



Iraq: EWARN & Disease Surveillance Bulletin

2017 Epidemiological Week: 1

Reporting Period: 02 – 08 Jan , 2017

Highlights

- ◆ **Number of reporting sites in Week 1:** One hundred and fifty (150) reporting sites (79% of the total EWARN reporting sites) including eighty eight (88) in internally displaced persons (IDPs) camps, five (5) in refugee camps, five (5) hospitals and fifty one (51) mobile clinics submitted their weekly reports completely and in timely manner.
- ◆ **Total number of consultations in Week 1:** 75,601 (Male=41,487 and Female=34,114) marking an increase of 373 since last week, (total consultations in Week 52, 2016: 75,228).
- ◆ **Leading causes of morbidity in the camps in Week 1:** Acute respiratory tract infections (ARI) (n=31,063), acute diarrhea (AD) (n=2,280) and skin diseases (n=933) remained the leading causes of morbidity in all camps and displaced population areas served by mobile clinics during this reporting week.
- ◆ **Number of alerts in Week 1:** No alerts were generated through EWARN this week.

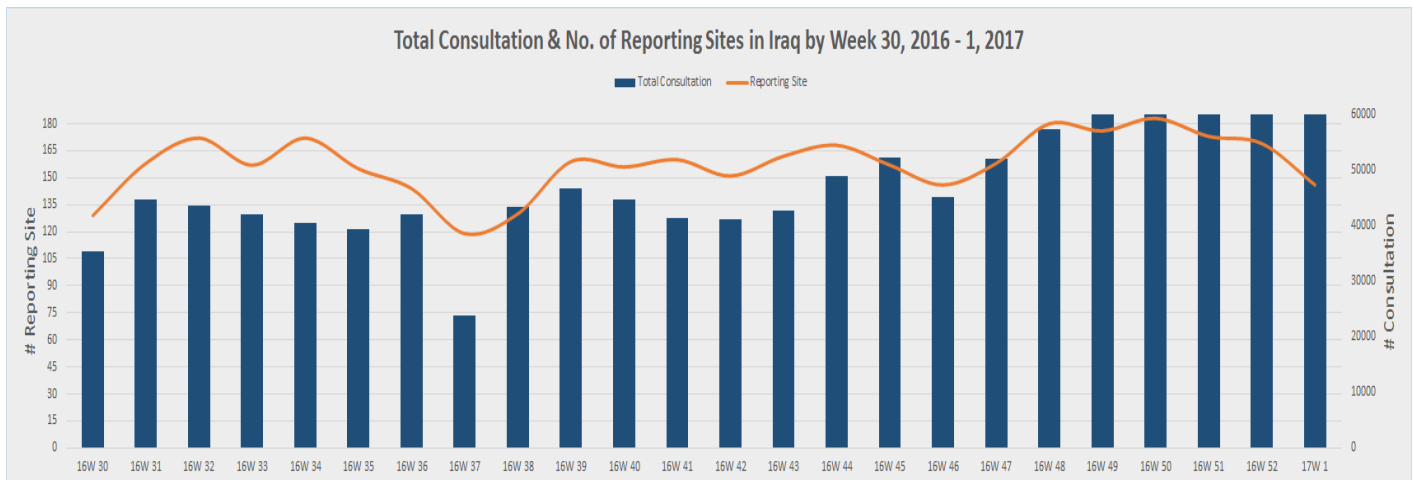


Figure I: Distribution of total consultations and number of reporting health facilities by week, Week 30, 2016–1, 2017

Highlights

- **Number of reporting sites** increased from 84 health clinics at the end of 2015 to 189 end of 2016
- **The cumulative number of consultations** during 2016 was 2,144,983
- **Static and mobile Health clinics** from the departments of health and 29 I/L partners (NGOs) reported to the EWARN.
- **The common reported disease event** was acute respiratory infections, followed by acute diarrhea and scabies (please see Figure II

Figure II: Trends of waterborne diseases from refugee camps, Week 30, 2016 -01,2017.

Ninewa Governorate

Highlights:

- ◆ In week 01, Thirty six (36) reporting sites including 12 medical mobile clinics and 24 static health facilities submitted their EWARN timely and completely.
- ◆ The total consultations in Ninewa Governorate in week 01/2017 was 18,282.
- ◆ No alert reported this week.
- ◆ UIMS PHC in Gayyara airstrip camp and DAMA/MALTESER mobile clinic in Hassansham M2 camp submitted EWARN reports for the first time.

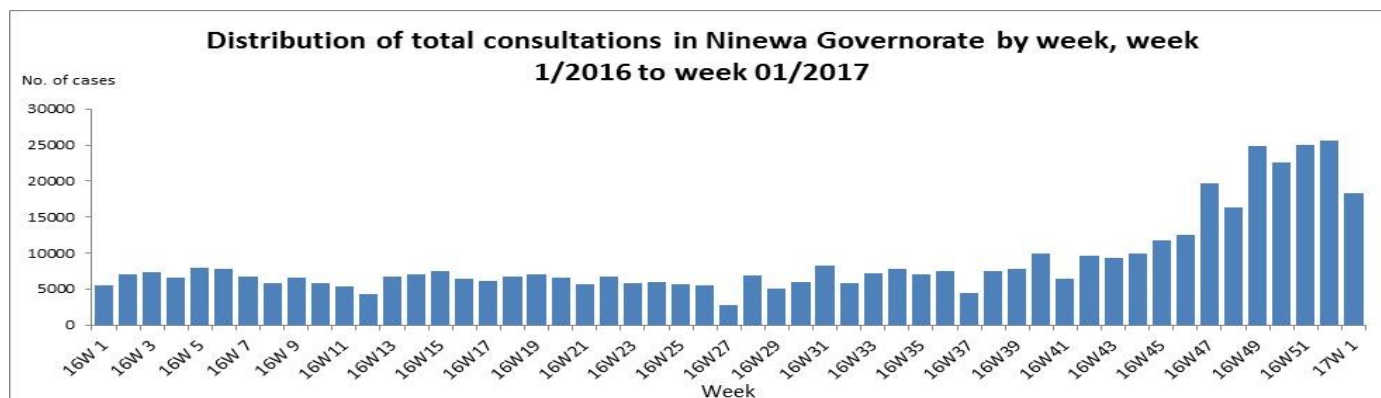


Figure II: Distribution of total consultations in Ninewa Governorate by week, week 01/2016 to week 01/2017

Common reported events:

- ◆ The most common reported disease events/ syndrome during week 51 in Ninewa department of health were acute respiratory infections (52%), acute diarrhoea (4%), cutaneous leishmaniasis (3%), and suspected scabies (1%) (please see the below table).

Table I: Distribution of the common reported disease events in Ninewa Governorate in week 01, 2017

Health Sector	Acute Respiratory Infections	Acute Diarrhoea	Suspected Scabies	Cutaneous Leishmaniasis	Other diseases
Al-Hamdaniya	1799	30	66	1	1809
Sinjar	154	0	0	101	183
Telafar	1554	115	0	117	1285
Tilkaif	1028	70	9	4	1291
BARDARASH	338	16	8	0	602
GAYARA	3277	456	4	355	1006
Al-Shikhan	859	3	0	0	527
Makhmur	567	116	5	0	286
Grand Total	9576	806	92	578	6989

Morbidity Patterns

IDPs camps:

During Week 01, the proportions of acute respiratory tract infections (ARI), acute diarrhea and skin infestations including scabies in IDP camps decreased compared to the previous week (please see Figure III below).

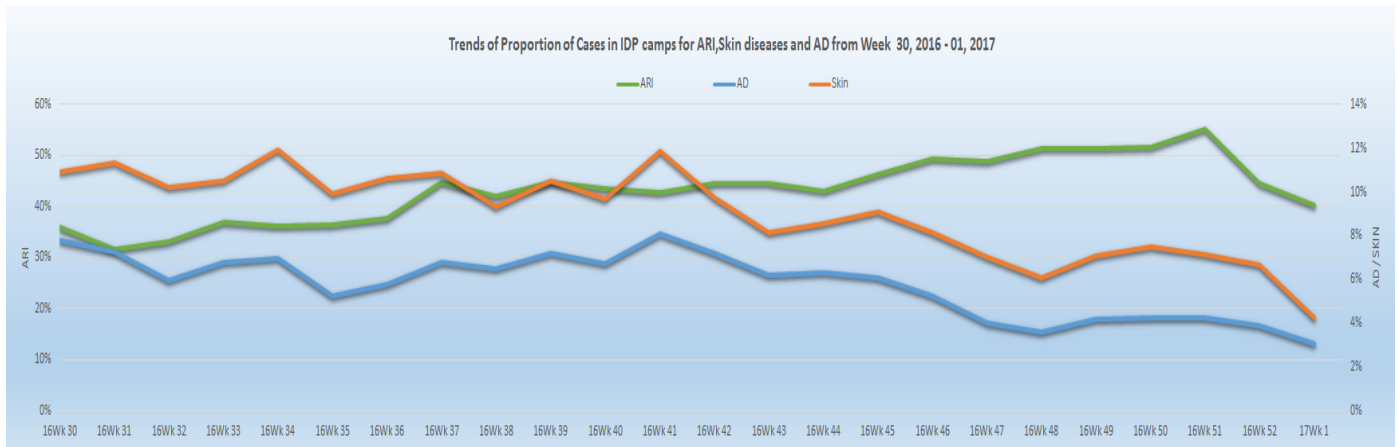


Figure III: Distribution of the acute respiratory infection, scabies and acute diarrhea in IDP camps, Week 30, 2016 – 1, 2017

Refugee camps:

During Week 01, the proportions of acute respiratory tract infections (ARI), acute diarrhea and skin infestations including scabies increased from the previous week (please see Figure IV below).

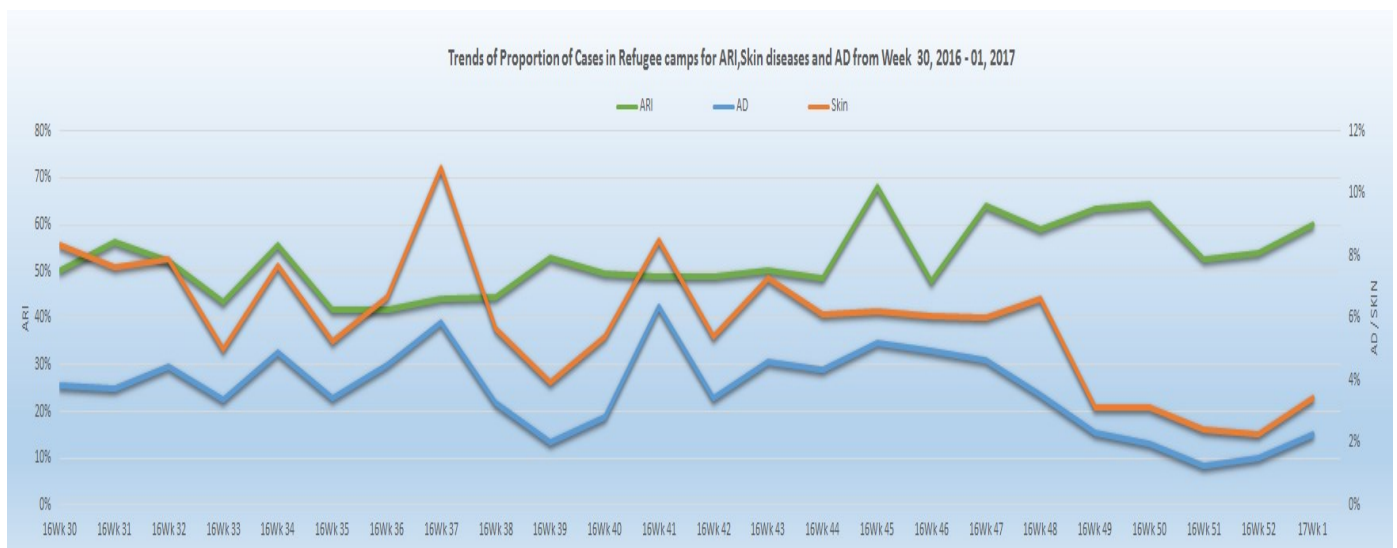


Figure IV: Distribution of the acute respiratory infection, scabies and acute diarrhea in refugee camps, Week 30, 2016 –01, 2017

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

Figure V below indicates the proportions 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 01, 2017.

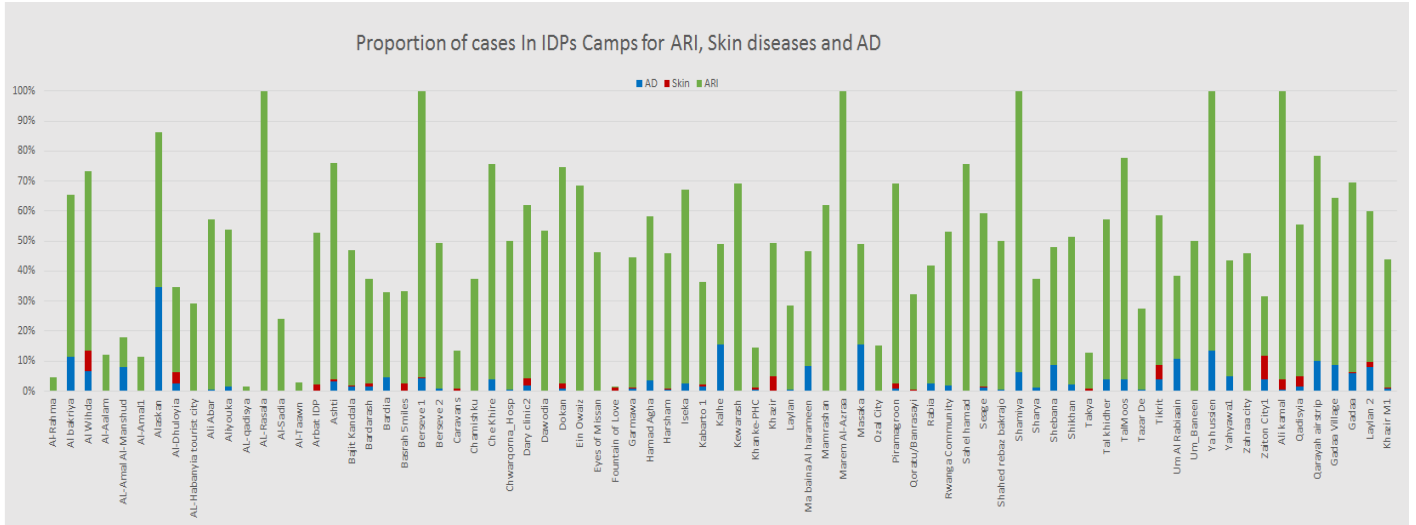


Figure V: Proportion of cases of ARI, scabies and AD in IDP camps for Week 01, 2017

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

Figure VI below indicates the proportions of acute respiratory tract infections, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity in the refugee camps for Week 01, 2017.

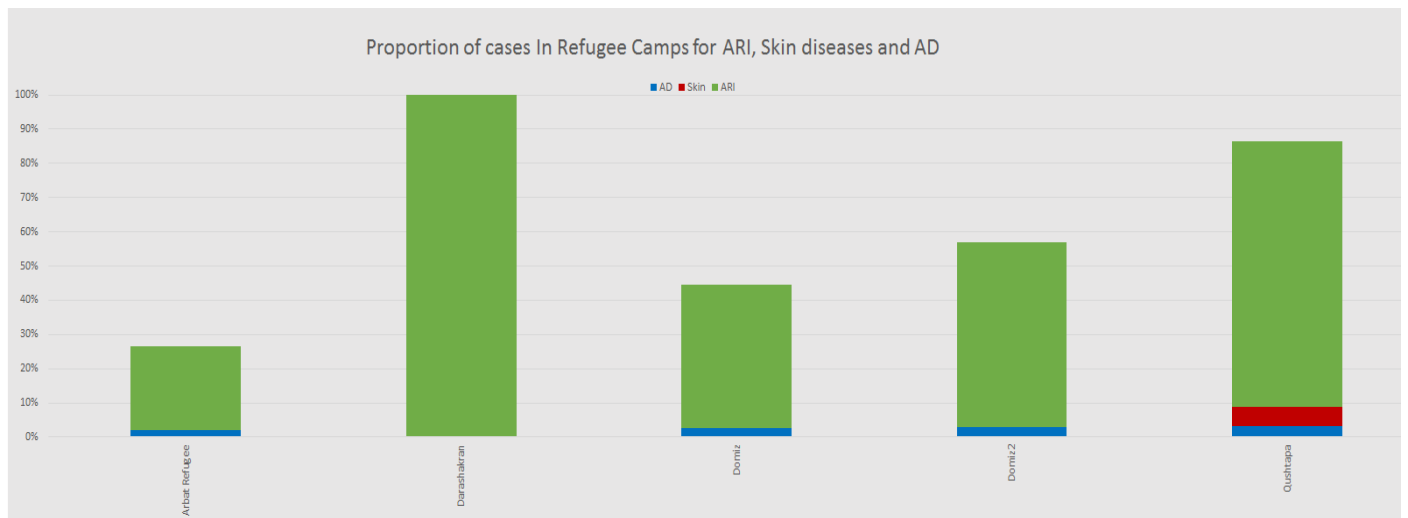


Figure VI: Trend of proportions of cases of ARI, scabies and AD in Refugee camps for Week 01, 2017

Distribution of the common diseases by proportion and location for IDPs covered by mobile clinics

Figure VII below indicates the proportions of acute respiratory tract infection, acute diarrhea and skin infestations including scabies which comprises the highest leading causes of morbidity of IDPs covered by mobile clinics for Week 01, 2017.

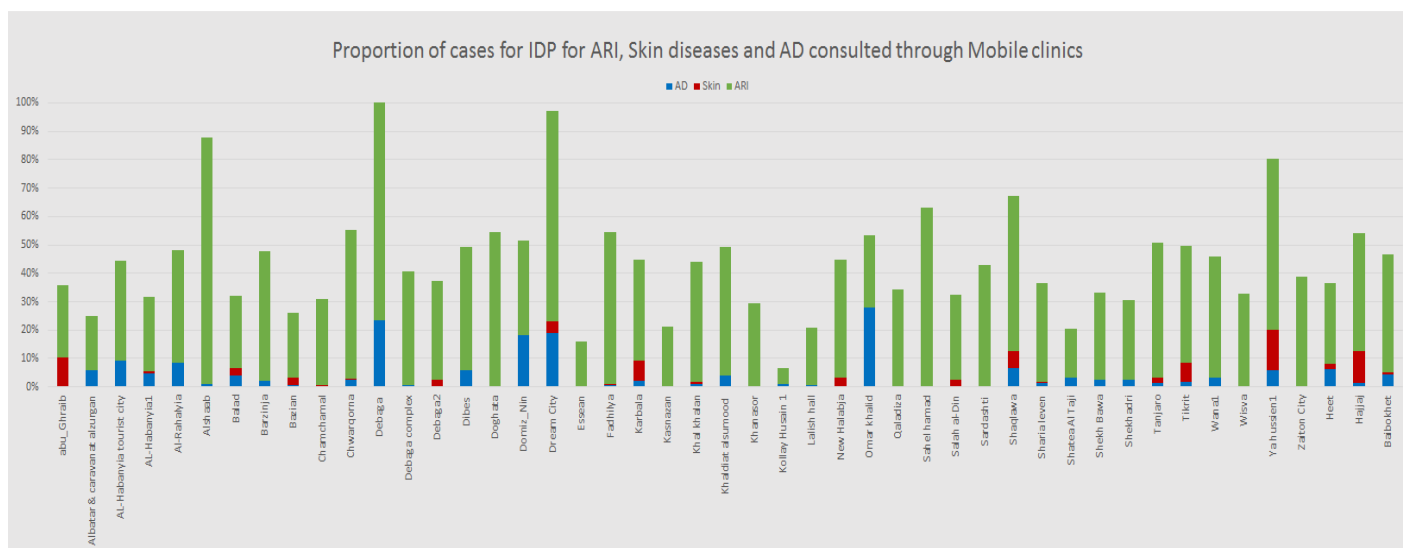


Figure VII: Distribution of ARI, scabies and AD covered by mobile clinics for the IDPs, Week 01, 2017

Trends of Acute Diarrhea

Figure VIII below shows the trends of acute diarrhea reported in the period from Week 01 to Week 25 in 2015, 2016 and week 01 in 2017 through the EWARN system. This week showed a increasing trend of the decrease compared to last weeks.

In 2006, the trend of the disease showed a peak in Week 24 (3387 cases).

From Week 31 there is a decrease in the reporting of AD through all the EWARN reporting governorates.

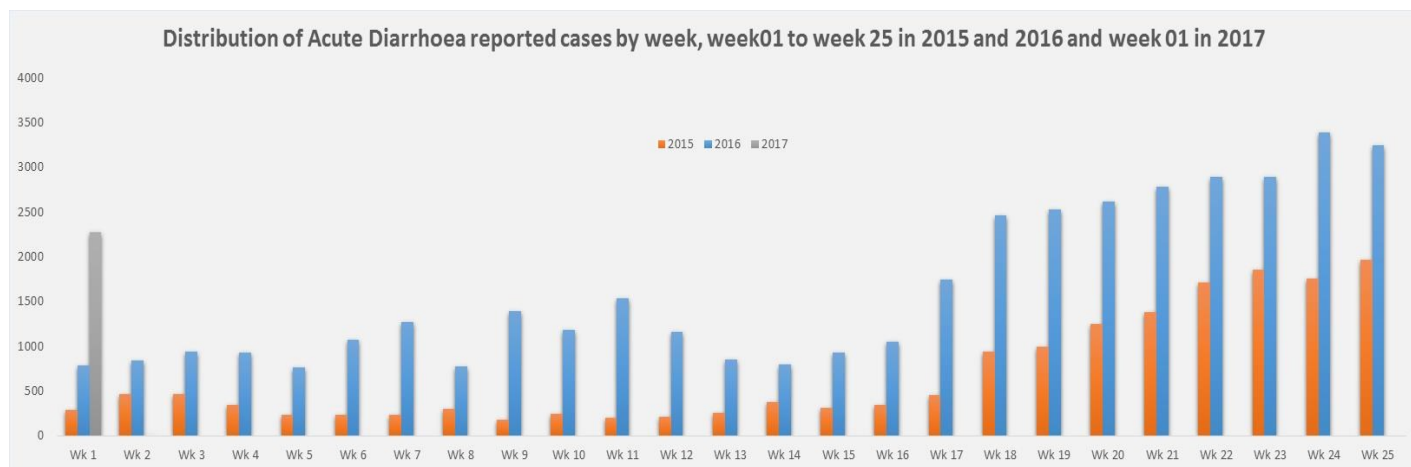


Figure VIII: Distribution of acute diarrhea reported cases by week, Week 01–Week 25. 2015-2016 & 2017

Trends of waterborne diseases in IDP camps

Figure IX below shows the trends of waterborne diseases (acute diarrhea, acute bloody diarrhea and acute jaundice syndrome) reported from IDP camps indicating a decrease in waterborne diseases.

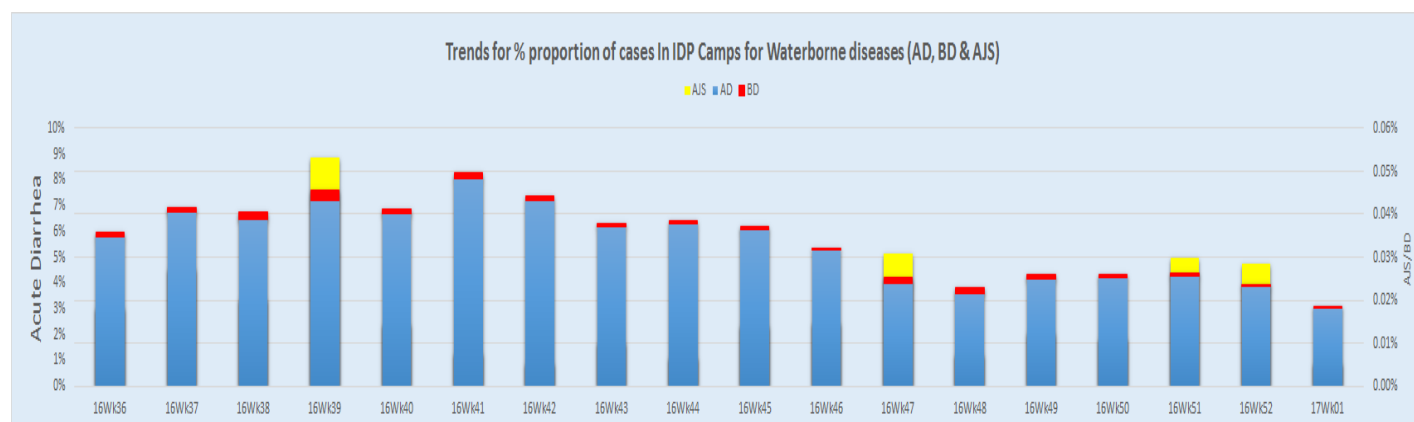


Figure IX: Trend of waterborne diseases from IDP camps, Week 36/2016 –01/2017

Trends of waterborne diseases in refugee camps

Figure X below shows the trends of waterborne diseases (acute diarrhea, acute bloody diarrhea and acute jaundice syndrome) reported from refugee camps, and indicated a decrease in waterborne diseases.

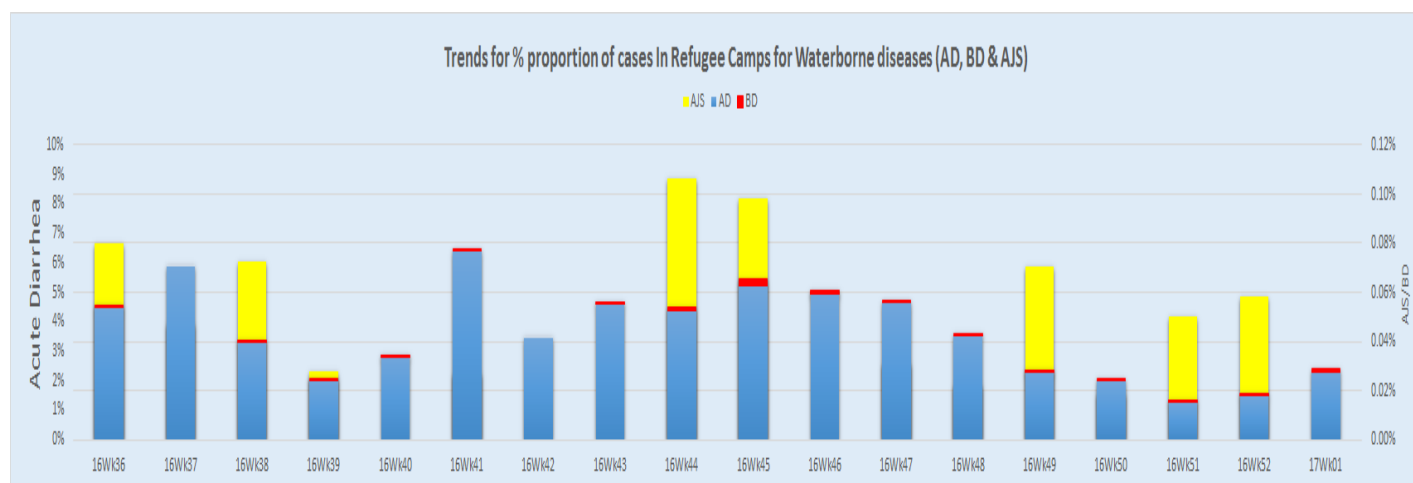


Figure X: Trends of waterborne diseases from refugee camps, Week 36/2016 -01/2017.

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)