



Highlights:

- The information provided in this bulletin reflects only the reports from sentinel sites, and not the epidemiological situation overall the country
- The Early Warning Alert & response System (EWARS) has been launched 23rd September 2012, with designated 104 sentinel sites
- Five provinces have reported in the first week; achieved reporting completeness is 36%
- The highest number of Acute Diarrhoea is reported in Latakia (Jabla health district (82 cases) and Almadina health district (60 cases)
- No death is reported

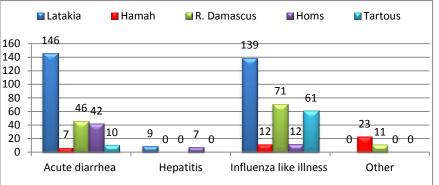
I. Reporting Timeliness & Completeness

The first week of EWARS Reporting has been delayed slightly to be received on the 3rd week of system's implementation (7th October 2012). The achieved completeness of reporting for the first week is 36%, where only five provinces have reported: Latakia, Hama, Rural Damascus, Homs, and Tartous.

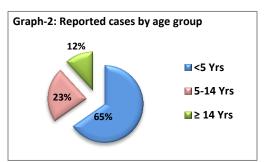
II. Reported cases

A total of 596 cases have been reported, in which 42% are Acute Diarrhoea (251 cases), 49% are Influenza like illness¹ (295 cases), 3% are Hepatitis (16), while 6% are others (34 cases). *See Table-1. The* number and distribution of cases by diseases and per governorates is shown in graph 1 below.

Graph-1: Number and distribution of cases, by Disease-week 39

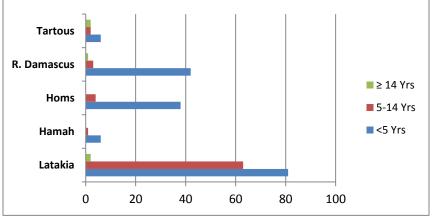


The <u>under 5</u> was the highest percentage of reported cases (65%; 389 cases in which the majority is AD^2 & ILI), followed by <u>5 to 14</u> <u>years old</u> (23%, 137 cases), and <u>greater than 14 years</u> <u>old</u> (12%, 70) see graph 2.



Summary of AD reported cases by Governorate and by age group is shown in graph 3 below.

Graph 3: Distribution of AD cases per Governorate & by age group- week 39



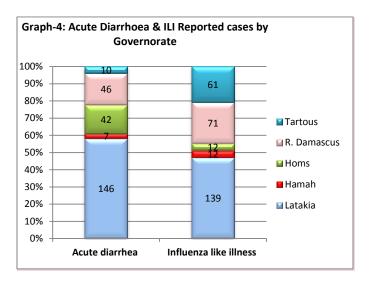
² Acute Diarrhoea

¹ The definition of Influenza like illness (ILI) has been modified slightly during the 2nd workshop of EWARS (8-10 Oct 2012).

Table-1:	Distribution	of	cases	per	age	group	&	by
Governo								

Disease	Age Group	Latakia	Hamah	Homs	R. Damascus	Tartous	Grand Total
_	<5 Yrs	81	6	38	42	6	173
Acute diarrhea	5-14 Yrs	63	1	4	3	2	73
	≥ 14 Yrs	2	0	0	1	2	5
Cholera	<5 Yrs	0	0	0	0	0	0
	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
Hepatitis	<5 Yrs	1	0	5	0	0	6
	5-14 Yrs	6	0	2	0	0	8
	≥ 14 Yrs	2	0	0	0	0	2
	<5 Yrs	127	2	11	32	36	208
Influenza like illness	5-14 Yrs	8	4	1	21	12	46
	≥ 14 Yrs	4	6	0	18	13	41
	<5 Yrs	0	0	0	0	0	0
AFP	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
Measles and	<5 Yrs	0	0	0	0	0	0
	5-14 Yrs	0	0	0	0	0	0
Rubella	≥ 14 Yrs	0	0	0	0	0	0
Tetanus	<5 Yrs	0	0	0	0	0	0
	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
Meningitis	<5 Yrs	0	0	0	0	0	0
	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
1 1	<5 Yrs	0	0	0	0	0	0
Local malaria	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
Rabies	<5 Yrs	0	0	0	0	0	0
	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
	<5 Yrs	0	0	0	0	0	0
тв	5-14 Yrs	0	0	0	0	0	0
	≥ 14 Yrs	0	0	0	0	0	0
	<5 Yrs	0	1	0	1	0	2
Other	5-14 Yrs	0	7	0	3	0	10
	≥ 14 Yrs	0	15	0	7	0	21
Grand Total	<5 Yrs	209	9	54	75	42	389
Grand Total	5-14 Yrs	77	12	7	27	14	137
Grand Total	≥ 14 Yrs	8	21	0	26	15	70

As highest numbers of reported cases, the disaggregation of AD (Acute Diarrhoea) & ILI (Influenza like illness) by governorate is presented in Graph-4.



III. The Preparedness

A second workshop of Early Warning Alert & Response has been conducted from 8th to 10th of October for the Health District Officers from the health districts that are part of the sentinel sites network.

The aim of the workshop was to strengthen the EWAR networking and build the national capacity in preparedness and effective response to the epidemic threats.

As an outcome of the workshop, the timeliness and sustainability of reporting is expected to be noticeably improved.