



Ministry of Health Commonwealth Heads of Government Daily Situation Report No.8



Date of report: 27th October, 2024
Email: surveillance@health.gov.ws
Tel: 66506/66507

Reporting period: 12:00AM 26th October-12:00AM 27th October
Prepared by: Health Security & Disease Surveillance Division
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

- 20 surveillance sites
 - National sentinel sites (14) began enhanced surveillance as of 7th Oct. Reporting is 12AM-12AM.
 - CHOGM clinics (6) resume surveillance monitoring beginning 20th Oct. Reporting is 6AM-6AM. One site was discontinued as of 26th Oct 2024.
- 1 CHOGM mobile team was operational at the Spouses' Program
- As of 26th Oct, 19/19 surveillance sites have reported including CHOGM clinics: 100% completeness. TTMH Paeds is closed on Saturday.

Consultations

- Consultations reflect the number of patients seen at each health facility/CHOGM clinics.
- 747 consultations observed, 25% decrease from the past 24 hours.
- Neonatal ICU (100%) is at maximum bed capacity.

Syndromes/Conditions

- **General Rash:** 2 cases reported from Poutasi DH and Lufilufi HC. Both cases are chicken pox.
- **ILI:** 31% decrease from the past 24 hours. Threshold exceeded at Satupaitea HC, Poutasi DH, Lalomanu DH and CHOGM Ward.
- **SARI:** 4 cases detected at Satupaitea HC, Sataua DH, MTIIH and Foailalo DH.

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 ED	✓	67
TTMH APCC	✓	208
Satupaitea HC	✓	34
Sataua DH	✓	27
Safotu DH	✓	25
Saanapu HC	✓	25
Poutasi DH	✓	46
MTIIH	✓	108
Lufilufi HC	✓	20
Leulumoega DH	✓	96
Lalomanu DH	✓	29
Foailalo DH	✓	32
Faleolo HC	✓	9
CHOGM Ward TTMH	✓	7
CHOGM Taumeasina	✓	2
CHOGM Sinalei Reef Resort	✓	0
CHOGM Sheraton Mulifanua	✓	9
CHOGM Sheraton Bungalows	✓	1
CHOGM RTParadise	✓	2
CHOGM Mobile 1	✓	0
Total		747

Table 2: Signals and events under monitoring

Date of Report	Disease/condition	Description	Risk assessed	Status
10/25/24	Bloody diarrhoea	1 case of bloody diarrhoea with vomiting. Female 1y/o suspected food poisoning. RRT deployed to investigate. Investigation conducted and case does not meet initial case definition. Samples have been collected to rule out other enteropathogens.	Low	Closed
10/26/24	Prolonged cough	1 case: M/94yrs with prolonged cough for over 3 weeks and mild shortness of breath. RRT advised clinician to collect samples to rule out pertussis.	Low	Open
10/26/24	SARI	4 cases: (1) F/90yrs with unresolved pneumonia and negative COVID-19 RDT from Sataua DH; (2) M/2yrs with bronchitis pneumonia from MTIIH; (3) F/44yrs with pneumonia from Satupaitea HC; (4) F/24yrs with upper respiratory tract infection (URTI). RRT advised to collect swabs to run the respiratory panel.	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.

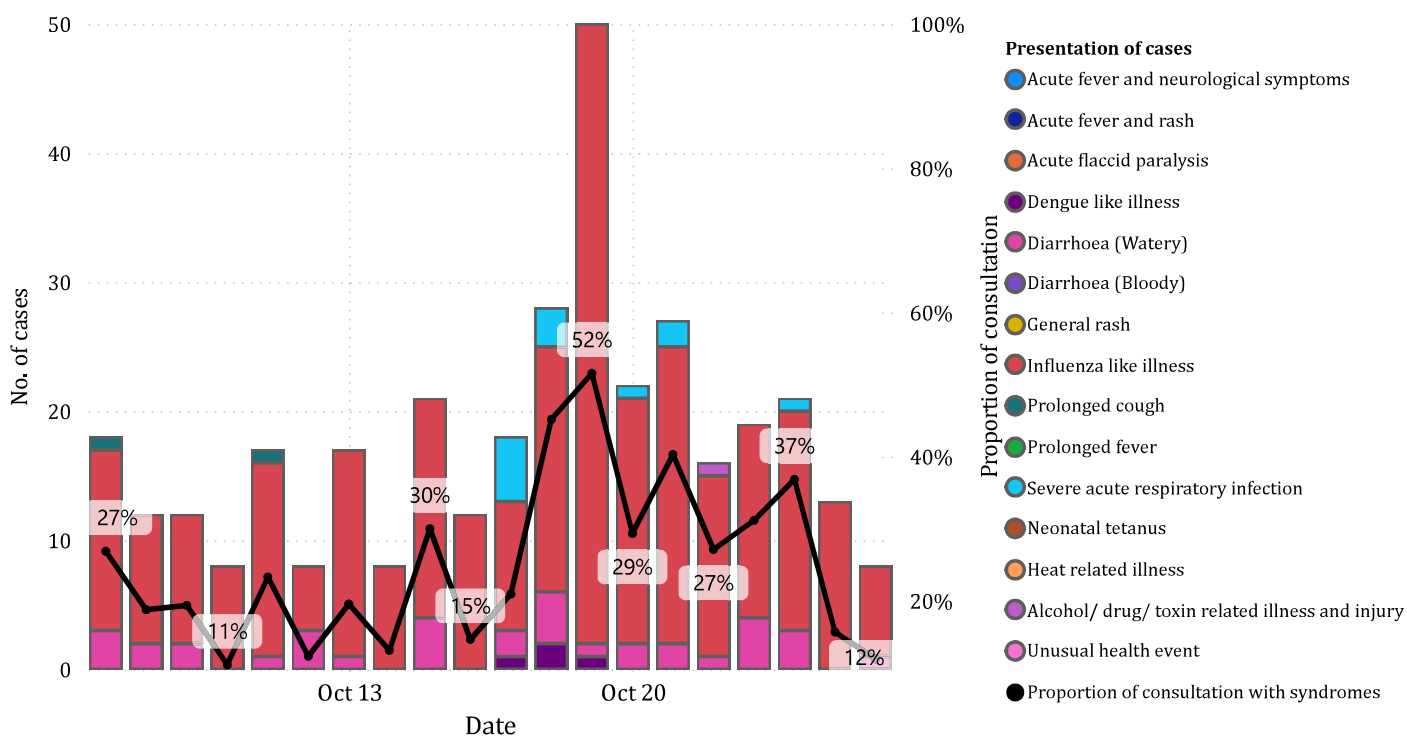
Hospital capacity surveillance has been established in an effort to strengthen resilience of healthcare system during CHOGM. Bed capacity data and presentations is collected to monitor occupancy and presentations of patients managed at TTM emergency department.

- The SEMAT operations have started to scale down with teams deployed to 5 accommodation sites, CHOGM ward, a mobile team allocated to the Spouses' Program and a mobile team on standby for any call-out. Only Return to Paradise and Sheraton Mulifanua as well as the CHOGM ward provided a 24-hour service, all other accommodation clinics were stood down.
- In the past 24 hours, there were 21 presentations to the clinics, majority of the cases had influenza-like illness and a mixture of other cases presenting with sore throat and some minor injuries.
- TTM Hospital currently has 124 patients admitted, 334 presentations in the past 24 hours with the hospital sitting at 53% occupancy.

Table 3: Bed occupancy and presentation at TTM Hospital Wards 6AM-6AM

Hospital/Ward	No. of beds	No. bed occupied	Bed occupancy %	No. of presentations	No. of deaths
TTMH NICU	10	10	100.00%		0
TTMH Medical Ward	40	31	77.50%		0
TTMH ICU	7	5	71.43%		0
TTMH Surgical Ward	40	27	67.50%		0
TTMH Maternity	40	20	50.00%		0
TTMH Paediatrics Ward	43	21	48.84%		0
TTMH ED	14	6	42.86%	46	0
Mental Health	10	2	20.00%	0	0
TTMH Labour Ward	12	2	16.67%		0
TTMH CHOGM Ward	20	0	0.00%	7	0
TTMH APCC				281	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 20 sentinel sites and mobile clinics and 15 syndromes under monitoring. **Syndromes with alert threshold exceeded are highlighted in red.**

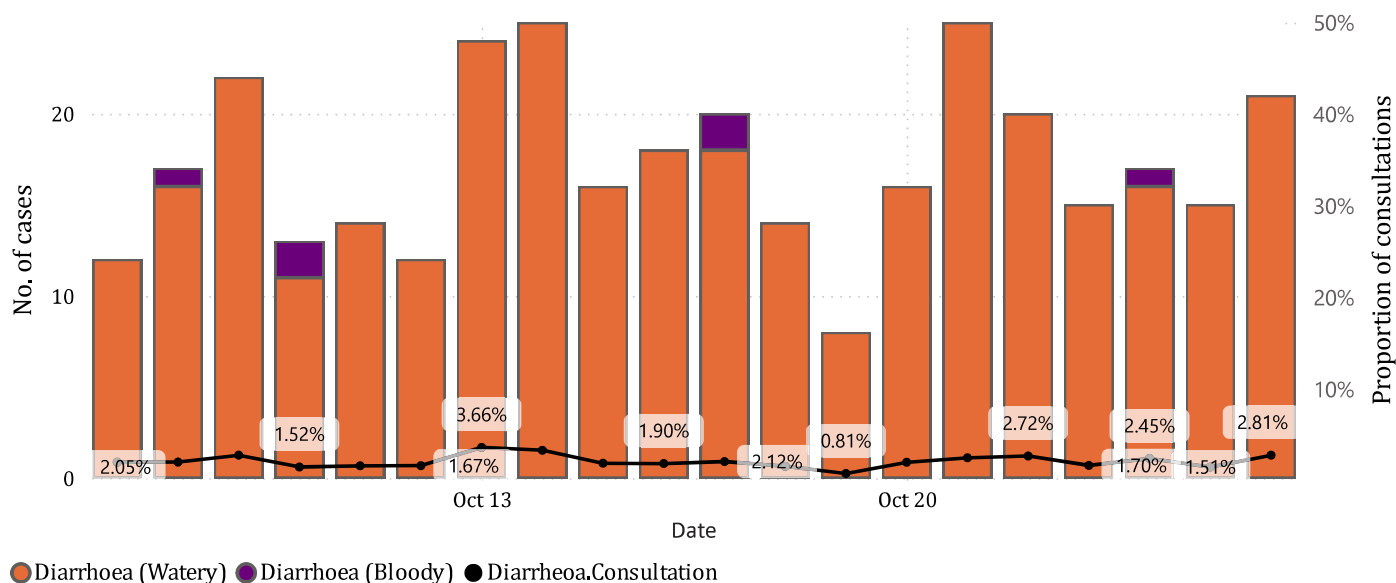
Date of presentation: 26 October, 2024

No. of consultation: 747

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 ED	67	0	0	0	0	0	0	0	0	0	0
TTMH APCC	208	0	0	0	0	0	0	0	0	0	0
Satupaitea HC	34	0	0	0	0	0	0	0	0	0	0
Sataua DH	27	0	0	0	0	0	0	0	0	0	0
Safotu DH	25	0	0	0	0	0	0	0	0	0	0
Saanapu HC	25	0	0	0	0	0	0	0	0	0	0
Poutasi DH	46	0	0	0	0	1	0	0	0	0	0
MTIIH	108	0	0	0	0	0	0	0	0	0	0
Lufilufi HC	20	0	0	0	0	1	0	0	0	0	0
Leulumoega DH	96	0	0	0	0	0	0	0	0	0	0
Lalomanu DH	29	0	0	0	0	0	0	0	0	0	0
Foailalo DH	32	0	0	0	0	0	1	0	0	0	0
Faleolo HC	9	0	0	0	0	0	0	0	0	0	0
CHOGM Ward TTMH	7	0	0	0	0	0	0	0	0	0	0
CHOGM Taumeasina	2	0	0	0	0	0	0	0	0	0	0
CHOGM Sinalei Reef Resort	0	0	0	0	0	0	0	0	0	0	0
CHOGM Sheraton Mulifanua	9	0	0	0	0	0	0	0	0	0	0
CHOGM Sheraton Bungalows	1	0	0	0	0	0	0	0	0	0	0
CHOGM RTParadise	2	0	0	0	0	0	0	0	0	0	0
CHOGM Mobile 1	0	0	0	0	0	0	0	0	0	0	0
Total	747	0	0	0	0	2	1	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 ED	7	-58.82%	0	-100%
TTMH APCC	22	-18.52%	0	NaN
Satupaitea HC	4	300.00%	1	Infinity
Sataua DH	3	-25.00%	1	Infinity
Safotu DH	2	-33.33%	0	NaN
Saanapu HC	0	-100.00%	0	NaN
Poutasi DH	20	400.00%	0	NaN
MTIHI	23	-23.33%	1	0%
Lufilufi HC	9	-25.00%	0	NaN
Leulumoega DH	32	88.24%	0	NaN
Lalomanu DH	20	400.00%	0	NaN
Foailalo DH	2	Infinity	1	Infinity
Faleolo HC	2	-77.78%	0	NaN
CHOGM Ward TTMH	4	300.00%	0	NaN
CHOGM Taumeasina	2	Infinity	0	NaN
CHOGM Sinalei Reef Resort	0	NaN	0	NaN
CHOGM Sheraton Mulifanua	2	0.00%	0	NaN
CHOGM Sheraton Bungalows	0	NaN	0	NaN
CHOGM RTParadise	0	NaN	0	NaN
CHOGM Mobile 1	0	NaN	0	NaN
Total	154	NaN	4	

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

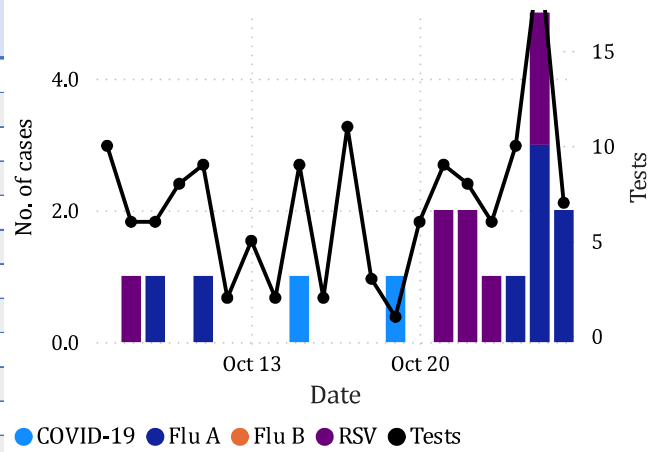
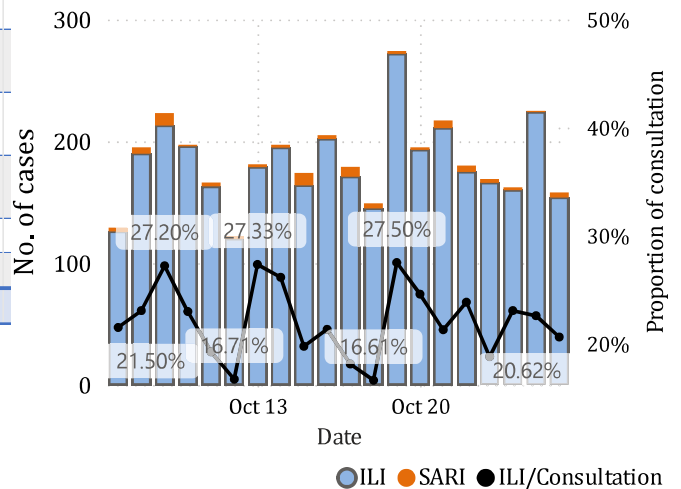


Figure 4: ILI, SARI cases and proportion of consultation

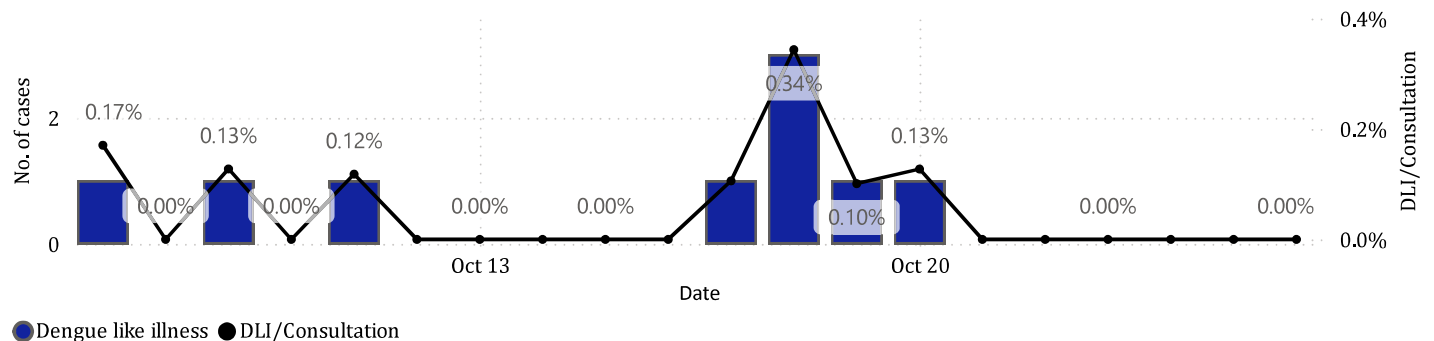


DENGUE

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

- Gen
- Dental
- Ambulance
- ENT
- Maternity
- Surgical
- Eye Clinic
- Outpatient
- Private clinic
- Vaccination

32

Total Calls

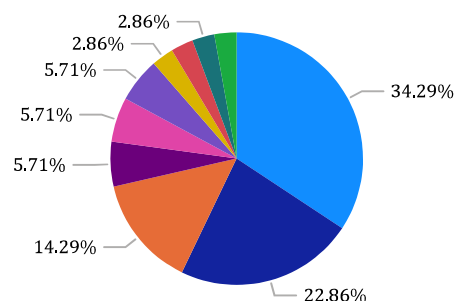
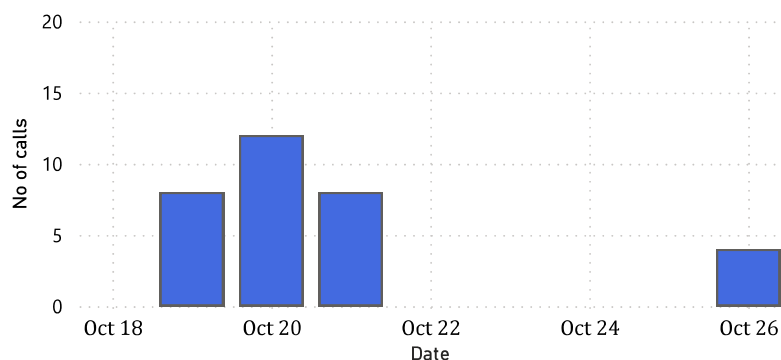


Figure 6: Number of calls by date received



Social Listening: Health related topics

Social listening findings are low due to non-health topics dominating media platforms. The main topic of discussion in the past 24 hours were two deaths due to drowning in Savai'i on Friday among individuals fishing for palolo during the marine adverse weather ocean advisory. Heavy rainfall and intermittent heavy winds have caused flooding in several areas and posed hazards to those swimming and fishing.

ONGOING RESPONSE ACTIVITIES

1. Ongoing food safety inspections and monitoring were conducted at all CHOGM catering facilities including the registered food stalls for Samoa Business Hub at Maluafofou College. Issues identified have been addressed.
2. Ongoing monitoring of syndromes and diseases.

RECOMMENDATIONS

1. 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. Ensure isolation and testing protocols for respiratory illnesses are adhered to.
2. 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.). Encourage timely health seeking behaviour for proper management.
3. 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.
4. 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.
5. Public safety messages and advisories regarding safety and public health prevention regarding fishing and swimming as palolo season begins and more people are fishing in areas affected by adverse weather.