

Dadaab Measles Outbreak

Measles cases: main observations from January to October 2011

October 15, - October 21, 2011

- **HIGHLIGHTS:**

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- **Measles cases continue to decrease (though the severe disruption in health services has affected surveillance).**
- **No deaths occurring during the reporting week**
- **Total of 1357 measles cases since January 2011**
- **9 cases had rash onset this week**

- **The outbreak of measles in Dadaab camp is on a downward trend**
 - 10 cases have been reported in the third week of October (week 42). However, of those reported only 9 cases had rash onset in the reporting week (see **Figure 1**).
 - A total of 1357 measles cases have been line listed since January 2011.
- **No deaths occurred this week**
 - Overall Dadaab case fatality rate stands at 2.4% (32 deaths out of 1357)
- **Trend reveals an overall reduction in number of reported clinical cases in all camps** (see **Figure 3**), though our active surveillance system has been disrupted and this must be interpreted with caution
- **Similar trends established among new and old caseload** (see **Figure 4**)
- **All age-groups are noting a decrease in number of cases**
 - Majority of cases still concentrated among adults, with patients above 14 years of age representing 61% of cases (see **Figure 5**)
 - Proportion of cases in the 5-14 year age-group was 18%, with children < 5 years of age accounting for 21% of total cases

HIGHLIGHTED RECOMMENDATION:

- Continue expanding active case finding through community health workers
- Once health posts function, again actively seek children who are turning six months of age and ensure vaccination against measles (need to be revaccinated after nine months) and strength tracing of immunization defaulters in under five year old children through CHWs and contact with health care providers

Recommendations and follow-up:

- Strengthen case finding
 - Pending security improvements re-establish health services in health posts and blocks (and especially in Ifo2) as soon as possible, so as to improve surveillance and active case finding in the camps
 - *FOLLOW UP:*
 - **Active case finding at community level** by CHWs through daily enquiries about cases of Fever **AND** Rash

- Strengthen reporting
 - *FOLLOW UP:*
 - Improvement in reporting of deaths-As soon as the situation allows, all camps to report deaths, and audits of all measles related deaths
 - Maintain regular key patient information reporting

- Reinforce and expand vaccination policy
 - *FOLLOW UP:*
 - Vaccination of 6 months to 29 years old at reception when activities resume
 - Staff vaccination has taken place in all camps
 - Vaccination of household contacts: Needs to be reinforced
 - **Vaccinate all pediatric patients** requiring hospitalization or admission to a stabilization center (unless contraindicated, or proof of prior immunization): Needs to be reinforced

- Case Management
 - Assess all cases for complications and determine if they can be managed at home, health post level, or need hospitalization
 - *FOLLOW UP:*
 - Care being availed in all hospitals
 - Admission of only complicated cases: Being implemented
 - Isolation of cases in hospitals: Being implemented

Figures¹

Figure 1 - Number of cases of measles per week Dadaab 2011

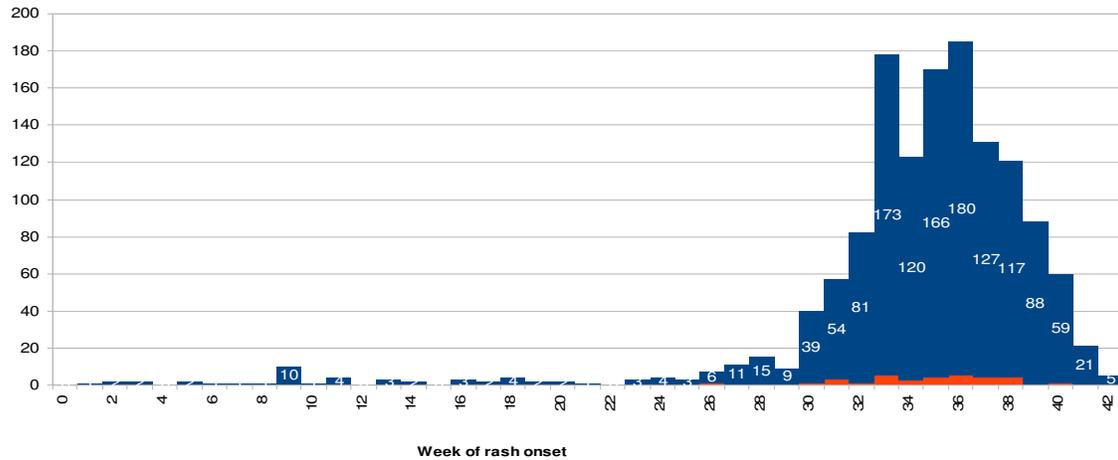
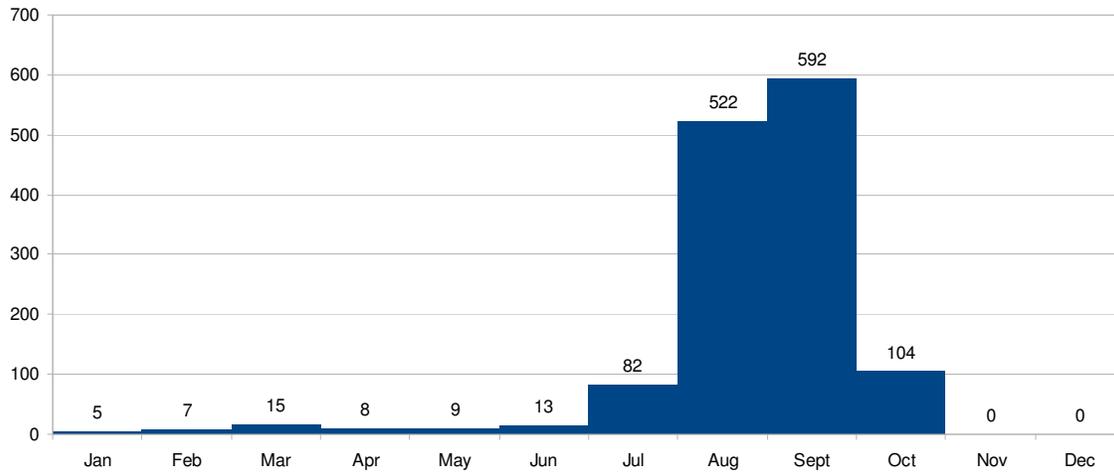


Figure 2 - Number of cases of measles per month Dadaab 2011



¹ All figures are updated to October 21st. Corrections on previous periods have been added.

Figure 3 - Number of cases per month and camp Dadaab 2011

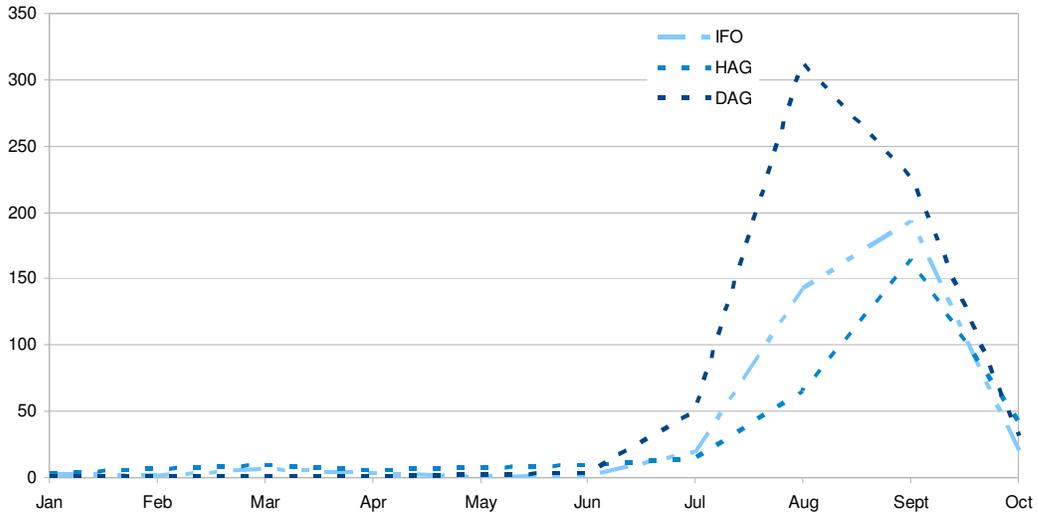
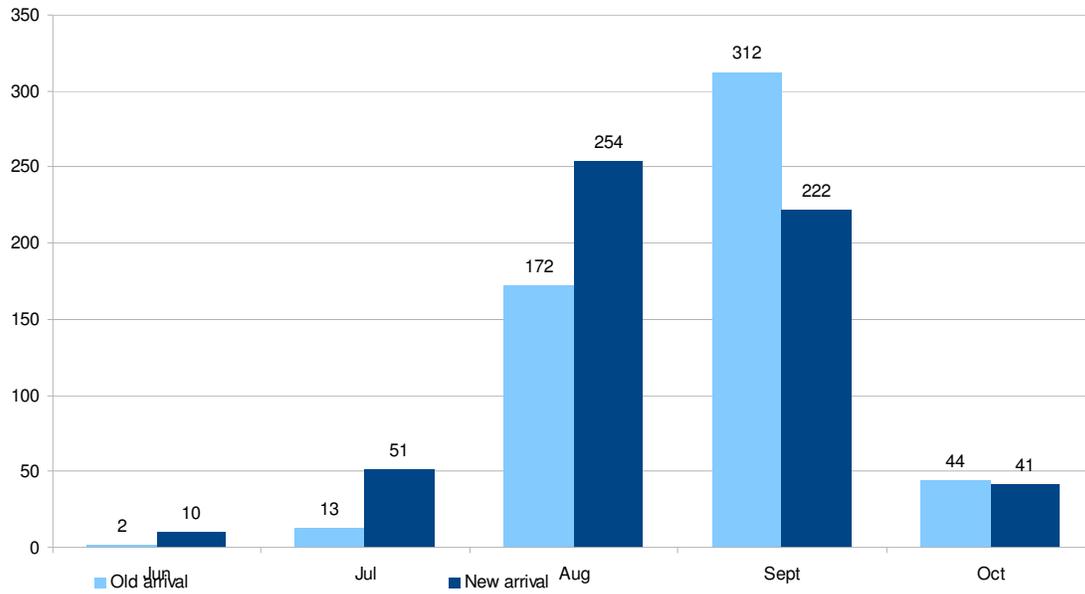


Figure 4 - Number of cases of measles by arrival status Dadaab 2011



**Figure 5 Percentage of cases of measles by age group Dadaab, January-- October,2011
(N= 1357)**

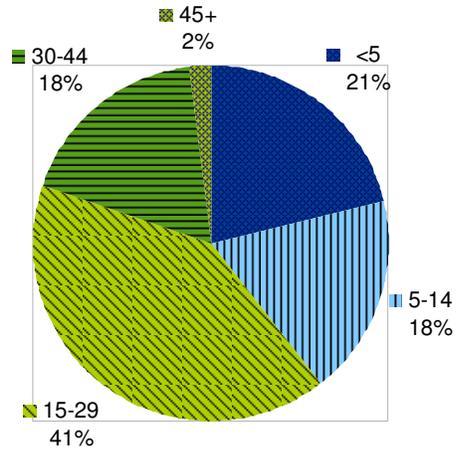


Figure 6 Number of cases of measles by age-group and month Dadaab 2011

