

Iraq | 8 October 2015 – The World Health Organization (WHO), Iraq's Ministry of Health and health partners have stepped up their response to contain the current cholera outbreak and prevent its spread. Comprehensive and multisectoral response activities cover the areas of coordination, surveillance, laboratory, case management, infection control, water sanitation and hygiene (WASH) promotion, risk communications, as well as oral cholera vaccine.

Situation

As of 7 October, the cholera outbreak has spread to 15 governorates, with a total of 1201 laboratory confirmed cases of cholera.

The epicentre of the epidemic appears to be in southern part of the country along the two rivers, and the outbreak may be spreading to the northern regions of the country. In view of the current security situation and increased population movement in Iraq, the risk of further spread to neighbouring countries in the Region is considered high. A few cases of cholera have spread to neighbouring countries Kuwait and Bahrain.

Additionally, millions of people are expected to visit Karbala governorate in the south on 23 October 2015 to take part in an annual religious gathering. This gathering will bring together pilgrims from all over Iraq, as well as from Islamic Republic of Iran, Pakistan, India, and member countries of the Gulf Cooperation Council, posing an additional risk for the disease to spread internationally.

Response

A national cholera task force has been established in Iraq to coordinate key partners on cholera preparedness and response activities at national and provincial levels. Under the task force, a Cholera Command and Control Centre has been activated to enhance multisectoral coordination for an effective response to the outbreak. Rapid response teams continue to be deployed to carry out necessary investigation and response activities.

Active surveillance has been stepped up in the affected governorates for case findings in the community. In addition, case management has been standardized across all health facilities currently treating cholera cases.

In cholera-affected areas, particularly in camps hosting internally displaced persons and refugees, preparedness activities have also been geared up. These include:

- Distribution of bottled water, water kits, hygiene kits, bleaching powder and aqua tablets;
- Establishment of water distribution points;
- Sanitation activities, including disinfecting septic tanks at health facilities and conducting targeted sanitation improvements, as well as regular cleaning of latrines and bathing facilities and proper solid waste collection, disposal and management;
- Dissemination of key messages on cholera prevention through social media, national radio channels, SMS messages and door-to-door campaigns.

Additionally, WHO has prepositioned 17 diarrhoeal disease kits for the treatment of 6800 moderate and 1700 severe cholera cases. Almost 1000 rapid diagnostic tests for cholera were also procured to support the outbreak response. Discussions are ongoing with the International Coordinating Group to release oral cholera vaccines from the global stock. A risk assessment to identify priority groups for vaccination and a vaccination operational plan is being developed.

To ensure capacity of health staff nationwide on cholera case management and laboratory confirmation, WHO has trained approximately 48 national health staff around the country. WHO has also deployed a team of international experts under the Global Outbreak Alert and Response Network to support the Ministry of Health response to the outbreak.

Related links

[Factsheet on cholera](#)

[Cholera in the Eastern Mediterranean Region](#)

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