# A refugee camp in the center of Europe: clinical characteristics of asylum seekers in Brussels in September 2015

| Submission date<br>09/05/2016 | Recruitment status                       | [] Prospective   |
|-------------------------------|--|------------------|
|                               | No longer recruiting                     | [] Protocol      |
| Registration date             | <b>Overall study status</b><br>Completed | [] Statistical a |
| 11/05/2016                    |  | [X] Results      |
| Last Edited<br>29/01/2019     | <b>Condition category</b><br>Other       | [_] Individual p |

] Prospectively registered

Statistical analysis plan

] Individual participant data

#### Plain English summary of protocol

#### Background and study aims

In the summer of 2015, the exodus of Syrian war refugees and saturation of refugee camps in neighbouring countries led to the influx of many asylum-seekers in some European countries, including Belgium. In the existing medical scientific literature little is known and described on health problems of asylum-seekers in Europe. Scientific research needs to document this complex humanitarian emergency, in order to determine the needs of this new population in Europe. The aim of this study is to describe the health complaints and diagnoses made by physicians in asylum seekers arriving in September 2015 in Belgium, in a refugee camp in Brussels after a long and hazardous journey, in order to estimate the (medical) needs of this new population arriving in a Western European country. Once we know exactly what kind of diseases and injury the asylum-seekers suffer from, recommendations can be made to health policy makers and medical teams in order to improve the medical care they will deliver to these patients on a short and on a long term basis.

#### Who can participate?

Asylum-seekers from the Middle-East and elsewhere arriving in a refugee camp in Brussels between September 5th and October 5th, 2015 and presenting themselves as patients to a Field Hospital organised by Doctors of the World

#### What does the study involve?

Information on all the participants is collected, including age, gender, country of origin, date of arrival in Belgium, whether the participant has requested or received an appointment with the Belguim Immigration Office, whether they are registered as a asylum-seeker, the location of their shelter, all their physical and mental complaints, their main complaint and any pre-existing medical issues. A main diagnosis in recorded for each participant. Trained physicians then classify these diagnoses into categories. Possible referral for treatment is also recorded

What are the possible benefits and risks of participating? Not provided at time of registration Where is the study run from? Level I Medical Field Hospital of Doctors of the World, Refugee Camp (City Center)

When is the study starting and how long is it expected to run for? September 2015 to October 2015

Who is funding the study? Research Group on Emergency and Disaster Medicine, of the Free University (Vrije Universiteit) Brussels

Who is the main contact? Dr Gerlant van Berlaer gerlant.vanberlaer@uzbrussel.be

## **Contact information**

**Type(s)** Scientific

**Contact name** Dr Gerlant van Berlaer

ORCID ID http://orcid.org/0000-0003-3674-9083

#### **Contact details**

Laarbeeklaan 101 Brussels Belgium 1090 +3224763100 gerlant.vanberlaer@uzbrussel.be

## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers** Protocol (5) Brussels MdM study

# Study information

#### Scientific Title

A refugee camp in the center of Europe: observational descriptive sample analysis of demographic and clinical characteristics of asylum seekers arriving in a refugee camp and presenting as patients to a field hospital in Brussels in September 2015

#### **Study objectives**

Hypothesis is that among people in a huddled refugee camp – even in a well-developed country with all medical facilities – respiratory, digestive and other medical problems typical of refugee camps will emerge soon.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Commission of Medical Ethics (O.G. 016), University Hospital Brussels (Universitair Ziekenhuis Brussel), Brussels, Belgium, 09/12/2015, ref: 143201526433

**Study design** Cross sectional observational sample single center study

**Primary study design** Observational

**Secondary study design** Cross sectional study

Study setting(s) Community

**Study type(s)** Screening

#### Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

#### Health condition(s) or problem(s) studied

Demographic (age, origin, gender, arrival time) and clinical characteristics (complaints, diagnoses, comorbidities, acute treatments and referrals) of asylum-seekers arriving in a refugee camp in Brussels.

#### Interventions

A prospectively designed template was used to register data for all patients (randomly selfpresenting to a Field Hospital in the refugee camp): age, gender, country of origin, date of arrival in Belgium, whether and when patients had requested or received an appointment at the Belgian Immigration Office, or were already officially registered as asylum-seeker, location of shelter, all physical and mental complaints, the chief complaint, and all pre-existing comorbidities.

One primary diagnosis per patient was recorded according to a list of 50 possible diagnoses, adapted from case descriptions in the WHO "Communicable disease control in emergencies" field manual, the Sphere Project Handbook, and a template used in previous humanitarian operations. Post-hoc, trained physicians classified these diagnoses into categories, adapted from ICD-10. All patients with clinical signs of local or generalised infection were classified as a subgroup of "infectious diseases". Finally, possible referral was recorded.

#### Intervention Type

Not Specified

#### Primary outcome measure

Proportion of diagnosis categories found among asylum seekers in Brussels. The primary diagnoses was made by a physician, based on anamnesis, physical examination, and available point-of-care tests (glucose, pregnancy, ...). This was done on the spot during the consultation: after anamnesis, and before eventual referral of the patient.

#### Secondary outcome measures

A prospectively designed template was used to register data for all patients:

1. Age: the exact age of all patients was asked. Descriptive statistics for this quantitative variable was presented as measure of central tendency and dispersion (median, range, interquartile range IQR). The analyses was broken down for age categories (<5, 5-14, and >15years old). 2. Gender: male or female

3. Country of origin: each patient was asked which country they originally inhabited. These were categorised into regions (Middle East, rest of Asia, Africa, Europe, other).

4. Date of arrival in Belgium: each patient was asked exactly when (date) they arrived in Belgium 5. Appointment at Belgian Immigration Office (BIO): each patient was asked whether and when they had requested or received an appointment at BIO or were already officially registered as asylum-seeker. This was expressed in "days'.

6. Location of shelter: each patient was asked where they resided at the time of the consultation, these were categorised as 'refugee camp Brussels', 'other refugee camps', Governmental asylum-seeker centers, open air, relatives and friends, foster families, other and unknown.

7. All physical and mental complaints, and which was the "chief complaint" of each patient were recorded by physicians.

8. All pre-existing comorbidities, classified using the case descriptions in the WHO "Communicable disease control in emergencies" field manual.

9. One primary diagnosis per patient was recorded according to a list of 50 possible diagnoses, adapted from case descriptions in the WHO "Communicable disease control in emergencies" field manual, the Sphere Project Handbook, and a template used in previous humanitarian operations. Post-hoc, trained physicians classified these diagnoses into categories, adapted from ICD-10.

10. All patients with clinical signs of local or generalised infection were classified as a subgroup of "infectious diseases".

11. Possible referral was recorded.

Multiple logistic regression analysis was performed to identify factors associated with the asylum-seekers' health problems, by using 'infection' as an outcome variable, by using origin (other versus Syria, Iraq, Morocco and Afghanistan), age category (0-15, >15 years old) and gender as predictors. Analyses were carried out by using IBM® SPSS® v23.0. All tests were performed using an α-level of 0.05.

Overall study start date 05/09/2015

**Completion date** 05/10/2015

# Eligibility

#### Key inclusion criteria

 Asylum-seekers (all ages, both genders) from the Middle-East and elsewhere arriving in a refugee camp in Brussels between September 5th and October 5th, 2015
Self-presenting as patients to a Field Hospital organised by Doctors of the World

#### Participant type(s)

Patient

**Age group** All

**Sex** Both

**Target number of participants** 4037

#### Key exclusion criteria

Patients with missing date of presentation, chief complaint, or single primary diagnosis, and patients not giving oral informed consent were excluded.

Date of first enrolment 05/09/2015

Date of final enrolment 05/10/2015

## Locations

**Countries of recruitment** Belgium

**Study participating centre Level I Medical Field Hospital of Doctors of the World** Refugee Camp (City Center) Brussels Belgium 1000

## Sponsor information

**Organisation** Research Group on Emergency and Disaster Medicine, Free University (Vrije Universiteit) Brussels

#### **Sponsor details**

Laarbeeklaan 101 (tav. Spoedgevallendienst) Brussels Belgium 1090

**Sponsor type** Research organisation

ROR https://ror.org/006e5kg04

# Funder(s)

**Funder type** University/education

#### Funder Name

Research Group on Emergency and Disaster Medicine, of the Free University (Vrije Universiteit) Brussels

# **Results and Publications**

#### Publication and dissemination plan

We would like to publish the results of our study (as soon as they are available) to all scientists and health care providers in the field, in order to share our findings, and in the hope to be of use to improve the medical care for asylum-seekers arriving in any country in Europe.

## Intention to publish date

01/05/2016

Individual participant data (IPD) sharing plan

**IPD sharing plan summary** Available on request

#### Study outputs

| Output type            | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|------------------------|---------|--------------|------------|----------------|-----------------|
| <u>Results article</u> | results | 24/11/2016   | 29/01/2019 | Yes            | No              |