



# Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 23

Reporting Period: 6 June –12 June , 2016

## Highlights

- ◆ **Number of reporting sites:** One hundred and twenty-four (124) reporting sites including (93% of the total EWARN reporting sites) seventy (70) in internally displaced people’s (IDP) camps, five (5) in refugee camps and forty-nine (49) mobile clinics submitted their weekly reports timely and completely.
- ◆ **Total number of consultations:** 33 975 (Male=15 522 and Female=18 453) marking an decrease of 2 122 since last week.
- ◆ **Leading causes of morbidity in the camps:** Acute respiratory tract infections (ARI) (n=12 741), acute diarrhea (AD) (n=2 853) and skin diseases (n=1 338) remained the leading causes of morbidity in all camps and displaced population areas served by mobile clinics during this reporting week.
- ◆ **Number of alerts:** Six (6) alerts were generated through EWARN, and all of them were from IDPs camps (including two from a mobile clinic) during this reporting week. The alerts were investigated within 72 hours, of which four were verified as true and were further investigated and responded by the relevant health cluster partners. (Details: see Alerts and Outbreaks Section).

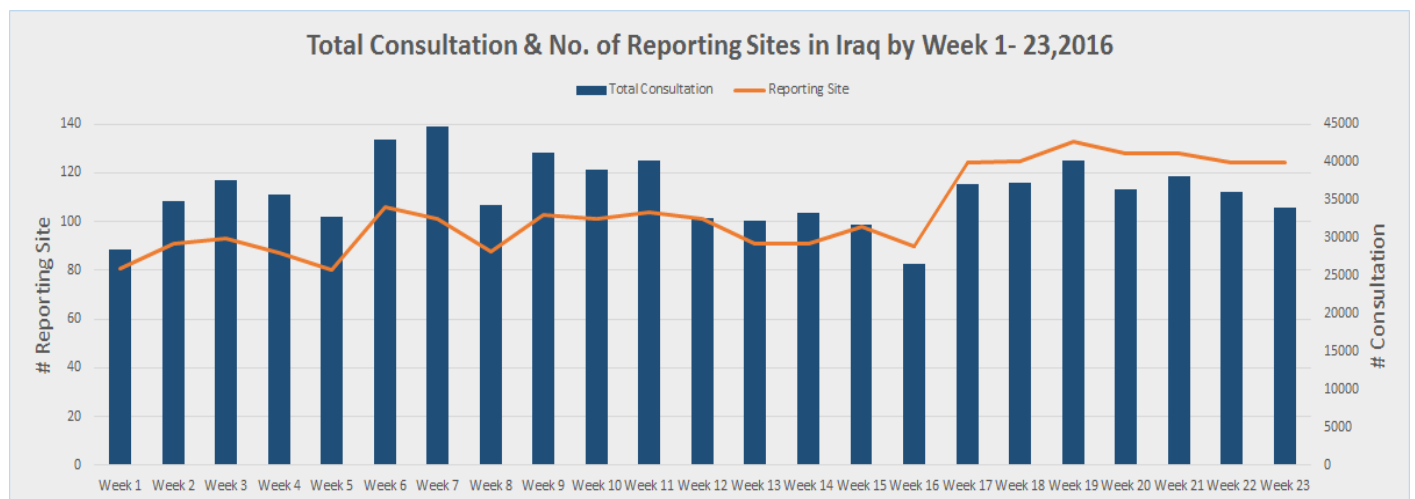
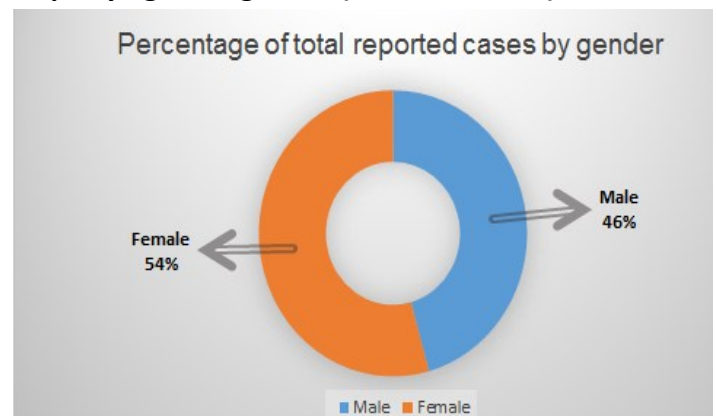
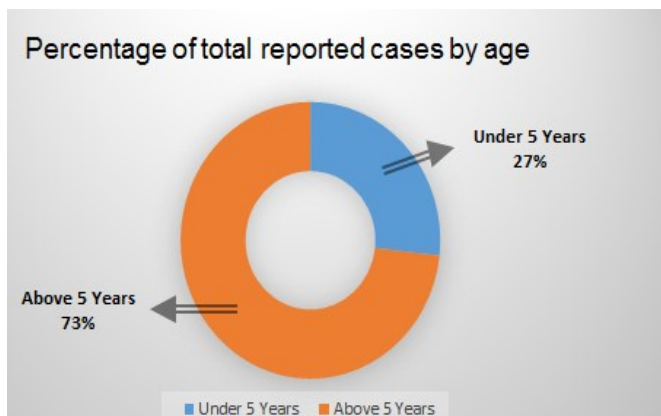


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 1 – 23, 2016

## Distribution of total consultations in the camps by age and gender (Week 23, 2016)



# Morbidity Patterns

## IDP camps:

During Week 23, the proportions of acute respiratory tract infections (ARI) showed a slight decrease from the previous 5 weeks, while proportions of acute diarrhea and skin infestations including scabies in IDP camps have been showing a decreasing since Week 17 (see graph below).

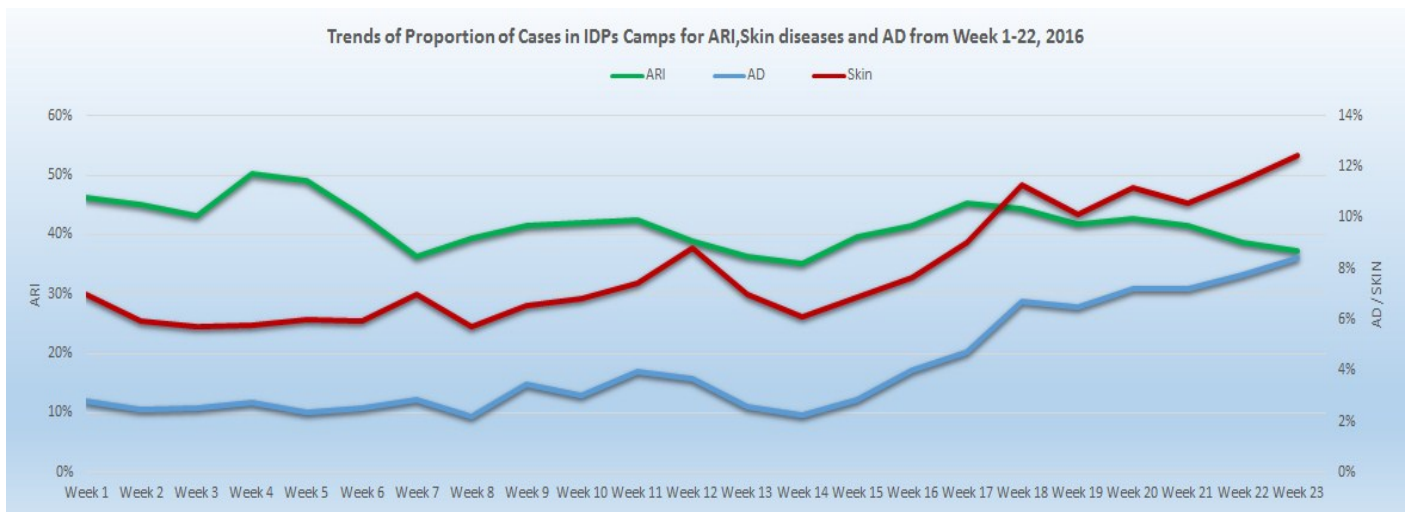


Figure II: Distribution of acute respiratory infection, scabies and acute diarrhea in IDP camps Week 1 –23, 2016

## Refugee camps:

During Week 23, the proportion of acute respiratory tract infections (ARI) indicated a slight increase from the previous week. The proportions of acute diarrhea and skin infestations including scabies trends have been showing a continued increase in the trend after Week 19 (see graph below).

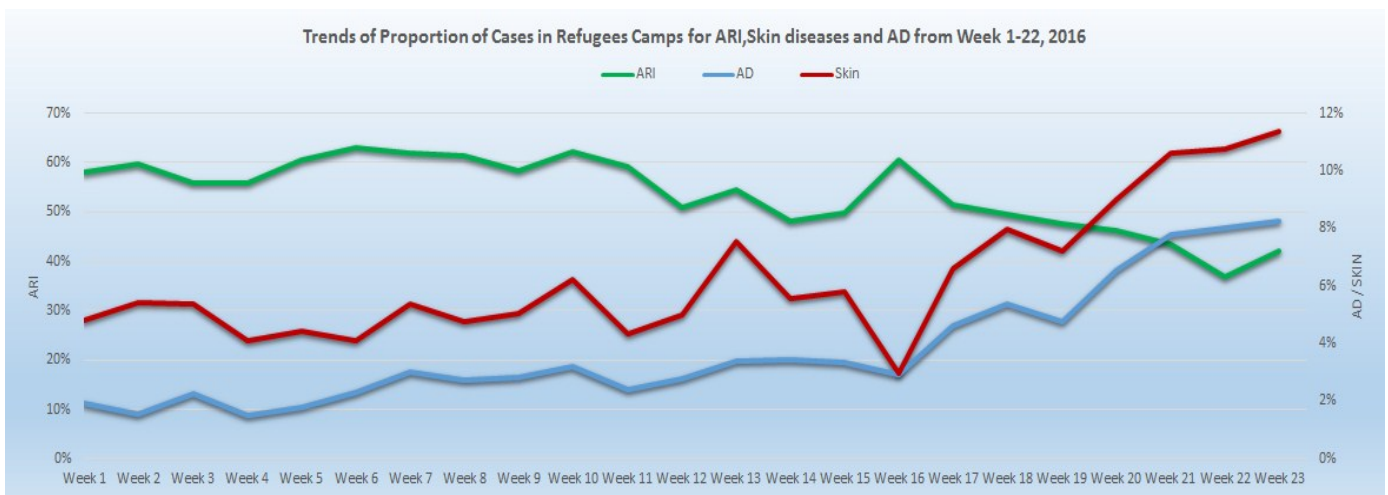


Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps Week 1 –23, 2016

**Distribution of the common diseases by proportion and location for IDP Camps**

The graph below indicates the proportion of cases of acute respiratory tract infections, acute diarrhea, and skin infestations including scabies which comprises the highest leading causes of morbidity in IDP camps for Week 23, 2016.

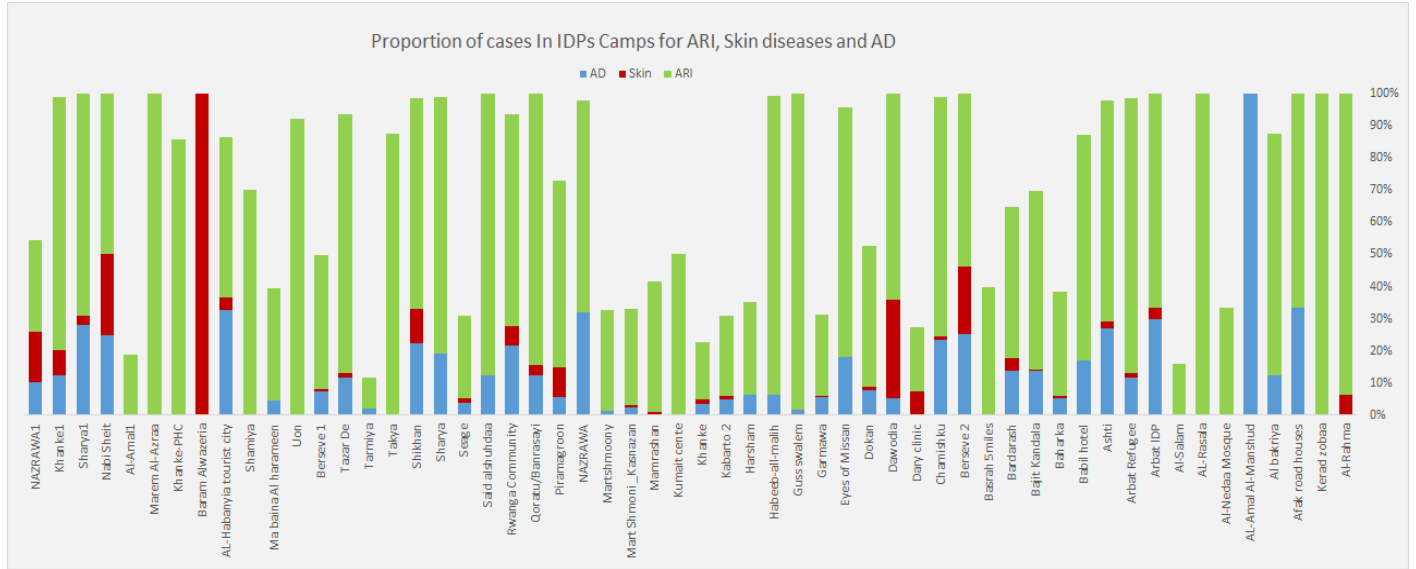


Figure IV: Proportion of cases of ARI, scabies and AD in IDP camps for Week 23 2016

**Trends of diseases by proportion and location for refugee camps**

The graph below indicates the proportion of cases of acute respiratory tract infections, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity in refugee camps for week 23, 2016.

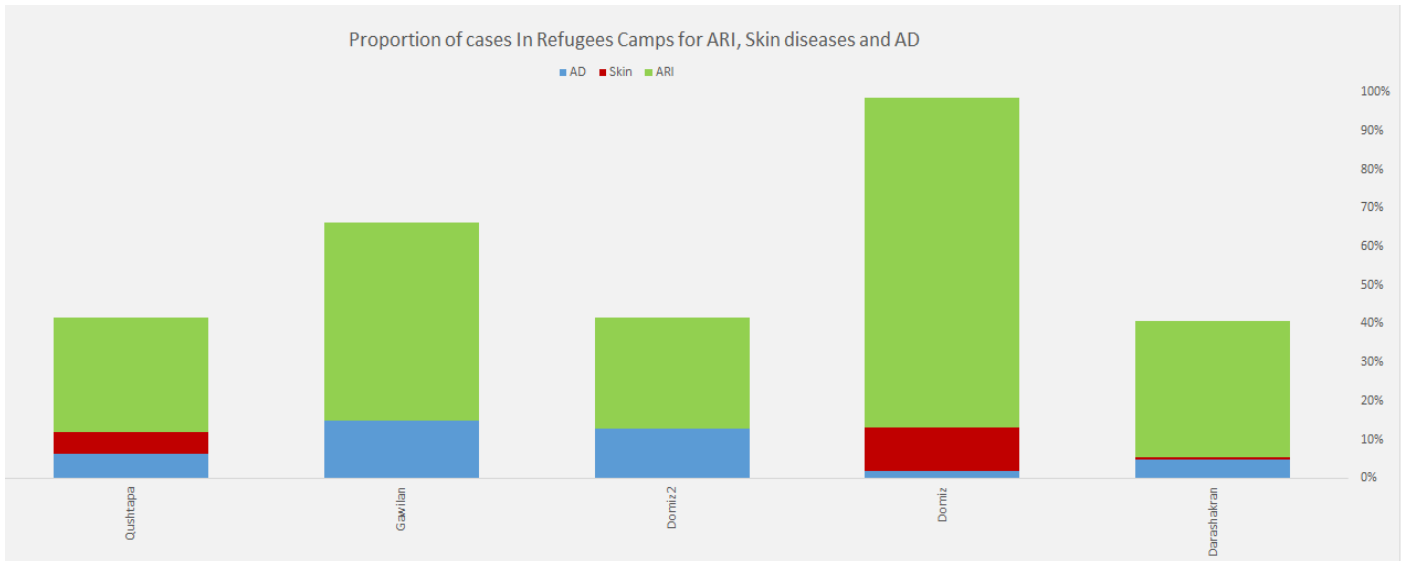


Figure V: Trend of proportions of cases of ARI, scabies and AD in refugee camps for Week 23, 2016

### Trend of diseases by proportion and location for off camp IDPs covered by mobile clinics

The graph below indicates the proportion of cases of acute respiratory tract infection, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity in off camp IDPs covered by mobile clinics for Week 23, 2016.

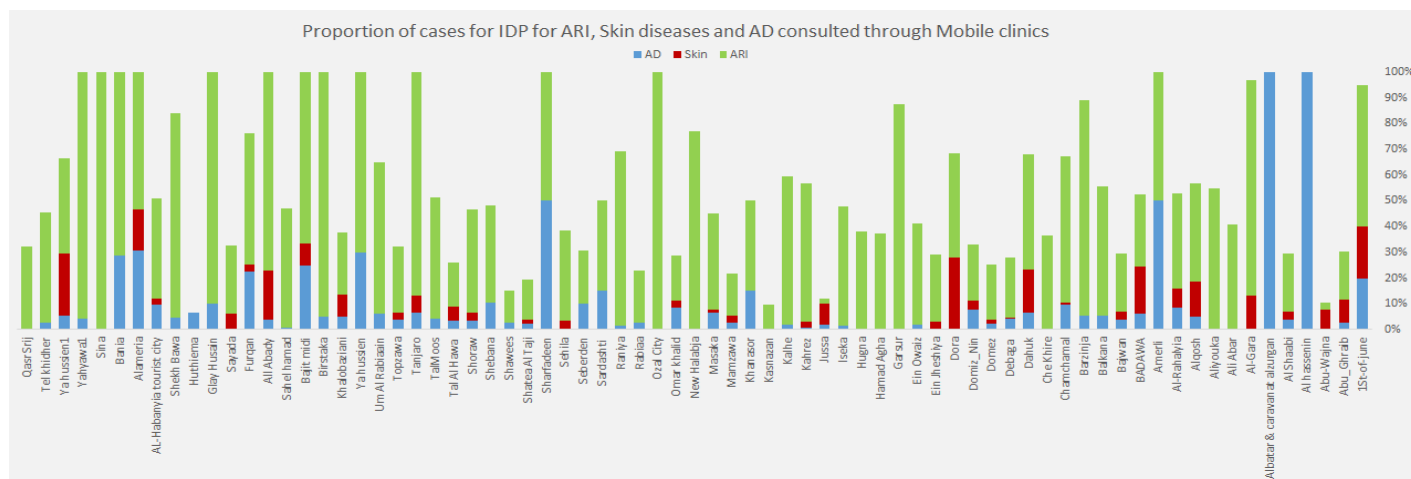


Figure VI: Trend of proportions of IDP cases for ARI, scabies and AD covered by mobile clinics for Week 23, 2016

### Trends of measles disease

Fifty-seven suspected measles cases have been reported from all the EWARN reporting sites during 2016. From Week 1 to Week 23, some 29 (51%) of the cases were reported from Sulaymaniyah sporadically. Peaks of the disease trend were observed during Week 7 and Week 17. Although during early 2015, mass prevention campaign of measles have been conducted in Sulaymaniyah, the regular reporting of measles may indicate low routine coverage rate in these camps. Lab confirmation and further preventive measures will be considered to reduce the burden of the disease in the camps, specially in the region of Sulaymaniyah.

Distribution of Suspected Measles reported cases by Governorate , 1-23 Week, 2016

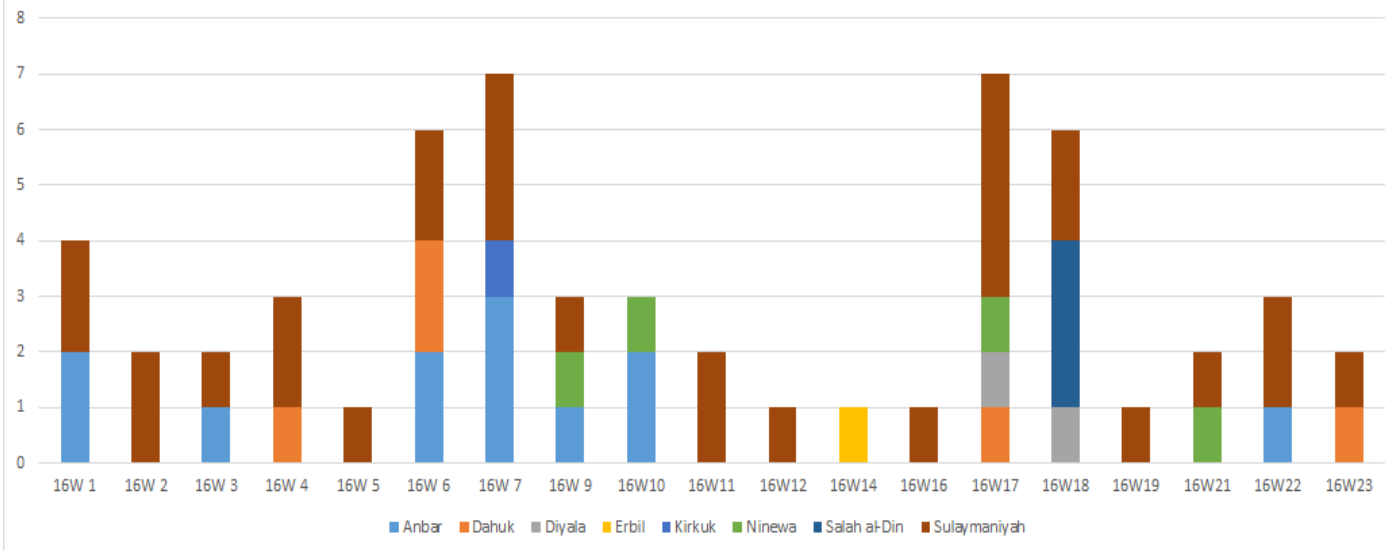


Figure VII: Distribution of suspected measles reported cases by governorate, Week 1- 23, 2016

### Trends of waterborne diseases in IDP and refugee camps

The graph below shows the trends of waterborne diseases (acute diarrhea, bloody diarrhea and acute jaundice syndrome) reported from IDP camps and which indicate a slight increase in waterborne diseases. (see graph below)

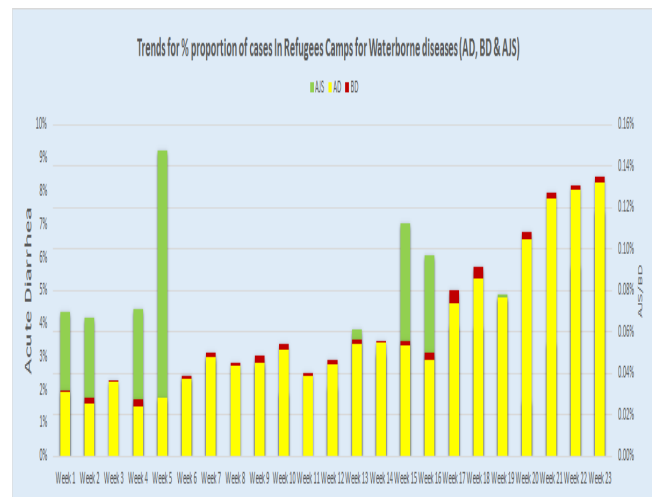
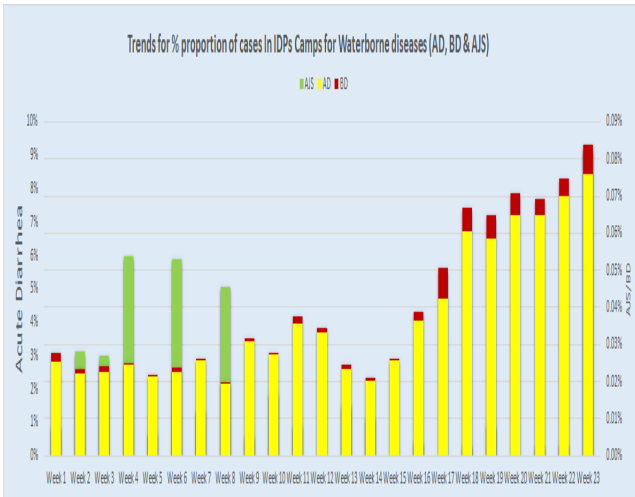


Figure VIII: Trend of waterborne diseases from IDP camps, Week 1-23, 2016

Figure IX: Trend of waterborne diseases from refugee camps, Week 1-23, 2016

### Trends of Acute Diarrhea diseases

The graph below shows the trends of the acute diarrhea cases by week in Iraq from the EWARN system in years 2015 and 2016. During 2016, the trend started to increase from Week 16, 2016. In 2015, the trend of the acute diarrhea showed the same trend increase from Week 17. The trend of acute diarrhea cases has to be monitored during the coming period of the summer season. The increase of acute diarrhea cases during this year is due to the increase of reporting health facilities during 2016 compared to the same period in 2015.

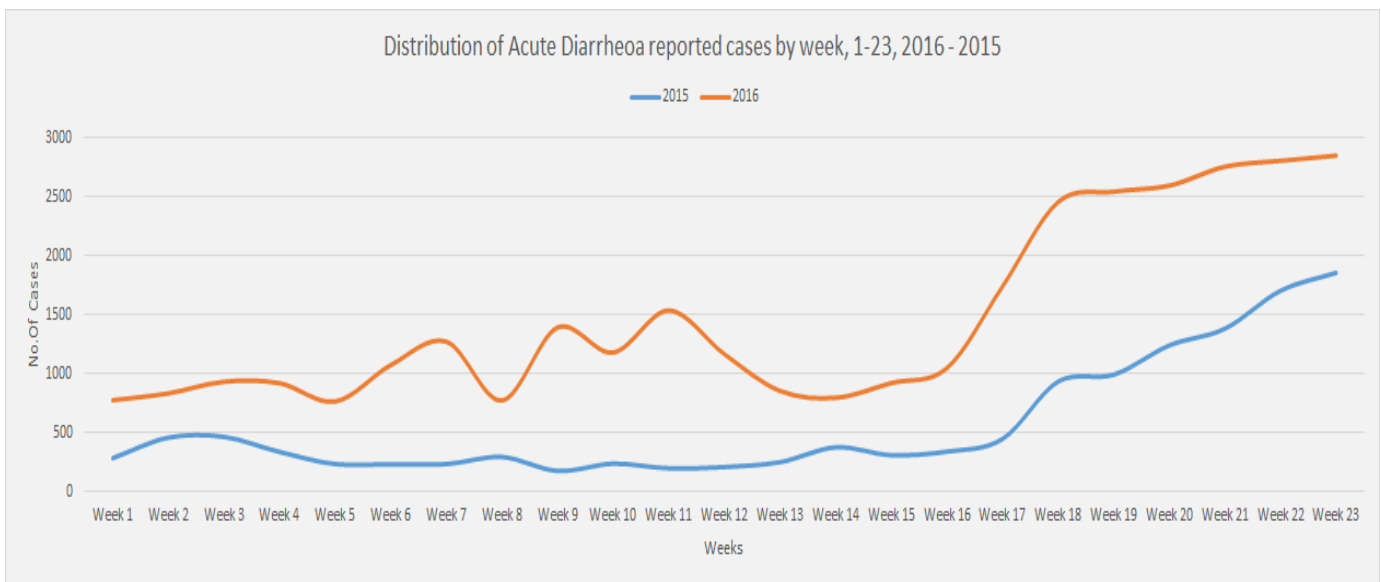


Figure X: Distribution of acute diarrhea reported cases by week, Week 1– Week 23. 2015-2016

Six alerts were generated through EWARN following the defined thresholds, and all of them were from IDP camps during this reporting week. All these alerts were investigated within 72 hours and four of them were verified as true and were further investigated and responded by the respective Governorates Departments of Health, WHO and the relevant health cluster partners. (please see Alerts and Outbreaks table).

Sn	Alert	Location	Governorate	District	IDP/Refugee Camp	# of cases	Run by	Investigation and Response within	Sample Taken Yes/No	Alerts Outcome True/False	Public Health Interventions Conducted
								48-72% DOH/WHO/NGO			
1	Suspected Measles	Ashti IDP	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	TRUE	Yes
2	Suspected Leishmaniasis	Al-Salam	Anbar	Ameriyat Al-Fallujah	IDPs	3	UIMS	Yes	No	TRUE	No
3	Acute Flaccid Paralysis (AFP)	Al-khaldia	Anbar	Anbar	IDPs	1	MC-DOH	Yes	No	TRUE	Yes
4	Suspected Pertusis	Tazar De	Sulaymaniyah	Sulaymaniyah	IDPs	3	EMERGENCY	Yes	No	TRUE	Yes
5	Visceral .Leishmaniasis	Kut Spot city	Baghdad	Resafa	IDPs	1	DoH	Yes	No	FALSE	No
6	Suspected Hemorrhagic fever	Balkana	Kirkuk	Daquq	IDPs	6	MC-MSF	Yes	No	FALSE	No

## Trends of alerts

The graph below shows the numbers 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.

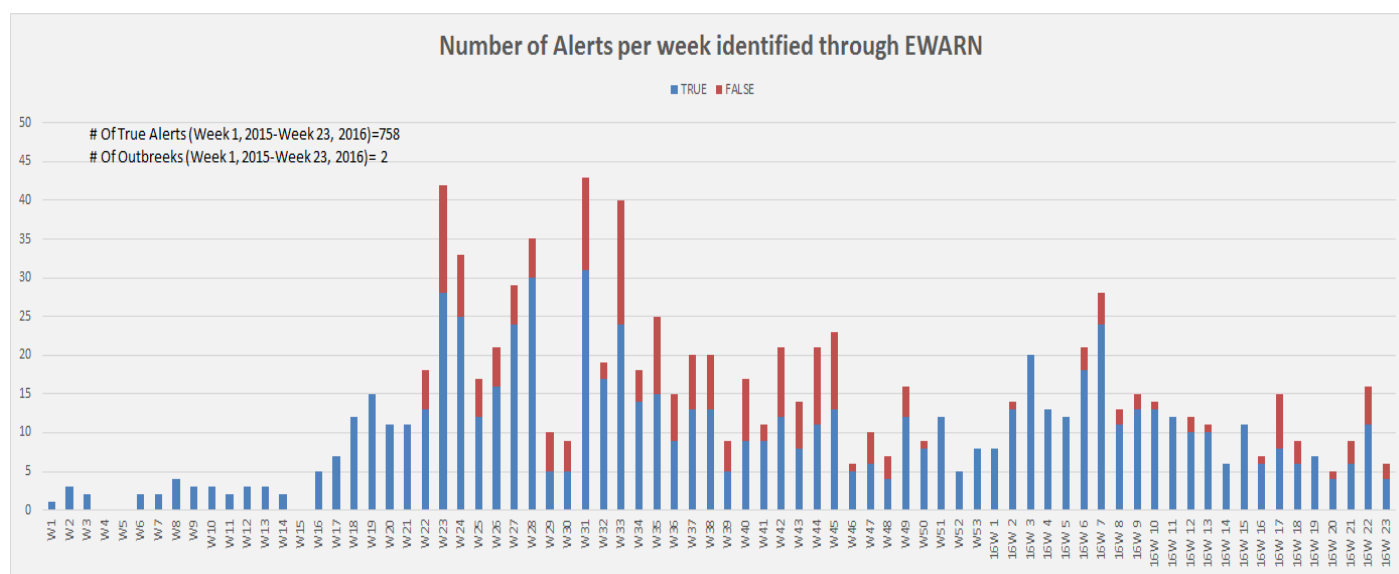


Figure X: Alerts generated through EWARN surveillance Week 1, 2015—Week 23, 2016

### For comments or questions, please contact

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