



WEEKLY EPIDEMIOLOGICAL BULLETIN

WEEK 34– 2024

(19 - 25 August 2024)

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 34/2024

Event Based Surveillance (EBS) Highlights:

- **Alert from community: seven teen alerts:**

11 human illnesses and 6 human deaths

- **Alert from EIOS: one alert**

The Democratic Republic of Congo has reported 35 new deaths from Mpox, bringing the number of those killed by the viral

- **Indicator Based Surveillance (IBS) Highlights:**

- 387 immediate reportable diseases were notified by health facilities countrywide. These include the cases of acute flaccid paralysis (AFP), mumps, severe malaria, bloody diarrhea, measles/rubella, chicken pox, Mpox, typhoid fever, bacterial meningitis, snake bite and foodborne illness.
- For 8 weekly reportable diseases and health events, a thorough analysis conducted for the epi Week 34 revealed that no cases surpassed the epidemic thresholds.
- A total of 72 deaths were reported through the electronic Integrated Disease Surveillance and Response (eIDSR) system. Most of deaths were perinatal deaths and deaths of children under 5 years.

- **Outbreaks and events updates in week 34**

- Foodborne illness outbreaks in Gakenke district, Nemba DH and Kamonyi district, Remera Rukoma DH
- Ongoing Mpox outbreak in Rwanda

- **Completeness and timeliness**

In Epi Week 34, the overall completeness and timeliness of surveillance data reporting in Rwanda was 99% and 98% respectively.

WEEKLY UPDATES ON EVENT BASED SURVEILLANCE (EBS) EPIDEMIOLOGICAL WEEK 34

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.

- **Alert from community: 17 alerts:**

11 human illnesses and 6 human deaths

- **Alert from EIOS: one alert**

The Democratic Republic of Congo has reported 35 new deaths from Mpox, bringing the number of those killed by the viral

Summary: The Democratic Republic of Congo has reported 35 new deaths from Mpox, bringing the number of those killed by the viral disease to 610 since January. A report released by the Ministry of Health on Wednesday said the disease has now been reported in almost every corner of the country, marking the DRC the epicenter of the disease.

<https://www.facebook.com/photo.php?fbid=913792464120654&set=a.600821002084470&type=3>

WEEKLY UPDATES ON INDICATOR BASED SURVEILLANCE (IBS)

Description: *Rwanda had implemented Indicator Based Surveillance according to the IDSR guidelines 3rd edition 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 weekly basis every Monday before midday.*

A. IMMEDIATE REPORTABLE DISEASES – EPI WEEK 34

During this Epi week, 387 cases of immediate reportable diseases were notified:

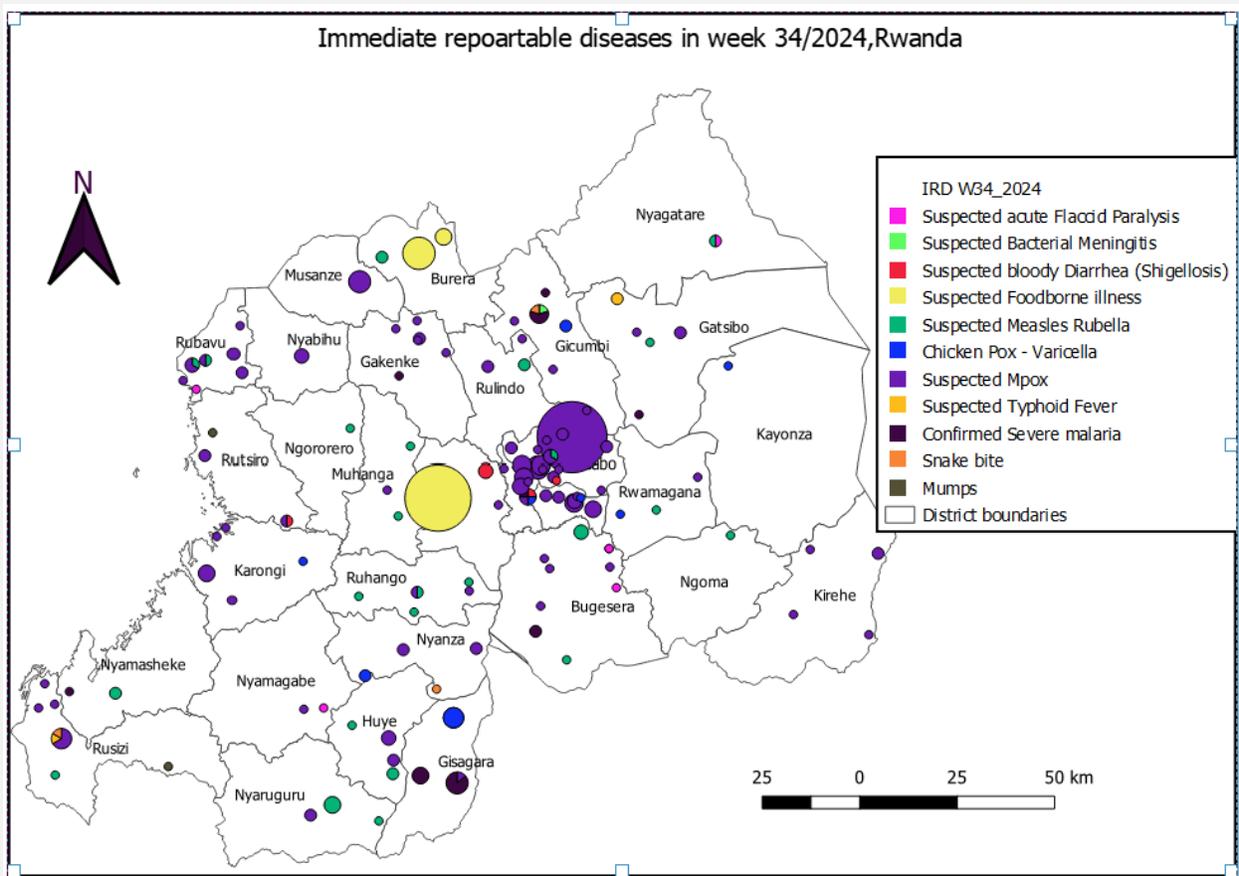
- 29 cases of chicken pox were reported by 9 HFs. No HF crossed the threshold.
- 3 cases of mumps were reported by 3 HCs. No HF crossed the threshold.
- 6 suspected cases of bloody diarrhea (Shigellosis) were reported by 4 health facilities. The samples were taken and sent to NRL.
- 33 suspected cases of Measles/Rubella were reported by 24 HCs. Samples were taken and sent to NRL.
- 20 cases of severe malaria were reported by 9 health facilities.
- 6 suspected cases of acute flaccid paralysis were reported by 6 health facilities, the samples were taken and sent to NRL for transportation to UVRI laboratory.

- 3 suspected cases of typhoid fever reported by 2 health facilities. The samples were taken and sent to NRL
- 209 suspected cases of Mpox were reported by 75 health facilities they are described in outbreak section.
- 82 cases of foodborne illnesses were reported by 3 health facilities.
- 3 cases of snake bite were reported by 3 health facilities.
- 1 case of suspected bacterial meningitis was reported by 1 health facility.

Notes:

- ✓ All confirmed and suspected cases had been managed at the health facility level.
- ✓ The hospitals with surpassed thresholds are recommended to conduct the investigations.

Geographical distribution of cases notified during the epi week 34/2024



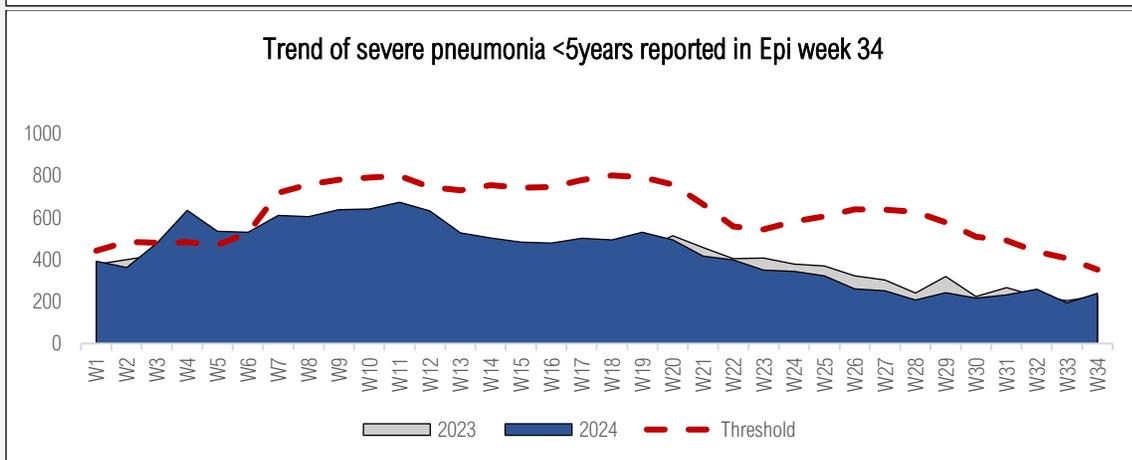
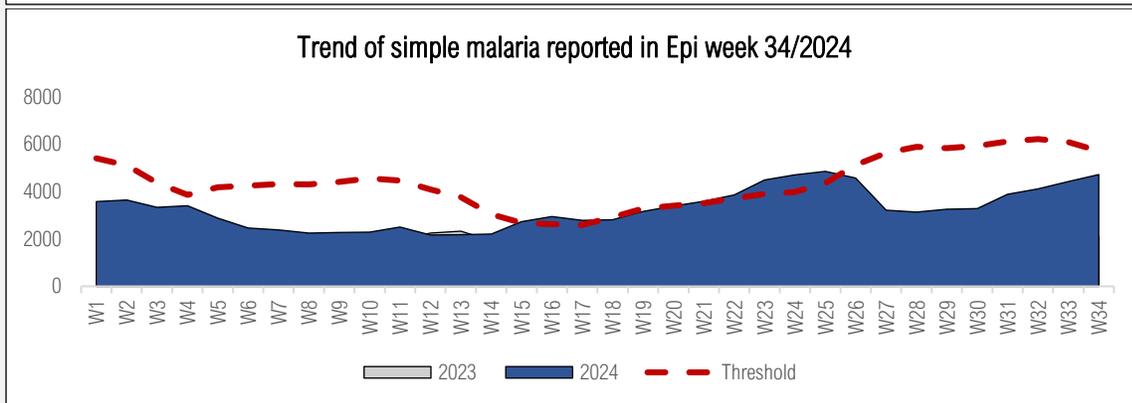
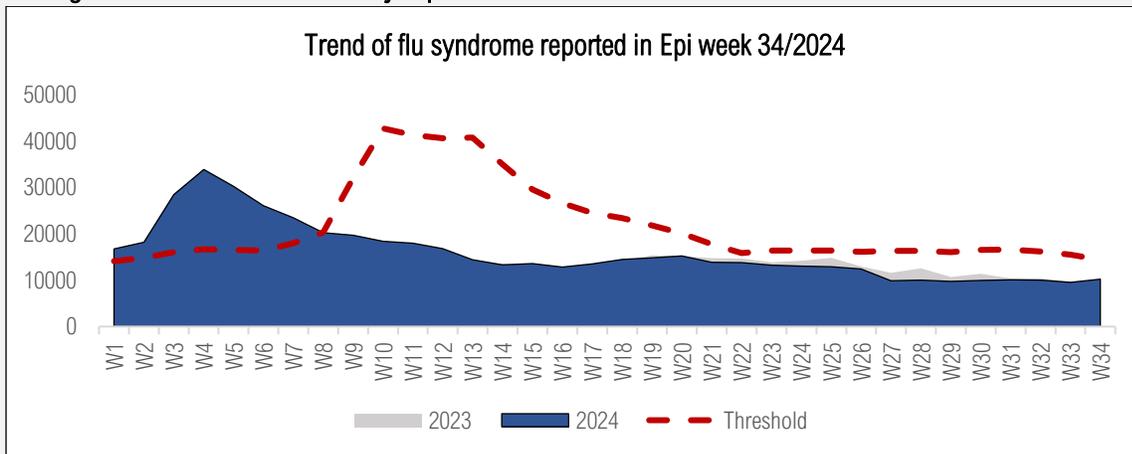
Distribution of immediate reportable diseases in Epi week 34

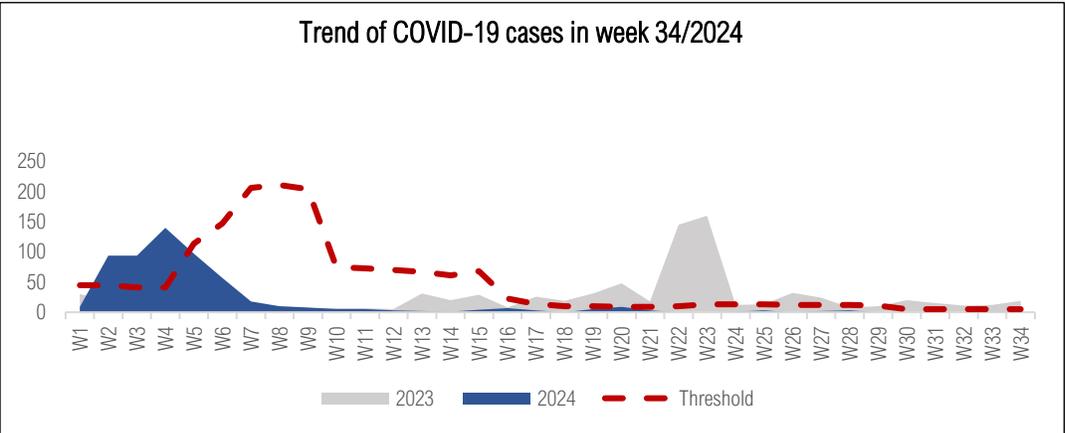
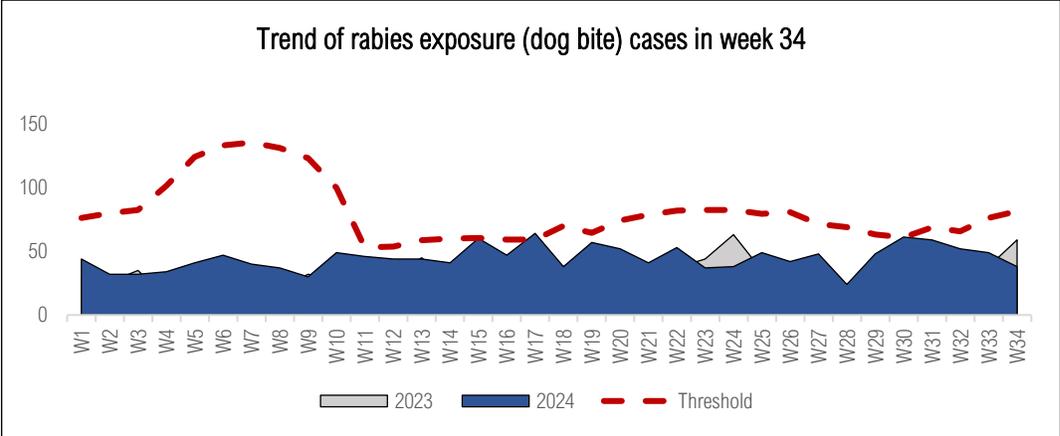
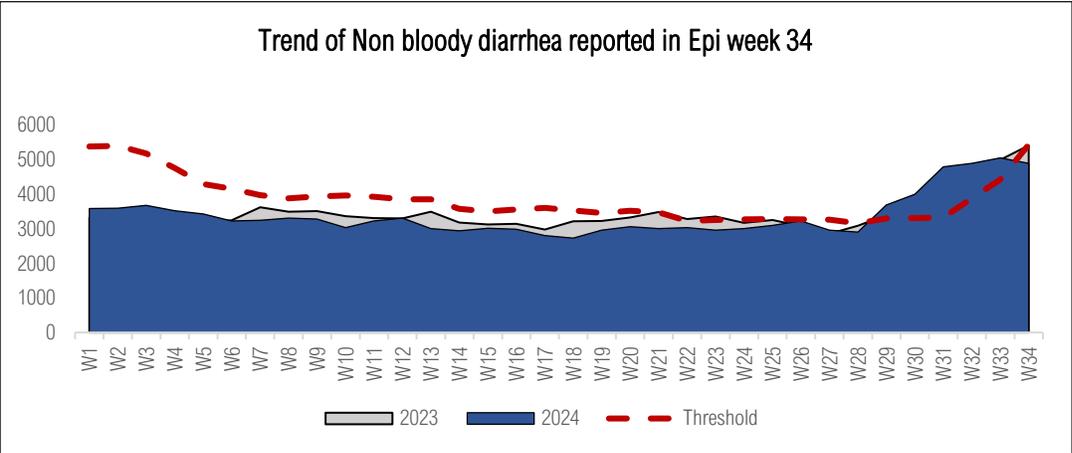
B. WEEKLY REPORTABLE DISEASES – EPI WEEK 34

Description: *In Rwanda, after the adaptation of the IDSR guidelines 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 34, a thorough analysis was conducted, comparing the number of reported cases of the eight diseases monitored on a weekly basis to their respective epidemic thresholds. The results of the analysis revealed no cases surpassed the thresholds.

The figures below show the weekly reportable diseases trends:

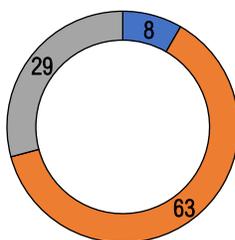




C. DISTRIBUTION OF REPORTED DEATHS IN eIDSR – EPIDEMIOLOGICAL WEEK 34

As summarized in the Pie Chart below, a total number of 72 deaths were reported through the electronic Integrated Disease Surveillance and Response (eIDSR) system. Among these deaths, 45(63%) were perinatal deaths, 21 (29%) were the deaths of children under 5 years old, 6(8%) maternal deaths.

Type of deaths reported in week 34/2024



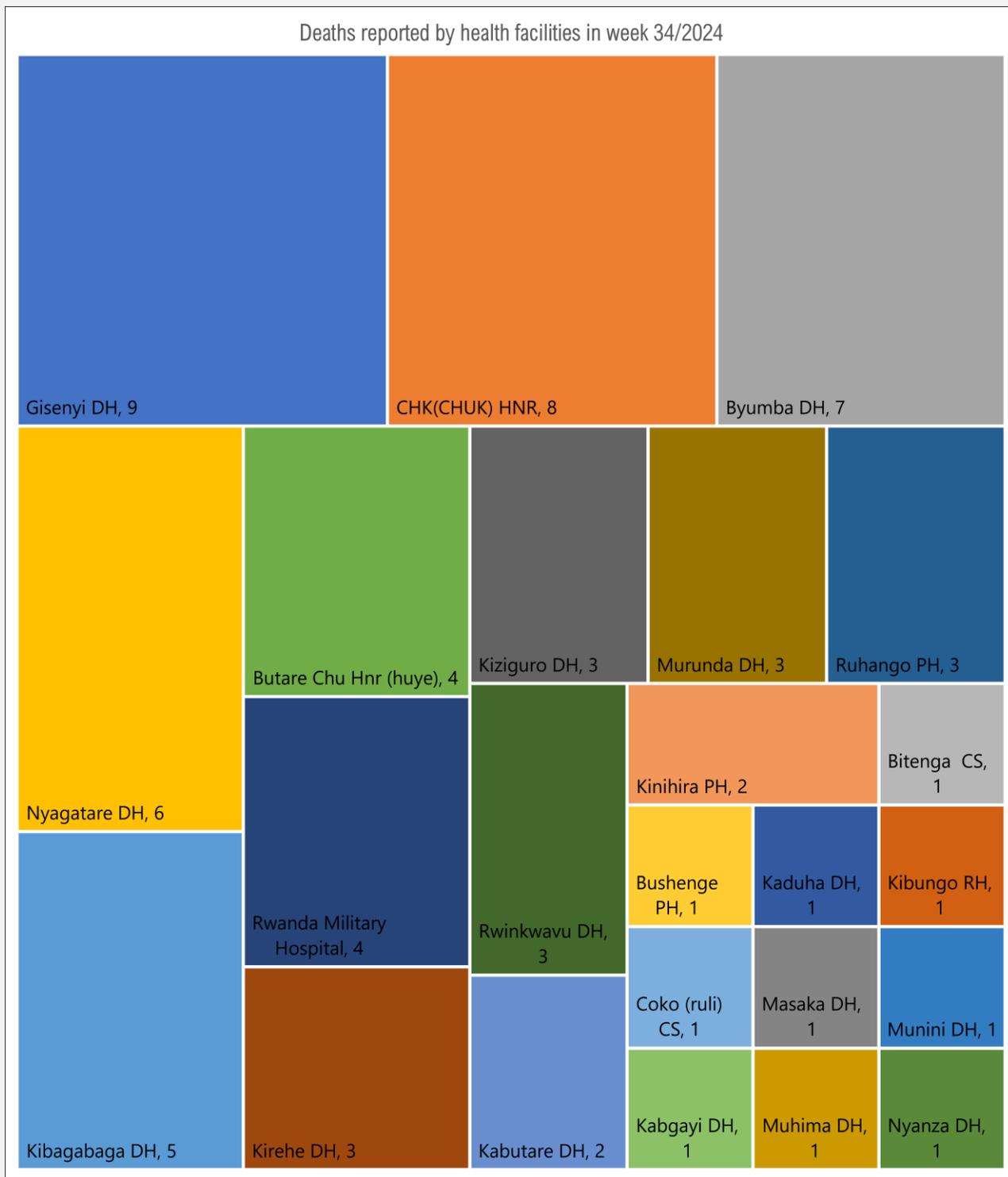
■ Maternal death ■ Perinatal death ■ Under 5 years death

Cause of deaths declared in epi week 34

72 deaths were reported from various catchment areas as follow:

- 9 deaths were reported by Gisenyi DH (7 perinatal deaths and 2 under 5 years deaths)
- 8 deaths were reported by CHUK (3 maternal deaths, 2 perinatal deaths, 3 under 5 years deaths)
- 7 deaths were reported by Byumba DH (5perinatal deaths and 2 under 5 years deaths)
- 6 deaths were reported by Nyagatare DH (5perinatal deaths all were the children under 5 years deaths)
- 5 deaths were reported by Kibagabaga DH (4perinatal deaths and 1under 5 years death)
- 4 deaths were reported respectively by CHUB (1 maternal death, 3 perinatal deaths) and Rwanda Military Hospital (1maternal death, 3perinatal deaths)
- 3 deaths were reported respectively by Kiziguro DH, Murunda DH, Ruhango PH and Rwinkwavu (each one reported 3perinatal deaths), Kirehe DH (2perinatal deaths and 1 under 5 years death)
- 2 deaths were reported respectively by Kabutare DH, Kinihira PH (each one reported 2 perinatal deaths)
- 1 death was reported respectively by Coko HC in Ruli DH (1maternal death) and Kibungo RH (each one reported 1perinatal death and 1under 5 years death), Bitenga HC in Murunda DH, Bushenge PH, Kabgayi DH, Kaduha DH, Masaka DH, Munini DH (each one reported 1perinatal death), Kibungo RH, Muhima DH, Nyanza DH (each one reported 1 under 5 years death).

Distribution of deaths by health facilities:



Distribution of deaths by health facilities in Epi week 34

OUTBREAK AND EVENT UPDATES IN EPIDEMIOLOGICAL WEEK 34

1. Foodborne illnesses outbreak in Kamonyi District, Nyamiyaga Sector, Kabashumba Cell, Karubanda Village

Confirmed cases	0	Date reported:	August 23, 2024	Risk assessment	Low
Suspected cases	58	Source:	eIDSR		
Death(s)	0	District/HFs:	Nyamiyaga HC/Remera Rukoma DH		
Total cases	58	Geoscope:	Low		

Description

On August 23, 2024, at 24:30, Nyamiyaga Health Center received 6 individuals who complained of abdominal pain, diarrhea, and vomiting after consuming non-alcoholic sorghum beer (Ubushera) and banana juice at a post-marriage ceremony. Approximately 180 people attended the event. In total, 58 Patients were reported (Attack Rate: 32%), 6 patients of them were transferred to Remera Rukoma DH and 52 patients (12 males, 26 females, and 14 children under 5 years) were managed at the health center.

Actions taken:

- Remera Rukoma DH team has been deployed to the health center for support (case management and investigation).
- Laboratory samples of Banana juice and Ubushera have been collected. for further investigation.
- Monitoring of cases and active case searching in the community.

2. Foodborne illnesses outbreak in Gakenke District, Nemba DH

Confirmed cases	0	Date reported:	August 24, 2024	Risk assessment	Low
Suspected cases	47	Source:	eIDSR		
Death(s)	0	District/HFs:	Karambo HC /Nemba DH		
Total cases	47	Geoscope:	Low		

Description

On 24th August, 2024, Karambo HC, Rutabo HP and Tare HC have received a total of 47 patients complaining of abdominal pain, dizziness, vomiting and diarrhea. They had shared banana juice (umutobe) and a sorghum beer (Ikigage) at a social function. The estimated AR is 47/67 (70.15%). No deaths. The probable exposure was Ikigage.

Action taken:

- Case management
- 5 stool samples were collected for culture
- Active case searching

3. Ongoing Mpox outbreak reported in Rwanda

Rwanda confirmed its first two cases of Mpox on July 24, 2024. Since then, a total of four Mpox cases have been confirmed. All confirmed cases had a history of international travel prior the onset of symptoms. Two of the patients have been treated, cured, and discharged, while the remaining two are still undergoing treatment. Since the Mpox outbreak was confirmed in Rwanda, 748 suspected cases have been reported, including 209 new suspected cases in week 34, with no new confirmed cases.

Actions taken

- Case management
- Community sensitization on Mpox prevention
- Active case searching in community

eIDSR REPORTS COMPLETENESS & TIMELINESS EPIDEMIOLOGICAL WEEK 34

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 the Epi Week 34, the overall completeness and timeliness of disease surveillance data reporting in Rwanda, was scored to 99% and 98%, respectively. All hospitals had the high score (>80%) for the completeness and timeliness, that was to be appreciated.

