



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.

Epidemiological
Bulletin
week 32

Objective

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

Of Newly
occurred
outbreak =0

Of New
Event =0

Regional Highlights of the reporting week

- ❖ The regional surveillance completeness and timeliness were **96%** (zone **96%** and town **98%**)
- ❖ A total of **276 measles** cases and **zero** death were reported.
- ❖ A total of **33 cholera** cases and **one** death were reported.
- ❖ A total **six** maternal and **40** perinatal deaths were reported.
- ❖ A total of **10** AFP with Zero death reported from South West Shawa (**1**), West Harargie (**1**), Shashamane town (**1**), Shager City (**1**), Nekemte town (**1**), Ilubabora (**1**), Horoguduru Wollega (**1**), East Shawa (**1**), East Harargie (**1**) and Adama town (**1**).
- ❖ A total of **145,632** Confirmed & clinical Malaria cases with **12** deaths reported in this week.
- ❖ A total of **4778 SAM** U5 cases and **Four** deaths reported.
- ❖ A total of **7054 MAM** U5 cases
- ❖ *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks.*

Of
Ongoing
Outbreak=3

Figure 1: Oromia region report completeness and timeliness by zones, as of WHO Week 32, 2024 (Based on Hospitals and Hcs)

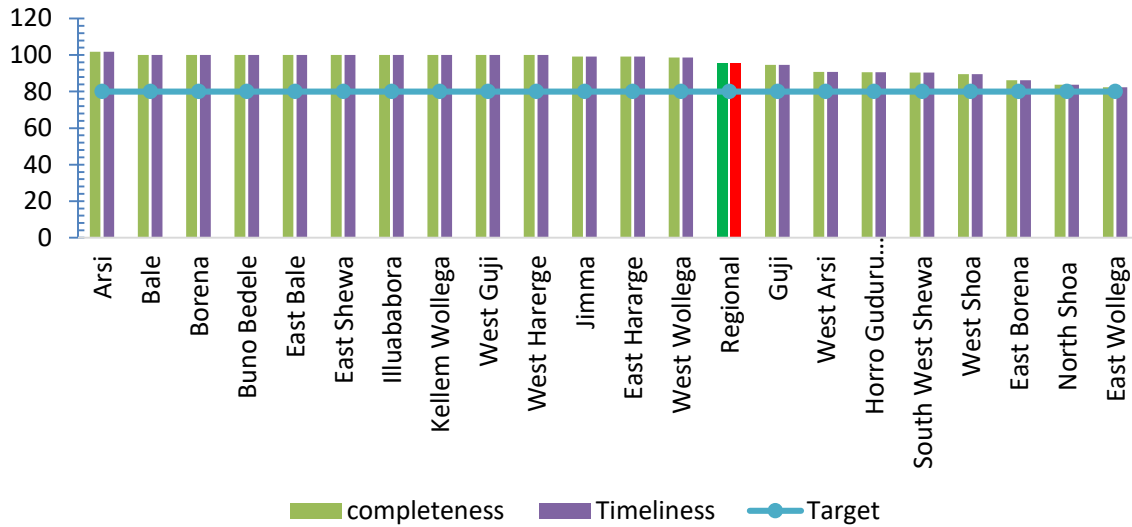


Figure 2: Oromia region report completeness and timeliness by towns, as of WHO Week 32, 2024 (Based on Hospitals and Hcs)

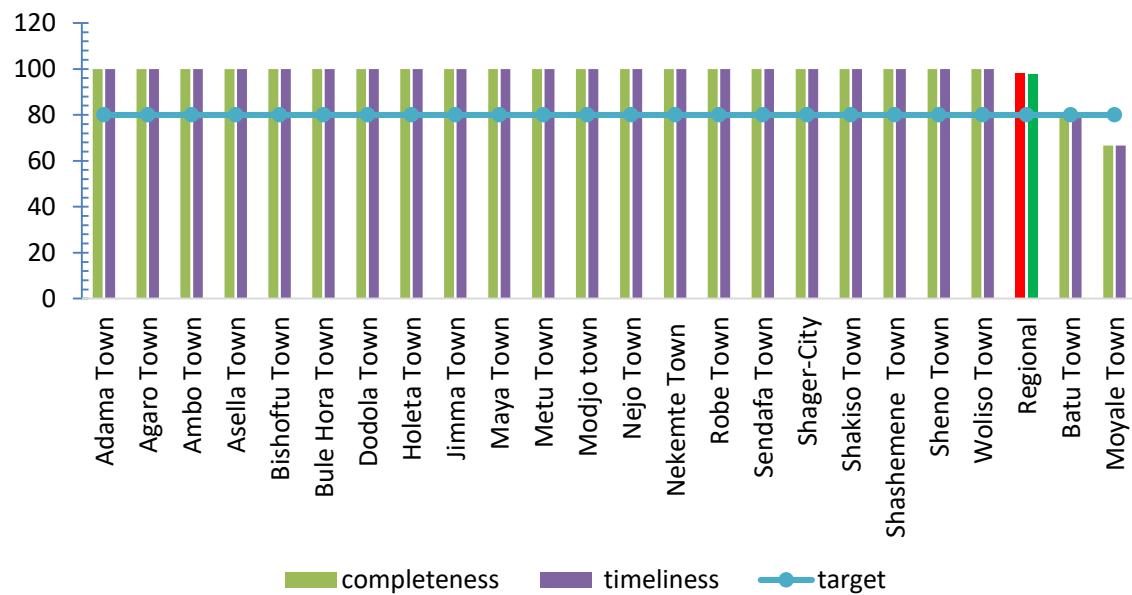


Table 1: Immediately Reportable Diseases

S.No	Disease/condition	Week-31		Week-32		Difference (Wk32-Wk 31) of cases/deaths	
		Cases	Deaths	Cases	Deaths	#	(%)
1	Cholera	75	2	33	1	-42	-56
2	Measles	346	8	276	0	-70	-20
3	Dengue Fever	1	0	0	0	-1	-100
4	AFP	10	0	10	0	0	0
5	Anthrax	0	0	0	0	0	0
6	Human influenza caused by new subtype	0	0	0	0	0	0
7	Dracunculiasis/Guinea worm	0	0	0	0	0	0
8	Neonatal / Non-Neonatal Tetanus	0	0	1	0	1	100
9	Maternal Death		4		6	2	50
10	Perinatal Death		38		40	2	5
11	Pandemic Influenza	0	0	0	0	0	0
12	(Human) Rabies	0	0	2	0	2	200
13	Suspected rabies exposure	60	0	64	1	4	7
14	SARS	0	0	0	0	0	0
15	Small pox	0	0	0	0	0	0
16	Viral hemorrhagic fever	0	0	0	0	0	0
17	Yellow fever	0	0	0	0	0	0
18	COVID-19	0	0	0	0	0	0
19	AEFI	24	0	34	0	10	42
20	Chikungunya	0	0	0	0	0	0
21	Monkeypox virus	0	0	0	0	0	0
22	Brucellosis	0	0	0	0	0	0
23	Obstetric Fistula	2	0	1	0	-1	-50

Table 2: Weekly Reportable Diseases

S. No	Disease/condition	Week-31		Week-32		Difference (Wk32-W31) Of cases/deaths	
		Cases	Death	Cases	Death	#	(%)
1	Malaria	145990	34	145632	12	-358	-0.25
2	Meningitis	103	2	104	2	1	0.97
3	Dysentery	3190	0	3299	0	109	3.42
4	Relapsing fever	19	0	115	0	96	505.26
5	Severe Acute Malnutrition (SAM)	4878	4	4778	4	-100	-2.05
6	Scabies	993	0	1026	0	33	3.32
7	New HIV cases	117	0	147	1	30	25.64

8	Diarrhea with dehydration in children less than 5 years of age	2424	0	2369	1	-55	-2.27
9	Acute Jaundice Syndrome within 14 days of illness	26	1	27	0	1	3.85
10	Severe Pneumonia in children under 5 years age	1342	2	1737	3	395	29.43
11	Hypertension new cases	1139	2	1121	0	-18	-1.58
12	Diabetes new cases	368	1	327	0	-41	-11.14
13	Tuberculosis	426	1	385	2	-41	-9.62
14	Moderate Acute Malnutrition (MAM) in USC and PLW	11945	0	7054	0	-4891	-40.95

Figure 4:Oromia region top 10 zones reporting malaria outbreak WHO week 32,2024

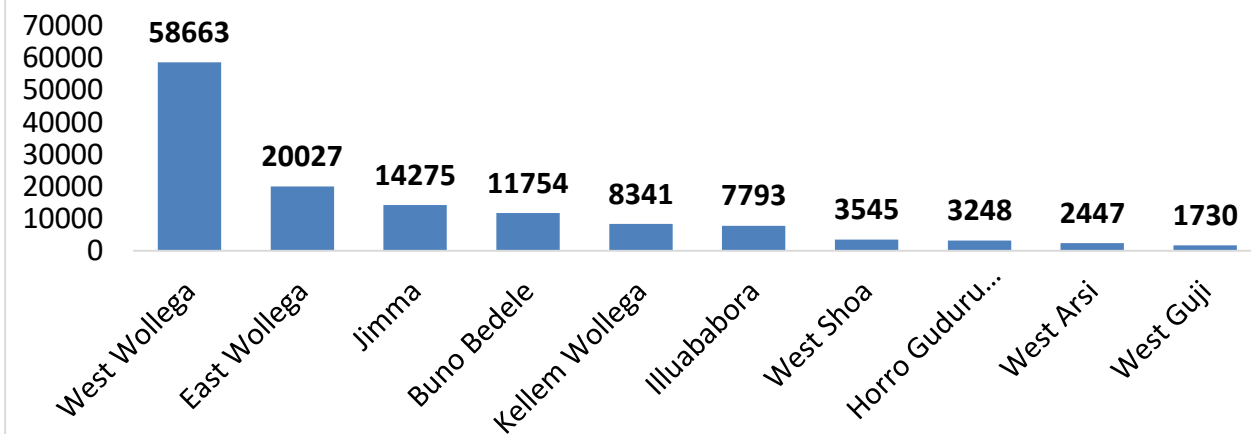
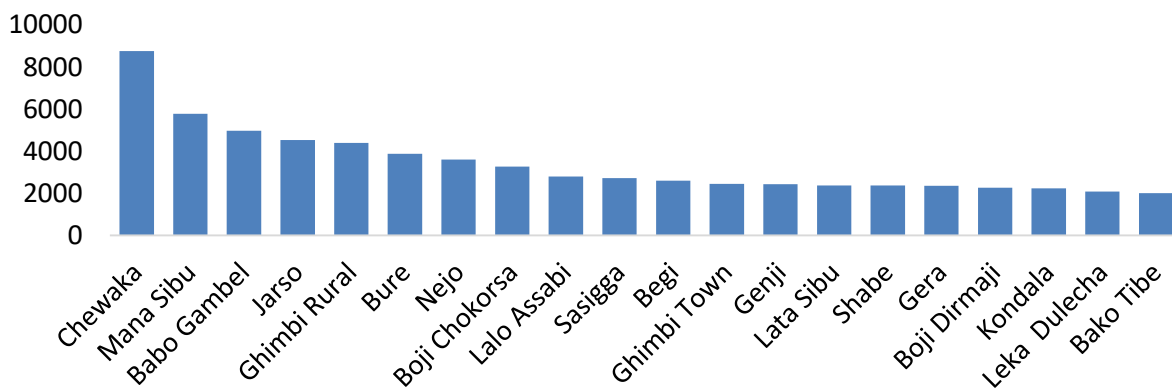


Figure 5:Oromia region top 20 districts reporting malaria outbreak WHO week 32,2024



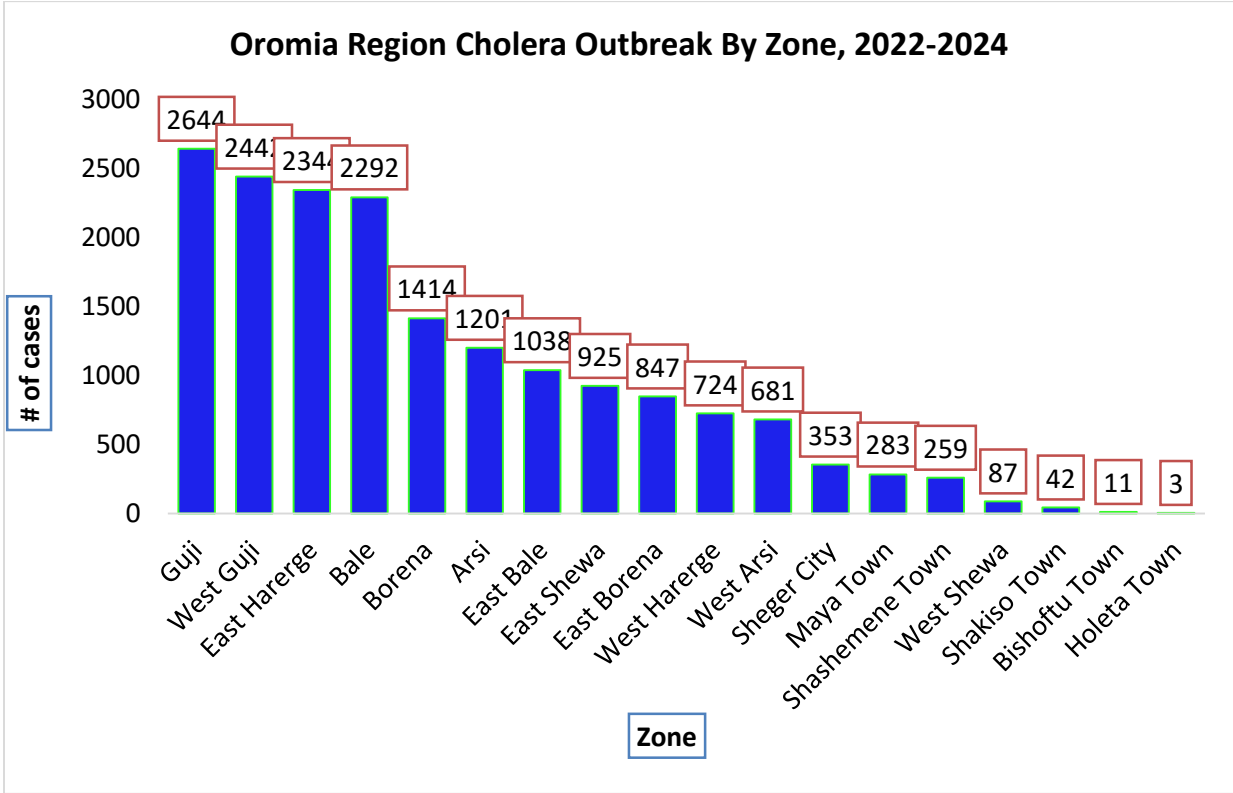


Figure 10: Oromia region weekly trends of Cholera outbreak, WHO Week 01 - 32 2024

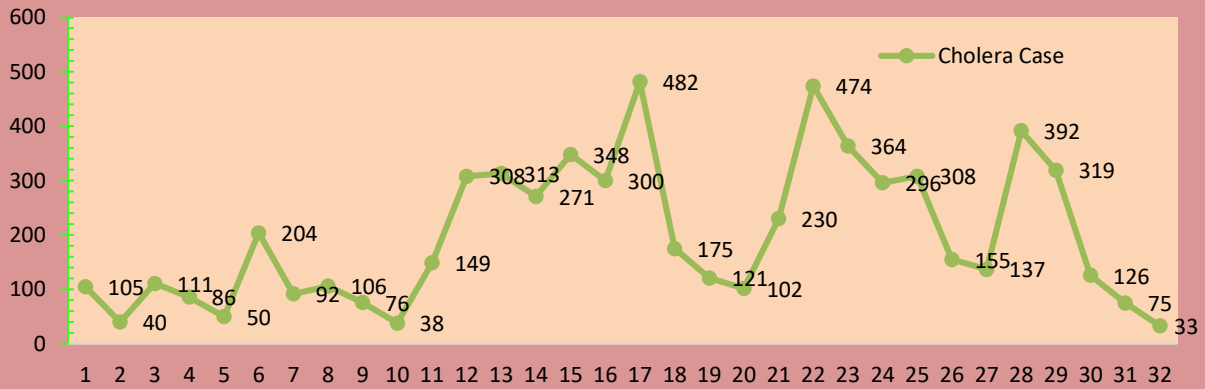


Figure 11: Oromia region weekly trends of measles outbreak, WHO Week 01 - 32, 2024

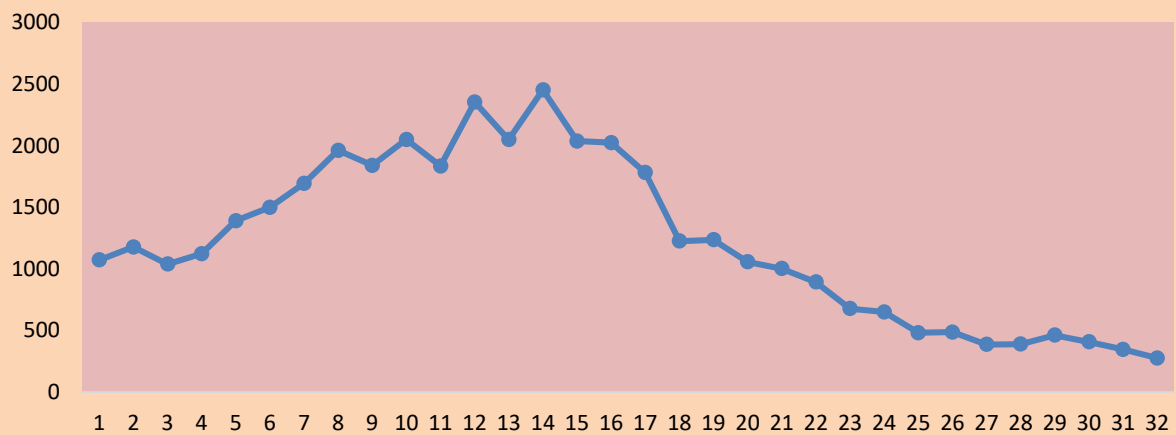
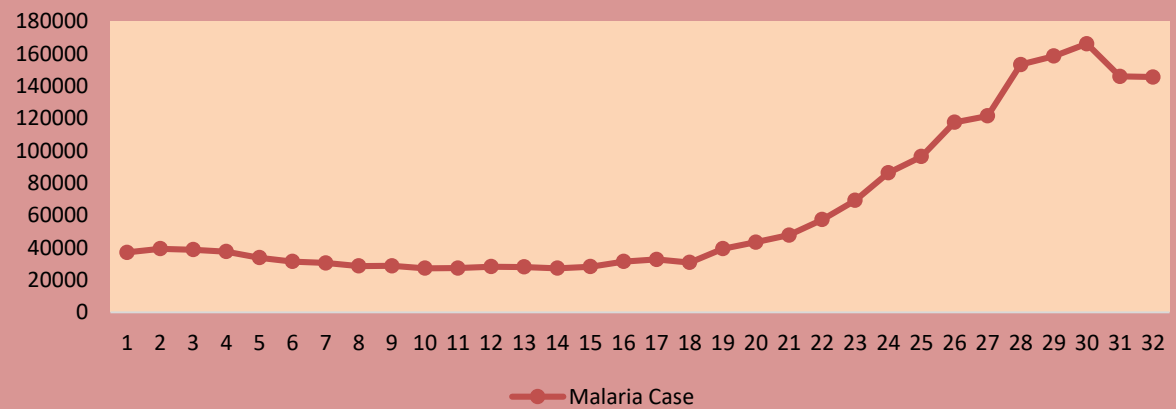


Figure 11: Oromia region weekly trends of malaria outbreak, WHO Week 01 - 32, 2024





Response Activities

- ✓ OHB and partners working to improve access to clean water and sanitation.
- ✓ Established treatment centers.
- ✓ 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 (Env'tal 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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