# WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 48: 28 Nov-4 Dec 2022

Released on: 8th December 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

#### 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.

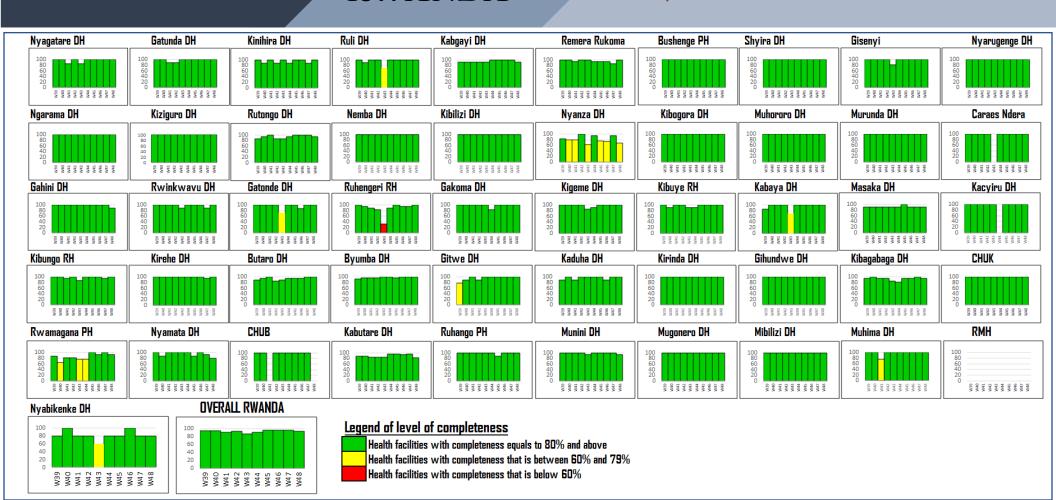
### TREND OF IDSR REPORTS COMPLETENESS

(Previous 10 weeks: Wk39 - Wk48)

# **OVERALL**

### **RWANDA**

Completeness - Wk 48: 96%



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

**Observation:** During this week 48, the overall IDSR reports completeness was 96%. However, Nyanza DH had a low completeness (between 60% and 79%), while **Rwanda Military Hospital** did not report. We recommend those hospitals to conduct the root cause analysis and set measures that will facilitate to report all required reports.

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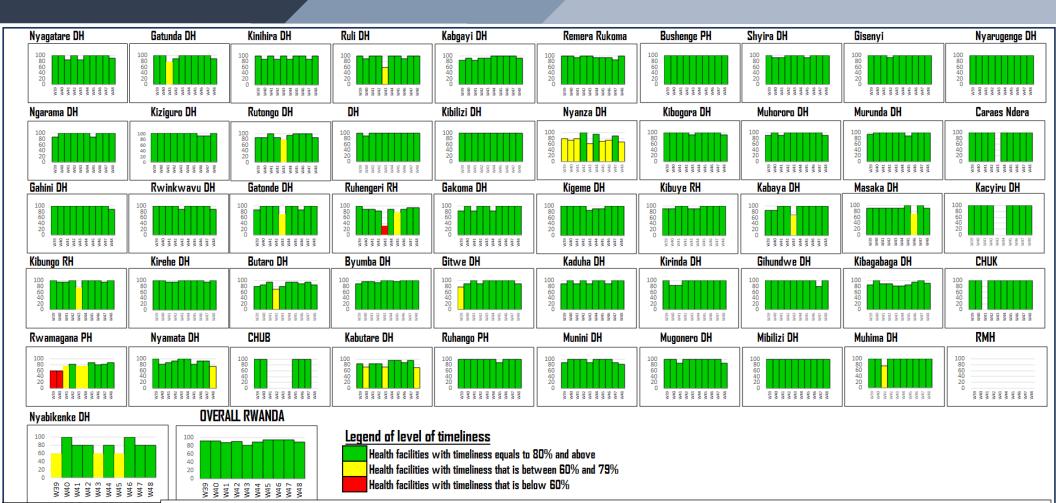
### TREND OF IDSR REPORTS TIMELINESS

(Previous 10 weeks: Wk39 - Wk48)

### **OVERALL**

### **RWANDA**

Timeliness - Wk 48: 93%



Timeliness is calculated as the proportion of received reports on time over the expected reports by week in a catchment area During this week 48, the overall IDSR reports timeliness was 93%. However, 3 hospitals indicated a low timeliness rate: between 60-79%: **Nyanza DH, Nyamata DH, Kabutare DH** while **Rwanda Military Hospital** 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)

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## **IDSR WEEKLY REPORTABLE DISEASES - 2022**

Non-Bloody Diarrhea cases Wk01 – Wk48: 230,478 Wk48: 3,176

8000

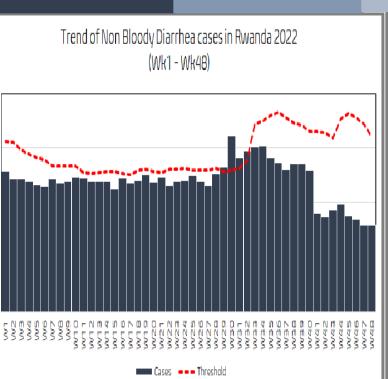
6000

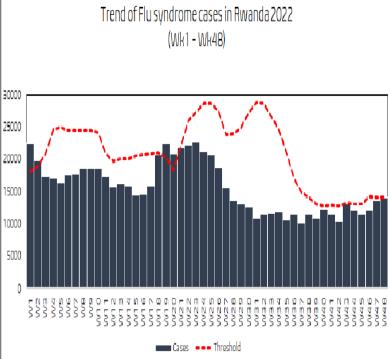
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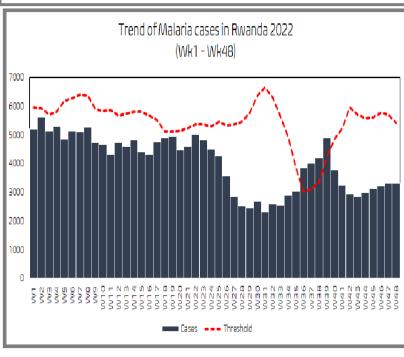
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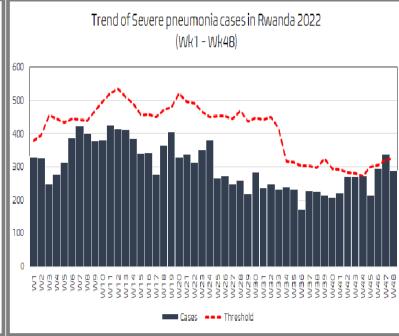
Malaria cases
Wk01 – Wk48: 193,579
Wk48: **3,318** 

Severe Pneumonia cases Wk01 – Wk48: 14,524 Wk48: 289











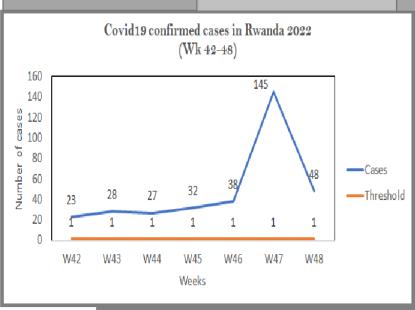
# IDSR WEEKLY REPORTABLE DISEASES -Week 48 2022

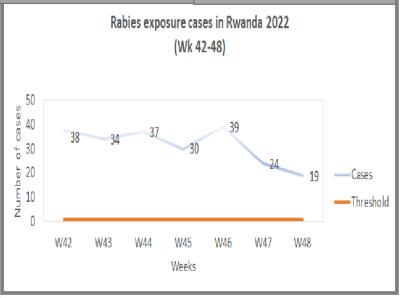
Covid19 confirmed cases: Wk 42-48:341 Wk 48: 48 cases Rabies exposure (Dog or other mammals bite) cases:

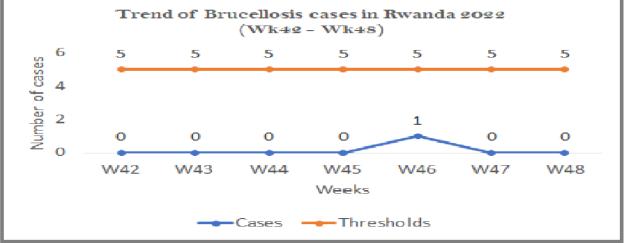
Wk 42-48: 221 Wk 48: 19 cases Brucellosis cases Wk 42-48:1case

**W**k 48:0 case

Other weekly reportable diseases
Trypanosomiasis
no case







From 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.

In week 48, for 8 weekly reportable diseases, data analysis showed that Flu syndrome cases increased even if it did not cross a threshold, while other diseases decreased.



# IDSR IMMEDIATE REPORTABLE DISEASES – Wk48

		Bloody Diarrhea		Typhoid	
DH	HFs	(Shigellosis)	Measles	Fever	Severe malaria
Nyarugenge	Biryogo CS	6	0	0	0
Byumba	Byumba DH	0	0	3	0
Muhima	Cor-unum CS	0	3	0	0
Kigeme	Cyanika (nyamagabe) CS	1	0	0	0
Kibungo	Gasetsa CS	0	0	0	0
Butaro	Gatebe CS	2	0	0	0
	Gisagara CS	2	0	0	0
Kibilizi	Kibilizi DH	0	0	0	3
Gitwe	Karambi (ruhango) CS	0	1	0	0
Masaka	Masaka CS	0	1	0	0
Muhororo	Muhororo DH	1	0	0	0
Kigeme	Ngara CS	0	1	0	0
Remera Rukom	Nyagihamba CS	0	1	0	0
	Ruhuha CS	0	1	0	0
Nyamata	Ntarama CS	0	0	0	1
Kinihira	Rukozo CS	0	4	0	0
Gakoma	Gakoma DH	0	0	0	1
Murunda DH	Murunda DH	0	0	0	2
Rutongo DH	Rutongo DH	0	0	0	1
	Total	12	12	3	8

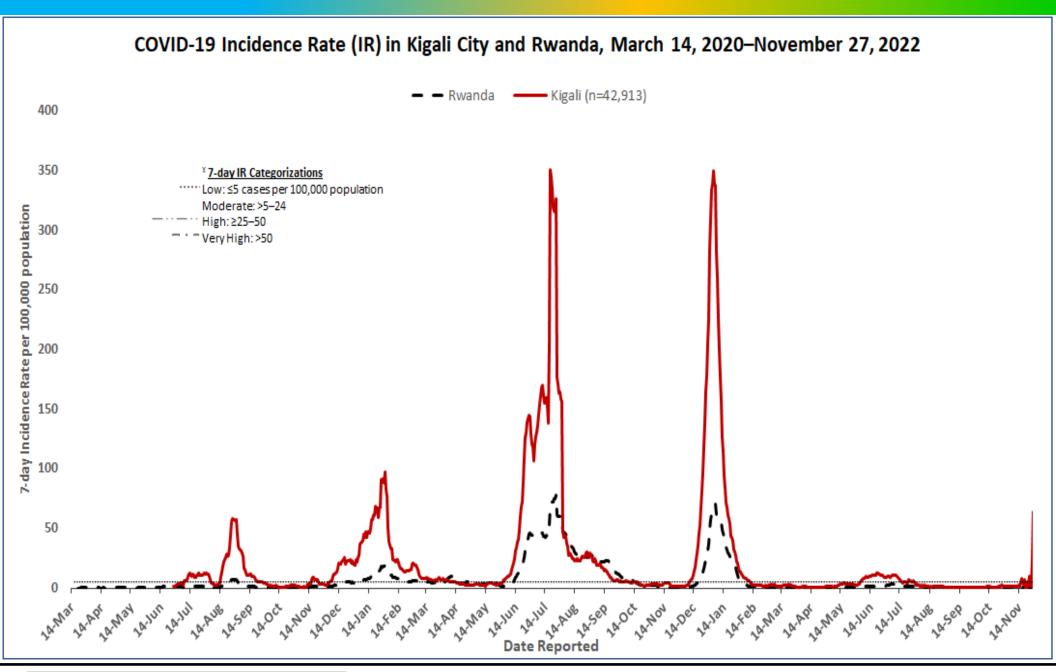
		Alerts	
Disease	Case	Alert threshold	Recommendations
AFP	3		Verify, investigate and reports as soon as possible
Severe malari	8	1 case	Verify, investigate and reports as soon as possible

Observation: During the week 48, the reported IDSR immediate reportable diseases were Bloody diarrhea, Measles, Typhoid fever and severe malaria



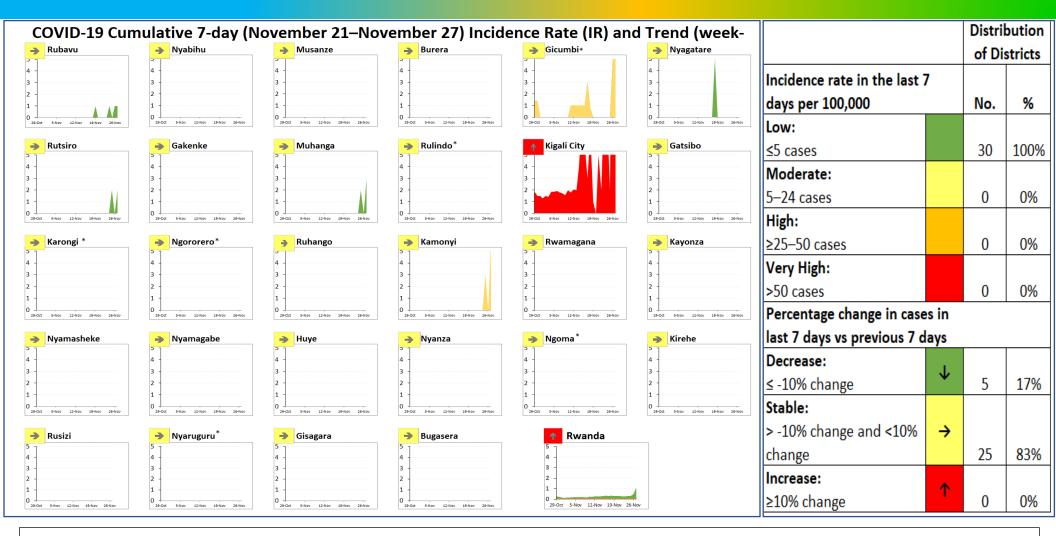


# TREND OF 7-DAY INCIDENCE RATE OF COVID-19





# TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS



**Observation:** During the week 48, The overall incidence rate of Rwanda was 0.4 case per 100,000 population (it highly decreased compared with previous week: 1.1 cases per 100,000 population in week 47). Kigali City presented a very highest incidence rate (IR above 5 cases) and Gicumbi. Rubavu, Nyagatare, Rutsiro, Muhanga and Kamonyi districts presented also an the cases, while other districts did not have cases for this week.



# **UPDATE ON EBOLA VIRUS DISEASE**

# Ebola virus disease in Uganda

### 1. Key highlights

- > first case of Covid19 was confirmed on 19-Sep 2022.
- > On 4<sup>th</sup> December 2022 marks 79 days of responding to the EVD outbreak, and 04 days since the last confirmed case. Within the past 24 hours, there was no new confirmed case, no deaths or recoveries.
- However, following a data reconciliation exercise between case management and surveillance, one case previously classified as 'dead' is re-classified as 'recovered'.
- Case Fatality Ratio (CFR) among confirmed cases still stands 55/142 (39%).
- A total of 46 contacts actively being followed-up in four districts, follow-up rate in the past 24 hours was 100%.

Date update as of 4 <sup>th</sup> December 2022				
	District affected	Cases confirmed	Confirmed deaths	Recoveries
Total	9	142	55	87

# 2. Action to date in Uganda

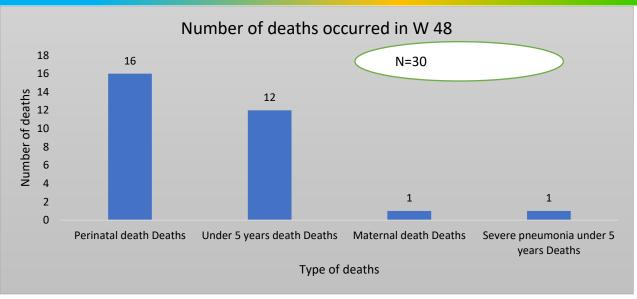
3. Key strategies ongoing for Ebola Virus outbreak preparedness in Rwanda

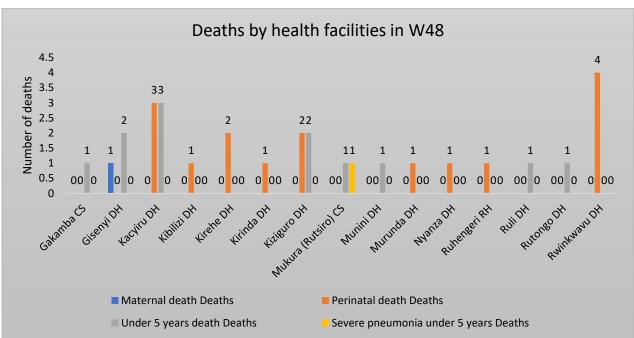
The Ministry of Health, Districts and Partners in **Uganda** are implementing several outbreak control interventions in affected and surrounding districts to contain the disease spread.

### 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 48)





In week 48, perinatal deaths had a highest number (16), especially in Rwinkwavu(4) and Kacyiru(3), 12 deaths of under 5 years,1death due to Severe pneumonia and 1 maternal death. 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 48

District hospital	Health facily name	
Gahini	Rukara CS	
Gitwe	Munanira CS	
Kabgayi	Rutobwe CS	
Kabutare	Butare Chu Hnr (huye)	
	Mbazi CS	
	Ruhashya CS	
Masaka	Rwanda Military Hospital	
Munini	Muganza CS	
Nyabikenke	Nyabinoni CS	
Nyamata	Mwogo CS	
	Ngeruka CS	
	Nyamata DH	
Nyanza	Busoro CS	
	Ntyazo CS	
	Nyamure CS	
	Nyarusange (nyanza) CS	
	Ruyenzi CS	
Rutongo	Cyinzuzi CS	
Rwamagana	Ruhunda CS	