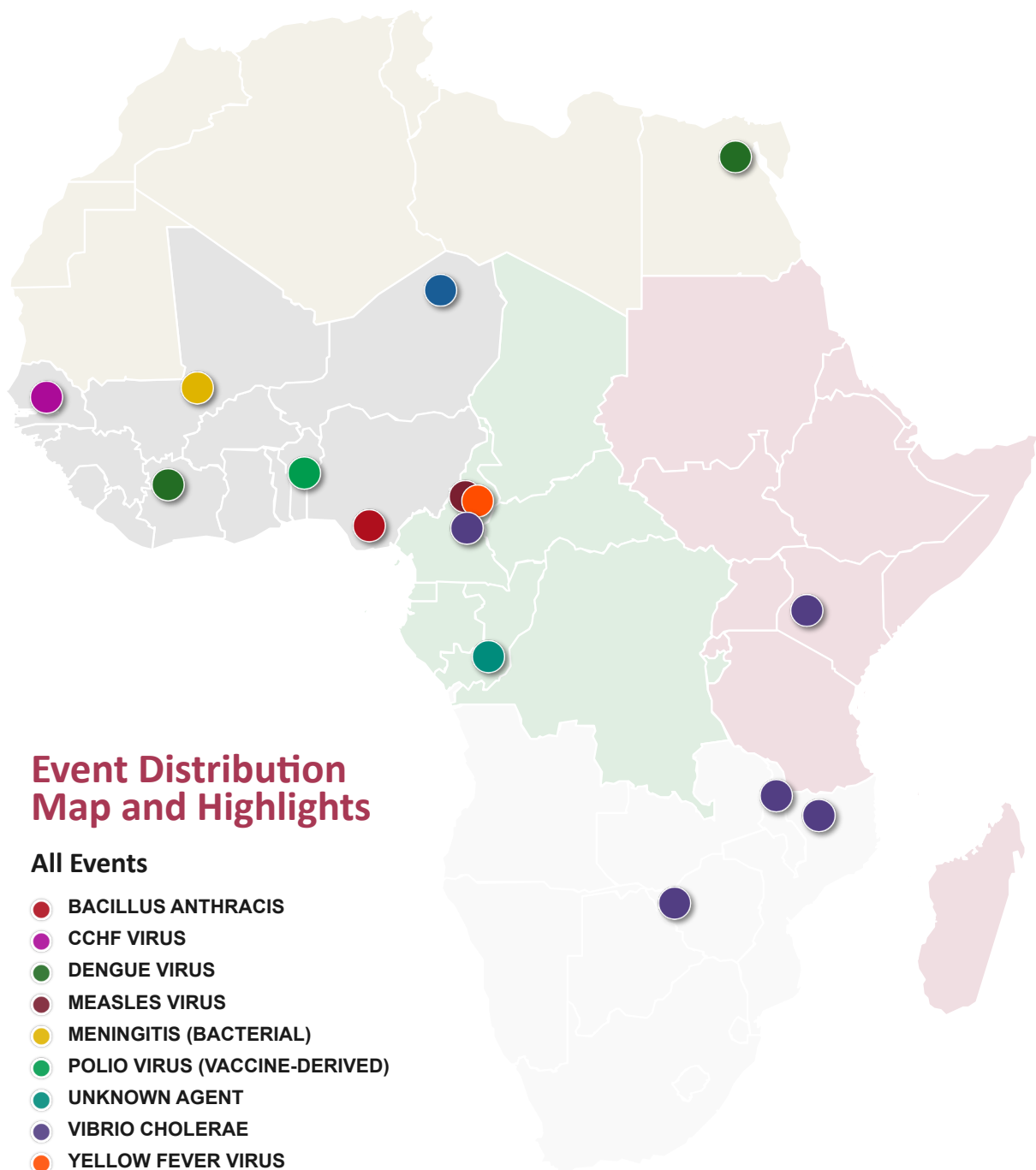


# Africa CDC Weekly Event Based Surveillance Report

24-Jul-2023



## Moderate Risk Events

### Dengue fever in Côte d'Ivoire

**22** confirmed case(s)  
**85** suspected case(s)  
**0** death(s) (**CFR: 0.0%**)

<b>Dengue virus</b>	Agent/Pathogen	<b>21-Jul-2023</b>	First Reported by Africa CDC	<b>Initial Report</b>	Previous Africa CDC Report:
<b>13-Jul-2023</b>	First Occurred	<b>Côte d'Ivoire</b>	Country	<b>4 regions</b>	Location
<b>Ministry of Health</b>	Source	<b>MODERATE</b>	GeoScope	<b>MODERATE</b>	Risk Assessment

#### Description:

On 16 July 2023, the Ministry of Health (MoH), Côte d'Ivoire reported an outbreak of dengue fever with 107 cases (22 confirmed; 85 suspected) and no deaths from the country. Confirmatory diagnosis was made at the Institut Pasteur in Dakar by polymerase chain reaction (PCR). The cases were reported from four of the 14 districts: Cocody-Bingerville, Soubre, Treichville-Marcory and Yopougon Ouest, with Cocody-Bingerville accounting for 95% of the total cases reported.

Dengue is an arbovirus in the Flaviviridae 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 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. The virus is endemic in tropical areas of Africa, the Americas, the Eastern Mediterranean, South-East Asia and the Western Pacific.

#### Response:

The MoH is conducting clinical management of cases. In addition, risk communication and vector control activities in the most affected area of Cocody-Bingerville – Adjame are ongoing.

### Dengue fever in Egypt

**200** suspected case(s)  
**0** death(s) (**CFR: 0.0%**)

<b>Dengue virus</b>	Agent/Pathogen	<b>18-Jul-2023</b>	First Reported by Africa CDC	<b>Initial Report</b>	Previous Africa CDC Report:
<b>16-Jul-2023</b>	First Occurred	<b>Egypt</b>	Country	<b>Qena Governorate</b>	Location
<b>Ministry of Health</b>	Source	<b>MODERATE</b>	GeoScope	<b>MODERATE</b>	Risk Assessment

#### Description:

On 18 July 2023, the Ministry of Health (MoH) Egypt, reported an outbreak of dengue fever with 200 suspected cases and no deaths in Naga Sanad, Al-Aleqat village, Qus town, Qena governorate. The cases had a history of travel to Safaga and Al-Qusayr near the Red Sea where they had contact with people with similar symptoms. The cases presented with mild symptoms including fever, body ache and headache and received treatment at their homes. None of the cases were hospitalized. Information on the number of confirmed cases and laboratory diagnostic procedures were not provided.

#### Response:

The MoH deployed a rapid response team to conduct outbreak investigation, active case search and risk communication. On 17 July 2023, samples were collected from humans (blood), environment (stagnant water and sewage) and vectors (mosquito and mosquito larva) and sent to the central laboratories for confirmation. *Aedes aegypti* was isolated from the environmental samples. Africa CDC has engaged the MoH for more information and also explore areas of support.

## High Risk Events

### Cholera in Africa

**81,801** confirmed case(s)  
**78,492** suspected case(s)  
**2,562** death(s) (**CFR: 1.6%**)

<b>Vibrio cholerae</b>	Agent/Pathogen	<b>06-Jan-2023</b>	First Reported by Africa CDC	<b>14-Jul-2023</b>	Previous Africa CDC Report:
<b>01-Jan-2023</b>	First Occurred	<b>Africa Combo</b>	Country	<b>15 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, 160,293 cases (81,801 confirmed; 78,492 suspected) and 2,562 deaths (CFR: 1.6%) of cholera were reported from 15 AU MS: Burundi (536 cases; 9 deaths), Cameroon (19,386; 463), DRC (23,513; 138), Eswatini (2; 0), Ethiopia (12,512; 159), Kenya (8,555; 140), Malawi (42,858; 1,258), Mozambique (33,355; 141), Nigeria (1,629; 79), Somalia (10,933; 30), South Africa (1,073; 47), South Sudan (1,471; 2), Tanzania (87; 3), Zambia (757; 14) and Zimbabwe (3,626; 79). This week, 16,389 new cases and two new deaths of cholera were reported from six AU MS: Cameroon, Ethiopia, Kenya, Malawi, Mozambique and Zimbabwe.

**Cameroon:** Since the last update (30 June 2023), the MoH reported 15,625 cases (6 confirmed; 15,619 suspected) and three deaths from 23 health districts in three regions: Centre, Littoral and Sud. Cumulatively, 19,386 cases (1,887 confirmed; 17,499 suspected) and 463 deaths (CFR: 2.4%) have been reported from these three regions.

**Ethiopia:** Since the last update (14 July 2023), the Ethiopia Public Health Institute (EPHI) reported 448 new suspected cases and two new deaths (CFR: 0.4%) of cholera. This is a 26% decrease in the number of new cases reported compared to the last report. Cumulatively, 12,512 cases (26 confirmed; 12,486 suspected) and 159 deaths (CFR: 1.3%) have been reported. The outbreak is active in four of 14 regions in Ethiopia (Oromia, SNNP, Sidama and Somali).

**Kenya:** Since the last update (14 July 2023), the MoH reported 65 new suspected cases and no new deaths of cholera. Cumulatively, 8,555 cases (1,816 confirmed; 6,739 suspected) and 140 deaths (CFR: 1.6%) were reported from 26 of the 47 counties in Kenya. Garissa, Mandera and Nairobi counties account for 61% of the total cases reported to date. Thirty-three percent of the cases are children below 10 years.

**Malawi:** Since the last update (14 July 2023), the MoH reported six new confirmed cases and no new deaths of cholera from seven districts. Cumulatively, 42,858 confirmed cases and 1,258 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year.

**Mozambique:** Since the last update (14 July 2023), the MoH reported 95 new confirmed cases and no new deaths of cholera. This is a 9% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 33,355 confirmed cases and 141 deaths (CFR: 0.4%) have been reported from 10 of the 11 provinces in Mozambique this year.

**Zimbabwe:** Since the last update (14 July 2023), the MoH reported 150 new cases (18 confirmed; 132 suspected) and one new death (CFR: 0.7%) of cholera. This is an 18% decrease in the number of new cases compared to the last report. Cumulatively, 3,610 cases (832 confirmed; 2,778 suspected) and 79 deaths (CFR: 2.2%) have been reported in all 10 provinces this year.

#### Response:

**Cameroon:** The MoH continues to strengthen surveillance activities in the 3 high-risk regions. Cholera treatment center staff capacity building activities continue in affected districts, along with community awareness.

**Ethiopia:** The EPHI continues to conduct enhanced surveillance, risk communication and community engagement and case management at the 95 cholera treatment centers, as well as water, sanitation and hygiene (WASH) interventions in the affected regions.

**Kenya:** The MoH continues to conduct enhanced surveillance, case management, risk communication, WASH interventions in the affected counties.

**Malawi:** The MoH continues to conduct enhanced surveillance, case management, risk communication, WASH interventions and enhanced targeted testing of all stool samples in the affected districts.

**Mozambique:** The MoH continues to conduct enhanced surveillance, case management, risk communication, WASH interventions in the affected provinces.

**Zimbabwe:** The MoH continues to sensitize health workers in the health facilities and communities to increase their index of suspicion for cholera cases and enhance risk communication through local radio stations. In addition, the cholera task force technical working group continues to coordinate the response activities.

## Measles in Africa

**9,342** confirmed case(s)  
**178,584** suspected case(s)  
**2,035** death(s) (**CFR: 1.1%**)

<b>Measles virus</b>	Agent/Pathogen	<b>06-Jan-2023</b>	First Reported by Africa CDC	<b>14-Jul-2023</b>	Previous Africa CDC Report:
<b>01-Jan-2023</b>	First Occurred	<b>Africa Combo</b>	Country	<b>22 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, 187,926 (9,342 confirmed; 178,584 suspected) and 2,035 deaths (CFR: 1.1%) of measles were reported from 22 AU MS: Botswana (13 cases; 0 deaths), Burundi (263; 0), Cameroon (8,227; 64), CAR (1,656; 0), Chad (8,017; 6), Congo (288; 1), DRC (135,151; 1,814), Ethiopia (12,939; 119), Gabon (12, 0) Ghana (212; 0), Kenya (9; 1), Libya (391; 2), Liberia (7,352; 8), Mali (1,318; 0), Mauritania (565; 4), Niger (944; 0), Senegal (410; 0), Somalia (6,827; 0), South Africa (745; 0), South Sudan (2,001; 14), Uganda (258; 1) and Zambia (328; 1). This week, a total of 2,980 new cases and 31 new deaths were reported from four MS: Cameroon, Ethiopia, Somalia and South Africa.

**Cameroon:** Since the last report (14 July 2023), the MoH reported 2,384 suspected cases and 30 deaths (CFR: 1.3%) of measles have been reported from Cameroon. This is a 103% increase in the number of new confirmed cases compared to the last report. Cumulatively, 8,227 cases (768 confirmed; 7,459 suspected) and 64 deaths (CFR: 0.7%) have been reported. The outbreak is active in 87 health districts in 10 regions.

**Ethiopia:** Since the last update (14 July 2023), the EPHI reported 128 new suspected cases and one new death (CFR: 0.8%) of measles. Cumulatively, 12,939 suspected cases and 119 deaths (CFR: 0.9%) have been reported. The outbreak is active in all regions of the country but 90% of the cases are from four regions (Somali, Oromia, Amhara and SNNP).

**Somalia:** Since the last update (7 July 2023), the MoH reported 468 new cases (30 confirmed; 438 suspected) of measles. This is a 9% decrease in the number of new cases compared to the last report. Cumulatively, 6,827 cases (77 confirmed; 6,750 suspected) and no deaths of measles have been reported. The most affected regions include Banadir (1,788), Bay (1,532) and Lower Juba (958). Seventy-three percent of the cases are children under five years.

**South Africa:** Since the last update (7 July 2023), the National Institute for Communicable Diseases (NICD) reported 19 new confirmed cases and no new deaths of measles from three provinces: Gauteng and Limpopo and KwaZulu-Natal. This is a 90% increase in the number of new confirmed cases compared to the last report. Cumulatively, 745 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:

**Cameroon:** The MoH continues to conduct enhanced surveillance, the integration of nutritional screening, and case management. In addition, the MoH continues to conduct the nationwide vaccination campaign, with seven districts having exceeded the 100% routine target since May 2023.

**Ethiopia:** The MoH continues to conduct enhanced surveillance, the integration of nutritional screening, and case management.

**Somalia:** The MoH continues to strengthen measles surveillance in the affected regions.

**South Africa:** The NICD continues to strengthen surveillance and laboratory testing of all suspected cases in all provinces.

## CCHF in Senegal

**3** confirmed case(s)

**1** death(s) (**CFR: 33.3%**)

<b>CCHF virus</b>	Agent/Pathogen	<b>03-May-2023</b>	First Reported by Africa CDC	<b>31-May-2023</b>	Previous Africa CDC Report:
<b>11-Jul-2023</b>	First Occurred	<b>Senegal</b>	Country	<b>Dakar region</b>	Location
<b>Local SitRep</b>	Source	<b>LOW</b>	GeoScope	<b>HIGH</b>	Risk Assessment

### Update to event:

On 12 July 2023, the MoH reported a confirmed outbreak of Crimean-Congo hemorrhagic fever (CCHF) in Yeumbeul district, Niayes region. The case was a 30-year-old-male who reported to the National Hospital Centre in Dalal Jamm on 7 July 2023. The initial symptoms which started on 3 July 2023 include fever, headache, joint pain, stomach pain, chest pain, and later progressed to nose bleeding and vomiting of blood. Blood samples collected on 9 July 2023 tested positive for CCHF at Institut Pasteur, Senegal. The last confirmed case of CCHF in Senegal was reported on 9 May 2023 from Louga region. Cumulatively, three cases and one death (CFR: 33%) of CCHF have been reported from three of 14 regions in Senegal since April 2023: Dakar (1 case; 1 death), Yeumbeul (1; 0) and Louga (1; 0).

### Response:

The MoH has constituted a multisectoral, multidisciplinary rapid response team to support the response activities. Additionally, 42 contacts have been identified and are being followed up.

## COVID-19 in Africa

**12,313,871** confirmed case(s)  
**257,157** death(s) (**CFR: 2.1%**)

<b>SARS-CoV-2</b>	Agent/Pathogen	<b>21-Feb-2020</b>	First Reported by Africa CDC	<b>23-Jun-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>MODERATE</b>	Risk Assessment

### Update to event:

As of 6 p.m. East African Time (EAT) 19 July 2023, a total of 12,313,871 COVID-19 cases and 257,157 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. 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 sub-variant, 17 Member States reported the Omicron sublineage (XBB.1.5), 12 MS reported the Omicron sublineage (BF.7 or BA.5.2.1.7), and 2 Member States have reported the Omicron sublineage (XBB.1.16).

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, 567.3 million people have been partially vaccinated, and 446 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 28 (10 - 16 July 2023), 1,828 new COVID-19 cases were reported, which is a 33% increase in the number of new cases reported compared to the previous week (27). The Eastern region accounted for 57% of the new COVID-19 cases reported this week, followed by the Southern (39%), Central (2%) and Northern (2%) regions. Zambia (5) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, 11 new COVID-19 deaths were reported in Africa. These deaths were reported from the Eastern (6) and Southern (5) region. No deaths were reported in the Central, Northern and Western regions last week.

More than 34 thousand tests were conducted during the past week. The weekly % test positivity decreased from 22% to 5% compared to the previous week. Since February 2020, over 127.7 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](#), [Vaccination Dashboard](#) and the Africa CDC COVID-19 brief [https://au.int/sites/default/files/documents/42763-doc-AfricaCDC\\_COVIDBrief\\_5May23\\_EN.pdf](https://au.int/sites/default/files/documents/42763-doc-AfricaCDC_COVIDBrief_5May23_EN.pdf)

## Polio (vacc) in Africa

**143** confirmed case(s)  
**0** death(s) (**CFR: 0%**)

<b>Polio virus (vaccine-</b>	Agent/Pathogen	<b>01-Jan-2023</b>	First Reported by Africa CDC	<b>14-Jul-2023</b>	Previous Africa CDC Report:
<b>01-Jan-2023</b>	First Occurred	<b>Africa Combo</b>	Country	<b>15 MS</b>	Location
<b>Global Polio Eradication</b>	Source	<b>MODERATE</b>	GeoScope	<b>MODERATE</b>	Risk Assessment

### 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 99 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 (18), Niger (1), Somalia (2) and Zambia (1). This week, five new cases of cVDPV2 were reported from Benin, CAR and Niger.

**Benin:** Since the last update (14 April 2023), the MoH reported one new confirmed case of cVDPV2. Cumulatively, three confirmed cases and no deaths of cVDPV2 have been reported.

**CAR:** Since the last update (19 May 2023), the MoH reported three new confirmed cases of cVDPV2 from RS4, RS6 and RS7 provinces. Cumulatively, ten confirmed cases and no deaths of cVDPV2 have been reported this year.

**Niger:** On 12 July 2023, the MoH reported one new confirmed case and no death of cVDPV2 from Maradi region. This is the first reported case of cVDPV2 from Niger. 14 confirmed cases and no deaths were reported in 2022.

### Response:

**Benin:** The MoH continues to improve surveillance and risk communication in all provinces.

**CAR:** The MoH continues to conduct enhanced surveillance in the affected communities.

**Niger:** The MoH continues to strengthen surveillance in the affected region



## Bacterial Meningitis in Mali

**6** confirmed case(s)

**44** suspected case(s)

**0** death(s) (**CFR: 0.0%**)

<b>Meningitis (Bacterial)</b>	Agent/Pathogen	<b>19-Jul-2023</b>	First Reported by Africa CDC	<b>16-Feb-2023</b>	Previous Africa CDC Report:
<b>03-Jan-2023</b>	First Occurred	<b>Mali</b>	Country	<b>2 regions</b>	Location
<b>Ministry of Health</b>	Source	<b>LOW</b>	GeoScope	<b>MODERATE</b>	Risk Assessment

### Update to event:

Since February 2022, the Mali MoH has reported 197 cases (155 suspected, 42 confirmed) with no deaths of bacterial meningitis from two regions in the country: Tombouctou, and Commune I. Of the 197 cases reported, forty-two (42) were positive for the following organisms: *Streptococcus pneumoniae* (32 samples), *Haemophilus influenzae* (3), and *Neisseria meningitidis* type C (7).

Meningitis is a serious infection of the meninges, the membranes covering the brain and spinal cord. The disease can be caused by many different pathogens including bacteria, fungi, or viruses, but the highest global burden is seen with bacterial meningitis. Several bacteria can cause meningitis, the most common being *Streptococcus pneumoniae*, *Haemophilus influenzae*, and *Neisseria meningitidis*. Transmission between people is most commonly through respiratory droplets from infected persons. The most common symptoms are neck stiffness, high grade fever, sensitivity to light, confusion, headaches, and vomiting. The last outbreak of bacterial meningitis recorded in Mali was in 2016 with 16 cases and no deaths.

### Response:

The MoH continues to strengthen surveillance in all the affected districts.

## Anthrax in Nigeria

**8** confirmed case(s)

**8** death(s) (**CFR: 100%**)

<b>Bacillus anthracis</b>	Agent/Pathogen	<b>18-Jul-2023</b>	First Reported by Africa CDC	<b>Initial Report</b>	Previous Africa CDC Report
<b>14-Jul-2023</b>	First Occurred	<b>Nigeria</b>	Country	<b>Niger state</b>	Location
<b>Ministry of Agriculture</b>	Source	<b>MODERATE</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment
<b>HIGH</b>	Animal Risk Assessment				

### Update to event:

On 17 July 2023, the Ministry of Agriculture (MoAg) reported a confirmed outbreak of anthrax with eight dead cattle (CFR:100%) in a farm located in Gajiri village, Suleja local government area of Niger state. The animals presented with bleeding from external orifices without blood clotting. The confirmatory test was conducted at the National Veterinary Research Institute, Plateau state. Human exposure has been reported, however, there are no reported cases or deaths among humans.

Anthrax is a zoonotic bacterial infection and can spread to humans through inhalation, handling, eating and drinking foods contaminated with bacterial spores. Clinical presentations may vary for cutaneous, inhalation, gastrointestinal and injection types of anthrax. The average CFR ranges from 20%-30% in cutaneous anthrax without antibiotic treatment and 25 - 75% for gastrointestinal anthrax, 80% or higher in inhalation anthrax.

### Response:

The MoAg deployed a One Health rapid response team to the affected state to support the response activities. In addition, the MoAg is conducting investigations to trace the source of infection and identify spread to other farms and humans. The MoAg has also instituted quarantine and movement control of domestic animals from the affected areas and continues to conduct risk communication activities. The MoAg and the Nigeria Centre for Disease Control and Prevention (NCDC) are working together to identify, isolate and follow up all exposed persons.

#### 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
- Marburg in Equatorial Guinea where CFR is calculated using confirmed, probable cases and deaths

\* 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.