



MINISTRY OF HEALTH
THE WEEKLY EPIDEMIOLOGICAL BULLETIN
WEEK 48: 25th November – 01st December 2024

Dear Reader, We are pleased to share the latest edition of Uganda's weekly epidemiological bulletin for the year 2024. This bulletin serves to inform all stakeholders at community, district and national levels on suspected disease trends, public health surveillance and interventions undertaken in detecting, preventing and responding to public health events in Uganda on a weekly basis.

In this issue, we showcase the following updates:

- ◆ Routine and Sentinel Surveillance
- ◆ Indicator and Event Based Surveillance
- ◆ Maternal and Perinatal deaths surveillance

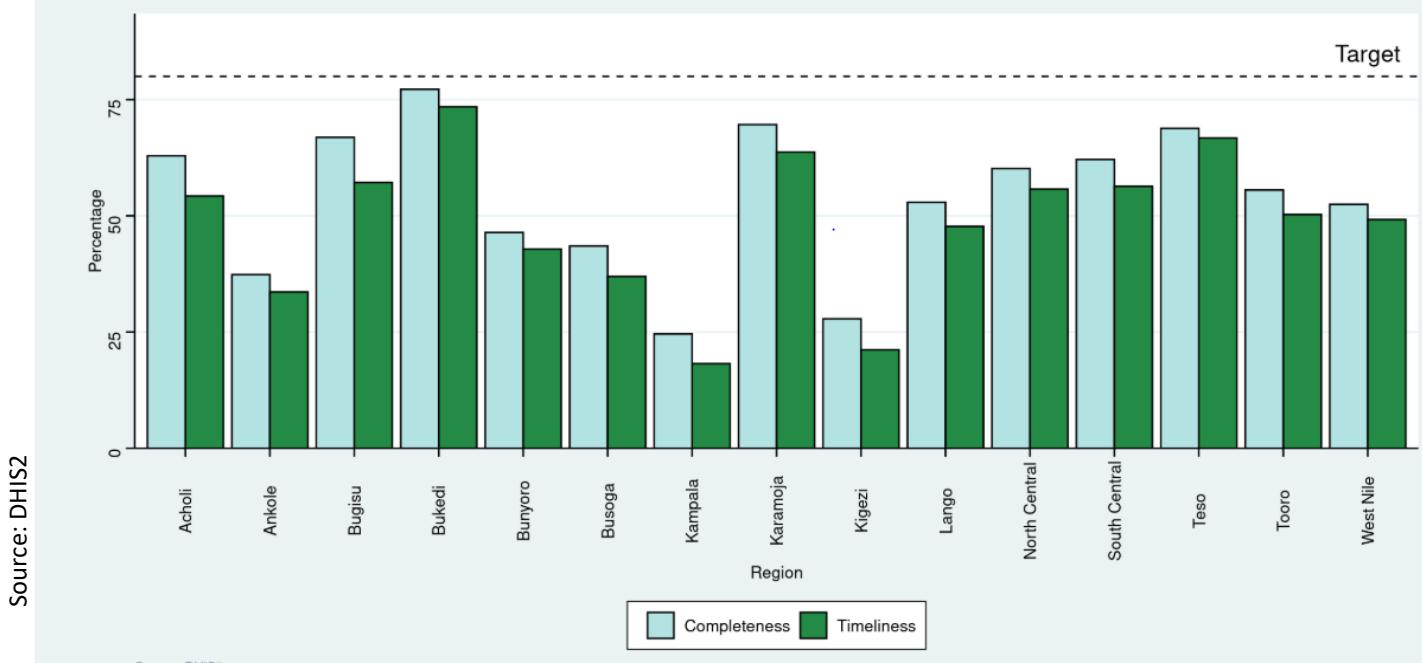
- ◆ Influenza and VHF surveillance
- ◆ Tuberculosis and Malaria status updates
- ◆ Point of Entry Surveillance
- ◆ Current Public Health Events in and around Uganda

For comments please contact:

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Indicator Based Surveillance

Figure 1.1: Regional weekly reporting rates for notifiable conditions during 2024EpiWeek 48



Source: DHIS2

Source: DHIS2

All regions did not achieve the 80% target for completeness for the weekly epidemiological reports within the EpiWeek 48. Timeliness within all regions was below the 80% target. Our recommendation is that district biostatisticians work with their health workers to identify and address bottlenecks to reporting. The break-down of performance by district is shown on the next page.

Table 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 47 and 48

Source: DHIS2

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK47	WK48	WK47	WK48		WK47	WK48	WK47	WK48
Kitagwenda	100	100	26.1	100	Nabilatuk	100	100	100	33.3
Kitgum	95	85	72.5	67.5	Nakapiripirit	84.6	92.3	38.5	84.6
Koboko	51.9	55.6	33.3	40.7	Nakaseke	90	86.7	50	40
Kole	58.3	97.2	13.9	8.3	Nakasongola	100	65.1	34.9	51.2
Kotido	100	90.9	22.7	63.6	Namayingo	52.6	47.4	18.4	15.8
Kumi	96.4	100	89.3	25	Namisindwa	59.1	72.7	45.5	54.5
Kwania	100	30.8	20.5	23.1	Namutumba	74.3	65.7	40	31.4
Kween	88.5	80.8	84.6	80.8	Napak	94.4	94.4	77.8	66.7
Kyankwanzi	100	100	96.3	96.3	Nebbi	96.2	96.2	65.4	76.9
Kyegegwawa	96.2	100	46.2	42.3	Ngora	35.7	35.7	35.7	35.7
Kyenjojo	96.1	92.2	84.3	82.4	Ntoroko	77.8	44.4	44.4	33.3
Kyotera	81.5	66.7	65.4	60.5	Ntungamo	59.4	47.8	47.8	34.8
Lamwo	90.3	74.2	58.1	67.7	Nwoya	100	100	100	100
Lira	100	100	100	100	Obongi	100	77.8	44.4	72.2
Lira City	100	100	96.3	88.9	Omoro	72.4	62.1	37.9	51.7
Luuka	27.9	39.5	23.3	27.9	Otuke	76.5	94.1	47.1	64.7
Luwero	89.7	80.4	64.5	64.5	Oyam	61.2	57.1	22.4	22.4
Lwengo	78.4	81.1	48.6	70.3	Pader	91.3	93.5	52.2	50
Lyantonde	59.2	59.2	49	42.9	Pakwach	100	89.5	84.2	78.9
Madi-Okollo	81	85.7	47.6	33.3	Pallisa	100	100	100	100
Manafwa	92.9	92.9	64.3	50	Rakai	100	95.7	95.7	93.5
Maracha	94.4	77.8	72.2	27.8	Rubanda	60.5	52.6	47.4	42.1
Masaka	94.1	94.1	94.1	94.1	Rubirizi	95.2	61.9	42.9	28.6
Masaka City	89.5	89.5	28.9	23.7	Rukiga	100	100	69.7	57.6
Masindi	100	96.2	96.2	88.7	Rukungiri	55.3	55.3	40.4	27.7
Mayuge	94.4	93.1	8.3	91.7	Rwampara	55	45	35	40
Mbale	92.6	100	85.2	100	Sembabule	100	42.5	100	20
Mbale City	97.6	58.5	53.7	43.9	Serere	100	100	90.9	90.9
Mbarara	57.7	76.9	53.8	76.9	Sheema	82.1	74.4	66.7	64.1
Mbarara City	83.3	75	38.9	44.4	Sironko	94.1	82.4	55.9	58.8
Mitooma	100	95.5	77.3	86.4	Soroti	100	37.5	100	31.3
Mityana	97.4	93.4	81.6	81.6	Soroti City	77.8	77.8	63	70.4
Moroto	100	100	55	50	Terego	100	82.8	48.3	58.6
Moyo	90.3	87.1	64.5	87.1	Tororo	70.5	66.7	34.6	43.6
Mpigi	80.6	64.5	43.5	38.7	Wakiso	65.5	60.8	47.4	42.7
Mubende	72.7	41.8	47.3	34.5	Yumbe	75	76.8	53.6	64.3
Mukono	62.1	62.1	38.8	43.7	Zombo	100	82.6	43.5	78.3

KEY

100
80-99.9
60-79.9
<60

Districts in red need immediate follow-ups and support regarding reporting by the district health teams.

Table 2.1: Timeliness and completeness of reporting by district during 2024EpiWeek 47 and 48

Source: DHIS2

District	Completeness		Timeliness		District	Completeness		Timeliness	
	WK47	WK48	WK47	WK48		WK47	WK48	WK47	WK48
Abim	100	81	61.9	52.4	Hoima	85	70	70	65
Adjumani	88.2	54.9	64.7	49	Hoima City	81.8	86.4	54.5	81.8
Agago	100	100	79.1	60.5	Ibanda	87.5	62.5	66.7	52.1
Alebtong	85	55	50	45	Iganga	54.3	37	21.7	19.6
Amolatar	100	100	100	88.2	Isingiro	98.6	95.9	74.3	52.7
Amudat	100	92.3	92.3	84.6	Jinja	88.6	97.7	59.1	72.7
Amuria	100	100	96.3	100	Jinja City	72.9	71.2	47.5	42.4
Amuru	87.9	87.9	66.7	66.7	Kaabong	100	100	100	100
Apac	55.3	52.6	28.9	39.5	Kabale	93.1	82.8	51.7	51.7
Arua	100	100	27.3	27.3	Kabarole	100	100	87.9	45.5
Arua City	54.5	54.5	39.4	42.4	Kaberamaido	100	100	27.8	100
Budaka	100	100	94.1	94.1	Kagadi	84.4	50	53.1	37.5
Bududa	81.3	87.5	62.5	62.5	Kakumiro	76.9	28.2	74.4	28.2
Bugiri	54.5	65.5	41.8	41.8	Kalaki	100	66.7	50	41.7
Bugweri	96.4	100	92.9	100	Kalangala	100	100	100	100
Buhweju	44.4	33.3	38.9	27.8	Kaliro	96.6	93.1	72.4	72.4
Buikwe	58	55.1	36.2	33.3	Kalungu	100	83.3	77.8	61.1
Bukedea	95.8	95.8	83.3	95.8	Kampala	35	33.2	15.8	17.8
Bukomansimbi	92.9	85.7	67.9	78.6	Kamuli	46.4	47.8	18.8	26.1
Bukwo	90.9	90.9	72.7	63.6	Kamwenge	100	100	97.2	36.1
Bulambuli	88.5	61.5	42.3	57.7	Kanungu	75.8	85.5	38.7	45.2
Buliisa	68.8	50	18.8	31.3	Kapchorwa	88.9	96.3	74.1	96.3
Bundibugyo	96.9	93.8	78.1	75	Kapelebyong	100	100	100	100
Bunyangabu	66.7	84.8	66.7	84.8	Karenga	100	100	50	100
Bushenyi	63	54.3	43.5	37	Kasese	78.6	60	37.9	33.1
Busia	88.2	88.2	82.4	85.3	Kassanda	92.1	92.1	76.3	78.9
Butaleja	96.2	88.5	69.2	76.9	Katakwi	100	100	37	85.2
Butambala	50	50	33.3	45.8	Kayunga	67.5	55	45	37.5
Butebo	84.6	69.2	38.5	30.8	Kazo	50	41.2	29.4	32.4
Buvuma	100	100	100	100	Kibaale	65.7	77.1	54.3	54.3
Buyende	53.6	35.7	42.9	32.1	Kiboga	91.5	72.3	74.5	55.3
Dokolo	94.4	94.4	38.9	50	Kibuku	100	100	100	100
Fort Portal City	100	96.6	93.1	13.8	Kikuube	100	100	57.1	65.7
Gomba	100	100	80	84	Kiruhura	96.7	93.3	50	36.7
Gulu	100	100	47.8	39.1	Kiryandongo	84.6	57.7	50	42.3
Gulu City	83.3	71.4	45.2	50	Kisoro	46.8	31.9	29.8	25.5

KEY

100
80-99.9
60-79.9
<60

Districts in red need immediate follow-ups and support regarding reporting by the district health teams.

Figure 4.1: Suspected cases of Epidemic Prone Diseases reported weekly by 2024 Wk48



Key: VHF = Viral Hemorrhagic Fever; mDR TB = Multi-drug Resistant Tuberculosis

Within the reporting week 48 suspected cases were reported within the conditions of Guinea worm, MDR TB, neonatal tetanus, other VHF and Yellow fever. These are suspected cases and verification is on-going. There was no suspected death due any epidemic prone disease.

Figure 4.2: Suspected and probable cases of measles reported in the past five weeks

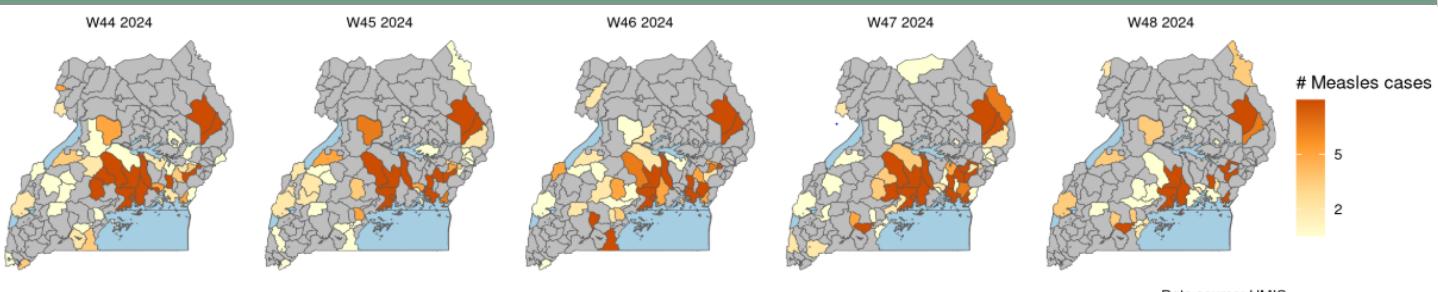


Figure 4.3: Suspected and probable cases of Acute Flaccid Paralysis reported in the past five weeks

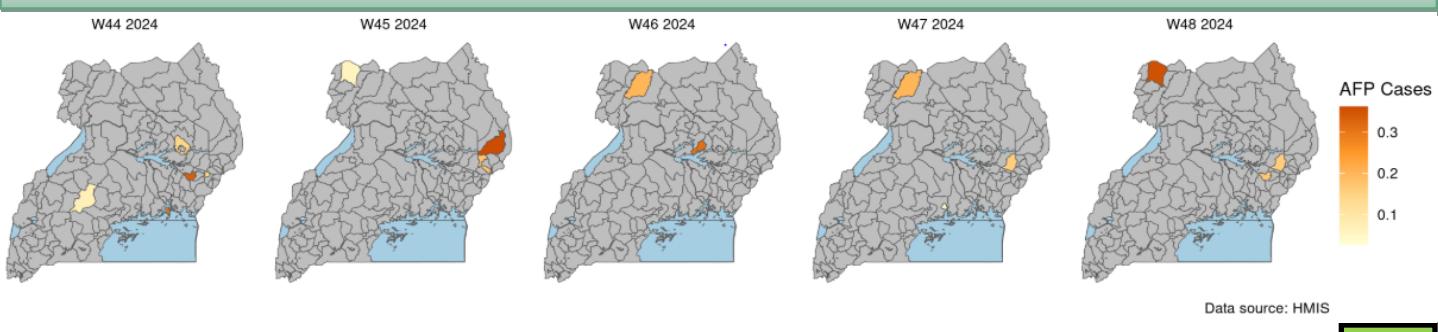
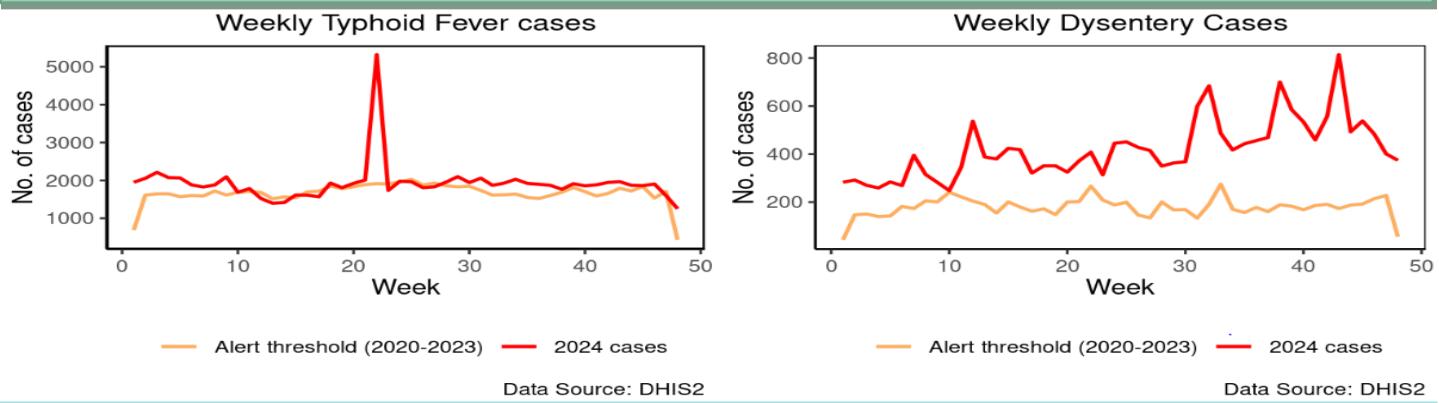


Figure 5.1: Suspected cases of Typhoid and Dysentery by 2024 Wk48



Note that the alert threshold for typhoid fever and dysentery is calculated as the average number of weekly cases (suspected and confirmed) in the past three years. The observed threshold for both typhoid and dysentery were passed and this warrants an investigation

Figure 5.2 Weekly cases of diseases / conditions targeted for elimination or eradication by 2024 Wk48

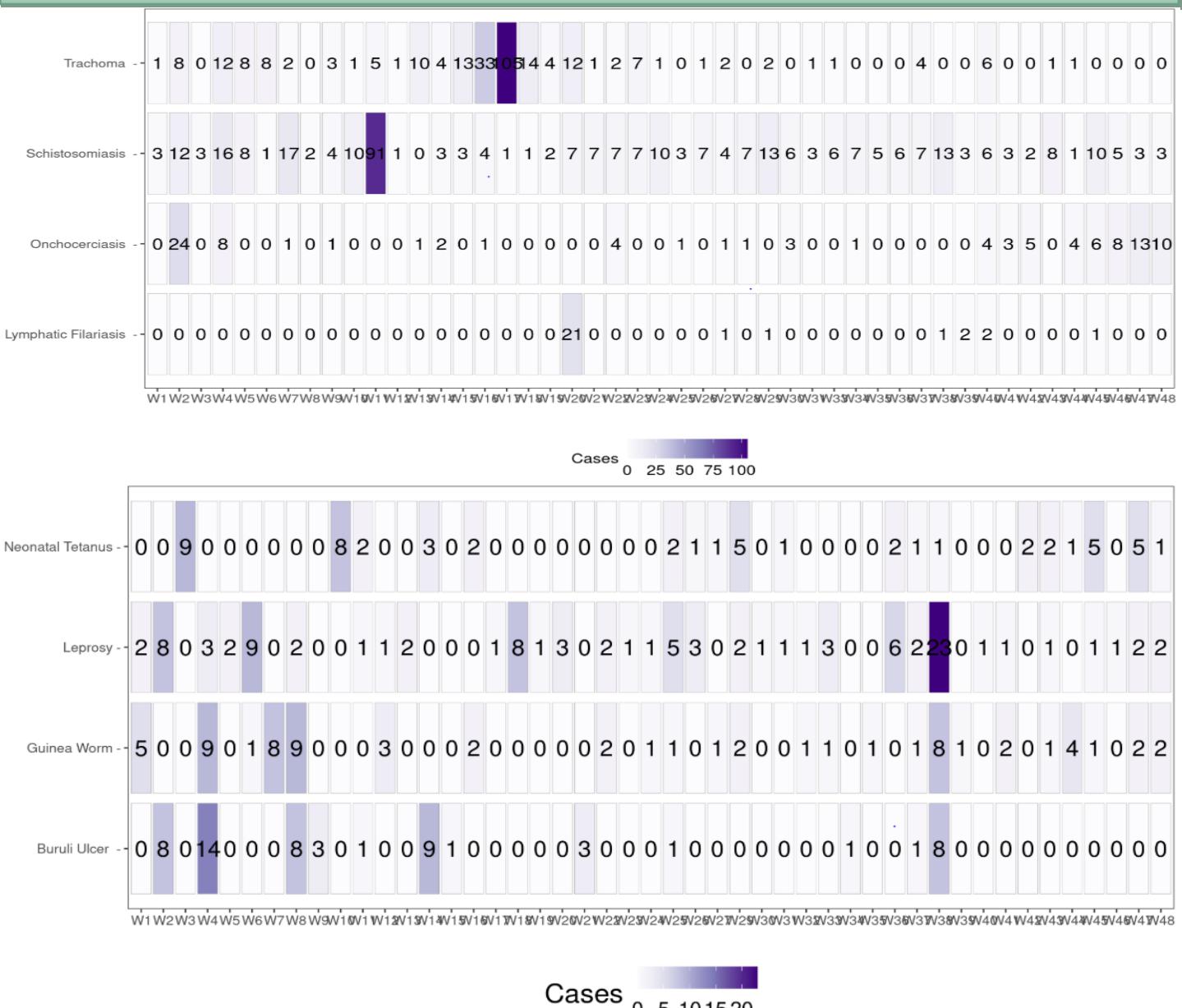
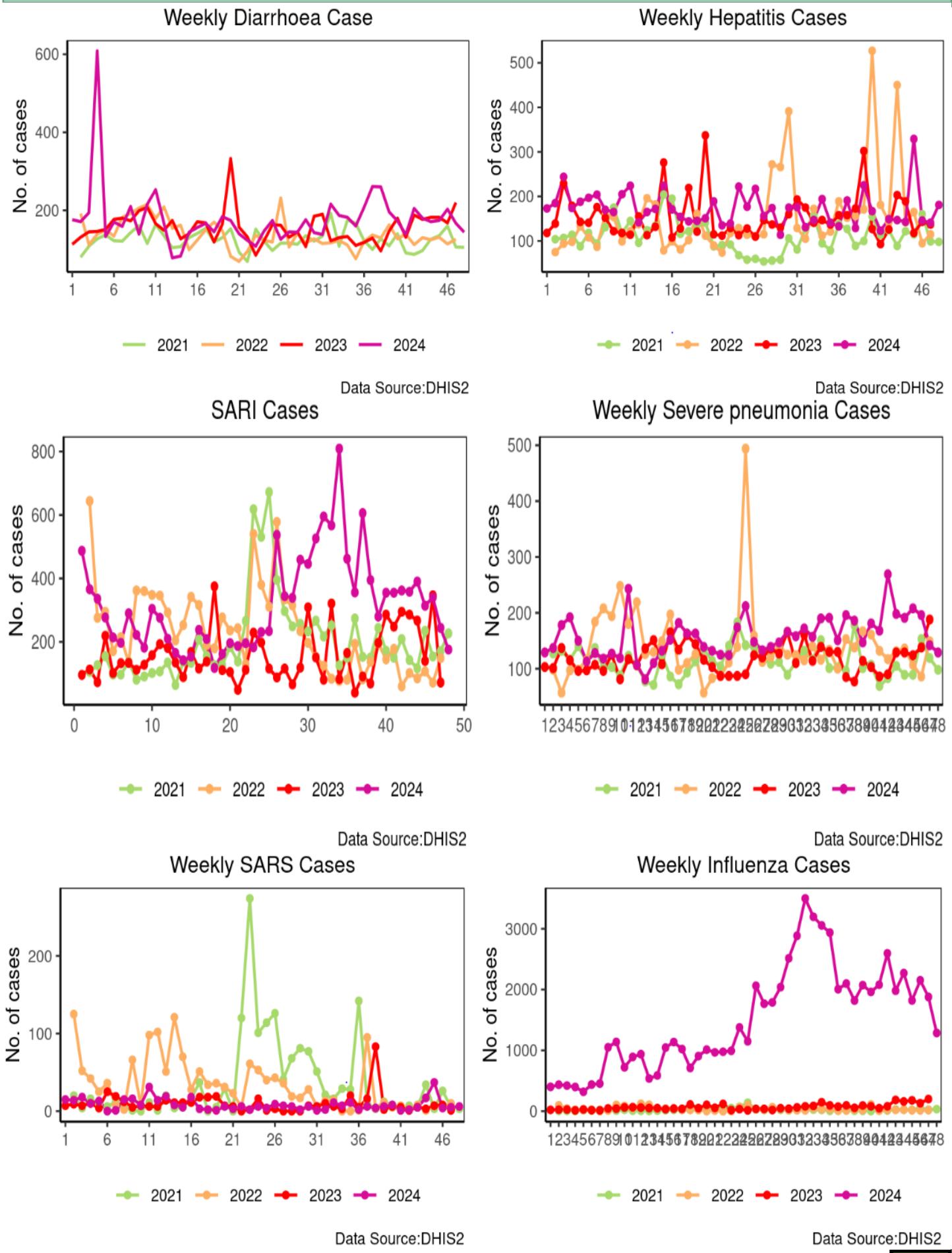


Figure 6.1: Suspected cases of other prioritized diseases and conditions by 2024 Wk48



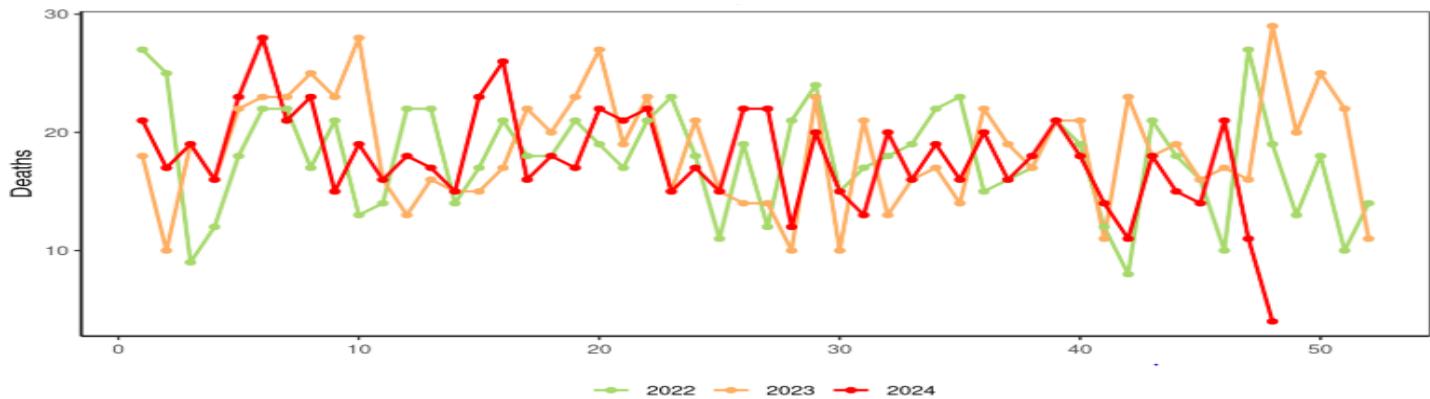
Maternal Deaths Surveillance

In week 48, there were 4 maternal deaths. There was a decrease of 5 deaths from the 9 deaths reported in week 47.

Table 7.1: Regional-based Maternal deaths reported in 2024 until EpiWeek 48

Region	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
West Nile	1	2	0	0	0	0	0	2	1	1	0	0	2	0	1	0	1	0	0	0
Tooro	4	0	3	0	0	0	1	1	2	0	3	1	0	1	1	2	1	2	2	0
Teso	0	0	0	0	1	2	1	1	0	0	0	1	0	1	0	0	1	1	3	0
South Central	2	1	1	1	1	2	1	2	2	1	3	1	2	0	3	3	3	2	0	0
North Central	0	0	1	4	1	3	3	1	4	3	2	0	1	1	4	3	0	4	0	0
Lango	1	2	1	0	1	1	0	1	0	1	0	1	0	0	2	0	0	1	2	0
Kigezi	0	1	0	0	1	0	0	0	1	0	1	0	1	1	0	0	0	0	0	0
Karamoja	0	0	1	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
Kampala	3	0	1	1	2	4	1	1	2	4	2	4	1	2	2	3	1	5	1	0
Busoga	1	3	1	1	0	2	1	3	0	1	3	3	1	0	0	2	0	2	1	0
Bunyoro	1	0	1	2	0	0	3	2	1	1	2	1	2	1	1	2	1	1	0	1
Bukedi	0	0	0	0	2	0	0	2	0	1	1	0	0	1	1	0	1	0	0	1
Bugisu	5	1	2	6	3	3	2	2	0	1	1	1	0	1	1	0	2	0	2	0
Ankole	0	2	0	1	2	1	2	1	1	1	2	2	3	2	2	0	1	1	0	0
Acholi	2	3	1	4	1	1	1	1	2	3	1	2	1	0	0	0	2	1	0	1

Data source: DHIS2



Data Source: DHIS2

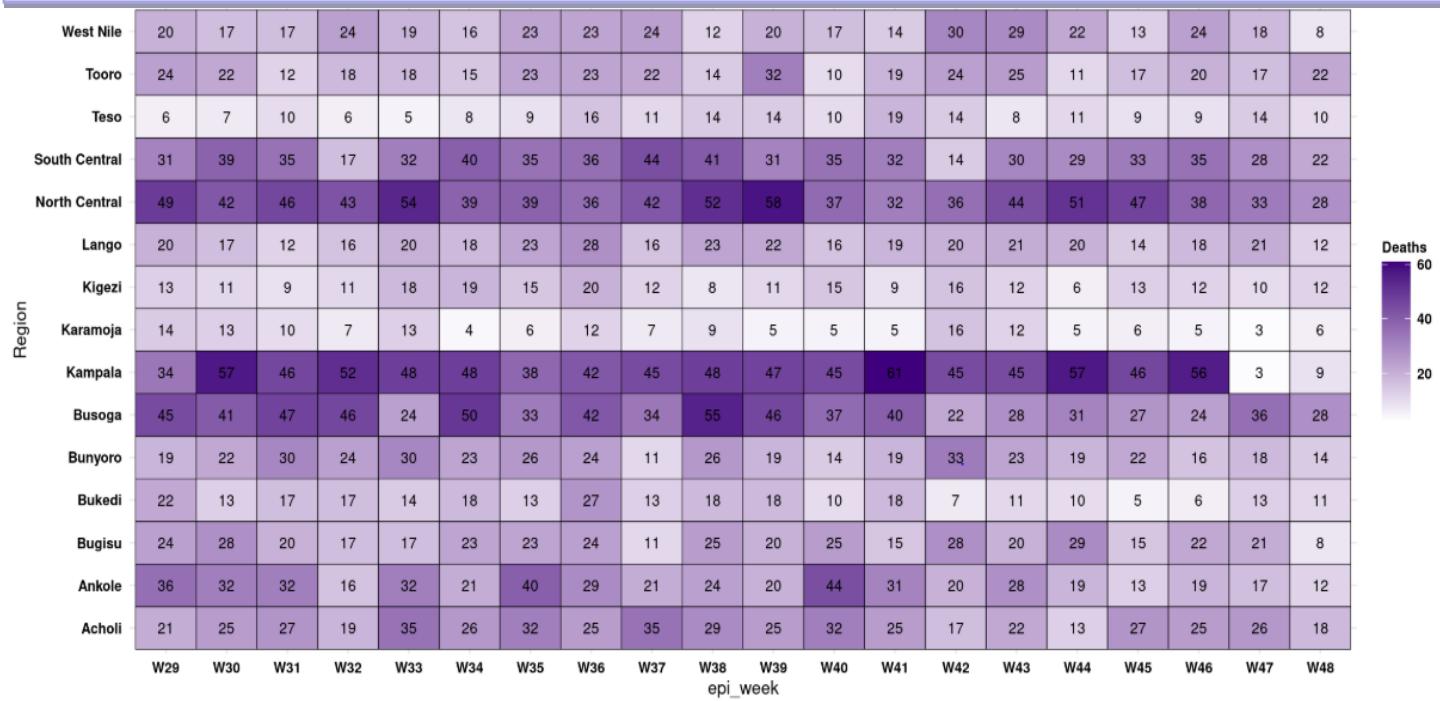
Table 7.2: Facilities reporting Maternal deaths during 2024WK48

Regions	Districts	Facility	No. of maternal deaths
Karamoja	Moroto District	Northern Division	1
Bunyoro	Hoima City	Hoima East Division	1
Acholi	Gulu City	Bar-Dege Layibi Division	1
Bukedi	Busia District	Masafu Town Council	1

Perinatal Deaths Surveillance

In week 48, there were 220 perinatal deaths. There was a decrease of 8 deaths from the 228 deaths reported in week 47.

Figure 8.1: Regional-based Perinatal deaths reported in 2024 until EpiWeek 48



Data source: DHIS2

Figure 8.2: Forms of Perinatal deaths reported during 2024WK48

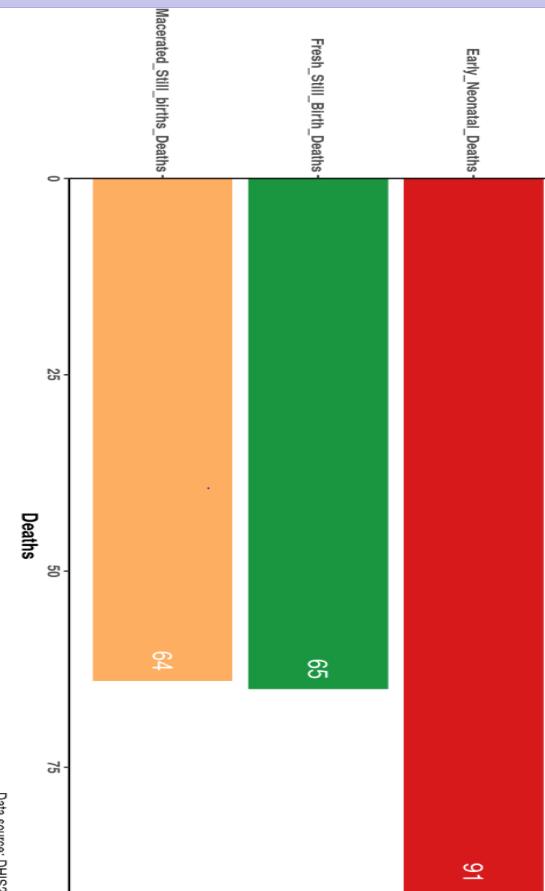
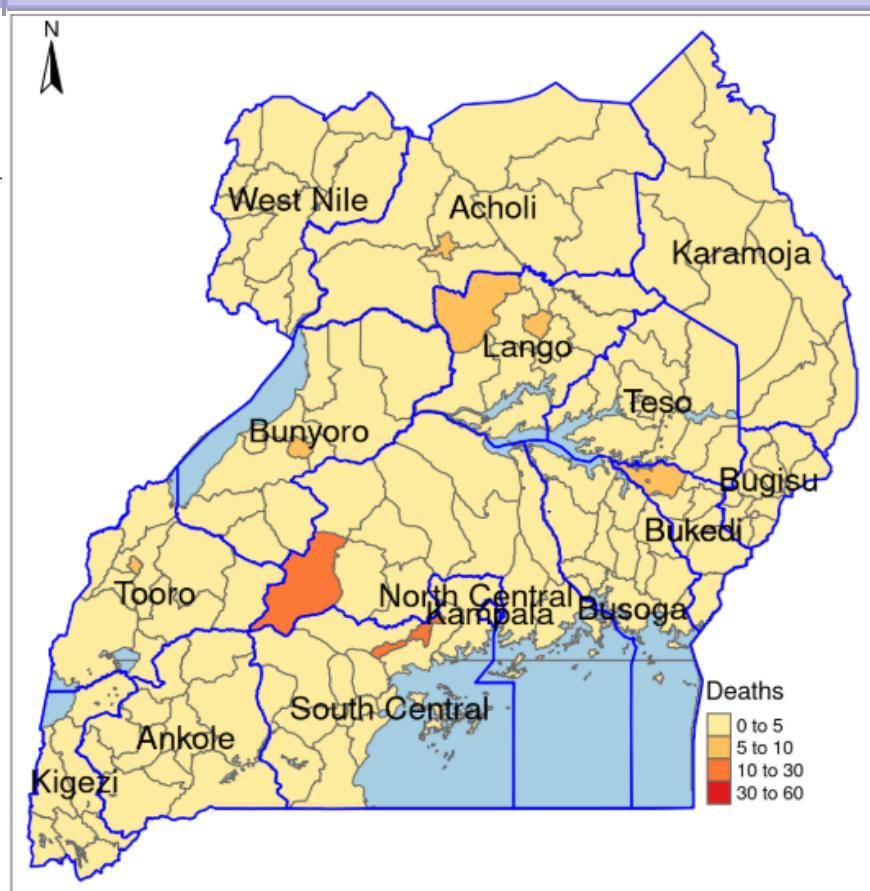


Figure 8.3: Perinatal deaths reported during 2024WK48 by district



Influenza Surveillance

Table 9.1: Results from the MUWRP Influenza Surveillance Sites: 2024 Week 47

Health Facility	Type of case	# of Specimens Tested (PCR)	# Flu A (H1N1)	# Flu A (H3N2)	# Flu B (Vict)	# ADV	# PIV
Kiruddu NRH	SARI	02	00	00	00	00	00
	ILI	08	00	00	00	01	00
Mulago NRH	SARI	02	00	00	00	00	00
	ILI	08	01	00	00	00	01
Jinja RRH	SARI	02	00	00	00	00	00
	ILI	08	00	01	01	00	00
Gulu RRH	SARI	02	00	00	00	00	00
	ILI	08	00	00	01	00	00
Bwera Hospital	SARI	10	00	00	00	01	00
Totals		50	01	01	02	02	01

During week forty-seven, 50 samples were collected from Kiruddu NRH (n=10), Mulago NRH (n=10), Gulu RRH (n=10), Jinja RRH (n=10), and Bwera Hospital (n=10). These were analyzed using PCR methods for Flu A, Flu B, SARS-CoV-2 and ten other viral families at the MUWRP-EIDP lab at UVRI Entebbe. Flu A and Flu B (Victoria) circulation was 04.00% (n=02/50) each respectively. Positivity of other viruses was 04.00% (n=02/50) for adenoviruses, and 02.00% (n=01/50) for parainfluenza viruses (PIV). All samples were negative for SARS-CoV-2. We report low circulation of Flu A and Flu B during week 47.

Influenza Surveillance

Table 10.1: Monthly Influenza, COVID 19 and RSV Results 2024WK47

Month	Influenza				COVID19Result		RSVResult			Total	
	A(H3)	B Victoria	Negative	Pandemic A (H1N1) 2009	Pending	Negative	Positive	Not tested	Negative	Positive	
January	4	0	162	0	0	155	11	0	163	3	166
February	3	1	148	0	0	147	5	0	150	2	152
March	1	1	270	3	0	273	2	0	262	13	275
April	1	1	136	5	0	142	1	1	131	11	143
May	1	0	189	4	0	187	7	7	170	17	194
June	1	4	199	7	0	209	2	1	203	7	211
July	8	6	245	33	0	285	7	25	262	5	292
August	21	22	258	46	0	338	9	204	138	5	347
September	5	10	236	17	0	268	0	190	78	0	268
October	1	16	313	10	3	337	6	294	46	3	343
November	0	9	147	4	0	158	2	158	2	0	160
Total	46	70	2303	129	3	2499	52	880	1605	66	2551

Table 10.2: Health Facility: Influenza, COVID 19 and RSV Results in ILI and SARI, 2024WK47

Sample Type/ Sentinel Site	Influenza				COVID19Result		RSVResult		Total	
	A(H3)	B Victoria	Negative	Pandemic A (H1N1) 2009	Negative	Positive	Negative	Positive		
ILI	Arua R. R. Hospital	3	0	35	0	38	0	37	1	38
	Entebbe R. R. Hospital	1	0	29	3	32	1	32	1	33
	Fort Portal R. R. Hospital	0	1	0	0	1	0	1	0	1
	Jinja R. R. Hospital	7	1	204	1	206	7	207	6	213
	Kawaala HC IV	0	1	3	1	5	0	5	0	5
	Kibuli Hospital	0	1	12	0	13	0	13	0	13
	Kiryandongo Hospital	0	0	70	1	70	1	69	2	71
	Kiswa HC III	0	8	200	8	215	1	215	1	216
	Kitebi HC III	2	2	77	19	99	1	97	3	100
	Koboko Hospital	0	0	40	0	39	1	40	0	40
	Mukono General Hospital	0	0	89	3	88	4	84	8	92
	Mulago N R Hospital	0	0	44	0	44	0	44	0	44
	Nsambya Hospital	0	0	84	8	92	0	91	0	92
	Tororo General Hospital	0	1	73	3	75	2	68	9	77
	Total	13	15	960	47	1017	18	1003	32	1035
SARI	Arua R. R. Hospital	0	0	46	0	44	2	45	1	46
	Entebbe R. R. Hospital	0	1	7	0	6	2	8	0	8
	Fort Portal R. R. Hospital	0	0	50	4	50	4	44	10	54
	Jinja R. R. Hospital	0	0	41	0	40	1	41	0	41
	Kiryandongo Hospital	0	0	24	0	24	0	24	0	24
	Koboko Hospital	0	0	23	0	20	3	23	0	23
	Mbarara R. R. Hospital	2	0	36	0	37	1	34	4	38
	Nsambya Hospital	0	1	90	3	92	2	91	3	94
	Tororo General Hospital	0	1	34	2	36	1	30	7	37
	Total	2	3	351	9	349	16	340	25	365
SARI-ILI	Arua R. R. Hospital	3	0	81	0	82	2	82	2	84
	Entebbe R. R. Hospital	1	1	36	3	38	3	40	1	41
	Fort Portal R. R. Hospital	0	1	50	4	51	4	45	10	55
	Jinja R. R. Hospital	7	1	245	1	246	8	248	6	254
	Kawaala HC IV	0	1	3	1	5	0	5	0	5
	Kibuli Hospital	0	1	12	0	13	0	13	0	13
	Kiryandongo Hospital	0	0	94	1	94	1	93	2	95
	Kiswa HC III	0	8	200	8	215	1	215	1	216
	Kitebi HC III	2	2	77	19	99	1	97	3	100
	Koboko Hospital	0	0	63	0	59	4	63	0	63
	Mbarara R. R. Hospital	2	0	36	0	37	1	34	4	38
	Mukono General Hospital	0	0	89	3	88	4	84	8	92
	Mulago N R Hospital	0	0	44	0	44	0	44	0	44
	Nsambya Hospital	0	1	174	11	184	2	182	4	186
	Tororo General Hospital	0	2	107	5	111	3	98	16	114
	Total	15	18	1311	56	1366	34	1343	57	1400

Tuberculosis Status Update

Figure 11.1: Tuberculosis burden during 2024 EpiWeek 46

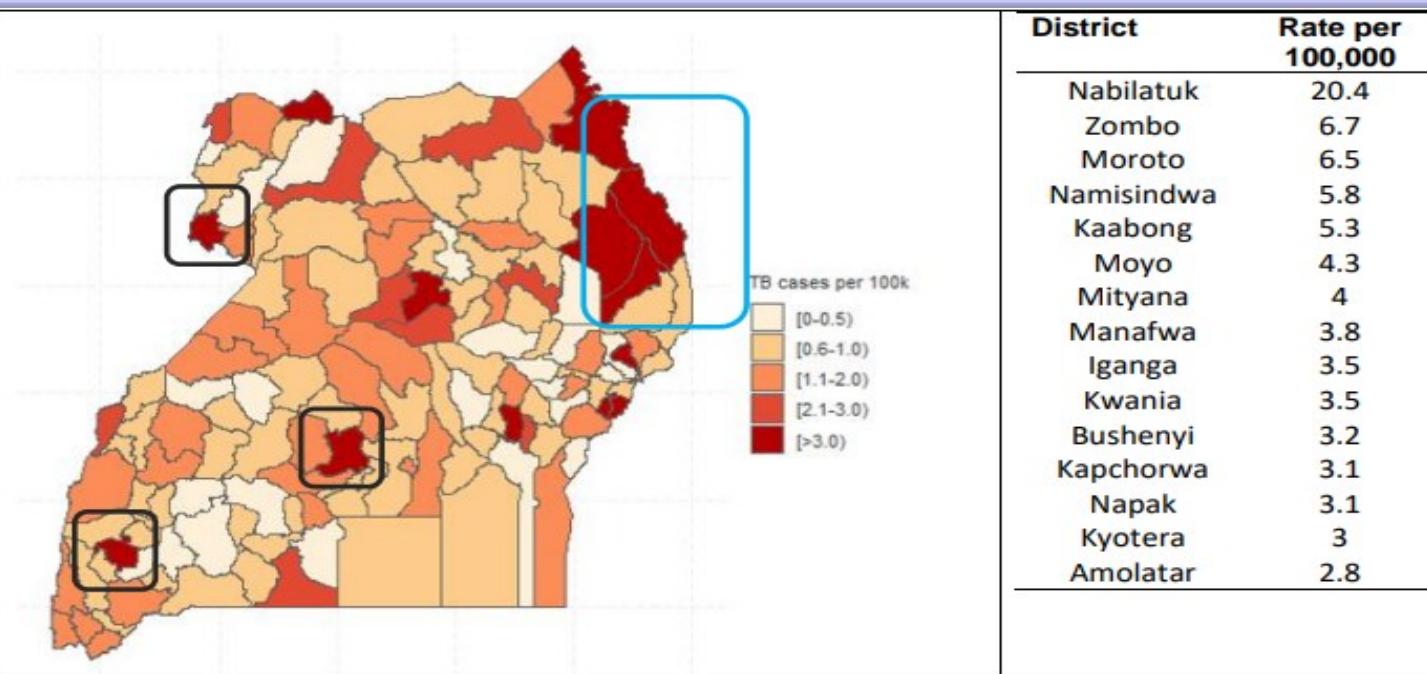


Figure 11.2: National weekly trends in TB screening, diagnosis and reporting, Wk01 2023 to Wk46 2024



Figure 11.3: National weekly trends in New Relapse TB diagnosed Uganda, Wk01 2023 to Wk46 2024

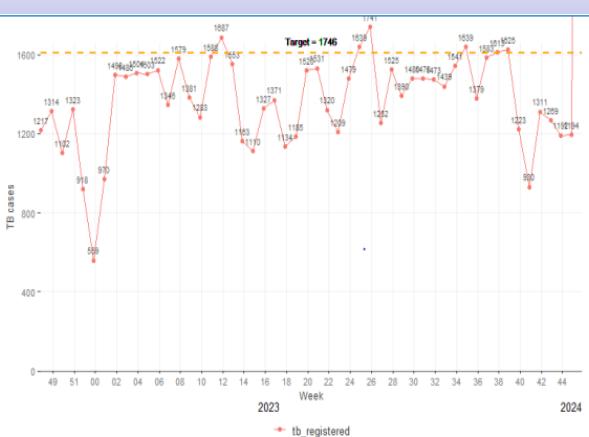


Figure 11.4: Comparison of TB burden by Health Regions between Epi Weeks 45-46, 2024

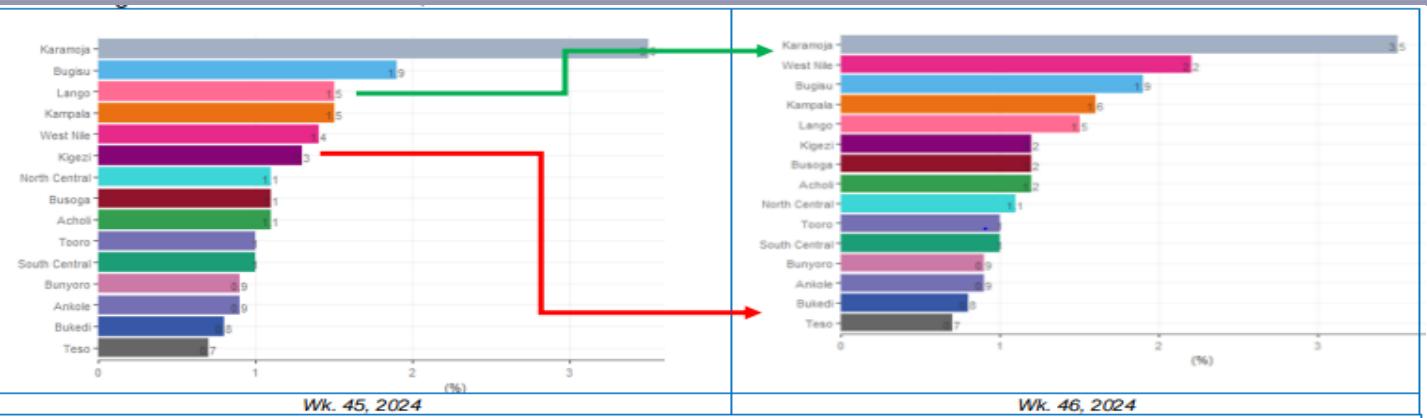


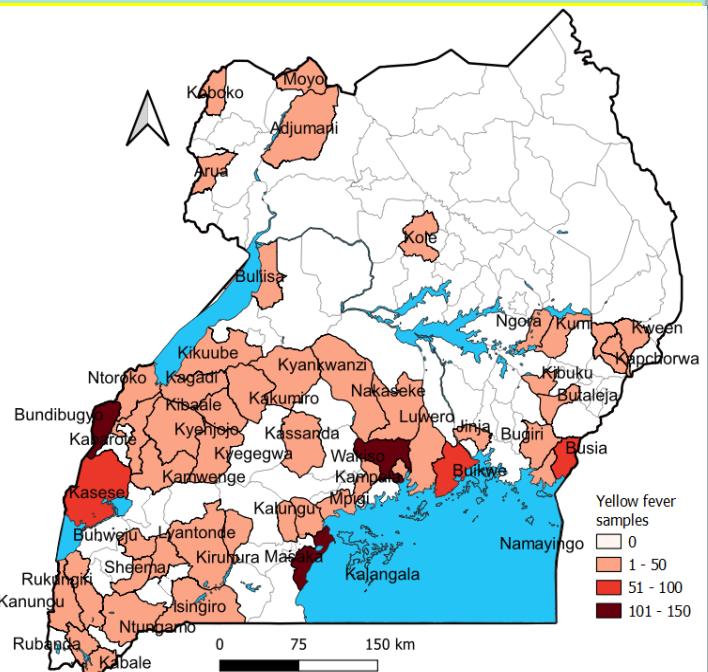
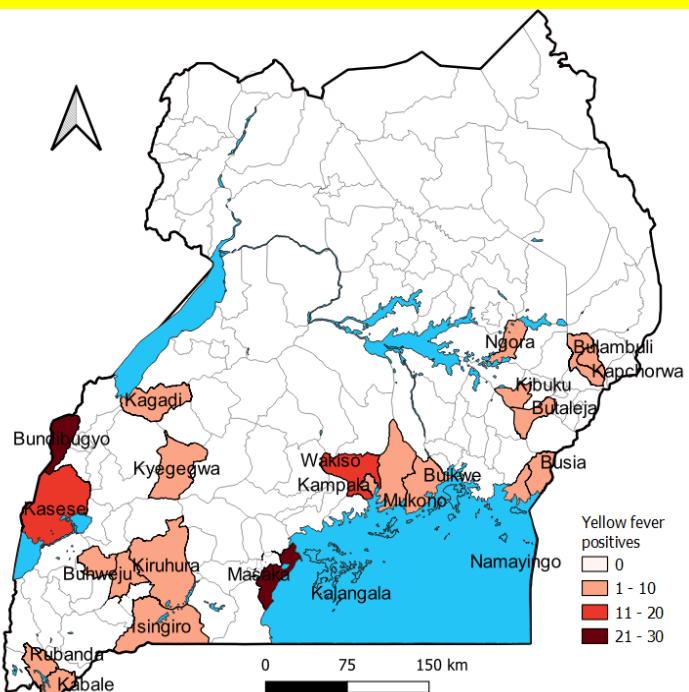
Figure 1.4.1: High burdened Regions in Uganda WK45, 2024 – 30 2024. Karamoja, Kampala, Bugisu, and Lango had the highest burden at 3.1 to 5.1 per 100,000 Karamoja among the response regions has had the highest burden of TB followed by Kampala, Lango whereas, Bukedi and Kigezi registered largest decrease from the previous week.

Yellow Fever Virus (YFV) Surveillance

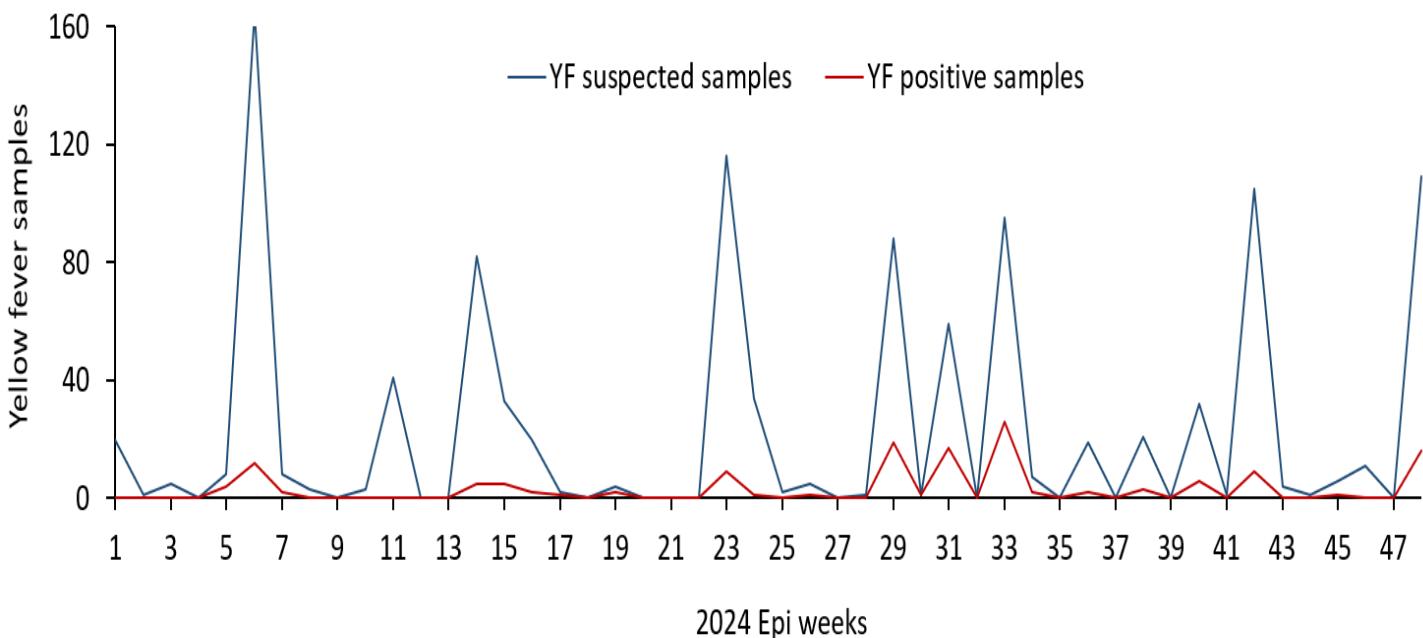
Figure 12.1 : Districts submitting samples for suspected YFV during 2024 EpiWeeks 01-48

During 2024 WK48, no yellow fever-suspected samples were submitted to UVRI.

Cumulatively, 1080 samples have been submitted. The map on the right shows the districts where the tested yellow fever suspected samples came from between (WK01-48, 2024). During WK01-48 2024, 146 samples tested positive for



yellow fever. The map on the left shows districts where the positive samples came from. The graph below shows yellow fever samples and positives during 2024.

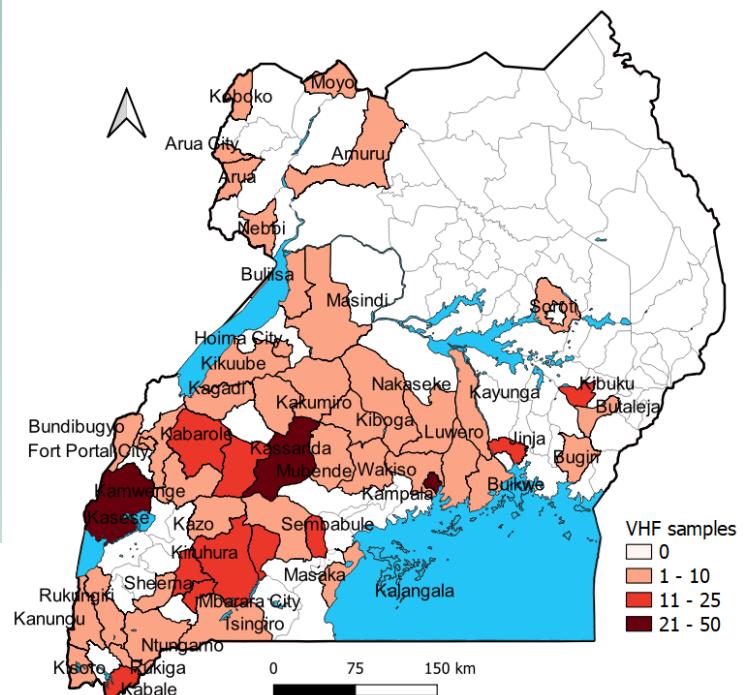
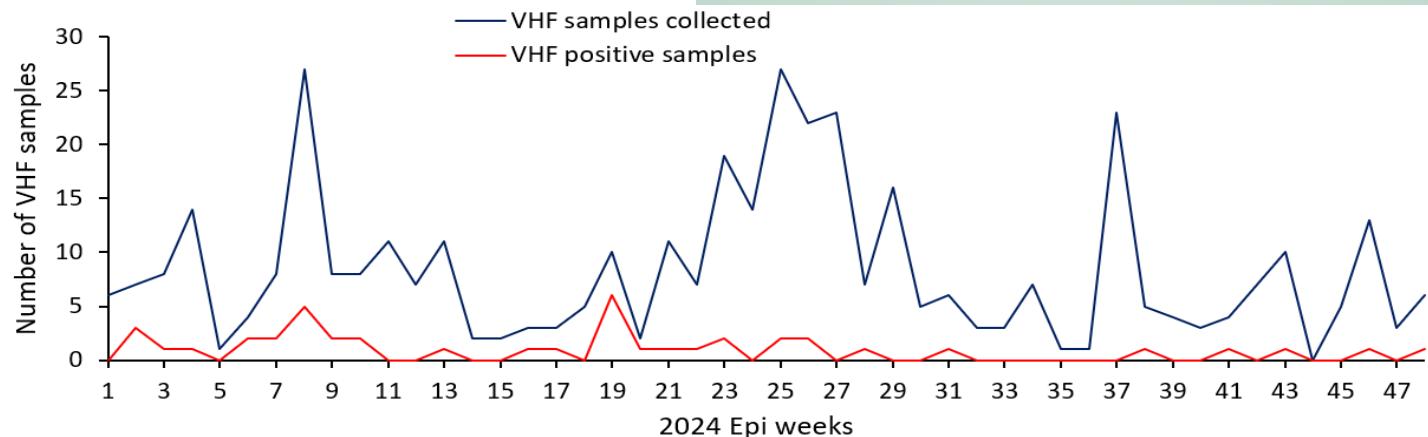
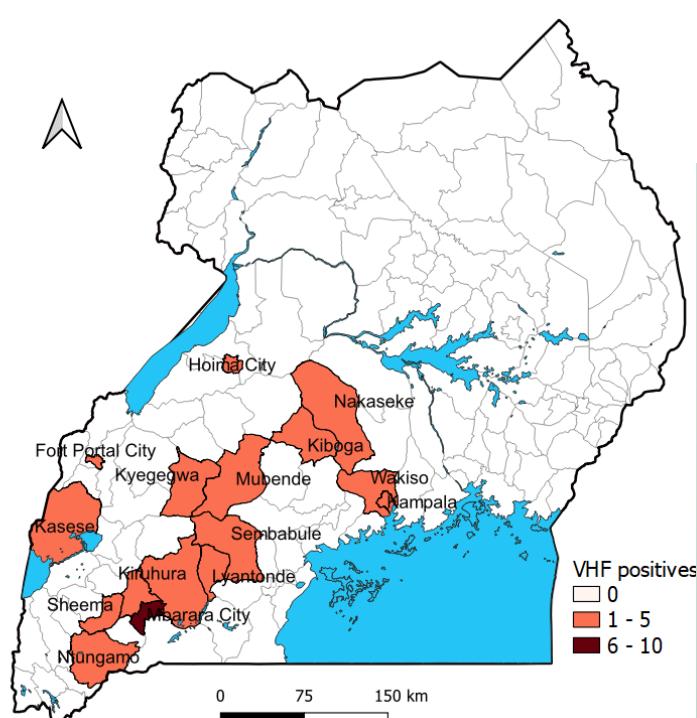


Viral Hemorrhagic Fevers Surveillance

Figure 13.1: Districts submitting samples for suspected VHF during 2024 EpiWeeks 01-48

Between 2024 WK01-48, a total of 401 VHF suspected samples were collected; 356 from alive and 47 from dead. Kasese District had the highest number of samples (44) followed by Mubende District (40) and Kampala City (34). The map on the right shows the distribution of samples collected by districts. Most of them are from central, western and West Nile regions of Uganda.

Cumulatively, 24 samples tested positive for



RVF; 92% (22/24) were from males while 8% (2/24) were from females. Majority of the positive RVF samples (12) were from Mbarara District and City. Nineteen samples (15 from males) tested positive for CCHF. These were from the districts of Kampala (5), Lyantonde (3), Kiruhura (3), Kasese (2), Wakiso (2), Mbarara (1), Hoima (1), Fortportal and Kiboga (1). These have been responded to as outbreaks under the zoonosis IMT. The map on the left shows districts with positive VHF samples.

Malaria Status Update

HIGHLIGHTS

 **84.3%** Reporting rate

 **158,569** Confirmed malaria cases



1.4% (2)
Districts had inadequate ACT stock (<8 weeks)

 **22** Reported deaths

 **00** Districts response

 **37.7%** Test Positive Rate

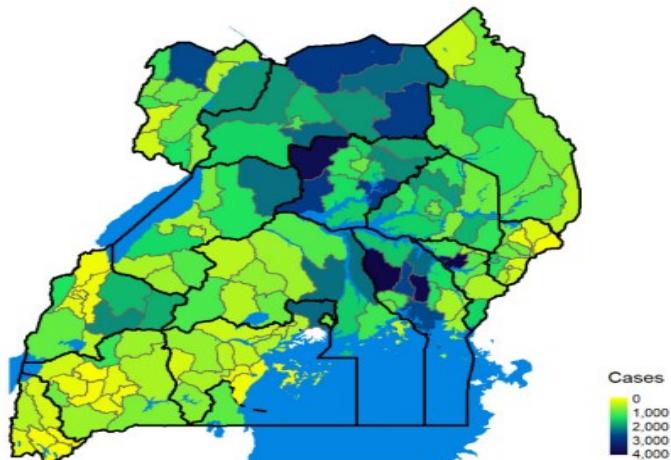
 **00** Districts in Alert



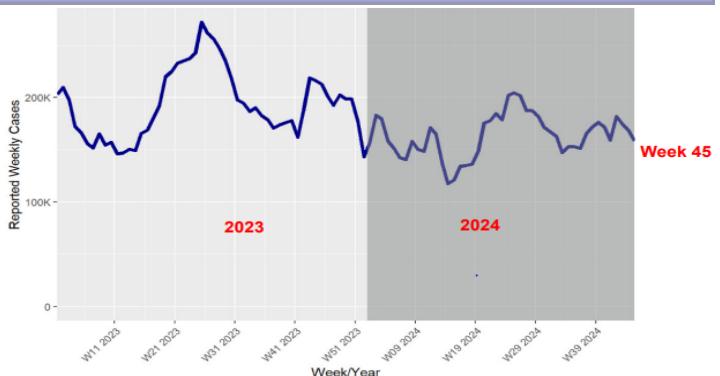
45.9% (67)
Districts had inadequate RDT stock (< 8 weeks)

The testing rate for patients with fever was 95.6 % (381,881) | Proportion treated with a negative test was 7.7% (117)
| Proportion treated without a test was 6.5% (3,948) | Proportion treated with a positive result was 94.6% (145,138)

Figure 13.1: Distribution of malaria cases by district during 2024WK 46



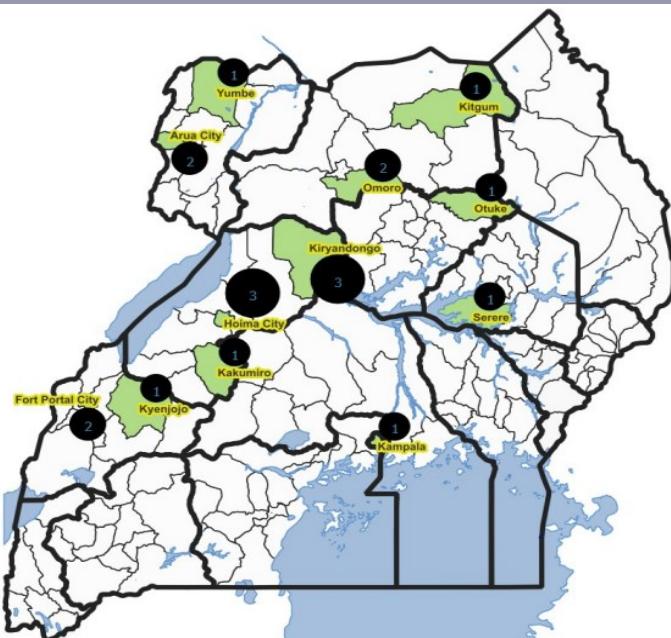
All the eastern districts that received IRS with Actellic plus other interventions are now in watch mode. An additional round of IRS with Actellic was completed in April 2024.



Top 10 districts reporting the most cases this week are: Kamuli (4715), Kibuku (4614), Iganga (3876), Oyam (3761), Apac (2823), Lamwo (2804), Dokolo (2776), Agago (2761), Luuka (2627), Yumbe (2584)

Currently, weekly cases are on an upward trend across the country, following the first peak transmission season. The current years peak is lower than that of 2023.

Figure 13.2: Malaria reported deaths during 2024WK 46



District	Health Facility	Deaths
Hoima City	Hoima Regional Referral Hospital	3
Kiryandongo	Panyadoli Health Centre IV	3
Arua City	Arua Regional Referral Hospital	2
Fort Portal City	Fort Portal Regional Referral Hospital	2
Omoro	Lalogi Health Centre IV	2
Otuke	Orum Health Centre IV	2
Kakumiro	Kakindo Health Centre IV	1
Kitgum	Kitgum General Hospital	1
Koboko	Koboko General Hospital	1
Kyenjojo	Midas Torch Health Centre IV	1
Kampala	Nakasero Hospital	1
Moroto	Nakiloro Health Centre II	1
Serere	Serere Health Centre IV	1
Yumbe	Swinga Health Centre III	1

Points of Entry (POE) Surveillance

Table 15.1: Traveler screening at Uganda's Points of Entry during 2024 Epi Week 46

Source: IOM, eIDSR

#	POE	Travelers Screened (Entry)	Travelers Screened (Exit)	During 2024 EpiWeek 46 a total of 155,728 incoming, and 37,444 exiting travelers at 24 Points of Entry (POEs) were screened. The highest traffic was registered at Mpondwe, Bunagana, Elegu, and Malaba (Table 15.1). Presumptive Tuberculosis was identified among 23 travelers, 23 travelers were tested for TB, one traveler was confirmed with TB and one traveller was linked to care (Table 15.2).			
1	Mpondwe	68,968	1,525				
2	Bunagana	23,232	8,692				
3	Elegu	22,729	11,070				
4	Malaba	6,512	-				
5	Cyanika	6,098	4,999				
6	Busunga	5,374	5,371				
7	Busia	5,266	-				
8	Katuna	4,801	-				
9	Mirama Hills	3,530	-				
10	Kokwochaya	2,380	1,285				
11	Vurra	1,378	1,130				
12	Alakas	1,120	595				
13	Ntoroko Main	782	839	21	Suam	189	58
14	Kyeshero	686	134	22	Sebagoro	153	65
15	Katwe	659	292	23	Hima Cement	71	169
16	Arua Airport	533	262	24	Ngomrom	44	36
17	Transami	396	396	Total		155,728	37,444
18	Ishasha	353	113				
19	Kayanzi	251	251				
20	Ndaiga	223	162				

Table 14.2: Tuberculosis screening among travelers during 2024 Epi Week 46

#	POE	# presumptive TB patients identified	# presumptive TB patients tested for TB	# confirmed TB patients identified	# confirmed TB patients linked to care
1	Bunagana	04	04	00	00
2	Busia	02	02	00	00
3	Elegu	04	04	00	00
4	Hima Cement	03	03	00	00
5	Mpondwe	09	09	00	00
6	Ngomrom	01	01	01	01
	Total	23	23	01	01

Event Based Surveillance (EBS)

Table 16.1 : Regional-based Signals received and triaged via the 6767 line week 47

Region	Total Signals	Alert Verified	Signals discarded	Human	Animal	Natural Disaster	Artificial Disaster
Ankole	01	01	00	01	00	00	00
Bugisu	07	07	00	07	00	00	00
Bukedi	06	00	01	06	00	00	00
Bunyoro	11	11	00	11	00	00	00
Kampala	14	14	00	10	00	00	01
Kigezi	03	03	00	03	00	00	00
Lango	07	07	00	07	00	00	00
N. Central	16	15	01	16	00	00	00
Tooro	05	05	00	05	00	00	00
West Nile	08	08	00	08	00	00	00
S. Central	10	10	00	10	00	00	00
Total	88	87	01	87	00	00	01

A total of 88 signals were received within the reporting week 47, of which (87, 99%) were verified as events. Almost all the signals received (87, 99%) were from the human sector and (1,1%) was an artificial disaster (Table 16.1). The silent regions during the week were Acholi, Busoga, Karamoja, and Teso

The human signals received during week 46 were Mpoxy, dysentery, measles/rubella, polio/AFP, rabies, Viral Hemorrhagic fever (VHF) and others. The others included malaria, colds, coughs, chicken pox, scabies and smallpox, red eyes (Table 16.2).

Table 16.2 : Regional-based suspected conditions reported within signals received and triaged week 47

Region	Mpox	Dysentery	Measles/ Rubella	Polio/ AFP	Rabies	VHF	Others
Ankole	01	00	00	00	00	00	00
Bugisu	02	00	01	00	01	00	00
Bukedi	03	01	00	00	00	00	01
Bunyoro	11	00	00	00	00	00	00
Kampala	09	00	01	00	00	00	01
Kigezi	03	00	00	00	00	00	00
Lango	06	00	00	01	00	00	00
N. Central	16	00	00	00	00	00	00
Tooro	03	00	00	00	00	00	01
West Nile	05	00	00	02	00	00	00
S. Central	08	00	00	00	00	01	00
Total	67	01	02	03	01	01	03

PUBLIC HEALTH EMERGENCIES (PHES) IN AND AROUND UGANDA

Table 15.1: Active PHEs in Uganda during 2024 WK48

	Activation Date	Location	All Cases	Confirmed Cases	Human Deaths
Measles	07-Nov-24	Jinja	05	05	00
	15-Nov-24	Kiryandongo	07	07	00
	28-Nov-24	Mayuge	05	05	00
	21-Nov-24	Nakaseke	05	03	00
	15-Nov-24	Bugiri	05	05	00
Cholera	18-Nov-24	Adjumani	07	02	00
Anthrax	18-Oct-24	Kazo	27	08	00
	26-Nov-24	Kiruhura	07	02	00
	08-Oct-24	Madi Okollo	02	01	00
	17-Sep-24	Bushenyi, Buhweju, Ibanda	28	05	01
	17-Sep-24	Kanungu	80	04	05
Mpox	24-Jul-24	55 districts		836	04
CCHF	28-Nov-24	Kampala, Masindi	01	01	01
	11-Nov-24	Kyenjojo	12	01	01
Sembabule, Rakai, Kyotera, Lwengo, Masaka					
Rabies	19-Nov-24	City	39	-	04
Landslides	28-Nov-24	Bulambuli	125		21
cVDPV2	31-May-24	Mbale City			

Source: National PHEOC, WHO Bulletin

Currently, Uganda is responding to a Mpox outbreak in 55 districts, cVDPV2 outbreak in Mbale City, Measles outbreaks in five districts, Anthrax outbreaks in seven districts, CCHF outbreaks in two districts, Rabies in five districts, suspected cholera in Koboko, undiagnosed illnesses from DRC, cholera in DRC, Tanzania and South Sudan, cVDPV2 in Kenya and DRC. districts, mostly affecting Bulambuli.

High Priority Signals being Monitored	Activation Date	Location
MVD Readiness	27-Sep-24	23 districts in Ankole and Kigezi Regions Namayingo, Mukono, Wakiso, Buikwe, Kalangala, Masaka, Kumi, Ngara
Presumptive Yellow Fever	01-Dec-24	Masaka, Kumi, Ngara
Cluster of deaths	04-Dec-24	Mubende
Suspected Cholera	25-Nov-24	Koboko
Undiagnosed Illness	03-Dec-24	DRC - Kwango, Panzi
Cholera in Tanzania	05-Sep-24	Tanzania
Cholera in S. Sudan	17-Jul-24	S. Sudan
Cholera in DRC	05-Mar-24	DRC
cVDPV2 in DRC	31-May-24	DRC
cVDPV2 in Kenya	29-Jan-24	Kenya