

Northwest of Syria Cholera Outbreak

Situation Report No.3

Epidemiological Week 41 (9 - 15 Oct 2022)

Date of Onset of Outbreak: 16 September 2022

Reporting Date of outbreak: 17 September 2022

Confirmation Date: 19 September 2022

Key Highlights

- Cumulatively, a total of **1287 suspected** cases including **121 confirmed** have been reported by EWARN team since 16 September, including **One death** case.
- **Jarablus** and **Afrin** districts are on the top reporting areas.
- 441 suspected cases including (53 confirmed cases) were reported from **camps**.
- 46% Of the suspected cases are in age group <5 years, versus 32% of the confirmed cases are in age group <5 years.
- Since the outbreak started, surveillance and reporting from facilities are being supported and strengthened. For better understanding of the background and context, [please read pervious sitreps](#).
- Suspected cholera cases are being investigated by Rapid Response Team, either in areas of outbreak or in areas where new cases have been reported.
- Line list is shared with WHO and WASH team to aid Targeted response at household level being conducted for identified cases.
- Active case search is ongoing especially in the camps.

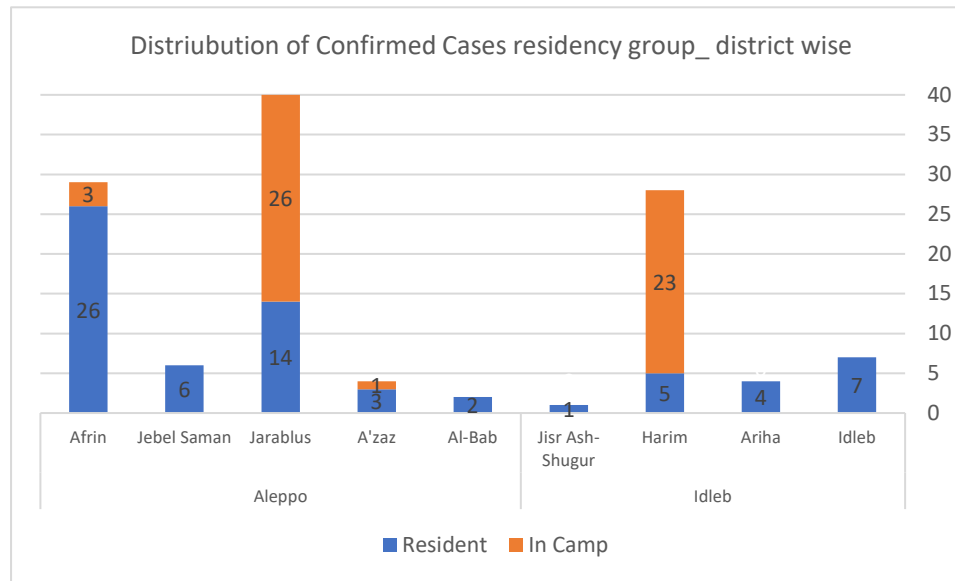
Suspected Cases: 1287

Confirmed Cases: 121

Cholera Death : 1

Case Fatality Rate: 0.07%

NWS Attack Rate: 0,02%



Situation Updates

1. Epidemiology

In Epi week 41, **510 suspected cases of cholera were reported, including 61 positive cases**. The affected governorates are Aleppo (443 suspected and 38 confirmed), and Idleb (67 suspected and 23 confirmed).

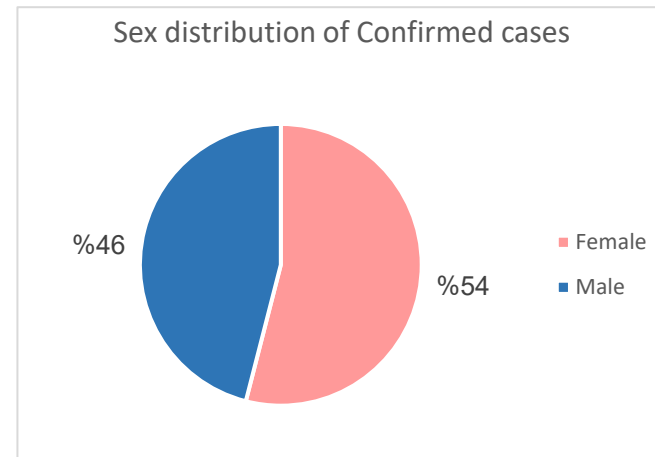
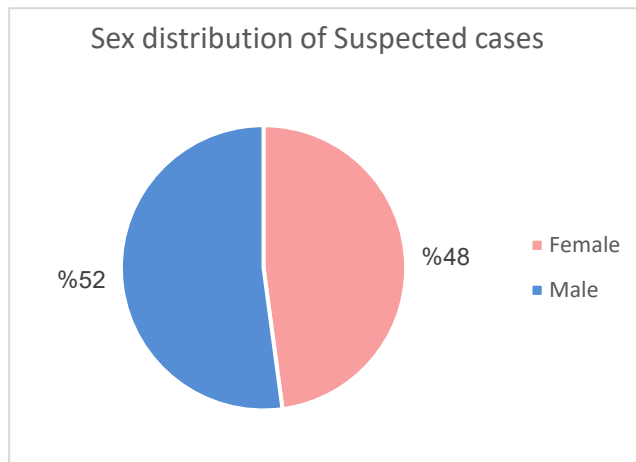
The overall sex distribution of the suspected cases is 52% Male, and 48% Female, whereas sex distribution of the confirmed cases is 46% Male, and 54% Female.

About 46 % of the line listed cases were among the age group < 5 years. Children under 2 years of age can be affected by cholera and need to be treated immediately. When a cholera outbreak has been confirmed, children under 2 years of age who meet the cholera case definition should be recorded in the register, reported to the surveillance unit and considered in the epidemiological analysis.¹

¹ [gtfcc-cholera-outbreak-response-field-manual](#)

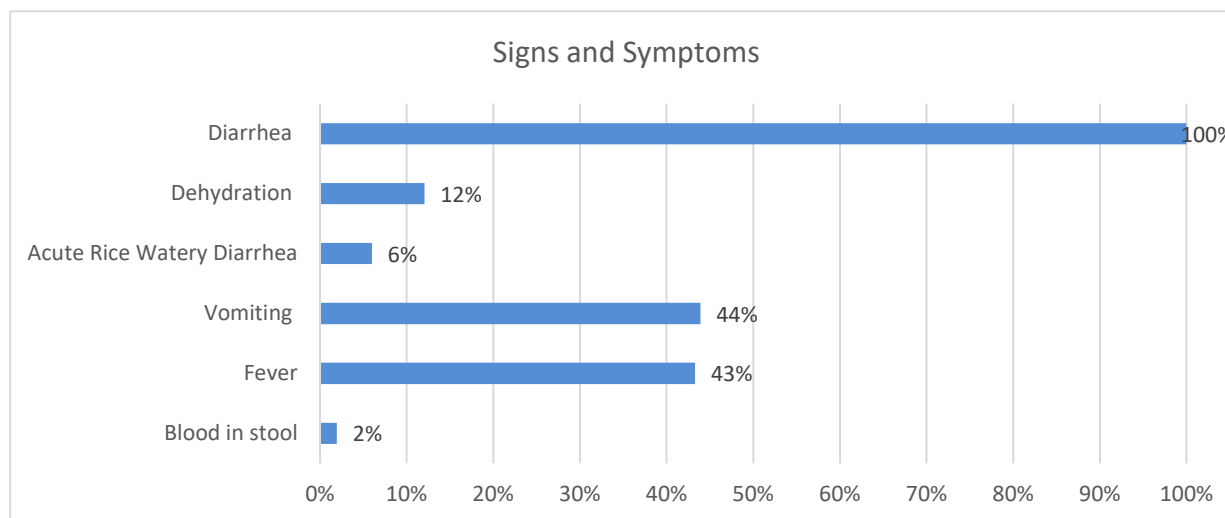
100% of the line listed cases were presented as Acute Diarrhea, including 6% as rice watery diarrhea, and 12% were dehydrated. **4 Cholera confirmed cases were diagnosed when investigated as Acute Flaccid Paralysis cases and the stool was cultured for Cholera before dispatching them to Ankara lab.**

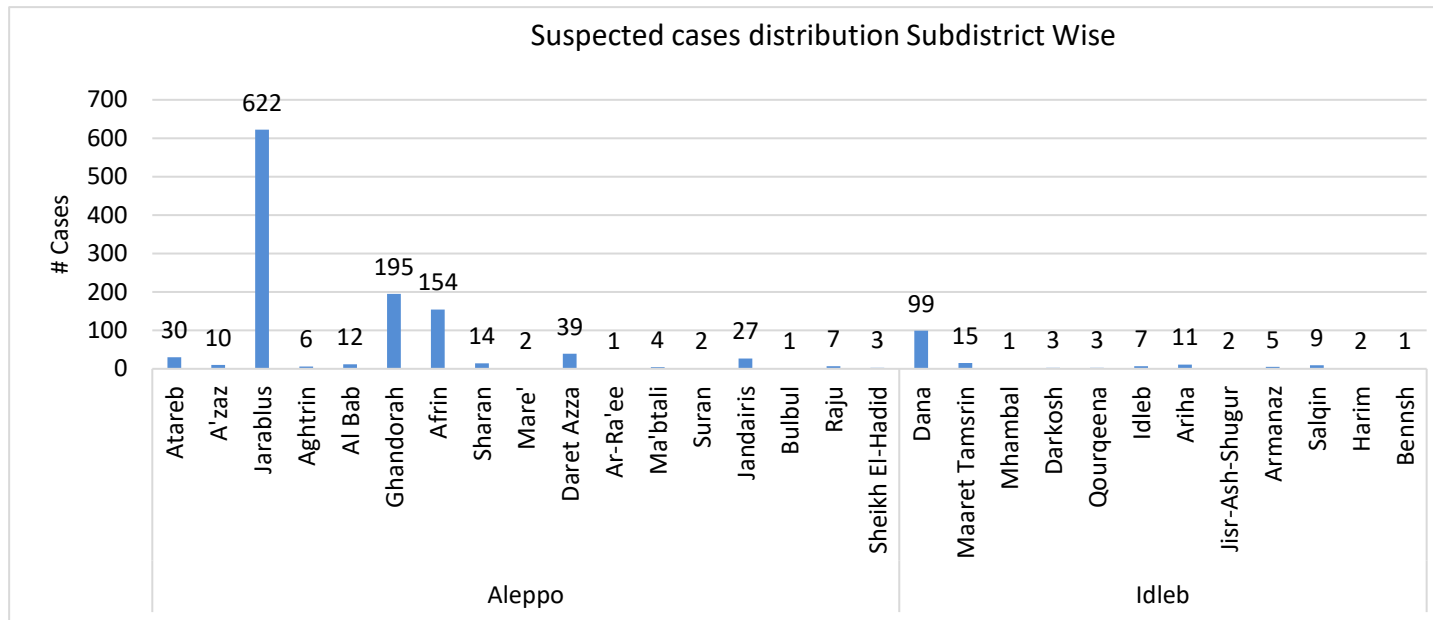
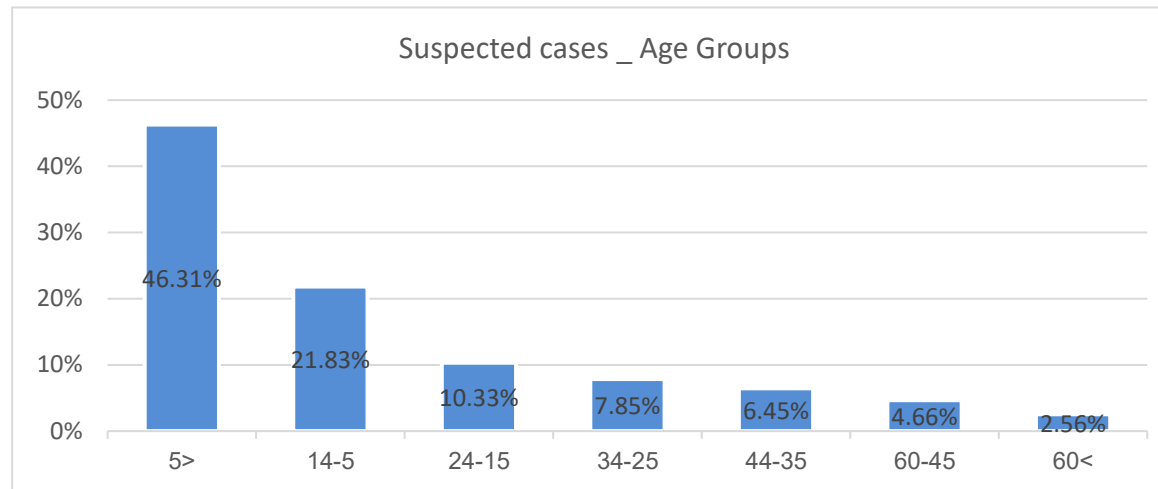
As the outbreak progresses, sensitivity should be increased by including smaller age groups and mild / moderate symptoms groups in order to estimate the burden of the outbreak. According to WHO, in areas where a cholera outbreak has been confirmed, any person presenting with or dying from acute watery diarrhea considered as a suspected cholera case.²

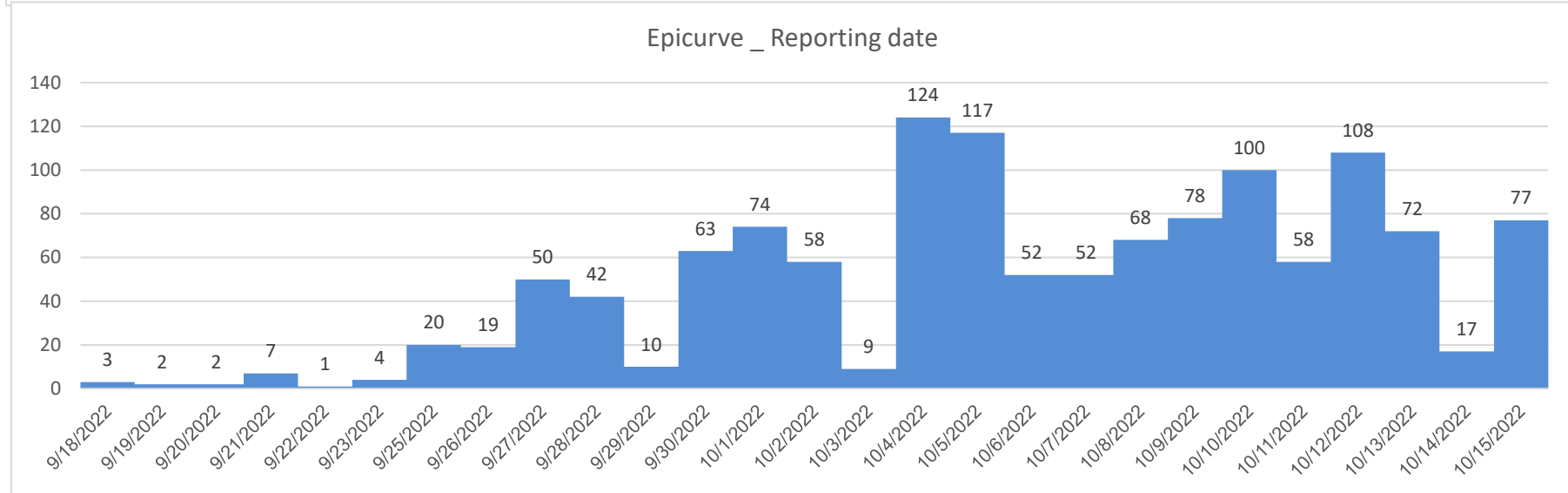
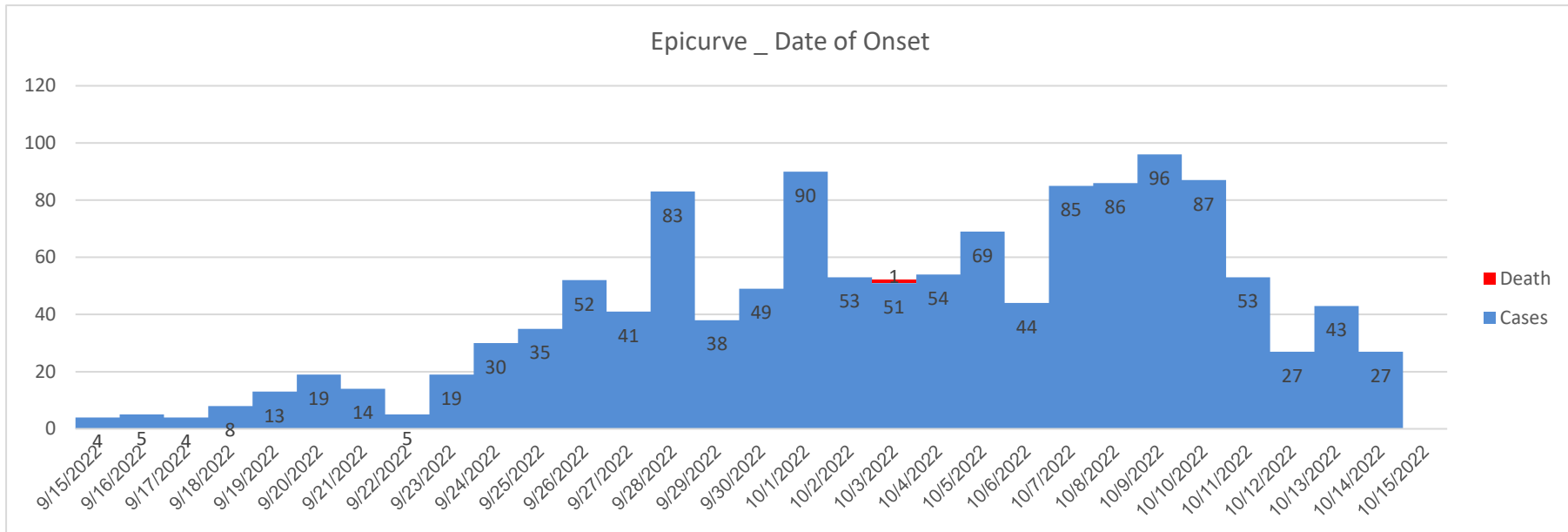


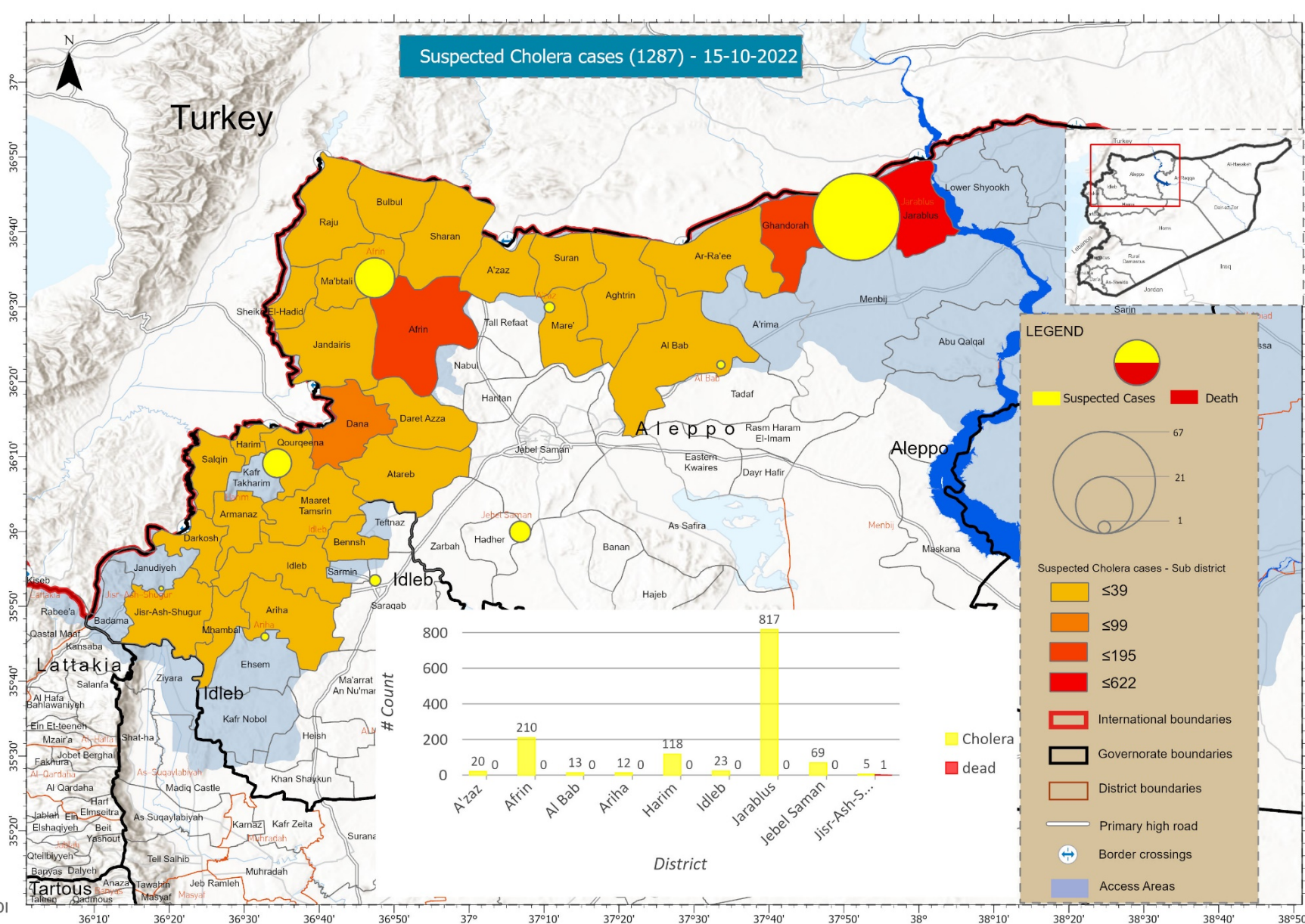
² [who-surveillancevaccinepreventable-02-cholera](http://www.who.int/surveillance/vaccinepreventable-02-cholera)

Epi Week	Governorate	District	Date of Onset	Population	New Suspected cases	Cumulative Suspected Cases	New Death	Cumulative Deaths	Case Fatality Rate	Weekly Incidence Rate (per 100.000)
W41	Idleb	Ariha	20-Sep	185,668	9	12	0	0	0.00%	4.84
		Harim	6-Sep	1,586,820	43	118	0	0	0.00%	2.70
		Idleb	14-Sep	713,933	14	23	0	0	0.00%	1.96
		Jisr-Ash-Shugur	25-Sep	310,973	1	5	1	1	20.00%	0.32
	Aleppo	A'zaz	9-Sep	648,600	6	20	0	0	0.00%	0.92
		Afrin	21-Sep	467,090	149	210	0	0	0.00%	31.89
		Al Bab	17-Sep	339,812	0	13	0	0	0.00%	0
		Jarablus	12-Sep	121,938	285	817	0	0	0.00%	233.72
		Jebel Saman	10-Sep	251,785	3	69	0	0	0.00%	1.19
	Total				4,626,619	510	1287	1	1	0.08%



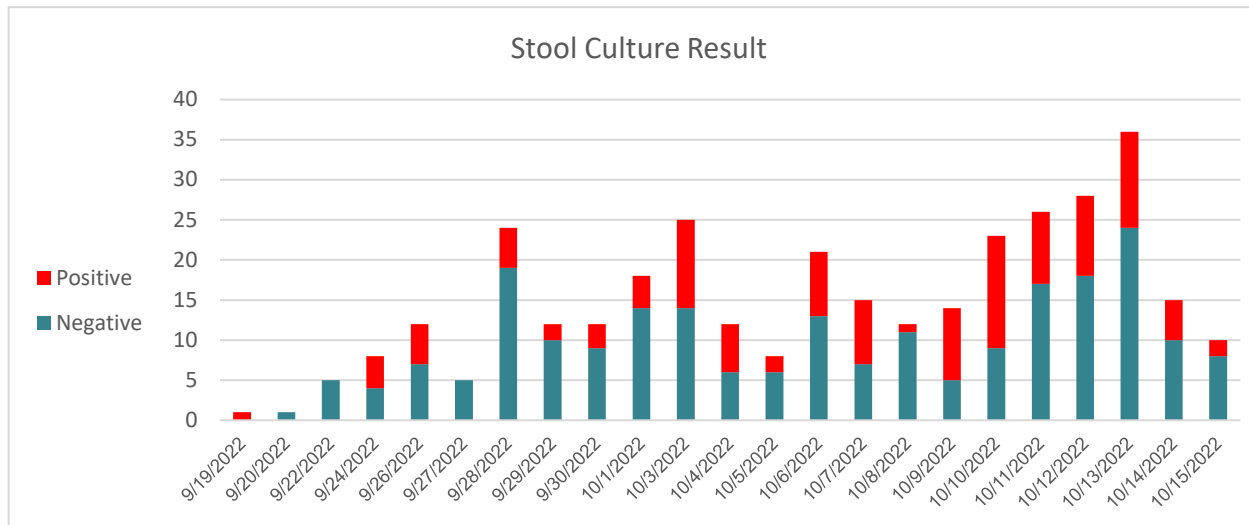
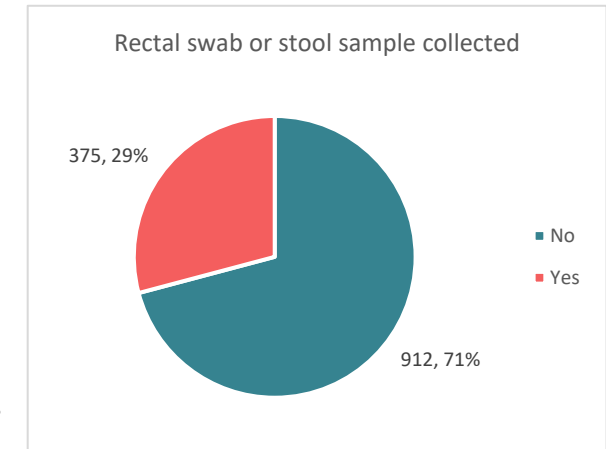






2. Laboratory:

- In Epi week 41, the total number of collected stool specimens or rectal swabs is 153, of which 61 have tested positive for Vibrio Cholera.
- A cumulative of 375 samples were collected since the start of the outbreak (29% of overall line listed cases), of which 121 have tested positive by stool culture.
- The Total number of negative cases by stool culture is 222, and the remaining 32 are still pending.
- Once the outbreak is declared, there is no need to confirm all suspected cases. The clinical case definition is sufficient to monitor epidemiologic trends³.
- All samples are being cultured on selective media like TCBS and Oxidase test, sometimes Gram stain and sensibility test.
- The **culture sensitivity** results came sensitive for the following antibiotics: Azithromycin, Ciprofloxacin, and Chloramphenicol. **The resistance** is to Tetracycline, Doxycycline, and Sulfamethoxazole _Trimethoprim. The Lab's teams keep monitoring the stool culture sensitivity, and resistance to antibiotics.
- The laboratory team is handling the specimens and waste management according to infection control standards.



³ [gtfcc-cholera-outbreak-response-field-manual](https://www.gtfcc.org/gho/2014/10/10/gtfcc-cholera-outbreak-response-field-manual)

Epi Week	Governorate	District	Samples Collected on current week	Stool Culture Positive	Stool Culture Negative
W41	Idleb	Ariha	12	4	8
		Harim	66	28	31
		Idleb	18	7	11
		Jisr-Ash-Shugur	5	1	3
	Aleppo	A'zaz	20	4	13
		Afrin	81	29	46
		Al Bab	4	2	2
		Jarablus	158	40	103
		Jebel Saman	11	6	5
	Total			375	121

3. WASH:

Targeted response including water quality testing at household level being conducted for identified cases. All WASH activities are being implemented in close coordination with WASH cluster & Cholera taskforce.

Jarablus District:

- Jarablus: The city of Jarablus is fed by two water stations, and the local council supervises these stations and the chlorination of water (sterilization).
- Samples were collected from the stations, and results came safe and potable water with a percentage within the acceptable range of chlorine.
- Random samples were taken from houses fed from the network and the water was not safe for drinking.
- The water and sanitation services in Zughra camp were investigated, and it was found that the water and sanitation services in the camp are good (previously investigated 3 times).

Azaz District:

- The number of pills distributed: 60 sachets (Aqua tabs).
- Bohorta camp/Akhtarín: camp code CP001968.
- The water sources are healthy and non-contaminated.

- Tal Maled / Marea: The drinking water is contaminated; the water source is a private well.
- Kafra/Souran: The water sources are safe to drink and not polluted.
- Samples were collected from all sources of drinking water (nutrition well, network, tanks, and the patients' houses).

Afrin District:

- Bablet village / Afrin: the water sources are safe and there is no contamination.
- Qrizhel village / Afrin: the water sources are safe and there is no contamination.
- Maabatli sawmill camp: camp code: CP001844.
- Drinking water is safe and there is no contamination.
- Al-Qastal/Sharan: The drinking water is safe and there is no contamination.
- Samples were collected from all drinking water sources (a feeding well, network, tanks, and the patients' houses).
- o Note: Several new cases appeared in the Muhammadiyah camp, but the investigation was not carried out, because the water sources are contaminated and unsafe for drinking after conducting several tests.

Al-Bab District:

- Qabasin/Al-Bab: The sources of drinking water are safe and there is no contamination.
- Samples were collected from all sources of drinking water (nutrition well, network, tanks, and patients' houses).

Harim District:

- Al-Rahmeh Camp, camp code CP000171
- Free Kafr Nabouda camp / Qah: camp code CP000321.
- Sabiron camp/Harem: camp code CP000258.
- Al-Tayeb camp/ Dana: camp code CP002132.
- Samples were taken from all sources of drinking water (the main well, network, tanks, and patients' houses) and the water sources were safe for drinking. Where local organizations provide water and sanitation services in these camps.

Idleb District:

- Idleb: The drinking water is safe and non-contaminated. (The investigation was conducted twice in Idleb).
- Ram Hamdan: The drinking water is not suitable for drinking at household level. As for the main station, the water was drinkable. There is no chlorination (sterilization) within the station.

Ariha District:

- Kafr Najd: The drinking water is safe.
- Kafr lata: The drinking water is safe.
- Samples were collected from all sources of drinking water (nutrition well, network, tanks, and the patients' houses).

Notes

- Most areas depend mainly on sewage water to irrigate farms.
- Limited use of ice water (from external sources) because the weather started to be cooler.

Challenges

- Conflict between armed groups in northwestern Syria last week, which led to negatively affected the access of cases to the health facilities.
- Many patients are self-discharged from the hospital, especially women, because of the embarrassment of their frequent need to go to the toilet.
- People are afraid to go to the hospital for other complaints because of their fear of getting Cholera infection, where there is still a lack of correct information about the disease and its transmission ways.
- Detecting and reporting the cases in more than one place may cause duplication in the data.
- Many patients refuse to give samples and some of them escape from the hospitals.
- Continuous random use of antibiotics will increase bacterial resistance.
- Some doctors refuse to manage dehydrated children, which is still a challenge due to their believe that managing children requires a pediatrician, who may not be available in the health facility.
- Continues movements of population.
- No Vibrio Cholera O139, O1 Antisera so far to identify the vibrio serotype.

Recommendations

- Strengthening Surveillance and initiate active case search.
- Laboratory support with consumables and supplies.
- Daily updates, and weekly situation report.
- Enhancement coordination mechanisms with WHO and Taskforce members.
- Defining the potential sources of Cholera death reporting.