During week no 30, 2013; 89% (83/93) health facilities from 4 pilot governorates provided valid surveillance data.

The total number of consultations reported during the week in pilot governorates was 13365 compared to 11965 the previous reporting week. Acute respiratory tract infections (ARI), acute diarrhea (OAD) and suspected malaria (5.4%) were the leading cause of morbidity this week.

A total of 25 alerts were generated by eDEWS system in week 30, 2013; Of these, 23 alerts were verified as true for further investigations with appropriate response.

Altogether 6 alerts for Measles, 5 Pertussis, 2 each for AVH, Meningitis, Acute Flaccid Paralysis, C. Leishmaniasis, and 1 each for OAD, NNT, Pneumonia and Malaria were received and responded.

Online disease surveillance and response system was launched in 4 governorates (Aden, Abyan, Lahj and Taiz) in March 2013. Ongoing on site trainings to improve weekly reporting and immediate notification are underway in all 4 pilot governorates.

**Leading Priority Diseases - Pilot Governorates (Epi-week 30, 2013)**

- URTI (19%), suspected malaria (0.6%), OAD (7.2%) and Pneumonia (3.1%) remain the leading causes of morbidity representing a total of 29.9%.

- Acute viral hepatitis, acute watery diarrhea and Schistosomiasis represented less than 1% of total morbidity in reporting period. Bloody diarrhea represented 0.1% of this morbidity.

- All diarrheal disease comprised 7.4% and Pneumonia 3.1% of total morbidity in Pilot Governorates this week.

- All diarrheal disease comprised 4% and Pneumonia 1.86% of total morbidity in the <5 years age group.

**Trends for Leading Priority Diseases in Pilot Governorates - Epiweeks 10 to 30, 2013**

**Proportional Morbidity for Leading Priority Diseases - Epiweek 30, 2013**

**Highlights**

- Reporting Rate

**Distribution of Reporting Rates by Governorates (Epi-week 30, 2013)**

**32 districts from 4 Governorates reported to eDEWS in week 30, 2013**

This weekly Epidemiological bulletin is published jointly by the Ministry of Public Health & Population and World Health Organization (WHO), WHO/EHA office, Sana’a, Yemen.

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Weekly trends of Diarrheal Diseases, Upper Respiratory infections, Suspected Malaria and Pneumonia (Epi week 10 to 30, 2013)

- URTI was highest in Governorate Aden (30.01%) this week.
- Diarrheal Disease was highest in Governorate Lahj (9.97%) this week.
- Malaria was highest in Governorate Lahj (7%) this week.

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Distribution of consultations of leading diseases by Governorates, Epiweek 30

- Lahj: 1443 consultations
- Aden: 1443 consultations
- Abyan: 408 consultations
- Taiz: 319 consultations
- Total: 2544 consultations

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Suspected Disease Lahj Aden Abyan Taiz Total
Upper Respiratory Infections 374 1443 408 319 2544
Pneumonia 82 121 156 57 416
Other Acute Diarrhea 252 441 90 0 966
Bloody Diarrhea 3 4 0 12 19
Acute Watery Diarrhea 0 0 0 0 0
Schistosomiasis 0 0 0 1 2
Malaria 13 24 0 0 78
Meningitis 2 8 0 0 19
Dengue Fever 0 0 0 0 0
Viral Hemorrhagic Fever 0 0 0 0 0
Rabies 0 0 0 1 4
Measles 0 0 1 0 1
Acute Viral Hepatitis (A & E) 3 7 0 0 14
Neonatal Tetanus 0 0 0 0 0
Acute Flaccid Paralysis 0 0 1 0 1
Cutaneous Leishmaniasis 0 0 0 0 0
Diphtheria 0 0 0 0 0
Pertussis 3 5 11 0 19
OtherUn 0 0 0 0 0
Other Consultations 1823 2748 1289 0 3392
Total Consultations 2558 4808 1981 4018 13365

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Number of alerts & outbreaks reported and investigated with appropriate response

- AWD: 0 alerts, 0 outbreaks
- Pertussis: 117 alerts, 1 outbreaks
- Measles: 116 alerts, 0 outbreaks
- AFP: 22 alerts, 0 outbreaks
- Schistosomiasis: 4 alerts, 0 outbreaks
- Bloody Diarrhea: 10 alerts, 0 outbreaks
- NW: 17 alerts, 0 outbreaks
- Dengue Fever: 21 alerts, 0 outbreaks
- Meningitis: 26 alerts, 0 outbreaks
- LL: 29 alerts, 2 outbreaks
- MIF: 8 alerts, 0 outbreaks
- QAD: 3 alerts, 0 outbreaks
- Pneumonia: 1 alert, 0 outbreaks
- Total: 641 alerts, 22 outbreaks

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**Lahj Governorate**

25 health facilities from 13 districts in Lahj governorate reported to eDEWS with a total of 2558 patients consultations in week 30, 2013. Total 4 alerts were reported and appropriate measures were taken in week 30, 2013. Altogether 2 alerts for C. Leishmaniasi, and 1 each for Pertussis and Acute Flaccid Paralysis were reported and responded.

**Aden Governorate**

22 health facilities from 8 districts in Aden governorate reported to eDEWS with a total of 4808 patients consultations in week 30, 2013. Total 10 alerts were reported and appropriate measures were taken in week 30, 2013. Altogether 3 alerts Measles, 2 Pertussis, and 1 each for Acute Flaccid Paralysis, Meningitis, OAD, Pneumonia and Malaria were reported and responded.

**Abyan Governorate**

20 health facilities from 4 districts in Abyan governorate reported to eDEWS with a total of 1981 patients consultations in week 30, 2013. Total 4 alerts were reported and appropriate measures were taken in week 30, 2013. Altogether 2 alerts each for Pertussis and Measles were reported and responded.

**Taiz Governorate**

16 health facilities from 7 districts in Taiz governorate reported to eDEWS with a total of 4018 patients consultations in week 30, 2013. Total 4 alerts were reported and appropriate measures were taken in week 30, 2013. Altogether 2 alerts each for Pertussis and Measles, NNT and Meningitis were reported and responded.

**Alert/Outbreaks Responded in Epi-week 30, 2013**

<table>
<thead>
<tr>
<th>Suspected Disease</th>
<th>Governorate</th>
<th>District</th>
<th>HFs</th>
<th>Actions Taken / Notes</th>
<th>Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pertussis</td>
<td>Lahj</td>
<td>Labaos</td>
<td>Labaos Hospital</td>
<td>Lahj Surveillance Coordinator, it was informed that SC will visit the HF for further investigations and community health education about immunization.</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>AFP</td>
<td>Lahj</td>
<td>Labaos</td>
<td>Labaos Hospital</td>
<td>eDEWS team contacted focal point, the case was suspected AEP. Came to Lahoum hospital, surveillance coordinator was informed, stool sample was collected and sent to central surveillance center in Sana'a.</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Pertussis</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wali and Al-Wahdah HFs.</td>
<td>eDEWS team contacted focal point, cases was diagnosed clinically using case definition, Antibiotic treatment was given to the patient.</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Measles</td>
<td>Aden</td>
<td>Al Mansura, Al-Tawashi and Cranier</td>
<td>Al-Wali, Al-Qallooa’a and Al-Qateea HFs.</td>
<td>eDEWS team contact focal point, information shared, Blood samples were collected from the 3 cases and sent to sana'a central lab. For lab. Confirmation.</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wahdah Hosp.</td>
<td>A female child, 1year and 6months, admitted to hospital on 27/7/2013. The case was diagnosed as broncho pneumonia. She was in a bad condition, complaining of high fever, dyspnea, vomiting, diarrhoea that caused electrolyte disturbance. She also developed convulsions. The case died on the 30/7/2013.</td>
<td>35</td>
<td>1</td>
</tr>
<tr>
<td>OAD</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wahdah Hosp.</td>
<td>A female child, 11months old, admitted to hospital on 20/7/2013. The case diagnosed as SAMA (severe acute malnutrition) with chronic diarrhea and severe dehydration. She died on the 24/7/2013 from complication of malnutrition.</td>
<td>119</td>
<td>1</td>
</tr>
<tr>
<td>Malaria</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wahdah Hosp.</td>
<td>A female child, 5years and 6 months, admitted to Hospital on 10/7/2013. The case was diagnosed as cerebral malaria with complication. The case was treated with Quinine infusion and IV antibiotics. The case deteriorated and died on 24/7/2013.</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>Meningitis</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wahdah Hosp.</td>
<td>Case 1: A male neonate aged 10 days admitted to hospital on 23/7/2013. He was diagnosed as Late neonate sepsis (suspected meningitis). He was in a severe condition and died on the same day of admission. eDEWS team visited the hospital, information shared, CSF samples were collected from case. (Three cases were form Lahj)</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>AF</td>
<td>Aden</td>
<td>Ash Shaikh Ouchtman</td>
<td>Al-Wahdah Hosp.</td>
<td>Case 1: A male child, 6 months old form Lahj. Admitted on 15/7/2013 as Partially treated meningoencephalitis. He developed hypotonia of lower limbs with head lag. Surveillance coordinator was informed, stool sample was collected and sent to central surveillance center in Sana'a last week. CSF was done and the result was negative. Blood for MPVS was done and it was negative. Patient died on the 30/7/2013. For lab. Confirmation.</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Pertussis</td>
<td>Abyan</td>
<td>Khanfir</td>
<td>MCH Ja'ar</td>
<td>eDEWS team contacted focal point, cases was diagnosed clinically using case definition, Antibiotic treatment was given to the patients.</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Measles</td>
<td>Abyan</td>
<td>Khanfir</td>
<td>MCH Ja'ar</td>
<td>eDEWS team contact focal point, information shared, Blood samples were collected from cases and sent to sana'a central Lab. For lab. Confirmation.</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Meningitis</td>
<td>Taiz</td>
<td>Al Qahirah</td>
<td>Sweden Hospital</td>
<td>District coordinator contacted information shared, samples were sent to HF lab. results are awaited.</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>NNT</td>
<td>Taiz</td>
<td>Al Qahirah</td>
<td>Sweden Hospital</td>
<td>The suspected NNT case aged 10 days M child brought to hospital 7 days ago. C/O fever convulsion and inability to breast feed(sucking), he was admitted into hospital, anti-tetanus toxoid doses were given and he is improving.</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Measles</td>
<td>Taiz</td>
<td>AlMukha</td>
<td>Mukha Hospital</td>
<td>District coordinator, information shared, blood samples were collected but werent sent yet to the central lab in Sanaa.</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

The objective of this weekly epidemiological bulletin is to provide a snapshot on selected health events reported from the eDEWS surveillance system in four governorates (Aden, Lahj, Abyan, and Taiz) of Yemen. While every attempt is made to present the weekly trends of epidemic prone diseases, the information presented in the bulletin needs to be interpreted in the context that precise information on the reference populations is not always available. The bulletin also includes information collected by the eDEWS teams. The primary focus of DEWS is early detection of epidemic prone disease, to facilitate a rapid public health response.

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