



EBOLA VIRUS DISEASE

Republic of Uganda



Situation Report 26

Data update as of 16th October 2022 at 22 :00 HRS

	Affected Districts	Confirmed Cases	Deaths	
			Confirmed	Probable
New	00	02	02	-
Total	05	60	23	20

Summary of Confirmed Cases and probable deaths by Sub-County as of 16th October 2022 at 22:00 HRS

District	Sub-County	Confirmed Cases	Confirmed Deaths	Probable Deaths*
Mubende	Madudu	17	07	13
	Eastern Division	07	01	00
	Southern Division	06	03	00
	Bageza	01	01	01
	Western Division	02	01	00
	Kasambya	05	00	00
	Kibalinga	01	01	00
	Kiruuma	07	03	05
	Kitenga	01	00	00
	Butologo	01	01	00
Kiyuni	03	03	00	
Kyegegwa	Kasule	03	01	00
Kassanda	Kassanda	03	00	01
	Kalwana	01	00	00
Kagadi	Kagadi TC	01	01	00
Bunyangabu	Rwimi TC	01	00	00
Total		60	23	20

Data harmonisation is an on-going process as patient classification changes between admissions, recoveries and fatalities.

*All probable deaths reported as occurring before 20th September 2022.

Contact Tracing, Alert Management and Laboratory summaries as of 16th October 2022 at 22:00 HRS

Updated 16Oct22 at 22:00 hrs	Last 24 Hours									Cumulative								
	MUB	KYE	FPC	KAS	KAG	KAK	KLA	BUN	Total	MUB	KYE	FPC	KAS	KAG	KAK	KLA	BUN	Total
Contacts listed	12	0	0	0	0	0	-	0	12	1404	58	3	52	23	59	118	48	1,765
Contacts completed 21 days of follow-up	496	0	0	26	0	0	-	0	522	625	48	0	24	0	30	3	0	730
Contacts under active follow-up	721	0	1	20	22	28	-	47	839	-	-	-	-	-	-	-	-	980
Contacts followed-up today (% follow-up rate)	705 (98)	0	1 (100)	20 (100)	22 (100)	28 (100)	-	47 (100)	778 (86)	-	-	-	-	-	-	-	-	-
Number of Contacts developing symptoms	2	0	0	0	0	1	-	0	3	-	-	-	-	-	-	-	-	-
Number of Contacts evacuated	1	0	0	0	0	0	-	0	1	-	-	-	-	-	-	-	-	-
Signals / Calls received	52	0	8	2	1	0	-	10	73									
Alerts received	21	3	8	2	1	0	-	10	45									
Alerts verified (%)	20 (95)	3 (100)	8 (100)	2 (100)	1 (100)	0 (00)	-	10 (100)	44 (100)	-	-	-	-	-	-	-	-	-
Alerts meeting suspect case definition	11	2	0	2	0	0	-	1	16	-	-	-	-	-	-	-	-	-
Alerts evacuated	8	2	0	3	0	0	-	0	13	-	-	-	-	-	-	-	-	-
Samples collected	2	0	0	1	0	0	-	0	3	373	22	17	10	0	0	65	3	490

MUB- Mubende; KYE- Kyegegwa; FPC – Fort Portal City; KAS – Kassanda; KAG – Kagadi; KAK – Kakumiro; KLA – Kampala; BUN – Bunyangabu, KLA - Kampala

Actions to date

The Ministry of Health (MoH), Districts, and partners in Uganda are implementing several outbreak control interventions in Mubende and her surrounding districts to contain the disease spread. An overview of key activities is summarized below:

Response Pillar	Key Updates in the past 24 hours
Coordination	<ul style="list-style-type: none"> ➔ To reduce movement of cases, and high risk contacts to other geographical locations additional restrictions have been effected by H.E. President to support rapid containment of the outbreak in the two districts that have reported new cases in the last 7 days * ➔ These measures are aimed at reducing spill over from the current epicentre ➔ Districts outside the high risk category continue to have preparedness activities ongoing ➔ All sub-county task forces in Kassanda and hotspot sub-counties in Mubende activated for SVD response ➔ Daily DTF meetings, partners meetings and pillar meeting held in all affected districts. ➔ Daily Greater Kampala Metropolitan Task force meetings continue daily with representation from Kampala Capital City, Wakiso and Mukono; briefing of senior political leadership in Kampala was completed
Surveillance and Contact tracing	<ul style="list-style-type: none"> ➔ Total contacts under follow up is 873. The follow up rate for contacts is at 97% ➔ All contacts from Kyegegwa have completed 21 day follow up with no new cases identified in the period. 26 days with no confirmed case in Kyegegwa district. ➔ All the sub pillars i.e alerts management, case investigation, contact tracing, and active case search are active and continue to report daily ➔ 45 alerts were received in the last 24 hours from Mubende, Kampala, Fort Portal City, Kagadi, Kakumiro, Nunyangabu, Kyegegwa, 98% of these received were verified; 16 met suspect case definition and evacuation was done for 13 of these. ➔ Baylor – Uganda and Public Health Fellowship Programme (PHFP) had started conducting PopCAB surveys to track the movement of contacts in Kampala
Laboratory	<ul style="list-style-type: none"> ➔ All laboratory results were returned within 6 hours in Mubende ➔ The internet connectivity at the Mobile Laboratory has been boosted to support uploading of results on RDS ➔ 14 laboratory staff, 5 DSFPs and one hub rider have been trained in sample collection, packaging, transportation, biosafety and biosecurity in each of the 20 very high risk and high risk districts with support from WHO
Case Management	<ul style="list-style-type: none"> ➔ Current admissions 29 case patients (21 suspect and 8 confirmed cases) in Mubende ETU and 1 confirmed case in Entebbe Isolation facility. Cumulative admissions 209 in Mubende and 6 in Entebbe. ➔ Cumulative recoveries 26. ➔ Cumulative facility deaths stand at 19 ➔ Mulago Isolation facility has been fully operationalised; currently admitted suspect cases and high risk contacts ➔ Two tents have been setup at Kiruddu Referral Hospital (Kampala) with support from WHO to support triage within the facility and isolation of suspect cases early
Emergency Medical Services	<ul style="list-style-type: none"> ➔ The EMS system has been activated for the entire country ➔ 17 suspect cases were successfully evacuated as follows; (04) Interfacility, (03) Community to ETU, (05) Community to Emergency Department, (04) Community to ETU, (01) Community to Outpatient department. ➔ A total of seven ambulances have been deployed in Mubende district alone ➔ The GKMA EMS has been activated to support transfer of suspect cases as well as support continuity of essential health services
Infection Prevention and Control and WASH	<ul style="list-style-type: none"> ➔ The monitoring of IPC measures in the ETU continues to be done daily ➔ There are ongoing campaigns for IPC and WASH within 10 villages in Mubende District. ➔ The sensitization of pupils and teachers at primary schools continues ➔ Sensitization and IPC orientation has been done for the Police officers in Mubende municipality ➔ Mildmay and Mubende district team delivered supplies to Kirwanyi village that included 17 hand washing stations, five (20-liter Jerricans of liquid soap), and 40-liters of hand sanitizer.

	<p>These supplies were meant to support churches, mosques, markets, boda stages, schools, clinics, saloons, and restaurants.</p>
Risk Communication	<ul style="list-style-type: none"> ➔ The ten Community audio towers in Madudu and Kiruma sub counties continue to air out messages on SVD. ➔ Three mobile public address systems were contracted to disseminate Ebola Virus Disease (EVD) messages to the public in three divisions of Mubende Municipal council and approximately 100,000 people were reached through this strategy. ➔ Over 3000 pieces of IEC materials (posters and fact sheets) in Luganda language were disseminated in the Municipality using the mobile public address system vehicles. ➔ Following an assessment to understand the level of EVD awareness, risk, and need for RCCE interventions at the gold mines in Kiruuma sub-country, it was discovered that there are high levels of EVD awareness, IEC materials were available and pinned up, and the risk perception of infection appeared to be low due to the site's lower population compared to that of the entire village ➔ Kaweri Coffee Plantation which has over 500 resident workers was visited and noted that information on EVD was well disseminated in all the 5 camps of the plantation. They have sufficient IEC resources. Additionally, there were hand washing stations available and often utilized at all access points, and the WHO recently taught the site's in-charge health facility on surveillance and alert reporting. ➔ 96 village health team members had been oriented on their roles in EVD outbreak and assigned them areas of responsibility in Kibalinga sub-county. ➔ The LCI chairperson, cultural leaders, VHTs, religious leaders, and councilor received EVD orientation from the Madudu Sub County task force.
Logistics	<ul style="list-style-type: none"> ➔ There is adequate stock for laboratory test kits with additional reagents expected in the pipeline to support testing at Mubende mobile laboratory and UVRI ➔ A delivery of hand washing facilities was made to Kirwany TC. ➔ Play materials for children that are in isolation were delivered by UNICEF. ➔ Received a delivery of Chlorine, 90 buckets (45kg) from Redcross. ➔ National Medical Stores dispatched PPE for MRRH. ➔ Received a delivery of 40 hand washing facilities from SORAK. ➔ Received a delivery of 200 litres of sanitizer from Mild May Uganda ➔ WHO is supporting in provision of fuel and facilitation for surveillance teams in the Kampala area
Mental Health and Psychosocial Social Support	<ul style="list-style-type: none"> ➔ Psychosocial support is currently being offered to 16 Clients at Madudu. ➔ Offered pre-counselling of the three children (8-year-old female, 12-year-old female, 5-year-old male) who were being evacuated from St. Paul Junior School Kilungi in Mubende Municipality. ➔ Post-test counselling is being offered to all contacts with negative results. ➔ There is continued to support for counselling services to all patients at the ETU. ➔ There are efforts being made for relatives of the isolated people at the ETU to talk to with their family members; current efforts focus on phone calls ➔ The resettling of the discharged persons and negative suspect cases into their community continues.
Continuity of Essential Health Services	<ul style="list-style-type: none"> ➔ A webinar was conducted for heads of RRHs, DHOs and general hospitals on maintaining essential health services throughout the response ➔ Alert management system has been augmented to serve as call centre for all ambulance dispatch; providing a protocol for 3 evacuation types: Alert case evacuation/ verification; Alert non- Ebola; Other medical emergencies ➔ Ambulance services have been streamlined to address the three categories of situations

**full Presidential speech attached*

Areas of focus

- Enhanced targeted community engagement in the hotspot sub-counties with integrated approach to improve community based surveillance, infection prevention and control and risk communication.
- Families affected by Ebola are still stigmatized by the communities, SVD suspects and survivors still face rejection within the communities.

- There is still low perception of Ebola from the community members since most of the things are still running like business as usual compared to COVID-19. Additionally, some of the VHTs are compromised and do not believe in Ebola.

Key messages to the public

- People in the community should call an alert hotline or go to a health facility if they have symptoms (e.g., fever, headache, weakness, vomiting, bloody diarrhoea or urine, bleeding from body openings).
- Current hotline numbers are: **0800200043 (Toll-free), 0762640374, 0762640379, 0708062203, 0702869375, 0708052008, 0762659215 (Not toll-free)**
- Free alert SMS on **6767** starting with the 'ALERT' key word
- Community should not fear people who have been discharged from the ETU and returned home.