

# **Weekly Epidemiological Monitor**

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## **Current major event**

### Cholera in Somalia: outbreak contained but sporadic cases continue

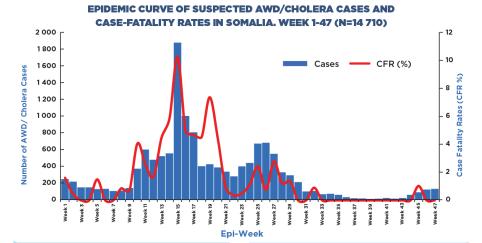
The cholera outbreak in Somalia which was reported at the beginning of the year is gradually tapering off despite slight increase in number of reported cases during epidemiological week from 45 to 47. As of 30 November 2016, a total of 14, 710 suspected cases including 497 related deaths (CFR: 3.51%) were reported from this outbreak so far.

#### **Editorial note**

Somalia has been experiencing a protracted, complex emergency for the last 25 years due to recurrent conflict, drought, floods, and food insecurity. The deteriorating humanitarian crisis in Somalia has displaced millions of civilians with a majority being vulnerable to communicable diseases.

Cholera is the most common disease outbreak reported in Somalia in the past two decades. Somalia has experienced multiple large cholera outbreaks during this period which were associated with significant mortality. Over 282,000 cases with 7,415 deaths (CFR 2.62%) were recorded in the country in last twenty years (1994-2016). The worst cholera epidemic in Somalia was recorded in 2011 with over 70,000 cases and 1130 deaths (Please see the box) while an average 6,000 cholera cases were reported annually in the subsequent years. These cholera outbreaks have disproportionally affected women and children and continue to be a recurrent event in the country owing to recurring floods in the country, presence of displaced camps and poor environmental sanitary conditions. The most recent El Nino climate phenomenon had exacerbated the risk of cholera in the country as the rainfall increased in Southern regions and drought in the Northern regions, therefore, setting conditions for cholera outbreaks to rapidly spread.

Recently the ministry of health of Somalia, in collaboration with WHO, has conducted a risk assessment with a view to introducing oral cholera (OCVs) for eliminating the risk of recurring outbreaks. The risk assessment has



#### Major cholera outbreaks reported from Somalia, 2007-2016

Year	Cases	Deaths	CFR (%)
2007	41643	1182	2.8
2011	77636	1130	1.4
2012	22576	200	0.8
2016*	7730	82	1

#### \*Ongoing

identifies a number of hot spots in the country with a history of recurring outbreaks in the last few years. Many factor have contributed to increased risk of cholera outbreaks in these hotspots including poor living condition, overcrowding, population movement, lack of access to safe water and sanitation, limited access to healthcare services and environmental and climate factors..

The decision by the Ministry of Health to use OCV in the above cholera hotspot sites is a welcome move. Owing to precarious environmental sanitary conditions prevailing in those hot spots, it is quite apparent that the traditional and proven public health interventions could not prevent the recurrence of cholera outbreaks in the country. As such, the use of OCV could complement and provide protection at risk populations against cholera. Over 1 million doses of OCV would be used to organize a mass immunization campaign covering close to half a million at risk people living in this hot spots. It is expected that the use of OCV would eliminate the risk of cholera as a recurring public health problem in Somalia.

## Update on outbreaks

MERS-CoV in Saudi Arabia and Oman; Cholera in Somalia: Cholera in Yemen

## Current public health events of international concern

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

Avian Influenza : 2006-2016	
Egypt (A/H5N1)	[356 (121), 33.9%]
Egypt (A/H9N2)	[3 (0)
MERS-CoV: 2012-2016	

Saudi Arabia [1414 (601), 42.5%] Oman [1(0),]Cholera: 2016

Somalia [14710 (497), 3.5%] Yemen [7730 (82), 1%]

**Yellow fever: 2015-2016** Angola [4347 (377), 8.7% DRC [2987 (16), 0.5%

Lassa fever: 2015-2016 Nigeria [273(149), 54.5%)

Benin [54(28),51.8% Avian Influenza A (H7N9): 2013-2016

[775 (307),36%] China

Avian Influenza A (H5N6): 2016

[4(0)]Wild poliovirus: 2014-2016

Pakistan

Zika Virus Infection: 2007-2016

73 countries and territories have reported transmission

[376(0)]

[66(0)]