



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 31

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 was **94%** (zone **94%** and town **94%**) and timeliness was **86%** (zone **86%** and Town **94%**)
- ❖ A total of **346 measles** cases and **eight** deaths were reported.
- ❖ A total of **75 cholera** cases and **two** deaths were reported.
- ❖ A total **Four** maternal and **38** perinatal deaths were reported.
- ❖ A total of **10** AFP with Zero death reported from South West Shawa (**1**), West Guji (**1**), Nekemte town (**1**), Shager City (**1**), Ilubabora (**2**), East Shawa (**1**), Dodola Town (**1**), Arsi (**2**).
- ❖ A total of **145,990** Confirmed & clinical Malaria cases with **34** deaths reported in this week.
- ❖ A total of **4878 SAM** U5 cases and **Four** deaths reported.
- ❖ A total of **11,945 MAM** U5 cases
- ❖ *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks.*

Of
Ongoing
Outbreak=3



**OROMIA HEALTH BUREAU, PUBLIC HEALTH EMERGENCY
MANAGEMENT EPIDIMIOLOGICAL Weekly BULLETIN: WEEK 31, 2024**

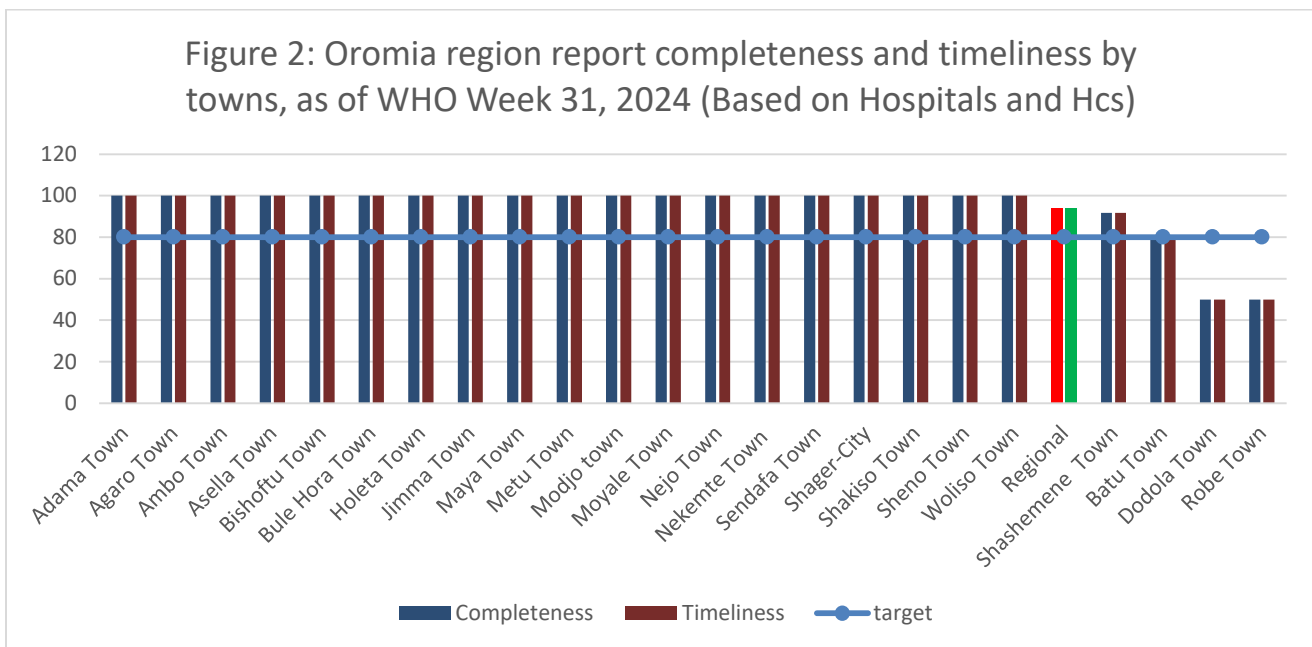
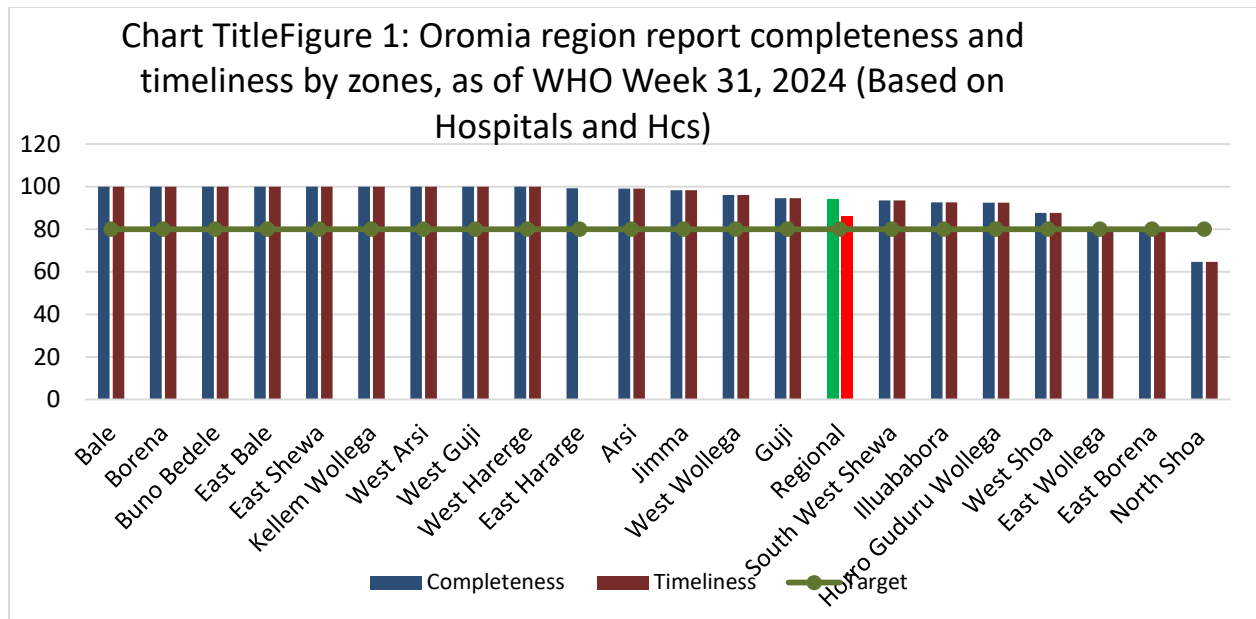


Table 1: Immediately Reportable Diseases

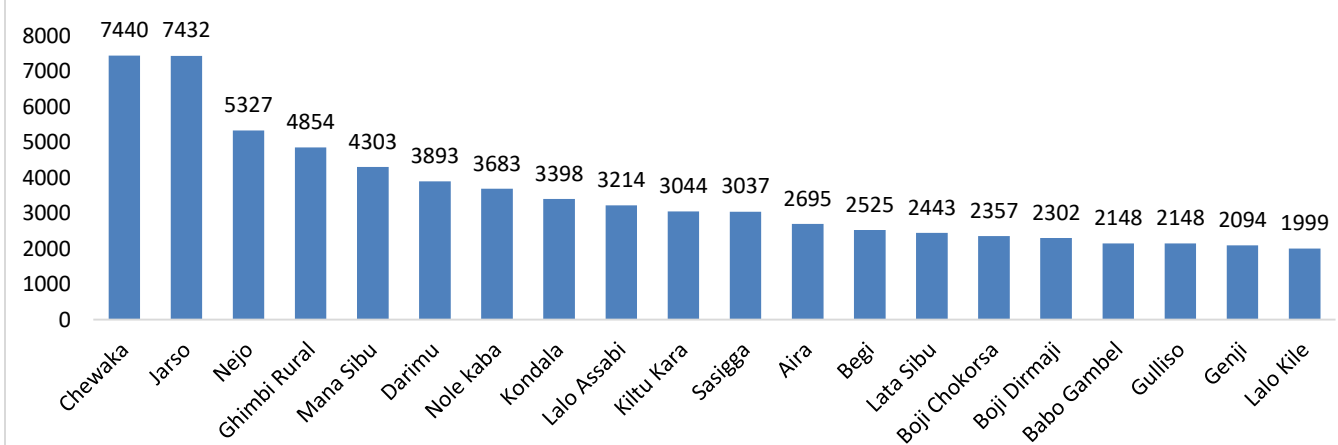
S.No	Disease/condition	Week-30		Week-31		Difference (Wk30-Wk29) of cases/deaths	
		Cases	Deaths	Cases	Deaths	#	(%)
1	Cholera	126	1	75	2	-51	-40.5
2	Measles	407	1	346	8	-61	-15.0
3	Dengue Fever	0	0	1	0	1	100.0
4	AFP	11	0	10	0	-1	-9.1
5	Anthrax	1	0	0	0	-1	-100
6	Human influenza caused by new subtype	0	0	0	0	0	0
7	Dracunculiasis/Guinea worm	0	0	0	0	0	0
8	Neonatal / Non-Neonatal Tetanus	0	0	0	0	0	0
9	Maternal Death		8		4	-4	-50.0
10	Perinatal Death		42		38	-4	-9.5
11	Pandemic Influenza	0	0	0	0	0	0
12	(Human) Rabies	8	0	0	0	0	0
13	Suspected rabies exposure	-	-	60	0	-	-
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	44	0	24	0	-20	-45.5
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	1	0	2	0	1	100

Table 2: Weekly Reportable Diseases

S. No	Disease/condition	Week-30		Week-31		Difference (Wk30-W29) Of cases/deaths	
		Cases	Death	Cases	Death	#	(%)
1	Malaria	166148	38	145990	34	-20158	-12.1
2	Meningitis	39	0	103	2	64	164.1
3	Dysentery	3305	0	3190	0	-115	-3.5
4	Relapsing fever	181	0	19	0	-162	-89.5
5	Severe Acute Malnutrition (SAM)	5310	6	4878	4	-432	-8.1
6	Scabies	992	0	993	0	1	0.1
7	New HIV cases	130	0	117	0	-13	-10.0

8	Diarrhea with dehydration in children less than 5 years of age	2651	2	2424	0	-227	-8.6
9	Acute Jaundice Syndrome within 14 days of illness	44	0	26	1	-18	-40.9
10	Severe Pneumonia in children under 5 years age	1516	10	1342	2	-174	-11.5
11	Hypertension new cases	1014	0	1139	2	125	12.3
12	Diabetes new cases	355	0	368	1	13	3.7
13	Tuberculosis	480	2	426	1	-54	-11.3
14	Moderate Acute Malnutrition (MAM) in U5C and PLW	11945	0	11945	0	0	0.0

**Figure 4:Oromia region top 20 districts reporting malaria outbreak
WH1 week 31,2024**



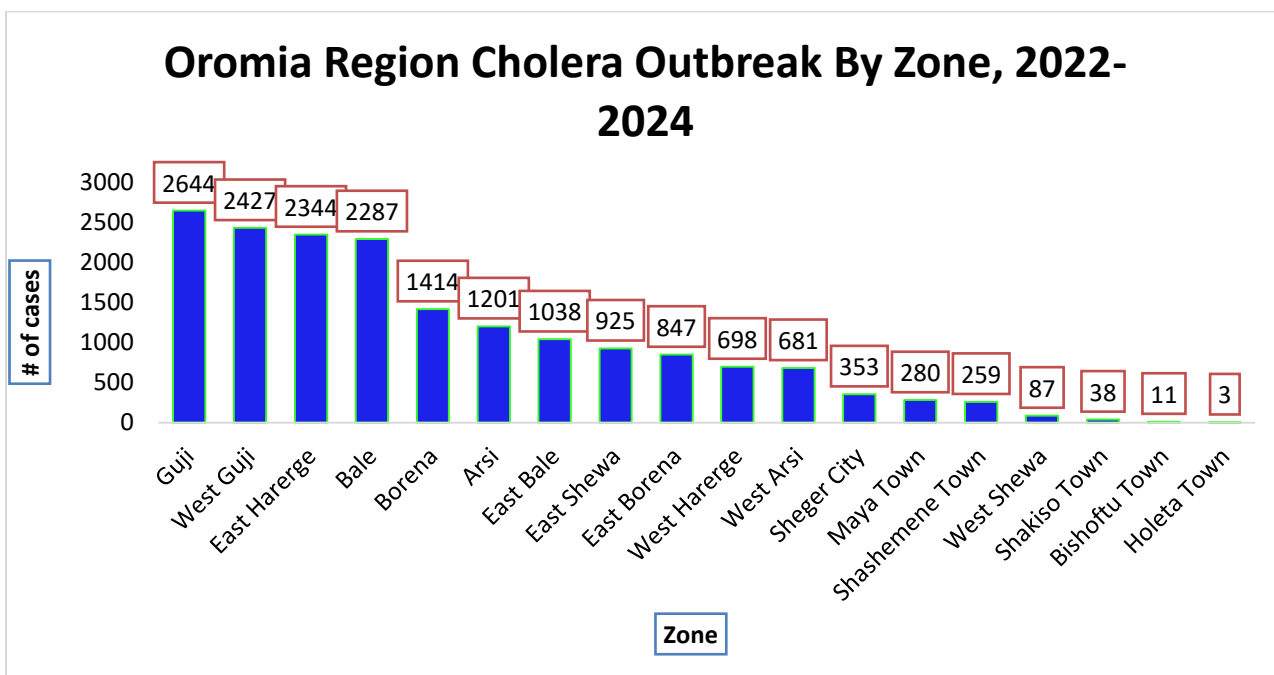
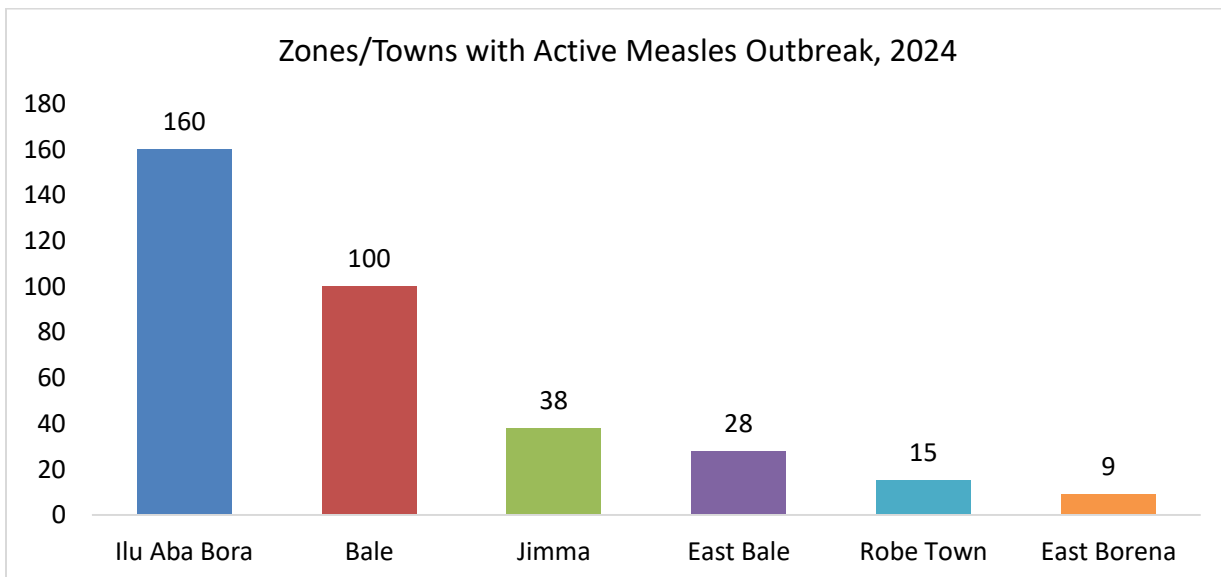


Figure 10: Oromia region weekly trends of Cholera outbreak, WHO Week 01 - 31 2024

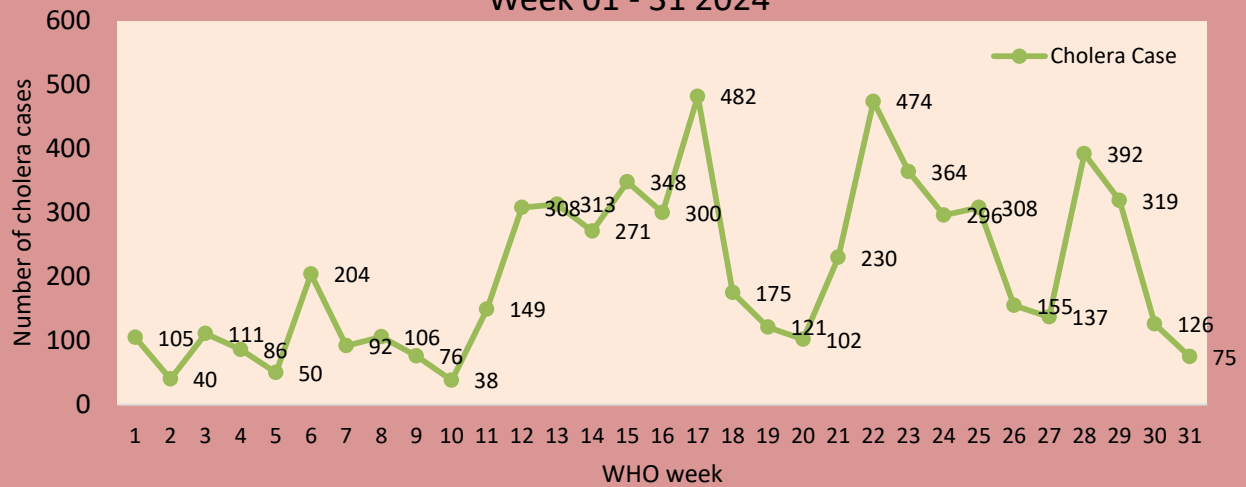


Figure 11: Oromia region weekly trends of measles outbreak, WHO Week 01 - 31, 2024

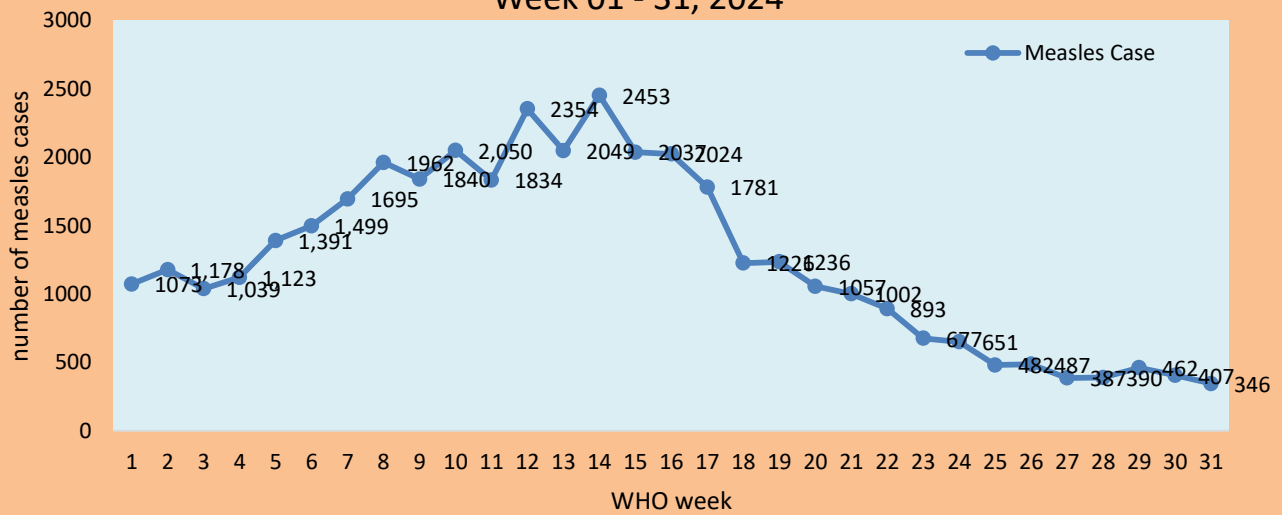
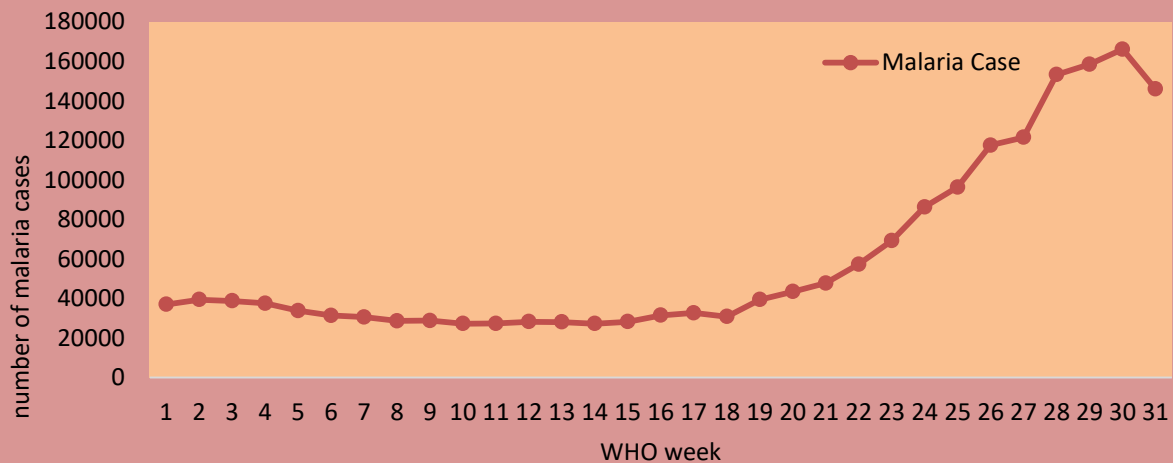


Figure 11: Oromia region weekly trends of malaria outbreak, WHO Week 01 - 31, 2024





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

Production Team

1. Afework Tamiru

Editorial Team

1. Afework Tamiru

Approved and published by

1. Melese Lemi

Public Health Emergency Management Health Research Directorate, OHB, Finfinne, Ethiopia