



BULLETIN HIGHLIGHTS

- From **1-15 May 2011**, **933 weapon related- injuries** were reported by three major hospitals in Mogadishu, 398 cases or **43% were children** under the age of five. During April 2011, only 3.5% were children younger than five among the reported casualties.
- From **14-15 May 2011**, WHO in collaboration with Puntland and Galmudug ministries of health trained more than **40 health workers** on AWD/cholera prevention, case detection and management. The health workers are from **9 districts of Galgaduud and Mudug** and are now fully skilled to assist an estimated population of 780 000 people¹.

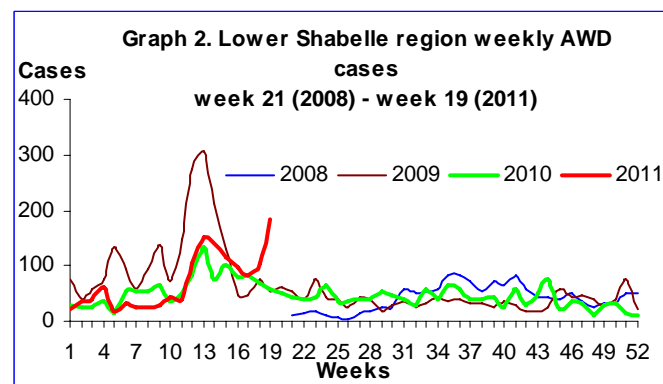
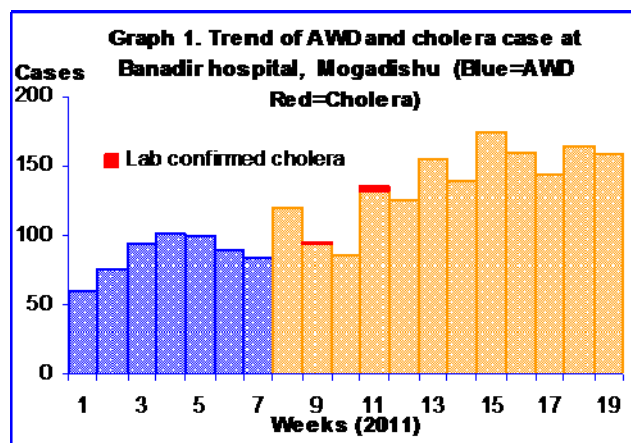
Update on major public health concerns:

• Trends of acute watery diarrhoea (AWD)/cholera

The cholera transmission season is ongoing. Some areas in most regions of Somalia have received sporadic rainfall. Due to water shortages, WHO observes that there is a likelihood of a risk in transmission of waterborne diseases as communities tend to utilize water from contaminated sources. Investigation of a number of rumors have confirmed the existence of AWD cases though not severe. Since week 1², and following a confirmed cholera outbreak in Mogadishu, 2268 AWD/cholera cases including 1782 (79%) cases under the age of five with 77 related deaths have been reported from Banadir Hospital in **Mogadishu** (see graph 1). Children under the age of two bear the greatest burden of AWD accounting for 59% of all reported cases. Based on data collected, women and girls account for 46% of all AWD reported cases at the hospital.

In Baidoa (**Bay region**), eight out of 10 stool samples collected confirmation **tested positive** for *Vibrio cholera* serotype '*Inaba*' after laboratory confirmation in Nairobi. The number of AWD cases reported in Lower Shabelle region tends to increase in week 19³ (see graph 2).

WHO and partners are closely monitoring trends of communicable diseases, especially AWD in light of the end of the dry season. Rains have been observed in some parts of the country, alerting for risks of communicable disease outbreaks, including AWD.



¹UNDP Somalia District Population Estimates 2005 - 2010

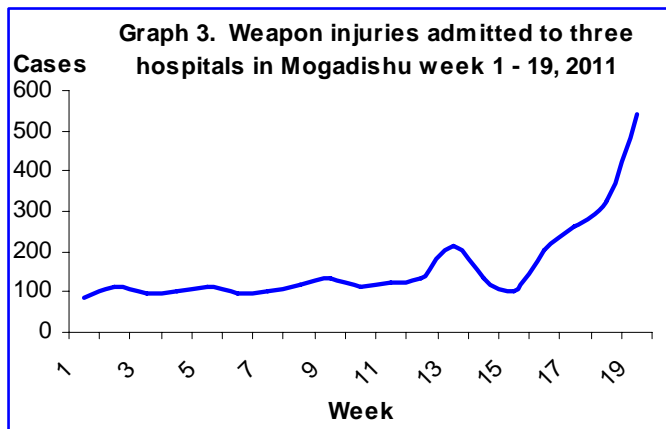
²Week 1: 3-9 January 2011

³Week 19: 15-21 May 2011

Conflict

From 1-15 May 2011, of **933 weapons-related injuries** reported by three major hospitals in Mogadishu, 398 cases were children under the age of five. Four died from their injuries.

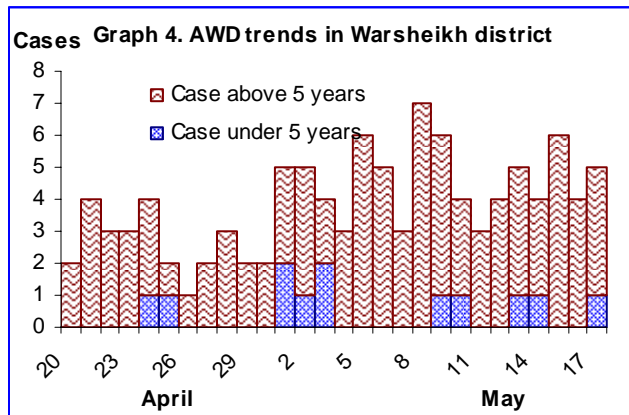
From **3 January - 15 May 2011**, **3237 weapons-related injuries** including 613 children under the age of five with 51 related deaths, four of whom are under the age of five have been reported from these hospitals. The exact number of deaths on site are unknown (see graph 3).



Health Events in Somalia

Epidemiological surveillance during week 19

- In **Lower and Middle Juba regions**, 18 health facilities reported 1641 consultations including 872 (53%) children under five years. Women and girls accounted for 1011 (62%) of all consultations. Influenza like illness (ILI) accounted for 419 consultations of which 255 (61%) were children under the age of five. This is a 61% increase in reported cases. Malaria accounted for 634 cases including 289 (46%) children below the age of five – a 52% increase in the number reported cases. AWD accounted for 464 cases including 286 (62%) children less than five years - a 62% increase in cases. Overall, there was a 61% increase in number of consultations with Jilib and Kismayo accounting for 51% of all the consultations.
- In **Lower Shabelle region**, 51 health facilities reported a total of 7440 consultations, of whom 3413 (46%) are children younger than five with 12 deaths under the age of five. Women and girls accounted for 4054 (54%) of the consultations. About 1132 consultations were reported for influenza-like illness (ILI), 608 (54%) children under five years. Severe acute respiratory infections (SARI) accounted for 266 consultations of which 172 (65%) were children under five years. Malaria accounted for 161 cases including 66 (41%) children under five years. Eighty-seven (54%) were confirmed by rapid diagnostic test or microscopy. AWD accounted for 183 consultations including 115 (63%) children under five years – a 74% increase as compared to week 18. Merka district accounted for 64% of all reported AWD cases. During the same period, 143 suspected measles cases were reported from the region. Around 44 suspected whooping cough cases were reported. The **Merka hospital cholera treatment centre (CTC)**, reported 20 AWD admissions including 15 (75%) children under five. Women and girls accounted for 55% of the cases. This signifies compares to week 18.
- Warsheikh MCH in **Middle Shabelle region** reported 36 AWD including four children under five years and 10 deaths of whom three were under five years (see graph 4).



- Banadir Hospital in **Mogadishu** reported 159 cases of AWD including 126 (79%) children under 5 years, with seven related deaths under five years. Of these cases 45% were women and girls.
- The Habeeb hospital cholera treatment centre in Heliwa district, **Mogadishu** reported 17 AWD admissions of which eight are under five years. Of these cases, nine (53%) were women and girls.
- The SOS Hospital in Huruwaa district, **Mogadishu**, reported 68 AWD cases including 56 (82%) children under five years with one related death under five years. Of the cases, nine (46%) were women and girls. This is a 51% increase compared to week 18.
- Baidoa Hospital in **Bay region** reported 79 AWD cases including 55 (70%) children under five years with three related deaths above five years (see graph 5 on daily trends). Women and girls accounted for 43% of all cases. Of 10 stool samples collected from patients with AWD in Baidoa, eight (80%) tested positive for *Vibrio cholera* serotype '*Inaba*'.
- Health partner SRCS conducted mobile health clinics in Berdale town and Guunsi villages in **Bay region** following reports of 30 AWD cases including 15 (17%) children under five years and three deaths (two were under 5 years). Monitoring of AWD trends and active case-finding is ongoing in the affected area.
- The Haradere District Hospital (**Mudug region**) supported by CISP reported 85 AWD cases including 32 (38%) children under five years with three related deaths (one under five years). This compares to week 18. WHO has provided a cholera kit with supplementary medicines to treat patients.
- In Huddur, **Bakool region** there are reports of an unclassified disease that has affected over 90 people with 53 deaths. Signs and symptoms of the cases include fever for 1 to 2 months, a high pulse rate, occasionally sore throat, progressive swelling of joints and limbs including pains. It is observed that patients either recover slowly or die. Retrospective data collected indicates that the case fatality rate is a major concern.

WHO's response

WHO and partners continue to monitor health events and to respond to the ongoing situation in South Central Somalia, through the following activities:

- From **14-15 May 2011**, WHO in collaboration with Puntland and Galmudug ministries of health (MoH) has trained more than 40 health workers from the regions of **Mudug** and **Galgaduud** on AWD/ cholera prevention, case detection and management. The training took place in Galkayo and is part of preparedness activities for outbreak response.
- WHO is sending selected medical supplies to Warsheikh MCH in **Middle Shabelle region** to facilitate AWD response activities through health partner SHARDO following an increased number of reported AWD cases from the district.
- WHO is sending an additional diarrhoeal disease kit to **Baidoa Hospital** in response to an increased number of reported cholera cases at the hospital. The kit treats 100 severe adult cholera cases.
- WHO dispatched additional supplies, including antibiotic syrups and tablets, to **Huddur** (Bakool region). The medicines will be used to run mobile clinics in affected villages for a period of one month.
- WHO in collaboration with MoH is undertaking investigations following reports of an unclassified disease in the port town of **Berbera**. Victims have mainly fever symptoms, and some cases have died.



WHO staff facilitates a group session