



# EBOLA VIRUS DISEASE IN UGANDA



14 Jun 2019

Situation Report

SitRep #03



## 1. Situation update



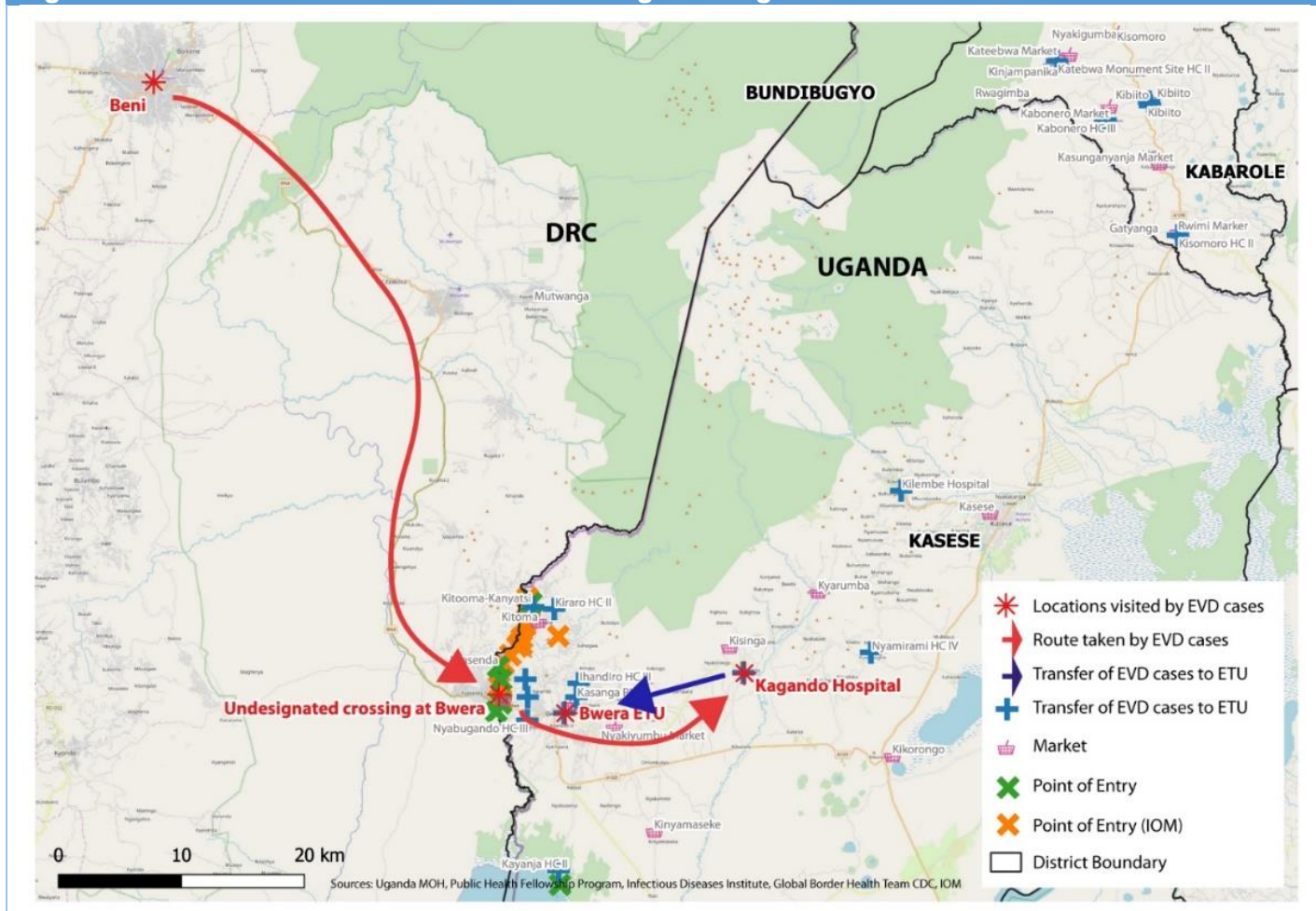
## Key Highlights

- Today, the outbreak has **03** cumulative cases (**00** probable **03** confirmed)
- All (**03**) confirmed cases have died (**CFR =100%**)
- Today is the 1<sup>st</sup> day since the death of the last confirmed case
- There are 112 contacts under follow up
  - None has developed symptoms to date
- Active case search and death surveillance are ongoing in the health facilities and the communities as the district response team continue to investigate all alerts

On 11<sup>th</sup> June 2019, the Ministry of Health of Uganda declared the 6<sup>th</sup> 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 6 people that escaped 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 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 11<sup>th</sup> 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.

As of today, there is no confirmed case in Uganda, however 3 suspected cases are admitted at Bwera Ebola Treatment Unit. One hundred twelve (112) contacts have been line listed for follow up so far.

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



**Table 1: Ebola virus disease cases by classification**

<b>SUMMARY OF CASES</b>	
New suspect cases today	01
New deaths today	01
Cumulative cases	07
Suspect	04
Probable	00
Confirmed	03
Cumulative deaths (suspect, probable and confirmed) in	03*
Health facilities	03
Community	00
Deaths among confirmed cases	03
Number of cases on admission	03
Suspect	03
Probable	00
Confirmed	00
Cumulative cases discharged	01
Cases who are health workers	00
Suspect	00
Probable	00
Confirmed	00
Confirmed cases of health workers who have died	00
Current admissions of health care workers	00
Suspect	00
Probable	00
Confirmed	00
Cumulative number of health workers discharged	00
Runaways from isolation	00
Number of contacts listed as of today	112**
Number of contacts that have completed 21 days	00
Number of contacts under follow up	112
Number of contacts followed up today	80
Cumulative number of contacts who developed symptoms	00
Specimens collected and sent to the lab. Today	01
Cumulative specimens collected	07***
Cumulative cases with lab confirmation	03
Cumulative samples tested negative	03
Specimens with pending results	01
Date of discharge/death of last confirmed case	13 June 2019

\* includes 1 death in the DRC

\*\* contact tracing list still undergoing cleaning

\*\*\* Does not include repeat samples

## 2. Public Health Actions to date

### Coordination

EVD District Task Force meeting was held today focusing on action points raised during the previous DTF and to obtain feedback on the various field activities conducted. The meeting was attended by subcommittee heads and members from Kasese District Task Force, MoH, WHO, UNICEF, CDC and USAID representatives. Key issues discussed included

- Finalised the district response plan
- Generated a Draft logistics requirement list
- Mobilisation of local resources and redistribution of commodities
- Review response team actions
- Vaccination plan
- Funding for radio talk shows. Partners to be requested to fund them.
- Social mobilization to be done to find out issues of concern in the community
- More hand washing facilities are required
- Encouraged risk communication, surveillance and psychosocial teams to move and work together as they address related issues
- To start filling the 4W matrix for accountability
- Each partner to submit a list of their teams in the field to the DHO to allow him prepare a full list of the response team
- District asked to take lead in the vaccination exercise
- More political involvement required

Transport challenges have been discussed and partners have pledged as follows

**WHO-** will provide 3 vehicles; one for dedicated sample transport, second vehicle for carrying Dead bodies and third for Burial team. In case of no burial activities, these vehicles will assist with transportation of Psychosocial teams.

**UNICEF-** will one vehicle for WASH activities

**USAID/CHC-** will provide 2 vehicles for community sensitisation

### Surveillance

There are currently 3 cumulative confirmed cases. Three of the confirmed cases have died giving a case fatality rate of 100% (3/3). The third confirmed case died on the way during referral to the DRC.

In addition, one suspected case was admitted to the ETU today. Currently there are three suspected cases. One suspected case died, and another suspected case was discharged after testing negative for Ebola and improving on treatment. These suspected cases are neither related nor contacts of the confirmed cases and have tested negative for EVD by PCR. A cumulative total of 112 contacts to the confirmed cases have been listed. Today the teams initiated an alert management desk, listed and followed up contacts in Kagando, Bwera and Mpondwe.

### Laboratory

- Delivered laboratory materials to the ETU
- One sample was collected from a suspect and sent to UVRI for EVD testing
- Three blood samples from suspected cases were collected and shipped to UVRI, two of which were repeats.

- WHO DRC delivered 200 Genexpert cartridges to MoH EVD field coordinator

### **Case management**

There are 3 suspected cases currently isolated in the ETU at Bwera Hospital. One suspected case was discharged today after testing negative. Another suspected case died.

### **Risk Communication /Social Mobilization**

- A team of Film Van sensitized 975 people in Kisinga town council/sub-county and 29 people in Munkunyu Sub-county.
- Sensitized a total of 493 including; 52 Boda boda riders in Kisinga trading centre, Kisinga town council, 66 passengers in Pokopoko bus.
- Distributed 65 (EVD posters and 15 leaflets) IEC materials in Kisinga sub-county, Kisinga town council and Hima town council.
- Quantified IEC materials and shared with UNICEF for consideration.
- Sensitized 64 leaders including in Kisinga sub-county leaders, 2 bus companies at Mpondwe Lhubiriha (Pokopoko and Kampala Hopper) and Isango sub-county leaders
- Oriented 36 people including; 32 Vaccinators and 4 risk communication agents of CHC/USAID project that were on community engagement and interpersonal communication.
- Sensitized 6 health workers at Nyabirongo HCIII and 18 patients in OPD.

### **Water, Sanitation and Hygiene**

#### **Key activities**

- Oriented 19 environmental health inspectors on WASH with support from WHO
- Distributed manuals on haemorrhagic fevers
- Oriented 2 volunteers of St. Johns ambulance on chlorine mixing
- Installed a hand washing facility and sensitized 66 people in the bus at Poko poko Bus terminal
- Sensitized 8 staff at Kampala Hoppers Bus terminal in Bwera, 30 cyclists at Kyogha Stage and 12 Boda boda cyclists at Mushenene trading Centre
- Sensitized 384 males, 471 females and 10 teachers at Bwera Dem Primary school on hand washing, Chlorine mixing and, school had only 5 hand washing facilities
- Sensitized pupils at Nyakiyumbu Model and Mundongo Primary school

### **Infection Prevention and Control (IPC)**

#### **Key activities**

- Supported in the compilation of the budget to be submitted to MOH
- Orientation of selected 10 health workers on IPC
- Oriented 10 staff of Kasese Airfield on IPC and gave them chlorine (55%), Hand rub sanitizers, hand washing facility and Bucket for chlorine mixing
- Conducted session on hand washing for mourners in Nyamirangara village

### **Vaccination**

WHO has delivered some vaccines to be used in the response. Today, the vaccination team carried

extensive training for vaccinators. Vaccination will start tomorrow.

#### **Operational challenges and recommendations**

- Need more vehicles to support active case search and contact tracing
- Need digital thermometers for the contacts to self-monitor as well as non-contact infrared thermometers for the contact tracing team, health facilities, at airfield and newly set up POEs
- Funds to support contact tracing especially payments for sub county supervisors and VHTs
- Airtime to support operations of the alert desk and internet for the data management team
- Need for additional laptop to support data management
- Include Kitagata hot spring in Kasese Town as screening point
- Limited stock of sample collection supplies (vacutainer tubes, needles, swabs, ziplock bags, sharps containers and biohazard bags, 10% formalin)
- Dedicated car for laboratory support especially for laboratory personnel on night calls
- Stock out of chlorine and lack of soap in schools
- Scarcity of water at all schools visited
- Some people have not yet believed that there is an outbreak for Ebola

#### **Key Planned activities**

- Continue contact listing and follow up at Kagando, Bwera and Mpondwe
- Conduct active case search in health facilities in all Health Subdistricts
- Trace for the whereabouts of one high-risk contact
- Identify and reorient VHTs to support contact follow up
- UVRI lab team to supply vacutainers and needles (500pcs), ziplock bags (200pcs) red biohazard bags (100) and more gloves
- Field visit to orient lab staff on biorisk management in Karambi HC III, Nyabugando HC III, Kasanga HC III and Kagando hospital
- Sensitise community members, stop mass gatherings, calm the community members on EVD and encourage people to hand wash and stop handshaking
- Visiting 10 trading centres in Bukonzo west HSD
- Visiting atleast 10 churches

### **3. Conclusion**

There is an EVD outbreak in Kasese, Uganda with its origin in the DRC. There are 3 confirmed cases with 3 deaths. There are 3 suspect cases today. One hundred twelve (112) contacts have been identified so far and eighty (80) have been followed up today. The district task force with support from the national task force and partners have started on an aggressive response.

### **4. Partnerships**

The following Partners are supporting Ebola response in Kasese district; WHO, CDC, USAID CHC, UNICEF, Red Cross, ECHO, DFID, UNHCR, IRC, Baylor, Save the Children and MSF.