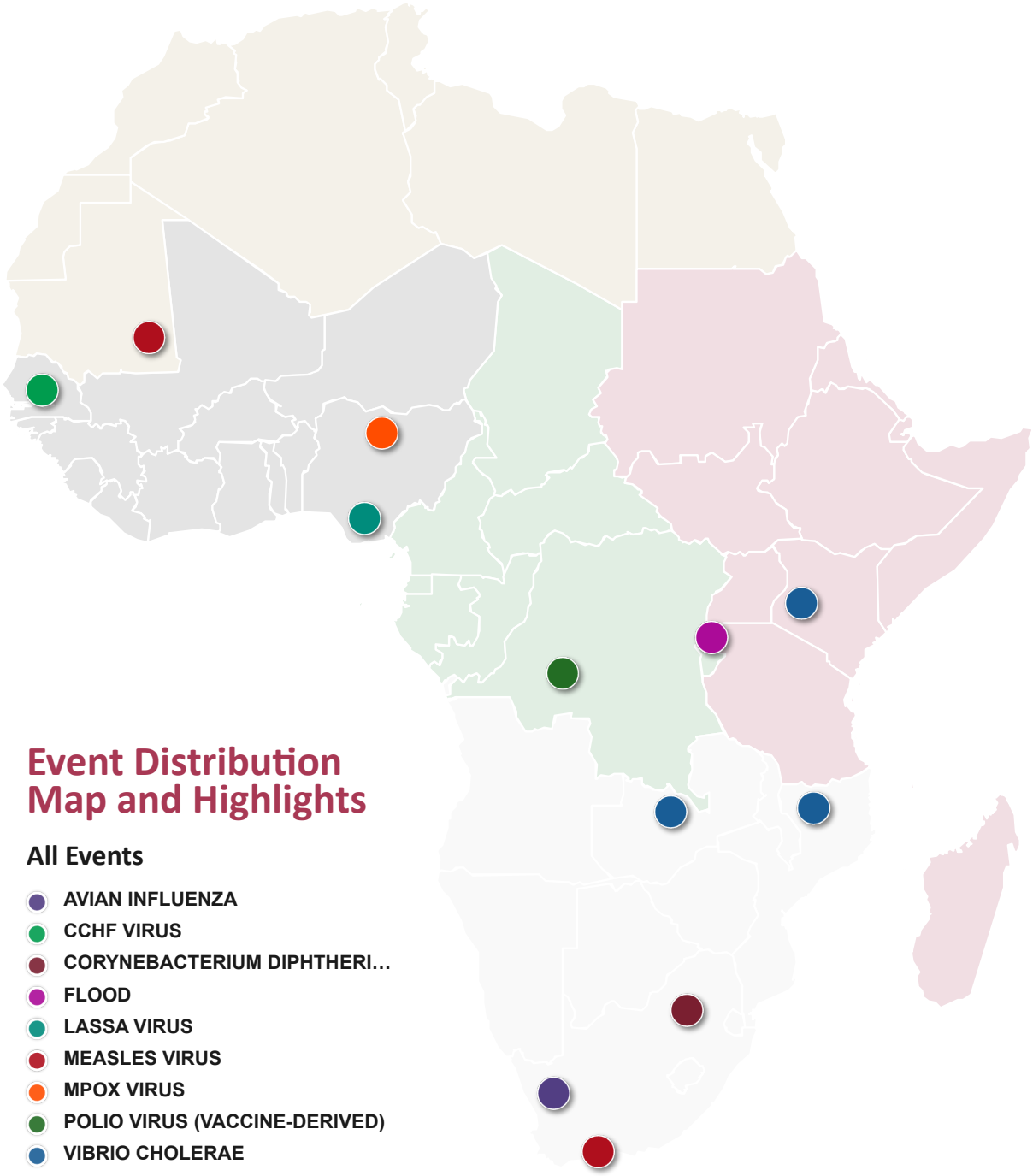
# Africa CDC Weekly Event Based Surveillance Report

05-May-2023



# Initial Reports

## High Risk Events

### CCHF in Senegal

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

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| **CCHF virus** | Agent/Pathogen | **03-May-2023** | First Reported by Africa CDC | **Initial Report** | Previous Africa CDC Report: |
| **20-Apr-2023** | First Occurred | **Senegal** | Country | **Dakar region** | Location |
| **Local SitRep** | Source | **LOW** | GeoScope | **HIGH** | Risk Assessment |

**Description:**

On 21 April 2023, the Senegal MoH reported an outbreak of Crimean-Congo hemorrhagic fever (CCHF) in Fadia city, Guediawaye district, Dakar region. The index case was a 35-year-old-male butcher from Fadia city. On 10 April 2023, he presented at Dalal Jamm hospital with flu-like symptoms. On 21 April 2023, blood samples were collected and CCHF was confirmed at Institut Pasteur, Dakar by enzyme-linked immunosorbent assay (ELISA) and polymerase chain reaction (PCR). He died on 22 April 2023 after developing hemorrhagic symptoms and was given a safe and dignified burial on 24 April 2023. So far, no other confirmed case has been reported, however, 19 suspected cases have been identified from the contact list and are being investigated.

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 Senegal was in November 2022 with a single case and no death reported from Dakar.

**Response:**

The MoH has activated the emergency operation centre and has also deployed a multi-sectoral, multi-disciplinary team to Dakar to support with response activities. A total of 87 contacts were identified from two districts namely Guediawaye (83 contacts) and Dakar ciity centre (4). All contacts are being monitored and three of the 87 contacts have completed their monitoring cycle. Additionally, the veterinary services are monitoring livestock in the affected area.

## Moderate Risk Events

# Diphtheria in South Africa

**2** confirmed case(s)
**0** death(s) **(CFR: 0.0%)**

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| **Corynebacterium diphtheriae** | Agent/Pathogen | **04-May-2023** | First Reported by Africa CDC | **Initial Report** | Previous Africa CDC Report: |
| **30-Apr-2023** | First Occurred | **South Africa** | Country | **2 Provinces** | Location |
| **National PHI** | Source | **LOW** | GeoScope | **MODERATE** | Risk Assessment |

**Description:**

On 2 May 2023, the National Institute for Communicable Diseases (NICD) of South Africa reported two confirmed cases and no deaths of of diphtheria from KwaZulu Natal (1 confirmed case) and Western Cape provinces (1).

Diphtheria is a bacterial infection caused by Corynebacterium diphtheriae, a toxin-producing bacteria. Diphtheria manifests in two forms: respiratory (most commonly seen) and cutaneous. Person-to-person transmission is usually through respiratory droplets (respiratory form) and contact with infected sores and ulcers on the skin (cutaneous form). Symptoms for the respiratory form include weakness, sore throat, fever, swollen lymph nodes, difficulty breathing, and death in more severe cases. The toxin produced by the bacteria destroys healthy respiratory tissues forming a thick gray coating on the throat, tonsils and nose making it difficult to breathe and swallow. The toxin can also affect the heart, nervous system, and kidneys if the infection is systemic. The overall case fatality rate for the respiratory form of diphtheria is between 5 to 10%, with higher death rates (up to 20%) among persons less than five or older than 40 years old. Laboratory diagnosis is made via bacterial culture, Elek test or PCR. Treatment includes anti-toxins and antibiotic therapy. Vaccines are available to protect against infection and typically given in four doses as part of routine immunization programs. In South Africa, the last outbreak of diphtheria occurred in 2022, in which three confirmed cases with no deaths were reported from Eastern Cape and Western Cape provinces.

**Response:**

Samples collected from all contacts tested negative for diphtheria. Currently there is no diphtheria anti-toxin available in the country. The Western Cape provincial department of health is working with the South African Health Products Regulatory Authority to get more stock into the country.

# Human Event Updates

## High Risk Events

### COVID-19 in Africa

**12,294,922** confirmed case(s)
**257,040** death(s) **(CFR: 2.1%)**

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| **SARS-CoV-2** | Agent/Pathogen | **21-Feb-2020** | First Reported by Africa CDC | **28-Apr-2023** | Previous Africa CDC Report: |
| **14-Feb-2020** | First Occurred | **Africa Combo** | Country | **All 55 MS** | Location |
| **Ministry of Health** | Source | **VERY HIGH** | GeoScope | **HIGH** | Risk Assessment |

**Update to event:**

As of 6 p.m. East African Time (EAT) 3 May 2023, a total of 12,294,922 COVID-19 cases and 257,040 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. Forty-four (80%) AU MS are reporting case fatality rates (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, 12 Member States reported the Omicron sublineage (BF.7 or BA.5.2.1.7), ten MS reported the Omicron sublineage (XBB.1.5), 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, 546.5 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 17 (24 April - 3 May 2023), 1,040 new COVID-19 cases were reported, which is a 66% decrease in the number of new cases reported compared to the previous week (16). The Northern region accounted for 45% of the new COVID-19 cases reported this week, followed by the Central (18%), Eastern (18%), Western (16%) and Southern (3%) regions. Two AU Member States, Cabo Verde (29) and Comoros (9) had the highest number of new daily COVID-19 cases per million population among all MS.

Last week, 11 new COVID-19 deaths were reported in Africa, which is 54% decrease in new deaths reported compared to the previous week. The Northern region accounted for 80% of the new COVID-19 deaths reported this week, followed by the Western (20%). No deaths were reported in the Central, Eastern, Southern regions this week.

More than 27 thousand tests were conducted during the past week, reflecting a 7% increase in the number of tests compared to the previous week. The weekly % test positivity decreased from 13% to 4% compared to the previous week. Since February 2020, over 126.4 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, and Vaccination Dashboard.

# Mpox in Africa

**196** confirmed case(s)
**26** death(s) **(CFR: 13.3%)**

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| **Mpox virus** | Agent/Pathogen | **17-Jan-2023** | First Reported by Africa CDC | **21-Apr-2023** | Previous Africa CDC Report: |
| **01-Jan-2023** | First Occurred | **Africa Combo** | Country | **5 MS** | Location |
| **Ministry of Health** | Source | **HIGH** | GeoScope | **HIGH** | Risk Assessment |

**Update to event:**

Since the beginning of this year, 196 confirmed cases and 26 deaths (CFR: 13.3%) of mpox have been reported from five endemic AU MS: Central African Republic (CAR) (12 confirmed cases; 1 death), Democratic Republic of Congo (DRC) (98; 23), Ghana (8; 0), Liberia (6; 0) and Nigeria (72; 2). This week, two new confirmed cases and no new deaths of mpox were reported from Nigeria.

**Nigeria:** Since the last update (21 April 2023), the Nigeria Centre for Disease Control (NCDC) reported two new confirmed cases and no new death of mpox. There is a 50% decrease in the number of new confirmed cases reported compared to the last report. Cumulatively, 72 confirmed cases and two deaths (CFR: 2.8%) of mpox have been reported from seven of the 36 states and federal capital territory (FCT) this year.

**Note:** In 2022, the continent reported 1,230 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 (4; 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:**

**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.

# Cholera in Africa

**75,460** confirmed case(s)
**20,276** suspected case(s)
**1,979** death(s) **(CFR: 2.1%)**

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| **Vibrio cholerae** | Agent/Pathogen | **06-Jan-2023** | First Reported by Africa CDC | **28-Apr-2023** | Previous Africa CDC Report: |
| **01-Jan-2023** | First Occurred | **Africa Combo** | Country | **15 MS** | Location |
| **Ministry of Health** | Source | **MODERATE** | GeoScope | **HIGH** | Risk Assessment |

**Update to event:**

Since the beginning of this year, 95,736 cases (75,460 confirmed; 20,276 suspected) and 1,979 deaths (CFR: 2.1%) of cholera were reported from 15 AU MS: Burundi (120 cases; 1 death), Cameroon (1,938; 312), DRC (7,620; 50), Ethiopia (245; 11), Eswatini (2; 0), Kenya (6,281; 97), Malawi (42,353; 1,247), Mozambique (29,530; 131), Nigeria (1,336; 79), Somalia (4,016; 14), South Africa (11; 1), South Sudan (1,073; 2), Tanzania (82; 3), Zambia (495; 11) and Zimbabwe (634; 20). This week, 1,787 new cases and 24 new deaths of cholera were reported from five MS: Kenya, Malawi, Mozambique, Zambia and Zimbabwe.

**Kenya:** Since the last report (21 April 2023), the MoH reported 750 new cases (129 confirmed; 621 suspected) and 11 new deaths (CFR: 1.4%) of cholera. This is a 196% increase in the number of new cases compared to the last report. Cumulatively, 6,281 cases (1,251 confirmed; 5,030 suspected) and 97 deaths (CFR: 1.5%) were reported from 19 of 47 counties across the country. Since the start of the outbreak in October 2022, a total of 9,587 cases (2,412 confirmed; 7,175 suspected) and 153 deaths (CFR: 1.6%) were reported from 19 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 (28 April 2023), the MoH reported 165 new confirmed cases and nine new deaths (CFR: 5.4%) of cholera from 20 districts. This is a 43% decrease in the number of new confirmed cases and a 10% decrease in the number of new deaths compared to the last report. Cumulatively, 42,353 confirmed cases and 1,247 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi this year.

**Mozambique:** Since the last update (28 April 2023), the MoH reported 698 new confirmed cases and two new deaths (CFR: 0.3%) of cholera. This is a 57% decrease in the number of new cases and 60% decrease in the number of new deaths compared to the last report. Cumulatively, 29,530 confirmed cases and 131 deaths (CFR: 0.4%) have been reported from 10 of 11 provinces this year.

**Zambia:** Since the last update (28 April 2023), the Zambia National Public Health Institute (ZNPHI) reported 95 new cases (41 confirmed; 54 suspected) and three new deaths of cholera (CFR: 3.2%). Cumulatively, 495 cases (168 confirmed; 327 suspected) and 11 deaths (CFR: 2.2%) have been reported from eight of 116 districts this year.

**Zimbabwe:** Since the last update (28 April 2023), the MoH reported 79 new cases (18 confirmed; 61 suspected) and one new death (CFR: 1.3%) from cholera. This is a 1% decrease in the number of new cases and a 90% decrease in the number of new deaths compared to the last report. Cumulatively, 634 cases (133 confirmed; 501 suspected) and 20 deaths (CFR: 3.2%) 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 conducted oral cholera vaccination in five high burden districts. Additionally the MoH continues to intensify sample testing on all suspected cases.

**Mozambique:** The MoH conducted oral cholera vaccination in the four high burden provinces of Manica, Sofala Tete and Zambezia and achieved a 100% vaccination coverage.

**Zambia:** ZNPHI continues to coordinate response activities. Additionally, ZNPHI is conducting genomic sequencing to guide response.

**Zimbabwe:** The MoH continues to sensitize health workers to increase their index of suspicion for cholera cases. In addition, the MoH has pre-positioned commodities to cholera hotspots districts, reviewed and updated cholera and typhoid guidelines for use in the country.

**Africa CDC response**

Africa CDC supported Malawi in case management and infection prevention and control capacity building among health care workers.

## Measles in Africa

**1,598** confirmed case(s)
**66,349** suspected case(s)
**676** death(s) **(CFR: 1.0%)**

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| **Measles virus** | Agent/Pathogen | **06-Jan-2023** | First Reported by Africa CDC | **28-Apr-2023** | Previous Africa CDC Report: |
| **01-Jan-2023** | First Occurred | **Africa Combo** | Country | **16 MS** | Location |
| **Ministry of Health** | Source | **MODERATE** | GeoScope | **HIGH** | Risk Assessment |

**Update to event:**

Since the beginning of this year, 67,947 cases (1,598 confirmed; 66,349 suspected) and 676 deaths (CFR: 1.0%) of measles were reported from 16 AU MS: Botswana (13 cases; 0), Cameroon (463; 3), CAR (467; 0), Chad (1,303; 2), Congo (7; 0), DRC (60,546; 649), Ethiopia (907; 0), Ghana (212; 0), Kenya (9; 1), Libya (391; 2), Mauritania (429; 3), Senegal (147; 0), South Africa (605: 0), South Sudan (1,862; 14), Uganda (258; 1) and Zambia (328; 1). This week, a total of 59 cases and one new death (CFR: 5%) were reported from Mauritania and South Africa.

**Mauritania:** Since the last update (28 April 2023), the MoH reported 20 cases (8 confirmed, 12 suspected) and one new death (CFR: 5%) of measles from 10 provinces. This is a 50% decrease in the number of new cases reported compared to the last report. Cumulatively, 429 cases (182 confirmed; 247 suspected) and three deaths (CFR: 0.7%) of measles have been reported from 10 of the 13 regions in Mauritania. Of all confirmed cases reported, 34% were reported from the Hodh Echargui region and 80% were not vaccinated against measles virus. There has been a decline in the number of measles cases reported in Mauritania over the last 2 weeks.

**South Africa:** Since the last update (21 April 2023), the NICD reported 39 new confirmed cases and no new deaths of measles. This is a 97% decrease in the number of new confirmed cases compared to the last report. Cumulatively, 605 confirmed cases and no deaths have been reported from all the nine provinces this year. The most affected age groups are 5 - 9 years (43%) followed by 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.

**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:**

**Mauritania:** The MOH activated national EOC to coordinate the response and continues to conduct case investigations, enhanced surveillance and measles vaccination campaigns in the affected communities

**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.

# Lassa fever in Africa

**948** confirmed case(s)
**4,912** suspected case(s)
**163** death(s) **(CFR: 17.2%)**

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| **Lassa virus** | Agent/Pathogen | **27-Jan-2023** | First Reported by Africa CDC | **28-Apr-2023** | Previous Africa CDC Report: |
| **02-Jan-2023** | First Occurred | **Africa Combo** | Country | **5 MS** | Location |
| **Ministry of Health** | Source | **MODERATE** | GeoScope | **HIGH** | Risk Assessment |

**Update to event:**

Since the beginning of this year, 5,860 cases (948 confirmed; 4,912 suspected) and 163 deaths (CFR: 17.2%) of Lassa fever were reported from five AU MS: Ghana (27 cases; 1 deaths), Guinea (3; 2), Liberia (19; 4), Nigeria (5,805; 154) and Sierra Leone (6; 2). This week, 226 new cases and two new deaths were reported from Nigeria.

**Nigeria:** Since the last update (28 April 2023), the NCDC reported 226 new cases (20 confirmed; 206 suspected) and two new deaths (CFR: 10%) of Lassa fever. This is a 46% and 100% increase in the number of new cases and deaths reported respectively, compared to the last report. Cumulatively, 5,805 cases (897 confirmed; 4,908 suspected) and 154 deaths (CFR: 17.2%) of Lassa fever have been reported from 26 of 36 states and the FCT. Healthcare workers account for 3.1% (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.

## Moderate Risk Events

# Polio (vacc) in Africa

**53** confirmed case(s)
**0** death(s) **(CFR: 0%)**

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| **Polio virus (vaccine-** | Agent/Pathogen | **01-Jan-2023** | First Reported by Africa CDC | **28-Apr-2023** | Previous Africa CDC Report: |
| **01-Jan-2023** | First Occurred | **Africa Combo** | Country | **9 MS** | Location |
| **Global Polio Eradication** | Source | **MODERATE** | GeoScope | **MODERATE** | Risk Assessment |

**Update to event:**

Since the beginning of 2023, the continent has reported 21 cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) from DRC (9), Madagascar (9), Mozambique (3) and 32 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) from 7 MS: Benin (2), Burundi (3), CAR (5), Chad (5), DRC (15), Nigeria (1) and Somalia (1). This week, eight new cases of cVDPV1 and cVDPV2 have been reported from DRC.

**DRC:** Since the last update (14 April 2023), the MoH reported three cVDPV1 and five cVDPV2 new confirmed cases and no deaths from Kapolowe, Lukafu and Pweto provinces. Cumulatively, nine cases of cVDVP1 and 15 cases of cVDPV2 have been reported from DRC this year.

**Response:**

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

# Animal Event Updates

## H5N1 in Africa

**40,539** confirmed case(s)
**40,539** death(s) **(CFR: 100%)**

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| **Influenza H5N1** | Agent/Pathogen | **04-May-2023** | First Reported by Africa CDC | **Initial Report** | Previous Africa CDC Report |
| **01-May-2023** | First Occurred | **Africa Combo** | Country | **2 MS** | Location |
| **OIE** | Source | **LOW** | GeoScope | **MODERATE** | Human Risk Assessment |
| **HIGH** | Animal Risk Assessment | | | | |

**Update to event:**
Since the beginning of this year, five outbreaks resulting in 40,539 cases and 40,539 deaths (CFR: 100%) of highly pathogenic avian influenza (HPAI) H5N1 in poultry were reported from two AU MS: Senegal (1 outbreak; 536 cases; 536 deaths), and South Africa (4; 40,003; 400,003). This week, a total of 40,003 cases and 40,003 deaths have been reported among poultry and wild birds from South Africa.

**South Africa:** On 2 May 2023, South Africa reported one outbreak of HPAI (H5N1) in poultry from Western Cape province and three wild birds from Gauteng and Western Cape provinces. An outbreak resulting in 40,000 cases and 40,000 deaths (CFR: 100%) among poultry was reported from Western Cape province, while among wild birds, a total of three cases and three deaths (CFR: 100%) were reported from Gauteng (1 outbreak; 1 case; 1 death) and Western Cape (2; 2; 2) provinces.

**Response:**
**South Africa:** The provincial veterinary authorities are culling and disposing off sick birds in affected firms.

# Other Event Updates

## Flood in Rwanda

**130** death(s)

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| **Flood** | Agent/Pathogen | **04-May-2023** | First Reported by Africa CDC | **Initial Report** | Previous Africa CDC Report |
| **03-May-2023** | First Occurred | **Rwanda** | Country | **3 Provinces** | Location |
| **Ministry of Environment** | Source | **LOW** | GeoScope | **MODERATE** | Human Risk Assessment |

**Update to event:**

On 3 May 2023, the Ministry in Charge of Emergency Management (MINEMA) reported the occurrence of floods and landslides caused by heavy rainfall which occurred on 2 May 2023. The floods and landslides affected 10 districts in the Northern, Southern and Western provinces of the country. As of 4 May 2023, 130 deaths, 77 injuries and 36 hospitalisations have been reported from these three provinces. In addition, a total of 5,174 households have been destroyed by the floods.

A flash flood is a rapid flooding of low-lying areas, that may be caused by heavy rain associated with a severe thunderstorm, hurricane, or tropical storm. Flash floods are a significant hazard with potential to cause fatalities and displacement of people. Flash floods can also deposit large quantities of sediments on floodplains.

**Response:**

MINEMA activated a command center to coordinate the response. Some measures taken include evacuation and temporary relocation of residents from the high-risk areas and provision of food and other basic supplies to displaced persons.

**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.**