



Africa CDC Epidemic Intelligence Report

Date of Issue: 28 Oct 2023



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

		Very High	High	Moderate
Type	Human	0	9 (1)	7 (1)
Event T	Animal	0	0	0
	Environment	0	0	0

Initial Reports





3 confirmed case(s) 2 suspected case(s) 0 human deaths (CFR: 0%) Agent/Pathogen Bacillus anthracis First Reported 26-Oct-2023 Previous Report Update 26-Oct-2023
Agent/Pathogen Bachills anthracis First Reported /b-Uct-/1/3
First Occurred26-Jul-2023CountryUgandaLocation1 District
Source Ministry of Health GeoScope Low Human Risk Assessment MODERATE

Description:

On 26 October 2023, the Uganda Ministry of Health (MoH) reported an outbreak of anthrax in Kween district, eastern Uganda. The index case was a 42-year-old casual laborer who presented with eschars. Samples collected and submitted to the Uganda Virus Research Institute, Arua, tested positive for anthrax. Cumulatively, five cases (3 confirmed; 2 suspected) and no deaths have been reported. In addition, the occurrence of 10 sudden animal deaths have been reported in Kween district.

Anthrax is a zoonotic bacterial infection and can spread to humans through inhalation, handling, eating and drinking foods contaminated with bacterial spores. Clinical presentations may vary from cutaneous, inhalation, gastrointestinal and injection types of anthrax. The average CFR ranges from 20% - 30% in cutaneous anthrax without antibiotic treatment and 25% - 75% for gastrointestinal anthrax, 80% or higher in inhalation anthrax.

Response by MS/partner/Africa CDC:

The MoH continues to conduct enhanced surveillance and risk communication in the affected district.

Human Event Updates





High Risk Events

Dengue	fever in Afr	ica			
69,021 s	onfirmed case uspected case n deaths (CF	e(s)			
Agent/Pathogen	Dengue virus	First Reported	25-Jul-2023	Previous Report Update	19-Oct-2023
First Occurred	31-Dec-2022	Country	Multiple Countries	Location	12 MS
Source	Ministry of Health	GeoScope	LOW	Human Risk Assessment	нідн
Animal Risk Assessment	MODERATE				

Update to Event:

Since January 2023, a total of 89,411 cases (20,390 confirmed; 69,021 suspected) and 158 deaths [case fatality rate (CFR): 0.2%] of dengue fever have been reported in 12 African Union (AU) Member States (MS): Angola (3 cases; 0 deaths), Burkina Faso (73,596; 133), Chad (960; 1), Côte d'Ivoire (107; 0), Egypt (578; 0), Ethiopia (10,233; 4), Guinea (6; 1), Mali (721; 1), Mauritius (264; 0), Sao Tome and Principe (1,227; 11), Senegal (52; 0) and Sudan (1,664; 7).

This week, 34 new cases and no new deaths from dengue fever were reported from Ethiopia.

Ethiopia: Since the last update (20 October 2023), the Ethiopia Public Health Institute (EPHI) reported 34 new suspected cases and no new deaths of dengue fever. Cumulatively, 10,233 cases (127 confirmed; 10,106 suspected) and four deaths (CFR: 0.04%) have been reported from four of the 11 regions in Ethiopia. Majority (88%) of the cases were reported from Afar region.

Response by MS/partner/Africa CDC:

The MoH of affected Member States continue to conduct enhanced surveillance, case management, vector control and risk communication activities.

Corynebacterium diphtheria in Africa							
 9,876 confirmed case(s) 5,976 suspected case(s) 656 human deaths (CFR: 6.6%) 							
Agent/Pathogen	Corynebacterium diphtheriae	First Reported	3-Aug-2023	Previous Report Update	19-Oct-2023		
First Occurred	17-Jan-2023	Country	Multiple Countries	Location	4 MS		
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	HIGH		

Since January 2023, a total of 15,852 cases (9,876 confirmed; 5,976 suspected) and 656 deaths (CFR: 6.6%) of diphtheria have been reported in four African Union Member States (MS): Algeria (80 cases; 10 deaths), Guinea (417; 60), Mauritania (8; 4), Niger (865; 37) and Nigeria (14,482; 545). This week, eight new cases and four new deaths from diphtheria (CFR: 50%) were reported from Mauritania.

Mauritania: On 24 October 2023, the Ministry of Health (MoH), Mauritania reported an outbreak of diphtheria with eight suspected cases and 4 deaths (CFR: 50%). The cases were reported from Bassiknou district in Hodh El Chargui province close to the border with Mali. On 19 October 2023, the index case presented at Bassiknou hospital with fever, sore throat, swollen tonsils and difficulty in breathing. All eight samples tested negative by bacterial culture at the National Public Health laboratory, Mauritania. However, this could have been due to suboptimal storage conditions while transporting the samples to the laboratory. The cases are between 1 - 15 years old, and majority (63%) are unvaccinated. Poor vaccination coverage, especially in the affected area, was identified as a risk factor for this outbreak.

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 infection is systemic. The overall case-fatality rate for the respiratory form of diphtheria is between 5% and 10%, with higher death rates (up to 20%) among persons younger than five or older than 40 years of age. Laboratory diagnosis is made via bacterial culture, Elek test or polymerase chain reaction (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.

Response by MS/partner/Africa CDC:

Mauritania: The MoH activated the EOC and deployed a rapid response team for active case finding case management and mass sensitization of local communities' leaders involved in health education.

Human Event Updates





Moderate Risk Events

COVID-19 in Africa

12,404,863 confirmed case(s) **257,181** human deaths (**CFR: 2.1%**)

Agent/	'Pathogen	SARS-CoV-2	First Reported	20-Feb-2020	Previous Report Update	12-Oct-2023
First C	Occurred	13-Feb-2020	Country	Multiple Countries	Location	All 55 MS
Sc	ource	Ministry of Health	GeoScope	VERY HIGH	Human Risk Assessment	MODERATE

Update to Event:

As of 6 p.m. East African Time (EAT) 25 October 2023, a total of 12,404,863 COVID-19 cases and 257,181 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 (53) 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), 9 MS have reported the Omicron (BA.2.86) has been detected and reported in Africa, Americas, Asia and Europe. As of 17 October 2023, two AU MS: Botswana and South Africa have reported the presence of this new variant under monitoring (VUM). 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, 570.8 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 42 (16 - 22 October 2023), 229 new COVID-19 cases where cases were reported, which is a 15% increase in the number of new cases reported compared to the previous week (41). The Northern region accounted for 67% of the new COVID-19 cases reported this week, followed by the Eastern (31%) and Western (2%), No cases were reported in the Southern and Central regions. Last week, no new COVID-19 deaths were reported in Africa. More than 12,300 new tests were conducted during the past week. Since February 2020, over 133.6 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.



Since the beginning of this year, 197,764 cases (86,350 confirmed; 111,414 suspected) and 3,105 deaths (CFR: 1.6%) of cholera were reported from 18 AU MS: Burundi (1,227 cases; 9 deaths), Cameroon (20,842; 491), Congo (93; 9), DRC (36,084; 303), Eswatini (2; 0), Ethiopia (24,559; 321), Kenya (8,814; 145), Malawi (42,971; 1,261), Mozambique (35,145; 147), Nigeria (2,860; 84), Somalia (14,407; 38), South Africa (1,074; 47), Sudan (1,617; 64), South Sudan (1,471; 2), Tanzania (87; 3), Uganda (78; 10), Zambia (938; 20) and Zimbabwe (5,495; 151).

This week, 2,012 new cases and 44 new deaths of cholera were reported from nine AU MS: Burundi, Cameroon, Ethiopia, Malawi, Mozambique, Somalia, Sudan, Zambia and Zimbabwe.

Burundi: Since the last update (20 October 2023), the MoH reported 145 new cases (8 confirmed; 137 suspected) and no new deaths of cholera from nine health districts. Cumulatively, 1,227 cases (60 confirmed; 1,167 suspected) and nine deaths (CFR: 0.7%) have been reported from 12 of 114 districts in Burundi. There are currently eight active cases in two cholera treatment centers, Kabezi (1) and Cibitoke (7) provinces.

Cameroon: Since the last update (29 September 2023), the MoH reported 170 new cases (57 new confirmed; 113 suspected) and four new deaths (CFR: 2.4%) of cholera. Cumulatively 20,842 cases (2,050 confirmed; 18,792 suspected) and 491 deaths (CFR: 2.4%) of cholera have been reported from Cameroon. The outbreak is active in 17 health districts in three of 10 regions in Cameroon.

Ethiopia: Since the last update (20 October 2023), the EPHI reported 118 new suspected cases and one new death (CFR: 0.8%) of cholera. Cumulatively, 24,559 cases (26 confirmed; 24,533 suspected) and 321 deaths (CFR: 1.3%) have been reported from nine of the 11 regions in Ethiopia. Oromia and South Ethiopia regions accounts for 63% of the cases.

Malawi: Since the last update (20 October 2023), the MoH reported 22 new confirmed cases and no new deaths of cholera. Cumulatively, 42,971 confirmed cases and 1,261 deaths (CFR: 2.9%) have been reported from all 29 districts in Malawi.

Mozambique: Since the last update (20 October 2023), the MoH reported 171 new confirmed cases and one new death (CFR: 0.6%) of cholera. Cumulatively, 35,145 confirmed cases and 147 deaths (CFR: 0.4%) have been reported from 10 of 11 provinces in Mozambique.

Somalia: Since the last update (20 October 2023), the MoH reported 216 new suspected cases and no new deaths of cholera. Cumulatively, 14,407 cases (222 confirmed; 14,185 suspected) and 38 deaths (CFR: 0.3%) have been reported from 29 of 74 districts in Somalia. Children under five years make up 54% of the cases. This outbreak has been uninterrupted in the drought-affected districts since 2022 and in the Banadir region since 2017.

Sudan: Since the last update (20 October 2023), the MoH reported 800 new suspected cases and 29 new deaths (CFR: 3.6%) of cholera. Cumulatively, 1,617 cases (82 confirmed; 1,535 suspected) and 64 deaths (CFR: 3.9%) have been reported from four of 18 states in Sudan.

Zambia: Since the last update (20 October 2023), the Zambia National Public Health Institute (ZNPHI) reported four new cases (1 confirmed; 3 suspected) and one new death (CFR: 25%) of cholera from Lusaka district. Cumulatively, 938 cases (361 confirmed; 577 suspected) and 20 deaths (CFR: 2.1%) have been reported from 10 of 116 districts in Zambia.

Zimbabwe: Since the last update (20 October 2023), the MoH reported 372 new cases (53 confirmed; 319 suspected) and seven new deaths (CFR: 1.9%) of cholera. Cumulatively, 5,495 cases (1,018 confirmed; 4,477 suspected) and 151 deaths (CFR: 2.7%) have been reported from 41 of 64 districts in Zimbabwe.

Response by MS/partner/Africa CDC:

The Africa CDC continues to support the Member States to enhance surveillance, risk communication, and infection prevention and control activities in districts where the outbreak is currently ongoing.



Update to Event:

Since the beginning of this year, 298,488 (28,951 confirmed; 269,537 suspected) and 3,742 deaths (CFR: 1.3 %) of measles were reported from 27 AU MS: Angola (6,203 cases; 53 deaths), Botswana (13; 0), Burkina Faso (1,701; 2), Burundi (1,150; 0), Cameroon (8,503; 64), Central African Republic (CAR) (2,873; 0), Chad (8,981; 7), Congo (674; 4), DRC (190,598; 3,187), Ethiopia (18,899;149), Gabon (3,060; 0), Gambia (208; 0), Ghana (212; 0), Guinea (1,011; 2), Kenya (1,317; 23), Libya (391; 2), Liberia (25,448; 95), Mali (1,580; 2), Mauritania (825; 5), Mozambique (1,342; 0), Niger (1,690; 0), Senegal (4,475; 0), Somalia (9,843; 0), South Africa (843; 0), South Sudan (6,030; 145), Uganda (290; 1) and Zambia (328;1).

This week, a total of 17,664 new cases and 87 new deaths (CFR: 0.5%) were reported from four AU MS: Chad, Congo, Liberia and Mauritania.

Chad: Since the last update (18 August 2023), the MoH reported 66 new suspected cases and no new deaths of measles. Cumulatively, 8,981 suspected cases and seven deaths (CFR: 0.08%) of measles have been reported from 17 of 23 regions in Chad.

Congo: Since the last report (18 October 2023), the MoH reported one suspected case of measles from Boko health district. Cumulatively, 674 cases (138 confirmed; 536 suspected) and 4 deaths (CFR: 0.6%) of measles have been reported from six of 26 provinces in Congo.

Liberia: Since the last update (20 October 2023), the National Public Health Institute of Liberia reported 17,565 cases (8,448 confirmed cases; 9,117 suspected cases) and 87 new deaths (CFR: 0.5%) of measles from seven counties. Cumulatively, 25,448 cases (12,414 confirmed; 13,034 suspected) and 95 deaths (CFR: 0.4%) of measles were reported from all 15 counties in Liberia.

Mauritania: Since the last update (13 October 2023), the MoH reported 32 new cases (9 confirmed; 23 suspected cases) and no new deaths of measles from 10 districts. Cumulatively, 825 cases (199 confirmed; 626 suspected) and five deaths (CFR: 0.6%) of measles have been reported from 36 of 63 districts in Mauritania.

Response by MS/partner/Africa CDC:

The MoH in these MS continue to strengthen measles surveillance and case management in the affected areas.



Since the beginning of 2023, a total of 2,779 cases (137 confirmed; 2,642 suspected) and 36 deaths (CFR: 1.3%) of yellow fever have been reported in seven AU MS: Cameroon (41 cases; 4 deaths), CAR (326; 5), Congo (324; 2), Gabon (79; 0), Guinea (178; 4), Nigeria (1,819; 21) and Uganda (12; 0).

This week, 24 new cases and one new death of yellow fever were reported from Cameroon and Congo.

Cameroon: Since the last update (8 September 2023), the MoH reported 20 cases (10 confirmed; 10 suspected) and one death (CFR: 5%) of yellow fever have been reported from Cameroon. Cumulatively, 41 cases (31 confirmed; 10 suspected) and four deaths (CFR: 9.7%) were reported from 28 of 200 districts in Cameroon.

Congo: Since the last update (20 October 2023), the MoH reported four new suspected cases and no new deaths of yellow fever from Cuvette Ouest [1 case(s)], Point Noire (1) and Pool (2) regions. Cumulatively, 324 cases (15 confirmed; 309 suspected) and two deaths (CFR: 0.6%) have been reported from 11 of 12 regions across the country.

Response by MS/partner/Africa CDC:

The MoH in these MS are implementing vector control measures in the affected areas.

	Chikungunya in Africa							
	242 suspe	med case(s) ected case(s) eaths (CFR:	0%)					
,	Agent/Pathogen	Chikungunya virus	First Reported	22-Jun-2023	Previous Report Update	19-Oct-2023		
	First Occurred	13-Jul-2023	Country	Multiple Countries	Location	3 MS		
	Source	Ministry of Health	GeoScope	LOW	Human Risk Assessment	MODERATE		

Since the beginning of this year, 717 cases (475 confirmed; 242 suspected) and no deaths of chikungunya have been reported from three AU MS: Burkina (489; 0), Mali (8; 0) and Senegal (220; 0). This week, 122 new cases and no new deaths of chikungunya were reported from Burkina Faso.

Burkina Faso: Since the last update (13 October 2023), the MoH reported 122 new confirmed cases and no new deaths of chikungunya virus. Cumulatively, 489 cases (254 confirmed; 235 suspected) and no deaths of chikungunya have been reported in three of 70 districts in Burkina Faso.

Response by MS/partner/Africa CDC:

On 27 October 2023, the surveillance team of the Africa CDC regional coordinating centre for Western Africa held a coordination meeting with the Burkina Faso incident management team for chikungunya to identify areas for support.

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, measles and yellow fever where CFR is calculated using all cases and deaths
- * The GeoScope level is determined by where the event is currently occurring on the continent. Low: 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.