Africa CDC Epidemic Intelligence Report
Date of Issue: 22 Jun 2024

Active Events: 151
New Events reported in 2024: 89
Events highlighted this week: 32
New events since last issue: 2

Events this Week:
- Corynebacterium diptheriae
- Dengue Virus
- Hepatitis E Virus
- Measles Virus
- MPOX Virus
- Polio Virus (Vaccine-Derived)
- Vibrio Cholerae
- Yellow Fever Virus

* Indicates AU Member States that are islands

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>15</td>
<td>17 (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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</tbody>
</table>
## 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>
</tr>
</thead>
<tbody>
<tr>
<td>Dengue virus</td>
<td>Cabo Verde</td>
<td>N/A</td>
<td>N/A</td>
<td>🚨</td>
<td>643</td>
<td>0</td>
<td>562</td>
<td>0</td>
</tr>
<tr>
<td>Hepatitis E virus</td>
<td>Burkina Faso</td>
<td>N/A</td>
<td>N/A</td>
<td>🚨</td>
<td>53</td>
<td>0</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>------------------------</td>
<td>---------------------</td>
<td>------------</td>
<td>-------------</td>
<td>----------</td>
<td>----------------</td>
<td>----------------</td>
<td>-----------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Corynebacterium diphtheriae</td>
<td>Gabon</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>7 (3)</td>
<td>0 (0)</td>
<td>2 (0)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Guinea</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>5,272 (72)</td>
<td>0 (0)</td>
<td>56 (9)</td>
<td>108 (0)</td>
</tr>
<tr>
<td>Dengue virus</td>
<td>Burkina Faso</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>20,735 (413)</td>
<td>5,983 (108)</td>
<td>0 (0)</td>
<td>46 (0)</td>
</tr>
<tr>
<td>Mali</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>4,155 (39)</td>
<td>0 (0)</td>
<td>629 (3)</td>
<td>6 (1)</td>
</tr>
<tr>
<td>Hepatitis E virus</td>
<td>Chad</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>2,405 (938)</td>
<td>0 (0)</td>
<td>36 (0)</td>
<td>9 (4)</td>
</tr>
<tr>
<td>Measles virus</td>
<td>Burundi</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>12,371 (979)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>132 (11)</td>
</tr>
<tr>
<td>Cameroon</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>1,022 (204)</td>
<td>0 (0)</td>
<td>504 (204)</td>
<td>121 (0)</td>
</tr>
<tr>
<td>Chad</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>6,734 (114)</td>
<td>0 (0)</td>
<td>64 (0)</td>
<td>23 (0)</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>High</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>54,263 (2,152)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>1,323 (74)</td>
</tr>
<tr>
<td>Mauritania</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>2,376 (65)</td>
<td>0 (0)</td>
<td>287 (2)</td>
<td>4 (0)</td>
</tr>
<tr>
<td>Morocco</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>5,116 (234)</td>
<td>0 (0)</td>
<td>2,753 (131)</td>
<td>19 (1)</td>
</tr>
<tr>
<td>Senegal</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>345 (36)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Somalia</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>7,058 (181)</td>
<td>0 (0)</td>
<td>395 (36)</td>
<td>23 (0)</td>
</tr>
<tr>
<td>Togo</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>429 (55)</td>
<td>0 (0)</td>
<td>199 (32)</td>
<td>2 (1)</td>
</tr>
<tr>
<td>Mpox virus</td>
<td>Congo Republic</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>114 (24)</td>
<td>0 (0)</td>
<td>19 (0)</td>
<td>1 (1)</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>High</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>7,599 (597)</td>
<td>0 (0)</td>
<td>1,135 (0)</td>
<td>408 (11)</td>
</tr>
<tr>
<td>South Africa</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>7 (2)</td>
<td>2 (1)</td>
</tr>
<tr>
<td>Polio virus (vaccine-derived)</td>
<td>Democratic Republic of the Congo</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>7 (0)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Niger</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>2 (1)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Nigeria</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>30 (3)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>South Sudan</td>
<td></td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>5 (1)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Vibrio cholerae</td>
<td>Burundi</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>513 (32)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Cameroon</td>
<td></td>
<td>High</td>
<td>Mode...</td>
<td></td>
<td>396 (258)</td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>Comoros</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>9,370 (491)</td>
<td>141 (8)</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>High</td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>19,171 (736)</td>
<td>0 (0)</td>
<td>487 (0)</td>
<td>296 (3)</td>
</tr>
<tr>
<td>Mozambique</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>0 (0)</td>
<td>0 (0)</td>
<td>16,440 (37)</td>
<td>38 (22)</td>
</tr>
<tr>
<td>Somalia</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>13,739 (573)</td>
<td>0 (0)</td>
<td>650 (2)</td>
<td>123 (1)</td>
</tr>
<tr>
<td>Zambia</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>366 (22)</td>
<td>0 (0)</td>
<td>1 (0)</td>
<td>74 (0)</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td></td>
<td>High</td>
<td>N/A</td>
<td></td>
<td>30,310 (0)</td>
<td>0 (0)</td>
<td>4,217 (281)</td>
<td>710 (0)</td>
</tr>
<tr>
<td>Yellow fever virus</td>
<td>Congo Republic</td>
<td>Mode...</td>
<td>N/A</td>
<td></td>
<td>220 (24)</td>
<td>4 (0)</td>
<td>10 (2)</td>
<td>0 (0)</td>
</tr>
</tbody>
</table>
Human Event Updates

## Cholera in Africa

**23,036** confirmed human case(s), **13** probable human case(s), **93,801** suspected human case(s)

**1,804** human deaths (CFR: 1.54%)

<table>
<thead>
<tr>
<th>Agent/Pathogen</th>
<th>First Reported</th>
<th>Previous Report Update</th>
<th>Source</th>
<th>First Occurred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vibrio cholerae</td>
<td>1-Jan-2024</td>
<td>16 M5</td>
<td>Ministry of Health</td>
<td>1-Jan-2024</td>
</tr>
<tr>
<td>Location</td>
<td>Animal Risk Assessment</td>
<td>GeoScope</td>
<td>HIGH</td>
<td></td>
</tr>
</tbody>
</table>

### Update to Event:

Since the beginning of this year, a total of 116,880 cases (23,036 confirmed; 13 probable; 93,831 suspected) and 1,777 * deaths (case fatality rate [CFR]: 1.52%) of cholera have been reported from 16 African Union (AU) Member States (MS): Burundi (513 cases; 1 death), Cameroon (396; 0)*, Comoros (9,370; 141), Democratic Republic of Congo [DRC] (19,658; 296), Ethiopia (17,796; 136), Kenya (265; 1), Malawi (261; 3), Mozambique (8,079; 17), Nigeria (882; 16), Somalia (14,369; 123), South Africa (150; 1), Sudan (2,408; 0), Tanzania (3,197; 42), Uganda (52; 3), Zambia (20,059; 612), and Zimbabwe (19,405; 385).

This week, 2,227 new cases and 15 new deaths of cholera were reported from eight AU MS: Burundi, Cameroon, Comoros, DRC, Mozambique, Somalia, Zambia, and Zimbabwe.

**Burundi**: Since the last update (14 June 2024), the Ministry of Health (MoH) reported 32 new suspected cases and no new deaths of cholera from four districts. This is a 3% decrease in the number of new cases compared to the last update. Cumulatively, 513 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.

**Cameroon**: Since the last update (9 February 2024), the MoH reported 258 new suspected cases and no new deaths of cholera. Cumulatively 396 suspected cases and no deaths of cholera have been reported from two of 10 regions in Cameroon. The outbreak is active in 10 health districts in Centre and Littoral regions.

**Comoros**: Since the last update (14 June 2024), the MoH reported 491 new confirmed cases and eight new deaths (CFR: 1.6%) of cholera from three regions. This is a 27% decrease in the number of new cases reported compared to the last update. Cumulatively, 9,370 confirmed cases and 141 deaths (CFR: 1.5%) of cholera have been reported from Mwali (546 cases; 6 deaths), Ndzuwani (8,204; 120), and Ngazidja (620; 15) regions.

**DRC**: Since the last update (14 June 2024), the MoH reported 796 new suspected cases and three new deaths (CFR: 0.4%) of cholera from nine provinces. This is a 10% decrease in the number of new cases reported compared to the last update. Cumulatively, 19,658 cases (487 confirmed; 19,171 suspected) and 296 deaths (CFR: 1.5%) of cholera have been reported from 14 of 26 provinces in DRC this year. This is a protracted outbreak that started in March 2022.

**Mozambique**: Since the last update (14 June 2024), the MoH reported 37 new confirmed cases and no new deaths of cholera from eight provinces. This is a 64% decrease in the number of new cases compared to the last update. Cumulatively, 8,079 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.

**Somalia**: Since the last update (14 June 2024), the MoH reported 575 new cases (2 confirmed; 573 suspected) and one new death (CFR: 0.2%) of cholera from six states. This is a 21% decrease in the number of new cases compared to the last update. Cumulatively, 14,389 cases (650 confirmed; 13,739 suspected) and 123 deaths (CFR: 0.9%) of cholera have been reported from six of seven states in Somalia this year. Of the total cases, 59% were children <5 years. This is a protracted outbreak that started in 2022.

**Zambia**: Since the last update (14 June 2024), the Zambia National Public Health Institute reported 22 new suspected cases and no new deaths of cholera from two districts. This is an 86% decrease in the number of new cases compared to the last update. Cumulatively, 20,059 cases (1,432 confirmed; 18,627 suspected) and 612 deaths (CFR: 3.0%) of cholera have been reported from all 10 provinces in Zambia this year. Of the total cases reported, 33% were children <15 years. This is a protracted outbreak that started in October 2023.
Zimbabwe: Since the last update (14 June 2024), the MoH reported 16 new suspected cases and three new deaths (CFR: 18.7%) of cholera. This is more than a 15 fold decrease in the number of new cases compared to the last update. Cumulatively, 19,405 cases (2,458 confirmed; 16,947 suspected) and 385 deaths (CFR: 2.0%) of cholera have been reported from 61 of 64 districts in Zimbabwe this year. This is a protracted outbreak that started in February 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 to implement water, hygiene and sanitation interventions in the affected areas.
Dengue fever in Africa

9,762 confirmed human case(s), 5,983 probable human case(s), 29,211 suspected human case(s)
62 human deaths (CFR: 0.14%)

Update to Event:

Since the beginning of this year, a total of 44,956 cases (9,762 confirmed; 5,983 probable; 29,211 suspected) and 62 deaths (CFR: 0.14%) of dengue fever have been reported from 11 AU MS: Burkina Faso (26,718 cases; 46 deaths), Cameroon (1; 0), Cabo Verde (1,205; 0), Chad (983; 0), Ethiopia (824; 0), Kenya (88; 0), Mali (4,784; 6), Mauritius (8,491; 8), Sao Tome and Principe (8; 0), Senegal (23; 0), and Sudan (1,830; 2).

This week, 1,768 new cases and one new death from dengue fever were reported from Burkina Faso, Cabo Verde and Mali.

**Burkina Faso**: Since the last update (14 June 2024), the MoH reported 521 new cases (413 suspected; 108 probable), and no new deaths of dengue fever from all 13 regions in Burkina Faso. This is an 18% decrease in the number of new cases compared to the last update. Cumulatively, 26,718 cases (20,735 suspected; 5,983 probable) and 46 deaths (CFR: 0.2%) of dengue fever have been reported from all 13 regions in Burkina Faso this year. Two regions: Center (16,214 cases; 18 deaths), and Haut Bassins (2,950; 10) accounted for 72% of all the cases and 61% of all deaths reported. This is a protracted outbreak that started in September 2023.

**Cabo Verde (initial report)**: Since the beginning of this year, the MoH reported 1,205 cases (562 confirmed; 643 suspected) and no deaths of dengue fever from nine islands. This is a protracted outbreak that started in November 2023 with an overall total of 1,422 cases (755 confirmed; 667 suspected) and no deaths reported from nine of the ten Islands. Of the total cases, 52% were females and 22% were persons aged 10-19 years. The most predominant dengue serotype in this outbreak is VDEN-3 although few cases of VDEN-1 have also been reported.

**Mali**: Since the last update (14 June 2024), the MoH reported 42 new cases (3 confirmed; 39 suspected) and one new death (CFR: 2.4%) of dengue fever from two regions. This is a 7.6% increase in the number of new cases compared to the last report. Cumulatively, 4,784 cases (629 confirmed; 4,155 suspected) and six deaths (CFR: 0.1%) of dengue fever have been reported from all ten regions in Mali. The Bamako region remains the epicenter of the epidemic with 27% confirmed cases. Two serotypes (VDEN-1 and VDEN-3) were detected among confirmed cases. This is a protracted outbreak that started in August 2023.

**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), Cote divoire (3,895; 27), Egypt (578; 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.
Human Event Updates

Moderate Risk Events

Measles in Africa

12,469 confirmed human case(s), 145,506 suspected human case(s)
2,170 human deaths (CFR: 1.37%)

Update to Event:

Since the beginning of this year, a total of 157,975 cases (12,469 confirmed; 145,506 suspected) and 2,170 deaths (CFR: 1.37%) of measles have been reported from 27 AU MS: Burkina Faso (10,639 cases; 46 deaths), Burundi (12,371; 132), Cameroon (1,528; 121), Central African Republic [CAR (1,939; 3)], Côte d'Ivoire (6,372; 169), Chad (6,798; 23), Congo (249; 3), DRC (54,263; 1,323), Ethiopia (23,140; 192), Gabon (191; 0), Ghana (1,398; 0), Kenya (1,463; 11), Liberia (964; 0), Malawi (303; 0), Mali (518; 0), Mauritania (2,063; 4), Morocco (7,869; 19), Namibia (105; 0), Nigeria (7,842; 33), Niger (2,226; 13), Senegal (345; 0), Sierra Leone (67; 1), Somalia (7,453; 23), South Sudan (2,423; 41), Togo (628; 2), Uganda (966; 11), and Zambia (3,254; 0).

This week, 4,425 new cases and 87 new deaths of measles were reported from nine AU MS: Burundi, Cameroon, Chad, DRC, Mauritania, Morocco, Senegal, Somalia, and Togo.

Burundi: Since the last update (14 June 2024), the MoH reported 979 new suspected cases and 11 new deaths (CFR: 1.1%) of measles from 11 districts. This is a 61% increase in the number of new cases compared to the last update. Cumulatively, 12,371 suspected cases and 132 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 (1740 May 2024), the MoH reported 408 new cases (204 confirmed; 204 suspected) and no new deaths of measles from 15 districts. Cumulatively, 1,526 cases (504 confirmed; 1,022 suspected) and 121 deaths (CFR: 7.9%) 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%.

Chad: Since the last update (14 June 2024), the MoH reported 114 new suspected cases and no new deaths of measles in eight provinces. This is a 73% decrease in the number of new cases compared to the last update. Cumulatively, 6,798 cases (64 confirmed; 6,734 suspected) and 23 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%.

DRC: Since the last update (14 June 2024), the MoH reported 2,152 new suspected cases and 74 deaths (CFR: 3.4%) of measles from 24 provinces. This is a 12% decrease in the number of new cases compared to the last update. Cumulatively, 54,263 suspected cases and 1,323 deaths (CFR: 2.4%) of measles have been reported from all the 26 provinces across DRC. This is a protracted outbreak that started in January 2023. In 2023, the national measles vaccination coverage among children <2 years in DRC was 26%.

Mauritania: Since the last update (14 June 2024), the MoH reported 67 new cases (2 confirmed; 65 suspected) and no new deaths of measles from three districts. This is a 43% increase in the number of new cases compared to the last update. Cumulatively, 2,663 cases (287 confirmed; 2,376 suspected) and four deaths (CFR: 0.2%) of measles have been reported from 49 of 63 districts in Mauritania this year. Thirty three percent of the confirmed cases were children <5 years. Bir Mogrein district, children <5 years were mostly affected with attack rates of 15.8 and 34.1/100,000 population respectively. 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 (14 June 2024), the MoH reported 365 new cases (131 confirmed; 234 suspected) and one new death (CFR: 0.3%) of measles from 10 regions. This is a 14% decrease in the number of new cases compared to the last update. Cumulatively, 7,869 cases (2,753 confirmed; 5,116 suspected) and 19 deaths (CFR: 0.2%) of measles have been reported from all 12 regions in Morocco this year. Of the
total cases, 42% were children <5 years and 57% were females. Additionally, the overall attack rate was 21.1/100,000 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%.

**Senegal:** Since the last update (14 June 2024), the MoH reported 36 new confirmed cases and no new deaths of measles from five districts. This is a 32% decrease in the number of new cases compared to the last update. Cumulatively, 345 confirmed cases and no deaths of measles have been reported from 38 of the 45 districts in Senegal. Of the confirmed cases, 51% were females and 41% were children between 5-15 years. Seventy-seven percent of the confirmed cases were not vaccinated against measles virus. In 2022, the national measles vaccination coverage among children <5 years in Senegal was 66%.

**Somalia:** Since the last update (14 June 2024), the MoH reported 217 new cases (36 confirmed; 181 suspected) and no new deaths of measles from six states in Somalia. This is an 8% decrease in the number of new cases compared to the last update. Of the new reported cases, 67% were children <5 years. Cumulatively, 7,453 cases (395 confirmed; 7,058 suspected) and 23 deaths (CFR: 0.3%) 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%.

**Togo**: Since the last update (7 June 2024) the MoH reported 87 new cases (32 confirmed; 55 suspected) and one new death (CFR: 1.1%) of measles from all health districts. Cumulatively, 628 cases (199 confirmed; 429 suspected) and two deaths (CFR: 0.3%) of measles virus have been reported from all 13 health districts in Togo. The South Oti health district is the epicenter of the epidemic with 26% confirmed cases. Persons >15 years account for 33% of all the cases. Only 2% of the cases have been fully vaccinated against measles. In 2023, the measles vaccine coverage among children <5 years was 89%.

**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 (1,560; 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 (8,028; 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

22 confirmed human case(s), 9 probable human case(s), 410 suspected human case(s)
6 human deaths (CFR: 1.36%)

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<tr>
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Update to Event:

Since the beginning of this year, a total of 441 cases (22 confirmed; 9 probable; 410 suspected) and six deaths (CFR: 1.36%) of yellow fever have been reported from six AU MS: CAR (37 cases; 0), Cameroon (8; 0), Congo (234; 0), Gabon (46; 0), South Sudan (115; 6), and Uganda (1; 0).

This week, 26 new cases and no new deaths of yellow fever were reported from Congo.

Congo: Since the last update (31 May 2024), the MoH reported 26 new cases (2 confirmed; 24 suspected) and no deaths of yellow fever from eight provinces. Cumulatively, 234 cases (10 confirmed; 220 suspected; 4 probable) and no deaths were reported from six of the 12 departments across the country this year. In 2022, the national yellow fever vaccination coverage among children <1 year in Congo was 61%.

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:

Congo: MoH continues to implement vector control and community engagement activities in the affected areas.
Mpx in Africa

1,196 confirmed human case(s), 7,905 suspected human case(s)
419 human deaths (CFR: 4.60%)

Update to Event:

Since the beginning of this year, a total of 9,107 cases (1,202 confirmed; 7,905 suspected) and 413 deaths (CFR: 4.60%) of mpx have been reported from seven AU MS: Cameroon (31 cases; 2 deaths), CAR (187; 0), Congo (133; 1), DRC (8,734; 408), Ghana (4; 0), Liberia (5; 0), and South Africa (13; 2).

This week, 628 new cases and 12 new deaths of mpx were reported from Congo, DRC, and South Africa.

Congo**: Since the last update (31 May 2024), the MoH reported 24 new suspected cases and one new death (CFR: 4.2%) of mpx from Oyo-Alima health area. Cumulatively, 133 cases (19 confirmed; 114 suspected) and one death (CFR: 0.8%) have been reported from five of twelve provinces in Congo. Of the confirmed cases, persons >15 years accounted for 56% and males accounted for 58%.

DRC: Since the last report (14 June 2024), the MoH reported 597 new suspected cases and 11 new deaths (CFR: 1.8%) of mpx from 13 provinces. This is over a two fold increase in the number of new cases compared to the last update. Cumulatively, 8,734 cases (1,135 confirmed; 7,599 suspected) and 408 deaths (CFR: 4.7%) of mpx have been reported from 23 of 26 provinces in DRC. Children <15 years accounted for 68% of the cases and 85% of the deaths. Of the confirmed cases, 73% were males. The clade I mpx strain was isolated from the confirmed cases.

South Africa: Since the last update (14 June 2024), the National Department of Health reported seven new confirmed case and no new deaths of mpx from three provinces: Gauteng (3 cases), KwaZulu Natal (3), and Western Cape (1). All cases are males in the age group of 23-39 years. Cumulatively, 13 confirmed cases and two deaths (CFR: 15.3%) of mpx have been reported from three of nine provinces in South Africa: Gauteng (5 cases; 1 death) and KwaZulu Natal (7; 1) and Western Cape (1; 0). All cases are 33-39 year-old males with comorbidities such as human immunodeficiency virus. Sequencing results among three confirmed cases identified mpx Clade Ila sublineage.

Note: In 2023, a total of 14,838 cases (1,665 confirmed; 13,173 suspected) and 738 confirmed deaths (CFR: 5.0%) of mpx were reported from seven AU MS: Cameroon (140 cases; 1 death), CAR (67; 2), Congo (95; 5), DRC (14,434; 728), Ghana (11; 0), Liberia (11; 0) and Nigeria (80; 2).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, and community engagement activities in the affected areas.
### Diphtheria in Africa

**5,483** confirmed human case(s)  
**5,905** suspected human case(s)  
**163** human deaths (CFR: 2.97%)

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<th>Corynebacterium diphtheriae</th>
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<tr>
<td>Human Risk Assessment</td>
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</table>

#### Update to Event:

Since the beginning of this year, a total of 11,388 cases (5,483 confirmed; 5,905 suspected) and 163 deaths (CFR: 2.97 %) of diphtheria have been reported from five AU MS: Chad (391 cases; 17 death), Gabon (9; 0), Guinea (2,623; 17), Niger (746; 29), and Nigeria (7,619; 100). This week, 84 new cases and no new deaths of diphtheria were reported from Gabon and Guinea.

**Gabon:** Since the last update (22 March 2024), the MoH reported three new suspected cases and no new death of diphtheria from the Nord region. Cumulatively, nine cases (2 confirmed; 7 suspected) and no deaths among suspected cases of diphtheria have been reported from one of ten regions in Gabon. In 2022, the national DPT3 vaccination coverage among children <1 year in Gabon was 47%.

**Guinea**:* Since the last update (7 June 2024), the MoH reported 81 new cases (9 confirmed; 72 suspected) and no new deaths of diphtheria from Sigui region. Cumulatively, 2,623 cases (17 confirmed; 2,606 suspected) and 17 deaths among suspected cases of diphtheria have been reported from two of eight regions in Guinea. This is a protracted outbreak that started in July 2023. Persons >15 years accounted for 45% of all cases reported. Additionally, none of the reported cases had been fully vaccinated against diphtheria. In 2022, the national DPT3 vaccination coverage among children <1 year in Guinea was 47%.

**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 (2,196; 91), Nigeria (22,359; 578), and South Africa (13; 1).

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

**Gabon:** The MoH continues to coordinate diphtheria surveillance and response activities.
Polio virus (vaccine-derived) in Africa

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

Update to Event:

Since the beginning of this year, five confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from DRC and 57 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported from 11 AU MS: Angola (1 case), Chad (2), DRC (3), Ethiopia (7), Guinea (2), Kenya (1), Niger (2), Nigeria (30), Somalia (2), South Sudan (6), and Zimbabwe (1).

This week, one new confirmed case of cVDPV1 and six cases of cVDPV2 were reported from DRC, Niger, Nigeria, and South Sudan.

**DRC:** Since the last update (31 May 2024), the Global Polio Eradication Initiative (GPEI) reported one new confirmed case and no new deaths of cVDPV1 from Tanganyika. Cumulatively, eight confirmed cases of cVDPV1 (5 cases) and cVDPV2 (3) have been reported from four of the twenty-six provinces in DRC. In 2023, a total of 106 cases of cVDPV1 and 117 cases of cVDPV2 were reported from DRC. In 2023, the national oral polio vaccination (OPV3) coverage among children <1 year in DRC was 93%.

**Niger:** Since the last update (31 May 2024), the GPEI reported one new confirmed case and no new deaths of cVDPV2 from the Zinder region. Cumulatively, two confirmed cases of cVDPV2 have been reported from Zinder region. In 2022, the national oral polio vaccination (OPV3) coverage among children <1 year in Niger was 84%.

**Nigeria:** Since the last update (31 May 2024), the GPEI reported three new confirmed cases and no new deaths of cVDPV2 from Bauchi (2) and Katsina (1) states. Cumulatively, 30 confirmed cases of cVDPV2 have been reported from nine of thirty-six states and the federal capital territory: Adamawa (1 confirmed case), Bauchi (4), Jigawa (1), Kaduna (1), Kano (6), Katsina (9), 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%.

**South Sudan:** Since the last update (3 May 2024), the GPEI reported two confirmed cases of cVDPV2 from Upper Nile state. Cumulatively, six cases of cVDPV2 have been reported from three of thirty-two states in South Sudan; Jonglei (2 cases), Upper Nile (3) and Western Equatoria (1). In 2023, three cases of cVDPV2 were reported in South Sudan. In 2023, the national oral polio vaccination (OPV3) coverage among children <1 year in South Sudan was 112%.

**Note:** In 2023, a total of 133 confirmed cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from three AU MS: DRC (106 cases), Madagascar (24) and Mozambique (4) and 378 cases of cVDPV2 were reported from 20 AU MS: Benin (3), Burkina Faso (2), Burundi (3), CAR (14), Chad (55), Côte d’ivoire (6), DRC (117), Ethiopia (1; 0), Guinea (47), Kenya (14), Mali (11), Mauritania (1), Mozambique (1) Niger (2), Nigeria (87), Tanzania (3), Somalia (8), South Sudan (3), Zambia (1) and Zimbabwe (1).

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS continue to strengthen acute flaccid paralysis surveillance and polio supplemental vaccination campaigns in the affected areas.
Hepatitis E virus in Africa

45 confirmed human case(s), 2,458 suspected human case(s)
12 human deaths (CFR: 0.48%)

Agent/Pathogen: Hepatitis E virus
First Reported: 21-Jun-2024
Previous Report Update: 21-Jun-2024
Source: Ministry of Health
GeoScope: MODERATE

Country: Multiple Countries
Location: 2 countries

Human Risk Assessment: MODERATE
Animal Risk Assessment: N/A
First Occurred: 15-Jun-2024

Update to Event:

Since the beginning of this year, a total of 2,503 cases (45 confirmed; 2,458 suspected) and 12 deaths (CFR: 0.48%) of hepatitis E have been reported from two AU MS: Burkina Faso (62 cases; 3 deaths) and Chad (2,441; 9).

This week, 1,000 new cases and seven new deaths of hepatitis E were reported from Burkina Faso and Chad.

Burkina Faso (initial report): On 13 June 2024, the MoH reported an outbreak of Hepatitis E with 62 cases (9 confirmed; 53 suspected) and three deaths (CFR: 4.8%) from Kaya health district, Centre North region. The cases were confirmed at the National Public Health Laboratory of Burkina Faso by polymerase chain reaction. Of the total cases, 52% were males and 47% were reported among internally displaced persons. The last reported case of Hepatitis E in Burkina Faso was in 2020 with 47 confirmed cases and no deaths reported from Kaya health district.

Chad: Since the last update (24 May 2024), the MoH reported 938 new suspected cases and four new deaths (CFR: 0.4%) of hepatitis E from Quaddai province. Cumulatively, 2,441 cases (36 confirmed; 2,405 suspected) and nine deaths (CFR: 0.4%) have been reported from five refugee camps and two refugee transit sites, in Adré and Hadjer-Hadid health districts. Twenty-five cases and two deaths were reported among pregnant women. In addition, 55% of the cases were males and children <4 years accounted for 31% of the total confirmed case.

Hepatitis E is a liver disease caused by the hepatitis E virus (HEV) 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:

Burkina Faso: The MoH is conducting active case search, case management, risk communication, and community engagement activities in the affected region.

Chad: The MoH organized coordination meetings at the district level and activated the incident management system. In addition, water, sanitation and hygiene, active case finding, risk communication, and community engagement activities are ongoing in the affected health districts.
*The number of cholera deaths in Cameroon has been revised from 27 to 0 following verification from the MS. Additionally, the new cases of cholera and measles in Cameroon were the result of batch reporting.

**The new cases of measles in Togo, mpox in Congo, and Diphtheria in Guinea were the result of batch reporting.

- 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.