Outbreak Brief #3: Ebola Virus Disease (EVD) in Uganda

Date of Issue: 13 October 2022

54 confirmed cases and 39 deaths (19 confirmed, 20 probable)

Data sources: Ministry of Health (MoH) Report

Outbreak update: Since the last brief (6 October 2022), ten new confirmed cases and nine deaths were reported from Mubende district in Uganda.

Cumulatively, 54 cases and 39 deaths were reported from five health districts: Mubende (46 cases; 37 deaths), Kassanda (3; 1), Kyegegwa (3; 0), Kagadi (1; 1) and Bunyangabu (1; 0) districts. Of the 39 deaths, 19 were confirmed for EVD. The case fatality rate among confirmed cases and deaths stands at 35% (19/54). Of the total cases, 20% (10) are health workers, including four deaths. A total of 14 recoveries have been registered.

Figure 1: EVD daily cases and deaths by reported dates from 19 September - 10 October 2022

1 Deaths = probable + confirmed deaths
Genetic sequencing conducted at the Uganda Virus Research Institute found the Mubende Sudan Ebola virus genome is 99.6% complete and most closely related to the strain last identified during the 2011 Ebola Sudan outbreak in Luwero district.

**Event Geoscope and Risk Assessment Levels**

No updates have been made to the existing geographic scope and risk level for the Ebola Virus Disease (EVD) event reported in Uganda. The Africa Centres for Disease Control and Prevention (Africa CDC) will continue to monitor the situation and update this assessment as needed.

**Uganda Response Activities**

- Community based surveillance and active case finding is ongoing.
- 261 (43%) of the 609 signals detected were verified as suspected EVD cases and evacuated to the Ebola treatment unit.
- A total of 1,123 contacts have been listed from five districts, of which 432 (38%) have completed 21 days of follow-up.
- 326 samples tested to date, 17% of which tested positive.
- 101 bat samples collected by the Uganda Wildlife Authority for ecological investigations.
- Risk communication activities are ongoing in the five districts, including radio talk shows, orientation of local leaders and deployment of film vans.

**Africa CDC Response Activities**

- The Africa CDC has activated the Emergency Operations Centre (EOC) to response mode and is closely monitoring the situation in Uganda.
- Africa CDC deployed an advance response team to support in outbreak investigations and identify other potential areas for support.
- Trained 71 district and sub-county security officers, community health workers, traditional healers, religious and cultural leaders on mortality and event based surveillance.
- Africa CDC trained on Infection Prevention and Control (IPC) for Ebola, COVID-19 and other public health threats in Uganda.

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2 The GeoScope level is determined by where the event is currently occurring on the continent. **Low**: event is limited to sub-national areas within one MS; **Moderate**: Event is affecting multiple countries within an AU region, or have been imported from/exported to 1-2 countries from another global region; **High**: Event is affecting several multinational AU regions, or have been imported from/exported to >2 countries from another global region; **Very high**: Event is considered a pandemic, affecting multiple continents or worldwide.
Africa CDC in collaboration with the World Health Organisation office for the African region and the Uganda MoH held an emergency regional ministerial meeting on preparedness and response to Ebola virus diseases. The meeting was held on Wednesday, 12 October 2022.

**Recommendations for the Member States**

Africa CDC recommends that African Union (AU) Member States (MS) should remain vigilant. In doing this, AU MS are advised to:

- Enhance cross-border surveillance efforts by:
  - Mapping population movements to identify all potential crossing points where there is risk of disease spread.
  - Setting up screening posts and conducting health screenings for all travellers to detect signs and symptoms of EVD (e.g. fever, rash, vomiting, diarrhoea, and haemorrhage).
  - Sharing health information for EVD at borders.
- Integrate EVD surveillance into the existing surveillance strategies at community and health facility levels.
- Perform contact tracing and follow up of all probable and confirmed EVD cases.
- Enhance IPC measures in health care settings and affected communities.
- Notify and routinely share data regarding confirmed EVD cases, deaths, recoveries, tests conducted, and healthcare workers infected with Africa CDC to inform these and other updates. Notify Africa CDC by emailing: AfricaCDCEBS@Africa-Union.org.
- Provide information to the general public about seeking immediate medical care for those who develop symptoms similar to EVD.

**Resources for more information**

- Africa CDC updates: [https://africacdc.org/](https://africacdc.org/)
- [Ebola virus infection - Prevention | BMJ Best Practice US](https://www.bmj.com/bestpractice/topic/900315/epidemiology)
- [US CDC - Ebola Virus Disease](https://www.cdc.gov/vhf/ebola/who/index.html) and [WHO - Ebola virus disease overview](https://www.who.int/emergencies/diseases/ebola)
- [WHO - Implementation and management of contact tracing for Ebola virus disease](https://www.who.int/ebola/preparation/contact-tracing)
- [WHO - Surveillance strategy during Phase 3 of the Ebola response](https://www.who.int/emergencies/diseases/ebola/preparation/surveillance-strategy)
- [WHO - EVD Infection prevention and control](https://www.who.int/evacommunication/prevention-and-control)
- [WHO - EVD Safe and dignified burial protocol](https://www.who.int/evacommunication/safe-and-dignified-burial)