WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 12: From 20th to 26th March 2023

Released on: 30th March 2023



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.

Overview

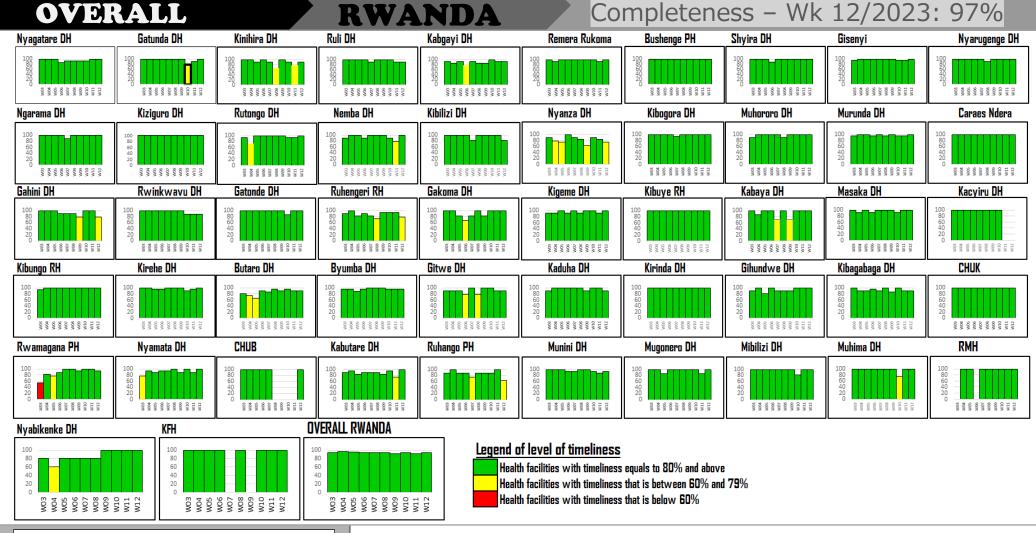
This Weekly Bulletin focuses on diseases under surveillance in Rwanda. This week's articles cover:

- Reports completeness
- Reports timeliness
- Trend of weekly reportable diseases
- Distribution of immediate reportable
 diseases
- Key highlights of the week
- COVID-19 situation



TREND OF IDSR REPORTS COMPLETENESS

(Previous 10 weeks: Wk 03-Wk 12/2023)



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

Observation: During the week 12/2023, the overall IDSR reports completeness was 97%. However, Nyanza and Gahini DHs as well as Ruhengeri RH and Ruhango PH had a low reporting completeness (between 60% and 79%). Other hospitals had a good reporting rate of completeness (equals and above 80%). The hospitals with a low reporting completeness are recommended to submit all required reports.

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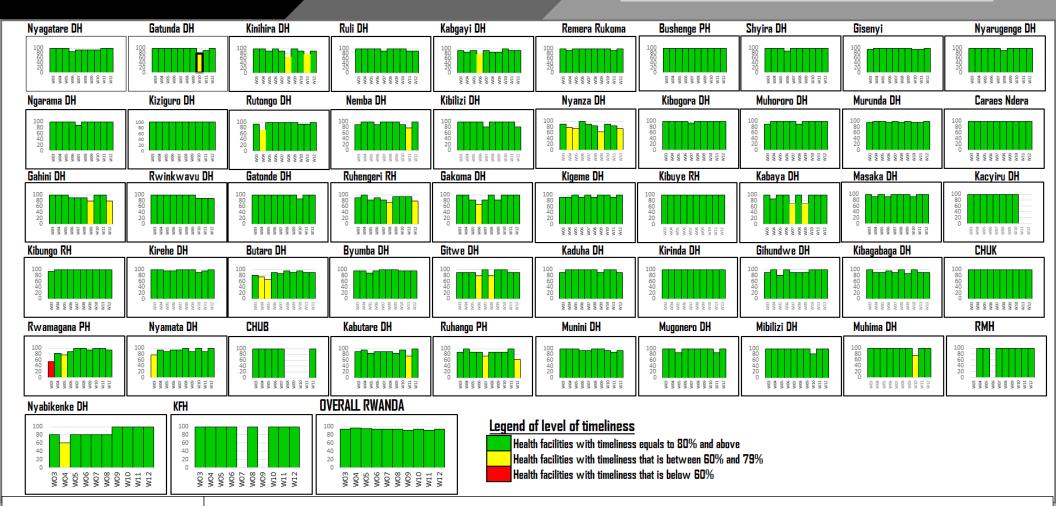
TREND OF IDSR REPORTS TIMELINESS

(Previous 10 weeks: Wk 03- Wk12/2023)

OVERALL

RWANDA

Timeliness - Wk 12/2023: 95%



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 12/2023, the overall IDSR reports timeliness was 95%. %. However, Nyanza and, Gahini DHs as well as Ruhengeri RH and Ruhango PH had a low reporting timeliness (raging between 60% and 79%), Kacyiru had a very low timeliness (below 60%), while other hospitals had a good reporting rate of completeness (equals or above 80%). The hospitals with a low reporting timeliness are recommended to submit on time all required reports(Monday before 12:00)

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IDSR WEEKLY REPORTABLE DISEASES week 03 to week 12/2023

Non-Bloody
Diarrhea cases
Wk03 - Wk12/2023:
33,817
Wk11: 3,303

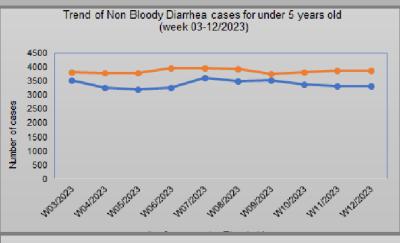
Flu syndrome cases
Wk03 - Wk12/2023:
166,861
Wk12: 14,155

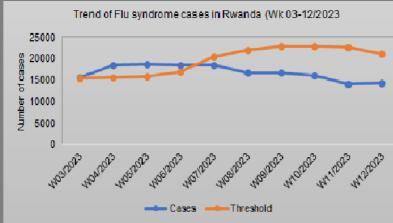
Malaria cases Wk03 - Wk12/2023: 20,741 Wk12: 2,254 Severe Pneumonia Rabies exposure (Dog bite) cases:

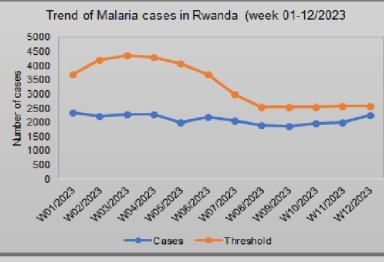
Wk03 - Wk12/2023: 4,660

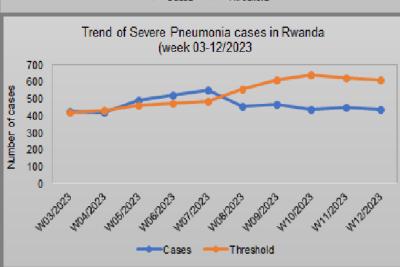
Wk12: 438

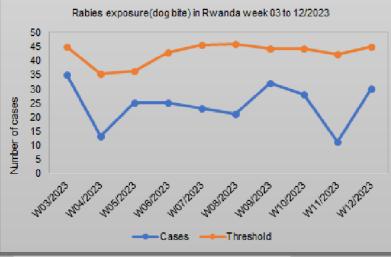
Wk12: 30











During the week 12/2023, no weekly reportable disease (WRD) crossed the thresholds. However, the trend of malaria showed an increase of cases in this week, compared with the previous weeks, and that required a particular monitoring. No case reported for Brucellosis and Trypanosomiasis.

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IDSR IMMEDIATE REPORTABLE DISEASES

Week 12/2023

	'	Acute		Bloody				
1	1	hemorrhagic	Bacterial	Diarrhea			Typhoid	Severe
Hospital	Organisation unit name	fever syndrome	Meningitis	(Shigellosis)	Cholera	Measles	Fever	malaria
Nyarugenge	Biryogo CS	0	0	2	0	0	0	0
Kabutare	Butare Chu Hnr (huye)	0	2	0	0	0	0	0
Byumba	Byumba DH	0	0	0	0	0	0	1
Kibagabaga	Deus Est Neuro-Rehabilitation	0	0	0	0	0	2	0
Gakoma	Gakoma CS	0	0	1	0	0	0	0
Gakoma	Gikonko (Gisagara) CS	0	0	1	0	0	0	0
Gisenyi	Gisenyi DH	0	0	0	1	0	0	0
Gakoma	Gishubi CS	0	0	3	0	0	0	0
Mugonero	Gisovu CS	0	0	0	0	1	0	0
Kabaya	Kabaya DH	0	0	0	0	0	0	1
Nemba	Karambo (gakenke) CS	0	0	1	0	0	0	0
Kibogora	Kibogora DH	0	0	0	2	0	0	0
Masaka	Kicukiro CS	0	0	0	0	3	0	0
Kigeme	Kigeme DH	0	0	0	0	0	0	1
Kiziguro	Kiziguro DH	2	0	0	0	0	0	0
Kirehe	Mahama Refugee Camp HC	0	0	0	0	6	0	0
Kirehe	Mahama Refugee Camp II HC	0	0	0	0	2	0	0
Masaka	Masaka DH	0	0	0	0	0	0	1
Gatunda	Mimuri CS	0	0	0	0	1	0	0
Butaro	Ndongozi CS	0	0	0	0	1	0	0
Nemba	Nemba CS	0	0	0	0	1	0	0
Muhororo	Ntobwe CS	0	0	1	0	0	0	0
Kigeme	Nyamagabe CS	0	0	0	0	1	0	1
Muhima	Polyclinique de l'Etoile	0	0	0	0	0	1	0
Gisenyi	Sainte Immaculee Clin	0	0	0	0	0	3	0
Mibilizi	Wibabara DISP	0	0	2	0	0	0	0
	Total	2	2	11	3	16	6	5

Alerts

Diseases	Cases	Alert threshold	Recommendations		
			Continue the		
			surveillance,even if the		
AHF	2	1suspected case	labo result was negative		
Cholera	3	1suspected case	Continue the surveillance		
Severe malaria	5	1confirmed case	Continue the surveillance		

Observation: During the week 12/2023, cases of immediate reportable diseases (IRD) notified include: Acute hemorrhagic Fever syndrome (AHF), Bloody diarrhea, Measles, Typhoid fever and severe malaria. Except severe malaria, other cases were suspected; samples were taken and sent to NRL for testing.

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Key highlights in week 12/2023

ONGOING OUTBREAKS

I. In Rwanda

1. Measles outbreak in Rubavu and Kirehe districts:

- > In Epi week 12, measles outbreaks were still ongoing in Rubavu and Kirehe districts.
 - o In Rubavu District, no additional case was confirmed during the Epi week 12. As of 26 March, 23 measles cases have been identified including 8 cases laboratory confirmed and 15 cases confirmed by epidemiological link.
 - o In Kirehe district, 5 additional cases were identified in Mahama Refugee camp by epidemiological link and no one is vaccinated for measles. As of 26 March, the district totalizes 29 measles. Eight (8) cases are laboratory confirmed and 21 cases are confirmed by epidemiological link.

2. Cholera outbreak Nyamasheke district:

> Since 27th February 2023, the Cholera outbreak is ongoing in Kibogora DH catchment area. During the Epi week 12; four (4) new cases were identified (1 case is laboratory confirmed, and 3 cases were confirmed by epidemiological link). As of 26 March 2023;7 cholera confirmed cases were identified at Kibogora DH area.

II. In neighboring countries

- 1. The Ministry of Health in Republic of Tanzania declared an outbreak of Marburg virus disease (MVD) on 21 March 2023, in Bukoba district of Kagera region. 8 cases were confirmed including 5 deaths.
- 2. Burundi reported a case of type 2 vaccine-derived polio linked to the novel oral polio vaccine type 2 (nOPV2). The main risks associated with cVDPV2 in Burundi are gaps in routine immunization.

Actions taken to respond to the outbreaks.

For Measles outbreaks

- Continuous active cases search,
- Case management of patients (treatment, isolation),
- measles vaccinationcampaign

For Cholera outbreak:

Community
 sensitization for
 hygiene and
 sanitation

Public health actions for MVD and Polio outbreaks prevention and control:

MVD outbreak Tanzania: MoH is coordinating a response to the outbreak with the support of partners. Rapid response teams were deployed from district and regional levels to conduct investigations, infection control measures and other measures.

Rwanda Preparedness: puts in place preventive measures including temperature screening at all points of entry for passengers coming in Rwanda, reinforced VHF surveillance in all health facilities and updated the MVD preparedness and contingency plan.

Polio outbreaks in Burundi: Local and national health authorities, supported by Global Polio Eradication Initiative (GPEI) partners, are conducting a risk assessment and further investigations to determine the extent of the outbreak and to guide the response and polio vaccination campaign in the coming weeks, to protect all eligible children (ages 0-7) from the virus and continue other measures in collaboration with neighboring countries.

Rwanda preparedness: reinforced awareness in public and health facilities, conducted polio surveillance risk assessment to identify gaps and strategies to address them are implemented. A plan of polio surveillance in the context of nopv2 use in Rwanda was developed and Polio outbreak response plan is under revision.

TREND OF INCIDENCE RATE OF COVID-19 in week 12/2023

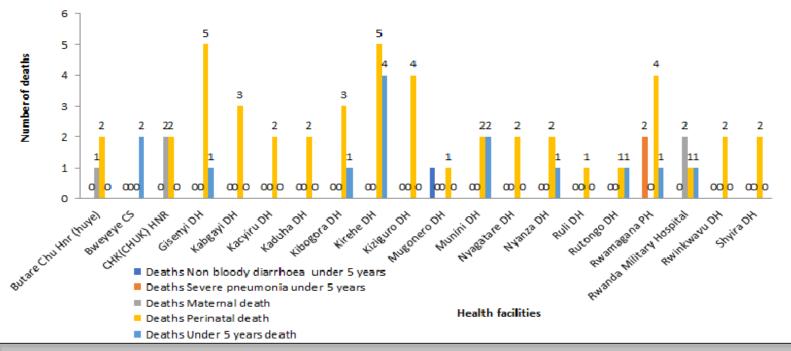
In the last 7 days (from 20 to 26 March 2023), 5 cases were detected countrywide with a positivity rate of 0.08% compared to 7 positive cases that were detected last week with a positivity rate of 0.1%. This shows a decrease in cases in the previous 7 days.

Total Covid-19 cases: 133.220 (5 new cases: 2 asymptomatic cases and 3 symptomatic cases).3 cases were from Kigali City, 1 from in Kirehe and 1 from Ngororero district.



SUMMARY OF DEATHS REPORTED THROUGH e-IDSR (Week 12/2023)





During the week 12; Perinatal deaths had a highest number: 46, especially in Gisenyi and Kirehe DH (5 deaths for each one). There was 14 under 5 years deaths; 5 Maternal deaths, 2 deaths due to severe pneumonia < 5 and 1 due to non-bloody diarrhea. Death audit is recommended

SURVEILLANCE (e-CBS) IN e-IDSR FOR WEEK 12/2023

In epidemiological week 12/2023, no event was reported in (electronic community case based surveillance (eCBS) .



HEALTH FACILITIES THAT DID NOT SUBMIT IDSR WEEKLY REPORT IN WEEK 12/2023

Hospital	Organisation unit name			
	Buhabwa CS			
Gahini	Gahini CS			
	Gasiza (musanze) CS			
	Kimonyi CS			
Ruhengeri	Nyakinama CS			
Byumba	Gicumbi Prison			
Kabgayi	Gikomero (Kabgayi) CS			
	Gikore CS			
Kibilizi	Kibilizi DH			
	Kigoma CS			
	Ruhango PH			
Ruhango	Kizibere CS			
	Gahombo CS			
	Mututu CS			
	Ntyazo CS			
Nyanza	Nyamiyaga (Nyanza) CS			
Rwinkwavu	Nyamirama CS			
Rwamagana	Ruhunda CS			
Ruli	Rukura CS			

