

WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 45: 7-13 Nov 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

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.

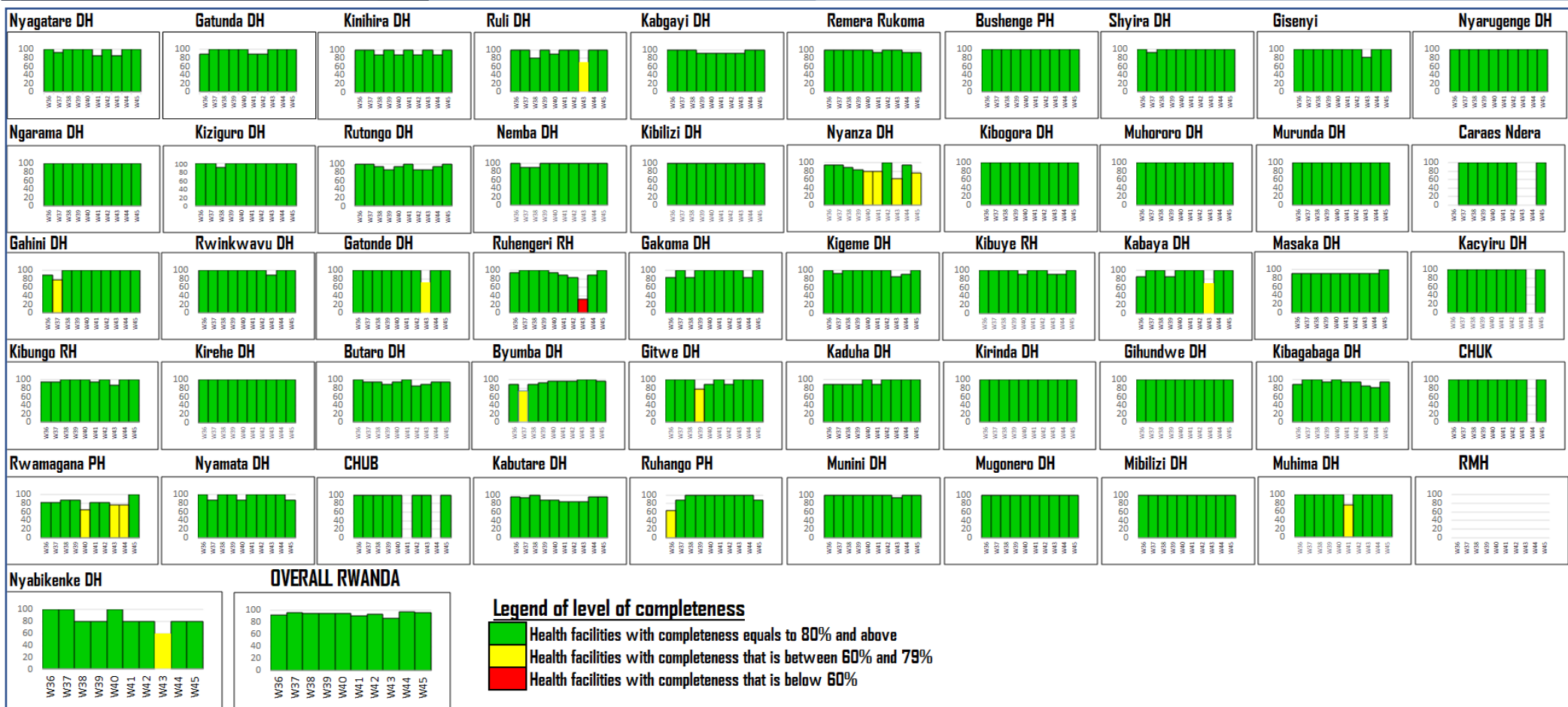
TREND OF IDSR REPORTS COMPLETENESS

(Previous 10 weeks: Wk36 – Wk45)

OVERALL

RWANDA

Completeness – Wk 45: 97%



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

Observation: During this week 45, the overall IDSR reports completeness was 97%. However, two hospitals indicated a low completeness rate: between 60–79%: **Nyanza DH** and **Rwanda Military Hospital** that did not report. We recommend these hospitals 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: Wk36 – Wk45)

OVERALL

RWANDA

Timeliness – Wk 45: 94%



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

During this week 45, the overall IDSR reports timeliness was 94%. However, 4 hospitals indicated a low timeliness rate: between 60-79%: **Nyanza DH, Nyabikenke DH, Ruhengeri RH and Rwanda Military Hospital** that did not report. We recommend these hospitals to conduct the root cause analysis and set measures that will facilitate to report all required reports on time (Monday before 12:00)

IDSR WEEKLY REPORTABLE DISEASES - 2022

Non-Bloody Diarrhea cases

Wk01 – Wk45: 220,772
Wk45: 3,500

Flu syndrome cases

Wk01 – Wk45: 712,103
Wk45: 11,524

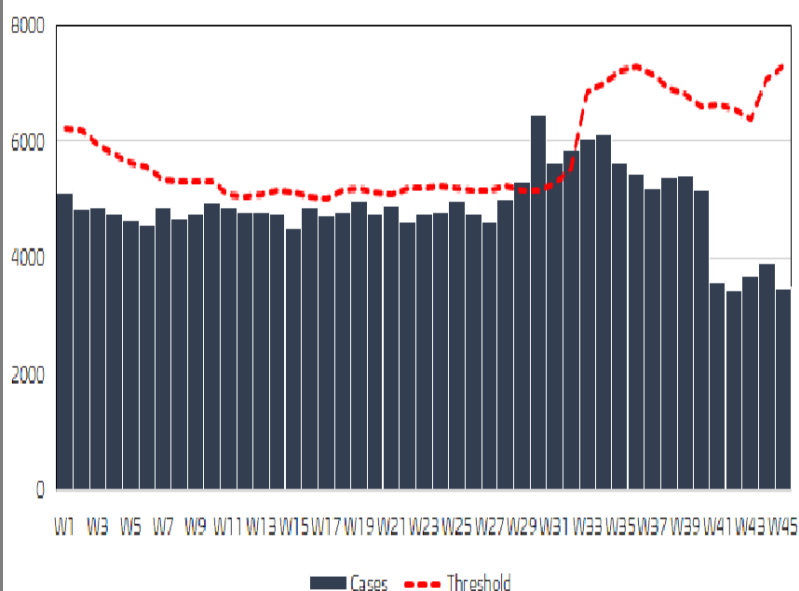
Malaria cases

Wk01 – Wk45: 183,708
Wk45: 3,122

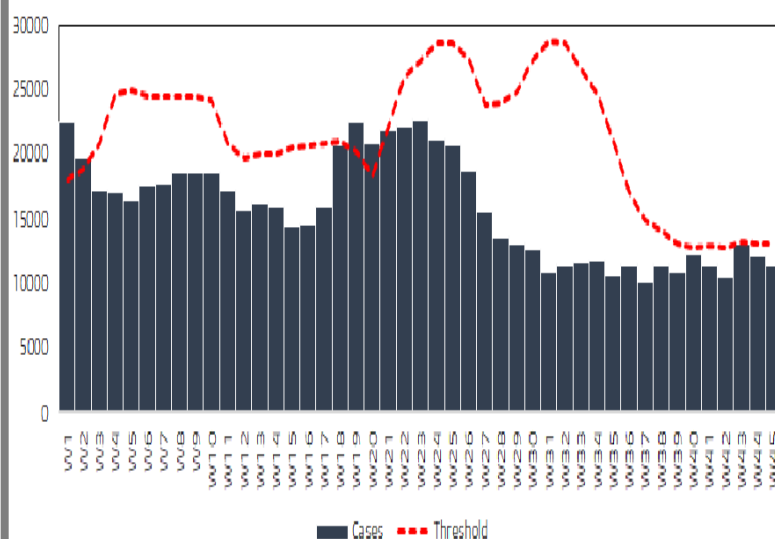
Severe Pneumonia cases

Wk01 – Wk45: 13601
Wk45: 215

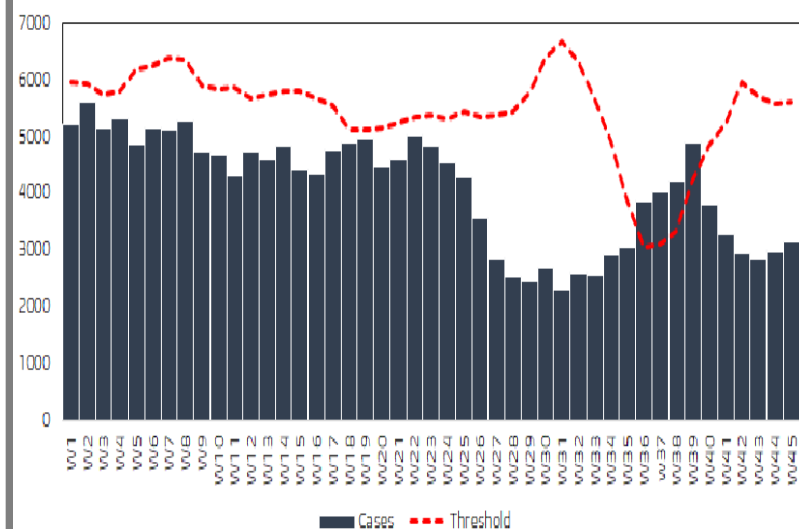
Trend of Non Bloody Diarrhea cases in Rwanda 2022
(Wk1 - Wk45)



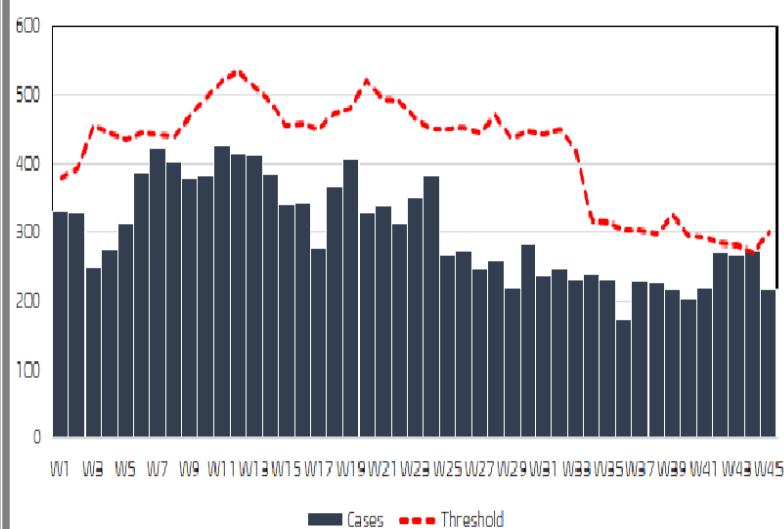
Trend of Flu syndrome cases in Rwanda 2022
(Wk1 - Wk45)



Trend of Malaria cases in Rwanda 2022
(Wk1 - Wk45)



Trend of Severe pneumonia cases in Rwanda 2022
(Wk1 - Wk45)



IDSR WEEKLY REPORTABLE DISEASES - 2022

Covid19 confirmed cases:

Wk 42-45: 110

Wk 45: 32 cases

Rabies exposure (Dog or other mammals bite) cases:

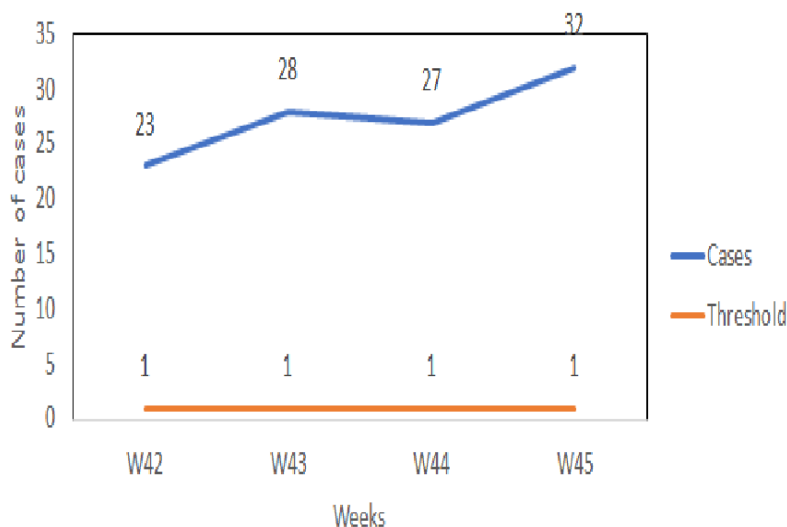
Wk 42-45: 139

Wk 45: 30 cases

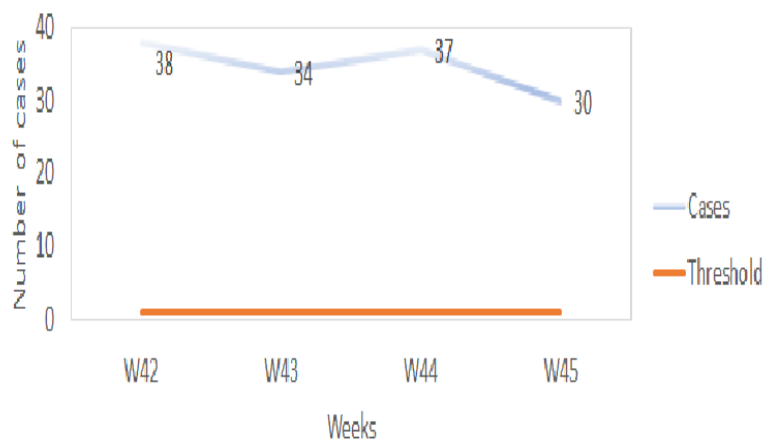
Other weekly reportable diseases:

Brucellosis, Trypanosomiasis
no case

Covid19 confirmed cases in Rwanda 2022
(Wk 42-45)



Rabies exposure cases in Rwanda 2022
(Wk 42-45)



From week 42, IDSR weekly report form revised and adapted on technical guideline 3rd edition was adapted also in DHIS-2, therefore many changes occurred.

In week 45, for 8 weekly reportable diseases, data analysis showed that Covid19 and Rabies exposure crossed the threshold on National level, further investigation should be conducted.

IDSR IMMEDIATE REPORTABLE DISEASES – Wk45

DH	HF	Acute Flaccid Paralysis	Bloody Diarrhea (Shigellosis)	Measles
Nyarugenge	Biryogo CS	0	3	0
Murunda	Crete Congo Nil CS	1	0	2
Kabutare	CUSP Butare CS	0	0	2
Kibogora	Cyivugiza (Nyamasheke) CS	0	0	2
Gihundwe	Gihundwe CS	0	0	1
Rwinkwavu	Kabarondo (kayonza) CS	0	1	0
Kigeme	Kibirizi (Nyamagabe) CS	0	1	0
Ruhango	Kigoma CS	0	1	0
Kabutare	Matyazo CS	0	0	1
Rutongo	Remera-mbogo CS	0	0	1
Byumba	Ruhenda CS	0	1	0
	Total	1	7	9

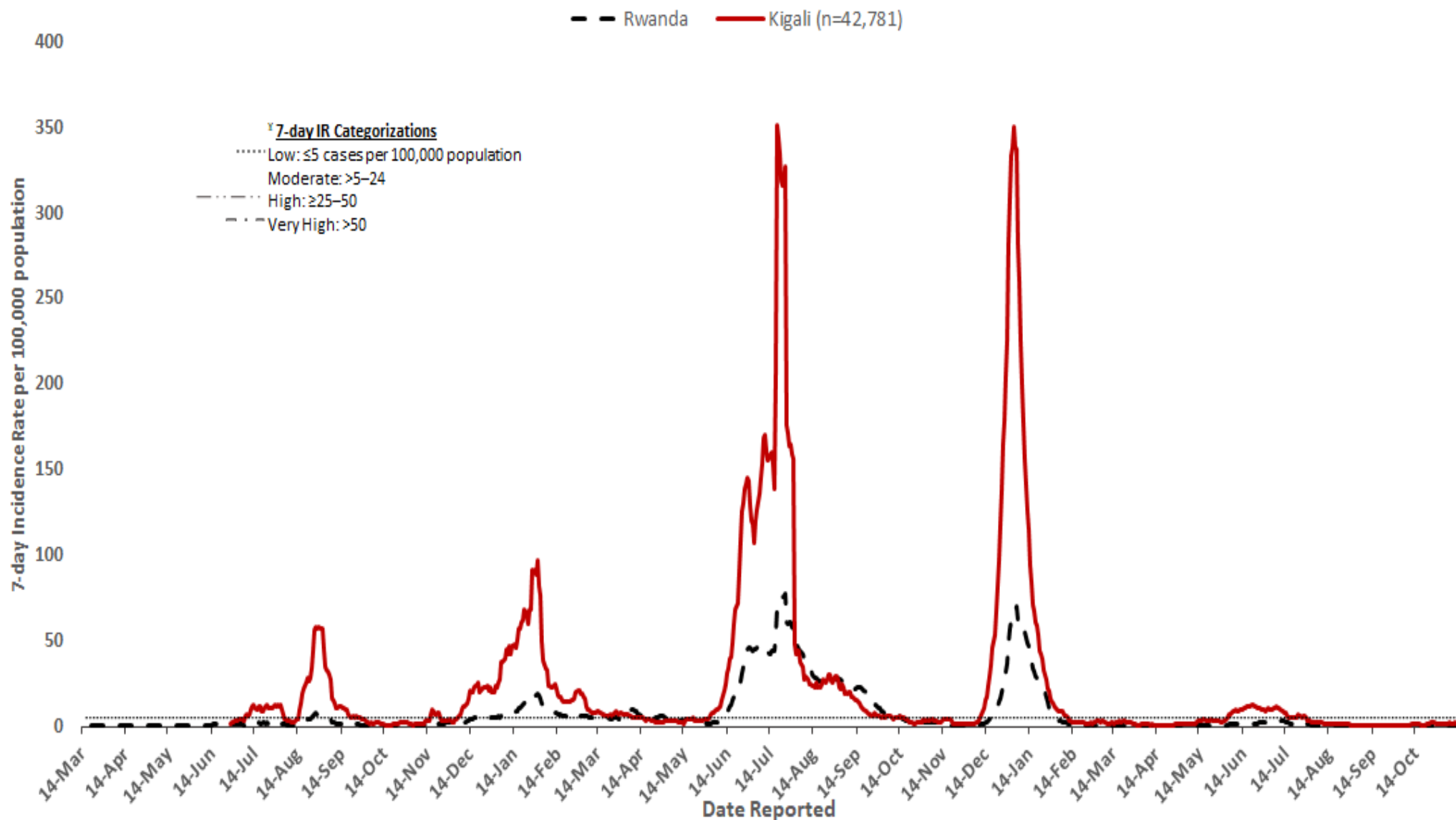
Alerts

During the week 45, the reported immediate diseases that crossed the threshold was AFP with 1 case, as well as all the threshold is 1 suspected case.

Observation: During the week 45, the reported IDSR immediate reportable diseases were AFP, Bloody diarrhea and Measles.

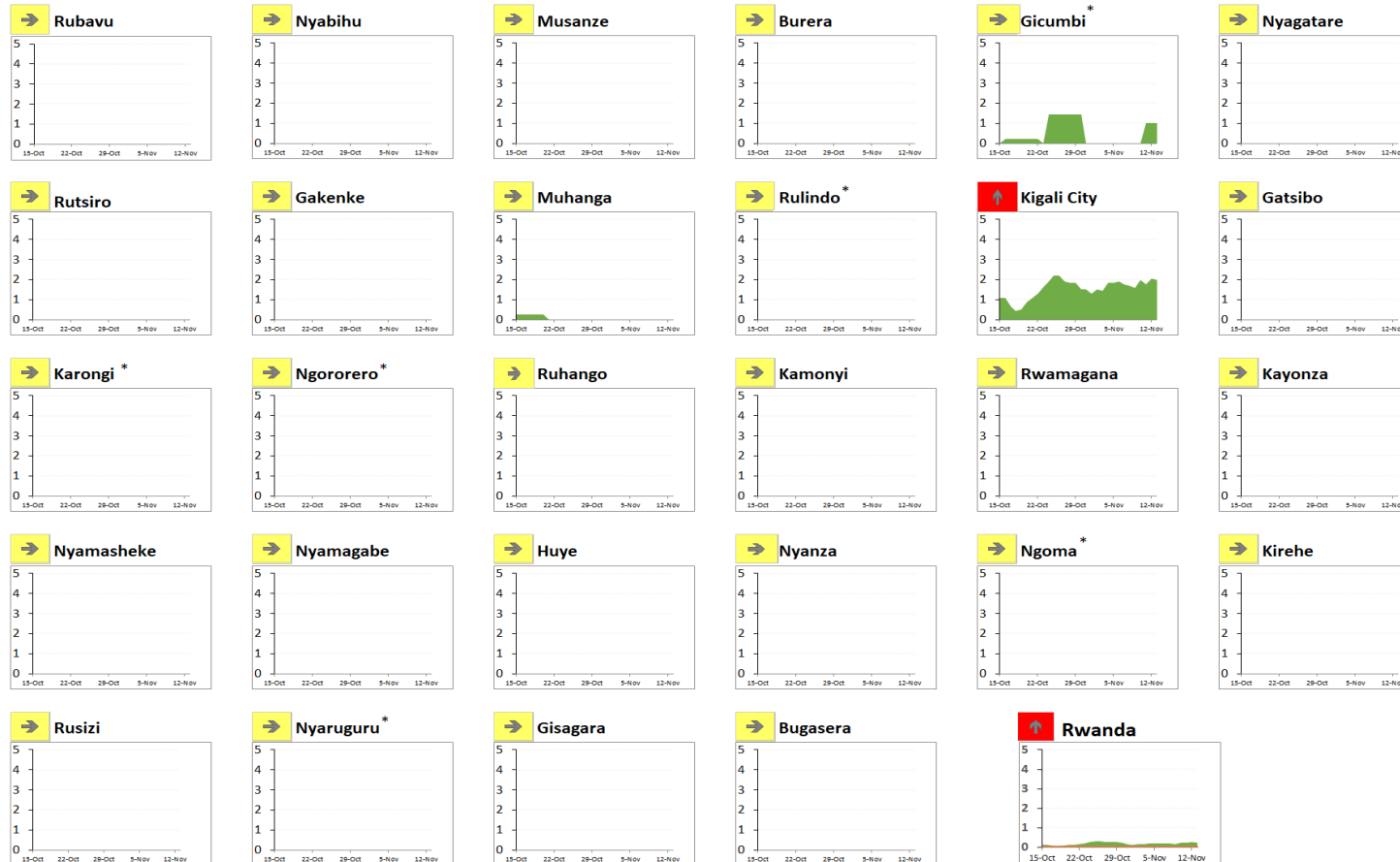
TREND OF 7-DAY INCIDENCE RATE OF COVID-19

COVID-19 Incidence Rate (IR) in Kigali City and Rwanda, March 14, 2020–November 13, 2022



TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

COVID-19 Cumulative 7-day (November 07–November 13) Incidence Rate (IR) and Trend (week-to-week % change) in Rwanda, October 15–November 13 (30 days), 2022



	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	↓	5 17%
Stable: > -10% change and <10% change	→	25 83%
Increase: ≥10% change	↑	0 0%

Observation: During the week 45, The overall incidence rate of Rwanda was 0.3 case per 100,000 population (it increased compared with previous week: 0.2 cases per 100,000 population in week 44). 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 13th November 2022 marks 58 days of response to the EVD outbreak,
- first case was confirmed on 19-Sep 2022.
- Within the past 24 hours, one newly confirmed EVD case was registered
 - 23yr old female healthcare worker from Eastern Division, Mubende District.
- Case Fatality Ratio (CFR) among confirmed cases is 55/140 (39%).
- A total of 1,086 contacts actively being followed-up in seven districts,
- follow-up rate in the past 24 hours was 90%.

Date update as of 13th November 2022

	District affected	Cases confirmed	Confirmed deaths& probable deaths	Recoveries
Total	9	140	55 & 22	69

2. Action to date in Uganda

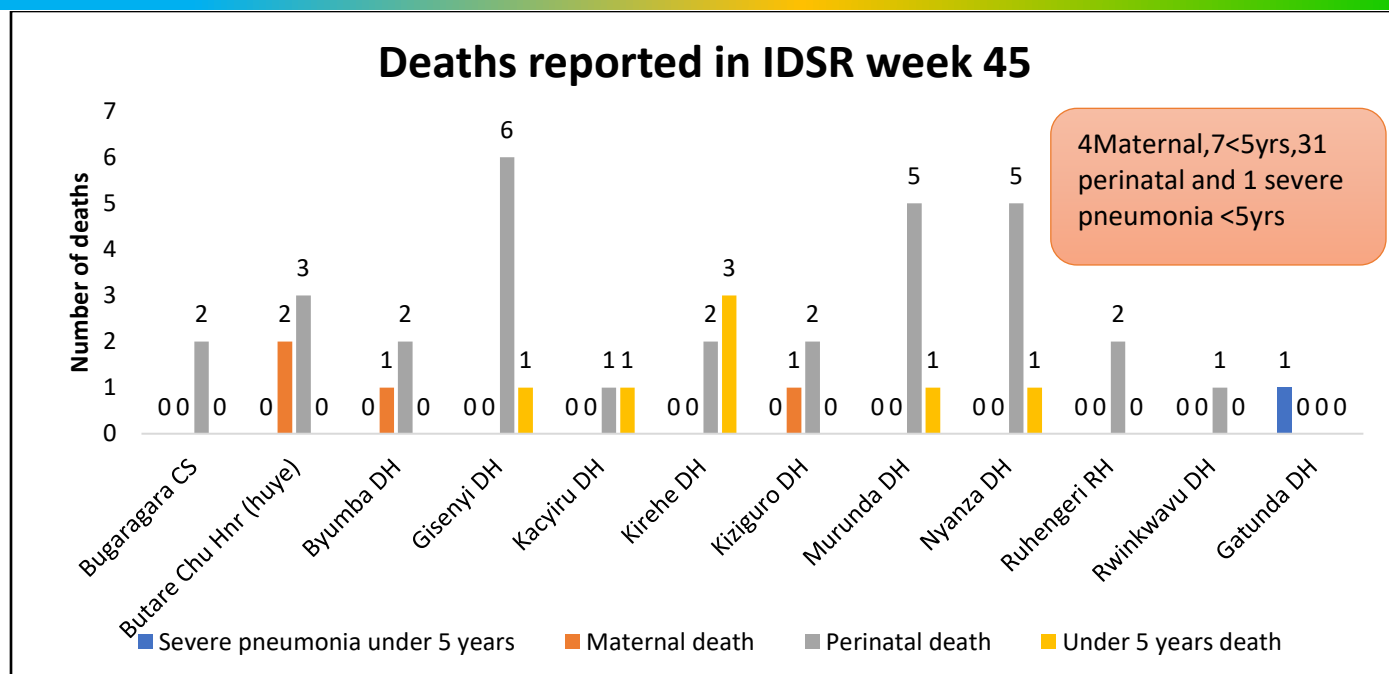
The Ministry of Health, Districts and Partners in **Uganda** are implementing several outbreak control interventions in affected and surrounding districts to contain the disease spread.

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, Masaka, Jinja 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 45)



The death audit should be conducted in health facilities for determining the cause of those deaths and elaborate recommendations for reducing those which should be preventable.

HEALTH FACILITIES WITH NO REPORTS RECEIVED IN e-IDSR FOR Wk 45

Hospitals	Health facilities name
Butaro	Ruhunde CS
Kabutare	Mbazi CS
Rwanda Military Hospital	Rwanda Military Hospital
Nyabikenke	Nyabinoni CS
Nyamata	Gakurazo CS
	Nyarugenge CS
Nyanza	Mututu CS
	Ntyazo CS
	Nyanza Prison
	Nyarusange (nyanza) CS
Remera Rukoma	Kayumbu CS
Ruhango	Kizibere CS
Ruhengeri	Busogo CS
	Kinigi CS
	Nyakinama CS