



# MINISTRY OF HEALTH

## THE WEEKLY EPIDEMIOLOGICAL BULLETIN

**WEEK 05: 27<sup>th</sup> Jan -2<sup>nd</sup> Feb 2020**

Dear Reader,

We are pleased to share our 5<sup>th</sup> weekly epidemiological bulletin for the year 2020.

This epidemiological bulletin serves to inform all stakeholders at district, national, and global levels on disease trends, public health surveillance and interventions undertaken in detecting, preventing and responding to public health events in the country on a weekly basis.

### In this issue, we bring you the following among others

- ◆ National and district weekly surveillance reporting
- ◆ Suspected epidemic prone diseases.
- ◆ Ongoing (current) public health events (page 1)
- ◆ Regional reporting rates
- ◆ Public health events in border countries

**For comments please contact: Dr. Allan Muruta, Commissioner, Department of Integrated Epidemiology, Surveillance and Public Health Emergencies - MoH; P.O BOX 7272 Kampala, Tel: 080010066 (toll free); Email: esd@health.go.ug or esdugandazz@gmail.com**

### Current public health threats

#### nCorona Viral Disease (COVID-19)

- No case has been reported in Uganda
- The National Task Force has been activated to enhance preparedness against COVID-19
- Points of entry have been activated and screening is ongoing
- High risk travelers are being followed and alerts verified
- The nCorona surveillance strategy has been developed and disseminated (*Annex ii*)

#### EVD

- EVD preparedness activities are ongoing
- Active case search, contact tracing across the border, screening at points of entry
- EVD surveillance mentorship in community and health facilities

#### Measles Outbreak in Isingiro District

- 73 measles cases have been managed at Nakivale HC IV

#### TB in Karamoja and Lango sub-regions

- TB has been declared as a national emergency
- Most affected areas are Acholi, Lango Karamoja Kampala sub-regions and Uganda prisons services and hence are prioritized for response
- Dashboards have been developed to effectively monitor targeted response activities

#### Yellow fever in Moyo, Maracha and Buliisa Districts

- 4 confirmed cases in Moyo
- 3 confirmed cases in Buliisa Districts
- 1 confirmed cases in Maracha
- Outbreak response activities are on going

#### CCHF in Kagadi

- The confirmed case in Kagadi sero converted to Negative and was discharged

#### Cholera in Busia

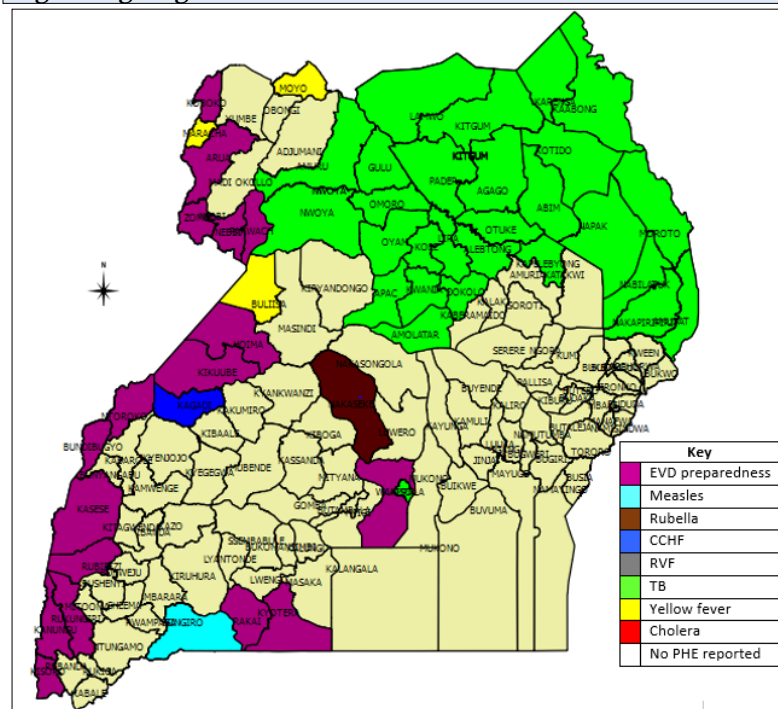
- 1 confirmed and 5 suspected cases in Busia

#### RVF in Kampala

- One case was confirmed at Naguru RHH

(Refer to map on page 1)

**Fig 1: Ongoing Public Health Events**



## Priority Diseases

The data shows high number of typhoid, measles, Malaria, dysentery, SARI and animal bites in different parts of the country.

Table 1: Case Fatality Rate of Priority Diseases, week 05

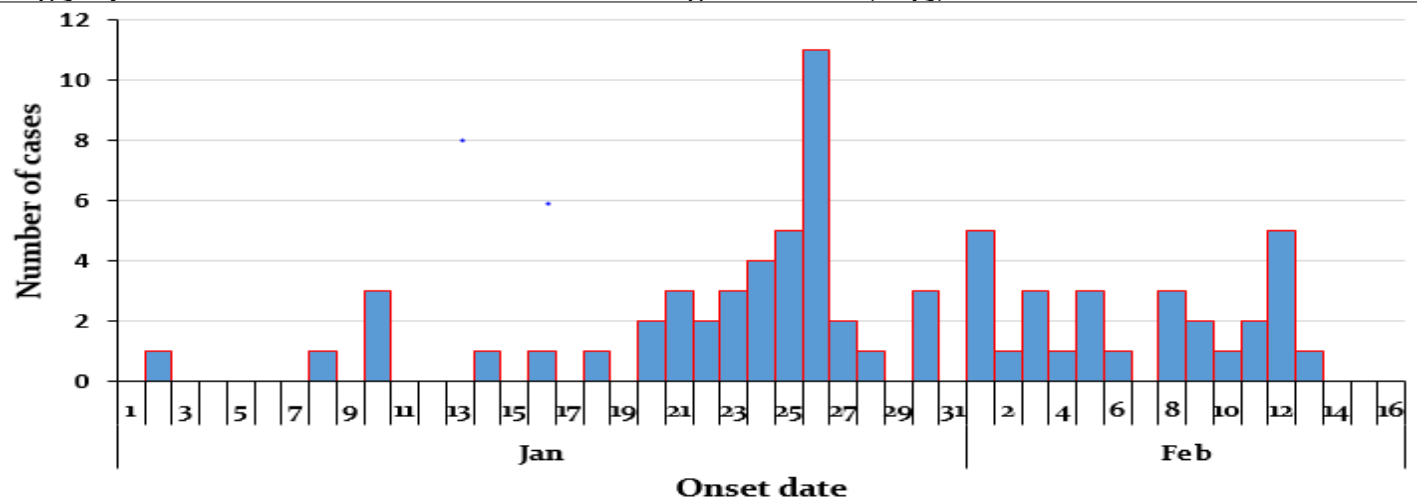
Conditions	Cases	Deaths	CFR(%)
AFP	8	0	0.0
AEFIs	4	0	0.0
Animal bites	64	0	0.0
Bacterial Meningitis	0	0	0.0
Cholera	0	0	0.0
Dysentery	36	0	0.0
Guinea Worm	0	0	0.0
Malaria	20607	10	0.04
Hepatitis B	5	0	0.0
Measles	26	0	0.0
NNT	0	0	0.0
Plague	0	0	0.0
Other Suspected	0	0	0.0
VHFs	0	0	0.0
SARI	9	0	0.0
Typhoid fever	413	0	0.0
Yellow fever	0	0	0.0
Anthrax	0	0	0.0
Leprosy	1	0	0.0

Severe Acute Respiratory Infection (SARI), Viral Haemorrhagic Fevers (VHF),

## Measles (Confirmed cases)

- Nineteen (19) districts have detected and investigated at least one suspected measles case.
- These are: Adjumani, Agago, Alebtong, Apac, Bugiri, Bushenyi, Hoima, Isingiro, Kakumiro, Kassanda, Kole, Lamwo Lira, Morokaeke Nakasongola, Pader, Serere and Yumbe.
- Majority of the children affected by measles are under 1 year of age.
- The Isingiro measles outbreak started from Nakivale Refugee camp (fig 3)

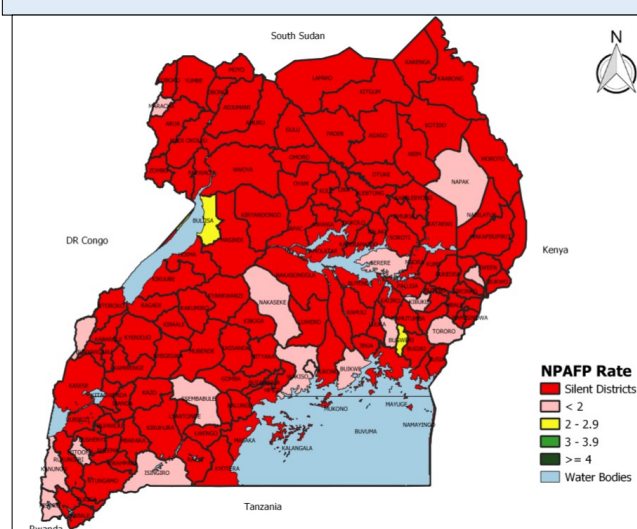
Fig 3. Epidemic curve of measles outbreak in Isingiro District (n=73)



## Acute Flaccid Paralysis (AFP)

- 1 AFP case was investigated during week 05 from Kibuku District
- 14 districts have investigated at least 1 AFP

Fig 3: Non Polio AFP rate week 05



## Maternal and Perinatal deaths:

Table 2: Distribution of maternal deaths (n=7) and perinatal deaths (n=8, week 05)

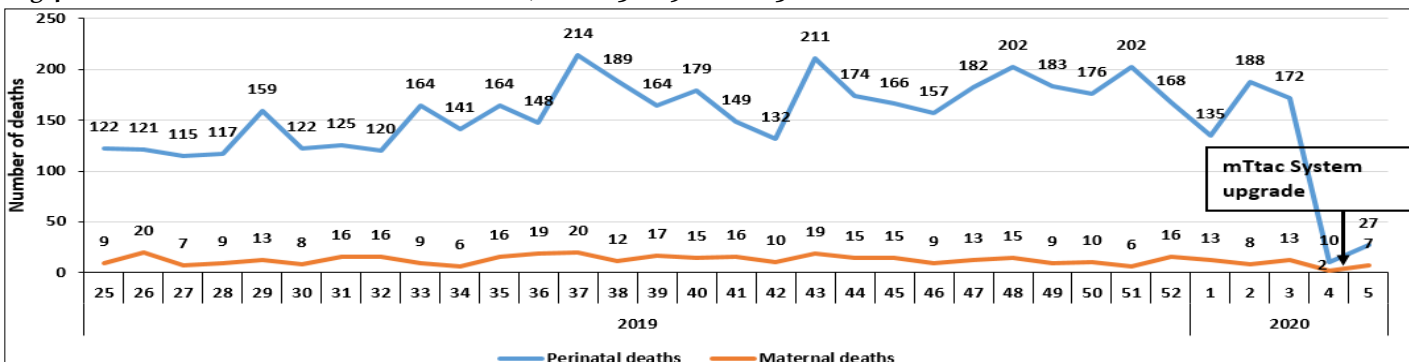
Districts	Maternal death- Deaths		Perinatal deaths		
	Name of HF	No. Deaths	Macerated Still births	Fresh Still Birth -	Early Neonatal deaths days (0-7)
Kibaale	Kibale Hosp	2	0	0	0
Kampala	Naguru RRH	2	6	0	0
Mityana	Mityana Hosp	2	0	0	0
Koboko	Koboko Hosp	1	0	0	0
Lira		0	3	2	4
Mukono		0	2	0	0
Kyotera		0	1	1	0
Kibuku		0	1	1	1
Rukiga		0	1	0	0
Ntoroko		0	1	0	0
Isingiro		0	0	2	0
Kalangala		0	0	0	1
Kanungu		0	0	0	1

Data source: DHIS2

Data source: EPI lab

Data source: DHIS2

Fig 4: Trends of maternal and neonatal deaths, week 25 2019 -week 05 2020



Animal bites

Data source: DHIS2

Table 3: Districts that reported animal bites week 05

District	Number of cases
Wakiso District	22
Mbarara District	7
Kagadi District	6
Tororo District	5
Nwoya District	4
Mityana District	4
Mbale District	3
Amuria District	3
Lira District	2
Butaleja District	2
Kiruhura District	2
Kabale District	2
Kyenjojo District	2

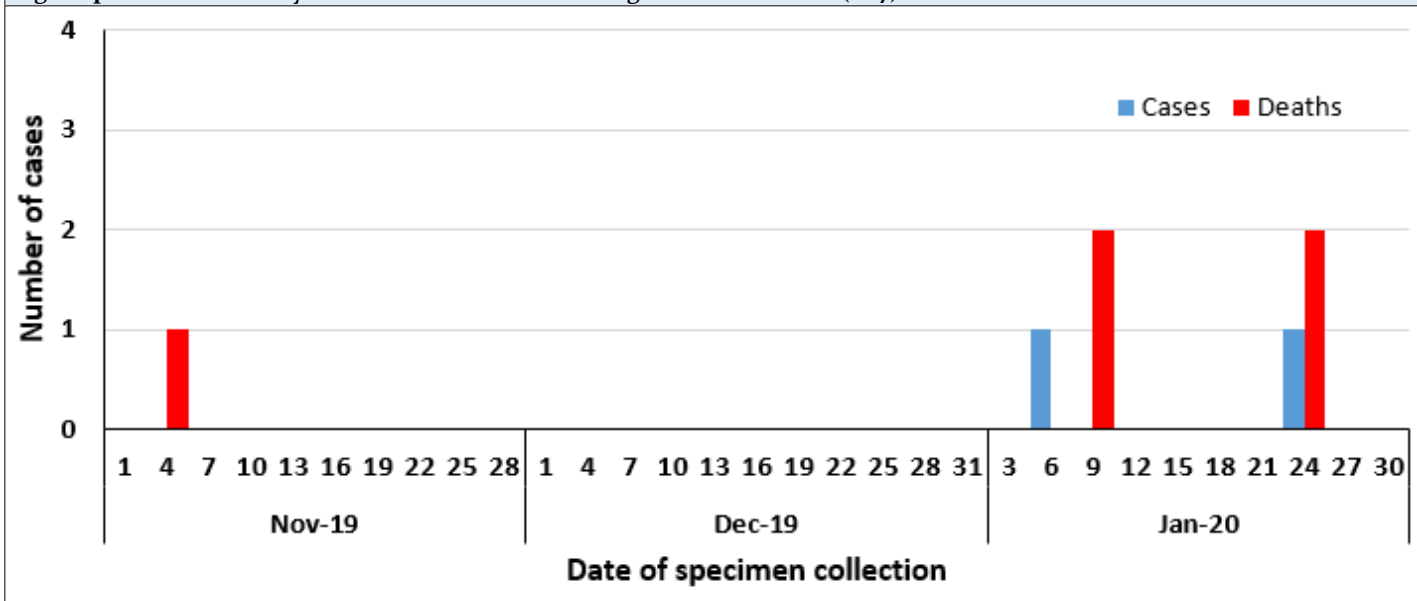
Table 4: Public health events across the countries bordering Uganda, as of 7<sup>th</sup> Feb 2020

Country	Condition	No. of cases	No. of deaths	Grading
S. Sudan	Measles	4414	23	Ungraded
	Hepatitis E	137	2	Ungraded
DRC	EVD	3428	2250	G3
	Poliomyelitis (cVDPV2)	84	0	G2
	Measles	319,930	6148	G2
	Monkey pox	5387	107	N/A
	Cholera	31764	542	G3
	Plague	51	8	Ungraded
Rwanda	-	-	-	Closed
Kenya	Cholera	64	1	Ungraded
	Measles	559	1	Ungraded
	Leishmaniasis	2879	34	Ungraded
Tanzania	-	-	-	No update

Reporting Rates

Data source: Makerere University Walter Reed Project

Fig 6: Epidemic Curve of yellow fever outbreak showing cases and deaths (n=7)

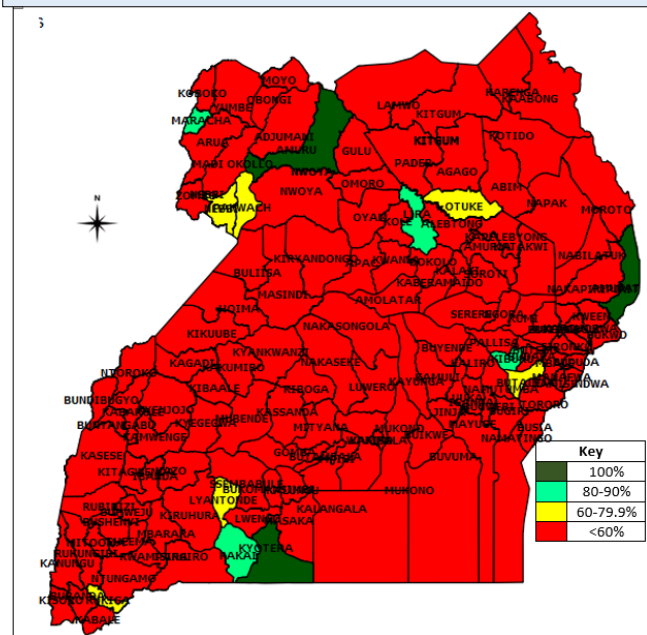


Data source: PHEOC

### Completeness of reporting

The reporting rates in week 5 were affected by abrupt the Switch to the new systems DHIS2 & mTrac Pro which was communicated late to districts and hence some of the districts have not yet rolled out all revised HMIS tools to all health Facilities.

Fig 7; Completeness of reporting, week 05, 2020

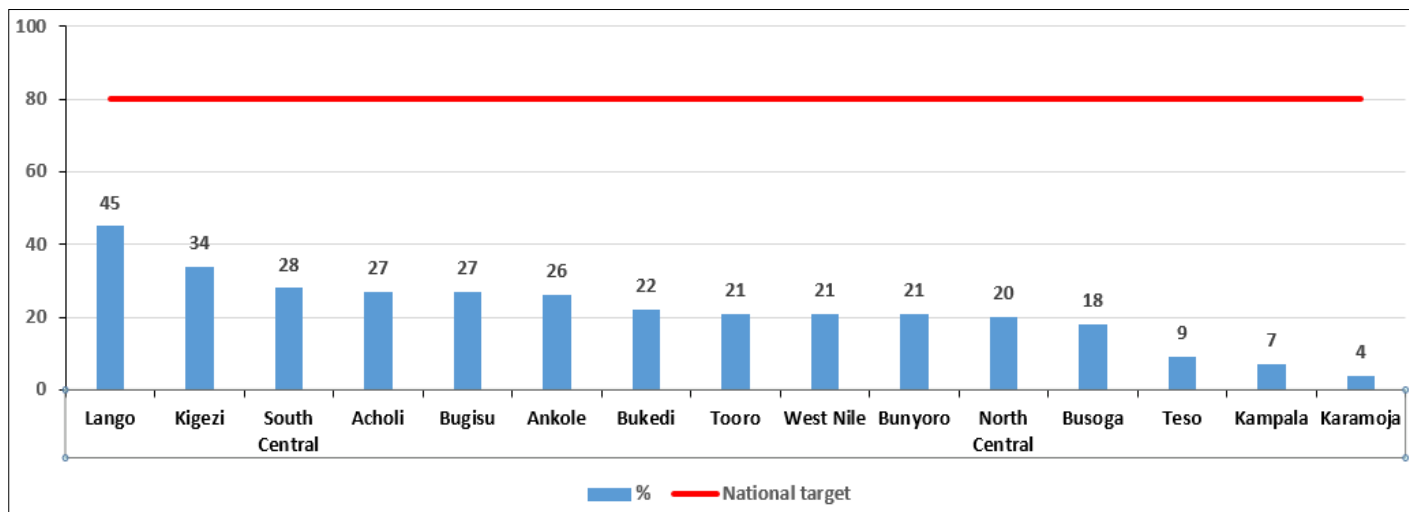


Source: DHIS2

### Acknowledgement and Recommendations

- The data shows that measles cases are reported in districts that either host refugees or border districts. Therefore these districts are urged to enhance immunization and nutrition interventions.
- Chief Administrative Officers and District Health Officers (DHOs) should share situation reports of all public health events in their catchment areas.
- Implementing Partners supporting surveillance activities in different districts across the country are requested to support improvement of surveillance data quality in their respective districts.
- The timeline for EPI bulletin has been revised. This means that the bulletin will consist of only weekly data that is submitted on time (by Monday midday). Districts are encouraged to ensure timely reporting to enhance early detection and prompt response.
- UNEPI reminds and encourages all the districts to carry out active search for AFP, NNT, EAFI and measles cases in their health facilities and communities.
- Maternal deaths and perinatal deaths audits should be conducted to address issues surrounding excessive deaths of mothers and newborns especially for Kampala region.
- Partners are urged to support districts that are currently affected by outbreaks

Annex I: Percentage of reporting per region, Epi week 05, 2020



Data source: DHIS2

### Editorial team :

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*Remember, your feedback is important to us.*



## National Surveillance Strategy for 2019-nCoV Virus outbreak

