



**EPIDEMIOLOGICAL BULLETIN: Weekly/Volume 2/Number 14/ Page 1-8 /4-10 Apr 2016**

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**Highlights of the Week:**

- ✦ The national Surveillance report completeness rate is 89.2% in week 14 of 2016;
- ✦ The new SAM (Severe Acute Malnutrition) cases are high comparing with similar week of 2014 and 2015;
- ✦ The number of malaria cases were increasing in 23 woredas while it is decreasing in majority of malaria hotspot woredas;
- ✦ Measles crosses the normal threshold (five suspected cases per month) in 46 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 14 of 2016 and daily phone communication, line list reports of outbreaks for week 15 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 14, the national surveillance completeness rate is 89.2% which is above WHO minimum requirement. Comparing with previous week, the national completeness rate is decreased. Of the 11 regional states and city administrations, eight of them achieved more than 80%. Harari, Addis Ababa, Afar, Binishangul, SNNP and Amhara regions achieved more than 90% surveillance completeness. Gambella region reported less than 80%

while Dire Dawa town did not sent the surveillance data for the week. It is only Gambella region which is continuously underreporting. In general nationally the surveillance is in the position of detecting any unusual increment of diseases or conditions under surveillance (Figure 1).

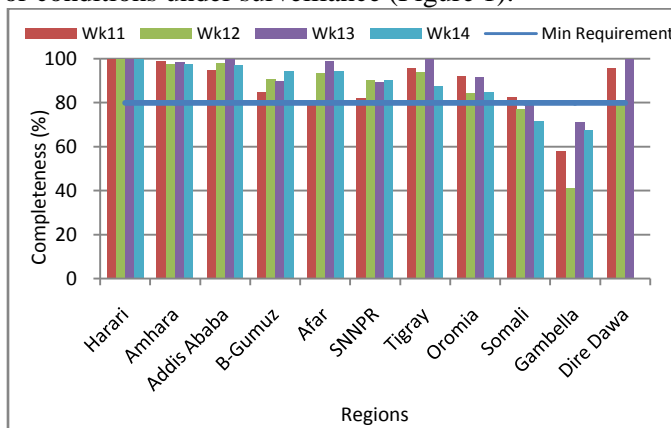


Figure 1: Regional Surveillance Report Completeness, Week 11-14/2016

**Timeliness:** In week 14, the national surveillance timeliness rate is 89.2% which is above WHO minimum requirement. From the total 11 regional states and city administrations eight of them achieved more than 80% surveillance report timeliness. Gambella region reported less than 80% for the last several consecutive weeks (Figure 2).

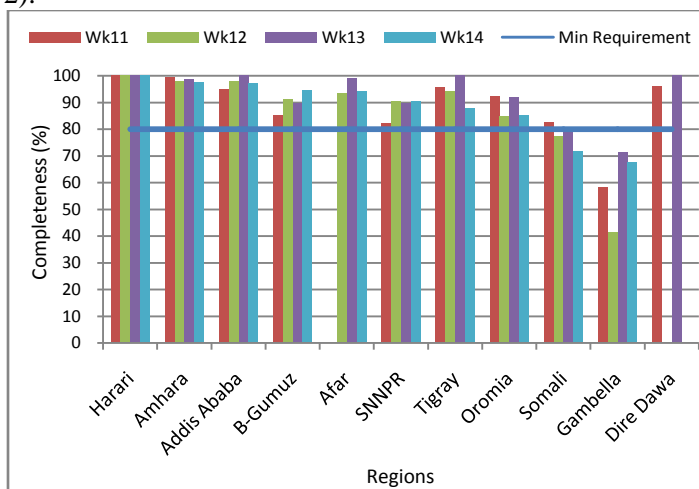


Figure 2: Regional Surveillance Report timeliness, Week 11-14/2016

# Weekly Epidemiological Bulletin

## III. Diseases and conditions

### 1) Severe Acute Malnutrition (SAM)

**National SAM Trend:** In week 14, a total of 5,281 new SAM cases with 3 deaths (0.6% CFR) were reported to national level through weekly routine surveillance from all regions. Among the new cases 4,751 are outpatient and the rest 530 are inpatient cases. Grossly, the trend is increasing from week to week. Comparing with the last week data, the new SAM cases in week 14 of 2016 decreased by 8% (from 5,736 in week 13 to 5,281 in week 14). However, the new SAM cases are increased by 49% in week 14 of 2016 compared with the same week of 2014 (from 3,553 in week 14 of 2014 to 5,281 in week 14 of 2016) and by 59% compared with same week of 2015 (from 3,311 in week 14 of 2015 to 5,281 in week 14 of 2016) (Figure 3).

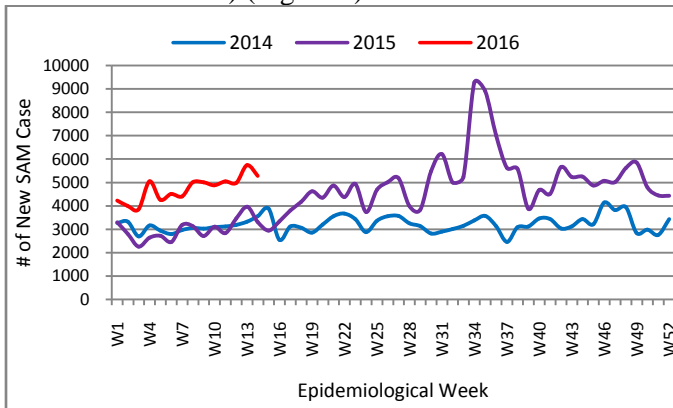


Figure 3: National SAM cases trend, 2014-2016

**Regional SAM Trend:** Among the 5,281 new SAM cases reported in the week, 2,202 (42%) are reported from Oromia regional state, followed by SNNP and Amhara regions, 1,059 (20%) and 922 (17%) respectively. Compared with last week data, the new SAM cases trend is slightly increased in Afar region in week 14 of 2016 (Figure 4).

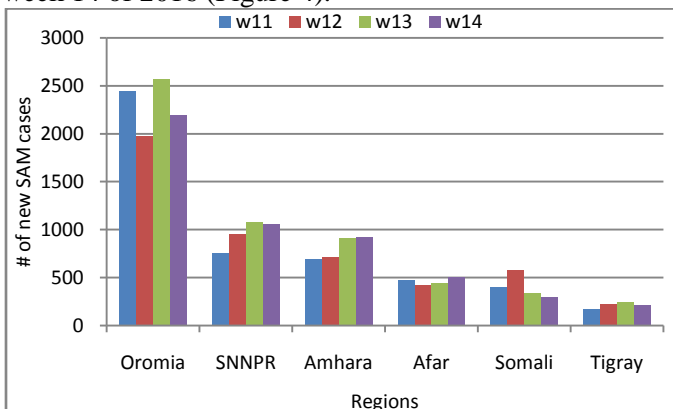


Figure 4: SAM trend by region by week 11-14/2016

Among the total new SAM cases reported in the week, 530 (10%) 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 14, 2016

Region	Total SAM	OTP	Inpatient	Death
Oromia	2202	1949	253	1
SNNPR	1059	918	141	1
Amhara	922	864	58	1
Afar	504	477	27	0
Somali	293	283	10	0
Tigray	218	196	22	0
Addis Ababa	38	35	3	0
Harari	21	11	10	0
BG	12	8	4	0
Gambella	12	10	2	0
<b>Total</b>	<b>5281</b>	<b>4751</b>	<b>530</b>	<b>3</b>
Percent	100.0	90.0	10.0	0.6

**Zonal SAM Trend:** In week 14, East Hararge, West Hararge, West Arsi, Hadiya, South Gonder, Sidama, Waghimra, Zone 02, Arsi, Bale, South Wollo, Zone 03, Guji, North Gonder and East Shewa zones reported the highest number of new SAM cases. Totally, top 15 zones contributed 61% of the national cases reported in the week. Comparing with previous week, the number of new SAM cases relatively increased in week 14 of 2016 in Hadiya, South Gonder, Sidama, Waghimra, Zone 02, Arsi and North Gonder zones (Table 2).

Table 2: Top 15 zones reported highest number of new SAM cases in week 14 of 2016

Region	Zone	W11	W12	W13	W14
Oromia	E/Hararge	786		534	478
Oromia	W/Hararge	397	385	486	415
Oromia	W/Arsi	391	397	437	282
SNNPR	Hadiya		219	201	279
Amhara	S/Gonder	80	67	112	190
SNNPR	Sidama	208	185	201	189
Amhara	Waghimra	105	97	160	185
Afar	Zone 02	163	125	140	177
Oromia	Arsi	84	218	96	165
Oromia	Bale	153	206	297	163
Amhara	S/Wollo	169	145	262	159
Afar	Zone 03	127	112	140	140
Oromia	Guji	163	232	174	137
Amhara	N/Gondar	96	114	98	133
Oromia	E/Shewa	98	110	118	110
Sum Top 15 zones		3020	2612	3456	3202
Sum National		5045	4982	5736	5281
Percent top 15 zones		60	52	60	61



**Woreda SAM Trend:** In week 14, Shalla woreda of West Arsi zone and Ebinet woreda of South Gonder zone reported the highest number of new SAM cases compared with other woredas. Top 15 woredas contributed 19% 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 14 of 2016

Region	Zone	Woreda	w11	w12	w13	w14
Oro	W/Arsi	Shala	114	96	116	120
Amh	S/Gonder	Ebinat	43	22	59	86
SNNP	Hadiya	E/Badwocho		50	65	81
Oro	W/Hararge	H/gudina	11	38	8	69
Oro	W/Arsi	Siraro	96	124	93	66
Oro	W/Hararge	Chiro Z	53	64	71	64
Afar	Zone 03	Gewane	79	52	83	63
Oro	E/Hararge	Fedis	84		56	63
Afar	Zone 02	Bedu	63	71	62	62
Oro	E/Hararge	Girawa	83		62	61
Amh	Waghimra	Dehena	36	22	65	59
Amh	Waghimra	Sekota	23	19	12	58
Oro	W/Hararge	Meiso	31	27	51	53
Amh	S/Gonder	Simada	18	14	20	52
SNNP	Hadiya	Gibe		26	10	51
Sum Top 15 Woredas			734	625	833	1008
Sum National			5045	4982	5736	5281
Percent top 15 Woredas			15	13	15	19

## 2) Malaria

**National Malaria Trend:** Totally 26,809 malaria cases (clinical and Confirmed) were reported to the national level in week 14 of 2016. Comparing with last week data, in week 14 the national malaria cases decreased by 1% (from 27,214 in week 13 of 2016 to 26,809 in week 14 of 2016). The total malaria cases reported in week 14 of 2016 is decreased by 17% comparing with similar week of 2014 (from 30,376 in week 14 of 2014 to 26,809 in week 14 of 2016) and increased by 13% comparing with similar week of 2015 (from 17,132 in week 14 of 2015 to 26,809 in week 14 of 2016) (Figure 5).

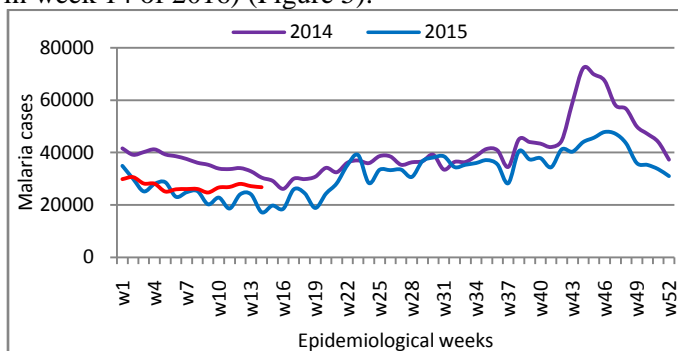


Figure 5: National Malaria cases trend, 2014-2016

**Regional Malaria Trend:** SNNP region reported the highest number of cases in the week followed by Amhara and Oromia regions. Compared with last week, the malaria cases relatively increased in Amhara region while it is decreased in other regions (Figure 6).

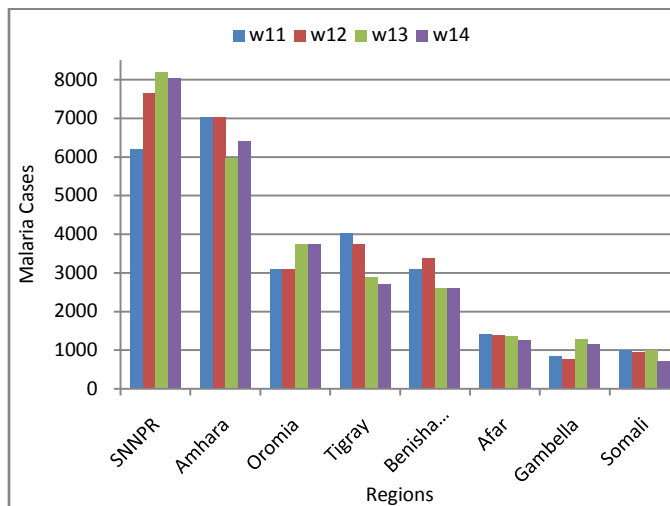


Figure 6: Regional Malaria trend, Week 11-14/2016

In week 14, a total of 130,457 febrile cases suspected for malaria are tested either by microscopy or RDT. Of which 25,301 (19%) are ended positive for malaria parasites. PF contributes 16,739 (62%) while 8562 (32%) were PV and the rest 1,508 (6%) are clinically diagnosed malaria cases. There are only 166 (0.6%) inpatient cases with zero death reported in the week (Table 4).

Table 4: Regional Malaria cases by type and region, Week 14, 2016

Region	Tested	Malaria	PF	PV	Cli.	Inp	Death	MPR
AA	570	81	34	46	1	0	0	14
Afar	3615	1252	1023	223	6	14	0	34
Amh	37944	6399	3722	2675	2	11	0	17
BG	7953	2591	1781	476	334	30	0	28
Gam	2204	1161	721	85	355	32	0	37
Har	280	137	105	25	7	3	0	46
Oro	24184	3731	2115	1464	152	6	0	15
SNNP	40299	8028	5331	2586	111	49	0	20
Som	481	713	143	54	516	5	0	41
Tig	12927	2716	1764	928	24	16	0	21
Total	130457	26809	16739	8562	1508	166	0	19
%			62	32	6	0.6		

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

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**Zonal Malaria Trend:** Up on disaggregating the data to the zonal level, the total malaria cases have been increased in few zones. Among them malaria is slightly upsurge in South Gonder zone of Amhara region, Gurage, Hawasa and Dawuro zones of SNNP region, Kelem and Ilu Ababor zones of Oromia region (Figure 7.1 & 7.2).

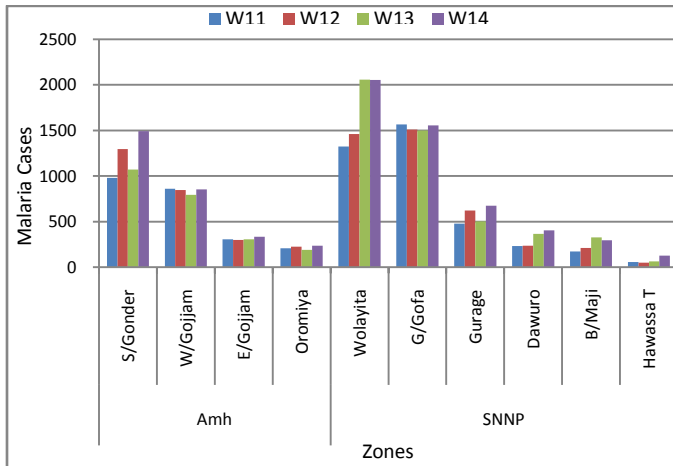


Figure 7.1: Malaria Cases by zones, Week 11-14/2016

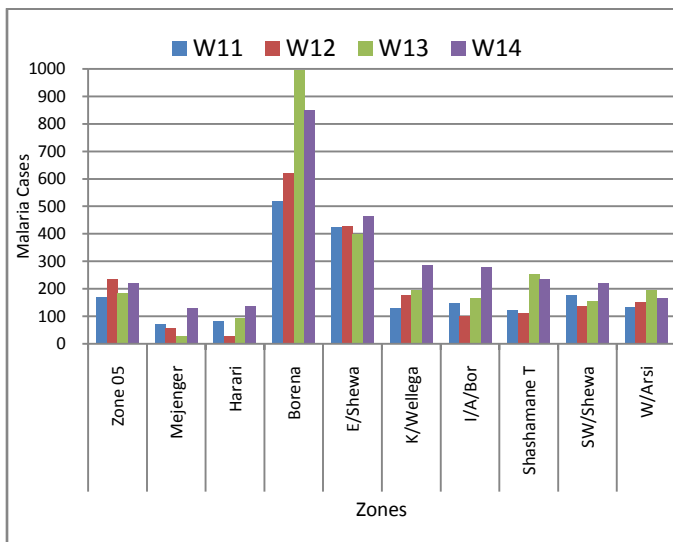


Figure 7.2: Malaria Cases by zones, Week 11-14/2016

**Woreda Malaria Trend:** Up on disaggregating the data to the woreda level, malaria cases have been increased in the last four weeks (week 11-14) in 23 woredas. Among them malaria cases are seriously increasing for the last four weeks in Dembia woreda of North Gonder, Fogera woreda of South Gonder, Jebitanan woreda of East Gojem zones of Amhara region, Bulen and Dibate woredas of

Metekel zone of Benishangul Gumuz region and Abeya Woreda of Borena zone of Oromia Region (Figure 8.1 & 8.2).

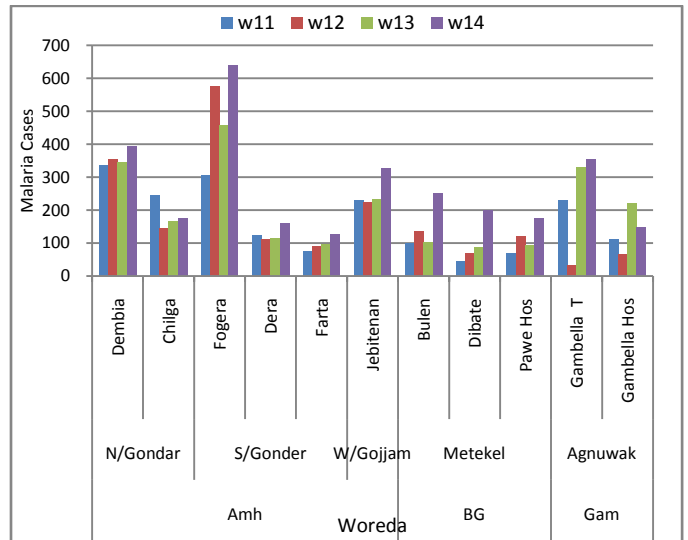


Figure 8.1: Woredas in which malaria cases increasing from week to week, Wk 11-14/2016

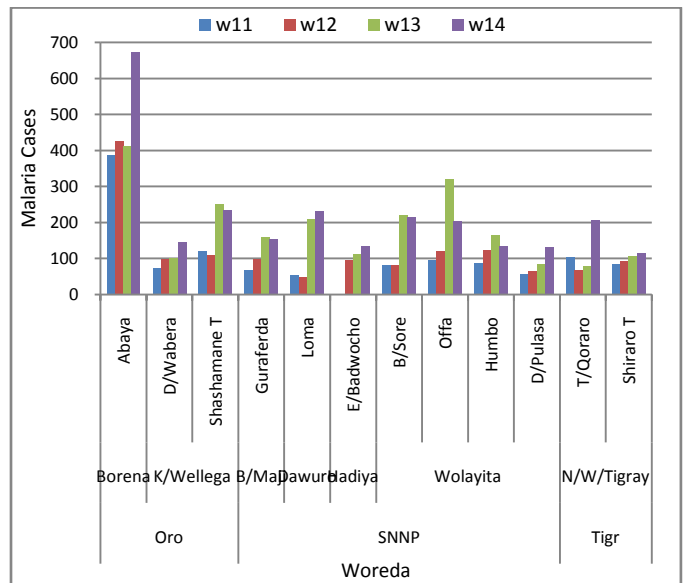


Figure 8.2: Woredas in which malaria cases increasing from week to week, Wk 11-14/2016

### 3) Rabies:

Nationally, a total of 47 rabies exposure cases with one death are reported in week 14 of 2016. Majority of the cases reported from Amhara and Tigray regions. Among them 22 (47%) are reported from Gonder Town, 5 (11%)



are from Mekele town and 5 (11%) are from Mecha woreda of West Gojjem (Table 5).

Table 5: Regional rabies Exposure cases , Week 14, 2016

Region	Zone	Woreda	E-Cases	Percent	Deaths
Amh	Gonder T	Gonder T	22	47	0
Amh	W/Gojjam	Mecha	5	11	0
Tig	Mekele	Mekele	5	11	0
BG	Metekel	Guba	4	9	0
Tig	E/Tigray	Adi Girat T	3	6	0
Amh	Waghimra	T/Hailu Hos	2	4	0
Amh	Bahirdar T	Bahirdar T	1	2	1
Amh	E/Gojjam	D/Markos Hos	1	2	0
Amh	W/Gojjam	Sekela	1	2	0
Oro	Borena	Bule Hora	1	2	0
Oro	SW/Shewa	St.Luke Hos	1	2	0
Som	Jijiga	Kabribayah	1	2	0
<b>Total</b>			<b>47</b>	<b>100</b>	<b>1</b>

#### 4) Meningitis

In week 14 of 2016, a total of 27 suspected meningitis cases are reported to the national level through weekly routine surveillance . Among them 11 (41%) are from SNNP, 9 (33%) cases are from Oromia, 4 (15%) are from Amhara region, 2 (7%) is from Afar region and 2 (7%) 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 14, 2016

Region	Zone	Woreda	Total MM	OP	IP	Death
SNNP	Hawassa T	Hawassa Hos	6	0	6	0
Oro	E/Welega	G/Ayana	3	0	3	0
SNNP	Wolayita	Sodo Hos	3	0	3	0
Amh	Waghimra	T/Hailu Hos	2	0	2	0
Oro	Guji	Dima	2	0	2	0
Oro	Ilu Aba Bora	Chewaqa	2	2	0	0
Som	Gode	Gode Hos	2	0	2	0
Afar	Zone 01	Dubti	1	0	1	0
Afar	Zone 04	Yalo	1	1	0	0
Amh	Bahirdar T	Bahirdar T	1	0	1	0
Amh	Waghimra	Sekota T	1	1	0	0
Oro	H/G/W	Shambu T	1	0	1	0
SNNP	K/Tembaro	Durame T	1	0	1	0
SNNP	S/Omo	Jinka Hos	1	0	1	0
<b>Total</b>			<b>27</b>	<b>4</b>	<b>23</b>	<b>0</b>

#### 5) Measles

**National measles trend:** Grossly the national measles suspected cases reported through weekly routine surveillance is decreased in week 14 of 2016 compared with similar week of 2014 and 2015 (Figure 14.1). In

week 14 of 2016, a total of 216 suspected measles reported with three deaths from all regions. Majority of cases 107 (50%) were reported from Oromia region followed by SNNP region 46 (21%) (Table 7).

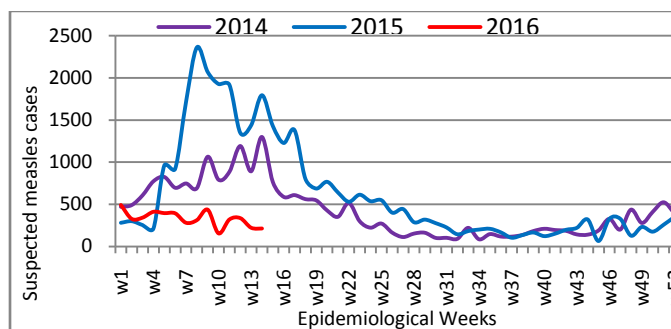


Figure 14.1: National suspected Measles Trend ,2014-2016

Table 7: Suspected Measles cases, week 14, 2016

Region	Cases	Percent	Death
Oromia	107	49.5	2
SNNPR	46	21.3	1
Amhara	34	15.7	0
Somali	18	8.3	0
Addis Ababa	4	1.9	0
Benishangul-Gumuz	4	1.9	0
Afar	2	0.9	0
Harari	1	0.5	0
Gambella	0	0.0	0
Tigray	0	0.0	0
<b>Grand Total</b>	<b>216</b>	<b>100.0</b>	<b>3</b>

**Measles Laboratory Investigation:** In week 14, a total of 43 samples were received at national laboratory. Among them 16 (37%) were rested positive for Measles IgM while 2 samples (5%) were tested positive for Rubella IgM (Figure 14.2).

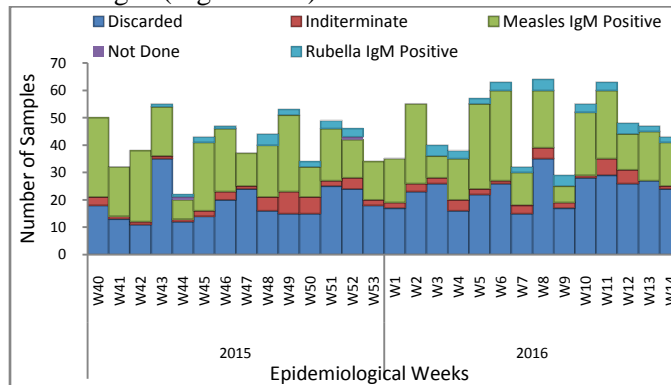


Figure 14.2: National Measles and Rubella laboratory test results , Wk40/2015-Wk14/2016

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**Woreda Measles trend:** Up on disaggregating suspected measles cases to woreda level, 46 woredas reported five and more suspected cases in the last one month (Week 11-14 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 61% of the national cases reported in week 14 (Table 8).

Table 8: Suspected measles cases from Wk 11-14/2016

Region	Zone	Woreda	w11	w12	w13	w14	Total
Afar	Zone 03	B/Modayitu	14	3	0	0	17
Amh	Bahirdar T	Bahirdar T	2	2	0	3	7
Amh	N/Gondar	Alefa	0	20	13	0	33
Amh	S/Gonder	Estea	0	37	0	0	37
Amh	W/Gojjam	N/Achefer	6	0	4	14	24
Gam	Agnuwak	Dima	1		4	0	5
Oro	Arsi	Merti	0	3	4	4	11
Oro	Arsi	Guna	1	4	0	3	8
Oro	Bale	Gololcha	0	0	4	5	9
Oro	Bale	Goro	8	0	0	0	8
Oro	Borena	Yabelo	0	0	9		9
Oro	Borena	B/Hora	5	1	1	1	8
Oro	E/Hararge	Gole Oda	0		9	3	12
Oro	Guji	Shakiso t	14	12	9	9	44
Oro	Guji	Girja	3	30	3	0	36
Oro	Guji	H/Wamena	0	14	9	0	23
Oro	Guji	O/Shakiso	6	0	4	1	11
Oro	Guji	A/Reda	6	0	0	3	9
Oro	Guji	Qercha	1	0	4	0	5
Oro	H/G/W	A/Chomen	46	18	15	30	109
Oro	H/G/W	Shambu T	0	1	3	1	5
Oro	Jimma	Agaro	6	7	0	3	16
Oro	Jimma	L/Kosa	0	1	11	0	12
Oro	Jimma	Sigmo	0		0	5	5
Oro	K/Wellega	D/Wabera	13	2	0	1	16
Oro	K/Wellega	H/Gelan	0	6	0	0	6
Oro	W/Hararge	Anchar	0	22	0	0	22
Oro	W/Hararge	Gemechis	6	0	0	0	6
SNNP	B/Maji	Maji	3	0	5	0	8
SNNP	Gedeo	Kochore	18	0	2	14	34
SNNP	Kefa	Cheta	36	8	3	0	47
SNNP	Kefa	Tello	0		0	24	24
SNNP	Konta T	Konta T		0	4	1	5
SNNP	Sidama	Chire	8	0	14	0	22
SNNP	Sidama	Bensa	2	4	2	0	8
Som	Afder	Jarati	2	2	2		6
Som	Degehabur	Gunagado	5	14	2	3	24
Som	Degehabur	Birkod	0	0	7	3	10
Som	Degehabur	Dagahbur T	2	2	2		6
Som	Degehabur	Dagahbur R	0	2	4	0	6
Som	Degehabur	Ararso	5	0		0	5
Som	Jijiga	Kabribayah	0	19	9	0	28
Som	Jijiga	Babile	0	15	0	0	15
Som	Liben	Hudat	12	0	0		12
Som	Shinile	Erar	6	4	3	0	13
Som	Warder	Warder	1	6	0		7
Sub-total			238	259	165	131	793
Total cases per week			323	339	225	216	1103
Percent			74	76	73	61	72

## 6) Anthrax

In week 14, a total of 5 suspected Anthrax cases with zero death reported from Amhara and Tigray regions.

Table 9: Suspected Anthrax cases reported in Week 14, 2016)

Region	Zone	Woreda	Cases	Deaths
Amhara	Wag Himra	Abergele	1	0
Amhara	Wag Himra	Sekota	1	0
Tigray	C/Tigray	Kola Temben	1	0
Tigray	N/W/Tigray	Shiraro Town	1	0
Tigray	N/W/Tigray	Shire Enida Silase T	1	0
Total			5	0

## 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 11 maternal deaths were reported to national level through routine surveillance. This week only Amhara, Oromia and SNNP regions reported maternal deaths while other regions reported zero death (Table 10).

Table 10: Maternal Deaths report by Woreda, Week 14, 2016)

Region	Zone	Woreda	Deaths
Amhara	Awi	Dengila Town	1
Amhara	South Gonder	Simada	1
Oromia	Arsi	Zeway Dugda	1
Oromia	East Hararge	Deder Hospital	1
Oromia	East Hararge	Kombolicha	1
Oromia	East Shewa	Adama	1
Oromia	East Wellega	Jimma Arjo	1
Oromia	North Shewa	Degem	1
Oromia	North Shewa	Dera	1
Oromia	Sebeta Town	Sebeta Town	1
SNNPR	Garage	Butajira Hospital	1
Grand Total			11

## 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 1401 suspected AWD cases with 167 confirmed cases were reported from 15 woredas in three regions (table 11). Goro Dola Woreda of Guji zone is newly affected woreda in the week. Suspected cases were linked with laboratory confirmed cases. Currently, daily suspected AWD Cases are decreased in majority of the affected woredas.

Table 11: AWD cases by Woreda, Week 14, 2016)

Region	Zone	Woreda	First case	T.Cases	Confirmed
Oromia	Borena	Muyale	14/6/2015	286	53
Oromia	Borena	Gelana	3/3/2016	52	5
Oromia	Borena	Dehas	3/14/16	14	0
Oromia	Borena	Yaebello	1/22/2016	6	0
Oromia	Borena	Abeya	3/31/2016	1	0
Oromia	Guji	Liben	3/23/2016	25	1



Region	Zone	Woreda	First case	T.Cases	Confirmed
Oromia	Guji	N/Borena	3/27/2016	55	6
Oromia	Guji	Goro Dola	4/6/2016	6	0
Oromia	W/Arsi	Shashemene	4/1/2016	3	0
Somali	Liben	Muyale	14/21/2015	273	84
Somali	Liben	Hudet	2/23/2016	276	14
SNNP	G/Gofa	A/minch T	3/5/2016	300	2
SNNP	G/Gofa	A/minch R	3/5/2016	64	0
SNNP	G/Gofa	Bonke	3/14/2016	3	0
SNNP	G/Gofa	Kucha	3/22/2016	28	0
SNNP	Amaro	Amaro	3/11/2016	9	2
Total				1401	167

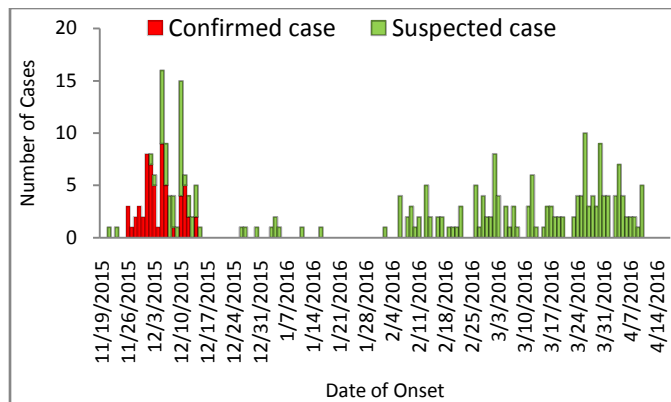
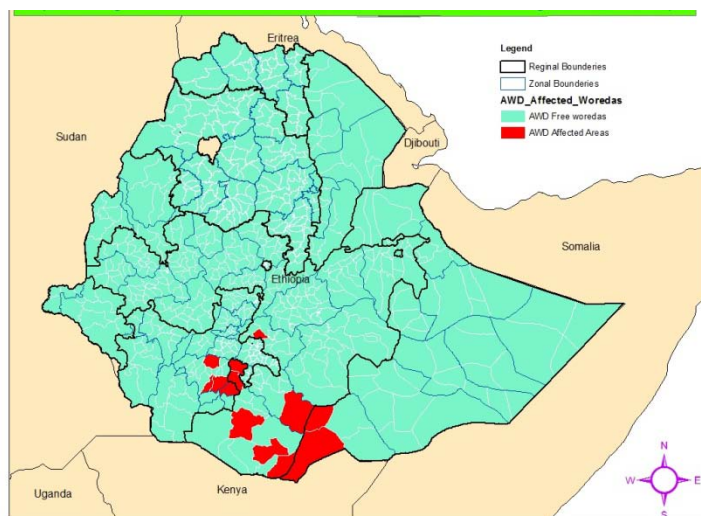


Figure 14.2: AWD Outbreak trend by date of onset, Moyale, Somali, 2016, N=273 (84 positive, 5 on Culture).



Map 1: AWD Affected Woredas, 17 April 2016

**Moyale (Oromia and Somali):** The first case was reported on 6 Nov 2015 (Four Months) . Since then a total of 559 suspected cases were reported from the town as of 17 April 2016. Currently the trend is decreasing. In Oromia Moyale the last case was reported on 2 April 2016 and In Somali Moyale the date of onset of the last case was on 10 April 2016 (Figure 14.1 & 14.2).

**Hudet Woreda AWD Outbreak:** The index case was reported on March 23, 2016. As of 17 April 2016, a total of 276 suspected cases and 14 confirmed cases were reported. Currently the trend is sharply decreasing. The date of onset of the last case was on 26 March 2016 (Figure 14).

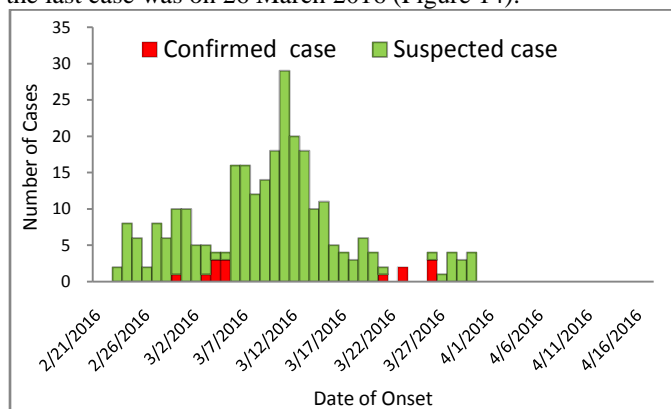


Figure 14: AWD Outbreak trend by date of onset, Hudet, Liben, Somali, 2016, N=276 (14 positive by Culture)

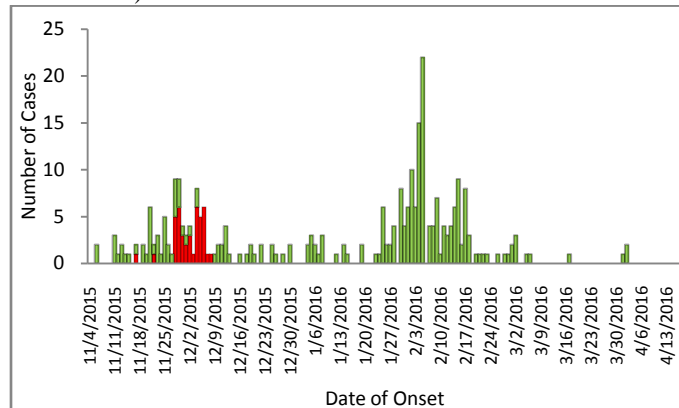


Figure 14.1: AWD Outbreak trend by date of onset, Moyale, Oromia, 2016, N=286 (53 positive, 14 on culture)

**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 17 April 2016, a total of 52 cases were reported (Figure 15).

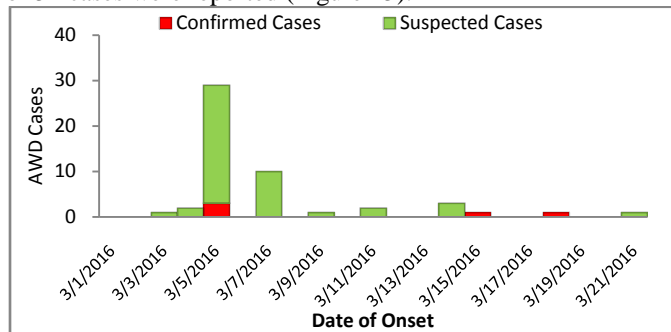


Figure 14: AWD Outbreak trend by date of onset, Gelana, Borena, Oromia, 2016, N=52 (4 were confirmed)

# Weekly Epidemiological Bulletin

**Gamogofa AWD Outbreak:** As of 17 April 2016, a total of 367 cases were reported from Arbamich Town, Arbaminch Zuria and Bonke wredas of the zone. Among them 300 (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 date of onset of the last case was on 13<sup>th</sup> April 2016 in Arbaminch Zuria and on 7<sup>th</sup> April 2016 in Arbaminch town (Figure 16).

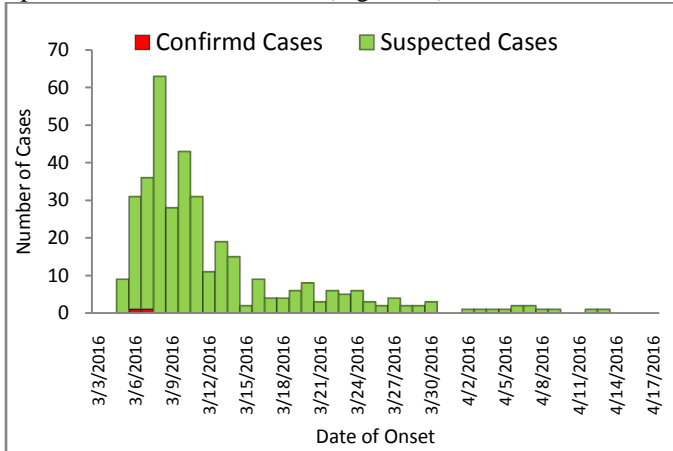


Figure 15: AWD Outbreak trend by date of onset, Arbaminch, Liben, Somali, 2016, N=367 (2 positive by Culture)

**Guji Zone:** Suspected AWD Cases are also being reported from Negele Borena town and Liben woreda of Guji zone. The first suspected case was reported on March 23/2016. As of April 16/2016 a total of 86 suspected AWD cases were reported. Among them 55 (64%) of the cases were reported from Negele Borena town, 25 (29%) from libel woreda and the rest 6 (7%) cases were reported from Goro Dola woreda. The trend of the daily suspected cases are still increasing (Figure 16).

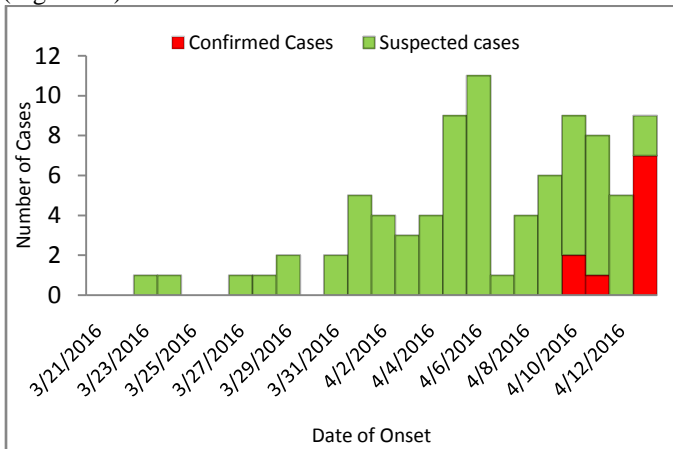


Figure 16: AWD Outbreak trend by date of onset, Guji zone, 2016, N=86 (7 positive case)

**Amaro Woreda Suspected AWD Outbreak:** In Amaro special woreda the first suspected AWD case was reported on

7<sup>th</sup> March 2016. As of April 17/2016 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 three weeks ago on 26<sup>th</sup> March 2016.

## 9) Influenza Sentinel Surveillance

In week 14 of 2016, a total of 19 samples were collected from patients with Influenza 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 (2011Pandemic) and 4 were positive for seasonal influenza A (H3N2). Relatively comparing with previous weeks the positivity rate for pandemic influenza H1N1 is decreasing (Figure 17).

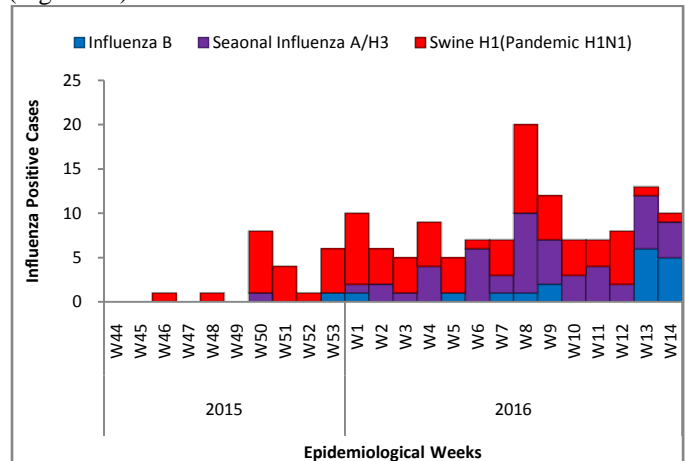


Figure 17: Influenza cases by subtype, Sentinel Surveillance, 2015-2016

## 10) Guinea Worm (GW)

**Level I Surveillance:** No new case of animal and human in 2016 year to date. However, a total of 116 suspected cases were identified and verified in endemic woredas (Gog and Abobo). Among them 5 suspected cases were admitted to the Case Containment Center (CCC) for follow-up. **Level II Surveillance:** In the week, a total of 35 GW rumors received and verified from currently non endemic woredas of Gambella region and 7 rumors from Nyangatom woreda of South Omo zone in SNNP region. **Level III Surveillance:** A total of 5 rumors of Guinea worm cases received through tall free hotline (8335) and linked with nearby health facility for verification.

Beyond the surveillance activities, joint team from EPHI, GRHB, TCC and WHO is provided supportive supervision from 11-15 April 2016 to Gog, Abobo, Lare, Aboul and Itang Woredas of Gambella region. Base line assessment and village mapping is also ongoing in Mengesh woreda. National level press conference is planned to be held on April 18/2016 in the presence of different medias. Medias were invited by Ministry of health through government communication affairs office.





#### IV. Response

##### AWD Outbreak:

- a. Different teams deployed from regional health bureaus, Ethiopian Public Health Institute and partners have continued supporting all AWD affected woredas.
- b. Lifesaving drugs, medical supplies and CTC kits are continuously refilled
- c. Patient isolation and treatment in designated CTC (Case Treatment Center), Contact tracing, infection prevention, health education and social mobilization activities, distributing of water treatment chemicals at household level, treatment of water at the source and detail case investigation is undertaken in all AWD affected woredas.
- d. Latrine construction is massively undertaken by community through the crossfollow up and inspection of woreda and kebele cabinets.
- e. Daily activities are being evaluated by zonal and woreda emergency preparedness and response committees
- f. Onjob training is also being given at CTCs