



WEEKLY EPIDEMIOLOGICAL BULLETIN

WEEK 24 – 2023

(12– 18 June 2023)

Editorial message

Effective and efficient disease surveillance system contribute to the reduction of morbidity, disability and mortality from disease outbreaks and health emergencies.

This weekly bulletin presents the epidemiological status of the priority diseases, conditions, and events 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.

Authors: Public Health Surveillance & Emergency Preparedness and Response Division

KEY EPIDEMIOLOGICAL HIGHLIGHTS

EPIDEMIOLOGICAL WEEK 24

Event Based Surveillance (EBS) Highlights:

- During epidemiological week 24, one alert was notified through the electronic Community Event Based Surveillance System (eCBS): 1 human death occurred in Rusizi district.
- Alerts received through Epidemic Intelligence from Open Source (EIOS): 2 alerts.

Indicator Based Surveillance (IBS) Highlights:

- 98 immediate reportable diseases were notified by health facilities countrywide. They included cases of acute flaccid paralysis (AFP), mumps, severe malaria; bloody diarrhea, measles/rubella, typhoid fever, bacterial meningitis, cholera and chicken pox.
- 8 weekly reportable diseases and health events that include flu syndrome, simple malaria, severe pneumonia for under 5 years, non-bloody diarrhea for under 5 years, COVID-19, dog bites, brucellosis, and trypanosomiasis, are being reported on a weekly basis. A thorough analysis conducted for Epi Week 24 revealed that, flu syndrome, simple malaria, non-bloody diarrhea for the children under 5 years and rabies exposure cases increased and crossed the epidemic thresholds.
- A total of 69 deaths were reported through the electronic Integrated Disease Surveillance and Response (eIDSR) system. The majority of deaths were classified as perinatal and deaths of children under the age of 5.

Ongoing outbreaks

In Epi Week 24, there was two outbreaks in Rwanda, identified in Kirehe and Gicumbi districts:

- Ongoing Measles outbreak in Kirehe District
- Food poisoning in Gicumbi district-Rubaya HC

Completeness and timeliness

In Epi Week 24, the overall completeness and timeliness of reporting in Rwanda was 98% and 94%, respectively.

WEEKLY UPDATES ON EVENT BASED SURVEILLANCE (EBS)

EPIDEMIOLOGICAL WEEK 24

Description: Event Based Surveillance (EBS) is a type of public health surveillance system that detects and reports unusual health events or disease outbreaks in a timely manner. The system is designed to detect signals of potential public health threats and allow a rapid response to prevent or control the spread of diseases. RBC is implementing EBS through PHS&EPR Division.

Currently, an electronic Community Event Based Surveillance System (eCBS) and Epidemic Intelligence from Open Source (EIOS) are being used to detect and report events of public health importance from the community and media. The process for establishment of other types of EBS is still being on going.

COMMUNITY EVENT BASED SURVEILLANCE

During the Epi week 24, one alert was received from community:

1 Human Death: the 6-year-old, Male from Rebero village, Ntura cell, Giheke sector, Rusizi District passed away on 12/06/2023. It was reported that she was handicap, blind and mute since birth.

MEDIA SCAN

During the Epi week 24, two alerts were received through Epidemic Intelligence from Open Source (EIOS):

- Virusi ya Monkeypox yazuye umutwe muri RDC

<https://mobile.igihe.com/amakuru/u-rwanda/article/virusi-ya-monkeypox-yazuye-umutwe-muri-rdc>

- Ibinyobwa bidasembuye byatahuwemo ibinyabutabire by'uburozi

<https://mobile.igihe.com/amakuru/utuntu-n-utundi/article/ibinyobwa-bidasembuye-byatahuwemo-ibinyabutabire-by-uburozi>

WEEKLY UPDATES ON INDICATOR BASED SURVEILLANCE (IBS) EPIDEMIOLOGICAL WEEK 24

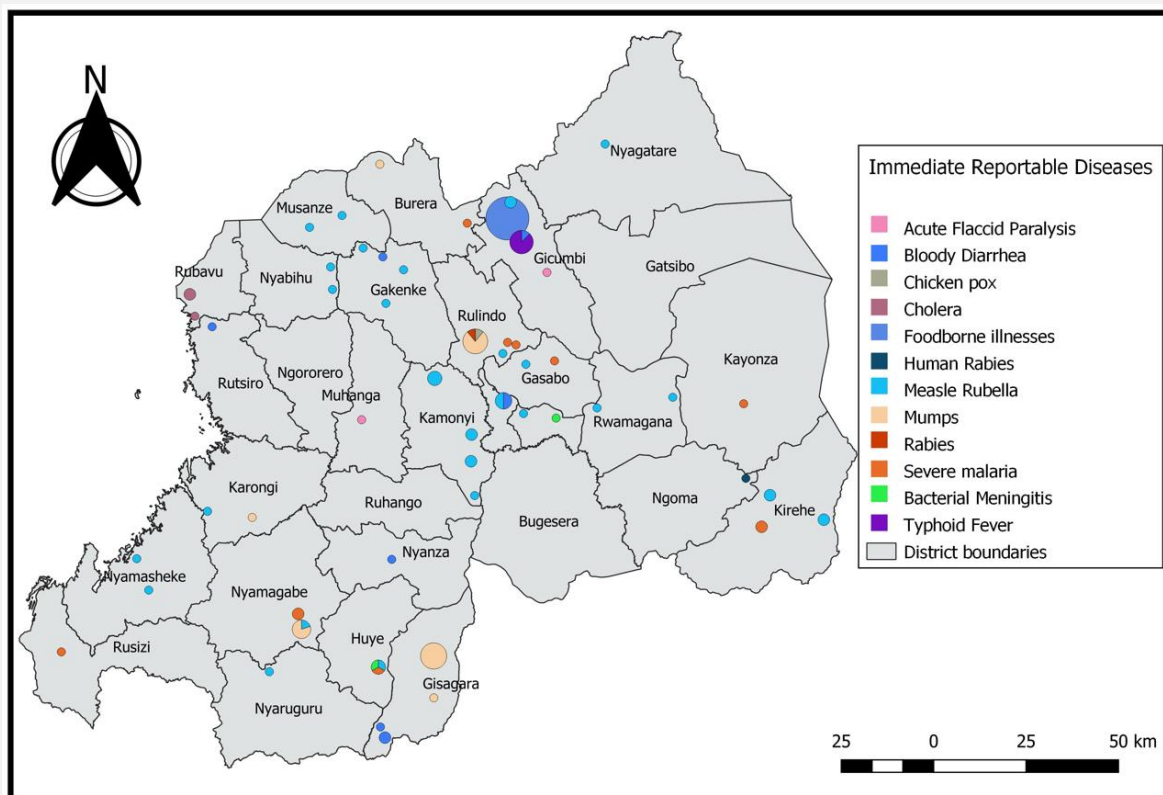
Description: Rwanda has been implemented Indicator Based Surveillance according to the IDSR 3rd guidelines where approximately 45 priority diseases, health conditions and public health events are being monitored and reported from health facilities countrywide on a regular basis. Diseases that are prone to outbreaks are being reported immediately within 24 hours after detection while diseases that are considered as endemic are reported on a weekly basis, every Monday before midday.

A. IMMEDIATE REPORTABLE DISEASES – EPI WEEK 24

During the Epi week 24; 98 cases for immediate reportable diseases were notified, including 35 suspect cases of measles/rubella, 27 cases of foodborne illness, 11 confirmed cases of severe malaria, 9 suspected cases of bloody diarrhea, 7 cases of suspected typhoid fever, 2 suspected cases of acute flaccid paralysis, 24 cases of mumps, 1 case of chicken pox, 2 suspected cases of bacterial meningitis, 1 confirmed and 2 suspected cases of cholera. (See figure below).

Notes: For the diseases requiring laboratory confirmation, the samples were collected and sent to the National Reference Laboratory for testing, except for some diseases whose samples were not sent, including bloody diarrhea: among 9 cases, only 1 sample had been sent to NRL, for bacterial meningitis and Typhoid fever, no sample sent. Regarding the treatment, malaria confirmed cases and suspected cases for the remaining diseases had been managed at the health facility level.

The health facilities are recommended to collect the sample and send them to NRL for confirmation as required.

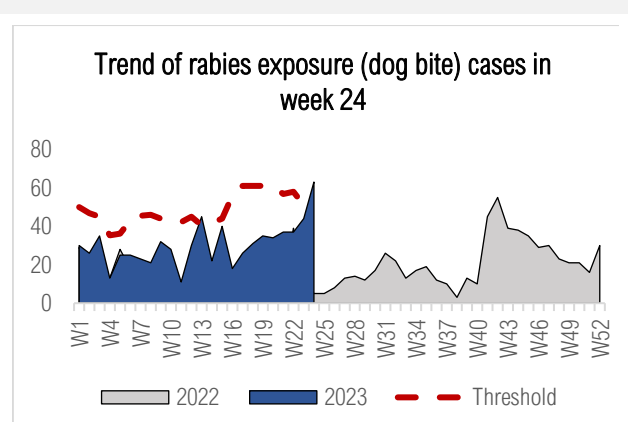
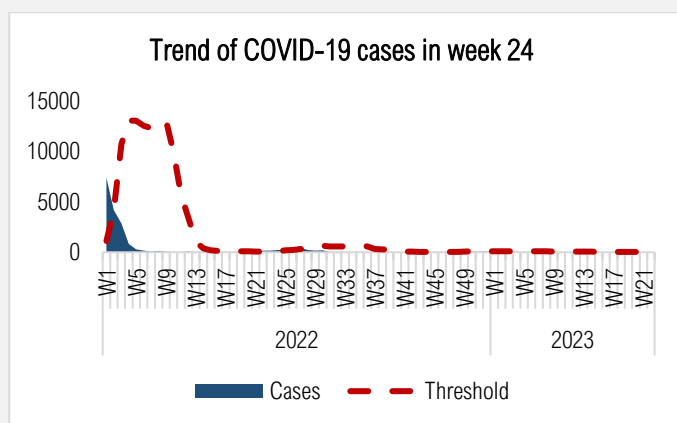
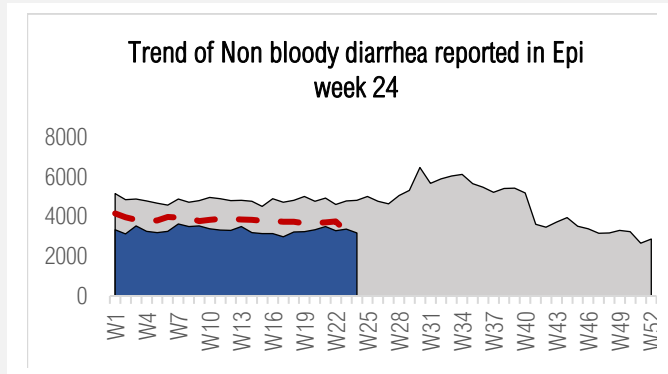
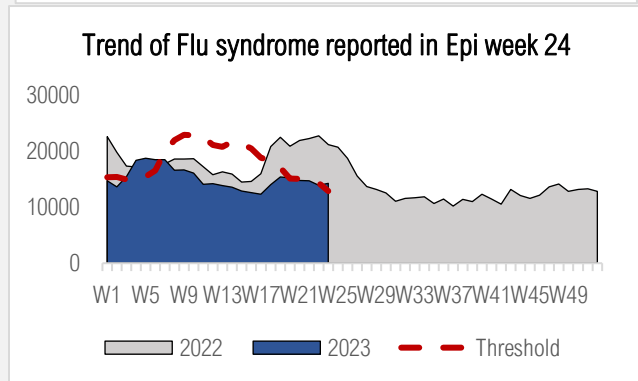
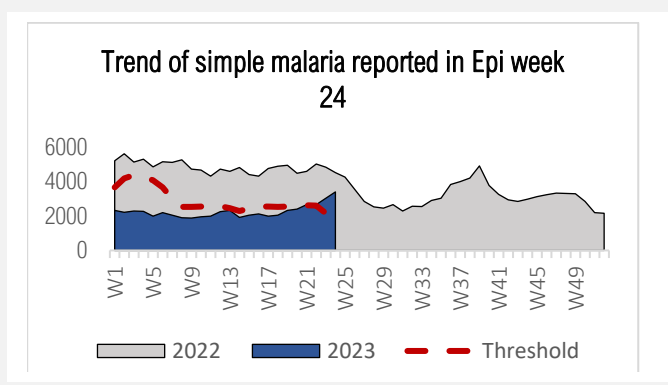
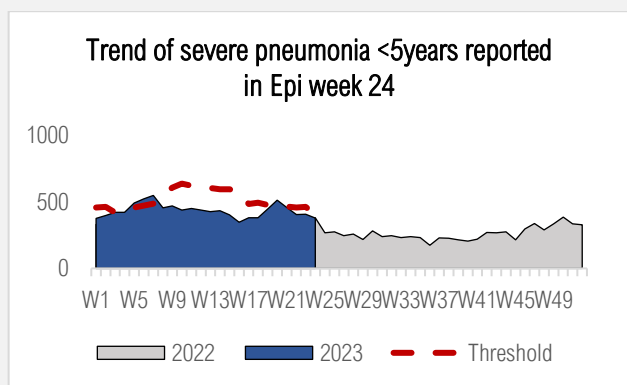


Distribution of immediate reportable diseases in Epi week 24

WEEKLY REPORTABLE DISEASES – EPI WEEK 24

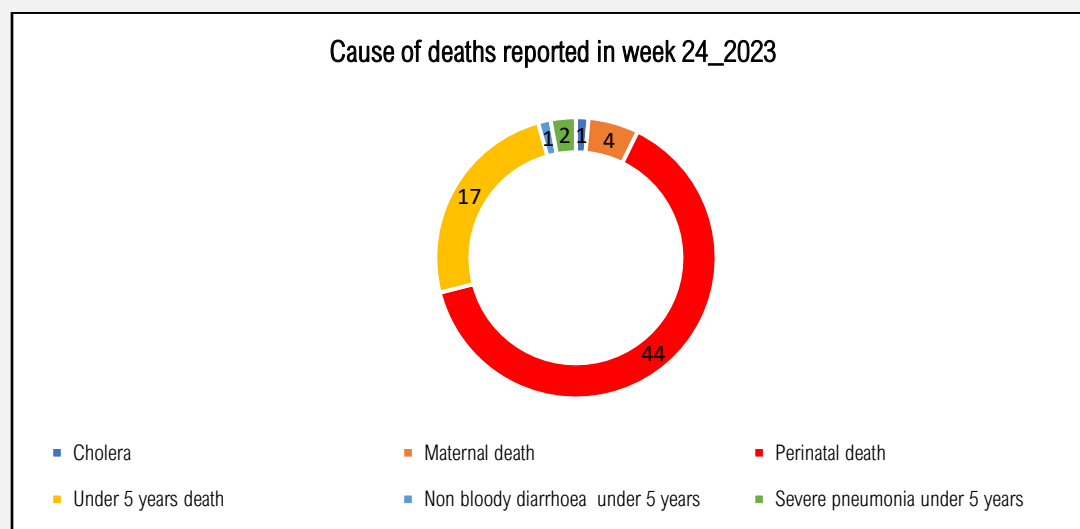
Description: In Rwanda, after the adaptation of the IDSR 3rd edition, eight diseases & events are being reported and analyzed on a weekly basis. These include flu syndrome, simple malaria, severe pneumonia for under 5 years, non-bloody diarrhea for under 5 years, COVID-19, dog bites, brucellosis, and trypanosomiasis. The monitoring trends of these weekly reportable diseases or health events helps to detect an unusual increase early.

In Epi Week 24, a thorough analysis was conducted, comparing the number of reported cases of the eight diseases monitored on a weekly basis to the epidemic thresholds. The results of the analysis revealed that among weekly reportable diseases, flu syndrome, simple malaria, and dog bite crossed the respective epidemic thresholds. For simple malaria cases, they crossed the thresholds in 14 hospitals: Bushenge, Byumba, Gahini, Kabgayi, Kibagabaga, Kibirizi, Kibogora, Kigeme, Munini, Nyagatare, Nyamata, Nyanza and Rutongo and Kirehe (Kirehe DH was the most affected, as well as the number of cases increased about 5 times the threshold :431 cases versus the threshold of 72). The cases of flu syndrome crossed the thresholds in 3 hospitals: Gitwe, Kirehe and Masaka. while the dog bite cases were especially highly increased in CHUB which reported 23 cases in week 24. This indicates that deep investigations are needed and take actions in order to reduce those cases.



B. DISTRIBUTION OF REPORTED DEATHS IN eIDSR – EPIDEMIOLOGICAL WEEK 24

In Epi week 24, as summarized in the Pie Chart below, a total number of 69 deaths were reported through the electronic Integrated Disease Surveillance and Response (eIDSR) system. Among these deaths, 44 (64%) were classified as perinatal, 17(25%) are deaths of children under 5 years old, 4(6%) are maternal deaths, 2(3%) are deaths due to severe pneumonia for under 5 years children, 1(1%) is a death due to non-bloody diarrhea for under 5 child and 1(1%) is a death due to cholera.

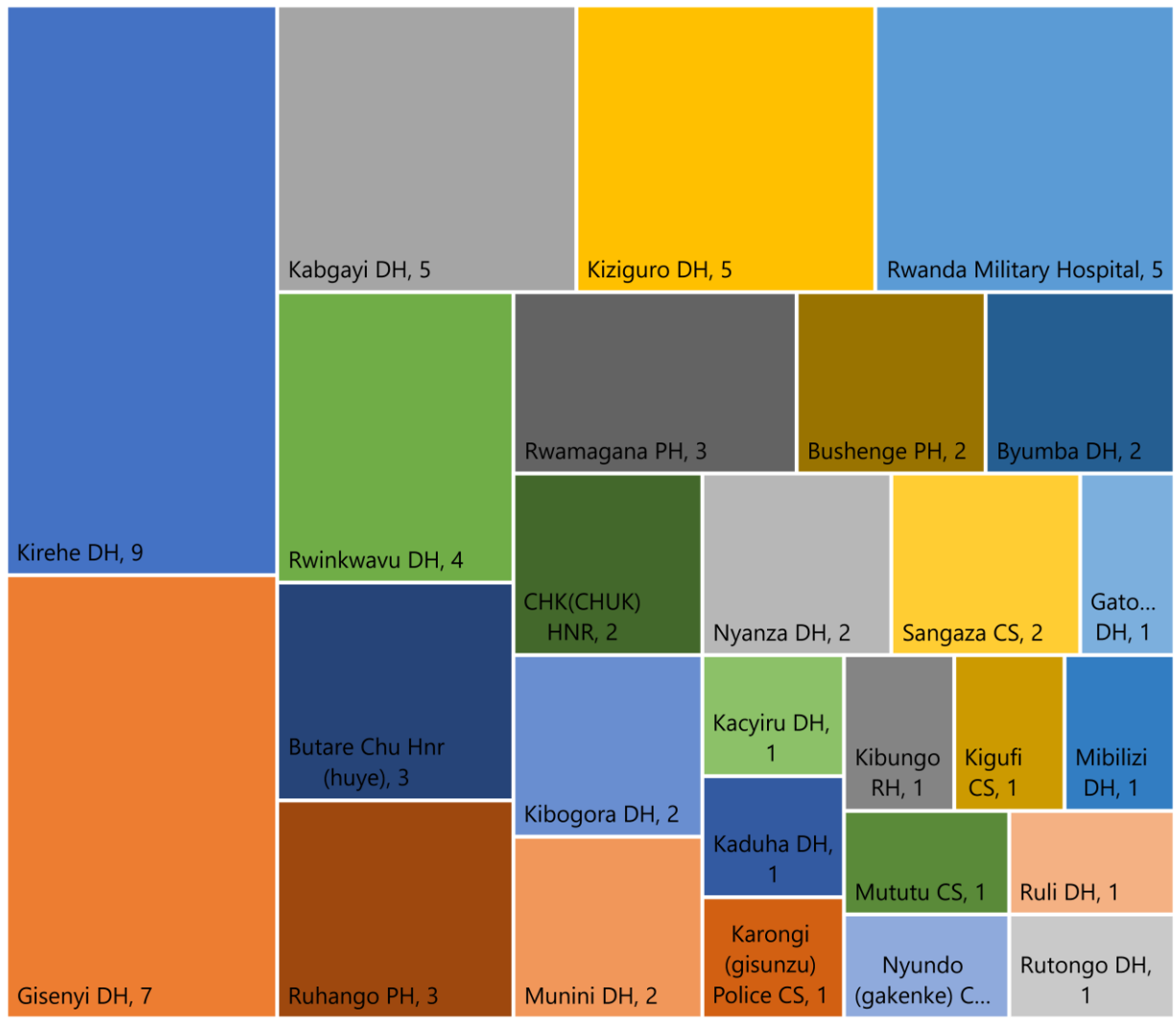


Cause of deaths declared in epi week 24

Deaths were reported from various catchment areas as follow:

- 9 deaths were reported in Kirehe DH catchment area
- 7 deaths were reported in Gisenyi DH catchment area
- 5 deaths were reported respectively in catchment areas of Kabgayi DH, Kiziguro DH, Rwanda military hospital.
- 4 deaths were reported in Rwinkwavu DH catchment area,
- 3 deaths were reported respectively in catchment areas of Rwamagana PH, CHUB, Ruhango PH.
- 2 deaths were reported respectively in catchment areas of CHUK, Byumba DH, Kibogora DH, Bushenge PH, Munini DH, Nyanza DH, Sangaza HC in Kibungo RH
- 1 death was reported respectively in catchment areas of Gatonde DH, Kacyiru police H., Kaduha DH, Karongi (Gisunzu) HC, Kibungo RH, Kigufi HC in Gisemyi DH, Mibilizi DH, Mututu HC in Nyanza DH, Nyundo (Gakenke)HC in Gatonde DH, Ruli DH, Rutongo DH. (See figure below).

Deaths reported in week 24-2023



OUTBREAK AND EVENT UPDATES EPIDEMIOLOGICAL WEEK 24

MEASLES OUTBREAK

Confirmed cases	17	Date reported:	February 27, 2023	Risk assessment	Low
Epi link cases	57	Source:	NRL, eIDSR		
Death(s)	0	District:	Kirehe		
Total cases	74	Geoscope:	Low		

Outbreak description: The measles outbreak is still ongoing in Kirehe district since 27th February 2023. During Epi Week 24; no additional confirmed case found in Mahama Refugee camp by laboratory confirmation, the total laboratory confirmed cases remained 17 and 57 cases confirmed by epidemiological link. However, 1 suspect case was identified in the previous week, and sample was taken and sent to NRL.

Ongoing interventions

- Continuous active cases search
- Case management (treatment, isolation)
- Vaccination

2. FOOD POISONING IN GICUMBI DISTRICT-RUBAYA HC

Confirmed cases	0	Date reported:	June 12, 2023	Risk assessment	Low
Suspected cases	28	Source:	Rubaya HC, eIDSR		
Death(s)	0	District:	Gicumbi		
Total cases	28	Geoscope:	Low		

Outbreak description:

On June 12, 2023, Rubaya HC received 28 cases presenting abdominal pain, vomiting and diarrhea after drinking a local sorghum brew (ubushera) on June 11, 2023, during a religious party (first communion) that took place in Mugote village, Gishari cell, Rubaya sector in Gicumbi district.

Interventions: All the cases were treated and discharged.

eIDSR REPORTS COMPLETENESS & TIMELINESS EPIDEMIOLOGICAL WEEK 24

In Rwanda, eIDSR reports completeness and timeliness are scored as follow: **Greater or equal to 80%: High**, **Between 60% and 79%: Moderate**, **less than 60%: Low**.

In Epi Week 24, the overall completeness and timeliness of reporting in Rwanda were 98% and 94%, respectively. With regards to completeness of surveillance reports, almost all DH had a score greater than 80%, except one hospital (King Faysal hospital) that had low score. The hospital did not submit the report.

The overall timeliness score was 94%. Many hospitals had the score greater than 80%, but three hospitals had a moderate score (Gatonde DH, Muhororo DH and Ruhango PH). They had respectively 71% 70% and 63%; while 1 hospital (Gakoma DH) had a moderate score and another one (King Faysal hospital) had a very low score.

Notes: it is important to note that the health facilities which did not perform are recommended to improve their reporting indicators by providing complete reports on time, to achieve the effective surveillance and early detection of outbreaks. Details, on completeness and timeliness for all health facilities are showed in the figure below.

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