



HIGHLIGHTS OF THE EBOLA VIRUS DISEASE PREPAREDNESS IN UGANDA

13TH AUGUST 2018 (12:00 HRS) – UPDATE No 9

Situation Update from Democratic Republic of Congo as on 12th August 2018

- Cumulative cases:52
- Confirmed cases : 25
- Probable : 27
- Total deaths : 39
- Cases under investigation : 48
- Areas affected : Two provinces
 - North Kivu - Mabalako; Butembo; Ocha; Musienene; Beni and Bingo
 - Ituri- Mambasa, Mandina

Note : There is no suspected or confirmed case in Uganda

EVD Preparedness in Uganda

i) Coordination



Prime Minister of Uganda, Dr Ruhakana Rugunda (right) receives the WHO Director General Dr Tedros Adhanom Ghebreyesus during his visit Uganda to discuss the country's readiness to respond to Ebola . On the right, WHO Regional Director for Africa Dr Matshidiso Moeti (black) receives briefing notes on WHO support from the WHO Representative Dr Yonas Tegegn Woldemariam.



- The WHO Director General Dr Tedros Adhanom Ghebreyesus and the WHO Regional Director Dr Matshidiso Moeti stopped over in Uganda on Saturday on their way from DRC where they assessed WHO's response to the current Ebola Virus Disease (EVD) outbreak. The WHO Representative Dr Yonas Tegegn Woldermariam briefed them on Uganda's EVD preparedness. The Director General later met the Prime Minister Dr Ruhakana Rugunda, the Minister of Foreign Affairs Hon Sam Kutesa, the Minister of Health Dr Jane Ruth Aceng and the Minister of State for Primary Health Care Hon Sarah Opendi. They discussed Uganda's EVD preparedness and WHO support.
- The Kasese District Task Force was strengthened by inclusion of more members such as the Bwera Town Clerk and the Regional Police Commander. Communication was also improved by creation of a "WhatsApp" group that included all District Task Force (DTF) members.
- Key staff from UNICEF zonal offices (Mbarara and Gulu) have been deployed to the field, to all high districts, to review the situation in areas of WASH, Infection prevention and control, community awareness and social mobilization.
- UNHCR supported Yumbe and Arua to develop Ebola Ebola Preparedness and Response Plans and activation of the District Task Forces.

(ii) Laboratory investigations/Surveillance



Temperature screening at Mpondwe border point, Uganda-DRC border

- WHO and MoH teams started distribution of surveillance materials (case definition, contact tracing and case investigation forms) through the hub system to all health facilities in Kasese district.



- WHO and MoH planned training sessions for health facility staff in case detection, contact tracing and investigation in Kasese district. The training starts today. Village Health Teams (VHTs) training will also start at the same time.
- Red Cross and Kasese DTF responded to two alerts; one was a patient who frequently crosses the DRC/Uganda border for farming that had some suspicious symptoms including conjunctival injection; a specimen collected from the patient tested negative for VHFs. Another alert was a traveller from Goma in DRC detected at Mpondwe border crossing. The person was assessed and found to be in good health with no signs of EVD, however is still being monitored daily for any symptoms.
- There was another alert at Butoogo border point in Bundibugyo district that tested the operational readiness of the EVD response systems. It was 19 year old lady with (Temp 38.6°C), diarrhoea, general body weakness, loss of appetite, muscle and joint pains, headache, and cough. She also complained of hiccups, pain in the eyes, and neck pain. A blood sample taken from her for more investigation and the patient given treatment. Results are still awaited. However this incident highlighted some gaps in referral, case management and coordination that need urgent attention.
- There was another alert in Kabarole district to which District, MoH and WHO teams in the field immediately responded. The patient who has never been to DRC and with no EVD related deaths in her community was assessed and found to be suffering from bleeding peptic ulcers. The patient did not meet the EVD case definition but a blood sample was taken from her for further investigations. Results are still awaited.

ii) Risk Communication

- Radio talks were held in Bundibugyo and Kasese district featuring district and technical officials.
- The airing of radio spots (in 13 languages) across 21 radio stations in 13 high-risk districts will continue for the period of three months (August – October 2018). Besides, UNICEF Uganda shared the copies of the radio spots with District Health Officials, district WhatsApp groups, and Uganda Red Cross Society for further distribution via social media platforms.
- EVD Posters in English, Rufumbira, Rubwisi, Rukonjo, Ruyankole-Rukiga, Runyoro-Rutoro have been printed and distributed to the 13 high risk districts for onward distribution at village level. Distribution of remaining languages will continue in the week beginning 13 August.



- EVD prevention and control messages continue to be shared throughout the country using U-report and mTrack platforms.

iv) Cross-border Activities



Mpondwe border point that receives about 10,000 people from DRC during market days

- UNHCR supported Kanungu district with Point of Entry screening.
- On 10 August, UNICEF held a high-level meeting with the Uganda Red Cross Society (URCS) and UNHCR to discuss complementarity of efforts, identify gaps and discuss possible partnership to strengthen risk communication, WASH and Infection Prevention and Control at major points of entry along DRC border including areas through which refugees enter Uganda. URCS is deploying volunteers to high risks districts and border points.

v) Case management

- Fifty (50) health staff including Laboratory personnel were identified for training on EVD response. Preparation were finalized on Sunday and the training will take place this week. At Bwera Hospital case management staff were on standby. There is need for an additional medical officer to strengthen this team.
- UNHCR supported Isingiro district isolation facility.

vi) **Logistics**



Hand washing at the border before crossing into Uganda. WHO provided 10 Litres of JIK to Bwera border crossing to facilitate hand washing

- WHO provided 10 Litres of Jik to Bwera border crossing to facilitate safe screening of people entering from DRC.
- World Food Programme (WFP) will provide two tents for Bwera Hospital and the Screening point in Mpondwe if the district requests.
- UNICEF delivered 200 hand washing facilities, 33 buckets of HTC chlorine, 120 cartons of washing soap and 24 boxes of water purification tablets to Kisoro, Kasese, Bundibugyo, Ntoroko, Kabarole, Kikuube, Kyegegwa and Kamwenge districts .
- UNICEF supported training of health workers on the use of chlorine generators that were dispatched last week to Kisoro and Kasese districts. UNICEF will work with districts on the continued use of the generator for high priority health facilities.

-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