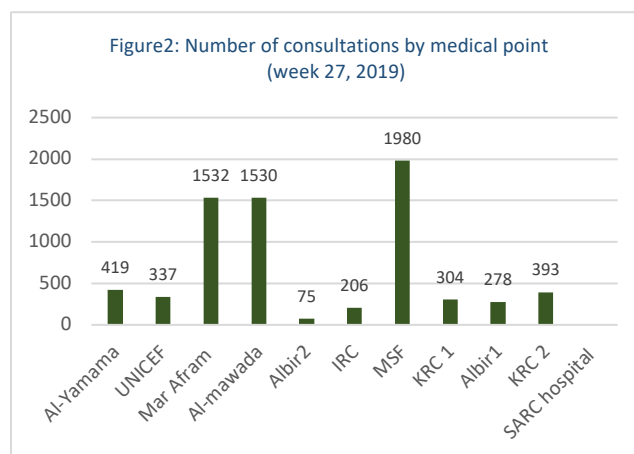
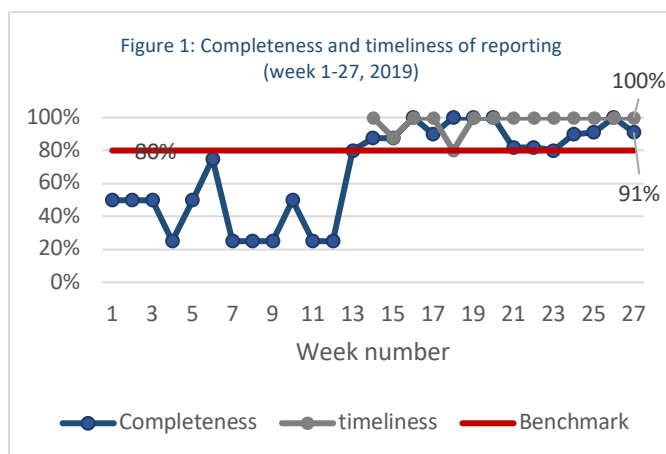


Highlights

- During epidemiological week 27 of 2019, 10 out of 11 reporting sites in Al-Hol camp provided diseases surveillance data through the early warning alert and response system (EWARS), with 100% timeliness among those sites providing data.
- A total of 7036 consultations were recorded in eleven health facilities in the camp in week 27.
- The leading causes of morbidity among all age groups remained acute diarrhea (34.4%) and influenza-like illnesses (33.5%).
- There was a decrease in the number of acute diarrhea cases by 10% to previous week. The number of reported cases during this week was 742.
- WHO continue to conduct water quality monitoring activities, 30 water samples were tested in the camp during this week. Among them, one sample from ice block factory found contaminated and the investigation to be conducted in July.

Performance Indicators

- 10 out of 11 active health facilities in Al-Hol camp submitted their data through EWARS on time with 100% reporting completeness among the 10 that submitted data (Figure1).



Morbidity

1. Proportional Morbidity

- A total of 7036 consultations were recorded from 10 medical points in the camp in week 27 (Figure 2) . The number of consultations increased by 11% compared to the previous week (6316) . Among them, 2154 cases were EWARS notifiable health conditions.
- Of the 2154 total reported cases, 57.6% (1240) were female, and 48.5% (1044) were children under 5 years old.
- Among all age groups, acute diarrhea (AD) (34.4%), and influenza-like illnesses (ILI) (33.5%) remains the leading cases of morbidity in the camp.
- Among children under 5 years of age, AD accounted for 39% of the cases, and ILI accounted for 29% during this reporting period (Figure 3).
- The proportional morbidity of both AD and ILI have decreased for two weeks (Figure4).

Figure 3: Proportional morbidity by age group in week 27, 2019

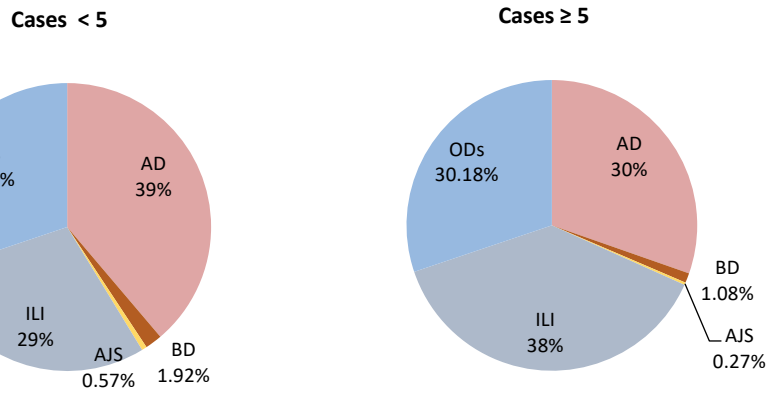
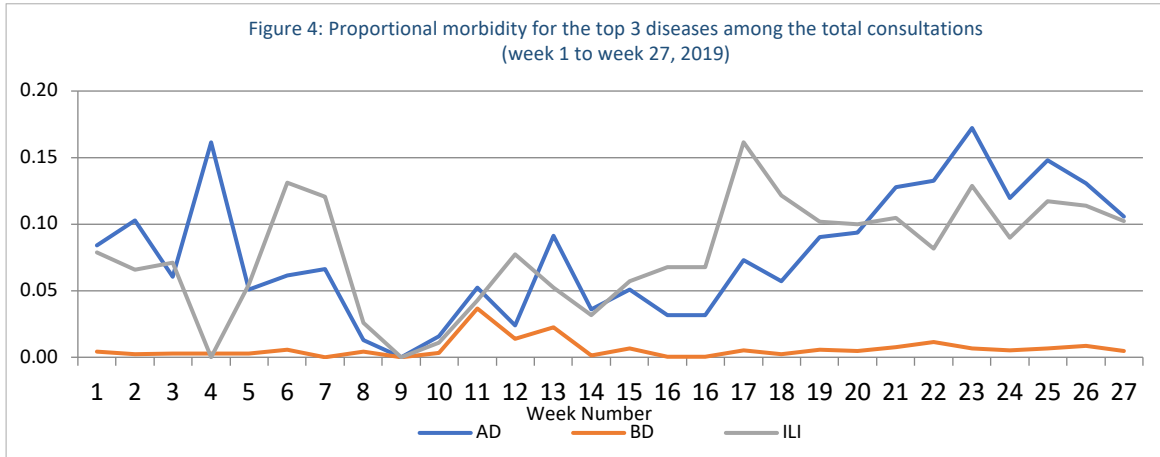


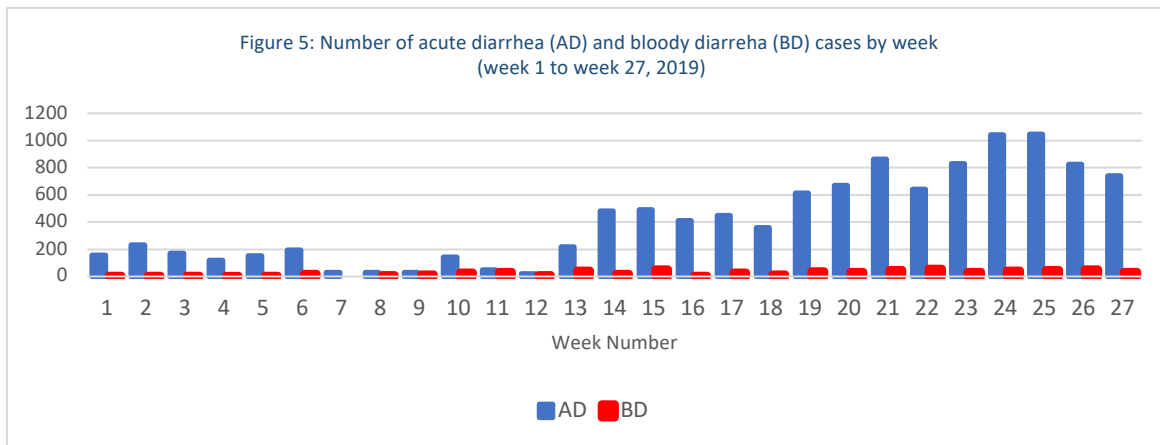
Figure 4: Proportional morbidity for the top 3 diseases among the total consultations (week 1 to week 27, 2019)



2. Waterborne Diseases

- There was a decrease in the number of acute diarrhea cases by 10% compared to the previous week. The number of reported cases during this week was 742 (Figure 5). Children under 5 years of age accounting for 54.6% of the reported cases. One of the risk factors of AD is the increased temperature during the summer season which enable the infectious agent (bacterial/virus) that causes acute diarrhea to multiply a lot faster.
- There was zero reported cases of acute watery diarrhea (AWD) in week 27.

Figure 5: Number of acute diarrhea (AD) and bloody diarrhea (BD) cases by week (week 1 to week 27, 2019)



3. Vaccine Preventable Diseases

- No suspected measles was reported during this week.
- There was one reported case of acute flaccid paralysis reported in week 27.

4. Other Diseases

- 650 cases were reported as “other diseases” through EWARS. The health conditions with the highest incidents were lice (609 cases), scabies (17 cases), and chickenpox (12 cases).

Public Health Response Actions

Acute diarrhea cases:

WHO continues to provide leadership and support to the health authorities and partners in response to the increase of acute diarrhea cases in the camp, including surveillance, case management, water sanitation, hygiene (WASH) and risk-communication. WHO conducted water quality monitoring measuring ATP concentration level in the camp and tested 30 water samples during this reporting period which includes eight samples from water trucks, 11 samples from water tanks, 10 samples from jerry cans, one sample from ice blocks produced in Jassem Al-Baier ice factory in Hasakeh governorate. Among them, only one ice block was found contaminated. The further investigation of ice blocks and the factory is to be conducted this month.

Lice and soil-transmitted worms:

- To respond to the increase of lice cases, WHO provided the medical points in the camp with anti-lice shampoo for the treatment of 2500 lice cases.
- The prevalence of soil-transmitted helminthiases in Syria is moderate which ranges between 20-49 % among school age children between 6 to 14 years old.¹ WHO distributed 7500 Mebendazole tablets to the camp to the NGO for the treatment of soil-transmitted helminthiases.

¹ Based on the national survey conducted in 2009 by Ministry of Education and the school health directorate, the prevalence of soil-transmitted helminthiases was 39%.

Annex 1: Case Distribution by Age Group

Health Condition	Age Group	Total week 26	Age Group	Total week 27
Acute diarrhea (AD)	<5	458	<5	405
	≥5	368		337
Bloody diarrhea (BD)	<5	27	<5	20
	≥5	28		12
Acute watery diarrhea (AWD)	<5	0	<5	0
	≥5	0		0
Acute jaundice syndrome (AJS)	<5	1	<5	6
	≥5	3		3
Influenza like illness (ILI)	<5	352	<5	298
	≥5	367		423
Acute flaccid paralysis (AFP)	<5	0	<5	0
	≥5	0		0
Suspected measles (SM)	<5	1	<5	0
	≥5	0		0
Suspected meningitis (SMN)	<5	0	<5	0
	≥5	0		0
Severe acute respiratory infection (SARI)	<5	2	<5	0
	≥5	1		0
Others	<5	42	<5	315
	≥5	25		335
Total sum of <5	<5	883		759
Total sum of ≥5	≥5	792		791
Total		1 675		1 550

Annex 2: Map of Al-Hol camp

