

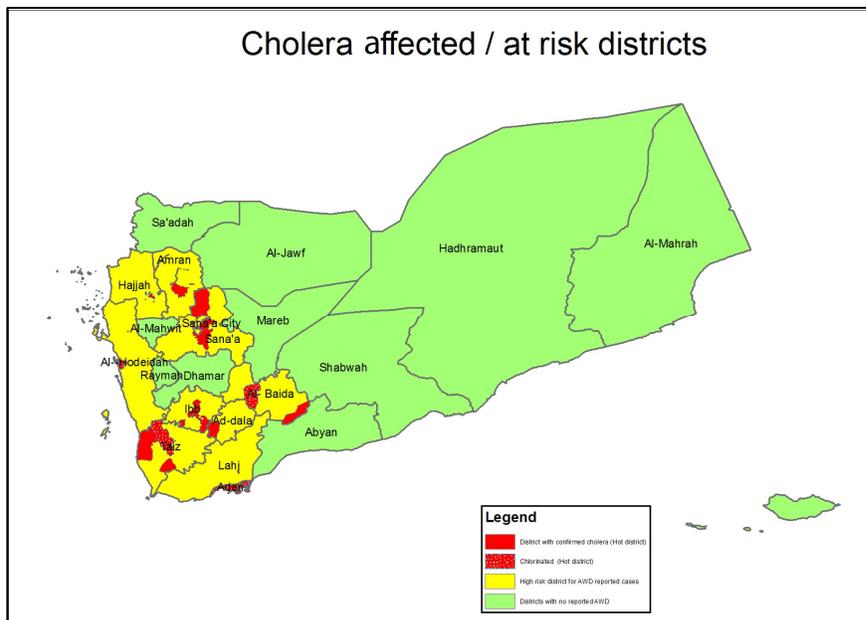


Situation Overview

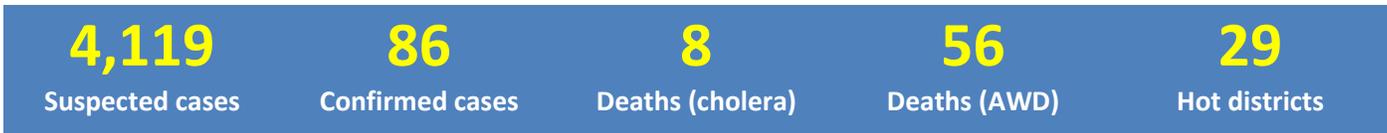
The numbers of cholera cases in Yemen continue to increase, sparking concerns of a significant outbreak.

To date, there are 4119 suspected cases, of which 86 cases have been confirmed by laboratory testing in Sana'a City, Aden, Amran, Al Hudaydah, Al Bayda'a, Lahj, Ibb, Hajjah, Taizz, Al-Dhale'a and Sana'a governorates.

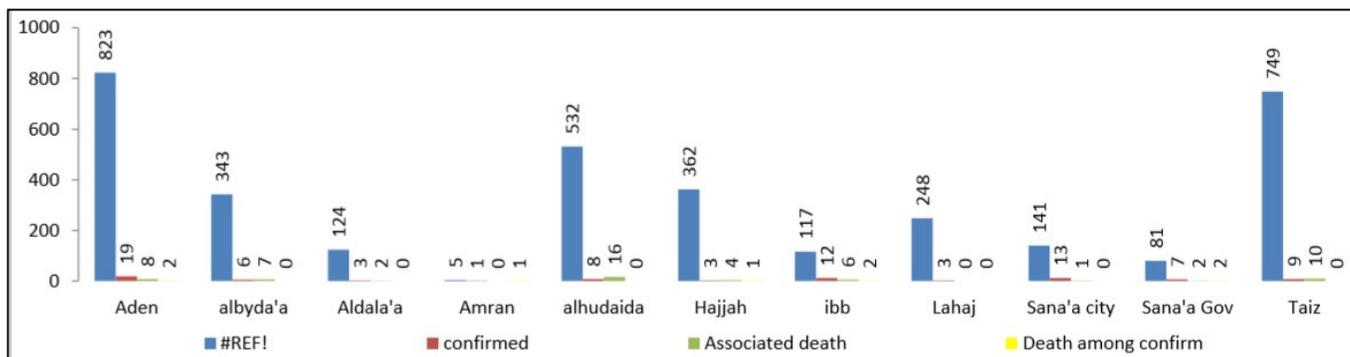
Eight deaths due to cholera have been confirmed in Aden, Amran, Sanaa, Hajjah and Ibb governorates, as well as 58 deaths due to acute watery diarrhoea (AWD).



The cholera outbreak in Yemen was announced by Yemen's Ministry of Public Health and Population (MOPHP) on 6 October 2016 in Sanaa and Al-Bayda'a governorates. WHO estimates that 7.6 million people live in high risk areas in 15 governorates, with projected case estimates up to 76,000 people.



Summary of Cholera/AWD outbreak in Yemen



Response

✦ WHO has supported the establishment of 26 diarrhoea treatment centers (DTC) in eleven governorates, providing them with diarrhea disease kits (DDK), IV fluids (ringer lactate), oral rehydration salt (ORS), IEC materials, case management guidelines as well as incentives to the medical and nursing staff. The goal as per the integrated plan is to open 60 DTCs in the 15 at-risk governorates.



WHO-supported rapid response team visits Sadan area in Hajjah governorate responding to new reports of suspected cholera cases

✦ A joint Health and Water and Sanitation Cholera Task Force continues to monitor and coordinate an integrated strategic humanitarian response, with a leading role from the MoPHP, local water authorities, as well as WHO, UNICEF and a number of partner NGOs, such as Médecins Sans Frontières (MSF) and Action Contre la Faim (ACF).

✦ WHO has trained 240 medics and paramedics to strengthen surveillance case detection, reporting, prevention and response to the cholera outbreak.

✦ Two central cholera emergency rooms in Aden and Sana'a are being supported by WHO to receive and analyse data from governorates, issue daily situation updates and mobilize emergency response teams.

✦ WHO-supported rapid response teams are on standby in all governorates to respond to any new report of suspected cholera case and identify the water sources for the community to collect samples and to chlorinate. WHO has provided the teams with medical supplies, including Doxycycline caps, Erythromycin table and syrup, paracetamol and zink tab, Hygiene kits (alcohol base rub for hand washing) and gloves. WHO is supporting the rapid response teams with operational costs to conduct outbreak investigations and transporting of specimens.

✦ WHO has provided the central lab in Taiz with cholera antisera from Aden; on 6 November, rapid diagnostic kits (360) arrived in Sana'a to be distributed to all affected districts, especially in remote areas.

✦ In cooperation of the Local Council and Ministry of Health, WHO has trained 30 people on water source chlorination to disinfect water in 23 private wells, 27 treatment water stations, water trucks and households in Shoab district of Sana'a City. In addition, health education materials have been distributed to households in the district.

✚ WHO, in cooperation with the Local Councils, is distributing chlorine tablets for households in Al Mahabishah district of Hajjah governorate to disinfect drinking-water and sterilize water tanks.

✚ Water wells in all districts reporting confirmed cholera cases in Sana'a, Aden, Al-Hudaydah and Lahj have been tested and chlorinated.

✚ WHO has printed and distributed thousands of leaflets, posters and brochures to be distributed in health facilities, schools and public places to raise awareness about cholera and diarrheal diseases.



WHO and Public Health Office in Hudaydah have trained 43 doctors and nursing staff on acute watery diarrhoea/ cholera outbreak management

Challenges and concerns

✚ Surveillance to monitor the outbreak, including lab diagnostics of the new cases, treatment of patients with suspected cholera/AWD, prevention which includes water and sanitation activities and health education. Scaling up water and sanitation activities remains a major challenge to contain the outbreak due to the funding gap and the scope of infrastructural damages.

✚ In terms of treatment and surveillance, the 19-month-long conflict and import restrictions continue to cripple the capacity of the national health system to adequately respond and therefore.

Funding

✚ On 21 October, Health and WASH clusters issued an appeal totaling US\$ 22.2 million to implement the integrated cholera response plan to contain the spread of acute watery diarrhea/ cholera in Yemen. Of the US\$ 8.6 million required by the health cluster, contributions totaling US\$1.7 million (20% of requirements) have been received by WHO. An additional \$4 million has been pledged.

FOR FURTHER INFORMATION:

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