Six month follow up in communicable versus non-communicable diseases in an Iraqi refugee camp

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Original Articles

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Key message:

Despite overcrowding conditions, Iraqi refugees do not suffer from communicable diseases in comparison to non-communicable illnesses.

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Abstract:

Introduction: Massive internal displacement of Iraqi civilian in Autonomous Kurdistan led to humanitarian catastrophe. The aim of the study is to assess comparison of communicable to non-communicable diseases among the internally displaced in Autonomous Kurdistan.

Patients and Methods: In an open cohort two arm study, children vs adults and communicable vs non-communicable diseases, the occurrence of infectious and non-infectious diseases were compared during the first 6 months of 2016. Within the selected population of refugees

from the Mosul area of Northern Iraq and a timeframe of 6 months we performed 2,844 health consultations.

Results: 2,844 patients have been seen from a 9,000 size camp in the 6 months from January to June 2016: 212 patients were children; 1,632 adults. Acute Respiratory Infections were the most frequently diagnosed infection diseases, but represented only a minority among visits (325 of 2,844 cases, 12.4%). The rest, 87.6%, were war-conflict related diseases such as hypertension, depression, diabetes.

Conclusion: Non-infectious diseases prevalent among Iraqi refugees include asthma, diabetes, hypertension and reactive psychiatric disorders.

Introduction

After Mosul had been occupied by DAESH - forces of the self-declared Islamic State (IS) - about 1 million of the 3 million population was internally displaced (IDP) into UNHCR camps in the northwest of the Autonomous Republic of Kurdistan. One of the largest and oldest is the IB-2 Camp with capacity for 10,000 inhabitants where approximately 9,000 IDPs are still residing (1-5). The aim of this communication is to compare underlying diseases in both groups of IDP refugees in 2016.

Patients and Methods

In an open cohort two arm study: children vs adults and communicable vs non-communicable diseases, the occurrence of infectious and non-infectious diseases were compared during the first 6 months of 2016. We performed 2,844 health consultations within the selected population of refugees from the Mosul area of Northern Iraq within the 6 months timeframe.

Results

In the 6 months from January to June 2016, 2,844 patients from the 9,000 have been seen; 212 patients were children and 1,632 adults. Acute Respiratory Infections were the most frequently diagnosed infection diseases but represented only a minority among visits (325 of 2844 cases, 12.4%).

The rest (87.6%) were war-conflict related diseases such as hypertension, depression, diabetes.

Patients and Methods

Six months daily follow-up was performed with the population of Iraqi refugees from Mosul in an open cohort study in the single internally displaced type camp in Autonomous Kurdistan.

Results and Discussion

In the 6 months from January to June 2016, 2,844 patients from the 9,000 have been seen; 212 were children and 1,632 adults. Acute Respiratory Infections were the most frequently diagnosed infectious diseases, but represented only a minority of 325 from 2,844 cases (12.4%). The rest (87.6%) were war-conflict related diseases such as hypertension, depression, diabetes.

As seen from **Table 1**, infectious diseases (all but 7 of 325) were mostly respiratory infections (98%). This is a sign of a good hygienic standard and high public health level in the camp compared to the displacement after genocide in Rwanda in 1945 where a cholera outbreak had been reported (1-5); or after disaster relief on Haiti in 2010 where more than 300,000 cases of cholera have been observed among IDP after the earthquake (6). Also, other types of disease such as scabies were quite rare compared

to the “migrating” refugees on the Balkan Route (7). Suspected cases of diphtheria were not confirmed. Only 4 cases of Acute and Bloody Diarrhea among 2,844 visits have been observed (0.1%). Non-communicable diseases were highly prevalent (88%).

Tab.1 Clinic of Bl. Zdenka Schelling, Erbil – spectrum of patients

	No of cases <5Y		No of cases >=5Y	
	Male	Female	Male	Female
Respiratory Diseases				
1.Accute (upper) respiratory infection	54	46	105	120
2.Acute (lower) respiratory inf. (suspected Pneumonia)	3	2	8	1
Water Borne Diseases				
1.Accute Diarrhea	1	0	1	1
2.Bloody Diarrhea	1	0	0	0
3. Acute Watery Diarrhea	0	0	0	0
4.Acute Jaundice Syndrome	0	0	0	0
Vaccine Preventable Diseases				
1.Acute Flaccid Paralysis	0	0	0	0
2.Suspected Measles	0	0	0	0
3.Suspected Meningitis	0	0	1	1
4.Suspected Diphtheria	0	0	0	1
5.Suspected Pertussis	0	0	0	0
6.Suspected Neonatal Tetanus	0	0	0	0
Other Communicable Diseases				
1.Unexplained Fever	0	0	0	0
2.Suspected Leishmaniosis	0	0	0	0
3.Suspected Hemorrhagic fever	0	0	0	0
4.Skin Infections (Scabies)	0	0	2	1
5.Animal Bites	0	0	0	1
6.Acute Malnutrition	0	0	0	0
7.Other unusual communicable Diseases	0	0	0	1
8.Total number of all consultations	1	3	4	17

	Male No of cases <5Y	Female No of cases <5Y	Male No of cases <5Y	Female No of cases <5Y	Total numb.
Hypertension: Diagnose	0	0	45	77	122
Hypertension: Check up	4	0	340	414	758
Diabetes: Diagnose	0	0	45	77	122
Diabetes: Check up	3	0	144	218	365
Total # of all consultations	107	105	1,062	1,570	2,844

Conclusions

Massive internal displacement of Iraqi civilians into Autonomous Kurdistan led to humanitarian catastrophe. The aim of this study was to provide a comparison of communicable and non-communicable diseases among internally displaced people in Autonomous Kurdistan. Non-communicable diseases have high prevalence among populations of Iraqis from Mosul to Irbil.

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