

IRAQ: Early Warning and Disease Surveillance Bulletin

Epidemiological Week 14:

Reporting Period: 30 March– 5 April 2015

Overview

- During week 14, twenty one reporting sites including seven refugee, nine Internally Displaced People's (IDP) camps, and five mobile clinics submitted their weekly reports timely and completely.
- The total number of consultations reported during this week was 15897 (males=7325 and females=8572) compared to 12868 (male=5996 and female=6870) consultations from the previous reporting week 13.
- There were twelve alerts generated through EARN which were timely responded and investigated by Department of Health (DoH).
 - Two alerts for suspected measles were generated from Arbat, Erbil IDP camp run by Emergency NGO and IOM respectively.
 - An alert for suspected meningitis was reported from Bajet Kandala IDP camp run by PU-AMI NGO.
 - Four alerts for bloody diarrhea were reported from Arbat, Baharka, Erbil settlement and Shariya IDP camps run by Emergency, IMC and Mediar respectively.
 - Five alerts for acute jaundice syndrome were generated by EARN through Darashakran, Esiyan, Gawilian, and Rainya IDP camps run by IMC, IOM, PU-AMI and World Vision NGOs and from Kowergosek refugee camp run by IMC.
- WHO in close collaboration with the Ministry of Health has started training on case definitions and use on electronic EARN tablets from Sulaymaniyah Governorate. The EARN will be monitoring all the camps catering IDPs and Refugees in Iraq while the host community will be covered by the national surveillance program.

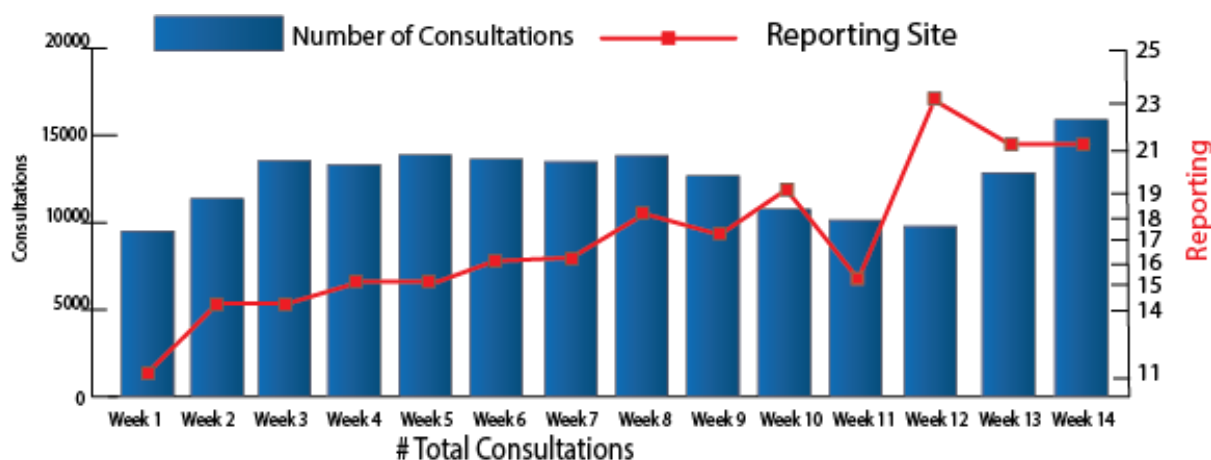
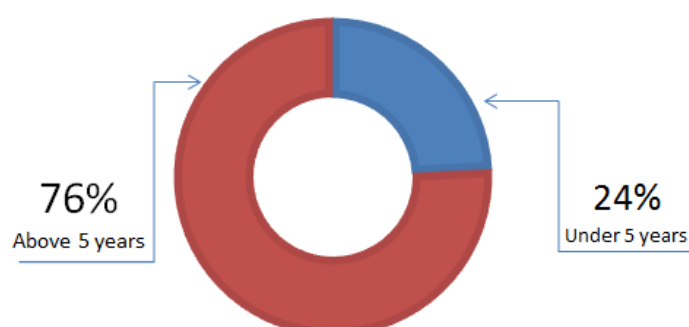


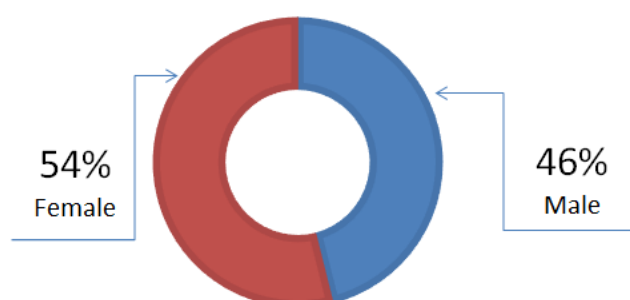
Figure 1: Total consultations and proportion of reporting health facilities b/w week 1-14

Consultations in camps by Age and Gender, week 1 – 14:

PERCENTAGE OF REPORTED CASES BY AGE



TOTAL REPORTED CASES BY GENDER



Morbidity patterns

Acute Respiratory Infection (ARI), scabies (SCB) and Acute Diarrhea (AD) remain the leading causes of morbidity during this week with 6431 (40%), 938 (6%) and 378 (2%) cases respectively reported from all the camps reporting to EWARN .

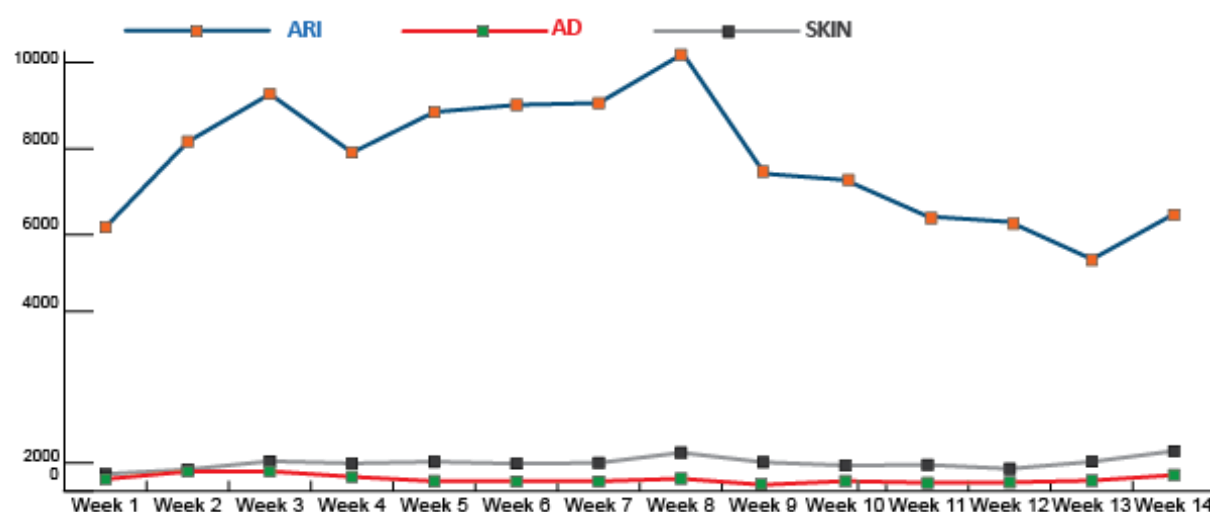


Figure II¹: Trend of # of cases of ARI, Scabies and AD from week 1 – 14

- The proportion of AD remains steady ranging between 3% to 11% (week 14=4%). Skin diseases trend remained constant from week 2-13 (week 14=18%). ARI proposition shows a steep increase of 5% in the caseload since week 14 (w13=56% and w14=61%).

¹ 1 The graphic axis is made on the basis of a logarithmic scale based on the orders of magnitude rather than the standard line scale. This enables illustration of data despite the large range of quantities.

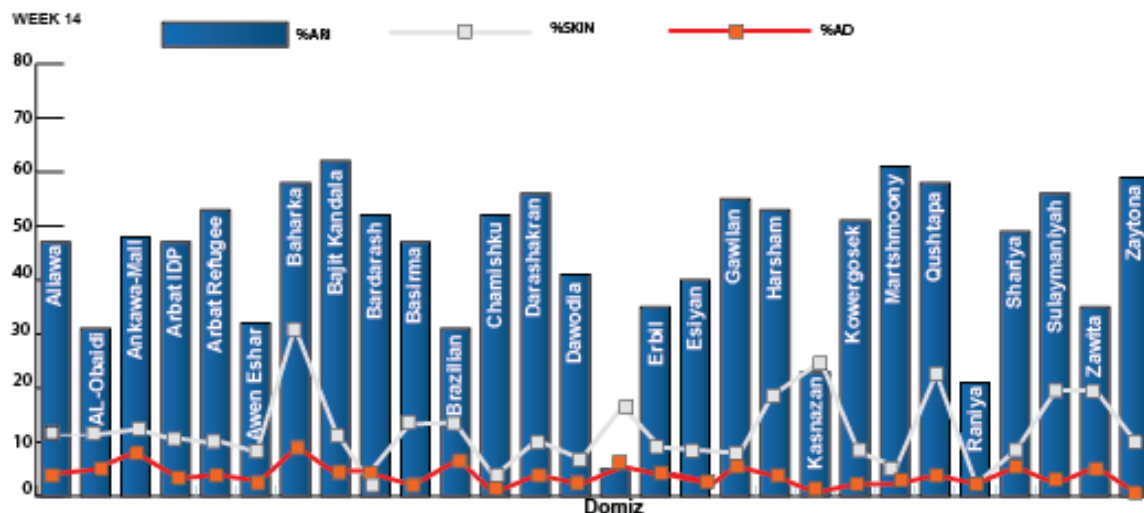
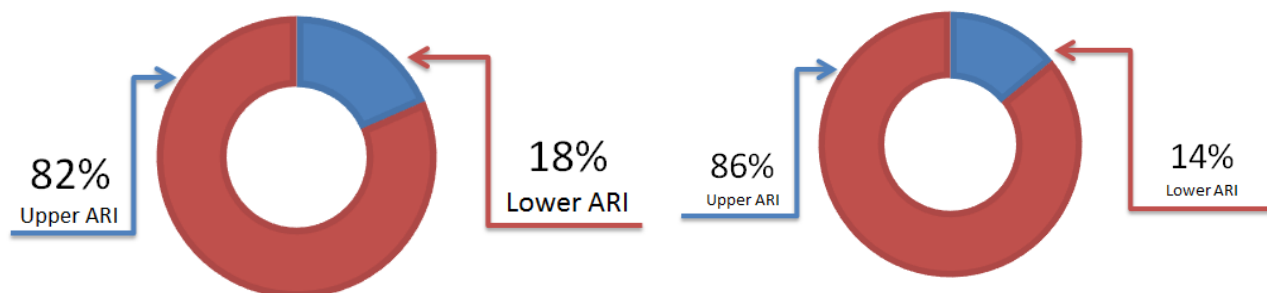


Figure III²: Trend of # of cases of ARI, Scabies and AD from week 1 - 14

- 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 the same when compared with week 14 (Upper ARI=86% and Lower ARI=14%).
 - The situation is being monitored accordingly and the underlying cause is currently the cold weather.

DISTRIBUTION OF RESPIRATORY TRACK INFECTIONS (ARI) WEEK 13

DISTRIBUTION OF RESPIRATORY TRACK INFECTIONS (ARI) WEEK 14



- Proportion of Lower ARI cases was the highest in Qushtapa refugees camp (L-ARI=17%) when compared with the other reporting site in week 14; although there has been a steep decrease of (7%) in the proposition when compared with week 13 (L-ARI=24%).
- Refresher training on EWARN is underway to strengthen proper diagnosis and filling of EWARN forms. Therefore the proportion of Lower – ARI will reduce in the coming weeks due to the correct syndromic diagnosis of cases based on the EWARN case definitions.

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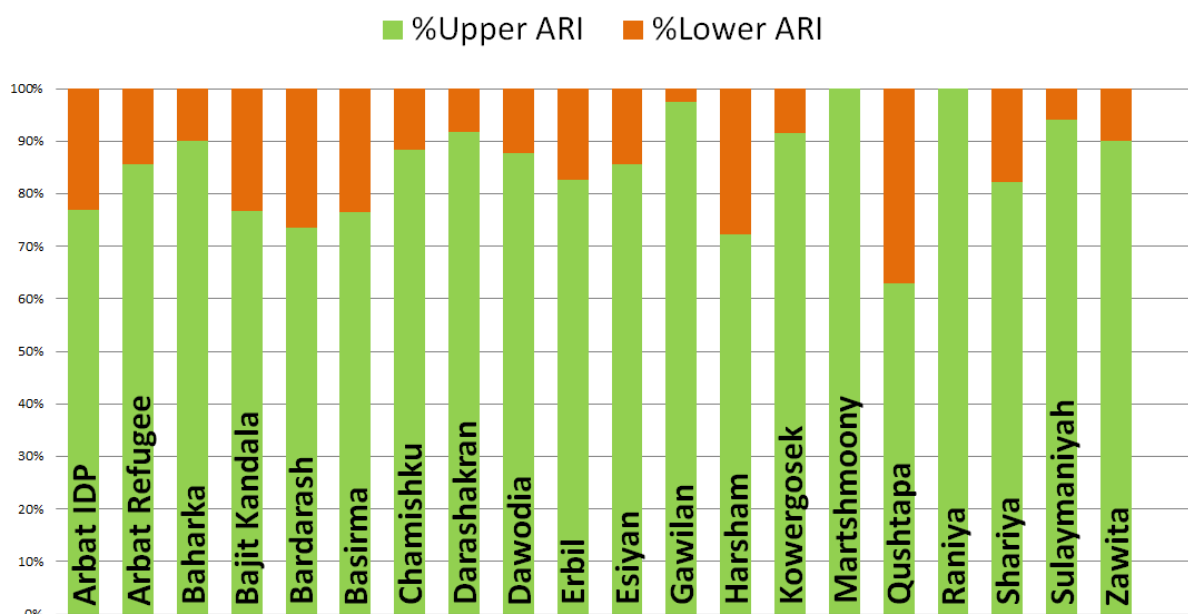
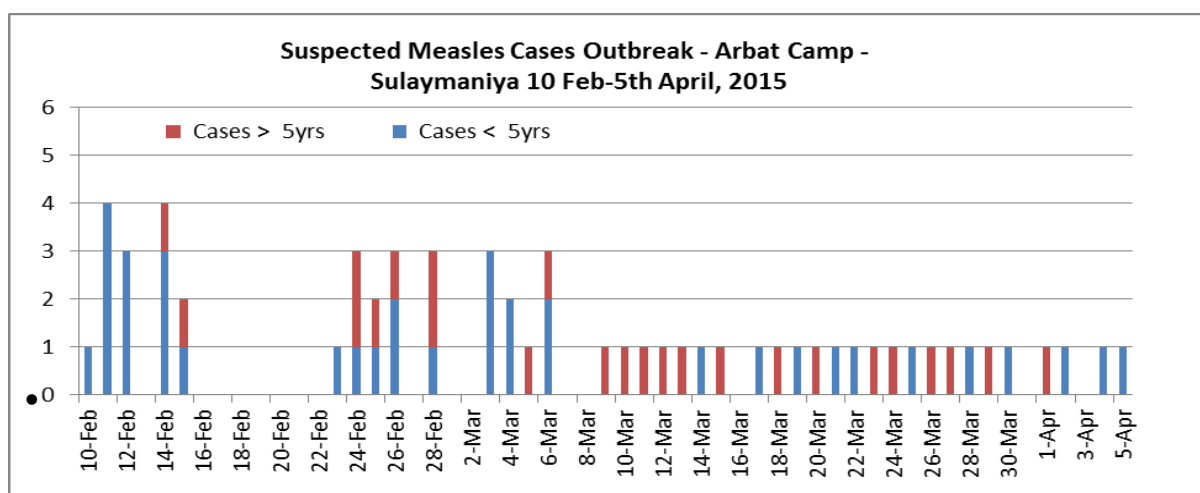


Figure IV: Trend of Upper and Lower ARI leading communicable disease, by weeks 14

- Skin infections are the second highest cause of consultation after ARI.
 - Qushtapa Refugees camp reported the highest proportion of skin infection cases (18%) followed by Zawita IDPs camp (15%) and Basirma Refugee (14%) Camp.
 - The health, WASH clusters and WHO in coordination with the Department of Health are conducting hygiene and health education and promotion activities in all the camps.
- Acute Diarrhea (AD) cases trend has remained constant in most of the camps and on-job training on EWARN has helped the healthcare providers to differentiate between Acute Diarrhea and Acute Watery Diarrhea

Alerts and Outbreaks

- There were twelve alerts generated through EWARN which were timely responded and investigated by DoH.
- Two alerts for suspected measles were generated from Arbat and Erbil IDP camps run by Emergency NGO and IOM respectively. Blood samples were collected and send to the laboratory.
- The measles campaign has been completed and the outbreak of measles in Arbat IDP camp in Sulamaniya run by Emergency NGO is showing a steady decrease with gradual reduction in number of cases in the coming weeks.



- An alert for suspected meningitis was reported from Bajet Kandala IDP camp run by PU-AMI. Samples were collected by the investigation team and were found negative.
- Four alerts for bloody diarrhea were reported from Arbat, Baharka, Erbil settlement and Shariya IDP camps run by Emergency, IMC and Mediar respectively. The cases were investigated and were found to be sporadic, no clustering was found. The situation is monitored through EWARN system.
- Five alerts for acute jaundice syndrome were generated by EWARN through Darashakran, Esiyan, Gawilian, Kowergosek , and Rainya IDP camps run by IMC, IOM, PU-AMI and World Vision NGOs. The situation is monitored and response teams did an investigation to identify any clustering; all cases were sporadic and WASH cluster was informed accordingly.

Comments and recommendations

- There is a need for on-job refresher trainings on case definitions for 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 next week.

For comments or questions, please contact

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