

HIGHLIGHTS OF THE EBOLA VIRUS DISEASE PREPAREDNESS IN UGANDA

26th October 2018 (12:00 HRS) - UPDATE No 41

a) SITUATION UPDATE FROM DEMOCRATIC REPUBLIC OF CONGO FOR 25^{TH} OCTOBER 2018, WITH DATA UP TO 24^{TH} OCTOBER 2018

Cumulative cases: 251Confirmed cases: 216

Probable : 35

Total deaths: 162

Suspect Cases under investigation : 46

Areas affected : Two provinces

North Kivu - Mabalako; Butembo; Ocha; Musienene; Beni and Bingo

Ituri- Mambasa, Mandina, Tchomia

Health and front line workers vaccinated

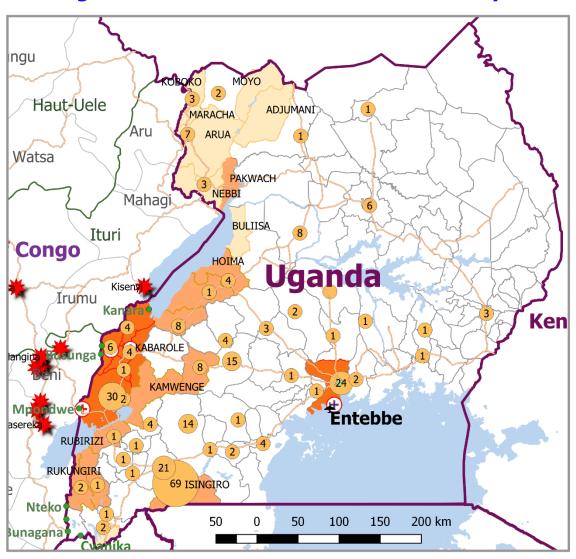
Security concerns limiting contact tracing.

b) EVD SITUATIONAL UPDATE IN UGANDA

- There is NO confirmed EVD case in Uganda.
- Active case search continues in all communities, health facilities and on formal and informal border crossing in all districts especially in the high risk ones.
- Alert cases continue to be picked, isolated, treated and blood samples picked for testing by the Uganda Virus Research Institute (UVRI). The alerts are highlighted in the specific district reports below under the Surveillance section.



EVD High risk districts and VHF Alerts since May 2018



Legend





c) PREPAREDNESS ACTIVITIES IN THE FIELD AND NATIONAL (PROGRESS AND GAPS)

COORDINATION

SURVEILLANCE ACTIVITIES

Bundibugyo District

- There were no alerts from community and at Point of Entry (PoEs).
- The DHT and WHO team conducted a support supervision visit to Kyondo HC II to check on Infection Prevention and Control as well as facility-based surveillance. The facility had good hand washing practices for patients and health care workers and regularly sensitized clients on EVD. However, there is no surveillance focal person, has few active Village Health Teams (VHTs) and no EVD posters were on display. The team sensitized the Local Council chairman, his secretary and to some community members on the EVD Community Case definition.

Kasese District

- There were no alerts from community and at PoEs.
- Mahango Health Centre III, Buthale Health Centre II and Kibiri Health Centre III were assessed on preparedness for IPC and facility-based surveillance. Health workers and VHTs were re- oriented on EVD case definition. Health workers were instructed on the Identify, Isolate and Inform strategy to manage any alert cases in the facility. VHTs were requested to watch out for people who attend communal funerals in DRC so that they are followed up for appropriate action.

Kabarole District

- There was one new alert case of a 30 year old male Congolese refugee from Kyaka who presented
 with fever, bloody diarrhoea and had abdominal pain for 3 days. He has no history of travel to DRC
 in the last 3 months. A sample was picked and sent to Uganda Virus Research Institute (UVRI) for
 analysis. He is currently in isolation at Fort Portal Regional Referral Hospital and on treatment.
- All the 54 contacts of the 30 year old female with Crimean Congo Haemorrhagic Fever (CCHF) were



followed and none of them has symptoms and their temperatures were below 36.5°C.

Bunyangabu

- There were no alerts from community and health facilities.
- Active case search on-going in the health units and communities

Ntoroko District

- There were no alerts from community, health facilities and PoEs
- There was a meeting of head teachers at Kibuuku Primary School at which the WHO team shared
 information on EVD situation in DRC and the Community Case Definition for alerts. The teachers
 promised to assist disseminate EVD information to their students and community and to be vigilant
 by reporting all alert cases to health workers.

Hoima and Kikuube Districts

- No EVD alert or suspected case reported in both Hoima and Kikuube districts on Thursday 25th
 October 2018 as at 18:00 hours.
- EVD screening continues to take place at Sebagoro, Nsonga and Kaiso entry points with a total of 71 new arrivals screened as at 18:00 hours Thursday 25th October 2018.

CASE MANAGEMENT AND IPC

Bundibugyo District

- The ETU is ready and open; currently there are no patients admitted.
- WHO team conducted a follow up to Burondo HC II. The facility showed marked improvement in hand washing practices and waste segregation and the use of bin liners. The health care workers were knowledgeable about EVD case definitions and on protocols to follow in case of an alert.
- The facility was given five boxes of disposable gloves which may last only one month. However, there is need to enforce compliance with hand washing by all patients who attend the facility.

Kasese District



- The ETU at Bwera Hospital is open; there is currently no patient admitted.
- Kyinyabwamba HC III and Kichwamba HC II were assessed on IPC readiness and they scored 38% and 31% respectively. There was no hand washing facility at the entrances, no Isolation rooms in case of an alert, congestion and untidiness. There were no safety boxes and no chlorine solution or powder for disinfection. These gaps will be addressed during the mentorship and the DHT was informed about them.

Kabarole District

 The 30 year old female patient with confirmed CCHF is still on admission, feeling much better but still positive on the first repeat test. She remains in isolation at JMEDICC and receiving treatment and care.

Ntoroko District

- No alert in Isolation as on 25th October 2018.
- Another 20 security officers working at Kayanja PoE were oriented on EVD and asked to adhere to the proper hand washing practices to protect themselves and the community.

VACCINATION

• The Principal Investigator and the vaccination team received conditional approval on the protocol until they respond to a few technical issues. They will resubmit the responses to the IRB for review and if convinced the final approval will be given through the Uganda National Council of Science and Technology. The vaccination cannot start until the final approval is given.

RISK COMMUNICATION/SOCIAL MOBILIZATION

 EVD radio messages and spots continue to be broadcast on FM station in all districts supported by UNICEF.

Kasese District

 WHO conducted an EVD community engagement session with over 60 workers of Hima Cement Factory including the factory doctors and nurse. The interaction revealed urgent need for more EVD information and capacity building on temperature screening using infrared thermometers. There were



rumours and misinformation which the team addressed. The need for more EVD information and lack of PPEs at the factory health facility were noted and brought to the attention of the DHT.

Kabarole District

- The DHT and WHO team had a follow-up meeting with 20 health workers and students of Fort Portal Regional Referral Hospital female ward who came into contact with the confirmed case of CCHF currently recovering at the hospital. The team explained the importance of following them up as contacts and the requirement for immediate isolation in case anyone develops symptoms.
- Uganda Red Cross Society volunteers visited 229 households in Kidukuru, Kijanja, Bukuku, Karago, Karangura, Kiteere, Kanyamakeere and Katumba villages and reached 248 males, 287 females and 229 children with EVD messages.
- Eight (8) community groups were met with 107 males, 125 females and 124 children; 102 EVD posters displayed and 88 leaflets distributed. Four (4) hand washing demonstrations were conducted.

Bunyangabu

- URCS volunteers with support from UNICEF conducted 77 home visits, 230 persons (94 were males, 136 females and 47 children) were reached with EVD messages.
- Three (3) dialogue meetings on EVD were held in schools and villages in Kabonero, Kibiito TC and Rwimi TC in which 147 people (68 males, 79 females and 28 children) participated.



CROSS BORDER ACTIVITIES

Bundibugyo

- No EVD alerts at all border crossing points.
- The Infectious Diseases Institute and the Ministry of Health conducted onsite training for 72 border crossing staff at Kazaroho, Kasili, Bundingoma, Butoogho, and other informal crossing points. The participants were temperature screeners, police officer, immigration officers, customs officers and army personnel. The training was on the RING concept (Recognize Isolate Notify and Give support) in responding to public health events, primary screening, referral of sick travellers for secondary screening and proper procedures of taking temperature readings.

Kasese District

- No alerts reported at any of the border crossings.
- WFP is constructing two (2) flash toilet facilities at Mpondwe border crossing for health workers and they should be complete in the next 2 days.

LOGISTICS

Kabarole District

- The WHO Regional Logistician attended a meeting with the Kabarole District Task Force (DTF)
 which identified the following items needed to make the hospital ambulance operational:
 - Stretcher.
 - Cylinder regulator
 - Stretcher belts
 - First aid box and materials
 - Gloves
 - Aprons
 - PPE Kit for ambulance driver/health workers
 - Car battery
 - Tyres



Bunyangabu District

The WHO Regional Logistician attended had a meeting with Bunyangabu DTF which identified the following gaps:

- Stand by VHF (PPE) kit for the District.
- Gloves for the health facilities.
- An ambulance for the district or standby transport for referrals.
- Hand washing facilities for schools, police stations (10) and faith based facilities.
- A district ETU.

Ntoroko District

• WFP set up a new tent at Katanga and relocated the old one to Kayanja 1. Another one will be set up at Kayanja II on 26th October 2018.

-End-

For more information, please contact:

Dr Yonas Tegegn Woldemariam, WHO Representative-tegegny@who.int

Dr Miriam Nanyunja, Disease Prevention and Control officer - nanyunjam@who.int

Mr Innocent Komakech – komakechi@who.int

Mr Benjamin Sensasi, Communication Officer - Sensasib@who.int