Northwest of Syria Cholera Outbreak

Situation Report No.32
Epidemiological Week - 18 (30 April – 6 May 2023)

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 **71,483 suspected** cases (**31,712** in Aleppo governorate, **42,669** in Idleb governorate) including **612 confirmed** have been reported by EWARN team since 16 September, including **23 deaths** case.

- The highest number of cases were reported in Harim district (22,255) and Idleb district (12,342) in Idleb governorate, then Azaz district (7,839), Jebel Saman district (7,446) in Aleppo governorate.
- 12,888 total suspected cases (including 707 new cases in Epi week 18 - 2023) were reported from camps.
- 57.91 % Of the suspected cases are in the age group <5 years. Males are 52% of the total and females are 48%.
- Since the outbreak started, surveillance and reporting from facilities are being supported and strengthened. For better understanding of the background and context, please read previous sitreps.
- Line list is shared with WHO and WASH team to aid Targeted response at a household level being conducted for identified cases.
- Active case search is ongoing, especially in the camps.

Suspected Cases: 74,381
Confirmed Cases: 612
Cholera Deaths: 23
Case Fatality Rate: 0.03%
NWS Attack Rate: 1.61%

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Situation Updates

1. Epidemiology

Updated case definition: A resident of outbreak areas with sudden onset of acute watery diarrhea with or without vomiting.

In Epi week 18 - 2023, **2917 suspected cases of cholera were reported**. The affected governorates are Aleppo (1397 suspected cases, 6 confirmed), and Idleb (1520 suspected cases, 1 confirmed).

The age group less than 5 reported 56.35%.

There were no death cases in the epi week 18.

Dana subdistrict in Idleb governorate reported the highest number of cases (541), in contrast Azaz subdistrict reported the highest number in Aleppo governorate (346).
The overall sex distribution of the suspected cases is 52% Male, and 48% Female.

100% of the line listed cases were presented as Acute watery Diarrhea, 20% with vomiting, 4% as rice watery diarrhea, and 8% were dehydrated.

19% of the total cases live in camps (11740), and 81% out of camps (49887). (7446 of the total line listed cases are unknown)

As the outbreak progresses, sensitivity should be increased by including smaller age groups and mild/moderate symptom 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 is considered a suspected cholera case. The age group less than 5 years was 44.69%.
### Cases Distribution Subdistrict Wise

#### Epi Week Governorate District Date of Onset Population New cases Cumulative Cases New Death Cumulative Deaths Case Fatality Rate Incidence Rate Attack Rate

<table>
<thead>
<tr>
<th>Epi Week</th>
<th>Governorate</th>
<th>District</th>
<th>Date of Onset</th>
<th>Population</th>
<th>New cases</th>
<th>Cumulative Cases</th>
<th>New Death</th>
<th>Cumulative Deaths</th>
<th>Case Fatality Rate</th>
<th>Incidence Rate</th>
<th>Attack Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to W18 - 2023</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Idleb</td>
<td></td>
<td></td>
<td>20-Sep</td>
<td>185,668</td>
<td>217</td>
<td>4979</td>
<td>0</td>
<td>1</td>
<td>0.02%</td>
<td>116.9</td>
<td>2.68%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>6-Sep</td>
<td>1,586,820</td>
<td>860</td>
<td>22255</td>
<td>0</td>
<td>9</td>
<td>0.04%</td>
<td>54.2</td>
<td>1.40%</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>14-Sep</td>
<td>713,933</td>
<td>388</td>
<td>12342</td>
<td>0</td>
<td>3</td>
<td>0.02%</td>
<td>54.3</td>
<td>1.73%</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>25-Sep</td>
<td>310,973</td>
<td>55</td>
<td>3093</td>
<td>0</td>
<td>1</td>
<td>0.03%</td>
<td>17.7</td>
<td>0.99%</td>
</tr>
<tr>
<td>Aleppo</td>
<td>A’zaz</td>
<td>9-Sep</td>
<td>648,600</td>
<td>512</td>
<td>7839</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
<td>78.9</td>
<td>1.21%</td>
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<tr>
<td></td>
<td>Afrin</td>
<td>21-Sep</td>
<td>467,090</td>
<td>276</td>
<td>6522</td>
<td>0</td>
<td>3</td>
<td>0.05%</td>
<td>59.1</td>
<td>1.40%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Al Bab</td>
<td>17-Sep</td>
<td>339,812</td>
<td>20</td>
<td>3736</td>
<td>0</td>
<td>2</td>
<td>0.05%</td>
<td>5.9</td>
<td>1.10%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jarablus</td>
<td>12-Sep</td>
<td>121,938</td>
<td>301</td>
<td>6169</td>
<td>0</td>
<td>4</td>
<td>0.06%</td>
<td>246.8</td>
<td>5.06%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jebel Saman</td>
<td>10-Sep</td>
<td>251,785</td>
<td>288</td>
<td>7446</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
<td>114.4</td>
<td>2.96%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td>4,626,619</td>
<td>2917</td>
<td>74381</td>
<td>0</td>
<td>23</td>
<td>0.03%</td>
<td>63.0</td>
<td>1.61%</td>
<td></td>
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</tbody>
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Laboratory:

- **In Epi week 18-2023**, the total number of stool specimens or rectal swabs is **118**, (60 in Aleppo – 6 confirmed), (58 in Idleb – 1 confirmed).

- A **cumulative of 4572 samples were collected** since the start of the outbreak (6% of overall line listed cases), of which **612 have tested positive by stool culture**. The **total positivity rate in NWS is 13.6%**.

- The **Total number of negative cases by stool culture is 3901**, and the remaining 59 are still pending.

- Isolation and identification of V. cholera serogroup O1 or O139 by a culture of a stool specimen remain the gold standard for laboratory diagnosis.

- Currently, at EWARN laboratories (Idleb, Afrin, Jarabulus, Raqqa, and Tal-Abiad) Fecal specimens are subcultured onto selective and nonselective media, including Nutrient agar and TCBS agar, for detection of V. cholera O1.

- Suspicious, oxidase-positive isolates are serotyped in polyvalent antisera raised against the O1 Antigen.

- Antimicrobial-sensitivity testing is performed to detect resistance.

- The **culture sensitivity results came sensitive for the following antibiotics**: Azithromycin, Imipenem, Chloramphenicol, Ciprofloxacin, and Norfloxacin.

- The resistance is to Tetracycline, Doxycycline, and Sulfamethoxazole Trimethoprim.

- The laboratory team handles the specimens and waste management according to infection control standards.

- The **sample collection protocol is to collect stool samples in 7% of the total suspected cholera cases per subdistrict and 5 samples from the admitted cholera suspected cases in the CTC/CTU per week**.
During epi week 18, EWARN received 54 RDT results from the CTC/CTUs, 2 of them were positive for Cholera.

The total of RDT tests starting from epi week 5 reached 781, and the total positive is 16.

The positivity rate of RDTs, from epi week 5 – 2023 up to epi week 18 – 2023 is 2 %. But the positivity rate from the beginning of cholera outbreak up to epi week 18 – 2023 is 4.8 %.

- For children under 5 years of age with a stool culture negative for cholera:
  In epi week 18, 16 tests were carried out to detect Rotavirus (2 of them were positive), and 12 tests to detect Adenovirus (all of them were negative).

- The total number of collected samples for Rotavirus reached 285 (95 of them were positive), while all of the samples for Adenovirus (182) were negative.
<table>
<thead>
<tr>
<th>Epi Week</th>
<th>Governorate</th>
<th>District</th>
<th>RDT+</th>
<th>RDT-</th>
<th>Postivity Rate for RDT</th>
<th>Stool Culture Positive</th>
<th>Stool Culture Negative</th>
<th>Postivity Rate for Culture</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to W17 - 2023</td>
<td>Aleppo</td>
<td>Afrin</td>
<td>25</td>
<td>74</td>
<td>25.3%</td>
<td>144</td>
<td>687</td>
<td>17.3%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Al Bab</td>
<td>0</td>
<td>6</td>
<td>0.0%</td>
<td>9</td>
<td>209</td>
<td>4.1%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A’zaz</td>
<td>0</td>
<td>23</td>
<td>0.0%</td>
<td>24</td>
<td>163</td>
<td>12.8%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Jarablus</td>
<td>2</td>
<td>41</td>
<td>4.7%</td>
<td>55</td>
<td>410</td>
<td>11.8%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Jebel Saman</td>
<td>3</td>
<td>119</td>
<td>2.5%</td>
<td>31</td>
<td>390</td>
<td>7.4%</td>
</tr>
<tr>
<td></td>
<td>Idleb</td>
<td>Ariha</td>
<td>0</td>
<td>65</td>
<td>0.0%</td>
<td>21</td>
<td>444</td>
<td>4.5%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Harim</td>
<td>17</td>
<td>543</td>
<td>3.0%</td>
<td>265</td>
<td>989</td>
<td>21.1%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Idleb</td>
<td>5</td>
<td>136</td>
<td>3.5%</td>
<td>42</td>
<td>474</td>
<td>8.1%</td>
</tr>
<tr>
<td></td>
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<td>Jisr-Ash-Shugur</td>
<td>0</td>
<td>28</td>
<td>0.0%</td>
<td>21</td>
<td>137</td>
<td>13.3%</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td>52</td>
<td>1035</td>
<td>4.8%</td>
<td>612</td>
<td>3903</td>
<td>13.6%</td>
</tr>
</tbody>
</table>

Classification of Cholera Cases by Sub-district

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2. **WASH:**

The WASH team works closely and in high coordination with RRT (Rapid Response Team), formed from staff working in EWARN (DLOs, FLOs...). The team, after receiving any alert, focuses on the investigation of WASH services in the hotspot areas. The investigation includes:

1. Taking samples from drinking water resources (main stations, wells, water trucks, water taps... etc.).
2. Investigate sewage networks and septic tanks’ locations and other sanitation services.
3. Identify Hygienic practices... etc.
4. Assessing agriculture markets (Identify irrigation water and resource of agricultural products if applicable).

ACU team conducted 3 investigations included taking 41 samples from different points:

- **Harim** Community / Harim Sub-district / Harim District / Aleppo governorate:
  - 15 samples were taken, one of the samples was contaminated (Harim’s Spring).
- **Azaz** Community / Azaz Sub-district / Azaz District / Aleppo governorate:
  - 18 samples were taken; one of samples was contaminated (taken from tank of house)
- **Daret Azza Community** / Daret Azza Sub-district / Jebel Saman District / Aleppo governorate:
  - 8 samples were taken; all samples taken were uncontaminated.

[Full Investigation Reports](#)
Actions taken

- The EWARN team is currently conducting active surveillance in the most important health facilities in northwest Syria (25 HFs). During the visit, the team reviews with the health facility staff the records to ensure the reported cases, also discusses the challenges, and recommendations, and collaborates to treat the problems.

- The EWARN team is currently receiving the RDT results from CTC/CTUs, and sharing them.

- To determine the causes of acute watery diarrhea in children under 5 years (the children have a negative cholera result), the EWARN lab is conducting Rotavirus and Adenovirus rapid diagnostic tests (RDTs).

- The response teams conducted an expanded investigation of the deaths that occurred since the beginning of the outbreak (23 deaths), where some possible causes were identified, and the teams made appropriate recommendations.

- ACU teams conduct regular awareness sessions about Cholera, prevention, and control measures for local authorities and affected people during the investigation. Besides, the result of investigations is shared with the WASH cluster and acting organization in the area to take immediate action.