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Somalia cVDPV Outbreak Response Situation Report #1

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Distribution of cVDPV2 & cVDPV3 cases, Somalia, 2018



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Source: Somalia, DFS, United Nations 2011

<u>Summary</u>

Number of new **cVDPV2 cases** this week: 0 Number of new **cVDPV3** cases this week: 0

Total number of cVDPV2 cases : 2 Total number of cVDPV3 cases : 3*

Outbreak grade: 3

*One case has co-infection of cVDPV2 and cVDPV3

Infected region and districts

Region	District	cVDPV2	cVDPV3	cVDPV2 & cVDPV3
AFP Cases				
Hiran	Bulo Burti	0	0	1
Middle Shabelle	Warsheikh	0	2	0
Gedo	Dolo	1	0	0
Contacts				
Hiran	Bulo Burti	0	3	0
Middle Shabelle	Warsheikh	0	1	0
Gedo	Dolo	1	0	0
Healthy Children				
Lower Juba	Jamamme West	0	2	0

Most recent cVDPV2 case (by date of onset)

Location: Dolo, Gedo Region

Onset of paralysis: 26 May, 2018 , age: 24 months, gender: male Vaccination status: 6 OPV/ zero IPV

Most recent cVDPV3 case (by date of onset)

Location: Warsheikh, Middle Shabelle Onset of paralysis: 23 May, 2018 , age: 39 months, gender: male Vaccination status: zero OPV/zero IPV

Situation update

- Circulating vaccine-derived poliovirus type 2 (cVDPV2) and type 3 (cVDPV3) have been confirmed in Somalia. Two cases of cVDPV2 and three cases of cVDPV3 have been confirmed, one of which is confirmed as having co-infection of cVDPV2. The total number of cases is four.
- cVDPV3 has been isolated from samples collected from contacts in Bulo-Burte (Hiran region) and Warsheikh (Middle Shebelle) and from healthy children sampling in Jamamme West (Lower Juba).
- Environmental surveillance continues to detect cVDPV2 and cVDPV3 in samples collected from four sites in Banadir (Mogadishu) region.
 cVDPV2 was first detected in Somalia in December 2017 in environmental samples. In March 2018, VDPV2 was detected in the environment in neighbouring Nairobi.
- An mOPV2 vaccination round reaching almost 700,000 children under five in six partially-accessible and accessible regions of Somalia has been completed. This is the first of two additional rounds utilising mOPV2 in response to the continued detection of cVDPV2, synchronized with border areas of Kenya and Ethiopia. Post campaign independent monitoring has reported that all of six regions of Somalia targeted in this campaign had 90% or more vaccination rates in accessible areas.
- A targeted immunization campaign using bivalent oral polio vaccine (bOPV) is ongoing this week in Banadir, Lower Shabelle and Middle Shabelle regions.
- WHO and UNICEF are working closely with the Government of Somalia to support the outbreak response in country and to coordinate on border areas involved in sub-regional outbreak response activities.

Immunization Response

cVDPV2

- cVDPV2 has been isolated from 1 AFP case (co-infected with cVDPV3) in Bulo Burti district of Hiran region in central Somalia. In addition, cVDPV2 has been confirmed in a contact of an AFP case in Dolo district, Gedo region, bordering Ethiopia. cVDPV2 is continuing to be detected in environmental samples in Banadir region.
- Four large-scale immunization campaigns using monovalent oral polio vaccine (mOPV2) have been conducted in South and Central zones since the initial detection of cVDPV2 isolates in December 2017.
- One round of IPV was conducted (alongside a targeted mOPV2 campaign) in Banadir, Lower Shabelle and Middle Shabelle reaching more than 270,000 (90% of the total target) children aged between 2-23 months.
- Planning is ongoing for one additional immunization round using mOPV2 to be conducted in synchronization with border areas of Kenya and Ethiopia in August in response to the continued detection of cVDPV2.
- Genetic sequencing of the VDPV2 isolated strains suggest that the viruses are not linked to any previously-detected VDPV2s, indicating the strain has been circulating in the area undetected for a period of at least two years.

cVDPV3

- cVDPV3 was initially isolated from the environment in Hodan district of Banadir region in a sample collected on February 1st, 2018.
- Since, cVDPV3 has been isolated from 3 AFP cases (one from Hiran region and two in Lower Shabelle), three contacts in Hiran and two healthy children in Lower Juba.
- Two national immunization days (NIDs) rounds using bOPV have been conducted in Somaliland and South Zone and Central Zones (except Banadir, and Lower and Middle Shabelle regions) in May 2018 and in Puntland in July 2018 reaching more than 1.3 million children under 5 years of age.
- Additional vaccination activities aiming to reach more than 740,000 children under 5 years of age in Banadir, Lower and Middle Shebelle with bOPV are ongoing.
- Planning continues for two immunization rounds using bOPV to be synchronized with Kenya and Somalia regions of Ethiopia, in September and October 2018 targeting all accessible districts of the country.

Regional Response

- The Horn of Africa coordination office has been re-established to coordinate immunization response activities across the sub-region following the detection of cVDPV2 in environmental samples in Nairobi, Kenya (reported on 9 March 2018).
- Planning and coordination is ongoing between Somalia, Kenya and Ethiopia ahead of synchronized immunization campaigns aiming to reach children in bordering areas of Somalia, Ethiopia and Kenya with both bOPV and mOPV2 during upcoming campaigns.
- Polio eradication teams on the ground, at national, regional and global levels, are closely coordinating with humanitarian emergency response teams, other UN organizations and NGOs, to maximise the impact of all available resources and ensure that polio vaccine can be delivered alongside broader health interventions to the most vulnerable and at-need populations in the region.

Surveillance

- The non-polio AFP Rate (NPAFP) is 5.3 per 100,000 children below 15 years and percent AFP cases with adequate specimen is 98%. All of four Regions are meeting target for the both key indicators, noting that target of NPAFP rate in outbreak response country is 3 per 100,000 children below 15 years.
- A detailed surveillance enhancement plan is being implemented in Somalia in response to the detection of VDPVs, focused on strengthening health facility-based surveillance, sensitization and orientation of health personnel, intensification of surveillance activities through active case searches in the community and health facilities and collection of stool samples from healthy children. In addition, further investigation is underway to identify potential areas of virus circulation.
- To complement AFP surveillance, environmental surveillance has been intensified. Four sampling sites have been established in Banadir (Mogadishu) where weekly samples are being collected for testing.

Background

- Densely-populated Banadir region reported the highest number of cases (72 out of 199) in Somalia during the outbreak of wild poliovirus in the Horn of Africa in 2013-2014. The outbreak was stopped following a multi-country, multi-partner immunization response. Somalia has reported no cases of wild poliovirus since August 2014.
- Conflict and insecurity hindered access to children in central and south zones during polio immunization campaigns in 2017. Seventeen out of 115 districts remain inaccessible in Somalia. Approximately 240,000 children under five years of age have been reported as not accessible for more than a year.



EPI Curve and AFP classification (up to 22 July 2018)

Environmental surveillance by classification, 2017-2018 (up to 22 July 2018)



Vaccination Status (OPV) of Non-polio AFP cases aged 6-59 months by region, 2016-2018 (up to 22 July 2018)



Relevant Links

- Global Polio Eradication Initiative (GPEI) website, updated weekly.
- <u>Vaccine-derived polioviruses video</u>
- <u>Responding to an outbreak of VDPV video</u>
- What is vaccine-derived polio?
- <u>GPEI factsheet—VDPV</u>

For more information:

WHO

Dr Eltayeb Elfakki—Polio Team Lead World Health Organization, Somalia E: <u>eltayebel@who.int</u> | T: +254 7 1892 6988

Dr Mohamed Ali Kamil—Technical Officer, Country Support World Health Organization, EMRO E: <u>kamilmo@who.int</u>| T: +962 7 9643 1246

Emma Sykes—Communications Officer, Polio World Health Organization, EMRO E: <u>sykese@who.int</u> | T: +962 7 9021 6115

UNICEF

Dr Yasmine CHALLOUB—Polio Team Lead UNICEF Somalia E: ychalloub@unicef.org | T: +254 7 1919 2825

Martin Engoulou - C4D Officer UNICEF Somalia E: <u>mergoulou@unicef.org</u> | T: +254 7 1919 2903

Angelo Ghelardi—C4D UNICEF ESARO E: <u>aghelardi@unicef.org</u> | T: +254 7 4860 0645