Highlights

- The latest figures provided by the Ministry of Health (MoH) indicate that during the demonstrations between 10th and 22nd September, ten Palestinians including four children were killed and 1,193 were injured by the Israeli forces.

- Out of the total 1,193 injured, 690 patients required transfer to the MoH hospitals or NGO clinics, including 127 children and 37 females. Of the hospitalized injured, 19 cases were critically life threatening, 275 moderate, 386 mild, and the remaining 10 were unspecified cases (see also figures 1 and 2 on the following page).

- The MoH and the Palestinian Red Crescent Society (PRCS) set up a total of ten Trauma Stabilization Points (TSPs) with the tenth one established at the beach north of Gaza. At least 503 injured patients were managed at the TSPs and discharged at the TSPs. WHO continues to strengthen the capacity of the TSPs across Gaza to provide life-saving interventions.

- Gaza’s 14 public hospitals rely on donated fuel to run generators during the electricity black-outs, which continue to last up to 18-20 hours per day. The last batch of UN donated fuel has been distributed during August 2018. The local authorities have since procured 120,000 litres and a charity organization (Human Appeal International) has provided 10,500 litres to sustain services at public hospitals throughout the month of September. Nevertheless, hospitals are rationalizing the use of the remaining fuel reserves by suspending sterilization, laundry, cleaning, catering and selected diagnostic services during electricity cuts. On 17 September the Humanitarian Coordinator (HC), announced the release of US$1.0 million from the humanitarian fund for fuel procurement. This support will ensure uninterrupted electricity supply for up to 250 critical health and water and sanitation facilities for a period of up to 6-7 weeks.

- In August 2018, the Central Drug Store of the MoH in Gaza reported 47% of essential drugs at less than one month’s supply and 40% completely depleted. 30% of essential disposables were at less than one month’s supply.

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1 Source: Ministry of Health
Figure 1: Type of emergency consultations treated from 10th to 22nd September

<table>
<thead>
<tr>
<th>TYPE OF CASUALTIES TOTAL (690)</th>
<th>Gun shots</th>
<th>Gas inhalation</th>
<th>Other</th>
</tr>
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<tbody>
<tr>
<td>266</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>87</td>
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<tr>
<td>337</td>
<td></td>
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</table>

Figure 2: Emergency consultations disaggregated by gender and age from the 10th to 22nd September

<table>
<thead>
<tr>
<th>Total</th>
<th>By gender</th>
<th>By age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>690</td>
<td>653</td>
<td>37</td>
</tr>
</tbody>
</table>

Caseload of casualties related to the conflict

- **Casualties:** from the 30th of March until the 22nd of September, 191 people have been killed. Out of the total killed, 176 people were killed by Israeli forces during the demonstrations and 15 people killed during Israeli attacks. The total figure of people injured during the conflict since 30th March stands at 20,833. From this total, 10,071 were treated at the TSPs and immediately discharged and the remaining 10,762 injured patients were transferred for the hospital treatment.

- **Emergency Department (ED):** Out of the total 10,762 injured referred to emergency departments:
  - 47% were live ammunition gunshot injuries (a total of 5,048 cases).
  - 1,845 were children (17%), 703 (7%) were female and 10,059 (93%) were male.
  - 446 (4%) cases were critical, 4,813 (45%) were moderate, 5,287 (49%) were mild and 216 cases were unspecified.

- **Incidence of limb injuries:** From the 30th of March until the 22nd of September:
  - A total of 6,702 limb injuries arrived to emergency departments in referral hospitals.
  - Some 1,200 injured people will be in need of limb reconstruction, and will require up to 7 surgeries and extensive rehabilitation and treatment for up to 2 years.

2 184 have been reported by the MoH and an additional 7 have been held by the Israeli Authorities reported by OCHA.
3 According to a recent assessment conducted by MAP-UK.
• **Amputations:** Since the 30th March until the 22nd September, the total number of amputations was 77, including 14 children and 1 female. Out of this total, 69 were lower limb amputations and 8 upper limb amputations.

• **Paralysis:** Since the 30th March until the 22nd September, the total number of patients with paralysis due to spinal cord injury was 12.

• **Patients discharged early:** Patients are discharged early every week to make room for a new wave of expected casualties. Approximately 700 patients have been discharged early since the 30th March. Most of these patients are receiving trauma follow-up care through Health and Nutrition Cluster partners.

• **Elective surgeries postponed:** Since 30th March approximately 8,000 elective surgeries had to be postponed due to the massive influx of trauma casualties, lack of bed capacity and limitations due to electricity shortages.

### Depleting essential medicines supplies

- The Central Drug Store in Gaza supplies all 14 MoH hospitals (2,243 beds) and 49 MoH primary healthcare clinics (PHC) in Gaza. These health facilities provide 40% of Gaza’s primary healthcare, covering approximately 600,000 people and 90% of all hospital care services.

- According to Gaza’s Central Drug Store at the end of August 243 essential medicines out of the total 516 essential medicines list (47%) were at less than one month’s supply and 206 essential medicines (40%) were completely depleted at the MoH store in Gaza. In addition, 253 essential disposables out of the total 853 essential disposables list (30%) were at less than one month’s supply (See also figure 3 below).

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*Figure 3: Proportion and number of drugs at less than one months supply in the Central Drugs Store in Gaza, 2018*

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*According to Al Salama Society*
Electricity crisis in Gaza

- The health sector in Gaza relies on donated fuel to run backup electricity generators in order to sustain minimum critical health services. Every month, approximately US$500,000 is needed to purchase fuel for emergency generators in order to sustain provision of service at 58 critical health facilities. The last UN donation was distributed in August 2018 and fuel reserves are rapidly depleting.

- Meanwhile, the MoH has initiated drastic measures to rationalize the remaining fuel supplies. Key services in the 14 public hospitals, such as elective surgeries, sterilization and diagnostic services continue to work at reduced capacity. In August and September, the waiting time for elective surgery was 56 weeks, which is well beyond the Ministry of Health (MoH) threshold of 24 weeks⁵. Delays of necessary medical interventions may involve a prolonged period of suffering and ill health, and affects the psychological and social life of the patient. In some cases, this can trigger further medical complications.

- In the 1st week of September, the local authorities procured 120,000 litres of fuel to sustain services at hospitals, and a charity organization has donated 10,500 litres to Public Hospitals, which will help MoH hospitals to sustain essential services until end September 2018.

- On 17 September the Humanitarian Coordinator (HC), announced the release of US$1.0 million from the Humanitarian fund to procure fuel. This support would ensure provision of essential services 250 critical health and water and sanitation facilities for up to 6-7 weeks.

- The extended power cuts mean that generators become increasingly overused, translating into accelerated wear and tear and increased need for repairs or replacement. This has also increased the maintenance demands, which is difficult to provide, as spare parts are part of the “dual-use list”⁶ and restricted from entry to Gaza. According to the WHO HeRAMS assessment results, currently 6 generators supporting the public hospitals are in need of repair or replacement.

- Any disruption in the power supply will be immediately life threatening for over 4,800 patients per month relying on electrical devices, including neonates in incubators, and over 1.27 million people would be directly affected by potential closures of hospitals, in addition, this could translate into increased risks of waterborne diseases and outbreaks across the Gaza Strip.

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⁵ WHO is monitoring the elective waiting time each month.

⁶ The Government of Israel restricts the entry of a large number of materials, particularly machinery and related equipment, on the grounds that these serve dual-purposes (i.e. civilian and military) and are misused by the Hamas and armed groups in Gaza. As such, every import of a good or material on the dual-use list must be individually approved by the relevant Israeli authorities.
Karem Shalom Closure

- On the 9th July, Israeli authorities announced the closure of Kerem Shalom crossing, temporarily prohibiting entry of goods except medical and food supplies. Kerem Shalom has reopened as of 15 August, operating at the capacity as prior to the closure. However, due to a number of religious holidays celebrated in Israel in September, the crossing point was closed on 10-11 September and 18-19 September. Additional closures were planned for 25 September and 30 September – 01 October. It is expected that it would resume full operation on 2 October 2018. The Health Cluster is constantly monitoring the situation.

Attacks against health

- According to MoH, PMRS, UHWC and PRCS, for the period of the 10th September – 22nd September, 13 health workers were injured and one ambulance was damaged in 12 different incidents. Of the health workers, three were hit by live ammunition, five by gas canisters, and five suffered injury from gas inhalation.

- **Cumulative figures on attacks against health:** From the 30th March to the 22nd September, three health workers have been killed and 428 injured in 251 recorded incidents against health staff and facilities. 68 ambulances and 5 others health vehicles have been damaged, as well as 2 health facilities (a specialized health center for people with disability and the MoH central ambulance station were damaged as the result of an Israeli air strike on the 14th July).

Emergency Response

Provision of medical supplies:

- **WHO** procured and delivered drugs for treatment of mental health disorders which will benefit up to 15,000 patients in Gaza for a period of 10 months. Additionally, **WHO** procured and delivered 10 wheelchairs and 95 pairs of crutches to assist rehabilitation of trauma patients in Gaza.

- **Medical Aid for Palestinians (MAP-UK)** delivered 8 drug items and one disposable item at zero-stock level to the MoH Central Drug Store.
Health Partners’ Response:

- **The Union of Health Work Committees (UHWC)** teams provided first aid to 169 cases, including 32 gunshot injuries, at their medical points in Rafah and the Middle zone. In addition, Al-Awda hospital, with funding from Muslim Aid, was able to provide emergency services for 70 cases at their emergency department, 11 of which underwent urgent surgical operations.

- **The Assalama Society** continues to provide post-operative services, including wound dressings, assistive devices, physiotherapy, medicines, disposables and psychosocial support, supporting over 600 patients.

- **The Palestinian Medical Relief Society (PMRS)** paramedics provided first aid support to a total of 305 cases, including 69 gunshot injuries. Since the start of demonstrations, PMRS has provided first aid to a total of 3,900 patients. PMRS has also mobilized three outreach teams in Gaza, Khan Younis and the North governorate. The teams provided post-operative care to 37 new cases, raising the total of beneficiaries to 728, out of which, 243 have received assistive devices.

- **Palestine Children’s Relief Fund (PCRF)** has deployed a pediatric dentist and a pediatric dental surgeon to Al-Shifa hospital. The mission was able to screen 36 cases and operate on 35 cases.

- **Health Matters/ International Medical Corps (IMC)** partners provided immediate care to a total of 71 injured cases, out of them 48 cases received wound care at the TSPs; and 23 were transferred to hospitals.

- **Haifa Charity Hospital** staff and ambulances provided first aid to 80 injured patients in the field and transported 221 cases to the medical points in Malaka area, east of Gaza. The hospital also conducted 2 peripheral neurosurgeries and provided 247 post-operative consultations, including provision of medication, consumables, laboratory and x-ray services and wound dressing.

- **Médecins Sans Frontières (MSF)** admitted 90 trauma patients to their clinics. MSF medical teams also performed 23 operations on 19 patients.

- **MAP-UK** deployed a limb reconstruction mission to Al-Shifa and European Gaza hospitals. The mission assessed 52 cases and operated 13 patients.

- **Doctors Worldwide - Turkey (DWWT)** provided 272 cases with a total of 1,889 multi-disciplinary sessions, including nursing, medical examinations, physical therapy and psychosocial support.

- **Caritas Jerusalem** deployed a multi-disciplinary team, consisting of a surgeon, 2 nurses and a pharmacist, in Jabalia, Farahin, Khuza’a and Khanyounes. The team provided wound management services to 77 cases and medication to 45 injured patients.

- **Humanity and Inclusion (HI)** in a partnership with local organizations has deployed 10 multidisciplinary teams in all the five governorates of Gaza. So far, HI has provided nursing and rehabilitation services for 1,314 injured persons with the total of 16,429 multidisciplinary sessions. HI has also distributed a total of 312 assistive devices including wheelchairs, crutches, and anti-bed sore mattresses.

- **PRCS** transported and provided first aid services to 944 casualties, including 188 with gunshot injuries and 7 killed. Al-Quds and Al-Amal hospitals received 68 and 7 injured cases, respectively, at their emergency departments. PRCS also activated the National Disaster Response Team (NDRT) and deployed 43 staff and volunteers to the field. The teams followed-up on 323 cases at the medical points. In addition to that, PRCS
Psychosocial Support Team offered psychological first aid (PFA) to more than 164 wounded persons and their families in the Gaza Strip, as well as to 157 emergency providers during the reporting period.

- **United Nations Relief and Works Agency (UNRWA)** provided 114 post-operative consultations offering medication and wound dressing. Since the 30th March, UNRWA has provided a total of 4,007 postoperative consultations at their 22 primary healthcare clinics.

- **Médecins du Monde-France (MDM-F)** has been providing support on wound management to five MoH PHC centers (Bani Suhaila, Abassan Kabira, Shuhaida Deir El-Balah, Old Bureij and Old Nuseirat). During the reporting period, 194 new patients benefited from these services, including 40 patients consulting for post-op care. MDM-France is also working on strengthening the referral system through facilitating referrals to the appropriate services. The clinics have referred 8 patients from PHCs to hospitals and have received 53 patients from hospitals at the PHCs.

### Coordination and Information:

- WHO continues to monitor the access of patients from Gaza and attacks against healthcare across the oPt. For additional information on access barriers for Palestinian patients, see WHO’s latest monthly [access report](http://healthclusteropt.org/pages/3/situation-reports).

<table>
<thead>
<tr>
<th>INFORMATION TOOLS AVAILABLE ON THE HEALTH CLUSTER WEBSITE</th>
<th><a href="http://healthclusteropt.org">HTTP://HEALTHCLUSTEROPT.ORG</a></th>
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| Health Cluster HeRAMS dashboard | **MoH Hospitals**: [http://healthclusteropt.org/pages/9/herams-hospitals](http://healthclusteropt.org/pages/9/herams-hospitals)  
**MoH PHCs**: [http://healthclusteropt.org/pages/10/herams-phcs](http://healthclusteropt.org/pages/10/herams-phcs)  
**UNRWA PHCs**: [http://healthclusteropt.org/pages/15/unrwa-phcs-dashboard](http://healthclusteropt.org/pages/15/unrwa-phcs-dashboard) |
| Gaza Trauma Working Group | [http://healthclusteropt.org/pages/16/trauma-working-group](http://healthclusteropt.org/pages/16/trauma-working-group) |
| EMTs calendar | [http://healthclusteropt.org/pages/12/emt-calender](http://healthclusteropt.org/pages/12/emt-calender) |
| Procurement activities conducted by partners | [http://healthclusteropt.org/pages/13/procurement-activities](http://healthclusteropt.org/pages/13/procurement-activities) |

### Funding needs

- From the 30th March until 31st December 2018, WHO and the Health Cluster partners require a total of **$43.8 million USD**. To date, a total of **$21.5 million USD** has been received, leaving a gap of **$22.3 million USD** in order to cover the needs until the end of the year.

- The funding is necessary to support the following activities:
  - Fuel to run hospitals on back-up generators during the mains power cuts for a period of 8 weeks
  - Deployment, coordination and support to quality-assured emergency medical teams (EMTs) across the trauma path;
  - Expanding multi-disciplinary outreach teams, with a focus on physiotherapy and mental health and psychosocial support;
  - Providing essential medical supplies for the treatment of trauma patients, emergency patients and non-communicable disease patients, including new-born’s and other vulnerable groups;
  - Strengthening the reporting and monitoring of attacks on healthcare;
  - Strengthening emergency preparedness

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