



# Situation Report for Acute Watery Diarrhoea/Cholera

*Epidemiological Week 19 (07<sup>h</sup>-13<sup>th</sup>-May 2018)*

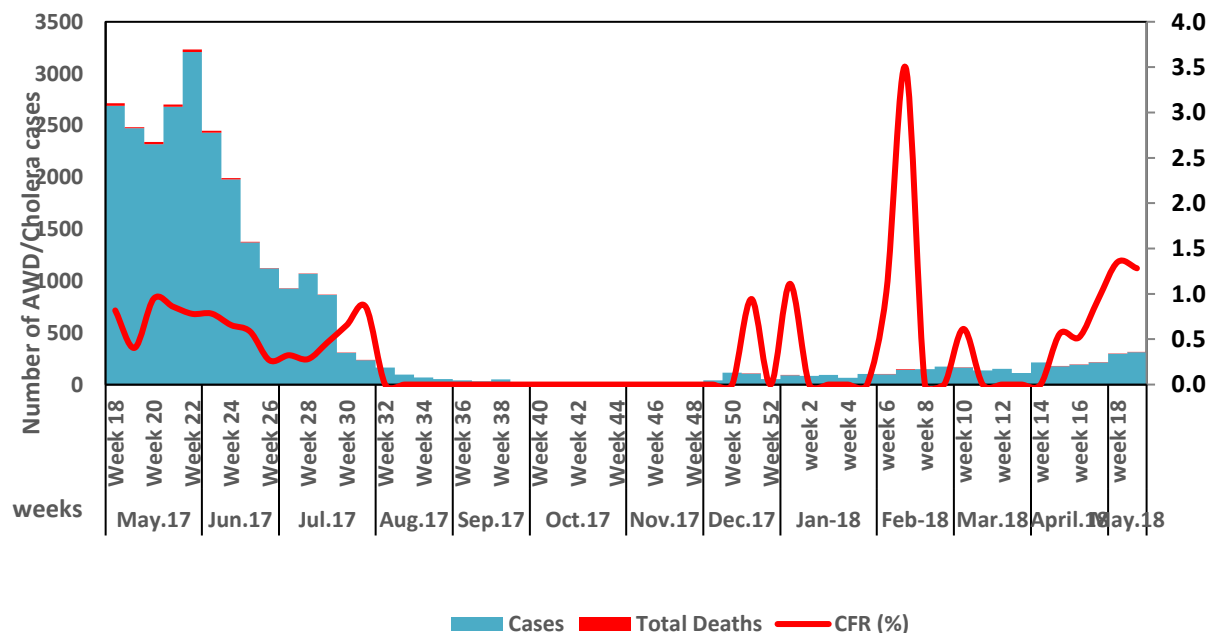
## HIGHLIGHTS

- A total of 312 new cases of suspected AWD/cholera were reported in week 19 compared to 296 cases in week 18
- A total of 4 new suspected cholera deaths were reported from Banadir (2) and Kismayo(2)
- A cumulative total of 3,280 cases including 21 deaths have been reported since December 2017
- The new AWD/cholera cases reported in Beletweyne started in December 2017. All the new outbreaks in Banadir, Kismayo, Jowhar ,Bulo barde and Afgoye started in 2018
- 169 cases were reported from flood affected Lower Shabelle and Lower Jubba regions
- zero AWD/Cholera alerts were received of which were true alerts from online EWARN system.

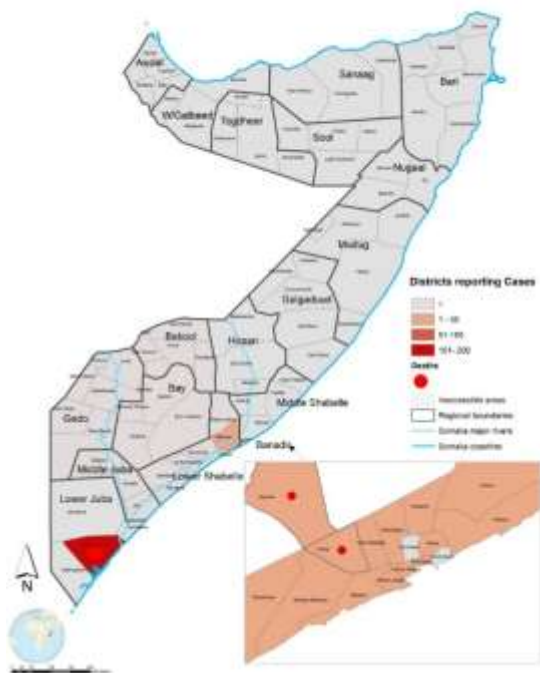
## KEY FIGURES

- 312 new cases and 4 new deaths
- 48% of the new cases were female
- 43% of the cases were children below 2 years of age.
- 100% of the cases had not received Oral Cholera Vaccine in three regions Banadir Lower Shabelle and Lower Jubba.
- 19 districts in 4 regions have reported new AWD cases since December 2017
- 3,280 cumulative case including 21 deaths since December 2017 (CFR 0.6%).

Fig 1. AWD/Cholera cases in Somalia May 2017-May 2018



Districts Reporting Cases in Week 19



Following the heavy rains that have led to the floods in the Juba land and Shabelle basins, there has been an observed increase in the number of new AWD/Cholera cases. The cholera outbreak that started in December 2017 in Beletweyne along river Shabelle has spread to Jowhar, Kismayo, Afgoye and Banadir. The cholera spread is expected to increase due to the floods that have led to contamination of water sources in the flood affected regions. Floods have also led to blockage of access of health services which will contribute to delayed health seeking by the affected populations with. Over the past 2 Weeks, there has been an increase in the number of AWD/Cholera cases reported in Lower Shabelle, Banadir and Lower Jubba; the regions that are affected by floods. In week ending 7<sup>th</sup> May, active transmission of AWD/cholera was reported in Kismayo district in Lower Jubba, Afgoye in Lower Shabelle as well as in 14 districts of Banadir region (Darkenly, Daynile, Hodan, Madina, Waberi, HamarWeine, Hamarjabjab, Heliwa, Waberi and Wardigley, Kaaran, Yaqshid, Howlwadag Shangani districts). In Kismayo, affected communities

especially in Farjano IDP are reportedly using contaminated water from open water sources. The Oral Cholera Vaccination that was implemented in 11 high risk districts in 2017 of the central region has greatly contributed to the reduction in the number of new AWD/cholera cases.

Table 1. Summary of AWD/Cholera cases in different regions

States	Regions	Week 18 (30 <sup>th</sup> April -6 <sup>th</sup> May-2018)			Week 19 (07 <sup>th</sup> -13 <sup>th</sup> May-2018)			Cumulative as of Epi-Week 49, 2017, Wk 19, 2018		
		Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)
		Central	Banadir	132	2	1.5	143	2	1.4	1,042
Jubba land	L/ Jubba	127	2	1.6	149	2	1.3	1,186	11	0.9
South west	L/ Shabelle	37	0	0.0	20	0	0.0	72	0	0.0
Hir-shabele	M/Shabelle	0	0	0.0	0	0	0.0	4,15	2	0.5
	Hiraan	0	0	0.0	0	0	0.0	565	1	0.2
Total		296	4	1.4	312	4	1.3	3,280	21	0.6

The AWD/ reported in this Lower Shabelle have not been confirmed by stool analysis. Deaths are included among cases

As shown in Table 2 below Banadir hospital has registered the highest number of AWD/Cholera admissions compared to other treatment facilities. Banadir CTC is the referral hospital for different regions and also the region has the highest concentration of refugees in different IDP camps. The Case Fatality Rates in Banadir and Farjano CTC are higher than the threshold. This has been attributed to delayed arrival at the treatment facilities by the

patients. The over CFR however is below threshold (<1%) due to improved case management as well as distribution of Oral Rehydration solutions by the deployed Integrated Emergency Response Teams in all the flood affected locations

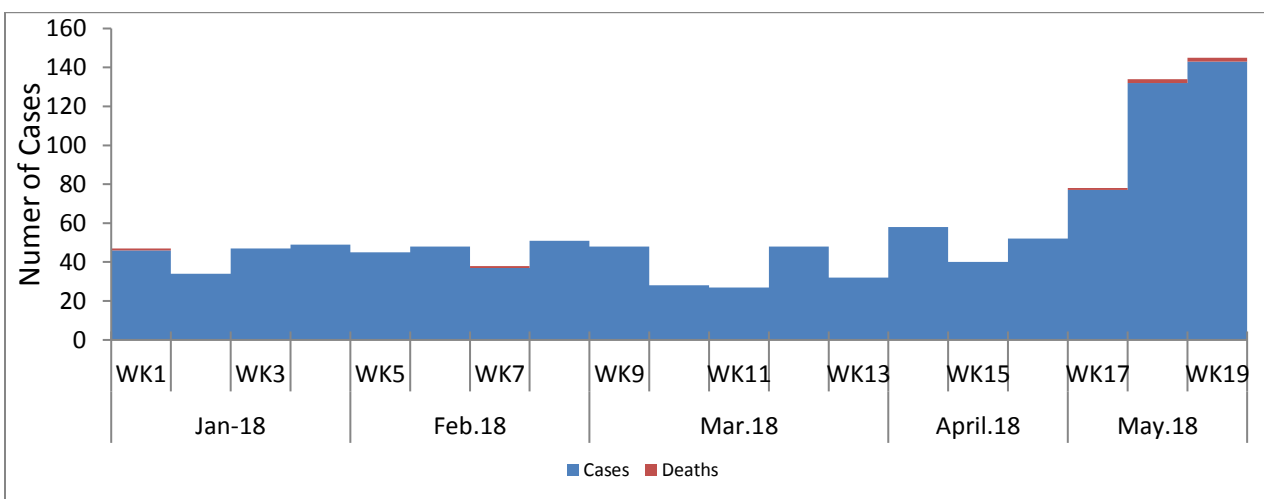
Treatment facility	New cases (week ending 13 <sup>th</sup> May 18)			Cumulative (12/17-05/18)		
	Admissions	Deaths	CFR(%)	Admissions	Deaths	CFR(%)
Banadir	143	2	1.4	1,042	7	0.7
Beletwyene CTC	0	0	0.0	522	1	0.2
Bulo Burde CTU	0	0	0.0	43	0	0.0
Kismayo Hospital	122	1	0.8	644	5	0.8
Farjano CTU	27	1	3.7	542	6	1.1
Afgoye Hospital	20	0	0.0	72	0	0.0
Jowhar CTC	0	0	0.0	415	2	0.5
Total	312	4	1.3	3,280	21	0.6

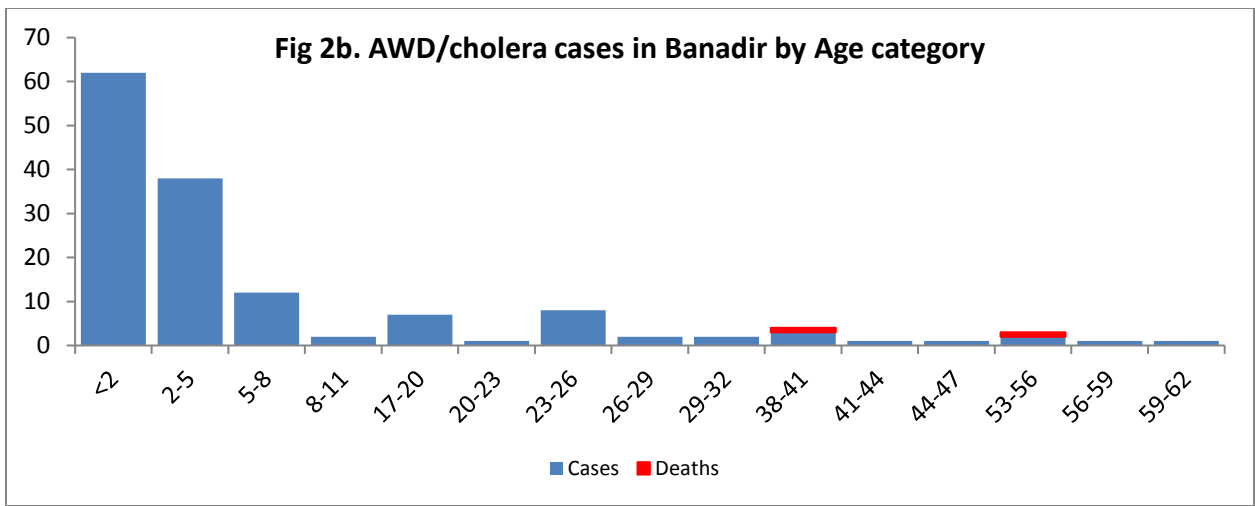
*The deaths as shown in table 2 above where not confirmed by stool analysis*

### AWD/Cholera situation in Banadir region.

Banadir regions which included Mogadishu city has one of the highest concentration of refugees where access to safe water and proper sanitation is limited. The AWD/Cholera outbreak in Banadir region started in January 2018 following reports of similar outbreak in Beletweyne district of Hiraan region (Fig 2a). Of the 17 districts that make up Banadir region, 14 have so far reported cases which have been managed in Banadir CTC located in the capital Mogadishu. There has been an increase in the number of AWD/Cholera cases from 132 and 2 deaths to 143 cases and 2 deaths in the past 2 weeks. More than 70% of the cholera cases reported in Banadir are children below 2 years of age (Fig 2b)

**Fig 2a. AWD cholera cases in Banadir (January 2018-May-2018)**

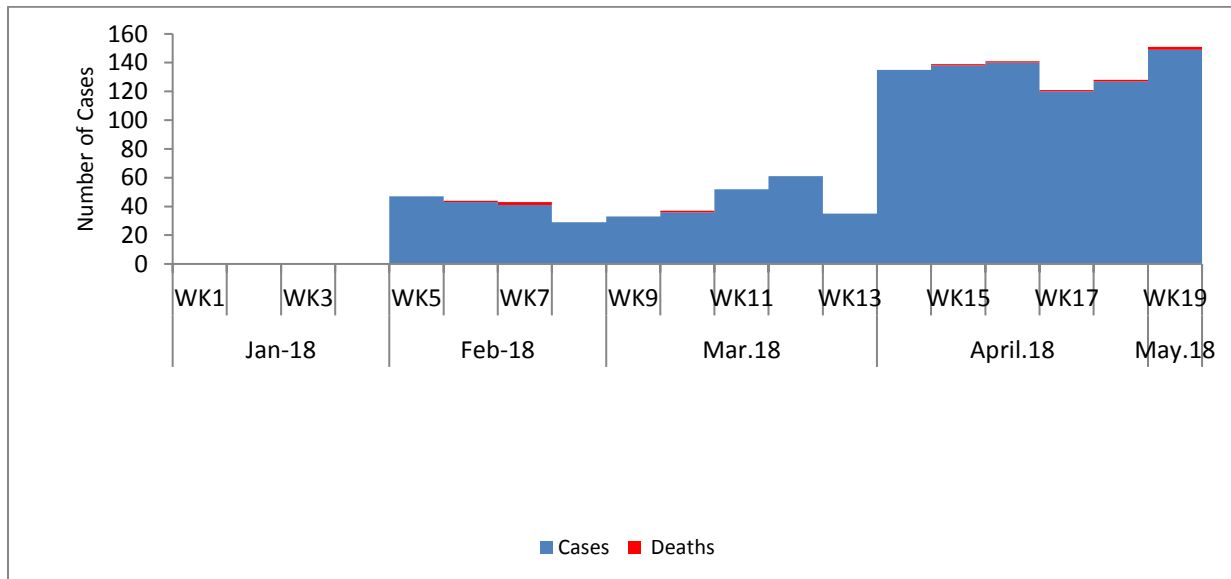


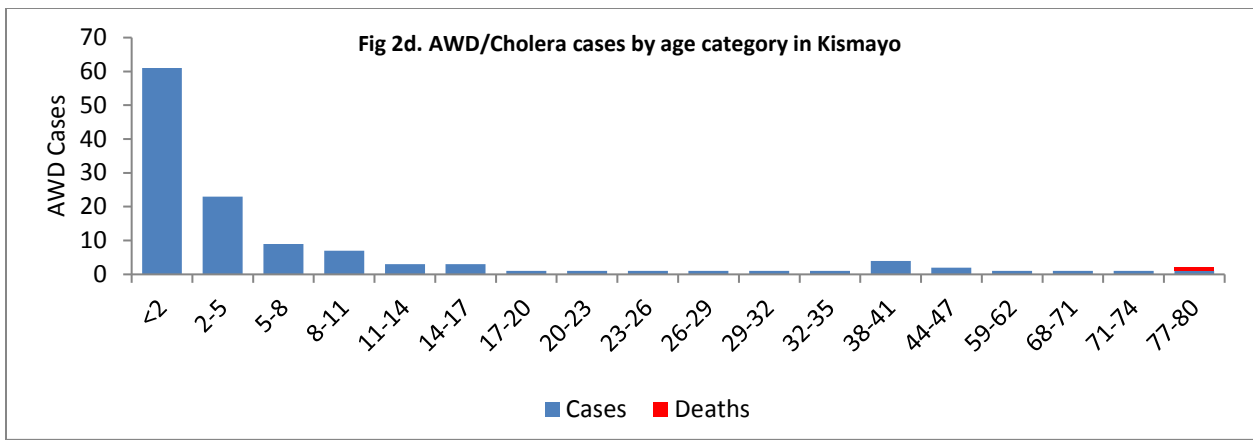


### AWD/Cholera situation in Lower Jubba

The current AWD/Cholera outbreak in Kismayo district started in week 5 of 2018 in the IDP communities of Farjano where access to safe water and sanitation is limited. The district is characterised by returnees from Kenya as well as those displaced by war in Middle Jubba. Currently Lower Jubba is one of the flood affected regions. The reported cases of AWD/Cholera did not receive OCV which was given in Kismayo in March 2017. The persons may have been absent during the OCV campaign. Over the past week, the number of AWD/Cholera cases increased from 127 and 1 deaths to 149 and 2 deaths has been reported in Farjano CTC and Kismayo General Hospital CTU (Fig 2c). More than 68% of the cholera cases reported from Lower Jubba are children below 2 years (Fig 2d).

Fig 2c. AWD cholera cases in Lower Jubba February 2018 -May 2018)

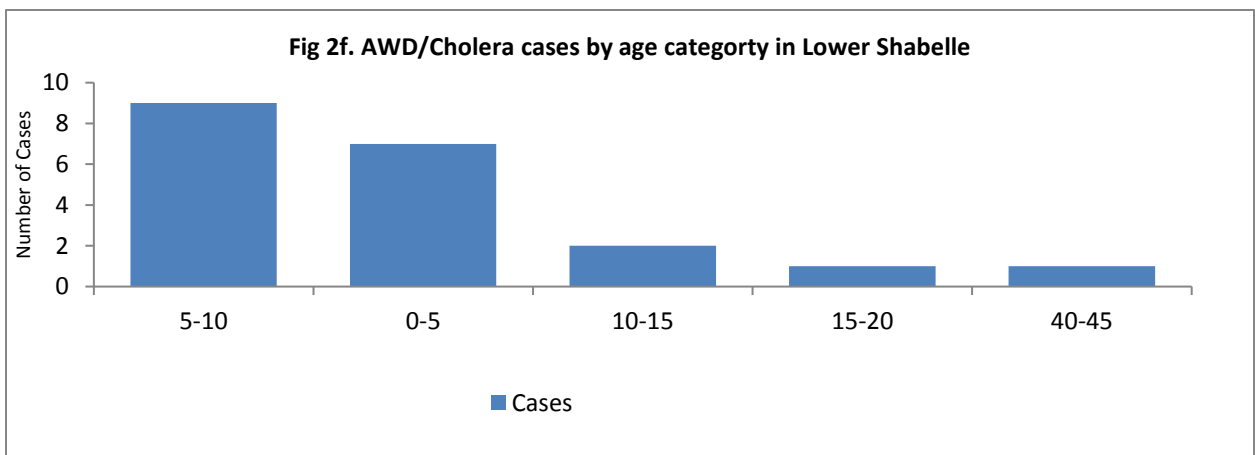
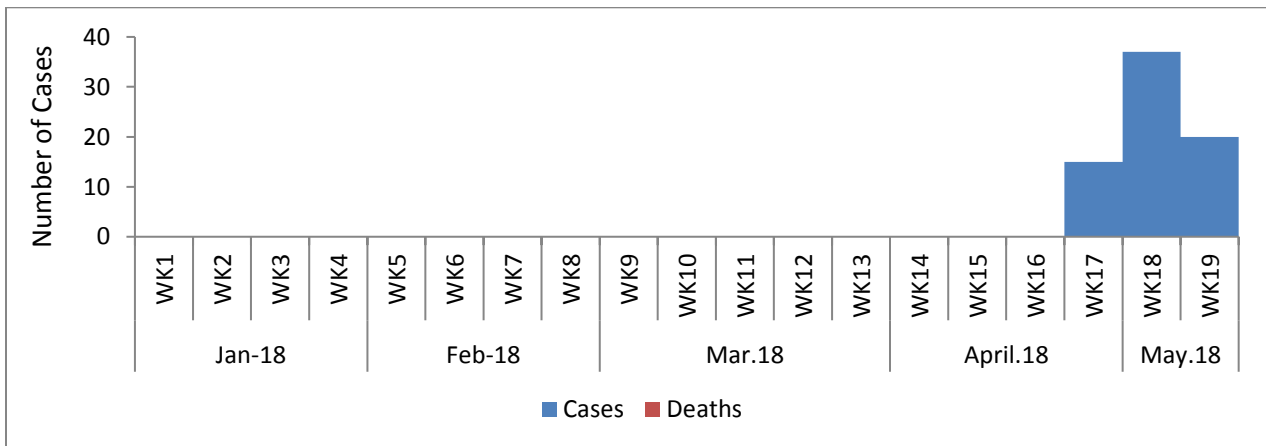




**AWD/Cholera situation in Lower Shabelle**

The AWD/Cholera outbreak in Lower Shabelle region started in week 17 of 2018 (Fig 2e) as a result of displacement of people due to floods that have been reported in this regions. Afgoye is the most affected district and cases are being managed in Marka General hospital. More than 35% of the cases reported in Afgoye are children below 5 years (Fig 2f)

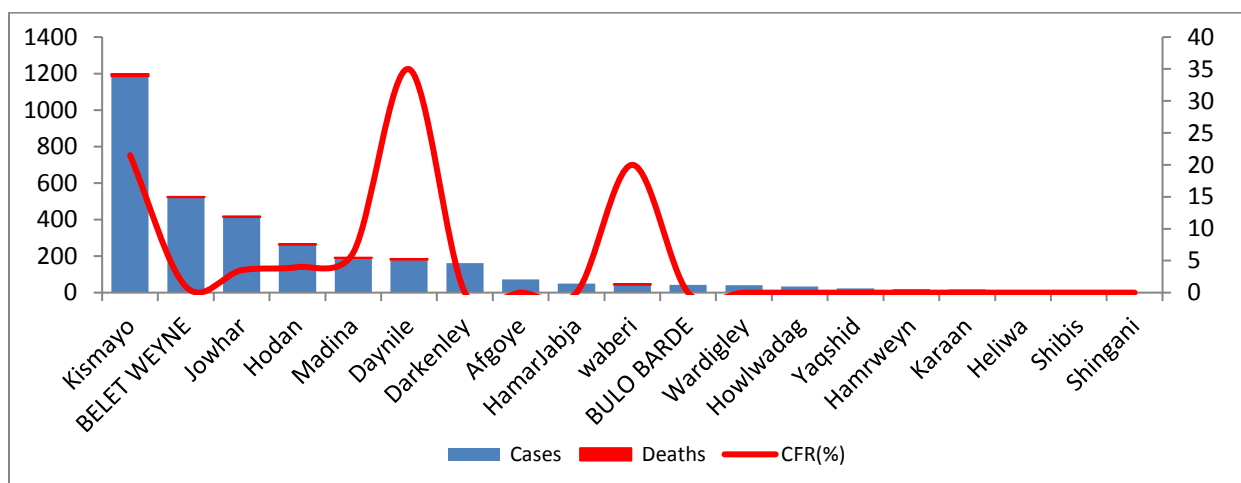
**Fig 2e. AWD cholera cases in Lower Shabelle -May-2018)**



## Distribution of cholera cases per districts

As shown in fig 3 below, Kismayo, Beletweyne, Jowhar and Madina are reporting the most number of AWD/Cholera cases. These are cholera endemic areas that are also affected by current floods. These regions have a high concentration of refugees where access to safe water and sanitation is limited. Even when Waberi and Daynile districts of Banadir have reported the highest case Fatality rates, these deaths were not conclusively verified to be cholera associated.

Fig 3. Distribution of AWD/Cholera cases by district



## AWD/Cholera cases and Oral cholera vaccination

Oral cholera vaccination campaign was implemented in Somalia in 10 districts of 6 regions (table 3). A total of 1,274,809 (90%) received the first dose of OCV while 1,196,518(86%) received 2 doses of OCV. During the current outbreak, records show that of the 3,280 cases in all regions, 100% did not receive the oral cholera vaccines for a number of unspecific reasons including not being present in homes during the campaign period. It should also be noted that OCV was implemented in areas which have a high concentration of immigrants and repeated displacement due to insecurity.

Region	District	Target <sup>1</sup>	OCV 1	% OCV 1	OCV 2	% OCV2
<b>Banadir</b>	Hodan	174,600	174,600	100	151,902	87
	Dharkenley	29,100	29,100	100	26,481	91
	Daynile	58,425	58,425	100	56,983	98
	Wadajir	149,870	144,678	97	141,151	98
<b>Hiraan</b>	Beletweyne	85,117	85,118	100	80,862	95
<b>Lower Juba</b>	Kismayo	165,095	163,775	99	152,638	93
	Afmadow	104,933	98,567	94	94,919	96
<b>Bay</b>	Baidoa	322,497	212,794	66	187,425	88
<b>Middle Shabele</b>	Jowhar	239,000	229,305	96	227,506	99
<b>Bakol</b>	Hudur	84,842	78,447	92	76,651	98
<b>Total</b>		<b>1,413,479</b>	<b>1,274,809</b>	<b>90</b>	<b>1,196,518</b>	<b>85</b>

<sup>1</sup>Figures based on Polio EPI population estimated 2017

## Laboratory activities

Stool samples are collected from 6 Cholera Treatment units/Centres currently operational in 4 regions. Of the 172 stool samples so far collected since the beginning of the year, 56 tested positive for V. cholera (Table 4 )

<b>Table 4. Stool samples collected from Cholera Treatment Centres/Units</b>						
<b>SN</b>	<b>Regions</b>	<b>CTC/CTU</b>	<b>Date Collected 2018</b>	<b>Vibrio Cholera Positive Cases</b>	<b>Vibrio Cholera Negative Cases</b>	<b>Total</b>
1	Banadir	Banadir hospital	3 <sup>rd</sup> Jan 18	2	5	7
2	Banadir	Banadir hospital	15 <sup>th</sup> Jan 18	2	11	13
3	Hiran	Beletweyne town	25 <sup>th</sup> Jan 18	0	10	10
4	Banadir	Banadir hospital	27 <sup>th</sup> Jan 18	0	7	7
5	Lower Jubba	Kismayo	28 <sup>th</sup> Jan 18	4	2	6
6	Banadir	Banadir hospital	5 <sup>th</sup> Feb 18	1	4	5
7	Banadir	Banadir hospital	14 <sup>th</sup> Feb 18	1	7	8
8	Middle Shabelle	Jowhar Hospital	17 <sup>th</sup> Feb 18	9	1	10
9	Banadir	Banadir hospital	25 <sup>th</sup> Feb 18	1	7	8
10	Middle Shabelle	Jowhar Hospital	5 <sup>th</sup> Mar 18	6	4	10
11	Hiran	Bulobarde	7 <sup>th</sup> Mar 18	6	4	10
12	Galgadur	Herale	7 <sup>th</sup> Mar 18	0	10	10
13	Hiran	Bulobarde	28 <sup>th</sup> Mar 18	0	10	10
14	Lower Jubba	Kismayo	15 <sup>th</sup> April 18	7	3	10
15	Banadir	Banadir hospital	22 <sup>nd</sup> April 18	1	7	8
16	Banadir	Banadir hospital	30 <sup>th</sup> April 18	6	6	12
17	Lower shabelle	Afgoye Hospital	3 <sup>rd</sup> May 18	3	6	9
18	Banadir	Banadir hospital	8 <sup>th</sup> May 18	7	12	19
	<b>GRAND TOTAL</b>			<b>56</b>	<b>116</b>	<b>172</b>

## AWD/Cholera cases and floods

Following heavy rains in Ethiopia and Somalia, flash floods have been reported in the basins of Juba and Shabelle in 4 states. An estimated 718,000 people have been affected of which 220,000 have been displaced<sup>2</sup>. Floods contribute to contamination of water sources as well as disruption of health services which are precursors of cholera outbreaks. Of the flood affected regions, cholera cases have been reported in Kismayo (1,186 cases) and Afgoye (72 cases) as shown in table 4. Even when Jowhar and Beletweyne reported cases prior to the floods, no new cases have been reported from these districts following the floods.

Region	District	Week 19				Cumulative Week 49/17-week 19/18		
		Cases Live		Deaths		cases	Deaths	CFR (%)
		<2 yrs	≥2 yrs	<2 yrs	≥2 yrs			
<b>Banadir</b>	Darkenley	13	12	0	0	161	0	0
	Daynile	14	6	0	1	181	4	2.2
	HamarJabja	3	3	0	0	50	0	0
	Hawlwadag	2	4	0	0	34	0	0
	Hodan	12	6	0	1	263	1	0.4
	Karaan	0	0	0	0	18	0	0
	Madina	9	2	0	0	190	1	0.5
	waberi	0	2	0	0	44	1	2.3
	Shibis	1	0	0	0	6	0	0
	Shingani	0	0	0	0	1	0	0
	HamarWeine	2	1	0	0	19	0	0
	Heliwaa	0	0	0	0	11	0	0
	Wardigley	6	0	0	0	41	0	0
Yaqshid	0	2	0	0	23	0	0	
<b>M/Shabelle</b> <sup>x</sup>	Jowhar	0	0	0	0	415	2	0.5
<b>Hiran</b> <sup>x</sup>	Beletweyne	0	0	0	0	522	1	0.2
	BuloBarde	0	0	0	0	43	0	0
<b>L/Shabelle</b> <sup>x</sup>	Afgoye	0	7	0	0	72	0	0
<b>L/Jubb</b> <sup>x</sup>	Kismayo	72	30	0	2	1,186	11	0.9
<b>Total</b>		<b>134</b>	<b>75</b>	<b>0</b>	<b>4</b>	<b>3,280</b>	<b>21</b>	<b>0.6</b>

<sup>x</sup> regions currently affected by floods. Cases include deaths.

<sup>2</sup> OCHA Flood Flash update | 15<sup>th</sup> May 2018



## Response activities implemented during the week

### Coordination and Leadership.

- Coordination meetings were conducted in the flood affected districts. The coordination meetings are coordinated by Federal Ministry and State level MoH in coordination with health cluster partners

### Case management

- On job training was conducted for the health workers working in cholera treatment centres in Kismayo and Banadir and Afgoye Hospital CTCs
- Management of cholera cases is being conducted in Banadir hospital CTC, Kismayo hospital CTU, Marka hospital CTU and Farjano CTU

### Surveillance and Laboratory Investigations

- Routine line listing of cases including data analysis and risk assessment for cholera hotspots
- Investigation and verification of rumours in flood affected regions
- Stool sample collection and analysis in the WHO supported NPHL in Mogadishu

### Water Sanitation, Hygiene and risk communication

- Hygiene promotion of AWD prevention and control mechanism is on-going in Farjano and Dalxiska
- ARC is chlorinating 40 shallow wells as well as distribution of hygienic kits in Dalxiska camp, Farjano, Bula-ablika, Marina and surrounding areas
- ARDI started chlorination of shallow wells in Farjano village have been started mainly in Bula-ablika, marine and Dabyanbo and distribution of aqua tabs
- SRCS is distributing hygiene kits in all IDP households
- ADRA is supporting hygiene promoters
- SIF is conducting water tracking in some IDP camps

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