South Sudan

Integrated Disease Surveillance and Response (IDSR)

Annexes W48 2018 (Nov 26– Dec 2)

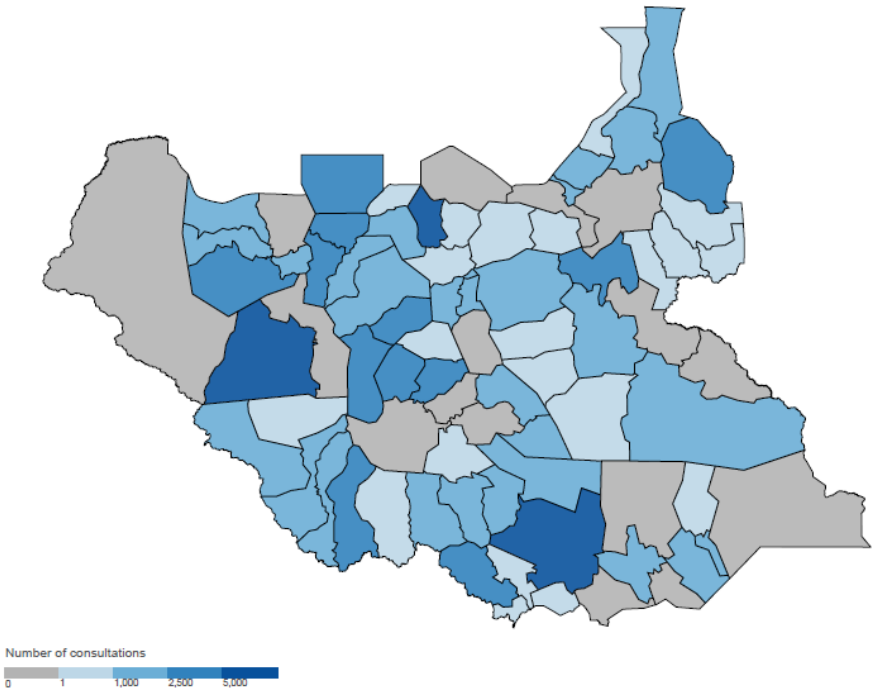
World Health Organization
South Sudan

Ministry of Health
Republic of South Sudan

Contents

Access and Utilization | Map of consultations by county

Map 1 | Map of total consultations by county (W48 2018)



Hub	W48	2018
Aweil	7,600	673,535
Bentiu	14,141	792,348
Bor	11,073	552,101
Juba	14,257	620,528
Kwajok	19,028	1,246,383
Malakal	12,428	748,921
Rumbek	10,862	906,418
Torit	5,930	306,175
Wau	19,276	512,293
Yambio	14,371	539,561
South Sudan	**128,966**	**6,898,263**

The total consultation in the country since week 1 of 2018 is 6,898,263 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.

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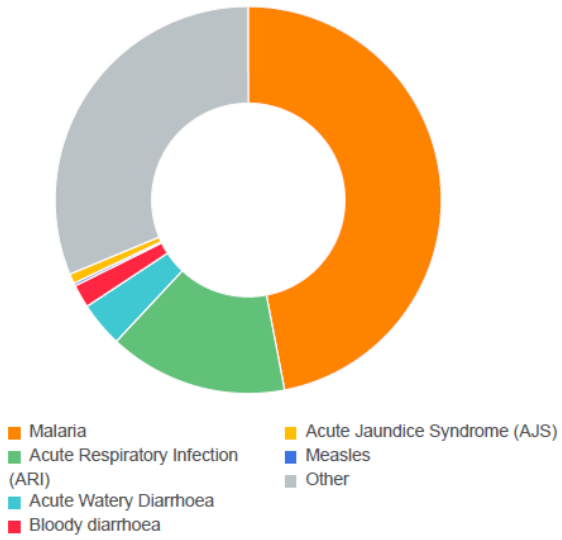
Proportional mortality

Figure 1 | Proportional mortality (2018)

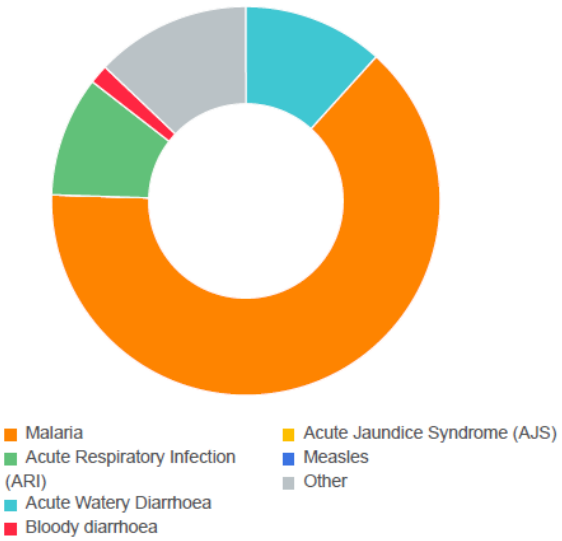


Syndrome	W48		2018	
	# deaths	% mortality	# deaths	% mortality
Malaria	10	100.0%	624	47.0%
ARI	0	0.0%	199	15.0%
AWD	0	0.0%	50	3.8%
Bloody diarrhoea	0	0.0%	26	2.0%
AJS	0	0.0%	11	0.8%
Measles	0	0.0%	3	0.2%
Other	0	0.0%	415	31.3%
Total deaths	**10**	**100%**	**1,328**	**100%**

Figure 1, above shows the proportional mortality for 2018, with malaria being the main cause of mortality accounting for 47.0% of the deaths since week 1 of 2018, followed by ARI AWD and bloody diarrhoea.

Proportional morbidity

Figure 2 | Proportional morbidity (2018)



Syndrome	W48		2018	
	# cases	% morbidity	# cases	% morbidity
Malaria	40,047	63.6%	2,525,993	63.8%
ARI	6,035	9.6%	395,626	10.0%
AWD	7,046	11.2%	463,726	11.7%
Bloody diarrhoea	877	1.4%	62,825	1.6%
AJS	0	0.0%	214	0.0%
Measles	10	0.0%	433	0.0%
Other	8,980	14.3%	510,731	12.9%
Total cases	**62,995**	**100%**	**3,959,548**	**100%**

Figure 2, indicates the top causes of morbidity in the country, with malaria being the leading cause of morbidity 2,525,993(63.8%) followed by ARI, AWD and ABD respectively since week 1 of 2018. refer to the figure above for more information.

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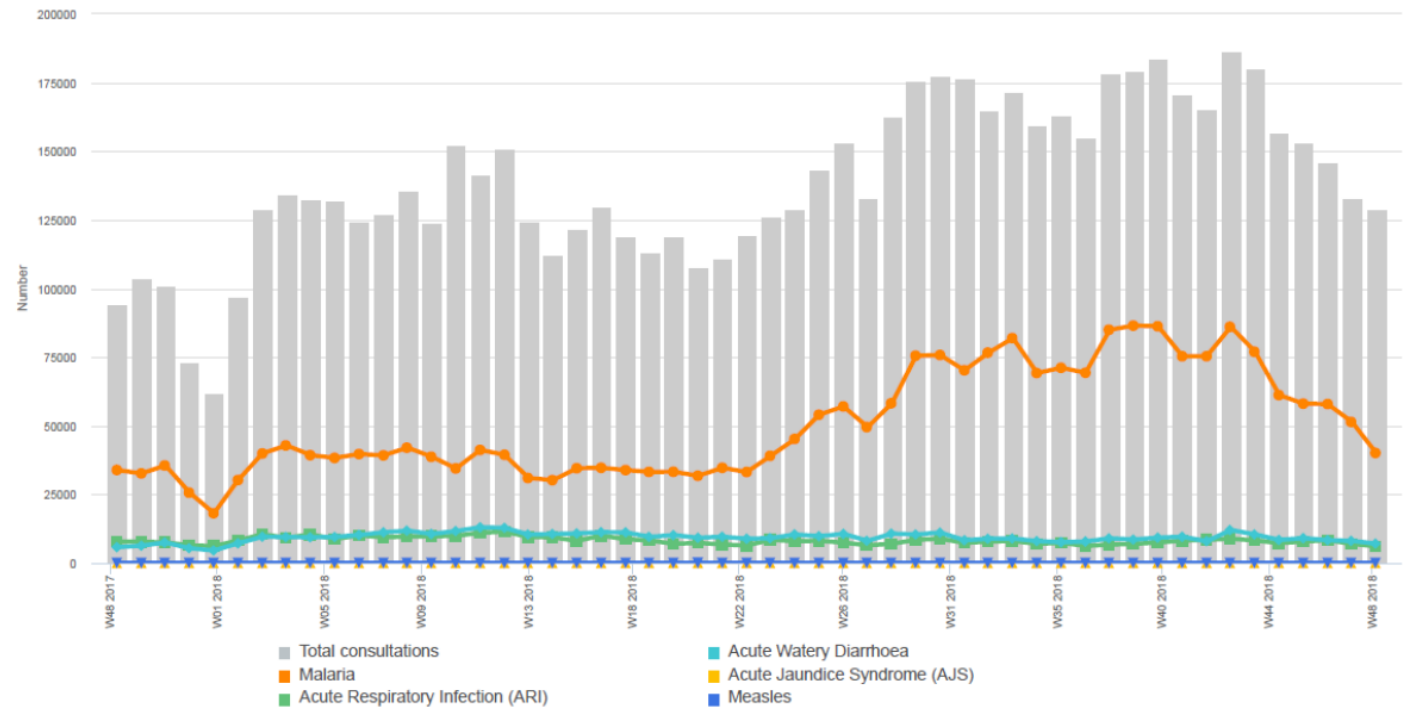
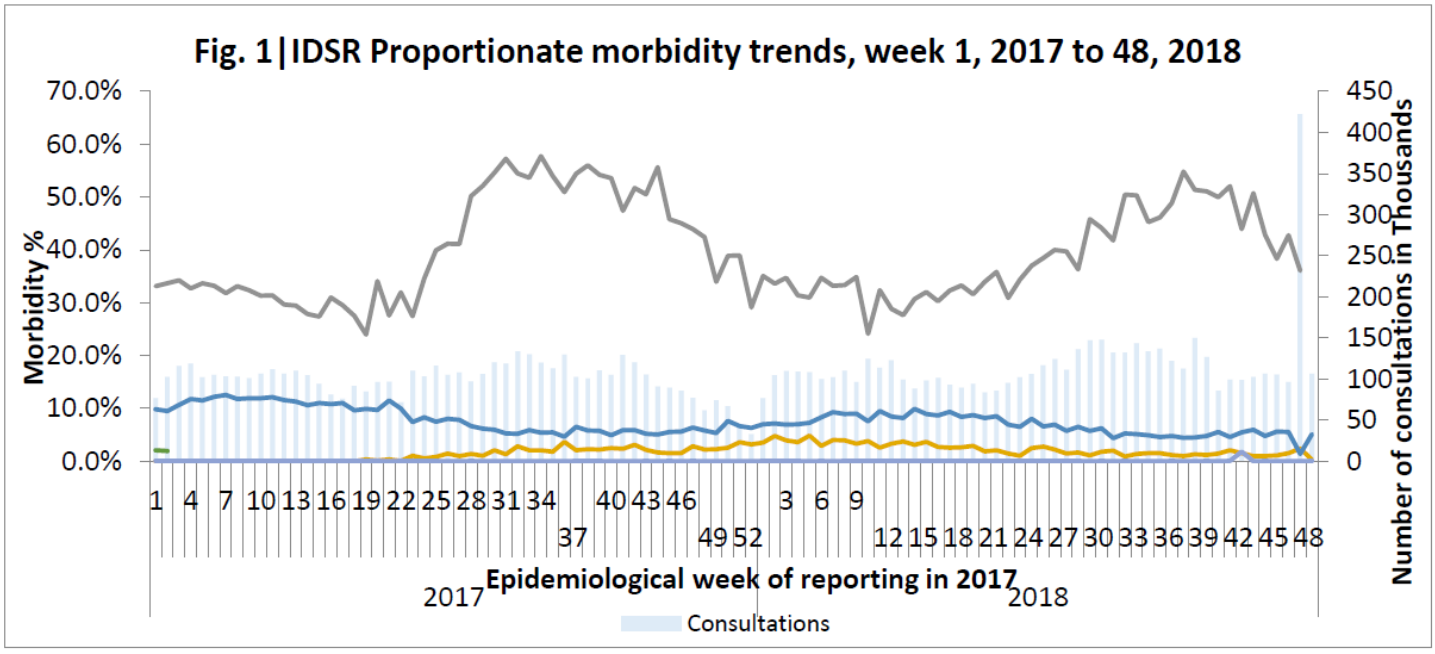
Trend in consultations and key diseases

Figure 3 | Trend in total consultations and key diseases (W48)



IDSR Proportionate morbidity trends - in relatively stable states



In the relatively stable states, malaria is the top cause of morbidity accounting for 32.1% of the consultations in week 48 (representing a decrease from 36.0% in week 47).

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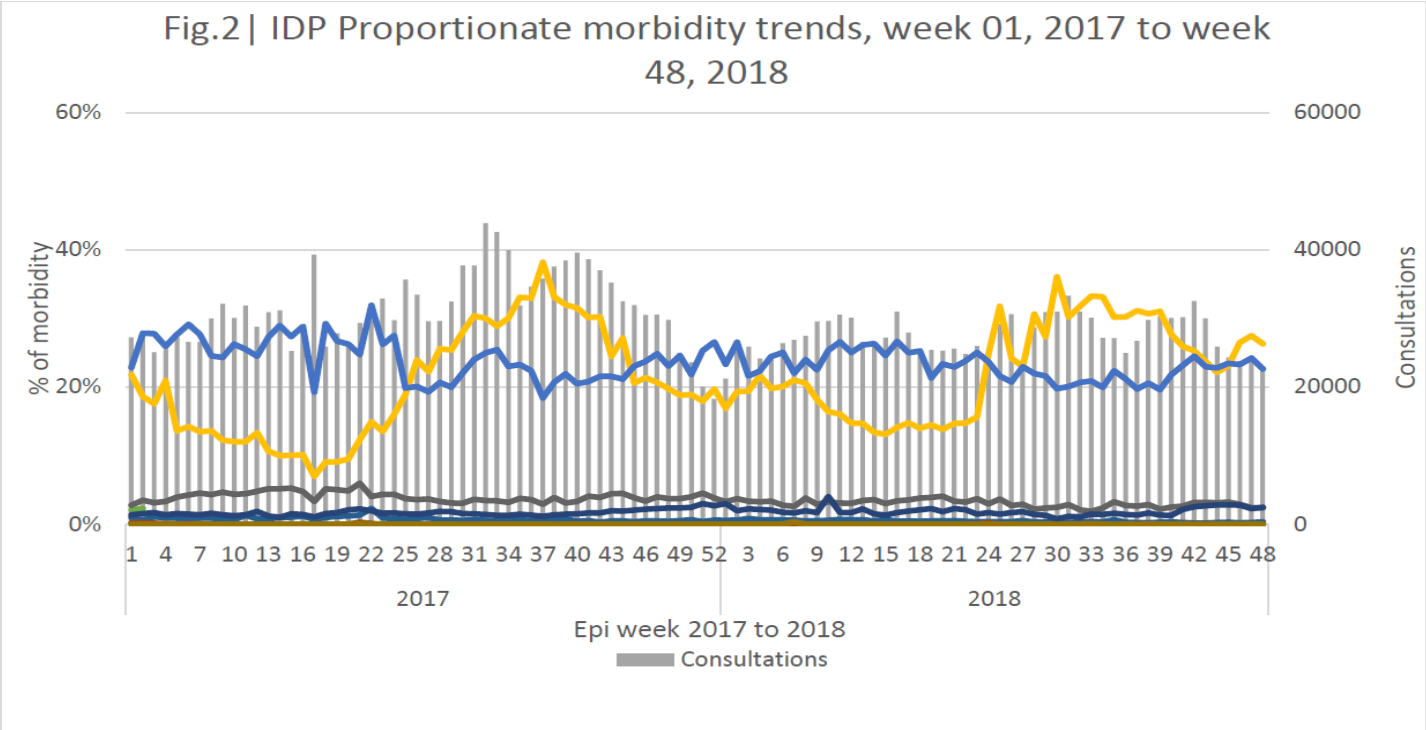
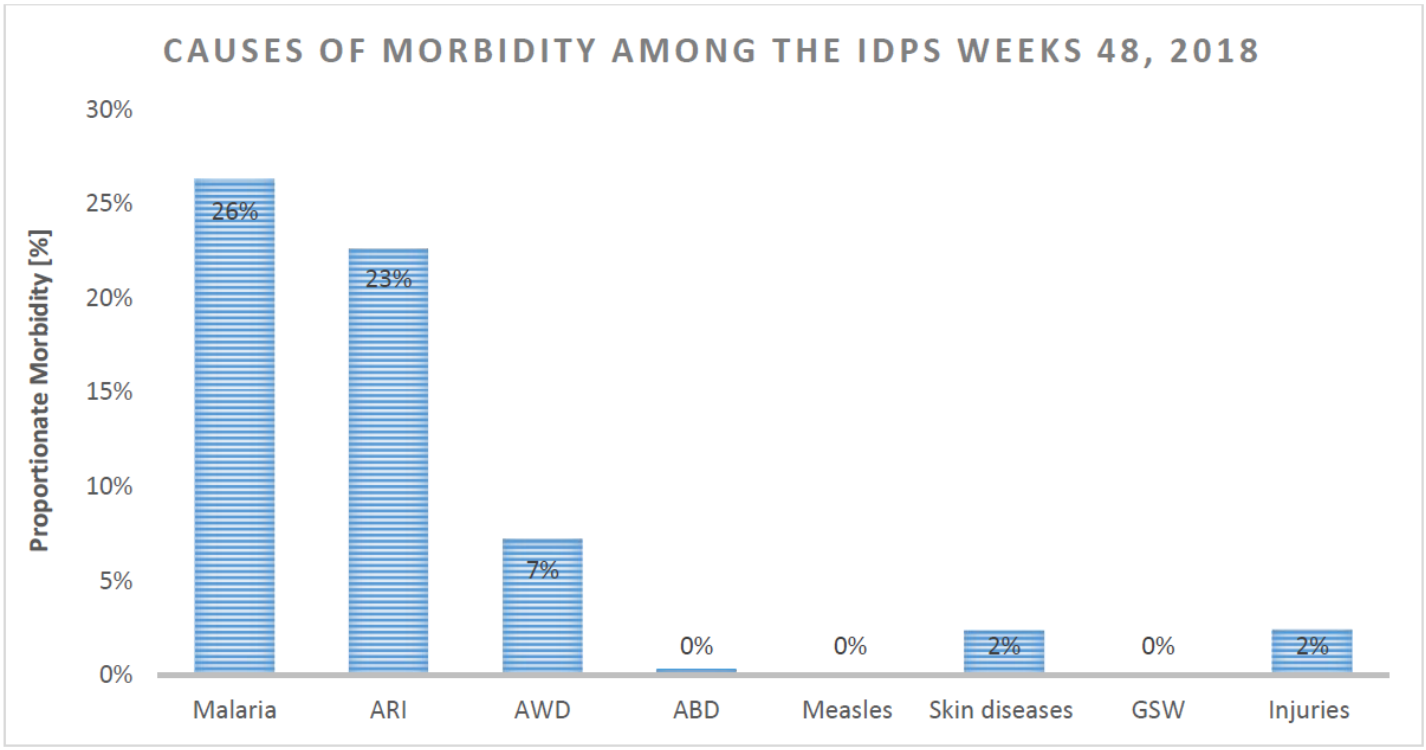
IDP Proportionate morbidity trends - in displaced population



Among the IDPs, Malaria and ARI accounted for 26% and 23% of the consultations in week 48. The other significant causes of morbidity in the IDPs includes AWD, Skin diseases, and Measles.

IDP Proportionate morbidity trends - in displaced population



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

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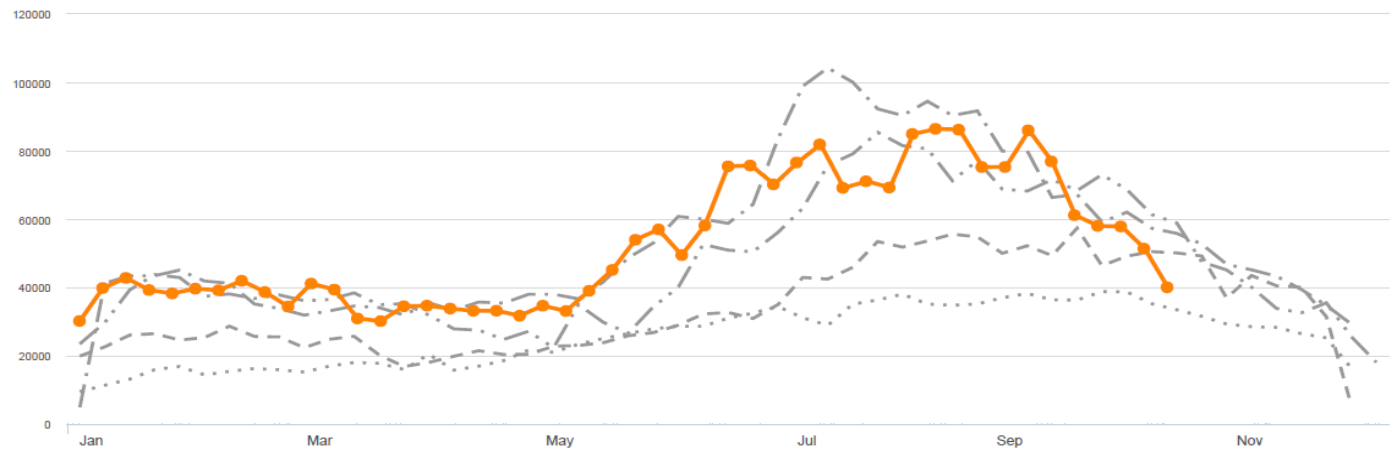
Malaria | Trends over time

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



Graph legend

2018
2017
2016
2015
2014

Key malaria indicators (2018)

2,525,993	624	153
Cases	Deaths	Alerts

Figure 4b | % morbidity

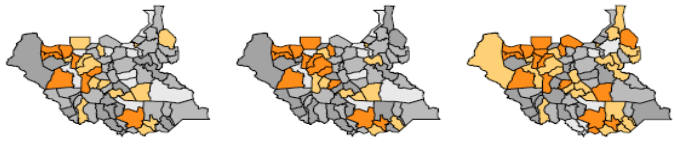
Figure 4c | Age breakdown

Malaria is the top course of Morbidity in the country, a total of 2,525,993 cases with 624 deaths registered since week 1 of 2018. malaria trend for week 48 of 2018 is below 2015,2016, and 2017 as shown in the figure 4a, above.

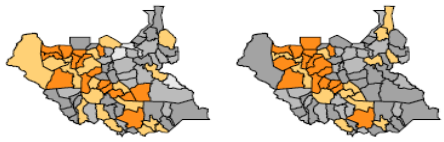
Malaria | Maps and Alert Management

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

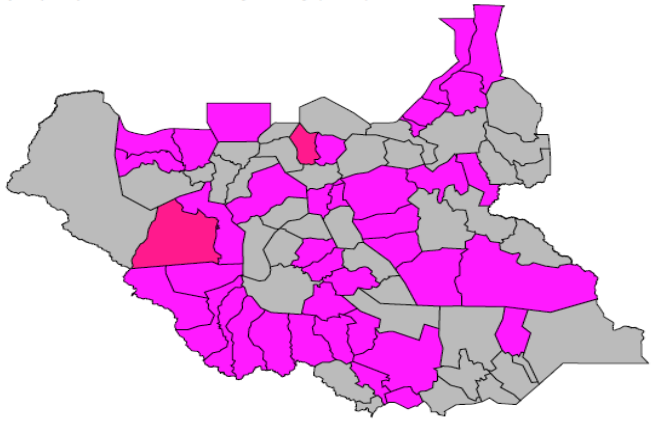
a. 2014 b. 2015 c. 2016



d. 2017 d. 2018



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



Map legend

Number of malaria cases

0 1 10,000 20,000 50,000

Number of malaria alerts

0 1 10

Alert threshold

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

153	110
Alerts	Verified

Risk Assessment

2	0	1	1
Low Risk	Moderate Risk	High Risk	Very High Risk

Since the beginning of the year, a total of 153 malaria alerts have been triggered, 110 of those were verified. The Maps above indicate the location reporting malaria alerts from 2014, 2015, 2016, 2017, and 2018.

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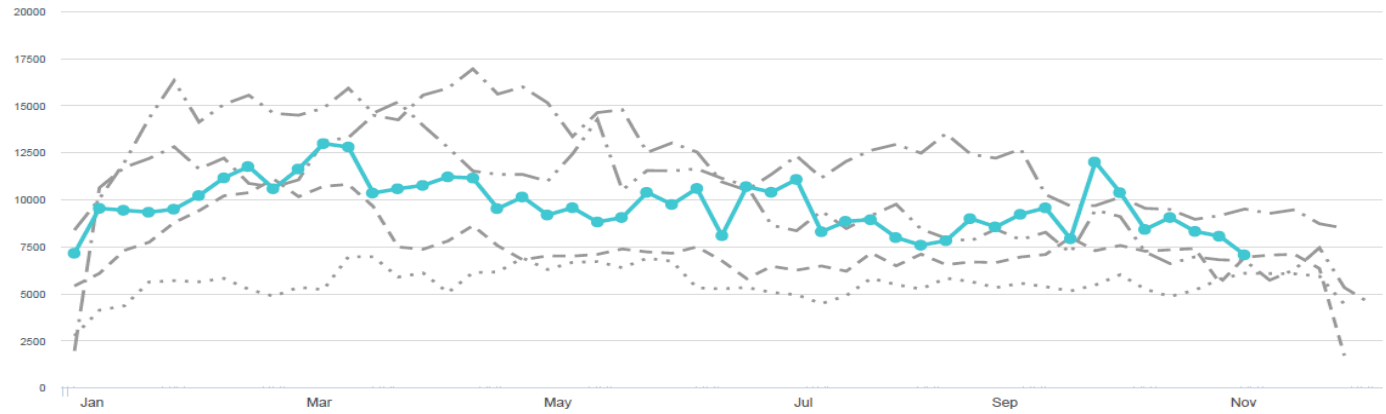
Acute Watery Diarrhoea| Trends over time

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



Graph legend

2018
2017
2016
2015
2014

Key AWD indicators (2018)

463,726	50	141
Cases	Deaths	Alerts

Figure 5b | % morbidity

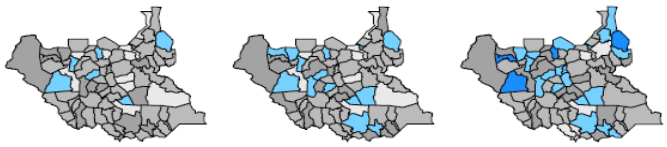
Figure 5c | Age breakdown

AWD is one of the top causes of morbidity in the country with 463,726 cases reported since week 1 of 2018 including 50 deaths. AWD trend for week 48 of 2018,shows a decline and is below 2016 and 2017, as shown in figure 5a, above.

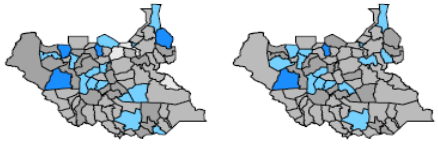
Acute Watery Diarrhoea| Maps and Alert Management

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

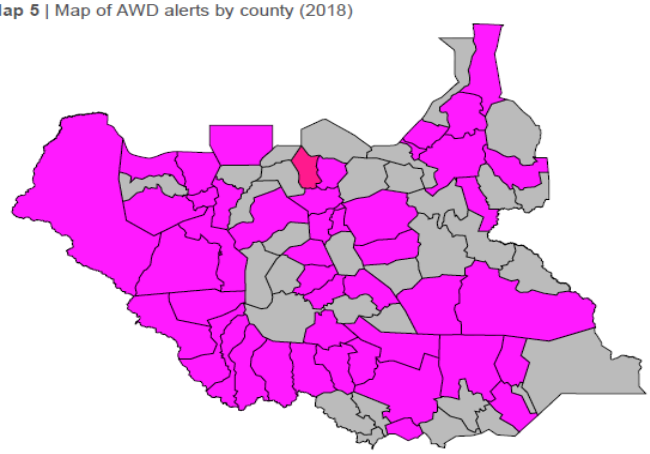
a. 2014 b. 2015 c. 2016



d. 2017 d. 2018



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



Map legend

Number of AWD cases

0 1 5,000 10,000 20,000

Number of AWD alerts

0 1 10

Alert threshold

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

141	99
Alerts	Verified

Risk Assessment

0	1	0	0
Low Risk	Moderate Risk	High Risk	Very High Risk

The number of AWD alerts triggered since week 1 of 2018 is 141, out of which 99 were verified. Maps above highlight the areas reporting AWD alerts from 2014 to 2018 .

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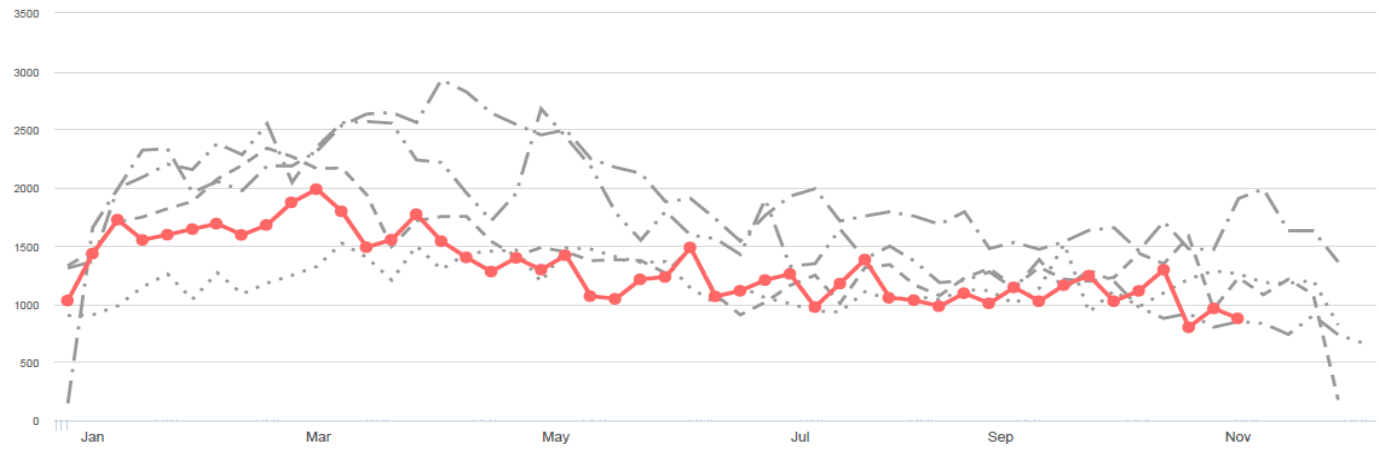
Acute Bloody Diarrhoea | Trends over time

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



Graph legend

2018
2017
2016
2015
2014

Key bloody diarrhoea indicators (2018)

62,825	26	178
Cases	Deaths	Alerts

Figure 6b | % morbidity

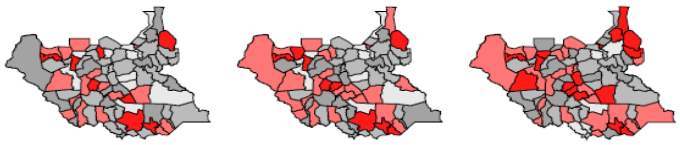
Figure 6c | Age breakdown

Since week 1 of 2018, a total of 62, 825 cases of ABD have been reported country wide including 26 death. ABD trend for 2018 is below 2015, 2016, and 2017 respectively. Refer to figure 6a, above.

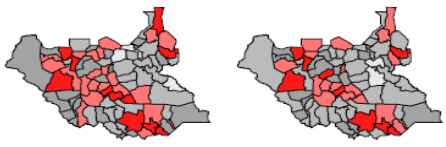
Acute Bloody Diarrhoea | Maps and Alert Management

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

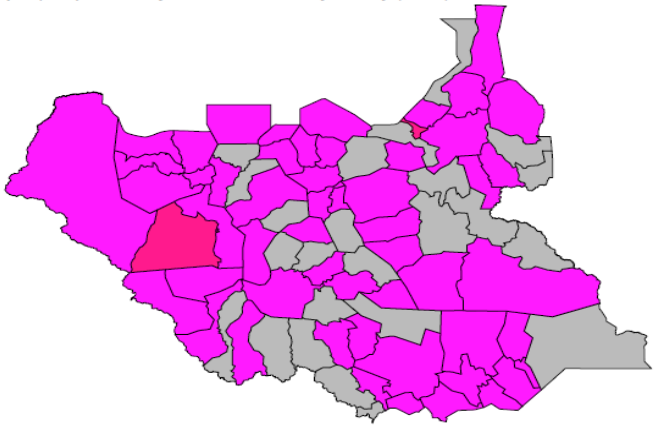
a. 2014 b. 2015 c. 2016



d. 2017 d. 2018



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



Map legend

Number of bloody diarrhoea cases

0 1 500 1,000 2,000

Number of alerts

0 1 10

Alert threshold

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

178	128
Alerts	Verified

Risk Assessment

1	0	0	0
Low Risk	Moderate Risk	High Risk	Very High Risk

Total of 178 alerts were generated since week 1 of 2018, of which 128 were verified by the county surveillance team. Maps indicating areas triggering alerts since 2014 to 2018 are shown above.

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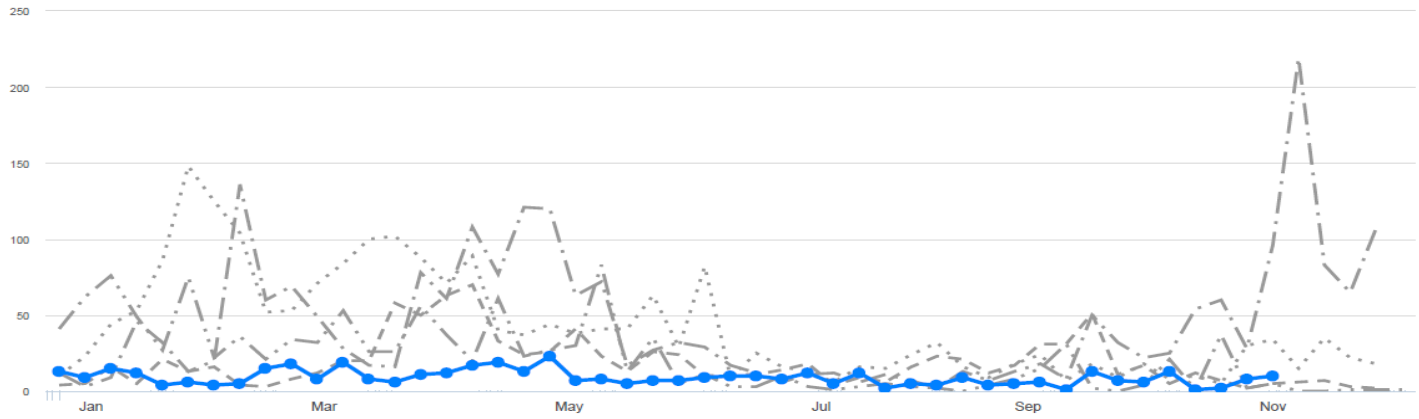
Measles| Trends over time

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



Graph legend

2018
2017
2016
2015
2014

Key measles indicators (2018)

433	3	149
Cases	Deaths	Alerts

Figure 7b | % morbidity

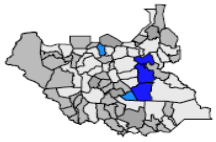
Figure 7c | Age breakdown

Since the beginning of 2018, at least 433 suspect measles cases including 3 death (CFR 0.74%) have been reported. . Of these, 415 suspect cases have undergone measles case-based laboratory-backed investigation with 309 samples collected out of which 48 measles IgM positive cases; 78 clinically confirmed cases; and 56 cases confirmed by epidemiological linkage.

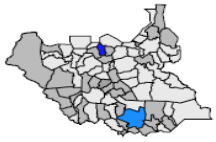
Measles| Maps and Alert Management

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

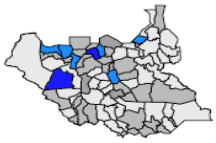
a. 2014



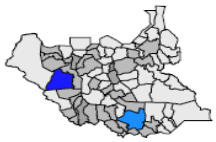
b. 2015



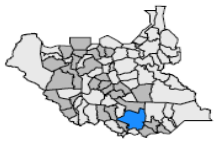
c. 2016



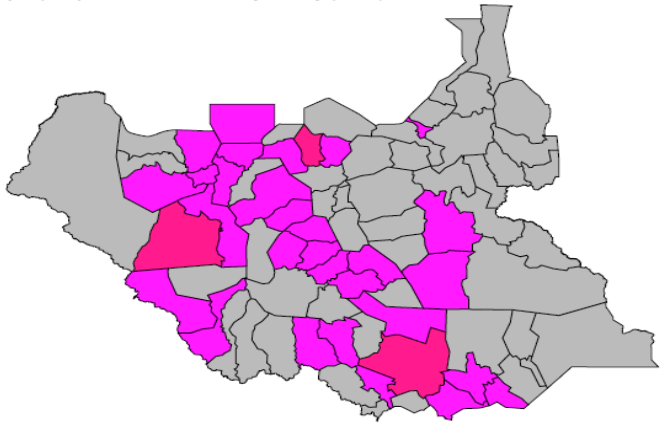
d. 2017



d. 2018



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



Map legend

Number of measles cases

0 1 50 100 250

Number of measles alerts

0 1 10

Alert threshold

1 case.

Source: IDSR

149	121
Alerts	Verified

Risk Assessment

1	1	2	0
Low Risk	Moderate Risk	High Risk	Very High Risk

Since week 1 of 2018, 149 alerts of measles were triggered and 121 of those have been verified at county level. Maps of areas raising alerts from 2014 to 2018 are shown above.

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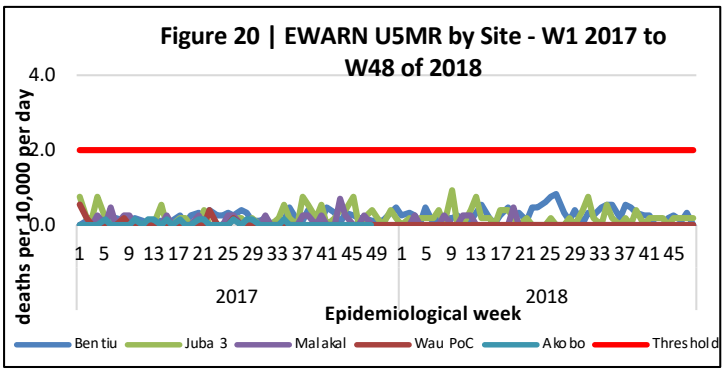
Table 6 | Proportional mortality by cause of death in IDPs W47 2018

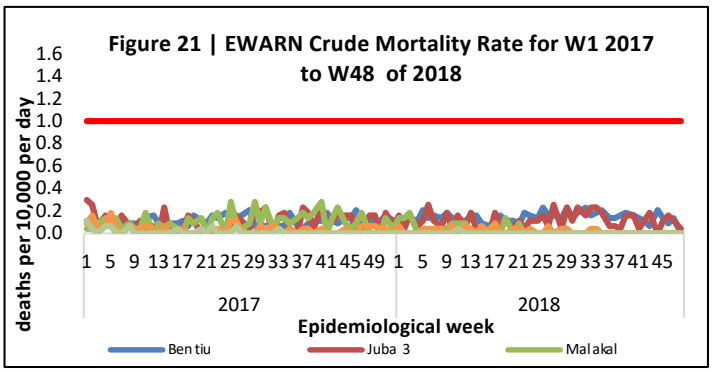
	Juba 3	Total deaths
Cause of Death by IDP site	**<5yrs**	
Severe dehydration	1	1
Total deaths	**1**	**1**

Among the IDPs, mortality data was received from Juba 3 in week 48. (Table 6). **A total of 1** deaths was reported during the week in Juba 3 (1) in the week. During the week, 1 (100%) of the deaths were recorded among children <5yrs years in (Table 6).

The causes of death during week48 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 48 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 48 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 W48, 2018

IDP site	acute watery diarrhoea	cancer	GSW	Heart Failure	Kala-Azar	malaria	Meningitis	perinatal death	pneumonia	Rabies	SAM	Sepsis	TB/HIV/AIDS	Trauma	HIV/AIDS	TB	Others	Grand Total
Bentiu	12	1	8	2	3	55	3	30	14	1	19	25	14	1	30	7	311	536
Juba 3	1	1		5		12		2	8		3	1	1		15	7	93	149
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	**13**	**3**	**9**	**10**	**6**	**72**	**3**	**33**	**25**	**1**	**24**	**28**	**16**	**2**	**45**	**16**	**431**	**737**
Proportionate mortality [%]	2%	0%	1%	1%	1%	##	0%	4%	3%	0%	3%	4%	2%	0%	6%	2%	58%	100%

A total of 737 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

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