Summary

New cVDPV2 cases this week: 0
Total number of cVDPV2 cases: 70
Outbreak grade: 3

Infected governorates and districts

<table>
<thead>
<tr>
<th>Governorate</th>
<th>District</th>
<th>Number of cVDPV2 cases to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deir Ez-Zor</td>
<td>Mayadeen</td>
<td>55</td>
</tr>
<tr>
<td>Deir Ez-Zor</td>
<td>Boukamaal</td>
<td>11</td>
</tr>
<tr>
<td>Raqqa</td>
<td>Tell Abyad</td>
<td>1</td>
</tr>
<tr>
<td>Homs</td>
<td>Thawra</td>
<td>1</td>
</tr>
</tbody>
</table>

Index case

Location: Mayadeen district, Deir Ez-Zor governorate
Onset of paralysis: 3 March 2017, age: 22 months, vaccination status: 2 OPV/zero IPV

Most recent case (by date of onset)

Location: Mayadeen, Deir Ez-Zor governorate
Onset of paralysis: 9 September 2017, age: 9 months, vaccination status: 2 OPV/zero IPV

Characteristics of the cVDPV2 cases

Median age: 15 months
Gender: two-thirds of the cases are female
Vaccination status of the cases:
- IPV: 10 cases (14%) received IPV
- OPV: 39% zero dose, 44% have received 1-2 doses

Distribution of non-polio AFP (NPAFP) and circulating vaccine-derived poliovirus type-2 (cVDPV2), Deir Ez-Zor, Raqqa and Homs governorates, 2017

<table>
<thead>
<tr>
<th>Gov.</th>
<th>Deir Ez-Zor</th>
<th>Raqqa</th>
<th>Homs</th>
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</thead>
<tbody>
<tr>
<td>Mnth</td>
<td>NPAFP cVDPV2</td>
<td>NPAFP cVDPV2</td>
<td>NPAFP cVDPV2</td>
</tr>
<tr>
<td>Jan</td>
<td>2</td>
<td>2</td>
<td>2</td>
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<tr>
<td>Feb</td>
<td>11</td>
<td>3</td>
<td>4</td>
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<tr>
<td>Mar</td>
<td>5</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Apr</td>
<td>7</td>
<td>5</td>
<td>1</td>
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<tr>
<td>May</td>
<td>13</td>
<td>16</td>
<td>2</td>
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<tr>
<td>Jun</td>
<td>8</td>
<td>12</td>
<td>3</td>
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<tr>
<td>Jul</td>
<td>8</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Aug</td>
<td>14</td>
<td>21</td>
<td>6</td>
</tr>
<tr>
<td>Sep</td>
<td>5</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Oct</td>
<td>2</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Nov</td>
<td>4</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>79</td>
<td>67</td>
<td>21</td>
</tr>
</tbody>
</table>
and areas of Damascus, Rural Damascus and Hasakah where families from outbreak zones have moved during the response.

- Neighboring countries have utilized IPV in targeted vaccination activities, particularly in areas with high concentration of Syrian refugees, to boost immunity.

**Risk mitigation strategies**

- Planning continues for the second phase of the outbreak response, and for this purpose additional doses of mOPV2 and IPV have been requested by the Syrian Ministry of Health.

- Microplanning in preparation for the planned activities is ongoing to ensure population movements in parts of Deir Ez-Zor are accounted for. During the recent bOPV-IPV sub-national campaign, teams mapped populations, roads for transporting vaccines and identified centres for vaccine distribution.

- Twenty-five cold boxes and additional fridges and generators will be provided to address gaps in cold chain. Qamishli will act as the main cold room providing frozen ice packs to support planned activities.

- Training of health staff for the assessment of cold chain capacity across the country is ongoing in Damascus. Health staff have been trained on mobile data collection. All accessible health facilities will be assessed starting 10 December.

- Activities to strengthen AFP surveillance are ongoing. Contact sampling from all AFP cases continues and stool samples are being taken from healthy children arriving from known infected areas as well as from silent districts (districts that have not reported AFP cases in 2017). In addition, physicians operating in camps in Raqqa and Hasakah governorates have been sensitized on reporting of AFP cases.

**Coordination and surge support**

- WHO and UNICEF continue to monitor the outbreak situation, exchange information, and assist in the response through the joint Emergency Operations Centres (EOCs) in both hubs (Gaziantep and Damascus).

**Surveillance summary**

- In 2017, Syria and all governorates but four are meeting both key indicators for AFP surveillance: 3* or more non-polio AFP cases per 100,000 children below 15 years of age, and 80 percent or above AFP cases with adequate specimens. Deir Ez-Zor (78%), Raqqa (71%), Rural Damascus (76%) and Swieda (63%) are missing the 80% target for stool adequacy. (*NB: In an outbreak setting, the target is 3 or more non-polio AFP cases per 100,000 children below 15 years).

- The total number of AFP cases detected in Deir Ez-Zor governorate since the beginning of 2017 is 146 (107 from Mayadeen, 13 from Deir Ez-Zor, and 26 from Boukamal districts). Raqqa governorate has reported 23 AFP cases (10 from Raqqa, 11 from Tell Abyad, and 2 from Thawra districts). Homs governorate has reported 46 AFP cases (23 from Homs city, 20 from Rastan, 1 from Tadmour and 2 from Talkalakh districts).

- Five poliovirus type-2 isolates are pending genomic sequencing.
Data as of 5 December 2017

EPI Curve of AFP cases by classification, 2017 (up to 5 December 2017)

Syria

- DZ Round 1 mOPV2 (22-27 Jul)
- DZ Round 2 mOPV2 & IPV (22-28 Aug)
- Raqqa Round 1 mOPV2 (12-18 Aug)
- Raqqa Round 2 mOPV2 & IPV (7-13 Oct)

Deir Ez-Zor

- DZ Round 1 mOPV2 (22-27 Jul)
- DZ Round 2 mOPV2 & IPV (22-28 Aug)

Raqqa

- Raqqa Round 2 mOPV2 & IPV (7-13 Oct)
- Raqqa Round 1 mOPV2 (12-18 Aug)

Homs

- cVDPV2
- Compatible
- SL2
- PV2 pending sequencing
- Pending lab results
- En route to lab
- Pending classification
- Discarded
Relevant links

- Global Polio Eradication Initiative (GPEI) website, updated weekly
- Responding to an outbreak of VDPV video
- What is vaccine-derived polio?
- GPEI factsheet—VDPV

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