

Africa CDC Epidemic Intelligence Report

Date of Issue: 31 Aug 2025

Active Events

166

New Events reported
in 2025

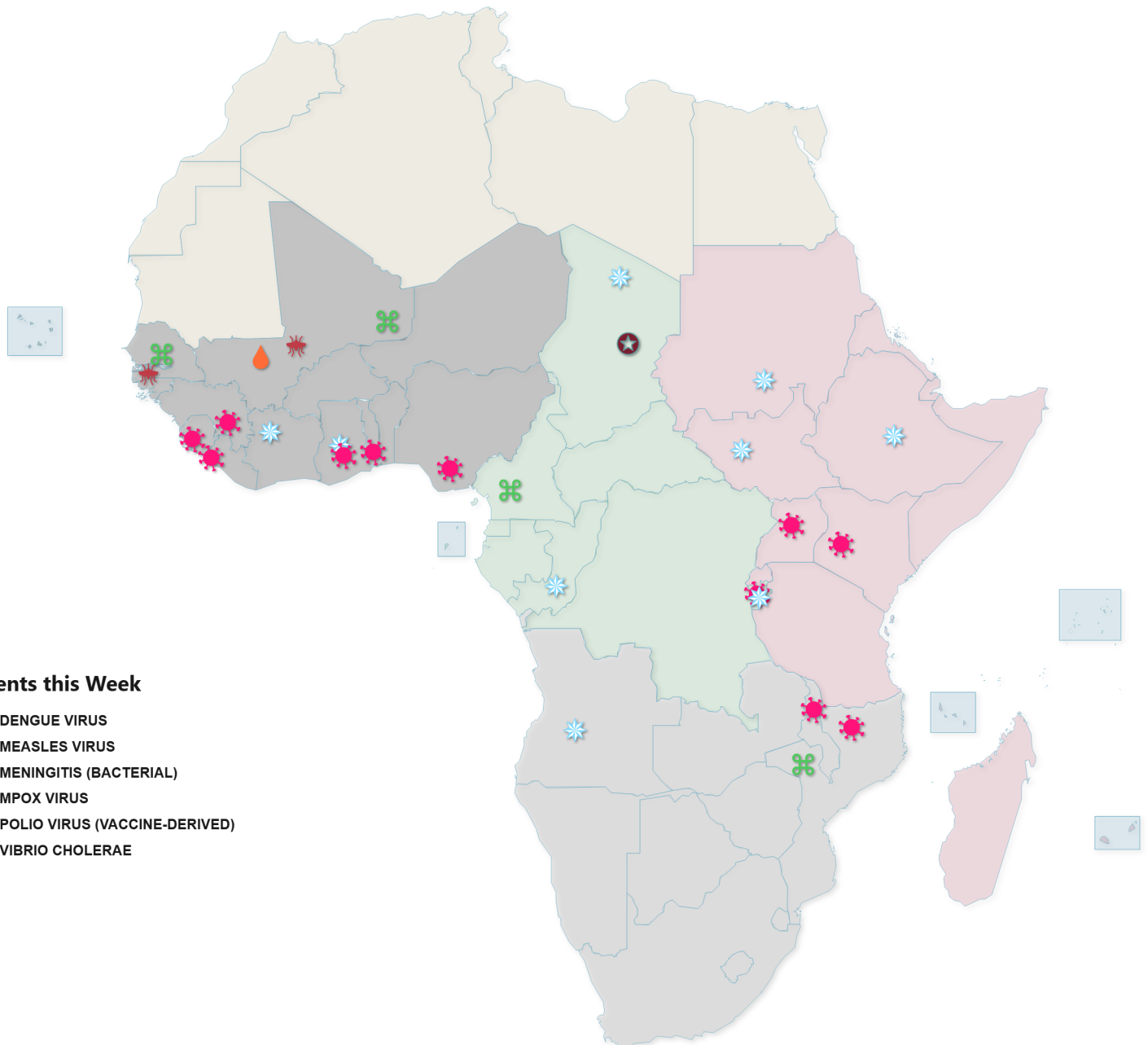
99

Events highlighted
this week

28

New events since
last issue

0



































*  represent AU Member States that are islands

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

	Risk Level		
	Very High (New)	High (New)	Moderate (New)
Human	0	8	20
Animal	0	0	0
Environment	0	0	0

Event Summary

Events Highlighted this week

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Dengue virus	Mali	Moderate	N/A		2,157 (80)	0 (0)	543 (25)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	36 (1)	0 (0)
 Measles virus	Cameroon	Moderate	N/A		537 (5)	0 (0)	1,740 (18)	4 (0)
	Mali	Moderate	N/A		403 (6)	0 (0)	153 (4)	0 (0)
	Mozambique	Moderate	N/A				62 (14)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	96 (1)	0 (0)
 Meningitis (Bacterial)	Mali	Moderate	N/A		407 (30)	0 (0)	93 (2)	0 (0)
 Mpox virus	Burundi	High	N/A		4,342 (113)	0 (0)	1,437 (29)	0 (0)
	Ghana	Moderate	N/A		2,416 (88)	0 (0)	446 (22)	1 (0)
	Guinea	Moderate	N/A		1,530 (205)	0 (0)	729 (93)	0 (0)
	Kenya	Moderate	N/A		814 (78)	0 (0)	367 (31)	5 (0)
	Liberia	High	N/A		1,093 (74)	0 (0)	545 (46)	0 (0)
	Malawi	Moderate	N/A		417 (57)	0 (0)	81 (9)	1 (0)
	Mozambique	Moderate	N/A		715 (338)	0 (0)	65 (27)	0 (0)
	Nigeria	High	N/A		1,193 (45)	0 (0)	307 (24)	4 (0)
	Sierra Leone	High	Low		6,685 (97)	0 (0)	5,198 (49)	53 (1)
	Togo	Moderate	N/A		337 (30)	0 (0)	70 (11)	0 (0)
	Uganda	Moderate	N/A		11,817 (144)	0 (0)	6,577 (31)	41 (0)
	Chad	Moderate	N/A		0 (0)	0 (0)	16 (2)	0 (0)
	Angola	Moderate	N/A		27,910 (66)	0 (0)	937 (0)	779 (2)
	Burundi	Moderate	N/A		0 (0)	0 (0)	654 (47)	5 (0)
	Chad	Moderate	N/A		974 (290)	0 (0)	42 (10)	68 (29)
	Congo Republic	Moderate	N/A		451 (26)	0 (0)	40 (7)	35 (0)
	Côte d'Ivoire	High	N/A		492 (16)	0 (0)	27 (0)	21 (1)
	Ethiopia	High	N/A		6,384 (34)	0 (0)	0 (0)	61 (0)
	Ghana	Moderate	N/A		2,480 (12)	47 (0)	253 (1)	14 (0)
	South Sudan	High	N/A		72,193 (385)	0 (0)	318 (0)	1,220 (12)
	Sudan	High	N/A		50,804 (10)	0 (0)	0 (0)	1,134 (0)

Human Event Updates

Moderate Risk Events

Mpox in Africa

31,209 confirmed human case(s), **104,214** suspected human case(s)
631 human deaths (**CFR: 0.61%**)

Agent/Pathogen	Mpox virus	First Reported	3-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	26 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 104,214 cases of mpox, of which 31,209 (29.95%) are laboratory-confirmed, have been reported from 26 African Union Member States (AU MS). In addition, a total of 631 deaths [Case Fatality Rate (CFR: 0.61%)] among suspected cases and 205 deaths (CFR: 0.66%) among confirmed cases have been reported. The distribution of cases and deaths by MS is as follows: Angola* (6 confirmed cases; 0 deaths), Burundi (1,437; 0), Cameroon (5; 0), Central African Republic (CAR) (21; 0), Congo (69; 1), Côte d'Ivoire (60;1), Democratic Republic of Congo (DRC) (14,771; 723), Ethiopia** (28;1), Gambia (1; 0), Ghana (446; 1), Guinea (729; 1), Kenya*** (367; 5), Liberia (545; 0), Malawi (81;1), Morocco (2; 0), Mozambique (65; 0), Nigeria (307; 4), Rwanda**** (45; 0), Senegal (1;0), Sierra Leone (5,198; 53), South Africa (11; 0), South Sudan (20; 0), Tanzania (132; 0), Togo (70; 0), Uganda (6,577; 41), and Zambia***** (215; 3).

In epidemiological week 34, 1,323 new cases, with 372 laboratory-confirmed cases, and one death among confirmed cases, were reported from 11 AU MS: Burundi, Ghana, Guinea, Kenya, Liberia, Malawi, Mozambique, Nigeria, Sierra Leone, Togo and Uganda.

Burundi: Since the last update (22 August 2025) the Ministry of Health (MoH) reported 113 new cases, of which 29 were laboratory-confirmed and no new deaths of mpox from 40 health districts. This is a 9% average decrease in the number of confirmed cases reported in the last four weeks. This year, 4,342 cases, of which 1,437 were laboratory-confirmed and no deaths of mpox were reported from 46 of 49 health districts in Burundi. This outbreak started in July 2024. Cumulatively, 10,133 cases, of which 4,383 were laboratory-confirmed and one death (CFR: 0.02%) of mpox have been reported from 46 of 49 health districts in Burundi. Clade Ib was isolated from the sequenced samples.

Ghana: Since the last update (15 August 2025), the Ghana Health Services reported 88 cases of which 22 were laboratory-confirmed and no new deaths of mpox from all 16 regions. This is a 10% average increase in the number of confirmed cases in the last four weeks. This year, 2,416 cases, of which 446 were laboratory-confirmed, and one death (CFR: 0.22%) of mpox were reported from all 16 regions in Ghana. This outbreak started in October 2024. Cumulatively, 2,856 cases, of which 451 were laboratory-confirmed, and one death (CFR: 0.22%) of mpox have been reported from all 16 regions in Ghana. A total of 2,856 samples were tested, resulting in a 100% testing rate and 16% positivity rate. Clade II was isolated from undefined number of sequenced samples.

Guinea: Since the last update (22 August 2025), the MoH reported 205 new cases of which 93 were new laboratory-confirmed and no new deaths of mpox from 14 health districts. This is a 4% average decrease in the number of confirmed cases in the last four weeks. This year, 1,530 cases, of which 729 were laboratory-confirmed and no deaths of mpox have been reported from Guinea. Since the start of this outbreak (March 2024), a cumulative of 1,600 cases, of which 731 were laboratory-confirmed, and no deaths of mpox have been reported in Guinea. A total of 1,600 samples were tested, resulting in a 100% testing rate and 46% positivity rate. Clade II was isolated from an undefined number of sequenced samples, while clade IIb was detected among confirmed cases.

Kenya: Since the last update (22 August 2025), the MoH reported 31 new laboratory-confirmed cases and no new deaths of mpox from multiple districts. This is a 13% average increase in the number of confirmed cases in the past four weeks. This year, 367 laboratory-confirmed cases and five deaths (CFR: 1.36%) of mpox have been reported from 24 of 47 counties in Kenya. This outbreak started in July 2024 and cumulatively, 398 laboratory-confirmed and six deaths (CFR: 1.51%) of mpox have been reported from 24 of 47 counties in Kenya. A total of 1,169 samples were tested, resulting in a 100% testing rate and 34.05% positivity rate. Clade Ib was isolated from 94 sequenced samples.

Liberia: Since the last update (22 August 2025), the MoH reported 74 new cases of which 46 were laboratory-confirmed, and no new deaths of mpox from multiple counties. This is a 25% average increase in the number of confirmed cases in the last four weeks. This year, 1,093 cases, of which 545 were laboratory-confirmed and no deaths of mpox have been reported from all the 15 counties in Liberia. Since the start of the outbreak (March 2024), a cumulative of 1,504 cases, of which 608 were laboratory-confirmed, and no deaths of mpox have been reported from all 15 counties in Liberia. A total of 1,504 samples were tested, resulting in a 100% testing rate and 40% positivity rate. Clade IIb was isolated from an undefined number of sequenced samples.

Malawi: Since the last update (22 August 2025), the MoH reported nine new laboratory-confirmed cases and no new deaths of mpox in Malawi. Since the start of the outbreak in April 2025, a cumulative of 417 cases, of which 81 were laboratory-confirmed and one death (CFR: 1.23%) of mpox have been reported from 11 of 28 health districts in Malawi: Lilongwe (65 confirmed cases), Mangochi (3), Salima (2), Ntcheu (1), Nkhatabay (1), Blantyre (3), Likoma (1), Mzimba South (1), Ntchisi (1), Karonga (2) and Zomba (1). Of the confirmed cases, 50 (62%) are males and within the age range of 2 to 75 years.

Mozambique: Since the last update (22 August 2025), the MoH reported 375 new cases, of which 27 were laboratory-confirmed and no new deaths of mpox. Since the start of the outbreak (10 July 2025), a cumulative of 715 cases, of which 65 were laboratory-confirmed and no deaths of mpox have been reported from one of eleven provinces. The circulating clade has not been confirmed. The last outbreak of mpox in Mozambique occurred in 2022 with one confirmed case and one death (CFR: 100.00%) in Maputo city.

Nigeria: Since the last update (22 August 2025), the Nigeria Center for Disease Control (NCDC) reported 45 new cases, of which 24 were laboratory-confirmed, and no new deaths of mpox from 10 states and the Federal Capital Territory. This is a 106% average increase in the number of confirmed cases in the last four weeks. This year, 1,193 cases, of which 307 were laboratory-confirmed, and four deaths (CFR: 0.30%) of mpox were reported from 36 states and the Federal Capital Territory. Nigeria is endemic for mpox, and cases have been reported since 2017. Cumulatively, 6,957 cases, of which 1,583 were laboratory-confirmed, and 21 deaths (CFR: 1.32%) of mpox have been reported from all 36 states and the Federal Capital Territory in Nigeria. A total of 6,957 samples were tested, resulting in a 100% testing rate and 22.8% positivity rate. Clade IIb was isolated from an undefined number of sequenced samples.

Sierra Leone: Since the last update (22 August 2025), the MoH reported 97 new cases, of which 49 were laboratory-confirmed, and one new death (CFR: 2.04%) of mpox from multiple districts. Since the start of the outbreak in January 2025, a cumulative of 6,685 cases, of which 5,198 were laboratory-confirmed, and 53 deaths (CFR: 1.02%) of mpox have been reported from all the 16 districts in Sierra Leone. Of the confirmed cases, 5% were children <15 years and 51% were males. A total of 6,685 samples were tested, resulting in a 100% testing rate and 77.7% positivity rate. Clade IIb was isolated from an undefined number of sequenced samples.

Togo: Since the last update (22 August 2025) the MoH reported 30 new cases, of which 11 were laboratory-confirmed and no new deaths of mpox from 10 health districts. Since the start of the outbreak (May 2025) a cumulative of 337 cases, of which 70 were laboratory-confirmed, and no deaths of mpox were reported from 10 health districts in Togo. A total of 337 samples were tested, resulting in a 100% testing rate and 20.8% positivity rate. Clade IIb was isolated from an undefined number of sequenced samples.

Uganda: Since the last update (22 August 2025), the MoH reported 31 new laboratory-confirmed cases and no new deaths of mpox from multiple districts. This is a 19% average increase in the number of confirmed cases in the last four weeks. This year, 6,577 laboratory-confirmed cases and 41 deaths (CFR: 0.62%) of mpox were reported in Uganda. This outbreak started in July 2024. Cumulatively, 7,905 laboratory-confirmed cases, and 48 deaths (CFR: 0.61%) of mpox have been reported from 120 of 146 districts in Uganda. A total of 16,316 cases were tested, resulting in a 100% testing rate and 48.45% test positivity rate. Clade Ib was isolated from all sequenced samples.

***In epidemiological week 13, a backlog of 2 confirmed mpox cases were reported from Angola.**

****Between epidemiological weeks 27-31, a backlog of 2 confirmed mpox cases were reported from Ethiopia.**

*****In epidemiological week 33, one death was removed from the total deaths reported in Kenya in 2025 following data reconciliation.**

******In epidemiological week 31, a backlog of 3 confirmed mpox cases were reported from Rwanda.**

*******In epidemiological week 33, a total of 7 confirmed mpox cases were reported from Zambia.**

Note: In 2024, a total of 77,945 cases of mpox, of which 16,780 were laboratory confirmed, and 1,321 deaths (CFR: 1.78%) of mpox were reported from 20 AU MS: Angola (4 laboratory-confirmed cases; 0 deaths), Burundi (2,946; 1), Cameroon (9; 2), Central Africa Republic (CAR) (90; 3), Congo (24; 0), Côte d'Ivoire (107; 1), DRC (11,834; 1,304), Gabon (2; 0), Ghana (13; 0), Guinea (1; 0), Liberia (63; 0), Kenya (31; 1), Mauritius (1; 0), Morocco (2; 0), Nigeria (184; 0), Rwanda (82; 0), Sierra Leone (4; 0), South Africa (25; 3), Uganda (1,353; 7), Zambia (3; 0), and Zimbabwe (2; 0).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, mpox vaccination campaigns and community engagement activities.

Cholera in Africa

7,309 confirmed human case(s), **47** probable human case(s), **225,273** suspected human case(s)
4,974 human deaths (**CFR: 2.14%**)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	23 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 232,629 cases (7,309 confirmed; 47 probable; 225,273 suspected) and 4,974 deaths (CFR: 2.14%) of cholera have been reported from 23 AU MS: Angola (27,910 cases; 779 deaths), Burundi (654; 5), Chad* (1,016; 68), Comoros (40; 0), Congo** (491; 35), Côte d'Ivoire (519; 21), DRC (46,800; 1,362), Ethiopia*** (6,384; 61), Ghana (2,870; 14), Kenya (426; 20), Malawi (91; 3), Mozambique (4,224; 43), Namibia (18; 1), Nigeria (4,799; 114), Rwanda**** (314; 0), Somalia***** (7,288; 9), South Sudan***** (72,511; 1,220), Sudan***** (50,804; 1,134), Tanzania (4,063; 45), Togo (165; 4), Uganda (136; 3), Zambia (505; 10), and Zimbabwe (601; 23).

In epidemiological week 34, a total of 891 new cases and 44 new deaths of cholera were reported from eight AU MS: Angola, Burundi, Cote d'Ivoire, Chad, Congo, Ethiopia, South Sudan, Sudan.

Angola: Since the last update (22 August 2025), the MoH reported 66 new suspected cases and two new deaths (CFR: 3.03%) of cholera from seven provinces. This is a 17% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 27,910 cases (937 confirmed; 26,973 suspected) and 779 deaths (CFR: 2.79%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 62% of all deaths. Children <15 years accounted for 38% of all cases and 32% of all deaths. Additionally, 56% of all deaths occurred at health facilities.

Burundi: Since the last update (22 August 2025), the MoH reported 47 new cases and no new deaths of cholera from multiple provinces. This is a 5% average increase in the number of new cases in the past four weeks. This year, a total of 654 cases and five deaths (CFR: 0.76%) of cholera have been reported from seven of eighteen provinces in Burundi. Males accounted for 53.2% and children <5 years accounted for 16.7% of all cases. Since the beginning of the outbreak (December 2022), a cumulative of 2,870 cases (2,805 confirmed; 65 suspected) and 17 deaths (CFR: 0.59%) of cholera have been reported from 14 of 18 provinces in Burundi. In comparison to the same period in 2024 (epidemiological week 1 to 34), a total of 744 confirmed cases and four deaths (CFR: 0.52%) of cholera were reported in Burundi, which is a 12% decrease in the number of cases and a 1.25-fold increase in the number of deaths.

Cote d'Ivoire: Since the last update (22 August 2025), the MoH reported 16 new suspected cases and one new death (CFR: 6.25%) of cholera from four districts. Since the beginning of this outbreak (June 2025), a cumulative of 519 cases (27 confirmed; 492 suspected) and 21 deaths (CFR: 4.04%) of cholera have been reported from Port-Bouet-Vridi district (201 cases; 7 deaths), Yopougon East district (290; 9) Sassandra district (20; 3) and Jacqueville district (8; 2). Of the total cases, males accounted for 57% and the age group 15 – 39 years accounted for 46%. Cholera *serotype* O1 was isolated from the confirmed cases.

Chad: Since the last update (22 August 2025), the MoH reported 300 new cases (10 confirmed; 290 suspected) and 29 new deaths (CFR: 9.67%) in seven health districts. This is a 64% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (13 July 2025), a cumulative of 1,016 cases (42 confirmed; 974 suspected) and 68 deaths (CFR: 6.69%) of cholera have been reported from two of twenty-three provinces in Chad. Of the total cases, females accounted for 65%, and age groups 5-14 and 15-44 years accounted for 64%.

Congo: Since the last update (22 August 2025), the MoH reported 33 new cases (7 confirmed; 26 suspected) and no new deaths of cholera from six health districts. This is a 72% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (21 July 2025), a cumulative of 491 cases (40 confirmed; 451 suspected) and 35 deaths (CFR: 7.12%) of cholera have been reported. Of the total cases, males accounted for 61% and 71% of deaths and age groups 15-44 years accounted for 50%. Cholera *serotype O1* was isolated from the confirmed cases.

Ethiopia: Since the last update (15 August 2025), the Ethiopia Public Health Institute reported 34 new suspected cases and no new deaths of cholera from five regions. This is a 11% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 6,384 suspected cases and 61 deaths (CFR: 0.95%) of cholera have been reported from five of twelve regions in Ethiopia: Afar (120 cases; 0 deaths), Amhara (3,045; 20), Gambella (2,593; 33), Oromia (471; 3) and Tigray (155; 5).

South Sudan: Since the last update (15 August 2025), the MoH reported 385 new suspected cases and 12 new deaths (CFR: 3.12%) of cholera from multiple states. This is a 20% average decrease in the number of new cases in the past four weeks. This year, 72,511 cases (318 confirmed; 72,193 suspected) and 1,220 deaths (CFR: 1.68%) of cholera were reported from nine of ten states in South Sudan. Since the beginning of this outbreak (September 2024), a cumulative of 86,483 cases and 1,528 deaths (CFR: 1.77%) of cholera have been reported from ten states and two administrative areas in South Sudan.

Sudan: Since the last update (15 August 2025), the MoH reported 10 new suspected cases and no new deaths of cholera from multiple states. This is a 52% average decrease in the number of new cases in the past four weeks. This year, 50,804 suspected cases and 1,134 deaths (CFR: 2.23%) of cholera were reported from 18 states in Sudan. Since the beginning of this outbreak (July 2024), a cumulative of 103,700 cases and 2,493 deaths (CFR: 2.40%) of cholera have been reported from all 18 states in Sudan. The outbreak is occurring amidst a sustained complex humanitarian crisis.

***Africa CDC erroneously reported a deficit of 200 cases in epi-week 33.**

****In epidemiological week 34, 21 probable cholera cases in the Republic of Congo were reclassified as suspected cases, with a rearrangement of all suspected cases following the revision and validation of the data.**

*****Between epidemiological week 26 and 33, a backlog of 194 cases and three deaths were reported from Ethiopia.**

******Between epidemiological week 30 and 31, a backlog of 3 suspected cases were reported from Rwanda.**

*******In epidemiological week 33, a backlog of 117 cases (3 confirmed; 114 suspected) were reported from Somalia.**

*******Between epidemiological week 6 and 33, a backlog of 2,045 cases and 11 deaths were reported from South Sudan.**

*******Between epidemiological week 27 and 33, a backlog of 2,207 cases and 40 deaths were reported from Sudan.**

Note: In 2024, a total of 236,874 cases (30,597 confirmed; 689 probable; 205,588 suspected) and 4,182 deaths (CFR: 1.78%) of cholera were reported from 20 AU MS: Burundi (2,216 cases; 12 deaths), Cameroon (287; 0), Comoros (10,540; 152), DRC (30,373; 415), Ethiopia (26,052; 255), Ghana (5,653; 37), Kenya (300; 3), Malawi (476; 15), Mozambique (8,486; 38), Niger (273; 10), Nigeria (10,837; 35), Somalia (21,739; 138), South Africa (150; 1), South Sudan (16,017; 329), Sudan (52,896; 1,359), Tanzania (12,148; 145), Togo (604; 37), Uganda (58; 3), Zambia (20,076; 612), and Zimbabwe (19,646; 388).

Response by MS/partner/Africa CDC:

The ministries of health of the affected AU MS activated cholera emergence operations centres and deployed one health rapid response team to conduct enhanced surveillance, risk communication and environmental sanitation in the affected communities.

On 26 August 2025, Africa CDC and the World Health Organization jointly launched a cholera continental preparedness and response plan for cholera control. This structure will be integrated into the existing mpox IMST platform, harnessing shared capacities, technical expertise, and coordination systems. This integrated approach will enhance efficiency, ensure strategic coherence, and optimize resources - critical in an era of rising outbreaks and constrained health financing. The plan also describes the roadmap towards cholera elimination by 2030 with the establishment of a Continental Task Force, led by Member States with Africa CDC and WHO providing secretariat support, to coordinate Member States' efforts and drive longer-term interventions aimed at eliminating cholera as a public health threat across the continent by 2030.

Polio (vaccine-derived) in Africa

93 confirmed human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Polio virus (vaccine-derived)	First Reported	1-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	8 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of this year, 90 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported from nine AU MS: Angola (6 cases; 0 deaths), CAR (1; 0), Chad (15; 0), DRC (1; 0), Djibouti (1; 0), Ethiopia (41; 0), Niger (1; 0), Nigeria (23; 0) and Sudan (2; 0). In addition, a total of two confirmed cases and no deaths of cVDPV3 have been reported from two AU MS: Guinea (1; 0) and Chad (1; 0). Furthermore, a total of one confirmed case and no deaths of cVDPV1 have been reported from one AU MS: DRC (1; 0).

In epidemiological week 34, one new confirmed case of cVDPV2 and one new confirmed case cVDPV3 were reported from Chad.

Chad: Since the last update (25 July 2025), the Global Polio Eradication Initiative (GPEI) reported one new confirmed case and no new deaths of cVDPV2 from Batha region, with onset of paralysis on 4 July 2025. In addition, one case and no death of cVDPV3 was reported from Chari Baguirmi region, with onset of paralysis on 20 June 2025. This is the first case of cVDPV3 reported in Chad, which is linked to a virus found in an acute flaccid paralysis case from Ngaoundéré health district in Cameroon. Cumulatively, 15 confirmed cases of cVDPV2 and one cVDPV3 case have been reported from four of the twenty-three provinces and N'Djamena capital city in Chad this year. In 2022, the national oral polio vaccination (OPV3) coverage among children <1 year in Chad was 88%.

Note: In 2024, a total of 10 confirmed cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from two AU MS: DRC (9 cases), Mozambique (1). Additionally, 227 cases of cVDPV2 were reported from 16 AU MS: Angola (9 cases), Benin (1), Chad (22), DRC (10), Ethiopia (44), Guinea (5), Kenya (1), Liberia (1), Mali (1), Niger (16), Nigeria (98), Senegal (1), Somalia (7), South Sudan (10), and Zimbabwe (1).

Response by MS/partner/Africa CDC:

The ministry of health continues to strengthen acute flaccid paralysis surveillance and polio supplemental vaccination campaigns in the affected areas.

Dengue fever in Africa

1,286 confirmed human case(s), **156** probable human case(s), **10,075** suspected human case(s)
20 human deaths (**CFR: 0.17%**)

Agent/Pathogen	Dengue virus	First Reported	1-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	10 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 11,517 cases (1,286 confirmed; 156 probable; 10,075 suspected) and 20 deaths (CFR: 0.17%) of dengue fever have been reported from ten AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (1; 0), Kenya (1; 0), Mali (2,700; 0), Mauritius (59; 0), Nigeria (178;11), Senegal (36; 0), and Sudan* (6,021; 8).

In epidemiological week 34, a total of 106 new suspected cases and no new deaths of dengue fever were reported from two AU MS: Mali and Senegal.

Mali: Since the last update (22 August 2025), the MoH reported 105 new cases (25 confirmed; 80 suspected) and no new deaths of dengue fever from Bamako (98 cases; 0 deaths), and Sikasso (7; 0) regions. This is a 3% average decrease in the number of new cases in the past four weeks. This year, a total of 2,700 cases (543 confirmed; 2,157 suspected) and no deaths of dengue fever were reported in all 11 regions in Mali. Since the start of this outbreak (September 2023), a cumulative of 17,792 cases (2,151 confirmed; 15,641 suspected) and 74 deaths (CFR: 0.42%) of dengue fever have been reported from all 11 regions in Mali.

Senegal: Since the last update (22 August 2025), the MoH reported one new confirmed case and no deaths of dengue fever from Keur Massar district. Cumulatively, 36 confirmed cases and no deaths of dengue fever have been reported from 12 of 47 districts in Senegal. Of the confirmed cases, males accounted for 54% and persons aged 15 years and above accounted for 83%. This outbreak started in February 2024. Cumulatively, 940 confirmed cases and no deaths of dengue fever have been reported from 28 of 47 districts in Senegal.

***Between epidemiological week 10 to 33, a backlog of 1,013 cases and one death of dengue fever were reported from Sudan.**

Note: In 2024, a total of 191,717 cases (30,465 confirmed; 25,249 probable; 121,102 suspected) and 152 deaths (CFR: 0.08%) of dengue fever were reported from 15 AU MS: Burkina Faso (110,257 cases; 102 deaths), Cameroon (1; 0), Cabo Verde (43,597; 8), CAR (430; 1), Chad (983; 0), Côte d'Ivoire (39; 0), Ethiopia (3,463; 0), Ghana (1,713; 2), Kenya (88; 0), Mali (9,541; 13), Mauritius (9,166; 8), Sao Tome and Principe (9; 0), Senegal (902; 0), Sudan (8,683; 15), and Togo (2,205; 3).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

Measles in Africa

8,593 confirmed human case(s), **107,548** suspected human case(s)
861 human deaths (**CFR: 0.74%**)

Agent/Pathogen	Measles virus	First Reported	8-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	30-Dec-2024	Country	Multiple Countries	Location	19 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 116,141 cases (8,593 confirmed; 107,548 suspected) and 861 deaths (CFR: 0.74%) of measles have been reported from 19 AU MS: Cameroon (2,277 cases; 4 deaths), Chad (926; 1), DRC (45,362; 710), Ethiopia (4,429; 22), Guinea (6,228; 6), Kenya (61; 0), Malawi (167; 0), Mali (556; 0), Mauritania (189; 0), Morocco (44,372; 95), Mozambique (62;0), Nigeria (739; 0), Rwanda (182; 0), Senegal (96; 0), Somalia* (6,694; 14), South Africa (108; 0), Sudan** (2,760; 8), Uganda (77; 1) and Zambia (856; 0).

In epidemiological week 34, a total of 48 new cases and no new deaths of measles were reported from four AU MS: Cameroon, Mali, Mozambique and Senegal.

Cameroon: Since the last update (22 August 2025), the MoH reported 23 new cases (18 confirmed; 5 suspected) and no new deaths of measles from all ten regions. This is a 20% average increase in the number of confirmed cases in the last four weeks. Since the beginning of this year, 2,277 cases (1,740 confirmed; 537 suspected) and four deaths (CFR: 0.18%) of measles have been reported from all ten regions in Cameroon. Of the confirmed cases, 64% were unvaccinated against measles and children <5 years accounted for 55%. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%.

Mali: Since the last update (15 August 2025), the MoH reported ten new cases (4 confirmed; 6 suspected) and no new deaths of measles from three regions. This is a 46% average increase in the number of new cases in the last four weeks. This year, 556 cases (153 confirmed; 403 suspected) and no deaths of measles were reported from all 11 regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,264 cases (496 confirmed; 768 suspected) and no deaths of measles have been reported from all 11 regions in Mali. In 2023, the national measles vaccination coverage among children <1 year in Mali was 98%.

Mozambique: Since the last update (22 August 2025), the MoH reported 14 new confirmed cases and no deaths of measles from four districts. The outbreak started in July this year and 62 confirmed cases and no deaths of measles have been reported from five of 129 districts, Memba (14), Chimbonila (25), Lago (8), Mocuba (10) and Mopeia (5). Between 2022 and 2023, the national measles vaccination coverage (MCV1) of children <5years was 65%, with considerable geographic differences.

Senegal: Since the last update (22 August 2025), the MoH reported one new confirmed case and no new deaths of measles from Kidira district. This year, 96 confirmed cases and no deaths of measles have been reported from 35 of 47 districts. Males account for 57% of the cases. Persons 15 years and above accounted for 42% of the cases. Sixty-three percent of the cases were not vaccinated against measles. Since the start of the outbreak (March 2024), a cumulative of 580 confirmed cases and no deaths of measles have been reported from all 47 districts in Senegal. In 2023, the national measles vaccination coverage of children <5 years in Senegal was 76%.

***In epidemiological week 33, a backlog of 253 cases (5 confirmed; 248 suspected) and no deaths of measles were reported from Somalia.**

****Between epidemiological week 27 and 33, a backlog of nine cases were reported from Sudan.**

Note: In 2024, a total of 260,752 cases (26,432 confirmed; 234,320 suspected) and 3,220 deaths (CFR: 1.23%) of measles have been reported from 30 AU MS: Burkina Faso (10,639 cases; 46 deaths), Burundi (15,003; 149), Cameroon (2,507; 69), Central African Republic [CAR (4,550; 4)], Côte d'Ivoire (7,856; 169), Chad (8,712; 27), Congo (546; 4), DRC (95,126; 2,178), Ethiopia (28,421; 220), Gabon (347; 1), Ghana (1,398; 0), Kenya (1,953; 13), Liberia (2,891; 0), Mali (681; 0), Malawi (937; 1), Mauritania (2,881; 4), Morocco (20,435; 111), Mozambique (1,183; 31), Namibia (105; 0), Nigeria (27,517; 73), Niger(2,226; 13), Senegal (484; 0), Sierra Leone (67; 1), Somalia (12,277; 40), South Africa (626; 0), South Sudan (3,200; 41), Sudan (777; 10), Togo (628; 2), Uganda (2,011; 13), and Zambia (4,946; 0).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to strengthen measles surveillance, case management, and supplemental immunization activities in the affected communities.

Bacterial Meningitis in Africa

154 confirmed human case(s), **915** suspected human case(s)
27 human deaths (**CFR: 2.53%**)

Agent/Pathogen	Meningitis (Bacterial)	First Reported	3-Jan-2025	Previous Report Update	22-Aug-2025
First Occurred	3-Jan-2025	Country	Multiple Countries	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 1,069 cases (154 confirmed; 915 suspected) and 27 deaths (CFR: 2.53%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali (500; 0), Togo (47; 7) and Zambia (83; 0).

In epidemiological week 34, a total of 32 new cases and no new deaths of bacterial meningitis were reported from Mali.

Mali: Since the last update (22 August 2025), the MoH reported 32 new cases (2 confirmed; 30 suspected) and no new deaths of bacterial meningitis from five regions. Cumulatively, 500 cases (93 confirmed; 407 suspected) and no deaths of bacterial meningitis have been reported from all 11 regions in Mali this year. The bacteria isolated from the confirmed cases include; *Streptococcus pneumoniae* (38), *Neisseria meningitidis* W135 (24), *Haemophilus influenzae non-b* (20), *Haemophilus influenzae b* (7) and *Haemophilus influenzae* untyped (4). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

Note: In 2024, a total of 7,118 cases (1,473 confirmed; 5,645 suspected) and 492 deaths (CFR: 7.07%) of bacterial meningitis have been reported from four AU MS: CAR (296 cases; 25 deaths), Mali (735; 0), Niger (2,781; 202), and Nigeria (3,302; 265)

Response by MS/partner/Africa CDC:

The MoH continues to conduct enhanced surveillance, case management, cerebro-spinal fluid sample collection, as well as risk communication and community engagement activities in the affected districts.

-In epidemiological week 32, a backlog of 326 cases (27 confirmed; 299 suspected) and four deaths (15%) of Lassa fever from Nigeria.

Epidemiological week 33 covers a period from 18 - 24 August 2025

-The cases in this report include confirmed, probable, and suspected cases.

- Deaths among mpox suspected cases are all reported from DRC.

- CFR are calculated using confirmed cases and deaths only, except for bacterial meningitis, cholera, measles, mpox, dengue, 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: the event is limited to sub-national areas within one MS; Moderate: The event is affecting multiple countries within an AU region or has been imported from/exported to 1-2 countries from another global region; High: The 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 of 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 or very high depending on how they score on the above criteria.