



# Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 45

Reporting Period: 7 – 13 November , 2016

## Highlights

- ◆ **Number of reporting sites in Week 45:** One hundred and forty-five (145) reporting sites (97% of the total EWARN reporting sites) including Eighty-four (84) in internally displaced persons (IDPs) camps, seven(7) in refugee camps and fifty (50) mobile clinics, all submitted their weekly reports completely and on timely manner.
- ◆ **Total number of consultations in Week 45:** 51,074 (Male=23,440 and Female=27,634) marking an increase of 3235 compared to last week.
- ◆ **Leading causes of morbidity in the camps in Week 45:** Acute respiratory tract infections (ARI) (n=24,598), acute diarrhoea (AD) (n=3,088) and skin diseases (n=1,512), remained the leading causes of morbidity in all camps and displaced population areas served by mobile clinics during this reporting week.
- ◆ **Number of alerts in Week 45:** Fourteen(14) alerts were generated through EWARN. 13alerts were reported from IDPs camps and one from Hospital during this week. The alerts were investigated within 72 hours, of which twelve were verified as true and two as false . They were responded to by the relevant health cluster partners. (Details: see Alerts and

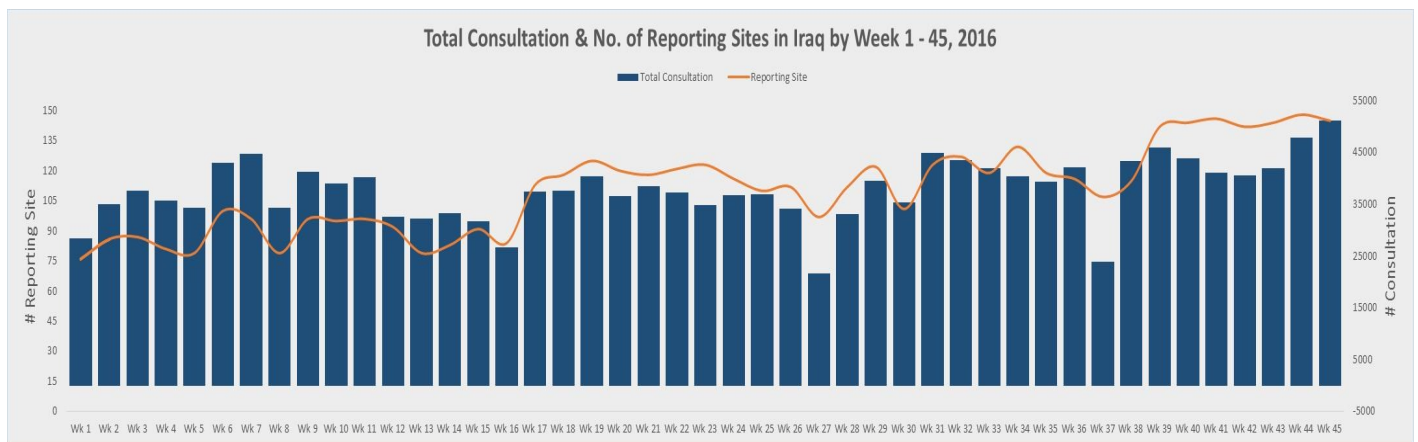
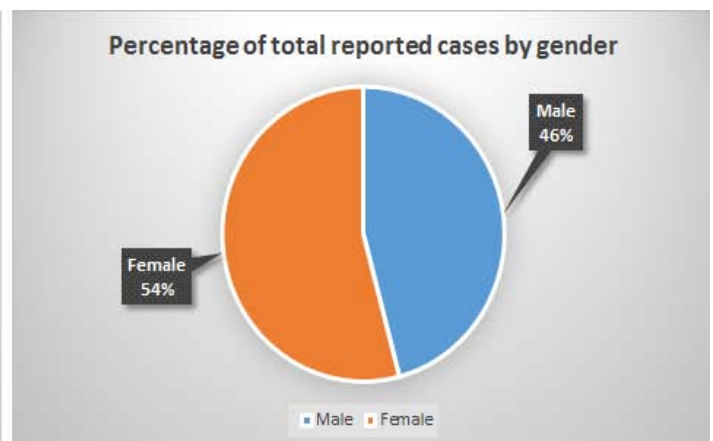
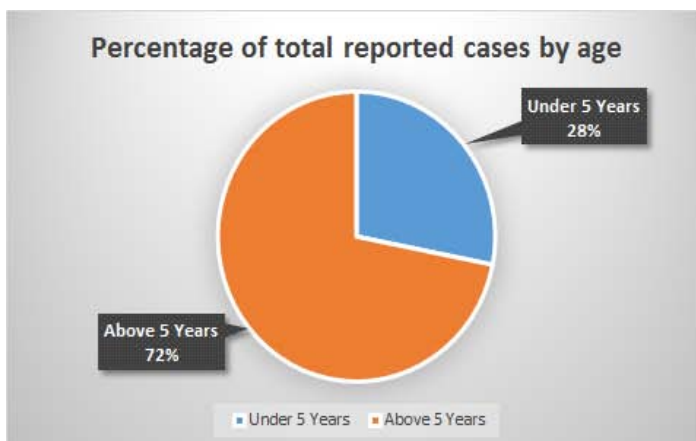


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 10–45, 2016

### Distribution of total consultations in the camps by age and gender (Week 45, 2016)

Out-



# Ninewa Governorate

## Highlights:

- ◆ In response to the ongoing Mosul operation which started on 17 October, a number of camps was established in Khazer, Hassansham, Zelikan and Gadaa. WHO and health partners providing health services started reporting through the EWARN.
- ◆ Health services were provided by DOHs and agencies in the new established camps. In addition the provision of health services to the northern part of Ninewa continue to be provided by the I/NGOs since 2015.
- ◆ Total consultations in Ninewa Governorate in week 45 stood at 10273
- ◆ Forty three reporting sites including 22 mobile medical clinics and 21 static clinics from 10 agencies (DOH, DAMA, DORCAS, HEEVIE, IMC, IOM, MEDAIR, MSF, PU-AMI and QRCS) submitted their weekly reports in time.
- ◆ One alert of suspected cutaneous leishmaniasis was received from WAHA organization in Haj Ali in Gayyara Health Sector.

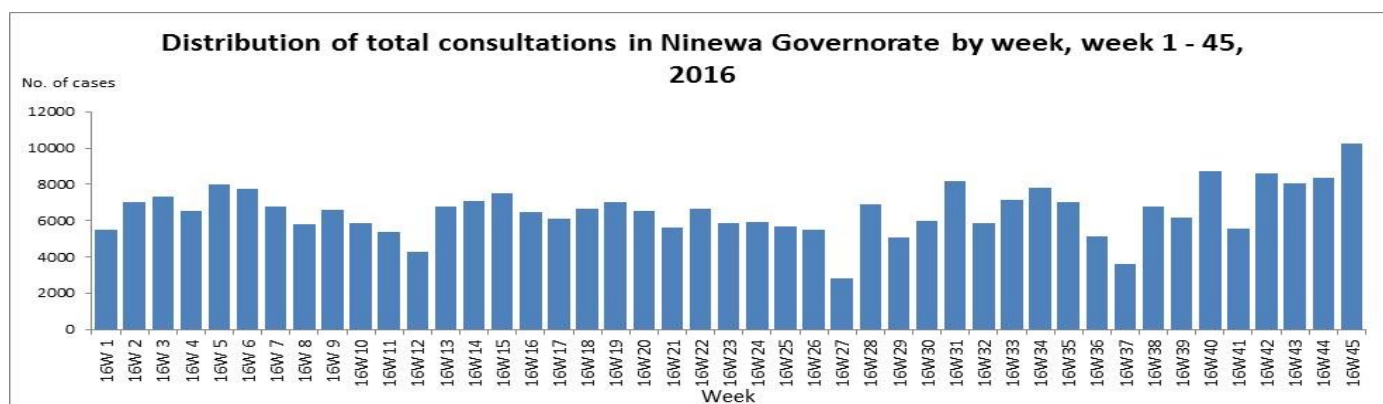


Figure II: Distribution of total consultations in Ninewa Governorate by week, week 1 - 45, 2016

## Common reported events:

- ◆ The most common reported disease events/ syndrome during week 45 in Ninewa department of health were acute respiratory infections (54%), acute diarrhoea (3%) and suspected scabies (2%). Please see the below table

Table I: Distribution of the common events/syndrome in Ninewa Department of Health, Week 45, 2016

District	Acute Respiratory Infections	Acute Diarrhoea	Suspected Scabies	Cutaneous Leishmaniasis	Other diseases
Akre	670	21	17	0	227
Al-Hamdaniya	668	197	61	0	209
Mosul	53	3	4	83	0
Shikhan	972	29	1	13	331
Sinjar	99	0	0	16	231
Telafar	2478	58	84	15	2187
Tilkaif	556	22	33	0	953
<b>Grand Total</b>	<b>5496</b>	<b>330</b>	<b>200</b>	<b>127</b>	<b>4138</b>

# Morbidity Patterns

## IDPs camps:

During Week 45, the proportions of acute respiratory tract infections (ARI) and skin infestations including scabies in internally displaced persons camps slightly increased, while the trends of the acute diarrhea continued decreasing compared to the previous weeks (please see Figure III).

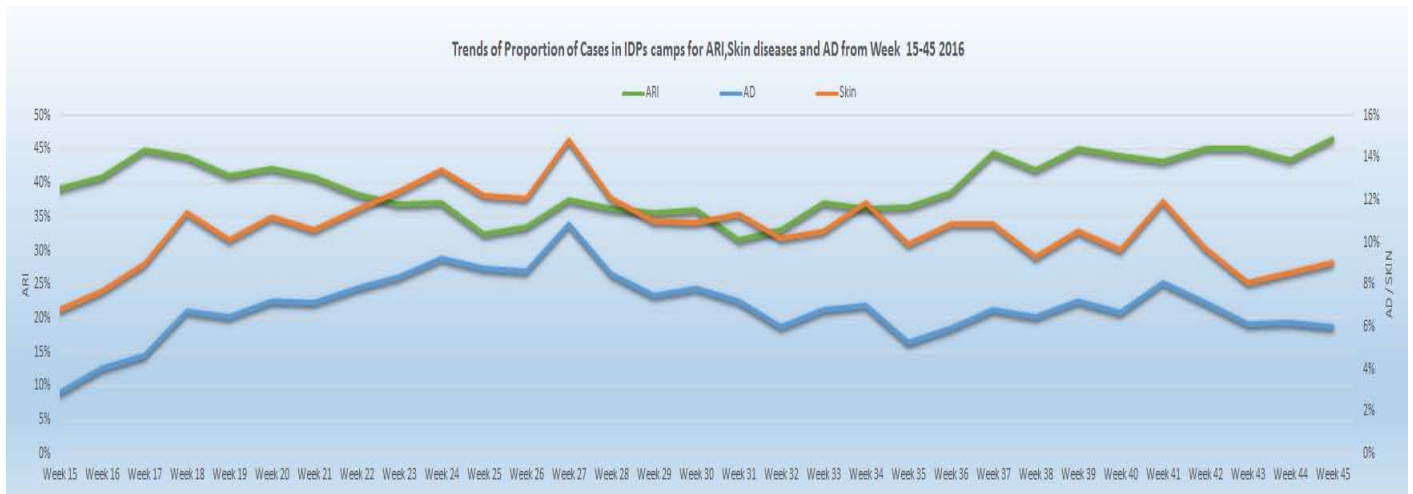


Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhea in IDPs camps, Week 15–45, 2016

## Refugee camps:

During Week 45, the proportions of acute respiratory tract infections (ARI), acute diarrhea and skin infestations including scabies indicated an increase from the previous week (please see Figure IV). The increase trend of the ARI is expected during the current winter season, and will be monitored by the reporting of each health facility.

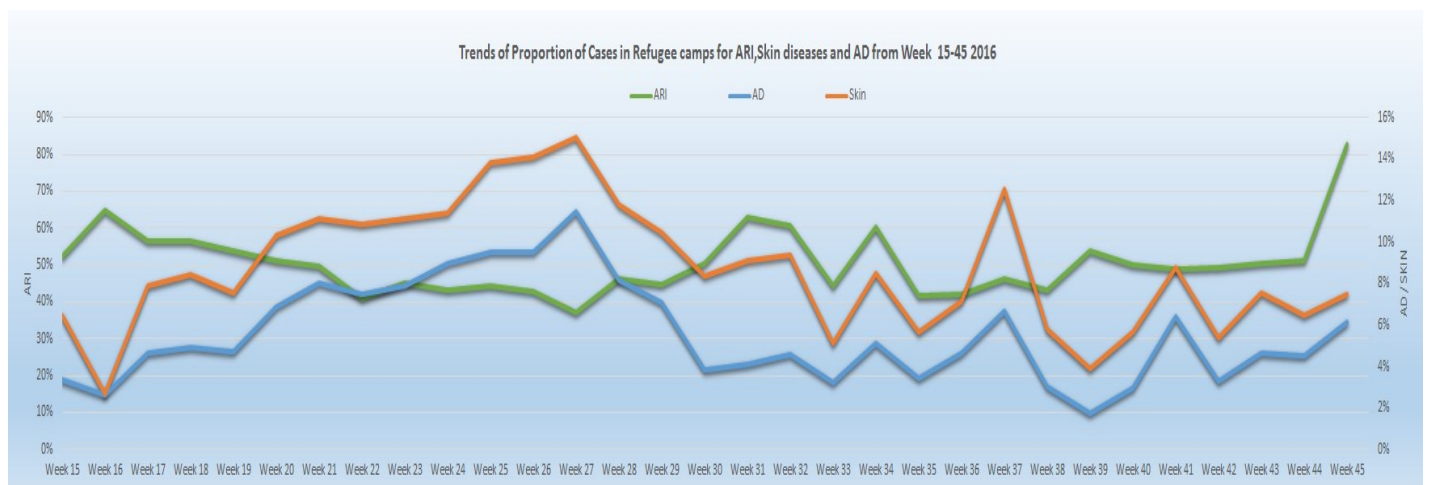


Figure IV: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps, Week 15–45, 2016

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

Figure V 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 camps for internally displaced persons for Week 45, 2016.

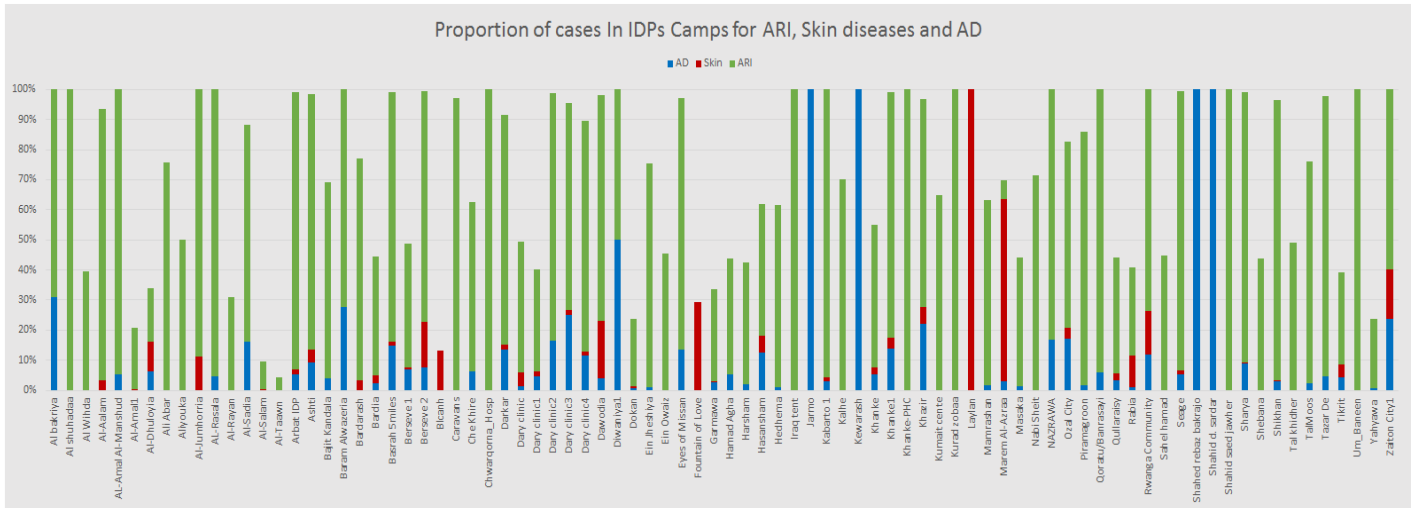


Figure V: Proportion of cases of ARI, scabies and AD in IDPs camps for Week 45, 2016

**Distribution of the common diseases by proportion and location for refugee 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 the refugee camps for Week 45, 2016.

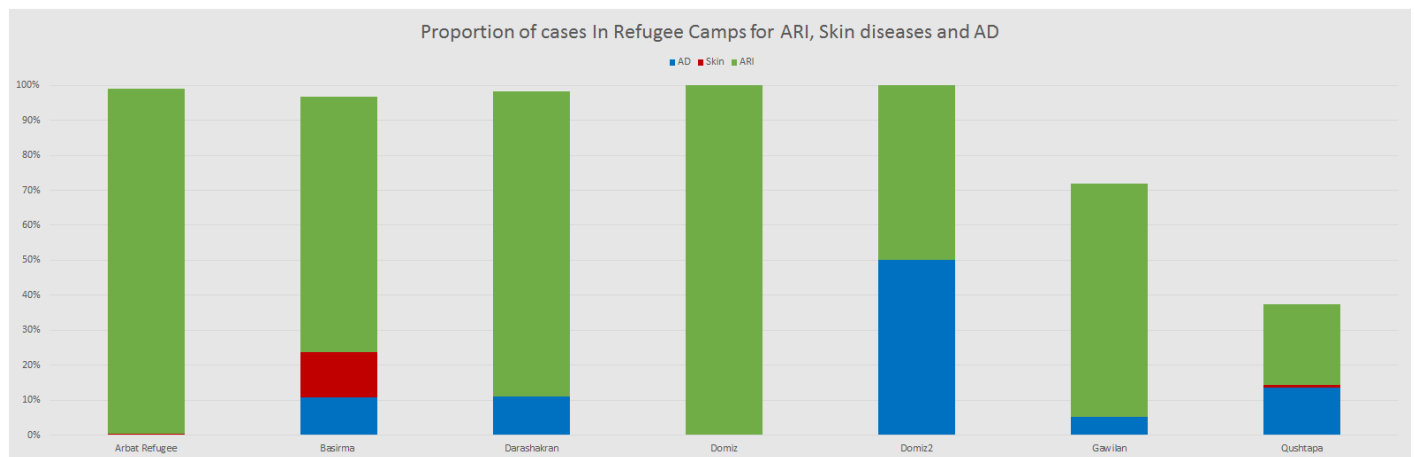


Figure VI: Trend of proportions of cases of ARI, scabies and AD in Refugee camps for Week 45, 2016

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

Figure VII 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 internally displaced persons covered by mobile clinics for Week 45, 2016.

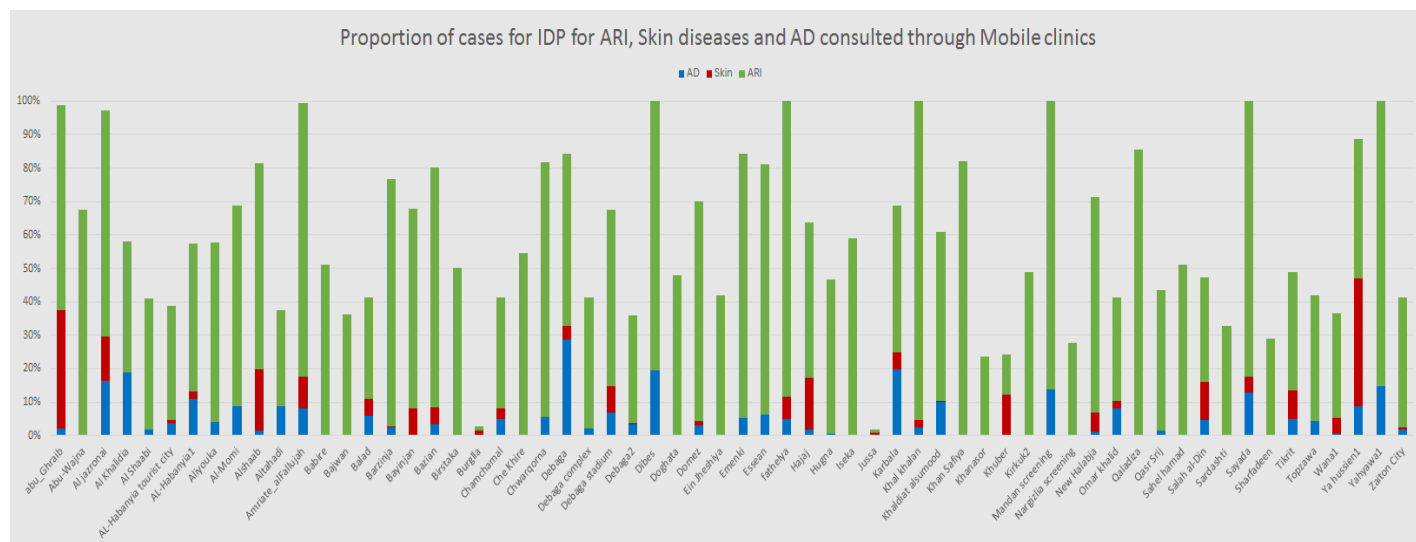


Figure VII: Distribution of ARI, scabies and AD covered by mobile clinics for the IDPs, Week 45, 2016

**Trends of Acute Diarrhoea**

Figure VIII below shows the trends of acute diarrhea reported in the period from Week 15 to Week 45 in 2015 and 2016 through the EWARN system. This week showed an increase in the trend compared to last weeks, considering the increase in the reporting sites. During 2016, and from Week 6 to Week 40, Anbar reported 36% of total reported AD cases, followed by Dohuk with 21%, Ninewa 11%, Sulaymaniyah 9%, Erbil 8%, Kirkuk 5%, Baghdad 4%, and Salah Al din 3%.

The trend of the disease showed a peak in Week 24 (3387 cases) and then another peak in Week 31 (3079 cases). From Week 31 there is a decrease in the reporting of AD through all the EWARN reporting governorates.

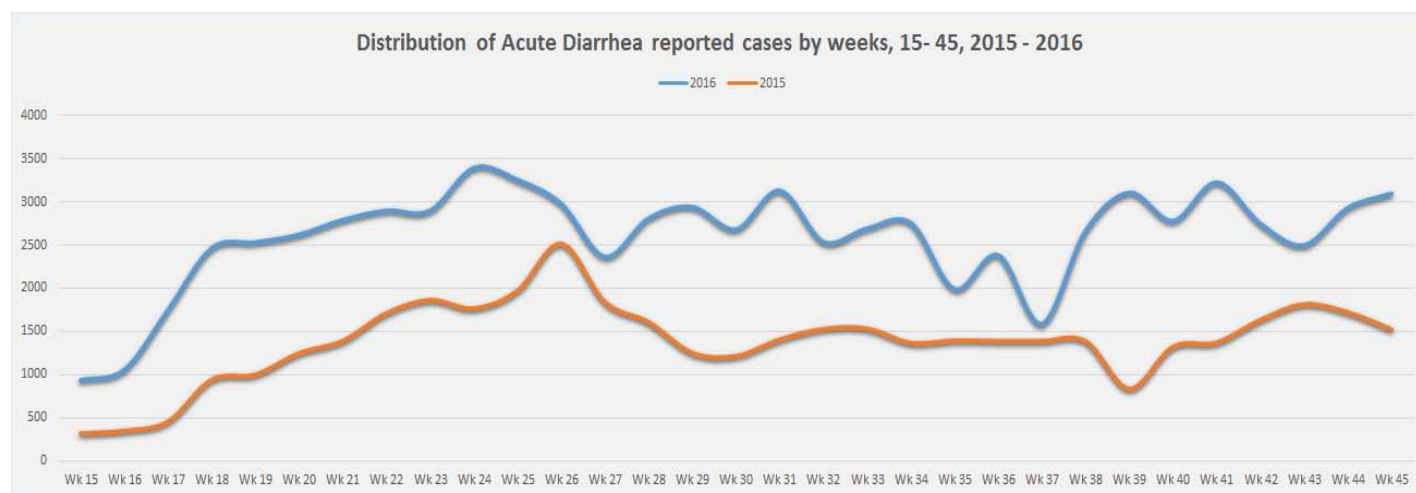


Figure VIII: Distribution of suspected Pertussis reported cases by governorate, Week 1– 45, 2016

Fourteen alerts were generated through EWARN following the defined thresholds, of which 13 were from IDPs Camp and one from Hospital during this reporting week. All these alerts were investigated within 72 hours; twelve were verified as true and responded to by the respective Governorate Departments of Health, WHO and the relevant health cluster partners. (please see Alert and Outbreaks table).

The first alert generated from Mosul district was in week 45. WAHA reported unusual cutaneous leishmaniasis cases among the internally displaced persons in Haj Ali school settlements. Outbreak investigation team arrived from Gayyara health sector where 83 reported cases were fitting the cutaneous leishmaniasis case definition. In response to the situation, WHO released medications for the health sector. The medical doctor and the supportive staff in Haj Ali primary Health Care center mentioned that sporadic cases of cutaneous leishmaniasis were seen by the doctor but patients have to buy their treatment from the private pharmacy in Haj Ali.

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 Leishmaniasis	Sheikhan	Dahuk	Sheikhan	IDPs	5	IOM	Yes	No	TRUE	Yes
2	Suspected Leishmaniasis	Al-Rahma	Salah-Al-Din	Dijlah	IDPs	4	UIMS	Yes	No	TRUE	Yes
3	Suspected Leishmaniasis	Al-Jumhorria	Salah-Al-Din	Tuz	IDPs	3	DoH	Yes	No	TRUE	Yes
4	Visceral Leishmaniasis	Kalar	Sulaymaniyah	Kalar	hospital	16	DoH	Yes	No	FALSE	No
5	Suspected Leishmaniasis	Tazar De	Sulaymaniyah	Arbat	IDPs	4	EMERGENCY	Yes	No	TRUE	No
6	Suspected Leishmaniasis	Carvans	Kerbala	Kerbala	IDPs	3	DoH	Yes	No	TRUE	No
7	Suspected Leishmaniasis	Al-Taawn	Salah-Al-Din	Al-Muatsem	IDPs	2	UIMS	Yes	No	TRUE	Yes
8	Suspected Leishmaniasis	Al-Dhuloyia	Salah-Al-Din	Salah al-Din	IDPs	1	UIMS	Yes	No	TRUE	Yes
9	Suspected Leishmaniasis	Debaga	Erbil	Makhmur	IDPs	1	Other	Yes	No	TRUE	Yes
10	Suspected Measles	Arbat	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	FALSE	No
11	Suspected Leishmaniasis	Sayada complex	Kirkuk	Kirkuk	IDPs	1	MC-Medair	Yes	Yes	TRUE	Yes
12	Suspected Leishmaniasis	Al Shabbi	Kirkuk	Kirkuk	IDPs	1	MC-Medair	Yes	Yes	TRUE	Yes
13	Suspected Leishmaniasis	Al-Salam	Anbar	Ameriyat-Fullujah	IDPs	1	UIMS	Yes	No	TRUE	No
14	Suspected Leishmaniasis	Haj Ali	Ninewa	Mosul	IDPs	83	WAHA	Yes	Yes	TRUE	Yes

## 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.

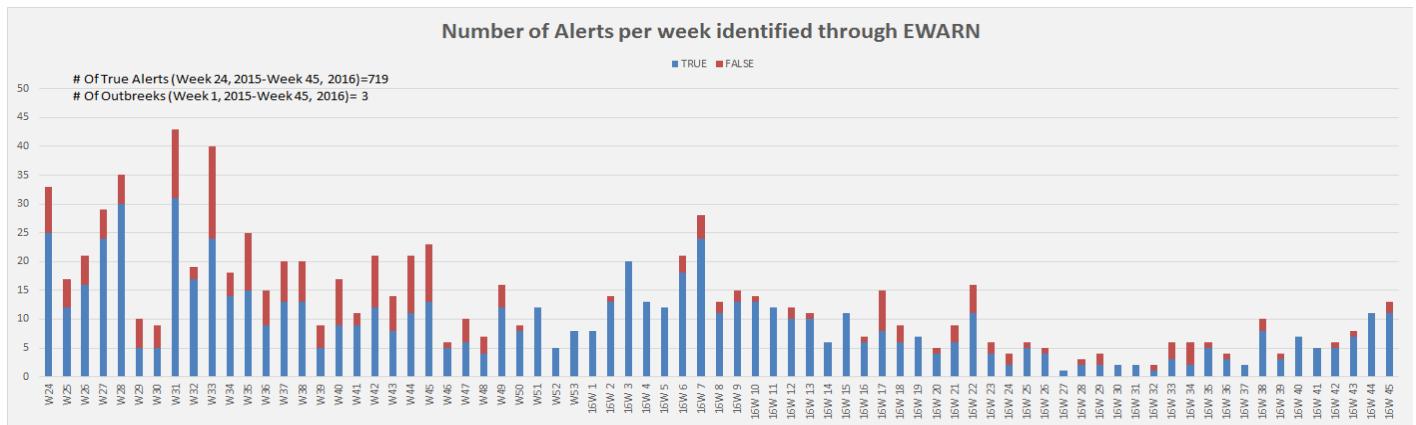


Figure IX: Alerts generated through EWARN surveillance Week 16, 2015—Week 45, 2016

### For comments or questions, please contact:

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

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