

# WEEKLY EPIDEMIOLOGICAL BULLETIN

**Week 41: 10-16 Oct 2022**

Released on: 20<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
- ☞ Polio performance of surveillance indicators

### 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: Wk32 – Wk41)

OVERALL

RWANDA

Completeness – Wk 41: 91%



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

**Observation:** During this week 41, the overall IDSR reports completeness was 91%. However, Rwanda Military Hospital indicated the low level of completeness (Below 60 %) as well as it did not report, also Nyanza DH and Muhima DH have a low completeness (between 60% and 79%). 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: Wk29 – Wk38)

OVERALL

RWANDA

Timeliness – Wk 41: 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 41, the overall IDSR reports timeliness was 88%. The following catchment area indicated the low level of timeliness (Between 60 and 79%): **Rwamagana PH, Gatunda DH, Nyanza DH, Muhima DH** 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 – Wk41: 206,138

Wk41: 3,603

## Flu syndrome cases

Wk01 – Wk41: 664,872

Wk41: 11,425

## Malaria cases

Wk01 – Wk41: 171,827

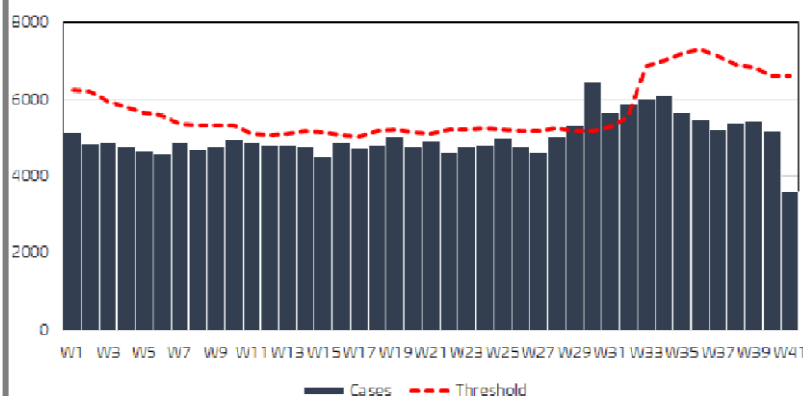
Wk41: 3,251

## Severe Pneumonia cases

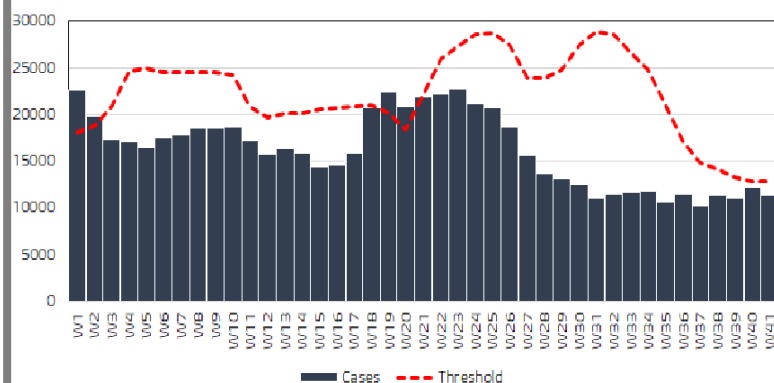
Wk01 – Wk41: 12,573

Wk41: 220

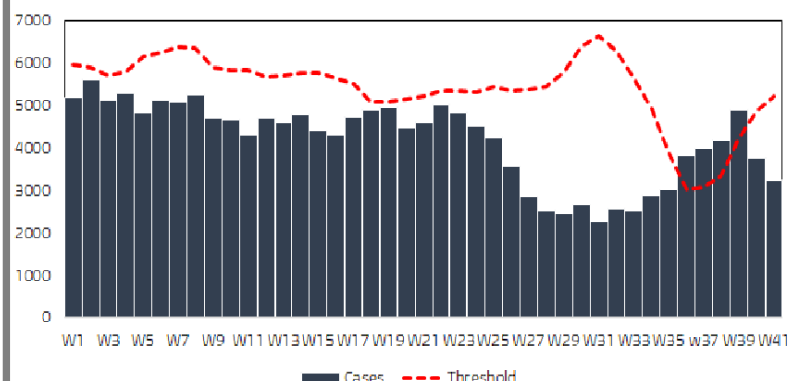
Trend of Non Bloody Diarrhea cases in Rwanda 2022  
(Wk1 - Wk41)



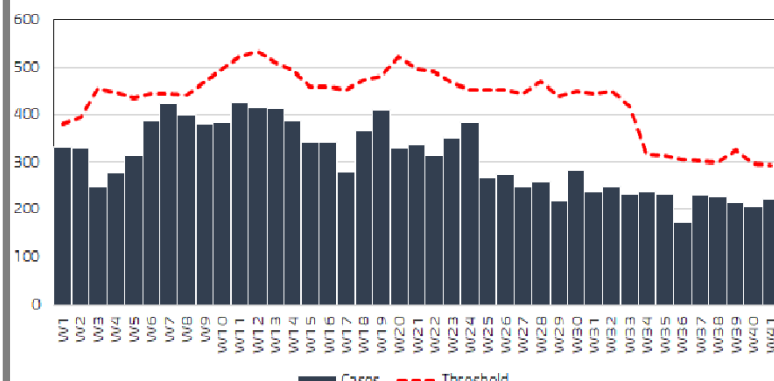
Trend of Non Flu syndrome cases in Rwanda 2022  
(Wk1 - Wk41)



Trend of Malaria cases in Rwanda 2022  
(Wk1 - Wk41)



Trend of Severe pneumonia cases in Rwanda 2022  
(Wk1 - Wk41)



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



# IDSR IMMEDIATE REPORTABLE DISEASES – Wk41

HF	Rabies exposure(Dog/mammals bite)	Acute hemorrhagic fever syndrome	Bloody Diarrhea (Shigellosis)	Foodborne illness	Measles	Rubella
Biryogo CS	0	0	1	0	0	0
CUSP Butare CS	2	0	0	0	0	0
Cyanika (burera) CS	0	0	0	0	1	0
Cyanika (nyamagabe) CS	0	0	1	0	0	0
Gahini CS	9	0	0	0	0	0
Gahini DH	2	0	0	0	0	0
Gakoma CS	0	0	1	0	0	0
Gihundwe DH	1	0	0	0	0	0
Gisenyi DH	1	0	0	0	0	0
Gishubi CS	0	0	1	0	0	0
Gisiza CS	0	0	1	0	0	0
Gitarama CS	0	0	1	0	0	0
Harmony Clin	1	0	0	0	0	0
Islamic (Bugarama) CS	0	0	0	0	1	0
Kabarondo (kayonza) CS	1	0	0	0	0	0
Kageyo I (Kayonza Gahini) CS	0	0	1	0	0	0
Karwasa CS	0	0	0	5	0	0
Katabagemu CS	5	0	0	0	0	0
Kibeho CS	0	0	0	0	1	0
Kibondo CS	2	0	0	0	0	0
Kibungo RH	2	0	0	0	0	0
Kinyamakara CS	1	0	0	0	0	0
Kirarambogo CS	0	0	3	0	0	0
Kirinda DH	0	0	0	0	1	0
Kiziguro DH	3	0	0	0	0	0
Mashesha CS	0	0	0	0	0	1
Matyazo CS	0	0	0	0	1	0
Mibilizi DH	1	0	0	0	0	0
Mugonero CS	0	0	0	0	1	0
Mugonero DH	1	0	0	0	0	0
Mukungu CS	1	0	0	0	0	0
Munyaga CS	1	0	1	0	0	0
Munzanga CS	0	0	0	0	1	0
Murunda CS	0	0	1	0	0	0
Mututu CS	1	0	0	0	0	0
Ndongozi CS	0	0	0	0	1	0
Ngoma CS	0	0	1	0	0	0
Ngoma Prison	0	0	4	0	0	0
Nyabinyenga CS	0	1	0	0	0	0
Nyagatare DH	3	0	0	0	0	0
Nyange (Musanze) CS	1	0	0	0	0	0
Rilima CS	1	0	3	0	0	0
Ruhango CS	0	0	0	0	1	0
Ruli DH	1	0	0	0	0	0
Total	41	1	20	5	9	1

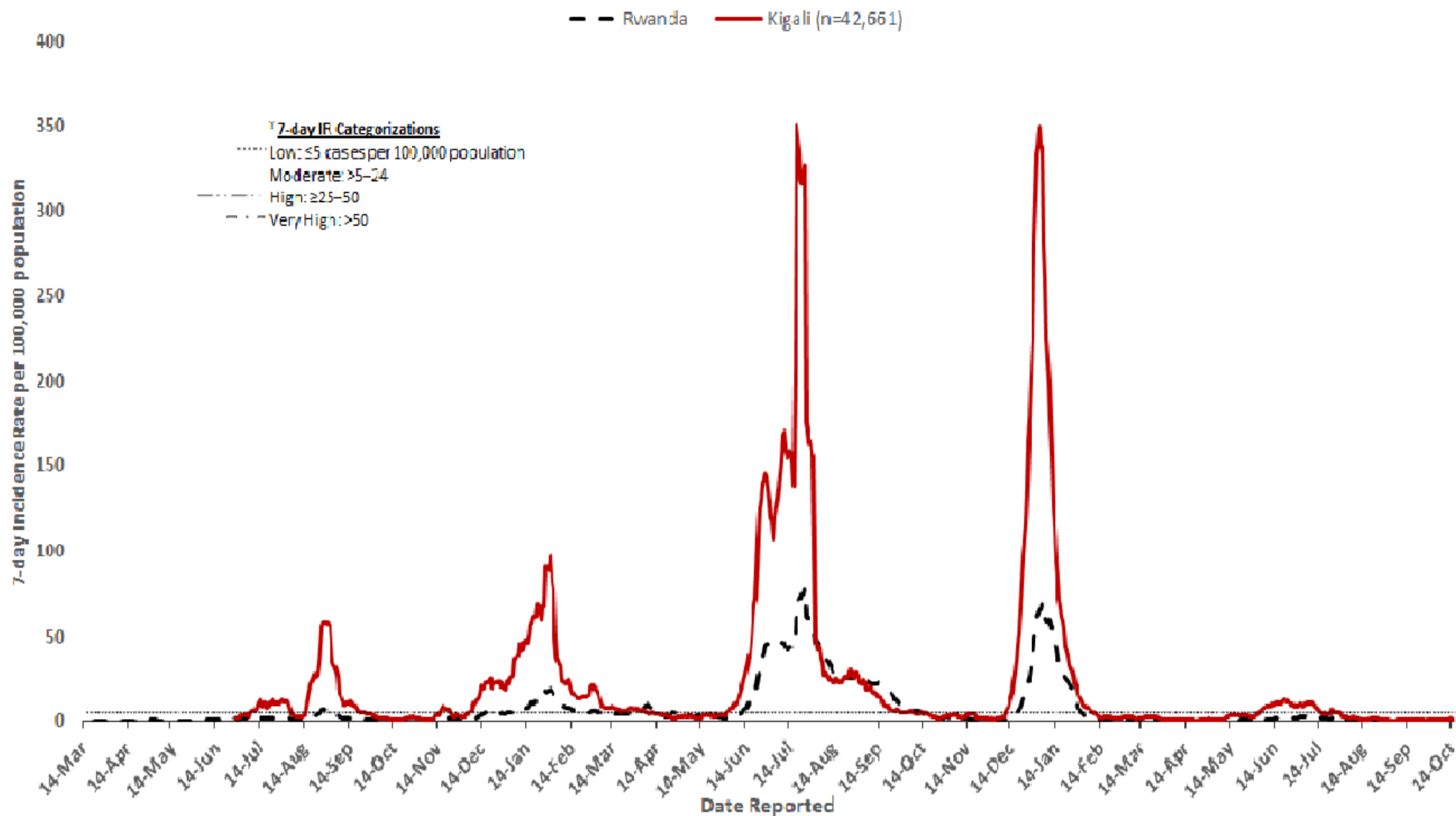
## Alerts

Health facilities	Diseases	Cases	Alert thresholds	Recommendations
Katabagemu HC	Rabies exposure	9	1 case of dog bite	Verify, investigation and reports as soon as possible
Gahini HC	Rabies exposure	5	1 case of dog bite	Verify, investigation and reports as soon as possible
Nyagatare DH	Rabies exposure	3	1 case of dog bite	Verify, investigation and reports as soon as possible
Nyabinyenga HC	AHF	1	1 suspected case	Verify, investigation and reports as soon as possible
Karwasa HC	Foodborne illness	5	2 or more cases	Verify, investigation and reports as soon as possible

**Observation:** During the week 41, the reported IDSR immediate reportable diseases were Rabies, Acute hemorrhagic syndrome, Bloody diarrhea, foodborne illness, Rubella and Measles

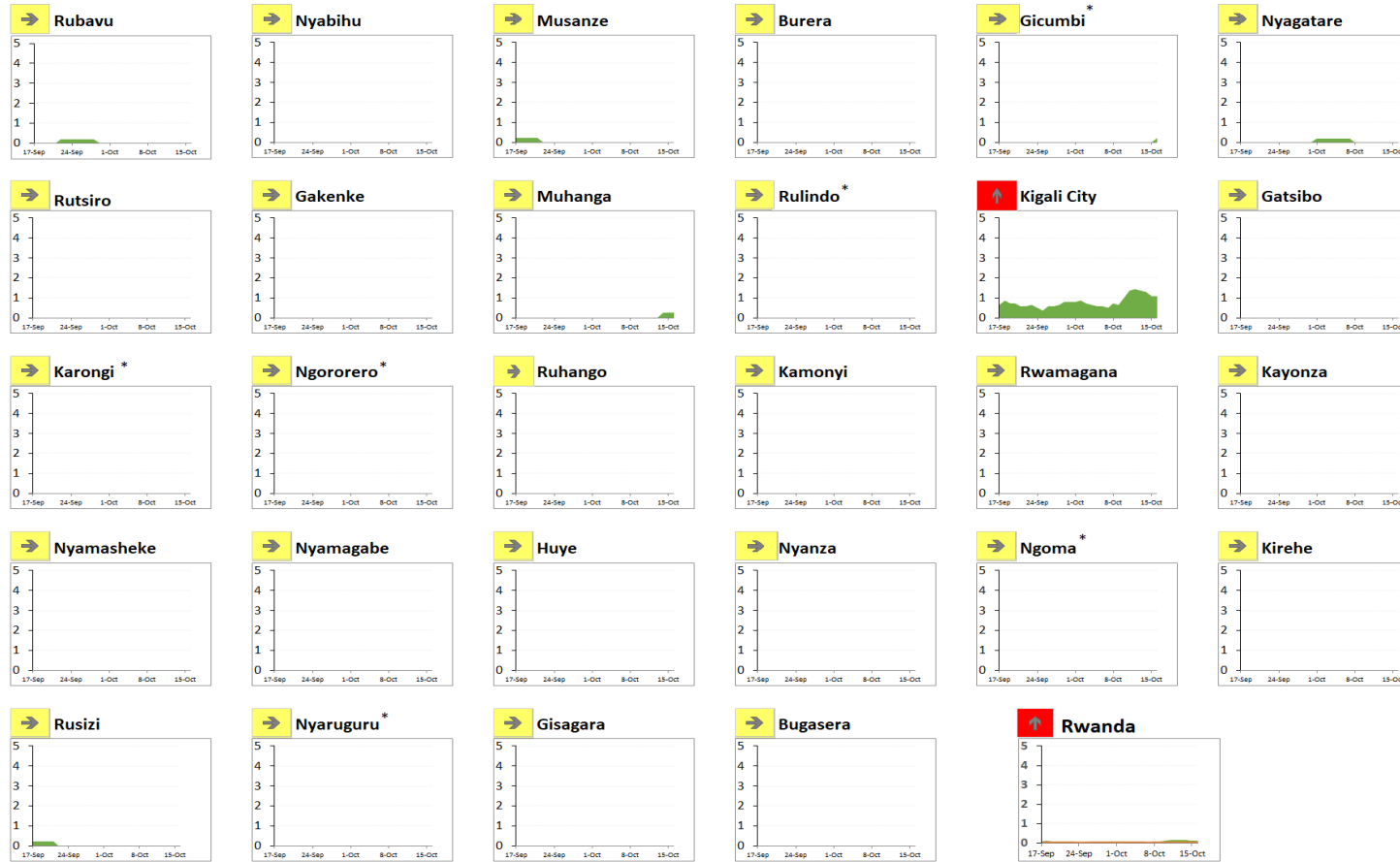
# TREND OF 7-DAY INCIDENCE RATE OF COVID-19

COVID-19 Incidence Rate (IR) in Kigali City and Rwanda, March 14, 2020–October 16, 2022



# TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

COVID-19 Cumulative 7-day (October 10–October 16) Incidence Rate (IR) and Trend (week-to-week % change) in Rwanda, September 17–October 16 (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 41, The overall incidence rate of Rwanda was 0.1 case per 100,000 population (decreased from 0.2 cases per 100,000 population in week 40). 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 16<sup>th</sup> October 2022

	District affected	Cases confirmed	Confirmed deaths	Probable deaths
Total	5	60	23	20

### 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

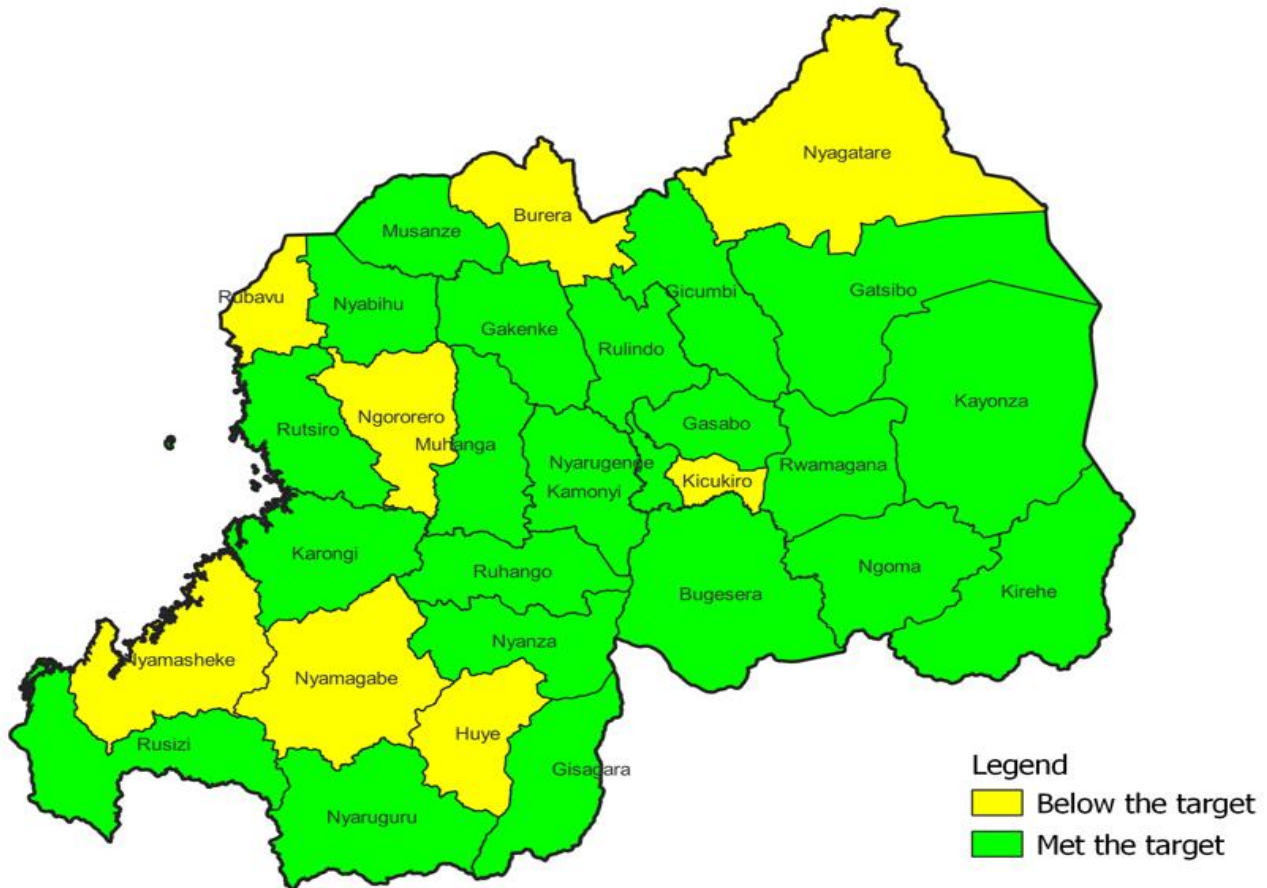
- Activate all command post in all districts
- Temperature screening in all POEs
- Map all people upon entry coming from Mubende, Kyegegwa Kagadi, Bunyangabu and Kassanda region to be quarantined for 21 days
- Community screening for people with symptoms by CHWs
- Awareness to both community and health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



# SUMMARY OF REPORTED DEATHS THROUGH e-IDSr (Wk 41)

During Week 41, there was no death due to reportable disease, however, there was 1 maternal death occurred in CHUK, 23 perinatal deaths and 11 under five deaths occurred in different Hospitals.

## Non-Polio AFP rate by District, Q3\_2022



This map shows the Polio surveillance performance indicators by District as of Q3\_2022.

Rubavu, Ngororero, Nyamasheke, Nyamagabe, Huye, Burera, Kicukiro and Nyagatare Districts have not yet achieved the Polio surveillance performance indicators while other Districts have met them.

Increase AFP case searching and sensitization in Districts with low performance indicators.