

EBOLA OUTBREAK IN UGANDA
NTF Situation Report (Sitrep No 22) as at 12.00 Hrs; February 6th, 2008
Seen and cleared by Dr. Sam Okware/Chairman/NTF & Dr Melville George,
WR/Uganda/Co chair/NTF

1. Situation in the Field:

- The Ebola outbreak is under control with no new case being reported since 3rd January 2008. The last patients in the Isolation units were discharged on January 8, 2008. Isolation wards in Bundibugyo Hospital and Kikyo Health Centre have all been closed after disinfection.
- Contact tracing and retrospective investigation of the outbreak is near completion.
- International partners have all left except for CDC team that is still working with MoH to complete the contact tracing.
- All the other staff supported by WHO for surveillance, psychosocial support and social mobilisation left yesterday after handing over the responsibilities to the district surveillance team, the district health educator, and the district psychosocial team. The exiting staff took time to build the capacity of the people they handed over to.
- Using the date of last discharge of the last suspected case nursed in the Ebola isolation facility (Jan 8th), the epidemic will be declared over on 20th February 2008.
- Alert case from Arua district tested negative for Ebola. There is a report of 9 suspected cases of Ebola in Eastern DRC and specimens are to be shipped to UVRI for testing.

2. Laboratory and Surveillance:

- During retrospective investigation, more suspected cases that had been missed were identified and included in the data base bringing the total number of cases in the data base to 200 (of which 42 are confirmed) and deaths to 37.
- Some of the contacts were positive for Ebola IgG on follow up.
- Some cases had inconclusive results; especially when the specimens were collected before the 4th day after onset of symptoms.
- The EPI/Lab team has had meetings and discussion on the re-classification of cases to come up with the final number of Ebola cases and deaths for this epidemic; as well as the final case definitions for suspected, probable, and confirmed cases.
- The attached algorithm was presented for discussion by the NTF. There is need for more clarity on what to call N-2 cases (Not a case or Unlikely to be a case)
- This algorithm is to be shared with WHO/AFRO, ICST and HQ members and CDC Atlanta team that were technical advisors to the response for input before finalization.
- Definition of EPI-Link geographically has been narrowed down to affected sub-counties within Bundibugyo district, instead of the whole of Bundibugyo district; to facilitate more accurate classification of cases.

3. Case Management and Infection Control:

- There are no new patients in Bundibugyo. Both isolation units are closed. Plans for conducting training to enhance infection control in the country still ongoing. CDC promised to provide a technical expert to train the trainers of trainers at national level and to support training in some districts.
- The districts to be advised to prioritize infection control in their work plans

4. Coordination – Collaboration:

- The NTF held a meeting today February 6th, 2008.
- The NTF will continue to meet weekly till 20th February.

- The District task force continues to hold meetings weekly.
- Implementation of the exit strategy ongoing. However, the district needs short-term, medium-term and long-term support particularly in the area of Human resources for Health.
- The Medical Officer from Police Services will be needed to return to his duty station soon; MoH/Partners to identify and support a short-term replacement (fro 6m – 1 year) as the district and MoH pursue the proposal of MoH recruiting health workers on behalf of the district.

5. Logistics:

- Procurement of infection control supplies and PPEs for all heath facilities nationwide is being undertaken by the MoH. Some suppliers are yet to deliver some of the PPE and infection control supplies.
- WHO and UNICEF were requested to ensure that they meet all unmet obligation before the epidemic response is closed. These include repair and replacement of the radio-call system (now installed in 2 out of the 3 HSDs); provision of the generators for Bundibugyo Hospital and Kikyo HC; Beds and beddings for the wards at Kikyo HC; and the Ambulances/Vehicles.
- Documenting the overall logistical input by all partners towards the Ebola response is in progress. Partners who had not yet submitted their inputs were requested to submit these to the Logistics sub-committee.

6. Social mobilization, media and psycho social support:

- The central social mobilization team left the district yesterday after handing over to the district health educator who will work hand in hand with the Village health teams.
- BTC to support villages without Village Health Teams yet to train them and these will continue to support the health education process.
- A psycho-social support team was established at the district level and will continue with the psychosocial support of survivors, contacts and their families, as well as the families of the deceased. Will be supervised monthly by the central team that left the district yesterday.
- A team headed by ACHS HPE was assigned the task of preparation for the 20th of February. Celebrations to mark the end of Ebola epidemic to be held in Bundibugyo.
- Certificates of recognition to be designed, printed, and handed over to all people that participated in the Ebola response. Agencies involved were requested to submit names of their staff to be awarded.

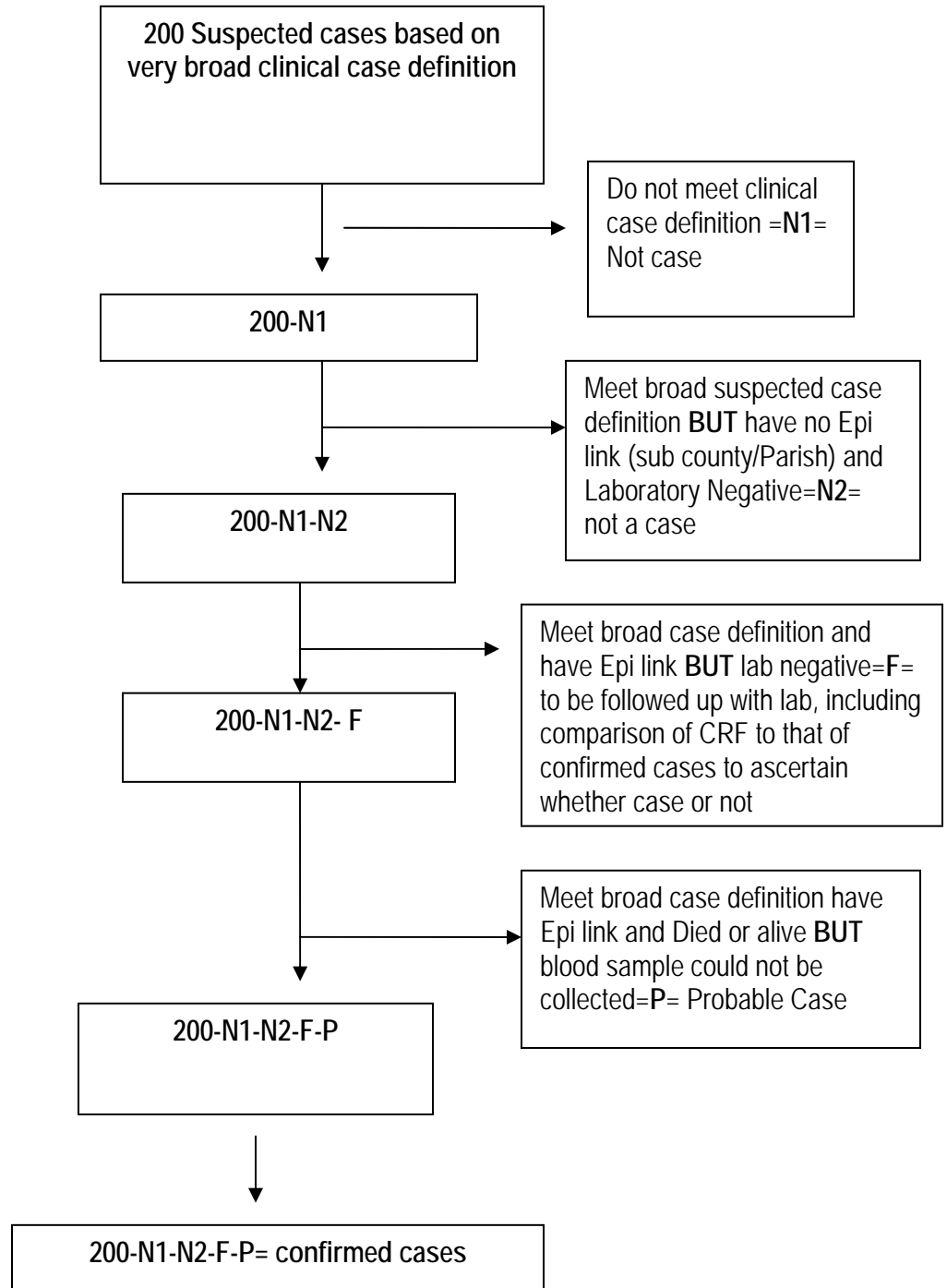
7. Travel advice:

- There is no travel restriction to the affected district or Western Uganda in general as this disease is transmitted through direct contact with an Ebola patient or contact with body fluids from an infected person. In addition, there is no new suspected case of the disease in the district since January 3rd 2008.

8. Challenge:

- The inadequacy human resources for health in Bundibugyo has been worsened by the loss of some of the health workers and needs to be urgently addressed by combined efforts of the district, Ministry of health and Partners. This is critical for the continuity of health services delivery after the Ebola epidemic is declared over.
- There is need for MoH to strengthen support supervision to the district to ensure continued service delivery amidst all the challenges the district faces.

PROPOSED SCHEME FOR RECLASSIFICATION OF SUSPECTED VHF-EBOLA IN BUNDIBUGYO



Note: 1. Any cases in category F that become positive during follow up will enter the confirmed case classification.

2. Any cases in category F who have symptoms similar to those of a confirmed case BUT are lab negative will be reviewed by a team of 3 experts (MoH, CDC, WHO) to determine whether they are likely or not likely to be VHF-EBOLA