



Ministry of Health Commonwealth Heads of Government Daily Situation Report No.6



Date of report: 25th October, 2024
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Reporting period: 12:00AM 24th October-12:00AM 25th October
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Distribution: **EXTERNAL**

INTRODUCTION

Under the Samoa Health Ordinance 1959, through the national communicable disease surveillance and control guideline, health professionals are required to report cases or clusters of notifiable diseases. The Health Security & Disease Surveillance Division coordinates surveillance and reporting on notifiable diseases. Enhanced surveillance measures, including multisource surveillance, strengthening laboratory testing and referral, monitoring at point of entry, 24/7 call center, social listening monitoring were established for CHOGM. The report was prepared as a collaborative effort of all health professionals supporting CHOGM and is a work in progress. We thank all contributors to communicable disease surveillance.

SITUATION SUMMARY

Sites

- 21 surveillance sites
 - National sentinel sites (14) began enhanced surveillance as of 7th Oct. Reporting is 12AM-12AM.
 - CHOGM clinics (7) resume surveillance monitoring beginning 20th Oct. Reporting is 6AM-6AM.
 - CHOGM mobile teams are available during meeting sessions.
- As of 24th Oct, 21/21 surveillance sites have reported including CHOGM clinics: 100% completeness.

Consultations

- Consultations reflect the number of patients seen at each health facility/CHOGM clinics.
- 694 consultations observed. 21.4% decrease from the past 24 hours.
- Neonatal ICU (120%) is at max capacity. NICU capacity due to newborns requiring observation.

Syndromes/Conditions

- **General Rash:** 9 cases reported from TTMH Paeds, Leulumoega DH, Lalomanu DH, Safotu DH and Lufilufi HC. Cases are mostly chicken pox and allergic reaction.
- **ILI:** 3.6% decrease from the past 24 hours. Threshold exceeded at Faleolo HC and CHOGM clinic at Sheraton Mulifanua.
- **SARI:** 2 cases detected at TTMH ED and MTHH.
- **Diarrhoea (bloody):** 1 case from TTMH Paeds, suspected food poisoning

Urgent Notifiable Conditions

- No suspected Mpox detected to date. Testing is available.

Table 1: Consultation per sentinel surveillance site

Sentinel Sites	Reported	No. of consultations
TTMH Paeds	✓	43
TTMH ED	✓	57
TTMH APCC	✓	148
Satupaitea HC	✓	33
Sataua DH	✓	28
Safotu DH	✓	20
Saanapu HC	✓	33
Poutasi DH	✓	32
MTHH	✓	131
Lufilufi HC	✓	33
Leulumoega DH	✓	50
Lalomanu DH	✓	15
Foailalo DH	✓	16
Faleolo HC	✓	19
CHOGM Ward TTMH	✓	7
CHOGM Taumeasina	✓	4
CHOGM Standby team	✓	0
CHOGM Sinalei Reef Resort	✓	1
CHOGM Sheraton Mulifanua	✓	3
CHOGM Sheraton Bungalows	✓	5
CHOGM RTParadise	✓	0
CHOGM Mobile Team 2	✓	0
CHOGM Mobile Team 1	✓	0
CHOGM MC - MJCA	✓	15
CHOGM Amanaki	✓	1
Total		694

Table 2: Signals and events under monitoring

Date of Report	Disease/condition	Description	Risk assessed	Status
10/22/24	Hand Foot Mouth Disease	1 case: General rash suspected of HFMD from Foailalo DH: F/5yo with day 3 of multiple boils on face, hands and legs. RRT collected samples for referral to reference lab to confirm HFMD.	Low	Open
10/22/24	SARI	1 case: SARI case reported from Foailalo DH, F/8yrs with high-grade fever; whooping cough, mild sob and runny nose that started 1 week prior. Tested negative on COVID-19 RDT. RRT collected samples to run the respiratory panel and refer to reference lab to rule out pertussis.	Moderate	Open
10/23/24	Typhoid	1 case: prolonged fever presented at Foailalo DH, suspected for typhoid. Blood samples were collected. Tested negative for dengue and leptospirosis. Case further investigated and did not meet the case definition.	Low	Closed
10/23/24	Respiratory	As of 23rd October, 15 pneumonia cases reported from TTMH paed, 4 confirmed RSV. RRT deployed to swab the pneumonia cases at TTMH, Pending results.	Moderate	Open
10/25/24	Bloody diarrhoea	1 case of bloody diarrhoea with vomiting, Female 1y/o suspected food poisoning, RRT to investigate	Low	Open

CLINICAL/MINISTRY OF HEALTH SAMOA EMERGENCY MEDICAL ASSISTANCE TEAM (SEMAT) UPDATE

CHOGM clinics are established to provide care for CHOGM participants at both hotels and designated meeting venues. The Samoa Emergency Medical Assistance Team (SEMAT) and New Zealand Medical Assistance Team (NZMAT) joint teams are deployed to CHOGM clinics as needed.

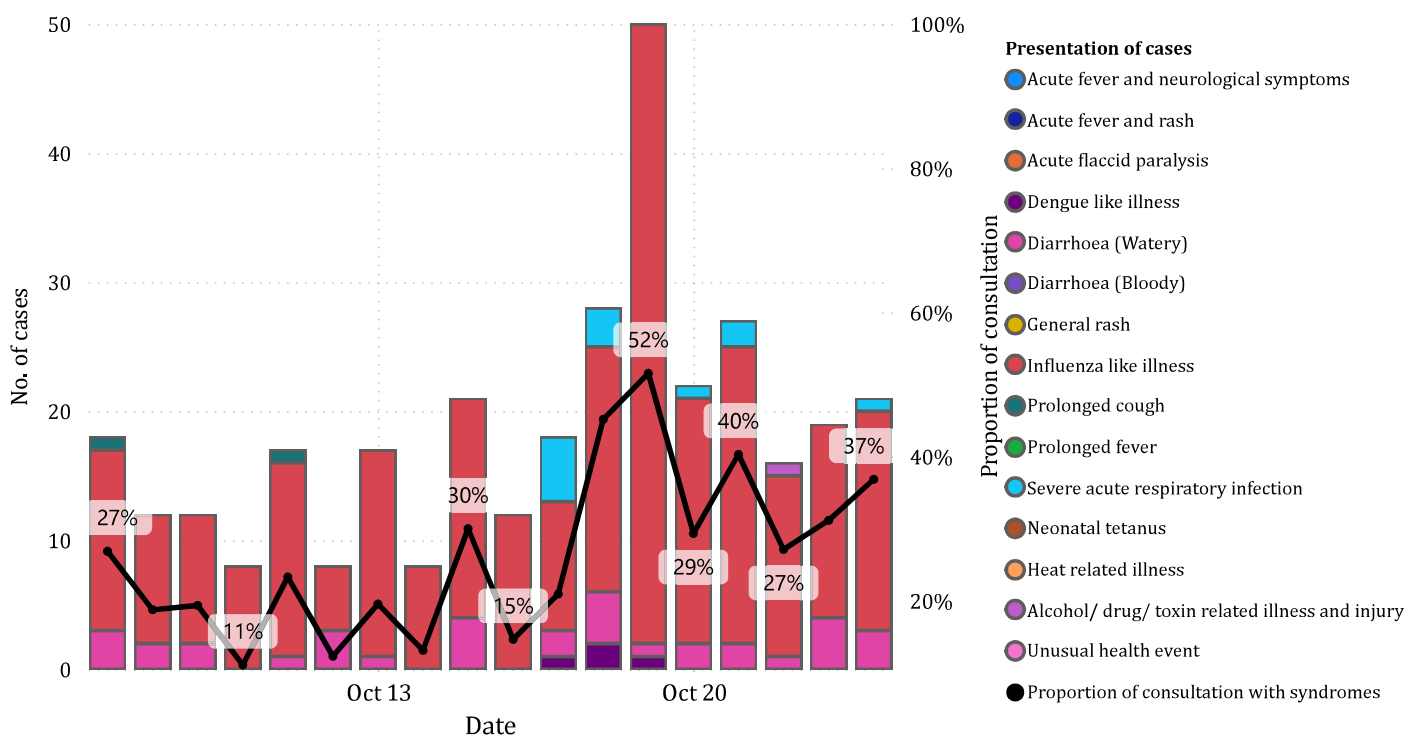
Hospital capacity surveillance has been established in an effort to strengthen resilience of healthcare system during CHOGM. Bed capacity data and presentations is collected to monitor occupancy and presentations of patients managed at TTM emergency department.

- Over the past 24 hours, 17 teams were dispatched to 11 sites including a mobile unit that was on standby to provide medical support during the ava ceremony.
- A total of 36 patients visited the clinics, including those in the CHOGM ward. Among them, 4 had watery diarrhoea and 4 presented with influenza like symptoms. The majority of the other patients presented with various issues, such as blood pressure and blood sugar checks, upper respiratory tract infections, headaches, dizziness and fatigue primarily affecting local staff involved in CHOGM activities.
- TTMH currently has 154 patient admissions, including 17 new admissions in the past 24 hours. Additionally, 29 patients have been discharged, and there have been 267 outpatient visits. The hospital is operating at 65% occupancy.

Table 3: Bed occupancy and presentation at TTM Hospital Wards 7AM-7AM

Hospital/Ward	No. of beds	No. bed occupied	Bed occupancy %	No. of presentations	No. of deaths
TTMH NICU	10	12	120.00%		0
TTMH Medical Ward	40	36	90.00%		0
TTMH Surgical Ward	40	32	80.00%		0
TTMH Maternity	40	26	65.00%		0
TTMH Paediatrics Ward	43	27	62.79%		0
TTMH ED	14	8	57.14%	64	0
TTMH Labour Ward	12	6	50.00%		0
TTMH ICU	7	3	42.86%		0
Mental Health	10	4	40.00%	13	0
TTMH CHOGM Ward	20	0	0.00%	7	0
TTMH APCC				183	0

Figure 1: TTMH ED Proportion of consultations and types of presentation



SYNDROMIC SURVEILLANCE (excluding ILI, SARI, & Dengue)

Syndromic Surveillance System has a total of 21 sentinel sites and mobile clinics and 15 syndromes under monitoring. **Syndromes with alert threshold exceeded are highlighted in red.**

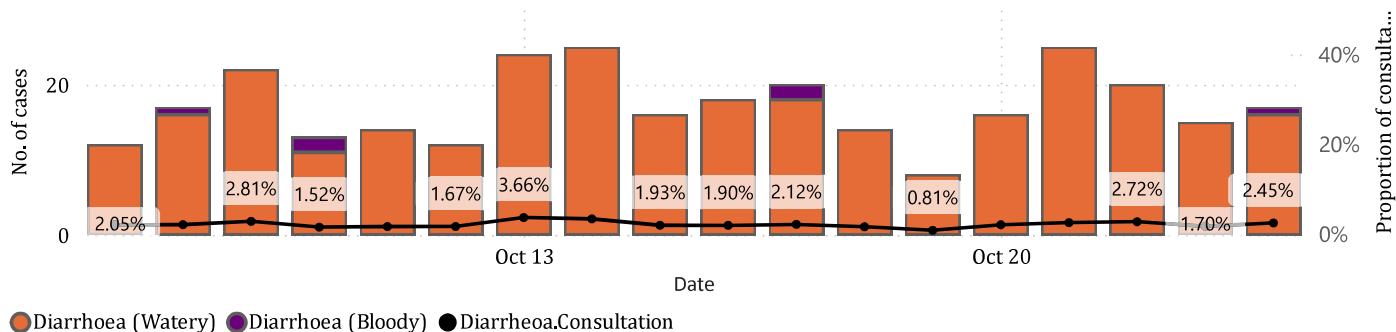
Date of presentation: 24 October, 2024

No. of consultation: 694

Table 4: Number of consultations and syndromic cases per sentinel site

Clinic	No. of consultations	Prolonged fever	Acute fever and rash	Acute flaccid paralysis	Neonatal tetanus	General rash	Prolonged cough	Acute fever and neurological symptoms	Heat related illnesses	Alcohol/drug/toxin related illness and injury	Unusual health event
TTMH Paeds	43	0	0	0	0	4	0	0	0	0	0
TTMH ED	57	0	0	0	0	0	0	0	0	0	0
TTMH APCC	148	0	0	0	0	0	0	0	0	0	0
Satupaitea HC	33	0	0	0	0	0	0	0	0	0	0
Sataua DH	28	0	0	0	0	0	0	0	0	0	0
Safotu DH	20	0	0	0	0	1	0	0	0	0	0
Saanapu HC	33	0	0	0	0	0	0	0	0	0	0
Poutasi DH	32	0	0	0	0	0	0	0	0	0	0
MTIIH	131	0	0	0	0	2	0	0	0	0	0
Lufilufi HC	33	0	0	0	0	1	0	0	0	0	0
Leulumoega DH	50	0	0	0	0	1	0	0	0	0	0
Lalomanu DH	15	0	0	0	0	0	0	0	0	0	0
Foailalo DH	16	0	0	0	0	0	0	0	0	0	0
Faleolo HC	19	0	0	0	0	0	0	0	0	0	0
CHOGM Ward	7	0	0	0	0	0	0	0	0	0	0
TTMH											
CHOGM Taumeasina	4	0	0	0	0	0	0	0	0	0	0
CHOGM Standby team	0	0	0	0	0	0	0	0	0	0	0
CHOGM Sinalei Reef Resort	1	0	0	0	0	0	0	0	0	0	0
CHOGM Sheraton Mulifanua	3	0	0	0	0	0	0	0	0	0	0
CHOGM Sheraton Bungalows	5	0	0	0	0	0	0	0	0	0	0
CHOGM RTParadise	0	0	0	0	0	0	0	0	0	0	0
CHOGM Mobile Team 2	0	0	0	0	0	0	0	0	0	0	0
CHOGM Mobile Team 1	0	0	0	0	0	0	0	0	0	0	0
CHOGM MC - MJCA	15	0	0	0	0	0	0	0	0	0	0
CHOGM Amanaki	1	0	0	0	0	0	0	0	0	0	0
Total	694	0	0	0	0	9	0	0	0	0	0

Figure 2: Watery, bloody diarrhoea, and proportion of consultation, 7th Oct 2024-present



RESPIRATORY DISEASES

ILI Case Definition: An acute respiratory infection with a history of fever or measured fever of $\geq 38^{\circ}\text{C}$ and cough, with onset within the last 10 days
Alert threshold: Doubling cases from day prior per surveillance site

SARI Case Definition: An acute respiratory infection with a history of fever or measured fever of $\geq 38^{\circ}\text{C}$ and cough, with onset within the last 10 days, AND requiring hospitalization
Alert threshold: ONE case

Table 5: ILI, SARI, and percent change in the past 24 hours

Clinic	ILI	% change in the past 24 hours	SARI	% change in the past 24 hours
TTMH Paeds	14	-51.72%	0	-100%
TTMH ED	17	21.43%	1	Infinity
TTMH APCC	27	50.00%	0	NaN
Satupaitea HC	1	-66.67%	0	NaN
Sataua DH	4	Infinity	0	NaN
Safotu DH	3	Infinity	0	NaN
Saanapu HC	14	55.56%	0	NaN
Poutasi DH	4	-50.00%	0	NaN
MTIHH	30	-11.76%	1	-50%
Lufilufi HC	12	-42.86%	0	NaN
Leulumoega DH	17	-32.00%	0	NaN
Lalomanu DH	4	-20.00%	0	NaN
Foailalo DH	0	-100.00%	0	-100%
Faleolo HC	9	125.00%	0	NaN
CHOGM Ward TTMH	1	0.00%	0	NaN
CHOGM Taumeasina	0	-100.00%	0	NaN
CHOGM Standby team	0	NaN	0	NaN
CHOGM Sinalei Reef Resort	0	NaN	0	NaN
CHOGM Sheraton Mulifanua	2	100.00%	0	NaN
CHOGM Sheraton Bungalows	0	NaN	0	NaN
CHOGM RTParadise	0	NaN	0	NaN
CHOGM Mobile Team 2	0	NaN	0	NaN
CHOGM Mobile Team 1	0	NaN	0	NaN
CHOGM MC - MJCA	1	Infinity	0	NaN
CHOGM Amanaki	0	NaN	0	NaN
Total	160	NaN	2	

Figure 3: Number of tests and lab confirmed Influenza A, B, COVID-19, and RSV, 7th Oct, 2024-present

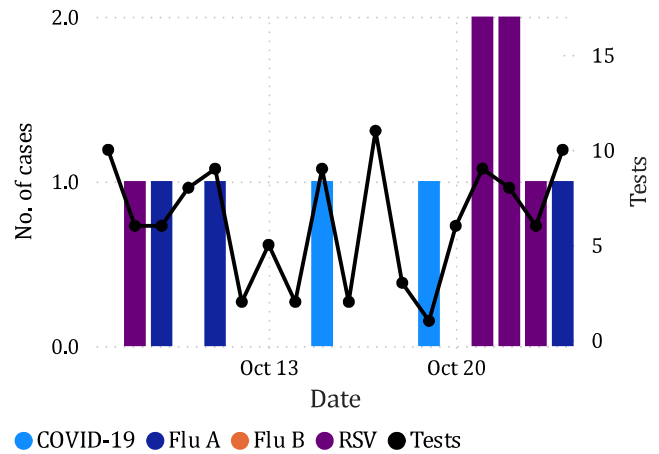
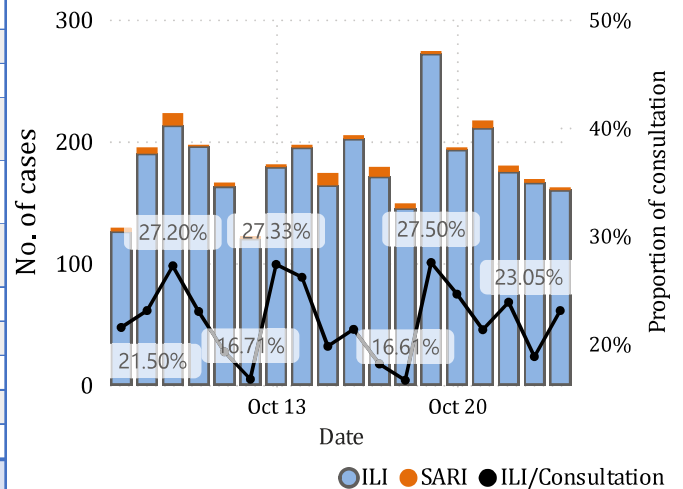


Figure 4: ILI, SARI cases and proportion of consultation

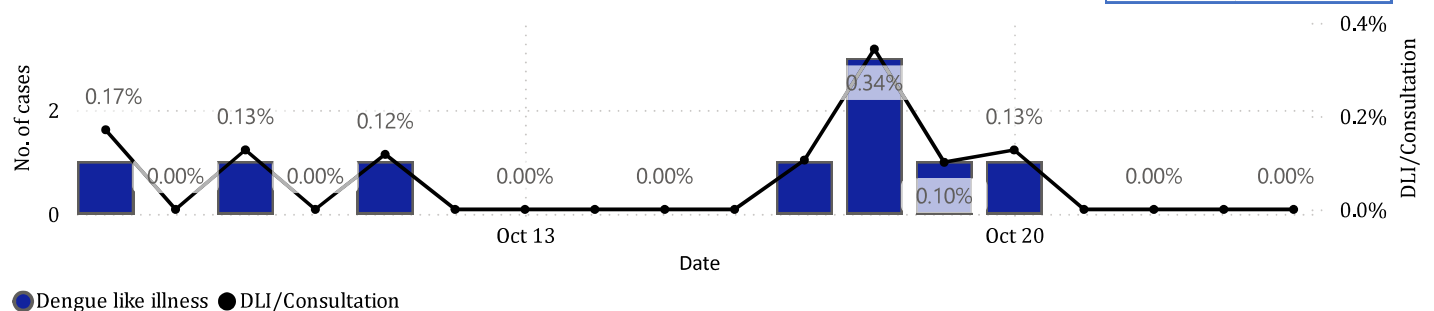


DENGUE

Case Definition: Fever ($\geq 38^{\circ}\text{C}$) for at least 2 days, PLUS at least 2 of the following: Nausea or vomiting; Muscle or joint pain; Severe headache or pain behind the eyes; Rash; bleeding
Alert threshold: THREE cases per surveillance site

Dengue like illness	Confirmed Dengue
0	0

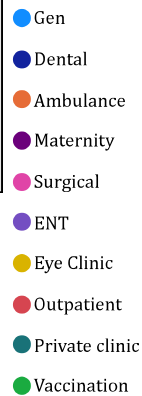
Figure 5: Dengue-like Illness and proportion of consultation, 7th Oct 2024-present



SOCIAL LISTENING & CALL CENTRE

Social listening analysis examines discourse related to health issues among social networks both interpersonal and via media platforms to provide rapid monitoring of emerging health concerns and rumours. Social listening mechanism has been activated in preparation for CHOGM. Call center is available 24/7 to monitor health information from the community,

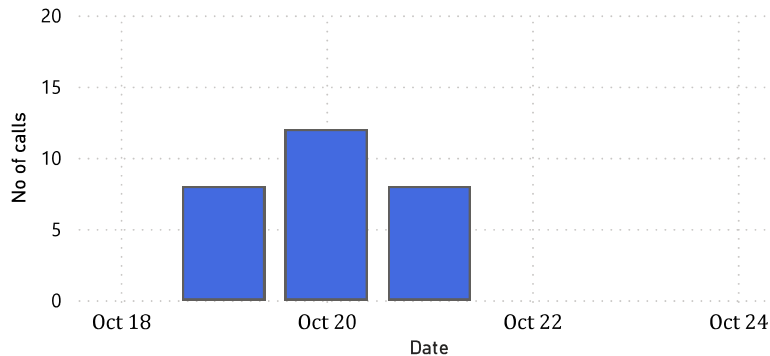
Figure 7: Cumulative number of calls received by subject of call



28

Total Calls

Figure 6: Number of calls by date received



Social Listening: Health related topics

1. Concerns of flooding with the current rainfall level in low lying areas. Land Transport Authority has issued an advisory on road closures.
2. A family from Tufulele without electricity and water reports having 6 children needing immunization services.

ONGOING RESPONSE ACTIVITIES

1. Rapid Response Team (RRT) conducted investigation on all Paeds pneumonia cases for potential RSV at TTMH Paeds. Testing of Paeds pneumonia cases are underway.
2. Respiratory sample collection kits were sent to MTIIH
3. A case of a dog bite from the 21st Oct, was treated by the P&O cruise medical team. The RRT was deployed for follow up and the case has recovered.
4. On the 24th Oct, drinking water quality testing was conducted across Upolu Urban area including at all CHOGM meeting venues. All complied with the National Drinking Water Standards.
5. Ongoing inspections of sanitation facilities and environmental health assessment were conducted at all CHOGM venues and facilities. Issues identified have been addressed.
6. Ongoing food safety inspections and monitoring were conducted at all CHOGM catering facilities including the registered food stalls for Samoa Business Hub at Maluafofu College. Issues identified have been addressed.
7. 954 information Education & Communication (IEC) materials distributed from 7th October to 24th October.

RECOMMENDATIONS

1. Dispatch Rapid Response Teams to investigate suspected typhoid, SARI case at MTIIH, Hand foot and mouth disease, and potential increase in RSV at TTMH paed.
2. Continue to test all SARI and pneumonia cases for influenza, COVID-19, and RSV. Rapid Diagnostic Tests (RDT) are available at CHOGM sites and PCR (respiratory panel) available at TTMH and MTIIH.
3. Ongoing public health actions on risk communication surrounding home care for common illnesses such as acute gastroenteritis & food poisoning, as well as respiratory illnesses (flu, COVID-19, RSV, etc.).
4. The Risk Communication and Community Engagement (RCCE) MOH working group continue to distribute communication materials, handle public queries via the MOH CHOGM call centre and conduct social listening to monitor emerging health concerns in the community and region.
5. Maintain a weekly analysis and reporting of social listening for 2 epi-weeks post-CHOGM to detect signals and community health concerns within the incubation periods of disease of public health concern.