





Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 35 Reporting Period: 29 Aug - 04 Sep , 2016

Highlights

- Number of reporting sites: One hundred and ten (110) reporting sites (85% of the total EWARN reporting sites) including sixty (60) in internally displaced people's (IDPs) camps, four (4) in refugee camps and forty-six (46) mobile clinics submitted their weekly reports timely and completely.
- ♦ Total number of consultations: 36 611 (Male=16 255 and Female=19 856) marking a decrease of 2 043 since last week, (Total consultations in Week 34: 38 654).
- ♦ Leading causes of morbidity in the camps: Acute respiratory tract infections (ARI) (n=13 167), acute diarrhea (AD) (n=1 817) and skin diseases (n=1 617) remained the leading causes of morbidity in all camps and displaced population areas served by mobile clinics during this reporting week.
- ♦ Number of alerts: Six (6) alerts were generated through EWARN. Five alerts were reported from IDPs camp and one from refugee camp during this week. The alerts were investigated within 72 hours, of which five were verified as true and one false. They were responded by the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).

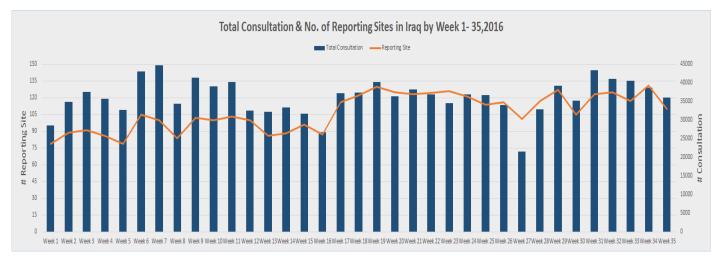
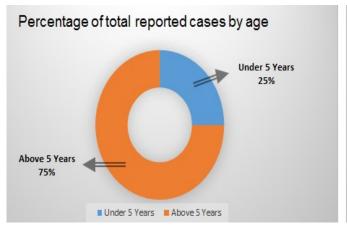
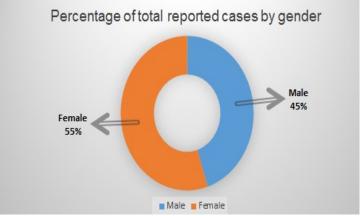


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 1-35, 2016

Distribution of total consultations in the camps by age and gender (Week 35, 2016)





Morbidity Patterns

IDPs camps:

During Week 35, the proportions of acute respiratory tract infections (ARI) and skin infestations including scabies in IDP camps decreased, while the trends of the acute diarrhea remained unchanged compared to the previous week (please see graph below).



Figure II: Distribution of the acute respiratory infection, scabies and acute diarrhea in IDPs camps, Week 1-35, 2016

Refugee camps:

During Week 35, the proportions of acute respiratory tract infections (ARI), acute diarrhea and skin infestations including scabies indicated a slight decrease from the previous week (please see graph below).



Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps, Week 1-35, 2016

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

The graph 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 IDPs camps for Week 35, 2016.

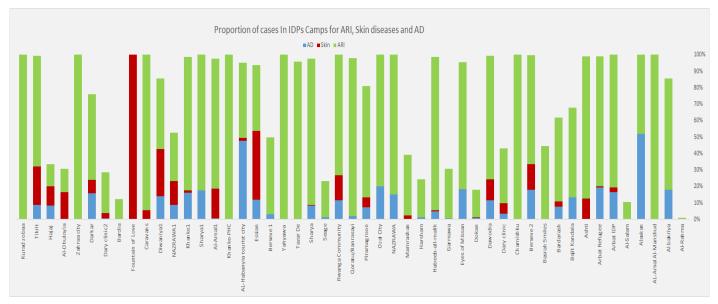


Figure IV: Proportion of cases of ARI, scabies and AD in IDPs camps for Week 35, 2016

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

The graph 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 35, 2016.

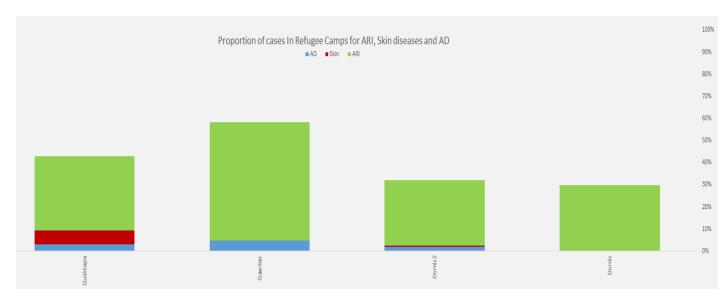


Figure V: Trend of proportions of cases of ARI, scabies and AD in tefugee camps for Week 35, 2016

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

The graph 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 the IDPs covered by mobile clinics for Week 35, 2016.

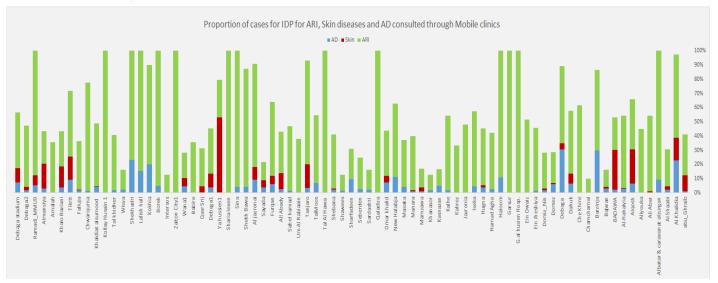


Figure VI: Distribution of ARI, scabies and AD covered by mobile clinics for the IDPs, Week 35, 2016

Trends of measles

There were 72 reported suspected measles cases from all the EWARN reporting sites during 2016. From Week 1 to Week 35, almost 38 (53%) of the cases have been sporadically reported from Sulaymaniyah. Peaks of the disease trend were observed during Week 7 and 17. This week, Sulaymaniyah reported 2 suspected measles cases, one from Arbat IDPs camp and the other from Ashti IDPs camp, and a third case was reported from Dohuk Governorate.

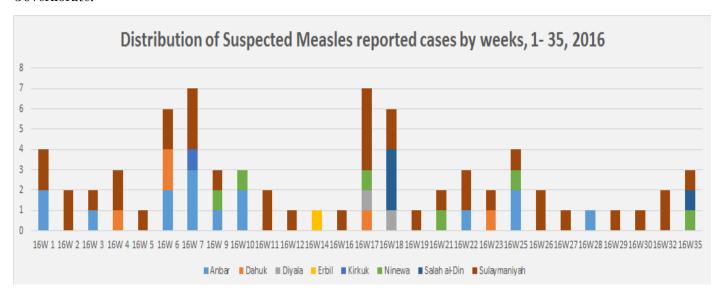


Figure VII: Distribution of suspected measles reported cases by governorate, Week 1-35, 2016

Trends of waterborne diseases in IDPs and refugee camps

The graph below shows the trends of waterborne diseases (acute diarrhea, acute bloody diarrhea and acute jaundice syndrome) reported from IDPs camps, which indicated a decrease, while refugee camps indicated an increase in waterborne diseases (please see graph below)

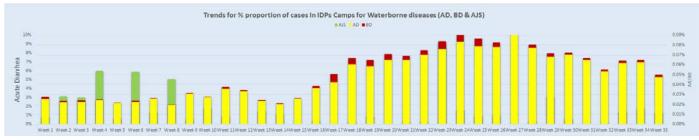


Figure VIII: Trend of waterborne diseases from IDPs camps, Week 1-35, 2016

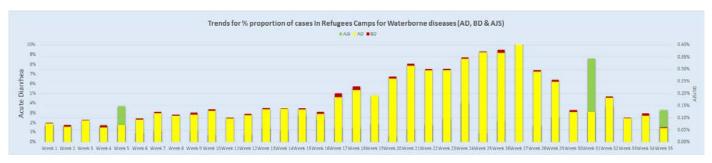


Figure IX: Trends of waterborne diseases from refugee camps, Week 1-35, 2016

Trends of Acute Diarrhoea

The graph below shows the trends of acute diarrhea reported in the period from Week 1 to Week 35 in 2015 and 2016 through the EWARN system. This week showed a decreasing trend of the diseases compared to the last weeks. During 2016, and from Week 1 to Week 35, Anbar reported 36% of total reported AD cases, followed by Dohuk with 21%, Ninewa 11%, Sulaymaniyah 9%, Erbil 8%, Kirkuk 5%, Baghdad 4%, and Salahuddin 3%.

The trend of the disease showed a peak in Week 24 (3 387 cases) and then another peak in Week 31 (3 079 cases). From Week 31 there is a decrease in the reporting of AD through all the EWARN reporting governorates.

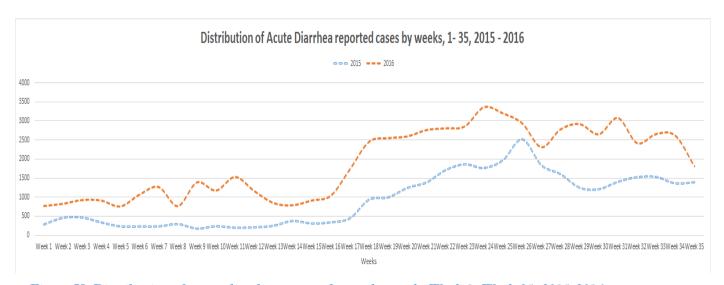


Figure X: Distribution of acute diarrhea reported cases by week, Week 1-Week 35, 2015-2016

Six alerts were generated through EWARN following the defined thresholds, of which five were from IDPs camps and one from refugee camp during this reporting week. All these alerts were investigated within 72 hours and five of them were verified as true and were responded by the respective Governorates Departments of Health, WHO and the relevant health cluster partners. (please see Alert and Outbreaks table). One alert verified as false.

Sr	Alert	Location	Governorate	District	IDP/Refugee Camp	# of cases	Run by	Investigation and Response within/48-72% DOH/WHO/NGO	Sample Taken Yes/No	Alerts Outcome True/False	Public Health Interventions Conducted
1	Suspected Measles	Arbat	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	TRUE	Yes
2	Suspected Leishmaniasis	Khanke	Dahuk	Dahuk	IDPs	1	DOH	Yes	No	FALSE	No
3	Suspected Measles	Gawilan	Dahuk	Dahuk	Refugees	1	PU-AMI	Yes	Yes	TRUE	Yes
4	Suspected Leishmaniasis	Al-Rahma	Salah-Al-Din	Dijlah	IDPs	1	UIMS	Yes	No	TRUE	Yes
5	Suspected Measles	Ashti IDP	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	TRUE	Yes
6	Suspected Meningitis	Kabarto 2	Dahuk	Dahuk	IDPs	1	IMC	Yes	Yes	TRUE	Pending

Trends of alerts

The graph below 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.

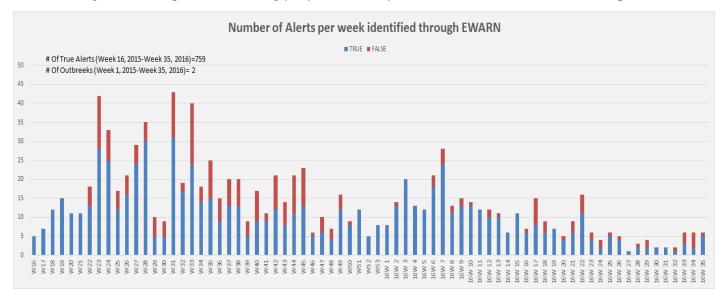


Figure X: Alerts generated through EWARN surveillance Week 16, 2015—Week 35, 2016

For comments or questions, please contact

- Dr. Adnan Nawar Khistawi | 07901948067 | adnannawar@gmail.com, Head of Surveillance Section, Federal MOH
- Dr. Janin Sulaiman | 07508678768 | Janin irg@yahoo.com, EWARN Focal Point, MOH-KRG
- Dr. Muntasir Elhassan | 07809288616 | elhassanm@who.int, EWARN Coordinator, WHO Iraq
- WHO EWARN Unit emacoirgewarn@who.int