



Epidemiological
Bulletin
week 10

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 **88%** and timeliness was 81%
- A total of **2,050** measles cases and **13** deaths were reported.
- A total of **38** cholera cases and (0) deaths were reported.
- A total **0** maternal and 57 perinatal deaths were reported.
- A total of **11** AFP with Zero death reported West Shoa (4), Illuababora (2), East Hararge (2), Shager city (1), Kellem Wollega (1) and Adama Town (1) cases.
- A total of **27,258** Confirmed & clinical Malaria cases with 04 deaths reported in this week.
- A total of **3,644** SAM cases and 01 deaths reported.
- *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks.*

Of
Newly
occurred
outbreak =0

Of New
Event =0

Of
Ongoing
Outbreak=3

Figure 1: Report Completeness and Timeness by Zones, Oromia, Week 10, 2024

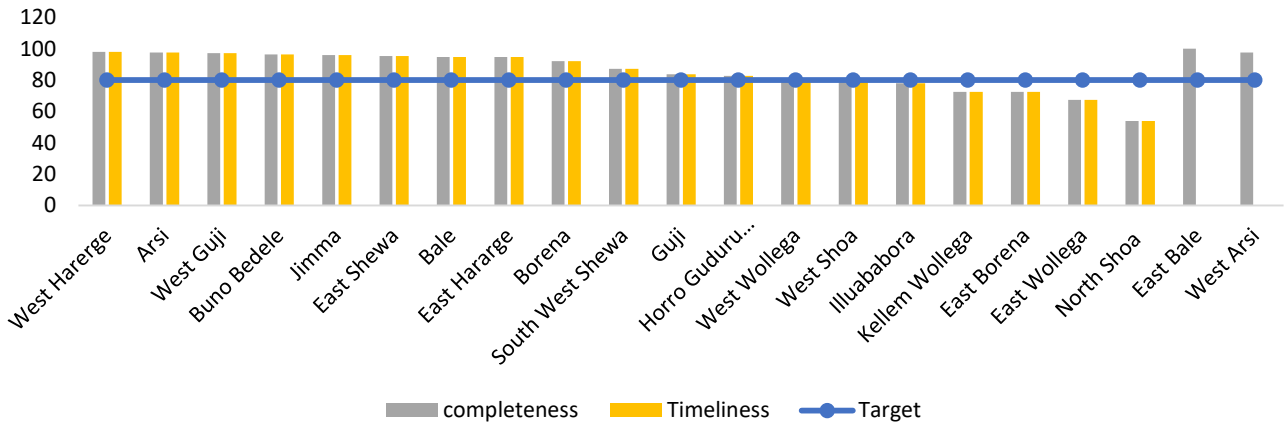


Figure 2: Report Completeness and Timeness by Towns, Oromia, Week 10, 2024

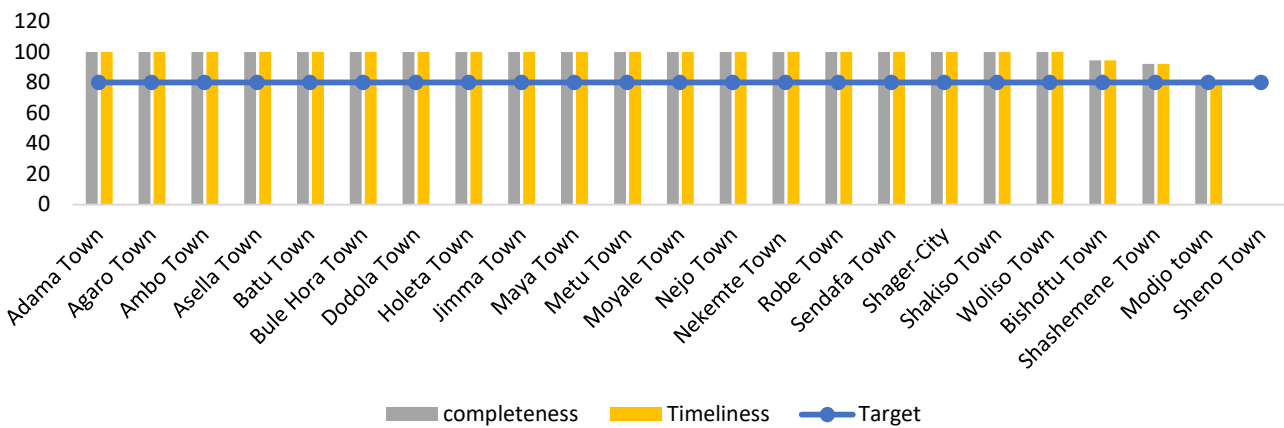


Table1: Immediately Reportable Diseases

S. No	Disease/condition	Week-9		Week-10		Difference (W10- W9) of cases/deaths in # (%)
		Cases	Death	Cases	Death	
1	Cholera	76	0	38	0	-38 (50%)
2	Measles	1840	09	2050	13	+210 (11.4%)
3	Dengue Fever	0	0	0	0	0
4	AFP	8	0	11	0	+3 (37.5%)
5	Anthrax	0	0	0	0	0
6	Avian_Human_Influenza	0	0	0	0	0
7	Dracunculiasis/Guinea worm	0	0	0	0	0
8	Neonatal Tetanus		0		0	0
9	Maternal Death		7		0	-3 (30%)
10	Perinatal Death		63		57	-6 (9.5%)
11	Pandemic Influenza	0	0	0	0	0
12	Rabies	27	0	14	1	-13 (48.2%)
13	SARS:	0	0	0	0	0
14	Small pox	0	0	0	0	0
15	Viral hemorrhagic fever	0	0	0	0	0
16	Yellow fever	0	0	0	0	0
17	COVID-19	0	0	0	0	0

Table 2: Weekly Reportable Diseases

S.No	Disease/condition	Week-9		Week-10		Difference (W10-W9) Of cases in # (%)
		Cases	Death	Cases	Death	
1	Malaria	28,765	3	27,258	4	-1,507 (5.2%)
2	Meningitis	64	0	61	0	-3 (4.7%)
3	Dysentery	2,744	1	2,918	0	+174 (6.3%)
4	Typhoid fever	15,489	0	15,105	0	-384(2.7%)
5	Relapsing fever	9	0	22	0	+13 (144%)
6	Epidemic Typhus	4617	0	4354	0	-261 (5.7%)
7	Malnutrition	3764	5	3644	1	-120(2.6%)
8	Scabies	803	0	740	0	-63 (7.8%)
9	Chemical poisoning	67	0	55	3	-12(17.5%)
10	HIV CBE(Recent infection)	37	0	28	0	-9(24.3%)

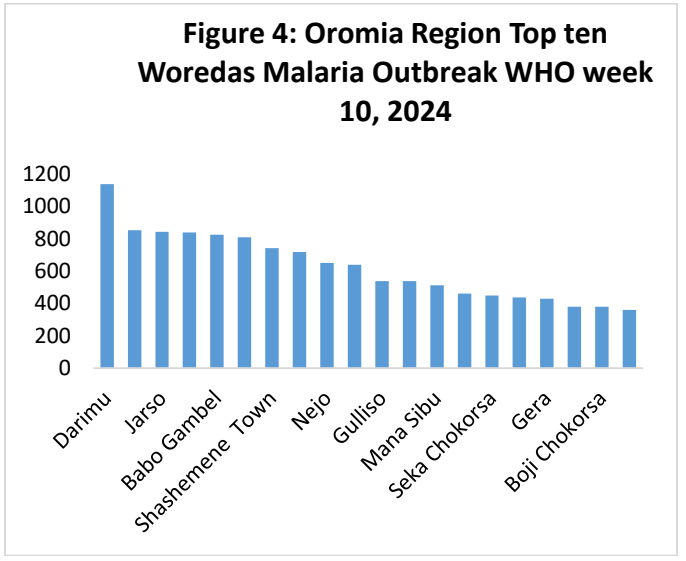
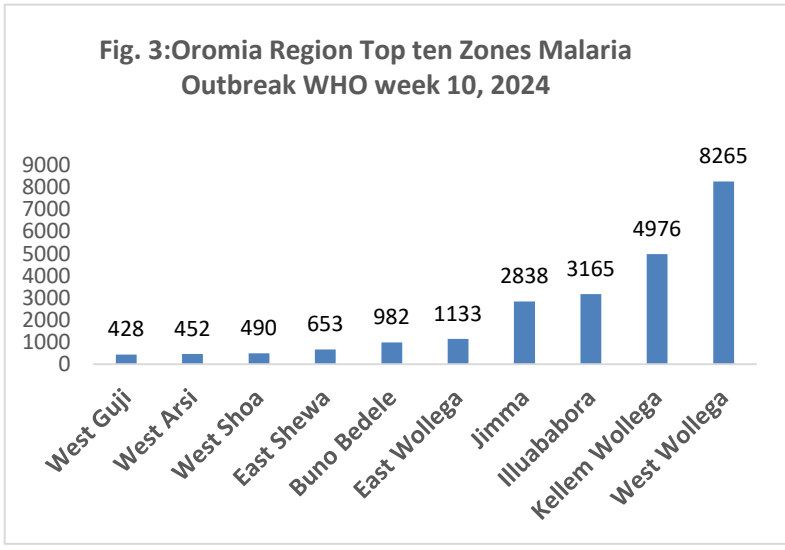
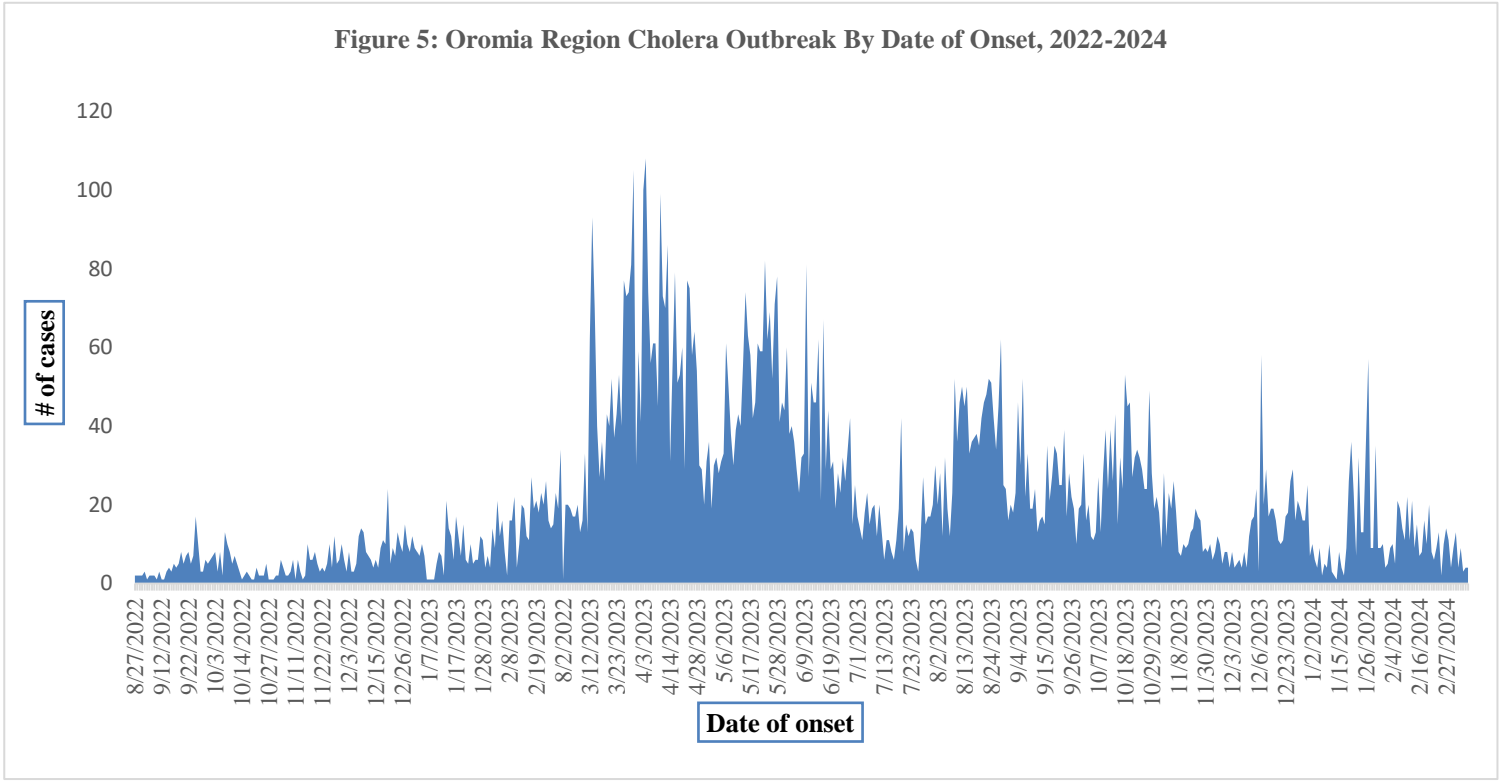


Fig 5: Cholera spatial distribution, weekly bulletin, WHO week 10, Oromia, 2024



Measles Case Distribution, Oromia region, 2024

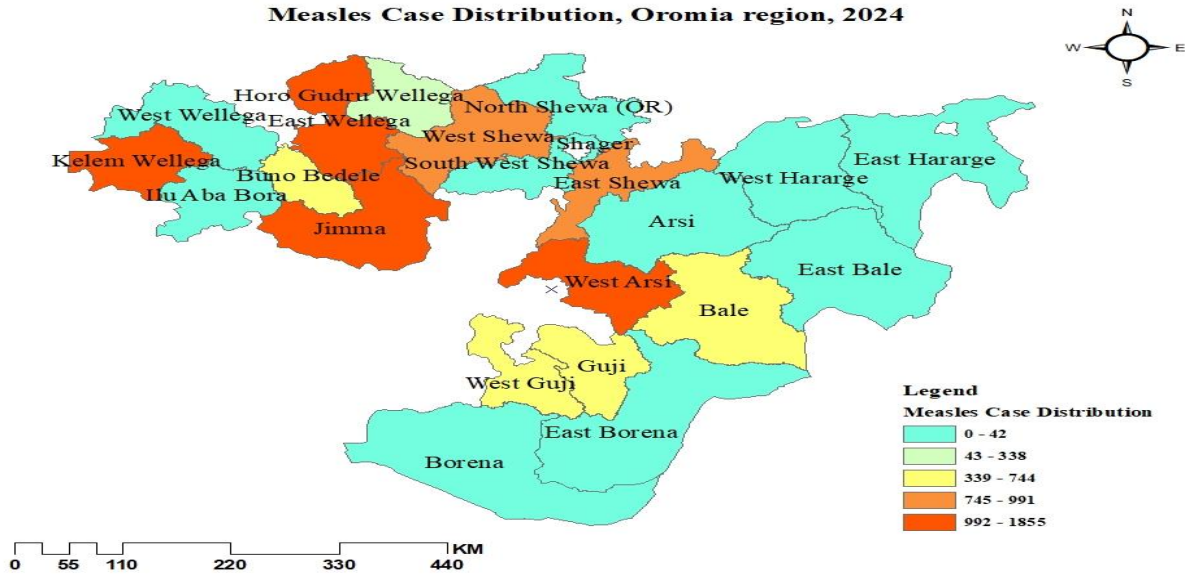


Fig 6: Measles spatial distribution, weekly bulletin, WHO week 10, Oromia, 2024

Figure 7: Oromia Region Measles Outbreak By Date of Onset, 2023-2024

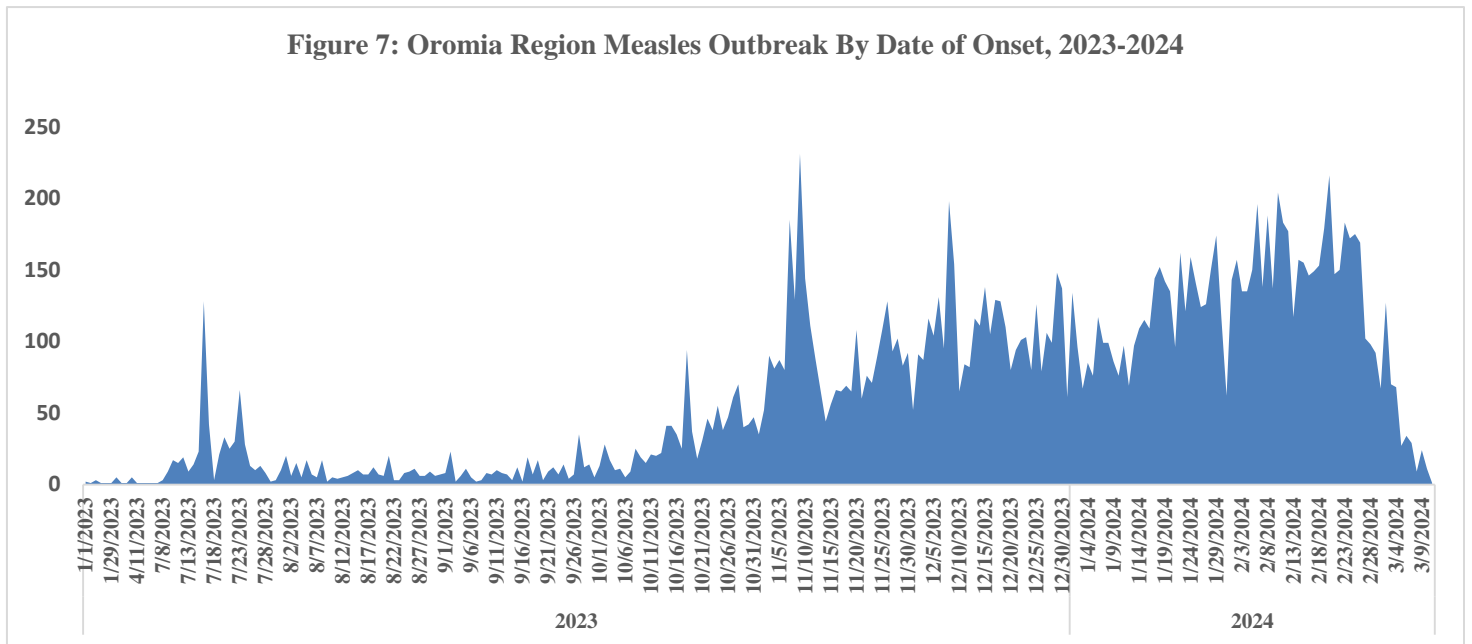
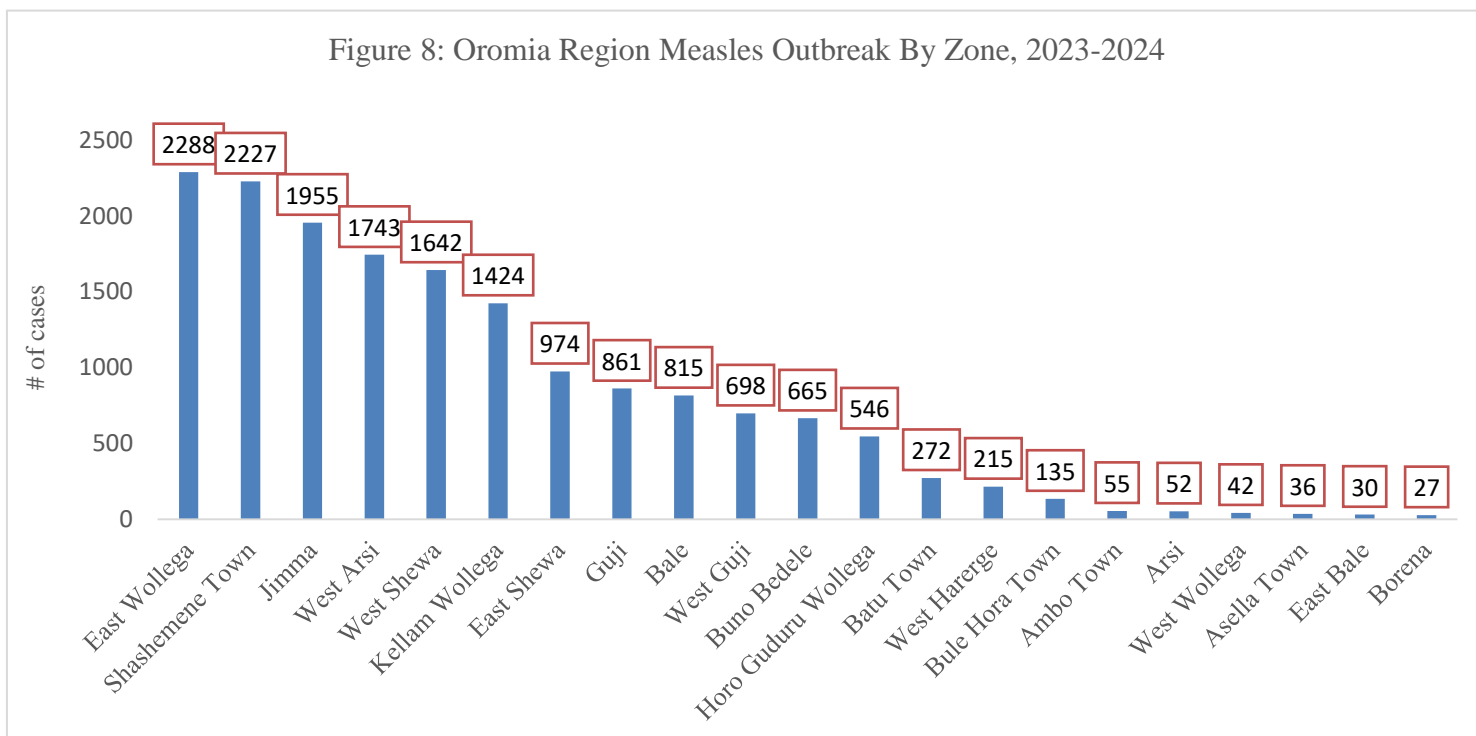


Figure 8: Oromia Region Measles Outbreak By Zone, 2023-2024





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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