

Somalia cVDPV Outbreak Response Situation Report #9

unicef

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Distribution of circulating vaccine-derived poliovirus type 2 (cVDPV2) & type 3 (cVDPV3) cases, Somalia, 2018



Map No. 3690 Rev. 10 UNITE December 2011

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

Situation update

• Somalia continues to respond to concurrent outbreaks of circulating vaccine-derived poliovirus type 2 and type 3.

<u>Summary</u>

Number of new cVDPV2 cases this week: 0 Number of new cVDPV3 cases this week: 1

Total number of cVDPV2 cases : 5

Total number of cVDPV3 cases : 6

Total number of **co-infection (cVDPV2 & cVDPV3)** : 1

Outbreak grade: 2

Infected regions and districts

Region	District	cVDPV2	cVDPV3	cVDPV2 & cVDPV3
AFP Cases				
Hiran	Bulo Burti	0	0	1
Middle Shabelle	Warsheikh	0	2	0
	Mahaday	0	1	0
	Runingod	0	1	0
Gedo	Dolo	1	0	0
Banadir	Daynile	1	0	0
Fanole IDP camp	Kismayo	2	2	0
Lower Jube	Jamamme West	1	0	0
Contacts				
Hiran	Bulo Burti	0	3	0
Middle Shabelle	Warsheikh	0	1	0
	Mahaday	0	1	0
Gedo	Dolo	1	0	0
Fanole IDP camp	Kismayo	1	2	0
Lower Juba	Jamamme West	1	0	0
Healthy Children				
Lower Juba	Jamamme West	0	2	0
Environmental Surveillance				
Banadir	Waberi	6	4	1
Banadir	Hamerewoini	8	5	0
Banadir	Hodan	1	0	0

Most recent cVDPV2 case (by date of onset)*

Location: Jamame, Lower Juba

Onset of paralysis: 02 September 2018, age: 36 months, gender: female Vaccination status: Zero OPV doses and Zero IPV * case confirmed by positive contact

Most recent cVDPV3 case (by date of onset)

Location: Runingod district, Middle Shabelle Onset of paralysis: 07 September 2018, age: 05 months, gender: male Vaccination status: zero OPV doses / zero IPV

- Significant access challenges persist and hamper outbreak responsiveness, with vaccination campaign activities reaching only 71% of the country's identified population settlements; while all efforts are underway to reach populations in inaccessible areas, strengthening immunization activities in the area surrounding inaccessible communities and among high risk groups such as internally displaced and nomadic populations is critical for mitigating further cVDPV transmission.
- One new cVDPV type 3 case was confirmed this week. Virus was isolated from a child with AFP that developed paralysis on 07 September 2018. This five month old child is from an inaccessible area of Middle Shabelle and had never received polio vaccination previously. Detailed investigations are underway to determine the best response mechanism across the area; no type 2 cases have been reported this week.
- The total number of cVDPV cases is 12: five cVDPV2, six cVDPV3 and one case of a child with a coinfection of cVDPV2 and cVDPV3 virus.
- The second nationwide polio vaccination campaign targeting an estimated 2.6 million children under five years with bivalent Oral Polio Vaccine was (bOPV) completed this week. The vaccination campaign is in response to the ongoing circulation of cVDPV3; analysis of the results will inform vaccination coverage and define areas for more focus in the upcoming campaign at the end of October.

Immunization Response

• The polio programme in Somalia continues to respond to concurrent outbreaks of cVDPV2 and cVDPV3. The World Health Organization and UNICEF continue to work with the Ministry of Health and local partners to refine strategies to reach high-risk and hard-to-reach populations as part ongoing outbreak response activities.

cVDPV2

- Community and Household investigations have been conducted around the most recent cVDPV2 cases. These investigations will inform the most appropriate response to the continued detection of cVDPV2.
- The third mOPV2 vaccination campaign is planned to commence on the 19th November 2018 in accessible areas of South and Central zones.

cVDPV3

 The second nationwide polio vaccination campaign targeting an estimated 2.6 million children under five years with bivalent Oral Polio Vaccine is (bOPV) was conducted between 1- 4th October. While detailed analysis is underway, the preliminary findings from post campaign monitoring indicate the overall vaccine coverage among accessible communities is 98%; with 79 of 83 districts having achieved > 95% coverage verified by finger marking.

Vaccine Management

- A recall of all mOPV2 vaccine vials not used in the July and August rounds has been completed. Disposal of vials is planned under the leadership of the Ministry of Health in early November.
- For the most recent bOPV nationwide campaign, vaccines were pre-positioned in the regional cold chains of South Central, Somaliland and Puntland. Distribution plans ahead of the next vaccination round will be developed once information about the utilization of vaccine becomes available.

Communication for Development

- More than 3 700 community mobilizers, nomadic and community elders, from across 18 regions of Somalia were involved in the most recent nationwide bOPV campaign. Preparations are again underway for community engagement ahead of the next national bOPV round, including production of radio and TV spots and programs.
- Members of the Polio Social Mobilization Network (SMNET) have been utilized during the most recent bOPV vaccination round to address refusals.
- Polio SMNET is also conducting health education sessions with mothers at selected Maternal and Child Health centers in Somaliland, focusing on the importance of polio vaccination.
- Data is being compiled and analyzed from recent assessments of nomadic populations that was carried out in South and Central regions.

Surveillance

- Somalia continues to conduct weekly environmental sampling from five sites. Last week two new positive environmental samples have confirmed the continued circulation of cVDPV2 and cVDPV3. Samples confirmed cVDPV2 in Hamar Wayn district and cVDPV3 in Waberi districts of Banadir region. The two specimens were both collected on 23 August 2018.
- Since the beginning of 2018, the total number of acute flaccid paralysis (AFP) cases detected in Somalia is 268, 40.3% of which have been reported from inaccessible or partially inaccessible districts. 95% (n=255/268) of the total number of AFP cases reported were notified within 7 days of onset of paralysis.
- All regions except for one are meeting both key indicators for AFP surveillance: 3* or more NPAFP cases per 100,000 children below 15 years of age, and 80 percent or above AFP cases with adequate specimens. Banadir region (2.6) is not meeting the non-polio AFP (NPAFP) rate, which helps to measure the incidence of AFP caused by diseases other than poliomyelitis and is an indicator for surveillance sensitivity.
- New WHO surveillance staff have been recruited, and enhanced surveillance tools are being introduced to field teams during a review meeting in Hargeisa this week.





Vaccination Status (OPV) of Non-polio AFP cases aged 6-59 months by region, 2016-2018 (up to 15 October 2018)



Relevant Links

- <u>Global Polio Eradication Initiative (GPEI) website</u>, 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:

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