

WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 37: 12 Sept - 18 Sept 2022

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PUBLIC HEALTH SURVEILLANCE & EMERGENCY PREPAREDNESS AND RESPONSE DIVISION

Editorial message

Effective and efficient Integrated Disease Surveillance and Response (IDSR) systems contribute to the reduction of morbidity, disability and mortality from disease outbreaks and health emergencies.

This weekly bulletin presents the epidemiological status of the diseases under surveillance in Rwanda. These data are useful to trigger a rapid response for rapid impact, actions and results oriented, a proactive preparedness, risk mitigation and prevention, intelligence, real-time information, and communication for decision making.

Editorial board

Surveillance Unit, Outbreak Preparedness and Response Unit, Food and Waterborne Diseases Unit, Avian Influenza and Highly Pathogenic Diseases Unit, One health Unit

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Overview

This Weekly Bulletin focuses on diseases under surveillance in Rwanda. This week's articles cover:

- ☞ Reports completeness
- ☞ Reports timeliness
- ☞ Trend of weekly reportable diseases
- ☞ Distribution of Immediate reportable diseases
- ☞ COVID-19 situation
- ☞ Reported deaths
- ☞ Health facilities with no reports

Acknowledgement

The authors would like to thank Health facilities of Rwanda for providing the data used in this bulletin.

(Previous 10 weeks:Wk28 – Wk37)

OVERALL

RWANDA

Completeness – Wk 37: **96%**



Completeness is calculated as the proportion of received reports over expected reports by week in a catchment area

Observation: During this week 37, the overall IDSR reports completeness was 96%. However, **Gahini DH** and **Byumba DH** catchment area indicated the low level of completeness (Between 60 and 79%) and Rwanda Military Hospital did not report. We recommend them to conduct the root cause analysis and set measures that will facilitate them to report all required reports.

TREND OF IDSR REPORTS TIMELINESS

(Previous 10 weeks: Wk28 – Wk37)

OVERALL

RWANDA

Timeliness – Wk 37: 88%



Timeliness is calculated as the proportion of received reports on time over the expected reports by week in a catchment area

Observation: During this week 37, the overall IDSR reports timeliness was 88%. The following catchment areas indicated the low level of timeliness (Between 60 and 79%): **Nyagatare DH, Ruli DH, Gahini DH, Kaduha DH, Kabutare DH, Ruhango PH, Caraes Ndera**. However, Rwanda Military Hospital did not report. We recommend them to conduct the root cause analysis and set measures that will facilitate them to report all required reports on time (Monday of each week 12 pm).

IDSr WEEKLY REPORTABLE DISEASES - 2022

Non-Bloody Diarrhea cases

Wk01 – Wk37: 186,527

Wk37: 5,217

Flu syndrome cases

Wk01 – Wk37: 618,782

Wk37: 10,205

Malaria cases

Wk01 – Wk37: 155,714

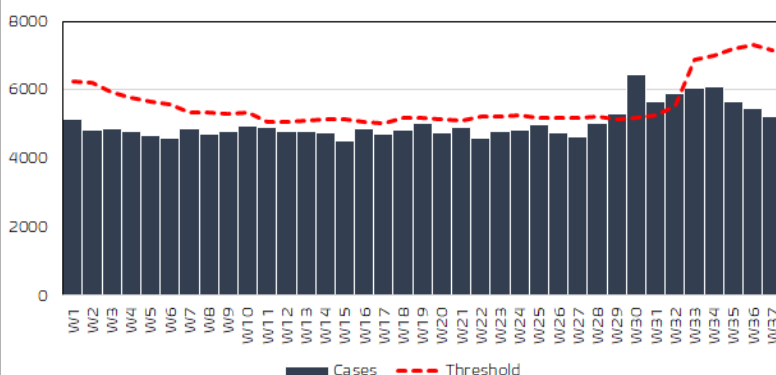
Wk37: 4,004

Severe Pneumonia cases

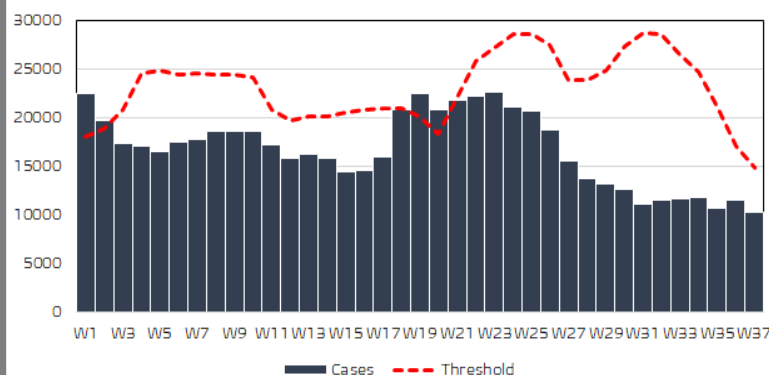
Wk01 – Wk37: 11,705

Wk37: 230

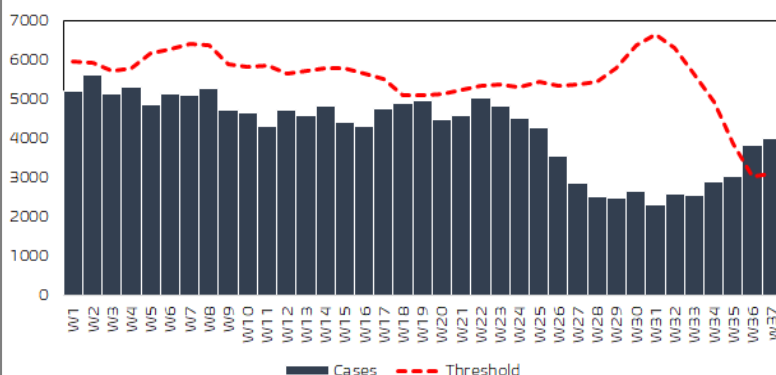
Trend of Non Bloody Diarrhea cases in Rwanda 2022
(Wk1 - Wk37)



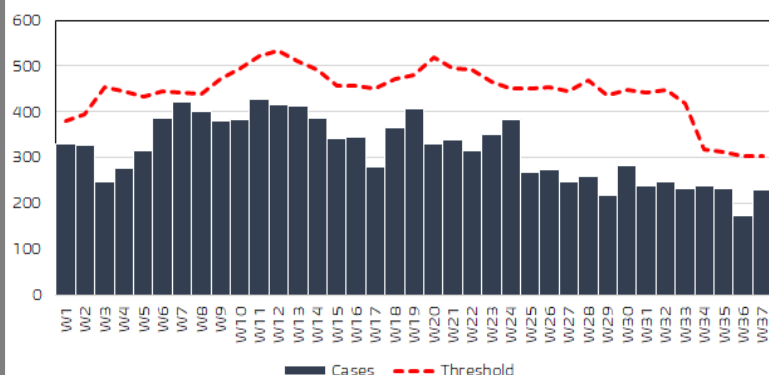
Trend of Flu syndrome cases in Rwanda 2022
(Wk1 - Wk37)



Trend of Malaria cases in Rwanda 2022
(Wk1 - Wk37)



Trend of Severe pneumonia cases (<5years) in Rwanda
2022 (Wk1 - Wk37)



Non bloody diarrhea, Malaria, Flu syndrome and Severe pneumonia are reported through e-IDSr by health facilities on a weekly basis.

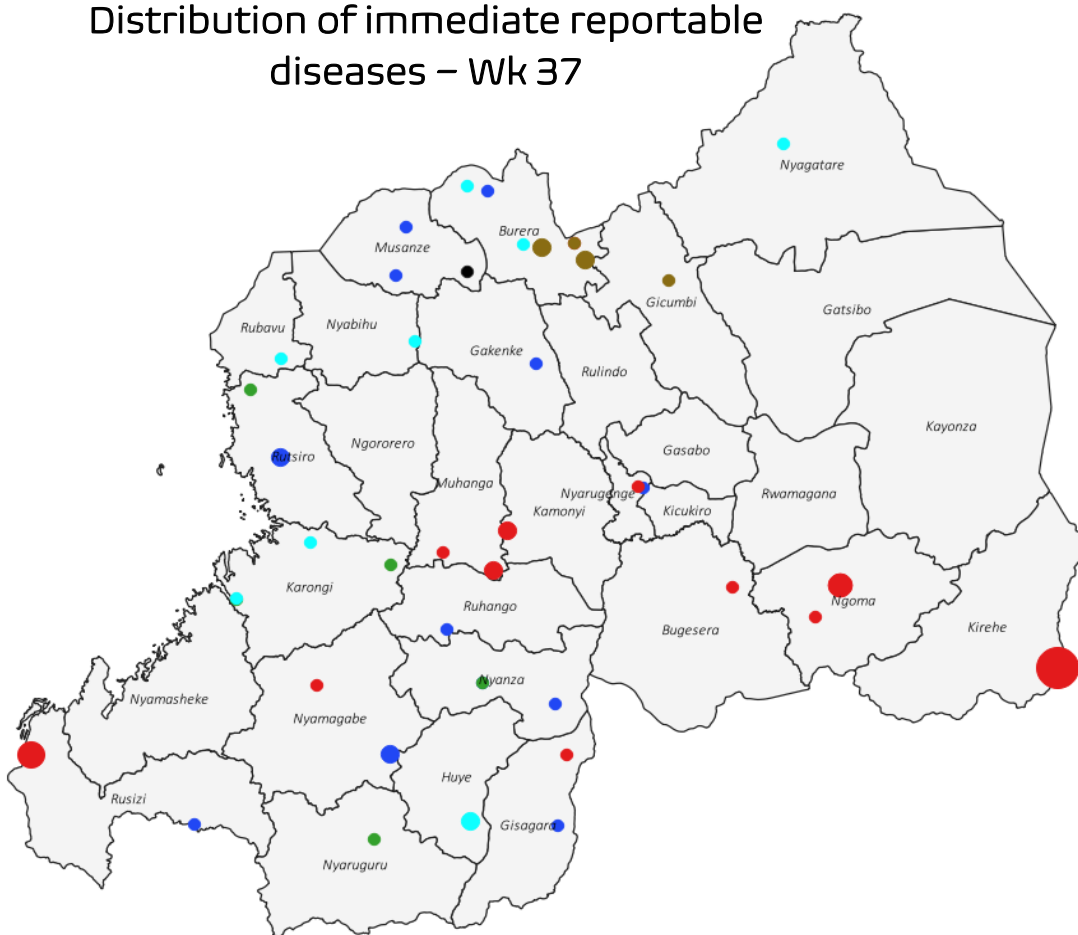
During this week of 37, the data analysis showed that only **Malaria** has crossed the threshold on National level. Considering the level of health facilities catchment area, the following health facilities have reached their threshold for Malaria:

- Remera Rukoma DH
- Kibagabaga DH
- Rutongo DH

Note: The investigation of the increase in number of cases among the above health facilities is ongoing

IDSR IMMEDIATE REPORTABLE DISEASES – Wk37

Distribution of immediate reportable diseases – Wk 37



IDSR Immediate reportable diseases by Health facilities

- Chicken Pox:** 28-Mahama Refugee Camp
5-Mont Cyanguu HC
3-Zaza HC
2-Shyogwe HC, 2-Kivumu HC
1-Gakoma HC, 1-Kabusunzu HC, 1-Kivuye HC, 1-Mushubi HC,
1-Nyarusange HC, 1-Rilima HC, 1-Rukoma Sake HC, 1-Rwerere HC
- Mumps:** 2-Rwerere HC, 2-Gatebe HC
1-Kivuye HC, 1-Mukono HC
- Rabies:** 2-CHUB
1-Bubazi HC, 1-Cyanika HC, 1-Karambo HC, 1-Kirambo HC,
1-Mugonero DH, 1-Nyagatare DH, 1-Shyira DH
- Bloody diarrhea:** 2-Murunda HC, 2-Nyamagabe HC
1-Biryogo, 1-Bweyeye HC, 1-Gitare HC, 1-Gitwe HC, 1-Hanika I HC
1-Kabere HC, 1-Kibilizi HC, 1-Kirarambogo HC, 1-Rushashi HC
1-Shyogwe HC, 1-Nyange HC
- Measles:** 1-Hanika I HC, 1-Kibeho HC, 1-Kivumu HC, 1-Mugonero HC, 1-Munzanga HC
- AFP:** 1-Murandi HC

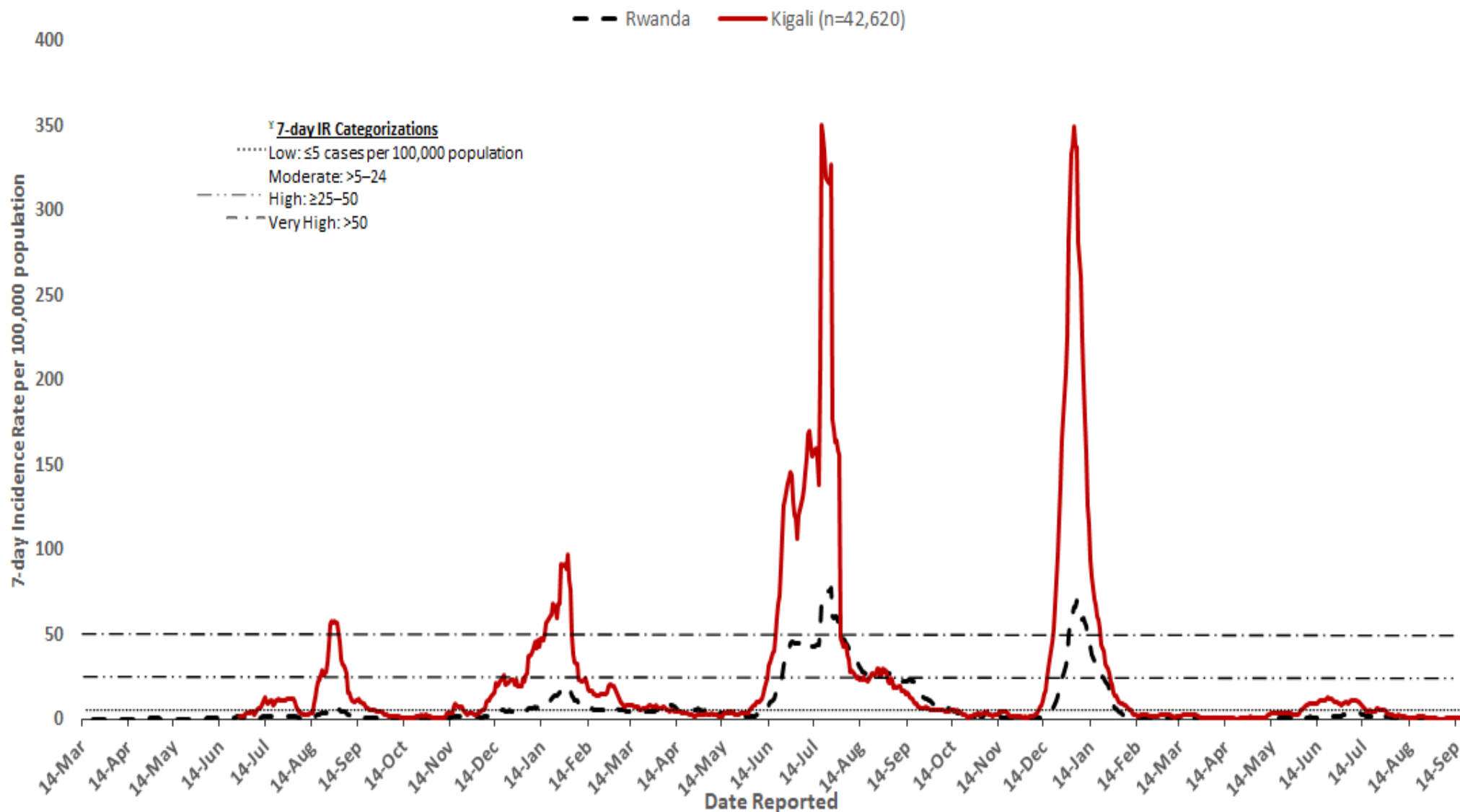
ALERTS

| District | Disease | Cases | Alert threshold | Recommendations |
|----------|------------|-------|-------------------|----------------------------------------------------|
| Kirehe | Chickenpox | 28 | 10 cases per week | Verify, investigate and report as soon as possible |

Observation: During the week 37, the reported IDSR immediate reportable diseases were Chicken pox, Mumps, Rabies, Bloody diarrhea, Typhoid fever, Measles and AFP.

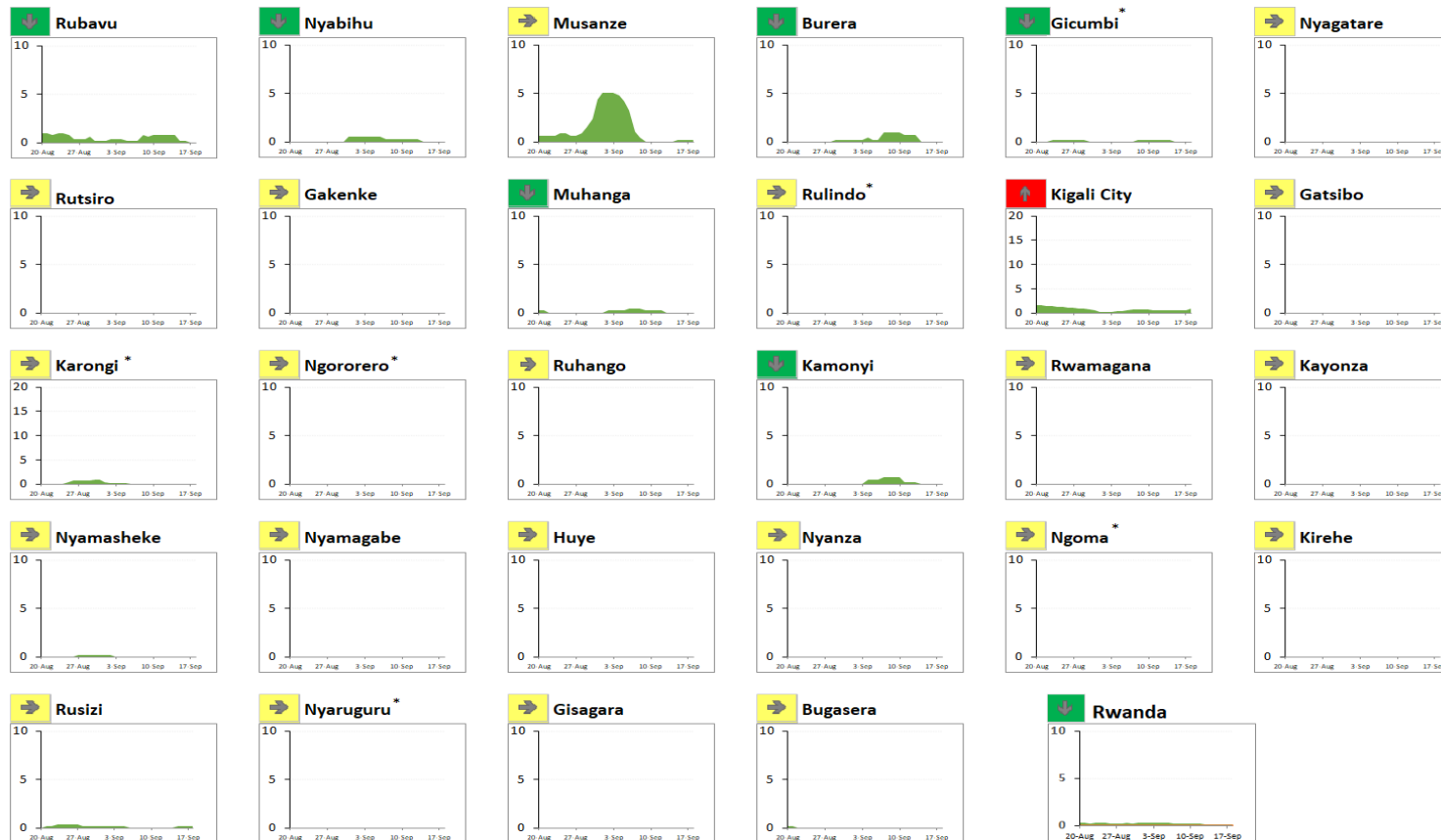
TREND OF 7-DAY INCIDENCE RATE OF COVID-19

COVID-19 Incidence Rate (IR) in Kigali City and Rwanda, March 14, 2020–September 18, 2022



TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

COVID-19 Cumulative 7-day (September 12–September 18) Incidence Rate (IR) and Trend (week-to-week % change) in Rwanda, August 20–September 18 (30 days), 2021



| | | Distribution of Districts | |
|--------------------------------------------------------------|---|---------------------------|------|
| Incidence rate in the last 7 days per 100,000 | | No. | % |
| Low: | | | |
| ≤5 cases | | 30 | 100% |
| Moderate: | | | |
| 5–24 cases | | 0 | 0% |
| High: | | | |
| ≥25–50 cases | | 0 | 0% |
| Very High: | | | |
| >50 cases | | 0 | 0% |
| Percentage change in cases in last 7 days vs previous 7 days | | | |
| Decrease: | | | |
| ≤ -10% change | ↓ | 6 | 20% |
| Stable: | | | |
| > -10% change and <10% change | → | 21 | 70% |
| Increase: | | | |
| ≥10% change | ↑ | 3 | 10% |

* Note: y-axis values are greater due to higher incidence rate peaks compared with other districts during the previous 30-days

Observation: During the week 37, The overall incidence rate of Rwanda was 0.1 cases per 100,000 population (Decreased from 0.2 cases per 100,000 population in week 36). All districts of Rwanda presented a very low incidence rate (IR below 5 cases). 21 districts showed a stable incidence rate for this week compared to previous week while 6 districts had a decreased incidence rate in this week compared to the previous week. However, the incidence rate in **Kigali city** increased by 33% compared to Week 36.

Note: An investigation on the increase of cases in Rubavu District and Kigali city is ongoing

SUMMARY OF REPORTED DEATHS THROUGH e-IDSR (Wk 37)

During Week 37, there was no deaths reported from all health facilities through e-IDSR.

HEALTH FACILITIES WITH NO REPORTS RECEIVED IN e-IDSR FOR Wk 37

| Province | District | Hospital | Health Facility |
|-------------|-----------|-----------|--------------------------|
| East | Kayanza | Gahini | Gahini DH |
| East | Kayanza | Gahini | Rukara HC |
| East | Ngoma | Kibungo | Gasetza HC |
| East | Nyagatare | Nyagatare | Cyabayaga HC |
| East | Bugesera | Nyamata | Gakurazo HC |
| East | Bugesera | Nyamata | Juru HC |
| East | Rwamagana | Rwamagana | Munyiginya HC |
| East | Rwamagana | Rwamagana | Rubona HC |
| East | Rwamagana | Rwamagana | Rwamagana Prison |
| Kigali City | Kicukiro | RMH | Rwanda Military Hospital |
| North | Burera | Butaro | Kinoni HC |
| North | Gicumbi | Byumba | Camp Gihembe HC |
| North | Gicumbi | Byumba | Gicumbi Prison |
| North | Gicumbi | Byumba | Giti HC |
| North | Gicumbi | Byumba | Mukarange HC |
| North | Gicumbi | Byumba | Munyinya HC |
| North | Gicumbi | Byumba | Musenyei HC |
| North | Gicumbi | Byumba | Ruvune HC |
| North | Gakenke | Nemba | Kamubuga HC |
| South | Huye | Kabutare | Rango HC |
| South | Nyamagabe | Kaduha | Kaduha HC |
| South | Nyamagabe | Kigeme | Uwinkingi HC |
| South | Nyanza | Nyanza | Nyabinyenga HC |
| South | Ruhango | Ruhango | Mbuye HC |
| West | Nyabihu | Shyira | Nyakiliba HC |