

South Sudan

Integrated Disease Surveillance and Response (IDSR)

Annexes W34 2018 (Aug 20 – Aug 26)



**World Health
Organization**
South Sudan



Ministry of Health
Republic of South Sudan

Access and Utilisation

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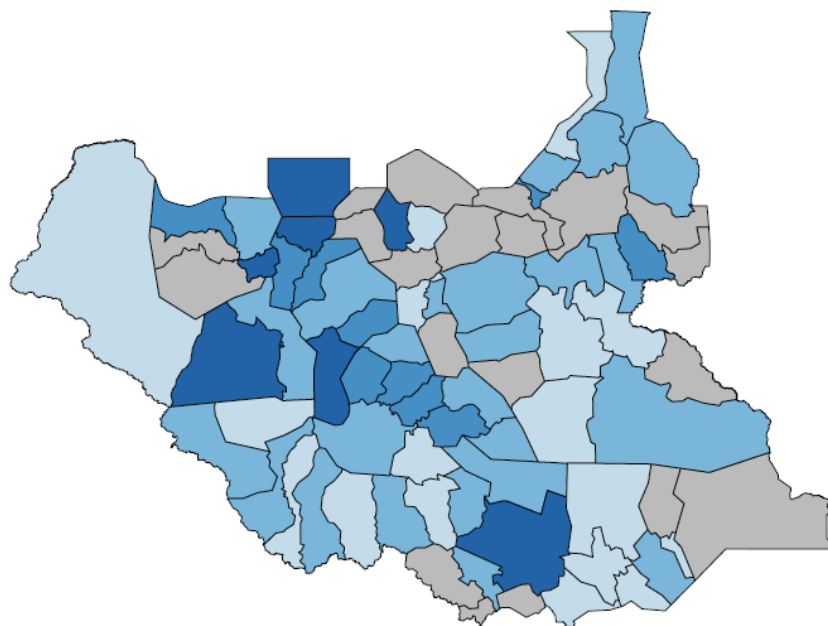
Slide 13 **Measles maps and alert management**

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 (W34 2018)

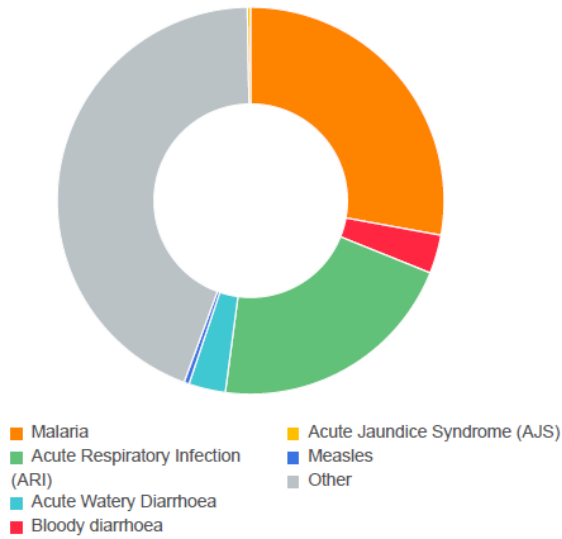


Hub	W34	2018
Aweil	16,371	434,546
Bentiu	11,686	527,622
Bor	8,097	376,585
Juba	9,798	402,082
Kwajok	36,124	873,228
Malakal	14,620	522,966
Rumbek	23,321	599,997
Torit	5,621	208,791
Wau	9,612	303,997
Yambio	11,849	397,293
South Sudan	147,099	4,647,107

The total consultation in the country since week 1 of 2018 is 4,647,107 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)

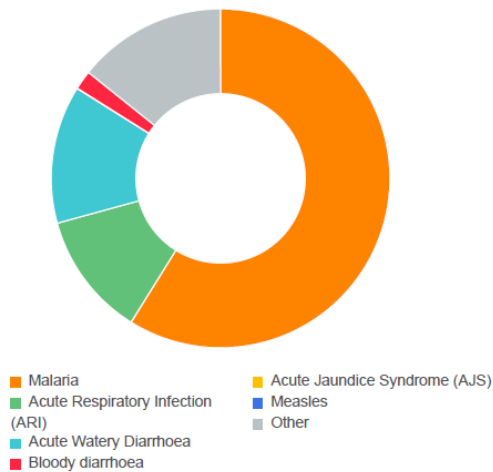


Syndrome	W34		2018	
	# deaths	% mortality	# deaths	% mortality
Malaria	5	2.6%	199	27.9%
ARI	133	69.6%	150	21.0%
AWD	0	0.0%	22	3.1%
Bloody diarrhoea	0	0.0%	23	3.2%
AJS	0	0.0%	2	0.3%
Measles	0	0.0%	3	0.4%
Other	53	27.7%	315	44.1%
Total deaths	191	100%	714	100%

Figure 1, above shows the proportional mortality for 2018, with malaria being the main cause of mortality accounting for 27.9% of the deaths since week 1 of 2018, followed by bloody diarrhoea, and acute watery diarrhoea.

Proportional morbidity

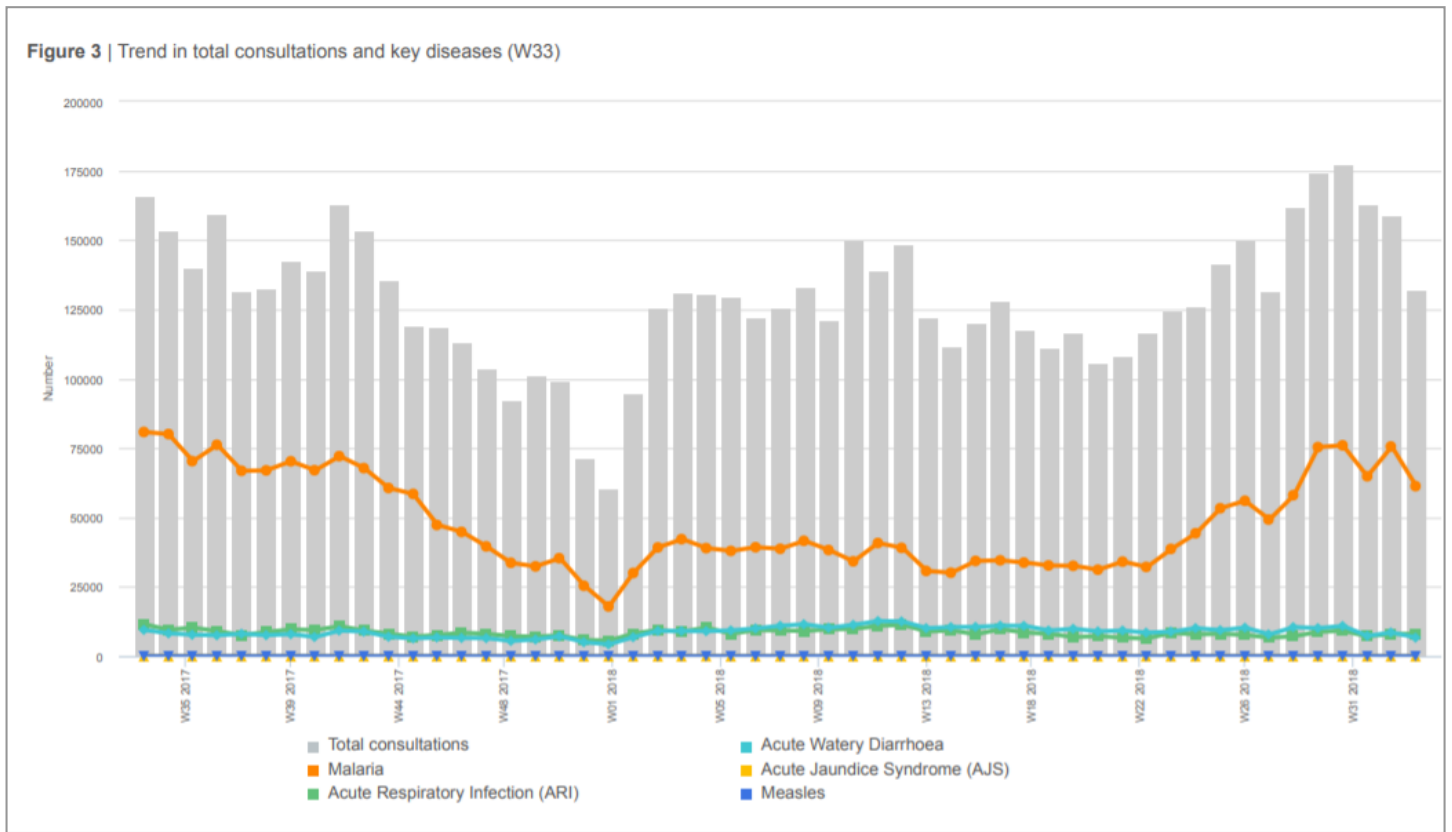
Figure 2 | Proportional morbidity (2018)



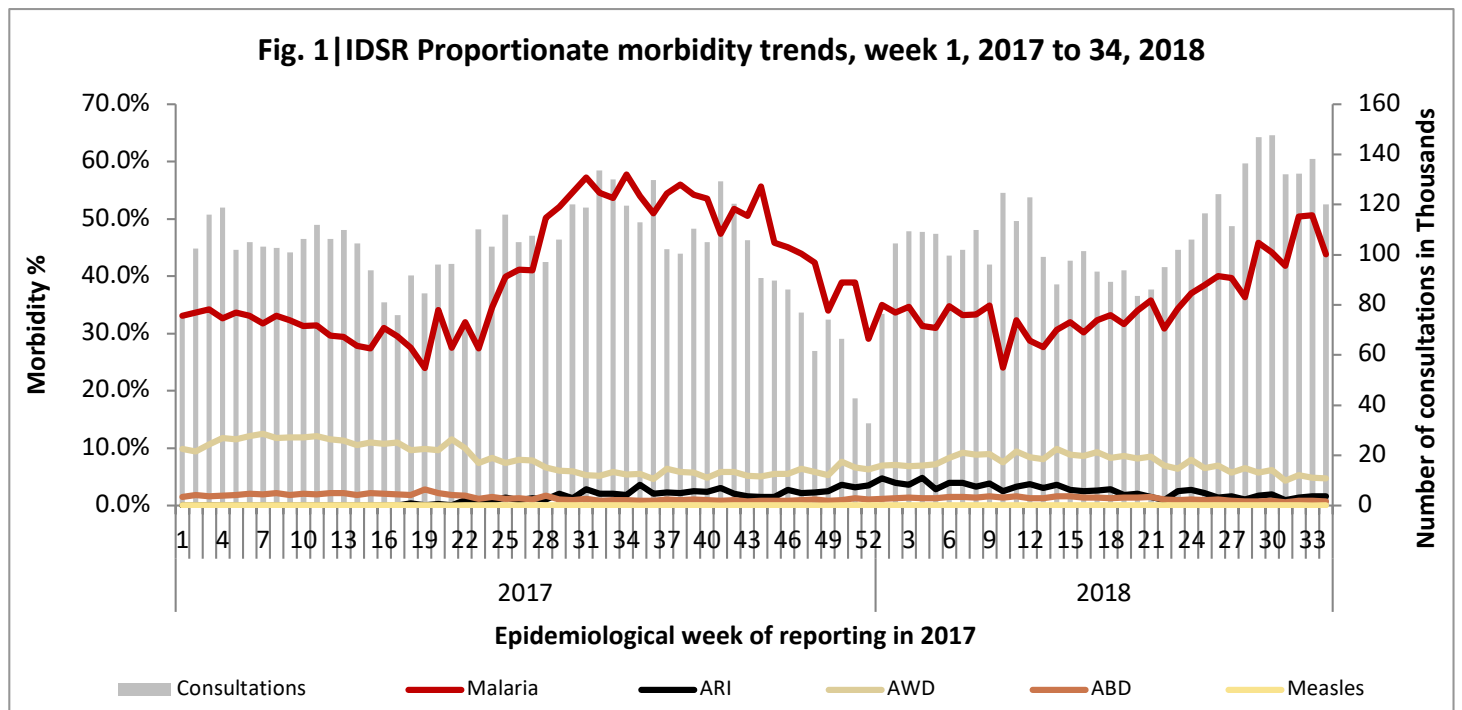
Syndrome	W34		2018	
	# cases	% morbidity	# cases	% morbidity
Malaria	61,577	71.7%	1,538,336	58.9%
ARI	7,369	8.6%	310,347	11.9%
AWD	7,271	8.5%	344,493	13.2%
Bloody diarrhoea	887	1.0%	47,621	1.8%
AJS	4	0.0%	195	0.0%
Measles	5	0.0%	391	0.0%
Other	8,734	10.2%	372,091	14.2%
Total cases	85,847	100%	2,613,474	100%

Figure 2, indicates the top causes of morbidity in the country, with malaria being the leading cause of morbidity 1,538,336 (58.9%) 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

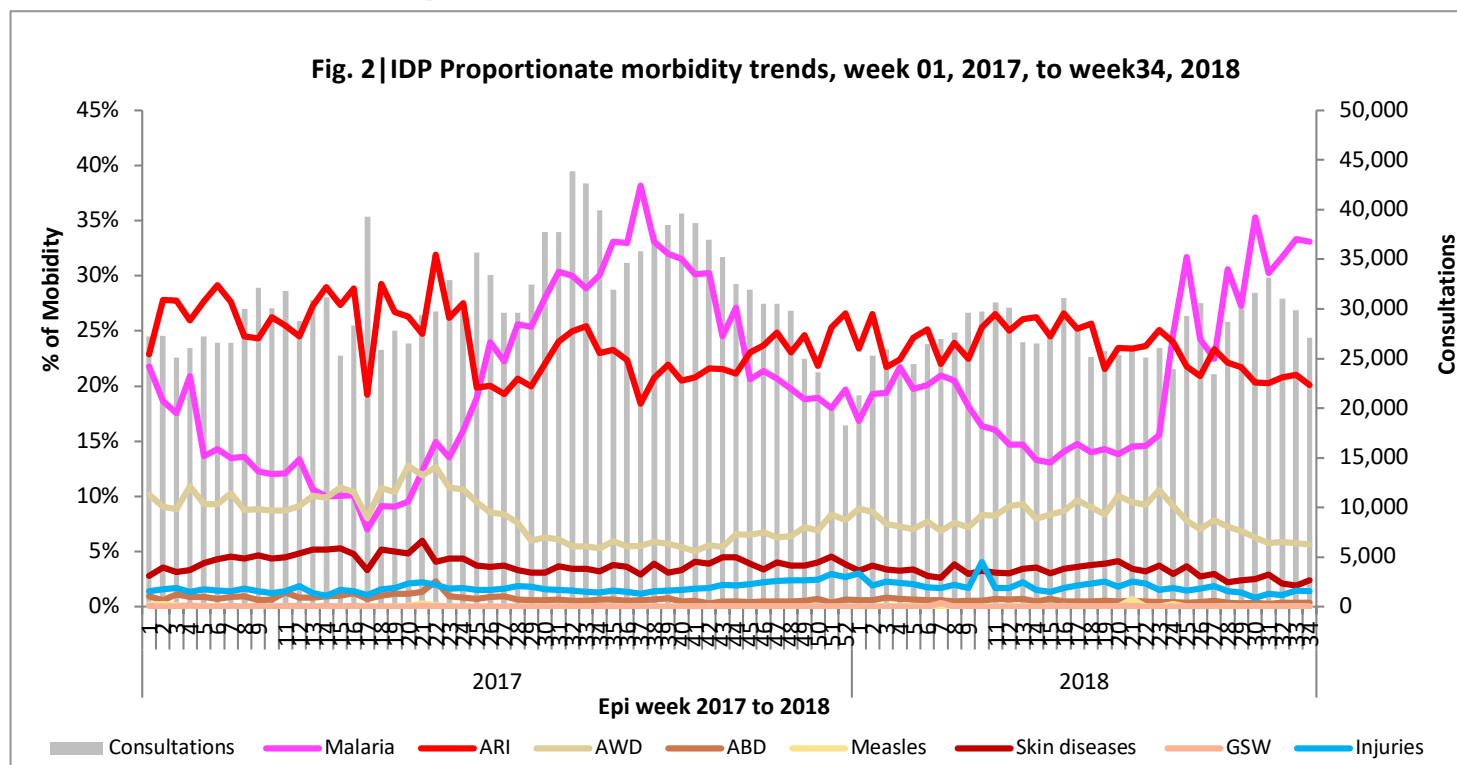


IDSR Proportionate morbidity trends - in relatively stable states



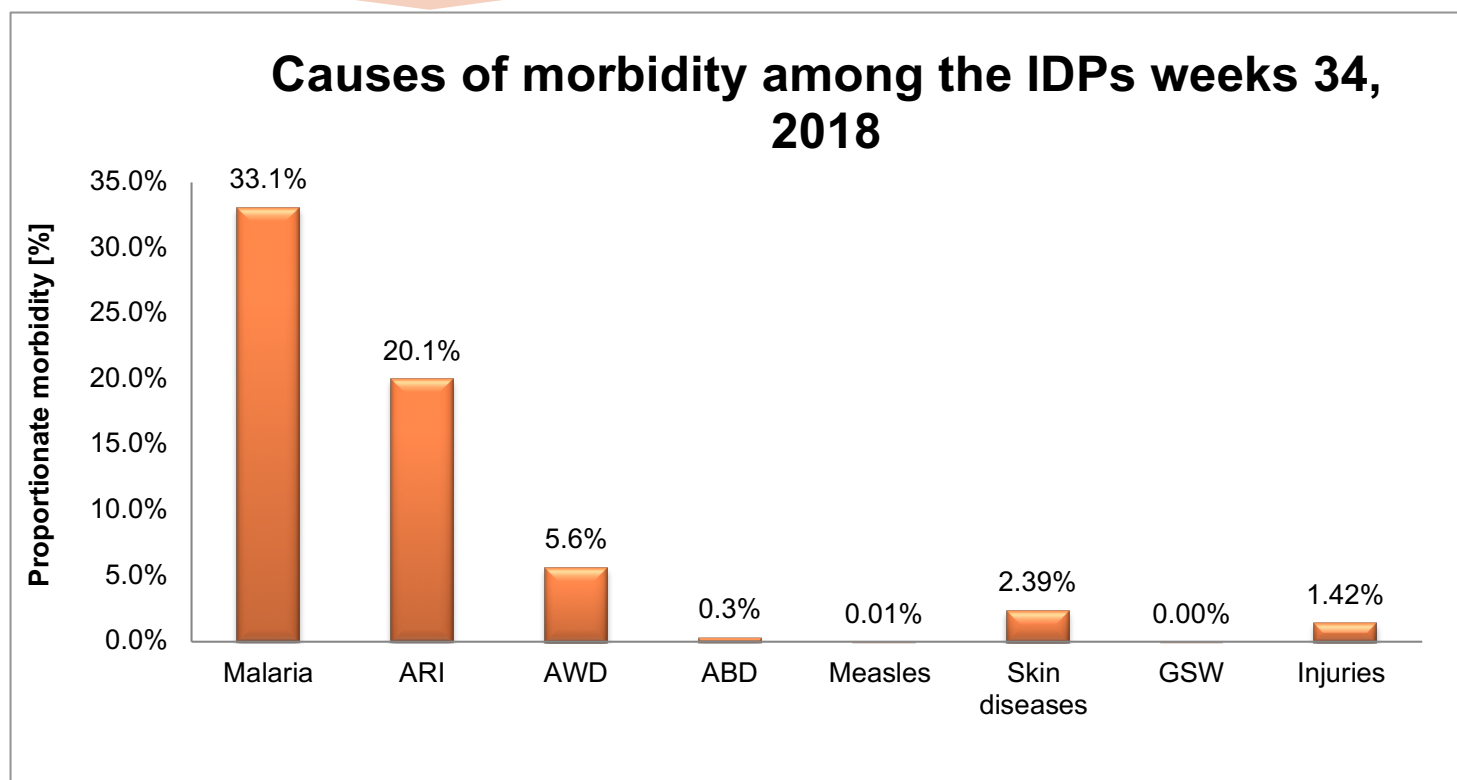
In the relatively stable states, malaria is the top cause of morbidity accounting for 43.8% of the consultations in week 34 (representing an decrease from 50.6% in week 33).

IDP Proportionate morbidity trends - in displaced population



Among the IDPs, Malaria and ARI accounted for 33.1% and 20.1% of the consultations in week 34. The other significant causes of morbidity in the IDPs includes AWD, Skin diseases, and Injuries.

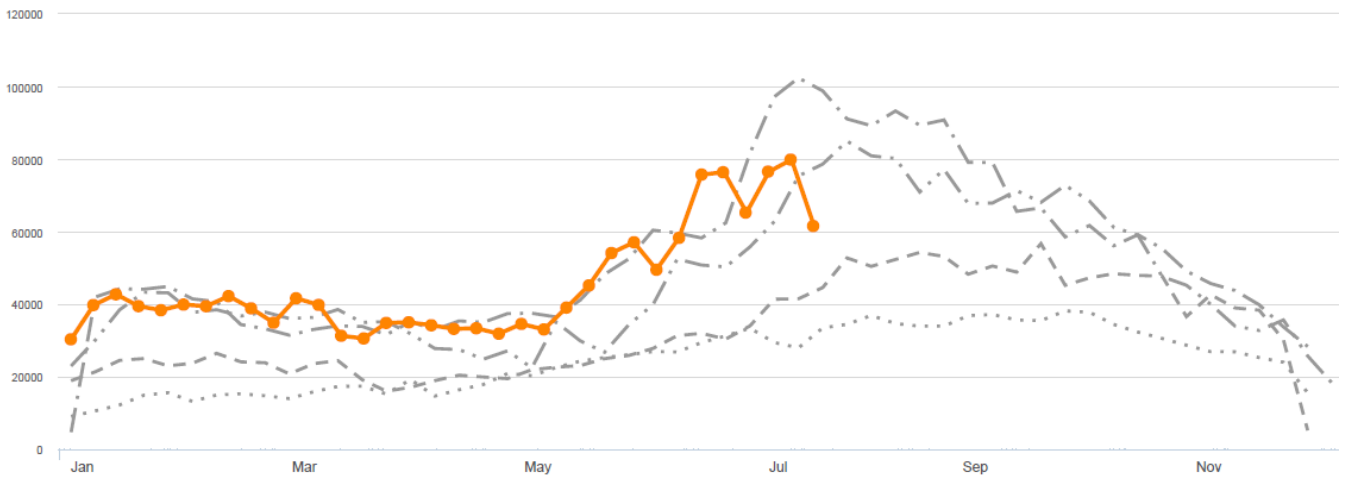
IDSR Proportionate morbidity trends - in displaced population



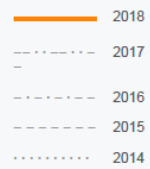
The top causes of morbidity in the IDPs in 2018 include ARI, Malaria, AWD, Skin diseases, Injuries and ABD.

Malaria | Trends over time

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



Graph legend



Key malaria indicators (2018)

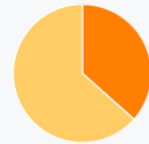
1,538,336 **199** **102**

Cases Deaths Alerts

Figure 4b | % morbidity



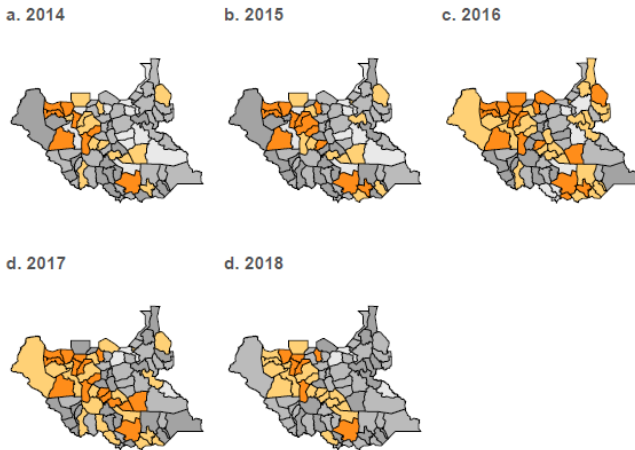
Figure 4c | Age breakdown



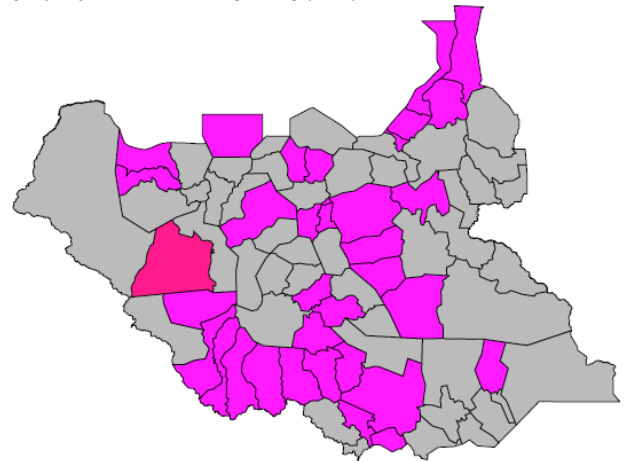
Malaria is the top course of Morbidity in the country, a total of 1,538,336 cases with 199 deaths registered since week 1 of 2018. malaria trend for week 34 of 2018 is above 2014, and 2015 as shown in the figure 4a, above.

Malaria | Maps and Alert Management

Map 2 | Map of malaria cases by county (2018)



Map 3 | Map of malaria alerts by county (2018)



Map legend



Alert threshold

Twice the average number of cases over the past 3 weeks. Source: IDSR

102 Alerts

66 Verified

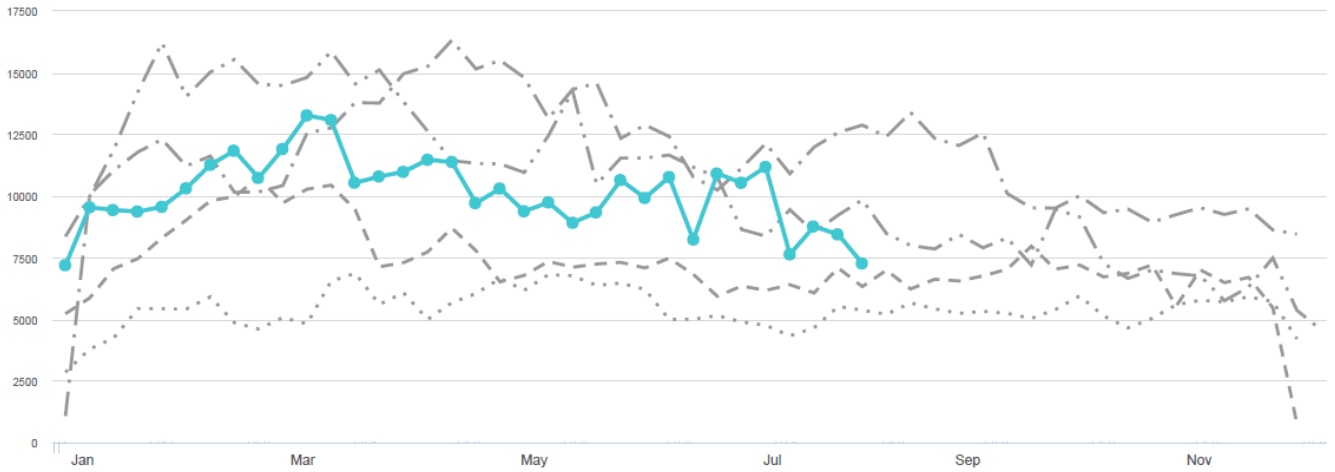
Risk Assessment



Since the beginning of the year, a total of 102 malaria alerts have been triggered, 66 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)

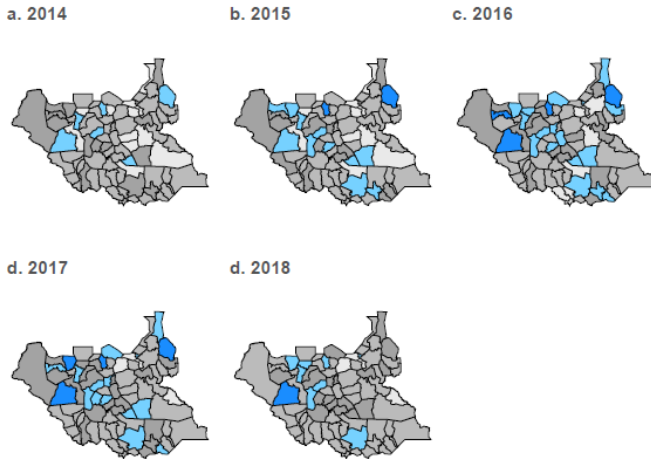


<p>Graph legend</p> <ul style="list-style-type: none"> —●— 2018 - - - - - 2017 - - - - - 2016 - - - - - 2015 2014 	<p>Key AWD indicators (2018)</p> <table border="0"> <tr> <td style="font-size: 24pt; font-weight: bold;">344,493</td> <td style="font-size: 24pt; font-weight: bold;">22</td> <td style="font-size: 24pt; font-weight: bold;">98</td> </tr> <tr> <td>Cases</td> <td>Deaths</td> <td>Alerts</td> </tr> </table>	344,493	22	98	Cases	Deaths	Alerts	<p>Figure 5b % morbidity</p>	<p>Figure 5c Age breakdown</p>
344,493	22	98							
Cases	Deaths	Alerts							

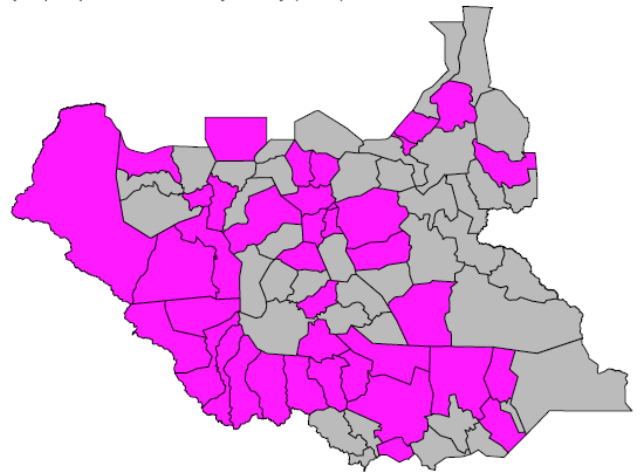
AWD is one of the top causes of morbidity in the country with 344,493 cases reported since week 1 of 2018 including 22 deaths. AWD trend for week 34 of 2018, is below 2015, 2016 and 2017, as shown in figure 5a, above.

Acute Watery Diarrhoea | Maps and Alert Management

Map 4 | Map of AWD cases by county (2018)



Map 5 | Map of AWD alerts by county (2018)



Map legend



Alert threshold

Twice the average number of cases over the past 3 weeks. Source: IDSR

98
Alerts

64
Verified

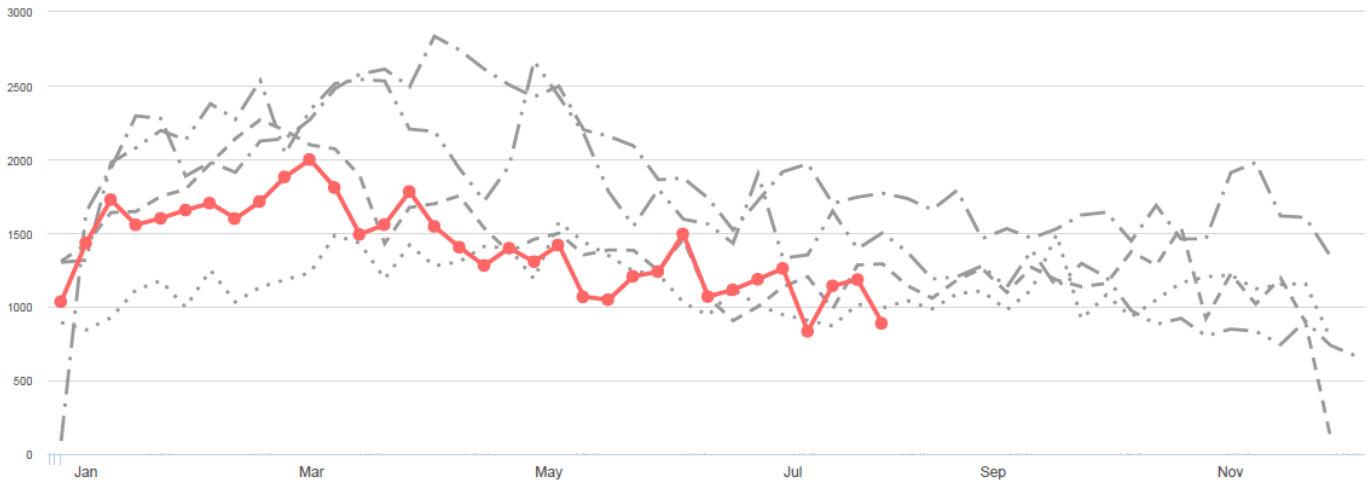
Risk Assessment



The number of AWD alerts triggered since week 1 of 2018 is 98, out of which 64 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)



Graph legend

- 2018
- - - - - 2017
- - - - - 2016
- - - - - 2015
- - - - - 2014

Key bloody diarrhoea indicators (2018)

47,621

Cases

23

Deaths

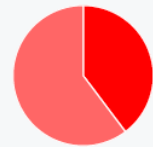
127

Alerts

Figure 6b | % morbidity



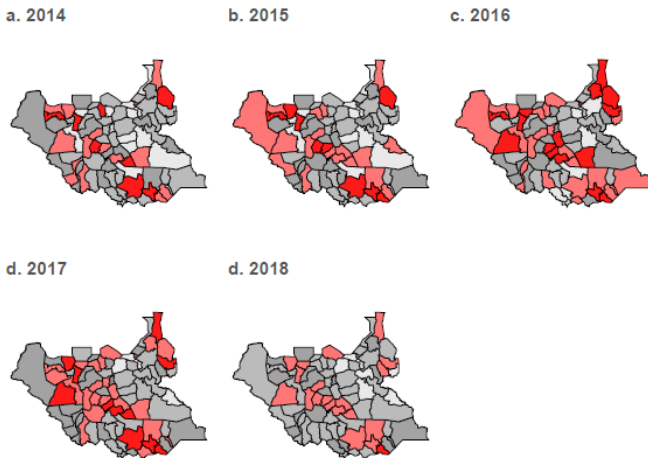
Figure 6c | Age breakdown



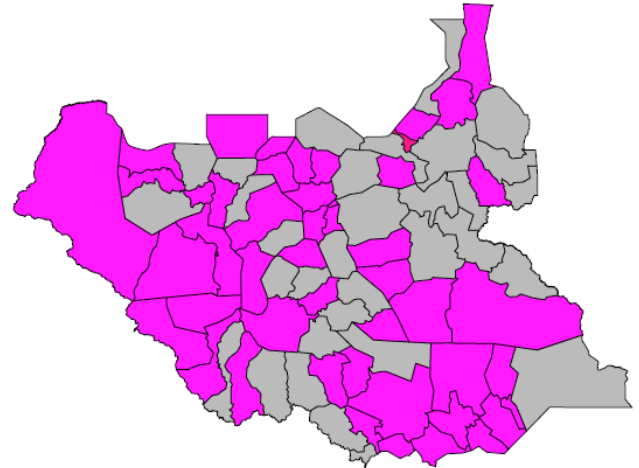
Since week 1 of 2018, a total of 47,621 cases of ABD have been reported country wide including 23 death. ABD trend for 2018 is below 2014, 2015, 2016, and 2017 respectively. Refer to figure 6a, above.

Acute Bloody Diarrhoea | Maps and Alert Management

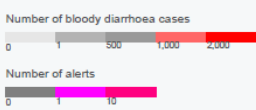
Map 6 | Map of bloody diarrhoea cases by county (2018)



Map 7 | Map of bloody diarrhoea alerts by county (2018)



Map legend



Alert threshold

Twice the average number of cases over the past 3 weeks. Source: IDSR

127

Alerts

84

Verified

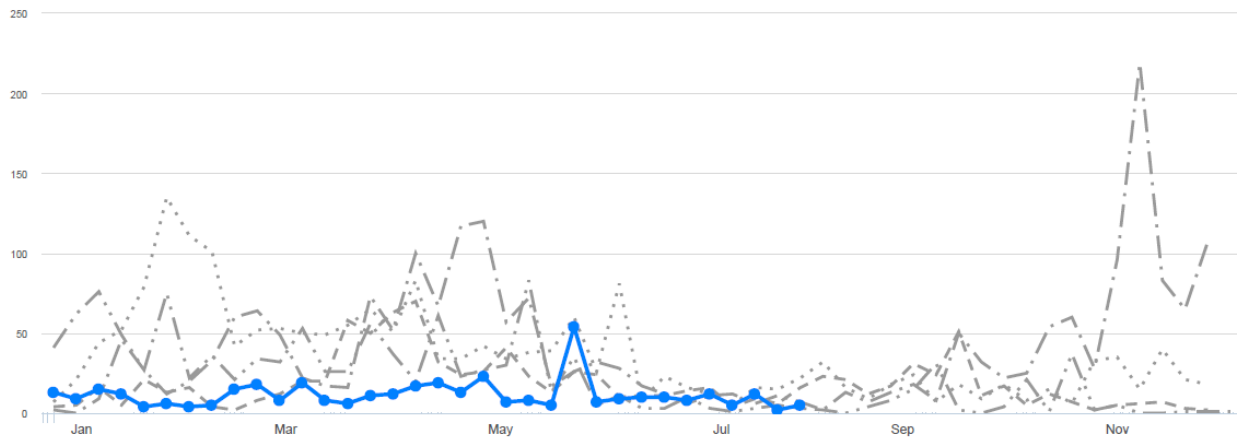
Risk Assessment



Total of 127 alerts were generated since week 1 of 2018, of which 84 were verified by the county surveillance team. Maps indicating areas triggering alerts since 2014 to 2018 are shown above.

Measles | Trends over time

Figure 7a | Trend in number of cases over time (South Sudan)



Graph legend

- 2018
- - - 2017
- . - . 2016
- - - 2015
- 2014

Key measles indicators (2018)

391 Cases
3 Deaths
103 Alerts

Figure 7b | % morbidity



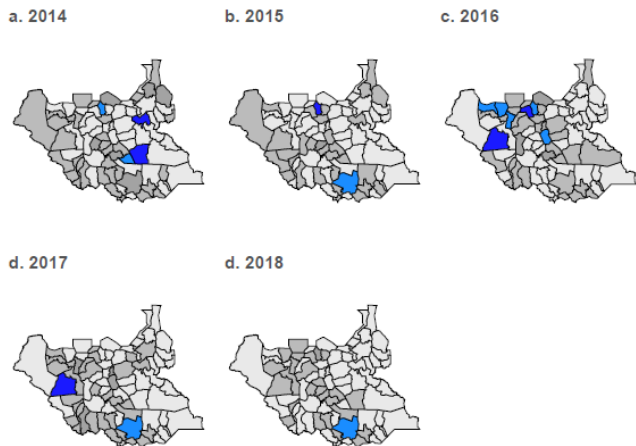
Figure 7c | Age breakdown



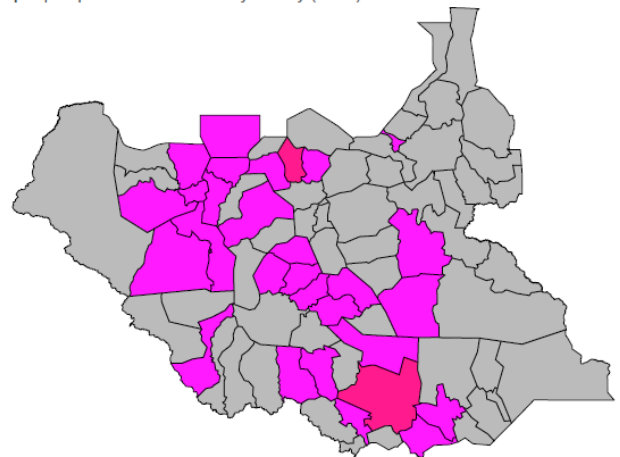
Since the beginning of 2018, at least 391 suspect measles cases including 3 death (CFR 0.78%) have been reported. Of these, 292 suspect cases have undergone measles case-based laboratory-backed investigation with 245 samples collected out of which 26 measles IgM positive cases; 63 clinically confirmed cases; and 34 cases confirmed by epidemiological linkage.

Measles | Maps and Alert Management

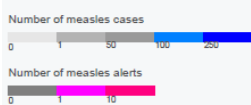
Map 7 | Map of measles cases by county (2018)



Map 8 | Map of measles alerts by county (2018)



Map legend



103 Alerts
83 Verified

Risk Assessment



Alert threshold

1 case.
 Source: IDSR

Since week 1 of 2018, 103 alerts of measles were triggered and 83 of those have been verified at county level. Maps of areas raising alerts from 2014 to 2018 are shown above.

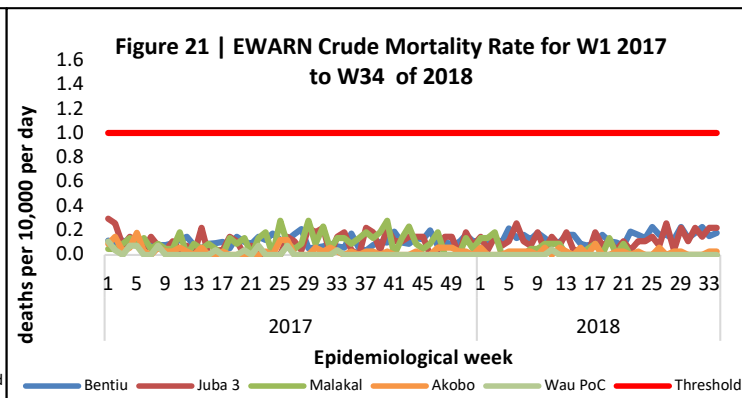
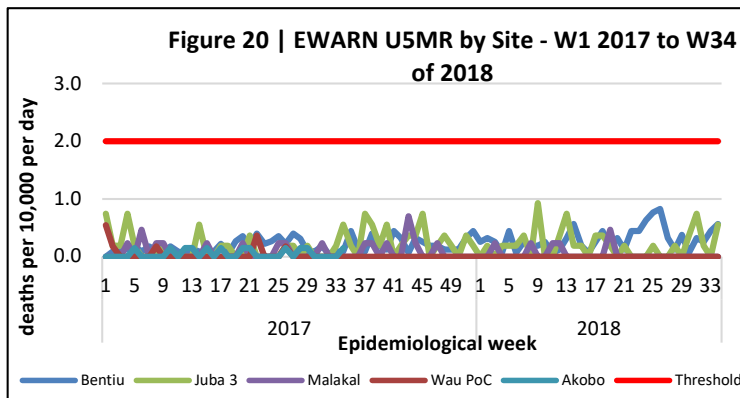
Table 6 | Proportional mortality by cause of death in IDPs W34 2018

Cause of Death by IDP site	Akobo	Bentiu		Juba 3		Total deaths
	<5yrs	<5yrs	≥5yrs	<5yrs	≥5yrs	
Aspiration		1				1
cardiac arrest			1			1
malaria		3	1			4
pneumonia		1				1
SAM	1	1				2
Sepsis		1				1
Septic shock		1	1			2
TB					2	2
Unkown				1		1
Anaemia				1	1	2
Anaemia			1			1
Chronic Heart Failure			1			1
Hypovolemic + Septic Shock		1				1
Puctic aucer				1		1
Total deaths	1	9	5	3	3	21

Among the IDPs, mortality data was received from Akobo, Bentiu PoC & UN House PoC in week 34. (Table 6). **A total of 21** deaths were reported during the week. Bentiu PoC report 14 deaths (67%) in the week. During the week, 13 (62%) deaths were recorded among children <5 years in (Table 6).

The causes of death during week 34 are shown in Table 6.

Mortality in the IDPs - Crude and Under five mortality rates



The U5MR in all the IDP sites that submitted mortality data in week 34 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 34 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 W34, 2018

IDP site	acute watery diarrhoea	cancer	GSW	Gunshot wound	Heart Failure	Kala-Azar	malaria	Meningitis	perinatal death	pneumonia	Rabies	SAM	Sepsis	TB/HIV/AIDS	Trauma	HIV/AIDS	TB	Others	Grand Total
Bentiu	7	1	2	2	1	2	37	3	26	11	1	17	18	13	1	19	7	222	390
Juba 3	1	1			5		11			5		3		1		6	7	71	111
Malakal		1			3	1			1	1							2	17	26
Akobo				1		2	4			2		2	2	1	1			10	25
Wau PoC							1											0	1
Grand Total	8	3	2	3	9	5	53	3	27	19	1	22	20	15	2	25	16	320	553
Proportionate mortality [%]	1%	1%	0%	1%	2%	1%	10%	1%	5%	3%	0%	4%	4%	3%	0%	5%	3%	58%	100%

A total of 553 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

WHO and the Ministry of Health gratefully acknowledge health cluster and health pooled fund (HPF) partners who have reported the data used in this bulletin. We would also like to thank ECHO and USAID for providing financial support.

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>

