

## Current major event

### Cholera in Somalia

The cholera outbreak in Somalia that started in November 2016 appears to be coming to an end. The downward trend of incidence of the disease has continued in August reporting the lowest number of cases so far in 2017.

### Editorial note

Cholera cases and deaths has declined significantly in the month of August 2017. A total of 917 suspected cholera cases and no deaths were reported in the month of August 2017 across the country, compared to 6,383 suspected cholera cases including 20 deaths (CFR 0.31) that were reported in July 2017.

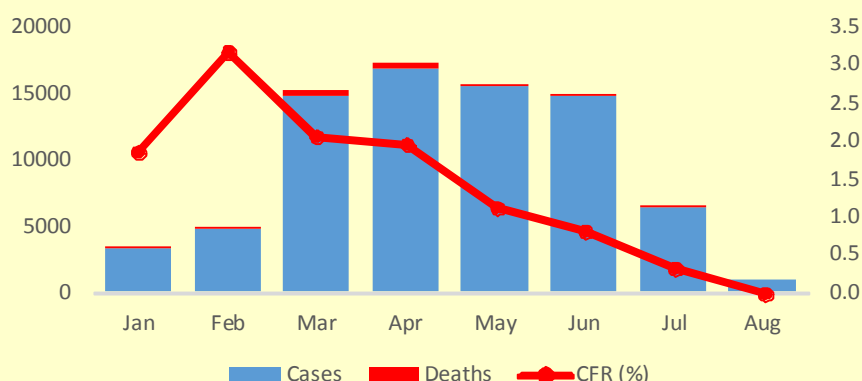
Somali has been in a state of complex emergency for over two decades. During this period, government institutions, civil infrastructure, and health facilities have largely been destroyed. Further, some parts of the country are beyond reach of the government and humanitarian agencies due to insecurity. Outbreak of cholera followed severe drought that aggravate the humanitarian crisis in many parts of the country.

The Ministry of Health together with partners have implemented outbreak response measures. Among the key measures that have been undertaken include improved coordination among actors involved in the outbreak response including relevant sectors of the Ministry of Health and other ministries; UN Agencies; international and local Non-governmental organizations as well as using oral cholera vaccines (OCVs).

Surveillance has been enhanced with the reactivation of the electronic early warning surveillance systems. The system has expanded coverage of the surveillance system to most of the affected areas and has also made it possible to enhance surveillance, to monitor the outbreak more effectively, and to generate reliable epidemiological data for targeted and well targeted interventions.

Access to care has been expanded through establishment of cholera treatment centers in the affected areas; health workers have been trained on case

**Suspected cases of cholera and case fatality rate in Somalia in 2017**



management of cholera cases; community interventions to increase awareness about the disease and to improve hygiene conditions have been implemented; laboratory support of case investigation has been enhanced; training of health workers on case management of cholera; provision drugs, Intravenous fluids and essential medical supplies. Other preventive measures have included mass campaigns with oral cholera vaccine.

Epidemiological data suggests that these measures specially use of OCVs have been largely successful in containing the outbreak as the incidence of the disease continues to decline. Several regions that were previously heavily affected have continued to report few or no cases of cholera at all. However some regions still require close monitoring as they continue to report significant numbers of cases of cholera despite the declining trend. These include Banadir, Togdher, Lower Juba, Awdal and M.Jeex regions that have each reported over 50 cases of cholera in the month of August.

Overall, going forward, long term sustainable effective prevention and control of recurrent cholera outbreaks in Somalia will require major investment in water and sanitation infrastructure. However, this will remain difficult to achieve as long the ongoing crisis in the country persists. In the interim period, surveillance needs to be enhanced, specially in the affected areas to make sure that resurgence of cases are detected early and timely response is mounted.

## Update on outbreaks in the Eastern Mediterranean Region

**MERS-CoV** in Saudi Arabia; Cholera in Somalia; Cholera in Yemen; Chikungunya in Pakistan.

## Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

### Avian Influenza: 2006-2017

Egypt (A/H5N1) [359 (122), 34%]  
Egypt (A/H9N2) [3 (0)]

### Chikungunya: 2016-2017

Pakistan [7,421 (0)]

### MERS-CoV: 2012-2017

Saudi Arabia [1,716 (665), 38.8%]

### Cholera: 2016-2017

Somalia [77,133 (1,159), 1.5%]  
Yemen [686,783 (2,090), 0.3%]

### Lassa Fever: 2017

Nigeria [851 (118), 13.9%]

### Avian Influenza A (H7N9): 2013-2017

China [1,557 (605), 38.9%]

### Dengue fever: 2017

Côte d'Ivoire [1231 (2), 0.2%]

### Wild poliovirus: 2017

Pakistan [4 (0)]  
Afghanistan [6 (0)]

### Zika Virus Infection: 2015-2017

84 countries and territories have reported transmission so far.