Africa CDC Epidemic Intelligence Report
Date of Issue: 19 Jul 2024

Active Events: 159
New Events reported in 2024: 97
Events highlighted this week: 29
New events since last issue: 2

Events this Week
- CCHF VIRUS
- GORDYEBACTERIUM DIPHTHERIAE
- DENGE VIRUS
- HEPATITIS E VIRUS
- LASA VIRUS
- MEASLES VIRUS
- POLIO VIRUS (VACCINE-DERIVED)
- VIBRIO CHOLERAE
- YELLOW FEVER VIRUS

Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the African Union.

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Very High (New)</th>
<th>High (New)</th>
<th>Moderate (New)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human</td>
<td>0</td>
<td>11</td>
<td>18 (2)</td>
</tr>
<tr>
<td>Animal</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Environment</td>
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* represent AU Member States that are islands

Risk Level
## Event Summary

### New events since last issue

<table>
<thead>
<tr>
<th>Agent/Syndrome</th>
<th>Country</th>
<th>Risk:Human</th>
<th>Risk:Animal</th>
<th>Type</th>
<th>Suspected</th>
<th>Probable</th>
<th>Confirmed</th>
<th>Deaths</th>
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<tr>
<td>Dengue virus</td>
<td>Ghana</td>
<td>Mode...</td>
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<td>🌟</td>
<td>0</td>
<td>0</td>
<td>9</td>
<td>0</td>
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<tr>
<td>Hepatitis E virus</td>
<td>Central African Republic</td>
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<td>🏧</td>
<td>44</td>
<td>0</td>
<td>6</td>
<td>5</td>
</tr>
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<td>--------------------------------</td>
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<td>--------------</td>
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<tr>
<td><strong>CCHF virus</strong></td>
<td>Uganda</td>
<td>High</td>
<td>High</td>
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<td>0 (0)</td>
<td>4 (0)</td>
<td>7 (1)</td>
<td>3 (0)</td>
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<tr>
<td><strong>Corynebacterium diphtheriae</strong></td>
<td>Chad</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>1,307 (830)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>51 (34)</td>
</tr>
<tr>
<td><strong>Dengue virus</strong></td>
<td>Burkina Faso</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>23,207 (678)</td>
<td>6,608 (193)</td>
<td>0 (0)</td>
<td>47 (0)</td>
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<tr>
<td></td>
<td>Mali</td>
<td>Mode...</td>
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<td>4,595 (84)</td>
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<td>634 (3)</td>
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<td><strong>Hepatitis E virus</strong></td>
<td>Burkina Faso</td>
<td>Mode...</td>
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<td></td>
<td>158 (7)</td>
<td>0 (0)</td>
<td>9 (0)</td>
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<tr>
<td></td>
<td>Chad</td>
<td>Mode...</td>
<td>N/A</td>
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<td>3,182 (727)</td>
<td>0 (0)</td>
<td>114 (78)</td>
<td>10 (1)</td>
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<tr>
<td><strong>Lassa virus</strong></td>
<td>Nigeria</td>
<td>Mode...</td>
<td>Mode...</td>
<td></td>
<td>7,122 (102)</td>
<td>0 (0)</td>
<td>933 (5)</td>
<td>163 (1)</td>
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<tr>
<td><strong>Measles virus</strong></td>
<td>Burundi</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>13,803 (212)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>147 (10)</td>
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<tr>
<td></td>
<td>Cameroon</td>
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<td>1,300 (56)</td>
<td>0 (0)</td>
<td>603 (31)</td>
<td>38 (0)</td>
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<tr>
<td></td>
<td>Central African Republic</td>
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<td>2,159 (71)</td>
<td>0 (0)</td>
<td>617 (6)</td>
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<tr>
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<td>7,103 (138)</td>
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<td>849 (49)</td>
<td>27 (3)</td>
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<td>Congo Republic</td>
<td>Mode...</td>
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<td>299 (22)</td>
<td>0 (0)</td>
<td>53 (5)</td>
<td>3 (0)</td>
</tr>
<tr>
<td></td>
<td>Kenya</td>
<td>Mode...</td>
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<td>1,653 (84)</td>
<td>0 (0)</td>
<td>195 (0)</td>
<td>12 (0)</td>
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<tr>
<td></td>
<td>Mali</td>
<td>Mode...</td>
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<td>253 (6)</td>
<td>0 (0)</td>
<td>299 (2)</td>
<td>0 (0)</td>
</tr>
<tr>
<td></td>
<td>Mauritania</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>2,453 (15)</td>
<td>0 (0)</td>
<td>302 (15)</td>
<td>4 (0)</td>
</tr>
<tr>
<td></td>
<td>Morocco</td>
<td>Mode...</td>
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<td></td>
<td>5,744 (145)</td>
<td>0 (0)</td>
<td>3,121 (68)</td>
<td>28 (1)</td>
</tr>
<tr>
<td></td>
<td>Somalia</td>
<td>Mode...</td>
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<td>7,922 (173)</td>
<td>0 (0)</td>
<td>488 (27)</td>
<td>30 (4)</td>
</tr>
<tr>
<td><strong>Polio virus (vaccine-derived)</strong></td>
<td>Nigeria</td>
<td>Mode...</td>
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<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>31 (1)</td>
<td>0 (0)</td>
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<tr>
<td><strong>Vibrio cholerae</strong></td>
<td>Burundi</td>
<td>High</td>
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<td></td>
<td>625 (40)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>1 (0)</td>
</tr>
<tr>
<td></td>
<td>Comoros</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>10,312 (441)</td>
<td>149 (3)</td>
</tr>
<tr>
<td></td>
<td>Malawi</td>
<td>High</td>
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<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>286 (0)</td>
<td>5 (0)</td>
</tr>
<tr>
<td></td>
<td>Mozambique</td>
<td>High</td>
<td>N/A</td>
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<td>0 (0)</td>
<td>0 (0)</td>
<td>16,521 (18)</td>
<td>38 (0)</td>
</tr>
<tr>
<td></td>
<td>Nigeria</td>
<td>Mode...</td>
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<td></td>
<td>2,809 (1,230)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>82 (28)</td>
</tr>
<tr>
<td></td>
<td>Somalia</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>15,560 (466)</td>
<td>0 (0)</td>
<td>671 (9)</td>
<td>134 (2)</td>
</tr>
<tr>
<td></td>
<td>Tanzania</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>3,646 (143)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>63 (5)</td>
</tr>
<tr>
<td></td>
<td>Zambia</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>23,541 (1)</td>
<td>0 (0)</td>
<td>1,590 (0)</td>
<td>74 (0)</td>
</tr>
<tr>
<td><strong>Yellow fever virus</strong></td>
<td>South Sudan</td>
<td>Mode...</td>
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<td></td>
<td>127 (15)</td>
<td>0 (0)</td>
<td>3 (0)</td>
<td>6 (0)</td>
</tr>
</tbody>
</table>
Cholera in Africa

24,182 confirmed human case(s), 13 probable human case(s), 99,141 suspected human case(s)
1,895 human deaths (CFR: 1.54%)

Agent/Pathogen | Vibrio cholerae
First Occurred | 1-Jan-2024
Country | Multiple Countries
GeoScope | HIGH
Human Risk Assessment | HIGH

Update to Event:

Since the beginning of this year, a total of 123,336 cases (24,182 confirmed; 13 probable; 99,141 suspected) and 1,895 deaths (case fatality rate [CFR]: 1.54%) of cholera have been reported from 16 African Union (AU) Member States (MS): Burundi (625 cases; 1 death), Cameroon (434; 0), Comoros (10,312; 149), Democratic Republic of Congo [DRC] (20,697; 307), Ethiopia (17,796; 136), Kenya (278; 1), Malawi (261; 3), Mozambique (8,162; 17), Nigeria (2,809; 82), Somalia (16,231; 134), South Africa (150; 1), Sudan (2,408; 0), Tanzania (3,646; 63), Uganda (52; 3), Zambia (20,063; 612), and Zimbabwe (19,412; 386). This week, 2,350 new cases and 38 new deaths of cholera were reported from seven AU MS: Burundi, Comoros, Mozambique, Nigeria, Somalia, Tanzania and Zambia.

Burundi: Since the last update (12 July 2024), the Ministry of Health (MoH) reported 40 new suspected cases and no new deaths of cholera from Cibitoke and Bujumbura Nord districts. This is a 3% increase in the number of new cases compared to the last update. Cumulatively, 625 suspected cases and one death (CFR: 0.2%) of cholera have been reported from 13 of 45 health districts in Burundi this year. This is a protracted outbreak that started in January 2023.

Comoros: Since the last update (28 June 2024), the MoH reported 441 new confirmed cases and three new deaths (CFR: 0.7%) of cholera from three regions. Cumulatively, 10,312 confirmed cases and 149 deaths (CFR: 1.4%) of cholera have been reported from Mwali (581 cases; 8 deaths), Ndzuwani (9,098; 126), and Ngazidja (633; 15) regions.

Malawi*: On 10 July 2024, the MoH through the National Public Health Institute of Malawi declared the end of cholera outbreak in Malawi following no confirmation of cholera cases in the past four weeks. Cumulatively, 286 confirmed cases and three deaths (CFR: 1.1%) of cholera were reported from 15 of 29 districts in Malawi this year. The cholera outbreak started in November 2023. Since February 2022, a total of 59,376 cases and 1772 deaths (CFR: 3.0%) were reported from all 29 districts in Malawi.

Mozambique*: Since the last update (12 July 2024), the MoH reported 18 new confirmed cases and no new deaths of cholera from Nampula and Sofala provinces. This is a three fold increase in the number of new cases compared to the last update. Cumulatively, 8,162 confirmed cases and 17 deaths (CFR: 0.2%) of cholera have been reported from eight of ten provinces in Mozambique this year. This is a protracted outbreak that started in October 2023.

Nigeria: Since the last update (28 June 2024), the Nigeria Center for Disease Control (NCDC) reported 1,230 new suspected cases and 28 new deaths (CFR: 2.3%) of cholera from nine states. Cumulatively, 2,809 suspected cases and 82 deaths (CFR: 2.9%) of cholera have been reported from 33 of 36 states and the Federal Capital Territory. Three states: Lagos (1560 cases; 52 deaths), Bayelsa (476; 2) and Ebonyi (110; 1) account for 76% of all cases and 67% of all deaths reported. This is a protracted outbreak that started in April 2021.

Somalia: Since the last update (12 July 2024), the MoH reported 475 new cases (9 confirmed; 466 suspected) and two new deaths (CFR: 0.4%) of cholera from six states. This is a 26% increase in the number of new cases compared to the last update. Cumulatively, 16,231 cases (671 confirmed; 15,560 suspected) and 134 deaths (CFR: 0.8%) of cholera have been reported from all the seven states
in Somalia this year. Of the total cases, 59% were children <5 years. This is a protracted outbreak that started in 2022.

**Tanzania**: Since the last update (12 July 2024), the MoH reported 143 new suspected cases and five new deaths (CFR: 3.5%) of cholera from six regions. Cumulatively, 3,646 suspected cases and 63 deaths (CFR: 1.7%) of cholera have been reported from 18 of 31 regions in Tanzania this year. This is a protracted outbreak that started in September 2023.

**Zambia**: Since the last update (21 June 2024), the Zambia National Public Health Institute reported one new suspected case and no new deaths of cholera from Lusangazi district, Eastern province. Cumulatively, 20,063 cases (1,432 confirmed; 18,631 suspected) and 612 deaths (CFR: 3.1%) of cholera have been reported from all 10 provinces in Zambia this year. Of the total cases reported, 33% were cases <15 years. This is a protracted outbreak that started in October 2023.

**Note**: In 2023, a total of 241,317 cases (93,475 confirmed; 147,842 suspected) and 3,827 deaths (CFR: 1.6%) of cholera were reported from 19 AU MS: Burundi (1,396 cases; 9 deaths), Cameroon (21,269; 508), Congo (724; 14), DRC (41,351; 352), Eswatini (2; 0), Ethiopia (29,869; 426), Kenya (8,937; 148), Malawi (43,015; 1,262), Mozambique (41,248; 164), Nigeria (3,863; 128), Somalia (18,304; 46), South Africa (1,074; 47), Sudan (9,000; 245), South Sudan (1471; 2), Tanzania (821; 18), Togo (1; 0), Uganda (78; 10), Zambia (3,757; 88) and Zimbabwe (15,137; 333).

**Response by MS/partner/Africa CDC:**

The ministries of health in the affected MS continue to strengthen surveillance, case management and water, sanitation and hygiene practices in the affected areas.
Dengue fever in Africa

10,490 confirmed human case(s), 6,608 probable human case(s), 32,123 suspected human case(s)
63 human deaths (CFR: 0.13%)

Update to Event:

Since the beginning of this year, a total of 49,221 cases (10,490 confirmed; 6,608 probable; 32,123 suspected) and 63 deaths (CFR: 0.13%) of dengue fever have been reported from 13 AU MS: Burkina Faso (29,815 cases; 47 deaths), Cameroon (1; 0), Cabo Verde (1,205; 0), Chad (983; 0), Côte d’Ivoire (39; 0), Ethiopia (824; 0), Ghana (9; 0), Kenya (88; 0), Mali (5,229; 6), Mauritius (9,166; 8), Sao Tome and Principe (9; 0), Senegal (23; 0), and Sudan (1,830; 2). This week, 967 new cases and no new deaths of dengue fever were reported from Burkina Faso, Ghana and Mali.

Burkina Faso: Since the last update (12 July 2024), the MoH reported 871 new cases (678 suspected; 193 probable), and no new deaths of dengue fever from all 13 regions in Burkina Faso. This is a 29% increase in the number of new cases compared to the last update. Cumulatively, 29,815 cases (23,207 suspected; 6,608 probable) and 47 deaths (CFR: 0.2%) of dengue fever have been reported from all 13 regions in Burkina Faso this year. The central region accounted for 61% of all the cases and 40% of all deaths reported. This is a protracted outbreak that started in September 2023.

Ghana (Initial report): On 13 July 2024, the Ghana Health Services (GHS) reported nine confirmed cases and no deaths of dengue fever from the Eastern region. The cases were initially treated for malaria and provided standard supportive care for acute febrile illness. Blood samples were laboratory-confirmed using polymerase chain reaction at the Noguchi Memorial Institute for Medical Research.

Mali: Since the last update (12 July 2024), the MoH reported 87 new cases (3 confirmed; 84 suspected) and no new deaths of dengue fever from four regions. This is a 61% decrease in the number of new cases compared to the last report. Cumulatively, 5,229 cases (634 confirmed; 4,595 suspected) and six deaths (CFR: 0.1%) of dengue fever have been reported from 10 of the 11 regions in Mali. The Bamako region remains the epicentre of the epidemic, accounting for 25% of the confirmed cases. Two serotypes (DENV-1 and DENV-3) were detected among confirmed cases. This is a protracted outbreak that started in August 2023.

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.

Note: In 2023, a total of 280,218 cases (21,999 confirmed; 70,433 probable; 187,786 suspected) and 808 deaths (CFR: 0.3%) of dengue fever were reported from 18 AU MS: Angola (3 cases; 0 deaths), Benin (6; 1), Burkina Faso (242,425; 709); Cabo Verde (410; 0), Chad (1,581; 1), Côte d’Ivoire (3,895; 27); Egypt (576; 0), Ethiopia (21,469; 17), Ghana (18; 0), Guinea (6; 1), Mali (6,177; 34), Mauritius (265; 0), Niger (148; 0), Nigeria (84; 0), Sao Tome and Principe (1,227; 11), Senegal (254; 0), Sudan (1,664; 7), and Togo (8; 0).

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected areas.
CCHF in Uganda

7 confirmed human case(s)
4 probable human case(s)
3 human deaths (CFR: 42.86%)

<table>
<thead>
<tr>
<th>Agent/Pathogen</th>
<th>First Reported</th>
<th>Country</th>
<th>Previous Report Update</th>
<th>Location</th>
<th>Human Risk Assessment</th>
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<tbody>
<tr>
<td>CCHF virus</td>
<td>13-Feb-2024</td>
<td>Uganda</td>
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<td>4 districts</td>
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<td>First Occurred</td>
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<tr>
<td>Animal Risk Assessment</td>
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<td></td>
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</tr>
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</table>

Update to Event:

Since the last update, the MoH reported one new confirmed case and no new deaths of Crimean-Congo haemorrhagic fever (CCHF) from Masodde sub-county, Kyankwanzi district. Cumulatively, 11 cases (7 confirmed; 4 probable) of CCHF and three deaths (CFR: 42.86%) among confirmed cases and three deaths among probable cases have been reported from four of 146 districts: Kasese (1 case; 0 deaths), Kiruhura (4; 3), Kyankwanzi (1; 0) and Lyantonde (5; 3).

Response by MS/partner/Africa CDC:

The MoH activated the national public health emergency operations centre and deployed a rapid response team to conduct epidemiological investigations. In addition, the district continues to conduct contact follow-up, strengthen surveillance among human and animal populations; and intensify risk communication, community engagement, and social mobilization in the affected communities.
**Human Event Updates**

**Moderate Risk Events**

**Measles in Africa**

14,763 confirmed human case(s), 159,633 suspected human case(s)
2,268 human deaths (CFR: 1.30%)

### Update to Event:

Since the beginning of this year, a total of 174,396 cases (14,763 confirmed; 159,633 suspected) and 2,268 deaths (CFR: 1.30%) of measles have been reported from 27 AU MS: Burkina Faso (10,639 cases; 46 deaths), Burundi (13,803; 147), Cameroon (1,903; 38), Central African Republic [CAR (2,776; 3)], Côte d’Ivoire (7,856; 169), Chad (7,952; 27), Congo (352; 3), DRC (61,141; 1,465), Ethiopia (23,140; 192), Gabon (208; 1), Ghana (1,398; 0), Kenya (1,848; 12), Liberia (1,180; 0), Malawi (303; 0), Mali (552; 0), Mauritania (2,755; 4), Morocco (8,865; 28), Namibia (105; 0), Nigeria (7,842; 33), Niger (2,226; 13), Senegal (366; 0), Sierra Leone (67; 1), Somalia (8,410; 30), South Sudan (2,423; 41), Togo (628; 2), Uganda (2,011; 13), and Zambia (3,647; 0). This week, 1,125 new cases and 18 new deaths of measles were reported from ten AU MS: Burundi, Cameroon, CAR, Chad, Congo, Kenya, Mali, Mauritania, Morocco and Somalia.

**Burundi:** Since the last update (12 July 2024), the MoH reported 212 new suspected cases and 10 new deaths (CFR: 4.7%) of measles from 12 districts. This is a 31% decrease in the number of new cases compared to the last update. Cumulatively, 13,803 suspected cases and 147 deaths (CFR: 1.1%) of measles have been reported from 20 of 49 districts in Burundi. In 2023, the national measles vaccination coverage among children <2 years in Burundi was 81%.

**Cameroon:** Since the last update (5 July 2024), the MoH reported 87 new cases (31 confirmed; 56 suspected) and no new deaths of measles from 15 districts. Cumulatively, 1,903 cases (603 confirmed; 1,300 suspected) and 38 deaths (CFR: 2%) of measles have been reported from five regions in Cameroon. The outbreak is active in 15 health districts in three regions. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%.

**CAR:** Since the last update (27 June 2024), the MoH reported 77 new cases (6 confirmed; 71 suspected) and no deaths of measles from five regions. Cumulatively, 2,776 cases (617 confirmed; 2,159 suspected) and three deaths (CFR: 0.1%) of measles have been reported from five of seven regions in CAR. This is a protracted outbreak that started in January 2020. In 2022, the national measles vaccination coverage among children <5 years in CAR was 95%.

**Chad:** Since the last update (5 July 2024), the MoH reported 187 new cases (49 confirmed; 138 suspected) and three new deaths (CFR: 1.6%) of measles from eight provinces. Cumulatively, 7,952 cases (849 confirmed; 7,103 suspected) and 27 deaths (CFR: 0.3%) of measles have been reported from 17 of 23 provinces in Chad this year. This is a protracted outbreak that started in January 2023. In 2022, the national measles vaccination coverage among children <1 year in Chad was 33%.

**Congo:** Since the last update (5 July 2024), the MoH reported 27 new cases (5 confirmed; 22 suspected) and no new deaths of measles from three health districts. Cumulatively, 352 cases (53 confirmed; 299 suspected) and three deaths (CFR: 0.9%) of measles have been reported from six of 12 departments in Congo this year. This is a protracted outbreak that started in April 2022. In 2022, the national measles vaccination coverage among children <1 year in Congo was 65%.
Kenya: Since the last update (12 July 2024), the MoH reported 84 new suspected cases and no new deaths of measles from four counties actively reporting cases. Cumulatively, 1,848 cases (confirmed 195; 1,653 suspected) and 12 deaths (CFR: 0.6%) of measles have been reported from 10 counties in Kenya. In 2023, the national measles vaccination coverage among children <5 years in Kenya was 64%.

Mali: Since the last update (12 July 2024), the MoH reported eight new cases (2 confirmed; 6 suspected) and no new deaths of measles from three districts. This is a 33% decrease in the number of confirmed cases compared to the last report. Cumulatively, 552 cases (299 confirmed; 253 suspected) and no deaths of measles have been reported from 24 of 75 districts in Mali this year. This is a protracted outbreak that started in July 2023. In 2022, the national measles vaccination coverage among children <5 years in Mali was 99%.

Mauritania: Since the last update (5 July 2024), the MoH reported 30 new cases (15 confirmed; 15 suspected) and no new deaths of measles from four districts. Cumulatively, 2,755 cases (302 confirmed; 2,453 suspected) and four deaths (CFR: 0.1%) of measles have been reported from 50 of 63 districts in Mauritania this year. Children <5 years were mostly affected with an attack rate of 36.5/100,000 population. Additionally, 66% of cases between 9-59 months were not vaccinated against measles virus. This is a protracted outbreak that started in December 2022. In 2022, the national measles vaccination coverage among children <1 year in Mauritania was 72%.

Morocco: Since the last update (12 July 2024), the MoH reported 213 new cases (68 confirmed; 145 suspected) and one new death (CFR: 0.5%) of measles from 10 regions. This is a 34% decrease in the number of new cases compared to the last update. Cumulatively, 8,865 cases (3,121 confirmed; 5,744 suspected) and 28 deaths (CFR: 0.3%) of measles have been reported from all the 12 regions in Morocco this year. The overall attack rate was 23.7/100,000 population. This is a protracted outbreak that started in October 2023. In 2022, the national measles vaccination coverage among children <1 year in Morocco was 99%.

Somalia: Since the last update (12 July 2024), the MoH reported 200 new cases (27 confirmed; 173 suspected) and four new deaths (CFR: 2.0%) of measles from six states. This is an 8% decrease in the number of new cases compared to the last update. Of the new reported cases, 68% were children <5 years. Cumulatively, 8,410 cases (488 confirmed; 7,922 suspected) and 30 deaths (CFR: 0.4%) of measles have been reported from all seven states in Somalia this year. This is a protracted outbreak that started in March 2023. In 2023, the national measles vaccination coverage among children <2 years in Somalia was 23%.

Note: In 2023, a total of 638,942 cases (21,751 confirmed; 617,191 suspected) and 6,453 deaths (CFR: 1.0%) of measles were reported from 28 AU MS: Angola (6,203 cases; 53 deaths), Botswana (13; 0), Burkina Faso (1,701; 2), Burundi (1,150; 0), Cameroon (9,207; 75), CAR (2,873; 0), Chad (9,932; 8), Congo (631; 5), DRC (313,732; 5,855), Ethiopia (31,103; 242), Gabon (3,112; 0), Gambia (208; 0), Ghana (212; 0), Guinea (1,011; 2), Kenya (1,551; 24), Libya (391; 2), Liberia (8,501; 9), Malawi (32; 0), Mali (1,580; 0), Mauritania (924; 8), Mozambique (1,342; 0), Niger (1,690; 0), Senegal (4,534; 0), Somalia (12,642; 0), South Africa (967; 0), South Sudan (7,470; 166), Uganda (409; 1), and Zambia (8,029; 1).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to strengthen measles surveillance, case management, and supplementary immunization activities in the affected areas.
Yellow fever in Africa

23 confirmed human case(s), 5 probable human case(s), 473 suspected human case(s)
6 human deaths (CFR: 1.20%)

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Animal Risk Assessment | N/A

Update to Event:

Since the beginning of this year, a total of 501 cases (23 confirmed; 5 probable; 473 suspected) and six deaths (CFR: 1.20%) of yellow fever have been reported from six AU MS: CAR (37 cases; 0 deaths), Cameroon (8; 0), Congo (262; 0), Gabon (63; 0), South Sudan (130; 6), and Uganda (1; 0). This week, 15 new cases and no new deaths of yellow fever were reported from South Sudan.

**South Sudan:** Since the last update (19 April 2024), the MoH reported 15 new suspected cases and no new deaths of yellow fever from three counties in Western Equatoria state. Cumulatively, 130 cases (3 confirmed; 127 suspected) and six deaths (CFR: 5.0%) of yellow fever have been reported from seven counties in Western Equatoria State in South Sudan: Ezo (14 cases), Ibba (3), Maridi (3), Mvolo (3), Nzara (11), Tambura (26), and Yambio (70).

**Note:** In 2023, a total of 2,951 cases (156 confirmed; 2,795 suspected) and 45 deaths (CFR: 1.3%) of yellow fever were reported from eight AU MS: Cameroon (59 cases; 6 deaths), CAR (349; 6), Congo (389; 2), Gabon (128;0), Guinea (178; 4), Nigeria (1, 819; 21), South Sudan (17; 0) and Uganda (12; 0).

**Response by MS/partner/Africa CDC:**

**South Sudan:** The MoH continues to implement vector control and community engagement activities in the affected areas.
Diphtheria in Africa

6,911 confirmed human case(s)
7,065 suspected human case(s)
202 human deaths (CFR: 2.92%)

Update to Event:

Since the beginning of this year, a total of 13,976 cases (6,911 confirmed; 7,065 suspected) and 202 deaths (CFR: 2.92%) of diphtheria have been reported from five AU MS: Chad (1,307 cases; 51 death), Gabon (9; 0), Guinea (2,869; 17), Niger (746; 29), and Nigeria (9,045; 105). This week, 830 new cases and 34 new deaths of diphtheria were reported from Chad.

Chad: Since the last update (5 July 2024), the MoH reported 830 new suspected cases and 34 new deaths of diphtheria from four provinces. Cumulatively, 1,307 suspected cases and 51 deaths of diphtheria have been reported from four provinces in Chad this year. This is a protracted outbreak that started in August 2023. In 2019, the DPT1 vaccination coverage among children <1 year in Chad was 90%.

Note: In 2023, a total of 27,346 cases (13,879 confirmed; 13,467 suspected) and 797 deaths (CFR: 5.7%) of diphtheria were reported from six AU MS: Algeria (80 cases; 10 deaths), Guinea (2,676; 91), Mauritania (20; 6), Niger (2,198; 91), Nigeria (22,359; 578), and South Africa (13; 1).

Response by MS/partner/Africa CDC:

Chad: The MoH continues to conduct enhanced surveillance, case management, laboratory testing and risk communication activities in the affected areas.
Lassa fever in Africa

951 confirmed human case(s)
7,177 suspected human case(s)
169 human deaths (CFR: 17.77%)

Update to Event:

Since the beginning of this year, 8,128 cases (951 confirmed; 7,177 suspected) and 169 deaths (CFR: 17.77%) of Lassa fever have been reported from three AU MS: Guinea (27 cases; 2 deaths), Liberia (46; 4), and Nigeria (8,055; 163). This week, 107 new cases and one new death of Lassa fever were reported from Nigeria.

Nigeria: Since the last update (12 July 2024), the NCDC reported 107 new cases (5 confirmed; 102 suspected) and one new death (CFR: 0.9%) of Lassa fever from Ondo, Edo and Ebonyi states. This is an 15% decrease in the number of new cases compared to the last update. Cumulatively, 8,055 cases (933 confirmed; 7,122 suspected) and 163 deaths (CFR: 17.5%) of Lassa fever have been reported from 28 of 36 states and the Federal Capital Territory this year. This is a protracted outbreak that started in January 2021.

Note: In 2023, a total of 10,353 cases (1,266 confirmed; 9087 suspected) and 221 deaths (CFR: 17.4%) of Lassa fever were reported from five AU MS: Ghana (27 cases; 1 death), Guinea (133; 3), Liberia (186; 5), Nigeria (10,001; 210) and Sierra Leone (6;2).

Response by MS/partner/Africa CDC:

Nigeria: A national Lassa fever multi-partner, multi-sectoral technical working group continues to coordinate the response activities at all levels.
Polio virus (vaccine-derived) in Africa

76 confirmed human case(s)
0 human deaths (CFR: 0.00%)

Agent/Pathogen: Polio virus (vaccine-derived)
First Occurred: 1-Jan-2024
Source: Ministry of Health
Animal Risk Assessment: N/A

First Reported: 23-Feb-2024
Previous Report Update: 12-Jul-2024
Country: Multiple Countries
GeoScope: MODERATE
Location: 12 MS
Human Risk Assessment: MODERATE

Update to Event:

Since the beginning of this year, seven confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) have been reported from DRC (6 cases) and Mozambique (1). Sixty-nine confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported from 12 AU MS: Angola (5 cases), Benin (1), Chad (3), DRC (5), Ethiopia (7), Guinea (4), Kenya (1), Niger (3), Nigeria (31), Somalia (2), South Sudan (6), and Zimbabwe (1). This week, one new confirmed case of cVDPV2 was reported from Nigeria.

**Nigeria:** Since the last update (24 June 2024), the MoH reported one new confirmed case and no deaths of cVDPV2 from Katsina state. Cumulatively, 31 confirmed cases of cVDPV2 have been reported from nine of the thirty-six states and the federal capital territory: Adamawa (1 confirmed case), Bauchi (4), Jigawa (1), Kaduna (1), Kano (6), Katsina (10), Kwara (2), Kebbi (1) and Sokoto (5) states. In 2023, the national oral polio vaccination (OPV3) coverage among children < 1 year in Nigeria was 84%.

Response by MS/partner/Africa CDC:

**Nigeria:** The MoH in collaboration with Niger Republic and other partners conducted a synchronized supplemental immunization activity against cVDPV2 between 12 - 16 July 2024 in Niger Republic and Nigerian states bordering Niger Republic (Borno, Jigawa, Katsina, Kebbi, Sokoto, Yobe, and Zamfara states) aimed at interrupting the transmission of the virus between the two countries.
Hepatitis E virus in Africa

129 confirmed human case(s), 3,384 suspected human case(s)
18 human deaths (CFR: 0.51%)

Agent/Pathogen: Hepatitis E virus
First Occurred: 15-Jun-2024
Source: Ministry of Health
Animal Risk Assessment: N/A

First Reported: 21-Jun-2024
Country: Multiple Countries
GeoScope: MODERATE

Previous Report Update: 12-Jul-2024
Location: 3 M5
Human Risk Assessment: MODERATE

Update to Event:

Since the beginning of this year, a total of 3,513 cases (129 confirmed; 3,384 suspected) and 18 deaths (CFR: 0.51%) of hepatitis E have been reported from three AU MS: Burkina Faso (167 cases; 3 deaths), CAR (50; 5) and Chad (3,296; 10). This week, 862 new cases and six new deaths of hepatitis E were reported from Burkina Faso, CAR and Chad.

Burkina Faso: Since the last update (12 July 2024), the MoH reported seven new suspected cases and no deaths of hepatitis E from Pissillia district in Kaya region. This is a 73% decrease in the number of cases compared to the last update. Cumulatively, 167 cases (9 confirmed; 158 suspected) and three deaths (CFR: 2%) have been reported from 13 districts in the Kaya region with Pissillia district accounting for 66% of all the reported cases. Additionally 57% of the total cases were females and 52% were internally displaced persons.

CAR (Initial report): On 14 June 2024, the MoH reported an outbreak of viral hepatitis in Vakaga health district, SikiléDé health area. Since April 2024, the Vakaga health district had reported a series of cases of febrile jaundice. Blood samples were collected and tested at the Institut Pasteur de Bangui laboratory in Bangui. Six out of nine blood samples tested positive for hepatitis E virus (HEV) on 11 June 2024. As of 15 July 2024, a total of 50 cases (6 confirmed; 44 suspected) and five deaths (CFR: 10%) of hepatitis E have been reported in four health areas: Sikikédé, Birao, Am Dafok and Zinzir. Of the total cases, males accounted for 76%. HEV is endemic in CAR, particularly in the Bocaranga-Kouï health district, with 189 cases and four deaths recorded during the last outbreak in 2018.

Chad: Since the last update (5 July 2024), the MoH reported 805 new cases (78 confirmed; 727 suspected) and one death (CFR: 0.1%) of hepatitis E from Quaddafi, Sila and Wadi Fira provinces. Cumulatively, 3,296 cases (114 confirmed; 3,182 suspected) and 10 deaths (CFR: 0.3%) of hepatitis E have been reported from three provinces in Chad this year. In addition, 55% of the cases were males and children <4 years accounted for 31% of the confirmed cases.

Hepatitis E is a liver disease caused by the hepatitis E virus and typically presents as acute jaundice. In most people, HEV infection results in a self-limited, acute illness. However, acute infection can become chronic in rare cases, primarily in people who have received solid-organ transplants. HEV is typically transmitted by the fecal-oral route. Prevention includes good sanitation and the availability of clean drinking water. People living in crowded camps or temporary housing, including refugees and internally displaced persons, are at particularly high risk.

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS continue to conduct enhanced surveillance, case management, laboratory testing and risk communication activities in the affected areas.
The number of cholera cases listed in the event summary section in the table of events highlighted this week reflects the cumulative number of cases since the beginning of that particular outbreak.

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

CFR are calculated using confirmed cases and deaths only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever where CFR is calculated using all cases and deaths.

The GeoScope level is determined by where the event is currently occurring on the continent. Low: The event is limited to sub-national areas within one MS; Moderate: The event is affecting multiple countries within an AU region or has been imported from/exported to 1-2 countries from another global region; High: The 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 of 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 or very high depending on how they score on the above criteria.