



MINISTRY OF HEALTH

THE WEEKLY EPIDEMIOLOGICAL BULLETIN

WEEK 19: 06th – 12th May 2024

Dear Reader, We are pleased to share the latest edition of Uganda's weekly epidemiological bulletin for the year 2024. This bulletin serves to inform all stakeholders at community, district and national levels on suspected disease trends, public health surveillance and interventions undertaken in detecting, preventing and responding to public health events in Uganda on a weekly basis.

In this issue, we showcase the following updates:

- ◆ Routine and Sentinel Surveillance
- ◆ Indicator and Event Based Surveillance
- ◆ Maternal and Perinatal deaths surveillance

- ◆ Influenza and VHF surveillance
- ◆ Tuberculosis and Malaria status updates
- ◆ Point of Entry Surveillance
- ◆ Current Public Health Events in and around Uganda

For comments please contact:

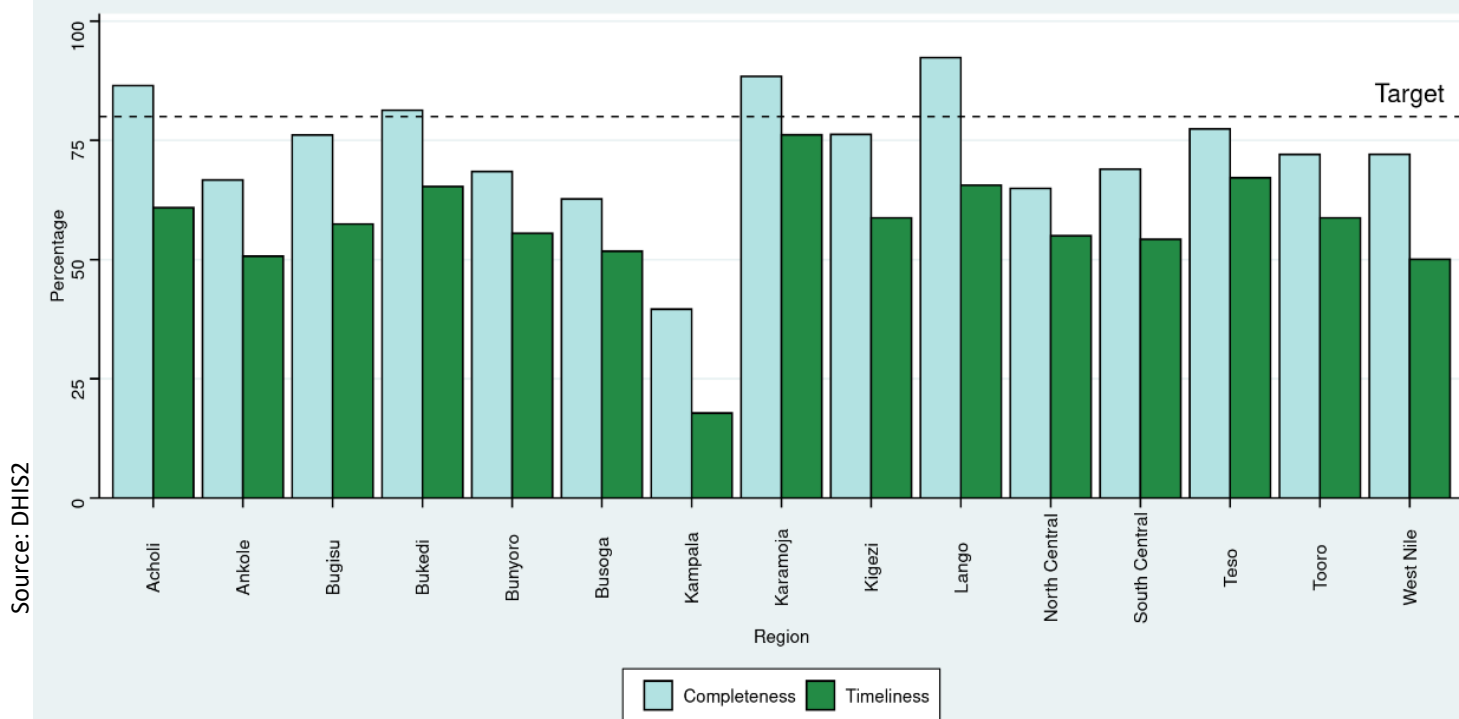
Dr. Allan Muruta,

Commissioner, Integrated Epidemiology, Surveillance and Public Health Emergencies - MoH;

P.O BOX 7272 Kampala, Tel: 080010066 (toll free); Email: esd@health.go.ug or esduganda22@gmail.com

Indicator Based Surveillance

Figure 1.1: Regional weekly reporting rates for notifiable conditions during 2024EpiWeek 19



Most regions did not achieve the 80% target for completeness for the weekly epidemiological reports within the EpiWeek 19 save for Acholi, Bukedi, Karamoja and Lango. Timeliness within all regions was below the target and this needs strengthening. Our recommendation is that district biostatisticians work with their health workers to identify and address bottlenecks to reporting. The break-down of performance by district is shown on the next page.

Table 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 18 and 19

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK18	WK19	WK18	WK19		WK18	WK19	WK18	WK19
Abim	100	66.7	90.5	57.1	Hoima City	66.7	57.1	66.7	52.4
Adjumani	51	43.1	47.1	41.2	Hoima	94.7	78.9	78.9	42.1
Agago	100	44.2	100	46.5	Ibanda	76.6	53.2	74.5	59.6
Alebtong	90	60	90	70	Iganga	56.5	37	54.3	39.1
Amolatar	100	93.8	87.5	75	Isingiro	100	50.7	98.7	37.3
Amudat	100	84.6	92.3	92.3	Jinja City	66.1	55.9	74.6	69.5
Amuria	96.2	92.3	100	84.6	Jinja	61.9	57.1	64.3	57.1
Amuru	81.3	62.5	87.5	68.8	Kaabong	100	48.1	100	77.8
Apac	56.8	51.4	62.2	54.1	Kabale	98.2	57.9	93	54.4
Arua City	60	42.9	54.3	45.7	Kabarole	96.9	81.3	96.9	81.3
Arua	81.8	36.4	100	45.5	Kaberamaido	88.9	44.4	88.9	88.9
Budaka	64.7	58.8	58.8	58.8	Kagadi	46.9	34.4	59.4	37.5
Bududa	100	50	100	62.5	Kakumiro	62.9	54.3	62.9	48.6
Bugiri	74.5	52.7	63.6	40	Kalaki	75	58.3	58.3	50
Bugweri	93.3	93.3	60	60	Kalangala	100	91.7	100	100
Buhweju	45	15	50	40	Kaliro	48.1	14.8	51.9	33.3
Buikwe	43.5	31.9	43.5	34.8	Kalungu	65.7	45.7	77.1	40
Bukedea	70	65	85	75	Kampala	48.7	21.9	45.1	17.7
Bukomansimbi	66.7	44.4	63	59.3	Kamuli	50.7	20.3	55.1	31.9
Bukwo	59.1	54.5	54.5	40.9	Kamwenge	97.2	94.4	55.6	44.4
Bulambuli	64	40	68	52	Kanungu	80.4	44.6	91.1	51.8
Buliisa	56.3	50	50	43.8	Kapchorwa	85.2	81.5	81.5	81.5
Bundibugyo	93.5	67.7	74.2	58.1	Kapelebyong	85.7	85.7	85.7	78.6
Bunyangabu	85.3	76.5	91.2	82.4	Karenga	100	30	50	50
Bushenyi	56.5	52.2	58.7	56.5	Kasese	57.7	39.4	47.9	30.3
Busia	76.5	52.9	76.5	58.8	Kassanda	65.8	57.9	65.8	47.4
Butaleja	100	88	88	80	Katakwi	85.2	74.1	85.2	63
Butambala	54.2	41.7	62.5	37.5	Kayunga	67.5	22.5	62.5	47.5
Butebo	100	36.4	90.9	27.3	Kazo	68.8	59.4	68.8	53.1
Buvuma	100	100	100	100	Kibaale	91.2	35.3	91.2	32.4
Buyende	74.1	70.4	51.9	44.4	Kiboga	63.8	53.2	63.8	46.8
Dokolo	100	33.3	100	66.7	Kibuku	100	64.7	100	82.4
Fort Portal City	96.3	96.3	96.3	96.3	Kikuube	93.9	90.9	97	72.7
Gomba	80	68	80	40	Kiruhura	96.3	85.2	100	77.8
Gulu City	97.6	61.9	97.6	52.4	Kiryandongo	96.2	61.5	80.8	69.2
Gulu	91.3	13	91.3	13	Kisoro	72.3	44.7	68.1	53.2

Source: DHIS2

KEY

100
80-99.9
60-79.9
<60

Districts in red need immediate follow-ups and support regarding reporting by the district health teams.

Table 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 18 and 19

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK18	WK19	WK18	WK19		WK18	WK19	WK18	WK19
Kitagwenda	75	58.3	54.2	45.8	Nabilatuk	100	100	100	83.3
Kitgum	100	75	97.5	82.5	Nakapiripirit	100	92.3	100	100
Koboko	88.5	57.7	84.6	65.4	Nakaseke	83.3	63.3	70	60
Kole	97.1	28.6	97.1	22.9	Nakasongola	61.9	52.4	64.3	59.5
Kotido	100	72.7	68.2	45.5	Namayingo	63.2	55.3	65.8	50
Kumi	100	64.3	100	78.6	Namisindwa	81	42.9	81	57.1
Kwania	84.6	74.4	94.9	28.2	Namutumba	74.3	42.9	82.9	45.7
Kween	57.7	46.2	76.9	57.7	Napak	94.4	66.7	100	94.4
Kyankwanzi	100	95.8	95.8	83.3	Nebbi	92.3	46.2	100	69.2
Kyegegwa	72	60	76	56	Ngora	38.5	23.1	38.5	30.8
Kyenjojo	72.5	51	74.5	25.5	Ntoroko	77.8	66.7	77.8	66.7
Kyotera	74.1	24.7	79	64.2	Ntungamo	62.7	46.3	70.1	31.3
Lamwo	93.5	58.1	90.3	67.7	Nwoya	93.3	93.3	100	93.3
Lira City	100	88.9	100	81.5	Obongi	66.7	50	77.8	50
Lira	100	100	100	100	Omoro	100	55.6	92.6	59.3
Luuka	81.4	41.9	74.4	74.4	Otuke	82.4	52.9	100	58.8
Luwero	72.8	49.5	73.8	56.3	Oyam	100	77.1	100	87.5
Lwengo	73	51.4	67.6	48.6	Pader	100	50	97.6	61.9
Lyantonde	67.3	44.2	59.6	40.4	Pakwach	84.2	73.7	42.1	31.6
Madi-Okollo	95.2	38.1	66.7	33.3	Pallisa	96.9	96.9	100	96.9
Manafwa	84.6	61.5	92.3	61.5	Rakai	65.2	58.7	60.9	41.3
Maracha	100	100	72.2	50	Rubanda	76.3	65.8	71.1	57.9
Masaka City	65.8	52.6	63.2	60.5	Rubirizi	100	80	100	75
Masaka	100	100	100	100	Rukiga	100	69.7	100	78.8
Masindi	100	100	100	98	Rukungiri	70.2	50	69.1	55.3
Mayuge	81.9	62.5	83.3	70.8	Rwampara	55	40	50	25
Mbale City	78	61	73.2	46.3	Sembabule	50	30	52.5	32.5
Mbale	92.6	77.8	100	66.7	Serere	100	100	100	90.9
Mbarara City	72.7	45.5	63.6	38.6	Sheema	65.8	52.6	60.5	47.4
Mbarara	73.1	65.4	84.6	65.4	Sironko	81.8	39.4	75.8	48.5
Mitooma	54.5	50	50	50	Soroti City	72	60	60	48
Mityana	51.3	26.3	67.1	35.5	Soroti	56.3	50	75	50
Moroto	100	89.5	94.7	68.4	Terego	69	34.5	86.2	62.1
Moyo	80.6	80.6	67.7	35.5	Tororo	70.5	48.7	80.8	51.3
Mpigi	66.1	53.2	71	53.2	Wakiso	55.7	38.1	57.8	38.1
Mubende	64.8	51.9	61.1	51.9	Yumbe	84.2	70.2	91.2	56.1
Mukono	64.7	49	52	27.5	Zombo	78.3	73.9	82.6	65.2

Source: DHIS2

100
80-99.9
60-79.9
<60

Districts in red need immediate follow-ups and support regarding reporting by the district health teams.

Figure 4.1: Suspected cases of Epidemic Prone Diseases reported weekly by 2024 Wk19



Source: DHIS2

DHIS2 Data

Key: VHF = Viral Hemorrhagic Fever; mDR TB = Multi-drug Resistant Tuberculosis

Within the reporting week 19, suspected cases were reported within the conditions of Cholera, MDR-TB, other VHF, plague and yellow fever. These are suspected cases and verification is on-going. There was no suspected death due to epidemic prone diseases.

Figure 4.2: Suspected and probable cases of measles reported in the past five weeks

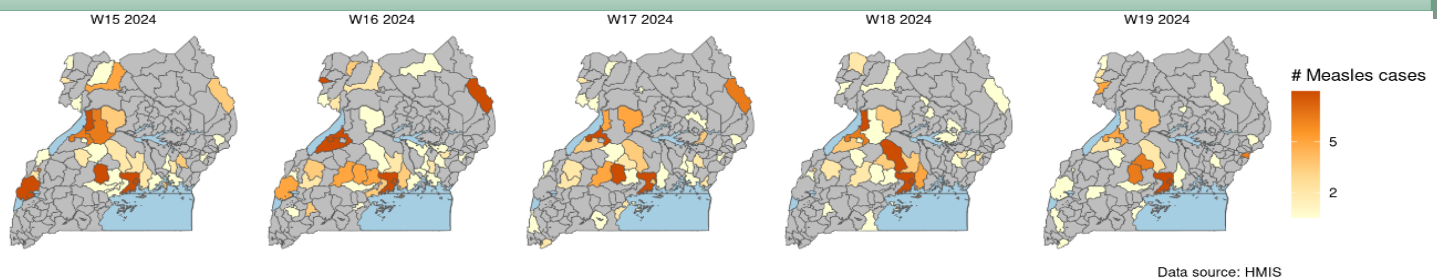
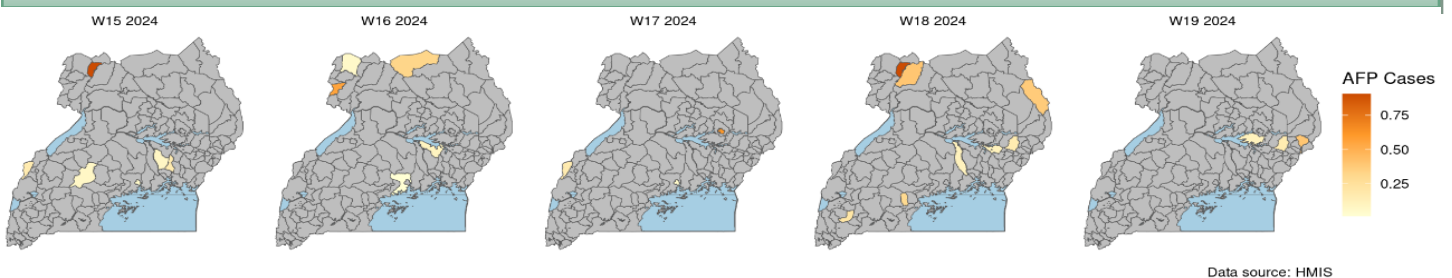


Figure 4.3: Suspected and probable cases of Acute Flaccid Paralysis reported in the past five weeks





Notice that the alert threshold for typhoid fever and dysentery is calculated as the average number of weekly cases (suspected and confirmed) in the past three years. The observed threshold for both typhoid and dysentery were passed and this warrants an investigation

Figure 5.2 Weekly cases of diseases / conditions targeted for elimination or eradication by 2024 Wk19

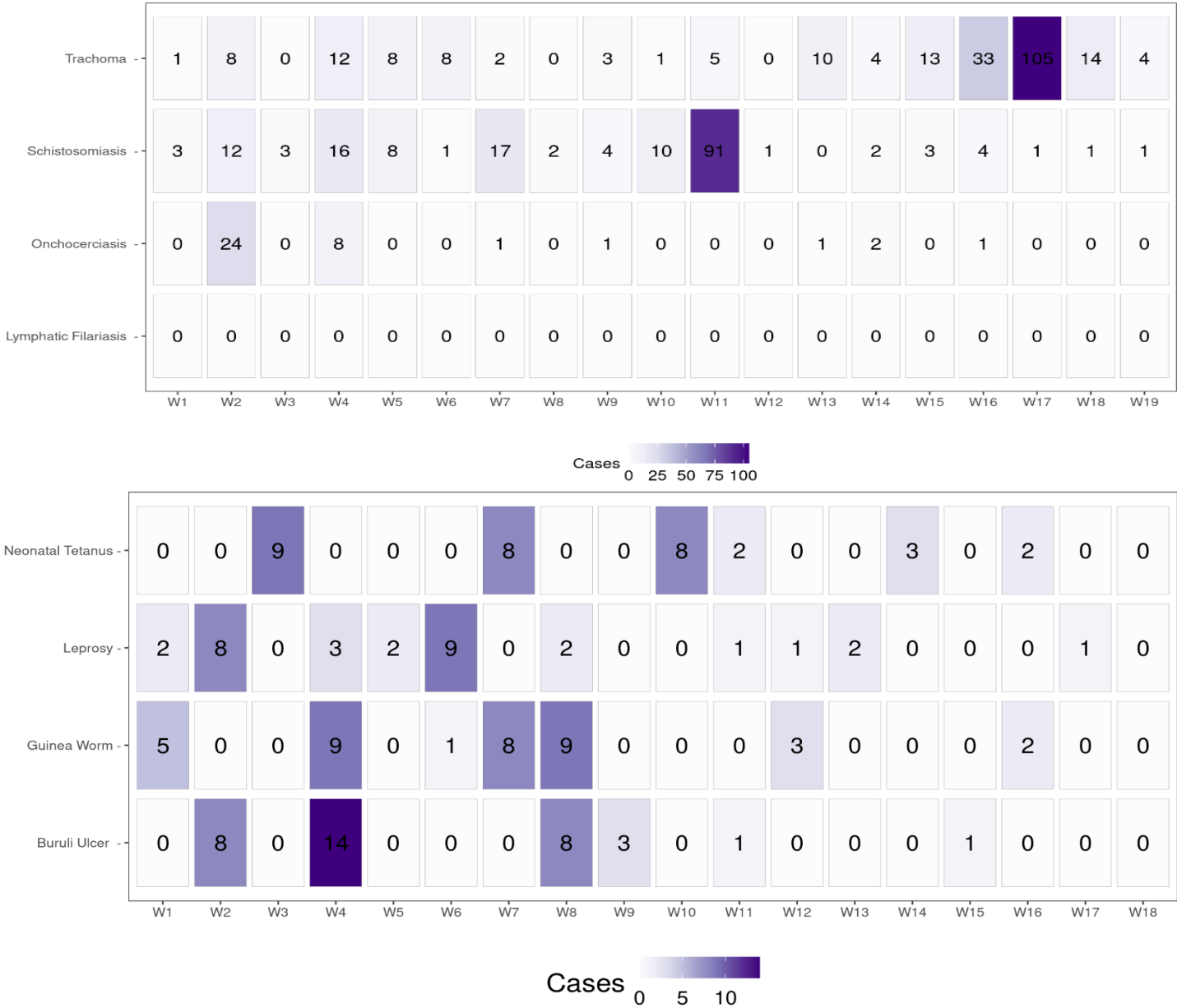
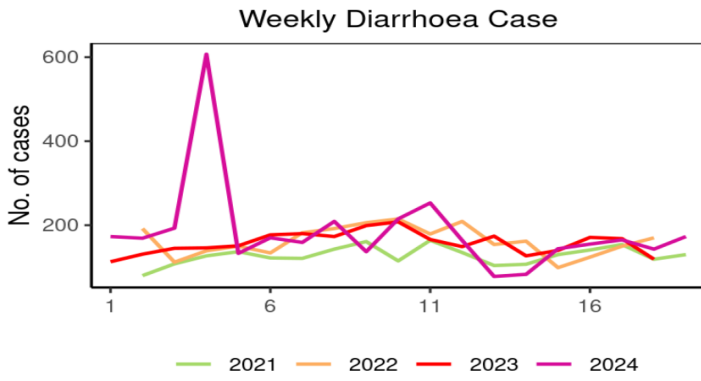
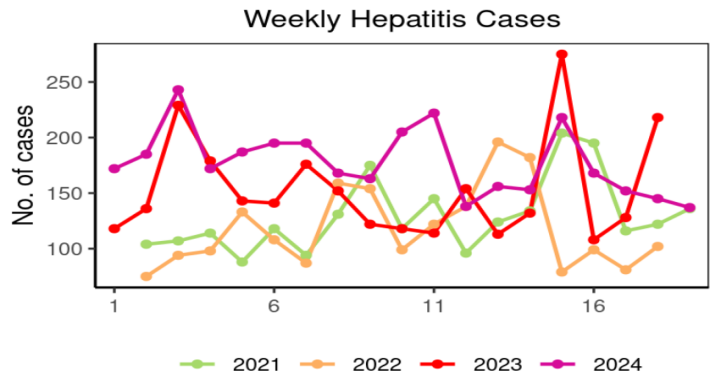


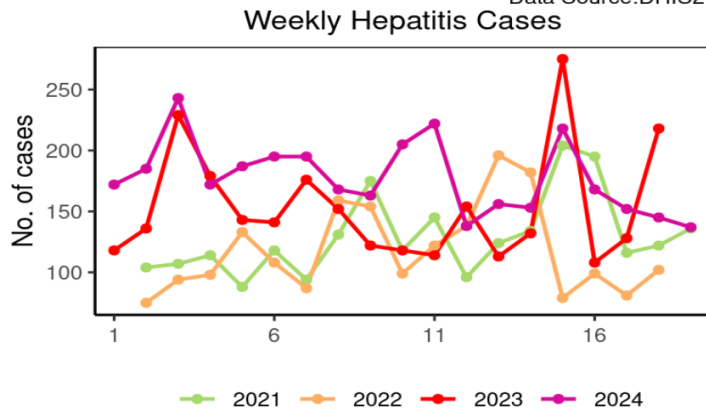
Figure 6.1: Suspected cases of other prioritized diseases and conditions by 2024 Wk19



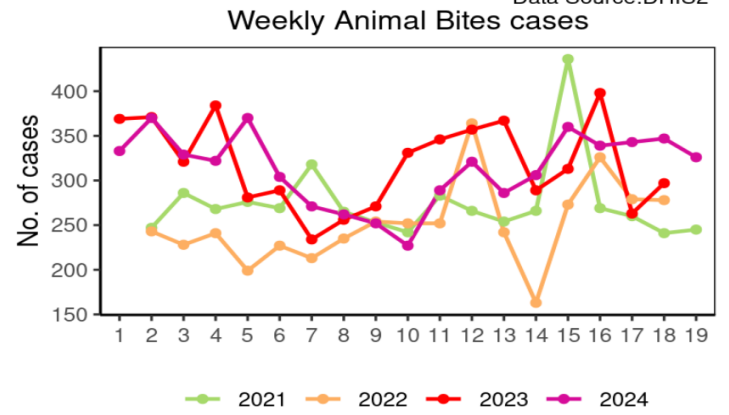
Data Source:DHIS2



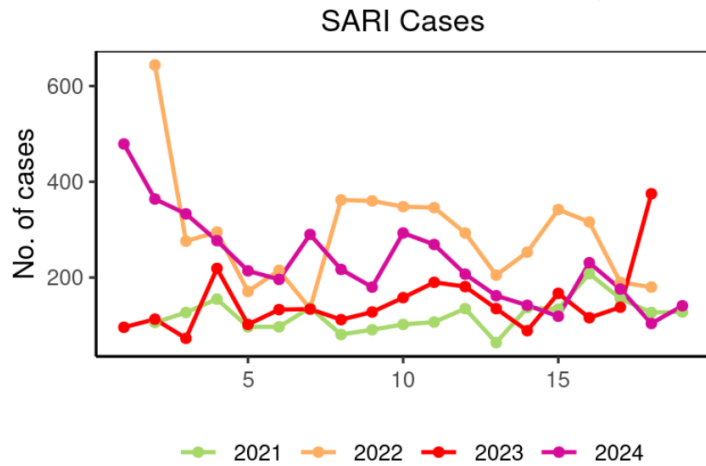
Data Source:DHIS2



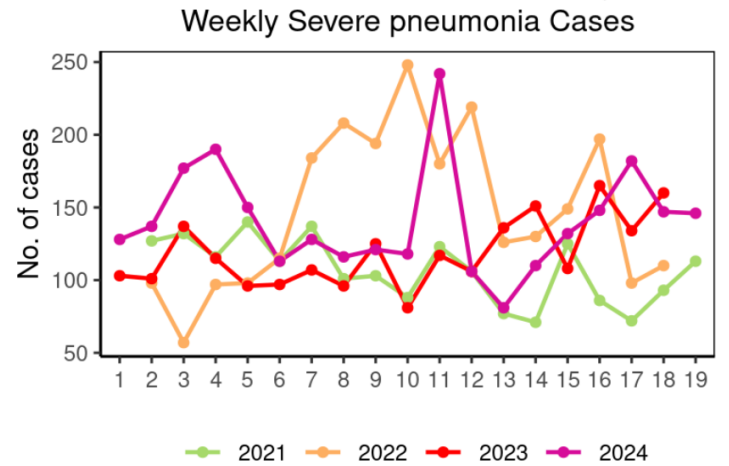
Data Source:DHIS2



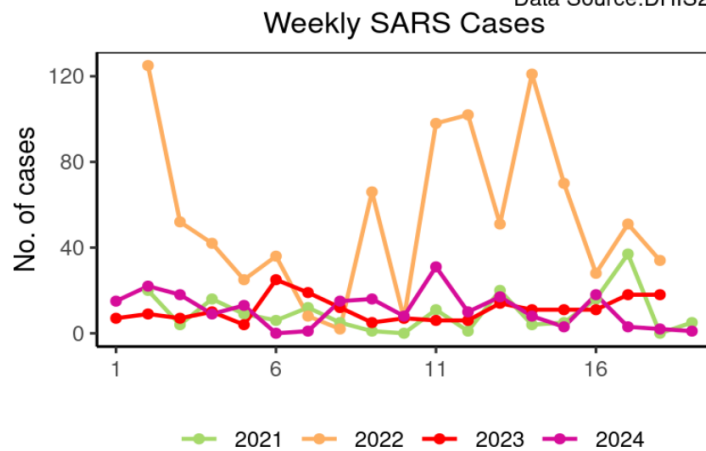
Data Source:DHIS2



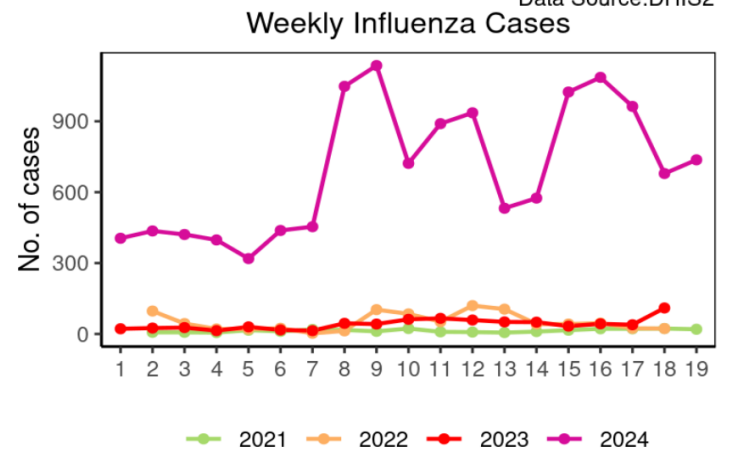
Data Source:DHIS2



Data Source:DHIS2



Data Source:DHIS2

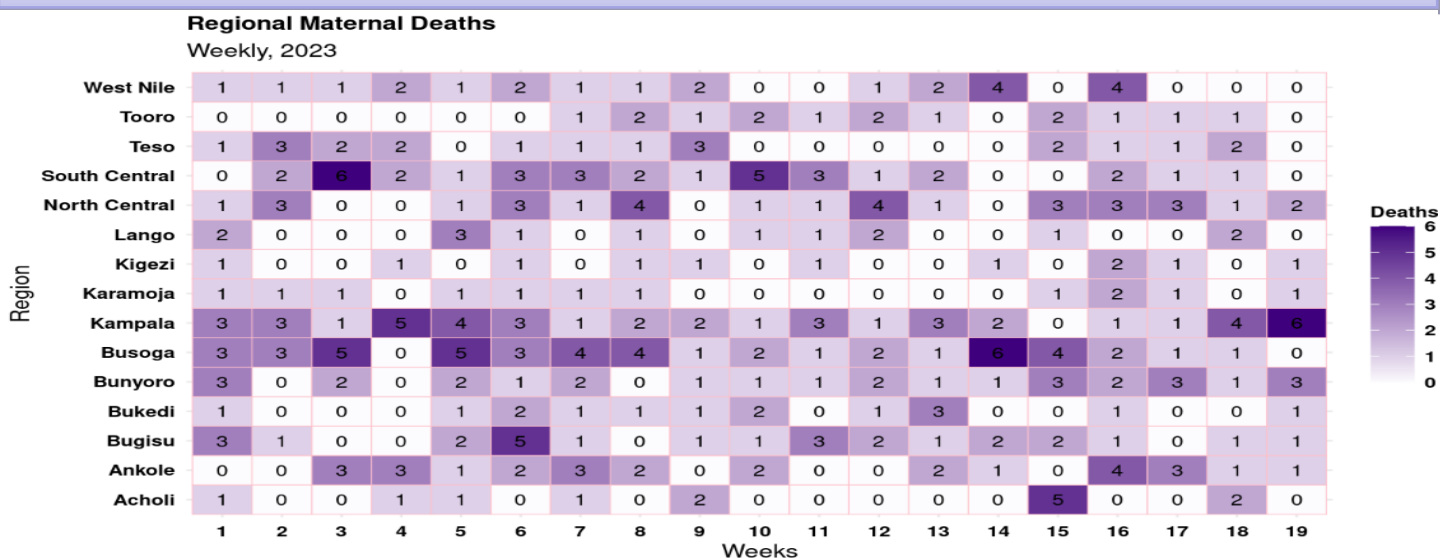


Data Source:DHIS2

Maternal Deaths Surveillance

In week 19, there were 16 maternal deaths. There was an increase of 1 maternal death as compared to deaths reported in week 18

Table 7.1: Regional-based Maternal deaths reported in 2024 until EpiWeek 19



Trend of weekly maternal deaths

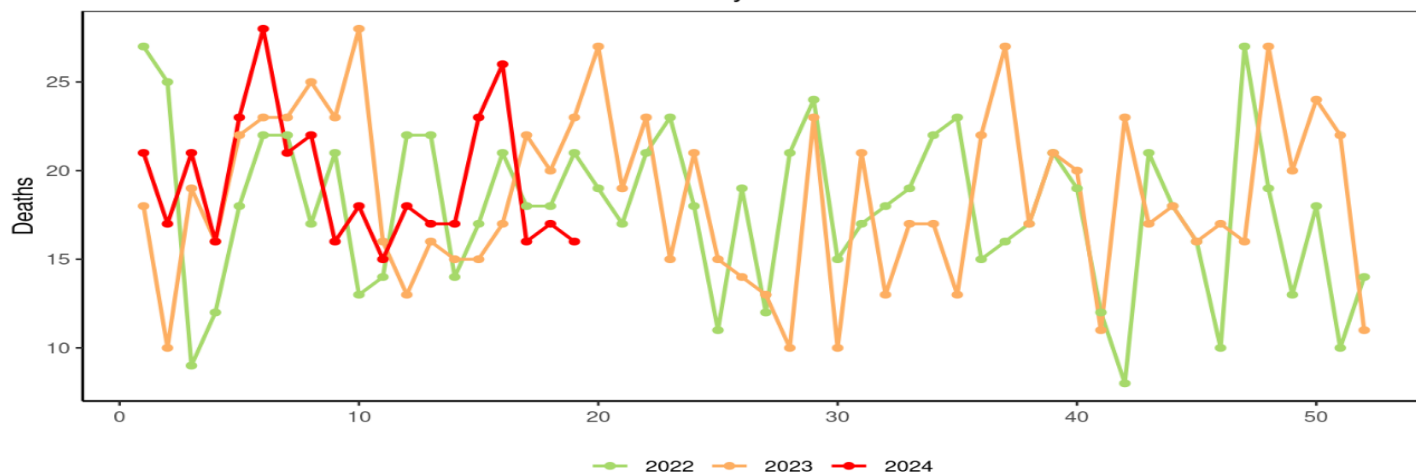


Table 7.2: Facilities reporting Maternal deaths during 2024WK19

Regions	Districts	Facility	No. of maternal deaths
Bunyoro	Hoima City	Hoima Regional Referral Hospital	2
Ankole	Mbarara City	Mbarara Regional Referral Hospital	1
Bunyoro	Hoima District	Kigorobyia Health Centre IV	1
Bukedi	Busia District	Dabani Hospital	1
Kampala	Kampala District	Kawempe National Referral Hospital	6
Bugisu	Mbale City	Mbale Regional Referral Hospital	1
Kigezi	Kabale District	Rugarama Hospital	1
Karamoja	Amudat District	Amudat Hospital	1
North Central	Luwero District	Bombo General Military Hospital	1
North Central	Buikwe District	St. Francis Nyenga Hospital	1

Perinatal Deaths Surveillance

In week 19, there were 277 perinatal deaths. There was a decrease of 103 deaths from the 380 deaths reported in week 18

Figure 8.1: Regional-based Perinatal deaths reported in 2024 until EpiWeek 19

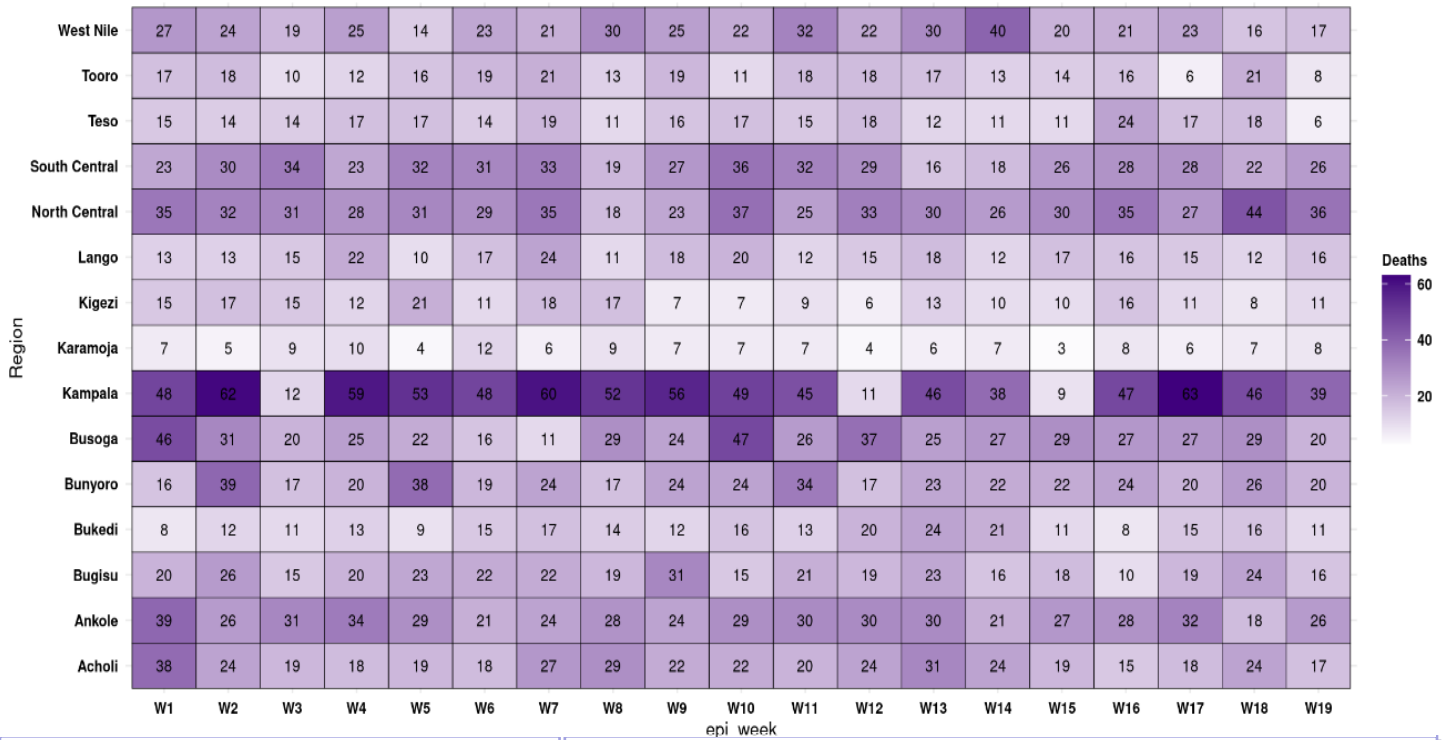


Figure 8.2: Forms of Perinatal deaths Reported during 2024WK19

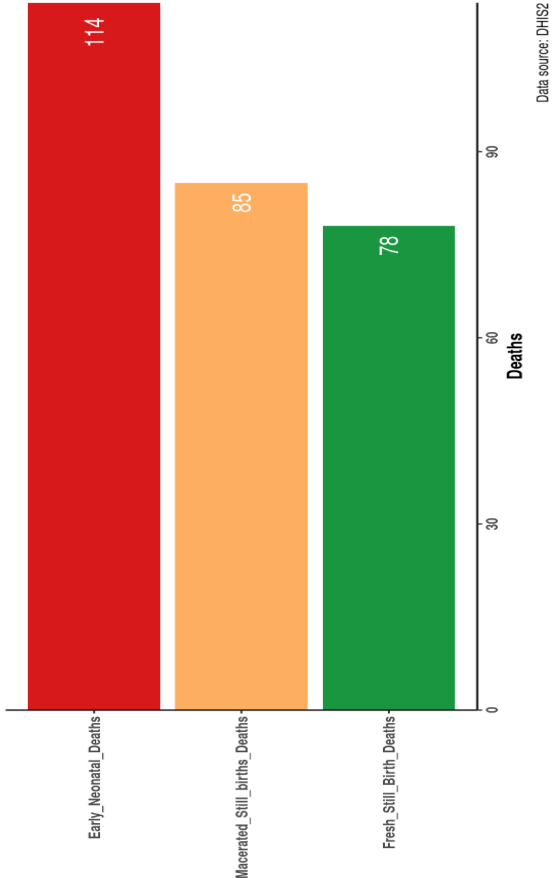
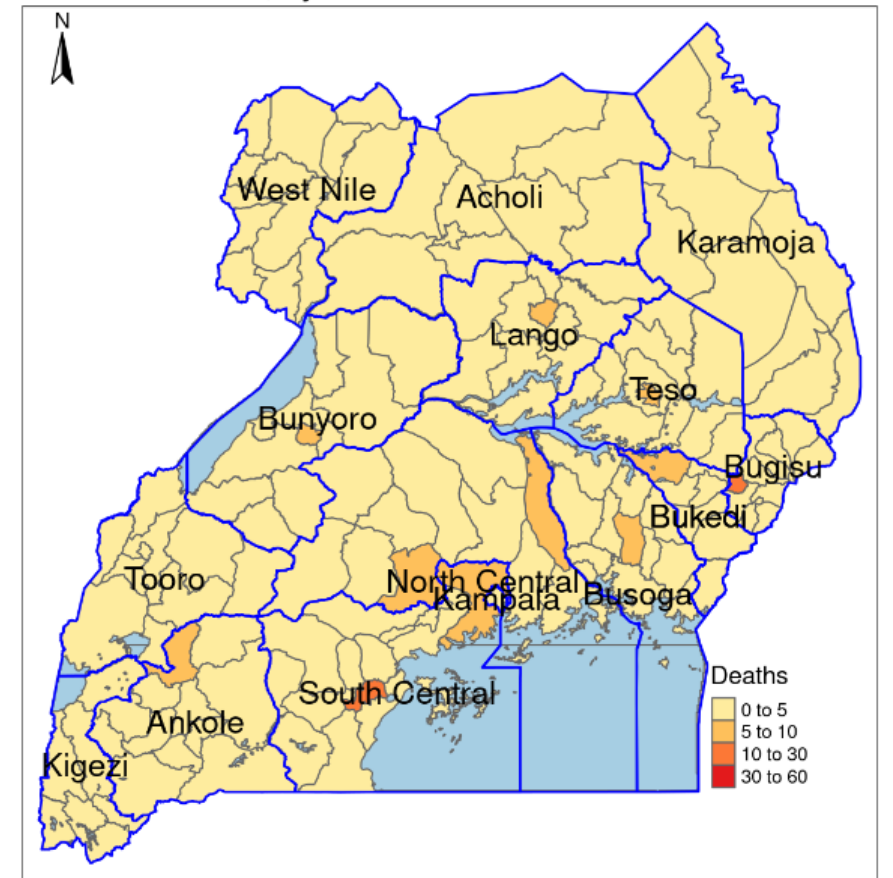


Figure 8.3: Perinatal deaths Reported during 2024WK19 by district



Influenza Surveillance

Table 9.1: Results from the MUWRP Influenza Surveillance Sites: 2024Week 19

Health Facility	Type of case	# of Specimens Tested (PCR)	# H3N2	# H1N1	# COVID-19
Kiruddu NRH	SARI	02	00	00	00
	ILI	08	00	00	01
Mulago NRH	SARI	02	00	00	00
	ILI	08	01	01	00
Jinja RRH	SARI	02	00	00	00
	ILI	08	02	00	00
Gulu RRH	SARI	02	00	00	00
	ILI	08	00	00	01
Totals		40	03	01	02

During week 19, forty samples were collected from Kiruddu NRH (n=10), Mulago NRH (n=10), Gulu RRH (n=10), and Jinja RRH (n=10). These were analyzed using PCR methods for Flu A, Flu B, and SARS-CoV-2 at the MUWRP-EIDP lab at UVRI Entebbe. Four samples (10%) were positive for Flu A with 75% of the cases being of the H3N2 subtype. Two samples (5%) were positive for SARS-CoV-2 (Table 9.1). All samples were negative for Flu B.

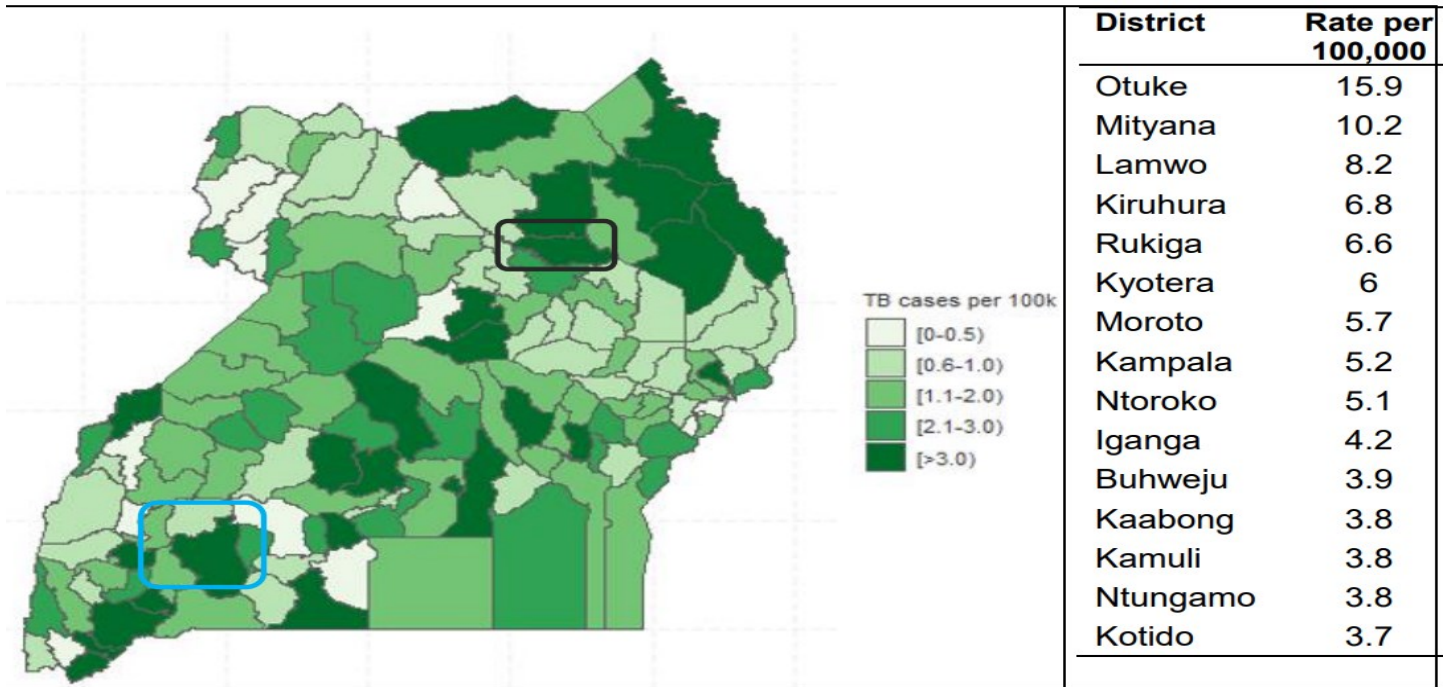
Further, 40 samples collected during week 18 were analyzed for ten other viral causes of ILI/SARI. Adenoviruses (ADV), Parainfluenza viruses (PIV), and human metapneumoviruses (hMPV) were the most prevalent non influenza viral causes of ILI/SARI circulating at 12.5%, 10%, and 5% respectively (Table 9.2). Overall, adenoviruses, Flu A, and parainfluenza viruses were the most prevalent causes of influenza like illnesses during the epidemiological week.

Table 9.2: Results of Analysis for Other Viral Pathogens 2024Week 19

Health Facility	Total Samples Tested	# ADV Positive	# RSV Positive	# hMPV Positive	# PIV Positive	# HBoV Positive
Kiruddu NRH	10	00	00	01	00	00
Gulu RRH	10	05	00	00	00	02
Jinja RRH	10	00	01	00	00	02
Mulago NRH	10	00	00	01	01	00
Total	40	05	01	02	01	04

Tuberculosis Status Update

Figure 11.1: Tuberculosis burden during 2024 EpiWeek 19



Source: National Influenza Center

Figure 11.2: National weekly trends in TB screening, diagnosis and reporting, Wk01 2022 to Wk19 2024

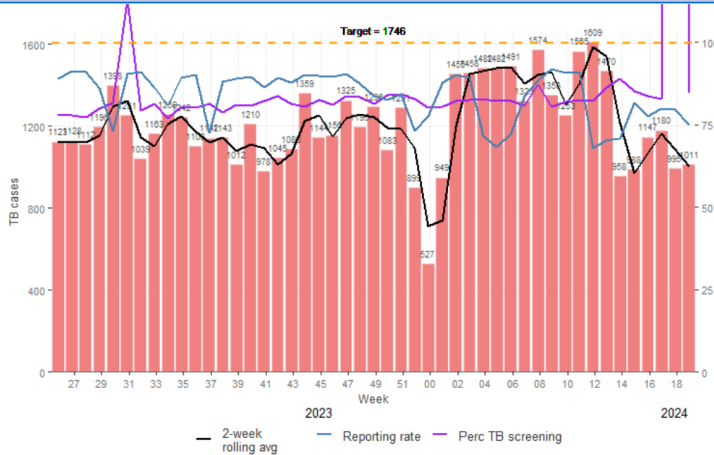


Figure 11.3: National weekly trends in New Relapse TB diagnosed by Wk19, 2024

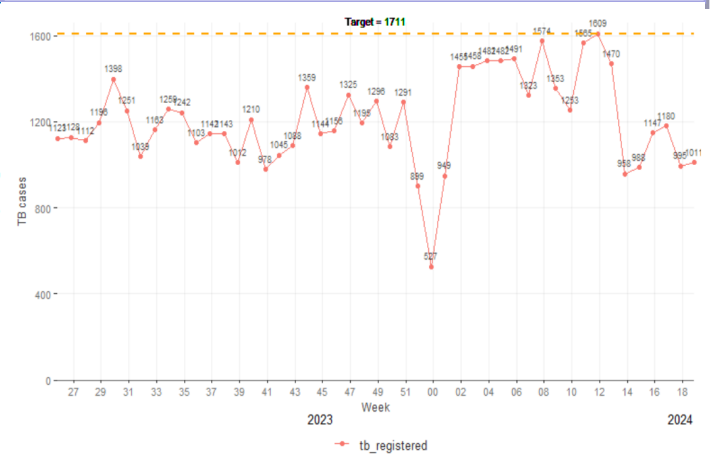
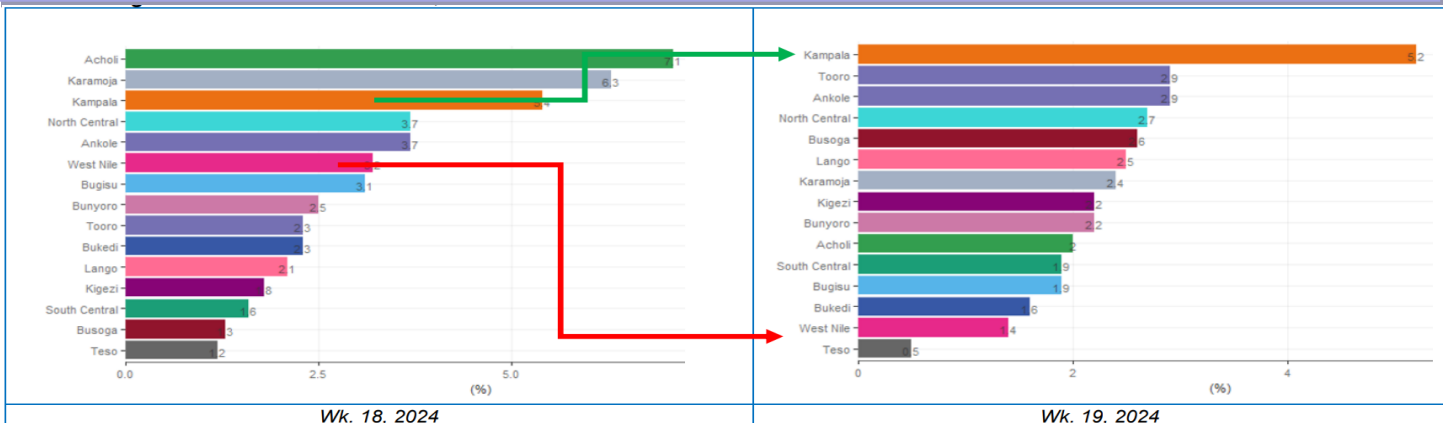


Figure 11.4: Comparison of TB burden by Health Regions between Epi Weeks 18– 19, 2024



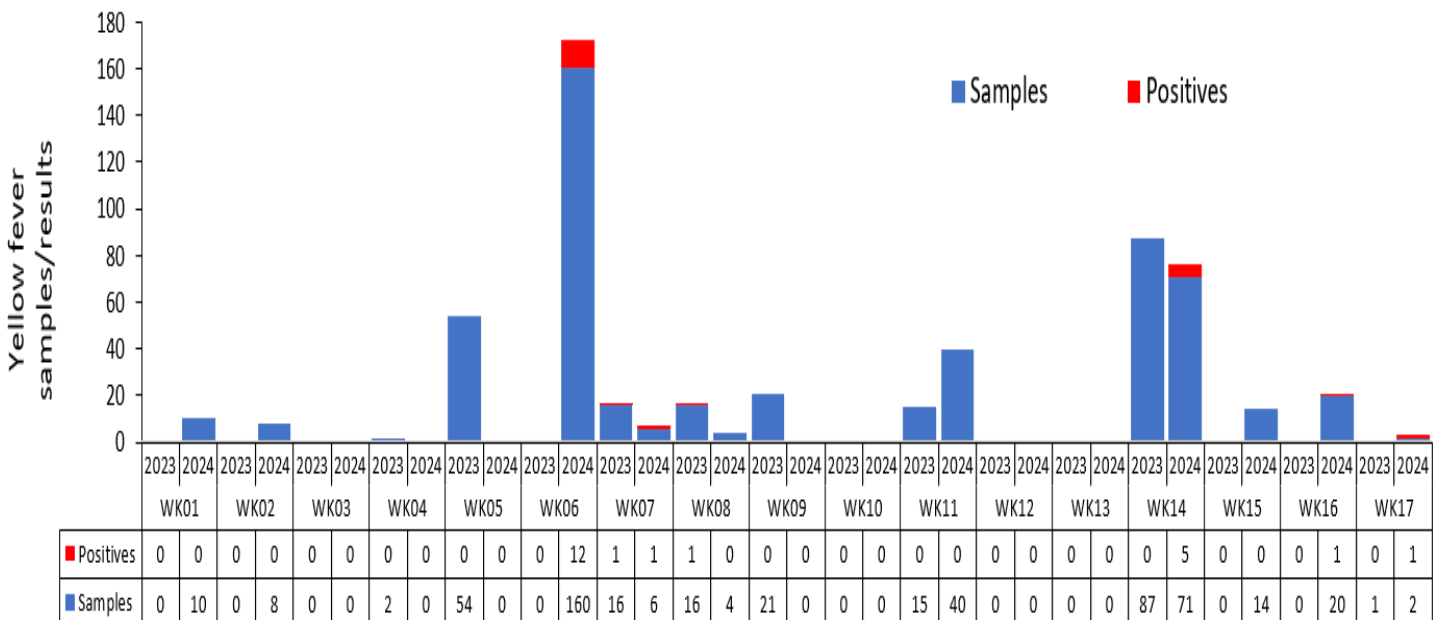
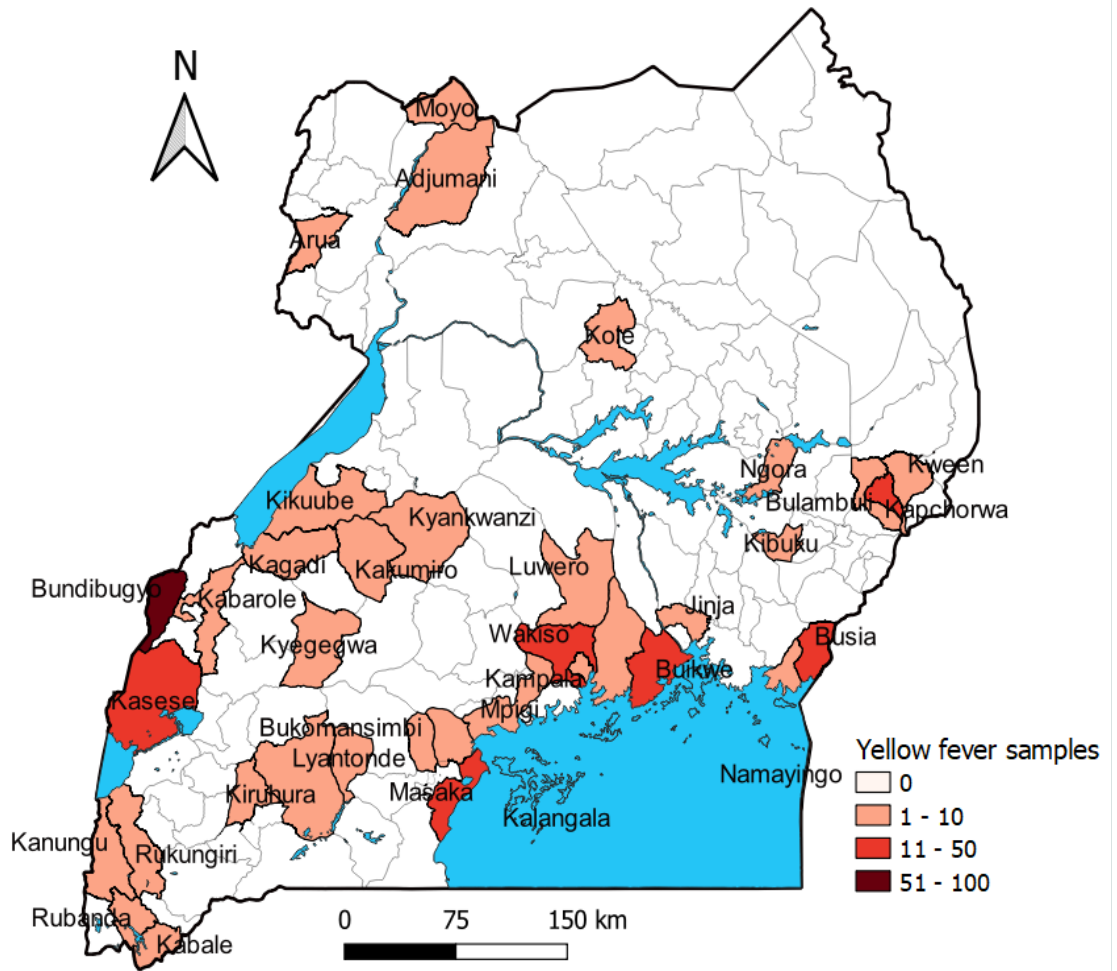
Yellow Fever Virus (YFV) Surveillance

Figure 12.1 : Districts submitting samples for suspected YFV during 2024 EpiWeeks 01-19

During 2024 WK19, zero yellow fever-suspected samples were submitted to UVRI.

Cumulatively, 336 samples have been submitted. The map on the right shows the districts where the tested yellow fever suspected samples came from between (WK01-19 2024). Most of these districts are within the regions of Western, Eastern and Central regions.

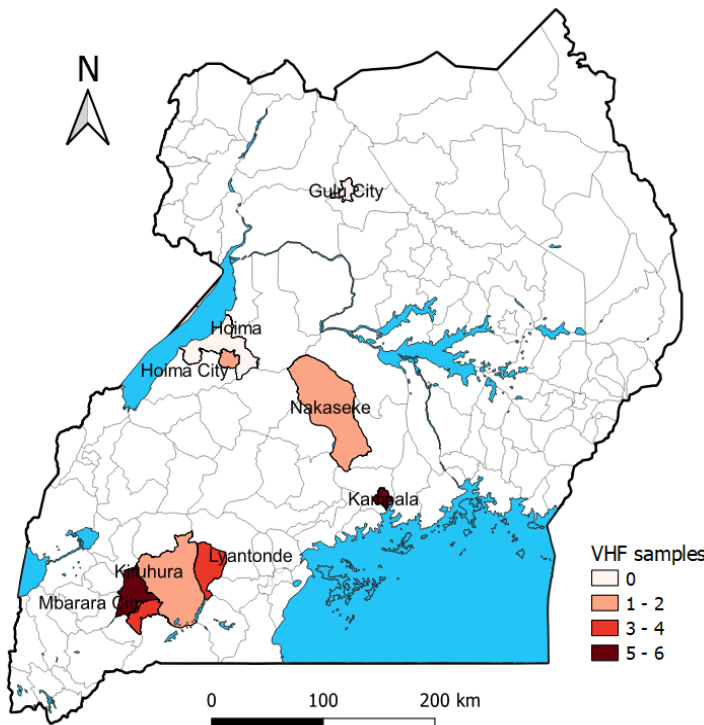
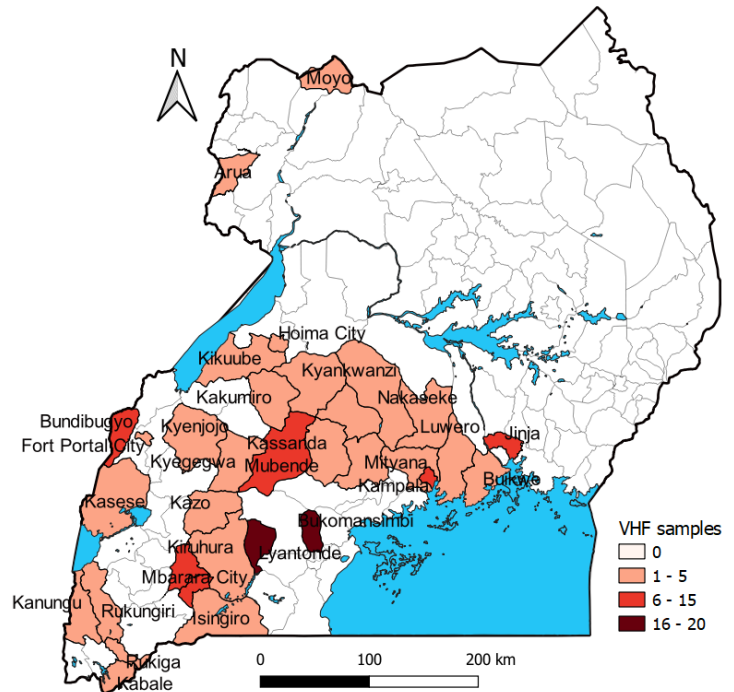
The figure below shows the cumulative number of YFV suspected samples submitted within the same period



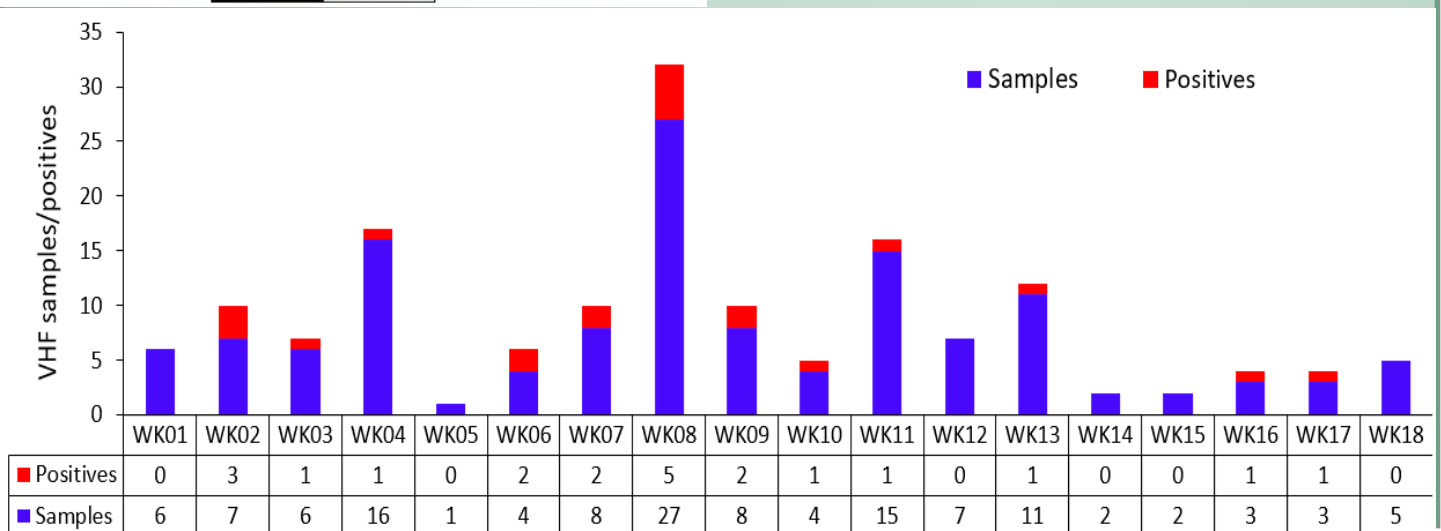
Viral Hemorrhagic Fevers Surveillance

Figure 13.1 : Districts submitting samples for suspected VHF during 2024 EpiWeeks 01-18

Between 2024 WK01-18, a total of 135 VHF suspected samples were collected: 122 from alive and 13 from dead. Bukomansimbi and Lyantonde districts had the highest number of samples (18 each) followed by Jinja (13) and Kampala (12). The map on the right shows the distribution of samples collected by district. Most of them are from central and western Uganda.



Twelve samples tested positive for RVF of which 9 were from Mbarara, 2 from Kampala and 1 from Nakaseke. Nine samples tested positive for CCHF of which 3 were from Lyantonde, 3 from Kampala, 1 from Mbarara, 1 from Hoima and 1 from Kiruhura (as shown in the map on the left). These have been responded to as outbreaks under the zoonosis IMT.



Points of Entry (POE) Surveillance

Table 15.1: Traveler screening at Uganda's Points of Entry during 2024Epi Week19

#	POE	Travelers Screened (Entry)	Travelers Screened (Exit)
1	Mpondwe	70,150	1,694
2	Elegu	19,950	9,267
3	Bunagana	19,522	8,688
4	Cyanika	14,402	6,239
5	Malaba	6,277	-
6	Busunga	5,920	5,711
7	Busia	4,753	-
8	Mirama Hills	3,064	1,741
9	Mutukula	2,933	2,284
10	Kokwochaya	2,419	1,113
11	Vurra	1,411	1,067
12	Goli	1,369	1,503
13	Alakas	1,183	822
14	Kyeshero	940	230
15	Ntoroko Main	850	904
16	Odramacaku	778	269
17	Arua Airport	598	211
18	Katwe	598	299
19	Transami	485	307
20	Ishasha	370	215
21	Ndaiga	249	189

During 2024 EpiWeek 19 a total of 158,908 incoming, and 43,621 exiting travelers at 27 Points of Entry (POEs) were screened. The highest traffic was registered at Mpondwe, Elegu, Bunagana and Cyanika (Table 15.1).

Presumptive Tuberculosis was identified among 21 travelers and 20 of them were tested and none was confirmed with TB. (Table 15.2).

#	POE	Travelers Screened (Entry)	Travelers Screened (Exit)
22	Kayanzi	238	238
23	Wanseko	180	284
24	Sebagoro	94	22
25	Suam	93	63
26	Hima Cement	63	241
27	Tonya	19	20
	TOTAL	158,908	43,621

Table 15.2: Tuberculosis screening among travelers during 2024Epi Week19

POE	# presumptive TB patients identified	# presumptive TB patients tested	# confirmed TB patients identified	# confirmed TB patients linked to care
Alakas	03	03	00	00
Bunagana	03	03	00	00
Busia	07	07	00	00
Busunga	01	00	00	00
Kokwochaya	06	06	00	00
Mpondwe	01	01	00	00
TOTAL	21	20	00	00

Source: IOM, eIDSR

Event Based Surveillance (EBS)

Table 16.1 : Regional-based Signals received and triaged via the 6767 line during 2024WK19

Region	Total Signals Received	Signals Verified	Signals Discarded	Human	Animal	Natural Disaster	Artificial Disaster
Ankole	01	00	01	01	00	00	00
Bugisu	07	07	00	06	00	01	00
Bukedi	03	03	00	03	00	00	00
Kampala	51	49	02	51	00	00	00
N. Central	03	02	01	03	00	00	00
Tooro	02	02	00	02	00	00	00
West Nile	25	25	00	25	00	00	00
Total	92	88	04	91	00	01	00

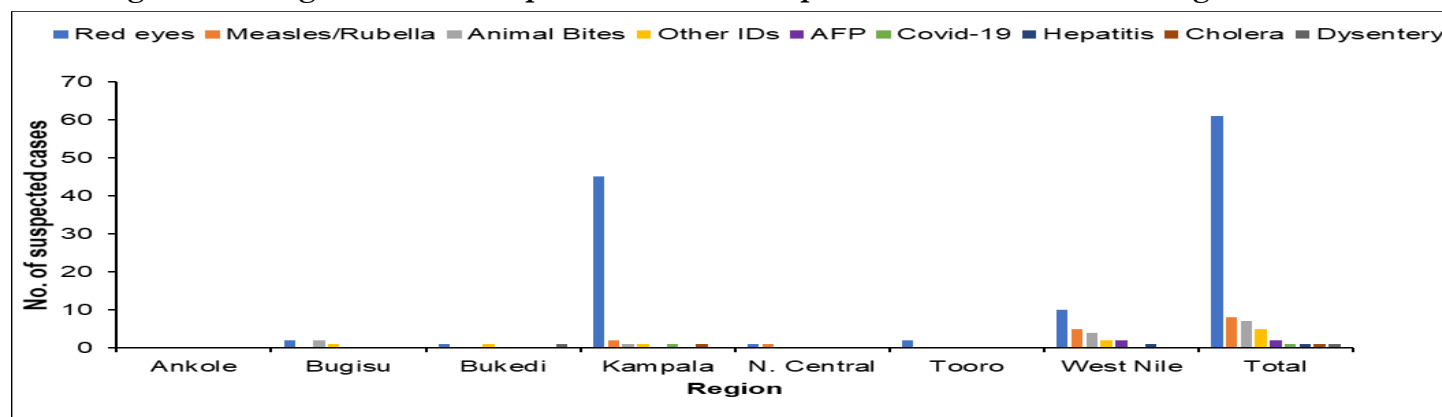
A total of 92 signals were received within the reporting week, of which 96% (88) were verified as events. Almost all of the signals received (91, 99%) were from the human sector, and 1 (1%) from natural disasters (Table 16.1). The natural disaster reported was flooding due to heavy rains in Mbale City and Mbale District.

The most notable signals received during the week were of suspect red eyes (conjunctivitis) in communities and schools of West Nile and Kampala Metropolitan Area and the flooding in areas of Mbale City and Mbale District in eastern Uganda. The signals received during the week were red eyes (conjunctivitis), measles/rubella, animal bites, AFP, Covid-19, hepatitis, cholera and dysentery (Table 16.2, Figure 16.2). The other infectious diseases included chicken pox, flue, cough, and diarrheas.

Table 16.2 : Regional-based suspected conditions reported within signals received and triaged via the 6767 line during 2024WK19

Region	Red eyes	Measles/Rubella	Animal Bites	Other IDs	AFP	Covid-19	Hepatitis	Cholera	Dysentery
Ankole	00	00	00	00	00	00	00	00	00
Bugisu	02	00	02	01	00	00	00	00	00
Bukedi	01	00	00	01	00	00	00	00	01
Kampala	45	02	01	01	00	01	00	01	00
N. Central	01	01	00	00	00	00	00	00	00
Tooro	02	00	00	00	00	00	00	00	00
West Nile	10	05	04	02	02	00	01	00	00
Total	61	08	07	05	02	01	01	01	01

Figure 16.1: Regional-based suspected conditions reported via the 6767 line during 2024WK19



PUBLIC HEALTH EMERGENCIES IN AND AROUND UGANDA

Table 17.1: Active PHEs in Uganda during 2024WK19

Activation Date	Location	PHE	Total Cases (suspects, probable)	Confirmed Cases	Human Deaths
18-Feb-24	Sixteen health Regions	Conjunctivitis	21,783	-	00
14-Dec-19	Seven Health Regions	Tuberculosis			
05-Mar-24	Kakumiro	Measles	76	06	02
08-May-24	Kagadi	Measles	05	03	00
08-Feb-24	Bukomansimbi	Black Water Fever	115	-	13
23-Feb-24	Ntungamo	Rift Valley Fever	05	04	01
10-Mar-24	Mbarara	Rift Valley Fever	10	05	01
27-Mar-24	Sheema	Rift Valley Fever	02	02	00
24-Apr-24	Kiruhura	Crimean Congo Hemorrhaging Fever	04	04	03
05-May-24	Kyotera	Cholera	57	15	04

Uganda's PHEOCs are currently activated for an outbreak of Red Eyes in 109 prisons located within sixteen health regions plus multiple communities including schools; Measles in Kakumiro and Kagadi districts; Tuberculosis upsurge in seven health districts; Complicated Malaria / Black Water Fever in Bukomansimbi district; Rift Valley Fever in Ntungamo, Mbarara and Sheema districts, CCHF in Kiruhura district and Cholera at the Kasensero lake shores of Kyotera district.

Within Uganda's neighborhood, three countries are responding to Poliomyelitis (cVDPV1 and 2), three countries are responding to Cholera outbreaks, anthrax is in two countries, measles is reported in three countries, and Monkey Pox in the DRC

Table 17.2: Active PHEs around Uganda during 2024WK19

Country	PHE	Grading	Start Date	Total Cases	Confirmed Cases	Deaths	CFR
Kenya	Anthrax	Grade 2	10/04/2023	20		3	15%
	Leishmaniasis	Ungraded	03/01/2020	2,395	2,205	10	0.40%
	Measles	Ungraded	01/01/2023	1992	403	27	1.40%
	Poliomyelitis (cVDPV2)	Grade 2	26/05/2022	13	13	0	0.00%
	Cholera	Grade 3	05/10/2022	12,501	577	206	1.60%
South Sudan	Rift Valley Fever	Ungraded	25/01/2024	13	1	0	0.00%
	Yellow Fever	Ungraded	24/12/2023	38	1	5	13.20%
	Hepatitis E	Ungraded	01/01/2019	4,253	63	12	0.30%
Tanzania	Measles	Ungraded	01/01/2023	7,862	586	173	2.20%
	Cholera	Grade 3	07/09/2023	660	53	19	2.90%
Rwanda	Poliomyelitis (cVDPV2)	Grade 2	17/07/2023	2	2	0	0.00%
	Monkey Pox	Protracted 2	01/01/2023	13357	714	607	45.50%
Democratic Republic of Congo	Measles	Ungraded	01/01/2023	305404	7214	5684	1.90%
	Cholera	Grade 3	01/01/2023	62803	1866	715	1.10%
	Anthrax	Grade 2	15/11/2023	5	1	2	40.00%
	Poliomyelitis (cVDPV1)	Grade 2	27/08/2022	247	247	0	0%
	Poliomyelitis (cVDPV2)	Grade 2	01/01/2022	489	489	0	0.00%