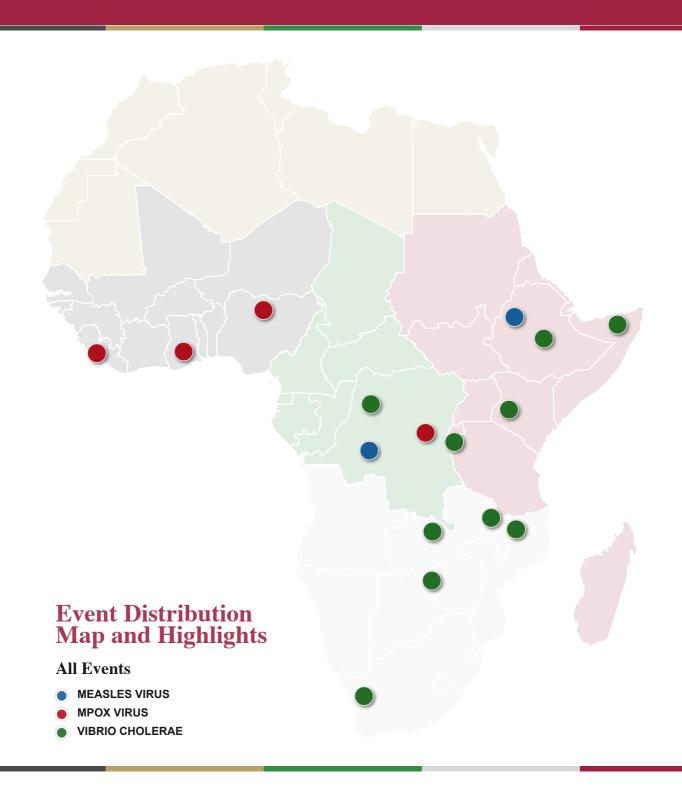




Africa CDC Weekly Event Based Surveillance Report

18-Jun-2023



Human Event Updates





High Risk Events

Cholera in Africa

79,947 confirmed case(s) 55,253 suspected case(s) 2,131 death(s) (CFR: 1.6%)

Vibrio	Agent/Pathogen	06-Jan-2023	First Reported	09-Jun-2023	Previous Africa
cholerae			by Africa CDC		CDC Report:
01-Jan-2023	First Occurred	Africa	Country	15 MS	Location
		Combo			
Ministry of	Source	MODERATE	GeoScope	HIGH	Risk

Update to event:

Since the beginning of this year, 135,200 cases (79,947 confirmed; 55,253 suspected) and 2,131 deaths (CFR: 1.6%) of cholera were reported from 15 AU MS: Burundi (491 cases; 8 death), Cameroon (1,938; 312), Democratic Republic of Congo (DRC) (23,513; 138), Eswatini (2; 0), Ethiopia (9,869; 137), Kenya (7,841; 129), Malawi (42,769; 1,253), Mozambique (32,428; 141), Nigeria (1,336; 79), Somalia (9,768; 28), South Africa (368; 31), South Sudan (1,471; 2), Tanzania (87; 3), Zambia (756; 13) and Zimbabwe (2,563; 65).

This week, 24,627 new cases and 208 new deaths of cholera were reported from eight AU MS: Ethiopia, Kenya, Malawi, Mozambique, Somalia, South Africa, Zambia and Zimbabwe.

Ethiopia: Since the last update (7 February 2023), the Ethiopia Public Health Institute (EPHI) reported 9,624 new cases (26 confirmed; 9,598 suspected) and 126 new deaths (CFR: 1.3%) of cholera. Cumulatively, 9,869 cases (26 confirmed; 9,843 suspected) and 137 deaths (CFR: 1.4%) were reported from Ethiopia. The outbreak is active in four regions (Oromia, SNNP, Sidama and Somali).

Kenya: Since the last update (9 June 2023), the Ministry of Health (MoH) reported 158 new cases (60 confirmed; 98 suspected) and three new deaths (CFR: 1.9%) of cholera. This is a 29% decrease in the number of new cases and a 25% decrease in the number of new deaths reported compared to the last report. Cumulatively, 7,841 cases (1,599 confirmed; 6,242 suspected) and 129 deaths (CFR: 1.6%) were reported from 20 of 47 counties across the country. Garissa, Mandera and Nairobi counties account for 62% of the total cases and 48% of the total deaths reported to date.

Malawi: Since the last update (9 June 2023), the MoH reported 34 new confirmed cases and no new deaths of cholera from 9 of 29 districts. Cumulatively, 42,769 confirmed cases and 1,253 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year.

Mozambique: Since the last update (9 June 2023), the MoH reported 428 new confirmed cases and no death of cholera. This is a 5% increase in the number of new confirmed cases compared to the last report. Cumulatively, 32,428 confirmed cases and 141 deaths (CFR: 0.4%) have been reported from 10 of 11 provinces this year.

Somalia: Since the last update (7 June 2023), the MoH reported 377 new suspected cases and no new death of cholera. This is a 7% decrease in the number of new cases compared to the last report. Cumulatively, 9,768 cases (25 confirmed; 9,743 suspected) and 28 deaths (CFR: 0.3%) were reported from 32 drought-affected districts in the country. Of the 9,768 cases, 55% are children under five years and 51% are females. This outbreak has been uninterrupted in the drought-affected districts since 2022 and in the Banadir region since 2017 and can be attributed to lack of access to safe water and proper sanitation.

South Africa: Since the last update (2 June 2023), the Gauteng Provincial Department of Health reported 166 new cases (42 confirmed; 124 suspected) with 2 deaths (CFR: 1.2%) of cholera. This is a 198% increase in the number of new confirmed cases compared to the last report. There is no documented evidence of spread from neighbouring countries with ongoing cholera outbreaks. Cumulatively, 368 cases (166 confirmed; 202 suspected) and 31 deaths (CFR: 8.4%) have been reported from 5 of 9 provinces this year.

Zambia: Since the last update (2 June 2023), the Zambia National Public Health Institute (ZNPHI) reported 26 new cases (11 confirmed; 15 suspected) and no new death from cholera. This is a 38% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 756 cases (305 confirmed; 451 suspected) and 13 deaths (CFR: 1.7%) have been reported from 10 of 116 districts this year.

Zimbabwe: Since the last update (9 June 2023), the MoH reported 331 new cases (74 confirmed; 257 suspected) and thirteen new deaths (CFR: 3.9%) from cholera. This is a 4% increase in the number of new confirmed cases and a 63% increase in the number of new deaths compared to the last report. Cumulatively, 2,563 cases (628 confirmed; 1,935 suspected) and 65 deaths (CFR: 2.5%) have been reported in all 10 provinces this year.

Response:

Ethiopia: In response to the outbreak, the EPHI has achieved a 97% oral cholera vaccine (OCV) coverage in Oromia and Somali regions. In addition, active case management at 80 cholera treatment centres (CTCs) and water, sanitation and hygiene interventions are ongoing in the affected regions.

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

Malawi: The MoH continues to intensify response efforts in all affected district

Mozambique: The MoH continues to intensify response efforts in all affected provinces

South Africa: The Gauteng provincial, district and municipality response teams continue to conduct advocacy in affected communities.

Somalia: The MoH continues to conduct active case search, sample collection and case management at the 12 designated cholera treatment centers in the affected regions. In addition, the MoH with support from partners has scaled up activities around water, sanitation and hygiene (WASH), as well as risk communication and community sensitization in the drought affected districts, focusing on Jubaland State, the current epicentre of the outbreak.

Zambia: ZNPHI has developed a six months contingency plan to enhance surveillance across the whole country with specific focus on high risk districts and cross border communities.

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

Measles in Africa

4,443 confirmed case(s) 150,798 suspected case(s) 1,956 death(s) (CFR: 1.3%)

Measles	Agent/Pathogen	06-Jan-2023	First Reported	09-Jun-2023	Previous Africa
virus			by Africa CDC		CDC Report:
01-Jan-2023	First Occurred	Africa	Country	18 MS	Location
		Combo			
Ministry of	Source	MODERATE	GeoScope	HIGH	Risk
Health					Assessment

Update to event:

Since the beginning of this year, 155,241 cases (4,443 confirmed; 150,798 suspected) and 1,956 deaths (CFR: 1.3%) of measles were reported from 18 AU MS: Burundi (132:0), Botswana (13 cases; 0), Cameroon (1,985; 3), Central Africa Republic (CAR) (1,287; 0), Chad (1,303; 2), Congo (260; 1), DRC (135,151; 1,814), Ethiopia (10,224; 113), Ghana (212; 0), Kenya (9; 1), Libya (391; 2), Mali (94; 0), Mauritania (538; 4), Senegal (380; 0), South Africa (675: 0), South Sudan (2,001; 14), Uganda (258; 1) and Zambia (328; 1).

This week, a total of 22,358 new cases and 281 new deaths have been reported from DRC and Ethiopia.

DRC: Since the last update (11 June 2023), the MoH reported 13,041 cases (1,764 confirmed; 11,277 suspected) and 168 deaths (CFR: 1.3%) of measles. Cumulatively, 135,151 suspected cases and 1,814 deaths (1.3%) have been reported from 419 health zones in the country's 26 provinces. The majority of cases were reported from North Kivu, South Kivu and Lomamoi provinces.

Ethiopia: Since the last update, (1 March 2023), the EPHI reported 9,317 suspected cases and 11 new deaths (CFR: 0.1%) of measles. Cumulatively, 10,224 suspected cases and 113 deaths (CFR: 1.1%) have been reported from Ethiopia. The outbreak is active in all regions of the country but 89% of the cases are from four regions (Somali, Oramia, Amhara and SNNP).

Response:

DRC: Beginning in July 2023, the Ministry of Health is planning to launch a nationwide measles vaccination campaign, targeting over 17 million children under the age of five.

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

COVID-19 in Africa

12,304,134 confirmed case(s) 257,103 death(s) (CFR: 2.1%)

SARS-CoV-2	Agent/Pathogen	21-Feb-2020	First Reported by Africa CDC	09-Jun-2023	Previous Africa CDC Report:
14-Feb-2020	First Occurred	Africa Combo	Country	All 55 MS	Location
Ministry of Health	Source	VERY HIGH	GeoScope	MODERATE	Risk Assessment

Update to event:

As of 6 p.m. East African Time (EAT) 15 June 2023, a total of 12,304,134 COVID-19 cases and 257,103 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 are now reporting 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, 549 million people have been partially vaccinated, and 433.4 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 23 (5 - 11 June 2023), 2,360 new COVID-19 cases were reported, which is a 45% increase in the number of new cases reported compared to the previous week (22). The Western region accounted for 55% of the new COVID-19 cases reported this week, followed by the Southern (27%), Central (8%), Northern (6%) and Eastern (4%) regions. Cabo Verde (110) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, 9 new COVID-19 deaths were reported in Africa, which is a 25% decrease in new deaths reported compared to the previous week. The Southern region accounted for 67% of the new COVID-19 deaths reported this week, followed by the Northern (33%). No deaths were reported in the Central, Eastern and Western regions this week.

More than 22 thousand tests were conducted during the past week, reflecting a 29% decrease in the number of tests compared to the previous week. The weekly % test positivity increased from 5% to 11% compared to the previous week. Since February 2020, over 127.9 million COVID-19 tests have been conducted in Africa. Africa CDC COVID-19 vaccine dashboard.

Response:

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, https://au.int/sites/default/files/documents/42763-doc-AfricaCDC COVIDBrief 5May23 EN.pdf

Mpox in Africa

4,501 confirmed case(s) **246** death(s) **(CFR: 5.5%)**

Mpox virus	Agent/Pathogen	17-Jan-2023	First Reported by Africa CDC	09-Jun-2023	Previous Africa CDC Report:
01-Jan-2023	First Occurred	Africa Combo	Country	5 MS	Location
Ministry of Health	Source	VERY HIGH	GeoScope	MODERATE	Risk Assessment

Update to event:

Since the beginning of this year, 4,501 confirmed cases and 246 deaths (CFR: 12.4%) of mpox have been reported from five endemic AU MS: CAR (14 confirmed cases; 1 death), DRC (4,389; 243), Ghana (11; 0), Liberia (8; 0) and Nigeria (79; 2).

This week, four new confirmed cases and 220 new deaths of mpox were reported from Ghana, Liberia and Nigeria.

Liberia: Since the last update (12 May 2023), the National Public Health Institute of Liberia (NPHIL) reported one new confirmed case and no new deaths of mpox. Cumulatively eight confirmed and no death of monkeypox have been reported from seven of the 15 counties; Bomi, Rivercess, Grand Cape Mount, Gbarpolu, Lofa, Nimba, and Sinoe.

Ghana: Since the last update (19 May 2023), the Ghana Health Services (GHS) reported two new confirmed cases and no new deaths of mpox. Cumulatively, 11 confirmed cases and no death of mpox were reported from seven of the 16 regions in the country.

Nigeria: Since the last update (19 May 2023), the Nigeria Centre for Disease Control (NCDC) reported five new confirmed cases and no new death from mpox. Cumulatively, 79 confirmed cases and two deaths (CFR: 2.5%) of mpox have been reported from 18 of the 36 states and federal capital territory this year. Additionally, of all the confirmed cases reported in 2023, males account for 67% (53 cases), and age groups 21 – 50 years account for 71% (56 cases).

DRC: Since the last report, the national committee of response coordination against epidemics of DRC reported 4291 new confirmed cases and 220 new deaths (CFR: 5.1%) of mpox due to a batch report from 11 regions in the country. Cumulatively, 4,389 confirmed cases and 243 deaths of mpox were reported from seven of the 20 regions in DRC.

Note: In 2022, the continent reported 1,231 confirmed cases and 220 deaths (CFR: 18%) of mpox from eight endemic AU MS: Benin (3 cases; 0 deaths), Cameroon (18; 3), CAR (13; 3), Congo (5; 3), Democratic Republic of Congo (DRC) (319; 198), Ghana (116; 4), Liberia (5; 0), Nigeria (763; 7) and five non-endemic MS: Egypt (4; 0), Morocco (3; 0), Mozambique (1; 1), South Africa (5; 0) and Sudan (18; 1).

Response:

Ghana: The GHS continues to strengthen surveillance at all levels to detect more cases.

Liberia: The NPHIL continues to conduct active case searches in affected counties. Additionally risk communication is ongoing in all affected communities

Nigeria: The NCDC through the multi-sectoral technical working group continues to coordinate the following response activities: surveillance, case management, risk communication and laboratory diagnosis in all the affected states.

DRC: The coordination meeting is held every week. Monitoring of the epidemiological situation of the DPSs and active participation in the CNC meeting are done on a regular basis

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.
- * The new cases of cholera reported in Somalia are likely due to batch reporting.