Cholera in Yemen: situation update

The Ministry of Public Health and Population of Yemen has reported 148,952 suspected cases of cholera and 43 associated deaths (CFR 0.03%) during this year, which is now showing a downward trend of the reported cases. However, with COVID-19 spreading throughout the country, Yemen is facing an emergency within an emergency, and the situation can escalate at any time.

Editorial note

The ongoing cholera outbreak in Yemen has started in mid-2016, which was considered one of the worst cholera outbreaks in modern history. Currently, that situation has stabilized, where a steady decline of cases has been observed since week 8 of this year. From 1 January 2018 till 21 June 2020, 1,381,374 cases were reported, including 1,573 deaths (CFR 0.11%). A total of 296 districts from 22 governorates have reported cases since January 2020.

Yemen has faced several humanitarian crises during the last decade that resulted in a collapse of health infrastructure, the loss of routine public health services and shortages in trained staff and medicines. Ongoing conflicts have also resulted in millions of people requiring urgent humanitarian assistance.

With COVID-19 spreading rapidly, primary health services were disturbed as well as Yemen’s health-seeking behavior due to fear of stigma. Restricted access to affected populations in many parts of the country due to insecurity and the ongoing conflict may also lead to hidden outbreaks due to undetected transmission of cholera and other diseases.

This year, 148,952 cases and 43 associated death were reported (CFR 0.03%), mostly from Al Hudaydah (23,813), Sana’a (22,095), and Taizz (18,431), with 50% of the cases being female and 24% of reported cases being children less than 5 years of age. Most of the deaths occurred for children less than 5 years of age (35%) and people older than 60 (39%).

So far, 1,047 samples have been tested at the central public health laboratories since January 2020, out of which 87 have been confirmed as V. cholerae positive by culture. However, most of the samples that tested positive were from Taizz (57), followed by Al Hudaydah (8).

The ministry, in collaboration with UN agencies and other partners, continued to scale up response measures aimed at containing the outbreak. National, governate and district rapid response teams are continuously monitoring and investigating outbreak alerts with more targeted interventions carried out in some of the most affected districts. The central public health laboratories have been expanded and enhanced to continue further supporting the diagnosis. In addition to that, several cholera case management trainings were given to health care workers from the diarrheal management treatment centres. Cholera kits and medical supplies were also distributed by WHO to the affected governorates.

WHO continues to monitor the situation through the third-party monitoring of independent companies that conduct visits to health facilities to ensure the implementation of the cholera response. WHO works closely with the ministry to improve case management, infection prevention and control measures, expanding cholera vaccination campaigns, and strengthening cholera surveillance and early warning systems.