South Sudan

Integrated Disease Surveillance and Response (IDSR)

Annexes W40 2019 (Sept. 30 - Oct. 06)



Access and Utilisation

| Slide 2 Mag | 1 Map of consultations by county (2019) |
|-------------|---|
|-------------|---|

Indicator-based surveillance

| Slide 3 | Figure 1 Proportional mortality |
|---------|--|
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Disease trends and maps

| Malaria | |
|---------|-----------------------------------|
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Acute Watery Diarrhoea (AWD)

| Slide 8 | Trend in AWD cases over time |
|---------|-------------------------------|
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Bloody diarrhoea

| Slide 10 | Trend in bloody diarrhoea cases over time |
|----------|--|
| Slide 11 | Bloody diarrhoea maps and alert management |

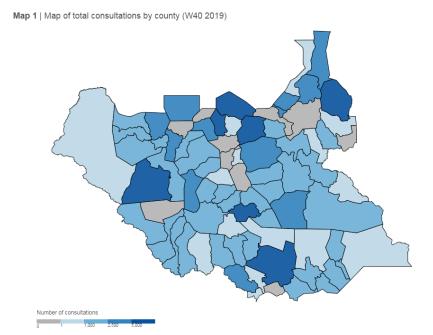
Measles

| Slide 12 | Trend in measles cases over time |
|----------|-----------------------------------|
| 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



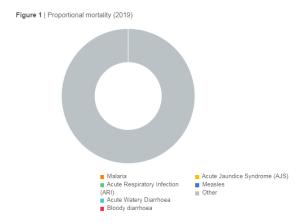
| W40 | 2019 |
|---------|---|
| 11,614 | 380,278 |
| 25,735 | 616,859 |
| 28,410 | 420,205 |
| 14,795 | 623,267 |
| 13,270 | 520,326 |
| 27,537 | 448,822 |
| 16,045 | 769,122 |
| 9,645 | 465,602 |
| 12,205 | 365,528 |
| 12,853 | 375,472 |
| 172,109 | 4,985,481 |
| | 11,614 25,735 28,410 14,795 13,270 27,537 16,045 9,645 12,205 12,853 |

The total consultation in the country since week 1 of 2019 is 4,985,481 by hub, Malakal 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.





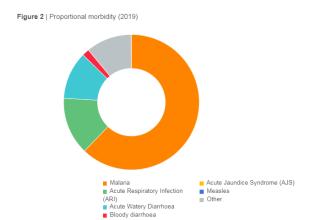
Proportional mortality



| Syndrome | W40 | | 2019 | 2019 | |
|------------------|----------|-------------|---------------|-------------|--|
| | # deaths | % mortality | # deaths | % mortality | |
| Malaria | 13 | 28.9% | 5,092 | 0.0% | |
| ARI | 16 | 35.6% | 1,896 | 0.0% | |
| AWD | 4 | 8.9% | 1,822 | 0.0% | |
| Bloody diarrhoea | 8 | 17.8% | 335 | 0.0% | |
| AJS | 0 | 0.0% | 184 | 0.0% | |
| Measles | 0 | 0.0% | 100 | 0.0% | |
| Other | 4 | 8.9% | 7,009,641,801 | 100.0% | |
| Total deaths | 45 | 100% | 7,009,651,230 | 100% | |

Figure 1, above shows the proportional mortality for 2019, with malaria being the main cause of mortality accounting for 28.9% of the deaths since week 1 of 2019, followed by ARI, AWD and ABD

Proportional morbidity

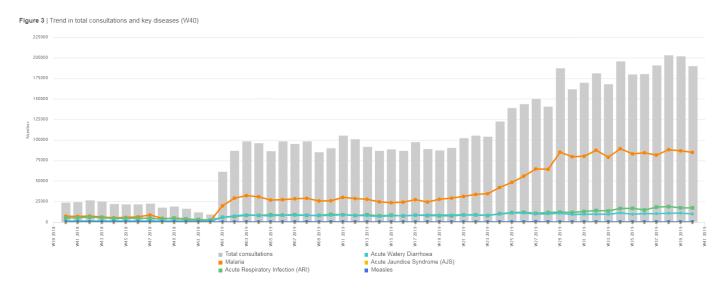


| Syndrome | W40 | | 2019 | |
|------------------|---------|-------------|-----------|-------------|
| | # cases | % morbidity | # cases | % morbidity |
| Malaria | 84,775 | 68.5% | 2,067,214 | 62.2% |
| ARI | 17,329 | 14.0% | 457,454 | 13.8% |
| AWD | 9,947 | 8.0% | 378,883 | 11.4% |
| Bloody diarrhoea | 1,241 | 1.0% | 57,328 | 1.7% |
| AJS | 19 | 0.0% | 632 | 0.0% |
| Measles | 42 | 0.0% | 2,207 | 0.1% |
| Other | 10,450 | 8.4% | 360,796 | 10.9% |
| Total cases | 123,803 | 100% | 3,324,514 | 100% |
| | | | | |

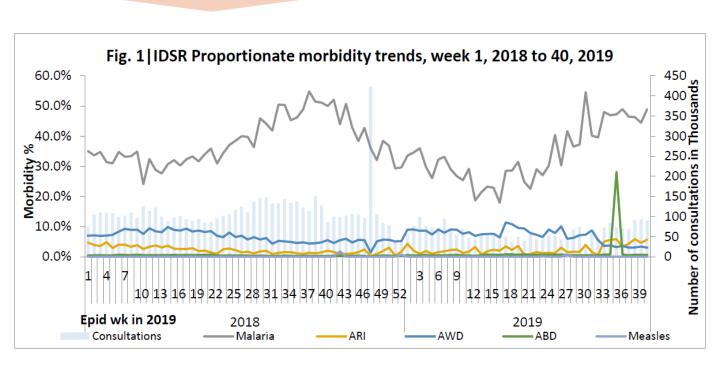
Figure 2, indicates the top causes of morbidity in the country, with malaria being the leading cause of morbidity 84,775 (68.5%) followed by ARI, AWD and ABD respectively since week 1 of 2019. refer to the figure above for more information.







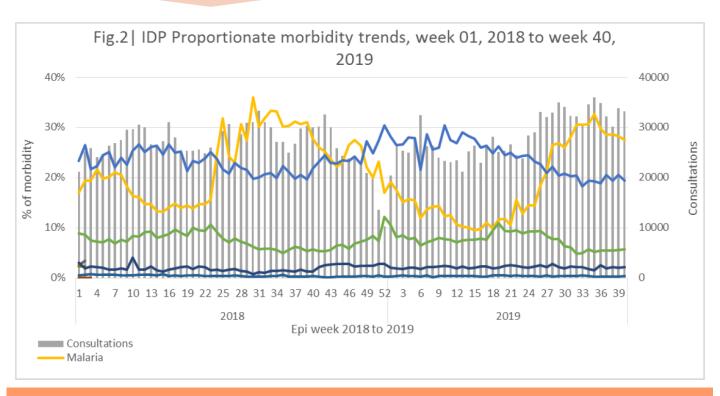
IDSR Proportionate morbidity trends - in relatively stable states



In the relatively stable states, malaria is the top cause of morbidity accounting for 48.9 % of the consultations in week 40 (representing an increase from 44.4% in week 39).

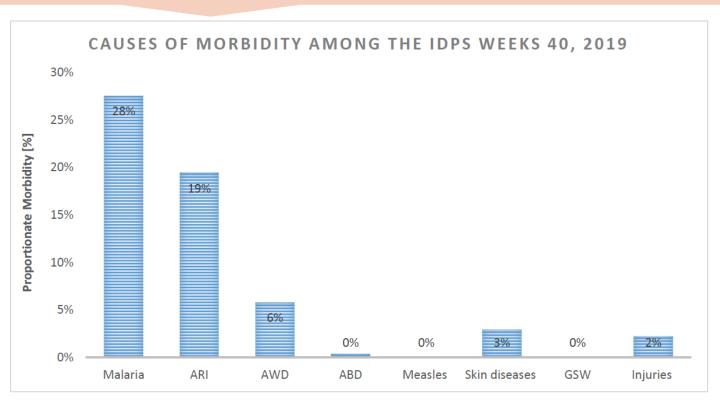


IDP Proportionate morbidity trends - in displaced population



Among the IDPs, Malaria and ARI accounted for 28% and 19% of the consultations in week 40. 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 2019 include, ARI, Malaria, AWD, Skin diseases, and injuries.

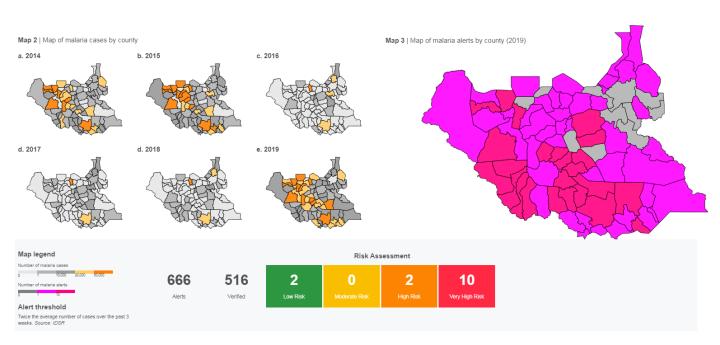


Malaria | Trends over time



Malaria is the top course of Morbidity in the country, a total of 2,067,214 cases with 5,092 deaths registered since week 1 of 2019. malaria trend for week 40 of 2019 is on decline but above 2015,2016,2017 and 2018 as shown in the figure 4a, above.

Malaria | Maps and Alert Management



Since the beginning of the year, a total of 666 malaria alerts have been triggered, 516 of those were verified. The Maps above indicate the location reporting malaria alerts from, 2015, 2016, 2017, 2018, and 2019.

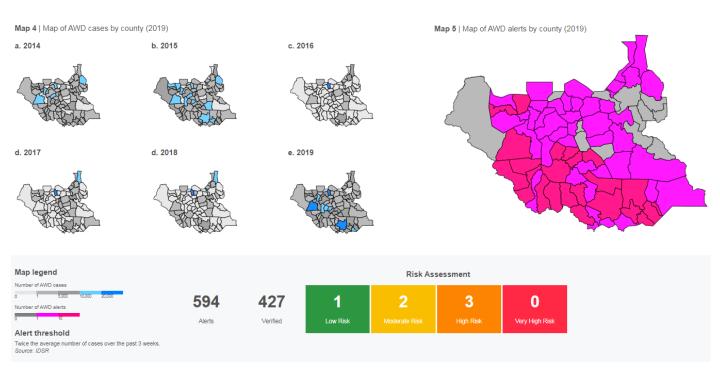


Acute Watery Diarrhoea | Trends over time



AWD is one of the top causes of morbidity in the country with 378,942 cases reported since week 1 of 2019 including 1,822 deaths. AWD trend for week 40 of 2019, is on decline but above 2015, 2016, 2017 and 2018 as shown in figure 5a, above.

Acute Watery Diarrhoea | Maps and Alert Management

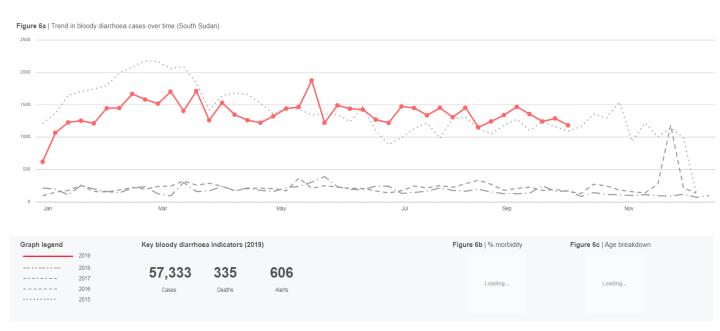


The number of AWD alerts triggered since week 1 of 2019 is 594 out of which 427 were verified. Maps above highlight the areas reporting AWD alerts from 2015 to 2019 .



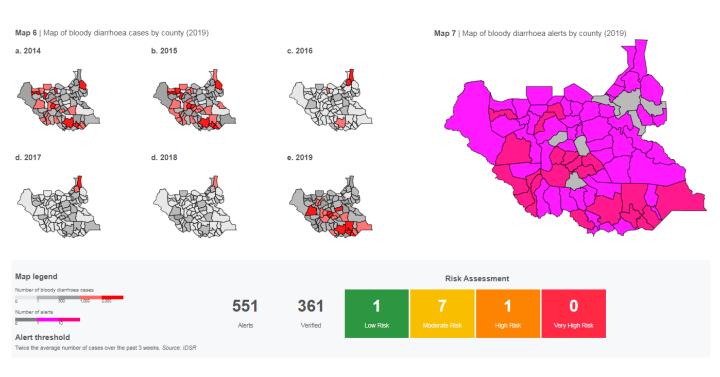


Acute Bloody Diarrhoea | Trends over time



Since week 1 of 2019, a total of 57,333 cases of ABD have been reported country wide including 335 deaths. ABD trend for week 40 of 2019 is on decline but above 2015,2016, 2017 and 2018. Refer to figure 6a, above.

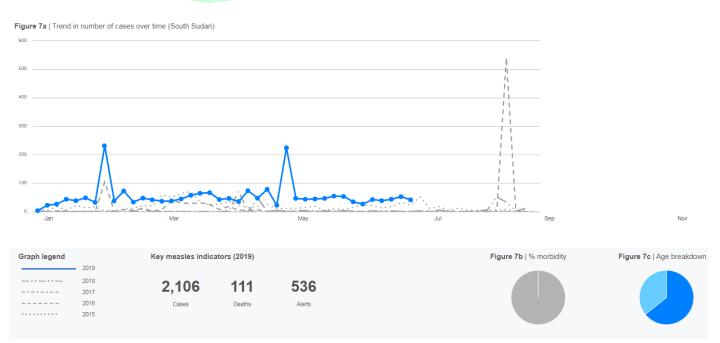
Acute Bloody Diarrhoea | Maps and Alert Management



Total of 551 alerts were generated since week 1 of 2019, of which 361 were verified by the county surveillance team. Maps indicating areas triggering alerts since 2015 to 2019 are shown above.

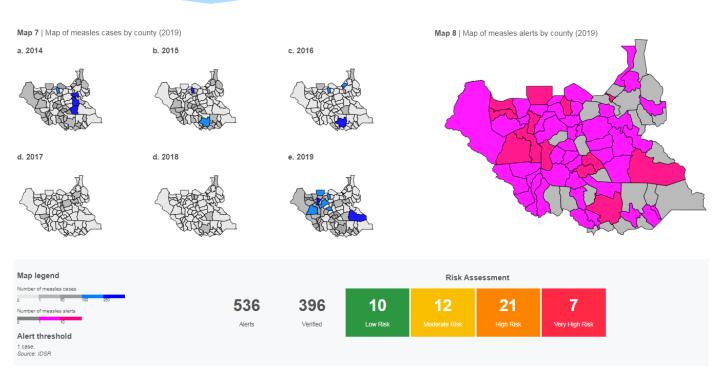


Measles | Trends over time



Since the beginning of 2019, at least 2,106 suspect measles cases including 111 deaths. Have been reported through the EWARS website. Measles trend for week 40 of 2019 is on increase and is above with 2015 trend as shown in the graph above

Measles | Maps and Alert Management



Since week 1 of 2019, 536 alerts of measles were triggered and 396 of those have been verified at county level. Maps of areas raising alerts from 2015 to 2019 are shown above.





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









