

Africa CDC Epidemic Intelligence Report

Date of Issue: 10 Dec 2025

Active Events

190

New Events reported
in 2025

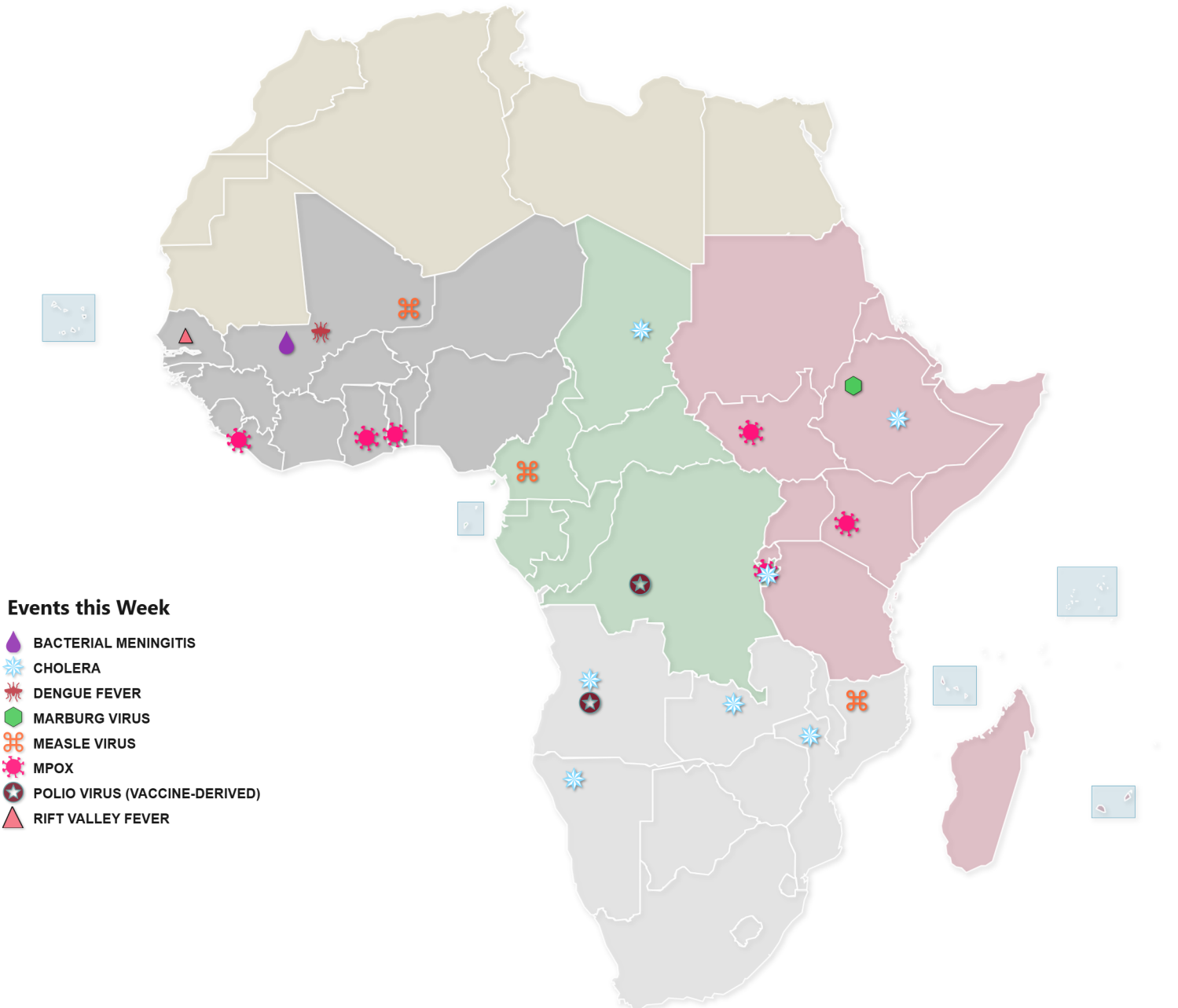
124

Events highlighted
this week

22

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.

| Event Type | Risk Level | | |
|-------------|-----------------|------------|----------------|
| | Very High (New) | High (New) | Moderate (New) |
| Human | 0 | 5 | 16 |
| 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) | Susceptible (New) | Confirmed (New) | Deaths (New) |
|---|----------------------------------|------------|-------------|---|-----------------|----------------|-------------------|-----------------|--------------|
|  Bacterial meningitis | Mali | Moderate | N/A |  | 601 (9) | 0 (0) | | 122 (2) | 0 (0) |
|  Cholera | Angola | Moderate | N/A |  | 34,559 (333) | 0 (0) | | 937 (0) | 880 (2) |
| | Burundi | Moderate | N/A |  | 0 (0) | 0 (0) | | 2,689 (52) | 11 (0) |
| | Chad | Moderate | N/A |  | 2,979 (3) | 0 (0) | | 112 (0) | 167 (0) |
| | Ethiopia | High | N/A |  | 8,304 (15) | 0 (0) | | 0 (0) | 77 (0) |
| | Mozambique | High | N/A |  | 0 (0) | 0 (0) | | 589 (58) | 5 (2) |
| | Namibia | Moderate | N/A |  | 6 (3) | 0 (0) | | 7 (4) | 0 (0) |
| | Zambia | Moderate | N/A |  | 600 (49) | 0 (0) | | 12 (0) | 9 (1) |
|  Dengue fever | Mali | Moderate | N/A |  | 3,111 (78) | 0 (0) | | 931 (34) | 0 (0) |
|  Marburg virus | Ethiopia | Very High | N/A |  | 0 (0) | 0 (0) | | 13 (1) | 8 (0) |
|  Measle virus | Cameroon | Moderate | N/A |  | 617 (9) | 0 (0) | | 2,266 (129) | 4 (0) |
| | Mali | Moderate | N/A |  | 473 (7) | 0 (0) | | 174 (1) | 0 (0) |
| | Mozambique | Moderate | N/A |  | 0 (0) | 0 (0) | | 490 (12) | 0 (0) |
|  mpox | Burundi | High | N/A |  | 5,043 (45) | 0 (0) | | 1,645 (3) | 0 (0) |
| | Ghana | Moderate | N/A |  | 4,106 (124) | 0 (0) | | 914 (34) | 4 (1) |
| | Kenya | Moderate | N/A |  | 1,956 (89) | 0 (0) | | 862 (31) | 11 (0) |
| | Liberia | High | N/A |  | 2,235 (27) | 0 (0) | | 1,376 (24) | 6 (0) |
| | South Sudan | Moderate | N/A |  | 483 (7) | 0 (0) | | 37 (7) | 0 (0) |
| | Togo | Moderate | N/A |  | 462 (8) | 0 (0) | | 90 (0) | 0 (0) |
|  Polio virus (vaccine-derived) | Angola | Moderate | N/A |  | 0 (0) | 0 (0) | | 25 (2) | 0 (0) |
| | Democratic Republic of the Congo | Moderate | N/A |  | 0 (0) | 0 (0) | | 3 (2) | 0 (0) |
|  Rift valley fever | Senegal | High | High |  | 16,818 (1,894) | 0 (0) | | 530 (30) | 31 (0) |
| | Senegal | High | High |  | | | 0 (0) | 390 (214) | 0 (0) |

Very High Risk Events

Human Event AC01559

Marburg virus in Ethiopia

13 confirmed human case(s)
8 human deaths (**CFR: 61.54%**)

| | | | | | |
|----------------|---------------|------------------------|-------------|------------------------|-----------------|
| Agent/Pathogen | Marburg virus | First Reported | 14-Nov-2025 | Previous Report Update | 14-Nov-2025 |
| First Occurred | 12-Nov-2025 | Country | Ethiopia | Location | Southern region |
| Source | Ethiopian PHI | GeoScope | LOW | Human Risk Assessment | VERY HIGH |
| | | Animal Risk Assessment | N/A | | |

Update to Event:

Since the last update (28 November 2025), the Ministry of Health (MoH) reported one new confirmed case and no new deaths of Marburg virus disease (MVD) in Ethiopia. This is a 87% decrease in the number of new cases reported since the last update. As of 5 December, 13 confirmed cases and eight deaths (CFR: 61.54) have been reported from two of twelve regions in Ethiopia. Four recoveries have been reported to date.

Response by MS/partner/Africa CDC:

The MoH and the Ethiopia Public Health Institute (EPHI) continue to issue daily updates to the general public. In addition, the EPHI has activated the Incident Management System (IMS) and developed comprehensive incident action plan for response to the MVD outbreak. The MoH deployed a multidisciplinary team of experts to the affected area to conduct detailed investigations on potential sources of infection, strengthen surveillance and infection prevention and control at health facility and community level, risk communication and community awareness activities, in collaboration with regional health authorities and partners. Frontline healthcare workers and 16 high-risk contacts have received Remdesivir. To date, over 350 contacts have been identified and are under active follow-up. A mobile laboratory has been deployed in Jinka town to reduce the turnaround time for laboratory testing and confirmation. As of 5 December 2025, 1,235 samples have been tested, of which 13 tested positive (test positivity rate: 1.05%).

Africa CDC is working with the MoH and the EPHI to support the response interventions. In addition, Africa CDC actively participates in the IMS meeting at EPHI and supported the finalization and dissemination of key MVD response tools, including the MVD standard operating procedures (SOPs), facility-based isolation form, and the case investigation SOPs for the rapid response teams. The team also supported operational activities by reviewing and filling case investigation forms received from regions and identifying all rapid response teams working in the affected area.

High Risk Events

Human Event AC30290

Rift Valley Fever in Africa

586 confirmed human case(s)
17,051 suspected human case(s)
47 human deaths (**CFR: 0.27%**)

| | | | | | |
|----------------|--------------------|------------------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Rift Valley Fever | First Reported | 26-Sep-2025 | Previous Report Update | 28-Nov-2025 |
| First Occurred | 26-Sep-2025 | Country | Multiple Countries | Location | 3 AU MS |
| Source | Ministry of Health | GeoScope | MODERATE | Human Risk Assessment | HIGH |
| | | Animal Risk Assessment | N/A | | |

Update to Event:

Since the beginning of 2025, a total of 17,637 cases (586 confirmed; 17,051 suspected) and 47 deaths (CFR: 0.27 %) of Rift Valley fever (RVF) have been reported from three African Union Member State (AU MS): Mauritania (286 cases; 15 deaths), Uganda (3; 1) and Senegal (17,348; 31).

In epidemiological week 48, a total of 1,924 new cases and no new deaths of RVF were reported from Senegal.

Senegal: Since the last update (21 November 2025), the MoH reported 1,924 cases (30 confirmed; 1,894 suspected) and no new death of RVF from eight regions. This year, a total of 17,348 cases (530 confirmed; 16,818 suspected and 31 deaths (CFR: 0.18%) of RVF was reported from eight regions in Senegal. Of the confirmed cases, males accounted for 65% and age group 20 - 25 years accounted for 20% of cases. Saint Louis region is the epicenter of this outbreak, accounting for 73% of all confirmed cases and 66% of confirmed deaths. Additionally, a total of 428 confirmed animal RVF cases were reported in Senegal.

In epidemiological week 47, a backlog of 2,988 suspected, 37 confirmed cases and no deaths of RVF were reported from Senegal.

Response by MS/partner/Africa CDC:

Senegal: The MoH continues to enhance surveillance, community sensitization and vector control measures in the affected areas.

Human Event Updates

Moderate Risk Events

Human Event AC46783

Mpox in Africa

133,971 suspected case(s)
796 human deaths (**CFR: 0.59%**)

| | | | | | |
|----------------|--------------------|------------------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Mpox | First Reported | 3-Jan-2025 | Previous Report Update | 28-Nov-2025 |
| First Occurred | 1-Jan-2025 | Country | Multiple Countries | Location | 28 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 133,971 cases of mpox, of which 40,421 (30.17 %) laboratory-confirmed have been reported from 28 AU MS. In addition, a total of 796 deaths (CFR: 0.59%) among suspected cases and 247 deaths (CFR: 0.61 %) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Angola (8 confirmed cases; 0 deaths), Burundi (1,648; 0), Cameroon* (9; 0), Central African Republic (CAR) (65; 5), Congo (78; 1), Côte d'Ivoire (79; 1), Democratic Republic of Congo** (DRC) (20,287; 99), Ethiopia (48; 1), Gambia (1; 0), Ghana (914; 4), Guinea (1,171; 5), Kenya (862; 11), Liberia (1,376; 6), Malawi (140; 1), Mali (1; 0), Morocco (2; 0), Mozambique (91; 0), Namibia (2; 0), Nigeria (414; 6), Rwanda (47; 0), Senegal (9; 0), Sierra Leone (5,442; 60), South Africa (12; 0), South Sudan (37; 0), Tanzania (213; 0), Togo*** (90; 0), Uganda (7,033; 44), and Zambia (342; 3).

In epidemiological week 48, a total of 298 new cases, of which 99 (33.22%) were laboratory-confirmed cases, and no new deaths were reported from five AU MS: Burundi, Ghana, Kenya, Liberia and South Sudan

Burundi: Since the last update (28 November 2025) the MoH reported 45 new cases, of which three were laboratory-confirmed and no new deaths of mpox from 10 health districts. This year, 5,043 cases, of which 1,648 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, 10,834 cases, of which 4,594 were laboratory- confirmed, and one death (CFR: 0.01%) 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 (28 November 2025), the Ghana Health Services reported 124 new cases of which 34 were laboratory-confirmed and one new death (CFR: 2.9%) of mpox from all 16 regions. This is a 17.9% average increase in the number of confirmed cases in the last four weeks. This year, 4,106 cases of which 914 were laboratory-confirmed, and four deaths (CFR: 0.43%) of mpox were reported from all 16 regions in Ghana. This outbreak started in October 2024, cumulatively of 4,409 cases, of which 919 were laboratory-confirmed, and four deaths (CFR: 0.43%) of mpox have been reported from all 16 regions in Ghana. A total of 4,409 samples were tested resulting in a 100% testing rate and 20.8% positivity rate. Clade II was isolated from the sequenced samples.

Kenya: Since the last update (28 November 2025), the MoH reported 31 new laboratory-confirmed cases and no new deaths of mpox from multiple counties. This is a 106% average increase in confirmed cases in the last four weeks. This year, 862 laboratory-confirmed cases and 11 deaths (CFR: 1.28%) of mpox were reported from 35 of 47 counties in Kenya. This outbreak started in July 2024. Cumulatively, 893 laboratory-confirmed and 12 deaths (CFR: 1.34%) of mpox have been reported from 35 of 47 counties in Kenya. Since July 2024, a total of 2,311 samples were tested resulting in a 38.64% positivity rate. Clade Ib was isolated from 94 sequenced samples.

Liberia: Since the last update (28 November 2025), the MoH reported 27 new cases, of which 24 were laboratory-confirmed, and no new deaths of mpox from four counties. This is an 11% average decrease in the number of confirmed cases in the last four weeks. This year, 2,235 cases, of which 1,376 were laboratory-confirmed and six deaths (CFR: 0.44%) of mpox have been reported from all the 15 counties in Liberia. Since the start of the outbreak (March 2024) a cumulative of 2,646 cases, of which 1,439 were laboratory-confirmed, and six deaths (CFR: 0.42%) of mpox have been reported from all 15 counties in Liberia. A total of 2,504 samples were tested resulting in a 94.6% testing rate and 57.5% positivity rate. Clade IIb was isolated from undefined number of sequenced samples.

South Sudan: Since the last update (28 November 2025), the MoH reported seven new laboratory-confirmed cases and no new deaths of mpox from multiple states. This is a 133% increase in confirmed cases compared to the last report. Since the beginning of this outbreak (February 2025), 483 suspected cases of which 37 were laboratory-confirmed and no deaths of mpox have been reported from four of ten states. Clade Ib was isolated from 14 sequenced samples.

****In epidemiological week 47, a backlog of two confirmed cases of mpox were reported from Cameroon***

*****In epidemiological week 47, a backlog of 1,208 cases of which 89 were laboratory-confirmed and six deaths were reported from DRC***

******Between epidemiological week 46 - 47, a backlog of 18 cases of which three were laboratory-confirmed were reported from Togo.***

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 in the affected communities

Cholera in Africa

10,175 confirmed human case(s), **47** probable human case(s), **303,657** suspected human case(s)
7,217 human deaths (CFR: **2.30%**)

| | | | | | |
|----------------|--------------------|-----------------------|------------|------------------------|--------------------|
| Agent/Pathogen | Cholera | First Reported | 1-Jan-2025 | Previous Report Update | 28-Nov-2025 |
| Country | Multiple Countries | Location | 24 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 313,879 cases (10,175 confirmed; 47 probable; 303,657 suspected) and 7,217 deaths (CFR: 2.30%) have been reported from 24 AU MS: Angola (35,496; 880 deaths), Burundi (2,689; 11), Cameroon* (11; 0), Chad (3,091; 167), Comoros (40; 0), Congo (815; 67), Côte d'Ivoire (556; 24), DRC** (67,124; 1,939), Ethiopia*** (8,304; 77), Ghana (2,870; 14), Kenya**** (677; 26), Malawi (91; 3), Mozambique (4,813; 48), Namibia (31; 1), Nigeria (22,196; 505), Rwanda (325; 0), Somalia***** (8,599; 9), South Sudan (78,034; 1,276), Sudan (72,057; 2,077), Tanzania (4,063; 45), Togo (165; 4), Uganda (136; 3), Zambia (1,095; 18), and Zimbabwe (601; 23).

In epidemiological week 48, a total of 2,100 new cases and four 30 new deaths of cholera were reported from eight AU MS: Angola, Burundi, Chad, DRC, Ethiopia, Mozambique, Namibia and Zambia

Angola: Since the last update (28 November 2025), the MoH reported 333 new suspected cases and two new deaths (CFR: 0.60%) of cholera from five provinces. This is a 11% average decrease in the number of new cases in the last four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 35,496 cases (937 confirmed; 34,559 suspected) and 880 deaths (CFR: 2.48%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 63% of all deaths. Children <15 years accounted for 37% of all cases and 32% of all deaths. Additionally, 55% of all deaths occurred at the health facilities.

Burundi: Since the last update (28 November 2025), the MoH reported 52 new confirmed cases and no new death of cholera from multiple provinces. This is a 15% average decrease in the number of new cases in the past four weeks. This year, a total of 2,689 confirmed cases and 11 deaths (CFR: 0.41%) of cholera were reported from four of eighteen provinces in Burundi. Males accounted for 50.3% and children <5 years accounted for 17.4% of all cases. Since the beginning of the outbreak (December 2022), a cumulative of 4,905 cases (4,840 confirmed; 65 suspected) and 23 deaths (CFR: 0.47%) of cholera have been reported from 14 of 18 provinces in Burundi. In comparison to the same period in 2024 (epidemiological week 1 to 48), a total of 866 confirmed cases and four deaths (CFR: 0.46%) of cholera were reported in Burundi, which is a 2-fold increase in the number of cases and a 1.75-fold increase in the number of deaths.

Chad: Since the last update (21 November 2025), the MoH reported three suspected cases and no new deaths of cholera from nine districts. Since the beginning of this outbreak (July 2025), a cumulative of 3,091 cases (112 confirmed; 2,979 suspected) and 167 deaths (CFR: 5.40%) of cholera have been reported from five of twenty-three provinces in Chad. Of the total cases, females accounted for 62%, and age groups 5 - 44 years accounted for 64.1%.

DRC: Since the last update (31 September 2025), the MoH reported 1,583 new cases and 25 new deaths (CFR: 1.58%) of cholera from 10 provinces. This is an 9.44% average increase in the number of cases in the past four weeks. This year, a total of 67,124 cases (40 confirmed; 67,084 suspected) and 1,939 deaths (CFR: 2.89%) of cholera have been reported from 12 of 26 provinces in DRC. Since the beginning of this outbreak (January 2023), a cumulative of 152,819 cases and 2,896 deaths (CFR: 1.89%) of cholera have been reported from 12 of 26 provinces in DRC.

Ethiopia: Since the last update (28 November 2025), the EPHI reported 15 new suspected cases and no new deaths of cholera from six regions. This is a 29% average decrease in the number of new cases in the last four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 8,304 suspected cases and 77 deaths (CFR: 0.92%) of cholera have been reported from seven of twelve regions in Ethiopia. In comparison to the same period in 2024 (epidemiological week 1 to 48), a total of 27,109 suspected cases and 255 deaths (CFR: 0.94%) of cholera were reported in Ethiopia, which is a 69% decrease in the number of cases and a 70% decrease in the number of deaths.

Mozambique: Since the last update (28 November 2025), the MoH reported 58 new confirmed cases and two new deaths (CFR: 3.45%) of cholera from Cabo Delgado, Nampula and Tete provinces. This is a 74% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (September 2025), a cumulative of 589 confirmed cases and five deaths (CFR: 0.85%) of cholera have been reported from three of ten provinces in Mozambique. This year, 4,813 confirmed cases and 48 deaths (CFR: 0.99%) of cholera were reported from eight of ten provinces in Mozambique. In comparison to the same period in 2024 (epidemiological week 1 to 48), a total of 8,183 confirmed cases and 17 deaths (CFR: 0.21%) of cholera were reported in Mozambique, which is a 44% decrease in the number of cases and a 40% increase in the number of deaths.

Namibia: Since the last update (28 November 2025), the MoH reported seven cases (4 confirmed; 3 suspected) with no deaths of cholera from Grootfontein District, Otjozondjupa Region. This is the second cholera outbreak reported in 2025. This year, a cumulative of 31 cases (17 confirmed; 14 suspected) and one death (CFR: 3.23%) of cholera have been reported from two (Kunene and Otjozondjupa) regions in Namibia. The last cholera outbreak in Namibia before the 2025 outbreak, occurred in 2014 with 504 cases and 16 deaths (CFR: 3.17%) reported mostly in four regions.

Zambia: Since the last update (28 November 2025), the MoH reported 49 new suspected cases and one new death (CFR: 2.04%) of cholera from six provinces. Since the beginning of this outbreak (August 2025), a cumulative of 600 suspected cases and nine deaths (CFR: 1.50%) of cholera have been reported from six of ten provinces in Zambia. This year, a cumulative of 1,095 cases (20 confirmed; 1,075 suspected) and 18 deaths (CFR: 1.64%) of cholera were reported from eight of ten provinces in Zambia. In comparison to the same period in 2024 (epidemiological week 1 to 48), a total of 20,063 confirmed cases and 612 deaths (CFR: 3.05%) of cholera were reported in Zambia, which is a 95% decrease in the number of cases and a 97% decrease in the number of deaths.

***In epidemiological week 47, a backlog of 9 cases (1 confirmed; 8 suspected) were reported from Cameroon**

****In epidemiological week 47, a backlog of 1,583 suspected cases and 25 deaths were reported from DRC.**

*****In epidemiological week 47, a backlog of 26 suspected cases were reported from Ethiopia.**

******Between epidemiological week 46-47, a backlog of 11 cases were reported from Kenya.**

*******Between epidemiological week 46 and 47, a backlog of 120 cases (3 confirmed; 117 suspected) were reported from Somalia.**

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 MS activated the emergency operation centers and deployed one health rapid response teams to conduct enhanced surveillance, risk communication, and environmental sanitation in the affected communities.

Polio (vaccine-derived) in Africa

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

| | | | | | |
|----------------|-------------------------|------------------------|--------------------|------------------------|------------|
| Agent/Pathogen | Polio (vaccine-derived) | First Reported | 1-Jan-2025 | Previous Report Update | 7-Nov-2025 |
| First Occurred | 1-Jan-2025 | Country | Multiple Countries | Location | 14 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, three confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) have been reported from Algeria (1; 0), DRC (1; 0) and Niger (1; 0). A total of 144 confirmed cases and no deaths of cVDPV2 have been reported from 11 AU MS: Angola (16 cases; 0 deaths), Benin (3; 0), Burkina Faso (1; 0), CAR (1; 0), Chad (18; 0), Djibouti (1; 0), DRC (2; 0), Ethiopia (44; 0), Niger (3; 0), Nigeria (52; 0), Somalia (1;0), and Sudan (2; 0). Five confirmed cases and no deaths of cVDPV3 have been reported from Cameroon (1; 0), Chad (2; 0) and Guinea (2; 0).

In epidemiological week 48, four new confirmed case of cVDPV2 was reported from Angola and DRC.

Angola: Since the last update (2 November 2025), the Global Polio Eradication Initiative (GPEI) reported two confirmed case and no deaths of cVDPV2 from Cuando Cubango and Huila. Cumulatively, 16 confirmed cases and no deaths of cVDPV2 have been reported from Angola in 2025. In 2024, the national oral polio vaccination (OPV3) coverage among children <1 year in Angola was 56%.

DRC: In epidemiological week 48, the GPEI reported two new confirmed cases and no deaths of cVDPV2 with onsets of paralysis on 25 October 2025 and 27 May 2023, from Tshuapa province. Cumulatively, two confirmed cases of cVDPV2 and one cVDPV1 case have been reported from two of the twenty-six provinces in DRC this year. The cVDPV2 case is linked to a virus previously detected in the country in May 2023. While strong progress has been achieved in curbing transmission of both type 1 and 2 cVDPV, this detection underscores the risk of ongoing low-level transmission continuing to pose to children in the country.

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

Dengue fever in Africa

6,096 confirmed human case(s), **156** probable human case(s), **52,233** suspected human case(s)
139 human deaths (**CFR: 0.24%**)

| | | | | | |
|----------------|--------------------|------------------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Dengue fever | First Reported | 1-Jan-2025 | Previous Report Update | 28-Nov-2025 |
| First Occurred | 1-Jan-2025 | Country | Multiple Countries | Location | 11 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 58,485 cases (6,096 confirmed; 156 probable; 52,233 suspected) and 139 deaths (CFR: 0.24%) of dengue fever have been reported from 11 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (1; 0), Kenya (1; 0), Mali (4,042; 0), Mauritania (7,280; 1), Mauritius (59; 0), Nigeria (178; 11), Senegal (408; 0), and Sudan* (43,995; 126).

In epidemiological week 48, a total of 128 (34 confirmed; 78 suspected) and no new deaths of dengue were reported from one AU MS: Mali

Mali: Since the last update (28 November 2025), the MoH reported 112 cases (34 confirmed; 78 suspected) and no new deaths of dengue fever from four of eleven districts in Mali. This is a 6.6% average increase in the number of new cases in the last four weeks. This year, a total of 4,042 cases (931 confirmed; 3,111 suspected) and no deaths of dengue fever were reported in all 11 regions in Mali. Since the beginning of this outbreak (September 2023), a cumulative of 19,134 (2,539 confirmed; 16,595 suspected) and 74 deaths (CFR: 0.38%) of dengue fever have been reported from all 11 regions in Mali.

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:

Mali: The MoH continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

Measles in Africa

11,955 confirmed human case(s), **140,589** suspected human case(s)
1,243 human deaths (**CFR: 0.81%**)

| | | | | | |
|----------------|--------------------|------------------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Measles | First Reported | 8-Jan-2025 | Previous Report Update | 28-Nov-2025 |
| First Occurred | 30-Dec-2024 | Country | Multiple Countries | Location | 20 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 152,544 cases (11,955 confirmed; 140,589 suspected) and 1,243 deaths (CFR: 0.81%) of measles have been reported from 20 AU MS: Cameroon (2,883 cases; 4 deaths), Chad (926; 1), DRC* (73,740; 1,077), Ethiopia (4,429; 22), Guinea (6,228; 6), Kenya (61; 0), Malawi (167; 0), Mali (647; 0), Mauritania (189; 0), Morocco (44,372; 95), Mozambique (490; 0), Namibia (557; 1), Nigeria (739; 0), Rwanda (218; 0), Senegal (97; 0), Somalia** (10,574; 14), South Africa*** (2,019; 0), Sudan (3,275; 22), Uganda (77; 1) and Zambia (856; 0).

In epidemiological week 48, a total of 158 new cases and no new deaths of measles were reported from three AU MS: Cameroon, Mali and Mozambique.

Cameroon: Since the last update (28 November 2025) the MoH reported 138 new cases (129 confirmed; 9 suspected) and no new deaths of measles from all ten regions. Since the beginning of this year, 2,883 cases (2,266 confirmed; 617 suspected) and four deaths (CFR: 0.14%) 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 57%. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%.

Mali: Since the last update (28 November 2025), the MoH reported eight new cases (1 confirmed; 7 suspected) and no new deaths of measles from three regions. This is a 50% increase in the number of new cases reported compared to the last update. This year, 647 cases (174 confirmed; 473 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 1,445 cases (607 confirmed; 838 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 (28 November 2025), the MoH reported 12 new confirmed cases and no new deaths of measles from six provinces. This is a 41% average increase in the number of confirmed cases in the last four weeks. Since the beginning of the outbreak (July 2025), a cumulative of 490 confirmed cases [Niassa (104), Nampula (121), Manica (17), Maputo (3), Zambezia (87), Sofala (158)] and no deaths of measles have been reported from six of 129 districts in Mozambique. In 2024, the national measles vaccination coverage (MCV1) was 44%.

*Between epidemiological week 46 and 47, a backlog of 3,186 cases and 42 deaths of measles were reported from DRC.

**In epidemiological week 47, a backlog of 373 cases (17 confirmed; 356 suspected) and no deaths of measles were reported from Somalia.

***In epidemiological week 47, a backlog of 122 confirmed cases and no deaths of measles were reported from South Africa.

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 MoH in the affected MS continue to strengthen measles surveillance and supplemental immunization activities in the affected communities

Bacterial Meningitis in Africa

183 confirmed human case(s), **1,109** suspected human case(s)
27 human deaths (**CFR: 2.09%**)

| | | | | | |
|----------------|----------------------|------------------------|--------------------|------------------------|-------------|
| Agent/Pathogen | Bacterial Meningitis | First Reported | 3-Jan-2025 | Previous Report Update | 28-Nov-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 1,292 cases (183 confirmed; 1,109 suspected) and 27 deaths (CFR: 2.09%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali* (723; 0), Togo (47; 7) and Zambia (83; 0).

In epidemiological week 48, a total of 11 new cases and no new deaths of bacterial meningitis were reported from Mali.

Mali: Since the last update (21 November 2025), the MoH reported 11 new cases (2 confirmed; 9 suspected) and no new deaths of bacterial meningitis from six regions. This is a 5.5% increase in the number of cases in the last four weeks. Cumulatively, 723 cases (122 confirmed; 601 suspected) and no deaths of bacterial meningitis have been reported from all eleven regions in Mali this year. The bacteria isolated from the confirmed cases include; *Streptococcus pneumoniae* (55), *Neisseria meningitidis* W135 (24), *Haemophilus influenzae non-b* (25), *Haemophilus influenzae b* (9) and *Haemophilus influenzae untyped* (9). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

***In epidemiological week 47, a backlog of 18 suspected cases were reported from Mali.**

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:

Mali: 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.

-Epidemiological week 48 covers a period from 24 - 30 November 2025.

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

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

-The Marburg update has been revised to reflect only confirmed cases

-CFR are calculated using confirmed cases and deaths among confirmed cases 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.