



Ministry of Health Uganda

Weekly Epidemiological Bulletin

Highlights of the week

- Updates on Cholera outbreak in Hoima District
- IDSR training impact and current training in Mid-eastern region

Summary Table

Indicator	Week 41 2015	Week 42 2015
% Districts	100	100
Ave % HU	61	63
% Timely reports	*	*
AFP	1(0)	4 (0)
Animal bites	191 (1)	256 (0)
Cholera	0	3 (0)
Dysentery	675 (0)	756 (0)
Guinea Worm	0	0
Malaria	102105 (44)	129331 (38)
Measles	225 (0)	136 (0)
Meningitis	11 (2)	3 (1)
NNT	0 (0)	2 (0)
Plague	0	0
Typhoid	1100 (4)	1291(1)

*Indicator not provided

Completeness of Reporting

All districts reported in week 42, with 63% average reporting compared to 62% in week 41. Up to 22 districts achieved the national target of $\geq 80\%$ of the health facilities reporting completeness. All, except 3 have been trained on IDSR compared to the bottom 10 districts including Mubende that have not been trained. Reporting rates by region indicate the Northern region leading, with 73%, followed by Western - 63%, Eastern - 57% and Central - 41% (**Figure 1**). The best and worst districts have been presented in **Figure 2**.

Epidemiological week 42 of 2015 [12th – 18th Oct 2015]

Disease Outbreaks

Cholera in Hoima District:

In week 42, 3 cases of cholera were reported from the cholera treatment centres (CTCs) in (Kaiso and Tonya). By 28th October, no new case were treated at these CTCs. A total of 128 cases (no death) have been reported since 2/10/2015, when a suspected outbreak was reported in Nkondo village, Nkondo Parish, Kabwoya Sub-county in Hoima District. The Index case was a 63 year old woman who developed severe diarrhea, vomiting and general body weakness on 29th/09/2015 in Nkondo II. Nkondo Treatment Centre was closed because there are no more cases. Twelve samples processed at CPHL were culture positive for *Vibrio cholerae* 01 Inaba.

Actions: District Health Team continued monitoring the outbreak and reported to the district and national leadership, community mobilisation and referral of patients to the CTCs for treatment has continued.

Unknown illness in Buliisa & Hoima districts: On 23rd September 2015, the Ministry of Health received information on suspected haemorrhagic fever in Buliisa and Hoima districts. Blood samples submitted to UVRI have tested negative for Ebola, Marburg, RVF and CCHF. By 28th October, there were no new cases in Hoima Regional Referral Hospital or in other facilities but intense surveillance for suspected cases continued.

Actions: A radio talk show on Spice FM by District leadership and radio spots in Lunyoro and English to sensitize the communities in early reporting of cases.

Acute diarrhoea cases in Rwebisengo, Ntoroko district: The event was reported on 15th October and so far, 128 cases have been treated, with no death. Laboratory samples (5) tested at CPHL indicated 2 as *Shigella* positive by culture and isolation. By 28th October, no new cases were reported but community and health facility surveillance has continued.

Malaria: Malaria cases increased by 27% in week 42 despite a slight change in reporting level. The rains however have started (from about 15th October) in several districts and this may explain part of the increase. Weather forecast indicates that El Niño rains are expected in the country, thus there may be more acute increase in malaria incidence. The cases in the 10 outbreak districts in Northern Uganda and Arua have slightly increased, and remain slightly above the normal channels (**Figures 3-13**). Highest number of cases were reported by Adjumani (4423), Arua (3925), Yumbe (3594) and Amuria (3021) districts.

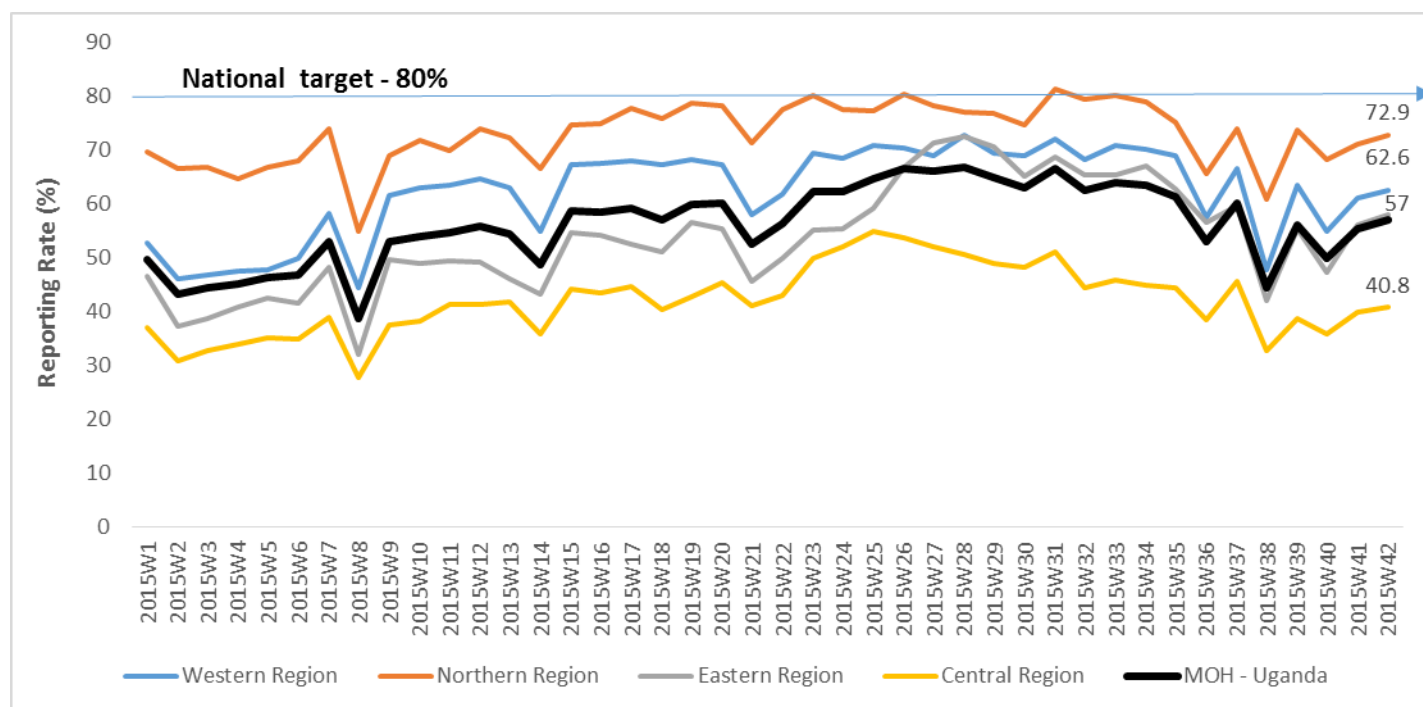


Figure 1: Percent Weekly Reporting by Region. Northern Uganda has been leading since the start of the year – close to the national target of 80%, whereas the central region is at the bottom during the respective reporting periods.

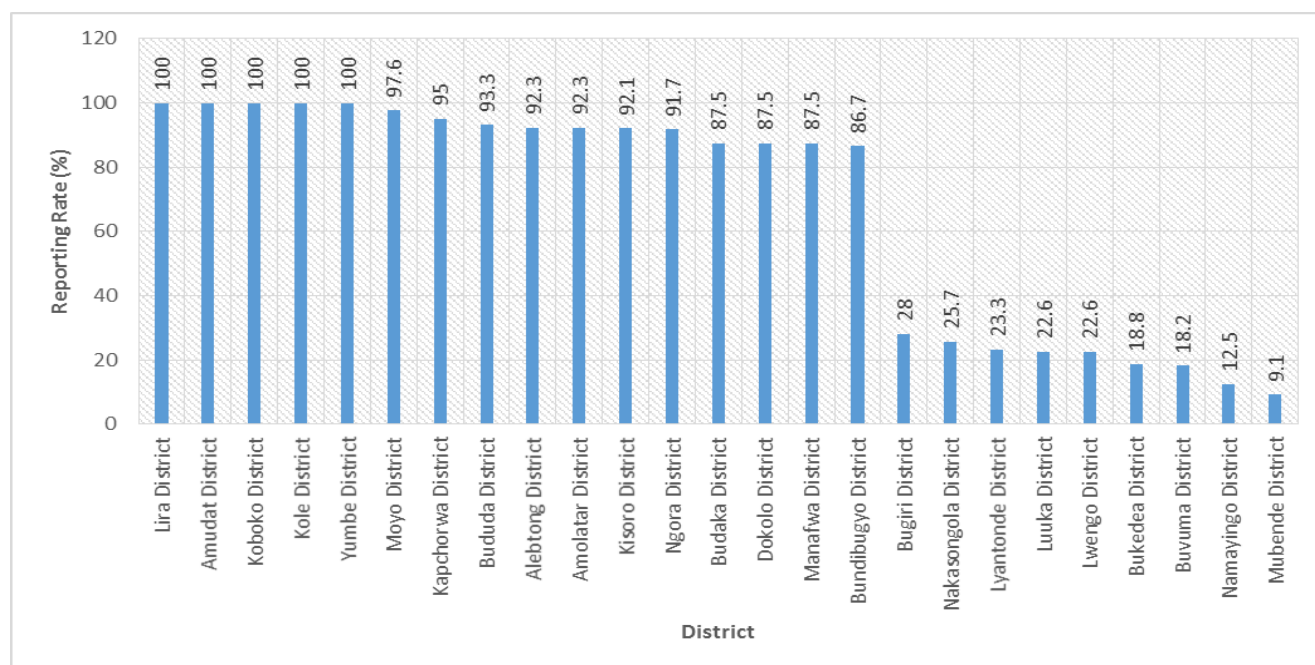


Figure 2: Percent reporting rate (completeness) of the best and worst performing districts

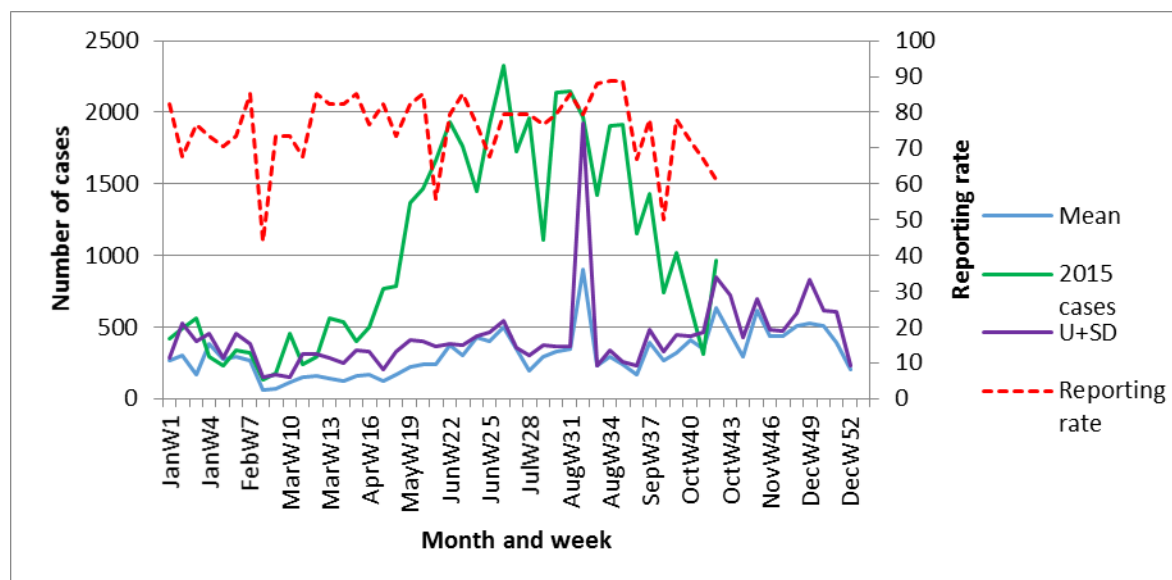


Figure 3: Malaria normal channels and reporting rates for Nwoya district

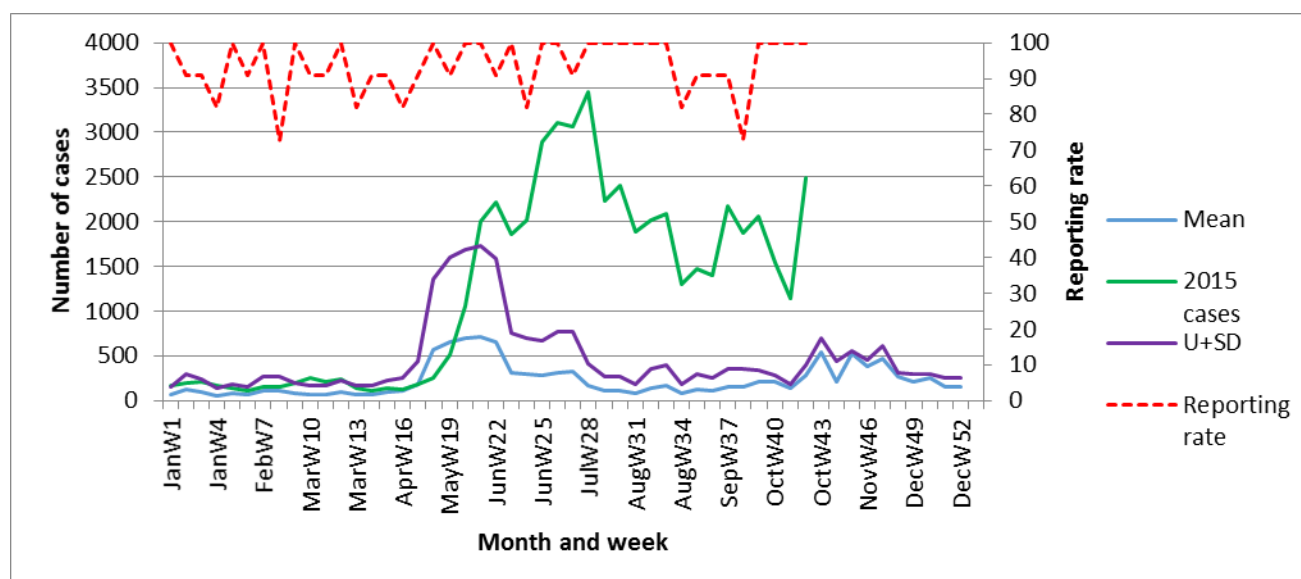


Figure 4: Malaria normal channels and reporting rates for Kole district

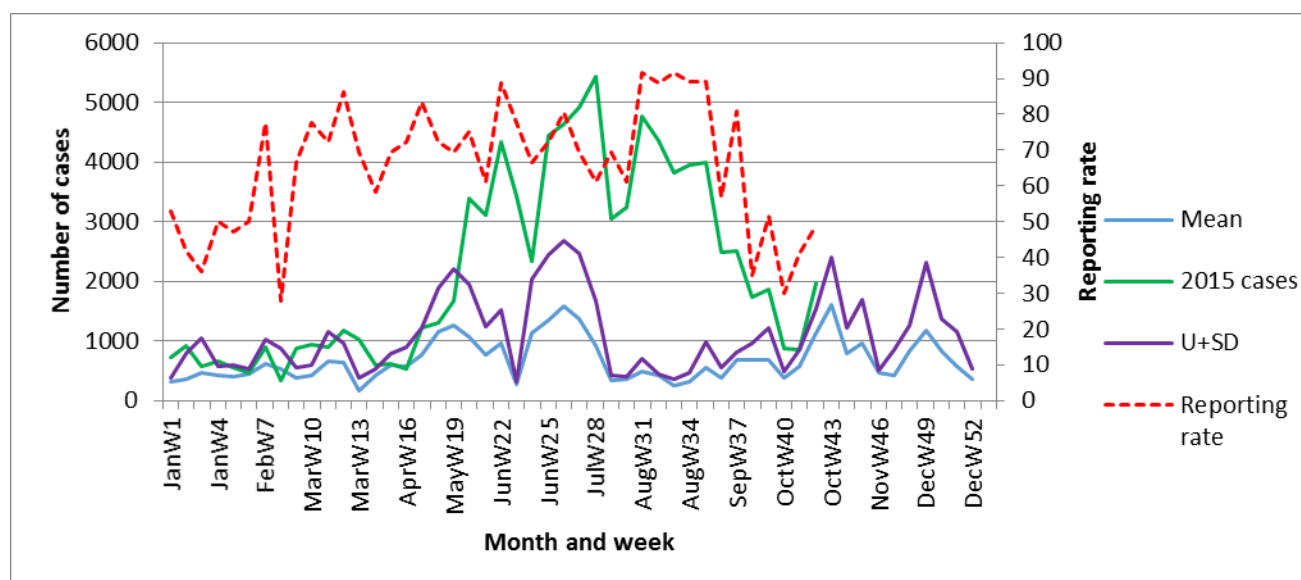


Figure 5: Malaria normal channels and reporting rates for Apac district

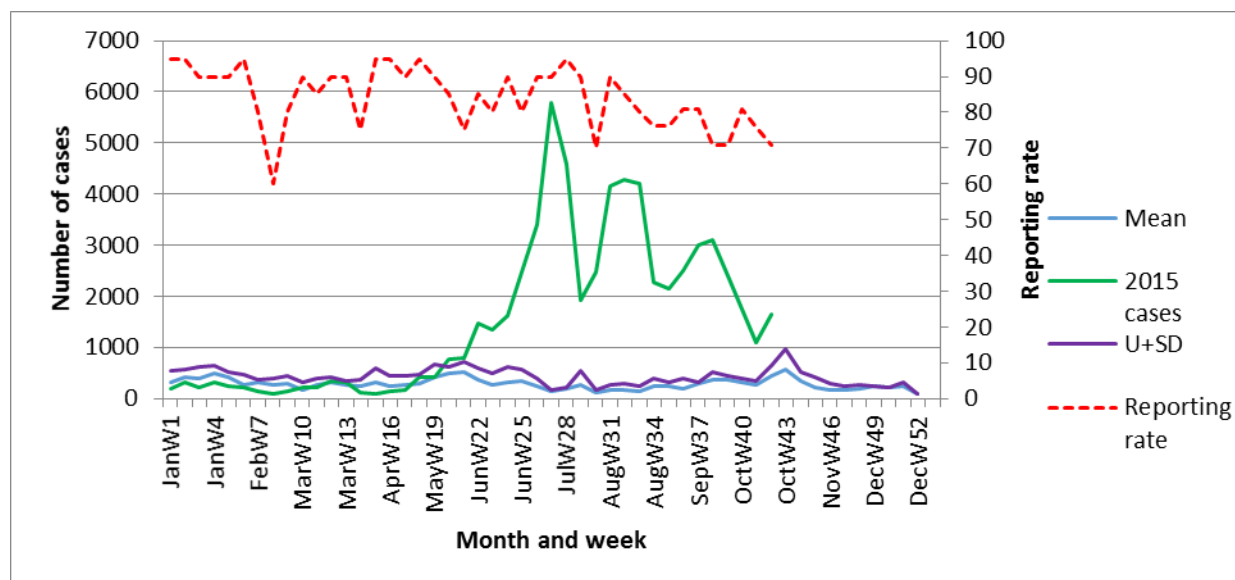


Figure 6: Malaria normal channels and reporting rates for Lamwo district

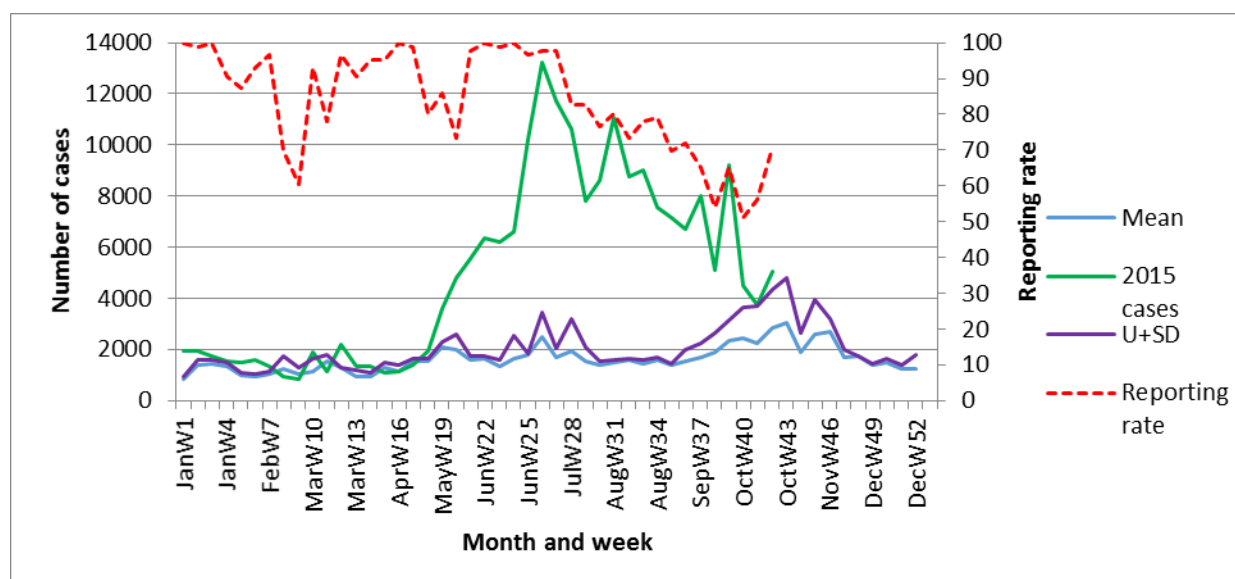


Figure 7: Malaria normal channels and reporting rates for Gulu district

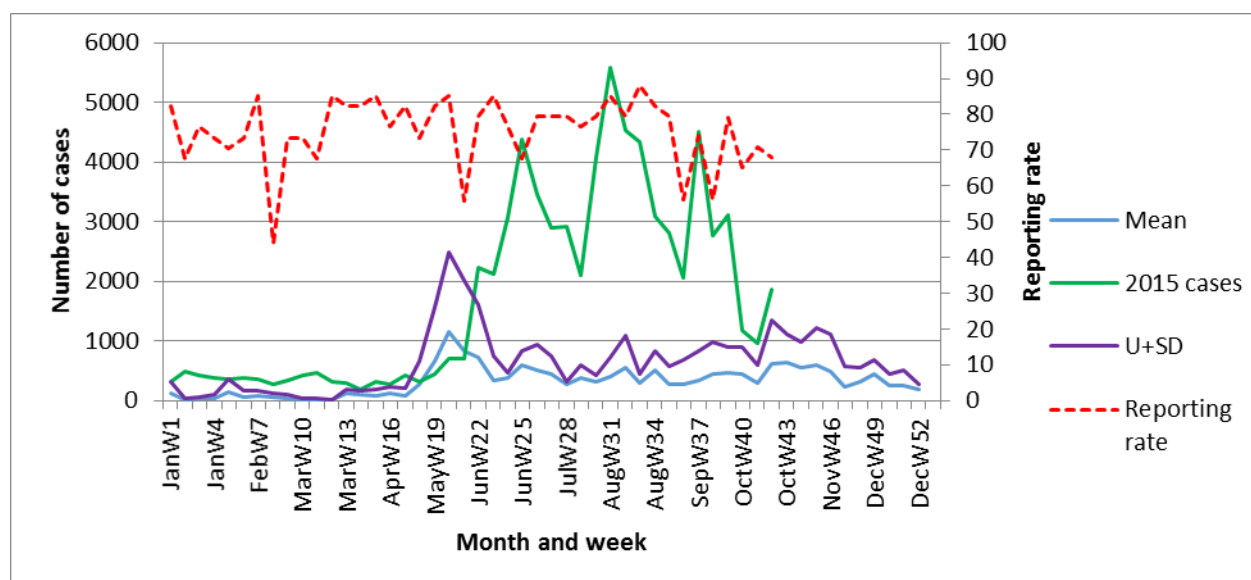


Figure 8: Malaria normal channels and reporting rates for Agago district

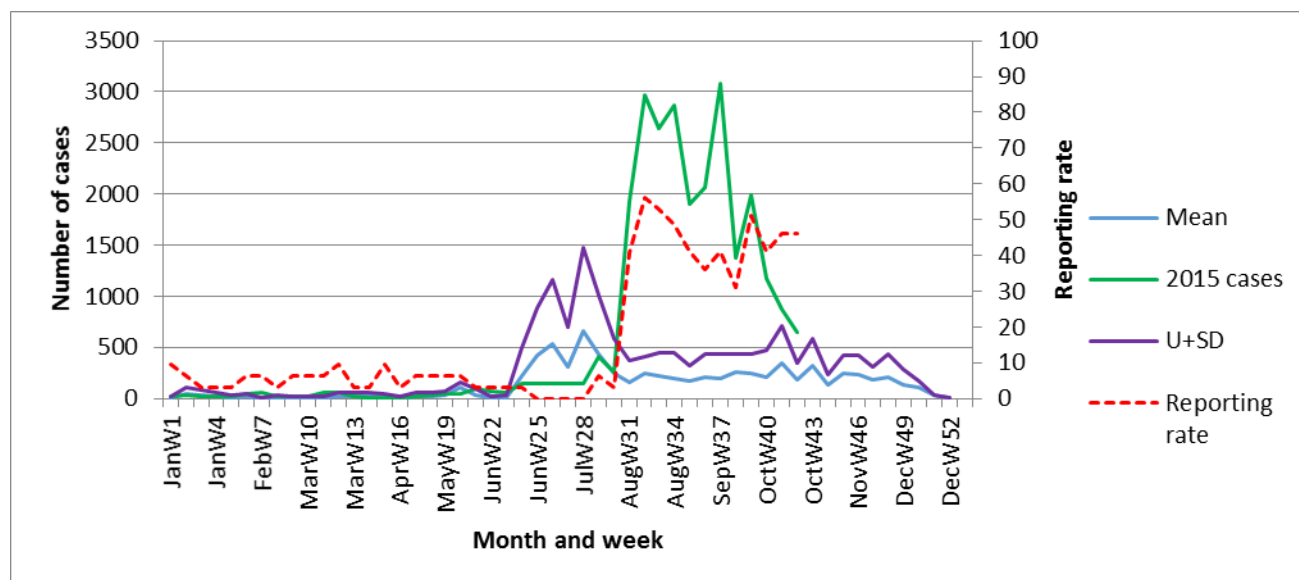


Figure 9: Malaria normal channels and reporting rates for Pader district

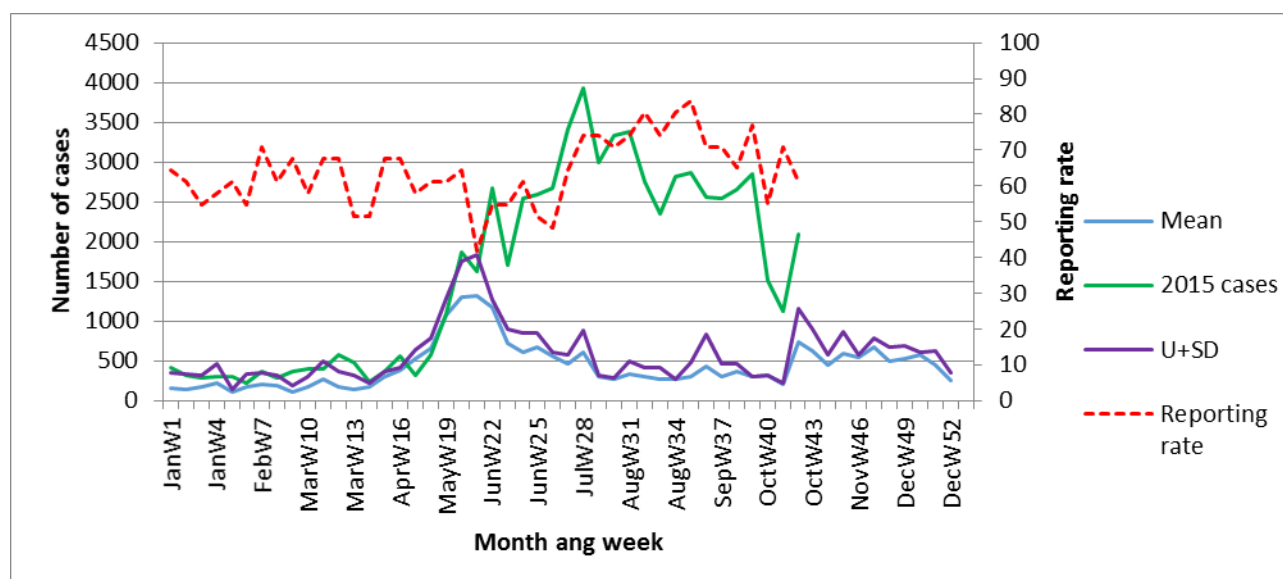


Figure 10: Malaria normal channels and reporting rates for Oyam district

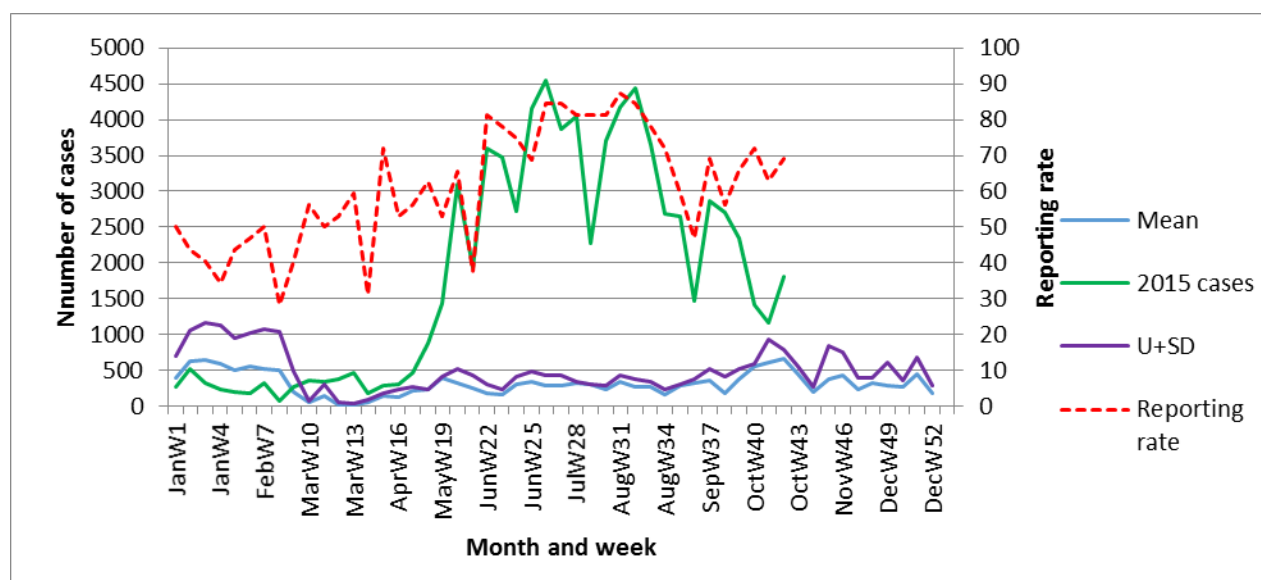


Figure 11: Malaria normal channels and reporting rates for Amuru district

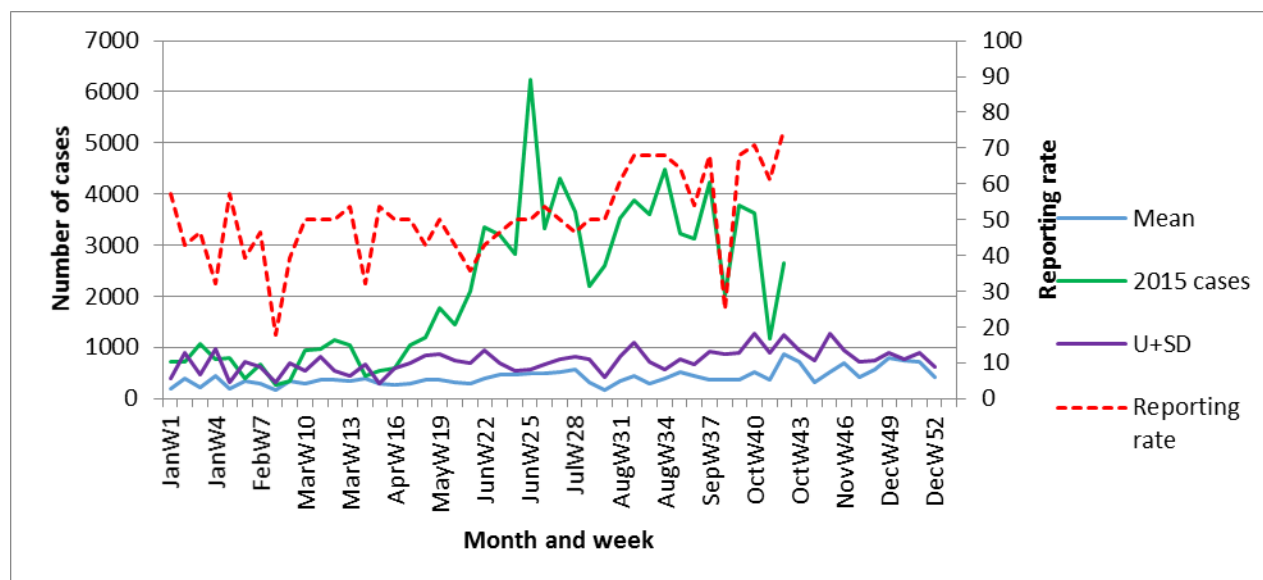


Figure 12: Malaria normal channels and reporting rates for Kitgum district. The increase in number of cases reflects the change in reporting rate but cases are still above the normal channel.

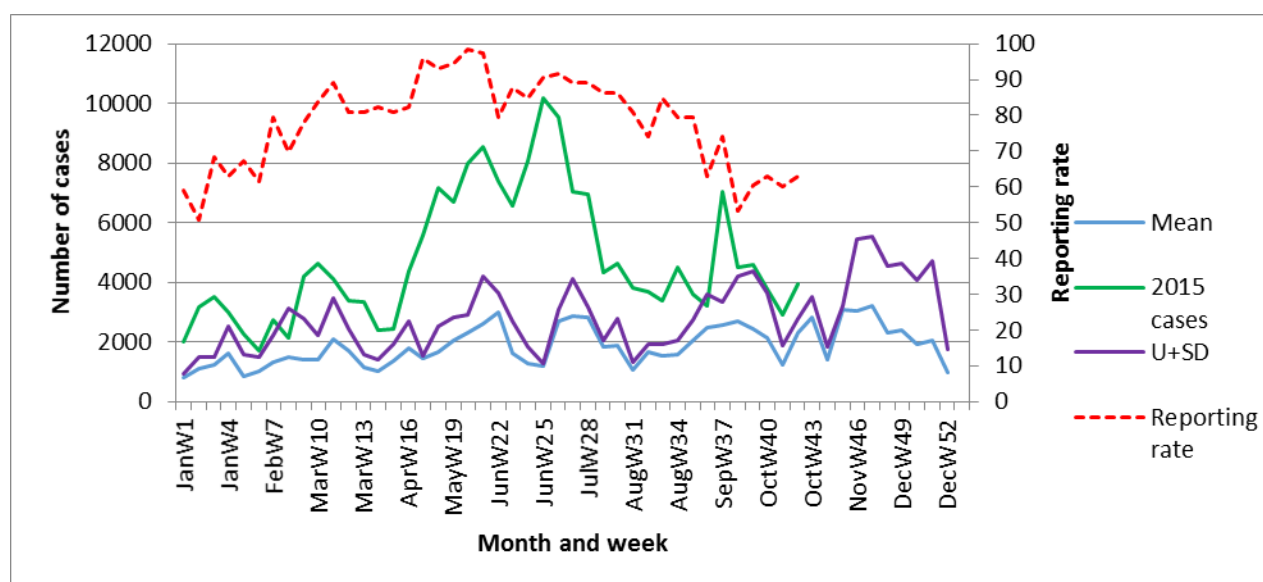


Figure 13: Malaria normal channels and reporting rates for Arua district

Other priority diseases

AFP: Every district has reported at least one AFP case this year in week 42, 4 cases were reported; one each in Kumi, Dokolo, Moyo and Mubende districts. The Non-polio AFP rate is 2.47/100,000 children aged 0 – 14 years compared to Non-polio AFP rate of 2.14/100,000 in the corresponding week of 2014.

Typhoid fever: In week 42, up to 78 districts reported at least one case of typhoid, and 19 of these exceeded the 20 cases alert threshold. Kampala city reported 151 cases, which was the highest number of suspected typhoid cases (Figure 14).

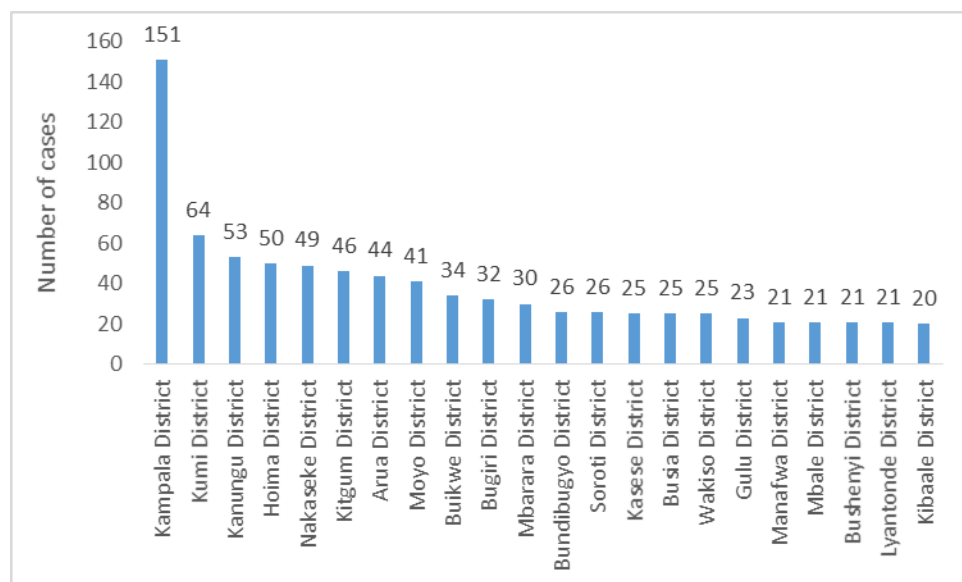


Figure 14: Districts with 20 or more typhoid cases in week 42, 2015

Measles: The number of suspected measles cases reported was similar to that in week 40. Twenty districts reported 5 or more suspected cases (**Figure 15**).

Influenza in Humans: The number of cases of influenza reported in the weekly surveillance system at Makerere University Walter Reed Project were two; one of Influenza A (H1N1) and the other A (H3).

International Health Event

Ebola VHF in West Africa

Three new confirmed cases of Ebola virus disease (EVD) are still under follow up in Guinea in the week to 25 Oct 2015. Currently 246 contacts are under follow-up in Guinea (70 are high risk), and an additional 253 contacts identified during the past 42 days remain untraced. Sierra Leone reported 0 cases for the 5th consecutive week. Confirmed 15,208 (not available) [3 cases in past 21 days]; Probable 2619 (not available); Suspected 10,649 (not available) Total 28,476 (11,298)

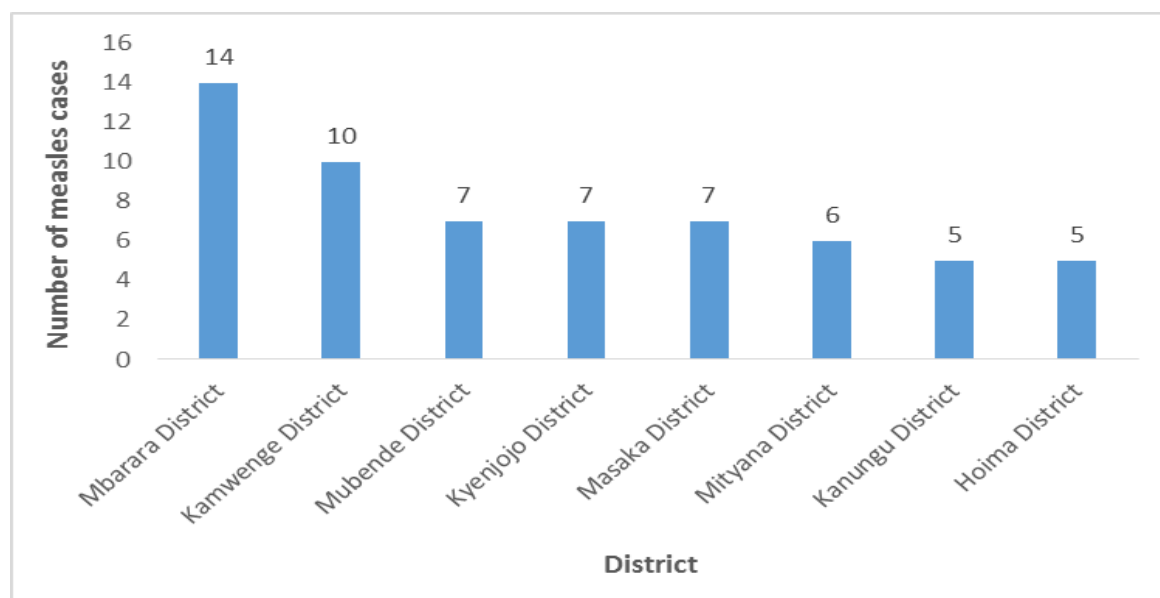


Figure 15: Districts reporting 5 or more cases of measles in week 41, 2015

Impact of IDSR training on completeness of weekly reporting

The core functions of IDSR can be achieved through a comprehensive strategy and effort by the individual health care workers who DETECT, CONFIRM, REPORT/NOTIFY and ANALYSE/INTERPRETE data; district health team

which will INVESTIGATE suspected or confirmed outbreaks, together with a national support system to RESPOND to outbreaks, COMMUNICATE, SUPERVISE and provide FEEDBACK. There are therefore several players including organisational factors that ensure and impact the success of the IDSR strategy as a whole. From April 2015, and almost every month since then, there has been training of health care workers, District Health Teams and the Epidemic Preparedness and Response Committee in 56 districts of Uganda. Although this aimed at enhancing the capacity of different players to achieve the national targets, the other factors are not yet fully addressed. In this section of the bulletin, we report on analysis of the different district performance for four cohorts trained, by comparing the reporting rate before and after IDSR training.

General note: From Karamoja, 5 out of 7 districts have showed improvement; Kotido and Moroto districts are still significantly less than the 80% target. In cohort 2, Hoima and Kamwenge districts still need support to achieve the target of 80%.

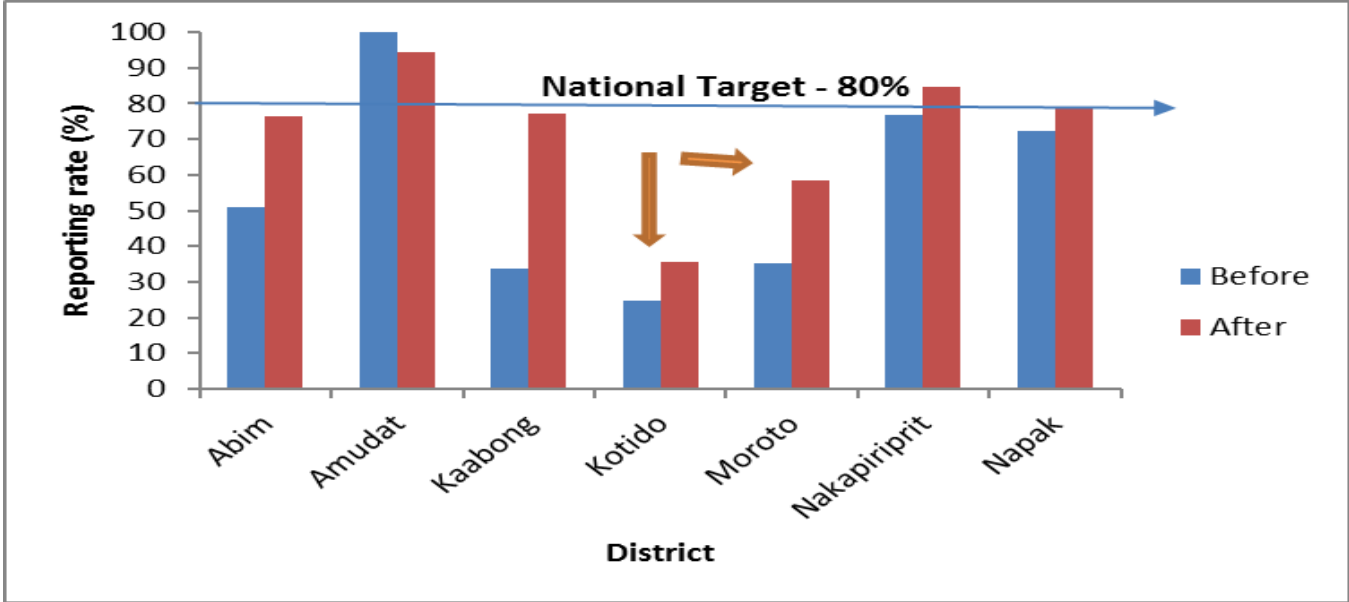


Figure 16: Average reporting rate of health facilities in Karamoja region (Cohort 1 districts) before (Jan - April) and after training - by week 42.

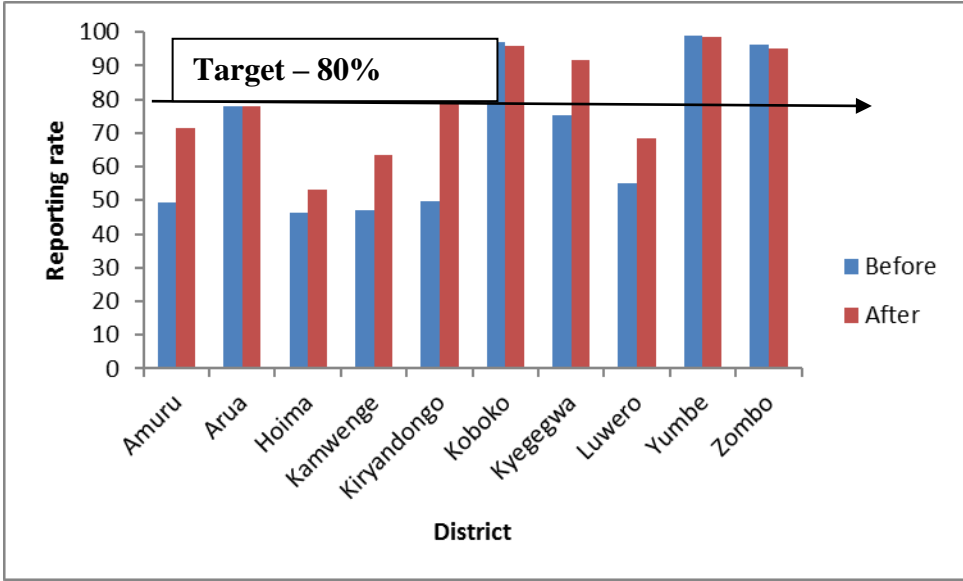


Figure 17: Average reporting rate of health facilities Cohort 2 districts before (Jan - May) and after training - by week 42

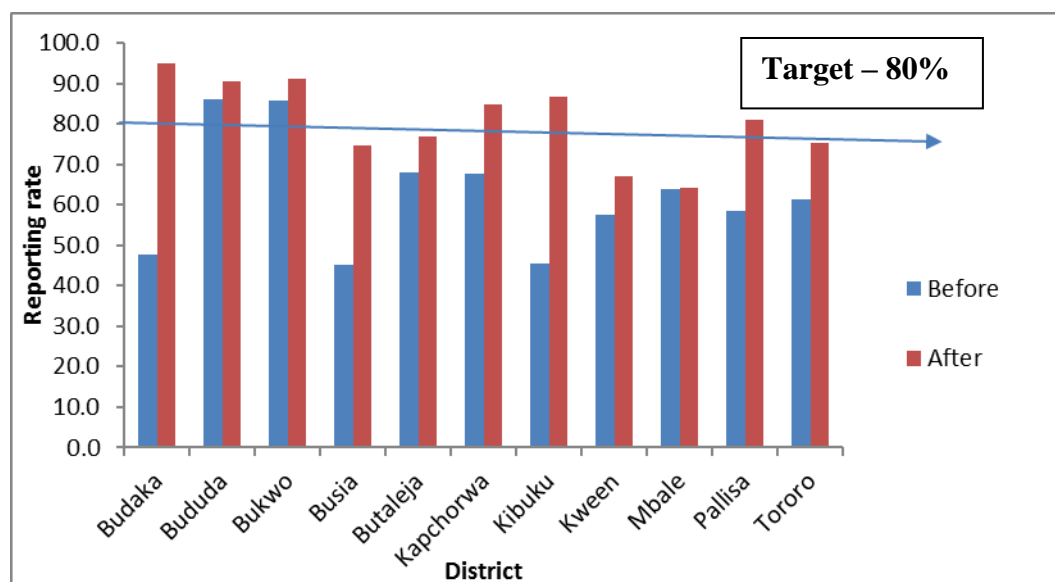


Figure 18: Average reporting rate of health facilities Cohort 3 districts before (Jan - June) and after training - by week 42

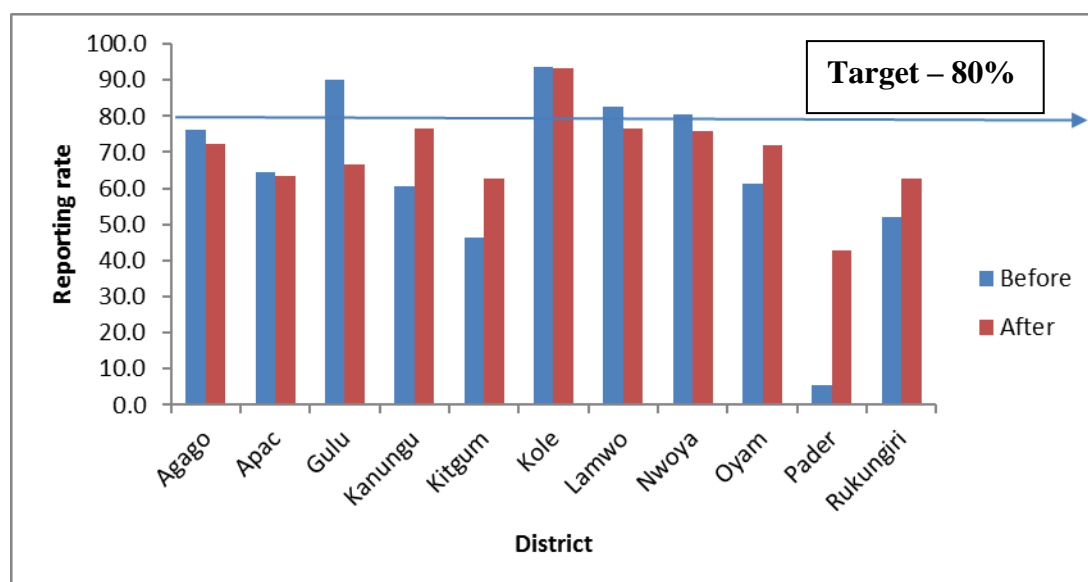


Figure 19: Average reporting rate of health facilities Cohort 4 districts before (Jan - July) and after training - by week 42

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Summary table for epidemiological reports received for week ending 18th October 2015

(Numbers in brackets indicate deaths)

District	% of H/U reporting	AFP	Animal bites	Cholera	Dysentery	Guinea Worm	Malaria	Measles	Meningitis	NNT	Plague	Typhoid Fever
Abim	75	0	4	0	12	0	820	0	0	0	0	1
Adjumani	77	0	4	0	25	0	4423(2)	0	0	0	0	0
Agago	68	0	0	0	17	0	1,856	0	0	0	0	16
Alebtong	92	0	1	0	2	0	509	0	0	0	0	7
Amolatar	92	0	2	0	1	0	232	0	0	0	0	0
Amudat	100	0	0	0	7	0	124	0	0	0	0	7
Amuria	67	0	0	0	3	0	3021(2)	0	0	0	0	2
Amuru	69	0	0	0	14	0	1,811	0	0	0	0	3
Apac	49	0	0	0	0	0	1974(2)	2	0	0	0	0
Arua	63	0	2	0	45	0	3925(1)	1	0	0	0	44
Budaka	88	0	0	0	2	0	1,028	3	0	0	0	0
Bududa	93	0	4	0	2	0	596	0	0	0	0	4
Bugiri	28	0	0	0	5	0	833	0	0	0	0	32
Buhweju	47	0	0	0	1	0	79	0	0	0	0	0
Buikwe	74	0	2	0	8	0	1,389	1	0	0	0	34
Bukedea	19	0	0	0	0	0	20	0	0	0	0	0
Bukomansimbi	65	0	0	0	0	0	124	0	0	0	0	0
Bukwo	81	0	1	0	16	0	166	0	0	0	0	19
Bulambuli	79	0	0	0	0	0	782	0	0	0	0	0
Buliisa	82	0	2	0	5	0	450	0	0	0	0	8
Bundibugyo	87	0	2	0	12	0	1,382	0	0	0	0	26
Bushenyi	46	0	0	0	0	0	605(2)	0	0	0	0	21
Busia	72	0	6	0	4	0	2,057	1	0	1	0	25
Butaleja	75	0	1	0	9	0	1,769	0	0	0	0	9
Butambala	70	0	0	0	2	0	206	0	0	0	0	1
Buvuma	18	0	0	0	2	0	138	2	0	0	0	0
Buyende	64	0	0	0	0	0	568	0	0	0	0	0
Dokolo	88	1	0	0	2	0	672	0	0	0	0	10
Gomba	74	0	0	0	2	0	230	0	0	0	0	0
Gulu	71	0	4	0	31	0	5,068	2	0	1	0	23
Hoima	47	0	16	3	36	0	1883(2)	5	0	0	0	50
Ibanda	38	0	8	0	0	0	1,092	0	0	0	0	0
Iganga	52	0	0	0	2	0	2533(1)	0	0	0	0	0
Isingiro	79	0	0	0	4	0	1,784	0	0	0	0	1
Jinja	30	0	1	0	10	0	1,324	3	0	0	0	13
Kaabong	67	0	3	0	12	0	976	0	0	0	0	0
Kabale	67	0	7	0	0	0	131	0	0	0	0	0
Kabarole	58	0	14	0	2	0	1,675	3	0	0	0	15
Kaberamaido	60	0	0	0	4	0	762	0	0	0	0	2
Kalangala	41	0	0	0	2	0	15	1	0	0	0	8
Kaliro	57	0	0	0	0	0	1,005	0	0	0	0	0
Kalungu	45	0	0	0	0	0	244	2	0	0	0	2
Kampala	31	0	17	0	8	0	1013(3)	4	0	0	0	151
Kamuli	63	0	0	0	4	0	2309(1)	1	0	0	0	13
Kamwenge	67	0	0	0	10	0	2,128	10	0	0	0	0
Kanungu	71	0	0	0	1	0	594	5	0	0	0	53
Kapchorwa	95	0	0	0	16	0	662	0	0	0	0	4
Kasese	78	0	4	0	7	0	3,491	1	0	0	0	25
Katakwi	46	0	1	0	1	0	1258(1)	0	0	0	0	0
Kayunga	54	0	2	0	13	0	1080(1)	1	0	0	0	6

District	% of H/U reporting	AFP	Animal bites	Cholera	Dysentery	Guinea Worm	Malaria	Measles	Meningitis	NNT	Plague	Typhoid Fever
Kibaale	41	0	1	0	7	0	692	4	0	0	0	20
Kiboga	61	0	1	0	10	0	311	2	0	0	0	17
Kibuku	73	0	1	0	2	0	533	0	0	0	0	0
Kiruhura	65	0	3	0	1	0	1,274	1	0	0	0	0
Kiryandongo	69	0	1	0	6	0	1,097	1	0	0	0	5
Kisoro	92	0	1	0	0	0	134	2	0	0	0	4
Kitgum	75	0	3	0	21	0	2,656	0	0	0	0	46
Koboko	100	0	3	0	8	0	1,959	0	0	0	0	4
Kole	100	0	1	0	1	0	2,486	4	0	0	0	0
Kotido	32	0	0	0	3	0	241	0	0	0	0	9
Kumi	78	1	3	0	5	0	1,653	0	0	0	0	64
Kween	63	0	0	0	5	0	369	0	0	0	0	4
Kyankwanzi	56	0	0	0	3	0	522	2	0	0	0	13
Kyegegwa	80	0	3	0	2	0	1,071	0	0	0	0	0
Kyenjojo	47	0	4	0	3	0	551	7	0	0	0	8
Lamwo	71	0	3	0	5	0	1658(1)	0	0	0	0	0
Lira	100	0	1	0	10	0	2380(1)	3	1	0	0	19
Luuka	23	0	0	0	1	0	283	0	0	0	0	0
Luwero	47	0	0	0	4	0	717	4	0	0	0	16
Lwengo	23	0	0	0	0	0	86	1	0	0	0	13
Lyantonde	23	0	2	0	2	0	222	1	0	0	0	21
Manafwa	88	0	0	0	2	0	1,025	0	0	0	0	21
Maracha	64	0	1	0	9	0	937	0	0	0	0	2
Masaka	39	0	0	0	3	0	306	7	0	0	0	1
Masindi	74	0	6	0	14	0	1,034	1	0	0	0	7
Mayuge	59	0	0	0	6	0	1,715	2	0	0	0	7
Mbale	59	0	2	0	10	0	1490(2)	1	0	0	0	21
Mbarara	79	0	4	0	10	0	828	14	0	1	0	30
Mitooma	63	0	5	0	0	0	1,000	0	0	0	0	3
Mityana	54	0	4	0	2	0	917(1)	6	0	0	0	0
Moroto	80	0	1	0	10	0	428	0	0	0	0	2
Moyo	98	1	0	0	22	0	4,034	0	0	0	0	41
Mpigi	73	0	0	0	3	0	595	2	0	0	0	7
Mubende	9	1	5	0	6	0	74	7	0	0	0	9
Mukono	51	0	1	0	6	0	850	0	0	0	0	6
Nakapiripirit	71	0	1	0	20	0	1190(3)	0	0	0	0	17
Nakaseke	71	0	11	0	10	0	558	4	0	0	0	49
Nakasongola	26	0	0	0	4	0	339	0	0	0	0	0
Namayingo	13	0	0	0	1	0	227	0	0	0	0	0
Namutumba	62	0	1	0	7	0	2,211	1	0	0	0	7
Napak	57	0	0	0	6	0	405	0	0	0	0	0
Nebbi	74	0	5	0	32	0	2895(2)	2	0	0	0	7
Ngora	92	0	2	0	4	0	1055(1)	0	0	0	0	7
Ntoroko	67	0	0	0	0	0	76	0	0	0	0	7
Ntungamo	34	0	9	0	2	0	434	0	0	0	0	7
Nwoya	61	0	0	0	0	0	965	0	0	0	0	1
Otuke	80	0	1	0	0	0	816	0	0	0	0	3
Oyam	61	0	21	0	4	0	2089(3)	0	2(1)	0	0	5
Pader	46	0	0	0	5	0	653	0	0	0	0	0
Pallisa	70	0	0	0	4	0	1204(1)	0	0	0	0	9
Rakai	47	0	1	0	9	0	1,385	0	0	0	0	16
Rubirizi	78	0	0	0	0	0	390	0	0	0	0	6
Rukungiri	49	0	2	0	0	0	867	1	0	0	0	1

District	% of H/U reporting	AFP	Animal bites	Cholera	Dysentery	Guinea Worm	Malaria	Measles	Meningitis	NNT	Plague	Typhoid Fever
Sembabule	42	0	0	0	1	0	415	1	0	0	0	17
Serere	67	0	0	0	10	0	1,057	0	0	0	0	1
Sheema	68	0	0	0	0	0	515	4	0	0	0	0
Sironko	63	0	0	0	0	0	1,077	0	0	0	0	0
Soroti	56	0	6	0	7	0	2515(3)	0	0	0	0	26
Tororo	68	0	7	0	3	0	1,268	0	0	0	0	5
Wakiso	29	0	5	0	21	0	1588(1)	3	0	0	0	25
Yumbe	100	0	2	0	26	0	3594(1)	0	0	0	0	12
Zombo	84	0	1	0	17	0	599	0	0	0	0	8
National	63	4 (0)	243 (0)	3(0)	756 (0)	0(0)	129331 (38)	136 (0)	3 (1)	2 (0)	0	1291 (0)

Key: Yellow: 100% reporting, Green: 80-99% reporting, Red: Below 80% reporting

HU= Health Units, AFP=Acute Flaccid Paralysis, NNT=Neonatal Tetanus

Compiled by the Epidemiological Surveillance Division, Ministry of Health