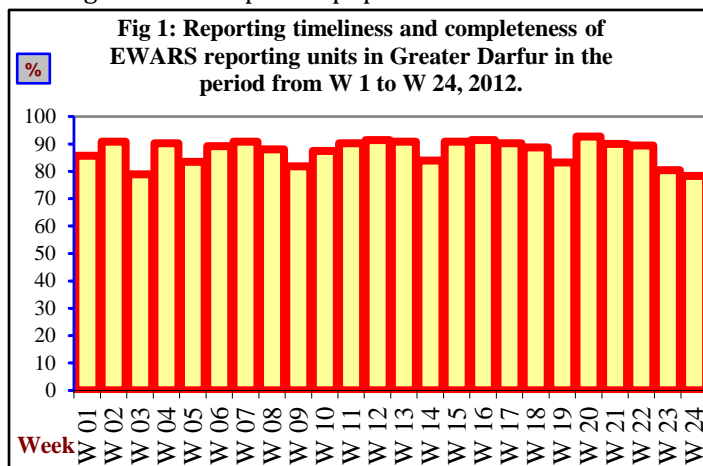




I. Reporting Timeliness & Completeness

This week 78.3% reporting timeliness & completeness of EWARS reports was achieved in Greater Darfur (fig.1). A total no. of 49349 consultations was seen this week among 2153409 reported populations under surveillance.



II. Diseases of Public Health Importance

Acute Respiratory Infections (ARI), Bloody Diarrhoea (BD), Clinical Malaria (MAL), remain the leading causes of morbidity in Darfur (table 1). This week, no case of suspected meningitis was reported in Greater Darfur compared to one (01) case last week. In addition, six (06) cases of suspected measles were reported in Darfur (0 cases in South, 05 in West Darfur and 01 case in North Darfur) compared to four (04) cases reported last week. A total of nine (09) deaths were reported in North Darfur and were attributed to MAL (01 fatality) and other causes (08 fatalities). No death reported, through EWARS, in South or West Darfur.

Table 1: Incidence rate (IR) per 10000 population of ARI, Bloody Diarrhoea & Malaria reported in Greater Darfur, W 21 to W 24, 2012.

State	Disease	Incidence Rate			
		W 21	W 22	W 23	W 24
South Darfur	ARI	10.9	7.3	12.3	13.9
	BD	2	2.2	3.1	4.4
	MAL	2	2.5	3.3	2.3
West Darfur	ARI	21.4	16	23.7	23.7
	BD	2.6	3.1	2.8	4.1
	MAL	5.1	3.2	2.8	4.2
North Darfur	ARI	39.1	30.3	39.4	34.8
	BD	1.6	0.9	1.6	2.3
	MAL	2.8	1.5	2.5	3.1

Disease morbidity in East Sudan

Please refer to table 2 below comparing incidence rate/10000 population in the eastern states (Gedarif, Kassala and Red Sea).

Table 2: Comparison of Incidence rate (IR) per 10,000 populations of common diseases reported in East Sudan, W 21 to W 24, 2012.

State	Disease	Incidence Rate			
		W 21	W 22	W 23	W 24
Kassala	MAL	13.1	11.8	10.4	9.8
	TB	0.3	0.3	0.3	0.2
	Typhoid F.	0.3	0.2	0.3	0.3
	BD	2.0	2.0	2.6	1.9
Gedarif	Bilharzias	0.6	0.5	0.5	0.5
	MAL	6.8	6.5	7.5	8.9
	TB	0.0	0.0	0.0	0.0
	Typhoid F.	0.8	1.0	1.1	1.6
	Kala-Azar	0.2	0.2	0.2	0.2
	BD	2.6	2.8	2.9	2.0
Red Sea	Viral H.	0.1	0.0	0.1	0.1
	MAL	2.4	2.5	2.5	1.6
	Viral H.	0.1	0.1	0.0	0.0
	BD	0.8	0.9	0.8	0.9
	Measles	0.1	0.2	0.1	0.1

During this week the reporting completeness was 98.1%, 97% and 98.4% in Kassala, Gedarif and Red Sea state compared to previous week reports of 96.2%, 96% and 98.4% respectively.

III. Outbreak Preparedness and Response

III.I Meningitis case-based surveillance in Sudan: workshop to adapt the generic guide and SOPs prior its implementation

Sudan is d one of the countries in the meningitis belt. Every year there is an epidemic in certain states, which usually covered by reactive vaccination campaigns in those states using the polysaccharide vaccines. The vaccination campaign is usually challenged by late implementation together with very high cost. Due to this situation it is planned to accelerate the prevention measures against meningitis by delivering the new meningococcal A Conjugate vaccine.

In this regard, a workshop is scheduled to be organized in the period 25 - 30 June 2012 in Khartoum with the aim to provide orientation to country on implementation of the case-based surveillance.