



EBOLA VIRUS DISEASE IN UGANDA

30 June 2019 as of 20:00 hrs

Situation Report

Rep #19



1. Situation



Key Highlights

- 03 cumulative cases (00 probable 03 confirmed)
- All (03) confirmed cases have died (CFR =100%)
- Today is day 17 since the death of the last confirmed case who passed on the 13 June 2019 while on transfer to the DRC for further management
- There are 93 contacts under follow up
 - 92 were reviewed today and found okay.
- There are 3 admissions in Bwera Hospital ETU
- Active case search and death surveillance are ongoing in the health facilities and the communities as the district response teams continue to investigate all alerts
- Cumulatively 1437 individuals have been vaccinated: 78 contacts, 747 contacts of contacts and 612 frontline health workers
- 59 individuals were vaccinated today: 00 contacts, 00 contacts of contacts and 59 front-line health workers

EPIDEMIOLOGICAL SUMMARY

Background

On 11th June 2019, the Ministry of Health of Uganda declared the 6th outbreak of Ebola Virus Disease (EVD) in the country affecting Kasese district in South Western Uganda. The first case was a five-year-old child with a recent history of travel to the Democratic Republic of Congo (DRC). This child was one of six people that travelled from the DRC while still being monitored as suspect cases following a burial of the grandfather who succumbed to EVD. The child was ill by the time he crossed into Uganda and the mother took him for medical care at Kagando hospital in Kasese district. He presented with symptoms of vomiting blood, bloody diarrhea, muscle pain, headache, fatigue and abdominal pain. The child tested positive for Ebola Zaire by PCR and he later died on 11th June 2019. Two other members of the family, a grandmother and 3-year-old brother also tested positive for Ebola on 12 June 2019 and the

grandmother died later the same day. The 3-year-old brother also died on the 13 June 2019. Since then no new confirmed EVD case has been reported in Uganda.

Figure 1: Movement of the EVD cases from Congo into Uganda

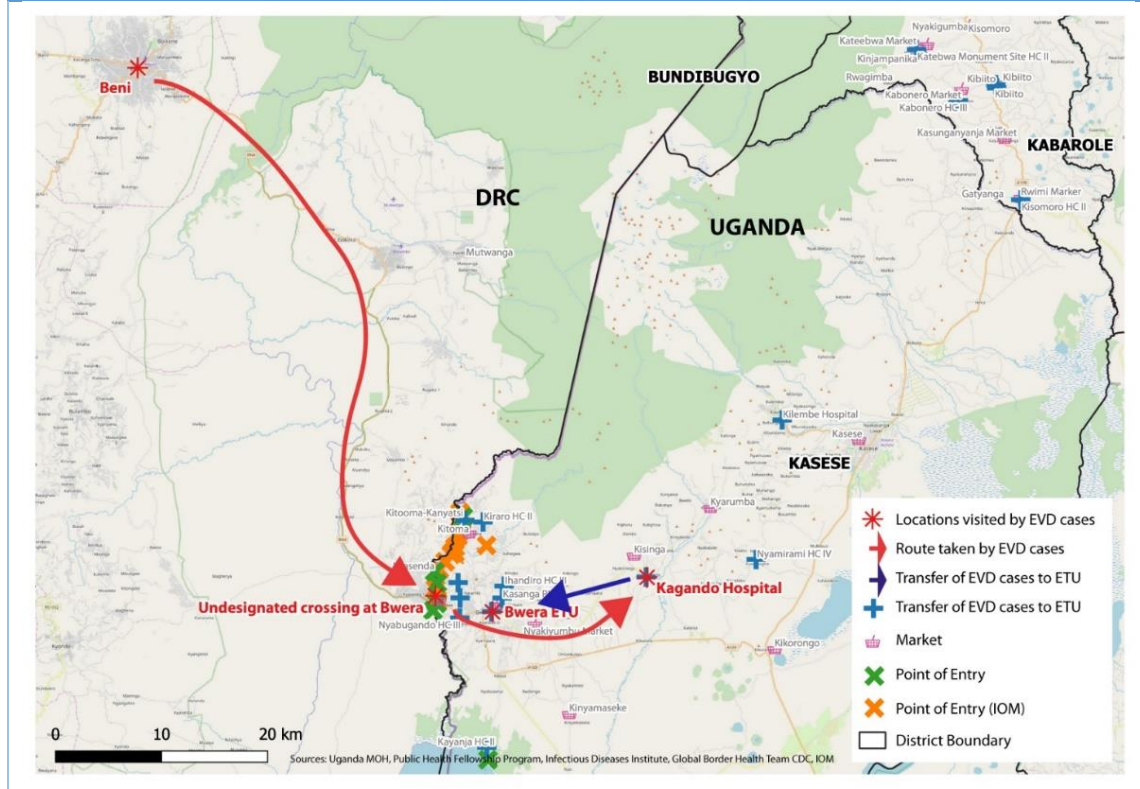


Table 1: Summary of Ebola virus Disease outbreak in Kasese, June 2019

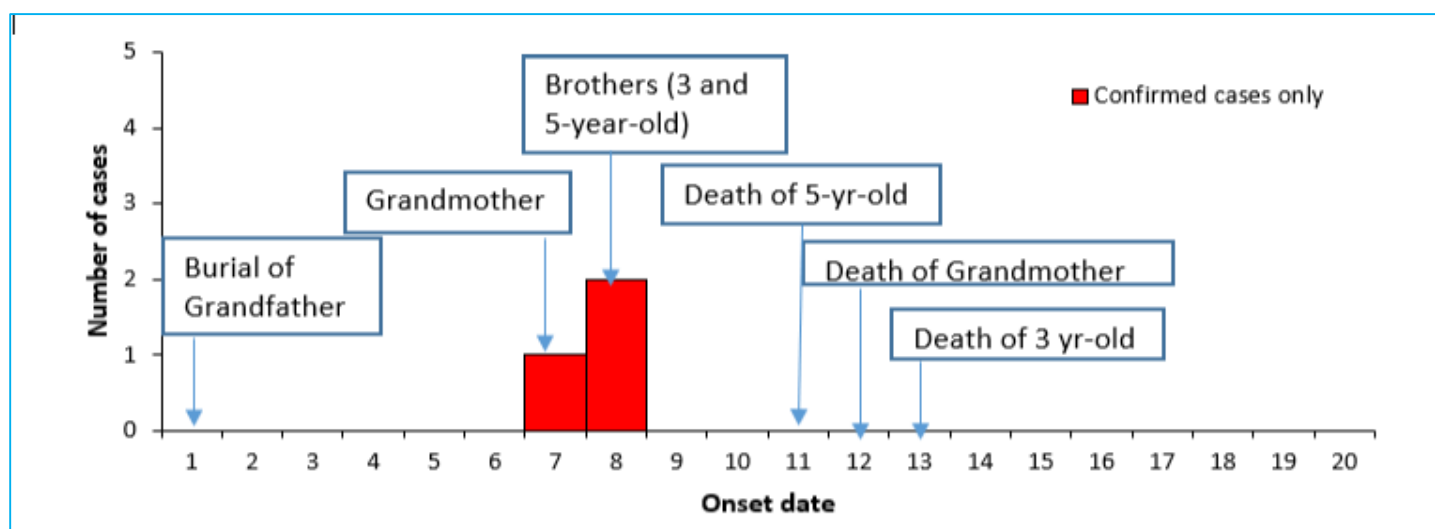
SUMMARY OF CASES (as of 30/June/2019)	Number
New suspect cases today	00
New deaths today	00
Cumulative cases (probable and confirmed)	03
Probable	00
Confirmed	03
Cumulative deaths (probable and confirmed)	03 ¹
Health facilities	03
Community	00
Deaths among confirmed cases	03
Number of cases on admission (probable and confirmed)	00
Probable	00
Confirmed	00
Suspect cases on admission under investigation	03
Runaways from isolation	00
Cumulative number of contacts listed as of today	114
Number of contacts that have completed 21 days	21
Number of contacts under follow up	93
Number of contacts followed up today	92

Cumulative number of individuals vaccinated	1,437
Number of contacts vaccinated	78
Health workers	04
Community	74
Number of contacts of contacts vaccinated	747
Health workers	00
Community	747
Number of front-line health workers vaccinated	612
Number of contacts vaccinated today	00
Health workers	00
Community	00
Number of contacts of contacts vaccinated today	00
Health workers	00
Community	00
Number of front-line health workers vaccinated today	59
Specimens collected and sent to the lab. today	04
Cumulative specimens collected	39 ²
Cumulative cases with lab confirmation	03
Cumulative samples tested negative	31
Specimens with pending results	05
Date of discharge/death of last confirmed case	13-6-19

¹ includes 1 death in the DRC

² including 12 repeat samples

Figure 2: Epidemic curve of Ebola Virus Disease outbreak in Kasese, June 2019



2. Public Health Actions to date

Coordination: The District held its 19th DTF meeting chaired by a member of the district council. After extensive discussion, the DTF

agreed on the following action points;

- There is Urgent need for distribution of hand washing facilities and others logistics to screening posts
- Partners exiting from the response without any notification to the coordination
- Full participation and commitment during the partner accountability forum

Surveillance

- Contact tracing team followed up 99% (62/63) contacts in Bwera Hospital. All contacts 100% (30/30) at Kagando Hospital were followed up today
- Supervised adherence to IPC practices at a burial in Rwembio village in Kagando Parish with over 700 mourners. There were enough hand-wash facilities and the VHTs on ground ensured that every mourner washed their hands
- Screened **12,781** people at 26 border crossings and bus terminals

Laboratory

- Four blood samples were collected in duplicate for the mobile laboratory and UVRI. Three of these are repeat samples and one is a first sample
- The test results from the mobile laboratory were negative for Ebola Zaire
- One of the results from yesterday's samples referred to UVRI was negative
- Cumulative number of samples collected and referred for testing is thirty nine (39) including twelve (12) repeats. Three samples tested positive and fourteen tested negative.
- Five results were pending from the UVRI

Case Management

- One alert, a 24yr old pregnant woman, was temporarily admitted in the ETU today. She presented with fever and bloody diarrhoea, while on admission in maternity ward. Provisional results were negative for Ebola Zaire. She was discharged from the ETU and returned to the maternity ward
- Three patients are admitted in the ETU. Repeat tests conducted today are negative for Ebola Zaire

Risk Communication

- Conducted one evening radio talk-show at Guide Radio FM.
- Held one community meeting (Ihandiro sub-county) reaching 92 individuals with EVD messages on EVD community case definition as well as prevention

Infection Prevention and Control

- Team visited Kilembe Hospital and recommended placement of hadn washing facilities at all entrances to the wards. They also recommended temperature screening and hand washing for all persons entering the hospital, including health workers

WASH

- Reached seven (7) churches in Muhokya, Mpondwe Lubiriha T.C and kasese municipality, with 4 having functional hand washing facilities with soap and good sanitation and the rest promised to install by next week.
- Team distributed monitoring and evaluation tools to health assistants to collect data on key indicators of WASH

Vaccination

- 59 health workers were vaccinated today
- Cumulatively 1,437 individuals have been vaccinated including 78 contacts with four (4) health workers, 747 contacts of contacts and 612 frontline health workers

Psychosocial support

- The team held an evaluation meeting to discuss the achievements, challenges, and way forward as we prepare to handover
- Engage with Local Council I Chairpersons of Bukhuna I, Karambi sub-county; Kyambogho I and Pirda Ward, Kinyamaseke sub-county. We educated them on the dangers of stigma and discrimination that contacts in their communities have suffered. They pledged to be supportive through conducting community dialogues.

3. Partnership

We acknowledge the support from the following partners in response to Kasese Ebola outbreak.

Thematic Area	Partner
Coordination	WHO, UNICEF and Save the Children, Uganda Red Cross
Surveillance	AFENET, WHO, Uganda Red Cross,
Laboratory	WHO, CDC Uganda
Risk Communication	UNICEF, WHO, UPDF, BRAC-Uganda, USAID CHC-Obulam, Uganda RedCross, Save the Children, St. John's Ambulance,
Case Management	WHO, MSF
Infection Prevention & Control/ WASH	WHO, UNICEF, St. John's Ambulance, Save the Children, Uganda Red Cross, IRC, IDI
Psychosocial Support	AFENET, WHO, UNICEF
Logistics	WHO, UNICEF, WFP, Uganda Red Cross, BRAC Uganda
Security	UPDF, Uganda Police
Points of Entry	WHO, Uganda Red Cross, UNICEF
Vaccine and therapeutics	WHO, MSF
Financial support	World Bank/EAPHLNP

5. Challenges

Uncertainty on the Infection Prevention and Control strategy and facilitation for IPC responders

- Shortage of IEC materials translated into local languages (Lukhonzon and Runyakitara)
- Inadequate thermo-flash and hand-wash facilities at health facilities and PoEs

6. Conclusion

Kasese remains at high risk for importation of EVD given the outbreak in the DRC, and high population movements between the two countries. The recent tribal clashes in the Ituri Province in the DRC, and the resulting displacement refugee influx into Uganda has heightened the risk of EVD importation to the districts of Hoima, Kikuube, Kagadi, Ntoroko, and Bundibugyo.