

## IRAQ: Early Warning and Disease Surveillance Bulletin

Epidemiological Week 17:

Reporting Period: 20 April– 26 April 2015

### Overview

- During week 17, twenty nine reporting sites including eight Refugee and twenty one Internally Displaced People's (IDP) camps, and eleven mobile clinics timely submitted their weekly reports.
- The total number of consultations reported during this week was 15923 (male=7056 and female=8867) compared to 12675 (male= 5868 and female=6807) consultations from the previous reporting week 16.
- During week 17; Acute respiratory tract infections (ARI) (n=6024), Acute Diarrhoea (n=440) and skin diseases (n=1155) were the leading cause of morbidity.
- A total of seven alerts were generated by EARN in week 17; all of these were verified as true for further investigation and appropriate response by Erbil DoH/WHO.
  - An alert for unexplained fever from Awen Eshar run by IOM,
  - Two alerts for suspected measles from Arbat IDPs camp run by Emergency and Baharka IDPs camp run by IMC,
  - Two alerts for suspected bloody diarrhea from Arbat IDPs camp run by Emergency and Al-Nkeeb IDPs camp run by UIMS,
  - Two alerts for suspected meningitis from Baharka IDPs camp run by IMC and Shariya IDP camp run by Medair.
- WHO in close collaboration with the Ministry of Health has started a week training on case definitions and use of electronic EARN tablets for all IDPs and refugee camps along with mobile clinics from KRG region. The EARN will be monitoring all camps catering IDPs and Refugees in Iraq while the host community will be covered by the national surveillance program.

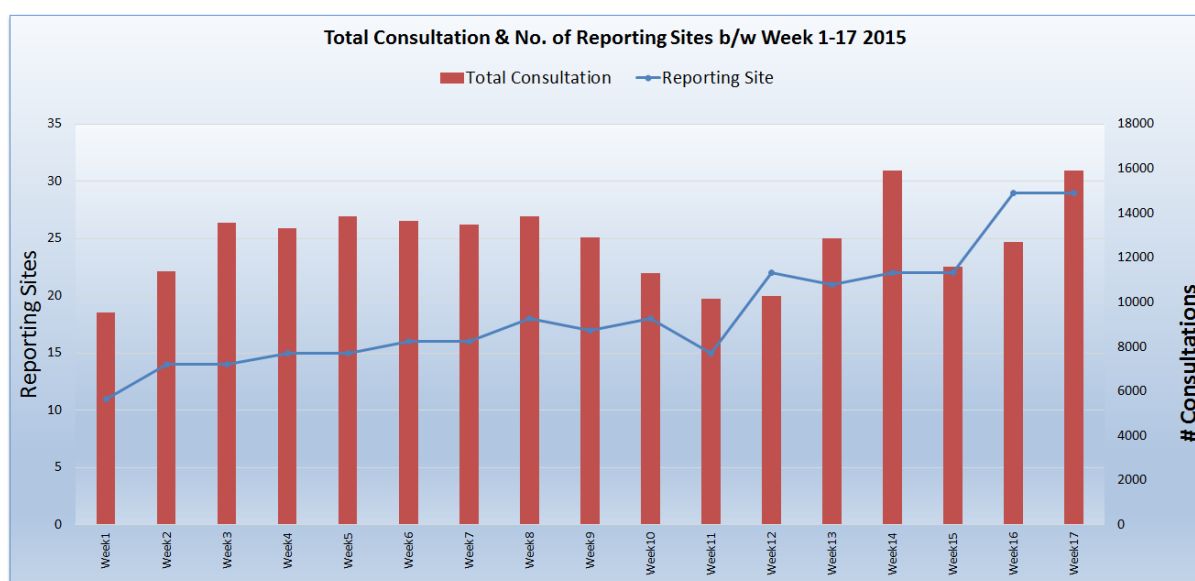
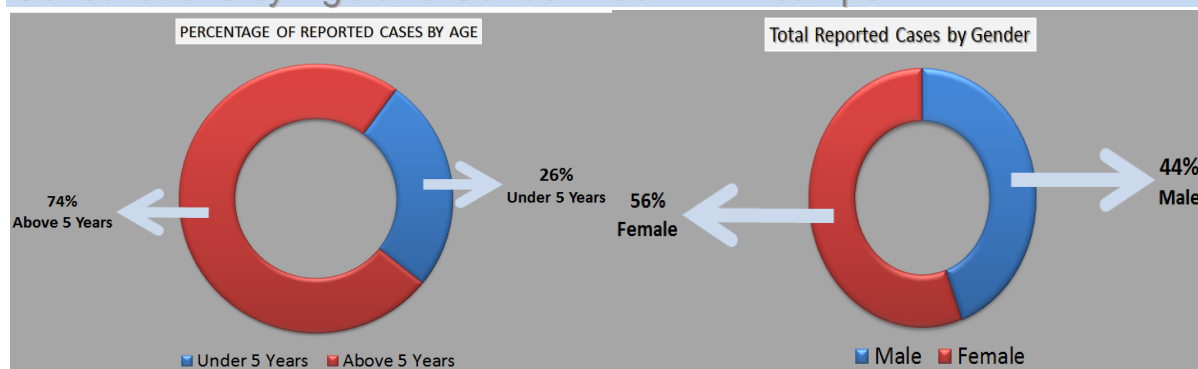


Figure 1: Total consultations and proportion of reporting health facilities b/w week 1-17

## Consultations by Age and Gender week 17 in camps:



During week 17, 74% of the consultations were above 5 years while 26% were under 5 years, out of which 56% were females and 47% males.

## Morbidity patterns

- During week 17; Acute Respiratory Infection (ARI), scabies (SCB) and Acute Diarrhea (AD) remain the leading causes of morbidity with Acute respiratory tract infections (ARI) (n=6024), Acute Diarrhoea (n=440) and skin diseases (n=1155) cases reported from all camps reporting to EWARN.
- During week 17; the number of consultations of Acute Diarrhea (AD) remained steady ranging between 350 cases to 450 cases. Skin infestations have increased from 889 cases in week 16 to 1155 cases in week 17 while Acute Respiratory Infections consultations have increased from 4945 cases in week 16 to 6024 cases in week 17. (See below graph)

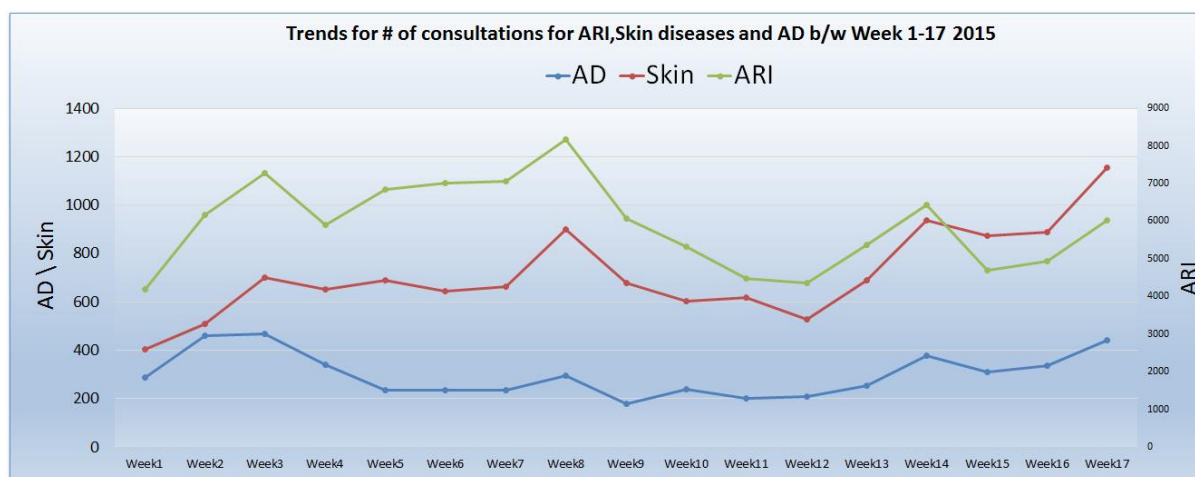


Figure II: Trend of # of cases of ARI, Scabies and AD from week 1 – 17

- During week 17, proportions of Acute Diarrhea indicated a steady trend since week 14 (3%). Skin infestations including scabies have shown a gradual increase in the proportion of the consultations since week 15, (Week 17=7%). ARI proposition shows a gradual decrease in the caseload since week 10. The below linear graph indicates the proportions of cases of Acute Respiratory Tract Infections, Skin diseases including Scabies and Acute Diarrhea by reporting site from week 1 -17, 2015.

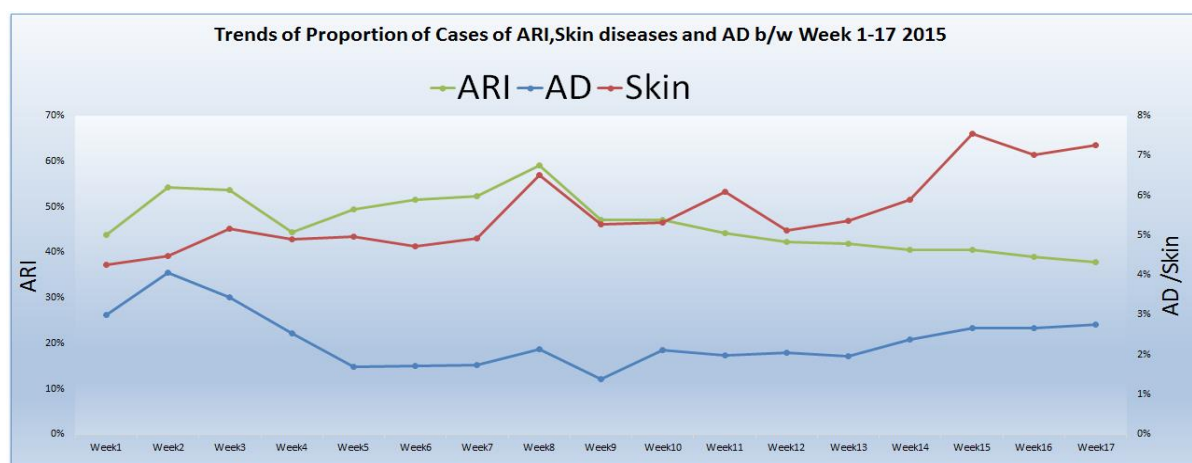


Figure III: Trend of # of cases of ARI, Scabies and AD from week 1 – 17

The below graph indicates the proportion of cases of Acute Respiratory Tract Infections, Acute Diarrhea and Skin Infestations including scabies which comprises the highest leading cause of morbidity per reporting sites for week 17, 2015.

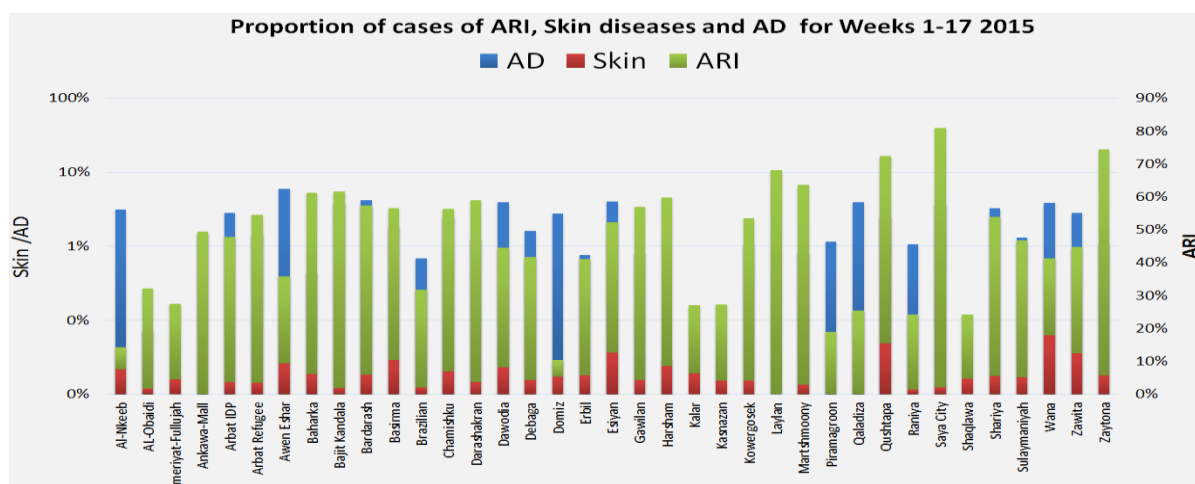
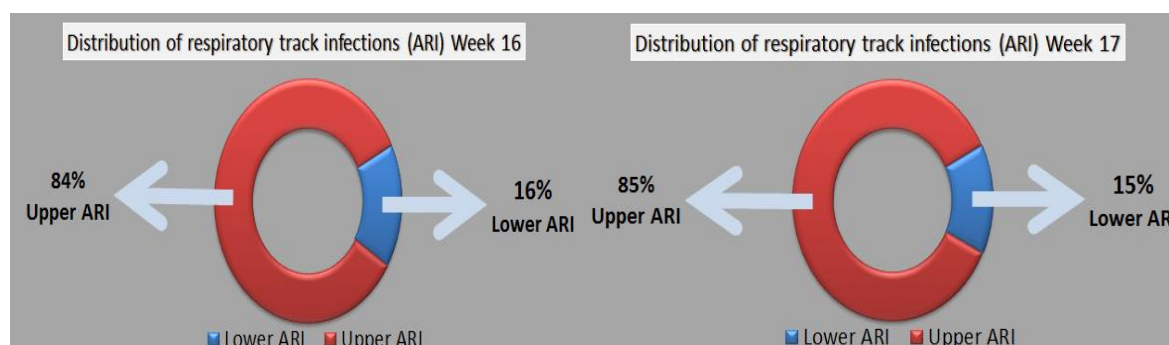


Figure IV: Trend of proportions of cases of ARI, Scabies and AD from week 1 – 17 per reporting site

- Acute Respiratory Tract Infection (ARI) has been further divided into upper and lower respiratory tract infections from week 1, 2015.
  - According to EWARN data, the trends of upper and lower ARI remained approximately the same when compared with week 17 (Upper ARI=85% and Lower ARI=15%).
  - The ARI trend is slowly decreasing with the close approach of summer.



- Furthermore the below graph indicates the proportion of Lower and upper ARI cases per each reporting site from week 1 to 17.

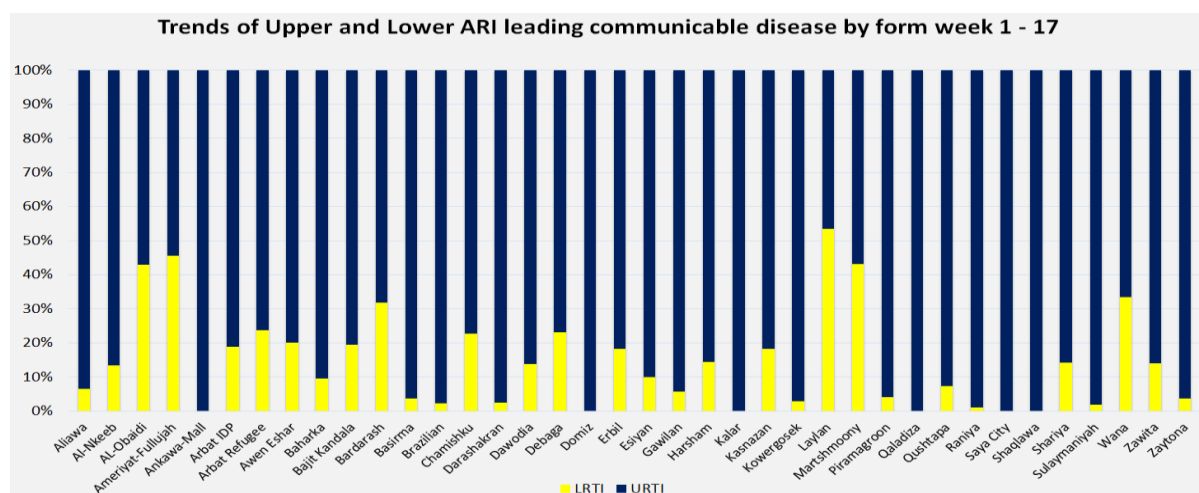


Figure V: Trend of Upper and Lower ARI leading communicable disease, from week 1 to 17

The below graph shows the trends of waterborne diseases (Acute Diarrhea, Bloody Diarrhea and Acute Jaundice Syndrome) from all the EWARN reporting sites, indicating a steady pattern of acute diarrheal and bloody diarrhea cases.

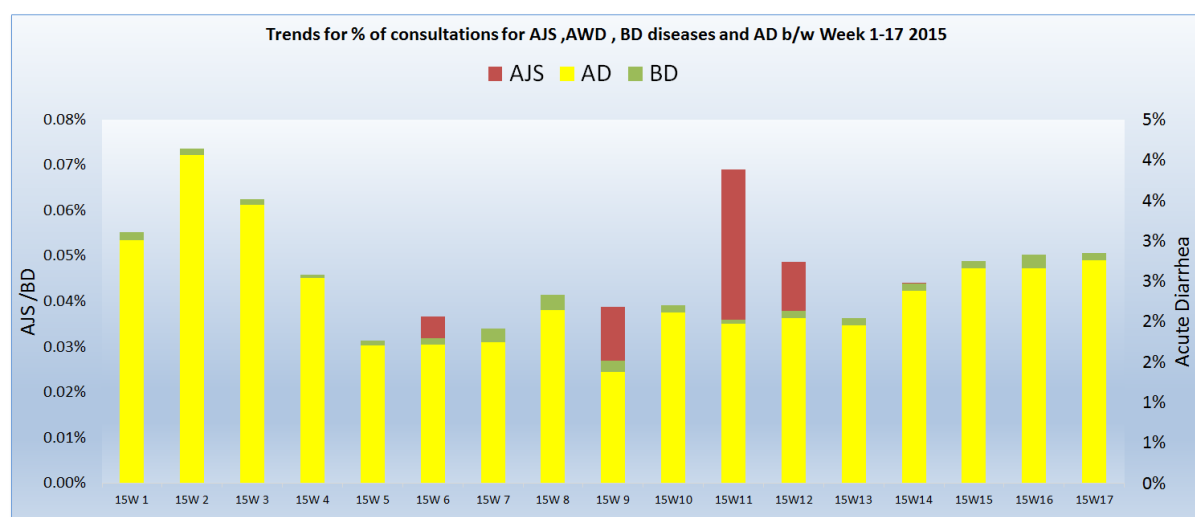


Figure VI: Trend of Waterborne Diseases (Acute Diarrhea, Bloody Diarrhea and Acute Jaundice Syndrome) as one of the leading communicable disease, from week 1 to 17;

## Alerts and Outbreaks

- A total of seven alerts were generated by EWARN in week 17; all of these were verified as true for further investigation and appropriate response by Erbil DoH/WHO.
- An alert for unexplained fever from Awen Eshar run by IOM in Erbil; eighteen cases of unexplained fever consecutively reported for last two weeks. The cases were investigated by Erbil DoH and WHO and were further referred to the tertiary hospital for further investigations. No unusual increase of cases was seen in the camp during the visit.

- Two alerts for suspected measles from Arbat IDP camp run by Emergency and Baharka IDP camp run by IMC were reported to EWARN during this week. Both cases were investigated and responded to by Erbil DoH. Blood samples were collected and dispatched to Central Laboratory in Baghdad.
- Two alerts for suspected bloody diarrhea cases from Arbat IDP run by Emergency and Al-Nukhaib run by UIMS were reported by EWARN; the alerts were timely investigated and responded. Samples collected and dispatched to Central Laboratory in Baghdad.
- Two alerts for suspected meningitis from Baharka IDP camp run by IMC and Shariya IDP camp run by Medair were reported by EWARN; the alerts were timely investigated and responded. Samples collected and dispatched to Central Laboratory in Baghdad, result was found negative.
- The measles campaign has been completed and the outbreak of measles in Arbat IDP camp in Sulamaniya run by Emergency NGO is gradually showing a steady decrease with expected reduction in number of cases in the coming weeks.

## Comments and recommendations

- There is a need to do on-job refresher trainings on case definitions for the healthcare providers working in the camps to avoid false diagnosis of cases; therefore, a training session is planned for the displaced in Governorates of KRG starting from next week.
- Electronic EWARN training is in progress in all the three governorates of KRG.

### For comments or questions, please contact

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