



MINISTRY OF HEALTH

THE WEEKLY EPIDEMIOLOGICAL BULLETIN

WEEK 09: 26th February to 3rd March 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:

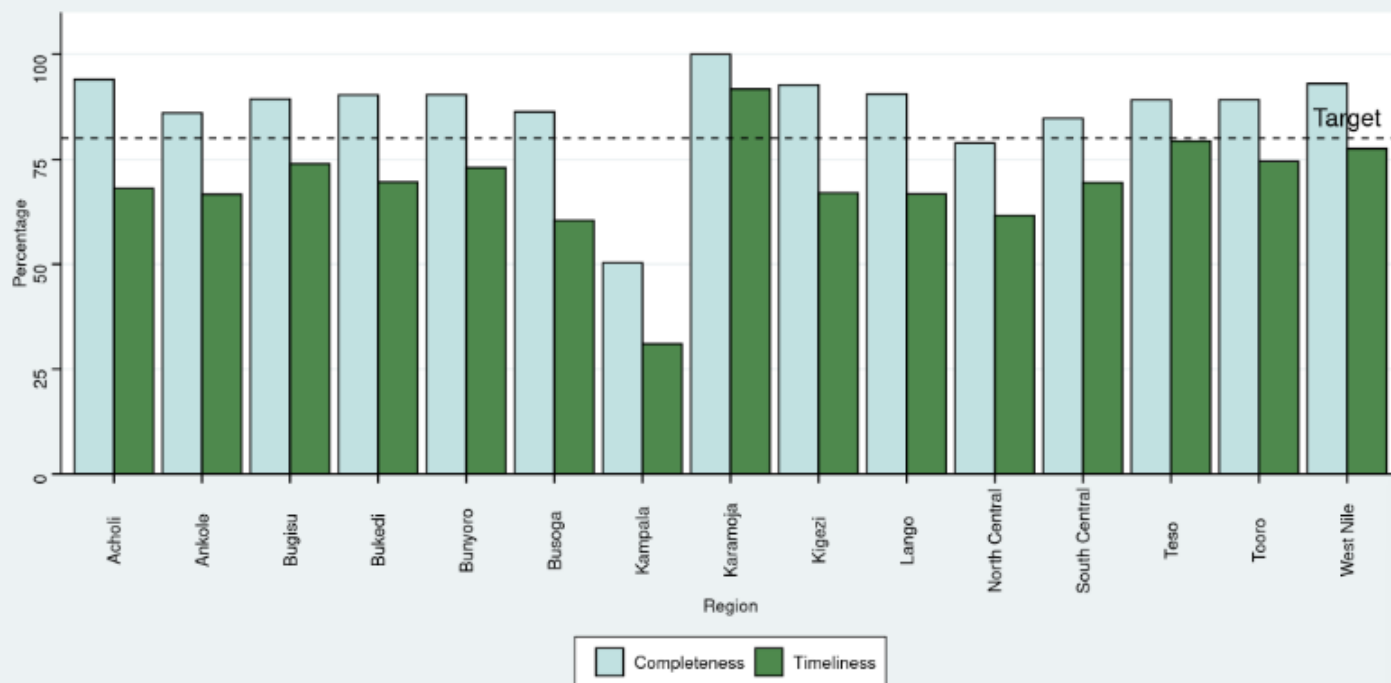
Dr. Allan Muruta,

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Indicator Based Surveillance

Figure 1.1: Regional weekly reporting rates for notifiable conditions during 2024EpiWeek 09

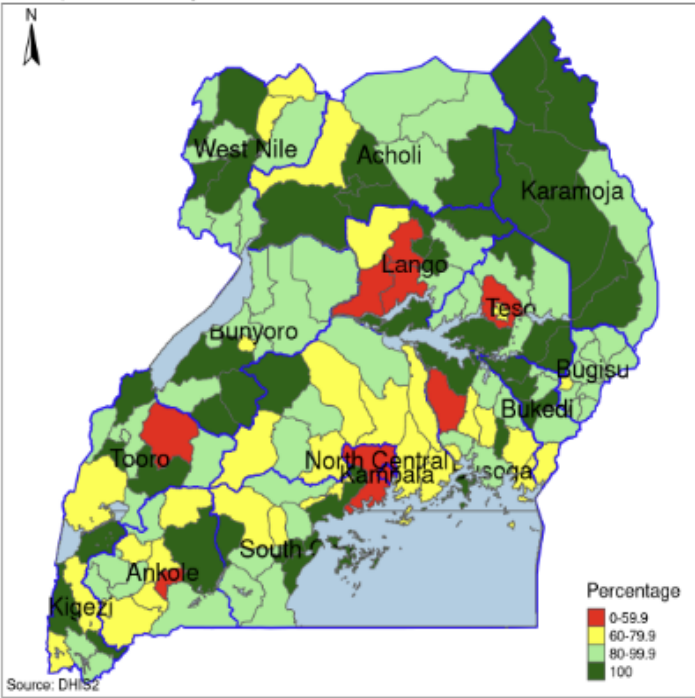


Source: DHIS2

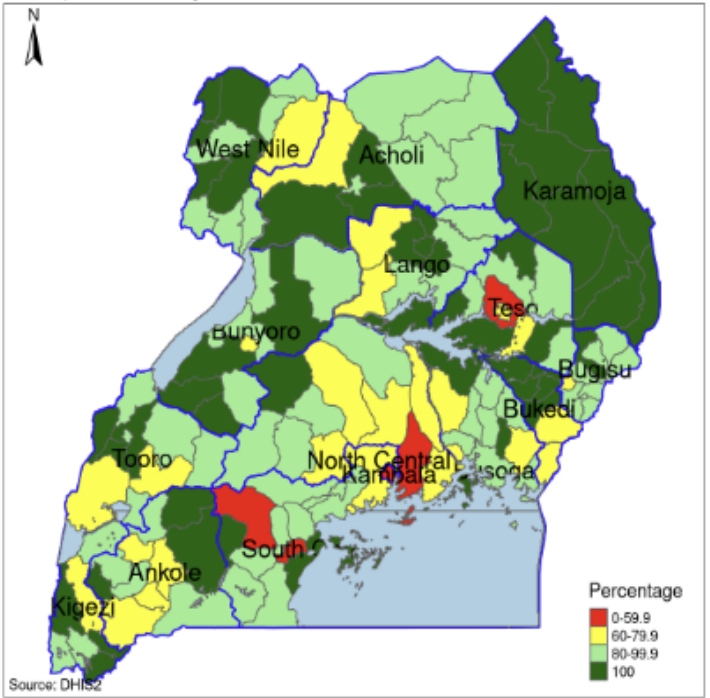
Most regions achieved the target of 80% for completeness for the weekly epidemiological reports within the EpiWeek 09 save for Kampala, and North Central. Timeliness within most regions was below the target save for Karamoja and this needs strengthening. Our recommendation is that district biostatisticians 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.

Figure 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 08 and 09

Completeness, by district, Week 8



Completeness, by district, Week 9



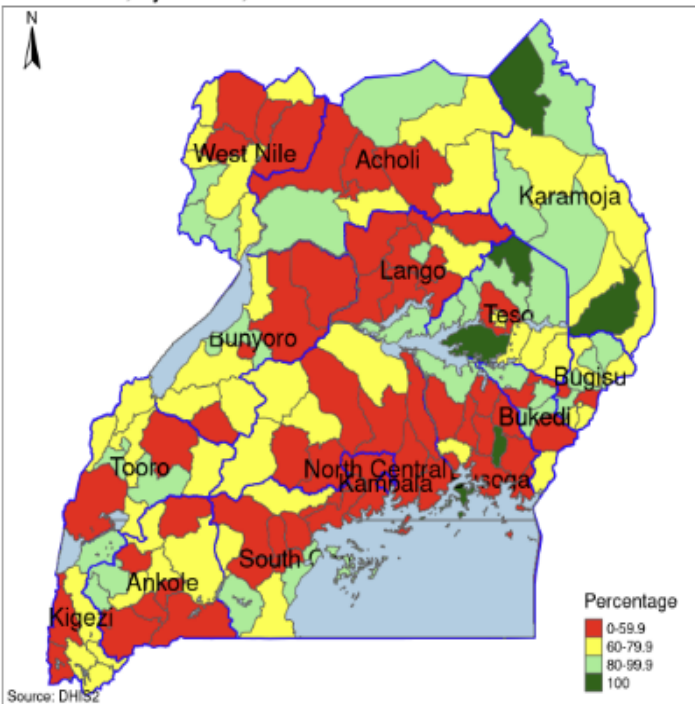
KEY

0-59.9	Poor performance
60-79.9	Average performance
80-99.9	Good performance
100	Best performance

Source: DHIS2

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

Timeliness, by district, Week 8



Timeliness, by district, Week 9

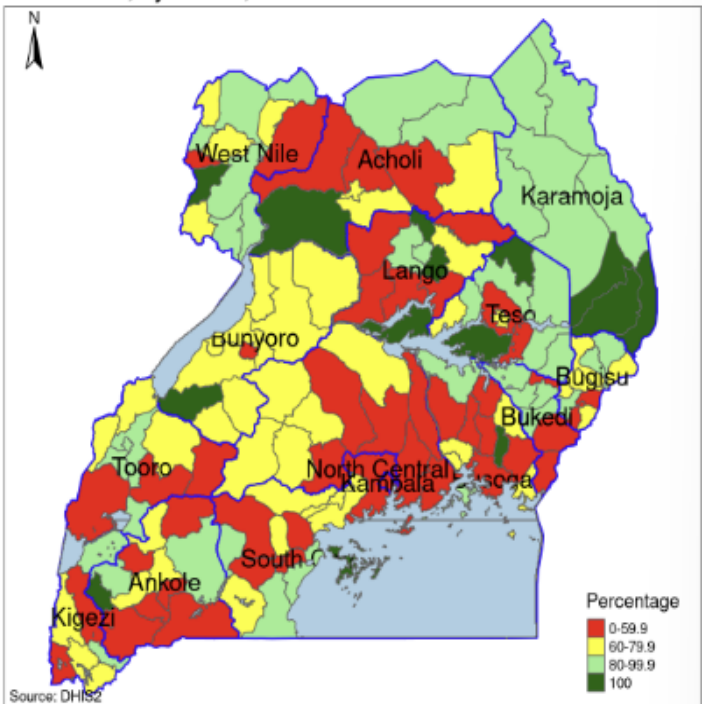


Figure 3.1: Suspected cases of Epidemic Prone Diseases reported weekly by 2024 Wk09



Source: DHIS2

Within the reporting week 09, suspected cases were reported within the conditions of cholera, MDR-TB, and yellow fever.. These are suspected cases and verification is on-going. There was no suspected deaths reported.

Figure 3.2: Suspected and probable cases of measles reported in the past five weeks

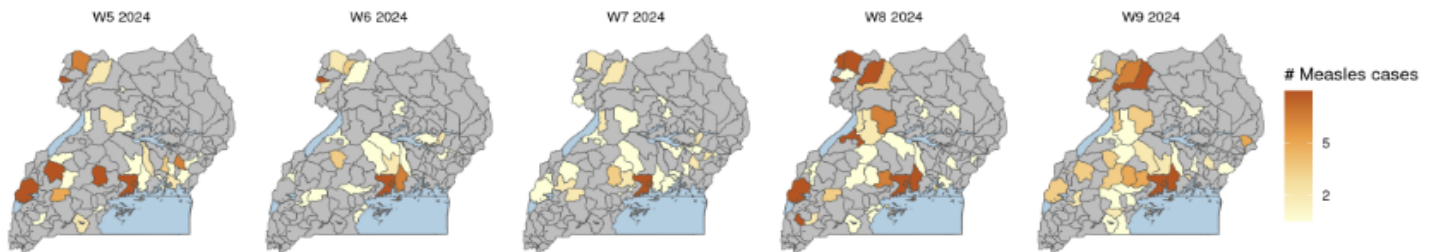


Figure 3.3: Suspected and probable cases of Acute Flaccid Paralysis reported in the past five weeks

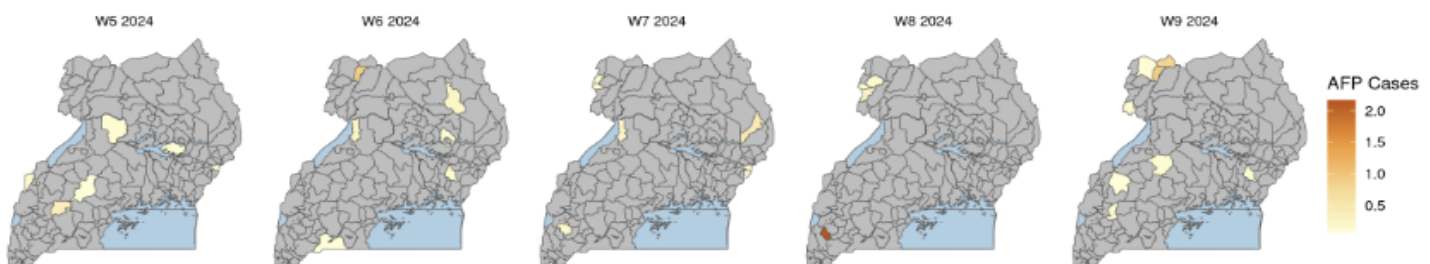
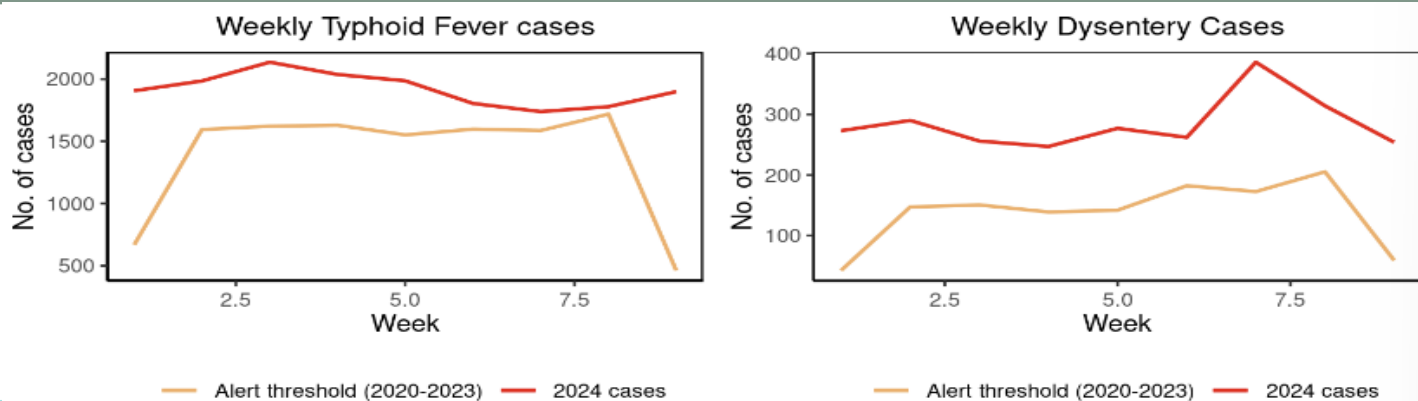


Figure 4.1: Suspected cases of Typhoid and Dysentery by 2024 Wk09



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 4.2 Weekly cases of diseases / conditions targeted for elimination or eradication by 2024 Wk09

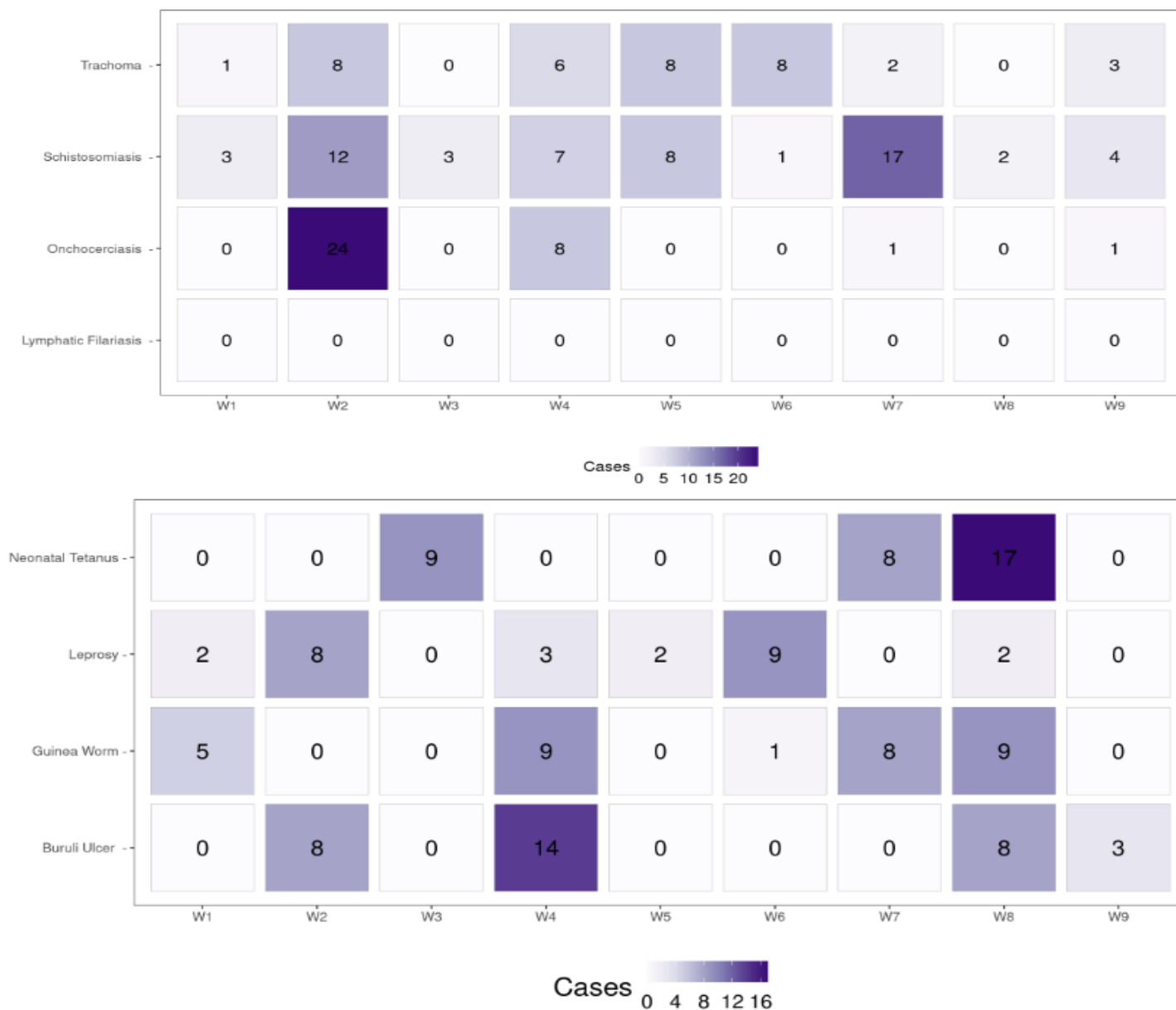
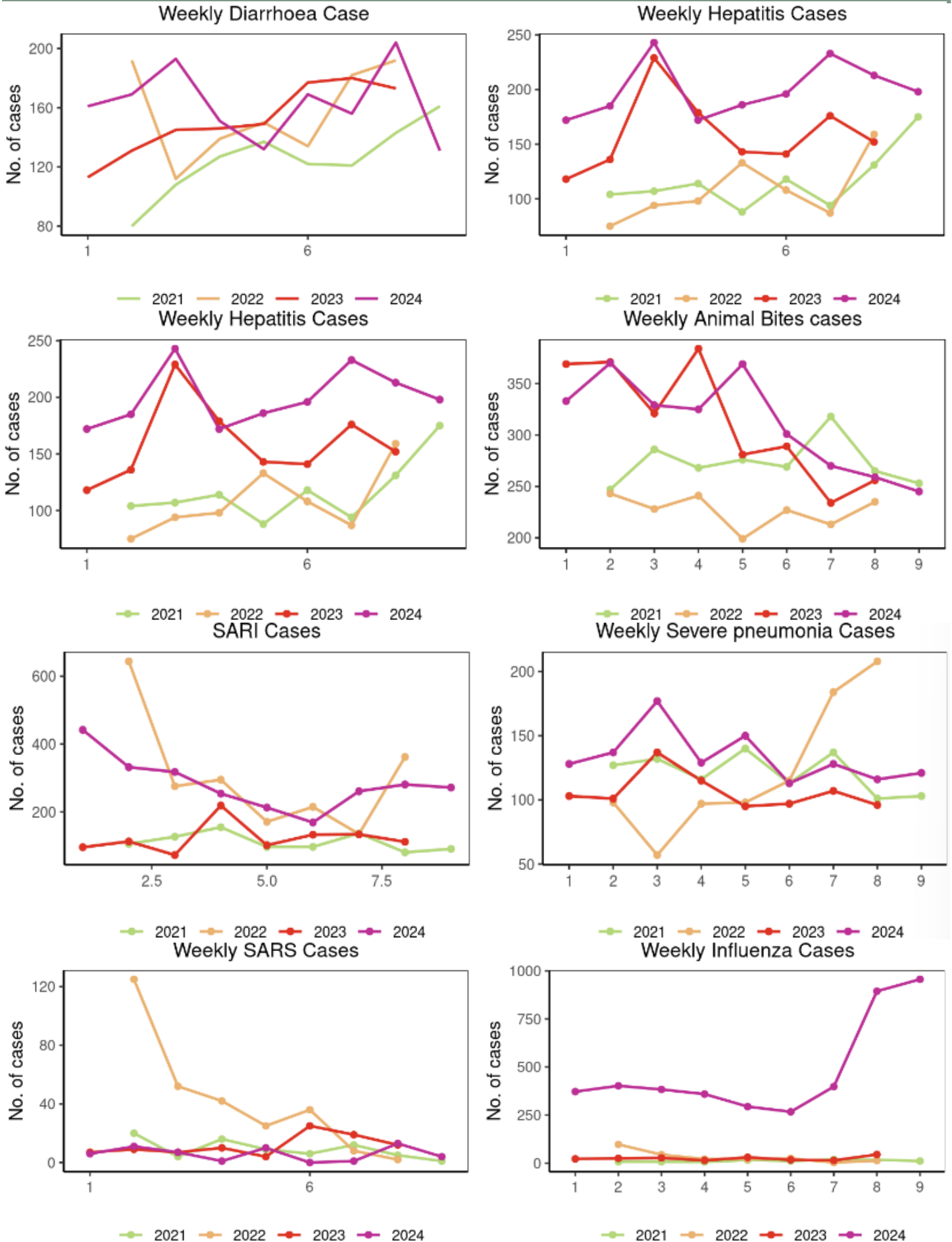


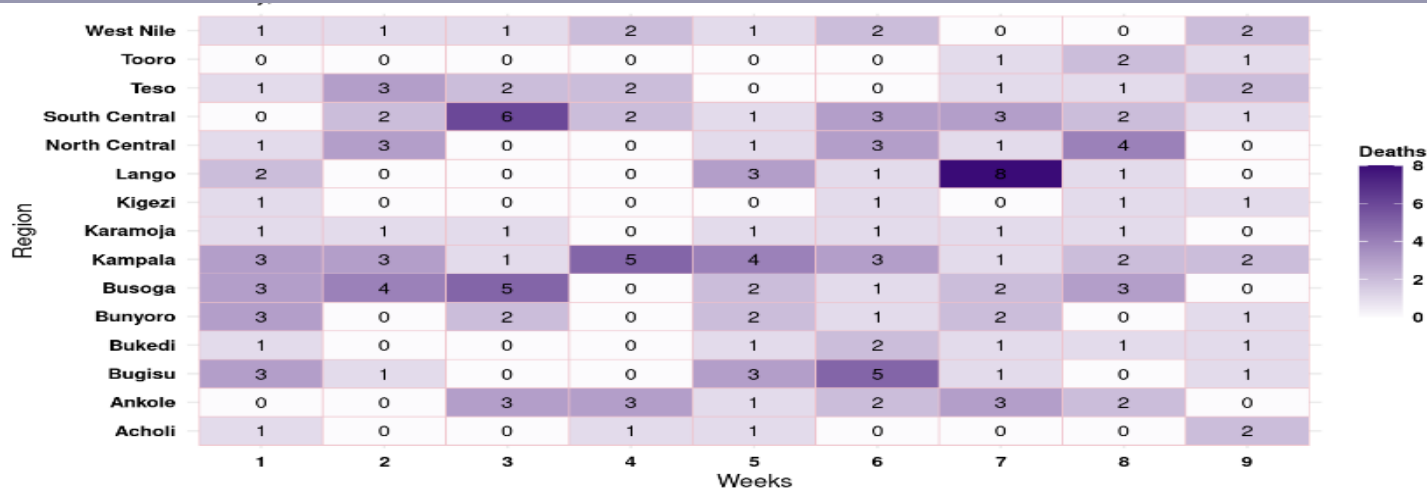
Figure 5.1: Suspected cases of other prioritized diseases and conditions by 2024 Wk09



Maternal Deaths Surveillance

In week 09, there were 14 maternal deaths. These were less by 03 deaths, from those (17 deaths) reported in week 08.

Table 6.1: Regional-based Maternal deaths reported in 2024 until EpiWeek 09



Trend of weekly maternal deaths

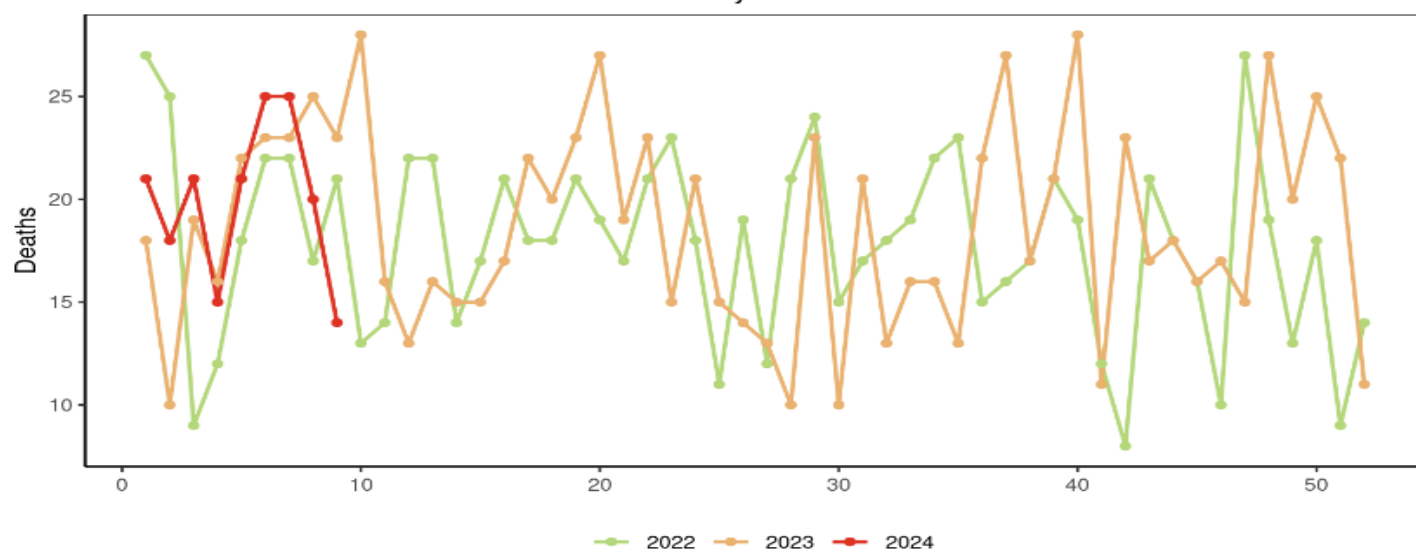


Table 6.2: Facilities reporting Maternal deaths during 2024WK09

Regions	Districts	Facility	No. of maternal deaths
West Nile	Koboko District	Koboko General Hospital	1
Kigezi	Kabale District	Kabale Regional Referral Hospital	1
Acholi	Gulu City	St. Mary's Hospital Lacor	1
Teso	Serere District	Serere Health Centre IV	1
Tooro	Kasese District	Bwera General Hospital	1
South Central	Wakiso District	Ndejje Health Centre IV	1
West Nile	Nebbi District	Angal Hospital	1
Teso	Kumi District	Atatur General Hospital	1
Kampala	Kampala District	Kawempe National Referral Hospital	2
Bunyoro	Masindi District	Bwijanga Health Centre IV	1
Acholi	Agago District	Dr. Ambrosoli Memorial Hospital Kalongo	1
Bugisu	Manafwa District	Bubulo Health Centre IV	1
Bukedi	Busia District	Dabani Hospital	1

Perinatal Deaths Surveillance

In week 09, there were 305 perinatal deaths. This was an increase of 40 deaths, change from the 265 deaths reported in week 08.

Figure 7.1: Regional-based Perinatal deaths reported in 2024 until EpiWeek 09

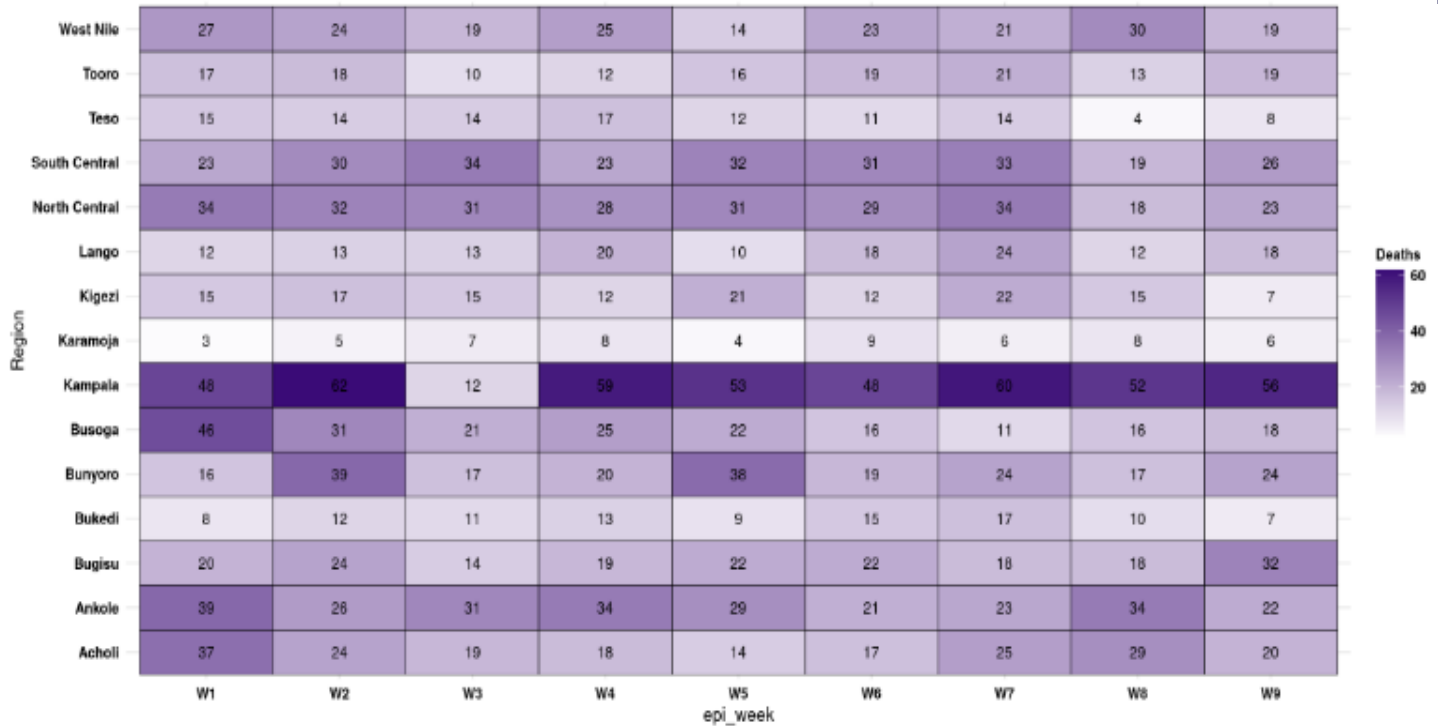


Figure 7.2: Forms of Perinatal deaths Reported during 2024WK08

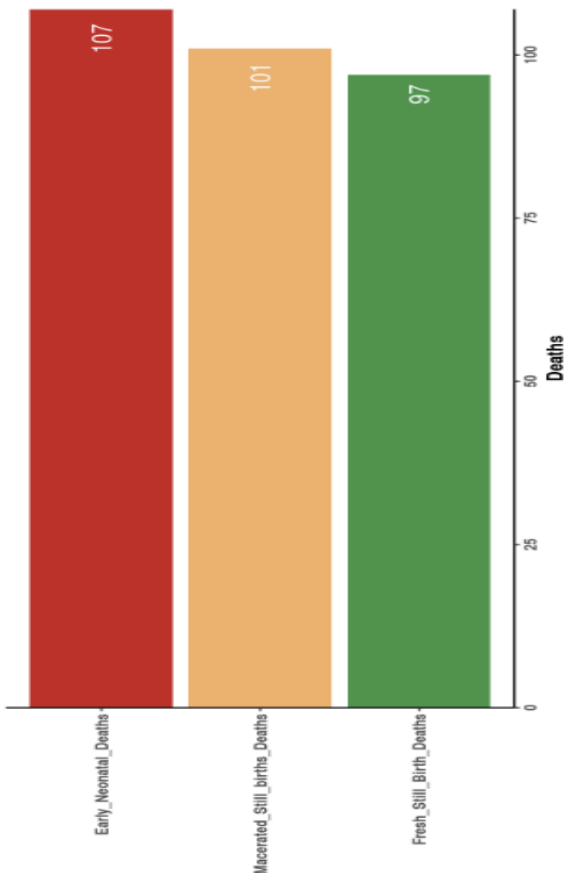


Figure 7.3: Perinatal deaths Reported during 2024WK09 by district



Influenza Surveillance

Table 8.1: Results from the MUWRP Influenza Surveillance Sites: 2024Week 09

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

During week nine 2024, 40 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. One sample (2.5%) from Mulago NRH was positive for SARS-CoV-2. All samples were negative for Flu A and Flu B.

Further, 42 samples collected during week 08 were analyzed for ten other viral causes of ILI/SARI, and circulation of Adenoviruses and human metapneumoviruses were at 21.43% and 4.76% respectively. We report an increase in circulation of adenoviruses from 3.7% the previous week, with the Northern region and children most affected.

Table 8.2: Results of Analysis for Other Viral Pathogens 2024Week 08

Health Facility	Total Samples Tested	# ADV Positive	# hMPV Positive	# PIV Positive	# HBoV Positive
Kiruddu NR Hospital	10	00	00	00	00
Gulu RRH	10	09	01	00	00
Jinja RR Hospital	10	00	00	01	01
Mulago NR Hospital	12	00	01	00	00
Total	42	09	02	01	01

Influenza Surveillance

Table 9.1: Monthly Influenza, COVID 19 and RSV Results

Month	Influenza		COVID19Result		RSVResult		Total
	A(H3)	Negative	Negative	Positive	Negative	Positive	
February	02	38	38	02	40	00	40
January	04	136	131	09	138	02	140
Total	06	174	169	11	178	02	180

Table 9.2: Health Facility: Influenza, COVID 19 and RSV Results in ILI and SARI, 2024

Sample Type/ Sentinel Site	Influenza		COVID19Result		RSVResult		Total	
	A(H3)	Negative	Negative	Positive	Negative	Positive		
ILI	Jinja RRH	06	51	51	06	57	57	
	Kiryandongo Hospital	00	26	26	00	26	26	
	Kiswa HC III	00	23	23	00	23	23	
	Mukono General Hospital	00	06	06	00	06	06	
	Nsambya Hospital	00	07	07	00	07	07	
	Total	06	113	113	06	119	02	119
SARI	Fort Portal R R Hospital		13	11	02	13	00	13
	Jinja R R Hospital		12	11	01	12	00	12
	Mbarara R R Hospital		12	11	01	11	01	12
	Nsambya Hospital		24	23	01	23	01	24
	Total		61	56	05	59	02	61
SARI-ILI	Fort Portal R R Hospital	00	13	11	02	13	00	13
	Jinja RRH	06	63	62	07	69	00	69
	Kiryandongo Hospital	00	26	26	00	26	00	26
	Kiswa HC III	00	23	23	00	23	00	23
	Mbarara R R Hospital	00	12	11	01	11	01	12
	Mukono General Hospital	00	06	06	00	06	00	06
	Nsambya Hospital	00	31	30	01	30	01	31
	Total	06	174	169	11	178	02	180

Source: National Influenza Center

Table 9.3: Weekly Influenza, COVID 19 and RSV Results, 2024

EPIWEEK	Influenza		COVID19Result		RSVResult		Total
	A(H3)	Negative	Negative	Positive	Negative	Positive	
1	00	11	10	01	11	00	11
2	01	47	43	05	48	00	48
3	03	23	25	01	26	00	26
4	00	28	26	02	26	02	28
5	00	24	24	00	24	00	24
6	00	01	01	00	01	00	01
Total	04	134	129	09	136	02	138

Points of Entry (POE) Surveillance

Table 12.1: Traveler screening at Uganda's Points of Entry during 2024Epi Week09

POE	Travelers Screened (Entry)	Travelers Screened (Exit)	
Mpondwe	72486	1424	During 2024 EpiWeek 09 a total of 164,014 in-coming, and 54,982 exiting travelers at 32 Points of Entry (POEs) were screened. Highest traffic was registered at Mpondwe, Entebbe Airport and Bunagana crossing points (Table 12.1). Presumptive Tuberculosis was identified among 39 travelers, of whom 30 were tested for TB. There were 2 TB confirmed cases and none was linked to care (Table 12.2).
Bunagana	18173	7269	
Entebbe Airport	15938	17438	
Elegu	15014	7645	
Cyanika	6364	5922	
Malaba	6299	00	
Busunga	4848	4415	
Katuna	3712	00	
Busia	3630	00	
Mutukula	2872	2158	
Mirama Hills	2690	00	
Goli	1672	1744	
Vurra	1368	1114	
Kokwochaya	1309	1046	
Alakas	964	571	
Katwe	768	00	
Ntoroko Main	728	862	
Odramacaku	630	220	
Kyeshero	582	208	
Arua Airport	548	196	
Lwakhaka	496	1137	
Ishasha	464	246	
Ndaiga	433	17	
Transami	418	222	
Aweno Olwiyo	313	162	
Kayanzi	274	274	
Sebagoro	222	11	
Suam	212	92	
Kamwezi	172	06	
Wanseko	152	115	
Hima Cement	135	390	
Madi-Opei	128	78	

Source: IOM, eIDSR

Table 12.2: Tuberculosis screening among travelers during 2024Epi Week09

POE	# presumptive TB patients identified	# presumptive TB patients tested for TB	# confirmed TB patients identified	# confirmed TB patients linked to care
Alakas	01	01	00	00
Bunagana	03	02	00	00
Busia	06	06	00	00
Elegu	04	04	00	00
Goli	04	04	00	00
Kamwezi	00	00	02	00
Kokwochaya	07	07	00	00
Kyeshero	09	00	00	00
Lwakhaka	03	04	00	00
Mpondwe	02	02	00	00

Tuberculosis Status Update

Figure 13.1: Tuberculosis burden during 2024 EpiWeek 09

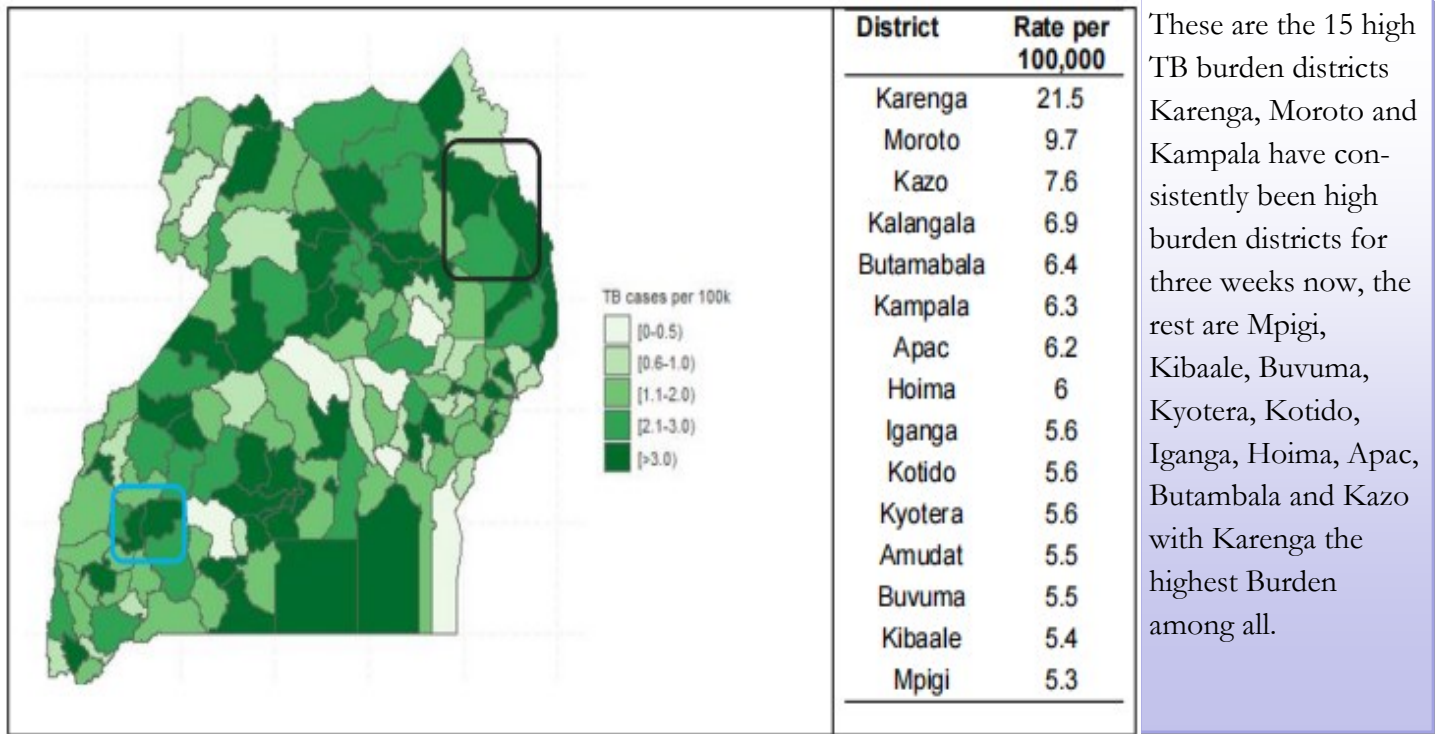


Figure 9.2: National weekly trends in TB screening, diagnosis and reporting, Wk01 2023 to Wk09 2024



Figure 9.3: National weekly trends in New Relapse TB diagnosed by Wk09, 2024

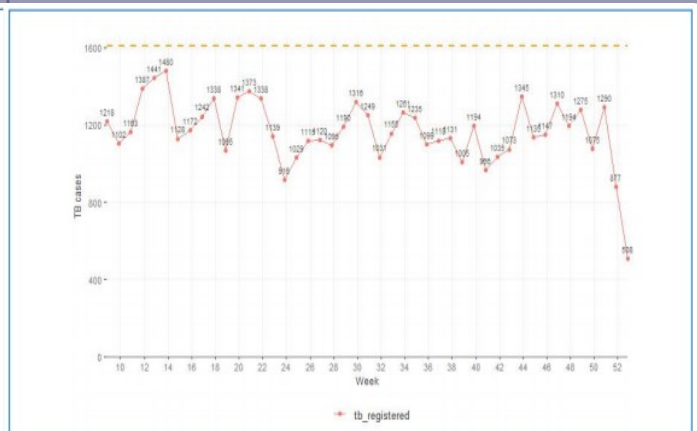
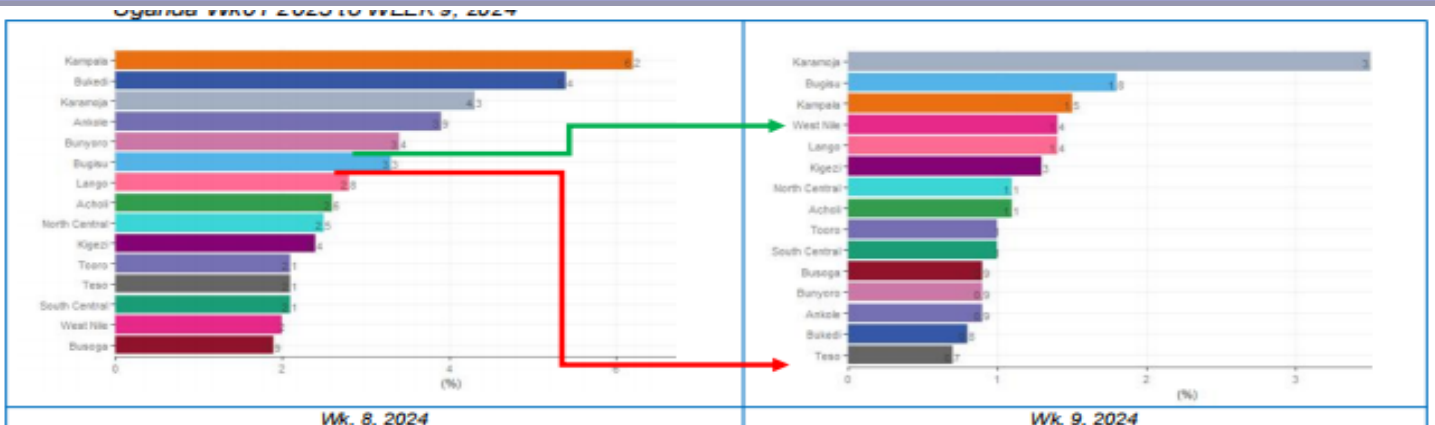


Figure 9.4: Comparison of TB burden by Health Regions between Epi Weeks 08 - 09, 2024



Event Based Surveillance (EBS)

Table 14.1 : Regional-based Signals received and triaged via the 6767 line during 2024WK09

Region	Total Signals Received	Signals Verified	Signals Discarded	Human	Animal	Natural Disaster	Artificial Disaster
Bugisu	01	01	00	00	00	01	00
Bunyoro	11	11	00	11	00	00	00
Kampala	06	06	00	06	00	00	00
Lango	04	04	00	04	00	00	00
N. Central	05	05	00	05	00	00	00
Tooro	03	03	00	01	00	00	02
W. Nile	30	26	04	30	00	00	00
Uganda	60	56	04	57	00	01	02

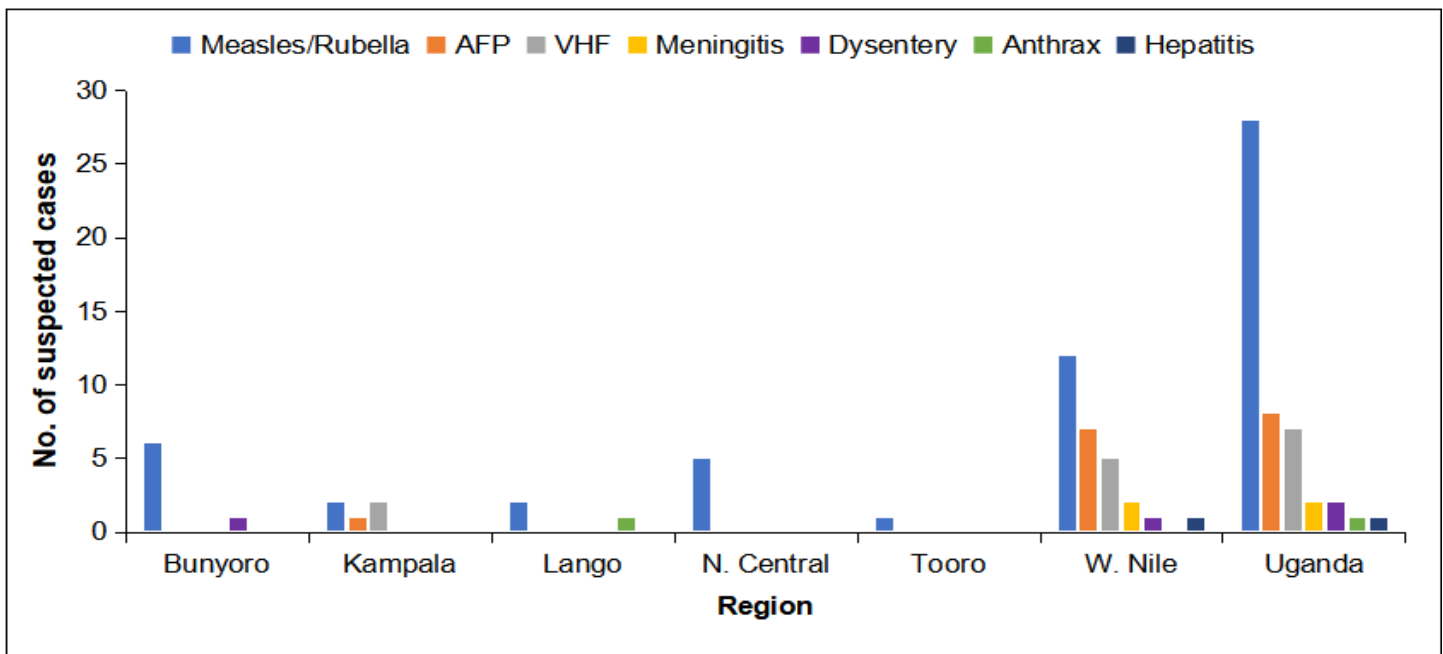
A total of 60 signals were received within the reporting week, of which 93% (56) were verified as events. Most of the signals received (57, 95%) were from the human sector, 1 (2%) from natural disasters and 2 (3%) from artificial disasters (Table 14.1).

The silent regions during the week were Acholi, Ankole, Bukedi, Busoga, Karamoja, Kigezi, South Central, and Teso. The natural disaster reported was a death due to lightening in Bulambuli District. The artificial disasters were two i.e. one death due to petrol fire in Kasese District and a house fire in Yumbe District that had no injuries or fatalities reported.

The signals received during the week were measles/rubella, AFP, VHF, meningitis, dysentery, anthrax, and Hepatitis (Figure 14.1).

Source: eIDSR

Figure 14.1: Regional-based suspected conditions reported via the 6767 line during 2024WK09



Malaria Status Update

HIGHLIGHTS



76.0% Reporting rate



158,066

Confirmed malaria cases



2.7% (4)

Districts had inadequate ACT stock (<8 weeks)



22 Reported deaths



00 Districts response

14.4% (21)

Districts had inadequate RDT stock (< 8 weeks)



43.1% Test Positivity Rate



00 Districts in Alert



The testing rate for patients with fever was 97.0% (319,961 | Proportion treated with a negative test was 2.8% (5,569) | Proportion treated without a test was 1.8% (3,885) | Proportion treated with a positive result was 88.2% (139,388)

Figure 11.1: Malaria epidemic alert and response districts during 2024WK07



Alert districts: 00
District response: 00
Watch districts: 146

Districts in IMS response mode: 00 (IMS response have cases >75th percentile >4 weeks and many subcounties are affected).

Districts in response mode: 00 (District response have cases >75th percentile for <4 weeks or focal areas affected).

Districts in Alert mode: 00 (Alert districts have cases >50th percentile but < 75th percentile).

Districts in Watch mode: 146 (Watch districts have cases < median).

Figure 11.2: Malaria reported deaths during 2024WK07



District	Health Facility	Deaths
Fort Portal City	Fort Portal Regional Referral Hospital	3
Hoima City	Hoima Regional Referral Hospital	3
Lamwo	Madi-Opei Health Centre IV	3
Mbale City	Mbale Regional Referral Hospital	2
Tororo	Panyangasi Health Centre III	2
Serere	Serere Health Centre IV	1
Buliisa	Biiso Health Centre IV	1
Yumbe	Midigo Health Centre IV	1
Kalungu	Villa Maria Hospital	1
Lira	Amach Health Centre IV	1
Ibanda	Ibanda Hospital	1
Terego	Widi (Omugo Extension) Health Centre III	1
Kampala	Kiruddu National Referral Hospital	1
Kapchorwa	Kapchorwa General Hospital	1

PUBLIC HEALTH EMERGENCIES (PHES) IN AND AROUND UGANDA

Table 16.1: Active PHEs in Uganda during 2024WK09

Start Date	Location	PHE	All Cases	Confirmed Cases	Human Deaths
18-Feb-2024	Four Prisons	Conjunctivitis	655	-	00
14-Dec-19	7 health regions	Tuberculosis			
01-Jan-2024	Kabale	COVID19	332	46	03
29-Jan-24	Kasese	Measles	29	03	00
22-Feb-24	Amuru	Measles	27	03	01
30-Jan-24	Hoima	Measles	421	14	02
31-Jan-24	Obongi	Measles	19	05	00
23-Feb-24	Koboko	Measles	13	04	00
22-Feb-24	Yumbe	Measles	14	10	00
23-Dec-23	Arua City	Measles	138	111	01
08-Feb-24	Mbarara City	Rift Valley Fever	05	04	01
08-Jan-24	Lyantonde	CCHF	05	03	03
25-Feb-24	Kyankwanzi	CCHF	01	01	00
19-Feb-24	Kiruhura	CCHF	01	01	00
04-Feb-24	Mbale City	Cholera	32	05	01
30-Sep-23	Bukomansimbi	Black Water Fever	83	83	10

Uganda is currently responding to Measles in 7 districts, Red eyes within four prisons, MDR TB in seven regions, CCHF in 3 districts, COVID19, RVF, BWF and Cholera. Within Uganda's neighborhood are several pathogens including anthrax, measles, cVDPV1, cVDPV2, Monkey pox, cholera, yellow fever, RVF, among others.

Table 16.2: Active PHEs around Uganda during 2024WK09

Country	PHE	Grading	Start Date	Total Cases	Confirmed Cases	Deaths	CFR
	Brew Poisoning	Ungraded	09/02/2024	21	-	9	42.90%
	Anthrax	Grade 2	10/04/2023	20		3	15%
Kenya	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%
	Rift Valley Fever	Ungraded	25/01/2024	13	1	0	0.00%
South Sudan	Yellow Fever	Ungraded	24/12/2023	38	1	5	13.20%
	Hepatitis E	Ungraded	01/01/2019	4,253	63	12	0.30%
	Measles	Ungraded	01/01/2023	7,862	586	173	2.20%
Tanzania	Cholera	Grade 3	07/09/2023	660	53	19	2.90%
	Poliomyelitis (cVDPV2)	Grade 2	17/07/2023	2	2	0	0.00%
Rwanda	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%