

EPIDEMIOLOGICAL BULLETIN: Weekly/Volume 2/Number 13/ Page 1-8/28Mar-2Apr 2016 Abyot Bekele, MPH¹

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Highlights of the Week:

- The national Surveillance report completeness rate is 88.7% in week 13 of 2016;
- The new SAM (Severe Acute Malnutrition) cases increasing from week to week high comparing with similar week of 2014 and 2015;
- The number of malaria cases were increasing in 16 woredas while it is decreasing in majority of malaria hotspot woredas;
- Measles crosses the normal threshold (five suspected cases per month) in 48 woredas;
- AWD outbreak is being reported in 14 woredas in three regions (Oromia, Somali, SNNP),
- Sporadic meningitis cases have been reporting from different woredas, not crossed the epidemic threshold;

I. Introduction

This Epidemiological Weekly Bulletin serves to provide key information on public health emergency management activities, and summarizes surveillance data and performance on epidemic prone diseases and other public health emergencies. The bulletin mainly includes surveillance data of week 13 of 2016 and daily phone communication, line list reports of outbreaks for week 14 of 2016. It highlights the surveillance completeness and timeliness across the regions, trends of diseases under surveillance, cluster of cases and events, ongoing outbreaks and responses undertaken at all levels in Ethiopia. The number of disease specific cases indicated in this issue of bulletin are subject to change due to on-going receiving late surveillance data and retrospective verification and investigation of data from outbreak areas.

II. Surveillance report completeness and timeliness

Completeness: In week 13, the national surveillance completeness rate is 88.7% which is above WHO minimum requirement. Comparing with previous week, the national completeness rate is decreased. Of the 11 regional states and city administrations, 10 of them achieved more than 80%. Harari, Addis Ababa, Afar and Amhara regions achieved more than 90% surveillance completeness. Gambella region reported less than 80%. In general

nationally the surveillance is in the position of detecting any unusual increment of diseases or conditions under surveillance (Figure 1).

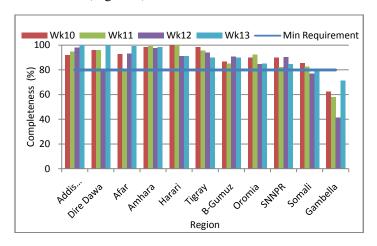


Figure 1: Regional Surveillance Report Completeness, Week 10-13/2016

Timeliness: In week 13, the national surveillance timeliness rate is 88.7% which is above WHO minimum requirement. From the total 11 regional states and city administrations 10 of them achieved more than 80% surveillance report timeliness. Gambella region achieved less than 80% for the last several consecutive weeks (Figure 2).

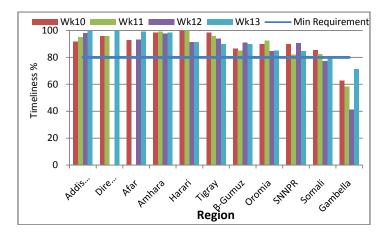


Figure 2: Regional Surveillance Report timeliness, Week 10-13/2016

III. Diseases and conditions

1) Severe Acute Malnutrition (SAM)

National SAM Trend: In week 13, a total of 5,630 new SAM cases with 13 deaths (2.8% CFR) were reported to national level through weekly routine surveillance from all regions. Among the new cases 5,160 are outpatient and the rest 470 are inpatient cases. Grossly, the trend is increasing from week to week. Comparing with the last week data, the new SAM cases in week 13 of 2016 increased by 13% (from 4,982 in week 12 to 5,630 in week 13). Similarly, the new SAM cases are increased by 70% in week 13 of 2016 compared with the same week of 2014 (from 3,318 in week 13 of 2014 to 5,630 in week 13 of 2016) and by 42% compared with same week of 2015 (from 3,958 in week 13 of 2015 to 5,630 in week 13 of 2016) (Figure 3).

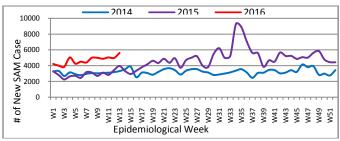


Figure 3: National SAM cases trend, 2014-2016

Regional SAM Trend: Among the 5.630 new SAM cases reported in the week, 2478 (44%) are reported from Oromia regional sate, followed by SNNP and Amhara regions, 1071 (19%) and 919 (16%) respectively. Compared with week 12 of 2016, the new SAM cases trend is increased in Oromia, SNNP, Amhara and Tigray regions in week 13 of 2016 (Figure 4).

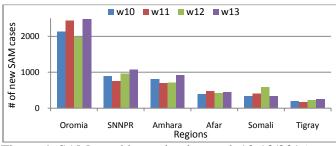


Figure 4: SAM trend by region by week 10-13/2016

Among the total new SAM cases reported in the week, 470 (8.3%) are new inpatient cases. Relatively, the new inpatient SAM cases are high in Oromia followed by SNNP region (Table 1).

Table 1: New OTP and SC SAM cases and deaths in week 13, 2016

,				
Region	Total SAM	OTP	Inpatient	Death
Oromia	2478	2227	251	7
SNNPR	1071	945	126	5
Amhara	919	884	35	0
Afar	445	422	23	0
Somali	337	333	4	0
Tigray	251	240	11	0
Dire Dawa	47	46	1	0
Addis Ababa	30	30	0	0
Harari	22	12	10	0
B-Gumuz	18	15	3	1
Gambella	12	6	6	0
Grand Total	5630	5160	470	13
Percent	100.0	91.7	8.3	2.8

Zonal SAM Trend: In week 13, East Hararge, West Hararge, West Arsi, Bale, South Wollo, Hadiya, Sidama, Guji, Waghimra, Zone 02, Zone 03, North Wollo, Walayita, East Shewa and South Gonder zones reported the highest number of new SAM cases. Totally, top 15 zones contributed 62.6% of the national cases reported in the week. Comparing with previous week, the number of new SAM cases relatively increased in week 13 of 2016 in West Hararge, West Arsi, Guji, Shinille, Hadiya, Arsi, Bale, Bale, South Wollo, Sidama, Waghimra, Zone 02, Zone 03, North Wollo, Walayita, East Shewa and South Gonder zones (Table 2).

Table 2: Top 15 zones reported highest number of new SAM cases in week 13 of 2016

Region	Zone	w10	w11	w12	w13
Oro	E/Hararge	460	786		534
Oro	W/Hararge	460	397	385	486
Oro	W/Arsi	367	391	397	437
Oro	Bale	142	153	206	297
Amh	S/Wollo	186	169	145	262
SNNP	Hadiya	148		219	201
SNNP	Sidama	157	208	185	199
Oro	Guji	111	163	232	174
Amh	WagHimra	82	105	97	160
Afar	Zone 02	70	163	125	140
Afar	Zone 03	124	127	112	140
Amh	N/Wollo	72	66	131	139
SNNP	Wolayita	52	78	49	124
Oro	E/Shewa	84	98	110	118
Amh	S/Gonder	103	80	67	112
Sum Top 15 zones		2618	2984	2460	3523
Sum National		4876	5045	4982	5630
Percent top 15 zones		53.7	59.1	49.4	62.6

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Woreda SAM Trend: In week 13, Shashemene, Shalla and Siraro woredas of West Arsi zone and Gewane woreda of Zone 03 of Afar region reported the highest number of new SAM cases. Top 15 woredas contributed 20% of the national new SAM cases reported in the week (table 3).

Table 3: Top 15 woredas reported highest number of new SAM cases in week 13 of 2016

IICW D	Hew SAM cases III week 13 of 2010							
Region	Zone	Woreda	w10	w11	w12	w13		
Afar	Zone 02	Bedu		63	71	62		
Afar	Zone 03	Gewane	49	79	52	83		
Amh	S/Gonder	Ebinat	64	43	22	59		
Amh	S/Wollo	Kelala	2	3	3	63		
Amh	Waghimra	Dehena	12	36	22	65		
Oro	Bale	Seweyna	28	0	28	56		
Oro	E/Hararge	Girawa	52	83		62		
Oro	E/Hararge	Fedis	74	84		56		
Oro	W/Arsi	Shashemene	93	134	97	135		
Oro	W/Arsi	Shala	100	114	96	116		
Oro	W/Arsi	Siraro	105	96	124	93		
Oro	W/Hararge	Chiro Z	56	53	64	71		
Oro	W/Hararge	Gemechis	55	58	56	63		
Oro	W/Hararge	Mesela	46	74	36	57		
SNNP	Hadiya	E/Badawocho	27		50	65		
Sum Top	15 Woredas		763	920	721	1106		
Sum Nat	ional		4876	5045	4982	5630		
Percent t	op 15 Woreda	S	16	18	14	20		
Oro Oro Oro SNNP Sum Top Sum Nat	W/Hararge W/Hararge W/Hararge Hadiya o 15 Woredas ional	Chiro Z Gemechis Mesela E/Badawocho	56 55 46 27 763 4876	53 58 74 920 5045	64 56 36 50 721 4982	71 63 57 65 1106 5630		

2) Malaria

National Malaria Trend: Totally 26,621 malaria cases (clinical and Confirmed) were reported to the national level in week 13 of 2016. Comparing with last week data, in week 13 the national malaria cases decreased by 5% (28,071 in week 12 of 2016 to 26,621 in week 13 of 2016). The total malaria cases reported in week 13 of 2016 is decreased by 19% comparing with similar week of 2014 (from 34,027 in week 13 of 2014 to 26,621 in week 13 of 2016) and increased by 11% comparing with similar week of 2015 (from 24,030 in week 13 of 2015 to 26,621 in week 13 of 2016) (Figure 5).

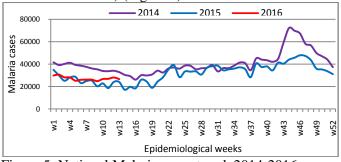


Figure 5: National Malaria cases trend, 2014-2016

Regional Malaria Trend: SNNP region reported the highest number of cases in the week followed by Amhara and Tigray regions. Compared with week 12 of 2016, the malaria cases relatively increased in SNNP, Oromia and Gambella regions (Figure 6).

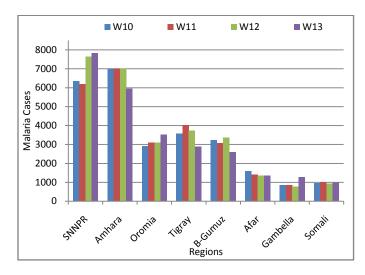


Figure 6: Regional Malaria trend, Week 10-13/2016

In week 13, a total of 133,454 febrile cases suspected for malaria are tested either by microscopy or RDT. Of which 24,781 (19%) are ended positive for malaria parasites. PF contributes 16,466 (62%) while 8315 (31%) were PV and the rest 1,840 (7%) are clinically diagnosed malaria cases. There are only 151 (0.6%) inpatient cases with seven deaths reported in the week (Table 4).

Table 4: Regional Malaria cases by type and region, Week 13, 2016

Region	Tested	Malaria	PF	PV	Inp	Death	MPR
SNNP	41364	7823	5245	2638	64	0	19
Amh	38544	5970	3485	2478	3	0	15
Oro	24601	3518	1843	1151	7	1	12
Tigr	13841	2882	1777	1060	15	0	20
BG	7588	2606	1882	472	33	0	31
Afar	3262	1358	1099	248	11	5	41
Gam	2541	1287	767	110	11	0	35
Som	735	997	271	70	7	0	46
Har	240	95	71	18	0	0	37
AA	535	82	24	68	0	0	17
DD	203	3	2	2	0	1	2
Total	133454	26621	16466	8315	151	7	19

Note: Tested-Suspected malaria fever cases examined by microscopy or RDT, PF-Plasmodium falciparum, PV-Plasmodium vivax, Inp-Inpatient malaria cases, MPR, Malaria positivity rate

Zonal Malaria Trend: Up on disaggregating the data to the zonal level, the total malaria cases have been increased in Zone 03 of Afar Region, South Gonder of Amhara Region, Borena, West Shewa, West Wellega and West Arsi zones of Oromia region; Walayita, Gamo Gofa, Gurage, Gedio, Dawuro and Segen zones of SNNP region and Afder zone of Somali region (Figure 7.1).

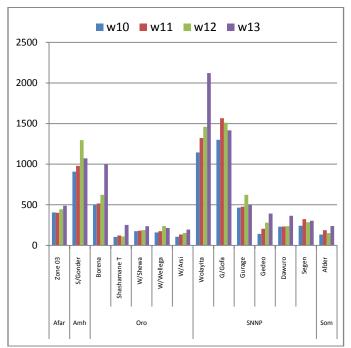


Figure 7.1: Malaria Cases by zones, Week 10-13/2016

Woreda Malaria Trend: Up on disaggregating the data to the woreda level, malaria cases have been increased in the last four weeks (week 10-13) in 16 woredas. Among them malaria cases are seriously increasing for the last four weeks in Amibara woreda of Zone 03 of Afar region, Abeya Woreda of Borena zone of Oromia Region, Dilla Town of Gedio zone, Damot Gale, Humbo, Sodo zuria woredas of Walayita zone (Figure 8.1 & 8.2).

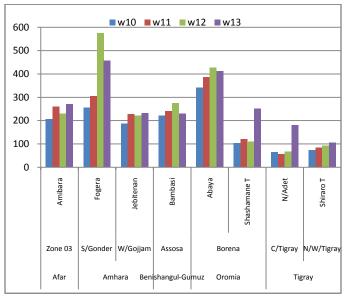


Figure 8.1: Woredas in which malaria cases increasing from week to week, Wk 10-13/2016

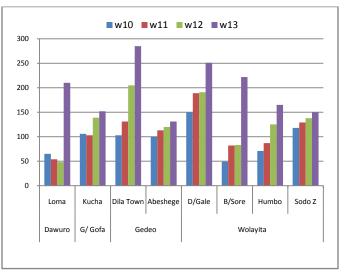


Figure 8.2: Woredas in which malaria cases increasing from week to week, Wk 10-13/2016

3) Rabies:

Nationally, a total of 46 rabies exposure cases with one death are reported in week 13 of 2016. Majority of the cases reported from Amhara and Tigray regions. Among them 14 (30%) are reported from Gonder Town, 9 (20%) are from Mekele town and 7 (15%) are from Shire Endesilasie woreda of North West Tigray (Table 5).

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Table 5: Regional rabies Exposure cases, Week 13, 2016

Region	Zone	Woreda	E-Cases	%	Deaths
Amh	Bahirdar	Bahir Dar Town	1	2	1
Amh	Gonder T	Gonder Town	14	30	0
Amh	N/Shewa	D/brehan Hos	3	7	0
Amh	Waghimra	T/Hailu Hos	2	4	0
Amh	W/Gojjam	Mecha	1	2	0
BG	Metekel	Dibate	4	9	0
Tig	C/Tigray	T/Abergele	2	4	0
Tig	E/Tigray	G/Meheda	2	4	0
Tig	E/Tigray	Erop	1	2	0
Tig	Mekele	Mekele	9	20	0
Tig	N/W/ Tigray	S/E/Silase T	7	15	0
Total			46	100	1

4) Meningitis

In week 13 of 2016, a total of 44 suspected meningitis cases are reported to the national level through weekly routine surveillance . Among them 26 (59%) are from SNNP, 11 (25%) cases are from Oromia, 5 (11%) are from Amhara region, 1(2%) is from Gambella region and 1 (2%) is from Somali region. Majority of the cases reported from Hospitals. Up on disaggregating the hospital cases to woreda level, the cases were reported from different woredas (table 6). The Meningitis threshold was not crossed in all reported woredas .

Table 6: Suspected Meningitis Cases in week 13, 2016

Region	Zone	Woreda	Total MM	OP	ΙP	Death
Amh	Bahirdar	Bahirdar Hos	2	2	0	0
Amh	Waghimra	T/Hailu Hos	2	0	2	0
Amh	W/Gojjam	Mecha	1	0	1	0
Gam	Agnuwak	Gambella Hos	1	0	1	0
Oro	Bale	Ginir T	2	0	2	0
Oro	Borena	Yabelo Hos	2	0	2	0
Oro	E/Hararge	G/muleta Ho	2	2	0	0
Oro	I/A/Bor	Chewaqa	3	3	0	0
Oro	W/Hararge	Chiro Hos	2	2	0	0
SNNP	Gedeo	Dila Hospital	7	0	7	
SNNP	Hawassa T	Hawassa Hos	10	0	10	0
SNNP	Konta Town	Konta T	3	0	3	0
SNNP	Siliti	Werabie Hos	2	0	2	0
SNNP	Wolayita	D/Gale	4	4	0	0
Som	Warder	Warder Hos	1	1	0	0
Total			44	14	30	0

5) Measles

National measles trend: Grossly the national measles suspected cases reported through weekly routine surveillance is decreased in week 13 of 2016 compared with similar week of 2014 and 2015 (Figure 13.1). In week 13 of 2016, a total of 217 suspected measles reported from all regions. Majority of cases 116 (53%)

were reported from Oromia region followed by Somali region 36 (17%).

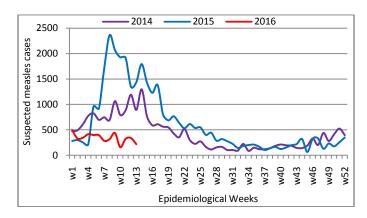


Figure 13.1: National suspected Measles Trend ,2014-2016

In week 13, a total of 47 samples were received at national laboratory. Among them 18 (38.3%) were rested positive for Measles IgM while 2 samples (4.3%) were tested positive for Rubella IgM (Figure 13.2).

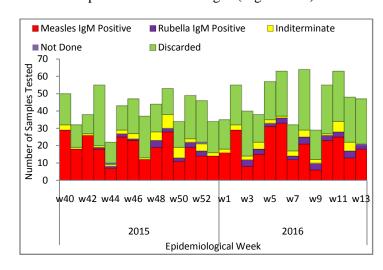


Figure 13.2: National Measles and Rubella laboratory test results, Wk40/2015-Wk13/2016

Woreda Measles trend: Up on disaggregating suspected measles cases to woreda level, 48 woredas reported five and more suspected cases in the last one month (Week 10-13 of 2016). This shows the woredas are in measles outbreak as per our technical guideline. The suspected measles cases reported from woredas in the outbreak contributed 70% of the national cases reported in week 13 (Table 7).

Table 7: Suspected measles cases from Wk 10-13/2016

Region	Zone	Woreda	w10	w11	w12	w13	Total
Oro	H/G/Wolega	A/Chomen	0	46	18	15	79
SNNP	Sidama	Chire	0	8	0	14	22
Amh	N/Gondar	Alefa	0	0	20	13	33
Oro	Jimma	L/ Kosa	0	0	1	11	12
Oro	Borena	Yabelo	0	0	0	9	9
Oro	E/Hararge	Gole Oda		0		9	9
Oro	Guji	H/Wamena	4	0	14	9	27
Oro	Guji	Shakiso t	4	14	12	9	39
Som	Jijiga	Kabribayah	0	0	19	9	28
Som	Degehabur	Birkod	2	0	0	7	9
Amh	W/Gojjam	N/Achefer	0	6	0	4	10
Gam	Agnuwak	Dima	13	1		4	18
Oro	Arsi	Merti	1	0	3	4	8
Oro	Guji	O/Shakiso	3	6	0	4	13
Oro	Guji	Qercha	0	1	0	4	5
Som	Degehabur	Dagahbur R	4	0	2	4	10
Oro	Guji	Girja	0		30	3	36
SNNP	Kefa	Cheta	0	36	8	3	47
Som	Shinile	Erar D/Markos	4 1	6 2	4	2	17
Amh SNNP	E/Gojjam Gedeo	Markos Kochore	0	18	0	2	5 20
SNNP	Sidama	Bensa	0	2	4	2	8
Som	Afder	Jarati	0	2	2	2	6
Som	Degehabur	Dagahbur	2	2	2	2	8
Som	Degehabur	Gunagado	0	5	14	2	21
Oro	Borena	Bule Hora	1	5	1	1	8
Afar	Zone 03	B/Modayitu	3	14	3	0	20
Amh	S/Gonder	Estea	0	0	37	0	37
Oro	Arsi	Guna	4	1	4	0	9
Oro	Bale	Goro	-	8	0	0	8
Oro	E/Shewa	Adami Tulu	5	0	0	0	5
Oro	Guji	A/Reda	0	6	0	0	6
Oro	Jimma	Agaro	0	6	7	0	13
Oro	W/Hararge	Anchar	0	0	22	0	22
Oro	W/Hararge	Gemechis	1	6	0	0	7
Som	Afder	ElKare	6	0	0	0	6
Som	Jijiga	Babile	0	0	15	0	15
Som	Liben	Hudat	0	12	0	0	12
Som	Warder	Warder		1	6	0	7
Oro	K/Wellega	D/Wabera	12	13	2		27
Oro	K/Wellega	H/Gelan	0	0	6		6
SNNP	B/Maji	Maji	8	3	0		11
Som	Degehabur	Ararso	0	5	0		5
Sub-tota			78	238	256	151	723
	ses per week		158	323	339	217	1037
Percent			49	74	76	70	70

6) Anthrax

In week 13, a total of 6 suspected Anthrax cases with two deaths reported from Amhara and Tigray regions.

Table 9: Suspected Anthrax cases reported in Week 13, 2016)

Region	Zone	Woreda	Cases	Deaths	
Amhara	North Gondar	Adiarikay	2		2
Amhara	North Gondar	Dembia	1		0
Amhara	Wag Himra	Sekota	1		0
Tigray	Central Tigray	Abiyi Adi Town	1		0
Tigray	Central Tigray	Wereilehi	1		0

Region	Zone	Woreda	Cases	Deaths	
Grand Total			6	2	2

7) Maternal Death

Since maternal death is integrated in PHEM surveillance system a number of deaths were reported to national level both through weekly report and MDRF. This week a total of 25 maternal deaths were reported to national level through rutine surveillance (Table 8).

Table 8: Maternal Deaths report by Woreda, Week 13, 2016)

Table 6. Mat	critar Deaths report by	Worcaa, Week 13,	2010)
Region	Zone	Woreda	Deaths
SNNPR	Gedeo	Dila Town	5
Amhara	Bahir Dar Liyu Town	Bahir Dar Town	3
Oromia	East Hararge	Girawa	3
Afar	Zone 05	Dewe	1
Amhara	East Gojjam	Dibay Tilatgin	1
Amhara	North Gondar	Lay Armachew	1
Amhara	North Gondar	Qaura	1
Dire Dawa	Dredewa	Dilchora Hospital	1
Dire Dawa	Dredewa	Jelediesa	1
Oromia	East Hararge	Deder Hospital	1
Oromia	East Wellega	Diga	1
Oromia	Sebeta Town	Sebeta Town	1
Oromia	South West Shewa	St.Luke Hospital	1
Oromia	South West Shewa	Tulu Bolo Hospital	1
Oromia	West Arsi	Gambo Hospital	1
Oromia	West Wellega	Lalo Asabi	1
Oromia	West Wellega	Nejo Hospital	1
Grand Total			25

8) Suspected AWD Cases:

The Moyale AWD outbreak is further expanding to other woredas. So far, 14 woredas were reported suspected AWD cases in three regions (Oromia, Somali and SNNP regions) (Map 1). Nationally as of 08 April 2016, about 1347 suspected AWD cases with 160 confirmed cases were reported from 14 woredas in three regions (table 9). Suspected cases were linked with laboratory confirmed cases. Currently, daily suspected AWD Cases are decreased in majority of the affected woredas.

Table 9: AWD cases by Woreda, Week 13, 2016)

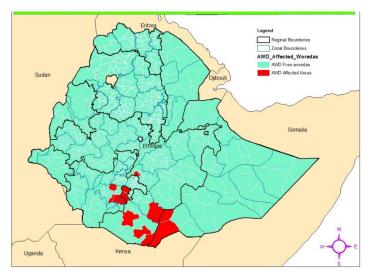
			.,	/	
Region	Zone	Woreda	First case	T.Cases	Confirmed
Oromia	Borena	Muyale	13/6/2015	286	53
Oromia	Borena	Gelana	3/3/2016	51	5
Oromia	Borena	Dehas	3/13/16	14	0
Oromia	Borena	Yaebello	1/22/2016	6	0
Oromia	Borena	Abeya	3/31/2016	1	0
Oromia	Guji	Liben	3/23/2016	14	0
Oromia	Guji	N/Borena	3/27/2016	34	0
Oromia	W/Arsi	Shashemene	4/1/2016	3	0
Somali	Liben	Muyale	13/21/2015	216	84
Somali	Liben	Hudet	2/23/2016	276	14
SNNP	G/Gofa	A/minch T	3/5/2016	295	2
SNNP	G/Gofa	A/minch R	3/5/2016	64	0
SNNP	G/Gofa	Bonke	3/13/2016	3	0

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Region	Zone	Woreda	First case	T.Cases	Confirmed
SNNP	G/Gofa	Kucha	3/22/2016	28	0
SNNP	Amaro	Amaro	3/10/2016	9	2
		Total		1347	160



Map 1: AWD Affected Woredas, 02 April 2016

Moyale (Oromia and Somali): The first case was reported on 6 Nov 2015 (Four Months). Since then a total of 510 suspected cases were reported from the town as of 27 March 2016. Currently the trend is decresing. In Oromia Muyale the last case was reported om 31 March 2016 (Figure 13.1 & 13.2).

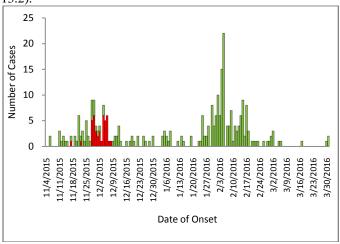


Figure 13.1: AWD Outbreak trend by date of onset, Moyale, Oromia, 2016, N=286 (53 positive, 13 on culture)

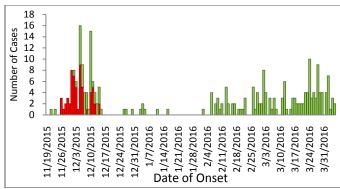


Figure 13.2: AWD Outbreak trend by date of onset, Moyale, Somali, 2016, N=263 (84 positive, 5 on Culture).

Hudet Woreda AWD Outbreak: The index case was reported on March 23, 2016. As of 08 April 2016, a total of 276 suspected cases and 14 confirmed cases were reported. Currently the trend is sharply decreasing and zero report for the last three days (Figure 14).

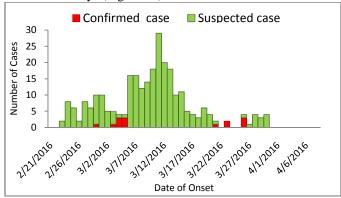


Figure 13: AWD Outbreak trend by date of onset, Hudet, Liben, Somali, 2016, N=276 (14positive by Culture)

Gelana Woreda AWD Outbreak: The index case was travel to Arbamich and returned back with the diseases on March 4, 2016. Three samples collected and tested at Arbaminch sub regional lab and turned positive. As of 08 April 2016, a total of 51 cases were reported. No new case for the last 21 days (Figure 15).

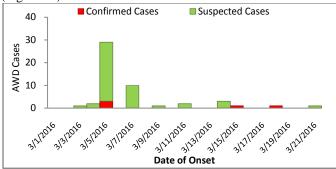


Figure 14: AWD Outbreak trend by date of onset, Gelana, Borena, Oromia, 2016, N=51 (4 were confirmed)

Gamogofa AWD Outbreak: As of 02 April 2016, a total of 362 cases were reported from Arbamich Town, Arbaminch Zuria and Bonke wredas of the zone. Among them 295 (82%) were from Arbamich town, 64(18%) were from Arbaminch zuria and 3 (1%) were from Bonke wereda. Samples collected and tested at regional laboratory and turned positive. Currently the trend is sharply decreasing and the last case was reported on 30th March 2016 in Arbamich Zuria and on 7th April 2016 in Arbamich town (Figure 16).

■ Suspected Cases ■ Confirmd Cases 60 Number of Cases 50 40 30 20 10 3/12/2016 31212016 3/9/2016 3/15/2016 3/18/2016 3/6/2016 3/20/2016 3/21/2016 Date of Onset

Figure 15: AWD Outbreak trend by date of onset, Arbaminch, Liben, Somali, 2016, N=362 (2 positive by Culture)

Guji Zone: Suspected AWD Cases are also being reported from Negele Borena twon and Liben woreda of Guji zone. The first suspected case was reported on march 23/2016. As of April 09/2016 a total of 48 siuspected AWD cases were reported and the last case was reported on April 08/2016 (Figure 16).

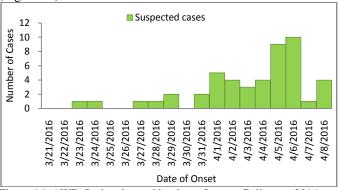


Figure 16: AWD Outbreak trend by date of onset, Guji zone, 2016, N=48 (no positive case)

Amaro Woreda Suspected AWD Outbreak: In Amaro special woreda the first suspected AWD case was reported on 7th March 2016. As of April 09/2016 a total of nine suspected AWD cases were identified and reported from the woreda. Among them three were positive by RDT. Now the daily case is decreased and the last case was reported two weeks ago on 26th March 2016.

9) Influenza Sentinel Surveillance

In week 13 of 2016, a total of 25 samples were collected from patients with Influnza like illness or SARI at predesignated influenza sentinel sites. Among them 6 were tested positive for Influenza B, One was tested positive for Influenza A H1N1 (2010Pandemic) and 6 were positive for seasonal influenza A (H3N2) (Figure 17).

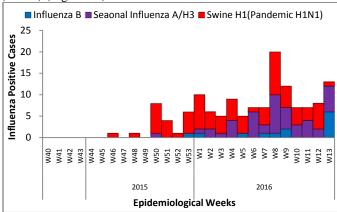


Figure 17: Influenza cases by suptype, Sentinel Surveillance, 2015-2016

10) Guinea Worm (GW)

Level I Surveillance: No new case of animal and human in 2016 year to date. However, a total of 130 suspected cases were identified and verified in endemic woredas (Gog and Abobo). Among them 9 suspected cases were admitted to the Case Containment Center (CCC) for follow-up. Level II Surveillance: In the week, a total of 28 GW rumors received and verified from currently non endemic woredas of Gambella region. Level III Surveillance: A total of 12 rumors of Guinea worm cases received through tall free hotline (8335) and linked with nearby health facility for verification.

Beyond the surveillance activities, abate chemical application is ongoing in all at risk villages. Ethiopian Dracunculiasis Eradication Program regional quarterly review meeting was held in Metu town from 28-29 Mar 2016. National level press conference is planned to be held on April 18/2016 in the presence of different medias.

IV. Response

AWD Outbreak:

- Different teams deployed from regional health bureaus, Ethiopian Public Health Institute and partners have continued supporting all AWD affected woredas.
- Lifesaving drugs, medical supplies and CTC kits are continiously refilled
- c. Patient isolation and treatment in designated CTC (Case Treatment Center), Contact trasing, infection prevention, health education and social mobilization activities, distributing of water treatment chemicals at

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Ethiopian Public Health Institute Center for Public Health Emergency Management

- household level, treatment of water at the source and detail case investigation is undertaking in all AWD affected woredas.
- d. Latrine construction is massively undertaking by community through the clossfollow up and inspection of woreda and kebele cabinets.
- e. Dailly activities are being evaluated by zonal and woreda emergency preparedness and response committees
- f. Onjob training is also being given at CTCs