



MINISTRY OF HEALTH

THE WEEKLY EPIDEMIOLOGICAL BULLETIN

WEEK 25: 17th June - 23rd June 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:

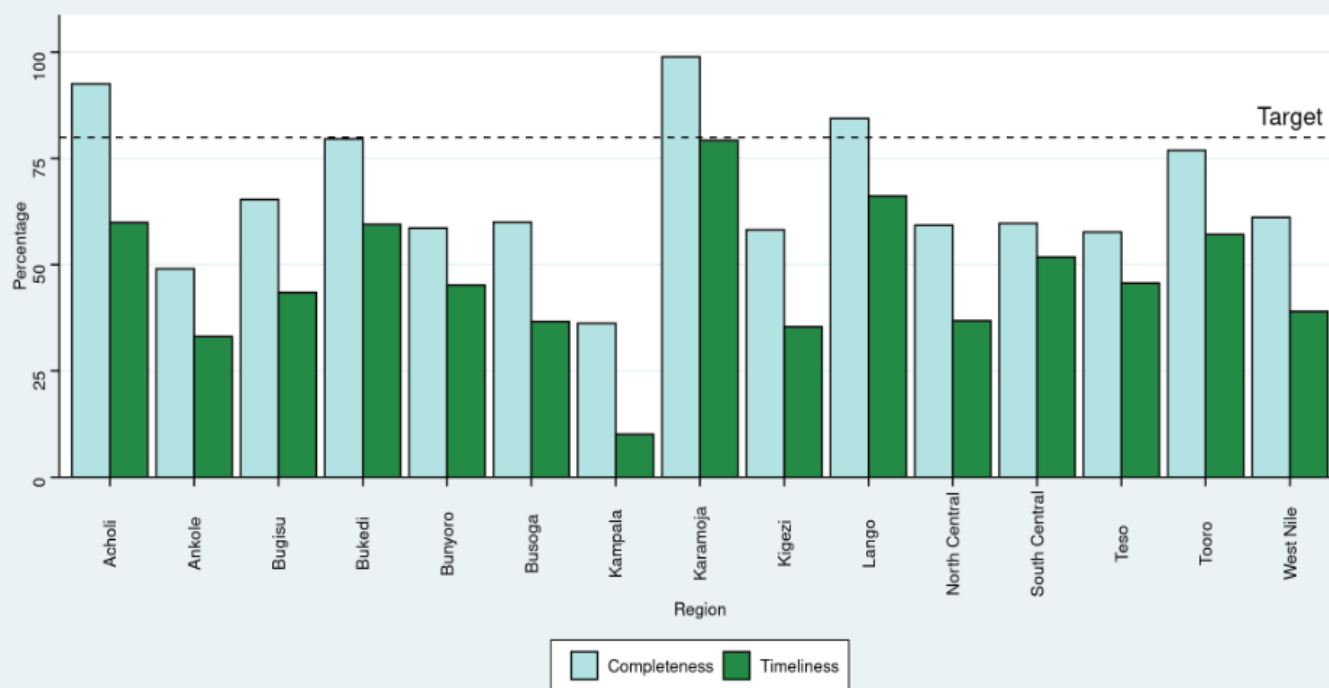
Dr. Allan Muruta,

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 25



Source: DHIS2

Source: DHIS2

Most regions did not achieve the 80% target for completeness for the weekly epidemiological reports within the EpiWeek 24 save for Acholi, Bukedi, Karamoja and Lango. Timeliness within all regions except Karamoja was below the 80% target. Our recommendation is that district biostatisticians work with their health workers to identify and address bottlenecks to reporting. The breakdown of performance by district is shown on the next page.

Table 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 24 and 25

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK24	WK25	WK24	WK25		WK24	WK25	WK24	WK25
Abim	100	100	100	95.2	Hoima City	57.1	23.8	23.8	23.8
Adjumani	29.4	13.7	15.7	11.8	Hoima	47.4	68.4	47.4	52.6
Agago	100	88.4	67.4	67.4	Ibanda	38.3	46.8	17	31.9
Alebtong	85	75	55	70	Iganga	58.7	60.9	28.3	26.1
Amolatar	100	93.8	68.8	87.5	Isingiro	92	68	40	44
Amudat	100	100	100	61.5	Jinja City	52.5	49.2	30.5	33.9
Amuria	92.3	84.6	46.2	76.9	Jinja	69	73.8	45.2	45.2
Amuru	84.4	81.3	43.8	62.5	Kaabong	100	100	96.3	100
Apac	32.4	24.3	16.2	21.6	Kabale	94.6	82.1	41.1	46.4
Arua City	37.1	48.6	11.4	22.9	Kabarole	84.4	96.9	65.6	78.1
Arua	100	45.5	72.7	45.5	Kaberamaido	100	5.6	0	5.6
Budaka	52.9	70.6	41.2	58.8	Kagadi	28.1	28.1	15.6	21.9
Bududa	93.8	93.8	43.8	68.8	Kakumiro	42.9	45.7	31.4	45.7
Bugiri	67.3	74.5	27.3	63.6	Kalaki	33.3	25	16.7	16.7
Bugweri	100	100	100	100	Kalangala	100	100	100	100
Buhweju	30	25	20	25	Kaliro	69	75.9	24.1	27.6
Buikwe	27.5	31.9	20.3	14.5	Kalungu	65.7	77.1	31.4	48.6
Bukedea	30	55	5	25	Kampala	40.9	34	21	10.1
Bukomansimbi	59.3	44.4	40.7	37	Kamuli	30.4	31.9	14.5	21.7
Bukwo	13.6	13.6	9.1	13.6	Kamwenge	86.1	52.8	36.1	38.9
Bulambuli	52	44	40	36	Kanungu	60.7	42.9	30.4	32.1
Buliisa	56.3	43.8	50	31.3	Kapchorwa	70.4	44.4	51.9	40.7
Bundibugyo	51.6	58.1	12.9	12.9	Kapelebyong	57.1	35.7	35.7	28.6
Bunyangabu	94.1	97.1	41.2	32.4	Karenga	100	90	60	80
Bushenyi	47.8	45.7	41.3	43.5	Kasese	47.9	42.3	20.4	30.3
Busia	61.8	73.5	52.9	61.8	Kassanda	44.7	73.7	28.9	47.4
Butaleja	68	76	60	68	Katakwi	44.4	40.7	18.5	33.3
Butambala	20.8	16.7	16.7	16.7	Kayunga	62.5	52.5	22.5	25
Butebo	90.9	90.9	45.5	54.5	Kazo	25	28.1	18.8	18.8
Buvuma	100	100	78.6	100	Kibaale	76.5	41.2	26.5	29.4
Buyende	81.5	18.5	29.6	14.8	Kiboga	53.2	48.9	44.7	40.4
Dokolo	100	72.2	27.8	38.9	Kibuku	100	41.2	11.8	41.2
Fort Portal City	96.3	96.3	96.3	96.3	Kikuube	90.9	87.9	48.5	48.5
Gomba	56	56	32	44	Kiruhura	96.3	63	18.5	44.4
Gulu City	97.6	83.3	47.6	50	Kiryandongo	100	88.5	50	53.8
Gulu	95.7	100	26.1	4.3	Kisoro	70.2	61.7	10.6	17

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 24 and 25

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK24	WK25	WK24	WK25		WK24	WK25	WK24	WK25
Kitagwenda	100	95.8	91.7	95.8	Nabilatuk	100	100	33.3	83.3
Kitgum	95	85	77.5	77.5	Nakapiripirit	100	100	100	84.6
Koboko	76.9	73.1	53.8	50	Nakaseke	46.7	60	36.7	46.7
Kole	100	77.1	2.9	14.3	Nakasongola	33.3	38.1	16.7	28.6
Kotido	100	95.5	40.9	68.2	Namayingo	42.1	28.9	28.9	15.8
Kumi	100	100	82.1	67.9	Namisindwa	81	90.5	66.7	76.2
Kwania	20.5	87.2	10.3	82.1	Namutumba	62.9	51.4	8.6	14.3
Kween	53.8	38.5	15.4	19.2	Napak	100	100	72.2	72.2
Kyankwanzi	58.3	100	54.2	20.8	Nebbi	69.2	15.4	53.8	11.5
Kyegegwa	100	76	56	68	Ngora	30.8	30.8	7.7	23.1
Kyenjojo	92.2	68.6	25.5	62.7	Ntoroko	77.8	55.6	22.2	55.6
Kyotera	87.7	92.6	84	87.7	Ntungamo	65.7	58.2	41.8	31.3
Lamwo	83.9	77.4	54.8	54.8	Nwoya	100	100	100	100
Lira City	100	100	92.6	92.6	Obongi	44.4	50	27.8	38.9
Lira	100	100	100	100	Omoro	96.3	77.8	37	70.4
Luuka	39.5	44.2	11.6	14	Otuke	88.2	76.5	47.1	58.8
Luwero	67	52.4	43.7	32	Oyam	97.9	100	93.8	95.8
Lwengo	54.1	35.1	32.4	29.7	Pader	100	95.2	61.9	54.8
Lyantonde	48.1	40.4	30.8	32.7	Pakwach	57.9	31.6	26.3	31.6
Madi-Okollo	85.7	47.6	23.8	14.3	Pallisa	100	100	100	100
Manafwa	100	84.6	61.5	53.8	Rakai	52.2	17.4	43.5	13
Maracha	94.4	88.9	55.6	61.1	Rubanda	21.1	18.4	13.2	13.2
Masaka City	97.4	100	94.7	100	Rubirizi	100	95	55	55
Masaka	100	100	100	100	Rukiga	100	100	66.7	75.8
Masindi	100	100	92.2	100	Rukungiri	41.5	36.2	33	28.7
Mayuge	76.4	73.6	62.5	62.5	Rwampara	15	20	10	20
Mbale City	68.3	68.3	39	48.8	Sembabule	97.5	35	17.5	35
Mbale	100	96.3	88.9	44.4	Serere	100	100	95.5	100
Mbarara City	73.7	63.2	42.1	39.5	Sheema	31.6	36.8	15.8	31.6
Mbarara	42.3	30.8	30.8	26.9	Sironko	54.5	51.5	33.3	39.4
Mitooma	22.7	22.7	18.2	18.2	Soroti City	48	48	36	44
Mityana	71.1	42.1	26.3	28.9	Soroti	81.3	87.5	75	81.3
Moroto	100	94.7	73.7	68.4	Terego	100	79.3	62.1	58.6
Moyo	87.1	80.6	67.7	48.4	Tororo	52.6	44.9	35.9	32.1
Mpigi	59.7	54.8	43.5	46.8	Wakiso	48.8	43.3	29.8	33.9
Mubende	35.2	33.3	27.8	29.6	Yumbe	100	77.2	50.9	56.1
Mukono	48	43.1	27.5	31.4	Zombo	60.9	60.9	47.8	56.5

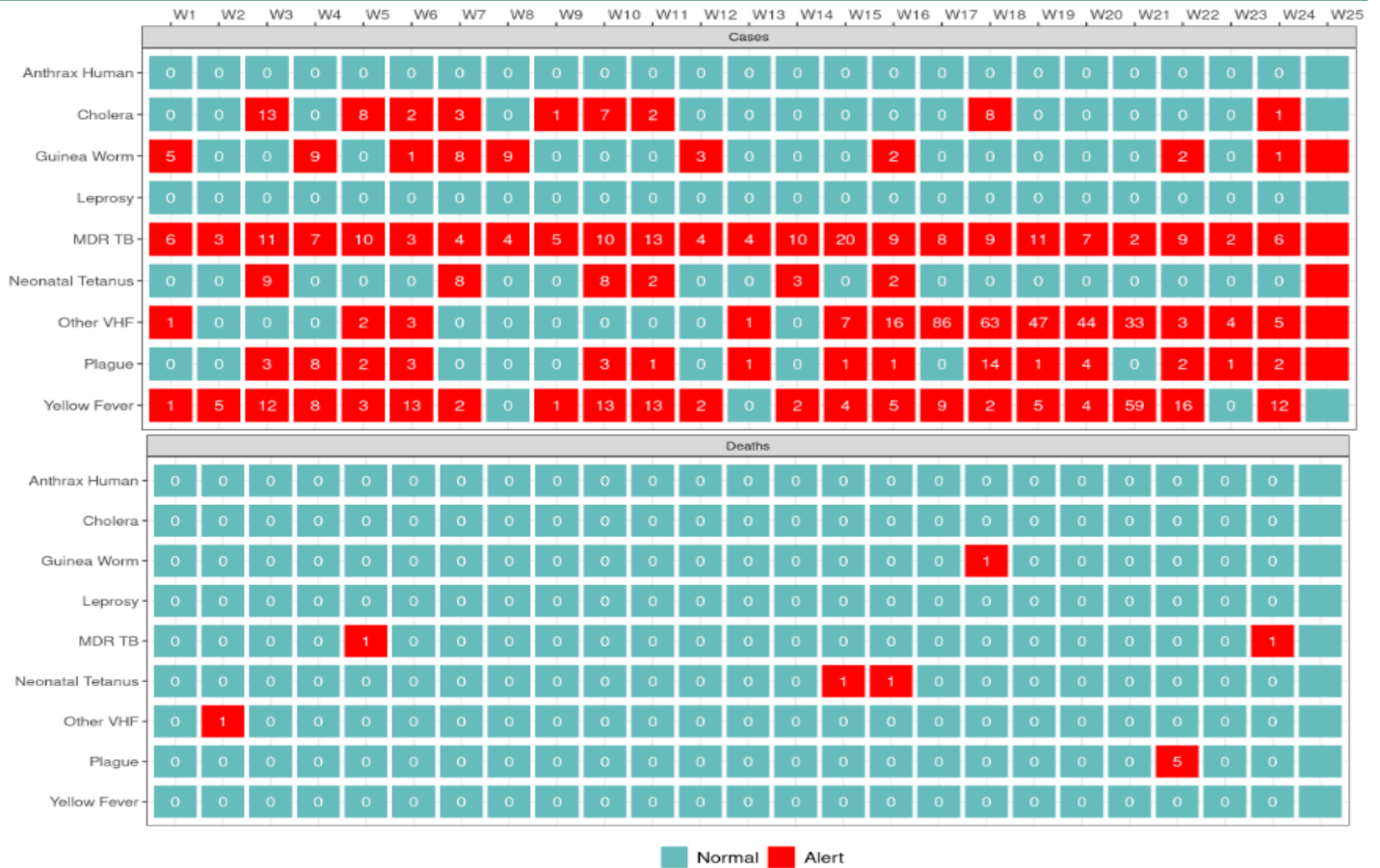
Source: DHIS2

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.

Figure 4.1: Suspected cases of Epidemic Prone Diseases reported weekly by 2024 Wk25



Source: DHIS2

DHIS2 Data

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

Within the reporting week 25 suspected cases were reported within the conditions of Guinea worm, MDR-TB, Neonatal Tetanus, Other VHF and Plague. 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

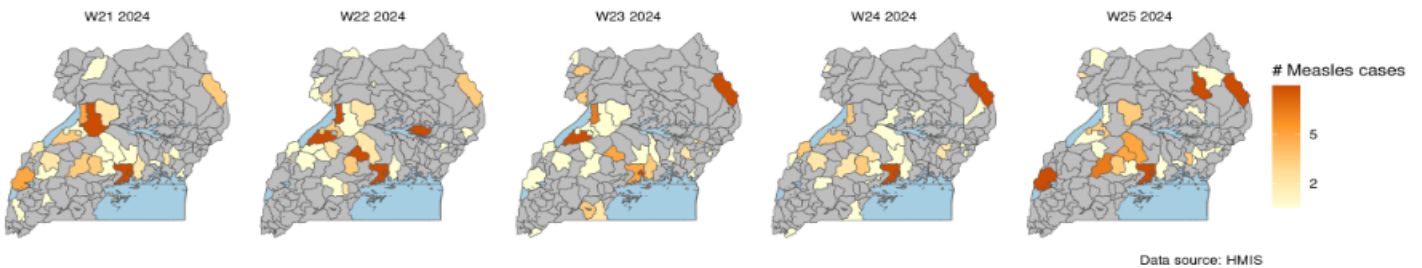


Figure 4.3: Suspected and probable cases of Acute Flaccid Paralysis reported in the past five weeks

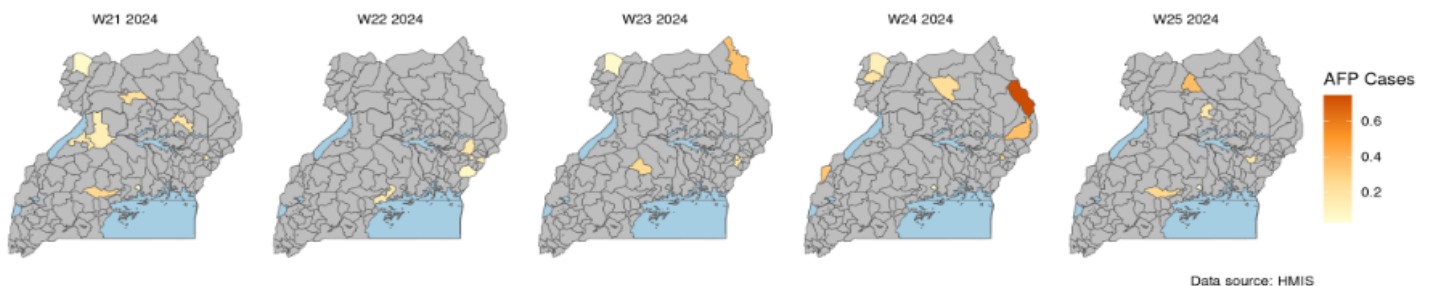
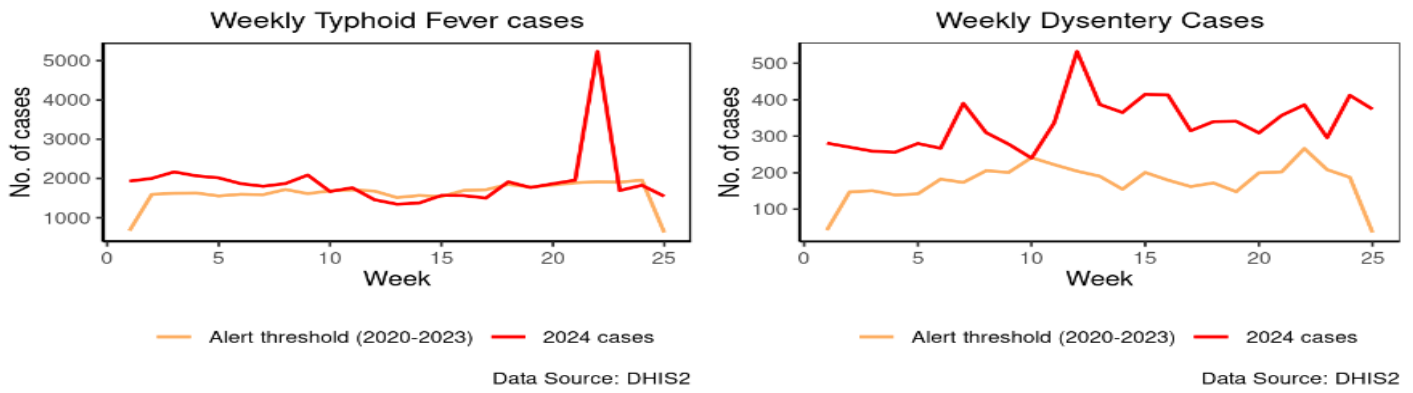


Figure 5.1: Suspected cases of Typhoid and Dysentery by 2024 Wk25



Note 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 Wk25

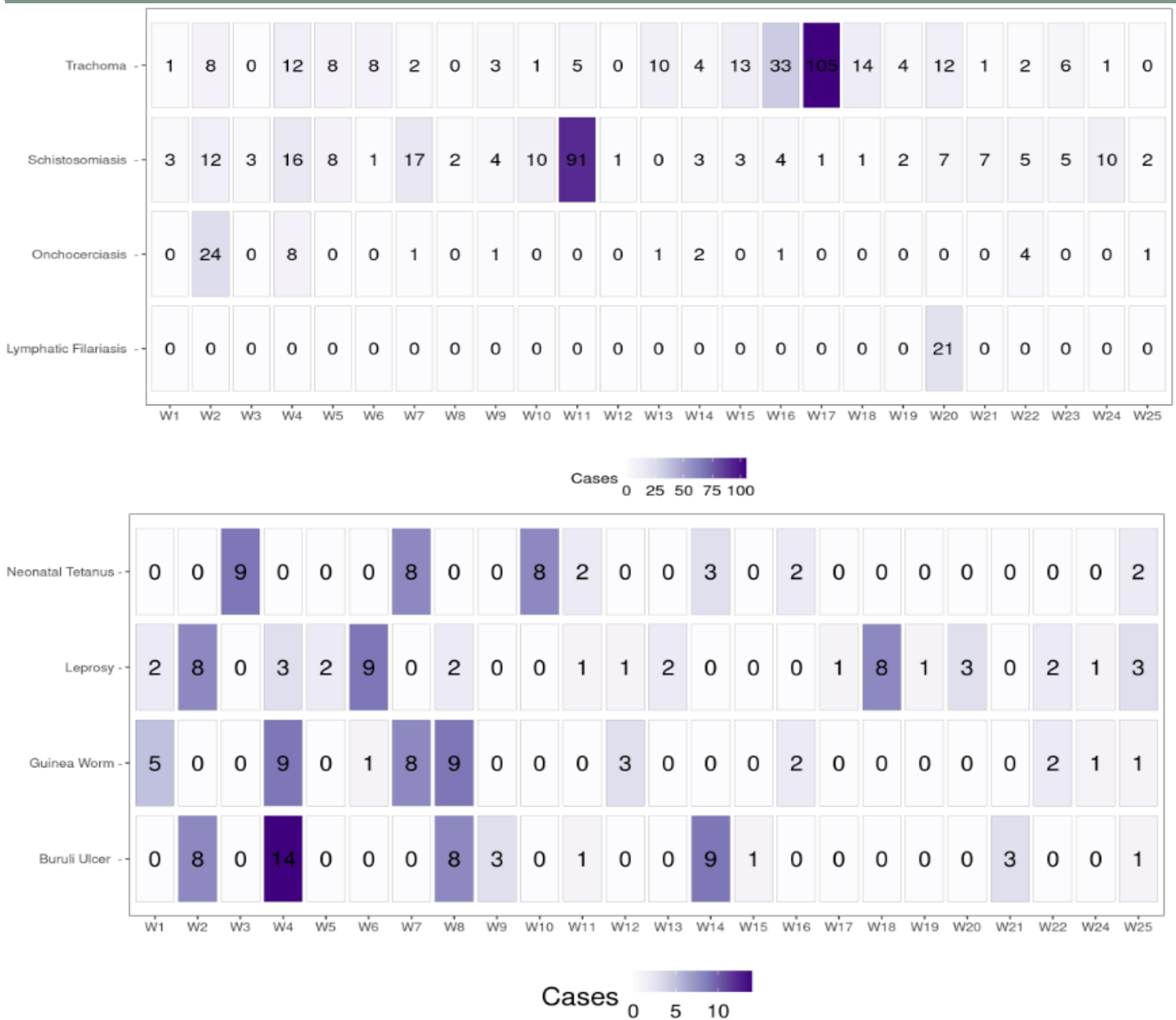
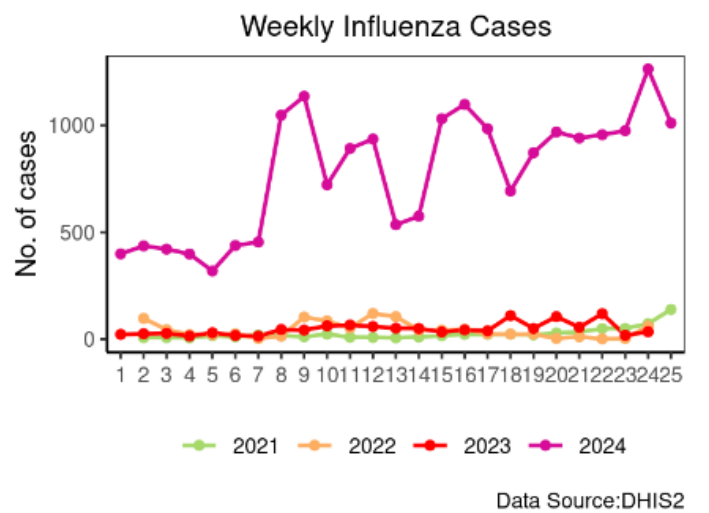
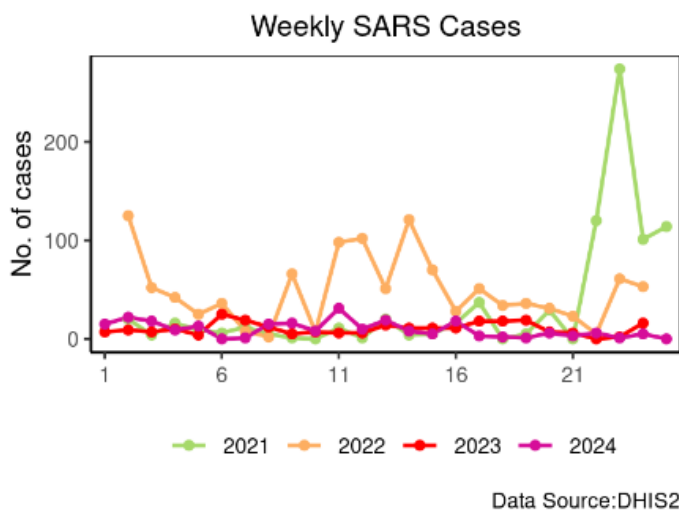
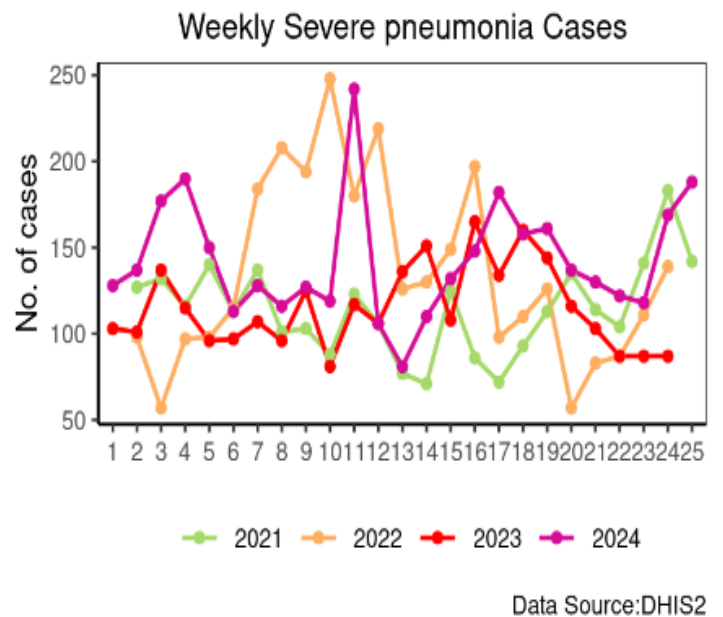
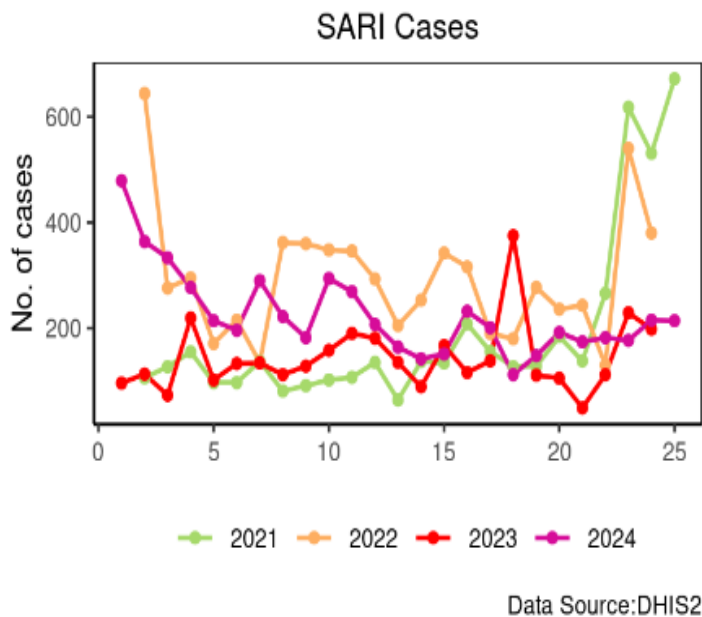
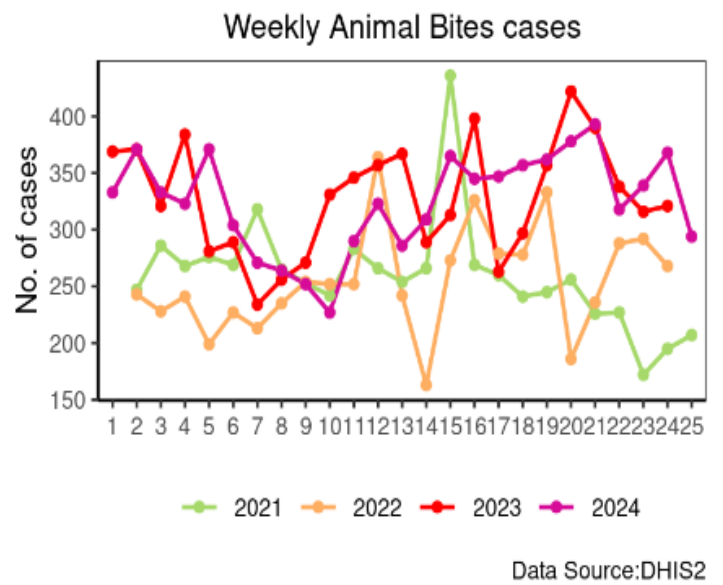
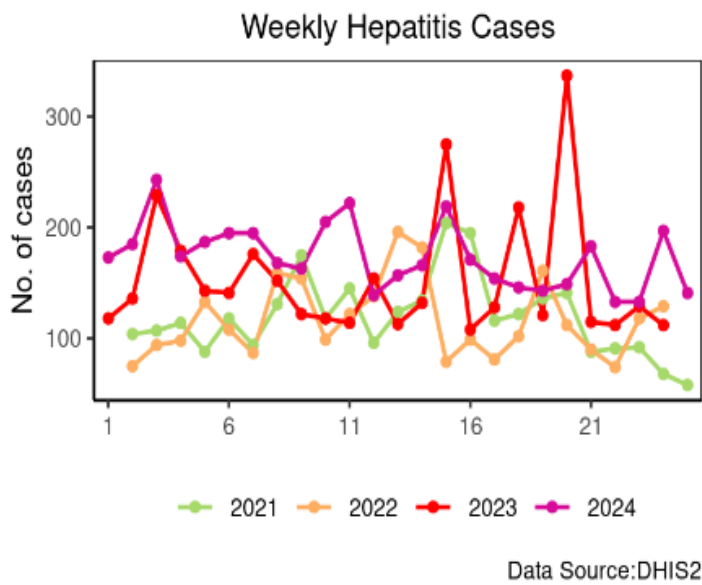


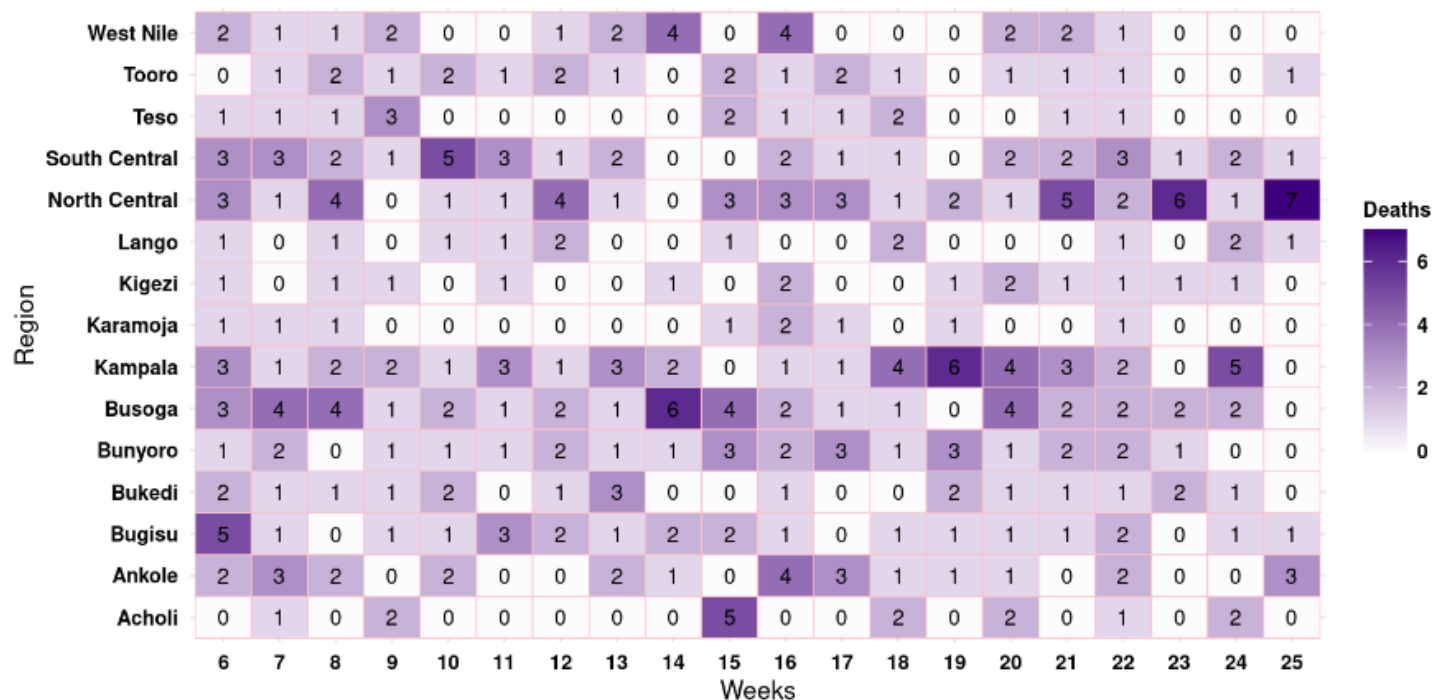
Figure 6.1: Suspected cases of other prioritized diseases and conditions by 2024 Wk25



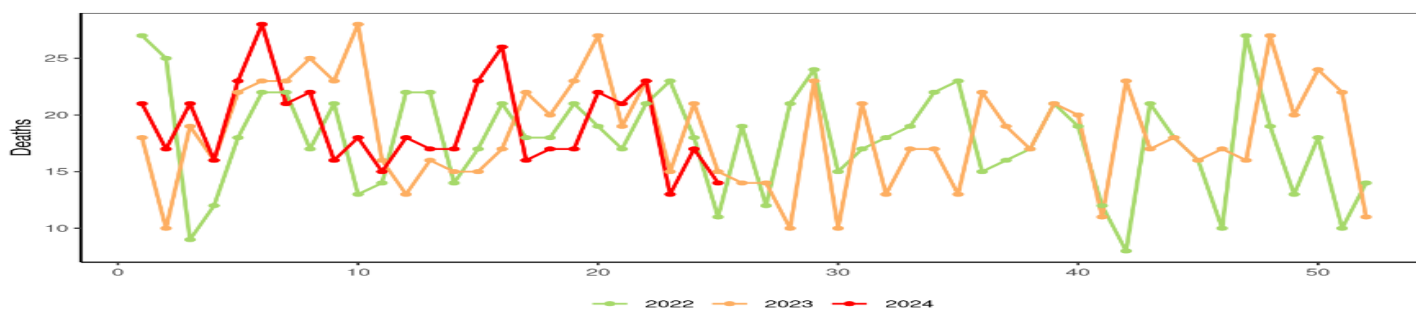
Maternal Deaths Surveillance

In week 25, there were 14 maternal deaths. There was a decrease of 3 maternal death as compared to the 17 deaths reported in week 24

Table 7.1: Regional-based Maternal deaths reported in 2024 until EpiWeek 25



Data source: DHIS2



Data Source: DHIS2

Table 7.2: Facilities reporting Maternal deaths during 2024WK25

Regions	Districts	Facility	No. of maternal deaths
Tooro	Fort Portal City	Fort Portal Regional Referral Hospital	1
North Central	Kayunga District	Kayunga Regional Referral Hospital	4
Ankole	Mbarara City	Mbarara Regional Referral Hospital	1
Ankole	Kiruhura District	Kiruhura Health Centre IV	1
North Central	Nakaseke District	Nakaseke General Hospital	1
North Central	Nakaseke District	Kiwoko Hospital	1
South Central	Masaka City	Masaka Regional Referral Hospital	1
Bugisu	Mbale City	Mbale Regional Referral Hospital	1
North Central	Mubende District	Mubende Regional Referral Hospital	1
Lango	Oyam District	Timagi Community Medical Centre	1
Ankole	Isingiro District	Nakivale Health Centre III	1

Perinatal Deaths Surveillance

In week 25, there were 330 perinatal deaths. There was an increase of 36 deaths from the 294 deaths reported in week 24.

Figure 8.1: Regional-based Perinatal deaths reported in 2024 until EpiWeek 25

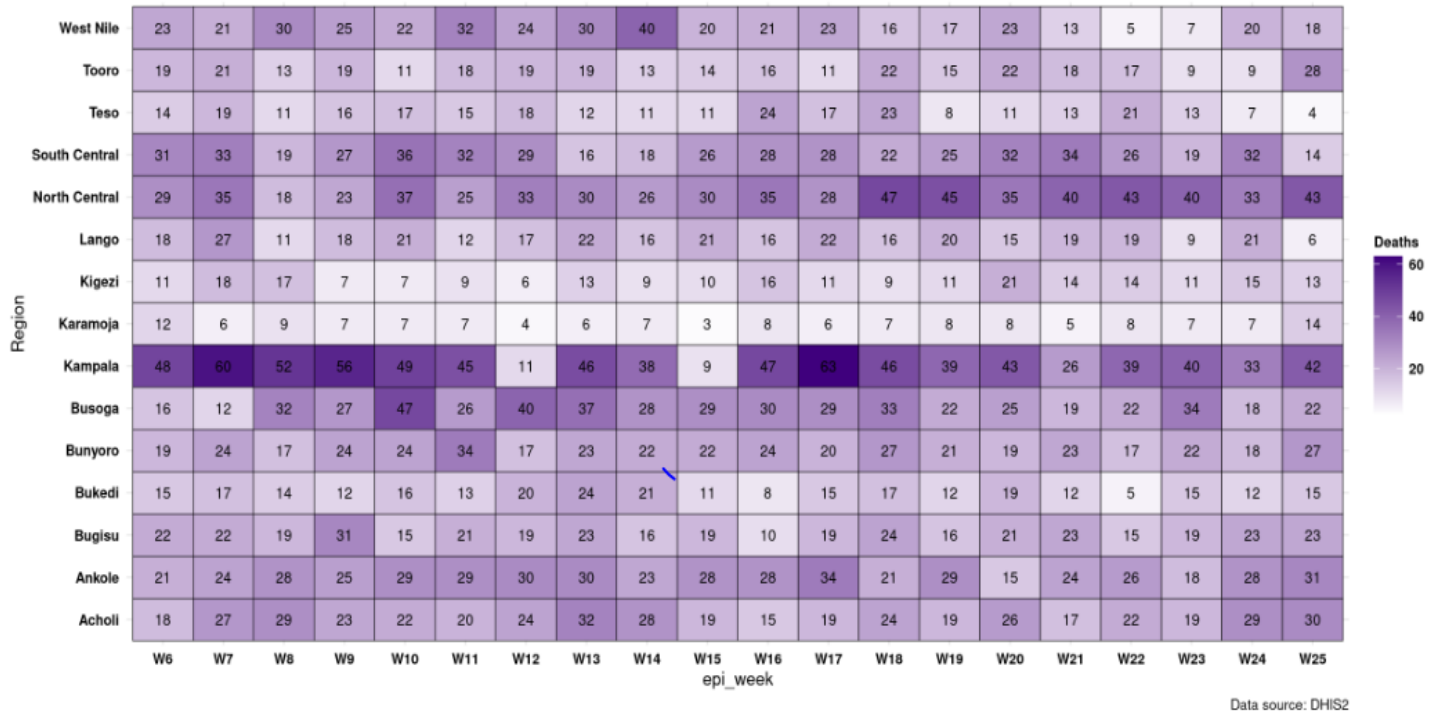


Figure 8.2: Forms of Perinatal deaths Reported during 2024WK25

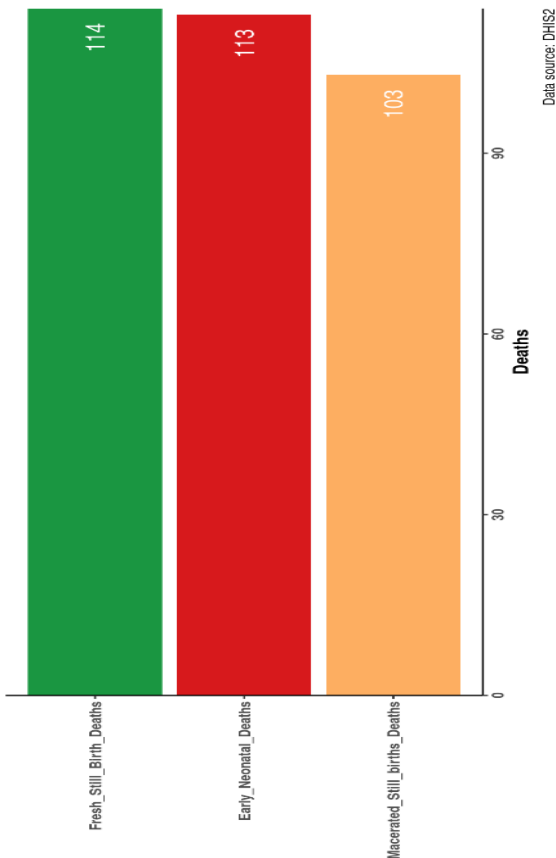


Figure 8.3: Perinatal deaths Reported during 2024WK25 by district



Influenza Surveillance

Results from the MUWRP Influenza Surveillance Sites: 2024Week25

Health Facility	Type of case	# of Specimens Tested (PCR)	# H1N1	# COVID-19
Kiruddu NRH	SARI	02	00	00
	ILI	08	00	00
Mulago NRH	SARI	02	00	00
	ILI	08	01	00
Jinja RRH	SARI	02	00	00
	ILI	08	00	01
Gulu RRH	SARI	02	00	00
	ILI	08	00	00
Bwera Hospital	SARI	10	00	01
Totals		50	01	02

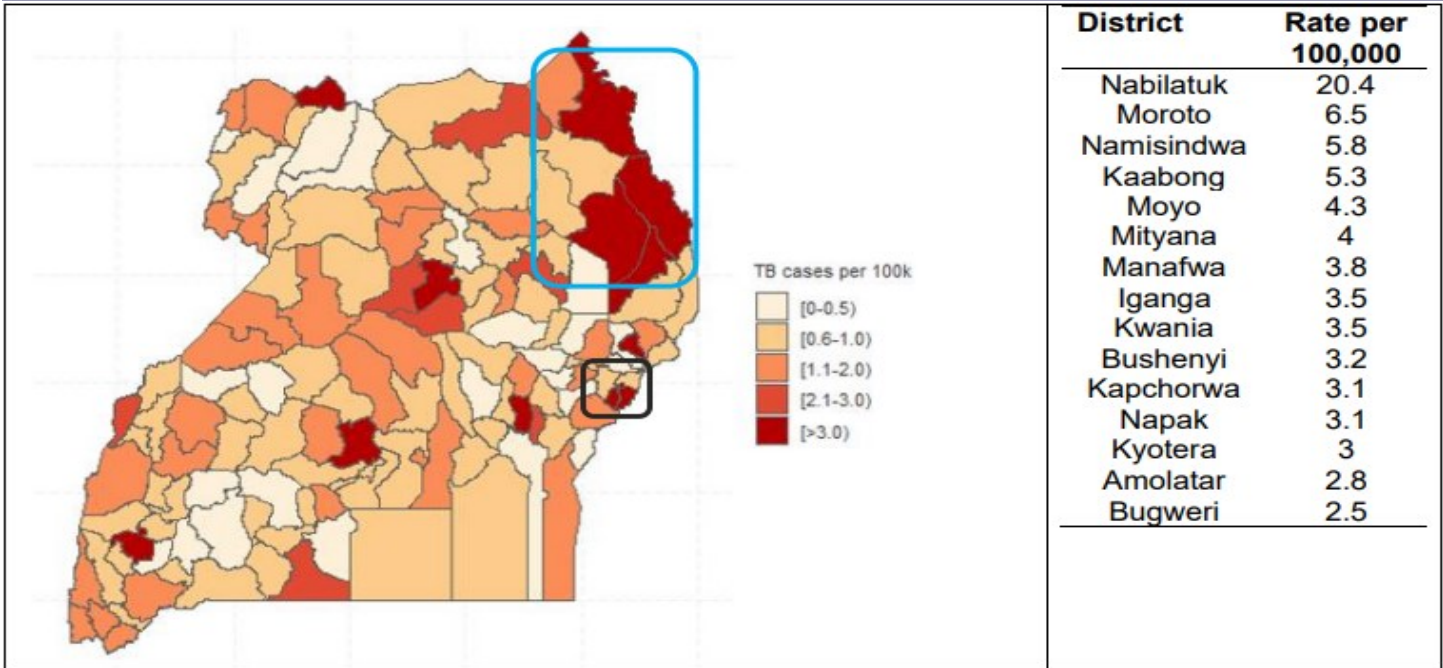
During week 25, fifty samples were collected from five [Kiruddu NRH (n=10), Mulago NRH (n=10), Gulu RRH (n=10), Jinja RRH (n=10), and Bwera Hospital (n=10)] sentinel sites. These were analyzed using PCR methods for Flu A, Flu B, and SARS-CoV-2 at the MUWRP-EIDP lab at UVRI Entebbe. One sample (2.00%) was positive for Flu A (H1N1). Further, two samples (4.00%) were positive for SARS-CoV-2. All samples were negative for Flu B. Further, 51 samples collected during week 24 were analyzed for ten other viral causes of ILI/SARI. Adenoviruses and respiratory syncytial viruses were the most prevalent non-influenza viral causes of ILI/SARI circulating at 5.89% and 3.92% respectively. (Table 9.2). Overall, adenoviruses and SARS-CoV-2 were the most prevalent causes of influenza like illnesses during the reporting period.

Table 9.2: Results of Analysis for Other Viral Pathogens 2024Week25

Health Facility	Total Samples Tested	# ADV Positive	# RSV Positive	# hMPV Positive
Kiruddu NRH	10	0	0	0
Gulu RRH	10	1	0	0
Jinja RRH	10	1	0	0
Mulago NRH	11	1	2	1
Bwera Hospital	10	0	0	0
Total	51	03	02	01

Tuberculosis Status Update

Figure 10.1: Tuberculosis burden during 2024 EpiWeek 24



Source: National Tuberculosis Center

Figure 10.2: National weekly trends in TB screening, diagnosis and reporting, Wk01 2023 to Wk24 2024

Figure 10.3: National weekly trends in New Relapse TB diagnosed Uganda, Wk01 2023 to Wk24 2024

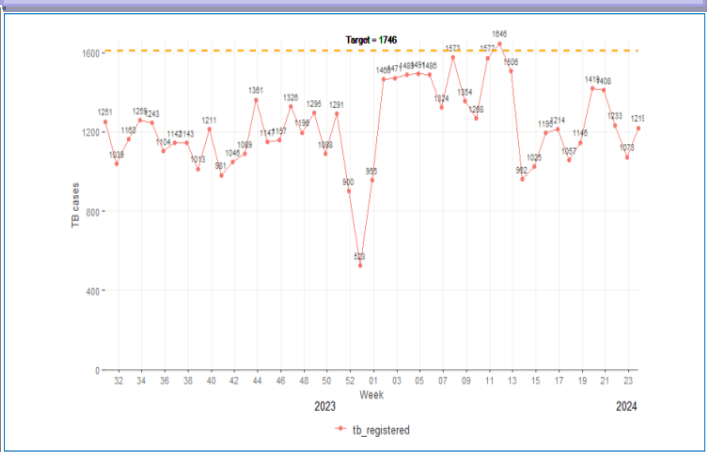
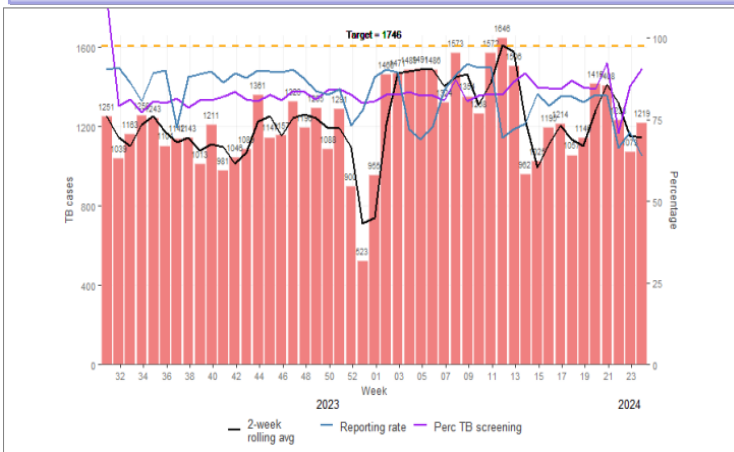
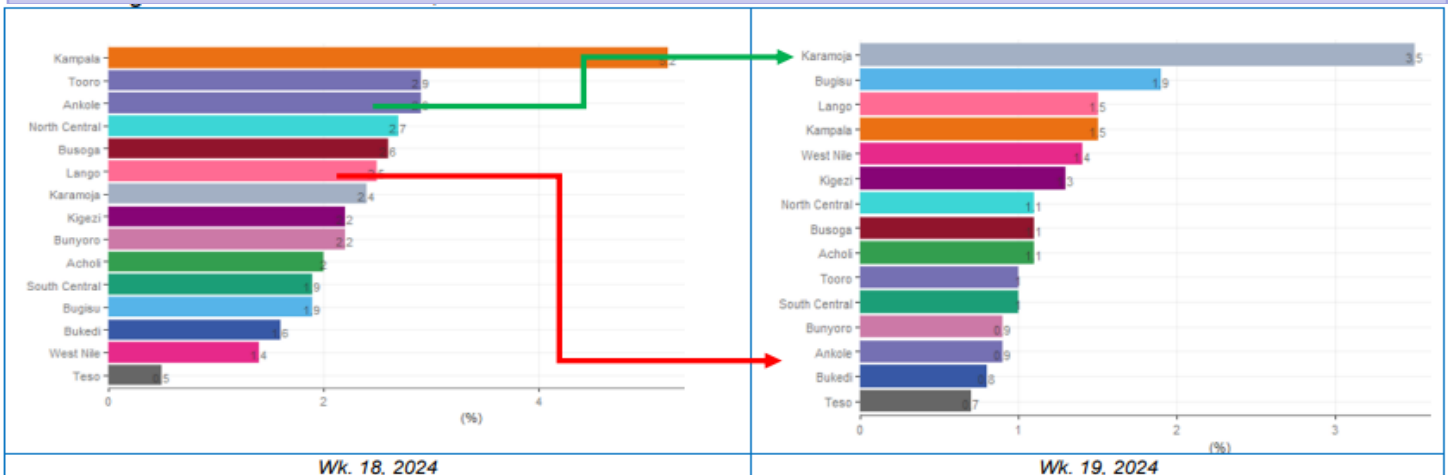


Figure 10.4: Comparison of TB burden by Health Regions between Epi Weeks 18–19, 2024



Influenza Surveillance

Table 11.1: Monthly Influenza, COVID 19 and RSV Results 2024WK25

Month	Influenza					COVID19Result		RSVResult		Total
	A(H3)	B Victoria	Negative	Pandemic A (H1N1) 2009	Pending	Negative	Positive	Negative	Positive	
January	04	00	162	00	00	155	11	163	03	166
February	03	01	138	00	00	137	05	140	02	142
March	01	01	252	03	00	257	00	244	13	257
April	01	01	119	05	00	125	01	115	11	126
May	01	00	145	03	01	143	07	137	13	150
June	00	01	45	01	00	47	00	46	01	47
Total	10	04	861	12	01	864	24	845	43	888

Table 11.2: Health Facility: Influenza, COVID 19 and RSV Results in ILI and SARI, 2024WK25

Sample Type/ Sentinel Site	Influenza					COVID19Result		RSVResult		Total	
	A(H3)	B Victoria	Negative	Pandemic A (H1N1) 2009	Pending	Negative	Positive	Negative	Positive		
ILI	Arua RRH	00	00	05	00	00	05	00	05	00	05
	Entebbe RRH	01	00	20	03	00	24	00	23	01	24
	Jinja RRH	07	01	163	01	00	165	07	166	06	172
	Kawaala HC IV	00	00	02	00	00	02	00	02	00	02
	Kibuli H	00	00	06	00	00	06	00	06	00	06
	Kiryandongo H	00	00	41	00	00	40	01	41	00	41
	Kiswa HC III	00	01	158	00	00	159	00	159	00	159
	Kitebi HC III	00	01	41	04	00	46	00	45	01	46
	Koboko H	00	00	13	00	00	13	00	13	00	13
	Mukono H	00	00	74	00	01	71	04	67	08	75
	Mulago NRH	00	00	44	00	00	44	00	44	00	44
	Nsambya H	00	00	25	00	00	25	00	25	00	25
	Tororo H	00	00	40	01	00	39	02	33	08	41
Total	08	03	632	09	01	639	14	629	24	653	
SARI	Arua RRH	00	00	01	00	00	01	00	01	00	01
	Entebbe RRH	00	00	04	00	00	03	01	04	00	04
	Fort Portal RRH	00	00	32	00	00	30	02	26	06	32
	Jinja RRH	00	00	39	00	00	38	01	39	00	39
	Koboko H	00	00	11	00	00	9	02	11	00	11
	Mbarara RRH	02	00	36	00	00	37	01	34	04	38
	Nsambya H	00	01	78	02	00	79	02	78	03	81
	Tororo H	00	00	28	01	00	28	01	23	06	29
	Total	02	01	229	03		225	10	216	19	235
SARI-ILI	Arua RRH	00	00	06	00	00	06	00	06	00	06
	Entebbe RRH	01	00	24	03	00	27	01	27	01	28
	Fort Portal RRH	00	00	32	00	00	30	02	26	06	32
	Jinja RRH	07	01	202	01	00	203	08	205	06	211
	Kawaala HC IV	00	00	02	00	00	02	00	02	00	02
	Kibuli H	00	00	06	00	00	06	00	06	00	06
	Kiryandongo H	00	00	41	00	00	40	01	41	00	41
	Kiswa HC III	00	01	158	00	00	159	00	159	00	159
	Kitebi HC III	00	01	41	04	00	46	00	45	01	46
	Koboko H	00	00	24	00	00	22	02	24	00	24
	Mbarara RRH	02	00	36	00	00	37	01	34	04	38
	Mukono H	00	00	74	00	01	71	04	67	08	75
	Mulago NRH	00	00	44	00	00	44	00	44	00	44
	Nsambya H	00	01	103	02	00	104	02	103	03	106
	Tororo H	00	00	68	02	00	67	03	56	14	70
Total	10	04	861	12	01	864	24	845	43	888	

Table 11.3: Weekly Influenza, COVID 19 and RSV Results for the past 3 weeks, 2024

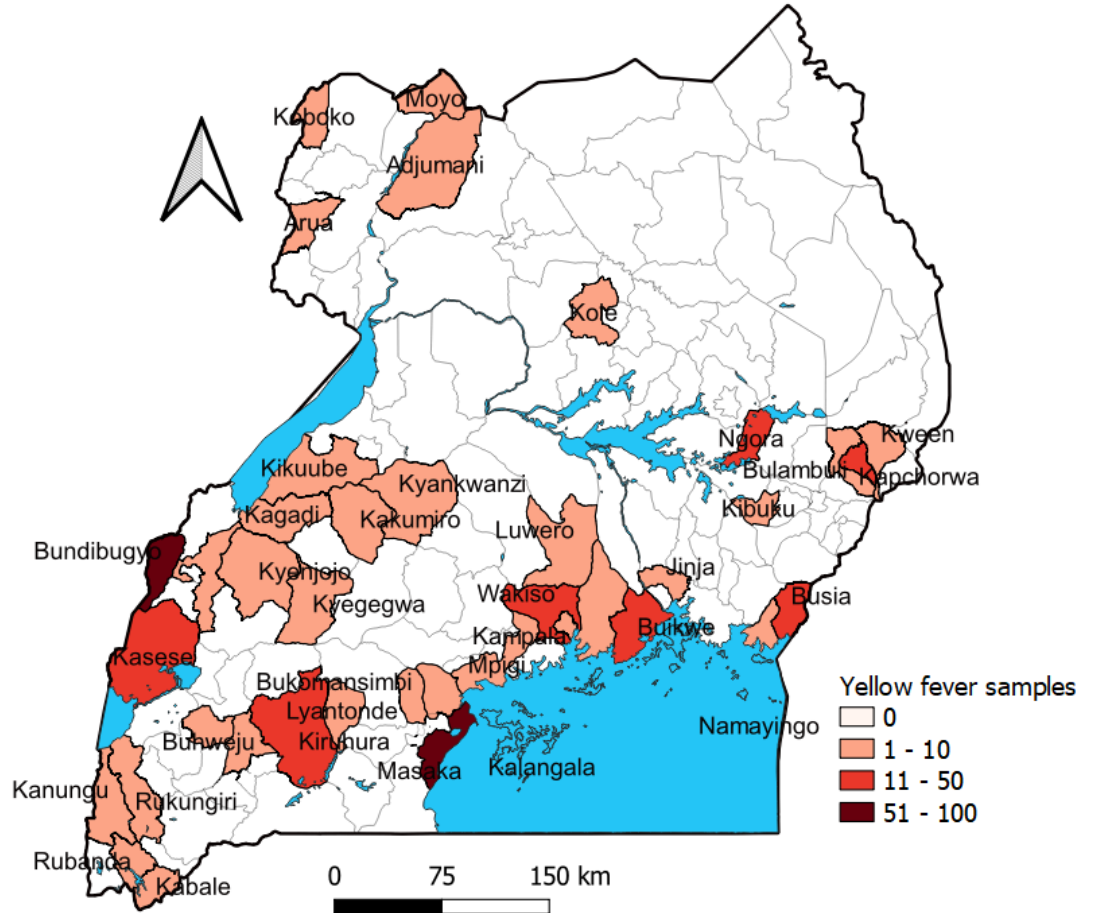
EPIWEEK	Influenza					COVID19Result		RSVResult		Total
	A(H3)	B Victoria	Negative	Pandemic A (H1N1) 2009	Pending	Negative	Positive	Negative	Positive	
23	00	00	13	00	00	13	00	12	01	13
24	00	01	15	01	00	17	00	17	00	17
25	00	00	17	00	00	17	00	17	00	17
Total	00	01	45	01	00	47	00	46	01	47

Yellow Fever Virus (YFV) Surveillance

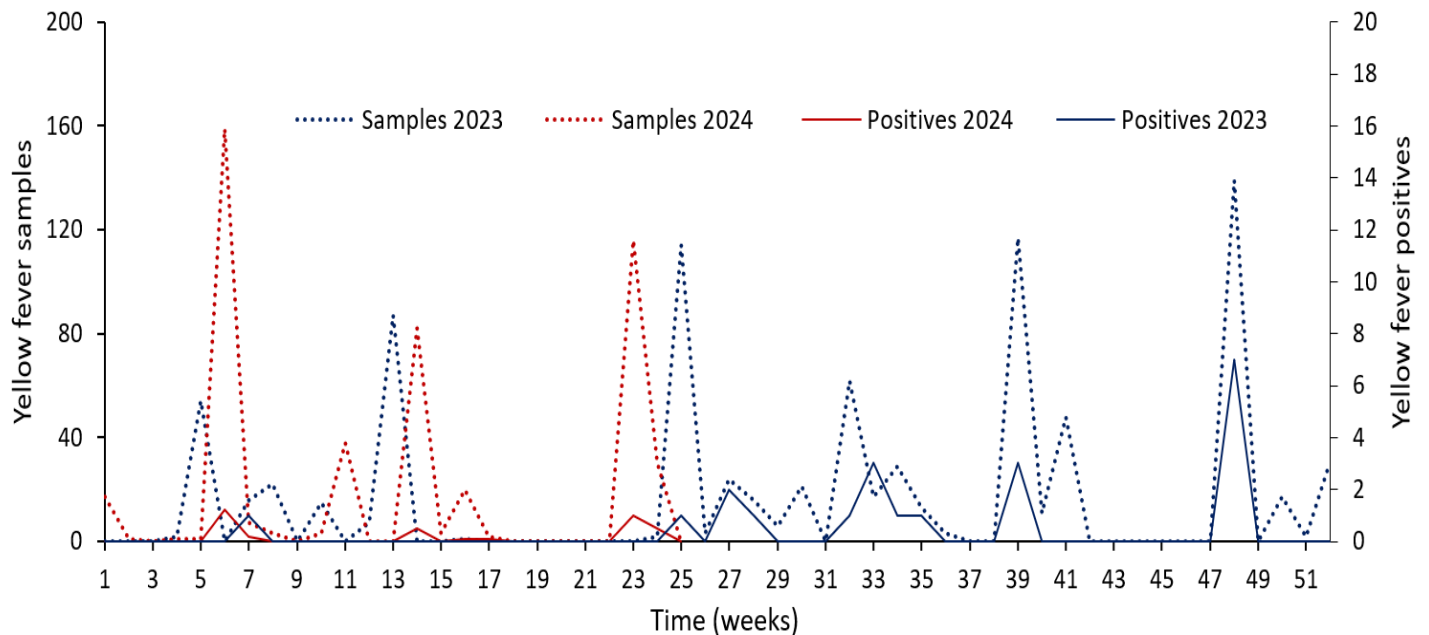
Figure 12.1 : Districts submitting samples for suspected YFV during 2024 EpiWeeks 01-25

During 2024 WK25 no yellow fever-suspected samples were submitted to UVRI.

Cumulatively, 482 samples have been submitted. The map on the right shows the districts where the tested yellow fever suspected samples came from between (WK01-25 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.

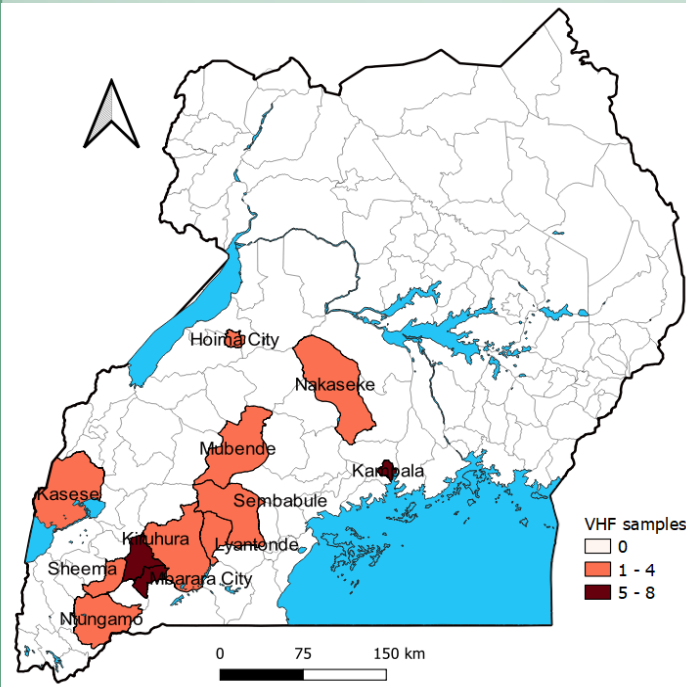
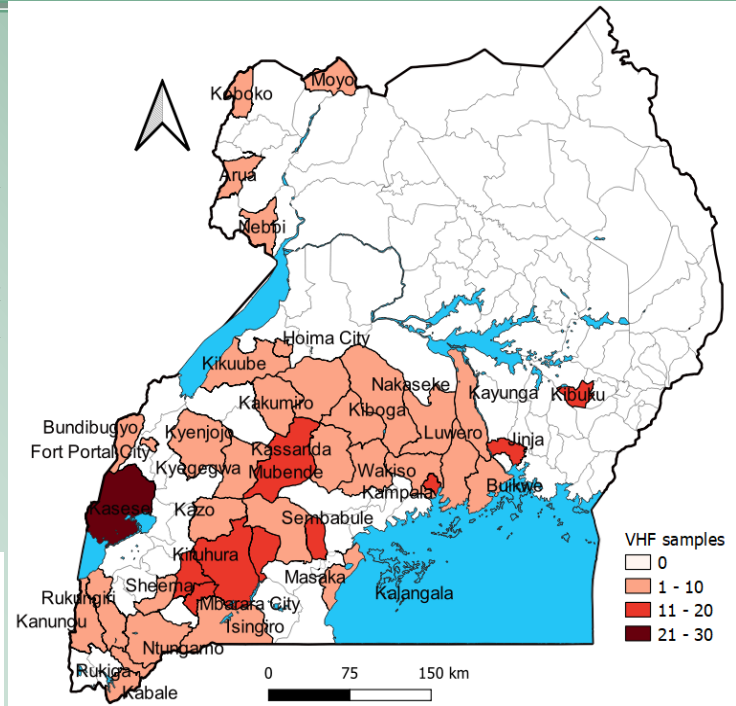


Viral Hemorrhagic Fevers Surveillance

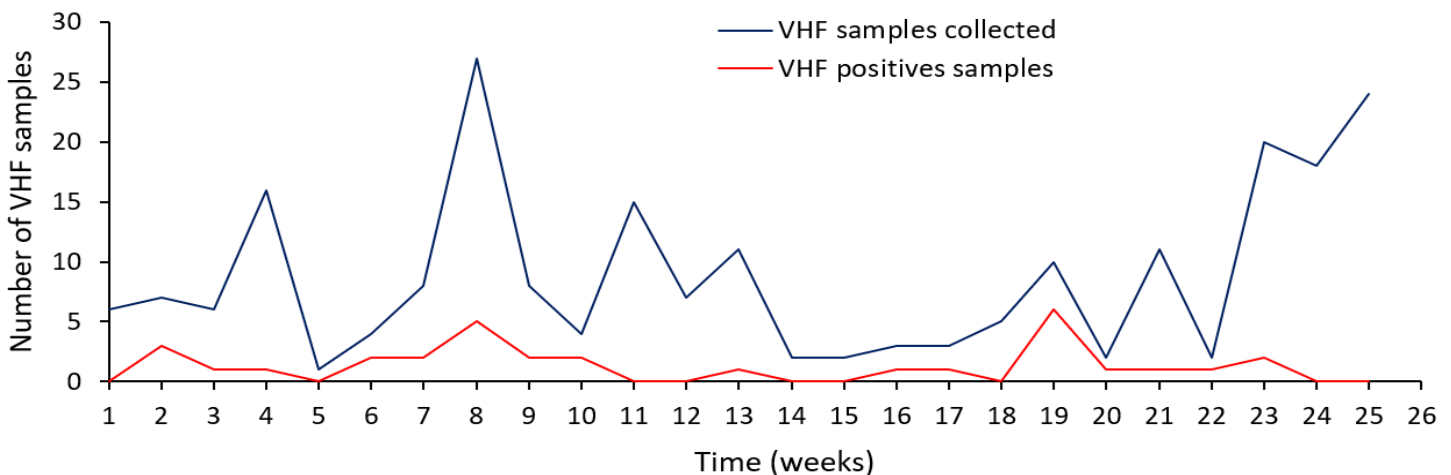
Figure 13.1 : Districts submitting samples for suspected VHF during 2024 EpiWeeks 01-25

Between 2024 WK01-25, a total of 225 VHF suspected samples were collected; 200 from alive and 25 from dead. Kasese District had the highest number of samples (25) followed by Kibuku (19) and Bukomansimbi and Lyan-tonde districts(18 each). The map on the right shows the distribution of samples collected by districts. Most of them are from central, western and West Nile regions of Uganda.

Twenty two samples tested positive for RVF;



91%(20/22) were from males while 9% (1/22) were from females. Majority of the positive RVF samples (12) were from Mbarara District and City. Twelve samples (all from males) tested positive for CCHF of which 3 were from Lyantonde, 3 from Kampala, 2 from Kiruhura, 2 from Kasese, 1 from Mbarara and 1 from Hoima (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 14.1: Traveler screening at Uganda's Points of Entry during 2024 Epi Week 25

#	POE	Travelers Screened (Entry)	Travelers Screened (Exit)							
1	Mpondwe	98,623	1,702	<p>During 2024 EpiWeek 25 a total of 196,771 incoming, and 58,860 exiting travelers at 31 Points of Entry (POEs) were screened. The highest traffic was registered at Mpondwe, Bunagana, Elegu and Entebbe Airport (Table 14.1). Presumptive Tuberculosis was identified among 17 travelers, 14 travelers were tested for TB, no traveler was confirmed with TB (Table 14.2).</p>						
2	Bunagana	21,685	9,036							
3	Elegu	18,900	8,441							
4	Entebbe Airport	6,337	16,982							
5	Malaba	6,518	-							
6	Cyanika	6,189	5,772							
7	Busunga	5,066	4,767							
8	Busia	4,320	-							
9	Katuna	3,944	-							
10	Mutukula	2,718	2,330				21	Ndaiga	268	216
11	Mirama Hills	2,143	1,837				22	Kyeshero	263	107
12	Goli	2,141	2,410				23	Kayanzi	233	233
13	Kokwochaya	1,907	1,161				24	Kamwezi	225	34
14	Vurra	1,145	877				25	Hima Cement	143	357
15	Alakas	876	712				26	Aweno Olwiyo	123	134
16	Odramacaku	838	356				27	Katwe	118	-
17	Arua Airport	632	222				28	Ntoroko Main	115	26
18	Wanseko	403	435				29	Suam	105	67
19	Transami	376	307				30	Sebagoro	65	06
20	Ishasha	334	233				31	Tonya	18	-
					Total	196,771	58,860			

Source: IOM, eIDSR

Table 14.2: Tuberculosis screening among travelers during 2024 Epi Week 25

#	POE	# presumptive TB patients identified	# presumptive TB patients tested for TB	# confirmed TB patients identified	# confirmed TB patients linked to care
1	Bunagana	02	02	00	00
2	Busia	04	02	00	00
3	Kamwezi	03	03	00	00
4	Kokwochaya	04	04	00	00
5	Mpondwe	03	03	00	00
6	Ndaiga	01	00	00	00
	Total	17	14	00	00

Event Based Surveillance (EBS)

Table 15.1 : Regional-based Signals received and triaged via the 6767 line

Region	Total Signals Received	Signals Verified as Events	Signals Discarded	Human	Animal	Natural Disaster	Artificial Disaster
Acholi	03	03	00	03	00	00	00
Ankole	01	01	00	01	00	00	00
Bugisu	05	05	00	05	00	00	00
Bukedi	05	05	00	05	00	00	00
Busoga	01	01	00	01	00	00	00
Kampala	04	04	00	04	00	00	00
Lango	02	00	02	00	00	00	00
N. Central	05	05	00	04	00	00	01
S. Central	02	02	00	02	00	00	00
Teso	01	01	00	01	00	00	00
W. Nile	10	10	00	10	00	00	00
Total	39	37	02	36	00	00	01

A total of 39 signals were received within the reporting week, of which 95% (37) were verified as events. Almost all of the signals received and verified as events (36, 97%) were from the human sector, and 1 (3%) was an artificial disaster (Table 15.1). The silent regions during the week were Bunyoro, Karamoja, Kigezi, and Tooro.

The artificial disaster was the fatal accident that occurred in Mityana District (North Central) on the Mityana-Bukuya Road which claimed over 11 lives and left scores injured.

NOTE: The signals have drastically gone down because MTN is not allowing its subscribers to send the 6767 messages and yet they have more subscribers than any other Ugandan Network. The lack of signals reported from Tooro region could be because of this problem.

The most notable signal received during the week was the food poisoning outbreak in Ndejje Secondary School of Luweero District (North Central), the Viral Hemorrhagic Fever (VHF) suspect in Kiruhura which was confirmed as a Rift Valley Fever (RVF) outbreak in the same week (Table 15.2). The other noteworthy signal received during the week was the ongoing conjunctivitis outbreak.

Table 15.2 : Regional-based suspected conditions reported within signals received and triaged via the 6767 line during 2024WK25

Region	Animal Bites	Measles/ Rubella	AFP	Red eyes	Meningitis	Anthrax	Cholera	VHF	Dysentery	Others
Acholi	00	00	00	00	03	00	00	00	00	00
Ankole	00	00	00	00	00	00	00	01	00	00
Bugisu	04	00	01	00	00	00	00	00	00	00
Bukedi	03	01	00	01	00	00	00	00	00	00
Busoga	00	01	00	00	00	00	00	00	00	00
Kampala	00	00	00	03	00	00	00	00	00	01
Lango	00	00	00	00	00	02	01	00	00	00
N. Central	00	01	00	00	00	00	00	01	00	01
S. Central	01	00	00	00	00	00	00	01	00	00
Teso	00	00	00	00	00	00	00	00	01	00
W. Nile	02	03	03	00	00	00	01	00	00	00
Total	10	06	04	04	03	02	02	03	01	02

PUBLIC HEALTH EMERGENCIES (PHES) IN AND AROUND UGANDA

Table 15.1: Active PHEs in Uganda during 2024WK25

PHE	Activation	Location	All Cases	Confirmed	Human
Tuberculosis	14-Dec-19	Seven Health Regions			
cVDPV2 (environmental)	31-May-24	Mbale City	-	-	-
Conjunctivitis	18-Feb-24	Sixteen health Regions	32,377	-	00
Measles	18-Jun-24	Moroto	59	13	03
	19-Jun-24	Sembabule	17	03	02
Black Water Fever	08-Feb-24	Bukomansimbi	131	-	13
Rift Valley Fever	19-Jun-24	Mubende	05	02	02
	19-Jun-24	Sembabule	03	01	01
	28-Jun-24	Kyegegwa	01	01	01
	28-Jun-24	Ntungamo	01	01	01
	01-Mar-24	Mbarara	14	07	02
Crimean Congo Hemorrhaging Fever	30-May-24	Kasese	05	01	00
Anthrax	04-Jun-24	Amudat	89	09	00
	10-Jun-24	Kween	02	02	00
Yellow Fever Virus	14-Jun-24	Buikwe	06	01	00
	14-Jun-24	Wakiso	23	01	00
	14-Jun-24	Ngora	10	04	00
	14-Jun-24	Kasese	14	03	00
	14-Jun-24	Masaka	10	04	00

Uganda's PHEOCs are currently activated for an outbreak of Red Eyes in multiple communities and at least 151 prison in-mates; Measles in Moroto and Sembabule districts; Yellow Fever within the districts of Masaka, Kasese, Ngora, Wakiso and Buikwe; Tuberculosis upsurge in seven health districts; Complicated Malaria / Black Water Fever in Bukomansimbi district; Rift Valley Fever within the districts of Mubende, Sembabule, Kyegegwa, Ntungamo and Mbarara; CCHF in Kasese district; Environmental cVDPV2 in Mbale City; and Anthrax in Kween and Amudat districts.

Within Uganda's neighborhood, three countries are responding to incidents of Poliomyelitis (cVDPV1 and 2), measles and Cholera. Other incidents include plague, anthrax and Monkey Pox in the DRC, RVF in Kenya, among others.