## **CCHF in IRAQ: Background**



- CCHF Not Known in Iraq until September 1979
- When a Female Patient Presented with general Hemorrhagic Symptoms and died on 9 September 1979
- 4 Days Latter, a senior resident Physician and an assistant both had direct contact with the 1<sup>st</sup> patient, both died
- During the same year, 10 CCHF Cases were diagnosed (8 Female, 2 Male) with CFR 70 % (7 deaths out of 10)
- The disease was reported from well separated areas of the country which suggest the disease is endemic
- The other 8 cases had direct or indirect contact with sheep or cattle
- MOH Immediately put all their facilities and manpower to elucidate the nature of this disease and its
  control
- Quarantine Measures were undertaken in some of Yarmouk Hospital sections
- Neighboring Countries were notified
- Help was requested from WHO

Reference: Tantawi et al. Crimean Hemorrhagic fever Bagdad.



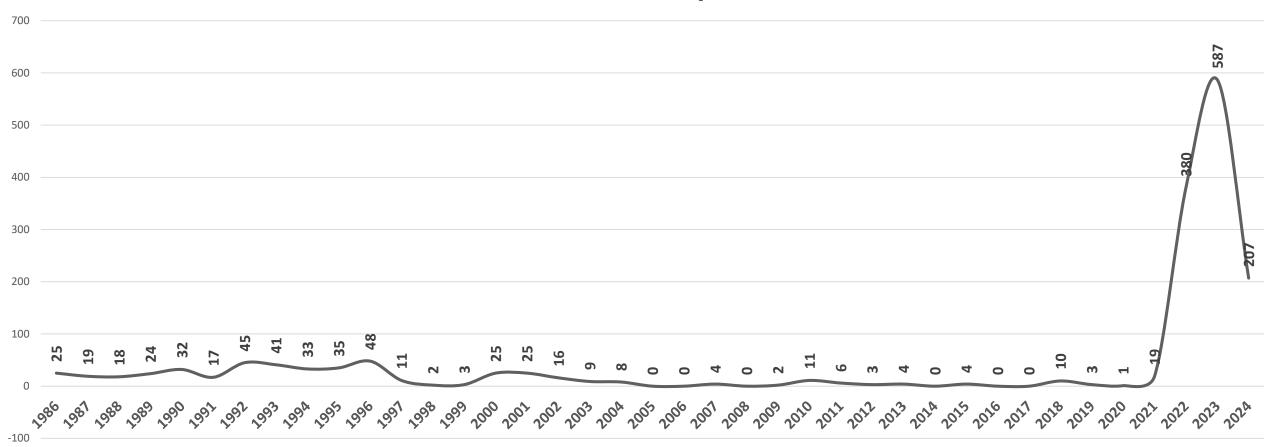




## Trend of CCHF in Iraq



#### **Trend of CCHF in Iraq since 1986**







Reference: MOH, PHD, CDC Baghdad Data



### Trend of CCHF in Iraq



- The surge of CCHF Cases, started at end of 2021
- This surge can be explained by the impact of COVID-19 Pandemic, which lead to cessation of control measures taken by MOA (Dipping & Spraying of the animal)
- Climate Change, Iraq is one of the five countries in the world worst affected by climate change (World Bank), Climate Change led to internal population displacement that led to increase population density and animal density which made the disease transmitted easily

Reference: MOH, PHD, CDC Baghdad Data

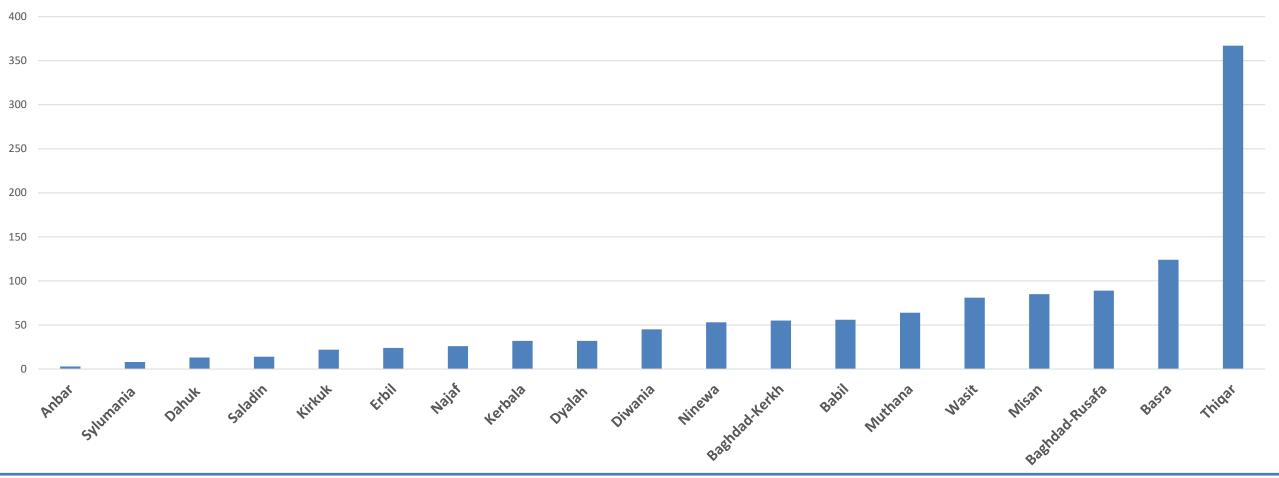






## Cumulative # of CCHF Confirmed Cases by Governorates 2021-2024



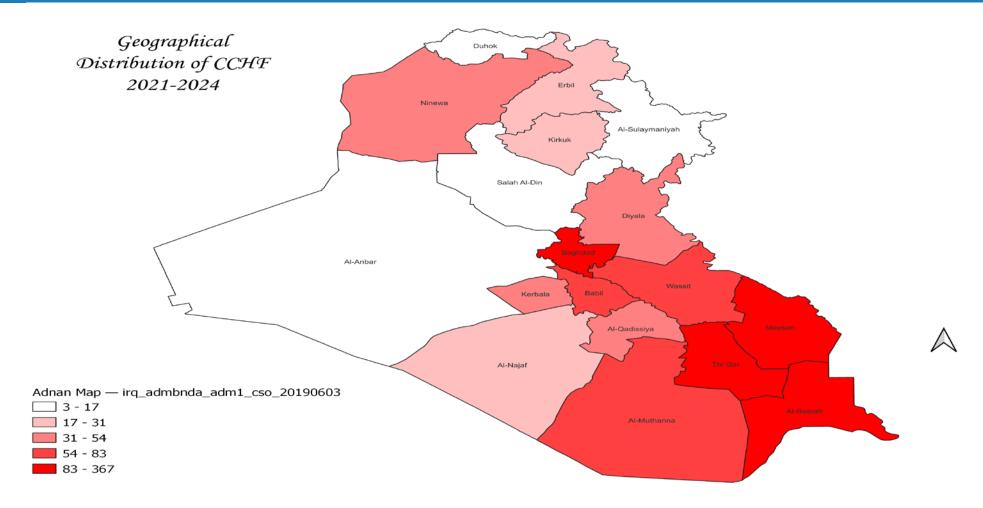












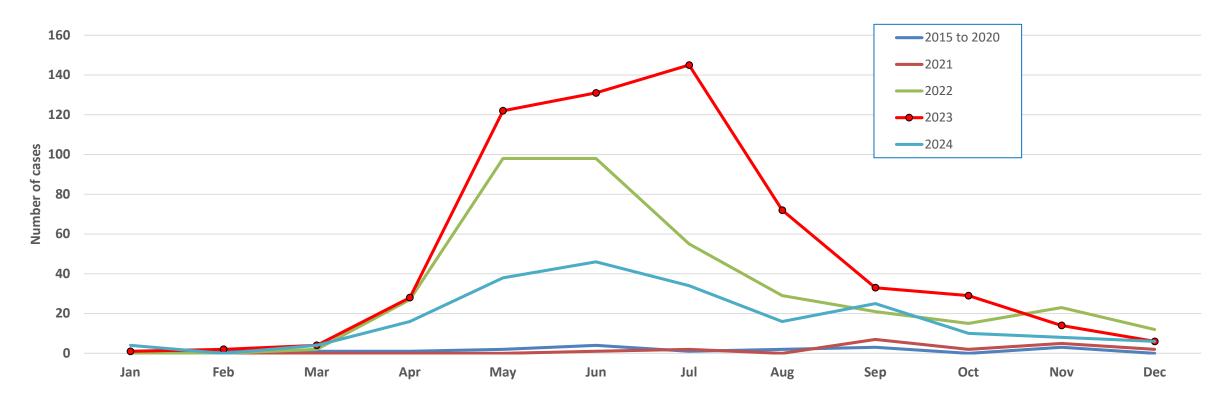






# Comparison of cumulative number of laboratory confirmed CCHF cases from 2015-2020 to year 2024 in







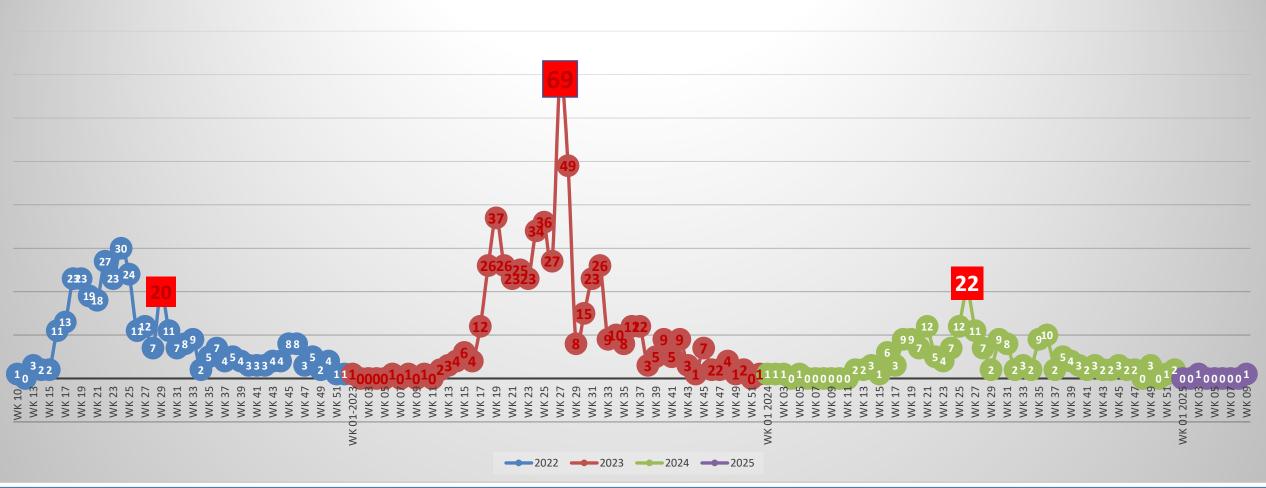






### CCHF Epi-Curve by Weeks 2022-2023-2024-2025







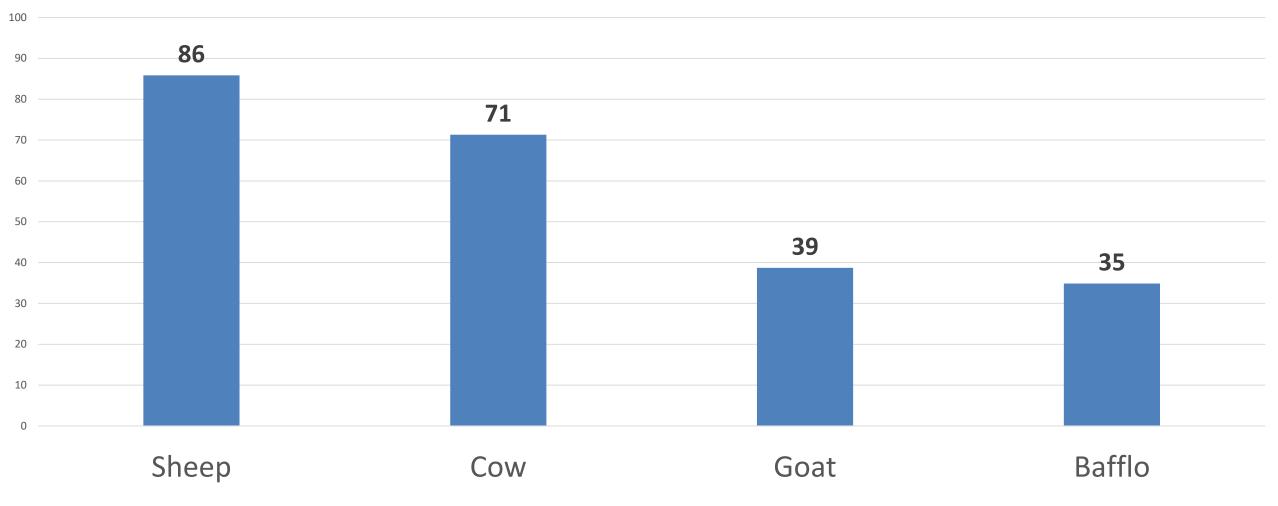


Reference: MOH, PHD, CDC Baghdad Data



# Percentage of Tick Infestation by Domestic Animal in Iraq







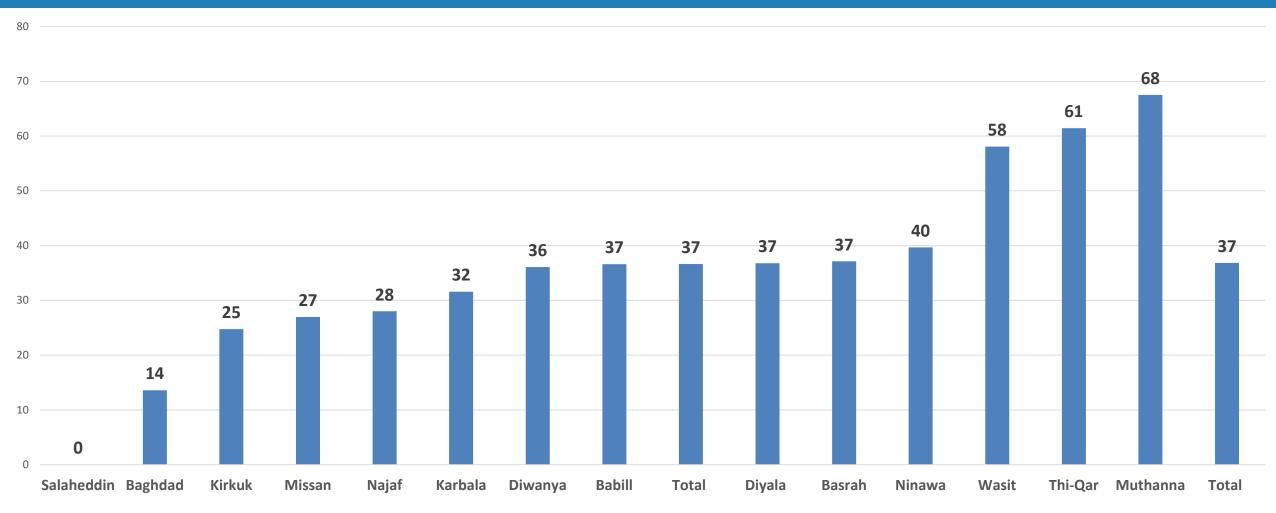


Reference: MOH, PHD, CDC Baghdad Data



## CCHF Sero Positivity Rate among Cows & Buffaloes by Governorates







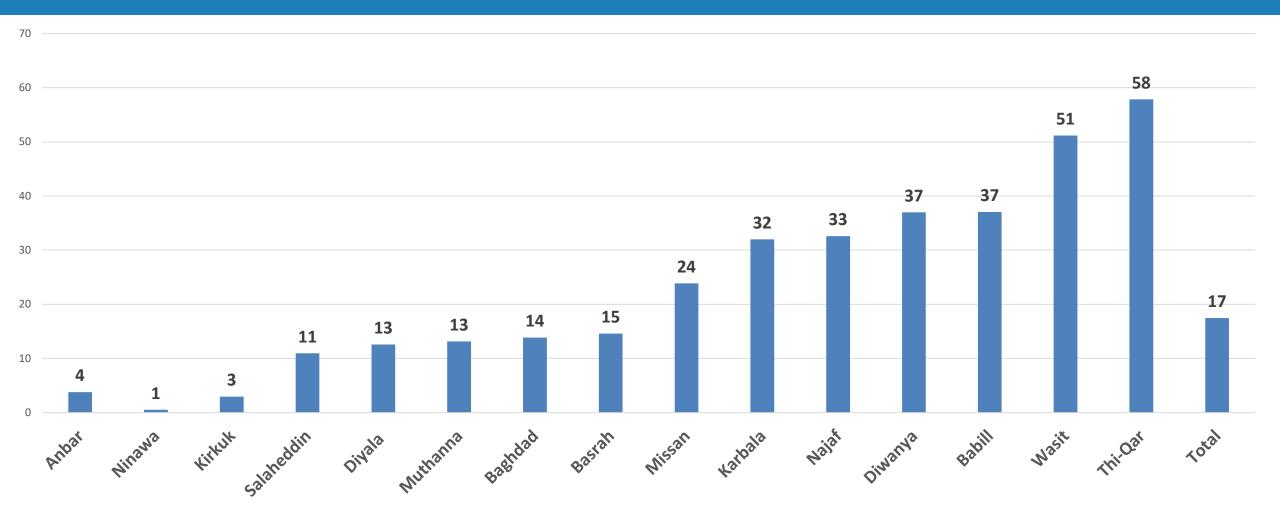


Reference: MOA, Central Veterinary Lab data

**EMERGENCIES** 

#### Sero Positivity Rate among Sheep & Goat by Governorates





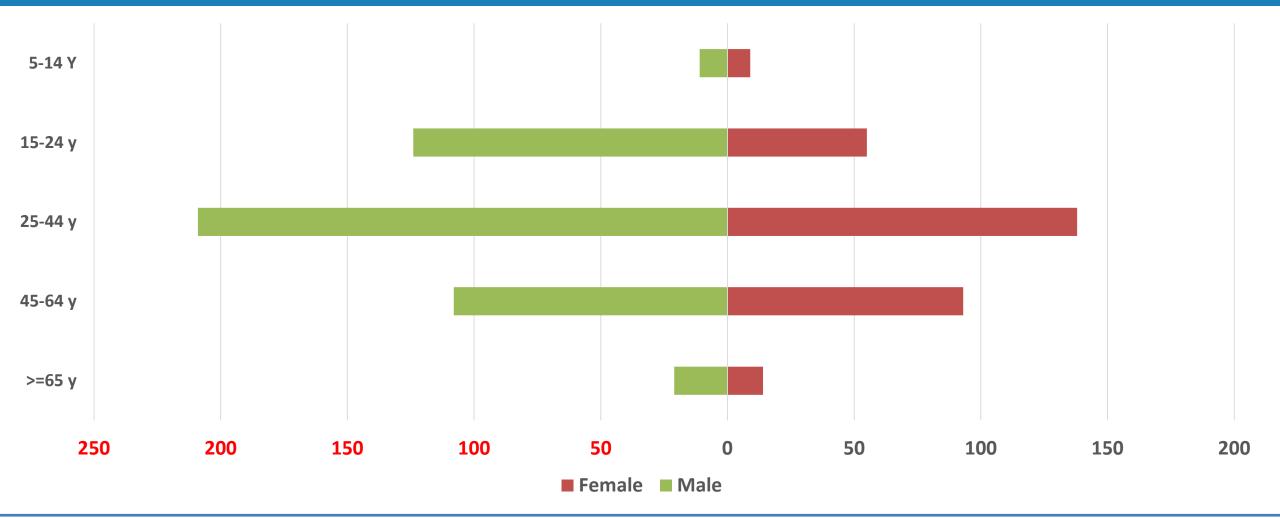




Reference: MOA, Central Veterinary Lab data

## Distribution of CCHF confirmed cases by Gender and Age group



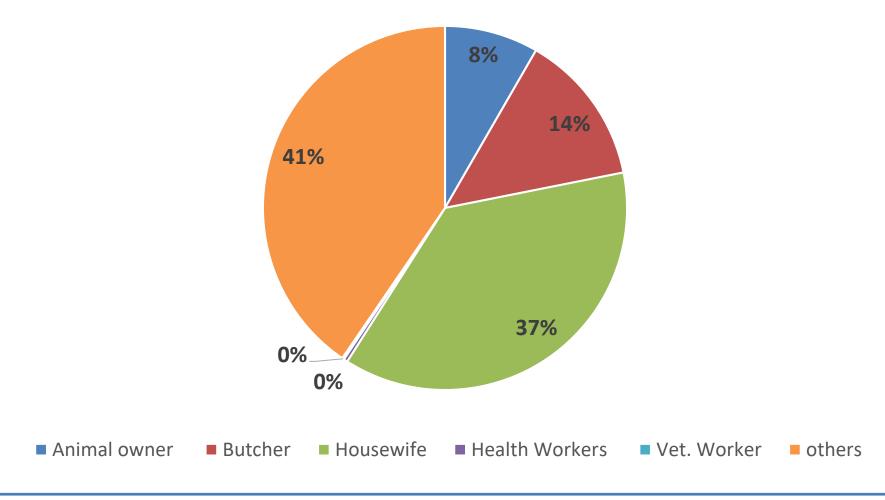






#### Distribution of CCHF confirmed cases by occupation









## WHO Response to Control the Outbreak (HQ, EMRO, CO)



WHO in coordination and cooperation with MOH conducted the following activities:

#### Surveillance, Laboratory, One Health Committee:

- Building capacity for RRT, outbreak investigation, strengthening surveillance
- Building capacity of Laboratory for detection of the virus through provision of Diagnostic kits, training including the gene-sequencing training (for both human and veterinary sectors)
- Advocate for multisectoral approach (One Health approach) to control the disease, one Health committee was established





## WHO Response to Control the Outbreak (HQ, EMRO, CO)



#### **Case Management**

- Development of CCHF national treatment protocol with procurement of essential medicines/supplies to hospitals
- Raising awareness of the front-line healthcare professionals for early suspicion and diagnosis of the disease (through the dissemination of standard case definition for all health facilities)
- Developed a CCHF case management algorithm, which was disseminated to all health facilities responsible for the care of CCHF cases)
- Trainings to improve case management capacities among healthcare professionals to reduce mortality

#### **Other Key Areas**

- RCCE targeted the risk group in the rural areas, social influencers
- 5 Years strategic plan was drafted and submitted to the MOH and MOA
- CSCP started in Basra DOH

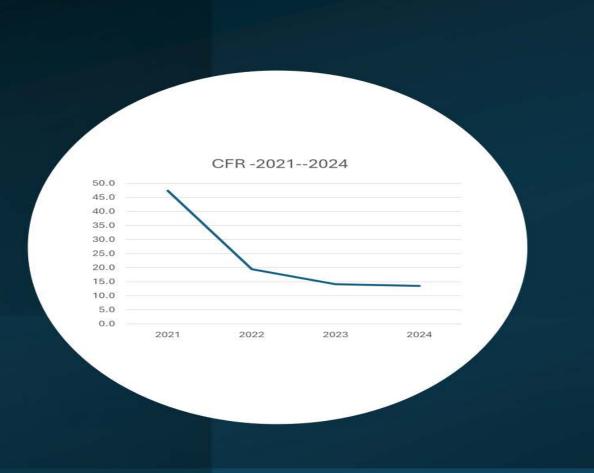






### Achievement:

Reduction of CFR

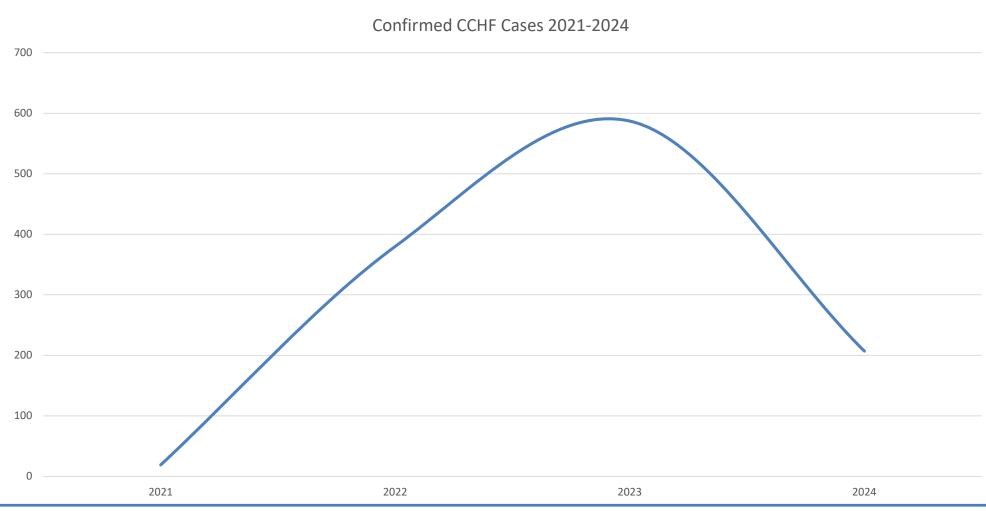






### Declining Trend of the Confirmed CCHF Cases in Iraq









## Challenges



- Limited workforce particularly in MOA and Veterinary sector
- Unavailability of sufficient proper slaughterhouses in the country
- Uncontrolled animal movement inside the country and on the border





## Needs





Serosurvey studies and research in both side human and animal are crucial to understand the epidemiology of the disease and its prevalence



Study on the ecology of the tick vectors



Effectiveness study of acaracides (on regular basis)



Global scale research for CCHF vaccine (both for animals and human)



Applied research for effective antivirus for CCHFV





## Joint Missions WHO & MOH to Thi-qar Province



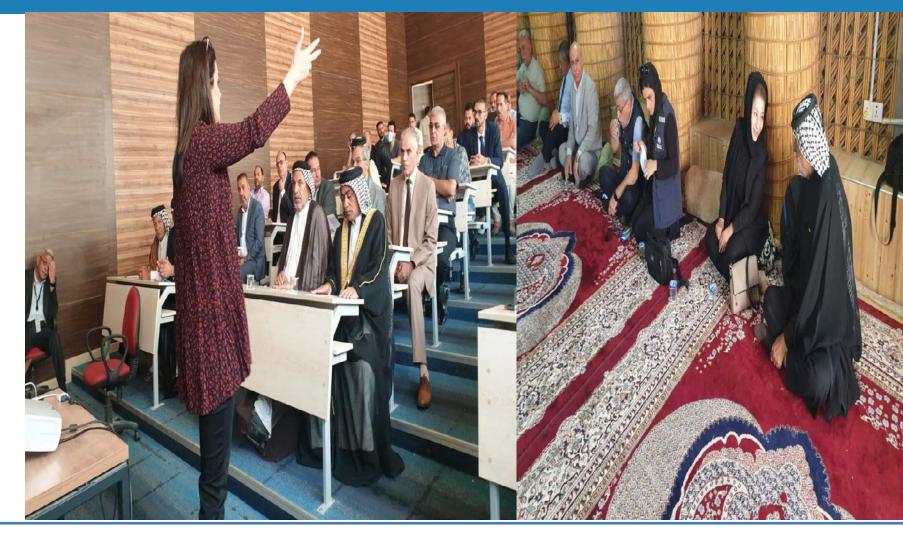






## RCCE activities by WHO in Southern Iraq









## One Health committee meeting





## **HQ & EMRO Experts Visits to Health Facilities**











#### MOH & WHO Joint Mission, Control Measures, Tick investigation and Control









## Thank You



