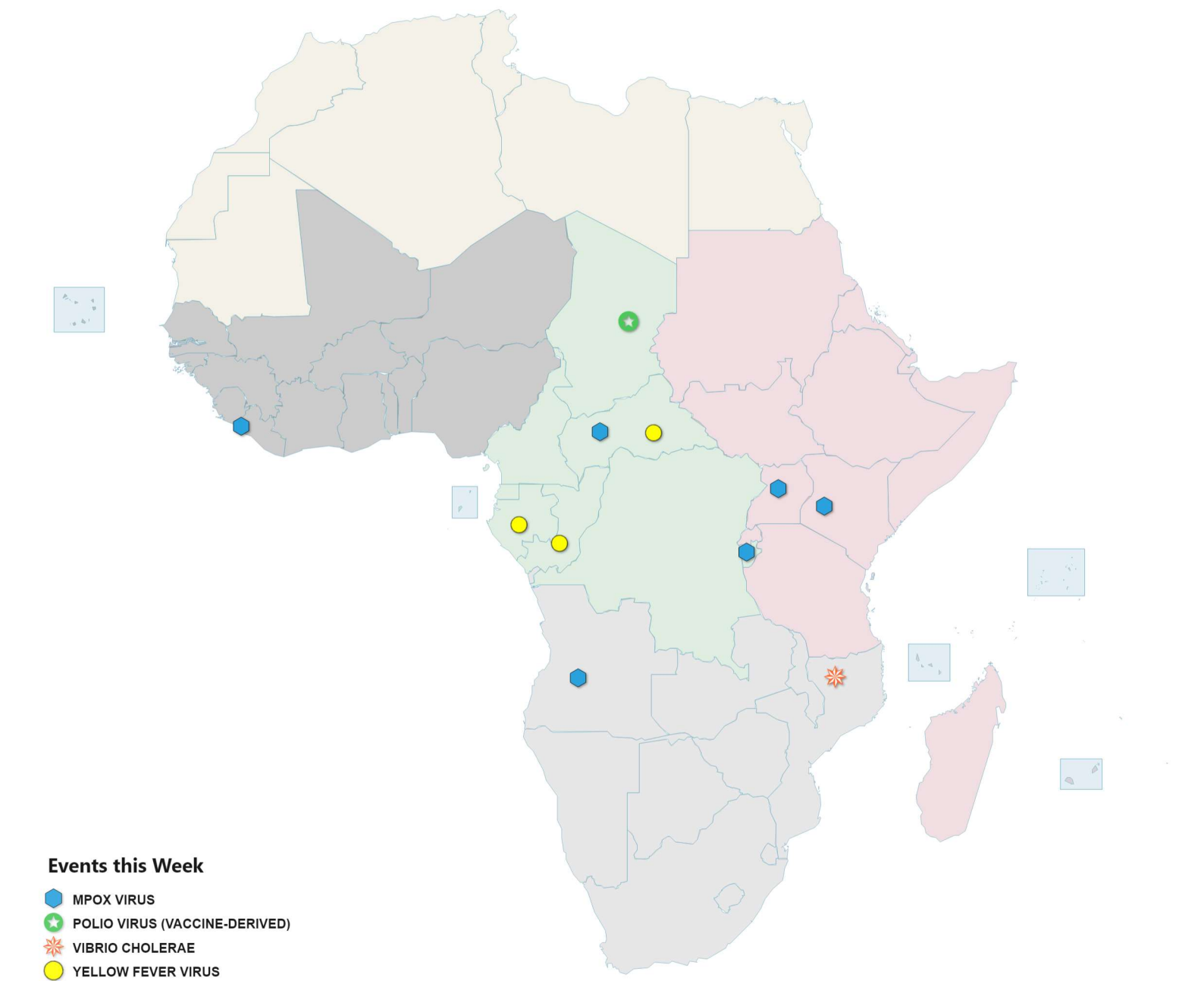



Africa CDC Epidemic Intelligence Report

Date of Issue: 3 Dec 2024

| | | | |
|---------------|-----------------------------|------------------------------|-----------------------------|
| Active Events | New Events reported in 2024 | Events highlighted this week | New events since last issue |
| 199 | 136 | 11 | 1 |



*  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 | 1 | 10 (1) |
| Animal | 0 | 0 | 0 |
| Environment | 0 | 0 | 0 |

Event Summary

New events since last issue

| Agent/Syndrome | Country | Risk:Human | Risk:Animal | Type | Confirmed | Deaths |
|---|------------|------------|-------------|---|-----------|--------|
|  Vibrio cholerae | Mozambique | Moderate | N/A |  | 200 | 7 |

Events Highlighted this week

| Agent/Syndrome | Country | Risk:Human | Risk:Animal | Type | Suspected (New) | Probable (New) | Confirmed (New) | Deaths (New) |
|--|--------------------------|------------|-------------|---|-----------------|----------------|-----------------|--------------|
|  Mpox virus | Angola | Moderate | N/A |  | 9 (8) | 0 (0) | 2 (1) | 0 (0) |
| | Burundi | Moderate | N/A |  | 4,505 (308) | 0 (0) | 2,237 (187) | 1 (0) |
| | Central African Republic | High | N/A |  | 443 (18) | 0 (0) | 79 (5) | 2 (0) |
| | Kenya | Moderate | N/A |  | 298 (28) | 0 (0) | 19 (2) | 1 (0) |
| | Liberia | Moderate | N/A |  | 353 (21) | 0 (0) | 62 (11) | 0 (0) |
| | Uganda | Moderate | N/A |  | 1,372 (162) | 0 (0) | 683 (162) | 1 (0) |
|  Polio virus (vaccine-derived) | Chad | Moderate | N/A |  | 0 (0) | 0 (0) | 20 (7) | 0 (0) |
|  Yellow fever virus | Central African Republic | Moderate | N/A |  | 381 (21) | 0 (0) | 0 (0) | 1 (0) |
| | Congo Republic | Moderate | N/A |  | 434 (14) | 0 (0) | 18 (2) | 0 (0) |
| | Gabon | Moderate | Moderate |  | 132 (9) | 0 (0) | 9 (0) | 0 (0) |

Moderate Risk Events

Cholera in Mozambique

200 confirmed human case(s)
7 human deaths (**CFR: 3.50%**)

| | | | | | |
|----------------|-----------------|-----------------------|-------------|------------------------|--------------------|
| Agent/Pathogen | Vibrio cholerae | First Reported | 27-Nov-2024 | First Occurred | 17-Nov-2024 |
| Country | Mozambique | Location | Nampula | Source | Ministry of Health |
| GeoScope | LOW | Human Risk Assessment | MODERATE | Animal Risk Assessment | N/A |

Description:

On 25 November 2024, the Ministry of Health (MoH) declared a new outbreak of cholera. As of 30 November 2024, the MoH reported 200 confirmed cases and seven deaths (CFR: 3.5%) of cholera from Nampula province. This cholera outbreak started on 17 November 2024. Cumulatively, 8,383 confirmed cases and 24 deaths (CFR: 0.2%) of cholera have been reported from all 10 provinces in Mozambique this year.

Response by MS/partner/Africa CDC:

The Ministry of Health (MoH) is intensifying efforts in surveillance, risk communication, and community engagement across the province. Additional activities include conducting multisectoral coordination meetings, rapid diagnostic testing, cholera case management, and strengthening infection prevention and control measures.

Human Event Updates

Very High Risk Events

Mpox in Africa

60,024 suspected case(s)
1,164 human deaths (**CFR: 1.94%**)

| | | | | | |
|------------------------|--------------------|----------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Mpox virus | First Reported | 12-Jan-2024 | Previous Report Update | 22-Nov-2024 |
| First Occurred | 1-Jan-2024 | Country | Multiple Countries | Location | 20 MS |
| Source | Ministry of Health | GeoScope | HIGH | Human Risk Assessment | VERY HIGH |
| Animal Risk Assessment | N/A | | | | |

Update to Event:

Between epidemiological weeks 1 and 47, a total of 60,024 cases of mpox, of which 13,326 have been confirmed, and 1,164 deaths [case fatality rate (CFR: 1.94%)] have been reported from 20 African Union (AU) Member States (MS): Angola (2 lab-confirmed cases; 0 deaths), Burundi (2,237; 1), Cameroon (9; 2), Central Africa Republic (CAR) (79; 2) Congo (22; 0), Côte d'Ivoire (101; 1), Democratic Republic of Congo (DRC) (9,905; 1,132), Gabon (2; 0), Ghana (3; 0), Guinea (1; 0), Liberia (62; 0), Kenya (19; 1), Mauritius (1; 0), Morocco (2; 0), Nigeria (118; 0), Rwanda (52; 0), South Africa (25; 3), Uganda (683; 1), Zambia (1; 0), and Zimbabwe (2; 0).

In epidemiological week 47, a total of 561 cases, of which 372 were laboratory confirmed, and no new deaths of mpox were reported from seven AU MS: Angola, Burundi, CAR, Côte d'Ivoire, Kenya, Liberia, and Uganda.

Angola*: Since the last update (15 November 2024), the Ministry of Health reported eight new cases, of which one was laboratory-confirmed, with no new deaths of mpox from Luanda province. The new confirmed case is a 2-year old. Cumulatively, nine cases of which two are laboratory confirmed, and no deaths of mpox have been reported from Luanda province. Children <15 years accounted for 50% of confirmed cases and all cases are females. The circulating clade is not yet identified.

Burundi: Since the last update (22 November 2024), the Ministry of Health reported 308 new cases, of which 187 were laboratory-confirmed, with no new deaths of mpox from 40 health districts in Burundi. This is a 2% average decrease in the number of new confirmed cases reported in the past four weeks. Cumulatively, 4,505 suspected cases, of which 2,237 were laboratory-confirmed, and one death (CFR: 0.04%) of mpox have been reported from 45 of 49 health districts in Burundi. Children <15 years accounted for 40.7% of confirmed cases and 52.1% were males. The clade Ib mpox strain was isolated from confirmed cases.

CAR: Since the last update (22 November 2024), the MoH reported 18 new cases, of which five were laboratory-confirmed, and no new deaths of mpox from five health regions. Cumulatively, 443 cases, of which 79 were laboratory-confirmed, and two deaths (CFR: 2%) of mpox have been reported from six of seven health regions in CAR. Children <15 years accounted for 54.4% of confirmed cases and males accounted for 65.8%. A total of 425 cases were tested resulting in a testing rate of 95.9% and a positivity rate of 18.6%. The clade Ia mpox strain was isolated from confirmed cases.

Côte d'Ivoire: Since the last update (22 November 2024), the MoH reported 16 new cases, of which four were laboratory confirmed positive, and no new deaths of mpox. This is a 33% decrease in the number of new cases reported compared to the last update. Cumulatively, 442 cases, of which 101 were laboratory confirmed, and one death (CFR: 1.1%) of mpox have been reported from 34 of 48 health districts in Côte d'Ivoire. Of the confirmed cases, children <15 years accounted for 38% and males accounted for 64%. The clade IIa and clade IIb mpox strain were isolated from confirmed cases.

Kenya: Since the last update (15 November 2024), the MoH reported two new laboratory-confirmed cases of mpox from Nairobi (1) and Nakuru (1) counties and no new deaths. Cumulatively, 19 laboratory-confirmed cases and one death (CFR: 5.3%) of mpox have been reported from 11 of 47 counties in Kenya. Males accounted for 57% of confirmed cases. A total of 298 cases were tested resulting in a 100% testing rate and a 6.4% positivity rate. The clade Ib was reported from 13 of the confirmed cases.

Liberia: Since the last update (22 November 2024), the MoH reported 21 new suspected cases, of which 11 were laboratory confirmed, and no new deaths of mpox from eight counties in Liberia. This is a 50% average increase in the number of confirmed cases compared to the last four weeks. Cumulatively, 353 suspected cases, of which 62 were confirmed and no deaths of mpox have been reported from 13 counties in Liberia. Of the confirmed cases, children <15 years accounted for 39%. A total of 302 cases were tested resulting in an 86% testing rate and an 21% positivity rate.

Uganda: Since the last update (22 November 2024), the MoH reported 162 new laboratory-confirmed cases of mpox and no new deaths from multiple districts. This is a 187% average increase in the cases reported in the past four weeks. Cumulatively, 683 laboratory-confirmed and one death (CFR: 0.1%) of mpox have been reported from 44 of 146 districts in Uganda. A total of 1,372 cases were tested resulting in a 100% testing rate and a 49.8% test positivity rate. The clade Ib was isolated from all sequenced cases.

Note: In 2023, a total of 14,838 cases (1,665 confirmed; 13,173 suspected) and 738 confirmed deaths (CFR: 5.0%) of mpox were reported from seven AU MS: Cameroon (140 cases; 1 death), CAR (67; 2), Congo (95; 5), DRC (14,434; 728), Ghana (11; 0), Liberia (11; 0), and Nigeria (80; 2).

Response by MS/partner/Africa CDC:

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

The continental mpox incident management team continues to mobilize resources and develop guidance for mpox preparedness and response activities according to the response plan. On 17 November 2024, WHO approved the second mpox vaccine, LCI6m8, developed by the Japanese pharmaceutical company KM Biologics. The vaccine is recommended for use among children and people at high risk of exposure.

Five AU MS have either developed or are in the process of developing mpox vaccination plans. DRC, Nigeria, and Rwanda have started vaccination of targeted population. As of week 47, at least 58,000 individuals have been vaccinated in the DRC (55,000), Rwanda (2,500) and Nigeria (500).

Human Event Updates

Moderate Risk Events

Yellow fever in Africa

41 confirmed human case(s), **5** probable human case(s), **1,078** suspected human case(s)
7 human deaths (**CFR: 0.62%**)

| | | | | | |
|------------------------|--------------------|----------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Yellow fever virus | First Reported | 1-Jan-2024 | Previous Report Update | 22-Nov-2024 |
| First Occurred | 1-Jan-2024 | Country | Multiple Countries | Location | 7 MS |
| Source | Ministry of Health | GeoScope | MODERATE | Human Risk Assessment | MODERATE |
| Animal Risk Assessment | N/A | | | | |

Update to Event:

Between epidemiological weeks 1 and 46, a total of 1,124 cases (41 confirmed; 5 probable; 1,078 suspected) and seven deaths (CFR: 0.6%) of yellow fever have been reported from seven AU MS: CAR (381 cases; 1 death), Cameroon (8; 0), Congo (452; 0), Gabon (141; 0), Guinea (2; 0), South Sudan (139; 6), and Uganda (1; 0).

In epidemiological week 46, a total of 46 new cases and new death of yellow fever were reported from CAR, Congo, and Gabon.

CAR*: Since the last update (8 November 2024), the MoH reported 21 suspected cases and no new deaths of yellow fever from three regions. Cumulatively, 381 suspected cases and one death (CFR:0.3%) of yellow fever have been reported from all seven regions in the Central African Republic.

Congo: Since the last update (22 November 2024), the MoH reported 16 new cases (2 confirmed; 14 suspected) and no deaths of yellow fever from four district. Cumulatively, 452 cases (18 confirmed; 434 suspected) and no deaths have been reported from six out of the 12 districts across the country this year.

Gabon: Since the last update (22 November 2024), the MoH reported nine new suspected cases and no new deaths of yellow fever from two regions. Cumulatively, 141 cases (9 confirmed; 132 suspected) and no deaths of yellow fever have been reported from all 10 regions in Gabon.

Note: In 2023, a total of 2,951 cases (156 confirmed; 2,795 suspected) and 45 deaths (CFR: 1.3%) of yellow fever were reported from eight AU MS: Cameroon (59 cases; 6 deaths), CAR (349; 6), Congo (389; 2), Gabon (128; 0), Guinea (178; 4), Nigeria (1,819; 21), South Sudan (17; 0), and Uganda (12; 0).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to implement vector control and community engagement activities in the affected areas.

Polio virus (vaccine-derived) in Africa

167 confirmed human case(s)
0 human deaths (**CFR: 0.00%**)

| | | | | | |
|------------------------|-------------------------------|----------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Polio virus (vaccine-derived) | First Reported | 23-Feb-2024 | Previous Report Update | 22-Nov-2024 |
| First Occurred | 1-Jan-2024 | Country | Multiple Countries | Location | 15 MS |
| Source | Ministry of Health | GeoScope | MODERATE | Human Risk Assessment | MODERATE |
| Animal Risk Assessment | N/A | | | | |

Update to Event:

Between epidemiological weeks 1 and 47, a total of 10 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) have been reported from DRC (9 cases) and Mozambique (1). Additionally, 157 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported from 14 AU MS: Angola (7 cases), Benin (1), Chad (20), DRC (10), Ethiopia (14), Guinea (5), Kenya (1), Liberia (1), Niger (11), Nigeria (73), Senegal (1), Somalia (3), South Sudan (9), and Zimbabwe (1) and two confirmed cases and no deaths of circulating vaccine-derived poliovirus type 3 (cVDPV3) have been reported from Guinea.

In epidemiological week 47, a total of five new confirmed cases of cVDPV2 were reported from Chad.

Chad:** Since the last update (8 November 2024), the MoH reported seven confirmed cases cVDPV2 from NDjamena and Tandjile provinces. Cumulatively, 20 cases of cVDPV2 have been reported from six of the twenty-three provinces and NDjamena capital city in Chad this year.

Note: In 2023, a total of 133 confirmed cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from three AU MS: DRC (106 cases), Madagascar (24) and Mozambique (4) and 378 cases of cVDPV2 were reported from 20 AU MS: Benin (3), Burkina Faso (2), Burundi (3), CAR(14) Chad (55), Côte d'Ivoire (6), DRC (117), Ethiopia (1), Guinea (47), Kenya (14), Mali (11), Mauritania (1), Mozambique (1) Niger (2), Nigeria (87), Tanzania (3), Somalia (8), South Sudan (3), Zambia (1) and Zimbabwe (1).

Response by MS/partner/Africa CDC:

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

Africa CDC is conducting data validation for cholera, dengue fever, measles, diphtheria and Lassa fever. Updated data will be provided in next week's report.

*Cases of mpox in Angola, diphtheria in Nigeria and yellow fever in CAR are batch reports.

**Report of polio in Chad includes backlog cases.

- Mpox cases include all persons who have presented with symptoms consistent with the suspected case definition for mpox.

-Epidemiological week 47 covers the period of 17 - 22 November 2024

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

- 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.