





Cholera in South Sudan Situation Report # 90 as at 23:59 Hours, 25 -31 August 2014

Situation Update

As of 31 August 2014, a total of 6,037 cholera cases including 139 deaths (CFR 2.3%) had been reported in South Sudan as summarized in Tables 1 and 2.

Table 1. Summary of cholera cases reported in Juba County, 23 April –31 August 2014

Reporting Sites	New admisions 18-24 Aug 2014	New discharges 18-24 Aug 2014	New deaths 18-24 Aug 2014	Total cases currently admitted	Total facility deaths	Total community deaths	Total deaths	Total cases discharged	Total cases
ЈТН СТС	1	0	0	0	16	0	16	1452	1471
Gurei CTC (changed to ORP)	Closed 28 July				2	0	2	365	367
Tongping CTC		0	0	0	2	1	3	69	72
Jube 3/UN House CTC		0	0	0	0	0	0	87	87
Nyakuron West CTC	Closed 15 July				0	0	0	18	18
Gumbo CTC	Closed 5 July				0	0	0	48	48
Nyakuron ORP	Closed 5 July				0	0	0	20	20
Munuki ORP	Closed 5 July		0	0	0	8	8		
Gumbo ORP	Closed 15 July	0	3	3	67	70			
Pager PHCU	21	11	0	4	1	5	6	20	30
Other sites	0	0	0	0	1	15	16	1	17
Total	22	11	0	4	22	24	46	2165	2218

N.B. To prevent double counting of patients, transferred cases from ORPs to CTCs are not counted in the ORPs.

Table 2: Summary of cholera cases reported outside Juba County, 23 April –31 August 2014

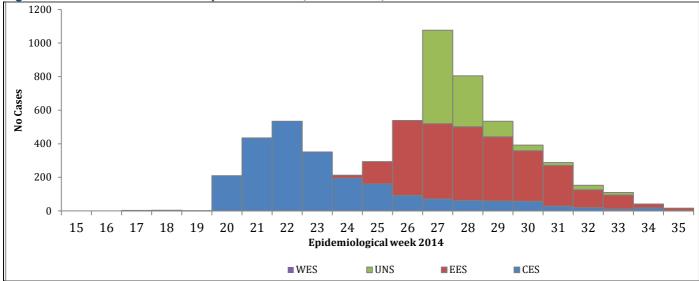
States	Reporting Sites	New admisions 25-01 Aug 2014	New discharges 25-01 Aug 2014	New deaths 25-01 Aug 2014	Total cases currently admitted	Total facility deaths	Total community deaths	Total deaths	Total cases discharged	Total cases
CER	Kajo-Keji civil hospital	0	0	0	0	3	4	7	82	88
CES	Yei Hospital		0	0	0	0	2	2	45	47
WES	Lanyi- Mundri East		0	0	0	0	0	0	3	3
Jonglei	Kolmanyang, Bor		0	0	0	0	0	0	1	1
	Nimule Hospital	0	0	0	4	0	0	0	54	58
	OTC PHCC, Magwi		0	0	0	10	0	10	141	151
	Magwi PHCC	0	0	0	5	1	0	1	12	18
	Pajok PHCC, Magwi		0	0	0	0	0	0	1	1
	Nyolo CTC, Magwi	0	0	0	0	0	0	0	25	25
	Idali PHCU, Lafon		0	0	0	5	1	6	90	96
	Lwala PHCU, Pachidi payam, Lafon		0	0	0	0	1	1	1	2
	Longiro PHCU,Lafon		0	0	0	1	0	1	15	16
EES	Lalanga PHCU, Lafon	0	0	0	0	0	2	2	63	65
	Torit Hospital	6	4	0	0	8	9	17	1403	1420
	Bur Mutram PHCU, Bur Payam, Torit		0	0	0	0	1	1	59	60
	Ohiri PHCC, Bur Payam, Torit		0	0	0	3	0	3	53	56
	Ohila PHCC, Bur Payam, Torit		0	0	0	0	0	0	24	24
	Imurok PHCU, Imurok Payam, Torit		0	0	0	2	1	3	10	13
	Hiyala PHCC, Torit		0	0	0	0	0	0	86	86
	Olere PHCU, Imurok Payam, Torit		0	0	0	0	0	0	4	4
	Osito PHCU, Bur payam, Torit		0	0	0	0	0	0	42	42

States	Reporting Sites	New admisions 25-01 Aug 2014	New discharges 25-01 Aug 2014	New deaths 25-01 Aug 2014	Total cases currently admitted	Total facility deaths	Total community deaths	Total deaths	Total cases discharged	Total cases
	lleu PHCU, Hiyala payam, Torit		0	0	0	3	7	10	147	157
	Hileu PHCC, Himodonge Payam, Torit		0	0	0	0	0	0	6	6
	Ofiri PHCU, Kudo Payam, Torit		0	0	0	0	0	0	5	5
	Kudo PHCC, Kudo Payam, Torit		0	0	0	1	0	1	54	55
	Moti PHCU, Ifwotu, Torit		0	0	2	0	1	1	4	7
	Riwoto PHCC, Kapoeta North		1	0	0	1	0	1	68	69
	SSRCORPs, Nyong Payam, Torit		0	0	0	0	0	0	70	70
	St. Theresa, Isohe, Ikotos	9	7	1	2	2	2	4	93	100
	Ibahure PHCC, ibahure Payam, Lopa/Lafon		0	0	2	1	0	1	23	25
	Other sites		0	0	0	0	0	0	23	24
	Kaka		0	0	0	0	0	0	0	1
Upper Nile	Wau Shilluk, Malakal		0	0	4	15	2	17	885	906
	Malakal PoC		0	0	0	2	0	2	59	61
	Other sites		0	0	0	2	0	2	55	57
Total	Total		12	1	19	60	33	93	3706	3819

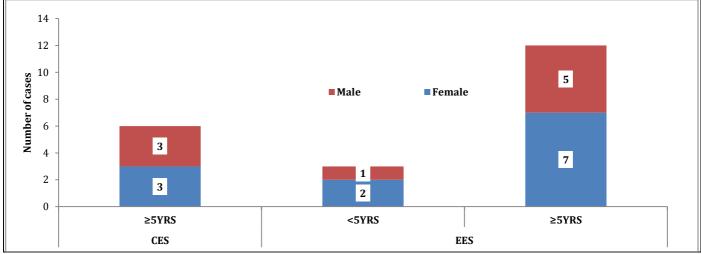
x: Facilities that did not report;

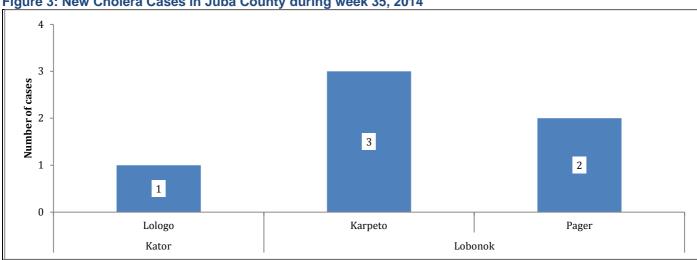
-- no cases reported for at least two weeks





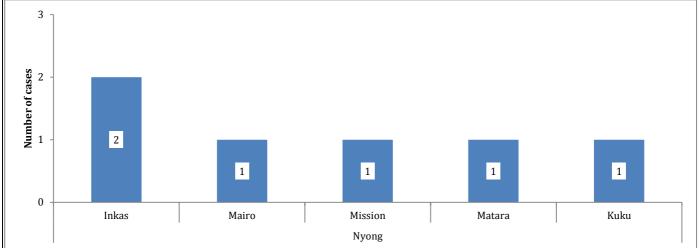














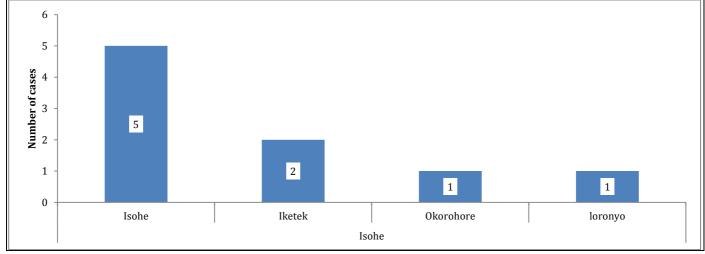


Table 3. Cholera alerts reported between 25 – 31, August 2014

Date of	Details of the alert	Area	Action			
Date of notification 24/08/2014	Pager PHCU reported a cluster of nine (9) acute watery diarrhoea cases including five (5) community deaths. The cases have been reported from	Lobonok	 Verification exercise was conducted by the county surveillance team The WHO has provided case management supplies and a tent to accommodate the 			
	two (2) villages (Karpeto & Pager) in Lobonok Payam, Juba County. By 31 August 2014; the cases had risen to 30 including six (6) deaths [five community deaths & one death in the health facility]. There were four (4) cases on admission at the health centre by 1 September 2014.		suspected cases - WASH interventions at the community level are still pending			

Surveillance and laboratory

- A new cluster of cases has emerged in two villages (Karpeto and Pager) in Lobonok Payam, Juba County. Thirty
 cases have been identified including six deaths (five in the community). World Health Organization provided case
 management supplies and a tent to Pager PHCU where the cases are being managed. The affected villages have
 been prioritized for active case search, social mobilization, and WASH interventions.
- In Eastern Equatoria, the new cholera cases reported in Torit and Ikotos counties declined from 27 and 10 cases in week 34 to 6 and 9 cases in week 35 respectively. No new cases were reported in Magwi and Owiny Kibul. Line lists were not submitted from the sites supported by Save the Children International and South Sudan Red Cross.
- There were no new cholera cases reported from Malakal PoC or Wau Shiluk in week 35.
- As seen from figure 1, the cholera trend is on the decline in all the five states where cases have been confirmed.
- Out of the seven samples tested by the National Reference Laboratory during week 35; three were positive (one from Tongping IDP camp and two from Torit).
- Overall, 187 (43.4%) of the samples tested have been positive for cholera by culture.
- Due to the declining cholera trend, it is recommended that all new suspect cholera cases have samples obtained for laboratory confirmation.

Case management

- Case management supplies and a tent have been delivered by WHO to Pager PHCU in Lobonok Payam where a new cluster of cases emerged on 24 August 2014.
- Case management activities continue to be conducted in the counties of Torit, Ikotos, & Lopa-Lafon where cholera cases are being reported.

Social mobilization

Central Equatoria State (CES):

- A total of 4,918 households and 25,071 total beneficiaries were reached with cholera prevention messages in Munuki and Gudele 1 and 919 ORS sachets distributed to 500 beneficiaries.
- Todate partners have reached 110,000 households in Juba and initiated a second round of social mobilization campaigns targeting 32,000 households. Knowledge gaps on cholera prevention and good hygiene practices; inadequate access to clean water and sanitation; lack of soap for hand washing and lack of solid waste disposal options remain major challenges.

Eastern Equatoria State (EES):

• A meeting was conducted with partners involved in social mobilization to review response activities as such a reviewed response plan for all counties is being developed and will be shared with all partners once complete.

Jonglei:

- Community mobilization has been stepped up through house-to-house mobilization, media awareness, daily radio spots and weekly talk shows, community meetings and weekly announcements through churches. As of 28th August 5,313 households had been reached with key messages ,demonstrations on hand washing, water treatment and use of oral rehydration solution in Langbar,Marol, Malou, Lenguet, Block 1,2,3&4, Malual-chat, Ritnom, Panapet,Thonbuor, Panliet. Thirty-five community meetings were conducted reaching 179 community leaders including religious, local chiefs, youth and women group leaders.
- A total of 500 Information, education and communication (IEC) materials (including posters, banners and stickers) were distributed to the community. Seventeen head teachers from different primary schools in Bor town were given sensitized on cholera prevention and control. In addition, messages are being broadcast six times a day on Radio Jonglei FM 95.9.

In Mingkaman, Lakes State:

 Ninety-four households (site1:30, site2:24 and site0:40) were reached with key messages cholera prevention in the state. Three Radio stations (Rumbek FM98, Good News Radio FM89 & Radio Mingkaman FM100) in Lakes state continue airing radio messages. AWODA/County Health Department continue disseminating messages in churches and market places, over 4,000
people have been reached using this intervention.

WASH

This week, WASH partners continue to respond in the hotspot areas

Central Equatoria State

- A total of 3,473 buckets, 3,473 bars of soaps, 138, 240 Purs were distributed to 3,473 households in Juba reaching an estimated 20 840 people across various location in Juba county.
- Hygiene promotion messages were disseminated to 3,666 people focusing on cholera prevention, control, hand washing with soap, promotion of safe food practices and safe water chain management. House-to-House visits were also conducted in Ghabat quarter.
- A total of 5000 liters of safe drinking water is being provided daily to people in Konyokonyo market, 40 water vendors were trained in safe water collection, 40 food providers trained in safe food handling, preparation and serving and Hygiene promotion activities and communities mobilization focusing on hand washing with soap and safe food practice were conducted.
- In northern Bari, partners conducted hygiene awareness at household levels through mobilization of 19 community hygiene promoters, provided water for hand washing facilities in Nabari and New site markets and installed new SWAT with an estimated capacity of around 2000 Liters per hour at Nabari.

Upper Nile State

 WASH interventions are ongoing in Malakal PoC and Wau Shilluk including safe water provision, sanitation and hygiene messaging.

Eastern Equatoria State

- Distribution of WASH items such as aquatabs, ORS, soap and pur continued in Torit town despite a reduction in cases. House to house hygiene promotion, radio talk shows were held four times a week.
- The water supply to the community in Torit continued using three water purification units and depending on the context, the purification unit run by South Sudan Red Cross may continue running until end of October thereafter it will be demobilized.
- Three hundred and thirty six households were reached with mass hygiene promotion and 336 strips of aquatabs distributed.
- Mass hygiene promotion using speakers mounted on a pickup truck was conducted in Magwi and Owinykibul complementing the house-to-house promotion as such 8,009 people were reached.
- ARC arrived at the county to start their initial three months interventions on WASH,
- In Nimule, ARC will reinforce partners on grounds to respond to the increasing cases of cholera in Nimule.
- In Ikwoto County, hand pumps repair are ongoing

Gaps and needs

- Less information is fed in to the state task force on the number of suspected cholera cases in Lopa/Lafon,.
- With the exception of one-health facility in Lopa/Lafon, all the other health facilities with cholera cases do not have an
 isolation wing instead, patients are treated under trees. This raises the question of the capacity of health facilities and
 supporting agencies in the management of the cases.
- Need to intensify hygiene promotion through the home health promoters to negotiate affordable ways of improving sanitation among communities especially those that are settled up in the mountains to address the issue of open defecation.

Conclusions and Recommendations

Overall, cholera is on the decline countrywide. The following are the key recommendations:

- Conduct periodic random sample testing of for acute watery diarrhea cases to rule out cholera in areas where cholera treatment centers/oral rehydration points are no longer receiving cases.
- Sustain interventions to the other affected counties in the areas of case management, surveillance and laboratory, social mobilization and WASH.

Many thanks to the staff at CTCs, MoH at national level and state levels, especially the Department of IDSR, who have helped to gather the information presented here. Situation Reports are posted on the WHO website: http://www.who.int/hac/crises/ssd/en/ as well as on the Humanitarian Info webpage: http://www.who.int/hac/crises/ssd/en/ as well as on the Humanitarian Info webpage:

The MoH/WHO surveillance team welcomes feedback and data provided by individual agencies. Given the fast evolving nature of this epidemic, errors and omissions are inevitable: we will be grateful for any information that helps to rectify these. Send any comments and feedback to: E-mail: outbreak_ss_2007@yahoo.com, **The Toll free numbers for alerts** are: **Gemtel:** 9999, **Vivacell:** 0952000098 and Zain: 0912000098.

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