



Overview

This bulletin serves to summarize weekly surveillance data & performance of ORHB/PHEM diseases and other public health emergencies. It comprises report timeliness, completeness, trends of priority diseases, and response activities.

Objective

To provide weekly update on the status of reportable diseases/conditions to the relevant authorities for better preparedness and response activities.

Regional Highlights of the reporting week

- The regional surveillance completeness was 90% and timeliness was 89%
- A total of **1,499** measles cases and **6** deaths were reported.
- A total of **204** cholera cases and **4** deaths were reported.
- A **6** maternal and **55** perinatal death were reported.
- A total of **10** AFP with Zero death reported, Bale (1), Guji (3), East Wollega (1), Guji (1), HG Wollega (2), Sheger City (2) and Shashamane Town (2) cases.
- A total of **31393** Confirmed & clinical Malaria cases with **6** deaths reported in this week.
- A total of **3,865** SAM cases and **3** deaths reported.
- *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks.*

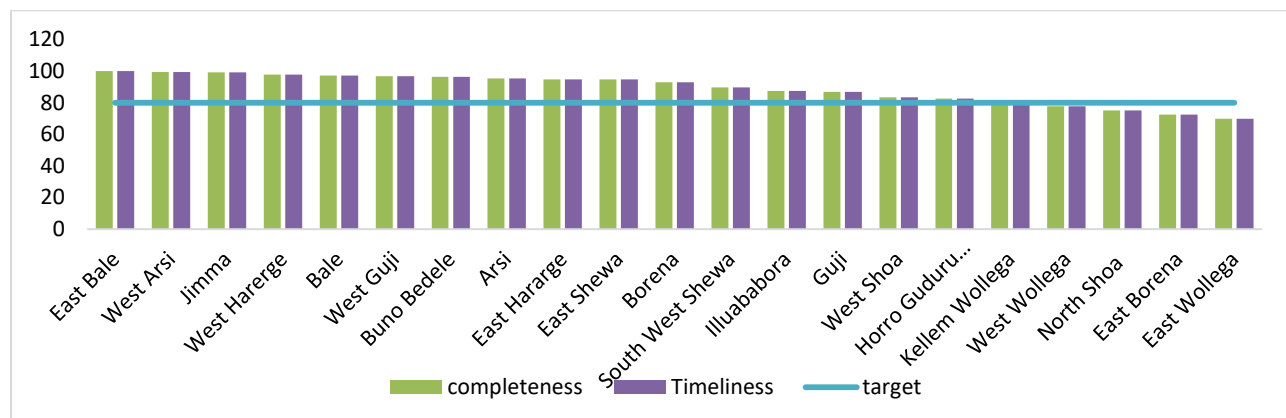
Epidemiological Bulletin week 6

Of Newly occurred outbreak =0

Of New Event =0

Of Ongoing Outbreak=3

Figure 1: Report completeness and timeliness by zones, Oromia, WHO week 6, 2024



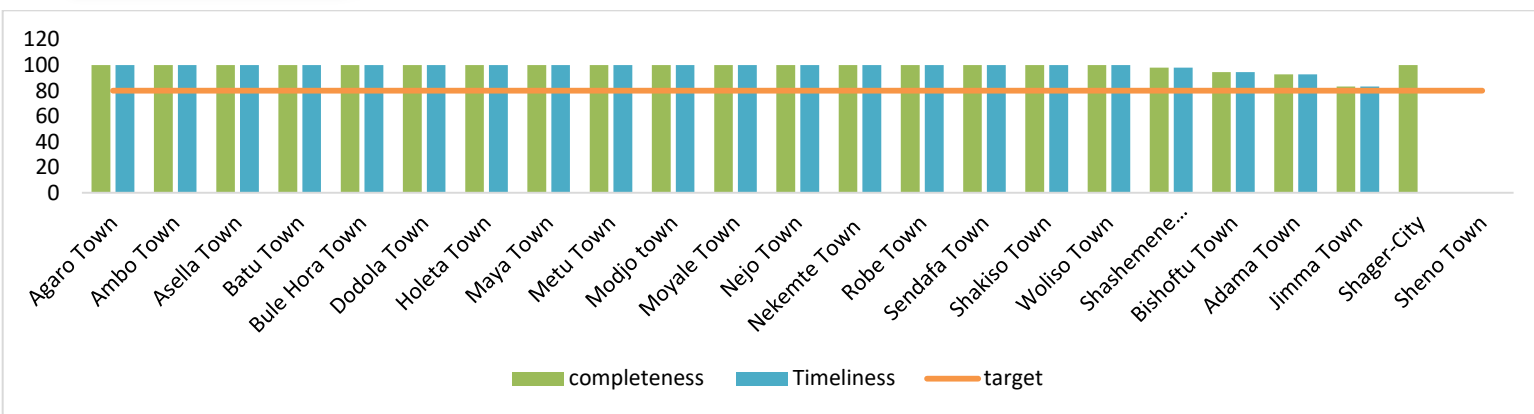


Figure 2: Report completeness and timeliness by Towns, Oromia, WHO week 6, 2024

Table1: Immediately Reportable Diseases

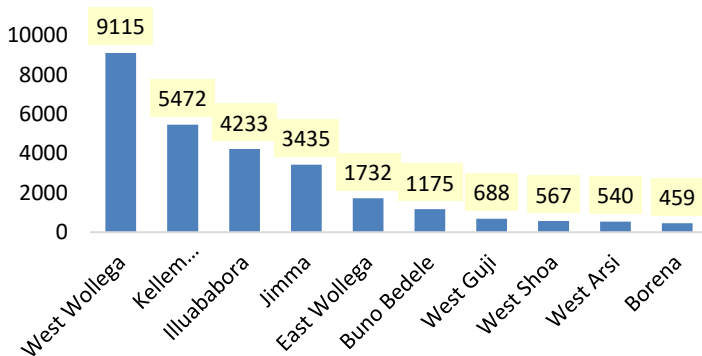
S. No	Disease/condition	Week-5		Week-6		Difference (W6-W5) of cases/deaths in # (%)
		Cases	Death	Cases	Death	
1	Cholera	86	2	204	4	+118 (+137%)
2	Measles	1,123	5	1499	6	+376 (+33%)
3	Dengue Fever	0	0	0	0	0 (0%)
4	AFP	11	0	10	0	-1 (-9%)
5	Anthrax	0	0	0	0	0 (0%)
6	Avian_Human_Influenza	0	0	0	0	0 (0%)
7	Dracunculiasis/Guinea worm	0	0	0	0	0 (0%)
8	Neonatal Tetanus		2		0	-2 (-100%)
9	Maternal Death		7		6	-1 (-14%)
10	Perinatal Death		50		55	+5 (+10%)
11	Pandemic Influenza	0	0	0	0	0 (0%)
12	Rabies	19	0	11	0	-8 (-42%)
13	SARS:	0	0	2	0	+2(+200%)
14	Small pox	0	0			0 (0%)
15	Viral hemorrhagic fever	0	0			0 (0%)
16	Yellow fever	0	0			0 (0%)
17	COVID-19	0	0			0 (0%)



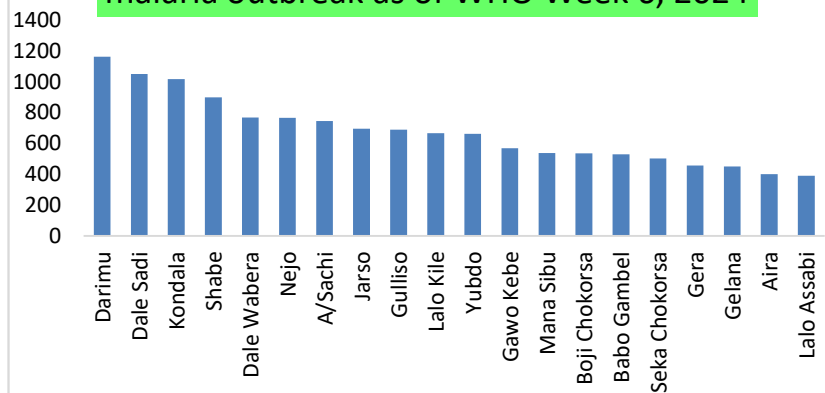
Table 2: Weekly Reportable Diseases

S.No	Disease/condition	Week-5		Week-6		Difference (W6-W5) Of cases in # (%)
		Cases	Death	Cases	Death	
1	Malaria	37,492	11	31393	6	-6099 (-16%)
2	Meningitis	77	1	52	1	-25 (-32%)
3	Dysentery	2,850	0	2596	0	-254 (-9%)
4	Typhoid fever	16,739	0	15369	0	-1370 (-8%)
5	Relapsing fever	23	0	32	0	+9 (+39%)
6	Epidemic Typhus	5,234	0	4783	0	-5187 (-99%)
7	Malnutrition	3,635	7	3865	3	+230 (+6%)
8	Scabies	722	0	713	0	-9 (-1%)
9	Chemical poisoning	45	0	47	3	+2 (+4%)
10	HIV CBE(Recent infection)	16		22	0	+6 (+38%)

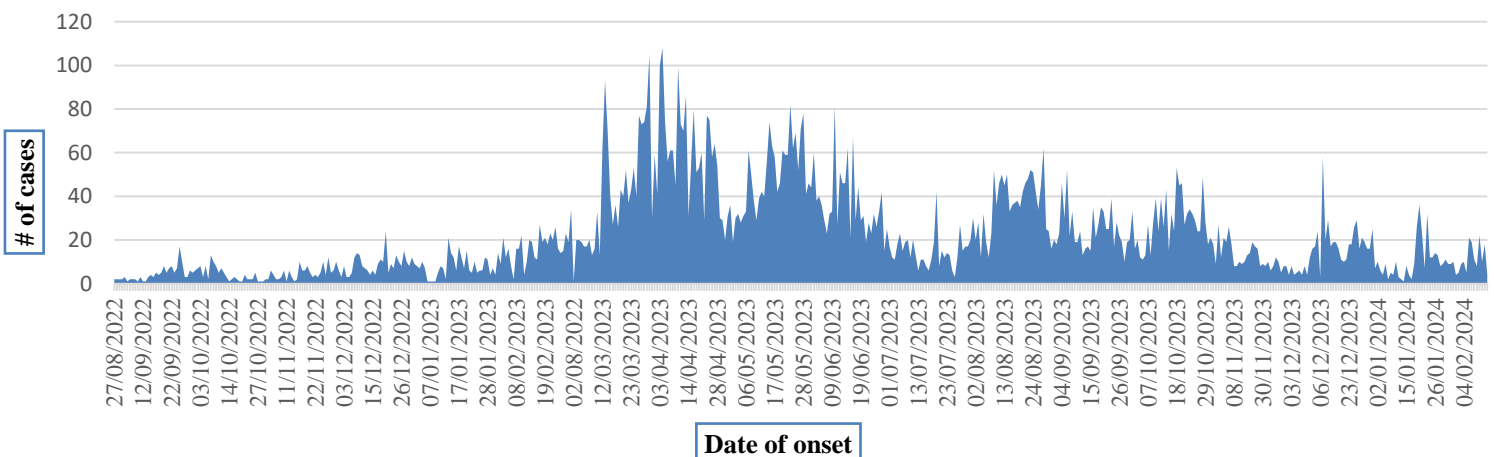
Oromia region top ten zones with malaria outbreak as of WHO Week 6, 2024



Oromia region top Twenty woredas with malaria outbreak as of WHO Week 6, 2024



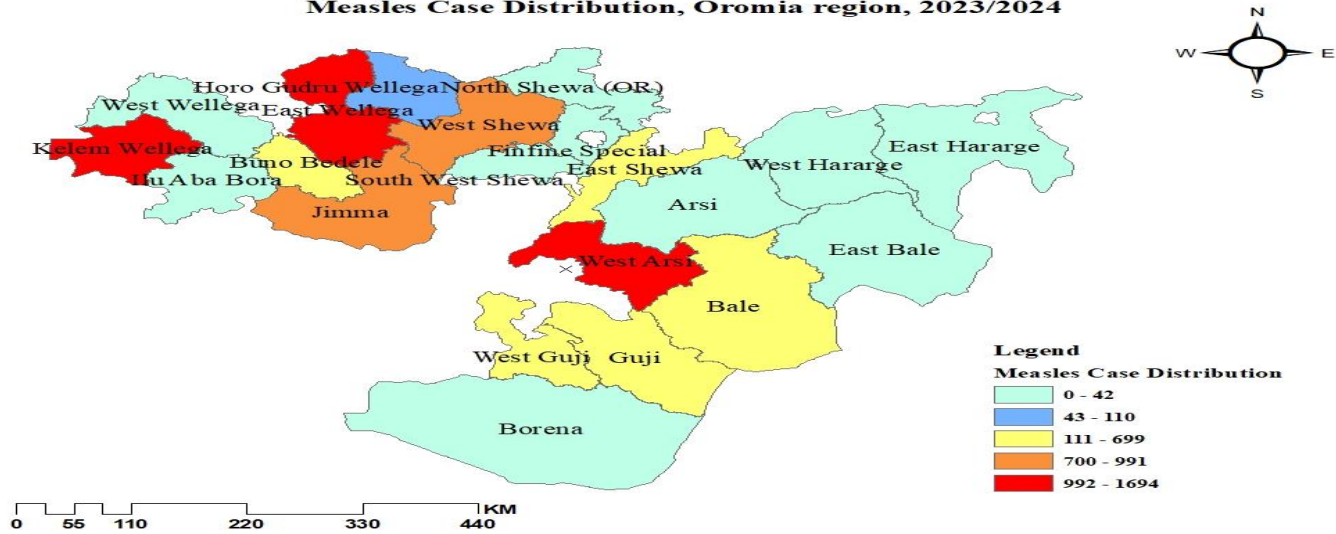
Oromia Region Cholera Outbreak By Date of Onset, 2022-2024



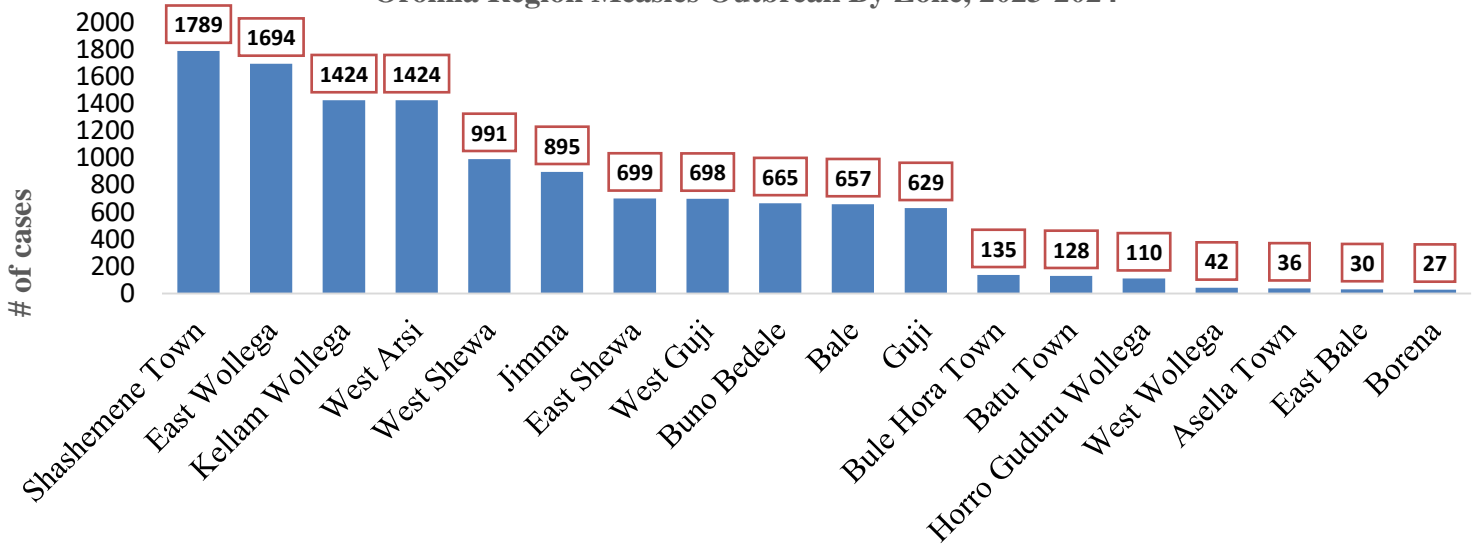


**OROMIA HEALTH BUREAU, PUBLIC HEALTH EMERGENCY MANAGEMENT
EPIDEMIOLOGICAL Weekly BULLETIN: WEEK 6, 2024**

Measles Case Distribution, Oromia region, 2023/2024



Oromia Region Measles Outbreak By Zone, 2023-2024





Response Activities

- ✓ OHB and partners working to improve access to clean water and sanitation. establish treatment centers.
- ✓ Provided Cholera vaccine.
- ✓ Delivered medical supplies.
- ✓ Trained health workers
- ✓ Working with communities on prevention.

Major gaps/Challenges

- ✓ Coordination and collaboration among key stakeholders
- ✓ Operational budget shortage (Surveillance and response)
- ✓ Multiple public health emergency in the region (Cholera, Measles, IDP, malnutrition, Flood, and Malaria)
- ✓ Volatile security problem (disrupted control efforts at western and south zones the region)
- ✓ Under and not reporting malaria affected facilities (western Oromia)
- ✓ Political leaders' attention for malaria response at woreda level
- ✓ Infrastructure (Network and road inaccessible) among some affected woredas

Proposed action plan/way forward

- ✓ Strengthen coordination and collaboration among key stakeholders.
- ✓ Strengthen larva control (Ent management)
- ✓ Community sensitization (at Kebele level, Woreda Level)
- ✓ Strengthen Malaria technical working group and PHEOC IMS to improve collective efforts of different actors
- ✓ Resource mobilization and budget allocation for epidemic response
- ✓ Strengthen Malaria technical working group and PHEOC IMS to improve collective efforts of different actors
- ✓ Strengthening surveillance system, Environmental management and Community engagement
- ✓ Leadership ownership and community involvement and mobilization
- ✓ Conduct malaria response advocacy at regional, zonal and woreda level
- ✓ Response guidance for high malaria burden woredas

DISCLAIMER

The Oromia Health Bureau Public Health Emergency Management compiles reports from various zones and towns' public health surveillance reports to produce a weekly bulletin. The purpose of this bulletin is to inform decision makers from OHB/PHEM, EPHI, UN agencies and NGOs about any outbreaks and other public health emergencies in Oromia. It is published by Oromia Health Bureau Public Health Emergency Management

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