



REFUGEE SURVEILLANCE UPDATE (MABAN AND YIDA)

Epidemiological Week 6

10th - 16th February 2013

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Highlights

- The proportion of health facilities in Maban submitting weekly reports to the state and central level increased this reporting period to 68% (15 out of 22) as compared to week 5 (*Refer table 1 for details of health facilities in Maban and Yida by supporting partners*). Six health facilities serving refugees in Maban reported this week (6 out of 7 facilities), while 9 health facilities serving host communities reported this week (9 out of 15 facilities). All three health facilities serving Yida refugee camp reported in week 6.
- Acute watery diarrhea was the leading priority diseases recorded in the refugee camps (50%), followed by malaria (25%) and acute jaundice syndrome (22%).
- Six hundred and fifty four (654) suspected Acute Jaundice Syndrome (AJS) cases or Hepatitis E cases and fourteen (14) related deaths were recorded from Maban and Yida in week 6. Of these, 98% of cases and 100% of deaths were reported in Maban refugee camp, Yusuf Batil in particular. Only 2% of cases were reported in Yida refugee camp. The cumulative AJS cases recorded from Maban refugee camps was 6340, and 121 related deaths, while 149 AJS cases and 7 deaths were recorded in Yida as of week 6. The trend of AJS cases in Batil is still very high since week 48 of 2012 despite some effort by WASH partners to address sanitation and hygiene gaps identified by MSF assessments in Batil and Doro.
- One suspected meningitis case was recorded from Doro refugee camp this week, and the cumulative meningitis cases reported from the refugee camps in the last six weeks was 8.
- There was no report of suspected Cholera, Measles or VHF cases from refugee camps, but the trend of acute watery diarrhea slightly increased this reported period.

Silent Facilities in Maban and Yida:

Genkwatta PHCC, Khortumbak PHCC, PHCC, New Guffa, Baugaya PHCC, Doro PHCC (SIM)

Reporting Performance

The total number of health facilities expected to report for Early Warning and Alert Response Surveillance (EWARS) system is 22 facilities in Maban and 3 facilities in Yida. Of these seven facilities are serving refugees camps in Maban and 3 facilities are serving Yida refugee camp. Nonetheless, few health facilities serving host communities in Maban county are not functioning or there functionality varies week by week.

Table 1: health facilities serving refugee and host communities in Maban and Yida

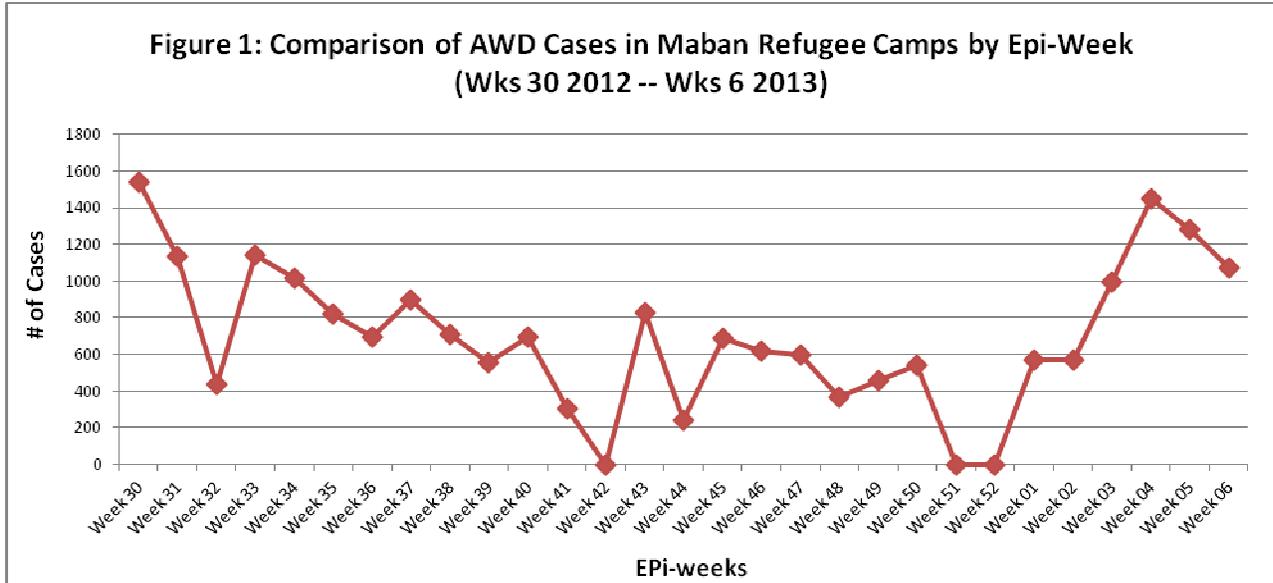
FACILITY IN MABAN	WK1	WK2	WK3	WK4	WK5	WK6
<i>Doro camp clinic MSF-B</i>	1	1	1	1	1	1
<i>Jamam CAMP MSF-H CLINIC</i>	1	1	1	1	1	
<i>Batil GOAL clinic(west & South)</i>	1	1	1	1	1	1
<i>Batil MSF-H</i>	1	1	1	1	1	1
<i>Batil Medair SE Clinic</i>		1	1	1	1	1
<i>Gendrassa MSF H</i>	1	1	1	1	1	1
<i>Gendrassa IMC</i>	1	1	1	1	1	1
<i>Bunj PHCC Relief International</i>	1				1	1
<i>Bunj Hospital SP/GOAL</i>	1				1	1
<i>Dangaji PHCU Relief International</i>	1				1	1
<i>Gesm Allah PHCU Relief International</i>	1				1	1
<i>Jammam PHCU GOAL</i>	1	1	1	1	1	1
<i>Genkwata PHCU MOH</i>						
<i>Thuaye PHCU MOH</i>	1					1
<i>New Guffa PHCU MOH</i>						
<i>Khor Tumbak PHCU MOH</i>						
<i>Puomkl PHCU SCiSS-MRDO</i>						
<i>Doro PHCU SIM</i>		1	1	1		
<i>Liang PHCU SCiSS-MRDO</i>	1		1	1	1	1
<i>Nila PHCU SCiSS-MRDO</i>	1		1	1	1	1
<i>Sheta PHCU SCiSS-MRDO</i>	1		1	1	1	1
<i>Baugaya PHCU GOAL</i>						
Total Facilities Reporting	14	8	11	11	14	15

FACILITIES IN YIDA	WK1	WK2	WK3	WK4	Wk5	WK6
<i>Wang Kuat PHCC</i>	1	1	1	1		1
<i>Yida PHCC</i>	1	1	1	1		1
<i>MSF-France Clinic</i>	1	1	1	1	1	1
Total Facilities Reporting	3	3	3	3	1	3

Epidemic Prone Disease Reported

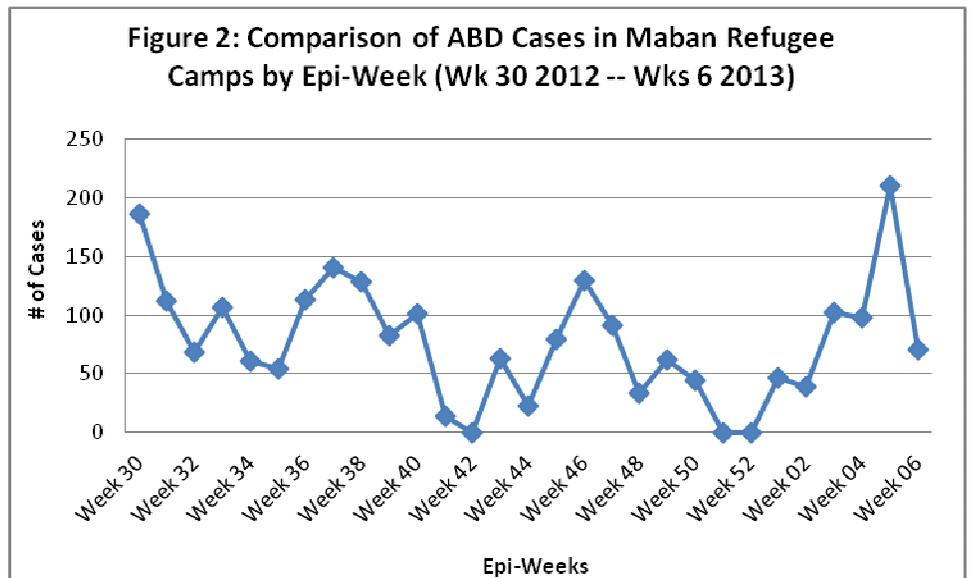
Acute Watery Diarrhea (AWD)

A total of 1492 AWD cases were reported in Maban and Yida Refugee camps during this reporting week with no related deaths. Children below five years of age accounted for 67% of all reported AWD cases. Figure 1 shows a comparison of AWD cases reported by Epi-week and year 2012 -2013. The overall incidence rate of AWD across the camps in Maban County decreased slightly in week 6.



Dysentery (ABD)

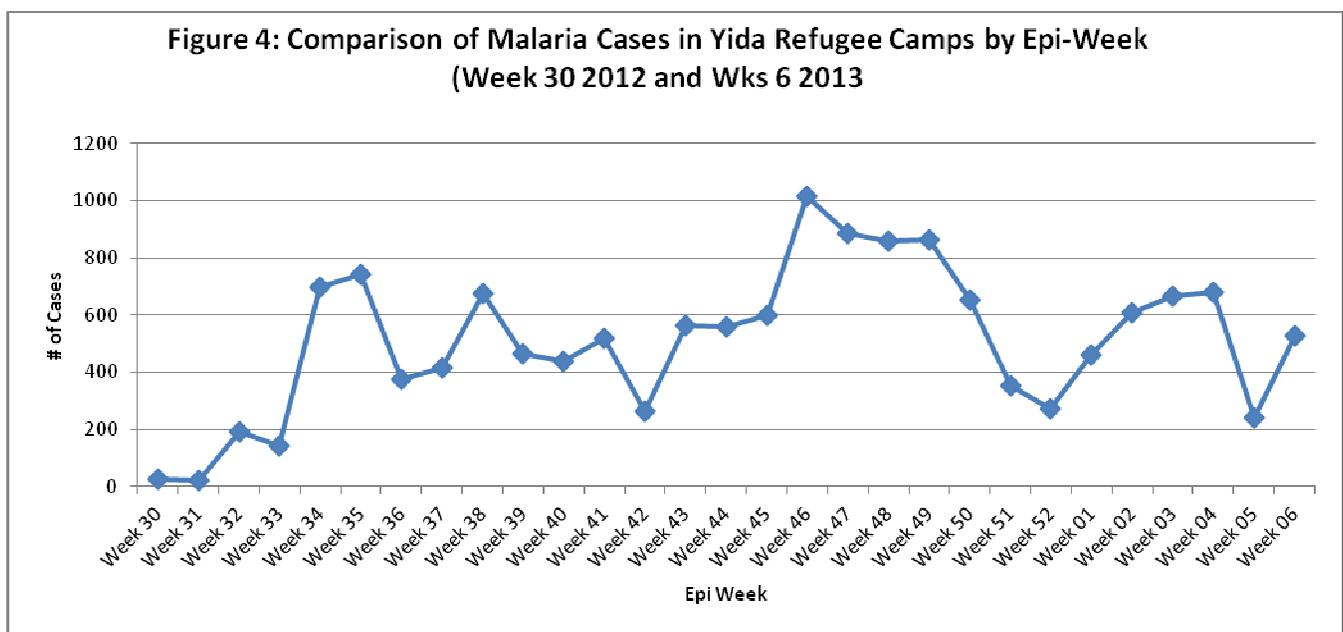
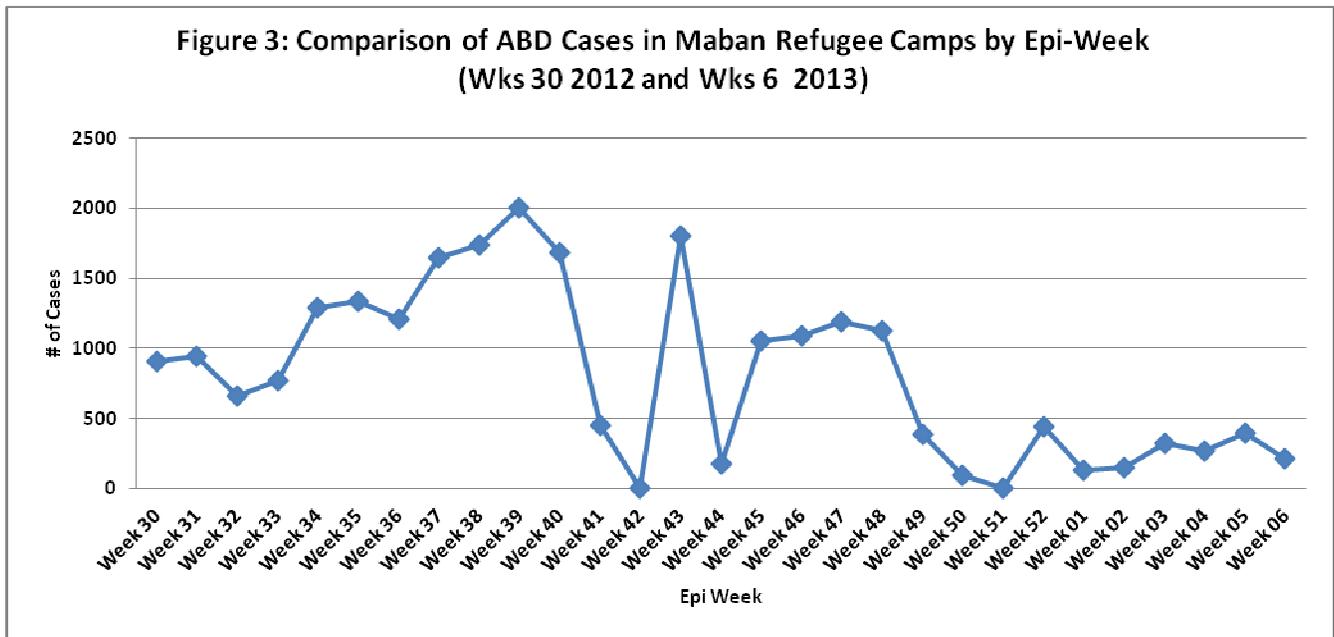
A total of 119 cases of ABD with no related deaths were reported in week 6. Children below five years of age accounted for 54% of all reported ABD cases. Figure 2 below shows a comparison of ABD cases reported by Epi-week and year 2012 - 2013. The ABD trend reported from the refugee camps in Maban decreased drastically this week, and this could be due to the fact that Jamam clinic supported by MSF Holland did not report this week.



Malaria

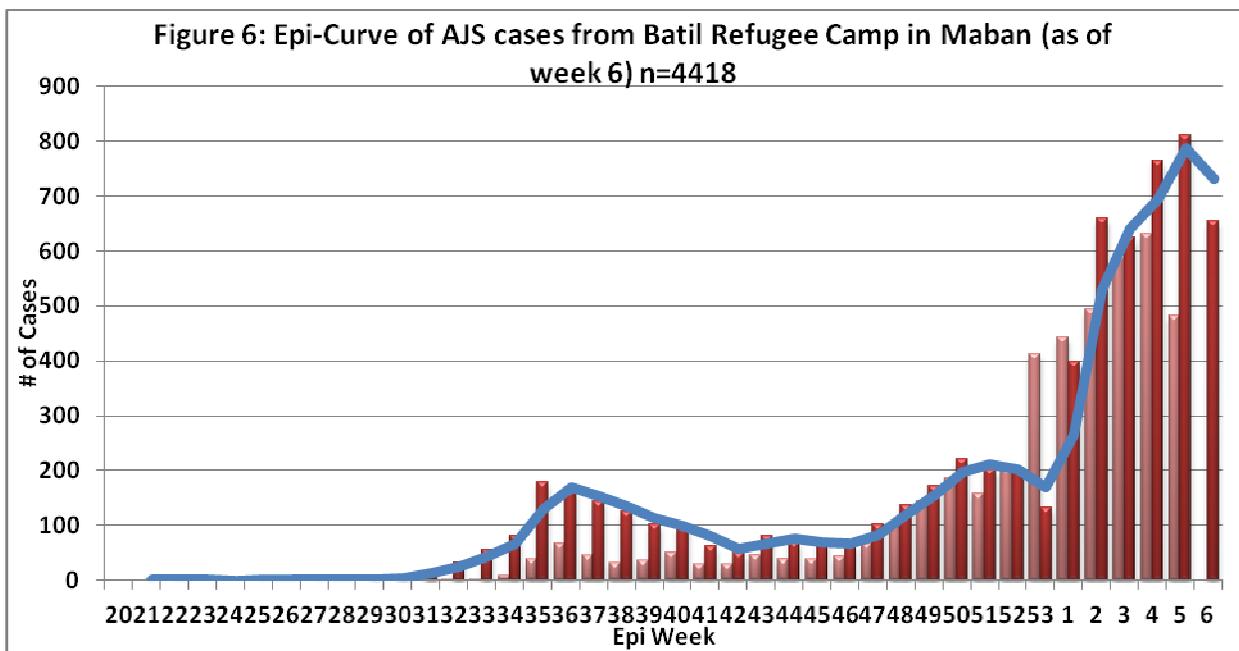
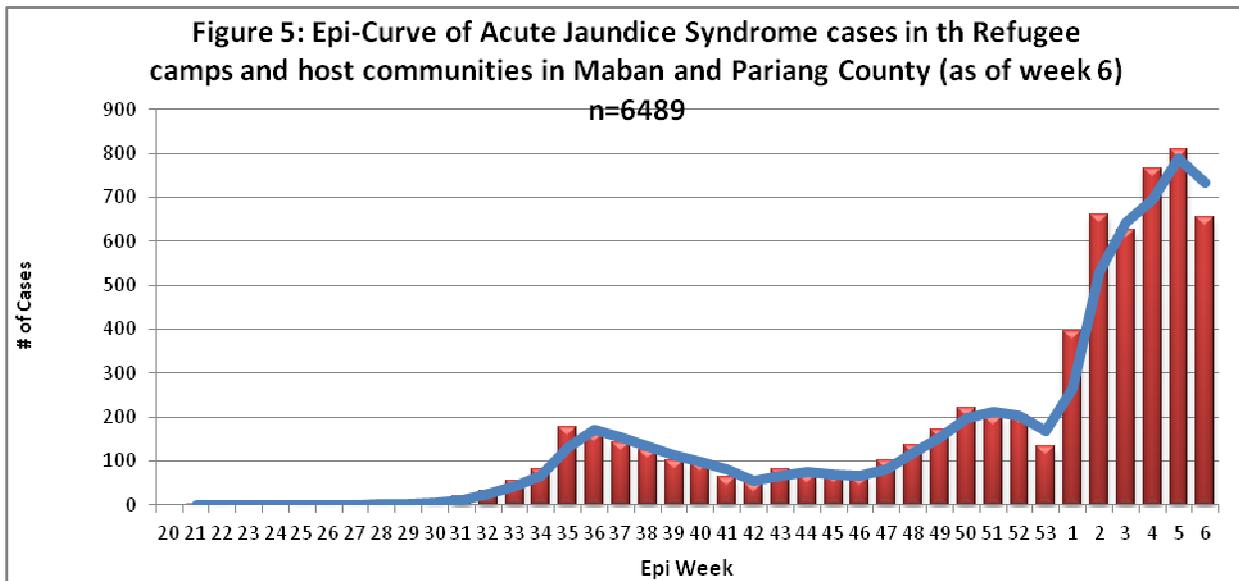
A total of 774 malaria cases with no related deaths were reported in weeks 6 in Yida and Maban. Of these cases, 72% were children below five years of age. Meanwhile, the trend of malaria in Yida slightly increased this week with 71 % of all cases coming from Yida alone.

Figure 3 and 4 below shows malaria trend in Maban and Yida from Epi-week 30-52 (2012) to Epi week 6 (2013). The malaria cases recorded in the refugee camps during the dry season were lower as compared to the cases recorded during the raining seasons. No reports of drug stock outs in both the host and refugee communities in both camps.



Acute Jaundice Syndrome (AJS)

A total of six hundred and fifty four suspected AJS cases and fourteen (14) related deaths were reported on week 6 across the Maban and Yida refugee camps. Over 98% AJS cases were recorded in Maban refugee camps (refer to figure 5 and 6 for AJS Epi-Curve in Maban and Yida). All the 14 deaths were recorded in Yusuf Batil camp. The cumulative AJS cases recorded in Maban was 6340 (suspected and confirmed HEV) and 121 deaths (CFR 1.9%), while 149 AJS cases and 7 deaths (CFR 4.7%) were recorded in Yida since the beginning of the outbreak. As shown figure 5, the overall trend of AJS (confirmed or unconfirmed HEV) has increased significantly since week 47 as compared to the previous weeks, and overall trend seem to be increasing in the past few weeks despite improved water and sanitation as well as case management at facilities level.



As shown in figures 5 above, the incidence of AJS/HEV cases reported across the refugee camps is still high in week 6, and majority of the cases were recorded in Yusuf Batil refugee camp (figure 6). Health and WASH partners have intensified their effort to contain the HEV outbreak in the refugee camps by improving the sanitation and hygiene condition, but it is becoming difficult to implement adequate prevention measures in a timely manner. The Ministry of Health together with UNHCR are advocating greater investment in the WASH sector in the refugee camps, and WASH partners to put in place appropriate and timely hygiene and sanitation measure to improve the overall condition in the camps.

Meningitis: Only one suspected meningitis case was reported from Doro camp in week 6. The cumulative meningitis cases recorded across the refugee camps in the last six week was 8.

Other Disease: No suspected case of ILI and VHF was reported during this reporting period.

Table 3: Summary of Priority Diseases in Maban and Yida Refugee camps in Week 6

Camps	Doro		Batil		Gendrassa		Jamam		Maban TOTAL		Yida		Yida TOTAL	
	C	D	C	D	C	D	C	D	C	D	C	D	C	D
Cases/ Death	C	D	C	D	C	D	C	D	C	D	C	D	C	D
Suspected Cholera	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AWD	561	0	322	0	150	0	37	0	1070	0	422	0	422	0
BD	27	0	42	0	2	0	0	0	71	0	48	0	48	0
Meningitis	1	0	0	0	0	0	0	0	1	0	0	0	0	0
Measles	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AFP	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AJS	11	0	481	14	138	0	0	0	630	14	24	0	24	0
VHF	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	60	0	111	0	38	0	6	0	215	0	529	0	529	0
Neonatal Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	660	0	956	14	328	0	43	0	1987	14	1023	0	1023	0

Key : AWD – Acute Watery Diarrhoea , ABD – Blood Diarrhoea/Dysentery, Men – Meningitis, AJS – Acute Jaundice Syndrome , AFP – Acute Flaccid Paralysis/Polio , NT - Neonatal Tetanus, 0 -Zero Report, C – Cases , D - Deaths , **Timely reports** - Reports received before Wednesday 10:00am, **Completeness** - Proportion of health facilities reporting in a county/state, **Timeliness** - Proportion of county in a state reporting on time. **HF**s- Health Facilities, **EPI-Expanded program for immunization**

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