



# Migrant Health

## Health issues in the displaced Syrian community

Document should be read on a computer to enable access to links highlighted in red.

Overview of Health issues reported from refugee camps in neighbouring countries Lebanon, Jordan and Syria, since the Syrian conflict 2013.

<p><b><u>Vaccine-preventable</u></b></p>	<p>Vaccination coverage in Syria is estimated to have dropped from 91% in 2010 to as low as 45% in some regions by 2013. Of the 1.8 million Syrian children born since the conflict, over 50% are unvaccinated. In 2013, 36 cases of poliomyelitis were officially reported in Syria. In response to this outbreak, over 2.7 million Syrian children and 23 million in neighbouring countries were vaccinated. Measles – Medicine San Frontier reported an outbreak involving 7000 in Syrian camps</p>
<p><b><u>Non vaccine preventable</u></b> <b><u>Cutaneous leishmaniasis,</u></b></p>	<p>Cutaneous leishmaniasis has been endemic in parts of Syria, mainly Aleppo, for decades. However, the Syrian conflict and vast population displacement has significantly increased the incidence of the vector-borne disease (carried by the sand fly) within Syria and spread this epidemic into neighbouring countries.</p> <p>Reported cases of cutaneous leishmaniasis in Syria continue to rise, with the last official figure reporting 52,982. 77% of the patients manifested the disease after being in Lebanon for more than eight weeks, which is the known incubation period for cutaneous leishmaniasis, suggesting that the sand fly vector was transported to Lebanon with the incoming refugees. Speciation by PCR showed that 85% of cases were caused by <i>Leishmania tropica</i>, with 15% of cases as <i>Leishmania major</i>. The typing dictates if and what treatment can be used.</p> <p>Experts have warned against the emergence of other vector-borne diseases such as dengue fever and malaria.</p>

**Mental Health (briefly)**

An assessment of stressors and clinical outpatient data on mental, neurological and substance use (MNS) problems at International Medical Corps supported health facilities serving the Syrian refugee and internally displaced populations in Syria, Lebanon, Turkey and Jordan from March to October 2014.

Stress factors faced by Syrians include: security and protection risks, access and availability of basic services and resources as well as family, community, and sectarian tensions.

Rates for MNS problems among Syrians accessing International Medical Corps supported facilities were relatively consistent across countries. Severe emotional disorders (54%), including depression and anxiety, were the most common, followed by epilepsy (17%) and psychotic disorders (11%). Epilepsy (26.6%), intellectual and developmental disorders (26.6%), and severe emotional disorders (3.6%) were the most common among children.

**New patient GP visit for Syrian Refugees based on the country specific guidance on the PHE migrant health guide. <https://www.gov.uk/topic/health-protection/migrant-health-guide>**

<b><u>Hepatitis B</u></b>	Consider screening for <b>hepatitis B</b> , particularly among those who have recently arrived, because Syria has an intermediate prevalence.
<b><u>Hepatitis C</u></b>	No data are available on the prevalence of hepatitis C in Syria, so <b>take other risk factors into consideration</b> when assessing likely health needs in this area
<b><u>Tuberculosis</u></b>	There is a low incidence of TB in Syria (<40 cases per 100,000), so: routine screening is <b>not</b> required and they do not fall into the category for latent TB screening.
<b><u>Sexually transmitted infections and HIV</u></b>	Take a sexual History screen for <b>STIs</b> and <b>HIV</b> according to risk as specified in the UK national standards and guidelines Syria has a low rate of <b>HIV</b> ( $\leq 1\%$ ), so offer and recommend an HIV test if the patient falls into a high risk group. Test all sexually active patients under the age of 25 for Chlamydia <b>chlamydia</b>
<b><u>Anaemia</u></b>	<b><u>Consider nutritional and metabolic concerns.</u></b> Moderate risk of <b>anaemia</b> in adults and in pre-school children (estimated prevalence is 20 to 40%), in Syria, so: Consider the possibility of anaemia in recently arrived migrants, particularly women and pre-school children and test as clinically indicated

**Vitamin D**

Consider the possibility of vitamin D deficiency in people who may be at risk due to:  
covering their body for cultural or religious reasons (lack of sunlight)  
skin colour  
diet (vegan or vegetarian)

**Vitamin A**

There is a high risk of [vitamin A deficiency](#) in Syria.  
Where suspected, seek advice on appropriate diagnosis and management from your local endocrinology or paediatric team.  
Consider vitamin supplementation for all infants from 1 month to 5 years, especially in at-risk groups. Families will most probably qualify for [Healthy Start](#).

**Travel related illness that a newly arrived person may present with if unwell.**

There is a risk of [typhoid infection](#) in Syria, so remember enteric fever in the differential diagnosis of illness in patients with a recent history of travel from Syria.

Leishmaniasis

[http://www.cdc.gov/parasites/leishmaniasis/health\\_professionals/](http://www.cdc.gov/parasites/leishmaniasis/health_professionals/)

Dengue fever

<https://www.gov.uk/government/collections/dengue-fever-guidance-data-and-analysis>

Malaria

<https://www.gov.uk/government/collections/malaria-guidance-data-and-analysis>

PHE LABS information for testing

<https://www.gov.uk/government/collections/rare-and-imported-pathogens-laboratory-ripl>

There is a risk of [helminth infections](#) in Syria, including soil transmitted helminthiasis.

**Women's Health**

Use of contraception in women is 58.3% compared to 82% in the UK.

No data are available on:

- mammography screening rates
- Cervical cancer screening rates

Link in to screening schedules as per UK population.

[screening](#)

<p><b><u>Men's Health</u></b></p>	<p>As per screening schedules for the UK population.  <a href="#">screening</a></p>
<p><b><u>Mental Health</u></b></p>	<p>Ongoing assessment required.  Post-traumatic stress disorder, stress, bereavement, anxiety, depression and underlying mental health disorders.</p>
<p><b><u>Resources</u></b></p>	<p><b>PHE Migrant Health Guide</b></p> <p><a href="#">migrant health guide</a>  <a href="#">Meeting the health needs of refugees and asylum seekers; an information and resource pack for health workers.</a></p> <p>-  <a href="http://www.e-lfh.org.uk/programmes/general-practitioners/">http://www.e-lfh.org.uk/programmes/general-practitioners/</a></p> <p>For NHS general practitioners and doctors undertaking specialty training for UK general practice, jointly developed by the Royal College of General Practitioners and e-Learning for Healthcare.</p> <p>-  <a href="https://www.gov.uk/topic/health-protection/migrant-health-guide">https://www.gov.uk/topic/health-protection/migrant-health-guide</a></p>