



Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 37

Reporting Period: 12 – 18 September, 2016

Highlights

- ◆ **Number of reporting sites in Week 37:** One hundred and one (101) reporting sites (78% of the total EWARN reporting sites) including sixty seven (67) reporting sites in internally displaced persons (IDP) camps, five (5) reporting sites in refugee camps and twenty nine (29) mobile clinics submitted their weekly reports completely and in a timely manner. The coverage of the reporting sites in this week and the previous week decreased due to Eid Aladha vacation.
- ◆ **Total number of consultations in Week 37:** 21,741 (male=10 091 and female=11 650) marking a decrease of 18,538 consultations compared to 40,279 total consultations in Week 36.
- ◆ **Leading causes of morbidity in the camps in Week 37:** Acute respiratory tract infections (ARI) (n=6 246), acute diarrhoea (AD) (n=1 124) and skin diseases (n=617) remained the leading causes of morbidity in all camps and areas hosting displaced populations served by mobile clinics during the reporting week.
- ◆ **Number of alerts in Week 37:** Two (2) alerts were generated through EWARN from IDP camps during the reporting week. The alerts were investigated within 72 hours, verified and responded to by relevant health cluster partners.

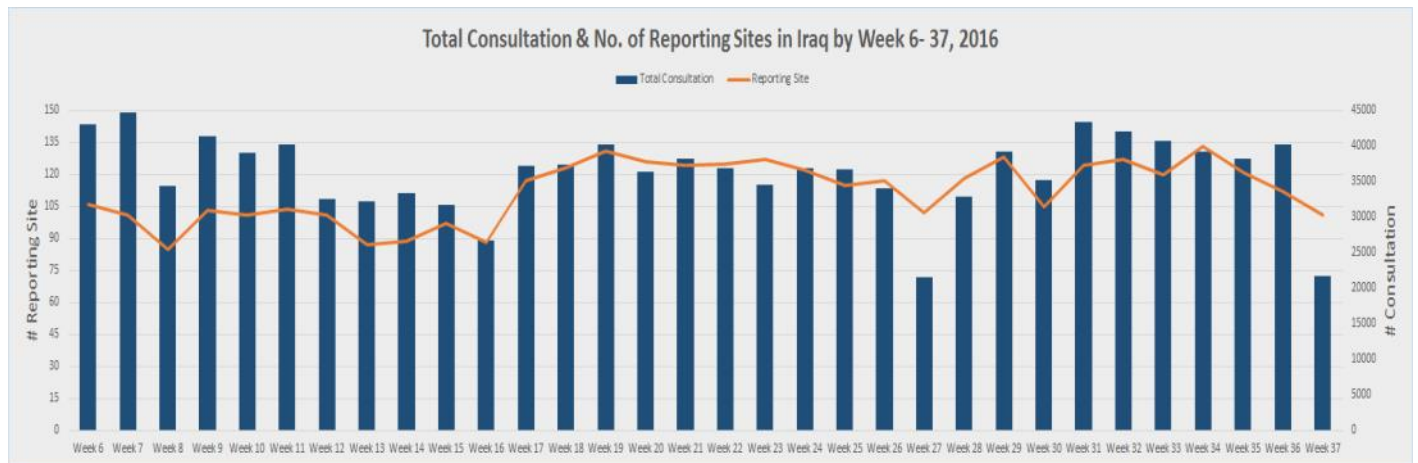
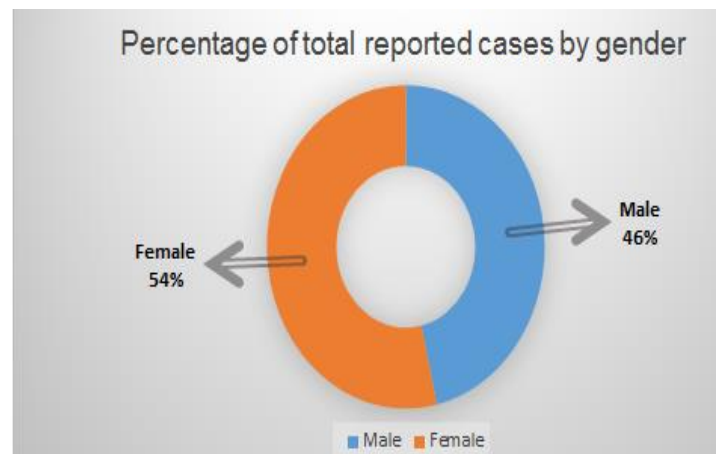
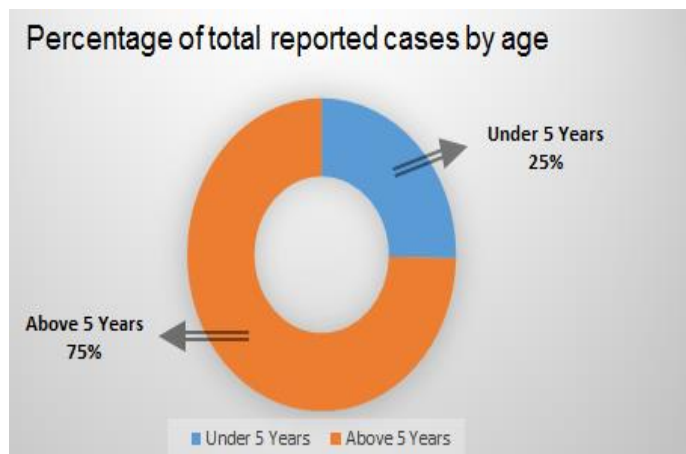


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 6–37, 2016

Distribution of total consultations in the camps by age and gender (Week 37, 2016)



Morbidity Patterns

IDP camps:

During Week 37, the proportions of acute respiratory tract infections (ARI), acute diarrhoea and skin infestations, including scabies, in camps for internally displaced persons increased compared to the previous week (see Figure II).

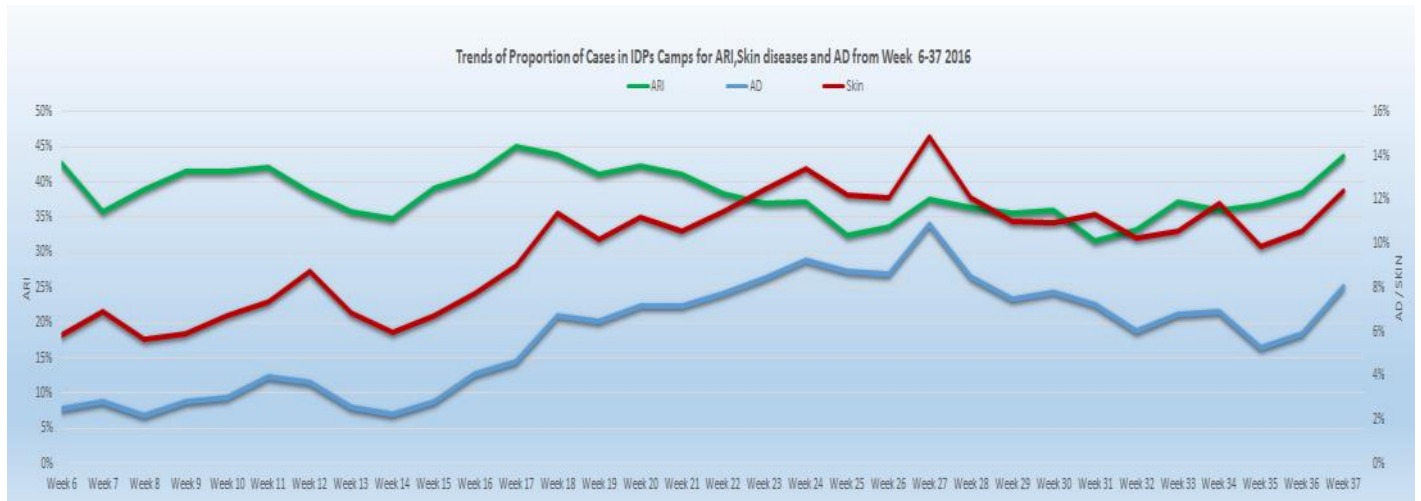


Figure II: Distribution of the acute respiratory infection, scabies and acute diarrhoea in IDPs camps, Week 6–37, 2016

Refugee camps:

During Week 37, the proportions of acute respiratory tract infections (ARI), acute diarrhoea and skin infestations, including scabies, indicated an increase from the previous weeks (see Figure III).

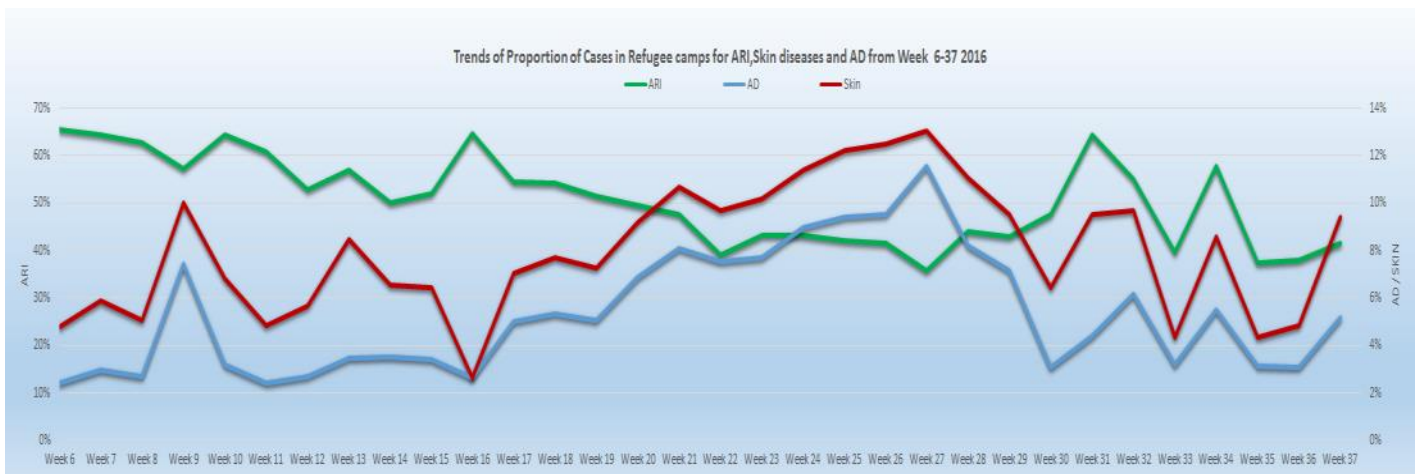


Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhoea in refugee camps, Week 6–37, 2016

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

Figure IV below indicates the proportions of acute respiratory tract infections, acute diarrhoea and skin infestations, including scabies, which comprise the highest leading causes of morbidity in camps for internally displaced persons for Week 37, 2016.

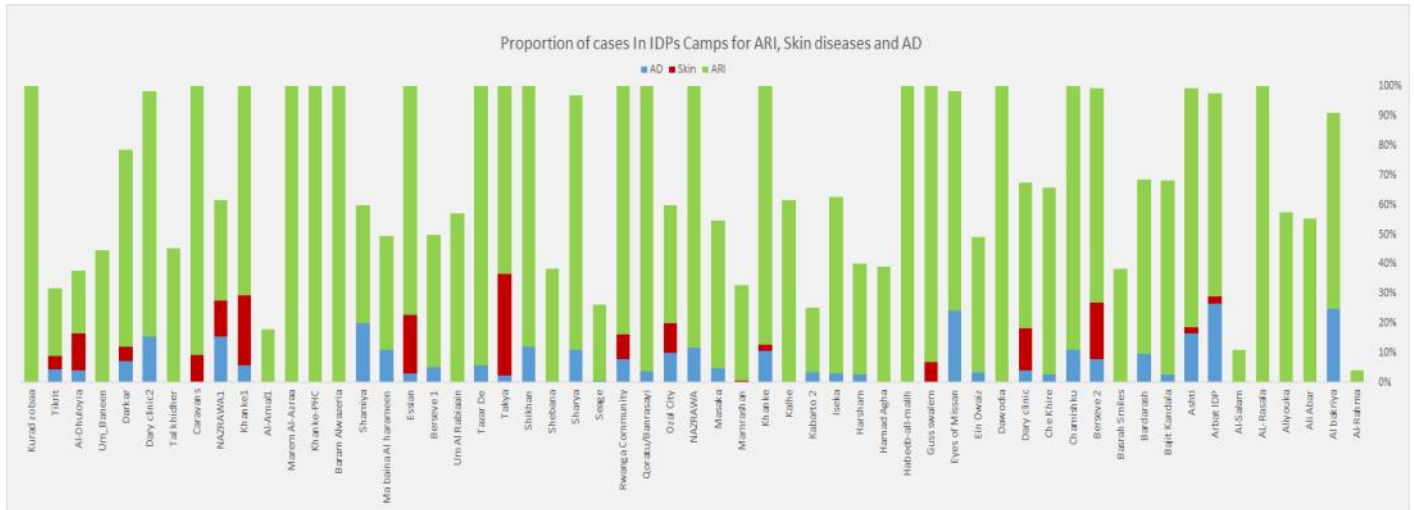


Figure IV: Proportion of cases of ARI, scabies and AD in IDPs camps for Week 37, 2016

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

Figure V below indicates the proportions of acute respiratory tract infections, acute diarrhoea and skin infestations, including scabies, which comprise the highest leading causes of morbidity in refugee camps for Week 37, 2016.

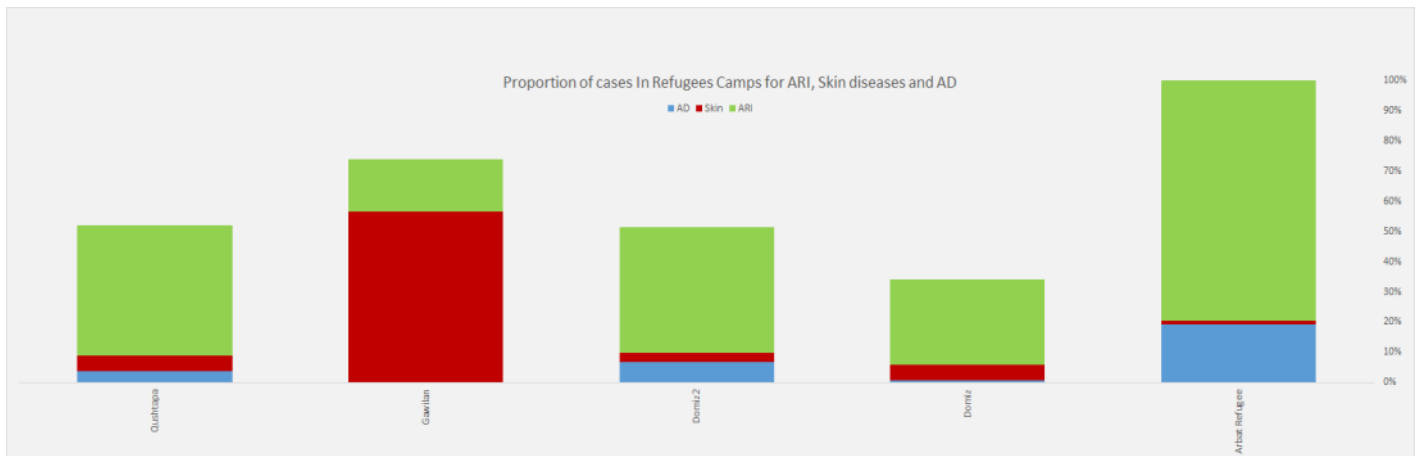


Figure V: Trend of proportions of cases of ARI, scabies and AD in tefugee camps for Week 37, 2016

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

Figure VI below indicates the proportions of acute respiratory tract infection, acute diarrhoea and skin infestations, including scabies, which comprise the highest leading causes of morbidity of internally displaced persons covered by mobile clinics for Week 37, 2016.

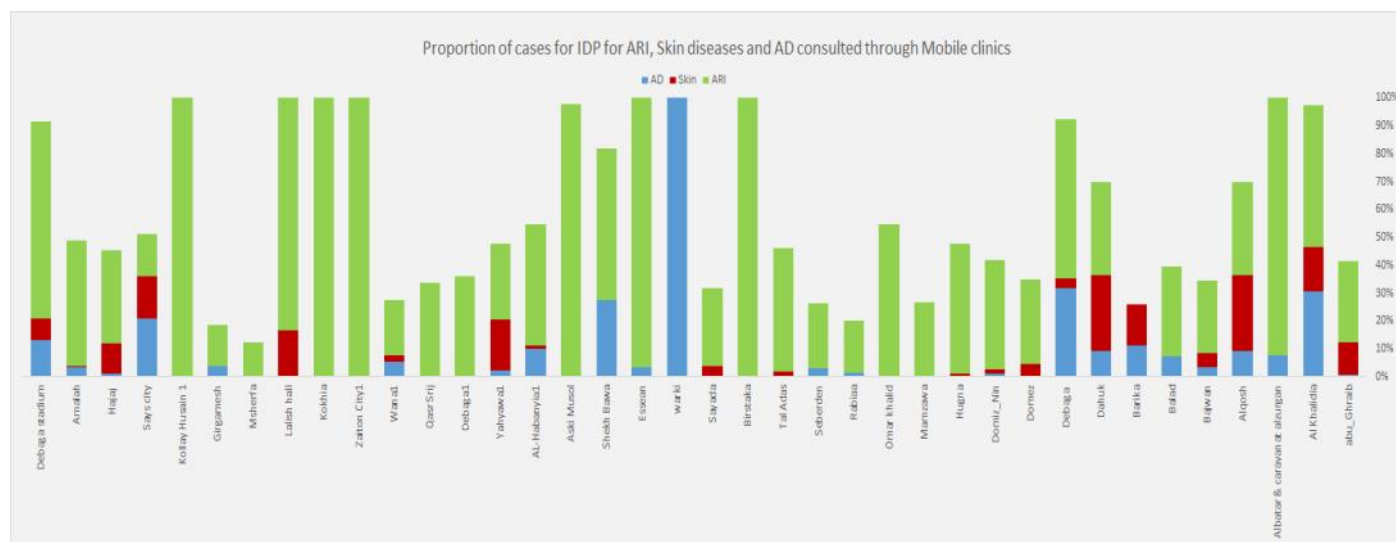


Figure VI: Distribution of ARI, scabies and AD covered by mobile clinics for IDPs, Week 37, 2016

Trends of measles

From Week 1 to Week 37, 4317 acute bloody diarrhoea cases were reported through the EWARN in Iraq, with the peak of cases (303 cases) reported in Week 24. The overall trend of the disease showed a decline cases. Anbar governorate reported 3051 cases (71%), followed by Duhok with 370 cases (9%), Ninewa with 286 cases (7%), Erbil with 200 cases (5%), Kirkuk with 165 cases (4%) and Sulaimaniya with 132 cases (3%).

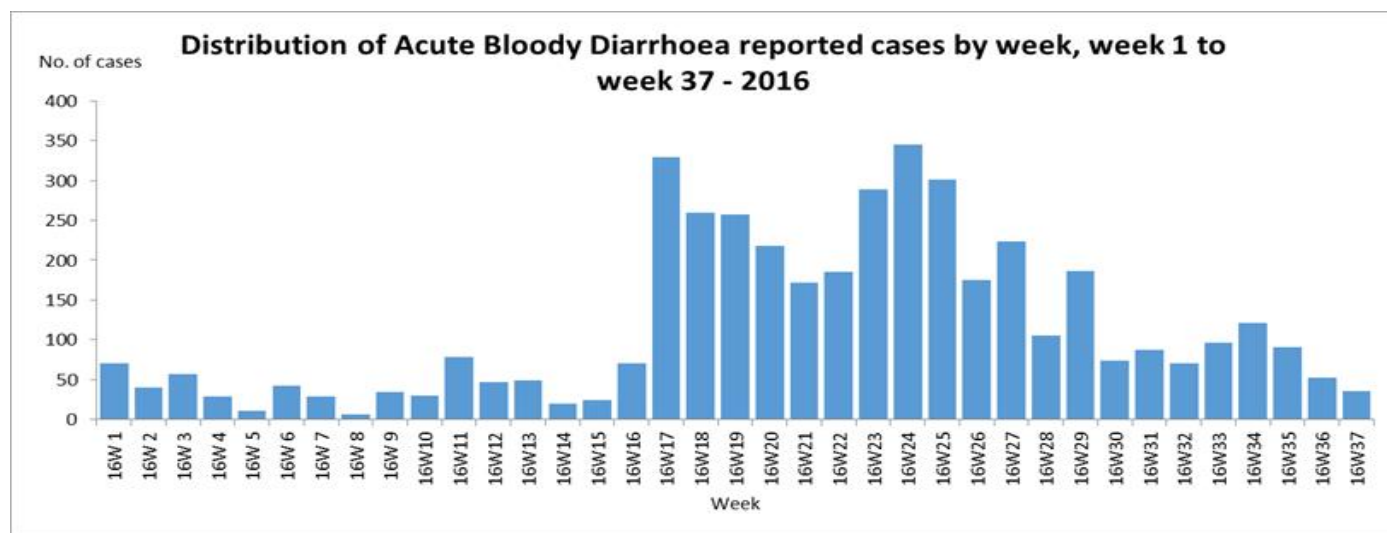


Figure VII: Distribution of acute bloody diarrhoea reported cases by week, Week 1– 37, 2016

Trends of waterborne diseases in IDPs and refugee camps

Figures VIII and IX below show a decreasing trend of waterborne diseases (acute diarrhoea, acute bloody diarrhoea and acute jaundice syndrome) reported from camps for internally displaced persons. Meanwhile, an increasing trend of waterborne diseases in refugee camps was reported from refugee camps.

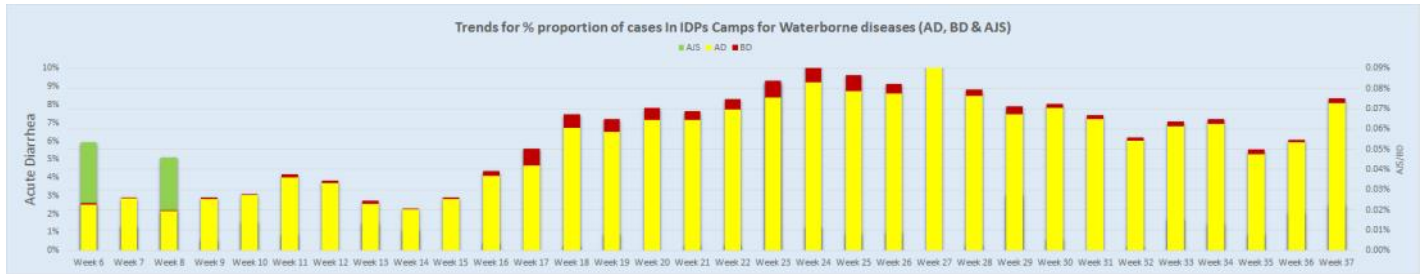


Figure VIII: Trend of waterborne diseases from IDPs camps, Week 6-37, 2016

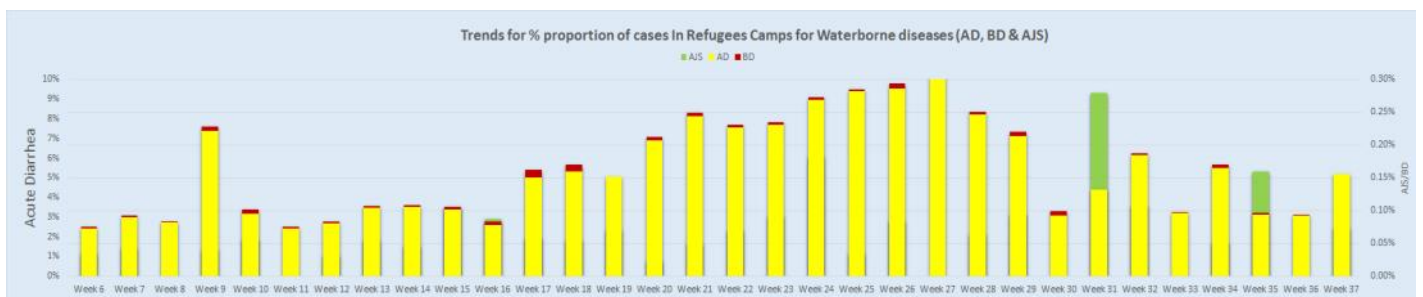


Figure IX: Trends of waterborne diseases from refugee camps, Week 6-37, 2016

Trends of Acute Diarrhoea

Figure X below shows the trends of acute diarrhoea reported from Week 6 to Week 37 in 2015 and 2016 through the EWARN system. Week 37 showed a decreasing trend compared to previous weeks. In 2016, 36% of total reported acute diarrhoea cases were from Anbar, followed by Dohuk with 21% of all cases, Ninewa with 11%, Sulaymaniyah with 9%, Erbil with 8%, Kirkuk with 5%, Baghdad with 4%, and Salahuddin with 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 to Week 37 there was a decreasing trend of acute diarrhoea in all governorates.

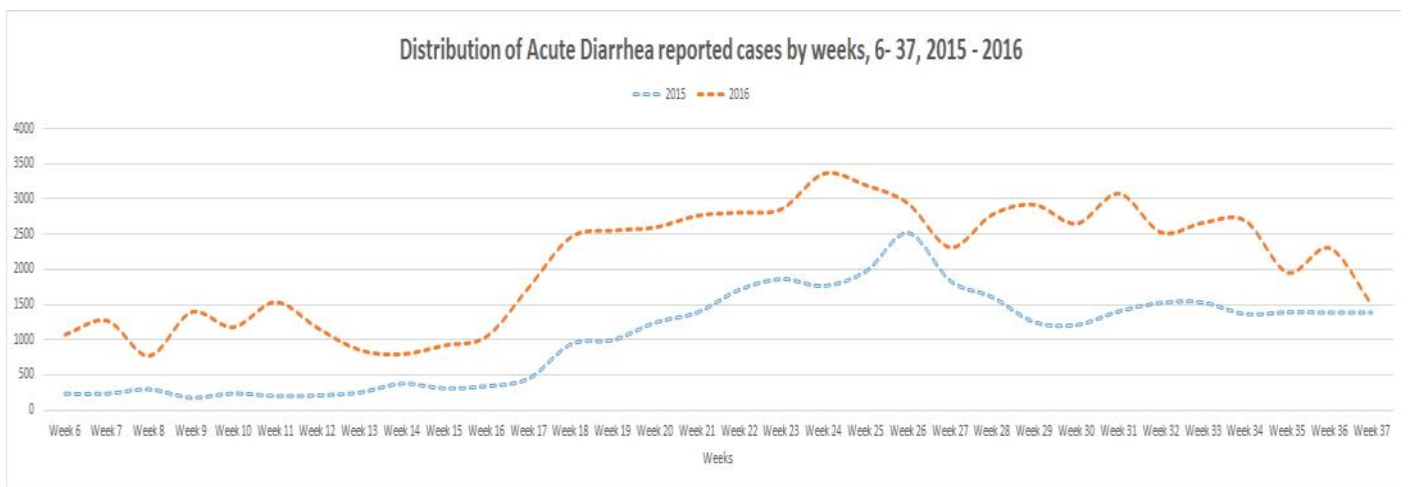


Figure X: Distribution of reported cases of acute diarrhoea by week, Week 6–Week 37, 2015-2016

Two alerts were generated through EWARN according to defined thresholds. One alert for Acute Flaccid Paralysis originated from a hospital in Anbar Governorate, and the second alert for suspected measles originated from a camp for internally displaced persons in Sulaymaniyah Governorate. Both alerts were investigated within 72 hours, verified as true and responded to by the Departments of Health of the respective Governorates, WHO and the relevant health cluster partners (see table below).

Sn	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	Acute Flaccid Paralysis (AFP)	Ameriyah Alfalluja general Hospital	Anbar	Fullaja	Hospital	1	DoH	Yes	Yes	TRUE	Yes
2	Suspected Measles	Ashti IDP	Sulaymaniyah	Arbat	IDPs	2	EMERGENCY	Yes	Yes	TRUE	Yes

Trends of alerts

Figure XI below shows the number of EWARN alerts (true & false) generated per week which were investigated and responded to accordingly by the Ministry of Health, WHO and health cluster partners.

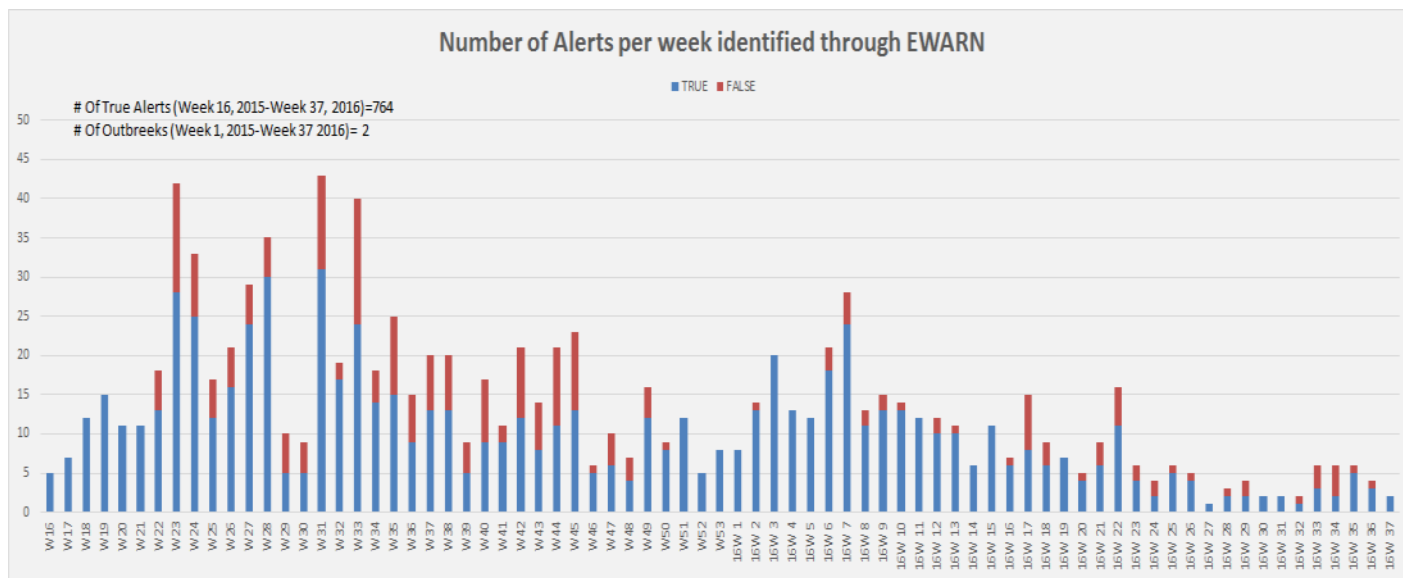


Figure XI: Alerts generated through EWARN surveillance Week 16, 2015—Week 37, 2016

For comments or questions, please contact

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