



Situation Report for Acute Watery Diarrhoea/Cholera

Epidemiological Week 22(28th May -3rd June 2018)

HIGHLIGHTS

- A total of 396 new cases AWD/cholera were reported in week 22 compared to 357 week 21.
- 47% (186) cases were reported from flood affected regions of Lower Shabelle and Lower Jubba regions
- 1 new death were reported in week 22 compared to 4 deaths reported in week 21
- The AWD/Cholera death reported in week 22 occurred in Banadir.
- A cumulative total of 4,300 cases including 28 deaths have been reported since December 2017
- The new AWD/cholera cases reported in Beletweyne started in December 2017. In 2018 new outbreaks were reported in Banadir, Kismayo, Jowhar, Bulobarde and Afgoye
- Alerts received from Baidoa, Herale (Galmuduq) and Elwak (Gedo) were negative for AWD.

KEY FIGURES

- 396 new cases and 1 new death in week 22
- 50% of the new cases were female
- 38% of the cases were below 2 years
- Cases reported in week 22 did not receive cholera vaccine in 2017
- 20 districts in 4 regions have reported new AWD case since December 2017
- 4,300 cumulative case including 28 deaths since December 2017 (CFR 0.7%).

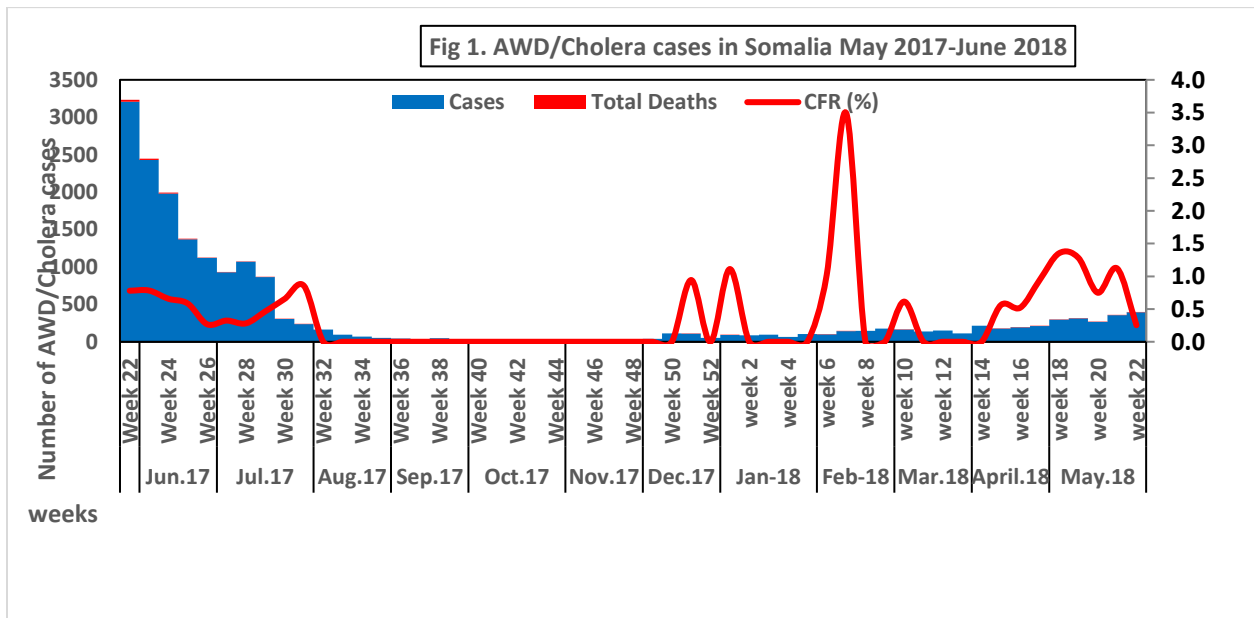
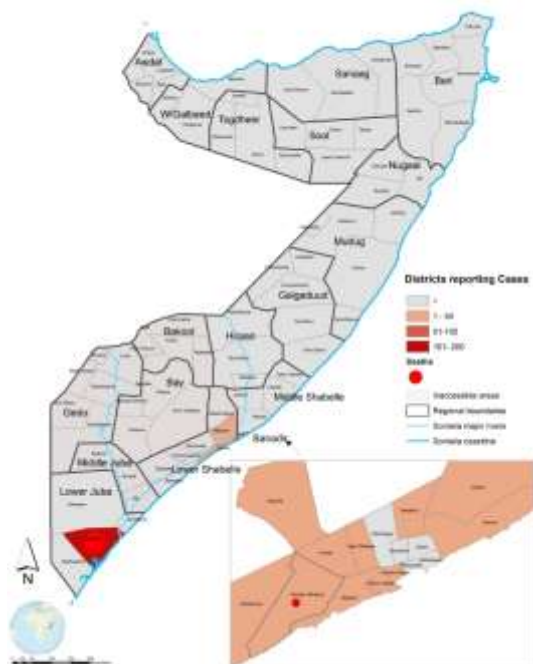


Fig 2. Districts Reporting Cases in Week 22



Following the heavy rains that have led to the floods in the Jubba land and Shabelle basins, there has been an observed increase in the number of new AWD/Cholera cases (fig 1). The cholera outbreak that started in December 2017 in Beletweyne along river Shabelle has spread to Jowhar, Kismayo, Afgoye Merka and Banadir. The cholera spread is expected to increase due to the floods that have led to contamination of water sources in the flood affected regions. Floods have also led to blockage of access of health services which will contribute to delayed health seeking by the affected populations with. Over the past 2 Weeks, there has been an increase in the number of AWD/Cholera cases reported in Lower Shabelle, Banadir and Lower Jubba; the regions that are affected by floods. In week ending 3rd June, active transmission of AWD/cholera was reported in Kismayo district in Lower Jubba, Afgoye and Merka in Lower Shabelle as well as in 11 districts of Banadir region (Darkenly, Daynile, Hodan, Madina, Waberi, HamarWeine, Hamarjabjab, Heliwa, and Kaaran, Yaqshid, Howlwadag districts) (fig 2). In Kismayo, affected communities especially in Farjano IDP are reportedly using contaminated water due to floods. As shown in table 1, there was a increase in the number of cases reported from 357 in week 21 to 396 in week 22. The

Oral Cholera Vaccination that was implemented in 11 high risk districts in 2017 of the central region has greatly contributed to the reduction in the number of new AWD/cholera cases compared to the same time in 2017(fig 1).

Table 1. Summary of AWD/Cholera cases in different regions

States	Regions	Week 21 Ending 27 th May 2018			Week 22 Ending 3 rd June 18			Cumulative as of 3 rd June 2018		
		Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)
	Banadir	199	1	0.5	210	1	0.5	1,576	11	0.7
Jubba land	L/ Jubba	142	3	2.1	146	0	0	1,609	14	0.9
South west	L/ Shabelle	16	0	0	40	0	0	135	0	0
Hir-shabele	M/Shabelle	0	0	0	0	0	0	415	2	0.5
	Hiraan	0	0	0	0	0	0	565	1	0.2
Total		357	4	1.1	396	1	0.3	4,300	28	0.7

NB. Deaths are included among cases. Banadir Region is not a state

AWD/Cholera case load

As shown in Table 2 below Banadir hospital has registered the highest number of AWD/Cholera admissions compared to other treatment facilities. Banadir CTC is the referral hospital for different regions and also the region has the highest concentration of refugees in different IDP camps. The Case Fatality Rates in Banadir and Farjano CTC are higher than the threshold. This has been attributed to delayed arrival at the treatment facilities by the patients. The above threshold CFR in Farjano CTC may be due to the delayed in seeking care among the affected patients.

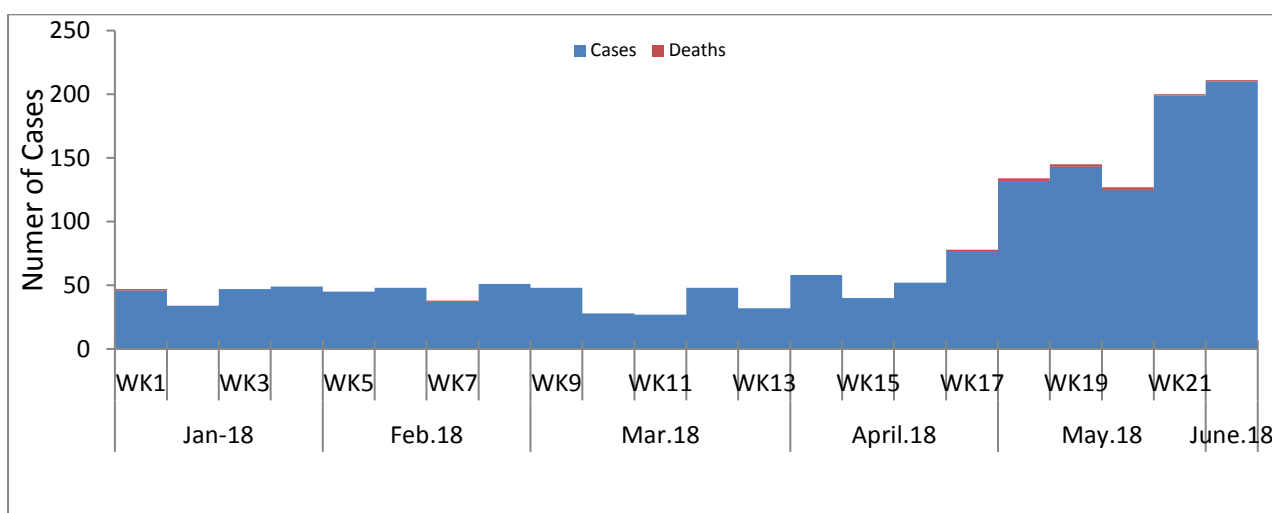
Treatment facility	New cases			Cumulative case		
	week ending 3 rd June 18			(12/17-06/18)		
	Admissions	Deaths	CFR(%)	Admissions	Deaths	CFR(%)
Banadir Hospital	210	1	0.5	1,576	11	0.7
Beletwyene CTC	0	0	0.0	522	1	0.2
Bulo Burde CTU	0	0	0.0	43	0	0.0
Kismayo Hospital	110	0	0.0	976	6	0.6
Farjano CTU	36	0	0.0	633	8	1.3
Afgoye Hospital	24	0	0.0	119	0	0.0
Ayuub Health Centre	16	0	0.0	16	0	0.0
Jowhar CTC	0	0	0.0	415	2	0.5
Total	396	1	0.3	4,300	28	0.7

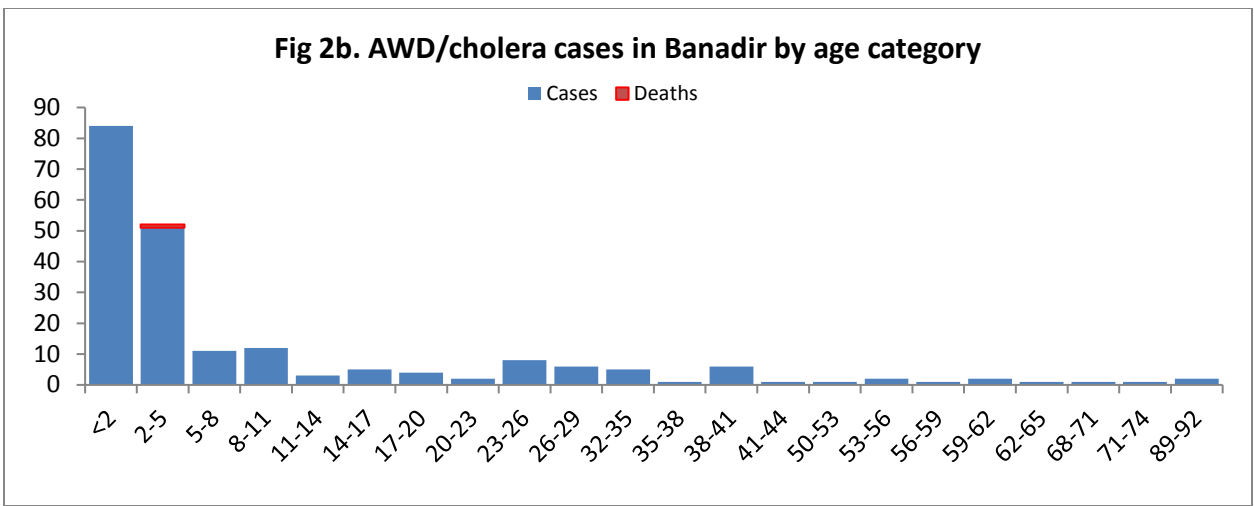
The deaths as shown in table 2 above where not confirmed by stool analysis

AWD/Cholera situation in Banadir region.

Banadir regions which included Mogadishu city has one of the highest concentration of refugees where access to safe water and proper sanitation is limited. The AWD/Cholera outbreak in Banadir region started in January 2018 following reports of similar outbreak in Beletweyne district of Hiraan region (Fig 2a). Of the 17 districts that make up Banadir region, 11 have so far reported cases which have been managed in Banadir CTC located in the capital Mogadishu. There has been an increase in the number of AWD/Cholera cases from 199 and 1 death to 210 cases and 1 death in the past 2 weeks. More than 64% of the AWD cases reported in Banadir are children below 2 years of age (Fig 2b)

Fig 2a. AWD cholera cases in Banadir(January 2018-June-2018)

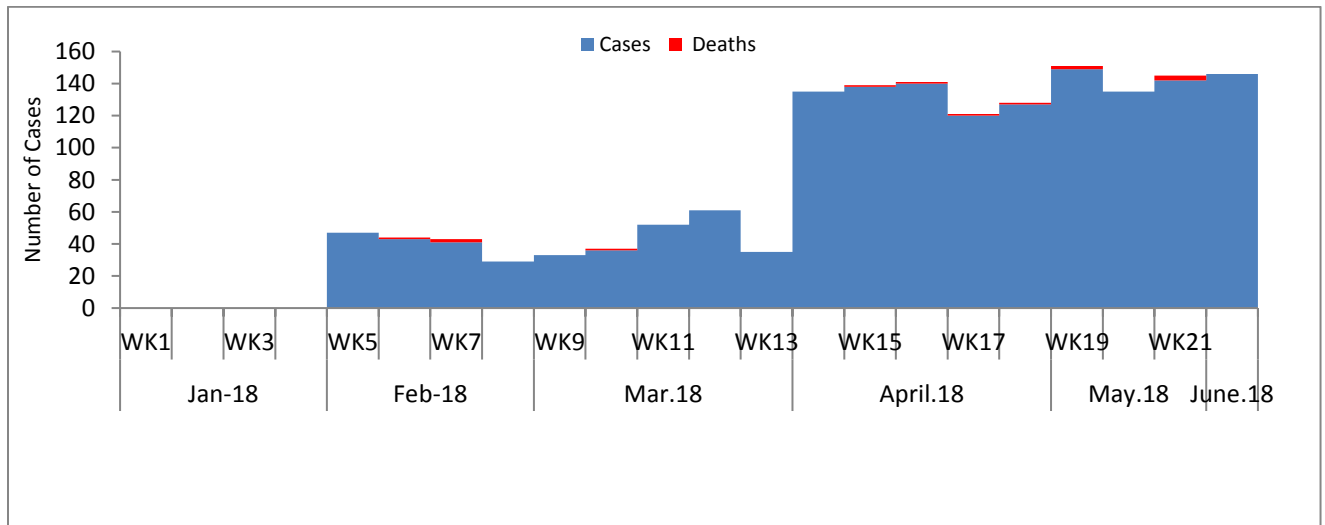


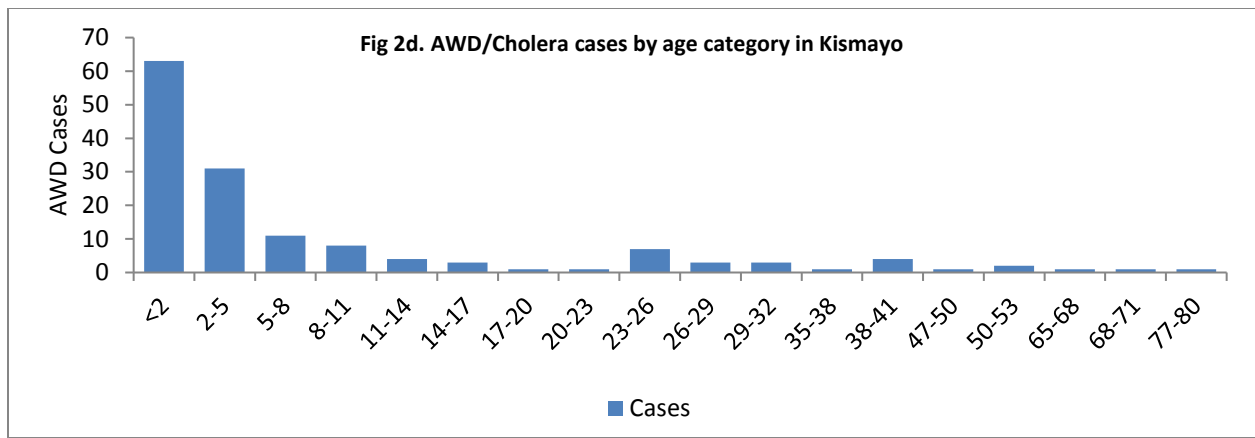


AWD/Cholera situation in Lower Jubba

The current AWD/Cholera outbreak in Kismayo district started in week 5 of 2018 in the IDP communities of Farjano where access to safe water and sanitation is limited. The district is characterised by returnees from Kenya as well as those displaced by war in Middle Jubba. Currently Lower Jubba is one of the flood affected regions. The reported cases of AWD/Cholera did not receive OCV which was given in Kismayo in March 2017. The persons may have been absent during the OCV campaign. Over the past week, the number of AWD/Cholera cases in Lower Jubba have increased from 142 and 3 deaths to 146 no deaths (Fig 2c). More than 43% of the cholera cases reported from Lower Jubba are children below 2 years (Fig 2d).

Fig 2c. AWD cholera cases in Lower Jubba February 2018 -June 2018)

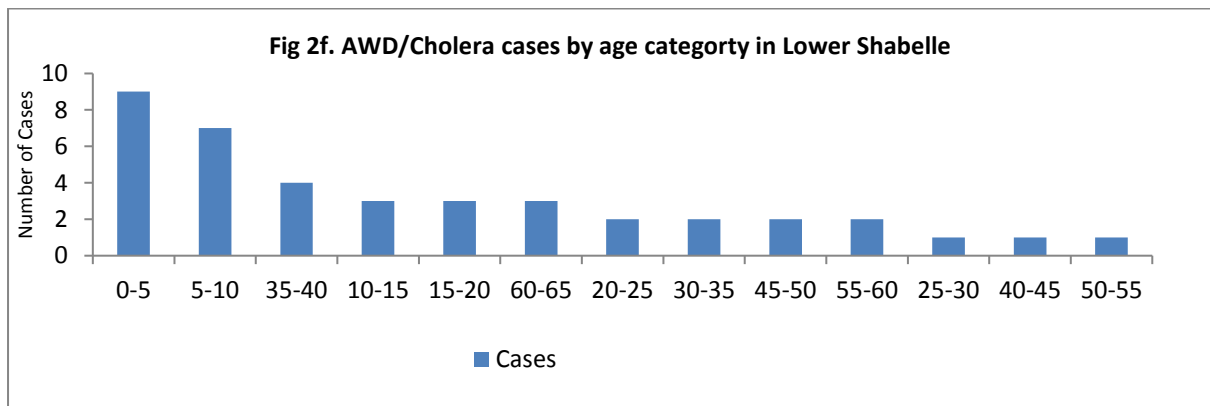
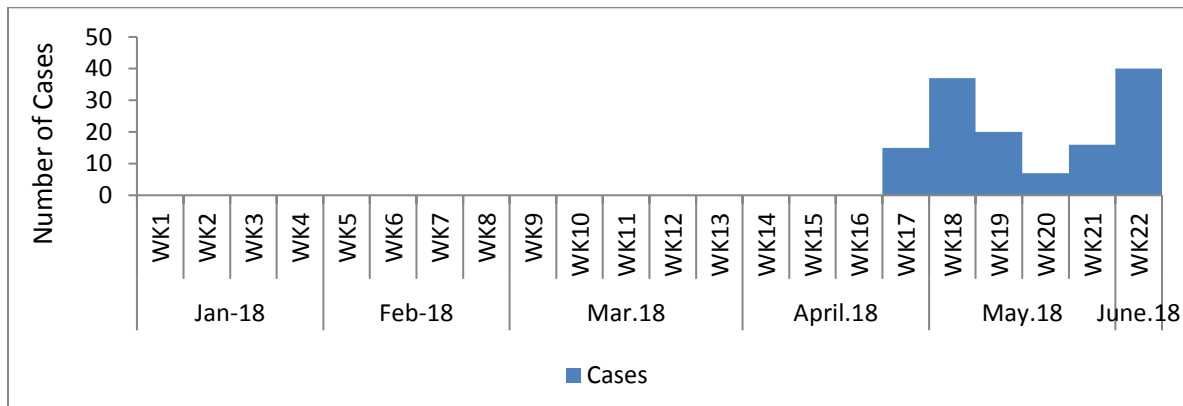




AWD/Cholera situation in Lower Shabelle

The AWD/Cholera outbreak in Lower Shabelle region started in week 17 of 2018 and Merka district started in week 22-2018 (Fig 2e) as a result of displacement of people due to floods that have been reported in this regions. Afgoye is the most affected district and cases are being managed in lower shabelle. More than 44% of the cases reported in Afgoye are children below 5 years (Fig 2f)

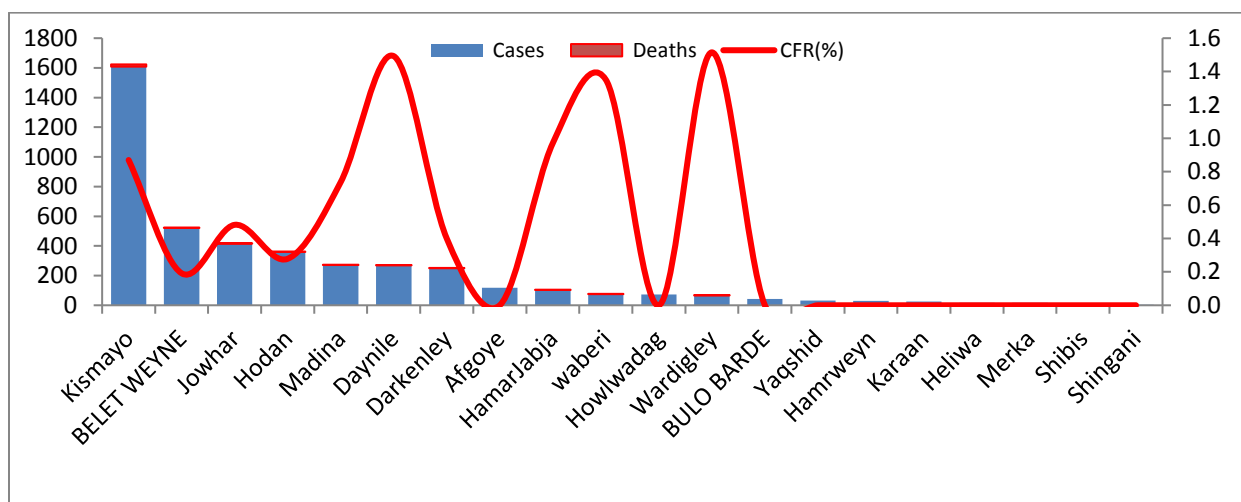
Fig 2e. AWD cholera cases in Lower Shabelle -June-2018)



Distribution of cholera cases per districts

As shown in fig 3 below, the most affected districts with AWD/Cholera are Kismayo, districts in Banadir and Beletweyne. These are cholera endemic areas that are also affected by current floods. These regions have a high concentration of refugees where access to safe water and sanitation is limited. Even when Hodan and Daynile districts of Banadir have reported the highest case Fatality rates, these deaths were not conclusively verified to be cholera associated.

Fig 3. Distribution of AWD/Cholera cases by district



AWD/Cholera cases and Oral cholera vaccination

Oral cholera vaccination campaign was implemented in Somalia in 10 districts of 6 regions (table 3). A total of 1,274,809 (90%) received the first dose of OCV while 1,196,518(86%) received 2 doses of OCV. During the current outbreak, records show that of the 4,300 cases in all regions, 100% did not receive the oral cholera Vaccines for a number of unspecific reasons including not being present in homes during the campaign period. It should also be noted that OCV was implemented in areas which have a high concentration of immigrants and repeated displacement due to insecurity.

Region	District	Target ¹	OCV 1	% OCV 1	OCV 2	% OCV2
Banadir	Hodan	174,600	174,600	100	151,902	87
	Dharkenley	29,100	29,100	100	26,481	91
	Daynile	58,425	58,425	100	56,983	98
	Wadajir	149,870	144,678	97	141,151	98
Hiraan	Beletweyne	85117	85,118	100	80,862	95
Lower Juba	Kismayo	165,095	163,775	99	152,638	93
	Afmadow	104,933	98,567	94	94,919	96
Bay	Baidoa	322,497	212,794	66	187,425	88
Middle Shabele	Jowhar	239,000	229,305	96	227,506	99
Bakol	Hudur	84,842	78,447	92	76,651	98
Total		1,413,479	1,274,809	90	1,196,518	85

¹Figures based on Polio EPI population estimated 2017

Laboratory activities

Stool samples are collected from 6 Cholera Treatment units/Centres currently operational in 4 regions. Of the 193 stool samples so far collected since the beginning of the year, 63 tested positive for V. cholera (Table 4)

SN	Regions	CTC/CTU	Date Collected	Positive samples	Negative Cases	Total
1	Banadir	Banadir Hospital	3 rd Jan18	2	5	7
2	Banadir	Banadir Hospital	15 th Jan18	2	11	13
3	Hiran	Beletweyne town	25 th Jan 18	0	10	10
4	Banadir	Banadir Hospital	27 th Jan 18	0	7	7
5	Lower Jubba	Kismayo Hospital	28 th Jan 18	4	2	6
6	Banadir	Banadir Hospital	5 th Feb 18	1	4	5
7	Banadir	Banadir Hospital	14 th Feb 18	1	7	8
8	Middle Shabelle	Jowhar Hospital	17 th Feb 18	9	1	10
9	Banadir	Banadir Hospital	25 th Feb 18	1	7	8
10	Middle Shabelle	Jowhar Hospital	5 th March 18	6	4	10
11	Hiran	Bulobarde	7 th March 18	6	4	10
12	Galgadud	Herale	7 th March 18	0	10	10
13	Hiran	Bulobarde	28 th March 18	0	10	10
14	Lower Jubba	Kismayo Hospital	15 th April 18	7	3	10
15	Banadir	Banadir Hospital	22 nd April 18	1	7	8
16	Banadir	Banadir Hospital	30 th April 18	6	6	12
17	Lower shabelle	Afgoye Hospital	3 rd May 18	3	6	9
18	Banadir	Banadir hospital	8 th May 18	7	12	19
19	Lower Jubba	Kismayo	19 th May 18	7	2	9
20	Bay	Baidoa	29 th May 18	0	12	12
TOTAL				63	130	193

AWD/Cholera cases and floods

Following heavy rains in Ethiopia and Somalia, flash floods have been reported in the basins of Juba and Shabelle in 4 states. An estimated 718,000 people have been affected of which 220,000 have been displaced. Floods contribute to contamination of water sources as well as disruption of health services which are precursors of cholera outbreaks. Of the flood affected regions, cholera cases have been reported in Kismayo(146 cases) and Afgoye(24 cases) Merka cases 16 as shown in table 5. Even when Jowhar and Beletweyne reported cases prior to the floods, no new cases have been reported from these districts following the floods.

Table 5. AWD/Cholera cases in different districts

Region	District	Week 22						Cumulative Week 49/17-week 22/18		
		Cases			Deaths			Cases	Deaths	CFR (%)
		<2 yrs	2 -4 yrs	≥ 5 yrs	<2 yrs	2-4yrs	≥ 5 yrs			
Banadir	Darkenley	14	10	14	0	0	0	250	1	0.4
	Daynile	13	14	9	0	0	0	268	4	1.5
	HamarJabja	15	8	6	0	0	0	103	1	1
	Hawlwadag	3	5	6	0	0	0	72	0	0
	Hodan	16	1	22	0	0	0	359	1	0.3
	Karaan	5	0	1	0	0	0	26	0	0
	Madina	11	7	6	1	0	0	271	2	0.7
	Waberi	2	6	5	0	0	0	74	1	1.4
	Shibis	0	0	0	0	0	0	6	0	0
	Shingani	0	0	0	0	0	0	3	0	0
	HamarWeine	2	0	1	0	0	0	29	0	0
	Heliwaa	1	0	0	0	0	0	17	0	0
	Wardigley	0	0	0	0	0	0	66	1	1.5
	Yaqshid	0	0	5	0	0	0	32	0	0
Middle Shabelle ^x	Jowhar	0	0	0	0	0	0	415	2	0.5
Hiran ^x	Beletweyne	0	0	0	0	0	0	522	1	0.2
	BuloBarde	0	0	0	0		0	43	0	0
Lower Shabelle ^x	Afgoye	3	2	19	0	0	0	119	0	0
	Merka	0	4	12	0	0	0	16	0	0
Lower Jubbax ^x	Kismayo	63	31	52	0	0	0	1,609	14	0.9
Total		150	88	158	1	0	0	4,300	28	0.7

^x regions currently affected by floods. Cases include deaths.

Response activities implemented during the week

Coordination and Leadership.

- Coordination meetings were conducted in the flood affected districts. The coordination meetings are coordinated by Federal Ministry and State level MoH in coordination with health cluster partners

Case management

- On job training was conducted for the health workers working in cholera treatment centres in Kismayo, Farjano and Banadir Merka (Ayuub Health Centre, and Afgoye Hospital CTCs)
- Management of cholera cases is being conducted in Banadir hospital CTC, Afgoye Hospital Merka (Ayuub Health Centre, CTCs, Kismayo hospital and Farjano CTU)

Surveillance and Laboratory Investigations

- Routine line listing of cases including data analysis and risk assessment for cholera hotspots
- Investigation and verification of rumours has been conducted in flood affected regions. Alerts received from Baidoa and Elwak were negative for AWD.
- Rapid Response Teams (RRT) have supported state level authorities to verify the rumors in flood affected districts

Water Sanitation, Hygiene and risk communication

- Distribution of hygienic kits in flood affected areas in Lower Jubba, Hiraan and Gedo regions
- Community education is conducted by the C4D department using cholera preventive messages
- Chlorination of water sources in cholera affected regions was conducted by WASH cluster
- WHO has prepositioned 44.1 tons of medical supplies to flood affected regions

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