

Africa CDC Weekly Event Based Surveillance Report

20-May-2023



Initial Reports



Moderate Risk Events

Yellow fever in Cameroon

2 confirmed case(s)

6 suspected case(s)

0 death(s) (CFR: 0.0%)

Yellow fever virus	Agent/Pathogen	17-May-2023	First Reported by Africa CDC	Initial Report	Previous Africa CDC Report:
15-May-2023	First Occurred	Cameroon	Country	3 regions	Location
Ministry of Health	Source	LOW	GeoScope	MODERATE	Risk Assessment

Description:

On 15 May 2023, the Cameroon Ministry of Health (MoH) reported an outbreak of yellow fever in Littoral, Northwest and Southwest regions of Cameroon. Cumulatively, eight cases (2 confirmed; 6 suspected) and no deaths were reported from seven districts in these three regions: Boko (1 confirmed case; 1 suspected case), Japoma (0; 1), Loum (0; 1), Bamendjou (0; 1), Mbouda (0; 1), Sangmelima (0; 1) and Tiko (1; 0) districts. The confirmed cases presented with fever, jaundice, and fatigue. The Centre Pasteur du Cameroun confirmed these two cases by plaque reduction neutralization test (PRNT). Six samples are undergoing investigations.

Yellow fever is an acute viral haemorrhagic disease caused by the yellow fever virus and is transmitted through the bite of infected Aedes mosquitoes. Symptoms include headache, jaundice, muscle pain, nausea, vomiting, and fatigue. The overall case fatality ratio (CFR) ranges between 3% to 7.5%. The country's yellow fever vaccination coverage as of August 2022 was 54%. The last outbreak of yellow fever in Cameroon occurred in Littoral district from August to November 2022 where 38 cases with no deaths were reported.

Response:

The MoH developed a yellow fever response plan and continues to advocate for support from its partners. Additionally, yellow fever vaccination campaigns are ongoing in affected districts.

Acute HF (VHF) in Democratic Republic of the Congo

2 suspected case(s) 0 death(s) (CFR: 0.0%)

Acute Haemorrhagic	Agent/Pathogen	20-May-2022	First Reported by Africa CDC	Initial Report	Previous Africa CDC Report:
14-May-2023	First Occurred	DR Congo	Country	South Kivu	Location
Ministry of Health	Source	LOW	GeoScope	MODERATE	Risk Assessment

Description:

On 14 May 2023, the Ministry of Health (MoH) of the Democratic Republic of Congo (DRC) reported two suspected cases and one death of viral hemorrhagic fever (VHF) in Lulingu health zone, located in the Shabunda territory of South Kivu province. The cases are two children from Lulingu area who presented with fever and bleeding from orifices to the HGR Lulingu hospital. Samples were collected and sent to the Institut National de Recherche Biomédicale, Kinshasa for analysis. The last Ebola virus disease in DRC was declared over on 27 September 2022, where one confirmed case and one death were reported from Beni district of North Kivu province.

Response:

The DRC MoH and its partners are conducting an active case search in the Lulingu health zone.





High Risk Events

Cholera in Africa

77,108 confirmed case(s) 27,246 suspected case(s) 2,042 death(s) (CFR: 2.0%)

Vibrio	Agent/Pathogen	06-Jan-2023	First Reported	12-May-2023	Previous Africa
cholerae			by Africa CDC		CDC Report:
01-Jan-2023	First Occurred	Africa Combo	Country	15 MS	Location
	Course	MODERATE	Cooloono	нідн	Risk
Ministry of	Source	WODERATE	GeoScope	нібн	Assessment
Health					Assessment

Update to event:

Since the beginning of this year, 104,354 cases (77,108 confirmed; 27,246 suspected) and 2,042 deaths (CFR: 2.0%) of cholera were reported from 15 African Union (AU) Member States (MS): Burundi (288 cases; 1 death), Cameroon (1,938; 312), DRC (10,031; 75), Ethiopia (245; 11), Eswatini (2; 0), Kenya (6,991; 110), Malawi (42,623; 1,251), Mozambigue (30,574; 131), Nigeria (1,336; 79), Somalia (7,442; 24), South Africa (11; 1), South Sudan (1,073; 2), Tanzania (87; 3), Zambia (633; 12) and Zimbabwe (1,080; 30). This week, 2,082 new cases and 17 new deaths of cholera were reported from six AU MS: Kenya, Malawi, Mozambique, Somalia, Zambia and Zimbabwe.

Kenya: Since the last report (12 May 2023), the MoH reported 149 new cases (36 confirmed; 113 suspected) and three new deaths (CFR: 2.0%) of cholera. This is a 73% decrease in the number of new cases reported and a 70% decrease in the number of new deaths compared to the last report. Cumulatively, 6,991 cases (1,333 confirmed; 5,658 suspected) and 110 deaths (CFR: 1.6%) were reported from 19 of 47 counties across the country. Since the start of the outbreak in October 2022, a total of 10,297 cases (2,494 confirmed; 7,803 suspected) and 164 deaths (CFR: 1.5%) have been reported from 23 counties. Garissa, Mandera and Nairobi counties account for 64% of the total cases and 52% of the total deaths reported to date.

Malawi: Since the last update (12 May 2023), the MoH reported 93 new confirmed cases and one new death (CFR: 1.1%) of cholera from 16 districts. This is a 47% decrease in the number of new confirmed cases and an 67% decrease in the number of new deaths compared to the last report. Cumulatively, 42,623 confirmed cases and 1,251 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year.

Mozambique: Since the last update (12 May 2023), the MoH reported 342 new confirmed cases and no new deaths of cholera. This is a 51% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 30,574 confirmed cases and 131 deaths (CFR: 0.4%) have been reported from 10 of 11 provinces this year.

Somalia: Since the last report (12 May 2023), the MoH reported 1,137 new cases (2 confirmed; 1,135 suspected) and five new deaths (CFR: 0.4%) of cholera. This is a 50% increase in the number of new cases compared to the last report. Cumulatively, 7,442 cases (24 confirmed; 7,418 suspected) and 24 deaths (CFR: 0.3%) have been reported from 29 drought affected regions in the country. Of the 7,442 cases, 42% are children under two years old. This outbreak has been uninterrupted in four drought afected regions out of 18 regions in the country affectining 28 districts. Hirshabelle, Jubaland and Southwest regions have reported cholera cases since 2022 while Banadir region since 2017.

Zambia: Since the last update (12 May 2023), the Zambia National Public Health Institute (ZNPHI) reported 81 new cases (49 confirmed; 32 suspected) and one new death (CFR: 1.2%) of cholera. This is a 42% increase in the number of new confirmed cases compared to the last report.Cumulatively, 633 cases (241 confirmed; 392 suspected) and 12 deaths (CFR: 1.9%) have been reported from eight of 116 districts this year.

Zimbabwe: Since the last update (12 May 2023), the MoH reported 280 new cases (59 confirmed; 221 suspected) and seven new deaths (CFR: 2.5%) of cholera. This is a 69% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 1,080 cases (301 confirmed; 779 suspected) and 30 deaths (CFR: 2.7%) have been reported from nine of 10 provinces this year.

Response:

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

Malawi: The MoH continues to conduct testing of stool samples of all suspected cases.

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

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 implementation of cholera response interventions in the drought affected districts, focusing on Jubaland state, which is the current epi-centre of the outbreak.

Zambia: ZNPHI continues to coordinate response activities in all the affected districts.

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

2,537 confirmed case(s) **91,645** suspected case(s) **1,052** death(s) (CFR: 1.1%)

Measles virus	Agent/Pathogen	06-Jan-2023	First Reported by Africa CDC	12-May-2023	Previous Africa CDC Report:
01-Jan-2023	First Occurred	Africa Combo	Country	18 MS	Location
Ministry of Health	Source	MODERATE	GeoScope	HIGH	Risk Assessment

Update to event:

Since the beginning of this year, 94,182 cases (2,537 confirmed; 91,645 suspected) and 1,052 deaths (CFR: 1.1%) of measles were reported from 18 AU MS: Burundi (132 cases:0 deaths), Botswana (13; 0), Cameroon (1,985; 3), CAR (696; 0), Chad (1,303; 2), Congo (7; 0), DRC (84,558; 1,025), Ethiopia (907; 0), Ghana (212; 0), Kenya (9; 1), Libya (391; 2), Mali (94; 0), Mauritania (456; 3), Senegal (352; 0), South Africa (619: 0), South Sudan (1,862; 14), Uganda (258; 1) and Zambia (328; 1). This week, a total of 1,759 cases and no new deaths have been reported from three AU MS: Cameroon, CAR, and South Africa.

CAR: Since the last update (7 April 2023), the MoH reported 229 confirmed cases and no new deaths of measles from all seven regions. Cumulatively, 696 cases (548 confirmed; 148 suspected) and no deaths of measles have been reported from all seven regions in CAR. The measles vaccination coverage is 41%.

Cameroon: Since the last update (17 March 2023), the MoH reported 1,522 new ases (299 confirmed, 1,223 suspected) and three new deaths (CFR: 0.1 %) of measles from nine districts. Cumulatively, 1,985 cases (373 confirmed; 1,612 suspected) and three deaths (CFR: 0.2%) of measles have been reported from 10 of 20 districts in Cameroon.

South Africa: Since the last update (12 May 2023), the National Institute for Communicable Diseases (NICD) reported eight new confirmed cases and no new deaths of measles. Cumulatively, 619 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%). The measles strain detected in Limpopo and North West provinces is genotype D8 which is similar to the strain in Zimbabwe of 2022. The national measles vaccination coverage remains low. The NICD continues to report on a large number of cases with unknown vaccination status.

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:

CAR: The MoH continues to intensify surveillance in the affected regions.

Cameroon: Since March 2023, the MoH vaccinated over 2,000 children between the ages of 9 - 59 months in affected districts.

South Africa: The provincial health departments continue to conduct measles supplementary activities and catch-up campaigns in all of the affected provinces, targeting children aged 6 months to 15 years. The NICD continues to strengthen surveillance and laboratory testing of all cases in all provinces.

COVID-19 in Africa

12,297,672 confirmed case(s) **257,071** death(s) (CFR: 2.1%)

SARS-CoV-2	Agent/Pathogen	21-Feb-2020	First Reported by Africa CDC	12-May-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:

On 5 May 2023, the World Health Organization (WHO) declared the end to COVID-19 as a public health emergency of international concern (PHEIC). As of 6 p.m. East African Time (EAT) 17 May 2023, a total of 12,297,672 COVID-19 cases and 257,071 deaths (CFR: 2.1%) were reported by the 55 AU MS. This represents 2% of all cases and 4% of all deaths reported globally. Forty-four (80%) AU MS are reporting CFR higher than the global CFR. 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, 548.2 million people have been partially vaccinated, and 431.7 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 19 (8 - 14 May 2023), 1,225 new COVID-19 cases were reported, which is a 16% decrease in the number of new cases reported compared to the previous week (18). The Northern region accounted for 48% of the new COVID-19 cases reported this week, followed by the Eastern (27%), Central (19%), Southern (5%), Western (1%) and regions. Cabo Verde (14) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, 22 new COVID-19 deaths were reported in Africa, with the Northern region accounting for 86% of the new COVID-19 deaths reported this week, followed by the Southern (9%) and Central (5%). No deaths were reported in the Eastern and Western regions this week.

More than 14 thousand tests were conducted during the past week, reflecting a 65% decrease in the number of tests compared to the previous week. The weekly % test positivity increased from 4% to 8% compared to the previous week. Since February 2020, over 127.5 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, <u>Hotspot dashboard</u>, <u>PGI Dashboard</u>, <u>Vaccination Dashboard</u> and the Africa CDC COVID-19 brief <u>https://au.int/sites/default/files/documents/42763-doc-AfricaCDC_COVIDBrief_5May23_EN.pdf</u>.

Mpox in Africa

202 confirmed case(s) **26** death(s) **(CFR: 12.9%)**

Mpox virus	Agent/Pathogen	17-Jan-2023	First Reported by Africa CDC	12-May-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:

On 12 May 2023, WHO declared that the multi-country outbreak of mpox was no longer a PHEIC. Since the beginning of this year, 202 confirmed cases and 26 deaths (CFR: 12.9%) of mpox have been reported from five endemic AU MS: CAR (14 confirmed cases; 1 death), Democratic Republic of Congo (DRC) (98; 23), Ghana (9; 0), Liberia (7; 0) and Nigeria (74; 2). This week, five new confirmed cases and no new deaths of mpox were reported from three AU MS: CAR, Ghana and Nigeria.

CAR: Since the last update (7 April 2023), the MoH reported two new confirmed cases and no new deaths of mpox. Cumulatively 14 confirmed cases and one death (CFR: 7.1%) of mpox have been reported from five of 20 prefectures in CAR.

Ghana: Since the last update (7 April 2023), the Ghana Health Services (GHS) reported one new confirmed case and no new deaths of mpox. Cumulatively, nine confirmed cases and no deaths of mpox were reported from three of the 16 regions in the country this year.

Nigeria: Since the last update (3 May 2023), the Nigeria Centre for Disease Control (NCDC) reported two new confirmed cases and no new deaths of mpox. Cumulatively, 74 confirmed cases and two deaths (CFR: 2.7%) of mpox have been reported from 18 of the 36 states and federal capital territory this year.

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:

CAR: The MoH continues to strengthen mpox surveillance in high-risk areas and is also mobilizing resources to strengthen laboratory capacity in the country.

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

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.

Polio (vacc) in Africa

73 confirmed case(s) 0 death(s) (CFR: 0%)

Polio virus (vaccine-	Agent/Pathogen	01-Jan-2023	First Reported by Africa CDC	12-May-2023	Previous Africa CDC Report:
01-Jan-2023	First Occurred	Africa Combo	Country	10 MS	Location
Global Polio Eradication	Source	MODERATE	GeoScope	MODERATE	Risk Assessment

Update to event:

Since the beginning of 2023, the continent has reported 24 cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) from DRC (12), Madagascar (9), Mozambique (3) and 49 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) from 8 MS: Benin (2), Burundi (3), CAR (7), Chad (6), Côte d'Ivoire (1), DRC (22), Nigeria (6) and Somalia (2). This week, three new cases of cVDPV1 and five new cases of cVDPV2 were reported from CAR, DRC and Nigeria.

CAR: Since the last update (31 March 2023), the MoH reported two new confirmed cases of cVDPV2. Cumulatively, seven confirmed cases and no deaths of cVDPV2 have been reported.

DRC: Since the last update (12 May 2023), the MoH reported three new confirmed cVDPV1 and one new case of cVDPV2 from Haut Lomami province. Cumulatively, 12 cases of cVDVP1 and 22 cases of cVDPV2 have been reported from DRC this year.

Nigeria: Since the last update (12 May 2023), the MoH reported two new confirmed cases and no new deaths of cVDPV2 were reported from two states. Cumulatively, six confirmed cases and no deaths of cVDPV2 were reported from two states in Nigeria; Zamfara (3), Sokoto (2) and Kebbi (1).

Response:

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

DRC: The MoH in collaboration with partners, plans to conduct a mass vaccination campaign in affected provinces.

Nigeria: The MoH conducted polio vaccination campaigns in four northern states (Kebbi, Katsina, Sokoto and Zamfara) from 11 - 18 May 2023.

Other Event Updates





Flood in Africa

855,747 total persons displaced **1,380** death(s)

Flood	Agent/Pathogen	07-Apr-2023	First Reported by Africa CDC	Initial Report	Previous Africa CDC Report
02-Apr-2023	First Occurred	Africa Combo	Country	7 MS	Location
Ministry of Environment	Source	MODERATE	GeoScope	MODERATE	Human Risk Assessment

Update to event:

Since the beginning of this year, the continent has reported a total of 855,747 displaced persons, 1,380 deaths due to floods from seven AU MS: Burundi (1,155 displaced people; 20 deaths), DRC (4,134; 16) and Ethiopia (65,253; 91), Madagascar (747,999; 50), Malawi (646,285; 736), Mozambique (26,814; 19) and Rwanda (0; 135). This week, 66408 displaces persons and 545 deaths have peen reported from Burundi, DRC and Ethiopia.

Burundi: On 12 May 2023, the Government of Burundi reported the occurrence of floods caused by heavy rainfall and landslide which occurred on 4 April 2023. The heavy rainfall affected four provinces in Gatumba zone, western and north-eastern Burundi causing floods, and the overflowing of Rusizi and Rugogo rivers. As of 16 May 2023, 20 deaths, 15 injuries, and 1,155 displaced persons were reported. Additionally, multiple schools, infrastructures, and properties were destroyed. Gatumba is one of the zones reporting an outbreak of cholera since the beginning of this year.

DRC: Since the last update (12 May 2023), the Government of DRC reported 16 new deaths, 50 injuries and over 1,000 missing persons due to floods caused by heavy rainfall which occurred on 2 and 4 May 2023 in nine territories of South-Kivu province, Eastern DRC. Cumulatively, 41,340 displaced persons, 438 deaths, 200 injuries, 72 hospitalizations, 4,500 affected households and over 6,000 missing persons have been reported.

Ethiopia: On 16 May 2023, United Nations Office for the Coordination of Humanitarian Affairs reported the occurrence of flooding in north eastern and southern Ethiopia due to continued heavy rainfall in these regions. As of 12 May, a total of 91 deaths had been reported from Somali (45 deaths), Southern Nations Nationalities and Peoples (SNNP) (38) and Oromia (8) regions. In addition, 65,253 displaced persons have been reported across four regions of the country. The floods are occurring in regions with ongoing cholera outbreaks, further increasing the risk for protracted outbreaks.

Response:

Burundi: The Government of Burundi with support from partners deployed a response team to support disaster management and cholera surveillance in flood-affected areas.

DRC: The Government of DRC in collaboration with partners is providing access to food, housing, and health care in the floodaffected districts.

Ethiopia: The Ethiopian government with support from partners has prepared a flood response plan and continues to provide food, safe water and other basic commodities to the displaced persons.

Footnotes:

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

^{*} 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.