

Outbreak Brief #12: Sudan Virus Disease in Uganda

Date of Issue: 14 December 2022

142 confirmed cases and 55¹ confirmed deaths

Data sources: Ministry of Health (MoH) Situation Report

Outbreak update:

Since the last brief (7 December 2022), no new confirmed cases and deaths of Sudan virus disease (SVD) were reported from Uganda. The last confirmed case was reported on 27 November 2022; this makes 16 days since the last reported confirmed case.

Cumulatively, 142 confirmed cases and 55 confirmed deaths (CFR: 39%) were reported from nine health districts: Bunyangabu (1 cases; 0 deaths), Jinja (1; 1), Kagadi (1; 1), Kampala (18; 2), Kassanda (49; 21), Kyegegwa (4; 1), Masaka (1; 1), Mubende (64; 28¹), and Wakiso (3; 0) (see table 1). No new recoveries were reported since the last brief. Cumulatively, 87¹ recoveries have been registered. Healthcare workers account for 13% (19) of the cases and 13% (7) of all deaths (CFR: 37%).

Note: A total of 22 probable deaths were reported and are not included in the total count. These include 21 probable deaths that occurred in Mubende (19) and Kassanda (2) districts prior to the declaration of the outbreak. An additional probable death was identified from Kassanda district on 8 October 2022 and is also not included in the total case/death count.

Event Geoscope and Risk Assessment Levels

Geo scope:
low

Risk level:
Very high risk

No updates have been made to the existing geographic scope² (geoscope) 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.

¹ Due to a previous reporting error, the number of deaths were reduced from 56 to 55 and the recoveries increased to 87

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

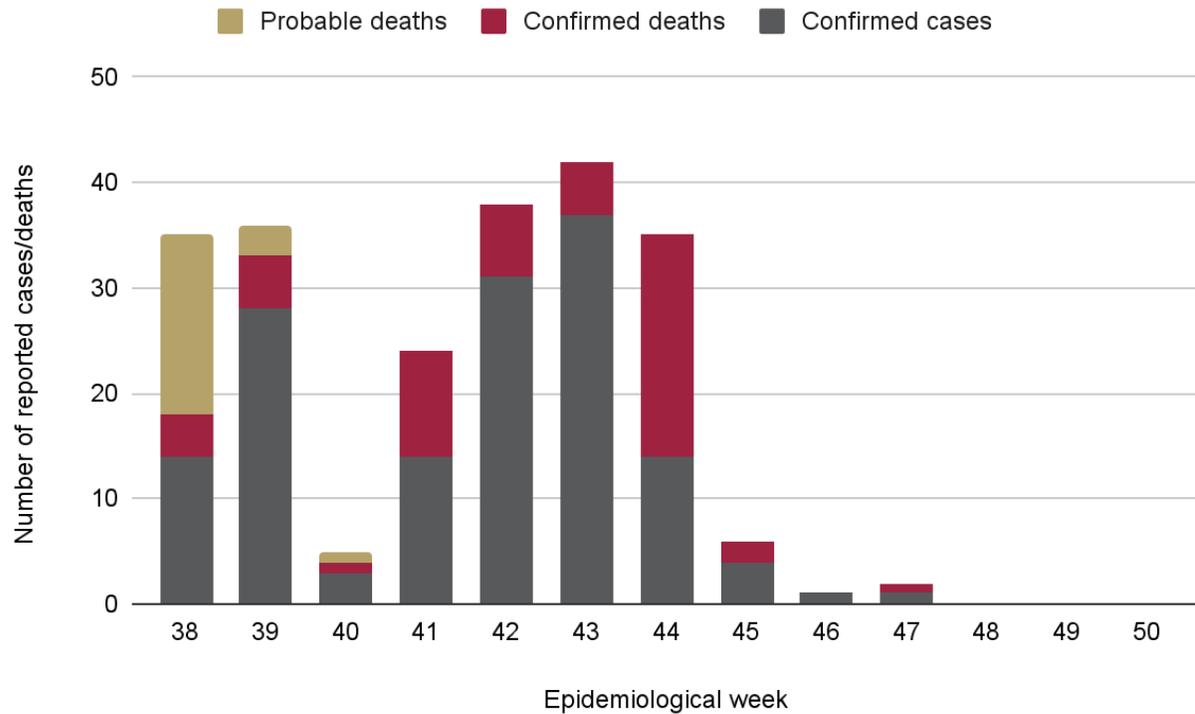


Figure 1: SVD cases and deaths by epidemiological week reported for weeks 38 - 50 (19 September - 13 December 2022¹)

Table 1. Number of confirmed cases and deaths reported by district in Uganda as of 13 December 2022

| District | Confirmed Cases | Confirmed Deaths | Date of Last Case | Days since Last Case |
|------------|-----------------|------------------|-------------------|----------------------|
| Mubende | 64 | 28 | 14 November 2022 | 29 |
| Kassanda | 49 | 21 | 27 November 2022 | 16 |
| Kampala | 18 | 2 | 15 November 2022 | 28 |
| Kyegegwa | 4 | 1 | 28 October 2022 | 46 |
| Wakiso | 3 | 0 | 6 November 2022 | 36 |
| Bunyangabu | 1 | 0 | 1 October 2022 | 73 |
| Jinja | 1 | 1 | 12 November 2022 | 31 |

| | | | | |
|---------------|------------|-----------|--------------------------|-----------|
| Masaka | 1 | 1 | 1 November 2022 | 42 |
| Kagadi | 1 | 1 | 29 September 2022 | 75 |
| Total | 142 | 55 | | |

New Uganda MoH Response Activities

- On 8 December 2022, the MoH received 1,200 doses of trial vaccines for the Sudan virus (SUDV) from the World Health Organization. The SUDV trial vaccines will be used for ring vaccination of high-risk contacts. This is the first batch of three candidate vaccines against SVD that will be provided by WHO.
- 4,384 (91%) of 4,802 contacts identified from 15 districts completed 21 days of monitoring
- 142 (3%) of 4,687 samples tested to date are positive for SVD
- 640 safe and dignified burial (SDBs) conducted to date
- 19,741 teachers, students and pupils oriented on water, sanitation and hygiene and infection prevention and control for SVD
- 338 community health workers oriented on SVD
- 162,265 people in 33,052 households oriented on SVD prevention and control
- MoH commissioned a new Ebola treatment unit at Mulago national referral hospital
- MoH continues to provide psychosocial support to contacts, survivors and families of cases
- MoH continues to support safe and dignified burials in all high-risk districts, including mandatory testing on all dead bodies regardless of cause of death
- MoH continues to conduct Infection prevention and control mentorships at health facilities in the high-risk districts

New Africa CDC Response Activities

- Africa CDC activated its Emergency Operations Centre (EOC) on 26 September 2022 to support preparedness and response efforts of African Union Member States in close collaboration with relevant partners
- The Africa CDC rapid response team continues to support risk communication and community engagement, contact tracing and surveillance activities in the affected districts
- Africa CDC activated 45 village health task forces in Busede sub-county
- Africa CDC conducts a weekly IPC webinar series to train healthcare workers (HCWs) across Africa on EVD outbreak interventions such as IPC considerations on the handling of EVD cases in the community, at healthcare facilities and on how to conduct a risk assessment. To date, 35,300 HCWs have been reached
- Africa CDC field team in Mubende district demonstrated the assembling of a mobile field sequencing lab to ensure real time sequencing of pathogens like Ebola

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 SVD (e.g., fever, rash, vomiting, diarrhoea, and haemorrhage).
 - Sharing health information for SVD at borders.
- Integrate SVD surveillance into the existing surveillance strategies at community and health facility levels.
- Perform contact tracing and follow up of all probable and confirmed SVD cases.
- Enhance IPC measures in health care settings and affected communities.
- Notify and routinely share data regarding confirmed SVD 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 SVD.

Resources for more information

- Africa CDC updates: <https://africacdc.org/>
- [Ebola virus infection - Prevention | BMJ Best Practice US](#)
- US CDC - [Ebola Virus Disease](#) and WHO - [Ebola virus disease](#) overview
- WHO - [Implementation and management of contact tracing for Ebola virus disease](#)
- WHO - [Surveillance strategy during Phase 3 of the Ebola response](#)
- WHO - EVD [Infection prevention and control](#)
- WHO-[EVD Safe and dignified burial protocol](#)
- Sudan virus disease outbreak in Uganda: <https://virological.org/t/september-2022-sudan-ebola-virus-disease-outbreak-in-uganda/902>