WEEKLY EPIDEMIOLOGICAL BULLETIN

Week 52: 26 Dec 2022 to 1st Jan 2023

Released on: 5th January 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.

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

TREND OF IDSR REPORTS COMPLETENESS

(Previous 10 weeks: Wk43 - Wk52)

OVERALL

RWANDA

Completeness - Wk 52: 87%



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

M43 M45 M45 M47 M47 M48 M50 M50 M51

M43 M45 M46 M46 M47 M48 M50 M50 M51

Observation: During this week 52, the overall IDSR reports completeness was 87%. Many DH had a low rate of completeness (between 60 and 79%): Nyagatare, Bushenge, Nyarugenge, Rwinkwavu, Kaduha, Muhima, other had the completeness below 60%:Gatunda,Ruli,Nyanza,Gahini,Kigeme,Butaro,Byumba,Gitwe,Kibagabaga,Rwamagana,Nyamata,Kab utare DHs. while some hospitals did not yet report on Wednesday: CARAES Ndera, CHUB, CHUK, Rwanda military hospital.These hospitals have to report all required reports even during the holidays.

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Health facilities with completeness that is below 60%

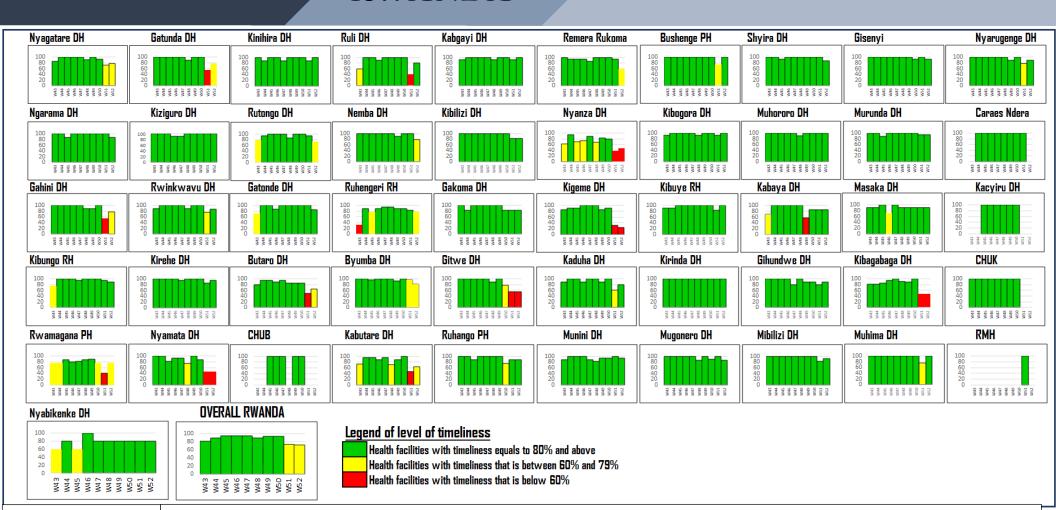
TREND OF IDSR REPORTS TIMELINESS

(Previous 10 weeks: Wk43 - Wk52)

OVERALL

RWANDA

Timeliness - Wk 52: 80%



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 52, the overall IDSR reports timeliness was 80%. Many DH had a low rate of timeliness (between 60 and 79%):

Nyagatare, Gatunda,Remera-Rukoma,Rutongo,Nemba,Gahini,Ruhengeri,Butaro,Byumba,Rwakagana,Kabutare.Other had a low timeliness, below 60%:Nyanza,Gitwe,Kibagabaga,Kigeme,Nyamata DHs, while some hospitals did not yet report on Wednesday: CARAES Ndera, CHUB, CHUK,
Rwanda military hospital. These hospitals have to report all required reports on time (on Monday before 12:00) even during the holidays.

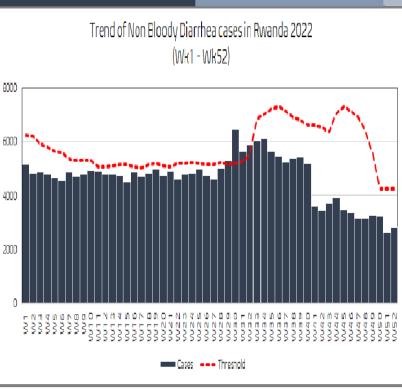
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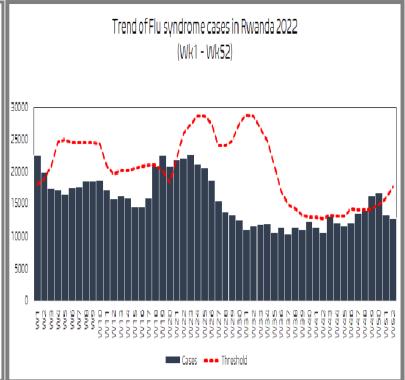


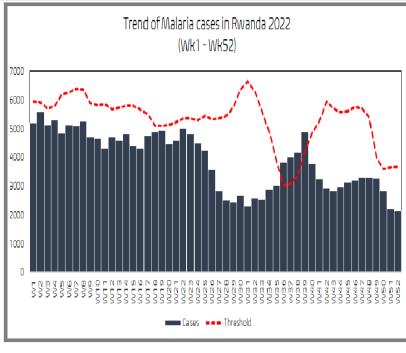
IDSR WEEKLY REPORTABLE DISEASES - 2022

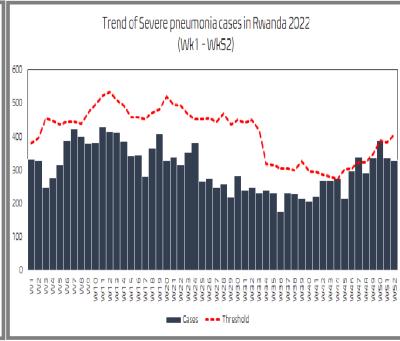
Non-Bloody Diarrhea cases Wk01 – Wk52: **242,531** Wk52: 2864 Flu syndrome cases Wk01 – Wk52: 810,852 Wk52: 12,783 Malaria cases
Wk01 – Wk52: 204,077
Wk52: 2 160

Severe Pneumonia cases Wk01 – Wk52: 15,910 Wk52: 328









IDSR WEEKLY REPORTABLE DISEASES -Week 52 2022

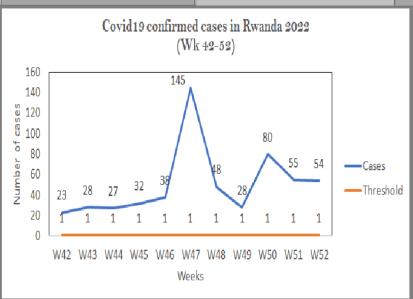
Covid19 confirmed cases:
Wk 42-52:558
Wk 52: 54 cases

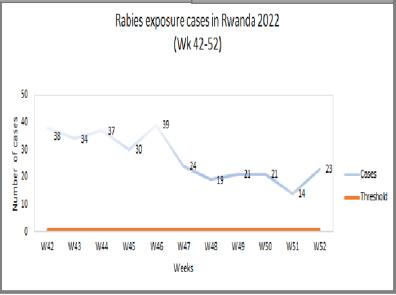
Rabies exposure (Dog or other mammals bite) cases: Wk 42-52: 300

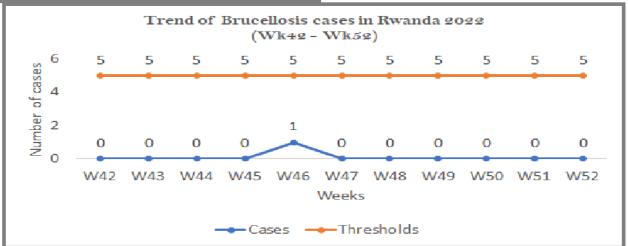
Wk 52: 23 cases

Brucellosis cases
Wk 42-52:1case
Wk 52:0 case

Other weekly reportable diseases: Trypanosomiasis no case







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 52, for 8 weekly reportable diseases, data analysis showed that Covid19cases and Rabies exposure crossed the thresholds, while other diseases did not cross the thresholds. Further investigations are needed.

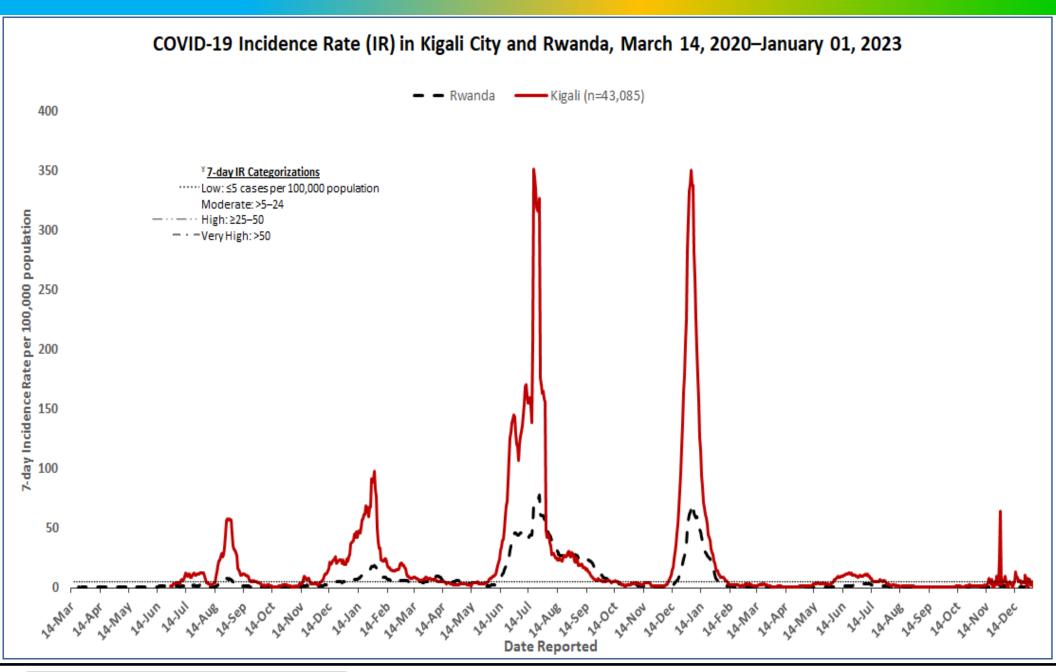
IDSR IMMEDIATE REPORTABLE DISEASES – Wk52

| Hospitals | HFs | Bacterial | Bloody Diarrhea | Measles | Typhoid | Severe |
|------------|----------------------|------------|-----------------|---------|---------|---------|
| | | Meningitis | (Shigellosis) | | Fever | malaria |
| Nyarugenge | Biryogo CS | 0 | 3 | 0 | 0 | 0 |
| Mibilizi | Bugarama (rusizi) CS | 0 | 0 | 0 | 0 | 1 |
| Bushenge | Bushenge CS | 0 | 0 | 1 | 0 | 0 |
| Byumba | Byumba CS | 0 | 0 | 1 | 0 | 0 |
| Byumba | Byumba DH | 0 | 0 | 0 | 0 | 1 |
| Murunda | Crete Congo Nil CS | 0 | 0 | 1 | 0 | 0 |
| Butaro | Cyanika (burera) CS | 0 | 0 | 0 | 0 | 2 |
| Gitwe | Gitwe CS | 0 | 2 | 0 | 0 | 0 |
| Kirehe | Kigarama CS | 0 | 0 | 0 | 10 | 0 |
| Ruhengeri | Kimonyi CS | 0 | 0 | 1 | 0 | 0 |
| Butaro | Kinoni CS | 0 | 1 | 0 | 0 | 0 |
| Mibilizi | Mibilizi DH | 0 | 0 | 0 | 0 | 1 |
| Murunda | Murunda DH | 0 | 0 | 0 | 0 | 1 |
| Murunda | Mushubati CS | 0 | 0 | 0 | 0 | 1 |
| Gisenyi | Ndengera CLIN | 0 | 1 | 0 | 0 | 0 |
| Nyanza | Nyanza DH | 1 | 0 | 0 | 0 | 0 |
| Ruhango | Nyarurama CS | 0 | 1 | 0 | 0 | 0 |
| Ruhango | Ruhango CS | 0 | 0 | 1 | 0 | 0 |
| Nyamata | Ruhuha CS | 0 | 0 | 3 | 0 | 0 |
| | Total | 1 | 8 | 8 | 10 | 7 |

Observation: During week 52, the reported IDSR immediate reportable diseases were Bacterial meningitis, Bloody diarrhea, Measles, Typhoid fever and Severe Malaria.

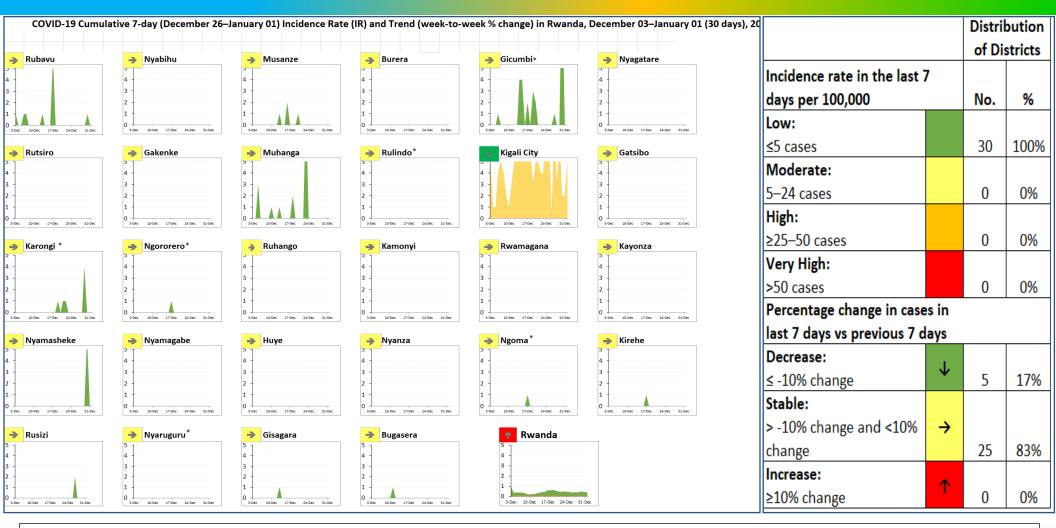


TREND OF 7-DAY INCIDENCE RATE OF COVID-19





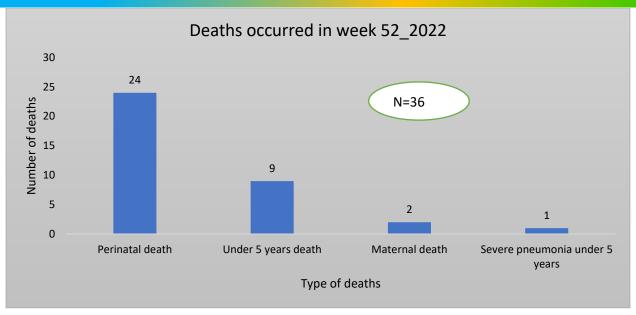
TREND OF INCIDENCE RATE OF COVID-19 BY DISTRICTS

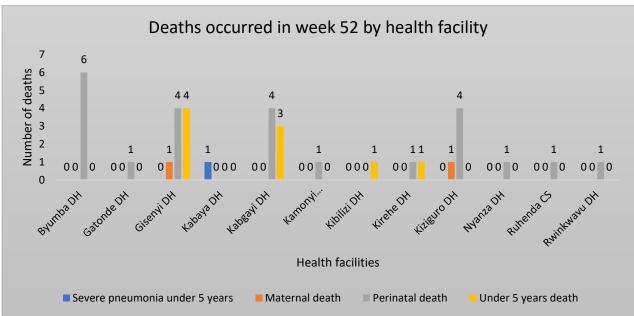


Observation: During the week 52, The overall incidence rate of Rwanda was 0.4 case per 100,000 population (it was not change compared with previous week: 0.4 cases per 100,000 population in week 51). Kigali City, Gicumbi and Nyamasheke districts presented a very highest incidence rate, while Rubavu, Karongi, distrcits presented also the cases, other districts did not have cases in week 52.



SUMMARY OF REPORTED DEATHS THROUGH e-IDSR (Wk 52)





In week 52, perinatal deaths had a highest number (24), especially in Byumba DH (7perinatal deaths), 9 deaths of under 5 years, 2 maternal death and 1 death due to severe pneumonia<5 years. 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 52

| RECEL | VED IN e-IDSK FOR WK 52 | | | |
|-----------------|-----------------------------------------|--|--|--|
| Hospitals | HFs | | | |
| | Butaro DH | | | |
| Butaro | Gatebe CS | | | |
| | Gitare CS Ruhunde CS | | | |
| | Mimuri CS | | | |
| Gatunda | Nyarurema CS | | | |
| | Byimana CS | | | |
| Gitwe | Munanira CS | | | |
| | Muremure CS Mwendo (Gitwe) CS | | | |
| | Busoro-gishamvu CS | | | |
| | Butare Chu Hnr (huye) | | | |
| Kabutare | Kabutare DH | | | |
| | Kinyamakara CS Matyazo CS | | | |
| | Simbi CS | | | |
| Kaduha | Nyarwungo CS | | | |
| | Bumbogo (ex-Gikomero I) CS | | | |
| | Kabuye CS Kacyiru CS | | | |
| | Kacyiru DH | | | |
| Kibagabaga | Kibagabaga DH | | | |
| | King Faisal Hospital HNR | | | |
| | Kinyinya CS Nyacyonga CS | | | |
| Kibilizi | Kansi CS | | | |
| Kibungo | Gasetsa CS | | | |
| Kibungo | Ngoma Prison | | | |
| | Kigeme CS Kigeme Refugee Camp HC | | | |
| | Kitabi CS | | | |
| | Mbuga CS | | | |
| Kigeme | Nyamagabe CS | | | |
| | Nyamagabe Prison Nyarusiza CS | | | |
| | Shaba (nyamagabe) CS | | | |
| | Uwinkingi CS | | | |
| Kirehe | Kabuye (kirehe) CS | | | |
| Masaka Nemba | Rwanda Military Hospital Cyabingo CS | | | |
| 1 Tellipa | Bugaragara CS | | | |
| Nyagatare | Ntoma CS | | | |
| | Tabagwe CS | | | |
| | Gakurazo CS Gihinga CS | | | |
| | Mwogo CS | | | |
| Nyamata | Ngeruka CS | | | |
| . vaillata | Ntarama CS | | | |
| | Nyamata CS Nyamata DH | | | |
| | Nyarugenge CS | | | |
| | Busoro CS | | | |
| | Cyaratsi CS | | | |
| | Hanika I (NYANZA) CS Mucubira CS | | | |
| Nyanza | Mututu CS | | | |
| | Ntyazo CS | | | |
| | Nyanza Prison | | | |
| Nyarugenge | Nyarusange (nyanza) CS CHK(CHUK) HNR | | | |
| 1 yai ugerige | Karama (Kamonyi) CS | | | |
| Remera Rukoma | Karangara CS | | | |
| | Kayumbu CS | | | |
| Ruhango | Ruhango PH Karwasa CS | | | |
| Ruhengeri | Nyakinama CS | | | |
| | Ruhengeri RH | | | |
| Ruli | Ruli DH | | | |
| | Rushashi CS | | | |
| | Cyinzuzi CS Masoro CS | | | |
| Rutongo | Murambi CS | | | |
| | Rulindo CS | | | |
| Rwamagana | Rubona (rwamagana) CS | | | |
| Rwinkwavu | Rwamagana Prison Cyarubare CS | | | |
| Shyira | Nyakiliba CS | | | |
| | | | | |



TRUE EVENTS REPORTED IN COMMUNITY BASED SURVEILLANCE(e-CBS) IN e-IDSR FOR Wk 52

| Village | Event trigger | Sex | Age in years |
|-----------|---------------|--------|--------------|
| Ryabega | DB | NA | NA |
| Cyamabuye | HD | Male | 91 |
| Bukira | HD | Male | 39 |
| Musagara | HD | Female | 7 |

The events reported and verified in week 52 were 1 dog bite, 3 human deaths, respectively with 91;39 and 7 years old, the verbal autopsy for the deaths will be conducted.