



Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 38

Reporting Period: 19 – 25 Sep , 2016

Highlights

- ◆ **Number of reporting sites: One hundred and thirteen (113)** reporting sites (87% of the total EWARN reporting sites) including seventy-one (71) in internally displaced people’s (IDPs) camps, five (5) in refugee camps and thirty-seven (37) mobile clinics submitted their weekly reports completely and in a timely manner.
- ◆ **Total number of consultations in Week 38:** 41 523 (Male=18 588 and Female=22 935) marking a increase of 19,782 since last week, (Total consultations in Week 37: 21,741).
- ◆ **Leading causes of morbidity in the camps:** Acute respiratory tract infections (ARI) (n=17,724), acute diarrhoea (AD) (n=2,605) and skin diseases (n=1,107) remained the leading causes of morbidity in all camps and areas hosting displaced populations served by mobile clinics during the reporting week.
- ◆ **Number of alerts in Week 38:** Ten (10) alerts were generated through EWARN. Eight alerts were reported from IDPs camps and two from refugee camps during this week. The alerts were investigated within 72 hours, of which eight were verified as true and two false. They were responded by the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).

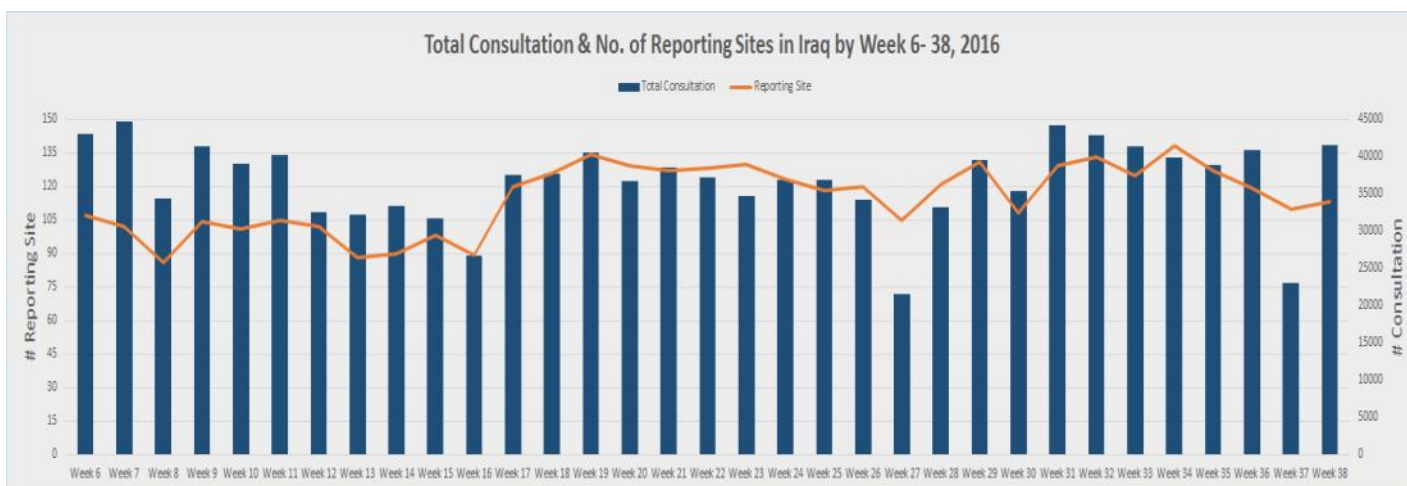
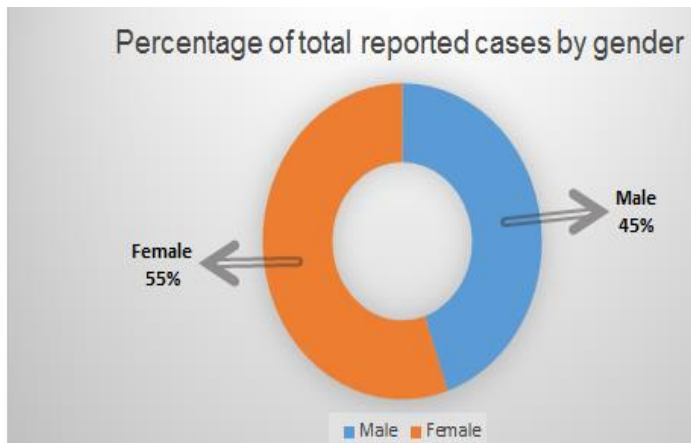
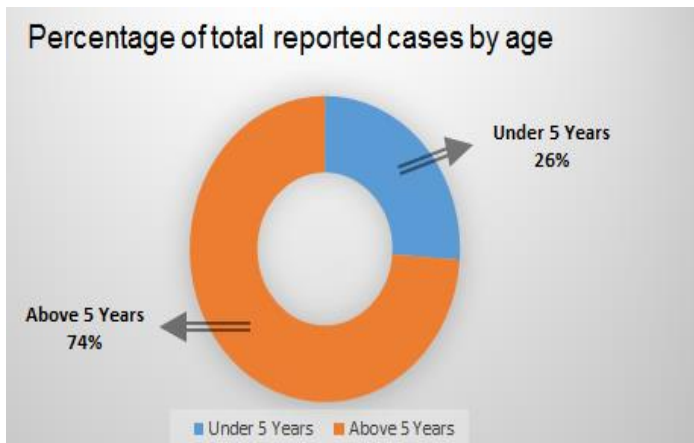


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 6–38, 2016

Distribution of total consultations in the camps by age and gender (Week 38, 2016)



Morbidity Patterns

IDPs camps:

During Week 38, the proportions of acute respiratory tract infections (ARI), acute diarrhoea and skin infestations, including scabies, in IDP camps decreased (see Figure II).

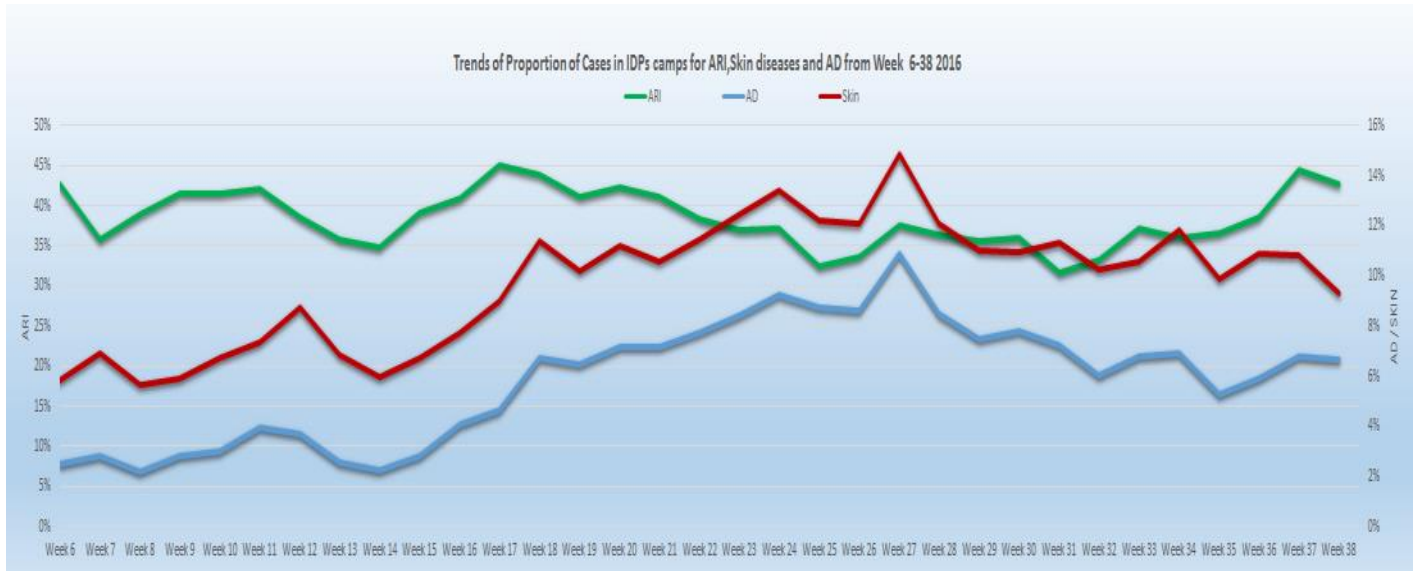


Figure II: Distribution of the acute respiratory infection, acute diarrhoea and scabies in IDPs camps, Week 6–38, 2016

Refugee camps:

During Week 38, the proportions of acute respiratory tract infections (ARI), acute diarrhoea and skin infestations including scabies indicated a slight decrease from the previous week (see Figure III).

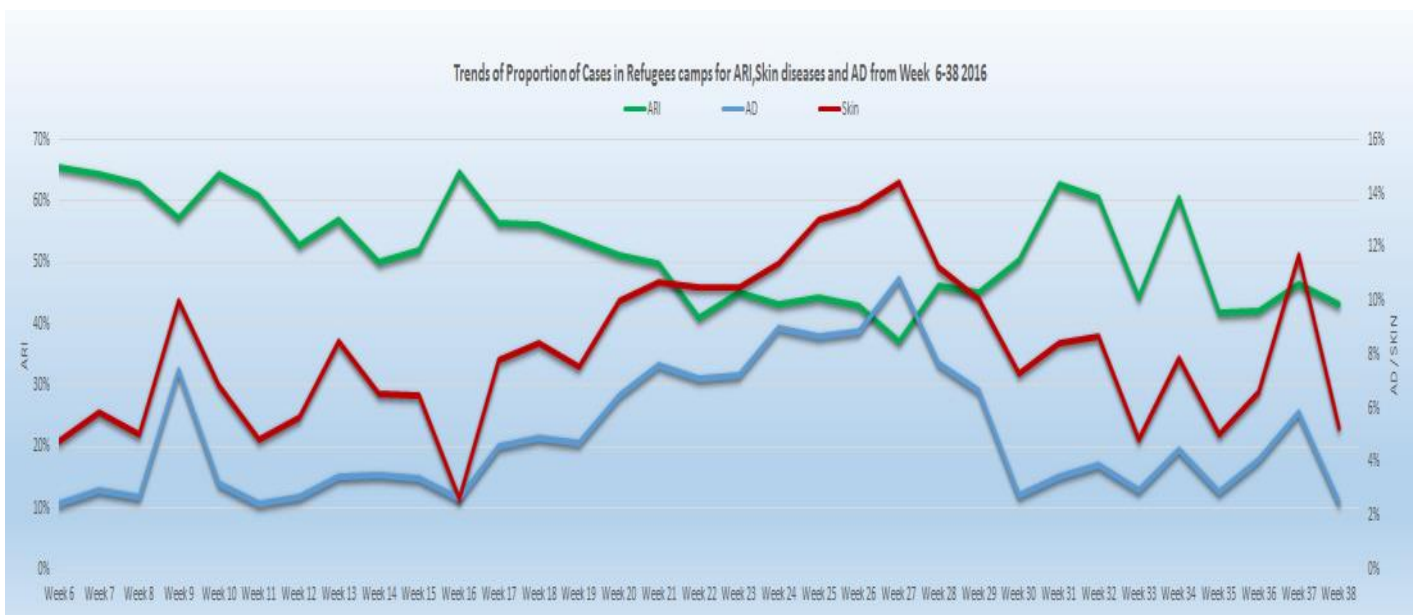


Figure III: Distribution of the acute respiratory infection, acute diarrhoea and scabies in refugee camps, Week 6–38, 2016

Distribution of the common diseases by proportion and location for IDPs camps

Figure IV below indicates the proportions of acute respiratory tract infections, acute diarrhoea and skin infestations, including scabies, which comprises the highest leading causes of morbidity in camps for internally displaced persons for Week 38, 2016.

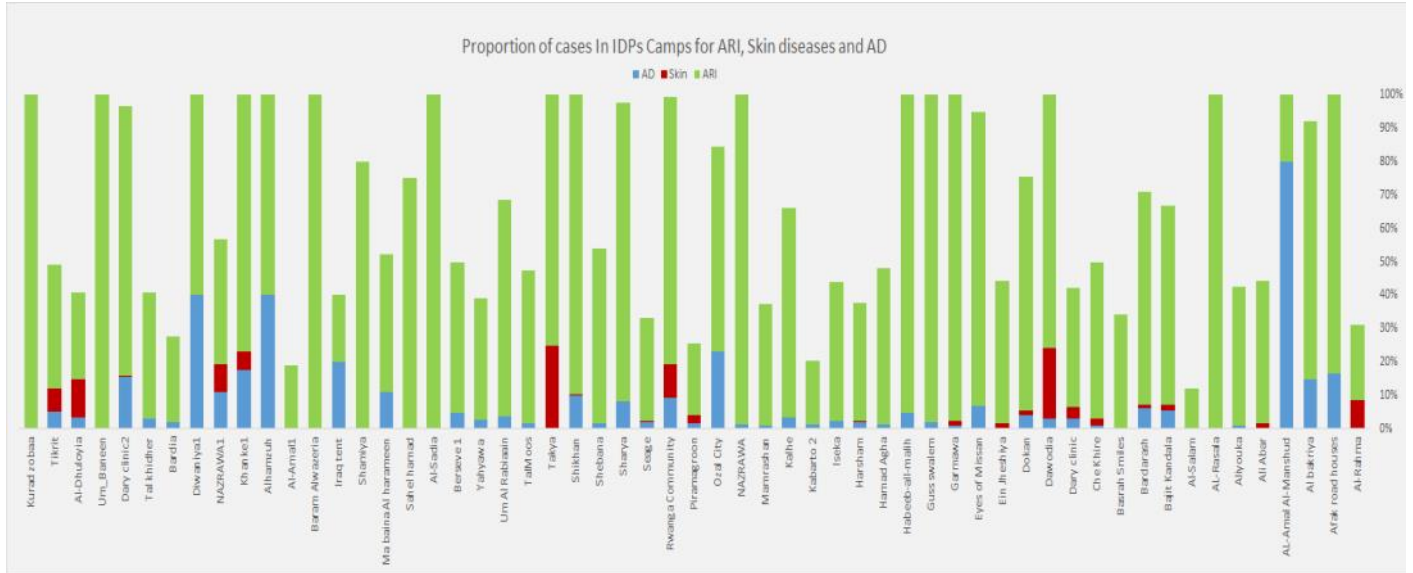


Figure IV: Proportion of cases of ARI, AD and scabies in IDPs camps for Week 38, 2016

Distribution of the common diseases by proportion and location for refugee camps

Figure V below indicates the proportions of acute respiratory tract infections, acute diarrhoea and skin infestations, including scabies, which comprises the highest leading causes of morbidity in refugee camps for Week 38, 2016.

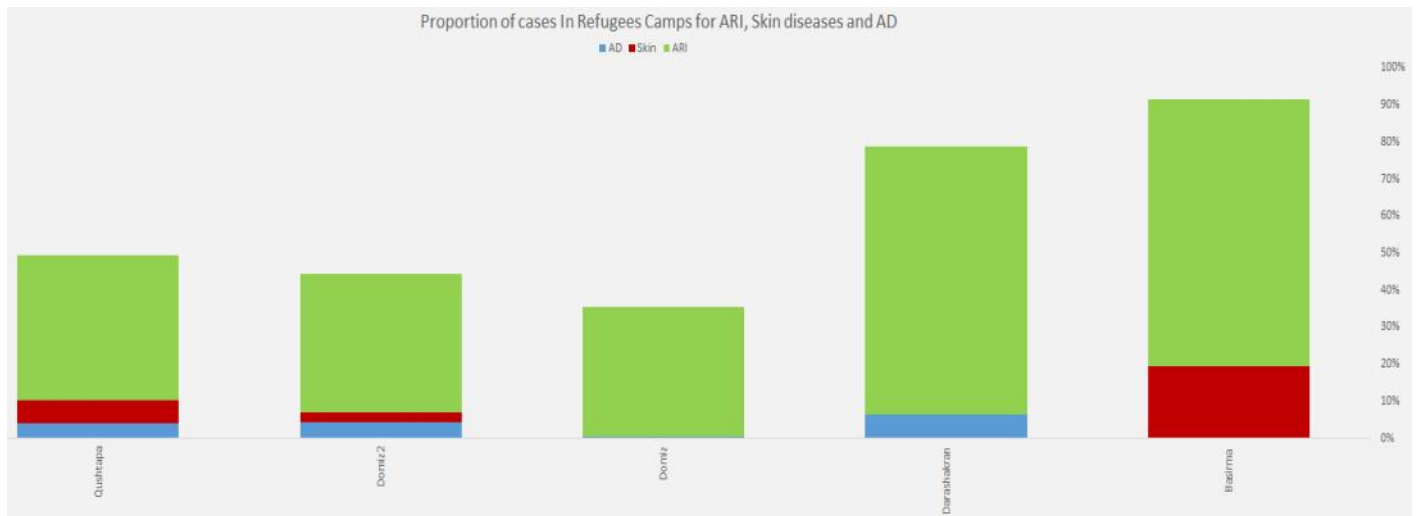


Figure V: Trend of proportions of cases of ARI, AD and scabies in refugee camps for Week 38, 2016

Distribution of the common diseases by proportion and location for IDPs covered by mobile clinics

Figure VI below indicates the proportions of acute respiratory tract infection, acute diarrhoea and skin infestations, including scabies, which comprises the highest leading causes of morbidity of IDPs covered by mobile clinics for Week 38, 2016.

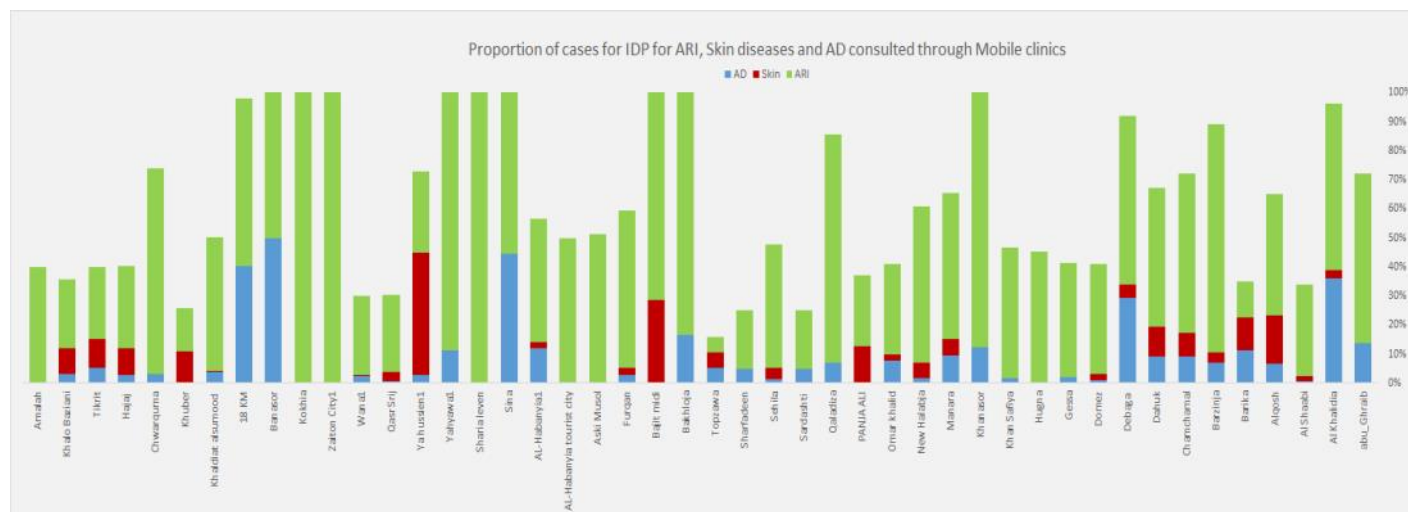


Figure VI: Distribution of ARI, AD and scabies covered by mobile clinics for the IDPs, Week 38, 2016

Trends of S. Pertussis

From Week1 to Week 38, 112 suspected pertussis cases were reported through the EWARN in Iraq in 2016. In Week 38, MSF-CH clinic in Abu Ghraib in Baghdad, Kerkh DOH reported two cases, Alrahma clinic operated by UIMS in Salah Addin reported two cases and Debaga mobile clinic running by IOM in Erbil DOH reported one case.

Salah Addin reported 95 suspected cases of pertussis (85%) ; Sulaimaniya reported seven cases (6%), Anbar reported four cases (4%); and Baghdad Kerkh Qadissiya and Erbil reported two cases (2%) each during the period from Week 1 to Week 38 in 2016.

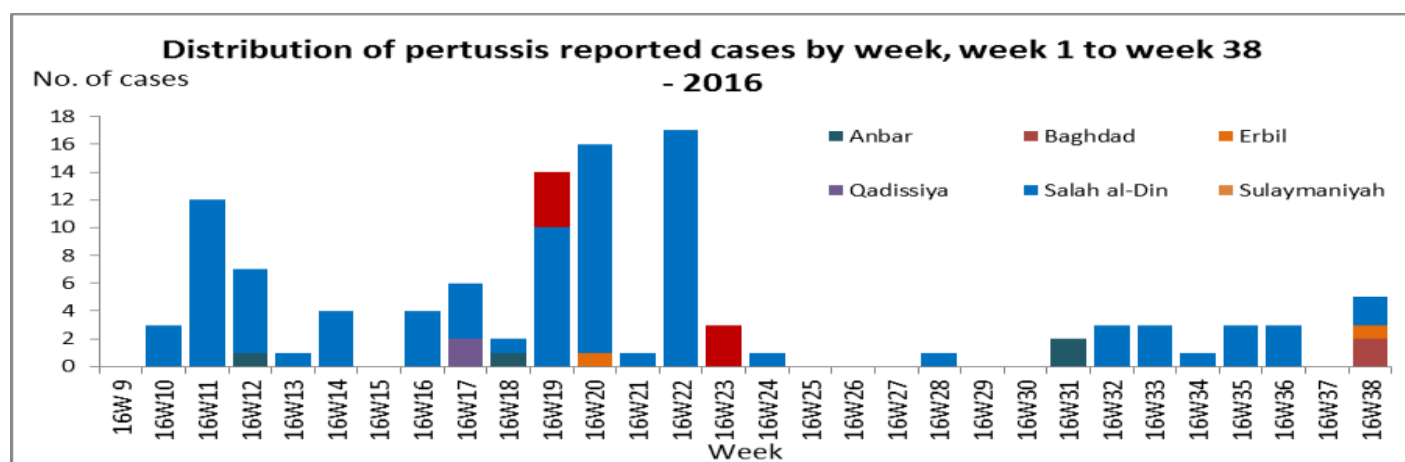


Figure VII: Distribution of suspected measles reported cases by governorate, Week 1– 35, 2016

Trends of waterborne diseases in IDPs and refugee camps

Figures VIII and IX below show a decreasing trends of waterborne diseases (acute diarrhoea, acute bloody diarrhoea and acute jaundice syndrome) reported from camps for internally displaced persons and refugee camps.

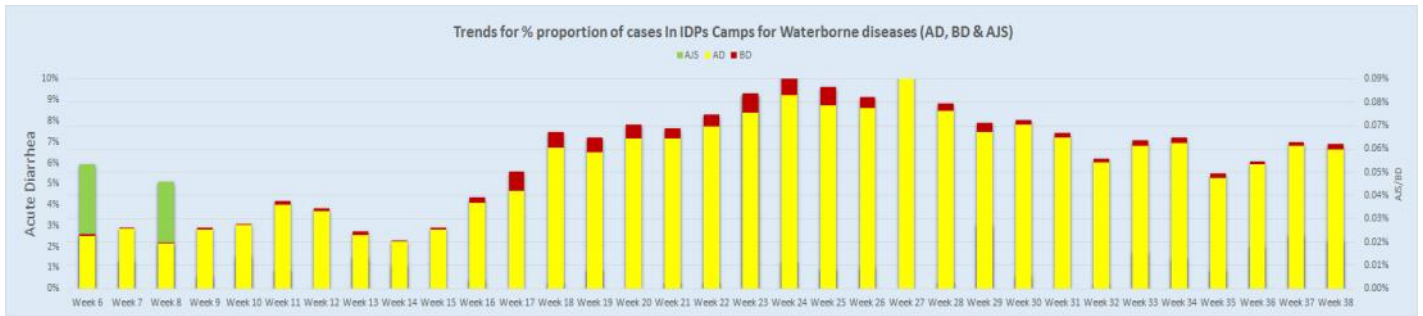


Figure VIII: Trend of waterborne diseases from IDPs camps, Week 6-38, 2016

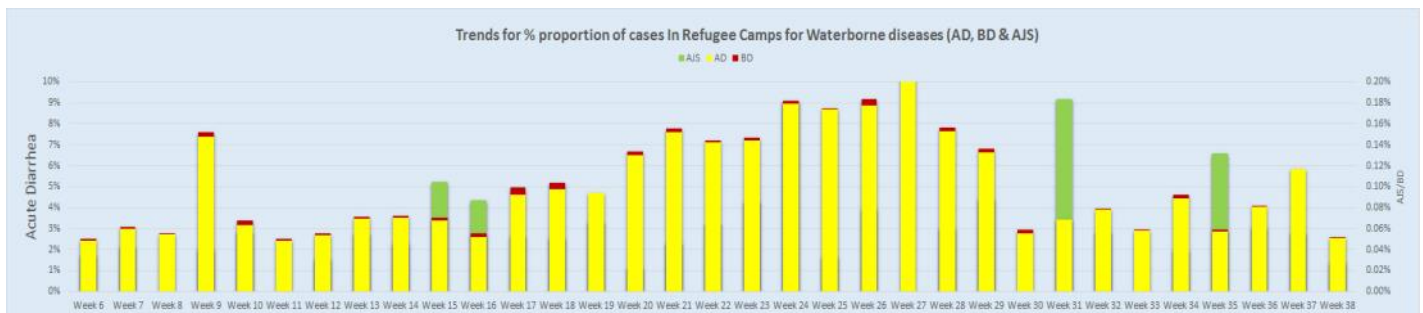


Figure IX: Trends of waterborne diseases from refugee camps, Week 6-38, 2016

Trends of Acute Diarrhoea

Figure X below shows the trends of acute diarrhoea reported in the period from Week 1 to Week 38 in 2015 and 2016 through the EWARN system. The total reported cases of acute diarrhoea were 74,221, of which 54% were less than five years old. Around 51% of the reported cases were males. This week showed an increasing trend of the diseases compared to the last three weeks. In 2016, Anbar reported 36% of total reported AD cases, followed by Dohuk with 21%, Ninewa 11%, Sulaymaniyah 9%, Erbil 8%, Kirkuk 5%, Baghdad 4%, and Salahuddin 3%.

Anbar reported 26543 cases in total from Week 1 to Week 38 in 2016. 49% of all cases were females. 46% of all cases were children less than 5 years old. In Duhok, out of the 15046 reported cases, 48% were female and 67% were less than 5 years old.

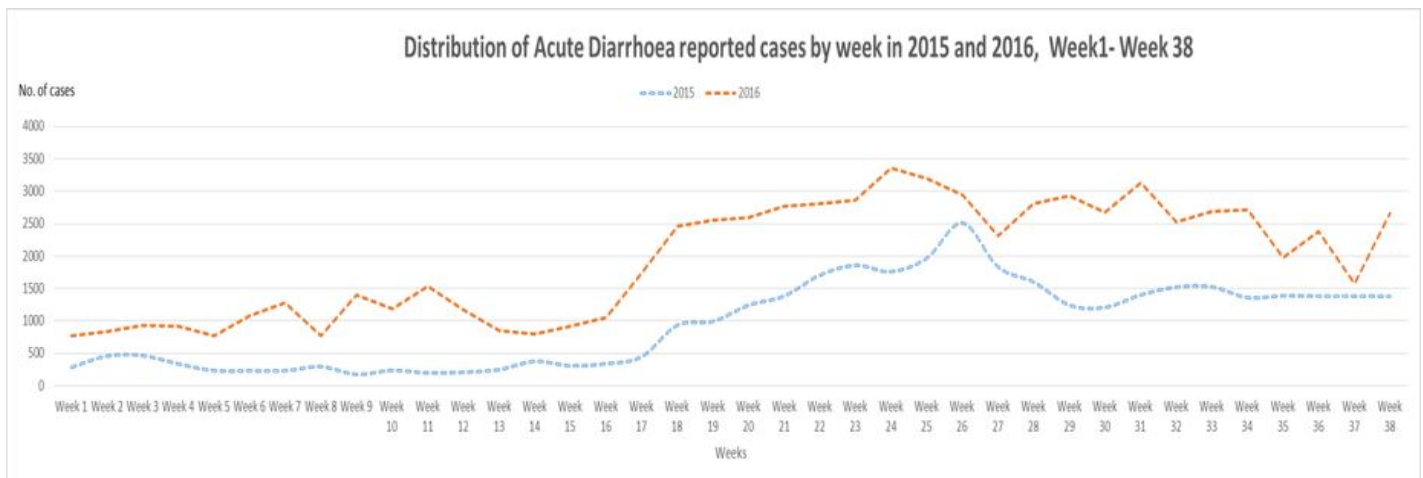


Figure X: Distribution of acute diarrhoea reported cases by week, Week 6–Week 38, 2015-2016

Ten alerts were generated through EWARN according to defined thresholds. Eight were from IDPs camps and two from refugees camp . All alerts were investigated within 72 hours. Eight alerts were verified as true and responded to by the the Departments of Health, WHO and the relevant health cluster partners. (please see Alert and Outbreaks table below).

Sn	Alert	Location	Governorate	District	IDP/Refugee Camp	# of cases	Run by	Investigation and Response within/48-72Hrs DOH/WHO/NGO	Sample Taken Yes/No	Alerts Outcome True/False	Public Health Interventions Conducted
1	Suspected Leishmaniasis	AL-Habanyia tourist city	Anbar	Falluja	IDPs	1	UIMS	Yes	No	TRUE	No
2	Suspected Leishmaniasis	Al-Salam	Anbar	Ameriyat Al-Fallujah	IDPs	4	UIMS	Yes	No	TRUE	No
3	Suspected Leishmaniasis	Darkar	Dahuk	Dahuk	IDPs	1	STEP-IN	Yes	No	TRUE	Yes
4	Suspected Leishmaniasis	Gawilan Camp	Dahuk	Dahuk	Refugees	1	PU-AMI	Yes	No	TRUE	Yes
5	Food poisoning	Bajet Kandala	Dahuk	Zako	IDPs	2	PU-AMI	Yes	No	TRUE	Yes
6	Suspected Leishmaniasis	Qasir Yazdin	Dahuk	Sumel	IDPs	1	MC-PU-AMI	Yes	No	FALSE	No
7	Suspected Leishmaniasis	Al-Rahma	Salah-Al-Din	Dijlah	IDPs	1	UIMS	Yes	No	TRUE	No
8	Suspected Pertusis	Al-Rahma	Salah-Al-Din	Dijlah	IDPs	2	UIMS	Yes	No	FALSE	No
9	Suspected Measles	Arbat IDP	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	TRUE	No
10	Suspected Measles	Arbat Camp	Sulaymaniyah	Arbat	Refugees	1	EMERGENCY	Yes	Yes	TRUE	No

Trends of alerts

Figure X shows the number of alerts (true & false) generated through EWARNs per week which have been investigated and responded accordingly by the Ministry of Health, WHO and health cluster partners.

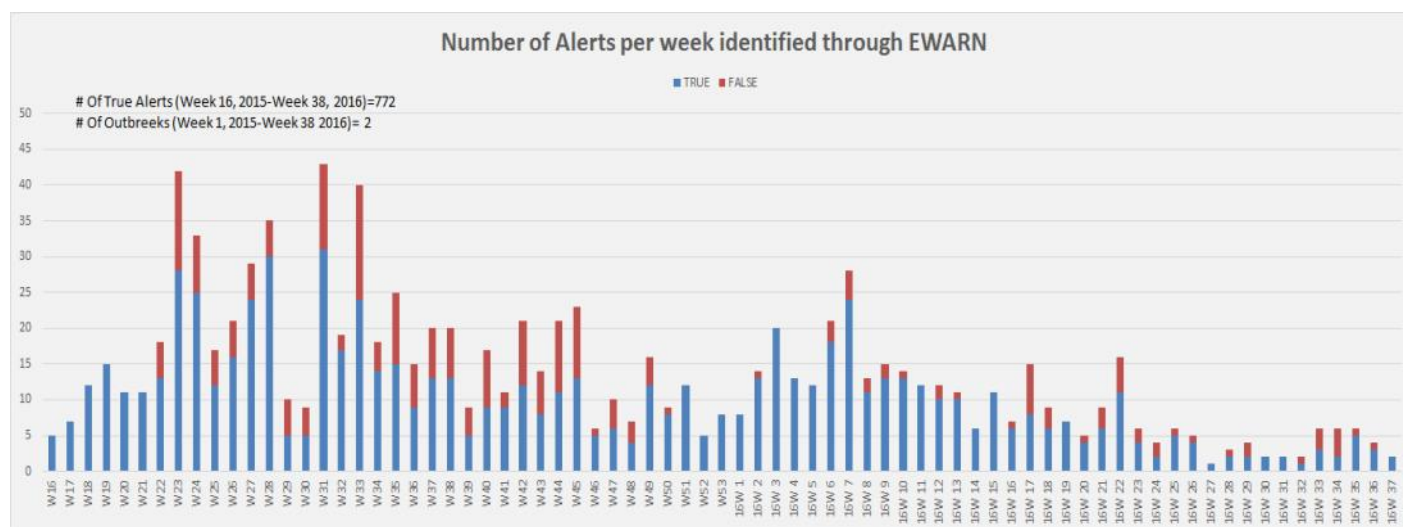


Figure X: Alerts generated through EWARN surveillance Week 16, 2015—Week 38, 2016

For comments or questions, please contact

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