South Sudan

Integrated Disease Surveillance and Response (IDSR)

Annexes W30 2018 (Jul 23 – Jul 29)



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Measles

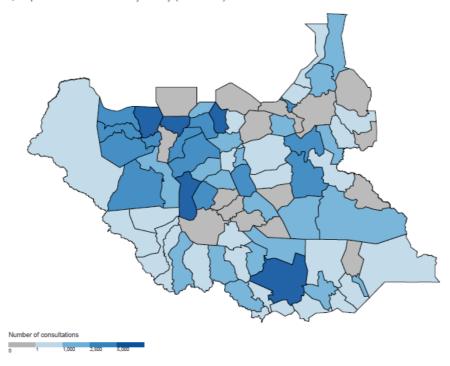
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Sources of data

- 1. Weekly IDSR Reporting Form
- 2. Weekly EWARS Reporting Form

Access and Utilization | Map of consultations by county

Map 1 | Map of total consultations by county (W30 2018)



| W30 | 2018 | | | | |
|---------|--|--|--|--|--|
| 21,383 | 375,326 | | | | |
| 23,940 | 461,971 | | | | |
| 13,958 | 326,752 | | | | |
| 16,651 | 349,824 | | | | |
| 21,600 | 710,634 | | | | |
| 12,089 | 405,081 | | | | |
| 7,962 | 492,828 | | | | |
| 5,912 | 182,636 | | | | |
| 7,134 | 262,657 | | | | |
| 9,662 | 349,583 | | | | |
| 140,291 | 3,917,292 | | | | |
| | 21,383 23,940 13,958 16,651 21,600 12,089 7,962 5,912 7,134 9,662 | | | | |

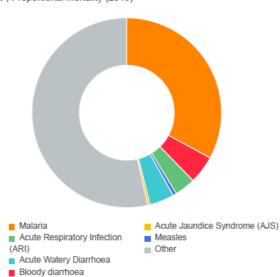
The total consultation in the country since week 1 of 2018 is 3,917,292 by hub, Kwajok registered the highest number of consultations as indicated in the table above. The total number of consultations by county is shown in the map above. See the key for more information.





Proportional mortality

Figure 1 | Proportional mortality (2018)

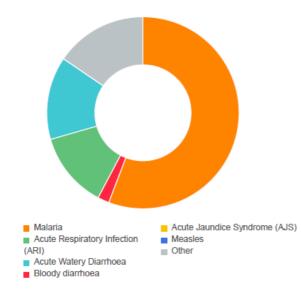


| Syndrome | W30 | | 2018 | |
|---------------------|----------|-------------|----------|-------------|
| | # deaths | % mortality | # deaths | % mortality |
| Malaria | 8 | 100.0% | 158 | 32.9% |
| ARI | 0 | 0.0% | 17 | 3.5% |
| AWD | D 0 | 0.0% | 20 | 4.2% |
| Bloody diarrhoea | | | 23 | 4.8% |
| AJS | 0 | 0.0% | 2 | 0.4% |
| Measles | 0 | 0.0% | 3 | 0.6% |
| Other | 0 | 0.0% | 257 | 53.5% |
| Total deaths | 8 | 100% | 480 | 100% |

Figure 1, above shows the proportional mortality for 2018, with malaria being the main cause of mortality accounting for 32.9% of the deaths since week 1 of 2018, followed by bloody diarrhoea, and acute watery diarrhoea.

Proportional morbidity

Figure 2 | Proportional morbidity (2018)



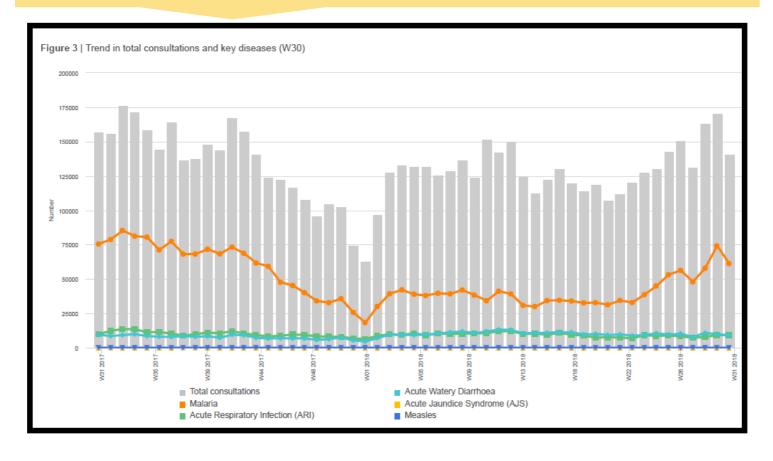
| Syndrome | W30 | | 2018 | |
|---------------------|---------|-------------|-----------|-------------|
| | # cases | % morbidity | # cases | % morbidity |
| Malaria | 61,263 | 68.5% | 1,225,295 | 55.8% |
| ARI | 9,194 | 10.3% | 281,054 | 12.8% |
| AWD | 8,923 | 10.0% | 307,213 | 14.0% |
| Bloody diarrhoea | 934 | 1.0% | 42,522 | 1.9% |
| AJS | 1 | 0.0% | 185 | 0.0% |
| Measles | 12 | 0.0% | 367 | 0.0% |
| Other | 9,157 | 10.2% | 339,390 | 15.5% |
| Total cases | 89,484 | 100% | 2,196,026 | 100% |

Figure 2, indicates the top causes of morbidity in the country, with malaria being the leading cause of morbidity 1,225,295 (55.8%) followed by ARI, AWD and ABD respectively since week 1 of 2018. refer to the figure above for more information.

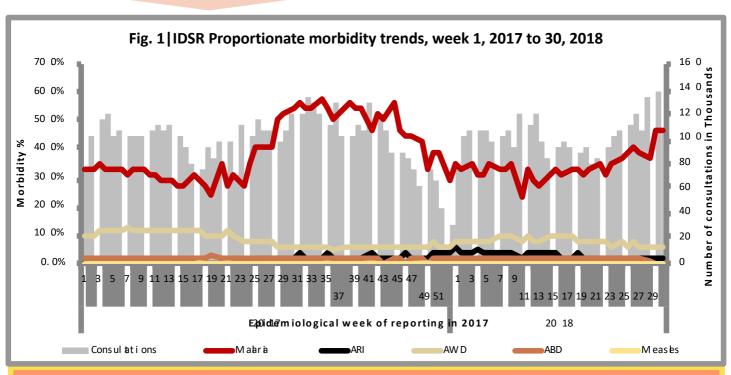




Trend in consultations and key diseases



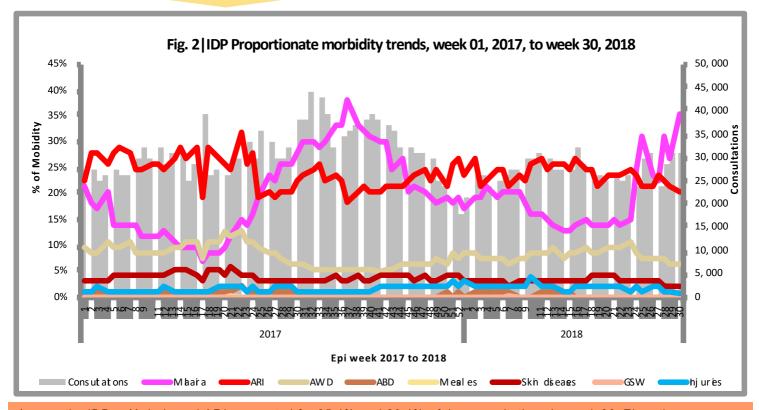
IDSR Proportionate morbidity trends - in relatively stable states



In the relatively stable states, malaria is the top cause of morbidity accounting for 46.1% of the consultations in week 30 (representing an decrease from 36% in week 29).

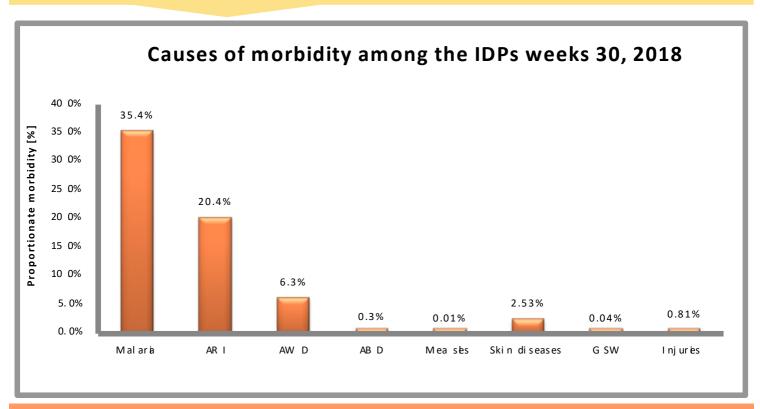






Among the IDPs, Malaria and ARI accounted for 35.4% and 20.4% of the consultations in week 30. The other significant causes of morbidity in the IDPs includes AWD, Skin diseases, and Injuries.

IDP Proportionate Morbidity trends - in displaced Population

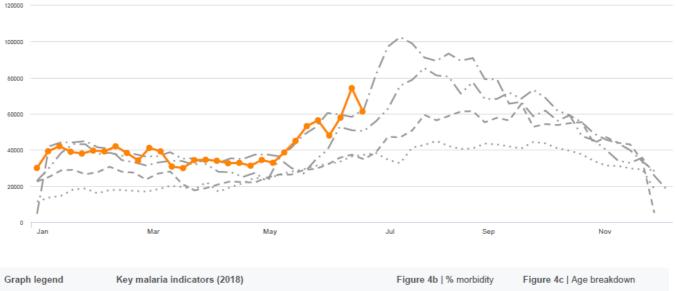


The top causes of morbidity in the IDPs in 2018 include ARI, Malaria, AWD, Skin diseases, Injuries and ABD.



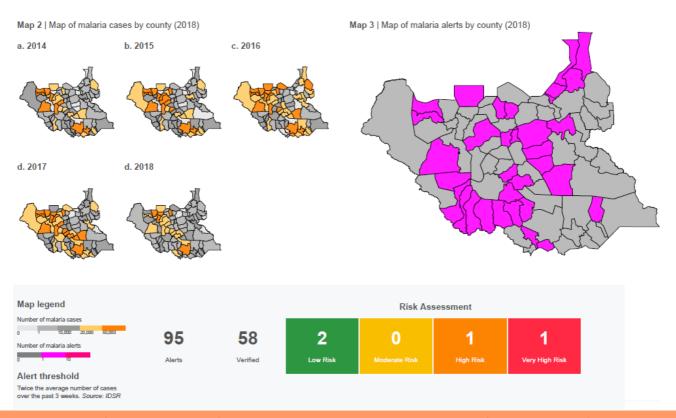
Malaria | Trends over time

Figure 4a | Trend in number of cases over time (South Sudan)



Malaria is the top course of Morbidity in the country, a total of 1,225,295 cases with 158 deaths registered since week 1 of 2018. malaria trend for week 30 of 2018 is above 2014, 2015 and 2016 as shown in the figure 4a, above.

Malaria | Maps and Alert Management



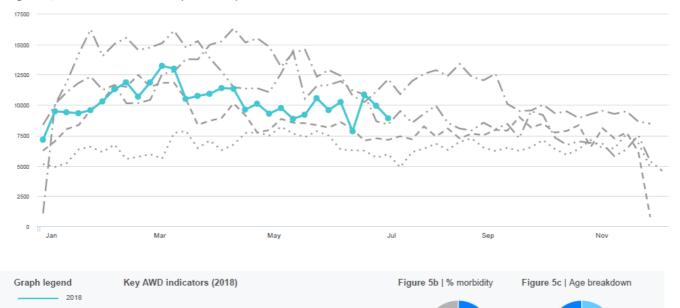
Since the beginning of the year, a total of 95 malaria alerts have been triggered, 58 of those were verified. The Maps above indicate the location reporting malaria alerts from 2014, 2015, 2016, 2017, and 2018.





Acute Watery Diarrhoea | Trends over time

Figure 5a | Trend in AWD cases over time (South Sudan)



AWD is one of the top causes of morbidity in the country with 307,213 cases reported since week 1 of 2018 including

97

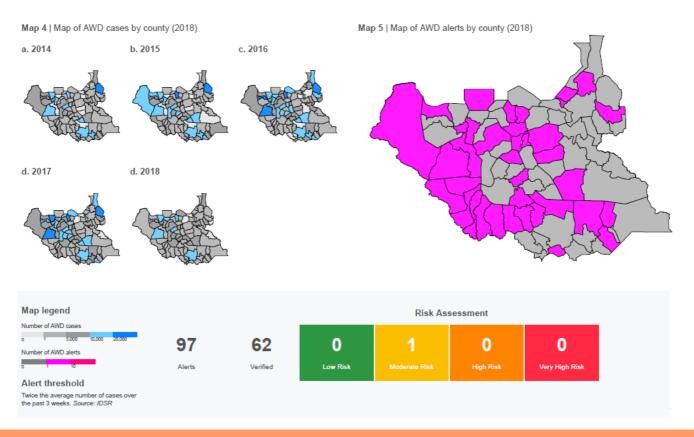
Acute Watery Diarrhoea | Maps and Alert Management

307,213

2016

20

20 deaths. AWD trend for 2018 is above 2014, 2015 and 2016, as shown in figure 5a, above.



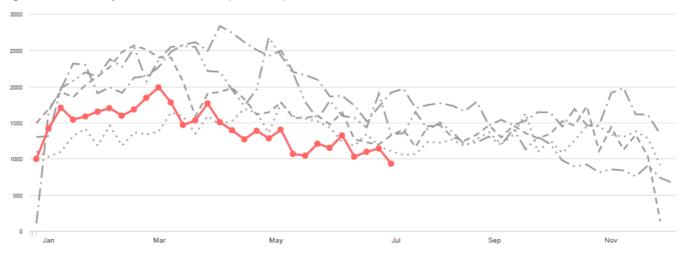
The number of AWD alerts triggered since week 1 of 2018 is 97, out of which 62 were verified. Maps above highlight the areas reporting AWD alerts from 2014 to 2018.





Acute Bloody Diarrhoea | Trends over time

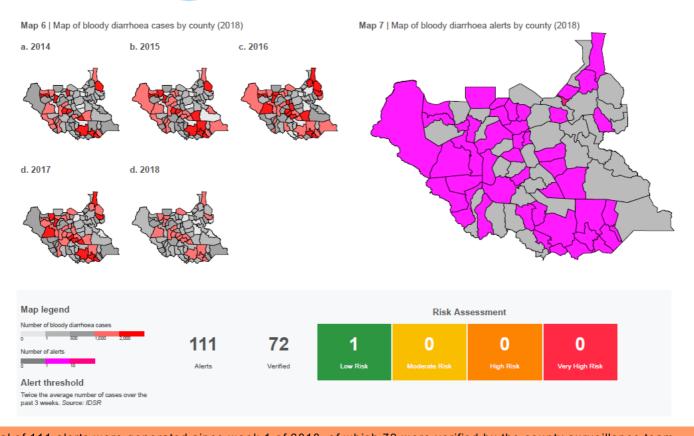
Figure 6a | Trend in bloody diarrhoea cases over time (South Sudan)





Since week 1 of 2018, a total of 42,522 cases of ABD have been reported country wide including 23 death. ABD trend for 2018 is below 2014, 2015, 2016, and 2017 respectively. Refer to figure 6a, above.

Acute Bloody Diarrhoea | Maps and Alert Management

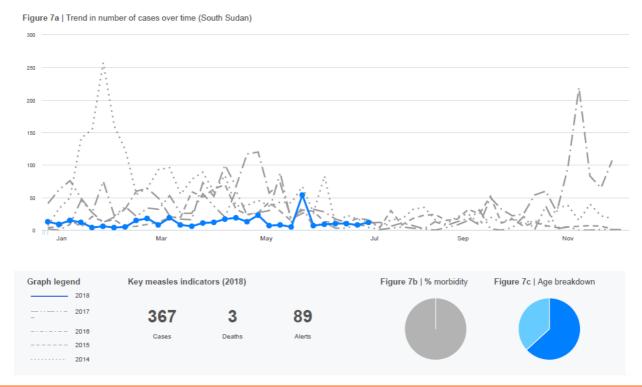


Total of 111 alerts were generated since week 1 of 2018, of which 72 were verified by the county surveillance team. Maps indicating areas triggering alerts since 2014 to 2018 are shown above.



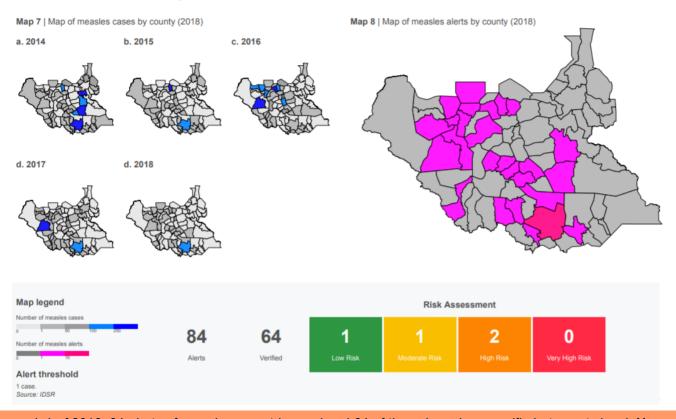


Measles | Trends over time



Since the beginning of 2018, at least 367 suspect measles cases including 3 death (CFR 0.82%) have been reported. Of these, 268 suspect cases have undergone measles case-based laboratory-backed investigation with 164 samples collected out of which 26 measles IgM positive cases; 57 clinically confirmed cases; and 3 cases confirmed by epidemiological linkage.

Measles | Maps and Alert Management



Since week 1 of 2018, 84 alerts of measles were triggered and 64 of those have been verified at county level. Maps of areas raising alerts from 2014 to 2018 are shown above.





Table 6 | Proportional mortality by cause of death in IDPs W30 2018

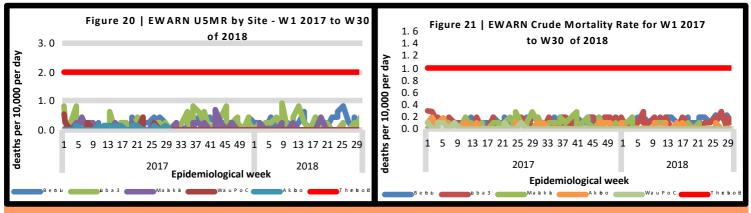
| Cause of Death by IDP site | Bei | ntiu | Jub | a 3 | Total deaths | | |
|----------------------------|------|------|------|------|-----------------|--|--|
| | <5yr | ≥5yr | <5yr | ≥5yr | | | |
| | S | S | S | S | | | |
| Hepatitis B | | 1 | | | 1 | | |
| malaria | | 3 | 1 | | 4 | | |
| pneumonia | | | 1 | | 1 | | |
| TB/HIV/AIDS | | 1 | _ | | 1 | | |
| Chronic diseases | | 1 | | | 1 | | |
| Unkown | | 2 | | | 2 | | |
| GSW | | 1 | | | 1 | | |
| Hypoglycemia | | 1 | | | 1 | | |
| liver cirloris | | 1 | | 1 | 1 | | |
| Hypoxic Ischemic | | | | 1 | | | |
| Encephalopathy | 1 | | | | 1 | | |
| Total deaths | 1 | 10 | 2 | 1 | 14 | | |

Among the IDPs, mortality data was received from Bentiu PoC & UN House PoC in week 30. (Table 6). A total of 14 deaths were reported during the week. Bentiu PoC report 11 deaths (78.5%) in the week. During the week, 3 (21.5%) deaths were recorded among children <5 years in (Table 6).

The causes of death during week 30 are shown in Table 6.







The U5MR in all the IDP sites that submitted mortality data in week 30 of 2018 is below the emergency threshold of 2 deaths per 10,000 per day (Fig. 20).

The Crude Mortality Rates [CMR] in all the IDP sites that submitted mortality data in week 30 of 2018 were below the emergency threshold of 1 death per 10,000 per day (Fig. 21).

Mortality in the IDPs - Overall mortality in 2018

Table 7 | Mortality by IDP site and cause of death as of W30, 2018

| IDP site | acute watery diarrhoea | cancer | MSD CSW | Gunshot wound | Heart Failure | Kala-Azar | malaria | Meningitis | perinatal death | pneumonia | Rabies | SAIN | Sepsis | TB/HIV/AIDS | Trauma | HIV/AIDS | TB | Others | Grand Tota |
|-----------------------------|---------------------------|--------|---------|---------------|---------------|-----------|---------|------------|-----------------|-----------|--------|------|--------|-------------|--------|----------|----|--------|------------|
| Bentiu | 7 | 1 | 2 | 2 | 1 | 2 | 24 | 3 | 24 | 10 | 1 | 13 | 16 | 13 | 1 | 19 | 7 | 186 | 332 |
| Juba 3 | 1 | 1 | | | 4 | | 10 | | | 5 | | 2 | | 1 | | 6 | 7 | 52 | 89 |
| Malakal | | 1 | | | 3 | 1 | | | 1 | 1 | | | | | | | 2 | 17 | 26 |
| Akobo | | | | 1 | | 2 | 4 | | | 2 | | 1 | 2 | 1 | 1 | | | 9 | 23 |
| Wau PoC | | | | | | | 1 | | | | | | | | | | | o | 1 |
| Grand Total | 8 | 3 | 2 | 3 | 8 | 5 | 39 | 3 | 25 | 18 | 1 | 16 | 18 | 15 | 2 | 25 | 16 | 264 | 471 |
| Proportionate mortality [%] | 2% | 1% | 0% | 1% | 2% | 1% | 8% | 1% | 5% | 4% | 0% | 3% | 4% | 3% | 0% | 5% | 3% | 56% | 100% |

A total of 457 deaths have been reported from the IDP sites in 2018 Table 7.

The top causes of mortality in the IDPs in 2018 are shown in Table 7.



This bulletin is produced by the Ministry of Health with Technical support from WHO

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Notes

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The data has been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at http://ewars-project.org









