

# WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 39: 26 Sept - 02 Oct 2022

Released on: 06<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
- ☞ 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: Wk30 – Wk39)

OVERALL

RWANDA

Completeness – Wk 39: 95%



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

**Observation:** During this week 39, the overall IDSR reports completeness was 95%. However, **Gitwe DH** indicated the low level of completeness (Between 60 and 79%), while **Rwanda Military Hospital** 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: Wk30 – Wk39)

OVERALL

RWANDA

Timeliness – Wk 39: 92%



**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 39, the overall IDSR reports timeliness was 92%. The following catchment area indicated the low level of timeliness: Gitwe DH, Nyabikenke DH and Nyanza DH (Between 60 and 79%), Rwamagana PH was below 60%: while 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 – Wk39: 197,358

Wk39: 5,422

## Flu syndrome cases

Wk01 – Wk39: 641,159

Wk39: 10,994

## Malaria cases

Wk01 – Wk39: 164,808

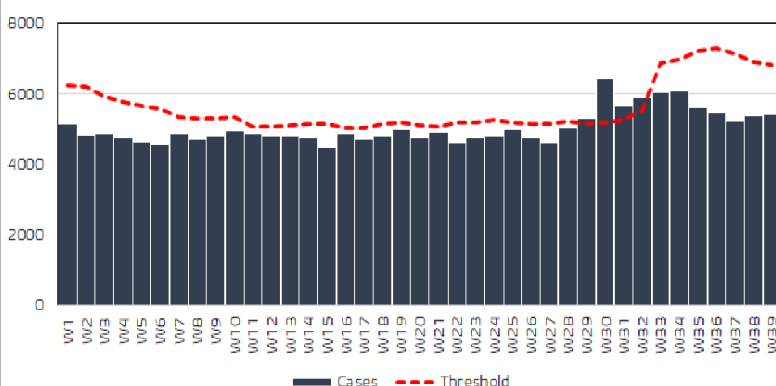
Wk39: 4898

## Severe Pneumonia cases

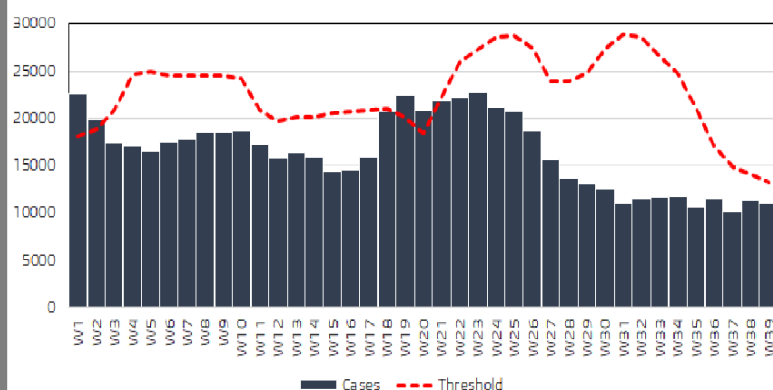
Wk01 – Wk39: 12,147

Wk39: 215

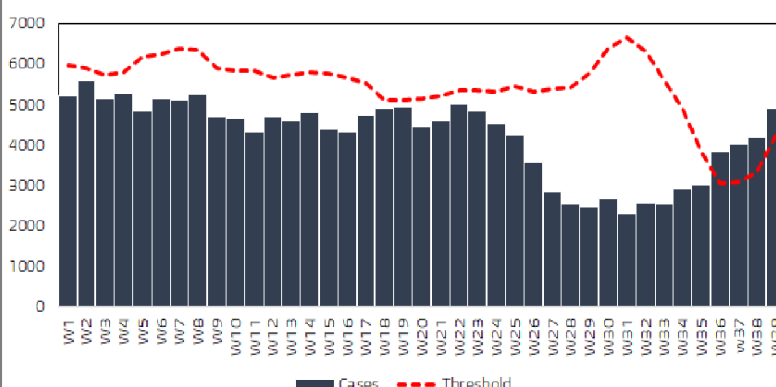
Trend of Non Bloody Diarrhea cases in Rwanda 2022  
(Wk1 - Wk39)



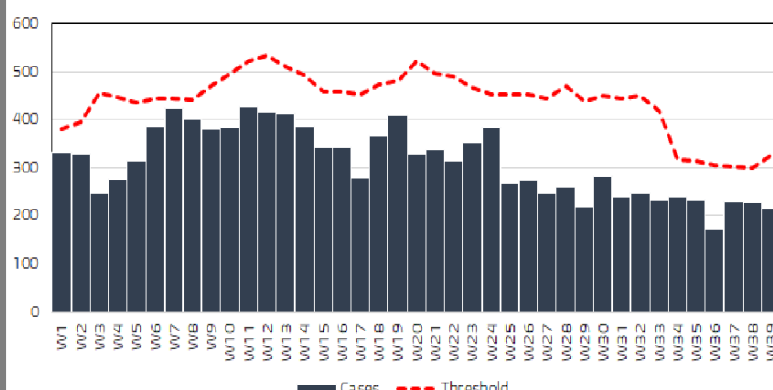
Trend of Non Flu syndrome cases in Rwanda 2022  
(Wk1 - Wk39)



Trend of Malaria cases in Rwanda 2022  
(Wk1 - Wk39)



Trend of Severe pneumonia cases in Rwanda 2022  
(Wk1 - Wk39)



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 39, the data analysis showed that only **Malaria** has crossed the threshold on National level.

**Note:** The investigation of the increase in number of cases was ongoing



# IDSR IMMEDIATE REPORTABLE DISEASES – Wk39

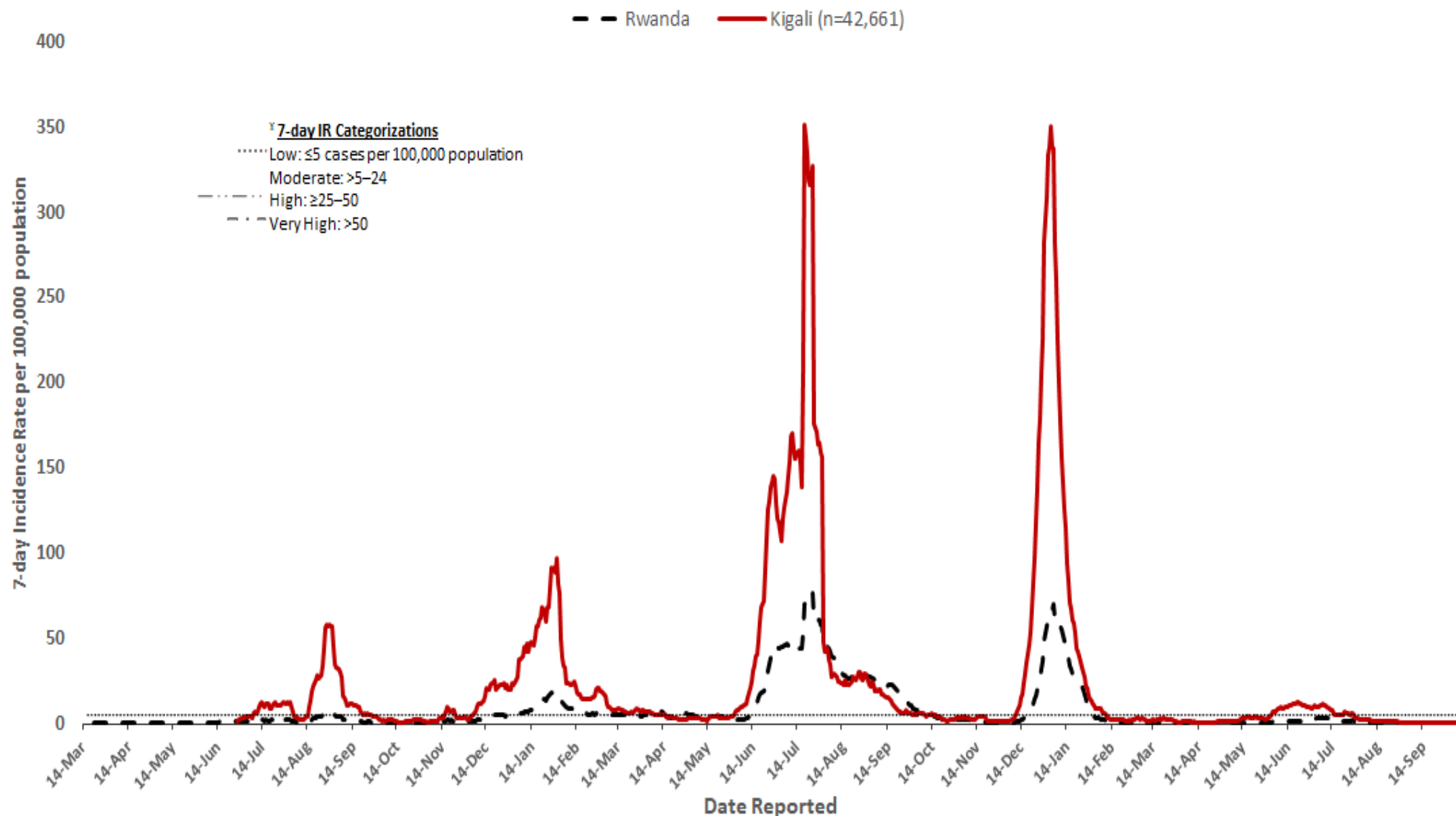
HF	Bloody Diarrhea (Shigellosis)	Chicken Pox - Varicella	Food Poisoning	Measles	Mumps	Rabies	Rubella	Typhoid Fever
Agahabwa CS	1	0	0	0	0	0	0	0
Biryogo CS	3	0	0	0	0	0	0	0
Busengo CS	0	0	0	0	1	0	0	0
Butare Chu Hnr (huye)	0	0	0	0	0	6	0	0
Buyoga CS	1	0	0	0	0	0	0	0
Crete Congo Nil CS	0	0	0	1	0	0	0	0
Gakoma CS	3	7	0	0	0	0	0	0
Gasetza CS	0	5	0	0	0	0	0	0
Gatebe CS	2	0	0	0	0	0	0	0
Gatsata CS	0	1	0	0	0	0	0	0
Kabaya DH	0	0	0	0	0	0	0	1
Kibilizi (nyanza) CS	0	2	0	0	0	0	0	0
Kibogora CS	0	0	0	0	0	0	1	0
Kirarambogo CS	1	0	0	0	0	0	0	0
Kivuye CS	0	0	0	0	3	0	0	0
Mahama Refugee Camp HC	0	14	0	0	0	0	0	0
Masaka DH	0	0	0	6	0	0	0	0
Mashesha CS	0	0	0	1	0	0	0	0
Matimba CS	0	0	0	0	0	0	1	0
Mibilizi CS	0	1	0	0	0	0	0	0
Mibilizi DH	0	0	0	0	0	1	0	0
Mugombwa Refugee Camp	0	18	0	0	0	0	0	0
Mugonero CS	0	0	0	0	0	0	0	0
Mugonero DH	0	0	0	0	0	1	0	0
Munzanga CS	0	0	31	0	0	0	0	0
Murunda DH	1	0	0	0	0	0	0	0
Nyagatare DH	0	1	0	0	0	3	0	0
Nyakinama CS	0	1	0	0	0	0	0	0
Nyarusange (muhanga) CS	0	0	0	0	0	0	1	0
Polyclinic du Plateau	0	1	0	0	0	0	0	0
Ruhango CS	0	1	0	0	0	0	0	0
Rurenge CS	0	0	0	2	0	0	0	0
Shyira DH	0	0	0	0	0	1	0	0
Shyogwe CS	0	0	0	2	3	0	0	0
Simbi CS	0	0	0	2	0	0	0	0
<b>Total</b>	<b>12</b>	<b>52</b>	<b>31</b>	<b>14</b>	<b>7</b>	<b>12</b>	<b>3</b>	<b>1</b>

District	Disease	Case	Alert threshold	Recommendations
Kirehe	Chicken Pox	14	10 cases per week	Verify, investigation and reports as soon as possible
Gisagara	Chicken Pox	18	11 cases per week	Verify, investigation and reports as soon as possible
Karongi	Food poisoning	31	2 or more cases	Verify, investigation and reports as soon as possible
Kicukiro	Measles	6	1 confirmed case	Verify, investigation and reports as soon as possible

**Observation:** During the week 39, the reported IDSR immediate reportable diseases were Chicken pox, Mumps, Rabies, Bloody diarrhea, Measles, AFP and Food poisoning

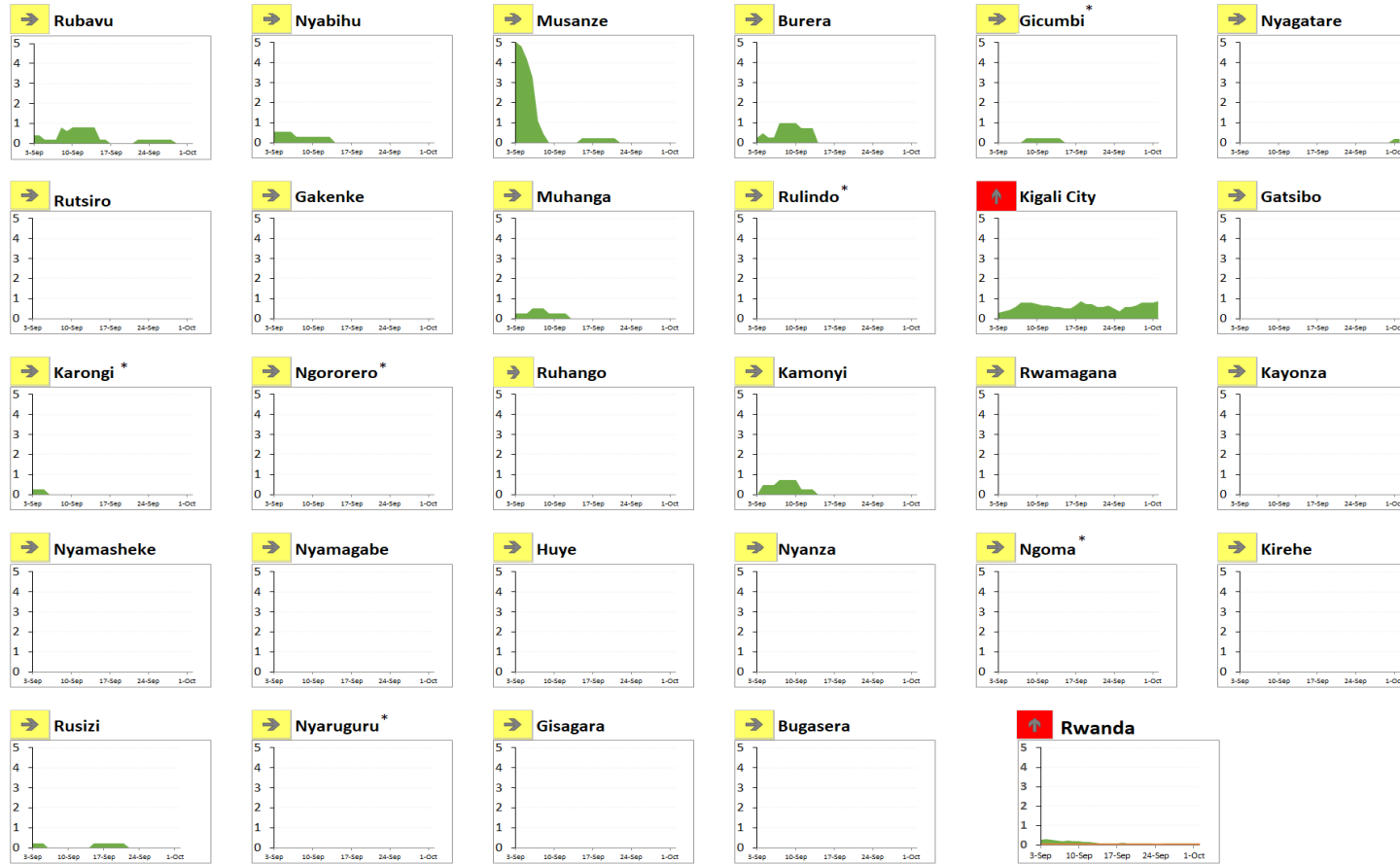
# TREND OF 7-DAY INCIDENCE RATE OF COVID-19

COVID-19 Incidence Rate (IR) in Kigali City and Rwanda, March 14, 2020–October 02, 2022



# TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

COVID-19 Cumulative 7-day (September 26–October 02) Incidence Rate (IR) and Trend (week-to-week % change) in Rwanda, September 03–October 02 (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	↓	1 3%
<b>Stable:</b> > -10% change and <10% change	→	26 87%
<b>Increase:</b> ≥10% change	↑	3 10%

**Observation:** During the week 39, The overall incidence rate of Rwanda was 0.05 case per 100,000 population (Decreased from 0.1 cases per 100,000 population in week 39). All districts of Rwanda presented a very low incidence rate (IR below 5 cases). 25 districts showed a stable incidence rate for this week compared to previous week while 5 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.

Data update as of 02<sup>nd</sup> October 2022 at 22 :00 HRS

	Districts Affected	CASES	Deaths		Recoveries
		Confirmed	Confirmed	Probable	
New	01	02	00	-	00
Total	05	43	09	20	04

### 2. Action to date in Uganda

The Ministry of Health, Districts and Partners in **Uganda** are implementing several outbreak control interventions in Mubende and her 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 and Kassanda region 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 39)

During Week 39, there was 1 death reported from Masaka DH, due to under 5 severe pneumonia

## HEALTH FACILITIES WITH NO REPORTS RECEIVED IN e-IDSr FOR Wk 39

Province	District	Hospital	Health Facility
East	Gatsibo District	Kiziguro DH	Kibondo HC
East	Rwamagana District	Rwamagana DH	Avega Rwamagana HC
Kigali City	Gasabo District	Kibagabaga	Gikomero II HC
Kigali City	Kicukiro District	RMH	Rwanda Military Hospital
North	Gicumbi District	ByumbaDH	Camp Gihembe hc
North	Gicumbi District	ByumbaDH	Gicumbi Prison
North	Rulindo District	Rutongo DH	Muyanaza HC
North	Burera District	Butaro DH	Butaro HC
North	Burera District	Butaro DH	Kinyababa HC
North	Rulindo District	Rutongo DH	Rulindo HC
South	Ruhango District	Gitwe DH	Munanira HC
South	Ruhango District	Gitwe DH	Mwendo(Ruhango) HC
South	Muhanga District	Kabgayi DH	Gikomero(Kabgayi) HC
South	Muhanga District	Nyabikenke DH	Nyabinoni HC
South	Nyanza District	Nyanza DH	Mucubira HC
South	Nyanza District	Nyanza DH	Ntyazo HC
South	Nyanza District	Nyanza DH	Nyabinyenga HC
South	Huye District	Kabutare DH	Mbazi HC
South	Huye District	Kabutare DH	Rusatira-Kinazi HC
South	Nyamagabe District	Kaduha DH	Mushubi HC
West	Ngororero District	Kabaya DH	Sovu HC