

Current major events

Cholera Preparedness geared up in Iraq

In view of the current epidemic season for cholera, the overall public health preparedness measures for cholera have been strengthened in Iraq. A joint team of WHO-EMRO and WHO-HQs are set to conduct an internal review of cholera epidemic preparedness plan of Iraq with participation from staff of the WHO Country Office in Iraq. The review will include identification of gaps in current preparedness measures as well as providing policy guidance on appropriate strategies for cholera control in a severely compromised security situations inside Iraq. The institutional lessons learnt by WHO last year as part of its emergency-response operations for cholera in Iraq has been translated into policy actions while designing this strategy.

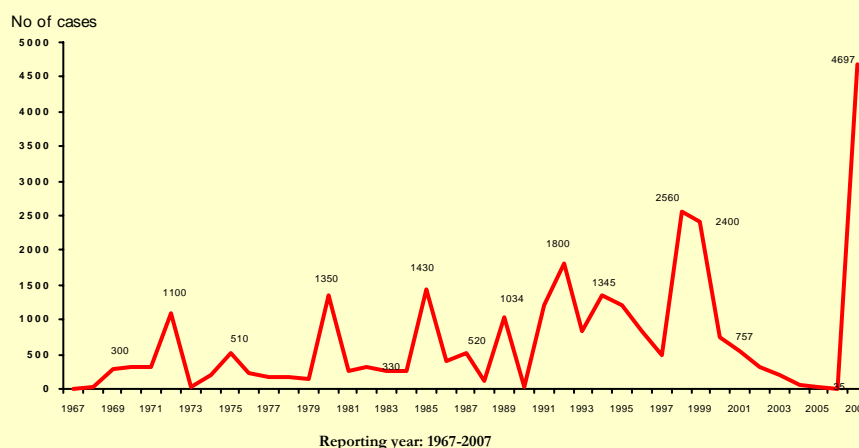
Iraq faced a major outbreak of cholera last year with 4,697 laboratory-confirmed cases including 24 deaths (CFR:0.51%).

Editorial note

Cholera remains a major public health threat in Iraq. Cholera reappeared in Iraq in 1967 after a gap of almost 50 years as part of the 7th pandemic spread. Since the end of the 7th pandemic, occasional outbreaks of cholera continued in the country with high incidence of cases reported in 1991, 1992, 1998, 1999 and in 2007 (See the secular trend of the disease). In almost all these major outbreaks, except in 2007, a third of the total number of cholera cases were reported from Baghdad City alone. Both *Vibrio cholerae* El-Tor 01 serotype Ogawa and Inaba were responsible for causing these epidemics since the historical time.

What has also been observed during these epidemics is that, the number of clinical cases typically peaked during the autumn months, specially in September and October. The slightly earlier peak of the 2007 epidemic in Northern Iraq (August) was perhaps related to shortage of safe drinking water supply in addition to lowered standards of hygiene and

Cases of cholera reported from Iraq by year, 1967-2007



Strategies drawn from lessons learned during the cholera outbreak in 2007

- Development and operationalization of health sector preparedness plan for cholera ;
- Promotion of water treatment at point-of-use and improved water storage practices at household level;
- Intensification of personal hygiene at household level (specially hand-washing with soap)
- Core competency building of HCWs on epidemic control and case management ;
- Using sentinel event reporting system in areas of security concerns;
- Active stockpiling of essential medical supplies at health care facilities.

continuous contamination of public water sources. The biggest impediment to cholera epidemic response in 2007 was poor security situation in most parts of Iraq resulting in belated response and limited access of health care workers (HCWs) to at-risk populations.

The current security situation inside Iraq remains unpredictable and the risk of a recurrent cholera outbreak looms large since the health systems in the country is still recovering from the long protracted conflict and there remains an acute shortage of water inside the country coupled with power outages. Parts of the country is undergoing drought this year resulting in high demand on the available water resources. Given the prevailing situations in Iraq, the greatest challenge would be to avoid a cholera outbreak this year focusing on interventions that can be feasible and practical within the circumstances prevailing in the country.

Update on outbreaks

in the Eastern Mediterranean Region

Dengue: in Saudi Arabia. No update
Cholera; in Sudan (Gedaref). **Hepatitis –E:** in Red sea state of Sudan. No update

Current public health events of international concern

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

Avian influenza

Egypt	[50 (22), 44%]
Indonesia	[135 (110), 81.4%]

Cholera

Sudan (Gedaref)	[45 (0), 0%]
Sudan (South)	[5953 (50), 0.83%]*
Uganda	[490 (31), 6.3%]

Dengue fever

Saudi Arabia	[533 (?), ?%]
Yemen	[1024 (?), ?%]

Lassa fever

Liberia	[44 (5), 11.4%]
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Hepatitis E

Uganda	[5339 (90), 1.7%]
Sudan	[224(23), 10.2%]*

Yellow fever

Cote D'Ivoire	[6(0), 0%]
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(* = Unofficial figures)
CFR = Case-Fatality Rate