

## Investigation of Infections in Illegal Immigrants Brought To the Emergency Department of a Hospital

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**Abstract:** The objective of our study is to determine the prevalence of the asylum seekers to sexually transmitted diseases, such as hepatitis B, hepatitis C, HIV/AIDS and syphilis, and by identifying health problems of the asylum seekers in our country based on infectious diseases to determine the appropriate approach procedure. Between the dates of January 2016-September 2017, identified as fugitives by the Erzurum police forces, the 318 asylum seeker that applied to our hospital's emergency clinic for the purpose of examination were evaluated retrospectively. The serologic reagents related to hepatitis viruses (HBsAg, anti HCV) and anti HIV antibodies were examined with the ELISA method (cobas 4000( e411) Roche Diagnostics Turkey) based on chemiluminescence. 76.5% of the asylum seekers were Afghani and 23.5% of the asylum seekers were Pakistani. VDRL positivity was not seen in asylum seekers. While 11(3.45%) of the 318 asylum seekers were found HBsAg positive and 7 (2.2%) of them were found anti-hcv positive, anti-HIV positivity was not seen in any of the cases. It was found that all of the immigrants with confirmed HBsAg and anti-HCV positivity were men and their age range was 14-20. As the immigration rate has increased in recent years and our country has become a transit point for such asylum seekers trying to go to other European countries, our country must create permanent and suitable health policies for the asylum seekers and the refugees and take protective measures for the infectious diseases.

**Key Words-** Immigrations, Infections, Emergency, Asylum Seekers

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### I. INTRODUCTION

Because of the location of our country, it has been home to many refugees, immigrants and asylum seekers that had to leave their own countries for various reasons. Meeting the needs of these people (housing, safety, health, education etc.) and the protection of the economic, social, security interests of the host country is important for a livable society. The civil war in Syria started in 2011, has caused approximately 3 million people to seek asylum in Turkey and the matters and problems related to the refugees, immigrants and asylum seekers have gained importance<sup>1,2,3</sup>. With the legal regulations and the publication of the temporary protection regulation (October 22, 2014), according to article 1 of the temporary protection regulation; due to the ongoing events in Syria, beginning from April 28, 2011 the aforementioned people coming to Turkey (Syrians and stateless people coming from Syria) are under temporary protection<sup>4,5,6</sup>.

Not only the concepts refugee, immigrant, and asylum-seeker are all different, but also the legal process and protection laws that apply to them are different. A refugee is a person who has escaped from their own country for political, religious, or economic etc. reasons or because of a war. Refugees do not benefit from the diplomatic protection of that country and are considered stateless. An asylum seeker is someone who leaves their own country, often for political reasons or because of war, and who travels to another country hoping that the government will protect them and allow them to live there<sup>5,6</sup>. An immigrant is a person who has come to a different country with hopes of improving their financial or social status, and the future expectations for themselves or their families<sup>1,2,3</sup>.

It is found that a majority of the asylum seekers that enter our country are citizens of Syria, Afghanistan, Pakistan and Iraq. According to the official figures, 10 thousand asylum seekers along with the ones arriving illegally, this number is estimated to be around 50 thousand<sup>5,6,7</sup>.

The refugees, immigrants and asylum seekers coming to our country must have medical examinations. Knowing the health status of the people who entered illegally to our country and taking Precautions About The Infectious Diseases as well as treating these diseases in order to prevent the spread of these diseases are very important.

## II. MATERIAL AND METHOD

Between the dates of January 2016-September 2017, identified as fugitives by the Erzurum police forces, the 318 asylum seeker that Applied to our hospital's emergency clinic for the purpose of examination were evaluated retrospectively. The serologic reagents related to hepatitis viruses (HBsAg, Anti HCV) and Anti HIV antibodies were examined with the ELISA method (COBAS 4000(E411) Roche Diagnostics Turkey) based on chemiluminescence. Syphilis serology was also examined in patients with VDRL test.

## III. RESULTS

It was found that foreign nationals, arrested by the police forces and brought to our hospital emergency service, were citizens of Afghanistan and Pakistan, they entered illegally into Turkey by passing to van through Iran and they planned to go to İstanbul through Erzurum then go to European countries from there. 318 asylum seekers in the study are composed of 76.5% Afghani asylum seekers and 23.5% Pakistani asylum seekers. 291 of the asylum seekers were men and 27 of them were women. The age range was found to be (2-18) 123 children, (18-30) 153 adult, (30-59) 42 adult. The asylum seekers were examined in terms of anti-HIV, anti-HCV and VDRL. While 11(3.45%) of the 318 asylum seekers were found HBsAg positive and 7 (2.2%) of them were found anti-HCV positive. Anti-HIV positivity was not seen in any of the cases. It was found that all of the immigrants with confirmed HBsAg and anti-HCV positivity were men and their age range was 14-20. VDRL positivity was not seen in asylum seekers (Table 1).

**Table 1:** Number Of Asylum Seekers Under Investigation

	Number Of Asylum Seekers Under Investigation	HBsAg (+)	Anti-HCV (+)	Anti-HIV (+)	VDRL (+)
Afghanistan	243	6	5	-	-
Pakistan	75	5	2	-	-
Total	318	11	7	-	-

## IV. DISCUSSION

Because of the location of our country, it has been home to many refugees, immigrants and asylum seekers that had to leave their own countries for various reasons. It is known that refugees, immigrants, asylum seekers from many countries especially Syria, Iraq, Afghanistan, Pakistan, Turkmenistan, Uzbekistan, Armenia and Moldova take refuge in our country and/or use it as a migration route <sup>1,2,3</sup>. Due to infectious diseases with high prevalence in their own country, the asylum seekers, due to the effect of the immigration process, unhealthy, crowded and poor living conditions, pose a great health threat for the country they arrive <sup>5</sup>. The data has shown that the immigrants from southeast Asia and Africa carried malaria, hepatitis B, and leprosy, immigrants from Balkans carried hantavirus and immigrants from the middle east carried leishmaniasis to the countries they go to. In addition, it is indicated that enterozoa, the vector-borne infections (malaria, leishmaniasis, dengue fever) and sexually transmitted diseases (HIV, HBV, gonorrhoea, syphilis, trichomoniasis) are more common amongst immigrants compared to the hosting population <sup>8</sup>.

It was found that 243 of the 318 asylum seekers were citizens of Afghanistan and 75 of them were citizens of Pakistan, who we examined retrospectively in this study. Majority of the asylum seekers being male is remarkable. However, the number of children (2-18 years) is also pretty high. The asylum seekers were examined in terms of anti-HIV, anti-HCV and VDRL. While 11(3.45%) of the 318 asylum seekers were found HBsAg positive and 7 (2.2%) of them were found anti-HCV positive, anti-HIV positivity was not seen in any of the cases.

In their study which Pehlivanoglu and his colleagues evaluated 420 asylum seekers consisting of Afghans, Turkmens, Pakis and other different countries' citizens in terms of serologic reagents; they discovered that Afghani asylum seekers had a lower prevalence than the other groups in terms of blood-borne and sexually transmitted diseases (hepatitis B, C, HIV/AIDS) and syphilis serology <sup>9</sup>. The numeric distribution and hepatitis B, C are endemic and, the seropositivity rates are higher compared to our country, because of the current war, and the hepatitis B, C prevalence of the Afghani and Pakistani asylum seekers in our study has a lower positive hepatitis B and C prevalence<sup>10</sup>. A study conducted in Pakistan reported that hepatitis C prevalence was 16-24%. However, it was observed that the hepatitis C prevalence amongst the Pakistani asylum seekers was not high <sup>11</sup>.

When the academic works about refugees, immigrants, asylum seekers and health problems in the literature, and the reports prepared by official institutions and organizations are examined, it can be Inferred that the focus of the topic is the Syrian citizens that migrated too many countries, especially Turkey, after the start of the Syrian civil war. The studies conducted regarding the health problems faced by Syrians on campsites and the cities they settle in, and the infectious and non-infectious diseases they are affected point out that the circumstances

are getting better in order for the asylum seekers to benefit from the health services<sup>12,13,14</sup>. However, their sufficient medical examinations of the immigrants caught by the police forces and the fact that there is no extensive examination regarding infectious diseases and deporting illegal immigrants without treating them are considered to be significant deficiencies.

## V. CONCLUSION

As a result, there must be guidelines about this subject, there must be border controls, the immunization status must be evaluated and there must be routine screening. In the course of the screening, diseases such as tuberculosis, malaria, measles, rubella, polio, viral hepatitis, AIDS, parasitic infections must be checked. In case of any signs of disease, in order to prevent the spread of the infection, deportation of the individuals after giving the necessary treatments will be more secure.

Due to the limited number of illegal immigrants brought to our emergency department it was evaluated 318 people. There is no clear procedure established by the health ministry for examinations used in the review. Therefore, the tests that can be done in our hospital and under emergency conditions have been used. Failure to treat the disease symptoms, an indication of the need for new regulations on this subject.

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