



Yellow Fever Outbreak in Darfur Situation Report 3 6 November 2012



Most suspected yellow fever patients being treated at the isolation wards of Nyala Teaching Hospital in South Darfur's capital are from Central Darfur.

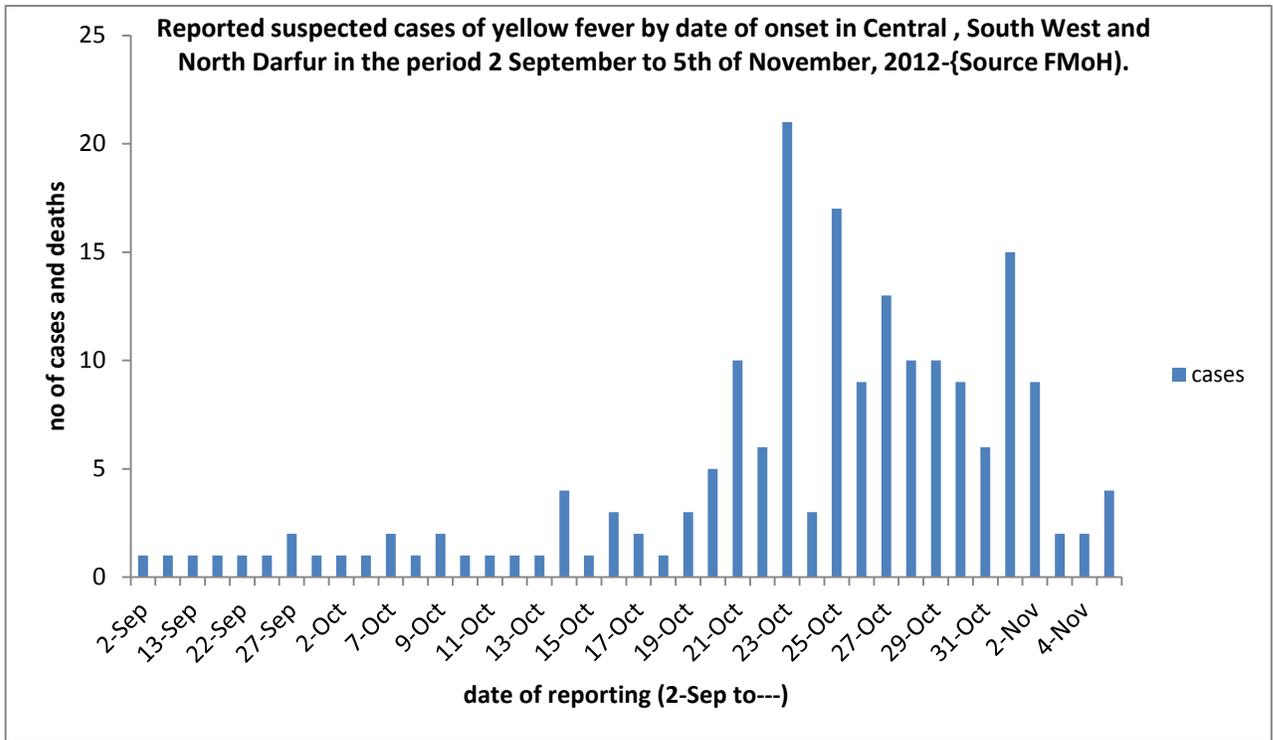
Epidemiology

- The outbreak has now affected 17 localities in Central, South, West and North Darfur.
- As of 5 November 2012, 194 suspected cases have been reported, including 67 deaths (case fatality rate of 34.5%). Reports were received since the last week of September 2012 from the districts of Zalingei, Nertity, Wadisalih, Azoom, Mukjer, Nyala, Kass, Kubum, Sharq ALgabal, Mershing, Rehaid Albirdy, Genaina, Kernik, Baidha, Habila, Saraf Omra and Alseraif.
- Surveillance shows that 83.3% of the reported cases are from Central Darfur, 7.2% are from South Darfur, 7.2% are from West Darfur and 2.3% are from North Darfur.
- Table below shows the age group distribution of affected people.

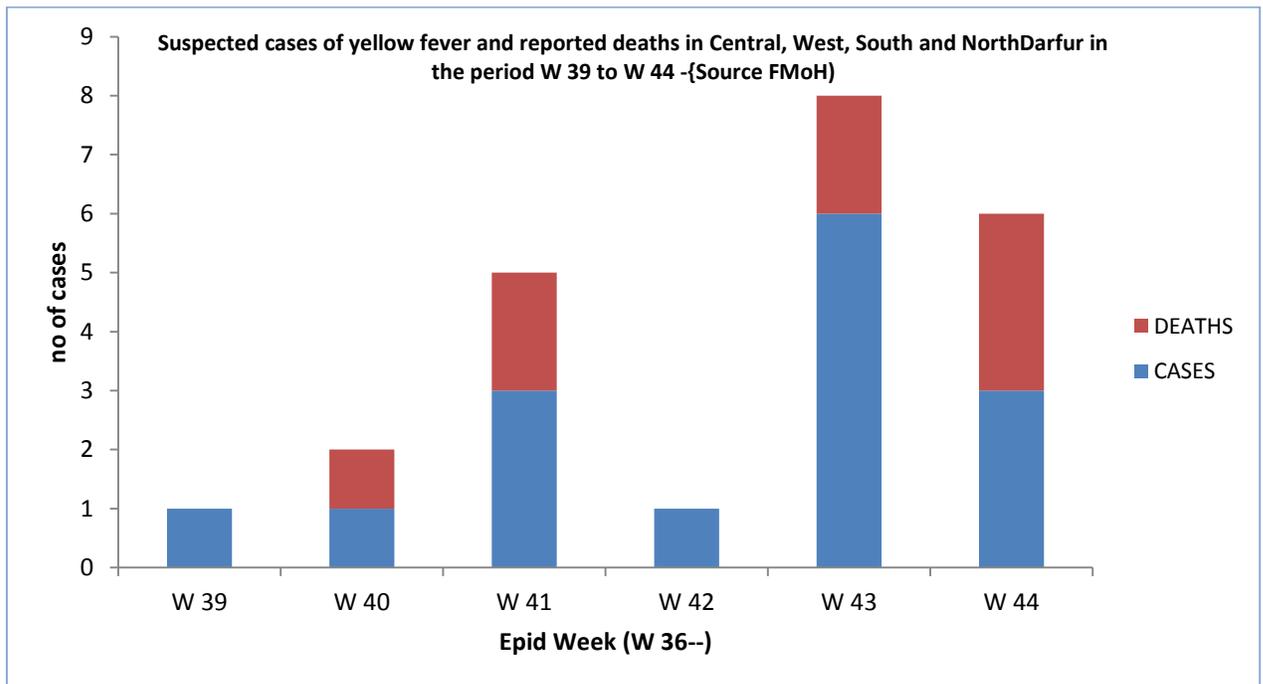
Age group	Percentage
2 up to 4.9	2.6%
5-14.9	27.1%
15-29.9	47.9%
30-44.9	15.1%
45 and above	7.3%

- 25 samples were collected of which 3 were tested positive for yellow fever (2 samples from Nertity locality and 1 from Nyala) at the Central Public Health Laboratory in Khartoum. Some of the samples tested negative for Crimean-Congo haemorrhagic fever (CCHF) and chikungunya.

- Graph below shows suspected cases of yellow fever by date of onset in Central, South and West Darfur between 2 September and 5 November 2012. (Source: FMOH)



- Graph below shows suspected cases of yellow fever and reported deaths in Central, South and West Darfur from Week 39 to Week 44 of 2012 (Source: FMOH)



The table below shows suspected cases of yellow fever attack rate (AR) and case fatality rate (CFR) per locality in affected localities in Greater Darfur between 2 September and 5 November 2012.

State	Locality	no of cases	Attack rate	deaths	CFR
South Darfur	Nyala	1	0.2	0	0%
	Sharq Algabal	6	4	6	100%
	Kass	14	6.6	4	28.6%
	Mershing	1	0.5	1	100%
	Kubum	1	0.3	0	0%
	Rehaid Albirdy	1	0.4	0	0%
Central Darfur	Zalingei	61	20	18	329.5%
	Wadialih	23	13.2	10	43.5%
	Azoom	27	4.4	6	22.2%
	Nertity	38	27.5	16	42.1%
	Mukjer	1	1.0	0	0%
West Darfur	Genaina	3	3.1	1	33.3%
	Beidha	3	2.7	0	0%
	Habila	5	10.3	3	60%
	Kernik	3	0.9	1	33.3%
North Darfur	Saraf Omra	2	1.6	1	50%
	Alseraif	4	7	1	25%
Total		194	6.2	67	34.5%

Actions taken

- The spread of the disease is monitored throughout Darfur.
- Technical support teams from FMOH are on the ground in Central, South and West Darfur for initial support, and conduct:
 - o Outbreak investigation and initiate response
 - o Entomological surveys conducted in the affected areas
 - o Active cases searches
 - o Meetings with community leaders in affected areas for awareness raising
 - o Blood bank supplies and personal protective equipment were provided to affected States.
- Health cadres in affected areas have been vaccinated against yellow fever.
- WHO and the Ministry of Health have started the training programmes for more than 225 health staff in the affected localities on yellow fever surveillance, case management, outbreak investigation and infection prevention and control.

- On 6 November, training programmes for medical doctors on yellow fever surveillance, case definition and management have started in Nyala and Kass localities in South Darfur.
- Laboratory reconfirmation from the Institute Pasteur, Dakar, is expected early next week.
- Health partners in the field were contacted to support response measures and activate disease surveillance in silent localities.
- The International Coordination Group (ICG) was alerted for vaccines for a possible response vaccination campaign awaiting reconfirmation by Institute Pasteur in Senegal.



Training programme on yellow fever for 30 medical doctors started on 6 November at the conference room of the Ministry of Health in Nyala, South Darfur.

Recommendations

- WHO recommends to continue laboratory testing of patients from newly affected localities.
- There is a need to strengthen disease surveillance in East Darfur and it has been recommended to urgently sensitize health cadres on yellow fever surveillance and outbreak investigation, as well as case definition and management.
- Finalize vaccination plan which shall encompass identification of partners and resources.

توزيع حالات الاشتباه بالحمي الصفراء بولايات دارفور. السودان 2012

