



Epidemiology Unit
Ministry of Health

COMMUNICABLE DISEASE WEEKLY UPDATE

Internally Displaced Persons, Vavuniya District

No 15; Weeks 43, 44 & 45 (17 Oct - 06 Nov 2009)



As of 03 November 2009, the total number of IDPs was 155,417 (53,401 families). About 89% of these IDPs (i.e. 138,956) were temporarily settled in relief villages, named from zone 0 to 7 located in the Cheddikulam MOH area. In addition, there were 3 welfare centres in Vavuniya South MOH area, where 10,441 IDPs (6%) were looked after. The remaining 6020 (4%) were in Vavuniya MOH area in 5 centres, which were smaller in size and transit in nature.

Disease Surveillance

Disease surveillance in the zones located in the Cheddikulam MOH area is the responsibility of the Directorate of IDP Health Care. In the IDP sites in Vavuniya and Vavuniya South MOH areas, disease surveillance activities are conducted by the range PHII under the guidance of the relevant MOH. However, for the period of analysis, no disease surveillance data were available from the Tharmapuram welfare centre and the transit camps in Vavuniya MOH area. For the calculation of disease incidence rates, the population in these IDP sites was excluded from the denominator (i.e. number of IDPs 10,033, 6% of total number of IDP). Due to the accelerated resettlement programme, the number of total IDPs is changing every day. For the calculation of incidence rates for this update, the population distribution of IDPs on November 3rd, 2009 has been used.

The trend of field notification of priority diseases (absolute numbers and weekly incidence rates) over time has been summarized below. This analysis was based on the notifications received from field hospitals and mobile health units. In addition, wherever appropriate, details of admission of IDP patients to hospitals in Vavuniya district (i.e. Vavuniya General Hospital, Cheddikulam Base Hospital and Poovarasankulam Hospital) have also been given. For most of the priority diseases analyzed, a marked reduction in the field notifications and a moderate reduction in

incidence rates have been observed during the period of analysis (17 October - 06 November, 2009). Decongestion in IDP sites and improvement in the water quality (mainly in the zones) were the main factors contributed to this observation.

Diarrhoea

Field notification: During the reporting period (17 October - 06 November), a marked reduction was observed in the number of diarrhoea cases (Fig. I). The lowest number of diarrhoea cases for a week was recorded during the last week of reporting period (31 October - 06 November). A total of 205 cases were reported during this week and among them 69 were from zone 1.

Weekly incidence: However, only a moderate reduction was observed in the weekly incidence of diarrhoea during the period of analysis (Fig. II). It was mainly due to declining number of IDPs (i.e. denominator). The incidence rates of diarrhoea for the last week of reporting period (31 October - 06 November) in zone 6 (435/100,000), zone 5 (222/100,000), zone 1 (201/100,000), smaller camps (187/100,000) and zone 0 (179/100,000) were more than the average incidence for all IDP sites (141/100,000). Since 1st week of September, the weekly incidence for diarrhoea in zone 4 has been much lower than that of other IDP sites. Under reporting should be excluded before commenting on this observation.

**Fig I: Field notification of diarrhoea and dysentery cases
01 June - 06 November 2009**

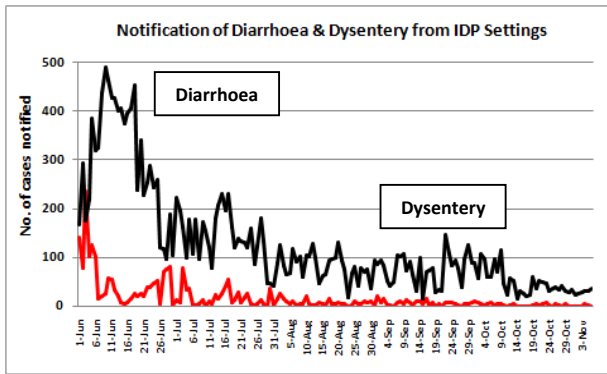
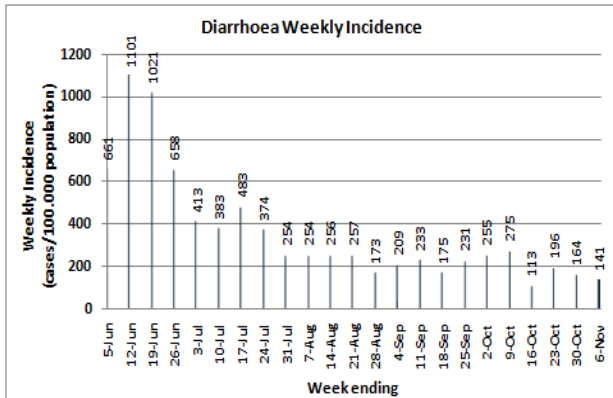


Fig II: Trend for weekly incidence of diarrhoea since 1st week of June, 2009

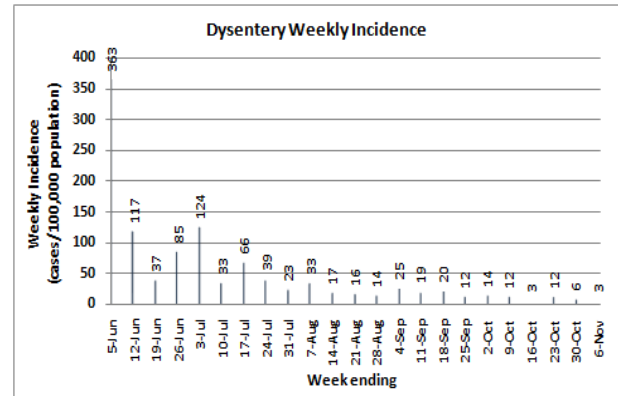


Dysentery

Field notification: During the reporting period (17 October - 06 November), for most of the days there was ‘nil reporting’ (Fig. I). Only 05 cases were reported during the last week of reporting period (31 October - 06 November). All five were from smaller camps.

Weekly incidence: Since the analysis began in June 2009, the lowest number of field notifications (n = 5) and incidence rate for dysentery (3/100,000) was recorded during the last week of reporting period (Fig. I & III). Constant reporting of high incidence from Sumathipuram and Veerapuram during the reporting period stresses the need for appropriate interventions.

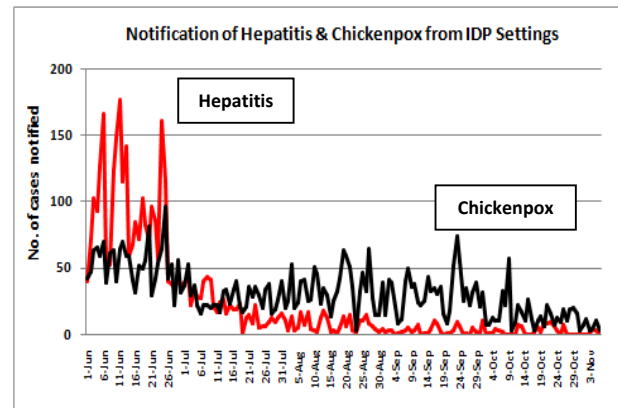
Fig III: Trend for weekly incidence of dysentery since 1st week of June, 2009



Hepatitis A

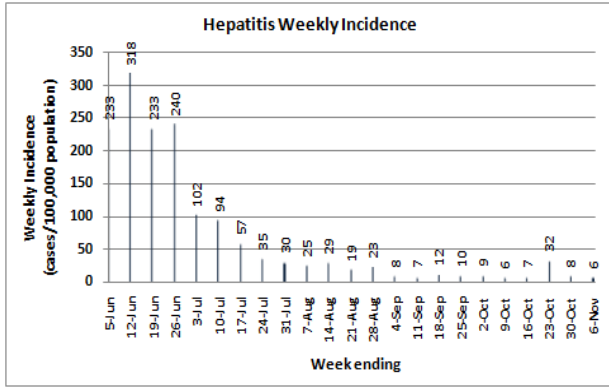
Field notification: The outbreak of hepatitis peaked during May - June, 2009 is well under control especially in the zones (Fig. IV) and almost all the cases reported now were from Sumathipuram and Veerapuram. During the last week of reporting period only 09 cases were notified and out of them 08 were from these 2 welfare centres.

Fig IV: Field notification of hepatitis and chickenpox cases 01 June - 06 November 2009



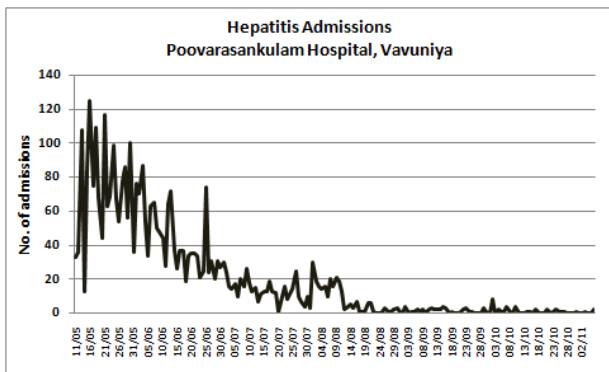
Weekly incidence: The falling incidence of hepatitis over time is clearly visible in Fig. V. However, a very high incidence rate of 124/100,000 was reported from the welfare centres located at Veerapuram and Sumathipuram during the last week of reporting period.

Fig V: Trend for weekly incidence of hepatitis since 1st week of June, 2009



Hospital admissions: The decreasing trend in the number of field notifications and incidence of hepatitis was well reflected on the number of hospital admissions also (Fig. VI). Since the beginning of isolation at Poovarasankulam Divisional Hospital (i.e. 11 May 2009) up to 06 November 2009, the cumulative total of hepatitis admissions was 3567. Out of the 09 field notifications made during the last week of reporting period, 04 cases were admitted (admission rate 44%) to Poovarasankulam Hospital.

Fig. VI: Trend for hepatitis admissions to the isolation facility from 11 May - 06 November 2009



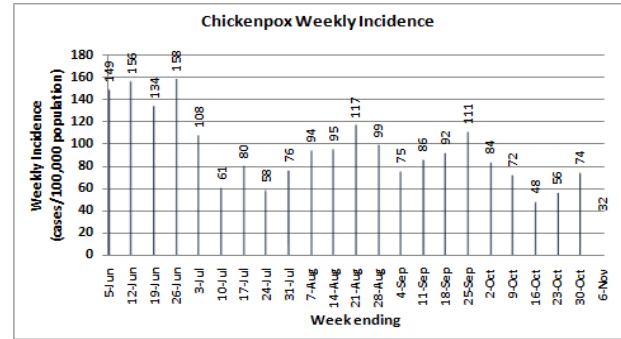
Chickenpox

Field notification: Despite a general reduction in the chickenpox field notifications (Fig. IV), during the reporting period zones 2 and 4 reported relatively large number of cases. During the last week of reporting period (31 October - 06 November), a total of 46 chickenpox cases were reported and out of them 20 were from zone 4.

Weekly incidence: The chickenpox epidemic peaked during April - May 2009 is currently in the declining phase (Fig. VII).

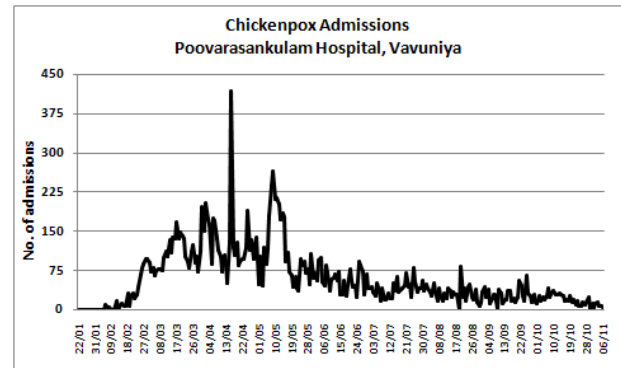
The lowest average incidence rate since the beginning of analysis in June 2009 was recorded in the last week of reporting period (32/100,000). However, during the above period incidence rates for zone 4 (106/100,000) and zone 0 (54/100,000) were more than the average incidence of chickenpox for all IDP sites.

Fig VII: Trend for weekly incidence of chickenpox since 1st week of June, 2009



Hospital admissions: Since the beginning of isolation at Poovarasankulam Hospital (i.e. 22 January 2009) up to 06 November 2009, the cumulative total of chickenpox admissions was 16,924. The number of admissions during the last week of reporting period was 61 (Fig. VIII).

Fig. VIII: Trend for chickenpox admissions to the isolation facility from 22 January - 06 November 2009



Measles

Hospital admissions: Since June 27 up to October 08, 2009, a total of 90 suspected measles cases (IDPs) were admitted to hospitals (Poovarasankulam Hospital - 64, Cheddikulam BH - 22 and Vavuniya GH - 04). Notably, during the same period, there were no measles notifications from the host population. Since October 8th, there were no notifications even among IDPs clearly demonstrating the effectiveness of

recently conducted measles immunization programme.

Typhoid fever

Since 01 June up to 06 November 2009, 511 cases of enteric fever were notified from field hospitals/ mobile health units functioning in IDP sites. Only two cases were notified in the last week of reporting period (31 October - 06 November). A polysaccharide injectable vaccine, which is effective for 3 years, has been given to all health workers/ promoters/ volunteers and sanitary workers. Depending on the availability of vaccine, there are plans to expand vaccination coverage to include occupants of high

risk IDP sites. Based on the epidemiological data available, children aged 2 - 15 years will be given priority.

Mumps

Since the 1st case was admitted on June 25th up to November 06, 2009, a total of 56 mumps patients (IDP) have been treated at Poovarasankulam Hospital. In addition, one patient was managed at Cheddikulam Base Hospital. Most of the cases were from zones 6 & 7 and almost 75% were in the age group of 1 - 15 years. It should be noted that there is no vaccination available against mumps in the National Immunization Programme.

Annexure: Field notification of priority diseases by IDP site (Reporting week Oct 31 - Nov 06, 2009)

Disease	IDP Site	Cumulative total of cases	No. of cases reported during	Weekly Incidence Rate
		reported during June 01 - November 06, 2009	Oct 31 - Nov 06, 2009	Oct 31 - Nov 06, 2009 (per 100,000)
Hepatitis	Zone 0	366	00	00
	Zone 1	827	00	00
	Zone 2	556	00	00
	Zone 3	892	00	00
	Zone 4	533	01	05
	Zone 5	144	00	00
	Zone 6	06	00	00
	Zone 7	21	00	00
	Smaller/Transit sites	511	08	124
	Total	3856	09	06
Chickenpox	Zone 0	479	06	54
	Zone 1	495	08	23
	Zone 2	1310	04	11
	Zone 3	463	05	20
	Zone 4	1190	20	106
	Zone 5	100	00	00
	Zone 6	14	01	17
	Zone 7	12	00	00
	Smaller/Transit sites	1060	02	31
	Total	5123	46	32
Dysentery	Zone 0	47	00	00
	Zone 1	446	00	00
	Zone 2	434	00	00
	Zone 3	279	00	00
	Zone 4	1198	00	00
	Zone 5	13	00	00
	Zone 6	2	00	00
	Zone 7	14	00	00
	Smaller/Transit sites	84	05	78
	Total	2517	05	03
Diarrhoea	Zone 0	1534	20	179
	Zone 1	3357	69	201
	Zone 2	4321	32	91
	Zone 3	3950	28	110
	Zone 4	3145	06	32
	Zone 5	707	12	222
	Zone 6	178	25	435
	Zone 7	175	01	37
	Smaller/Transit sites	2933	12	187
	Total	20300	205	141

Data sources: Epidemiology Unit, Cheddikulam Coordination Centre, Vavuniya & Cheddikulam MOH Offices, RDHS Office Vavuniya, Poovarasankulam Hospital and District Secretariat, Vavuniya

Compilation and analysis: WHO Field Unit, Vavuniya