



Epidemiological
Bulletin
week 9

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 and timeliness was **89%**
- A total of **1840** measles cases and **09** deaths were reported.
- A total of **76** cholera cases and (0) death were reported.
- A total **07** maternal and 63 perinatal deaths were reported.
- A total of **08** AFP with Zero death reported, West Guji (3), West Shoa (2), Nekemte (1), and Shashemene Town (2) cases.
- A total of **28,765** Confirmed & clinical Malaria cases with 03 deaths reported in this week.
- A total of **3764** SAM cases and 05 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

EMERGENCY MAN

Figure 2 Report Timeliness & Completeness by Zones, Oromia, Week 9, 2024

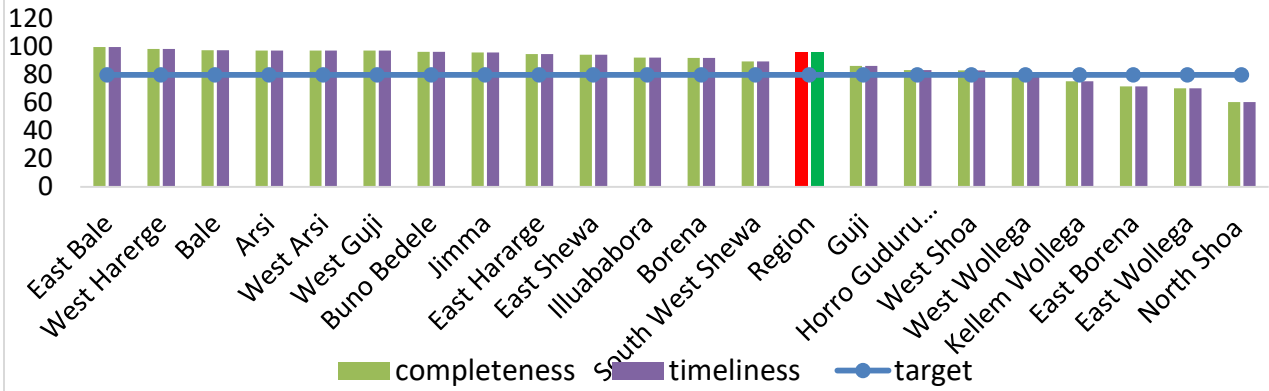


Figure 3: Report Timeliness & Completeness by Towns, Oromia, Week 9, 2024

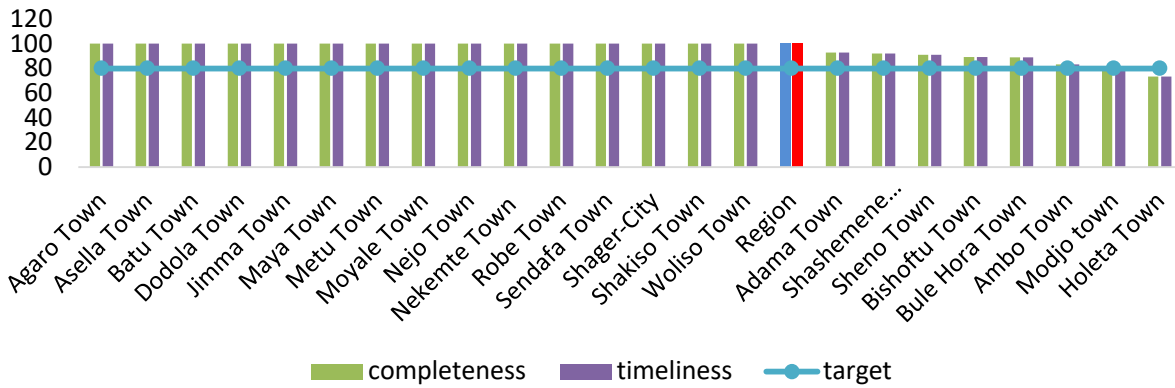


Table1: Immediately Reportable Diseases

S. No	Disease/condition	Week-8		Week-9		Difference (W9- W8) of cases/deaths in # (%)
		Cases	Death	Cases	Death	
1	Cholera	106	1	76	0	-30 (28%)
2	Measles	1962	7	1840	09	-122 (6.5%)
3	Dengue Fever	0	0	0	0	0
4	AFP	7	0	8	0	+1 (14.3%)
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		10		7	-3 (30%)
10	Perinatal Death		50		63	+13 (26%)
11	Pandemic Influenza	0	0	0	0	0
12	Rabies	23	0	27	0	+4 (17.4%)
13	SARS:	3	0	0	0	-3(100%)
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-8		Week-9		Difference (W9-W8) Of cases in # (%)
		Cases	Death	Cases	Death	
1	Malaria	28,640	4	28,765	3	+125 (0.4%)
2	Meningitis	49	0	64	0	+15 (30.6%)
3	Dysentery	2827	0	2744	1	+83 (2.9%)
4	Typhoid fever	15383	0	15,489	0	+106 (0.7%)
5	Relapsing fever	13	0	9	0	-4 (44%)
6	Epidemic Typhus	4939	0	4617	0	-322 (6.53%)
7	Malnutrition	3761	9	3764	5	+3(0.08%)
8	Scabies	779	0	803	0	-24 (3.8%)
9	Chemical poisoning	35	1	67	0	+32(91.4%)
10	HIV CBE(Recent infection)	27	0	37	0	+10(37%)

Fig. 4: Oromia Region Top ten Zones Malaria Outbreak WHO week 9, 2024

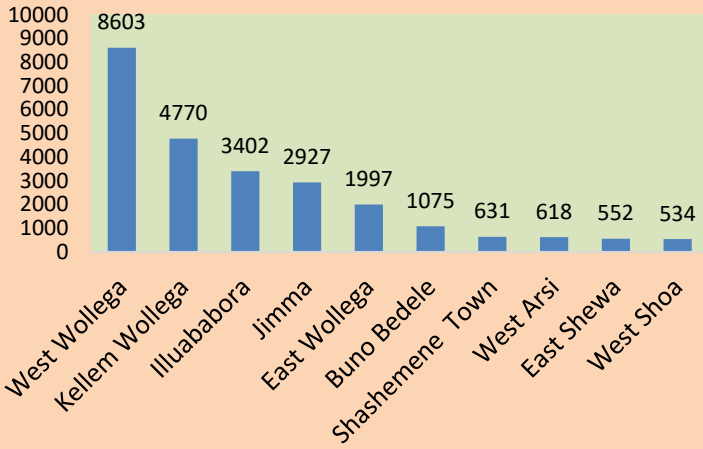


Figure 5: Oromia Region Top ten Woredas Malaria Outbreak WHO week 9, 2024

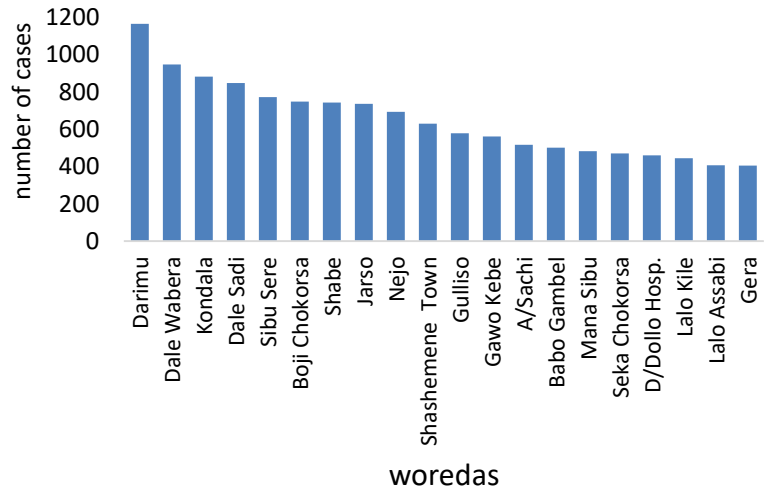
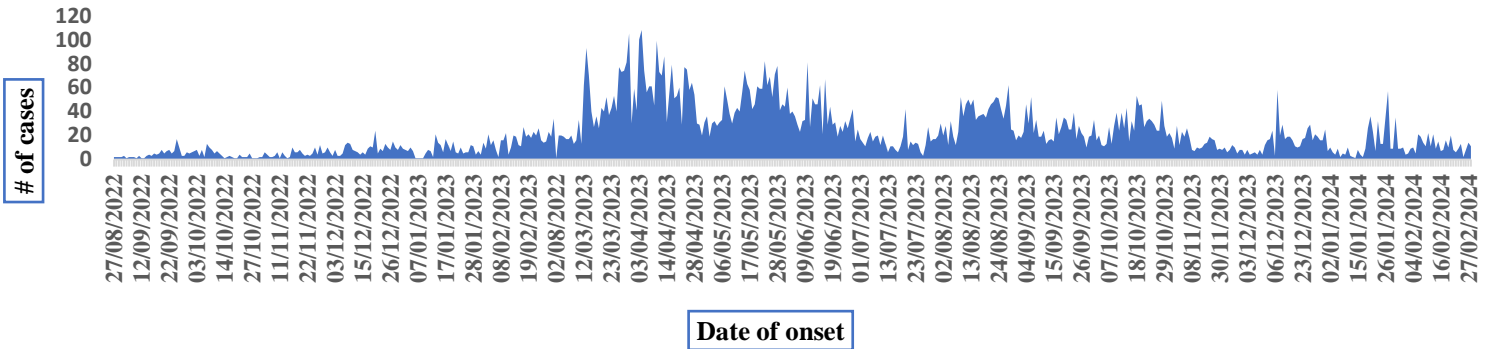


Fig. 6: Oromia Region Cholera Outbreak By Date of Onset, 2022-2024



Measles Case Distribution, Oromia region, 2024

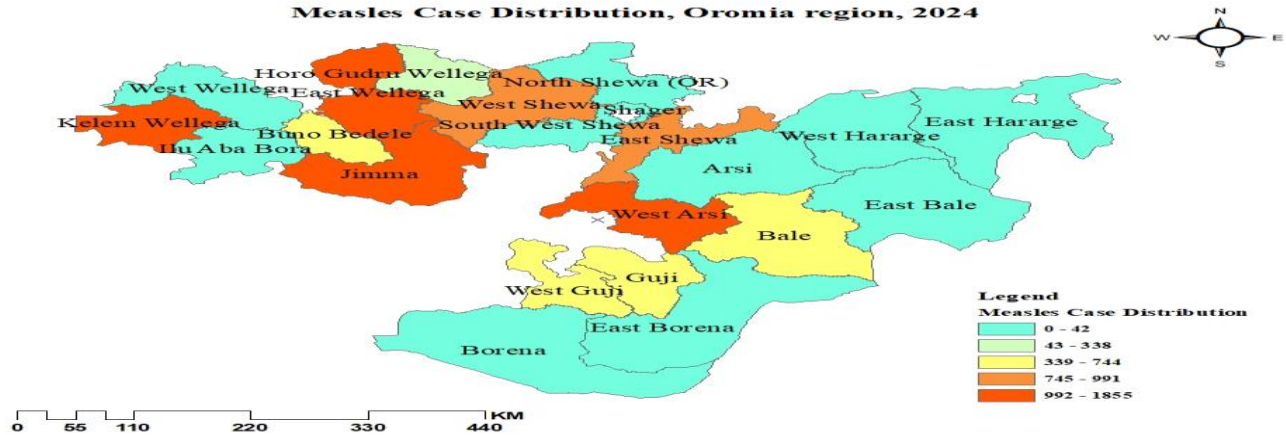


Figure 7: Oromia Region Measles Outbreak By Date of Onset, 2023-2024

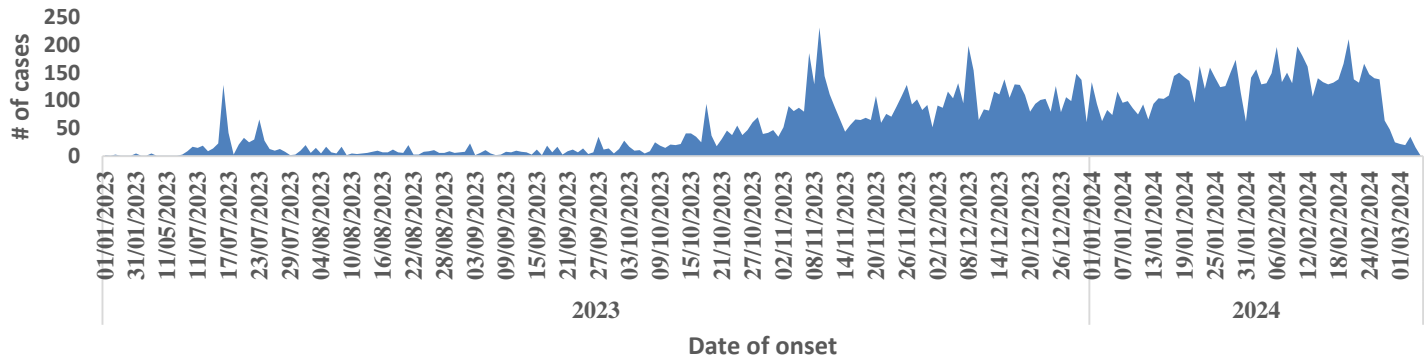
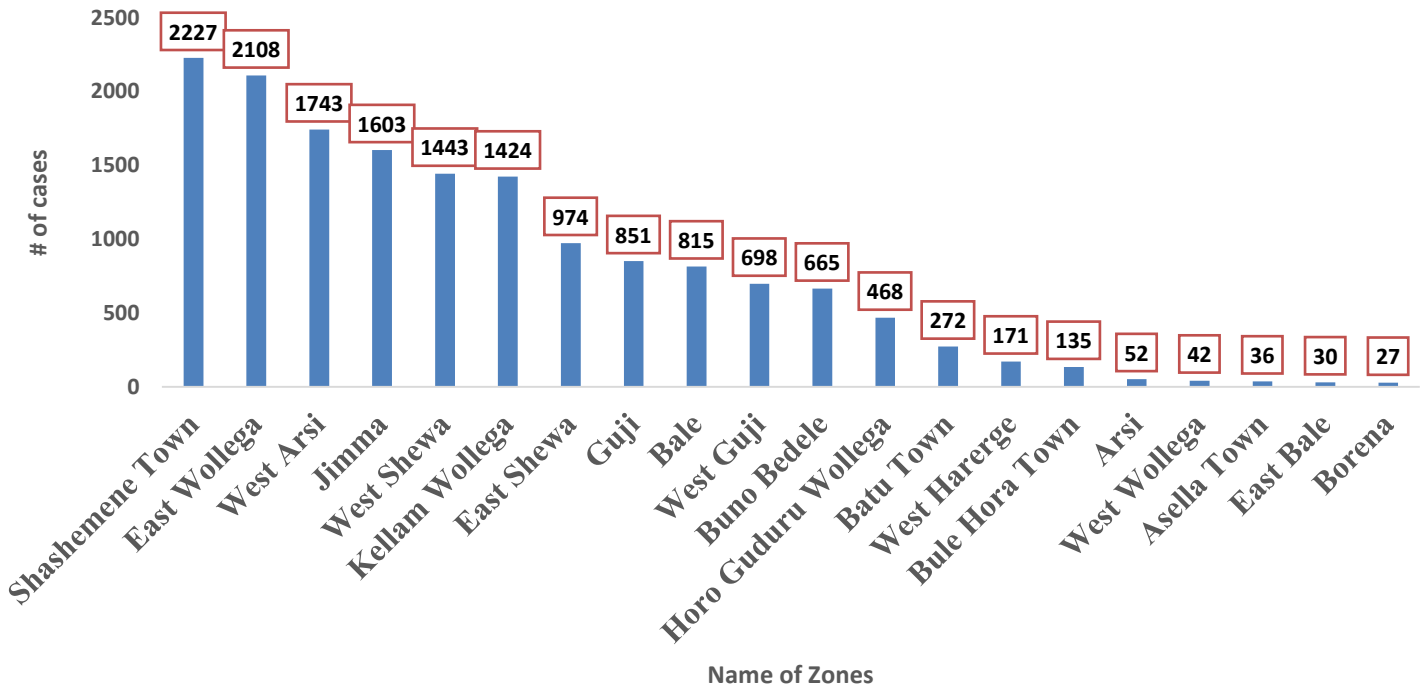


Figure 8: Oromia Region Measles Outbreak By Zone, 2023-2024





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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