IRAQ: Early Warning and Disease Surveillance Bulletin

<u>Epidemiological Week 51</u> Reporting Period: 15 - 21 December 2014

Overview

- In this reporting period (week 51), one new health facility (Mobile Clinic serving IDPs in Dahuk Governorate) was added as a reporting site in the EWARN system bringing the total reporting sites to 18
- Sixteen (16) reporting sites including seven refugee and nine IDP sites submitted their weekly reports in time this week.
- The number of consultations decreased by 4.4% from 11,534 in week 50 to 11,024 in Week 51. This brings the number of consultations recorded in the reporting sites since the EWARN system was initiated to 132,731
- WHO in close collaboration with the Ministry of Health is in the process of upgrading the EWARN system to an electronic format. The new electronic EWARN system is due to be launched in mid-January 2015. The upgrade will be an opportunity to expand the network to all primary healthcare centers serving IDPs, refugees and affected host communities.

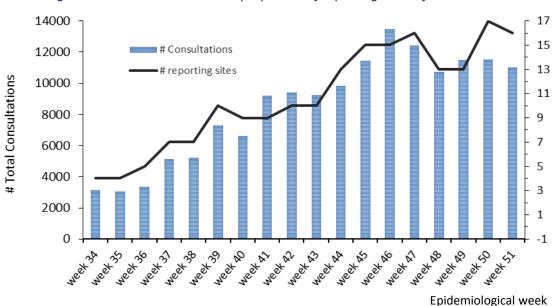


Figure 1: Total consultations and proportion of reporting health facilities since week 34

Morbidity patterns

 Acute Respiratory Infection (ARI) and Acute Diarrhoea (AD) remained the leading causes of morbidity during the current reporting period with 3,234 and 306 cases representing 29.3% and 2.8% of the total consultations in week 51 from all reporting sites.

- ARI and AD decrease by 13.4% and 17.3% in comparison to week 50 respectively. (Figure II).
- Bajit Kandala IDP camp continued to account for the highest number of reported cases of AD and ARI cases. In spite of a decrease in the number of cases reported in the camp in week 51, a total of 1025 ARI cases (31.7% of the total reported ARI) and 123 AD (40% of the total reported AD cases) were recorded.
- Nine sporadic cases of bloody diarrhoea were reported this week; five cases from Refugee camps (Domiz and Darashakran) and four from IDPs camps (Garmava and Shaqlawa).
- Eleven sporadic cases of Acute Jundice Syndrome were also reported this week, seven of these are from refugee camps (Arbat and Domiz), and four from IDPs camps (Bharka and Garmava).

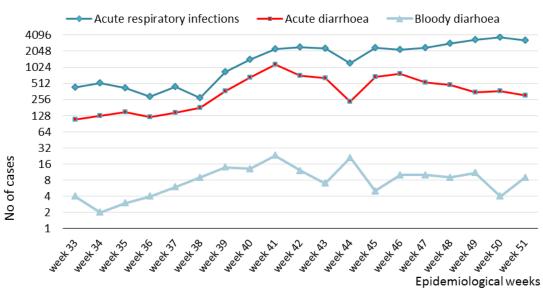
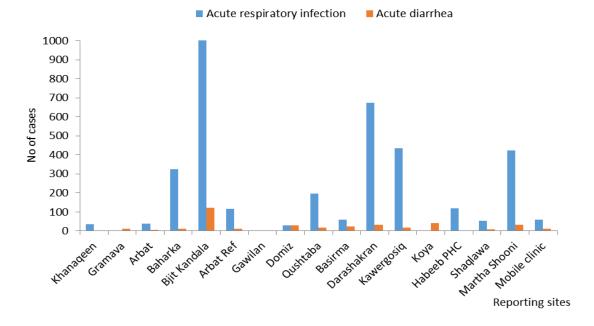


Figure II. Trend of leading communicable diseases, by weeks¹





¹ 1 The graphic axis is made on the basis of a logarithmic scale based on the orders of magnitude rather than the standard line scale. This enables illustration of data despite the large range of quantities.

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Alerts and outbreaks

Eleven new cases of Acute Jaundice Syndrome (AJS) were recorded two of them from Bharka IDPs camp in week 51 (Figure IV). This brings the total number of cases reported from Baharka IDPs camp to 26 cases since the first case was reported on 23/10/2014. (earlier, the AJS cases in Baharka camp were jointly investigated by WHO and the MOH teams, and confirmed as viral hepatitis A (HAV) outbreak)

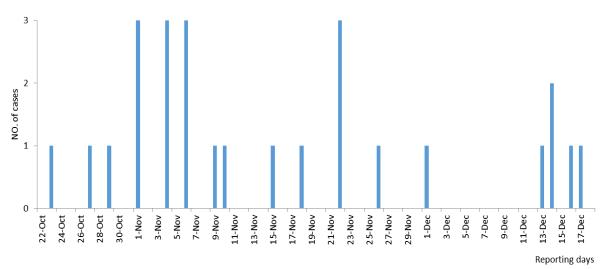


Figure IV: Trend of acute jaundice syndrome cases in Baharka camp since 23/10/2014 to date

• Thirty one (31) Stool specimen were collected from Domiz, Basirma, Darashakran, , Qushtaba, and Kawergoseq camps and routine screening performed at the Erbil Public Health Laboratory. All sample tested negative for vibrio cholera.

Comments

- Acute Diarrhea decreased generally in this period due to weather changes in winter.
- WHO in close collaboration with the Ministry of Health is in the process of upgrading the EWARN system to an electronic format, due to be launched in mid-January 2015. This upgrade will be an opportunity to expand the network to all primary healthcare centers serving internally displaced people (IDPs), refugees and affected host communities.

NB: Any suspected disease outbreak, or any **suspected case of measles**, **AFP**, **meningitis**, **suspected cholera**, or **unusual cluster of health events** should be immediately notified to relevant health authorities in your district or to the contacts provided below

For comments or questions, please contact

- ➤ **Dr. Abdulla Kareem** | 07703973937 | <u>drabdullakareem@yahoo.com</u> Head of Surveillance Department, Federal MOH
- Dr Saifadin Muhedin | 07502303929 | saifadinmuhedin@yahoo.com Head of Surveillance Department in MOH-KRG
- ➤ **Dr. Seifeddin Hussein**|07809288616|<u>husseins@who.int</u> EWARN forcal Point in WHO Iraq Country Office