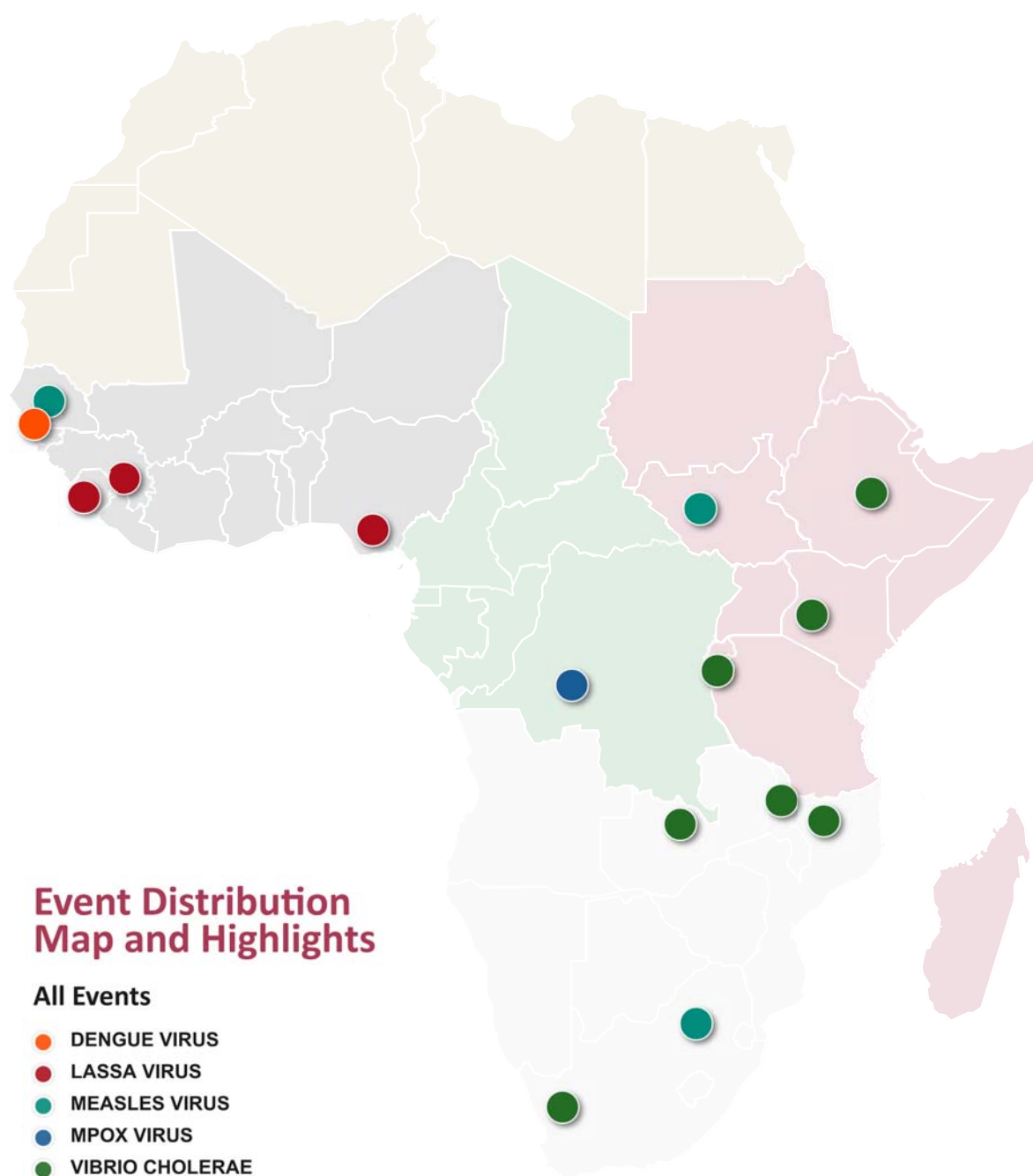


# Africa CDC Weekly Event Based Surveillance Report

11-Feb-2023



## Moderate Risk Events

### Dengue in Senegal

**8** confirmed case(s)

**0** death(s) (**CFR: 0%**)

|                           |                |                    |                              |                        |                             |
|---------------------------|----------------|--------------------|------------------------------|------------------------|-----------------------------|
| <b>Dengue virus</b>       | Agent/Pathogen | <b>09-Feb-2023</b> | First Reported by Africa CDC | <b>Initial Report</b>  | Previous Africa CDC Report: |
| <b>02-Jan-2023</b>        | First Occurred | <b>Senegal</b>     | Country                      | <b>Thilogne region</b> | Location                    |
| <b>Ministry of Health</b> | Source         | <b>LOW</b>         | GeoScope                     | <b>MODERATE</b>        | Risk Assessment             |

#### Description:

On 6 February 2023, the Senegal Ministry of Health (MoH) reported eight confirmed cases and no deaths of dengue fever in Thilogne region. The cases were detected through the syndromic sentinel surveillance network and confirmed by polymerase chain reaction (PCR) at the Institut Pasteur, Dakar. The median age of the cases was 27.5 years.

Dengue is an arbovirus in the Fliviridae family, transmitted primarily by Aedes mosquitoes. Aedes mosquitoes are responsible for transmitting chikungunya, yellow fever, and Zika virus. There are four distinct, but closely related, serotypes of the virus (DENV-1, DENV-2, DENV-3, and DENV-4). The average case fatality rate (CFR) of dengue is less than 1%, but can be up to 15% if untreated. Recovery from infection is believed to confer lifelong immunity against a serotype. In 2022, Senegal reported 99 cases (84 confirmed; 15 suspected) and no deaths of dengue fever from nine regions.

#### Response:

The MoH continues to strengthen surveillance in all the affected regions. Africa CDC continues to monitor the event through the Western Regional Coordinating Centre (RCC).

## High Risk Events

### COVID-19 in Africa

**12,409,100** confirmed case(s)  
**256,698** death(s) (**CFR: 2.1%**)

|                           |                |                     |                              |                    |                             |
|---------------------------|----------------|---------------------|------------------------------|--------------------|-----------------------------|
| <b>SARS-CoV-2</b>         | Agent/Pathogen | <b>21-Feb-2020</b>  | First Reported by Africa CDC | <b>03-Feb-2023</b> | Previous Africa CDC Report: |
| <b>14-Feb-2020</b>        | First Occurred | <b>Africa Combo</b> | Country                      | <b>All 55 MS</b>   | Location                    |
| <b>Ministry of Health</b> | Source         | <b>VERY HIGH</b>    | GeoScope                     | <b>HIGH</b>        | Risk Assessment             |

#### Update to event:

As of 6 p.m. East African Time (EAT) 9 February 2022, a total of 12,409,100 COVID-19 cases and 256,698 deaths (case fatality ratio [CFR]: 2.1%) were reported by the 55 African Union (AU) Member States (MS). This represents 2% of all cases and 4% of all deaths reported globally. Forty-three (78%) AU MS are reporting case fatality rates (CFR) higher than the global CFR. Fifty-three MS have reported COVID-19 cases infected with the Alpha (50 MS), Beta (45), Delta (52), Gamma (3) and Omicron (51) variants of concern (VOC). Additionally, 32 MS have detected the Omicron BA.2 sub-variant, two MS reported the Omicron sublineage (XBB.1.5) and 11 Member States are now reporting the Omicron sublineage (BF.7 or BA.5.2.1.7). Fifty-four (98%) MS are currently providing COVID-19 vaccination to the general population. Cumulatively, 898 million doses have been administered on the continent. Of these doses administered, 458 million people have been partially vaccinated, 412.2 million have been fully vaccinated, and 45.2 million have received a booster dose. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 5 (30 January - 5 February 2023), 4,274 new COVID-19 cases were reported, which is a 37% decrease in the number of new cases reported compared to the previous week (4). The Southern region accounted for 81% of the new COVID-19 cases reported this week, followed by the Eastern (15%), Northern (2%) and Western (2%) regions. Seychelles (444) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, 10 new COVID-19 deaths were reported in Africa, which is 68% decrease in new deaths reported compared to the previous week. The Southern region accounted for all of the new COVID-19 deaths this week.

More than 161 thousand tests were conducted during the past week, reflecting a 52% increase in the number of tests compared to the previous week. The weekly % test positivity has decreased from 6% to 3% compared to the previous week. Since February 2020, over 125.7 million COVID-19 tests have been conducted in Africa.

#### Response:

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](#), and [Vaccination Dashboard](#).

## Mpox in Africa

**99** confirmed case(s)  
**23** death(s) (**CFR: 23.2%**)

|                           |                |                     |                              |                    |                             |
|---------------------------|----------------|---------------------|------------------------------|--------------------|-----------------------------|
| <b>Mpox virus</b>         | Agent/Pathogen | <b>17-Jan-2023</b>  | First Reported by Africa CDC | <b>03-Feb-2023</b> | Previous Africa CDC Report: |
| <b>01-Jan-2023</b>        | First Occurred | <b>Africa Combo</b> | Country                      | <b>4 MS</b>        | Location                    |
| <b>Ministry of Health</b> | Source         | <b>HIGH</b>         | GeoScope                     | <b>HIGH</b>        | Risk Assessment             |

### Update to event:

Since the beginning of this year, 99 confirmed cases and 23 deaths (CFR: 23.2%) of mpox were reported from four endemic AU MS: Democratic Republic of Congo (DRC) (70 confirmed cases; 23 deaths), Ghana (5; 0), Liberia (2; 0) and Nigeria (22; 0). This week, DRC reported new cases of mpox.

**DRC:** Since the last report (6 January 2023), the MoH reported 28 new confirmed cases of mpox. This is a 33% decrease in the number of new cases reported compared to the last report. Cumulatively, 70 confirmed cases and 23 deaths (CFR: 32.8%) were reported from 23 of the 26 provinces in DRC.

### Response:

The MoH continues to conduct refresher training on case management for healthcare workers at all levels.

Africa CDC continues to monitor these events through the RCCs.

## Cholera in Africa

**29,059** confirmed case(s)  
**3,469** suspected case(s)  
**1,632** death(s) (**CFR: 5.6%**)

|                           |                |                     |                              |                    |                             |
|---------------------------|----------------|---------------------|------------------------------|--------------------|-----------------------------|
| <b>Vibrio cholerae</b>    | Agent/Pathogen | <b>06-Jan-2023</b>  | First Reported by Africa CDC | <b>03-Feb-2023</b> | Previous Africa CDC Report: |
| <b>01-Jan-2023</b>        | First Occurred | <b>Africa Combo</b> | Country                      | <b>10 MS</b>       | Location                    |
| <b>Ministry of Health</b> | Source         | <b>MODERATE</b>     | GeoScope                     | <b>HIGH</b>        | Risk Assessment             |

### **Update to event:**

Since the beginning of this year, 32,528 cases (29,059 confirmed; 3,469 suspected) and 901 deaths (CFR: 3.1%) of cholera were reported from 10 AU MS: Burundi (118 cases; 1 death), Cameroon (139; 3), DRC (1,218; 5), Ethiopia (245; 11), Kenya (1,334; 23), Malawi (24,748; 826), Mozambique (3,938; 31), Somalia (703; 1), South Africa (2; 0) and Zambia (83; 1). This week, 6,488 new cases and 172 new deaths of cholera were reported from Burundi (24 cases; 0 death), Ethiopia (245; 11), Kenya (249; 1), Malawi (4,576; 148), Mozambique (1,336; 12), South Africa (2; 0) and Zambia (56; 0).

**Burundi:** Since the last update (20 January 2023), the MoH reported 24 new confirmed cases and no new deaths of cholera. This is a 23% decrease in the number of new cases compared to the previous report. Cumulatively, 118 cases (45 confirmed; 73 suspected) and one death (CFR: 2.2%) were reported from five provinces; Bujumbura Centre (2 cases; 0 deaths), Bujumbura Nord (47 cases; 0 deaths), Bujumbura Sud (3 cases; 0 deaths), Cibitoke (30; 0) and Isare (36; 1).

**Ethiopia:** Since January 2023, the Ethiopia Public Health Institute (EPHI) reported 245 new suspected cases and 11 new deaths of cholera. The outbreak is active in 10 weredas (8 in Oromia and 2 in Somali regions). The ongoing drought in the affected regions has been the main challenge for outbreak control.

**Kenya:** Since the last report (3 February 2023), the MoH reported 249 new cases (77 confirmed; 172 suspected) and one new death (CFR: 0.4%) of cholera. This is a 21% decrease in the number of new cases compared to the last report. Cumulatively, 1,334 cases (289 confirmed; 1,045 suspected) and 23 deaths (CFR: 1.7%) were reported from 15 counties. Fifty-two percent of cases are male and 30% are children under five years.

**Malawi:** Since the last report (27 January 2023), the MoH reported 4,576 new confirmed cases and 148 new deaths (CFR: 2.9%) of cholera. This is a 3% increase in the number of new confirmed cases and a 5% increase in the number of new deaths compared to the last report. In the past 14 days, cholera cases were reported from 27 districts. Cumulatively, 24,748 confirmed cases and 826 deaths (CFR: 3.4%) have been reported this year.

**Mozambique:** Since the last report (3 February 2023), the MoH reported 1,336 new confirmed cases and 12 new deaths (CFR: 1%) of cholera. This is a 226% increase in the number of new cases compared to the last report. Cumulatively, 3,938 confirmed cases and 31 deaths (CFR: 0.8%) were reported from 23 districts.

**South Africa:** On 5 February 2023, the National Institute of Communicable Diseases (NICD) reported two confirmed cases with no deaths of cholera in Johannesburg city of Gauteng province imported from Malawi. The cases were confirmed by culture and *V. cholerae* O1 Ogawa was isolated. The two confirmed cases were relatives who recently attended a funeral in Malawi. The last outbreak occurred from 2008-2009 where over 12,000 cases and no deaths were reported from Mpumalanga and Limpopo provinces.

**Zambia:** Since last report (3 February 2023), the MoH reported 56 cases (9 confirmed and 47 suspected) and no new deaths of cholera from two provinces: Eastern and Luapula. This is a 250% increase in the number of new cases compared to the last report. Cumulatively, 83 cases (21 confirmed and 62 suspected) and one death (CFR: 1.7%) from Eastern and Luapula provinces have been reported.

### **Response:**

**Burundi:** The MoH continues to conduct household water chlorination, distribute safe water and sensitize the affected communities against cholera.

**Ethiopia:** EPHI deployed a response team to investigate the exposure factors for the affected population. In addition, active case search and case management at 14 cholera treatment units in four weredas is ongoing in the affected regions. An oral cholera vaccine (OCV) campaign is ongoing in both regions, with 76,226 and 31,910 doses provided to Oromia and Somalia regions respectively.

**Kenya:** The MoH deployed a rapid response team (RRT) to conduct enhanced surveillance in the affected counties. Additionally, the MoH established cholera treatment centers in all the affected sub-counties. The MoH has planned a reactive OCV campaign in selected sub-counties of Nairobi and Garissa counties.

**Malawi:** The MoH with support from partners continues to conduct OCV campaigns in Lilongwe city. In addition, continues to revise the national response plan to strengthen response efforts.

**Mozambique:** The provincial health departments continue to distribute safe water using water tank trucks. In addition, the MoH continues to intensify surveillance for diarrheal diseases.

**South Africa:** The Department of health issued an advisory to healthcare workers to be alert for patients presenting with symptoms such as diarrhea and dehydration, with or without travel history to cholera outbreak countries for prompt detection. The NICD with support from partners are closely monitoring for diarrheal diseases.

**Zambia:** The Zambia National Public Health Institute (ZNPHI) has activated district public health emergency operations centers and incident management systems. In addition, ZNPHI has supported the district to intensify enhanced surveillance activities, risk communication and stakeholder engagement. The provincial health department has deployed a team to support district responses.

Africa CDC has deployed a team of public health experts (infection prevention and control, laboratory, risk communication and surveillance) to support the ongoing cholera outbreak response in Malawi.

Africa CDC continues to monitor these events in all AU MSs through the RCCs.

## Measles in Africa

**325** confirmed case(s)

**3,658** suspected case(s)

**51** death(s) (**CFR: 15.7%**)

|                           |                |                     |                              |                    |                             |
|---------------------------|----------------|---------------------|------------------------------|--------------------|-----------------------------|
| <b>Measles virus</b>      | Agent/Pathogen | <b>06-Jan-2023</b>  | First Reported by Africa CDC | <b>03-Feb-2023</b> | Previous Africa CDC Report: |
| <b>01-Jan-2023</b>        | First Occurred | <b>Africa Combo</b> | Country                      | <b>6 MS</b>        | Location                    |
| <b>Ministry of Health</b> | Source         | <b>MODERATE</b>     | GeoScope                     | <b>HIGH</b>        | Risk Assessment             |

### Update to event:

Since the beginning of this year, 3,983 cases (325 confirmed; 3,658 suspected) and 51 deaths (CFR: 15.7%) were reported from six AU MS: Cameroon (74 cases; 0 deaths), DRC (3,379; 42), Kenya (9; 1), Senegal (40; 0), South Africa (141; 0) and South Sudan (340; 8). This week, a total of 335 cases and eight deaths were reported from three MS: Senegal (40 cases; 0 deaths), South Africa (47; 0) and South Sudan (295; 8).

**Senegal:** On 6 February 2023, the Senegal MoH reported 40 confirmed cases and no deaths of measles from six regions. The cases were detected through the syndromic sentinel surveillance network and confirmation was made by serology at the Institut Pasteur, Dakar. Of all cases reported, 56% were males and 50% were between 5 to 15 years. Additionally, 90% of the cases were unvaccinated against measles.

**South Africa:** Since the last report (3 February 2023), the NICD reported 47 new confirmed cases and no new deaths of measles. This is a 68% decrease in the number of new confirmed cases compared to the previous report. Cumulatively, 141 confirmed cases and no deaths were reported from five provinces: Free State, Gauteng, Limpopo, Mpumalanga and North West.

**South Sudan:** Since the last report (27 January 2023), the MoH reported 295 new cases (67 confirmed; 228 suspected) and eight new deaths (CFR: 2.7%) of measles. This is a 406% increase in the number of new cases compared to the last report. Cumulatively, 340 cases (67 confirmed; 228 suspected) and eight deaths (CFR: 2.3%) of measles were reported from all counties in South Sudan.

### Response:

**Senegal:** The MoH continues to strengthen surveillance activities in all the affected regions.

**South Africa:** The provincial health departments continue to conduct vaccination campaigns.

**South Sudan:** On 18 January 2023, the MoH started a reactive vaccination campaign in Cueibet, Yirol East and Yirol West counties in Lakes state and reached 87,693 (118.7%) children below the age of 5 years. Additionally, MoH plans to conduct a nationwide non-selective measles vaccination campaign scheduled for March 2023. MoH continues to provide supportive case management and to conduct enhanced surveillance across the country.

# Lassa fever in Africa

**364** confirmed case(s)  
**1,382** suspected case(s)  
**56** death(s) (**CFR: 15.4%**)

|              |                |              |                              |             |                             |
|--------------|----------------|--------------|------------------------------|-------------|-----------------------------|
| Lassa virus  | Agent/Pathogen | 27-Jan-2023  | First Reported by Africa CDC | 03-Feb-2023 | Previous Africa CDC Report: |
| 02-Jan-2023  | First Occurred | Africa Combo | Country                      | Nigeria     | Location                    |
| Nigerian CDC | Source         | MODERATE     | GeoScope                     | HIGH        | Risk Assessment             |

## Update to event:

Since the beginning of this year, 1,746 cases (364 confirmed; 1,382 suspected) and 56 deaths (CFR: 15.4%) of Lassa fever were reported from three AU MSs: Guinea (1 confirmed case; 0 suspected; 1 death), Nigeria (244; 939; 37) and Sierra Leone (2; 4; 2). This week, 563 cases and 19 deaths of Lassa fever were reported from Guinea (1 case; 1 death), Nigeria (556; 16) and Sierra Leone (6; 2).

**Guinea:** On 28 January 2023, the Guinea MoH reported one confirmed fatal case of Lassa fever (CFR: 100%) from Gueckedou health district. The case was a 35-year-old pregnant female who reported at the Badala health post with symptoms of fever, headache, cough and low back pain. Samples were collected and tested at the National Reference Laboratory on Viral Hemorrhagic Fevers in Gueckedou using PCR. The result came out positive for Lassa fever.

**Nigeria:** Since the last report (3 February 2023), the Nigeria Centre for Disease Control reported 556 new cases (117 confirmed; 439 suspected) and 16 deaths (CFR: 13.7%) of Lassa fever. One new healthcare worker was among the confirmed cases. This is a 16% decrease in the number of new cases and 47% decrease in the number of new deaths compared to the last report. Cumulatively, 1,739 cases (361 confirmed; 1,378 suspected) and 53 deaths (CFR: 14.7%) of Lassa fever were reported from 18 states in Nigeria since the beginning of 2023. A total of three healthcare workers were affected.

**Sierra Leone:** On 6 February 2023, the Sierra Leone MoH reported an outbreak of Lassa fever in Bo district. A total of six cases (2 confirmed; 4 suspected) and two deaths (CFR: 100%) were reported. The cases presented at the Bo health facility with symptoms such as fever, headache, general body pains, and abdominal pains, convulsion and bleeding from orifices. Information on the type of confirmatory test and the laboratory was not provided.

## Response:

**Guinea:** The MoH continues to enhance active surveillance in the affected district.

**Nigeria:** A National Lassa fever multi-partner, multi-sectoral Emergency Operations Centre (EOC) was activated to coordinate the response activities at all levels.

**Sierra Leone:** The MoH continues to conduct active case search and has enlisted 23 contacts for follow-up in the affected district.

## Footnotes:

\* Case fatality rates (CFR) are calculated using confirmed cases and deaths only. We recognize that this may inadvertently elevate the CFR for some diseases where alternate methods are recommended.

\* Cases in this report include confirmed, probable and suspected cases.

\*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