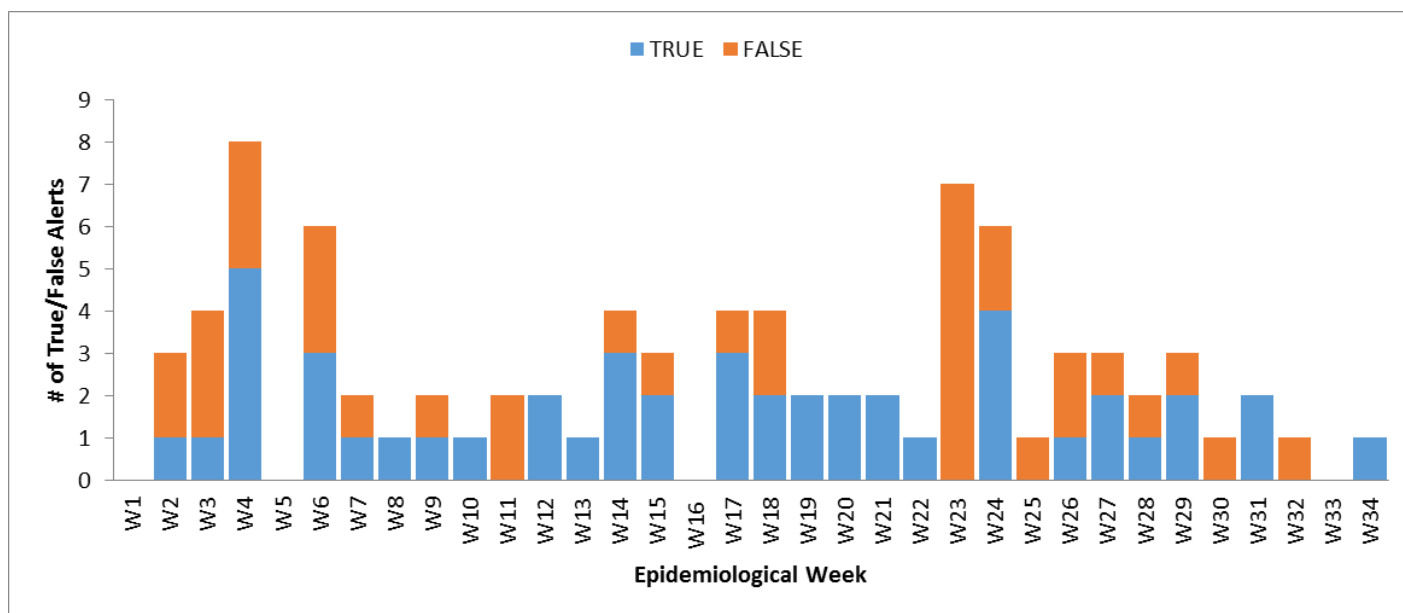


Figure XIV: Number of True/False Alerts received through EWARN per week, Week 01-34, 2017

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

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EWARN bulletins: <http://emro.who.int/irq/ewarns/index.html>