Epidemiological week 47 (Week ending 26 November, 2017)

Highlights

- Reports were received from 239 out of 265 reporting facilities (90.2%) in week 47 an increase in the reporting completeness compared to 216 (81.5%) in week 46.
- Total number of consultations increased from 62,463 in week 46 to 69,523 week 47.
- The highest number of consultations in week 47 were for other acute diarrhoeas (2,316 cases), influenza like illness (1,753 cases) followed by severe acute respiratory illness (801 cases)
- AWD cases decreased from 46 in week 46 to 75 in week 47
- No AWD/cholera deaths reported in all districts in the past 12 weeks
- The number of measles cases increased from in 487 in week 46 to 292 cases reported in week 47

Cumulative figures as of week 47

- **1,498,133** total consultations
- **78,717** cumulative cases of AWD/cholera in 2017.
- Of the 78717, **32,443 (41.2%)** are children less than 5 years while **46,274 (58.8%)** are 5 years above.
- **1,159** cumulative deaths of AWD/Cholera in 2017
- **55** districts in **19** regions reported AWD/Cholera cases.
- **21,100** cumulative cases of suspected measles cases
- Of the 21,100 cases, 10,545 (49.8%) whilst 10,555 (50.2%) are 5 years and above.

### Table 1. Summary of Alerts for epidemic prone diseases and syndromes

<table>
<thead>
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<th>Disease</th>
<th>Week 46 2017</th>
<th>Week 47 2017</th>
<th>Cumulative cases (Week 1 – 47)</th>
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<td>Total consultations</td>
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<td>292</td>
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<td>78717</td>
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The number of EWARN sites reporting increased from 216 in week 46 to 239 in week 47. The number of total consultations also increased from 62,463 in week 46 to 69,523 in week 47 (Chart 1 below). Overall, 1,497,025 consultations have been recorded since the beginning of the year.

**Proportionate morbidity**

The commonest causes of morbidity reported from the sentinel sites in week 47 are; Influenza like illness, other diarrhoeas, Severe Acute Respiratory infection, measles, malaria, AWD, Bloody diarrhoea and whooping cough and acute watery diarrhoea as shown in figure 2 below.

Map showing causes of morbidity in different regions.
Epidemic situation

The number of AWD cases declined from 46 in week 46 to 75 in week 47 across Somalia (Table 1). No new cholera cases or deaths have been reported in the last 2 months in all regions.

All, new cases reported from 6 district 5 regions across the country. This includes: Banadir (Wadajir 23), Galgadud (Adado, 7), Sool (Lasanod 2), Mudug (Galkayo 1), Lower Shabelle (Afgoi 5, Marka 1)

A total of 78,717 cases and 1,159 deaths (CFR 1.47%) have been reported in 55 districts in all the nineteen regions of Somalia. The most affected regions since the beginning of the outbreak include Bay, Banadir, Togheer, Bari and Mudug. Most of the affected populations live in IDP camps where access to safe water and sanitation is limited.

Of the 55 affected districts, 34 of these have been classified as hard to reach or inaccessible. The Case Fatality Rate in inaccessible districts is 4 times as in other districts.

Overall, children below 5 years constitute more than 58% of the total number of AWD/cholera cases reported since the beginning of year.
Table 2. Activities implemented during the AWD/Cholera outbreak

<table>
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<tr>
<th>Thematic area</th>
<th>Activities implemented</th>
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| **Surveillance and laboratory activities** | • 265 health facilities were included in the EWARNs with plans to expand reporting sites to all districts  
  • 266 stool samples were collected for AWD/Cholera of which 111 were positive for V. Cholera, Ogawa  
  • A total of 30 health workers were trained in stool samples collection, shipment and testing stool samples using Rapid Diagnostic Test (RDT)  
  • A total of 250 community health workers were training in AWD/Cholera case management in Banadir region  
  • Alerts and rumors were received and investigated in Middle Shabelle and Banadir. All AWD/Cholera alerts were false |
| **Coordination and Response**       | • Weekly coordination meetings between MoH and cluster partners  
  • A needs assessment for AWD/Cholera was conducted by the joint WHO and MoH team in Banadir hospital CTC  
  • Joint AWD/Cholera implementation plan for WHO and UNICEF is being developed |
| **Water, Sanitation and Hygiene**   | • Distribution of hygienic kits to IDP communities in Lower and Middle Jubba, Banadir, Gedo and Baidoa  
  • Community education and mobilisation was done in all regions affected by AWD.  
  • C4D conducted social mobilisation in hard to reach areas in all the districts affected by AWD/Cholera |
| **Supplies and logistics**          | Over 167 tonnes of AWD/Cholera supplies and emergency kits were distributed to affected regions since January 2017 |
The number of suspected measles cases decreased from 478 cases in week 46 to 292 cases in week 47. A total of 21,100 cumulative cases of suspected measles have been reported from all the nineteen regions since the beginning of the year. 83% of the cases are children under 10 years. The most affected regions include Banadir (5,143 cases) Togdher (2,767 cases), Mudug (2,258 cases) Lower Shebelle (1,899 cases), and Bari (1,793 cases) (See Table 3).
Table 2: Summary of Suspected measles cases by region week 46 and 47, 2017

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**Measles outbreak response**

WHO in collaboration of with the Federal Ministry of Health have started preparatory activities for the upcoming mass measles campaigns in November 2017 targeting 4,278,083 (6 months-10 years) children. Vaccines have been delivered to the state hubs.

Technical and coordinating structures set up, with weekly meetings at country office and zonal offices. Additionally, to micro planning and TOT trainings have been conducted in South-Central and Puntland.

Regional and district training will be conducted next week.

Due to circumstance, a phase wise implementation strategy has been adopted as a best delivery option, to maintain good quality - one zone will be covered at a time.
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For inquiries please contact the Surveillance team, WHO country office in Somalia on address below: Dr. Mutaaawe Lubogo, Epidemiologist, mutaaawe@who.int