



Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 31

Reporting Period: 1 – 7 August , 2016

Highlights

- ◆ **Number of reporting sites:** One hundred and twenty-three (123) reporting sites (95% of the total EWARN reporting sites) including sixty-seven (67) in internally displaced peoples' (IDPs) camps, three (3) in refugee camps and fifty-three (53) mobile clinics submitted their weekly reports timely and completely.
- ◆ **Total number of consultations:** 43 025 (Male=19 820 and Female=23 205) marking an increase of 8 019 since last week.
- ◆ **Leading causes of morbidity in the camps:** Acute respiratory tract infections (ARI) (n=14 053), acute diarrhea (AD) (n=3 077) and skin diseases (n=1 798) remained the leading causes of morbidity in all camps and displaced population areas served by mobile clinics during this reporting week.
- ◆ **Number of alerts:** Two (2) alerts were generated through EWARN. These alerts were from IDPs camps during this reporting week. Alerts were investigated within 72 hours and were verified as true and further investigated and responded by the relevant health authorities. (please see Alerts and Outbreaks Section).

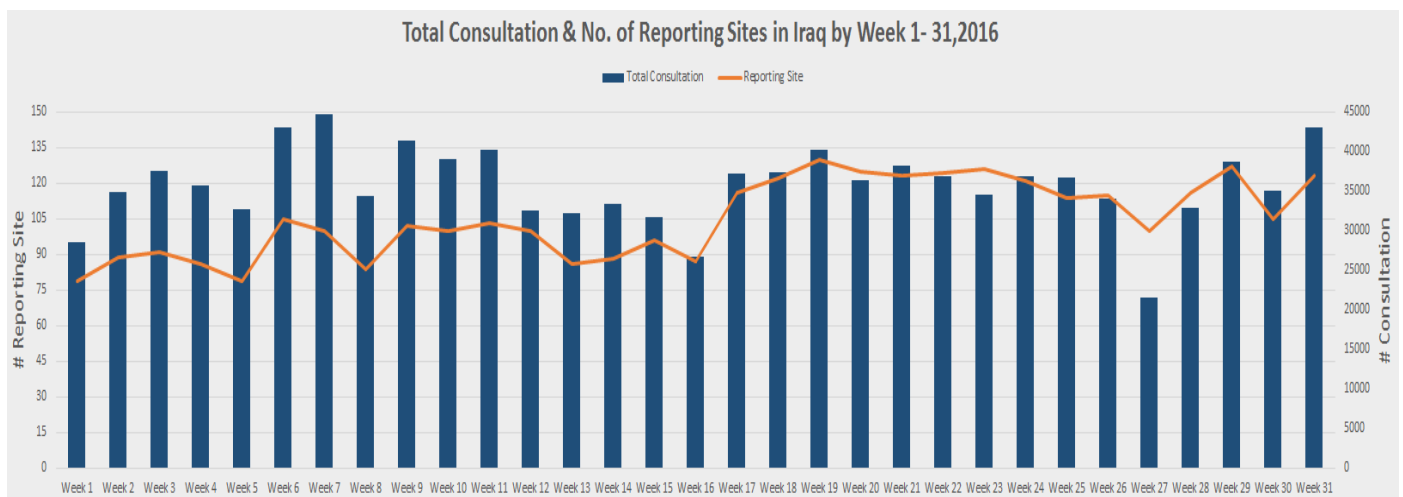
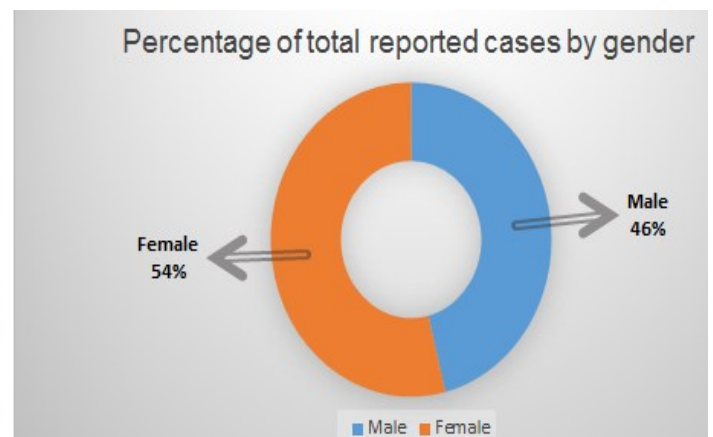
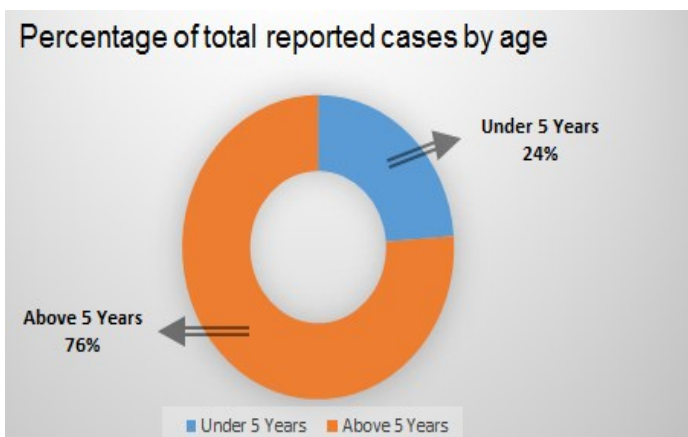


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 1 – 31, 2016

Distribution of total consultations in the camps by age and gender (Week 31, 2016)



Morbidity Patterns

IDPs camps:

During Week 31, the proportions of acute respiratory tract infections (ARI) and acute diarrhea (AD) declined, while the proportion of skin infestations including scabies in IDPs camps increased (please see graph below).

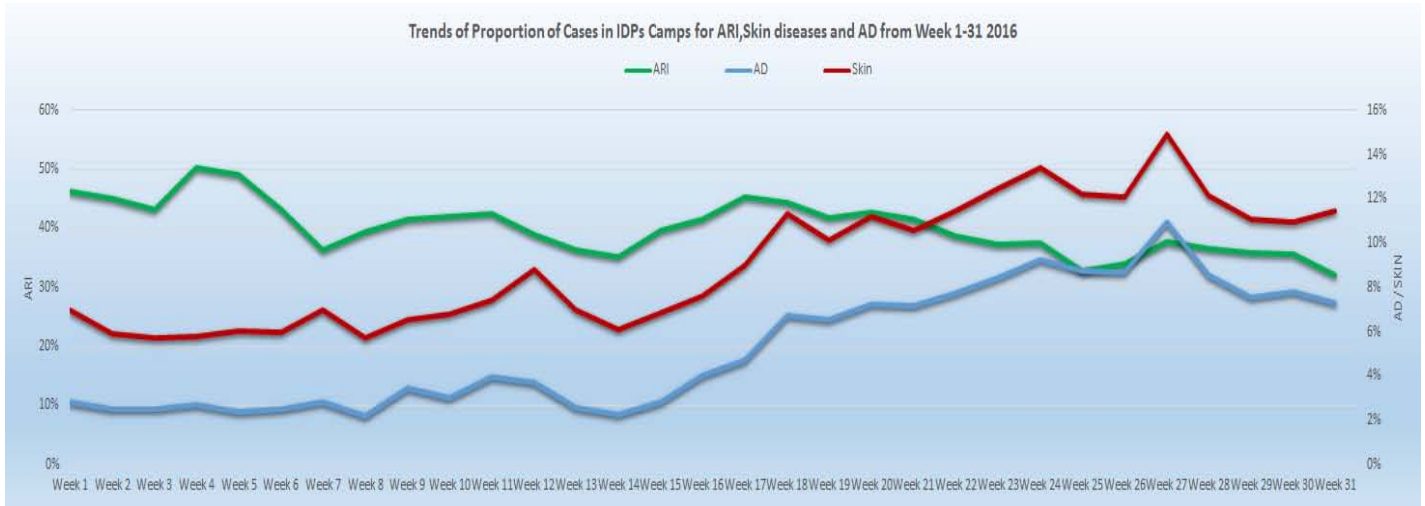


Figure II: Distribution of the acute respiratory infection, scabies and acute diarrhea in IDPs camps Week 1–31, 2016

Refugee camps:

During Week 31, the proportion of acute respiratory tract infections (ARI) and skin infestations including scabies indicated a slight increase from the previous week, while the proportions of acute diarrhea slightly decreased (please see graph below).

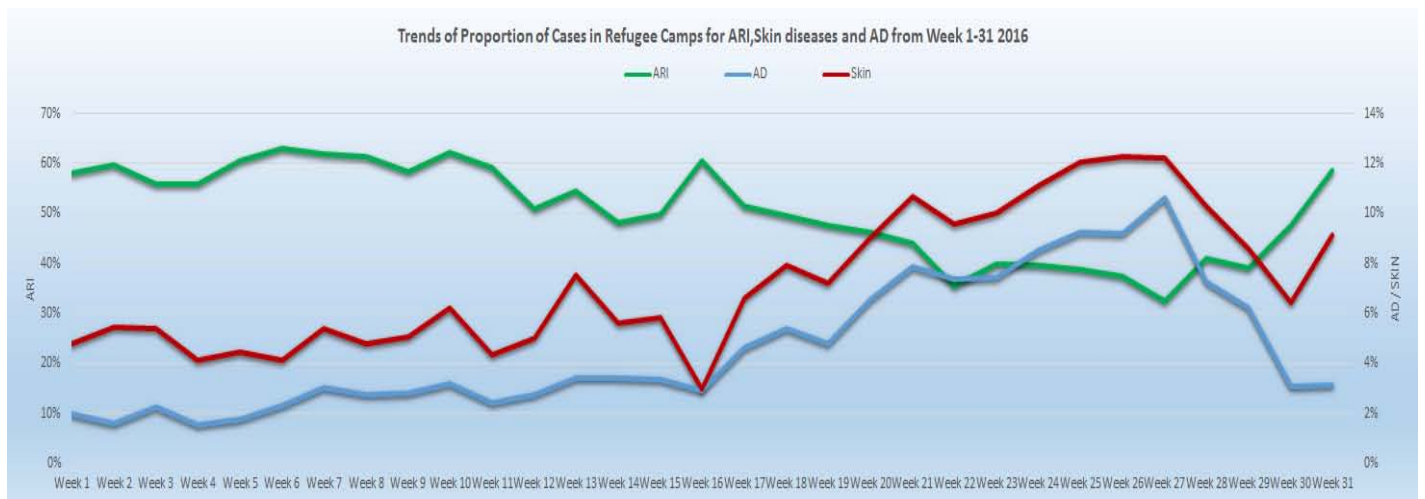


Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps Week 1–31, 2016

Distribution of the common diseases by proportion and location for IDPs 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 31, 2016.

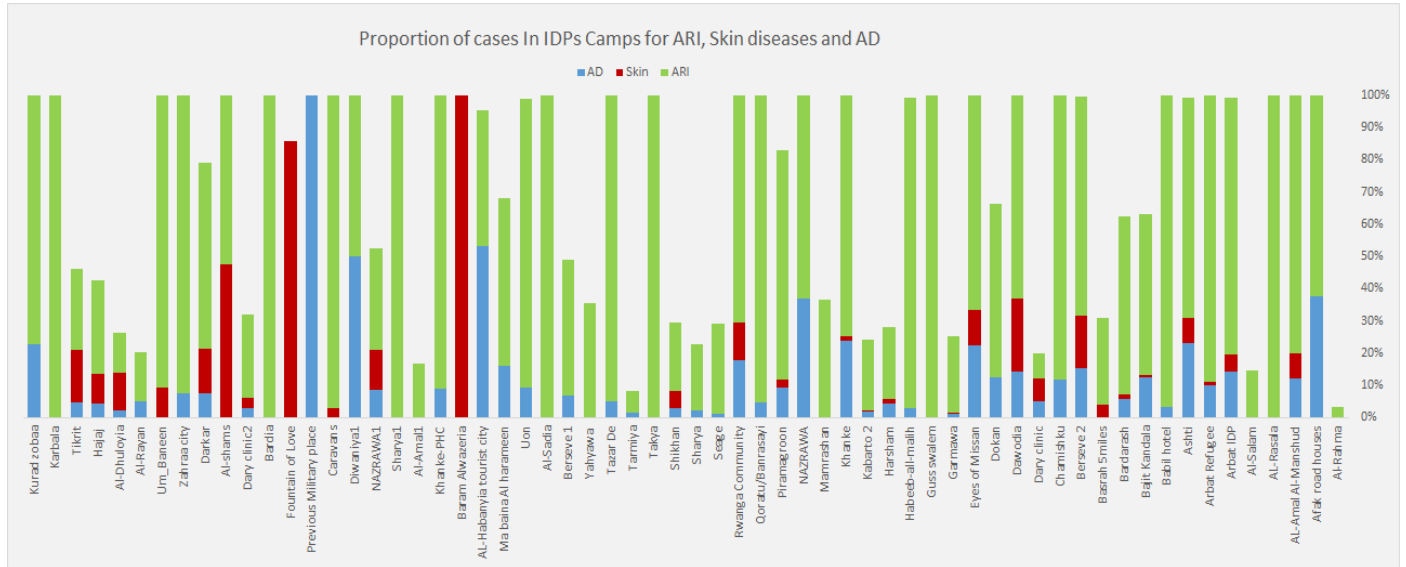


Figure IV: Proportion of cases of ARI, scabies and AD in IDP camps for Week 31, 2016

Trends of diseases by proportion and location for refugee camps

The graph below indicates the proportion of acute respiratory tract infections cases, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity in refugee camps for Week 31, 2016.

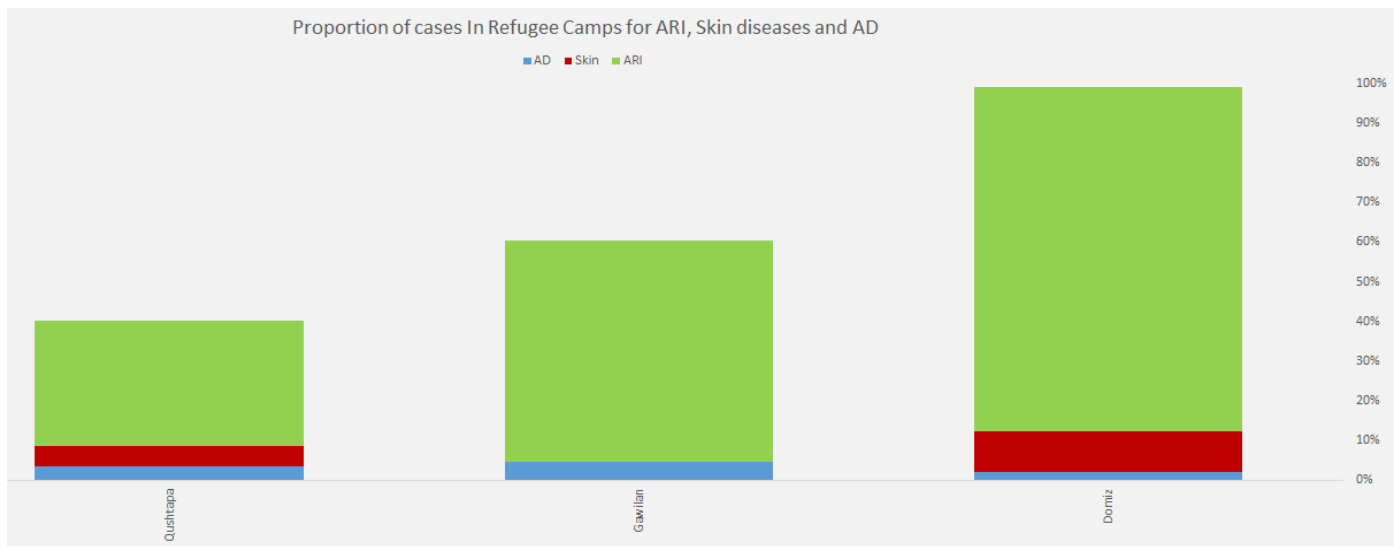


Figure V: Trend of proportions of cases of ARI, scabies and AD in refugee camps for Week 31, 2016

Trend of diseases by proportion and location for 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 of the IDPs covered by mobile clinics for Week 31, 2016.

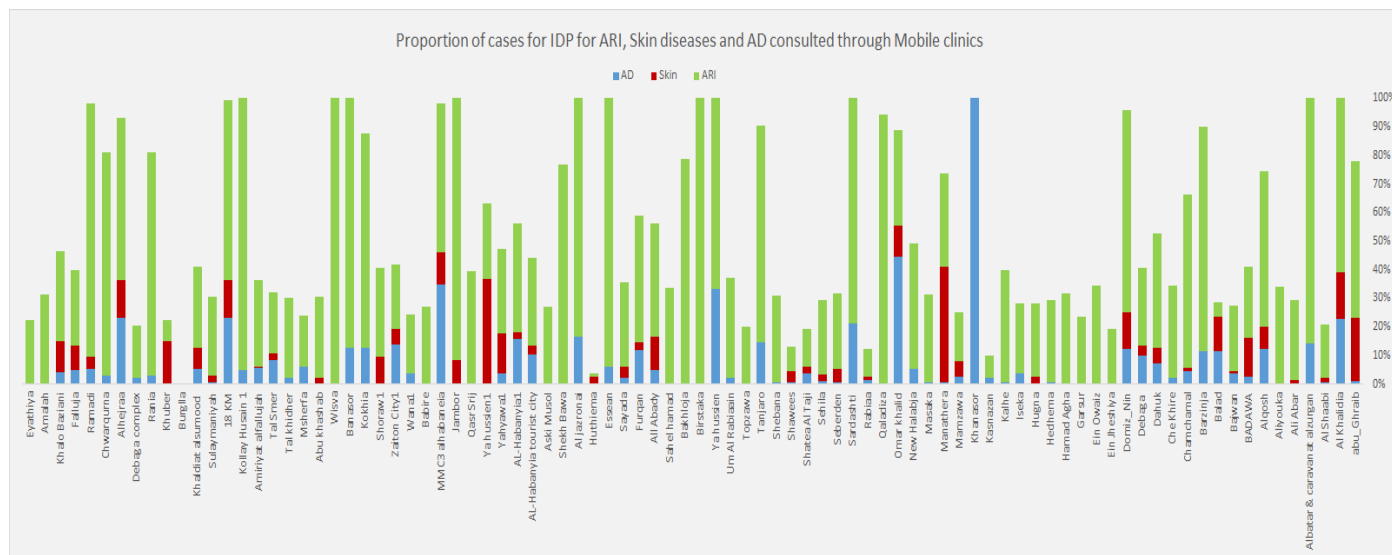


Figure VI: Trend of proportions of IDPs cases for ARI, scabies and AD covered by mobile clinics for Week 31, 2016

Trends of pertussis disease

There were 94 reported suspected pertussis cases from all the EWARN reporting sites during 2016. From Week 1 to Week 31, 85% of the cases were reported from Salah Al-Din (80), 7% from Sulaymaniyah (7 cases), 4% from Anbar ((4 cases), 2% from Qadisiyah (2 cases) and 1% from Erbil (1 case). The first case of pertussis was reported from Salah Al-Din during Week 10 in Alrahma camp. Alrahma camp reported 35 cases so far. Other 18 cases were reported from Alrasheed, 14 cases from Alhadida, 9 cases from Altaawon and 2 cases from Abtal Aloroba and Balad. In Sulaymaniyah, 4 cases were reported from Dokan IDPs and 3 from Tazar.



Figure VII: Distribution of Suspected Pertussis reported cases by governorate, week 1– 31, 2016

Trends of waterborne diseases in IDPs and refugee camps

The graph below shows the trends of waterborne diseases (acute diarrhoea, bloody diarrhoea and acute jaundice syndrome) reported from IDP and refugee camps and which indicated a slight increase in these diseases among IDPs, while still static in the refugee camps. (see graph below)

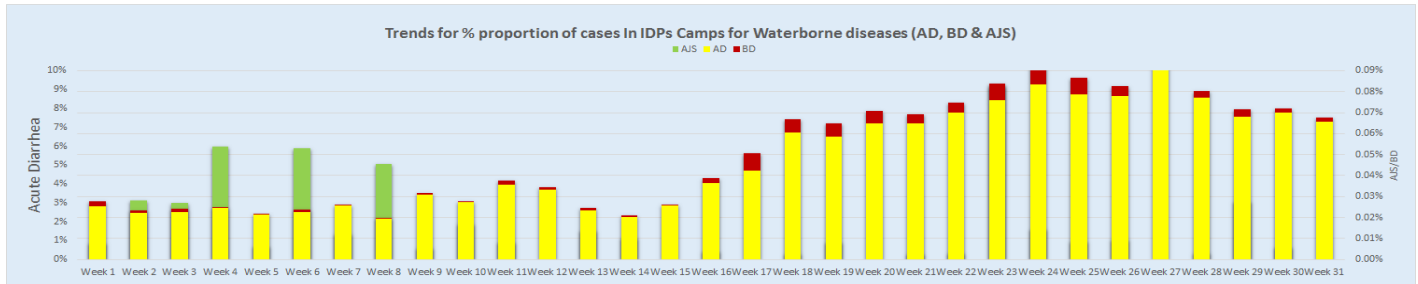


Figure VIII: Trend of waterborne diseases from IDP camps, Week 1-31, 2016

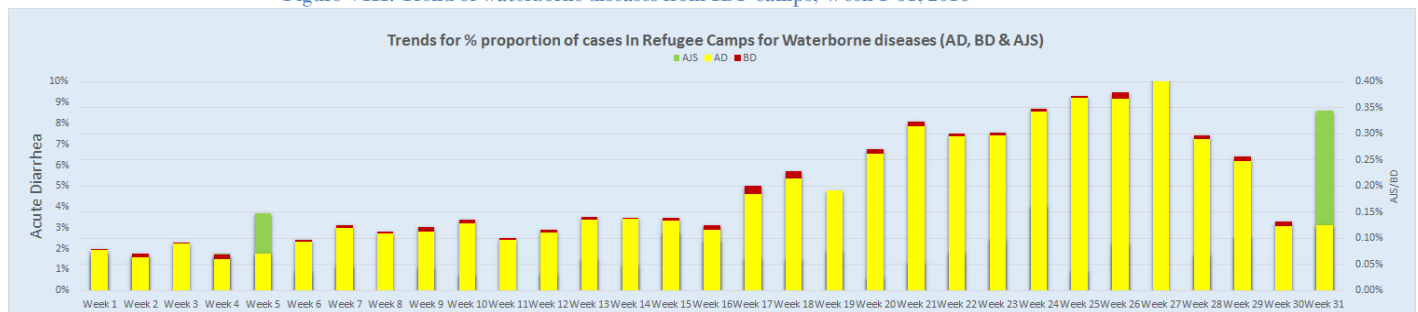


Figure IX: Trend of waterborne diseases from refugee camps, Week 1-31, 2016

Trends of acute diarrhoea

The graph below shows the trends of acute diarrhoea reported from Week 1 to Week 31 in 2015 and 2016 through the EWARN system. This week shows a slight increase in the trends of the diseases compared to last week. During this week, Anbar reported 51% of AD cases, Dohuk 13%, Erbil 12%, Sulaymaniyah 6%, Ninewa 5%, Salah Al-din 4%, Kirkuk 4% and Baghdad 2%.

The attack rate during this week in Anbar is 4 cases per 10 000 people, and 1 case per 10000 populations in each governorate in Erbil, Kirkuk, Missan, Qadisiya and Sulaymaniyah.

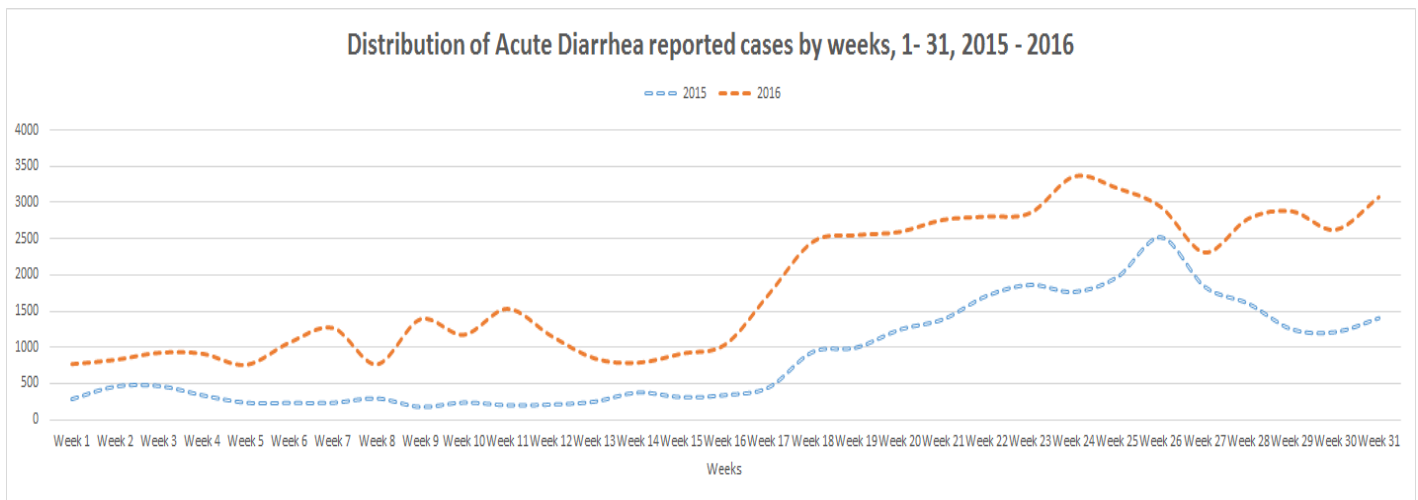


Figure X: Distribution of bloody diarrhoea reported cases by week, Week 1–Week 31, 2015-2016

Two alerts were generated through EWARN following the defined thresholds, and both were from IDPs camps during this reporting week. These alerts were investigated within 72 hours and were verified as true and 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 Pertusis	Ashti	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	Yes	TRUE	Yes
2	Food poisoning	Ashti	Sulaymaniyah	Arbat	IDPs	1	EMERGENCY	Yes	No	TRUE	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.

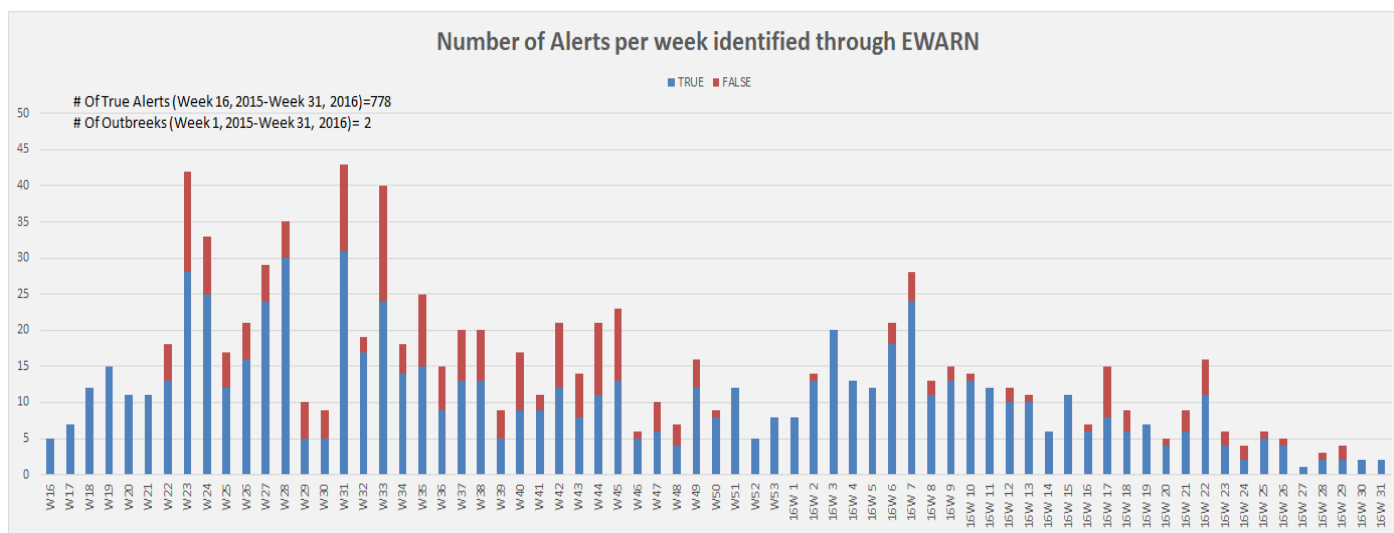


Figure X: Alerts generated through EWARN surveillance Week 1, 2015—Week 31, 2016

For comments or questions, please contact

- **Dr. Adnan Nawar Khistawi** | 07901948067 | adnannawar@gmail.com, Head of Surveillance Section, Federal MOH
- **Dr. Janin Sulaiman** | 07508678768 | Janin_irq@yahoo.com, EWARN Focal Point, MOH-KRG
- **Dr. Muntasir Elhassan** | 07809288616 | elhassanm@who.int, EWARN Coordinator, WHO Iraq
- **WHO EWARN Unit** emacoirqewarn@who.int