

Africa CDC Epidemic Intelligence Report

Date of issue: 6 Oct 2023

Events reported
in 2023

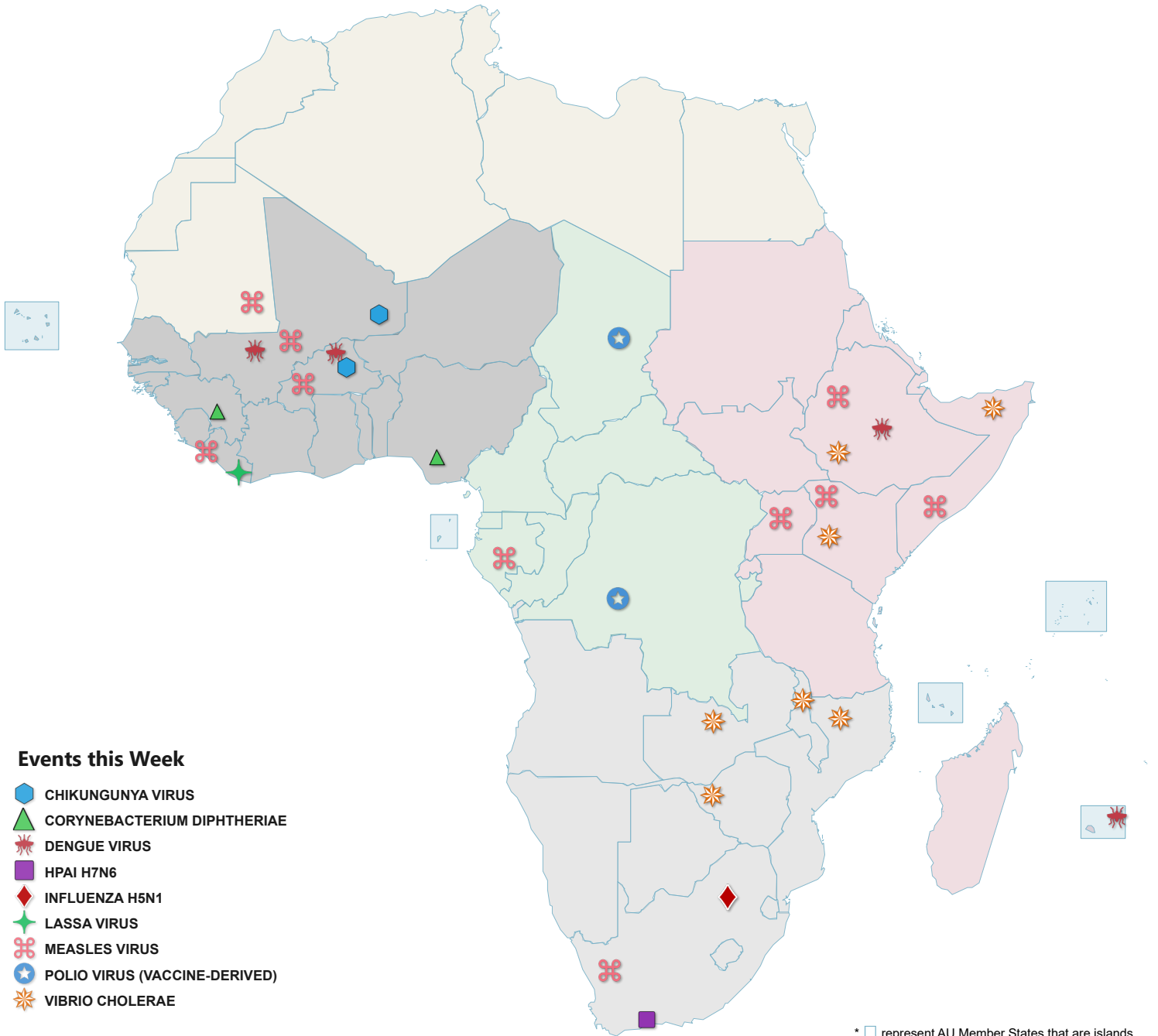
144

Events highlighted
this week

28

New events since
last issue

2



Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the African Union.

High Risk Events

Corynebacterium diphtheria in Africa

7,877 confirmed case(s)
561 human deaths (**CFR: 7.1%**)

Agent/Pathogen	Corynebacterium diphtheriae	First Reported	4-Aug-2023	Previous Report Update	29-Sep-2023
First Occurred	18-Jan-2023	Country	Multiple countries	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	HIGH

Update to Event:

Since January 2023, a total of 13,403 cases (7,877 confirmed; 5,526 suspected) and 561 deaths (Case Fatality Ratio (CFR): 7.1%) of diphtheria have been reported in four African Union (AU) Member States (MS): Algeria: (80 cases, 10 deaths), Guinea (417; 60), Niger (865; 37) and Nigeria (12,041; 454). This week, 101 new cases and three new deaths of diphtheria were reported from Guinea and Nigeria.

Guinea: Since the last update (29 September 2023), the MoH reported 68 new suspected cases and three new deaths (CFR: 4.4%) of diphtheria. Cumulatively, 417 cases (14 confirmed; 403 suspected) and 60 deaths (CFR:12.2%) have been reported from all four districts in Kankan region: Kankan (11 cases; 11 deaths), Kouroussa (1; 1), Mandian (13; 0) and Siguiri (392; 48).

Nigeria: Since the last update (29 September 2023), the Nigeria Centre for Disease Control reported 33 new cases (7 confirmed; 26 suspected) and no new deaths of diphtheria. Cumulatively, 12,041 cases (7,487 confirmed; 4,554 suspected) and 454 deaths (CFR: 6%) have been reported from 31 of the 36 states of Nigeria. More than 73% of all cases were children between 1-14 years; 20.7 % of whom were fully vaccinated.

Response by MS/partner/Africa CDC:

Guinea: The MoH has vaccinated 9,510 persons with diphtheria antitoxin in response to the outbreak. Additionally, it continues to strengthen case management, laboratory and risk communication in the region.

Nigeria: The National Primary Health Care Development Agency (NPHCDA) and partners engaged five states (Kaduna, Katsina, Bauchi, Kano and Yobe) to implement a response in 25 high burden local government areas within their states. The NPHCDA has enhanced vaccination using pentavalent (diphtheria, pertussis, tetanus, hepatitis B and haemophilus influenza type b) and bivalent (tetanus-diphtheria) vaccines in 14 states.

Moderate Risk Events

COVID-19 in Africa

12,320,292 confirmed case(s)
257,172 human deaths (**CFR: 2.1%**)

Agent/Pathogen	SARS-CoV-2	First Reported	21-Feb-2020	Previous Report Update	29-Sep-2023
First Occurred	14-Feb-2020	Country	Multiple countries	Location	All 55 MS
Source	Ministry of Health	GeoScope	VERY HIGH	Human Risk Assessment	MODERATE

Update to Event:

As of 6 p.m. East African Time (EAT) 5 October 2023, a total of 12,320,058 COVID-19 cases and 257,167 deaths (CFR: 2.1%) have been reported by the 55 African Union Member States (MS). This represents 2% of all cases and 4% of all deaths reported globally. Fifty-three MS have reported COVID-19 cases infected with the Alpha (50 MS), Beta (45), Delta (53), Gamma (5) and Omicron (51) variants of concern (VOC). Additionally, 32 MS have reported the presence of the Omicron BA.2 sub-variant, 17 Member States reported the Omicron sub lineage (XBB.1.5), 12 MS reported the Omicron sub lineage (BF.7 or BA.5.2.1.7), and 2 Member States have reported the Omicron sub lineage (XBB.1.16). Another sub-variant of Omicron (B.1.1.529) called EG.5 has been detected and reported in Africa, Americas, Asia, Europe and Oceania. As of 5 October 2023, nine Member States: Cape Verde, Central African Republic, Egypt, Kenya, Mauritius, Morocco, South Africa, Tunisia and Uganda have reported the presence of this new variant of interest (VOI). Following an initial risk assessment conducted by the World Health Organization (WHO), the public health risk associated with EG.5 is currently rated as low on a global level, similar to the risk of XBB.1.16 and other VOIs. 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, 570.6 million people have been partially vaccinated, and 446.9 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 39 (25 September - 1 October), 170 new COVID-19 cases were reported from the Western region. No cases were reported in the Central, Eastern, Northern and Southern regions. Last week, no new COVID-19 deaths were reported in Africa. More than 440 new tests were conducted during the past week. Since February 2020, over 133 million COVID-19 tests have been conducted in Africa.

Response by MS/partner/Africa CDC:

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

Cholera in Africa

85,630 confirmed case(s), **107,900** suspected case(s)
3,003 human deaths (CFR: 1.6%)

Agent/Pathogen	Vibrio cholerae	First Reported	6-Jan-2023	Previous Report Update	29-Sep-2023
First Occurred	1-Jan-2023	Country	Multiple countries	Location	18 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE

Update to Event:

Since the beginning of this year, 193,530 cases (85,630 confirmed; 107,900 suspected) and 3,003 deaths (CFR): 1.6% of cholera were reported from 18 AU MS: Burundi (1,038 cases; 9 deaths), Cameroon (20,672; 487), Congo (93; 9), Democratic Republic of Congo (DRC) (36,084; 303), Eswatini (2; 0), Ethiopia (24,200; 299), Kenya (8,811; 145), Malawi (42,927; 1,260), Mozambique (34,717; 144), Nigeria (2,860; 84), Somalia (13,652; 35), South Africa (1,074; 47), South Sudan (1,471; 2), Sudan (265; 18), Tanzania (87; 3), Uganda (78; 10), Zambia (930; 19) and Zimbabwe (4,569; 129).

This week, 1,380 new cases and 13 new deaths of cholera were reported from seven AU MS: Ethiopia, Kenya, Malawi, Mozambique, Somalia, Zambia and Zimbabwe.

Ethiopia: Since the last update (29 September 2023), the Ethiopia Public Health Institute (EPHI) reported 548 new suspected cases and no new deaths of cholera. Cumulatively, 24,200 cases (26 confirmed; 24,174 suspected) and 299 deaths (CFR: 1.2%) have been reported from nine of the 11 regions in Ethiopia. The outbreak is active in eight of the 11 regions in Ethiopia. Oromia and the South Ethiopia region account for 66% of all cases reported.

Kenya: Since the last update (29 September 2023), the MoH reported 10 new cases (1 confirmed; 9 suspected) and no new deaths of cholera. Cumulatively, 8,811 cases (1,828 confirmed; 6,983 suspected) and 145 deaths (CFR: 1.6%) were reported from 27 of the 47 counties in Kenya. Currently, the outbreak is active in one (Migori) of the 27 counties. Thirty-three percent of the total cases are children below 10 years.

Malawi: Since the last update (29 September 2023), the MoH reported seven new confirmed cases and no new deaths of cholera from two districts: Blantyre and Nsanje. One of the two cases was imported from Mozambique. In the past two weeks, cholera cases were reported from six districts: Karonga, Lilongwe, Mulanje, Nkhotakota, Nsanje and Thyolo. Cumulatively, 42,927 confirmed cases and 1,260 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi.

Mozambique: Since the last update (15 September 2023), the MoH reported 50 new confirmed cases and no new deaths of cholera. Cumulatively, 34,717 confirmed cases and 144 deaths (CFR: 0.4%) have been reported from 10 of the 11 provinces.

Somalia: Since the last update (22 September 2023), the MoH reported 409 new cases (15 confirmed; 394 suspected) and two new deaths of cholera. Cumulatively, 13,652 cases (203 confirmed; 13,449 suspected) and 35 deaths (CFR: 0.3%) have been reported from 29 of 74 districts in the country. Fifty-four percent of the cases are children under five years. This outbreak has been uninterrupted in the drought-affected districts since 2022 and in the Banadir region since 2017.

Zambia: Since the last update (29 September 2023), the Zambia National Public Health Institute (ZNPPI) reported 13 new suspected cases and no new deaths of cholera. Cumulatively, 930 cases (359 confirmed; 571 suspected) and 19 deaths (CFR: 2.0%) have been reported 10 of the 116 districts in Zambia this year. The outbreak is currently active only in Nsama district.

Zimbabwe: Since the last update (22 September 2023), the MoH reported 343 new cases (16 confirmed; 327 suspected) and 11 new deaths (CFR: 3.2%) of cholera. Buhera district accounts for over 80% of new cases. Cumulatively, 4,569 cases (934 confirmed; 3,645 suspected) and 129 deaths (CFR: 2.8%) have been reported from 41 of 59 districts.

Response by MS/partner/Africa CDC:

Africa CDC rapid response team continues to support the Republic of Malawi to enhance surveillance, risk communication, and infection prevention and control in districts where the outbreak is currently ongoing. Additionally, Africa CDC is supporting the zonal cholera after action review meetings in zones where the end of cholera was declared.

Measles in Africa

19,850 confirmed case(s), **256,505** suspected case(s)
3,628 human deaths (**CFR: 1.3%**)

Agent/Pathogen	Measles virus	First Reported	6-Jan-2023	Previous Report Update	29-Sep-2023
First Occurred	1-Jan-2023	Country	Multiple countries	Location	27 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE

Update to Event:

Since the beginning of this year, 276,355 (19,850 confirmed; 256,505 suspected) and 3,628 deaths (CFR: 1.3%) of measles were reported from 27 AU MS: Angola (6,203 cases; 53 deaths), Botswana (13 cases; 0 death), Burkina Faso (1,648; 2), Burundi (319; 0), Cameroon (8,503; 64), Central African Republic (CAR) (2,873; 0), Chad (8,915; 7), Congo (520; 4), DRC (190,598; 3,187), Ethiopia (16,713, 127), Gabon (2,744; 0), Gambia (208; 0), Ghana (212; 0), Guinea (1,004; 4), Kenya (1,288; 23), Libya (391; 2), Liberia (7,883; 8), Mali (1,572; 0), Mauritania (755; 5), Mozambique (1,342; 0), Niger (1,690; 0), Senegal (4,451; 0), Somalia (9,363; 0), South Africa (834; 0), South Sudan (5,722; 140), Uganda (269; 1) and Zambia (328;1). This week, a total of 2,830 new cases and 26 new deaths were reported from nine MS: Burkina Faso, Ethiopia, Guinea, Liberia, Mali, Mauritania, Somalia, South Africa and Uganda.

Burkina Faso: Since the last update (29 September 2023), the MoH reported 28 new suspected cases and no new deaths of measles. Cumulatively, 1,648 cases (324 confirmed; 1,324 suspected) and two deaths (CFR: 0.1%) of measles have been reported from 25 of 70 health districts in Burkina Faso.

Ethiopia: Since the last update (15 September 2023), the EPHI reported 1,039 new suspected cases and three new deaths (CFR: 0.2%) of measles. Cumulatively, 16,713 suspected cases and 127 deaths (CFR: 0.7%) have been reported from Ethiopia. The outbreak is active in eight of 11 regions in the country, four of which account for 51% of the cases; Amhara, Oromia, Somali and Southern Nations, Nationalities and People's region.

Gabon: Since the last update (22 September 2023), the MoH reported four new suspected cases and no new deaths of measles from Ouest (3 suspected cases) and Sud-Est (1) regions. Cumulatively, 2,744 cases (1,143 confirmed; 1,601 suspected) and two deaths (CFR: 0.1%) of measles have been reported from 10 of 26 districts.

Kenya: Since the last update (24 January 2023), the MoH reported 1,279 cases (248 confirmed; 1,031 suspected) and 22 new deaths of measles. Cumulatively, 1,288 cases (251 confirmed; 1,037 suspected), and 23 deaths (CFR: 1.8%) have been reported from 16 counties in Kenya. Currently, the outbreak is active in 11 of the 47 counties in Kenya.

Liberia: Since the last update (22 September 2023), the National Public Health Institute of Liberia (NPHIL) reported 27 suspected cases and no deaths of measles in seven counties. Cumulatively, 7,883 cases (3,966 confirmed; 3,917 suspected) and eight deaths (CFR: 0.1 %) of measles were reported from all 15 counties in Liberia.

Mali: Since the last update (29 September 2023), the MoH reported five new suspected cases and no new deaths of measles. Cumulatively, 1,572 cases (357 confirmed; 1,215 suspected) and no deaths of measles have been reported from five of the nine regions in Mali.

Mauritania: Since the last update (26 May 2023), the MoH reported 240 suspected cases and one new death (CFR: 0.4%) of measles from Hodh ElGharbi region. Cumulatively, 755 cases (183 confirmed; 572 suspected) and five deaths (CFR: 0.7%) of measles have been reported from 11 of the 13 regions in Mauritania.

Somalia: Since the last update (29 September 2023), the MoH reported 209 new suspected cases and no new deaths of measles. Cumulatively, 9,363 cases (84 confirmed; 9,279 suspected) and no deaths of measles have been reported from Somalia. The most affected regions include Banadir (2,781 cases), Bay (1,891), and Lower Juba (1,355)- Seventy-three percent (73%) of the total cases were children under five years.

South Africa: Since the last update (29 September 2023), the National Institute for Communicable Diseases (NICD) reported 16 new confirmed cases and no new deaths of measles from three provinces. Cumulatively, 828 confirmed cases and no deaths have been reported from all the nine provinces this year.

Uganda (new event): On 28 September 2023, the Uganda MoH declared an outbreak of measles in Kiryandongo district, western Uganda. The declaration followed the identification of 11 cases (6 confirmed; 5 suspected) at Panyandoli health center IV. Laboratory confirmation was conducted at the Uganda Virus Research Institute by polymerase chain reaction (PCR). Cumulatively, 269 cases (21 confirmed; 248 suspected) and one death (CFR: 0.4%) have been reported from one of the 46 districts in Uganda. This is the second outbreak of measles reported in Kiryandongo district this year.

Measles is a highly contagious viral disease that can be transmitted from person to person via respiratory droplets from an infected person. It can cause severe disease, complications, and even death. Measles can affect anyone but is most common in children <5 years of age. Symptoms include a high fever, cough, runny nose and generalised body rash all over the body. The CFR for measles ranges between 0.05 and 6%. Measles can be prevented by administering measles vaccine in combination with mumps and rubella (MMR vaccine). Two doses of MMR vaccine could provide 97% protection against the disease.

Response by MS/partner/Africa CDC:

The MoH continues to strengthen measles surveillance and case management in all the affected areas.

Polio (vacc) in Africa					
282 confirmed case(s)					
0 human death(s)					
Agent/Pathogen	Polio virus (vaccine-derived)	First Reported	1-Jan-2023	Previous Report Update	29-Sep-2023
First Occurred	1-Jan-2023	Country	Multiple countries	Location	15 MS
Source	Global Polio Eradication Initiative	GeoScope	MODERATE	Human Risk Assessment	MODERATE

Update to Event:

Since the beginning of 2023, the continent has reported 81 cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) from DRC (61 cases), Madagascar (17), Mozambique (3) and 201 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) from 15 MS: Benin (3 cases), Burkina Faso (1), Burundi (3), CAR (10), Chad (36), Côte d’Ivoire (3), DRC (90), Guinea (5), Kenya (8), Mali (8), Niger (1), Nigeria (27), Tanzania (2), Somalia (3) and Zambia (1). This week, four new cases of cVDPV2 and no new deaths were reported from Chad and DRC.

Chad: Since the last update (1 Sep 2023), the MoH reported three new cases of cVDPV2 and no new deaths from three provinces: Dar Sila (1 case), Logone Oriental (1) and Mayo Kebbi Est (1). Cumulatively, 36 confirmed cases and no deaths of cVDPV2 were reported from eight of the 23 provinces in Chad.

DRC: Since the last update (29 September 2023), the MoH reported one new cVDPV2 case in Tshopo province. Cumulatively, 61 cVDPV1 cases, 90 cVDPV2 cases and no deaths have been reported from DRC.

Response by MS/partner/Africa CDC:

The MoHs continue to strengthen acute polio paralysis surveillance and routine immunization in the affected MS.

Lassa fever in Africa

1,142 confirmed case(s), **7,435** suspected case(s)
201 human deaths (**CFR: 2.3%**)

Agent/Pathogen	Lassa virus	First Reported	27-Jan-2023	Previous Report Update	22-Sep-2023
First Occurred	2-Jan-2023	Country	Multiple countries	Location	5 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE

Update to Event:

Since the beginning of this year, 8,577 cases (1,142 confirmed; 7,435 suspected) and 201 deaths (CFR: 2.3%) of Lassa fever were reported from five AU MS: Ghana (27 cases; 1 death), Guinea (102; 3), Liberia (298; 5), Nigeria (8,247; 181) and Sierra Leone (6; 2).

This week, three new cases and no new deaths were reported from Liberia.

Liberia: Since the last update (22 September 2023), the National Public Health Institute of Liberia (NPHIL) reported three new confirmed cases and no new deaths of Lassa fever in Bong county, Suakoko district. Cumulatively, 298 cases (53 confirmed, 245 suspected) and five deaths (CFR: 1.6%) of Lassa fever were reported from five of the 15 counties of Liberia. This outbreak has been sustained in Liberia; 67 confirmed cases and 22 deaths of lassa fever were reported in 2022.

Response by MS/partner/Africa CDC:

Liberia: The NPHIL with support from partners, provided technical and logistic support to the county health teams. The NPHIL continues to strengthen surveillance, vector control, risk communication and community engagement activities in the affected communities and districts.

Dengue fever in Africa

6,345 confirmed case(s), **53,923** suspected case(s)
95 human deaths (**CFR: 0.2%**)

Agent/Pathogen	Dengue virus	First Reported	26-Jul-2023	Previous Report Update	29-Sep-2023
First Occurred	1-Jan-2023	Country	Multiple countries	Location	12 MS
Source	Ministry of Health	GeoScope	LOW	Human Risk Assessment	MODERATE

Update to Event:

Since January 2023, a total of 60,268 cases (6,345 confirmed; 53,923 suspected) and 95 deaths (CFR: 0.2%) of dengue fever have been reported in 12 AU MS: Angola (3 cases; no deaths), Burkina Faso (44,895; 133), Chad (960; 1), Côte d'Ivoire (107; 0), Egypt (578; 0), Ethiopia (10,165; 4), Guinea (6; 1), Mali (349; 0), Mauritius (262; 0), Sao Tome and Principe (1,227; 11), Senegal (52; 0) and Sudan (1,664; 7).

This week, 8,122 new cases and no new deaths of dengue fever were reported from five AU Member States: Burkina Faso, Ethiopia, Mali and Mauritius.

Burkina Faso: Since the last update (29 September 2023), the MoH reported 8,016 new cases (2,994 confirmed; 5,022 suspected) and 37 new deaths (CFR: 0.4%) of dengue fever. Cumulatively, 44,895 cases (3,152 confirmed; 41,743 suspected) and 133 deaths (CFR: 0.3%) of dengue fever have been reported from seven of the 13 regions in Burkina Faso.

Ethiopia: Since the last update (29 September 2023), the EPHI reported nine new suspected cases and no new deaths of dengue fever. Cumulatively, 10,165 cases (127 confirmed; 10,038 suspected) and four deaths (CFR: 0.03%) reported from four of the 11 regions in Ethiopia. The majority (88%) of the cases were reported from the Afar region.

Mali: Since the last update (29 September 2023), the MoH reported 96 new cases (7 confirmed; 89 new suspected) and no new deaths of dengue fever. Cumulatively, 349 cases (31 confirmed; 218 suspected) and no deaths of dengue fever have been reported from 10 of the 75 districts in Mali.

Mauritius: Since the last update (29 September 2023), the MoH reported one new confirmed case and no new deaths of dengue fever. Cumulatively, 262 confirmed cases (250 local; 12 imported) and no deaths have been reported from the two islands: Mauritius (191 local; 12 imported cases) and Rodrigues (59; 0).

Response by MS/partner/Africa CDC:

The MoHs of affected Member States continue to conduct enhanced surveillance, case management and risk communication.

Chikungunya in Africa

303 confirmed case(s), **238** suspected case(s)

0 human death(s)

Agent/Pathogen	Chikungunya virus	First Reported	23-Jun-2023	Previous Report Update	29-Sep-2023
First Occurred	14-Jul-2023	Country	Multiple countries	Location	3 MS
Source	Ministry of Health	GeoScope	LOW	Human Risk Assessment	MODERATE

Update to Event:

Since the beginning of this year, 541 cases (303 confirmed; 238 suspected) and no deaths of chikungunya have been reported from three AU MS: Burkina (327; 0), Mali (1;0) and Senegal (210; 0).

This week, eight new cases and no new deaths of chikungunya were reported from two AU MS: Burkina Faso and Mali.

Burkina Faso: Since the last update (29 September 2023), the MoH reported four new cases (3 confirmed; 1 suspected) and no new deaths of chikungunya virus. Cumulatively, 327 cases (92 confirmed; 235 suspected) and no deaths of chikungunya have been reported in one of the eight regions in Burkina Faso.

Mali (new event): On 2 October 2023, the MoH reported an outbreak of one confirmed case of chikungunya fever with no new deaths from Commune VI in Bamako district. The index case is a 35-year-old male, living in Kayes district with no history of travel to a country experiencing an outbreak of chikungunya. On 29 September 2023, he presented with fever, headache and joint pains at the health center in Commune VI. A confirmatory test was done at the National Institute of Public Health in Bamako (NIPH) by PCR. This is the first confirmed outbreak of chikungunya in Mali.

Chikungunya is a mosquito-borne viral disease endemic to countries in Africa and South America caused by the Chikungunya virus. The most commonly reported symptoms are muscle pain, joint swelling, headache, nausea, fatigue and rash. Severe or fatal cases of chikungunya are rare, and are usually associated with the existence of co-infections. Chikungunya can be identified using nucleic acid/genomic amplification techniques or viral isolation during the first week of illness. Serological diagnosis can be performed by detection of specific IgM antibodies in serum specimen from day 4–5 after the onset of illness. Due to difficulties in notification and diagnosis, the number of people infected with chikungunya is underestimated. There is currently no licensed vaccine or specific treatment for Chikungunya.

Response by MS/partner/Africa CDC:

Burkina Faso: The MoH and partners have deployed rapid response teams to conduct active case search, risk communication and vector control in the affected district.

Mali: The MoH continues to conduct enhanced surveillance, case management, risk communication and vector control measures and cross border control in the affected regions. Samples were taken from three contacts of the index case and the results are pending.

Moderate Risk Events

H5N1 in Africa

2,544,766 animal case(s)

664,119 animal deaths (**CFR: 26.1%**)

Agent/Pathogen	Influenza H5N1	First Reported	4-May-2023	Previous Report Update	29-Sep-2023
First Occurred	1-Jan-2023	Country	Multiple countries	Location	7 MS
Source	WOAH	GeoScope	LOW	Human Risk Assessment	MODERATE
Animal Risk Assessment	HIGH				

Update to Event:

Since the beginning of this year, 50 outbreaks resulting in 2,544,766 cases and 664,119 deaths (CFR: 26.1%) of highly pathogenic avian influenza (HPAI) H5N1 in poultry were reported from seven AU MS: Côte d'Ivoire (2 outbreaks; 43,000 cases; 15,826 deaths), Guinea (1; 752; 745), Gambia (3; 7,569; 7,569), Nigeria (3; 2,381,959; 528,567), Senegal (1; 1,713; 1,713), South Africa (39; 108,273; 108,249) and Togo (1; 1,500; 1,450).

This week, one new outbreak with 9,864 new cases and 9,840 new deaths were reported among domestic birds in South Africa.

South Africa: Since the last update (29 September 2023), South Africa reported one new outbreak with 9,864 confirmed cases and 9,840 new deaths (CFR: 99%) of HPAI H5 in domestic birds in Western Cape province. Cumulatively, 39 outbreaks with 108,273 cases and 108,249 deaths of HPAI H5N1 have been reported from Western Cape province. The event has caused significant economic loss in the poultry industry.

Response by MS/partner/Africa CDC:

South Africa: The provincial veterinary authorities have conducted mass culling and disposing over 1,457,283 sick birds in affected farms.

HPAI H7N6 in South Africa

129,122 animal case(s)

127,840 animal deaths (**CFR: 99%**)

Agent/Pathogen	HPAI H7N6	First Reported	27-Jun-2023	Previous Report Update	30-Jun-2023
First Occurred	29-May-2023	Country	South Africa	Location	Mpumalanga province
Source	WOAH	GeoScope	LOW	Human Risk Assessment	MODERATE
Animal Risk Assessment	HIGH				

Update to Event:

Since last update, South Africa reported 22 outbreaks of highly pathogenic avian influenza (HPAI) H7N6 in domestic birds from five provinces. Cumulatively, 129,122 cases and 127,840 deaths (CFR: 99%) have been reported from five of ten provinces in South Africa.

Response by MS/partner/Africa CDC:

The veterinary authorities have applied quarantine to all domestic birds. In addition, 1,537,288 birds were culled and disposed off.

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

* 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.