

# KAMPALA METROPOLITAN REGIONAL EMERGENCY OPERATION CENTRE toll free: 0800299000

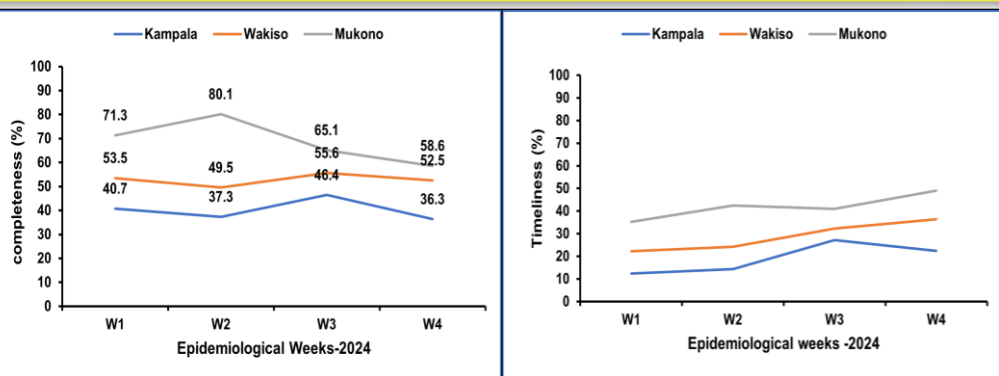


THE REPUBLIC OF UGANDA

## WEEKLY EPIDEMIOLOGICAL BULLETIN (22<sup>nd</sup> -28<sup>th</sup> Jan,2024) WEEK:04 ISSUE:04



### KMA 033B Reporting



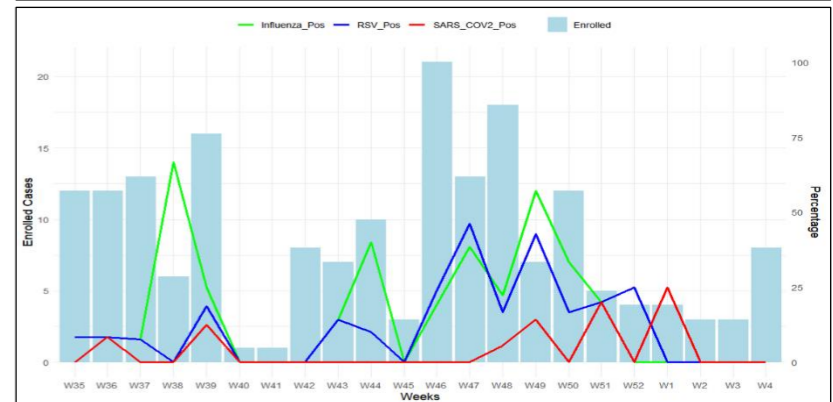
None of the districts in the Kampala Metropolitan Area (KMA) managed to achieve the 80% target for weekly surveillance reporting, with only Wakiso scoring above 50% in completeness. To address the reporting challenge KMA have secured support from IDI with funding from US CDC to do surveillance mentorship within Kampala metropolitan area with focus on newly added facilities in DHIS 2 system.

### KMA -SARI/ILI/PRDS surveillance

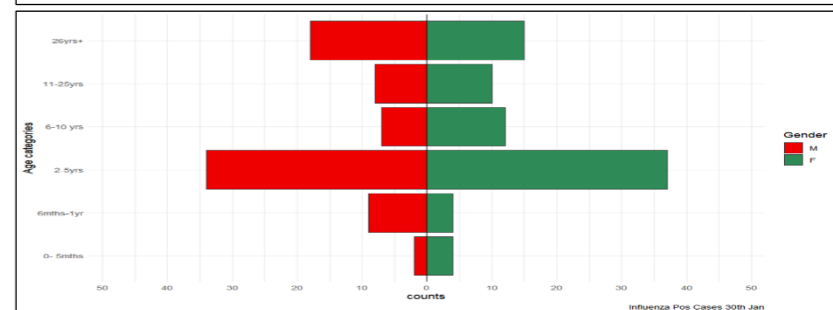
#### Summary of SARI/ILI enrolment, testing and positives Aug 23 – 30<sup>th</sup> Jan,2024

Indicators/sites	Enrolment and sample testing at UVRI			Positive Results				Not yet done
	# Cum. cases enrolled	#specimens reached UVRI	Variance	# Tested at UVRI	SARS-COV2	Influenza	RSV	
<b>Total Cases</b>	<b>187</b>	<b>179(95%)</b>		<b>160(89%)</b>	<b>7 (4%)</b>	<b>29 (18%)</b>	<b>37 (23%)</b>	
1. Entebbe RRH	25	21	4	17	0	2	5	
2. Kawaala HCIV	11	10	1	10	0	2	2	
3. Kibuli Muslim	13	13	0	10	1	3	2	
4. Kiswa HCIII	13	14	-1	13	0	5	2	
5. Kitebi HCIII	26	29	-3	24	1	9	5	
6. Mukono Hosp	41	44	-3	35	1	1	4	
7. Nsambya Hosp	58	55	3	51	4	7	17	

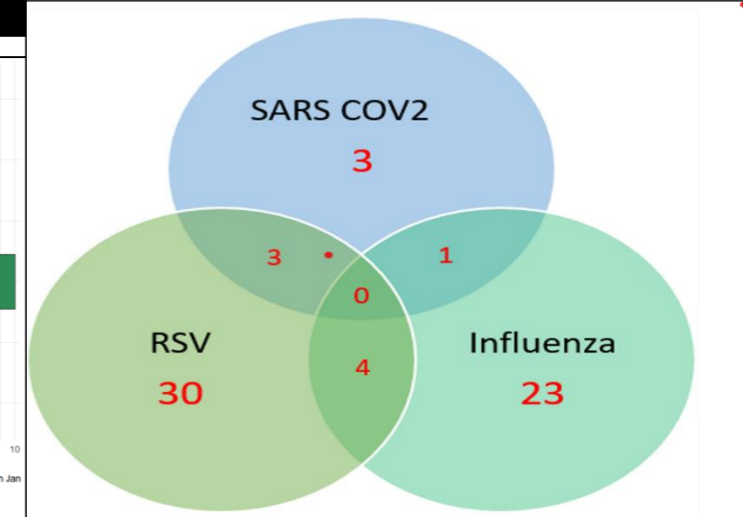
#### Enrolments Vs positivity rates for SARS/COV2, RSV and Influenza



#### Distribution of All Enrolled Cases by Age and Sex



#### CO Morbid Cases of SARS/COV2, RSV & Influenza Positive



### Emergency Medical Services (EMS)

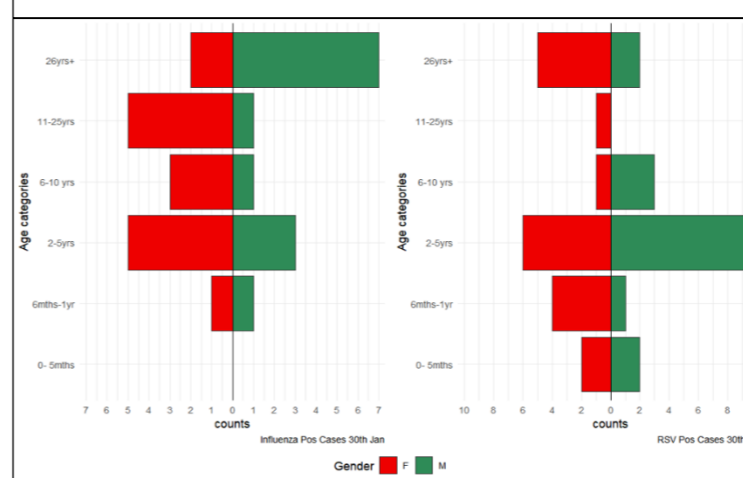


- 112 Total calls received.
- 90 Emergencies from public facilities
- 65 Community emergencies
- 11 General inquiries
- 06 Signals
- Referral destinations**
  - Kawempe NRH =69
  - Naguru RRH = 23
  - Kiruddu NRH=00
  - Mulago NRH= 03

### Veterinary Public Health

Total slaughters  
Cattle:5,108  
Goats and sheep: 3,426  
Pigs:880  
Conditions formed.  
**Cysticercus**, the larval stage of the pork tapeworm, poses a significant public health threat in regions with poor sanitation. Human infection occurs through consuming undercooked pork or contaminated food, leading to neurocysticercosis, characterized by neurological symptoms. Prevalent in Latin America, Africa, and Asia, it has economic implications due to treatment costs and productivity losses. Preventive measures involve cooking pork thoroughly, sanitation improvements, and public health education. Diagnostic challenges exist, necessitating a One Health approach that integrates human and animal health sectors. Addressing cysticercosis requires a comprehensive strategy involving collaboration, awareness, and interventions in both human and pig populations.

#### Distribution of Influenza, RSV Positive Cases by Age and Sex



The table above indicates that more cases of influenza-like illness were caused by RSV, followed by influenza, with SARS-CoV-2 being the least isolated pathogen. The 2-5 age group had the highest number of cases for RSV and influenza viruses, with some cases involving co-infections with SARS-CoV-2, RSV, and influenza. However, no cases were registered where a person was infected with all three pathogens, as depicted in our Venn diagram.

### KMA- Enhanced Situation Awareness

According to the Regional Risk Monitoring Calendar, the region is expected to experience an upsurge in malaria cases, possibly due to the festive season movement. We strongly advise families/households to properly use the mosquito nets distributed by the government in December to reduce mosquito bites.

Health facilities should increase their orders for malaria management logistics from the National Medical Stores (NMS), as a higher number of cases coming to the facility are expected to be malaria related. Districts are urged to strengthen the implementation of Integrated Community Case Management (ICCM) and provide Community Health Workers (VHTs) with ICCM logistics for effective malaria management.

### KMA Event Based Surveillance

Signals received: 14.  
Signals triaged: 14.  
Signals discarded: 10.  
Signals verified: 04.

Actions taken.  
2 signals meet the case definition for measles.  
Sample were collected and sent to UVRI – Results Negative for measles and Rubella IgM  
1 signal meet the case definition for VHF.  
Samples collected and sent to central emergency surveillance laboratory VHF lab- Results Positive for RVF

1 signal meet case definition for SARI sample collected and sent to the UVRI -results negative for COVID-19.

### Infection Prevention and Control

#### IPC/WASH Support supervision to healthcare facilities:

- 21/20 (105%) facilities were supported in Kampala and Wakiso, in terms of IPC/WASH assessments, onsite healthcare worker mentorship with 148/100(148%) HCWs mentored on waste segregation, decontamination, disinfectant preparation, injection safety practices and steps of hand hygiene.
- 06/12(60%) HFs assessed for HH compliance with 54/60(90%) HCWs mentored on the WHO Five Moments of H.H.
- Distributed 245/400 (61.25%) Litres of JIK (NaoCl-3.5%mv) 12/20(60%) HFs in Kampala and Wakiso



DISCLAIMER: The data included in this summary was extracted from DHIS2 through m-track and other key sources



This report was compiled by KMA PHEOC under KCCA DPHE and made possible by the generous support through the partners. The contents of this bulletin are the responsibility of the Kampala metropolitan area PHEOC and do not necessarily reflect the views of the partners.