CCHF in Namibia

1 confirmed case(s)
1 death(s) (CFR: 100.0%)

Description:
On 23 May 2023, the Ministry of Health (MoH), Namibia reported an outbreak of Crimean-Congo hemorrhagic fever (CCHF) following laboratory confirmation in a male patient at Windhoek Central Hospital. The confirmation was made by the National Institute for Communicable Diseases of South Africa. The index case presented with bleeding gums and headache at a clinic in Gobabis, Omaheke region, eastern Namibia on 16 May 2023. He was later transferred to Windhoek Central Hospital, where he died on 18 May 2023.

CCHF is a zoonotic viral hemorrhagic fever that can spread through bites of infected ticks. It can also be transmitted from animals to humans through contact with blood, body fluids, or tissues of infected animals, mainly livestock such as cattle, sheep, goats, buffalo and camels. Although livestock can be infected with the virus, most do not manifest clinical symptoms. There is currently no approved safe and effective vaccine for human use, and treatment for CCHF is primarily supportive. The last outbreak of CCHF in Namibia occurred in 2020, with two cases and no deaths from Oshkoto and Omusati regions.

Response:
The MoH has deployed a team to the field to investigate this outbreak. A total of 27 contacts have been identified including 24 health workers. In addition, emergency management committees have been established in Khomas and Omaheke regions, risk communication and community engagements are ongoing in affected communities, and the veterinary department has been engaged to institute control measures in livestock.
Cholera in Africa

**78,026** confirmed case(s)
**29,413** suspected case(s)
**2,075** death(s) (**CFR: 1.9%**)

Update to event:
Since the beginning of this year, 107,429 cases (78,016 confirmed; 29,413 suspected) and 2,075 deaths (CFR: 1.9%) of cholera were reported from 15 AU MS: Burundi (288 cases; 1 death), Cameroon (1,938; 312), DRC (10,031; 75), Ethiopia (245; 11), Eswatini (2; 0), Kenya (7,459; 122), Malawi (42,699; 1,252), Mozambique (31,122; 135), Nigeria (1,336; 79), Somalia (8,503; 26), South Africa (106; 11), South Sudan (1,455; 2), Tanzania (87; 3), Zambia (688; 13) and Zimbabwe (1,431; 37). This week, 3,065 new cases and 36 new deaths of cholera were reported from eight AU MS: Kenya, Malawi, Mozambique, Somalia, South Africa, South Sudan, Zambia and Zimbabwe.

Kenya: Since the last report (19 May 2023), the MoH reported 468 new cases (143 confirmed; 325 suspected) and 12 new deaths (CFR: 2.6%) of cholera. This is a 214% increase in the number of new cases reported compared to the last report. Cumulatively, 7,459 cases (1,476 confirmed; 5,983 suspected) and 122 deaths (CFR: 1.6%) were reported from 19 of 47 counties across the country. This week, one new county, Mombasa, reported new cases. Since the start of the outbreak in October 2022, a total of 10,765 cases (2,637 confirmed; 8,128 suspected) and 176 deaths (CFR: 1.6%) were reported from 24 counties.

Malawi: Since the last update (12 May 2023), the MoH reported 76 new confirmed cases and one new death (CFR: 1.8%) of cholera from 12 districts. This is a 40% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 42,699 confirmed cases and 1,252 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year.

Mozambique: Since the last update (19 May 2023), the MoH reported 548 new confirmed cases and three new deaths (CFR: 0.35) of cholera. This is a 13% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 31,122 confirmed cases and 135 deaths (CFR: 0.4%) have been reported from 10 of 11 provinces this year.

Somalia: Since the last report (19 May 2023), the MoH reported 1,061 new cases (1 confirmed; 1,060 suspected) and two new deaths (CFR: 0.4%) of cholera. This is a 6% decrease in the number of new cases and a 60% decrease in the number of new deaths compared to the last report. Cumulatively, 8,503 cases (25 confirmed; 8,478 suspected) and 26 deaths (CFR: 0.3%) were reported from 28 districts in seven of the 18 regions in the country. Of the total cases, cases, 53% are children under five years. This outbreak has been uninterrupted in 28 drought affected districts since 2022 and in Banadir region since 2017.

South Africa: Since the last report (7 April 2023), the MoH reported 134 new cases (57 confirmed; 77 suspected) and seven new deaths (CFR: 5.2%) of cholera. This is a 13,300% increase in the number of new cases compared to the last report. Cumulatively, 145 cases (68 confirmed; 77 suspected) and eight death (CFR: 5.5%) have been reported this year.

South Sudan: Since the last report (21 April 2023), the MoH reported 382 new suspected cases and no new deaths of cholera. This is a 15% increase in the number of new cases reported compared to the last report. Cumulatively, 1,455 cases (24 confirmed; 1,431 suspected) and two deaths (CFR: 0.1%) have been reported. Children aged 1 - 4 years account for 48% of the total cases, and 52% of the total cases are male. The outbreak is localized in Malakal county, Upper Nile state.

Zambia: Since the last update (19 May 2023), the Zambia National Public Health Institute (ZNPHI) reported 25 new cases (4 confirmed; 21 suspected) and no new death from cholera. This is a 73% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 688 cases (263 confirmed; 425 suspected) and 13 deaths (CFR: 1.8%) have been reported from nine of 116 districts this year.
Zimbabwe: Since the last update (19 May 2023), the MoH reported 362 new cases (61 confirmed; 290 suspected) and seven new deaths (CFR: 2%) from cholera. This is a 25% increase in the number of new confirmed cases compared to the last report. Cumulatively, 1,431 cases (362 confirmed; 1,069 suspected) and 37 deaths (CFR: 2.6%) 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 test 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.

South Sudan: The MoH continues to conduct active case search, case management, water quality monitoring and risk communication in the affected county.

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

Zambia: ZNPHI continues to coordinate response activities.

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

2,629 confirmed case(s)
91,805 suspected case(s)
1,053 death(s) (CFR: 1.1%)

Update to event:

Since the beginning of this year, 94,434 cases (2,629 confirmed; 91,805 suspected) and 1,053 deaths (CFR: 1.1%) of measles were reported from 18 AU MS: Burundi (132;0), Botswana (13 cases; 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 (535; 4), Senegal (366; 0), South Africa (639; 0), South Sudan (2,001; 14), Uganda (258; 1) and Zambia (328; 1). This week, a total of 252 new cases and one new death have been reported from four AU MS: Mauritania, Senegal, South Africa and South Sudan.

Mauritania: Since the last update (12 May 2023), the MoH reported 79 new cases (17 confirmed, 62 suspected) and one new death (CFR: 1.3%) of measles from 11 of 13 regions. This is a 23% increase in the number of new cases reported compared to the last report. Cumulatively, 535 cases (203 confirmed; 332 suspected) and four deaths (CFR: 0.7%) of measles have been reported from 11 of the 13 regions in Mauritania. Of all cases reported, 70% were reported in children under 15 years of age and 57% of children under 5 years were not vaccinated against measles virus.

Senegal: Since the last report (12 May 2023), the MoH reported 14 new confirmed cases and no deaths of measles. This is a 95% decrease in the number of new confirmed cases compared to the previous report. Cumulatively, 366 confirmed cases and no deaths of measles were reported from 30 of the 76 health districts. Touba district accounts for 68% (239) of the confirmed cases reported. Additionally, children between 5 - 15 year old account for 46% of all cases, and majority (86%) of the cases were unvaccinated against measles.

South Africa: Since the last update (19 May 2023), the National Institute for Communicable Diseases (NICD) reported 20 new confirmed cases and no new deaths of measles. This is a 150% increase in the number of new confirmed cases compared to the last report. Cumulatively, 639 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%).

South Sudan: Since the last report (14 April 2023), the MoH reported 139 new cases (41 confirmed; 98 suspected) and no new deaths of measles. This is a 75% increase in the number of new cases compared to the last report. Cumulatively, 2,001 cases (175 confirmed; 1,826 suspected) and 14 deaths (CFR: 0.8%) of measles were reported from 58 of the 79 counties across the country.

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 (405; 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:

Mauritania: The MoH activated a national EOC to coordinate the response and continues to conduct case investigation, enhanced surveillance and measles vaccination campaigns in the affected communities.

Senegal: The MoH in collaboration with partners plans to conduct vaccination activities in the most 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.

South Sudan: On 25 April 2023, the MoH launched a nation-wide measles vaccination campaign, and continues to strengthen routine immunization through mobile outreaches, provide supportive case management and to conduct enhanced surveillance across the country.
Lassa fever in Africa

980 confirmed case(s)
5,222 suspected case(s)
167 death(s) (CFR: 17%)

Update to event:
Since the beginning of this year, 6,202 cases (980 confirmed; 5,222 suspected) and 167 deaths (CFR: 17%) of Lassa fever were reported from five AU MS: Ghana (27 cases; 1 death), Guinea (3; 2), Liberia (19; 4), Nigeria (6,147; 158) and Sierra Leone (6; 2). This week, 145 new cases and two new deaths were reported from Nigeria.

Nigeria: Since the last update (12 May 2023), the Nigeria Centre for Disease Control (NCDC) reported 145 new cases (11 confirmed; 134 suspected) and two new deaths (CFR: 18%) of Lassa fever. This is a 26% decrease in the number of new cases reported compared to the last report. Cumulatively, 6,147 cases (929 confirmed; 5,218 suspected) and 158 deaths (CFR: 17%) of Lassa fever have been reported from 28 of 36 states and the federal capital territory. Healthcare workers account for 3% (28) of all confirmed cases reported this year.

Response:
Nigeria: A national Lassa fever multi-partner, multi-sectoral EOC was activated in NCDC to coordinate all response activities: surveillance, case management, risk communication and laboratory diagnosis at all levels.
COVID-19 in Africa

12,298,555 confirmed case(s)
257,080 death(s) (CFR: 2.1%)

Update to event:
As of 6 p.m. Eastern African Time (EAT) 25 May 2023, a total of 12,298,555 COVID-19 cases and 257,080 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-two (76%) 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, 548.7 million people have been partially vaccinated, and 432.8 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 20 (15 - 21 May 2023), 1,187 new COVID-19 cases were reported, which is a 3% decrease in the number of new cases reported compared to the previous week (19). The Northern region accounted for 41% of the new COVID-19 cases reported this week, followed by the Eastern (9.8%), Central (22%), Southern (33%), Western (2%) and regions. Eswatini (11) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, nine new COVID-19 deaths were reported in Africa, with the Northern region accounting for 56% of the new COVID-19 deaths reported this week, followed by the Central (22%) and Southern (22%). 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, Hotspot Dashboard, PGI Dashboard, Vaccination Dashboard and the Africa CDC COVID-19 brief https://au.int/sites/default/files/documents/42763-doc-AfricaCDC_COVIDBrief_5May23_EN.pdf.
Dengue fever in Senegal

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

**Update to event:**
Since the last update, the MoH, Senegal reported 27 new confirmed cases and no new deaths of dengue fever. Cumulatively, 40 confirmed cases and no deaths of dengue fever were reported from three regions: Thilogne (38), Popenguine (1) and Pikine (1) regions. Females account for 53% of all the confirmed cases.

**Response:**
The MoH continues to strengthen surveillance activities in all the affected regions.
Animal Event Updates

H5N1 in Africa

2,430,067 confirmed case(s)
576,675 death(s) (CFR: 23.7%)

Update to event:
Since the beginning of this year, 11 outbreaks resulting in 2,430,067 cases and 576,675 deaths (CFR: 23.7%) of highly pathogenic avian influenza (HPAI) H5N1 in poultry were reported from four AU MS: Gambia (3 outbreaks; 7,569 cases; 7,569 deaths), Nigeria (3; 2,381,959; 528,567), Senegal (1; 536; 536) and South Africa (4; 40,003; 40,003). This week, three outbreaks among domestic birds were reported in Nigeria.

Nigeria: On 23 May 2023, the Ministry of Agriculture (MoAg) reported three outbreaks of HPAI H5N1 with 2,381,959 cases and 528,567 deaths (CFR: 22%) of domestic poultry bird from 11 states of the 36 states and federal capital territory in Nigeria. Confirmatory tests were conducted at the National Veterinary Research Institute using polymerase chain reaction.

Response:
Nigeria: The MoAg has instituted several control measures which include: strengthening of the surveillance system, movement control, disinfection of infected poultry houses and stamping out of 1,866,604 affected poultry birds.

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.