

# WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 42: 17-23 Oct 2022

Released on: 28<sup>th</sup> Oct 2022

## 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
- ☞ Ebola 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.

# TREND OF IDSR REPORTS COMPLETENESS

(Previous 10 weeks: Wk33 – Wk42)

OVERALL

RWANDA

Completeness – Wk 42: 93%



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

**Observation:** During this week 42, the overall IDSR reports completeness was 93%. However, **Rwanda Military Hospital** indicated the low level of completeness (Below 60 %) as well as it did not report. We recommend it to conduct the root cause analysis and set measures that will facilitate to report all required reports.

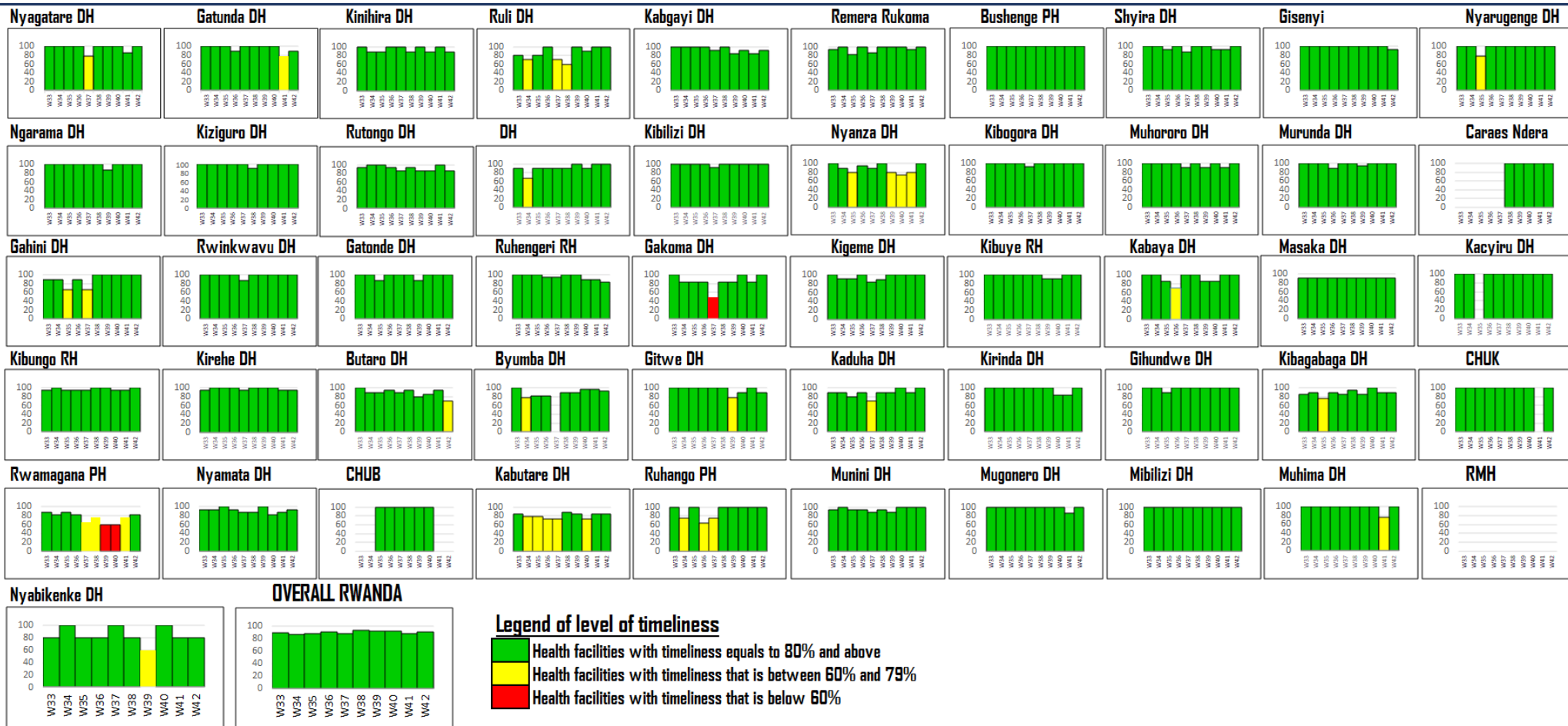
# TREND OF IDSR REPORTS TIMELINESS

(Previous 10 weeks: Wk33 – Wk42)

OVERALL

RWANDA

Timeliness – Wk 42: 91%



**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 42, the overall IDSR reports timeliness was 91%. The following catchment area indicated the low level of timeliness (Between 60 and 79%): **Butaro DH** while **CHUB** did not report on time 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 on time (Monday of each week 12 pm).

# IDSR WEEKLY REPORTABLE DISEASES - 2022

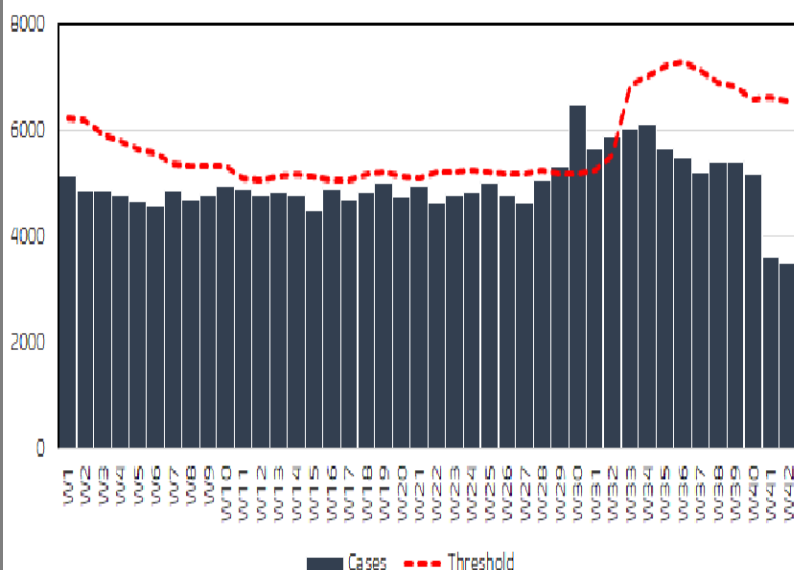
**Non-Bloody Diarrhea cases**  
Wk01 – Wk42: 209,604  
Wk42: 3466

**Flu syndrome cases**  
Wk01 – Wk42: 675,381  
Wk42: 10509

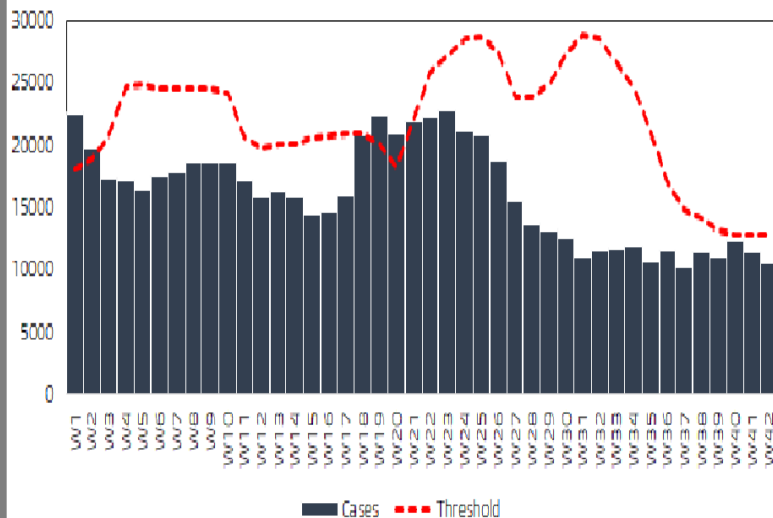
**Malaria cases**  
Wk01 – Wk42: 174,760  
Wk42: 2033

**Severe Pneumonia cases**  
Wk01 – Wk42: 12,843  
Wk42: 270

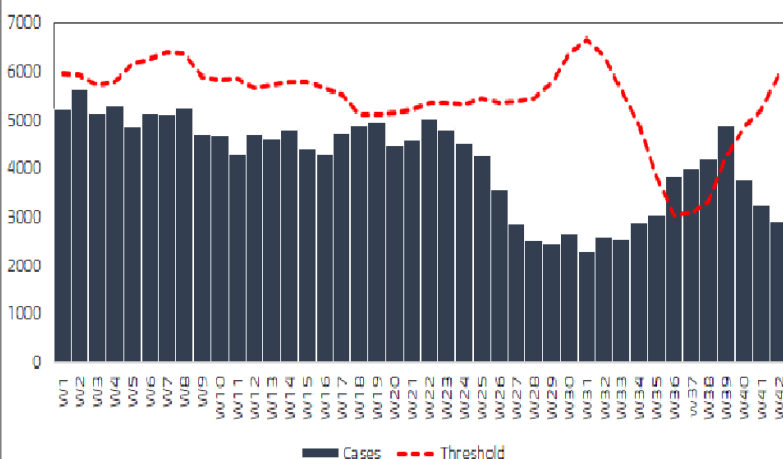
Trend of Non Bloody Diarrhea cases in Rwanda 2022  
(Wk1 - Wk42)



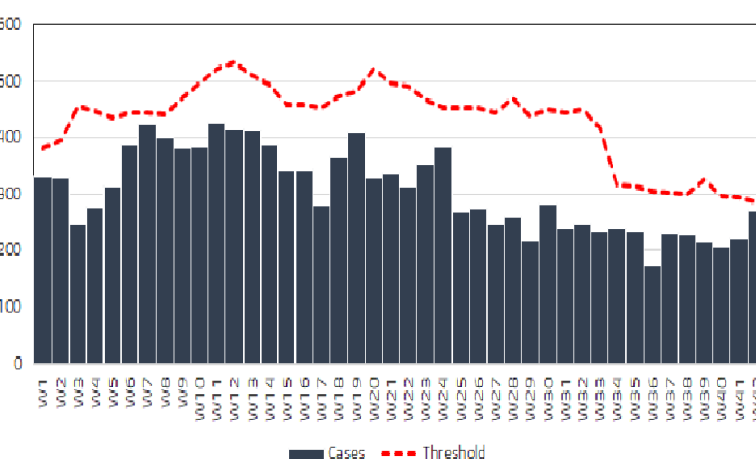
Trend of Non Flu syndrome cases in Rwanda 2022  
(Wk1 - Wk42)



Trend of Malaria cases in Rwanda 2022  
(Wk1 - Wk42)



Trend of Severe pneumonia cases in Rwanda 2022  
(Wk1 - Wk42)



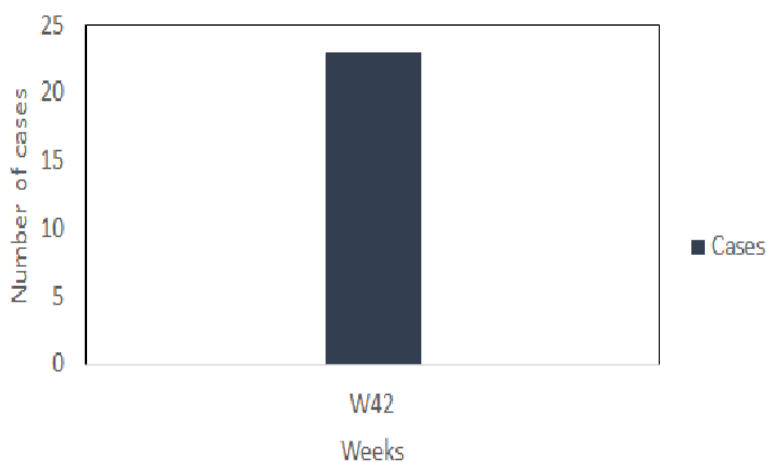
# IDSR WEEKLY REPORTABLE DISEASES - 2022

Covid19 confirmed cases:  
Wk 42:  
23cases

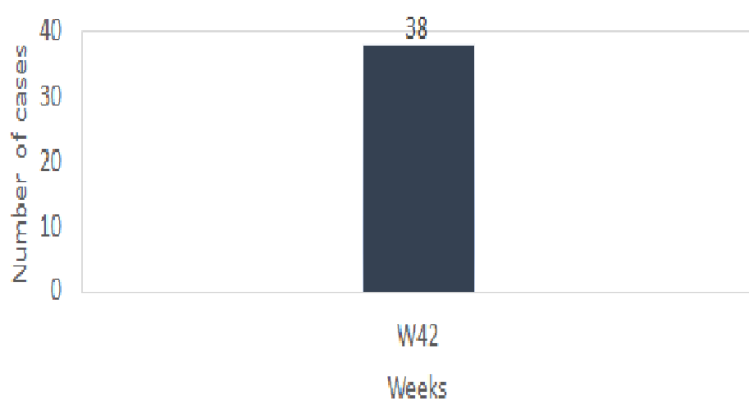
Rabies exposure (Dog or other mammals bite) cases:  
Wk 42:  
38 cases

Other weekly reportable diseases:  
Brucellosis, Trypanosomiasis  
no case

**Covid19 confirmed cases in Rwanda 2022  
(Wk 42)**



**Rabies exposure cases in Rwanda 2022  
(Wk 42)**



During this week 42, IDSR weekly report form revised and adapted on technical guideline 3<sup>rd</sup> edition was adapted also in DHIS-2, therefore many changes occurred.

For 8 weekly reportable diseases, data analysis showed that no weekly reportable disease has crossed the threshold on National level.

However, the decrease of cases should be related also to the change in disease reported, for Non bloody diarrhea as well as only <5years was reported instead of all age; for Malaria, only simple malaria was weekly reported, while severe malaria was immediately reported.

For four new diseases added on weekly report, Covid19 presented 23 cases (all Covid19 cases from IDSR and other sources were included), dog bite presented 38 cases, while there was no case for two new diseases: Brucellosis and Trypanosomiasis.



# IDSR IMMEDIATE REPORTABLE DISEASES – Wk42

DH	HF	Acute Flaccid Paralysis	Bacterial Meningitis	Bloody Diarrhea (Shigellosis)	Measles	Rubella
Nyarugenge	Biryogo CS	0	0	3	0	0
Gatonde	Busengo CS	0	0	0	1	0
Nyarugenge	CHK(CHUK) HNR	0	1	0	0	0
Kigeme	Cyanika (nyamagabe) CS	0	0	3	0	0
Gakoma	Gakoma CS	0	0	5	0	1
Butaro	Gatebe CS	0	0	1	0	0
Gakoma	Gishubi CS	0	0	1	0	0
Byumba	Gisiza CS	0	0	0	1	0
Gahini	Kageyo I (Kayonza Gahini) CS	0	0	2	0	0
Remera Rukoma	Karama (Kamonyi) CS	0	0	3	0	0
Masaka	Masaka CS	0	0	0	4	0
Ruhango	Mbuye CS	0	0	1	0	0
Mugonero	Mubuga CS	1	0	0	0	0
Mugonero	Mugonero CS	0	0	0	1	0
Muhima	Muhima CS	0	0	0	1	0
Rutongo	Muyanza CS	0	0	0	1	0
Nyanza	Nyabinyenga CS	0	0	1	0	0
Gisenyi	Nyakiriba CS	0	0	0	1	0
Gatunda	Nyarurema CS	0	0	1	0	0
Nemba	Rutenderi CS	0	0	0	1	0
Rutongo	Shyorongi CS	0	0	0	1	0
	Total	1	1	21	12	1

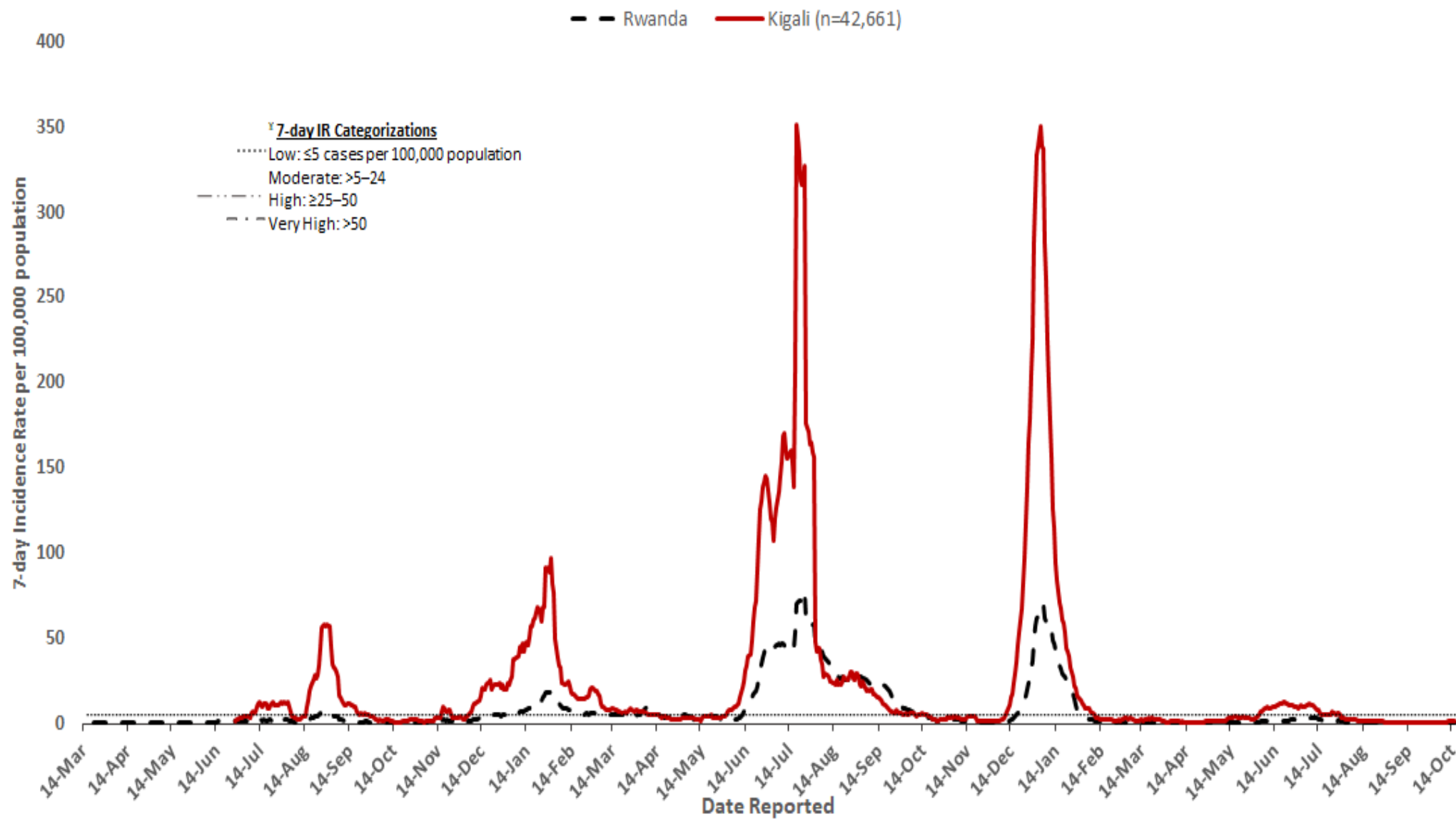
## Alerts

District hospital	Health facility	Diseases	Cases	Alert threshold	Recommendations
Mugonero DH	Mubuga HC	AFP	1	1 suspected case	Verify, investigation and reports as soon as possible

**Observation:** During the week 42, the reported IDSR immediate reportable diseases were AFP, Bacterial Meningitis, Bloody diarrhea, Measles and Rubella, all were suspected cases.

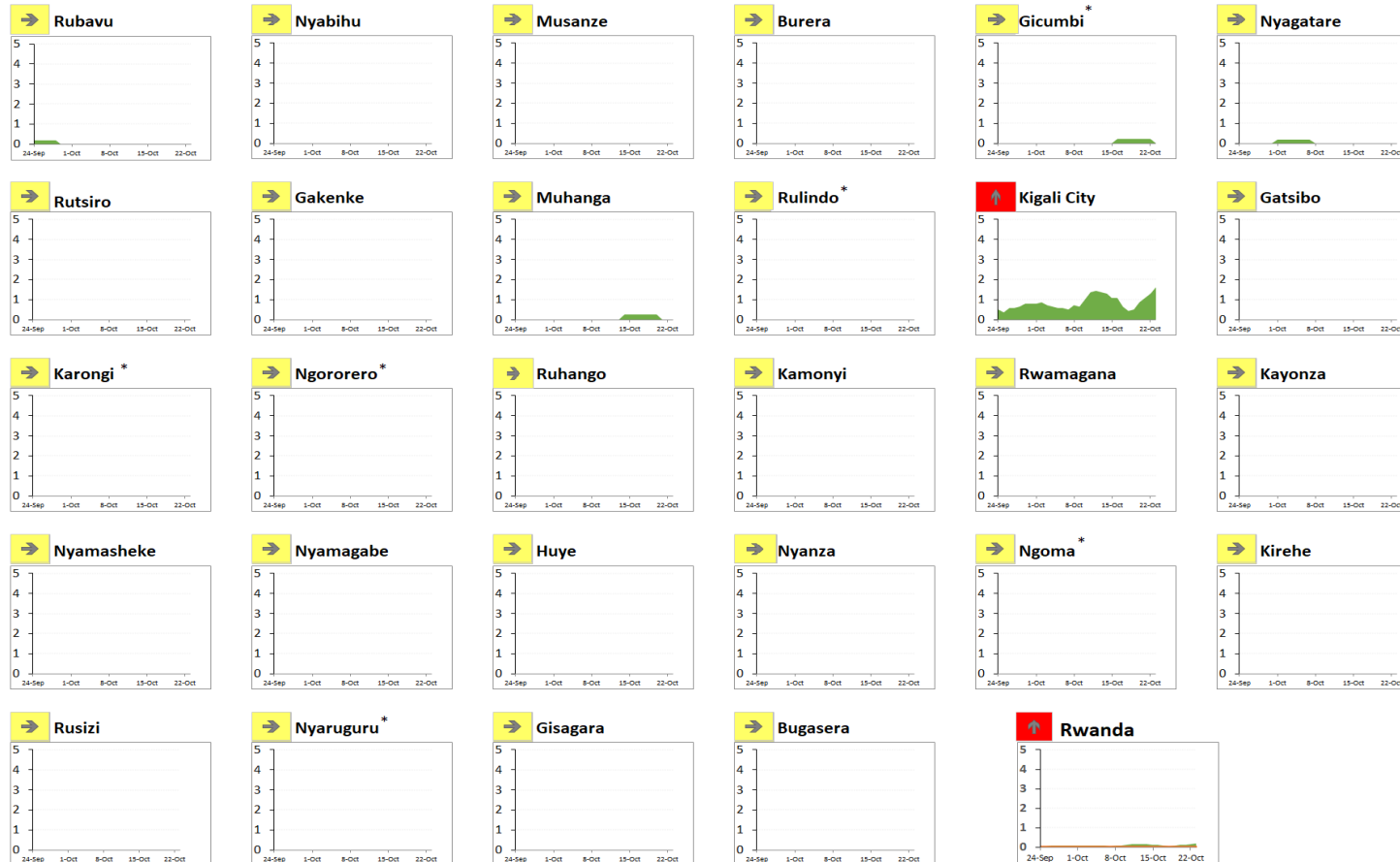
# TREND OF 7-DAY INCIDENCE RATE OF COVID-19

COVID-19 Incidence Rate (IR) in Kigali City and Rwanda, March 14, 2020–October 23, 2022



# TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

COVID-19 Cumulative 7-day (October 17–October 23) Incidence Rate (IR) and Trend (week-to-week % change) in Rwanda, September 24–October 23 (30 days), 2022



	Distribution of Districts	
Incidence rate in the last 7 days per 100,000	No.	%
<b>Low:</b> ≤5 cases	30	100%
<b>Moderate:</b> 5–24 cases	0	0%
<b>High:</b> ≥25–50 cases	0	0%
<b>Very High:</b> >50 cases	0	0%
Percentage change in cases in last 7 days vs previous 7 days		
<b>Decrease:</b> ≤ -10% change	↓	5 17%
<b>Stable:</b> > -10% change and <10% change	→	25 83%
<b>Increase:</b> ≥10% change	↑	0 0%

**Observation:** During the week 42, The overall incidence rate of Rwanda was 0.2 case per 100,000 population (it is the same with week 41: 0.2 cases per 100,000 population). All districts of Rwanda presented a very low incidence rate (IR below 5 cases). 27 districts showed a stable incidence rate for this week compared to previous week while 3 districts had a decreased incidence rate in this week compared to the previous week.



# UPDATE ON EBOLA VIRUS DISEASE

## Ebola virus disease in Uganda-Mubende district

### 1. Key highlights

On 20th September 2022, the Ministry of Health declared an outbreak of Sudan ebolavirus (EVD) after a case managed at Mubende Regional Referral Hospital (MRRH) in Mubende district was confirmed through testing at the Uganda Virus Research Institute (UVRI). This follows investigations by the National Rapid Response Team of suspicious deaths that had occurred in the district earlier in the month. This is the first time in more than a decade that Uganda reports an outbreak of Sudan ebolavirus.

- Two new EVD confirmed and no new deaths in the past 24 hours.
- Contacts follow-up rate was 60%.
- CFR among confirmed is 09/43 (20.9%)
- Total of 10 healthcare workers infected, with 3 deaths.

Date update as of 23<sup>th</sup> October 2022

	District affected	Cases confirmed	Confirmed deaths	Recoveries
Total	7	90	28	26

### 2. Action to date in Uganda

The Ministry of Health, Districts and Partners in **Uganda** are implementing several outbreak control interventions in affected and surrounding districts to contain the disease spread.

### 3. Key strategies ongoing for Ebola Virus outbreak preparedness in Rwanda

#### Key strategies in Rwanda

- Activate all command post in all districts
- Temperature screening in all POEs
- Map all people upon entry coming from Mubende, Kyegegwa Kagadi, Bunyangabu, Kassanda, Wakiso and Kampala regions to be quarantined for 21 days
- Community screening for people with symptoms by CHWs
- Awareness to both community and health care workers
- Investigate and follow up of cases with unexplained fever who consulted health facilities

# SUMMARY OF REPORTED DEATHS THROUGH e-IDSR (Wk 42)

During Week 42, there was 2 deaths due to severe pneumonia<5years, occurred in Kibuye RH and Murunda DH , 2Maternal deaths occurred in CHUK and Nyundo (Gakenke)HC, 25perinatal deaths:5 in Rwinkwavu DH, and 11 under five deaths occurred in different Hospitals.

## HEALTH FACILITIES WITH NO REPORTS RECEIVED IN e-IDSR FOR Wk 42

District	Hospital	HF
<b>Burera</b>	Butaro	Butaro DH
	Butaro	Gitare CS
	Butaro	Ruhunde CS
<b>Gicumbi</b>	Byumba	Byumba CS
<b>Nyagatare</b>	Gatunda	Kabuga (karama Nyagatare) CS
<b>Ruhango</b>	Gitwe	Munanira CS
<b>Muhanga</b>	Kabgayi	Gikomero (Kabgayi) CS
<b>Huye</b>	Kabutare	Huye Prison
	Kabutare	Mbazi CS
	Butare Chu Hnr (huye)	Butare Chu Hnr (huye)
<b>Gasabo</b>	King Faisal Hospital HNR	King Faisal Hospital HNR
<b>Rulindo</b>	Kinihira	Marembo CS
	Rutongo	Rulindo CS
	Rutongo	Rutongo DH
<b>Musanze</b>	Ruhengeri	Gashaki CS
	Ruhengeri	Muhoza (Ruhengeri) CS
	Ruhengeri	Ruhengeri RH
<b>Nyabikenke</b>	Nyabikenke	Gitega (kibangu) CS
<b>Kicukiro</b>	Rwanda Military Hospital	Rwanda Military Hospital
<b>Rwamagana</b>	Rwamagana	Gahengeri CS
	Rwamagana	Gishari(Police) CS
	Rwamagana	Nzige CS