12 July 2018 – The Ministry of Health of Somalia has announced 344 new cases of cholera, including one associated death for week 26 (25 June to 1 July) of 2018. There has been an increase of newly reported cases since week 23. The cumulative total of cases is 5,582, including 40 associated deaths (case-fatality rate 0.7%) since the beginning of the current outbreak in December 2017. Among them, 40% of the cases are below 2 years old.

This week, the active transmission was reported in three regions: 11 districts in Banadir; three districts (Afgoye, Kurtunwarey, and Merka) in Lower Shabelle; and Kismayo district in Lower Jubba. 33% of the cases (115 cases) were reported in the flood-affected regions (Lower Shabelle and Lower Jubba). In Kismayo, affected communities especially internal displaced persons (IDPs) in Farjano are reported to be using contaminated water due to floods. The case fatality rate in the Farjano cholera treatment center is the one of the highest (1.1%). Banadir reported 36% of the new cases (124) including one death case, where the highest concentration of IDPs reside in the camps. Banadir hospital has admitted the highest number of cholera admissions out of all other treatment facilities in the country, with a cumulative admission count of 2,171 cases since the beginning of the outbreak.

WHO provides leadership and support for activities with the Ministry of Health (MoH) to respond to this outbreak. Coordination meetings were held in the flood affected districts with MoHs at Federal and State levels to effectively collaborate with health cluster partners. WHO has also continued to support clinical care delivery, including supervision and monitoring of case management in cholera treatment centers. On the job trainings were conducted in Kismayo, Farjano and Banadir, and 44.1 tons of medical supplies were prepositioned in the flood affected regions. Surveillance and investigation of rumors have been ongoing and rapid response teams have been deployed in Jowhar and Kismayo this week.

WHO is working with WASH cluster partners on distribution of hygiene kits and chlorination of water sources in flood-affected parts of Lower Jubba, Hiraan and Gedo regions.

WHO support has also enhanced laboratory capacity. Stool samples are being collected from six cholera treatment centers in four regions (Banadir, Hiraan, Lower Jubba and Middle Shabelle). Of 248 stool samples collected since the beginning of this year, 79 tested positive for *Vibrio cholerae*, serotype O1 Ogawa.

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