



# Somalia Emergency Weekly Health Update

## HIGHLIGHTS

Reporting January 2013 - Epidemiological weeks 1-3

- DENGUE FEVER 23 cases of Dengue fever reported from Mogadishu
- MALARIA 410 cases detected in Bossaso outbreak
- ACUTE FLACCID PARALYSIS Three cases reported in Berbera and Wardighley districts

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### 23 cases of Dengue fever reported from Mogadishu

Mogadishu – Twenty three (61%) of 28 serum samples collected from patients at health facilities in Mogadishu have tested positive for dengue fever. In recent weeks, dengue infections have also been reported among AMISOM troops in Mogadishu. Blood samples that were collected in Mogadishu in the previous years had a 30-38% dengue positivity rate, calling for interventions related to dengue control in Mogadishu and other parts of Somalia. Follow-up of past patients that have since been traced, indicate that they had improved. Results of an entomological survey conducted in Mogadishu at the end of 2011 showed that 19% of the adult mosquito and over 18% of the larvae populations collected were *Aedes aegypti*, the carrier for dengue virus, as well as Chikungunya and yellow fever viruses.

### Ongoing response to malaria outbreak in Bossaso

Response to the outbreak of malaria in Bossaso (Puntland) is ongoing. Since the beginning of the outbreak in December 2012, 410 cases have been reported including 61 (15%) children under the age of five. Mixed *Plasmodium falciparum* and *P. vivax* infections accounted for 67% of the cases, while the remaining 33% had single infection with *P. falciparum*. No single infection case with *P. vivax* alone has been detected. Health authorities and partners continue to respond and undertake preventive measures.

### Alert for Acute Flaccid Paralysis (AFP) cases reported in two districts

In the reporting weeks, two cases of AFP were reported from Berbera district and another in Wardighley district. Stool samples were collected by and referred for further investigation.

Meanwhile, vaccination campaigns continue in newly accessible areas of Southern and Central Somalia. From 14 to 16 January 2013, Health Authorities, UNICEF and WHO conducted a second round of polio vaccination in urban areas of Kismayo district in Lower Jubba region. Over 17 000 children under the age of five were reached. However, 30% of the children in rural areas of Kismayo still remain inaccessible.

## EPIDEMIOLOGICAL SURVEILLANCE (EPI WEEK 1 to 3, 30 Dec 2012 – 20 Jan 2013)

During the reporting weeks, more than 99 000 health facility visits were reported, including over 45% children under the age of five. Central Somalia accounted for over 54% of the reported visits, Southern Somalia 19% and Somaliland and Puntland accounted for 14% and 13% respectively. Confirmed cases of malaria were the leading cause of disease.

Weekly aggregate data from sentinel sites across Somalia						
	Week 1 (31 Dec- 6 Jan 2013)		Week 2 (7 - 13 Jan 2013)		Week 3 (14 - 20 Jan 2013)	
Health event	Total cases	*Proportional morbidity	Total cases	*Proportional morbidity	Total cases	*Proportional morbidity
Susp. Cholera	136	0.5	139	0.4	89	0.3
Susp. Shigellosis	59	0.2	69	0.2	72	0.2
Susp. Measles	115	0.4	122	0.4	100	0.3
Acute Flaccid Paralysis	0	0	1	0.003	1	0.003
Susp. Diphtheria	0	0	0	0	0	0
Susp. Whooping Cough	72	0.2	35	0.1	62	0.2
Confirmed Malaria	680	2.3	681	2	646	1.8
Neonatal Tetanus	0	0	3	0.01	6	0.02
All other consultations	28782		33584		34363	
<b>Total consultations</b>	<b>29867</b>		<b>34634</b>		<b>35339</b>	

\*Proportional Morbidity is the number of cases for individual health event as a proportion of all consultations for the reporting week

### TIMELY REPORTING

In weeks 1 and 2, all the 196 facilities currently reporting to the Communicable disease Surveillance and Response (CSR) network reported timely. During week 3, in Somaliland, 98% (53 out of 54), in Puntland 98% (44 out of 45) and, 98% (60 out of 61) in Central Somalia reported on time. All 36 facilities (100%) in Southern Somalia reported timely.

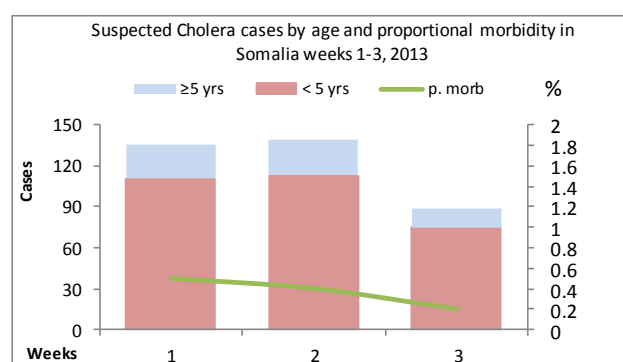
### SUSPECTED CHOLERA

**Central Somalia** accounted for 98% of the suspected cholera cases reported from weeks 1-3, i.e. 358 out of 366 cases reported. Majority of the cases were from Banadir region.

Poor adherence to the recommended case definition for suspected cholera has been observed. On-the-job training during weekly and monthly visits to the sentinel sites is planned to improve case detection and data quality.

In week 1-3, seven rumors of outbreak of suspected cholera were reported in Lower Jubba region. WHO and partners collected stool samples of the cases from affected villages of Jedecaley and Kulbio for verification. All samples tested negative for any enteric bacterial infection including shigella and salmonella. Following response activities by partners the situation is under control and stable. The Lower Jubba region remains a high risk area for cholera and other water-borne disease outbreaks and access is still a challenge.

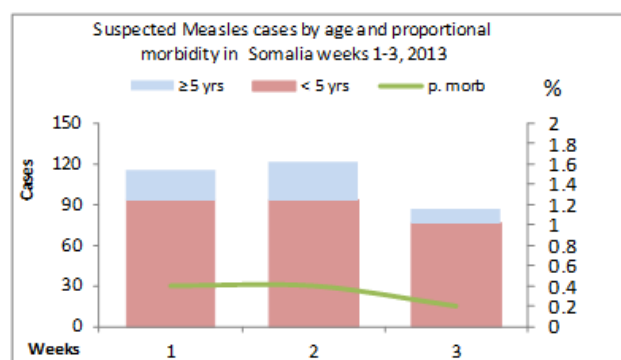
In Galgaduud region, the cholera situation has remained stable and partners on the ground have ongoing preventive and control activities. Adequate water and sanitation supplies have been provided by UNICEF and case management supplies were provided by WHO. Adequate stocks are available in the event of a potential outbreak.



## SUSPECTED MEASLES

With low vaccination coverage and poor access to vulnerable populations across Somalia, especially in Southern and Central Somalia, suspected measles remains a challenge. Central zone reported 64% of the 366 suspected measles cases: Somaliland 22%; Southern 13% and Puntland 1%.

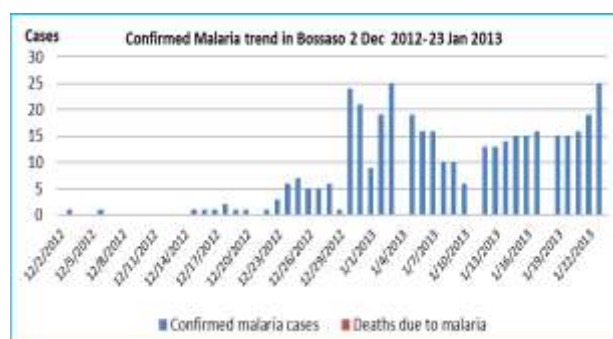
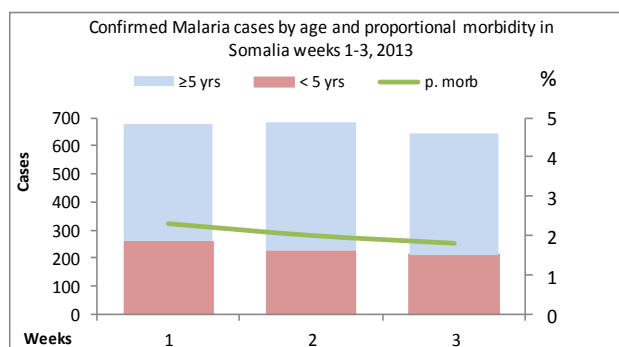
Suspected measles cases continue to be reported across Somalia. Four alerts were reported from Lower Jubba region and Somaliland. Response activities are ongoing in collaboration with the health authorities.



## CONFIRMED MALARIA

Confirmed malaria was the leading cause of morbidity for the 3 week reporting period, with over 2000 cases reported from sentinel sites across Somalia. Central and Southern zones reported 63% and 33% of all cases respectively.

Following the malaria outbreak in Bossaso declared by the health authorities on 29 December 2012, a joint team, composed by Health Authorities, UNICEF and WHO, has initiated response activities. A total of 410 confirmed malaria cases, including 61 children under the age of five, have been recorded in the past seven weeks (see Confirmed Malaria Trend graph). Provision of supplies include rapid diagnostic testing kits and Artemisinin Combination Therapies (ACTs) to health facilities, training of both public and private health facility workers, distribution of malaria treatment guidelines and long-lasting insecticide treated nets. Outreach initiatives including social mobilization will continue.



## OTHER HEALTH EVENTS

All zones except Puntland continue to report cases of **suspected shigellosis**. Although this have been decreasing gradually, adherence to the recommended case definition for shigellosis of visible blood remains a challenge. On-the-job trainings are being conducted to improve this. Central Somalia reported 145 (65%) of the 223 cases, while Southern Somalia and Somaliland reported 69 (31%) and 9 (4%) cases respectively.

An alert on 25 cases of **suspected neonatal tetanus** had been reported from one zone. Subsequent verifications proved that the reported cases were a data entry error.

Alerts on **suspected diphtheria** have been reported from Galinsoor district in Galgaduud region. Sample collection for further investigation is currently being initiated.

**Whooping cough** control continues to remain a challenge.

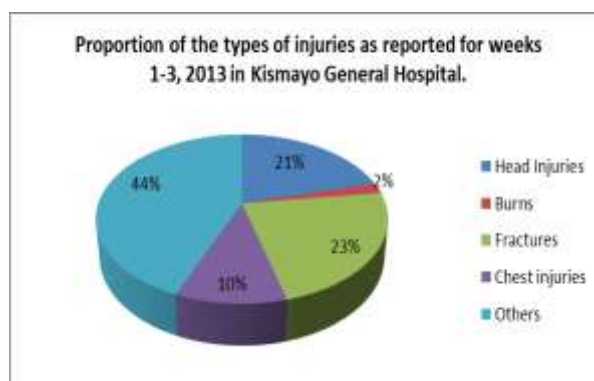
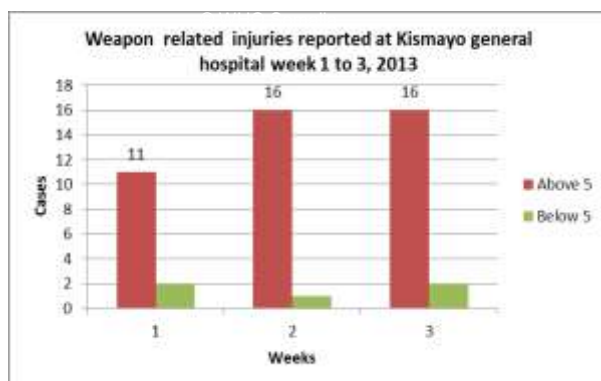
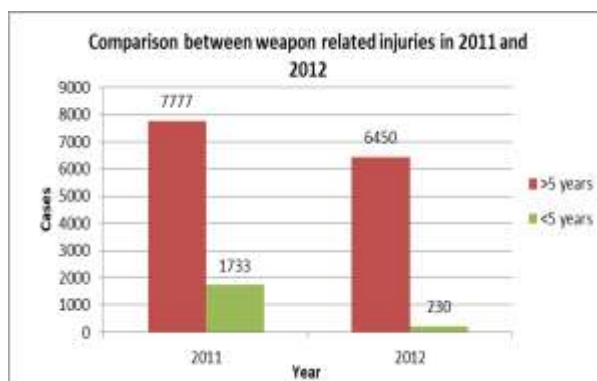
## CONFLICT- RELATED INJURIES

(Source: Four major hospitals in Mogadishu and Kismayo General Hospital)

The year 2012 saw a reduction in the number of casualties reported from the four hospitals in Mogadishu as compared to 2011. A 30% decrease in the total number of reported injuries was observed (see comparison graph).

From **31 December 2012 to 20th January 2013**, 296 casualties from weapon-related injuries were treated in four hospitals in Mogadishu. One death above the age of five was reported.

In the same period, 48 casualties from weapon-related injuries were treated at Kismayo General Hospital, including five cases under the age of five. Three deaths above the age of five were registered (see graph and pie chart below).



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