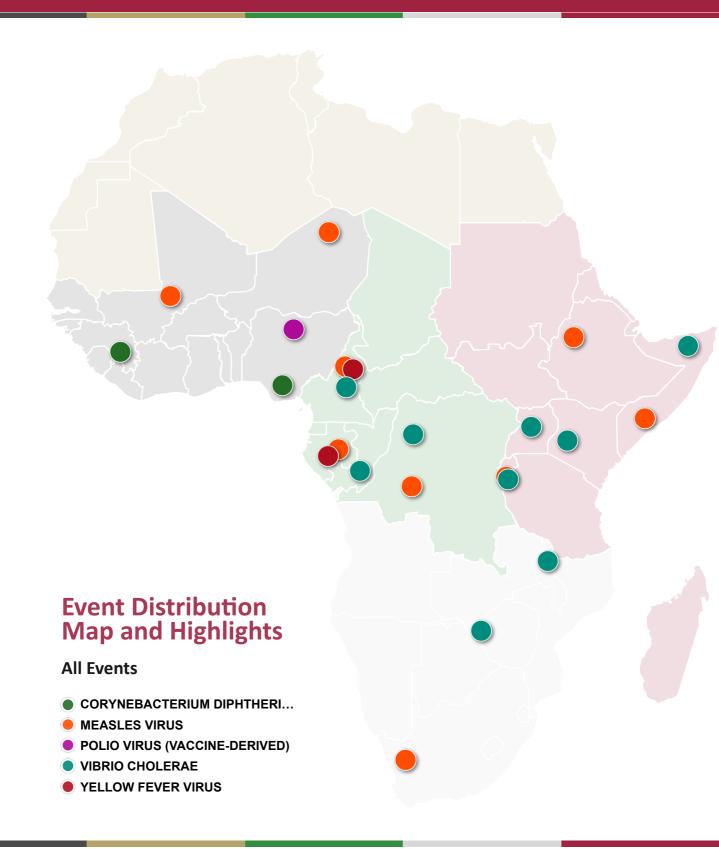




# Africa CDC Weekly Event Based Surveillance Report

13-Aug-2023



# **Human Event Updates**





# **High Risk Events**

# **Cholera in Africa**

**83,774** confirmed case(s) **90,585** suspected case(s) **2,738** death(s) (CFR: 1.6%)

Agent/Pathogen	Vibrio cholerae	First Reported by Africa CDC	06-Jan-2023	Previous Africa CDC Report	04-Aug-2023
First Occurred	01-Jan-2023	Country	Africa Combo	Location	17 MS
Source	Ministry of Health	GeoScope	MODERATE	Risk Assessment	HIGH

# **Update to event:**

Since the beginning of this year, 174,359 cases (83,774 confirmed; 90,585 suspected) and 2,738 deaths (CFR: 1.6%) of cholera were reported from 17 African Union (AU) Member States (MS): Burundi (603 cases; 9 deaths), Cameroon (19,766; 480), Congo (86; 0), DRC (31,342; 230), Eswatini (2; 0), Ethiopia (15,992; 195), Kenya (8,673; 143), Malawi (42,895; 1,260), Mozambique (33,719; 142), Nigeria (2,052; 79), Somalia (11,928; 30), South Africa (1,074; 47), South Sudan (1,471; 2), Tanzania (87; 3), Uganda (58; 8), Zambia (757; 14) and Zimbabwe (3,854; 96).

This week, 3,410 new cases and 57 new deaths of cholera were reported from 10 AU MS: Burundi, Cameroon, Congo, DRC, Kenya, Malawi, Mozambique, Somalia, Uganda and Zimbabwe. Among these MS reporting active cholera outbreaks, we observed three (DRC, Kenya and Mozambique) AU Member States with an average increase in new cases in the past three weeks.

**Burundi:** Since the last update (4 August 2023), the Ministry of Health (MoH) reported three new cases (1 confirmed; 2 suspected) and no new deaths of cholera from two districts of Bujumbura Nord (Buterere, Gihosha-Nyabagere). Cumulatively, 603 cases (52 confirmed; 551 suspected) and nine deaths, case fatality rate (CFR: 1.5%) have been reported from Burundi. The cases reported were equally distributed between males and females. Those under 5 years of age were most affected (22%), followed by those aged 11 to 20 (21%).

**Cameroon:** Since last update (4 August 2023), the MoH reported 194 new cases (1 new confirmed; 193 suspected) and 12 new deaths (CFR: 6.2%) of cholera. Cumulatively 19,766 cases (1,891 confirmed; 17,875 suspected) and 480 deaths (CFR: 2.4%) of cholera have been reported from Cameroon. The outbreak is active in 17 health districts in four regions (Centre, Littoral, South and West).

**Congo(New Event):** On 3 August 2023, the MoH reported 21 confirmed and 65 suspected cases and no deaths of cholera from Niari and Pointe-Noire provinces. The cases presented with watery diarrhea and vomiting at various health facilities in the regions. The samples collected were confirmed at the National Public Health Laboratory by polymerase chain reaction (PCR). Cumulatively, 86 cases (21 confirmed; 65 suspected) and no deaths of cholera have been reported from two of ten provinces. Males accounted for 66.7% of confirmed cases.

**DRC:** Since the last update (4 August 2023), the MoH reported 2,657 new cases and 27 new deaths (CFR: 1%) of cholera from eight provinces. Cumulatively, 31,342 (1,779 confirmed; 29,563 suspected cases) and 230 deaths (CFR: 0.7%) have been reported from 13 of 26 provinces in DRC this year.

**Kenya:** Since the last update (4 August 2023), the MoH reported 60 new suspected cases and three new deaths of cholera (CFR: 5%). Cumulatively, 8,673 cases (1,824 confirmed; 6,849 suspected) and 143 deaths (CFR: 1.6%) were reported from 27 of 47 counties in Kenya. Currently, the outbreak is active in three of the 26 counties (Mandera, Nairobi and Wajir). Majority (33%) of the total cases are children below 10 years.

**Malawi:** On 5 August 2023, the MoH declared the end of public health emergency, following the containment of the outbreak in 26 of 29 health districts in the country, the cholera outbreak no longer constitute a threat. This outbreak was first declared on 28 February 2022, following confirmation of a case of cholera in Machinga district hospital. Cumulatively, 42,895 confirmed cases and 1,260 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year. Since the last update (4 August 2023), the MoH reported five new confirmed cases and no death of cholera, this is an 82% decrease in the number of new cases reported compared to last week.

**Mozambique:** Since the last update (4 August 2023), the MoH reported 131 new confirmed cases and one new death (CFR: 0.8%) of cholera, this is a 31% increase in the number of new cases reported compared to last week. Cumulatively, 33,719 confirmed cases and 142 deaths (CFR: 0.4%) have been reported from 10 of the 11 provinces this year.

**Somalia:** Since the last update (4 August 2023), the MoH reported 224 new cases (2 confirmed and 222 suspected) and no new death of cholera. This is a 4.7% decrease in the number of new cases compared to the last report. Cumulatively, 11,928 cases (48 confirmed and 11,880 suspected) and 30 deaths (CFR: 0.3%) were reported from 28 of 74 drought-affected districts in the country. Of the 11,928 cases, 54% are children under five years. All reported cases did not receive oral cholera vaccine that was administered in the cholera-risk districts. This outbreak has been uninterrupted in the drought-affected districts since 2022 and in the Banadir region since 2017.

**Uganda:** Since the last update (4 August 2023), the MoH reported 13 new cases (8 confirmed; 5 suspected) and one death of cholera from Kayunga and Namayingo districts. Cumulatively, 58 cases (14 confirmed and 37 suspected) and eight deaths (CFR: 16%) of cholera have been reported from the two districts: Kayunga (10 confirmed; 18 suspected) and Namayingo (4; 19). All eight deaths (3 confirmed; 5 probable) were reported from Kayunga District.

**Zimbabwe:** Since the last update (4 August 2023), the MoH reported 50 new cases (7 confirmed; 43 suspected) and 14 new deaths (CFR: 28%) of cholera. This is a 40% increase in the number of new cases reported compared to the last week. Cumulatively, 3,854 cases (854 confirmed; 3,000 suspected) and 96 deaths (CFR: 2.5%) have been reported in all 10 provinces this year. The outbreak is active in 41 districts in all the 10 provinces.

## **Response by MS/Partners:**

The MoH of affected Member States continues to conduct enhanced surveillance, case management, risk communication, Water, Sanitation, and Hygiene (WASH) interventioons and enhanced targeted testing of all samples in the affected districts.

# COVID-19 in Africa

12,314,189 confirmed case(s) 258,499 death(s) (CFR: 2.1%)

Agent/Pathogen	SARS-CoV-2	First Reported by Africa CDC	21-Feb-2020	Previous Africa CDC Report	04-Aug-2023
First Occurred	14-Feb-2020	Country	Africa Combo	Location	All 55 MS
Source	Ministry of Health	GeoScope	VERY HIGH	Risk Assessment	MODERATE

### **Update to event:**

As of 6 p.m. East African Time (EAT) 10 August 2023, a total of 12,314,189 COVID-19 cases and 258,499 deaths (CFR: 2.1%) have been reported by the 55 AU MS. This represents 2% of all cases and 4% of all deaths reported globally. Forty-two (76%) AU MS are reporting CFRs higher than the global CFR. Fifty-three MS have reported COVID-19 cases infected with the Alpha (50 MS), Beta (45), Delta (53), Gamma (5) and Omicron (51) variants of concern (VOC). Additionally, 32 MS have reported the presence of the Omicron BA.2 subvariant, 17 Member States reported the Omicron sub lineage (XBB.1.5), 12 MS reported the Omicron sub lineage (BF.7 or BA.5.2.1.7), and 2 Member States have reported the Omicron sub lineage (XBB.1.16). In Africa, AU Member State has detected this sub-lineage given genomic sequencing in MS. As of 11 August 2023, three Member States (Cape Verde, South Africa and Uganda) have reported the presence of this new variant of interest. There is still limited information on the severity and virulence of this new sub variant.

Fifty-four (98%) MS are currently providing COVID-19 vaccination to the general population. Cumulatively, 1.1 billion doses have been administered on the continent. Of these doses administered, 567.6 million people have been partially vaccinated, and 453.8 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 31 (31 July - 6 August 2023), 65 new COVID-19 cases were reported, which is a 64% decrease in the number of new cases reported compared to the previous week (30). The Eastern region accounted for 45% of the new COVID-19 cases reported this week, followed by the Northern (31%), Central (15%), Southern (9%) and no case reported in Western region.

Last week, no new COVID-19 deaths were reported in Africa. More than 2 thousand new tests were conducted during the past week. The weekly % test positivity increased from 1% to 3% compared to the previous week. Since February 2020, over 127.7 million COVID-19 tests have been conducted in Africa. Africa CDC COVID-19 vaccine dashboard.

# **Response by Africa CDC:**

The emergency operations center (EOC) of the Africa Centres for Disease Control and Prevention (Africa CDC) has been activated for COVID-19 since 27 January 2020. For more information on Africa CDC's response efforts please refer to Africa CDC's website, Hotspot dashboard, PGI Dashboard, Vaccination Dashboard and the Africa CDC COVID-19 brief https://au.int/sites/default/files/documents/42763-doc-AfricaCDC\_COVIDBrief\_5May23\_EN.pdf

# **Measles in Africa**

17,491 confirmed case(s) 256,505 suspected case(s) 3,467 death(s) (CFR: 1.3%)

Agent/Pathogen	Measles virus	First Reported by Africa CDC	06-Jan-2023	Previous Africa CDC Report	04-Aug-2023
First Occurred	01-Jan-2023	Country	Africa Combo	Location	24 MS
Source	Ministry of Health	GeoScope	MODERATE	Risk Assessment	MODERATE

## **Update to event:**

Since the beginning of this year, 256,505 (17,491 confirmed; 239,014 suspected) and 3,467 deaths (CFR: 1.4%) of measles were reported from 24 AU MS: Angola (6,203 cases; 1 deaths), Botswana (13; 0), Burundi (319: 0), Cameroon (8,503; 64), CAR (1,656; 0), Chad (8,017; 6), Congo (288; 1), DRC (190,598; 3,187), Ethiopia (13,482; 125), Gabon (2,687, 0) Ghana (212; 0), Kenya (9; 1), Libya (391; 2), Liberia (15,612; 8), Mali (1,330; 0), Mauritania (565; 4), Mozambique (1,342; 0), Niger (1,690; 0), Senegal (410; 0), Somalia (7,591; 0), South Africa (753; 0), South Sudan (2,001; 14), Uganda (258; 1) and Zambia (328; 1).

This week, a total of 59,453 new cases and 1,378 new deaths were reported from nine MS: Angola, Burundi, DRC, Ethiopia, Gabon, Mozambique, Niger, Somalia and South Africa.

**Angola:** Since the last update (4 August 2023), the Ministry of Health (MoH) reported 183 new confirmed cases and one new death, case fatality rate (CFR: 0.5%) of measles from 12 provinces. This is a 41% increase in the number of new confirmed cases reported compared to the previous update. Cumulatively, 6,203 confirmed cases and 53 deaths (0.9%) have been reported from all 18 provinces this year.

**Burundi:** Since the last update (7 July 2023), the MoH reported 56 new confirmed cases and no new deaths of measles. Cumulatively, 319 cases (76 confirmed; 243 suspected) and no deaths of measles have been reported from six of 18 provinces in Burundi.

**DRC:** Since the last update (16 June 2023), the MoH reported 55,447 cases and 1,373 deaths (CFR: 2.5%) of measles. Cumulatively, 190,598 suspected cases and 3,187 deaths (1.7%) have been reported from 419 health zones in the country's 26 provinces. The majority (54%) of cases were reported from Lomamoi, Nord Kivu, and Sud Kivu provinces.

**Ethiopia:** Since the last update, (4 August 2023), the Ethiopia Public Health Institute reported 290 new suspected cases and four new deaths (CFR: 1.4%) of measles from 32 Woredas in eight regions (Addis Ababa City Administration, Amhara, B/Gumuz, Harari, Oromia, SNNP, Somali and Tigray. This is a 202% increase in the number of new cases reported compared to last week. Cumulatively, 13,482 suspected cases and 125 deaths (CFR: 0.9%) have been reported from Ethiopia. Of the total cases, 90% were detected from four regions: Amhara, Oromia, Somali and SNNP. Fourty seven percent of cases were children <5 years, of which 54% were unvaccinated for measles. The measles outbreak has been controlled in 17 Woredas of Amhara, Oromia, SNNP, Somali and Tigray regions.

**Gabon:** On 12 July 2023, the MoH reported 12 suspected cases and no new deaths of measles from 36 of 51 health departments of four health regions (Centre-sud, Ouest, Libreville-Owendo and Sud-Est). Twenty two health departments are experiencing an epidemic. Cumulatively, 2,687 cases (1,143 confirmed; 1544 suspected) and no deaths of measles have been reported from all districts in Gabon.

**Mozambique:** On 30 July 2023, the MoH reported 216 confirmed and 1,342 suspected cases and no deaths of Measles from all the eleven provinces. Tete province reported the highest number of positive measles cases, contributing 31% of all the positive cases. Cumulatively 1,342 cases ( 216 confirmed; 1,126 suspected) and no deaths of measles have been reported from 141 health districts.

**Niger:** Since the last update (4 August 2023), the MoH reported 40 new confirmed cases and no new deaths of measles from the country. This is an 8% increase in the number of new confirmed cases compared to the previous update. Cumulatively, 1,690 cases (517 confirmed; 1,173 suspected) and no deaths of measles were reported from 61 of 73 districts in all the eight regions.

**Somalia:** Since the last update (28 July 2023), the MoH reported 558 new suspected cases of measles. This is a 171% increase from the previous update. Cumulatively, 7, 591 cases (84 confirmed; 7,507 suspected) and no deaths of measles have been reported from Somalia. The most affected regions include Banadir (2,082), Bay (1,662) and Lower Juba (1,038). Seventy-four percent of the cases are children under five years.

**South Africa:** Since the last update (26 July 2023), the National Institute for Communicable Diseases (NICD) reported four new confirmed cases and no new deaths of measles from two provinces: East Cape and KwaZulu-Natal. Cumulatively, 753 confirmed cases and no deaths have been reported from all nine provinces this year. The most affected age groups are 5 - 9 years (43%), 1 - 4 years (24%) and 10 -14 years (20%).

**Note:** In 2022, 264,345 cases (34,491 confirmed; 229,854 suspected) and 2,860 deaths (CFR: 8%) of measles were reported from 24 MS in four AU regions: Cameroon (3,502 cases; 21 deaths), Central African Republic (CAR) (1,447; 3), Chad (2,956; 11), Congo (6,873; 132), Democratic Republic of Congo (DRC) (146,359; 1,846), Ethiopia (9,857; 102), Guinea (23,601; 33), Kenya (406; 2), Liberia (16,130; 86), Mali (2,745; 1), Mozambique (45; 0), Namibia (23; 0), Niger (19,524; 32), Nigeria (1,162; 0), Senegal (373; 1), Sierra Leone (814; 0), Somalia (16,624; 0), South Africa (365; 0), South Sudan (3,942; 38), Sudan (1,188; 13), Tanzania (223; 0), Togo (1,272; 0), Zambia (23; 3), Zambia (23; 3) and Zimbabwe (6,444; 698).

# **Response by MS/Partners:**

The health agencies of the affected AU MS are strengthening surveillance and laboratory testing to improve early detection and response. AU MS have also intensified risk communications and immunization efforts in affected areas.

# Polio (vacc) in Africa

146 confirmed case(s)
0 death(s) (CFR: 0%)

Agent/Pathogen	Polio virus (vaccine- derived)	First Reported by Africa CDC	01-Jan-2023	Previous Africa CDC Report	21-Jul-2023
First Occurred	01-Jan-2023	Country	Africa Combo	Location	15 MS
Source	Global Polio Eradication Initiative	GeoScope	MODERATE	Risk Assessment	MODERATE

# **Update to event:**

Since the beginning of 2023, the continent has reported 44 cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) from DRC (28 cases), Madagascar (13), Mozambique (3) and 102 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) from 13 MS: Benin (3 cases), Burundi (3), Burkina Faso (1), CAR (10), Chad (10), Côte d'ivoire (2), DRC (43), Kenya (3), Mali (2), Nigeria (21), Niger (1), Somalia (2) and Zambia (1). This week, 3 new cases and no new deaths of cVDPV2 were reported from Nigeria

**Nigeria:** Since the last update (14 July 2023), the MoH has reported three new confirmed cases and no new deaths of cVDPV2 from Kebbi (1) and Zamfara states (2). Cumulatively, 21 confirmed cases and no deaths of cVDPV2 were reported from three states in Nigeria: Enugu (1), Kebbi (5), Sokoto (2) and Zamfara (13).

# **Response by MS/Partners:**

The MoH is currently implementing phase II routine immunization intensification campaigns using fractional dose of inactivated poliovirus vaccine (fIPV) and the novel oral polio vaccine type 2 (nOPV2) in five states: Jigawa, Kaduna, Kano, and Niger states plus the Federal Capital Territory.

# Yellow fever in Africa

29 confirmed case(s)260 suspected case(s)

7 death(s) (CFR: 24.1%)

Agent/Pathogen	Yellow fever virus	First Reported by Africa CDC	06-Jan-2023	Previous Africa CDC Report	04-Aug-2023
First Occurred	01-Jan-2023	Country	Africa Combo	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Risk Assessment	MODERATE

### **Update to event:**

Since the begining of 2023, a total of 289 cases (29 confirmed; 260 suspected) and seven deaths (CFR: 2.7%) of yellow fever have been reported in four African Union Member States (MS): Cameroon (31 cases; 3 deaths), CAR (195; 4), Gabon (61; 0) and Uganda (2; 0). This week, 102 new cases and three new deaths of yellow fever were reported from Cameroon and Gabon.

**Cameroon:** Since the last report (26 July 2023) the Ministry of Health (MoH) reported 23 cases (13 confirmed; 10 suspected) and three deaths, case fatality rate(CFR: 13%) of yellow fever from 13 of 200 districts in Cameroon. This is a 65% increase in the number of new confirmed cases compared to the last report. Cumulatively, 25 cases (15 confirmed; 10 suspected) and three deaths (CFR: 12%) of yellow fever were reported from seven of 10 regions in Cameroon.

**Gabon (New Event):** On 3 July 2023, the (MoH) reported 61 suspected cases and no deaths of yellow fever from two regions (Moyen Ogooue and Ngounie) of the country. The cases presented with fever, jaundice, and fatigue at various health facilities. Information on sample collection and laboratory testing was not provided.

Yellow fever is an acute viral hemorrhagic disease caused by the yellow fever virus and is transmitted through the bite of infected Aedes mosquitoes. Symptoms include fatigue, headache, jaundice, muscle pain, nausea and vomiting. The overall (CFR) can range between 3% to 7.5%. The last outbreak of yellow fever in Gabon occurred in 2021 where one confirmed case and no deaths was reported from Ogooué Maritime province. In 2021, the yellow fever national vaccination coverage was 64%, which is below the World Health Organisation (WHO) target of 85% above.

# **Response by MS/Partners:**

**Cameroon:** The MoH developed a yellow fever response plan and continues to advocate for support from its partners. Additionally, yellow fever vaccination campaigns are ongoing in affected regions.

**Gabon:** The MoH in collaboration with partners is planning to conduct a mass yellow fever vaccination campaign targeting affected regions.

# Diphtheria in Nigeria

1,534 confirmed case(s)
2,626 suspected case(s)
137 death(s) (CFR: 8.9%)

Agent/Pathogen	Corynebacterium diphtheriae	First Reported by Africa CDC	25-Jan-2023	Previous Africa CDC Report	28-Jul-2023
First Occurred	22-Jun-2023	Country	Nigeria	Location	27 states
Source	Nigerian CDC	GeoScope	LOW	Risk Assessment	MODERATE

## **Update to event:**

Since the begining of 2023(27 of April 2023), the Nigerian Centre for Disease Control (NCDC) reported 1,428 new cases (565 confirmed; 863 suspected) and 51 new CFR deaths (9%) of the country's diphtheria cases from 11 states of the country (Bauchi, Enugu, FCT, Kaduna, Kano, Katsina, Niger, Osun, Sokoto, Yobe and Zamfara). Cumula vely 4,160 (1,534 confirmed; 2,626 suspected) and 137 deaths (CFR: 8.9%) reported in 27 of the 36 states, including the Federal Capital Territory. The outbreak has affected mainly Kano, Yobe, Katsina, Lagos, FCT, Sokoto, and Zamfara, which account for 98.0% of the suspected cases. Most confirmed cases, approximately 71.5%, have occurred among children aged 2–14. Out of the 1,534 confirmed cases reported, 1,257 (82%) were not fully vaccinated against diphtheria.

# **Response by MS/Partners:**

The NCDC continues to conduct active case search, case management and the distribution of diphtheria antitoxin and intravenous erythromycin to affected states and risk communication in all the affected.

### **Footnotes**

- \* Cases in this report include confirmed, probable and suspected cases
- \* Case fatality rates are calculated using confirmed cases and deaths only, except for the following:
- Bacterial meningitis, cholera and measles where CFR is calculated using all cases and deaths

<sup>\*</sup> 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. The risk level is determined by evaluating the following criteria: morbidity and mortality of the disease, probability to spread within and to the other MSs, and availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high and very high depending on how they score on the above criteria.