



Iraq: EWARN & Disease Surveillance Bulletin

2016 Epidemiological Week: 40

Reporting Period: 03 – 09 Oct , 2016

Highlights

- ◆ **Number of reporting sites in Week 40:** One hundred and forty five(145) reporting sites (87% of the total EWARN reporting sites) including eighty four (84) in internally displaced persons (IDPs) camps, Six (6) in refugee camps, four (4) hospitals and Fifty-five (55) mobile clinics submitted their weekly reports completely and in a timely manner.
In this week, 36 more health facilities report to the EWARN system. The medical coordinators and surveillance officers have been training late September and early October. The new sites covers the displaced people from the current Mosul operation in Ninewa, Erbil, Salah Addin and Duhok governorates.
- ◆ **Total number of consultations in Week 40:** 43,132 (Male=19,472 and Female=23,660) marking an increase of 5,753 consultations compared to 37,379 total consultations in last week.
- ◆ **Leading causes of morbidity in the camps in Week 40:** Acute respiratory tract infections (ARI) (n=19,248), acute diarrhoea (AD) (n=2,757) and skin diseases (n=1,236) 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 40:** Eight (8) alerts were generated through EWARN. Five alerts reported from IDPS camps and 3 alerts from hospitals in this reporting week. The alerts were investigated within 72 hours, verified and responded to by relevant health cluster partners, (Details: see Alerts and Outbreaks Section).

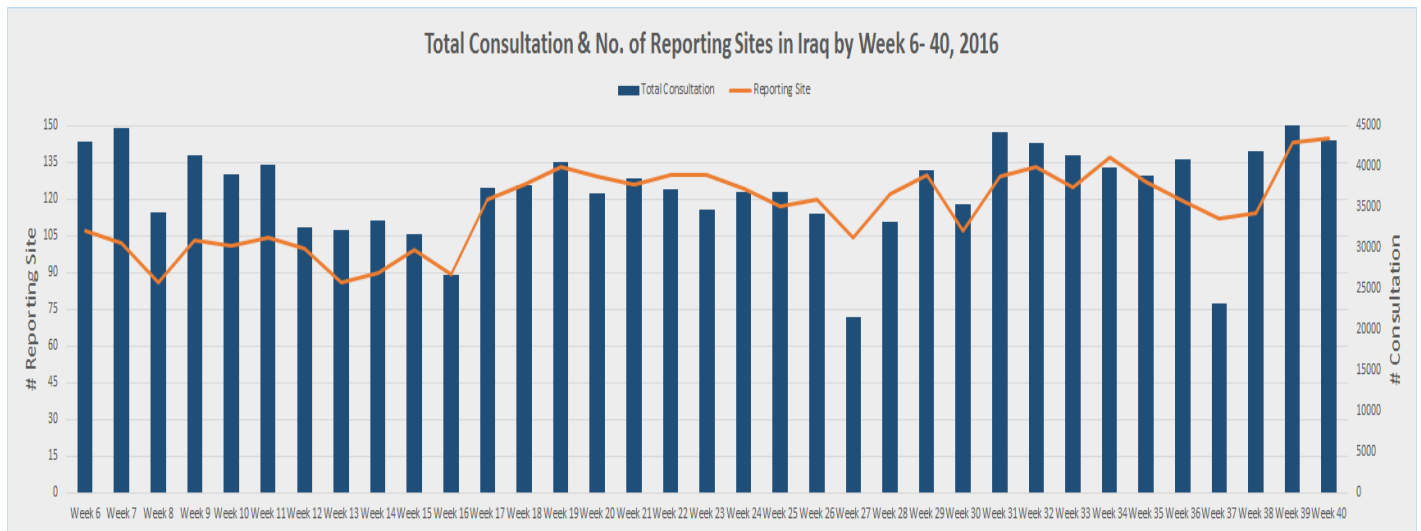
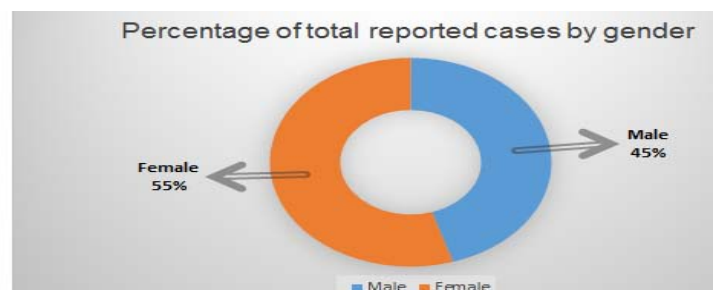
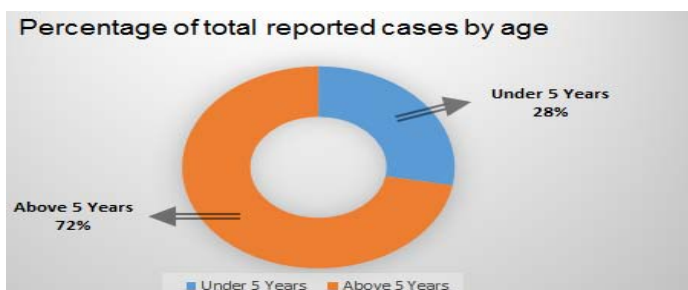


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 6–40, 2016

Distribution of total consultations in the camps by age and gender (Week 40, 2016)



Morbidity Patterns

IDPs camps:

During Week 40, the proportions of acute respiratory tract infections (ARI), acute diarrhoea and skin infestations including scabies in IDPs camps decreased compared to the last week (please see Figure II).

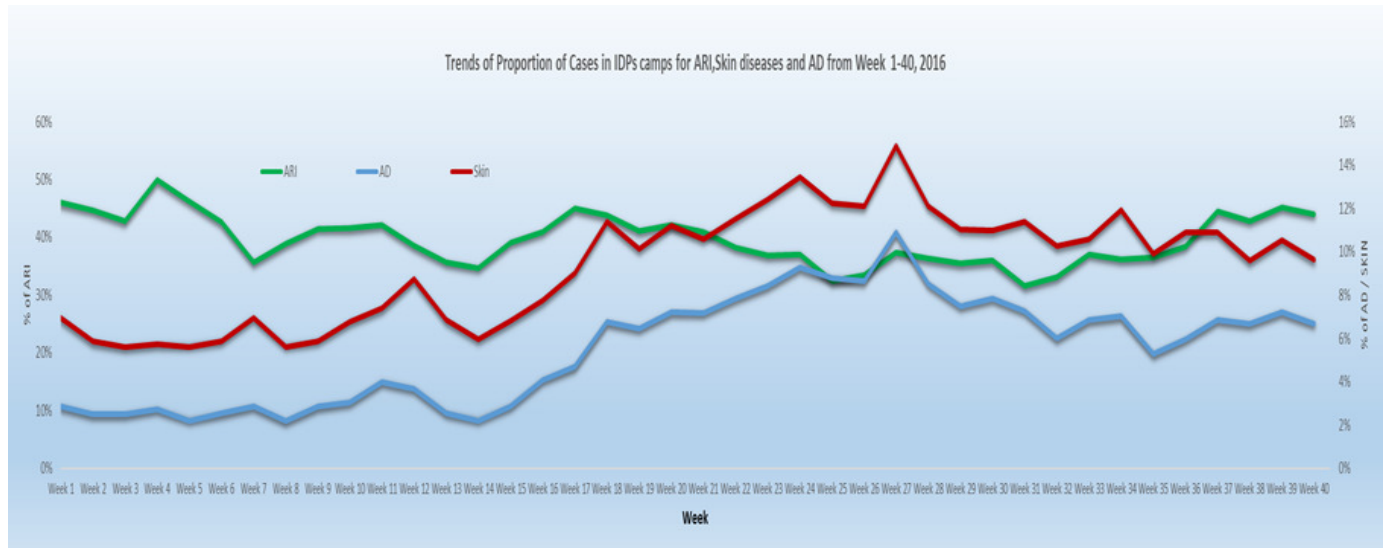


Figure II: Distribution of the acute respiratory infection, scabies and acute diarrhoea in IDPs camps, Week 1–40, 2016

Refugee camps:

During Week 40, the proportions of acute respiratory tract infections (ARI) decreases, while the trends of acute diarrhoea and skin infestations including scabies indicated a slight increase compared to the previous week (please see Figure III).



Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhoea in refugee camps, Week 15–40, 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 comprise the highest leading causes of morbidity in camps for internally displaced persons for Week 40, 2016.

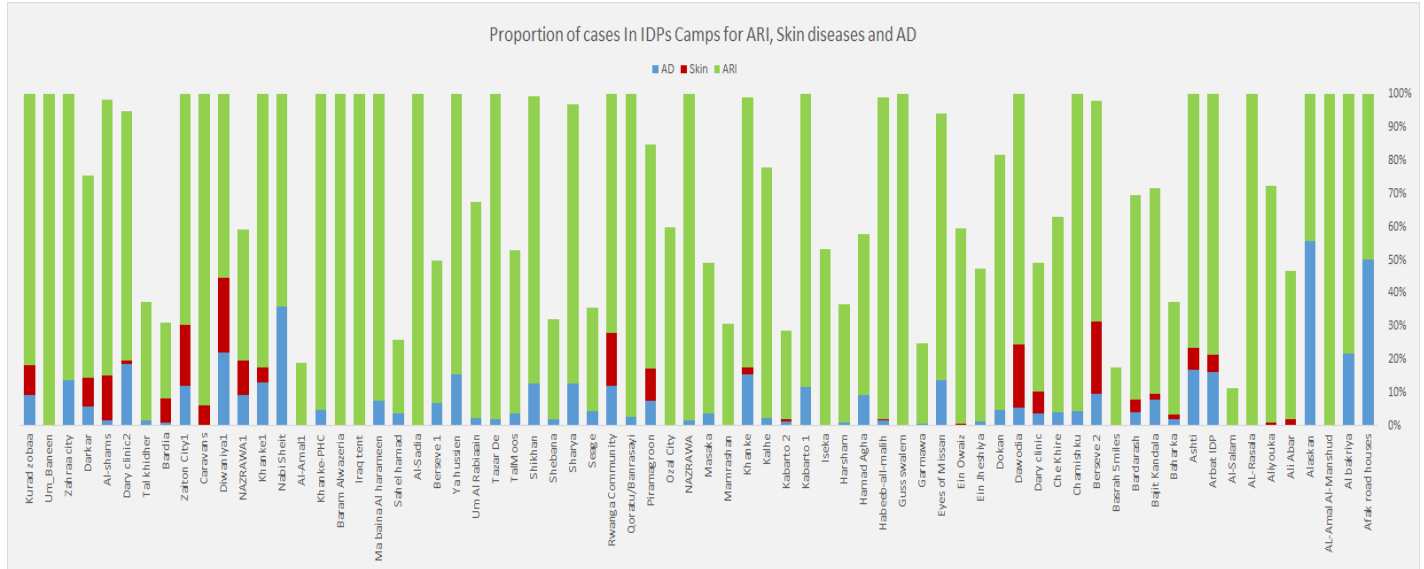


Figure IV: Proportion of cases of ARI, scabies and AD in IDPs camps for Week 40, 2016

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

The graph below indicates the proportions of acute respiratory tract infections, acute diarrhoea and skin infestations including scabies which comprise the highest leading causes of morbidity in refugee camps for Week 37, 2016.

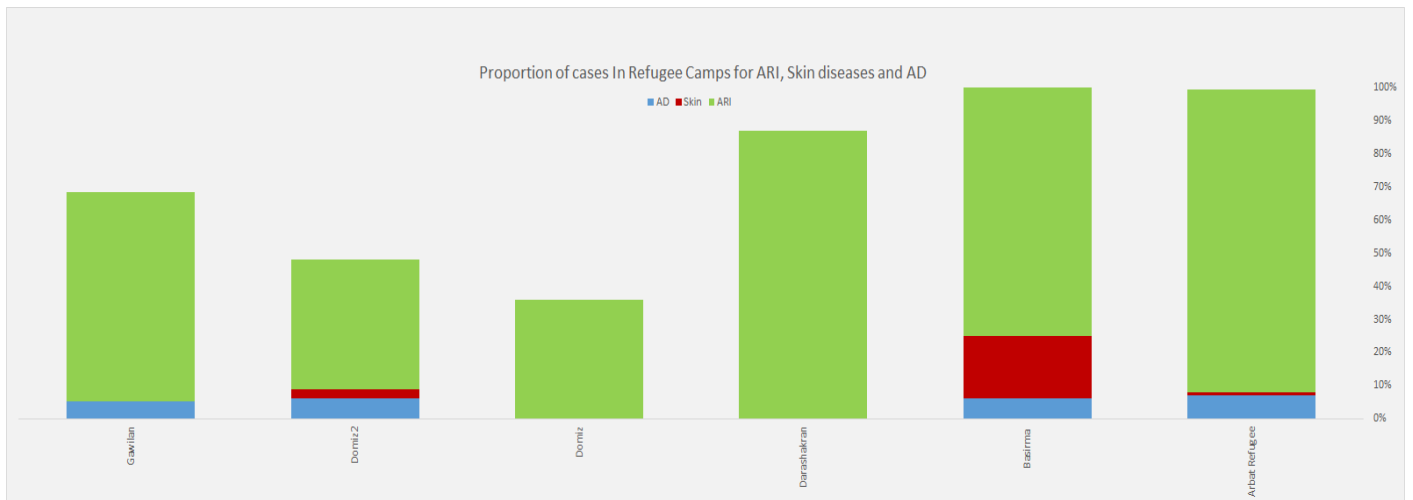


Figure V: Trend of proportions of cases of ARI, scabies and AD in Refugee camps for Week 40, 2016

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 internally displaced persons covered by mobile clinics for Week 40, 2016.

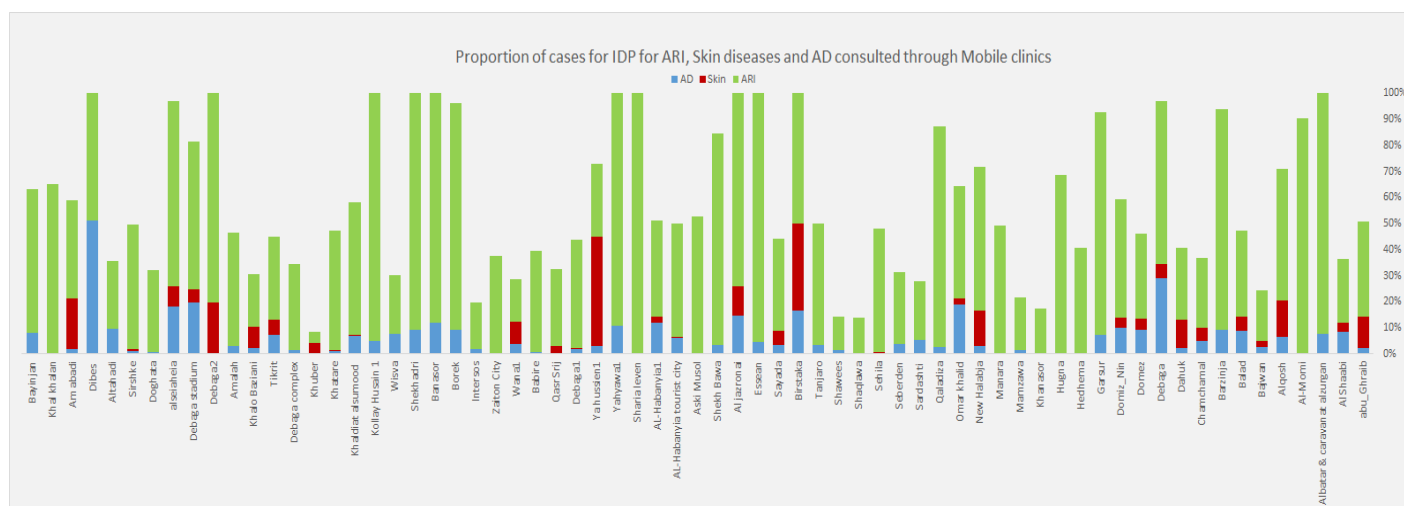


Figure VI: Distribution of ARI, scabies and AD covered by mobile clinics for the IDPs, Week 40, 2016

Trends of Measles

There were 81 reported suspected measles cases from all the EWARN reporting sites during 2016. From week one to week 36, almost 50 (62%) of the cases reported from Sulaymaniyah. The peaks of the disease trend observed during week 7 and 17.

This week, one measles case reported from PUI clinic in Bardarash IDPs from Ninewa. During 2016, Ninewa reported 7 measles cases. From Ninewa district, 5 cases reported this year between week 9 and week 40 and all by PUI clinic, one case reported from Telafar district by Heevie Zummar mobile clinic and one from Akre district by PUI Bardarash clinic.

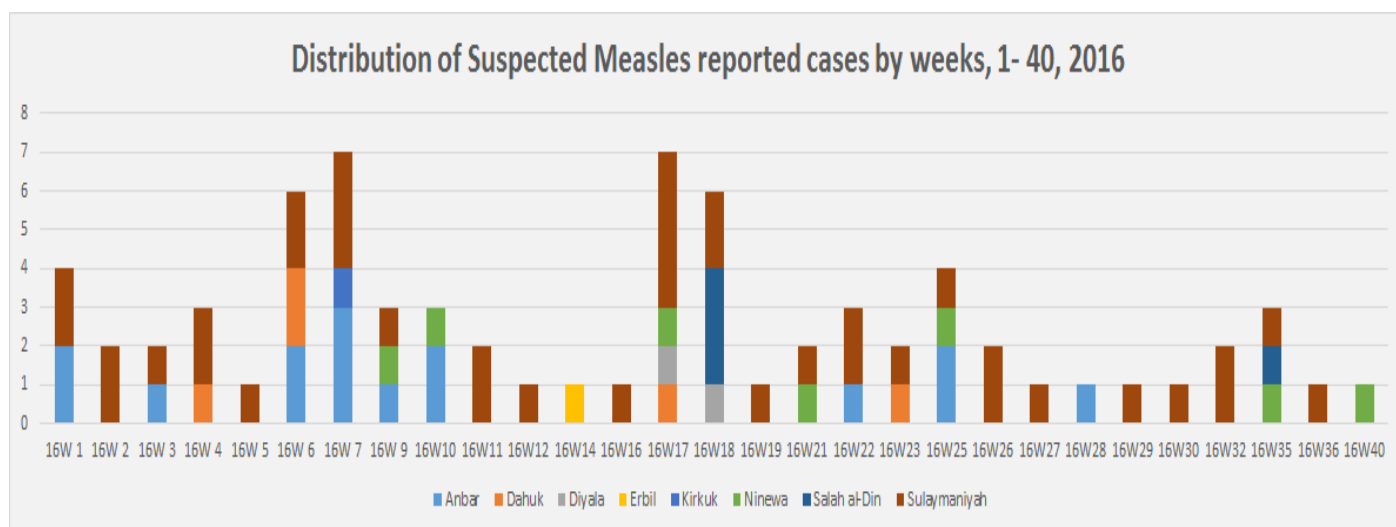


Figure VII: Distribution of suspected measles reported cases by governorate, Week 1– 40, 2016

Trends of waterborne diseases in IDPs and refugee camps

Figures VIII and IX below show the trends of waterborne diseases (acute diarrhoea, acute bloody diarrhoea and acute jaundice syndrome) reported from camps for internally displaced persons. Meanwhile, an increasing trend of waterborne diseases in refugee camps was reported from refugee camps.

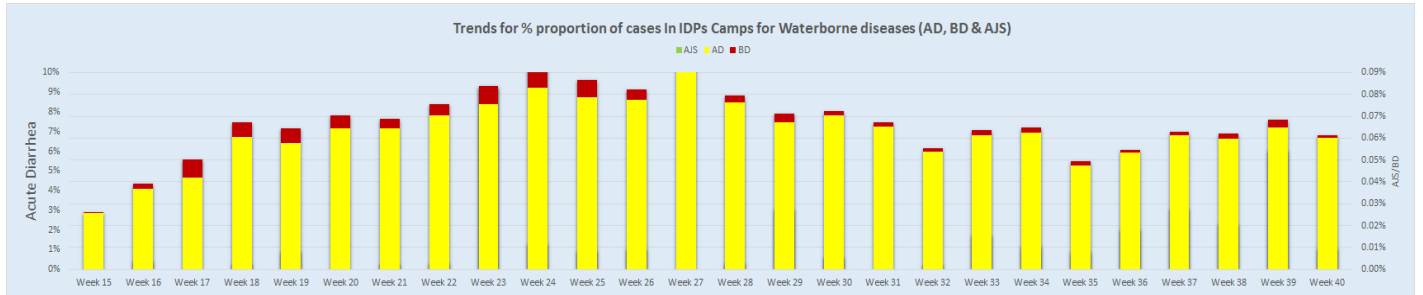


Figure VIII: Trend of waterborne diseases from IDPs camps, Week 15-40, 2016

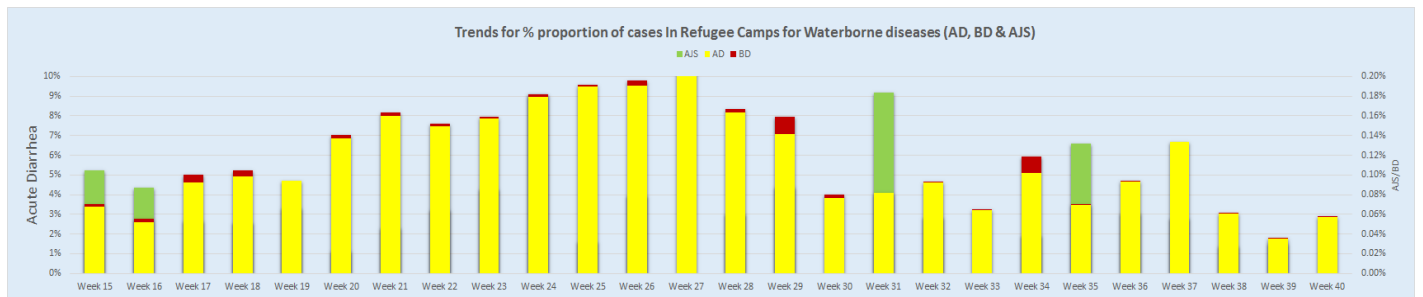


Figure IX: Trends of waterborne diseases from refugee camps, Week 15-40, 2016

Trends of Acute Diarrhoea

The graph below shows the trends of acute diarrhoea reported in the period from Week 1 to Week 40 in 2015 and 2016 through the EWARN system. This week showed a increasing trend of the increase compared to the last weeks. During 2016, and from Week 1 to Week 40, Anbar reported 36% of total reported AD cases, followed by Dohuk with 21%, Ninewa 11%, Sulaymaniyah 9%, Erbil 8%, Kirkuk 5%, Baghdad 4%, and Salah Al din 3%.

The trend of the disease showed a peak in Week 24 (3 387 cases) and then another peak in Week 31 (3 079 cases). From Week 31 there is a decrease in the reporting of AD through all the governorates.

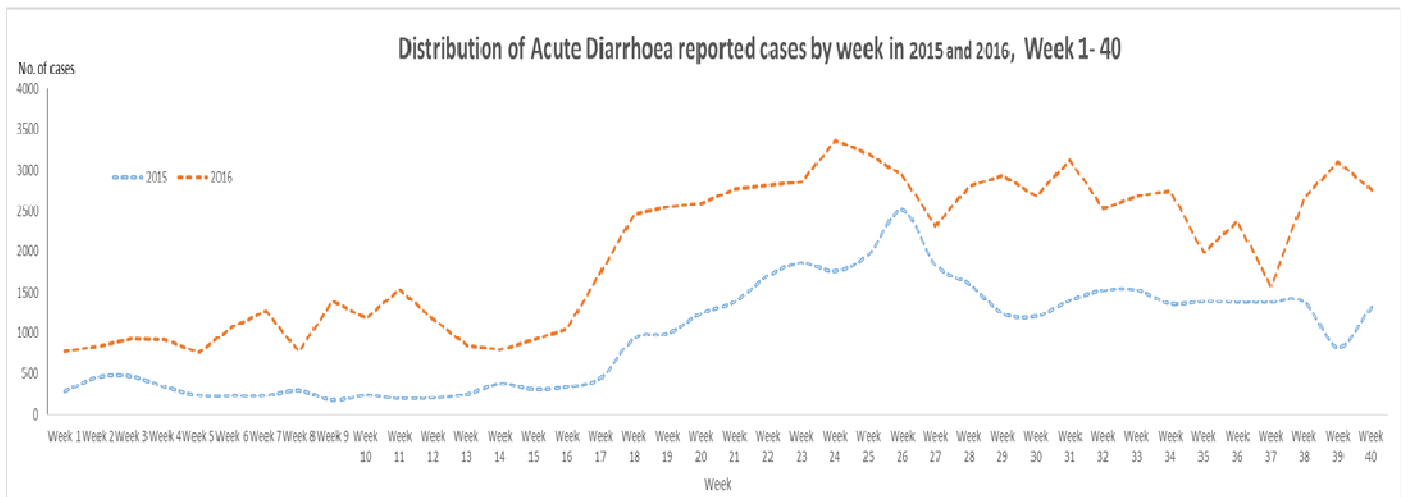


Figure X: Distribution of acute diarrhoea reported cases by week, Week 1–Week 40. 2015-2016

Seven alerts were generated through EWARN according to the defined thresholds. Five alerts reported from IDPS camps and 3 alerts from hospitals in this reporting week. All these alerts were investigated within 72 hours, verified as true and responded to by the Departments of Health of the respective Governorates, WHO and the relevant health cluster partners (see 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-Rahma	Salah-Al-Din	Dijlah	IDPs	2	UIMS	Yes	No	TRUE	No
2	Acute Flaccid Paralysis (AFP)	Ameriyat Al-Fallujah	Anbar	Ameriyat Al-Fallujah	Hospital	1	DoH	Yes	Yes	TRUE	Yes
3	Suspected Leishmaniasis	Al-Salam	Anbar	Ameriyat Al-Fallujah	IDPs	5	UIMS	Yes	No	TRUE	Yes
4	Suspected Pertusis	Raparen hospital	Erbil	Erbil	Hospital	3	DoH	Yes	No	TRUE	Yes
6	Suspected Measles	Bardarash	Dahuk	Dahuk	IDPs	1	PU-AMI	Yes	Yes	TRUE	Yes
7	Suspected Meningitis	Raparen hospital	Erbil	Erbil	Hospital	1	DoH	Yes	No	TRUE	Yes
8	Suspected Pertusis	Ashti IDP	Sulaymaniyah	Arbat	IDPs	2	EMERGENCY	Yes	No	TRUE	No

Trends of alerts

The graph below 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.

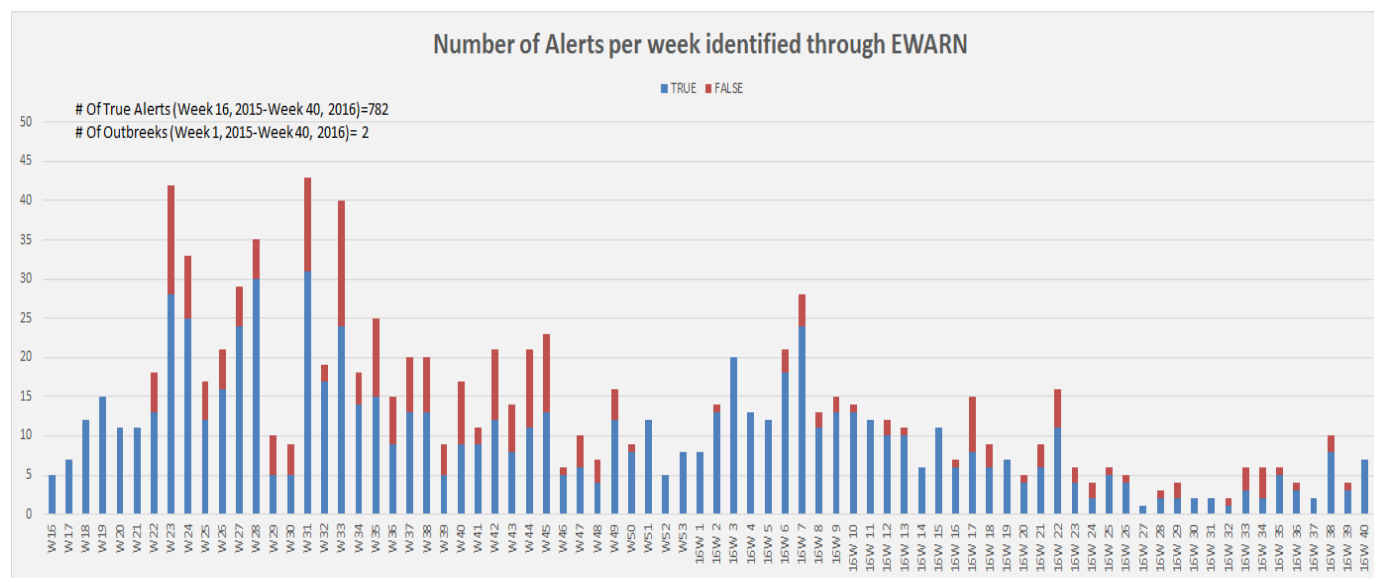


Figure X: Alerts generated through EWARN surveillance Week 16, 2015—Week 40, 2016

For comments or questions, please contact

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EWARN Dashboard link: <http://irq-data.emro.who.int/ewarn/>

EWARN reporting health facilities: [http link: http://irq-data.emro.who.int/ewarn/reporting_sites](http://irq-data.emro.who.int/ewarn/reporting_sites)